

Micronization of radiosensitive microcapsules using carbonate water, and their ability to detect and treat metastasis

S. Harada¹, S. Ehara¹, K. Ishii², K. Sera³, S. Goto⁴ and T. Sato⁵

¹Iwate Medical University, School of Medicine, Department of Radiology
19-1 Uchimaru, Morioka, Iwate 020-8505, Japan.

² Department of the Quantum Science and Energy Engineering, Tohoku University
6-6 Aza Aoba, Aramaki, Aoba, Sendai, Miyagi 980-8579, Japan.

³Cyclotron Research Center, Iwate Medical University
348-58 Tomegamori, Takizawa, Iwate 020-0603, Japan

⁴Nishina Memorial Cyclotron Center (NMCC), Japan Radioisotope Association
348-58 Tomegamori, Takizawa, Iwate 020-0603, Japan

⁵Takasaki Institute of the Radiation Chemistry Research Establishment, JAERI
1233 Watanuki, Takasaki, Gunma 370-1292, Japan

Abstract

We report on microcapsular imaging and therapy of micrometastasis using micronized microcapsule by carbonate water, which releases their core contents with response to radiation, via 2 radiotherapy sessions. In the first session, computed tomography (CT)-detectable microcapsules containing P-selectin antigen were intravenously injected to detect metastasis via antibody-antigen accumulation of $\alpha V\beta 3$. The second session involved treatment of metastasis by carboplatin, released from microcapsules by radiation corresponding to P-selectin expression and P-selectin-P-SGL-1 antigen-antibody reactions.

The microcapsules were $0.52 \pm 0.029 \mu\text{m}$ (ϕ). Anti- $\alpha V\beta 3$ microcapsules accumulated around metastasis sites and were detectable on CT. These microcapsules released P-selectin antigen in response to the first irradiation. In the second session, the microcapsules released carboplatin. The micronized microcapsules deposited more carboplatin, resulting in more reduction of metastases. However, they were not significantly different when compared with unmiconized microcapsules.