





Development of theranostic nanoplatform suitable for quantitative ¹⁹F MRI and tailored for Boron Neutron Capture Therapy (BNCT)

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Introduction

Radiotherapy (RT) is used in 30% to 50% of cancer treatments, often alongside chemotherapy or surgery. However, RT is not suitable for all types of cancer and can lead to short- or long-term side effects due to tissue toxicity in the irradiated area. This damage affects both cancerous and healthy tissues. [1] To address these limitations, alternative treatments like Boron Neutron Capture Therapy (BNCT) are emerging. In BNCT, a molecule containing the stable isotope boron-10 (¹⁰B) is injected into the patient, where it selectively accumulates in cancer cells. The patient is then exposed to an epithermal neutron beam, which ¹⁰B readily absorbs due to its high affinity for slow neutrons. After capturing a neutron, ¹⁰B briefly becomes boron-11 (¹¹B), then decays into a lithium-7 (⁷Li) nucleus, an alpha particle, and gamma rays (in 90% of cases). These particles generate ionizing radiation with a high linear energy transfer. which is confined to the cancer cells that have absorbed the boron isotope. [2,3] This targeted approach holds potential for treating cancers that are located near

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Fig. 1 : Principle of BNCT. Created with Biorender, Smart Servier Medical Art, Laird M. & al., Nanoscale Adv. 2537. 2023



Results

The initial experiments focused on the preparation of nanoparticles with a core-shell structure, consisting of a PFCE nanoemulsion stabilized by the cetyltrimethylammonium bromide (CTAB), and surrounded by a mesoporous silica shell. mPEG₂₃ silane was also grafted on the shell to improve the colloidal stability (NP-PEG₂₃).





Fig. 4 : Transmission electron microscopy confirmed core-shell structure of NP-PEG₂₃, with an average diameter of 85 ± 28 nm (PDI: 1.52)







Perspectives

To obtain a nanoplatform suitable for BNCT, our nanoparticles still require some improvements:

> BSH-modified silane derivative has already been prepared, but the grafting onto the particles still needs optimization.



- > ¹⁹F MRI phantoms will be performed to ensure that the concentration of encapsulated fluorine is sufficient for imaging.
- > Next steps will also include in vitro cytotoxicity and internalization assays on A375 melanoma cell line, as well as in vivo biodistribution study on murine models.

Conclusion

Although BNCT shows great promises, several key challenges remain. Through its core-shell structure, these nanoparticles incorporate a PFCE emulsion for quantitative ¹⁹F MRI, and a mesoporous silica shell that enhances biocompatibility and chemical versatility. Preliminary experiments have confirmed the successful synthesis of these nanoparticles, demonstrating fluorine content and good colloidal stability. Further optimization and testing are underway to improve their potential in BNCT applications.

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