Prostate cancer radiotherapy: potential applications of metal nanoparticles for imaging and therapy

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ABSTRACT

Prostate cancer (CaP) is the most commonly diagnosed cancer in males. There have been dramatic technical advances in radiotherapy delivery, enabling higher doses of radiotherapy to primary cancer, involved lymph nodes and oligometastases with acceptable normal tissue toxicity. Despite this, many patients relapse following primary radical therapy, and novel treatment approaches are required. Metal nanoparticles are agents that promise to improve diagnostic imaging and image-guided radiotherapy and to selectively enhance radiotherapy effectiveness in CaP. We summarize current radiotherapy treatment approaches for CaP and consider pre-clinical and clinical evidence for metal nanoparticles in this condition.

CURRENT STATE OF THE ART IN PROSTATE CANCER DIAGNOSIS AND TREATMENT

The management of CaP is changing rapidly with advances occurring in diagnosis, imaging and treatment. Most males present with localized rather than advanced CaP at diagnosis. Current stratification methods place patients into low-, intermediate- and high-risk prognostic categories based on prostate-specific antigen levels, local staging and Gleason score. Males with low-risk CaP are increasingly managed with active surveillance, with large studies reporting 10-year cancer-specific survival rates of >98% with this management approach. In this cohort, 75.6% of males were treatment-free after 5 years of active surveillance. The role of multiparametric MRI in active surveillance has been defined, and nanotechnology offers the potential for better imaging biomarkers to monitor patterns of disease. This diversity of application is especially evident within cancer research, with a myriad of experimental anticancer strategies currently under investigation.

This review will focus specifically on the potential of metal-based nanoparticles to augment the efficacy of radiotherapy in CaP, a disease where radiotherapy constitutes a major curative treatment modality. Furthermore, we will also address the clinical state of the art for CaP radiotherapy and consider how these treatments could be best combined with nanotherapeutics to improve cancer outcomes.
(1.8–2 Gy) fractions, have demonstrated 5-year biochemical progression-free survival of 64–80.4%. These studies have demonstrated improved biochemical control compared with lower doses of EBRT at the expense of higher rates of bowel and urinary toxicity. EBRT requires linear accelerators capable of producing photon energy spectrums commonly peaking at 6 or 10 MV to deliver an adequate radiation dose to the prostate gland, which is situated centrally within the pelvis. Pre-clinical studies have suggested that metal nanoparticle sensitization occurs even at megavoltage (MV) energies, where Compton effects dominate.

BT is radiotherapy using sealed radioactive sources placed next to the skin, inserted into a body cavity or, through needles, into tissues (interstitial BT). There are compelling reasons for utilizing metal nanoparticles with kilovoltage (kV) photon energies where the photoelectric effect is dominant [energy deposited — atomic number ($Z^4$)], a concept supported by several theoretical studies (Figure 1). BT commonly utilizes kV radiation sources, for example iodine-125 ($^{125}\text{I}$; 35.5 keV γ-rays, $t_{1/2}$ 30 days), and has been shown to result in excellent biochemical control rates of 75–98% at 5 years. The direct placement of permanent radioactive sources into the prostate gland increases conformity of treatment compared with EBRT, resulting in enabling delivery of higher doses of radiation to the prostate with acceptable normal tissue toxicity. High-dose-rate (HDR) BT is commonly combined with EBRT in patients with unfavourable intermediate risk CaP (Gleason 4+3, >50% positive cores). An iridium-192 ($^{192}\text{Ir}$; 205–612 keV γ-rays, $t_{1/2}$ 74 days) source is commonly used for treatment. With this approach, a single 15-Gy treatment of HDR BT was combined with 37.5 Gy in 15 fractions of EBRT resulting in 97% of patients becoming disease free at 5 years.

Radiotherapeutic advances in metastatic CaP have paralleled those in localized disease. Technological advances have enabled the development of SABR for areas of oligometastatic disease, delivering radical doses of radiation in a small number of

![Diagram](https://birpublications.org/bjr)
treatment fractions. The α-emitter radionuclide radium-223 has been shown to prolong survival compared with the best supportive care (14.9 vs 11.3 months; HR, 0.70; p = 0.002) in patients with metastatic castrate-resistant CaP. This systemic treatment is administered intravenously, accumulating at sites of bony metastatic disease and delivering highly damaging low-range α particles to these sites. Multifunctional nanoparticles utilized as drug delivery agents could enhance the specificity and effects of current systemic therapies used in CaP.

Although IG-IMRT has reached unprecedented levels of accuracy, there is significant potential for further improvement of radiotherapy delivery with the use of MRI. MRI simulation has a number of benefits over computerized tomography for treatment planning, enabling dose estimation in deformable soft tissues. It is likely that dose-painting and adaptive radiotherapy approaches will become the standard of care in the near future. International efforts are ongoing to develop an MRI-linac system for online, real-time soft-tissue image guidance. Multi-functional gadolinium (Gd)-based agents that can be used for image contrast and radiation enhancement have significant potential to deliver innovative approaches in radiation oncology that may translate to human health gains.

Figure 2. A schematic representation of a bi-functionalized, polyethylene glycol (PEG) stabilized gold-based nanoparticle (AuNP) including a variety of prostate cancer-specific active targeting moieties. NHS, N-hydroxysuccinimide.
enhanced imaging capabilities of these preparations are clearly evident in the highly phagocytic environment of the liver, spleen and bone marrow, their application is limited with respect to the ultrasensitive detection of CaP for both localized disease and more specifically micrometastasis. To address this, several iron oxide nanoparticle (ION) preparations have been functionalized with CaP-targeting ligands with the aim of elevating intratumoral nanoparticle accumulation. Prostate-specific membrane antigen (PSMA) is a valid target for specific CaP targeting. While normal prostate epithelium tissue expresses alternative cytosolic splice variants of PSMA, the transmembrane form is significantly elevated in CaP tissue, and has been shown to increase with Gleason grade. Importantly, this mechanism for CaP tumour selectivity is not restricted to the primary tumour, with lymph node and bone metastatic deposits in the castrate-resistant setting also exhibiting elevated PSMA expression.

Recently reported, Tse et al have recently developed an antibody (J591)–iron oxide conjugate designed to target an extracellular epitope of PSMA, with the aim of developing a superior CaP-MRI contrast agent. The specific targeting efficacy of J591 was well established from earlier radio-labelled J591 studies. The focus of the present study was to determine that antibody conjugation did not impair targeting efficacy, along with demonstrating improved tumour-specific MRI contrast and minimal cytotoxicity. Using an orthotopic LNCaP (PSMA-expressing) xenograft model, the authors reported strong negative contrast following intravenous (i.v.) injection of J591-IONs at a concentration of 6 mg kg\(^{-1}\) within 2 h. Furthermore, nanoparticles were retained within the tumour for at least 24 h of administration; effects that were not achieved using stabilized, untargeted control preparations. This pre-clinical study clearly demonstrates the advantage of active targeting approaches rather than depending on passive accumulation owing to the enhanced permeability and retention (EPR) effect. However, it should be noted that significant quantities of both passive and targeted nanoparticles were observed post-mortem within the spleen, indicating that stealth strategies could be further optimized to increase circulation time and, as a direct consequence, tumour loading.

PSMA-targeted IONs as thermal therapy agents have also been recently reported. Using an alternative chemical synthesis procedure, ionized nanoferrite clusters were stabilized using polyethylene glycol (PEG) and targeted with a pre-validated procedure, bionized nanoferrite clusters were stabilized using recently reported. Using an alternative chemical synthesis procedure, PSMA-targeted IONs as thermal therapy agents have also been loading.

Iron possesses a relatively low atomic number (Z = 26), unlike metals with higher atomic numbers such as Gd (Z = 64), platinum (Z = 78) and gold (Au; Z = 79); as such, the magnitude of the mass absorption coefficient and subsequent amplification of radiation effects (radiosensitization) is expected to be limited. Despite this, several authors have reported significant in vitro CaP radiosensitization using both kV and MV X-ray sources. Cross-linked dextran-coated IONs were avidly endocytosed by both HeLa and EMT-6 cells, producing a maximum reduction in cell viability of 18% following 48 h of coculture with the nanoparticles. The significance of this relatively low-toxicity profile is further heightened when considering the radiosensitization potential, generating mean radiation dose enhancement factors (DEFs) of 1.43 and 1.36 in HeLa and EMT-6 cells, respectively. Subsequently, Khoei et al reported DEFs of 1.22 following megavoltage irradiation in DU145 CaP cells in vitro, using a chemically analogous nanoparticle. This provided proof-of-concept data that nanoparticles with an iron oxide core could potentially prove beneficial using clinically applicable radiation sources, while limiting the off-target effects associated with hyperthermia. Licensed clinical examples of such preparations that include Feridex and Resovist are already in clinical use as contrast agents.

Gadolinium-based nanoparticles

Current MRI techniques rely on the i.v. injection of a paramagnetic contrast agent most commonly based on Gd chelates, as Gd has even unpaired electrons and a relatively long relaxation time. Most of these agents are Gd chelates, such as Gd-diethylenetriaminepenta-acetate (Gd-DTPA), which are non-diffusible blood pool tracers captured soon after bolus injection by haemodynamic signals depending on proton relaxation times and then transformed to an MR signal.

In addition to the paramagnetic features of Gd ions, their relatively high atomic number suggests they may offer additional advantages as radiosensitizers at MV energies. In terms of the development of Gd-based nanoparticle platforms for improved MRI and radiotherapy, recent studies have synthesized crystal-line nanoparticles, polymeric micelles or functionalized different types of nanoparticles with Gd chelates or ions.

Gd-based radiosensitization has classically been demonstrated by Gd(II) texaphyrin (Gd-tex), a porphyrin-like macrocycle that forms highly stable complexes with metal cations. Gd-tex has been shown to be well tolerated in a Phase-1 single-dose trial and has been investigated as a radiotherapy adjuvant in later phase trials for advanced solid malignancies of the brain, lung and prostate. A number of Gd-based nanoparticle platforms have demonstrated potential for enhancing both MRI contrast and radiotherapy efficacy. Tokumitsu et al have developed Gd-loaded
chitosan nanoparticles composed of Gd-DTPA and chitosan, a naturally occurring biocompatible polysaccharide, for use in Gd neutron capture therapy that utilizes γ-rays and electrons emitted from \(^{157}\text{Gd} \,(n,\gamma) \,^{158}\text{Gd}\) decay. These particles have shown high cell affinity in vitro and significant tumor growth delay by neutron capture reaction when delivered by intratumoral injection in mice bearing B16F10 malignant melanoma tumors.

Tillement and co-workers\(^59\) have developed the AGuIX\(^\circ\) nanoparticle platform consisting of sub-5 nm Gd chelates (either diethylenetriaminepenta-acetate or 1,4,7,10-tetra-azacyclododecane-1-glutaric acid-4,7,10-triacetic acid covalently bonded to a polysiloxane matrix) (Figure 3). Preclinical studies have demonstrated tolerability and excellent biodistribution patterns for diagnostic and therapeutic purposes.\(^59\) These findings have been accompanied with demonstrations of radiosensitizing effects with DEFs from 1.1 to 2.5 in a range of tumor models including the prostate.\(^16,60\)

These experimental studies demonstrating Gd as a radiation sensitizer are further supported by a recent Monte Carlo simulation study. Zhang et al\(^65\) calculated DEFs as a function of Gd concentration for 6-MV photons with and without the use of a flattening filter and for HDR BT with an iridium-192 source. The study predicted concentration-dependent dose enhancement for Gd-containing materials in HDR BT and 6-MV flattening filter-free EBRT at concentrations >5 mg ml\(^{-1}\), higher than those currently used in the clinic.

Gold-based nanoparticles

Few inorganic core materials have attracted as much attention as Au, an effect largely owing to its physical characteristics that include biocompatibility, ease of production, functionalization, large surface area and superior mass energy absorption owing to its high atomic number relative to soft tissue. The latter property warrants the development of Au-based nanoparticles (AuNPs) as effective X-ray contrast agents. Diagnostic X-ray imaging is
towards bombesin (BBN) peptides. Chanda et al. developed BBN conjugated AuNPs to specifically improve image contrast of prostate tumours. In vitro assessment of AuNP-BBN receptor binding using radiiodinated displacement assays demonstrated gastrin-releasing peptide receptor specificity, with IC₅₀ (minimum 2.45 μg ml⁻¹) concentrations inversely correlated with AuNP surface coverage of the peptide. Furthermore, intraperitoneal administration of the nano-conjugate was shown to limit the uptake by the reticuloendothelial compartment, thereby extending the circulation time and tumour accumulation. This resulted in a significant and prolonged (up to 48 h) post-administration increase in X-ray contrast, highlighting the potential benefit of molecular targeted nanotherapeutics.

As described previously, PSMA is an attractive target for CaP molecular therapeutics. AuNPs functionalized with doxorubicin-loaded aptamers have been developed for both diagnostic and therapeutic applications. LNCaP cells expressing the PSMA receptor exhibited a 4-fold increase in CT intensity (Hounsfield units: LNCaP-130 HU vs PC3-28 HU) relative to PC3 cells lacking PSMA receptors. In addition, therapeutic efficacy of drug-loaded nanoparticles was reported to produce equivalent reductions in cell viability in PSMA-expressing cells as equimolar quantities of free doxorubicin. Recently, the high electron dense properties of Au have been exploited to develop a superior radio-opaque fiducial system. As with other nanoparticle preparations, surface modifications have been refined to improve targeting and therapeutic efficacy. Gastrin-releasing peptide receptors are highly expressed on various tumour types, including breast and prostate carcinomas, and exhibit a high binding affinity towards bombesin (BBN) peptides. Chanda et al. developed BBN conjugated AuNPs to specifically improve image contrast of prostate tumours. In vitro assessment of AuNP-BBN receptor binding using radiiodinated displacement assays demonstrated gastrin-releasing peptide receptor specificity, with IC₅₀ (minimum 2.45 μg ml⁻¹) concentrations inversely correlated with AuNP surface coverage of the peptide. Furthermore, intraperitoneal administration of the nano-conjugate was shown to limit the uptake by the reticuloendothelial compartment, thereby extending the circulation time and tumour accumulation. This resulted in a significant and prolonged (up to 48 h) post-administration increase in X-ray contrast, highlighting the potential benefit of molecular targeted nanotherapeutics.

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Despite the presence of multiple in vitro studies demonstrating AuNP radiosensitization, there is very little in vivo pre-clinical evidence supporting their use in CaP treatment. At the time of writing, to the authors’ knowledge, only one group has published in vivo efficacy. Wolfe et al73 developed targeted Au nanorods (AuNRs), conjugated with bifunctional PEG chains terminated with a zwitterionic goserelin peptide. Tumours were actively targeted using goserelin, a synthetic analogue of luteinizing hormone-releasing hormone (LHRH) that binds with high affinity to the LHRH receptors overexpressed on prostate tumours. Further increasing the clinical relevance of this study, radiation treatments were delivered using 6-MV X-rays. Goserelin-targeted AuNRs conferred a significant dose enhancement of 1.32 over radiation only and 17% increase over the unfunctionalized nanoparticle. The importance of this differential between targeted and untargeted AuNRs was further heightened in vivo. Radiosensitization efficacy, defined by delay in the time for subcutaneous PC3 tumours to triple in volume, was extended by 17±1 day in the goserelin-targeted AuNR treatment group compared with radiation only, whereas the untargeted AuNRs accumulating by passive targeting only (EPR) produced no significant delay in tumour growth over radiation only. Furthermore, no significant treatment-related adverse events were reported.73 Owing to the relative simplicity, lack of toxicity and therapeutic efficacy of this approach, considered in tandem with the frequency of use of external EBRT in CaP, this strategy appears to represent the most likely translation of nanoparticles into regular clinical use.

CONCLUSIONS

The radiotherapeutic management of CaP is rapidly changing with IG-IMRT now the standard of care, increasing evidence for combination strategies with BT and ADT and the emerging role of MRI, dose-painting and adaptive treatment strategies. In parallel, rapid advances in metal nanoparticle synthesis, targeting and manufacture are occurring. The integration of these exciting advances should enable improvement in the management of CaP in the years to come.

REFERENCES


3. Keall PJ, Barton M, Crozier S: Australian MRI-linac Program, including contributors from Ingham Institute, Illawarra Cancer Care Centre, Liverpool Hospital, Stanford University, Universities of Newcastle, Queensland, Sydney, Western Sydney, and Wollongong. The Australian magnetic resonance imaging-linac program. Semin Radiat Oncol 2014; 24: 203–6. doi:10.1016/j.sradonc.2014.02.015


Review article: Potential applications of metal nanoparticles for therapy


