

A direct comparison of tumor angiogenesis with ^{68}Ga -labeled NGR and RGD peptides in HT-1080 tumor xenografts using microPET imaging

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Abstract Peptides containing asparagine-glycine-arginine (NGR) and arginine-glycine-aspartic acid (RGD) sequence are being developed for tumor angiogenesis-targeted imaging and therapy. The aim of this study was to compare the efficacy of NGR- and RGD-based probes for imaging tumor angiogenesis in HT-1080 tumor xenografts. Two PET probes, ^{68}Ga -NOTA- G_3 -NGR2 and ^{68}Ga -NOTA- G_3 -RGD2, were successfully prepared. In vitro stability, partition coefficient, tumor cell binding, as well as in vivo biodistribution properties were also analyzed for both PET probes. The results revealed that the two probes were

both hydrophilic and stable in vitro and in vivo, and they were excreted predominately and rapidly through the kidneys. For both probes, the higher tumor uptake and lower accumulation in vital organs were determined. No significant difference between two probes was observed in terms of tumor uptake and the in vivo biodistribution properties. We concluded that these two probes are promising in tumor angiogenesis imaging. ^{68}Ga -NOTA- G_3 -NGR2 has the potential as an alternative for PET imaging in patients with fibrosarcoma, and it may offer an opportunity to noninvasively monitor CD13-targeted therapy.

Y. Shao and W. Liang contributed equally to this work.

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Introduction

It is well known that tumor growth and metastasis are angiogenesis-dependent. Angiogenesis is one of the most attractive targets for anticancer therapies and imaging in preclinical and clinical studies (Carmeliet and Jain 2000). Biological markers, which are selectively expressed at high levels in the endothelial cells of proliferating vessels and tumor cells in response to angiogenic signals, can be targeted for early detection and anticancer therapy (Jain et al. 2009; Ribatti et al. 2012). For instance, aminopeptidase N (APN/CD13) has multiple functions associated with the progression of malignancy, such as facilitating the invasion of endothelial cells into the tumor stroma, and enhancing the invasiveness of tumor cells, proliferation, secretion, and angiogenesis (Bhagwat et al. 2001; Wickstrom et al. 2011). Pasqualini et al. (1995, 2000) performed a series of studies demonstrating that phages expressing the asparagine-glycine-arginine (NGR) motif have strong binding affinity

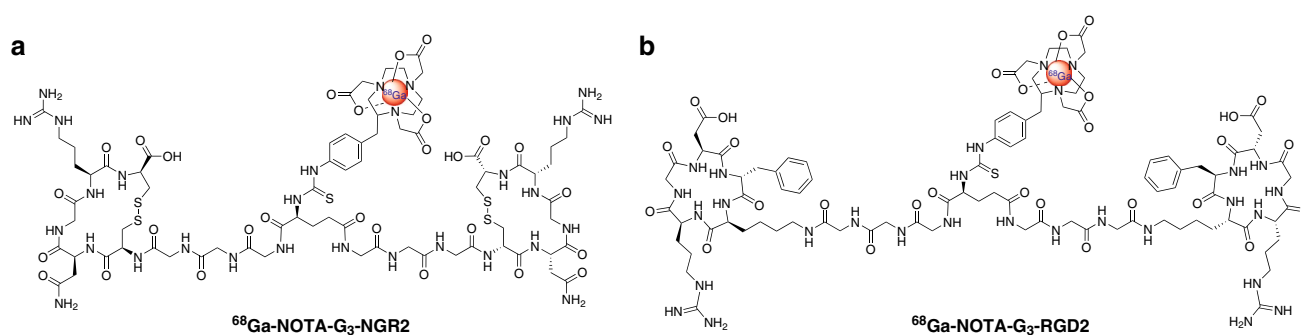


Fig. 1 Chemical structures of $^{68}\text{Ga-NOTA-G}_3\text{-NGR2}$ (a) and $^{68}\text{Ga-NOTA-G}_3\text{-RGD2}$ (b)

to neovascular tissue via the principal APN receptor. Peptides containing the NGR motif have been used as a homing agent for delivery of therapeutics, chemicals, peptides, cytokines, liposomes, and polymeric micelles to activated tumor neovascular tissue to enhance therapeutic efficacy and reduce systemic toxicity (Wang et al. 2012).

Oliveira et al. (2012) reported that the performance of a $^{99\text{m}}\text{Tc}$ -labeled arginine-glycine-aspartic acid (RGD) tracer was better than the NGR tracer in terms of human melanoma uptake. However, compared with RGD, Arap et al. (1998) reported that the tumor selectivity of NGR peptide was three-fold higher than RGD peptide, and that NGR peptide exhibited the greatest tumor selectivity of all the peptides tested from a phage peptide library. Apparently, the observations of Oliveira et al. differ from the *in vivo* phage display experiment.

Over the past decade, RGD peptides have been explored extensively for the tumor imaging. A variety of RGD-based radiopharmaceuticals have been used to image various tumors (Li et al. 2008; Liu et al. 2009, 2012), and some RGD-containing probes are currently in clinical studies (Beer et al. 2008). In terms of the *in vivo* phage display results, NGR-based probes are very promising for imaging tumor angiogenesis. However, as compared to RGD-containing probes, NGR peptides remained under-investigated. Most imaging studies using NGR-based probes focused on optical imaging with NGR-conjugated fluorescent dyes to assess the mechanisms of cellular uptake, monitor drug delivery, and characterize tumor responses at the cellular levels (Dirksen et al. 2004; Negussie et al. 2010).

Until recently, several radiolabeled NGR peptides have been reported (Chen et al. 2013; Faintuch et al. 2014; Jiang et al. 2012; Ma et al. 2013; Zhang et al. 2014), these studies indicated that a NGR-containing peptide can serve as an ideal candidate for targeted angiogenesis imaging in various tumors. For example, we recently synthesized two 1,4,7,10-tetraazacyclododecane-*N,N',N'',N'''*-tetraacetic acid (DOTA)-conjugated cyclic NGR peptides, monomer and dimer, and labeled them with ^{64}Cu for positron

emission tomography (PET) imaging (Chen et al. 2013). These peptides showed excellent tumor uptake in CD13-positive HT-1080 tumor xenografts. Overall, the preclinical results of radiolabeled NGR-containing peptides are quite promising, which may lead to future clinical applications.

Although radiolabeled NGR- and RGD-containing peptides can be used for tumor angiogenesis imaging, to the best of our knowledge, a direct comparison of *in vivo* imaging effectiveness between NGR- and RGD-containing peptide has not been pursued in depth. A question, regarding the preference of a radiolabeled probe (either NGR- or RGD-based probe) for the noninvasive angiogenesis imaging in tumors which are selectively co-expressed CD13 and $\alpha_v\beta_3/\alpha_v\beta_5$ integrin, remains unknown. A direct comparative preclinical study between radiolabeled NGR- and RGD-containing probes is therefore highly demanded.

To this end, we constructed a new NGR peptide, 1,4,7-triazacyclononane-*N,N',N''*-triacetic acid (NOTA)-conjugated dimeric Gly₃-CNGRC cyclic peptide (NOTA-G₃-NGR2; Fig. 1), and labeled with ^{68}Ga for microPET imaging in subcutaneous mouse HT-1080 fibrosarcoma xenografts, which co-expressed high levels of CD13 (Chen et al. 2013) and $\alpha_v\beta_3/\alpha_v\beta_5$ integrin (Kim et al. 2011). A ^{68}Ga -labeled NOTA-G₃-RGD2 peptide was used for a side by side comparison to determine the ability of noninvasive angiogenesis PET imaging in HT-1080 tumor xenografts.

Experimental section

General

All commercially obtained chemicals were of analytical grade and used without further purification. Cyclic NGR peptide [GGGCNGRC; disulfide Cys:Cys = 4-8] was purchased from CS Bio Company, Inc. (Menlo Park, CA, USA). The dimeric peptide E[Gly₃-c(CNGRC)]₂ was synthesized as described previously (Chen et al. 2013). *p*-SCN-Bn-NOTA (Macrocylics Inc., Dallas, TX, USA)

was conjugated with the dimeric NGR peptides via forming stable thiourea bonds. ⁶⁸Ga was obtained from a ⁶⁸Ge/⁶⁸Ga generator (produced by ITG Isotope Technologies Garching GmbH, Germany) and eluted with 4 mL of 0.05 M HCl. The semi-preparative high-performance liquid chromatography for peptide analysis was performed as described previously (Chen et al. 2013). Mass spectra were obtained using a Thermo-Electron Finnigan LTQ mass spectrometer equipped with an electrospray ionization source (Thermo Scientific, Waltham, MA, USA). Radiochemical purity (RCP) was measured by radio-TLC which was performed on silica gel-coated plastic sheets (Polygram SIL G, Macherey–Nagel) with sodium citrate (0.1 M, pH = 5). The results were read by Mini-scan (Bioscan, Washington, DC, USA) and Allchrom Plus software. The NOTA-G₃-RGD2 peptide was a generous gift from the National Institute of Biomedical Imaging and Bioengineering.

⁶⁸Ga labeling and formulation

NOTA-G₃-NGR2 and NOTA-G₃-RGD2 peptides were labeled with ⁶⁸Ga as described previously (Liu et al. 2009), with slight modifications. Briefly, peptides (15 nmol) were dissolved in 500 µL of 0.1 M sodium acetate buffer and incubated with 1,295 MBq of ⁶⁸Ga for 10 min at 42 °C. Then 30 µL of 1.25 M NaOAc buffer was added, and samples were then fixed on a Sep-Pak C18 SPE cartridge (Waters Corporation, Vienna, Austria) and washed with 5 mL water. ⁶⁸Ga-labeled peptides were eluted with 2 mL of 50 % ethanol saline solution, and concentrated by rotary evaporation. The product was dissolved in water for injection, and passed through a 0.22 µm Millipore filter into a sterile dosing vial for use in subsequent experiments.

Partition coefficient

The partition coefficient was determined by measuring the distribution of radioactivity in octanol and PBS. Approximately 5 KBq ⁶⁸Ga-NOTA-G₃-RGD2 or ⁶⁸Ga-NOTA-G₃-NGR2 was added to a vial containing 0.5 mL of octanol and 0.5 mL of PBS (pH 7.4), and vortexed vigorously for 15 min. Subsequently, the mixture was centrifuged at 12,500 rpm for 5 min. Aliquots of the aqueous and octanol layers were collected, measured in a gamma counter (Beijing PET CO., Ltd., China), and log*P* values were calculated (mean of *n* = 5).

Determination of in vitro stability

The stability of ⁶⁸Ga labeled peptides was assessed by mixing 0.1 mL (3.7 MBq) of ⁶⁸Ga-NOTA-G₃-RGD2 or ⁶⁸Ga-NOTA-G₃-NGR2 solution with 0.9 mL of fresh human serum at 37 °C or 0.1 mL of the saline at room

temperature with gentle shaking. The RCP was measured at various time points (1, 2, and 4 h).

Cell culture and animal model

The HT-1080 human fibrosarcoma and HT-29 human colon adenocarcinoma cell lines were maintained in high glucose DMEM culture medium supplemented with 10 % (v/v) fetal bovine serum (Gibco, USA), 1 % L-glutamine, and 1 % mycillin (Beyotime, China) in a humidified atmosphere of 5 % CO₂ at 37 °C. The cells were detached from the culture flasks using trypsin–ethylenediaminetetraacetic acid (EDTA), and then resuspended in medium for implantation. Using female nude BALB/c mice (4–6 weeks old, weighing 20–25 g), HT-1080 and HT-29 tumor xenografts were established by subcutaneously injecting 0.1 mL of tumor cell suspension (5 × 10⁶ cells) into the right upper flank. When tumors reached 500–1,000 mm³ in volume, mice were used for biodistribution and microPET imaging studies. All animal studies were approved by the Clinical Center at the FMMU.

Cell binding assay

In vitro integrin and CD13 receptor binding affinity and specificity of NOTA-G₃-RGD2 and NOTA-G₃-NGR2 in HT-1080 cells were assessed via competitive cell-binding assay. ¹²⁵I-labeled linear NGR peptide (sequence H-Tyr-Gly-Gly-Cys-Asn-Gly-Arg-Cys-OH) was prepared using the iodogen method and used as the radioligand for CD13, whereas ¹²⁵I-echistatin (Biotrend Chemikalien GmbH, Köln, Germany) was used as the radioligand for integrin. The cold peptides concentrations were at a range from 10^{−12} to 10^{−5} M. The IC₅₀ (50 % inhibitory concentration) values were obtained by fitting the data using nonlinear regression with GraphPad Prism (GraphPad Software, San Diego, CA, USA). Experiments were performed in triplicate.

MicroPET imaging

MicroPET studies were performed to compare the in vivo uptake characteristics of the two probes in HT-1080 (CD13+, integrin α_vβ₃+) and HT-29 (CD13−, integrin α_vβ₃−) bearing nude mice. Mice were intravenously injected with ~3.7 MBq of ⁶⁸Ga-NOTA-G₃-RGD2 or ⁶⁸Ga-NOTA-G₃-NGR2 on two consecutive days under isoflurane anesthesia (*n* = 5/group). Ten-minute static scans and helical CT images were acquired at 0.5, 1, and 2 h pi using Mediso NanoPET/CT scanner (Mediso, Budapest, Hungary). PET and CT fused images were obtained using the automatic fusion feature of the image fusion software (Mediso, Budapest, Hungary). ¹⁸F-FDG microPET images were acquired before ⁶⁸Ga-NOTA-G₃-RGD2 or ⁶⁸Ga-NOTA-G₃-NGR2 scanning.

For the blocking experiment, mice bearing HT-1080 tumor xenografts ($n = 5/\text{group}$) were co-injected with 20 mg/kg NOTA-G₃-RGD2 or NOTA-G₃-NGR2, and ~3.7 MBq of ⁶⁸Ga-labeled probes. The accumulation of radioactivity in the tumor was obtained from the mean value within the multiple regions of interest and converted to % ID/g, and then calculated the tumor to non-tumor (T/NT) ratio.

Biodistribution studies

Nude mice bearing human HT-1080 tumor xenografts were injected with ⁶⁸Ga-NOTA-G₃-RGD2 or ⁶⁸Ga-NOTA-G₃-NGR2 peptide (370 kBq/animal) via the tail vein. The mice were sacrificed by cervical dislocation at 60 min pi and dissected. Blood, tumor, major organs (heart, stomach, lung, spleen, liver, brain, kidneys, intestine, and bone), and muscle were harvested, weighed, and measured radioactivity in a gamma counter. Decay-corrected mean uptake (% ID/g) for a group of animals was calculated with standard deviations (mean \pm SD, $n = 5/\text{group}$).

Statistical analysis

Quantitative data were expressed as mean \pm SD. Means were compared using one-way ANOVA and Student's *t* test. *P* values <0.05 were considered to be statistically significant.

Results

Chemistry and radiochemistry

Through conjugation of E[Gly₃-c(NGR)]₂ and *p*-SCN-Bn-NOTA, NOTA-G₃-NGR2 was achieved in a yield of 62 %. The synthetic scheme of ⁶⁸Ga-NOTA-G₃-NGR2 is shown in Fig S1. The resulting peptide was then purified using HPLC and characterized by mass spectrometry (ESI-MS).

The electrospray ionization mass spectra of NOTA-G₃-NGR2 was determined to be $[M + 2H]^{2+} m/z = 1,002.75$ (Fig S2). The HPLC purity of the peptide used in subsequent experiments was >95 %. All labeling procedures were performed within 30 min. The decay-corrected yield ranged from 95 to 98 %, and the radiochemical purity was >99 % after purification (Fig S3). The specific activity of purified ⁶⁸Ga-NOTA-G₃-RGD2 and ⁶⁸Ga-NOTA-G₃-NGR2 was 13.47–16.44 MBq/nmol. The ⁶⁸Ga-labeled probes were used immediately after formulation. The chemical structures of ⁶⁸Ga-NOTA-G₃-NGR2 and ⁶⁸Ga-NOTA-G₃-RGD2 are shown in Fig. 1.

Log P value

The partition coefficient ($\log P$) of ⁶⁸Ga-NOTA-G₃-RGD2 and ⁶⁸Ga-NOTA-G₃-NGR2 were determined to be -3.01 ± 0.17 and -2.76 ± 0.20 , respectively, suggesting that both ⁶⁸Ga-labeled peptides are hydrophilic.

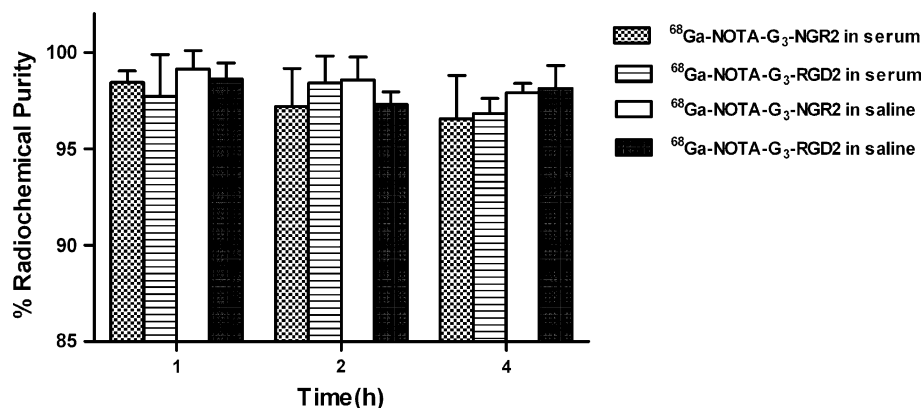
In vitro stability

The in vitro stability of ⁶⁸Ga-NOTA-G₃-NGR2 and ⁶⁸Ga-NOTA-G₃-RGD2 in PBS (pH 7.4) at room temperature and fresh human serum at 37 °C are shown in Fig. 2. After 4 h of incubation, more than 97 % of ⁶⁸Ga-NOTA-G₃-NGR2 and more than 96 % of ⁶⁸Ga-NOTA-G₃-RGD2 remained intact in PBS as well as human serum.

Cell-based binding assay

HT-1080 cells were used to measure the in vitro binding affinity of NOTA-G₃-RGD2 to integrin and NOTA-G₃-NGR2 to CD13 using competitive cell-binding assays. Increasing amounts of NOTA-G₃-RGD2 or NOTA-G₃-NGR2 were able to fully suppress the binding of ¹²⁵I-echistatin to integrin or ¹²⁵I-NGR to CD13 in a concentration-dependent manner. Western blot results of CD13 and integrin α_v expression in

Fig. 2 In vitro stability of ⁶⁸Ga-NOTA-G₃-RGD2 and ⁶⁸Ga-NOTA-G₃-NGR2 in saline at room temperature and human serum at 37 °C for 1, 2, and 4 h



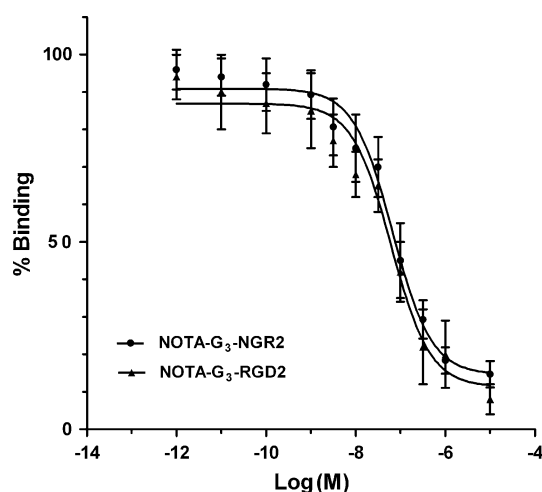


Fig. 3 In vitro inhibition of the binding of $\text{NOTA-G}_3\text{-NGR2}$ and $\text{NOTA-G}_3\text{-RGD2}$ to CD13 and integrin on HT-1080 cells by ^{125}I -NGR and ^{125}I -echistatin, respectively. The IC_{50} values of $\text{NOTA-G}_3\text{-RGD2}$ and $\text{NOTA-G}_3\text{-NGR2}$ were 54.54 ± 6.42 and 65.99 ± 1.59 nM, respectively ($n = 3$); ($F = 3.883$, $P > 0.05$)

HT-1080 and HT-29 cells are shown in Fig S4, respectively. The data of cell uptake and efflux study are shown in Fig S5. The binding curves are shown in Fig. 3. The IC_{50} values of $\text{NOTA-G}_3\text{-NGR2}$ and $\text{NOTA-G}_3\text{-RGD2}$ were 65.99 ± 1.59 and 54.54 ± 6.42 nM, respectively ($F = 3.883$, $P > 0.05$).

MicroPET imaging

Static microPET scans were performed at multiple time points (0.5, 1, and 2 h) in HT-1080 and HT-29 tumor xenografts ($n = 5/\text{group}$). The HT-1080 tumor xenografts were clearly visible with good tumor-to-background contrast for both tracers ($^{68}\text{Ga-NOTA-G}_3\text{-RGD2}$ and $^{68}\text{Ga-NOTA-G}_3\text{-NGR2}$) at all time points. For $^{68}\text{Ga-NOTA-G}_3\text{-NGR2}$, tumor uptake was 6.42 ± 2.21 , 5.43 ± 2.76 , and 4.02 ± 2.03 % ID/g, whereas for $^{68}\text{Ga-NOTA-G}_3\text{-RGD2}$, tumor uptake was 7.84 ± 1.94 , 6.26 ± 1.63 , and 5.13 ± 1.88 % ID/g at 0.5, 1, and 2 h pi, respectively. There was no significant difference in tumor uptake of the two probes in HT-1080 tumor xenografts at all measured time points ($P > 0.05$). For CD13 and integrin $\alpha_v\beta_3$ negative HT-29 tumor model, both probes exhibited minimal tumor uptake. Representative decay-corrected coronal image slices are shown in Fig. 4. H&E and indirect immunohistochemistry of CD13 receptor/integrin α_v of HT-1080 tumor xenografts are shown in Fig S6. MicroPET images of ^{18}F -FDG are shown in Fig S7.

Co-injection of 20 mg/kg $\text{NOTA-G}_3\text{-RGD2}$ or $\text{NOTA-G}_3\text{-NGR2}$ peptide led to significant tumor uptake reductions. The tumor uptake of $^{68}\text{Ga-NOTA-G}_3\text{-NGR2}$ was calculated to be 1.43 ± 0.44 % ID/g after co-injection with $\text{NOTA-G}_3\text{-NGR2}$ at 1 h pi. Similarly, the uptake of $^{68}\text{Ga-NOTA-G}_3\text{-RGD2}$ was

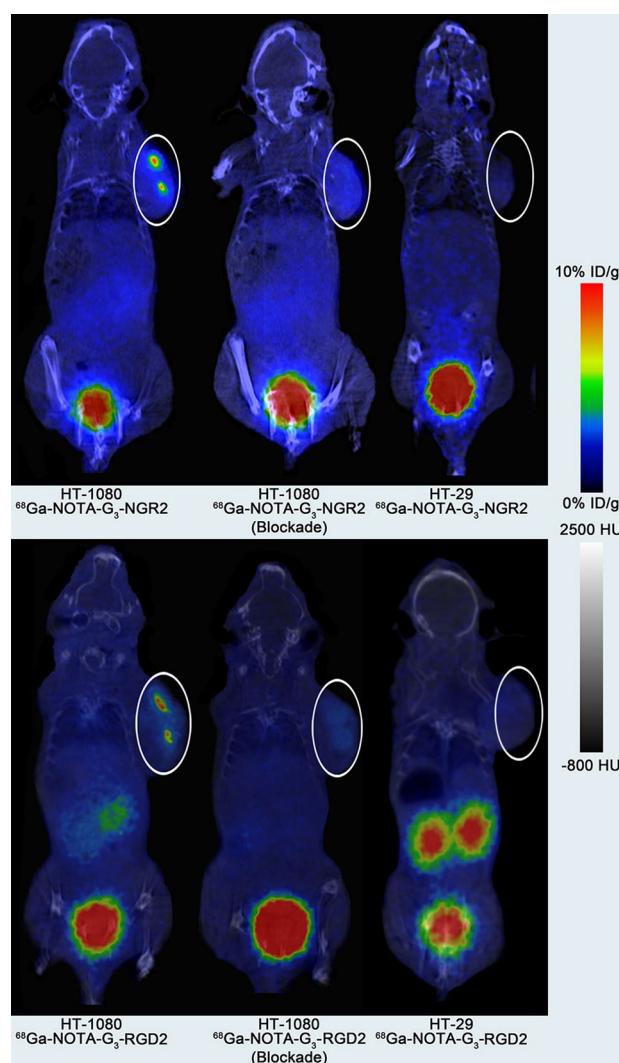


Fig. 4 Representative decay-corrected coronal image slices of mice bearing HT-1080 or HT-29 tumors after intravenous administration of $^{68}\text{Ga-NOTA-G}_3\text{-NGR2}$ or $^{68}\text{Ga-NOTA-G}_3\text{-RGD2}$ at 1 h pi, and the co-injection of non-labeled $\text{NOTA-G}_3\text{-NGR2}$ or $\text{NOTA-G}_3\text{-RGD2}$ as blocking agents. Tumors are indicated using circles

calculated to be 1.28 ± 0.65 % ID/g after co-injection with $\text{NOTA-G}_3\text{-RGD2}$ at 1 h pi vs. 6.26 ± 1.63 % ID/g without blocking. There was no significant difference in the targeting specificity of the two probes ($P > 0.05$) (Fig. 5a, c). Both probes cleared rapidly from the blood, and were excreted mainly through the kidneys. The accumulation of the probes in most other organs was very low (Fig. 5c). A one-sample t test revealed that the liver accumulation of the two probes was significantly lower than that of $^{64}\text{Cu-DOTA-NGR2}$ (Chen et al. 2013) ($P < 0.01$) at 1 h pi.

The T/NT ratios of the two probes at 1 h were calculated and compared in Fig. 5b. The ratio of HT-1080 tumor xenografts uptake to muscle, liver, and kidney and blood accumulation at 1 h pi was calculated to be 7.76 ± 1.16 ,

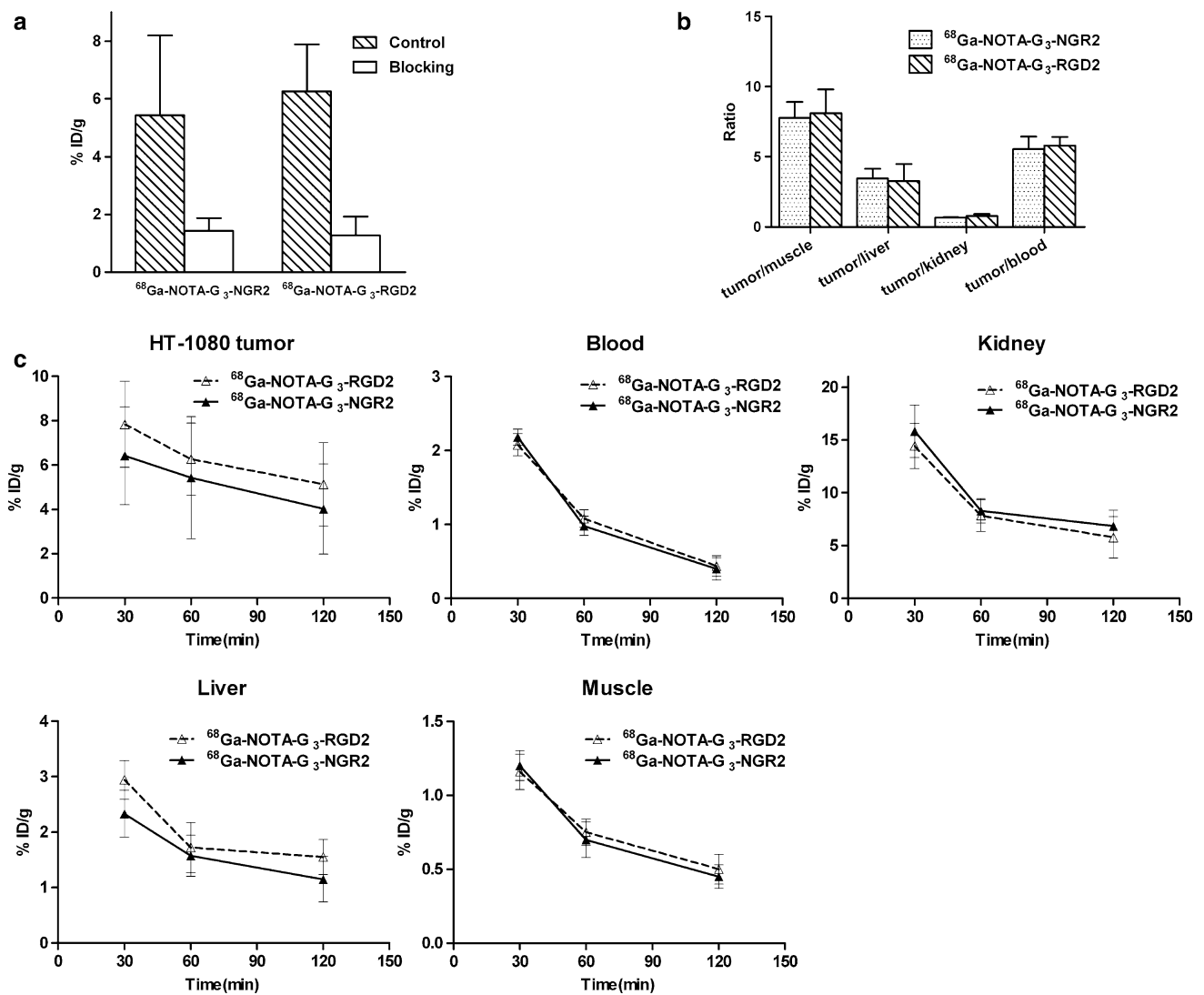


Fig. 5 **a** The uptake of ^{68}Ga -NOTA- G_3 -RGD2 or ^{68}Ga -NOTA- G_3 -NGR2 peptide with or without non-labeled NOTA- G_3 -RGD2 or NOTA- G_3 -NGR2 in HT-1080 tumor-bearing mice at 1 h pi was quantified using microPET imaging. There was no significant difference in the targeting specificity of the two probes ($P > 0.05$). **b** The ratio of HT-1080 tumor uptake to muscle, liver, kidney, and blood at 1 h pi quantified by micro-

PET imaging in HT-1080 tumor bearing mice. There was no significant difference in any ratios between the two probes ($P > 0.05$). **c** Decay-corrected radioactivity accumulation from quantitative microPET imaging analysis of the tumors, blood, kidney, liver, and muscle of HT-1080 tumor-bearing mice at 30, 60, and 120 min after injection with 3.7 MBq of ^{68}Ga -NOTA- G_3 -RGD2 or ^{68}Ga -NOTA- G_3 -NGR2

3.47 ± 0.69 , 0.66 ± 0.04 , and 5.54 ± 0.89 for ^{68}Ga -NOTA- G_3 -NGR2, respectively; the corresponding values for ^{68}Ga -NOTA- G_3 -RGD2 were 8.12 ± 1.69 , 3.26 ± 1.23 , 0.78 ± 0.14 , and 5.79 ± 0.61 . There were no significant differences in all these ratios between ^{68}Ga -NOTA- G_3 -NGR2 and ^{68}Ga -NOTA- G_3 -RGD2 ($P > 0.05$).

Biodistribution studies

Ex vivo biodistribution studies for the two probes were performed at 1 h pi using nude mice bearing HT-1080 tumor xenografts (Fig. 6). The absolute tumor uptake of ^{68}Ga -NOTA- G_3 -NGR2 and ^{68}Ga -NOTA- G_3 -RGD2 was

comparable ($P > 0.05$). At 1 h pi, the HT-1080 tumor uptake of ^{68}Ga -NOTA- G_3 -RGD2 and ^{68}Ga -NOTA- G_3 -NGR2 reached 6.89 ± 2.34 and 5.18 ± 1.06 % ID/g, respectively. Both probes exhibited minimal uptake in most organs, except for a high accumulation and retention in the kidneys. These uptake values were consistent with those calculated from microPET imaging.

Discussion

PET-CT imaging applications are playing an increasing role in both preclinical and clinical studies. It is

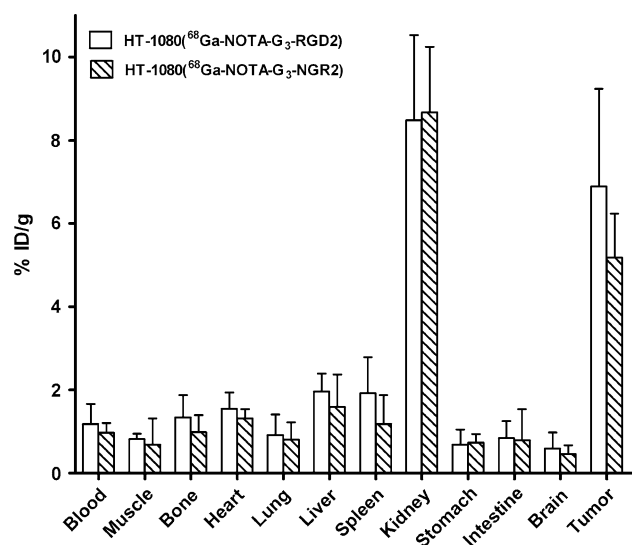


Fig. 6 Decay-corrected biodistribution of ^{68}Ga -NOTA-G₃-RGD2 and ^{68}Ga -NOTA-G₃-NGR2 at 1 h pi in HT-1080 tumor bearing mice ($n = 5/\text{group}$, mean \pm SD)

well-documented that ^{18}F -FDG, a most commonly used PET radiopharmaceutical, is not a target-specific probe. Therefore, it may not be suitable to assess angiogenesis in malignancies directly. After labeling with positron-emitting radionuclides, biologically active molecules which can specifically recognize the receptors overexpressed in tumor tissue can be used efficiently for tumor imaging. Selectively targeting biomarkers can themselves serve as analytical tools before commencing expensive therapies (Goggi et al. 2013; Josephson and Rudin 2013). These images might also reveal the therapeutic response in preclinical and clinical studies at the early stages. In addition, rationally designed precursors could be labeled with different radionuclides for diagnosis and therapy in nuclear medicine. The co-development of diagnostic and therapeutic agents may allow the more efficient identification of patients that are likely to respond to expensive targeted therapies. The aim of our study was to select appropriate probes for imaging angiogenesis in HT-1080 tumor xenografts. To this end, we prepared ^{68}Ga -NOTA-G₃-NGR2 and compared its tumor targeting efficacy with ^{68}Ga -NOTA-G₃-RGD2 by using microPET imaging.

As compared to the commonly used positron-emitting nuclides, such as ^{18}F , ^{11}C , ^{13}N , ^{15}O , and ^{64}Cu , ^{68}Ga has certain advantages. ^{68}Ga is a cost-effective radioisotope that can be obtained easily from a $^{68}\text{Ge}/^{68}\text{Ga}$ generator, allowing clinical studies to be performed without an on-site cyclotron. It has an ideal half-life (67.7 min), and its positron abundance (89 %) is suitable for PET imaging (Riss et al. 2011). Compared with ^{11}C and ^{18}F labeling procedures, the ^{68}Ga labeling is relatively simple, efficient, reproducible,

and affordable. A kit formulation can be even set up, which greatly facilitates clinical applications (Li et al. 2008).

In terms of radiolabeling, ^{68}Ga has to be complexed with bifunctional chelators (Roesch and Riss 2010), such as NOTA and DOTA. Compared with DOTA, NOTA has the following advantages for $^{68}\text{Ga}^{3+}$ labeling. Firstly, the size of the central cavity in NOTA is smaller than that in DOTA, which is more suitable for $^{68}\text{Ga}^{3+}$. Therefore, ^{68}Ga -NOTA complex is relatively more stable than ^{68}Ga -DOTA complex. The Ga-NOTA complex is even stable in 6 M nitric acid over a period of 6 months (Parker 1990). Secondly, the slow complexation kinetics of DOTA requires longer reaction times and higher temperatures, whereas NOTA can be complexed with ^{68}Ga nearly quantitatively at room temperature within shorter incubation time. Taken together, NOTA is a better choice for ^{68}Ga labeling to form a stable complex (Correia et al. 2011; Zeglis and Lewis 2011). In addition, compared with other radiometal-DOTA complexes, such as ^{64}Cu -DOTA, ^{68}Ga -NOTA complex is relatively more stable. ^{64}Cu -DOTA complex often results in increased transchelation in the liver, causing an unnecessary high hepatic uptake of ^{64}Cu . In contrast, ^{68}Ga -NOTA complexes can be less transchelated. Our data in this study were consistent with these findings. For instance, the liver uptake of ^{68}Ga -NOTA-G₃-NGR2 and ^{68}Ga -NOTA-G₃-RGD2 was 2.33 ± 0.42 and 2.94 ± 0.35 % ID/g at 0.5 h pi, respectively, which was lower than that of our previously reported ^{64}Cu -DOTA-NGR2 (Chen et al. 2013) ($P < 0.05$). The low liver and vital organs uptake, and rapid renal excretion resulted in reduced radiation doses in the major organs, leading to favorable translation into the clinic.

One challenge of using an active targeting strategy is the low degree or heterogeneity of receptor expression in different tumor cells (Shamay et al. 2014). It was reported that the construction and blood flow of tumor vessels are disordered and varying, and that biomarkers of tumor vessels are heterogeneous and can be absent or barely detectable in mature vessels (Carmeliet and Jain 2000). Several studies reported that the relationship between the tumor uptake of RGD peptides and integrin $\alpha_v\beta_3$ expression in some subcutaneous tumor-bearing models was linearly dependent (Haubner et al. 2005; Schnell et al. 2009), and tumor blood vessel density was also correlated with tumor uptake. Although HT-1080 tumor xenografts co-express CD13 and $\alpha_v\beta_3/\alpha_v\beta_5$ integrin, identification of these biomarkers in patients remains a challenge using conventional clinical manifestation and other noninvasive testing. Therefore, it is highly demanded to develop a non-invasive approach to accurately assess the status of tumor vessels.

In our study, the tumor uptake of ^{68}Ga -NOTA-G₃-RGD2 and ^{68}Ga -NOTA-G₃-NGR2 was 6.26 ± 1.63 and 5.43 ± 2.76 % ID/g at 1 h pi, respectively ($P > 0.05$). After blocking with NOTA-G₃-NGR2, the tumor uptake of

^{68}Ga -NOTA- G_3 -NGR2 was reduced to 1.43 ± 0.44 % ID/g at 1 h pi ($P < 0.05$). Similarly, after blocking with NOTA- G_3 -RGD2, the tumor uptake of ^{68}Ga -NOTA- G_3 -RGD2 was reduced to 1.28 ± 0.65 % ID/g at 1 h pi ($P < 0.05$). The successful tumor blocking of radiolabeled probes with non-radiolabeled probes suggested that both probes specifically bind to the corresponding receptors. The HT-1080 tumor uptake and targeting specificity of ^{68}Ga -NOTA- G_3 -NGR2 and ^{68}Ga -NOTA- G_3 -RGD2 were comparable. Although the receptors for RGD and NGR are different, our results suggest that ^{68}Ga -NOTA- G_3 -NGR2 and ^{68}Ga -NOTA- G_3 -RGD2 are both promising agents for imaging tumor angiogenesis with similar effects in HT-1080 tumor xenografts. In addition, our PET-CT imaging results revealed the heterogeneous expression of CD13 and $\alpha_v\beta_3/\alpha_v\beta_5$ integrin in subcutaneous HT1080 tumor xenografts. This study indicates that the detection of CD13 receptor may provide an alternative in patients with fibrosarcomas for tumor diagnosis and treatment monitoring.

Biodistribution data and PET-CT images suggest a predominant renal elimination of the probes. It was reported that proteins bind to the luminal membrane of tubular cells mainly via positively charged groups (Mogensen and Solling 1977). Several studies have shown that the renal uptake of peptides and antibody fragments is influenced by the introduction or substitution of positively- or negatively-charged groups. Decreased renal uptake without reduced tumor uptake (Miao et al. 2006; García Garayoa et al. 2008) was displayed by the substitution of a negatively charged glutamic acid residue, and increased renal accumulation (Dijkgraaf et al. 2007) was displayed by the introduction of a positively charged lysine residue into the linker of RGD moieties. To determine the charge of NGR-based probe, we loaded ^{68}Ga -NOTA- G_3 -NGR2 on a strong cation exchange cartridge (Merck LiChroult SCX). The probe can be quantitatively captured by the SCX cartridge, and eluted in PBS, confirming that the probe is positively charged under the physiological condition. The rapid renal excretion of ^{68}Ga -NOTA- G_3 -NGR2 may be due to the positive charges.

In our study, the targeted ligands in ^{68}Ga -NOTA- G_3 -NGR2 and ^{68}Ga -NOTA- G_3 -RGD2 are different whereas the linker and chelator remain the same. The cyclization of G_3 -RGD2 was through the coupling of the amino group (N-terminus of phenylalanine) with the carboxyl branch in lysine residue, whereas in the case of NGR, the peptide (CNGRC) was cyclized via a disulfide bridge. The cyclization by a disulfide bridge has the advantage of simplicity as compared to amide coupling. Negussie et al. (2010) performed a study of cyclic NGR peptide coupled with thermally sensitive liposomes, and reported that the disulfide bond of cNGR might be unstable due to biodegradation.

They also reported that cyclization by coupling the amino group at the N-terminus of lysine with the carboxyl branch of glutamic acid could be more robust, resulted in an enhanced binding affinity for tumor targeting applications. Contrarily, Soudy et al. (2012) reported that a cyclic NGR-containing peptide (CPNGRC, cyclized via disulfide bridge) remains an excellent binding affinity to APN, and led to a 30-fold lower IC_{50} for the inhibition of APN proteolytic activity. Nevertheless, there was no significant difference between two probes in terms of binding affinity in our study. Although both probes in this study exhibited favorable pharmacokinetics (PK), such as slow washout in tumor, rapid clearance from the blood, and low uptake in the major organs (Tanaka and Fukase 2008), additional modification of chemical structure can be performed to further optimize the PK.

It is now generally accepted that if only one molecule is blocked in tumor progression, tumors may use other alternatives. Therefore, the requirement for multi-targeted probes and/or cocktails of antiangiogenic drugs has been proposed. Our study demonstrated that NGR- and RGD-based probes were both promising agents for tumor angiogenesis imaging in HT-1080 tumor xenografts, which encourages us to construct a dual-targeting probe containing both NGR and RGD motifs. This strategy may further improve current PET images in tumors that co-express CD13 and integrin $\alpha_v\beta_3/\alpha_v\beta_5$.

Conclusion

In this study, we compared ^{68}Ga -NOTA- G_3 -NGR2 and ^{68}Ga -NOTA- G_3 -RGD2 probes to determine their abilities of noninvasively imaging angiogenesis in HT-1080 tumor xenografts using microPET imaging. Our results demonstrated that both probes exerted similar effects in this regard. The low liver uptake and rapid renal excretion of these two probes facilitated their clinical translation. In future studies, RGD- and NGR-based probes could be labeled with other therapeutic radionuclides for tumor treatment. A dual targeting probe containing NGR and RGD motifs may be applied for simultaneously imaging both CD13 and integrin receptors.

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Conflict of interest The authors declare that they have no conflict of interest.

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