



Synthesis, modification, characterization, radiolabeling and *in vivo* behavior of carboxylated nanographene oxide sheets as a tumor imaging agent

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Abstract

Graphene is a crystalline form of carbon that is regarded as a novel and innovative product. carboxylated nanographene oxide sheets (NGO-COOH) was synthesized using a modified Hummer's method and assess their medical significance. NGO-COOH were successfully synthesized with an average size of 40 nm. FT-IR, UV-Vis, XPS spectrophotometry, and TEM were used to thoroughly describe them. The cytotoxicity function of NGO-COOH nanosheets were tested against cell line. The radiosynthesized [^{99m}Tc]Tc-NGO-COOH had a high radiolabeling yield (97.3±0.45 %). The tumor uptake of [^{99m}Tc]Tc-NGO-COOH nanosheets in an *in vivo* biodistribution model in tumor-bearing mice was high. NGO-COOH nanosheets may be a promising imaging agent, based on these findings.

key words: Nanographene sheets, Technetium-99m, Nanosynthesis, Tumor imaging, Radiolabeling

1. Introduction

Cancer is one of the major deaths in the globe. Chemotherapy and radiotherapy are two traditional anticancer treatments that are frequently hindered by toxicity and a lack of specificity[1]. Some anticancer drugs bioavailability and effectiveness are impaired by their low water solubility, limited blood half-life, small therapeutic indexes, and high systemic toxicity [1-3]. Nanotechnology advancements have sparked new uses in cancer therapy and diagnosis [4].

Nanoparticles (NPs) are particles with a diameter of 100 nm or less that can readily pass-through cell membranes since their size is tiny. In terms of size and form, They can be prepared as stable, uniform and clearly defined characterized structures. For diagnosis or treatment, In highly selective biological mediums, NPs must be safe and biocompatible [4, 5]. The accumulation of NPs in the intended site is decreased because NPs are taken up by the reticuloendothelial system (RES). Many studies have been conducted with the aim of lowering RES uptake and rising particulate carrier concentrations at the target sites in the body[5]. Recent research has shown, nanoparticle size is critical factors in preventing RES uptake and achieving higher concentrations in the targeted site

can be applied to study cell binding in both normal and cancer cells, as well as their tissue-targeting potential. Because of their small size, nanoparticles to easily permeate cell membrane through active and passive mechanisms, enabling them to serve as drug and contrast agent carriers [6, 7]. Tumor tissues have an entirely distinct vasculature system than normal tissue blood vessels. [8]. The vascular system that develops in tumour tissue has abnormal dynamics, with features such as, the lack of a basement membrane and hyperpermeability. [9]. Blood vessels have irregular diameters, irregular shape and blind ends. When tumour tissues' diffusion is restricted, they develop new blood vessels for waste elimination, and oxygen supply. Angiogenesis is the term for the process of neovascularization (the formation of new blood vessels) [10]. Enhanced permeability and retention (EPR) effect describes this type of cancer tissue phenomena. [8, 11-14].

Nanoparticles should ideally remain in the blood, spread in the body for a reasonable amount of time, and target the same studied (cancer) cells in order to achieve high relative activity rate and allow for long-term treatment. It should be degraded and excreted after the imaging process is completed [3, 15, 16].

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Graphene has recently been investigated for biomedical applications by a few research groups. It has been investigated for biological imaging due to its good biocompatibility, rapid cellular uptake, versatile chemical changes, and unique optical characteristics.[17]. All these previous characteristics are unique characteristics for graphene nanosheets against any other nanoparticles [18-20]. There are many nanoparticles are used in radiomedicine as radiocarryer for the radiotopes used in medicine. Radiolabeled nanoparticles are used for diagnosis or therapy such as ^{99m}Tc -chitosan nanoparticles, ^{99m}Tc -bovine serum albumin nanoparticles, [^{99m}Tc]Tc-Aspergillus flavus synthesized copper oxide, all these nanoparticles are for diagnosis while Indium-111 labeled multifunctional superparamagnetic iron oxide nanoparticles is an example of radiolabeled nanoparticles for therapeutic action[21-26]

Due to its ideal half-life of around 6 hours, ^{99m}Tc is a radionuclide frequently utilized in radioactive tracers investigations as a single-photon emission computed tomography (SPECT) imaging agent[27], ensuring that the patient is not subjected to harmful radiation. [28-30]. ^{99m}Tc also is of favorable energy (140 KeV) of γ -ray yielding a high counting efficacy [31-33].

In this context, we're looking at using carboxylated nanographene sheets to carry [^{99m}Tc]Tc for imaging (e.g. for image-guided drug delivery). We introduce the preparation and characterization of carboxylated nanographene sheets made from a biocompatible and biodegradable graphene and labeling of these carboxylated nanographene oxide sheets with ^{99m}Tc . The cellular absorption and a preliminary *in vivo* evaluation of [^{99m}Tc]Tc-carboxylated nanographene oxide sheets in a tumor bearing mice are also presented and discussed.

1. Experimental:

1.1. Materials

1.1.1. Chemicals

Graphite, NaNO_3 , H_2SO_4 , KMnO_4 , H_2O_2 and NaOH were bought from Sigma (St. Louis, Mo., USA). Fetal Bovine serum, DMEM, RPMI-1640, HEPES buffer solution, L-glutamine and gentamycin were purchased from Lonza (Belgium).

1.1.2. Radioactive material

Technetium-99m was eluted as pertechnetate from $^{99}\text{Mo}/^{99m}\text{Tc}$ generator that was received as a gift from Radio-isotopes Production Facility (RPF), Egyptian Atomic Energy Authority (EAEA), Cairo, Egypt.

1.1.3. Mammalian cell lines:

Normal human lung fibroblast cells (MRC-5) were collected from the American Type Culture Collection (ATCC, Rockville, MD).

1.2. Synthesis of carboxylated nanographene oxide sheets (NGO-COOH)

The sheets of carboxylated nanographene oxide were synthesized. To form graphite oxide suspension from natural graphite powder, researchers used a modified Hummers' process. 1.0 g graphite and 1.0 g NaNO_3 were first added to 50 mL H_2SO_4 . After that, for 10 minutes, the mix was stirred in an ice bath, 6 g KMnO_4 was added gradually as it warmed to room temperature. For 2 hours, in a water bath at 35 °C, the suspension was regularly stirred. The suspension that has been prepared was then mixed with 100 mL deionized (DI) water. During the diluting step, the temperature of the suspension was kept below 60 °C. Finally, 6 mL H_2O_2 (30%) diluted in 200 mL DI water was added to the suspension to soluble manganese ions to prevent the suspension from forming residual permanganate at 6000 rpm for 10 minutes. The acids and salts that remained were extracted. The supernatant solution was centrifuged several times to remove all of the acids and salts. After ultrasonication the obtained nanographene oxide suspension for 30 minutes, a yellow-brownish graphene oxide suspension was obtained. Any remaining unexfoliated graphitic platelets were dissolved by centrifugation at 2000 rpm for 15 minutes, and the precipitates had been eliminated. For carboxylation of nanographene oxide 10 ml NaOH (12mg/ml) was added followed by sonication for 2 hours at 800 W to convert OH groups to COOH [34-39].

1.3. Characterization of NGO-COOH nanosheets

Various techniques were used to characterize them to ascertain their form, size, surface area, chemical composition, and dispersion. Transmission electron microscopy (TEM) with an acceleration voltage of 200 kV (Ted Pella, Redding, CA, USA), and dynamic light scattering (DLS) at an acceleration voltage of 200 kV (Ted Pella, Redding, CA, USA) are two approaches for characterization (DLS). The XPS peak was deconvoluted by using Gaussian components after a Shirley background subtraction. The O/C atomic ratio of the GO sheets was evaluated using peak area ratio of the XPS core levels and the sensitivity factor of each element in XPS. Raman spectroscopy was carried out at room temperature using a HR-800 Jobin-Yvon equipped with a 532 nm Nd-YAG excitation source. UV-Visible spectrophotometry using Visible recording spectrophotometer UV-160A, Shimadzu, Japan and Fourier transforms infrared spectroscopy (FT-IR), (Mattson Instruments, Inc., New Mexico, USA) was used for (FT-IR) Fourier transforms infrared spectroscopy. Samples were prepared for TEM measurements by putting 5–20 μL of NGO-COOH dispersed solution on a Cu grid and then dried under an IR lamp while the sample had been diluted by

utilizing the same sample quantity of bidistilled water for DLS measurements.

1.4. Radiolabeling of NGO-COOH nanosheets

$[^{99m}\text{Tc}]\text{TcO}_4^-$ was eluted from $^{99}\text{Mo}/^{99m}\text{Tc}$ generator in hepta-oxidation state since this form is not able to label any compound on direct addition, it was eluted. So just before labeling procedure, reduction of ^{99m}Tc is required for converting $^{99m}\text{Tc}^{+7}$ from the hepta state to a favourable lower oxidation state, that can complexes with the ligand to form the radiopharmaceuticals[40].

1.5. Evaluation of Cytotoxic Effects of NGO-COOH nanosheets

1.5.1. Cell line Propagation:

The cells were grown on RPMI-1640 medium supplemented with 10% inactivated fetal calf serum and 50 $\mu\text{g}/\text{mL}$ gentamycin. The cells were maintained at 37°C in a humidified atmosphere with 5% CO_2 and were subcultured 2-3 times per week.

1.5.2. Cytotoxicity evaluation using viability assay

For cytotoxicity assay, the cell lines were suspended in medium at concentration 5×10^4 cell/well in Corning® 96-well tissue culture plates, then incubated for 24 hr. nanographene oxide was then added into 96-well plates (three replicates) to achieve twelve concentrations for it. Six vehicle controls with media were run for each 96 well plate as a control. After incubating for 24 h, the numbers of viable cells were determined by the MTT test. the concentration required to cause toxic effects in 50% of intact cells is called 50% inhibitory concentration (IC_{50}) and was estimated using Graphpad Prism software (San Diego, CA. USA) from graphic plots of the dose response curve for each conc. [41, 42].

1.6. Biodistribution study of $[^{99m}\text{Tc}]\text{Tc}$ -NGO-COOH nanosheets

The animal study was conducted in accordance with the EAEA Committee on Animal Ethics (EAEA/2020/193) which follows the criteria set upon by the European Community for the use of animals as an experiment.

1.6.1. Tumor induction in mice

To form a solid tumor, a 0.2 ml solution of Ehrlich Ascites Carcinoma was administered intramuscularly in the right thigh of female Swiss Albino mice. The animals were well-cared for until the tumors became obvious (10-15 days). The parent tumor line (Ehrlich Ascites Carcinoma) was taken from 7-day-old Swiss Albino donor females and diluted with sterile physiological saline solution to yield 12.5×10^6 cells/ml[43].

1.6.2. *In vivo* biological study of $[^{99m}\text{Tc}]\text{Tc}$ -NGO-COOH nanosheets

Biodistribution studies were carried out by the percentage injected dose per gram (%ID/g) values obtained from radioactivity distribution measured *ex vivo*. At 0.5, 1, 2, 4 h p.i., mice were euthanized and blood, solid tumor, and major organs/tissues were collected and wet-weighed. In addition, separate cohorts of the solid tumor-bearing mice were intravenously injected with $[^{99m}\text{Tc}]\text{Tc}$ -NGO-COOH nanosheets (four mice per group). Radioactivity was detected in each tissue by a gamma-counter (Perkin Elmer) and presented as %ID/g (mean_SD)[44-46].

2. Result and Discussion:

2.1. Characterization of Carboxylated Nanographene oxide sheets (NGO-COOH nanosheets)

All small sheets within a size range of 10-77 nm (**Figure 1 a**), which was corroborated by DLS data that determined the average diameters of Carboxylated Nanographene oxide sheets to be 6.5 ~ 77 nm. The carboxylated nanographene oxide sheets are morphologically studied using transmission electron microscopy (TEM) images (**Figure 1 b**). The lateral width of the carboxylated nanographene oxide sheets was reduced by sonication from several hundreds of nanometers to less than 150 nanometers, while the thickness remained unchanged at 1–2 nanometers as measured by TEM. The presence of COOH groups in the NGO was also confirmed by FTIR measurements. As shown in (**Figure 2 a**) the appearance of absorption peaks at 3437 (sharp peak) and 1638 cm^{-1} , carbonyl group stretched due to C=C of cyclic carbon in the hybrid structure of nanographene while NG-OH can be assigned as a broad band at 3471 cm^{-1} as shown in (**Figure 2 b**) [47]. (**Figure 2 c**) presents XPS peak deconvolution of C(1s) core levels of the GO sheets. In the peak deconvolution, the peak centered at 285.0 eV was attributed to the C-C and C=C bonds. The other deconvoluted peaks located at the binding energies of 286.6, 287.4, 288.3 and 289.4 eV were assigned to the C-OH, C-O-C, C=O, and O=C-OH oxygen-containing functional groups, respectively [49–51]. The O/C atomic ratio of the GO sheets was found to be 0.47. This is consistent with the oxygen content of chemically exfoliated GO sheets reported previously [52,53]. COOH groups of NGO was confirmed by UV/Vis measurement, a peak at 232nm appears due to presence of COOH group as shown in (**Figure 3**) while NGO sheets appear at 270 nm [34, 47, 48]. Carboxylation of NGO nanosheets is done to be coated with hydrophilic moiety such as carboxylic group that helps to prevent the RES mechanism by reducing *in vivo* adsorption.

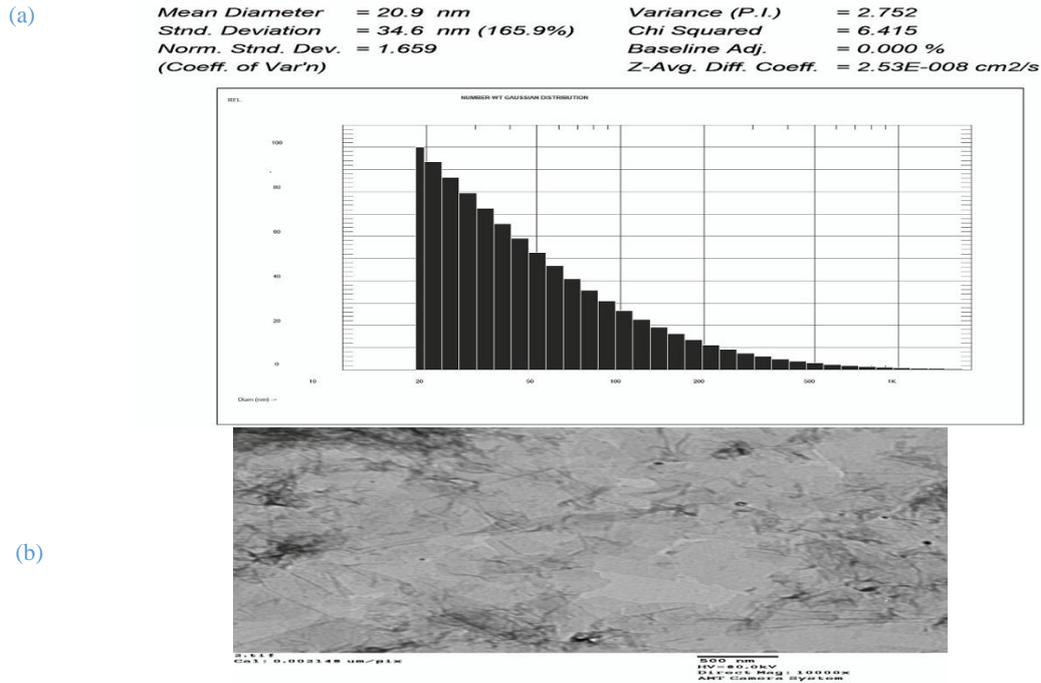


Fig. 1 Size analysis of NGO-COOH nanosheets (a) DLS scan, (b) TEM image

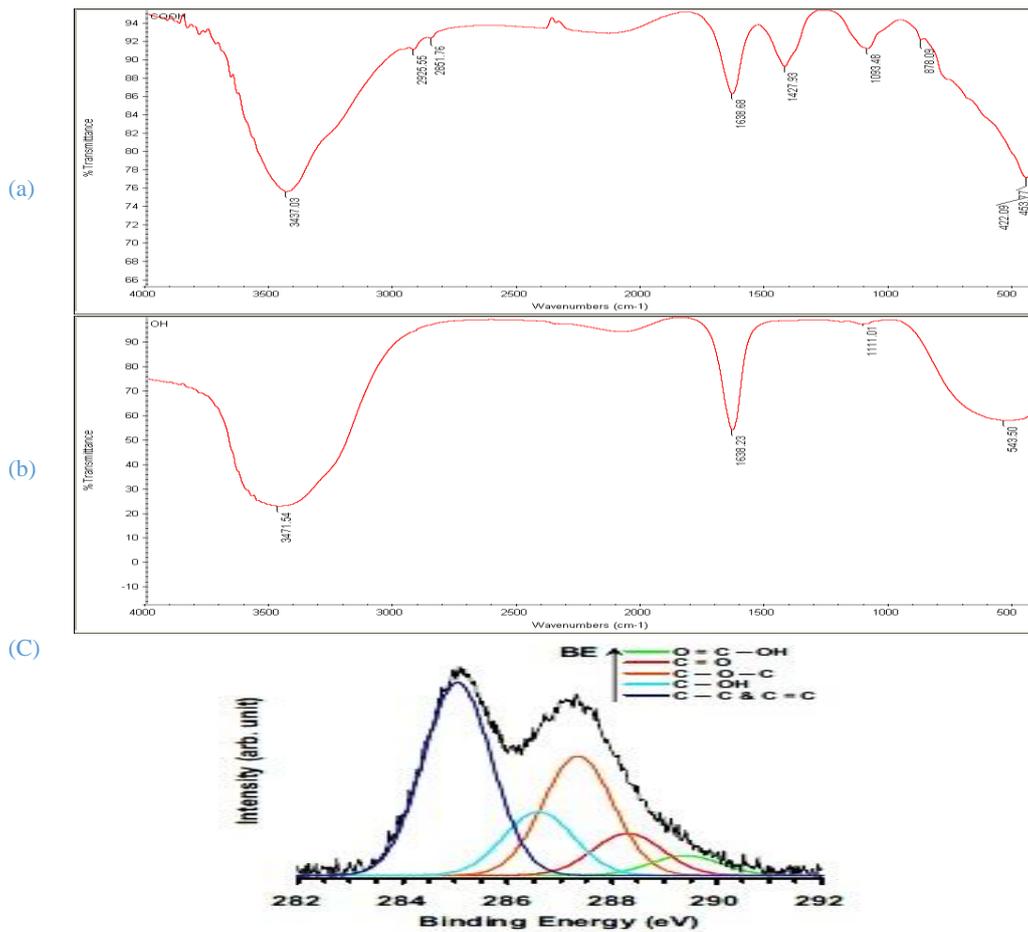


Fig. 2 The FT-IR spectra of (a) NGO-COOH nanosheets, (b) NGO-OH nanosheets and (c) XPS spectrum of NGO-COOH nanosheets

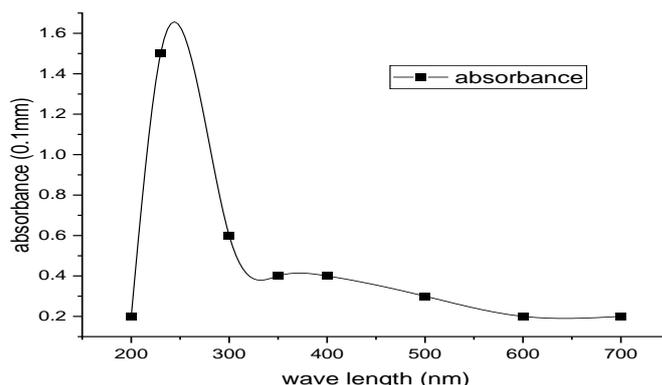


Fig. 3 UV/Vis spectra of the NGO-COOH nanosheets

2.2. Radiolabeling of NGO-COOH nanosheets

Nanosheets of [^{99m}Tc]Tc-NGO-COOH were radiolabeled as follow; 200 μL of freshly eluted [^{99m}Tc]TcO $_4^-$ (20 MBq) was added to 15 mg sodium dithionite as reducing agent followed by adding of 500 μL carboxylated nanograpghene oxide sheets and before measuring, the mixture was incubated for the appropriate amount of time [^{99m}Tc]Tc-carboxylated nanograpghene oxide sheets yield. [^{99m}Tc]Tc-carboxylated nanograpghene oxide sheets radiochemical yield was determined using (13 cm x 1 cm) strips of ascending paper chromatography and two different mobile phases were used for developing

[49-53]. Acetone was used as a mobile phase to check the free [^{99m}Tc]TcO $_4^-$ ($R_f=1$) and the percent of reduced hydrolyzed [^{99m}Tc]Tc-colloid (RH- ^{99m}Tc) was determined using saline as a mobile phase ($R_f=0$). [^{99m}Tc]Tc-NGO-COOH sheets percent was calculated as following`

$$\text{Radiolabeled complex \%} = 100 - (\text{free } ^{99m}\text{Tc-TcO}_4^- \% + \text{RH-}^{99m}\text{Tc} \%)$$

At PH 6, 15 mg Sodium dithionite as reducing agent, 500 μL substrate amount and after 30min, We reach the optimum condition of [^{99m}Tc]Tc-carboxylated nanograpghene oxide sheets which is 97.3% radiochemical yield as shown in (Figure 4)

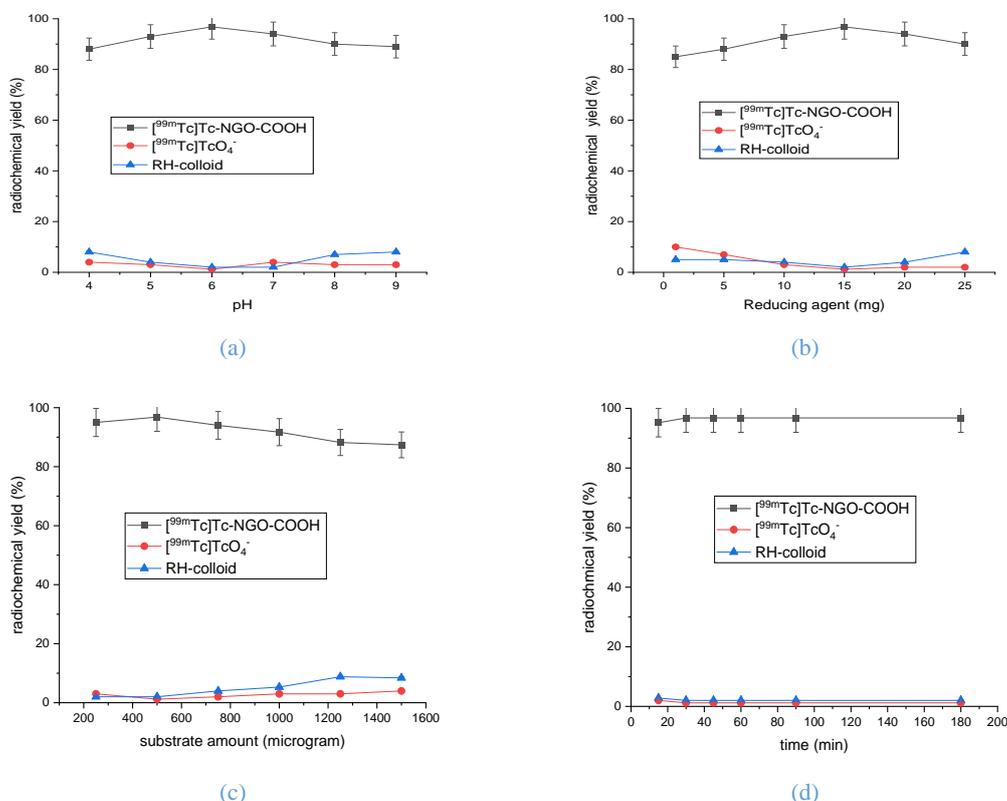


Fig. 4 Radiochemical yield of [^{99m}Tc]Tc-NGO-COOH nanosheets. (a) pH, (b) reducing agent, (c) substrate amount, (d) reaction time

2.3. In vitro stability study

[^{99m}Tc]Tc- NGO-COOH nanosheets were tested for in vitro stability of saline/serum as indicated (Figure 5). At 0.5, 2, 4, 6, 8 and 24 hours of post-incubating, radiochemical yields were estimated to 37 °C. The data indicated adequate radiochemical rates up to 8 hours above 97.3%. It is obvious from this work that the [^{99m}Tc]Tc- NGO-COOH nanosheets were stable enough in saline/serum, showing stability of up to 6 hours in vitro.

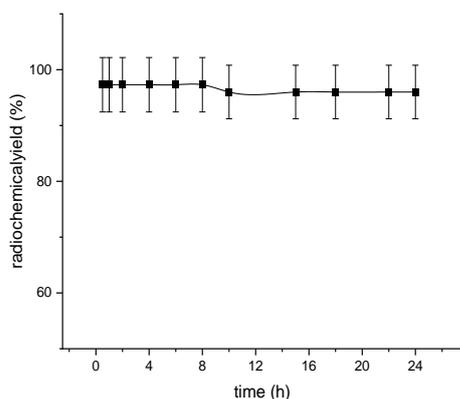


Fig. 5 [^{99m}Tc]Tc- NGO-COOH nanosheets in vitro stability in saline/serum at 37 °C followed in time

2.4. Cytotoxicity evaluation of NGO-COOH nanosheets

Inhibitory activity was detected using MTT assay under these experimental conditions with IC₅₀ = 30.45 ± 0.27 µg/mL as shown in (Figure 6). This result illustrates the biocompatibility of NGO-COOH and how much the safety of this organic compound.

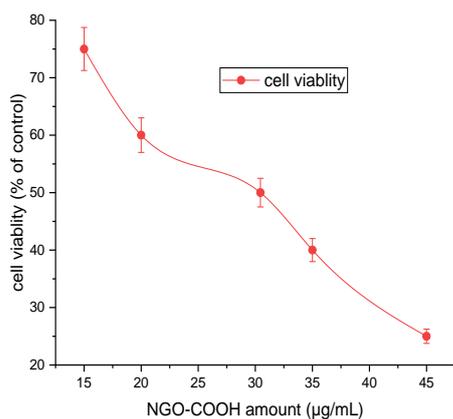


Fig. 6 Relative cell viability of NGO-COOH

2.5. Biodistribution study of NGO-COOH nanosheets

Since the hydrodynamic diameter of the NGO-COOH conjugates studied in this analysis is

considerably greater than the cutoff for renal filtration (5 nm), they were cleared mainly *via* the hepatobiliary pathway[54]. [^{99m}Tc]Tc-NGO-COOH absorption in the liver was 12 ± 1.7, 16 ± 1.2, 14.3 ± 1.1, and 13 ± 1.3 percent ID/g at 0.5, 1, 2, and 4 h p.i., respectively (n = 4), while blood radioactivity was 8 ± 1.4, 7.5 ± 1.2, 5.5 ± 1.1, and 5 ± 0.4 percent ID/g at 0.5, 1, 2, and 4 h p.i., respectively. The tumor quickly acquired [^{99m}Tc]Tc- NGO-COOH (clearly apparent at 0.5 h p.i.) and the tumor uptake remained stable/time (6.5 ± 0.4, 7 ± 0.4, 9 ± 0.3, and 7 ± 0.4 %ID/g at 0.5, 1, 2, and 4 h p.i. respectively; n = 4) as shown in (Figure 7 and Figure 8).

Target/non-target ratio (T/NT) was used to determine the selectivity of [^{99m}Tc]Tc- NGO-COOH nanosheets for tumor sites. (Figure 9) showed that [^{99m}Tc]Tc-NGO-COOH nanosheets accumulated quickly in the tumour cell. The T/NT ratio for [^{99m}Tc]Tc-NGO-COOH is the ratio of tumour muscle uptake to normal muscle uptake. After 2 hours of IV injection, [^{99m}Tc]Tc-NGO-COOH nanosheets attained their peak value 9 ± 0.5 after 2 h after IV injection. The rapid and large concentration of [^{99m}Tc]Tc- NGO-COOH nanosheets in the solid tumor suggests that it may be used as a tumor imaging agent. The high absorption of [^{99m}Tc]TcO₄⁻ in the stomach (14.2 ± 0.35 an hour after injection) was seen in the biodistribution of the radioisotope (Figure 10).

NGO-COOH nanosheets with [^{99m}Tc]Tc didn't show a high stomach, suggesting no *in vivo* radiolysis, so [^{99m}Tc]Tc indicating no *in vivo* radiolysis [55]. Since more than half of the nanosheets have size larger than 25 nm, significant tumor aggregation and accumulation were reached, which may be due to the enhanced permeability and retention (EPR) effect [6, 56-59], Since tumor tissues lack a drainage lymphatic system, EPR is encouraged. Nanosheets being coated with hydrophilic moiety such as carboxylic group help to prevent the RES mechanism by reducing *in vivo* adsorption [25, 60, 61]. The stabilization of nanosheets with a hydrophilic groups are the most efficient methods for reduction of RES uptake [36, 62-65]. Since a hydrated water membrane offers strong steric hindrance, phagocytes are unable to invade remained stable during its *in vivo* studies [55, 66-68]. The advantage of our prepared radiolabeled nano-system ([^{99m}Tc]Tc- NGO-COOH) is the high target/nontarget ratio which was 9 after two hours after administration while recently published radiolabeled nanosystems were with maximum T/NT ratio 3.7 ± 0.45-7 ± 0.5 [24, 69, 70]. It is good to mention here that NGO T/NT ratio was 2 ± 0.5 as reported [71].

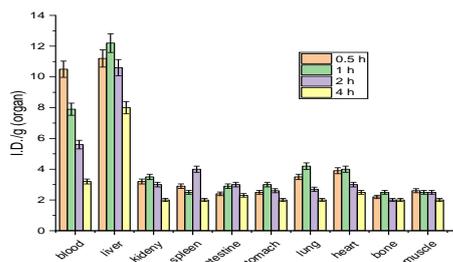


Fig. 7 *In vivo* biodistribution of $[^{99m}\text{Tc}]\text{Tc-NGO-COOH}$ nanosheets in normal Albino mice at different time intervals post intravenous injection; I.V. (% ID/g)

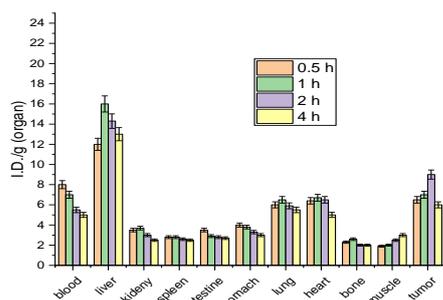


Fig. 8 *In vivo* biodistribution of $[^{99m}\text{Tc}]\text{Tc-NGO-COOH}$ nanosheets in solid tumor-bearing Albino mice at different time intervals post intravenous injection; I.V. (% ID/g)

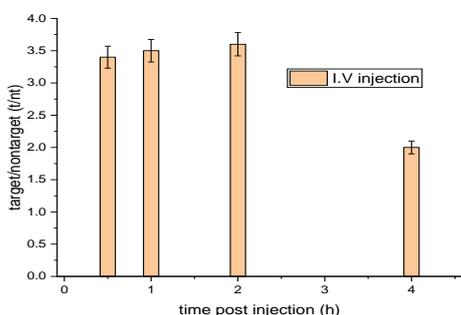


Fig. 9 T/N ratio of $[^{99m}\text{Tc}]\text{Tc-NGO-COOH}$ nanosheets at different times post I.V. Injection in solid tumor-bearing Albino mice

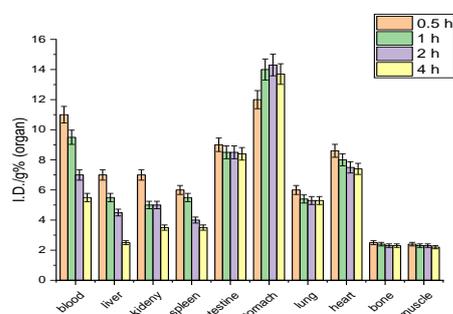


Fig. 10 *In vivo* biodistribution of $[^{99m}\text{Tc}]\text{TcO}_4^-$

3. Conclusion:

NGO-COOH nanosheets as a modified derivative of Nanographene oxide (NGO) sheets, has large surface area and capacity to carry a large payload so it is a novel nano-wall material that tracks to tumors *in vivo*. NGO-COOH holds promise as a versatile scaffold material for the development of molecular imaging probes. This study illustrates the feasibility of using functionalized nanographene oxide sheets for ^{99m}Tc labeling, which may have clinical effects in terms of improved tumor imaging.

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5. Compliance with ethical standards:

Conflict of interest, all authors declared no conflict of interest.

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