

# Production of innovative medical radionuclides by mass separation

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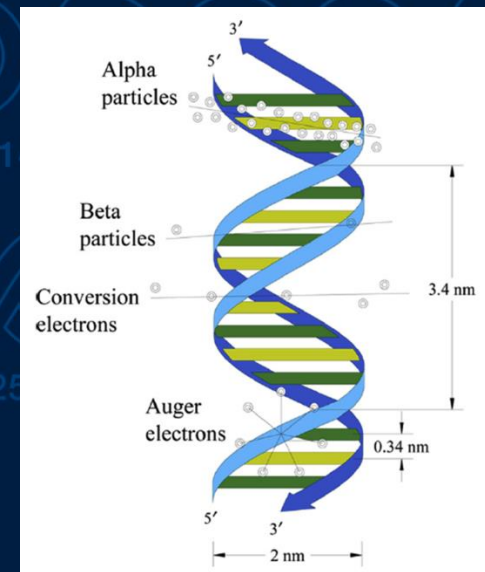
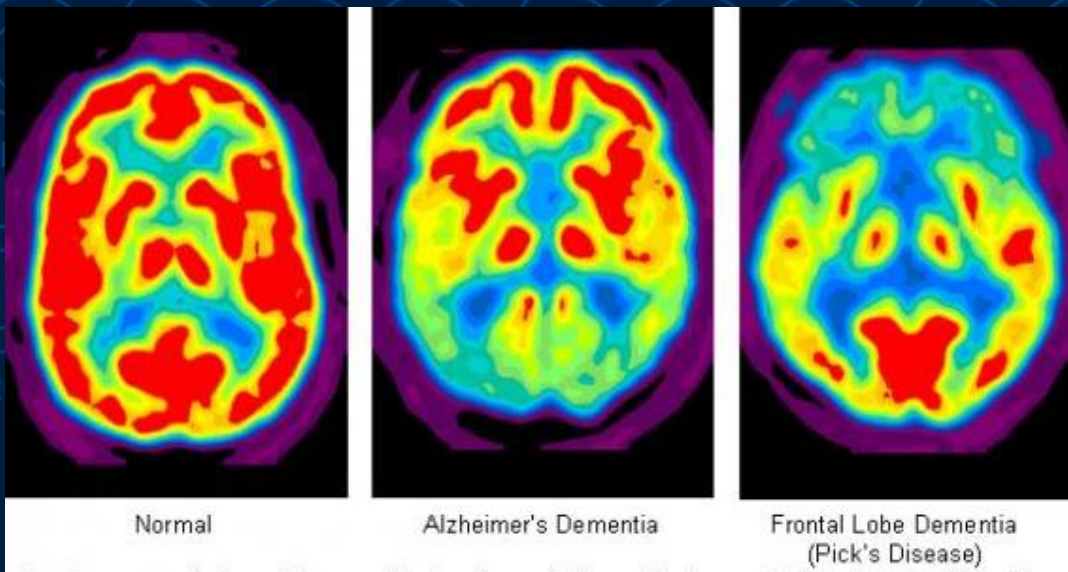
# Overview

- Basic concepts of nuclear medicine
- The supply challenge
- Radionuclide mass separation
- PRISMAP *et plus si affinités...*



# Medical radionuclides

## *Some basics of nuclear medicine*

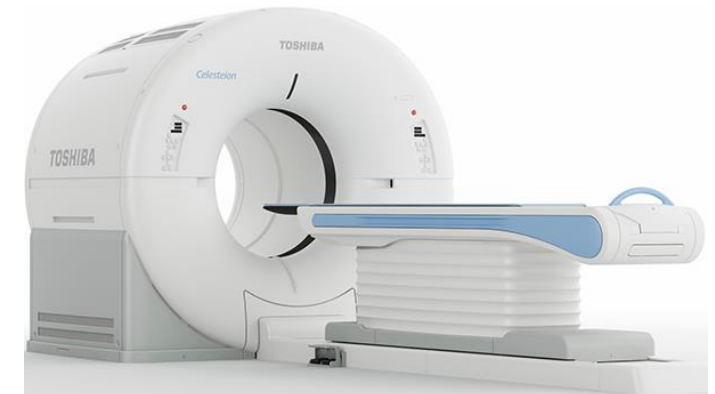
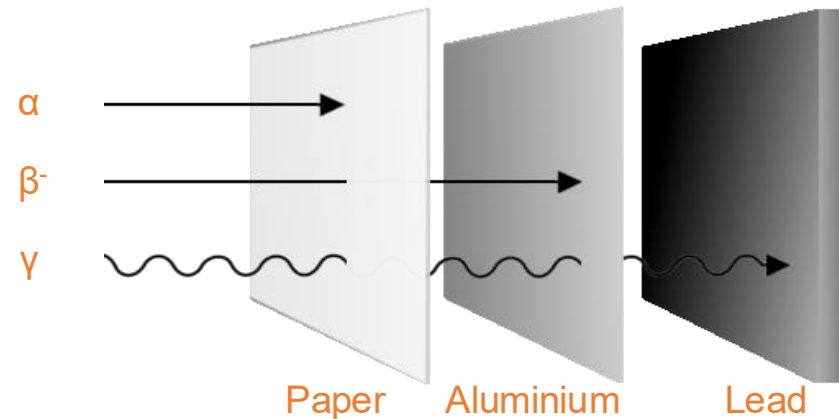
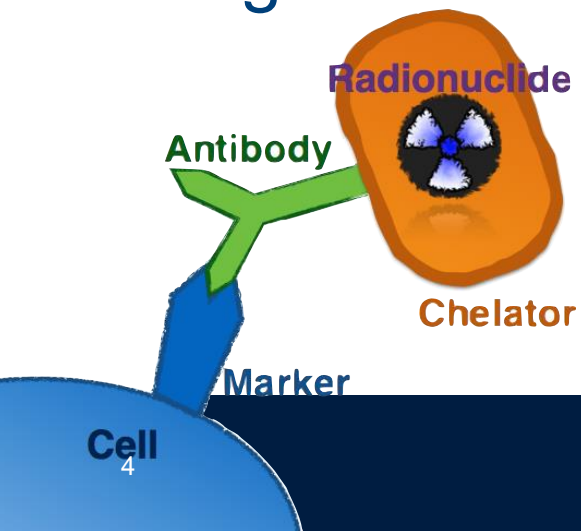


# Molecular imaging

A radionuclide is transported to a specific location in the body where it decays with the emission of a  $\gamma$  ray.

The  $\gamma$  ray penetrates the tissues and exits the body so that it may be recorded externally to visualize where it decayed.

Multiple orientations yield a 3D tomographic reconstruction of the image.

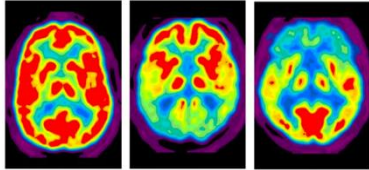


# Targeted action



The body uses some trace elements for specific actions:

- iodine for thyroid functions
- calcium in the bones



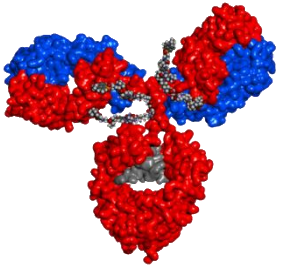
Normal  
Consistent metabolic activity throughout the cerebral cortex.

Alzheimer's Dementia  
Reduced metabolic activity in the temporal and parietal lobes.

Frontal Lobe Dementia (Pick's Disease)  
Reduced metabolic activity in the frontal lobe.

A radioactive isotope can be included in a molecule involved in metabolic activities:

- sugar-equivalent FDG



Cells may display receptors that are specific and can be linked to by targeting molecules:

- peptides
- hormones
- antibodies

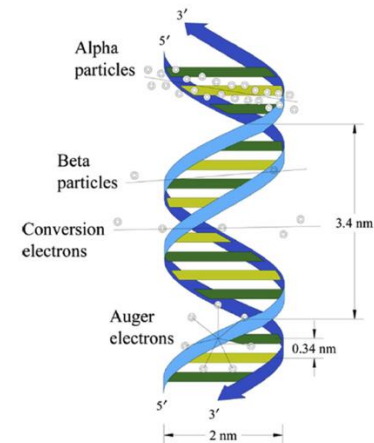
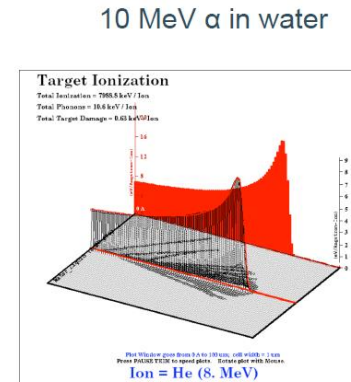
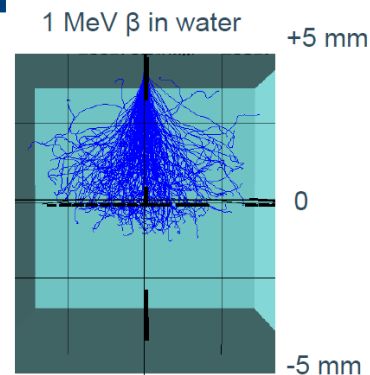
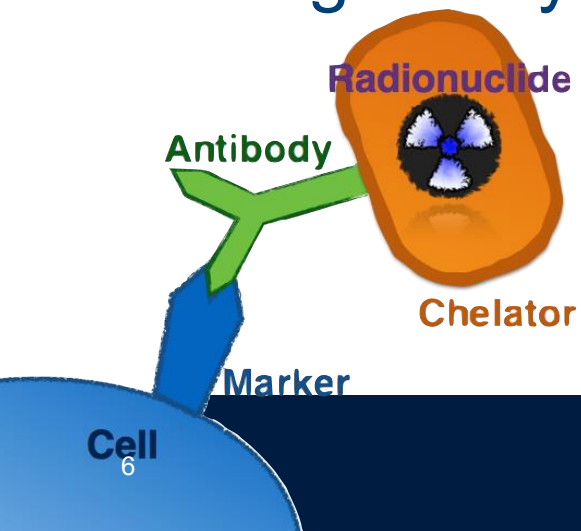
Important to match  
biodistribution to half-life!

# Switching to therapy

Replacing the  $\gamma$ -ray emission with charged particle emission yields therapeutic effect.

$\beta^-$  particles may reach up to a few mm,  $\alpha$  particles reach but a few cells, Auger electrons act within a cell.

For an efficient treatment, the DNA of the targeted cell must be damaged beyond repair





# Theranostics

If a single vector molecule can be identified with interchangeable radioisotopes, then its efficacy and properties can be **tested with molecular imaging** and then **applied with therapy**.

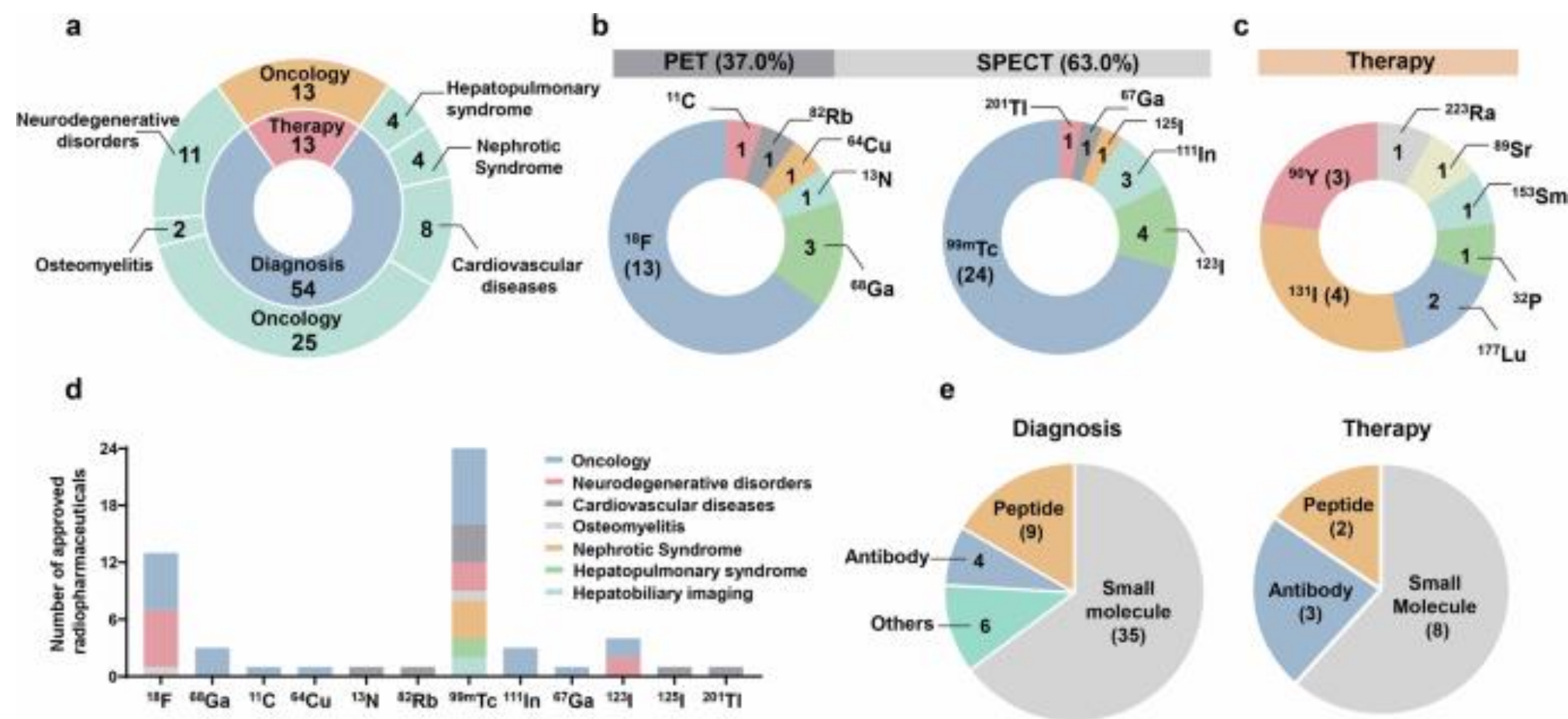
If a single radioisotope decays by both  $\gamma$ -ray or  $\beta^+$  emission and  $\alpha$  or  $\beta^-$  emission, then that single radioisotope can be used to **treat** and at the same time **monitor the patient dose** and the treatment's efficacy.

Tb 149 4.1 h	Tb 152 17.5 h	Tb 155 5.3 d	Tb 161 6.95 d
$\epsilon$ $\alpha$ 3,97 $\beta^+$ /sup> 1,4 $\gamma$ 352, 165...	$\epsilon$ $\beta^+$ 3.0, 2.6, 2.0... $\gamma$ 344, 271 586	$\epsilon$ $\gamma$ 87, 105, 180 $e^-$	$\beta^-$ 0.5

Important to match  
biodistribution to half-life!

Final aim: personalized medicine  
where the treatment is tailored to the  
needs of the patient

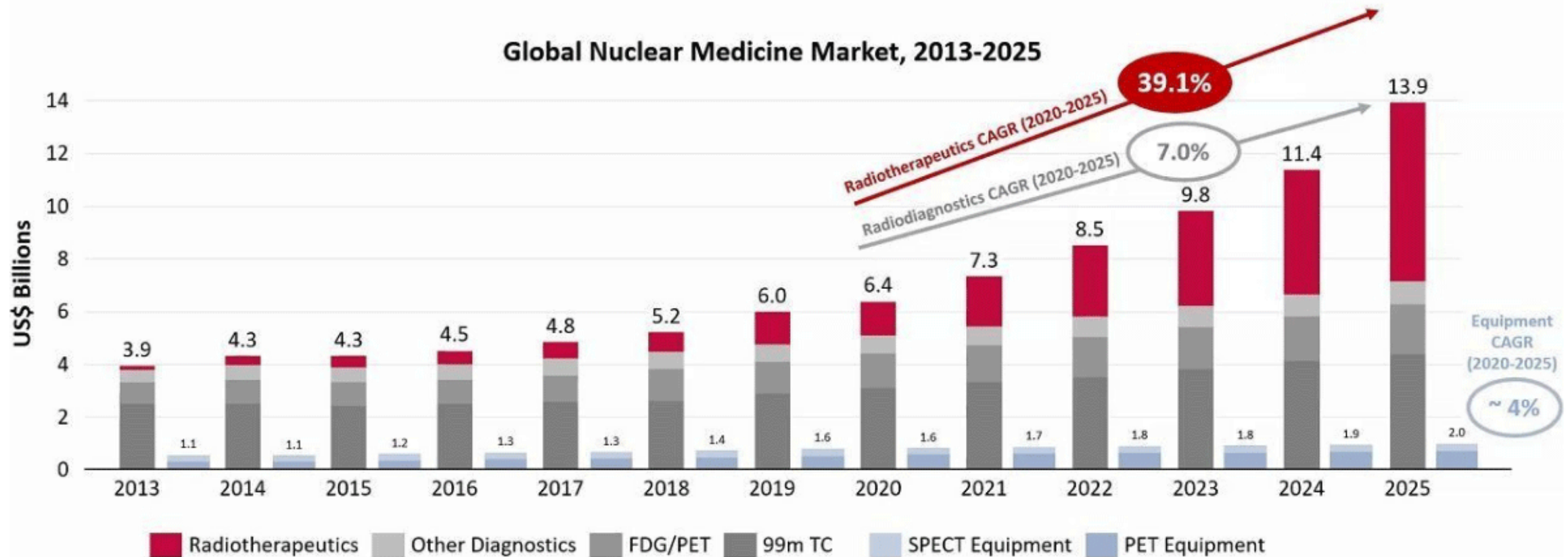
# Medical radionuclide landscape



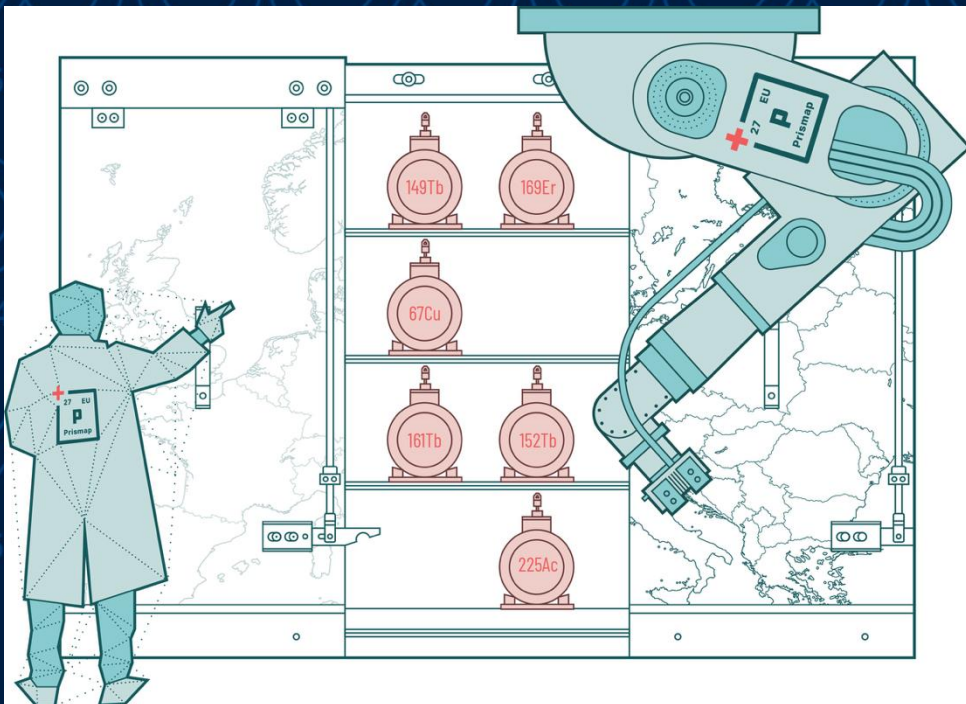


# Medical radionuclide market

Radiopharmaceutical therapies are an **opportunity for the growth and relevance** of Nuclear Medicine



# Radionuclide shopping: How we choose the best radionuclide

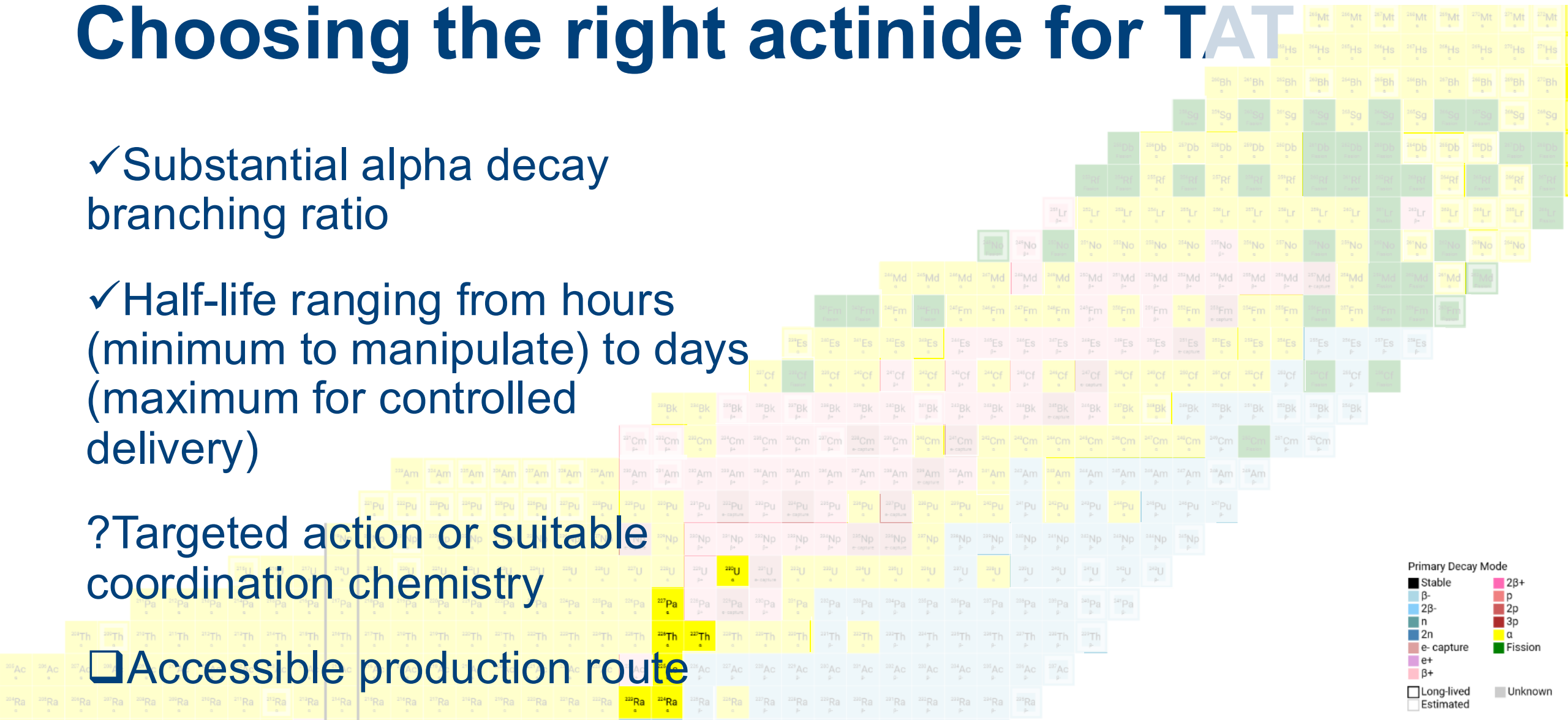


# Choosing the right actinide for TAT

- ✓ Substantial alpha decay branching ratio
- ✓ Half-life ranging from hours (minimum to manipulate) to days (maximum for controlled delivery)

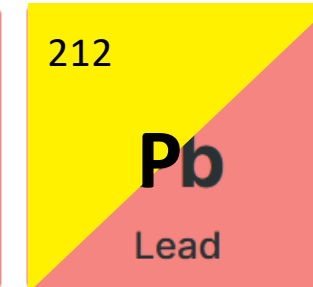
? Targeted action or suitable coordination chemistry

□ Accessible production route





# Isotopes effectively used



✓<sup>211</sup>At

- 6 clinical trials

✓<sup>223,224</sup>Ra

- ✓ Xofigo® for the treatment of bone metastasis in castration resistant prostate cancer

- ~200 clinical trials

✓<sup>225</sup>Ac

- 13 ongoing clinical trials
- Mostly about prostate cancer

✓<sup>227</sup>Th, <sup>213</sup>Bi, <sup>212</sup>Pb

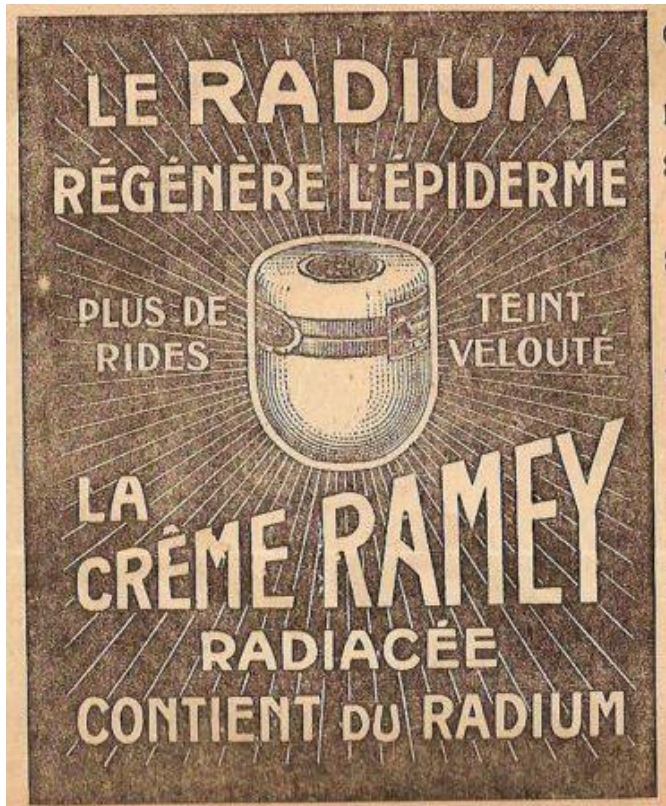
- <5 trials

	e- capture	α	β+	β+	β+	β+	β+	e- capture	e- capture	
	<sup>227</sup> U α	<sup>228</sup> U α	<sup>229</sup> U β+	<sup>230</sup> U α	<sup>231</sup> U e- capture	<sup>232</sup> U α	<sup>233</sup> U α	<sup>234</sup> U α	<sup>235</sup> U α	<sup>238</sup> U α
a	<sup>226</sup> Pa α	<sup>227</sup> Pa α	<sup>228</sup> Pa β+	<sup>229</sup> Pa e- capture	<sup>230</sup> Pa β+	<sup>231</sup> Pa α	<sup>232</sup> Pa β-	<sup>233</sup> Pa β-	<sup>234</sup> Pa β-	<sup>235</sup> Pa β-
h	<sup>225</sup> Th α	<sup>226</sup> Th α	<sup>227</sup> Th α	<sup>228</sup> Th α	<sup>229</sup> Th α	<sup>230</sup> Th α	<sup>231</sup> Th β-	<sup>232</sup> Th α	<sup>233</sup> Th β-	<sup>234</sup> Th β-
c	<sup>224</sup> Ac β+	<sup>225</sup> Ac α	<sup>226</sup> Ac β-	<sup>227</sup> Ac β-	<sup>228</sup> Ac β-	<sup>229</sup> Ac β-	<sup>230</sup> Ac β-	<sup>231</sup> Ac β-	<sup>232</sup> Ac β-	<sup>233</sup> Ac β-
a	<sup>223</sup> Ra α	<sup>224</sup> Ra α	<sup>225</sup> Ra β-	<sup>226</sup> Ra α	<sup>227</sup> Ra β-	<sup>228</sup> Ra β-	<sup>229</sup> Ra β-	<sup>230</sup> Ra β-	<sup>231</sup> Ra β-	<sup>232</sup> Ra β-

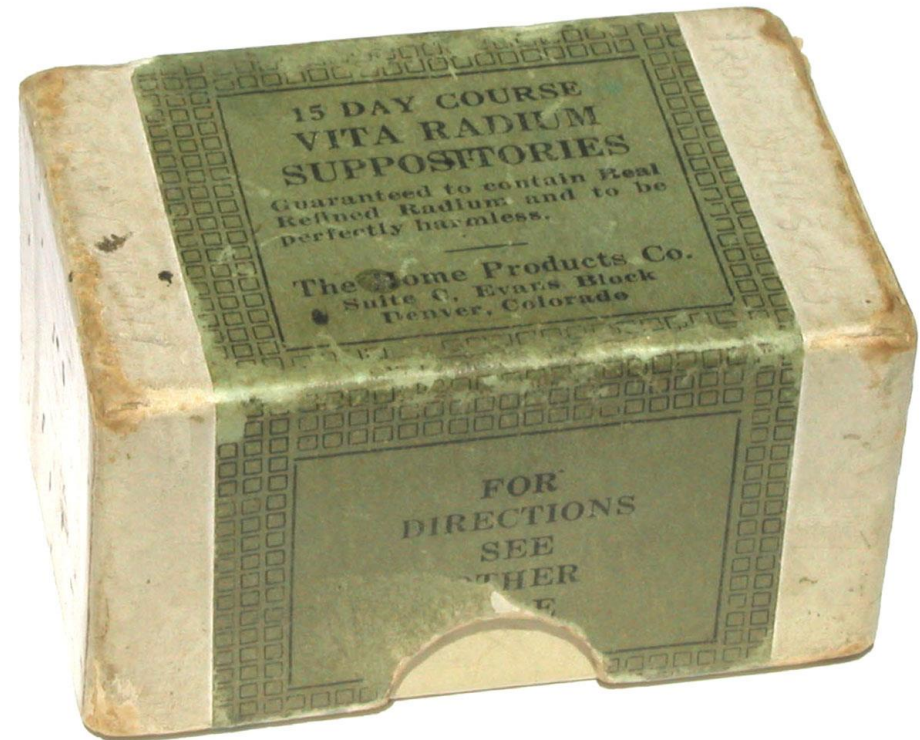


# Radium: a long tradition

## Cutaneous application



## Radium salts

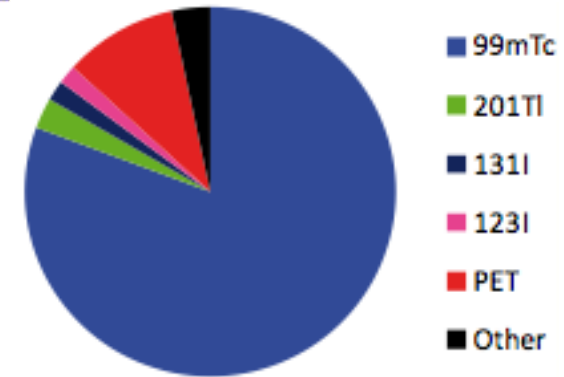
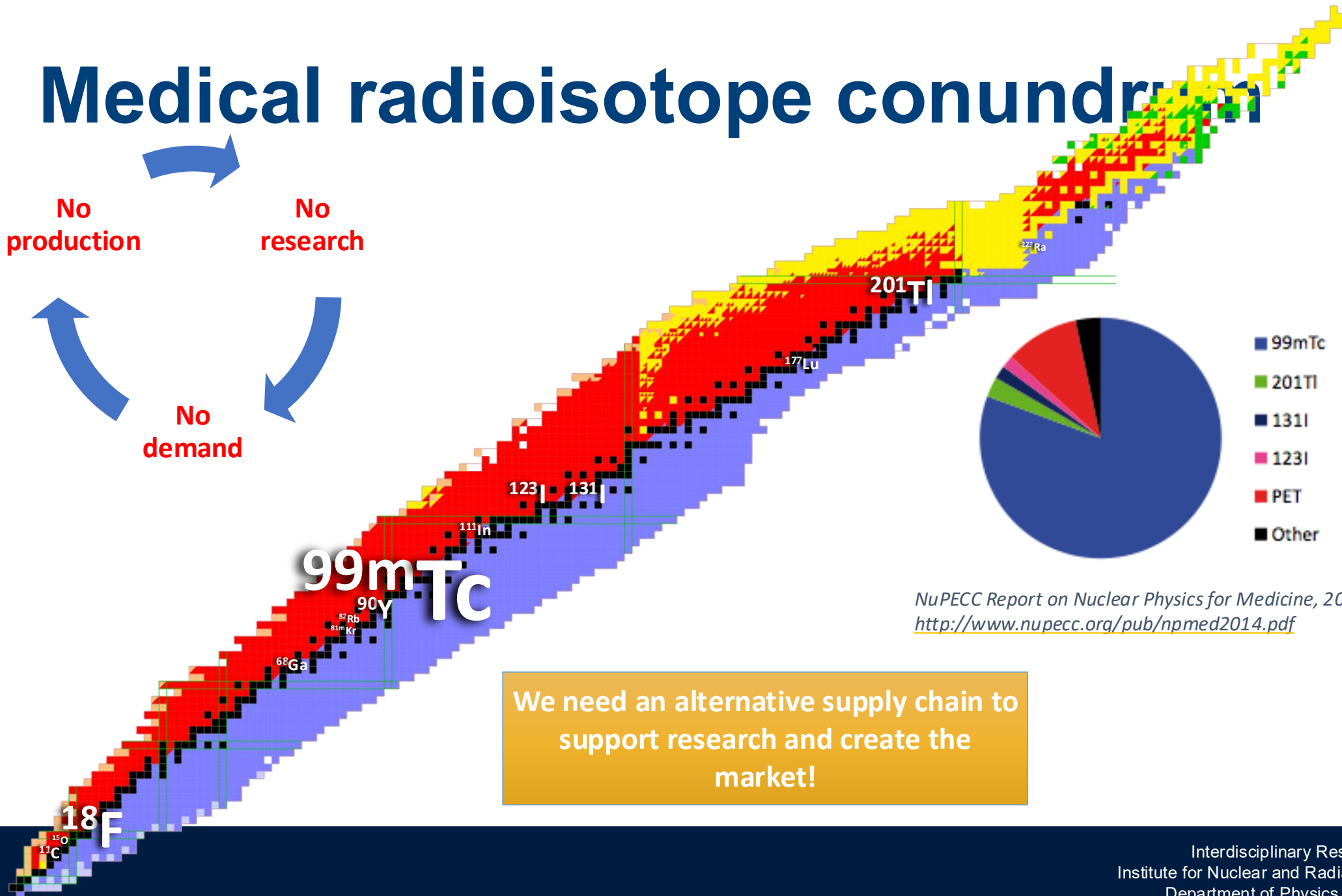


# Medical radioisotope conundrum

No  
production

No  
research

No  
demand



NuPECC Report on Nuclear Physics for Medicine, 2014  
<http://www.nupecc.org/pub/npmed2014.pdf>

We need an alternative supply chain to  
support research and create the  
market!



# From CERN ISOLDE to CERN MEDICIS

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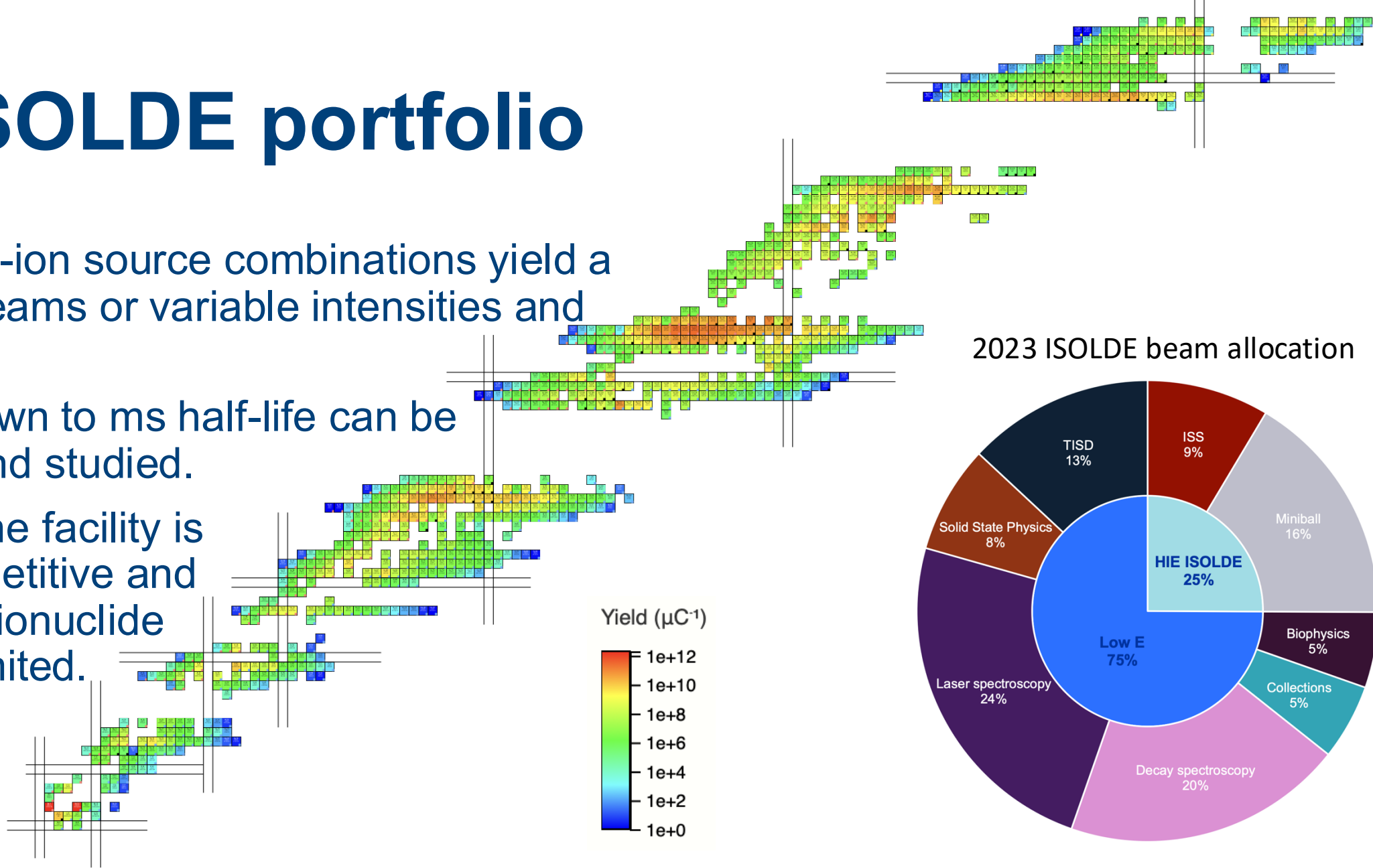


# The ISOLDE portfolio

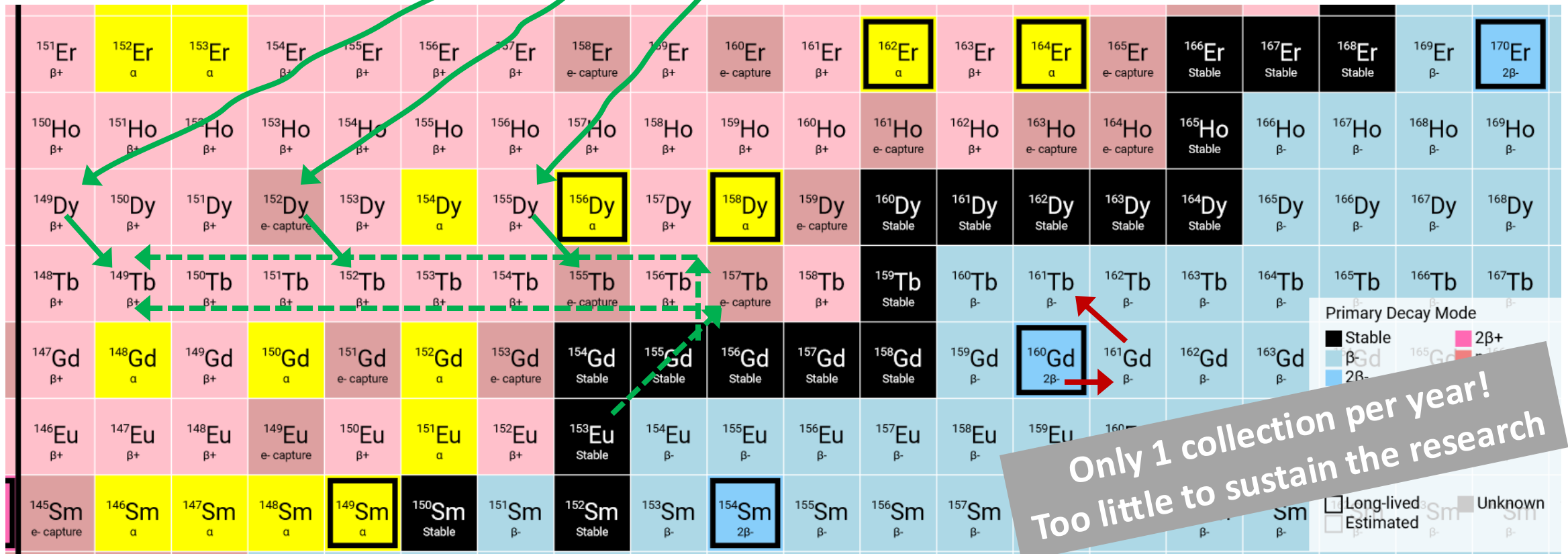
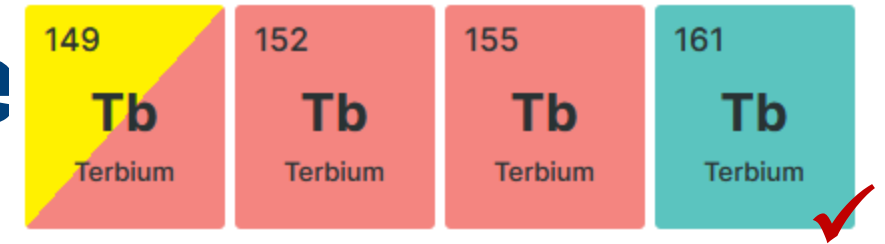
Many target-ion source combinations yield a variety of beams or variable intensities and purity.

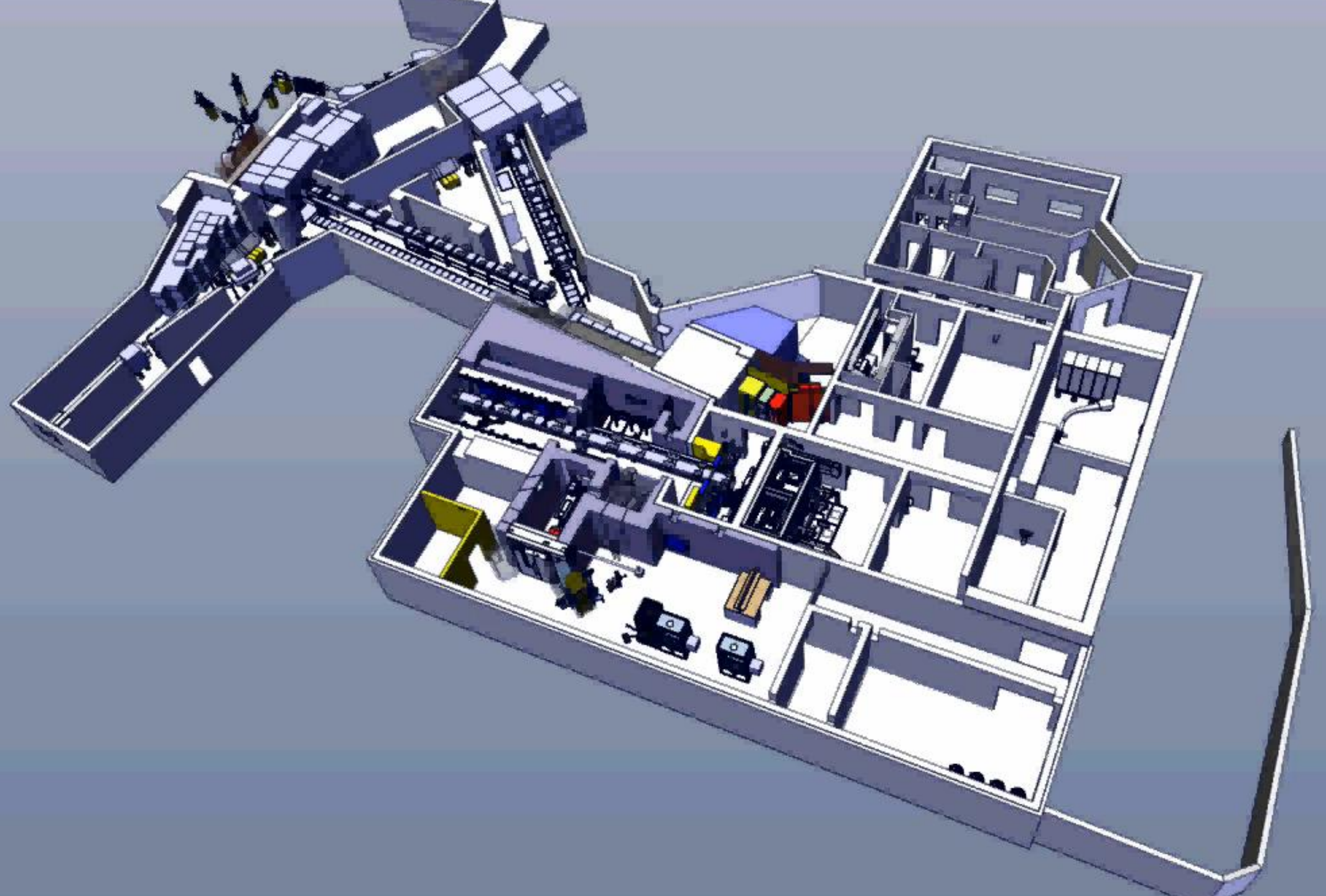
Isotopes down to ms half-life can be extracted and studied.

Access to the facility is highly competitive and medical radionuclide supply is limited.



# Producing the Tb isotope

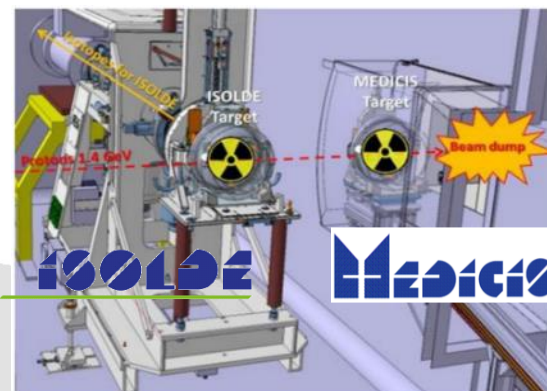






# CERN MEDICIS

KUKA® handling arm



MELISSA laser lab



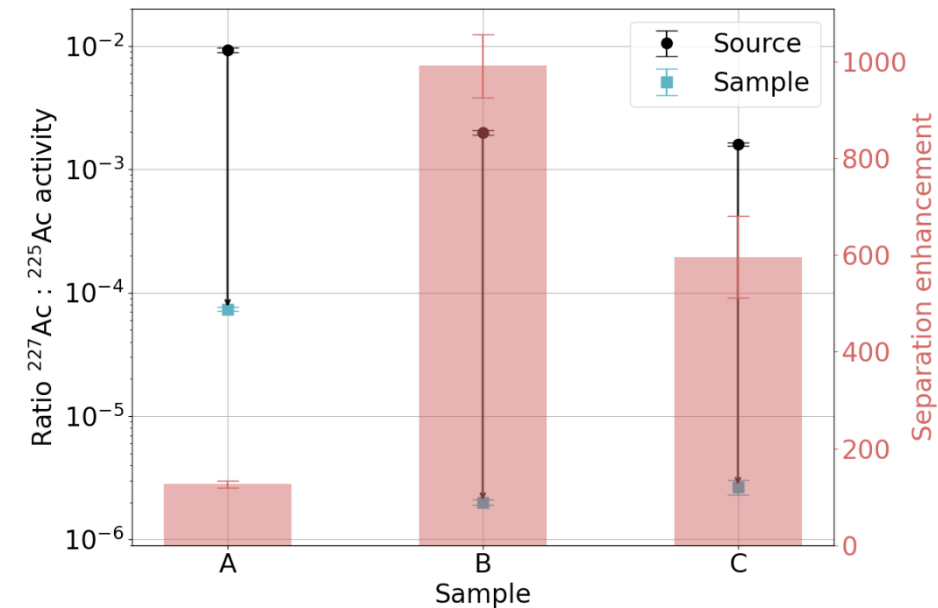
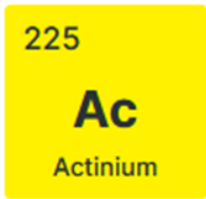
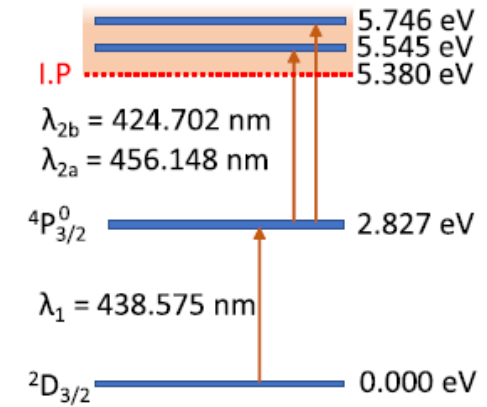
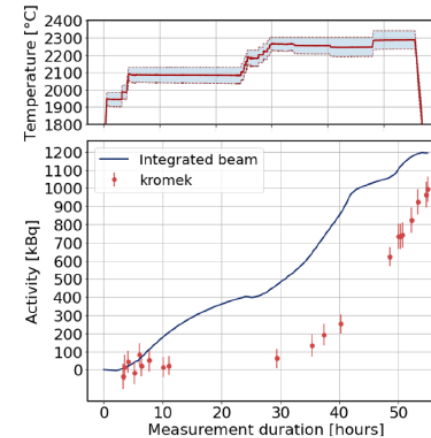
Collection point

the collection of  
medical research  
from CERN or  
other sources



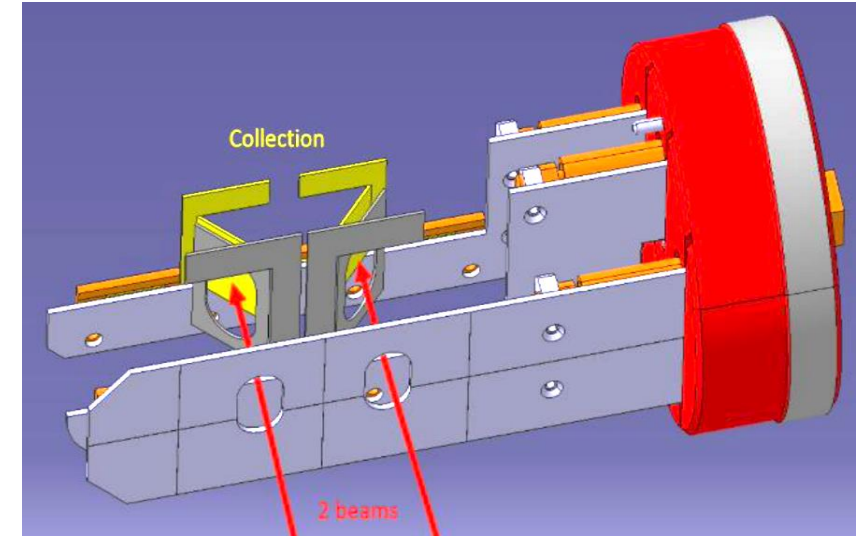
# $^{225}\text{Ac}$ production

- High-energy proton-induced spallation of  $^{232}\text{Th}$  produces large amounts of  $^{227}\text{Ac}$ .
- TRIUMF:  $^{225}\text{Ra}$  generator by radiochemistry, limited production yields.
- MEDICIS: (laser +) mass separation.
- Highest achieved efficiencies are 75% on  $^{225}\text{Ra}$  vs 1% on  $^{225}\text{Ac}$ .
- Routine delivery of clinically relevant activities of  $^{224,225}\text{Ra}$  (e.g., >100 MBq).

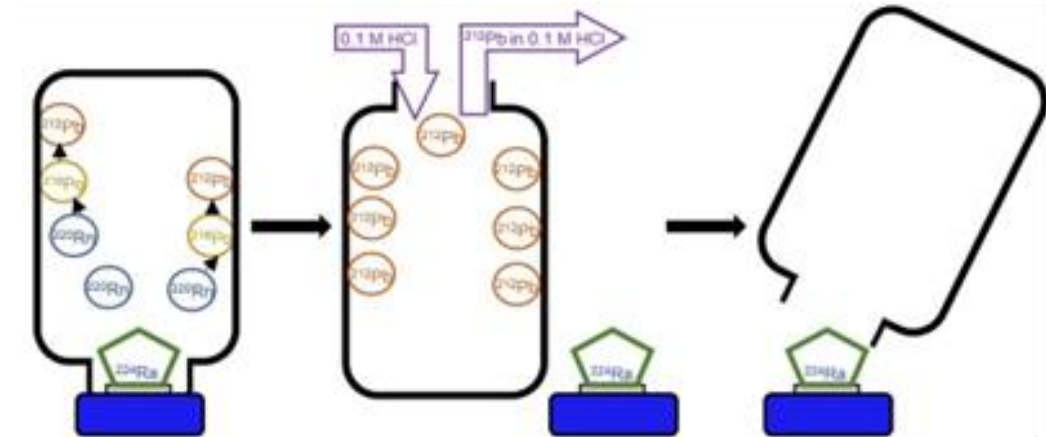
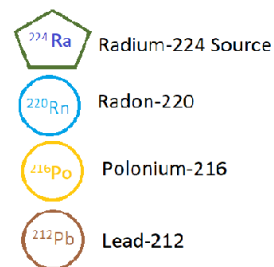


# $^{224}\text{Ra}$ : $^{212}\text{Pb}$ generator

- Collections of  $^{224}\text{Ra}$  next to  $^{225}\text{Ra}$  with high purity.
- 100s MBq can be collected, making these relevant clinical quantities.
- $^{224}\text{Ra}$  is a generator for  $^{212}\text{Pb}$



Next step: clinical trial?



# **PRISMAP**

## **The European Medical Radionuclide Programme**



# The PRISMAP infrastructure

## MEDICIS

European organization for nuclear research - CERN



## PSI

Paul Scherrer Institut – PSI



## Hevesy Laboratory

Danmarks Tekniske Universitet – DTU



## BR2

Belgian Nuclear Research Centre — SCK CEN



## ARRONAX

Groupement interet public ARRONAX — ARRONAX



## RHF

Institut Max von Laue - Paul Langevin – ILL



## JRC Karlsruhe

Joint Research Centre - European Commission – JRC



## NCBJ

Narodowe Centrum Badań Jądrowych — NCBJ



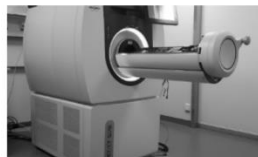
## Hevesy Laboratory

Danmarks Tekniske Universitet – DTU



## AGORA

Centre hospitalier universitaire vaudois — CHUV



## NURA

Studiecentrum voor Kernenergie / Centre d'étude de l'énergie nucléaire — SCK CEN



## Nuklearmedizin

Klinikum rechts der Isar der Technischen Universität München — TUM



## POLATOM

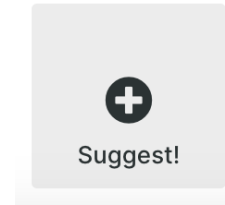
Narodowe Centrum Badań Jądrowych — NCBJ



- **4 neutron irradiation facilities**, including 3 research reactors and a spallation source.
- **5 accelerators** delivering protons with energy ranging from 18 MeV to 1.4 GeV.
- **2 accelerators** delivering other particles (**deuteron, alpha**) at medium energy (K30 & K70).
- **1 mass separator.**
- Access to the  $^{229}\text{Th}$  generator for  $^{225}\text{Ac}/^{213}\text{Bi}$  supply from JRC Karlsruhe.
- **5 biomedical research facilities** bound to production centers (x3) or embedded within university hospitals (x2).
- **Regional clusters** for access to short-lived radionuclides.



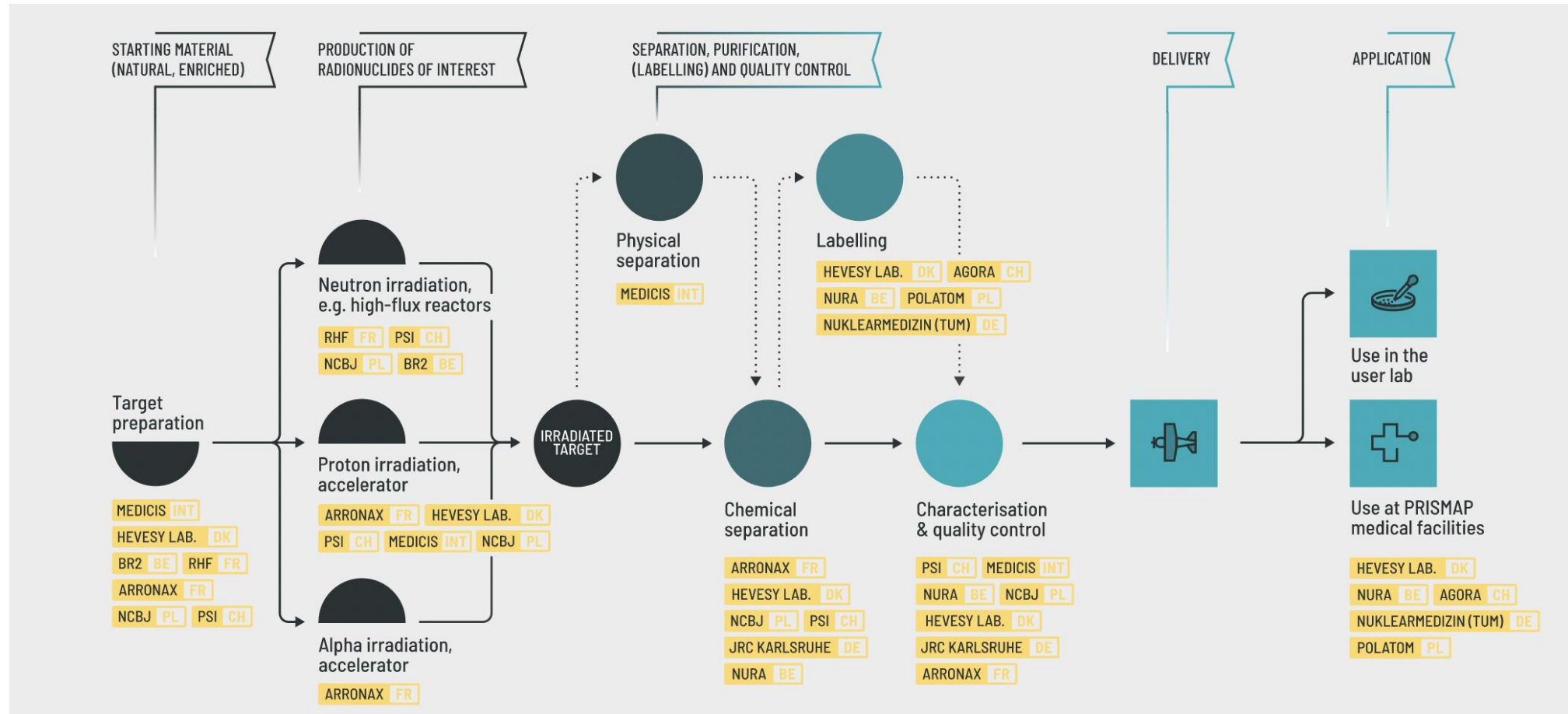
# The PRISMAP portfolio



43 <b>Sc</b> Scandium	44 <b>Sc</b> Scandium	47 <b>Sc</b> Scandium	52 <b>Mn</b> Manganese	64 <b>Cu</b> Copper	67 <b>Cu</b> Copper	103 <b>Pd</b> Palladium
111 <b>Ag</b> Silver	128 <b>Ba</b> Barium	128 <b>Cs</b> Caesium	135 <b>La</b> Lanthanum	153 <b>Sm</b> Samarium	149 <b>Tb</b> Terbium	152 <b>Tb</b> Terbium
155 <b>Tb</b> Terbium	161 <b>Tb</b> Terbium	165 <b>Tm</b> Thulium	165 <b>Er</b> Erbium	169 <b>Er</b> Erbium	175 <b>Yb</b> Ytterbium	199 <b>Au</b> Gold
203 <b>Pb</b> Lead	211 <b>At</b> Astatine	213 <b>Bi</b> Bismuth	223 <b>Ra</b> Radium	224 <b>Ra</b> Radium	225 <b>Ac</b> Actinium	

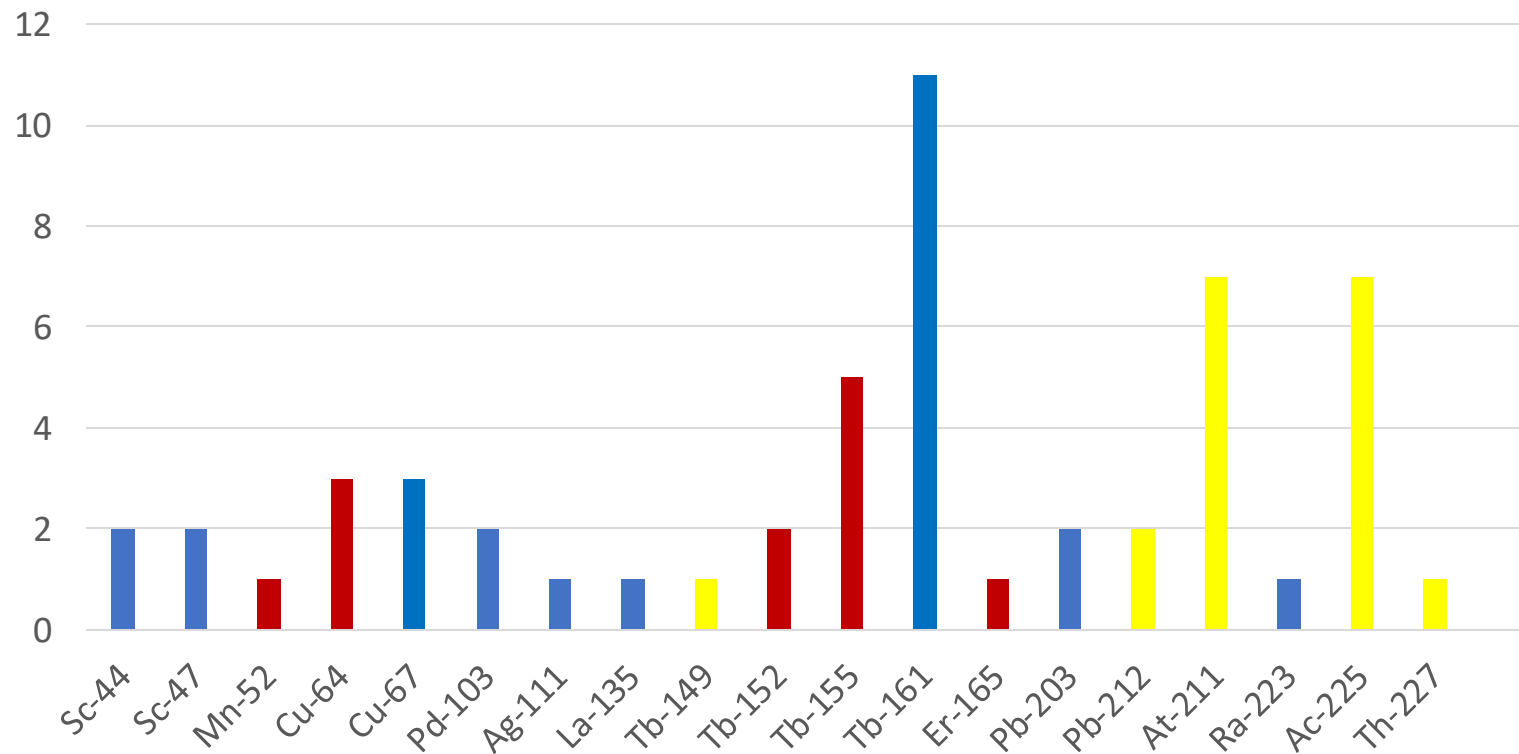
- 28 radionuclides offered on our portfolio.
- Covering SPECT and PET imaging, and beta, alpha, and Auger therapy radionuclides.
- Many offer theranostic sets while others may be combined for novel theranostics approach (e.g.,  $^{135}\text{La}/^{225}\text{Ac}$ ).
- Some are uniquely available through our infrastructure, in particular those requiring mass separation of the radionuclides ( $^{128}\text{Ba}$ ,  $^{149,152,155}\text{Tb}$ ,  $^{165}\text{Tm}$ ,  $^{169}\text{Er}$ ,  $^{175}\text{Yb}$ ).
- We are open to your suggestion. Let us know!

# PRISMAP: the supply chain



# Est. 2021

PRISMAP project isotopes



- 5 calls
- 45 projects approved  
5 projects completed
- > 60 deliveries
- 21 radionuclides from our portfolio
- Covering all stages of development:
  - new generator concepts
  - radiochemical investigations
  - radiopharmaceutical synthesis
  - radiobiology
  - in vitro & in vivo pre-clinical
- 2 projects already published and 10 having reported at international conferences.
- 2 returning users.
- 2 projects moving for clinical proof of concept.

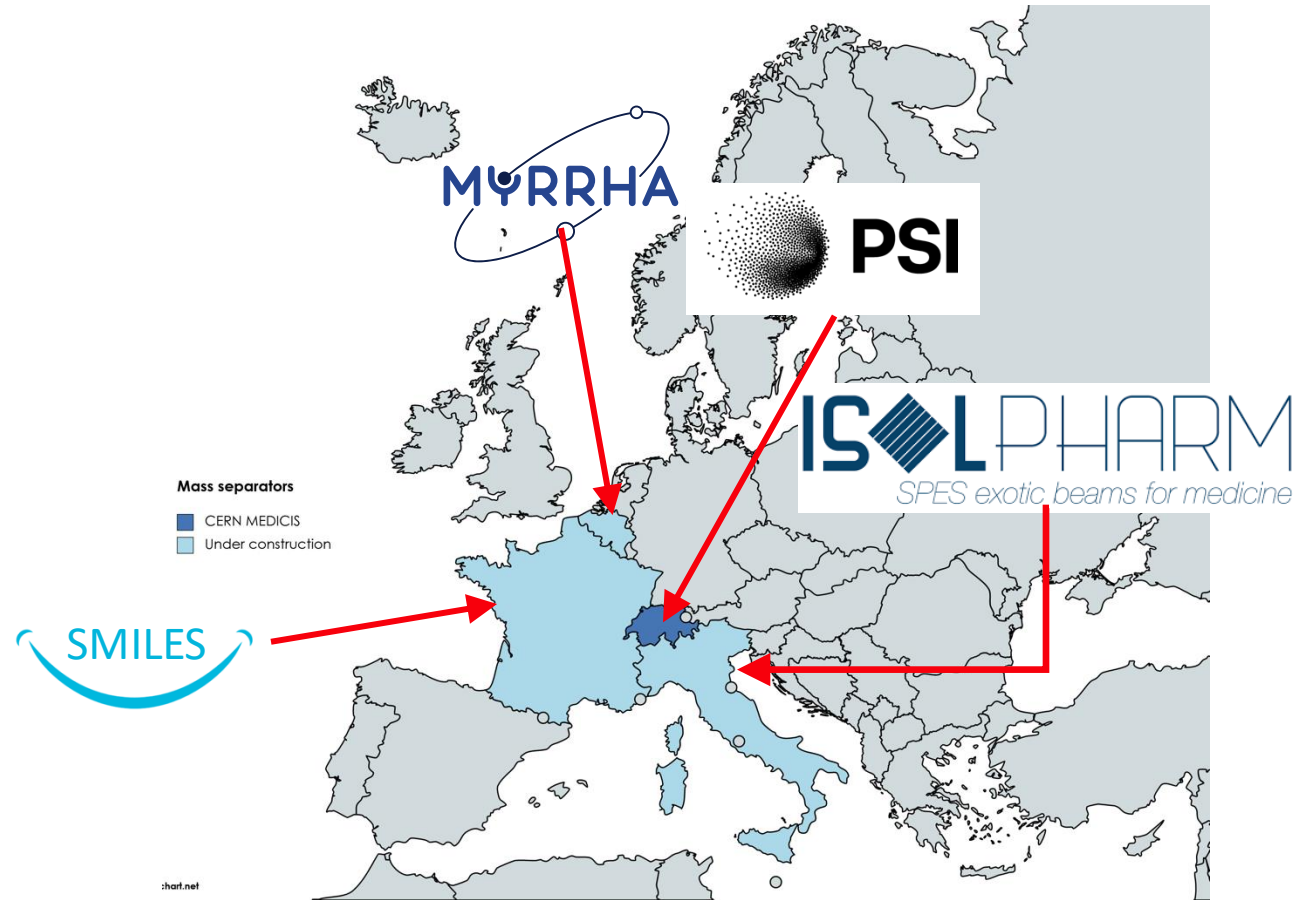


# PRISMAP Emerging Infrastructure

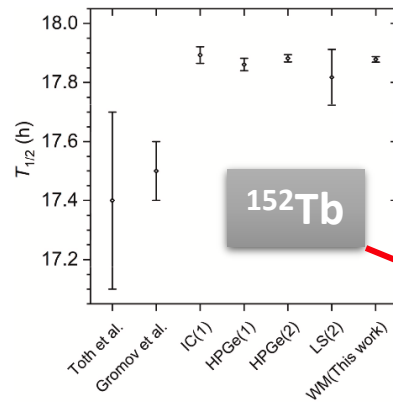
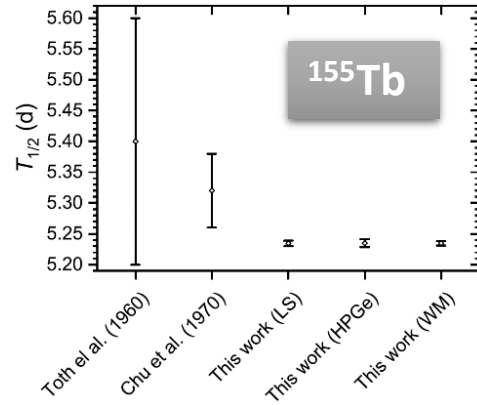
MEDICIS is the only mass separator dedicated to medical radionuclides in Europe.

4 projects are at different stages of development:

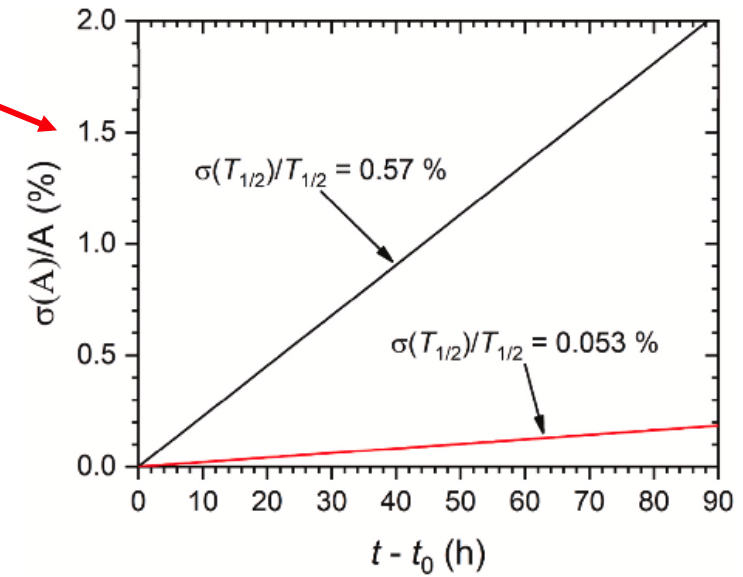
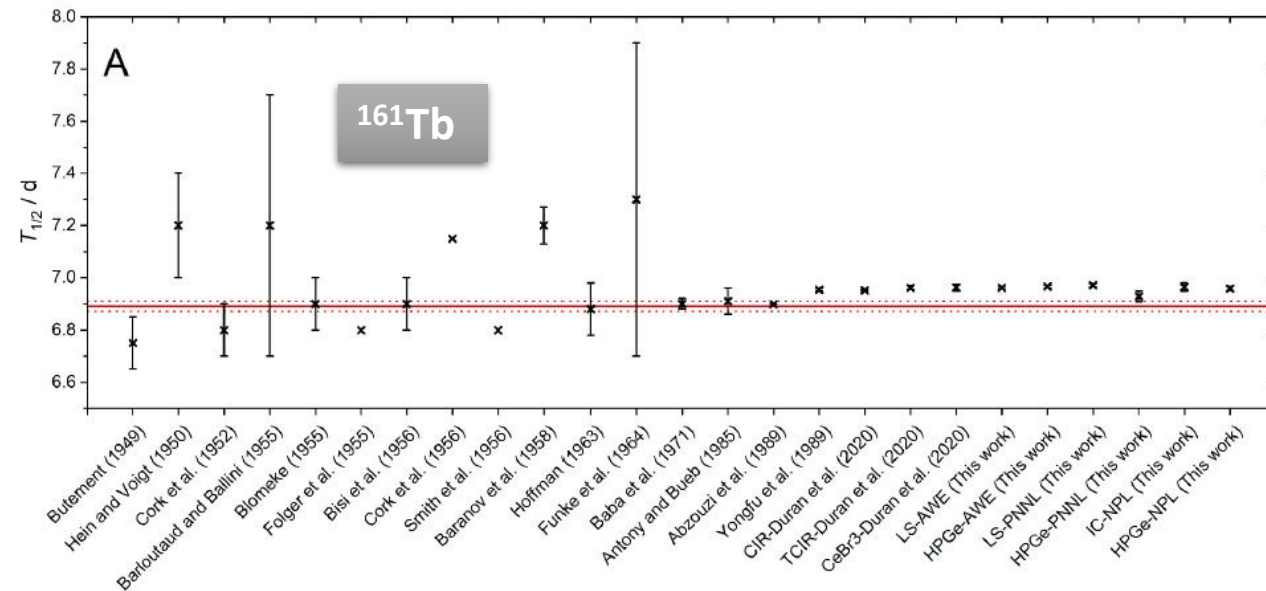
- ISOLPHARM at SPES
- ISOL@MYRRHA at SCK CEN
- TATTOOS at PSI
- SMILES at ARRONAX



# Beyond supply: nuclear data

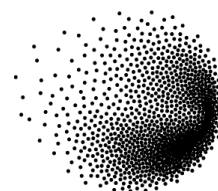


- Many of those isotopes were studied in the early days of radioisotopes synthesis (1950-1970) and the accuracy on their nuclear data is questionable.



- Nuclear medicine has a lot to offer for improved patient care in Europe and worldwide, and is undergoing a rapid growth – especially in therapy.
- Targeted alpha therapy offers additional therapy potency but also increased challenges to research and supply.
- Radionuclide mass separation provides access to a wide portfolio of radionuclides to sustain the research while other avenues are being developed for scaling up the production.
- PRISMAP has federated this effort at the European level, creating a one-stop portal for medical researchers and generating synergies at the European level.
- New mass separators are on the horizon across Europe to bring hope to the field.





PSI

