

A computational tool for Radiopharmaceutical Research: *In Vitro* Monte Carlo Simulations with TOPAS

Daniel Suárez García^{1*}, Miguel Antonio Cortés Giraldo¹, Alejandro Bertolet²

XV CPAN DAYS

October 2, 2023 – Santander

¹Department of Atomic, Molecular and Nuclear Physics, University of Sevilla, Spain

²Department of Radiation Oncology, Massachusetts General Hospital and Harvard Medical School, Boston, MA, USA

*email: dsgarcia@us.es

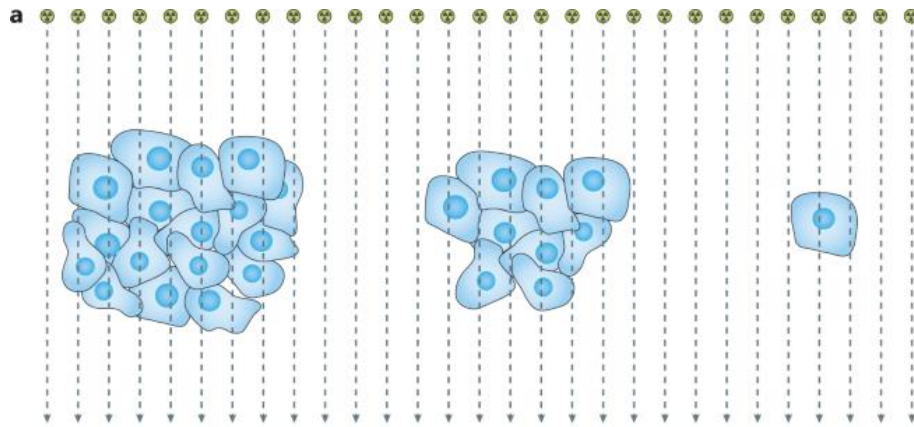


Massachusetts General Hospital
Founding Member, Mass General Brigham



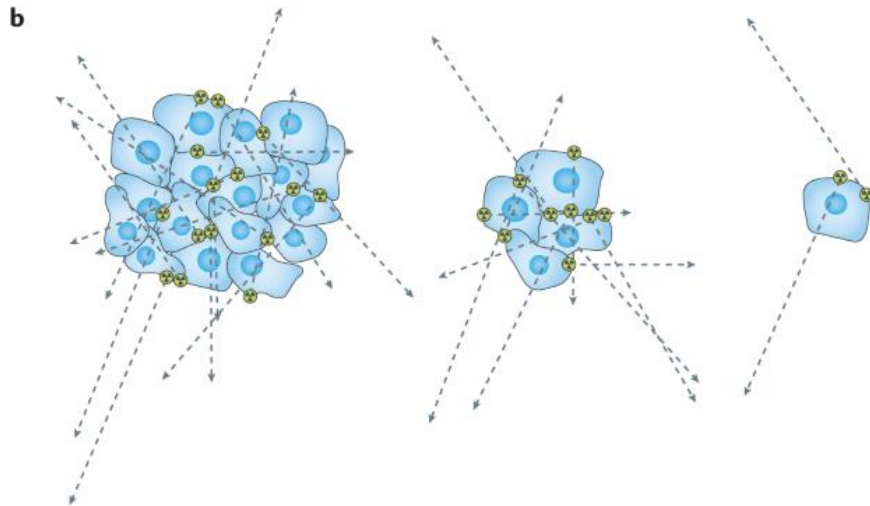
Radiopharmaceutical Therapy

Radiopharmaceutical therapy utilizes radiolabeled antibodies highly affine to antigens particularly expressed in tumor cell environments.



External beam therapy:

- Radiation beams from outside the body
- Exposes the surrounding healthy tissue
- Less invasive



Radiopharmaceutical therapy:

- Internalized radioactive substances
- Minimizes damage to healthy tissue
- Delivers a concentrated dose

In vitro RPT experiments

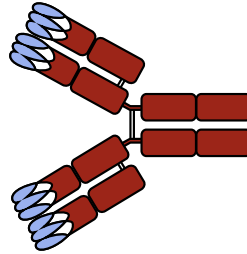
Radionuclide



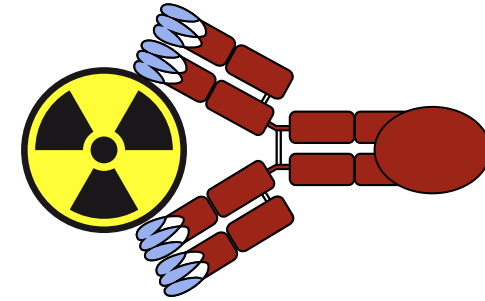
Chelate



Antibody



Radiopharmaceutical



In vitro RPT experiments

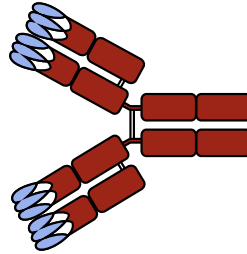
Radionuclide



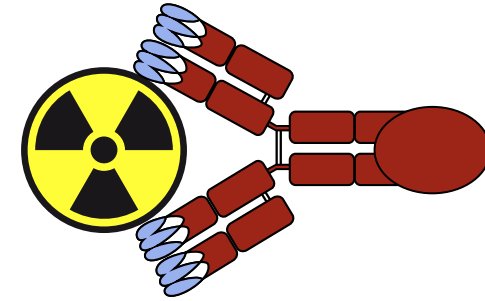
Chelate



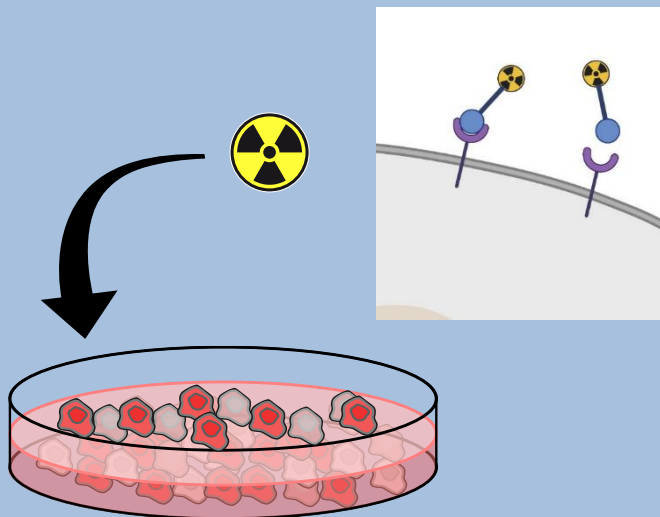
Antibody



Radiopharmaceutical



Stage 1: Injection

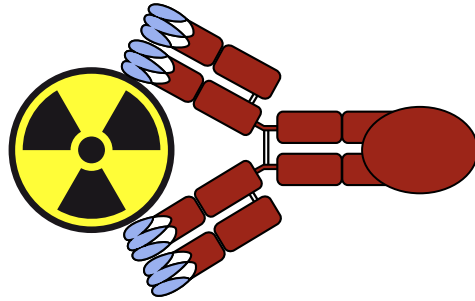


- Experiment initiates with the injection of the radiopharmaceutical into cell wells
- During this phase, the radionuclides are uniformly distributed across the medium
- After injection, they bind to cancer cells within the cell wells

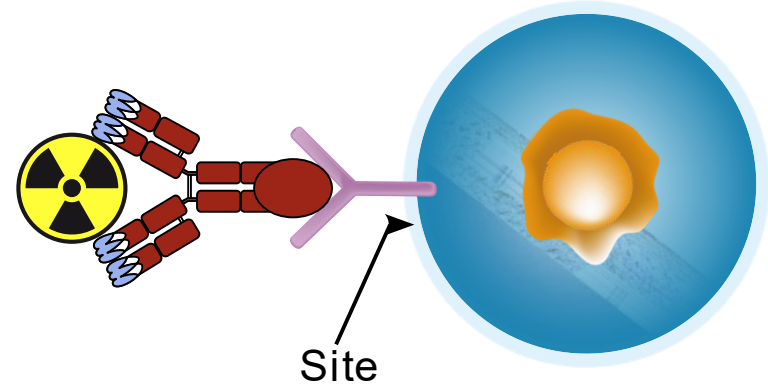
In vitro RPT experiments

5

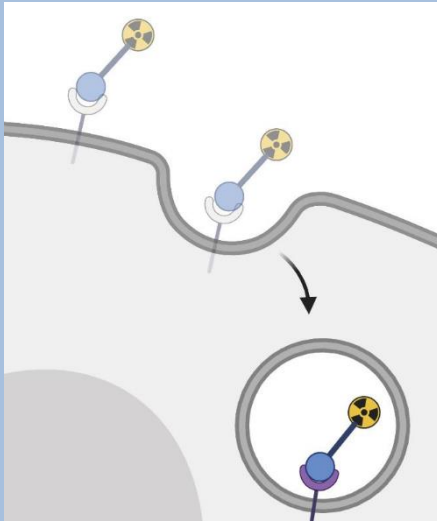
Radiopharmaceutical



Cancer cell



Stage 2: Internalization



- Binding characterized by K_d

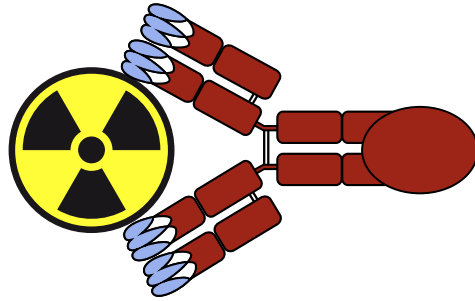
K_d : Concentration needed to have 50% of receptors bound

- Radiopharmaceuticals might internalize, i.e., pass through the membrane to the cytoplasm.

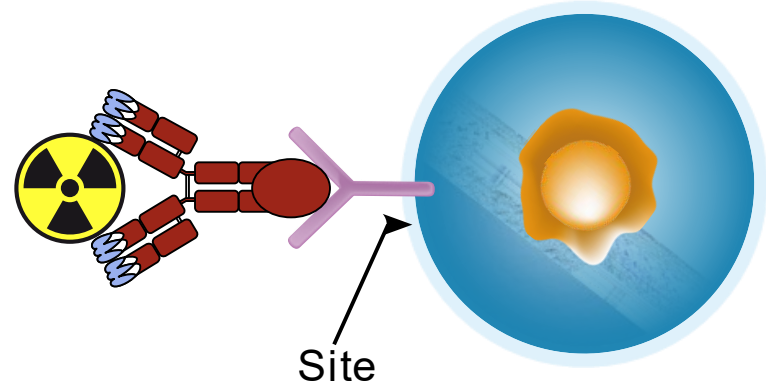
In vitro RPT experiments

6

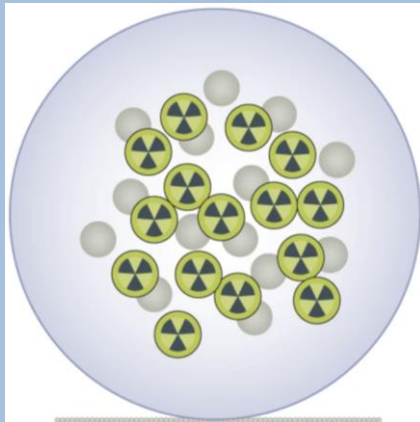
Radiopharmaceutical



Cancer cell



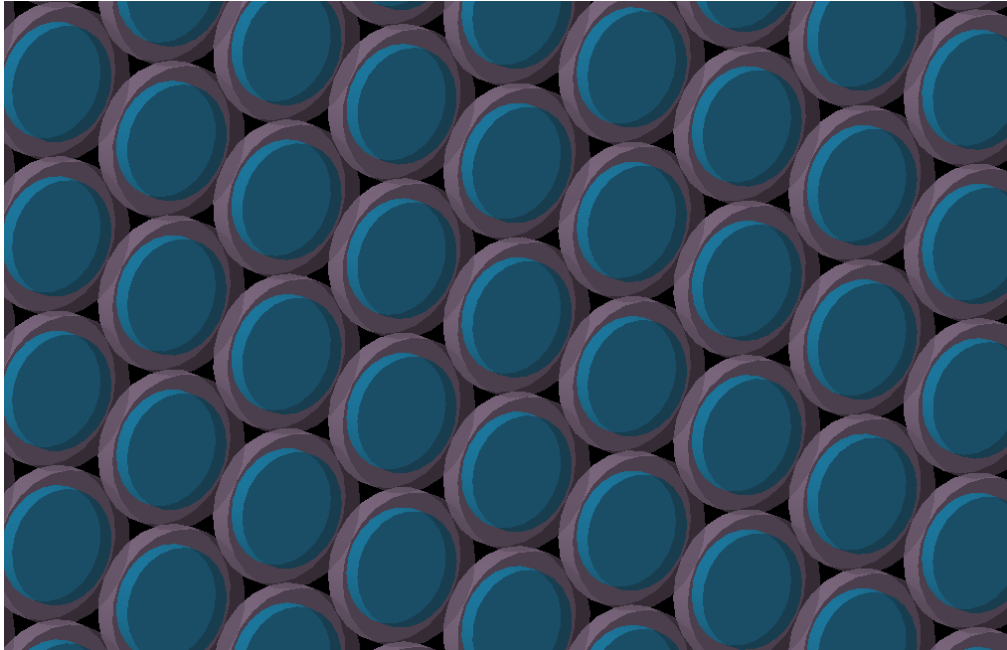
Stage 3: Already internalized



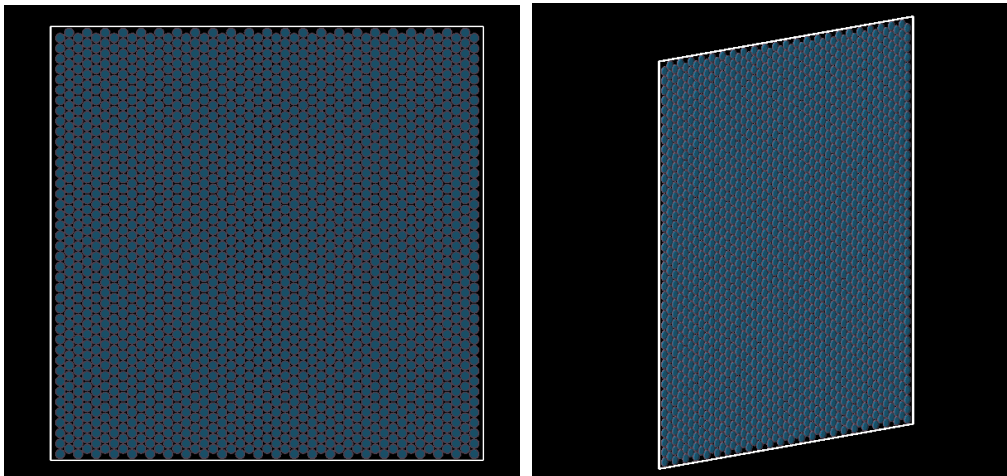
- Percentage of bound radiopharmaceutical internalizes into cytoplasm
- Radionuclide emits radiation directly from inside the cell

TOPAS tool: Geometry

7



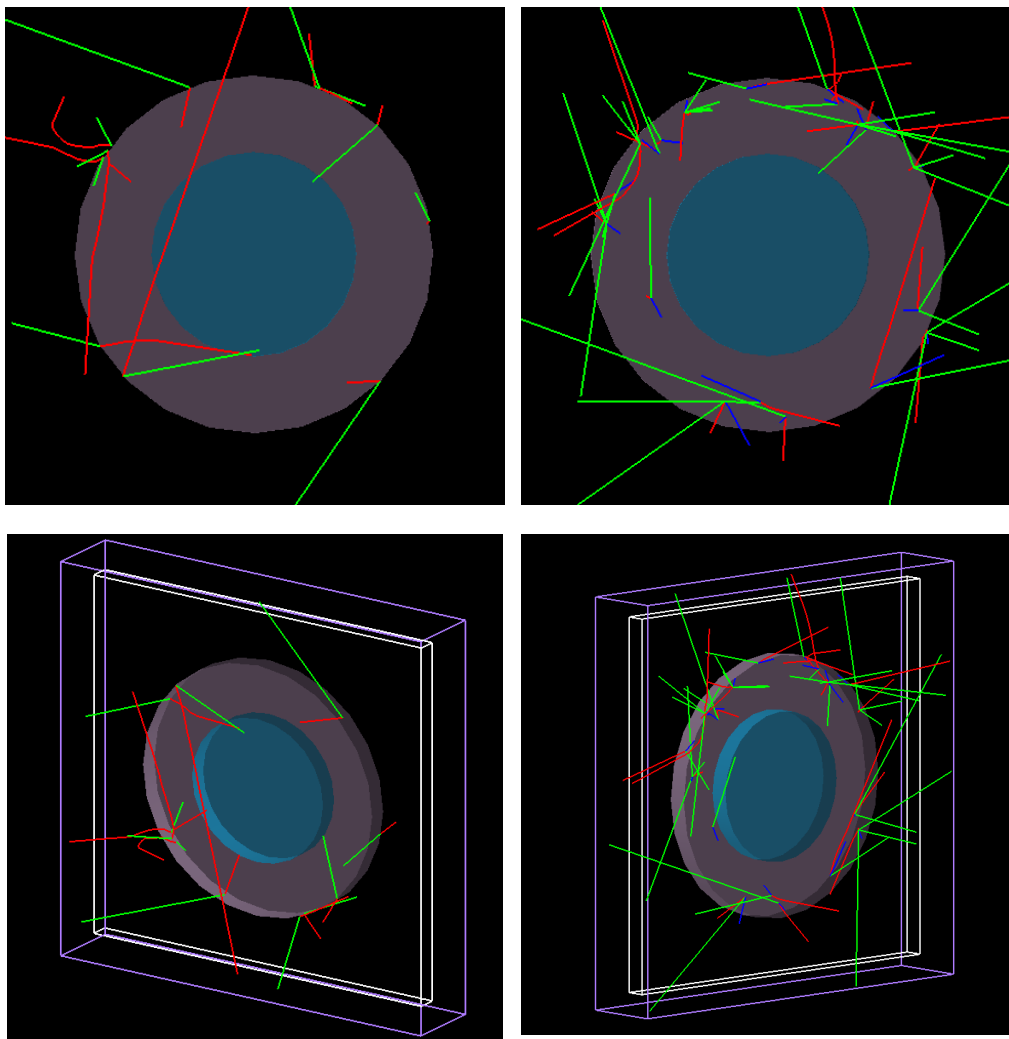
- Cell information
 - Cell radius and height
 - Nucleus radius and height



- Monolayer information
 - Monolayer dimension X, Y, Z

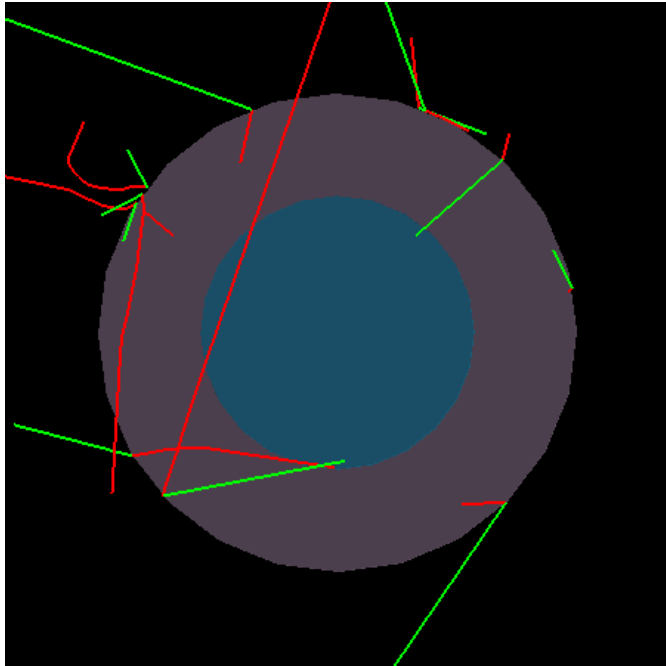
TOPAS tool: Source

8



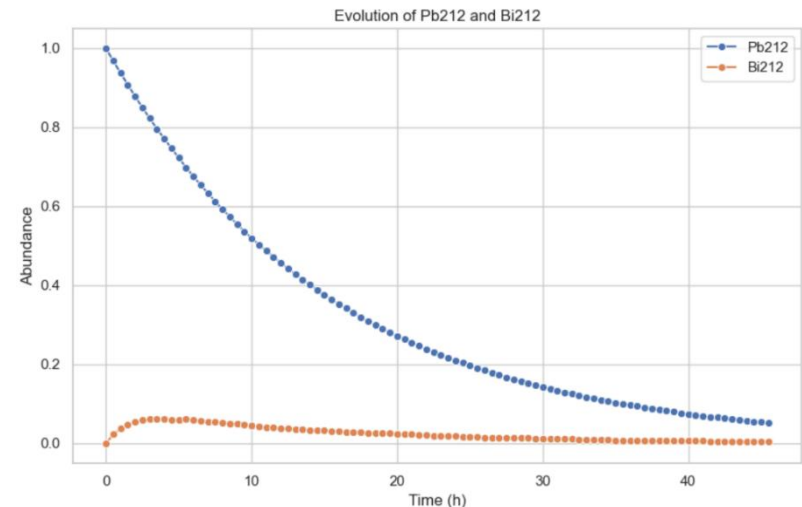
- Radionuclide
- Initial activity
- Initial and final time
- Concentration (kBq/mL)
- N° sites/cell
- Kd
- Specific activity (kBq/mol)

TOPAS tool: Scorer

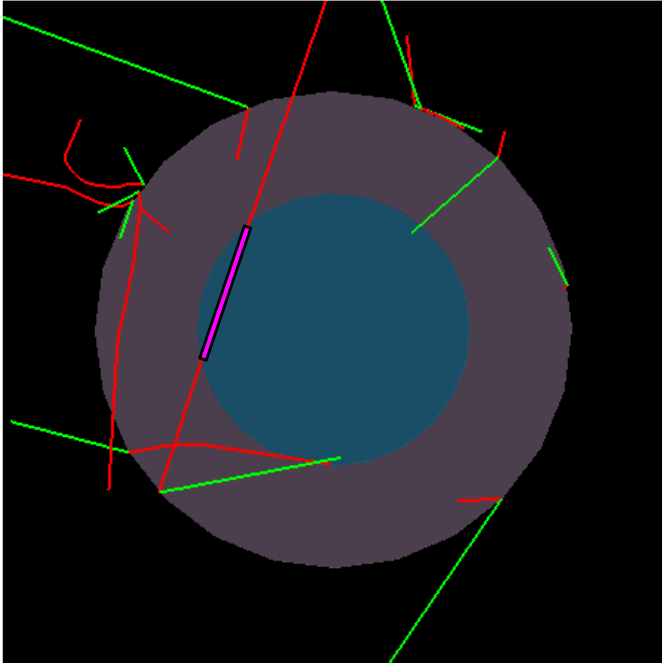


- Energy deposited in each nucleus
- Weight of each particle simulated:
 - N° decays/ N° histories
- The output is already weighted considering abundances over time in complex decay chains.

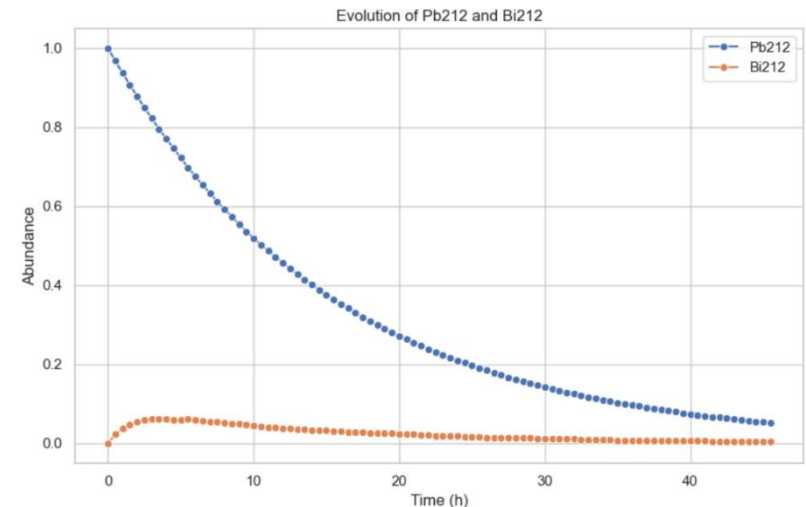
Nucleus	Energy deposited (MeV)
2	0.02
....
654	1.2



TOPAS tool: Scorer



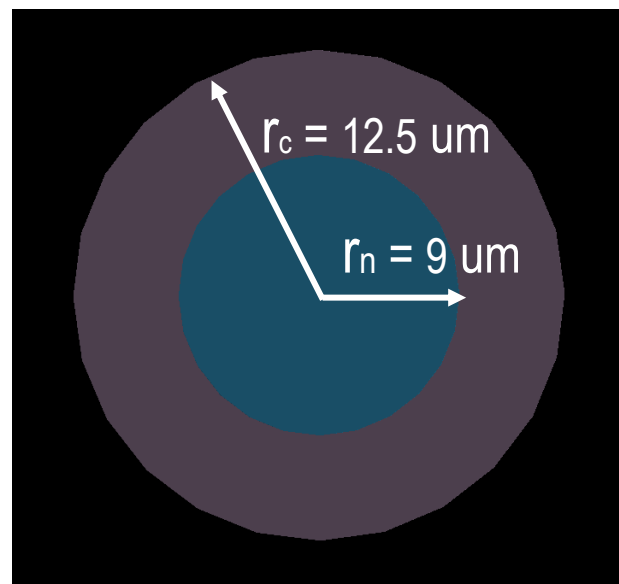
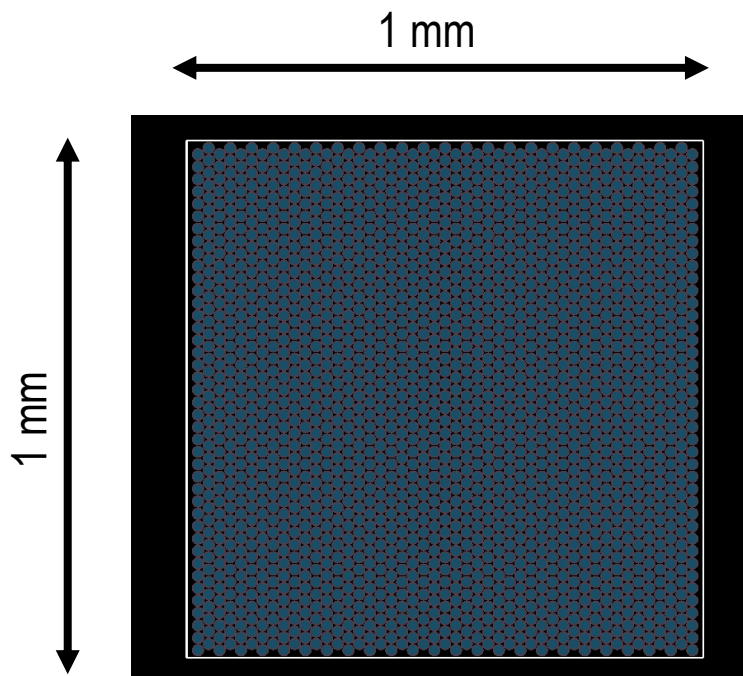
- Energy deposited in each nucleus
- Weight of each particle simulated:
 - N° decays/ N° histories
- The output is already weighted considering abundances over time in complex decay chains.



Nucleus	Energy deposited (MeV)
2	0.02
....
654	1.2

TOPAS tool: ^{212}Pb simulations

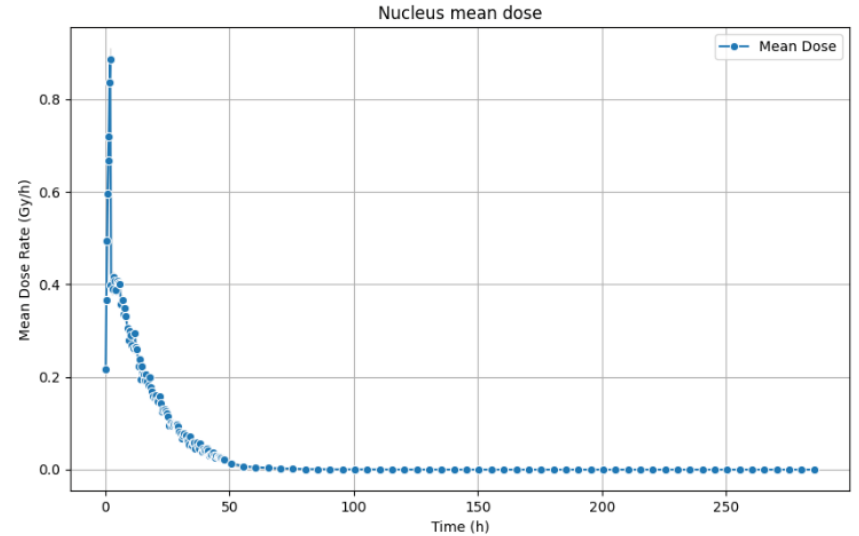
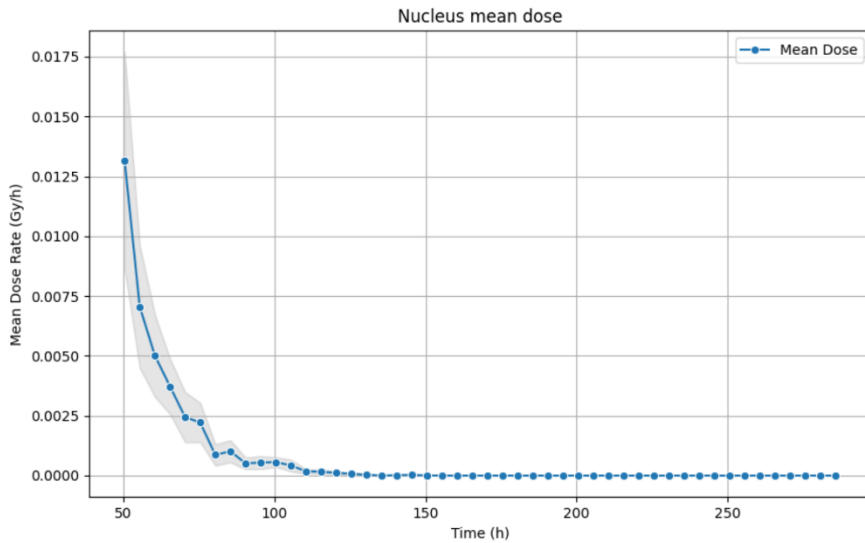
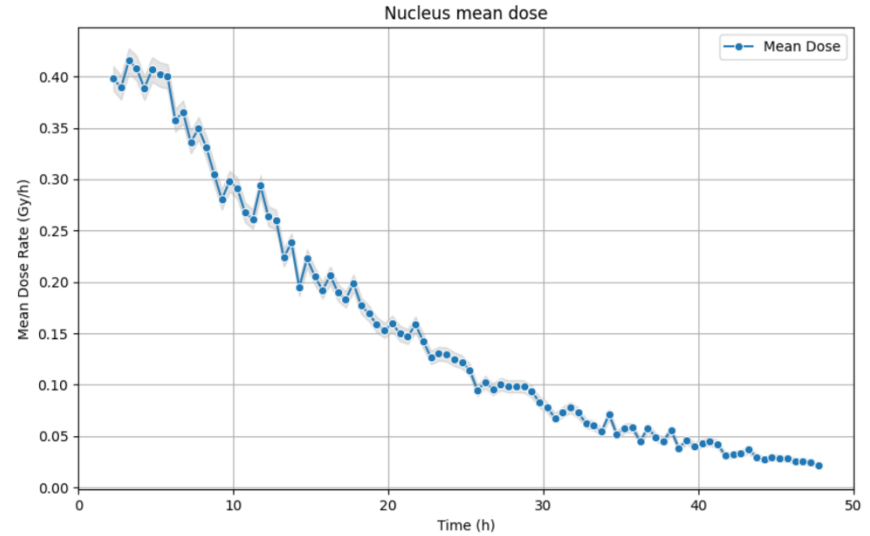
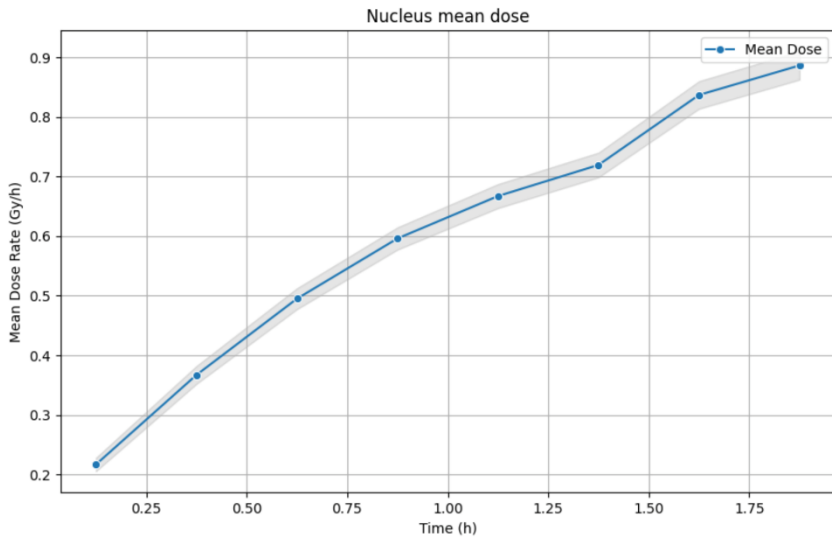
11



- Injection: 2h
- Internalization process: 48h
- Irradiation: 10 days

- Initial activity: 19.2 Bq
- K_d : 9 nmol/L \rightarrow 14% binding
- Percentage internalized: 44%

TOPAS tool: Dose-rate vs time



Conclusions

- We have developed a computational tool to recreate *in vitro* radiopharmaceutical experiments. To our knowledge, it is the first time that:
 - An **actual time-structure** for the dose is calculated
 - All emissions from **all the decay products** are considered, ordered in the **right time and abundance**
 - It is considered the dose received **by each nucleus individually**

Future...

- To extend the tool to 3D geometries would provide capability to simulate experiment with tumor spheres.
- To implement a biological model to obtain directly the survival fraction depending on the dose delivered.

Acknowledgments

This work was funded in part by Grant PID2021-098117-B-C21/ MCIN/AEI/10.13039/501100011033/ERDF, EU and by Grant NIH R00 CA267560.



Massachusetts General Hospital
Founding Member, Mass General Brigham



HARVARD MEDICAL SCHOOL
TEACHING HOSPITAL

