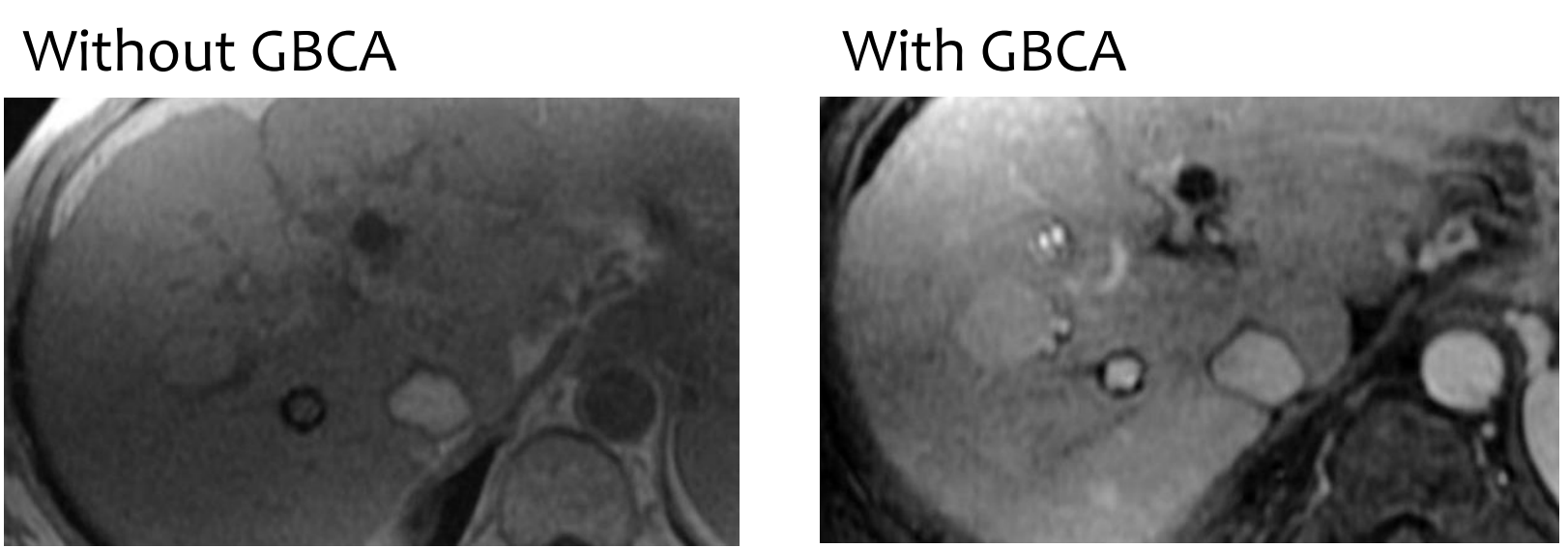
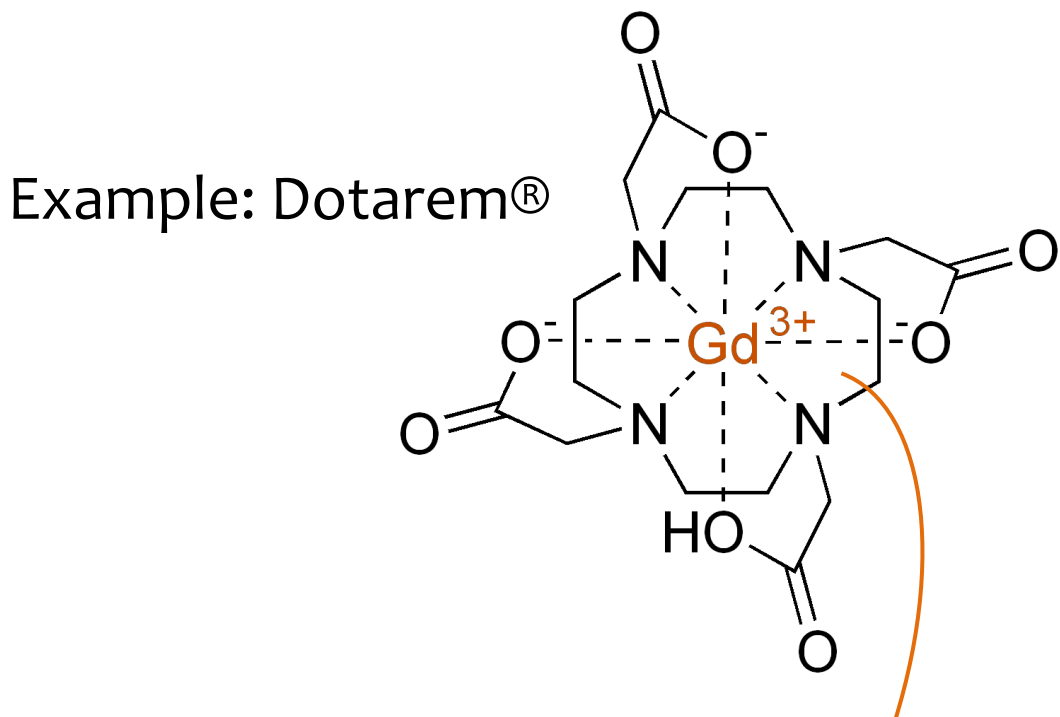


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## Introduction

**Gadolinium-based contrast agents (GBCAs):**  
Currently the only available contrast agents for magnetic resonance imaging (MRI)



Malignant liver lesion: hepatocellular carcinoma (Courtesy of Dr R Schubert, [Radiopaedia.org](https://radiopaedia.org), rID: 15858)

➤ GBCAs (chelators) may partly dissociate and release free  $Gd^{3+}$   
→ ongoing safety concerns: GBCAs linked to nephrogenic fibrosis and deposition in the brain [1]

➤  $Gd^{3+}$  **deposition observed in bone** several years after administration (at levels much higher than in the brain) [2] → long term storage!



➤ But how is  $Gd^{3+}$  incorporated into bone ?

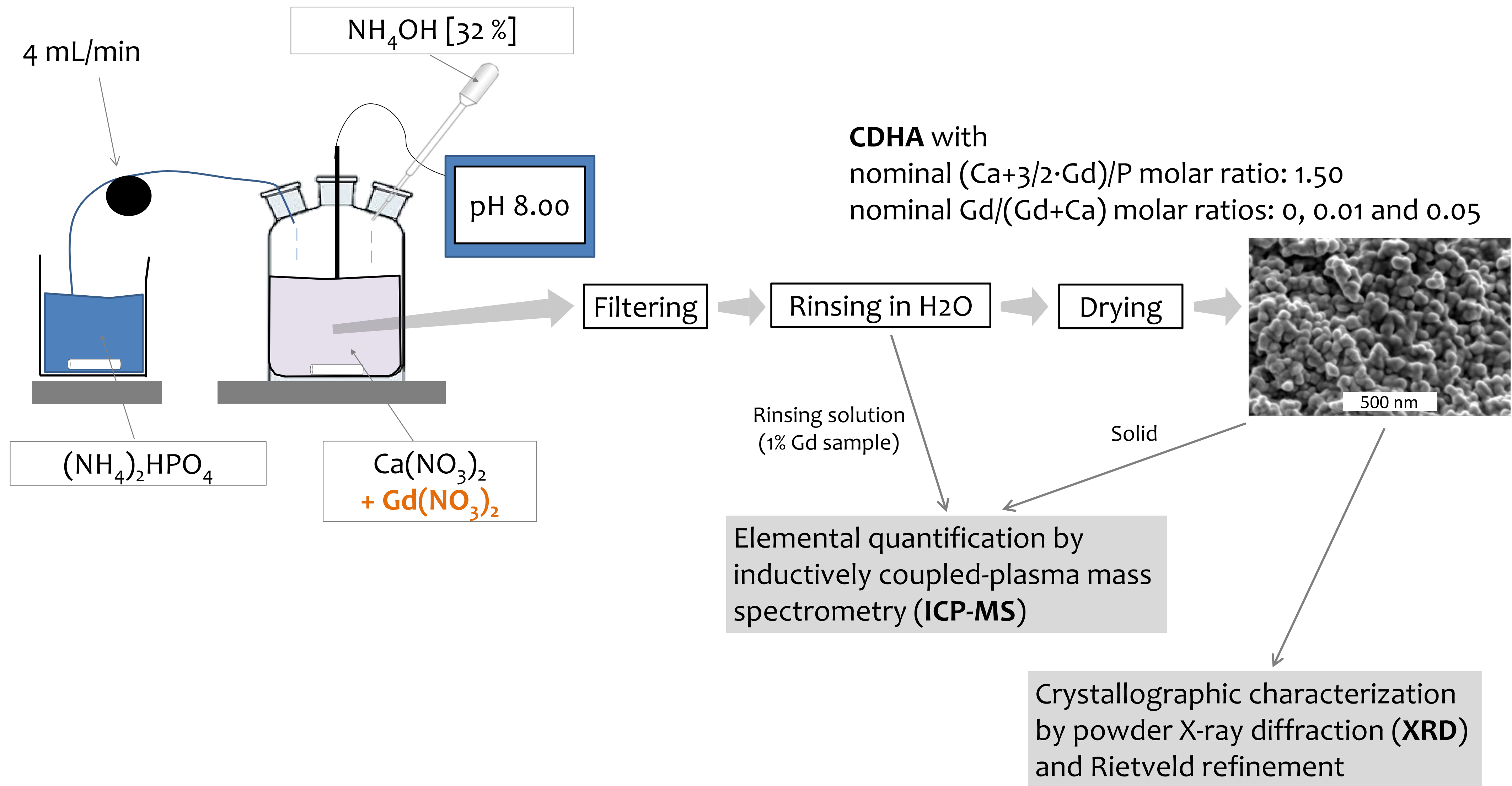
- Organic phase of bone ?
- $GdPO_4$  (known to be insoluble in physiological medium [3]) ?
- Gd-substituted bone mineral (hydroxyapatite) ?

### Goal of the present work:

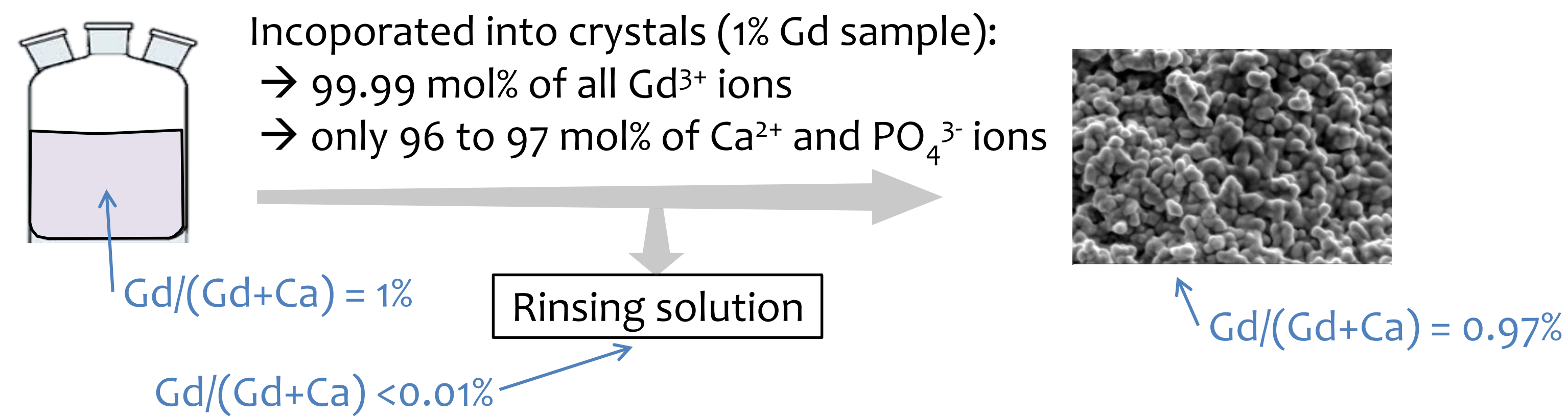
➤ To investigate whether  $Gd^{3+}$  precipitated along with  $Ca^{2+}$  and  $PO_4^{3-}$  from a supersaturated solution is incorporated into the crystal structure of a bone-like calcium phosphate phase

## Method

### Precipitation of calcium deficient hydroxyapatite (CDHA)



## Results & Discussion

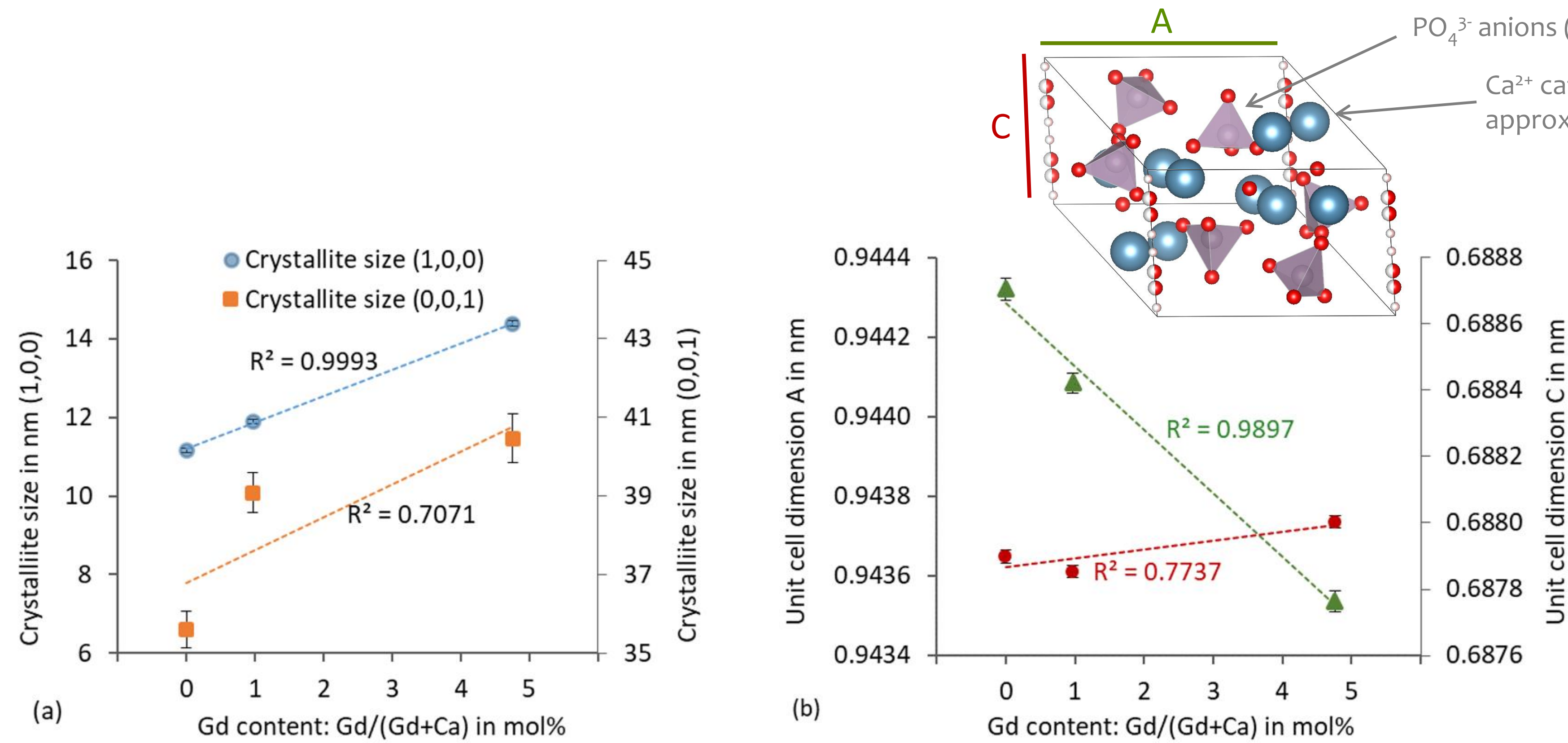


➤  $Gd^{3+}$  is highly insoluble and was permanently incorporated into the precipitated crystals

Chemical and crystallographic parameters of the Gd-containing precipitate

Gd / (Gd+Ca) nominal in mol%	Gd / (Gd+Ca) (ICP-MS) in mol%	Phases detected (XRD)	Amorphous fraction (XRD) in wt%
0%	0%	CDHA	14%
1%	0.97%	CDHA	14%
5%	4.76%	CDHA	19%

➤ The precipitate consisted of phase-pure CDHA with a Gd content close to nominal quantities, and accompanied by an amorphous fraction of <20 wt%



Crystallite size (a) and unit cell dimensions (b) of the CDHA crystal lattice as a function of Gd content. Error bars designate the estimated standard deviation associated with the Rietveld refinement.

➤ Gd content affects the CDHA crystallite size

➤ Unit cell dimension A decreases with increasing Gd content → a contracted unit cell is in line with the smaller  $Gd^{3+}$  ionic radius compared to  $Ca^{2+}$  [4]

➤ These findings imply that  $Gd^{3+}$  was most likely incorporated into the apatite crystal lattice rather than forming a separate  $GdPO_4$  phase

## Conclusions

- Chemical and crystallographic analysis of the precipitate formed from a supersaturated solution of  $Gd^{3+}$ ,  $Ca^{2+}$  and  $PO_4^{3-}$  provided strong evidence of a Gd-containing apatite crystal structure
- Thus,  $Gd^{3+}$  ions dissociated from their chelators *in vivo* after GBCA administration may be directly incorporated into the mineral phase of bone during bone formation or remodeling

### References

- [1] Grobner, *Nephrol Dial Transplant* 2006; **21**(4):1104-8
- [2] Murata et al, *Invest Radiol* 2016; **51**(7):447-53
- [3] Bleavins et al, *Biol Trace Elem Res* 2012; **145**(2):257-67
- [4] Shannon, *Acta Cryst A* 1976; **32**(5):751-67