

161Tb-Pertuzumab as a Theranostic Antibody for HER2-Positive Breast Cancer

 Katarína Hajduová¹, Martin Vlk⁴, Ján Kozempel⁴, Zbyněk Nový^{1,2}, Miloš Petřík^{1,2,3}, Marián Hajdúch^{1,2,3}

1 Institute of Molecular and Translational Medicine, Faculty of Medicine and Dentistry, Palacky University, Olomouc, Czech Republic

2 Czech Advanced Technology and Research Institute, Palacky University, Olomouc, Czech Republic

3 Institute of Molecular and Translational Medicine, University Hospital, Olomouc, Czech Republic

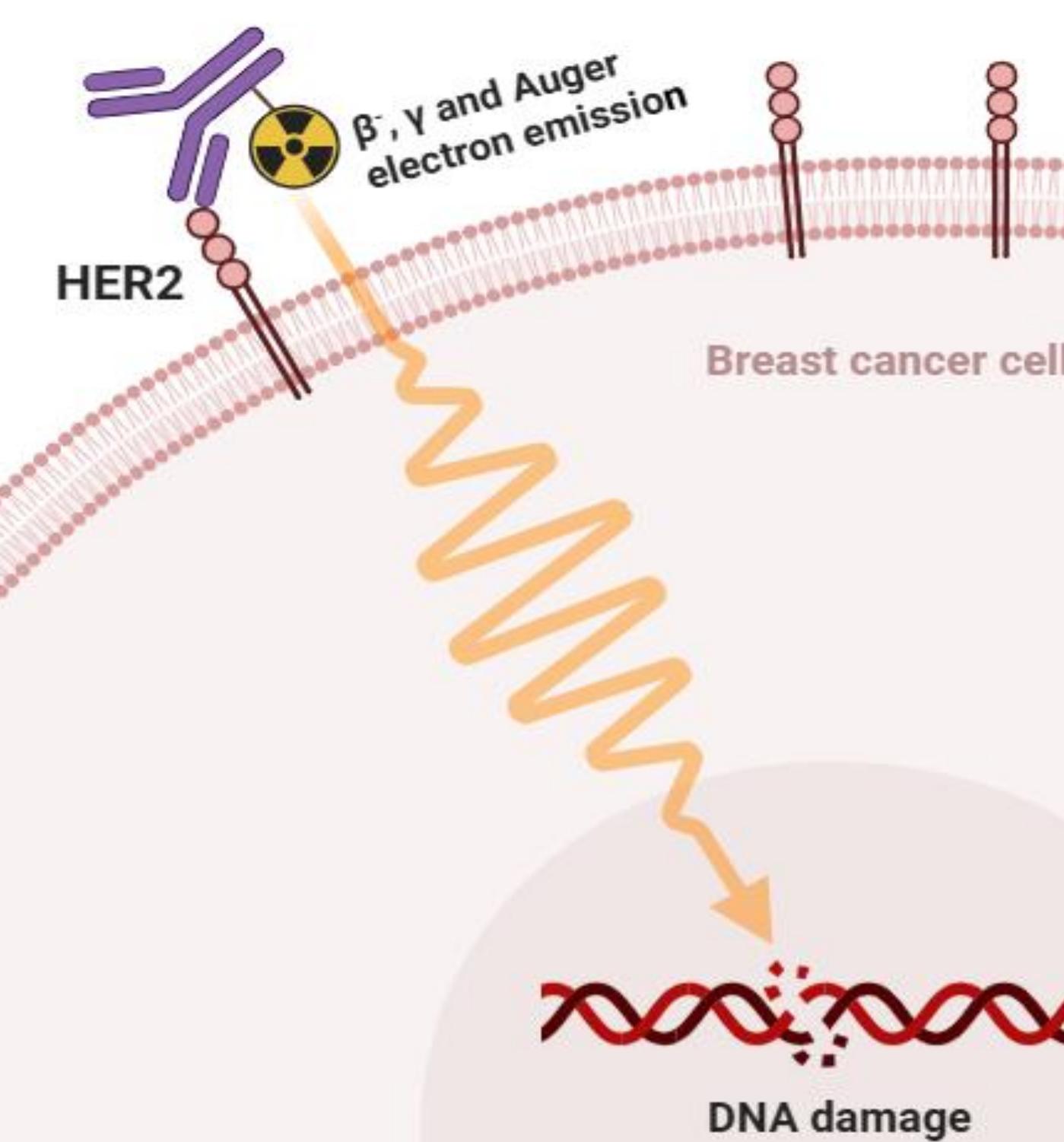
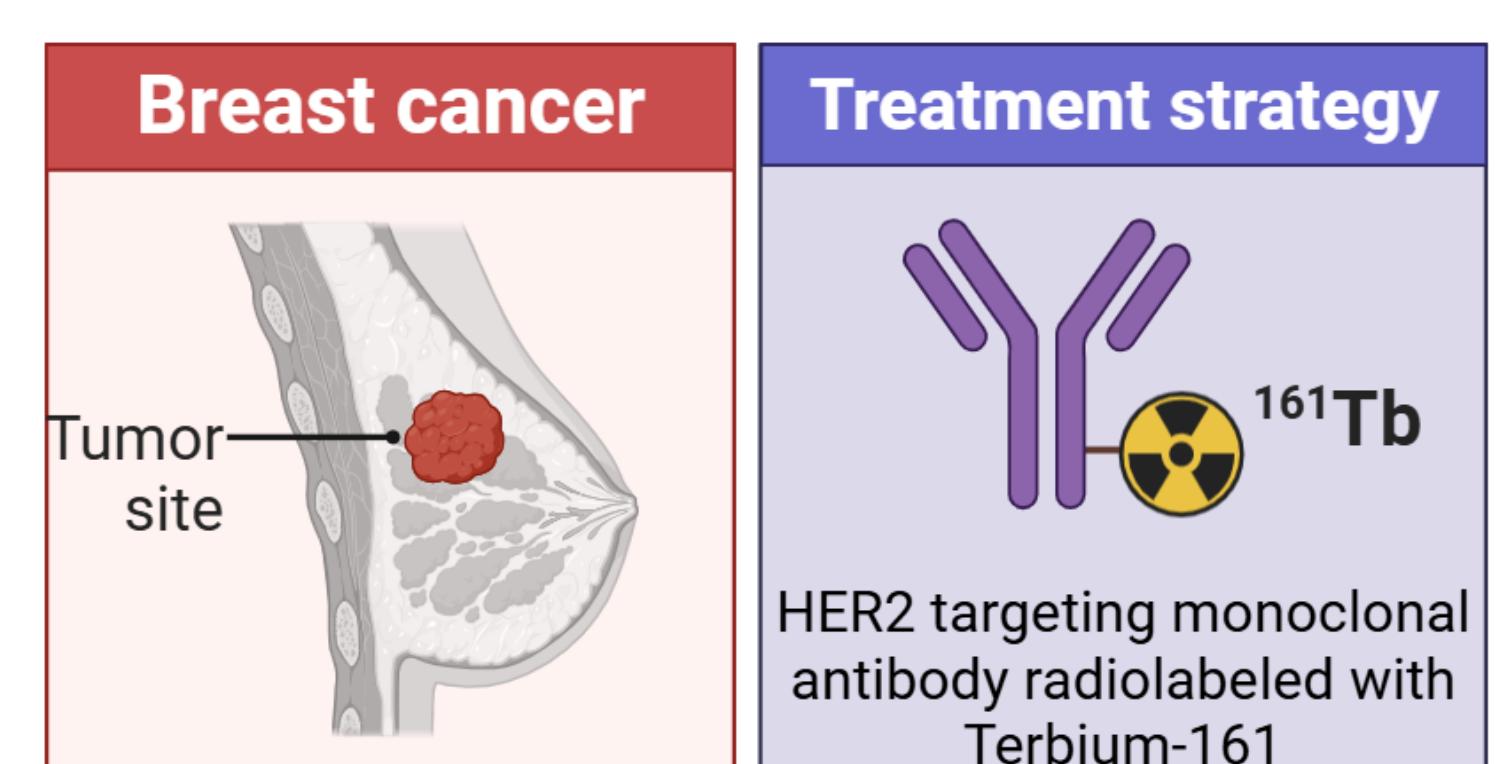
4 Faculty of Nuclear Sciences and Physical Engineering, Prague, Czech Republic

Introduction

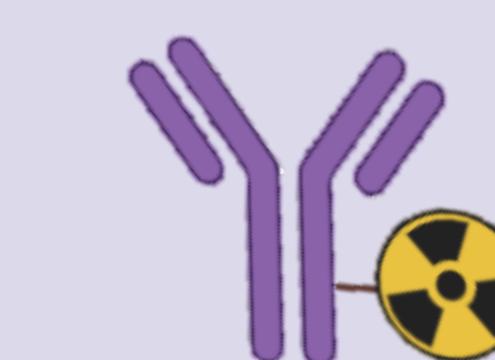
HER2-positive breast cancer represents 15–20% of cases and is associated with aggressive disease, making HER2 a critical therapeutic target

Terbium-161 [¹⁶¹Tb] offers theranostic advantages with β^- and γ emissions and abundant Auger electrons, providing potentially superior therapeutic effects compared to Lutetium-177 [¹⁷⁷Lu], especially for small lesions

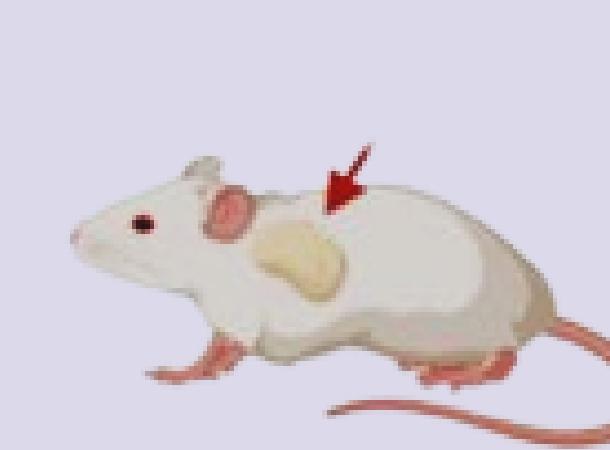
Pertuzumab, an FDA-approved HER2-targeting antibody



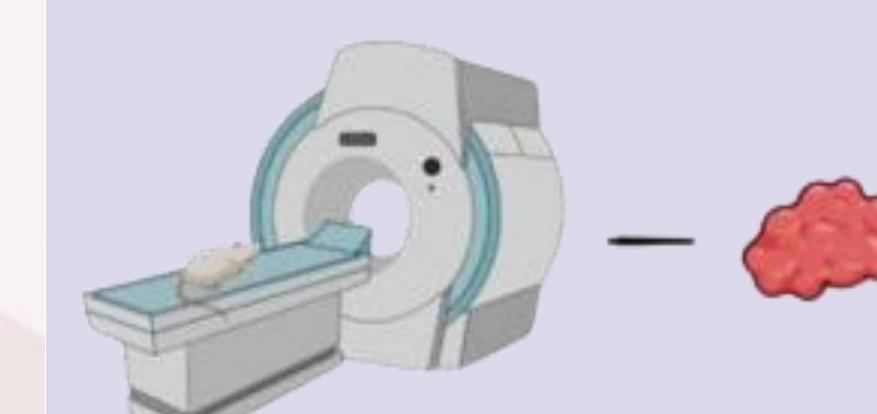
Methods



[¹⁶¹Tb] Tb-Pertuzumab was successfully radiolabeled with >95% radiochemical purity



Experiments were performed in HER2-positive (SKOV-3) and HER2-negative (MDA-MB-231) tumour-bearing SCID mice to assess specificity



SPECT/CT imaging and biodistribution were conducted across multiple time points (1 h to 7 days) to quantify organ and tumour uptake (%ID/g)

Results

SPECT/CT imaging with [¹⁶¹Tb] Tb-Pertuzumab

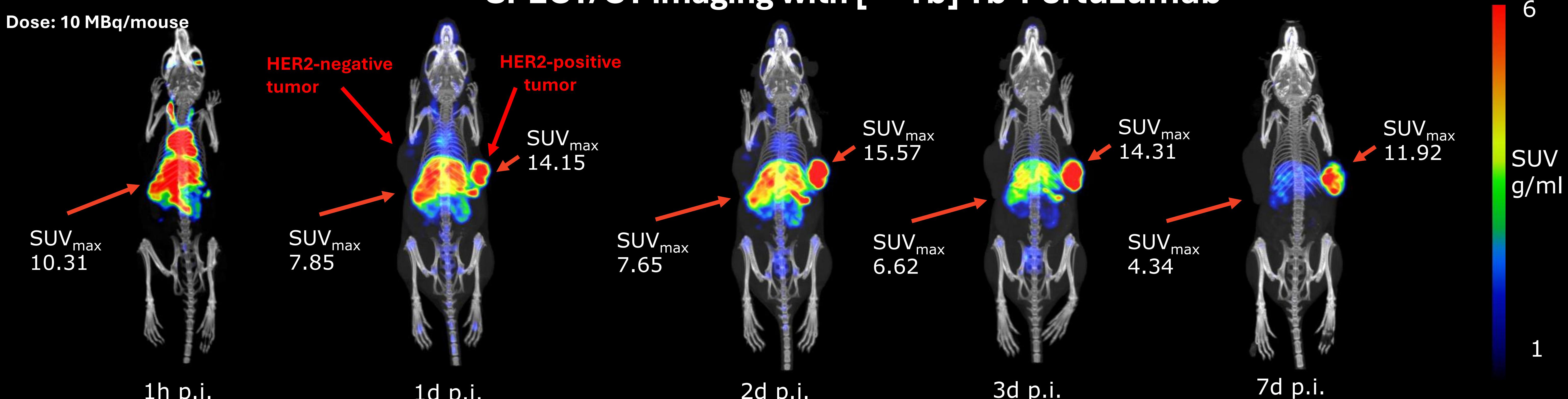


Fig. 1 Static SPECT/CT MIP images of SCID dual tumour mice xenografts – on the left side of the animal – MDA-MB-231 (HER2 negative tumour) and on the right side of the animal SKOV3 (HER2 positive) tumour injected with [¹⁶¹Tb] Tb-Pertuzumab

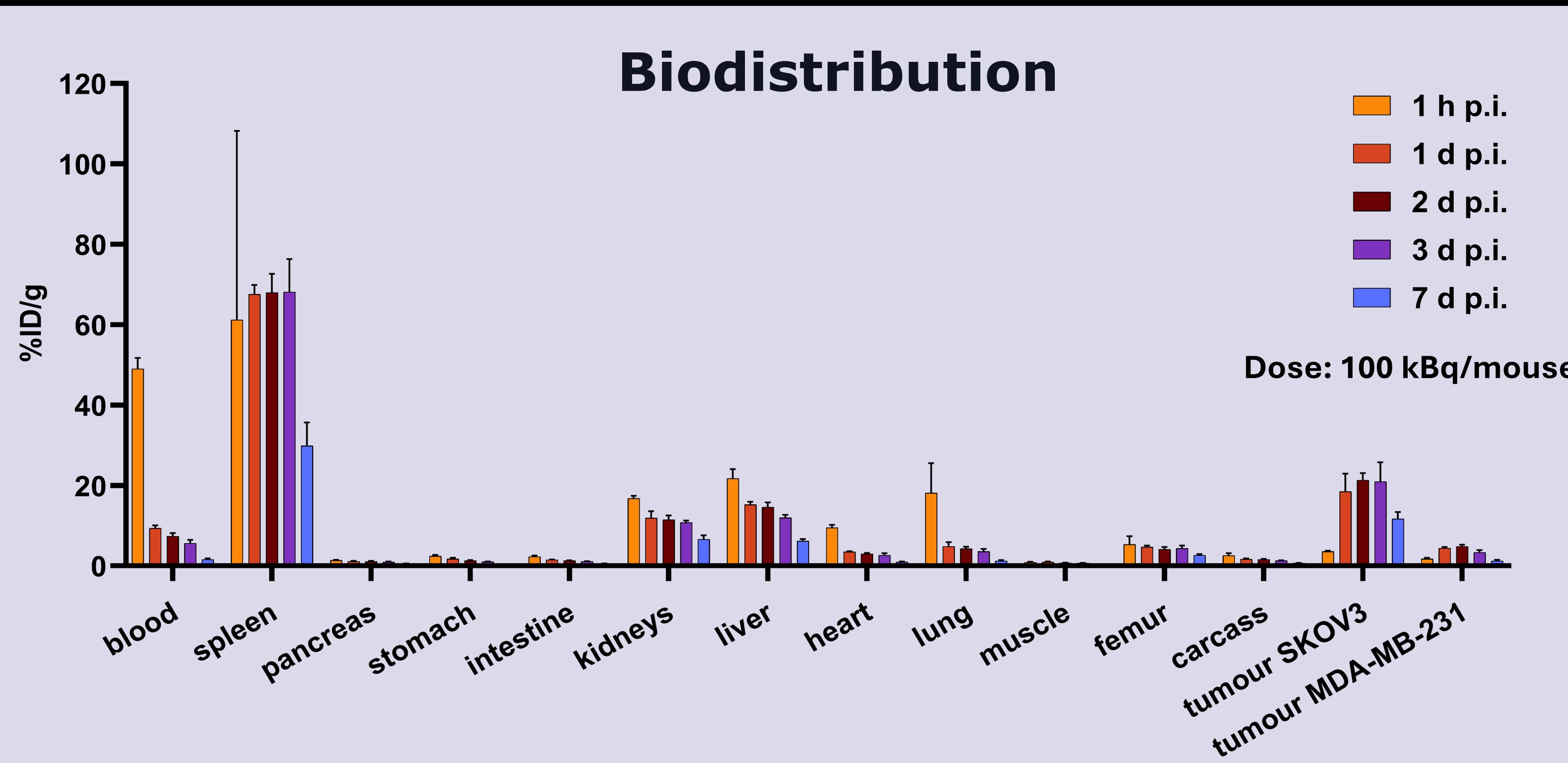
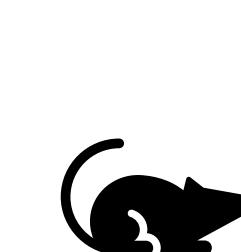


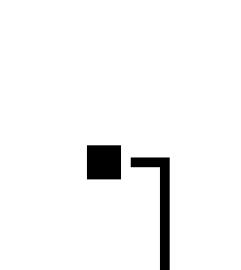
Fig. 2 Ex vivo biodistribution profile of [¹⁶¹Tb] Tb-Pertuzumab in dual tumour mice xenografts (n=4) presented as mean values \pm standard deviation

Conclusions

[¹⁶¹Tb] Tb-pertuzumab shows high, sustained uptake in HER2-positive tumours (peak 21.33 ± 1.73 %ID/g on day 2; 11.67 ± 1.69 %ID/g at day 7) and minimal uptake in HER2-negative tumours, confirming specificity.



SPECT/CT imaging clearly visualized HER2-positive tumours from day 1 onward, with very low signal in HER2-negative lesions.



Findings support further development of ¹⁶¹Tb agents, including dosimetry and therapy studies, toward eventual clinical translation.

Contact: katarina.hajduova01@upol.cz

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