

# Exploration of peptide T7 and its derivative as integrin $\alpha v \beta 3$ -targeted imaging agents

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**Objective:** The aim of the present study was to develop potential candidates of integrin  $\alpha v \beta 3$ -targeted imaging agent, which can facilitate the diagnosis and treatment of malignant solid tumors.

**Methods:** Peptides derived from tumstatin, named T7 and T7-6H, were derivatized to contain histidine in the C-terminus of their sequence and were labeled with <sup>99m</sup>Tc via nitrido and carbonyl precursors. The radiochemical purity and stability of <sup>99m</sup>Tc-labeled T7 and T7-6H were characterized by thin-layer chromatography. The whole body biodistribution was studied in NCI-H157-bearing BALB/c nude mice.

**Results:** The <sup>99m</sup>Tc-labeled T7 and T7-6H showed adequate in vitro stability, with a high radiochemical purity of over 90%. The dissociation constant (K<sub>d</sub>) value of the <sup>99m</sup>Tc-labeled T7 and T7-6H ranged from 68.5 nM to 140.8 nM in U251 and NCI-H157 cell lines. <sup>99m</sup>Tc-labeled T7 and T7-6H showed no significant difference of biodistribution in mice. Furthermore, both T7 and T7-6H exhibited a poor blood-brain barrier penetration and a transient accumulation in lung; the uptake in tumor tissues was significantly higher than in muscle tissue, with a ratio of 5.8.

**Conclusion:** <sup>99m</sup>Tc-labeled T7 and T7-6H can be regarded as promising single-photon emission computed tomography probes for imaging integrin  $\alpha v \beta 3$ , and need to be further studied for noninvasive detection of tumors.

**Keywords:** integrin, angiogenesis, ligands

## Introduction

It has been well known that angiogenesis plays an indispensable role in growth and metastasis of tumors since the idea was proposed by Folkman in 1971.<sup>1</sup> Integrin  $\alpha v \beta 3$ , a member of the integrin family, also known as vitronectin receptor, has been most extensively studied as a crucial molecule during tumor angiogenesis.<sup>2</sup> Integrin  $\alpha v \beta 3$ , a heterodimeric transmembrane glycoprotein consisting of  $\alpha v$  (CD51, 150 kD) and  $\beta 3$  (CD61, 105 kD) subunits, is preferentially expressed in proliferating vascular endothelial cells and on surfaces of a wide variety of tumor cells including lung, breast, prostate cancer, osteosarcoma, neuroblastoma, and spongioblastoma cells. In contrast, in mature endothelial cells as well as the vast majority of normal tissues and organs, the integrin  $\alpha v \beta 3$  protein is undetectable or absent.<sup>3</sup> Therefore, integrin  $\alpha v \beta 3$  is a likely target for the diagnosis and therapy of tumors.<sup>4</sup>

A variety of extracellular matrix proteins combines with integrin  $\alpha v \beta 3$  via recognition of the Arg-Gly-Asp (RGD) sequence. Radio-labeled RGD peptides have been exploited as diagnostic radiopharmaceuticals. These radiopharmaceuticals can assess angiogenic activity of solid tumors, and monitor integrin-targeted antiangiogenic therapies.<sup>5-7</sup> A few researches also reveal that many ligands are able to bind to integrin  $\alpha v \beta 3$  in an RGD-independent way, such as SDV (Ser-Asp-Val) and SLV (Ser-Leu-Val).<sup>8,9</sup> In our previous studies,<sup>10</sup> we studied a peptide (T7) derived from tumstatin with the

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sequence of Thr-Met-Pro-Phe-Leu-Phe-Cys-Asn-Val-Asn-Asp-Val-Cys-Asn-Phe-Ala-Ser-Arg-Asn-Asp-Tyr-Ser-Tyr-Trp-Leu (TMPFLFCNVNDVCNFAASNDYSYWL),<sup>11–14</sup> the results indicated that the binding specificity between T7 peptide and integrin  $\alpha v \beta 3$  is located at the active sites of Ser90, Arg91, Asp93, and Tyr94, a new non-RGD-dependent binding mode, namely RNDY binding mode. Other studies showed that the critical amino acid sites for anti-angiogenesis in T7 peptide were Leu78, Val82, and Asp84.<sup>15</sup> In the present study, we further explored the integrin binding capability of <sup>99m</sup>Tc-labeled T7 peptide and its derivative T7-6H in vitro and the biological distribution in vivo as potential radiotracers with high receptor-binding affinity/specificity in a noninvasive detection of tumor angiogenesis.

## Materials and methods

### General

In order to improve the hydrophilia without altering the activity and binding sites of T7, three hydrophobic amino acids within the C-terminus of the T7 sequence were replaced with three lysines (Lys, K). The modified T7 peptides were purchased from Beijing Scilight Biotechnology Ltd Co (Beijing, People's Republic of China) with a purity of 96.84% (high-performance liquid chromatography [HPLC], 220 nm; C18, linear gradient), molecular weight of 2,942.41; the sequence is TMPFLFCNVNDVCNFAASNDYSKKK. T7-6H was designed to obtain the more stable radio-labeled product by adding 6 histidine (His, H) into the C-terminus of the T7 sequence, ie, the T7 sequence was changed into TMPFLFCNVNDVCNFAASNDYSYWLHHHHHH, with a molecular weight of 3,843.29 and a purity of 99.32%.

All commercially obtained chemicals were of analytical grade and were used without further purification. Na <sup>99m</sup>TcO<sub>4</sub> was obtained from a commercial <sup>99</sup>Mo/<sup>99m</sup>Tc generator (Beijing Atom High Tech Co, Ltd, Beijing, People's Republic of China). The reversed phase HPLC system was fitted with a PLC column of Agela (250×4.6 mm ID) C18, detection wavelength of 220 nm. The thin-layer chromatography (TLC) scanner AR-2000 (Bioscan) was used to detect the radiochemical purity (RCP) of complexes.

### Cell lines and cultures

Human breast cancer cells, MDA-MB-231 and MCF-7, were cultured in Dulbecco's Modified Eagle's Medium (DMEM) (Thermo Fisher Scientific, Waltham, MA, USA); human glioma cell line U251, human lung carcinoma cell line A549, human microvascular endothelial cell line HMEC-1, human esophageal cancer cell line EC109, laryngeal carcinoma cell

line Hep2, human hepatocarcinoma cell line HepG2, human non-small cell lung cancer cell line NCI-H157, human lung cancer cell line NCI-H460, and prostate cancer cell line PC3 were maintained in Roswell Park Memorial Institute RPMI\_1640 medium (Thermo Fisher Scientific). All media were supplemented with 10% fetal calf serum (Thermo Fisher Scientific), 10 U/mL penicillin, and 100 µg/mL streptomycin (Thermo Fisher Scientific). U251, EC109, Hep2, NCI-H157, and PC3 cell lines were obtained from the tumor cell library of the Peking Union Medical College (PUMC); MDA-MB-231, MCF-7, A549, HMEC-1, HepG2, and NCI-H460 cell lines were purchased from American Type Culture Collection (ATCC), Manassas, VA, USA.

### Preparation and stability analysis of <sup>99m</sup>Tc-T7 and <sup>99m</sup>Tc-T7-6H

The preparation of <sup>99m</sup>Tc-T7 and <sup>99m</sup>Tc-T7-6H was carried out in two steps. Step one was the synthesis of the precursor fac-[<sup>99m</sup>Tc(CO)<sub>3</sub>(H<sub>2</sub>O)<sub>3</sub>]<sup>+</sup>. NaBH<sub>4</sub> (20 mg), to which Na<sub>2</sub>CO<sub>3</sub> (4 mg) and potassium sodium tartrate (15 mg) were added in a 10 mL glass vial. The vial was sealed, and a needle was introduced through the rubber stopper to equilibrate with the atmospheric pressure. CO gas was purged through the vial for 10 minutes, followed by an addition of 2.5 mL of saline containing [<sup>99m</sup>TcO<sub>4</sub>]<sup>-</sup> (activity ranging from 18.5 to 185 MBq). The vial was heated at 100°C for 15 minutes. The RCP of the precursor was evaluated by TLC. The TLC was performed on a polyamide strip with acetonitrile as mobile phase.

Synthesis of the <sup>99m</sup>Tc-T7 or <sup>99m</sup>Tc-T7-6H complex was the second step. The pH of the precursor fac-[<sup>99m</sup>Tc(CO)<sub>3</sub>(H<sub>2</sub>O)<sub>3</sub>]<sup>+</sup> was adjusted to 7 by adding 1 mol/L HCl solution and 0.5 mol/L phosphate buffer (pH 7.4). A water solution (1 mL) containing 1 mg of the T7 or T7-6H peptides was then added and kept for 30 minutes at room temperature. The RCP of the final complex was evaluated by using methods described previously in this section. The <sup>99m</sup>Tc-T7 or <sup>99m</sup>Tc-T7-6H was incubated at 37°C in saline or in rat serum separately; the RCP was assayed by TLC at different times after incubating for over 24 hours.

### Flow cytometry

To determine the integrin  $\alpha v \beta 3$  expression levels in different cell lines, a flow cytometry assay was performed. Briefly, cells were collected and washed with phosphate-buffered saline (PBS) containing 1% bovine serum albumin (BSA). After blocking with 5% BSA in PBS, cells were incubated with an anti-CD51 + CD61 antibody [23C6], (1:20, ab93513; Abcam, Cambridge, UK) for 30 minutes at 4°C. After

washing with PBS containing 1% BSA, the cells were re-suspended in PBS, and were then analyzed using Accuri™ C6 (BD, Franklin Lakes, NJ, USA) with the 488 nm excitation wavelength and the 530 nm emission wavelength. The fluorescein isothiocyanate (FITC) signal intensity was analyzed using the Accuri™ C6 software (BD).

## Cell binding kinetics of radio-labeled imaging agents

To quantitatively evaluate the binding affinities of  $^{99m}\text{Tc}$ -T7 or  $^{99m}\text{Tc}$ -T7-6H to the integrin  $\alpha v \beta 3$ , an in vitro receptor binding and kinetics assay was carried out according to a radioactive ligand receptor binding assay method.<sup>16,17</sup> Cells were prepared at a  $2 \times 10^4$  density in 500  $\mu\text{L}$  medium per well in 24-well plates, separately. After incubation overnight, wells were washed with 500  $\mu\text{L}$  pre-cooled PBS twice; non-specific binding wells were incubated with cold 80 mM T7 or T7-6H in 200  $\mu\text{L}$  medium for 1 hour. Meanwhile,  $^{99m}\text{Tc}$ -T7 or  $^{99m}\text{Tc}$ -T7-6H was added to the specific binding wells at various concentrations: 5, 10, 20, 40, 80, and 160 nM, and were incubated for 1 hour at room temperature. Wells were washed with 500  $\mu\text{L}$  pre-cooled PBS twice, were digested in 1 mL of 1 M NaOH, and finally, were measured by radioactive counter (SN-6100 automatic radioimmunoassay gamma counter, Hesuo Rihuan Photoelectric Instrument Co, Ltd, Shanghai, People's Republic of China). The dissociation constant (Kd) value was analyzed using a Scatchard method.

## Animal models and biodistribution study

A subcutaneous NCI-H157 lung cancer model was established by subcutaneous injection of  $6 \times 10^6$  cells suspended in 200  $\mu\text{L}$  saline into the left flank of 6-week-old (17–19 g) female BALB/c nude mice. Mice were sacrificed for biodistribution and imaging studies when the tumor volume reached approximately 200–300  $\text{mm}^3$  (2–3 weeks after inoculation). All animals were numbered and kept separately in a temperature-controlled room on a 12-hour light/dark schedule with food and water ad libitum. All animal experiments were performed by licensed investigators in compliance with the national laws related to the conduction of animal experiments.

A solution (0.1 mL, 7.4 MBq) of the  $^{99m}\text{Tc}$ -labeled peptides was administered via a tail vein to NCI-H157-bearing nude mice; the injected radioactivity was monitored with a gamma counter. Mice were sacrificed at 0.5, 1, 2, 4, and 8 hours following injection. Organs of interest and the blood were collected, wet-weighed, and measured for radioactivity detection. Results were expressed as percentage of the

injected dose per gram of tissue (%ID/g). The radioactivity in each sample was calibrated against a known quantity of the injected dose. Values were expressed as means  $\pm$  standard deviation (SD) ( $n=5$ ).

## Statistical analysis

All data were presented as mean values  $\pm$  SD of at least three independent experiments. Student's *t*-test was applied with significance defined as  $P < 0.05$  (two-tailed test).

## Results

### Preparation and stability analysis of $^{99m}\text{Tc}$ -T7 and $^{99m}\text{Tc}$ -T7-6H

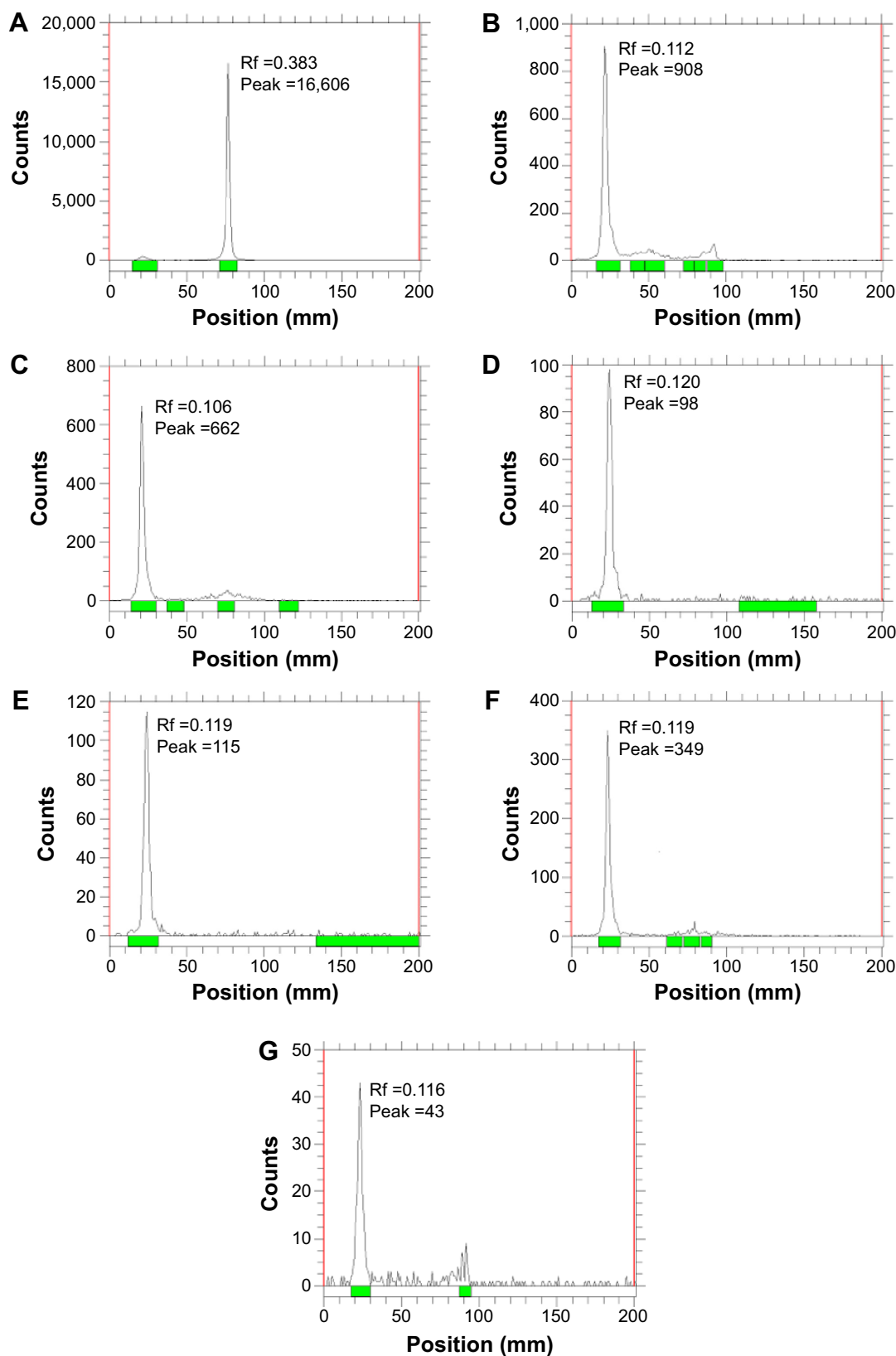
$^{99m}\text{Tc}$ -T7 and  $^{99m}\text{Tc}$ -T7-6H were synthesized by a two-step procedure, as described in the “Materials and methods” section. The extent of complexity was determined by TLC assay, where  $^{99m}\text{Tc}$ -T7 and  $^{99m}\text{Tc}$ -T7-6H exhibited a faster migration speed than  $[\text{}^{99m}\text{TcO}_4]^-$  (Figure 1A); the RCP values of  $^{99m}\text{Tc}$ -T7 and  $^{99m}\text{Tc}$ -T7-6H were 92.1% and 91%, respectively (Figure 1B and C). The radio-labeled complex was injected intravenously, or was incubated in saline or rat serum to test the stability in vitro, with no need of further purification. The radio-labeled complexes containing  $^{99m}\text{Tc}$ -T7 and  $^{99m}\text{Tc}$ -T7-6H were observed to retain their RCPs to  $>90\%$  after they had been stored 8 hours in saline or serum at  $37^\circ\text{C}$  (Figure 1D–G).

### Integrin $\alpha v \beta 3$ expression level of different cell lines

To qualify intrinsic  $\alpha v \beta 3$  integrin expression, flow cytometry analysis was performed using an FITC-labeled  $\alpha v \beta 3$  integrin-specific antibody in ten human cancer cell lines and one normal epithelial cell line (HMEC-1). As illustrated in Figure 2, the order for integrin  $\alpha v \beta 3$  expression was as follows: NCI-H157  $>$  U251  $>$  NCI-H460  $>$  A549  $>$  MCF-7  $>$  EC109  $>$  MDA-MB-231  $>$  HepG2  $>$  Hep2  $>$  PC3  $>$  HMEC-1, indicating a significantly higher  $\alpha v \beta 3$  integrin level in cancer cells than in HMECs.

### Cell binding kinetics assay

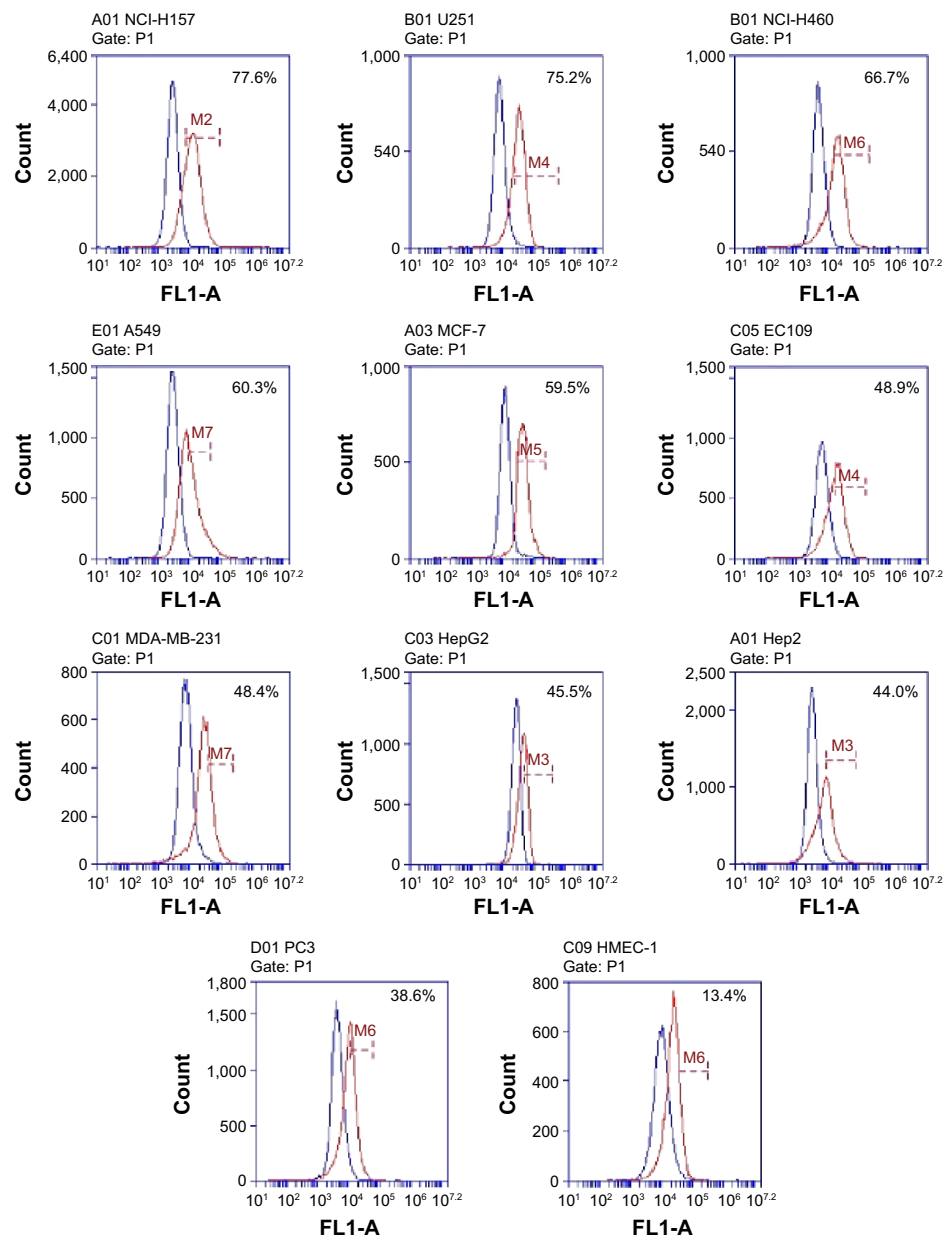
In vitro receptor binding and kinetics assays were assessed in NCI-H157 and U251 cell lines according to the Scatchard diagram. No significant difference was observed for the Kd values of  $^{99m}\text{Tc}$ -T7 and  $^{99m}\text{Tc}$ -T7-6H in the same cell line, ie, 71.9 vs 68.5 nM in NCI-H157 cells, respectively ( $P > 0.05$ ), and 131.6 vs 140.8 nM in U251 cells, respectively ( $P > 0.05$ ). However, as shown in Figure 3, a significant difference in the Kd value of the same radio agent was observed, ie, 131.6 nM



**Figure 1** Radiochemistry and stability assay by TLC scan.

**Notes:** (A)  $[^{99m}\text{TcO}_4^-]$ , RCP = 98%; (B)  $^{99m}\text{Tc-T7}$ , RCP = 92.1%; (C)  $^{99m}\text{Tc-T7-6H}$ , RCP = 91%; (D)  $^{99m}\text{Tc-T7}$  in saline for 8 hours at 37°C, RCP > 90%; (E)  $^{99m}\text{Tc-T7}$  in serum for 8 hours at 37°C, RCP > 90%; (F)  $^{99m}\text{Tc-T7-6H}$  in saline for 8 hours at 37°C, RCP > 90%; (G)  $^{99m}\text{Tc-T7-6H}$  in serum for 8 hours at 37°C, RCP > 90%. This experiment was repeated twice. The green shading in horizontal axis bar represents the peak positions.

**Abbreviations:** TLC, thin-layer chromatography; Rf, rate of flow.



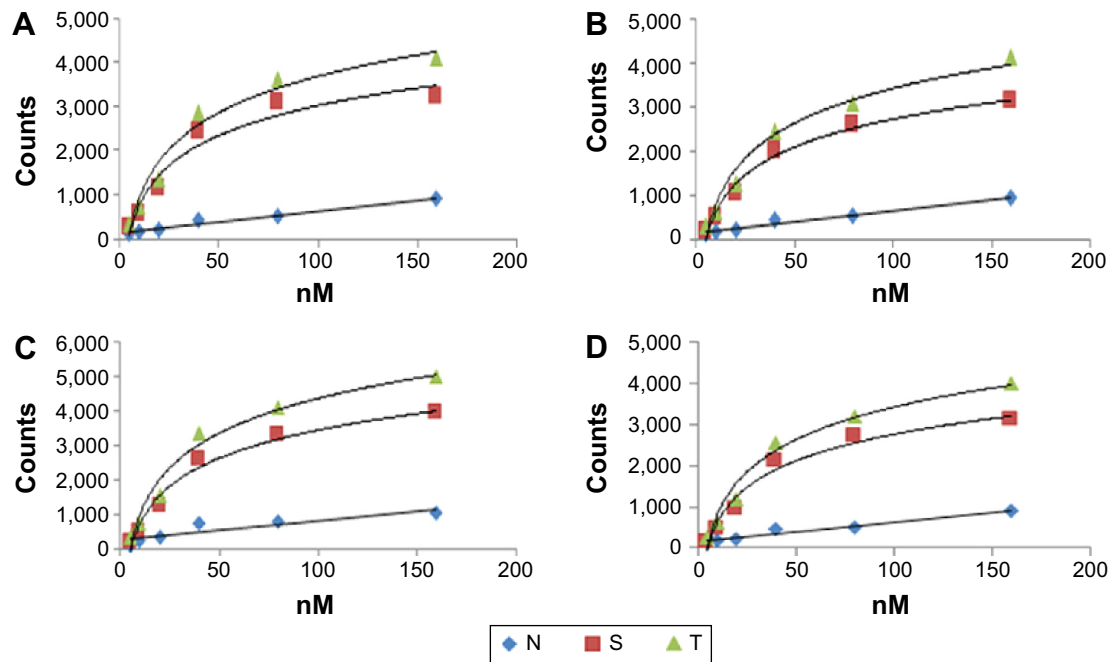
**Figure 2** Flow cytometry analysis of integrin  $\alpha v\beta 3$  expression in eleven cell lines.  
**Note:** This experiment was repeated twice.

in U251 cells vs 71.9 nM in NCI-H157 cells ( $P < 0.05$ ) for  $^{99m}\text{Tc}$ -T7, and 140.8 nM in U251 cells vs 68.5 nM in NCI-H157 cells ( $P < 0.05$ ) for  $^{99m}\text{Tc}$ -T7-6H. Taken together with the results in Figure 2, these findings suggest that, compared with amino acid sequence differences between T7 and T7-6H, the level of integrin  $\alpha v\beta 3$  expression may be more responsible for the binding affinity of radio agents.

### In vivo biodistribution

Biodistributions of mice injected with  $^{99m}\text{Tc}$ -T7 and  $^{99m}\text{Tc}$ -T7-6H are summarized in Tables 1 and 2, and Figure 4. For

example, a significantly high accumulation of  $^{99m}\text{Tc}$ -T7 was observed in tumors at  $0.0865 \pm 0.0023$  %ID/g within 2 hours post-administration. Lung tissue bore the most accumulation of activity with  $6.7260 \pm 0.1109$  %ID/g within 2 hours post-administration, followed by liver with  $2.3756 \pm 0.1085$  %ID/g within 1 hour post-administration. However, the biodistribution in different organs/tissues was observed to diminish with time (Figure 4). The tumor/muscle ratio was found to slowly increase during the first 2 hours after injection, to reach maximum level at 2–4 hours post-administration. After 4 hours, the ratio started to decline with time.



**Figure 3** Saturation curve of  $^{99m}\text{Tc}$ -labeled T7 and T7-6H binding with integrin  $\alpha\text{v}\beta\text{3}$ .  
**Notes:** (A)  $^{99m}\text{Tc}$ -T7 with U251,  $K_d = 131.6\text{ nM}$ ; (B)  $^{99m}\text{Tc}$ -T7-6H with U251,  $K_d = 140.8\text{ nM}$ ; (C)  $^{99m}\text{Tc}$ -T7 with NCI-H157,  $K_d = 71.9\text{ nM}$ ; (D)  $^{99m}\text{Tc}$ -T7-6H with NCI-H157,  $K_d = 68.5\text{ nM}$ .  
**Abbreviations:** N, non-specific binding; S, specific binding; T, total binding.

The distribution values of  $^{99m}\text{Tc}$ -T7 and  $^{99m}\text{Tc}$ -T7-6H showed no significant difference in relation to selection of either complex as a candidate for tumor imaging (Tables 1 and 2, and Figure 4); these results suggested that the introduction of histidines into the C-terminal of T7 peptide does not alter its biological behavior.  $^{99m}\text{Tc}$ -T7 or  $^{99m}\text{Tc}$ -T7-6H showed a high accumulation in lung tissue. However, a weak accumulation was observed for both  $^{99m}\text{Tc}$ -T7 and  $^{99m}\text{Tc}$ -T7-6H in brain tissue, indicating that neither T7 nor T7-6H could penetrate the blood–brain barrier easily.

Discussion

The expression of  $\alpha\text{v}\beta\text{3}$  integrin as a genuine marker of angiogenesis is only applicable to specific tumor types where its expression is restricted to vasculature; a key question in integrin imaging research is to what extent neovessel integrin expression contributes to radio-labeled imaging agents' binding capacity. Some aspects of T7 and integrin  $\alpha\text{v}\beta\text{3}$  receptor behavior have been explored,<sup>9,10,18</sup> but in the context of diagnostic imaging, agents remain relatively underexplored. In the current study, we directly assessed the relationship of

**Table 1** The biodistribution of  $^{99m}\text{Tc}$ -T7 in the NCI-H157 model (%ID/g  $\pm$  SD) (n=5)

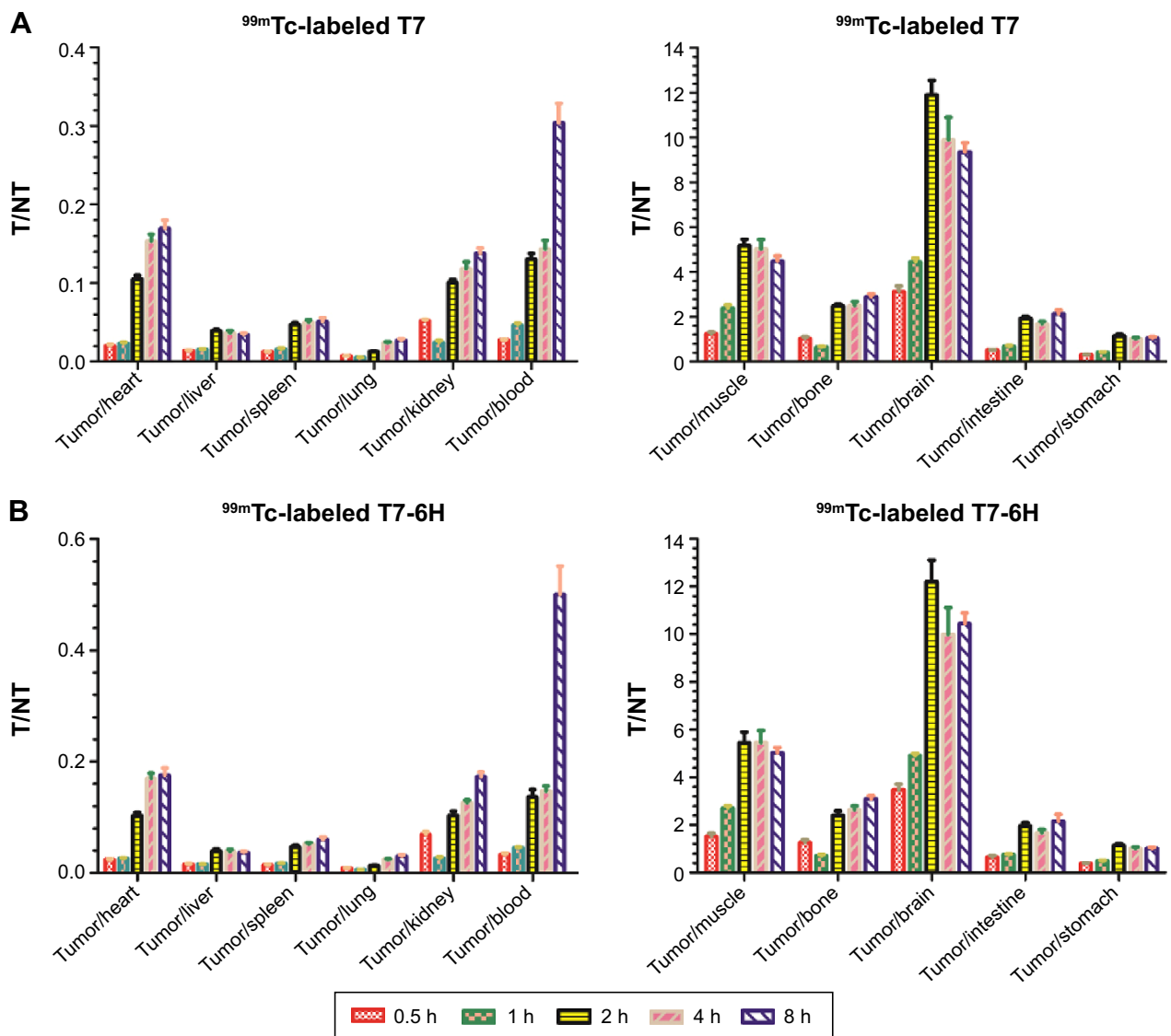
Tissue	0.5 h	1 h	2 h	4 h	8 h
Heart	1.2931 $\pm$ 0.0929	1.5536 $\pm$ 0.1030	0.8279 $\pm$ 0.0389	0.5147 $\pm$ 0.0111	0.4377 $\pm$ 0.0196
Liver	1.8305 $\pm$ 0.0409	2.3756 $\pm$ 0.1085	2.2373 $\pm$ 0.1038	2.2010 $\pm$ 0.0915	2.1768 $\pm$ 0.0626
Spleen	2.0442 $\pm$ 0.0460	2.2859 $\pm$ 0.1238	1.8482 $\pm$ 0.0580	1.5719 $\pm$ 0.0609	1.4754 $\pm$ 0.0748
Lung	3.4580 $\pm$ 0.1132	6.6213 $\pm$ 0.1688	6.7260 $\pm$ 0.1109	3.2700 $\pm$ 0.1049	2.7228 $\pm$ 0.0551
Kidney	0.4919 $\pm$ 0.0102	1.5367 $\pm$ 0.1528	0.8617 $\pm$ 0.0204	0.6673 $\pm$ 0.0191	0.5370 $\pm$ 0.0138
Muscle	0.0209 $\pm$ 0.0012	0.0153 $\pm$ 0.0007	0.0169 $\pm$ 0.0008	0.0159 $\pm$ 0.0008	0.0165 $\pm$ 0.0007
Bone	0.0260 $\pm$ 0.0022	0.0547 $\pm$ 0.0022	0.0349 $\pm$ 0.0013	0.0316 $\pm$ 0.0010	0.0256 $\pm$ 0.0003
Brain	0.0084 $\pm$ 0.0005	0.0081 $\pm$ 0.0002	0.0073 $\pm$ 0.0003	0.0081 $\pm$ 0.0006	0.0079 $\pm$ 0.0001
Tumor	0.0256 $\pm$ 0.0006	0.0359 $\pm$ 0.0010	0.0865 $\pm$ 0.0023	0.0785 $\pm$ 0.0041	0.0737 $\pm$ 0.0032
Blood	0.9284 $\pm$ 0.0100	0.7706 $\pm$ 0.0205	0.6692 $\pm$ 0.0267	0.5530 $\pm$ 0.0184	0.2459 $\pm$ 0.0098
Intestine	0.0498 $\pm$ 0.0011	0.0528 $\pm$ 0.0034	0.0452 $\pm$ 0.0021	0.0471 $\pm$ 0.0012	0.0351 $\pm$ 0.0018
Stomach	0.0862 $\pm$ 0.0042	0.0880 $\pm$ 0.0036	0.0775 $\pm$ 0.0058	0.0773 $\pm$ 0.0024	0.0719 $\pm$ 0.0043

**Abbreviations:** h, hours; %ID/g, percentage of the injected dose per gram of tissue; SD, standard deviation.

**Table 2** The biodistribution of  $^{99m}\text{Tc}$ -T7-6H in the NCI-H157 model (%ID/g  $\pm$  SD) (n=5)

Tissue	0.5 h	1 h	2 h	4 h	8 h
Heart	1.2931 $\pm$ 0.0929	1.4936 $\pm$ 0.0506	0.8679 $\pm$ 0.0200	0.4927 $\pm$ 0.0219	0.4577 $\pm$ 0.0264
Liver	1.9205 $\pm$ 0.0226	2.4376 $\pm$ 0.0457	2.3159 $\pm$ 0.1143	2.1855 $\pm$ 0.0916	2.1768 $\pm$ 0.0626
Spleen	2.1062 $\pm$ 0.0726	2.2546 $\pm$ 0.0475	1.9190 $\pm$ 0.0437	1.6114 $\pm$ 0.0824	1.3275 $\pm$ 0.0390
Lung	3.5258 $\pm$ 0.0767	6.4628 $\pm$ 0.1051	6.7398 $\pm$ 0.0812	3.4132 $\pm$ 0.0659	2.6205 $\pm$ 0.0776
Kidney	0.4527 $\pm$ 0.0364	1.5552 $\pm$ 0.1746	0.8636 $\pm$ 0.0251	0.6567 $\pm$ 0.0201	0.4590 $\pm$ 0.0167
Muscle	0.0206 $\pm$ 0.0011	0.0145 $\pm$ 0.0003	0.0165 $\pm$ 0.0007	0.0154 $\pm$ 0.0006	0.0158 $\pm$ 0.0006
Bone	0.0251 $\pm$ 0.0015	0.0553 $\pm$ 0.0026	0.0373 $\pm$ 0.0010	0.0318 $\pm$ 0.0008	0.0257 $\pm$ 0.0010
Brain	0.0089 $\pm$ 0.0002	0.0079 $\pm$ 0.0002	0.0073 $\pm$ 0.0003	0.0085 $\pm$ 0.0005	0.0076 $\pm$ 0.0002
Tumor	0.0308 $\pm$ 0.0018	0.0389 $\pm$ 0.0009	0.0889 $\pm$ 0.0050	0.0831 $\pm$ 0.0048	0.0792 $\pm$ 0.0038
Blood	0.9286 $\pm$ 0.0141	0.8602 $\pm$ 0.0176	0.6630 $\pm$ 0.0387	0.5664 $\pm$ 0.0142	0.1634 $\pm$ 0.0131
Intestine	0.0492 $\pm$ 0.0037	0.0530 $\pm$ 0.0031	0.0457 $\pm$ 0.0028	0.0504 $\pm$ 0.0028	0.0385 $\pm$ 0.0036
Stomach	0.0815 $\pm$ 0.0017	0.0802 $\pm$ 0.0030	0.0787 $\pm$ 0.0032	0.0824 $\pm$ 0.0019	0.0790 $\pm$ 0.0051

**Abbreviations:** h, hours; %ID/g, percentage of the injected dose per gram of tissue; SD, standard deviation.

**Figure 4** In vivo whole body biodistribution of  $^{99m}\text{Tc}$ -T7 and  $^{99m}\text{Tc}$ -T7-6H in NCI-H157-bearing nude mice model.

**Notes:** (A) The tumor/tissue ratios of  $^{99m}\text{Tc}$ -T7; (B) the tumor/tissue ratios of  $^{99m}\text{Tc}$ -T7-6H.

**Abbreviations:** h, hours; T/N/T, tumor tissue/non-tumor tissue.

binding kinetics between T7 and T7-6H, with an introduction 6 histidine into the C-terminus of the T7 peptide, and an analysis of  $\alpha v\beta 3$  density in the in vitro cell lines and in vivo animal models. We used a two-step strategy with a product of >90% RCP, with no need for further purification. This radiochemical synthesis strategy worked well in our current experiments, because the reaction was not only fast enough for  $^{99m}\text{Tc}$  labeling, but was also easily applied in labeling many different radioactive isotopes and large molecules with a precursor  $\text{fac-}[^{99m}\text{Tc}(\text{CO})_3(\text{H}_2\text{O})_3]^+$ .

In binding assays using a normal endothelial cell line and different kind of tumor cell lines, we confirmed that the  $^{99m}\text{Tc}$ -labeled probe binding kinetics as shown with the  $K_d$  value, varied broadly with the integrin  $\alpha v\beta 3$  expression levels in the cell lines (Figures 2 and 3).  $^{99m}\text{Tc}$ -labeled T7 and T7-6H occupied the specific binding sites of integrin  $\alpha v\beta 3$ , because non-specific binding was excluded by using cold competing peptide. However,  $^{99m}\text{Tc}$ -labeled T7 and T7-6H showed no significant differences in binding affinity, which reflects the fact that the key amino acid residues of T7 that interact with integrin  $\alpha v\beta 3$  receptor are not affected, in accordance with our previous results.<sup>10</sup>

The results from the in vitro receptor binding and kinetics assay (Figure 3) are not consistent with the  $\alpha v\beta 3$  integrin expression profiles obtained using FCM (Figure 2). Expression of  $\alpha v\beta 3$  integrin was similar for both NCI-H157 and U251 cell lines using FCM. However, the  $K_d$  values using the same peptide were dramatically different for these different cell lines. It has been demonstrated previously that the  $\alpha v\beta 3$  integrin binds to RGD peptides in its activated state, where the receptor adopts an open conformation.<sup>19</sup> Quantification of  $\alpha v\beta 3$  expression on the surface of eleven different cell lines was performed by FCM using antibody (ab93513; Abcam), which was monocloned based on the RGD recognizing mode (as per Abcam's product description); however, in the current research, T7 or T7-6H bound to  $\alpha v\beta 3$  integrin in a different way, which may provide an explanation for the discrepancy between FCM results and  $K_d$  values. It also indicated that non-RGD binding mode may have a stronger correlation, specifically between  $\alpha v\beta 3$  integrin and the tracer, than RGD binding mode. At this point, mathematical approaches should be used to assess this phenomenon.

In vivo distribution data revealed that the  $^{99m}\text{Tc}$ -labeled T7 and T7-6H peptides exhibited friendly potential as noninvasive imaging probes, because of the significantly high tumor uptake of  $0.0865 \pm 0.0023$  %ID/g within 2 hours post-administration and the relatively high tumor/muscle ratio. However, the biodistribution and accumulation of both T7 and T7-6H peptides varied among non-target organs,

eg, distribution/accumulation was low in the intestine and high in the lung. There were many factors affecting the tracer uptake, including probe specificity, hydrophilicity, metabolism, penetrating ability, and so on. Zhang et al<sup>20</sup> reported similar observations; many tumor cells grown in culture did not reflect the levels of integrin in tumor tissue of the model. Considering of the probes' properties (yield, stability, and absorption) overall, and taking into account integrin expression, the interpretation of tracer distribution and its kinetic parameters should be evaluated in more detail. It is well documented that  $\alpha v\beta 3$  integrin is not only restricted to a variety of tumor cells, but also that its high expression occurs on the surface of vessels during angiogenesis.<sup>5,6,21</sup> In the last decade, noninvasive imaging of  $\alpha v\beta 3$  integrin using RGD peptides, including radiotracers, has been extensively investigated for diagnosing cancer and other disorders and for monitoring treatment response,<sup>22,23</sup> and have been used in a clinical trial.<sup>23</sup> Our previous studies focus on a non-RGD binding mode peptide<sup>10,12</sup> may provide a promising approach in obtaining more comprehensive and complementary disease information via one-step examination procedures, with easy availability and low cost.

In consideration of the important role integrin  $\alpha v\beta 3$  plays in many pathological and physiological processes, especially in cancer and fibrosis, noninvasive imaging of integrin  $\alpha v\beta 3$  expression would provide a great deal of information to benefit disease detection, new drug development and validation, and patient management (eg, treatment monitoring and dose optimization).<sup>24–27</sup> Quantitative correlation of probe uptake with integrin  $\alpha v\beta 3$  expression level, as demonstrated in the current research on  $^{99m}\text{Tc}$ -labeled T7 and T7-6H, would facilitate the development of noninvasive tests and personalized treatment.

We recognize several potential limitations of our current study; it would be interesting to perform a side-by-side comparison of the two types of radiotracers (RGD and non-RGD) in the same cell line and same animal by measuring  $K_d$ s and biodistribution.

## Conclusion

In summary, two novel water-soluble  $\alpha v\beta 3$ -targeting agents, T7 and T7-6H, were designed and synthesized. Probes were radio-labeled with  $^{99m}\text{Tc}$ , obtained from a commercial  $^{99}\text{Mo}/^{99m}\text{Tc}$  generator, with high RCP.  $^{99m}\text{Tc}$ -labeled T7 and T7-6H were found to be quite hydrophilic and exhibited adequate stability in vitro as well as in rat serum. Preliminary biological evaluation carried out in BALB/c nude mice bearing NCI-H157 heterotopic lung tumors revealed significant uptake and retention of  $^{99m}\text{Tc}$ -labeled T7 and T7-6H in the

tumor compared to normal tissues. The non-target uptake observed at initial time points gradually decreased with time, which was reflected in the improved tumor-to-blood and tumor-to-muscle ratios that were achieved at the later time points. The present experiments indicate a potential application of  $^{99m}\text{Tc}$ -labeled T7 as a single-photon emission computerized tomography radiotracer for tumor imaging.

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## Disclosure

The authors report no conflicts of interest in this work.

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