

P-173**Development and First-in-Man Study of a Novel Tetrapeptidic CCK-2R-Targeted Compound with Improved Metabolic Stability and Pharmacokinetics**

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Objectives: In order to develop an improved CCK-2R ligand for imaging and radioligand therapy of medullary thyroid carcinoma (MTC), we synthesized and evaluated the novel ligand DOTA-CCK-66 (DOTA- γ -glu-PEG₃-Trp-(N-Me)Nle-Asp-1-Nal-NH₂). Its design is based on the four C-terminal amino acids of DOTA-MGS5 (DOTA-glu-Ala-Tyr-Gly-Trp-(N-Me)Nle-Asp-1-Nal-NH₂), a γ -glu-PEG₃ linker and a DOTA moiety for labeling with radiometals. As theranostic applications are desired, we carried out a comparative study on ⁶⁴Cu- ⁶⁷Ga- and ¹⁷⁷Lu-labeled DOTA-CCK-66 as well as DOTA-CCK-66.2 (glu instead of γ -glu) and the reference, DOTA-MGS5, by state-of-the-art experiments *in vitro* and *in vivo*.

Methods: ⁶⁴Cu- and ⁶⁷Ga-labeling was carried out at 90°C within 15 min (1.0 M sodium acetate buffer, pH = 5.5, and 2.5 M HEPES buffer, respectively). ¹⁷⁷Lu-labeling was carried out at 90°C within

15 min (1.0 M sodium acetate buffer, $pH = 5.5$, 0.1 M sodium ascorbate). CCK-2R affinity (IC_{50}) was examined on AR42J cells. Studies on the metabolic stability were conducted *in vitro* (human serum, 37°C, 72 h) and *in vivo* (murine serum and urine, 30 min post-injection (p.i.)). Biodistribution studies and μ SPECT/CT imaging at 1 and 24 h p.i. were carried out in AR42J tumor-bearing CB17-SCID mice.

Results: Synthesis via Fmoc-based solid-phase peptide synthesis yielded 5–10% reversed-phase liquid chromatography-purified labeling precursor. All labelings proceeded almost quantitatively. Irrespective of the nuclide (copper, gallium, lutetium) used, high CCK-2R affinity was determined for all three compounds (IC_{50} : 3.6–6.0 nM). Lipophilicity (expressed as *n*-octanol/phosphate-buffered saline solution distribution coefficient; $\log D_{7.4}$) was similarly low for all three CCK-2R ligands, irrespective if ^{64}Cu - ^{67}Ga - or ^{177}Lu -labeled ($\log D_{7.4}$: -3.0 to -2.2). The amount of intact tracer was high for both [^{177}Lu]Lu-DOTA-MGS5 and [^{177}Lu]Lu-DOTA-CCK-66 *in vitro* in human serum (95–98%) and *in vivo* in murine serum (79–82%) but distinctly higher for the latter in murine urine ($23.7 \pm 9.2\%$ versus $77.8 \pm 2.3\%$).

[^{177}Lu]Lu-DOTA-MGS5 exhibited slightly increased activity levels in the tumor at 24 h p.i. than [^{177}Lu]Lu-DOTA-CCK-66 ($11.0 \pm 1.2\%$ ID/g versus $8.6 \pm 1.1\%$ ID/g) but also elevated levels in all other organs, which is why overall tumor-to-background ratios were similar for both compounds. Beyond that, [^{67}Ga]Ga-DOTA-CCK-66 exhibited high tumor accumulation at 1 h p.i. ($19.4 \pm 3.5\%$ ID/g) and low uptake in non-tumor organs (in %ID/g; blood: 0.61 ± 0.07 , liver: 0.31 ± 0.02 , pancreas: 0.23 ± 0.07 , stomach: 1.81 ± 0.19 , kidney: 2.51 ± 0.49). [^{68}Ga]Ga-DOTA-MGS5 displayed slightly higher tumor values ($23.2 \pm 4.7\%$ ID/g) but also significantly higher activity levels in all non-tumor organs (in %ID/g; blood: 1.47 ± 0.82 , liver: 1.02 ± 0.52 , pancreas: 1.83 ± 0.42 , stomach: 5.12 ± 1.13 , kidney: 5.71 ± 1.38), which is why tumor-to-background ratios were noticeably higher for [^{67}Ga]Ga-DOTA-CCK-66 than for [^{68}Ga]Ga-DOTA-MGS5 [1]. μ SPECT/CT studies confirmed the excellent biodistribution of [^{67}Ga]Ga-/[^{177}Lu]Lu-DOTA-CCK-66.

A proof-of-concept study using [^{68}Ga]Ga-DOTA-CCK-66 in a patient suffering from MTC revealed a favorable biodistribution of the tracer at 60 min p.i., which was highly accumulated in several MTC metastases.

Conclusion: Due to its simple design and thus improved metabolic stability, [$^{nat/67}\text{Ga}$]Ga-/[$^{nat/177}\text{Lu}$]Lu-DOTA-CCK-66 revealed favorable *in vitro* and *in vivo* data. In particular, similar (^{177}Lu -labeled) or even higher ($^{67/68}\text{Ga}$ -labeled) tumor-to-background ratios were observed in all organs as compared to [^{177}Lu]Lu-/[^{68}Ga]Ga-DOTA-MGS5. A first-in-man study in a MTC patient using [^{68}Ga]Ga-DOTA-CCK-66 showed several metastases and an excellent biodistribution pattern, which is why further patient studies applying [^{68}Ga]Ga- and [^{177}Lu]Lu-DOTA-CCK-66 are warranted.

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Reference

1. Klingler et al., J Nucl Med. 2019;60:1010–1016.