

Important Considerations for the Use of ¹²⁵I-Labeled Proteins to Examine ADME Characteristics of Iodinated Compounds

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INTRODUCTION

Radiolabeled pharmaceutical compounds have been used to examine the absorption, distribution, metabolism and excretion (ADME) patterns of new drugs for decades. These studies rely on accurate *in vivo* drug concentration data (parent molecule and metabolites). Small molecule drugs are often radiolabeled with ¹⁴C because they can be synthesized to reside in specific stable molecular positions, which provides reliable quantitation and imaging. Stable radiolabeling of large molecules with ¹⁴C is often difficult and expensive. Most often large molecules are labeled with ¹²⁵I, which is relatively quick, easy and much less expensive, but ¹²⁵I-labeled proteins have issues that investigators need to be aware of. The stability of ¹²⁵I on large molecules is highly variable *in vivo* due to biodehalogenation. Anywhere from 5% to 80% of the ¹²⁵I can detach from a protein *in vivo* and result in confounding data due to free ¹²⁵I in tissues. Therefore ADME studies using ¹²⁵I-labeled large molecules must account for biodehalogenation and investigators and regulators must understand the possible effects on the interpretation of ADME data. The objectives of this study were to evaluate the use of ¹²⁵I in ADME studies, which include the determination of mass balance (MB) of total radioactivity from an ¹²⁵I-labeled protein (¹²⁵I-Ig_{rat}), and tissue distribution (TD) of the drug-derived radioactivity using quantitative whole-body autoradiography (QWBA).

MATERIALS AND METHODS

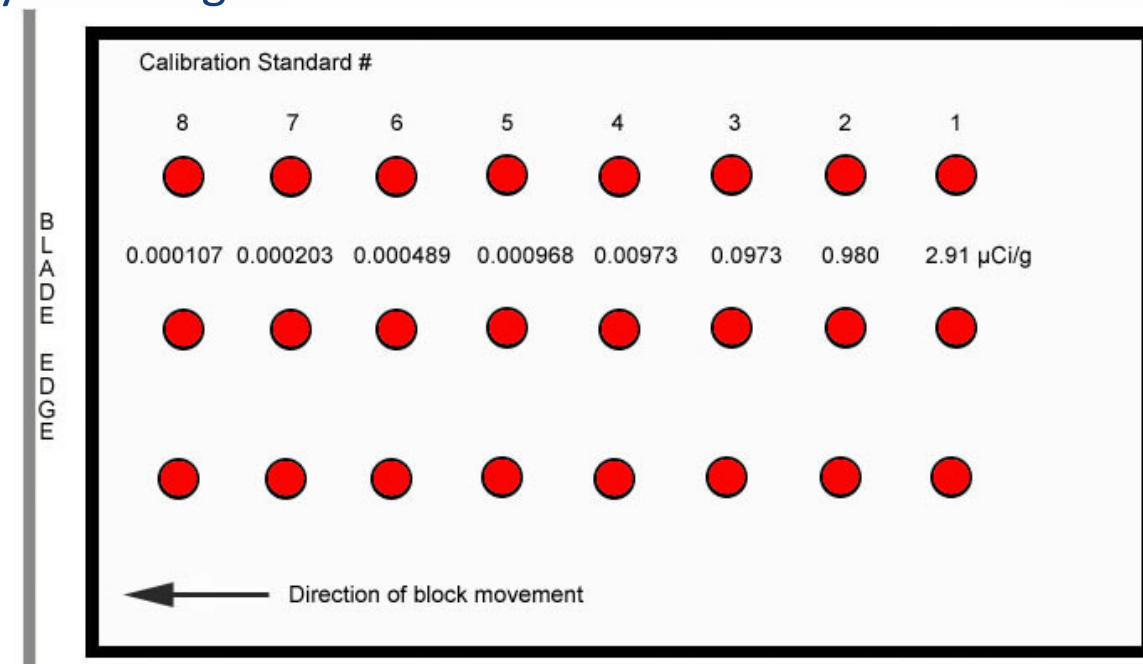
- 1) A Rat ADME study (MB and QWBA TD studies) of Sodium-¹²⁵Iodide (¹²⁵I-Na) (American Radiolabeled Chemicals, St. Louis, MO) and Rat ¹²⁵I-Ig_{rat} (Vitrox, Placentia, CA) were conducted to examine the effect of biodehalogenation on determining ADME properties of iodinated large molecules.
- 2) A set of ¹²⁵I Blood calibration standards were constructed and examined to determine the upper and lower limits of quantitation for phosphor imaging technology (used for QWBA TD).
- 3) The effect of high concentrations of ¹²⁵I in closely associated tissues during QWBA image analysis (a.k.a. radioactive "flaring") was examined.
- 4) The effect of administering NaI via drinking water to saturate iodine-organifying tissues (e.g. thyroid, skin, salivary gland), and iodine transporters (kidney, stomach).

In Vivo Study Design

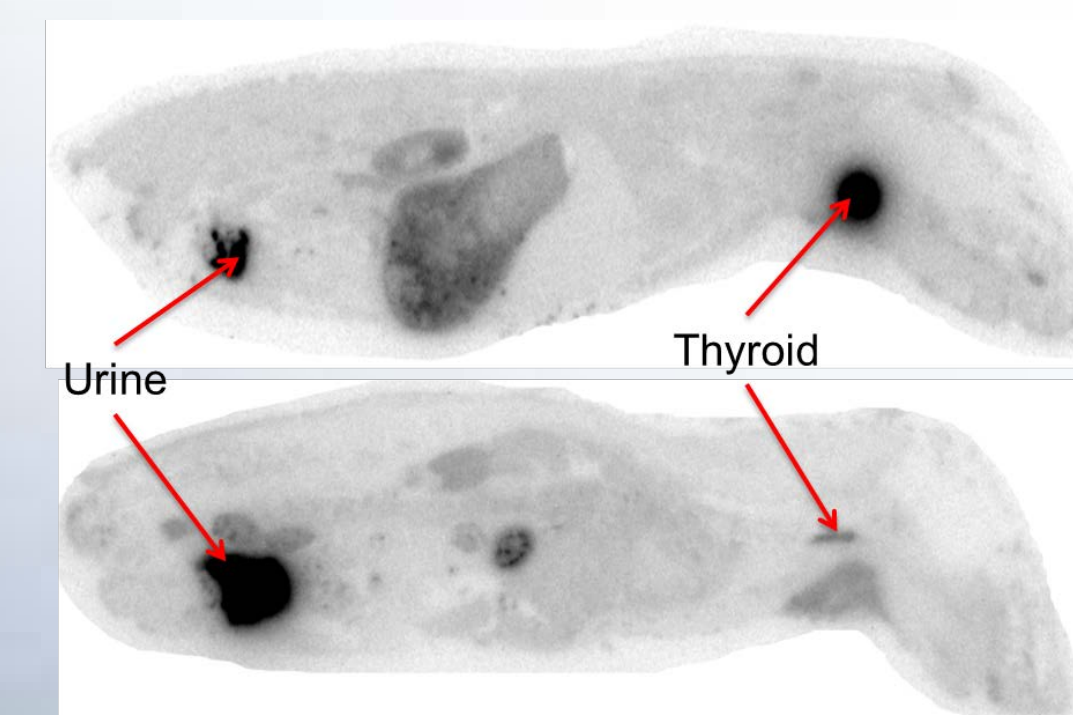
Group Number/ Sample	Study	Target Dose Level (mg/kg)	Target Radioactivity Level (µCi/kg)	Samples
1 / ¹²⁵ I-IgG	QWBA w/NaI in H ₂ O	2	20	Terminal plasma and carcass
2 / ¹²⁵ I-IgG	QWBA w/out NaI in H ₂ O	2	20	Terminal plasma and carcass
3 / ¹²⁵ I-IgG	MB w/NaI in H ₂ O	2	20	Urine, feces, cage residue at intervals to 72 h; 1 carcass for QWBA, 2 carcasses for MB
4 / ¹²⁵ I-IgG	MB w/out NaI in H ₂ O	2	20	Urine, feces, cage residue at intervals to 72 h; 1 carcass for QWBA, 2 carcasses for MB
5 / Na ¹²⁵ I	MB w/NaI in H ₂ O	10	20	Urine, feces, cage residue at intervals to 72 h; 1 carcass for QWBA, 2 carcasses for MB
6 / Na ¹²⁵ I	QWBA w/NaI in H ₂ O	10	20	Terminal plasma and carcass
7 / Na ¹²⁵ I	QWBA w/out NaI in H ₂ O	10	20	Terminal plasma and carcass

Evaluation of Calibration Standards for QWBA Image Analysis

Block of frozen CMC with holes filled with ¹²⁵I-blood at serial dilutions Sectioned at 40 µm thick w/ Leica CM3600 cryomicrotome at -20°C Sections of Standards Imaged and Analyzed Using MCID® Software



Mouse given IV dose of ¹²⁵I-Protein alone (top)
 Mouse given IV dose of ¹²⁵I-Protein and NaI in drinking water. (bottom)



Mass Balance & QWBA Analyses were performed using standard methods

Mass Balance – Amount of ¹²⁵I in urine (@ 0-8h, 8-24h, 24-48h, 48-72h), homogenized feces (@ 24 h intervals), cages residues (@ 24 h intervals), and homogenized carcasses (@72h) samples by gamma counting and % of administered ¹²⁵I was determined.
QWBA – carcass freezing, embedding, sectioning @ 40 µm, phosphor imaging, and Image analysis to determine tissue concentrations of ¹²⁵I radioactivity
Plasma Precipitation to assess biodehalogenation – Plasma was treated with/without Trichloroacetic acid (TCA) precipitation followed by gamma counting) to determine concentration and free and bound ¹²⁵I.

RESULTS

Mass Balance of ¹²⁵I-IgG alone

Specimen	Time	Mean % Recovery	SD	Cumulative
Feces	Pre-dose	0.00	0.00	0.00
	0-24 h	0.45	0.16	0.45
	24-48 h	0.50	0.12	0.95
	48-72 h	0.42	0.01	1.36
	Sub-total	1.36	0.03	
Urine	Pre-dose	0.00	0.00	0.00
	0-8 h	0.69	0.45	0.69
	8-24 h	4.84	0.53	5.53
	24-48 h	2.80	0.11	8.32
	48-72 h	2.09	0.03	10.41
	Sub-total	10.41	0.85	
Cage Rinse	24 h	0.68	0.18	0.68
	48 h	0.39	0.03	1.07
	72 h	1.14	0.25	2.20
Cage Residue	Sub-total	2.20	0.04	
Carcass	72 h	65.52	NC (n=2)	
Total		79.49	NC	

Mass Balance of ¹²⁵I-IgG w/NaI

Specimen	Time	Mean % Recovery	SD	Cumulative
Feces	Pre-dose	0.00	0.00	0.00
	0-24 h	0.35	0.20	0.35
	24-48 h	0.27	0.13	0.62
	48-72 h	0.29	0.19	0.92
	Sub-total	0.92	0.27	
Urine	Pre-dose	0.00	0.00	0.00
	0-8 h	4.88	0.99	4.88
	8-24 h	13.65	1.06	18.53
	24-48 h	6.11	0.71	24.64
	48-72 h	4.50	0.23	29.14
	Sub-total	29.14	0.56	
Cage Rinse	24 h	0.83	0.24	0.83
	48 h	0.42	0.09	1.26
	72 h	0.90	0.02	2.16
Cage Residue	Sub-total	2.16	0.26	
Carcass	72 h	61.23	NC (n=2)	
Total		93.04	1.00	

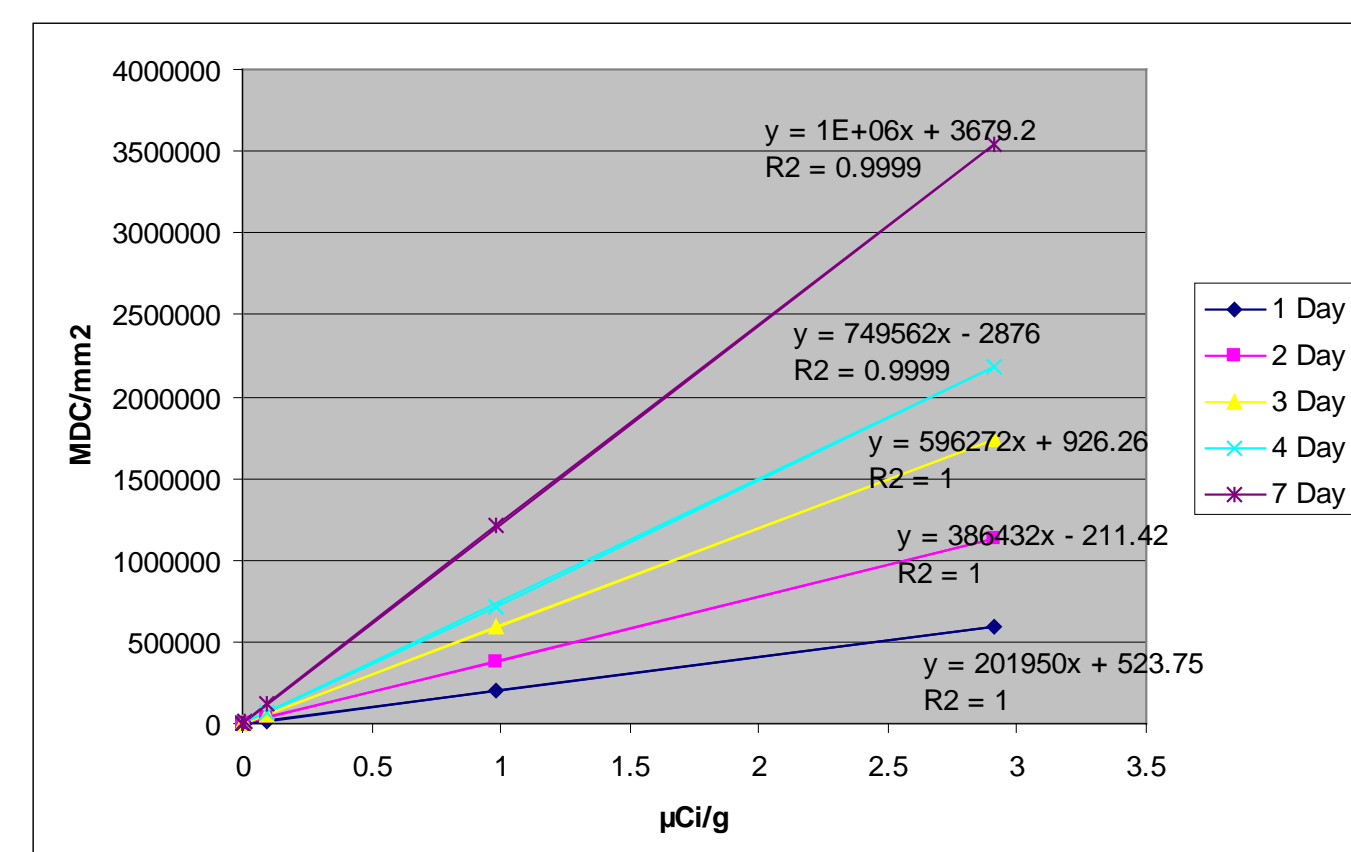
Mass Balance of ¹²⁵I-Na w/NaI

Specimen	Time	Mean % Recovery	SD	Cumulative
Feces	Pre-dose	0.00	0.00	0.00
	0-24 h	0.44	0.12	0.44
	24-48 h	0.07	0.06	0.52
	48-72 h	0.01	0.01	0.53
	Sub-total	0.51	0.16	
Urine	Pre-dose	0.00	0.00	0.00
	0-8 h	35.16	13.32	35.16
	8-24 h	50.05	6.98	85.32
	24-48 h	1.35	0.48	86.56
	48-72 h	2.10	2.50	88.65
	Sub-total	88.76	5.76	
Cage Rinse	24 h	2.05	0.97	2.05
	48 h	0.45	0.21	2.51
	72 h	2.10	1.65	4.61
Cage Wash	72 h	1.54	1.96	6.15
Cage Residue	72 h	1.54	1.96	6.15
Total		95.32	2.90	

Mass Balance Observations:

- 1) Recovery of Radioactivity after dosing ¹²⁵I-Ig_{rat} + NaI was higher than after dosing with ¹²⁵I-Ig_{rat} alone.
- 2) Mass Balance was improved with co-administration of NaI in drinking water.
- 3) Loss of radioactivity in group treated with ¹²⁵I-IgG alone may have been due to carcass digestion in strong KOH where some ¹²⁵I was volatilized.

Image Calibration, and Limits of Quantitation LLOQ



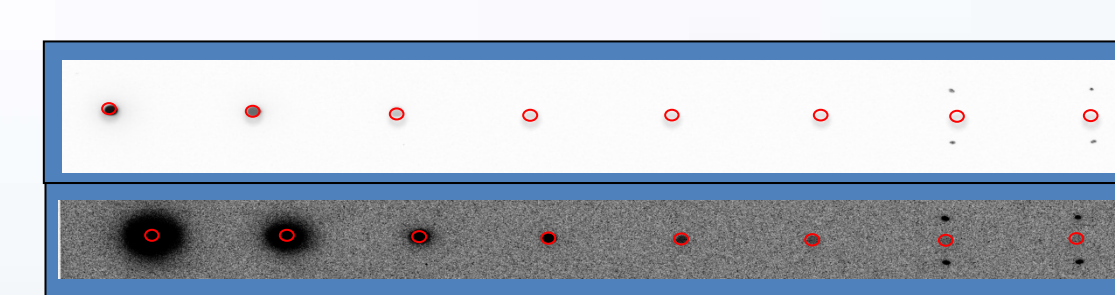
	µCi/g		
24 h exp.	72 h exp.	168 h exp.	
Av. Bckgrnd 5x5 mm	0.000077	0.000040	0.000004
Av. Bckgrnd 25x25 mm	0.000033	0.000048	0.000000
Av. Bckgrnd 5x5 mm, 5 mm from hi standard	0.002096	0.002205	0.002060
Av. Bckgrnd 5x5 mm, 10 mm from hi standard	0.000555	0.000493	0.000833
Av. Bckgrnd 5x5 mm, 15 mm from hi standard	0.000204	0.000204	0.000176
Low Stndrd used for Calibration Curve	0.000968	0.000107	0.000107

	µCi/g	
	72 h exposure	
Average Background 5x5mm	0.000040	
Average Background 25x25mm	0.000048	
5x5 mm; X + 3xSD	0.000136	
5x5 mm; X + 5xSD	0.000200	
25x25 mm; X + 3xSD	0.000151	
25x25 mm; X + 5xSD	0.000219	
Lowest Standard used for Calibration Curve	0.000107	

The lowest standards (0.0001 – 0.0005 µCi/g) were unacceptable after a 1- or 2-day exposure time. All standards (0.0001 – 2.91 µCi/g) were acceptable after a 3-, 4-, and 7-day exposures time.

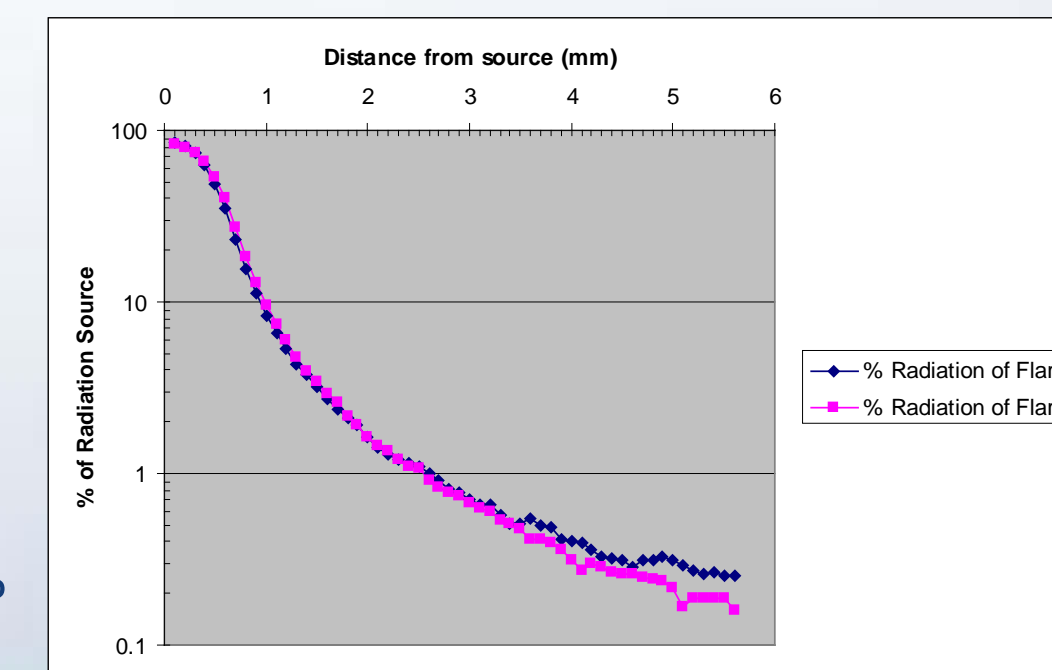
"Flare" Effect for QWBA Image Analysis

Appearance of "flare" from varying concentrations of radioactivity and at varying image contrast settings



- 1) After a 24, 72, and 168 h expo. the "Flare" distance was ~1-1.5 mm from the high standards.
- 2) Background readings were ≤10% higher than actual background readings at up to 1 mm away from the highest standard (10% at 1 mm, 7% at 1.5 mm, <1% at 3 mm).

Effect of "Flare" from high source on background (or surrounding tissues)



Biodehalogenation

Stability of label of ¹²⁵I-Protein in Plasma

Rat ¹²⁵I-IgG appeared to be stably labeled in this experiment
¹²⁵I-Na appeared to associate with plasma proteins *in vivo*

# of Proteins Examined	Time point	% of ¹²⁵ I-Protein in Plasma								
		10-20%	20-30%	30-40%	40-50%	~50-60%	60-70%	70-80%	80-90%	90-100%
n=11	5 min			1	2	1	2	2	2	1
n=5	30 min		3	2						
n=11	1h	1	3	2	2	3				
n=11	6h	3	2	1	1	2	1	1		
n=5	24h						1	1	1	2

Survey of other ¹²⁵I-Proteins in Plasma (w/ NaI): TCA precipitation results vary widely and may depend on the method of iodination and/or protein structure.; Appears most are relatively stable at early time points; Biodehalogenation appears to peak at ~0.5 – 6 h; Later time points show primarily labeled proteins.; Co-administration of NaI doesn't seem to effect Biodehalogenation.

Tissue Distribution by QWBA

Tissue	uCi/g				uCi/g				
	1h	48h	72h	1h	48h	72h	1h	48h	72h
Blood	0.013	BQL	BQL	0.013	BQL	BQL	0.098	0.037	0.032
Spleen	0.008	BQL	BQL	0.006	BQL	BQL	0.031	0.010	0.007
Thymus	0.007	BQL	BQL	0.004	BQL	BQL	0.036	0.009	0.008
Renal Cortex	0.010	BQL	BQL	0.007	BQL	BQL	0.009	0.005	0.004
Renal Medulla	0.012	BQL	BQL	0.007	BQL	BQL	0.014	0.008	0.007
Liver	0.009	BQL	BQL	0.005	BQL	BQL	0.016	0.009	0.008
Urinary Bladder	0.204	BQL	BQL	0.064	BQL	BQL	0.027	0.008	0.006
Urinary Bladder (contents)	0.220	0.001	0.001	0.078	0.001	0.001	0.015	0.011	0.015
Adrenal Gland	0.012	BQL	BQL	0.005	BQL	BQL	0.048	0.007	0.004
Thyroid Gland	0.026	0.003	0.013	0.136	0.317	0.091	0.015	0.007	0.009
Salivary Gland	0.014	BQL	BQL	0.007	BQL	BQL	0.011	0.006	0.010
Adipose (brown)	0.010	BQL	BQL	0.005	BQL	BQL	0.034	0.015	0.012
Skin	0.013	0.001	0.001	0.014	0.004	0.004	0.020	0.018	0.015
Prostate Gland	0.014	BQL	BQL	0.042	BQL	BQL	0.004	0.008	0.012
Heart	0.009	BQL	BQL	0.006	BQL	BQL	0.011	0.007	0.008
Skeletal Muscle	0.004	BQL	BQL	0.002	BQL	BQL	0.025	0.016	0.014
Lung	0.019	BQL	BQL	0.009	BQL	BQL	0.002	0.003	0.002
Large Intestine	0.011	BQL	BQL	0.000	BQL	BQL	0.051	0.026	0.021
Small Intestine	0.011	BQL	BQL	0.019	BQL	BQL	0.004	0.006	0.018
Stomach (gastric mucosa)	0.197	BQL	BQL	0.155	BQL	BQL	0.009	0.005	0.004
Stomach (contents)	0.081	BQL	BQL	0.202	0.001	0.001	0.011	0.004	0.004
TCA Results (% Bound)	13.50	NC	NC	26.10	NC	NC	96.50	96.20	95.50

- 1) Free ¹²⁵I was eliminated from tissues much faster than the ¹²⁵I-IgG (expected if stable radiolabel).
- 2) Co-administration of NaI increased elimination rate of free ¹²⁵I and blocked uptake in symporter tissues, thus enabling improved image analysis by decreasing areas of "flare" effect.
- 3) Co-administration did not seem to effect the concentration of free ¹²⁵I in skin or stomach.
- 4) Co-administration of NaI with ¹²⁵I-proteins that are resistant to biodehalogenation will still be helpful to reduce the "Flare" effect near tissue such as thyroid.

CONCLUSIONS

- Acceptable calibration curves were obtained after 3-, 4-, and 7-day exposure periods.
- LLOQ based on the lowest standard is efficient and effective without relying on background.
- High concentration calibration standards need to be placed away from other standards to avoid influence of "Flare" effect (at least 15 mm).
- The "Flare" distance from source did not change appreciably with longer exposure times. Most flare within 1 to 1.5 mm from source (10% at 1 mm, 7% at 1.5 mm, <1% at 3 mm)
- Co-administration of NaI in drinking water reduces localization of free ¹²⁵I in tissues thus reducing "hot" spots like thyroid and improves image sampling of surrounding tissues.
- Relatively larger animal models should be considered when performing tissue distribution by QWBA to facilitate tissue sampling of small tissues and to reduce effect of "Flare" on quantitation. (i.e., rat instead of mouse).
- Most biodehalogenation was observed at 0-6 h post-dose and can vary widely among different proteins.
- TCA precipitation (or another method; e.g., Gel analysis) should be performed on plasma and/or tissues of interest for each animal being analyzed (by QWBA and/or gamma counting).
- Co-administration of "cold" iodine helps reduce free ¹²⁵I in tissues, thus reducing influence on tissue concentration data and "Flare" effect from thyroid and/or other tissues that uptake iodine.
- Co-administration of "cold" iodine did not reduce biodehalogenation.
- Bio-Halogenation of endogenous proteins can occur after administration of ¹²⁵I.
- Co-administration of "cold" iodine decreases the amount of free ¹²⁵I and improved recovery at 72 h post-dose. (Did not achieve mass balance from rats given ¹²⁵I-IgG alone at 72 h post-dose).
- Proteins typically have much longer tissue half-lives than free ¹²⁵I, except for thyroid, which uptakes most free ¹²⁵I.
- Co-administration of "cold" iodine appears to shunt free ¹²⁵I to urine relatively quickly (0-6 h), thereby reducing confounding effect of flare and from "background" free ¹²⁵I.
- Tissue image measurements should be obtained at least 3 mm away from tissue with high concentrations to avoid "Flare" effect. Or tissues with suspected high levels (i.e. thyroid) can be removed from the section before imaging to avoid the "flare" effect altogether.