

Original Article

Therapeutic effect of ^{188}Re -MAG3-depreotide on non-small cell lung cancer in vivo and in vitro

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Abstract: Objective: To investigate the in vivo and in vitro therapeutic effect of ^{188}Re -MAG3-depreotide on non-small cell lung cancer (NSCLC). Methods: MTT was done to measure the cell proliferation; flow cytometry to detect cell apoptosis; Transwell invasion assay to determine the invasiveness of NSCLC. In addition, HE staining, TUNEL staining and immunohistochemistry for CD34 were employed to investigate the influence of ^{188}Re -MAG3-depreotide on the growth of NSCLC. Results: 1) Within 2-6 days, the inhibitory effect of ^{188}Re -MAG3-depreotide on the proliferation of A549 cells and SPC-A1 cells increased over time. 2) At 48 h after treatment with ^{188}Re -MAG3-depreotide, the apoptosis rate of A549 cells and SPC-A1 cells was 23.1% and 22.6%, respectively. 3) After ^{188}Re -MAG3-depreotide treatment, the number of invasive A549 cells and SPC-A1 cells was reduced by about 3 times when compared with control group. 4) The cancer in the control group presented with unlimited growth. The cancer growth continued after treatment with ^{188}Re or MAG3-depreotide alone, while the cancer growth was markedly inhibited after ^{188}Re -MAG3-depreotide treatment when compared with control group. Conclusion: ^{188}Re -MAG3-depreotide can inhibit the proliferation and invasion of A549 cells and SPC-A1 cells. Treatment with 7.4MBq ^{188}Re -MAG3-depreotide via tail vein can significantly suppress the in vivo cancer growth and induce the apoptosis of cancer cells. These findings demonstrate that ^{188}Re -MAG3-depreotide can induce the apoptosis of NSCLC cells and directly kill the NSCLC cells, which provide evidence for the radiotherapy of NSCLC.

Keywords: ^{188}Re , depreotide, non-small cell lung cancer, in vitro killing effect, cancer bearing nude mice

Introduction

In a majority of patients, NSCLC is usually diagnosed at advanced stage. Under this condition, surgical intervention is usually infeasible. There is evidence showing that numerous patients with NSCLC can not be treated with surgery at first hospital visit, the surgical intervention is feasible in 20% of NSCLC patients and the incidence of post-operative recurrence and metastasis is higher than 50% [1]. Platinum based chemotherapy as first-line treatment has limited efficacy in NSCLC patients, has poor specificity and may prolong the survival time of NSCLC patients to a limited extent. In addition, few second-line chemotherapeutics have been approved by the Federal Drug Administration. The platinum based chemotherapy has been regarded as standardized chemotherapy, but the therapeutic efficacy is as low as 30%, and patients receiving chemotherapy finally fail to

respond to treatment [2]. Although the chemotherapy and radiotherapy are performed simultaneously, the long-term survival is still poor [3]. Implantation of radioactive particles based comprehensive therapy is only palliative not curative strategy, and usually has complications such as pneumothorax, hemorrhage, pain, low fever and radiation injury (acute radiation pneumonitis and radiation pulmonary fibrosis) [4]. Thus, it is imperative to develop new strategies targeting the abnormal signaling pathways in cancer cells which can reduce the side effects and increase the therapeutic efficacy.

In recent years, great progress has been achieved in the targeted therapy with radionuclide labeled molecules which include monoclonal antibody, polypeptide (receptor and ligand) and others (such as AS-ODN). The most common ligands in the receptor targeted therapy

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Table 1. Inhibition rate of A549 cells and SPC-A1 cells at different time points (%)

	2d	3d	4d	5d	6d
A549	13.62±4.75	23.48±7.13	31.05±6.43	42.17±7.88	50.32±9.20
SPC-A1	15.29±4.87	27.26±5.18	39.03±8.65	50.01±6.39	59.44±7.92

are somatostatin analogs. Somatostatin (SST) is a group of cyclic peptide hormones secreted by D cells. The somatostatin receptor (SSTR) has been regarded as one of markers for genotype of cancers to which increasing attention has been paid. The bioeffects of SST are mediated by the SSTR on cell membrane. Studies have confirmed that lung cancer of all types has high expression of SSTR, and the expression of SSTR and its affinity to SST are markedly increased when compared with normal tissues. In addition, semi-quantitative analysis showed the SSTR expression in NSCLC was higher than that in SCLC ($P < 0.01$). Thus, SSTR can be used as a target for the diagnosis and treatment of NSCLC. The endogenous SST is instable and susceptible to degradation. In recent years, investigators have developed a series of somatostatin analogs (SSTA) by altering the non-essential amino acids in SST. These SSTAs have characteristics similar to SST but are not susceptible to degradation and easily to be labeled with radionuclides. Depreotide, a new SSTA, is a disulfide-bond-free cyclic SSRA which avoids the fracture of disulfide bonds due to reduction during the labeling. Thus, depreotide has been a hot topic in researches.

Recently, increasing studies have been conducted to investigate the anti-tumor effect of radionuclide labeled SSTA, for which the rationales include: 1) SSTA can bind to specific SSTR to exert direct anti-tumor effect, inhibit the production of hormones and cytokines which are essential for the cancer growth or angiogenesis in cancers or induce the apoptosis of cancer cells exerting anti-tumor effect; 2) the cytotoxic radionuclides may enter cells via the binding between SSTA and SSTR, and the α ray, β ray, Auger electron and internal-conversion electron produced during the disintegration of radionuclides may exert direct killing effect on cancer cells. Thus, radionuclide mediated therapy has been a novel and promising strategy for the treatment of cancers.

A variety of investigators have investigated the expression of SST of different subtypes in dif-

ferent cancers with different methods [5-8]. Although there is limitation in the methodology of these studies and the findings are inconsistent, several consensuses have been achieved from these studies: one cancer may express SST of different types; different cancers also present difference in the type of expressed SST. In 2002, Rogers et al [9] for the first time confirmed in the NSCLC mice that receptor targeted radionuclide therapy with polypeptides was effective for NSCLC. NSCLC has high expression of SSTR which has high affinity to SST and SSTA. This provides evidence for the application of SST and SSA in the diagnosis and treatment of cancers and presents reference for the SSR targeted therapy of NSCLC. Some investigators investigated the binding of RC-160 (a conjugate of SSA and ¹³¹I) to the specific ligand, and results revealed that SSA could bind to the SSTR on cancer cells with a high affinity. In addition, the conjugate of SSA and DOX (AN-238) has been applied in the treatment of cancer-bearing mice achieving favorable outcome.

In the present study, the anti-tumor effect of ¹⁸⁸Re-MAG3-depreotide on NSCLC was investigated in vitro and in vivo. Our findings may provide evidence for the receptor mediated therapy of NSCLC.

Materials and methods

Main reagents and manufacturers

¹⁸⁸Re was generated by the ¹⁸⁸W/¹⁸⁸Re generator (Shanghai Kexing Pharmaceutical company). RPMI 1640 was purchased from Hyclone (USA). Matrigel was purchased from the Vigorous Biotech (Beijing) Co., Ltd. 24-well Transwell was purchased from the Corning (USA). DAB Peroxidase Substrate Kit was purchased from the Boster Biotech. Xinhua I chromatography paper was from Xi'an Reagent Company. MTT solution was from Sigma (USA). DMSO was from Duchefa Biochemie (Netherlands). 25-cm² flasks and 6-well plates were from Corning (USA).

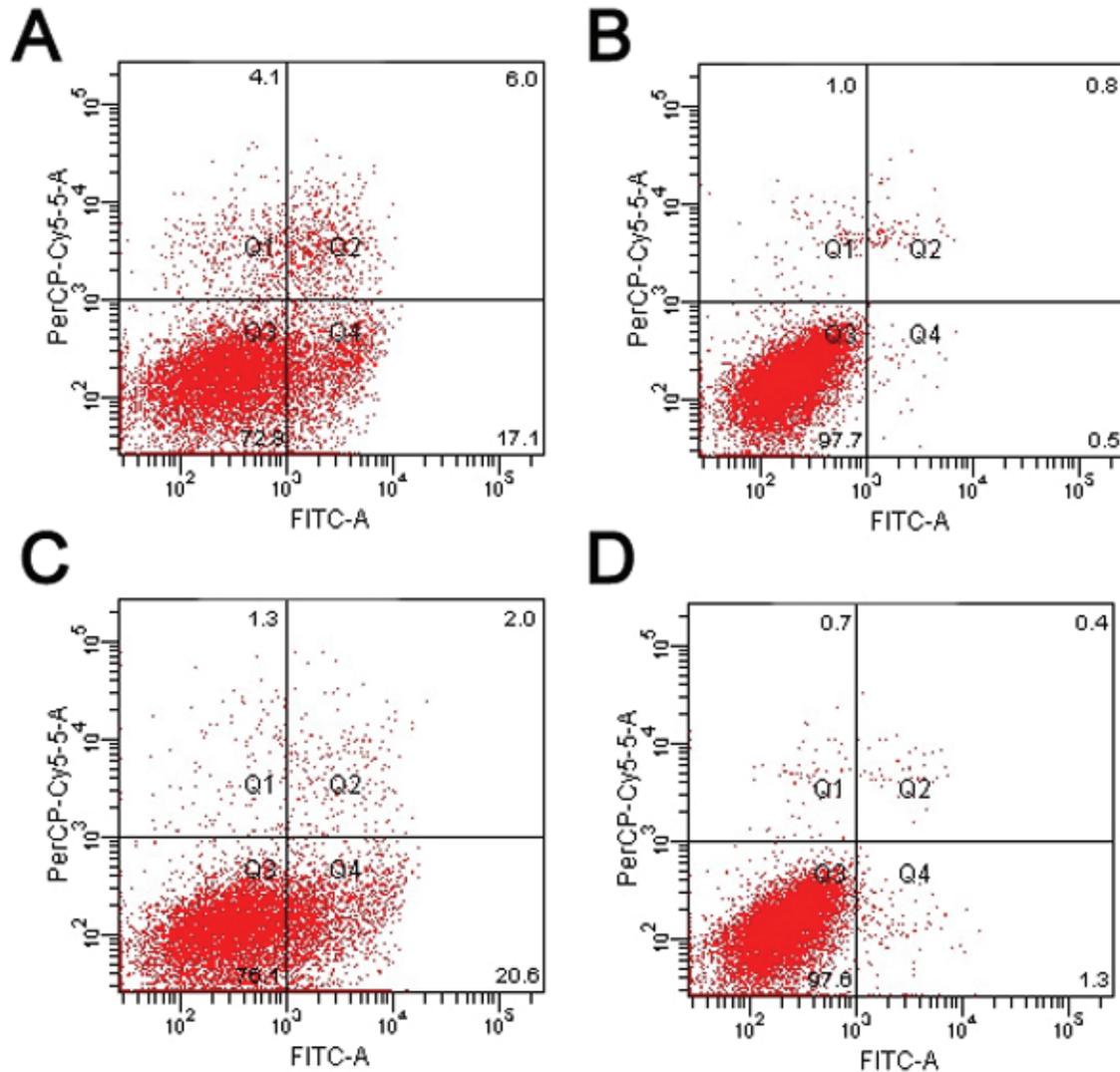


Figure 1. Detection of apoptosis with Annexin-FITC/PI by flow cytometry. A. A549 cells in control group; B. A549 cells after ¹⁸⁸Re-MAG3-depreotide treatment; C. SPC-A1 cells in control group; D. SPC-A1 cells after ¹⁸⁸Re-MAG3-depreotide treatment.

Cell lines and animals

Human lung cancer cells (A549 cells and SPC-A1 cells) were kindly provided by the Institute of Biochemistry and Cell Biology in Research Institute of Life Science of Chinese Academy of Sciences. Nude mice (n=20) aged 3-4 weeks and weighing 20-25 g were purchased from the Shanghai Experimental Center and used for preparation of NSCLC animal model.

In vitro killing effect of ¹⁸⁸Re- MAG3-depreotide on NSCLC cells

Labeling of MAG3-depreotide with ¹⁸⁸Re, labeling rate and radiochemical purity: MAG3-

depreotide was dissolved in ammonium acetate solution followed by addition of tartrate solution and stannous chloride solution. Finally, 200 μL of 740 MBq ¹⁸⁸ReO₄⁻ eluant was added followed by incubation at room temperature for 15-30 min. The labeling rate was measured. The labeled products were subjected to purification with Sephadex G25 column and collection was done step by step. The eluting peak was determined and the radiochemical purity measured.

Culture of A549 cells and SPC-A1 cells: A549 cells were digested with 0.25% trypsin and 0.02% EDTA followed by passaging. One week later, cells were harvested for experiment. The

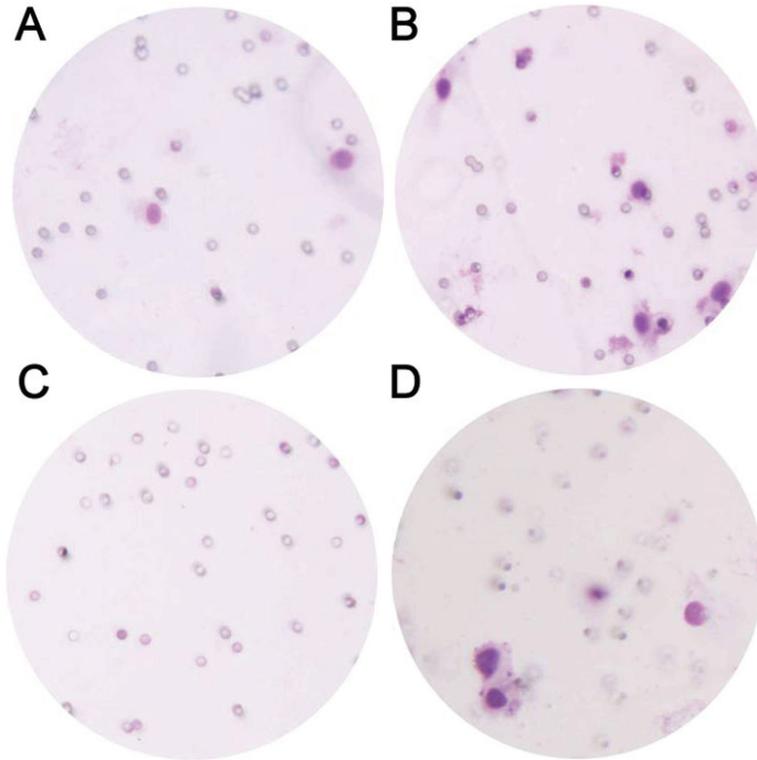


Figure 2. Invasiveness of A549 cells and SPC-A1 cells. A. A549 cells in control group; B. A549 cells after ¹⁸⁸Re-MAG3-depreotide treatment; C. SPC-A1 cells in control group; D. SPC-A1 cells after ¹⁸⁸Re-MAG3-depreotide treatment.

SPC-A1 cells in logarithmic growth phase were maintained in complete RPMI-1640 containing 15% fetal bovine serum at 37°C in an environment with 5% CO₂. When the cell confluence reached 80-90%, the medium was removed and cells were washed in PBS twice. After digestion in 0.25% trypsin, single cell suspension was prepared and cells were seeded into 48-well plates (2×10⁵/well). One day later, monolayer cells were washed in PBS for used following removal of medium.

Killing effect of ¹⁸⁸Re-MAG3-depreotide on A549 cells and SPC-A1 cells: The A549 cells and SPC-A1 cells in logarithmic growth phase were harvested and then maintained in 200 μl of RPMI-1640 or 100 μl of 37MBq/L ¹⁸⁸Re-MAG3-depreotide (final concentration: 12.3MBq/L) for 60 min at 37°C. Eight wells were included in each well. From day 2 to day 6, MTT assay was performed to detect the cell growth. In brief, 5 mg/ml MTT solution (20 μl) was added to each well followed by incubation for 4 h. Then, the medium was removed and 150 μl of DMEM was added followed by incuba-

tion under continuous shaking. The absorbance (A) was measured at 570 nm. The cell growth inhibition rate (IR) was calculated as follow: $IR = [(A_{control} - A_{experiment}) / A_{control}] \times 100\%$

Detection of apoptosis by flow cytometry: A549 cells and SPC-A1 cells were maintained in complete medium and digested with 0.25% trypsin. The cell density was adjusted to 5×10⁵cells/mL with complete RPMI 1640 and cells were seeded into flasks. On the second day, 100 μl of 37MBq/L ¹⁸⁸Re-MAG3-depreotide (final concentration: 12.3 MBq/L) was added. In the blank control group, ¹⁸⁸Re-MAG3-depreotide was not added. Twelve hours later, the medium was removed and cells were washed twice with complete medium. Then, cells were

maintained in complete medium for 48 h. Following digestion with 0.25% trypsin, single cell suspension was prepared and cells were washed in PBS thrice. After centrifugation, cells were re-suspended in 200 μL of binding buffer. For detection of apoptosis, cells were incubated with 10 μL of Annexin V-FITC in dark at room temperature for 30 min and then with 5 μL of PI at room temperature for 5 min. After addition of 400 μL of binding buffer, cells were subjected to flow cytometry.

Transwell invasion assay: The transwell was placed in 24-well plate. Then, 50 μl of above solution was added to the upper chamber. The ¹⁸⁸Re-MAG3-depreotide treated cells were washed in PBS at 4°C twice to remove ¹⁸⁸Re-MAG3-depreotide. Then, these ¹⁸⁸Re-MAG3-depreotide (37 MBq/L) treated A549 cells and SPC-A1 cells and cells in the control group were re-suspended in serum free DMEM for preparation of single cell suspension. The cell density was 1×10⁶/ml. The upper chamber was obtained and non-invasive cells were removed with a swab. The invasive cells

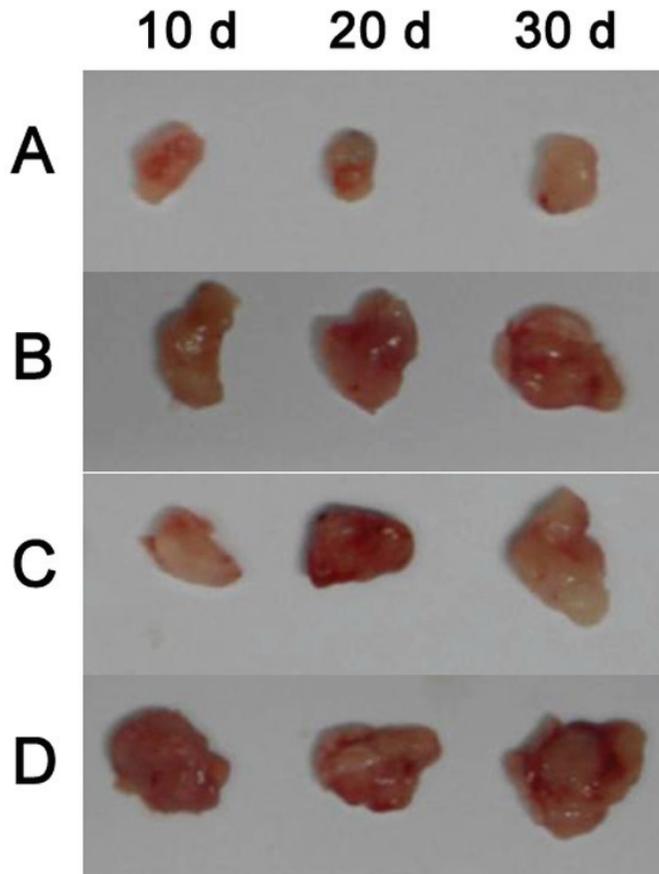


Figure 3. Cancer growth in nude mice after different treatments. A: ^{188}Re -MAG3-depreotide group; B: depreotide group; C: ^{188}Re group; D: Normal saline group.

were then fixed in formaldehyde for 30 min followed by HE staining. Observation was done under a light microscope at a magnification of 200. Five fields were randomly selected and the invasive cells were counted followed by averaging.

In vivo anti-tumor effect of ^{188}Re -MAG3-depreotide on NSCLC in nude mice

Inhibitory effect of ^{188}Re -MAG3-depreotide on cancer growth in nude mice: The NSCLC bearing mice were prepared. When the cancer tumor was about 0.5 cm^3 , 20 nude mice were randomly assigned into 4 groups ($n=5$ per group): $7.4\text{ MBq }^{188}\text{Re}$ -MAG3-depreotide group, $10\text{ }\mu\text{g}$ of depreotide group, $7.4\text{ MBq }^{188}\text{Re}$ group and normal saline group. Depreotide, ^{188}Re and ^{188}Re -MAG3-depreotide were injected via tail vein. The tumor size was measured before and once every 10 days after treatment. The tumor volume was

calculated as follow: $V = \pi/6 (d1 \times d2 \times d3)$, where $d1$, $d2$ and $d3$ represent the length, width and height, respectively. During the study, the growth and body weight of nude mice were closely monitored. When the body weight was reduced by 10%, the cancer developed evident necrosis (tumor volume was no larger than 0.5 cm^3), or the tumor volume was larger than 20 cm^3 , mice were sacrificed.

H&E staining: The cancers were obtained and fixed in 10% formaldehyde followed by preparation of $0.3\text{-}\mu\text{m}$ paraffin-embedded sections and subsequent HE staining.

TUNEL staining: The above paraffin-embedded sections were processed for TUNEL staining, and the apoptotic cells were observed.

Immunohistochemistry for CD34: Sections were incubated with streptavidin – peroxidase at room temperature for 10 min and visualization was done with DAB. Counterstaining was performed with hematoxylin followed by mounting with neutral gum. The isolated or cluster-like structure which was formed by endothelial cells and cord-like or space-like and had lumen. This structure with less than 8 red blood cells in the lumen was regarded as a blood vessel, and the separated endothelial cells were determined as a blood vessel. The structure with more than 8 red blood cells or smooth muscle in wall was not counted.

Detection of toxicity and pyrogenicity of ^{188}Re -MAG3-depreotide: The labeled solution was filtered via a sterilized $0.22\text{-}\mu\text{m}$ filter (Millex-GP, Millipore, USA) and the aerobic bacteria, anaerobic bacteria and mildews were detected. The pyrogenicity measurement was done with limulus test according to the instructions in Pharmacopoeia of People's Republic of China.

Statistical analysis

Data were expressed as mean \pm standard deviation. Statistical analysis was done with SPSS

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version 13.0. One way analysis of variance was employed for comparisons of means among groups. A value of $P < 0.05$ was considered statistically significant.

Results

In vitro anti-tumor effect of ^{188}Re -MAG3-depreotide on NSCLC cells

Labeling rate and radiochemical purity of ^{188}Re -MAG3-depreotide: In the developing agent I, the colloid and marker were in the original point in the normal saline group, but the free ^{188}Re was ahead of the developing agent I. In 85% acidified ethanol ($\text{pH}=3.5$), the colloid was in the original point but the free ^{188}Re and marker were ahead of the developing agent. Paper chromatography showed the labeling rate of ^{188}Re MAG3-depreotide was higher than 80%, the specific activity was 200 GBq/mmol and radiochemical purity was as high as 90%. These suggest that the ^{188}Re MAG3-depreotide meets the requirement for experiment.

Detection of cell proliferation by MTT assay after ^{188}Re -MAG3-depreotide treatment: The inhibition rate of cell growth within 2-6 days is shown in **Table 1**. Results showed the inhibition rate increased over time and reached a maximal level on day 6 (50-60%). In addition, the influence of ^{188}Re -MAG3-depreotide on the proliferation was similar between A549 cells and SPC-A1 cells ($P > 0.05$). This finding suggests that ^{188}Re -MAG3-depreotide can significantly inhibit the in vitro proliferation of NSCLC cells.

Detection of apoptosis by flow cytometry: After treatment with ^{188}Re -MAG3-depreotide for 48 h, A549 cells and SPC-A1 cells (5×10^5 - 10^6 cells) were collected and double staining was done with Annexin V/PI according to the manufacturer's instructions. The apoptotic cells were measured by flow cytometry (**Figure 1**). Results showed the normal cells could be differentiated from the necrotic cells and apoptotic cells which were represented by different quadrants: Q1: AnnexinV-FITC⁻ and PI⁺ cells (mechanically injured cells); Q2: AnnexinV-FITC⁺ and PI⁻ cells (early apoptotic cells); Q3: AnnexinV-FITC⁻ and PI⁻ cells (viable cells); Q4: AnnexinV-FITC⁺ and PI⁺ cells (late apoptotic cells or necrotic cells). Results showed treatment with ^{188}Re -MAG3-

depreotide for 48 h could significantly increase the apoptosis of A549 cells and SPC-A1 cells (apoptosis rate: 23.1% and 22.6%, respectively).

Detection of invasiveness by transwell assay: After treatment with ^{188}Re -MAG3-depreotide, the invasiveness of A549 cells and SPC-A1 cells was measured. Results showed the ^{188}Re -MAG3-depreotide markedly reduced the invasiveness of both cell lines and the number of invasive cells was reduced by 3 times when compared with the control group ($P < 0.05$) (**Figure 2**).

In vivo anti-tumor effect of ^{188}Re -MAG3-depreotide in mice with NSCLC

Inhibitory effect on cancer growth: In the normal saline group, the growth of cancer was unlimited. After treatment with ^{188}Re or depreotide, continuous growth of cancer was still observed. No marked difference was observed in the cancer growth among normal saline group, ^{188}Re group and depreotide group ($P > 0.05$). However, ^{188}Re -MAG3-depreotide significantly inhibit the cancer growth in nude mice when compared with above three groups ($P < 0.05$). Thirty days after treatment, the tumor volume was $0.828 \pm 0.058 \text{ cm}^3$ in ^{188}Re -MAG3-depreotide group, $1.831 \pm 0.178 \text{ cm}^3$ in depreotide group, $1.432 \pm 0.281 \text{ cm}^3$ in ^{188}Re group and $1.921 \pm 0.260 \text{ cm}^3$ in normal saline group (**Figure 3**).

Histological examination by H&E staining: H&E staining showed the necrotic area in the ^{188}Re -MAG3-depreotide group was the largest and massive patchy necrosis was observed. In the ^{188}Re , only spotty necrosis was found. However, after treatment with depreotide or normal saline, no evident necrosis was found (**Figure 4**). The apoptotic cells were round and had darkly stained nucleus and condensed cytoplasm, the chromosomes were mass-like and "sprouting" phenomenon was noted on the cells.

TUNEL staining: TUNEL staining was performed to investigate the apoptotic cells. Results showed a large number of apoptotic cells were found in the ^{188}Re -MAG3-depreotide group. After treatment with ^{188}Re , only a few apoptotic were presented. In the depreotide group and normal saline group, no obvious apoptotic cells were observed (**Figure 5**).

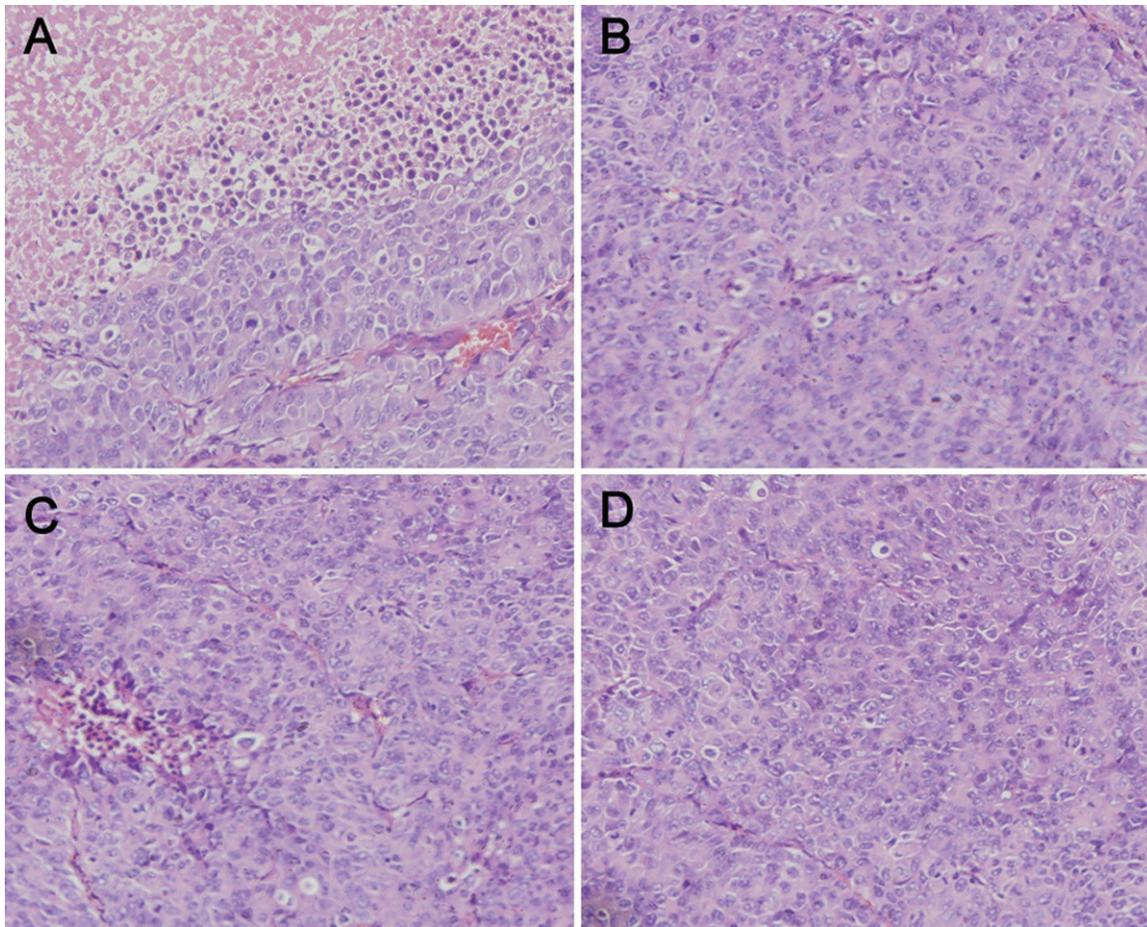


Figure 4. HE staining of cancers of nude mice in different groups (200 \times). A: ^{188}Re -MAG3-depreotide group; B: depreotide group; C: ^{188}Re group; D: Normal saline group.

Immunohistochemistry for CD34: CD34 is a transmembrane glycoprotein on cells and can mediate the adherence and promote the aggregation of endothelial progenitor cells to induce angiogenesis. The expression of CD34 can be used to evaluate the extent of angiogenesis which reflects the biological behaviors of cancers and is helpful for determination of risk for recurrence and prognosis. As shown in **Figure 6**, the CD34 positive cells were the vascular endothelial cells which were yellow-brown or brown. In the ^{188}Re group, depreotide group and normal saline group, the number of newly generated blood vessels increased markedly and the invasiveness of cancer cells was obvious. After treatment with ^{188}Re -MAG3-depreotide, the newly generated blood vessels significantly reduced when compared with the other three groups, suggesting that ^{188}Re -MAG3-depreotide effectively inhibits the invasion and metastasis of cancer cells.

Discussion

^{188}Re and $^{99\text{m}}\text{Tc}$ are two elements in group VII and have similar chemical and physical features. Thus, they have possibility to be used to label drugs and present with wide application. The ^{188}Re labeled specific molecules can be used for internal radiation therapy of cancers, which may elevate the targeting of anti-tumor therapy. ^{188}Re is an ideal radionuclide for therapeutic purposes. Its half-life is 16.7 h and the maximal energy of beta ray emitted by ^{188}Re is 2.12MeV. The beta ray emitted by ^{188}Re has moderate energy and has short distance of internal radiation (maximum: 11 mm), and 95% beta ray is absorbed within 4 mm. Thus, the beta ray emitted by ^{188}Re causes little injury to surrounding tissues and applicable in internal radiation therapy. In addition, ^{188}Re can emit γ ray with energy of 0.155 MeV for imaging which can be used in studies on the biological

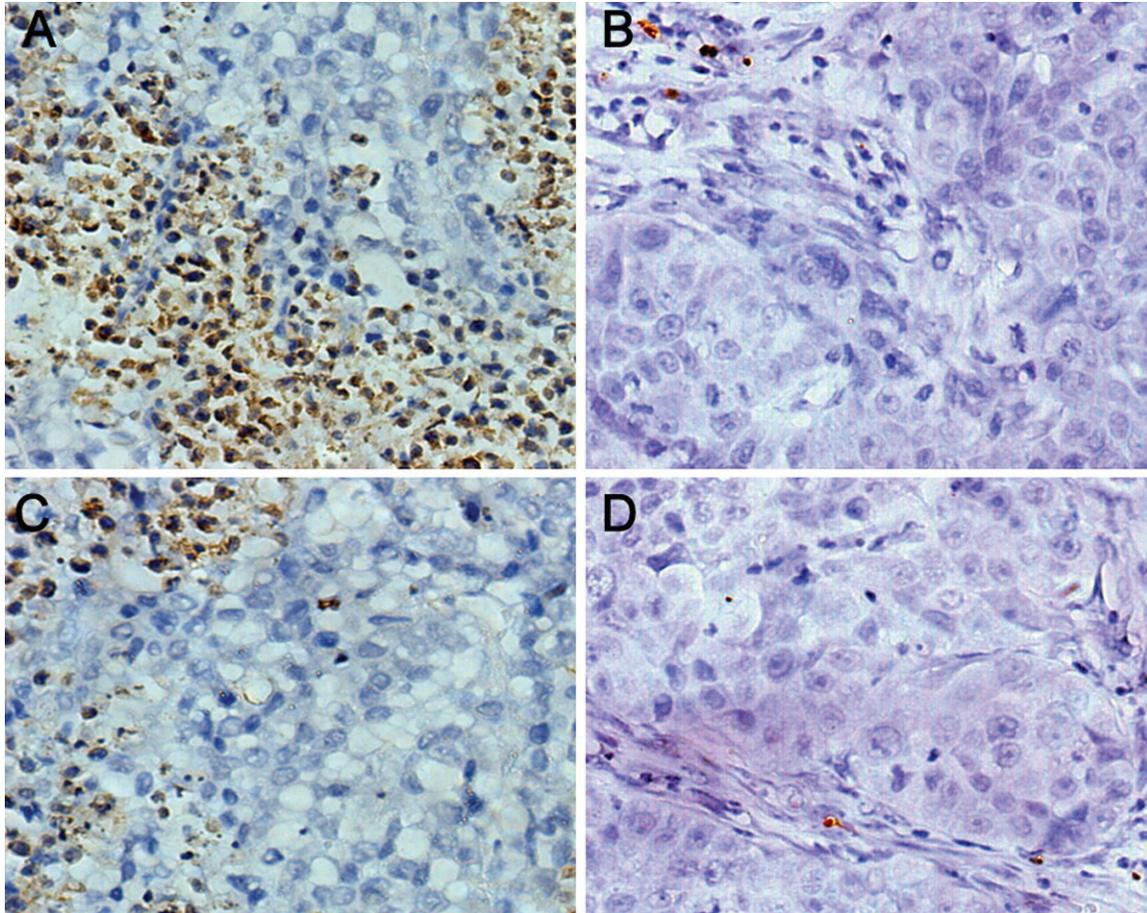


Figure 5. TUNEL staining of cancers of nude mice in different groups (200 \times). A: ^{188}Re -MAG3-depreotide group; B: depreotide group; C: ^{188}Re group; D: Normal saline group.

distribution, radiation dose and pharmacokinetics of radionuclide. The beta ray emitted by ^{188}Re has potent ionizing radiation, high surface dose and evident gradient dose. Thus, beta ray emitted by ^{188}Re can directly cause damage to biomacromolecules and induce apoptosis. The damage to cancer cells may compromise the proliferation, disturb the metabolism and induce aging or death in cancer cells. In addition, the beta ray induced ionizing radiation may produce some reactive oxygen species which indirectly promote the apoptosis exerting therapeutic efficacy. On the basis of above physical and biological characteristics of ^{188}Re , ^{188}Re and ^{188}Re labeled molecules have been widely applied in the internal radiation therapy of cancers [10].

It has been found that ^{188}Re can induce the apoptosis of breast cancer ER-75-30 cells and prostate PC-3 cells which are demonstrated by morphology and biochemical examination [11].

Bian et al [12] investigate the effect of internal radiation therapy with ^{188}Re on the cell cycle and apoptosis of liver cancer cells. Results revealed that the dead cells after ^{188}Re treatment presented with typical features of apoptosis. In animal studies, intratumor or intrapleural injection of 7.4MBq ^{188}Re labeled SSTA (RC-160) was performed to treat cancers achieving favorable outcome [13]. In another study, 11~33 MBq ^{188}Re labeled SSTA (^{188}Re -P2045) was injected via vein and the cancer growth was found to be markedly inhibited [14]. These findings demonstrate that ^{188}Re has the ability to induce the apoptosis of cancer cells and directly kill the cancer cells, which provides evidence for the clinical application of ^{188}Re .

There are two key points in the SSTA receptor mediated radionuclide therapy: 1) synthesis of SSTA coupled to bifunctional chelating agent; 2) labeling with radionuclide. Solid phase syn-

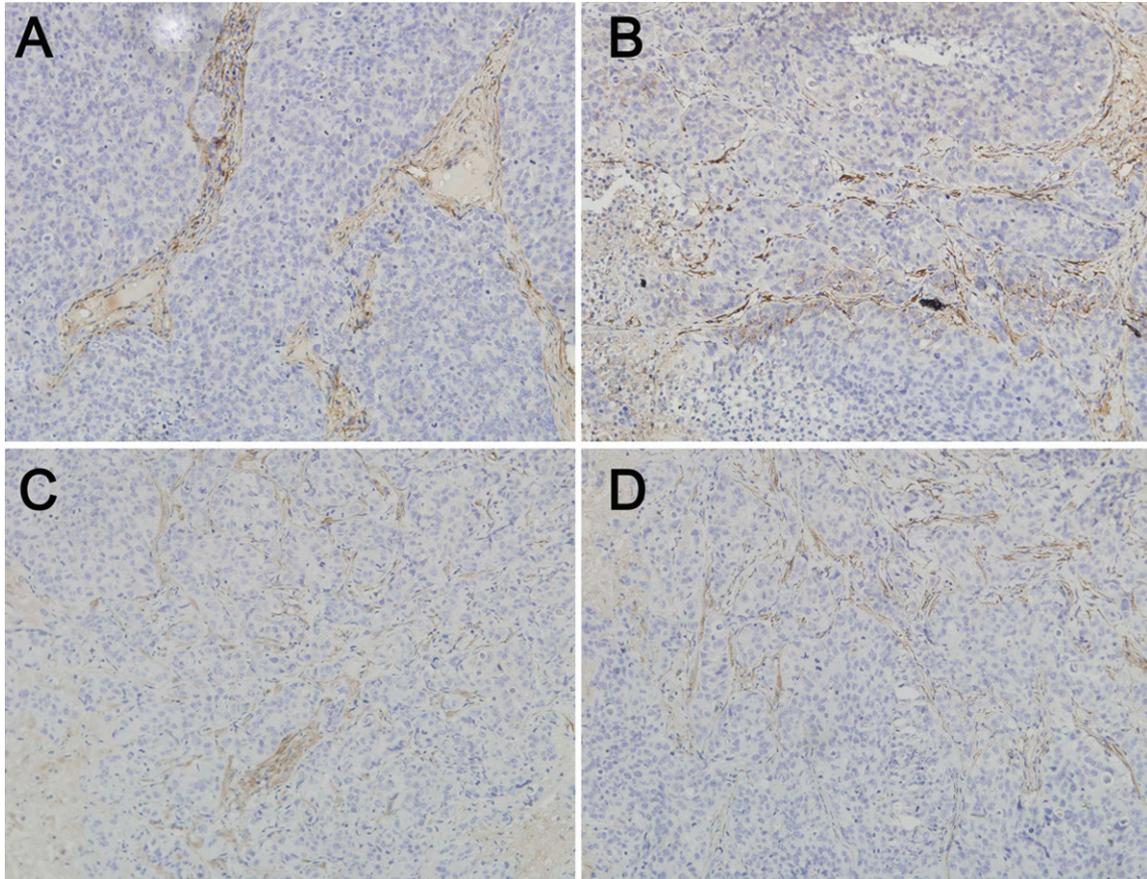


Figure 6. Immunohistochemistry for CD34 in cancers of nude mice in different groups (200 \times). A: ^{188}Re -MAG3-depreotide group; B: depreotide group; C: ^{188}Re group; D: Normal saline group.

thesis method and liquid phase segment connecting method were used to acquire depreotide with high purity, which is a basis for the synthesis of peptide. In respect of labeling with radionuclide, there are direct and indirect methods. In previous studies, VIIb element $^{99\text{mTc}}$ was used in the direct and indirect labeling. Results showed the labeling with direct method was relatively violent and may cause damage to polypeptide. Moreover, the bonding is not potent and susceptible to shedding, and the labeling rate is at a low level. With the indirect method, bifunctional chelating agent is used to couple the radionuclide to the target, which may be performed in general condition and not alter the characteristic of the target. In addition, the bonding is stable and the damage to the target is avoided. Studies have compared three bifunctional chelating agents (HYNIC, NHS-MAG3 and SHNH) for labeling with $^{99\text{mTc}}$. Results showed the NHS-MAG3 labeled target was more stable in the serum and plasma at room temperature. In vitro study was conduct-

ed to investigate the clearance of $^{99\text{mTc}}$ -depreotide in A549 cells as target cells. Results revealed that $^{99\text{mTc}}$ -depreotide was rapidly removed in A549 cells and had specific internalization. Both ^{188}Re and $^{99\text{mTc}}$ are elements in the group VIIb, and have similar chemical and physical characteristics.

Thus, ^{188}Re -MAG3-depreotide was used to treat the NSCLC cells and NSCLC in nude mice. Results showed ^{188}Re -MAG3-depreotide could inhibit the proliferation and invasion of A549 cells and SPC-A1 cells, two NSCLC cell lines. After injection of 7.4 MBq ^{188}Re -MAG3-depreotide via the tail vein, the cancer growth was markedly inhibited, and immunohistochemistry showed a large number of apoptotic cells. These findings demonstrate that ^{188}Re -MAG3-depreotide can induce the apoptosis of NSCLC cells and directly kill the cancer cells, which provide evidence for the radiotherapy of NSCLC.

Conclusion

The labeling rate and radiochemical purity of ¹⁸⁸Re-MAG3-depreotide was 80% and 90%, respectively, which meets the requirement for experiment. Our results reveal that ¹⁸⁸Re-MAG3-depreotide can significantly inhibit the in vitro proliferation of A549 cells and SPC-A1 cells (50-60% on day 6). The inhibition rate of A549 cells and SPC-A1 cells is comparable. Flow cytometry indicate that ¹⁸⁸Re-MAG3-depreotide treatment for 48 h markedly increases the apoptosis of A549 cells and SPC-A1 cells (apoptosis rate: 23.1% and 22.6%, respectively). Transwell invasion assay show the ¹⁸⁸Re-MAG3-depreotide can dramatically inhibit the invasiveness of both cell lines. In NSCLC bearing nude mice, results demonstrate that 7.4 MBq ¹⁸⁸Re-MAG3-depreotide can effectively inhibit the cancer growth. HE staining and TUNEL staining indicate massive apoptosis of cancer cells after ¹⁸⁸Re-MAG3-depreotide treatment, and immunohistochemistry for CD34 show the suppression of angiogenesis following ¹⁸⁸Re-MAG3-depreotide treatment. The inhibitory effects on the proliferation and invasion of NSCLC and promotive effect on the apoptosis demonstrate the in vitro and in vivo anti-tumor effects of ¹⁸⁸Re-MAG3-depreotide.

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