

Quantification using 2D scintigraphic versus 3D SPECT imaging in pre-clinical oncology studies: A Comparative Analysis.

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Aim

Preclinical studies hold the most prominent tool in oncology research. The gold standard in any oncology experiment is still *ex vivo* biodistributions, an invasive method that requires a large number of animals. Studies have shown that both planar (2D) and tomographic (3D) imaging provide high correlation to *ex vivo* studies and can be trusted as an alternative to bio kinetics [1]. Usually tumors are subcutaneous thus do not overlap with other organs. In this study, a set of oncology imaging studies, performed both on 2D and 3D systems and are compared against biodistribution data, to evaluate the correlation between the methods.

Materials & Methods

We have analysed 6 oncology experiments, with more than 30 mice and 3 different isotopes, in 2D and 3D SPECT and *ex vivo* bio-distributions. Real-time, dynamic screening was performed on γ -eye™ (BIOEMTECH, Greece), and quantification on its embedded analysis software, visual|eyes™. Tomographic SPECT/CT imaging was performed on X-CUBE/ γ -CUBE (Molecubles, Belgium) and post-processing on VivoQuant (Invicro, Boston). ROIs or VOIs respectively, are drawn on major organs and the counts are translated to %ID/organ. For the biodistributions studies, organs were measured in a gamma counter and results calculated as %ID/organ. Before the *in vivo* experiments, acquisitions were also performed on BIOEMTECH's fillable mouse phantom for preclinical studies (BIOEMTECH, Greece), depicting real-size mouse organs as well as two tumours.

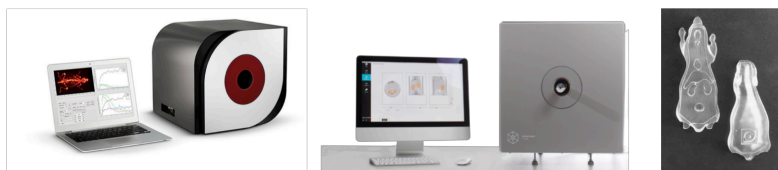


Figure.1: From left to right: Imaging systems: γ -eye™ by BIOEMTECH & γ -CUBE™ and X-CUBE™ by Molecules, the fillable mouse phantom by BIOEMTECH.

Disclosure:

I or one of my co-authors hold a position as an employee and consultant for BIOEMTECH. This research has been co-financed by the Greek national funds through the National Strategic Reference Framework (NSRF) – 2014-2020, code: T1EAK-01159 with acronym NAVIGATE.

References: [1]. Dan Yang et al. Exogenous Gene Expression in Tumors: Noninvasive Quantification with Functional and Anatomic Imaging in a Mouse Model. *Radiology*, 235, 3 (2005).

Results

The difference in uptake values between 2D and 3D imaging was measured for a set of 30 mice, in 3 different projects and was calculated as $(4.9 \pm 3.2)\%$. For the 5 mice that also went through an *ex vivo* evaluation, the correlation between imaging and *ex vivo* biodistribution values differs on average by $(8.1 \pm 2.6)\%$ for 2D and 3D. An example of the imaging data can be seen in Figure 2.

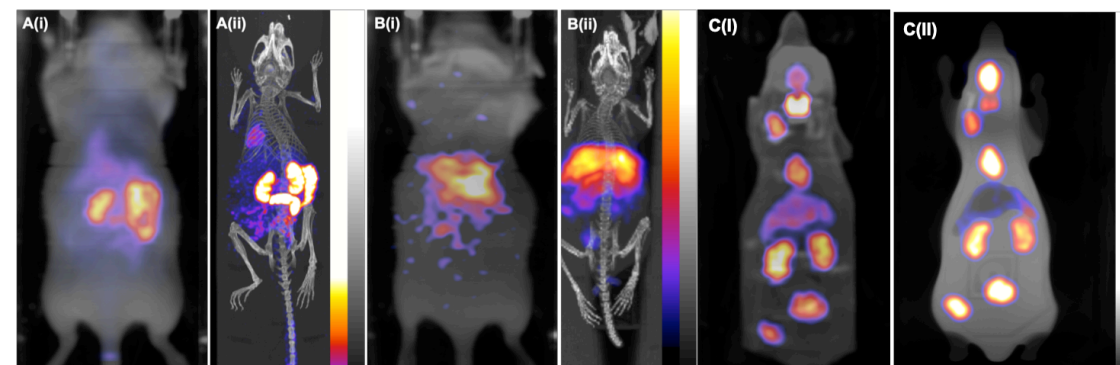


Figure 2: A(i) 2D image (γ -eye™) of an experimental breast oncology mouse model, injected with 1 mCi of Tc99m-Sestamibi and A(ii) the corresponding tomographic image (CUBES™) B(i) 2D image (γ -eye™) of a lung cancer model injected with 30 uCi of an In-111 labelled compound B(ii) The corresponding tomographic image (CUBES™). C (i) 2D image (γ -eye™) of BIOEMTECH's fillable mouse phantom, filled with 500 uCi of In-111 and C (ii) corresponding tomographic image (CUBES™).

Conclusions

Both imaging techniques present a very similar trend in comparison to *ex vivo* biodistributions. However, 2D imaging offers a number of additional advantages, such as speed, simplicity, real time imaging, and ability to provide very short time frames and extraction of time activity curves by the end of the experiment. This study demonstrates that for applications where organs are well separated, 2D scintigraphy provides similar results to 3D SPECT. In addition, it allows the reproduction of time activity curves with the same accuracy as *ex vivo* biodistributions, while significantly reducing in the number of animals required and increasing overall statistical accuracy.

