

*Supporting Materials for*

**Specific drug delivery efficiently induced human breast tumor  
regression using a novel lipoplex by non-covalent association with  
anti-tumor antibodies**

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### **Targeting ability of drug/LPPC/Herceptin complexes *in vitro***

MCF7 cells ( $5 \times 10^5$  per each well) were coated in a 96-well microtiter plate overnight, and the plate was blocked with 1% skim milk for 1 h. The immunocomplexes such as Cur/LPPC/Herceptin or Cur/LPPC/Retuximab were applied to the MCF7 cell-coated plate and incubated for 1 h on ice. Both immunocomplexes contains 40  $\mu\text{g}$  LPPC and 8.7 mM of curcumin. After washing the unbound immunocomplexes with PBST (0.05% Tween 20 in PBS), the cell-bound immunocomplexes were dissolved by DMSO, and the curcumin concentration was measured using an ELISA reader at 450 nm.

### **The pharmacokinetics of curcumin *in vivo***

Balb/c mice were intravenously injected with PBS, curcumin, curcumin/LPPC or curcumin/LPPC/Herceptin, and the blood samples were harvested from the tail vein at 0.5, 1, 8, 24, and 36 h. After centrifugation ( $1,100 \times g$ ,  $4^\circ\text{C}$ , 25 min), plasma samples were obtained and extracted with a 2-fold volume of ethyl acetate. The ethyl acetate extracts were evaporated, dissolved in 100  $\mu\text{l}$  of DMSO, and assessed using an ELISA reader at 450 nm. All pharmacokinetic analyses were performed using the WinNonlin Standard Edition Version 5.3 (Scientific Consulting Inc., Apex, NC, USA). A non-compartmental model was utilized for both data fitting and parameter

estimation.

### **The bio-distribution of curcumin and tissue damage *in vivo***

NOD-SCID mice received subcutaneous injections of SKBR3 cells ( $1 \times 10^7$  cells in 100  $\mu$ l of PBS). After the injection period, the animals were sacrificed. The tumors and organs were harvested, fixed in 10% buffered formalin saline and then embedded in paraffin blocks. Tissue sections (4- $\mu$ m thickness) were prepared and stained with hematoxylin and eosin (H&E). The tissue morphology was examined using a microscope with 400X magnification. The fluorescence of curcumin and doxorubicin in the pathological sections was photographed under the fluorescence microscopy.

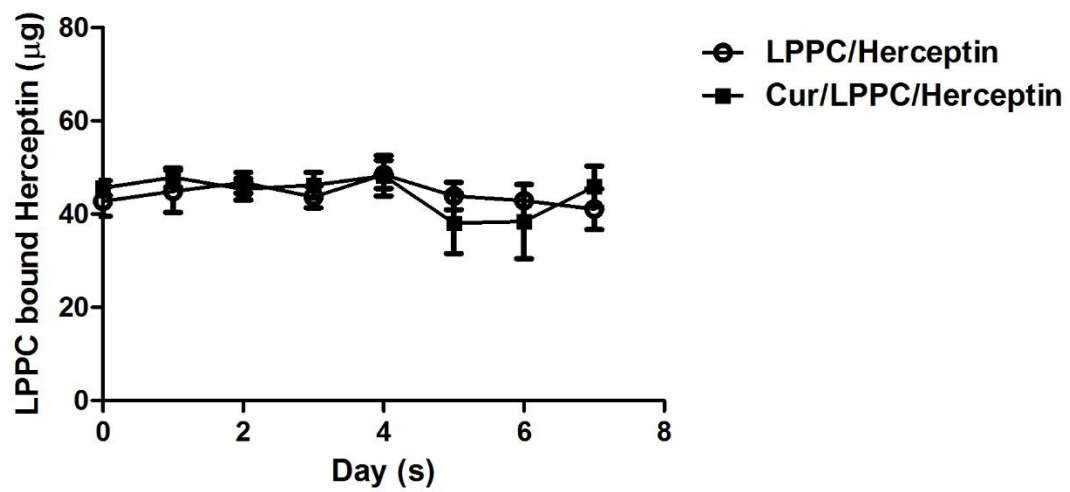


Figure S1. Stabilities of LPPC/Herceptin or Cur/LPPC/Herceptin. The amounts of LPPC bound Herceptin were measured by the Bradford assay. Representative data are shown as the mean  $\pm$  SD of two independent experiments (n=4).

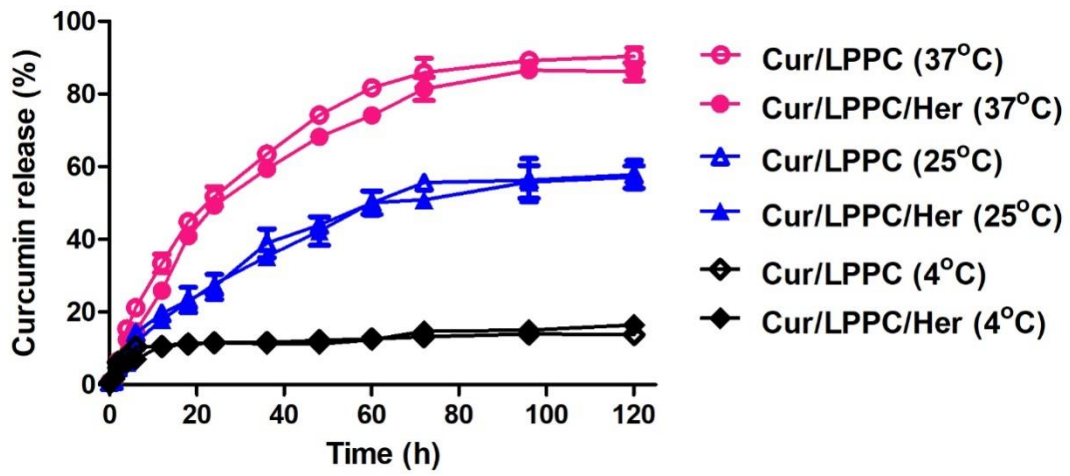


Figure S2. The effect of Herceptin association on curcumin release from the curcumin/LPPC complexes. Curcumin/LPPC or Curcumin/LPPC/Herceptin complexes were incubated in serum (10% FBS in PBS) at 0, 25 or 37°C. The concentration of curcumin in each supernatant was measured at various incubation time points and compared with the total curcumin concentration. All values represent the mean  $\pm$  SD (n=3).

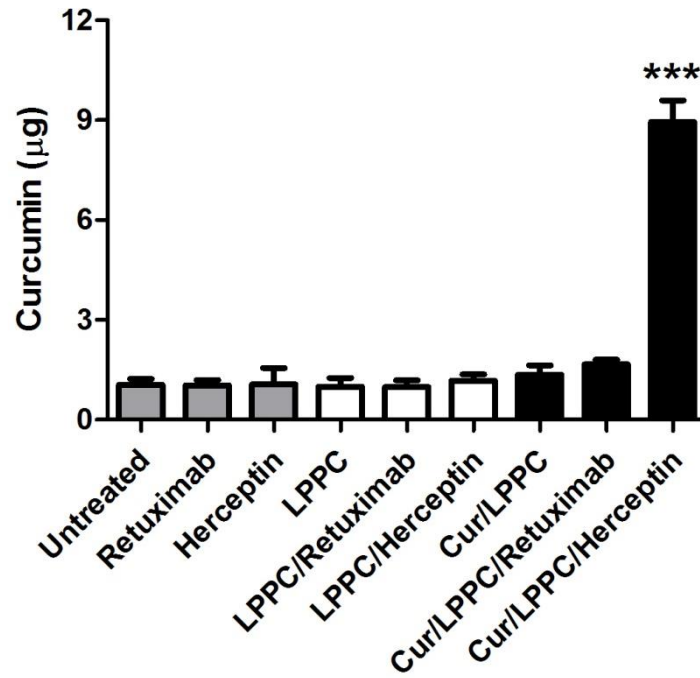
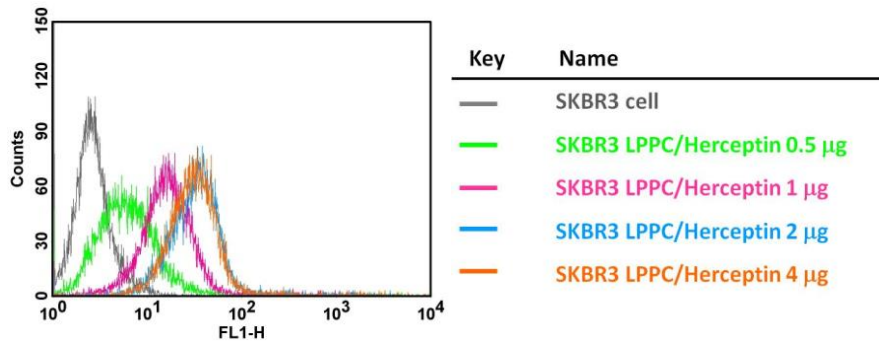
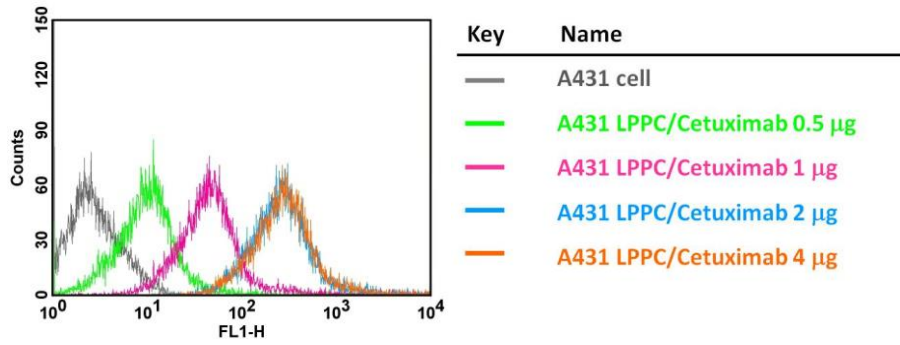
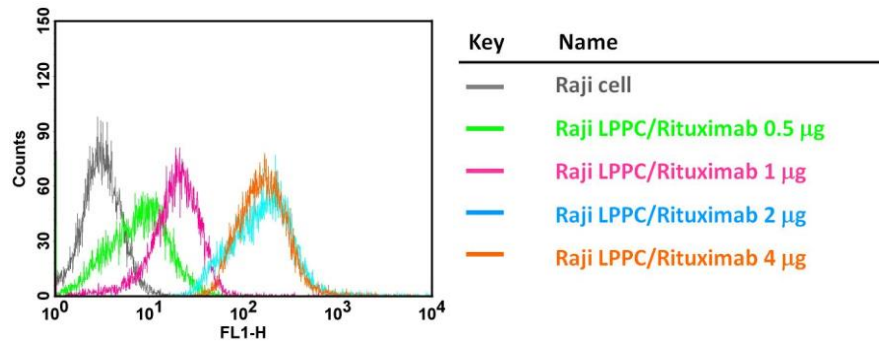
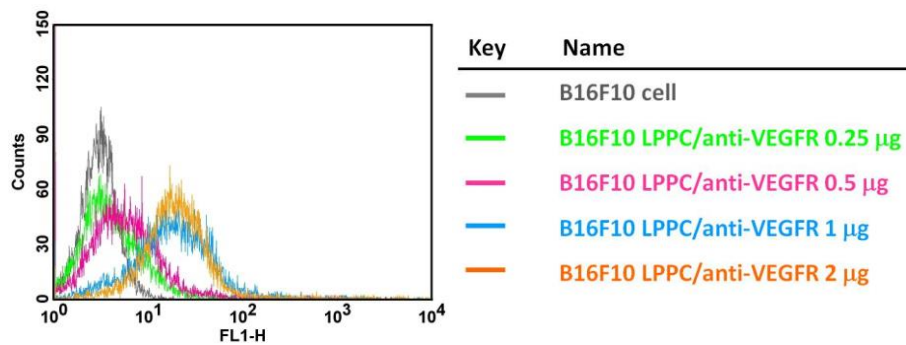


Figure S3. The effect of curcumin loading on the cell targeting of Cur/LPPC/Herceptin *in vitro*. MCF-7 cells were treated with Cur/LPPC/Herceptin for 1 h on ice. LPPC/Herceptin, LPPC/Retuximab, Cur/LPPC or Cur/LPPC/Retuximab were used as control. All immunocomplexes contained 40 µg LPPC and 8.7 mM of curcumin. The cell-bound Cur/LPPC/Herceptin were dissolved by DMSO and then the concentrations of curcumin were analyzed. All values represent the mean  $\pm$  SD, \*\*\* $p < 0.001$  (n=4).

**A****B****C****D**



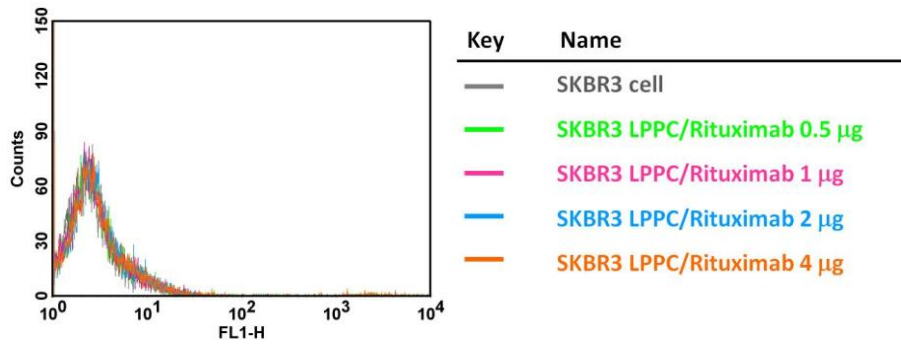
**E**

Figure S4. Cell targeting of DiO-labeled LPPC/antibody complexes. (A) SKBR3 (HER2 positive), (B) A431 (EGFR positive), (C) Raji (CD20 positive) and (D) B16 melanoma(VEGF positive)cells werestained with the DiO-labeled LPPC complexwith various antibodies at different doses. DiO-LPPC/Herceptin complex targeted the SKBR3 cells; DiO-LPPC/Cetuximab complex targeted the A431 cells; DiO-LPPC/Rituximab complex targeted the Raji cells; DiO-LPPC/anti-VEGFR1 antibodycomplex targeted theB16F10 melanoma cells. (E) DiO-LPPC-Rituximab complex did not target the SKBR3 cells.

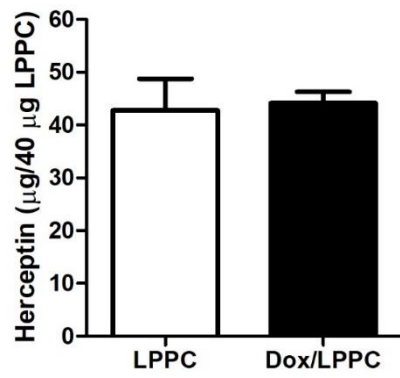
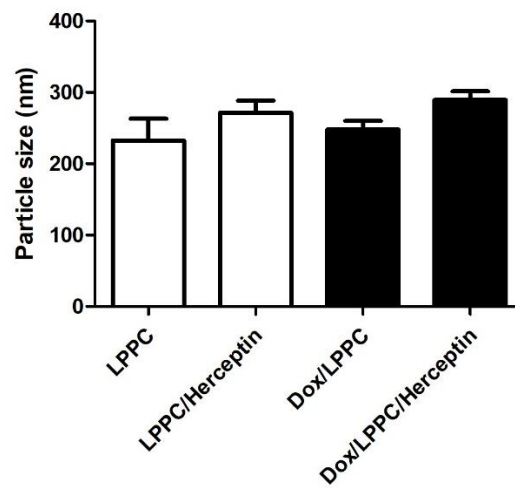
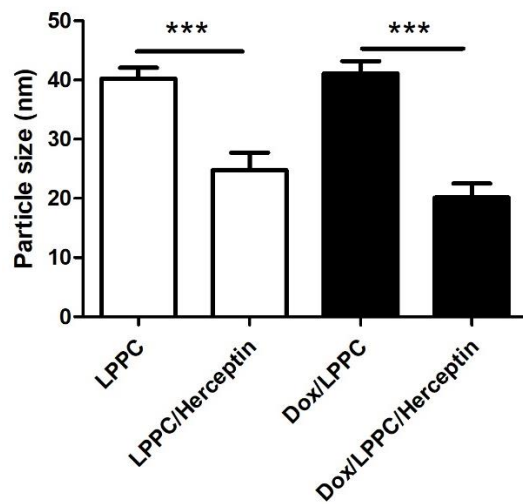
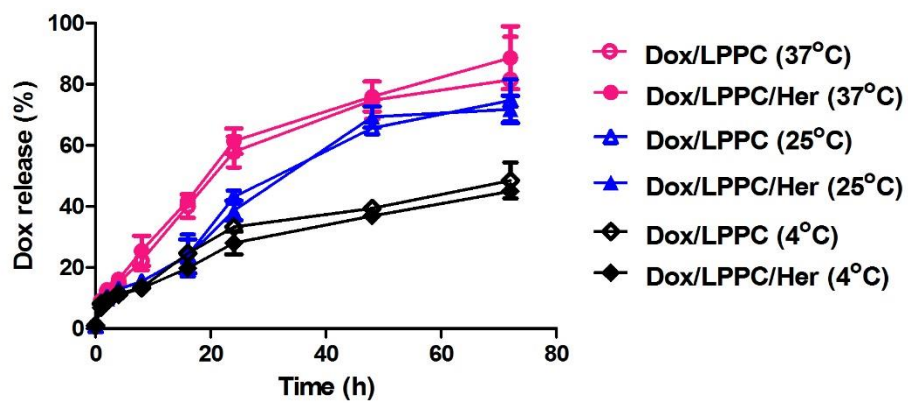
**A****B****C****D**

Figure S5. The characteristics of the Dox/LPPC/Herceptin complex. (A) The maximal-binding capacity of Herceptin to Dox/LPPC. Dox/LPPC (40  $\mu\text{g}$ ) was incubated with different amounts of Herceptin, and the maximal amount of bound protein was analyzed with the Bradford Assay. (B) The particle size and (C) zeta-potential of the Dox/LPPC/Herceptin complex. All values represent the mean  $\pm$  SD (n=4). (D) Dox release from the Dox/LPPC complexes. Dox/LPPC or Dox/LPPC/Herceptin complexes were incubated in serum (10% FBS in PBS) at 0, 25 or 37°C. The concentration of Dox in each supernatant was measured at various incubation time points and compared with the total Dox concentration. All values represent the mean  $\pm$  SD (n=3).

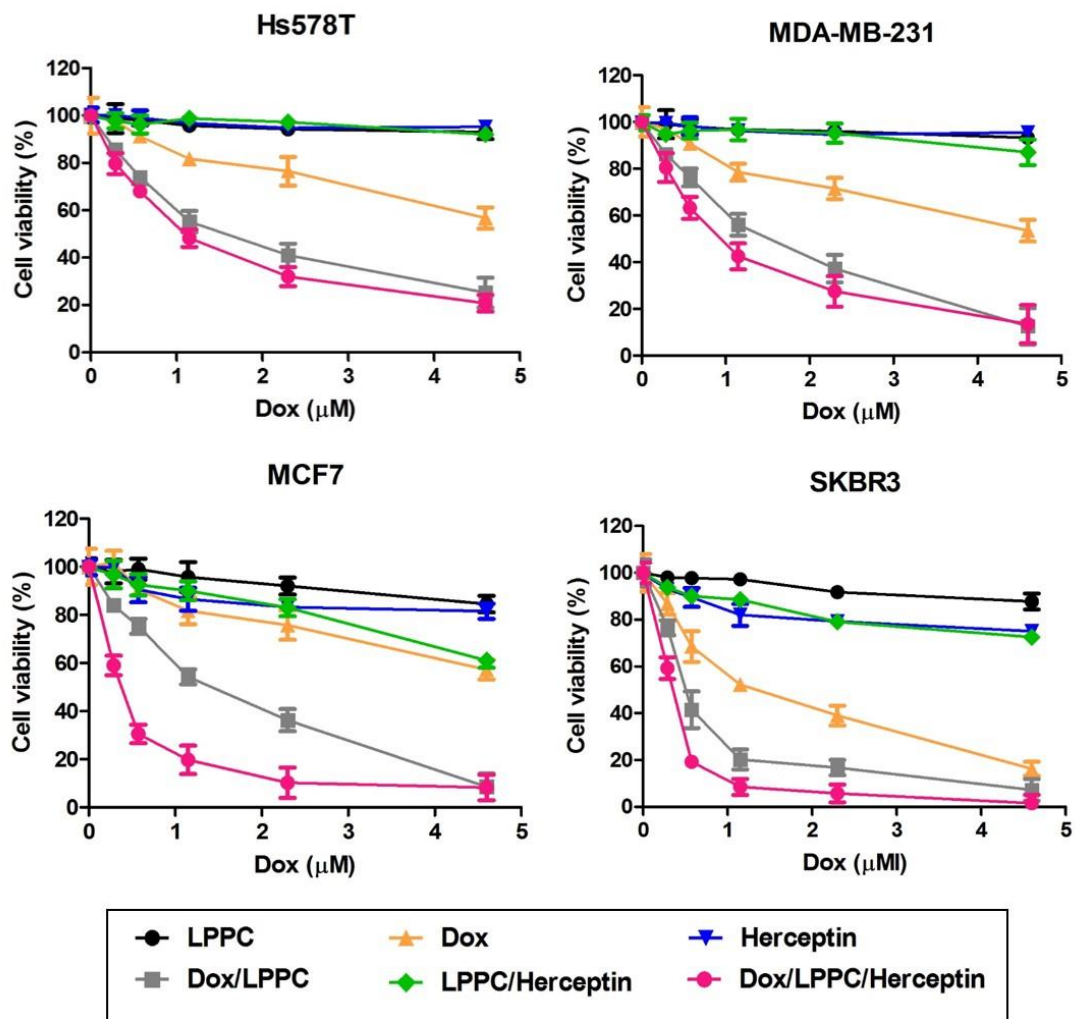


Figure S6. Cytotoxic effects of Dox/LPPC/Herceptin on HER2-negative or HER2-positive cell lines. Hs578T (HER2-), MDA-MB-231 (HER2-/+), MCF7 (HER2 +), and SKBR-3 (HER2++) cells were treated with 0 to 4.6 μM Dox for the treatment of Dox/LPPC/Herceptin for 48 h. The dosages of LPPC, Herceptin, and LPPC/Herceptin were the same as those used for the Dox/LPPC/Herceptin treatments. Cell viability was assessed by MTT assay (n=4).

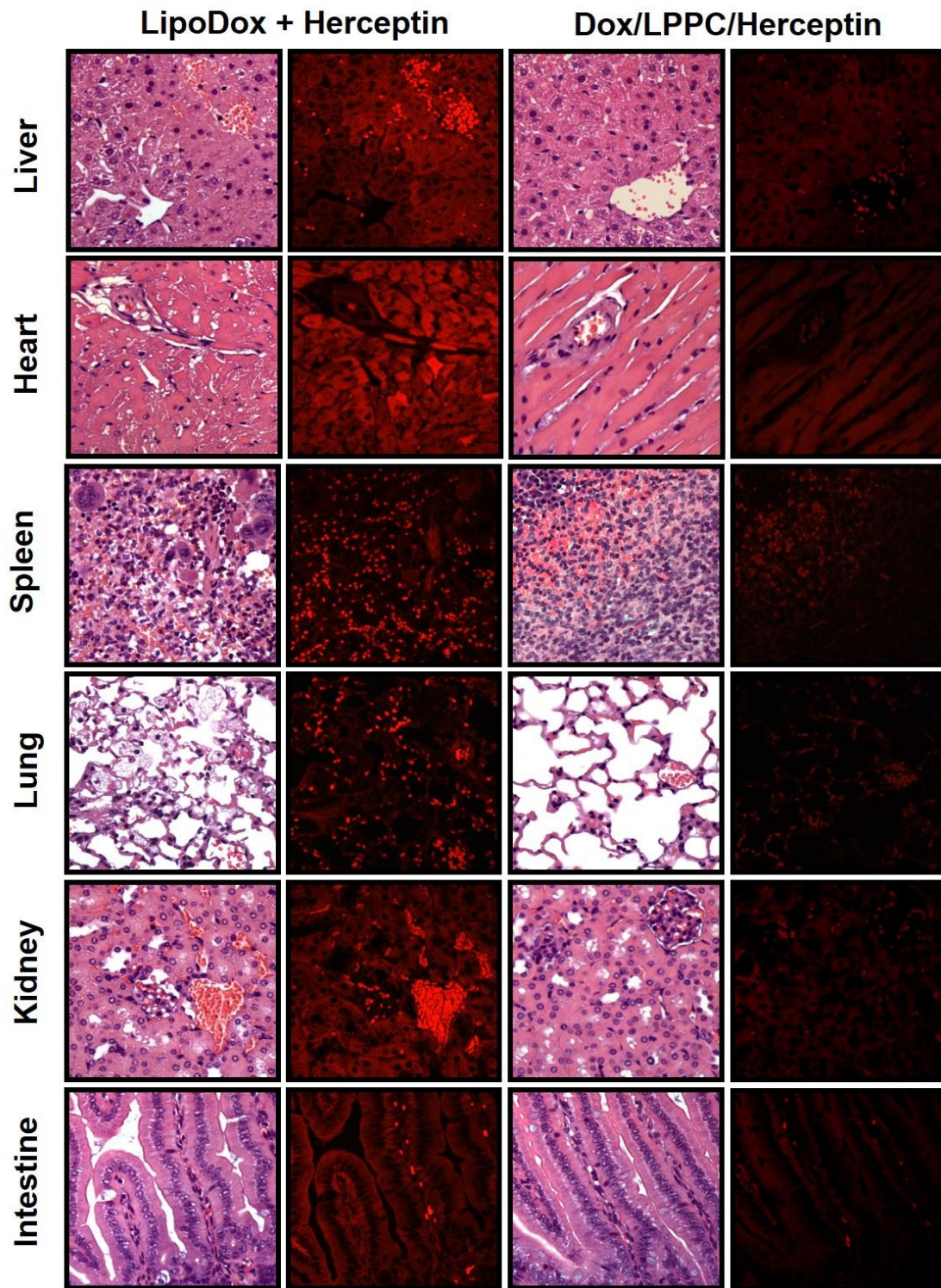


Figure S7. The bio-distribution of doxorubicin in normal tissue. NOD-SCID mice bearing SKBR3 tumors were injected intravenously with Lipodox plus either Herceptin or the Dox/LPPC/Herceptin complex at a dose of 5 mg doxorubicin/kg. The

mice were sacrificed at day 3. The histological sections of the organ samples were collected after sequential injections of Lipodox with either Herceptin or the Dox/LPPC/Herceptin complex. Dox accumulation was imaged using a fluorescent microscope; the red fluorescence indicates the Dox.

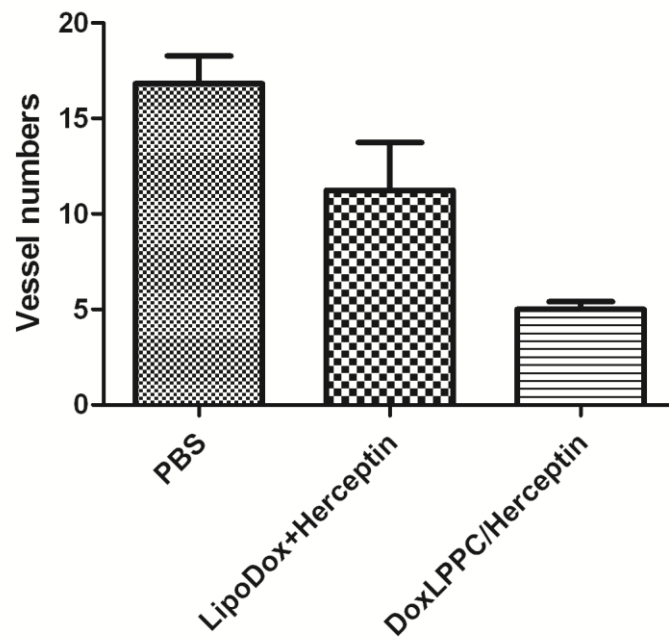


Figure S8. The anti-angiogenic activity of Dox/LPPC/Herceptin. SKBR3 cells were implanted s.c. into NOD-SCID mice. Lipodox with Herceptin or the Dox/LPPC/Herceptin complex were injected via i.v. at a dose of 5 mg doxorubicin/kg. After a 72-h treatment period, the vessel numbers in tumors were calculated. The data represent the means  $\pm$  SD (n=8).

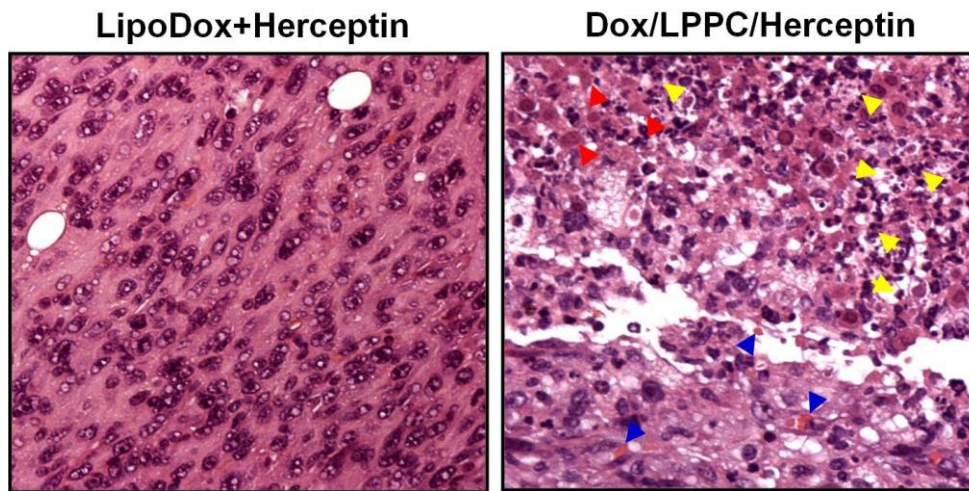


Figure S9. The levels of apoptosis and necrosis in Dox/LPPC/Herceptin-treated tumors. NOD-SCID mice bearing SKBR3 tumors were injected intravenously with Lipodox plus either Herceptin or the Dox/LPPC/Herceptin complex at a dose of 5 mg doxorubicin/kg. The mice were sacrificed at day 2. The histological sections of the tumor samples were collected after injection of the Dox/LPPC/Herceptin complex. Red arrows: cell necrosis; yellow arrows: apoptosis; blue arrows: hemorrhage.



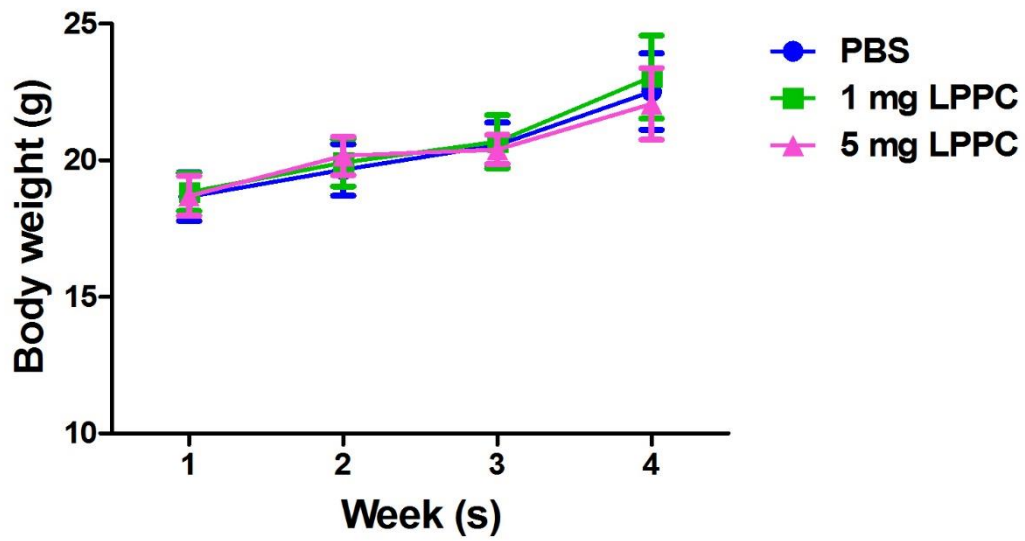


Figure S10. Average body weight of mice during treatment. BALB/c mice were treated with 5 mg LPPC per mouse for 4 weeks. The body weight of LPPC-treated mice were measured weekly. All values represent the mean  $\pm$  SD (n=6).

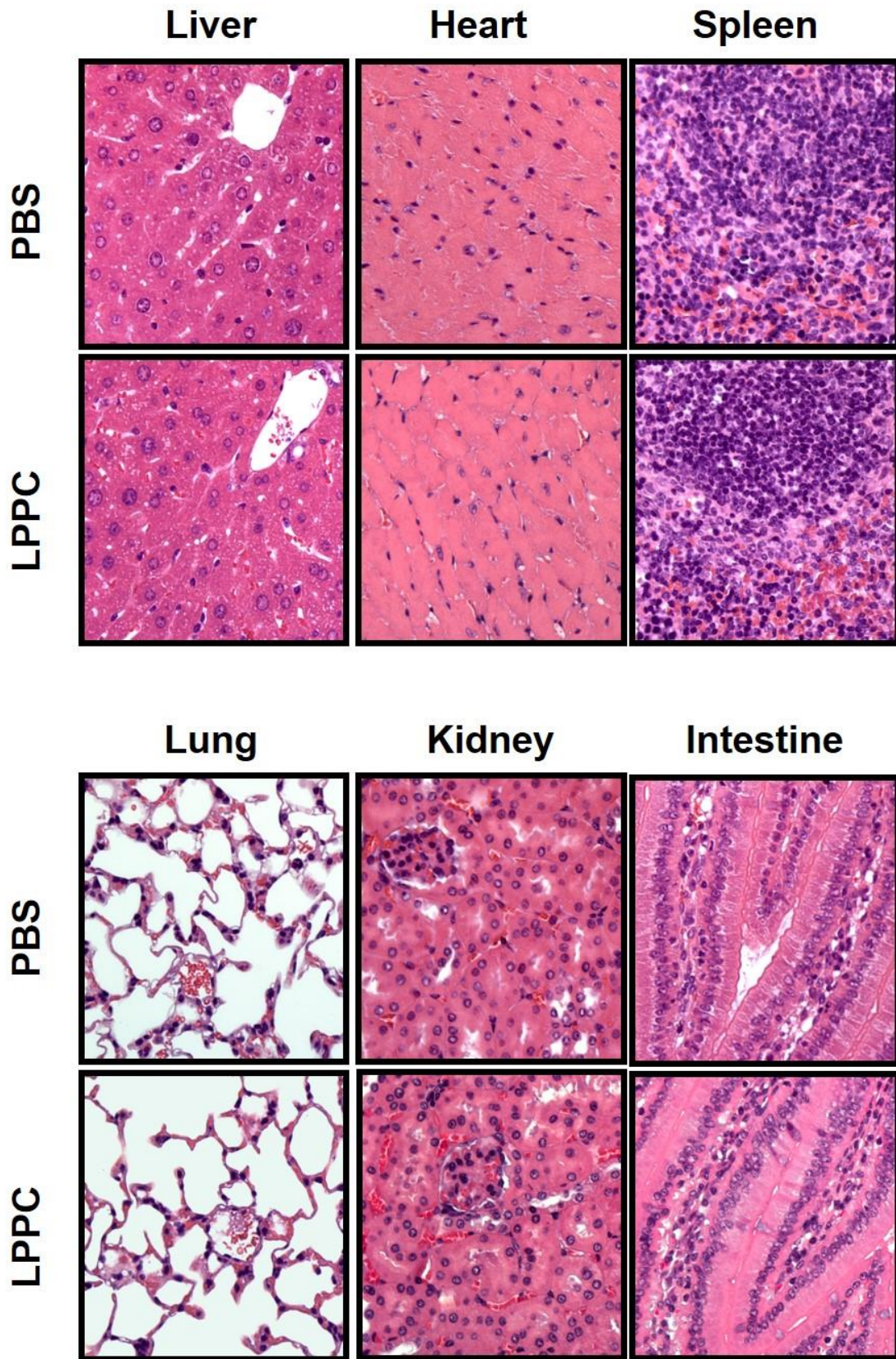


Figure S11. LPPC did not induce tissue damage in normal tissues. The BALB/cmice were treated with 5 mg LPPC per mouse for 4 weeks (n=6). The organs were

collected and evaluated by H&E staining (400X).

Table S1. The particle sizes and zeta-potentials of curcumin/LPPC/Herceptin.

Groups	Particle size (nm)	PDI	Zeta-potential (mV)
LPPC	232.5 ± 30.8	0.19 ± 0.04	40.2 ± 1.8
LPPC/Herceptin	271.6 ± 17.0	0.19 ± 0.12	24.8 ± 3.0
Cur/LPPC	249.6 ± 25.3	0.23 ± 0.09	40.2 ± 2.0
Cur/LPPC/Herceptin	278.7 ± 22.8	0.17 ± 0.12	24.5 ± 1.1
Dox/LPPC	248.1 ± 12.2	0.42 ± 0.05	41.1 ± 2.1
Dox/LPPC/Herceptin	289.4 ± 12.3	0.37 ± 0.13	20.2 ± 2.4

\* The data represent the means ± SD (n=4).

Table S2. Effects of curcumin/LPPC/Herceptin on proliferation in different cell lines.

Cells	IC50 ( $\mu\text{M}$ )		
	Curcumin	Cur/LPPC	Cur/LPPC/Herceptin
Hs578T	12.46 $\pm$ 1.65	0.87 $\pm$ 0.07	0.59 $\pm$ 0.06
MDA-MB-231	12.15 $\pm$ 5.23	1.23 $\pm$ 0.12	0.57 $\pm$ 0.03
MCF7	10.21 $\pm$ 1.13	0.96 $\pm$ 0.23	0.27 $\pm$ 0.09
SKBR3	15.73 $\pm$ 3.70	1.28 $\pm$ 0.14	0.23 $\pm$ 0.01

\* All values are mean  $\pm$  SD of three independent experiment (n=6).

Table S3. Effects of Dox/LPPC/Herceptin on proliferation in different cell lines.

Cells	IC50 ( $\mu\text{M}$ )		
	Dox	Dox/LPPC	Dox/LPPC/Herceptin
Hs578T	6.55 $\pm$ 1.22	1.58 $\pm$ 0.37	1.14 $\pm$ 0.15
MDA-MB-231	5.58 $\pm$ 1.02	1.54 $\pm$ 0.30	0.95 $\pm$ 0.12
MCF7	6.02 $\pm$ 0.71	1.44 $\pm$ 0.22	0.38 $\pm$ 0.04
SKBR3	1.32 $\pm$ 0.14	0.51 $\pm$ 0.06	0.35 $\pm$ 0.02

\* All values are mean  $\pm$  SD of two independent experiment (n=4).

Table S4. The serum albumin (ALB), total protein (TP) and glucose (GLU) levels of LPPC-treated mice.

Biochemical factors	Treated period (weeks)	Control (PBS)	PEG <sub>1500</sub> / LPPC	
			1 mg	5 mg
ALB (g/dL)	1	3.65 ± 0.12	3.56 ± 0.05	3.64 ± 0.04
	2	3.50 ± 0.54	3.51 ± 0.25	3.49 ± 0.37
	3	3.50 ± 0.27	3.54 ± 0.21	3.51 ± 0.23
	4	3.56 ± 0.26	3.83 ± 0.28	3.56 ± 0.26
TP (g/dL)	1	5.43 ± 0.17	5.53 ± 0.02	5.62 ± 0.16
	2	5.39 ± 0.24	5.26 ± 0.14	5.63 ± 0.10
	3	5.61 ± 0.29	5.37 ± 0.21	5.11 ± 0.14
	4	5.35 ± 0.44	5.76 ± 0.53	5.33 ± 0.45
GLU (mg/dL)	1	180.2 ± 35.3	156.3 ± 12.0	157.6 ± 25.5
	2	124.3 ± 14.4	117.1 ± 14.6	120.2 ± 14.4
	3	192.5 ± 26.3	173.9 ± 27.8	151.7 ± 14.4
	4	172.7 ± 56.0	222.3 ± 41.3	176.5 ± 54.0

\* All values represent the mean ± SD (n=6).

Table S5. The serum alanine aminotransferase (ALT), aspartate aminotransferase (AST), creatine kinase (CK) and lactate dehydrogenase (LDH) levels of LPPC-treated mice.

Biochemical factors	Treated period (weeks)	Control (PBS)	PEG <sub>1500</sub> /LPPC	
			1 mg	5 mg
ALT (IU/L)	1	58.0 ± 4.1	58.3 ± 4.2	60.0 ± 1.6
	2	56.2 ± 1.3	56.5 ± 9.4	55.2 ± 7.1
	3	60.7 ± 7.0	57.4 ± 3.7	58.8 ± 9.0
	4	59.1 ± 9.4	58.3 ± 8.3	57.5 ± 6.7
AST (IU/L)	1	135.9 ± 60.6	126.1 ± 17.2	139.3 ± 60.6
	2	136.6 ± 35.8	137.4 ± 35.3	134.7 ± 40.3
	3	137.0 ± 45.4	137.2 ± 45.2	138.8 ± 34.8
	4	137.2 ± 29.6	136.7 ± 22.4	138.5 ± 35.1
CK (IU/L)	1	476.3 ± 121.2	474.4 ± 101.4	446.5 ± 141.8
	2	444.3 ± 244.4	479.6 ± 122.3	485.3 ± 288.2
	3	459.4 ± 156.3	462.0 ± 132.2	472.1 ± 276.7
	4	468.0 ± 139.7	469.8 ± 181.4	477.8 ± 188.7
LDH (IU/dL)	1	386.0 ± 40.5	385.5 ± 12.3	381.7 ± 22.2
	2	388.0 ± 13.2	379.0 ± 28.6	383.1 ± 41.9
	3	371.1 ± 45.3	380.8 ± 50.1	372.9 ± 40.8
	4	385.3 ± 36.2	383.2 ± 30.4	383.8 ± 38.5

\* All values represent the mean ± SD (n=6).



Table S6. The creatinine, urea and lactose levels of LPPC- treated mice.

Biochemical factors	Treated period (weeks)	Control (PBS)	PEG <sub>1500</sub> /LPPC	
			1 mg	5 mg
CRE (mg/dL)	1	0.18 ± 0.01	0.18 ± 0.01	0.18 ± 0.02
	2	0.26 ± 0.05	0.23 ± 0.09	0.26 ± 0.09
	3	0.19 ± 0.03	0.20 ± 0.01	0.16 ± 0.03
	4	0.18 ± 0.06	0.21 ± 0.06	0.19 ± 0.02
Urea (mg/dL)	1	22.0 ± 4.0	19.7 ± 2.6	20.7 ± 1.2
	2	25.6 ± 0.8	19.4 ± 1.1	23.0 ± 1.8
	3	35.3 ± 4.2	27.1 ± 1.6	22.0 ± 3.1
	4	29.8 ± 6.1	31.9 ± 3.9	27.7 ± 1.1
Lactate (mg/dL)	1	109.1 ± 15.9	112.2 ± 16.8	121.8 ± 17.0
	2	104.0 ± 71.6	105.1 ± 56.4	99.9 ± 62.2
	3	96.9 ± 53.5	89.9 ± 44.3	90.9 ± 3.8
	4	117.2 ± 34.8	112.2 ± 25.0	89.8 ± 20.5

\* All values represent the mean ± SD (n=6).

Table S7. Pharmacokinetic parameters of curcumin in mice after i.v. injection with curcumin, curcumin/LPPC or curcumin/LPPC/Herceptin.

Pharmacokinetic parameters	Curcumin†	Cur/LPPC	Cur/LPPC/Herceptin
C <sub>max</sub> (µg/mL)	15.5 ± 0.6	15.9 ± 0.7	16.7 ± 1.4
AUC (minµg/mL)	115.4 ± 22.9	307.7 ± 23.2*	343.2 ± 18.4*
t <sub>1/2</sub> (h)	< 1	13.1 ± 2.3	13.8 ± 2.7
Cl (mL/min/kg)	353.7 ± 70.3	130.5 ± 10.0*	116.7 ± 6.1*
MRT (min)	0.49 ± 0.4	18.4 ± 3.2*	19.0 ± 4.4*
V <sub>ss</sub> (mL/kg)	3549.5 ± 1322.2	2458.8 ± 358.3	2318.0 ± 395.9

Data are expressed as mean ± SD, \*  $p < 0.01$ , significantly different from the curcumin group.

† The concentrations of curcumin in all groups are 40 mg/kg.

C<sub>max</sub>: maximum concentration; AUC: area concentration versus time curve; t<sub>1/2</sub>: elimination half-life; Cl: clearance; MRT: mean resident time; V<sub>ss</sub>: steady-state volume of distribution.