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Radiopharmaceuticals and Tumor Detection

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**Radiopharmaceuticals and Tumor Detection
in Handbook of Nuclear Medicine**

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TUMOR LOCALIZATION WITH RADIONUCLIDES

A major goal of research in Nuclear Medicine is the development of a "magic bullet" that will permit reliable localization of malignant tumors by a non-invasive technique applicable to mass screening. No such agent exists at this time. However, tumor imaging does play a major role in the spectrum of procedures which are carried out in the Nuclear Medicine laboratory. Delinement of lesions is possible by several methods, some direct and others indirect.

Possible approaches to tumor localization can be listed as follows:

1. penetration of tracers into tissues which normally exclude them (e.g., brain tumor imaging).
2. imaging of defects in the usual distribution of a tracer (liver imaging).
3. use of agents which are metabolized by normal cells of the tissue being studied (radioiodine in functioning thyroid cancer metastases).
4. assessment of vascularity (labeled human serum albumin, "flow" studies of initial passage of a tracer).
5. evaluation of increased metabolism and protein formation (^{75}Se -selenomethionine uptake, ^{32}P -phosphate).
6. increased uptake of a label as response to injury ($^{99\text{m}}\text{Tc}$ -phosphate complexes in bone).
7. immune-specific uptake (carcino-embryonic antigen).
8. non-specific agents with unknown mechanism (^{67}Ga -citrate, ^{111}In -bleomycin).

In this section we will be concerned with non-specific agents, primarily. Localization of brain tumors, liver and bone imaging, and assessment of blood flow are discussed elsewhere.

Evaluation of the efficacy of a diagnostic agent includes sensitivity (percent true positives) and specificity (percent true negatives). In addition the tumor type should not be in too broad a histological classification to obscure essential differences among subclasses of tumors.

Practical considerations for tumor localizing agents (as for other diagnostic imaging agents) are:

1. tumor-background ratio (clearance from non-target tissues)
2. blood clearance rate (degree of protein binding, etc)
3. localization in normal structures
4. nature of the radionuclide label (radiation dose, detectability, time of imaging).

It is apparent, from review of the literature, that an "ideal" agent is not yet at hand. It is also apparent that considerable difficulties exist in comparing one clinical series with another. The methods of data presentation differ and the clinical material differs among various series of patients. We have attempted to select data that appeared to have been obtained from a substantial series of patients. Data contained in abstracts were not included.

TABLE I
Radioactive Tumor Localizing Agents

Radionuclide	Half Life	Major Radiation (MeV)	Chemical Form
^{32}P	14.28 days	β^- 1.17 (100%)	Phosphate
^{197}Hg	2.71 days	γ 0.077 (18%) 0.191 (2%) 0.268 (0.15%)	Chloride Chlormerodrin
^{203}Hg	46.90 days	β^- 0.214 (100%) γ 0.279 (77%)	Chloride Chlormerodrin
^{131}Cs	9.70 days	c X-rays 0.029 (100%)	Acetate
^{129}Cs	1.34 days	γ 0.375 (48%) 0.416 (25%) 0.550 (5.5%)	Chloride, citrate
^{206}Bi	6.24 days	ϵ Pb X-ray (100%) 0.184 (21%) 0.343 (26%) 0.516 (46%) 0.536 (34%) 0.801 (99%) 0.880 (72%) 1.720 (36%)	Citrate
^{169}Yb	31.8 days	γ 0.063 (45%) 0.110 (18%) 0.131 (11%) 0.177 (22%)	Citrate

TABLE 1 (Cont'd)

Radionuclide	Half Life	Major Radiation (MeV)	Chemical Form
⁷⁵ Se	120.4 days	0.177 (22%)	
		0.198 (35%)	
		0.308 (10%)	
		γ 0.066 (1%)	Selenite
		0.093 (3.3%)	Selenomethionine
		0.121 (17%)	
		0.136 (57%)	
		0.265 (60%)	
		0.280 (25%)	
		0.401 (12%)	
¹³¹ I	8.05 days	β^- 0.806 (100%)	NaI, 19-iodo-cholesterol
		γ 0.080 (2.6%)	Analogs of chloroquine
		0.284 (5.4%)	6-iodo MDP, CEA
		0.364 (82%)	Iodinated human serum albumin
		0.637 (6.8%)	Anti-fibrinogen
		0.723 (1.6%)	Toluidine blue, Iodofluorescein
¹²⁵ I	60.2 days	γ 0.035 (7%)	Chloroquine analog
¹²³ I	13.3 hours	γ 0.183 (83%)	Quinoline analog
^{99m} Tc	6.049 hours	γ 0.140 (90%)	Pertechnetate, bleomycin, HEDSPA, tetracycline
¹¹¹ In	2.81 days	γ 0.173 (89%)	Chloride, citrate

TABLE 1 (Cont'd)

Radionuclide	Half Life	Major Radiation (MeV)	Chemical Form
⁵⁷ Co	270 days	0.247 (94%)	Bleomycin
		γ 0.014 (9%)	Bleomycin
		0.122 (87%)	
		0.136 (11.0%)	
		0.692 (0.14%)	
⁶⁷ Cu	2.44 days	β 0.57 (100%)	Citrate
		γ 0.092 (23%)	
		0.184 (40%)	
⁶⁷ Ga	3.24 days	γ 0.093 (40%)	Citrate
		0.184 (24%)	
		0.296 (22%)	
		0.388 (7%)	

TABLE 2

Radiopharmaceutical	Activity Administered	Use	Comments
$^{131}\text{I-NaI}$	0.5 - 1.0 mCi	Functional carcinoma of thyroid	Post-thyroid ablation
^{123}I	1.0 mCi		
$^{111}\text{In chloride}$	2.5 mCi	General	
$^{111}\text{In citrate}$			
$^{111}\text{In bleomycin}$	1.75 mCi		
$^{57}\text{Co bleomycin}$	0.75 mCi	Pulmonary, primary and metastatic lymphomas, breast, melanoma, head and neck, ovary, brain	
$^{99\text{m}}\text{Tc bleomycin}$	3-5 mCi	General	
$^{67}\text{Cu citrate}$	1.0 mCi	Pulmonary, non-specific	
$^{99\text{m}}\text{TcO}_4$	10 - 20.0 mCi	Breast, non-specific	
$^{99\text{m}}\text{Tc diphosphonate or polyphosphate}$	15 mCi	Breast	
$^{99\text{m}}\text{Tc tetracycline}$	10 mCi	General	
$^{99\text{m}}\text{Tc HEDSPA}$	15 - 20 mCi	Breast	
$^{197}\text{Hg Cl}$	1.5 mCi	Brain	Can't differentiate between benign, malignant or inflammation

TABLE 2 (Cont'd)

Radiopharmaceutical	Activity Administered	Use	Comments
²⁰³ HgCl	10 μ Ci/kg	Pulmonary	
¹⁹⁷ Hg chlormerodrin		Kidney, brain, lung	
¹³¹ Cs Acetate	0.345 - 2.2 mCi	G.I. and G.U.	
¹²⁹ Cs Chloride	< 4 mCi	Pulmonary, thyroid	
¹⁶⁹ Yb Citrate	0.1 - 1.0 mCi	General	High radiation dose
²⁰⁶ Bi Citrate	0.10 mCi	Breast	Not suitable due to high energy & high radiation dose
⁷⁵ Se Selenite	300 μ Ci	General	Limited use because of long half-life
⁷⁵ Se Selenomethionine	3.4 μ Ci/kg (250 μ Ci usual)	General	
¹³¹ I-19-Iodocholesterol	2.0 mCi	Adrenal	High radiation dose
¹³¹ I-Chloroquin analogs		Melanoma	
¹³¹ I-Toludine blue		Insulinoma	
¹³¹ I-Iodo MNDP	195 - 490 μ Ci	General	
¹³¹ I-Diiodofluorescein	600 μ Ci	Brain	
¹³¹ I-human serum albumin	1.0 mCi	General	
⁶⁷ Ga Citrate	1.0 - 3.5 mCi	General	

TABLE 3

Radiation Dose from the Activity Administered (rad/mCi)

Radiopharmaceutical	Target Organ	Whole Body
⁶⁷ Ga citrate (1)	Kidney 0.51-0.6 Colon 1.0 Liver 0.5-0.6 Spleen 0.5-0.6 Gonads 0.19	0.27
⁵⁷ Co bleomycin (2)	Kidney 0.067 Gonads 0.067	0.053
¹⁶⁹ Yb citrate (3)	Bone 11.5	3.48
²⁰⁶ Bi (4,5)	Kidney 1.84-48.3 Gonads 70-75	1.18
¹³¹ Cs (6)	Bone 0.15 Gonads 0.2 Kidney 0.25 Liver 0.2	0.2-0.4
¹⁹⁷ Hg-chlormerodrin (7)	Renal Cortex 12 Liver 1.5 Ovaries 0.04	0.1
²⁰³ Hg-chlormerodrin (7)	Renal Cortex 100 Liver 19 Ovaries 0.77	1-2
⁷⁵ Se L-selenomethionine (8)	Pancreas 12 Kidney 21-23 Spleen 16 Thyroid 6 Testes 11	8
⁷⁵ Se selenite (9)	Liver 33 Kidney 38	6.4
^{99m} TcO ₄ (10)	Gonads 0.012-0.016 Stomach 0.1 Thyroid 0.27	0.013

TABLE 3 (Cont'd)

Radiopharmaceutical		Target Organ	Whole Body
^{99m} Tc bleomycin (11)	Kidney	0.02	.0004
	Bladder	0.02	
¹²⁹ Cs chloride (6)	Bone	.1	.25
	Kidney	0.5	
	Liver	0.4	
	Spleen	0.4	
	Gonads	0.3	
¹¹¹ In chloride (6)	Marrow	2.4	0.5
	Liver	4.5	
	Gonads	0.5	
¹¹¹ In bleomycin (12)	Liver	1.03	0.25
	Marrow	0.94	
^{99m} Tc polyphosphate (13)	Bone	0.06-0.99	0.016-0.24
	Bladder	0.203-3.04	
	Ovaries	0.028-0.42	
¹³¹ I albumin (6)	Blood	10-15	1-2
	Liver	1-2	
	Gonads	2-5	
¹³¹ I-NaI (14)	Thyroid	260-1300	0.24-0.71
	Liver	0.2-0.48	
	Stomach	1.7-1.4	
	Ovaries	0.14	
¹³¹ I-19-iodocholesterol (15)	Adrenals	30.0	0.94
	Testes	2.01	
	Ovaries	2.88	

TABLE 4

Comparison of Scanning with ^{67}Ga -citrate
and ^{197}Hg -compounds (16)

Disease	no. positive ^{197}Hg	no. positive ^{67}Ga
Malignant melanoma	20/30 (66%)	36/54 (66%)
Hodgkin's Disease	2/2 (100%)	83/101 (82%)
Non-Hodgkin's lymphoma	6/9 (66%)	38/55 (69%)
Carcinoma bronchus	163/203 (80%)	276/308 (89%)
Mesothelioma	2/5 (40%)	3/5 (60%)
Carcinoid tumor	0/4 (0%)	0/4 (0%)
Pulmonary tuberculosis	36/81 (44%)	19/62 (30%)
Sarcoidosis	3/4 (75%)	32/36 (89%)

TABLE 5

Diagnosis of Breast Masses (17,18)

Radiopharmaceutical	<u>Positive Findings</u>			
	Normal	Carcinoma	Fibroadenoma	Fibrocystic Disease
^{99m}Tc -polyphosphate and diphosphonate	0/9	9/10	0/1	0/2
^{99m}Tc -pertechnetate	-	4/4	0/1	0/1

TABLE 6
^{99m}Tc-tetracycline for
Tumor Localization (19)

Intracranial	2/3
Chest	11/13
Axilla	2/2
Neck	0/1
Abdomen	1/5
Groin	0/1
TOTAL	16/25 (64%)

In tables 7 through 17 the data has been adapted from a review article (21) which has summarized the literature concerning tumor imaging, with special emphasis on ⁶⁷Ga-citrate. For specific sources of the data which has been combined in these tables the original review article should be consulted.

TABLE 7

Sensitivity of ^{67}Ga for Detecting Lung Cancer

<u>Type</u>	<u>no. of patients</u>	<u>% positive</u>
All lung cancer	489	93
Squamous carcinoma	93	93
Bronchoalveolar adenocarcinoma	58	95
Small cell, oat cell	34	88
Large cell, undifferentiated, anaplastic	87	90

TABLE 8

Lung Cancer: Sensitivity of ^{67}Ga Scans in Detecting Surgically Proved Regions of Disease

<u>Anatomic Region</u>	<u>% positive</u>
Lung	90
Regional nodes	73
Bone	71
Brain and other sites	57

TABLE 9
Sensitivity of ^{67}Ga for Detecting Adenocarcinoma

<u>Organ</u>	<u>Patients (no.)</u>	<u>Sensitivity (%)</u>
Lung	58	95
Breast	128	67
Gastrointestinal	78	38
Prostate	11	55
Thyroid	49	27
Pancreas	14	14
Ovary	9	36

TABLE 10
Sensitivity of ^{67}Ga for Detecting Squamous Carcinoma

<u>Region</u>	<u>Patients (no.)</u>	<u>Sensitivity (%)</u>
Lung	93	93
Esophagus	17	41
Cervix	11	36
Head-neck	89	58

TABLE 11
 Sensitivity of ^{67}Ga in Detecting
 All Forms of Lymphoma

Type	Patients (no.)	Sensitivity
Hodgkin's disease	439	87
Lymphoma, histiocytic predominant	127	75
Lymphoma, mixed cell	20	85
Lymphoma, lymphocytic, poorly differentiated	85	70
Lymphoma, lymphocytic, well differentiated	21	60
"Giant follicular" lymphoma	6	33
Undifferentiated, Burkitt type lymphoma	3	100

TABLE 12
 Hodgkin's Disease and ^{67}Ga ,
 by Histologic Type

Type	%
Nodular sclerosis	75
Lymphocytic predominant	75
Mixed cell	59
Lymphocytic depletion	40

TABLE 13
 Sensitivity of ^{67}Ga for Lymphoma
 by Anatomic Regions Proved by Surgery

<u>Region</u>	<u>Hodgkin's Lymphoma (%)</u>	<u>Non-Hodgkin's Lymphoma (%)</u>
Neck-axilla	79	50
Thorax	93	78
Abdomen, pelvis	59	53
Inguinal, femoral	50	58

TABLE 14
 Non-Hodgkin's Lymphoma:
 Sensitivity of ^{67}Ga by Histologic Type

<u>Type</u>	<u>%</u>
Histiocytic (reticulum cell sarcoma)	76
Mixed cell	51
Lymphocytic, well differentiated (lymphosarcoma)	46
Lymphocytic, poorly differentiated (lymphosarcoma)	34
Undifferentiated, pleomorphic	67
Undifferentiated, Burkitts Type	100

TABLE 15
Sensitivity of ^{67}Ga for Marrow Neoplasia

<u>Disease</u>	<u>Patients (no.)</u>	<u>Sensitivity %</u>
Ewing's Tumor	16	100
Leukemia, acute lymphocytic	17	57
Leukemia, acute myelogenous	28	59
Leukemia, chronic lymphocytic	1	0
Leukemia, chronic myelogenous	1	100
Myeloma	12	17

TABLE 16
Sensitivity of ^{67}Ga for Brain Tumors

<u>Tumor</u>	<u>Patients (no.)</u>	<u>Sensitivity %</u>
Metastatic cancer	11	85
Primary brain tumor	28	90
Meningioma	5	80
Glioma, Grade I	1	0
Glioma, Grade II	4	75
Glioma, Grade III	2	100
Glioma, Grade IV	7	100

TABLE 17
⁶⁷Ga Uptake in Various Malignancies

Tumor	Patients (no.)	Sensitivity %
Thyroid carcinoma	49	27
Anaplastic	9	56
Medullary	3	0
Papillary	7	0
Follicular	1	0
Papillary-follicular	1	100
Melanoma	32	47
Testicular carcinoma	34	57
Seminoma	2	50
Embryonal cell	6	83
Teratocarcinoma	6	33
Renal carcinoma	31	74
Wilms' tumor	4	50
Neuroblastoma	1	100
Basal cell carcinoma	2	0
Uterine carcinoma	1	100
Vaginal carcinoma	2	100

TABLE 18

⁵⁷Co-bleomycin
and ⁶⁷Ga-citrate for Localizing Tumors (21)

<u>Tumor Type</u>	<u>⁵⁷Co-bleomycin no. positive</u>	<u>⁶⁷Ga-citrate no. positive</u>
Epidermoid carcinoma		
Lung	12/13 (92%)	10/13 (77%)
Head and neck	8/8 (100%)	3/7 (43%)
Metastatic	1/2 (50%)	1/2 (50%)
Total epidermoid ca.	21/23 (91%)	14/21 (66%)
Adenocarcinoma		
Breast	1/2 (50%)	0/1 (0%)
Lung	2/2 (100%)	1/1 (100%)
Metastatic	8/10 (80%)	4/8 (50%)
Total adenocarcinoma	11/14 (78%)	5/10 (50%)
Undifferentiated lung carcinoma		
Melanoma	5/5 (100%)	4/4 (100%)
Miscellaneous	2/3 (67%)	1/3 (33%)
	2/5 (40%)	1/5 (20%)
All malignant tumors	41/50 (82%)	25/43 (58%)

TABLE 19

 ^{169}Yb -citrate for Tumor Diagnosis (22,23)

	Squamous Cell Carcinoma	Adeno Carcinoma	Undifferentiated Carcinoma	Malignant Lymphoma	Other	Percent Positive
Head and neck	6/7	1/4	1/2	3/4	0	78.5
Chest						
lung (primary)	20/24	4/4	4/6	0	0	75.5
lung (secondary)	3/4	3/3	0	0	1/1	87.5
mediastinum	2/3	1/1	0	0	1/2	66.7
Abdomen	3/7	13/29	0	0/2	11/22	48.3
Pelvis	3/3	1/1	0	0	1/1	100
Extremeties	1/1	3/3	0	0	1/1	100
Total	77.5%	55.3%	62.5%	50%	55.5%	65.9%

Combined series, several hospitals - 235/360 (65.3%)

Lung - malignant tumors - 12/15 (80%)
benign tumors - 0/7

TABLE 20
Efficacy of $^{129}\text{CaCl}$ in
Pulmonary Tumor Localization (24)

Type	no. positive
Adenocarcinoma	3/3 (100%)
Squamous cell carcinoma	6/7 (85%)
Undifferentiated carcinoma	6/6 (100%)
Oat cell carcinoma	0/1 (0%)
Total	15/17 (88%)

TABLE 21

Comparison of Sensitivity of 99m Tc-bleomycin
and 67 Ga-citrate According to Cell Type (11)

<u>Lesions</u>	<u>99mTc-bleomycin</u>	<u>67Ga-citrate</u>
Primary		
Undifferentiated cell carcinoma	9/11 (82%)	11/11 (100%)
Squamous cell carcinoma	20/25 (80%)	11/18 (61%)
Adenocarcinoma	26/33 (79%)	13/28 (45%)
Malignant lymphoma	3/7 (43%)	7/7 (100%)
Fibro- and myosarcoma	3/3 (100%)	3/3 (100%)
Malignant melanoma	1/1 (100%)	0/1 (0%)
Retinoblastoma	1/1 (100%)	0/1 (0%)
Teratoma	<u>1/1 (100%)</u>	<u>1/1 (100%)</u>
Total	64/82 (78%)	46/70 (66%)
Metastatic		
Undifferentiated cell carcinoma	1/1	-
Squamous cell carcinoma	7/7	2/4
Adenocarcinoma	<u>13/15</u>	<u>5/10</u>
Total	21/23 (91%)	7/14 (50%)

TABLE 22
 Comparison of 99m Tc-bleomycin and 67 Ga-citrate
 for Tumor Localization (11)

	Region	99m Tc-bleomycin	67 Ga-citrate
Face	Orbital	3/3	0/3
	Paranasal, mouth, mandibular	8/10 11/13 (85%)	4/9 (44%) 4/6
Neck	Epipharynx and larynx	3/5 11/13 (85%)	5/5 6/10 (60%)
	Thyroid	8/8	1/5
Chest	Lung	20/22	16/20
	Breast	5/5 28/32 (88%)	1/4 19/28 (68%)
	Esophagus	3/5	2/4
Abdomen	Liver and pancreas	6/9 14/18 (78%)	7/9 10/18 (56%)
	Gastrointestinal	8/9	3/9
Pelvic organ	0/2	(0%)	0/2 (0%)
Extremity cancer and sarcoma	7/8	(88%)	4/6 (67%)
Malignant lymphoma	3/7	(43%)	7/7 (100%)
Total	74/93	(80%)	50/80 (63%)

TABLE 23
 Sensitivity of 111 In-transferrin for Tumor Localization (25)

Head and neck tumors 7/10 (70%)

TABLE 24
 ^{75}Se -Selenomethionine as a Tumor
 Imaging Agent (26)

<u>Sarcomas</u>	<u>no. positive</u>
Rhabdomyosarcoma	6/6 (100%)
Reticulum cell sarcoma	3/3 (100%)
Osteogenic sarcoma	1/1 (100%)
Pleural mesothelioma	3/3 (100%)
Total	13/13 (100%)

<u>Malignant lymphomas</u>	<u>no. positive</u>
Hodgkin's disease*	67/69 (97.1%)
Lymphosarcoma	14/14 (100%)
Chronic myelogenous leukemia	2/2 (100%)
Chronic lymphocytic leukemia	2/2 (100%)
Acute lymphocytic leukemia	1/1 (100%)
Total	86/88 (97.7%)

<u>Cancers of Other Origin</u>	<u>no. positive</u>
Bronchogenic carcinoma*	7/12 (58.3%)
Breast*	2/15 (13.3%)
Ovary	1/1 (100%)
Prostate*	1/4 (25%)
Malignant melanoma	3/3 (100%)
Malignant hepatoma	0/1 (0%)
Unknown origin	2/3 (66.7%)
Miscellaneous	2/4 (50%)
Total	18/43 (41.9%)

*There was + localization as follows: Hodgkin's disease (1), bronchogenic carcinoma (2), breast (7) and prostate (1).

TABLE 25

⁷⁵Se-Sodium Selenite as a Tumor Imaging Agent (27)

<u>Region</u>	<u>no. positive</u>
Brain	
Primary	31/33 (94%)
Metastatic	12/17 (71%)
Benign	2/13 (67%)
Bone	
Primary	2/3 (33%)
Metastatic	12/26 (46%)
Intrathoracic	15/23 (65%)
Intraabdominal	16/32 (50%)
Head and neck	17/20 (85%)
Cutaneous, subcutaneous	4/5 (80%)
Axillary lymph nodes	5/7 (71%)
Breast	20/30 (67%)

TABLE 26

Efficacy of Various Radionuclides in Brain

Tumor Imaging (27)*

<u>Radionuclide</u>	<u>no. positive</u>
^{203}Hg	90/100 (90%) 54/69 (78%)
$^{99\text{m}}\text{TcO}_4^-$	75/92 (81.5%) 134/150 (89%) 48/50 (96%)
$^{131}\text{I-HSA}$	17/27 (63%)
^{206}Bi	49/56 (87.5%)
^{75}Se	43/50 (86%)

*See original article for individual references.

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