

The measurement of urinary 5-HIAA using XLC-MS/MS

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21 September 2007
Spark Holland Symbiosis User Meeting
Delft

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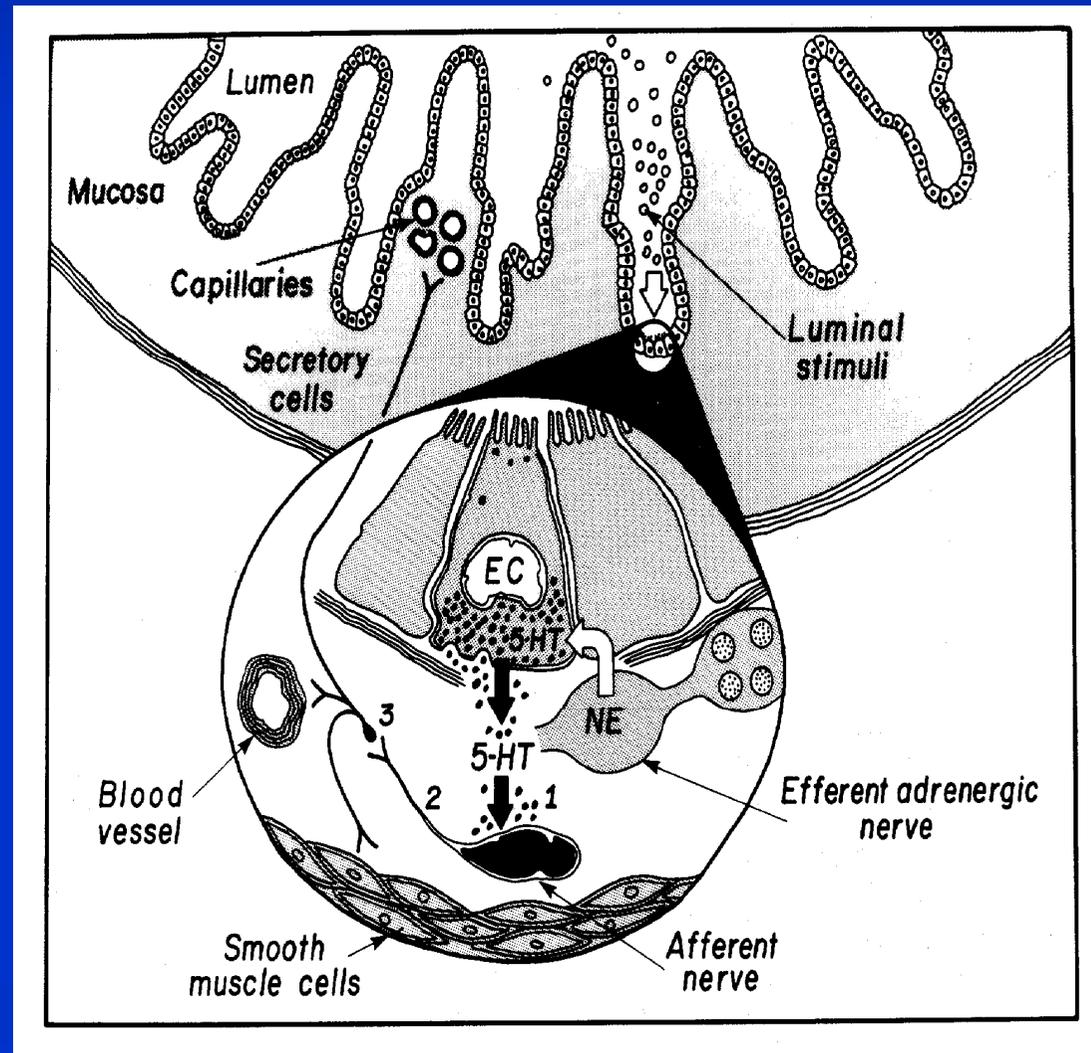
- Serotonin (5-HT & metabolite 5-HIAA)
 - Physiology
 - Pathophysiology
 - Biochemistry
 - Clinical chemical application
- Analytical techniques
 - HPLC
 - XLC-MS-MS
- Results
 - Validation
- Conclusion
- Future

5-HT/5-HIAA

Physiology

Serotonin

- Widespread in nature
 - Plants, foods, nuts, animals
- Serotonergic neurons (CNS)
 - Synthesis and storage
- Enterochromaffine cells (gut)
 - 80% of total production
 - Storage
 - Release upon different stimuli
- Thrombocytes
 - Storage



5-HT/5-HIAA

Physiology

Biosynthesis serotonin

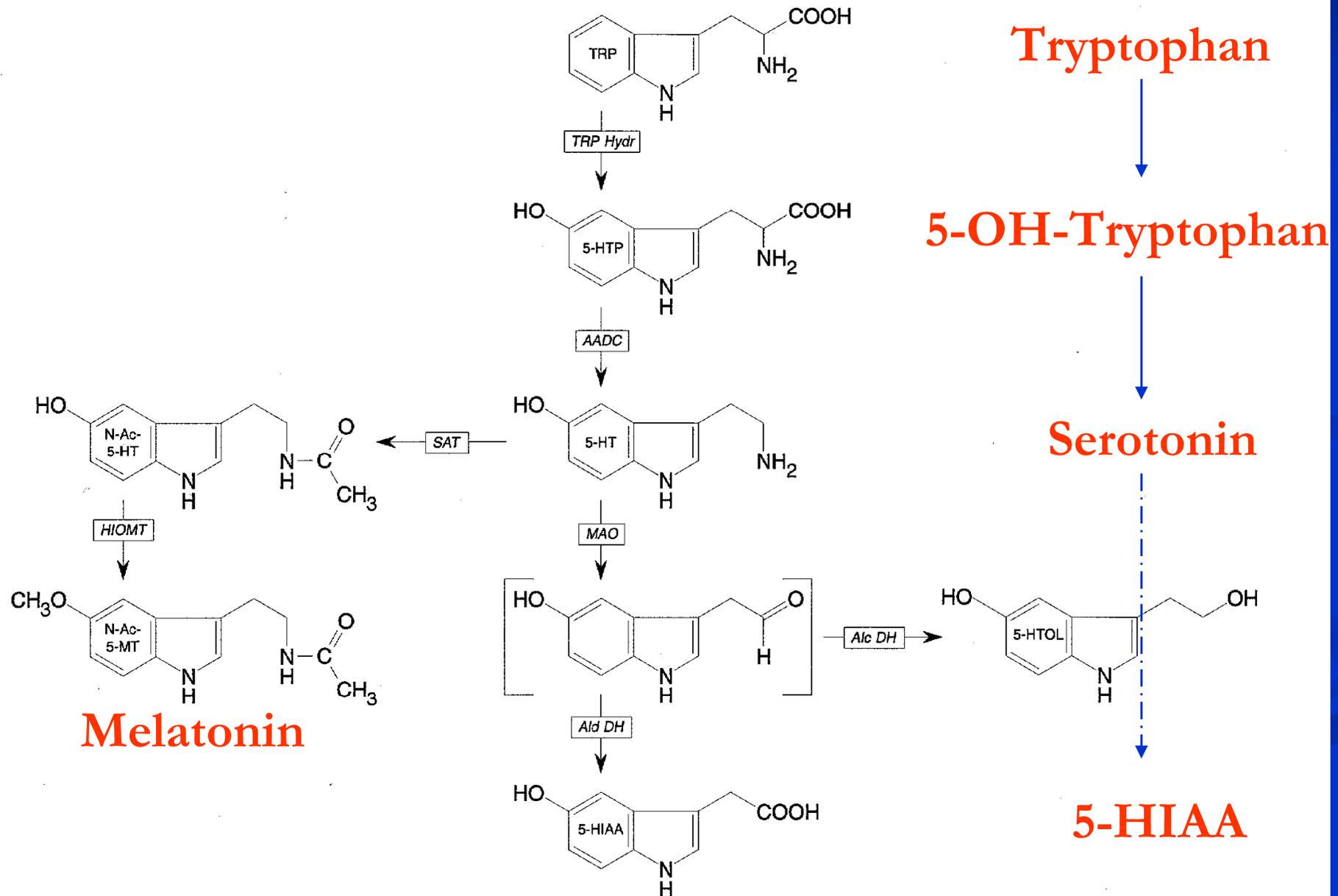
- From essential amino acid tryptophan
- TRP hydroxylase
- Aromatic amino acid decarboxylase

Metabolism serotonin

- MAO-A
 - 5-HIAA: most abundant (>98%)
- Aldehyde dehydrogenase
- Conjugation
- In lungs, liver and thrombocytes
- Excretion in urine

5-HIAA

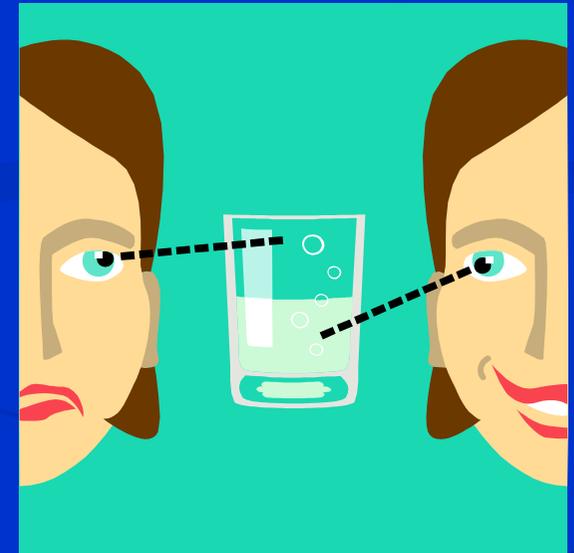
Physiology



5-HT

Physiology

- Neurotransmitter, neuromodulator, hormone
 - Central nervous system
 - Sleep, wake
 - Food intake
 - Sexual activity
 - Mood
 - Peripheral
 - Vasoconstrictor
 - Neurotransmitter GI tract



5-HT

Pathophysiology

- Central nervous system
 - Eating disorders
 - Anxiety disorders
 - Depression
 - Schizophrenia
 - Autism
- Peripheral
 - Hypertension
 - Migraine
 - Raynaud's syndrome
 - Carcinoid syndrome

5-HT

Pathophysiology

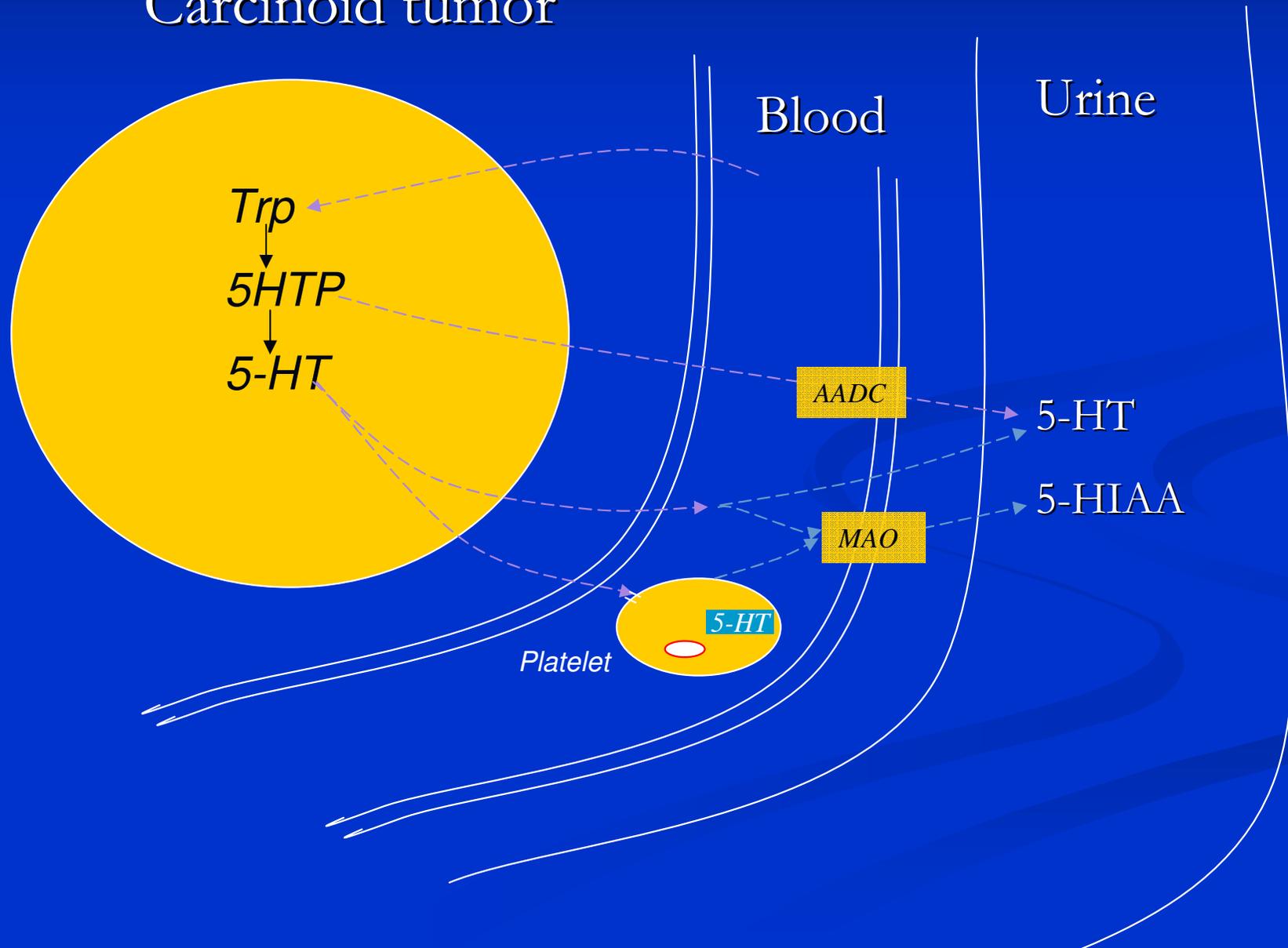
Carcinoid

- Slowly growing neuro-endocrine tumour
- Incidence \pm 2:100.000 population/year
- Classification
 - Foregut
 - Midgut (classic carcinoid)
 - Hindgut
- Carcinoid syndrom
 - Flushing
 - Heart disease
 - Diarrhea
 - Bronchoconstriction, asthma, wheezing

5-HIAA

Biochemistry

Carcinoid tumor



Tumormarkers

- Platelet serotonin
 - Most discriminating indole marker for the detection of carcinoid tumors
 - Especially useful in carcinoids with low serotonin secretion rate
 - Saturation occurs: not suitable for follow-up at high secretion rates
- Urinary 5-HIAA
 - Tumor mass & follow-up

Analytical technique

Fluorometrical detection

Off-line HPLC

- Numerous reagents required
 - MeOH, AcN, ether, acetic acid, NaCl, etc
- Extensive manual sample work-up
 - Acidify sample
 - Pipet sample and IS
 - Add conc. acetic acid
 - Add NaCl
 - Shake for 2 min (extraction)
 - Centrifuge
 - Transfer to new tube
 - Evaporate to dryness under nitrogen
 - Add 2 mL eluens to residual
 - Transfer to vial
- Chromatographic run time: 10 min

On-line HPLC

- Less reagents required
 - AcN, water, formic acid
- No sample work-up
 - Increased reproducibility and repeatability
 - Filling of sample vials
 - Acidify sample
 - Pipet sample and IS
 - Dilute with water
- Run time including sample work-up: 20 min

Analytical technique

XLC

XLC-fluorescence

- Automated combination of techniques
- On-line and in-line
 - SPE: Solid Phase Extraction (Prospect)
 - HPLC: Chromatographic separation
 - Fluorometrical detection
 - Atlas data processing

XLC-MS/MS

- Automated combination of techniques
- On-line and in-line
 - SPE: Solid Phase Extraction (Symbiosis)
 - HPLC: Chromatographic separation
 - MS/MS: Tandem mass spectrometric detection
 - MassLynx data processing

Why method transfer from fluorescence to mass spectrometry?

- To obtain more accurate results
 - MS/MS detection
 - Deuterated IS
 - Increased selectivity and specificity
 - Increased linearity in high concentration range
 - Less interferences
- To reduce total analysis time per sample
- To relieve analysts operating old technique

Analytical technique

XLC-MS/MS

Sample vial



XLC-MS-MS

(completely automated)



Data file

Vial to file concept

Analytical technique

XLC-MS/MS

Spark Holland Symbiosis Pharma system
(sample storage, autosampling and SPE)

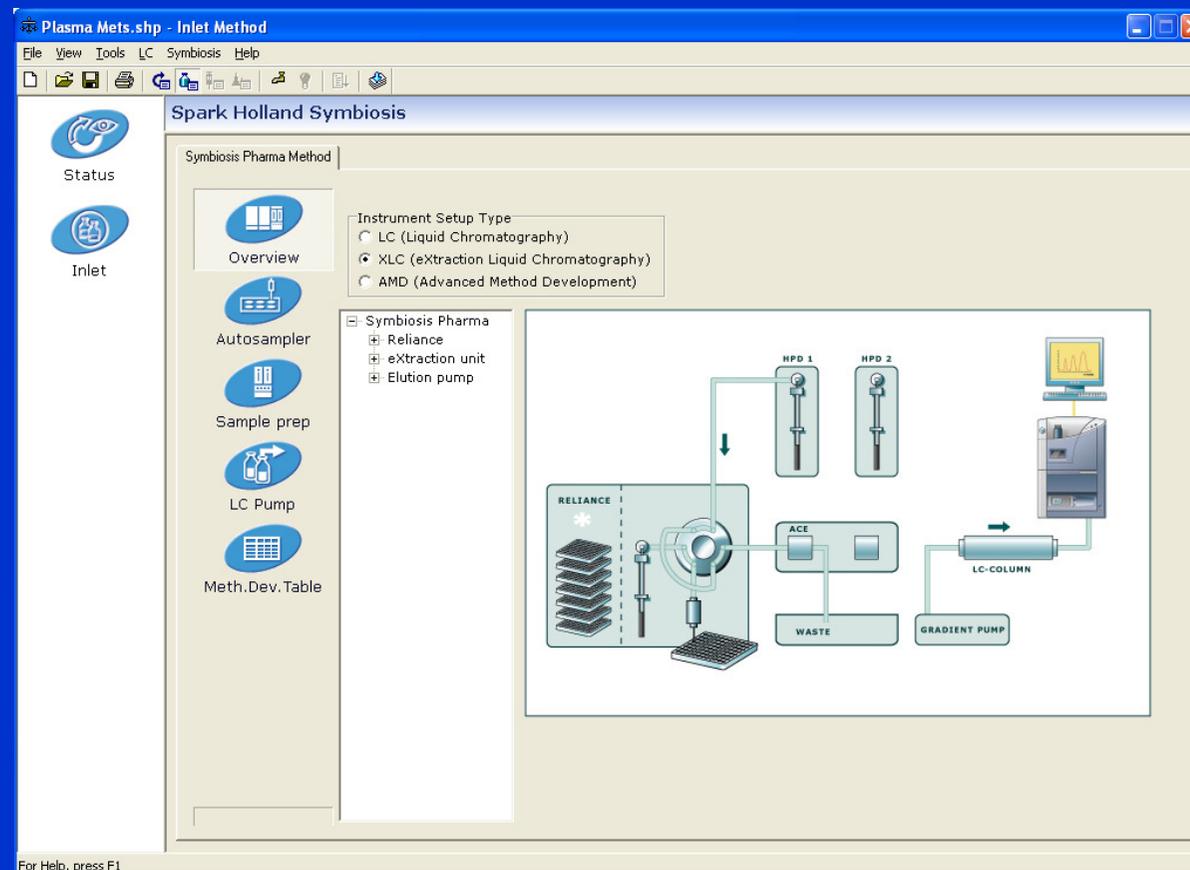
Quattro Premier
(LC-MS-MS system)



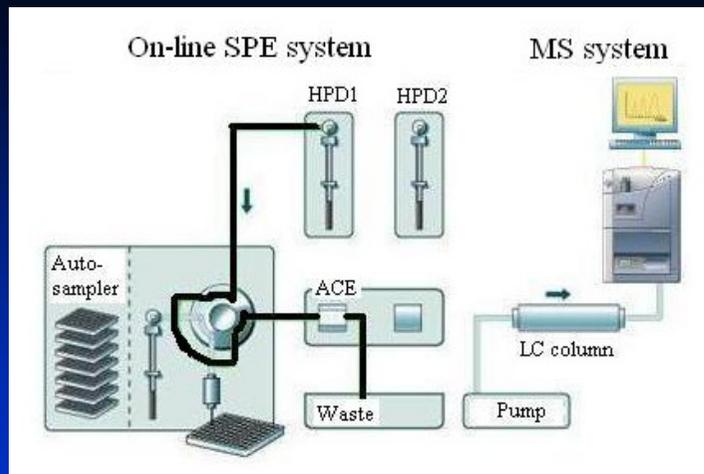
Analytical technique

Automation

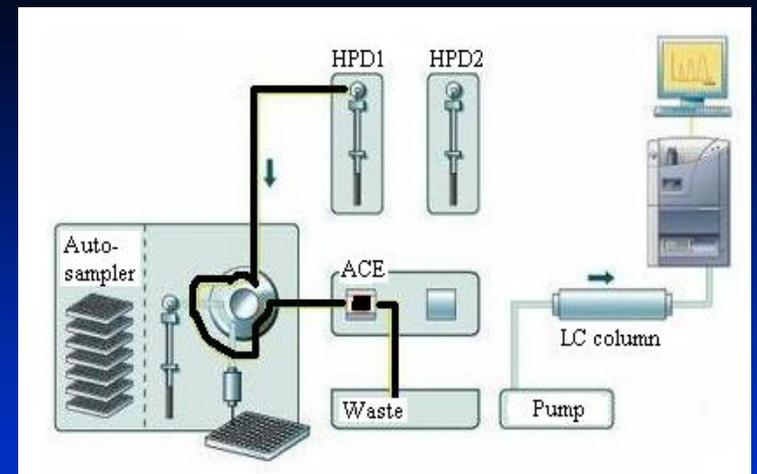
- Symbiosis™ Pharma & Waters® Quattro Premier™
- Both system are coupled by software
- Waters MassLynx software with Symbiosis Pharma driver



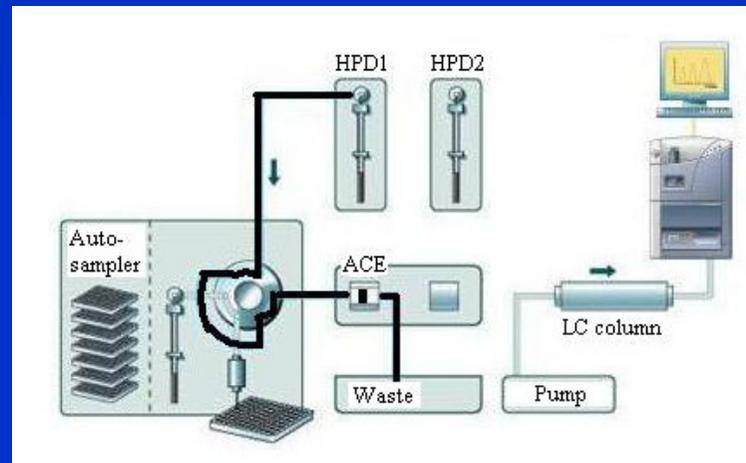
SPE



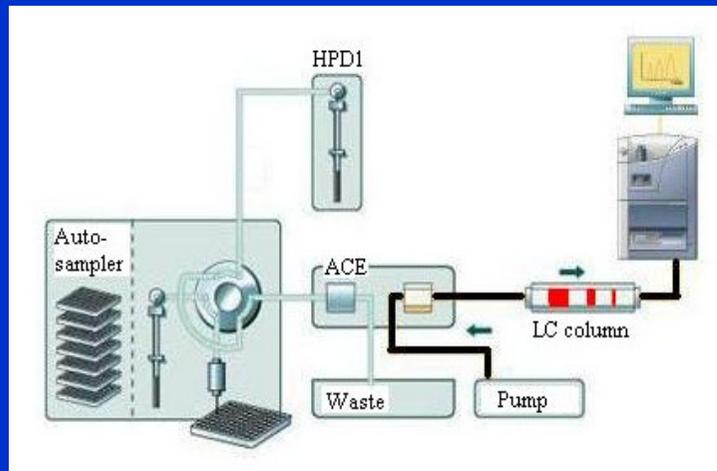
Conditioning/equilibration



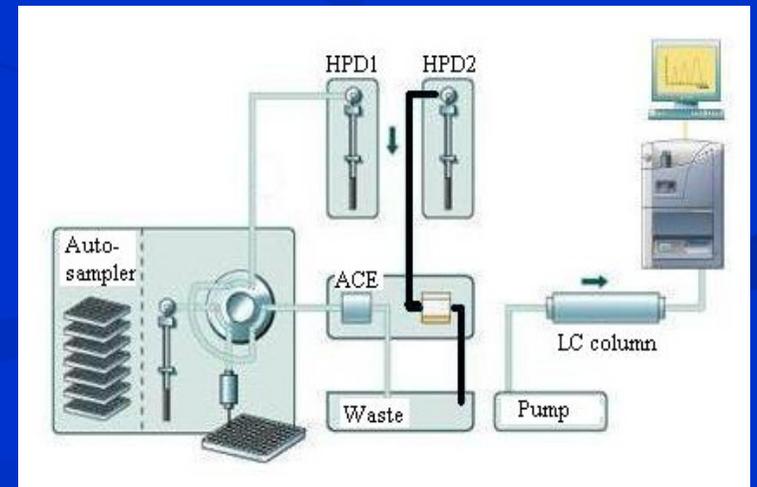
Sample loading



Washing



Elution



Clamp flush

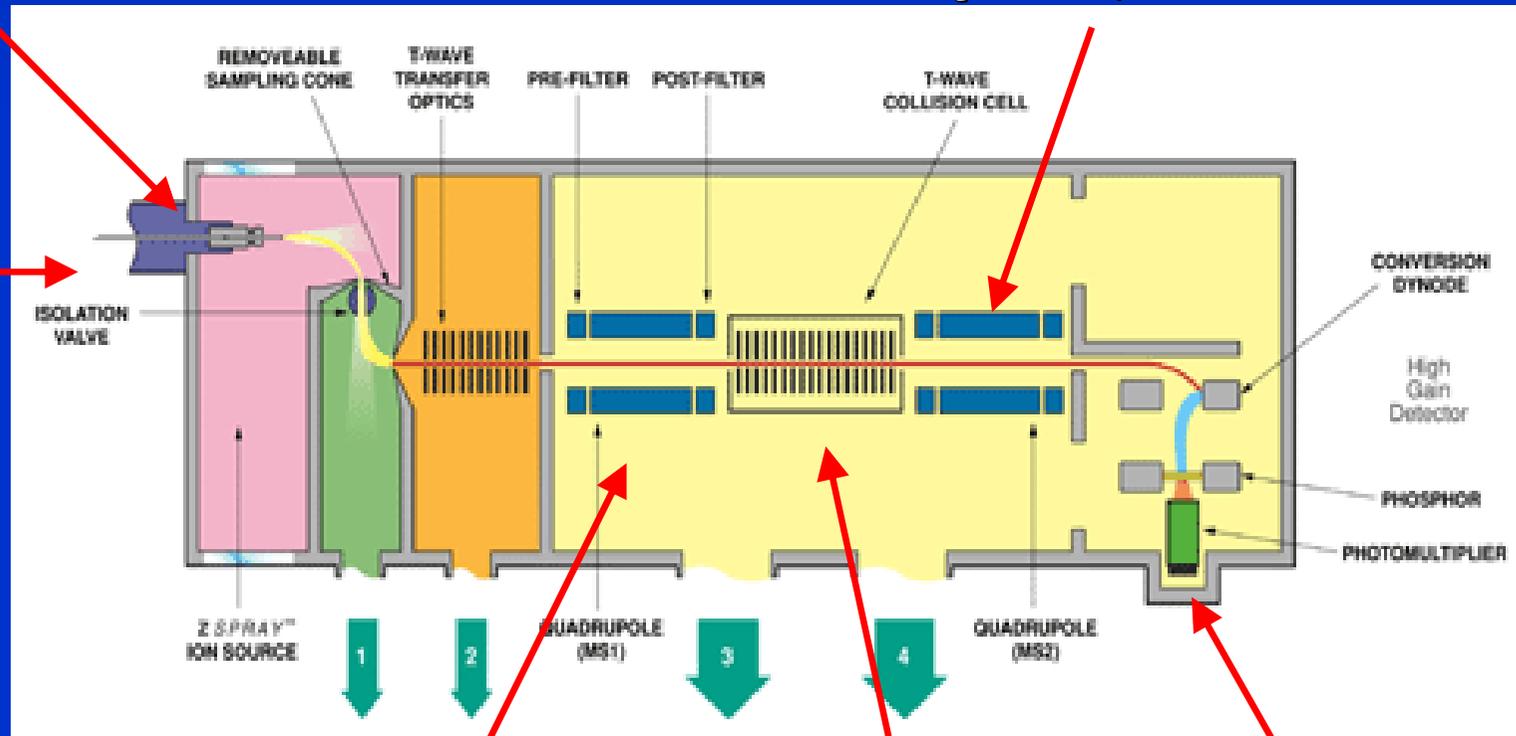
Analytical technique

LC-MS/MS

Inlet probe:
Electrospray ionisation (ESI)

Quad 2 / MS2

LC kolom



Quad 1 / MS1

Collision cell

Multiplier

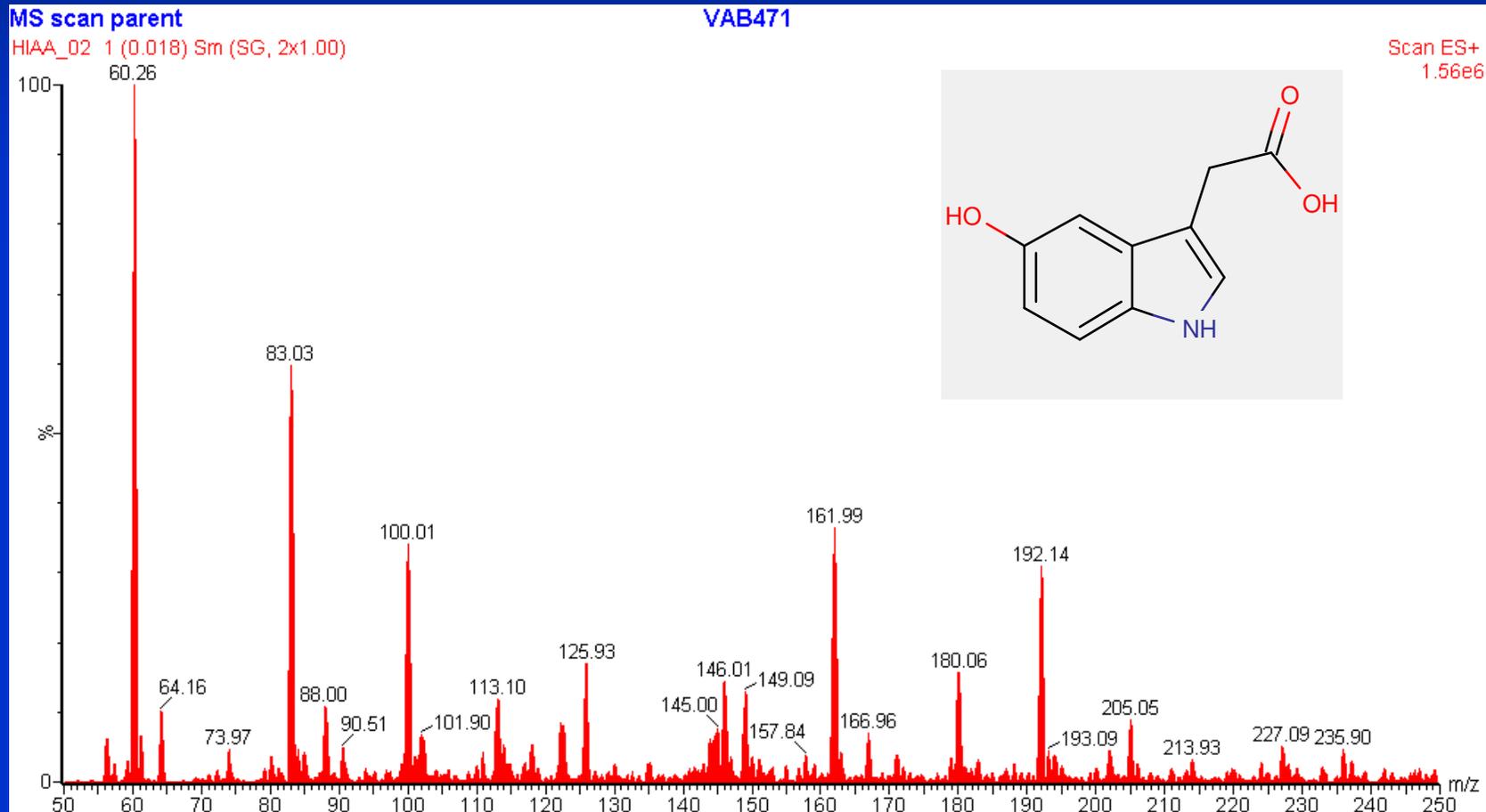
Analytical technique

Method development

- MS/MS
 - Characteristics analyte (acid, alkalic, mixed, neutral)
 - Selection parent ions
 - Selection daughter ions
 - Multiple Reaction Monitoring Mode
- HPLC
 - Selection chromatographic column
 - Optimization chromatographic separation (gradient)
- SPE
 - Selection cartridge sorbent
 - Characteristics analyte (acid, alkalic, mixed, neutral)
 - Matrix
 - Optimization extraction solvents
 - Optimization elution with LC gradient

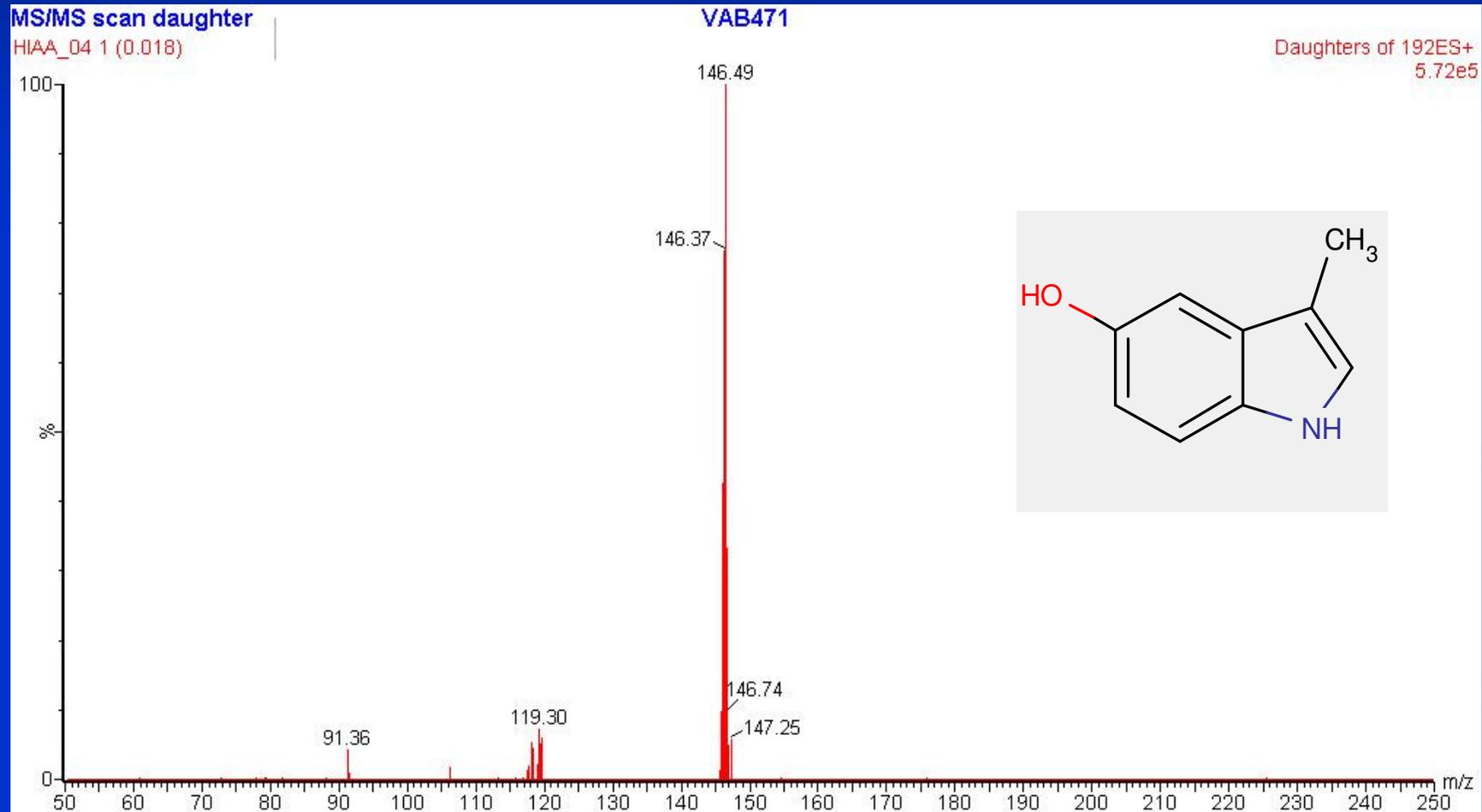
Method development

MS



Selected parent ion 5-HIAA
 $[M+H]^+$ m/z 192.14

Method development MS/MS



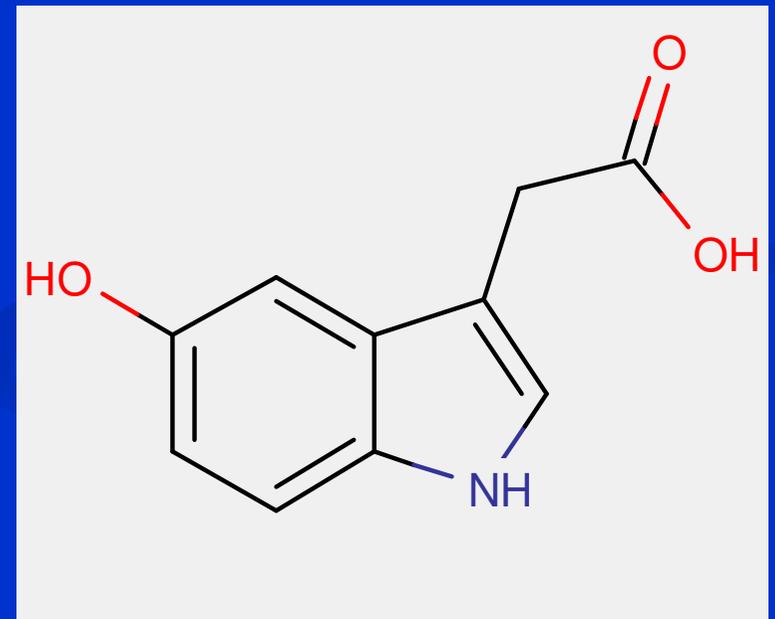
Daughterspectrum of parent 192.14
Selection m/z 146.49 (= M - COOH)

Method development

XLC

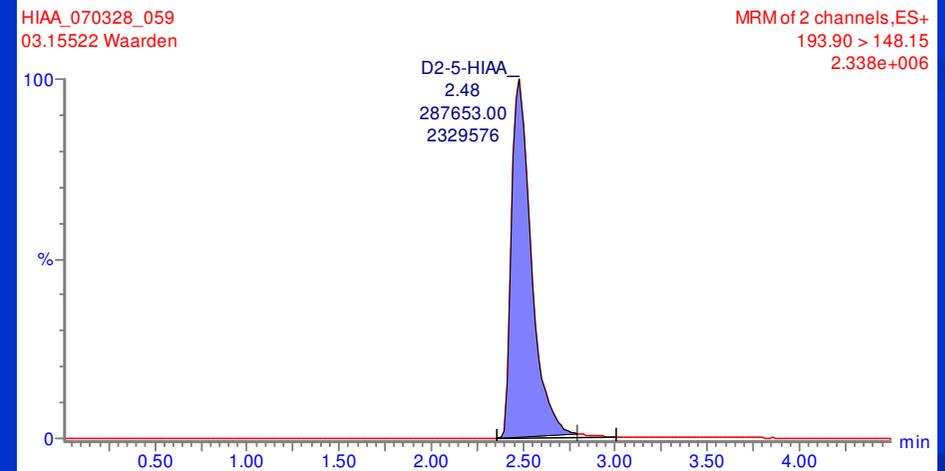
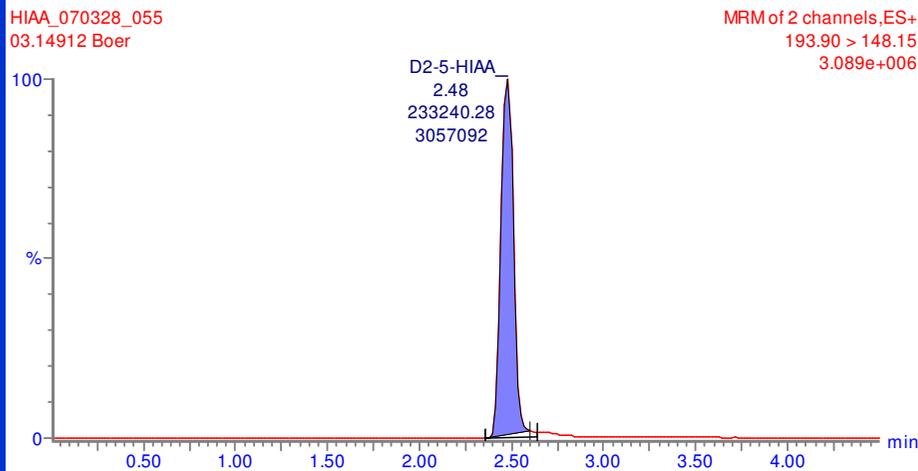
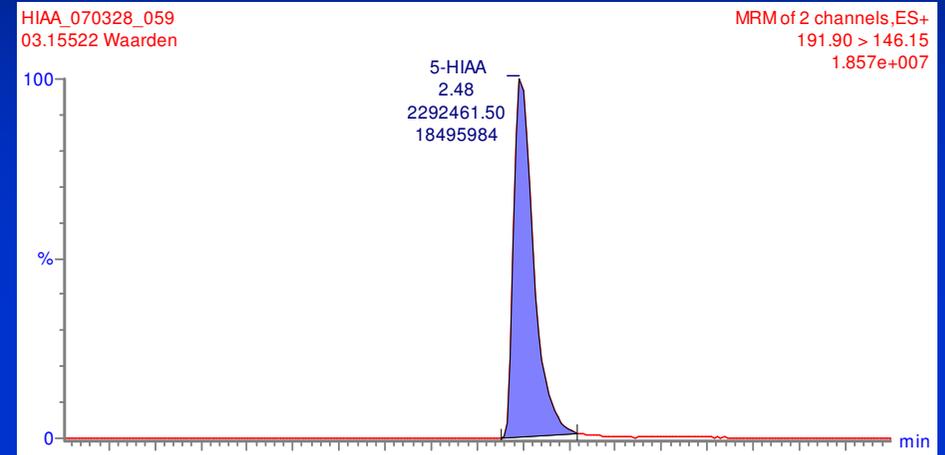
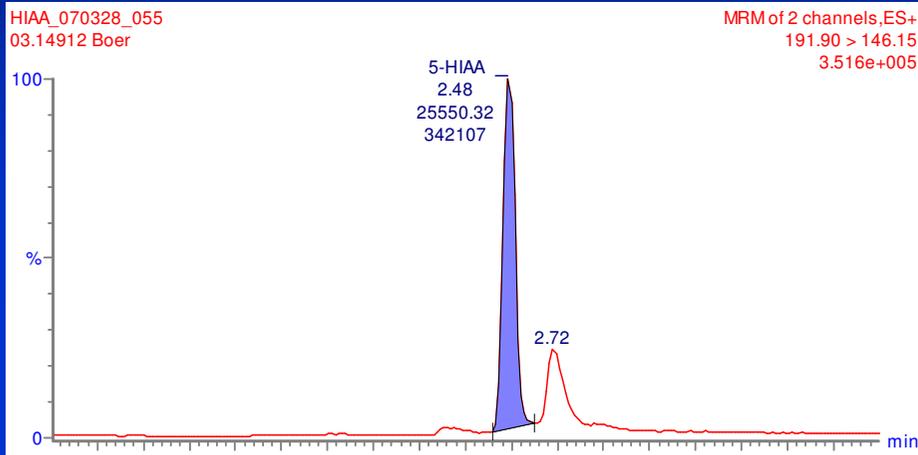
Analytical characteristics 5-HIAA

- Weak acid
- Hydrophobic interactions
 - C18 column
 - Hydrophobic SPE
- Acidic/organic gradient
 - Total run time 5 min



Results

Validation



Healthy control

10.3 mmol/L

1.7 mmol/mol kreat

High sample carcinoid patient

797.5 mmol/L

249.2 mmol/mol kreat

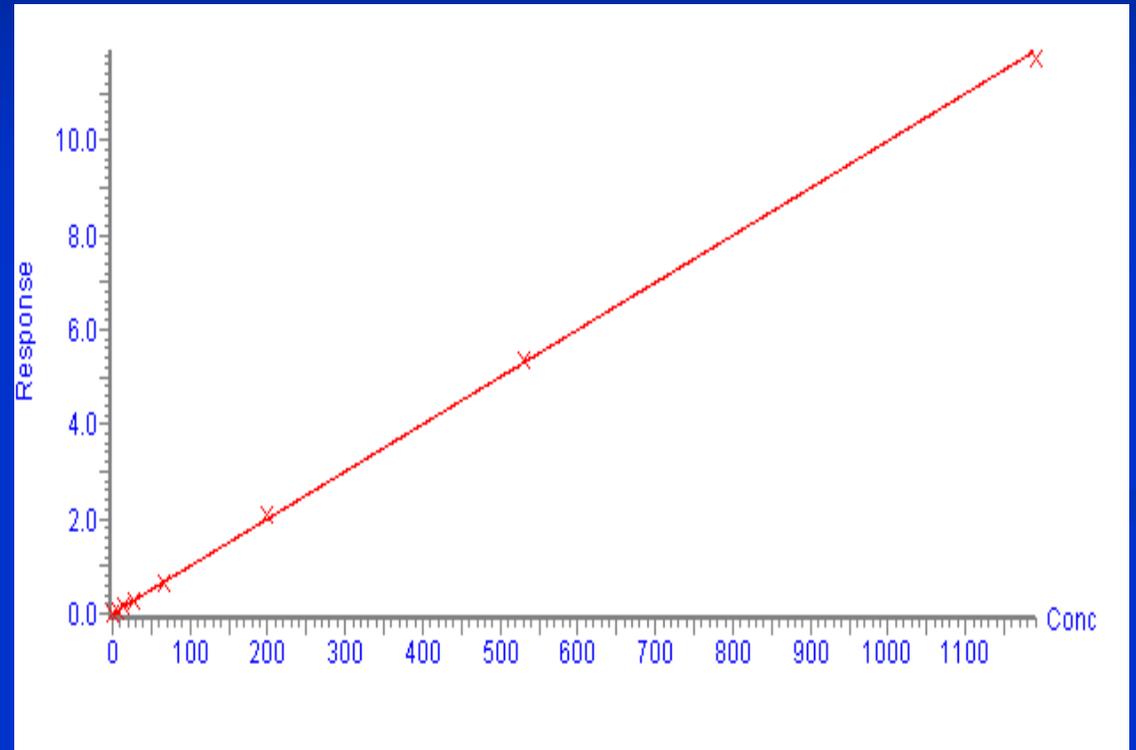
Results

Validation

Linearity in calibration-range

0-1200 mmol/L

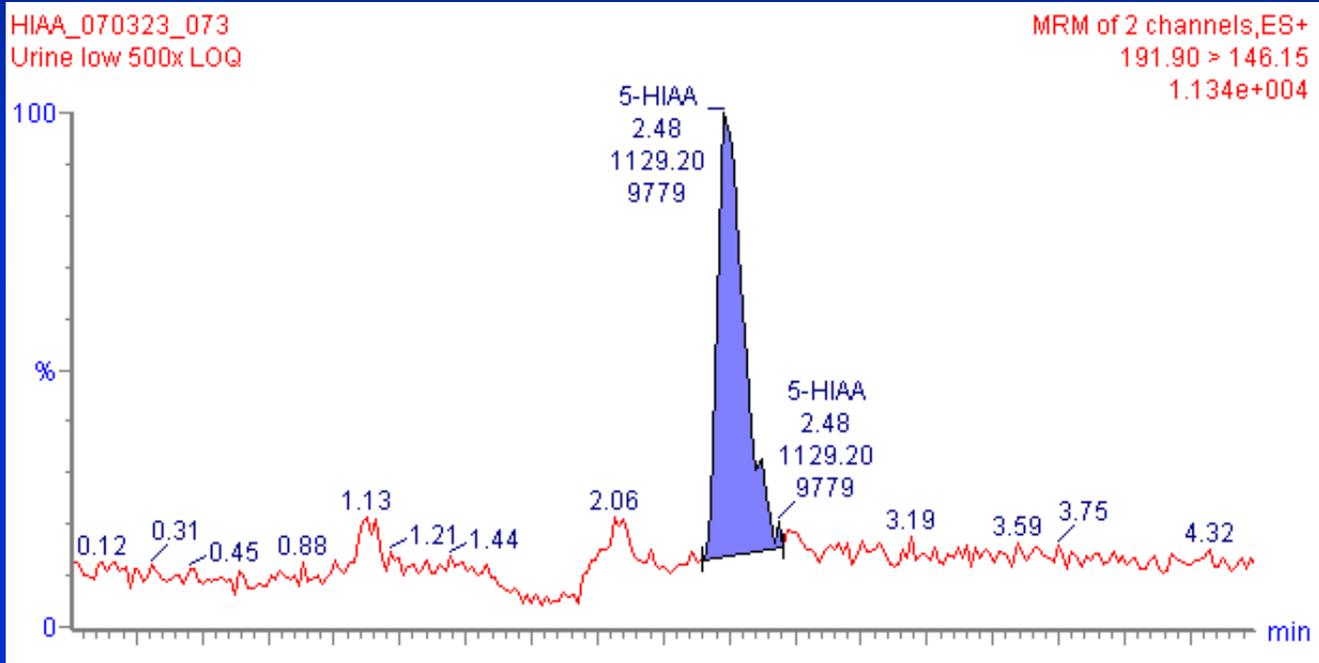
$R^2 > 0.99$



No carry-over (<0.1%)

Reuse cartridges (30 times)

Results Validation



High sensitivity: LOD < 0.1 nmol/L
LOQ: 0.1 nmol/L

5-HIAA: 0.1 nmol/L
S:N = 25:1

Results

Validation

	Intra-assay		Inter-assay	
	Mean ± SD mmol/L	CV %	Mean ± SD mmol/L	CV %
5-HIAA				
Low	13.69 ± 0.12	0.91	13.57 ± 0.67	4.93
Medium	257.15 ± 3.58	1.39	252.17 ± 9.15	3.63
High	989.12 ± 7.70	0.78	968.55 ± 21.53	2.22

- Absolute recovery standards XLC vs LC
 - > 96 %
- Recovery cartridge
 - > 81%
- Stability in vial
 - 48 hr at 4 °C, 10 °C and room temperature

Precision

- Intra-assay variation
- Inter-assay variation

Conclusion

Promising technique in clinical chemistry

- Automated
- High-throughput
- Easy method switching
- Sensitive, specific and selective
- High quality, low variable costs

Future

Conversion of more clinical biomarkers to
XLC-MS/MS mode

Acknowledgements

UMCG

- Department of Pathology and Laboratory Medicine
 - Ido Kema
 - Jan van der Molen
- Department of Oncology

Waters Corporation Manchester

- Ken Graham

Questions?

