At this time it is impossible to differentiate the mechanism of drug action with the limited data at hand. There are two apparent areas for further investigation. The first deals with the effect of methylphenidate on fixation reactions of CO₂ involved in cholesterol formation. The second possibility, the differential incorporation of methyl- and carboxyl-labeled acetate into the sterol nucleus, suggests some change in the tricarboxylic acid cycle. Further work is necessary before the mechanism of methylphenidate on brain cholesterol can be elucidated.

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REFERENCES

- 1. J. J. KABARA, J. T. McLaughlin and C. A. Riegel, Fed. Proc., 19 (1960).
- 2. J. J. KABARA, J. T. McLaughlin and C. A. Riegel, in *Drugs Affecting Lipid Metabolism*, pp. 221-23. Elsevier, Amsterdam (1961).
- 3. J. J. KABARA, Brain Cholesterol VIII: The Effect of Methylphenidate (Ritalin) on the Incorporation of Specifically Labeled Acetate. *Proc. Soc. exp. biol. med.*, 118, 905 (1965).
- 4. J. J. KABARA, J. T. McLAUGHLIN and C. A. RIEGEL, Analyt. Chem. 33, 305 (1961).
- 5. J. J. Kabara, N. Spafford, N. Freeman and M. McKendry, *Proceedings of the Symposia on Advances in Tracer Methodology*. Plenum Press, New York (1962).
- 6. J. J. KABARA and G. T. OKITA, Estratto da Biochimica e Biologia Sperimentale 2, 255 (1963).
- 7. J. J. KABARA, in *Proceedings VIIth Congress on World Federation of Neurology*, Rome, Italy (1961).
- 8. J. J. KABARA, in Progress in Brain Research, vol. 9, p. 155. Elsevier, Amsterdam (1964).
- 9. J. J. KABARA, Tex. Rep. Biol. Med. 22, 126 (1964).
- 10. Ibid., p. 134.
- 11. Ibid., p. 143.

Biochemical Pharmacology, 1965, Vol. 14, pp. 1930-1934. Pergamon Press Ltd., Printed in Great Britain.

Fate of intravenously injected iodate and periodate

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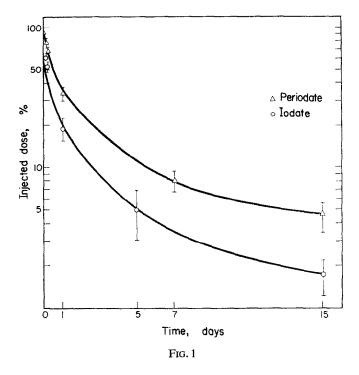
Because its relation with thyroid physiology iodide metabolism has been thoroughly studied but $little^{1-3}$ is known about the distribution and elimination of iodate and periodate after intravenous administration.

The ¹³¹I-iodate has been prepared by oxidation of ¹³¹I-iodine with an excess of sodium chlorate⁴ and the ¹³¹I-metaperiodate by oxidation of the ¹³¹I-iodate with chlorine in alkaline solution.⁵ The radiochemical purity of these labelled compounds was assayed chromatographically. 20 μ c of ¹³¹I-labelled iodate (specific activity 5 μ c/mg, or 10 μ c of ¹³¹I-labeled potassium metaperiodate (specific activity 10 μ c/mg) dissolved in 0·1 ml of distilled water, were injected into adult Wistar rats through the tail vein. Groups of 5 animals (three males and two females) were sacrificed at different intervals and the activity in organs and tissues was determined with a scintillation counter. After this, the organs were homogenized 0·01 N in sodium hydroxide and the supernatant sample analyzed by ascending chromatography on paper Whatman 3 MM and using n-propanol: water: 15 N ammonium hydroxide (30: 10: 5). With this solvent the R_f values are: Iodate 0·14–0·20, metaperiodate 0·00–0·02 and iodide 0·56–0·62.

The examination of the specific activity (count/min per g tissue) found in the various organs after the injection of ¹⁸¹I-labelled iodate (Table 1) shows a maximum during the first hour, with exception of the stomach, which has a maximum at 6 hr. This peak of stomach activity is accompanied by an increase in kidney, intestine, parotid gland, muscle and bone. In the ¹³¹I-labelled metaperiodate (Table 2) the maximum of specific activity was found at 6 hr after the injection and only the intestine presented its highest value before (3 hr).

The chromatographic analysis performed on the different tissues (Table 3) indicates that a considerable amount of radioactivity has been found in the liver as iodate.

The whole body counting (Fig. 1) shows a similar pattern of elimination for both iodate and metaperiodate. Fifty per cent of the injected radioactivity is eliminated under these experimental conditions, at 7 hr for the iodate and at 18 hr for the metaperiodate. All the values given in Tables 1 and 2 as well as in Fig. 1 have been corrected for the radioactive decay.



DISCUSSION

Immediately after the iodate injection it is distributed throughout the whole body. Later, the liver concentrates the iodate because after 24 hr no iodate was found in stomach and intestine, only 4 per cent appeared in kidney and 98 per cent in liver. According to all these observations the reduction of iodate to iodide occurs in the liver which later eliminates the iodide through the gastric mucose.

On the other hand the metaperiodate seems to be reduced to iodate as soon as it is injected and is metabolized as iodate. The correspondence between the maximum activity observed in the stomach and the increase in kidney, parotid gland, muscle and bone could be explained as a temporary increase in the blood activity by a reabsorption of the radioiodide through the intestine. The fact that iodate has not been found in intestine while it was present in the stomach (Table 3 periodate values at 1 hr) could be due to the stomach pH which assures its reduction to iodine according to the following redox reaction:

$$10_3 + 6H^+ + 5e \rightleftharpoons 1/2 I_2 + 3 H_2O$$

TABLE 1. VALUES OF THE RADIOACTIVITY FOUND IN THE DIFFERENT TISSUES AFTER THE INJECTION OF RADIOIODATE

		1 hr	3 hr	6 hr	1 day	5 days	15 days
Bone Brain	ಡಡ-⊏	+++++	++++	-H-H-+		$\begin{array}{c} 31 & 16 \\ 9 \pm 3 \\ 0.008 \pm 0.003 \end{array}$	$\begin{array}{c} 27 & 8 \\ 1 \pm 0.2 \\ 0.001 + 0.001 \end{array}$
Carcass* Excreta† Heart	ಎಎಎಇ.	1+1 +1	-H +H-	1-11 #1-	- ++	4.25 ± 1.86 93.36 15 ± 8	0.93 ± 0.31 98.21 6 ± 2
Intestine Kidney	ರದರ್ವ	0.48 ± 0.12 975 ± 125 6.08 ± 2.30 2070 ± 465	0.22 ± 0.10 441 ± 160 2.20 ± ± ± ± 5 806 ± ± 220 5.20 ± 5.20	0.19 ± 0.09 605 ± 80 2.68 ± 1.01 851 ± 1.01 850 ± 2.65	0.02 45 ± 0.02 2.91 ± 0.56 128 ± 0.56	0.19 + 0.06 0.19 + 0.06 0.19 + 3.00 0.00 + 3.00	0.003 ± ± 0.001 0.003 ± ± 1.2 1.5 ± 0.001 1.5 ± 2.001
Liver	ರಿಜ್ಞಾಡ	H H H +	H H 	++++	H-H-H-H	0.02 44 0.19 15 15 8	$\begin{array}{c} 0.002 \\ 4 \pm 2 \\ 0.002 \pm 0.001 \\ 11 \pm 6 \end{array}$
Muscle Ovary	on a c	1+1+1+1+	1+1+1+1+1+	+++++	#1#14	0.01 ± 0.008 8 ± 2 12 ± 6 0.002 + 0.001	0.001 4 + 1 4 + 1 7 + 1 0.002 + 0.001
Parotid Gland Spleen	o a o a c	1+1+1+1	1 +1 -11 +1 +	14444	1++++1+	0.003 ± 0.001 15 ± 9 0.006 ± 0.003	0.002 3 + + + 0.001 1.002 0.003
Stomach Testis	- ಇ - ೧ ಇ - ೧	1 +1 +1 +1 -	1-11-4-41-		1444	6.20 ± 3.2 0.20 ± 0.06 1.3 ± 1 0.00 ± 0.006	0.001 4 + 1 0.001 0.001
Thyroid	o, so	F + H + H	1+1+1	4+4+1	144	33760 ± 2642 0.33 ± 0.09	$61900 \pm 5874 \\ 0.55 \pm 0.06$

 $\dagger=$ Urine + Faeces (cumulative values). b= Per cent of injected dose. c= Standard deviation. * = Skin + skeleton + muscles. a = Specific Activity (per g).

Table 2. Values of the radioactivity found in the different tissues after the injection of radioperiodate

		1 hr	3 hr	6 hr	1 day	7 days	15 days
Bone Brain	લ લ-	263 ± 46c 28 ± 3 0.02 ± 0.003	557 ± 34 51 ± 15 0-03 ± 0-01	591 ± 166 146 ± 16 0·10 ± 0·01	$251 \pm 72 \ 48 \pm 6 \ 0.04 \pm 0.006$	32 ± 8 3 ± 1 0.001 ± 0.0003	7 ± 2 1 ± 1 0.005 ± 0.0009
Carcass*	. ф,	1 11	1+1	48.96 ± 12.23	19.34 ± 8.75	₩ 0.98	0.25 ± 0.10
Excreta† Heart	ರಿ ಆ ಕ	7.65 308 ± 121 0.15 ± 0.09	+++	33.56 854 ± 126 0.35 ± 0.09	66:56 304 ± 69 0:18 ± 0:03	++ 0.001	93.60
Intestine	o et -C	1.11 1	1+1+	661 ± 286 4.33 ± 1.64	452 ± 203 2.81 ± 1.73	+++ 0.34 0.34	0.05 ± 1
Kidney	a c	1 11 1	1+1+	633 ± 126 0.68 ± 0.13	266 ± 102 0:30 ± 0:09	+ 3 + + 1 + + 1	0.01 0.01 0.007
Liver	, a .c	1 11 11	1+1+	678 ± 196 3.64 ± 1.12	270 ± 136 1.69 \pm 0.48	+++ 0-0	910 ± 164 1·69 ± 0·54
Lung	. 4 1	171	1+1+	945 ± 473 0.85 ± 0.31	304 + 96 0:34 + 0:09	+++ 0:005	0.006 + 0.006
Muscle Ovary	' ସ ଅ-	1.11.11.	1+++	209 ± 86 966 ± 167	103 上 35 492 上 94	+++ 4 56	
Parotid	ರ ಚಾ	T1 T1 -	H+H-	0.18 ± 0.08 816 ± 89	0.13 ± 0.06 283 ± 73 0.00 + 0.003	9 9 9 1	0.003 14 ± 0.001 0.03 - ± 0.005
Spleen	ch to	דודוו	H+1+	0.24 ± 0.09 1143 ± 349 0.35 ± 0.19	367 ± 0.02 367 ± 153 0.13 ± 0.05	± 4 + 0.002	0.006 + 0.001
Stomach	, ₆ , -0	141 1	1+1+	8147 ± 3946 6.32 ± 3.18	6920 ± 2051 6.49 ± 2.46	+ 0-01	5 0.03 + 0.01
Testis	. es 70	111	1+1+	$388 \pm 69 \\ 0.41 \pm 0.22$	146 ± 29 0.21 \pm 0.06	+ 5 0-001	$4 \pm 1 \\ 0.005 \pm 0.0001$
Thyroid	a.c.	17171	1+1+1	$\begin{array}{c} 42920 \pm 8324 \\ 0.53 \pm 0.10 \end{array}$	$186540 \pm 25622 \\ 2.29 \pm 0.51$	± 71324 ± 0.96	92074 ± 6721 3.72 ± 0.72
AND THE PERSON NAMED IN COLUMN TWO IS NOT THE PERSON NAMED IN THE PERSON NAMED IN THE PERSON NAMED IN THE PE		Terrest Control of the Control of th			the state of the s		

* - Skin + skeleton + muscles. \dagger = Urin a = Specific Activity (cpm/g). b = Per a

 $[\]dagger$ = Urine + Faeces (cumulative values). b = Per cent of injected dose. c = Standard deviation.

	HOMOGENIZED	RGANS	
		As Radioiodate	(activity remaining in pellet
	(%)	(%)	(%)
After iodate injection	94.8	3.9	1.2
Liver	1.9	92·1	6.0
Stomach	96.8		3.2
Intestine	94.9		5.1
Urine	87.7	12.3	
Feces	99.0	_	1.0
After periodate injection			
Kidney	4·0 † 97 ·0	94·2† 1·9	1·8† 1·0
Liver	18·1† 7·5	72·6† 88·2	9·3† 4·3
Stomach	76·3† 97·7	19.0†	4·6† 2·3
Intestine	96.1†	_	3.9
Intestine	95.7		4.3
Urine	100.0	_	
Feces	99.0		1.0

TABLE 3. CHROMATOGRAPHIC ANALYSIS—VALUES OF THE FOUND ACTIVITY IN THE HOMOGENIZED ORGANS*

In our experiment the intestine which according to Postan² excretes the iodide does not eliminate the iodate. Also, a part of the radioactivity is excreted through the urine in both chemical forms, as iodide and as iodate but through the feces only as iodide.

The delay observed in the elimination of metaperiodate may be related with general inflammation in the vicinity of the site of injection. For a correct evaluation of the radioactivity balance Regoeczi's observation⁶ that approximately 25 per cent of the animal's iodide pool is localized in the skin must be considered.

The importance of the liver in the deiodination of ¹³¹I-labeled organic molecules has been previously studied by Chaikoff, ⁷ Straub⁸ and the author ^{9, 10} but, in this case the de-iodination occurred by splitting off the radioiodine.

SUMMARY

The distribution in various organs and tissues of the rat at different times of intravenously injected ¹³¹I-labelled iodate and metaperiodate has been studied.

This study showed that the liver concentrates and reduces the iodate to iodide which is eliminated through the gastro-intestinal tract. In the first day half of the injected radioactivity was excreted. The chromatographic analysis of the excretas showed that in urine both iodide and iodate were present but in feces only iodide.

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REFERENCES

- 1. N. S. BRICKER and C. J. HLAD, J. Clin. Inv. 34, 1057 (1955).
- 2. I. PASTAN, Endocrinology 61(1), 93 (1957).
- 3. Y. TAKEDA and E. B. REEVE, J. Lab. clin. Med. 60 (6), 944 (1962).
- 4. H. H. WILLARD, Inorganic Syntheses, Vol. I, p. 168. H. S. Booth Ed. McGraw-Hill (1939).
- 5. H. H. WILLARD, Inorganic Syntheses, Vol. I, p. 171. H. S. Booth Ed. McGraw-Hill (1939).
- 6. E. REGOECZI, Proc. Soc. exp. biol. Med. 112, 547 (1963).
- 7. I. L. CHAIKOFF and A. TAUROG, J. biol. Chem. 207, 57 (1954).
- 8. W. H. STRAUB, D. F. FLANAGAN, R. AARON and J. C. Rose, *Proc. soc. expt. biol. Med.* 116, 1119 (1964).
- 9. L. J. Anghileri, Nucl.-Med., 3, 368 (1963).
- 10. L. J. Anghileri, J. nucl. Med. 6, 69 (1965).

^{*} As a percentage of the total activity

 $[\]dagger$ = Values 1 hr after the injection, the other values correspond to 1 day after the injection.