

Radiochemistry: Radiolabeling and medical applications

Inês F. Antunes, PhD

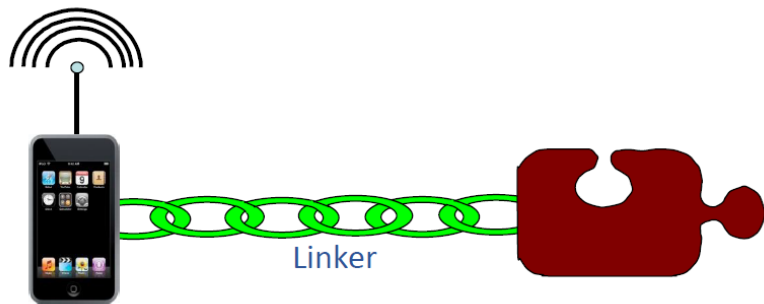
27/11/2025

UMCG:

Medical applications

Nuclear Medicine

Diagnostic



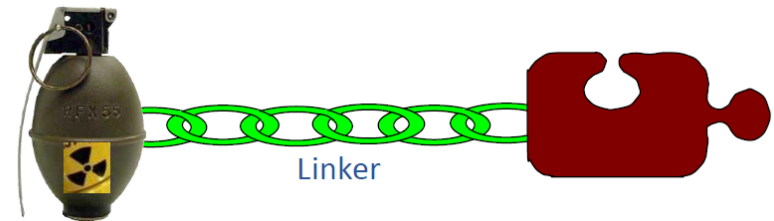
Radionuclide

Emits **radiation** upon decay, detectable by **PET** or **SPECT**.

Vector molecule

Responsible for a specific interaction with the target (enzyme, receptor, transporter,...)

Therapeutic



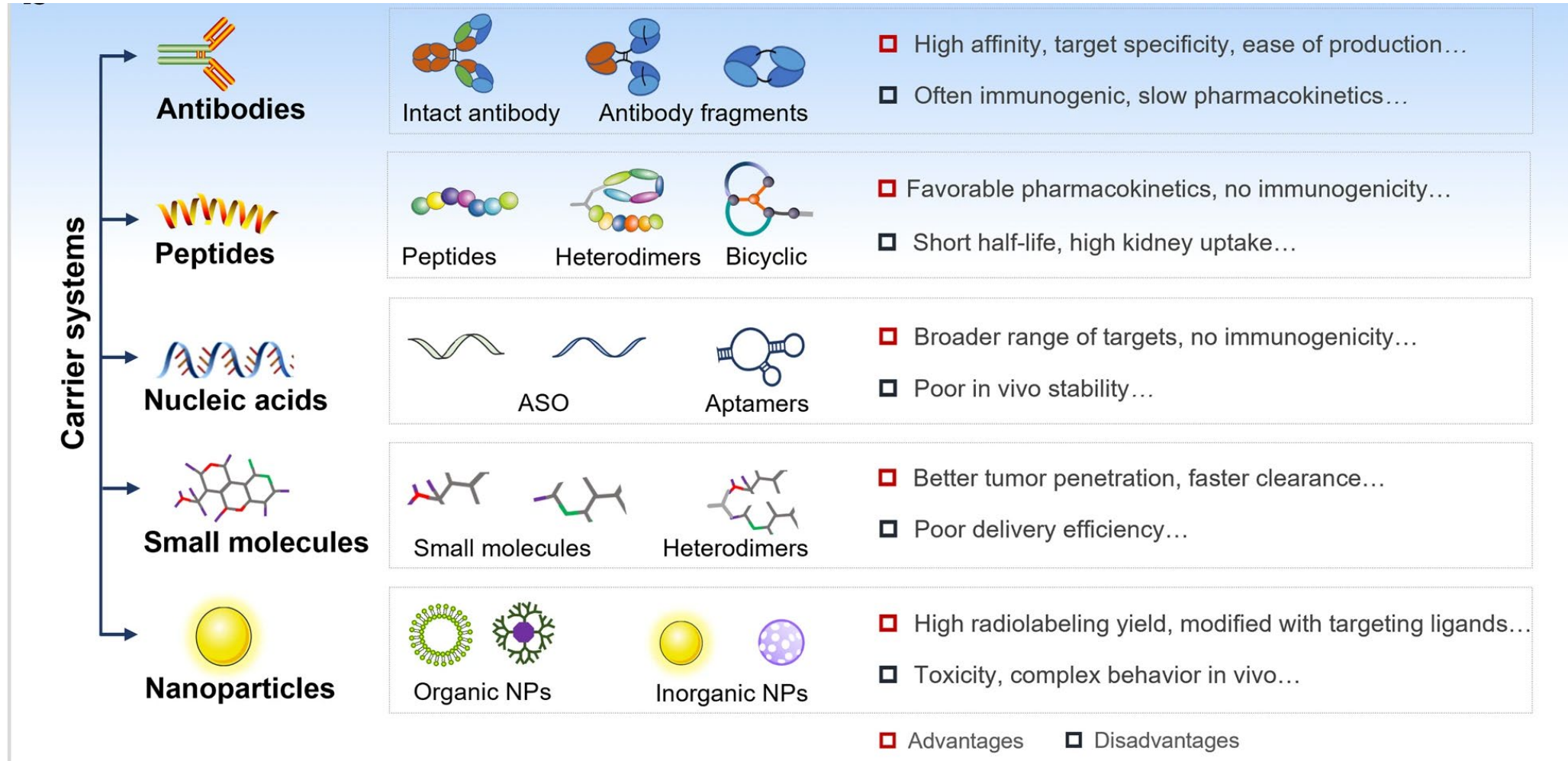
Radionuclide

Emits **particle radiation** upon decay, destroying target cells.

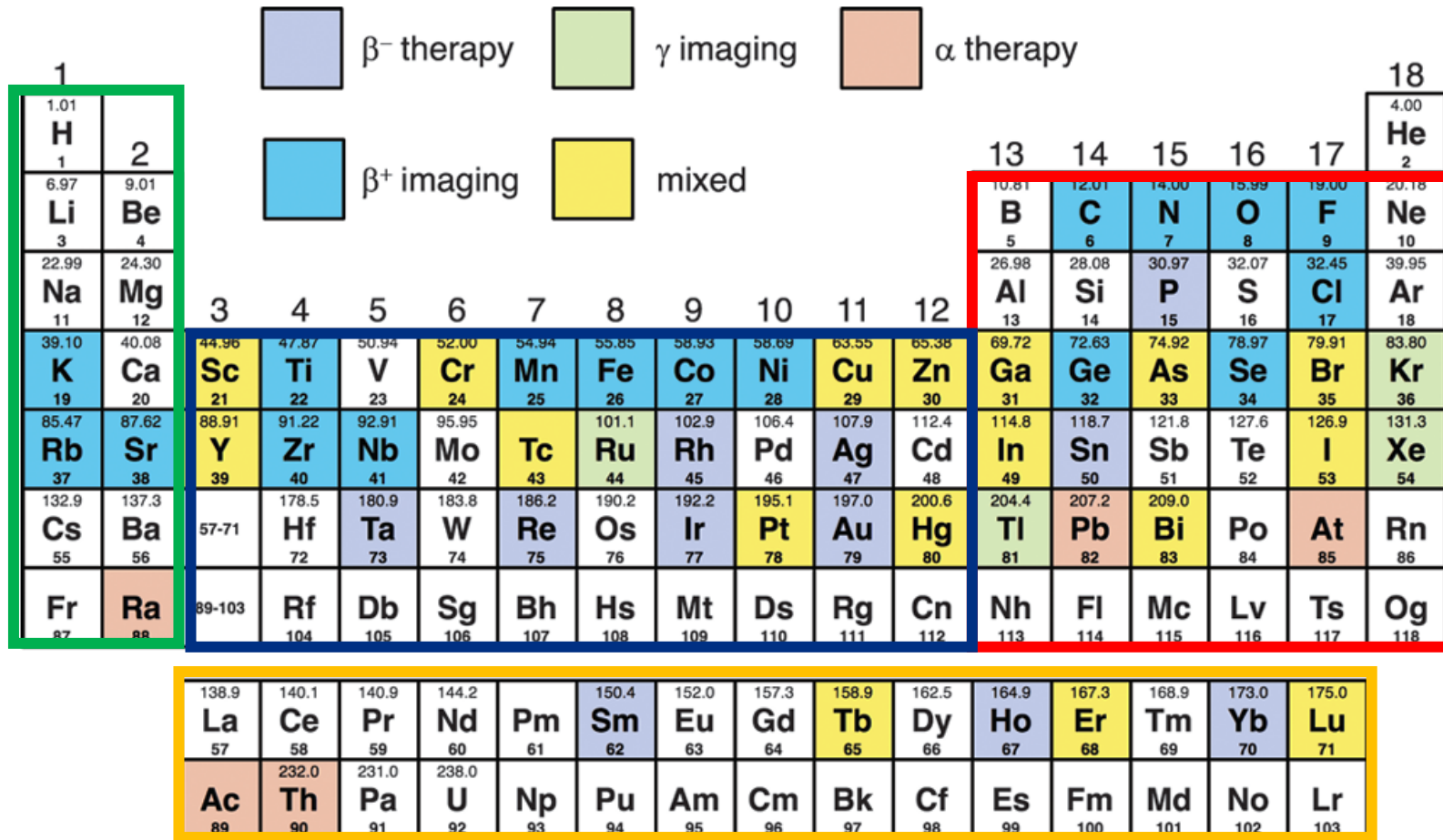
Vector molecule

Responsible for a specific interaction with the target (enzyme, receptor, transporter,...)

Vectors



Radionuclide



s-block- Ionic reaction ($[^{223}\text{Ra}]\text{Cl}_2$)

d-f-block-Complexation ($[^{177}\text{Lu}]\text{PSMA}$)

p-block- Complexation,
Nucleophilic/ electrophilic substitution
($[^{68}\text{Ga}]\text{FAPI}$ and $[^{18}\text{F}]\text{FDG}$, respectively)

Radiolabeling

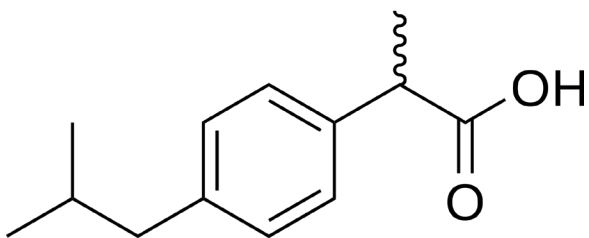


- Direct labelling
 - Complexation
 - Electrophilic substitution
 - Nucleophilic substitution
- Indirect labelling- Synthons
- Manual Vs automation

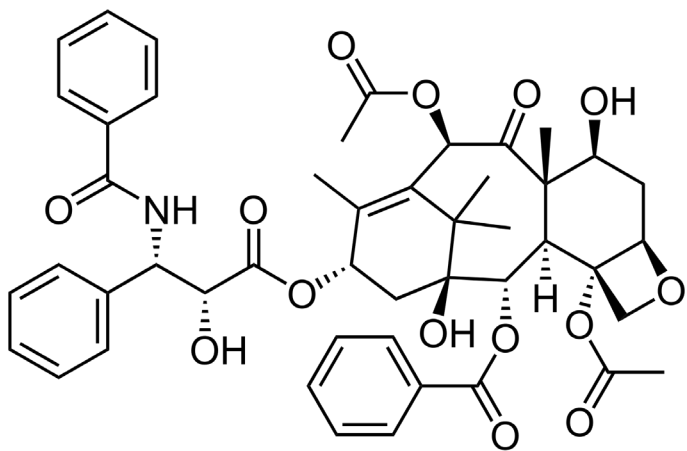


Radiolabeling

Radiochemistry is similar to chemistry with a few twists



Ibuprofen
3 steps



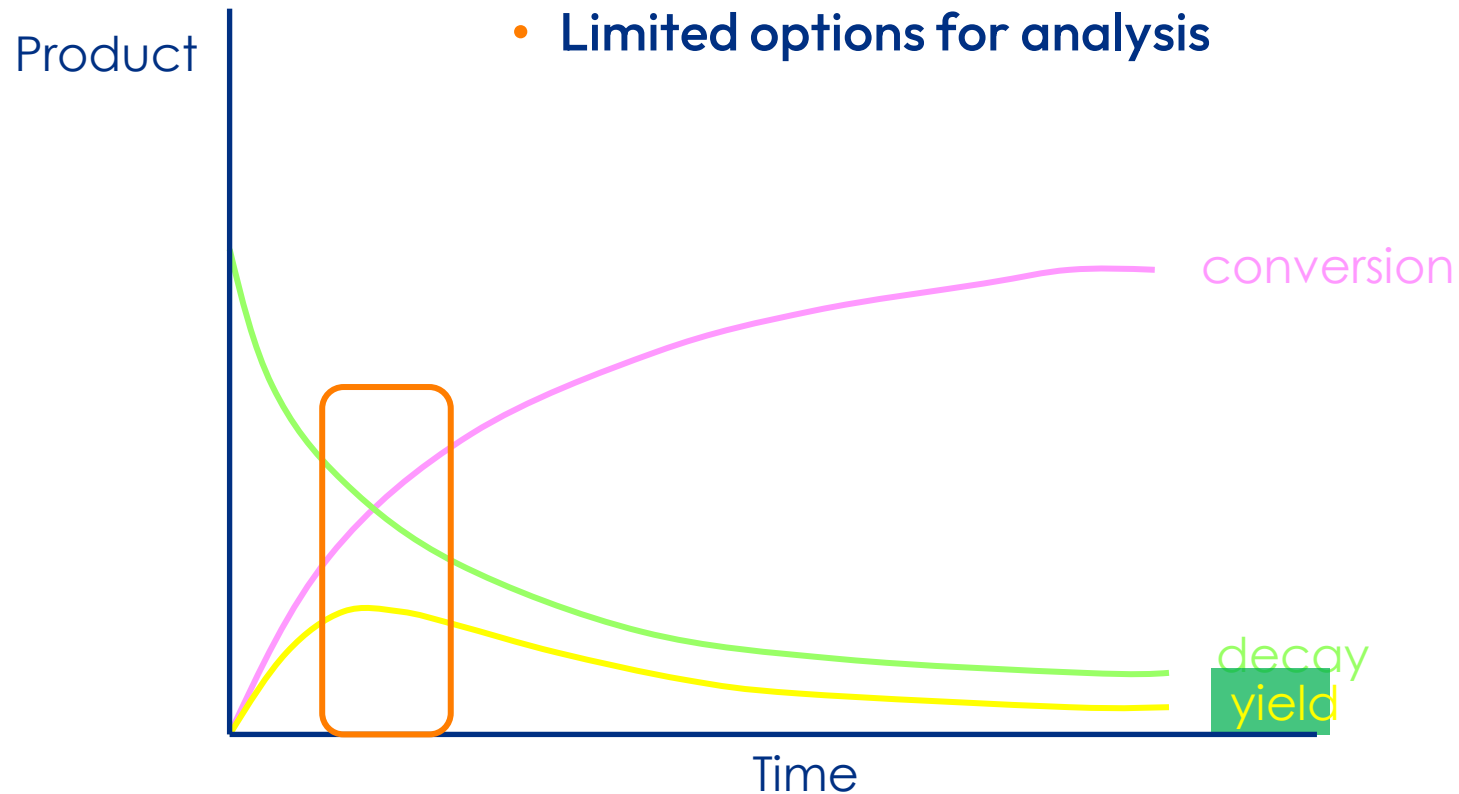
Taxol
39 steps!!

added and the reaction was stirred magnetically for 45 min (monitored by TLC). Then *N*-Boc-4,7,10-trioxa-1,13-tridecanediamine(8) (3.93 g, 12.3 mmol) was added dropwise in 4 mL DMF and the mixture was stirred for 24 h. The solvent was removed under reduced pressure and the residue was dissolved in CH₂Cl₂ (150 mL) and the organic layer was washed with H₂O (3 × 100 mL) and brine (2 × 100 mL), then dried over MgSO₄, before filtration and removal of the solvent under reduced pressure. The crude sample was purified by column chromatography (SiO₂, AcOEt) to give compound 1 as a slightly yellow solid.

To a solution of compound 2 (348 mg, 0.952 mmol) in DMF (5 mL) was added succinic anhydride (143 mg, 1.43 mmol) and the mixture was stirred for 48 h at r.t. under an atmosphere of N₂. After evaporation of the solvent, the crude was purified by flash chromatography (C18, CH₂Cl₂/MeOH, 0.9, 1.0, 1.1, 1.2, 1.3, 1.4, 1.5, 1.6, 1.7, 1.8, 1.9, 2.0, 2.1, 2.2, 2.3, 2.4, 2.5, 2.6, 2.7, 2.8, 2.9, 3.0, 3.1, 3.2, 3.3, 3.4, 3.5, 3.6, 3.7, 3.8, 3.9, 4.0, 4.1, 4.2, 4.3, 4.4, 4.5, 4.6, 4.7, 4.8, 4.9, 5.0, 5.1, 5.2, 5.3, 5.4, 5.5, 5.6, 5.7, 5.8, 5.9, 6.0, 6.1, 6.2, 6.3, 6.4, 6.5, 6.6, 6.7, 6.8, 6.9, 7.0, 7.1, 7.2, 7.3, 7.4, 7.5, 7.6, 7.7, 7.8, 7.9, 8.0, 8.1, 8.2, 8.3, 8.4, 8.5, 8.6, 8.7, 8.8, 8.9, 9.0, 9.1, 9.2, 9.3, 9.4, 9.5, 9.6, 9.7, 9.8, 9.9, 10.0) to give compound 3 as a white solid. HR-ESI-MS: m/z [M+Na]⁺ 488.24795, found 488.24801.

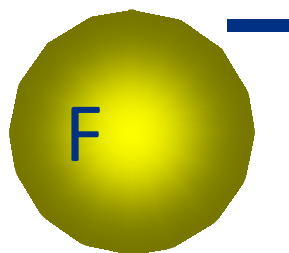
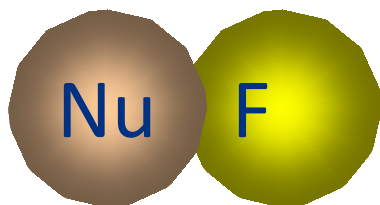
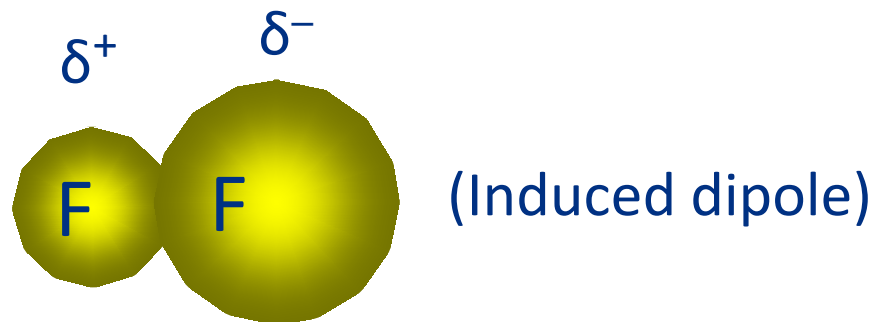
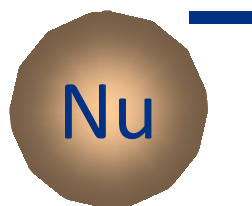
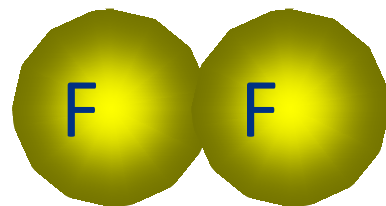
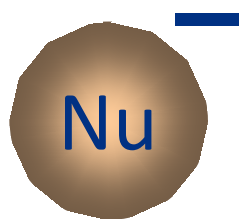
Radiolabeling

- Time (short-lived radionuclides)-Need simple and late-stage incorporation
- Radiation safety (need to start with high amounts of activity)
- Stoichiometry of reagents (Radionuclide always limiting reagent (pmol to nmol))
- Sensitive to impurities
- Limited options for analysis



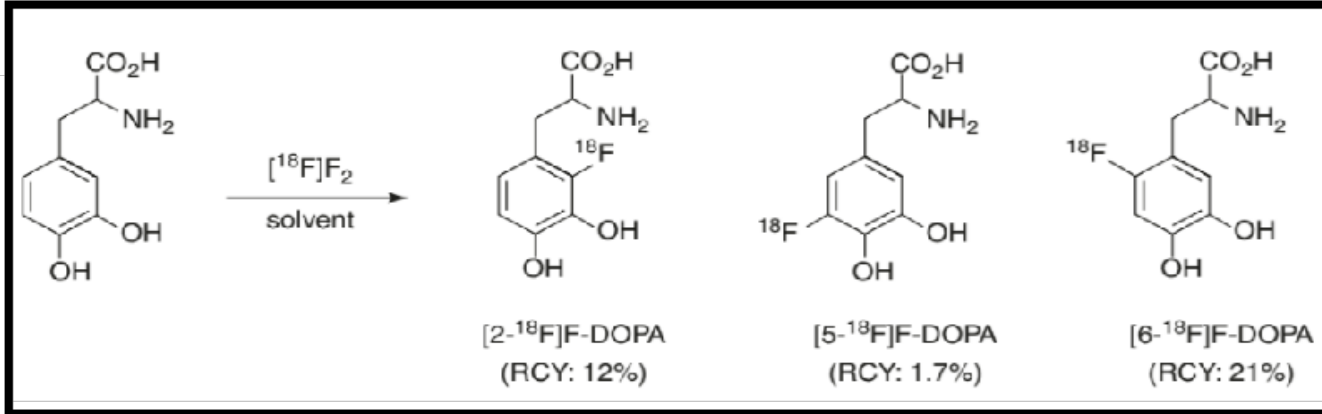
Radiolabeling

Electrophilic substitution



Radiolabeling

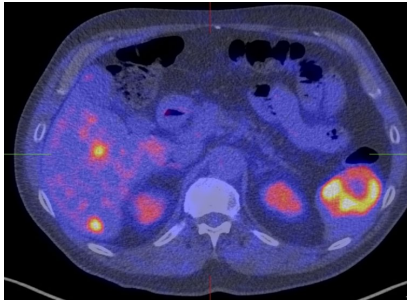
Electrophilic substitution



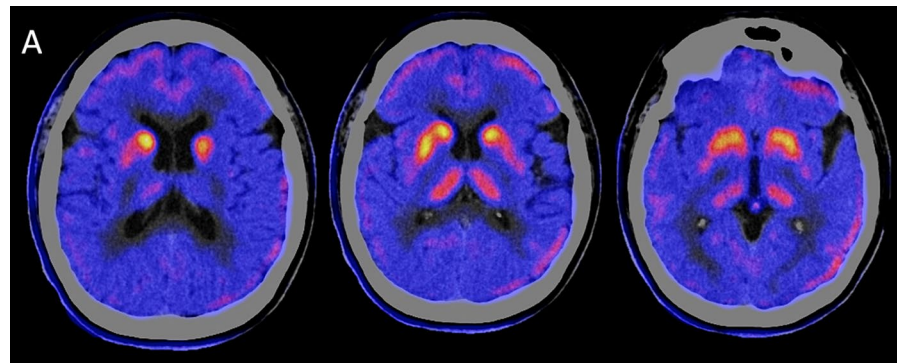
Bone, liver, spleen
metastases



Liver, spleen
metastases



Parkinson's disease



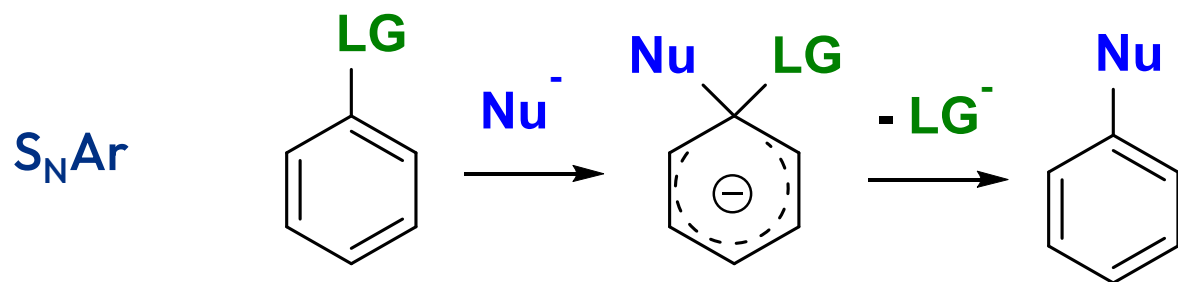
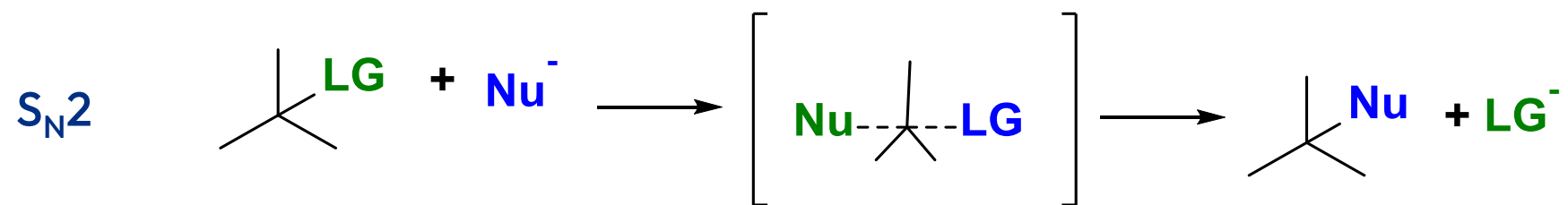
Main issues with $[^{18}\text{F}]\text{F}_2$ electrophilic substitution:

1. Maximum achievable theoretical radiochemical yield is 50%
2. Product form with low Molar Activity
3. $[^{18}\text{F}]\text{F}_2$ is highly reactive \rightarrow Several by-products

UMCG:

Radiolabeling

Nucleophilic substitution



Radiolabeling

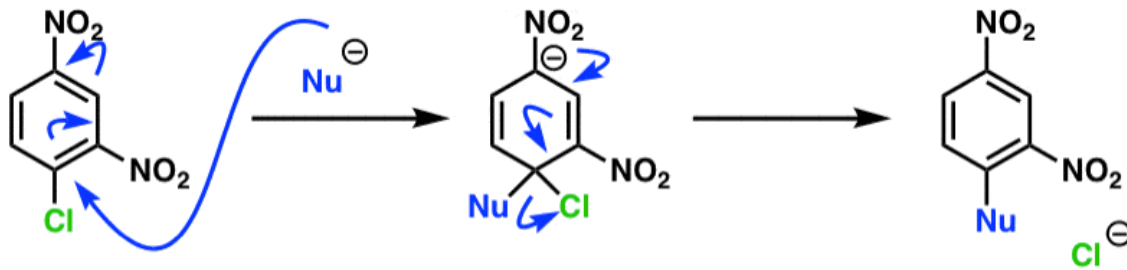
Nucleophilic substitution

- ^{18}F -fluoride must be dehydrated
- high temperatures (~80–100 °C)
- presence of weak nucleophilic bases (K_2CO_3 ; KHCO_3 bicarbonate $\text{K}_2\text{C}_2\text{O}_4$)
- Polar aprotic solvents ACN, DMF or DMSO.
- \uparrow solubility of ^{18}F - in organic solvent with Kryptofix 222 or a bulky tetrabutylammonium cation.
- With very reactive leaving groups \rightarrow lower temperatures to avoid competitive elimination reaction
- Need of protecting groups
- **Activating groups ($\text{S}_{\text{N}}\text{Ar}$)**

Radiolabeling

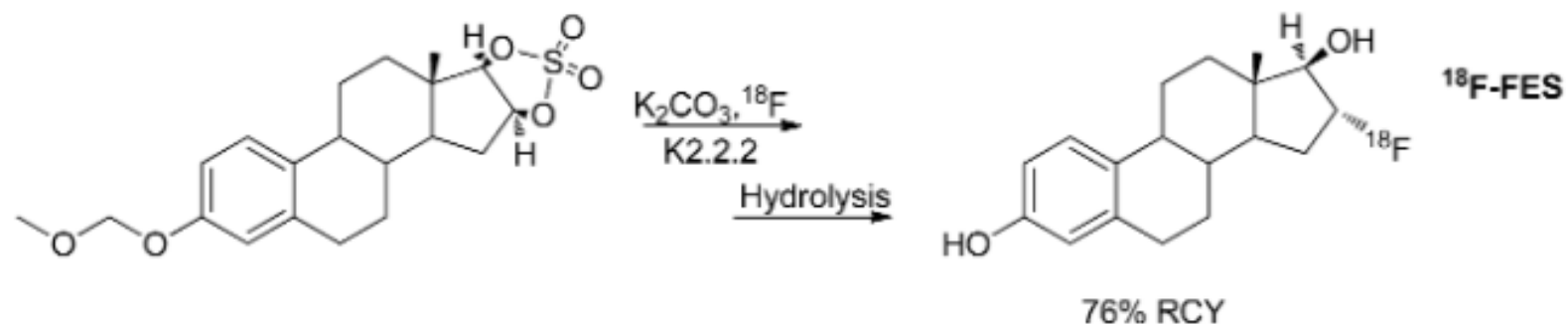
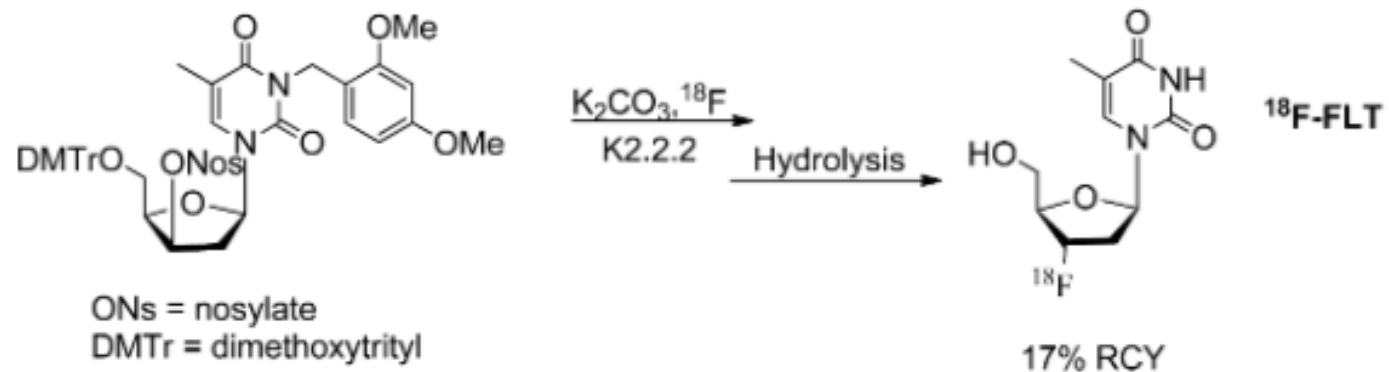
Nucleophilic substitution

- It requires sufficient activation or the phenyl ring → electron withdrawing groups (EWG: $-\text{NO}_2$, $-\text{CN}$, $-\text{CF}_3$, or carbonyl groups)



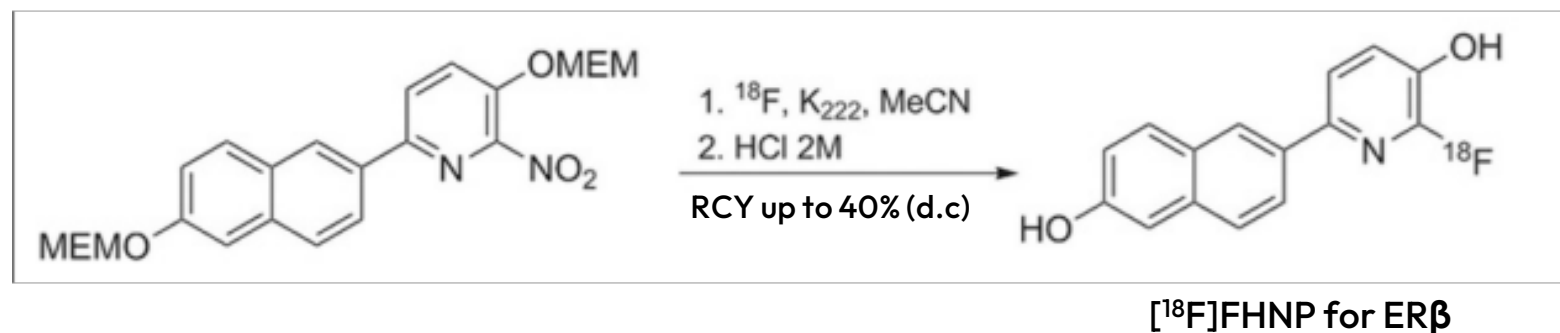
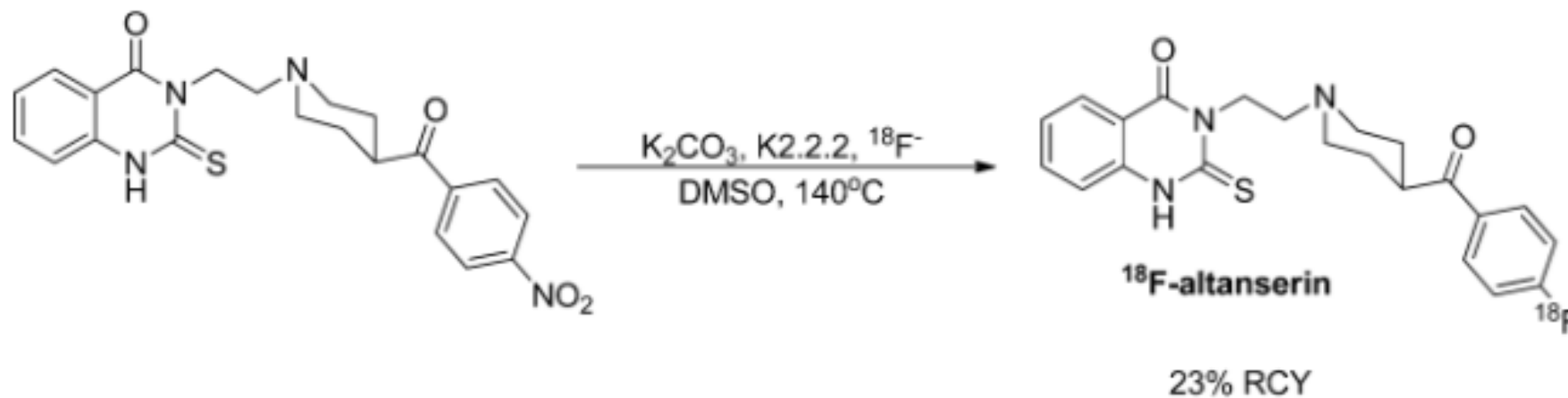
Radiolabeling

Nucleophilic substitution



Radiolabeling

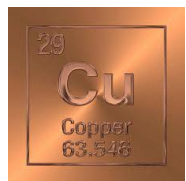
Nucleophilic substitution



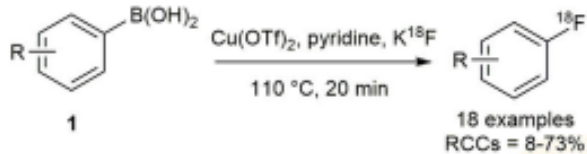
umcg:

Radiolabeling

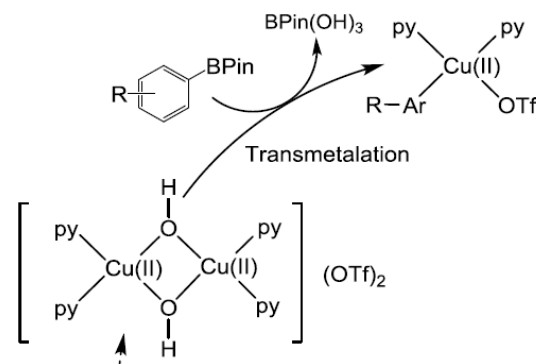
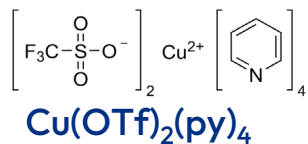
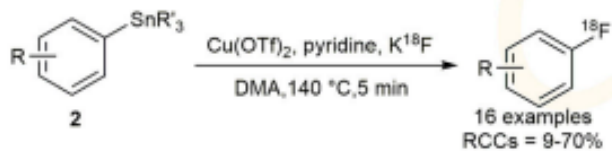
Metal-mediated radiofluorination



Reaction 1 (Mossine et al., 2015):

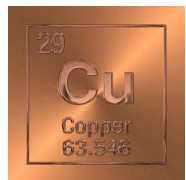


Reaction 2 (Makaravage et al., 2016):

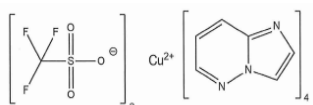


Radiolabeling

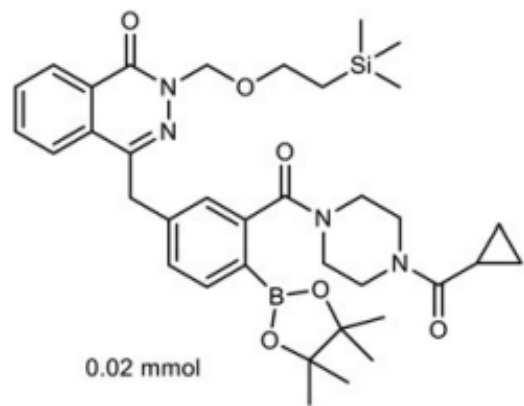
Metal-mediated radiofluorination



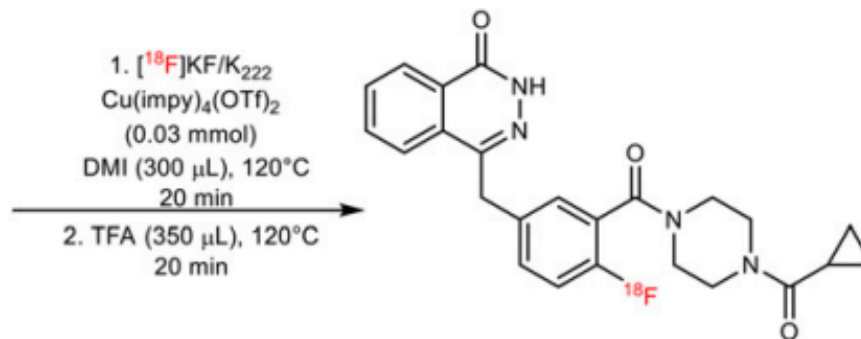
[¹⁸F]-Olaparib



Cu(OTf)₂(impy)₄

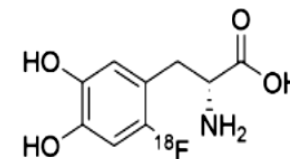
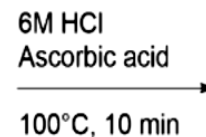
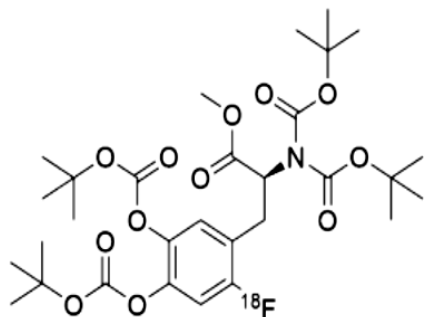
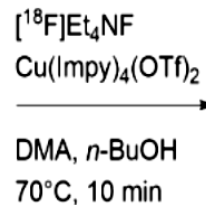
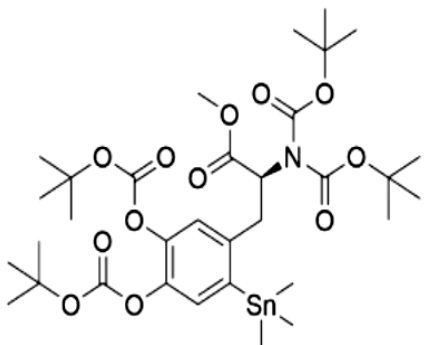


0.02 mmol



AY = 18% ± 3% (n = 5)
molar activity up to 25.7 GBq/μmol
Synthesis Time: 135 min

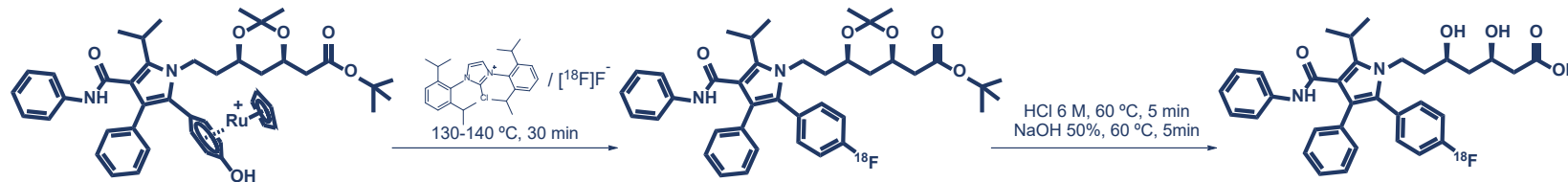
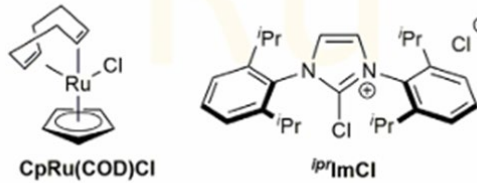
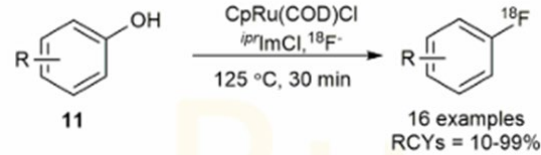
[¹⁸F]-FDOPA



RCY=20% (n.d.c) M_A>25GBq/μmol

UMCG:

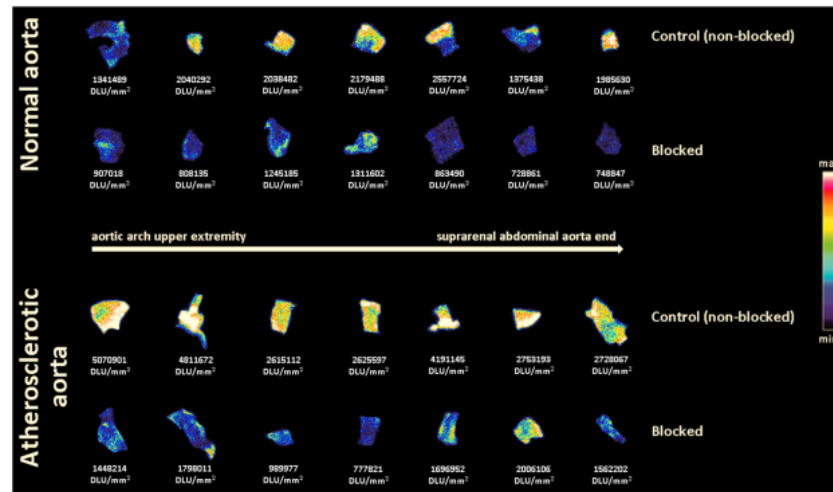
Radiolabeling



RCY=19% (d.c)
 $M_A = 65\text{GBq}/\mu\text{mol}$

Metal-mediated radiofluorination

- Aryl systems
- Heterocyclic compounds
- Wide variety of functional groups
- Some basic amines



UMCG:

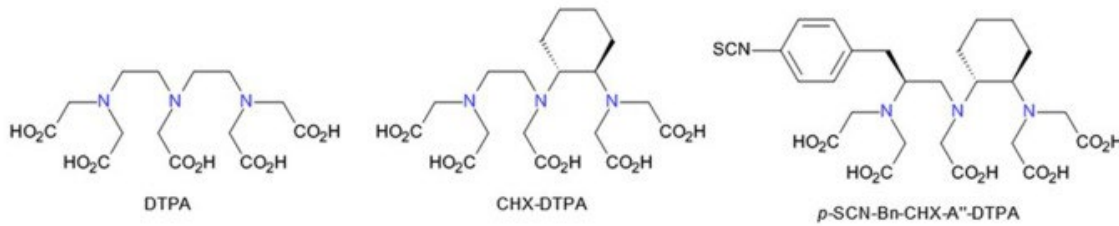
Clemente et al. EJNMMI Research 2020, 10,
 Beyzavi et al., ACS Central Science 2017 3 (9), 944-948

Radiolabeling

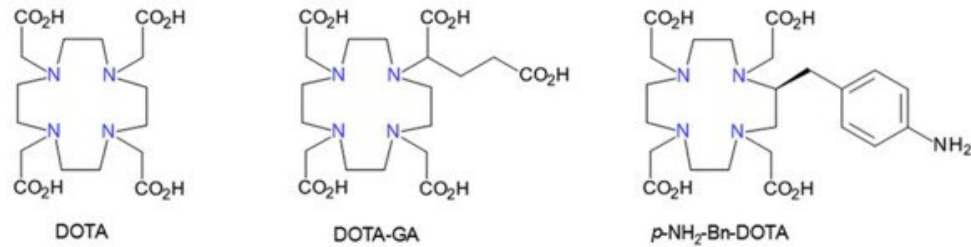
Complexation

Acyclic chelators VS cyclic chelators

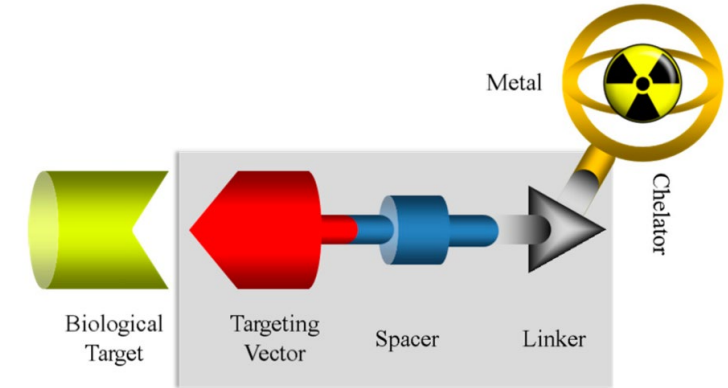
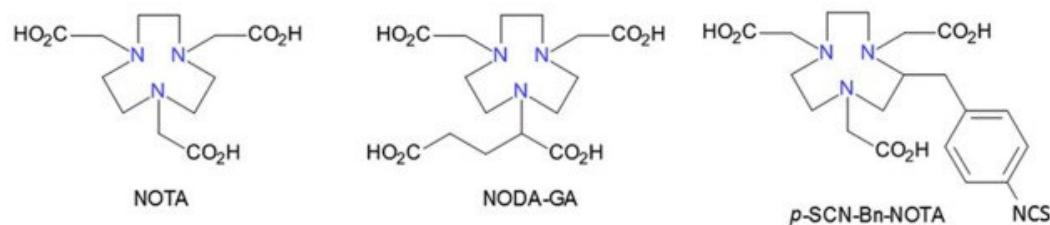
A



B



C



Acyclic chelators

- + Incorporation of the radiometal even at room temperature
- More Kinetically labile

Cyclic chelators

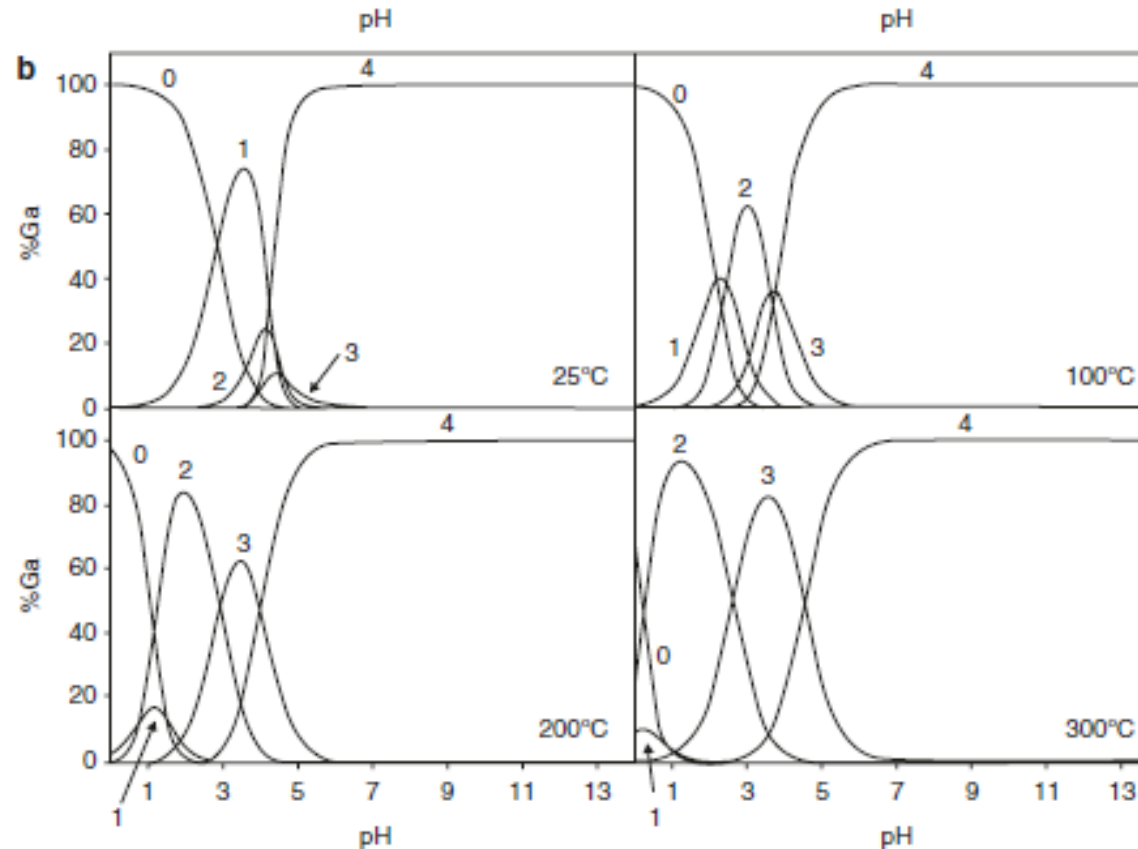
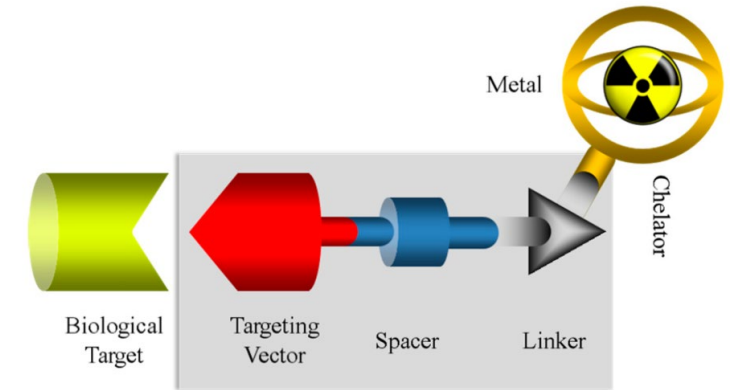
- + thermodynamically stable and kinetically inert
- Incorporation of the radiometal at high temperatures

UMCG:

Radiolabeling

Complexation

- *Size*
- *Oxidation state*
- *pH*
- *temperature*

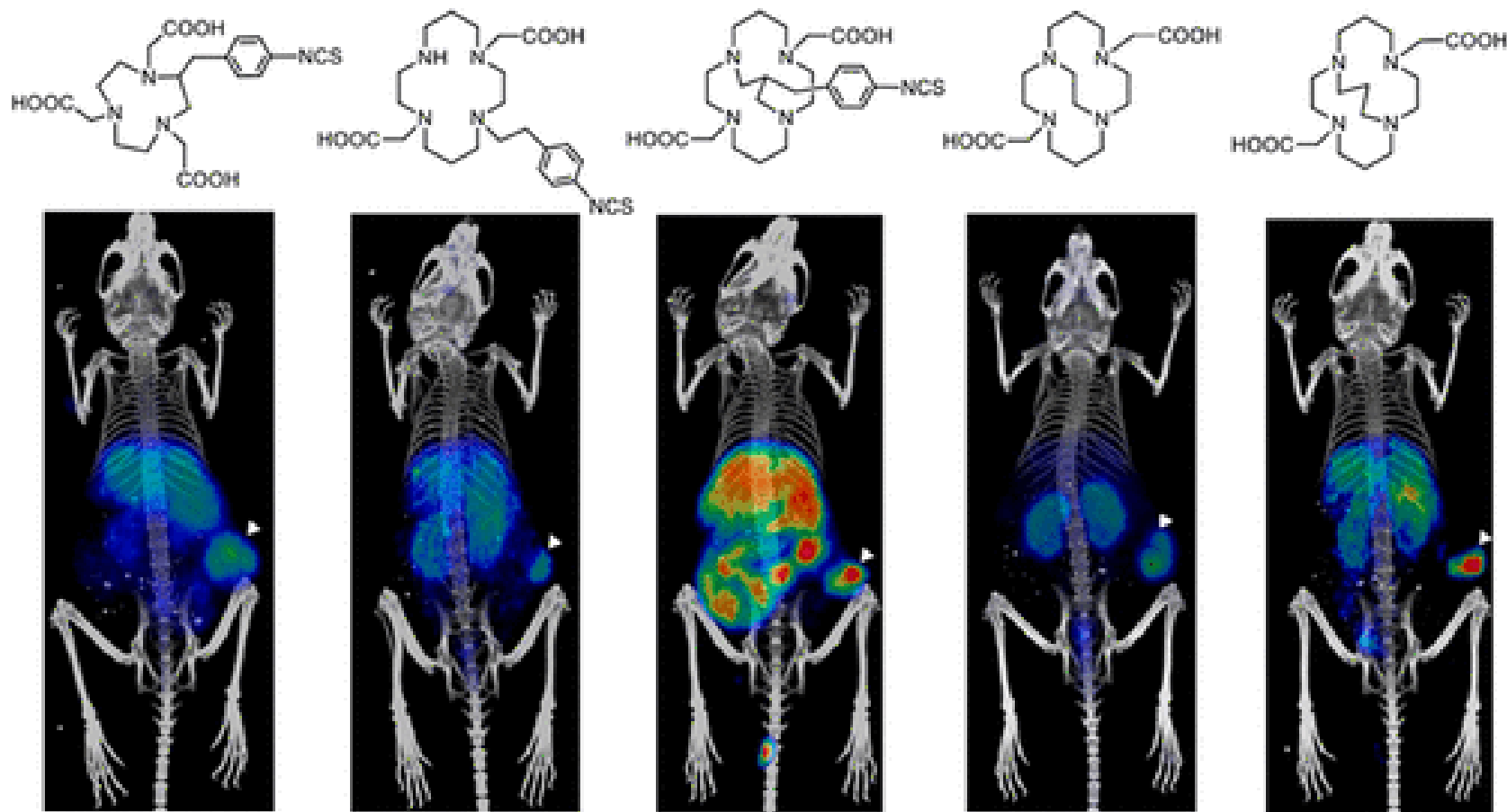


and Ga-hydroxide (b) species as a function of temperature and pH at infinite dilution. The species shown are (M = Ga or In): 0 = M^{3+} , 1 = $M(OH)^{2+}$, 2 = $M(OH)_2^+$, 3 = $M(OH)_3$ and 4 = $M(OH)_4^-$ (From Wood and Samson [17], with permission)

UMCG:

Radiolabeling

Complexation

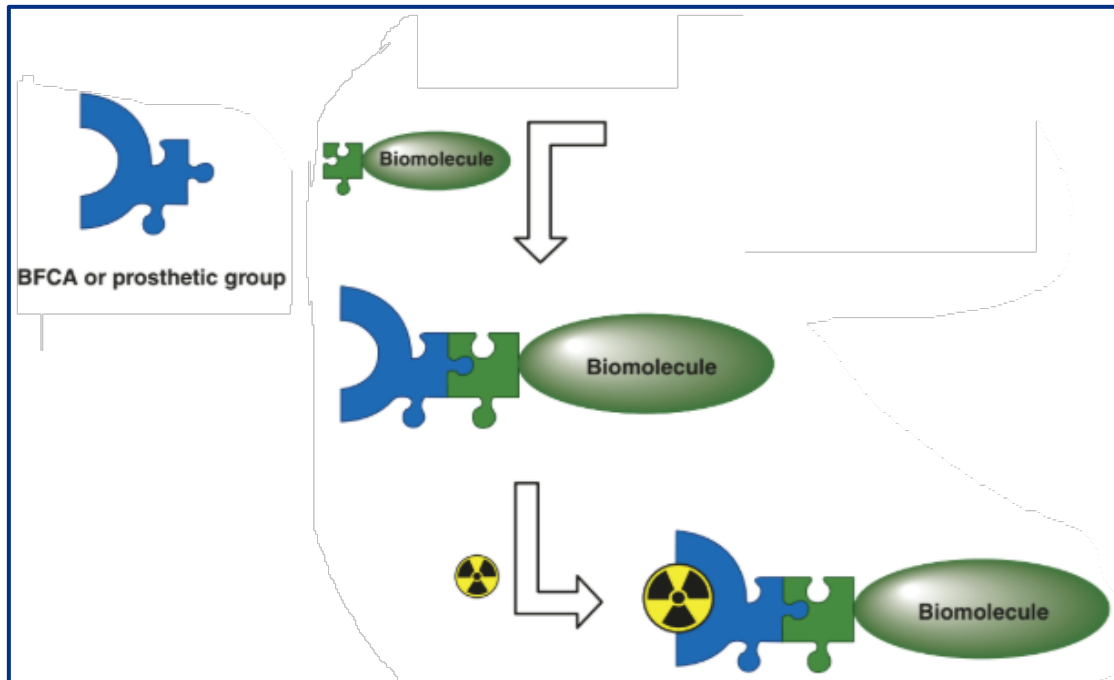


UMCG:

Radiolabeling

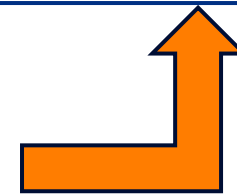
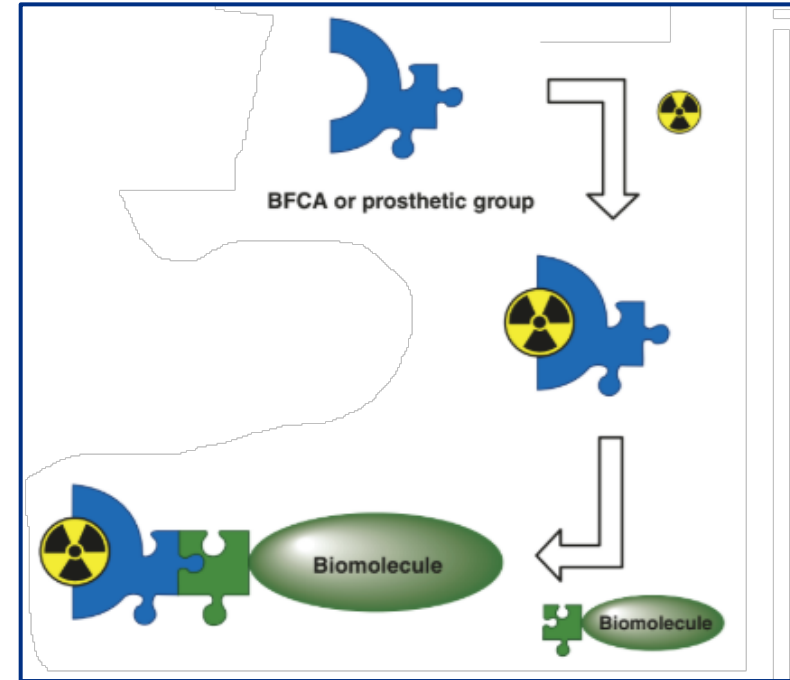
Indirect-labelling

Direct Radiolabelling



Non physiological pH
High temperatures

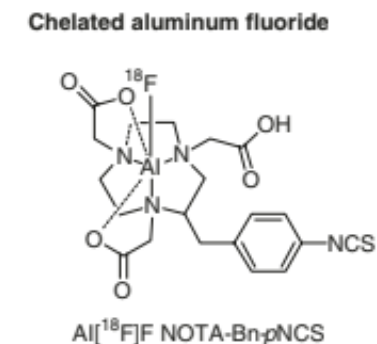
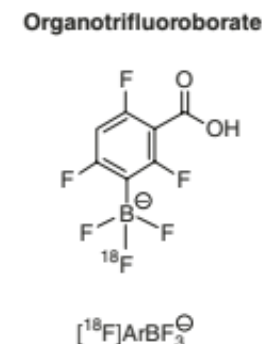
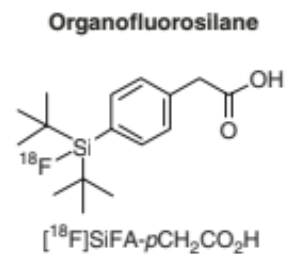
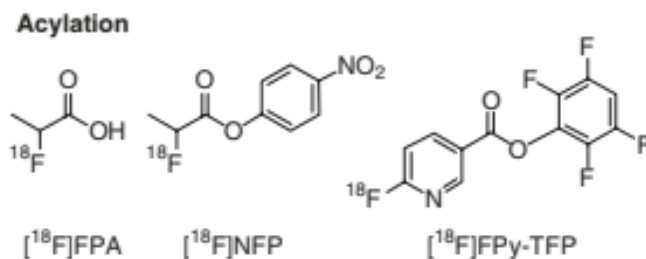
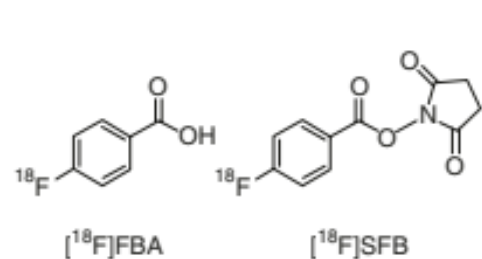
Indirect Radiolabelling



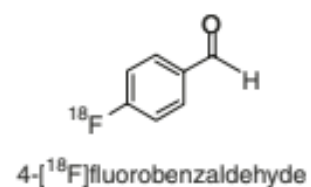
UMCG:

Radiolabeling

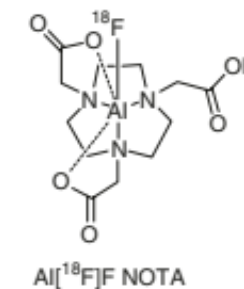
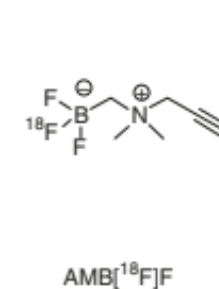
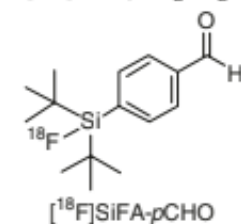
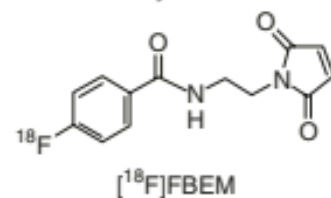
Indirect-labelling



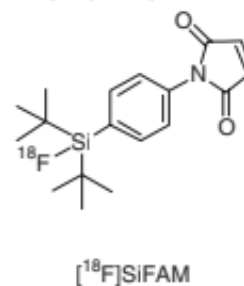
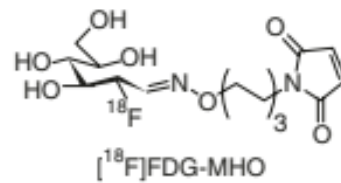
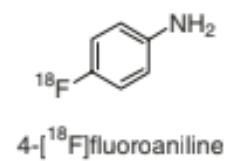
Acylation (after oxidation)



Alkylation



Amidation

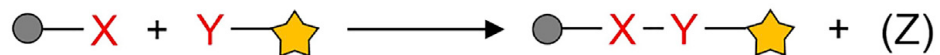


Versatility

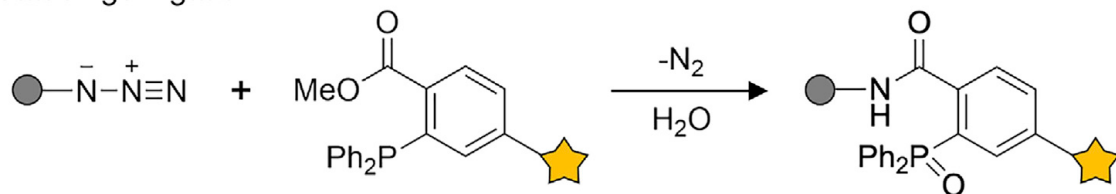
UMCG:

Radiolabeling

Indirect-labelling



Staudinger ligation



+ Versatility (Fast and low temp 40°C)

Cu-catalyzed azide-alkyne cycloaddition



+ Insensitive to water/oxygen

+ No need of protecting groups/Fast

- Needs Copper

Strain-promoted azide-alkyne cycloaddition

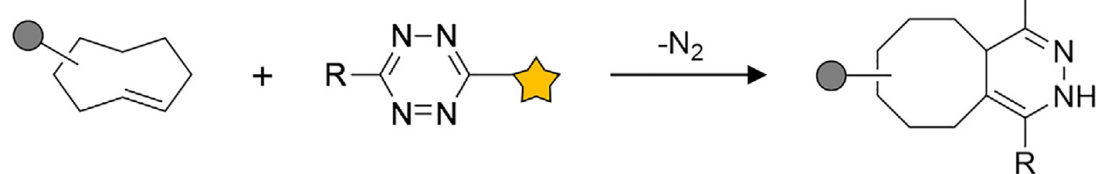


+ Insensitive to water/oxygen

+ No need of protecting groups/Fast

Inverse-electron-demand Diels-Alder reaction

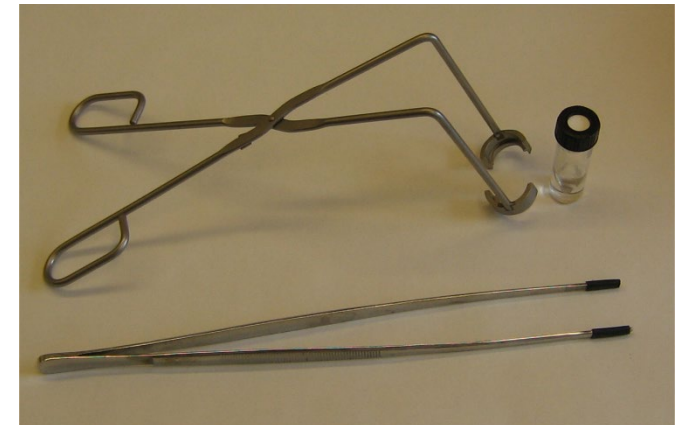
Tetrazine-trans-cyclooctene ligation



UMCG:

Radiolabeling

Manual



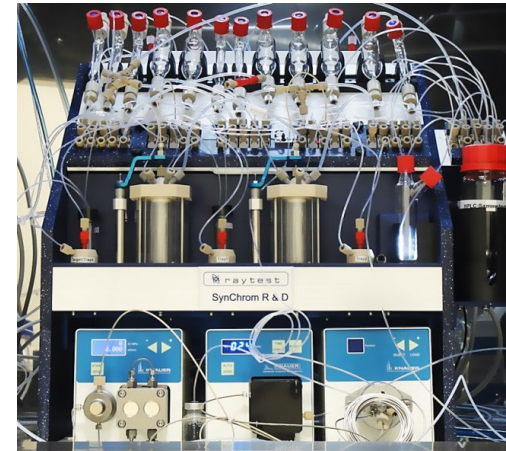
Radiolabeling

Automated

Cassette



Fixed tubing

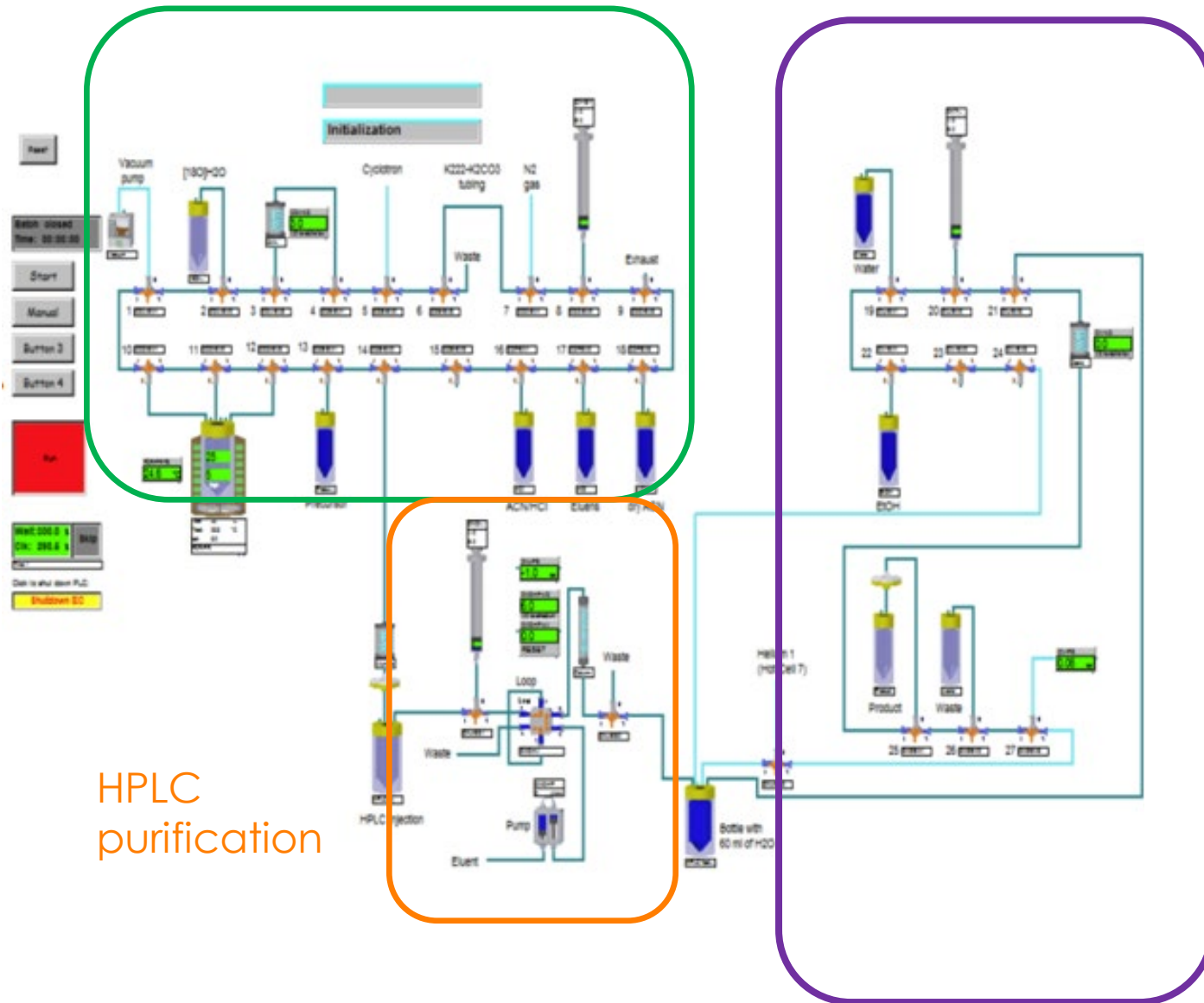


Radiolabeling

Synthesis

Automated

Formulation



Challenges in automation

- Dependence on mechanical parts: regulators, valves, lines
- Compatibility of hardware with chemicals and radiation
- Clogging or leakage
- Human mistakes in case of complex syntheses

Advantages of automation

- Audit trail
- Reduction of radiation dose
- Can make life easy

Radiolabeling

Automated

Type of automated synthesis module matters!!

[¹⁸F]FES synthesis in E&Z Vs IBA

E&Z



Synthera



Simpler (Fixed cassette Vs assembled cassette)

Shorter synthesis steps

Shorter time

More robust

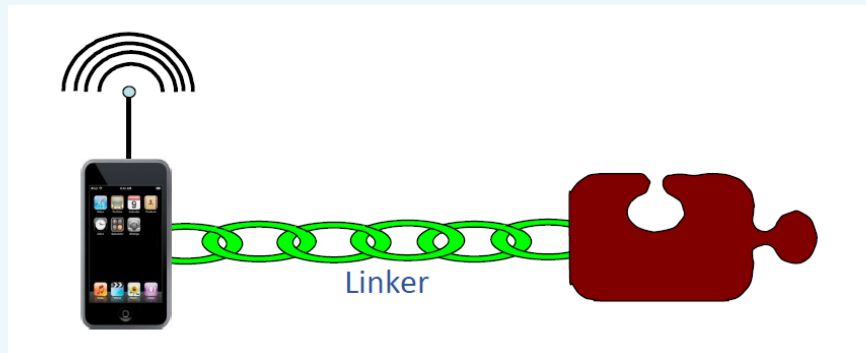
Higher yields!! ($\eta \approx 6\%$ Vs $\eta = 25\%$)

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Medical applications

Nuclear Medicine

Diagnostic



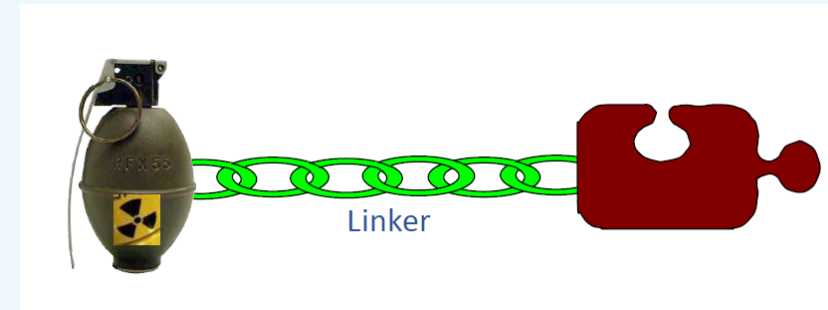
Radionuclide

Emits **radiation** upon decay, detectable by PET or SPECT.

Vector molecule

Responsible for a specific interaction with the target (enzyme, receptor, transporter,...)

Therapeutic



Radionuclide

Emits **particle radiation** upon decay, destroying target cells.

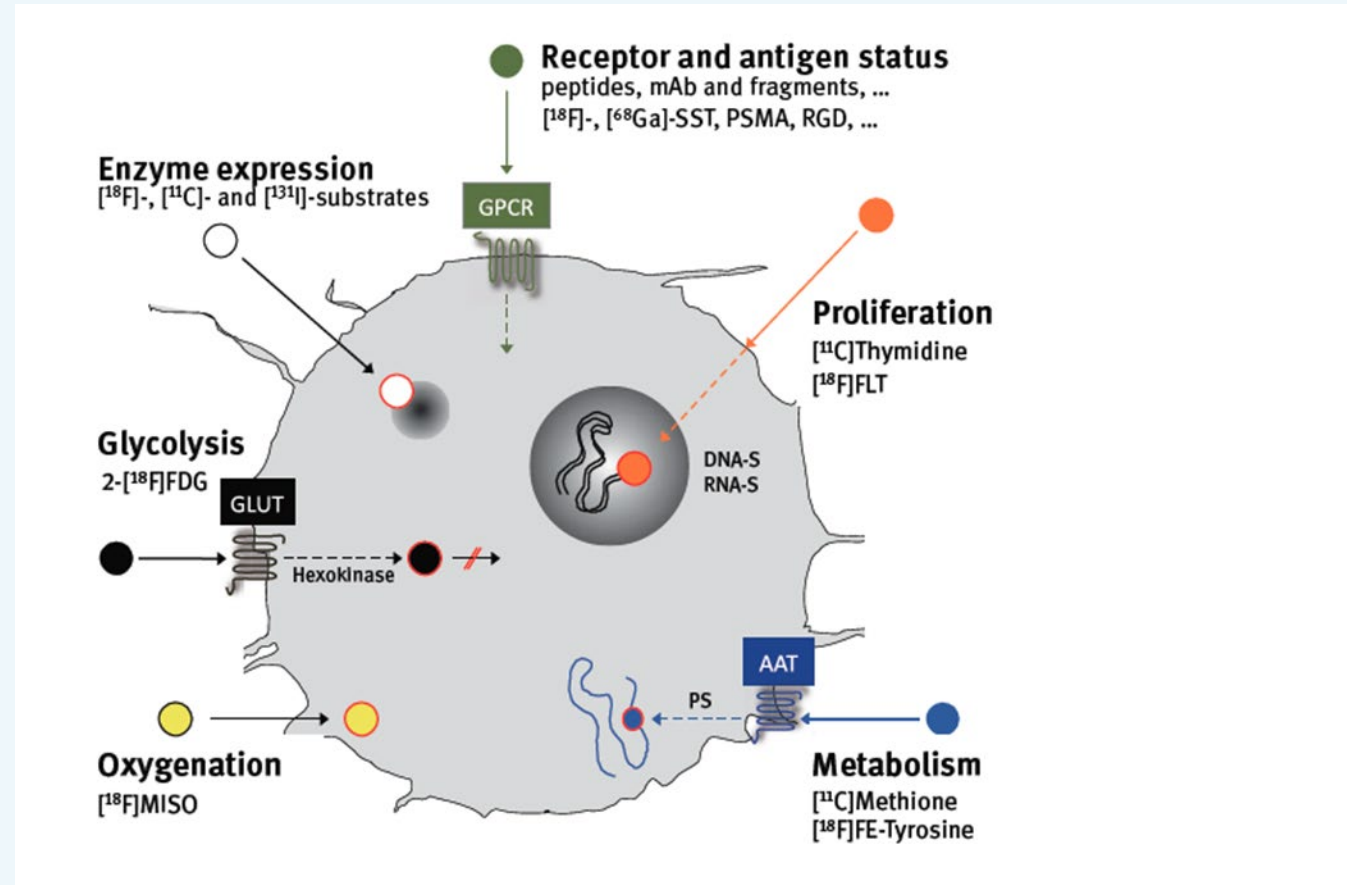
Vector molecule

Responsible for a specific interaction with the target (enzyme, receptor, transporter,...)

Applications

What can be measured with SPECT/PET?

- Receptor density
- Receptor occupancy by a drug
- Enzyme activity
- Membrane transporter activity
- Energy metabolism
- Protein synthesis
- Membrane synthesis
- DNA synthesis
- Oxygenation
- Blood flow
- Perfusion
- Etc, etc

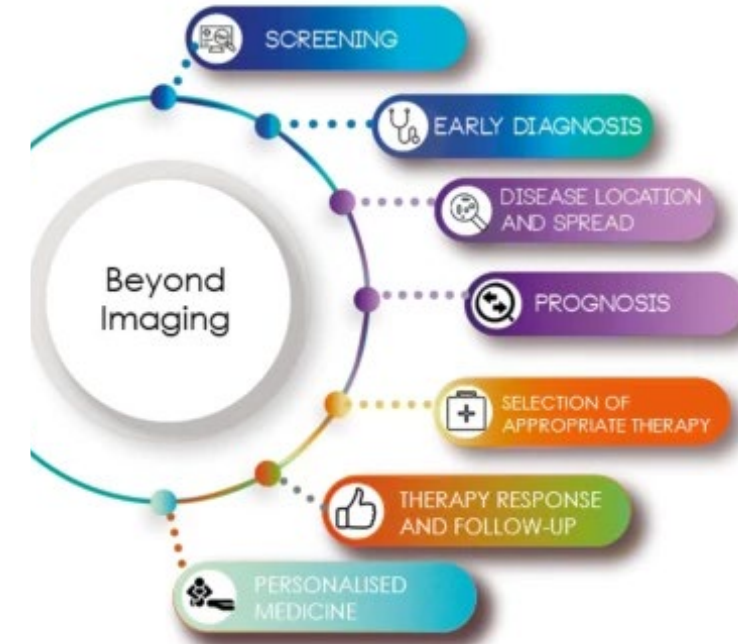


Applications

What information can PET/SPECT provide?

- Differential diagnosis
- Insight the pathology and etiology of disease
- Mechanism of action of drugs
- Monitoring disease progression
- Assessment of treatment efficacy
- Distribution of drugs
- Drug kinetics and receptor occupancy
- ...

Nuclear Medicine in Disease Management



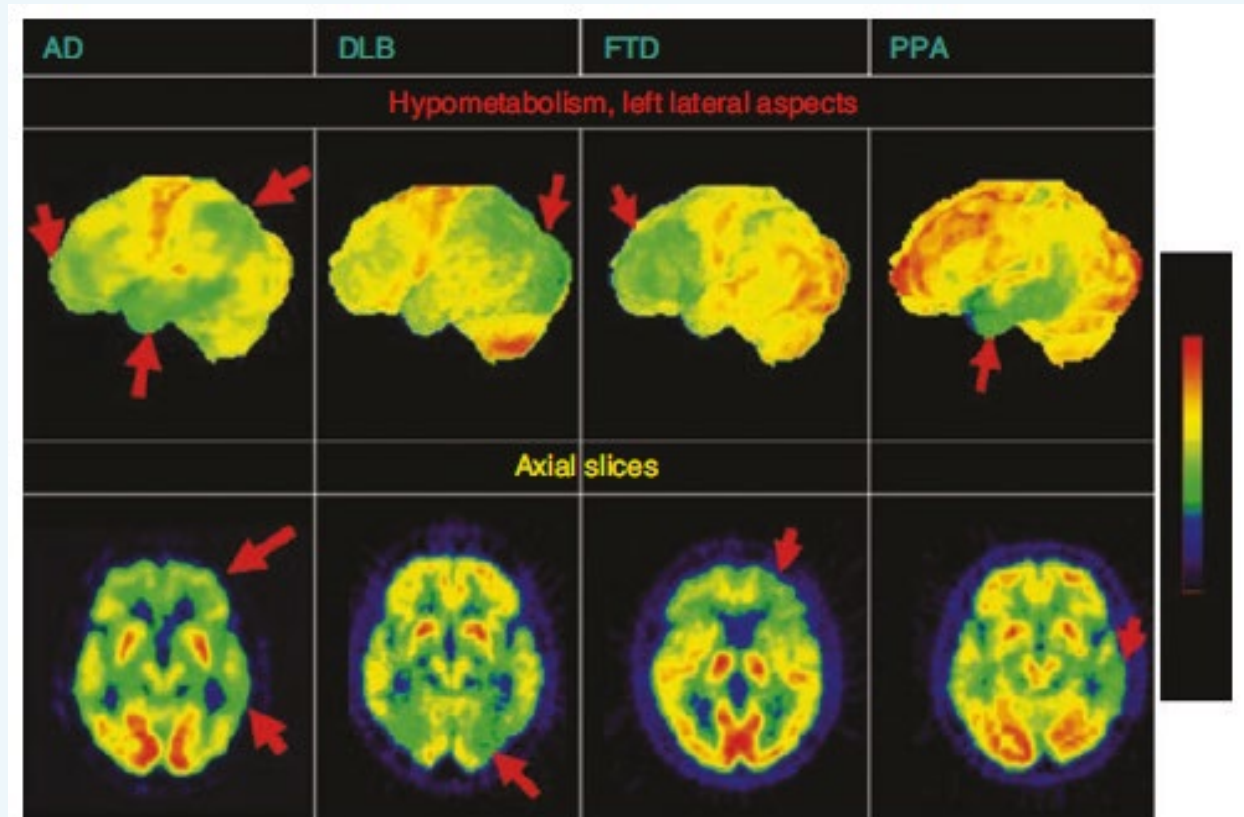
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Applications

Diagnostics

Measuring neurological function

[18F]FDG-PET in the differential diagnosis of various degenerative dementias



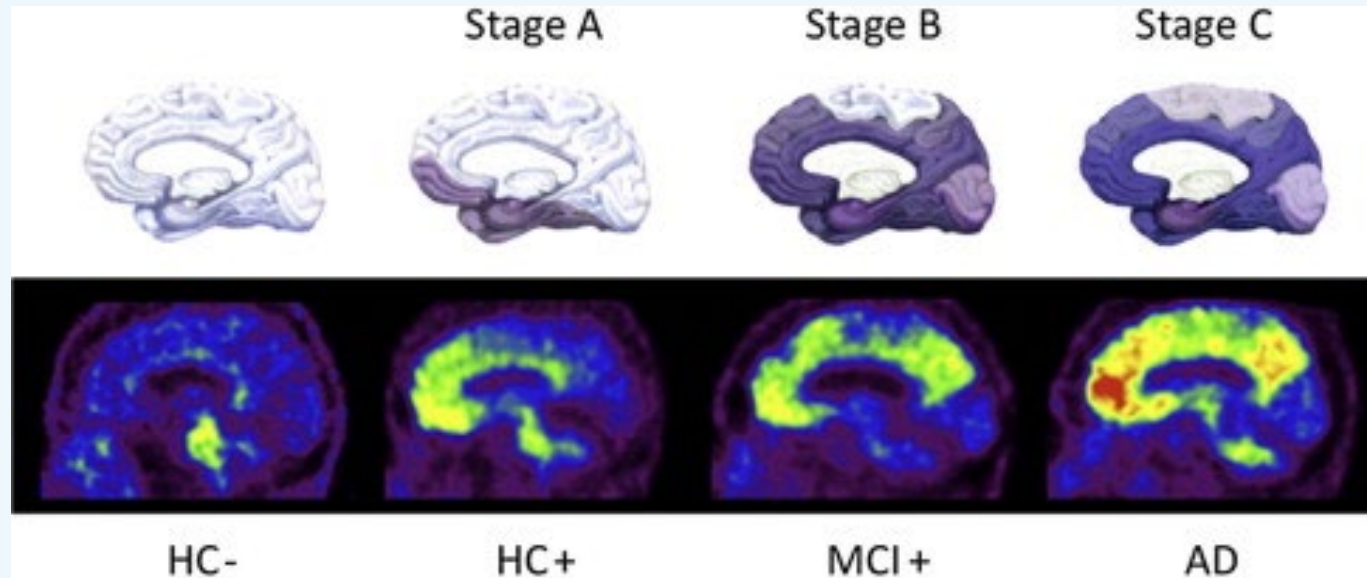
AD Alzheimer dementia
FTD frontotemporal dementia
DLB dementia with Lewy body (Parkinson's disease)
PPA primary progressive aphasia

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Applications

Follow disease evolution

[¹¹C]PiB for β -amyloid formation



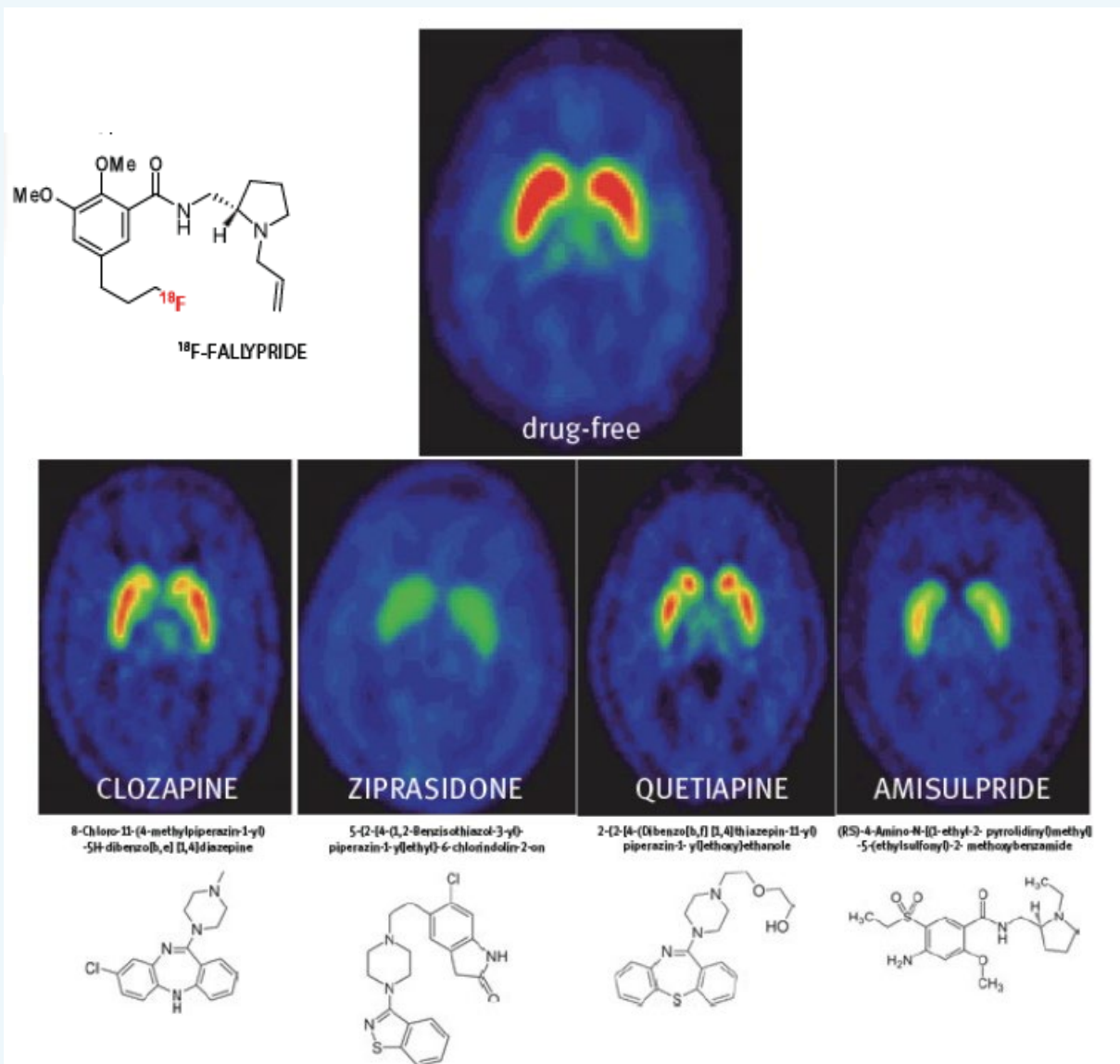
1. asymptomatic healthy control with low (HC-) $A\beta$ burden
2. asymptomatic healthy control with high (HC+) $A\beta$ burden
3. A patient with mild cognitive impairment (MCI+)
4. an AD patient

Fast access to *in vivo* data (pre-clinical or clinical) to:

- Verify proof-of-concept
- Determine the drug dose
- Determine the efficacy of the drug
- Determine the selectivity of the drug to a certain target

Applications

Drug development



Sagittal view of the striatum injected with D2/D3 receptor PET tracer, [¹⁸F]Fallypride in health volunteers showing endogenous levels of receptor availability VS when taken different neuroleptics.

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Applications

Therapeutic drug monitoring

To determine the individual optima dose (personalized treatment)

Patient-characteristics properties :

- Metabolism
- The penetrability of the BBB.
- Metastasized cancer Vs primary cancer

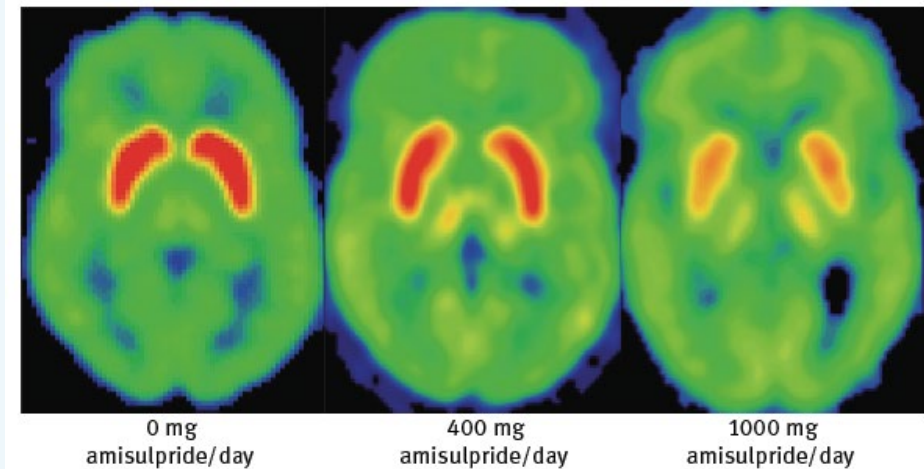


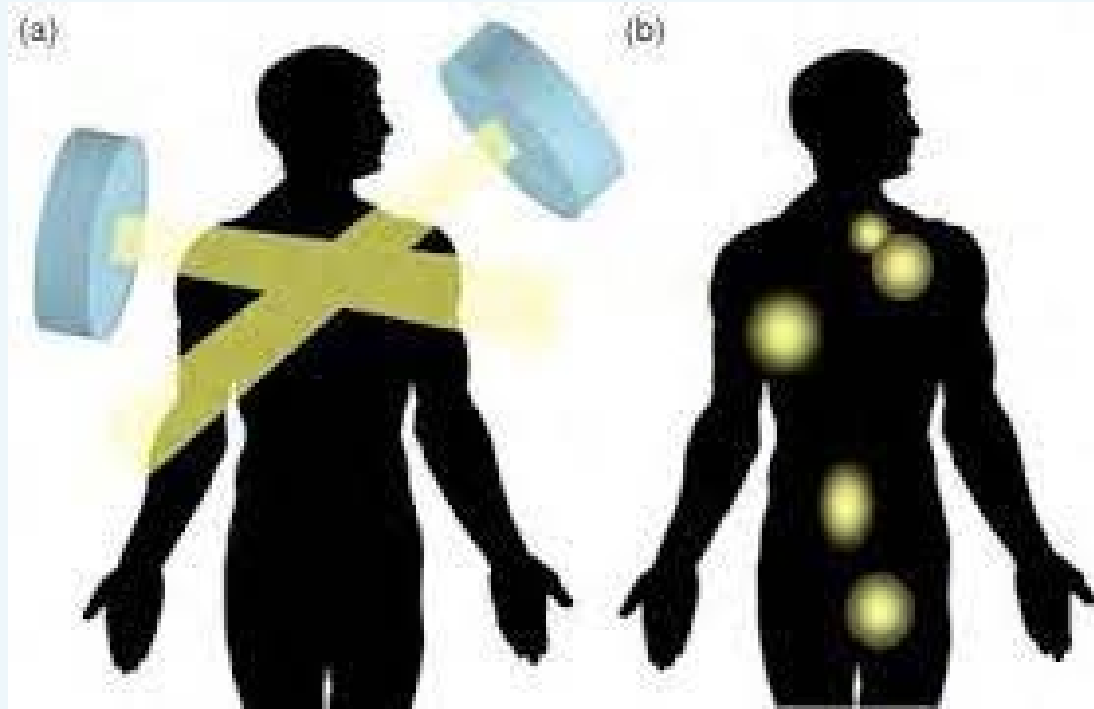
Fig. 12.60: Increasing occupation of postsynaptic D_{2/3} receptors as analyzed by [¹⁸F]DMFP PET depending on the daily dose of the neuroleptic drug amisulpride.

Applications

Theranostics

External Beam

Targeted Radionuclide



Requires knowledge of
tumor location

Requires knowledge of
tumor biology

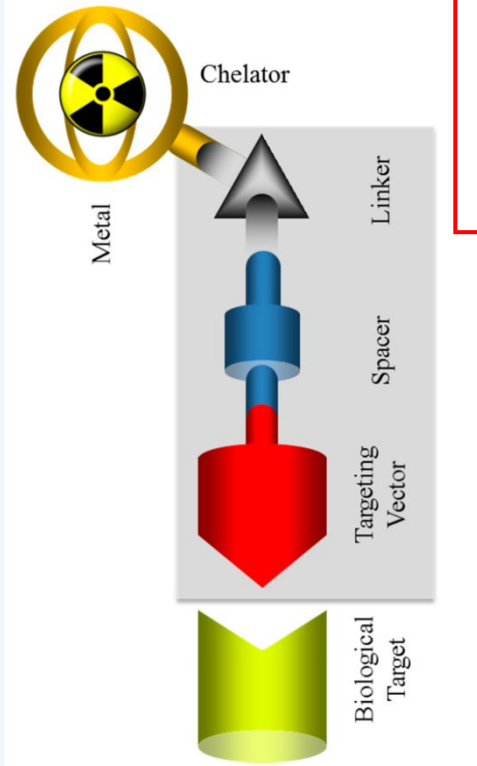
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Applications

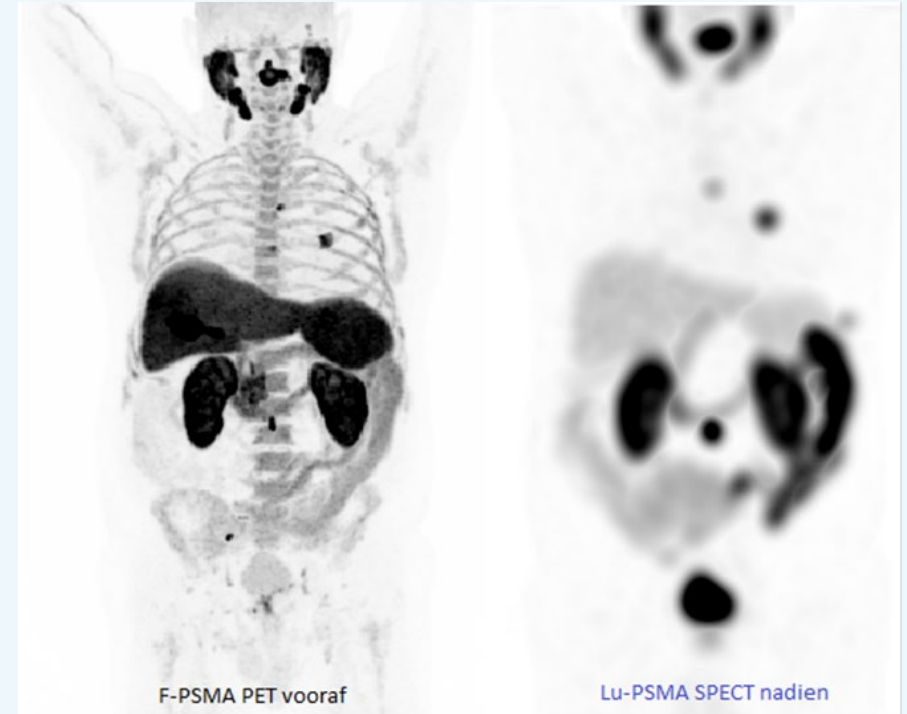
Theranostics

^{99m}Tc
(SPECT)

$^{68}\text{Ga}/^{18}\text{F}$
(PET)



^{177}Lu (Beta emitter)
 ^{161}Tb (Beta emitter +
Auger e-)
 ^{225}Ac (Alpha
emitter)





**TARGETED
RADIONUCLIDE
THERAPY**

 **cost**
EUROPEAN COOPERATION IN
IN SCIENCE AND TECHNOLOGY

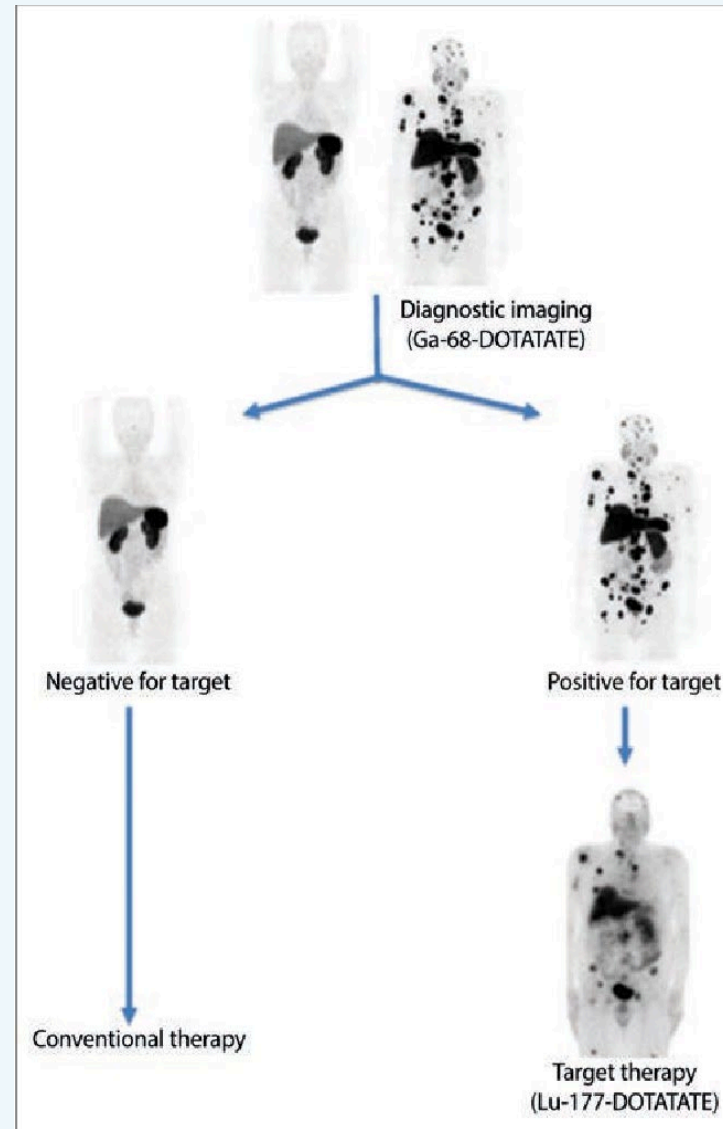
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Applications

Theranostics

1. You treat what you see!

Personalized treatment (therapy selection based on specific molecular features of disease)



Applications

Theranostics

2. Estimate the effective absorbed dose and therefore reduce side effects

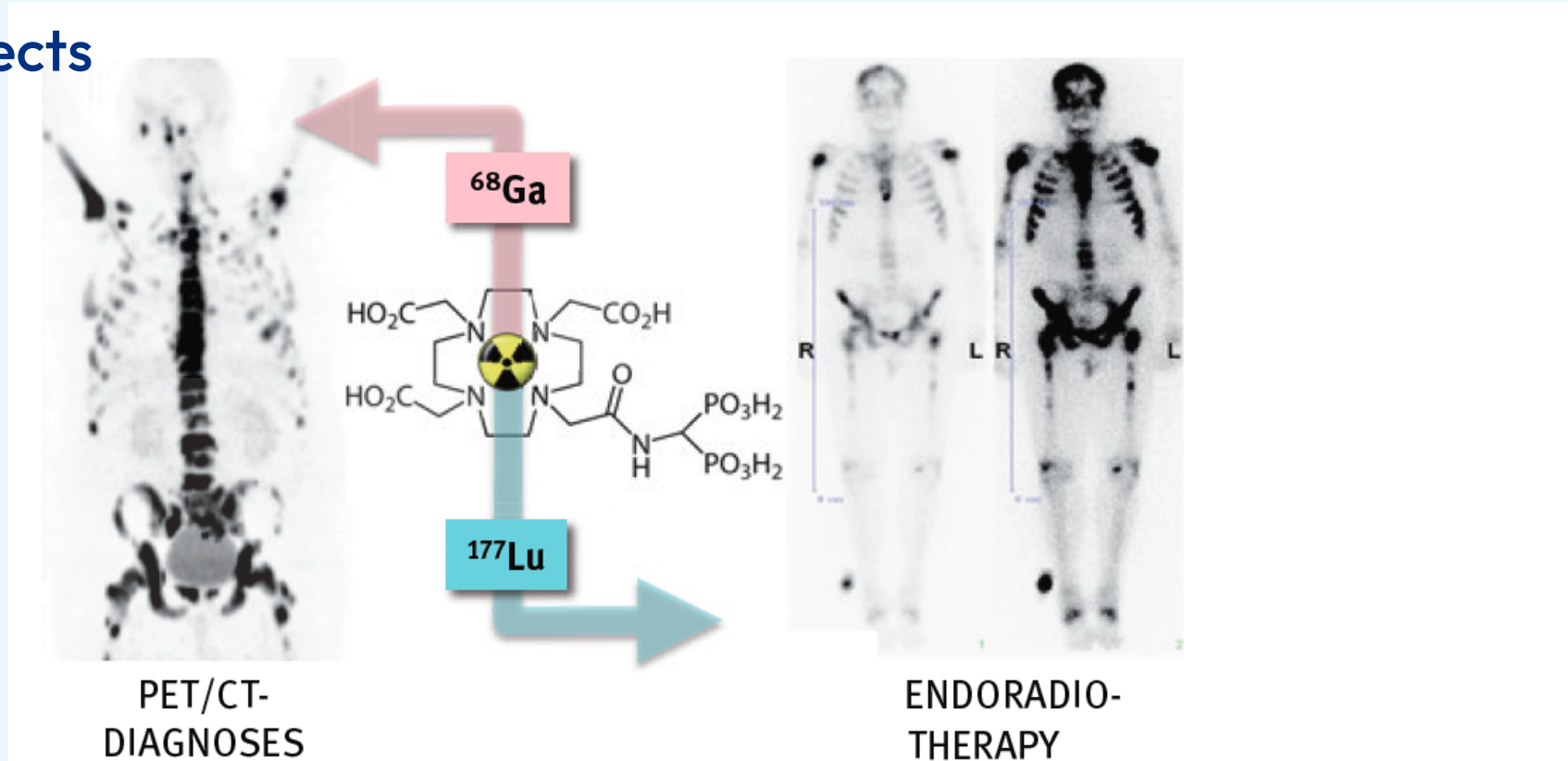
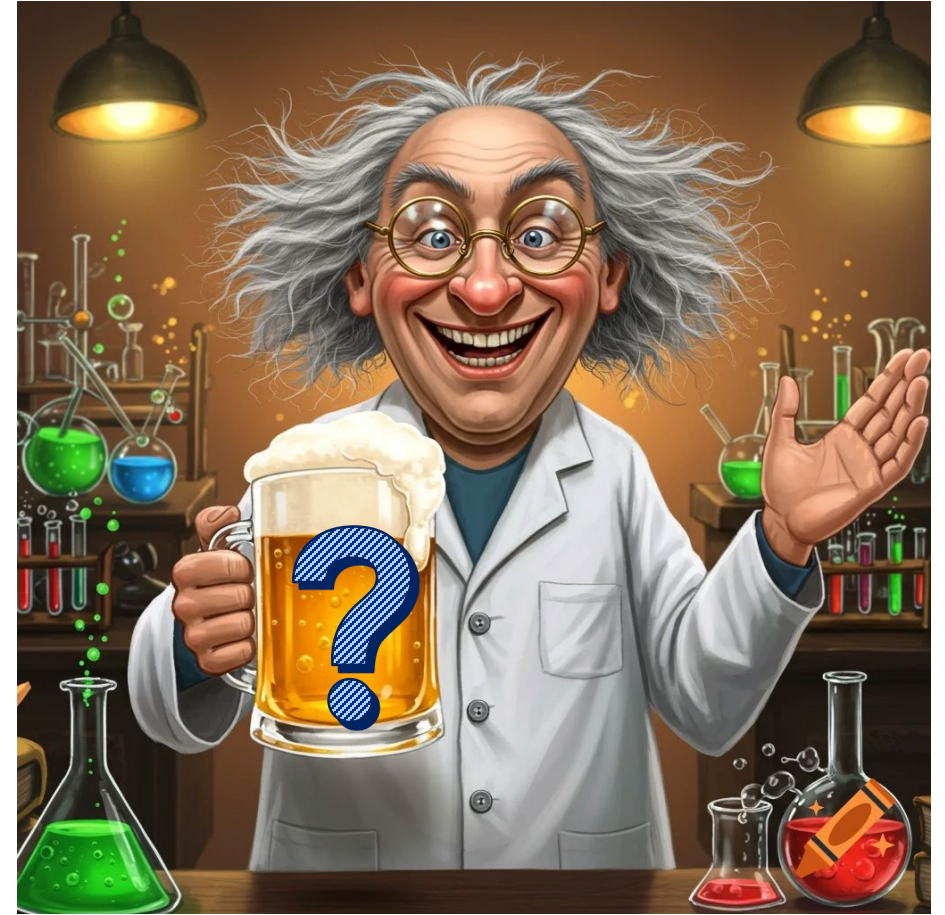


Fig. 13.31: Example of a theranostic approach in nuclear medicine: The same targeting vector, the DOTA-conjugate bisphosphonate BPAMD, is labeled first with ^{68}Ga for quantitative PET to verify the bone metastases expression and the intensity of the tracer uptake (in SUV). Next the same patient undergoes therapy with the ^{177}Lu -BPAMD analog (courtesy Roesch 2011).

Conclusion:

- The properties of the radionuclide and vector will mostly dictate what synthesis method to use
- Radionuclide needs to match the biological half-life of the vector.
- Radiopharmaceuticals can be both applied for diagnostic and therapeutic to improve Precision medicine

One size doesn't fit all!!!



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