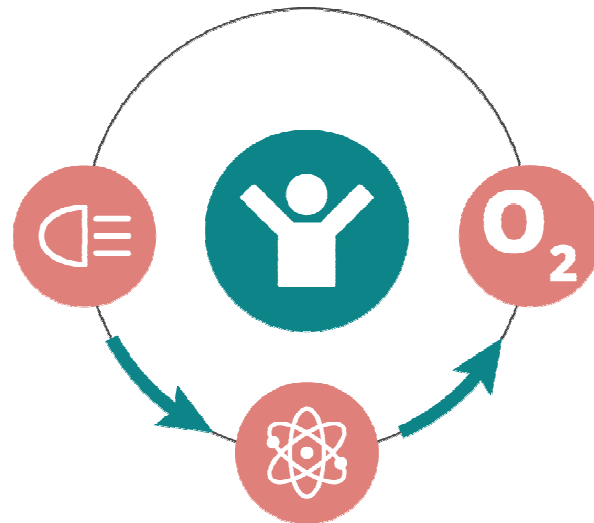


New Developments in Photodynamic and Sonodynamic Cancer Therapy

Dr. med. Dipl. Chem. Michael H. Weber
Lauenfoerde/Germany

12th International ISLA Congress June 9/10 2017



1. Introduction and Mechanisms of PDT

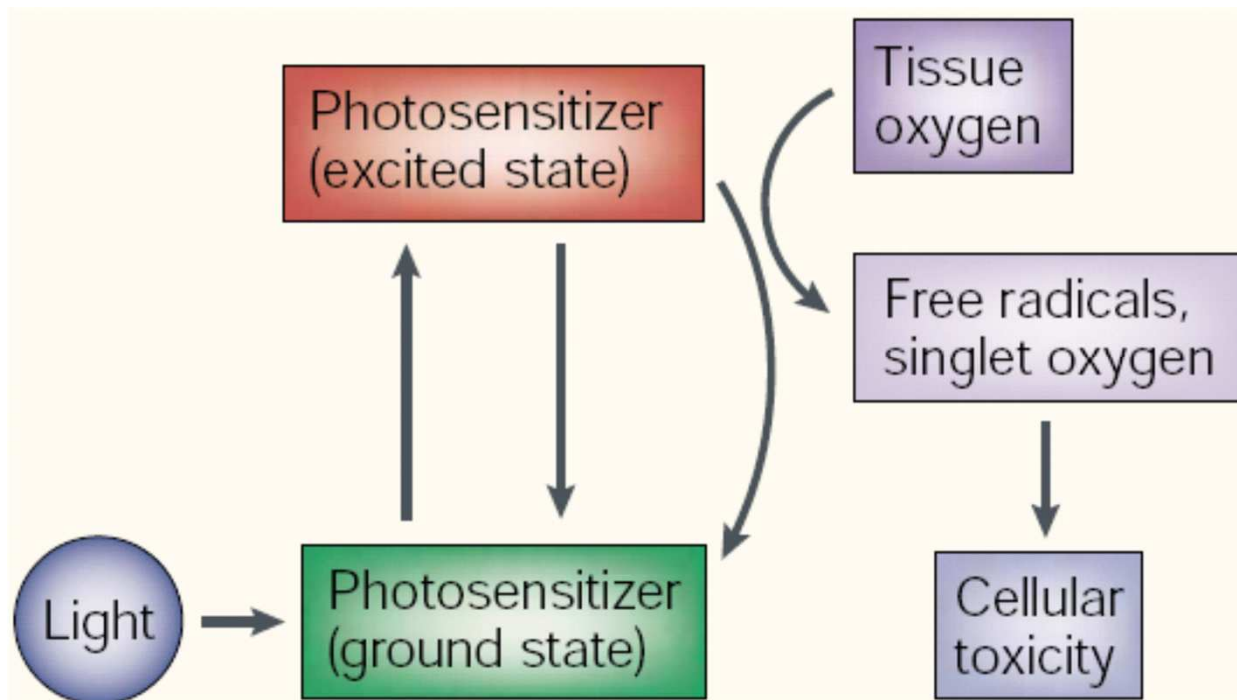


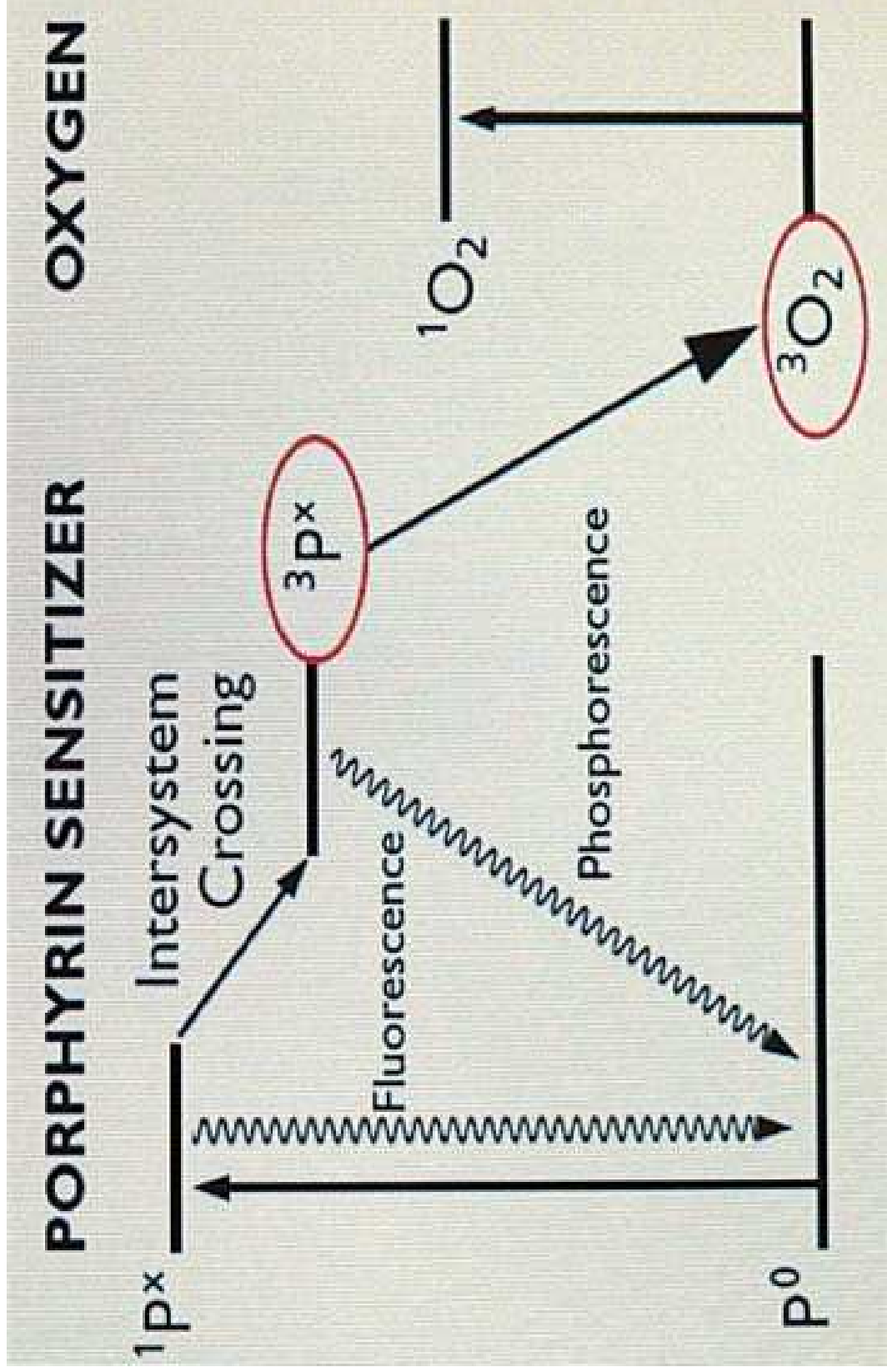
Photodynamic Therapy (PDT)

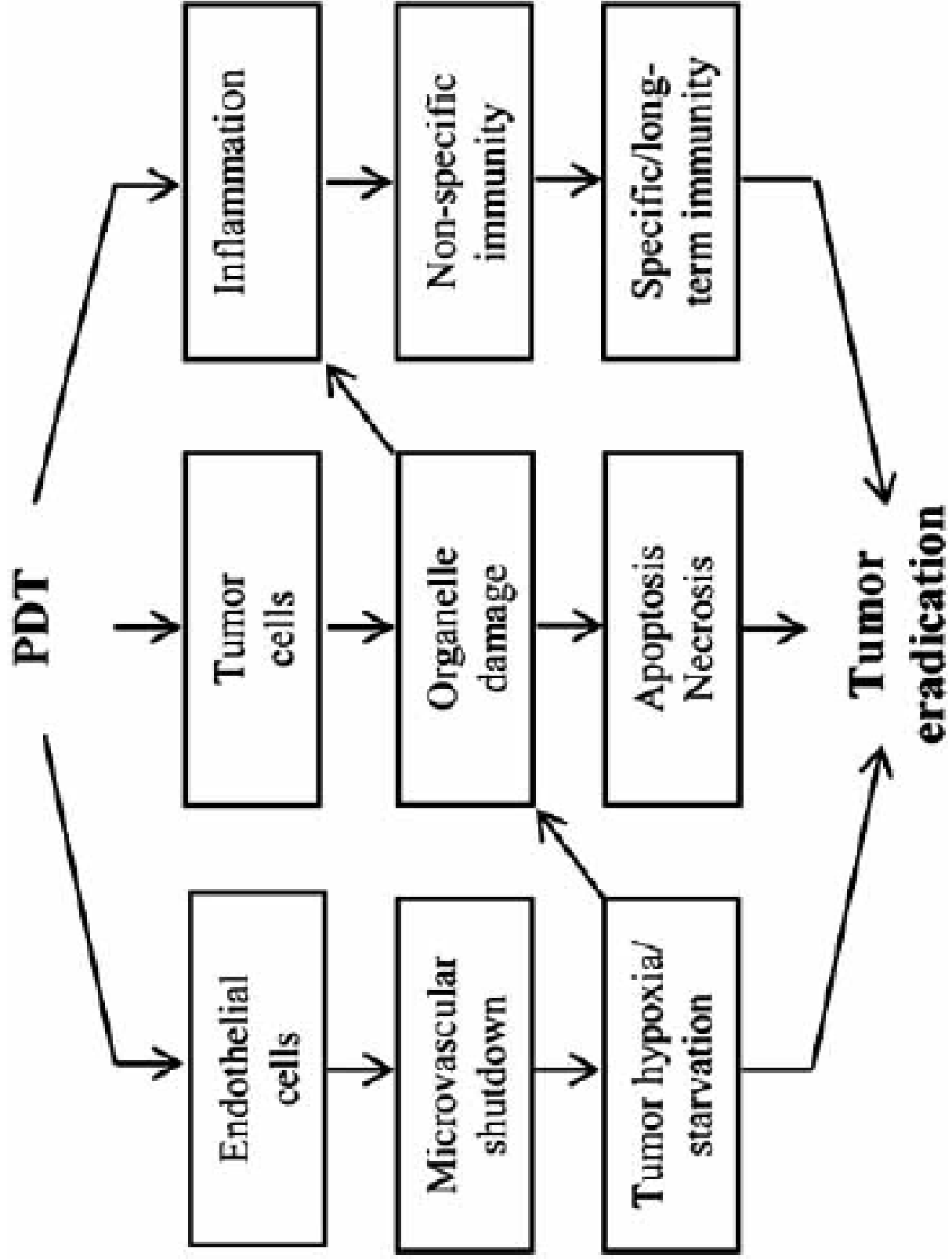
- Photodynamic therapy is one of the most interesting and promising approaches in the treatment of various cancers
- The principle is the stimulation of a light sensitive drug which is injected into the bloodstream and accumulates in cancer cells
- Tumor tissue is subsequently destroyed by irradiation with light of appropriate wavelength according to the absorption spectra of the photosensitizers
- The basic principle behind this mechanism is the development of radical oxygen species
- *Until recently PDT has mainly been used in superficial cancers due to limited light penetration into the body*
- *New development of interstitial laser therapy facilitates treatment of deep tumors now*

Mechanism of Photodynamic Therapy

- 2 individually non-toxic components brought together to cause harmful effects on cells and tissues
 1. Photosensitizing agent
 2. Light of specific wavelength



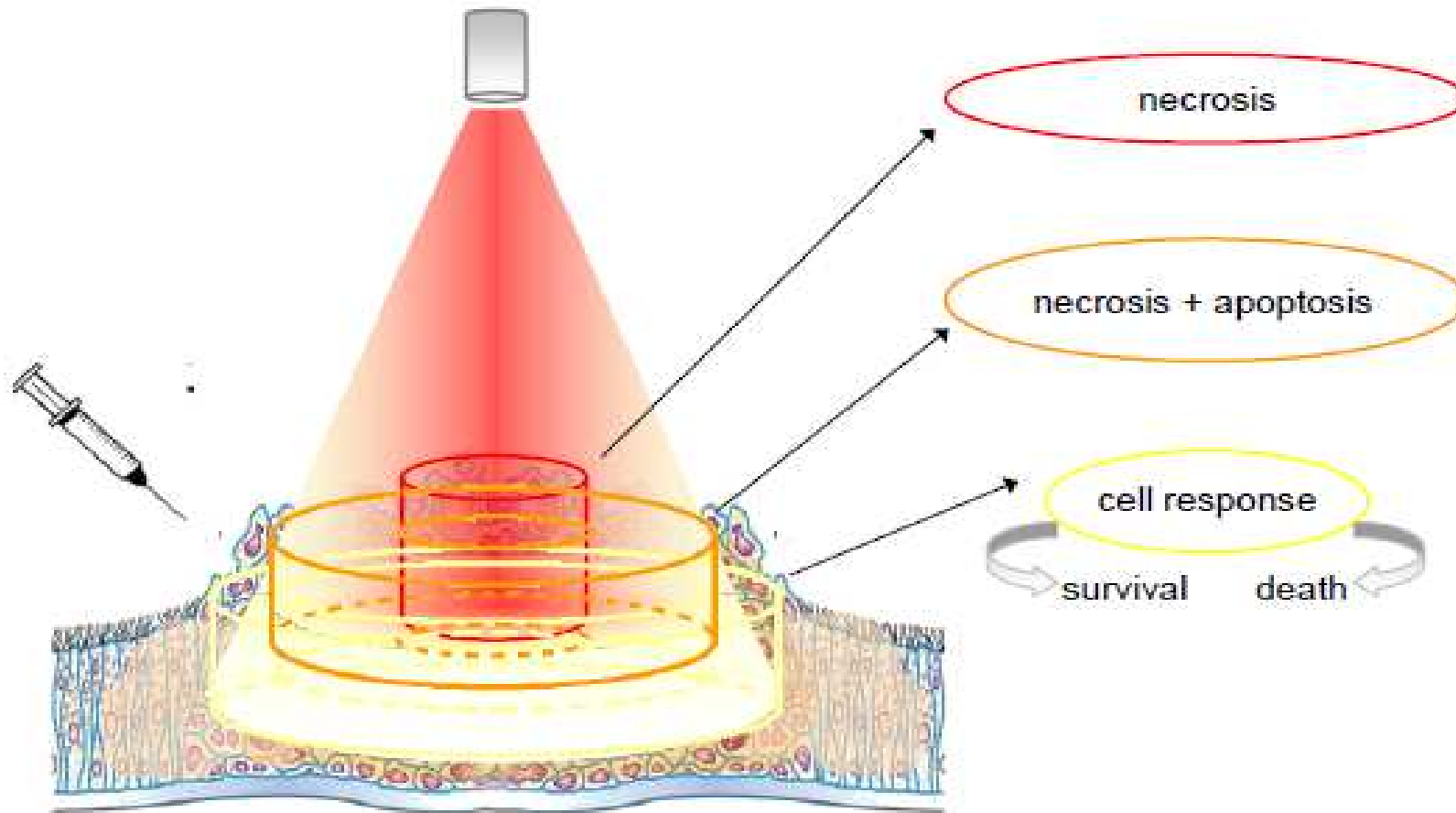




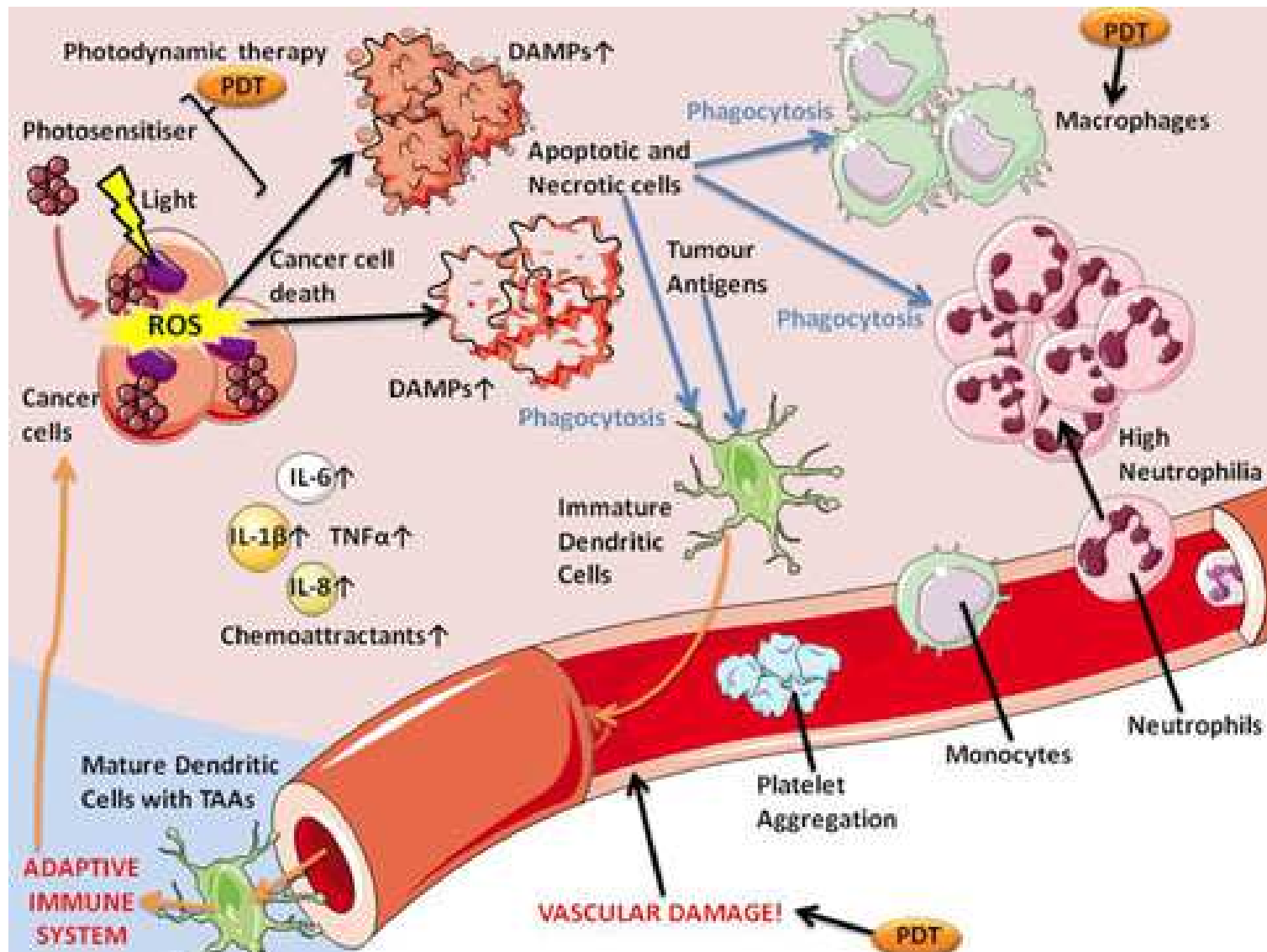
Mechanisms of PDT

- Selective targeting of tumor cells
- Minimal side-effects
- No resistance after repeated treatments
- Tumor vascular shutdown by thrombosis and haemorrhages
- Induction of local inflammation
- Immune activation

Light Distribution and Cellular Response During PDT



Immunological Effects of PDT



2. Photosensitizers



Traditional Photosensitizers:

- Haematoporphyrins, HpD
 - Derivatives of Haem (Photofrine and others)
- Chlorines
 - Derivatives of Chlorophyll
- Porphycenes
 - Synthetic Porphyrines

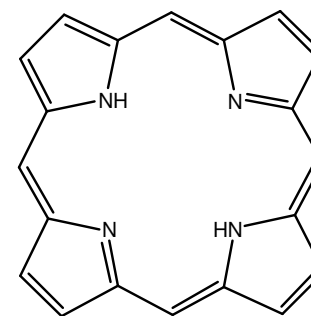


Table 1 Currently available photosensitizers.

Platform	Drug	Substance	Manufacturer	Web site
Porphyrin	Photofrin [®]	HpD	Axcan Pharma, Inc.	www.axcan.com
Porphyrin	Levulan [®]	ALA	DUSA Pharmaceuticals, Inc.	www.dusapharma.com
Porphyrin	Metvix [®]	M-ALA	PhotoCure ASA	www.photocure.com
Porphyrin	Visudyne [®]	Vertiporfin	Novartis Pharmaceuticals	www.visudyne.com
Texaphyrin	Antrin [®]	Lutexaphyrin	Pharmacylics	www.pharmacylics.com
Chlorin	Foscan [®]	Temoporfin	Biolitec Pharma Ltd.	www.bioletcpharma.com
Chlorin	LS11	Talaporfin	Light Science	www.lightsciences.com
Chlorin	Photochlor	HPPH	RPCI	www.roswellpark.org
Dye	Photosens [®]	Phthalocyanine	General Physics Institute	www.gpi.ru

Approved Photosensitizers and Indications:

Photosensitizer	Type of diseases	Country
(5-ALA) 5-aminolevulinate	Actinic keratosis, Basal cell carcinoma	U.S., EU
Photofrin	Barrett's displasia	U.S., Canada, EU, UK
Photofrin	Cervical cancer	Japan
Photofrin	Endobronchial cancer	Canada, Most EU Countries, Japan, U.S.
Photofrin	Esophageal cancer	Canada, Most EU Countries, Japan, U.S.
Photofrin	Gastric cancer	Japan
Photofrin	Papillary bladder cancer	Canada
Foscan	Head and neck cancer	EU, Norway, Iceland
Verteporfin	Age-related Macular Degeneration	Canada, Most EU Countries, Japan, U.S.

New Natural Derived Photosensitizers:

- Chlorin E6 (Red 660 nm)
- Indocyaninegreen liposomal (Infrared 810 nm)
- Hypericin (Yellow 589 nm)
- Curcumin (Blue 447 nm)
- Riboflavin (Blue 447 nm)

Chemodrug Derived Photosensitizers

- Doxorubicin liposomal (Blue 447 nm)
- Mitoxantron (Yellow 589nm, Red 632nm)
- Paclitaxel (Ultraviolett, 345 nm)
- Cisplatin (Ultraviolett, 345 nm)
- 5-FU (Ultraviolett, 345 nm)

5-Aminolaevulinic-acid (5-ALA) for Topical PDT

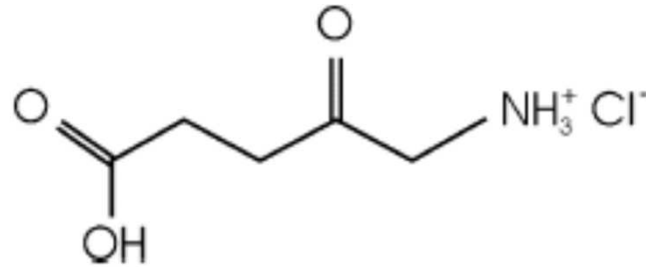
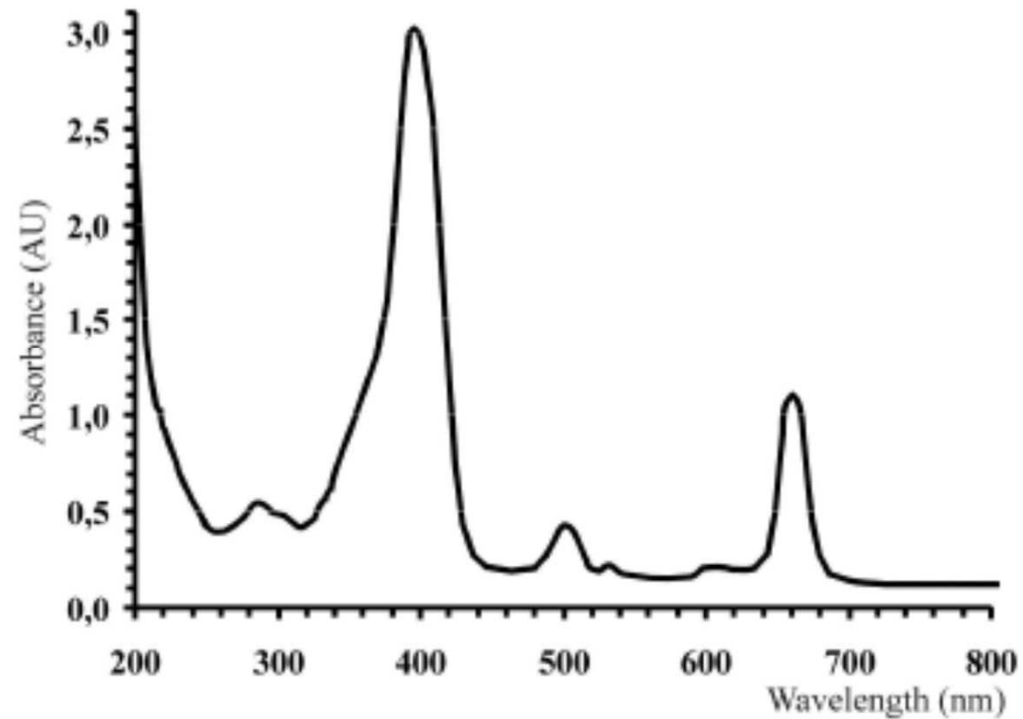


Figure 2 Molecular structure for ALA.



3. Topical PDT

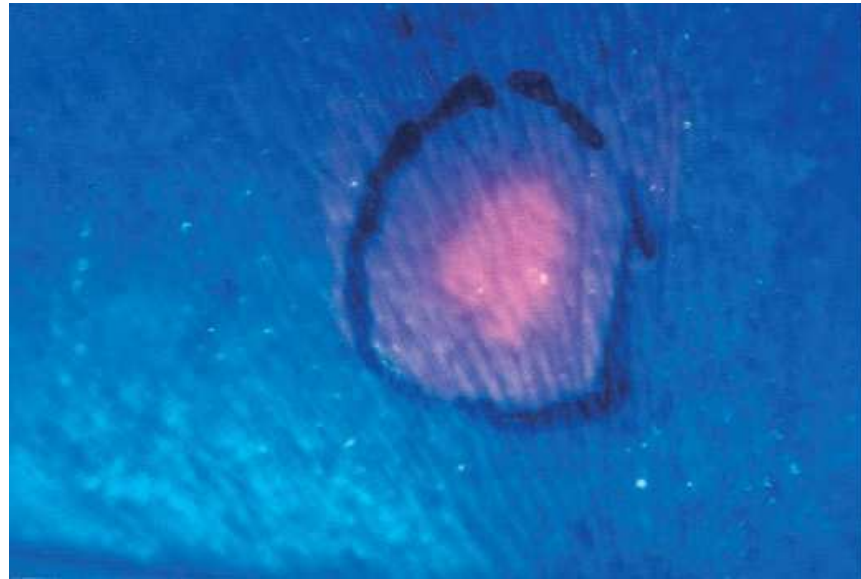


Photodynamic diagnostics PDD

(Fluorescence diagnostic with blue laser)



Fuselage skin basal cell carcinoma in daylight



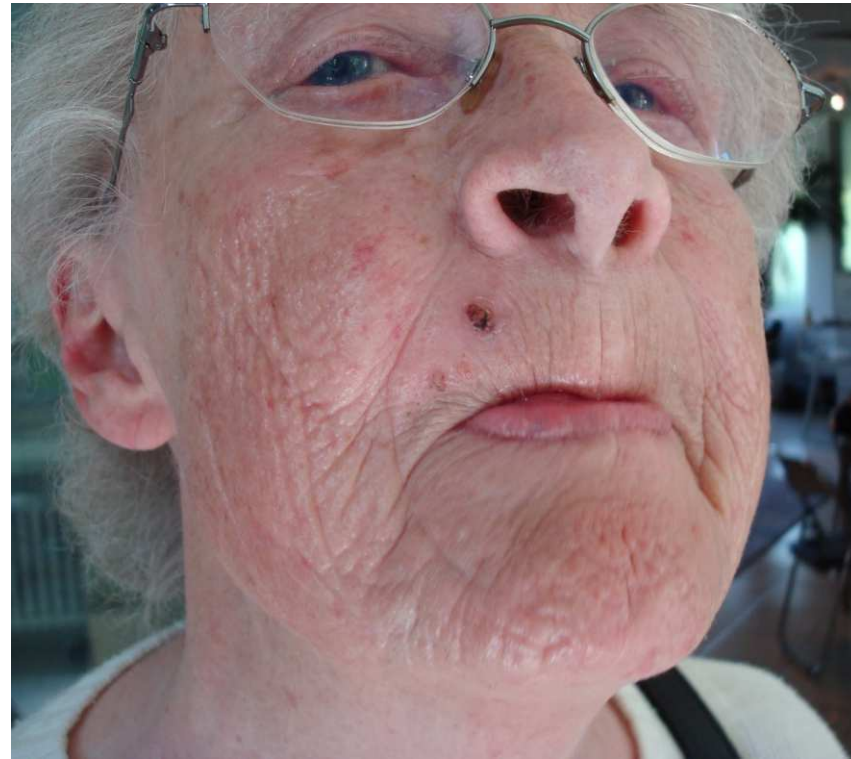
Fuselage skin basal cell carcinoma under wood light



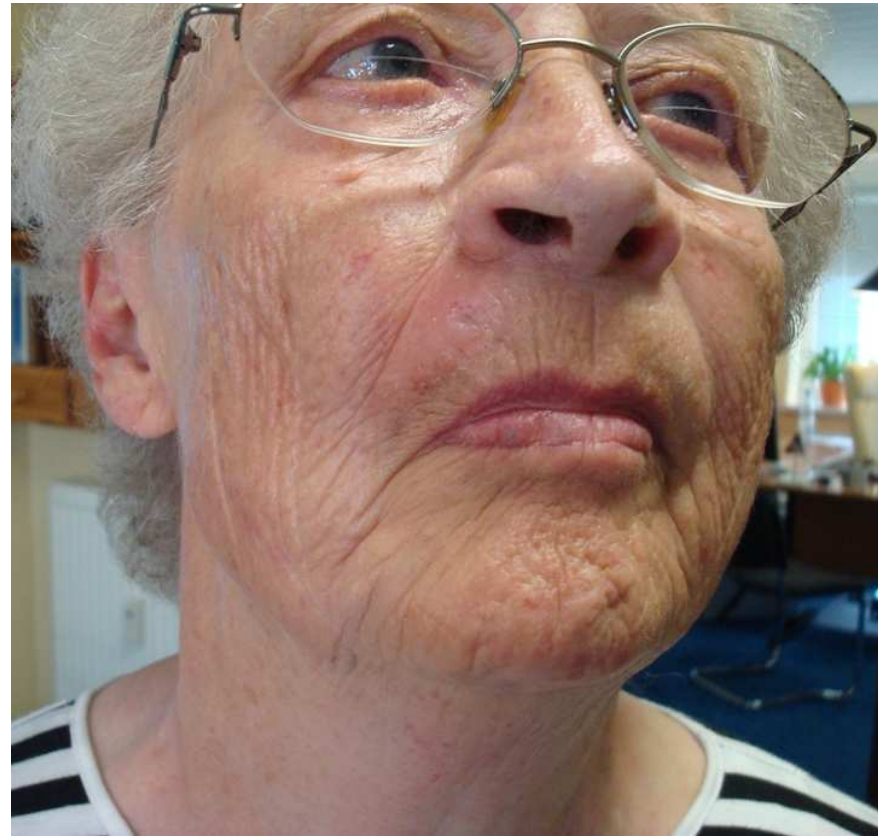
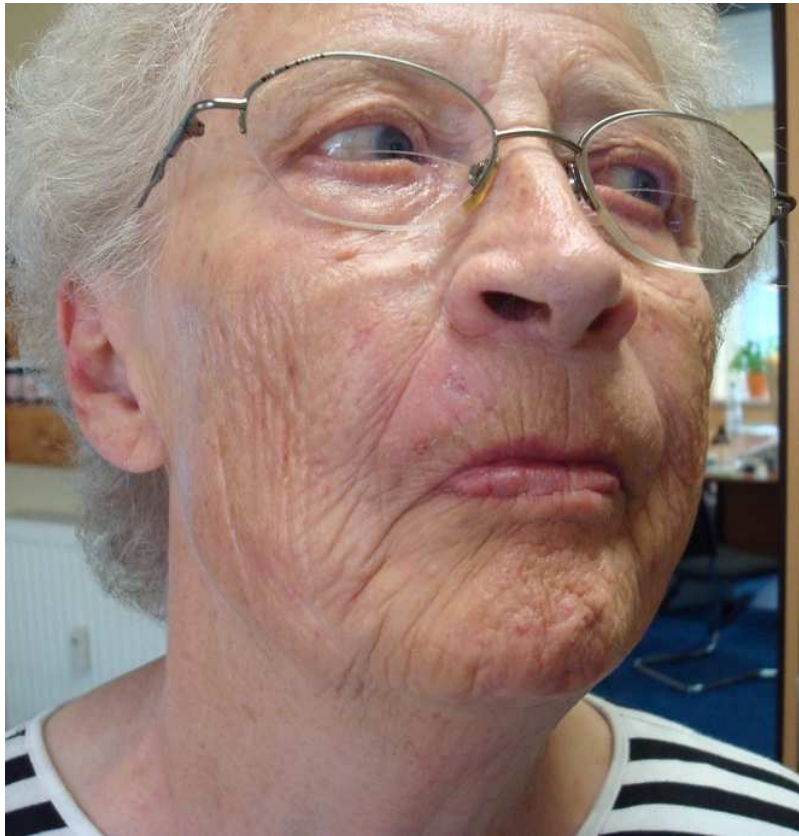
Photodynamic Therapy of Actinic Keratosis



Photodynamic Therapy of Basal Cell Carcinoma



Photodynamic Therapy of Basal Cell Carcinoma



Photodynamic Therapy of Basal Cell Carcinoma



Ulcerated basal cell carcinoma before treatment



Findings after 1 treatment PDT







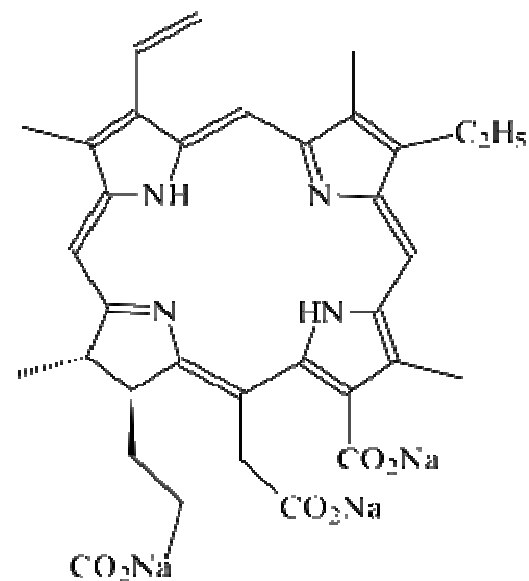
4. Systemic and Interstitial PDT with Chlorin E6



Systemic Photodynamic Therapy

Fotolone (Chlorin E6)

- Trisodium salt of the „green“ porphyrin
- High solubility in water
- Molecular formula: $C_{34}H_{33}N_4Na_3O$
- High stability of the lyophilized API

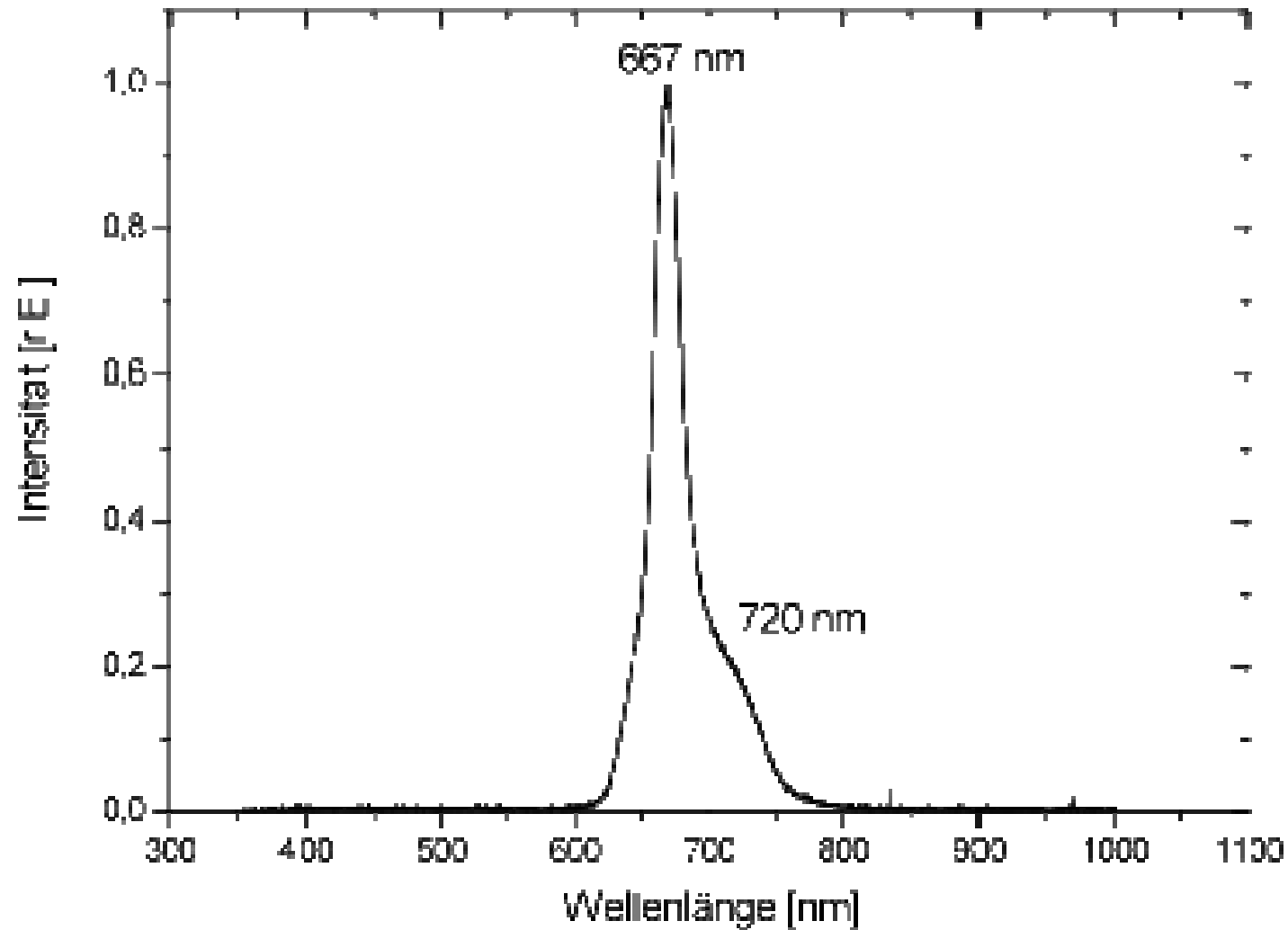


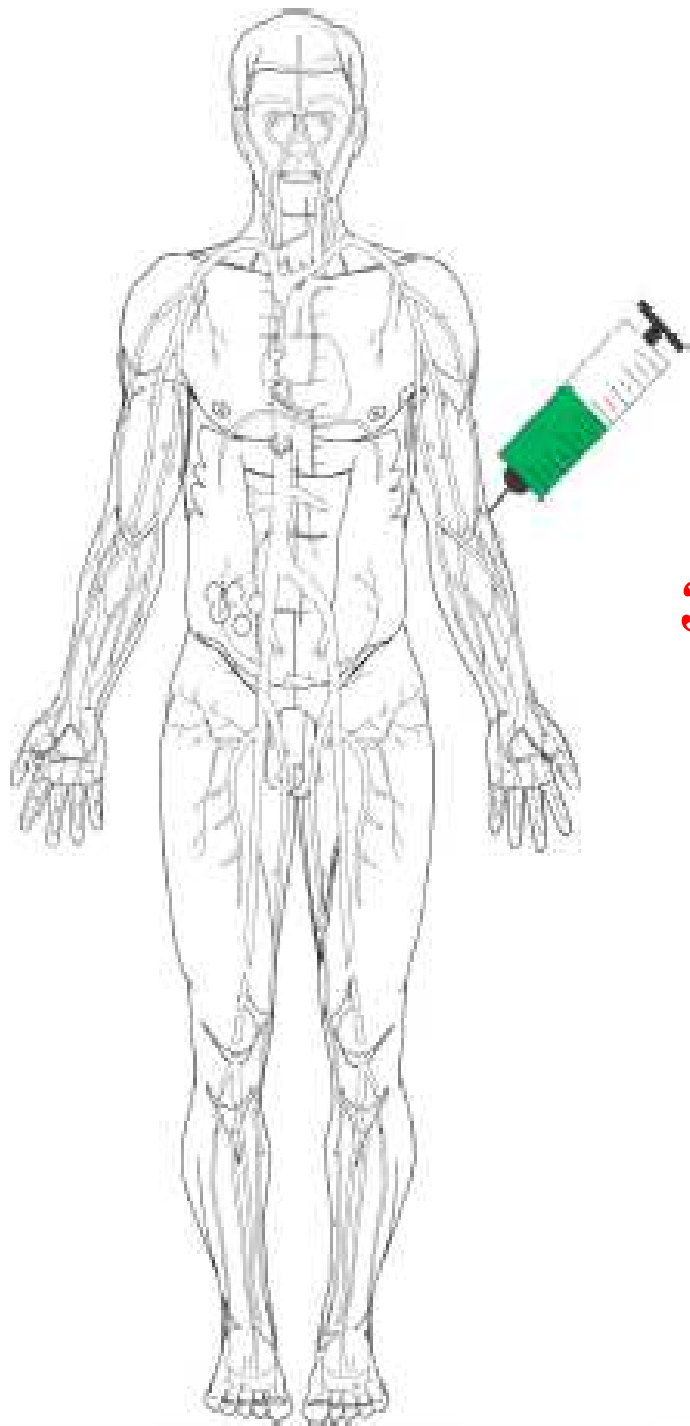
Production of Chlorin E6



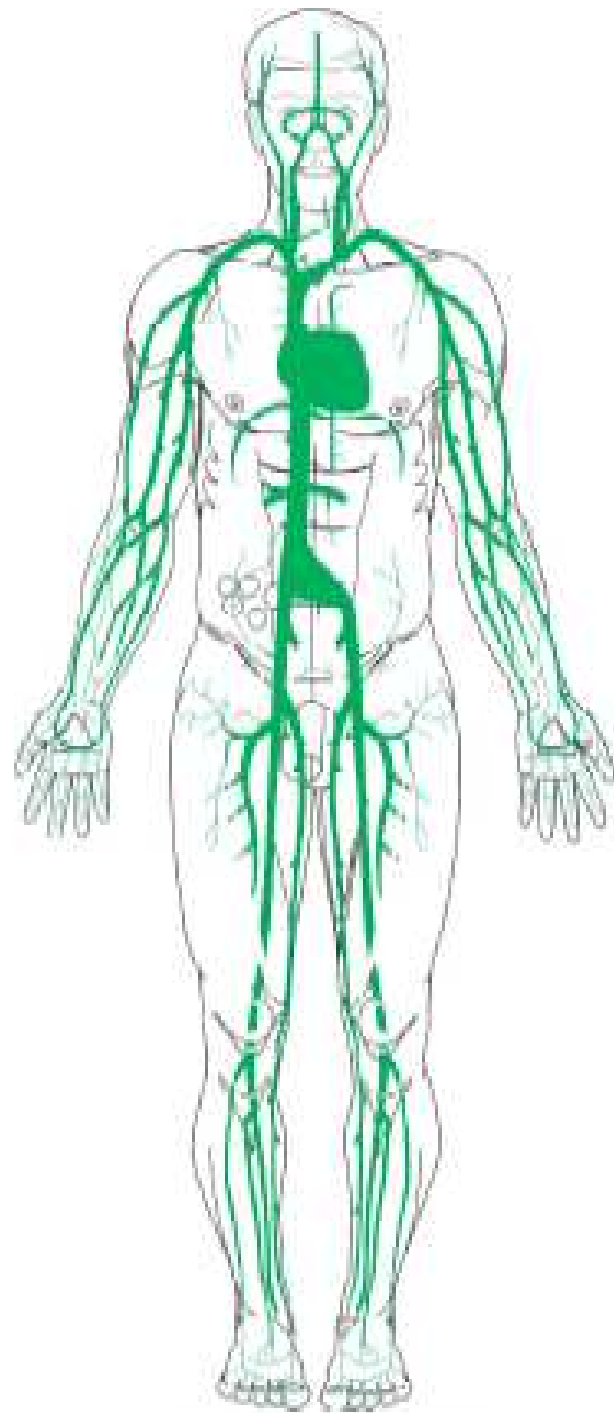
- Natural sources (algae, grass, lucerne etc.)
- FDA approved, GAP
- Inexhaustible availability (different sources/world-market)

Absorption Spectrum of Chlorin E6

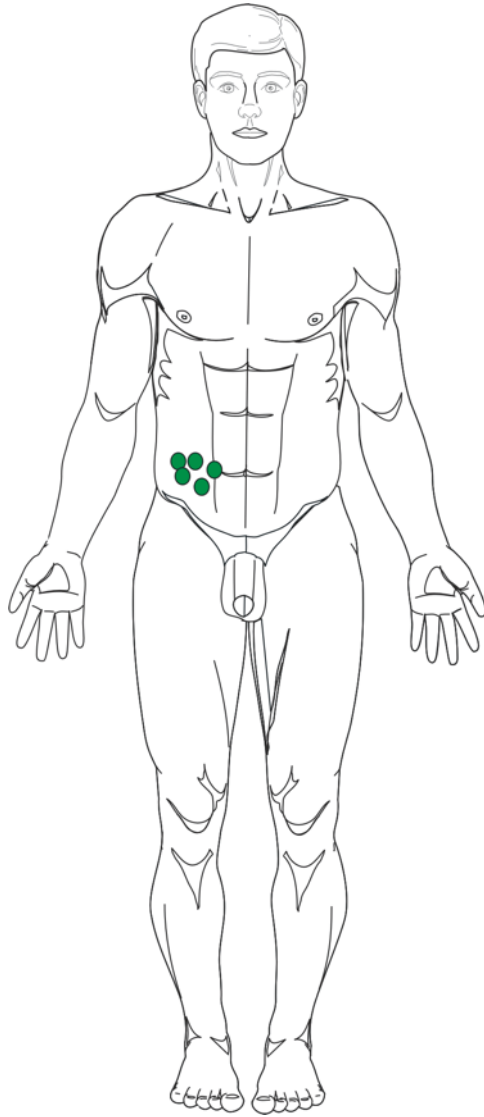




3 – 5 min

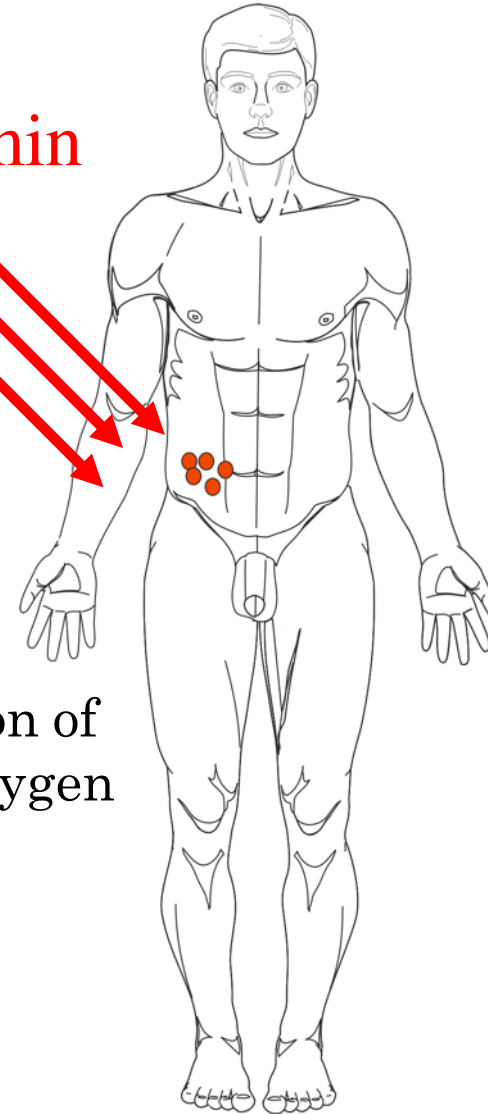
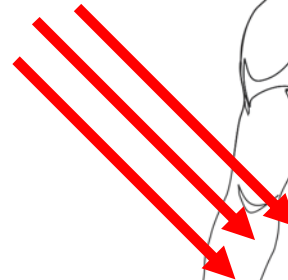


3 – 4 h



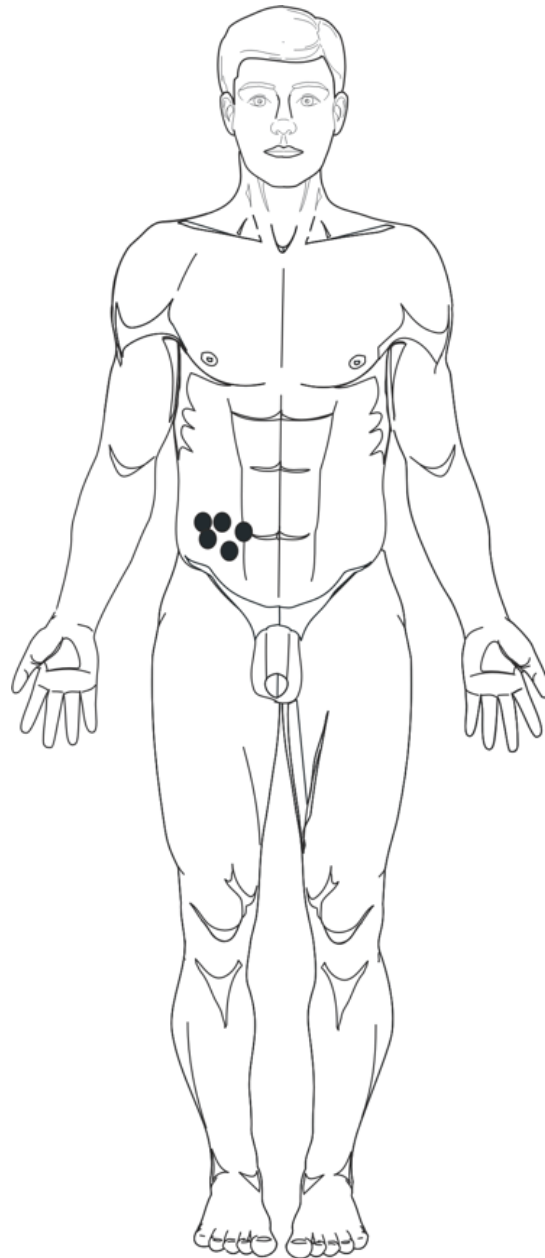
PDT

1 – 15 min



Generation of
singlet oxygen

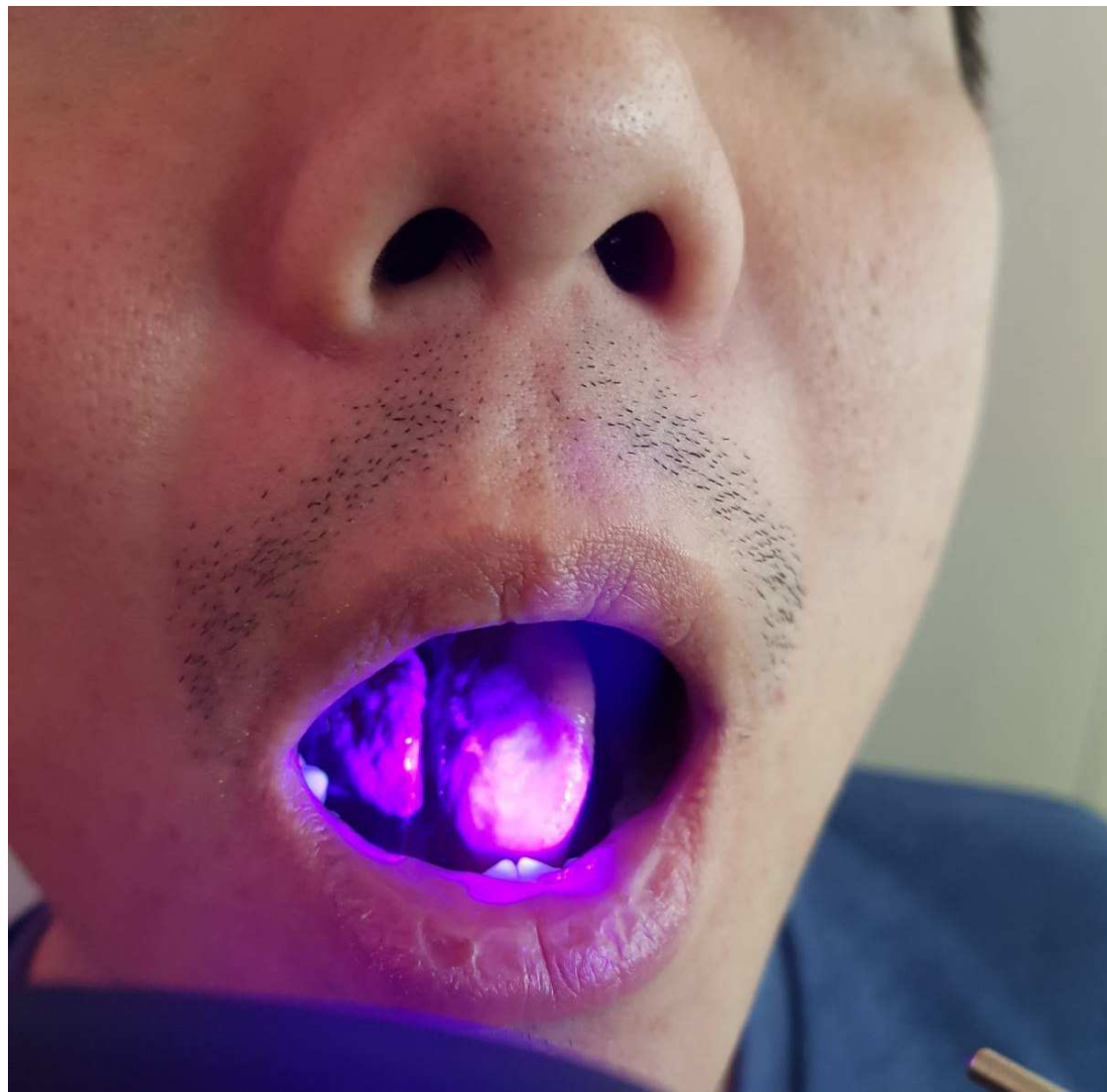
24 – 48 h



- Apoptosis/ Necrosis
- Elimination of Chlorin E6 from blood



Tongue Cancer (Fluorescence Diagnostic)



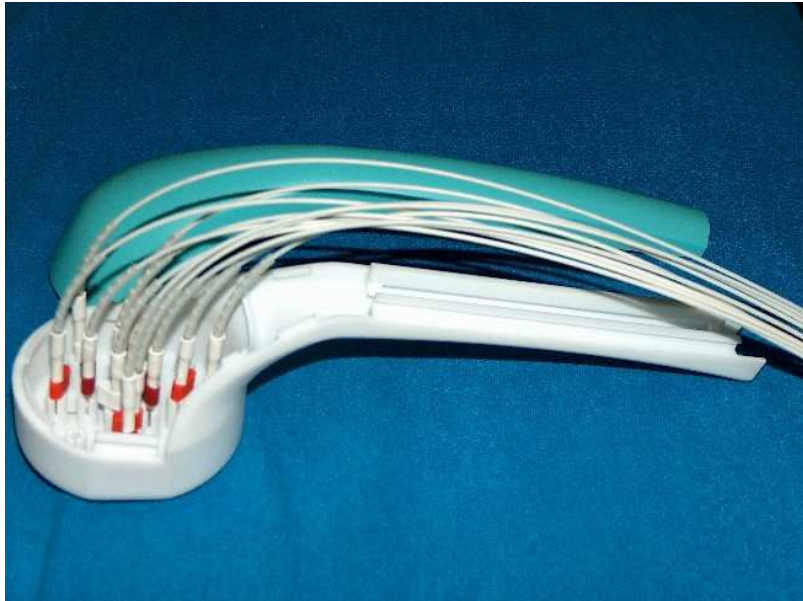
Tongue Cancer, Intraoral Irradiation



Tongue Cancer, control after 4 weeks



External PDT for Treatment of Superficial Tumors:



External PDT of Lymph Metastases:

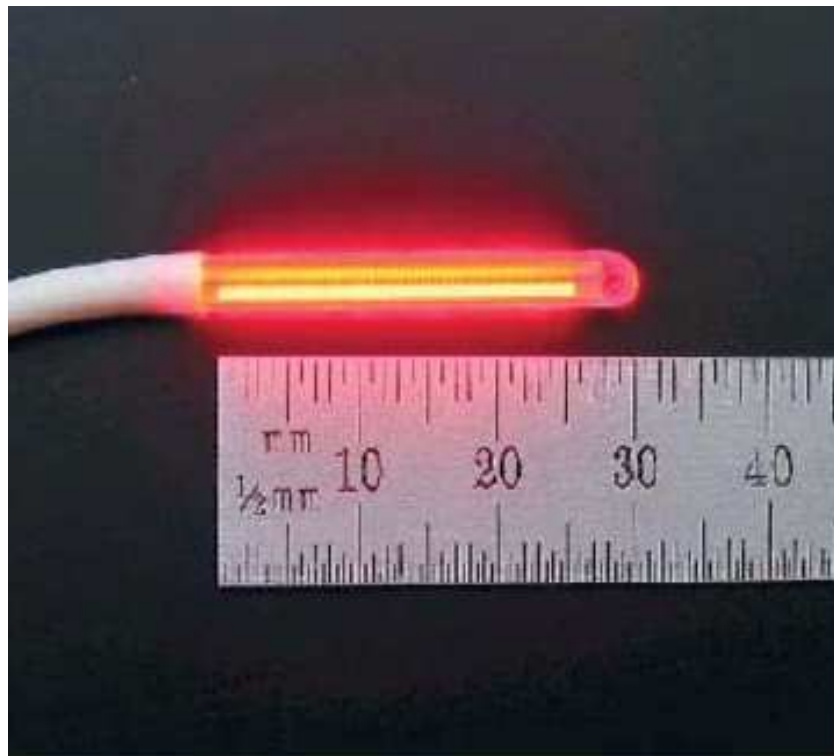


Potential Overdosing with Skin Burning:

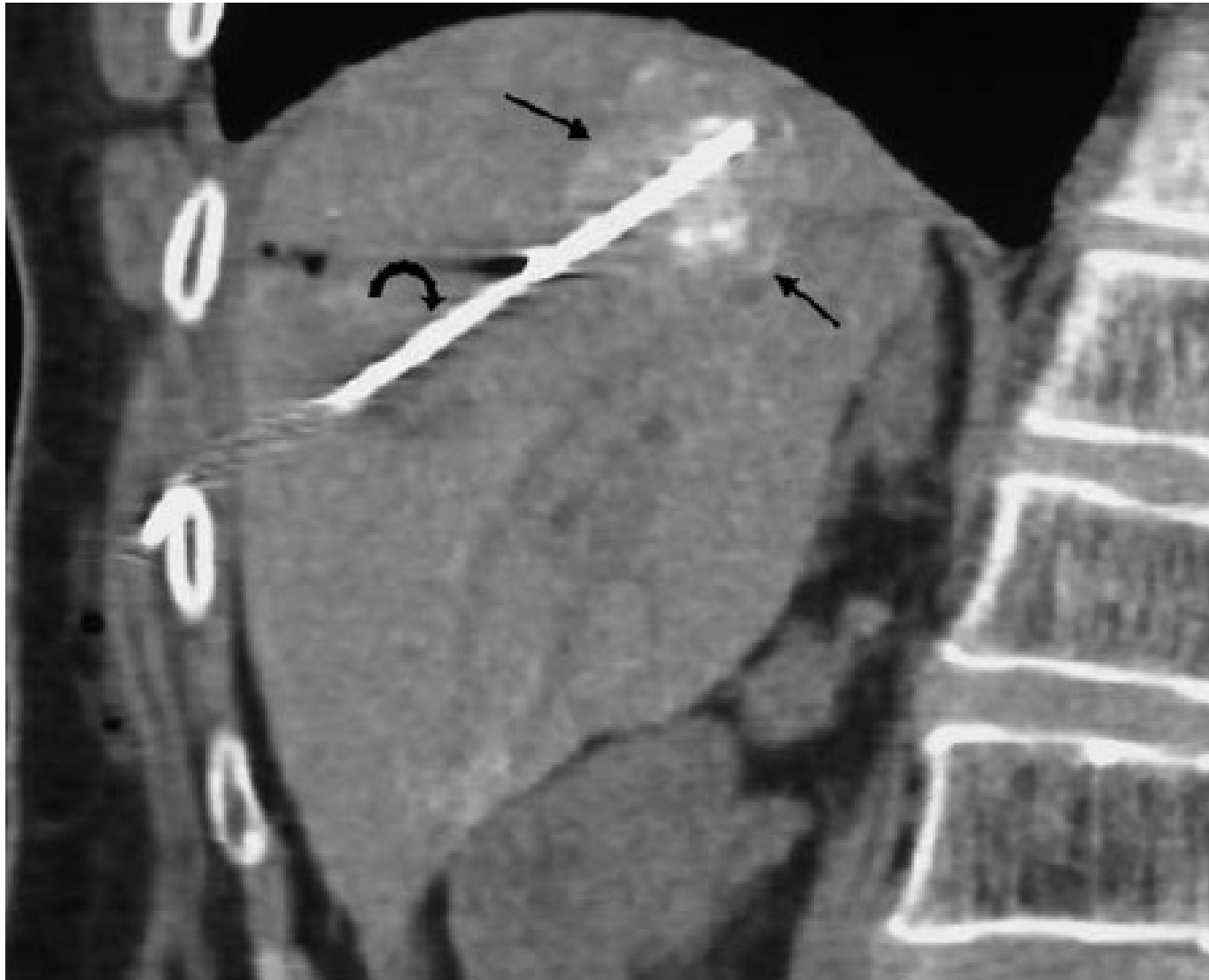


Interstitial Photodynamic Therapy of Liver Metastases

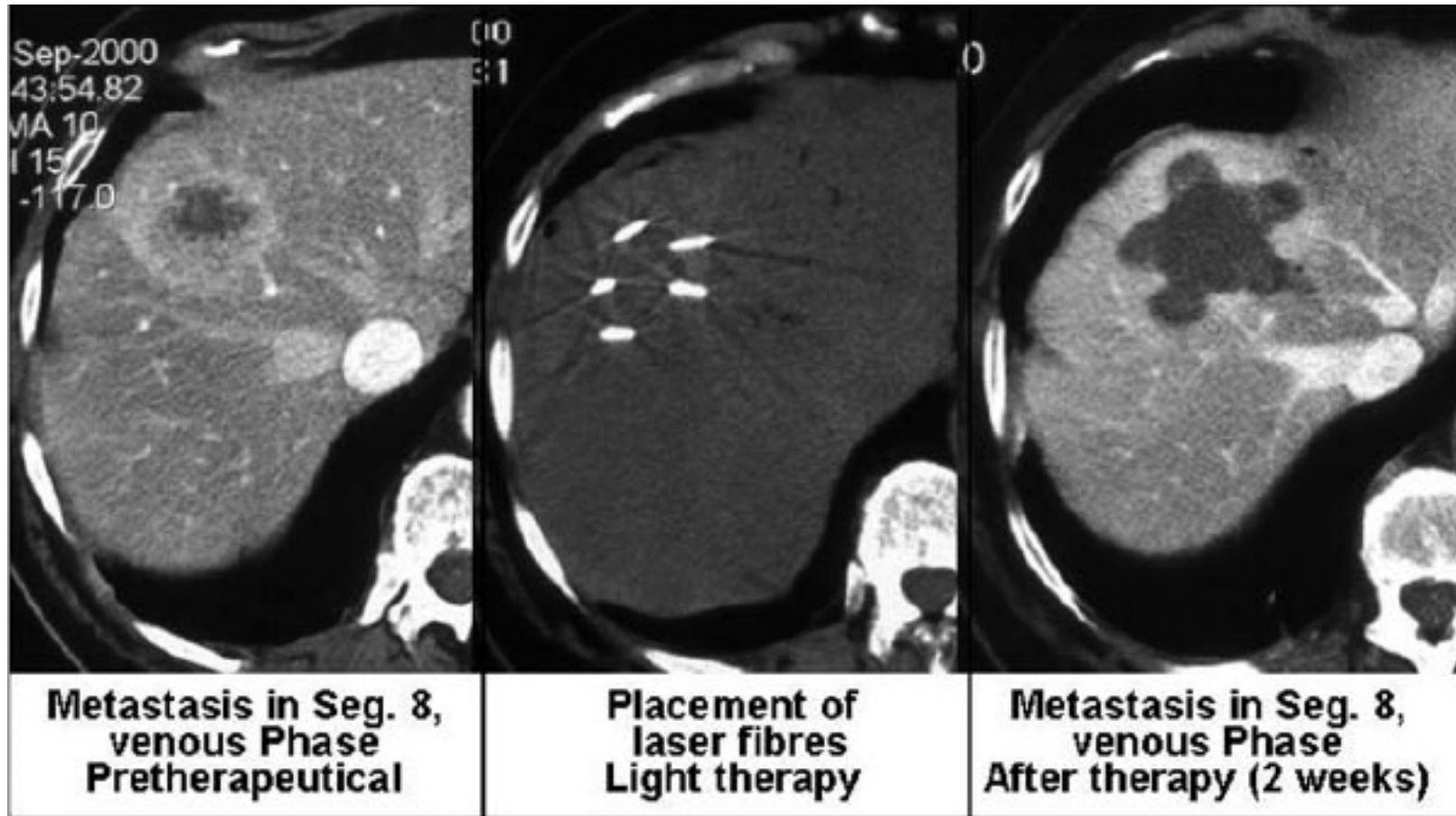
T. J. Vogl (✉) · K. Eichler · M. G. Mack
S. Zangos · C. Herzog · A. Thalhammer
K. Engelmann
Department of Diagnostic
and Interventional Radiology,
University of Frankfurt,



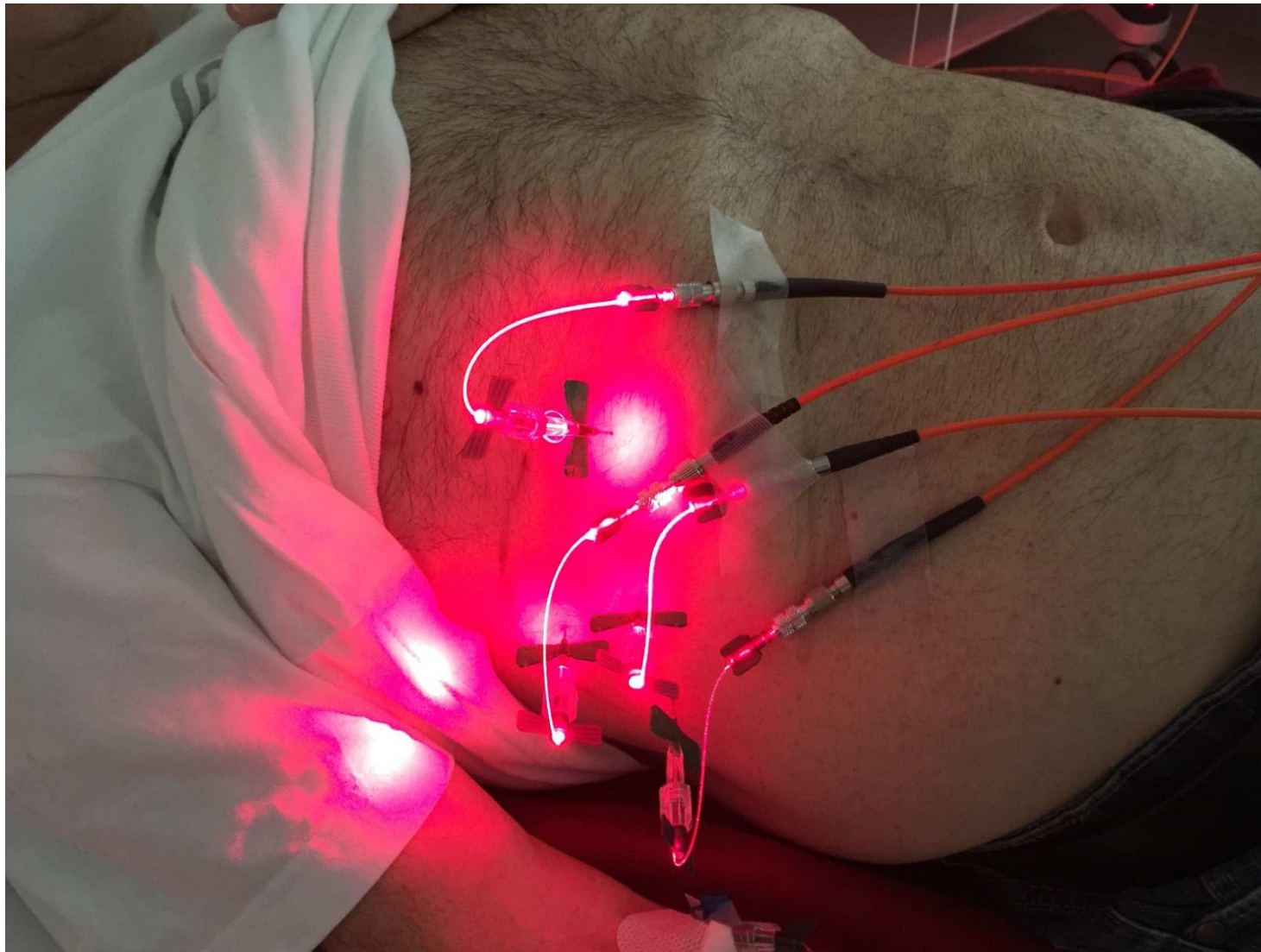
Interstitial Photodynamic Therapy of Liver Metastases



Interstitial Photodynamic Therapy of Liver Metastases



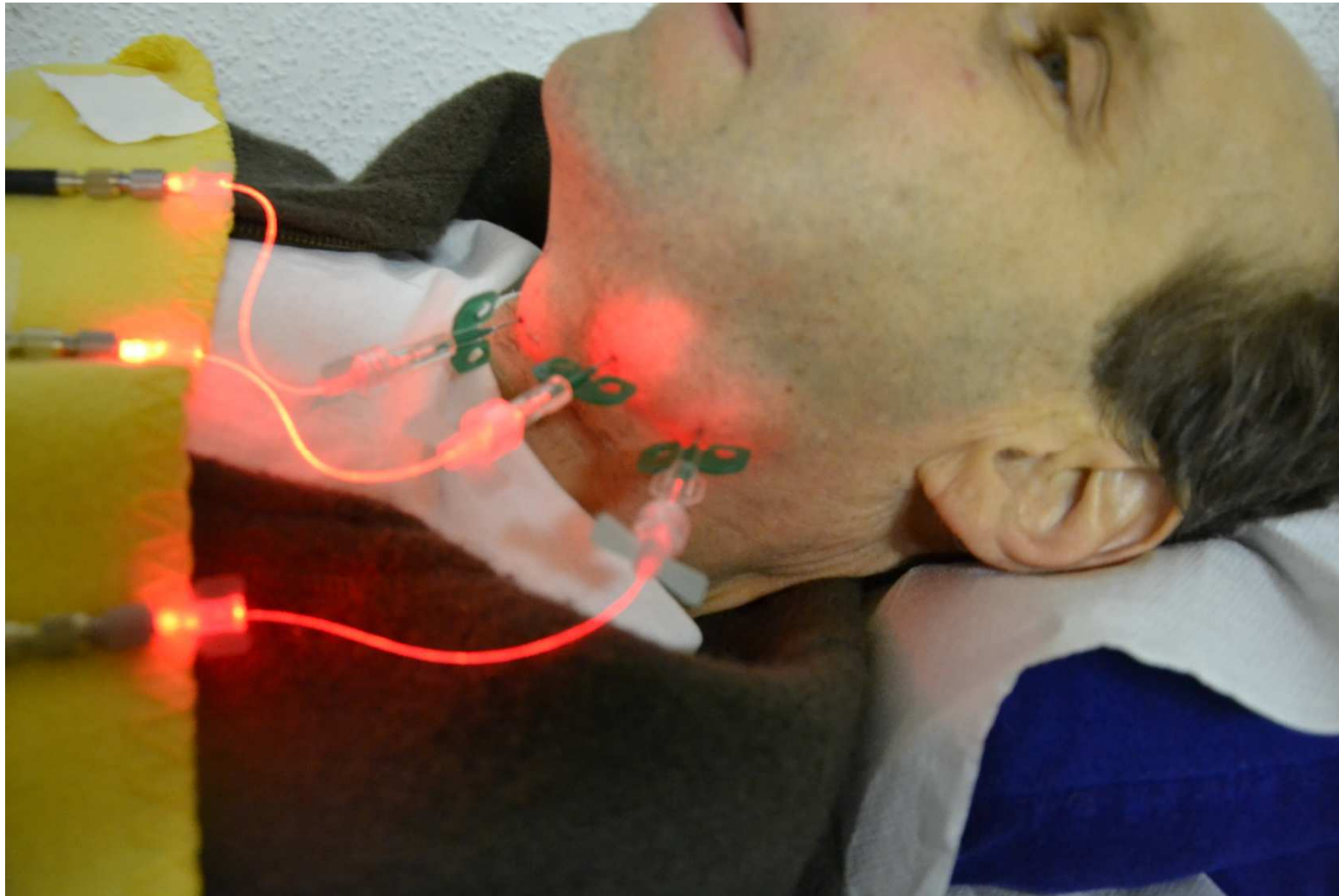
Interstitial Photodynamic Therapy of Liver Metastases



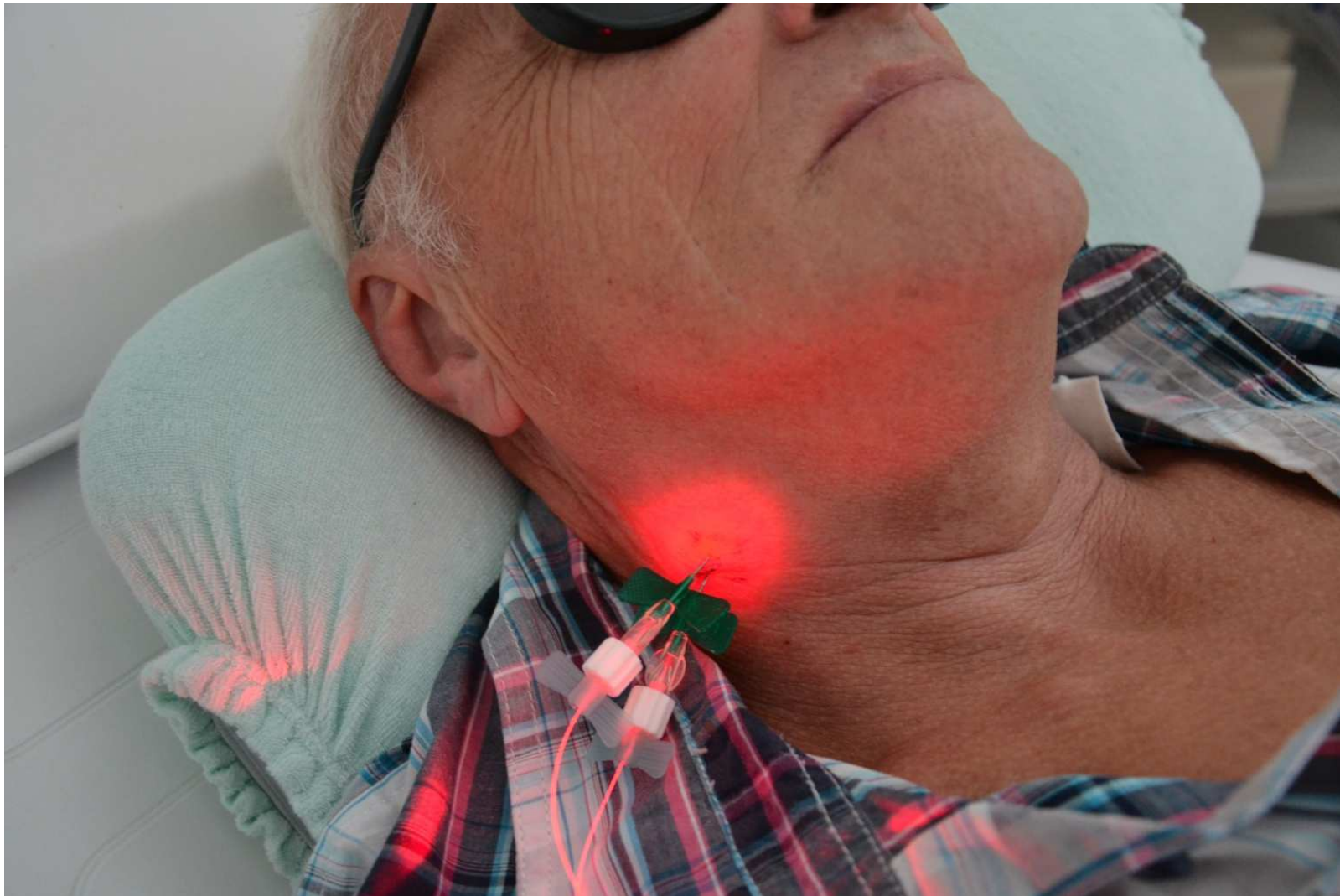
Interstitial PDT of Lymph Metastases:



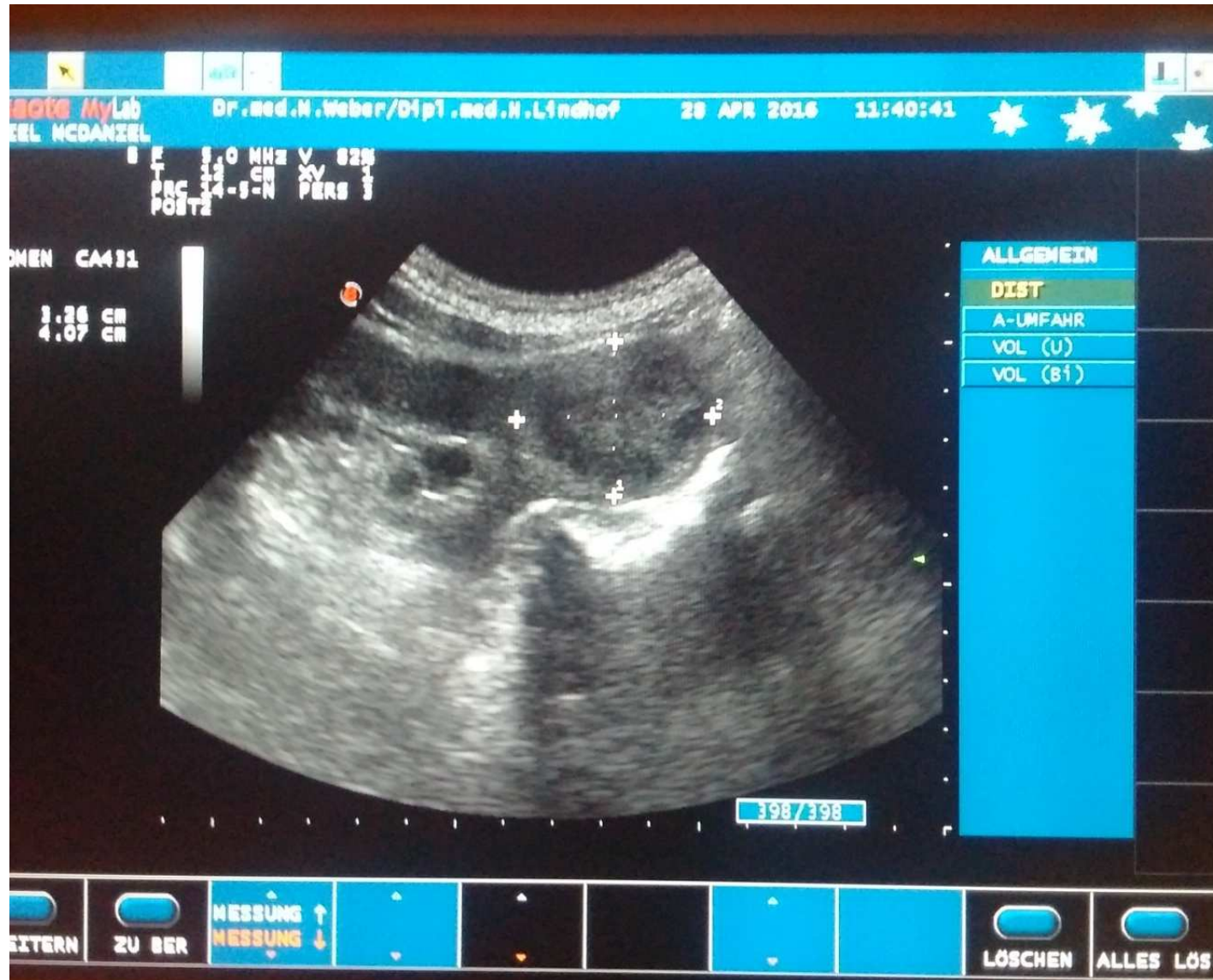
Interstitial PDT of Squamous Cell Carcinoma:



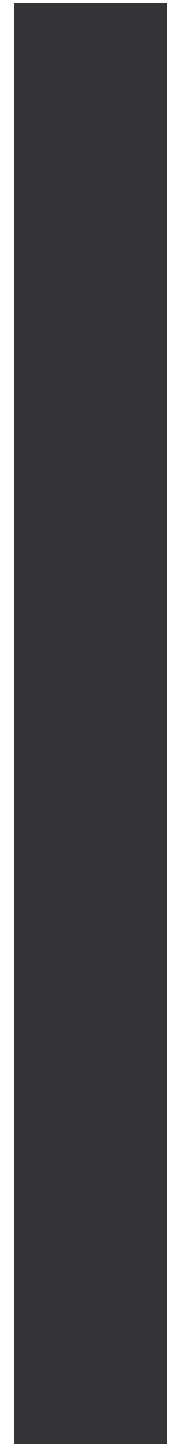
Interstitial PDT of Mouth Bottom Cancer with Lymph Nodes:



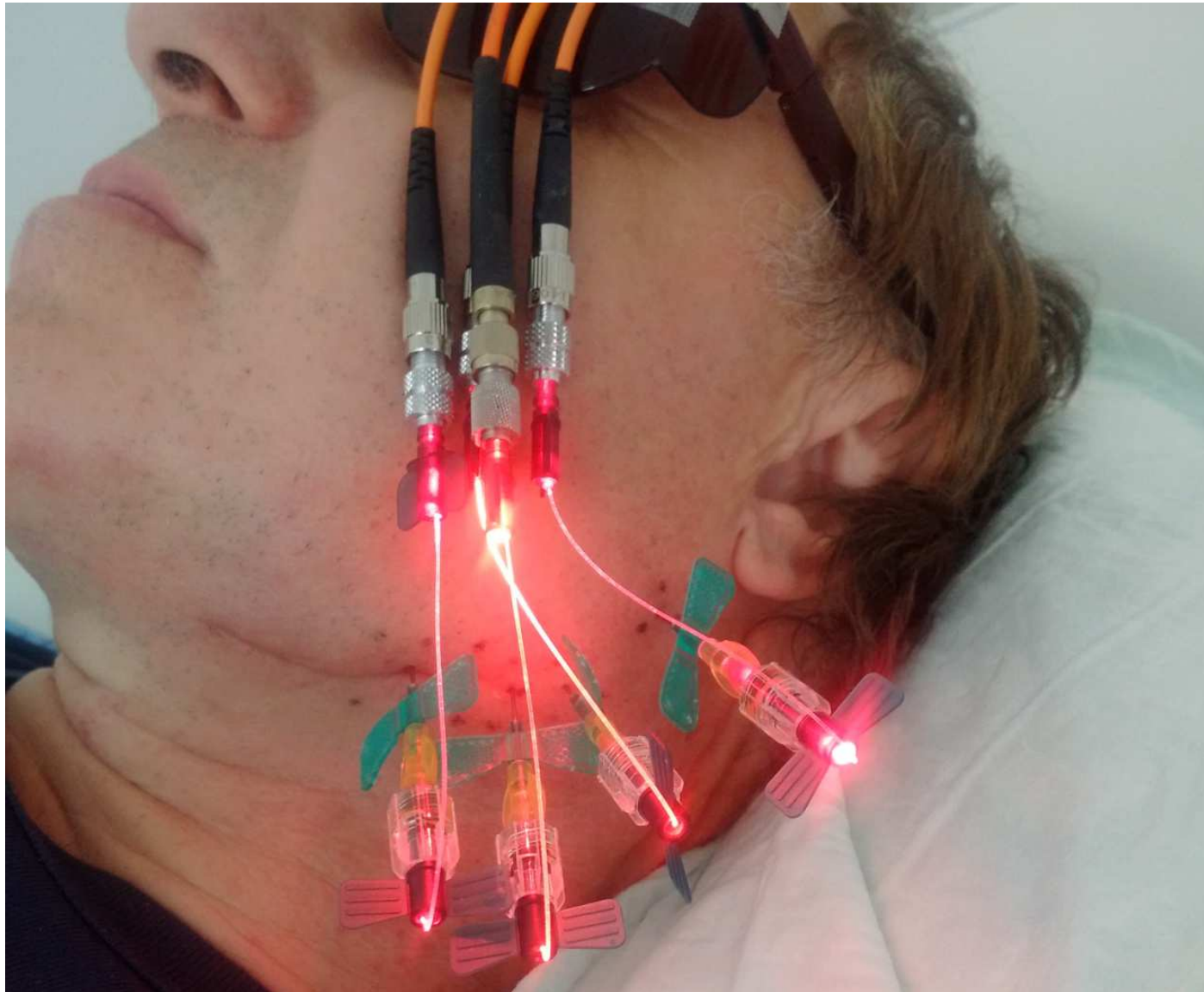
Larynx Cancer, spreading in the neck:



Interstitial PDT of Larynx Cancer:



Interstitial PDT of Neck Lymph Nodes:



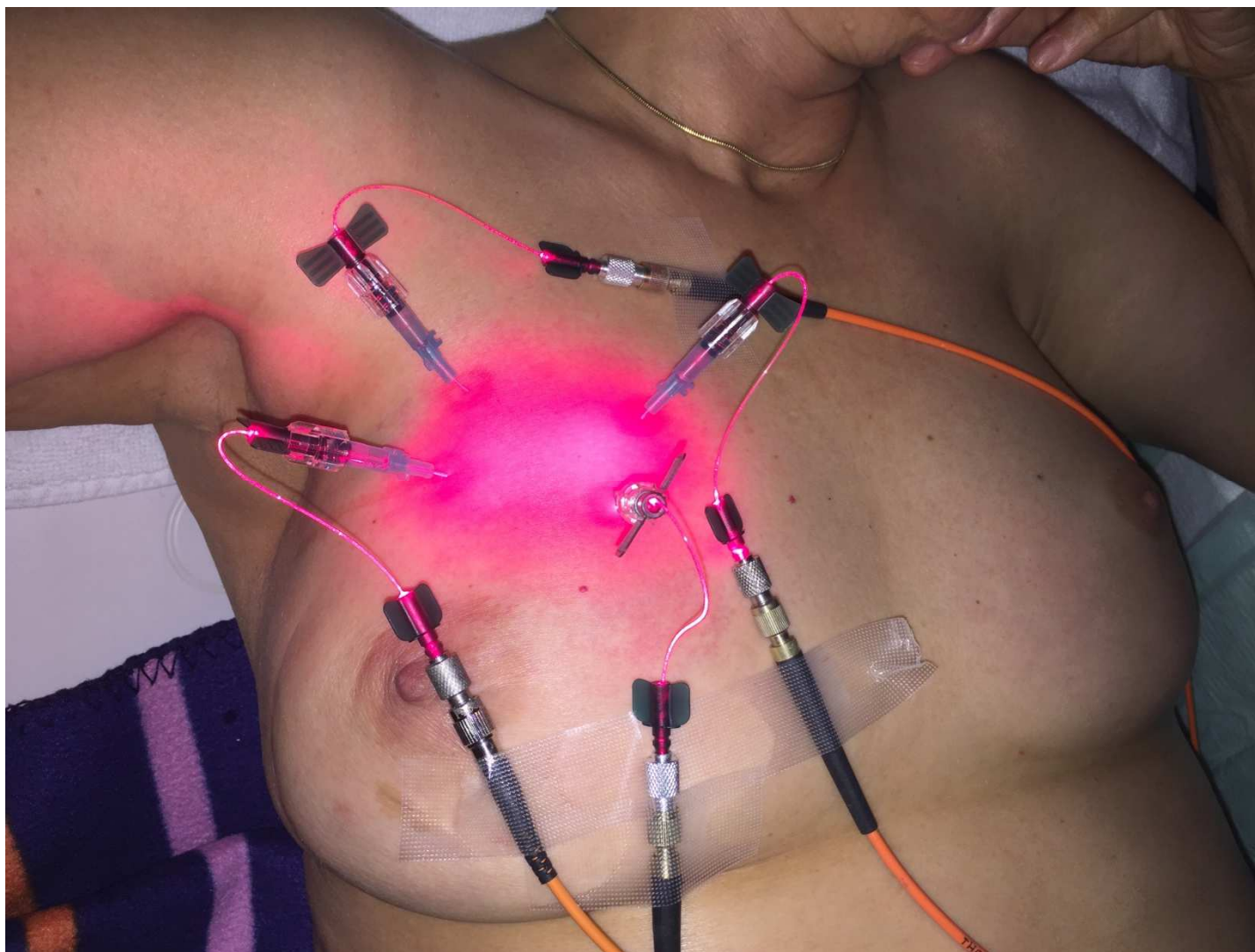
Interstitial PDT of Neck Lymph Nodes:



Interstitial PDT of Thyroid Cancer:



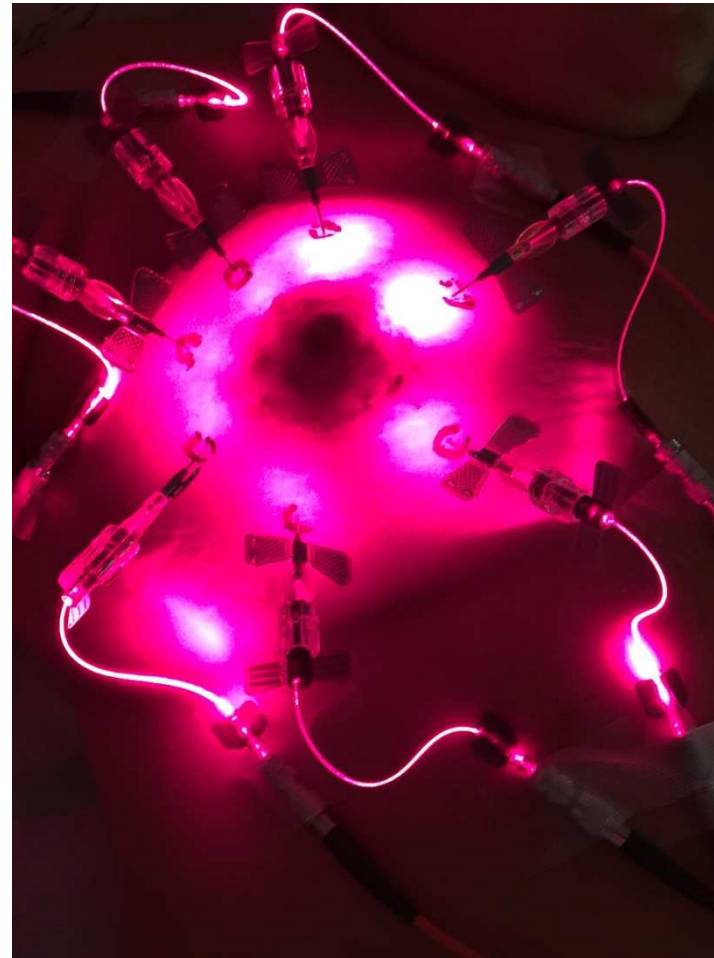
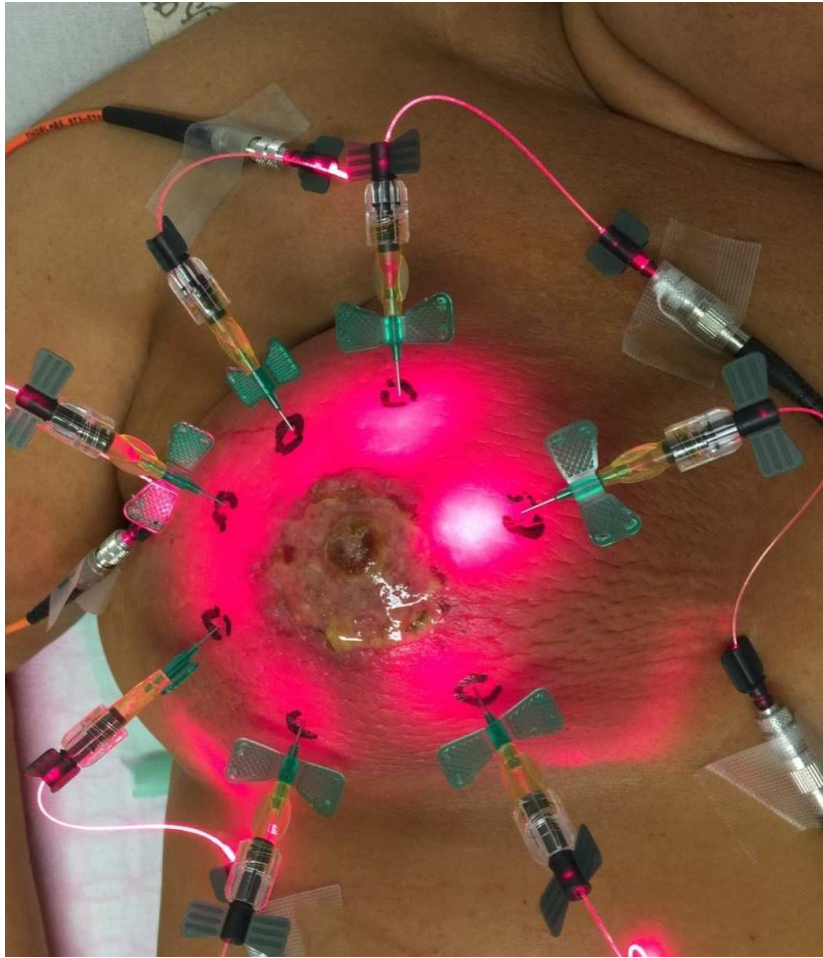
Interstitial PDT of Breast Cancer:



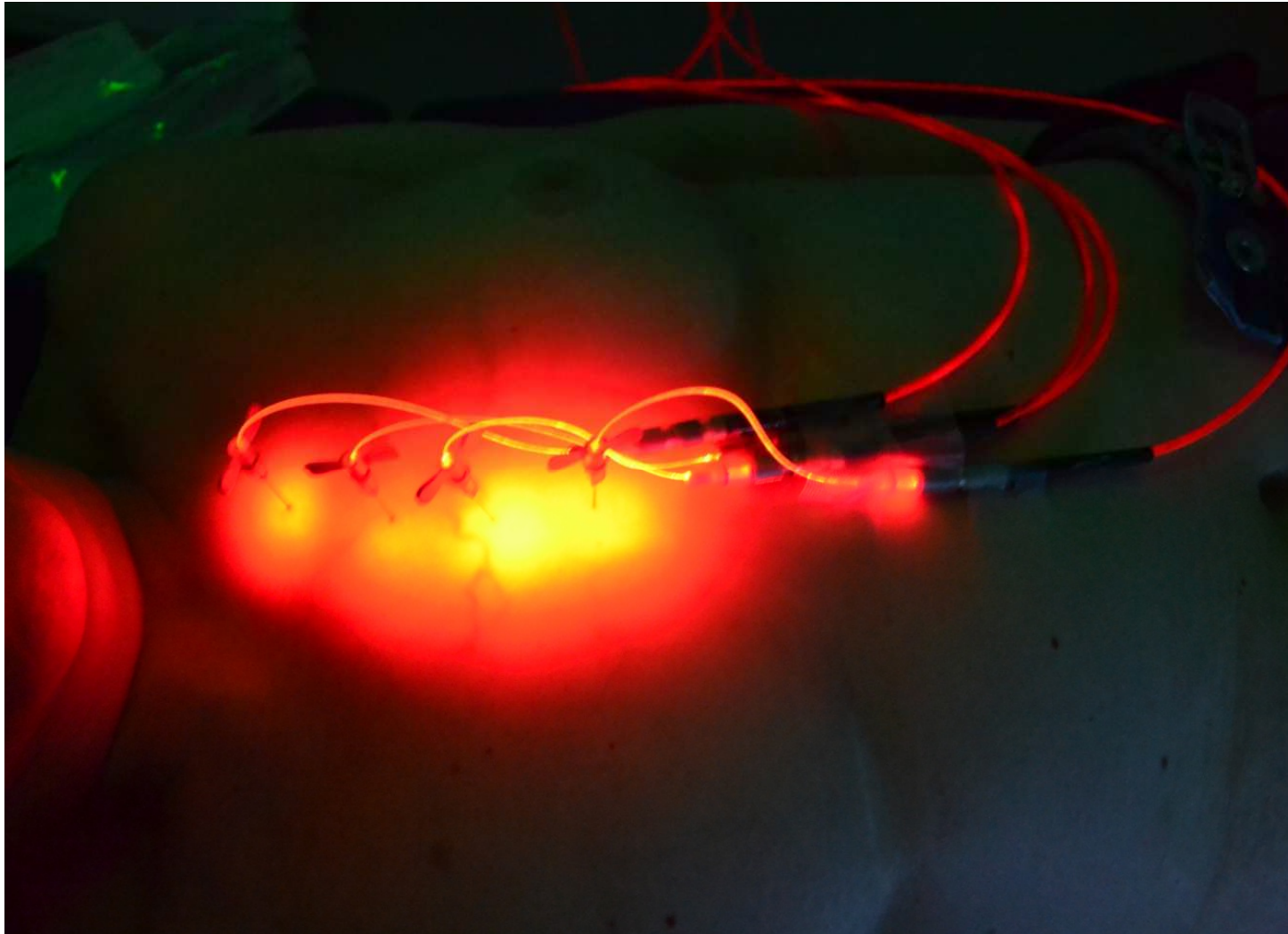
Interstitial PDT of Breast Cancer:



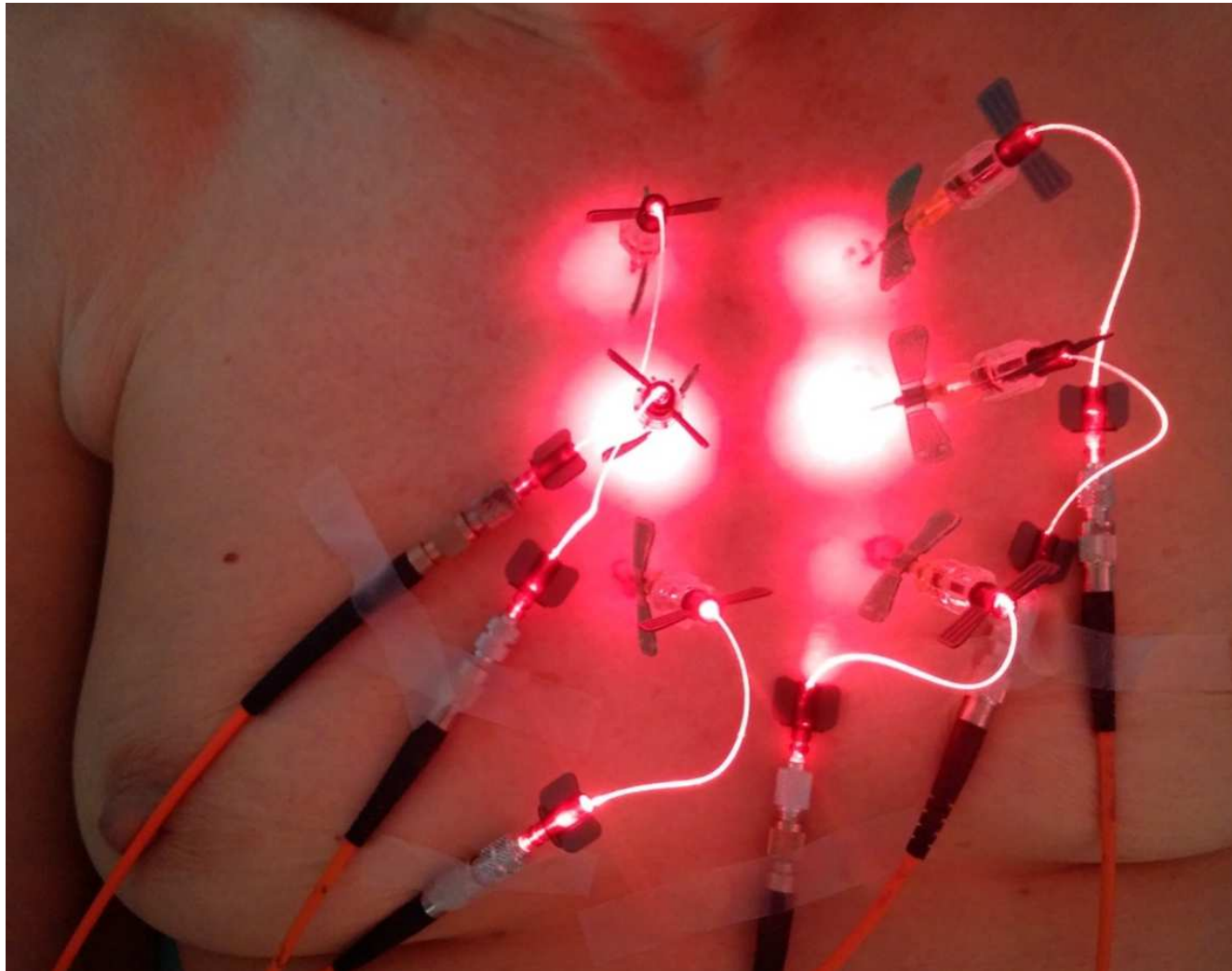
Interstitial PDT of Breast Cancer:



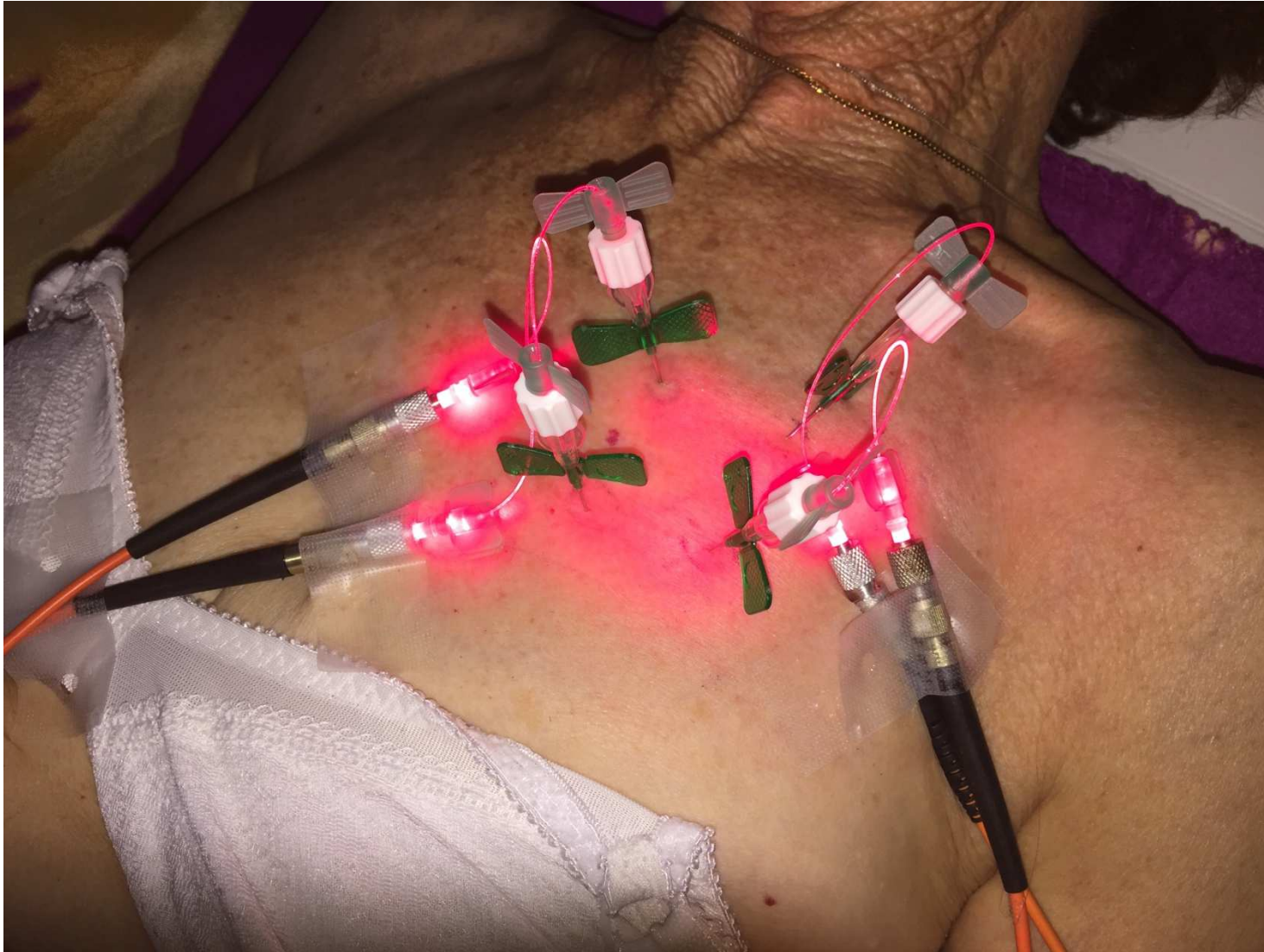
Interstitial PDT of Breast Cancer with Mediastinal Lymph Metastases:



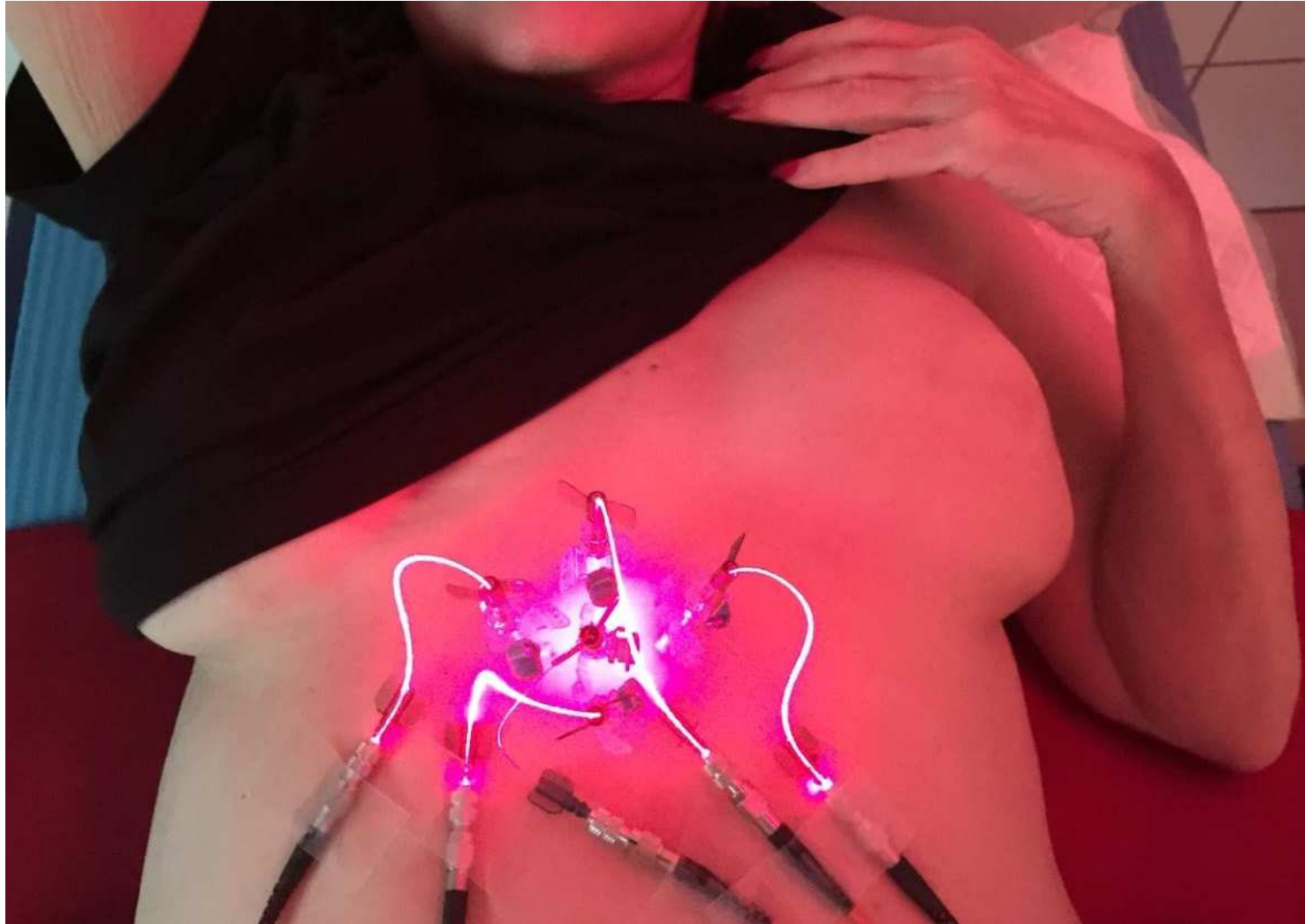
Interstitial PDT of Mediastinal Metastases:



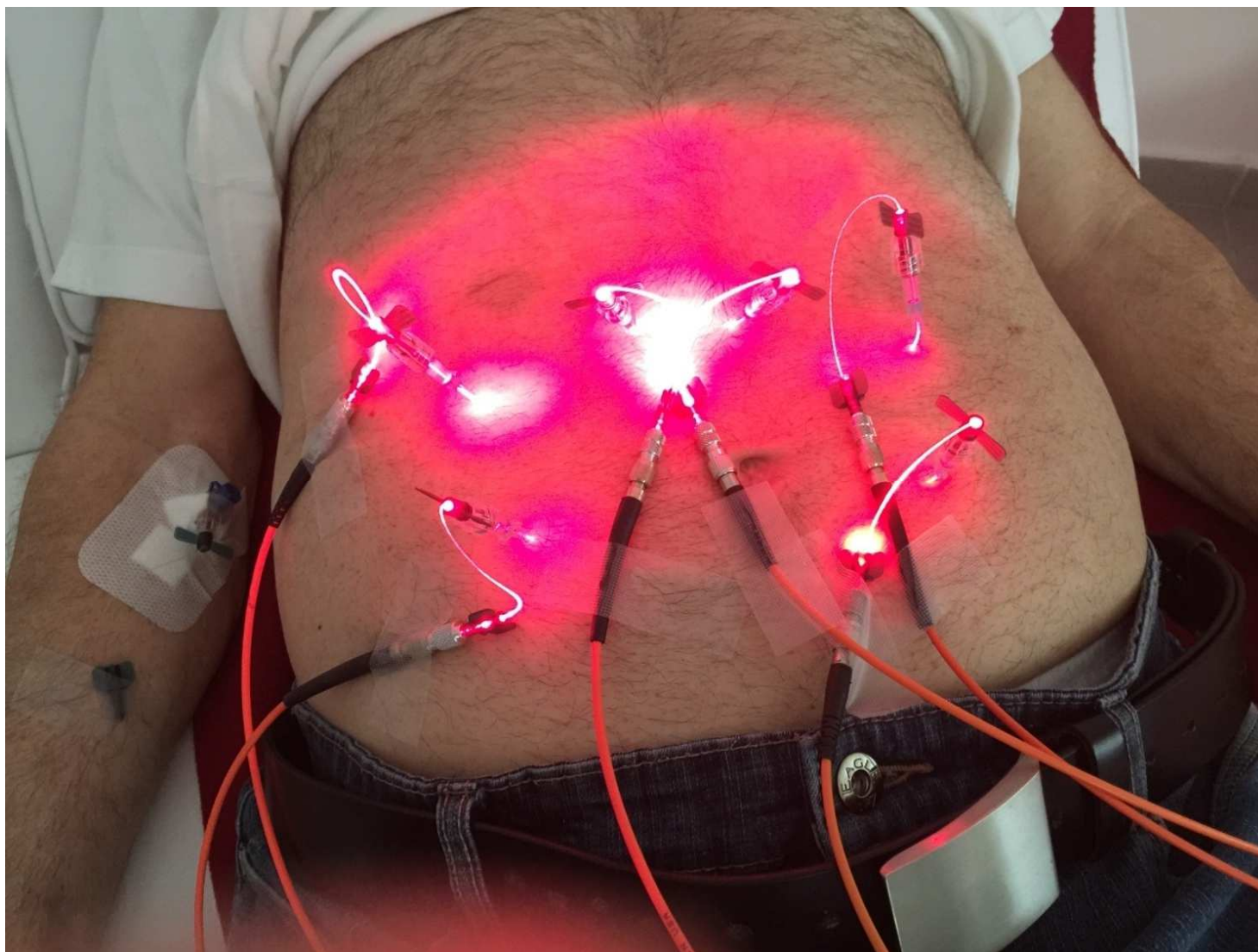
Interstitial PDT of Lung Cancer:



Interstitial PDT of Pancreatic Cancer:



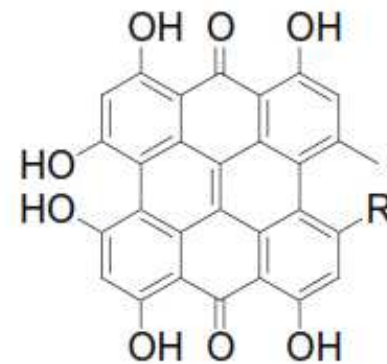
Interstitial PDT of Peritoneal Carcinosis:



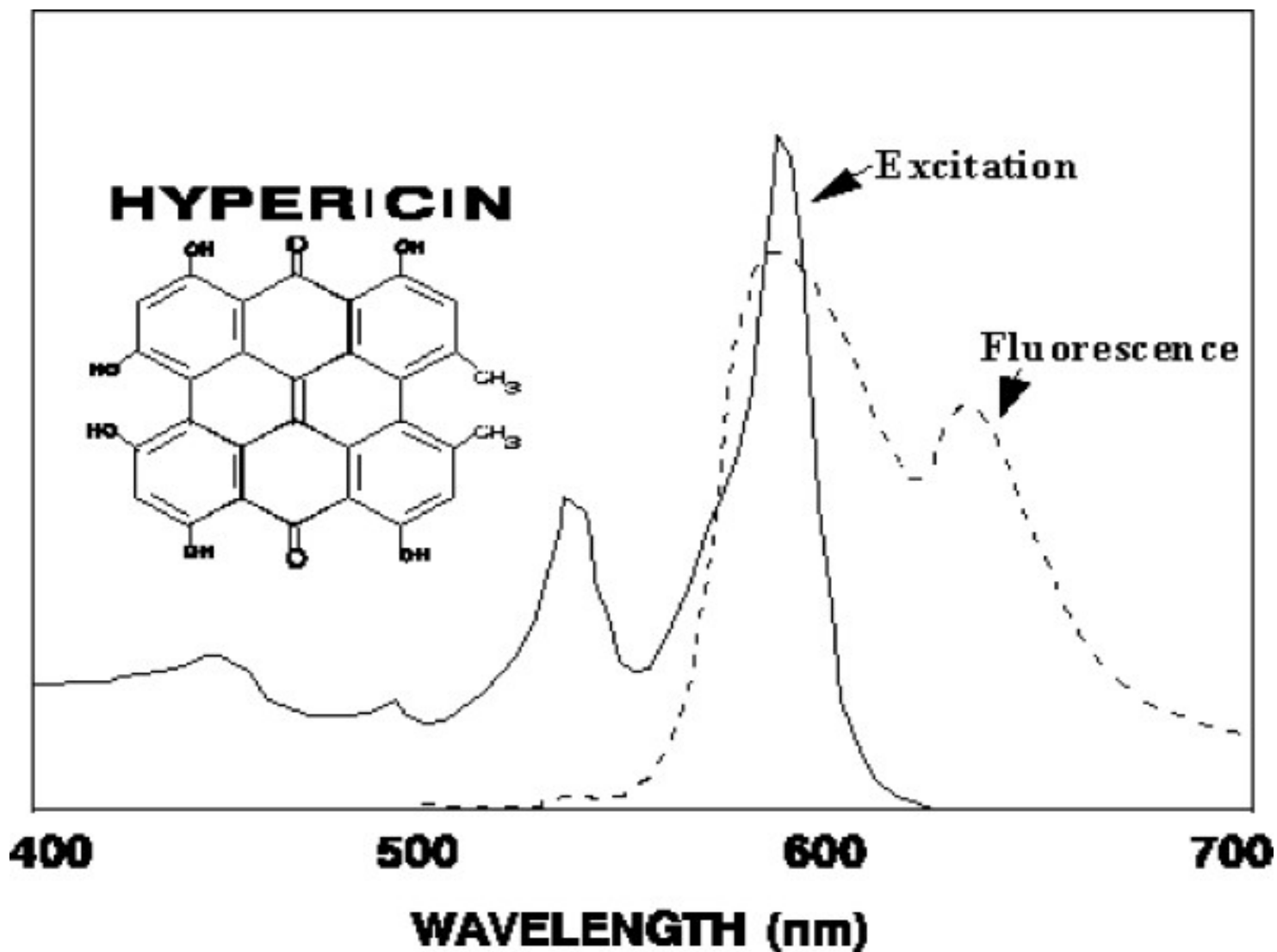
5. Other Natural Photosensitizers



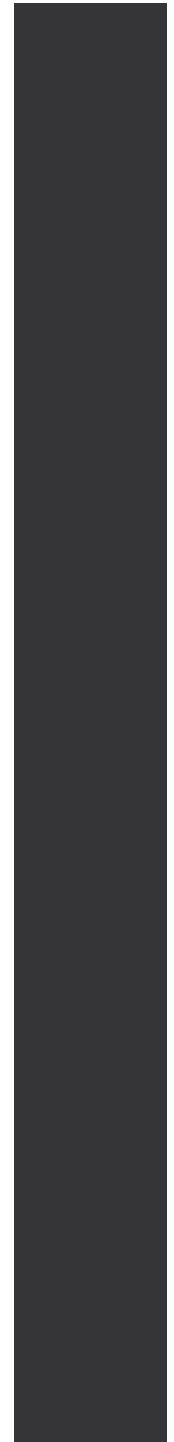
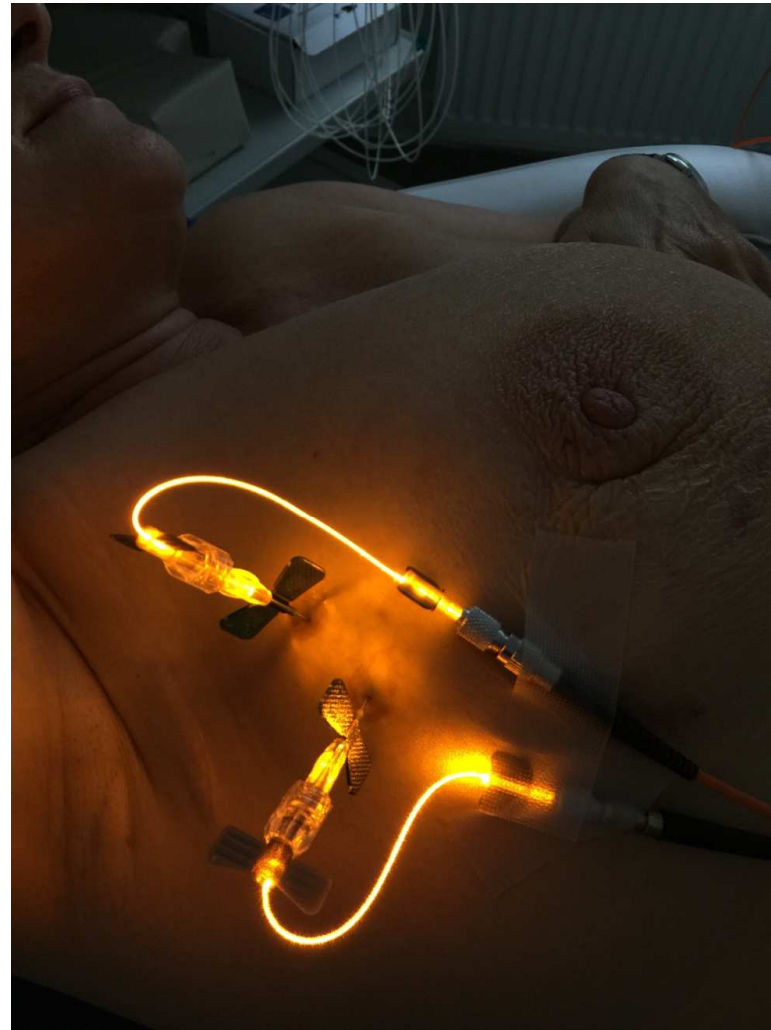
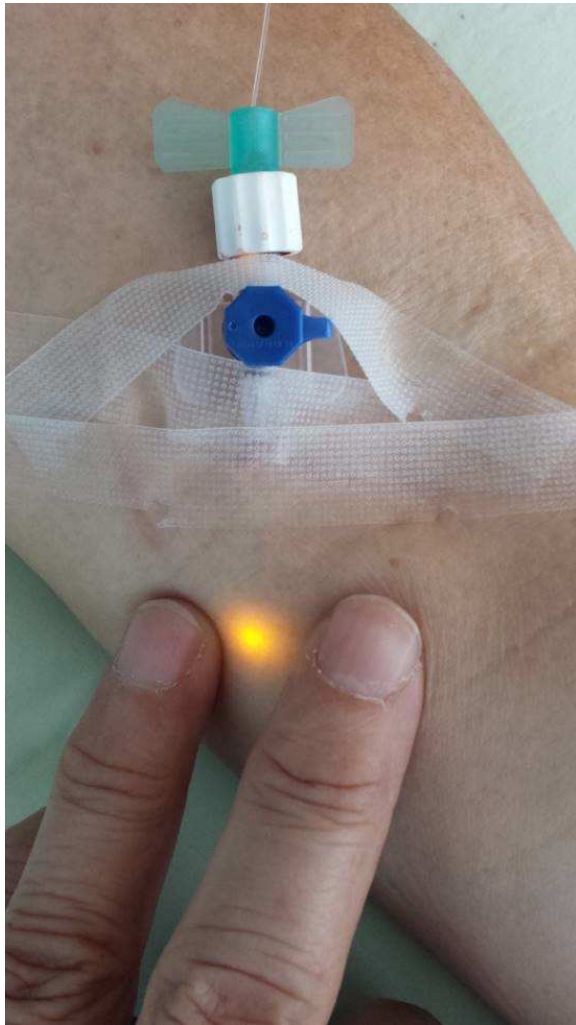
Hypericin (St. John's Wort Plant):



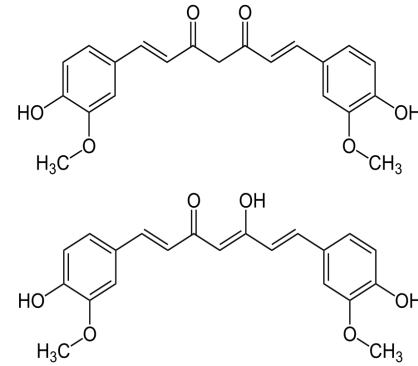
Absorption Spectrum of Hypericin:



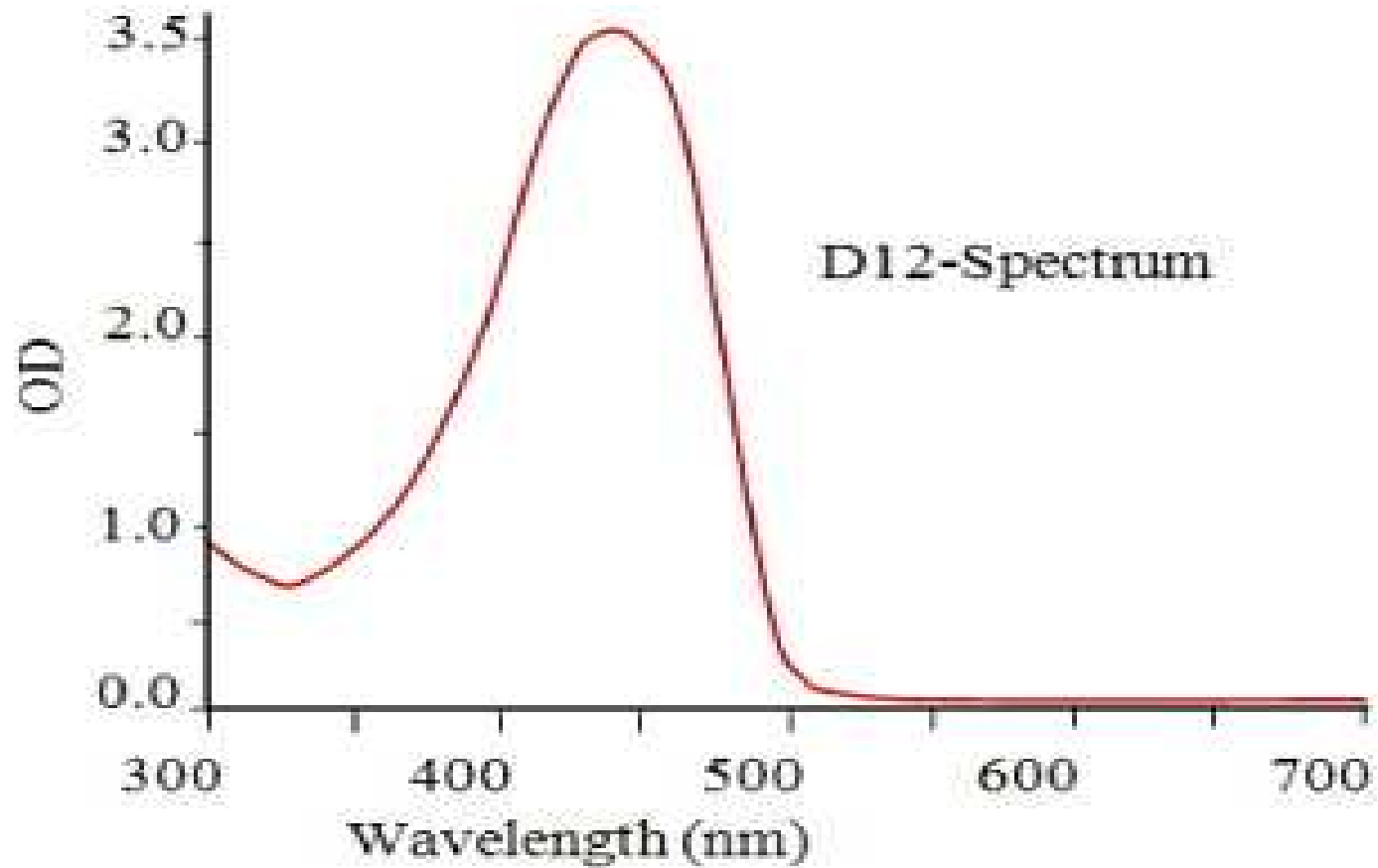
PDT with Hypericin and Yellow Laser:



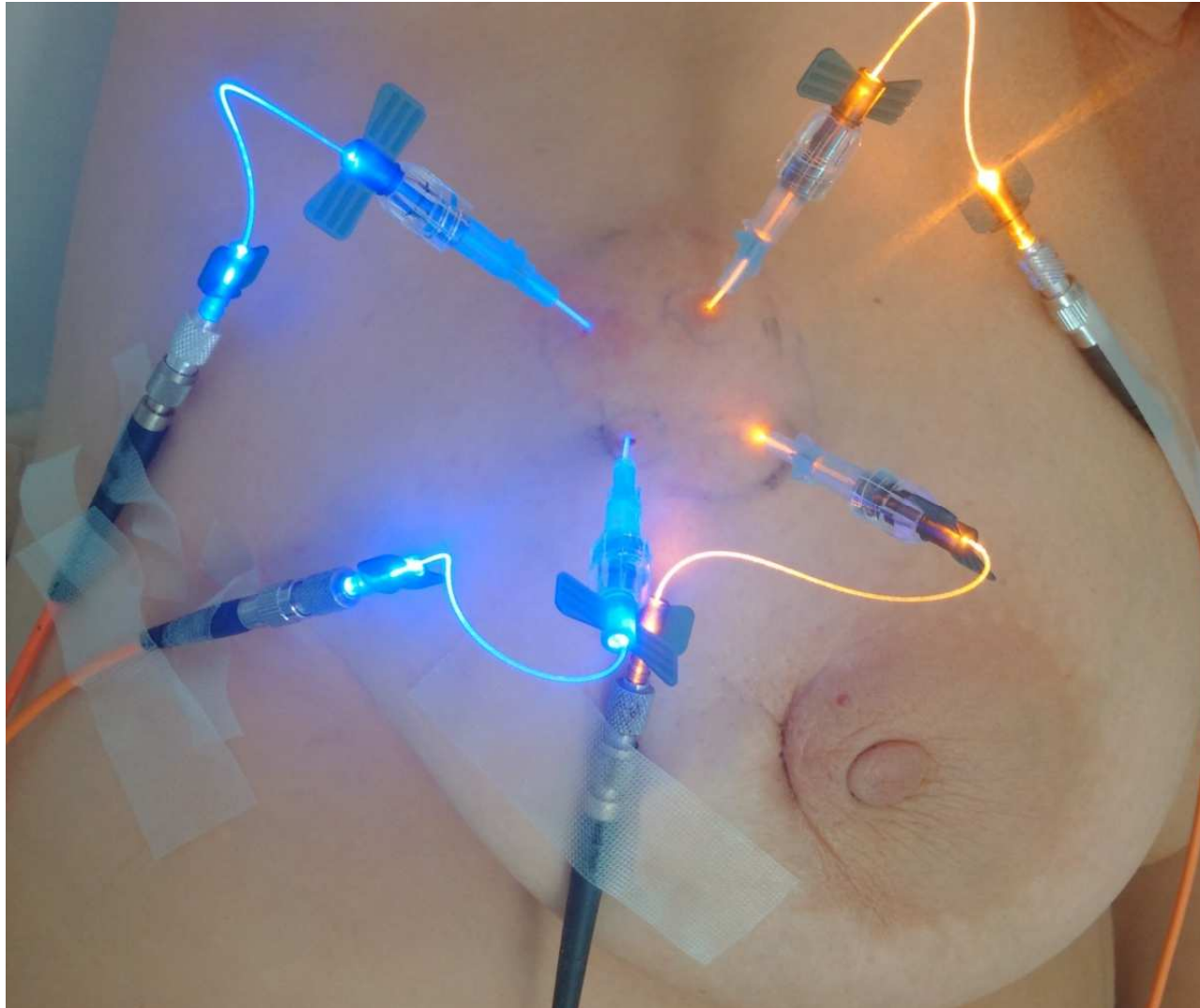
Curcumin as Photosensitizer:



Absorption Spectrum of Curcumin:



Interstitial PDT with Hypericin (Yellow Laser) and Curcumin (Blue Laser):



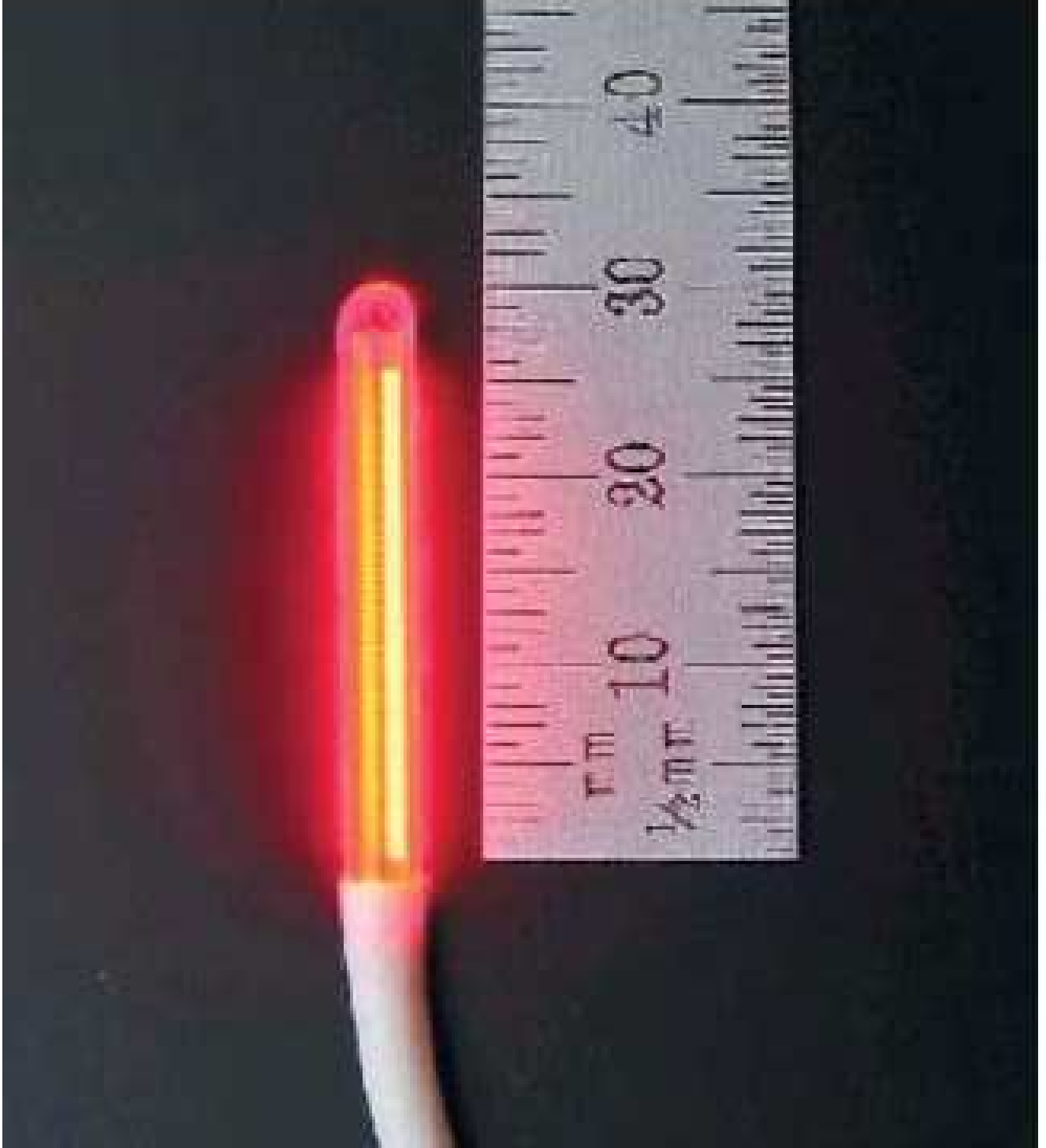
6. Applications in Urology



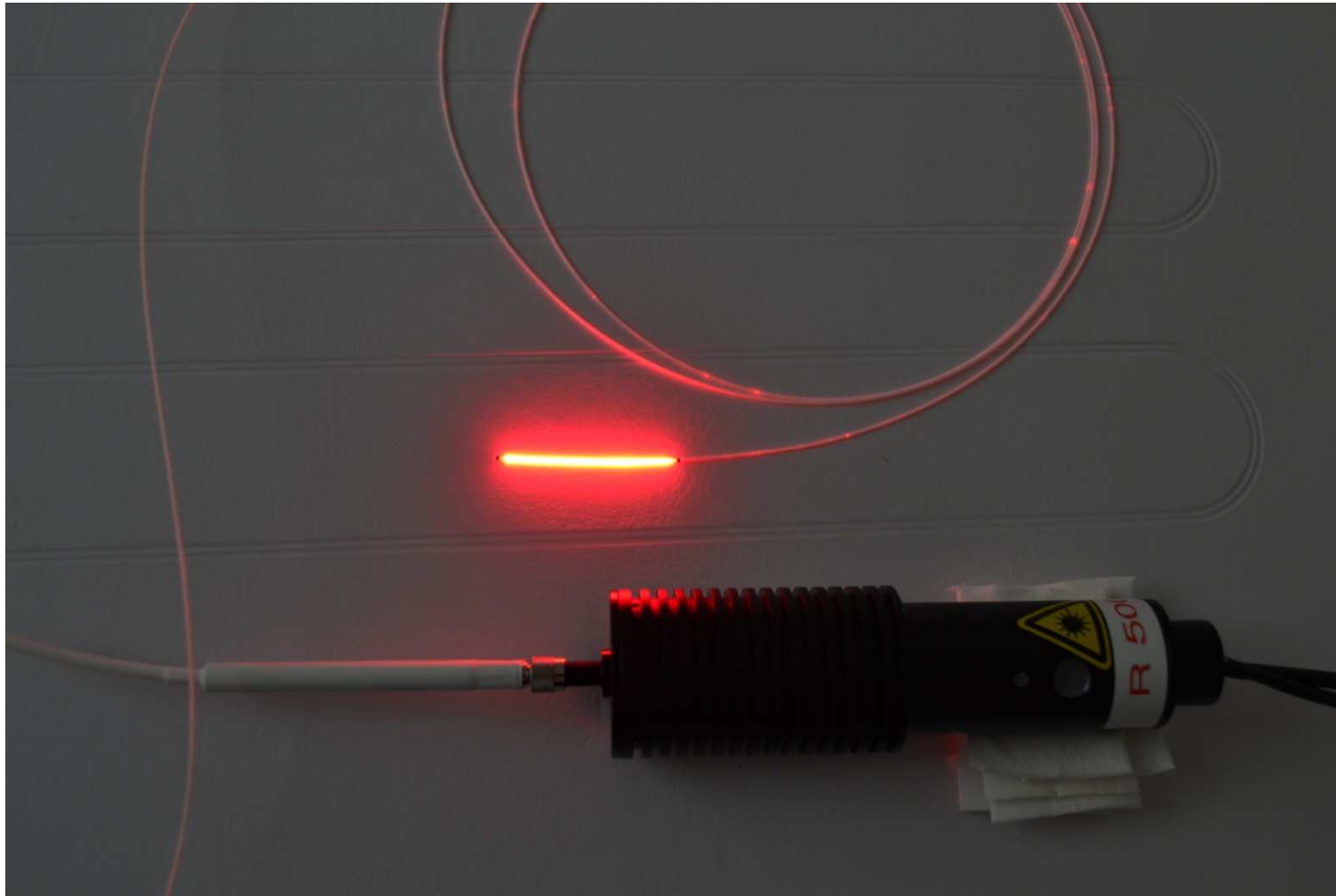


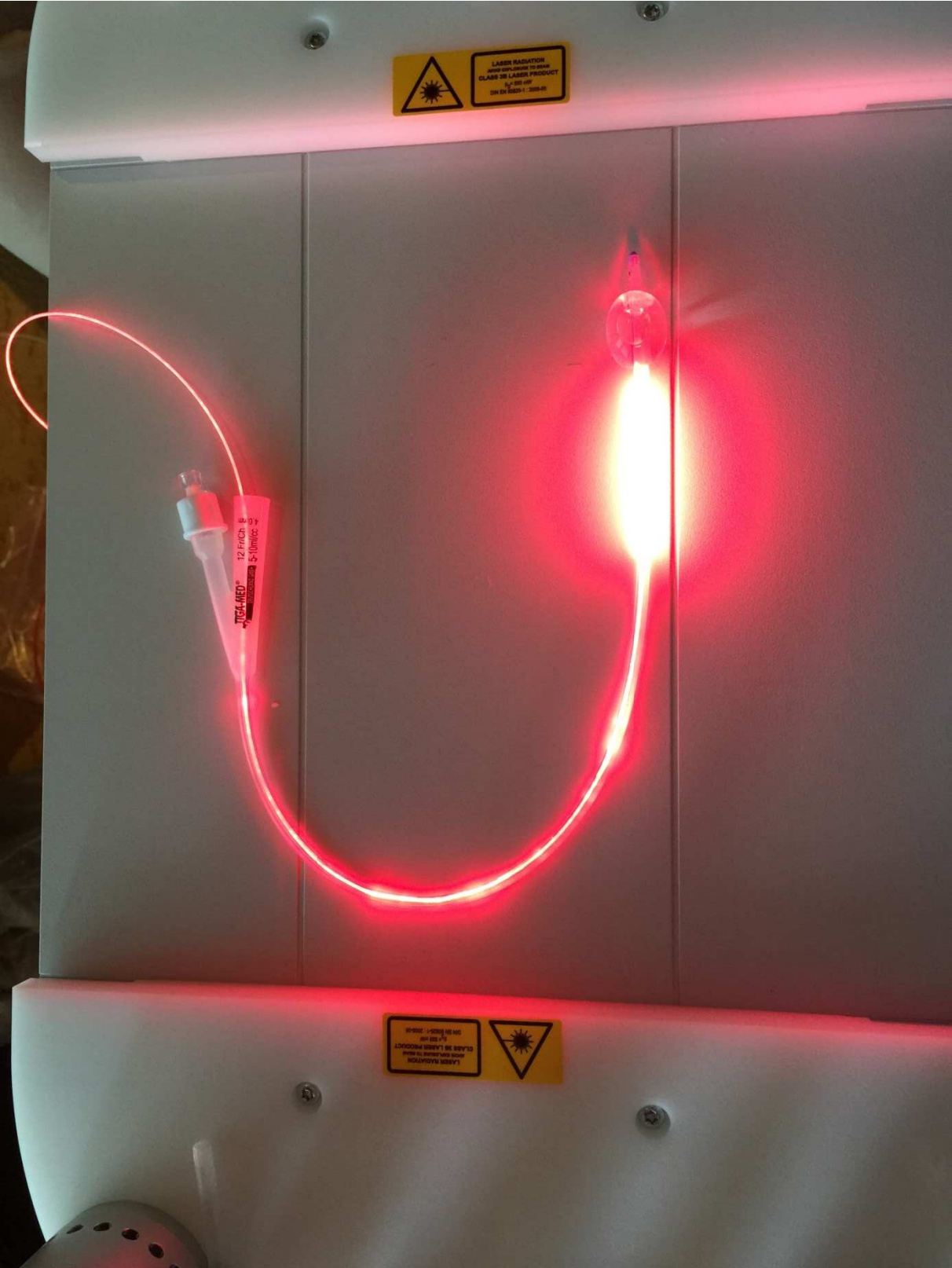
Fiberoptic Catheter with Circular Irradiation (for prostate cancer):





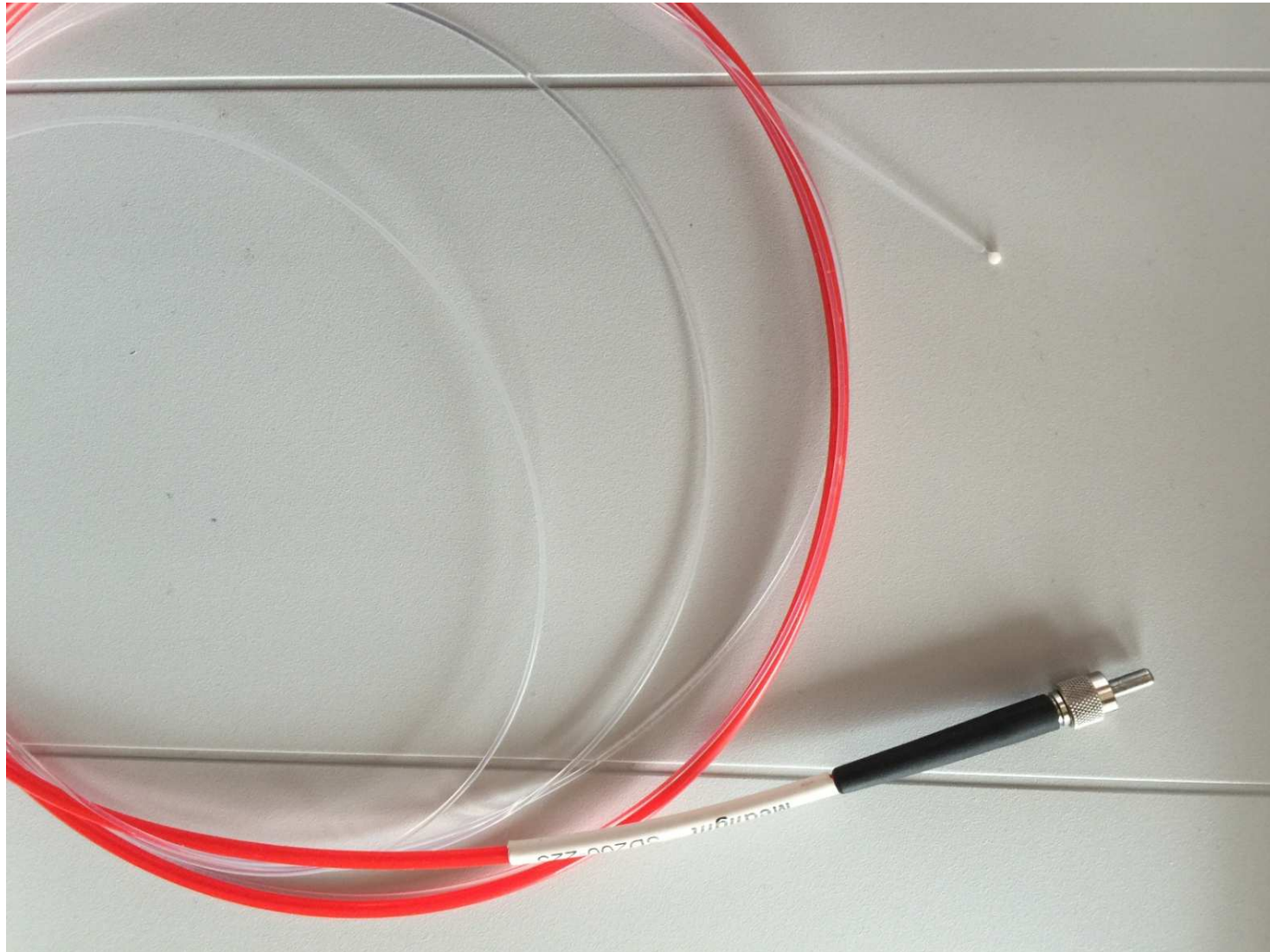
500 mW Red Laser 658 nm:

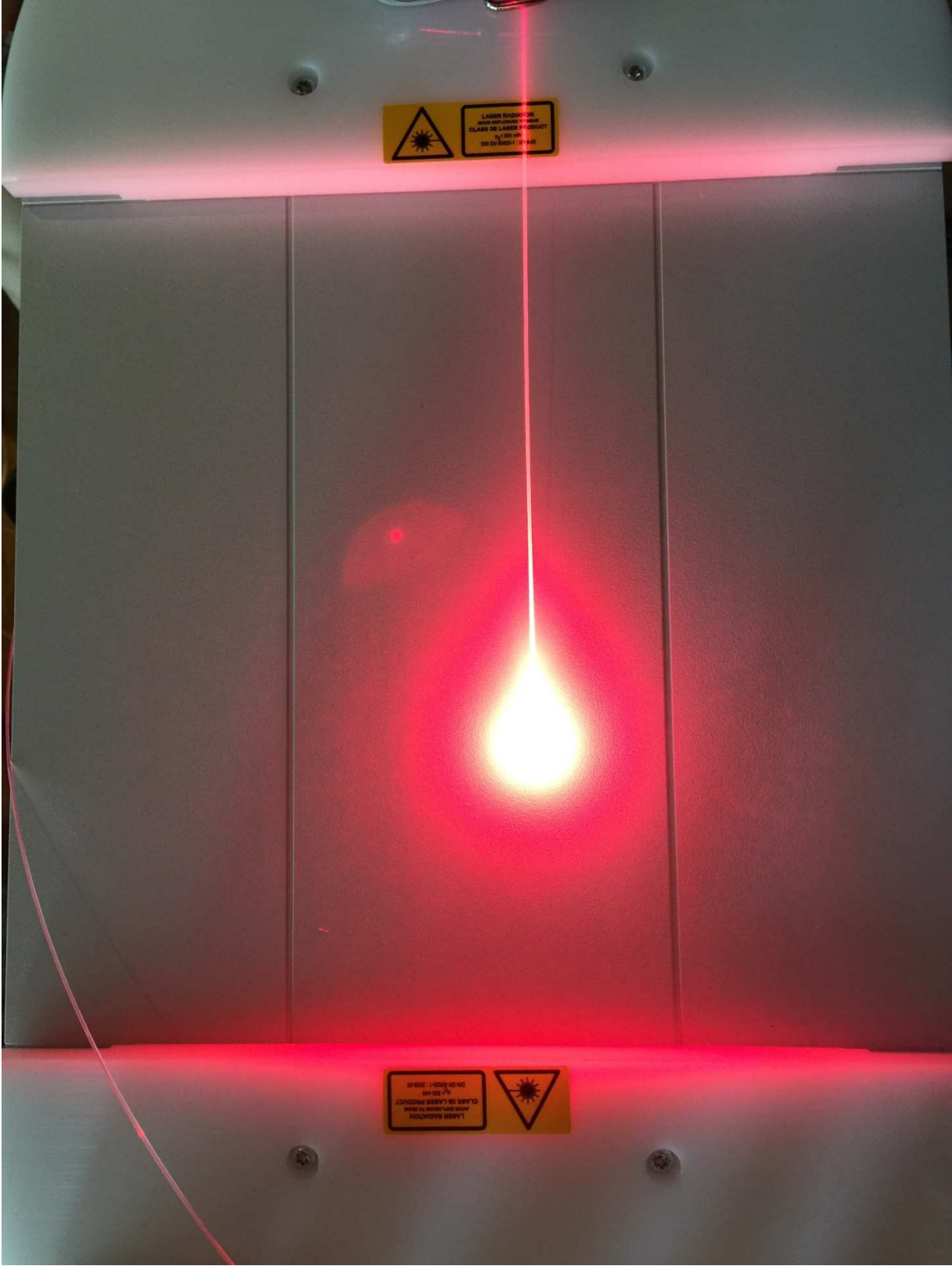


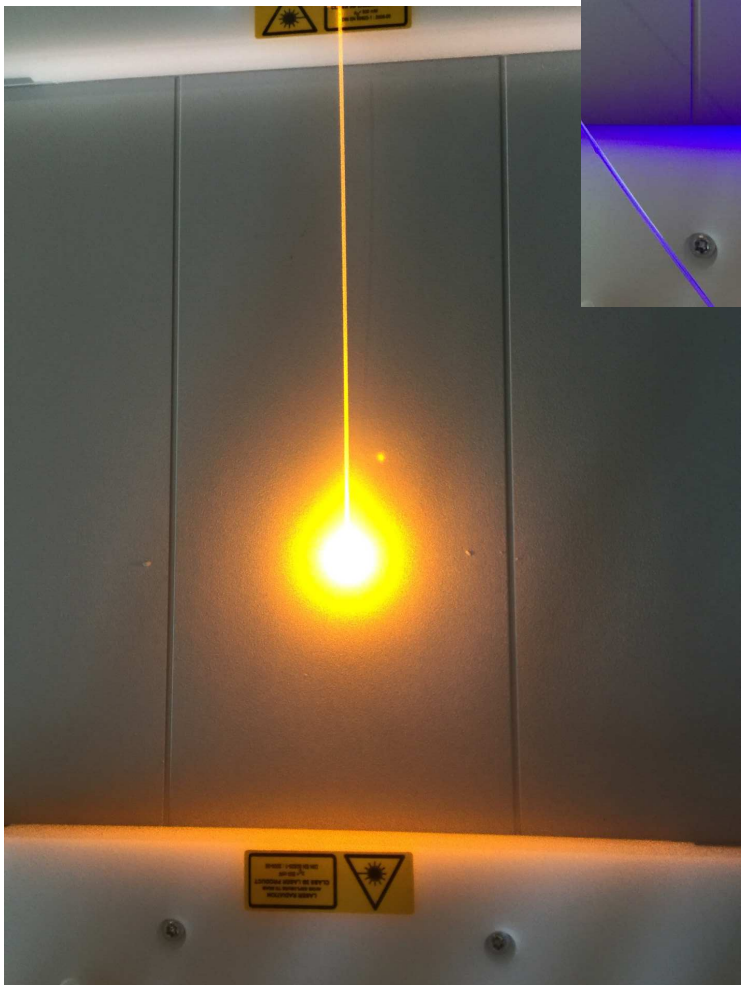
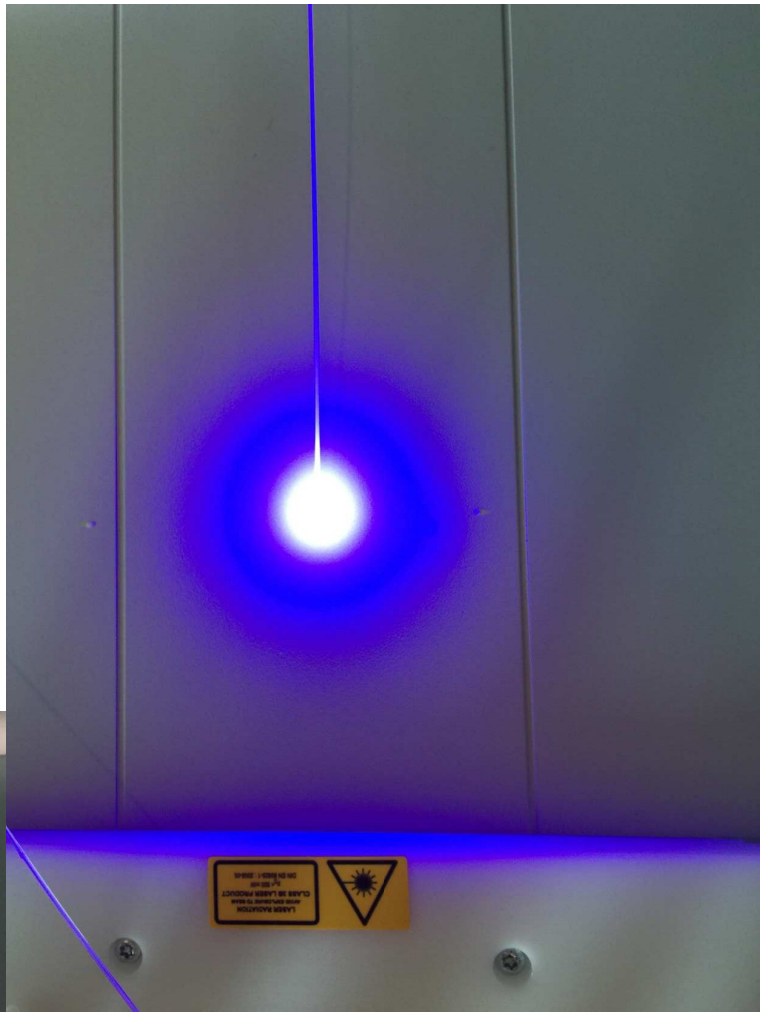




Fiberoptic Catheter with Spheric Irradiation for Bladder Cancer:

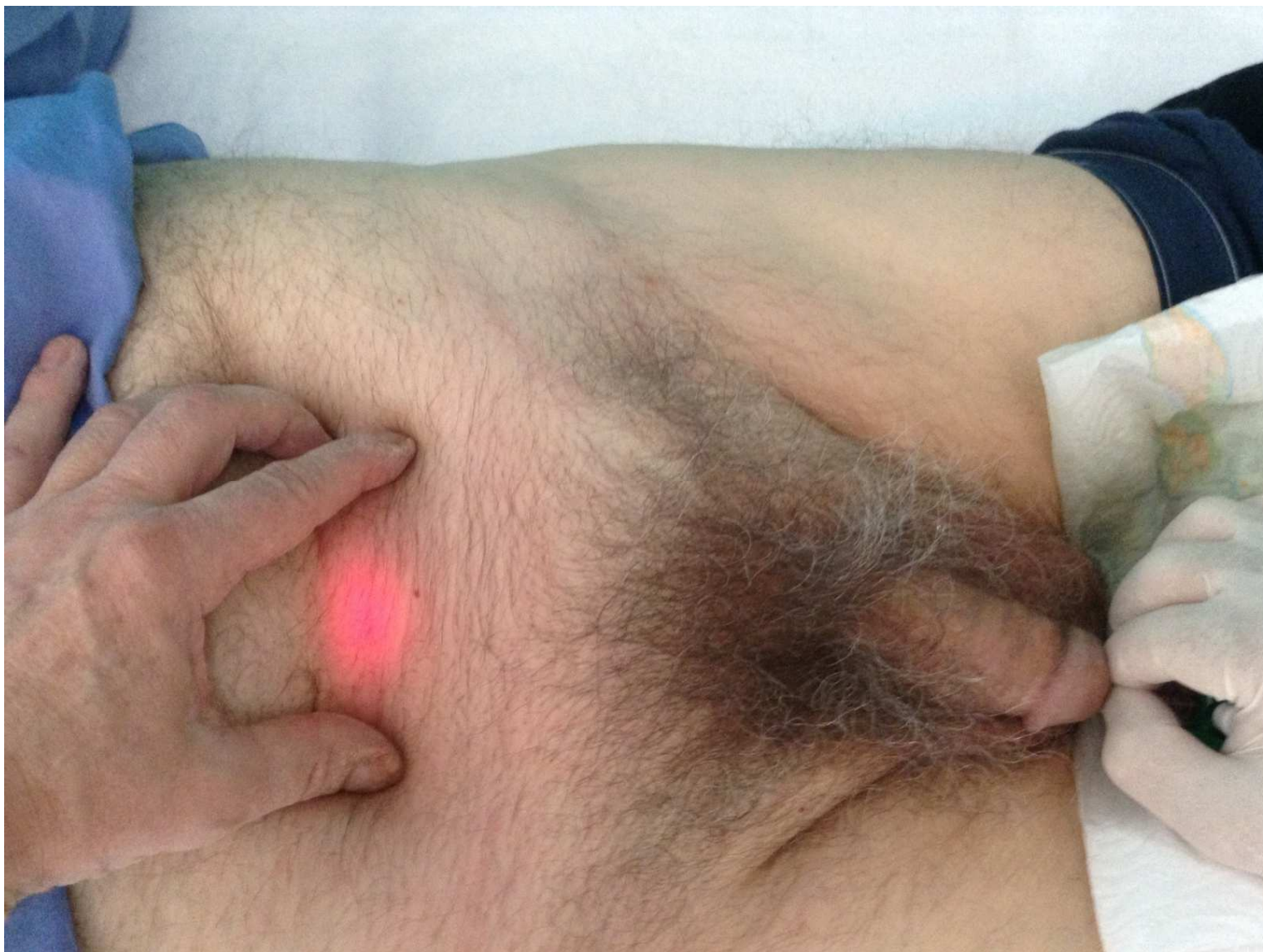






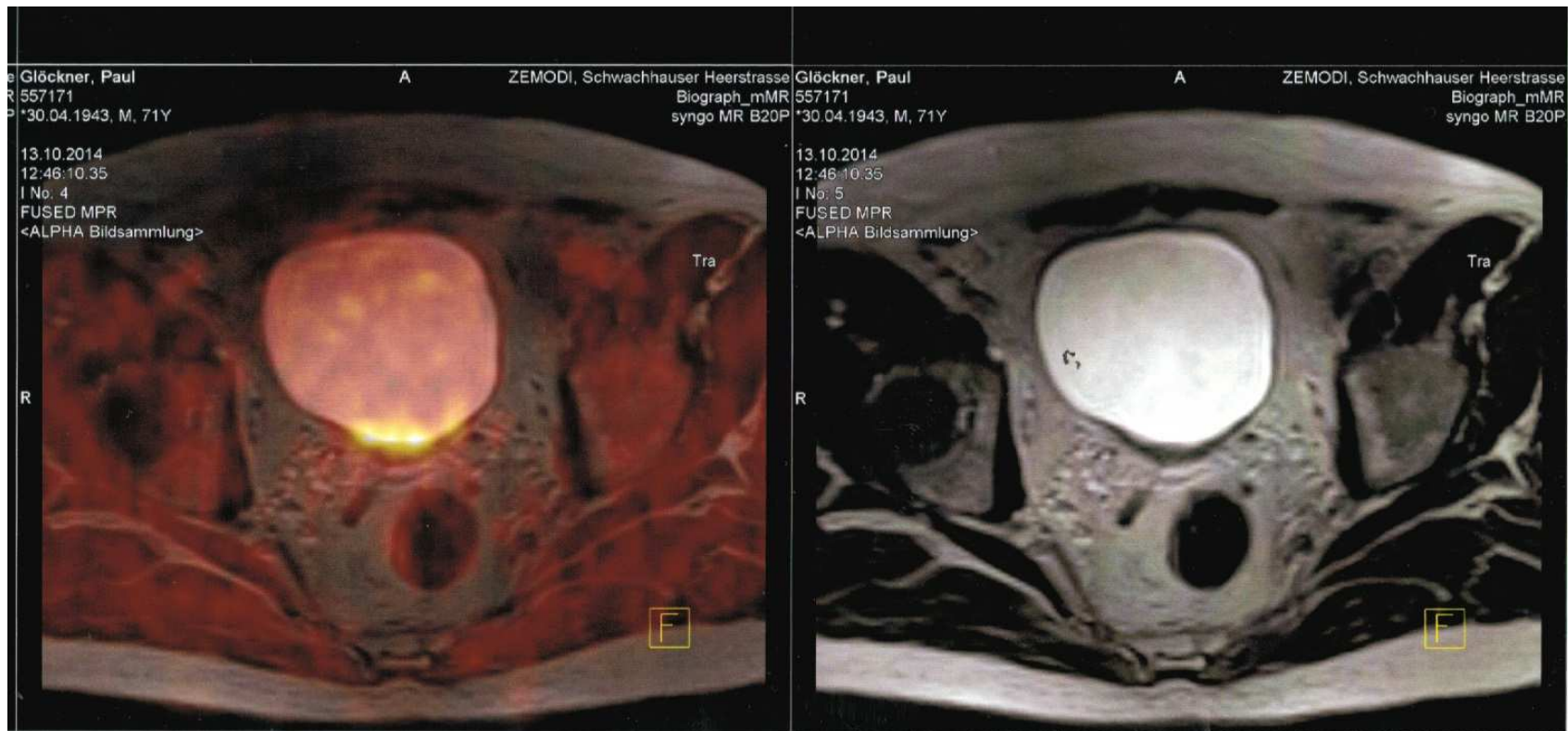


Bladder Cancer:

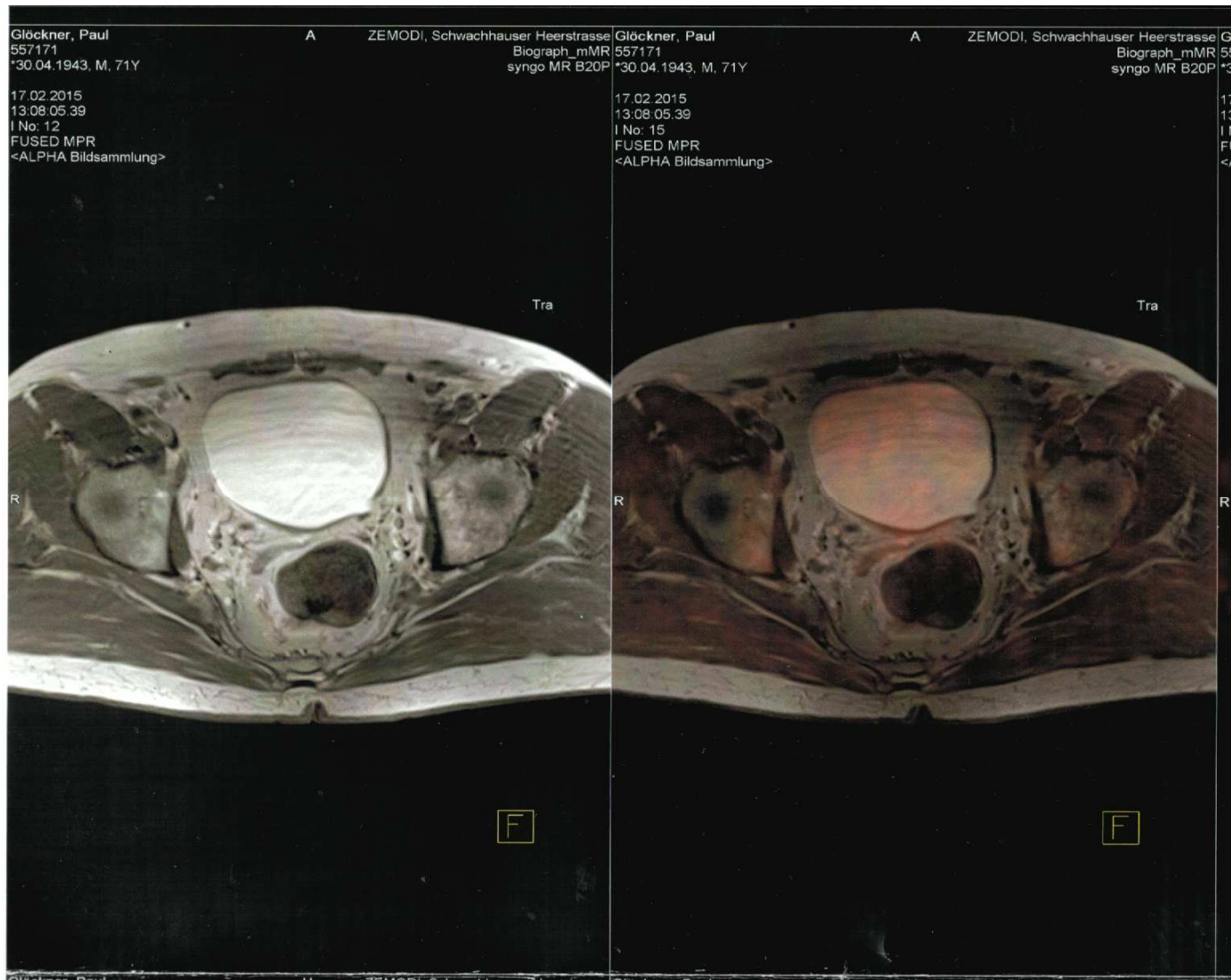


Bladder Cancer PET 10/2014

Before Treatment:

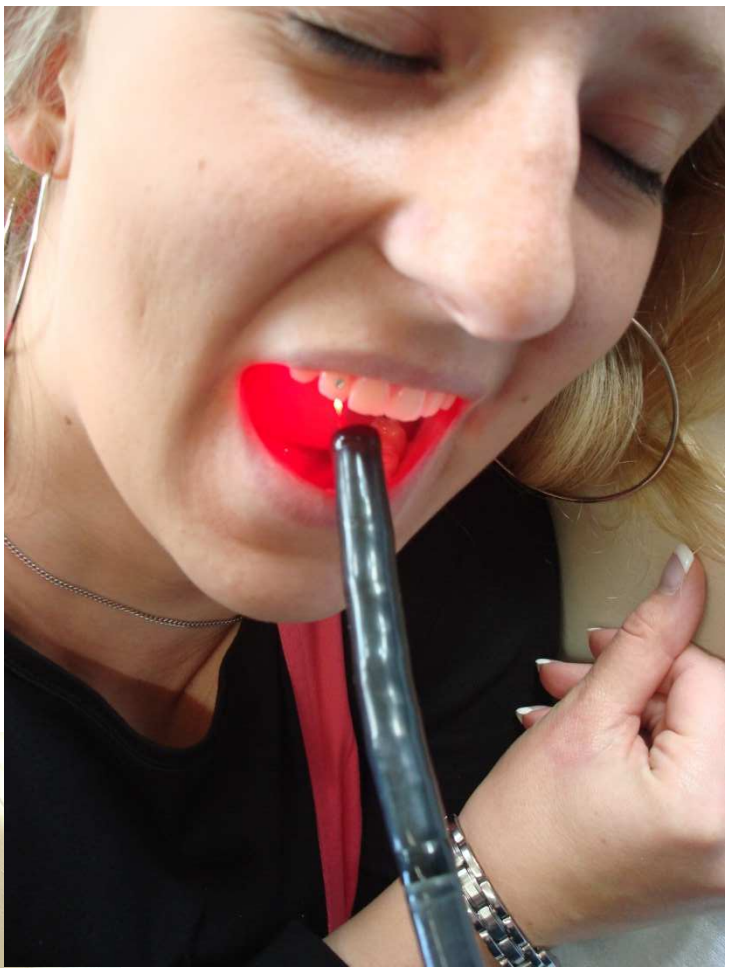


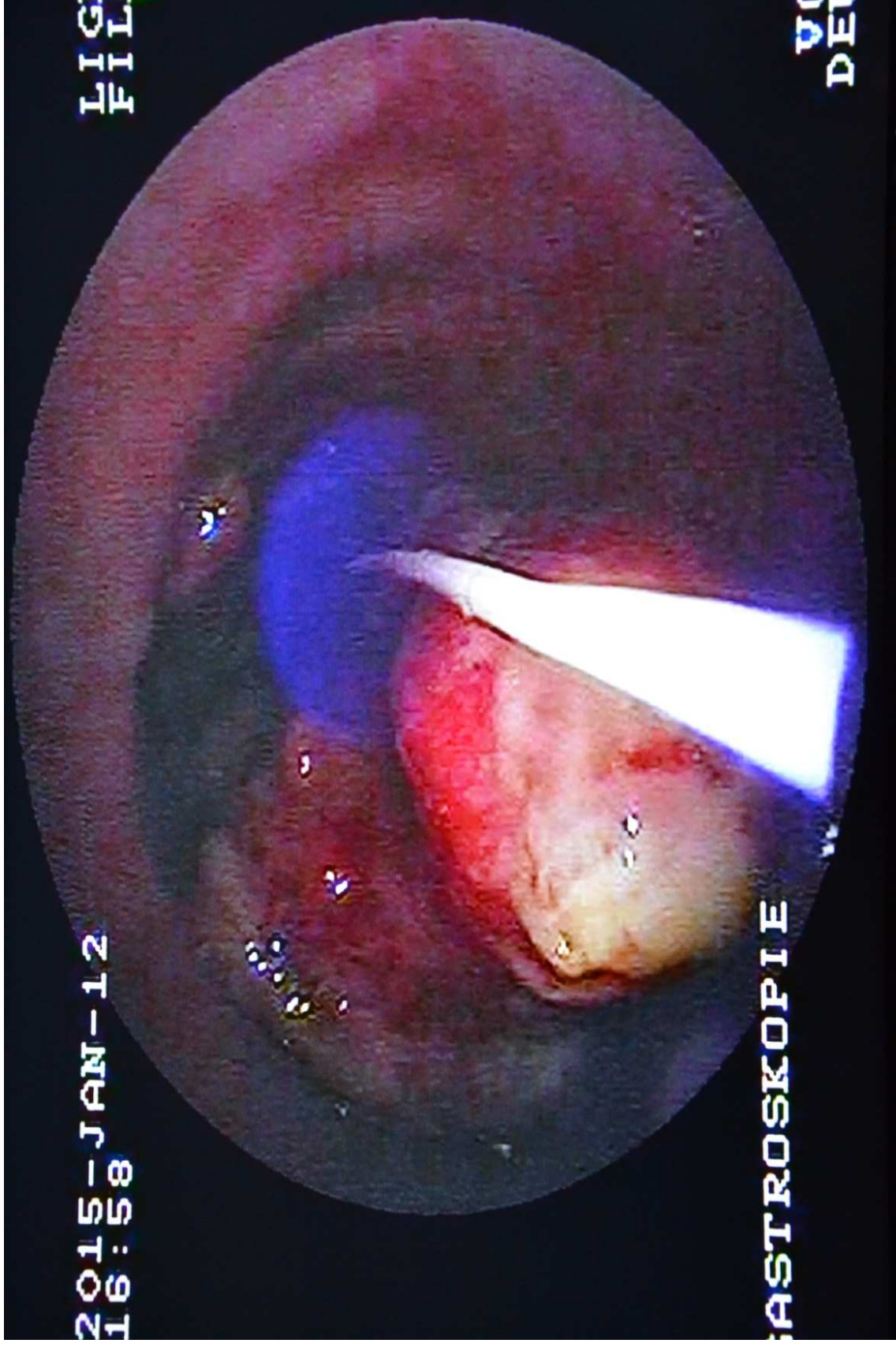
Bladder Cancer 2/2015 after PDT:



Endoscopic PDT :







2015 - JAN - 12
16:58

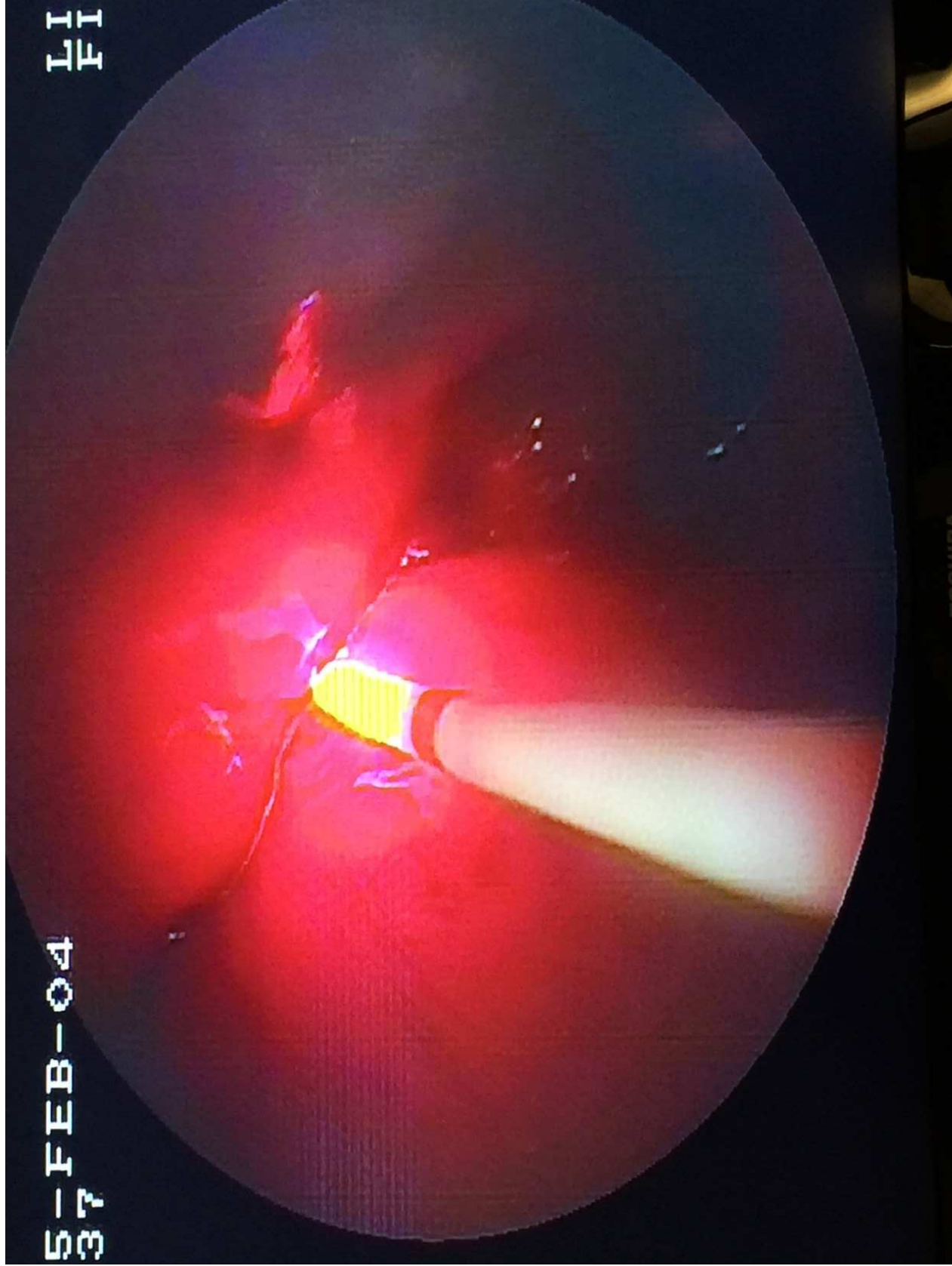
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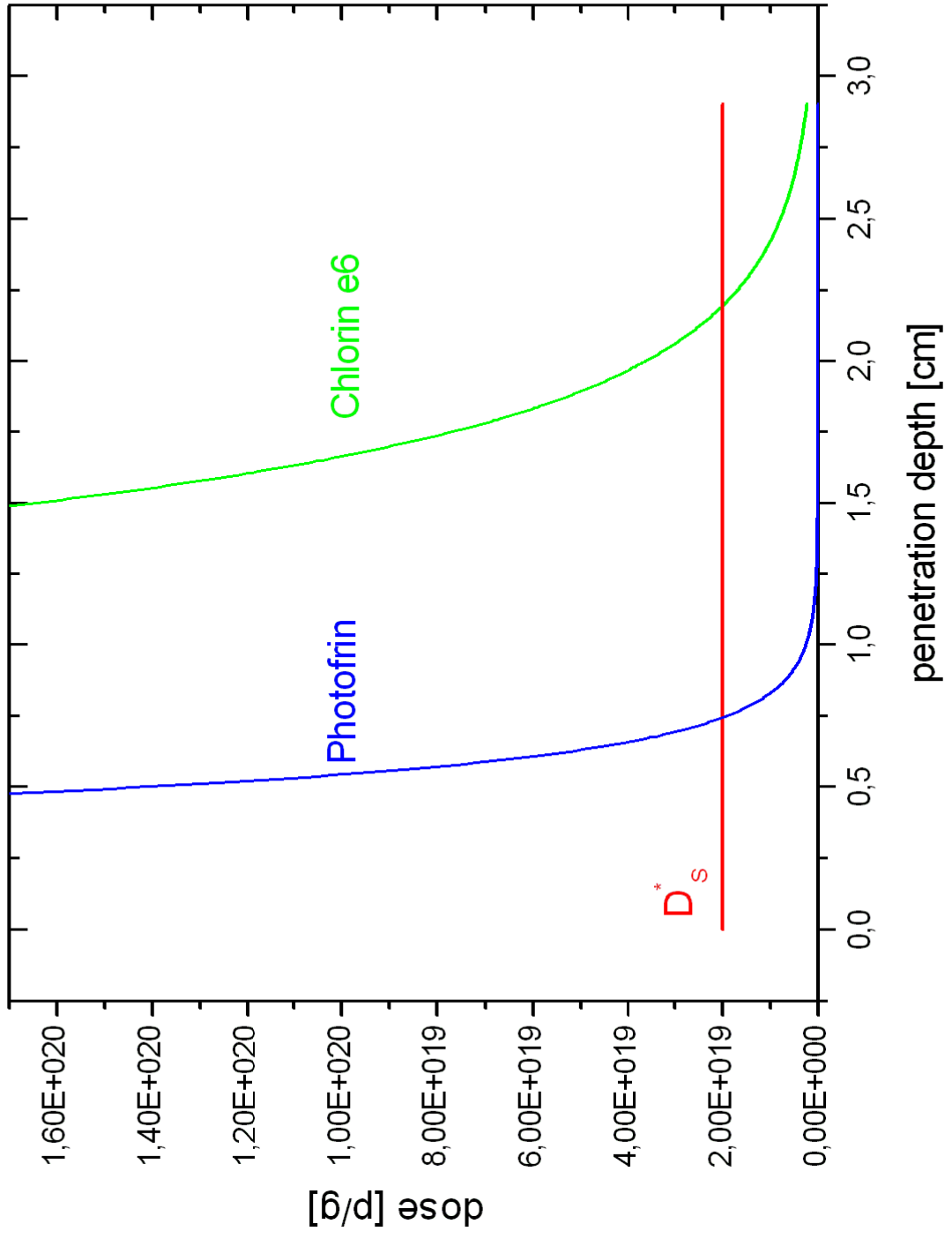
5-FEB-04
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Limitations of PDT with Chlorin E6, Hypericin and Curcumin:

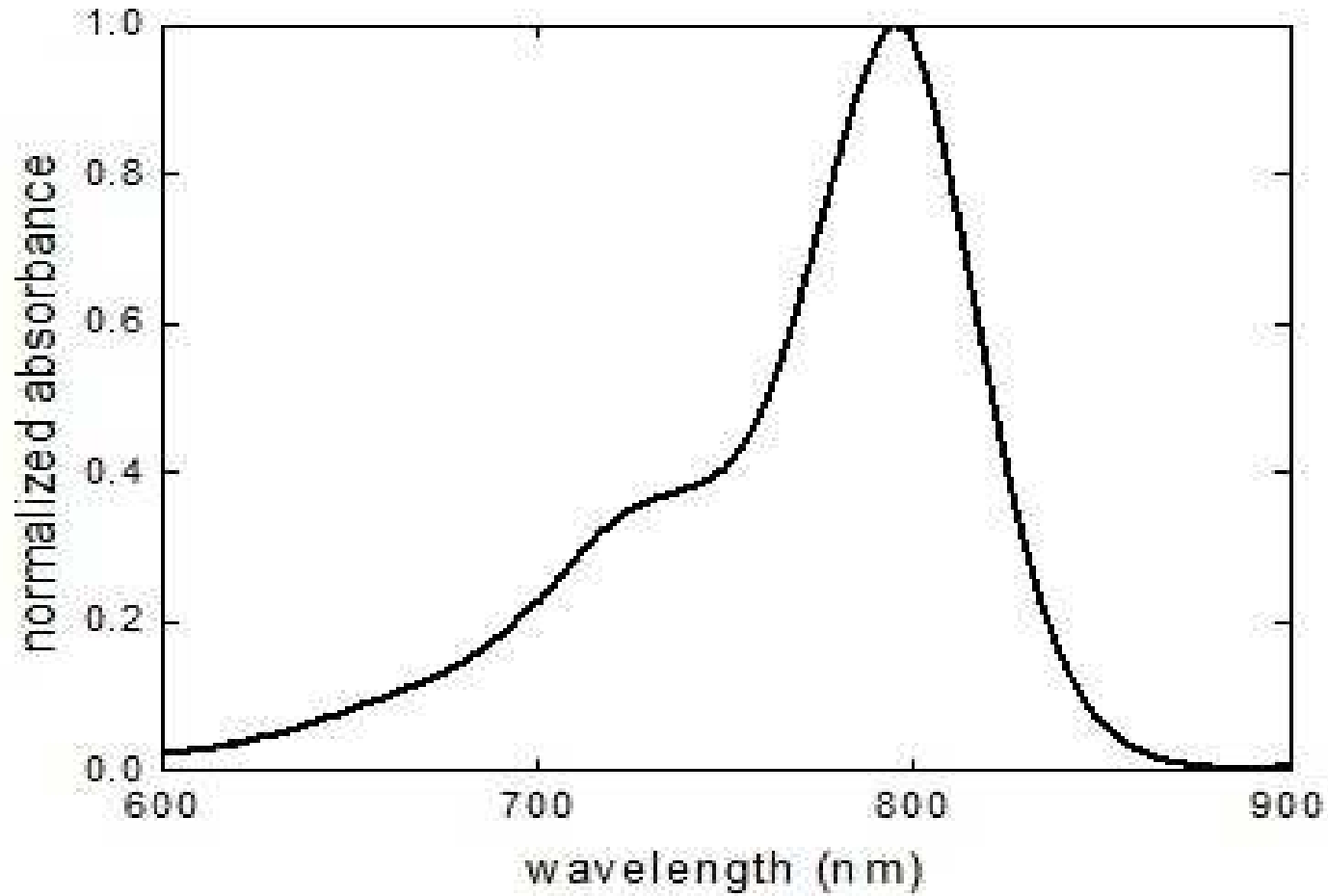
- Limited success by using red, blue and yellow lasers due to limited penetration depth (max. 2,5 cm for red laser)
- Limited tumor size: max 2,5 cm
- Risk of burning and ulceration due to overdose
- Light sensitivity
- Low success rate for liver and bone metastases
- No success in treatment of brain tumors



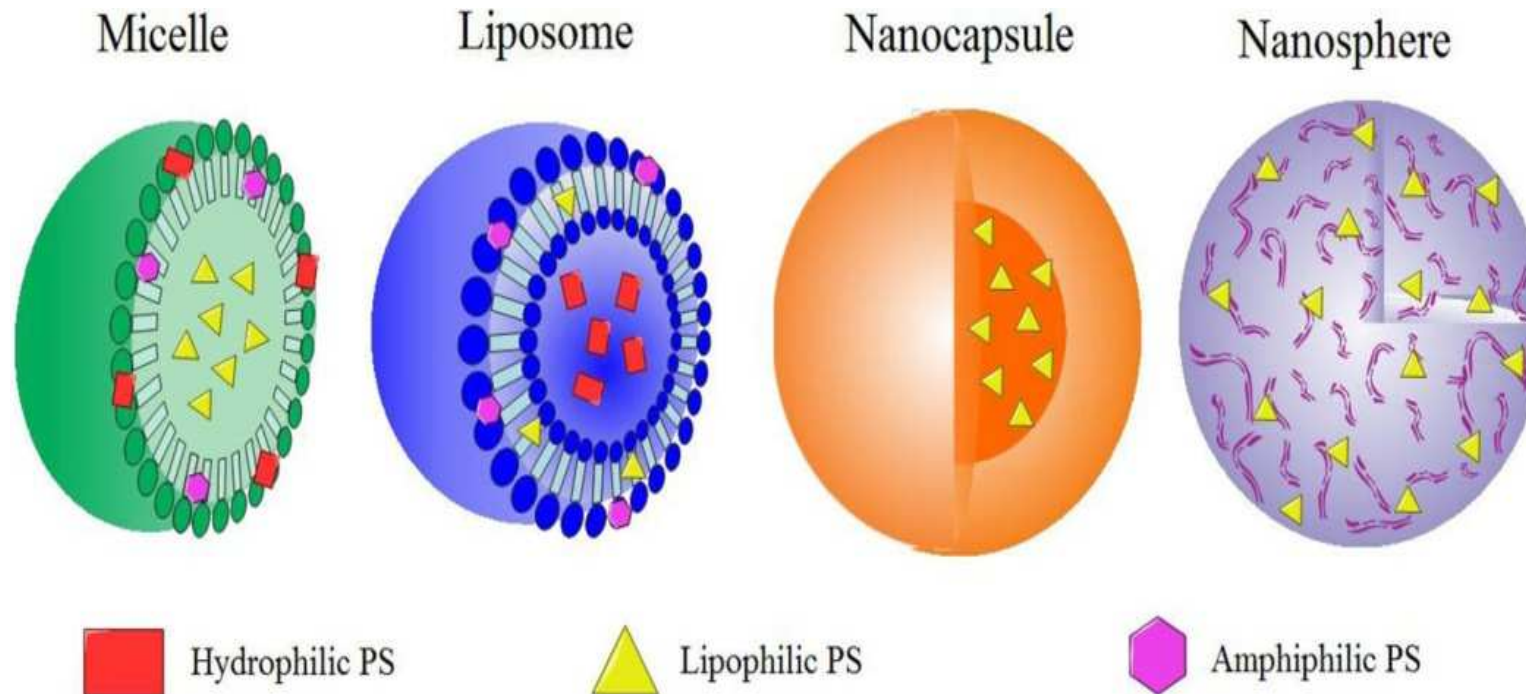
7. Systemic and Interstitial PDT with Liposomal Indocyaninegreen (ICG)



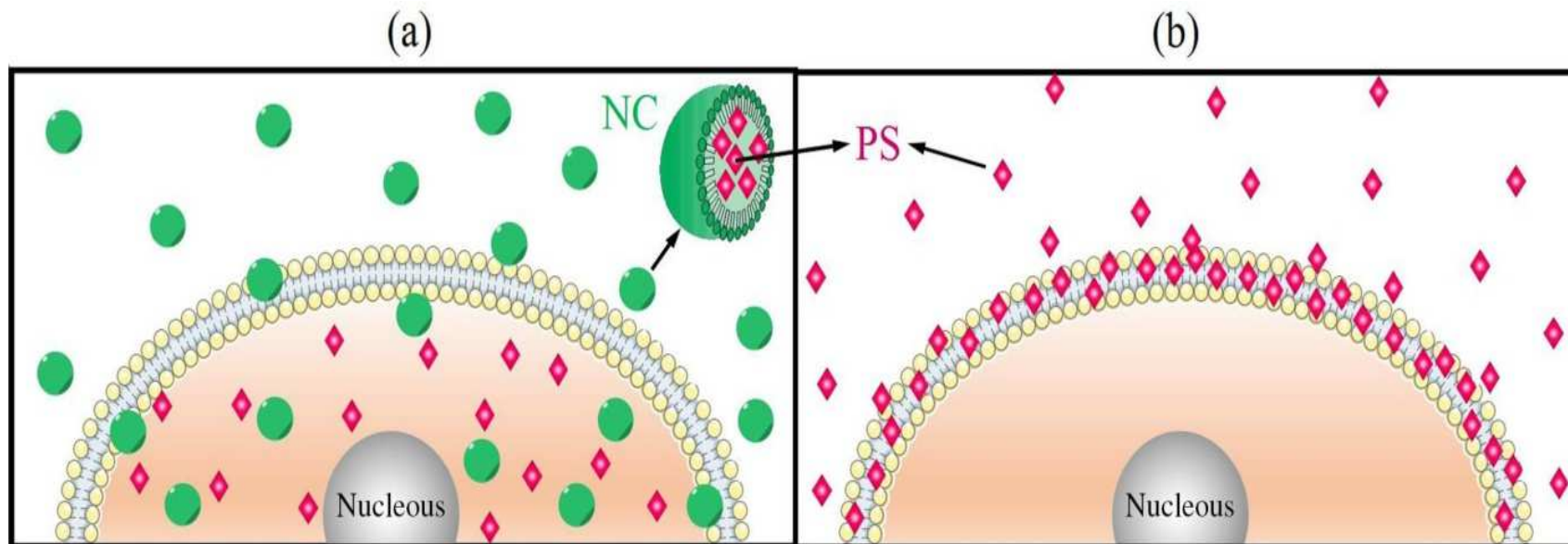
Absorption Spectrum of Indocyaninegreen:



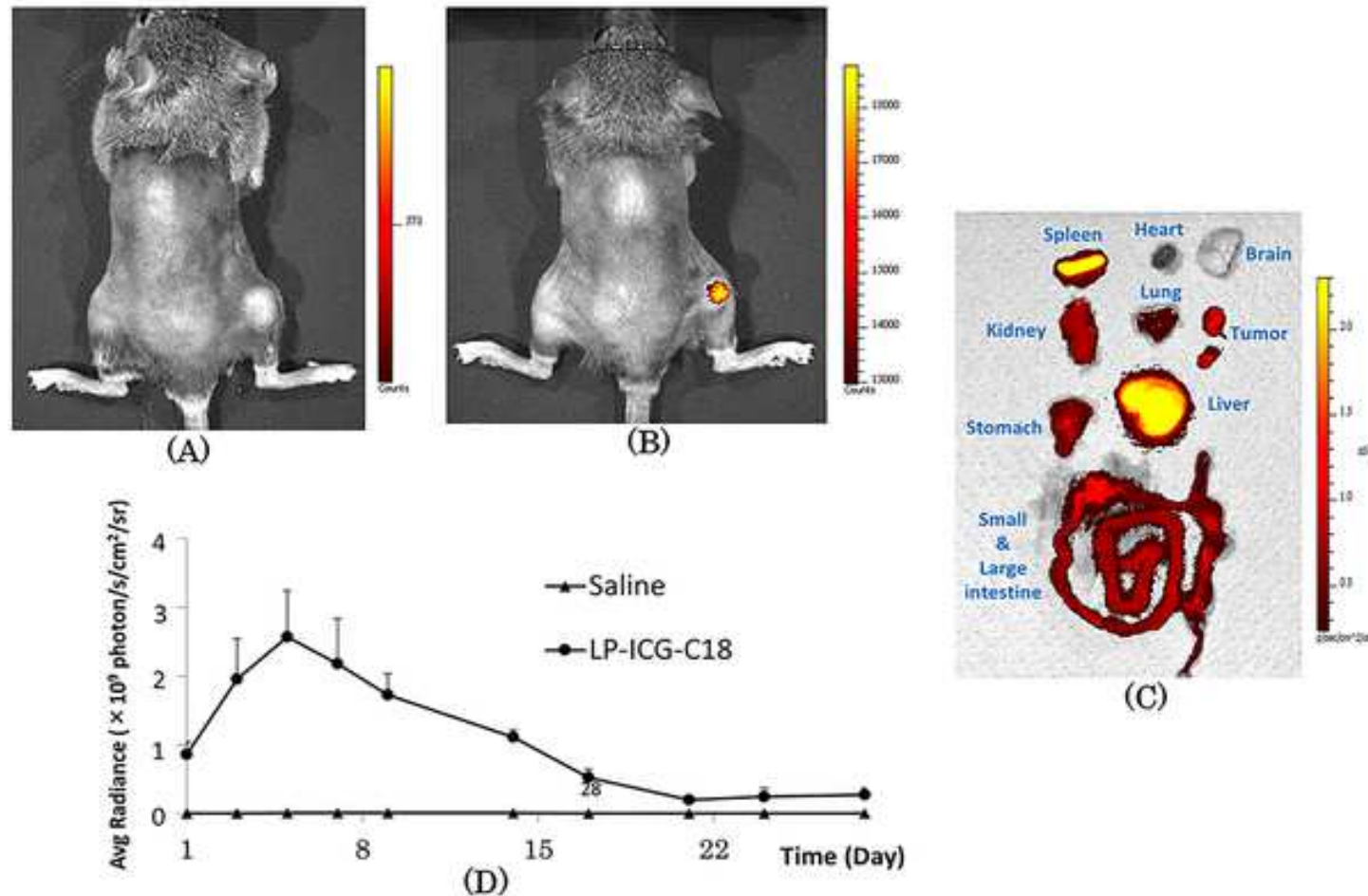
Nanoparticles for Transport of Photosensitizers:



Cellular Integration of a Lipophile Photosensitizer:



Pharmacokinetics of Lip-ICG:



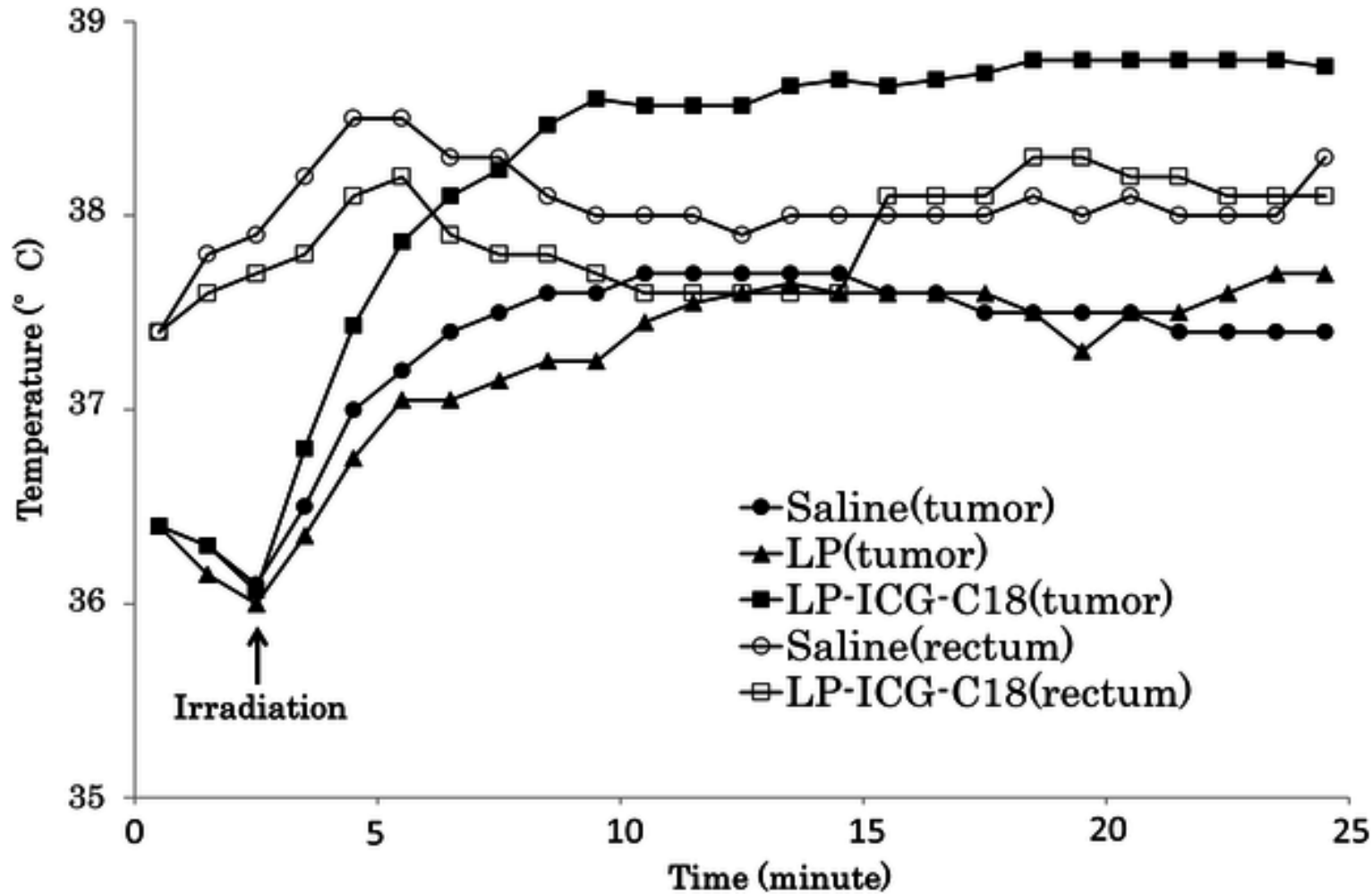
NIR fluorescence images of tumor bearing mice 24 hours after injection of (A) saline and (B) LP-ICG-C18. (C) NIR fluorescence images of the organs 24 hours after injection of LP-ICG-C18. (D) Photon count of tumor bearing mice.

Maruyama T, Akutsu Y, Suganami A, Tamura Y, Fujito H, et al. (2015) Treatment of Near-Infrared Photodynamic Therapy Using a Liposomally Formulated Indocyanine Green Derivative for Squamous Cell Carcinoma. PLoS ONE 10(4): e0122849. doi:10.1371/journal.pone.0122849 <http://journals.plos.org/plosone/article?id=info:doi/10.1371/journal.pone.0122849>

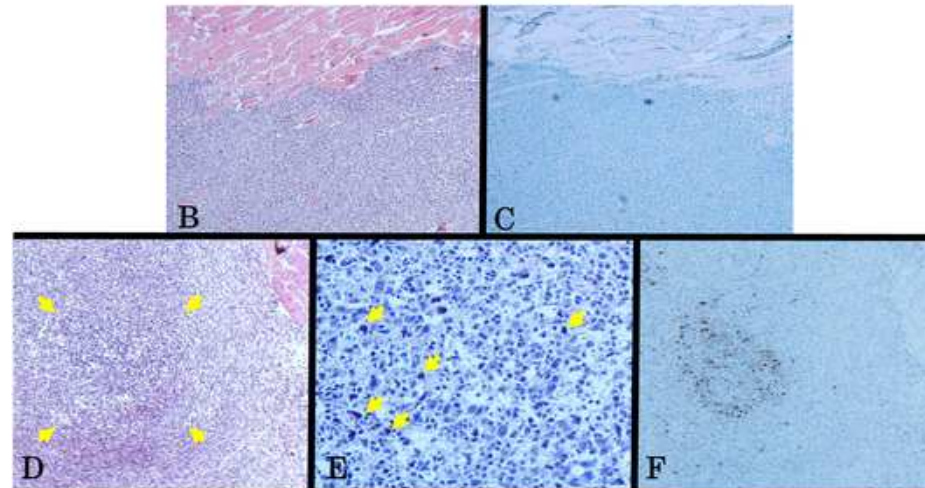
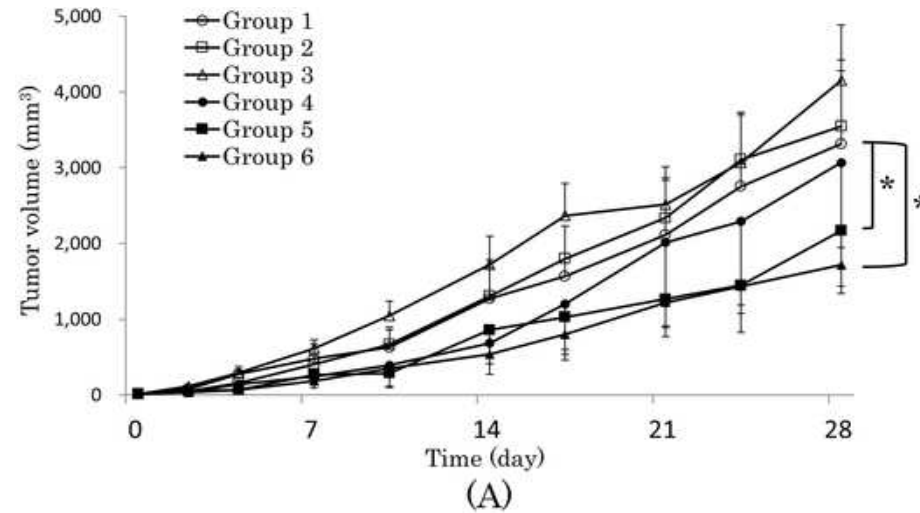
Selective “Over-Heating” of Tumor Tissue by Infrared Stimulated Indocyaninegreen:

- ICG absorbs infrared light of 810 nm
- Infrared light has the highest penetration depth into tissue
- Besides activation of the ICG with production of **singlet oxygen** tumor tissue will be warmed up (**overheating effect**)
- This effect supports the photodynamic reaction without damage of surrounding healthy tissue
- The combination of overheating and PDT leads to an improved reaction with “tumor melting“
- This is called “**Photothermodynamic therapy (PTDT)**“ or “**Photothermoablation**“ of tumor tissue

The Transition of Temperature in the Tumor and Rectum during Irradiation:



Antitumor Effect of Lip-ICG-C18 in SCCVII Subcutaneous Mice Model:



Maruyama T, Akutsu Y, Suganami A, Tamura Y, Fujito H, et al. (2015) Treatment of Near-Infrared Photodynamic Therapy Using a Liposomally Formulated Indocyanine Green Derivative for Squamous Cell Carcinoma. PLoS ONE 10(4): e0122849. doi:10.1371/journal.pone.0122849
<http://journals.plos.org/plosone/article?id=info:doi/10.1371/journal.pone.0122849>

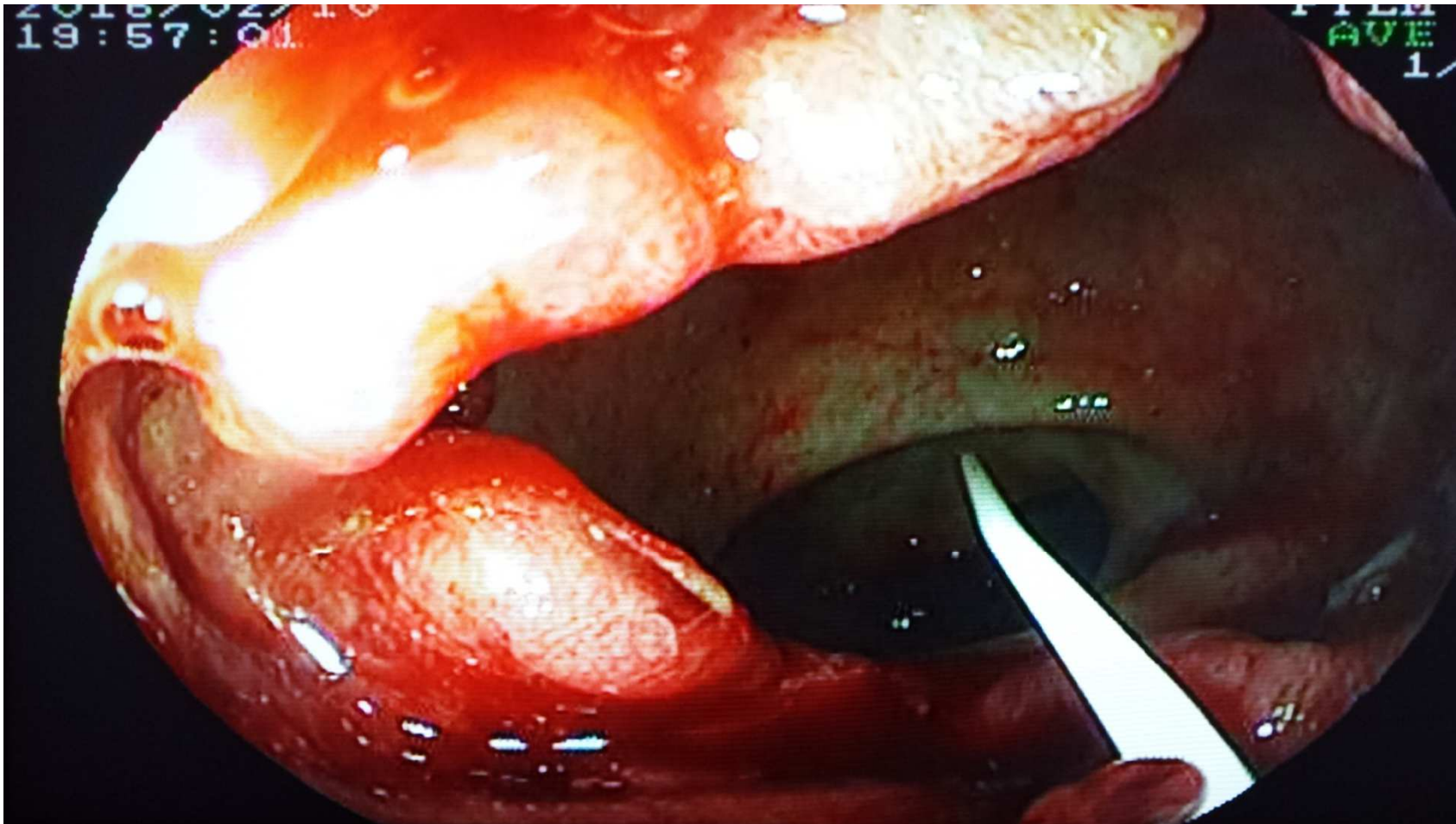
Liposomal Indocyaninegreen Infusion:



Lip-ICG-PDT of Rectal Cancer:



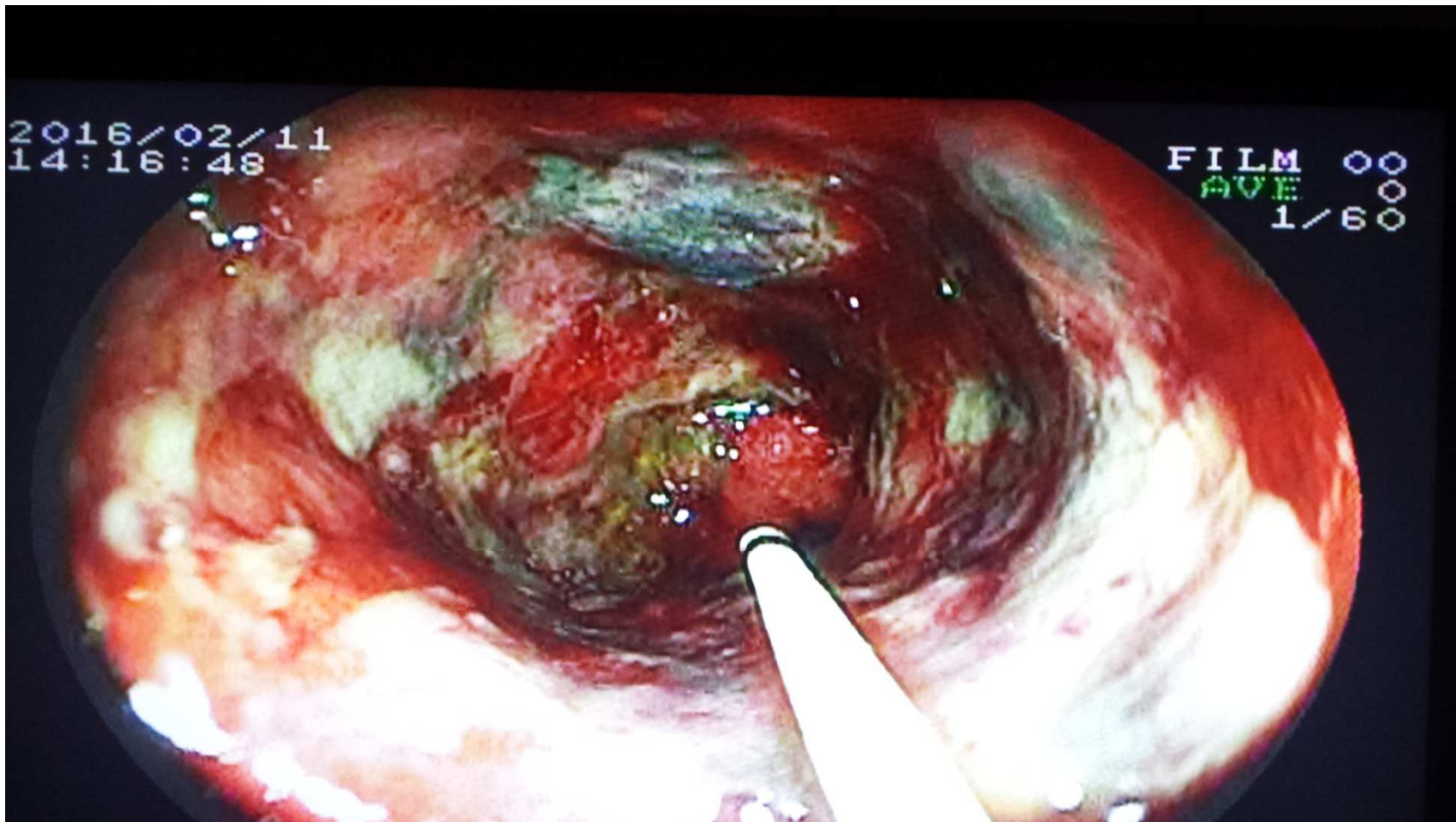
Lip-ICG-PDT of Rectal Cancer:



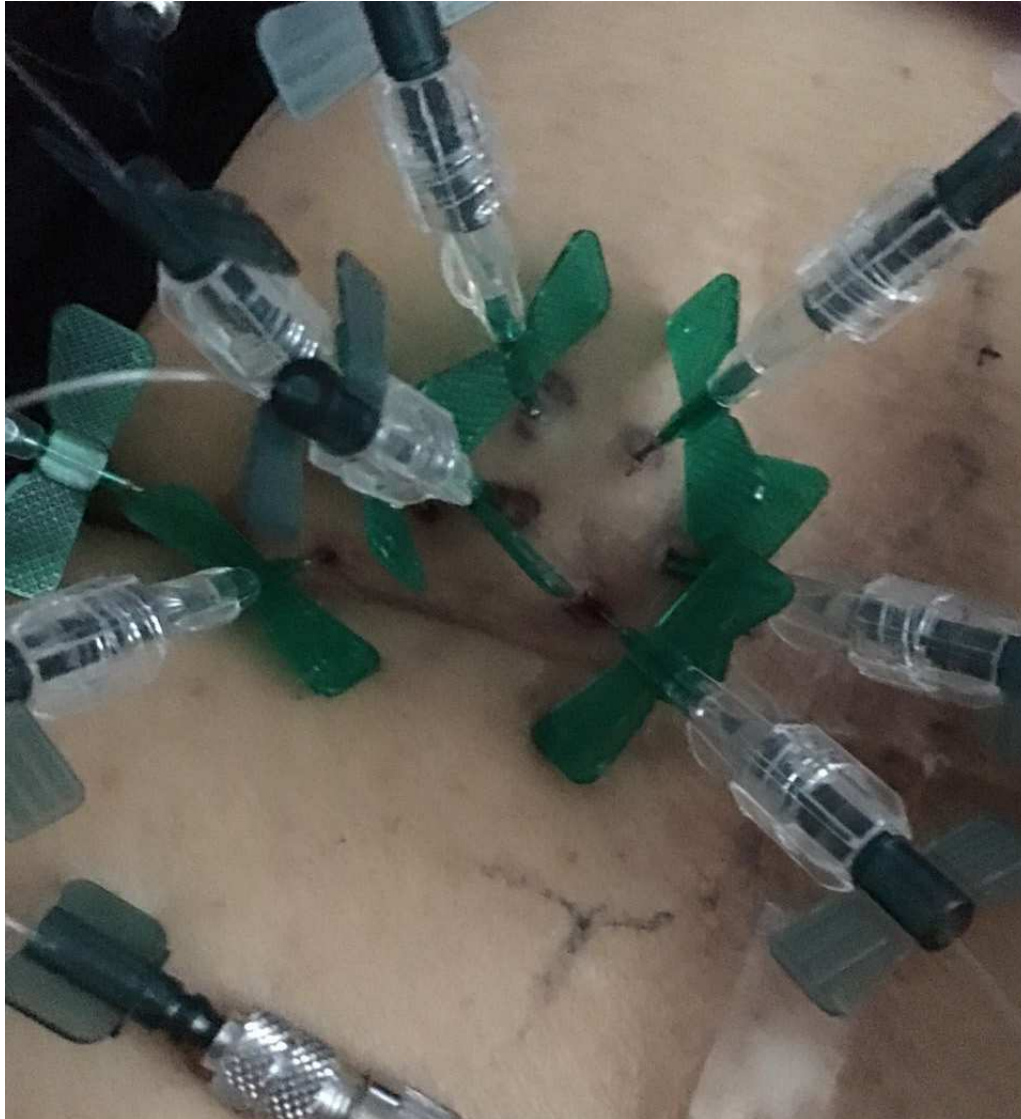
Lip-ICG-PDT of Rectal Cancer:



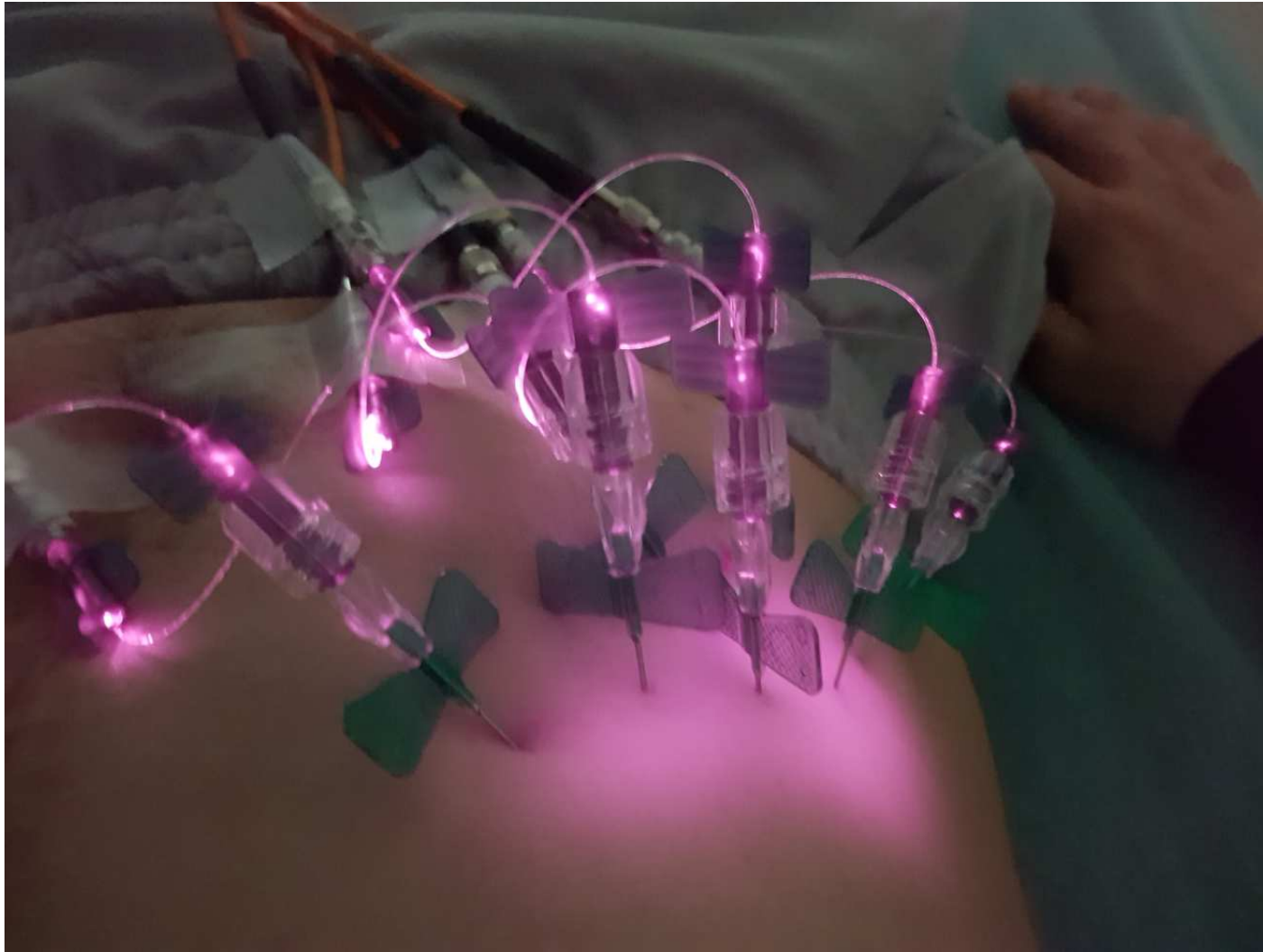
Lip-ICG-PDT of Rectal Cancer:



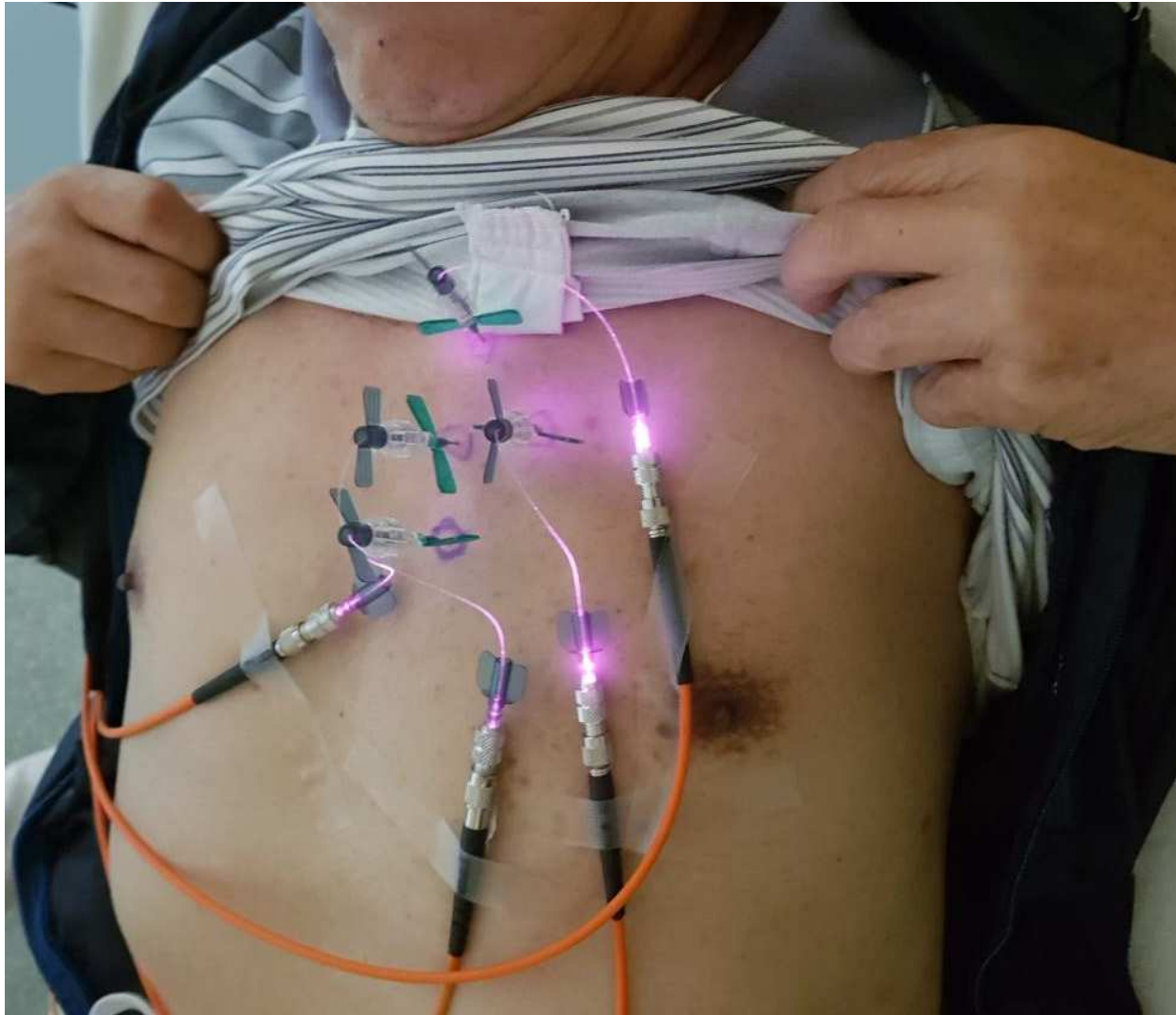
Interstitial PDT with Lip-ICG:



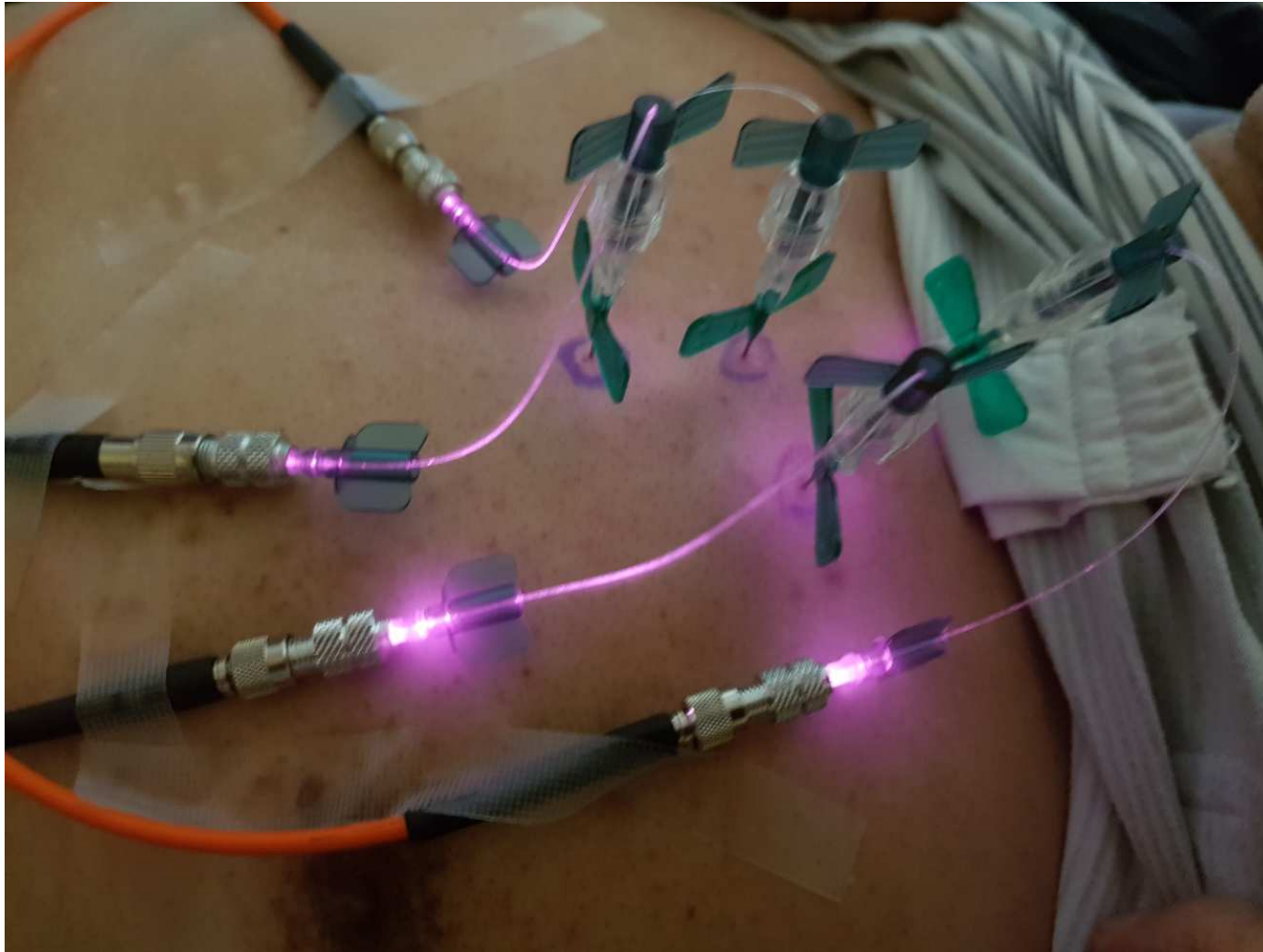
Interstitial PDT with Lip-ICG and Infrared Laser:



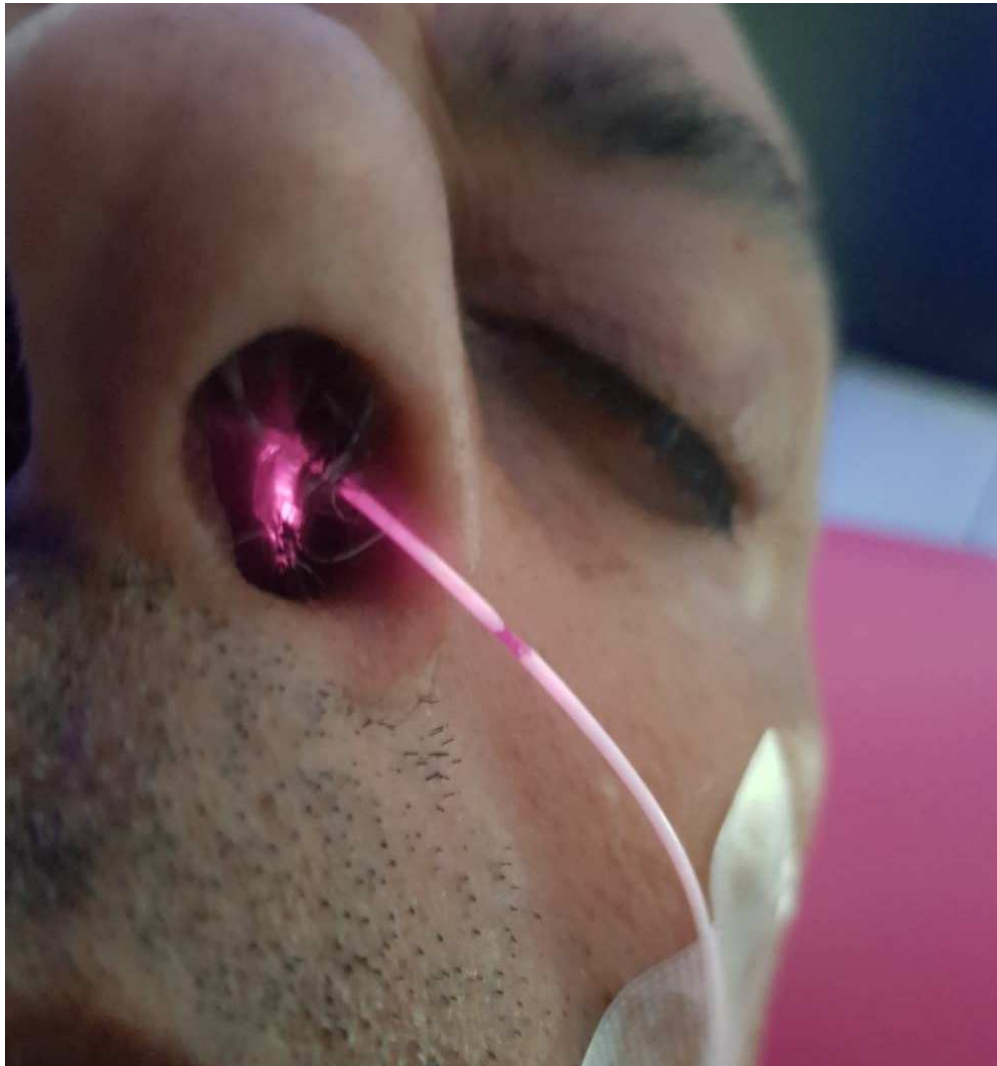
Interstitial PDT with Lip-ICG of Lung Cancer:



Interstitial PDT with Lip-ICG of Leiomyosarcoma:



Interstitial PDT with Lip-ICG of Nasopharyngeal Cancer :







Absorption Spectra of different Photosensitizers:

- Chlorin E6 660 nm Red
- Indocyaninegreen 810 nm Infrared
- Hypericin 589 nm Yellow
- Curcurmin 447 nm Blue
- Riboflavin 447 nm Blue

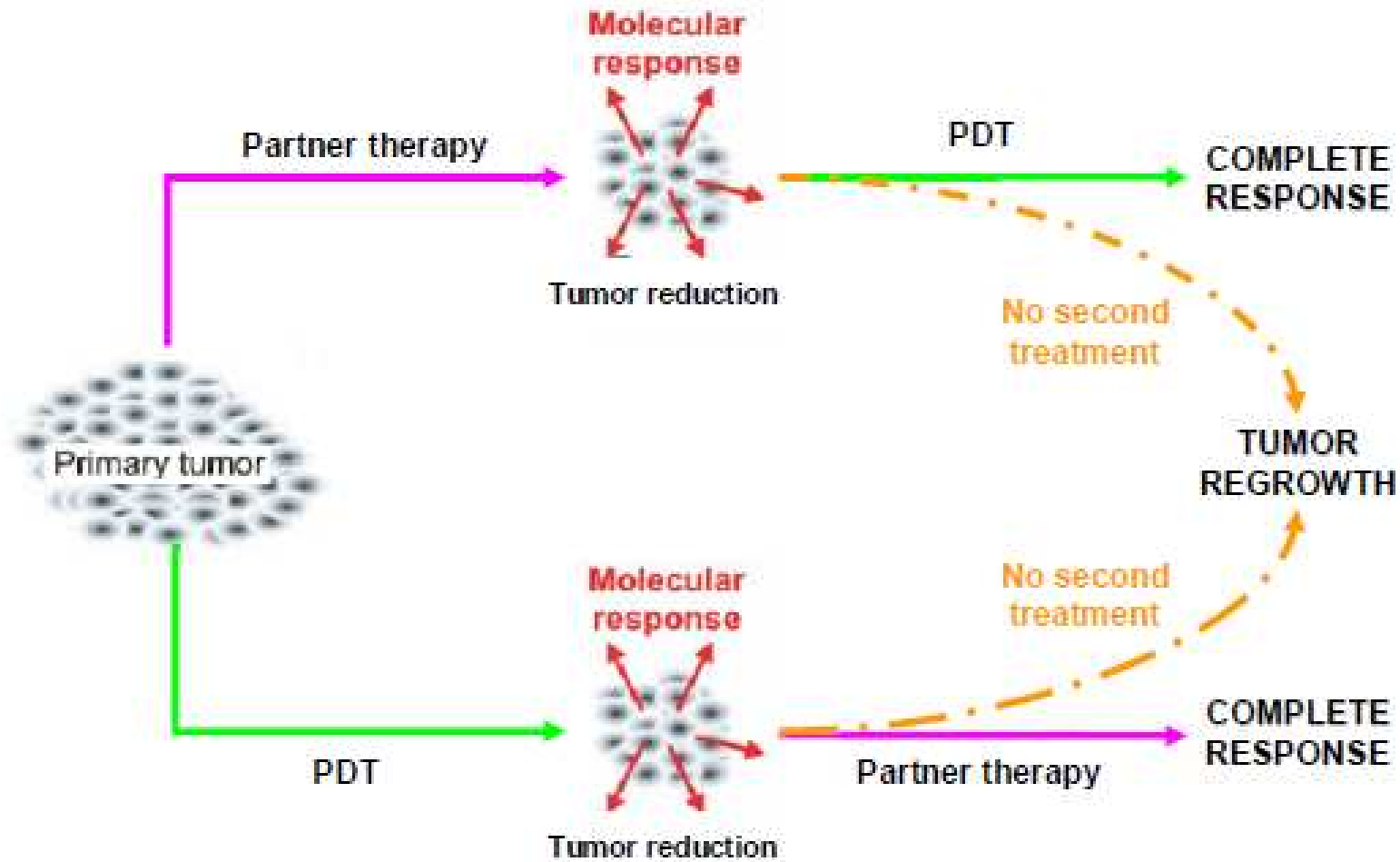
8. Cancer Combination Therapy



Cancer Combination Therapy:

- Small tumors can be treated with PDT alone
 - **However, PDT alone is not effective in**
 - big tumors
 - widely spreading tumors
 - multiple metastases
- Here we need a combination of PDT with other anti-cancer drugs and methods.**

Cancer Combination Therapy:



Cancer Combination Therapies:

1. Combination with traditional chemotherapy
2. **Combination with light sensitive chemodrugs (using chemodrugs as photosensitizers)**
3. **Combination with sonodynamic therapy (using photosensitizers and chemodrugs as sonosensitizers)**
3. Combination with antioxidants
4. Combination with antiangiogenesis inhibitors
5. Combination with Cox-2 inhibitors
6. Combination with antibodies
7. Combination with different natural compounds
8. Combination with immunotherapy

5-Fluorouracil as a Photosensitizer

MIHAIL LUCIAN PASCU¹, MIHAIL BREZEANU¹, LETITIA VOICU¹,
ANGELA STAIKU¹, BENONE CARSTOCEA² and RUXANDRA ANGELA PASCU²

*1National Institute for Lasers, Plasma and Radiation Physics,
Laser Department, P. O. Box MG-36, Bucharest – Magurele;
2Central Military Hospital, Ophthalmology Clinic, Bucharest, Romania*

Abstract

5-FU exhibits a high fluorescence after irradiation with UV-vis light. An enhancement of the cytostatic activity of 5-FU under UV-vis irradiation was observed on an in vivo experimental model.

The Tautomeric Forms of 5-FU:

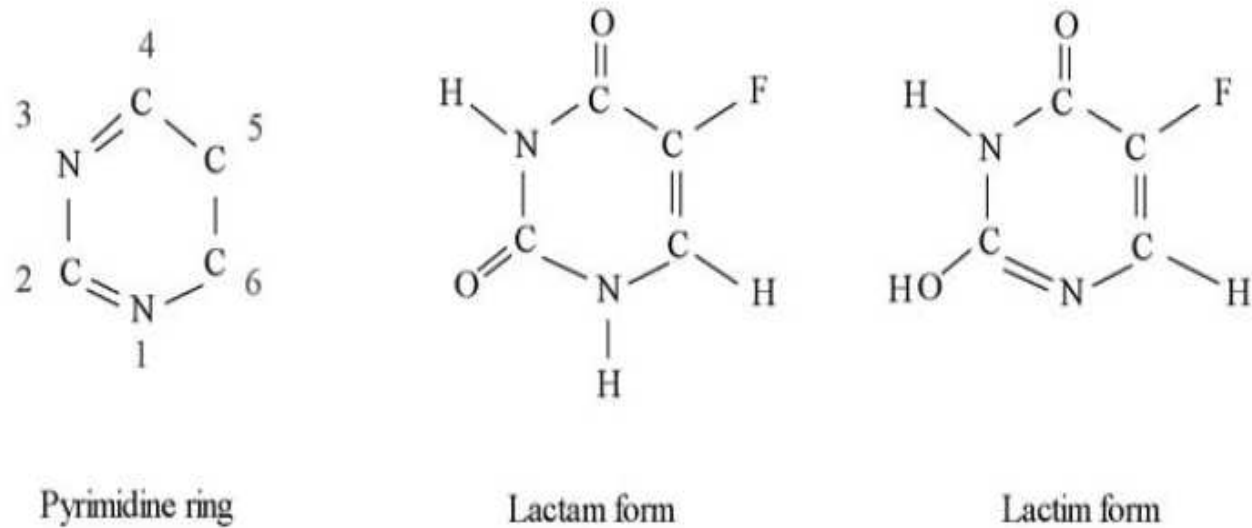
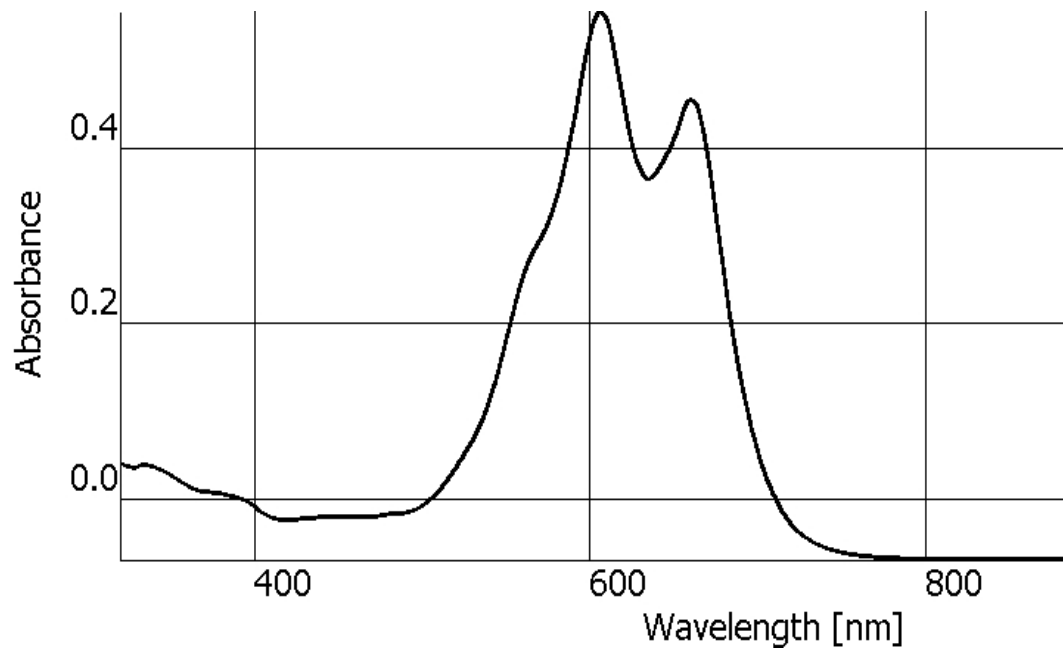
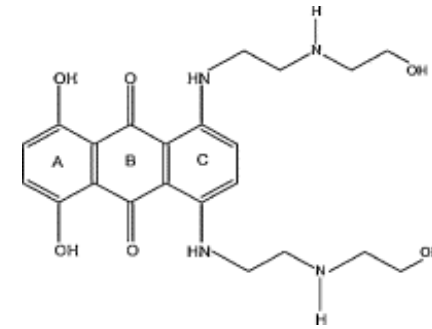


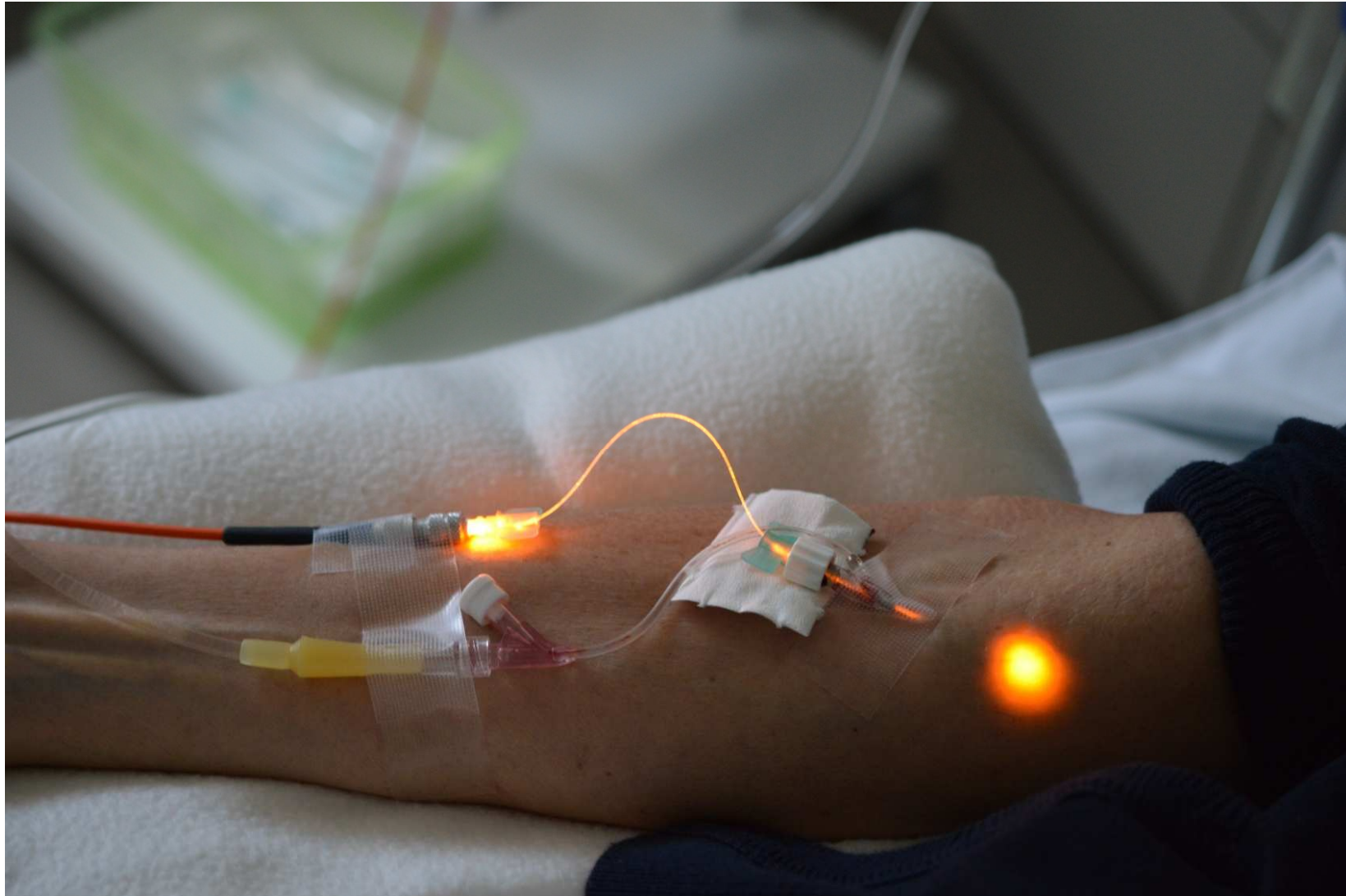
Figure 1. *The pyrimidine ring and the two 5-FU tautomers: lactam and lactim forms.*

Mitoxantron as Photosensitizer:

- Mitoxantron is a blue substance
- It is activated by yellow and red light
- It is a strong chemo-photosensitizer
- It is effective in multiple cancers

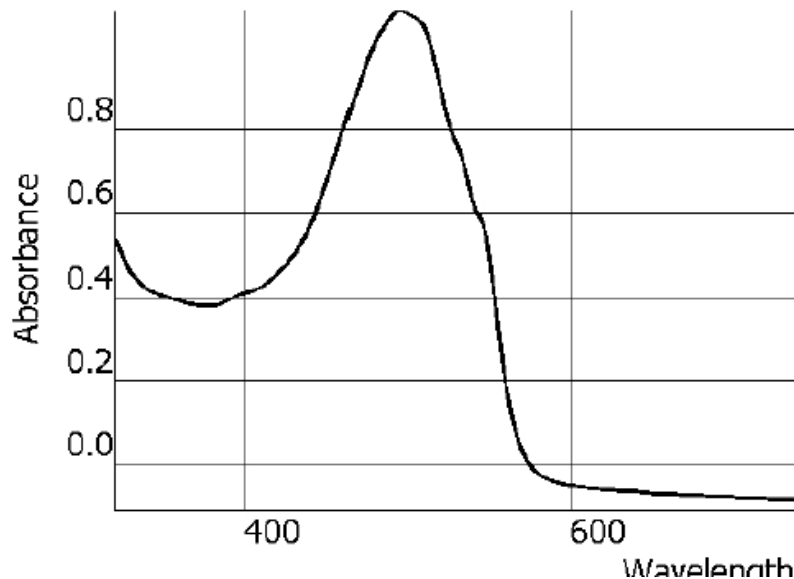
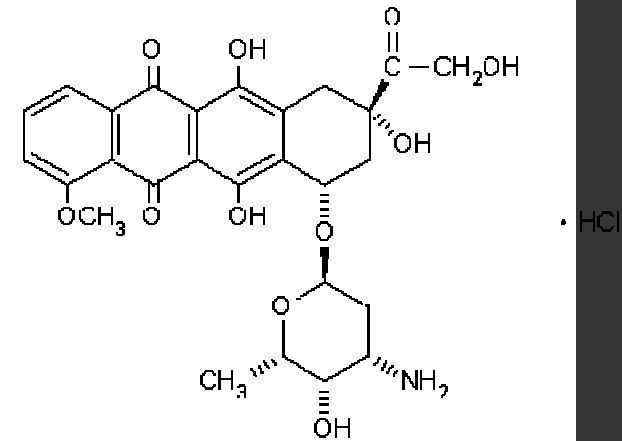


Mitoxantron Stimulation with Y-cannula

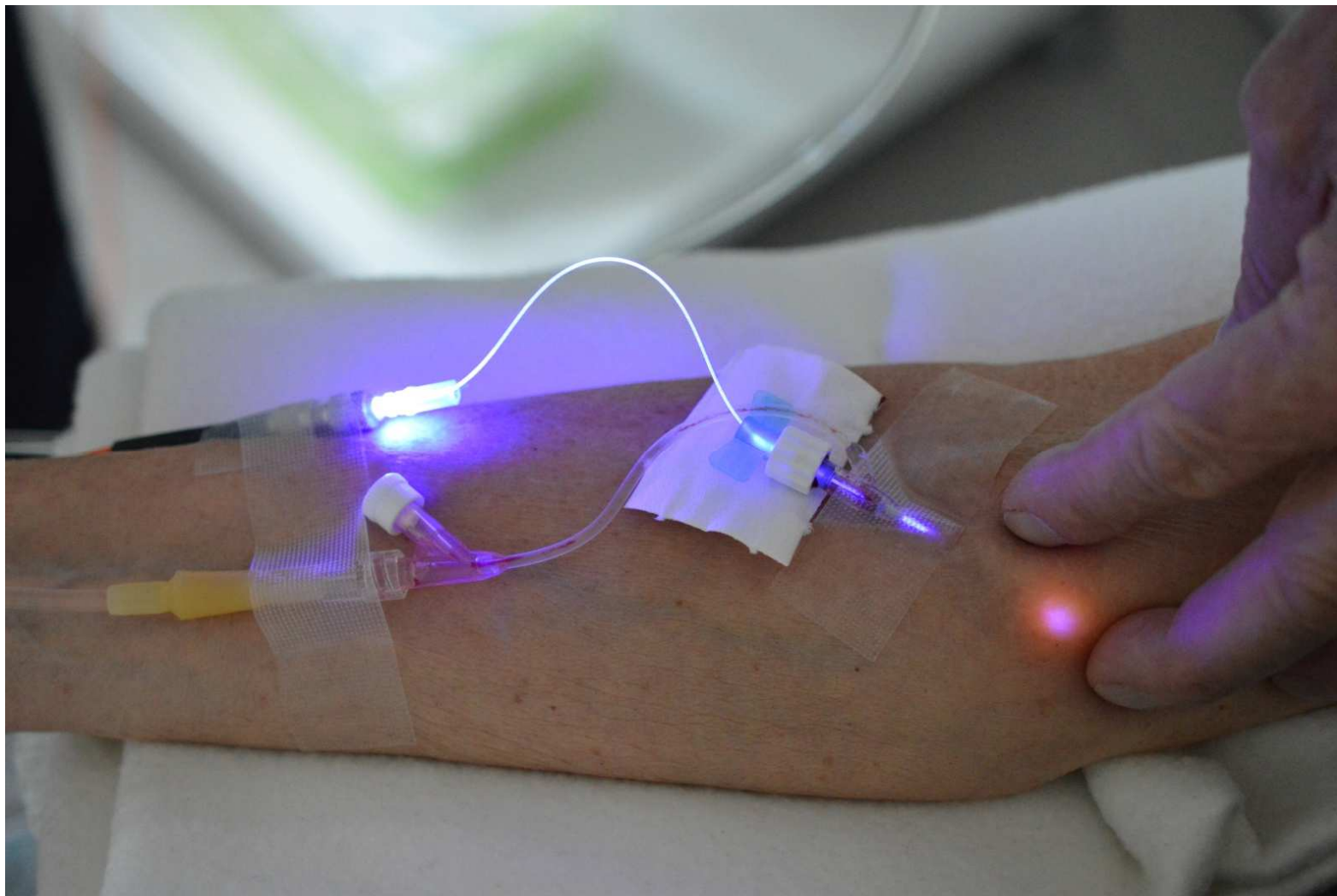


Doxorubicin (liposomal) as Photosensitizer:

- Doxorubicin is widely used for many different cancers (Anthracyclin antibiotics)
- It is an orange solution and is stimulated by blue-green laser light
- It can be enhanced by liposomal delivery (Doxil)



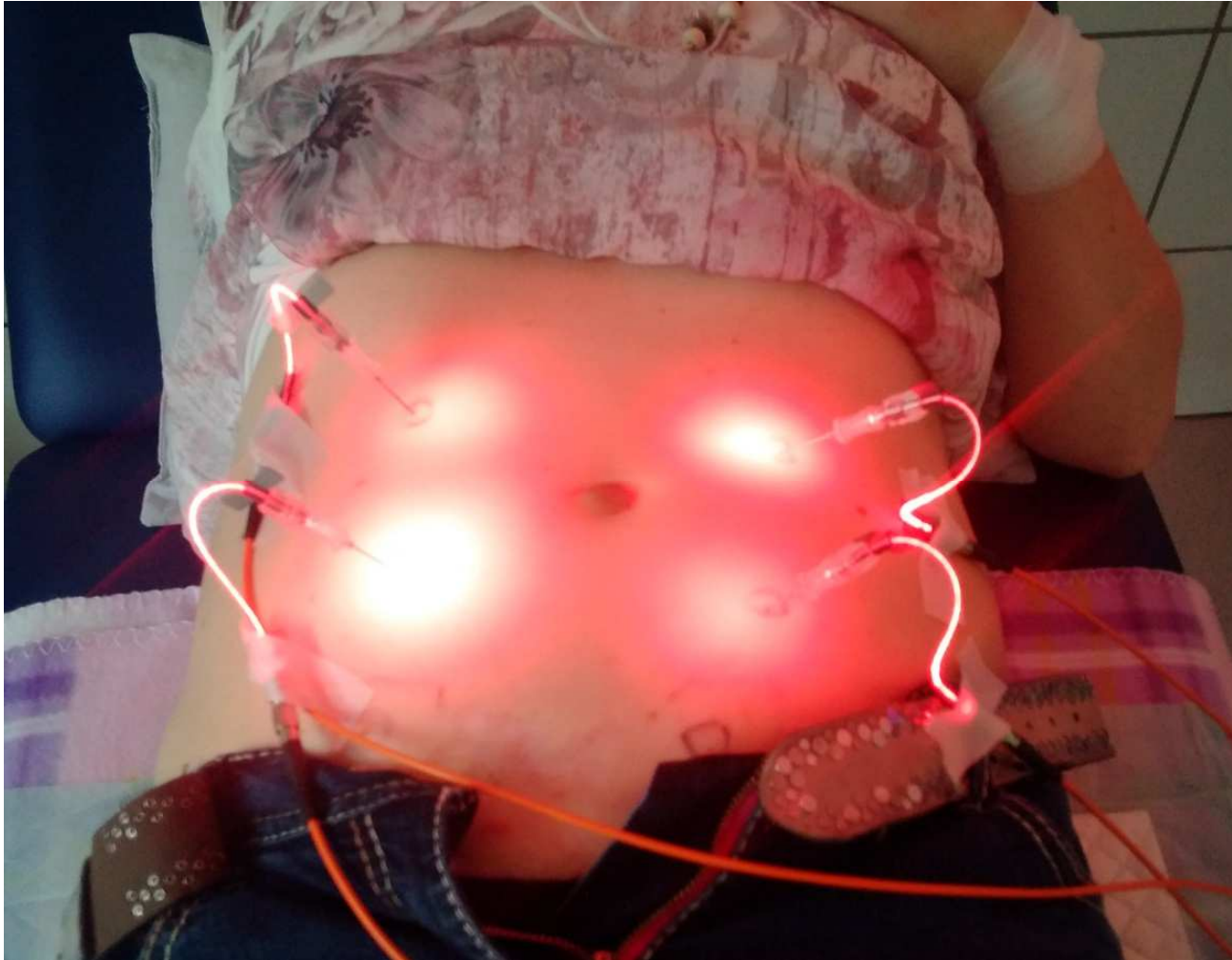
Doxorubicin Stimulation:



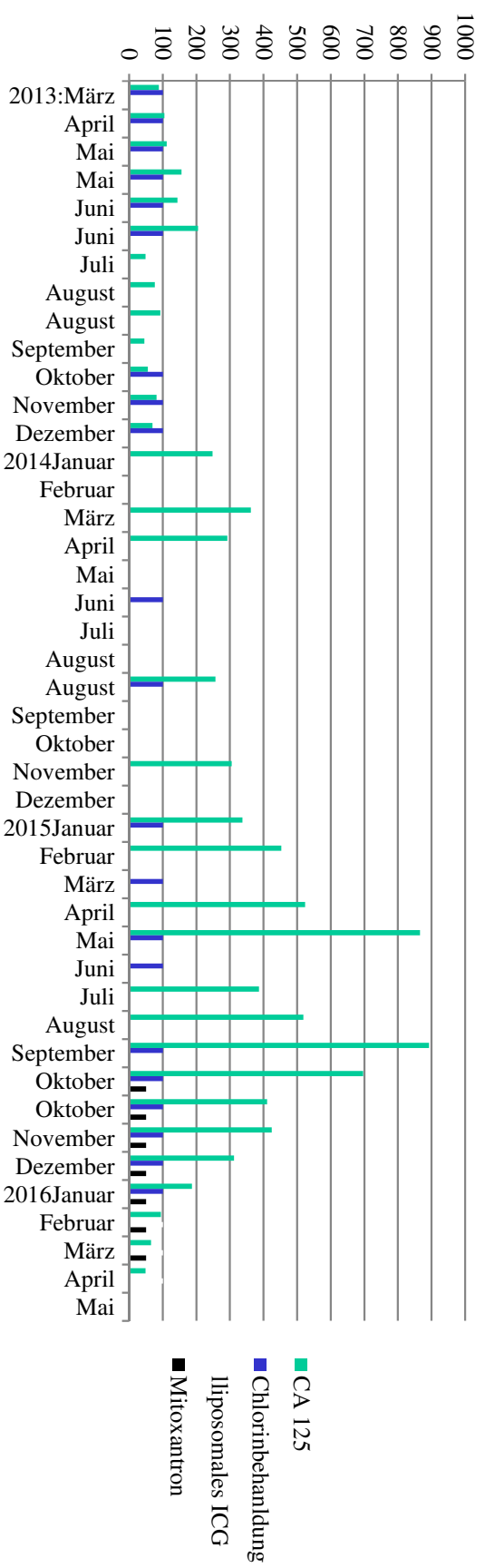
Case Report: Ovarian Cancer with Peritoneal Carcinosis (patient 45 y.):

- **First check: 19.03.13:** CA 125: 88,4 + ascites in Ultrasound
- **02.04.13: 1st PET-CT Scan:** Ovarial cancer, peritoneal carcinosis, ascites
- **18.06.13: 2nd PET-CT Scan:** Metastases (perihepatic and in pelvis), ascites
- **12.11.13: 1st MRI Abdomen:** Peritoneal carcinosis, subphrenic metastases and in liver and right kidney, ascites
- **08.01.15: 2nd MRI Pelvis:** Cervix carcinoma grade I, ascites, nodular peritoneal carcinosis, no lymph nodes or metastases in bones
- **27.08.15: 3rd PET-MRI scan:** Progredient peritoneal metastases (perihepatic and in pelvis), 2 new big tumors in ovarian area both sides, recurrence of the ovarian cancer, lymph nodes right epiphrenic

Case Report: Ovarian Cancer with Peritoneal Carcinosis:



Case Report: Ovarian Cancer with Peritoneal Carcinosis (patient 45 y.):



9. Sonodynamic Tumor Therapy (SDT)

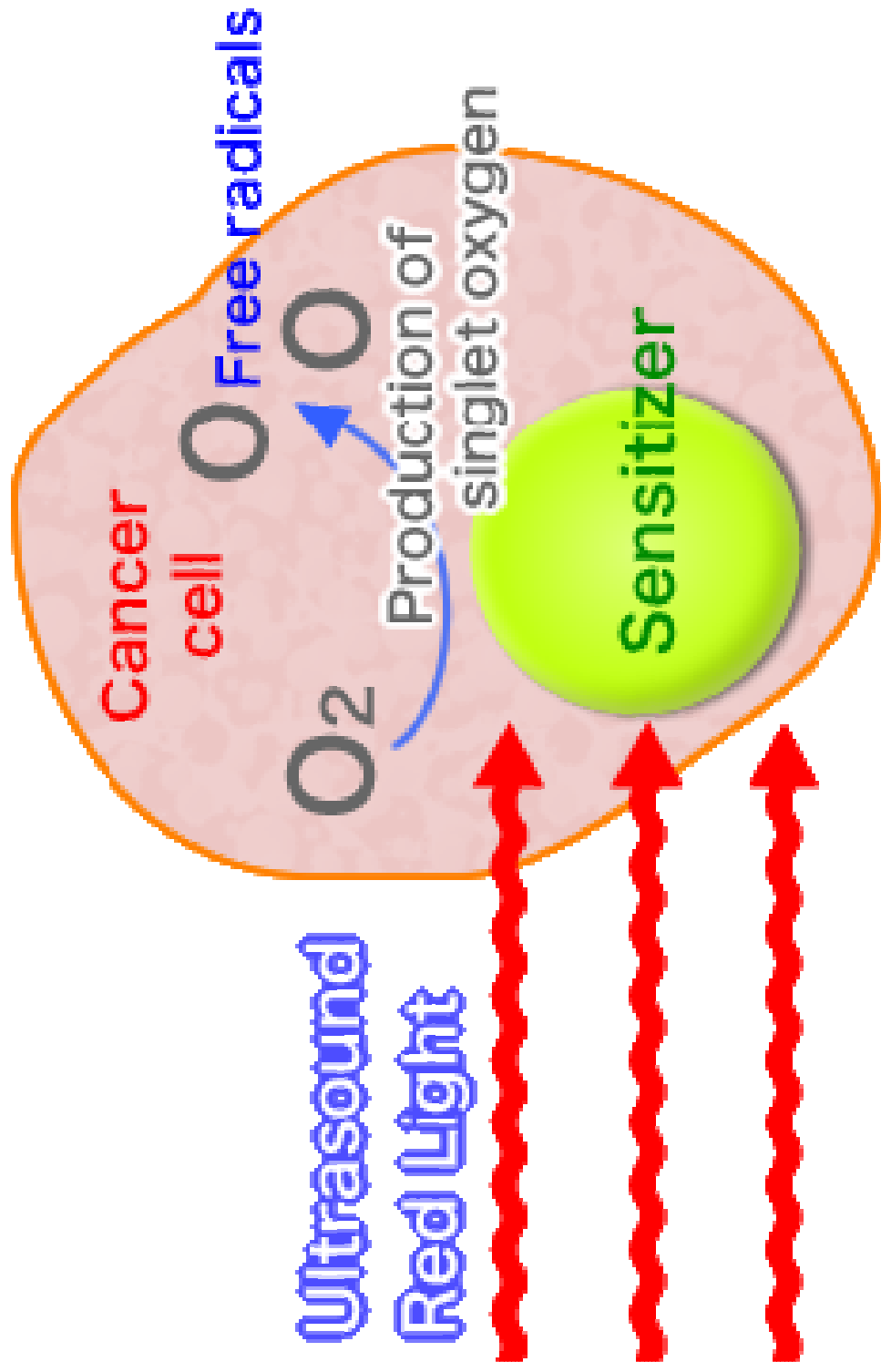


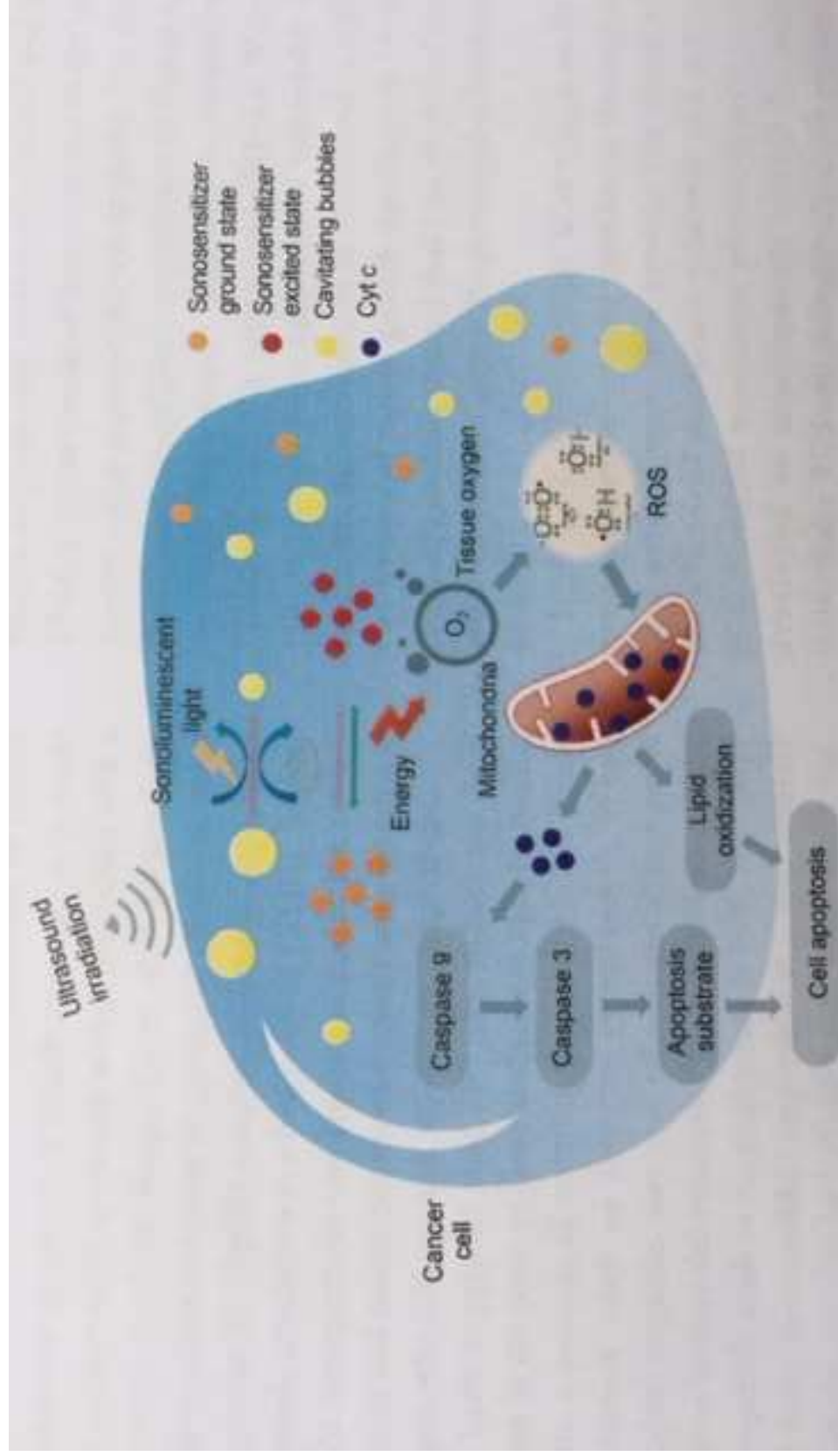
Sonodynamic Tumor Therapy:

- Sonodynamic therapy (SDT) is an emerging approach that involves a combination of low-intensity ultrasound and specialized chemical agents known as sonosensitizers
- Ultrasound can penetrate deeply into tissues and can be focused into a small region of a tumor to activate a sonosensitizer which offers the possibility of non-invasively eradicating solid tumors in a site-directed manner
- At the same time, the breath of evidence from SDT-based studies suggests that SDT is promising for cancer treatment

Ultrasound

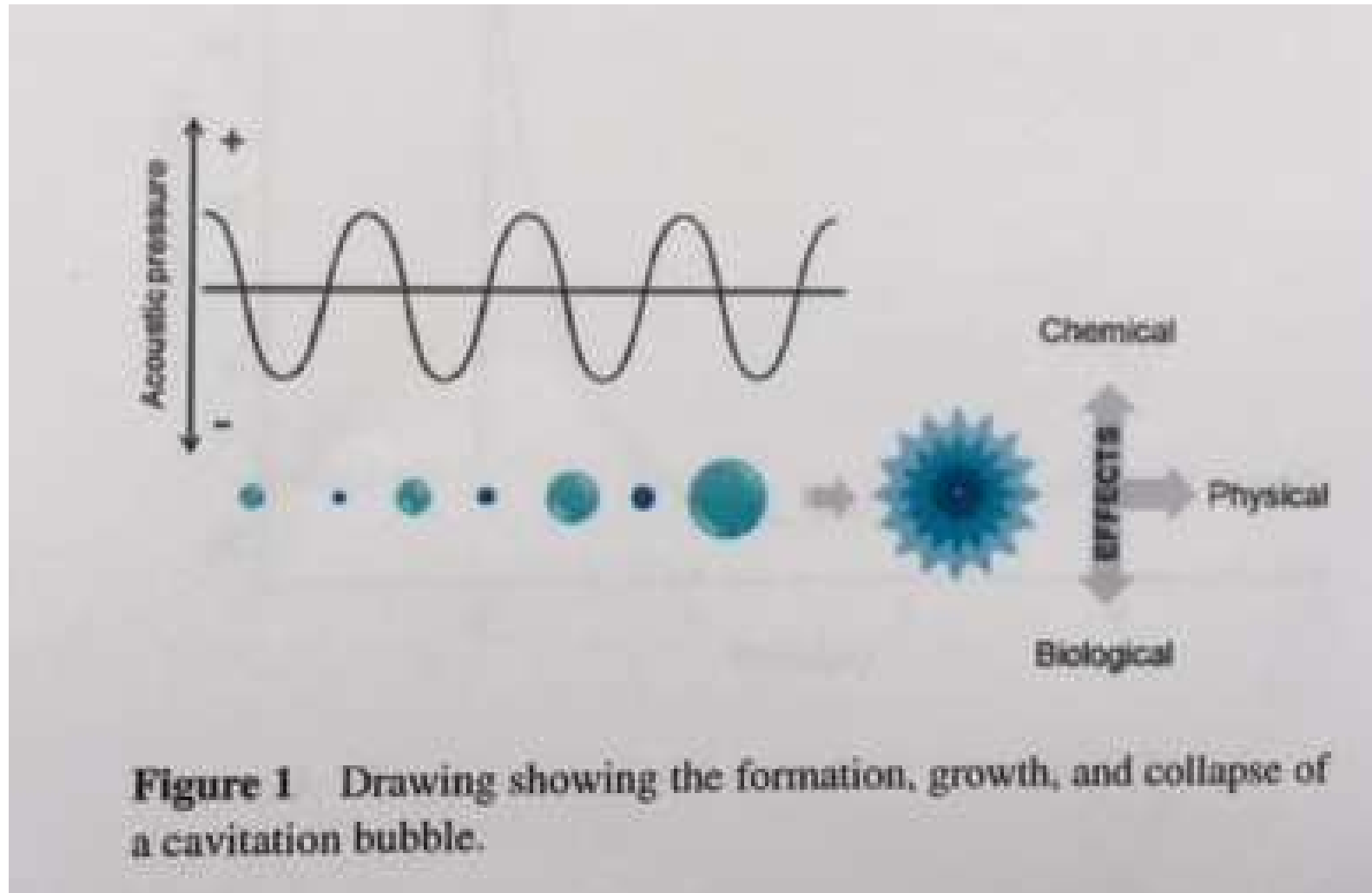
Red Light





Possible mechanisms of SDT. Ultrasound irradiation induces cavitation around the surface of cancer cells. The energy produced by the collapse of cavitating bubbles initiates the formation of sonoluminescent light in cancer cells. Thus, sonosensitizer is activated and returns to its ground state. As the activated sonosensitizer returns to the ground state, the released energy can be transferred to ambient oxygen to produce a large amount of ROS including oxygen ion, peroxide and singlet oxygen, which subsequently

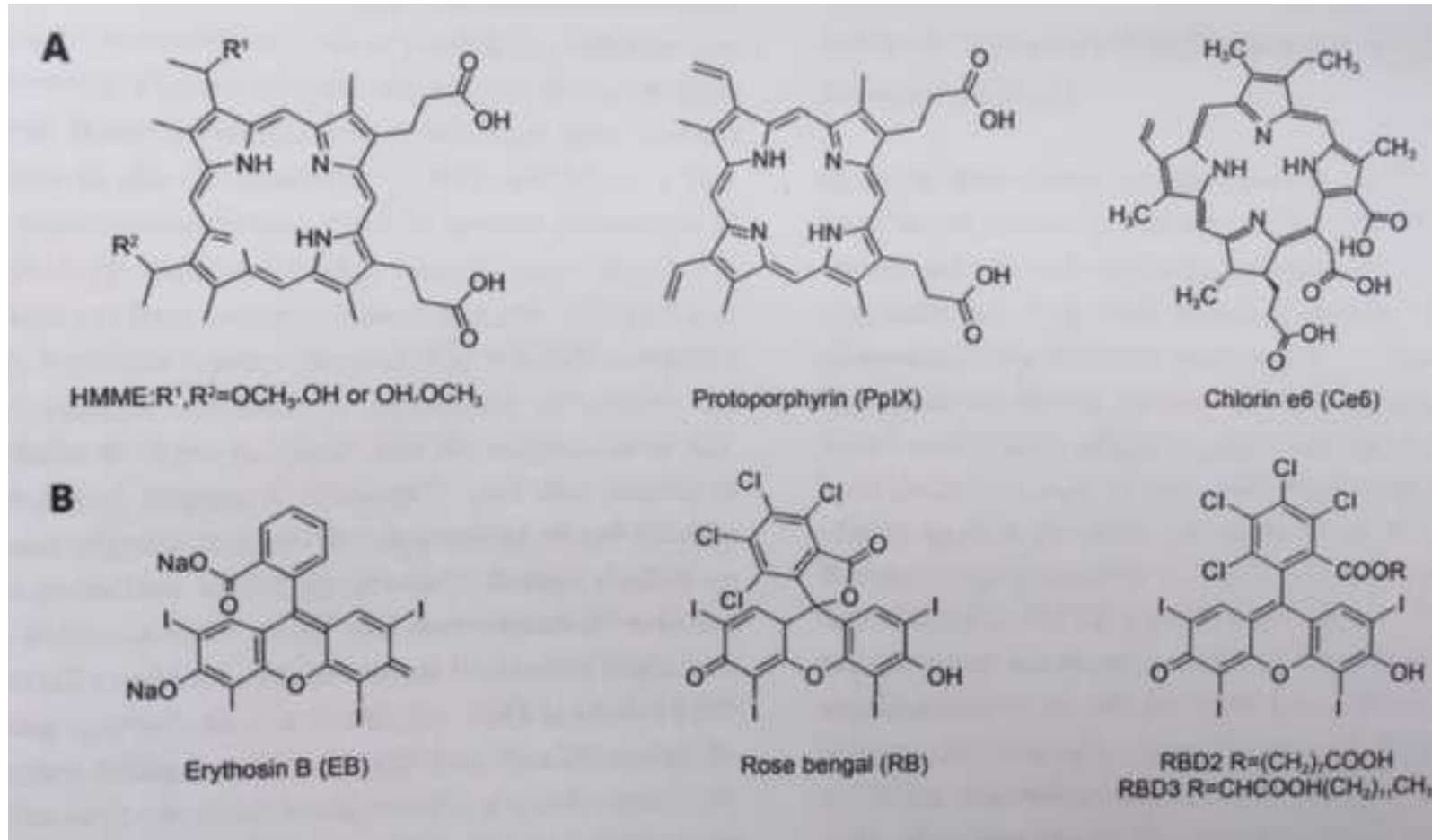
Cavitation Bubbles:



Ultrasound Application:

- Low power ultrasound (1 – 2,2 W/sqcm)
- High frequency ultrasound 300 – 500 W
- Ultrasound Shockwaves

Sonosensitizers:



Activated Cancer Therapy Using Light and Ultrasound - A Case Series of Sonodynamic Photodynamic Therapy in 115 Patients over a 4 Year Period

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¹The Dove Clinic, Twyford, Winchester, Hampshire, SO21 1NT, England; ²SonneMed, LLC, 10 Mt Vernon St, Suite 208, Winchester, MA 01890, USA

Abstract: Activated Cancer Therapy (ACT), also known as Sonodynamic Photodynamic Therapy (SPDT) is a novel therapeutic modality that utilises a non-toxic photosensitive agent with reported ultrasound-activated properties. SPDT has previously demonstrated significant tumour cell inhibition in animal studies. There has been much research into the efficacy of photodynamic therapy and development of the underlying mechanism of tumour cytotoxicity. Synergistic ultrasound activation represents a promising development to activated sensitiser therapy, as photo-activation is limited by access and penetration issues. Ultrasound has been demonstrated to activate a number of sono-sensitive agents allowing the possibility of non-invasive targeted treatment of deeper tumour sites than is currently achievable with photodynamic therapy. This case series of 115 patients with a variety of cancer diagnoses reports on experiences of this treatment over a 4 year period using sublingual administration of a new dual activation agent, Sonnelux-1, followed by a protocol of LED light and low-intensity ultrasound exposure. Initial clinical observation suggests SPDT is worthy of further investigation as an effective and well tolerated treatment for a wide variety of primary and metastatic tumours, including those refractory to chemotherapy.

Key Words: Sonodynamic therapy, photodynamic therapy, activated cancer therapy, ultrasound activated therapy, metastatic cancer, sonnelux-1, dove clinic, sonnemed.

Low Power Ultrasound (0,2 – 2,2W/sqcm):



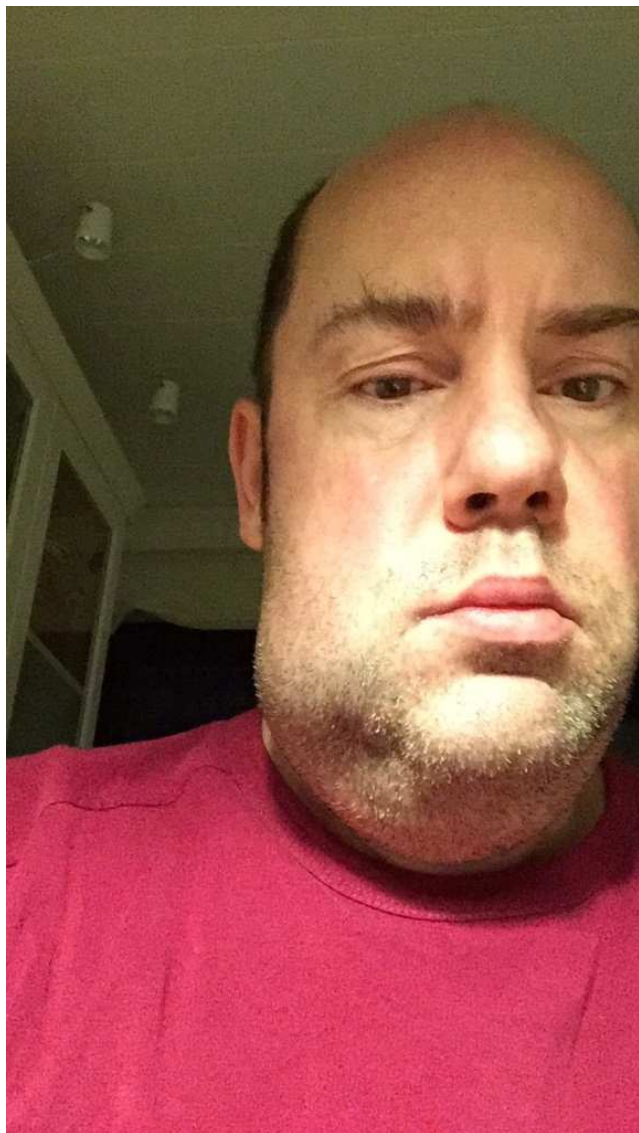
High Frequency Ultrasound Device:

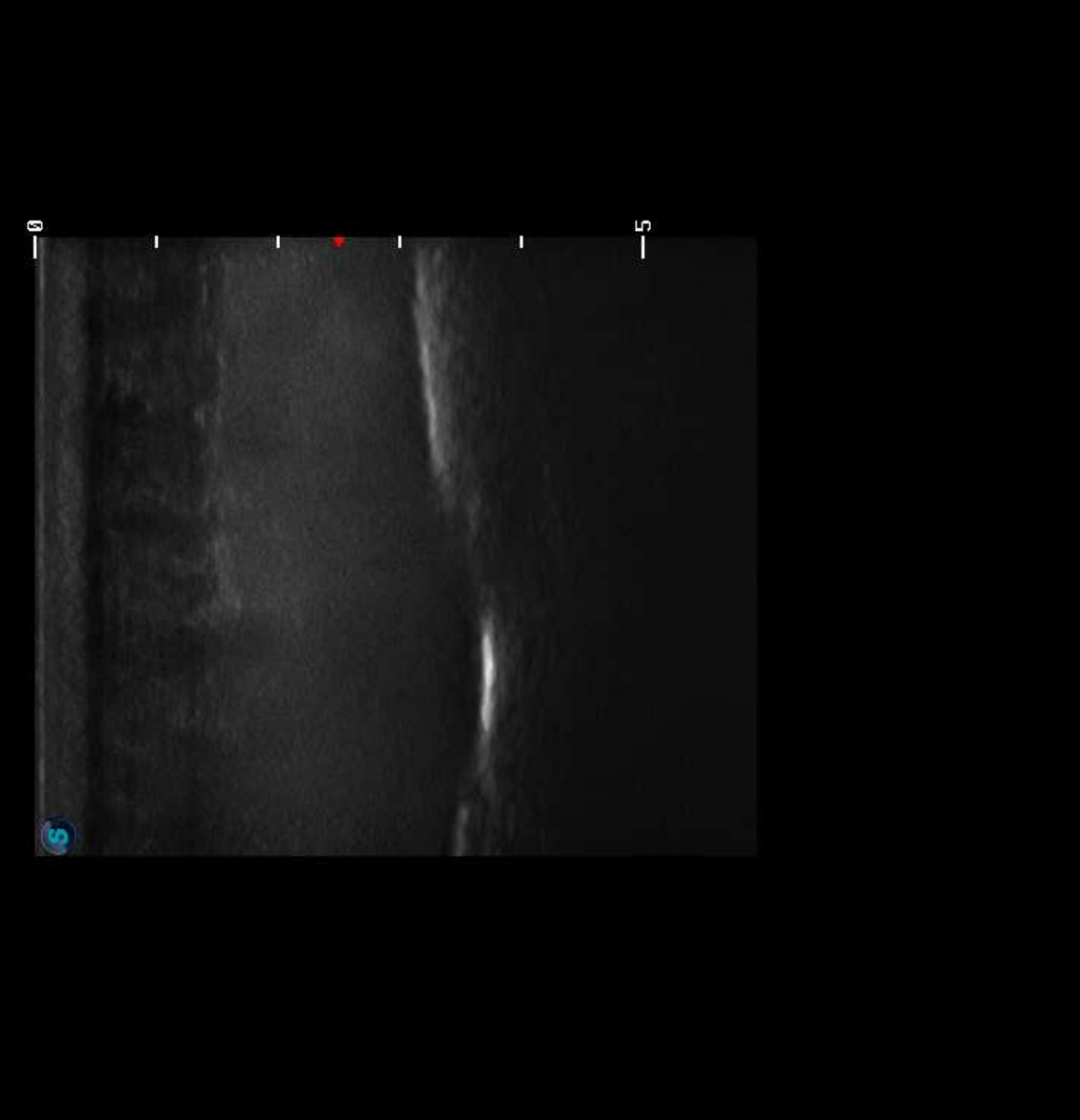


Ultrasound Shockwave Device:

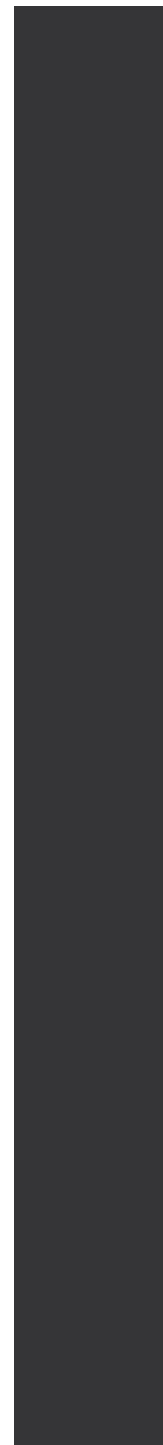


Case Report: B-cell Lymphoma





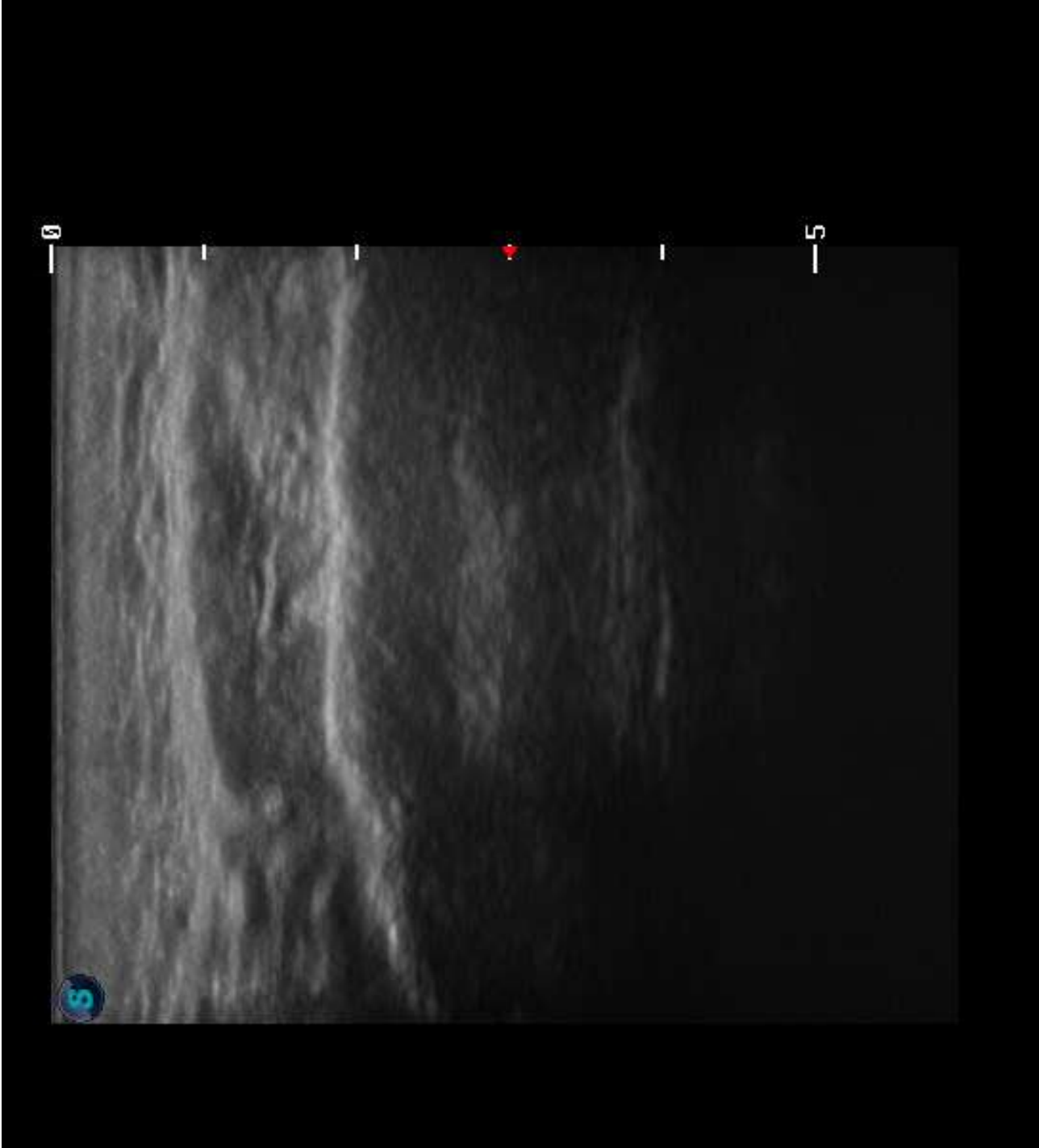
Case Report: B-cell Lymphoma

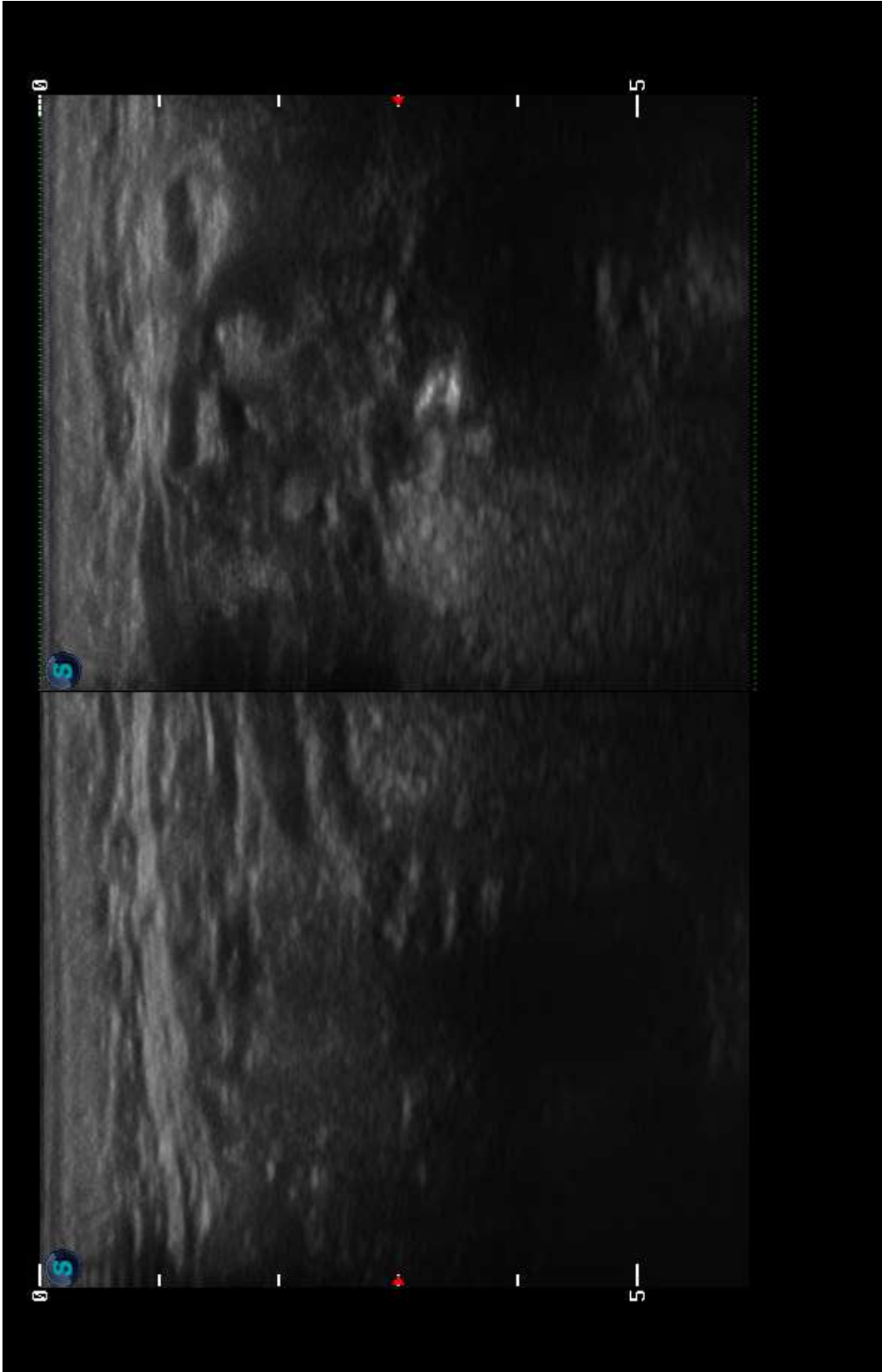




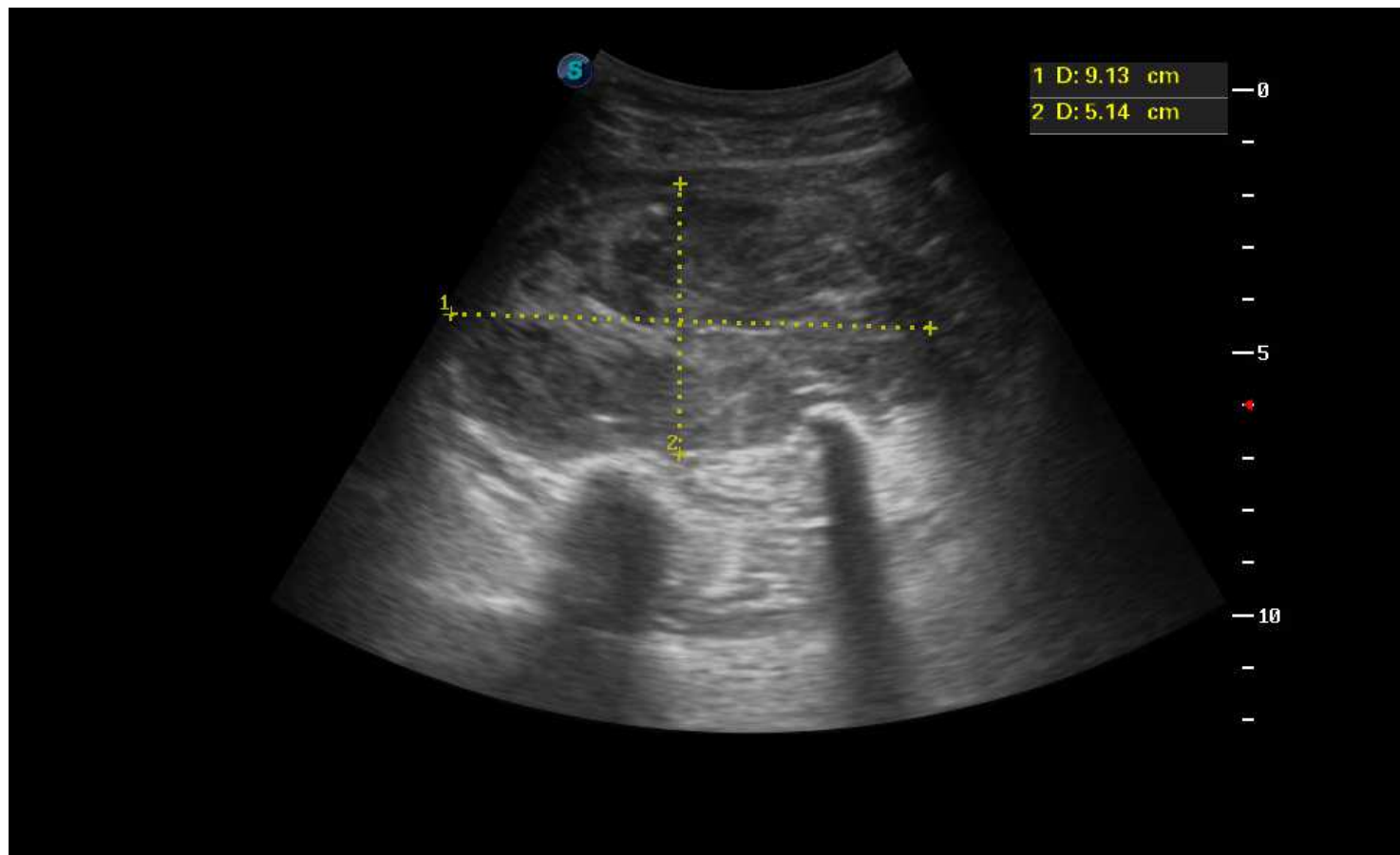
Case Report: B-cell Lymphoma (after 10 days)



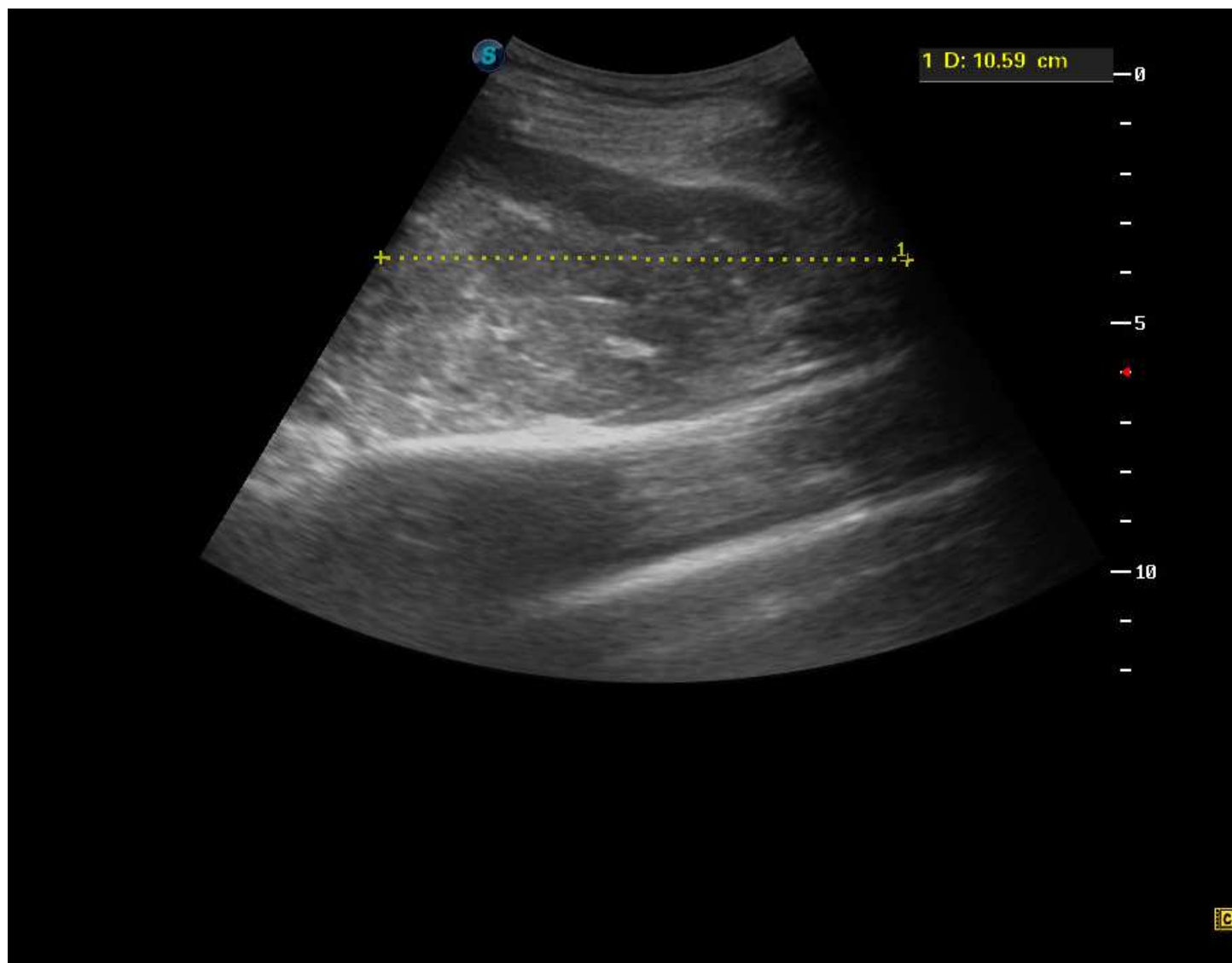




Case Report: Liposarcoma (12.12.2016)



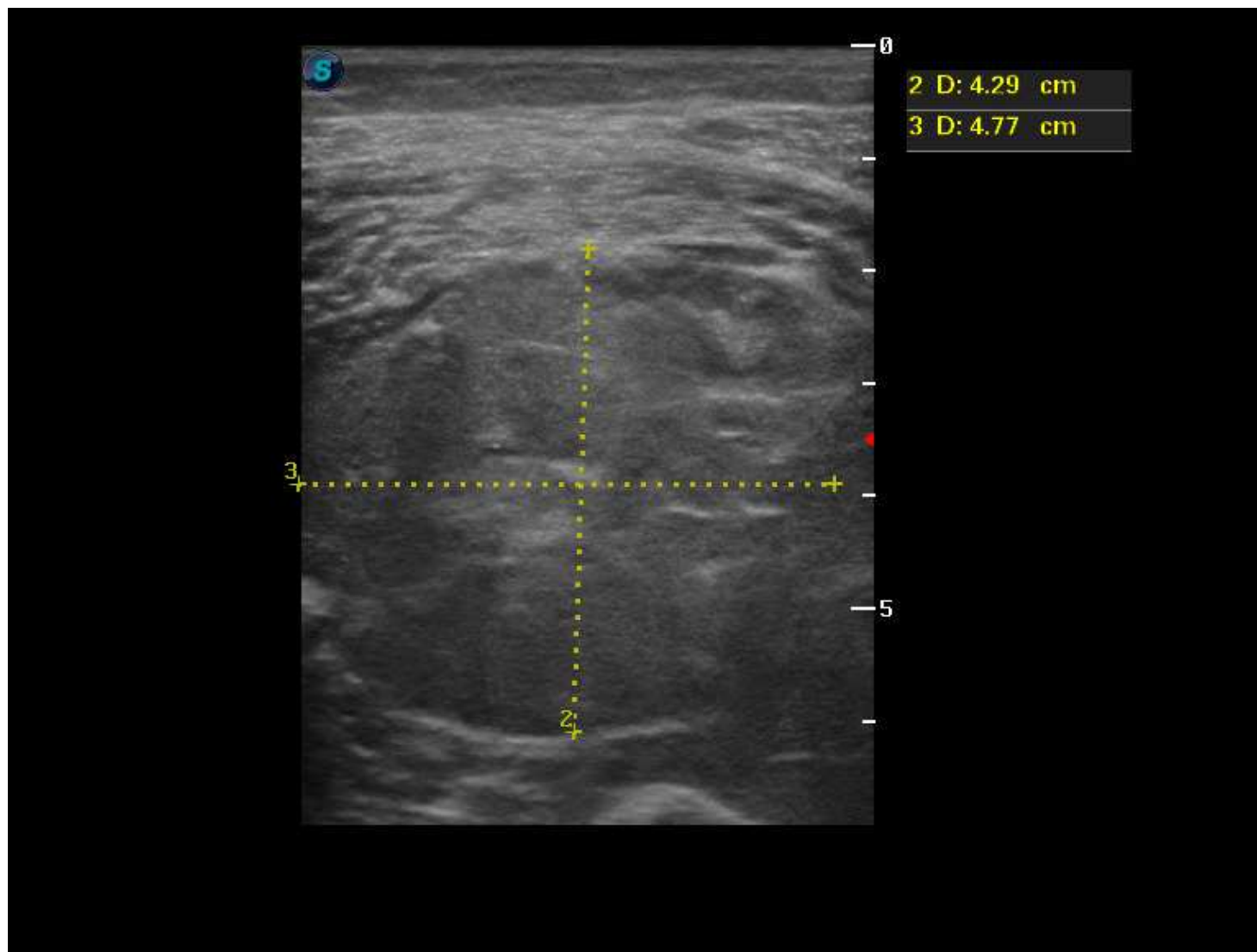
Case Report: Liposarcoma (16.12.2016)



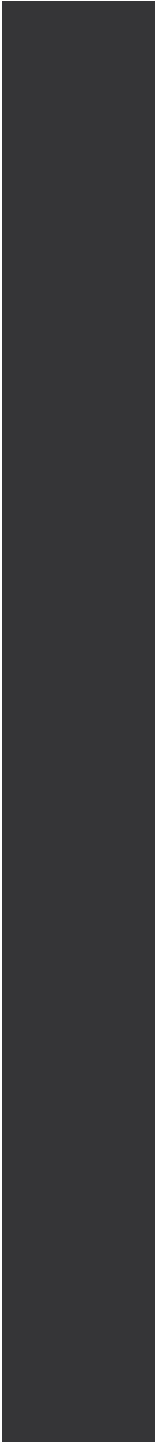
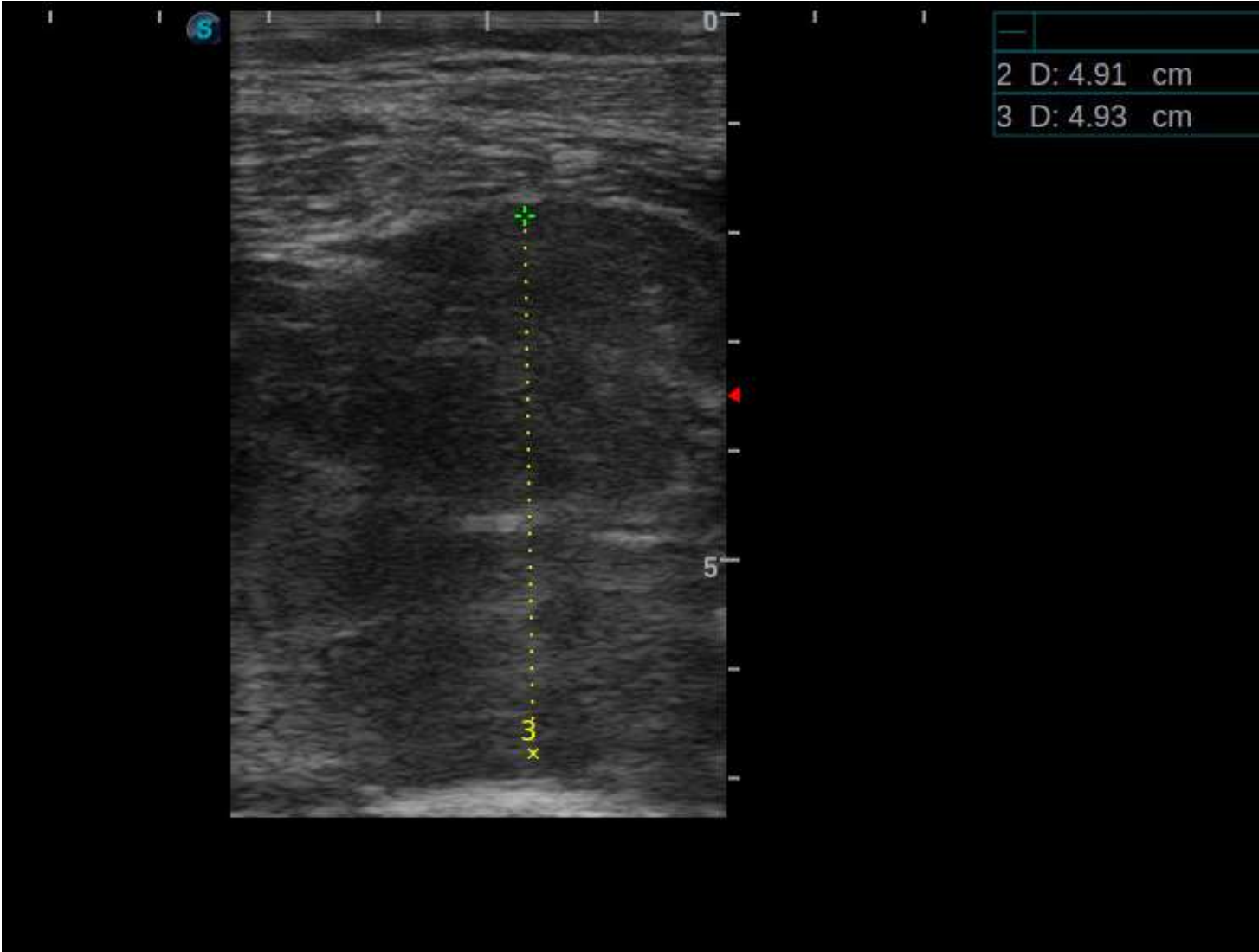
Case Report: Liposarcoma (19.12.2016)



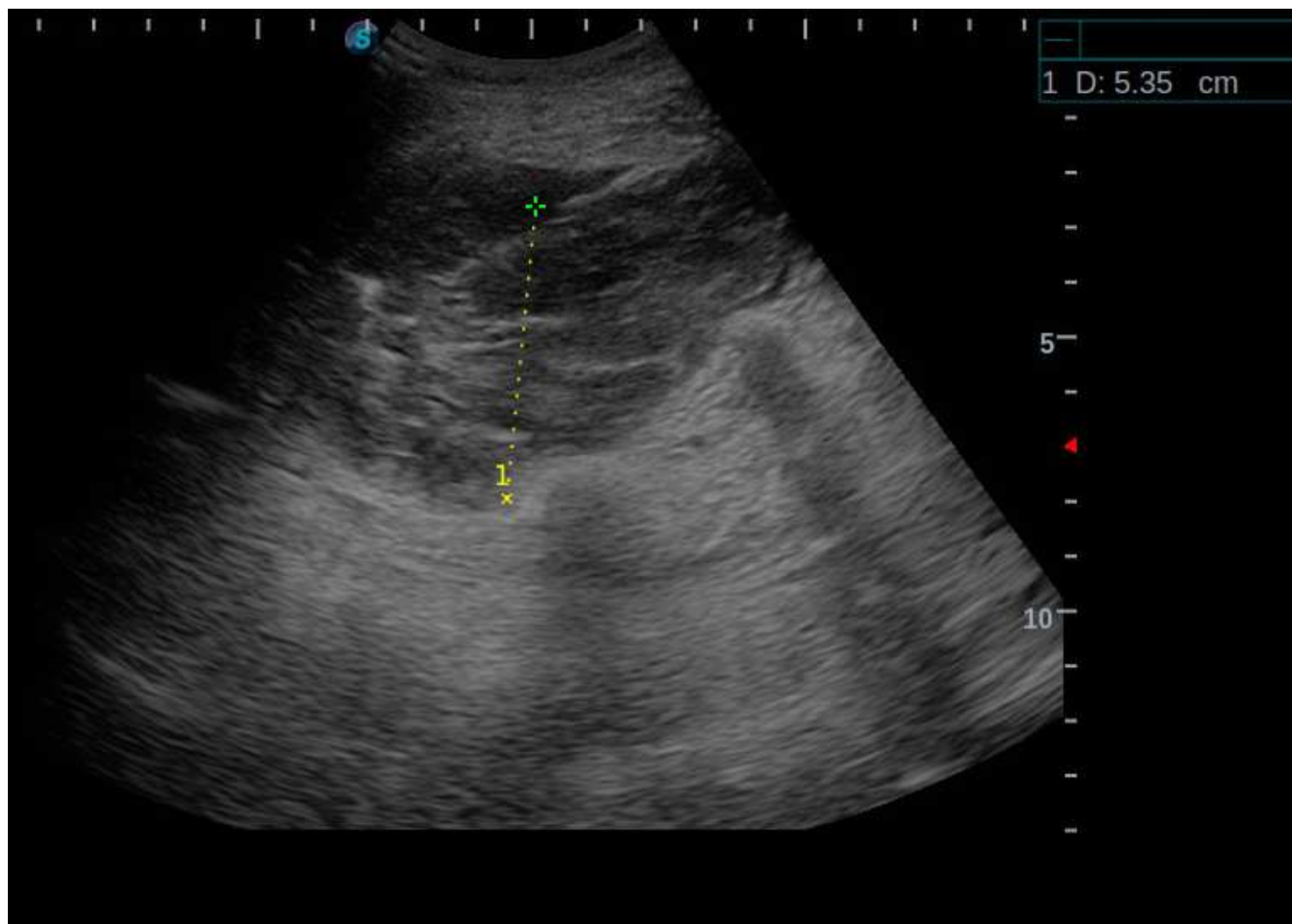
Case Report: Liposarcoma (22.12.2016)



Case Report: Liposarcoma (10.02.2017)



Case Report: Liposarcoma (10.02.2017)



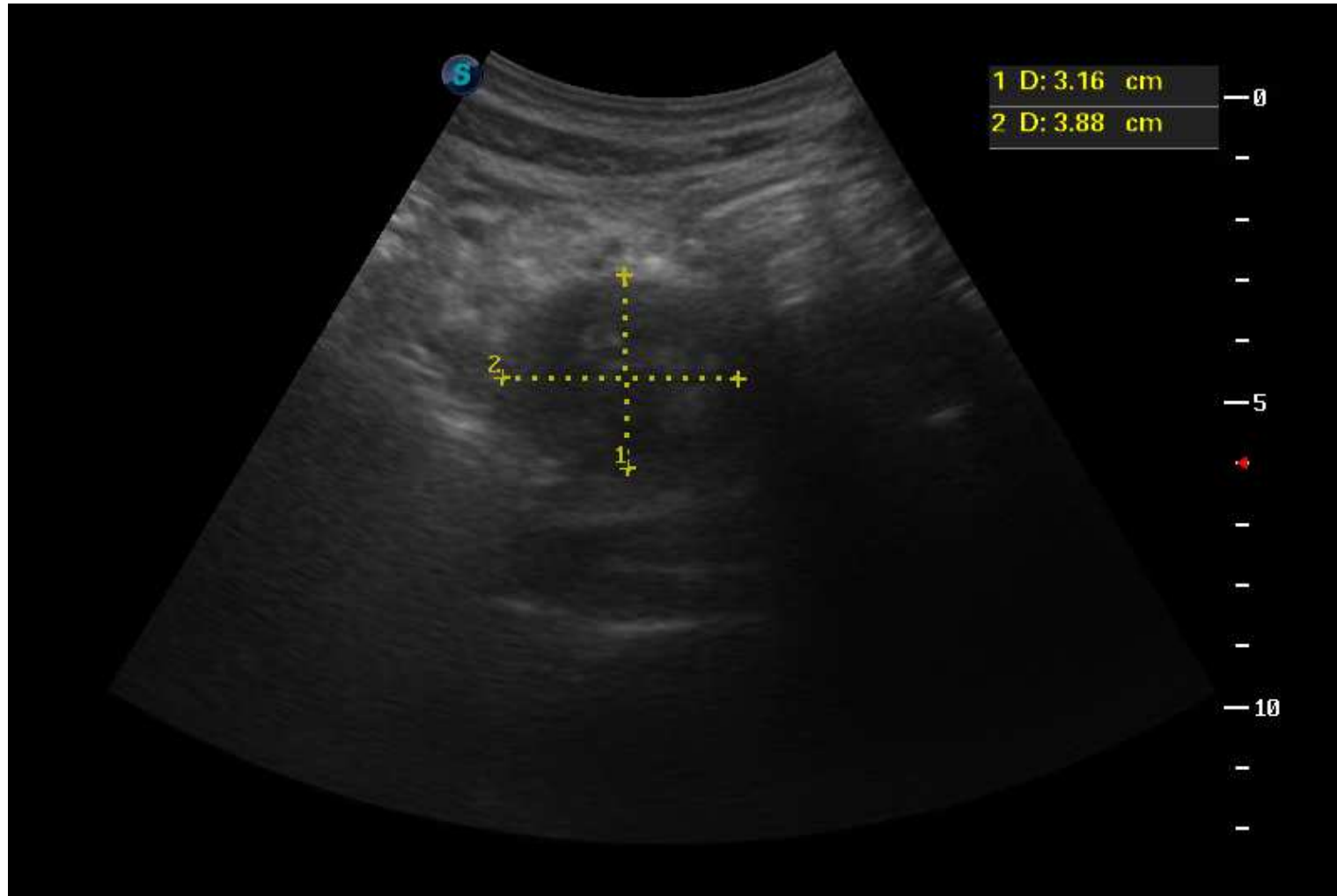
Case Report: Liposarcoma (10.02.2017)



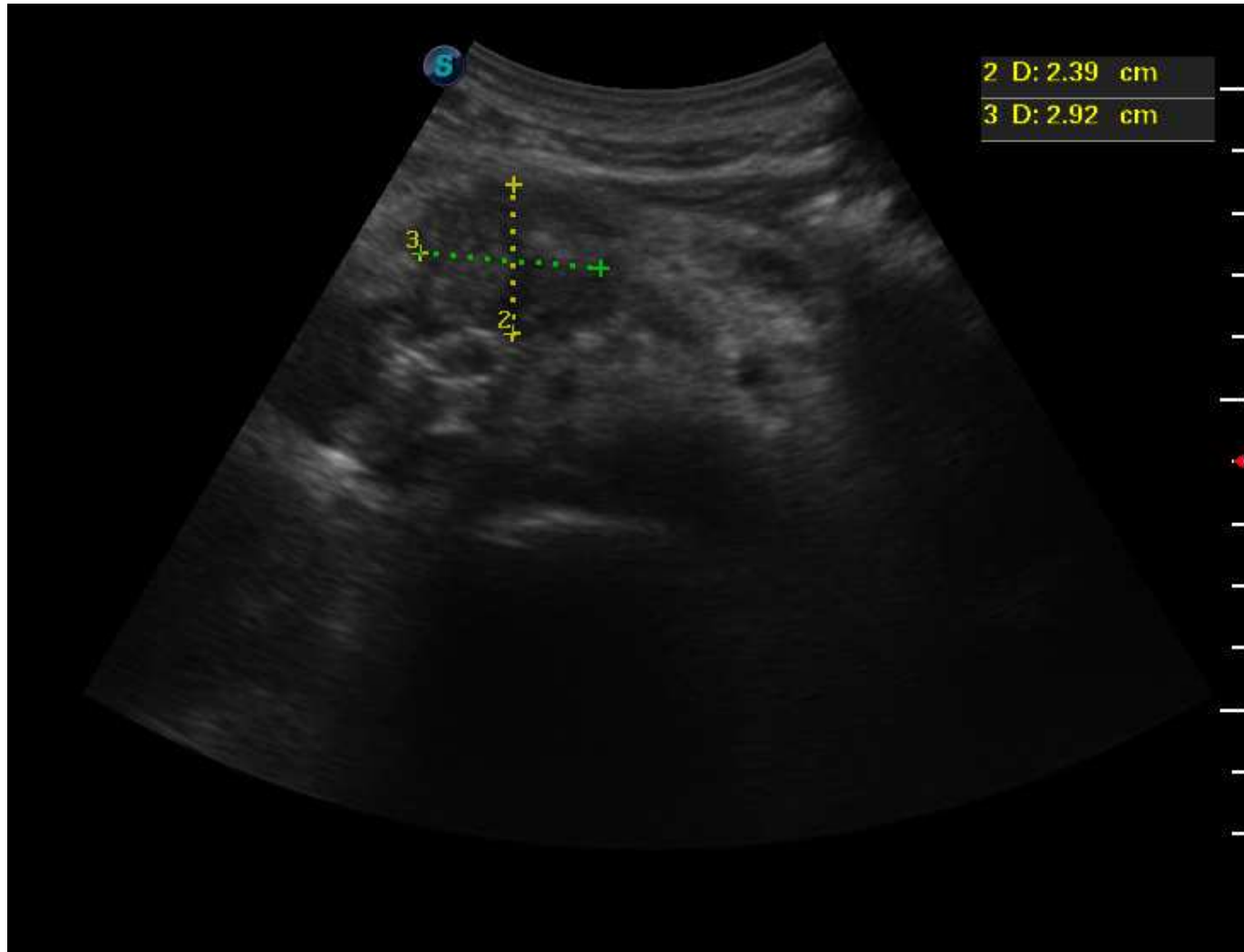
Case Report: Liposarcoma (10.02.2017)



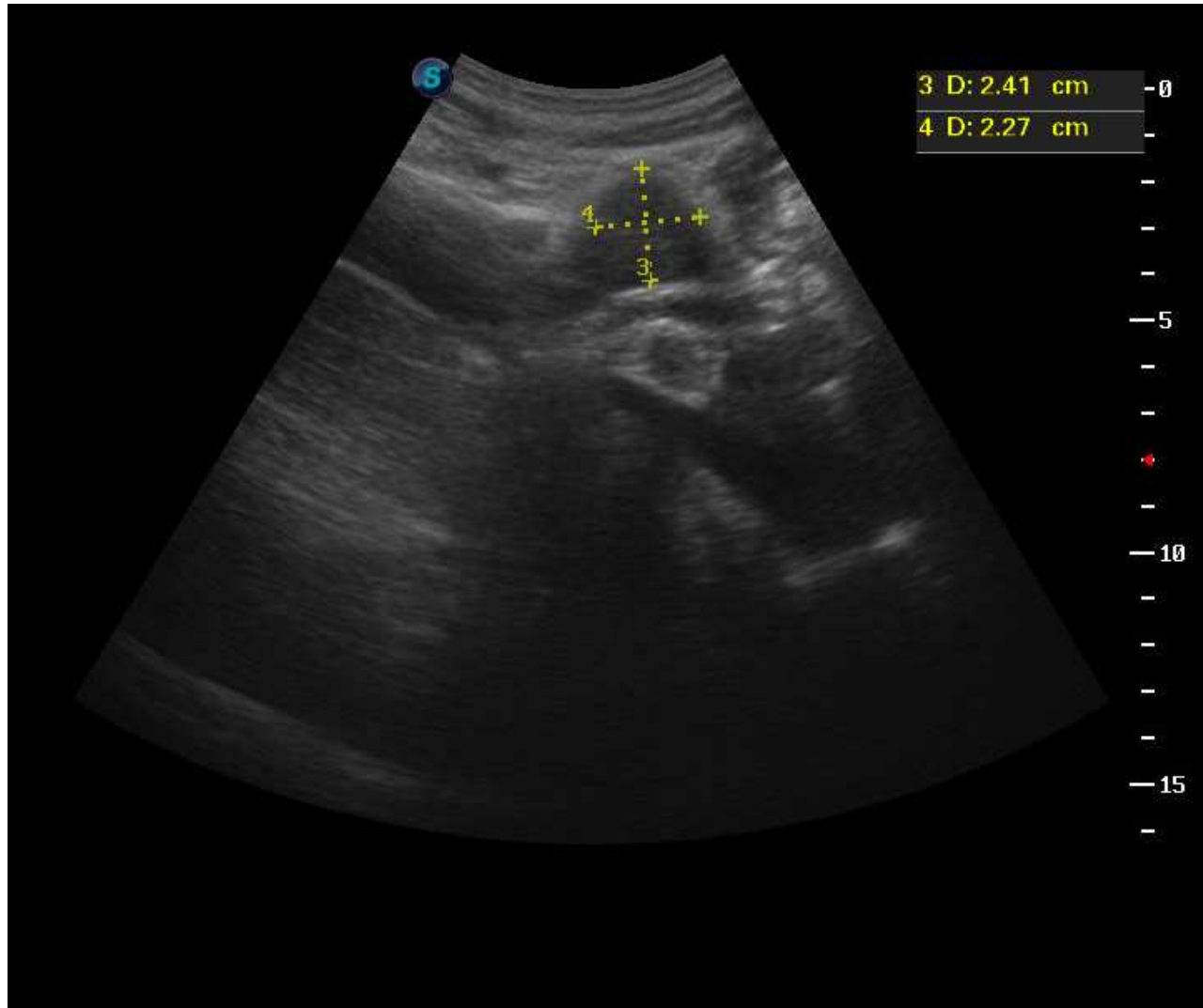
Case Report: Pancreatic Cancer (10.10.2016)



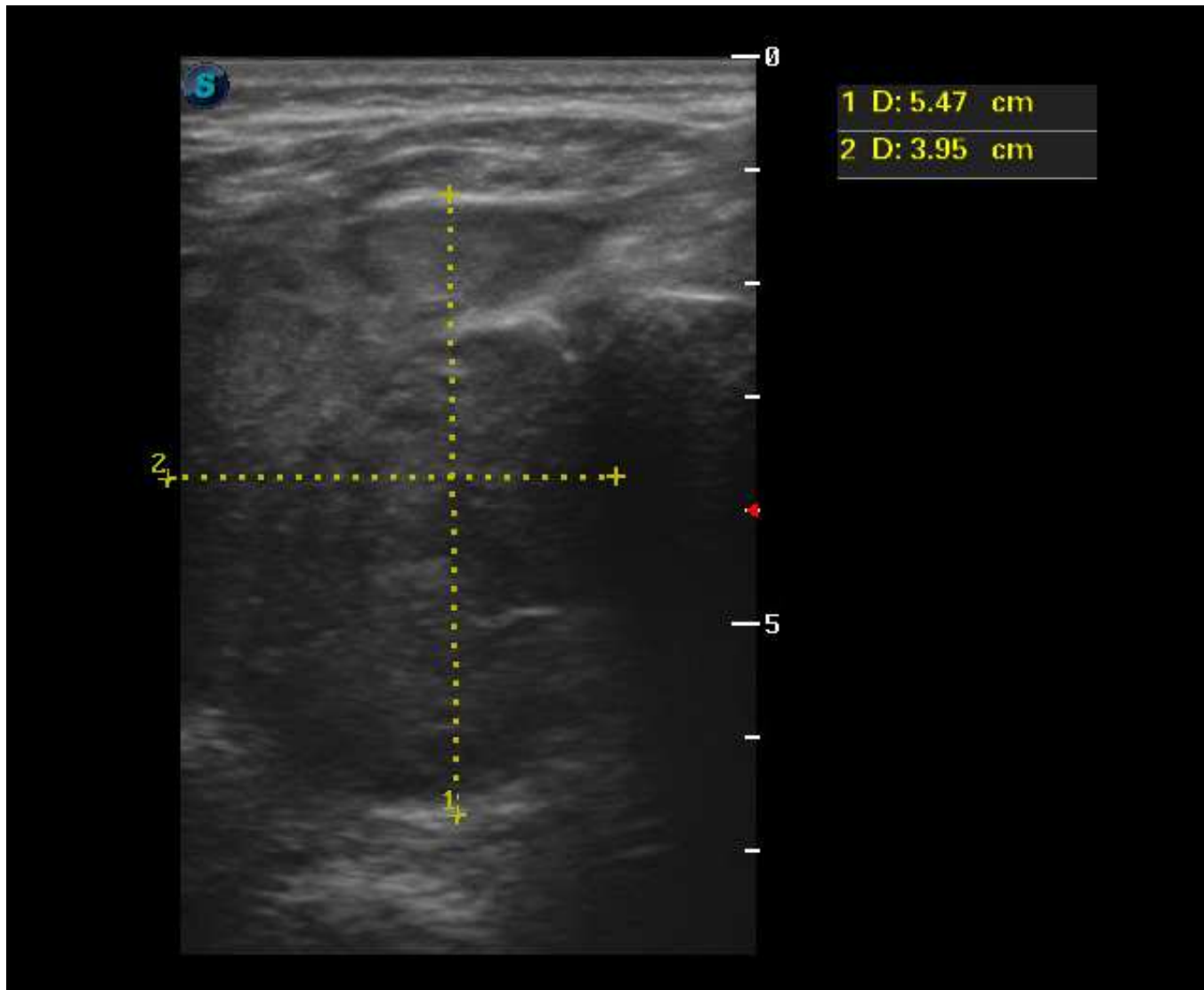
Case Report: Pancreatic Cancer (13.10.2016)



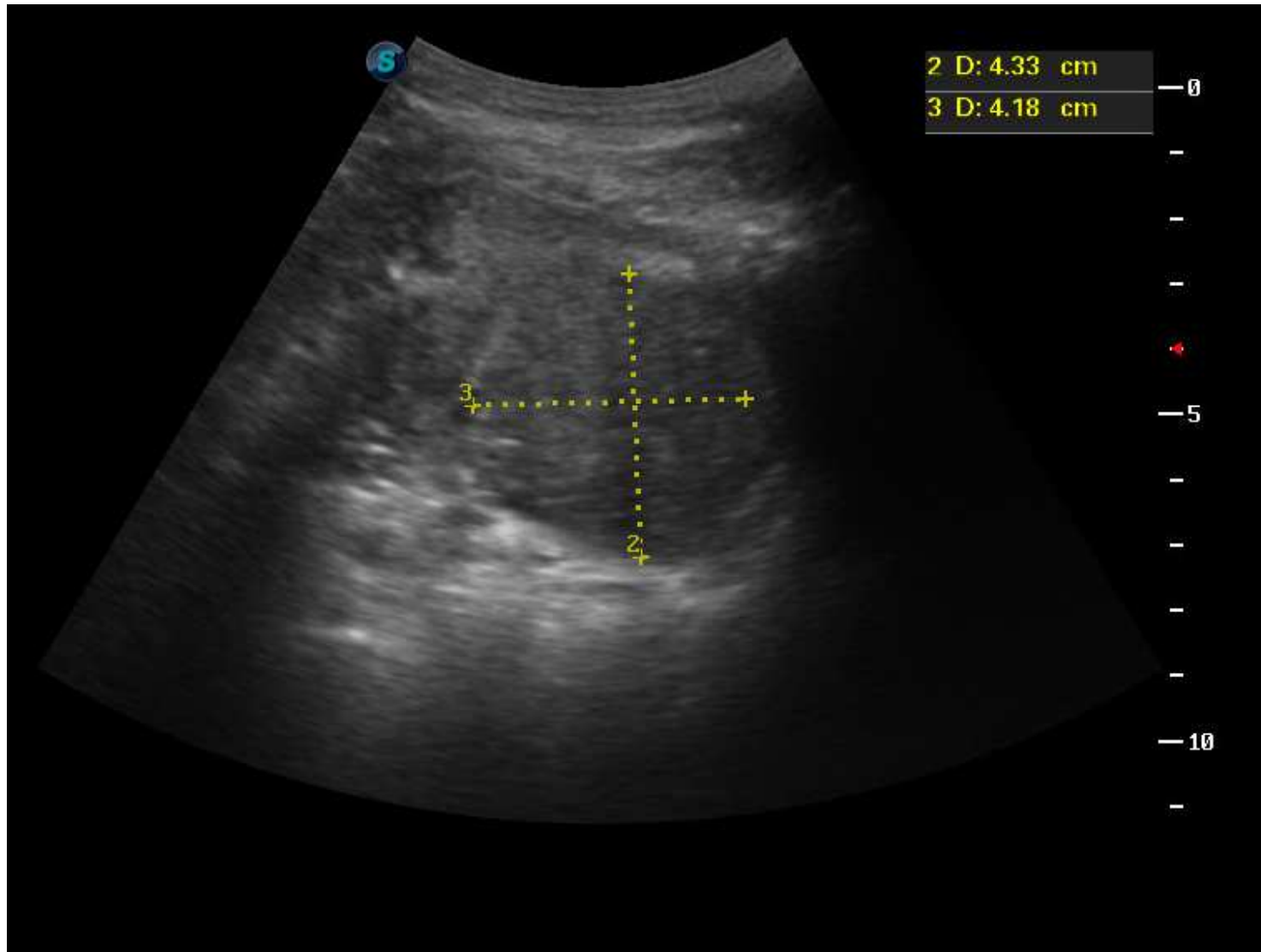
Case Report: Pancreatic Cancer (21.10.2016)



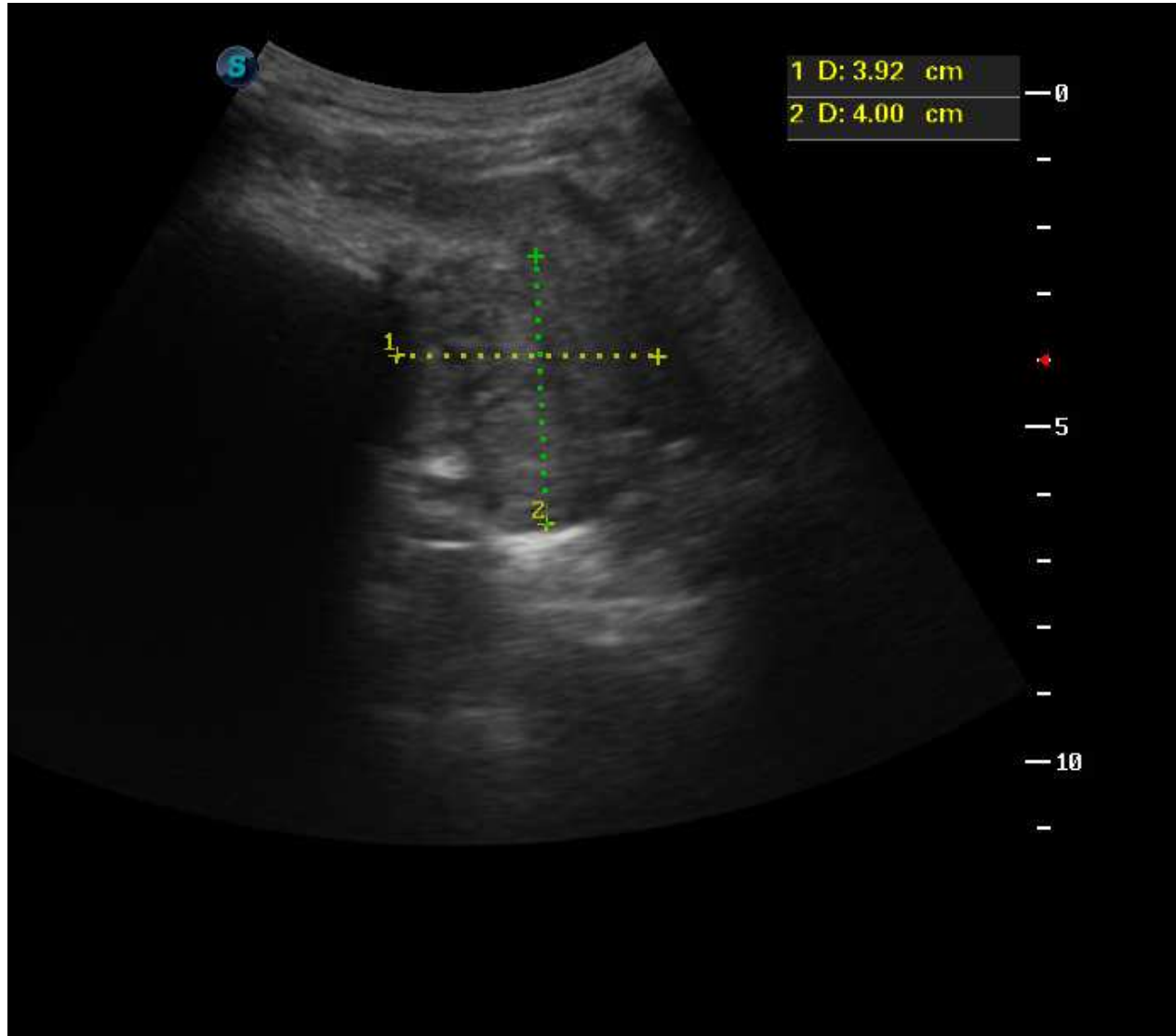
Case Report: Ewing Sarcoma, sacrum, female, 14 y. (31.10.2016)



Case Report: Ewing Sarcoma, sacrum, female, 14 y. (02.11.2016)



Case Report: Ewing Sarcoma, sacrum, female, 14 y. (03.11.2016)



Case Report: Lung Cancer with 15 Brain Metastases, 45 y., female

Hello Dr Weber,

Yesterday I had review scans at Royal Marsden and I want to tell you my good news.

The scans showed reduction of tumors both in my lung and lesions in my head. The lung reduced around 40 % in mass (that's my rough calculation based on 2d measurements given) as did the smaller cancer in my lung.

The doctor could not see the other lesions (there were about 14).

Case Report: Lung Cancer with 15 Brain Metastases, 45 y., female: CT Review

The external CT chest and abdomen scan of 28/12/2016 has been reviewed and compared with the previous scan from 11/11/2016.

The superior right perihilar mass has further reduced in size, measuring 23 x 23mm (series 7 image 37) compared to 29 x 28mm previously. The hilar node inferiorly is now subcentimetre. No other focal lung lesions. No mediastinal or left hilar adenopathy.

No change in the liver cysts. The gallbladder, spleen, pancreas, kidneys and adrenal glands are unremarkable and unchanged. No abdominal lymphadenopathy. No bone lesions.

Comment: Further reduction in size of the right hilar mass and adjacent adenopathy consistent with further partial response.

Patient with Breast Cancer and Multiple Bone Metastases

- 2x therapy with 75 mg lip ICG, Curcumin, low dose chemotherapy with lip-Doxorubicin, 5-FU and Mitoxantron
- Interstitial therapy on the spine, low dose ultrasound and shockwaves
- **90 % reduction of spinal metastases in MRI and nearly pain-free**

Summary: New Therapeutic Strategies for Cancer therapy

- **Photodynamic and sonodynamic therapy with liposomal ICG, Chlorin E6, Hypericin and Curcumin**
- Low dose chemotherapy using chemodrugs as photosensitizers
- Immunotherapy with intravenous laser blood irradiation
- Immunotherapy with GcMAF, TBL12, dendritic cells, oncolytic viruses and other methods
- Hyperbaric oxygen therapy

Hyperbaric Oxygen Therapy:



Thank you!

