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Construction of a Tumor-Targeting Nanobubble with Multiple Scattering Interfaces and Its Enhancement of Ultrasound Imaging [Letter]

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Dear editor

The article entitled "Construction of a Tumor-Targeting Nanobubble with Multiple Scattering Interfaces and its Enhancement of Ultrasound Imaging" The research presented by the authors demonstrates significant advancements in the field of tumor diagnosis and treatment through the development of a novel nano-scale ultrasound contrast agent, IR783-SiO₂NPs@NB.

The study highlights the innovative approach of encapsulating SiO2 nanoparticles in an IR783-labeled lipid shell using an improved film hydration method.¹ This methodology is commendable for addressing the common limitations associated with nanobubbles, particularly their restricted size and singular reflection section, which typically result in low ultrasonic reflection. Larger scattering radii in nanometric UCAs enhance ultrasonic signals, which is previously reported that's all shared the same structure, with only one contributing interface,² with multi-scattering proving more effective, as shown in Zhang's "rattle"-type SiO₂ NPs.³ The comprehensive characterization of the agent's physicochemical properties, stability, cytotoxicity, and contrast-enhanced ultrasound imaging capability underscores the thoroughness of the research.

Notably, the "donut-type" composite microstructure of IR783-SiO₂NPs@NB, uniform particle size distribution ($637.2 \pm 86.4 \text{ nm}$), and high biocompatibility are impressive. The exceptional tumor-specific binding efficiency (99.78%) and enhanced contrast imaging both in vitro and in vivo demonstrate the potential of this agent in clinical applications. The study convincingly shows that this new contrast agent offers a longer duration of contrast enhancement in solid tumors, which is a significant leap forward.

While the findings are promising, there are a few areas where further research could enhance the application and effectiveness of this nano-scale ultrasound contrast agent. Extending the stability analysis beyond 30 minutes to understand the long-term viability and performance of IR783-SiO₂NPs@NB in physiological conditions would provide more comprehensive data for clinical applications. Conducting more detailed in vivo toxicity studies over a prolonged period will help ascertain the long-term safety profile of these contrast agents, which is crucial for transitioning from preclinical to clinical stages.

Moreover, performing comparative studies with other existing ultrasound contrast agents could highlight the relative advantages and potential limitations of IR783-SiO2NPs@NB, providing a clearer perspective on its clinical utility. Investigating the underlying mechanisms of the enhanced contrast imaging capability and tumor targeting efficiency could provide insights that may help optimize the design and functionality of future nano-scale contrast agents. Additionally, exploring the efficacy of IR783-SiO2NPs@NB in various types of tumors would help generalize the findings and broaden the potential clinical applications. Thus demonstrating substantial potential for early tumor disease diagnosis.⁴

In conclusion, the article presents a noteworthy advancement in ultrasound contrast agents for tumor imaging. The authors' approach is innovative and holds significant promise for future clinical applications. I look forward to seeing further developments in this exciting field of research.

Disclosure

The authors report no conflicts of interest in this communication.

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