In vivo PET quantification of the dopamine transporter in rat brain with $[^{18}F]$LBT-999☆

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Introduction: We examined whether $[^{18}F]$LBT-999 ($^{(E)}$-N-4-fluorobut-2-etyl)2β-carbomethoxy-3(4'-tolyl)nortropane) is an efficient positron emission tomography (PET) tracer for the quantification of the dopamine transporter (DAT) in the healthy rat brain.

Methods: PET studies were performed using several experimental designs, i.e. test-retest, co-injection with different doses of unlabelled LBT, displacement with GBR12909 and pre-injection of amphetamine.

Results: The uptake of $[^{18}F]$LBT-999 confirmed its specific binding to the DAT. The non-displaceable uptake (BPND) in the striatum, between 5.37 and 4.39, was highly reproducible and reliable, and was decreased by 90% by acute injection of GBR12909. In the substantia nigra/ventral tegmental area (SN/VTA), the variability was higher and the reliability was lower. Pre-injection of amphetamine induced decrease of $[^{18}F]$LBT-999 BPND of 50% in the striatum.

Conclusions: $[^{18}F]$LBT-999 allows the quantification of the DAT in living rat brain with high reproducibility, sensitivity and specificity. It could be used to quantify the DAT in rodent models, thereby allowing to study neurodegenerative and neuropsychiatric diseases.

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1. Introduction

The dopamine transporter (DAT) is involved in a number of physiological and pathological processes in the brain. It is now recognized that in vivo exploration of this transporter by molecular single-photon emission computed tomography (SPECT) or positron emission tomography (PET) imaging can improve the early and/or differential diagnosis of Parkinson’s disease (PD) [1,2] and can also be useful in neuropsychiatric disorders such as schizophrenia [3] and attention deficit-hyperactivity disorders (ADHD) [4]. In vivo exploratory approach requires the use of radioactive probes with properties allowing to specifically quantify the molecular target of interest in physiological and pathological conditions. To date several SPECT and PET tracers of the DAT are available [5]. Several PET tracers labeled with $[^{11}C]$ such as $[^{11}C]$PE2I and $[^{11}C]$CFT have already been used in clinical studies [3,6]. However, DAT tracers labeled with $[^{18}F}]$ have the advantage over $[^{11}C]$-labeled tracers to have a longer radioactive half-life (110 minutes instead of 20 minutes), allowing their use in centers without an on-site cyclotron. $[^{18}F]$-labeled DAT probes have been then developed such as $[^{18}F]$FP-CIT [7], $[^{18}F]$FECNT [8], and $[^{18}F]$FE-PE2I [9], and some of them are currently tested for potential clinical applications. Among the different exiting in vivo DAT tracers, it seems that PE2I has greater selectivity, in particular over the serotonin transporter (SERT) [10]. The fluorinated derivative of PE2I, ($^{(E)}$)-N-(4-fluorobut-2-ethyl)2β-carbomethoxy-3(4'-tolyl)nortropane or LBT-999 that we previously developed showed also very high selectivity for the DAT [11] and its labeled analog $[^{18}F]$LBT-999 has recently demonstrated its ability for in vivo quantification of the DAT in non-human primates [12].

The aim of the present study is to determine whether $[^{18}F]$LBT-999 is an efficient tool for the quantification of DAT in the rat brain in vivo. Indeed, the development of PET systems adapted to small animals substantially increased during the last decade. Such technology is very useful for providing the proof of principle in the development of new imaging probes, for better understanding the pathophysiologial mechanisms involved in human brain disorders and for validating new treatments in animal models. We characterized here in the healthy rat brain the reproducibility, reliability, and specificity of $[^{18}F}$LBT-999 binding, in addition to its sensitivity to variations of...
endogenous dopamine. The final aim is to propose a reliable $[^{18}F]$-PET tracer of the DAT that will be useful for evaluation of potential new treatments in animal models of PD, and that would be convenient for clinical applications.

2. Materials and methods

2.1. Radiotracer preparation

No-carrier-added $[^{18}F]$LBT-999 was prepared according to Dollé et al. [13] with some modifications. In brief, $[^{18}F]$LBT-999 was produced via direct nucleophilic substitution from its chloro analog by adding 3 mg of the precursor in 1 mL of DMSO to the dry $[^{18}F]$KF/K$_{2}$C$_{18}$ complex. After heating at 165°C for 10 minutes, the mixture was cooled and purified by high-pressure liquid chromatography (HPLC: Alltima, C18, 250 × 10 mm, 5 µm column) using ammonium acetate 0.1M/acetonitrile: 4/6 as the mobile phase at a 4 mL/min flow rate. In these conditions, time retention is 13.5 minutes. The desired fraction was collected, diluted in water and the $[^{18}F]$LBT-999 was trapped on the t-C18 light SepPak cartridge. The cartridge was rinsed with 5 mL of injectable water and the $[^{18}F]$LBT-999 was eluted with 0.5 mL of ethanol. The formulation was completed by the addition of 3.5 mL of NaCl 0.9%. The preparation took 65 ± 5 minutes. Quality control was performed by HPLC (Alltima, C18, 250 × 4.6 mm, 5 µm column) using ammonium acetate 0.1 M/acetonitrile: 3/7. $[^{18}F]$LBT-999 was obtained with a radiochemical purity >98% and with a mean specific activity of 109 ± 38 GBq/µmol.

2.2. Animals

All procedures were conducted in accordance with the requirements of the European Community Council Directive 2010/63/EU for the care of laboratory animals and with the authorization of the Regional Ethical Committee. A total of 36 male Wistar rats (2-month-old; body weight of 300–350 g; CERJ Le Genest-St-Isle, France) were explored. They were housed in groups of 2 per cage in a temperature (21 ± 1°C) and humidity (55 ± 5%) controlled environment under a 12-hour light/dark cycle, with food and water available ad libitum.

2.3. PET acquisition and reconstruction

PET acquisitions were performed on a microPET eXplore VISTA-CT system (GE Healthcare, France) which has an effective axial/transaxial field of view (FOV) of 4.8/6.7 cm, a spatial resolution ≤2 mm, and a sensitivity of 2.5% in the whole FOV. Animals were anesthetized using Aerrane (Baxter, France), at 4–5% in O$_{2}$ for induction and then 1.5–2% during the scan. Each rat was placed on a thermo-regulated bed (Minerve, France) in prone position with the head immobilized by 2 ear bars and a nose cone. The brain was positioned on the center of the FOV. Before PET acquisition, a 5-minutes computerized tomography X ray scan was acquired for attenuation correction. Animals received into a tail vein a bolus injection of 37 MBq/300 g body weight of $[^{18}F]$LBT-999 in saline, corresponding to a mean dose of 1.25 nmol/kg. During PET acquisition, the respiratory rate and body temperature were monitored and kept as constant as possible. Each acquisition lasted between 50 and 70 minutes, depending on the experiment.

For 50-minute acquisitions, list-mode scans were rebinned to 27 frames: 4 frames of 10-seconds followed by 4 of 20-seconds, 4 of 60-seconds, 14 of 180-seconds, and 1 of 120-seconds. For 70-minutes acquisitions, list-mode scans were rebinned to 29 frames: 4 frames of 10-seconds followed by 4 of 20-seconds, 4 of 60-seconds, 13 of 180-seconds, 3 of 360-seconds, and 1 of 420-seconds.

Each scan was corrected for randoms, scatter, and attenuation, and the images were reconstructed using a 2D OSEM algorithm (GE Healthcare, France) into voxels of 0.3875 × 0.3875 × 0.775 mm$^{3}$.

2.4. Image analysis

All the dynamic PET images were co-registered into Paxinos coordinates by rigid transformations [14]. For each scan, the data were summed over the first 5 minutes after radiotracer injection to create a pseudo perfusion image. This image, which reflects the initial flow-dependent activity, was recorded with a $[^{18}$FDG template [15] using PMOD® (version 3.3, PMOD Technologies, Zurich, Switzerland, www.pmod.com) by maximizing normalized mutual information using Powell optimization. After checking for potential head movements, the transformation obtained by registering the pseudo perfusion image was used to register all frames of the corresponding dynamic sequence.

The regions of interest (ROIs) of the Schiffer template [15] corresponding to the striatum and cerebellum were eroded in 3D by 2 voxels to obtain regions less impacted by partial volume effect. The region of the substantia nigra/ventral tegmental area (SN/VTA) was manually drawn on the Schiffer magnetic resonance imaging template in Paxinos coordinates. These three regions were used to generate regional time-activity curves (TACs) on the co-registered images. In each region, the left and right sides were averaged.

2.5. Kinetics models

We determined the binding potential related to the non-displaceable uptake (BP$_{ND}$), which is the concentration of specific binding at equilibrium compared to a reference concentration in a region without (or with negligible) specific binding [16]. The cerebellum was used as the reference region due to its very low DAT concentration. Five kinetic models based on the entire acquisition and that do not necessitate arterial sampling input function were considered as proposed by Elmenhorst et al. [17]: (i) Noninvasive Logan graphical analysis (Logan): the BP$_{ND}$ was calculated as the slope of a linear regression after reaching equilibrium [18]. A prerequisite is the calculation of the clearance rate k$'_{2}$ which was done using the SRTM method; (ii) simplified reference tissue model (SRTM): this model developed by Lammertsma et al. [19] was used here according to the method proposed by Gunn et al. [20], by fitting basis functions calculated as the convolution of the reference time-activity curve (TAC) with decaying exponentials. Both BP$_{ND}$ and k$'_{2}$ estimations were considered for this study; (iii) two-step simplified reference tissue model (SRTM2): the SRTM2 model is similar to the SRTM model except that a global k$'_{2}$ value is used for calculation, which reduces the effect of noise on BP$_{ND}$ parameter; (iv) multi-linear reference tissue model (MRTM): in this approach, both a receptor-rich and a receptor-poor regions are required to eliminate the necessity of an input function. Multi-linear regression is used to estimate the BP$_{ND}$; (v) Two-parameter simplified reference tissue model (MRTM2): similarly to the simplification of SRTM, the number of variables of MRTM is reduced by predetermination of a global parameter k$'_{2}$.

2.6. Simplified equilibrium analysis

The 5 kinetic models described in the previous section require long dynamic acquisition and dedicated softwares. Simple static measurements involving shorter acquisition protocols are of great interest to reduce the complexity of the dynamic data acquisition. Consequently, we studied a sixth method based on pseudo-equilibrium analysis that is only based on a 20-minutes window of the scans. When the radioigand concentration in the target region (C$_{T}$) is at equilibrium with the concentration in the non-displaceable compartment (C$_{ND}$), the rate of clearance is constant. Under this condition, the binding potential can be estimated as [16,21]:

$$BP_{ND} = \frac{k_{2}}{k_{4}} = \frac{C_{T}(t) - C_{ND}(t)}{C_{ND}(t)} = DVR - 1,$$

where DVR is the difference between the time-activity curves in the target region and the reference region.
Ligand dose
ED50
MSBS
Injected dose
scan2
at 35 minutes post [18F]LBT-999 bolus injection at the dose of 37 MBq/
bioscience, R&D System, France) as a bolus injection into the tail vein
2.9. Displacement study
Prism (GraphPad Software, CA).
was derived from the best
depending on the LBT-999 concentrations were plotted and the ED50
32 mg/kg, respectively) to the [18F]LBT-999 at high specific activity (85–223 GBq/μmol). The
mixture of labeled and unlabeled LBT-999 was injected as a bolus at the dose of 37 MBq/300 g body weight in saline into the tail vein of
intravenous bolus injection of the tracer, a rapid uptake was
observed in the 3 ROIs examined (i.e., the striatum, SN/VTA and
cerebellum). In the cerebellum, the uptake decreased sharply and
in all experiments, the P-values for group differences were
obtained using Student’s t test, and they were considered statistically
significant at P < 0.05. Values are presented as the mean ± standard
error of the mean. The relationships between the BPND values derived from the Logan, SRTM, SRTM2, MRTM and MRTM2 models, and the
dvr-1 values from the simplified quantification protocol were
assessed using the square of the Pearson’s product moment correlation coefficient (R²).

3. Results

3.1. Kinetics analysis
Images at different times after injection of [18F]LBT-999 showed a progressive accumulation of radioactivity in the striatum (Fig. 1A). Time-activity curves are presented in Fig. 1B. After intravenous bolus injection of the tracer, a rapid uptake was observed in the 3 ROIs examined (i.e., the striatum, SN/VTA and cerebellum). In the cerebellum, the uptake decreased sharply and remained low and stable from 20 minutes post-injection (p.i.). By contrast, the uptake remained high and stable in the striatum, with a stable standardized uptake value (SUV) around 5 from 5 to 50 minutes p.i. In the SN/VTA, the uptake also decreased progressively but slower than in the cerebellum, reaching a stable low value around 35–40 minutes p.i.

3.2. Test-retest study
The test-retest variability and reliability values of [18F]LBT-999 binding were determined from 10 healthy rats (Fig. 1B). The BPND varied between 4.33 ± 0.28 and 5.37 ± 0.33 in the striatum and between 0.16 ± 0.05 and 0.79 ± 0.12 in the SN/VTA, considering the 6 different quantification models used (Logan, SMTR, SMTR2, MRTM,
MRTM2, and DVR-1) (Table 1). The variability in the striatum was low whatever the method used for the BPND determination, i.e., between 8 ± 1 and 14 ± 2. This variability was obviously higher in the SN/VTA, i.e., between 11 ± 2 and 58 ± 10, according to the method. The test-retest reliability was high in the striatum (mean ICC of 0.90 to 0.72) and lower in the SN/VTA (0.55 to 0.07).

It can be noted that the variability and reliability of the BPND determination were better in the striatum than in the SN/VTA whatever the quantification method used, probably due to the small size of the SN/VTA area. In the striatum, similar variability and reliability were observed for 5 of the 6 methods used (Logan, SRTM, SRTM2, MRTM2 and DVR-1).

In the striatum, the DVR-1 method consistently overestimated BPND estimates compared with the Logan (overestimation of 23%, \(P = 0.002\)), SRTM (15%, \(P = 0.03\)), SRTM2 (16%, \(P = 0.02\)), MRTM (12%, \(P = 0.05\)), and MRTM2 (16%, \(P = 0.02\)) methods. However, the BPND values estimated by DVR-1 were statistically significantly correlated with the BPND values estimated with the Logan \((R^2 = 0.89)\), SRTM \((R^2 = 0.93)\), SRTM2 \((R^2 = 0.93)\), MRTM \((R^2 = 0.86)\) and MRTM2 \((R^2 = 0.92)\) methods (Table 2). Thus we used the DVR-1 method for the estimation of transporter occupancy and displacement study.

### 3.3. Transporter occupancy

The co-injection of increasing doses of unlabeled LBT-999 induced a reduction in the BPND of 12% and 54% for administration of 0.1 and 0.3 mg/kg, respectively, and a decrease in BPND of 80% in the presence

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### Table 1

<table>
<thead>
<tr>
<th>Method</th>
<th>Region</th>
<th>BPND test</th>
<th>BPND retest</th>
<th>% Var.</th>
<th>ICC</th>
</tr>
</thead>
<tbody>
<tr>
<td>Logan</td>
<td>Striatum</td>
<td>4.39 ± 0.31</td>
<td>4.33 ± 0.28</td>
<td>10 ± 1</td>
<td>0.88</td>
</tr>
<tr>
<td></td>
<td>SN/VTA</td>
<td>0.25 ± 0.04</td>
<td>0.25 ± 0.04</td>
<td>47 ± 8</td>
<td>0.54</td>
</tr>
<tr>
<td>SRTM</td>
<td>Striatum</td>
<td>4.67 ± 0.29</td>
<td>4.67 ± 0.29</td>
<td>8 ± 2</td>
<td>0.88</td>
</tr>
<tr>
<td></td>
<td>SN/VTA</td>
<td>0.40 ± 0.04</td>
<td>0.42 ± 0.03</td>
<td>34 ± 9</td>
<td>0.27</td>
</tr>
<tr>
<td>SRTM2</td>
<td>Striatum</td>
<td>4.63 ± 0.29</td>
<td>4.62 ± 0.28</td>
<td>8 ± 1</td>
<td>0.90</td>
</tr>
<tr>
<td></td>
<td>SN/VTA</td>
<td>0.46 ± 0.04</td>
<td>0.48 ± 0.04</td>
<td>26 ± 6</td>
<td>0.30</td>
</tr>
<tr>
<td>MRTM</td>
<td>Striatum</td>
<td>4.80 ± 0.26</td>
<td>4.77 ± 0.30</td>
<td>14 ± 2</td>
<td>0.72</td>
</tr>
<tr>
<td></td>
<td>SN/VTA</td>
<td>0.79 ± 0.12</td>
<td>0.66 ± 0.08</td>
<td>53 ± 13</td>
<td>0.07</td>
</tr>
<tr>
<td>MRTM2</td>
<td>Striatum</td>
<td>4.62 ± 0.29</td>
<td>4.60 ± 0.29</td>
<td>9 ± 1</td>
<td>0.86</td>
</tr>
<tr>
<td></td>
<td>SN/VTA</td>
<td>0.27 ± 0.05</td>
<td>0.27 ± 0.05</td>
<td>58 ± 10</td>
<td>0.52</td>
</tr>
<tr>
<td>DVR-1</td>
<td>Striatum</td>
<td>5.37 ± 0.33</td>
<td>5.34 ± 0.32</td>
<td>8 ± 1</td>
<td>0.86</td>
</tr>
<tr>
<td></td>
<td>SN/VTA</td>
<td>0.16 ± 0.05</td>
<td>0.16 ± 0.05</td>
<td>11 ± 2</td>
<td>0.55</td>
</tr>
</tbody>
</table>

Results are expressed as mean ± SEM; \(n = 10\).

BPND, binding potential non displaceable; % Var., % variability; ICC, intraclass correlation coefficient (reliability).
of 1 or 2 mg/kg (Fig. 2). No effect was observed for the dose of 0.05 mg/kg. The best fit of the BP\textsubscript{ND} values depending on the LBT-999 concentrations was obtained with the following equation:

\[ Y = 1.003 + \frac{5.156}{1 + 10^{(0.200-X) \times 40.999}} \]

Thus, the estimated ED\textsubscript{50} for \([18F]\)LBT-999 was 0.02 mg/kg. Based on this data, the mean specific activity, the weight of the animals, and the average doses of \([18F]\)LBT-999 injected, the estimated percentage of DAT occupied by the radiotracer was comprised between 4.6% and 7.3%.

### 3.4. Displacement study

As shown in Fig. 3A, the intravenous injection of 1 mg/kg GBR12909 induced a rapid and strong decrease in the striatal accumulation of \([18F]\)LBT-999 that reached progressively the cerebellum level. The DVR-1 value was decreased by 92%, moving from 5.74 ± 0.49 between 21 and 36 minutes p.i. to 0.48 ± 0.15 between 57 and 70 minutes p.i. (Fig. 3B).

### 3.5. Amphetamine study

Images at different times after injection of \([18F]\)LBT-999 are shown for an animal without amphetamine pre-injection (baseline, top) and with pre-injection (bottom) (Fig. 4A). The TACs of \([18F]\)LBT-999 in animals pre-injected with amphetamine showed that this treatment induced a marked decrease in the radiotracer binding in the striatum (P = 0.005, t test) and SN/VTA (P = 0.001, t test), whereas the cerebellum uptake was similar in both conditions (P = 0.36) (Fig. 4B). Of note, the peak accumulation of the tracer was higher in the striatum of amphetamine-injected rats than in non-injected rats during the first 10 minutes p.i. (Fig. 4A and B).

As shown in Table 3, the BP\textsubscript{ND} was reduced under amphetamine administration by 45–59% in the striatum and by 44–88% in the SN/VTA, depending on the method used (Logan, SRTM, SRTM2, MRTM, MRTM2, or DVR-1).

### 4. Discussion

This study examined the quantification of in vivo \([18F]\)LBT-999 binding to the DAT in the healthy rat brain. As expected, the intensity of regional brain uptake of this radiotracer over time was in agreement with the known DAT density, i.e., striatum>>SN/VTA-cerebellum. The cerebellum was used as the nonspecific binding brain region and we further evaluated the applicability of widely used reference tissue methods to estimate the BP\textsubscript{ND} of \([18F]\)LBT-999 using various methods such as Logan, SRTM, SRTM2, MRTM, MRTM2, and DVR-1.

In the striatum, the estimated BP\textsubscript{ND} (test experiment) was comprised between 5.37 (DVR-1) and 4.39 (Logan). These values were lower than those obtained with \([18F]\)LBT-999 in the nonhuman primate using same types of quantification models (BP\textsubscript{ND} of 18–19) [12]. It can be noted that the BP\textsubscript{ND} obtained with another PET tracer of the DAT, \([1^{11}C]\)PE2I, was also different between the rat (value around 2; [22]) and monkey (value around 20; [23]). Species differences have also been observed for the dopamine D\textsubscript{2/3} receptor PET tracer \([1^{18}F]\)-fallypride (BP around 3 in the rat striatum [24] versus 12 in the Rhesus monkey [25]). In rodents, few DAT PET tracers have been used to date. The value of BP\textsubscript{ND} that we obtained in the striatum for \([18F]\)LBT-999 was in the same order than those observed for \([1^{18}F]\)-FECT in rats [26] and \([1^{11}C]\)methylphenidate in mice [21].

In our experiments, the DVR-1 method overestimated BP\textsubscript{ND} values by 12–23% compared with other quantification methods. Consistent with the literature [21], this bias originates from the plasma clearance rate and relative tissue eigenvalue that can significantly alter the apparent volume of distribution [27]. While an overestimation was observed, the simplified quantification based on target ROI to cerebellum ratio at equilibrium (DVR-1) was highly correlated with the 5 studied kinetic models. The present data suggest that short imaging times (10–20 minutes) for imaging conducted less than 30 minutes after the administration of \([18F]\)LBT-999 are feasible for small animals.

High reproducibility and reliability are prerequisites for the use of a PET tracer in the evaluation of DAT in pharmacological challenges and/or animal models of brain disorders. In this study, the non-invasive DAT quantification using \([18F]\)LBT-999 in the striatum assessed by the BP\textsubscript{ND} was reproducible with low variability ranging from 8 to 14%, depending on the model used. The reliability of DAT quantification was high in this region, reaching for example an ICC of 0.90 using the SRTM2 model. In the SN/VTA where the dopaminergic cell bodies are localized, the variability was much higher (26–58%) and the reliability was lower than in the striatum, probably due to the small size of this brain region that renders it more sensitive to misalignment and more affected by partial volume effects. In both regions, lowest reproducibility and reliability were obtained for the MRTM model, which is known to be noisier due to the use of late data only.

The variability found here in the striatum was comparable to those reported in several test-retest studies in rodents for other PET tracers of the dopaminergic system such as the DAT tracers \([1^{18}F]\)FECT (7.7%, [28]) and \([1^{11}C]\)methylphenidate (6%, [21]), or the D\textsubscript{2/3} receptors tracer \([1^{11}C]\)raclopride (14%; [28] and 8.3%, [29]).

The selectivity of in vivo binding of LBT-999 to the DAT versus the serotonergic and noradrenergic transporters in the rat brain had already been assessed [11]. The present data confirmed this high selectivity as demonstrated by rapid and strong decrease in the striatal accumulation of the tracer after inhibition of the binding by acute administration of GBR12909.

An interesting feature of \([18F]\)LBT-999 is its ED\textsubscript{50} of 0.02 mg/kg. In fact, such a value implies that the maximum occupancy of the tracer on the DAT is very close to occupancies required for being at tracer dose [30]. Therefore, the use of \([18F]\)LBT-999 in our conditions satisfies the radiotracer kinetic modeling assumptions despite the pharmacological constraints related to small animal imaging.

To complete the in vivo characterization of \([18F]\)LBT-999 binding, we performed a pharmacological test with amphetamine in order to assess its sensitivity to variations of synaptic dopamine levels. Amphetamine is a substrate for DAT that competitively inhibits dopamine (DA) uptake [31]. In addition, a number of in vitro studies
showed that amphetamine is also able to induce DAT internalization, associated with a reduction in extracellular DA uptake [32]. It seems that in vivo amphetamine exposure also reduces DAT activity even if this reduction is not related to change in DAT cellular localization [33]. Based on microdialysis studies [34,35], it can be extrapolated that the dose of amphetamine we used induced a 2- to 3-fold increase in the striatal endogenous DA level, and was accompanied with a reduction in DAT activity. We observed that an acute pre-injection of amphetamine (2 mg/kg) induced a mean 50% decrease of $[^{18}F]LBT$-999 BPND in the striatum while a 44–72% reduction was observed in the SN/VTA. The variability of the BPND values observed in the SN/VTA was probably due to its small size as discussed above.

The level of reduction in $[^{18}F]LBT$-999 binding after amphetamine challenge was in the same order of magnitude than that obtained in vivo with D2/3 receptor antagonists such $[^{11}C]$raclopride [36] and $[^{18}F]$fallypride [37], and was in accordance to that already shown for the

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**Fig. 3.** Mean time-activity curves of $[^{18}F]LBT$-999 in the striatum and cerebellum before and after intravenous injection of GBR12909 (1 mg/kg; n = 5) (A). DVR-1 values in the striatum averaged before (21–36 minutes) and after (57–70 minutes) injection of GBR12909 (B).

**Fig. 4.** Representative coronal $[^{18}F]LBT$-999 images in a same animal without (left) or with (right) a pre-injection of amphetamine (2 mg/kg) (A). Mean TACs in the striatum, SN/VTA, and cerebellum in animals without (Baseline) or with (Amphetamine) a pre-injection of amphetamine (B) (n = 6).
**Table 3**

<table>
<thead>
<tr>
<th>Method Region</th>
<th>BPND Basal</th>
<th>BPND Amphet</th>
<th>% Decrease</th>
</tr>
</thead>
<tbody>
<tr>
<td>Logan Striatum</td>
<td>4.78 ± 0.61</td>
<td>2.30 ± 0.14</td>
<td>52</td>
</tr>
<tr>
<td>SN/VTA</td>
<td>0.37 ± 0.04</td>
<td>0.12 ± 0.02</td>
<td>68</td>
</tr>
<tr>
<td>SRTM Striatum</td>
<td>5.07 ± 0.63</td>
<td>2.48 ± 0.11</td>
<td>51</td>
</tr>
<tr>
<td>SN/VTA</td>
<td>0.46 ± 0.04</td>
<td>0.20 ± 0.02</td>
<td>57</td>
</tr>
<tr>
<td>SRTM2 Striatum</td>
<td>5.32 ± 0.67</td>
<td>2.50 ± 0.11</td>
<td>53</td>
</tr>
<tr>
<td>SN/VTA</td>
<td>0.50 ± 0.03</td>
<td>0.28 ± 0.02</td>
<td>44</td>
</tr>
<tr>
<td>MRTM Striatum</td>
<td>5.37 ± 0.59</td>
<td>2.94 ± 0.23</td>
<td>45</td>
</tr>
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<td>SN/VTA</td>
<td>0.99 ± 0.10</td>
<td>0.34 ± 0.06</td>
<td>66</td>
</tr>
<tr>
<td>MRTM2 Striatum</td>
<td>5.26 ± 0.63</td>
<td>2.56 ± 0.09</td>
<td>51</td>
</tr>
<tr>
<td>SN/VTA</td>
<td>0.53 ± 0.02</td>
<td>0.15 ± 0.05</td>
<td>72</td>
</tr>
<tr>
<td>DVR-1 Striatum</td>
<td>6.37 ± 0.78</td>
<td>2.62 ± 0.26</td>
<td>59</td>
</tr>
<tr>
<td>SN/VTA</td>
<td>0.34 ± 0.07</td>
<td>0.04 ± 0.05</td>
<td>88</td>
</tr>
</tbody>
</table>

Animals (n = 6) were explored with [18F]LBT-999 in basal conditions (Basal) or after receiving an i.v. injection of amphetamine (Amphet) at the dose of 2 mg/kg, 20 minutes before the tracer injection. Results are expressed as mean ± SEM; n = 6.

**SPECT DAT tracer [99mTc]TRODAT [38].** As described in this last study, it would be interesting to further investigate how the binding of [18F]LBT-999 could be in vivo altered by different doses of amphetamine or other potential competitors. This radiotracer could therefore be used in animal models of neuropsychiatric disorders such as ADHD, and bring complementary information to the D2/3 receptors availability in animal models of neuropsychiatric disorders such as ADHD, and other potential competitors. This radiotracer could therefore be used in vivo.

**Together, the present data demonstrated that [18F]LBT-999 is a PET tracer of the DAT allowing the quantification of the 


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