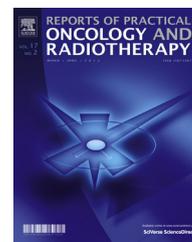


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Review

^{68}Ga -DOTA and analogs: Current status and future perspectives



Krzysztof Kilian*

Heavy Ion Laboratory, University of Warsaw, Pasteur 5a, 02093 Warsaw, Poland

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ABSTRACT

The construction of the $^{68}\text{Ge}/^{68}\text{Ga}$ generator has increased application of radiopharmaceuticals labeled with this isotope in medicine. ^{68}Ga -PET is widely employed in the management of neuroendocrine tumors but favorable chemistry with tri- and tetraaza-ring molecules has opened wide range of ^{68}Ga application in other fields of PET imaging. This review covers the radiopharmaceuticals labeled with gallium in molecular imaging and shows perspectives on the use of gallium-68 as a substitute for technetium-99, fluorine-18 and carbon-11 in some applications.

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1. Background

The positron emission tomography (PET) technique is applied in the study of functioning and functional changes in the human body, enabling, among others, precise oncology diagnostics. It is as well an appreciated diagnostic method in neurology and cardiology, allowing to evaluate the condition of the respective systems in a non-invasive way.

The dominant isotope in these types of diagnostics is fluorine-18, widely used in the research and the clinical applications. The source of the isotope is a proton medical cyclotron with particle energies from 10 to 20 MeV range which limits the availability of the isotope to the diagnostic centers, where the operation of such a machine is economically justified and qualified personnel to operate and maintain such an

equipment is available. Looking at the history of another isotope, technetium-99m, widely used in the related field of nuclear medicine – scintigraphy, it can be seen that it is critical to the development of the clinical applications to increase the availability of the isotope.

Three isotopes of gallium can be used in nuclear medicine: gallium-66, potentially useful as a PET tracer, gallium-67, for the scintigraphy of the inflammation sites as citrate or with labeled leukocytes, still considered as a routine tool for infection imaging and gallium-68, a fast growing PET radionuclide, especially in cancer diagnostics.

In opposition to fluorine-18 or carbon-11-based PET diagnostics, gallium-68 does not require the use of cyclotrons, thereby reducing costs and increasing flexibility in the practice of nuclear medicine diagnostic imaging. In recent years, gallium-68 has gained importance in molecular imaging by

* Tel.: +48 22 55 46 214.

E-mail address: kilian@slcj.uw.edu.pl<http://dx.doi.org/10.1016/j.rpor.2014.04.016>

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Table 1 – Chemical properties of Fe, Ga, Tc and In.

	Iron	Gallium	Technetium	Indium
Atomic number	26	31	43	49
Ionic radius [pm]	64	62	136	80
Oxidation state	III	III	I, III, IV, V, VII	III
Coordination number	6	4, 5, 6	5, 6, 7	6, 7, 8
Complex geometry	Octahedral	Octahedral	Octahedral, trigonal bipyramid, square pyramidal	Octahedral, square antiprismatic
Radionuclide	•	⁶⁷ Ga	⁶⁸ Ga	¹¹¹ In
Diagnostic mode	•	SPECT	PET	SPECT
Half-life	•	3.56 d	1.13 h	2.83 d
Source	•	Cyclotron	Generator	Cyclotron

positron emission tomography, due to the advantages of the easy availability both from the ⁶⁸Ge/⁶⁸Ga generator and the cyclotrons (^{nat}Zn(p,n)⁶⁸Ga) with 7–16 MeV protons,¹ good radiation properties and rich Ga³⁺ coordination chemistry. The quality of imaging is in some applications comparable to the quality of imaging with fluorine-18 isotope. In the nearest future these factors may cause a serious increase in the interest in gallium-68 labeled compounds in biology and medicine.^{2–4}

This review indicates the growing importance of the radiopharmaceuticals labeled with gallium in molecular imaging and shows the perspectives on the use of gallium-68 as a substitute for technetium-99 in some applications.

2. Gallium chemistry

Gallium is a metal in group 13 of the periodic table. In aqueous acidic solutions, it occurs as a free, hydrated Ga³⁺ ion, in slightly acidic and neutral pH hydrolyses to insoluble Ga(OH)₃ but nanomolar concentrations, it is used for the formulation of radiopharmaceuticals, can be obtained without precipitation. In contrast to Tc(V), where improper reaction conditions lead to insoluble and unreactive TcO₂, amphoteric properties of gallium allow the redissolution of the formed hydroxide. If the concentration exceeds the nanomolar level, addition of the carboxylic acids (citrate, oxalate, acetate) prevents precipitation. At higher pH, above 7, gallium hydroxide redissolves as [Ga(OH)₄][−].

Gallium is classified as hard Lewis acid and can form octahedral complexes with hard Lewis bases, such as oxygen and nitrogen atoms. Carboxylic, phosphonate, thiol and amino groups form strong six-coordinate complexes, thermodynamically and kinetically stable at physiological conditions. Existing five and four-coordinate gallium complexes are more sensitive to hydrolysis but are enough inert on the time-scale of the gallium applications.

The coordination chemistry and biological properties of Ga are similar to Fe ion (Table 1). Both are 3+ ions with comparable ionic radius and dominating octahedral complex geometry, thus the biomolecules with high Fe affinity could be easily labeled with Ga–ligand exchange between intravenously applied gallium citrate and transferrin, abundant plasma protein, forms a complex used for imaging of inflammatory sites.

Another element whose coordination chemistry is of great interest for the development of gallium compounds, is indium.

As a hard Lewis acid, In³⁺ prefers hard bases and forms stable complexes with nitrogen and oxygen atoms. Only higher ionic radius (80 pm vs. 60 pm for Ga) differentiates the ligands against a cavity size, where In fits perfectly the tetraaza-macrocyclic ligands (DOTA, Fig. 1a), while Ga prefers smaller triaza rings (NOTA, Fig. 1b).

3. Generators

Gallium-68 is a positron emitter with a half-life of 67.6 min and dominantly decays via 1.92 MeV positron emission (89%) and electron capture (11%). The relatively short half-life and hydrophilic nature are beneficial for the rapid renal clearance and reduce effective dose for the patient. Gallium-68 can be conveniently and economically obtained from the ⁶⁸Ge/⁶⁸Ga generator and the long half-life of the parent nuclide ⁶⁸Ge (t_{1/2} = 271 days) allows long-term PET imaging on-site. Thereby, the introduction of gallium-68 generator has opened access to the PET radioisotopes for diagnostic sites, located outside production centers equipped with cyclotrons. The availability of the ⁶⁸Ge/⁶⁸Ga generator system also provides imaging centers with a PET nuclide that is routinely available in a manner similar to the generator-produced single-photon emission computed tomography nuclide technetium-99m, with added value of better resolution and sensitivity. Thus, the development of gallium radioisotopes and diagnostics procedures combined with on-demand production and operation in the absence of cyclotron facilities provides a reasonable development pathway for gallium-68 labeled compounds in the molecular imaging.

Although the first gallium-68 generators have been used already in the 60s, the chemical forms of the isotope as the inert complexes, prevented the practical application and the development of gallium radiochemistry. The second problem was the presence of significant amounts of parent nuclide and other metallic impurities in eluate. Both of these factors resulted in the temporary loss of interest in applications of gallium-68, but as a complex with EDTA has been used in clinical practice that time and was the β+ source in the development of the PET scanners. Practical applications of the first gallium generators have been described recently.⁵

Beginning of the 21st century saw new developments in the construction of generators. Various resins, using inorganic oxides (TiO₂, IGG100 ⁶⁸Ga generator; Eckert&ZieglerEurope),⁶ SnO₂⁷ and nanoparticles⁸ or organic polymers, containing

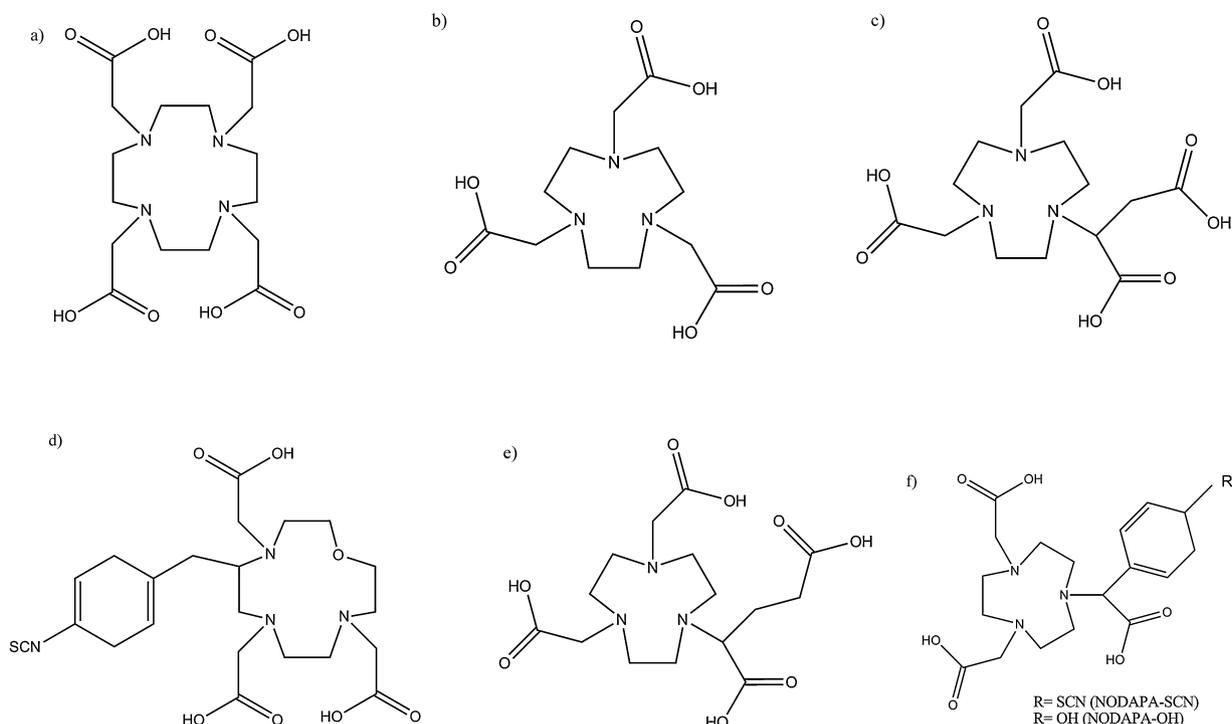


Fig. 1 – Examples of the ligands DOTA (a), NOTA (b), and derivatives: NODAGA (c), OXO-DO3A (d), NODASA (e) and NODAPA (f).

N-methylglucamine groups⁹ or lauryl gallate (ITG GmBH, Germany) were constructed and successfully applied. Contemporary $^{68}\text{Ge}/^{68}\text{Ga}$ generator can be used for 1–2 years and the gallium-68 build-up is rapid enough to allow multiple radiotracer preparations daily.

The gallium-68 eluted from the inorganic generator often suffered from the contamination by other metals, which influenced negatively radiolabelling.¹⁰ Commonly observed impurities are: Fe(III), Al(III) and Zn(II) at the mg/L levels, Ni(II), Co(II), Cd(II) and Cu(II) at 0.01–0.1 mg/L and traces of Mn, Pb, Cr, V.^{7,11} Average gallium-68 breakthrough varies from 10^{-4} to $10^{-5}\%$. The most critical impurities are ^{68}Ge , Fe(III), Zn(II), Mn(II), thus additional purification and removal of the metal contaminants has to be applied. The most popular procedures differentiate gallium species (Ga^{3+} cations and anionic $[\text{GaCl}_4]^-$) depending on pH and chloride concentration and then separate on the respective ion exchangers. Typically, $^{68}\text{Ga}^{3+}$ is trapped on the strong cation exchange cartridge (SCX), then converted with HCl, HCl/acetone or NaCl into $[\text{GaCl}_4]^-$ and transferred with a small volume of concentrated HCl to the strong anion exchange cartridge (SAX) and finally eluted with water or slightly acidic solution.^{12–15} The process could be easily automated for the reproducible preparation of ready-to-use $^{68}\text{Ga}^{3+}$ in optimal activity and chemical form for labeling.¹⁶

The generators based on zirconium nanoparticles and organic matrix could be eluted under milder conditions and gallium-68 ions are easier to form suitable complexes for clinical use. Furthermore, they suffer less from the metallic contaminants and the purification processes could be omitted or simplified.¹⁷

At the time of this publication, at least four types of the generators with different construction and scalable activity are available commercially and more than 100 centers across the world use this type of generator, both for the basic research on gallium-68 radiochemistry and the clinical trials.¹⁸

4. Radiopharmaceuticals

The rapid development of radiopharmaceuticals labeled with gallium is due to the synergy between a growing importance of the PET diagnostics in the molecular imaging and the use of long-term experience with the technetium generators. The trivalent cation $^{68}\text{Ga}^{3+}$ is eluted from the generator and its chemical form allows simple and universal application in radiopharmaceutical preparations with an appropriate chelator. Ga^{3+} ion has complexing properties comparable to those of Fe(III) and In(III) but can easily adapt to various Tc targeting concepts (Table 2), resulting in a large group of molecules (vectors), with well-established and proved practical applications in the molecular imaging.

4.1. Gallium-68 bifunctional chelators (BFC) in the neuroendocrine tumor imaging

The bifunctional chelators are compounds acting as a conjugate between the radioisotope and a vector. The BFC's key features are the ability to quickly and steadily incorporate the isotope and create covalent bonds with biomolecules, responsible for targeting. Over the past decade, the interest in it is inseparably connected with the synthesis and use of

Table 2 – ^{99m}Tc tracers with their ⁶⁸Ga analogs.

Diagnostics	^{99m} Tc	⁶⁸ Ga
Peptide receptors	^{99m} Tc-HYNIC-peptide	⁶⁸ Ga-DOTA-peptide
Bone metastases	^{99m} Tc-MDP	⁶⁸ Ga-phosphonates
Renal function	^{99m} Tc-DTPA/MAG3/DMSA	⁶⁸ Ga-EDTA
Cardiac function	^{99m} Tc-RBC/MIBI	⁶⁸ Ga-BAPEN
Lung function	^{99m} Tc-MAA	⁶⁸ Ga-MAA
Hepatobiliary	^{99m} Tc-IDA	⁶⁸ Ga-IDA
Infection	^{99m} Tc-WBC	⁶⁸ Ga-citrate
Brain imaging (perfusion)	^{99m} Tc-ECD	⁶⁸ Ga-ECD

Abbreviations: HYNIC, hydrazinonicotinamide; MDP, methylenediphosphonic acid; DTPA, diethylenetriaminepentaacetic acid; MAG3, mercaptoacetyltriglycine; DMSA, dimercaptosuccinic acid; RBC, red blood cell; MIBI, methoxyisobutylisonitrile; MAA, macroaggregated albumin; IDA, iminodiacetic acid; WBC, white blood cell; ECD, ethyl cysteinate dimer; EDTA, ethylenediaminetetraacetic acid; BAPEN, Tris(4,6-dimethoxysalicylaldehyde)-N,N'-bis(3-aminopropyl)-N,N'-ethylenediamine.

radiolabeled peptides for positron emission tomography (PET) in the clinical and preclinical diagnostics, as well as with the radiation-based therapeutics.

The macrocyclic chelators with three or four nitrogen atoms in a ring have been established as frequently considered routes for the introduction of gallium-68. Between them, the molecules with tri- and tetraaza-ring have become the most prevalent since irreversible complexation of the gallium atom, thermodynamic stability and superior kinetic even at room temperature. External substituents, usually in the form of carboxyl groups allow convenient conjugation to various targeting molecules.

DOTA (1,4,7,10-tetraazacyclododecane-1,4,7,10-tetraacetic acid) remains the most frequently used chelator because of its availability and well-recognized coordination chemistry.² Its six coordinate triaza-ring analog NOTA ((1,4,7-triazanonane-1,4,7-triyl)triacetic acid) forms slightly deformed octahedral complexes with gallium-68 which display higher stabilities and faster incorporation of Ga(III) at lower temperatures.¹⁸ A significant number of compounds, similar to DOTA and NOTA have been used for specific applications (Fig. 2): bifunctional derivatives of NOTA – NODAGA (1,4,7-triazacyclononane,1-glutaric acid-4,7-acetic acid) and NODASA (1,4,7-triazacyclononane-1-succinic acid-4,7-diacetic acid) are limited to coupling peptides through an amide bond, NODAPA (1,4,7-triazacyclononane-1,4-diacetic acid-7-p-phenyl-acetic acid) with hydroxyl group (NODAPA-OH) or thiocyanate groups (NODAPA-(NCS)_n) have been successfully applied as versatile bifunctional chelators.¹⁹

Many receptors are overexpressed in cancer cells, thus the targeted peptides with aminoacids sequences specific for activity centers, labeled with appropriate radioisotope via BFC, have been used for the development of highly specific imaging probes for PET and/or therapeutic agents.

⁶⁸Ga-DOTA-peptides are a group of PET tracers that specifically bind to somatostatin receptors (SST) that are over-expressed on the neuroendocrine tumor (NET) cells.²⁰ Targeting agents are coupled via the BFC leveraging standard intermediates that enable covalent attachment of peptides, including active octapeptides (octreotide, OC) and related peptide analogs, TOC (Tyr³-OC), TATE (Tyr³-Thr⁸-OC) and NOC (Nal³-OC) (Fig. 2). Six different SST receptors have been identified (SST1, 2A, 2B, 3, 4, 5) in humans. Of the analogs mentioned above, DOTA-TOC and DOTA-TATE show a high affinity for the

SSTR2, although a 10-fold higher affinity for the SSTR2 has been demonstrated for DOTA-TATE as compared to DOTATOC in vitro in the transfected cell cultures. Their binding affinity to SSTR5 is quite low and that to SSTR3 is almost negligible and there is no considerable affinity to SSTR1 and SSTR4. For DOTA-NOC, high affinities for SSTRs' 2,3 and 5 were reported,²¹ which improves the binding profile and extends the spectrum of targeted tumors.

Despite the variations in somatostatin receptors affinity, all described compounds (⁶⁸Ga-DOTA-TOC, -NOC, -TATE) have been reported to be accurate for the localization of well differentiated NET lesions, performing better than CT.²²

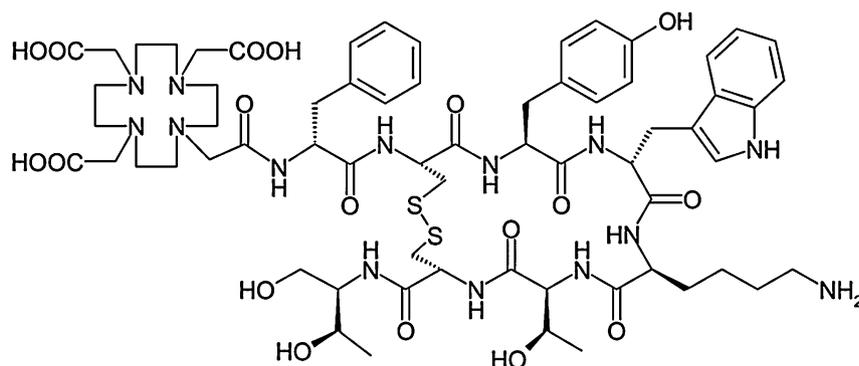
Comparing to other modalities, studies have shown the superiority of PET over ¹¹¹In-pentetreotide-SPECT in the detection of metastases and unknown primary neuroendocrine tumors. PET imaging using ⁶⁸Ga-SSTR has also been found to be more accurate than ¹⁸F-FDOPA-PET in non-carcinoid tumors. [⁶⁸Ga]-DOTA-TATE detected more tumor sites than [¹²³I]-MIBG in patients with the neural crest tumors (including paragangliomas). Only one bone lesion in one patient with adrenal paraganglioma was detected on [¹²³I]-MIBG scan but not in [⁶⁸Ga]-DOTA-TATE.^{23–29}

Radionuclide-labeled DOTA-SSTR analogs are used for diagnostics and therapy of the neuroendocrine tumors. Typically, ⁶⁸Ga-DOTA-TOC is used for diagnosis, while the same compound labeled with high- or medium-energy β-emitters such as yttrium-90 or lutetium-177 is used for therapy. The use of coupled diagnostic and therapeutic isotopes with ligand for treatment of NET allows better planning of therapy and to evaluate the therapeutic outcome as in personalized medicine where the diagnosis is tailored to the subsequent therapy. It influenced radiopharmaceutical sciences with the “theranostics” concept, which combines gallium-68 diagnostics with trivalent therapeutic radiometals (yttrium-90, lutetium-177, bismuth-213)³⁰ with improved personal dosimetry.³¹

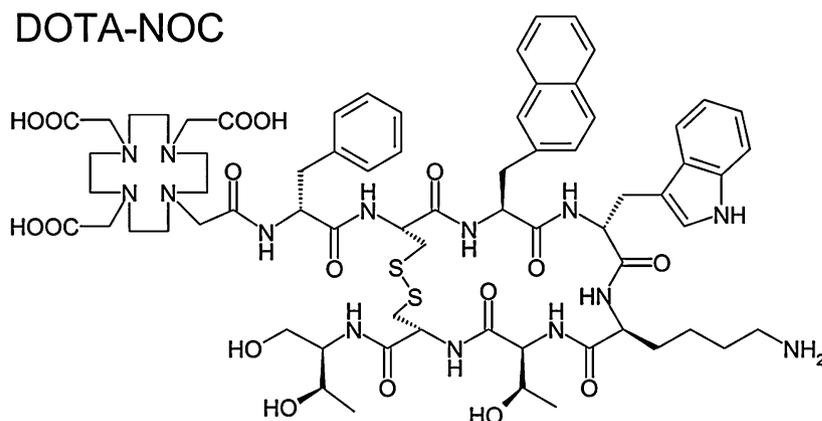
4.2. Behind the NET – applications of ⁶⁸Ga-BFC-core

Two main trends could be observed in the development of methods and applications of the gallium-68 radiopharmaceuticals, other than NET-focused. First, using the technetium “shake'n'shoot” concept, has focused attention to the use of gallium-68 as technetium-99m substitute in the part of applications. Recently published papers have presented efficient

a) DOTA-TOC



b) DOTA-NOC



c) DOTA-TATE

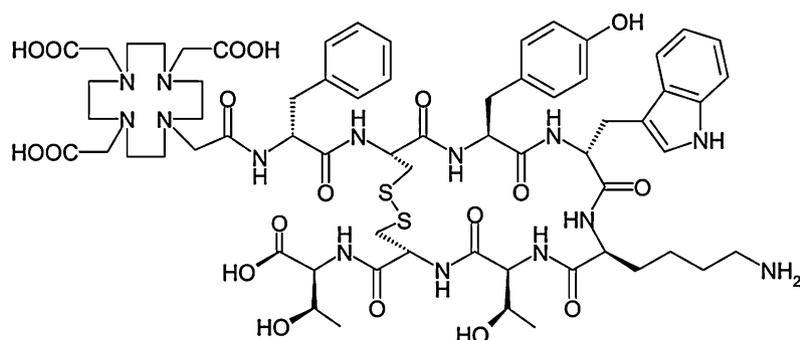


Fig. 2 – Structures of DOTA-TOC (a), DOTA-NOC (b), and DOTA-TATE (c). The most clinically applied ^{68}Ga -labeled pharmaceuticals in nuclear medicine.

gallium-68 labeling of commercially available phosphonate kits for scintigraphy of bone lesions,^{32,33} MAA (macroaggregated human serum albumin) particulate for perfusion studies,^{34,35} ^{68}Ga -NOTA-MSA (mannosylated human serum albumin) for immune system imaging,³⁶ and ^{68}Ga -BAPEN (Tris(4,6-dimethoxysalicylaldehyde)-N,N'-bis(3-aminopropyl)-N,N'-ethylenediamine) myocardial uptake as substitute for MIBI.³⁷ All these compounds profit from similar affinity of gallium and technetium to some vectors and only

slightly differentiate biodistribution and pharmacokinetics (Table 2).

The second trend, taking the generator advantages of independence from the cyclotron, much cheaper operation and production, resulted in the synthesis of ^{68}Ga labeled radiopharmaceuticals as an alternative or support to fluorine-18 and carbon-11 compounds. Routine fluorine-18 production runs are bulk and it is hard to scale them for single patient. Therefore, flexibility of gallium-68 generators opens the

Table 3 – ⁶⁸Ga analogs to commonly used ¹⁸F and ¹¹C PET tracers.

Diagnosics	¹⁸ F/ ¹¹ C	⁶⁸ Ga
Angiogenesis	¹⁸ F-galacto-RGD	[⁶⁸ Ga]DOTA-RGD, ⁶⁸ Ga-VEGF
General cancer imaging	¹⁸ FDG	⁶⁸ Ga-CXCR4 biomarker, ⁶⁸ Ga-uPAR biomarker, ⁶⁸ Ga-SCN-NOTA-BZA
Hypoxia	¹⁸ F-nitroimidazoles (FAZA, FMISO, FETNIM)	⁶⁸ Ga-DOTA-imidazoles
Proliferation	¹⁸ FLT	⁶⁸ Ga-DO3A-thymidine
Glioma	¹⁸ FET, ¹¹ C-methionine	⁶⁸ Ga-glutamine, ⁶⁸ Ga-DO3A-alanine, ⁶⁸ Ga-DO2A-tyrosine, ⁶⁸ Ga-DOTA-PSMA
Prostate cancer	¹⁸ FDG, ¹¹ C-acetate, ¹⁸ F-choline, ¹¹ C-choline	

Abbreviations: RGD, arginylglycylaspartic acid; FAZA, [¹⁸F]-1- α -D-(2-deoxy-2-fluoroarabinofuranosyl)-2-nitroimidazole; FMISO, [¹⁸F]-fluoromisonidazole; FETNIM, [¹⁸F]-fluoroerythronitroimidazole; FLT, [¹⁸F]-fluorothymidine; FET, [¹⁸F]-fluoroethyl-L-tyrosine; VEGF, vascular endothelial growth factor; CXCR4, chemokine receptor; BZA, benzamide; PSMA, prostate specific membrane antigen; uPAR, urokinase-type plasminogen activator.

possibility to produce short series or even single doses. While it is difficult today to imagine the replacement of ¹⁸FDG or leading carbon-11 radiopharmaceuticals in routine clinical diagnostics, the use of gallium-68 equivalents in targeted diagnostics seems to be rapidly developing (Table 3).

4.2.1. Angiogenesis

Receptors playing a key role in angiogenesis are important targets for several experimental drugs. The expression of the $\alpha v \beta 3$ integrin has been detected on blood vessels with the intensive angiogenesis and indicates tumors with high metastatic potential. One of the most intensely evaluated compounds so far is [¹⁸F]Galacto-RGD³⁸ which specifically binds to the $\alpha v \beta 3$ integrin and shows very good pharmacokinetics. Comparable results were received for [⁶⁸Ga]DOTA-RGD³⁹ or other RGD peptides linked with modified bifunctional ligands: [⁶⁸Ga]NS3-RGD, [⁶⁸Ga] Oxo-DO3A-RGD,⁴⁰ or four nitrogen atoms open chain H2dedpa.⁴¹ Effective diagnosis of angiogenesis was reported as well with the VEGF (vascular endothelial growth factor) receptors. The tracer contained single chain VEGF (scVEGF), linked with the polyethylene glycol (PEG) bridge to NOTA, which was suitable for labeling with gallium-68 at ambient temperature. Gallium-68 labeled scVEGFPEG-NOTA was injected intravenously into HT-29 (human colon adenocarcinoma) tumor-bearing mice, and clearly visualized tumor structure.⁴² Labeling procedure was proposed as a kit-formulated radiopharmaceutical for the targeted imaging of tumor angiogenesis.

4.2.2. General oncology imaging

Mapping of the chemokine receptor CXCR4 in tumors is used for rating tumor aggressiveness and estimation of the metastatic seeding probability in breast, prostate and lung cancer. Specific tracer for the imaging of CXCR4, gallium-68 labeled DOTA-4-FBn-TN14003 (fluorinated 14-aminoacids peptide) was synthesized as a potential PET tracer for this purpose.⁴³

Similar studies were performed with the urokinase-type plasminogen activator receptor (uPAR) which is a well-established biomarker for tumor aggressiveness and metastatic potential. The synthetic peptide (Asp-cyclohexylalanine-Phe-D-Ser-D-Arg-Tyr-Leu-Trp-Ser (AE105)) has been identified to have a high affinity for human uPAR. The use of ⁶⁸Ga-DOTA-AE105-NH2 and ⁶⁸Ga-NODAGA-AE105-NH2

as the first gallium-68 labeled uPAR radiotracers for PET imaging were reported, where NODAGA is a favored tracer providing highest tumor-to-background ratio.⁴⁴ These new tracers constitute an interesting alternative to the ⁶⁴Cu-labeled version (⁶⁴Cu-DOTA-AE105 and ⁶⁴Cu-DOTA-AE105-NH2) for detecting uPAR expression in tumor tissue.⁴⁵

Radiolabeled benzamides (BZA) have been reported to be the attractive agents for targeting malignant melanoma as they bind melanin and display high accumulation in the melanoma cells. The ⁶⁸Ga-labeled benzamide via NOTA was presented as a potential PET agent for malignant melanoma. Biodistribution and micro-PET studies of ⁶⁸Ga-SCN-NOTA-BZA in B16F10-bearing mice showed selective uptake into the tumor. The radiotracer was effectively cleared via renal excretion without further metabolism.⁴⁶

4.2.3. Hypoxia imaging

Wide range of fluorine-18 nitroimidazoles have been developed such as FETNIM ([¹⁸F]-fluoroerythronitroimidazole), FAZA ([¹⁸F]-1- α -D-(2-deoxy-2-fluoroarabinofuranosyl)-2-nitroimidazole), FETA ([¹⁸F]-fluoroetanidazole) and especially [¹⁸F]FMISO, still considered as a gold standard for hypoxia imaging.⁴⁷ Copper-64 ATSM (diacetyl-bis(N4-methylthiosemicarbazone) was indicated as an alternative, but suffers from less favorable dosimetry, associated with emission of β^- (38.5%), and solid target cyclotron production (⁶⁴Ni(p,n)⁶⁴Cu) which limits availability. Several ⁶⁸Ga-complexes with nitroimidazoles were proposed for hypoxic tumor imaging: DOTA-derivative with one or two metronidazole moieties,⁴⁸ imidazole coupled to DOTA by conjugating via an amide or thiourea bond.⁴⁹

The results obtained were comparable with reference images obtained with [¹⁸F]FMISO and [¹⁸F]FAZA, but the usage of methylated 5-nitroimidazole improved performance of ⁶⁸Ga-DOTA-nitroimidazoles in hypoxia imaging.⁵⁰

4.2.4. Proliferation

Radiolabeled thymidine analogs specifically addressing DNA synthesis have significant potential for imaging of tissue proliferation in vivo. [¹⁸F]-fluoro-3'-deoxy-3'-L-fluorothymidine ([¹⁸F]FLT) has been developed and well-established as a proliferation tracer.

Thus, thymidine analogs substituted by BFC with gallium-68, were proposed as alternative to [¹⁸F]FLT. DO3A macrocycle

in N-3 position was attached to thymidine and then labeled with gallium-68.⁵¹

Amino acids labeled with carbon-11 or fluorine-18 play an important role in clinical diagnostics and understanding the basic processes in biochemistry and physiology.⁵²⁻⁵⁴ They are involved in the synthesis of peptides and proteins, thus tumor cells concentrate labeled amino acids at a high rate, while the uptake in normal cerebral tissue is relatively low. ¹¹C-methionine (MET) and ¹⁸F-fluoroethyl-L-tyrosine (FET) are routinely applied for gross tumor volume delineation in brain gliomas and for the differentiation between treatment-related changes and residual/recurrent tumor.

Radiolabeled with gallium-68 glutamine was used for tracing glutamine for imaging and for determination of protein synthesis rates in tumors. Glutamine was conjugated to DOTA and labeled with gallium-68 by mixing the Ga³⁺ species with the conjugate in ethanol and reacting at 65 °C.^{55,56}

Alanine derivatives of DO2A and DO3A were synthesized and labeled with gallium-68. Cell uptake assays were carried out in Hep3B (human hepatoma) and U87MG (human glioma) cell lines at 37 °C. Positron emission tomography (PET) imaging studies were performed using balb/c mice xenografted with CT-26 (mouse colon cancer).

⁶⁸Ga-DO3A-homoalanine showed the highest uptake value ratio, followed by ⁶⁸Ga-DO2A-alanine, ⁶⁸Ga-DO3A-alanine and ⁶⁸Ga-DO2A-homoalanine, but all derivatives were found to have high tumor cell uptakes, high tumor/nontumor ratio and low nonspecific uptake in normal organs, except for the kidneys.⁵⁷

The novel tyrosine chelate (⁶⁸Ga-DO2A-(OBu-L-tyr)₂) (⁶⁸Ga-1,4,7,10-tetraazacyclododecane-1,7-diacetic acid-4,10-di-(O-butyl)-L-tyrosine) was proposed as an approach which uses the biological amino acid transporter targeting properties of L-tyrosine.

In vitro studies utilizing the F98-glioblastoma cell line revealed specific uptake of [⁶⁸Ga]Ga-DO2A-(OBu-L-tyr)₂ that was comparable to that of the reference [¹⁸F]fluoroethyl-L-tyrosine (FET). These promising results indicate a high potential of tyrosine analogs labeled with GaDOTA for molecular imaging of tumor-driven amino acid uptake by PET.⁵⁸

4.2.5. Prostate cancer

Imaging of prostate cancer was dominated by 3 tracers: ¹⁸FFDG, acetate and choline, both labeled with fluorine-18 or carbon-11.⁵⁹ The prostate specific membrane antigen (PSMA) is a unique membrane bound glycoprotein, which is over-expressed in prostate cancer and is well-established in the diagnosis as highly specific prostate cancer cell-surface protein. Recently, theranostics concept had been applied to label PSMA-ligands with gallium-68 and lutetium-177.⁶⁰ Successful synthesis of ⁶⁸Ga-DOTA-PSMA⁶¹ and ⁶⁸Ga(HBED-CC)-PSMA⁶² was followed by promising results of clinical trials, where at least one lesion suspicious for cancer was indicated with 100% detection ratio at PSA >2.2 ng/ml. Lesions suspicious for prostate cancer were presented with excellent contrast as early as 1 h post injection, with high detection rates even at low PSA levels.⁶³

5. Availability

The effective synthesis of DOTA-TOC and DOTA-TATE were presented⁶⁴ and numerous strategies of automated^{65,66} or semi-automated⁶⁷ purification and synthesis were proposed. One of the recent developments influenced radiopharmaceutical sciences with a new term “autoclabeling”,⁶⁸ describing convenient procedure for gallium-68-labeling by combining the labeling reaction and the steam sterilization into one single step to get the final, sterile ready-to-use product. Increase in clinical and radioprotection demands have boosted for extensive automation of the production process and resulted in a number of commercial synthetic modules, but regulatory restrictions, both requesting GMP-compliant generator and GMP regulations for labeling as for the standard drugs, has retarded the implementation in clinical practice. Both these obstacles have been overcome and at least one pharmaceutical ⁶⁸Ge/⁶⁸Ga generator was officially approved for the use in clinical studies and some modules were registered as GMP-compliant.⁶⁹ Additional positive impact could be caused by the debate on adopting GMP-regulations for microdoses to PET-radiopharmaceuticals production specificity,⁷⁰ intending to maintain the required quality aspects but not to hamper innovation and dynamic development of gallium-68 radiopharmaceuticals in clinical trials.

6. Conclusions

Construction of the ⁶⁸Ge/⁶⁸Ga generator increased the applications of radiopharmaceuticals labeled with this isotope in medicine. The availability of the commercial, pharmaceutical grade ⁶⁸Ga/⁶⁸Ge generator for routine applications and a favorable chemistry using DOTA, NOTA-derived bifunctional chelators have opened a brilliant future for the application of gallium-68 in all fields of PET imaging. Wide range of the PET radiopharmaceuticals based on gallium-68 labeling can be an alternative or complement to the already well-established radiopharmaceuticals based on fluorine-18 or carbon-11.

Nowadays, a complete replacement of these radioisotopes is hard to imagine, but the extension of diagnostic procedures by on-request, short series synthesis of targeted radiopharmaceuticals labeled with gallium-68, seems to be a very reasonable option in the nearest future.

Conflict of interest

None declared.

Financial disclosure

None declared.

REFERENCES

- Engle JW, Lopez-Rodriguez V, Gaspar-Carcamo RE, et al. Very high specific activity ⁶⁸Ge/⁶⁸Ga from zinc targets for PET. *Appl Radiat Isot* 2012;70:1792-6.

2. Breeman WAP, de Blois E, Chan H, Konijnenberg M, Kwekkeboom DJ, Krenning EP. ^{68}Ga -labeled DOTA-peptides and ^{68}Ga -labeled radiopharmaceuticals for positron emission tomography: current status of research, clinical applications, and future perspectives. *Semin Nucl Med* 2011;**41**:314–21.
3. Khan MU, Khan S, El-Refaie S, Win Z, Rubello D, Al-Nahhas A. Clinical indications for gallium-68 positron emission tomography imaging. *EJSO* 2009;**35**:561–7.
4. Smith DL, Breeman WAP, Sims-Mourtada J. The untapped potential of Gallium-68-PET: the next wave of ^{68}Ga -agents. *Appl Radiat Isot* 2013;**76**:14–23.
5. Rösch F. Past, present and future of $^{68}\text{Ge}/^{68}\text{Ga}$ generators. *Appl Radiat Isot* 2013;**76**:24–30.
6. Lin M, Ranganathan D, Mori T, et al. Long-term evaluation of TiO_2 -based $^{68}\text{Ge}/^{68}\text{Ga}$ generators and optimized automation of ^{68}Ga DOTATOC radiosynthesis. *Appl Radiat Isot* 2012;**70**:2539–44.
7. Rossouw DD, Breeman WAP. Scaled-up radiolabelling of DOTATATE with ^{68}Ga eluted from a SnO_2 -based $^{68}\text{Ge}/^{68}\text{Ga}$ generator. *Appl Radiat Isot* 2012;**70**:1741–50.
8. Chakravarty R, Shukla R, Ram R, Tyagi AK, Dash A, Venkatesh M. Development of a nano-zirconia based $^{68}\text{Ge}/^{68}\text{Ga}$ generator for biomedical application. *Nucl Med Biol* 2011;**38**:575–83.
9. Nakayama M, Haratake M, Ono M, et al. A new $^{68}\text{Ge}/^{68}\text{Ga}$ generator system using an organic polymer containing N-methylglucamine groups as adsorbent for ^{68}Ge . *Appl Radiat Isot* 2003;**58**:9–14.
10. Chakravarty R, Chakraborty S, Dash A, Pillai MRA. Detailed evaluation on the effect of metal ion impurities on complexation of generator eluted ^{68}Ga with different bifunctional chelators. *Nucl Med Biol* 2013;**40**:197–205.
11. Astia M, De Pietri G, Fraternali A, et al. Validation of $^{68}\text{Ge}/^{68}\text{Ga}$ generator processing by chemical purification for routine clinical application of ^{68}Ga -DOTATOC. *Nucl Med Biol* 2008;**35**:721–4.
12. Zhernosekov KP, Filosofov DV, Baum RP, et al. Processing of generator-produced ^{68}Ga for medical application. *J Nucl Med* 2007;**48**:1741–8.
13. Mueller D, Klette I, Baum RP, Gottschaldt M, Schultz MK, Breeman WAP. Simplified NaCl based (^{68}Ga) concentration and labeling procedure for rapid synthesis of (^{68}Ga) radiopharmaceuticals in high radiochemical purity. *Bioconjug Chem* 2012;**23**(8):1712–7.
14. Schultz MK, Mueller D, Baum RP, Watkins GL, Breeman WAP. A new automated NaCl based robust method for routine production of gallium-68 labeled peptides. *Appl Radiat Isot* 2013;**76**:46–54.
15. Loktionova NS, Belozub AN, Filosofov DV, et al. Improved column-based radiochemical processing of the generator produced ^{68}Ga . *Appl Radiat Isot* 2011;**69**:942–6.
16. Gebhardt P, Opfermann T, Saluz HP. Computer controlled ^{68}Ga milking and concentration system. *Appl Radiat Isot* 2010;**68**:1057–9.
17. Maecke HR, Andre JP. In: Chemistry PET, Schubiger PA, Lehmann L, Friebe M, editors. *^{68}Ga -PET radiopharmacy: a generator-based alternative to ^{18}F -radiopharmacy*. Berlin, Heidelberg: Springer-Verlag; 2007.
18. Banerjee SR, Pomper MG. Clinical applications of gallium-68. *Appl Radiat Isot* 2013;**76**:2–13.
19. Riss PJ, Kroll C, Nagel V, Rösch F. NODAPA-OH and NODAPA-(NCS)_n: synthesis ^{68}Ga -radiolabelling and in vitro characterisation of novel versatile bifunctional chelators for molecular imaging. *Bioorg Med Chem Lett* 2008;**18**:5364–7.
20. Cambioli S, Ambrosini V, Morigi JJ, Tabacchi E, Fanti S. ^{68}Ga -labelled peptides for diagnosis of neuroendocrine tumours. *Méd Nucl* 2013;**37**:66–70.
21. Wild D, Schmitt JS, Ginj M, et al. DOTA-NOC, a high-affinity ligand of somatostatin receptor subtypes 2, 3 and 5 for labelling with various radiometals. *Eur J Nucl Med Mol Imaging* 2003;**30**(10):1338–47.
22. Ambrosini V, Campana D, Tomassetti P, Grassetto G, Rubello D, Fanti S. PET/CT with ^{68}Ga Gallium-DOTA-peptides in NET: an overview. *Eur J Radiol* 2011;**80**:e116–9.
23. Naji M, Zhao C, Welsh SJ, et al. ^{68}Ga -DOTA-TATE PET vs. ^{123}I -MIBG in identifying malignant neural crest tumours. *Mol Imaging Biol* 2011;**13**(4):769–75.
24. Maurice JB, Troke R, Win Z, et al. A comparison of the performance of ^{68}Ga -DOTATATE PET/CT and ^{123}I -MIBG SPECT in the diagnosis and follow-up of pheochromocytoma and paraganglioma. *Eur J Nucl Med Mol Imaging* 2012;**39**(August (8)):1266–70.
25. Taieb D, Rubello D, Al-Nahhas A, et al. Imaging for paragangliomas: relation to genetic mutations. *EJSO* 2011;**37**:662–8.
26. Kowalski J, Henze M, Schuhmacher J, Macke HR, Hoffmann M, Haberkorn U. Evaluation of positron emission tomography imaging using [^{68}Ga]-DOTA-D-Phe1-Tyr3-octreotide in comparison to [^{111}In]-DTPA-OC SPECT. First results in patients with neuroendocrine tumours. *Mol Imaging Biol* 2003;**5**:42–8.
27. Gabriel M, Decristoforo C, Kendler D, et al. ^{68}Ga -DOTA-Tyr3-octreotide PET in neuroendocrine tumors: comparison with somatostatin receptor scintigraphy and CT. *J Nucl Med* 2007;**48**:508–18.
28. Buchmann I, Henze M, Engelbrecht S, et al. Comparison of ^{68}Ga -DOTATOC PET and ^{111}In -DTPAOC (Octreoscan) SPECT in patients with neuroendocrine tumours. *Eur J Nucl Med Mol Imaging* 2007;**34**:1617–34.
29. Krausz Y, Freedman N, Rubinstein R, et al. ^{68}Ga -DOTA-NOC PET/CT imaging of neuroendocrine tumors: comparison with ^{111}In -DTPA-octreotide (OctreoScan®). *Mol Imaging Biol* 2011;**13**(June (3)):583–93.
30. Roesch F, Baum RP. Generator-based PET radiopharmaceuticals for molecular imaging of tumours: on the way to THERANOSTICS. *Dalton Trans* 2011;**40**(23):6104–11.
31. Velikyan I, Sundin A, Eriksson B, et al. In vivo binding of [^{68}Ga]-DOTATOC to somatostatin receptors in neuroendocrine tumours – impact of peptide mass. *Nucl Med Biol* 2010;**37**:265–75.
32. Fellner M, Biesalski B, Bausbacher N, et al. ^{68}Ga -BPAMD: PET-imaging of bone metastases with a generator based positron emitter. *Nucl Med Biol* 2012;**39**:993–9.
33. Toegel S, Wadsak W, Mien LK, et al. Preparation and pre-vivo evaluation of no-carrier-added, carrier-added and cross-complexed [^{68}Ga]-EDTMP formulations. *Eur J Pharm Biopharm* 2008;**68**:406–12.
34. Mathias CJ, Green MA. A convenient route to [^{68}Ga]-MAA for use as a particulate PET perfusion tracer. *Appl Radiat Isot* 2008;**66**:1910–2.
35. Maus S, Buchholz HG, Ament S, Brochhausen C, Bausbacher N, Schreckenberger N. Labelling of commercially available human serum albumin kits with ^{68}Ga a surrogates for $^{99\text{m}}\text{Tc}$ -MAA microspheres. *Appl Radiat Isot* 2011;**69**:171–5.
36. Choi JY, Jeong JM, Yoo BC, et al. Development of ^{68}Ga -labeled mannosylated human serum albumin (MSA) as a lymph node imaging agent for positron emission tomography. *Nucl Med Biol* 2011;**38**(April (3)):371–9.
37. Yang BY, Jeong JM, Kim YJ, et al. Formulation of ^{68}Ga BAPEN kit for myocardial positron emission tomography imaging and biodistribution study. *Nucl Med Biol* 2010;**37**:149–55.
38. Beer AJ, Grosu AL, Carlsen J, et al. [^{18}F]Galacto-RGD positron emission tomography for imaging of $\alpha\text{v}\beta3$ expression on the neovasculature in patients with squamous cell carcinoma of the head and neck. *Clin Cancer Res* 2007;**13**:6610–6.
39. Dijkgraaf I, Yim CB, Franssen GM, et al. PET imaging of $\alpha\text{v}\beta3$ integrin expression in tumours with ^{68}Ga -labelled mono-, di- and tetrameric RGD peptides. *Eur J Nucl Med Mol Imaging* 2011;**38**:128–37.

40. Knetsch PA, Petrik M, Rangger Ch, et al. [⁶⁸Ga]NS3-RGD and [⁶⁸Ga] Oxo-DO3A-RGD for imaging αvβ3 integrin expression: synthesis, evaluation, and comparison. *Nucl Med Biol* 2013;40:65–72.
41. Boros E, Ferreira CL, Patrick BO, Adam MJ, Orvig C. RGD conjugates of the H2dedpa scaffold: synthesis, labeling and imaging with ⁶⁸Ga. *Nucl Med Biol* 2011;38(8):1165–74.
42. Eder M, Krivoshein AV, Backer M, Backer JM, Haberkorn U, Eisenhut M. ScVEGF-PEG-HBED-CC and scVEGF-PEG-NOTA conjugates: comparison of easy-to-label recombinant proteins for [⁶⁸Ga]PET imaging of VEGF receptors in angiogenic vasculature. *Nucl Med Biol* 2010;37:405–12.
43. Hennrich U, Seyler L, Schäfer M, et al. Synthesis and in vitro evaluation of ⁶⁸Ga-DOTA-4-FBn-TN14003, a novel tracer for the imaging of CXCR4 expression. *Bioorg Med Chem* 2012;20(February (4)):1502–10.
44. Persson M, Madsen J, Ostergaard S, Ploug M, Kjaer A. ⁶⁸Ga-labeling and in vivo evaluation of a uPAR binding DOTA- and NODAGA-conjugated peptide for PET imaging of invasive cancers. *Nucl Med Biol* 2012;39:560–9.
45. Li D, Liu S, Shan H, Conti P, Li Z. Urokinase plasminogen activator receptor (uPAR) targeted nuclear imaging and radionuclide therapy. *Theranostics* 2013;3(7):507–15.
46. Kim HJ, Kim DY, Park JH, et al. Synthesis and characterization of a ⁶⁸Ga-labeled N-(2-diethylaminoethyl)benzamide derivative as potential PET probe for malignant melanoma. *Bioorg Med Chem* 2012;20(August (16)):4915–20.
47. Kurihara H, Honda N, Kono Y, Arai Y. Radiolabelled agents for PET imaging of tumor hypoxia. *Curr Med Chem* 2012;19(20):3282–9.
48. Sano K, Okada M, Hisada H, et al. In vivo evaluation of a radiogallium-labeled bifunctional radiopharmaceutical, Ga-DOTA-MN2, for hypoxic tumor imaging. *Biol Pharm Bull* 2013;36(4):602–8.
49. Hoigebazar L, Jeong JM, Hong MK, et al. Synthesis of ⁶⁸Ga-labeled DOTA-nitroimidazole derivatives and their feasibilities as hypoxia imaging PET tracers. *Bioorg Med Chem* 2011;19(April (7)):2176–81.
50. Fernández S, Dematteis S, Giglio J, Cerecetto H, Rey A. Synthesis, in vitro and in vivo characterization of two novel ⁶⁸Ga-labelled 5-nitroimidazole derivatives as potential agents for imaging hypoxia. *Nucl Med Biol* 2013;40:273–9.
51. Schmid M, Neumaier B, Vogt AT, et al. Synthesis and evaluation of a radiometal-labeled macrocyclic chelator-derivatized thymidine analog. *Nucl Med Biol* 2006;33(April (3)):359–66.
52. Ermert J, Coenen HH. Methods for ¹¹C- and ¹⁸F-labelling of amino acids and derivatives for positron emission tomography imaging. *J Label Compd Radiopharm* 2013;56:225–36.
53. Dunet V, Rossier C, Buck A, Stupp R, Prior JO. Performance of ¹⁸F-fluoro-ethyl-tyrosine (¹⁸F-FET) PET for the differential diagnosis of primary brain tumor: a systematic review and metaanalysis. *J Nucl Med* 2012;53(February (2)):207–14.
54. Walter F, la Fougère C, Belka C, Niyazi M. Technical issues of [(¹⁸F)FET]-PET imaging for radiation therapy planning in malignant glioma patients – a review. *Front Oncol* 2012;2(October):130.
55. Pellegrini PA, Howell NR, Shepherd RK, et al. Synthesis and radiolabelling of DOTA-linked glutamine analogues with ^{67,68}Ga as markers for increased glutamine metabolism in tumour cells. *Molecules* 2013;18(June (6)):7160–78.
56. Kou YW, Chen WJ, Lee TW, Lo JM. Synthesis and evaluation of ⁶⁷Ga- and ⁶⁸Ga-DOTA-glutamine. *Ann Nucl Med Sci* 2009;22:35–42.
57. Shetty D, Jeong JM, Ju CH, et al. Synthesis of novel ⁶⁸Ga-labeled amino acid derivatives for positron emission tomography of cancer cells. *Nucl Med Biol* 2010;37(November (8)):893–902.
58. Burchardt C, Riss PJ, Zoller F, et al. [⁶⁸Ga]Ga-DO(2)A-(OBU-L-tyr)(2): synthesis, ⁶⁸Ga-radiolabeling and in vitro studies of a novel ⁶⁸Ga-DO(2)A-tyrosine conjugate as potential tumor tracer for PET. *Bioorg Med Chem Lett* 2009;19(July (13)):3498–501.
59. Jadvar H. Prostate cancer: PET with ¹⁸F-FDG, ¹⁸F- or ¹¹C-acetate, and ¹⁸F- or ¹¹C-choline. *J Nucl Med* 2011;52(January (1)):81–9.
60. Behe M, Alt K, Deininger F, et al. In vivo testing of ¹⁷⁷Lu-labelled anti-PSMA antibody as a new radioimmunotherapeutic agent against prostate cancer. *In Vivo* 2011;25(1):55–9.
61. Banerjee SR, Pullambhatla M, Byun Y, et al. ⁶⁸Ga-labeled inhibitors of prostate-specific membrane antigen (PSMA) for imaging prostate cancer. *J Med Chem* 2010;53(July (14)):5333–41.
62. Afshar-Oromieh A, Malcher A, Eder M, et al. PET imaging with a [⁶⁸Ga]gallium-labelled PSMA ligand for the diagnosis of prostate cancer: biodistribution in humans and first evaluation of tumour lesions. *Eur J Nucl Med Mol Imaging* 2013;40(April (4)):486–95.
63. Afshar-Oromieh A, Haberkorn U, Eder M, Eisenhut M, Zechmann CM. [⁶⁸Ga]Gallium-labelled PSMA ligand as superior PET tracer for the diagnosis of prostate cancer: comparison with ¹⁸F-FECH. *Eur J Nucl Med Mol Imaging* 2012;39(June (6)):1085–6.
64. Velikyan I, Xu H, Nair M, Hall H. Robust labeling and comparative preclinical characterization of DOTA-TOC and DOTA-TATE. *Nucl Med Biol* 2012;39(July (5)):628–39.
65. Ocak M, Antretter M, Knopp R, et al. Full automation of ⁶⁸Ga labelling of DOTA-peptides including cation exchange prepurification. *Appl Radiat Isot* 2010;68(February (2)):297–302.
66. Di Pierro D, Rizzello A, Cicoria G, et al. Radiolabelling, quality control and radiochemical purity assessment of the Octreotide analogue ⁶⁸Ga DOTA NOC. *Appl Radiat Isot* 2008;66(August (8)):1091–6.
67. Azhdarinia A, Yang DJ, Chao C, Mourtada F. Infrared-based module for the synthesis of ⁶⁸Ga-labeled radiotracers. *Nucl Med Biol* 2007;34(January (1)):121–7.
68. Blom E, Kozirowski J. ⁶⁸Ga-autoclabeling of DOTA-TATE and DOTA-NOC. *Appl Radiat Isot* 2012;70(6):980–3.
69. Boschi S, Lodi F, Malizia C, Cicoria G, Marengo M. Automation synthesis modules review. *Appl Radiat Isot* 2013;76:38–45.
70. Verbruggen A, Coenen HH, Deverre JR, et al. Guideline to regulations for radiopharmaceuticals in early phase clinical trials in the EU. *Eur J Nucl Med Mol Imaging* 2008;35(November (11)):2144–51.