

Molecular Imaging of the Kidney

David R. Vera, PhD

*UCSD Molecular Imaging Program
Department of Radiology
University of California, San Diego*

Molecular Imaging of the Kidney

Clinical Collaborators



Motoko Yanagita, MD, PhD
Chair, Nephrology
Kyoto University



Carl Hoh, MD
Chief, Nuclear Medicine
UCSD



Kumar Sharma, MD
Vice Chair, Nephrology
UCSD

Present address:
University of Texas, San Antonio

Molecular Imaging of Mesangial Cells

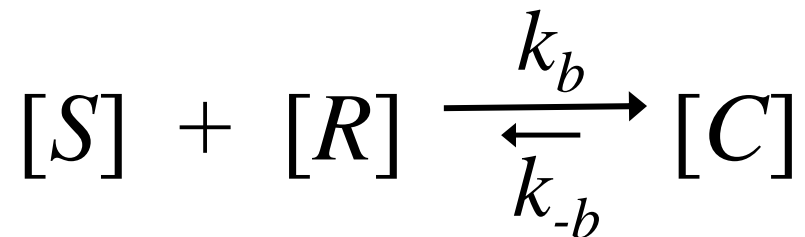
My reason for attending this meeting.

Radiology manuscript review

Reviewer #3

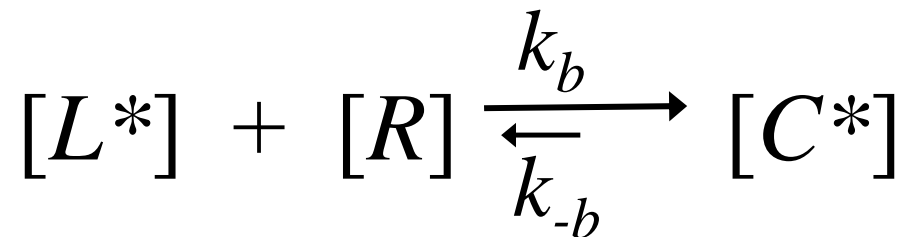
“In truth, tight glucose control is about all that can be offered as a preventative for DN so the diagnosis of early disease (if possible) is probably not a top development priority.”

Molecular Imaging Bimolecular Reaction



$[S]$	Substrate Concentration
$[R]$	Receptor Concentration
$[C]$	Substrate-Receptor Complex Concentration
k_b	Forward Binding Rate Constant
k_{-b}	Reverse Binding Rate Constant

Molecular Imaging Bimolecular Reaction



$[L^*]$	Radiopharmaceutical Concentration
$[R]$	Receptor Concentration
$[C^*]$	RP-Receptor Complex Concentration
k_b	Forward Binding Rate Constant
k_{-b}	Reverse Binding Rate Constant

Molecular Imaging

Image formation governed by bimolecular rate law

$$\textit{uptake rate} = k_b[L^*][R]$$

k_b Forward Binding Rate Constant (affinity)

$[R]$ Receptor Concentration

$[L^*]$ Radiopharmaceutical Concentration

Molecular Imaging

Hypothesis:
A receptor-binding
radiopharmaceutical can measure
tissue reserve

Molecular Imaging

A receptor-binding
radiopharmaceutical can measure
tissue reserve

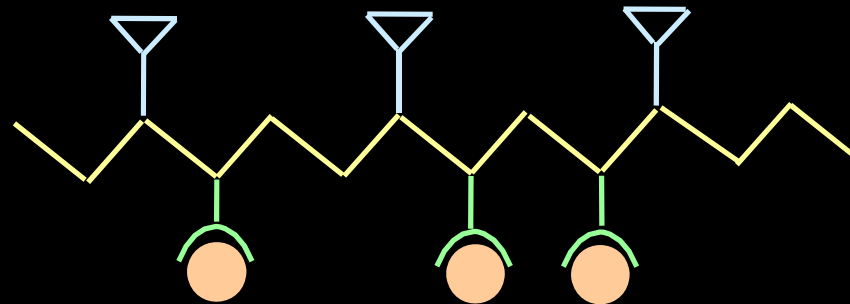
- Demonstrate with a current radiopharmaceutical
- Introduce a RP for mesangial cell functional imaging

Nihon MediPhysics *AsialoSciniti*



Binds to the Asialoglycoprotein Receptor in the Liver

Galactosyl-Neoglycoalbumin: GSA

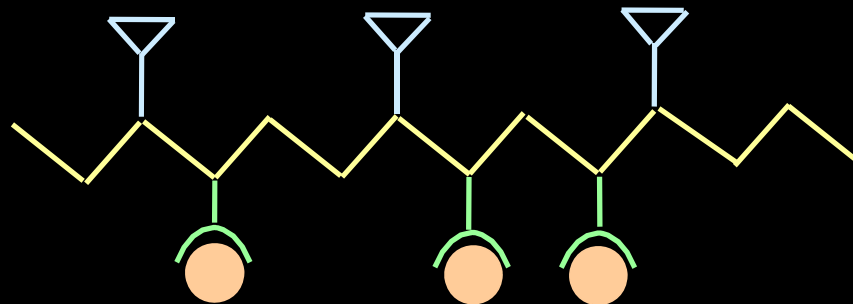


Receptor Substrate:	galactose
Backbone:	HSA
Chelator:	DTPA
Radioactive Atom:	Tc-99m

Galactosyl-Neoglycoalbumin: GSA

Chemically Control

- receptor affinity
- mass dose



Receptor Substrate:	galactose
Backbone:	HSA
Chelator:	DTPA
Radioactive Atom:	Tc-99m

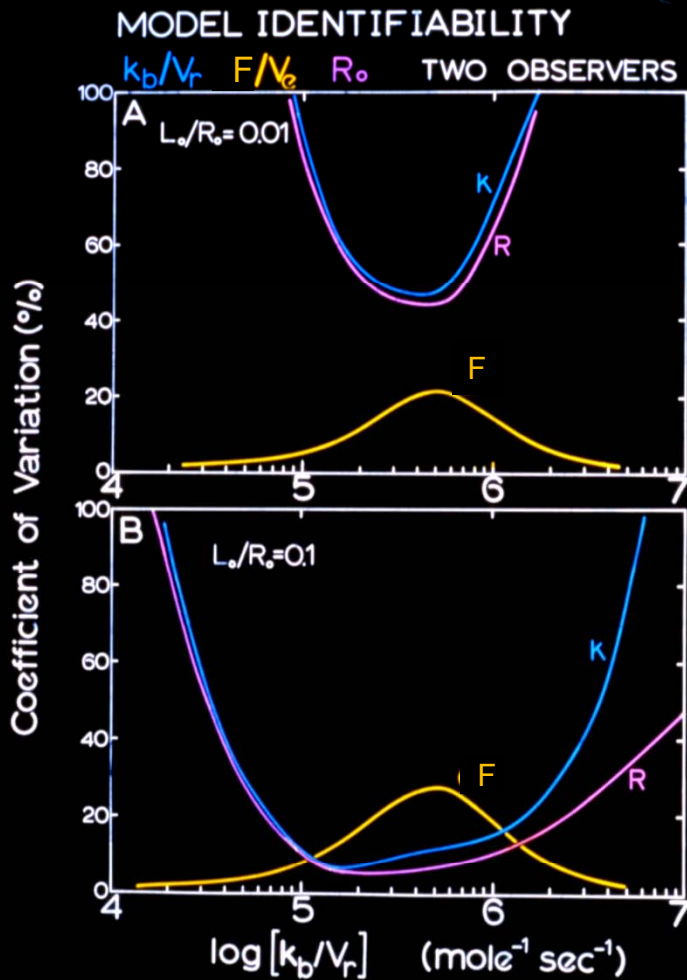
Kinetic Model with a Bimolecular Reaction

$$\frac{d[L]_e}{dx} = \frac{F}{V_e} [L]_h - \frac{F}{V_e} [L]_e$$

$$\frac{d[L]_h}{dx} = \frac{F}{V_h} [L]_e - \frac{F}{V_h} [L]_h - k_b [L]_h [R] + k_{-b} [C]$$

$$\frac{d[C]}{dx} = k_b [L]_h [R] - k_m [C] - k_{-b} [C]$$

$$\frac{d[D]}{dx} = k_m [C]$$

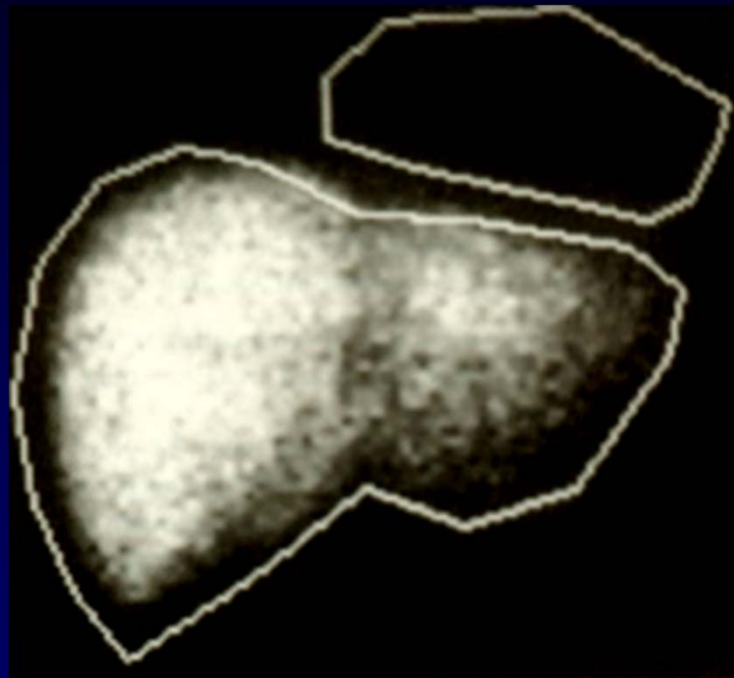


Use Engineering Methods to Optimize Performance

- moderate receptor affinity
- non-tracer mass dose

Vera et al *IEEE BME*
 1983; 13: 311

Generate Time-Activity Curves



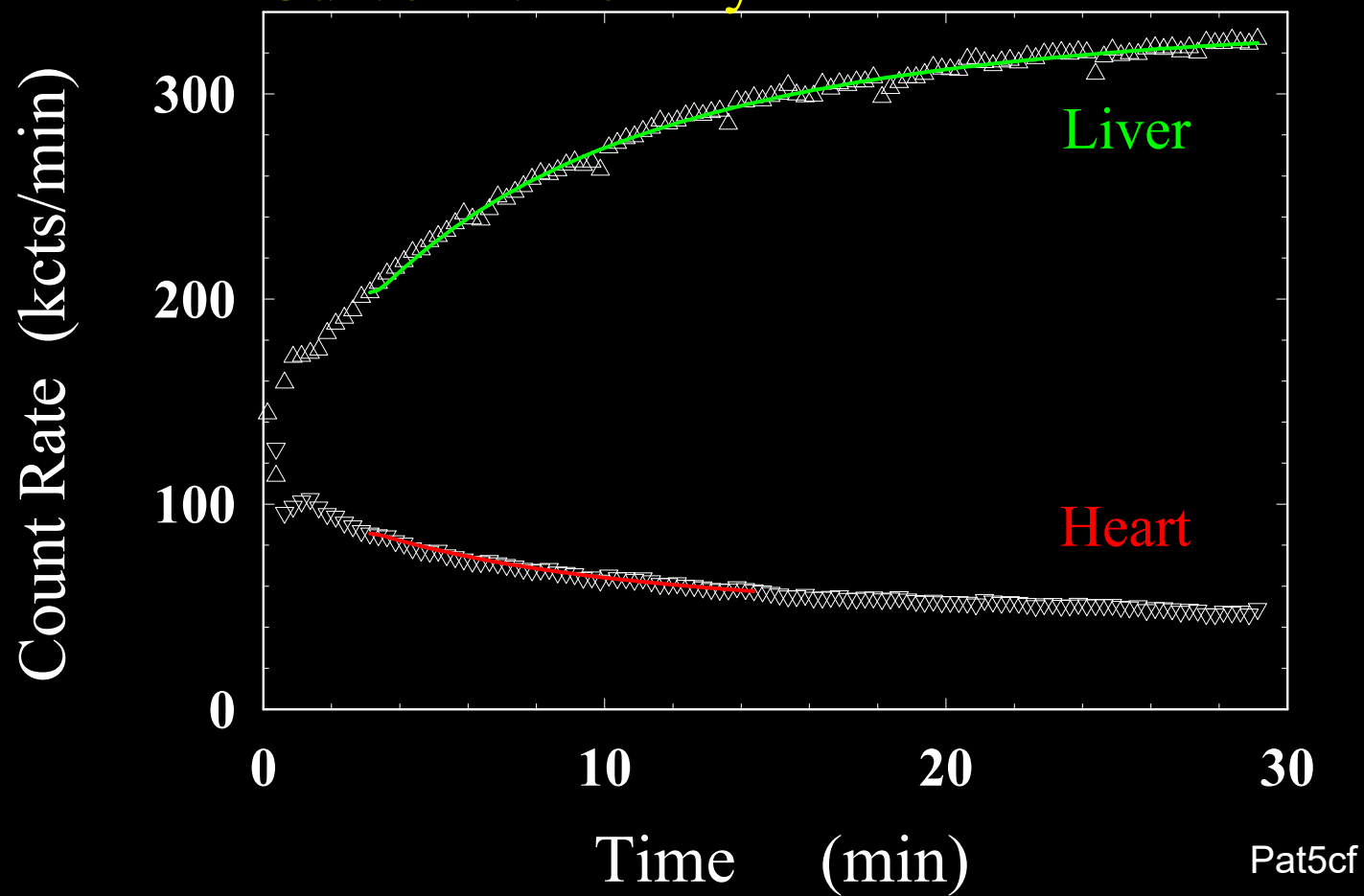
Heart Time-Activity Curve



Liver Time-Activity Curve

Last of 120 frames from zero to 30 minutes

Curve-fit: Healthy



Pat5cf

Healthy Subject

$$[R]_o = 0.914 \pm 0.099 \mu M$$

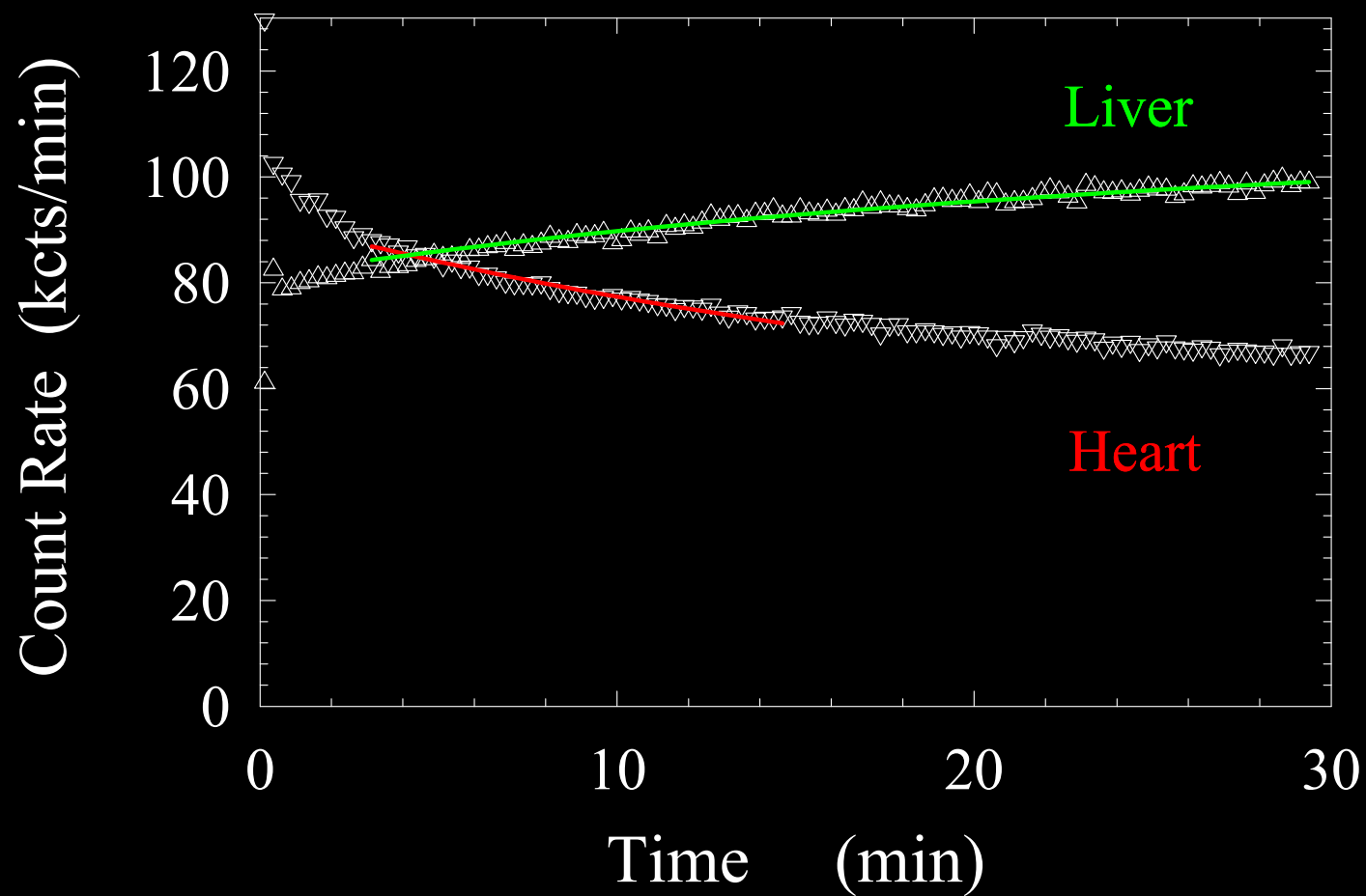
$$k_b = 2.23 \pm 0.73 \mu M^{-1} \text{ min}^{-1}$$

$$V_e = 1.99 \pm 0.02 L$$

$$V_h = 0.274 \pm 0.001 L$$

$$F = 0.685 \pm 0.384 L \text{ min}^{-1}$$

Curve-fit: Cirrhosis



Cirrhotic Patient

$$[R]_o = 0.270 \pm 0.018 \mu M$$

$$k_b = 2.94 \pm 1.38 \mu M^{-1} \text{ min}^{-1}$$

$$V_e = 2.44 \pm 0.09 L$$

$$V_h = 0.267 \pm 0.005 L$$

$$F = 0.454 \pm 0.858 L \text{ min}^{-1}$$

Cirrhotic Patient

Healthy Subject

$$[R]_o = 0.270$$

$$k_b = 2.94$$

$$V_e = 2.44$$

$$V_h = 0.267$$

$$F = 0.454$$

$$0.914 \mu M$$

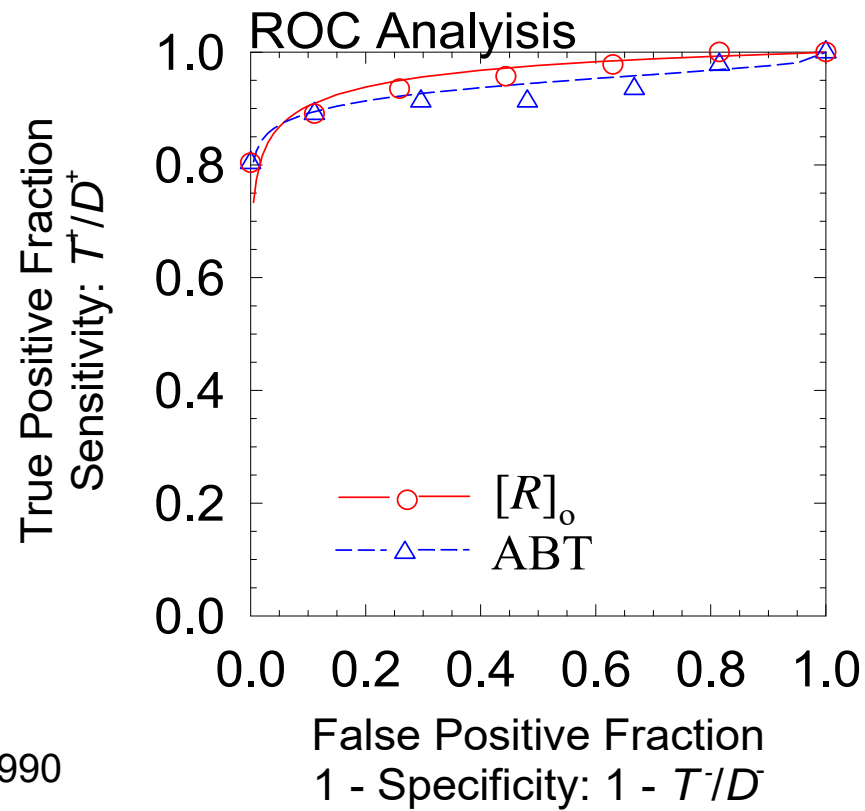
$$2.23 \mu M^{-1} \text{ min}^{-1}$$

$$1.99 L$$

$$0.274 L$$

$$0.685 L \text{ min}^{-1}$$

Diagnostic Performance

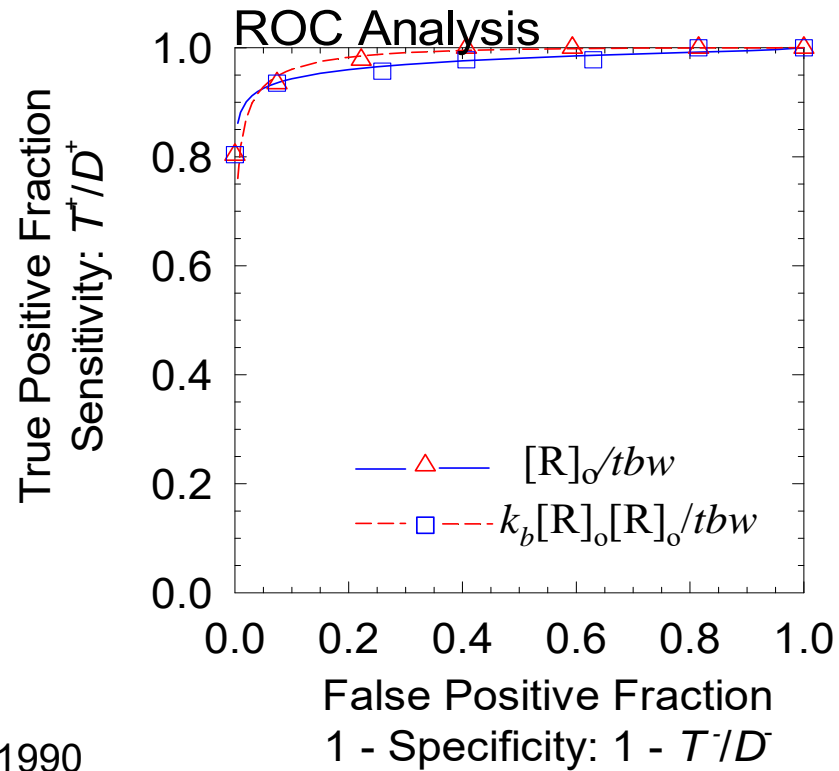


$$A_z = 0.92 \pm 0.09$$

$$A_z = 0.90 \pm 0.06$$

Vera et al. *J Nucl Med* 1990

Diagnostic Performance



$$A_z = 0.97 \pm 0.09$$

$$A_z = 0.95 \pm 0.07$$

Vera et al. *J Nucl Med* 1990

Molecular Imaging

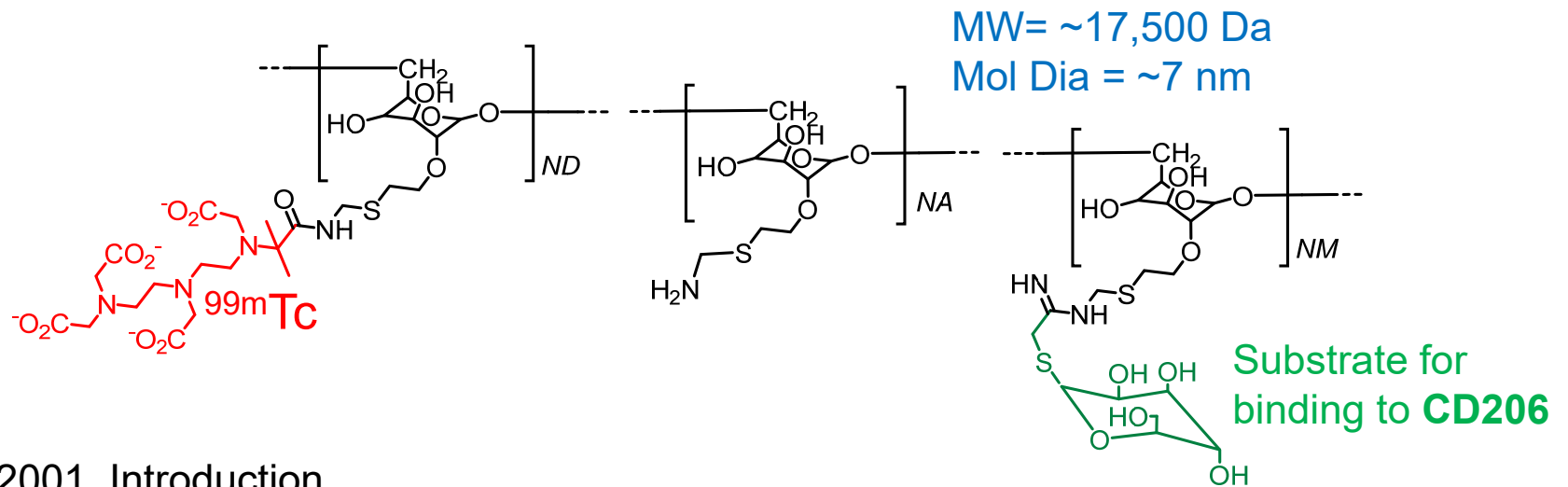
A receptor-binding
radiopharmaceutical can measure
tissue reserve

- Demonstrate with a current radiopharmaceutical
- Introduce a RP for mesangial cell functional imaging

^{99m}Tc-labeled Tilmanocept

FDA & CMS approvals in 2013

Sentinel Lymph Node Mapping



Vera *JNM* 2001, Introduction

Wallace *Ann Surg Oncol* 2006, Phase 1, Breast Cancer

Wallace *Ann Surg Oncol* 2013, Phase 3, Breast Cancer

Marcinow *JAMA* 2013, Phase 3, H&N cancer

*^{99m}Tc-labeled Tilmanocept
Binds to the Receptor CD206*

CD206 Cellular Distribution

- Fixed Macrophages
- M2 Macrophages
- Dendritic Cells
- Bacteria
- Microglial Cells
- Mesangial Cells

^{99m}Tc-labeled Tilmanocept
Phase 1 Clinical Trial of i.v. injection
NCT02865434

CD206 Cellular Distribution

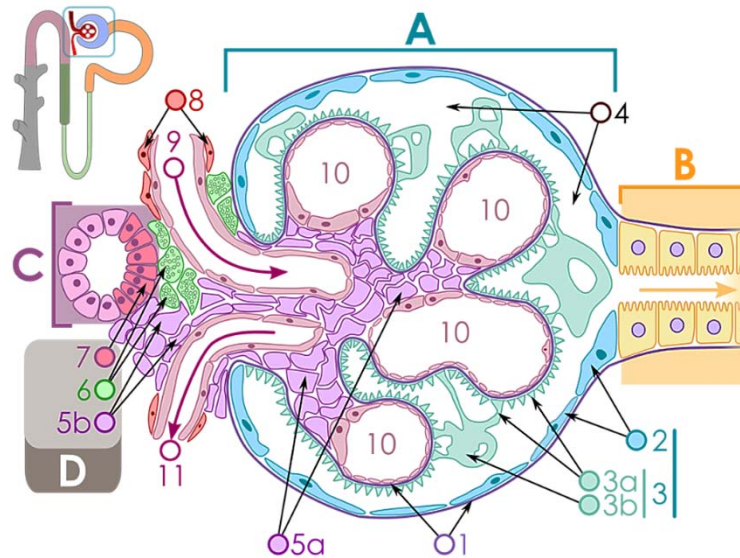
- Fixed Macrophages
- M2 Macrophages
- Dendritic Cells
- Bacteria
- Microglial Cells
- Mesangial Cells



Imaging Rheumatoid Arthritis
Synovial Joint scan
30 mins PI
i.v. injection
10 mCi, 400 µg
Tc-99m-tilmanocept

Courtesy
Navidea Biopharmaceuticals

Mesangial Cell

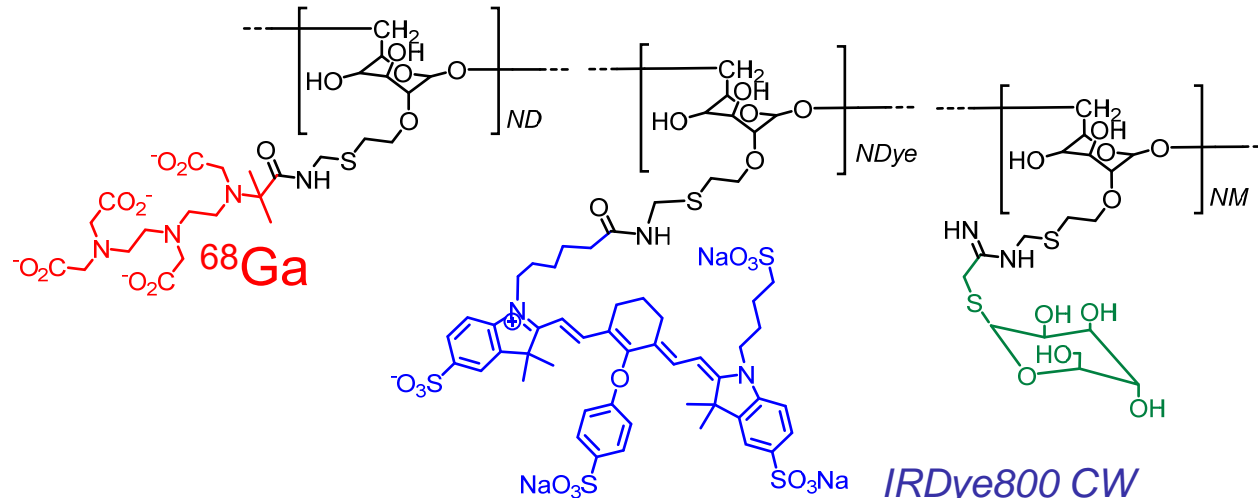


Mesangial Cell (5a & 5b) Functions

- Structural support
- Monitor glucose levels
- Immunologic surveillance

Wikipedia –
mesangium

Demonstration of Receptor-Binding ⁶⁸Ga-labeled *IRDye800CW-Tilmanocept*



Fluorescent-*Tilmanocept*

- $K_A = 0.25$ nM
Emerson *Radiology* 2012
- Max brightness at 2 dyes per tilmanocept
Qin *J Biomed Opt* 2013
Liss *Urology* Epub

IRDye800 CW
 Excitation: 780 nm
 Emission: 795 nm

^{68}Ga -labeled Tilmanocept CD206 Specificity

^{68}Ga]DTPA-mannosyl-dextran

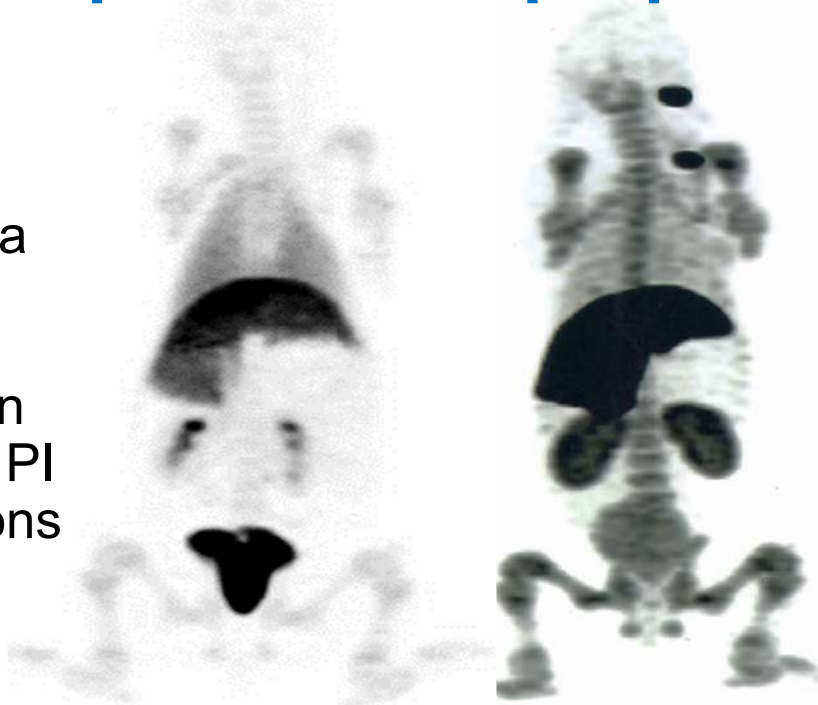


- Healthy Pig
- i.v. injection
- MW = 17 kDa
- 42 nmol
- 0.8 mCi
- MIP WB scan
- Start 20 min PI
- 5 bed positions
- 3 min/bed

^{68}Ga -labeled Tilmanocept CD206 Specificity

^{68}Ga]DTPA-dextran

^{68}Ga]DTPA-mannosyl-dextran



- Healthy Pig
- i.v. injection
- MW = 12 kDa
- 42 nmol
- 0.8 mCi
- MIP WB scan
- Start 20 min PI
- 5 bed positions
- 3 min/bed

- Healthy Pig
- i.v. injection
- MW = 17 kDa
- 42 nmol
- 0.8 mCi
- MIP WB scan
- Start 20 min PI
- 5 bed positions
- 3 min/bed

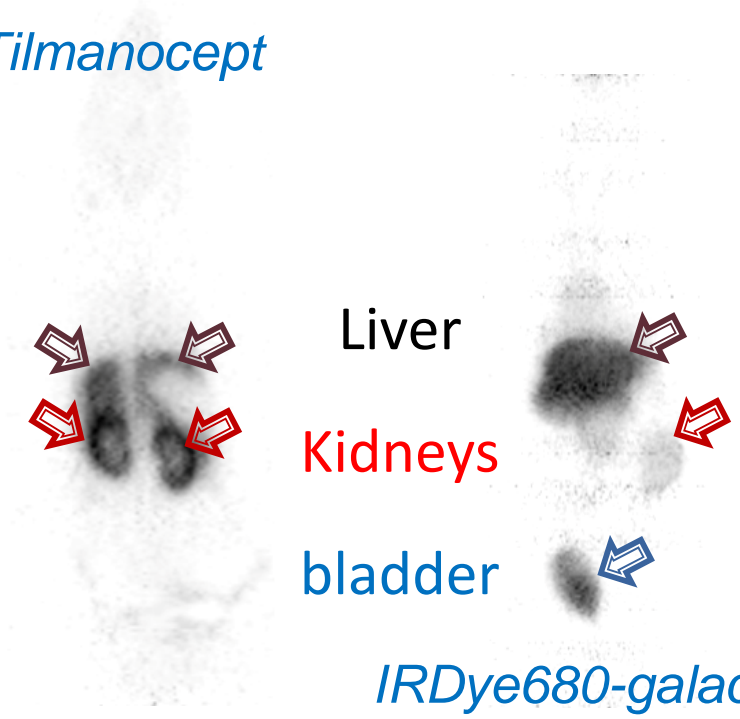
Demonstration of Receptor-Binding ⁶⁸Ga-labeled *IRDye800CW-Tilmanocept*

Experimental Design

- Radiolabel with gallium-68
 - *IRDye800CW-Tilmanocept*
 - *IRDye680-galactosyl-dextran*
- i.v. inject (0.1 nmol/g, ~0.2 mCi) healthy rats
- Perform 20-min dynamic PET imaging
- Wholebody imaging
- Excise, section & immunostain (CD206, *Alexa467*) kidneys
- View for co-localization of CD206 & tilmanocept

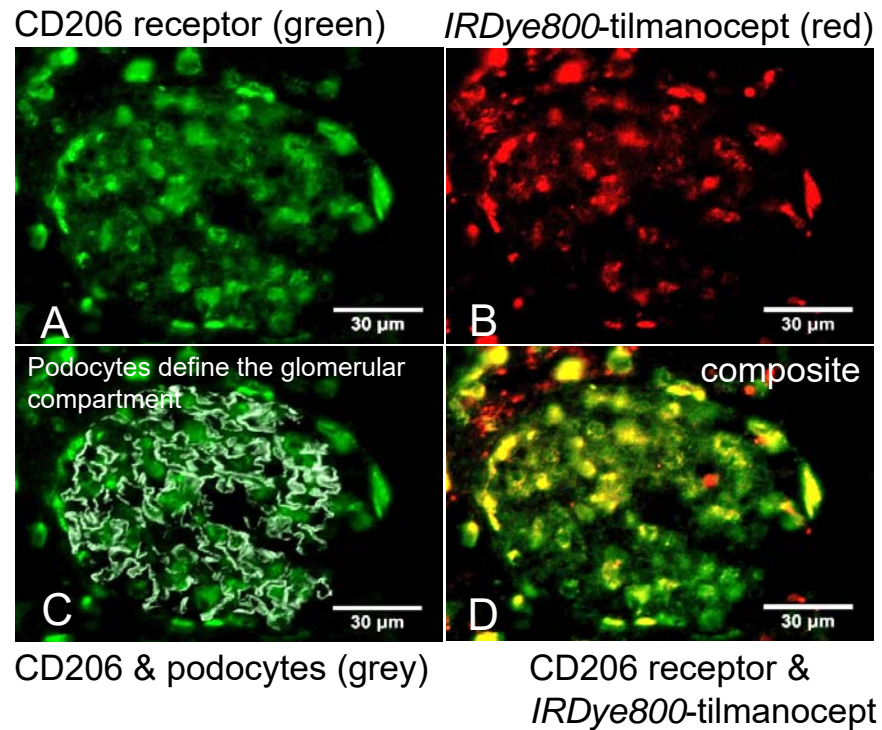
Ga-68 microPET Imaging

IRDye800CW-Tilmanocept



- Healthy Rats
- i.v. injection
- 42 nmol
- 0.8 mCi Ga-68
- 8 coronal sections
- Start 20 min PI
- 3 bed positions
- 5 min/bed

Demonstration of Disease Sensitivity Co-Localization of CD206 and Tilmanocept

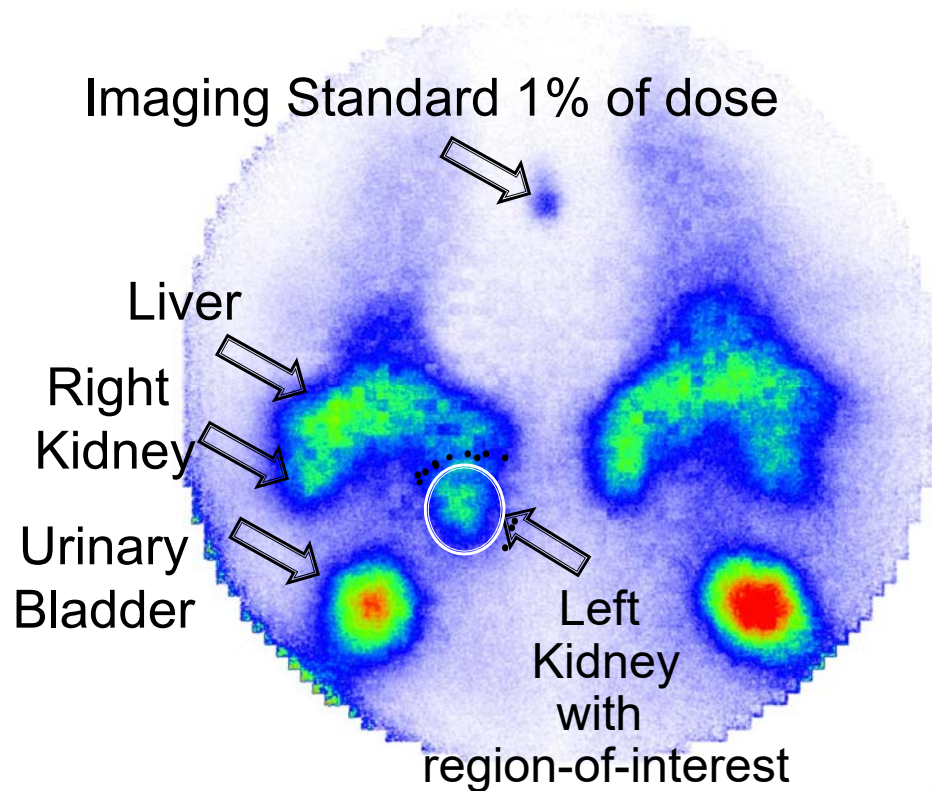


^{99m}Tc -Cy5-Tilmanocept Disease Sensitivity



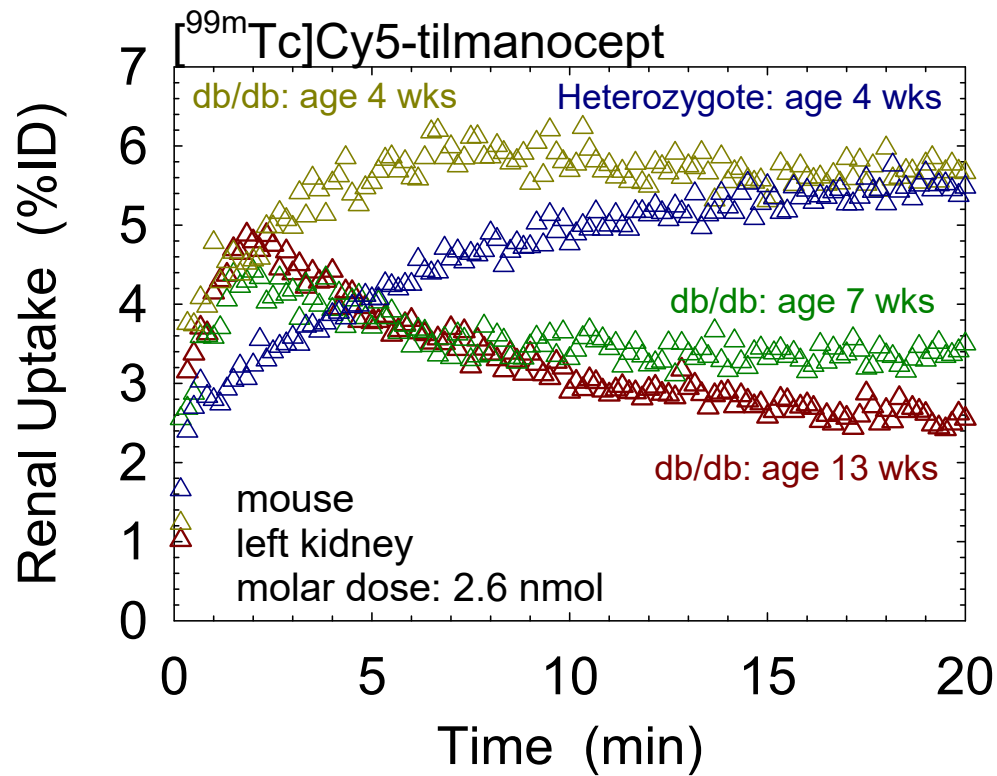
db/db mice
14 weeks old
0.1 nmol/g
0.1 mCi Tc-99m

^{99m}Tc -Cy5-Tilmanocept Functional Imaging



db/db mice
14 weeks old
0.1 nmol/g
0.1 mCi Tc-99m

^{99m}Tc -Cy5-Tilmanocept Functional Imaging



Conclusion

Demonstrated

- Tilmanocept binds to Mesangial Cells
- Kinetic sensitivity to diabetic nephropathy

Immediate Plans

- Phase 1 clinical trials
 - [^{99m}Tc]tilmanocept
 - [^{68}Ga]tilmanocept

Redesign

- Optimize chemical structure
 - Increase MW
 - Optimize affinity

Molecular Imaging

Hypothesis:
A receptor-binding
radiopharmaceutical can measure
tissue reserve

Molecular Imaging

Hypothesis (In Vivo Biopsy):
A radiopharmaceutical that binds
to a mesangial cell receptor can
measure intra-glomerular
mesangial cell volume

Acknowledge

Molecular Imaging of the Liver

R23 AM34768

R01 AM34768

PET Imaging of the Kidney

In Vivo Cancer and Molecular Imaging Program

P50 CA128346



UC San Diego
MOORES CANCER CENTER
IN VIVO CANCER AND
MOLECULAR IMAGING CENTER