[¹⁸F]-2-(2-Nitroimidazol-1*H*-yl)-(3,3,3trifluoropropyl)acetamide [¹⁸F]EF3

Kam Leung, PhD¹

Created: September 10, 2007; Updated: October 22, 2007.

	[¹⁸ F]-2-(2- Nitroimidazol-1 <i>H</i> -yl)- <i>N</i> - (3,3,3- trifluoropropyl)acetamide	
Abbreviated name:	[¹⁸ F]EF3	
Synonym:		
Agent Category:	Compound	
Target:	Hypoxic cells	
	Intracellular reduction and binding	
Method of detection:	PET	
Source of signal:	18 _F	
Activation:	No	
Studies:	• Rodents	Click on the above structure for additional information in PubChem.

Background

[PubMed]

In a variety of solid tumors, hypoxia was found to lead to tumor progression and the resistance of tumors to chemotherapy and radiotherapy (1-3). Tumor oxygenation is

¹ National Center for Biotechnology Information, NLM, NIH, Bethesda, MD; Email: micad@ncbi.nlm.nih.gov.

NLM Citation: Leung K. [¹⁸F]-2-(2-Nitroimidazol-1*H*-yl)-(3,3,3-trifluoropropyl)acetamide. 2007 Sep 10 [Updated 2007 Oct 22]. In: Molecular Imaging and Contrast Agent Database (MICAD) [Internet]. Bethesda (MD): National Center for Biotechnology Information (US); 2004-2013.

heterogeneously distributed within human tumors (4). Hypoxia in malignant tumors is thought to be a major factor limiting the efficacy of chemotherapy and radiotherapy. It would be beneficial to assess tumor oxygenation before and after therapy to provide an evaluation of tumor response to treatment and an insight into new therapeutic treatments (5). Tumor oxygenation is measured invasively using computerized polarographic oxygen-sensitive electrodes, which is regarded as the gold standard (6). Functional and non-invasive imaging of intra-tumoral hypoxia has been demonstrated to be feasible for the measurement of tumor oxygenation (7). This has led to the search and development of hypoxia-targeted, non-invasive markers of tumor hypoxia.

Chapman proposed the use of 2-nitroimidazoles for hypoxia imaging (8). 2-Nitroimidazole compounds are postulated to undergo reduction in hypoxic condition, forming highly reactive oxygen radicals that subsequently bind covalently to macromolecules inside the cells (9). [¹⁸F]Fluoromisonidazole ([¹⁸F]FMISO) is the most widely used positron emission tomography (PET) tracer for imaging tumor hypoxia (7). However, it has slow clearance kinetics and a high lipophilicity, resulting in substantially high background in PET scan. Novel 2-nitroimidazoles, such as [¹⁸F]FETA, [¹⁸F]FETNIM, 4-Br[¹⁸F]FPN, [¹⁸F]EF1, and [¹⁸F]EF5, are currently being investigated as potential markers of tumor hypoxia [PubMed]. 2-(2-Nitroimidazol-1*H*-yl)-*N*-(3,3,3trifluoropropyl)acetamide (EF3) is a 3-trifluorinated analog of EF1 (2-(2-nitro-1*H*imidazol-1-yl)-*N*-(3-fluoropropyl)acetamide). EF3 binding to hypoxic tumor cells was shown to be dependent on oxygen and less dependent on the intracellular level of reductase system (10, 11). [¹⁸F]EF3 is being evaluated as a PET probe for detection of tumor hypoxia.

Synthesis

[PubMed]

Josse et al. (12) reported that $[^{18}F]EF3$ was synthesized by coupling 2,3,5,6tetrafluorophenyl 2-(2-nitroimidazol-1-yl) acetate with $[^{18}F]$ -3,3,3-trifluoropropylamine in 5% radiochemical yield. $[^{18}F]$ -3,3,3-trifluoropropylamine was obtained with 40% overall chemical yield by oxidative $[^{18}F]$ -fluorodesulfurization of ethyl *N*-phthalimido-3aminopropane dithioate, followed by deprotection with hydrazine. The total synthesis time was <90 min from the $[^{18}F]$ HF production in the cyclotron to the purification of $[^{18}F]EF3$, which had a specific activity of 2.6 GBq/mmol (71 mCi/mmol) with a radiochemical purity >95%.

In Vitro Studies: Testing in Cells and Tissues

[PubMed]

No publication is currently available.

Animal Studies

Rodents

[PubMed]

Mahy et al. (13) studied the biodistribution of $[^{18}F]EF3$ in C3H mice bearing NFSA, FSA, FSA II, SCC VII, Sa-NH, or MCa-4 tumors under 10%, 21%, or 95% oxygen until the mice were euthanized 5–770 min after injection. The half-life in blood was 73.9 min. ^{[18}F]EF3 was eliminated mainly *via* the kidneys (75% of the injected activity was found in the urine by ~13 h). The biodistribution was fast and homogeneous except in the brain and bone, where it was significantly lower, and in the liver and the kidney, where it was significantly higher. In most organs, the exceptions being the gastrointestinal and urinary tracts, tissue/blood ratios were below or close to unity. There was a relative accumulation of the tracer in tumors with time (tumor/muscle ratios were 1.31–3.52, and tumor/blood ratios were 1.24–2.88 at 220 min after injection). In FSA II tumors, 10% oxygen (P =0.004) significantly increased the tumor/muscle ratio, whereas 95% oxygen (P = 0.005) decreased it. [¹⁸F]EF3 was rapidly metabolized in the tumor, kidney, and liver with 49%, 6%, and 0.04% of the tracer intact at 30 min after injection, respectively. In other experiments, Mahy et al. (14) found a significant correlation ($r^2 = 0.57$, P < 0.01) between the [¹⁸F]EF3 tumor/muscle ratio and the fluorescence intensity of EF5 in the mice bearing tumors.

Other Non-Primate Mammals

[PubMed]

No publication is currently available.

Non-Human Primates

[PubMed]

No publication is currently available.

Human Studies

[PubMed]

No publication is currently available.

References

1. Serkies K., Jassem J. Chemotherapy in the primary treatment of cervical carcinoma. Crit Rev Oncol Hematol. 2005;**54**(3):197–208. PubMed PMID: 15890269.

- 2. Vaupel P., Mayer A. Hypoxia and anemia: effects on tumor biology and treatment resistance. Transfus Clin Biol. 2005;**12**(1):5–10. PubMed PMID: 15814285.
- 3. Rajendran J.G., Krohn K.A. Imaging hypoxia and angiogenesis in tumors. Radiol Clin North Am. 2005;**43**(1):169–87. PubMed PMID: 15693655.
- 4. Vaupel P., Harrison L. Tumor hypoxia: causative factors, compensatory mechanisms, and cellular response. Oncologist. 2004;**9Suppl 5**4–9. PubMed PMID: 15591417.
- Dehdashti F., Grigsby P.W., Mintun M.A., Lewis J.S., Siegel B.A., Welch M.J. Assessing tumor hypoxia in cervical cancer by positron emission tomography with 60Cu-ATSM: relationship to therapeutic response-a preliminary report. Int J Radiat Oncol Biol Phys. 2003;55(5):1233–8. PubMed PMID: 12654432.
- 6. Raleigh J.A., Dewhirst M.W., Thrall D.E. Measuring Tumor Hypoxia. Semin Radiat Oncol. 1996;6(1):37–45. PubMed PMID: 10717160.
- Foo S.S., Abbott D.F., Lawrentschuk N., Scott A.M. Functional imaging of intratumoral hypoxia. Mol Imaging Biol. 2004;6(5):291–305. PubMed PMID: 15380739.
- 8. Chapman J.D. Hypoxic sensitizers--implications for radiation therapy. N Engl J Med. 1979;**301**(26):1429–32. PubMed PMID: 229413.
- 9. Chapman J.D., Baer K., Lee J. Characteristics of the metabolism-induced binding of misonidazole to hypoxic mammalian cells. Cancer Res. 1983;43(4):1523–8. PubMed PMID: 6831401.
- Cobb L.M., Nolan J., Hacker T. Retention of misonidazole in normal and malignant tissues: interplay of hypoxia and reductases. Int J Radiat Oncol Biol Phys. 1992;22(4): 655–9. PubMed PMID: 1544833.
- Franko A.J., Koch C.J., Garrecht B.M., Sharplin J., Hughes D. Oxygen dependence of binding of misonidazole to rodent and human tumors in vitro. Cancer Res. 1987;47(20):5367–76. PubMed PMID: 3652041.
- 12. Josse O., Labar D., Georges B., Gregoire V., Marchand-Brynaert J. Synthesis of [18F]labeled EF3 [2-(2-nitroimidazol-1-yl)-N-(3,3,3-trifluoropropyl)-acetamide], a marker for PET detection of hypoxia. Bioorg Med Chem. 2001;9(3):665–75. PubMed PMID: 11310602.
- Mahy P., De Bast M., Leveque P.H., Gillart J., Labar D., Marchand J., Gregoire V. Preclinical validation of the hypoxia tracer 2-(2-nitroimidazol-1-yl)- N-(3,3,3-[(18)F]trifluoropropyl)acetamide, [(18)F]EF3. Eur J Nucl Med Mol Imaging. 2004;**31**(9):1263–72. PubMed PMID: 15197503.
- Mahy P., De Bast M., Gillart J., Labar D., Gregoire V. Detection of tumour hypoxia: comparison between EF5 adducts and [18F]EF3 uptake on an individual mouse tumour basis. Eur J Nucl Med Mol Imaging. 2006;**33**(5):553–6. PubMed PMID: 16523307.