
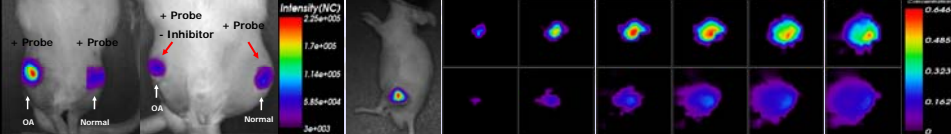


Optical Bio-imaging with Polymer Nanoparticles



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2008. 4. 17.
US-Korea Nano Forum




Wednesday, Jan. 16, 2008
Judah Folkman, Cancer Pioneer
By Alice Park



HarvardScience

M. Judah Folkman, biomedical pioneer, dies at 74
Surgeon, research scientist, teacher and mentor, created field of angiogenesis

The New York Times
January 16, 2008
Judah Folkman, Researcher, Dies at 74



Children's Hospital Boston

Children's mourns the death of Dr. Judah Folkman

Clinical and Cancer Research

In Memoriam

Judah Folkman, MD (1933–2008)

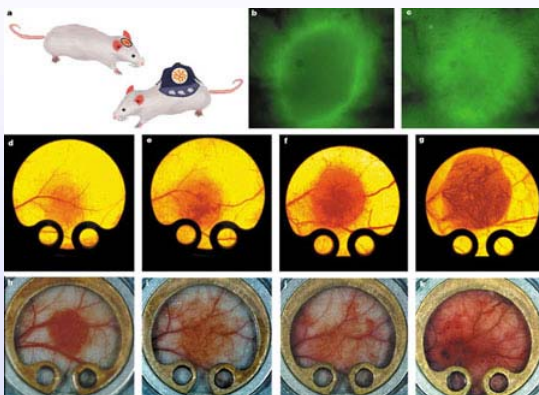
The Editors and Staff of *Clinical Cancer Research* join with the entire cancer research community in mourning the loss of one of the brightest stars in our universe, Judah Folkman. Dr. Folkman was a long-time member and valued friend of the American Association for Cancer Research and a frequent contributor to AACR journals. His most recent contribution appears in this issue (Lee T-Y, Tjin Tham Sjin RM, Movahedi S, Ahmed B, Pravda EA, Lo K-M, Gillies SD, Folkman J, Javaherian K. Linking antibody Fc domain to endostatin significantly improves endostatin half-life and efficacy. *Clin Cancer Res* 2008;14:1487-93).

"On January 14, Dr. Judah Folkman, **founder of the field of angiogenesis**, died unexpectedly in Denver, Colo., while en route to Vancouver for one of the thousands of lectures that he gave to scientists around the world. A visionary and scientific pioneer, Dr. Folkman was founder and director of the Vascular Biology Program at Children's Hospital Boston, and a professor of Pediatric Surgery and Cell Biology at Harvard Medical School." *from Bess Andrews, Childrens Hospital*



"When Dr. Folkman first proposed, in the 1970s, that a cancer could be kept in check by cutting off its blood supply, **he faced skepticism from a scientific community** that simply wasn't ready for his ideas. But he persevered, even when there were setbacks, and today, more than **1,000 laboratories worldwide** are engaged in the study of angiogenesis, the field he founded. As a result of Dr. Folkman's vision and resilience, more than **10 new cancer drugs are currently on the market**, and more than **1.2 million patients worldwide are now receiving anti-angiogenic therapy.**" *from Robert Cook, Harvard Science Correspondent*

What is Tumoral Angiogenesis



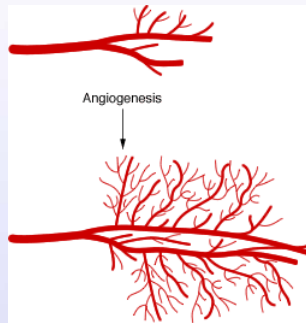
✚ **Pathological angiogenesis is a hallmark of cancer.**

✚ **Without blood vessels, tumors can not grow beyond a critical size (~ 5 mm in diameter) due to the lack of oxygen and nutrients for their survival.**



Carmeliet et al. *Nature* 2000;407:249-257

When Tumoral Angiogenesis Starts



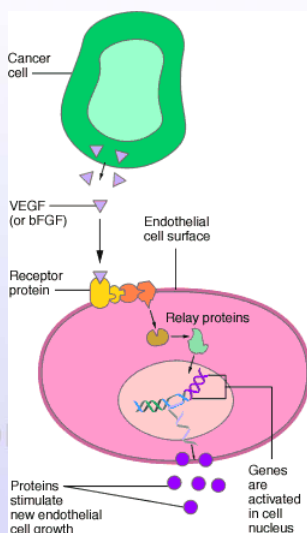
Beyond the critical **volume of 2 cubic millimeters**, oxygen and nutrients have difficulty diffusing to the cells in the center of the tumor, causing a state of cellular **hypoxia** that marks the **onset of tumoral angiogenesis**.

Korea Institute of Science and Technology

<http://www.angioworld.com>



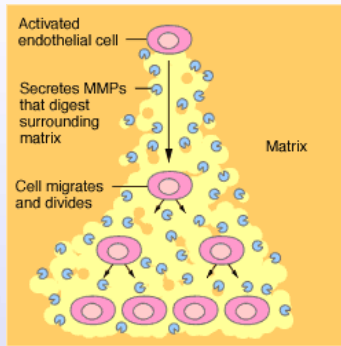
The Angiogenesis Signaling Cascade



VEGF and **bFGF** are first synthesized inside tumor cells and then secreted into the surrounding tissue. When they encounter endothelial cells, they bind to specific proteins, called **receptors**, sitting on the outer surface of the cells. The binding of either VEGF or bFGF to its appropriate receptor activates a series of relay proteins that transmits a signal into the nucleus of the endothelial cells. The nuclear signal ultimately prompts a group of genes to **make products needed for new endothelial cell growth**.



Endothelial Cell Activation



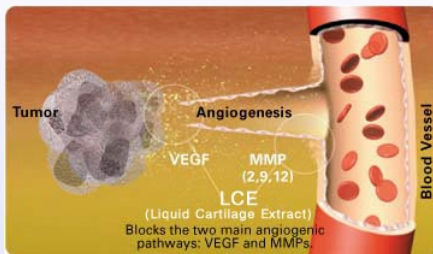
The activation of endothelial cells by VEGF or bFGF sets in motion a series of steps toward the creation of new blood vessels.

First, the activated endothelial cells produce matrix **metalloproteinases (MMPs)**. The **MMPs** break down the *extracellular matrix*—support material that fills the spaces between cells and is made of proteins and polysaccharides.

Breakdown of this matrix permits the migration of endothelial cells. As they migrate into the surrounding tissues, activated endothelial cells begin to divide.



The Angiogenic Sequence



- A cell activated by a **lack of oxygen** releases angiogenic molecules that **attract inflammatory and endothelial cells** and promote their proliferation.
- During their migration, inflammatory cells also secrete molecules that intensify the angiogenic stimuli.

- The endothelial cells that form the blood vessels respond to the angiogenic call by differentiating and by secreting matrix **metalloproteases (MMP)**, which digest the blood-vessel walls to enable them to escape and migrate toward the site of the angiogenic stimuli.

In vivo molecular target assessment of matrix metalloproteinase inhibition

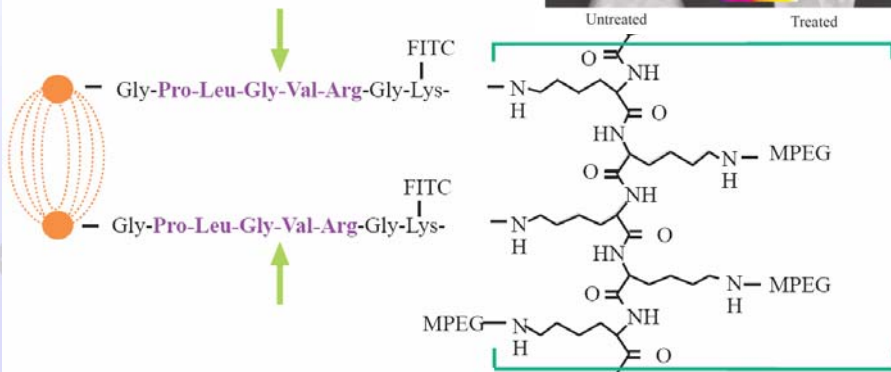
CHRISTOPH BREMER, CHING-HSIUAN TUNG & RALPH WEISSELER

Centre for Molecular Imaging Research, Massachusetts General Hospital and Harvard Medical School, Charlestown, Massachusetts, USA

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Fluorochrome

Peptide substrate



Permeability of Angiogenic Vessel

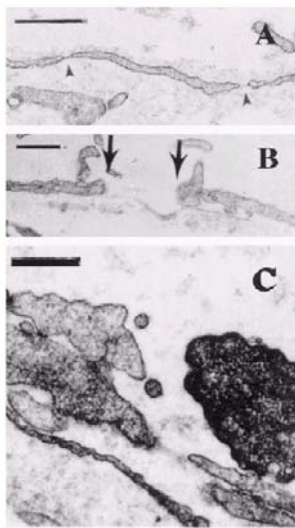


Table 3. Pore cutoff size vs. effective permeability to BSA

Tumor cell line (n)	Pore cutoff size, nm	Permeability ($\times 10^7$ cm/sec)
HCa-I (5)*	380–550	2.06 ± 1.44 (1.60–3.99)
LS174T (6)*†	400–600	1.24 ± 0.45 (0.56–1.67)
ST-8 (5)*	550–780	3.73 ± 3.34 (1.67–9.28)
MCa IV (8)*	1,200–2,000	2.5 ± 1.5 (1.2–5.1)
MCa IV (6)§	380–550	1.9 ± 0.5 (1.3–2.5)
U87 (6)‡	7–100	3.8 ± 1.2 (2.4–5.0)

n, number of animals.

*Grown in dorsal chamber.

†Yuan *et al.* (16).

‡Grown in cranial window.

§Yuan *et al.* (12).

Hobbs SK *et. al.* Proc Natl Acad Sci USA 1998;95:4607-4612.

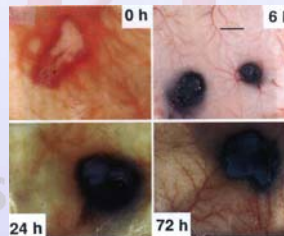
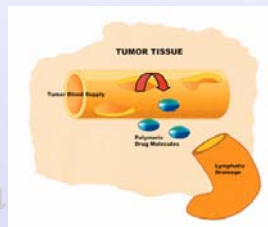
EPR effect (Enhanced Permeability And Retention)

[CANCER RESEARCH 46, 6387-6392, December 1986]

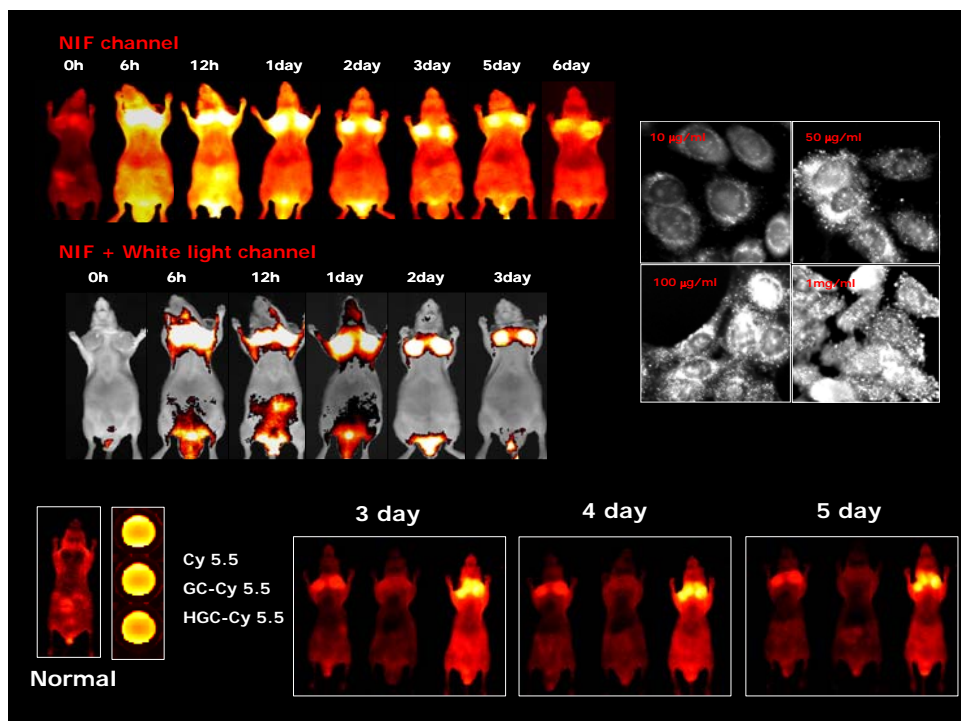
A New Concept for Macromolecular Therapeutics in Cancer Chemotherapy: Mechanism of Tumorotropic Accumulation of Proteins and the Antitumor Agent Smancs¹

Yasuhiro Matsumura and Hiroshi Maeda²

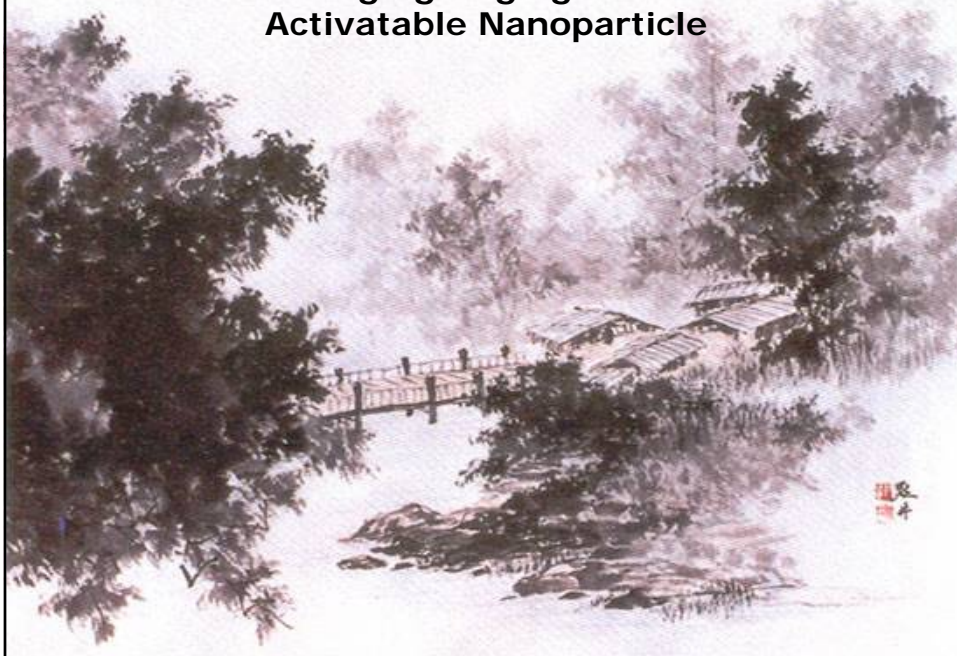
Department of Microbiology, Kumamoto University Medical School, Kumamoto 860, Japan



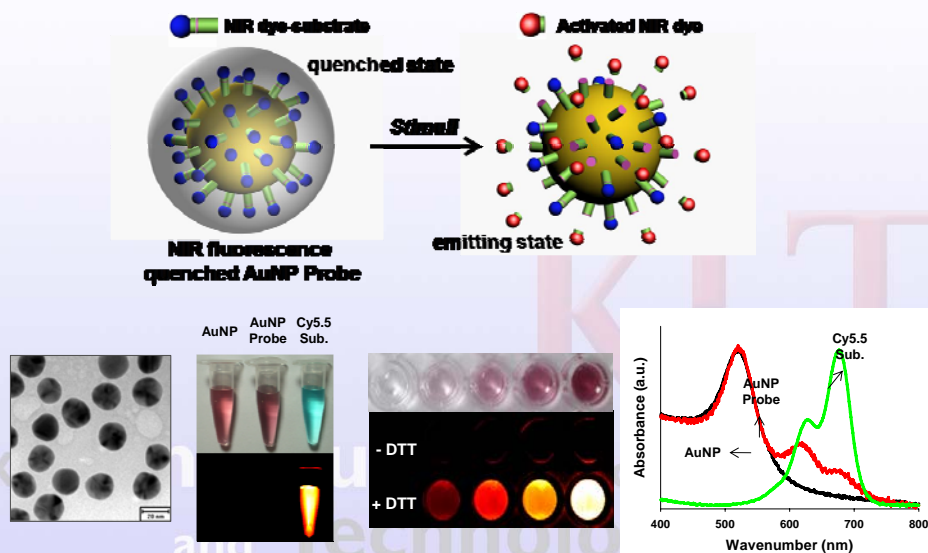
Accumulation of Evans blue-albumin complex in tumor tissue and normal skin in tumor-bearing mice. Tumor S-180 was injected into the skin.



Imaging Angiogenesis Activatable Nanoparticle

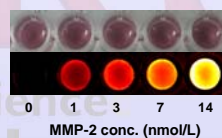
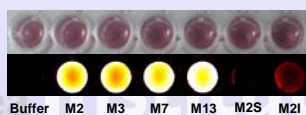
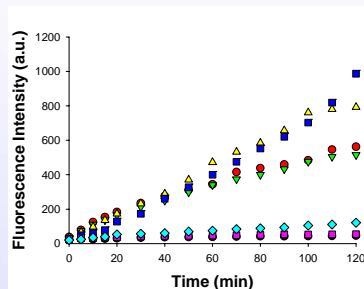
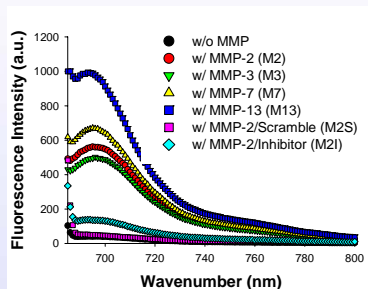


Gold Nanoparticle for MMP Activation



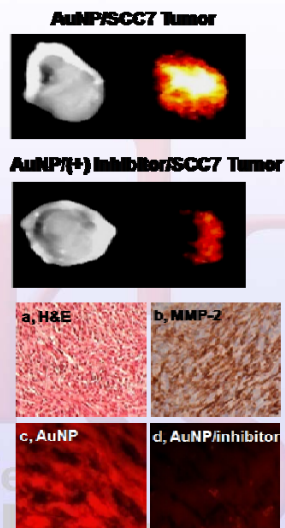
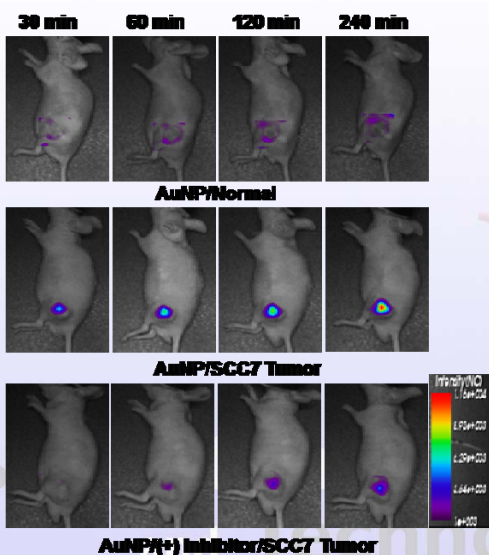
In press, Angew Chem Intern Ed (2008)

Gold Nanoparticle for MMP Activation



In press, *Angew Chem Intern Ed* (2008)

Gold NP for MMP-2 positive Tumor Imaging

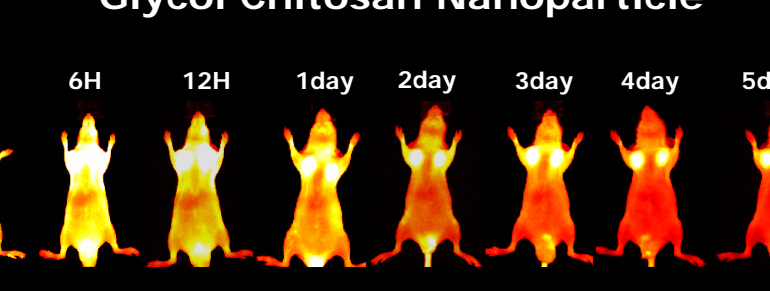


In press, *Angew Chem Intern Ed* (2008)

Long Circulating Self-assembled Glycol Chitosan Nanoparticle

1H 6H 12H 1day 2day 3day 4day 5day

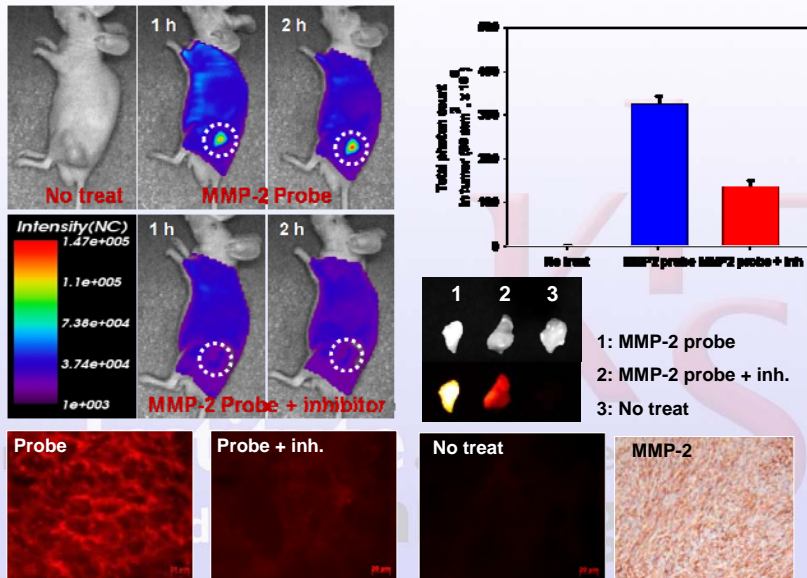
6day 7day 8day 9day 10day



• SCC-7cell (3x10⁶ cell), tail vein injection of HGC-Cy5.5 (5mg/kg)



Polymer NP for MMP-2 positive Tumor Imaging



Molecular Imaging

- Visualization of biological process
- Molecular events at molecular and cellular level
- In living systems
- Using remote imaging detectors

"The characterization and measurement of biological processes in living animals, model systems, and humans at the cellular and molecular level by using remote imaging detectors"

Lucker GD and Piwnica-Worms D *Acad. Radiol.* 2001;8;4

Reduction in Tumor Size

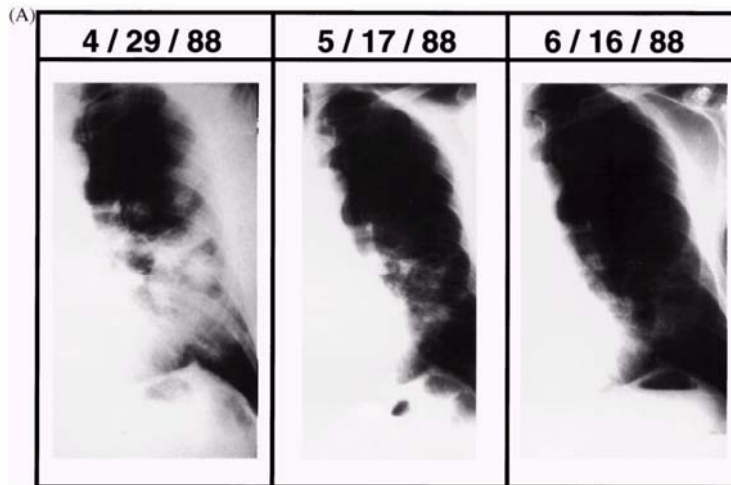
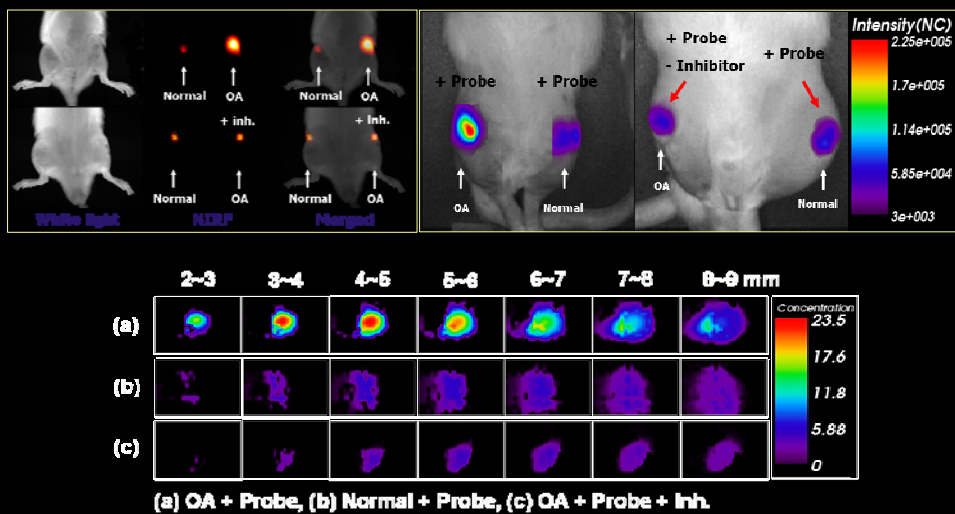
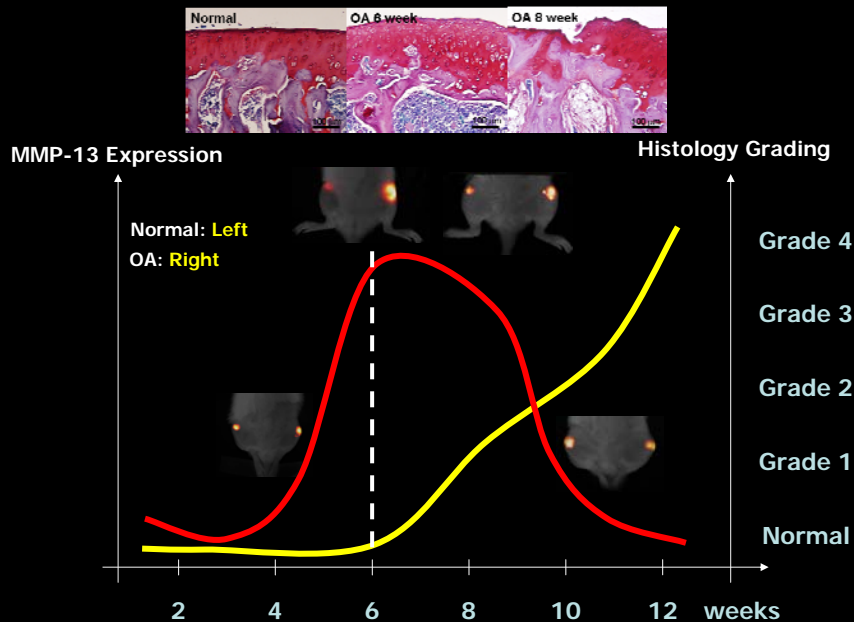


Fig. 5. (A) Chest radiographs from a patient with adenocarcinoma of the lung treated with SMANCS/Lpd via the bronchial artery three times and with aqueous intravenous SMANCS $\times 3$ /week during several weeks. A remarkable reduction in tumor size is seen. (B,C) CT scans and (D) chest X-ray images from different lung cancer patients. Please note tumor size reduction between the date given.

MMP-13 Specific Nanoprobe for OA

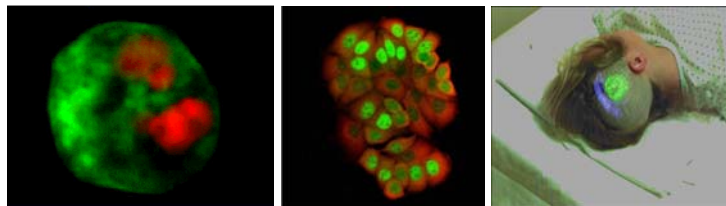


Histology vs. MMP-13 Detection



Theragnosis

Diagnosis, Molecular Imaging
Targeted Therapy
Evaluation of Therapeutic Effect



Future of Medicine

