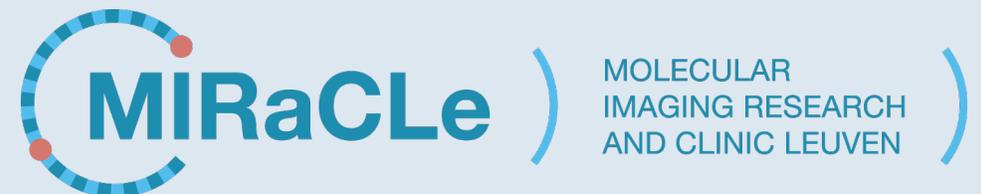


# Imaging of alpha emitters

**Michel Koole**

PRISMAP June 2022

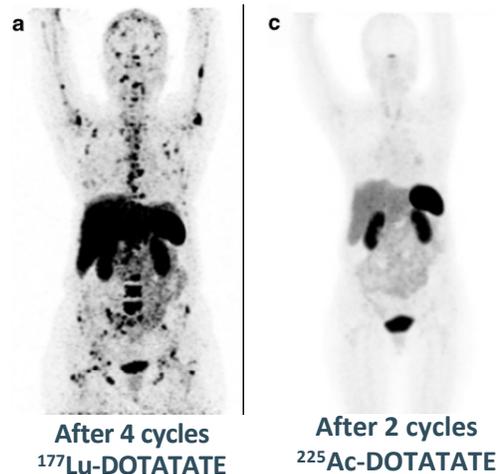


# Targeted Alpha Therapy (TAT)

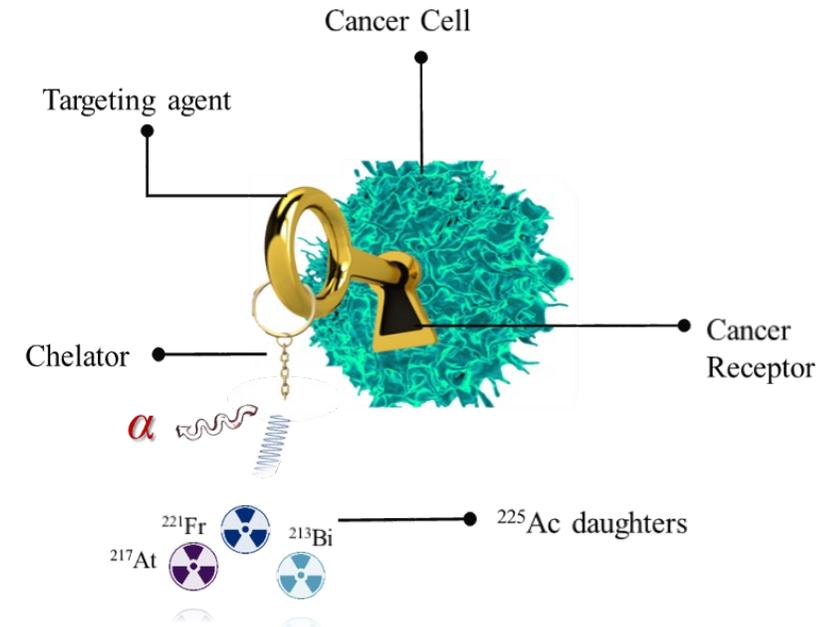
- Short range within tissue
- High LET
- DNA damage by DSB

- Biological clearance
- Organ affinity
- Recoil daughter effect  
relocation of daughters => side effects (Toxicity)

TαT as adjuvant therapy to overcome resistance to treatments using β-emitters



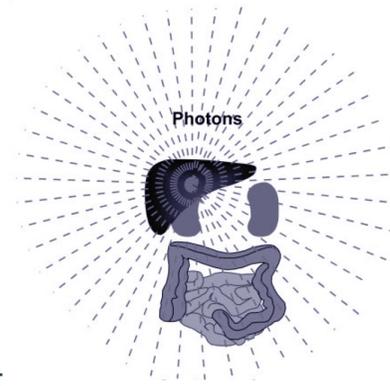
Eur J Nucl Med Mol Imaging 2020;47:934-946 S. Ballal et al.



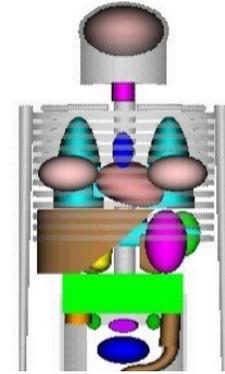
# Imaging for dose verification

## MIRD formalism

- Source-target organs
- S values determined by Monte Carlo radiation energy transport calculations using reference anatomy (simple geometry or voxel model)



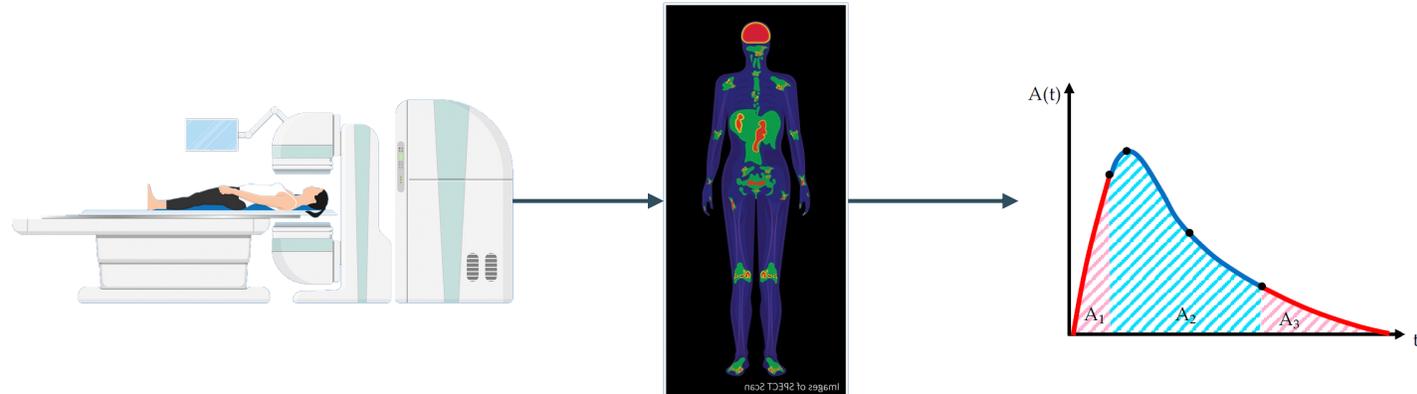
Electrons/ $\alpha$ -particles



$$D(r_T) = \sum_{r_S} \tilde{A}(r_S) S(r_T \leftarrow r_S) \quad S(r_T \leftarrow r_S)_{pa} = \frac{M_{ref}(r_T)}{M_{pat}(r_T)} \cdot S(r_T \leftarrow r_S)_{ref}$$

$$\tilde{A}(r_S) = \int_0^{\infty} A(r_S, t) dt \quad \text{time-integrated activity}$$

- ⇒ temporal sampling of tissue/organ uptake with an appropriate number of time points
- ⇒ Imaging?

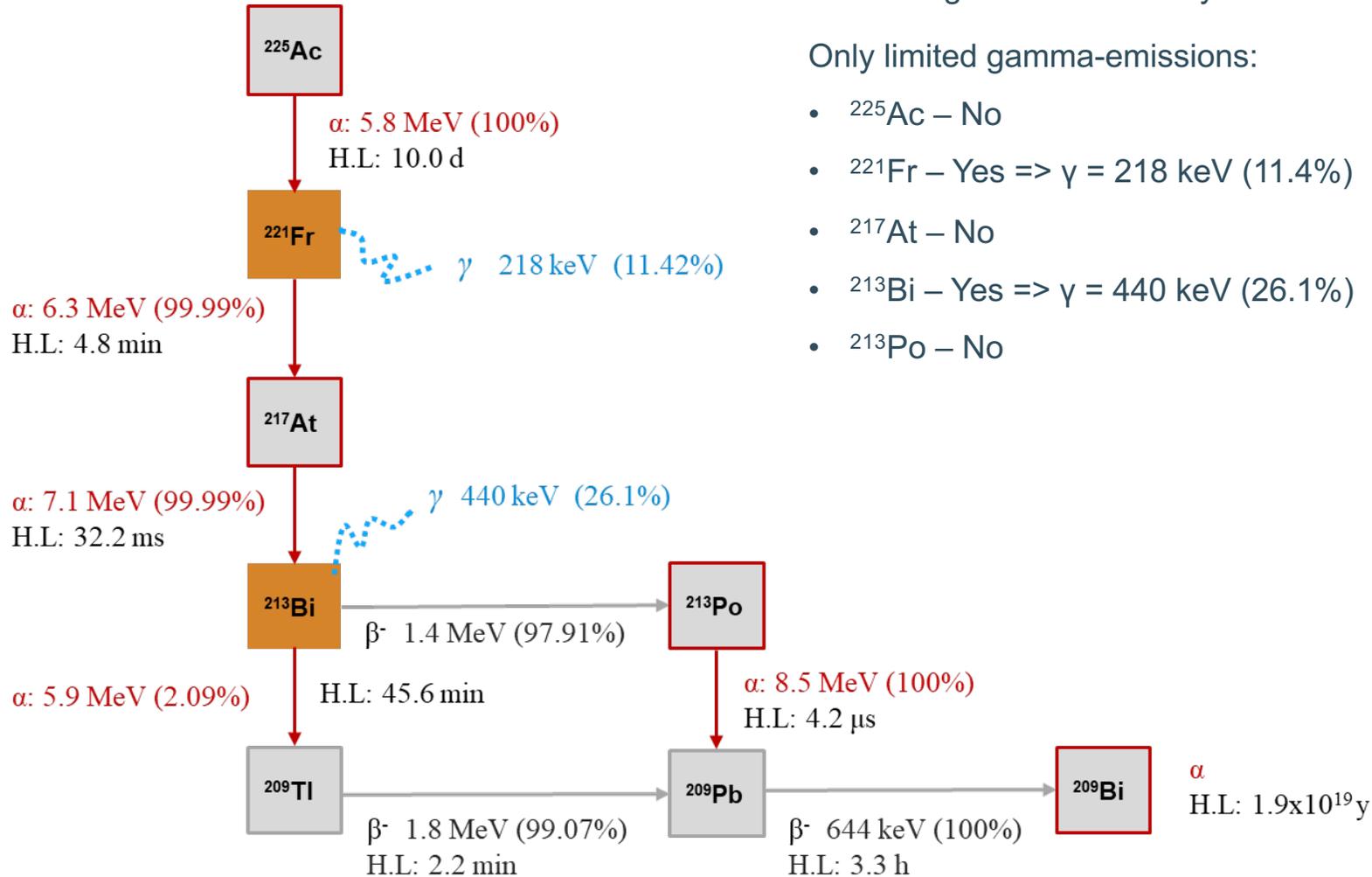


# $^{225}\text{Ac}$ quantification

$^{225}\text{Ac}$ : long half life of 10 days with emission of 4 alpha particles in the decay chain but ...

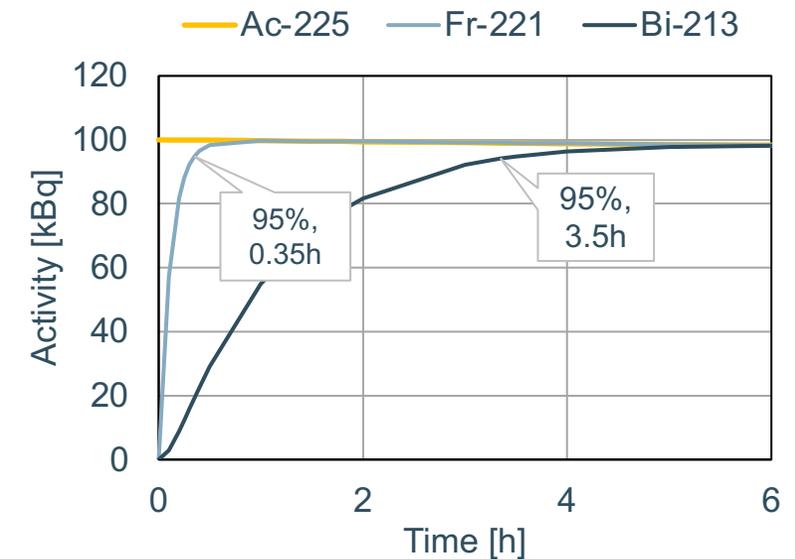
Only limited gamma-emissions:

- $^{225}\text{Ac}$  – No
- $^{221}\text{Fr}$  – Yes  $\Rightarrow \gamma = 218 \text{ keV}$  (11.4%)
- $^{217}\text{At}$  – No
- $^{213}\text{Bi}$  – Yes  $\Rightarrow \gamma = 440 \text{ keV}$  (26.1%)
- $^{213}\text{Po}$  – No



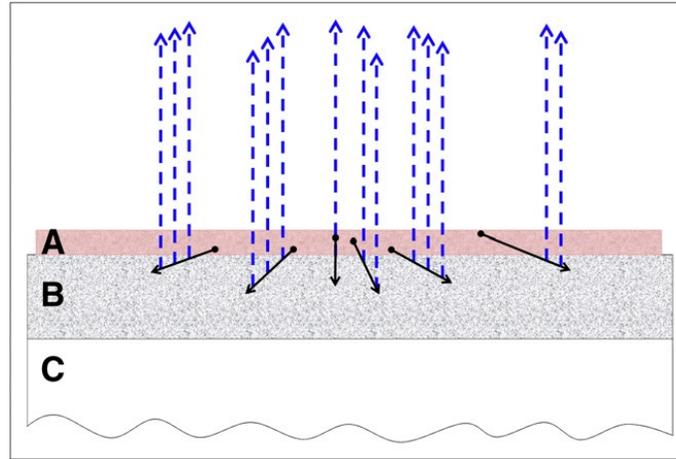
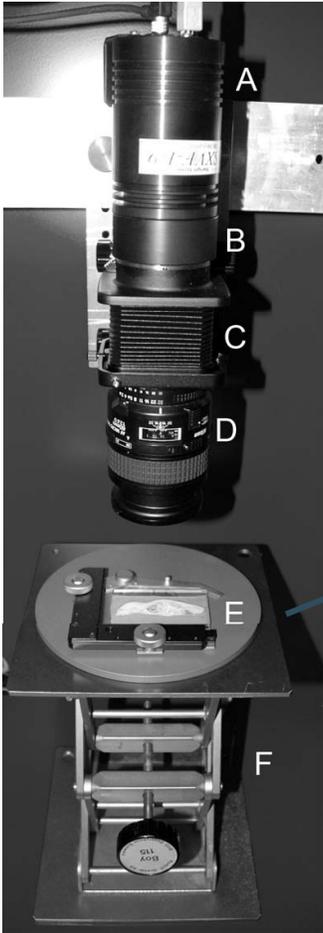
Secular Equilibrium ( $T_{\text{daughter}} \ll T_{\text{mother}}$ )

$$A_d = A_m$$



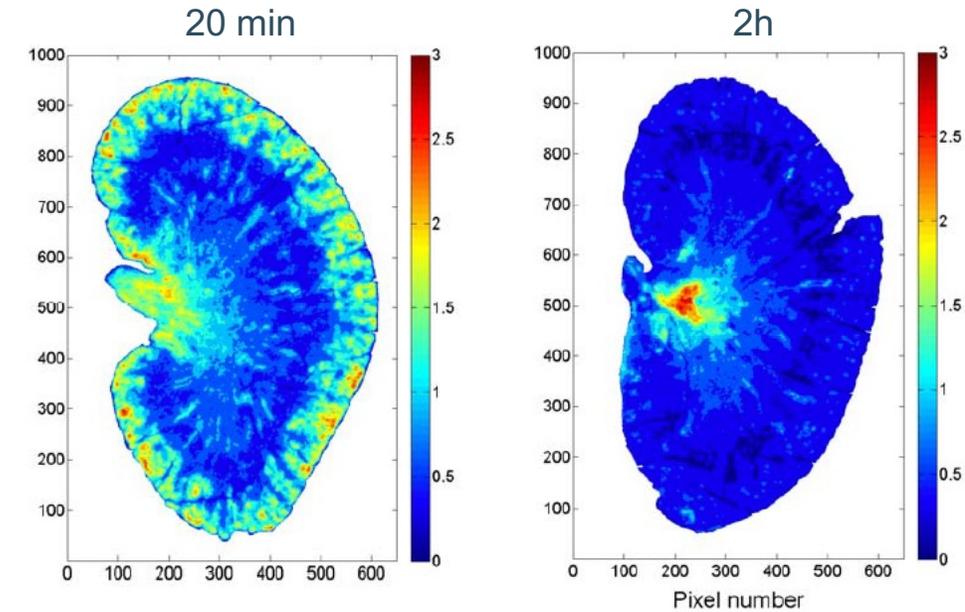
# Preclinical

## ex vivo $\alpha$ -camera (autoradiography)



Cryosections (A) placed on scintillating layer (B) coated on clear polyester sheet (C)

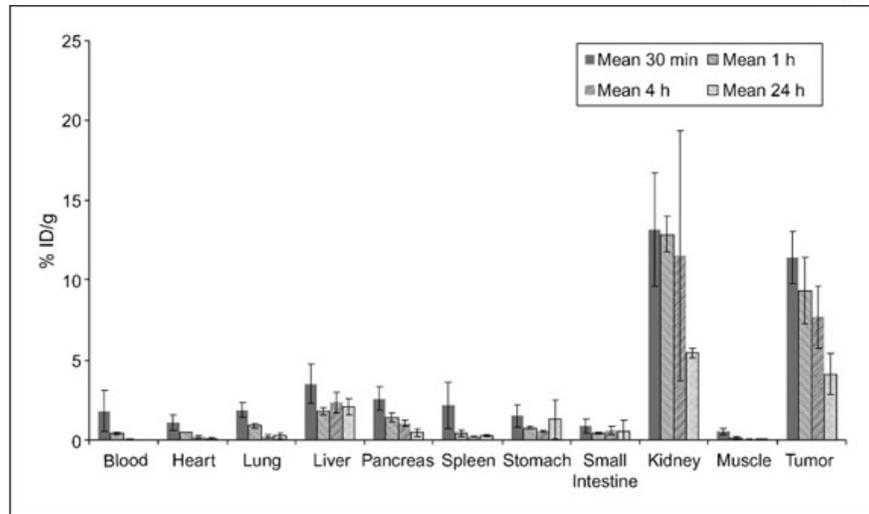
The  $\alpha$ -camera, Back and Jacobsson, JNM 2010



$^{211}\text{At}$ -IgG Trastuzumab uptake in kidneys

# Preclinical

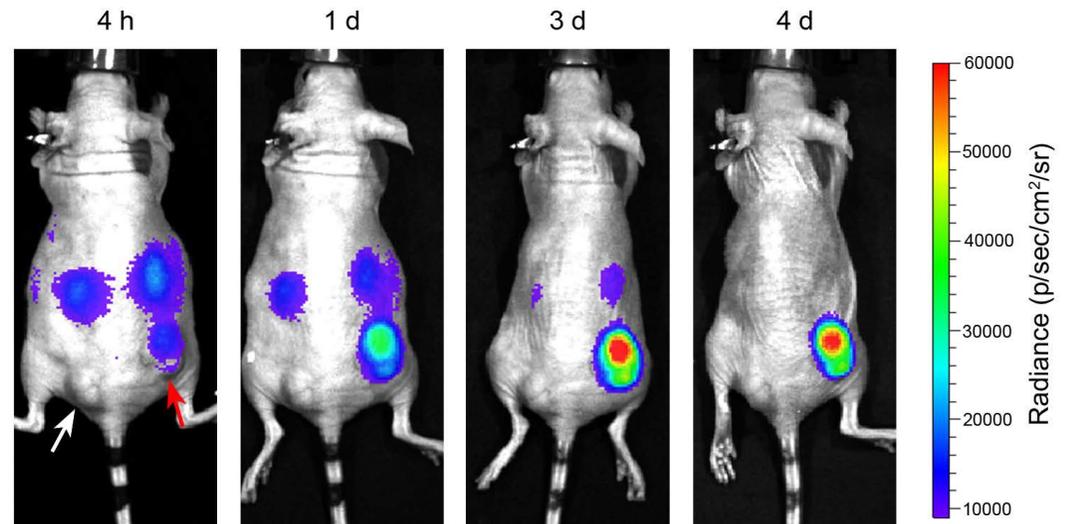
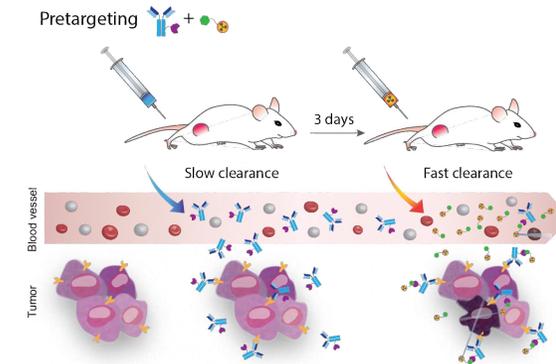
## Ex vivo gamma counter measurements of organ uptake (%ID)



Miederer et al. AACR. June 2008

## In vivo Cerenkov imaging

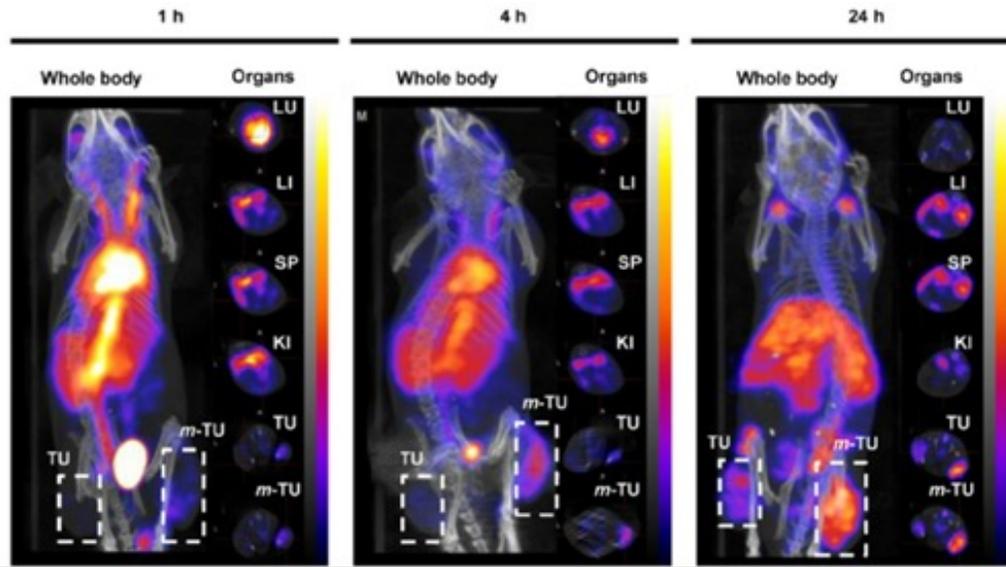
5B1-TCO +  $^{225}\text{Ac}$ -DOTA-PEG<sub>7</sub>-5B1



Poty et al. Clinical Cancer Research, 2019.

# Preclinical in vivo $\mu$ SPECT imaging

$^{111}\text{In}$



Jie Bai et al. THNO 2016;6,3:342-356

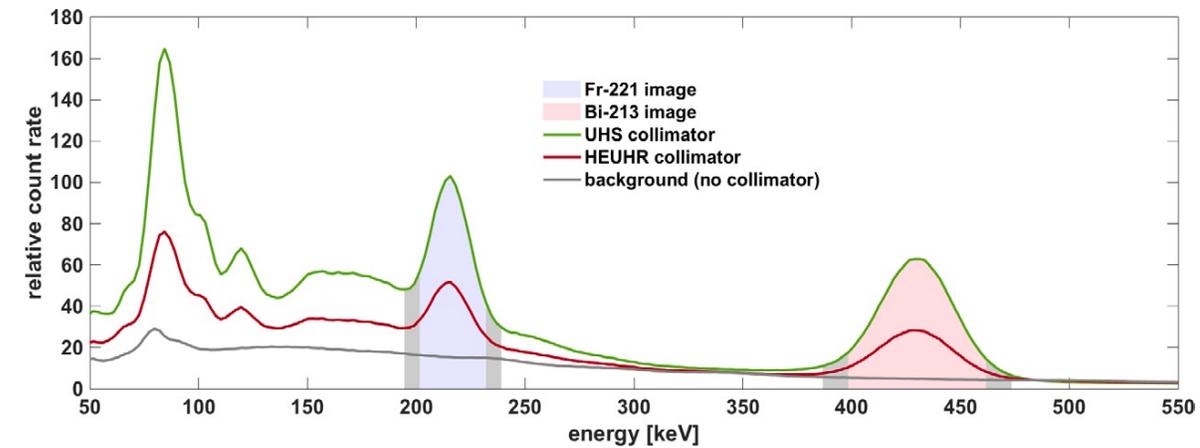
=> Translational potential

$^{225}\text{Ac}$

VECTor (MILabs)

Collimator  
UHS & HEUHR

Crystal thickness  
3/8"

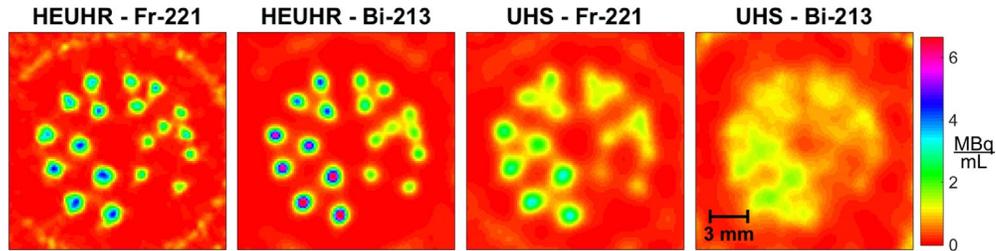


Robertson et al., Phys. Med. Biol. 2017

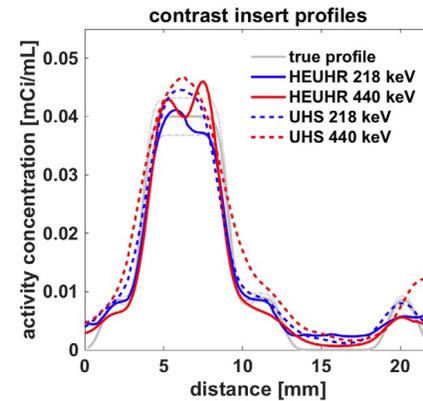
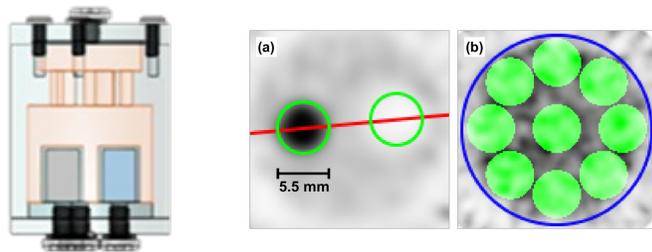
Phantom	Total activity (MBq)	Bed Positions	Collimator	Time per bed position (min)	Counts (millions)
Contrast, noise, uniformity	$2.77 \pm 0.22$	36	HEUHR	40	$^{221}\text{Fr}$ 4.34
					$^{213}\text{Bi}$ 8.37
			UHS	40	$^{221}\text{Fr}$ 27.30
					$^{213}\text{Bi}$ 101.07
Resolution	$1.79 \pm 0.14$	18	HEUHR	80	$^{221}\text{Fr}$ 5.23
					$^{213}\text{Bi}$ 9.53
			UHS	40	$^{221}\text{Fr}$ 15.98
					$^{213}\text{Bi}$ 43.25
Chromatography Column	$0.24 \pm 0.02$	1	HEUHR	60	$^{221}\text{Fr}$ 0.15
					$^{213}\text{Bi}$ 0.23

Energy window settings:

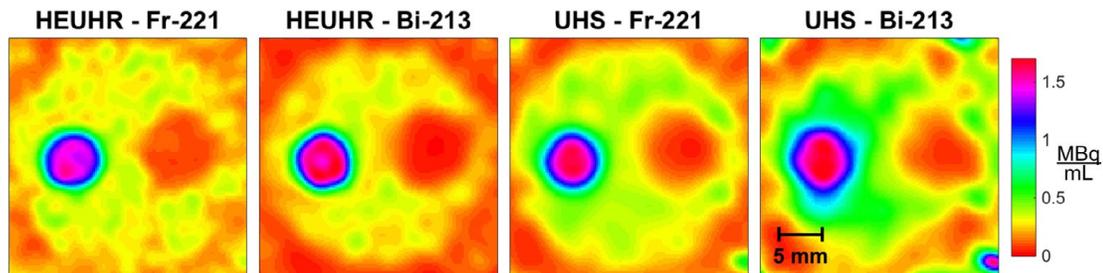
- 15% photopeak window
  - 3% side windows
- 0.4 mm voxelsize



Resolution Phantom ( $\varnothing$  0.95 - 1.7 mm)



Collimator	Image	Contrast recovery hot-warm (%)	Contrast recovery warm-cold (%)	Noise (%)	Background variability (%)
HEUHR	$^{221}\text{Fr}$	84.5	66.5	15	7
	$^{213}\text{Bi}$	83	86.8	25	8
UHS	$^{221}\text{Fr}$	77	75.3	17	7
	$^{213}\text{Bi}$	73	68.7	29	15
Ideal value		100	100	0	0

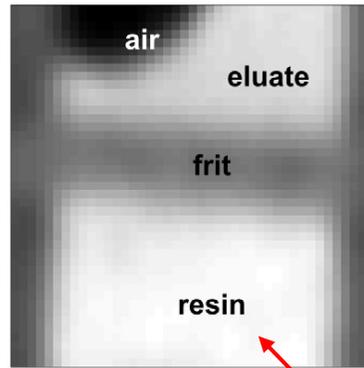
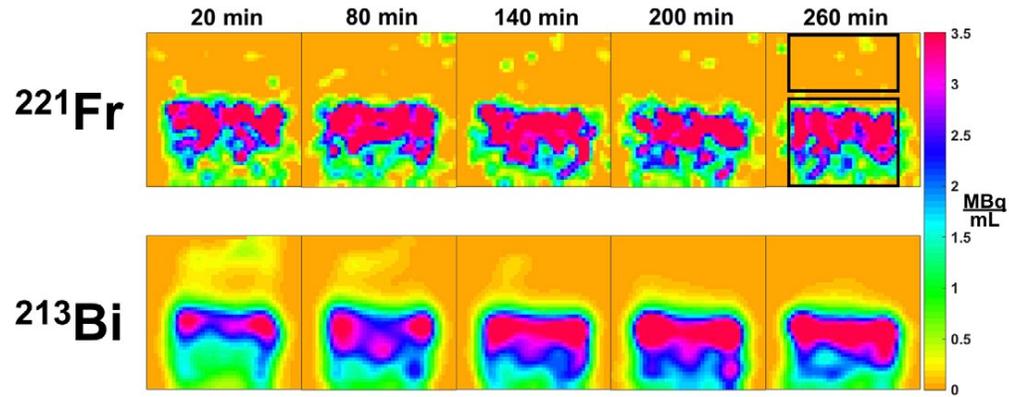


Robertson et al., Phys. Med. Biol. 2017

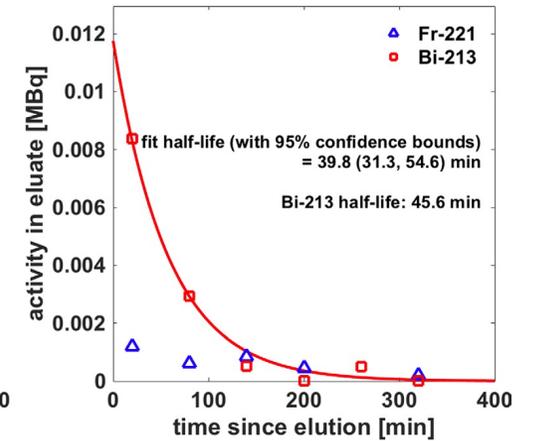
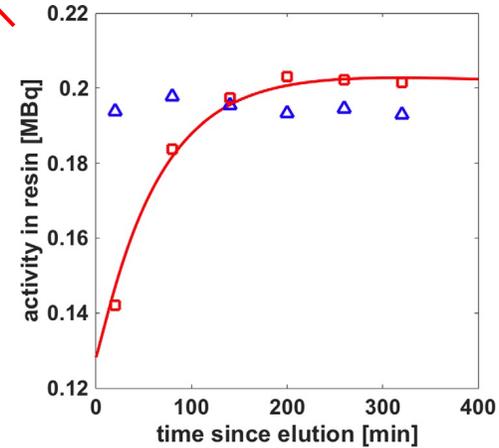
# Preclinical

## Feasibility study

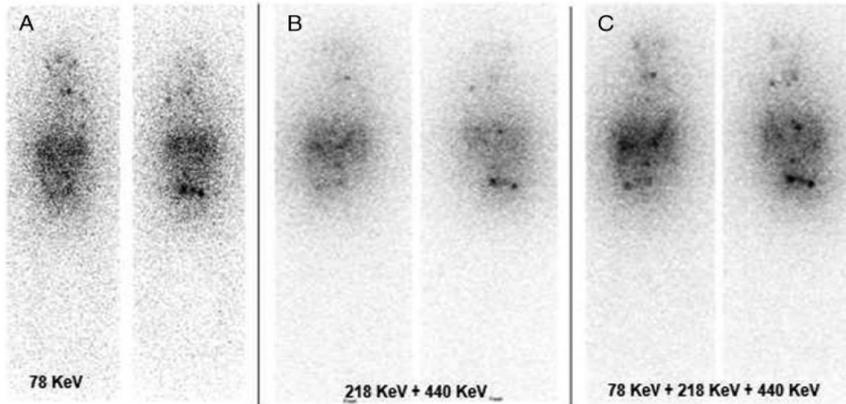
- Chromatography to isolate  $^{213}\text{Bi}$  from  $^{225}\text{Ac}$
- Dynamic imaging using  $^{221}\text{Fr}$  and  $^{221}\text{Bi}$  EW



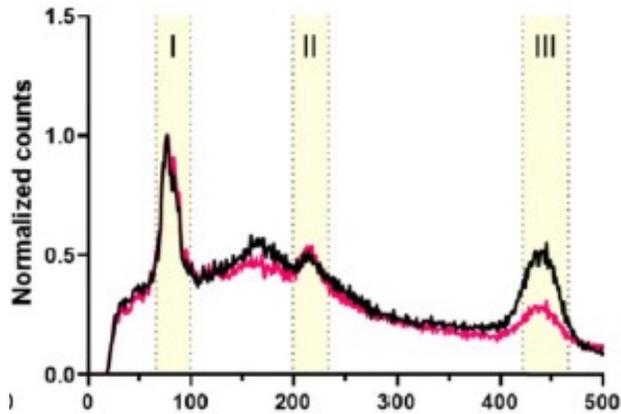
$^{225}\text{Ac}$   
(non-SEq)



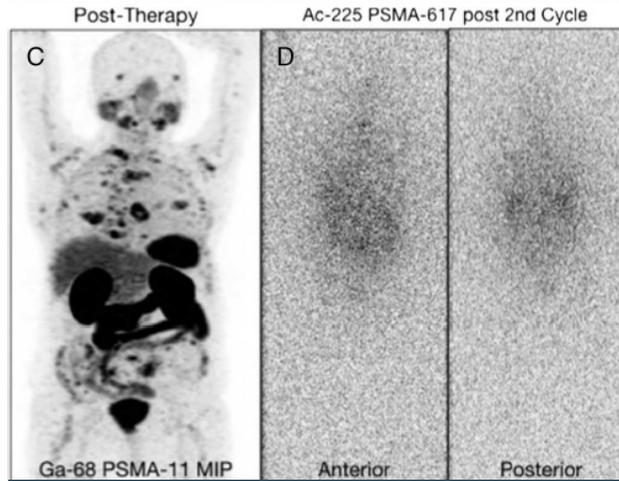
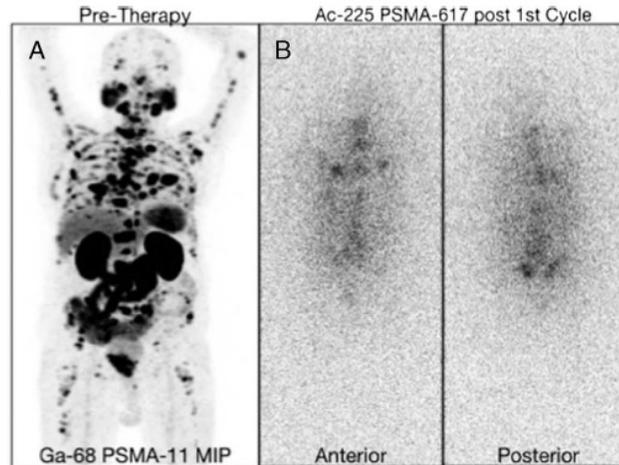
# Clinical



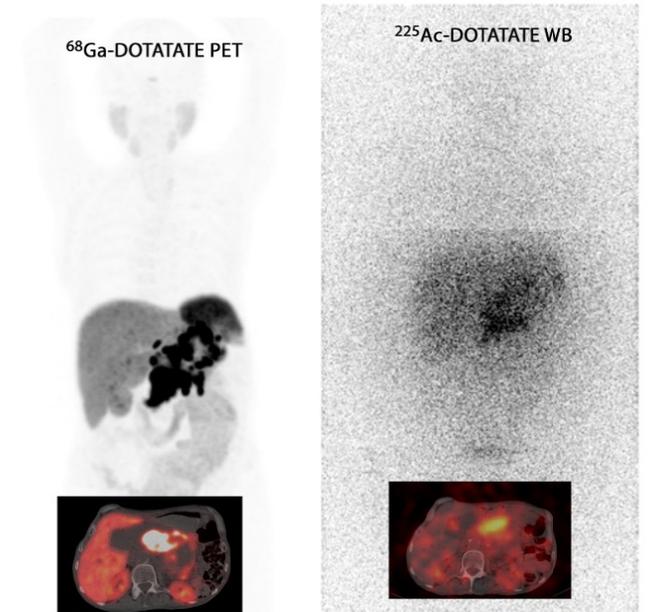
Clinical Nuclear Medicine. Usmani et al 2019



I (78 keV), II (218 keV,  $^{221}\text{Fr}$ ) and III (440 keV,  $^{213}\text{Bi}$ )



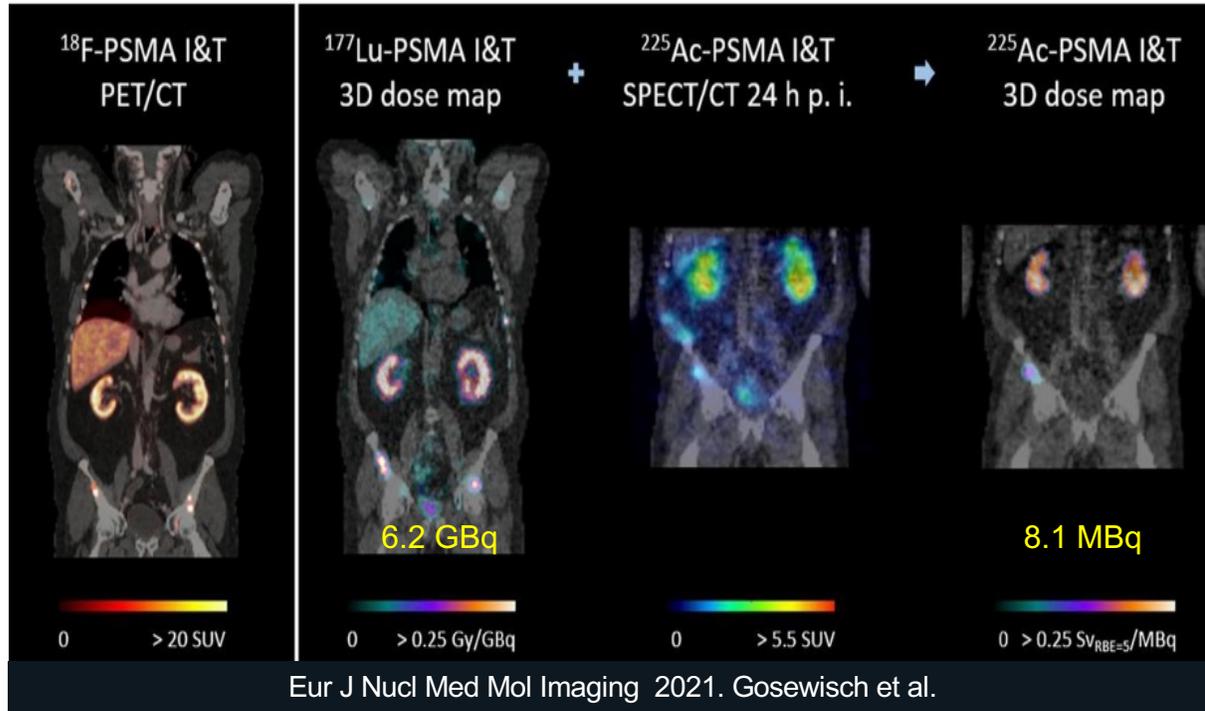
Clinical Nuclear Medicine. Vatsa et al 2020



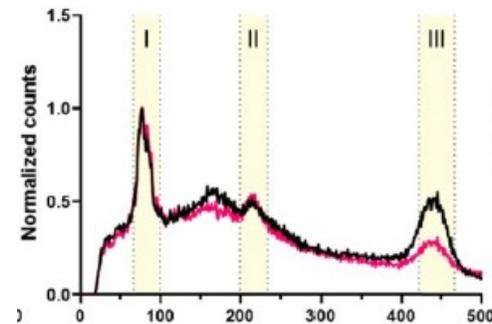
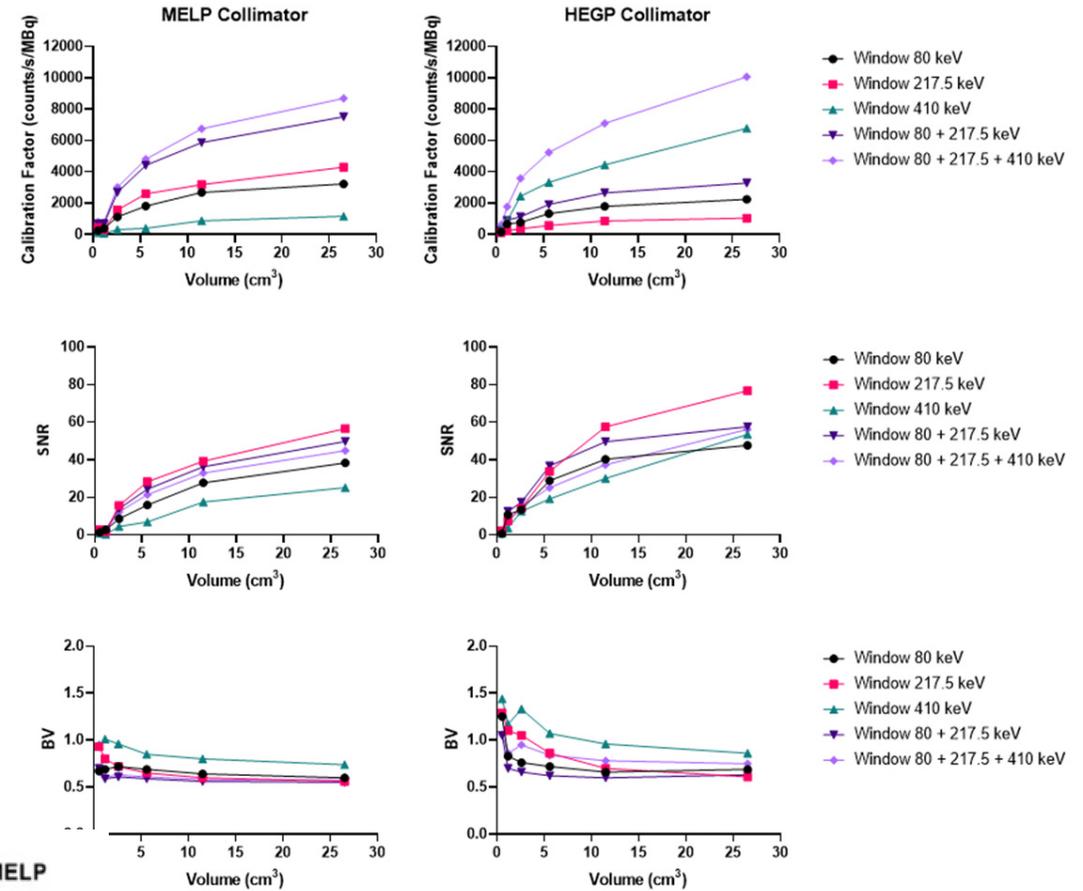
Eur J Nucl Med Mol Imaging Ocak et al 2020

low therapeutic activities (4–8 MBq)  
 <> clinical applicability of SPECT  
 <> Case studies using at least 2 photopeaks  
 (78 and/or 218, and 440 keV)

# Clinical



## Symbia T6, Siemens



Theranostics 2021. Benabdallah et al. | Phantom Study  $^{225}\text{Ac}$

# $^{225}\text{Ac}$ SPECT

## Challenges

Limitations inherent to  $^{225}\text{Ac}$

- Small injected activities ( $\sim 4\text{-}13$  MBq patients -  $< 90$  kBq/mice ( $^{225}\text{Ac}$ -DOTATATE))
- The lack or very low abundance of the gamma emissions ( $^{221}\text{Fr}$  and  $^{213}\text{Bi}$  photopeak)

Technological limitations

- Sensitivity of the detector (inherent to the SPECT system)

**=> PRISMAP: maximizing the potential of  $^{225}\text{Ac}$  SPECT**

- Siemens Intevo T16 SPECT/CT system (clinical)
- Molecubes  $\gamma$ /X-CUBE SPECT/CT system (preclinical)

# $^{225}\text{Ac}$ SPECT

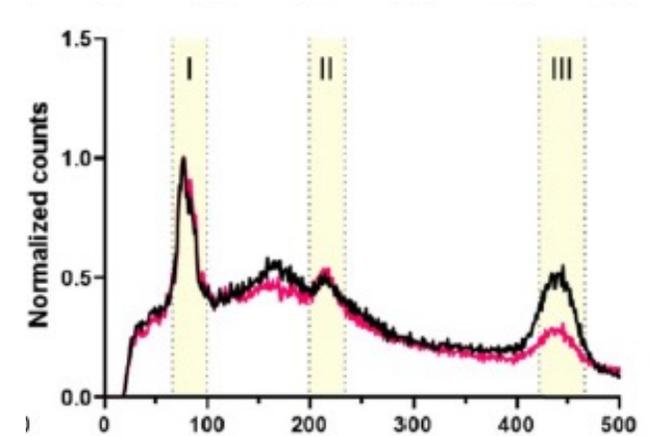
Siemens Intevo T16 SPECT/CT system (clinical)

Collimator MELP & HEGP  
Crystal thickness 3/8"

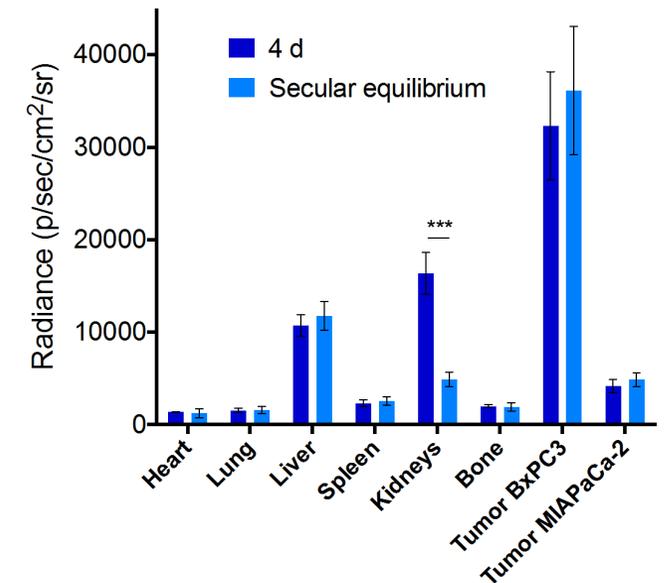
- scatter
- spectral reconstruction
- $^{225}\text{Ac}$   $\leftrightarrow$  recoiled (free) daughter  $^{213}\text{Bi}$   $\Rightarrow$  kidneys/urine

Molecubes  $\gamma$ /X-CUBE SPECT/CT system (preclinical)

- refurbish for high energy gammas
- evaluate system performance



I (78 keV), II (218 keV,  $^{221}\text{Fr}$ ) and III (440 keV,  $^{213}\text{Bi}$ )



Poty et al. Clin Cancer Res; 25(2) January 15, 2019