



# Lu-177 - A Noble Tracer: Future of Personalized Radionuclide Therapy

Narvesh Kumar<sup>1</sup>, Rani Kunti R Singh DNB<sup>2</sup>, Deepanksha Dutta<sup>1</sup>, Subhash Chandra Kheruka<sup>1\*</sup>

<sup>1</sup>Department of Nuclear Medicine, SGPGIMS, India

<sup>2</sup>Department of Radiodiagnosis, Vivekananda Polyclinic and Institute of Medical Sciences, India

## Abstract

Radionuclide therapy using radiopharmaceuticals is in existence for over sixty years. Iodine-131 remains the work-horse for the treatment of thyroid cancer due its efficacy and ease of administration. Lutetium-177 (Lu-177) is one of the most promising targeted radionuclides therapy agents. <sup>177</sup>Lu (half-life of 6.67 days) decays into the stable Hafnium-177 (<sup>177</sup>Hf). It emits beta radiation (maximum energy of 498 keV) and gamma rays of 208 and 113 keV. Owing to its beta as well as gamma ray emission, <sup>177</sup>Lu is a near-to-ideal 'theranostic' radionuclide. In India the potential of <sup>177</sup>Lu in designing agents for targeted radiotherapy was initially realized in 2000, in the Radiopharmaceuticals Division, Bhabha Atomic Research Centre (BARC). Now clinical grade <sup>177</sup>LuCl<sub>3</sub> is commercially supplied by BARC, to nuclear medicine centers all over India. At our institute, we have also experienced good results of PRRT with <sup>177</sup>Lu- DOTA-NOC in well-differentiated inoperable and metastatic neuroendocrine tumors. Dazed by the above results, we are pushing the efforts for the utilization of <sup>177</sup>Lu -PSMA therapy in patients with metastatic prostate cancer.

## Main Text

Radionuclide therapy using radiopharmaceuticals is in existence for over sixty years. Iodine-131 remains the work-horse for the treatment of thyroid cancer due its efficacy and ease of administration. Apart from the tumor therapy, targeted radionuclide therapy is also being used in certain other diseases as bone pain palliation, loco regional applications for treatment of liver cancer by Trans Arterial Radioembolisation (TARE) and Radiosynovectomy for patients with different types of arthritis. The development of new and improved approaches for targeted radionuclide therapy is currently one of the most focused areas of radiopharmaceutical research. Recent advances in this area have lead to the development of receptor-avid and immune-derived molecular radiopharmaceuticals as well as other new therapeutic radionuclides. Lutetium-177 is one of the most promising targeted radionuclides therapy agents. The first publication on the use of <sup>177</sup>Lu for radiopharmaceuticals development was in 1988 by Keeling et al. [1] on the uptake of <sup>177</sup>Lu on hydroxyapatite particles. In the year 1991, radio labeling of CC-49, a murine monoclonal antibody that recognized the tumor associated glycoprotein 7 (TAG-72) with <sup>177</sup>Lu for the development of a radio immunotherapeutic agent, was tried [2], Later on, many papers were published to describe the labeling of Lu-177 with different radiopharmaceuticals [3], like in 1998 for the preparation of <sup>177</sup>Lu-EDTMP for bone pain palliation [3], In 2001, for the preparation of <sup>177</sup>Lu-DOTATATE and its clinical use in patients of metastatic neuroendocrine tumors [4] and the synthesis of a <sup>177</sup>Lu labeled vitronectin receptor antagonist peptide, RGD [5]. International Atomic Energy Agency (IAEA) has initiated two Coordinated Research Projects (CRPs), with the objective to enhance the production of <sup>177</sup>Lu and the development of <sup>177</sup>Lu radiopharmaceuticals [6]. These projects accelerate the development and different type of <sup>177</sup>Lu based radiopharmaceuticals. Now targeted therapy using <sup>177</sup>Lu radiopharmaceuticals is one of the fastest growing branches of therapeutic nuclear medicine [7-13]. For the wide use of radiopharmaceuticals, it is mandatory to carefully consider the choice of the radionuclides along with the vector molecules, for suitable pharmacokinetic properties and adequate therapeutic efficacy. An ideal radionuclide for therapy should have suitable nuclear decay characteristics, high radionuclide purity and specific activity in production, low production cost and comfortable delivery logistics. Among the various radionuclides suitable for radionuclide therapy, <sup>177</sup>Lu has emerged as one of the ideal therapeutic agents with suitable imaging and cytotoxic properties. <sup>177</sup>Lu (half-life of 6.67 days) decays into the stable Hafnium-177 (<sup>177</sup>Hf). It emits beta radiation (maximum energy of 498 keV) and gamma rays of 208 and 113 keV with 10%

## OPEN ACCESS

### \*Correspondence:

Subhash Chandra Kheruka,  
Department of Nuclear Medicine,  
Vivekananda Polyclinic and Institute  
of Medical Sciences, Lucknow, India,  
Tel: +91- 9415781342; Fax: +91- 522-  
2494625;

E-mail: skheruka@yahoo.com

Received Date: 18 Jan 2017

Accepted Date: 23 Mar 2017

Published Date: 24 Mar 2017

### Citation:

Kumar N, Rani Kunti R Singh DNB,  
Dutta D, Kheruka SC. Lu-177 - A  
Noble Tracer: Future of Personalized  
Radionuclide Therapy. Clin Oncol.  
2017; 2: 1249.

Copyright © 2017 Kheruka SC. This is an open access article distributed under the Creative Commons Attribution License, which permits unrestricted use, distribution, and reproduction in any medium, provided the original work is properly cited.

and 6% abundance, respectively [14]. The production of  $^{177}\text{Lu}$  requires a very high thermal neutron capture cross-section of the target  $^{176}\text{Lu}$  [ $^{176}\text{Lu}$  (n, $\gamma$ )  $^{177}\text{Lu}$  ( $\sigma = 2060$  barns)], thus making it an excellent radionuclide for labeling with different pharmaceuticals. Its cross-section requirement is highest among all (n, $\gamma$ ) produced radionuclides used for therapy now a days. In the long run, the cost of this radionuclide is expected to decrease significantly with the entry of more producers and clients into the market. The long half-life of  $^{177}\text{Lu}$  also provides logistic advantage for facilitating supply to places far away from the production site. Owing to its beta as well as gamma ray emission,  $^{177}\text{Lu}$  is a near-to-ideal 'theranostic' radionuclide. By administration of sub-therapeutic activity of the  $^{177}\text{Lu}$ -based radiopharmaceutical, successful preclinical dosimetric studies have been performed in few patients that have helped in studying the pharmacokinetics of the radiopharmaceutical [15]. This aids in tracing the initial localization of the labeled radiopharmaceutical and subsequently post therapy imaging. In India the potential of  $^{177}\text{Lu}$  in designing agents for targeted radiotherapy was initially realized in 2000, in the Radiopharmaceuticals Division, Bhabha Atomic Research Centre (BARC). The first trial to produce  $^{177}\text{Lu}$  from natural  $\text{Lu}_2\text{O}_3$  target was carried out in 2000; subsequently the production of high specific activity  $^{177}\text{Lu}$  from enriched target was tried in 2001. For carrying out research on preparation of  $^{177}\text{Lu}$ -labeled agents for receptor-mediated targeted radiotherapy, indigenous sourcing of the isotope in high specific activity and adequate radionuclide purity became a necessity. As a result of the extensive research on standardizing the production methodology of this isotope with high specific activity, clinical grade  $^{177}\text{LuCl}_3$  is commercially supplied by Radiopharmaceuticals Division, BARC, to nuclear medicine centers all over India. As per the need,  $^{177}\text{Lu}$  can be produced with different specific activities. High specific activity of  $^{177}\text{Lu}$  is necessary to produce receptor-specific radionuclide therapy agents, which target limited number of receptors over-expressed in tumors, while low to medium specific activity of  $^{177}\text{Lu}$  is needed to produce non-targeted radionuclide therapy agents, like the ones for bone pain palliation ( $^{177}\text{Lu}$ -EDTMP) and radiation synovectomy. Extensive research on utilizing indigenously produced  $^{177}\text{Lu}$  has unraveled its immense potential in radio therapeutic applications, and led to development of agents like  $^{177}\text{Lu}$ -DOTMP,  $^{177}\text{Lu}$ -EDTMP for palliative care of bone pain due to skeletal metastases and  $^{177}\text{Lu}$ -DOTATOC,  $^{177}\text{Lu}$ -DOTATATE, or  $^{177}\text{Lu}$ -DOTANOC for the treatment of well-differentiated neuroendocrine malignancies.  $^{177}\text{Lu}$  based agents also find use in radiation synovectomy of small/medium-size joints and targeted therapy of a variety of other malignant disorders when labeled with peptides like substance P, Bombesin etc. Aforementioned, the results of  $^{177}\text{Lu}$ -DOTA-TAE and  $^{177}\text{Lu}$ -DOTA-TOC therapies in the well differentiated neuroendocrine tumors are overwhelming and encouraging. At our institute, we have also experienced good results of PRRT with  $^{177}\text{Lu}$ -DOTA-NOC in well-differentiated inoperable and metastatic neuroendocrine tumors. The therapy was given along with reno-protective amino acid infusion (European association of nuclear medicine guidelines) and before the administration, the marrow, renal and liver function of the patients was evaluated, to be enrolled for the therapy. The quality control of the  $^{177}\text{Lu}$ -DOTA-NOC was done each time before injecting in the patient. Out of 5 patients with metastatic and inoperable Gastroenteropancreatic Neuro Endocrine Tumors (GEP-NET), carcinoids and gastrinoma, marked reduction in the serum gastrin, serum chromogranin and urinary 5-HIAA (Hydroxyindoleacetic acid) levels were noted with significant improvement in the Quality of

Life status, according to the internationally approved European Organization Of Research and Treatment of Cancers (EORTC) quality of Life (QoL) score. No therapy is devoid of the adverse effects and the 'appropriate use' of the any radionuclide administration is a must in the management of a patient. In our study, transient thrombocytopenia was the most common hematological derangement associated with the PRRT. The thrombocytopenia was more severe in those with skeletal metastasis, due to higher marrow radiation dose. Dazed by the above results, we are pushing the efforts for the utilization of  $^{177}\text{Lu}$ -PSMA therapy in patients with metastatic prostate cancer. The role of  $^{177}\text{Lu}$ -PSMA has been successfully illustrated in the published literature [16,18]. At our institute, the patients with known metastatic carcinoma prostate evaluated with the sensitive  $^{68}\text{Ga}$ -PSMA study and adequate marrow and renal function will be enrolled in the therapy with  $^{177}\text{Lu}$ -PSMA. In summary  $^{177}\text{Lu}$  has been pursued with great interest for therapy in many countries all over the world, and the pioneer works have been published from Europe (Netherlands, Germany, Italy, Switzerland) in patients of well-differentiated neuroendocrine tumors with  $^{177}\text{Lu}$ -DOTA-TATE. This has encouraged other countries, including India to have a strong program on  $^{177}\text{Lu}$ . The beginning in clinical deployment of this isotope for treating patients has now grown and the demand of this isotope will multiply several folds in near future. From the studies reported in the past 10-15 years,  $^{177}\text{Lu}$ -DOTATATE can be seen to be the most effective PRRT for medium sized and inoperable lesions of well-differentiated neuroendocrine tumors. It is considered to have a great potential in future for use in therapeutic radiopharmaceuticals. Efforts and research to prepare and test a variety of molecules labeled with  $^{177}\text{Lu}$  are being pursued for two decades in different countries and it is expected that a few of them will be suitable for deployment in clinics for the benefit of patients.

## References

- Keeling AA, Vaughan ATM. Factors influencing the adsorption of lutetium-177 on hydroxyapatite. *Nucl Med Biol.* 1988;15:489-92.
- Schlom J, Siler K, Milenic DE, Eggenberger D, Colcher D, Miller LS, et al. Monoclonal antibody-based therapy of a human tumor xenograft with a  $^{177}\text{Lu}$ -labeled immunoconjugate. *Cancer Res.* 1991;51:2889-96.
- Ando A, Ando I, Tonami N, Kinuya S, Kazuma K, Kataiwa A, et al.  $^{177}\text{Lu}$ -EDTMP: a potential therapeutic bone agent. *Nucl Med Commun.* 1998;19:587-91.
- Kwekkeboom DJ1, Bakker WH, Kooij PP, Konijnenberg MW, Srinivasan A, Erion JL, et al. [ $^{177}\text{Lu}$ -DOTA-Tyr3]octreotate: comparison with [ $^{111}\text{In}$ -DTPA]octreotide in patients. *Eur J Nucl Med.* 2001;28:1319-25.
- Liu S, Cheung E, Ziegler MC, Rajopadhye M, Edwards DS.  $^{90}\text{Y}$  and  $^{177}\text{Lu}$  labeling of a DOTA-conjugated vitronectin receptor antagonist useful for tumor therapy. *Bioconjugate Chem.* 2001;12:559-58.
- International Atomic Energy Comparative evaluation of therapeutic radiopharmaceuticals. 2006.
- Chakraborty S, Das T, Unni PR, Sarma HD, Samuel G, Banerjee S, et al.  $^{177}\text{Lu}$  labeled polyaminophosphonates as potential agents for bone pain palliation. *Nucl Med Commun.* 2002;23:67-74.
- Das T, Chakraborty S, Unni PR, Sarma HD, Samuel G, Banerjee S, et al.  $^{177}\text{Lu}$  labeled cyclic polyaminophosphonates as potential agents for bone pain palliation. *Appl Radiat Isot.* 2002;57:177-84.
- Pillai MR1, Chakraborty S, Das T, Venkatesh M, Ramamoorthy N. Production logistics of  $^{177}\text{Lu}$  for radionuclide therapy. *Appl Radiat Isot.* 2003;59:109-18.

10. Pillai MRA, Venkatesh M, Banerjee S. Development of radioactively labeled cancer seeking biomolecules for targeted therapy. In: Labelling techniques of biomolecules for targeted radiotherapy. IAEA TECDOC. 2003;107-22.
11. Banerjee S, Chakraborty S, Das T, Kothari K, Samuel G, Venkatesh M, et al.  $^{177}\text{Lu}$ -DOTMP,  $^{153}\text{Sm}$ -DOTMP,  $^{175}\text{Yb}$ -EDTMP and  $^{186/188}\text{Re}$ -CTMP: novel agents for bone pain palliation and their comparison with  $^{153}\text{Sm}$ -EDTMP. BARC Newsletter. 2005;22-37.
12. Mathe D, Balogh L, Polyak A, Keraly R, Pawlak D, Zaknun J. Multi-species animal investigation on biodistribution, pharmacokinetics and toxicity of  $^{177}\text{Lu}$ -EDTMP formulation. Nucl Med Biol. 2010; 37:215-26.
13. International Atomic Energy Agency Preparation and quality control of  $^{177}\text{Lu}$ -DOTATATE for targeted therapy. In: Comparative evaluation of therapeutic radiopharmaceuticals. IAEA Technical Report Series. 2007;458.
14. Ahmadzadehfar H, Rahbar K, Kürpig S, Bögemann M, Claesener M, Eppard E, et al. Early side effects and first results of radioligand therapy with  $^{177}\text{Lu}$ -DKFZ-617 PSMA of castrate-resistant metastatic prostate cancer: a two-centre study. EJNMMI Research. 2015;5:36.
15. Baum RP, Kulkarni HR, Schuchardt C, Singh A, Wirtz M, Wiessalla S, et al.  $^{177}\text{Lu}$ -Labeled Prostate-Specific Membrane Antigen Radioligand Therapy of Metastatic Castration-Resistant Prostate Cancer: Safety and Efficacy. J Nucl Med. 2016;57:1006-13.
16. Dvorakova Z, Henkelmann R, Lin X, Türler A, Gerstenberg H. Production of  $^{177}\text{Lu}$  at the new research reactor FRM-II: Irradiation yield of  $^{176}\text{Lu}$ / $^{177}\text{Lu}$ . Appl Radiat Isot. 2008;66:147-51.
17. Lassmann M, Eberlein U. Radiation Dosimetry Aspects of ( $^{177}\text{Lu}$ ). Curr Radiopharm. 2015;8:139-44.
18. Bal C, Arora G, Kumar P, Damle N, Das T, Chakraborty S, et al. Pharmacokinetic, Dosimetry and Toxicity Study of  $^{177}\text{Lu}$ -EDTMP in Patients: Phase 0/I study. Curr Radiopharm. 2016;9:71-84.