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Effect of edetate calcium disodium on yttrium-90 activity in bone of mice

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The kinetics of Yttrium-90 (Y-90) in bone of mice was investigated in combination with edetate calcium disodium (CaNa₂EDTA). One group of mice were intraperitoneally administered 37.5 mg/kg CaNa₂EDTA or 0.9% NaCl as a control at 1, 22, 34, 46, 58, 70, 82, 94, 154 and 166 h after injection of Y-90 acetate (post-administration), and the biodistribution was studied at 3, 24, 72, 120 and 168 h postinjection of Y-90 acetate. No difference between the post-CaNa₂EDTA-treated mice and the control was demonstrated in the radioactivity in the bone. A decrease in radioactivity in the liver and kidneys was accelerated, and the radioactivity was lower than the control at 120 h postinjection. The other group of mice were also given the same dose of chelator at 12 h and 1 h preinjection of Y-90 acetate and at 1, 22, 34, 46, 58, 70, 82, 94, 154 and 166 h after injection of Y-90 acetate (pre- and post-administration), the radioactivity in bone at 3 h postinjection was significantly lower than in the control (24.4 \pm 3.92% ID/g vs. 31.7 \pm 2.26% ID/g, p < 0.05), but the decrease was not sequential. A significant reduction in radioactivity in the blood, kidneys and liver was demonstrated at 3 h, 72 h and 72 h postinjection. In conclusion, the CaNa₂EDTA with the administration schedule employed here cannot chelate the Y-90 from bone but the free Y-90 before deposition into bone.

Key words: edetate calcium disodium, bone uptake

INTRODUCTION

YTTRIUM-90 (Y-90) is a candidate radionuclide for radioimmunotherapy because of its high maximum energy of 2.3 MeV, long-range beta-emitting character (maximum tissue penetration of nearly 1 cm with 80% of the energy deposited in the first 4 to 5 mm), and half-life of 64.1 h but Y-90 dissociated from Y-90-labeled-monoclonal antibody (MAb) specifically accumulates in bone. 1-6 The bone uptake of Y-90 may cause myelosuppression, and prevent its therapeutic potential from being realized. The use of a therapeutic chelating agent for heavy metal poisoning, edetate calcium disodium

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(CaNa₂EDTA), to suppress the undesirable radioactivity in bone, was investigated.⁷ The administration of CaNa₂EDTA reduced the radioactivity in bone and safely allowed the dose of Y-90-labeled-MAb to be increased to a sufficient level for therapy without severe myelosuppression.^{8,9} We have also confirmed the effect of CaNa₂EDTA on the radioactivity in the bone of tumorbearing nude mice with Y-90 labeled MAb¹⁰ but it was not clear whether the reduced radioactivity in the bone resulted from chelating of Y-90 from bone or from removal of free Y-90 that did not localize in bone. In this study, the kinetics of Y-90-activity in bone of mice was investigated in combination with CaNa₂EDTA, and the mechanism of CaNa₂EDTA-mediated reduction in radioactivity in bone is discussed.

MATERIALS AND METHODS

Animals

Female normal mice with a Balb/c background were

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obtained from the Institute of Experimental Animal Research, Gunma University School of Medicine at 4 weeks of age (16.5 g–18.7 g mouse body weight). The mice were allowed free access to commercial chow and distilled-deionized water during the experiment. The ambient temperature during the study was maintained between 21°C and 23°C, and the mice were exposed to a 12-h light, 12-h dark cycle. Animal studies were performed in compliance with relevant regulations relating to the conduct of animal experiments issued by Gunma University.

Effect of CaNa₂EDTA on biodistribution in normal mice injected with Y-90 acetate

One group of mice were slowly, intraperitoneally administered 37.5 mg/kg CaNa₂EDTA solution (Bleian Inj.®, Nisshin Pharmacy Co. Ltd., Yamagata, Japan) or an equal volume of 0.9% NaCl solution as a control at 1, 22, 34, 46, 58, 70, 82, 94, 154 and 166 h after intravenous injection of Y-90 acetate (740 kBq) (post-administration). The Y-90 acetate (925 MBq/mL) was prepared by mixing Y-90chloride in 50 mM HCl (1850 MBg/mL) (Nordion, Kanata, Ontario, Canada) with an equal volume of 1 M sodium acetate buffer, pH 5.8, for 30 min at room temperature. The other group of mice were slowly intraperitoneally administered 37.5 mg/kg CaNa₂EDTA solution or an equal volume of 0.9% NaCl solution as a control at 12 h and 1 h before and at 1, 22, 34, 46, 58, 70, 82, 94, 154 and 166 h after intravenous injection of Y-90 acetate (740 kBq) (pre- and post-administration). Every five mice were sacrificed by heart puncture under general anesthesia at 3, 24, 72, 120 and 168 h postinjection of Y-90 acetate. Circulating blood was then replaced by 0.9% NaCl with 0.01% heparin: the right atrium was cut while 0.9% NaCl with 0.01% heparin was mildly perfused into the left ventricle with a small syringe. The liver, kidneys, stomach, intestines, spleen, lungs, muscle (quadriceps) and bone (femur) were removed and cut into pieces weighing less than 200 mg. The radioactivity of each samples was counted in a NaI well-type gamma counter (Aloka, Tokyo, Japan) with an energy window ranging from 100 keV to ∞. The counting efficiency of the NaI well-type gamma counter in measuring Y-90 preparation was approximately 12%. A sufficient linearity between radioactivity and count rate was obtained when non-dissolved samples were below 200 mg in weight. Results were expressed as a percent injected dose/gram tissue (% ID/g) normalized to 20 g mouse. Serum calcium levels from blood of mice pre- and post-administered CaNa₂EDTA and 0.9% NaCl were measured at 168 h postinjection by the orthocresolphtalein complexone (OCPC) method to check for possible side effects of the chelator.

Data analysis

Statistical comparison of values was made by Student's unpaired t-test. Differences were considered statistically significant when a *p* value was less than 0.05.

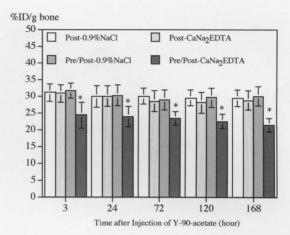


Fig. 1 Effect of post-administration and pre- and post-administration of CaNa₂EDTA on bony radioactivity in mice with Y-90 acetate. 0.9% NaCl was used as a control. *: p < 0.05 compared with the control.

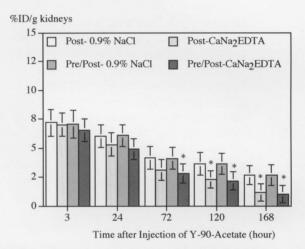
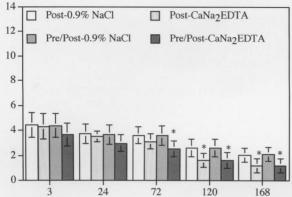


Fig. 2 Effect of post-administration and pre- and post-administration of CaNa₂EDTA on renal radioactivity in mice with Y-90 acetate. *: p < 0.05 compared with the control.

RESULTS

In the control mice, the radioactivity in the bone had reached a maximum level of approximately 30% ID/g at 3 h post-Y-90 acetate-injection, and the level showed no change for up to 168 h (Fig. 1). The radioactivity in the other normal tissues and blood decreased with time (Figs. 2–4). In the post-CaNa₂EDTA-treated mice, no change in the radioactivity of the bone was demonstrated compared to the control mice (Fig. 1). The reduction in Y-90 activity in the kidneys and liver was accelerated, and the radioactivity was significantly lower than the control at 120 h postinjection of Y-90 acetate (Figs. 2 and 3), but not the blood (Fig. 4), spleen, lungs, or muscle (data not shown). In the pre- and post-CaNa₂EDTA-treated mice, the radioactivity in the bone at 3 h postinjection was significantly





Time after Injection of Y-90-Acetate (hour)

Fig. 3 Effect of post-administration and pre- and post-administration of CaNa₂EDTA on hepatic radioactivity in mice with Y-90 acetate. *: p < 0.05 compared with the control.

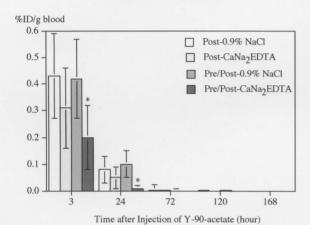


Fig. 4 Effect of post-administration and pre- and post-administration of CaNa₂EDTA on blood radioactivity in mice with Y-90 acetate. *: p < 0.05 compared with the control.

suppressed compared to the control mice (Fig. 1) but the bone radioactivity was not decreased further throughout the study (Fig. 1). The reduction in radioactivity in the blood, kidneys and liver was accelerated, and their radioactivity was lower than in the control at 3 h, 72 h and 72 h postinjection of Y-90 acetate (Figs. 2-4). There was no significantly accelerated reduction in the Y-90-activity in the other tissues (data not shown). No significant difference in the concentration of serum calcium was noted between the CaNa₂EDTA-pre- and post-treated mice and the control mice $(4.59 \pm 0.25 \text{ mEg/L vs. } 4.60 \pm 0.26 \text{ mEg/}$ L, respectively). There was no inflammation of the abdominal wall in any of the CaNa2EDTA-treated mice. No weight loss or other sign of toxicity was observed. No macroscopic change was observed in the kidneys of the mice.

DISCUSSION

CaNa₂EDTA-treatment has been reported to accelerate the elimination of yttrium-radioactivity in rabbits and to remove yttrium from the skeleton⁷ but our study did not demonstrate any chelating effect of CaNa2EDTA on the radioactivity in the bone of normal mice. There was a significant difference between the doses of CaNa₂EDTA and animal species employed in the two studies; approximately 460 mg/kg of CaNa₂EDTA once or twice a day was given to young rabbits after yttrium (1 h after Y-91 and daily for 9 days) in the former study whereas 37.5 mg/kg of CaNa₂EDTA twice a day was administered to 4week-old normal mice in the latter (our) study. The dose of 37.5 mg/kg twice a day is the clinically maximum daily dose for children, 11 and the CaNa₂EDTA-administration schedule in our study has no influence on serum metallic concentrations such as copper and lead in mice (data not published). Moreover, the introduction of pre-administration of CaNa₂EDTA effectively suppressed the radioactivity in the bone, but even the pre- and post-CaNa₂EDTA treatment could not chelate Y-90 from the bone. Therefore, it is acceptable that the binding of Y-90 to the bone matrix may be too tight to allow chelation by CaNa₂EDTA. The pre-administered chelate is speculated to be immediately available to clear free radioactivity. On the other hand, in the post-CaNa₂EDTA-treated mice, the radioactivity in the kidneys and liver was reduced. And the preand post-administration of CaNa₂EDTA was reduced earlier than with post-administration only. Earlier introduction of CaNa₂EDTA-administration was speculated to effectively reduce the radioactivity in the kidneys and liver, however, it is not so well understood how Y-90 distributes at the tissues that the exact mechanism of CaNa₂EDTA-mediated reduction in radioactivity is also unclear. In conclusion, the CaNa2EDTA with the administration schedule employed here cannot chelate the Y-90 from bone but can chelate the Y-90 before deposition into bone. In the pre- and post-CaNa₂EDTA-treated nude mice bearing tumors with Y-90 labeled MAb, the radioactivity in the bone may be successfully decreased by removing free Y-90 before its deposition into bone.

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