

Einfluss der Antiepileptika : Phenytoin,
Levetiracetam, Lamotrigin, Phenobarbital,
Carbamazepin und Chemotherapeutika:
Temozolomid, Lomustin auf die Akkumulation
von Protoporphyrin IX in Zellen maligner
Gliome.

Synthes Award 2007

10 Steps to a more radical Tumor Removal in GBM Patients

A in vitro study of interactions and apoptosis in the presence of 5ALA

Martin Hefti, Christine Galiagousis*, Tea D`Angelo*, Ina Albert*, Angelika Viviani*

Neurochirurgische Klinik Kantonsspital Aarau, Zürcher Hochschule für Angewandte Wissenschaften*

PIX Fluorescence in malignant Glioma surgery

- Diagnostic

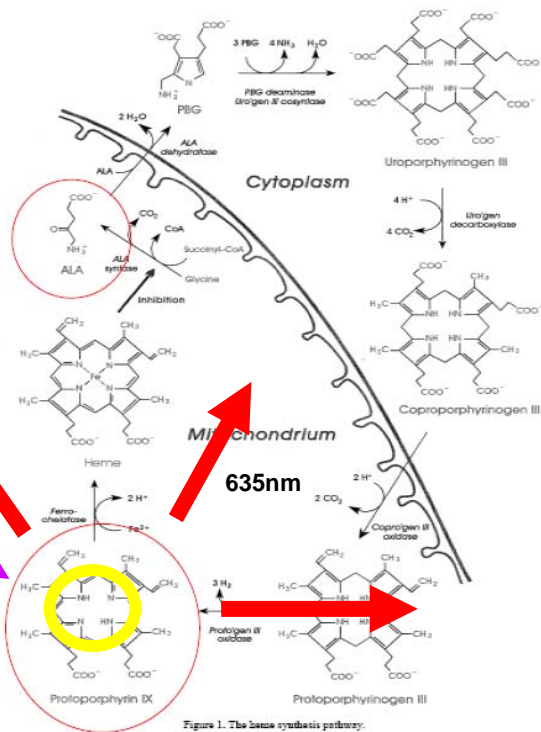


Figure 1. The heme synthesis pathway.

Fluorescence +
 Specificity: 17/17+3 = **0.85**
 Sensitivity: 31/31+10 = **0.76**

Fluorescence ++
 Specificity : **1.0**
 Sensitivity: 42/42+1 = **0.98**

PIX Fluorescence in malignant Glioma surgery

Therapy:

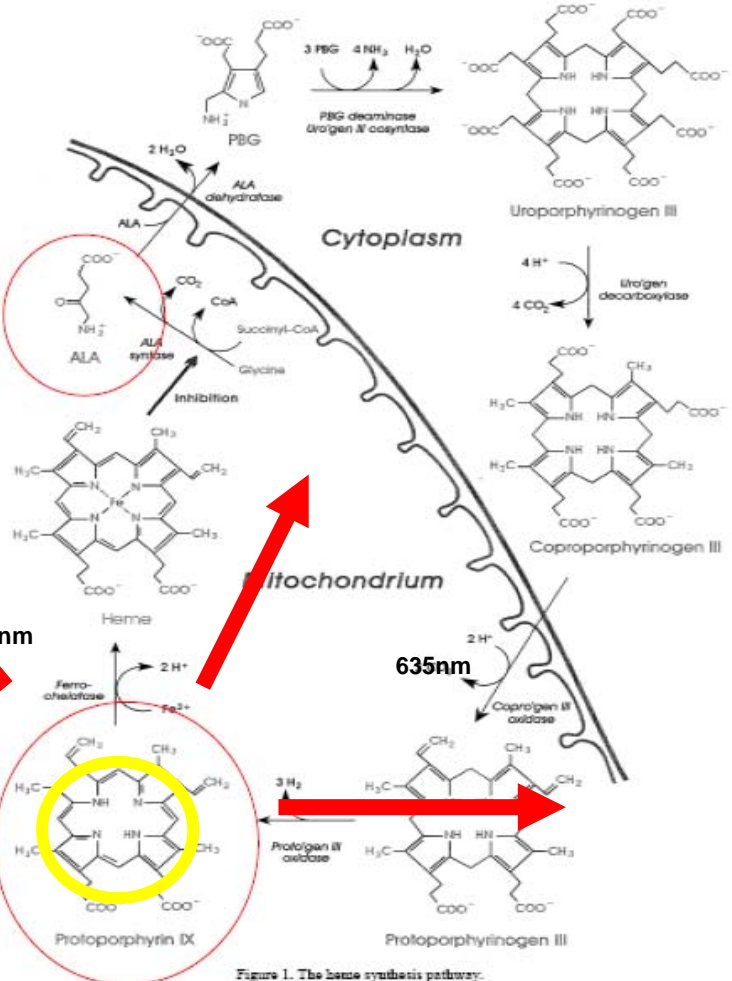
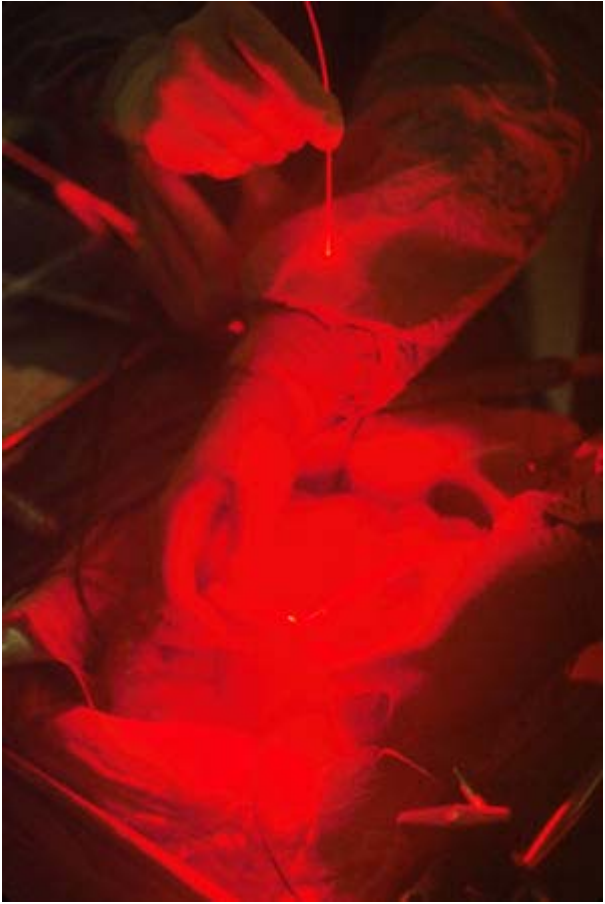


Figure 1. The heme synthesis pathway.



The Quest

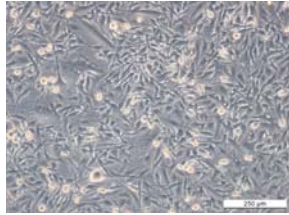
- Do commonly administered antiepileptic and chemotherapeutic drugs interact with PIX accumulation of in GBM?
- What is the optimal light source and exposure time for a selective therapy in PDT with GBM?



GBM cell lines

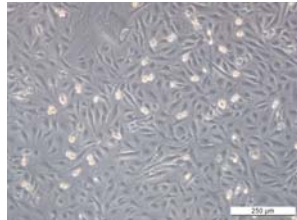
- U373 MG

well known specifications



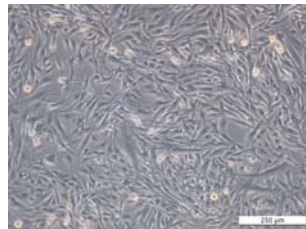
- U251 MG

well known specifications



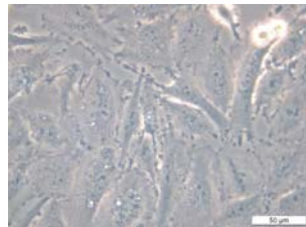
- SNB 19

laminin slows growth and motility of cells



- U87 MG

wild p53 less prone to apoptosis



Drugs

- Phenytoin Phenhydantol[®]
- Levetiracetam Keppra[®]
- Lamotrigine Lamictal[®]
- Phenobarbital Luminal[®]
- Carbamazepine Tegretol[®]

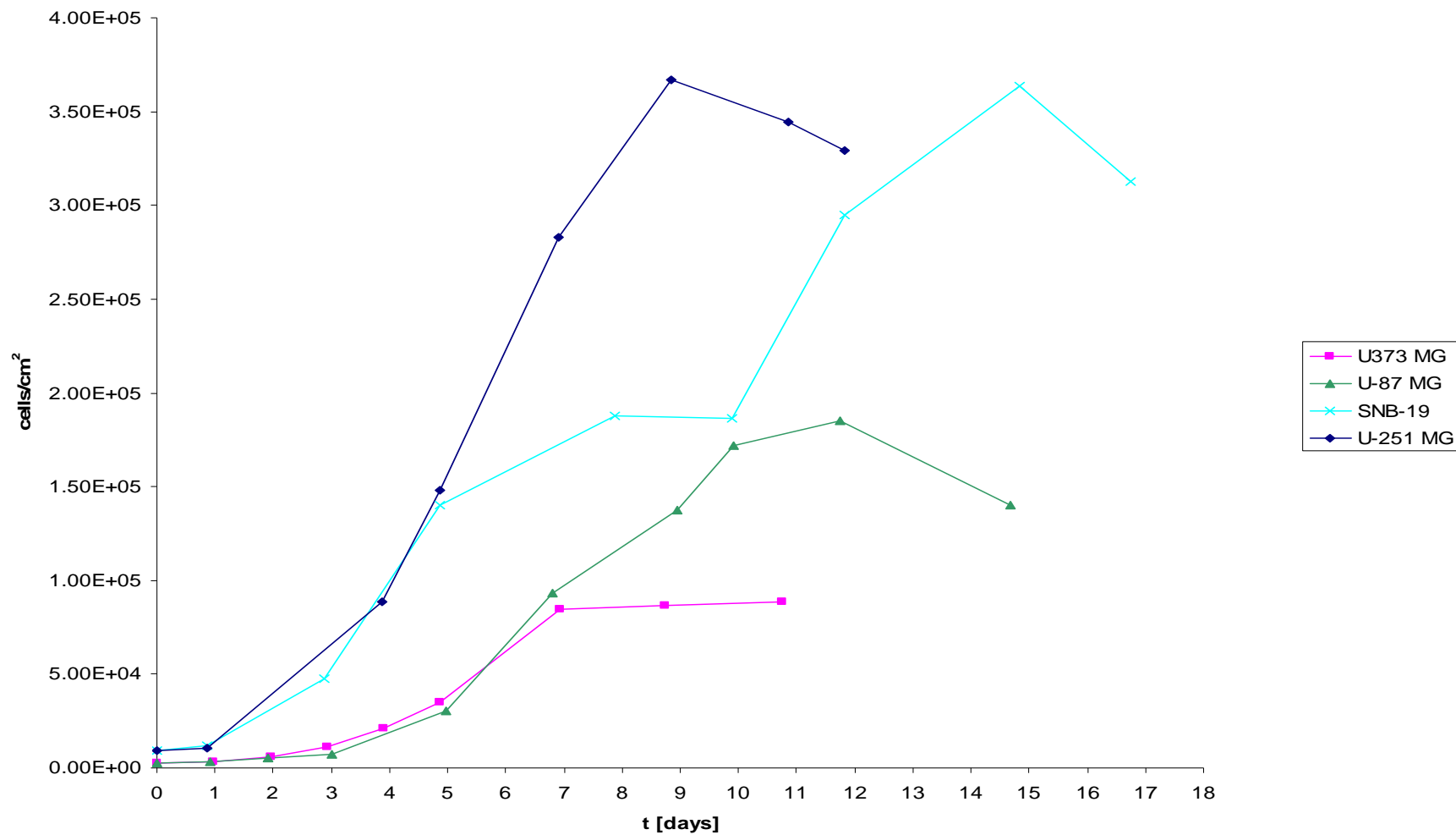
- Temozolomide Temodal[®]
- Lomustine Cecenu[®]

Preliminary study

Step 1-5

1. Do all GBM cell lines accumulate PIX in the presence of 5ALA?
2. What is the $[\text{PIX}]_{\text{max}}$ per individual GBM cell
3. What is the $[\text{PIX}]_{\text{max}}$ corresponding fluorescence intensity per cell?
4. Cell lines with no visibly discernable fluorescence (eg. Medulloblastoma), what is their $[\text{PIX}]_{\text{max}}$ and corresponding fluorescence intensity?
5. GBM and Medulloblastoma in co culture, how accurate can we define the borderline by fluorescence

Growth curve of four different glioblastoma cell lines



Main Study

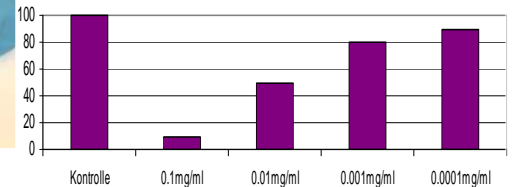
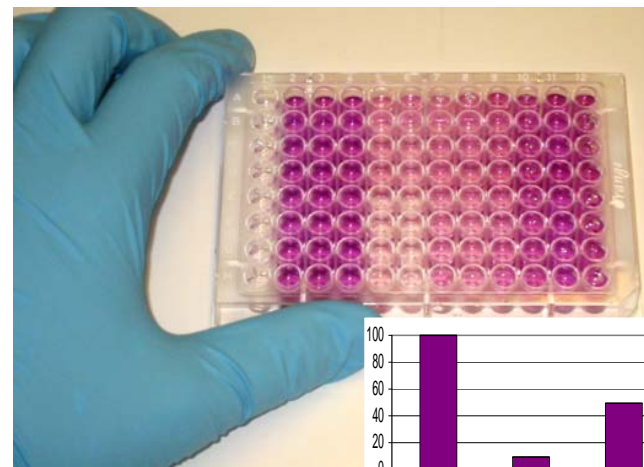
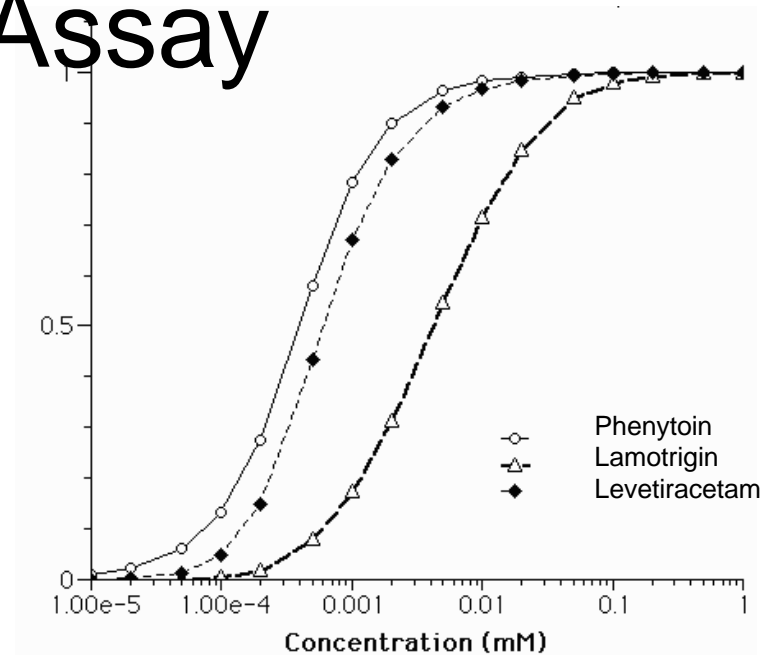
Step 6 and 7

drug related interaction

- Step 6: Dose response analysis, Culture vs. Drug; MTT Assay
 1. Drug related mitochondrial inactivity
- Step 7: Dose response analysis, Culture, Drug, 5ALA; MTT and FL
 1. 5ALA/ drug MTT – drug MTT
 2. 5ALA related mitochondrial inactivity
 3. Drug related fluorescence intensity

Dose Response MTT Assay

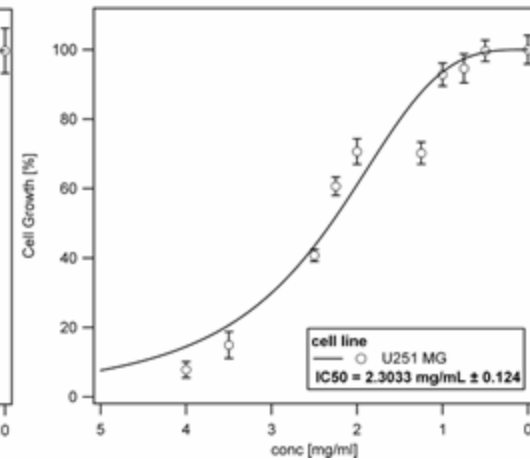
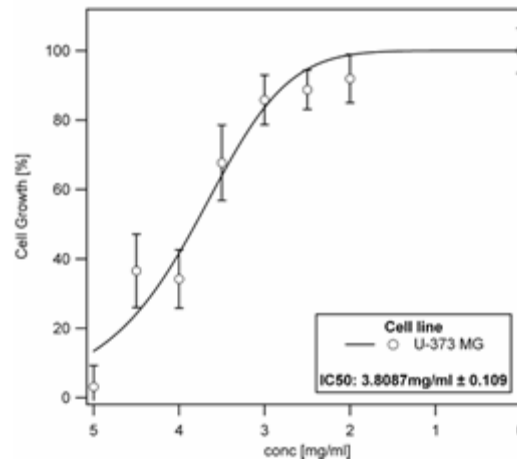
- U373 MG
 - U251MG
 - SNB19
 - U87 MG
- to
- Phenytoin, Levetiracetam, Lamotrigin, Phenobarbital, Carbamazepin and Temozolomide, Lomustin
- each



Dose Response MTT and FL Assay

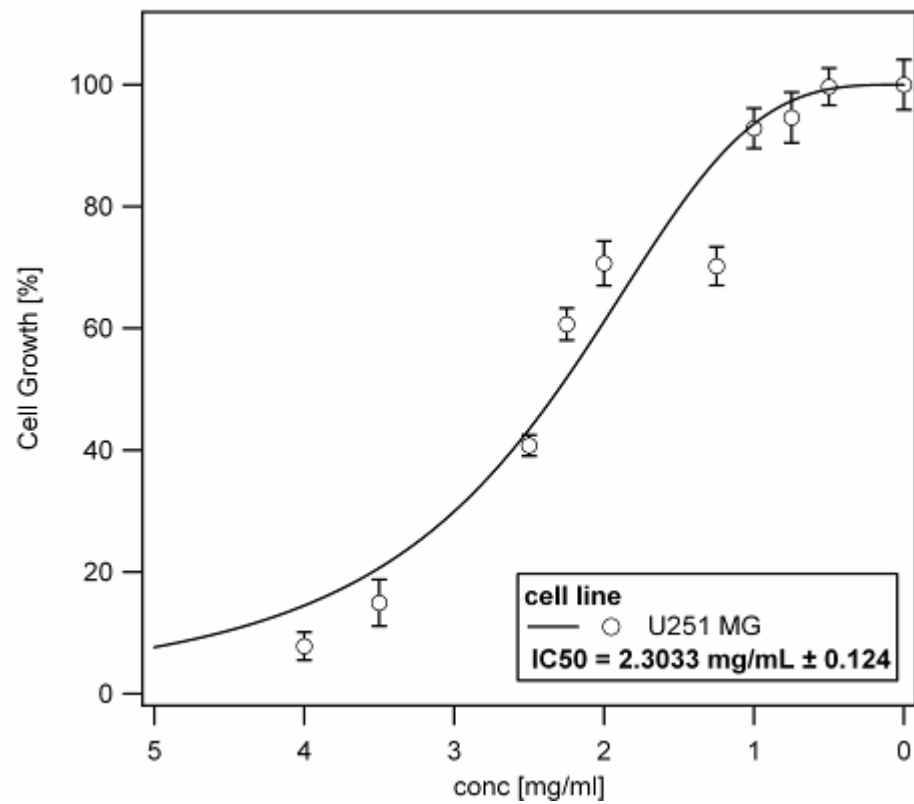
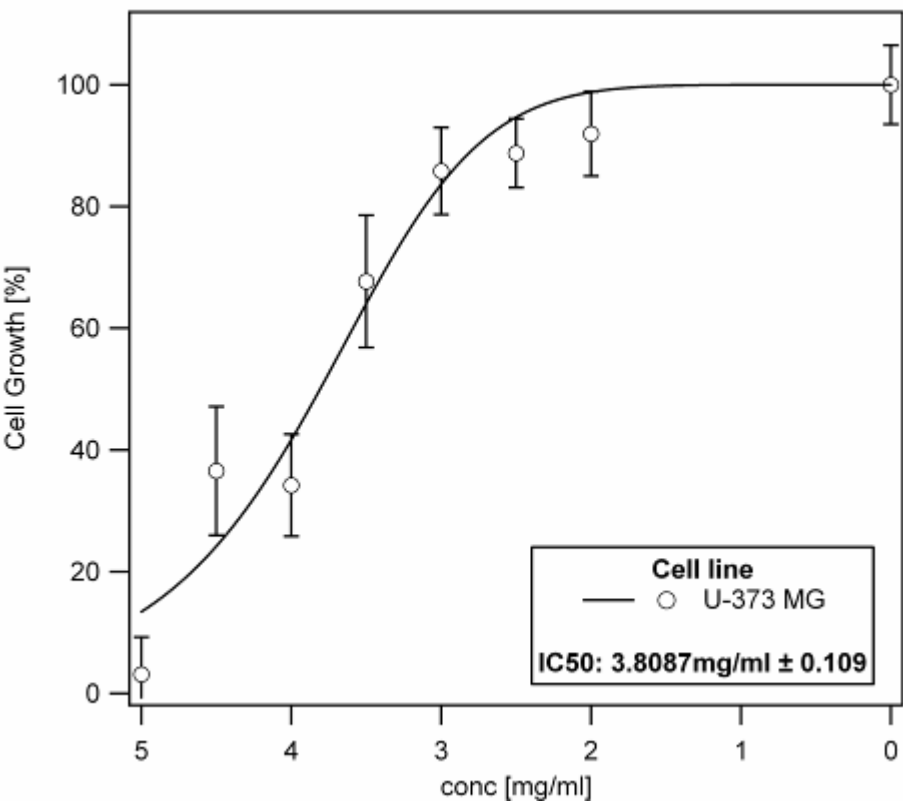
- U373 MG
- U251MG
- SNB19
- U87 MG
- to
- Phenytoin, Levetiracetam, Lamotrigin, Phenobarbital, Carbamazepin and Temozolomide, Lomustin
- each and
- 5 ALA

Dose-Response curves: Determination of IC50 after having incubated the glioblastoma cell lines U-373MG and U251 MG with ALA for 48 hours



Response: MTT and PIX

Dose-Response curves: Determination of IC_{50} after having incubated the glioblastoma cell lines U-373MG and U251 MG with ALA for 48 hours

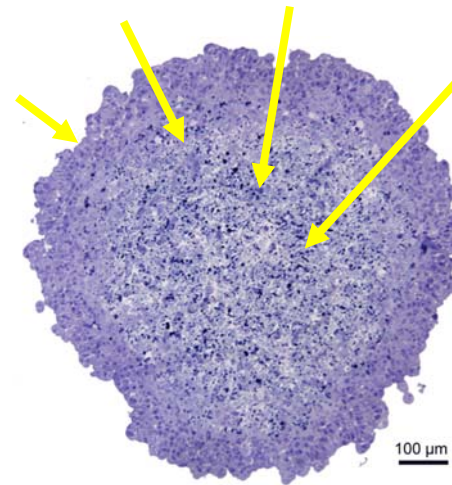
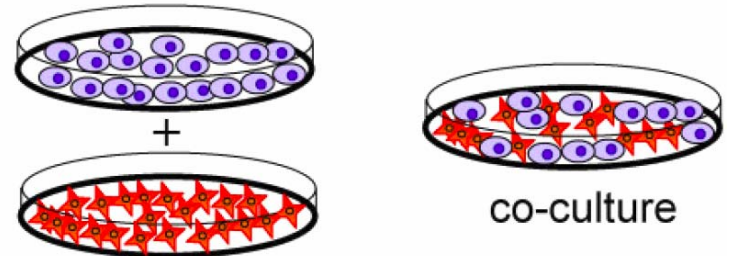


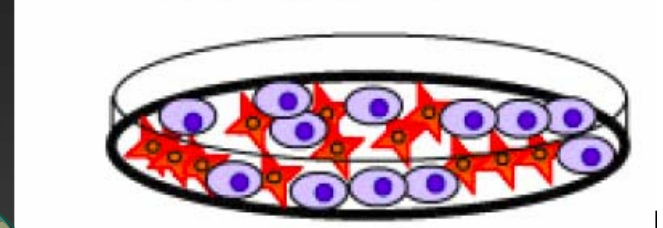
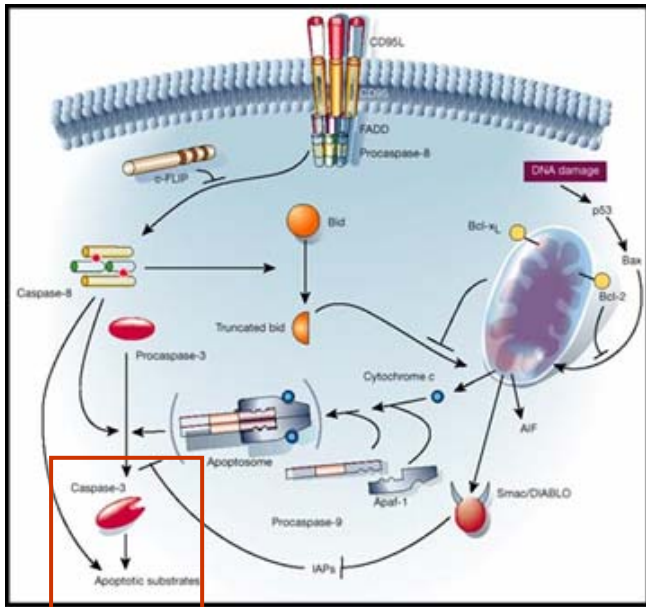
Main Study

Step 8, 9 and 10

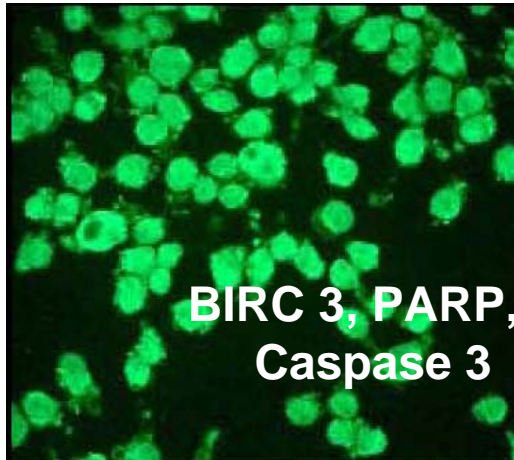
Photodynamic Therapy

- Step 8: Dose response analysis, Culture and Co Culture, 5ALA, exposure time, MTT Assay
- [Step 9](#): PCR and immunostaining for the detection of activated apoptosis genes as proof of successful PDT
- Step 10: PDT in 3D GBM culture, evidence of BIRC 3, PARP, Caspase 3 activity to define penetration depth





Duration of illumination for
>90% cell death



**BIRC 3, PARP,
Caspase 3**

Y83-77

What we learn

- Influence of common antiepileptic and chemotherapeutic medication on PIX Fluorescence intensity in GBM
- Optimal light source and exposure time for PIX PDT in GBM for max cell death and specificity and exposure depth in malignant Gliomas

Perspectives

THANKS



Ina Albert

Christine Galiagousis

Tea D'Angelo