

Supporting Information

Drug Conjugation Affects Pharmacokinetics and Specificity of Kidney-Targeted Peptide Carriers

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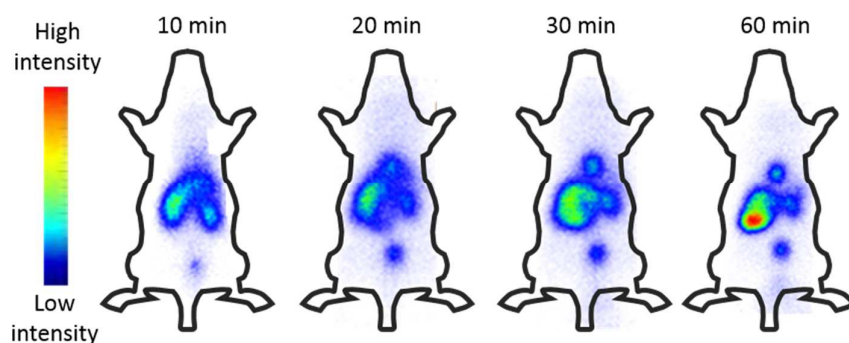


Figure S1: Time course of the scintigraphic distribution of LA-¹²⁵I-y(MARIA)₃ after bolus injection in NMRI mouse. The conjugate shows a changed pharmacokinetic in comparison to bare peptide ¹²⁵I-y(MARIA)₃. Changed excretion route over bile and liver can be assumed ([Error! Reference source not found.Figure S2](#)).

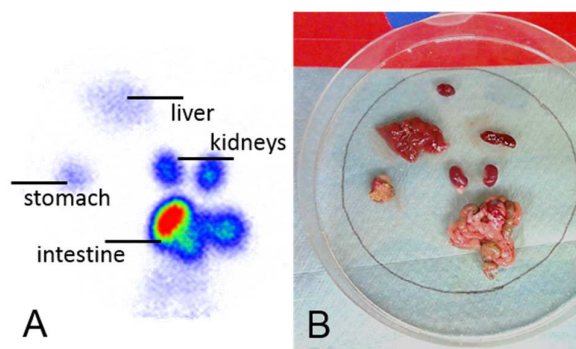


Figure S2: Scintigraphic imaging of organs 60 min after bolus injection of LA-¹²⁵I-y(MARIA)₃ in NMRI mouse. **(A)** Majority of detected radiation was found in intestine, which indicates a changed excretion route of the peptide via bile into liver and intestine. Less amounts are detected in kidneys, liver and stomach. **(B)** Corresponding organs.

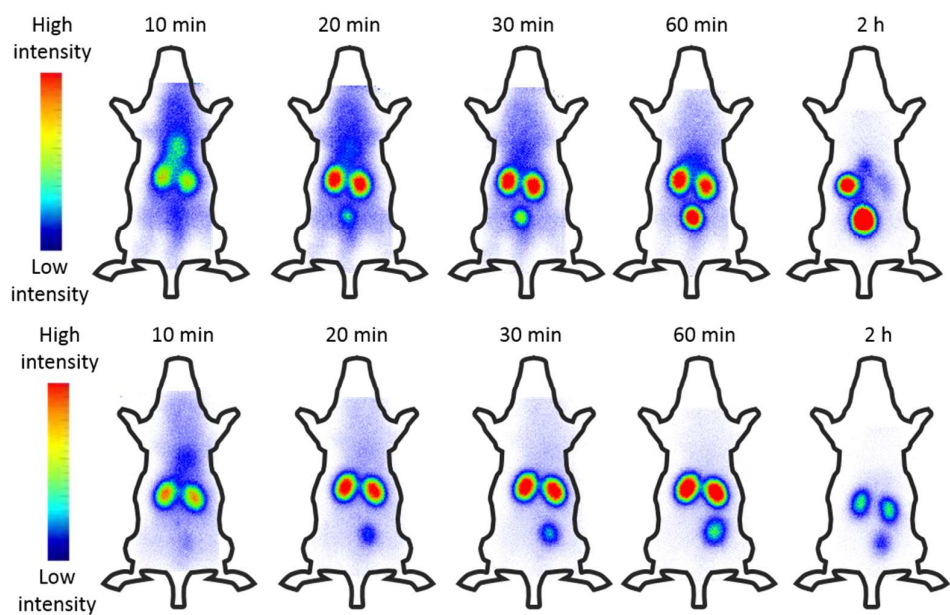


Figure S3: Time course of the scintigraphic distribution of (KKEEE)₃K after conjugation with the hydrophilic caffeic acid *N*-terminally versus double ϵ -binding after bolus injection in NMRI mouse. **Upper row:** *N*-terminally conjugated, caffeic acid-¹²⁵I-y(KKEEE)₃K. **Bottom row:** ϵ -bounded, ¹²⁵I-y(KKK(ϵ -caffeic acid)(EEEKK)₂K(ϵ -caffeic acid) showed a higher specificity in comparison to *N*-terminally bounded caffeic acid conjugate, even after double loading.

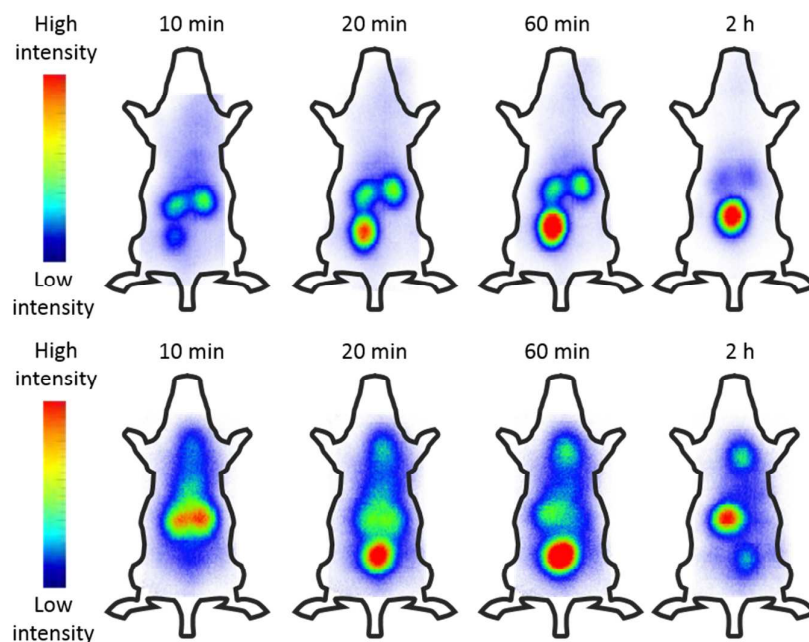


Figure S4: D-tyrosine versus L-tyrosine radiolabeling. **Upper Row:** The radiolabeling of $(K\epsilon)_{10}Y-^{125}I$ via a D-tyrosine results in a tracer with stable accumulation in the kidneys followed by excretion to the bladder. **Bottom row:** In contrast, scintigraphic distribution of $(K\epsilon)_{10}Y-^{125}I$ via radiolabeling of a naturally L-tyrosine leads to distribution in upper body followed by accumulation in stomach and thyroid. This indicates the deiodation of the peptide tracer.

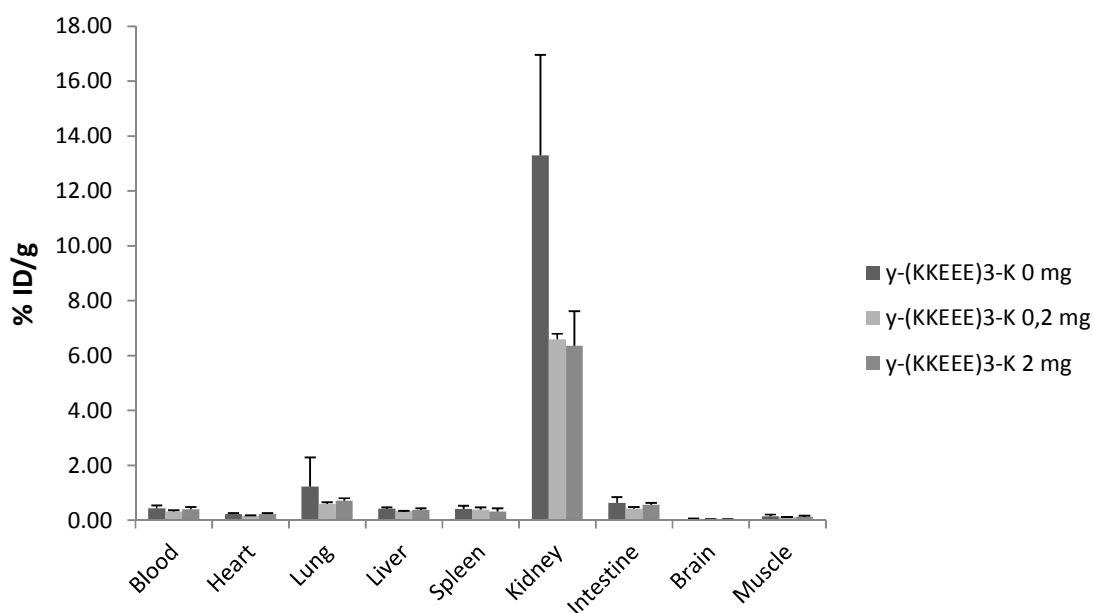


Figure S5: Competitive ligand-receptor study of two different peptides. Figure shows biodistribution study of ^{177}Lu -DOTATOC, 60 minutes after application into three female NMRI-mice per group. The simultaneous application of the peptide γ -(KKEEE)₃-K lead to a decrease of the renal accumulation of ^{177}Lu -DOTATOC by ~50%.