Labeled EGFR-TK Irreversible Inhibitor (ML03): In Vitro and In Vivo Properties, Potential as PET Biomarker for Cancer and Feasibility as Anticancer Drug

Giuseppeppa Ortu1,2, Iris Ben-David1, Yulia Rozen3, Nanette M.T. Freeman3, Roland Chisin3, Alexander Levitzki2 and Eyal Mishani1,4

1Hebrew University, Hadassah University Hospital Campus, Department of Medical Biophysics and Nuclear Medicine, Jerusalem, Israel
2Hebrew University, Givat Ram Campus, Department of Biological Chemistry, Institute of Life Sciences, Jerusalem, Israel
3Hadassah University Hospital Campus, Department of Medical Biophysics and Nuclear Medicine, Jerusalem, Israel

Radiosynthesis of ML03 (N-[4-((4,5-dichloro-2-fluorophenyl)amino)quinazolin-6-yl)acrylamide), an irreversible EGFR-TK inhibitor, was developed. Its in vitro and in vivo properties, its potential as PET biomarker in cancer and the feasibility of this type of compounds to be used as anticancer drug agents were evaluated. The compound was labeled with carbon-11 at the acryloyl amide group, via automated method with high yield, chemical and radiophysical purities. ELISA carried out with A431 lysate showed high potency of ML03 with an apparent IC50 of 0.037 nM. The irreversible binding nature of ML03 was studied and 97.5% EGFR-TK autophosphorylation inhibition was observed in intact A431 cells 8 h post incubation with the inhibitor. Specific binding (67%) of [11C]ML03 was obtained in cells. An A431 tumor-bearing rat model was developed and the validity of the model was tested. In biodistribution studies carried out with tumor-bearing rats, moderate uptake was observed in tumor and high uptake in liver, kidney and intestine. In metabolic studies, fast degradation of [11C]ML03 was observed in blood and indicating a short half-life of the compound in the body. PET scan with tumor-bearing rats confirmed the results obtained in the ex vivo biodistribution studies. Although in vitro experiments may indicate efficacy of ML03, non-specific binding, ligand delivery and degradation in vivo make ML03 ineffective as PET bioprobe. Derivatives of ML03 with lower metabolic clearance rate and higher bioavailability should be synthesized and their potential as anticancer drugs and PET bioprobes evaluated.

Key words: carbon-11; cancer; biodistribution; PET; EGFr

Growth factors mediate their pleiotropic actions by binding to and activating receptor tyrosine kinases. Epidermal growth factor receptor (EGFr), erb-B1) belongs to a family of proteins involved in the proliferation of normal and malignant cells.1,2 The binding of activating ligands such as EGF, TGF, TGF, or HB-EGF to the EGFr results in activation of the cytosolic kinase domain. Overexpression of EGFr is the hallmark of many human tumors such as breast cancer, glioma, laryngeal cancer, squamous cell carcinoma of the head and neck and prostate cancer.3 Since the late 1980s continuous effort has been invested in the development of EGFr tyrosine kinase inhibitors as anti-neoplastic drugs.4,5,11 Radioactively labeled small molecules with high affinity and selectivity for the tyrosine kinase domain of EGFr might offer a specific and sensitive tool to be used in positron emission tomography (PET) for diagnosis of tumors overexpressing EGFr. PET provides 3D and quantitative maps of the distribution of radioactive tracers within the human body and hence permits the measurement of physiological, biochemical and pharmacological function at the molecular level, both in healthy and pathological states. PET is based on the use of short half-life positron-emitting isotopes, such as 11C (t1/2 20.39 min.), 18F (t1/2 109.8 min.), 15O (t1/2 2.037 min.) and 11N (t1/2 9.965 min.). After injection of a suitable biomarker, the PET scan provides a mapping of the biomarker distribution and hence of a specific receptor, transporter or enzyme in the human body. Biomarkers with high selectivity for a specific receptor or enzyme might accumulate in those organs and tissues where the targeted protein is overexpressed. In the case of EGFr, its overexpression in human tumors could be non-invasively detected by labeling tyrosine kinase inhibitors with positron-emitting isotopes. The PET application of these potential biomarkers represents a new strategy for the diagnosis of EGFr-expressing tumors.12,14 Moreover, the increasing demand to incorporate diagnostics into clinical studies of EGFr-targeted therapies suggests a potential future use of EGFrTK labeled inhibitors. These labeled inhibitors could help select patients for clinical trials. Cancer patients could undergo a non-invasive diagnostic PET study with labeled EGFrTK inhibitor, and if their tumor is found to overexpress EGFrTK, they could then be selected for a clinical trial that utilizes anti-EGFr therapy.

In our previous work,15 we synthesized, labeled and evaluated 4-(fluoroanilino)quinazoline derivatives as EGFrTK PET biomarkers. These molecules bind reversibly to the ATP binding site of the receptor and inhibit the autophosphorylation of the EGFrTK. Competition with intracellular ATP results in their fast dissociation from the EGFr kinase site, however, making these compounds ineffective as PET reporter probes. We therefore concluded that irreversible EGFr tyrosine kinase inhibitors labeled with carbon-11 might be more effective as PET markers for tumors overexpressing EGFr.

A group of compounds (6-acrylamido-4-anilinoquinazolines) that bind irreversibly to the EGFr have been described recently.16–20 The ligand binds covalently to the cyst-773, which is proximal to the ATP binding site.20 The irreversible binding blocks EGFr function, leading to growth inhibition and apoptosis.16

On the basis of these findings, we present the biological evaluation of a novel EGFr TK irreversible inhibitor, N-[4-((4,5-dichloro-2-fluorophenyl)amino)quinazolin-6-yl]acrylamide (ML03, Fig. 1). This molecule was successfully labeled with carbon-11 in the acryloyl group and evaluated in vitro and in vivo as a PET tracer for EGFrTK-overexpressing tumors.

Abbreviations: AR, amphireguline; BTC, beta-celluline; EGF, epidermal growth factor, EGFr, epidermal growth factor receptor; HB-EGF, heparin-binding EGFr-like growth factor; PET, positron emission tomography; TK, tyrosine kinase; TGFα, transforming growth factor α. Grant sponsor: USA-Israel Bi-National Science Foundation; grant number: BSF 98000082.

*Correspondence to: Hadassah University Hospital, Department of Nuclear Medicine, IL-91120, Jerusalem, Israel. Fax: +972-2-6421203. E-mail: mishani@md2.huji.ac.il

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Two sets of experiments were carried out. In the first one, cells, after 18 hr of starvation, were incubated for 2 hr with different amounts of ML03 at 37°C, then the medium was washed away and FCS/ML03-free medium was added. Cells were then kept for 2 and 8 hr at 37°C until the EGFr was stimulated by EGF. In the set kept for 8 hr, the medium was replaced 3 times with FCS/ML03-free medium, once every 2 hr.

In the second set of experiments, starved cells were incubated for −30 min at room temperature and then incubated with ML03 for different time ranges (from 1–60 min). One group was immediately stimulated with EGF (20 ng/ml, 5 min), whereas 2 other sets of cells were returned to 37°C, after replacing the medium with FCS/ML03-free medium. One group of cells (at 37°C) was stimulated with EGF after 2 hr whereas the remaining group was stimulated only after 8 hr. In this latter experiment, the medium was not replaced during the 8 hr of incubation with FCS/ML03-free medium.

The inhibitor solution was always freshly prepared and the final concentration of the vehicle was 0.05% DMSO and 0.2% EtOH. Cells were always activated with EGF and then washed with PBS. Whole-cell lysates were made by scraping the cells into the well with 0.4 mL of Laemml buffer (10% glycerol, 5% sodium dodecyl sulfate, 5% β-mercaptoethanol, 50 mM Tris pH 6.8) containing 0.001% bromophenol blue and then boiled for 5 min. Each sample was kept at −20°C until the protein determination assay.

The amount of protein in each lysate was determined by a filter paper assay described by Bonasera et al. The same amount of protein for each sample was then loaded onto an acrylamide gel for a Western blot assay. Blots were incubated with anti-phosphotyrosine, followed by incubation with hors eradish peroxidase-conjugated secondary antibody. EGFr-TK bands were visualized using chemiluminescent detection.

**In vitro studies with [11C]ML03: determination of specific binding in intact A431 cells**

Samples of 1.6 × 10^5 A431 cells (~3.2 pmol of EGFr-TK) were harvested into tubes with 2 mL of DMEM + 10% FCS and preincubated for 40 min at room temperature under shaking conditions. One set of tubes was incubated with unlabeled ML03 (1 nmol) for determination of the non-specific binding, whereas another set of cells was incubated only with the inhibitor vehicle (0.2% DMSO). [11C]ML03 (from 5–80 pmol, in EtOH solution, 0.2% final concentration) was then added to both tube sets for 20 min at room temperature. For each quantity of [11C]ML03 added, 2 tubes did not contain A431 cells but only medium (+ unlabeled ML03, for the non-specific binding set) and these samples were used to check the non-specific retention of the compound on the filters. After the incubation, cells were harvested with a cell harvester (Yeda Scientific Instruments, Rehwot, Israel) and the tubes washed twice with PBS. The GF/C filters used for the harvesting were pre-soaked in 0.3% PEI (polyethylenimine) for at least 1 day (at 4°C). Cells were then counted in a γ-counter (1480 Wizard™ 3). Specific binding of [11C]ML03 was calculated by subtracting the radioactivity of samples preincubated with unlabeled material from radioactivity of cells not preincubated with unlabeled compound. Both groups of values were corrected for filter [11C]ML03 retention by subtracting the counts of the samples without A431 cells.

**In vivo studies with [11C]ML03: biodistribution in tumor-bearing rats**

All experiments on living animals were carried out under the guidelines and with the approval of the Research Animal Ethics Committee of The Hebrew University of Jerusalem. A nude rat tumor implant model was developed. WAG rnu/rnu male rats (300–400 g) were injected s.c. in the left or right posterior leg; or in the neck with A431 (10^3 in 200 μL sterile PBS). Tumor growth was quite variable and tumor mass in the biodistribution experiments ranged between 3–9 g.
Tumor-bearing rats were anesthetized either with pentothal (85 mg/kg, i.p.) or ether (although it is known that pentothal might enhance the P450 cytochrome activity in the liver, we found no difference in the biodistribution of the ligand or in the metabolic studies when animals are anesthetized with ether or pentothal) and injected i.v. in the tail with [11C]ML03 (100–200 μCi, 0.44–10.53 μCi/mL, in ~300 μL of SF, ~14% EtOH). Animals were sacrificed at specific time points by means of CO2 asphyxiation. Blood and certain organs and tissues were collected or excised, counted in a γ-counter and weighed.

**Validation of the tumor-bearing animal model**

To evaluate the correlation between the tumor mass and the amount of EGFr per g of tumor, tumors were collected from rats and the EGFr extracted.11,16

**EGFr extraction.** Intact tumors of different mass were carefully excised from tumor-bearing rats (n = 9) and kept at −70°C until the extraction. Tumors were never thawed, to avoid the loss of the liquid component where it was present. Before the extraction, tumors were reduced to small pieces with mortar and pestle on ice and with liquid nitrogen inside the mortar. An aliquot of 1 g was weighed and homogenized on ice with polytron in 5 mL of freshly prepared buffer (150 mM NaCl, 50 mM HEPES, 10% glyc- erol, aprotinin 1 μg/mL, leupeptin 10 μg/mL, AEBSF 1 mM, 1% sodium orthovanadate, benzodioinine ~0.3 mg/mL, soy bean tryp- sin inhibitor 10 μg/mL). After homogenization, 1% Triton X-100 (final concentration) was added and the samples were kept for 30 min at 4°C and rotated end over end. A subsequent centrifugation (20,000g × 30 min at 4°C in an Eppendorf centrifuge) allowed the separation of pellet and supernatant. The supernatant (containing EGFr) was diluted 1:1 with Laemmli buffer and boiled for 10–20 min at 100°C. Protein amounts of the boiled samples were measured as described above and then equal amounts of protein were loaded onto a gel (10% acrylamide) for a Western blot assay. In this assay (described previously) the total EGFr was determined by incubation of the blot with antibody anti-EGFr. To validate our extraction procedure, 107 2 × 1000 3 × 105 A431 cells were extracted and diluted using exactly the same procedure described for tumors and loaded onto gel for EGFr determination.

**Extraction and stability of [11C]ML03 in blood and plasma**

To determine the stability of our compound and its half-life in blood and plasma, [11C]ML03 (~100 nCi, range of mass 0.32–1.87 μCi/mL, vehicle ETOH <1.5% final concentration) was incubated at 37°C with 1 mL of human blood or plasma (in glass vials), under shaking conditions. At different time points (10, 20, 30, 40, 50 and 60 min), 5 mL of ether was added to blood/plasma and the vials were counted in a γ-counter. One sample of blood and 1 of plasma were treated immediately with ether without incubation at 37°C (Time 0). The ether phase was then removed and the post-extrac- tion fraction (erythrocytes and non-extractable ML03) was screened by ELISA. The dose inhibition rate was studied using 150 pmol of ML03, ranged from 6.1 × 10−8 to 15 nM and another set of results obtained with concentration between 1.6 × 10−9 nM and 10 nM. The curve (r2 = 0.84) resulting from the combination of all values gives an apparent IC50 of 0.037 nM with a confidence interval ranging between 0.010 nM and 0.134 nM, indicating the high potency of ML03. According to the methodology of our assay, the ATP cannot displace ML03 that is added to the A431 lysate before ATP. The apparent IC50 value is a titration of the receptor’s still available for further ATP binding after ML03 bind- ing. Therefore, a longer incubation time with ML03 would result in a smaller IC50 value.

**In vitro results**

ML03 ability to inhibit the autophosphorylation of EGFr-TK was screened by ELISA. The dose–response curve shown in Figure 2 was obtained with 3 sets of values in which concentration of ML03 ranged from 6.1 × 10−8 to 15 nM and another set of values obtained with concentration between 1.6 × 10−9 nM and 10 nM. The curve (r2 = 0.84) resulting from the combination of all values gives an apparent IC50 of 0.037 nM with a confidence interval ranging between 0.010 nM and 0.134 nM, indicating the high potency of ML03. According to the methodology of our assay, the ATP cannot displace ML03 that is added to the A431 lysate before ATP. The apparent IC50 value is a titration of the receptor’s still available for further ATP binding after ML03 bind- ing. Therefore, a longer incubation time with ML03 would result in a smaller IC50 value.

The irreversible effect of ML03 on the EGFr-TK autophosphorylation was tested with intact A431 cells (Fig. 3). When 107 A431 cells (~2.0 pmol of EGFr) (for Bmax values see Bonasera et al.)13 were used (Fig. 3a), 100% inhibition was obtained 2 hr post- incubation with 200 pmol of ML03 (50 nM), whereas 8 hr post- incubation gave ~98% inhibition with the same amount of inhibitor. When 2 × 107 (~0.4 pmol of EGFr) A431 cells were used (Fig. 3b), 100% inhibition at 2 hr post-ML03 incubation was observed with 50 pmol (10 nM) of inhibitor, whereas 8 hr post ML03 incubation the inhibition was ~80%.

The inhibition rate was studied using 150 pmol of ML03, constant quantity of cells (~1.2 pmol EGFr) and different incubation time points. The results are shown in Figure 3 where the
quantification of the Western blots is represented in the plots. The EGFr-TK autophosphorylation level was measured immediately after the incubation with ML03 (Fig. 3c), 2 hr post-incubation (Fig. 3d) and 8 hr post-incubation (Fig. 3e). In the latter case, the medium was not changed during the 8 hr, unlike in the previous experiment (Fig. 3a, b). The plots show that the EGFr-TK autophosphorylation level decreases rapidly during the first 10 min of incubation with ML03. After 60 min, 82.5% of the receptor is inhibited and this value increases when the autophosphorylation is measured 2 hr and 8 hr post-incubation, reaching 95% and 97.5% inhibition, respectively.

In vitro studies with [11C]ML03

The specific binding of ML03 was tested by a radioactive binding assay incubating [11C]ML03 with A431 cells (1.6 × 10^5 cells). Figure 4 shows the curves of total, non-specific and specific binding during incubation at 20 min at room temperature. The values in the plot were corrected by subtracting the non-specific retention of [11C]ML03 in the GF/c filters. This type of filter displayed a very high and inconsistent retention of the labeled compound. Treating them with 0.3% polyethylenimine resulted in a linear retention of [11C]ML03 proportional to the amount added in the assay and in general, in a low number of counts compared to the counts in the samples. As shown in the figure, the maximum specific binding of [11C]ML03 is reached with 80 pmol/tube of [11C]ML03 and corresponds to 67%.

In vivo results

In previous work, we carried out in vivo biodistribution studies in small animal models, i.e., tumor-bearing mice. The results of those experiments indicated some specific binding in tumors at 20 min post [11C]ML03 injection. The tumor/blood ratio, however, was below unity. We assumed that the specific binding and the tumor/blood ratio might increase at later time points, therefore we carried out more biodistribution studies at earlier time points and at 30 and 60 min post-tracer injection. In the present experiment we used a larger animal model: tumor-bearing rats. Results are shown in Table I (%id/g and tissue/blood ratios). The highest amount of radioactivity was found in the liver, kidneys and intestine. Values (%id/g) indicated a general decrease of tracer uptake over time in all the organs, excluding the intestine. Compared to the values at 15 min, we obtained the following results at 1 hr post-injection: radioactivity was 1/2 in tumor, skin and kidneys, 1/4 in blood, 1/4 in muscle, heart, lung and spleen, 1/8 in liver and was 3 times higher in the intestine. Normalization of the amount of radioactivity in tissue for the radioactivity in the blood (tissue/
blood ratios) also showed a tracer decrease in muscle, heart, lung, liver and spleen. Increase in tissue/blood ratios was observed for tumor, skin, kidneys and intestine. Ratios for tumor/blood, kidney/blood and liver/blood from biodistributions at 15, 30 and 60 min and from partial biodistributions (sacrifice times: 75, 100, 120 min) are shown in Figure 5. Activity in the kidney and liver remained high at all time points. Whereas the liver/blood ratio decreased, the kidney/blood ratio increased. Although the tumor/blood ratio was low, it increased slowly but steadily with time (Fig. 5, see linear regression with \( r^2 = 0.7 \) and \( p = 0.048 \)), and suggests the possibility of higher tumor/blood ratios at 20–24 hr post-injection, achieving a good target/noise ratio.

Validation of the animal model

We found extreme variability of the tumor morphology. Tumors containing more than 50% of liquid material interfered with our calculation of the % radioactive injected dose per gram, because we could not establish whether this material also contained EGFr. Therefore, we measured the amount of EGFr in intact tumors and correlated it with the tumor mass. Tumors of various masses (from 3–10 g) were extracted from the rats. A random sample of known mass was taken from each frozen tumor and extracted with a proportional volume of extraction buffer (1:5, w/v). Proteins were then measured in the extracts. The amount of extractable proteins was 5.56 ± 0.86 μg per μL of extraction volume, corresponding to 55.58 ± 7.98 mg proteins/g tumor. An equal quantity of protein for each tumor extract was loaded onto polyacrylamide gel for determination of EGFr using Western blot assay. The results are shown in Figure 6. In these plots the means of the EGFr densities are represented by solid lines, whereas dotted lines indicate the 95% interval of confidence. The coefficients of variation are 15.47% and 19.81%, in plots (Fig. 6a) and (Fig. 6b), respectively. The slight difference between these 2 variances indicates that the variation of EGFr is higher when related to the mass of tumor than when related to the extractable proteins. In both cases, however, we observe that the EGFr density normalized per μg of protein or per g of tumor does not vary with tumor size, suggesting that our tumor animal model is valid and reliable.

Stability and \([11C]ML03 metabolism studies

Table II shows the extractable amount of \([11C]ML03 from human blood and plasma during 1 hr of incubation and Figure 7a, the thin layer radiochromatogram. The extractable amount of radioactivity in blood and plasma was 64.6 % and 83.2%, respectively, at Time Point 0. After 1 hr the extractable radioactivity decreased to 50.2% (blood) and 63.3% (plasma). The TLC radiochromatogram (Fig. 7a) showed a single band with RF corresponding to ML03, hence the only extractable radioactivity corresponds to the amount of ML03 still unaltered in blood and plasma. It is likely that the non-extractable fraction of ML03 is the compound itself linked to SH groups of plasma proteins.

Table III, IV and Figure 7b show the results obtained from in vivo experiments on \([11C]ML03 metabolism in control rats. The extractable fractions of radioactivity from blood (Table III, column B) were 31.6%, 26.1% and 17.1% at 15, 30 and 60 min post-injection, respectively. The extractable fraction seemed to contain 2 radioactive compounds as shown in the TLC (Fig. 7b), 1 of them at the same level as the standard \([11C]ML03 (band 1) and another above (band 2). The percent ML03 (band 1) in the TLC were 89.8, 83.1 and 74.5% and for the derivative (band 2) 8.4, 16.9, 25.5% at 15, 30 and 60 min, respectively (Table III, column C). Only 0.054% id/g of extractable ML03 in blood is not metabolized and available for further binding at 15 min (Table III, column D); the extractable metabolite is 0.006% id/g at this time point. If we consider the radioactivity in blood as 100% (without normalization for the injected dose), the amounts of intact and available ML03 are 28.3%, 20.9% and 11.7% at 15, 30 and 60 min, respectively (Table III, column E), indicating that the half-life of our compound in blood is of the order of a few minutes. Conversely, the only detectable and extractable metabolite increases up to 3.95% during 1 hr (Table III, column E).

In another set of studies we measured the intact ML03 in liver (and again in blood) at 15 and 30 min post-injection. Table IV and Figure 7b show the results. The total amounts of radioactivity extractable from the liver were 9.3% (15 min) and 13.3% (30 min). From this fraction, 2 radioactive bands were found on the TLC as observed in blood (Fig. 7b). The amounts of extractable non-metabolized ML03 (band 1) were 0.151 and 0.047 %id per g of liver at 15 and 30 min, respectively, whereas amounts of unknown extractable metabolite (band 2) were 0.016 and 0.020 %id/g liver, respectively. Considering the radioactivity in the liver as 100%, at 15 and 30 min, 8–9% corresponded to ML03, whereas 0.9–3.9% corresponded to a metabolite; at the same time points, 91% and 87% respectively, was unextractable radioactivity. These values confirm that our compound is metabolized rapidly and already cleared from the body in the first 15–30 min with production of other radioactive compounds.

PET studies

Figure 9 illustrates coronal sections (frames from 15–60 min) of A431 tumor-bearing rats injected with \([18F]FDG (Fig. 9a) or \([11C]ML03 (Fig. 9b). In all images the contour of the attenuation scan has been superimposed on the emission images to locate tumor position and accumulation of radioactivity. Scans with both tracers were carried out in different days, on Rat 1, to compare the body distribution. As shown by the red cursor, in Rat 1 the tumor was positioned in the leg. After injection of \([18F]FDG the tumor
For tumor, the linear regression is shown ($r^2 (15, 60 \text{ min})$, 2 (73 min), 1 (100 min) and 1 only for tumor (120 min).

injection time in tumor-bearing rat biodistributions. N/H11005

3.53, 4.61 and 2.69, respectively. These results confirm the limited accumulation of the tracer in the tumor observed in the ex vivo biodistribution experiments, and the intestine as main organ of accumulation of radioactivity during the hour post-tracer injection.

### DISCUSSION

Radiochemistry

Labeling ML03 with fluorine-18 was considered initially due to its longer half-life of 110 minutes. Introducing fluorine-18 into ML03, however, would involve 5 radiosynthesis steps. Labeling would be the first step. Both the long synthesis time and the difficulties associated with automatic procedure did not favor labeling with fluorine-18. Labeling with carbon-11, on the other hand, enabled us to carry out the introduction of the radioisotope into the molecule as the last step of the synthesis and permitted easy automation, using [1-C-11]acryloyl chloride as the labeling synthon. Radiosynthesis of [C-11]α,β-unsaturated acyl derivatives is already known, although their use as labeling synthons is quite limited. The [C-11]acryloyl chloride synthon was used to label ML03, with 6-amino-4-(3-dichloro-6-fluoro)-quinazoline as precursor. ML03 was produced in 13% recovered radiochemical yield ($^{99\%}$) and chemical purities ($n > 35$) yielding 8–15 mCi of ML03, sufficient for future human use. HPLC analysis of the product solution showed high radiochemical (>99%) and chemical purities (final product containing 0.5–3 ppm of remaining precursor). The specific radioactivity achieved in the radiosynthesis was up to 1.8 Ci/μmol (EOB).

In *vitro* studies

Results from the in *vitro* experiments with unlabeled and labeled ML03 demonstrated that ML03 possesses high affinity for EGFr and irreversibly inhibits the autophosphorylation of the receptor (Fig. 3). The experiments described with intact A431 cells show that the effect of ML03 is very rapid, reaching 80% 10 min after exposure to the compound. In Figure 3b we observe a restored autophosphorylation activity 8 hr post-incubation with 50 and 75 pmol of ML03. This partially restored TK activity is due to the wash-out carried out during the 8 hr post-injection. During this time, the medium was changed 3 times with fresh ML03/FCS-free medium. The removal of the medium washed away the ML03 that was still unbound after 2 hr of incubation and had diffused through the membrane to the medium. It is likely that after the wash out the inhibitor remaining inside the cell is not enough to bind more

**FIGURE 5** - Tumor, liver, kidneys/blood ratios vs post $[^{11}C]$ML03 injection time in tumor-bearing rat biodistributions. N = 5 (30 min), 4 (15, 60 min), 2 (73 min), 1 (100 min) and 1 only for tumor (120 min). For tumor, the linear regression is shown ($r^2 = 0.7, P = 0.048$).

was detectable, whereas when the same rat was injected with $[^{11}C]$ML03 (5 days later) radioactivity accumulation was mainly in the intestine. In this rat the tumor was not visualized and the partial biodistribution carried out after the scan showed tumor/blood, tumor/skin, tumor/muscle and tumor/heart ratios of 2.86, 3.53, 4.61 and 2.69, respectively. These results confirm the limited accumulation of the tracer in the tumor observed in the ex vivo biodistribution experiments, and the intestine as main organ of accumulation of radioactivity during the hour post-tracer injection.
EGFr or inhibit the newly synthesized EGFr. Because the wash out was not carried out in (Fig. 3e), we do not observe any EGFr recovery in the autophosphorylation activity. These data suggest that ML03 is stable for 8 hr. In this regard, comparing Figure 3c and Figure 3e, the percent of inhibition in the 8 hr after the 60-min ML03 incubation is estimated to be approximately an additional 15%, because the ML03 that diffused into the cell during the incubation period was never removed by the wash out procedure. As a result, there was an increased receptor inhibition in Figure 3e, (97.5% inhibition) compared to the inhibition in Figure 3c (82.5%).

Studies with labeled ML03 also demonstrate that ML03 shows high affinity for the EGFr. We recovered up to 67% of the specific binding. At this specific binding, the amount of inhibitor bound to EGFr is ~4 pmol. This value is in agreement with the calculated amount of EGFr used for the assay, indirectly indicating the selectivity of ML03 to EGFr.

**In vivo studies**

In the validation of the animal model experiments, random samples from different tumors with variable mass were extracted. The total EGFr density per g of tumor was found to be constant in all the samples. Distribution and density of EGFr was also homogeneous within the tumor, despite morphological differences, and independent of the tumor size.

By means of our tumor model we checked the biodistribution of ML03. ML03 does not accumulate specifically in the target tumor, however the trend of the tumor/blood ratios (Fig. 5) suggests that this ratio might improve at longer times. Considering that metabromo derivatives of 6-acrylamido-4-anilinoquinazolines were found to be potent and selective in cell studies, labeling ML03 with labeled ML03 – Validation of the tumor-bearing model. Tumors were extracted and part of the extraction was loaded in acrylamide gel for the Western blot assay (n = 9). The y values in (a) and (b) are the experimental EGFr densities of the gel bands versus the total intact tumor mass (a), and the total EGFr densities (= experimental densities values/μL loaded on gel × the total tumor extraction volume) versus the total intact tumor mass.

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"TABLE II – PERCENT OF EXTRACTABLE [11C]ML03 FROM HUMAN BLOOD AND PLASMA"

The tracer was incubated at the indicated times at 37°C (except for 0 min) and extracted with ether. Pre- and post-extraction fractions were then counted. Values are the average ± SD (n = 3 for blood at 0, 20, 40 and 60 min, and plasma at 20, 40 and 60 min of incubation; n = 2 for blood 10, 30 and 50 min, and plasma 0, 10, 30 and 50 min of incubation).

![Figure 7](image_url) - Stability of [11C]ML03 in human blood (a) and metabolism in blood and liver from control rats (b). (a) TLC of extracted radioactive fractions from human blood and plasma after incubation with [11C]ML03 at 37°C (time points 0, 20, 40, 60 min for blood and 20, 40, 60 min for plasma). (b) TLC of extracted fractions from blood and liver of control rats after [11C]ML03 injection (time points 15, 30, 60 minutes for blood and 15, 30 minutes for liver). The samples from liver and blood at 15 and 30 minutes are from the same animal.

![Figure 6](image_url) - Validation of the tumor-bearing model. Tumors were extracted and part of the extraction was loaded in acrylamide gel for the Western blot assay (n = 9). The y values in (a) and (b) are the experimental EGFr densities of the gel bands versus the total intact tumor mass (a), and the total EGFr densities (= experimental densities values/μL loaded on gel × the total tumor extraction volume) versus the total intact tumor mass.
with a longer half-life positron emitter radioisotope such as $^{76}\text{Br}$ ($t_{1/2} = 16.2\text{ hr}$), would probably be more suitable for investigating the potential improvement of target/noise ratio with the time. The fast decrease of liver/blood ratios and the increase of kidney/blood and intestine/blood ratios suggest that the liver metabolizes ML03 and then a portion of it goes to the kidney, whereas another portion is secreted into the intestinal tract (hepatabilary clearance). In the latter case, some metabolites are excreted in the feces although some of them can be reabsorbed into the blood and ultimately excreted with the urine. The rapid increase of the intestine/blood ratio implies that the secretion in the intestinal tract is the main excretion pathway. The radioactivity found in the excretory organs (Fig. 7c) is not due to instability of ML03. As shown in blood and plasma (Fig. 7a), ML03 is stable within 1 hr of incubation at 37°C. The high percent of unextractable radioactivity is most probably due to the high chemical reactivity of the acryloyl group. The hepatic involvement in the decomposition of our compound is clear from the studies in control animals. At 15 min post-injection, 68% of ML03 is not extractable from the blood and therefore no longer available for targeting the tumor, and part of the extractable fraction is already converted to other molecules. One of the hypothesized derivatives of ML03 that could correspond to this extractable metabolite (band 2 in Fig. 7b) is acrylyquinazolone (Fig. 8a). The formation of the dichloroanilinoquinazoline (Fig. 8b) can be excluded, because we did not detect radioactive acryloyl band in any of the TLC. Among the biodistribution experiments, a preliminary in vivo blocking study at 30 min (not described in our article) was carried out without achieving any specific binding, in contrast to previous studies with mice\(^{27}\) where we observed specific binding in the tumor. This could be explained by high non-specific binding, degradation and low bioavailability of ML03 and the difficulties to block high capacity systems (B\(_{\text{max}}\) in rat is proportionally higher than in mouse). Because the tracer accumulation in the tumor was low compared to other organs, we concluded that additional blocking experiments in rats with $[^{11}\text{C}]$ML03 were unnecessary.  

**PET images**

As seen in Figure 9a,b the tumor is not visualized in Rat 1 after $[^{11}\text{C}]$ML03 injection, although the major accumulation of radioactivity is in the gut, confirming the results obtained in the biodistribution studies (Table I). The resulting conclusion is that ML03 is degraded into several metabolites, one of them extractable, but in a very low amount (Fig. 7b), whereas the major part of ML03 (non-extractable) is converted into hydrophilic molecules with the intestine as main excretion pathway. Figure 9c shows a PET image of A431 tumor-bearing mice injected with $[^{18}\text{F}]$FDG (Fig. 9c, top) and with a reversible inhibitor labeled previously$^{15}$ (Fig. 9c, bottom) for comparison with $[^{11}\text{C}]$ML03. Although we did not use a specialized high resolution animal PET scanner and despite the smaller size of the animal model, we could visualize the tumor on the leg of the mice with $[^{18}\text{F}]$FDG and with our reversible inhibitor. In the case of the reversible inhibitor, although the tumor/blood ratio was below unity, we could at least define a weak signal in the time window of highest uptake in the tumor. Considering also that with both the reversible and irreversible inhibi-

### Table III - Metabolism of $[^{11}\text{C}]$ML03 in Blood from Control Rats (radioactivity fraction extracted from blood [1-(post extraction counts/pre extraction counts)]) after the run and detected by phosphor imaging plate (1 as total radioactivity recovered in the TLC); D, extractable normalized by the %id/g (A × B × C); E, B × C (in %).

<table>
<thead>
<tr>
<th>Tissue</th>
<th>Minutes</th>
<th>n</th>
<th>Band 1</th>
<th>Band 2</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
<td>A</td>
<td>B</td>
</tr>
<tr>
<td>Blood</td>
<td>15</td>
<td>2</td>
<td>0.215 ± 0.036</td>
<td>0.314 ± 0.045</td>
</tr>
<tr>
<td>Liver</td>
<td>15</td>
<td>2</td>
<td>1.842 ± 0.240</td>
<td>0.093 ± 0.031</td>
</tr>
<tr>
<td>Band 1</td>
<td>15</td>
<td>2</td>
<td>0.927 ± 0.019</td>
<td>0.055 ± 0.000</td>
</tr>
<tr>
<td></td>
<td>30</td>
<td>3</td>
<td>0.620 ± 0.107</td>
<td>0.013 ± 0.003</td>
</tr>
<tr>
<td></td>
<td>15</td>
<td>2</td>
<td>0.899 ± 0.025</td>
<td>0.151 ± 0.036</td>
</tr>
<tr>
<td></td>
<td>30</td>
<td>3</td>
<td>0.705 ± 0.010</td>
<td>0.047 ± 0.027</td>
</tr>
<tr>
<td>Band 2</td>
<td>15</td>
<td>2</td>
<td>0.173 ± 0.019</td>
<td>0.012 ± 0.002</td>
</tr>
<tr>
<td></td>
<td>30</td>
<td>3</td>
<td>0.380 ± 0.107</td>
<td>0.008 ± 0.002</td>
</tr>
<tr>
<td></td>
<td>15</td>
<td>2</td>
<td>0.101 ± 0.025</td>
<td>0.016 ± 0.001</td>
</tr>
<tr>
<td></td>
<td>30</td>
<td>3</td>
<td>0.295 ± 0.010</td>
<td>0.020 ± 0.012</td>
</tr>
</tbody>
</table>

1Blood and liver results at 15 and 30 min post $[^{11}\text{C}]$ML03 injection are from the same animal for each time. Each sample was extracted with ether, spotted onto TLC, and exposed to phosphorimagers after the run. The values are averages ± SD. Band 1 and band 2, radioactive bands in the TLC; n, number of animals; A, %id/g of radioactivity in blood; B, radioactivity fraction extracted from blood [1-(post extraction counts/pre extraction counts)]; C, radioactivity fractions on TLC after the run and detected by phosphor imaging plate (1 as total radioactivity recovered in the TLC); D, extractable normalized by the %id/g (A × B × C); E, B × C (in %).
tors, the rate of degradation is very similar, we expected to have a
weak signal from the PET studies with [11C]ML03 as well. In
conclusion, although the irreversible inhibitor eliminates the prob-
lem of displacement and competition with ATP seen with revers-
able inhibitors, degradation and bioavailability of ML03 remain
consistent impediments preventing visualization of the tumor by
PET.

ML03 bioavailability

The fast clearance of ML03 raised questions about its bioavail-
bility. ML03 and similar compounds are highly hydrophobic and
non-soluble in aqueous solutions. Thinking about the next gener-
ation of PET biomarkers, one should consider the possibility of
modifying synthesis and radiolabelling to generate compounds that
are more hydrophilic and therefore have increased bioavailability.
One way to predict these properties is to calculate the predictable
LogP and LogD
pH7
values (ACDLabs Chem Sketch software) as bioavailability index for
ML03 and for many other compounds that are described in the
literature as molecules with high af
fi
nity for EGFr-TK and have
been selected for clinical trials. LogP and LogD
pH7
for ML03 were
3.87 and 1.15 and 3.9 and 1.0, respectively. For molecules such as
ZD-1839, OSI-774, CI-1033 and a cyanoquinoline described by
Renhowe24 as compounds in clinical trial, LogP and LogD
pH7
were
4.05 and 3.6 (ZD-1839), 2.46 and 2.4 (OSI-774), 3.59 and
3.1 (CI-1033) and 6.06 and 4.9 (cyanoquinoline), respectively.
Although these values are theoretical, the wide LogP and Log-
D
pH7
range in compounds that are in clinical trials indicates that
this parameter is not sufficient to predict which molecule could
be useful for therapeutic use or as a PET biomarker for diag-
nostics.

CONCLUSION

We synthesized and radiolabeled with 11C the acrylamide quina-
zoline derivative ML03 as a candidate for PET imaging of cancers
overexpressing EGFr-TK. This compound showed high potency
for the receptor in A431 cells and its binding effect was irrevers-
able and fast, reaching 80% inhibition after 10 min. ML03 showed
specific binding in A431 cells (67%). Compared to the in vitro
results with our previous reversible inhibitor,15 ML03 showed
higher potency. A tumor model that proved to be valid and reliable
was developed to study and evaluate PET biomarkers targeting
EGFr-TK. The in vivo studies in tumor-bearing rats did not indi-
cate high accumulation of [11C]ML03 in the tumor. The tumor/
blood ratio increased with time, however, suggesting that a longer
half-life isotope might be more suitable for labeling ML03. In the
experiments on metabolism we observed fast decomposition and
clearance of the compound. The in vivo results were confirmed by
PET studies where the images clearly showed a very high
accumulation in the intestine, the most likely excretory organ
for ML03. These results suggest the low bioavailability of
ML03 as the main parameter preventing greater accumulation
of ML03 in the target. This major problem makes ML03 less

FIGURE 8 – Hypothetical pathways of degradation of ML03.


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REFERENCES

FIGURE 9 – PET images of A431 tumor-bearing rats injected with [18F]FDG (a), or [11C]ML03 (b), and PET images of A431 tumor-bearing mice injected with [18F]FDG (c, top) and a previously reported reversible inhibitor (Bonasera et al. 2001) (c, bottom). The shown coronal sections are the sum of frames between 15 and 60 minutes for (a) and (b), 45–50 minutes (c, top), and 8–12 minutes (c, bottom). Red cursors indicate the tumor position in the attenuation scan (a and b, top), and in the PET image (a and b, bottom).


