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Visualization of biodistribution of Zn complex with antidiabetic activity using semiconductor Compton camera GREI



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ABSTRACT

Various types of zinc (Zn) complexes have been developed as promising antidiabetic agents in recent vears. However, the pharmacological action of Zn complex is not elucidated because the biodistribution of the complex in a living organism has not been studied. Nuclear medicine imaging is superior technology for the noninvasive analysis of the temporal distribution of drug candidates in living organisms. Gamma-ray emission imaging (GREI), which was developed by our laboratory as a novel molecular imaging modality, was adopted to visualize various γ -ray-emitting radionuclides that are not detected by conventional imaging techniques such as positron emission tomography and single-photon emission computed tomography. Therefore, we applied GREI to a biodistribution assay of Zn complexes. In the present study, ⁶⁵Zn was produced in the ^{nat}Cu(p,n) reaction in an azimuthal varying field cyclotron for the GREI experiment. The distribution was then noninvasively visualized using GREI after the intravenous administration of a ⁶⁵Zn-labeled di(1-oxy-2-pyridinethiolato)zinc [Zn(opt)₂], ZnCl₂, and di(Lhistidinato)zinc. The GREI images were validated using conventional invasive assays. This novel study showed that GREI is a powerful tool for the biodistribution analysis of antidiabetic Zn complexes in a living organism. In addition, accumulation of ⁶⁵Zn in the cardiac blood pool was observed for [Zn(opt)₂], which exhibits potent antidiabetic activity. These results suggest that the slow elimination of Zn from the blood is correlated to the antidiabetic activity of $[Zn(opt)_2]$.

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1. Introduction

Medicinal inorganic chemistry is a discipline in which metal complexes are used in therapeutic and diagnostic medicine [1–3].

The zinc (Zn) complexes are promising metallodrugs for the treatment of type 2 diabetes mellitus [4–5]. In recent years, several Zn complexes have been discovered that have potent antidiabetic activity in experimental diabetic animals [5–7]. For example, a novel Zn complex showed potent hypoglycemic activity at a dose lower than the clinical dose of zinc acetate used to treat Wilson's disease [7]. It is presumed that the Zn atom is the component of the complex responsible for its hypoglycemic activity since ligands such as low-molecular-weight organic compounds are generally inactive. The complexation of Zn with a ligand improves its gastrointestinal absorption, enabling its efficient delivery to target tissues [7–9]. The coordination mode of the Zn complex also influences its pattern of tissue distribution [9,10]. However, the pharmacological action of Zn complexes is not fully elucidated because their biodistribution in vivo has not been extensively studied. Therefore, the development of noninvasive methods for

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Abbreviations: DM, Diabetes mellitus; GREI, Gamma-ray emission imaging; PET, Positron emission tomography; SPECT, Single-photon emission computed tomography; [Zn(opt)2], Di(1-oxy-2-pyridinethiolato)zinc; [Zn(His)2], Di(L-histidinato) zinc; DMSO, Dimethyl sulfoxide

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analyzing the distribution of Zn complexes *in vivo* will accelerate the discovery of safe and efficacious Zn complexes for treatment of type 2 diabetes.

The nuclear medicine imaging technique is useful in early drug development for analyzing the biokinetics of drug candidates in experimental animals and humans (*i.e.*, clinical microdose studies) [11,12]. Positron emission tomography (PET) and single-photon emission computed tomography (SPECT) are widely used to non-invasively visualize the movements of radionuclide-labeled molecules [13,14]. However, PET is limited to determine 511 keV γ -rays that originate from positron-emitting radionuclide while PET is more sensitive and accurate than other molecular imaging techniques. In SPECT imaging, γ -rays with low energy (< 300 keV) emitted from the radionuclide are detected. Therefore, these conventional apparatuses are not suitable for the measurement and visualization of the *in vivo* behavior of the Zn complex because ⁶⁵Zn chosen as a radionuclide for the labeling emits γ -ray with high energy of 1116 keV.

On the other hand, the gamma-ray emission imaging (GREI) apparatus developed in our laboratory enables the spectroscopic imaging of wide energy-range γ -rays (200–2000 keV) by using a semiconductor Compton camera system [15]. The *in vivo* imaging of different γ -ray–emitting radionuclides, such as ⁶⁵ZnCl₂, ⁸⁵SrCl₂, iodinated (¹³¹I) methylnorcholesterol and others, was achieved using GREI [15–17]. Successful demonstrations of the multiple molecular imaging inspired us to apply GREI to the biodistribution analysis of the Zn complex in a living organism. This study was the first to noninvasively investigate the kinetic behaviors of the di(1-oxy-2-pyridinethiolato)zinc complex ([Zn(opt)₂]), which has potent antidiabetic activity, using GREI after an intravenous administration of ⁶⁵Zn-labeled [Zn(opt)₂]. The distribution was compared to those of ZnCl₂ and the di(1-histidinato)zinc complex ([Zn(His)₂]), which does not exhibit antidiabetic activity.

2. Experimental

2.1. Animals

Ten-week-old male C57BL/6J mice were purchased from CLEA Japan, Inc. All animals were housed under a 12-h light/dark cycle in a temperature-controlled animal room and were allowed free access to food and tap water. All animal experiments were approved by the Ethics Committee on Animal Care and Use of RIKEN and were performed in accordance with the Guide for the Care and Use of Laboratory Animals.

2.2. Probe preparation

The ⁶⁵Zn nuclide was produced in the ^{nat}Cu(p,n) reaction (nat: natural isotopic abundance) in a RIKEN azimuthal varying field

cyclotron. A metallic copper foil (chemical purity: 99.99%) 220 mg/cm² thick was irradiated by a 14-MeV proton beam with an intensity of 15 μ A. After the irradiation, ⁶⁵Zn was chemically separated from the Cu target by an anion-exchange method. Radionuclide purity > 99% was determined by the γ -ray spectrometry using a calibrated Ge detector. The specific radioactivity > 0.2 GBq/g was estimated by inductively coupled plasma mass spectrometry for a control sample that was treated with the same chemical process as the irradiated Cu target.

 $[Zn(opt)_2]$ and $[Zn(His)_2]$ were prepared as previously described [8,18], and the complexes were determined by elemental analyses and infrared spectra. Their predicted coordination structures are shown in Fig. 1 [19,20].

Purified ⁶⁵Zn dissolved in 30 μ L of saline (Otsuka Pharmaceutical Co. Ltd.) and [Zn(opt)₂] dissolved in 70 μ L of dimethyl sulfoxide (DMSO; Wako Pure Chemical Industries Ltd.) or [Zn(His)₂] dissolved in 70 μ L of saline were stirred at room temperature over night to exchange cold Zn and ⁶⁵Zn [7,9,10]. The ⁶⁵ZnCl₂ solution, a mixture of ⁶⁵Zn dissolved in 30 μ L of saline and ZnCl₂ dissolved in 70 μ L of DMSO, was prepared immediately prior to administration. The solutions were prepared to contain 10 mg Zn/mL as well as 10 MBq/mL or 2.5 MBq/mL for the GREI experiment or biodistribution analysis, respectively.

2.3. GREI experiment

Eleven-week-old male C57BL/6J mice were intravenously administered a single dose of 65 Zn-labeled [Zn(opt)₂] ([65 Zn(opt)₂]), 65 Zn-labeled ZnCl₂ (65 ZnCl₂), or 65 Zn-labeled [Zn(His)₂] ([65 Zn(His)₂]) via the tail vein at 1.0 mg Zn/kg of body weight. Each mouse was fixed on a board and placed just under the imaging head. Fifteen minutes after the injection, the GREI experiments were carried out under isoflurane anesthesia for 8 h. The acquired data were recorded in list mode with real-, and live-time information. The distribution images were reconstructed from the acquired data by the adoption of the image-reconstruction methods as previously described [15].

2.4. Biodistribution analysis

Eleven-week-old male C57BL/6J mice were divided into [⁶⁵Zn(opt)₂]-, ⁶⁵ZnCl₂-, and [⁶⁵Zn(His)₂]-treated groups, and the ⁶⁵Zn-labeled compounds were intravenously administered at a dose of 1.0 mg Zn/kg of body weight. Four hours after the single intravenous administration, the mice were sacrificed under isoflurane anesthesia. Blood was collected, and the organs of interest (heart, pancreas, liver, kidney, stomach) were removed. Their radio-activities due to ⁶⁵Zn were measured using a calibrated Ge detector.



Fig. 1. Proposed coordination structures of the di(1-oxy-2-pyridinethiolato)Zn and di(L-histidinato)Zn complexes. Charges are omitted for simplicity.



Fig. 2. Distribution images of ⁶⁵Zn in C57BL/6J mice after the administration of the ⁶⁵Zn-labeled Zn compounds ([⁶⁵Zn(opt)₂] (O), ⁶⁵ZnCl₂ (C), or [⁶⁵Zn(His)₂] (H)) reconstructed every 2 h. The arrows indicate the characteristic accumulation of ⁶⁵Zn.

3. Results

3.1. Visualization of 65 Zn-labeled Zn complexes in the whole body by GREI

The distribution images of 65 Zn were reconstructed every 2 h after the administration of $[{}^{65}$ Zn(opt)₂], 65 ZnCl₂, or $[{}^{65}$ Zn(His)₂] (Fig. 2). The arrows indicate the characteristic accumulation of 65 Zn. High accumulation of all compounds was observed in the liver. Moreover, a different distribution of 65 Zn among the studied Zn compounds was obtained in the distribution images: in the heart, high accumulation of $[{}^{65}$ Zn(opt)₂] was noted, whereas little accumulation was observed for 65 ZnCl₂ and $[{}^{65}$ Zn(His)₂].

The regions of interest were drawn around the heart and liver and the numerical values of the distributions was calculated by integrating the pixel values inside them to compare the values in the heart and liver of each mouse (Fig. 3). Image intensity gradients in such organs for each compound were maintained for 8 h and indicated that 65 Zn accumulation for [65 Zn(opt)₂] was much higher in the heart and lower in the liver than those for other studied compounds.

3.2. Biodistribution of ⁶⁵Zn

The radioactivities due to 65 Zn in the resected organs and blood were determined 4 h after the administration of $[^{65}$ Zn(opt)₂], 65 ZnCl₂, or $[^{65}$ Zn(His)₂] (Fig. 4). As shown in Fig. 4a, the uptake of 65 Zn in the liver was the highest, whereas the uptake rate (expressed as percent injected dose [%ID]) in the liver was at least twice as high as those in other organs for all compounds. The uptake rate of 65 Zn in the liver, pancreas, and kidney of $[^{65}$ Zn(opt)₂]-treated mice were reduced compared with the uptake



Fig. 3. Image intensities of the ⁶⁵Zn(opt)₂], ⁶⁵Zn(l₂), and [⁶⁵Zn(l₂), and [⁶⁵Zn(His)₂].



Fig. 4. The uptake rate of ${}^{65}Zn$ in each tissue (a) and in the blood (b) at 4 h after an intravenous administration of di(1-oxy-2-pyridinethiolato)Zn ([${}^{65}Zn(opt)_2$]), ${}^{65}ZnCl_2$, or di (1-histidinato)Zn ([${}^{65}Zn(His)_2$]). Data are expressed as mean values \pm SD for four mice. For the statistical evaluation, one-way analysis of variance with Bonferroni's test was used. ${}^*P < 0.05$, ${}^{**}P < 0.01$, ${}^{***}P < 0.001$ versus [${}^{65}Zn(opt)_2$]. %ID, percent injected dose.

rate in each organ of 65 ZnCl₂- and [65 Zn(His)₂]-treated mice. On the other hand, the uptake rate in the heart tissue of [65 Zn(opt)₂]-treated mice was significantly higher than those of 65 ZnCl₂- and [65 Zn(His)₂]-treated mice. In addition, the concentration of 65 Zn (expressed as %ID/g tissue) in blood samples as [65 Zn(opt)₂] was much higher than that as 65 ZnCl₂ or [65 Zn(His)₂] (Fig. 4b).

4. Discussion

Biodistribution analyses of drug candidates enable the evaluation and prediction of their biological effects. For the assessment of the Zn complexes, tissue distribution patterns of exogenous Zn have been invasively analyzed by the determination of ⁶⁵Zn radioactivity in each tissue removed from the experimental animals after the administration of the ⁶⁵Zn-labaled Zn complex [7,9,10]. In general, the conventional method requires much time, high cost, and significant labor to assess drug candidate distribution. On the other hand, the molecular imaging technique enables a noninvasive and temporary study in the same living animals, decreases its statistical variance, and reduces the number of subjects. Therefore, we developed a noninvasive method for analyzing the distribution of ⁶⁵Zn-labeled Zn complexes in live mice using GREI. The conventional invasive assays were also performed to validate the GREI images.

In GREI experiments, we were the first to successfully visualize the difference in distribution among the ⁶⁵Zn-labeled compounds after their intravenous injection (Fig. 2). The distribution images of ⁶⁵Zn for all compounds in the liver and heart were in agreement with the results of the invasive assay (Figs. 3 and 4). The accumulation of ⁶⁵Zn increased in the liver of ⁶⁵ZnCl₂- and [⁶⁵Zn(His)₂]-treated mice, while the image intensities in the [⁶⁵Zn(opt)₂]-treated mouse was low. This tendency was also observed in the uptake rate of ⁶⁵Zn in the liver by the invasive assay. In addition, the accumulation of ⁶⁵Zn in the heart of [⁶⁵Zn(opt)₂]-treated mouse observed in the GREI image corresponds to the results that both ⁶⁵Zn blood concentration and ⁶⁵Zn uptake into the heart tissue in [⁶⁵Zn(opt)₂]-treated mice were higher than those in ⁶⁵ZnCl₂-, [⁶⁵Zn(His)₂]-treated mice. It is well known that the values of the thoracic pool (blood volume in the heart and lungs) amount to about 30% of the total circulatory blood volume [21]. The accumulation in the heart would be mainly derived from the enormously high concentration of 65 Zn in the blood of [65 Zn(opt)₂]-treated mice because the uptake rates of 65 Zn in the heart tissue were low. These results suggest that the distribution images of 65 Zn reflected the biodistributions determined by the invasive method.

Interestingly, the characteristic accumulation of 65 Zn was observed in the heart of [65 Zn(opt)₂]-treated mouse. The invasive assay exhibited that the accumulation was mainly derived from the radioactivity of 65 Zn in the cardiac blood pool. It was reported that a relatively long retention time of 65 Zn in the blood leads to a sustained release of Zn, which may be an important factor in the exertion of its antidiabetic activity [7,10]. The presented results suggested that the slow elimination of Zn from blood is related to the high antidiabetic activity of [Zn(opt)₂].

In conclusion, here we successfully demonstrated that GREI enables the noninvasive analysis of 65 Zn distribution for $[^{65}$ Zn(opt)₂], 65 ZnCl₂, and $[^{65}$ Zn(His)₂] in intact live mice as well as the visualization of the differences in 65 Zn distribution among these compounds. The accumulation of 65 Zn in the cardiac blood pool was observed for [Zn(opt)₂] as an antidiabetic drug candidate and suggested that the slow elimination of Zn from the blood may be an important factor related to its antidiabetic activity. We are currently investigating the correlation between the distribution pattern of the Zn complex and its antidiabetic activity, in addition to developing the GREI system to realize faster and more quantitative imaging analyses.

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Appendix A. Supplementary material

Supplementary data associated with this article can be found in the online version at http://dx.doi.org/10.1016/j.bbrep.2015.12.004.

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