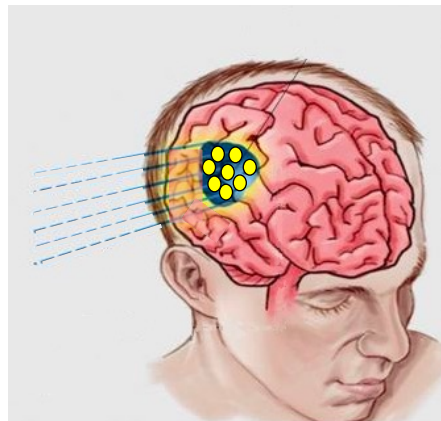


Refresh course ECMP

# Nanoparticles in diagnostics and therapy

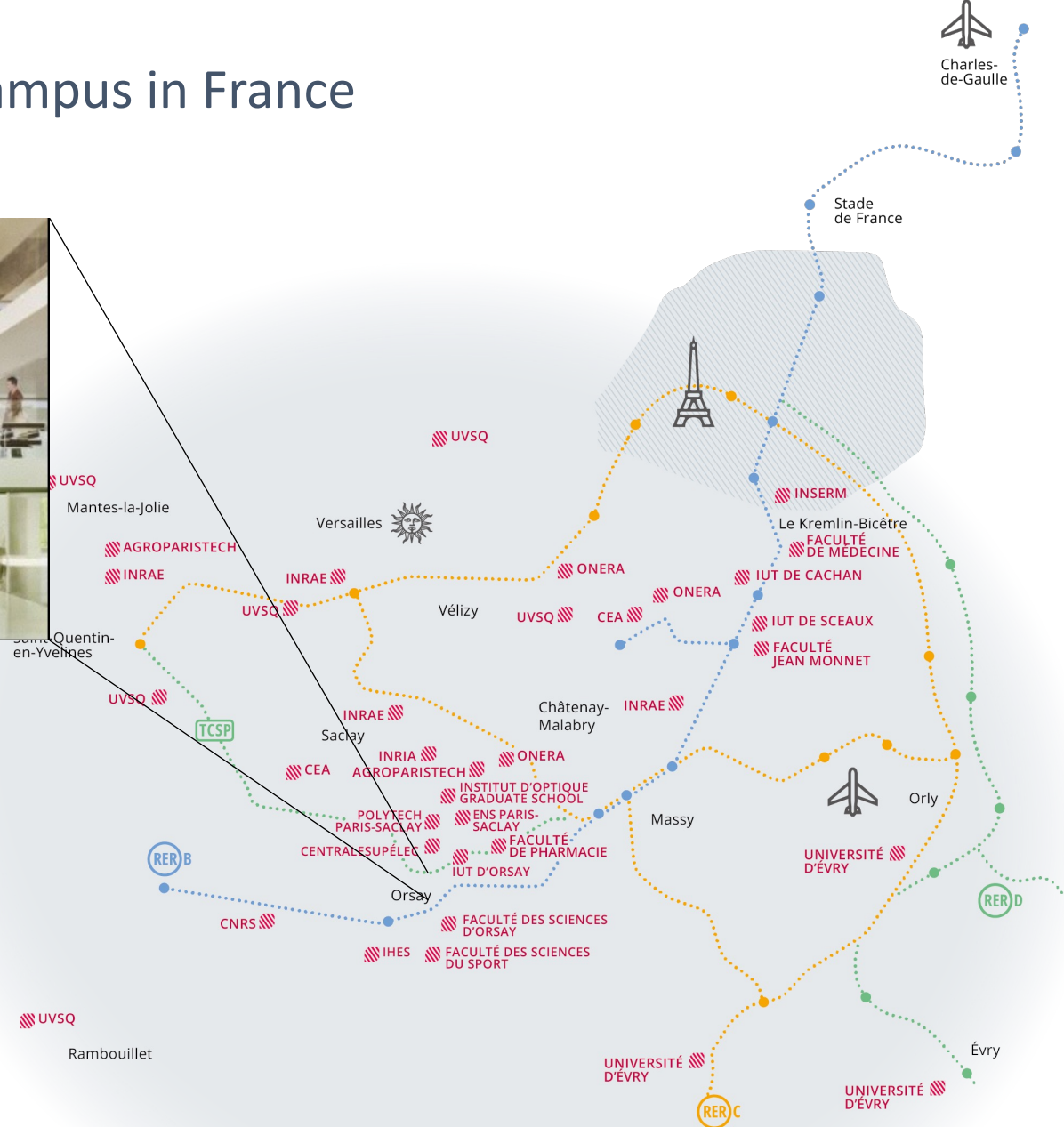
Sandrine LACOMBE, Prof, Hab.

*Univ. Paris Saclay, CNRS, Orsay, France*

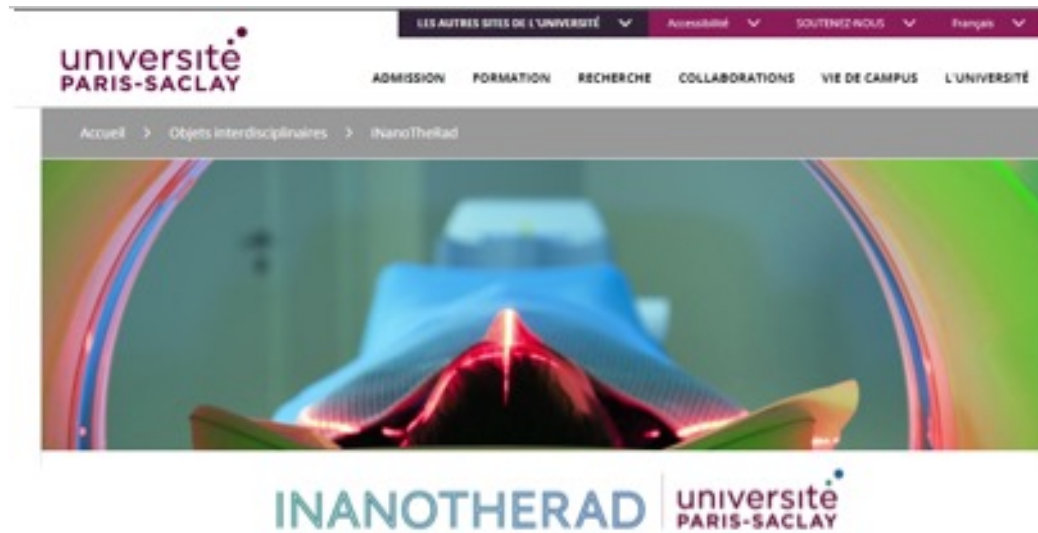


# U. Paris Saclay: largest campus in France

ARWU: 12; 1<sup>st</sup> in EU

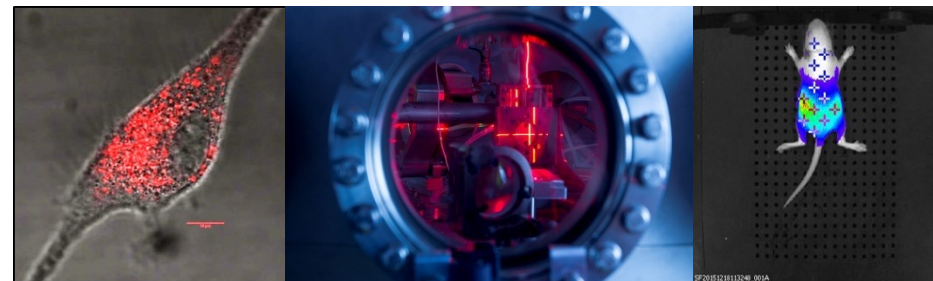


# Interdisciplinary center of Nanotechnologies and innovative Therapies with Radiations to treat cancer



<https://www.universite-paris-saclay.fr/en/objets-interdisciplinaires/inanotherad>

- ❖ 2 excellence centers of cancer research (Institute Gustave Roussy, Institute Curie)
- ❖ >15 labs, 150 researchers
- ❖ Multidisciplinary research, education, clinic
- ❖ Workshops and events



Contact: [Elodie.carpentier@universite-paris-saclay.fr](mailto:Elodie.carpentier@universite-paris-saclay.fr)  
Coordinator : [Sandrine Lacombe](#)

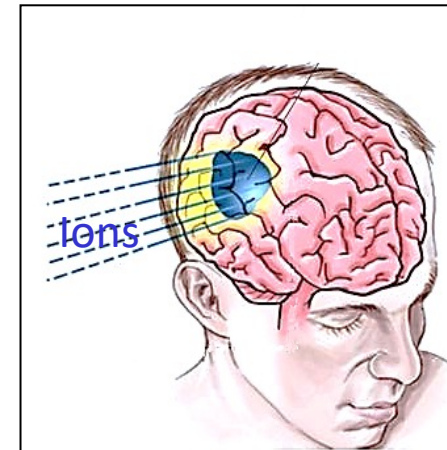
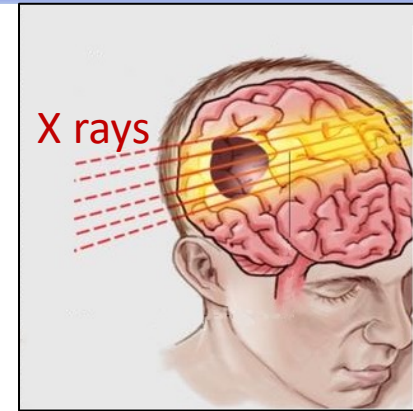
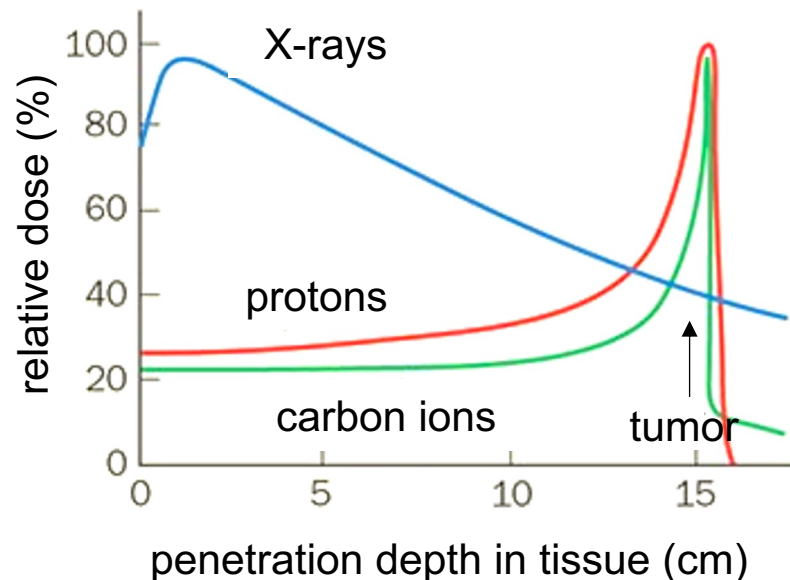
Radiotherapy : x-rays/ $\gamma$ -rays traverse the body

50% of the patients

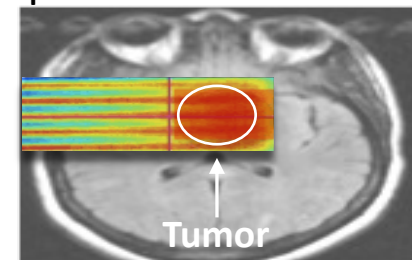
Non invasive but **side effects and radioresistance**

➤ New modalities to improve tumor targeting :

Ex: particle therapy, proton microbeams, FLASH (ultra high dose rate), VHEE (Very High Energy Electrons), Image guided RT ...

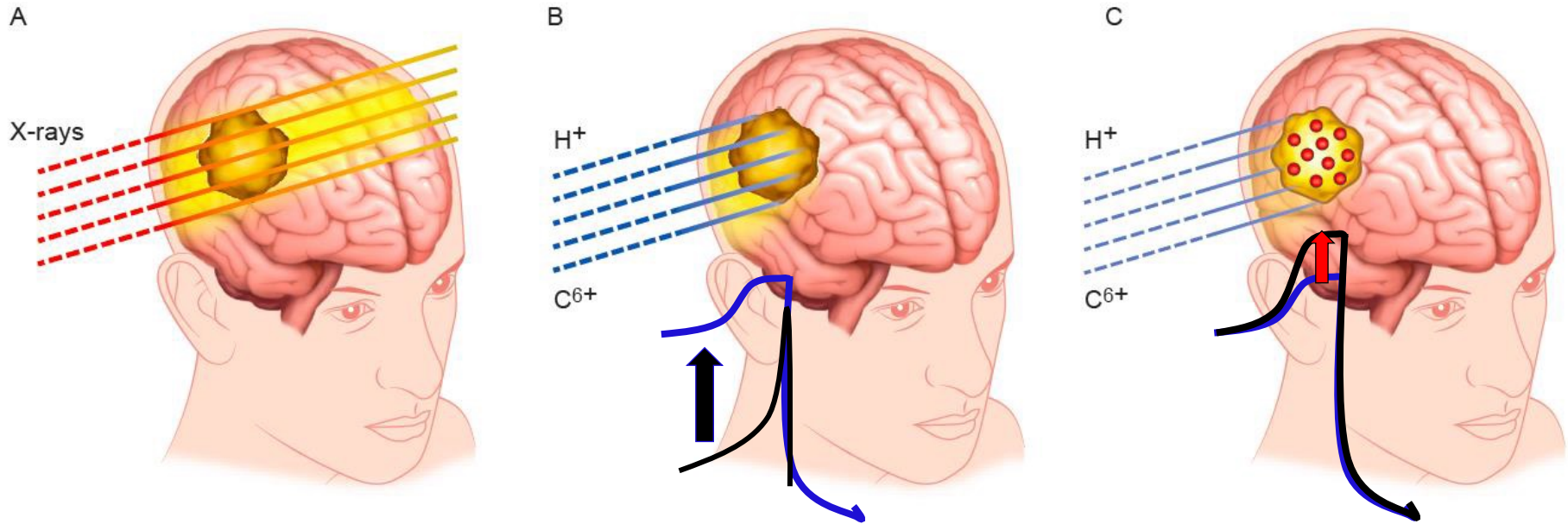


proton microbeams





# Challenges



→ Increase RBE at the tumor

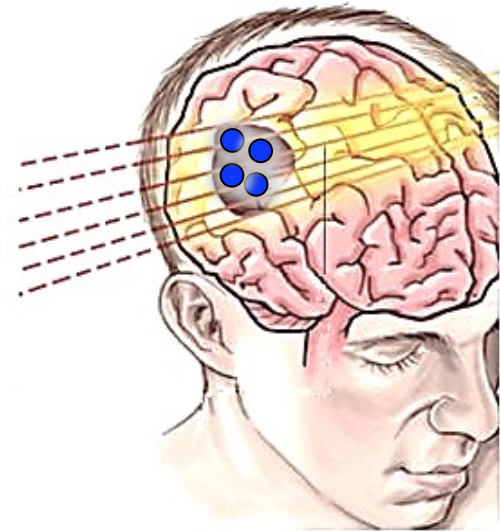
→ Decrease the total dose and thus damage at the entrance of the track

How???

## Improvement of RT with theranostic nanoparticles (NPs)

### How to improve radiation effects at the tumor?

- Sensitization of cells to radiation (radiosensitization) with drugs
- Amplification of electron emission at the tumor (**radioenhancement**)
- Improvement of **diagnostic**



### How to induce **radio-enhancement** ( = improve e- emission) ?

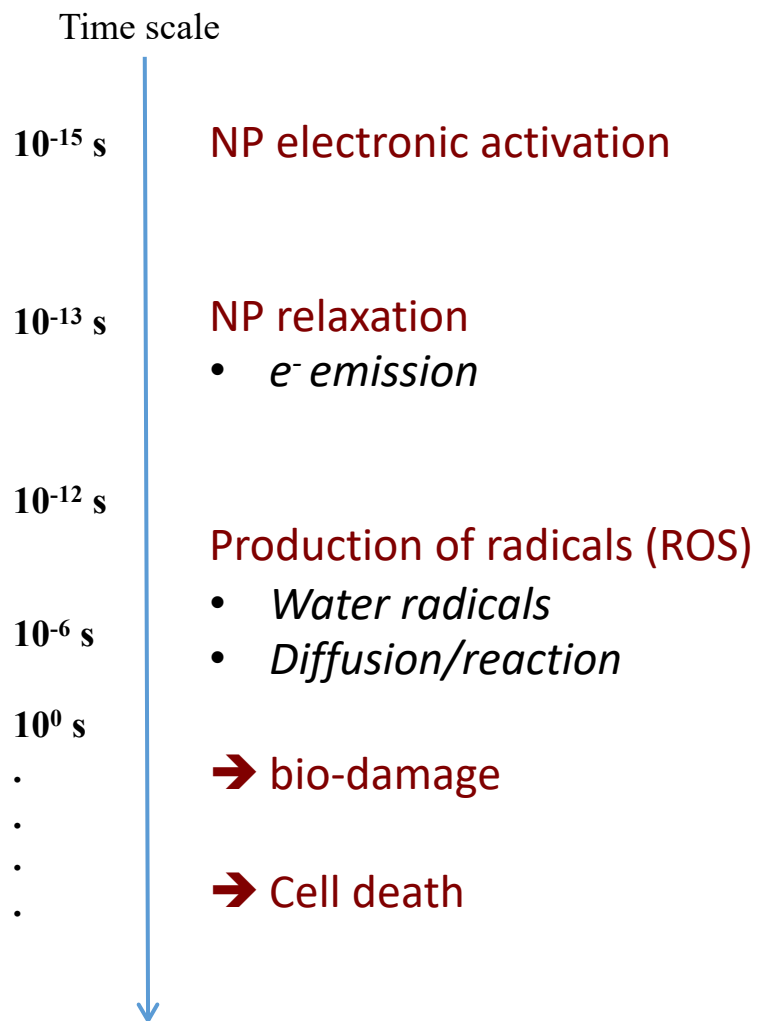
- Bring **high-Z** elements at the tumor

### Why **nanoparticles (NPs)** :

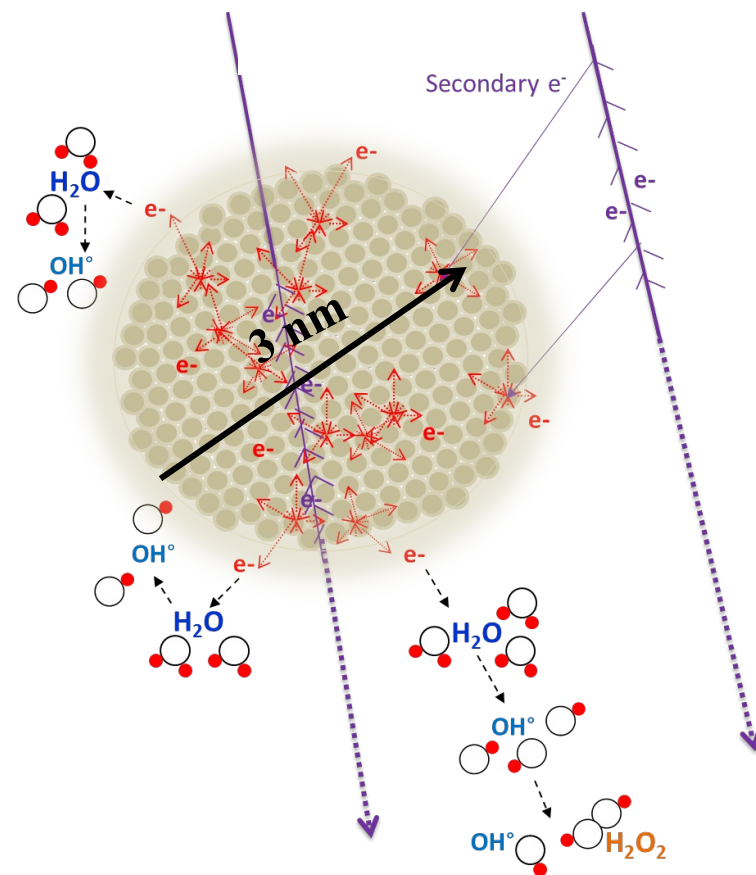
To bring **multimodality with the same nanoagent** to both image/diagnose the tumor and increase RBE at tumor

➔ **theranostic** = enhancement of radiation effect + medical imaging

## Early stage - Nanoscale mechanisms



Incident beam: photons, ions,  $e^-$



Foley, Guo et al., Chem Comm (2005)

Kobayashi et al Mutation Research (2010)

Porcel et al Nanotechnology (2010)

# How does radioenhancement work

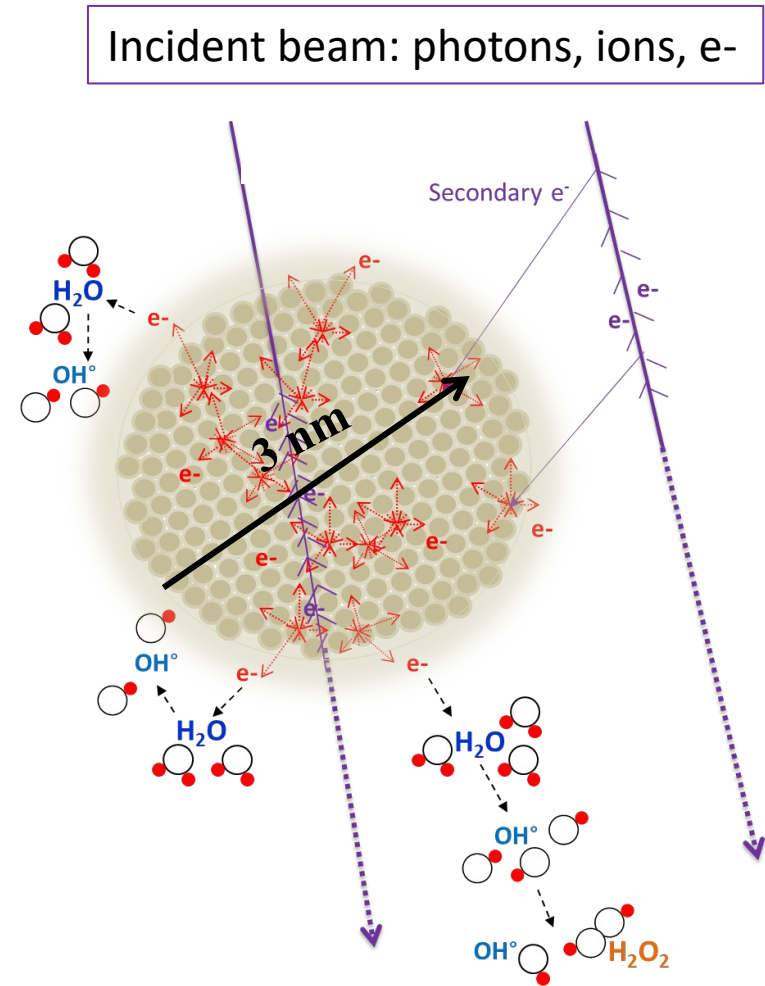
## Material:

- Good e-emitters: **high Z compounds**

Ex: Au (79), Gd (64), Hf (72), Fe (26) also Pt (78)

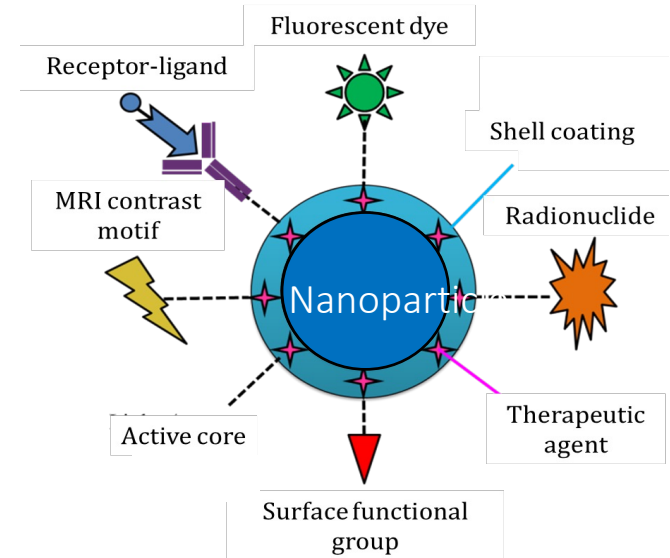
## Design:

- Metallic (AuNP) or oxides (HfO<sub>2</sub>) NPs Inorganic macromolecules (AGuIX, MOFs..)
- Micelles able to carry Metal/oxide





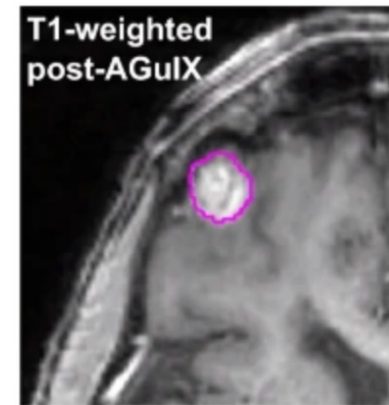
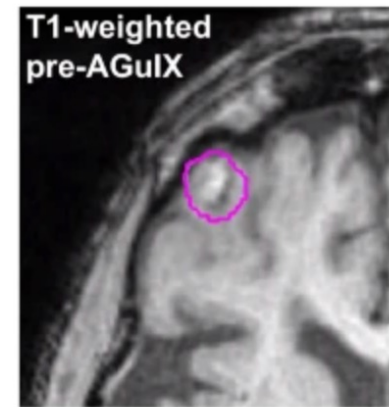
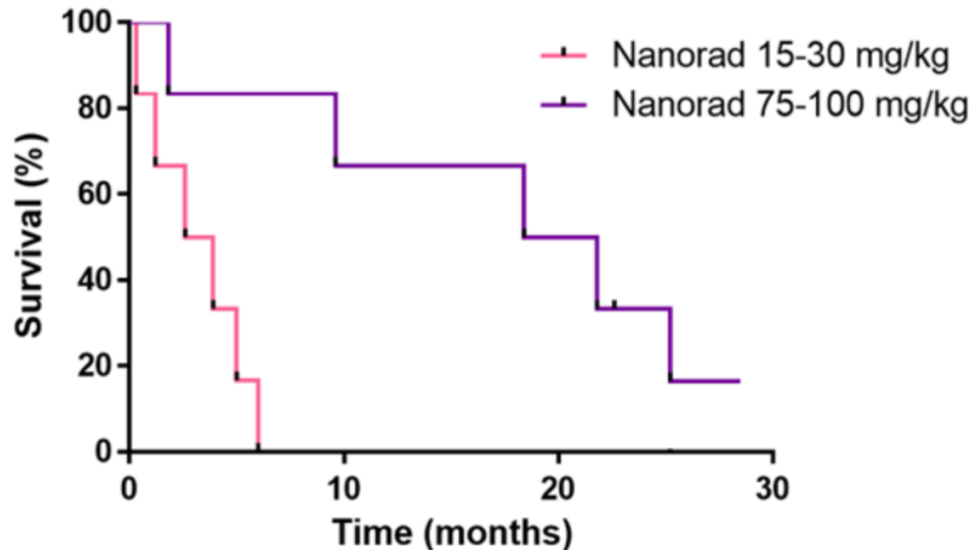
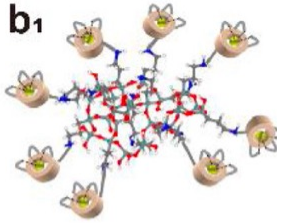
- ✓ Rich surface chemistry :
  - with **high Z materials** (ex: Au, Fe, Bi, Pt,)
  - **Contrast agents** (ex: Gd for MRI)
  - Radioisotopes (Zr for PET)
  - **drugs** (ex: gemcitabin, ...)
  - Fluorescent tags (optical microscopy)



Wang R et al. *Journal of Nanomaterials* 2012

Rizzo L et al. *Curr Opin Biotechnol* 2013

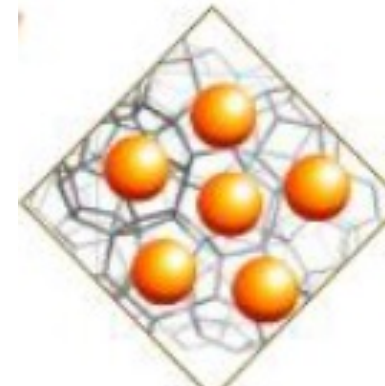
## Gadolinium based nanoagent - AGuIX– (@NHTheraguix) – IV injection



Courtesy R. Berbecco (D.F hospital, Boston), O. Tillement (Lyon 1)

Verry et al., Radiotherapy and Oncology 2021

- **gold** NPs – AuroShell (head & neck)
- SPIONs & **iron** oxide (pancreas)
- **hafnium oxide** NPs- NBTXR3 (@Nanobiotix) - **IT injection**



*Bonvalot et al, Lancet Oncol 2019*

NBTXR3, a first-in-class radioenhancer hafnium oxide nanoparticle, plus radiotherapy versus radiotherapy alone in patients with locally advanced soft-tissue sarcoma (Act.In.Sarc): a multicentre, phase 2–3, randomised, controlled trial

➡ Towards multimodal treatment, image-guided RT, and personalization

*Reviews: Anselmo. Bioeng. and transl. med. 2019*

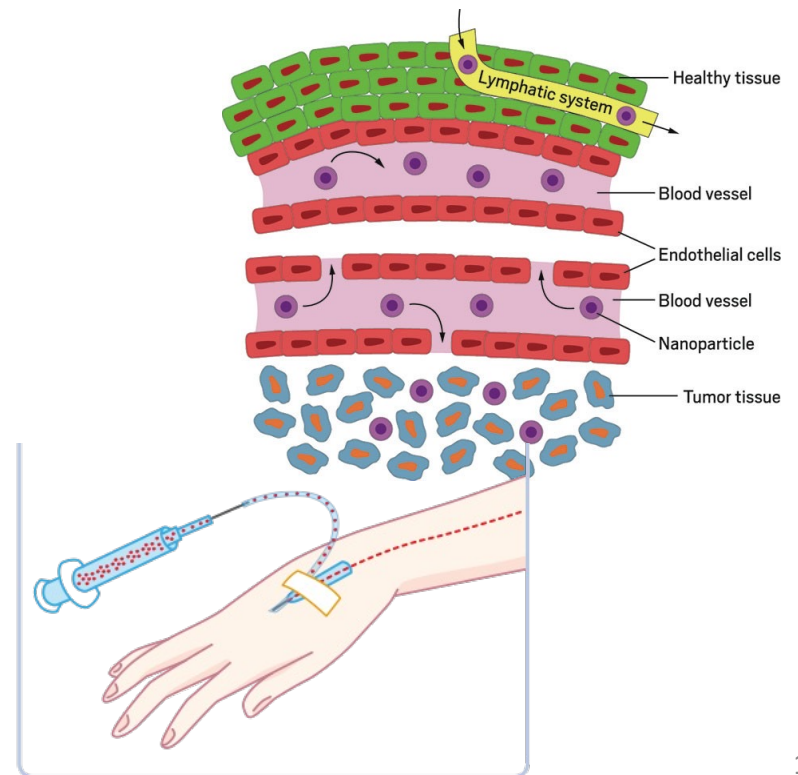
*Smith et al Cancer Nanotechnology 2022, Gerken et al ChemRxiv. Cambridge 2023*

## Intra tumoral injection:

- high concentration, high targeting
- but pain, no clearance, low repeatability

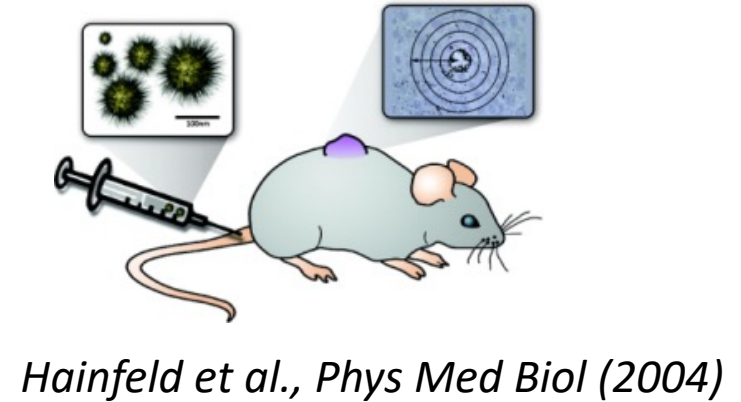
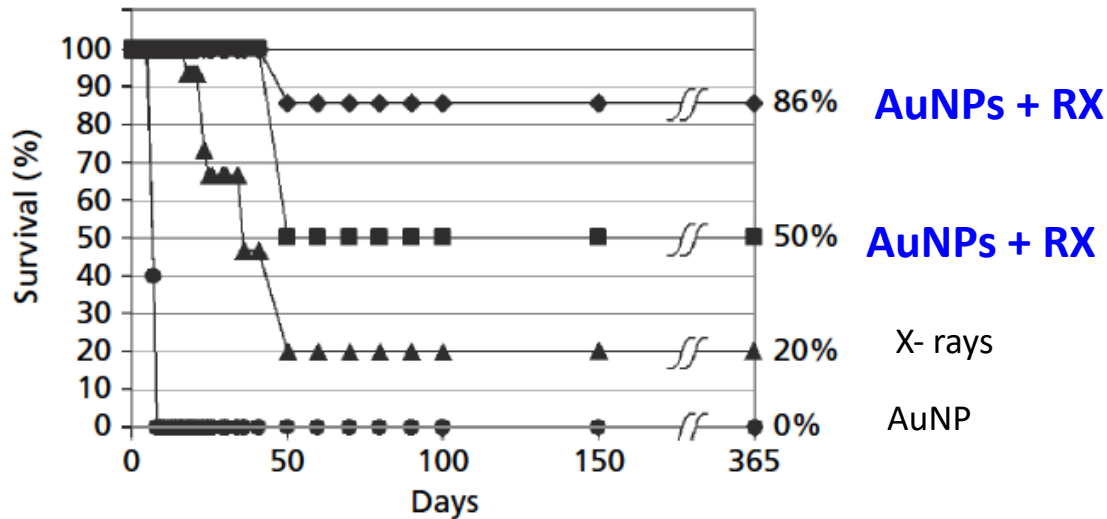
## Intravenous injection

- low pain, repeatability
- Tumor concentration by EPR effect  
(Enhanced Permeability and Retention effect:  
NP<20 nm)
- low concentration but clearance and low toxicity





## 200 kV x-rays combined with AuNPs (2004)



Higher survival in the presence of AuNPs

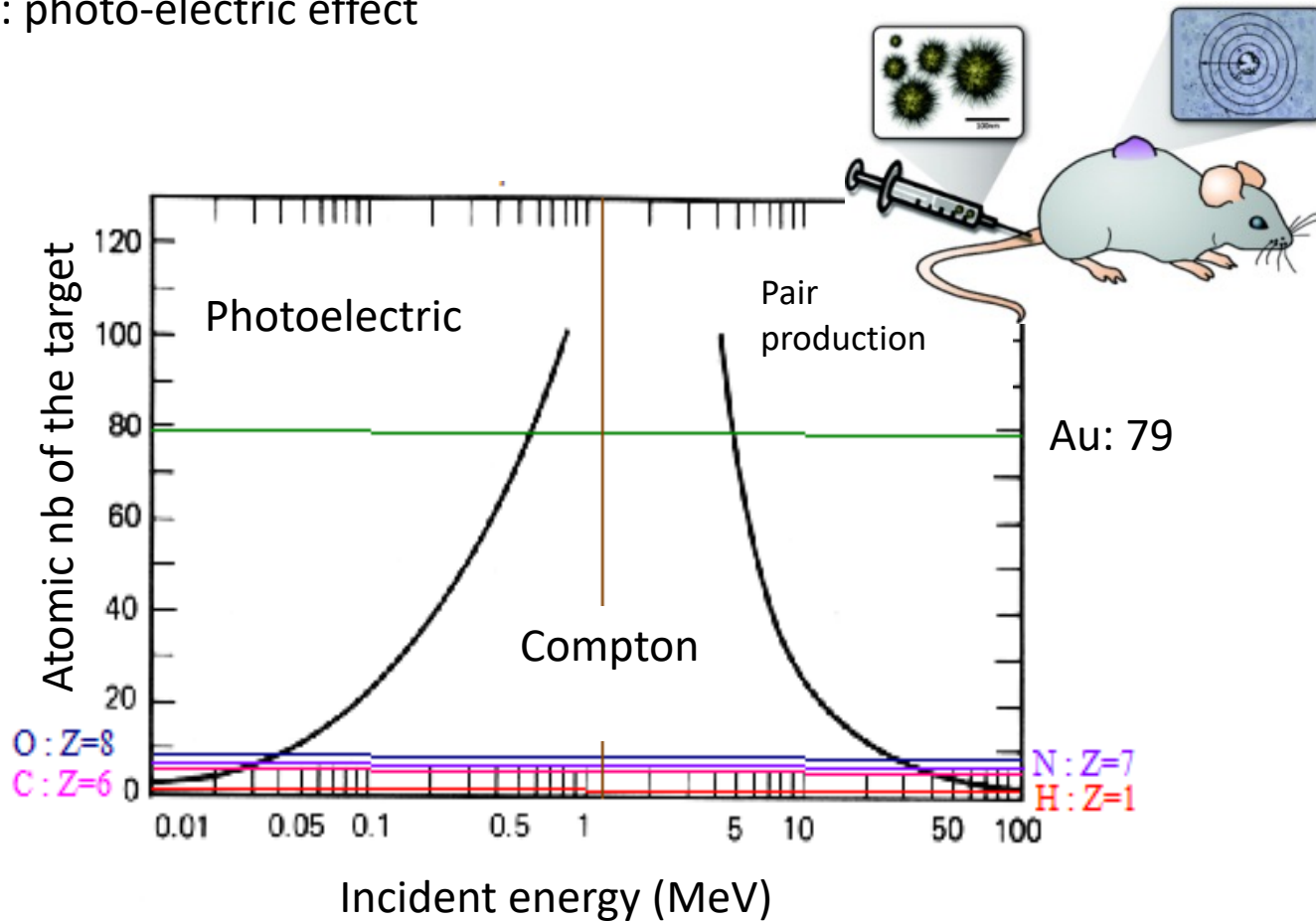
➤ Radioenhancement : amplification of radiation effect

Note: also observed with high-Z molecules

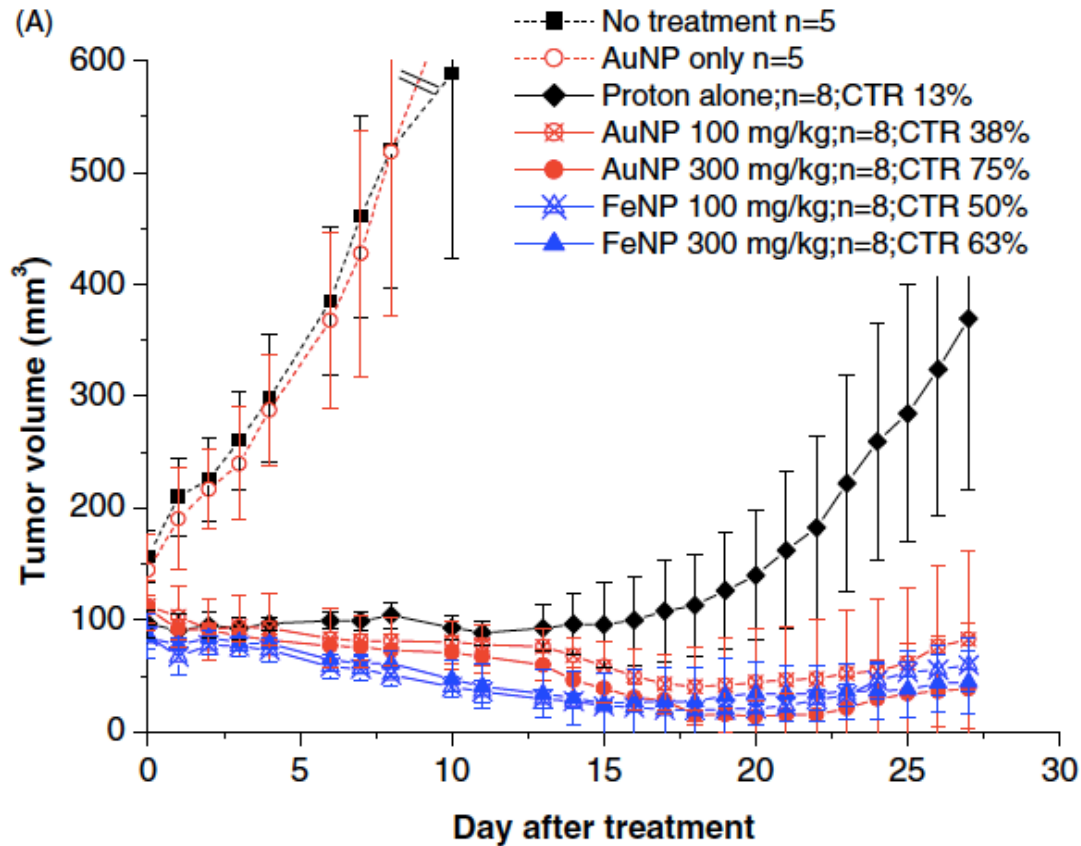
Kobayashi, LeSech et al, Rad.Res. **2002**

# Proof of concept

Mechanism : photo-electric effect

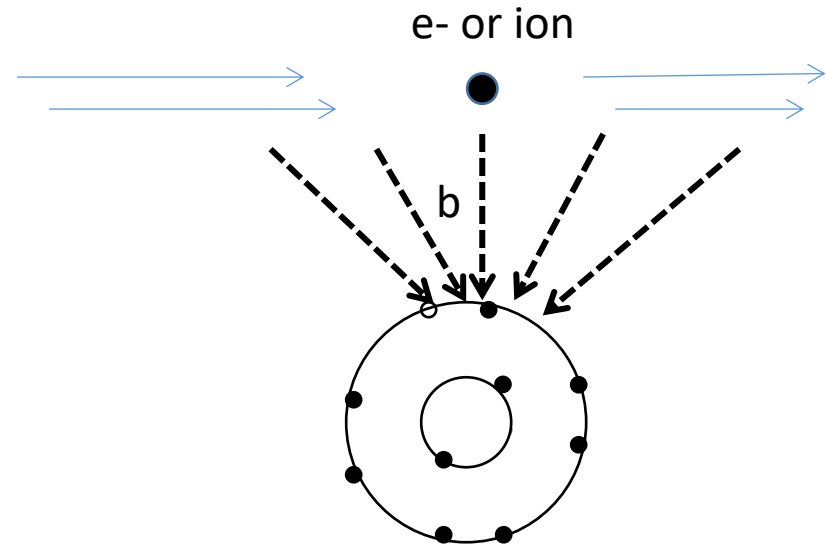


## Proof of concept with incident ions : 45 MeV proton beam combined with AuNPs, FeNPs

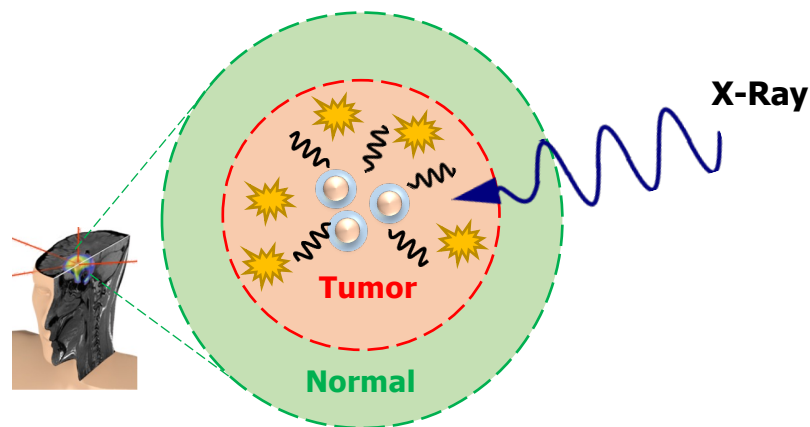


Decrease of the tumor volume in the presence of NPs

➤ NP radioenhancement effect with all types of incident radiation



- **Rich diversity in chemistry** (@environmental impact, low cost)
- **Stable in water and biological buffers**
- **Biocompatible & non toxic** (in cells but also in the blood stream)
- **Small size:** Compatible with IV (AGuIX: 4 nm)
- **Multimodal:** Electron emitter, Contrast agent, drug carrier...

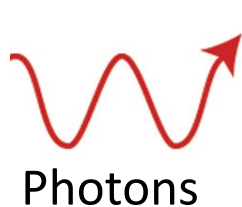
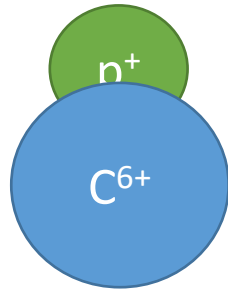




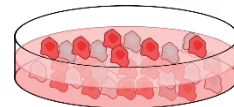
# Example of experimental roadmap for TH-NPs

- Synthesis, characterization of NPs
- in vitro (2D/3D) : Toxicity, localisation, and irradiation experiments
- in vivo : pharmacokinetics, toxicity, and irradiation experiments
- Prediction & modelisation/simulations: Quantification of nanoscale mechanisms
- Clinical trial

## Radiation source



## Targets



Human cells  
2D & 3D  
*Efficiency*



In vivo  
*Toxicity*  
*localisation*

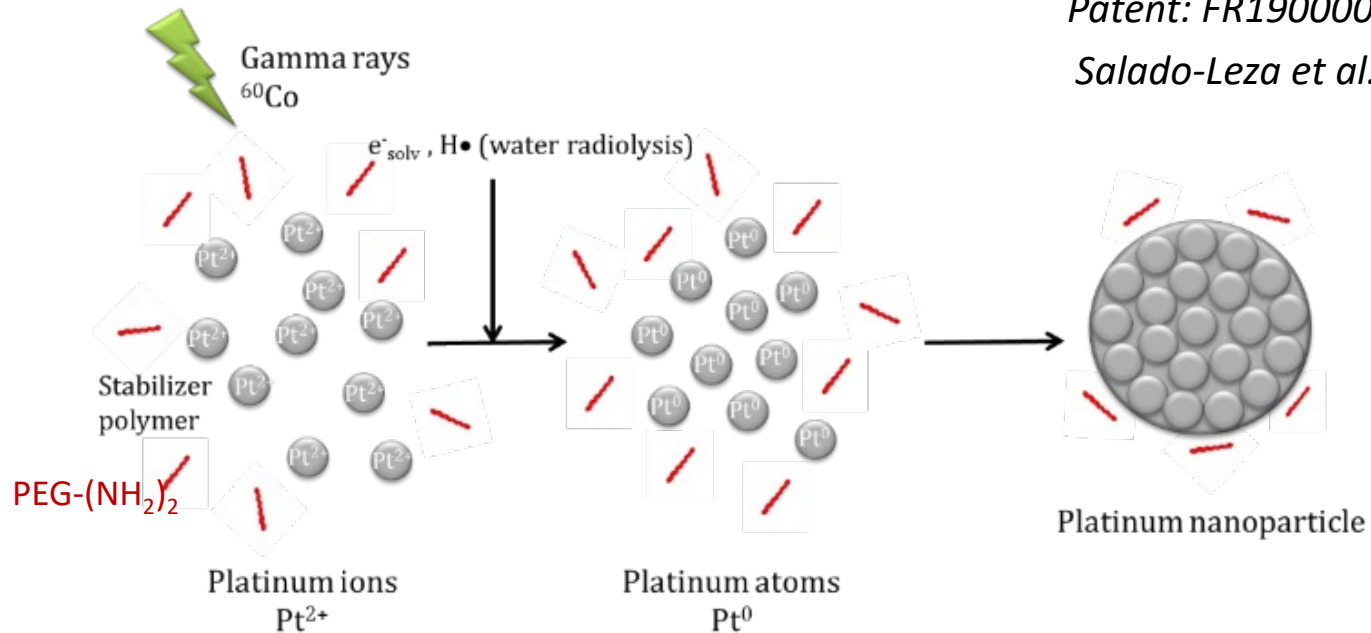
### Why Pt NPs :

- Platinum:  $Z=78$  a good e- emitter,
  - a compound already known by physicians (Cis Pt: chemotherapy)
  - Small  $\sim 10$  nm compatible with IV injection  $\rightarrow$
  - Biocompatibility, versatile, and adaptable to chemical functionalization
- $\rightarrow$  Functionalization with FDA approved PEG-(NH<sub>2</sub>)<sub>2</sub>

## Synthesis : one step process by water radiolysis

Patent: FR1900008 (in process for EU and US)

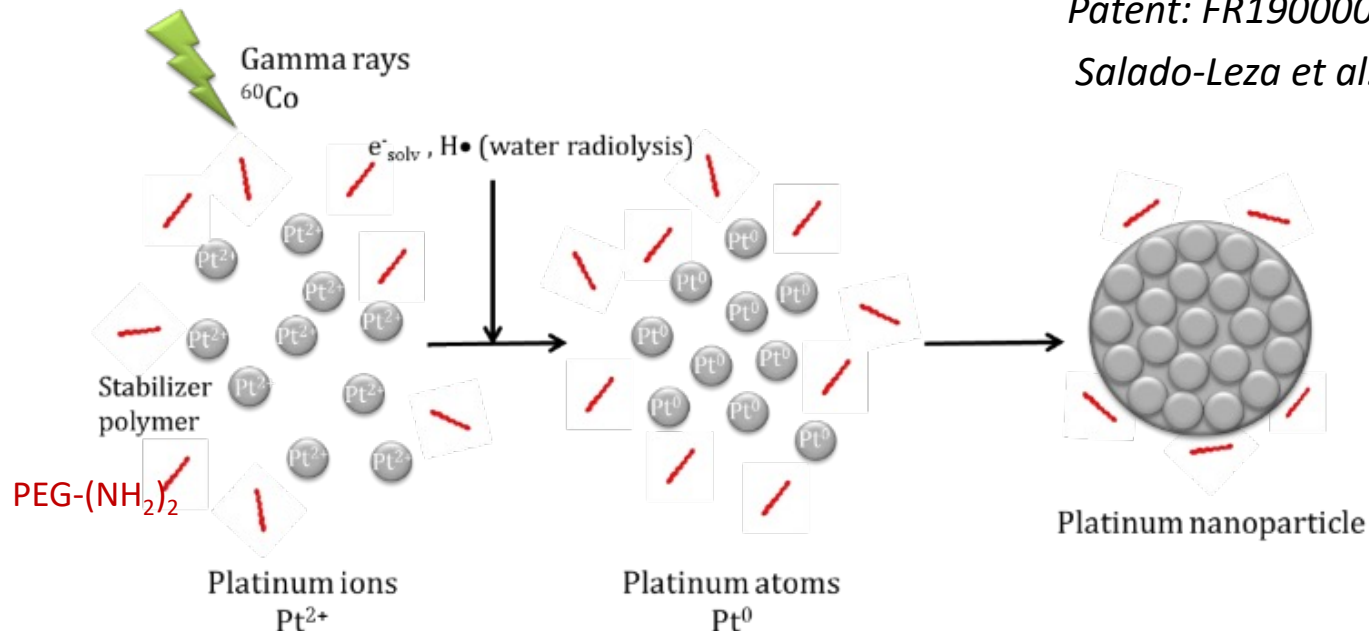
Salado-Leza et al. Nanotechnol Sci Appl. 2020



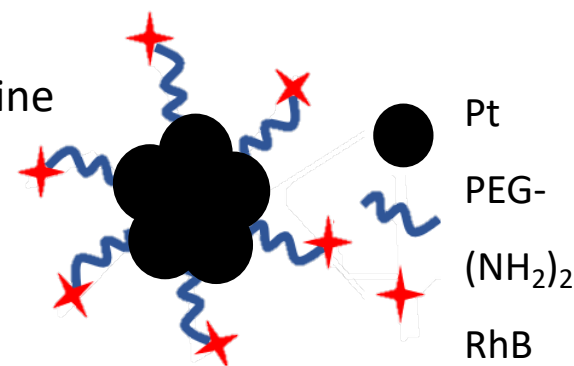
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Salado-Leza et al. Nanotechnol Sci Appl. 2020



Possible attachement of a fluorescent tag @ PEG-(NH<sub>2</sub>)<sub>2</sub> : rhodamine

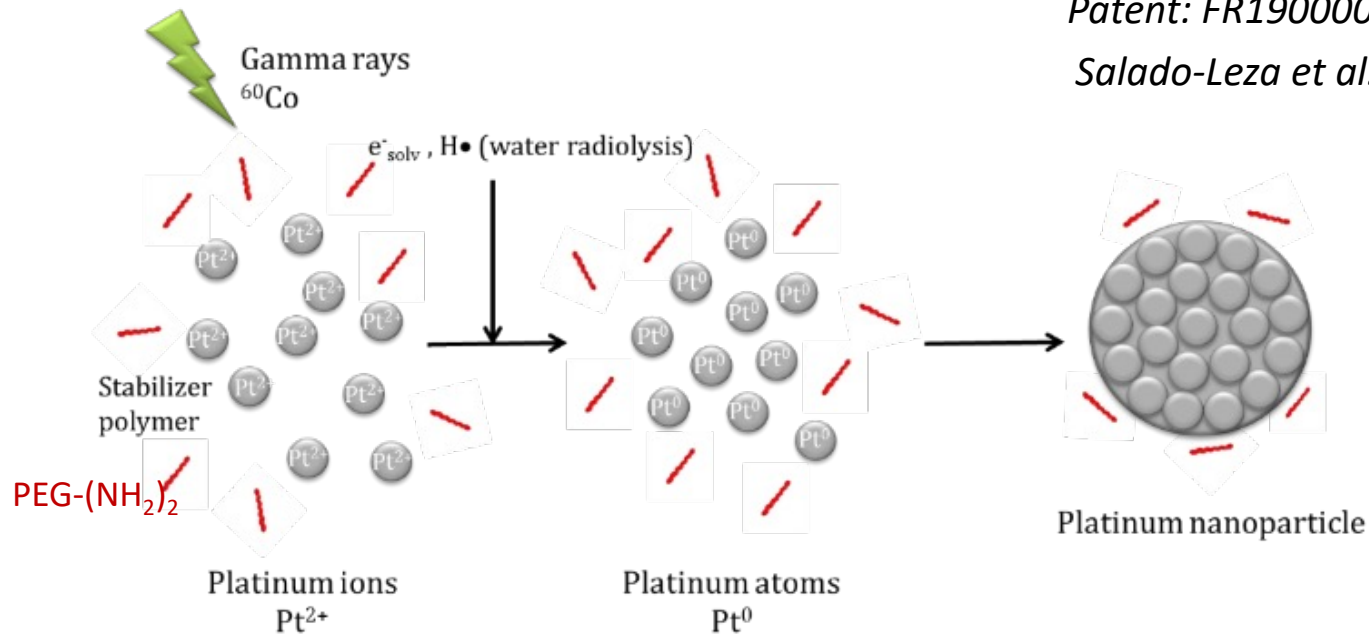




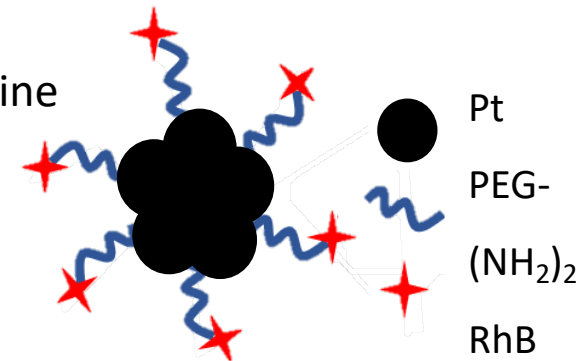
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Salado-Leza et al. Nanotechnol Sci Appl. 2020



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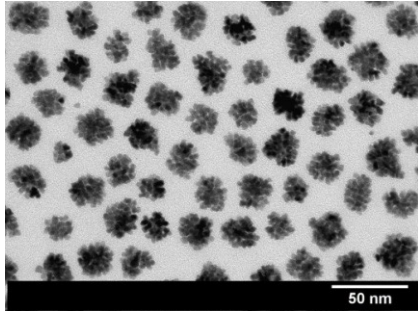


## One pot synthesis of High performance

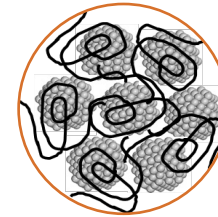
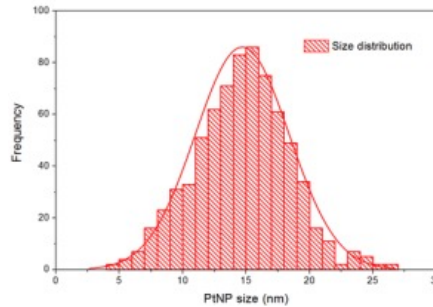
- Fast (1 step)
- Reproducible
- Green (no solvent)
- Low cost
- Efficient : 100% rate and solution ready -to-use in clinic (sterilized by gamma radiation)

## Characterization of PtNPs

Shape: TEM



size: DLS



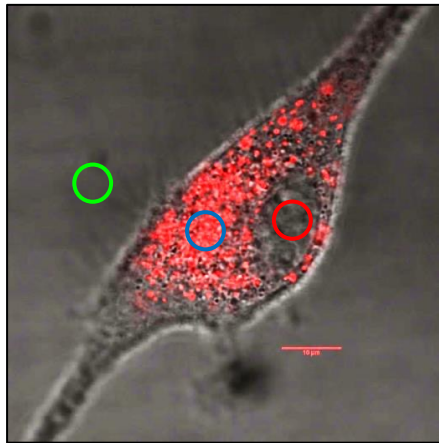
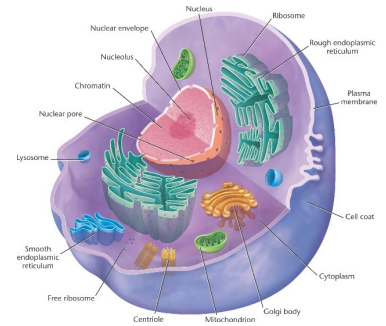
Yang, X. et al. *Int. J. Mol. Sci.* **2020**

Salado-Leza D, Porcel E, et al. *Nanotechnol Sci Appl.* **2020**

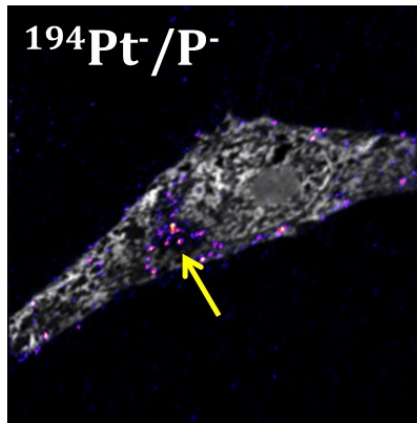
## Cell uptake and Intracellular distribution in cells (2D)

Techniques: confocal microscopy, TEM, Nano-SIMS ...

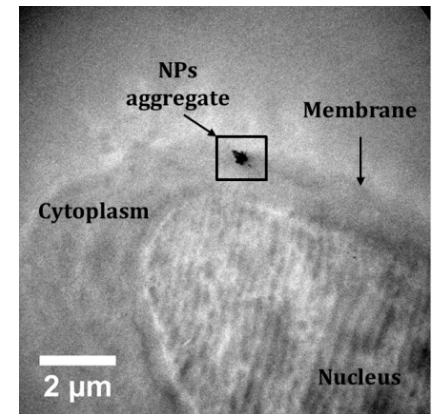
Quantification by ICP MS (ex:  $5 \times 10^5$  NPs per cell)



confocal



NanoSIMS



TEM

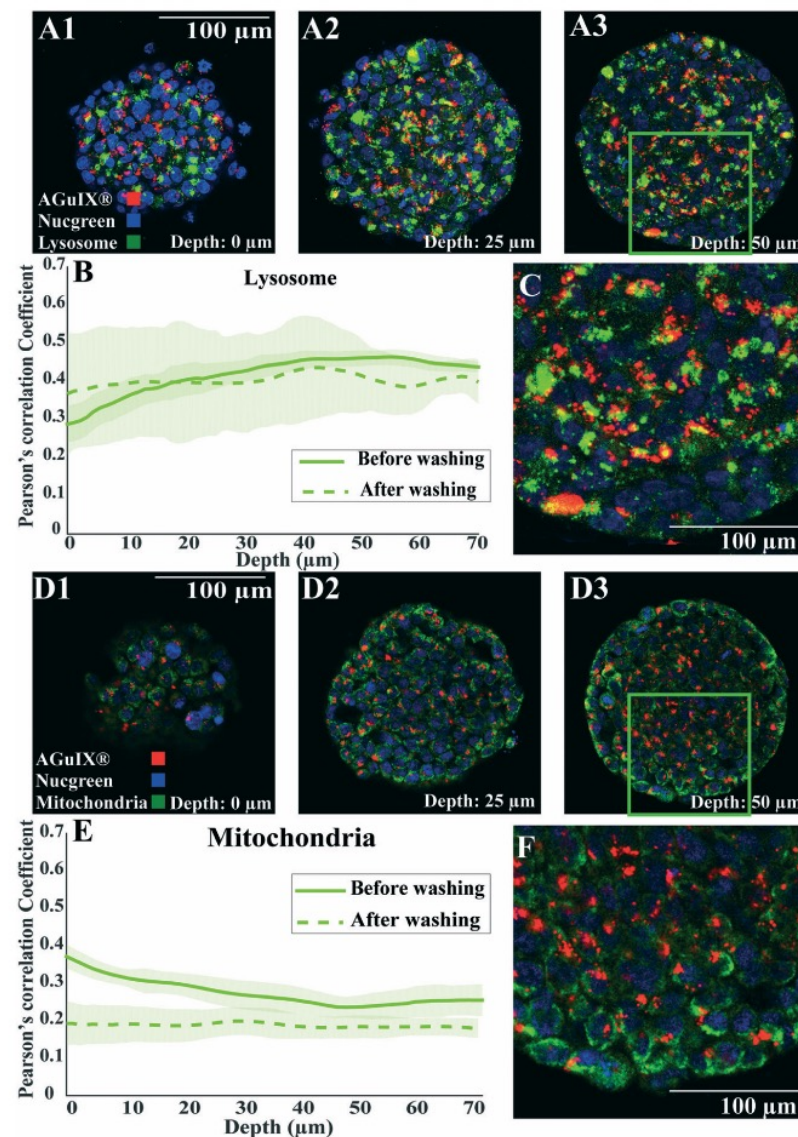
➤ **radioenhancers** are localized in the **cytoplasm**

## Cell uptake and intracellular distribution of AGuiX NPs in 3D cell model to mimic the tumor

## Quantifying nanotherapeutic penetration using a hydrogel-based microsystem as a new 3D *in vitro* platform†

Saba Goodarzi, <sup>a</sup> Audrey Prunet,<sup>a</sup> Fabien Rossetti, <sup>a</sup> Guillaume Bort, <sup>a</sup>  
Olivier Tillement, <sup>a</sup> Erika Porcel, <sup>b</sup> Sandrine Lacombe,<sup>b</sup> Ting-Di Wu,<sup>cd</sup>  
Jean-Luc Guerquin-Kern, <sup>cd</sup> Hélène Delanoë-Ayari, <sup>a</sup>  
François Lux <sup>ae</sup> and Charlotte Rivière <sup>\*ae</sup>

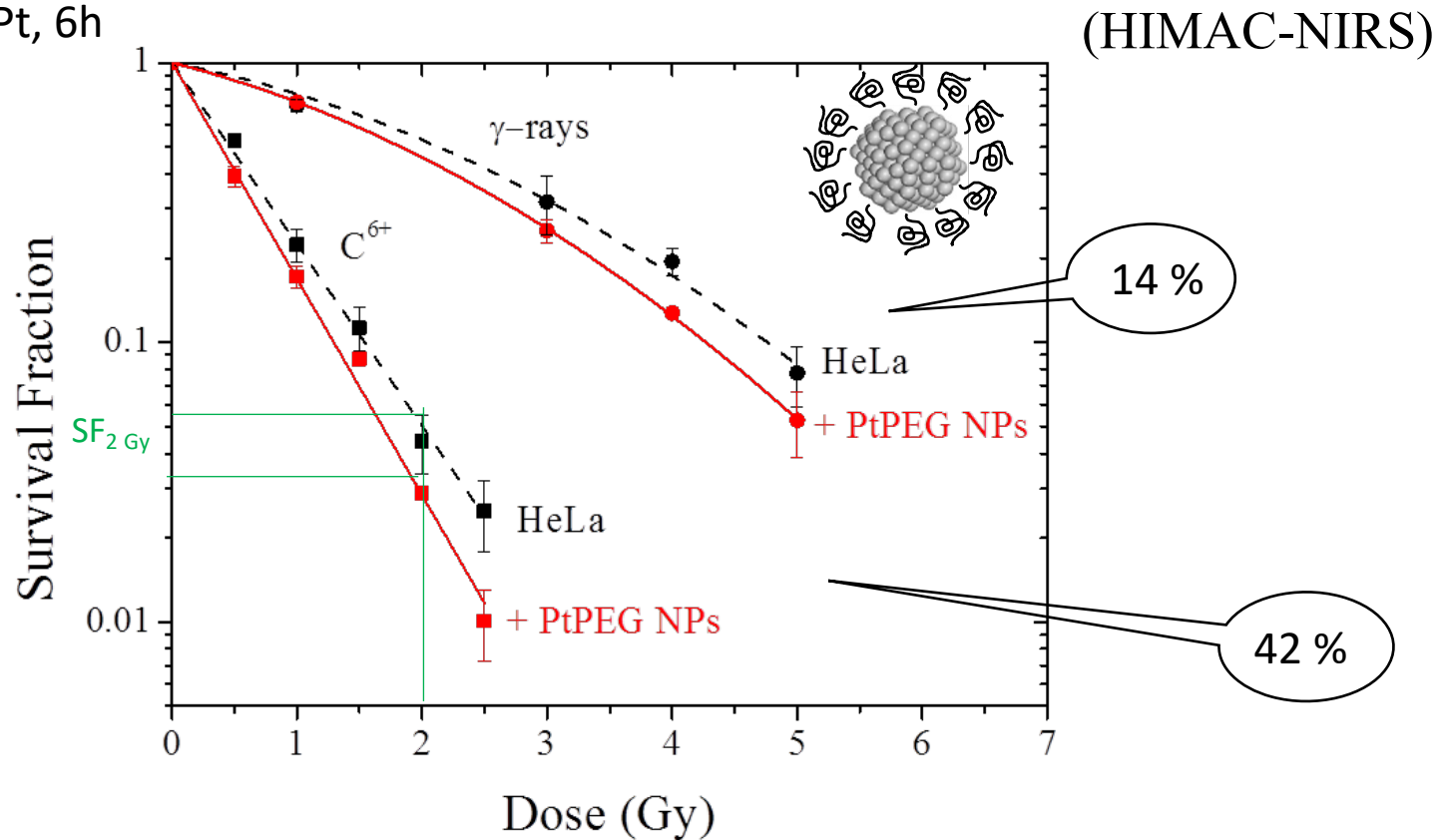
- NPs can travel through the **extra cellular matrix**
- then localize **in the cytoplasm**
- Same work in process with PtNPs (not yet published)



*S. Goodarzi et al Lab Chip, 2021. DOI:  
10.1039/d1lc00192b*

**Radioenhancement** : Irradiation by  $\gamma$  rays &  $C^{6+}$  (SOBP: 400MeV/u) on HeLa cells

Incubation : 0.5 mM Pt, 6h



➤ **Enhancement of the effect of high energy photons and fast ions**





## Quantification of nano-size damages (for simulations)

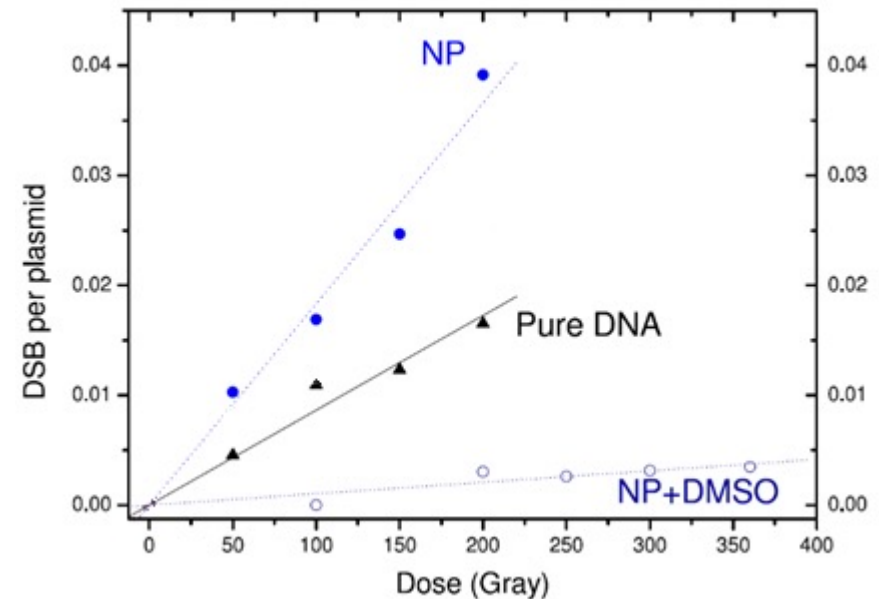


molecular probe : DNA plasmids

pBr322 plasmid = Nano-biodosimeter



Double strand break (DSB)  
**> 2 nm damage**



- Enhancement of lethal radiation effects (nanosize damage)
- Major role of water radicals



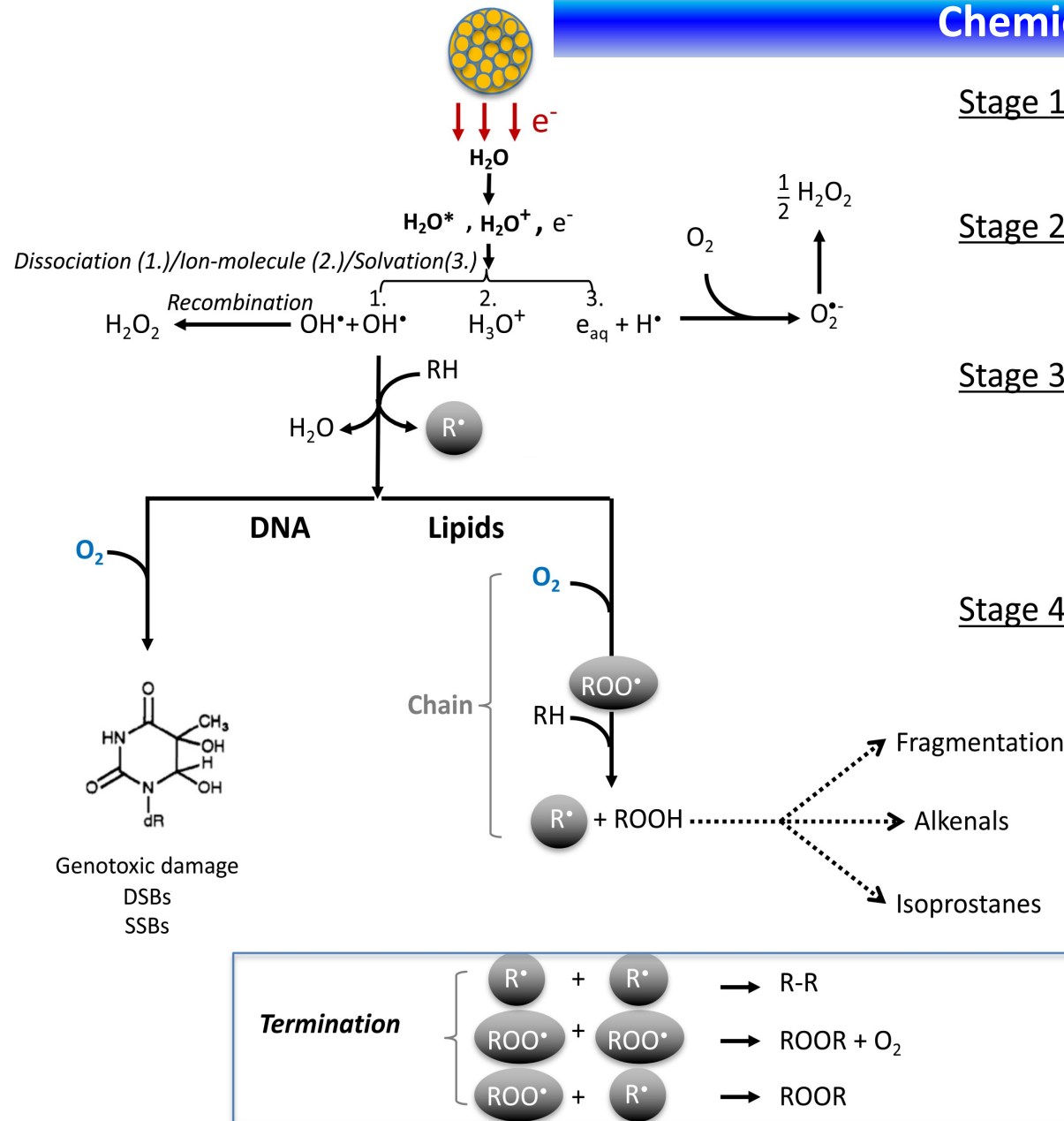
# Chemical step

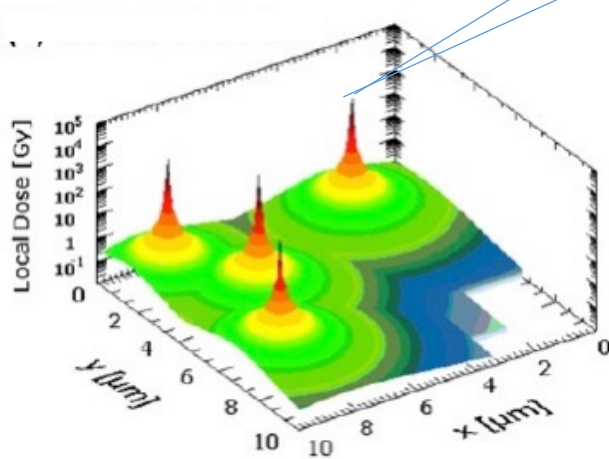
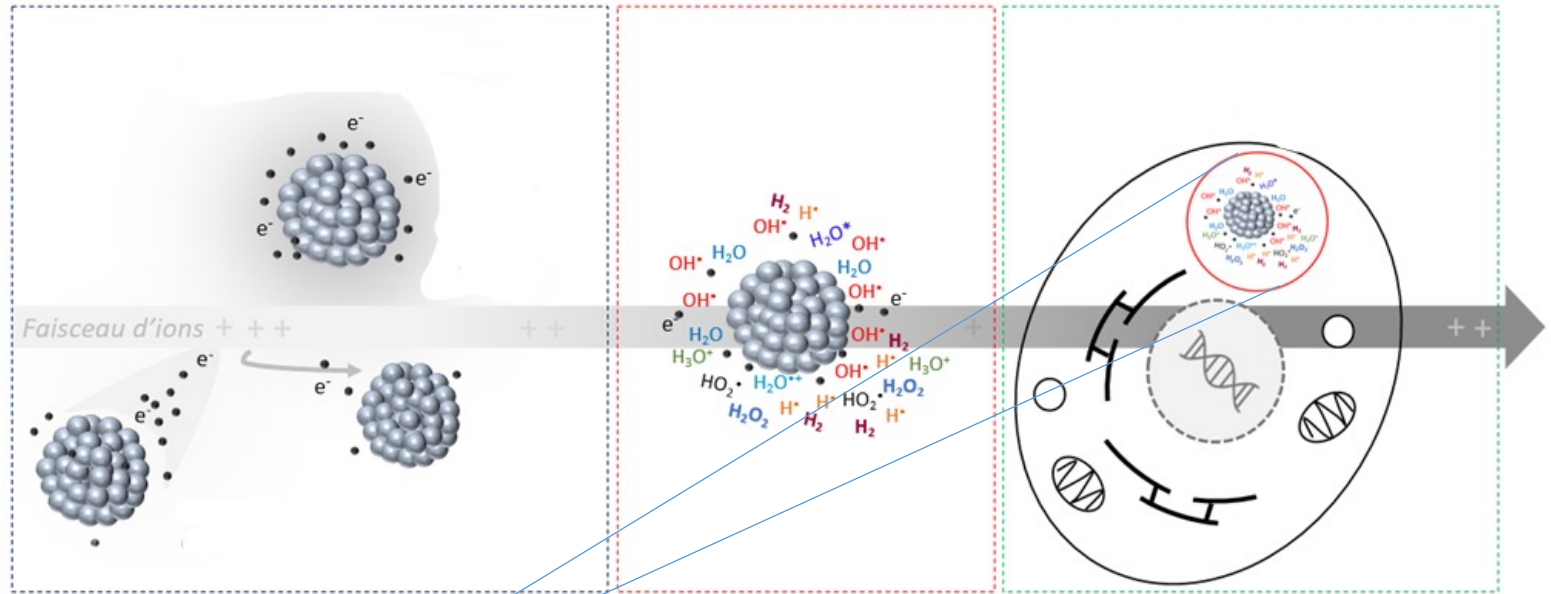
Stage 1: electron emission from NP

Stage 2: water radiolysis

Stage 3: production of bio-radicals

Stage 4: peroxidation

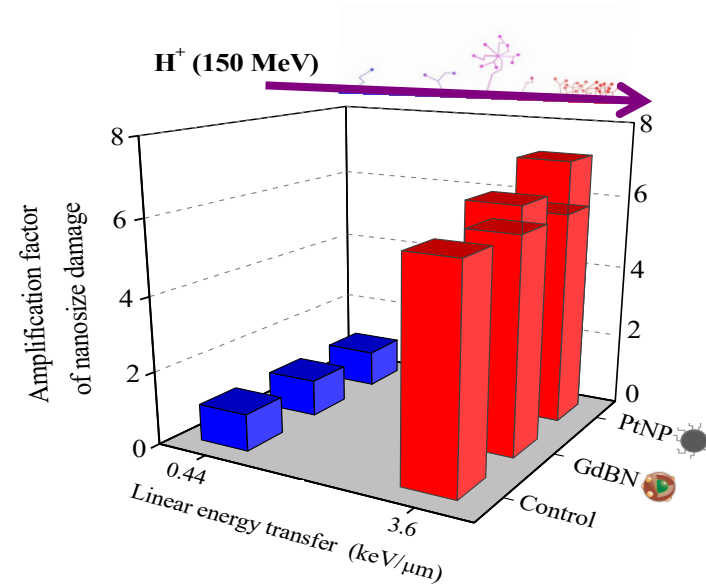
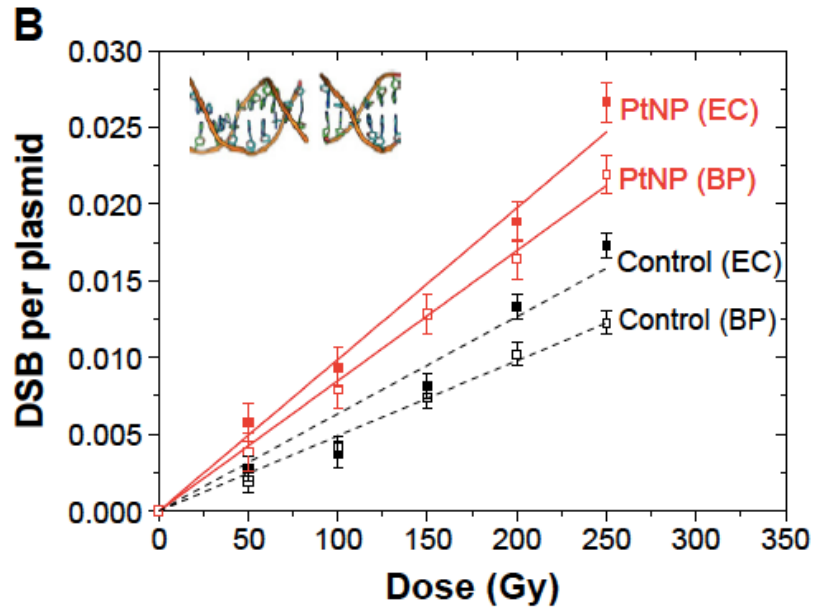




## Effect of NPs at nanoscale:

- Confined nanodose deposition (« spikes »)
- Able to induce nano-size damage in biomolecules
- Cell death and other biological impacts

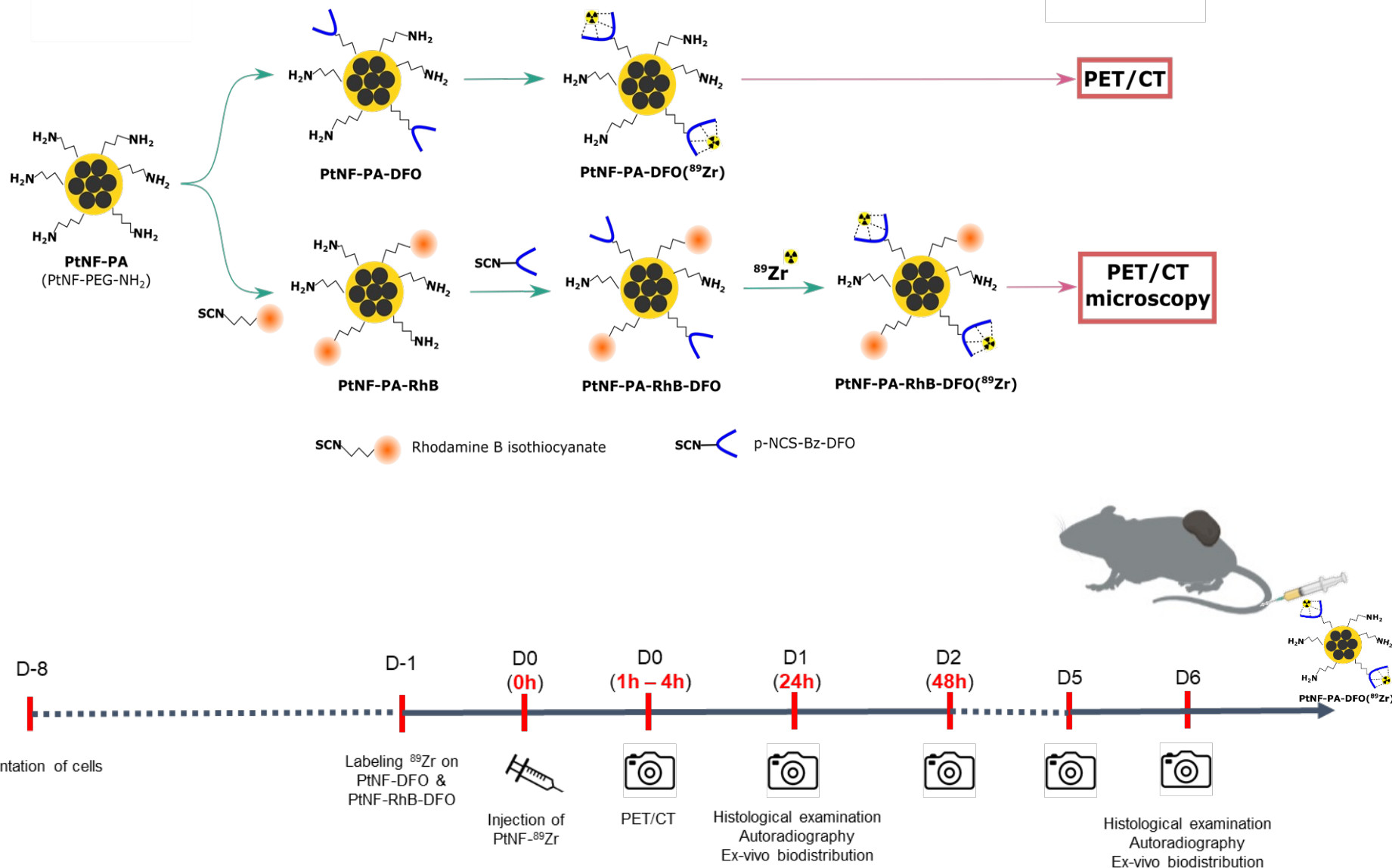
## PtNPs @ 150 MeV protons.



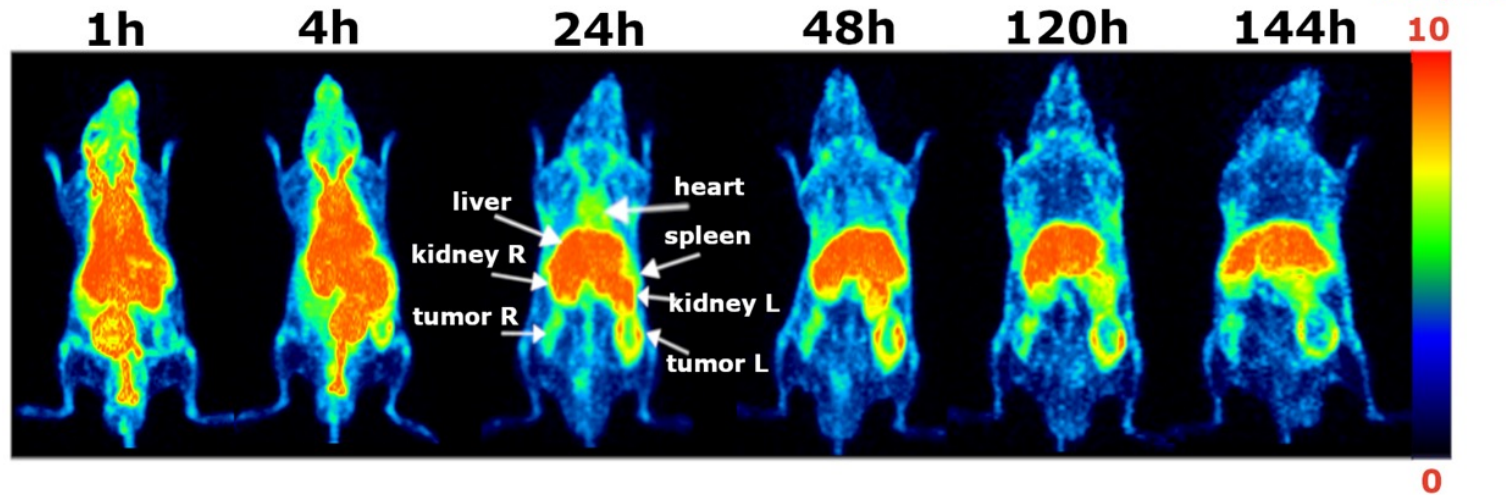
- Effect **stronger at the end** of the proton track
- Increase of the effect with higher Z



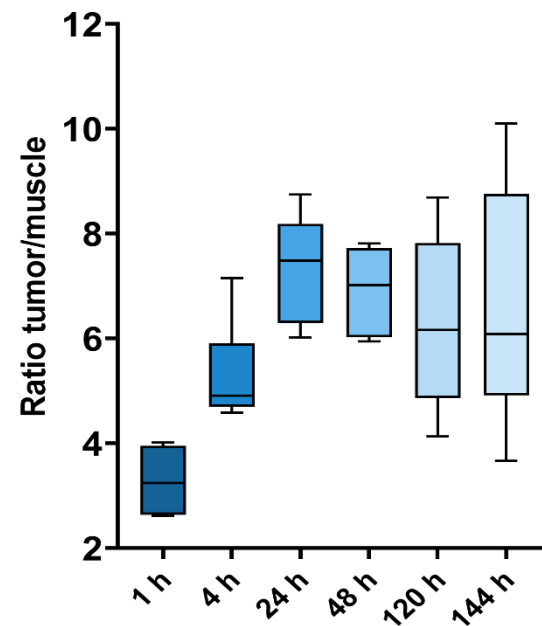
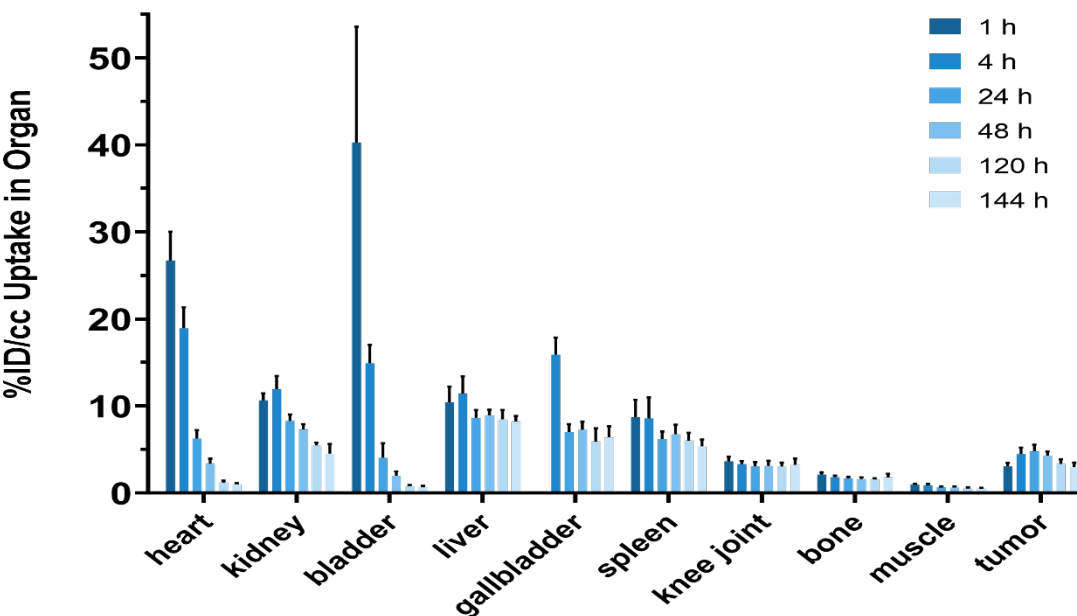
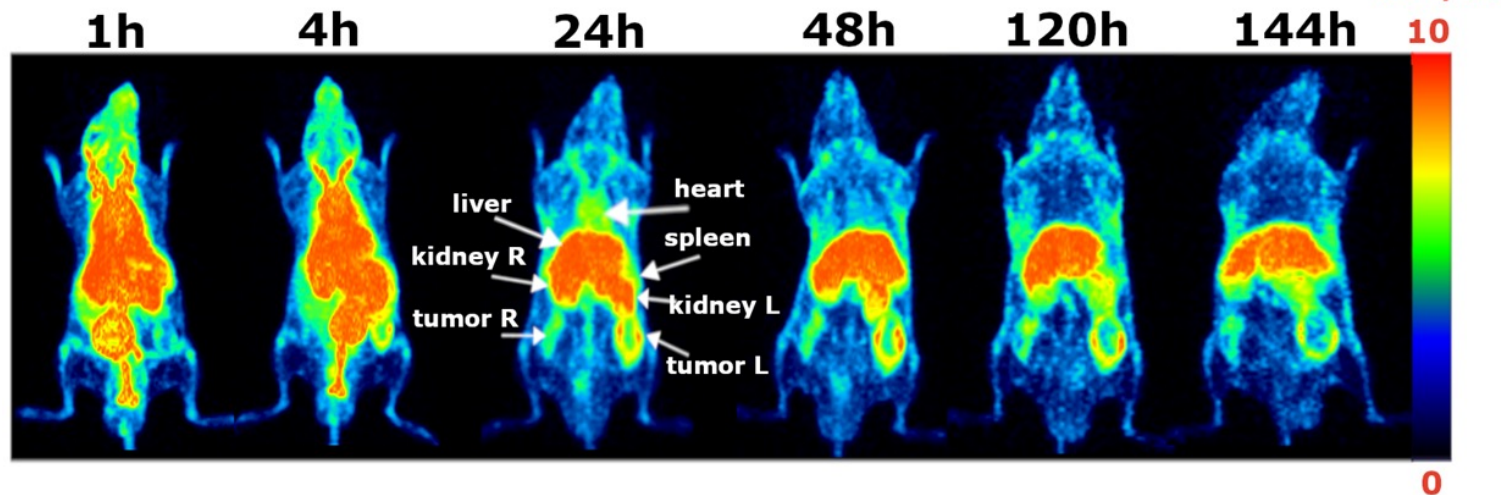
## Radiolabelling of PtNPs with $^{89}\text{Zr}$ for PET imaging



## In vivo Biodistribution of $^{89}\text{Zr}$ -PtNP in B16F10 tumor model

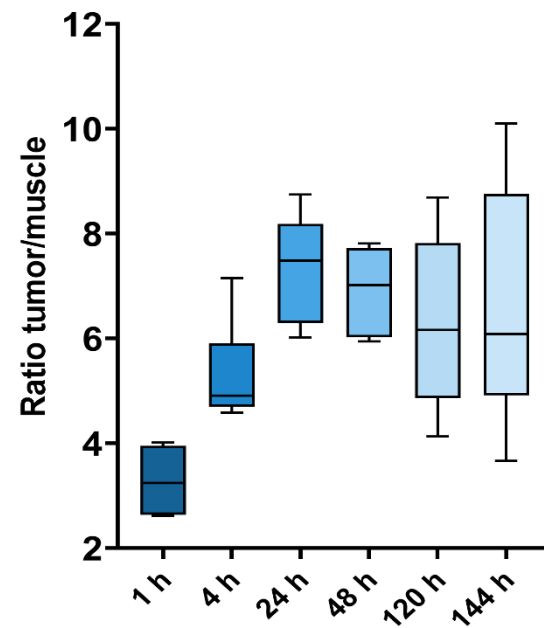
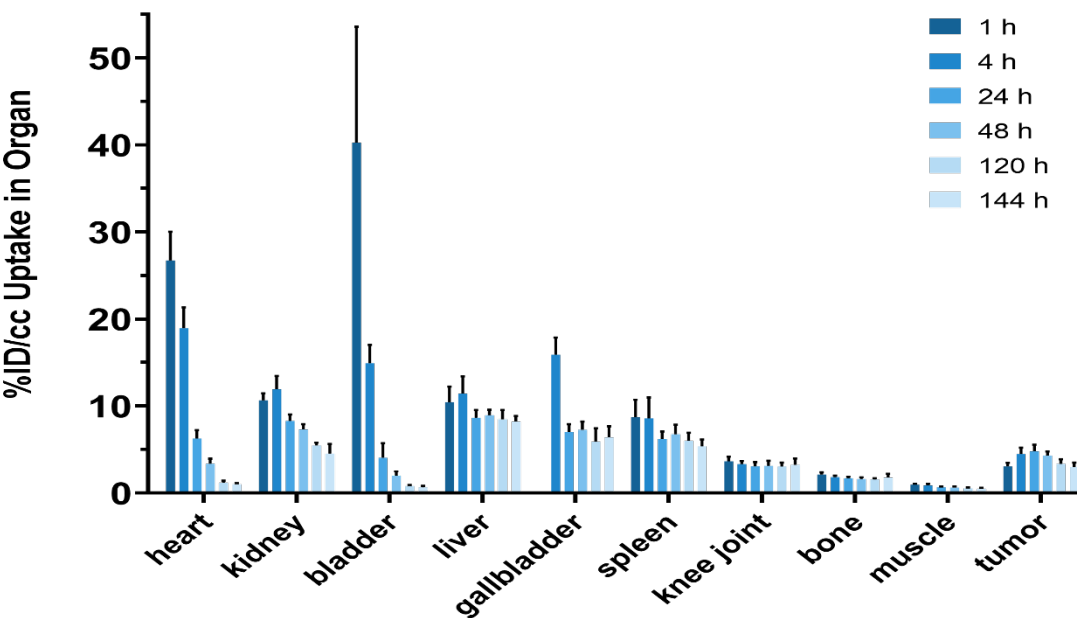
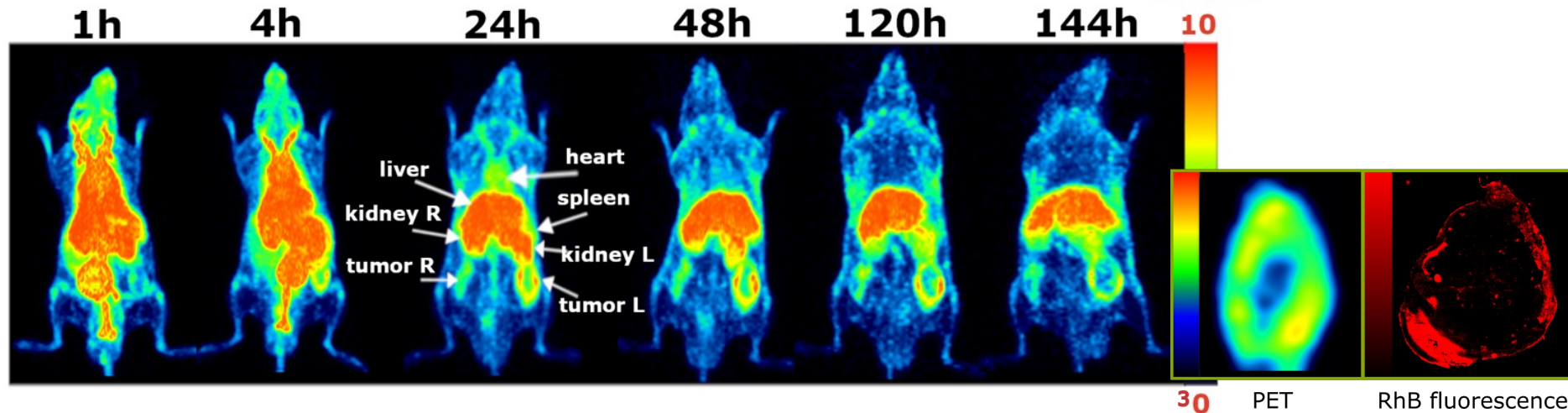


## In vivo Biodistribution of $^{89}\text{Zr}$ -PtNP in B16F10 tumor model

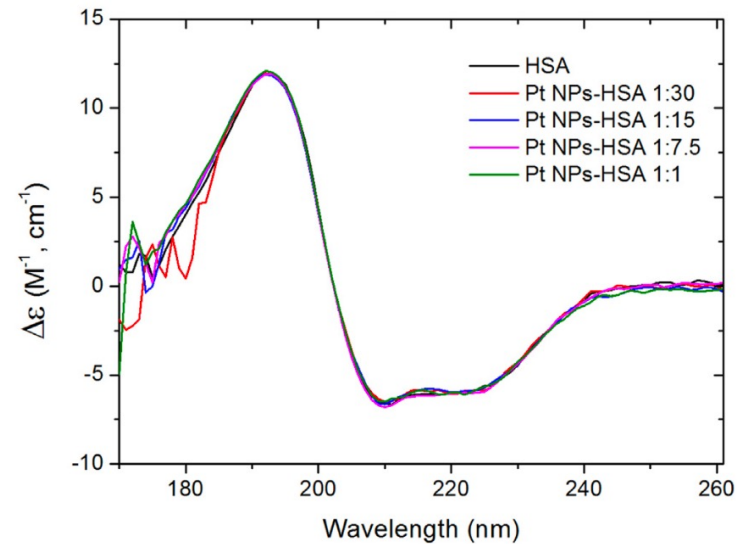
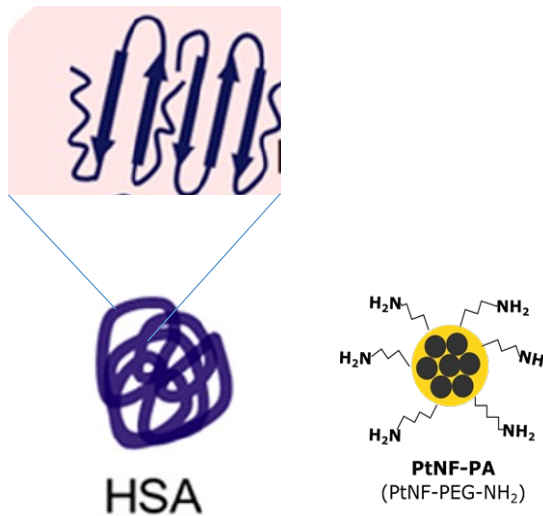




## In vivo Biodistribution of $^{89}\text{Zr}$ -PtNP in B16F10 tumor model

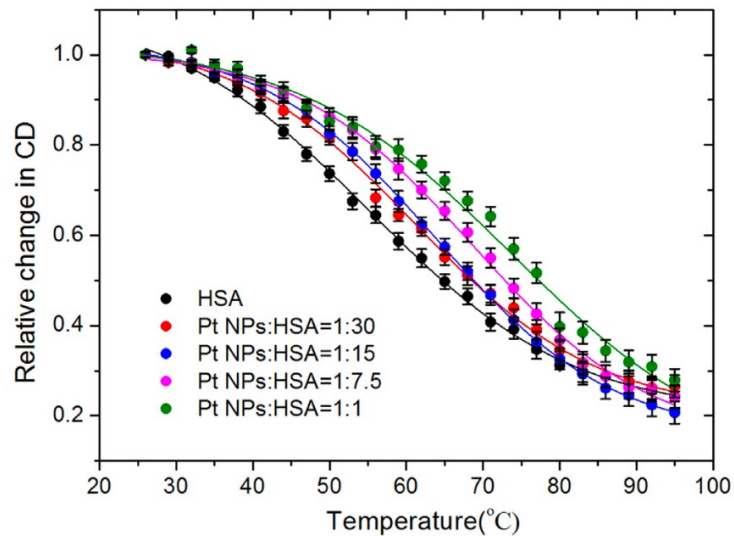


# Interaction of PtNPs with blood proteins



**Figure 5.** SRCD spectra of HSA alone and Pt NPs-HSA complex at Pt NPs:HSA molar ratios of 1:30, 1:15 and 1:7.5 and 1:1, respectively at pH=7.4, 37 °C.

- No interaction of NPs with blood proteins (CD)
- but light interaction at high concentration of 1:1 (temperature scan)

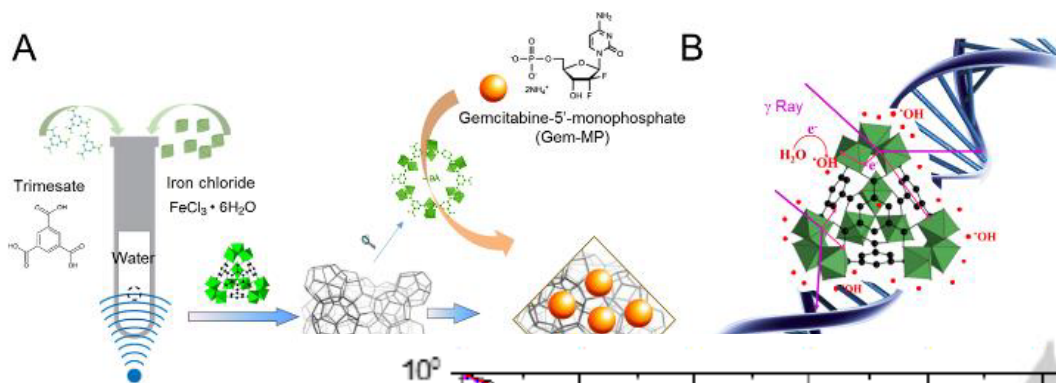


**Figure 7.** Thermal denaturation curves of pure HSA and the Pt NPs-HSA complex at different ratios (Pt NPs:HSA = 1:30, 1:15, 1:7.5, and 1:1) monitored at 192 nm.

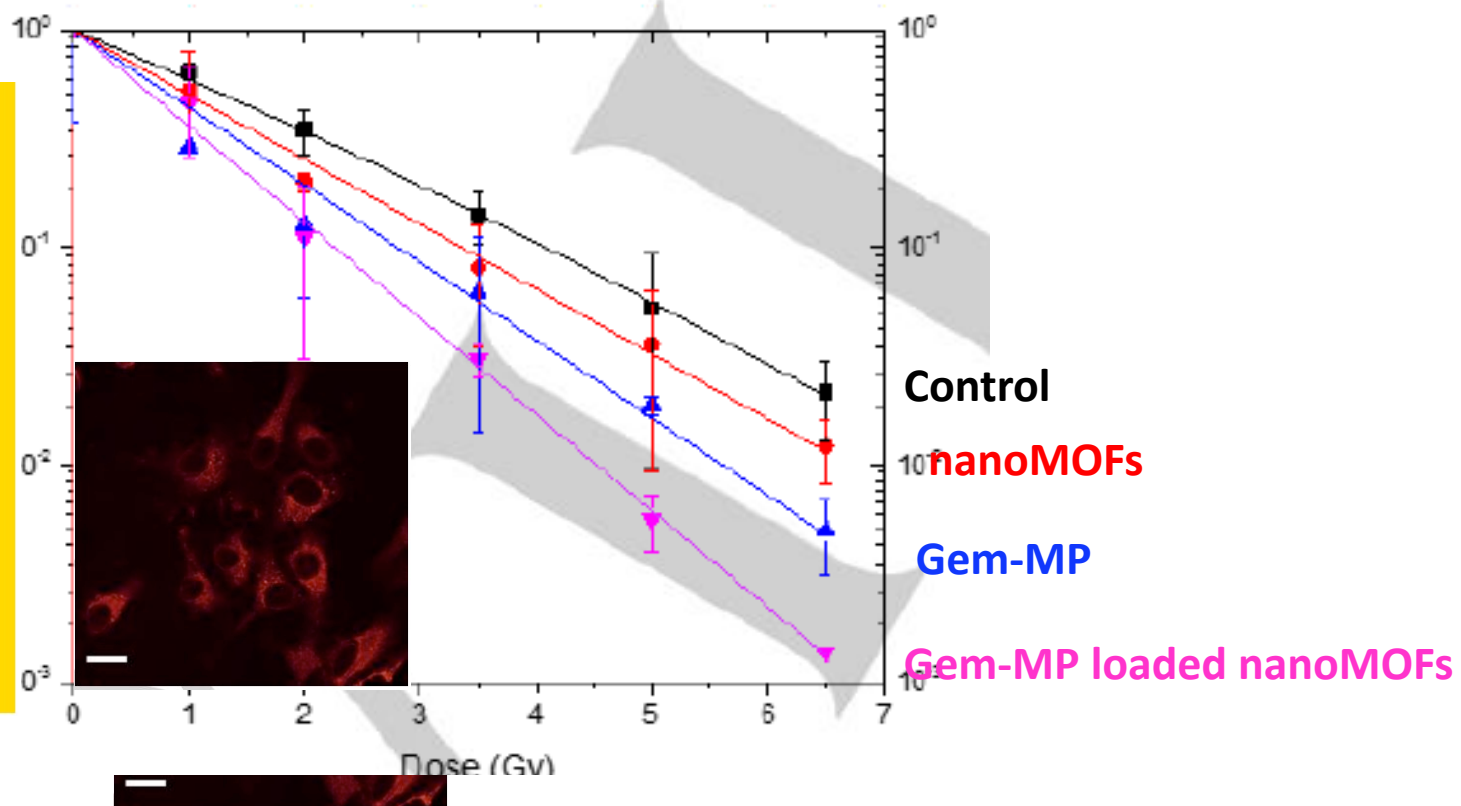


# **Towards personalized treatments**

## NanoMOFs (Metal Organic Framework) loaded with Gemcitabine



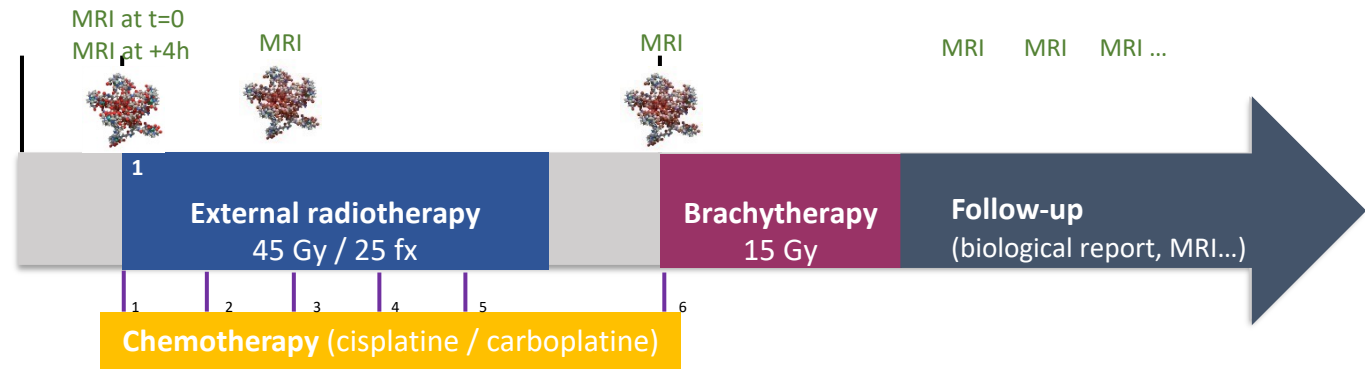
Radioenhancer (Fe)  
+ transporter of Gem (radiosensitizer)



## Theranostic : NP quantification in tumors and RT

**Nanocol:** Phase I clinical trial -advanced cervical cancers

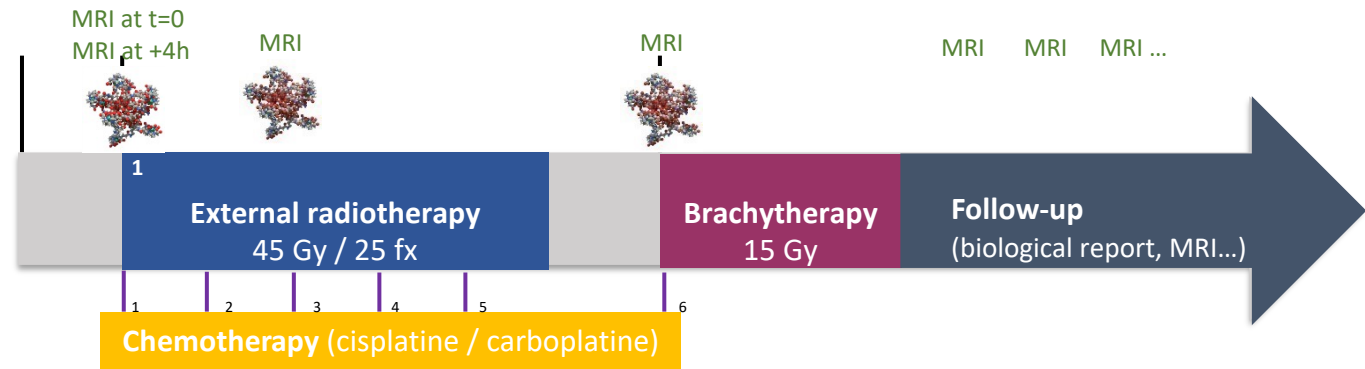
- IV injections of Gd based NPs (AGuiX)
- MRI follow-up and NP quantification
- RT & brachytherapy



## Theranostic : NP quantification in tumors and RT

**Nanocol:** Phase I clinical trial -advanced cervical cancers

- IV injections of Gd based NPs (AGuiX)
- MRI follow-up and NP quantification
- RT & brachytherapy



**In parallel : in vitro evaluation of radioenhancement effect**

AGuiX in cells (2D & organoids) + radiation effects

➤ **Prediction of radioenhancement for each patient based on MRI images**

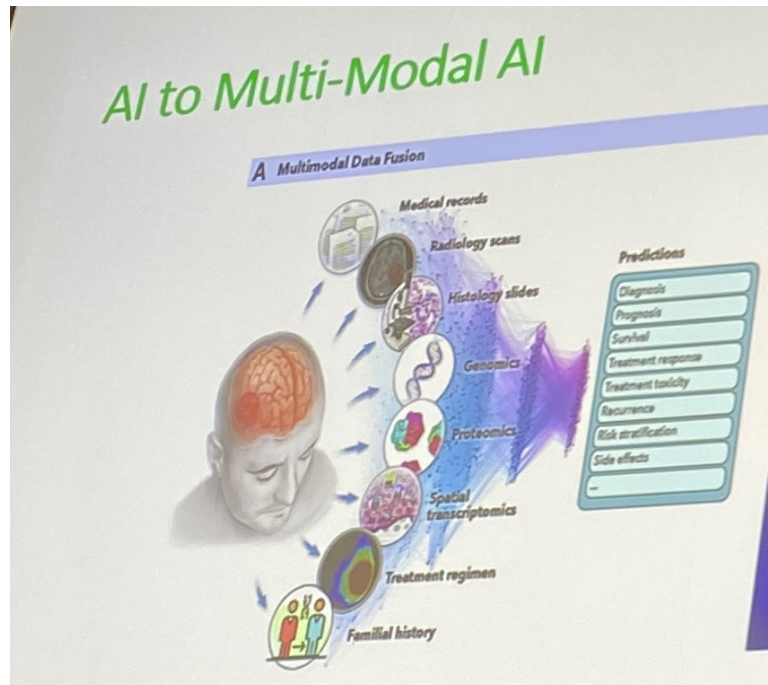
# Perspectives



## Perspectives: multimodal AI for personalized medicine

« A Vision of patient-centric precision medicine 2030 »  
(Talk Inst. Gustave Roussy, U. Paris Saclay, 2024)

*Individualization of treatments based on genetic & molecular characteristics rather*



**AI to Multi-Modal AI**

**A Multimodal Data Fusion**

Medical records  
Radiology scans  
Histology slides  
Genomics  
Proteomics  
Spatial transcriptomics  
Treatment regimen  
Familial history

**Predictions**

- Diagnosis
- Prognosis
- Survival
- Treatment response
- Treatment toxicity
- Recurrence
- Risk stratification
- Side effects

**B Multimodal Data Interconnection**

Histology scan linking from radiology  
Biomarker prediction from histology/radiology

**C Multimodal Interpretability & Association Discovery**

Histology  
Radiology  
Molecular

**D Quantitative Analysis**

**E Biomarker Exploration**

Biomarker surrogate  
Novel biomarker candidates

**F Translation to Practice**

AI based assistive tools  
Novel therapeutic targets  
Low-cost patient screening  
Personalized treatment strategies

twitter/X @VivekSubbiah

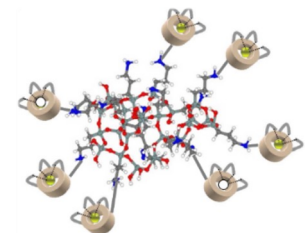
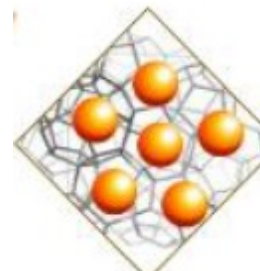
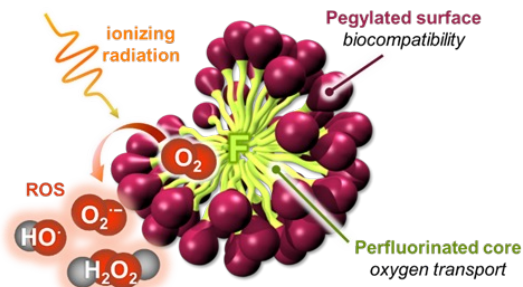
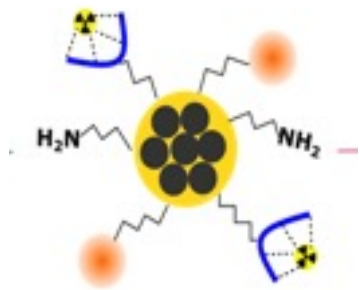
Cancer Cell 2022 401095-114080

KICK OFF MEETING  
IHU PRISM

V. Subbiah, MD, Chief, Early phase development,  
Sarah Cannon Research Institute, Nashville, US

## Where we are:

- ✓ **NP-driven theranostic strategies already in clinic**
- ✓ **New NPs in progress but:**
  - Need more NPs to improve tumor targeting and clearance, and offer a large panel of properties to physicians/med phys.,
  - Need new IT models and tools (simulations, AI..)
    - Multidisciplinary collaborations with chemists
- ✓ Some spin-off but need of higher interest of **big pharma** and other **industrials**



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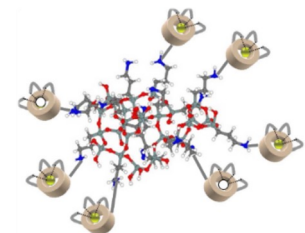
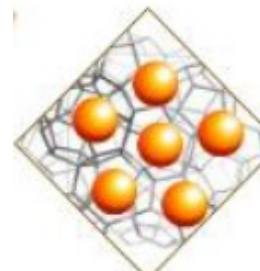
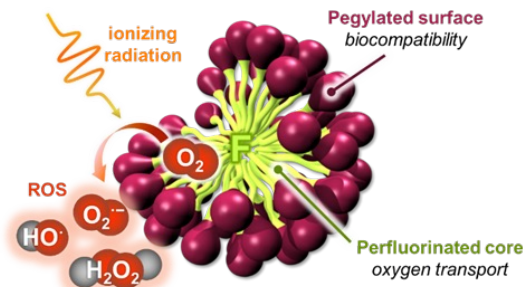
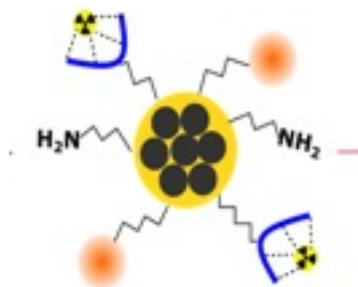
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## What's next :

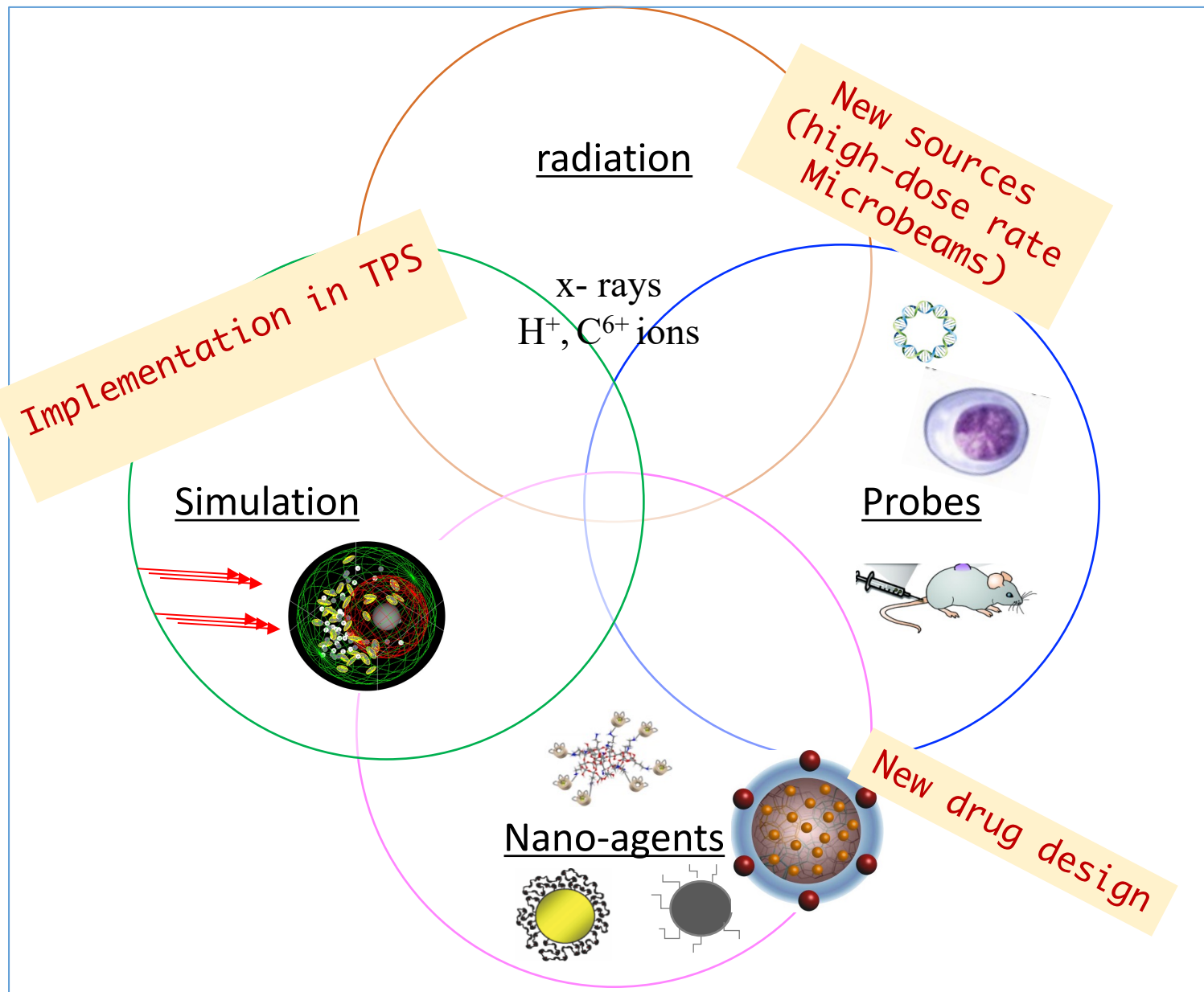
Effect of NPs with **new radiation modalities** (UHDR/FLASH, microbeams etc)

Clinical trials with new NPs

Development of models/simulations/**AI to predict, control and personalize**



# CHALLENGES



From fundamental  
to  
the clinic

MANY  
OPPORTUNITIES



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