

# **PET Imaging of P-gp** efflux transporter at blood-brain barrier

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Graphic

## Outline of Talk

1. **P-gp (permeability glycoprotein) is an ATP-binding cassette (ABC) transporter. Located throughout body, P-gp affects distribution and excretion of its substrates.**
2. **Loperamide (Imodium®) is a potent opiate that acts on receptors in gut, but P-gp blocks its entry into brain.**
3. **[<sup>11</sup>C]desmethyl-loperamide (dLop) is also substrate for P-gp in mice, monkey, and man.**
4. **When P-gp is fully blocked, [<sup>11</sup>C]dLop has very high brain uptake (>50% single pass extraction) and is trapped in acidic vesicles.**
5. **[<sup>11</sup>C]dLop may measure function of P-gp in disease.**
  - **Increased function may cause drug resistance in cancer and epilepsy.**

# *Positron Emission Tomography*

Title slide from a slide show by Dr. Simon R. Chory, Ph.D.

*Positron Emission Tomography*  
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## PET vs. MRI

	PET	MRI
Spatial Resolution	2 – 6 mm	<< 1 mm
Sensitivity	$10^{-12}$ M	$10^{-4}$ M
Temporal Resolution	minutes	<1 sec

**Radionuclide ( $^{11}\text{C}$ ): high sensitivity**

**Ligand (raclopride): high selectivity**

**Radioligand [ $^{11}\text{C}$ ]raclopride: high sensitivity & selectivity**

## **P-glycoprotein (P-gp) Efflux Transporter**

1. Transports drugs out of cells in many locations – e.g., brain and testes
2. Specific component of blood-brain barrier
3. Loperamide (Imodium®) is a potent opiate that acts on gut to slow motility – but no actions in brain.
4. Over expressed in 40% of tumors resistant to chemotherapy

## **P-glycoprotein removes lipophilic substrates directly from the plasma membrane**

Graphic

[<sup>11</sup>C]dLop: brain uptake much higher in P-gp KO than in wild type mice

MRI, WT, and P-gp KO images showing this process.

Chart showing Conc Activity (% SUV) from 0 to 100 over Time (min) from 0 to 100 minutes. P-gp KO is at a much higher level (around 80% down to approximately 70% SUV at the end of the process) compared to WT (from around 40 % SUV down to approximately 12% SUV at the end of the process).

**P-gp blockade increases uptake of [<sup>11</sup>C]dLop in monkey brain but not in pituitary.**

PET monkey brain images showing the pituitary gland at baseline and at P-gp blockade (P-gp blocked with DCPQ)

## **[<sup>11</sup>C]dLop in Monkey Brain**

**P-gp blockade increases brain uptake but no effect on pituitary**

Two plots are shown. One is of the baseline showing radioactivity concentration (%SUV) from 0 to 400 over time after injection (min) from 0 to 125. The other plot shows DCPQ (8 mg/kg) radioactivity concentration (%SUV) from 0 to 500 over time after injection (min) from 0 to 125

## [<sup>11</sup>C]dLop: Distribution of radioactivity in healthy male

Radiographs showing distribution of radioactivity in the brain, lung, kidney, thyroid, spleen, liver, and urinary bladder over time (min) from 3 to 100.

**Summed early images  
(0 – 3 min) show  
blood pool.**

Radiograph showing this

# Minimal brain uptake of [ $^{11}\text{C}$ ]dLop in healthy human brain

PET, Fused, and MRI images illustrating this uptake.

Graph showing conc radioactivity (%SUV) from 0 to 50 over time after injection (min) from 0 to 100 for whole brain and whole brain-vascular corrected.

# What is this?

Comparison of PET, Fused, and MRI images

PET

FUSED

MRI

**Extended summed images (0 – 10 min) show  
blood pool and tissue accumulation.**

**Tarividar 6 mg/kg increases [<sup>11</sup>C]dLop by 250%,  
but “therapeutic” dose (2 mg/kg) by only 20%.**

Comparison of PET and MRI images at baseline and with  
Tarividar 6 mg/kg (%SUV) from 0 to 400.

Brain uptake of [ $^{11}\text{C}$ ]dLop  
increases in a dose-dependent manner after inhibition  
of P-gp

Plot showing brain uptake (%SUV · min) from 0 to 1500 over  
Tariquidar dose ( $\text{mg} \cdot \text{kg}^{-1}$ ) from 0 to 7. Brain uptake with 0 to 2  
Tariquidar dose ( $\text{mg} \cdot \text{kg}^{-1}$ ) is approximately 250 %SUV · min and  
then it rapidly rises to about 1000 %SUV · min at approximately 6  
Tariquidar dose ( $\text{mg} \cdot \text{kg}^{-1}$ ).

## Thesis Work of Pavitra Kannan

- [ $^{11}\text{C}$ ]dLop is a selective substrate for P-gp.
- Retention of [ $^{11}\text{C}$ ]dLop in brain probably reflects ionic trapping in acidic vesicles.

## **ABC transporters at the blood-brain barrier**

Graphic

**3 most common:**

- ABCB1 (P-gp)**
- ABCC1**
- ABCG2**

***Loscher et al. 2005. Nature Review  
Neuroscience. Drug resistance in brain diseases***

## **Accumulation of [<sup>3</sup>H]dLop is lowest in ABCB1 (P-gp) expressing cells**

Bar chart showing accumulation [<sup>3</sup>H]dLop (fmol / 10<sup>6</sup> cells) from 0 to 250 in a parental line and a resistant line of ABCB1, ABCG2, and ABCC1.

## **Uptake of [<sup>11</sup>C]dLop is highest in brains of P-gp knockout mice**

Plot of Conc radioactivity (%SUV) from 0 to 35 over time after injection (min) from 0 to 60

# **1. Brain uptake of [<sup>11</sup>C]dLop increases after P-gp inhibition and is trapped**

Plot of Pituitary and Whole brain by Conc radioactivity (%SUV) from 0 to 800 over time after injection (min) from 0 to 90

## Structure of dLop: weak base

# Hypothesis: lysosomal trapping

Graphic and chemical structure showing the weak base pKa ~ 8.0.

# Competition with other weak bases

Graphic depicting weak base 1 (displacer) and weak base 2 (substrate)

## Displacement of Lysotracker Red by other weak bases

PET images at Baseline, Weak Base 100  $\mu\text{M}$  Tamoxifen, Non-Base 10  $\mu\text{M}$  Taxol, 100  $\mu\text{M}$  dLop, and 500 nM Tariquidar.

What is organ above left kidney?

**Renal Cell Carcinoma:  
Tariquidar increases uptake of  $^{99m}\text{Tc}$ -  
Sestamibi  
in metastasis of thigh**

PET images at Baseline at 1 hour, 2 hours, and 3 hours and after Tariquidar at 1 hour, 2 hours and 3 hours.

Translocatorprotein (marker of  
neuroinflammatory cells) can localize  
epileptogenic focus

## Summary

- **P-gp (permeability glycoprotein) is an ATP-binding cassette (ABC) transporter. Located throughout body, P-gp affects distribution and excretion of its substrates.**
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- **[<sup>11</sup>C]desmethyl-loperamide (dLop) is also substrate for P-gp in mice, monkey, and man.**
- **When P-gp is fully blocked, [<sup>11</sup>C]dLop has very high brain uptake (>50% single pass extraction) and is trapped in acidic vesicles.**
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  - \* **Increased function may cause drug resistance in cancer and epilepsy.**

## Self-Assessment Quiz: True or False?

- Loperamide, an antidiarrheal drug, lacks central nervous system opiate effects because P-gp (Permeability-glycoprotein) blocks its entry into brain.
- Positron emission tomography (PET) can measure the function of P-gp *in vivo* by using a radiolabeled P-gp substrate such as [<sup>11</sup>C]loperamide.
- PET can monitor the *in vivo* metabolism of radioligands. By measuring P-gp function, PET can also monitor drug distribution.

## Disulfiram: Decreases Skull Activity & Increases Brain Uptake

PET images at Baseline and Disulfiram. Images at 2 h in same subject. Disulfiram 500 mg PO prior night.

Baseline

Disulfiram

**Images at 2 h in same subject. Disulfiram 500 mg PO prior night**