

**RESEARCH ARTICLE****Preliminary *in vivo* characterization of a theranostic aptamer: Sgc8-c-DOTA-<sup>67</sup>Ga**

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**1 ABSTRACT**

2

3 Nucleic acid aptamers can recognise their target with high affinity and specificity, and their  
4 potential as molecular imaging agents and use in theranostics are being explored. Compared with  
5 antibodies, aptamers can be easily synthesized and chemically modified, rendering them a  
6 valuable tool for *in vivo* approaches. Herein, we investigated a 41nt DNA aptamer as a theranostic  
7 agent for lymphoma and melanoma. This aptamer exhibits specific binding and high affinity for the  
8 PTK7 receptor that is overexpressed in many cancer cells. A 5'-amino-derivative of the Sgc8-c  
9 aptamer was bound to the metal chelator DOTA (1,4,7,10-tetraazacyclododecane-1,4,7,10-  
10 tetraacetic acid) and labelled with the radionuclide <sup>67</sup>Ga, forming the aptamer probe Sgc8-c-DOTA-  
11 <sup>67</sup>Ga. Different conditions during synthesis, purification and identification of the intermediate and  
12 final radiolabelled probe, were examined. Aptamer modification and radiolabelling were  
13 performed with high yields, resulting in a probe that was stable in neutral buffered solution.  
14 Binding to PTK7 was studied in CCRF-CEM, A20 and B16F1 cell lines, and in purified PTK7-1  
15 receptor, to confirm specificity. The *in vitro* cell lines showed different levels of uptake, and the  
16 signal increased over time. *In vivo* binding properties were studied in A20 and B16F10 tumour-  
17 bearing mice and images were acquired using X-rays and gamma imaging modalities for both  
18 models. Preliminary results in both tumour models showed good aptamer uptake by tumour.  
19 Hepatobiliar metabolism was observed with Sgc8-c-DOTA-<sup>67</sup>Ga and no signal was detected in  
20 normal tissue. In summary, these results support the utility of labelled aptamers as theranostic  
21 agents in different imaging modalities and theranostic.

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23 **KEYWORDS:** Aptamer, Sgc8-c, PTK7, molecular imaging, theranostic.

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## 1 INTRODUCTION

2

3 Since first reported (Ellington and Szostak, 1990; Tuerk and Gold, 1990), the use of aptamers has  
4 principally focused on biochemical and enzymatic applications. However, in recent years several  
5 aptamers have been developed for biomedical applications including molecular imaging,  
6 diagnostics, therapeutics and drug delivery (Röthlisberger et al, 2017; Garcia-Recio et al, 2016; Cao  
7 et al, 2014; Sun et al, 2014).

8

9 Aptamers are oligonucleotides (DNA or RNA) that are selected to specifically recognise a molecular  
10 target with high affinity. The selection process is carried out using an iterative procedure known as  
11 Systematic Evolution of Ligands by Exponential Enrichment (SELEX) (Osborne and Ellington, 1997;  
12 Breaker, 2004; Wu and Kwon, 2016; Darmostuk, 2015). Aptamers are considered “rivals” to  
13 antibodies for their ability to recognize bio-target (Jayasena, 1999). Aptamers offer several  
14 advantages. Firstly, they can be easily synthesised, resulting in a reliable, scalable and economic  
15 process. Secondly, oligonucleotides are temperature- and pH-stable, and a variety of post-SELEX  
16 chemical modifications can be introduced to confer desirable characteristics (Gao et al, 2016).  
17 Furthermore, aptamers have a low molecular weight (~15000Da), allowing fast tissue penetration  
18 and body clearance and animal studies have shown that they are non-immunogenic (Borbas et al,  
19 2007; Hwang do, 2010).

20

21 These favourable characteristics have encouraged the development of aptamers for clinical  
22 application (Nozari and Berezovski, 2016; Stein and Castanotto 2017). The FDA has approved  
23 aptamers for use as therapeutic agents and several clinical trials are currently underway (Kanwar  
24 et al, 2015; Parashar, 2016).

25

26 The use of aptamers as molecular imaging agents has been reported in a number of previous  
27 studies (Charlton et al, 1997; Lee and Li, 2011; Wang and Farokhzad 2014). These studies provide a  
28 better understanding of the *in vivo* patterns of molecular diversity in cancer and contribute to  
29 conventional imaging techniques (Weissleder and Mahamood, 2001; Histed et al, 2012; Palestro,  
30 2014). Aptamer-based theranostic strategies are part of this development and allow simultaneous  
31 imaging guide and targeted therapy using the same probe basis (Drude et al, 2017). Theranostics  
32 are a combination of diagnostics and therapy and allow personalised management of disease

1 (Baum et al, 2012). As a result, there has been an enormous increase in *in vivo* aptamer  
2 applications, but challenges still remain.

3  
4 Shangguang and co-workers identified the original Sgc8 sequence, selected from a  $10^{15}$  ssDNA  
5 aptamer library, to target acute lymphoblastic leukaemia T cells (Shangguan et al, 2007;  
6 Shangguan et al, 2008; Jacobson et al, 2015). Here, we studied Sgc8-c, which is a truncated version  
7 of the Sgc8 DNA aptamer, containing only 41 nt. Sgc8-c has an affinity of 0.78nM against the PTK7  
8 receptor, which was originally reported to be overexpressed in colon cancer and later-identified in  
9 haematological tumours and other malignancies (Berger et al, 2017; Xiao et al, 2008).

10

11 We previously evaluated a few derivatives of the DNA aptamer Sgc8-c aptamer as molecular  
12 imaging agents and theranostics (Calzada et al, 2017; Sicco et al, 2017). In this study, we evaluated  
13 the Sgc8-c 5'-amino derivative, conjugated with DOTA, which was radiolabelled with  $^{67}\text{Ga}$  as a  
14 theranostic agent. Sgc8-c is a 41nt DNA aptamer against the PTK7 receptor (Shangguan et al, 2006;  
15 Shangguan, 2007).

16

17 The metal chelator 1,4,7,10-tetraazacyclododecane-1,4,7,10-tetraacetic acid (DOTA), is able to  
18 coordinate to metal ions such as  $\text{Ga}^{3+}$ ,  $\text{Zr}^{4+}$ ,  $\text{Cu}^{2+}$ ,  $\text{In}^{3+}$ ,  $\text{Lu}^{3+}$ ,  $\text{Y}^{3+}$  and  $\text{Bi}^{3+}$  (Calzada et al, 2012; Sicco et  
19 al, 2017), and therefore, we explored the potential use of radiolabelled Sgc8-c-DOTA as a possible  
20 theranostic agent in cancers. Herein, chemical synthesis and purification techniques for preparing  
21 radiolabelled Sgc8-c-DOTA- $^{67}\text{Ga}$  aptamer were optimised. This was followed by receptor binding  
22 assays and *in vivo* pharmacokinetic and tumour targeting studies to validate the aptamer's  
23 potential as a theranostic agent.

24

## 25 **MATERIALS AND METHODS**

26

### 27 **Aptamer conjugation (Sgc8-c-DOTA)**

28 The 5'-(6-aminohexyl)-modified Sgc8-c aptamer (13 kDa, 5'- /6-AM/ATC TAA CTG CTG CGC CGC  
29 CGG GAA AAT ACT GTA CGG TTA GA -3', Sgc8-c-NH<sub>2</sub>) (Calzada et al, 2017; Sicco et al, 2017) was  
30 purchased from IDT technologies (Integrated DNA Technologies, Inc. IA, USA) . 1,4,7,10-  
31 tetraazacyclododecane-1,4,7,10-tetraacetic acid mono-*N*-hydroxysuccinimide ester as  
32 HPF<sub>6</sub>.CF<sub>3</sub>CO<sub>2</sub>H salt (NHS-DOTA, B-280, Macrocyclics, Inc. TX, USA, 0.76 mg, 1 μmol) dissolved in dry

1 DMSO (3.85  $\mu$ l) was added to a solution of Sgc8-c-NH<sub>2</sub> (0.13mg, 0.01 $\mu$ mol) with a mixture  
2 containing equal volumes of sodium phosphate buffer (0.1M, pH=8.5) and sodium bicarbonate  
3 (0.1M, pH=8.5) (total volume of the mixture of 400 $\mu$ l). The reaction mixture was stirred in the dark  
4 at room temperature for 2hr. The reaction was stopped by buffer exchange using Microcon®  
5 Centrifugal Filters (10 kDa cut-off) or PD10 column chromatography (GE Healthcare Life Sciences,  
6 Little Chalfont, UK) with MilliQ water and detection by spectrophotometry at 260 nm. Progress of  
7 the reaction and quality of the product were monitored using Reverse-Phase High Performance  
8 Liquid Chromatography (RP-HPLC) (Agilent 1200 Series Infinity Star, Santa Clara, USA) with a 5 $\mu$ m  
9 C-18 Kinetex column (Phenomenex) run with an aqueous solution of triethylamine (50mM,  
10 pH=7.5)/5% ,v/v, acetonitrile (solvent A) and methanol (solvent B), at a flow rate of 1ml/min and a  
11 gradient of A:B (90:10) to A:B (40:60) over 30min (UV detection). In addition, gel electrophoresis  
12 (native polyacrylamide, 15%, w/v) was performed.

13

14 The conjugation yield was 77% by RP-HPLC and the conjugated was confirmed by ESI-MS (IDT  
15 technologies). Molecular weight of the conjugated was in 13238.5Da (with coordinated  
16 potassium); expected: 13238.5Da (with coordinated potassium). After purification, fractions were  
17 dissolved in MilliQ water or lyophilised and stored at 4°C and -20°C and stability was measured  
18 over the time.

19

### 20 **Sgc8-c-DOTA radiolabelled**

21 The lyophilized aptamer Sgc8-c-DOTA (20  $\mu$ g, 0.0015  $\mu$ mol) was dissolved in ammonium acetate  
22 buffer (0.1M, pH =5.0) (300 $\mu$ l) and 10MBq of an aqueous solution of <sup>67</sup>GaCl<sub>3</sub> (Tecnonuclear,  
23 Buenos Aires, Argentina) was added. The mixture was adjustment to a final volume of 1ml and pH  
24 =5.0 incubated at 60°C for 30min.

25

26 The radiolabelling yield and radiochemical purity of the product were monitored using RP-HPLC as  
27 described above using gamma detection.

28

### 29 **Physicochemical characterization**

30 Sgc8-c-DOTA-<sup>67</sup>Ga was incubated with 500 $\mu$ l fetal bovine serum (FBS) for 24h at 37°C. The mixture  
31 was filtered (0.22 $\mu$ m) and stability controls were performed using a normal-phase HPLC system in  
32 a size exclusion column with a pore size of 300A, 7.5x300mm (Waters), a phosphate buffer 0.01M,

1 a flow rate 1ml/min over 20min. The same procedure and conditions were used with a saline  
2 solution (NaCl 0.9%).

3  
4 The partition coefficient (LogP) was calculated for Sgc8-c-DOTA-<sup>67</sup>Ga by incubating with an *n*-  
5 octanol and phosphate-buffered saline (PBS) (1:1) mixture. The mixture was vortexed for 1min and  
6 centrifuged for 5min at 1000xg. Aliquots of each phase were measured, in triplicate, in a gamma  
7 counter.

8

### 9 **Binding experiments**

10 A maximum binding capacity assay was performed according to the Lindmo method (Lindmo et al,  
11 1986). Different amounts of PTK7-1 (TP700163, Origene, MD, USA) were adsorbed in Nunc tubes  
12 (Brandt®) and serial dilutions of the receptor were prepared in 2ml PBS to give final  
13 concentrations of 0.78, 0.39, 0.049, 0.024, 0.012, 0.0061 and 0.0030nM. Samples were prepared  
14 in triplicate. After incubation for 24hr at room temperature with continuous orbital shaking, tubes  
15 were washed three times with PBS. Finally, 100000cpm of radiolabelled aptamer, Sgc8-c-DOTA-  
16 <sup>67</sup>Ga, were incubated 1hr at room temperature. Tubes were washed three times with PBS and the  
17 radioactivity was quantified using a gamma counter. The non-specific binding was determined  
18 by incubating with FBS.

19

20 Sgc8-c-DOTA-<sup>67</sup>Ga cell binding was studied in B16F1 mouse melanoma and A20 mouse B-cell  
21 lymphoma cell lines, both from ATCC (American Type Culture Collection, VA, USA). The human  
22 acute lymphoblastic leukaemia cell line CCRF-CEM (ATCC) was used as a positive control in this  
23 study (Shangguang et al, 2008). B16F1 cells were grown in Dulbecco's Modified Eagle's Medium  
24 (DMEM) (PAA Laboratories Pty Ltd, Australia) supplemented with 10% (v/v) FBS and 2mM L-  
25 glutamine (Sigma-Aldrich, St. Louis, USA). A20 cells were grown in a suspension of RPMI-1640  
26 medium (Sigma-Aldrich, St. Louis, USA) supplemented with 10% (v/v) FBS, 2mM L-glutamine and  
27 0.05mM β-mercaptoethanol (Sigma-Aldrich, St. Louis, USA). CCRF-CEM cells (ATCC) were grown in  
28 RPMI-1640 medium supplemented with 10% (v/v) FBS and 2mM L-glutamine. All cell lines were  
29 cultured at 37°C with 5% (v/v) CO<sub>2</sub>. Adherent B16F1 cells were surface detached using a cell  
30 scraper.

31

1 All cells were then washed twice by gentle centrifugation with sterile PBS (pH=7.4) and  $1.0 \times 10^6$   
2 cells were re-suspended in a final volume of 1ml PBS and incubated with 100000cpm of Sgc8-c-  
3 DOTA- $^{67}\text{Ga}$ . The probe was incubated for 0.5, 1, 2 and 4hr at 37°C. Cells were washed twice with  
4 PBS and radioactivity in the pellets was quantified as described above. The tubes were measured  
5 in a gamma counter.

6  
7 A competition binding assay was performed with positive CCRF-CEM cell line to confirm the  
8 specificity of the radiolabelled aptamer. A 100nM excess of the non-radiolabelled aptamer (Sgc8-  
9 c-NH<sub>2</sub>) was incubated for 30min at 37°C to block Sgc8-c-DOTA- $^{67}\text{Ga}$  specific binding. After  
10 incubation with Sgc8-c-NH<sub>2</sub>, cells were washed with PBS and incubated with 100000 cpm of Sgc8-  
11 c-DOTA- $^{67}\text{Ga}$ . The probe was incubated for 2hr at 37°C. Cells were washed twice with PBS and  
12 radioactivity in the pellets was quantified as described above.

#### 13 **Biodistribution and pharmacokinetics**

14 Biodistribution of Sgc8-c-DOTA- $^{67}\text{Ga}$  was assayed in normal BALB/c mice with 20–25gm  
15 bodyweight (provided by the Laboratorio de Experimentación Animal, Centro de Investigaciones  
16 Nucleares (LEA-CIN, Montevideo, Uruguay). Approximately 1850kBq radiolabelled aptamer was  
17 intravenously (IV) administered via the tail vein. At 0.5, 2, 4 and 24hr after aptamer  
18 administration, mice (n=5 per time) were sacrificed by cervical dislocation and organs were  
19 weighed and measured in a gamma counter. Radioactivity levels in each tissue were expressed as  
20 percentages of injected dose per gram of tissue (%ID/g) and as percentages of injected dose (%ID).  
21  
22

23 The pharmacokinetic profile was assessed by bolus IV administration of individual doses of 5.5–  
24 9.2MBq Sgc8-c-DOTA- $^{67}\text{Ga}$  into the tail vein of Wistar® rats with 200–250gm bodyweight  
25 (purchased from DILAVE, Montevideo, Uruguay). Blood samples were collected in a capillary tube  
26 from the ocular globe at 0.25, 0.5, 1, 2, 4, 18, 24 and 48hr (n=3 per time) following aptamer  
27 administration. Samples were weighed and radioactivity was measured in a gamma counter. Urine  
28 was also collected over a 48hr period to assess renal elimination. A compartmental  
29 pharmacokinetic analysis was performed and the akaike information criteria (AIC) value was  
30 compared for each model. The parameters as volume of distribution at steady state (V<sub>ss</sub>) and  
31 clearance (CL) were calculated.

32

## 1 **Tumour uptake experiments**

2 Imaging studies were performed in two tumour-bearing mice models. Female C57BL/6 and BALB/c  
3 mice (from LEA-CIN, Montevideo, Uruguay), 6–8 weeks old with 20–25gm body weight, were used  
4 for *in vivo* experiments. For tumour implantation, C57BL/6 and BALB/c mice were inoculated  
5 subcutaneously with  $2.5 \times 10^5$  B16F1 and  $1.0 \times 10^6$  A20 cells, respectively (n=3) (Calzada et al, 2017).  
6 When tumours were palpable, on approximately day 10 and day 20, respectively, Sgc8-c-DOTA-  
7  $^{67}\text{Ga}$  was administered by bolus IV injection. After 2 and 24hr, mice were anaesthetised with  
8 isoflurane. Images for both mice models were taken in an In-Vivo MS FX PRO instrument (Bruker,  
9 Billerica, USA), using X-ray and gamma modes (10min acquisition). After each imaging time point,  
10 mice were sacrificed for organ dissection, and imaged and counted separately using the imaging  
11 equipment and gamma counter. Organ weight correction was applied and tumour/blood and  
12 tumour/muscle ratios were calculated.

13

14 All protocols for animal experimentation were carried out in accordance with procedures  
15 authorized by the University's Ethical Committee for Animal Experimentation, Uruguay, to whom  
16 this project was previously submitted. Animals were kept with water and food *ad libitum*.

17

## 18 **RESULTS**

19

### 20 **Conjugation, radiolabel and physicochemical characterization**

21 Preparation of the Sgc8-c-DOTA conjugate was optimized. The following variables were studied to  
22 optimise the procedures: i) reactants molar ratios; ii) time; and iii) reaction buffer (Sicco et al,  
23 2017). Under the best conditions, Sgc8-c-NH<sub>2</sub> was reacted with NHS-DOTA to yield the desired  
24 conjugate with high purity.

25

26 Gentle reaction conditions resulted in fast DOTA conjugation and easy purification (Figure 1).

27 Significant differences in reaction yield were observed depending on the buffer solutions with a  
28 77% derivatisation yield from a mixture with equal volumes of Na<sub>3</sub>PO<sub>4</sub> (0.1M) and NaHCO<sub>3</sub> (0.1 M)  
29 buffers (pH= 8.5) and 2hr reaction time. No improvement in product yield was observed with  
30 reaction times over 24hr. The optimal ratio of Sgc8-c-NH<sub>2</sub>:NHS-DOTA was determined as 1:200.

31 The RP-HPLC chromatogram of the crude reaction is shown in Figure 2 (top). Unreacted DOTA-NHS  
32 eluted first, followed by two peaks at 10.8min and 11.5min that were isolated and analysed. ESI-



1 MS analysis revealed that the first peak corresponded to Sgc8-c-NH<sub>2</sub> with an M<sup>+</sup> of 12812.5Da and  
2 the second peak to Sgc8-c-DOTA with M<sup>+</sup> of 13238.5Da.

3  
4 Sgc8-c-DOTA samples were stored for over a month under different temperature conditions.  
5 Subsequent analysis by RP-HPLC showed that there were no significant changes in stability of the  
6 samples.

7  
8 Different Sgc8-c-DOTA <sup>67</sup>Ga-radiolabelling times and temperatures (25, 37, 45, 60 and 75°C) were  
9 assayed. The best optimum conditions for radiolabelling were in the presence of <sup>67</sup>GaCl<sub>3</sub> at pH 5.0  
10 and a temperature of 60°C for 30min (Figure 1). According to RP-HPLC analysis (Figure 2) Sgc8-c-  
11 DOTA-<sup>67</sup>Ga had up to 95% purity with a maximum specific activity of 450MBq/mg.

12  
13 HPLC analysis demonstrated that Sgc8-c-DOTA-<sup>67</sup>Ga was stable in an aqueous physiological  
14 solution for over 24h at 37°C. Stability in FBS at 37°C exhibited a half-life of 2hr (data not shown).  
15 Sgc8-c-DOTA-<sup>67</sup>Ga exhibited a LogP value of -1.87±0.05, showing that the probe's hydrophilic  
16 characteristics were maintained after chemical modifications, as previously observed for other  
17 Sgc8-c-probes (Calzada et al, 2017).

### 18 19 **Binding experiments**

20 The immunoreactivity of Sgc8-c-DOTA-<sup>67</sup>Ga was evaluated using a purified recombinant human  
21 PTK7 protein expressed in HEK293 cells. Binding results were depicted as binding fraction / total  
22 (B/T, Figure 3) of the incubated probe versus PTK7-1 concentration. A saturation profile was  
23 observed with a K<sub>d</sub> of 11.4±0.1µM for Sgc8-c-DOTA-<sup>67</sup>Ga. Binding studies on tumour cell lines were  
24 performed based on previous results (Calzada et al, 2017). A signal increase was observed over  
25 time for all A20, B16F1 and CCRF-CEM tumour cell lines. Moreover, all cell lines showed similar  
26 binding to Sgc8-c-DOTA-<sup>67</sup>Ga. On blocking the CCRF-CEM cell line with the cold aptamer (Sgc8-c-  
27 NH<sub>2</sub>) a 60% decrease in signal was observed (data not shown).

### 28 29 **Biodistribution in normal mice**

30 The biodistribution of Sgc8-c-DOTA-<sup>67</sup>Ga in healthy animals is shown in Table 1. Low blood values  
31 were observed at all assayed time points. After 30min post injection, a value of 12.99±0.94 %ID/g  
32 was observed, which decreased over time to 3.55±1.79 %ID/g at 24hr. On the other hand, there

1 were no significant changes in liver activity over time ( $13.19 \pm 3.10\%ID/g$  at 24hr post-injection).  
2 Kidney activity slightly increased over time ( $8.65 \pm 1.38\%ID/g$  at 24hr) with concomitant increase in  
3 urine and bladder activity of  $31.23 \pm 1.90\%ID$ . There was no significant uptake in non-target organs.  
4

### 5 **Pharmacokinetic study**

6 The pharmacokinetic profile in rats showed that the behaviour of Sgc8-c-DOTA-<sup>67</sup>Ga was  
7 consistent with a two-compartment pharmacokinetic model, with first-order kinetics for both  
8 distribution and elimination from the central compartment. The derived parameters indicated a  
9 fast distribution, since the half-lives of the initial and terminal disposition phases  $0.678 \pm 0.23hr$  and  
10  $12.32 \pm 6.43hr$ , respectively. Mean residence time in the blood was  $14.91 \pm 7.48hr$ . The  $V_{ss}$  and  
11 blood clearance were  $42.18 \pm 8.68l/kg$  and  $2.72 \pm 1.31ml/min/kg$ , respectively, showing a large  
12 distribution and elimination that are lower than the average glomerular filtration rate. Renal  
13 clearance (CL<sub>r</sub>) was variable between rats ( $0.51 \pm 0.06ml/min/kg$ ).  
14

### 15 **Imaging and tumour uptake**

16 Planar gamma images were taken after IV injection of Sgc8-c-DOTA-<sup>67</sup>Ga. X-rays and gamma  
17 images are shown in Figures 4 and 5 for B16F1 and A20 mouse models at 2hr post- aptamer  
18 injection. Unexpected abdominal activity was observed at 2 and 24hr post injection. A slight  
19 asymmetry in the tumour area was observed at both time points indicating tumour uptake.  
20 In order to confirm the tumour uptake at 24hr, these results were corroborated by *ex vivo*  
21 imaging. Following *in vivo* imaging, mice were sacrificed and selected organs and tissue were  
22 examined using the same imaging methodology (Figure 6). *Ex vivo* imaging of the melanoma  
23 model showed a clear signal in the tumour, with a high signal in the liver and lower signal in the  
24 intestines. Low levels of radioactivity were observed in all other non-target organs. *Ex vivo* imaging  
25 of the lymphoma model showed a low signal in the tumour, with high signals in the liver and lower  
26 signal in the intestines followed by the kidneys. The strong signal in the liver masked the rest of  
27 the organs. Values were quantified in a gamma counter and a weight correlation was applied. At  
28 24hr post injection, tumour / blood and tumour / muscle activity ratios for both models were 6.5  
29 and 9.0, respectively, for B16F1-tumour- bearing mice and 18.5 and 15.0, respectively, for A20-  
30 tumour- bearing mice.  
31

### 32 **DISCUSSION**

1  
2 Aptamers are promising molecular probes for cancer diagnosis and therapy (Cao et al, 2014).  
3 Sharing characteristics of peptides and antibodies, aptamers have advantages due to their easy  
4 synthesis, facile chemical modification and low immunogenic potential (Hicke et al, 2006; Borbas  
5 et al, 2007; Shangguan et al, 2008; Da Pieve et al, 2009; Lee and Li 2011). These biomolecules can  
6 be modified to functionalised probes for *in vivo* diagnostic and therapeutic purposes. Moreover,  
7 aptamers have properties that make them ideal as theranostics. Their Low molecular weight, fast  
8 tissue penetration and clearance, result in high target/non-target ratios (Hwang do et al, 2010).  
9 Therefore, theranostics could include aptamers as molecular probes. Theranostics allow  
10 visualisation and treatment in the same probe. Imaging selects patients that are most likely to  
11 benefit from the treatment and predicts the therapeutic impact on the tumour enabling  
12 personalised therapy (Drude et al, 2017).

13  
14 In a previous study, we modified the Sgc8-c aptamer to generate NIR (Near Infrared) and  
15 radiolabelled probes (Calzada et al, 2017). Sgc8-c-Alexa647 and Sgc8-c-HYNIC-<sup>99m</sup>Tc were  
16 synthesised and evaluated *in vitro* and *in vivo*. However, in these studies no tumour uptake was  
17 observed after injection with radiolabelled probe, although an unspecific signal was shown in the  
18 liver and kidneys. The fast clearance and high hydrophilicity of Sgc8-c-HYNIC-<sup>99m</sup>Tc could account  
19 for this biological behaviour. Further structural changes are required to achieve a <sup>99m</sup>Tc- probe  
20 with higher tumour uptake (Calzada et al, 2017).

21  
22 Herein, a new modified Sgc8-c aptamer was studied as a new radiolabelled probe. A Sgc8-c 5'-  
23 amino derivative was conjugated with DOTA and radiolabelled with <sup>67</sup>Ga. The advantage of using  
24 Sgc8-c-DOTA is that it can be used as a theranostic probe; the same starting material can be used  
25 to prepare diagnostic and therapeutic radiopharmaceuticals by only changing the radionuclide  
26 (Calzada et al, 2012). Chelation of Ga<sup>3+</sup> ions to DOTA is a fast and high-yielding reaction and can be  
27 employed with other theranostic radionuclides (Drude et al, 2016). There are few studies on  
28 aptamers with gallium radionuclides. The labelled aptamer formed by chelation of <sup>68</sup>Ga to NOTA  
29 was studied by Gijs and co-workers (Gijs et al, 2016). However, <sup>67</sup>Ga is a gamma emitting  
30 radionuclide (t<sub>1/2</sub>=78hr) and is used to perform imaging over longer periods of time (days) with no  
31 cyclotron necessity.

32

1 Sgc8-c-DOTA was synthesized with >70% yield using a 200-fold excess of DOTA (Sicco et al, 2017).  
2 The Sgc8-c-DOTA intermediate was successfully purified using RP-HPLC. Probe purification  
3 process was optimised to obtain high specific activity (Sicco et al, 2017). Radiolabelling with <sup>67</sup>Ga  
4 resulted in high yields (>95%). Sgc8-c-DOTA-<sup>67</sup>Ga uptake in A20 and B16F1 cells was significantly  
5 higher with respect to positive CCRF-CEM cells in all cases (Figure 3). Binding studies of Sgc8-c-  
6 DOTA-<sup>67</sup>Ga to CCRF-CEM, B16F1 and A20 cell lines showed similar results to those Sgc8-c-probes  
7 previously reported (Calzada et al, 2017). Although, serum stability of Sgc8-c-DOTA-<sup>67</sup>Ga was <50%  
8 after 2hr of incubation, the remainder of the probe was sufficient for *in vivo* analyses and to  
9 determine pharmacokinetics properties.

10  
11 Surprisingly, the pharmacokinetic parameters of Sgc8-c-DOTA-<sup>67</sup>Ga resulted in a high V<sub>ss</sub>,  
12 indicating fast blood clearance and rapid tissue distribution. Biodistributions studies are in  
13 agreement with these results, with only 12.99±0.94%ID/g in the blood 30min post IV probe  
14 administration and decreasing over 24 hr. No %ID/g value was greater than 15% 30min post probe  
15 injection. The third part of the activity was eliminated in the urine. The individual liver values and  
16 slowly increasing values over time are consistent with hepatobiliar metabolism. There was poor  
17 uptake in bone over time, indicating stable coordination of <sup>67</sup>Ga to the Sgc8-c-DOTA probe.

18  
19 Tumour uptake was analyzed *in vivo* and *ex vivo* imaging. Results were validated in a gamma  
20 counter and weight corrected. Preliminary *in vivo* gamma images showed a strong abdominal  
21 signal and slight asymmetry on the tumour area. Due to the poor resolution of the images, tumour  
22 uptake was confirmed using *ex vivo* imaging. Results indicate that a later time point achieves  
23 better tumour uptake. Interestingly, images of both tumour-bearing mouse models showed high  
24 hepatobiliar metabolism (followed by quantification in a gamma counter and weight corrected).  
25 Tumour:blood and tumour:muscle ratios were >6 and increased over 24hr with probe activity  
26 retained in the tumour. This was coupled with greater whole body probe clearance at later time  
27 points. No significant kidney uptake was observed and the optimal time points for imaging  
28 acquisition were later than expected considering the size and hydrophilicity of the probe.  
29 In summary, the results showed tumour uptake and a hepatobiliar metabolism of the probe. Rate  
30 of metabolism could improve tumour uptake but increasing abdominal signal. There are a few  
31 previous studies of *in vivo* imaging with radioactive aptamer-derivative probes, showing similar  
32 results (Hwang et al, 2010; Gijis et al, 2016). Thus further investigation is needed to acquire a

1 better understanding of aptamer metabolism and pharmacokinetics as these are key parameters  
2 to improve imaging results.

3

4 Favourable target:non-target ratios of these aptamer-derivatives highlight their potential as  
5 agents for molecular theranostics. Furthermore, due to the enhancement in tumour retention  
6 over time, imaging could improve with later time point acquisition. Thus for imaging with  $^{67}\text{Ga}$   
7 longer time points, such as 48 and 72hr, may be more suitable.

8

## 9 **CONCLUSIONS**

10

11 The findings reported here present a simple aptamer radiolabelling procedure, as used in the  
12 synthesis of Sgc8-c-DOTA- $^{67}\text{Ga}$ . Probe injection in tumour melanoma and lymphoma tumour-  
13 bearing mice reveals substantial and sustained Sgc8-c-DOTA- $^{67}\text{Ga}$  uptake in tumours. In summary,  
14 this work highlights the potential of radiolabelled Sgc8-c-DOTA probe in theranostic applications.

15

## 16 **ACKNOWLEDGEMENTS**

17

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22

## 23 **COMPETING INTERESTS**

24

25 None declared.

26

## 27 **LIST OF ABBREVIATIONS**

28

29 **AIC:** Akaike Information Criteria

30 **CL:** Clearance

31 **CLr:** renal Clearance

32 **cpm:** counts per minute

- 1 **V<sub>ss</sub>**: Volume of distribution at **Steady State**
- 2 **DOTA**: 1,4,7,10-tetraazacyclododecane-1,4,7,10-tetraacetic acid
- 3 **DMSO**: Dimethylsulfoxide
- 4 **FBS**: Fetal Bovine Serum
- 5 **HPLC**: High Performance Liquid Chromatography
- 6 **HYNIC**: Hydrazinonicotinamide
- 7 **ID**: Injected Doses
- 8 **NIR**: Near Infra Red
- 9 **PBS**: Phosphate Buffered Saline
- 10 **PTK7**: Protein Tyrosine Kinase 7
- 11 **RP**: Reverse Phase
- 12 **SELEX**: Systematic Evolution Ligands by **EX**ponential Enrichment

13

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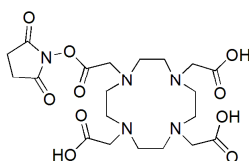
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1 **FIGURES:**

2

$\text{H}_2\text{N}-(\text{CH}_2)_6-5'-\text{ATC TAA CTG CTG CGC CGC CGG GAA AAT ACT GTA CGG TTA GA}-3'-\text{OH}$

**(A)**

1) buffer  $\text{NaHCO}_3$ -buffer  $\text{Na}_3\text{PO}_4$ /DMSO  
120 min, room temperature

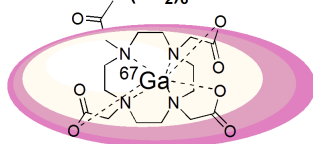
2) PD10

**(B)**1)  $^{67}\text{GaCl}_3$  /buffer  $\text{NH}_4\text{OAc}$ 

pH 5.0

2) HPLC

$\text{HN}-(\text{CH}_2)_6-5'-\text{ATC TAA CTG CTG CGC CGC CGG GAA AAT ACT GTA CGG TTA GA}-3'-\text{OH}$



3

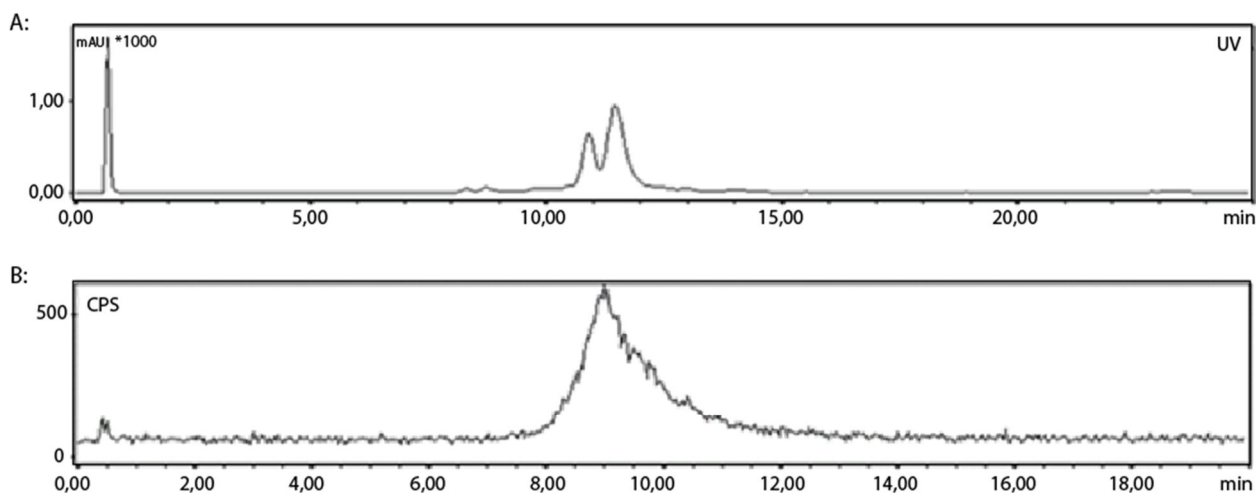
4 **Figure 1.** Schematic procedure for the preparation of Sgc8-c-DOTA and Sgc8-c-DOTA- $^{67}\text{Ga}$ . Sgc8-c-5  $\text{NH}_2$  reaction with NHS-DOTA (A) and radiolabelling with  $^{67}\text{Ga}$  (B).

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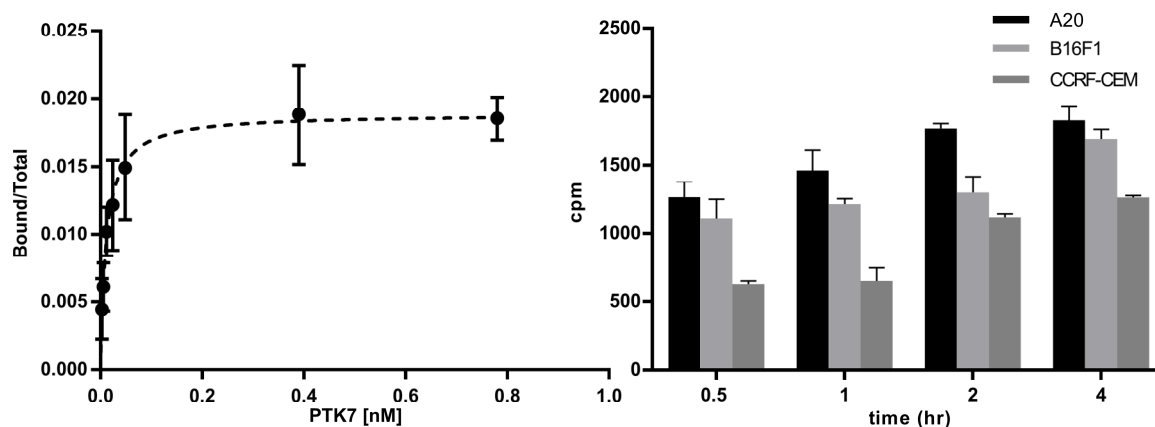
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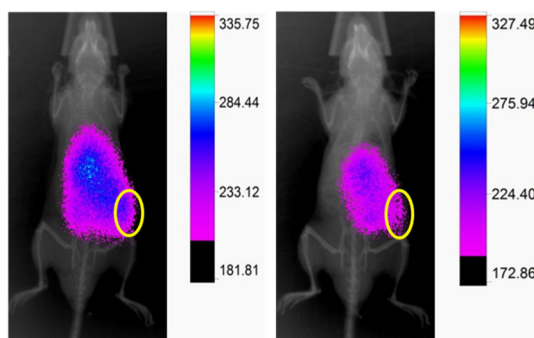
12 **Figure 2.** RP-HPLC profiles of the Sgc8-c-DOTA intermediate reaction mixture and Sgc8-c-DOTA-13  $^{67}\text{Ga}$ . **A.** The UV trace of the reaction mixture containing Sgc8-c- $\text{NH}_2$  (first peak; 10.8min) and Sgc8-14 c-DOTA (second peak, 11.5min). **B.** A gamma detection chromatograph of the Sgc8-c-DOTA- $^{67}\text{Ga}$ .

15 [mAU = milli-Absorbance Units; \*1000 = 1000 x mAU]

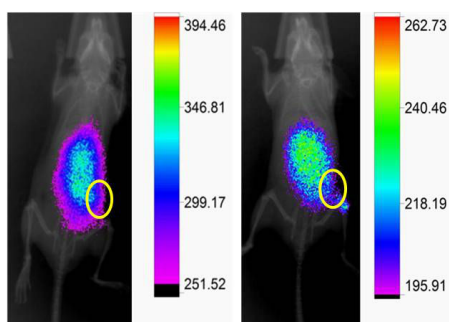
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**Figure 3.** Maximum binding capacity assay performed with Sgc8-c-DOTA-<sup>67</sup>Ga (left). Binding of Sgc8-c-DOTA-<sup>67</sup>Ga to A20 and B16F1 cell lines. Positive control: CCRF-CEM (Shangguang et al, 2008). At each time binding data from both cell lines was significantly different respect to positive control (right).

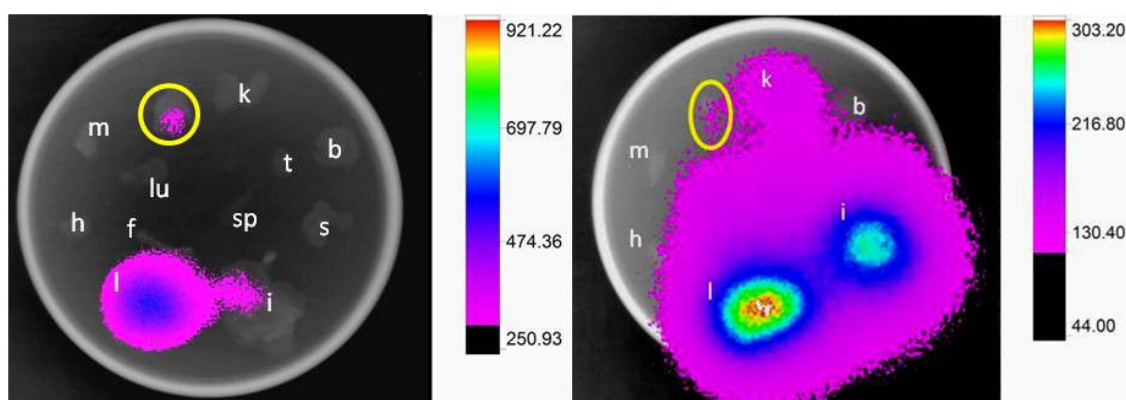
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**Figure 4.** *In vivo* images at 2hr (left) and 24hr (right) post injection of Sgc8-c-DOTA-<sup>67</sup>Ga in B16F1-tumour bearing C57BL/6-mice. Tumour location is highlighted by the yellow oval.



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**Figure 5.** *In vivo* images at 2hr (left) and 24hr (right) post injection of Sgc8-c-DOTA-<sup>67</sup>Ga in A20-tumour bearing BALB/c mice. The tumour location is highlighted by the yellow oval.



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**Figure 6.** *Ex vivo* images of organs and tissues 24hr after injection with Sgc8-c-DOTA-<sup>67</sup>Ga to melanoma (left) and lymphoma (right) tumour bearing mice. Yellow circles show the tumour location, brain (b), femour (f), heart (h), intestines (i), kidneys (k), liver (l), lung (lu), muscle (m), stomach (s), spleen (sp), thyroid (t) are presented.

**Table 1.** Biodistribution results for Sgc8-c-DOTA-<sup>67</sup>Ga at 0.5, 2, 4 and 24 hr post injection in BALB/c normal mice.

Organ/ Tissue	Time			
	0.5 hr	2 hr	4hr	24 hr
<b>Percentage of injected doses per organ weight (%ID/g ± sd)</b>				
<b>Blood</b>	12.99 ± 0.94	13.51 ± 2.03	11.93 ± 2.39	3.55 ± 1.79
<b>Liver</b>	12.38 ± 1.75	14.12 ± 1.35	13.12 ± 2.21	13.19 ± 3.10
<b>Heart</b>	4.16 ± 1.40	4.78 ± 1.35	3.31 ± 0.56	2.20 ± 1.01
<b>Lungs</b>	11.23 ± 1.09	18.00 ± 1.50	13.34 ± 5.67	10.34 ± 2.49
<b>Spleen</b>	4.53 ± 0.81	7.21 ± 1.56	5.32 ± 3.34	11.06 ± 2.91
<b>Kidneys</b>	5.48 ± 0.80	7.64 ± 0.62	7.50 ± 1.17	8.65 ± 1.38
<b>Thyroid</b>	6.91 ± 0.91	5.13 ± 3.33	4.63 ± 1.26	1.64 ± 1.39
<b>Muscle</b>	1.83 ± 0.44	1.48 ± 0.39	1.59 ± 0.84	0.57 ± 0.33
<b>Bone</b>	4.25 ± 0.62	7.22 ± 4.11	6.98 ± 0.93	10.84 ± 1.55
<b>Stomach</b>	1.71 ± 0.03	2.66 ± 0.53	2.17 ± 0.88	2.40 ± 0.49
<b>Intestine</b>	3.08 ± 0.25	4.47 ± 0.99	5.69 ± 1.04	9.97 ± 1.41
<b>Brain</b>	0.39 ± 0.13	0.82 ± 0.51	0.50 ± 0.43	0.30 ± 0.16
<b>Percentage of injected doses (%ID ± sd)</b>				
<b>Urine + Bladder</b>	8.17 ± 0.48	5.17 ± 2.05	14.99 ± 3.51	31.23 ± 1.90