



UNIVERSITY OF  
GOTHENBURG

# DOSIMETRIC COMPARISON OF THE RADIOLANTHANIDES LU-177 AND TB-161 FOR CANCER THERAPIES WITH RADIOPHARMACEUTICALS

PETER BERNHARDT, DEPARTMENT OF MEDICAL RADIATION SCIENCES, INSTITUTE OF CLINICAL SCIENCE

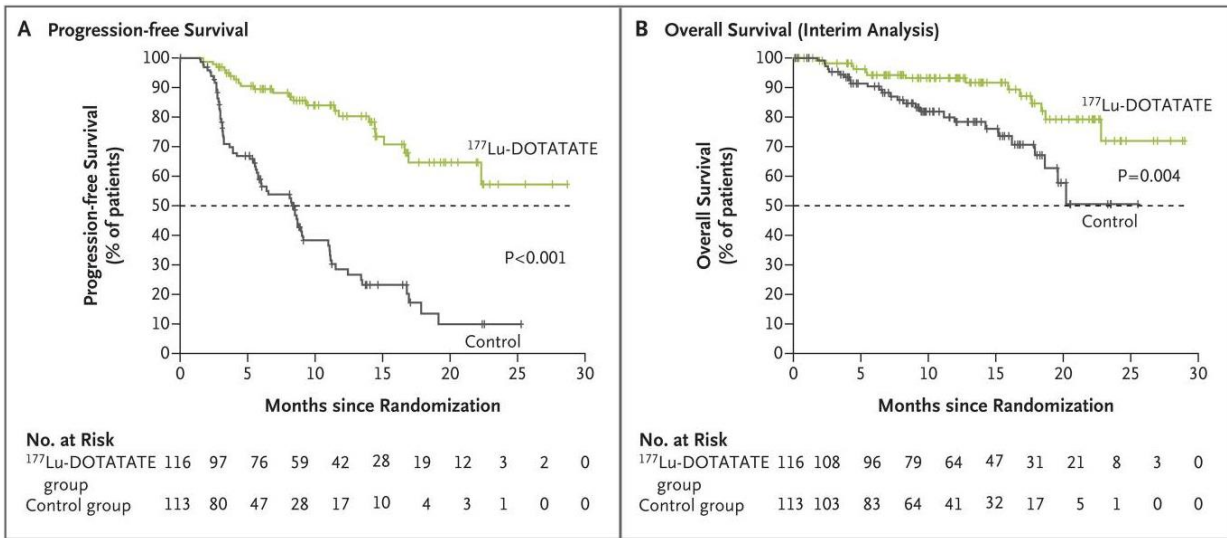
# Is Peptide Receptor Radionuclide Therapy Really Happening?



*N Engl J Med.* 2017 January 12; 376(2): 125–135. doi:10.1056/NEJMea1607427.

## Phase 3 Trial of $^{177}\text{Lu}$ -Dotatate for Midgut Neuroendocrine Tumors

J. Strosberg, G. El-Haddad, E. Wolin, A. Hendifar, J. Yao, B. Chasen, E. Mittra, P.L. Kunz, M.H. Kulke, H. Jacene, D. Bushnell, T.M. O'Dorisio, R.P. Baum, H.R. Kulkarni, M. Caplin, R. Lebtahi, T. Hobday, E. Delpassand, E. Van Cutsem, A. Benson, R. Srirajakanthan, M. Pavel, J. Mora, J. Berlin, E. Grande, N. Reed, E. Seregni, K. Öberg, M. Lopera Sierra, P. Santoro, T. Thevenet, J.L. Erion, P. Ruzsniwski, D. Kwekkeboom, E. Krenning, and for the NETTER-1 Trial Investigators\*



**LUTATHERA<sup>®</sup>**  
(lutetium Lu 177 dotatate)  
injection, for intravenous use

# Is Peptide Receptor Radionuclide Therapy Really Happening?



## $^{177}\text{Lu}$ -Dotatate plus long-acting octreotide versus high-dose long-acting octreotide in patients with midgut neuroendocrine tumours (NETTER-1): final overall survival and long-term safety results from an open-label, randomised, controlled, phase 3 trial

Jonathan R Strosberg, Martyn E Caplin, Pamela L Kunz, Philippe B Ruszniewski, Lisa Bodei, Andrew Hendifar, Erik Mittra, Edward M Wolin, James C Yao, Marianne E Pavel, Enrique Grande, Eric Van Cutsem, Ettore Seregni, Hugo Duarte, Germa Gericke, Amy Bartalotta, Maurizio F Mariani, Arnaud Demanaer, Sakir Mutevelic, Eric P Krennina, on behalf of the NETTER-1 investigators\*

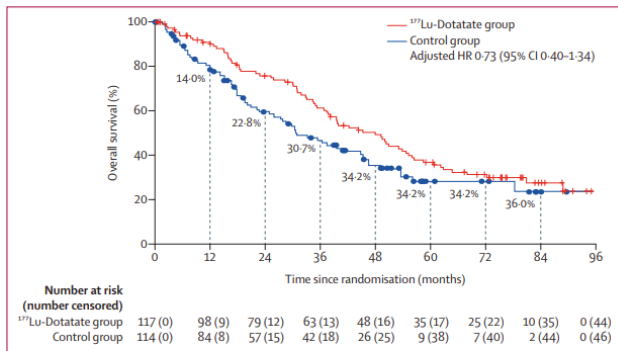
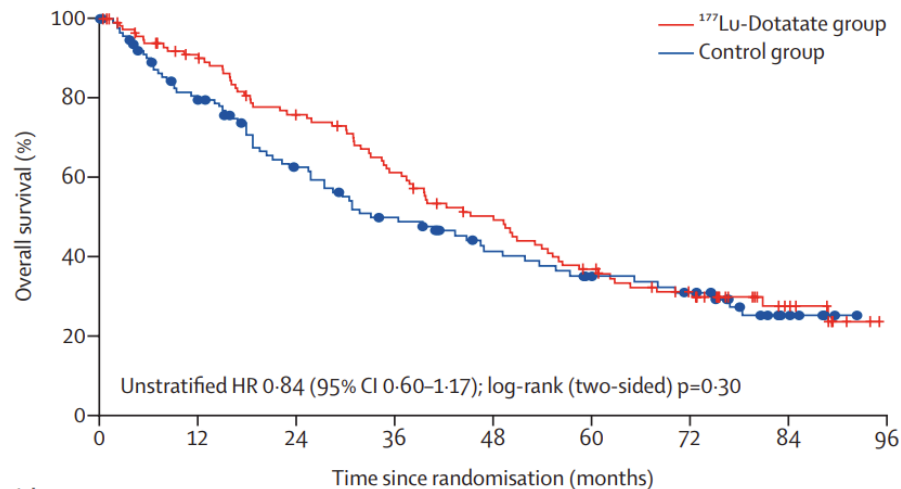


Figure 4: Rank-preserving structured failure time analysis of overall survival accounting for crossover to any PRRT in the control group during long-term follow-up  
Percentages at each timepoint are cumulative proportions of patients crossing over from the control group to PRRT.  
HR=hazard ratio. PRRT=peptide receptor radionuclide therapy.



Number at risk (number censored)

Time since randomisation (months)	0	12	24	36	48	60	72	84	96
$^{177}\text{Lu}$ -Dotatate group	117 (0)	98 (9)	79 (12)	63 (13)	48 (16)	35 (17)	25 (22)	10 (35)	0 (44)
Control group	114 (0)	84 (8)	61 (14)	45 (18)	33 (23)	25 (26)	21 (27)	6 (39)	0 (45)

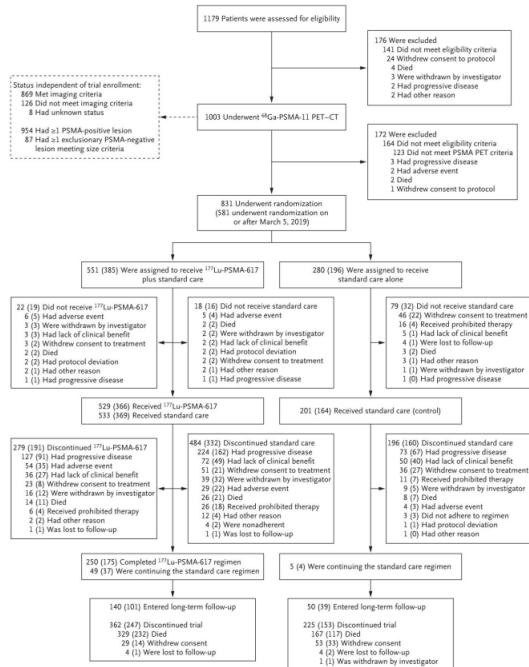
# Is Radioligand Therapy of mCRPC Really Happening?

Clinical Trial | N Engl J Med. 2021 Sep 16;385(12):1091-1103. doi: 10.1056/NEJMoa2107322.

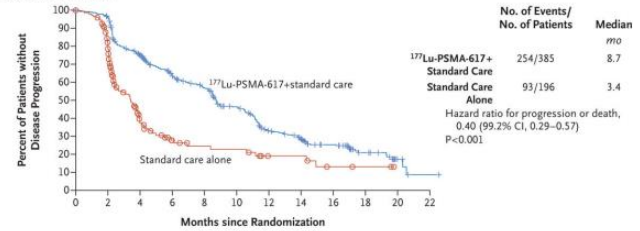
Epub 2021 Jun 23.

## Lutetium-177-PSMA-617 for Metastatic Castration-Resistant Prostate Cancer

Oliver Sartor<sup>1</sup>, Johann de Bono<sup>1</sup>, Kim N Chi<sup>1</sup>, Karim Fizazi<sup>1</sup>, Ken Herrmann<sup>1</sup>, Kambiz Rahbar<sup>1</sup>, Scott T Tagawa<sup>1</sup>, Luke T Nordquist<sup>1</sup>, Nitin Vaishampayan<sup>1</sup>, Ghassan El-Haddad<sup>1</sup>, Chandler H Park<sup>1</sup>, Tomasz M Beer<sup>1</sup>, Alison Armour<sup>1</sup>, Wendy J Pérez-Contreras<sup>1</sup>, Michele DeSilvio<sup>1</sup>, Euloge Kpamegan<sup>1</sup>, Germo Gericke<sup>1</sup>, Richard A Messmann<sup>1</sup>, Michael J Morris<sup>1</sup>, Bernd J Krause<sup>1</sup>; VISION Investigators

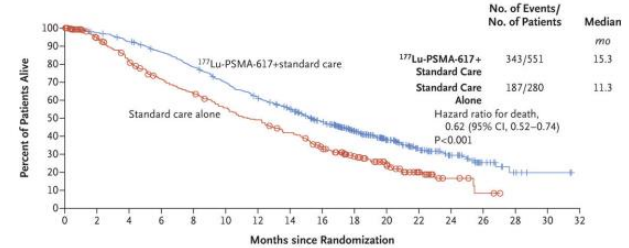


### A Imaging-Based Progression-free Survival



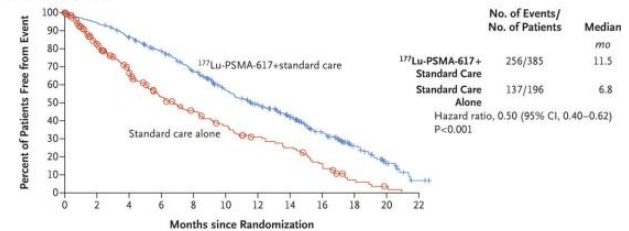
No. at Risk  
<sup>177</sup>Lu-PSMA-617+standard care  
Standard care alone

### B Overall Survival



No. at Risk  
<sup>177</sup>Lu-PSMA-617+standard care  
Standard care alone

### C Time to First Symptomatic Skeletal Event



No. at Risk  
<sup>177</sup>Lu-PSMA-617+standard care  
Standard care alone

# Peptide receptor radionuclide therapy (PRRT)

Is Dosimetry Really Happening?

1987      1989      1992      1994/1996      1999      2001      2001      2003      2003-2017

Identification of sstr in neuroendocrine tumours

$^{123}\text{I}$ -tyr-3-octreotide

$^{111}\text{In}$ -Pentetreotide (Octreoscan)

Treatment with  $^{111}\text{In}$ -Pentetreotide (PRRT)

Phase I trial with  $^{111}\text{In}$ -Pentetreotide

Phase I trial with  $^{90}\text{Y}$ -DOTATOC

$^{68}\text{Ga}$ -PET imaging


First treatments with  $^{177}\text{Lu}$ -DOTATATE

"In-house" production and PRRT treatments

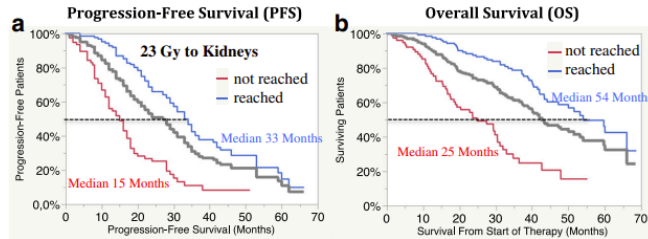
Prospective observational study of  $^{177}\text{Lu}$ -DOTA-octreotate therapy in 200 patients with advanced metastasized neuroendocrine tumours (NETs): feasibility and impact of a dosimetry-guided study protocol on outcome and toxicity

Ulrike Garske-Román<sup>1,2</sup> · Mattias Sandström<sup>3</sup> · Katarzyna Fröss Baron<sup>4</sup> · Lars Lundin<sup>2</sup> · Per Hellman<sup>2</sup> · Staffan Welin<sup>4</sup> · Silvia Johansson<sup>4</sup> · Tanweera Khan<sup>4</sup> · Hans Lundqvist<sup>3</sup> · Barbro Eriksson<sup>4</sup> · Anders Sundin<sup>2</sup> · Dan Granberg<sup>1</sup>

Phase II trial demonstrates the efficacy and safety of individualized, dosimetry-based  $^{177}\text{Lu}$ -DOTATATE treatment of NET patients

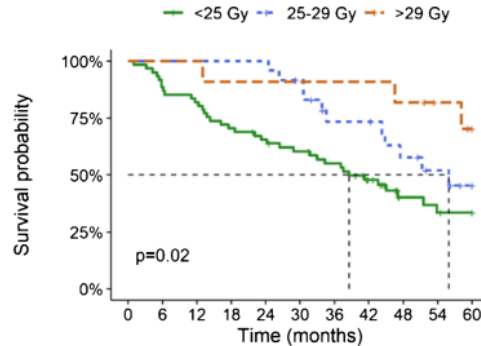
Anna Sundlöv<sup>1</sup> · Katarina Sjögreen Gleisner<sup>2</sup> · Jan Tennvall<sup>1</sup> · Michael Ljungberg<sup>2</sup> · Carl Fredrik Warfvinge<sup>1</sup> · Kajsa Holgersson<sup>3</sup> · Andreas Hallqvist<sup>3,4</sup> · Peter Bernhardt<sup>5,6</sup> · Johanna Svensson<sup>3,4</sup> 

**Ongoing Clinical trial**  
**Systemic Targeted**  
**Adaptive RadioTherapy**  
**of NeuroEndocrine Tumors**  
**(START-NET)**



At risk	76	53	20	8	4	2	-	At risk	76	63	39	20	7	2	-
	123	119	91	59	28	13	5		124	124	105	88	58	31	14

European Journal of Nuclear Medicine and Molecular Imaging (2018) 45:970-988



Number at risk

<25 Gy	61	54	50	43	39	35	31	23	12	10	9
25-29 Gy	24	24	24	24	24	21	15	15	11	8	5
>29 Gy	11	11	11	10	10	10	10	10	9	7	5

European Journal of Nuclear Medicine and Molecular Imaging (2022) 49:3830-3840

# Is Radionuclide Therapy with $^{161}\text{Tb}$ Really Happening?

1987

1989

1992

1994/1996

1999

2001

2001

2003

2003-2017

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$^{68}\text{Ga}$ -PET imaging

First treatments with  $^{177}\text{Lu}$ -DOTATATE

"In-house" production and PRRT treatments

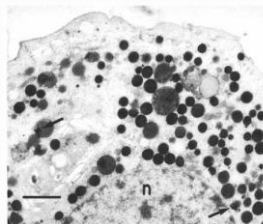
## LABORATORY STUDIES

Internalization of Indium-111 into Human Neuroendocrine Tumor Cells after Incubation with Indium-111-DTPA-D-Phe<sup>1</sup>-Octreotide

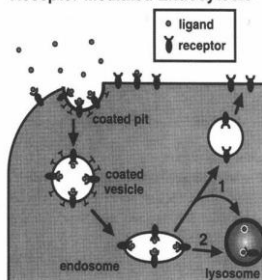
TABLE 1

Tumor-to-Blood Ratios (T/B) and Indium-111 Activity Concentration (C) Postintravenous Injection of Indium-111-DTPA-D-Phe<sup>1</sup>-Octreotide

Tumor biopsy	T/B	C (%IA/g)	Time after injection (d)
<b>Glucagonoma</b>			
Primary tumor	910	0.059	3
Liver metastasis	650	0.042	3
<b>Midgut carcinoid</b>			
Primary tumor	150	0.008	7
Liver metastasis	400	0.020	7
Liver metastasis	470	0.024	7
Liver metastasis	650	0.033	7
<b>Gastric carcinoid</b>			
Primary tumor	71	0.017	1
Lymph node metastasis	190	0.047	1
Liver metastasis	150	0.035	1
Liver metastasis	180	0.044	1
Liver metastasis	210	0.051	1

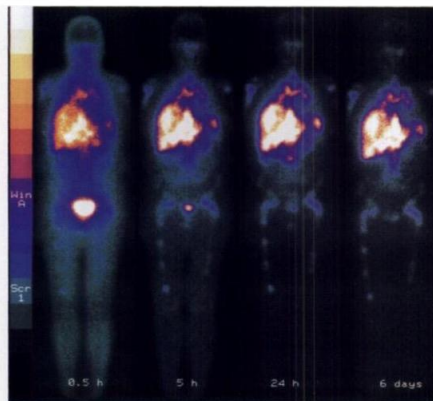


## Receptor-Mediated Endocytosis



Systemic Radionuclide Therapy Using Indium-111-DTPA-D-Phe<sup>1</sup>-Octreotide in Midgut Carcinoid Syndrome

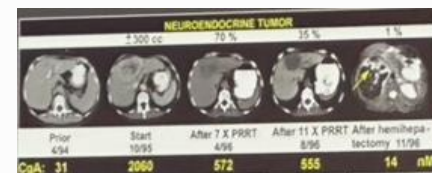
Fjälling et al. JNM 1996



## Radiotherapy with a Radiolabeled Somatostatin Analogue, [ $^{111}\text{In}$ -DTPA-D-Phe<sup>1</sup>]-Octreotide

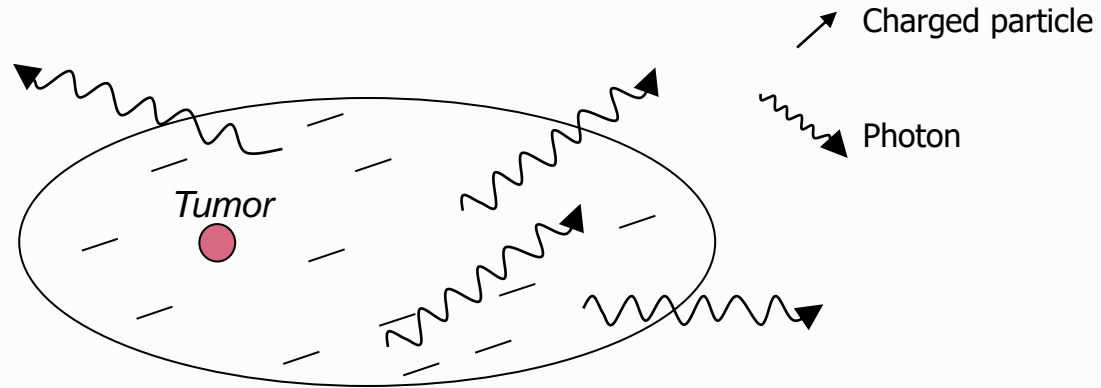
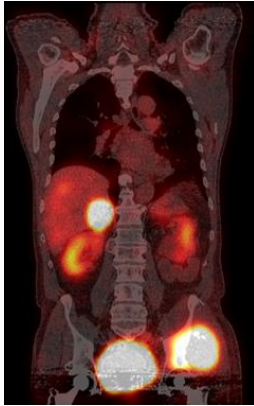
### A Case History

E. P. KRENNING,<sup>a,b,c</sup> P. P. M. KOOLJ,<sup>a</sup> W. H. BAKKER,<sup>a</sup>  
W. A. P. BREEMAN,<sup>a</sup> P. T. E. POSTEMA,<sup>b</sup>  
D. J. KWEEKBOOM,<sup>a</sup> H. Y. OEI,<sup>a</sup> M. DE JONG,<sup>a</sup>  
T. J. VISSER,<sup>a</sup> A. E. M. REIJS,<sup>a</sup> AND S. W. J. LAMBERTS<sup>b</sup>



# Dosimetric characterization of radionuclides

TND - the tumour-to-normal- tissue mean absorbed dose rate ratio

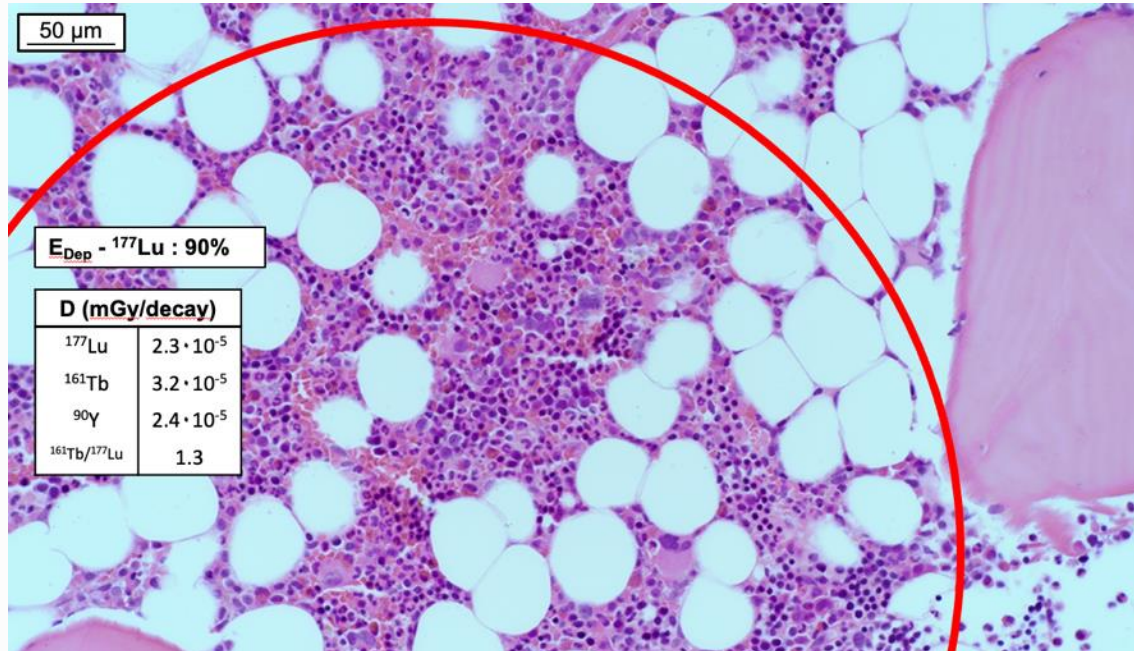


$$TND = \frac{D_T}{D_N}$$

30-40 % of all emitted photons will be absorbed in adults, less than a few percent in mice and rats

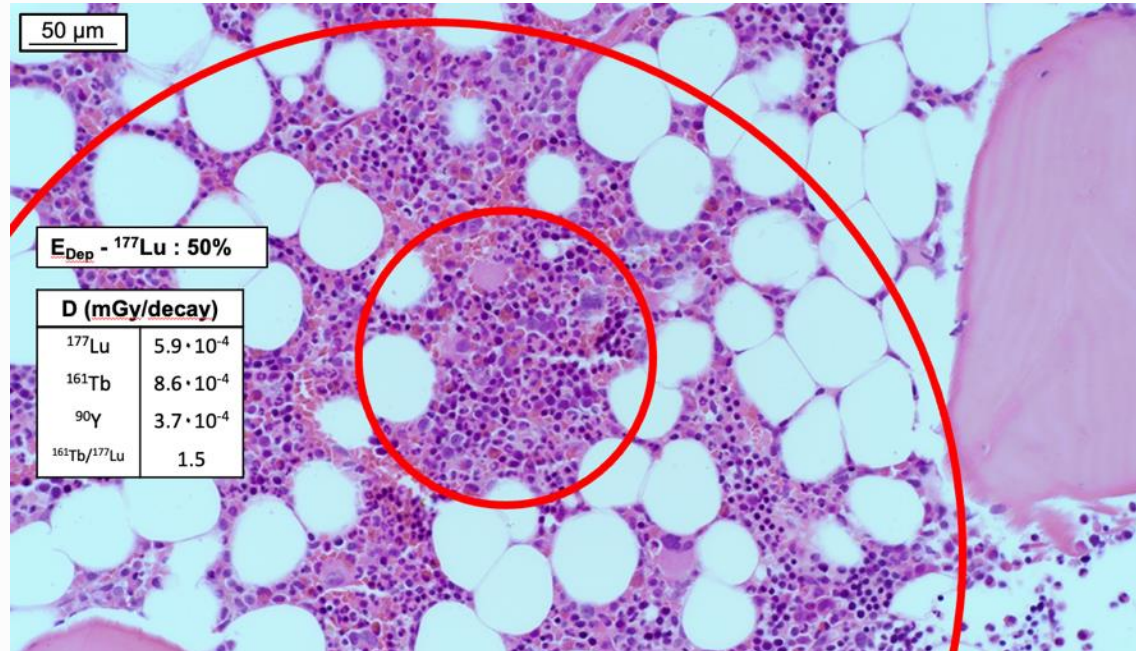


# Small-scale dosimetry

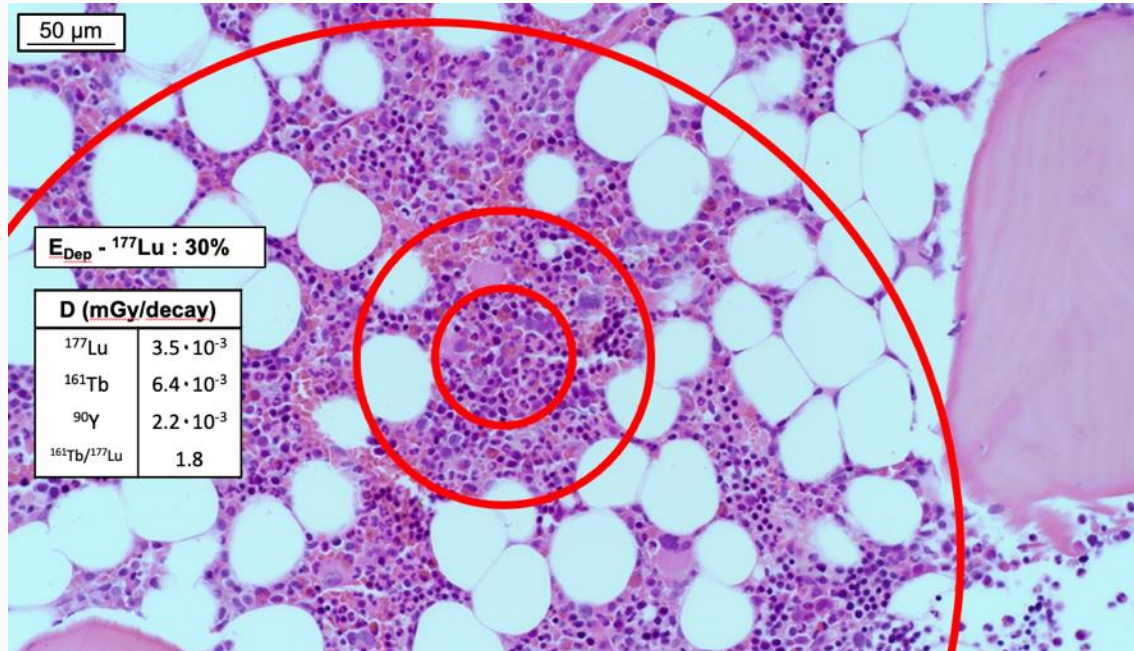




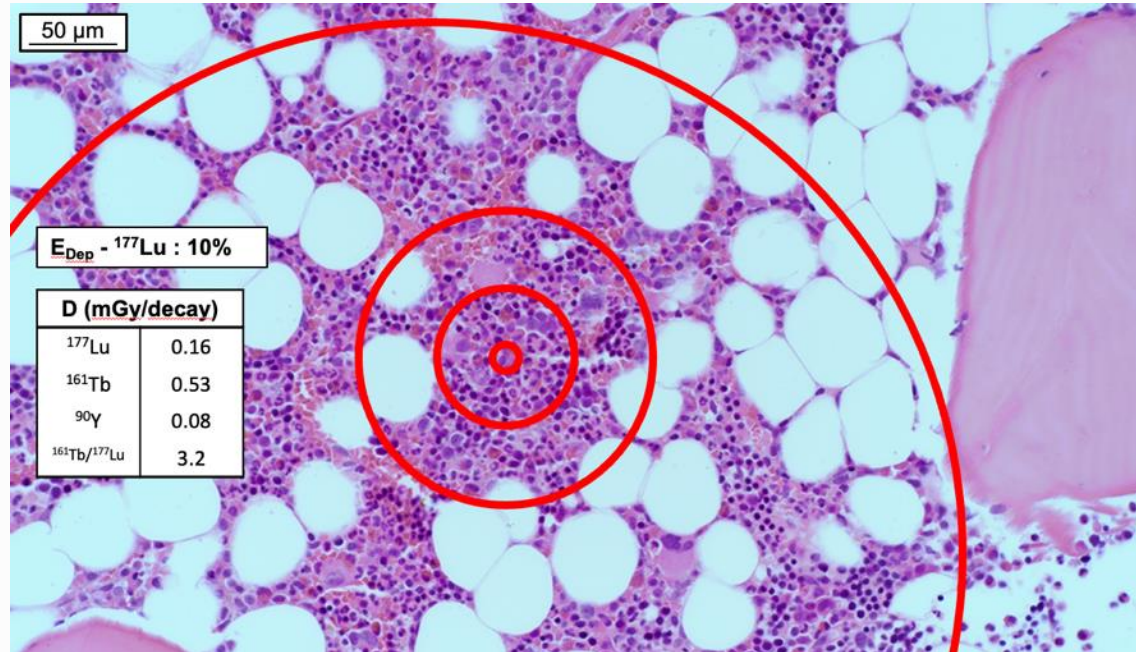
# Small-scale dosimetry



# Small-scale dosimetry



# Small-scale dosimetry



# Is Radionuclide Therapy with $^{161}\text{Tb}$ Really Happening?

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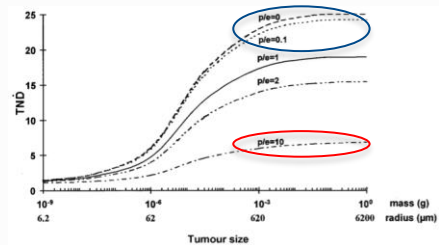
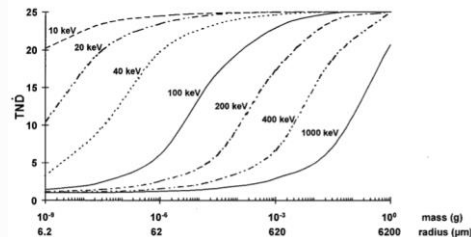
First treatments with  $^{177}\text{Lu}$ -DOTATATE

"In-house" production and PRRT treatments

## Low-energy Electron Emitters for Targeted Radiotherapy of Small Tumours

Peter Bernhardt, Eva Forsell-Aronsson, Lars Jacobsson and Gunnar Skarnemark

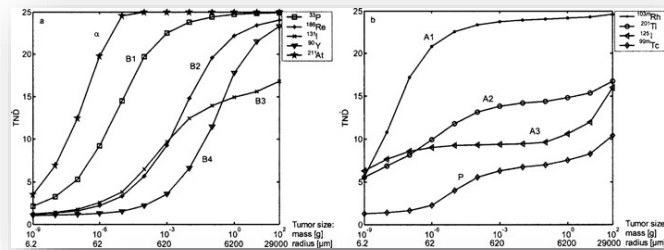
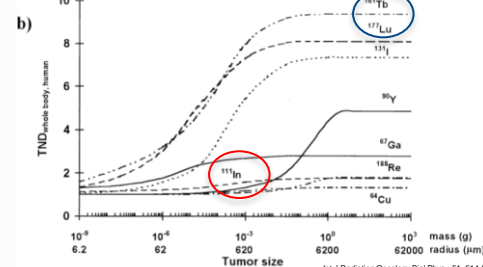
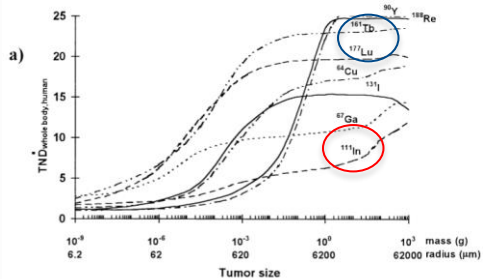
From the Department of Radiation Physics, Göteborg University, Sahlgrenska University Hospital (P. Bernhardt, E. Forsell-Aronsson, L. Jacobsson), and the Department of Nuclear Chemistry, Chalmers University of Technology (G. Skarnemark), Göteborg, Sweden



## BIOLOGY CONTRIBUTION

### DOSIMETRIC COMPARISON OF RADIONUCLIDES FOR THERAPY OF SOMATOSTATIN RECEPTOR-EXPRESSING TUMORS

PETER BERNHARDT, Ph.D.,\* SVEN ANDERS BENEGÅRD, M.Sc.,\* LARS KÖLBY, M.D., Ph.D.,† VIKTOR JOHANSSON, M.D., Ph.D.,‡ OLA NILSSON, M.D., Ph.D.,‡ HÅKAN ÅHELMAN, M.D., Ph.D.,‡ AND EVA FORSELL-ARONSSON, Ph.D.\*



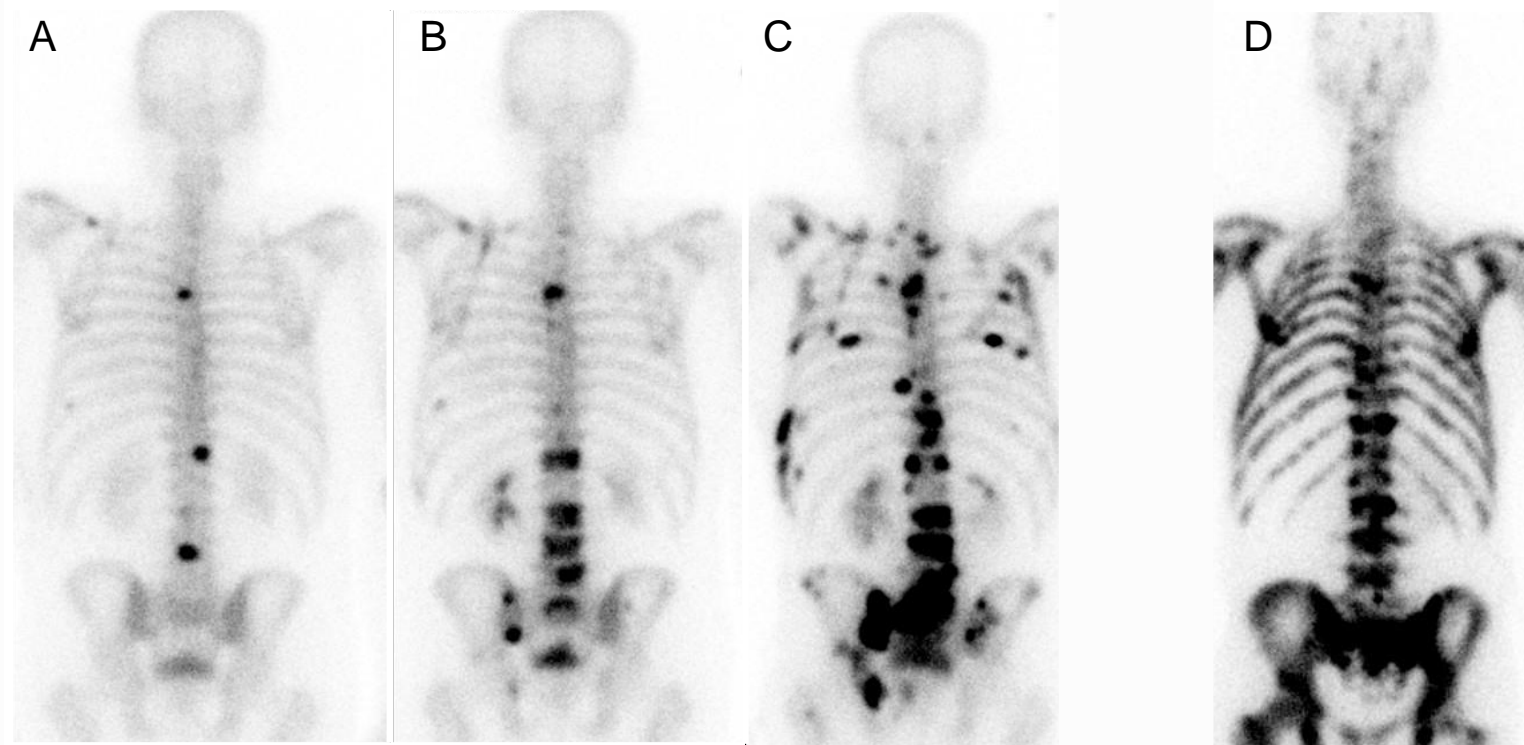
Group	Radio-nuclide	Decay mode	Half-life	p/e	Mean energy (keV)	TND value, mean/max		
						Uniform	Nucleus	Cytoplasm
B1	$^{177}\text{Lu}$	$\beta^-$	25 d	0	76	17/25	19/28	19/28
	$^{161}\text{Tb}$	$\beta^-$	11.4 d	$4.1 \times 10^{-4}$	115	15/25	16/26	16/26
B2	$^{111}\text{In}$	$\beta^-$	6.9 d	0.16	154	14/23	19/29	16/26
	$^{177}\text{Lu}$	$\beta^-$	6.7 d	0.24	145	13/23	15/25	14/25
	$^{153}\text{Sm}$	$\beta^-$	3.1 d	0.62	82	13/23	15/23	15/23
	$^{125}\text{I}$	$\beta^-$	1.9 d	0.23	229	12/23	14/25	13/24
	$^{125}\text{Ba}$	$\beta^-$	1.6 d	0.04	231	12/24	13/25	13/25
	$^{125}\text{La}$	$\beta^-$	1.5 d	0.50	133	12/22	13/23	12/23
	$^{125}\text{Ce}$	$\beta^-$	1.4 h	0.03	361	12/24	13/26	12/25
	$^{125}\text{Nd}$	IT, EC	50 d	0.66	162	12/23	13/23	12/22
	$^{125}\text{Pb}$	$\beta^-$	2.6 d	0.74	121	12/22	13/22	12/22
	$^{125}\text{Bi}$	$\beta^-$	3.3 d	0.66	143	11/23	12/22	12/22
B3	$^{188}\text{Re}$	$\beta^-$ , EC	3.7 d	0.06	362	11/24	11/25	11/24
	$^{177}\text{Lu}$	$\beta^-$	7.5 d	0.08	263	10/24	11/24	11/24
	$^{111}\text{In}$	$\beta^-$	2.2 d	0.03	370	10/24	11/24	11/24
	$^{125}\text{I}$	EC	9.2 d	1.16	16	11/19	14/22	13/21
	$^{111}\text{In}$	IT, $\beta^-$ , EC, $\beta^+$	4.5 h	0.94	308	9/20	10/21	9/20
	$^{64}\text{Cu}$	$\beta^-$ , EC, $\beta^+$	13 h	1.54	190	9/18	10/19	9/18
	$^{177}\text{Lu}$	$\beta^-$	8.0 d	2	192	8/17	9/17	9/17
	$^{161}\text{Tb}$	IT/ $\beta^-$ , EC, $\beta^+$	4.4 h/17 min	0.13	801	9/23	10/24	10/24
	$^{177}\text{Lu}$	$\beta^-$	11.4 d	0	695	9/24	9/24	9/24
	$^{177}\text{Lu}$	$\beta^-$	31 d	0.002	583	9/24	9/24	9/24
B4	$^{161}\text{Tb}$	$\beta^-$	1.1 d	0.04	695	9/23	9/24	9/24
	$^{177}\text{Lu}$	$\beta^-$	17 h	0.07	795	8/23	8/23	8/23
	$^{177}\text{Lu}$	$\beta^-$	19 h	0.11	847	8/23	8/23	8/23
	$^{177}\text{Lu}$	$\beta^-$	2.7 d	$1.2 \times 10^{-6}$	934	8/23	8/23	8/23
	$^{177}\text{Lu}$	EC/EC, $\beta^+$	3.2 d/6.7 min	0.96	1206	6/18	6/19	6/19

Acta Oncologica Vol. 40, No. 5, pp. 602–608, 2001

Int. J. Radiation Oncology Biol Phys., 51, 514-524, 2001

# Response characterization of radionuclides

## The metastatic control probability model



Bernhardt P, Ahlman H, Forsell-Aronsson E. Model of metastatic growth valuable for radionuclide therapy. Med Phys. 2003 Dec;30(12):3227-32.

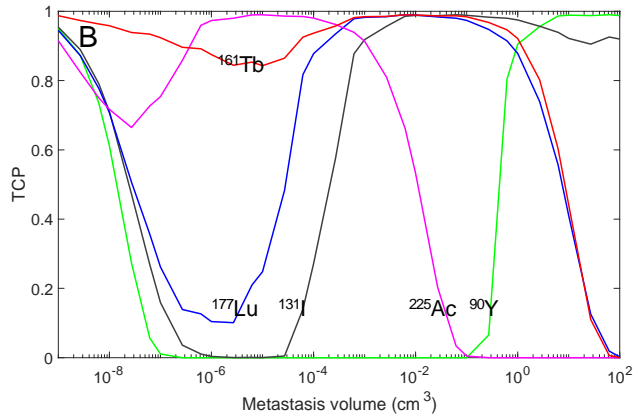
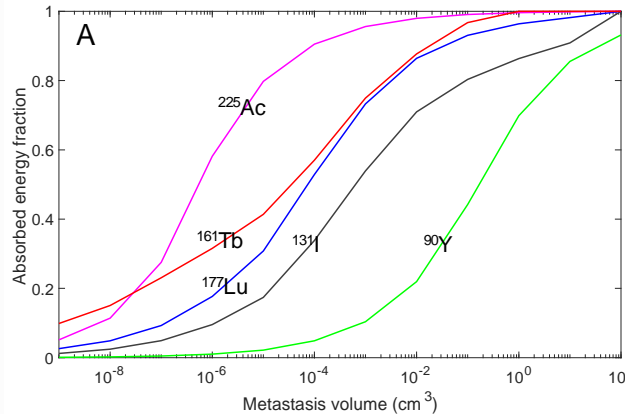
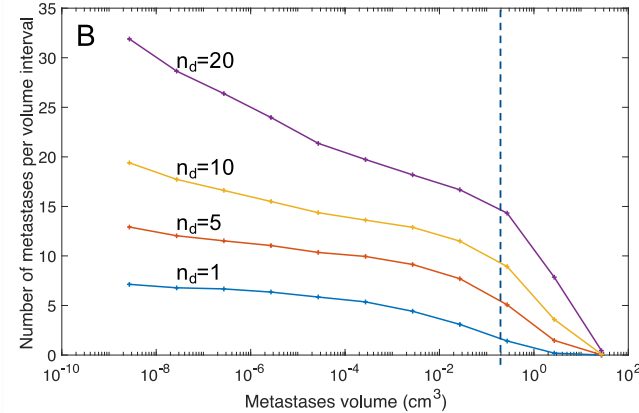
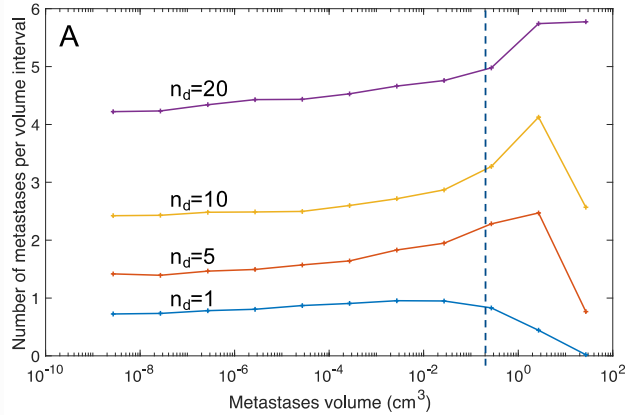
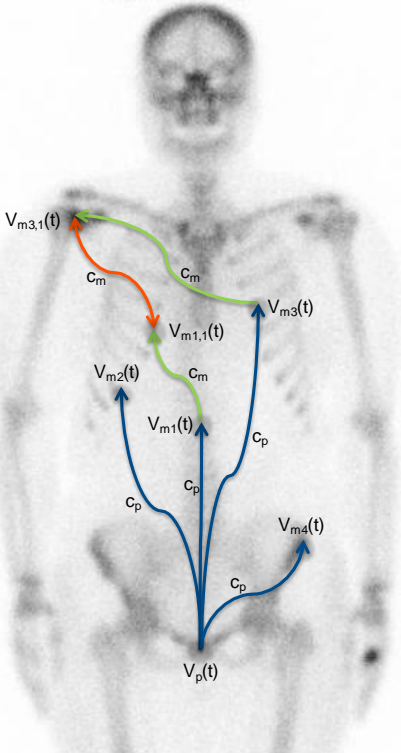


# Response characterization of radionuclides

Article

## Dosimetric Analysis of the Short-Ranged Particle Emitter $^{161}\text{Tb}$ for Radionuclide Therapy of Metastatic Prostate Cancer

Peter Bernhardt<sup>1,2,\*</sup>, Johanna Svensson<sup>3</sup>, Jens Hemmingsson<sup>1,6</sup>, Nicholas P. van der Meulen<sup>4,5</sup>, Jan Rijn Zeevaert<sup>6</sup>, Mark W. Konijnenberg<sup>7</sup>, Cristina Müller<sup>4,6</sup> and Jon Kindblom<sup>3</sup>





# Response characterization of radionuclides

Radionuclide	Required absorbed dose				
	Number of detectable metastases				
	0	1	5	10	20
<sup>90</sup> Y	80	2630-3010 Gy	2740-3130 Gy	2860-3220 Gy	3000-3330 Gy
<sup>131</sup> I	80	920-1120 Gy	985-1170 Gy	1040-1220 Gy	1100-1270 Gy
<sup>177</sup> Lu	80	558-682 Gy	598-715 Gy	630-742 Gy	672-777 Gy
<sup>225</sup> Ac	80	243-292 Gy <sub>5</sub>	252-307 Gy <sub>5</sub>	269-320 Gy <sub>5</sub>	288-335 Gy <sub>5</sub>
<sup>161</sup> Tb	80	207-247 Gy	220-260 Gy	230-270 Gy	245-281 Gy

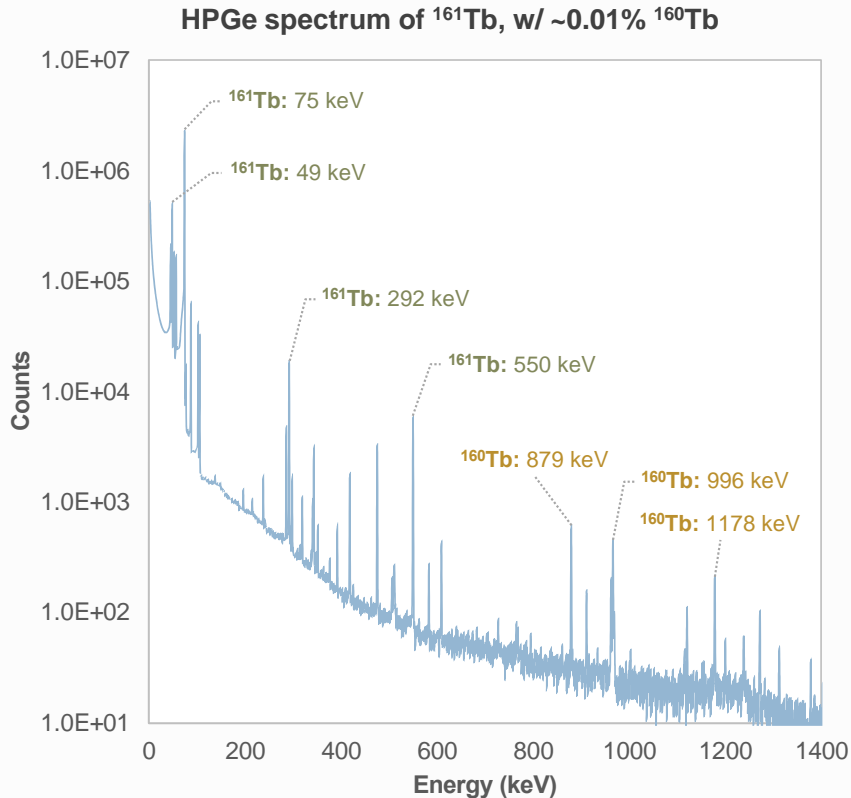
# Clinical dosimetry & SPECT imaging with $^{161}\text{Tb}$

Isotope	$^{177}\text{Lu}$	$^{161}\text{Tb}$
Decay mode	$\beta^-$ (100%)	$\beta^-$ (100%)
$T_{1/2}$ (d)	6.64	6.89
Daughter	$^{177}\text{Hf}$ (Stable)	$^{161}\text{Dy}$ (Stable)
$\Delta_{\beta^-}$ (keV)	133	156
$\Delta_{\text{CE\&Auger}}$ (keV)	13.8	46.3
Notable X/ $\gamma$ -emissions (Yield >1%)	8.9 (3.2%, X)	7.2 (22.1%, X)
	54.6 (1.6%, X)	25.7 (23.1%, $\gamma$ )
	55.8 (2.8%, X)	45.2 (6.3%, X)
	112.9 (6.2%, $\gamma$ )	46.0 (11.3%, X)
	208.4 (10.4%, $\gamma$ )	48.9 (17.1%, $\gamma$ )
		52.2 (3.6%, X)
	57.2 (1.8%, $\gamma$ )	
	74.6 (10.3%, $\gamma$ )	

Westerbergh, F., Rydén, T., van Essen, M., van der Meulen, N. P., Müller, C., & Bernhardt, P. (2022). Exploring the quantitative impact of non-uniformities in SPECT-imaging with  $^{161}\text{Tb}$  [Conference abstract]. Eur J Nucl Med Mol Imaging, Vol 49, Suppl 1 (p. 256). Available from: <https://doi.org/10.1007/s00259-022-05924-4>

Westerbergh, F., van der Meulen, N. P., Müller, C., Grings, A., Ritt, P., & Bernhardt, P. (2023). Demonstrating the quantitative potential of terbium-161 SPECT/CT imaging: An anthropomorphic phantom study [Conference abstract]. Eur J Nucl Med Mol Imaging, Vol 50, Suppl 1 (p. 38). Available from: <https://doi.org/10.1007/s00259-023-06333-x>

# Clinical dosimetry & SPECT imaging with $^{161}\text{Tb}$



## Challenges in $^{161}\text{Tb}$ -imaging

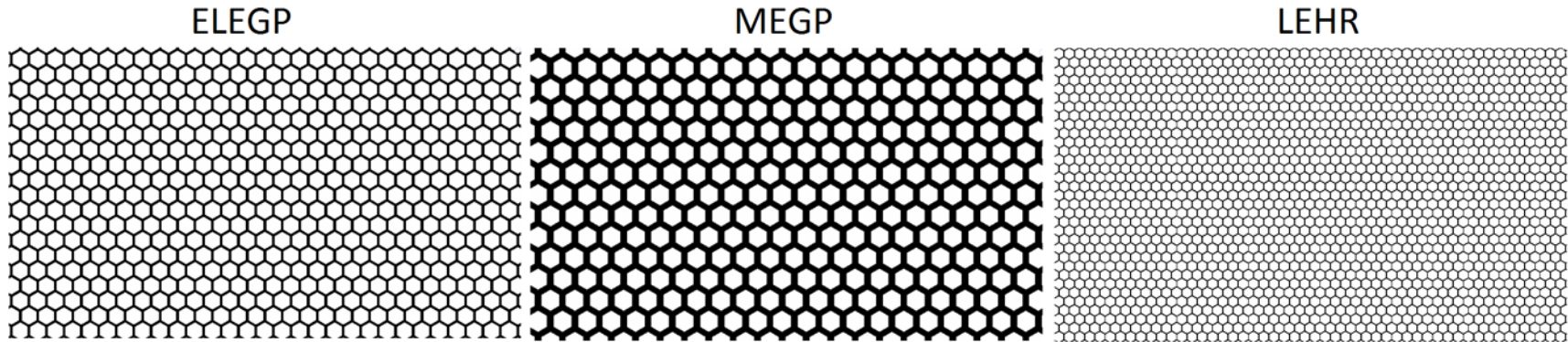
- Imageable emissions are low in energy (49 & 75 keV)
  - Outside the usual  $\gamma$ -camera operating range
- Some higher-energy, low-yield  $^{161}\text{Tb}$   $\gamma$ 
  - E.g. 103 keV (0.1%), 292 keV (0.06%), 550 keV (0.04%)
- Some very high-energy  $^{160}\text{Tb}$   $\gamma$ 
  - E.g. 879 keV (30%), 966 keV (25%), 1178 keV (15%)
  - High yield, but low abundance [1]

[1] Gracheva N, Müller C, Talip Z, Heinitz S, Köster U, Zeevaart JR, et al. Production and characterization of no-carrier-added  $^{161}\text{Tb}$  as an alternative to the clinically-applied  $^{177}\text{Lu}$  for radionuclide therapy. EJNMMI Radiopharmacy and Chemistry. 2019;4(1).

# Clinical dosimetry & SPECT imaging with $^{161}\text{Tb}$

## Choice of collimator

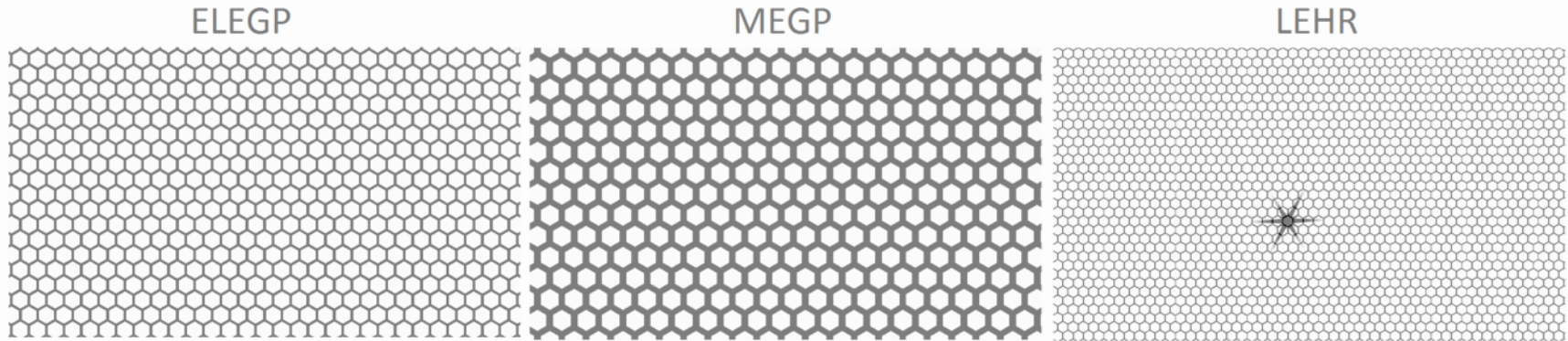
- Extended low energy general purpose (ELEGP)
- Medium energy general purpose (MEGP)
- Low energy high resolution (LEHR)



# Clinical dosimetry & SPECT imaging with $^{161}\text{Tb}$

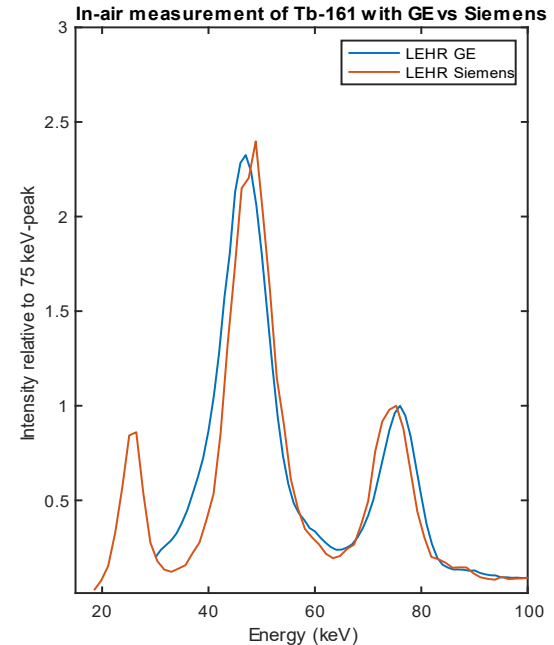
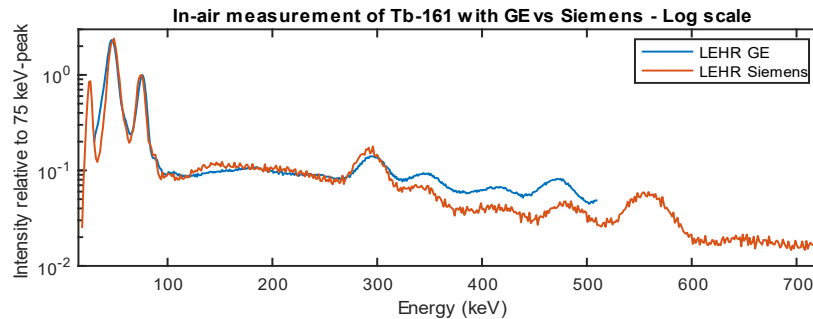
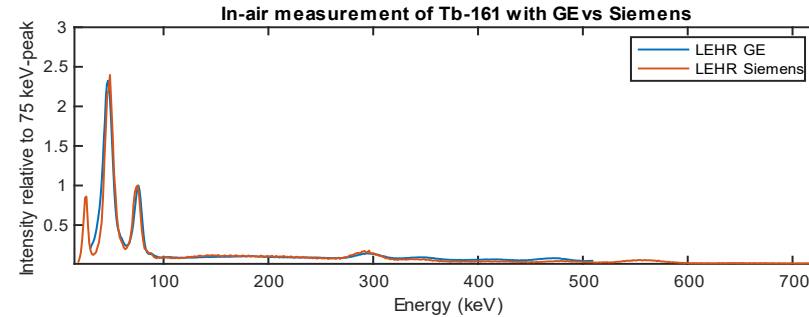
## Choice of collimator

- Extended low energy general purpose (ELEGP)
- Medium energy general purpose (MEGP)
- Low energy high resolution (LEHR)



# Clinical dosimetry & SPECT imaging with $^{161}\text{Tb}$

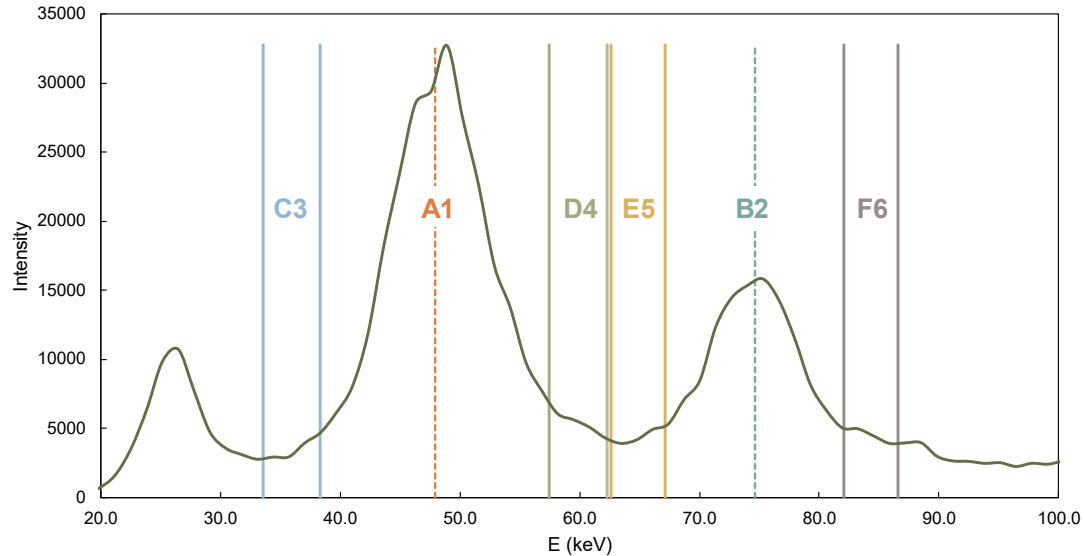
## Energy window settings





# Clinical dosimetry & SPECT imaging with $^{161}\text{Tb}$

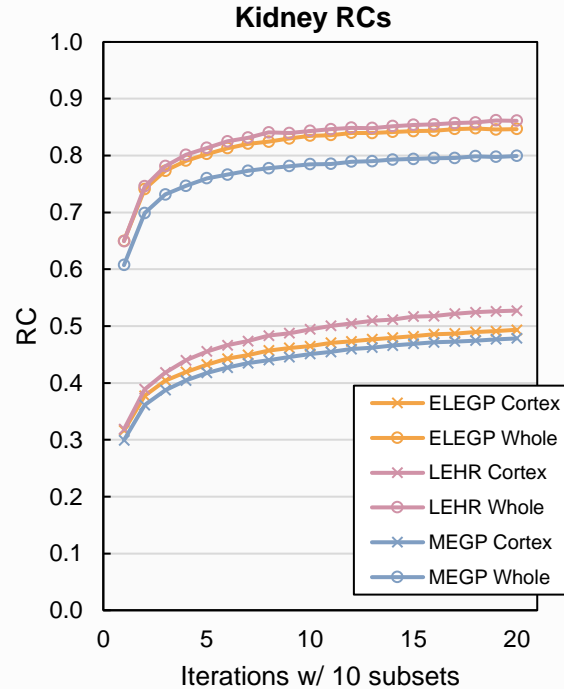
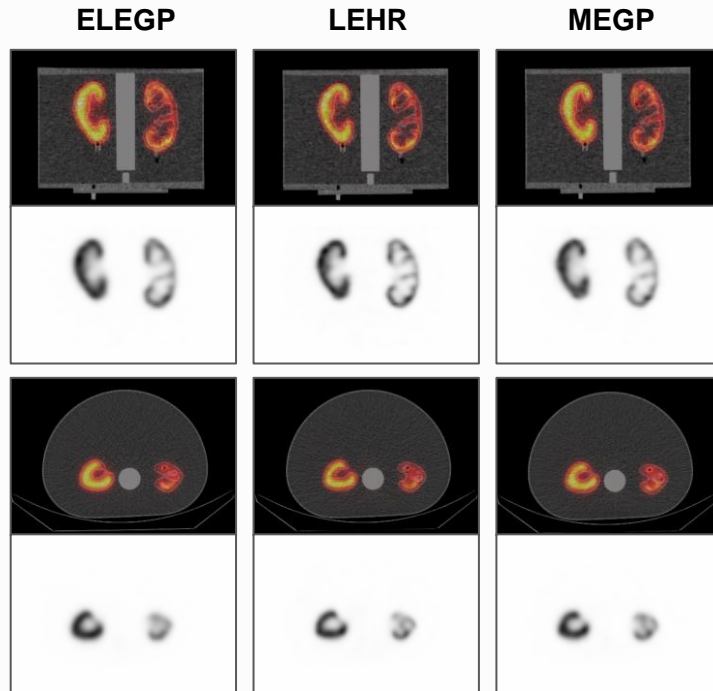
Tb-161 Window Settings



Number	Center (keV)	Width (%)	Shift (%)	Type	Parent
A1	48	40	0	Photopeak	
B2	75	20	0	Photopeak	
C3		10		Lower Scatter	A1
D4		10		Upper Scatter	A1
E5		6		Lower Scatter	B2
F6		6		Upper Scatter	B2

# Clinical dosimetry & SPECT imaging with $^{161}\text{Tb}$

## Kidney RCs



- RC highest for LEHR, followed by ELEGP and MEGP

# Is Radionuclide Therapy with $^{161}\text{Tb}$ Really Happening?

## First-in-Humans Application of $^{161}\text{Tb}$ : A Feasibility Study Using $^{161}\text{Tb}$ -DOTATOC

Richard P. Baum<sup>1</sup>, Aviral Singh<sup>1,2</sup>, Harshad R. Kulkarni<sup>1</sup>, Peter Bernhardt<sup>3,4</sup>, Tobias Rydén<sup>3,4</sup>, Christiane Schuchardt<sup>1</sup>, Nadezda Gracheva<sup>5</sup>, Pascal V. Grundler<sup>5</sup>, Ulli Köster<sup>6</sup>, Dirk Müller<sup>6</sup>, Michael Prohl<sup>7</sup>, Jan Rijn Zeevaert<sup>8</sup>, Roger Schibli<sup>3,9</sup>, Nicholas P. van der Meulen<sup>5,10</sup>, and Cristina Müller<sup>3</sup>

J Nucl Med 2021; 62:1391-1397

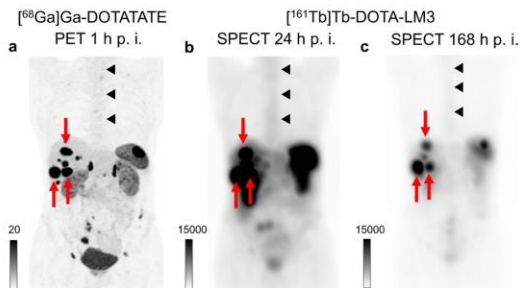
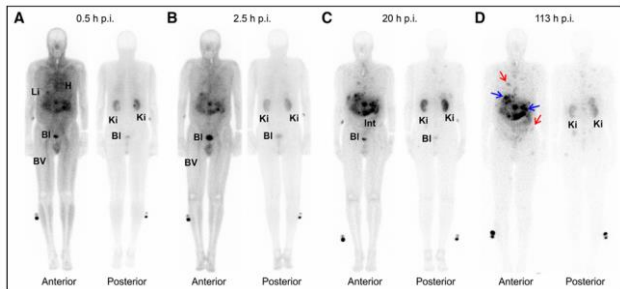
European Journal of Nuclear Medicine and Molecular Imaging  
https://doi.org/10.1007/s00292-024-06641-w

IMAGE OF THE MONTH

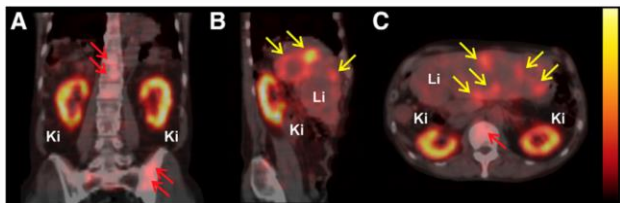
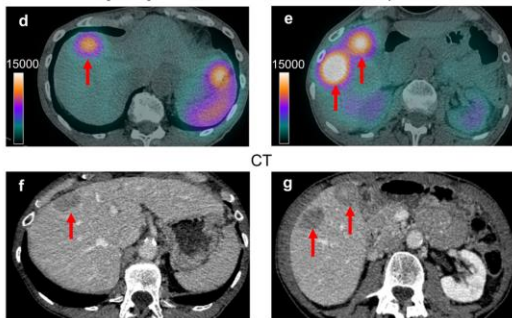


## First-in-human administration of terbium-161-labelled somatostatin receptor subtype 2 antagonist ( $^{161}\text{Tb}$ )Tb-DOTA-LM3 in a patient with a metastatic neuroendocrine tumour of the ileum

Julia Fricke<sup>1</sup>, Frida Westerbergh<sup>2</sup>, Lisa McDougall<sup>1</sup>, Chiara Favaretto<sup>1,3</sup>, Emanuel Christ<sup>4,5</sup>, Guillaume P. Nicolas<sup>1,4</sup>, Susanne Geitlich<sup>3</sup>, Francesca Borgna<sup>3</sup>, Melpomeni Fani<sup>7</sup>, Peter Bernhardt<sup>3,9</sup>, Nicholas P. van der Meulen<sup>3,9</sup>, Cristina Müller<sup>3,9</sup>, Roger Schibli<sup>3,9</sup>, Damian Wild<sup>1,4</sup>



$^{161}\text{Tb}$ )Tb-DOTA-LM3 SPECT/CT 168 h p. i.



Theranostics 2024, Vol. 14, Issue 5

1829



Theranostics

2024; 14(5): 1829-1840. doi: 10.7150/thno.92273

Research Paper

## $^{161}\text{Tb}$ )Tb-PSMA-617 radioligand therapy in patients with mCRPC: preliminary dosimetry results and intra-individual head-to-head comparison to $^{177}\text{Lu}$ ]Lu-PSMA-617

Andrea Schaefer-Schuler, Caroline Burgard, Arne Blickle, Stephan Maus, Christine Petrescu, Sven Petto, Mark Bartholomé, Tobias Stemler, Samer Ezziddin and Florian Rosar<sup>1</sup>

## From Despair to Hope: First Arabic Experience of $^{177}\text{Lu}$ -PSMA and $^{161}\text{Tb}$ -PSMA Therapy for Metastatic Castration-Resistant Prostate Cancer

by Akram Al-Ibraheem 1,2,\* Ahmed Saad Abdulkadir 1 Deya' Aldeen Sweedat 1 Stephan Maus 3 Ula Al-Rasheed 1 Samer Salah 4 Fadi Khriesh 5 Diyaa Juaidi 1 Dina Abu Dayek 1 Feras Istatieh 1 Farah Anwar 6 Aisha Asrawi 7 Alaa Abufara 4 Mohammad Al-Rwashdeh 4 Ramiz Abu-Hijjeh 8 Baha' Sharaf 4 Rami Ganem 9 Hikmat Abdel-Razeq 4 and Asem Mansour 10

McIntosh et al. EJNMMI Physics (2024) 11:18  
https://doi.org/10.1186/s40658-024-00611-9

EJNMMI Physics

ORIGINAL RESEARCH

Open Access

## Quantitative calibration of Tb-161 SPECT/CT in view of personalised dosimetry assessment studies

Lachlan McIntosh<sup>1,2\*</sup>, Price Jackson<sup>3,2</sup>, Brittany Emmerson<sup>1</sup>, James P Buteau<sup>3</sup>, Ramin Alipour<sup>1,3</sup>, Grace Kong<sup>3</sup> and Michael S. Hoffman<sup>1,3</sup>

# Is Radionuclide Therapy with $^{161}\text{Tb}$ Really Happening?

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## Clinical trials

### Beta plus

Combined Beta- Plus Auger Electron Therapy Using a Novel Somatostatin Receptor Subtype 2 Antagonist Labelled With Terbium-161 ( $^{161}\text{Tb}$ -DOTA-LM3) (Beta plus)

### PROGNOSTICS

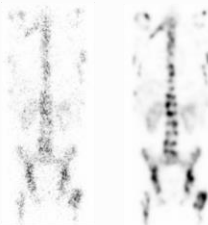
Targeted Radionuclide Therapy in Metastatic Prostate Cancer Using a New PSMA Ligand Radiolabelled With Terbium-161 ( $^{161}\text{Tb}$ -SibuDAB) - Dose Identification/Escalation Phase Ia/b Study

### VIOLET

EValuation of radIOLigand Treatment in mEn With Metastatic Castration-resistant Prostate Cancer With [ $^{161}\text{Tb}$ ]Tb-PSMA-I&T

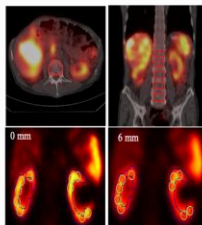


**Image reconstruction**



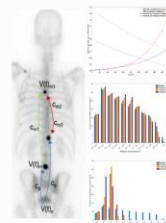
Researcher:  
Peter Bernhardt, Professor  
Tobias Rydén, PhD  
Martijn Van Essen, PhD, MD  
Emma Wikberg, PhD student  
Frida Westerbergh, PhD student  
Katja Smits, PhD student  
Jakob Himelmann PhD student

**Dosimetry**



Researcher:  
Peter Bernhardt, Professor  
Jens Hemmingsson, Postdoc  
Johanna Svensson, PhD, MD  
Andreas Hallqvist, PhD, MD  
Linn Hagmarker, PhD student  
Jehangir Khan, PhD student

**Response modelling & Clinical studies**



Researcher:  
Peter Bernhardt, Professor  
Johanna Svensson, PhD, MD  
Jon Kindblom, PhD, MD  
Andreas Hallqvist, PhD, MD  
Elva Brynjarsdottir, PhD student, MD  
Katja Smits, PhD student

**Radiobiology**

Cristina Müller, Professor  
Paul Scherrer institute, Schweiz

**Radiochemistry**

Nick Van der Meulen, PhD  
Paul Scherrer institute, Schweiz

**Clinical studies**

Daiman Wild, Professor  
Basel University Hospital, Schweiz

International Collaborators

**Clinical studies:**

ILUMINET; <sup>177</sup>Lu-DOTATATE, academic driven phase II study, PI: Johanna Svensson, Gothenburg University; PI: Anna Sundlöv, Lund University  
STARTNET; <sup>177</sup>Lu-DOTATOC, academic driven phase II study, PI: Andreas Hallqvist, Gothenburg University; PI: Pernilla Asp, Lund University  
LuPARP; <sup>177</sup>Lu-DOTATATE+olaparib, academic driven phase I study, PI: Andreas Hallqvist, Gothenburg University  
Betaplus; <sup>166</sup>Tb-ML3, academic driven phase 0/1 study, PI: Daiman Wild, Basel University Hospital  
PROGNOSTICS; <sup>166</sup>Tb-PSMA, academic driven phase 0/1 study, PI: Daiman Wild, Basel University Hospital  
VISION, PSMAaddition, PSMAfore, multicenter phase III studies, PI: Jon Kindblom, Gothenburg University



UNIVERSITY OF  
GOTHENBURG

# DOSIMETRIC COMPARISON OF THE RADIOLANTHANIDES LU-177 AND TB-161 FOR CANCER THERAPIES WITH RADIOPHARMACEUTICALS

PETER BERNHARDT, DEPARTMENT OF MEDICAL RADIATION SCIENCES, INSTITUTE OF CLINICAL SCIENCE