

Analysis of Urine SRMs Using Solid Phase Micro Extraction, Dynamic Headspace and Liquid Injection with Comprehensive Two-Dimensional Gas Chromatography (GCxGC) High Resolution Time-of-Flight Mass Spectrometry

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Introduction

Laboratory medicine began thousands of years ago through urine analysis. Urine was a "Divine Fluid and Window to the Body". During Babylonian, Egyptian, and through Victorian times, urine was the primary diagnostic tool (Uroscopy).

Today urine is still a favored biofluid for diagnostic testing (Urinalysis) because large volumes are easily obtained. In addition, urine is relatively free from interfering proteins and lipids, and it tends to "hold" high concentrations of drugs and metabolites over extended periods of time. Modern, routine clinical tests include the determination of specific gravity, measurement of glucose, nitrates, etc.

Objectives

- Evaluate different methods of sample introduction
- Implement the use of enhanced, comprehensive (GCxGC) chromatography for the separation of urine compounds
- Use modern-day, high resolution time-of-flight mass spectrometry (HRT) and powerful processing software to quickly and confidently identify compounds in urine

Technology

Sample Introduction



Data Acquisition and Processing

LECO Pegasus® GC-HRT



Instrument Attribute	Value
Mass Accuracy	<1ppm
Mass Range	10-1500 m/z
Resolving Power	up to 50,000
Data Acquisition Speed	Up to 200 sps
Ionization	EI, PCI

Sample Preparation

a) Solid Phase Micro Extraction (SPME), Twister, and Dynamic Head Space (DHS) analysis.

1 mL aliquots of smoker's (NIST SRM 3673) and non-smoker's (SRM 3672) urine were placed in 10 mL vials. Salt (200 mg NaCl) was added to increase the ionic strength of the mixture. The urine was sampled without further treatment, or after the addition of either acid (60 µL 12M HCl) or base (100 µL 5M NaOH).

b) Liquid sampling.

200 µL of urine incubated with 10 mg of urease at 37°C for 15 min. 800 µL of methanol was added and the mixture was vortexed and then centrifuged (12,000 g for 10 minutes). 500 µL aliquots were evaporated to dryness and derivatized using a two-step process.

- Methoximation (30 µL of MEOX, 60°C, 1 hour) and
- Silylation (100 µL of ACN, 200 µL MSTFA, 60°C, 1 hour)

Instrument Parameters

- SPME:** Extracted samples with a 85 µm polyacrylate coated SPME fiber for 30 minutes in an agitator at 80°C (5s on, 2s off, 250 rpm). Desorbed for 3 minutes in a CIS4 injector at 280°C.
- DHS:** Sampled urine for 1 hour using Tenax® desorption tubes (Complete Evaporation). Desorbed compounds using a TDU (40°C to 280°C at 720°C/min, 5 min hold) and CIS4 injector (-120°C to 280°C at 720°C/min, 5 min hold).
- Twister:** Extracted samples with PDMS coated stir bars for 1 hour and transferred bars to TDU tubes. TDU Desorption (30°C to 280°C at 12°C/s, 5 min hold) and CIS4 injector (-30°C to 280°C at 12°C/s, 5 min hold).
- Liquid:** 1 µL injection, split 20:1, CIS4 injector (35°C to 280°C at 12°C/s, 5 min hold).

GC-HRT 4D

Gas Chromatograph	Agilent 7890B with Gerstel MPS Autosampler
Injection	1µL, Split 20:1, CIS 4 (35°C to 280°C at 12°C/s, hold 5 minutes)
Carrier Gas	He @ 1.0 ml/min, Constant Flow
Column 1	Rxi-17 Sil MS, 30 m x 0.25 mm i.d. x 0.25 µm (Restek, Bellefonte, PA, USA)
Column 2 (GCxGC-HRT)	Rxi-17 Sil MS, 0.6 m x 0.25 mm i.d. x 0.25 µm (Restek, Bellefonte, PA, USA)
Temperature Program	Liq.: 50°C (1 min) to 150°C @ 10°C/min, to 320°C @ 15°C/min (10 min) SPME, DHS, Twister: 50°C (1 min) to 300°C @ 10°C/min, to 320°C @ 30°C/min (6 min)
Modulation (GCxGC-HRT)	3s with 5°C temperature offset relative to oven temperature program and 15°C modulator offset relative to secondary oven
Mass Spectrometer	LECO Pegasus HRT
Transfer Line	300°C
Ion Source Temperature	250°C (EI)
Acquisition Mode	High Resolution, R = 25,000 at m/z = 219
Ionization and Mass Range (m/z)	EI35-510
Acquisition Rate	10 spectra/s; (200 spectra/s GCxGC-HRT)

Experimental

Results: SPME

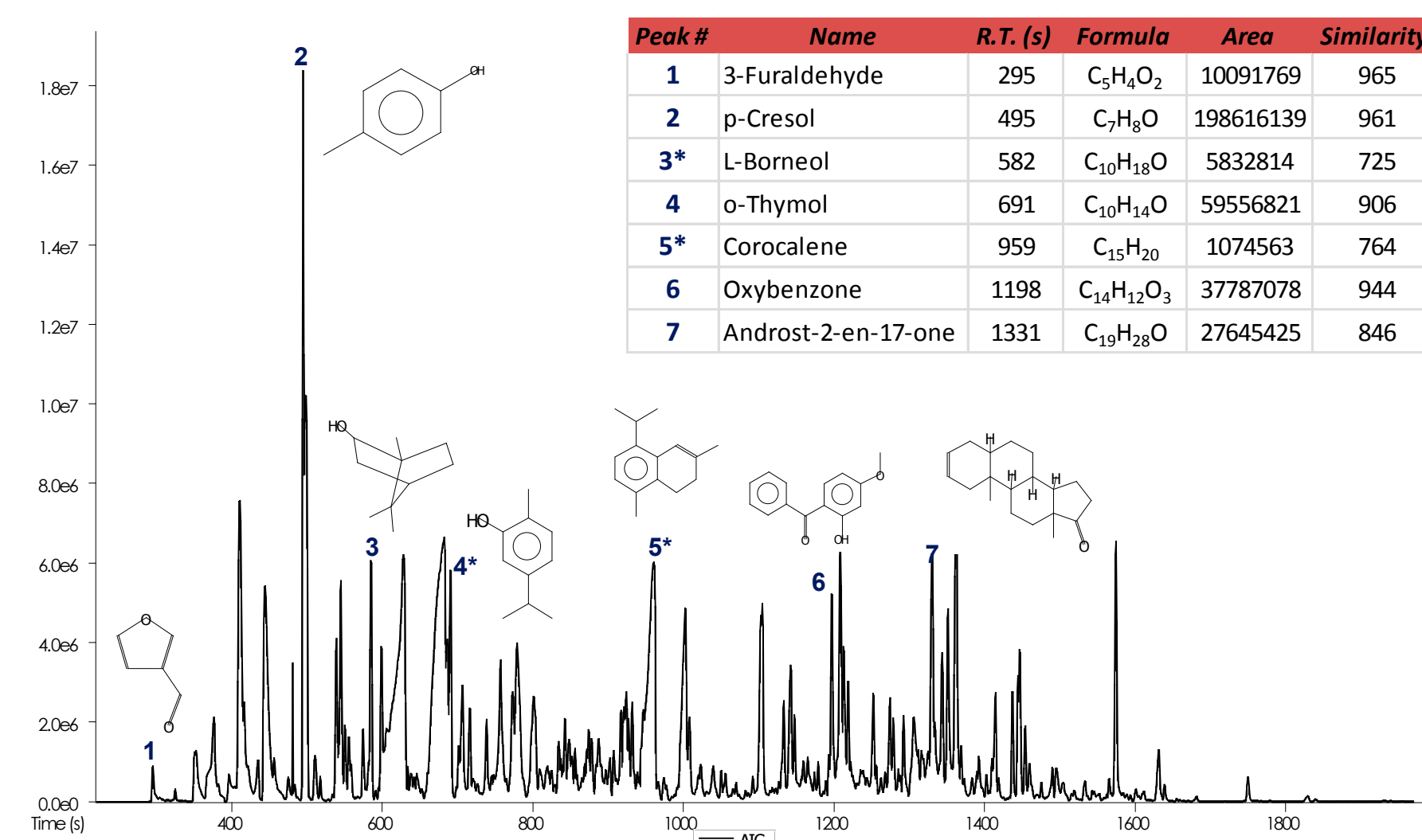


Figure 1. AIC and Table of Representative Compounds in Smoker's Urine.

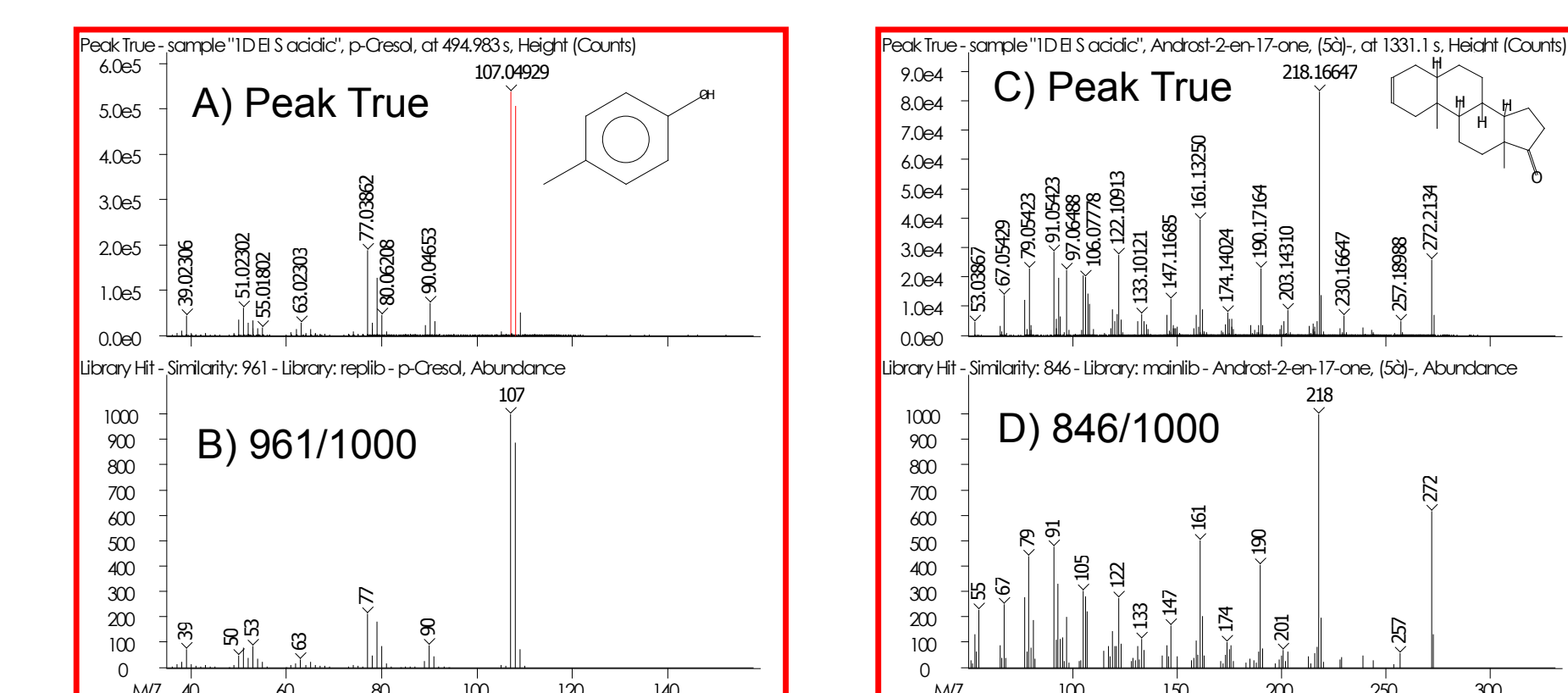


Figure 2. Peak True (Deconvoluted) and Library Mass Spectral Data for p-Cresol and Androst-2-en-17-one.

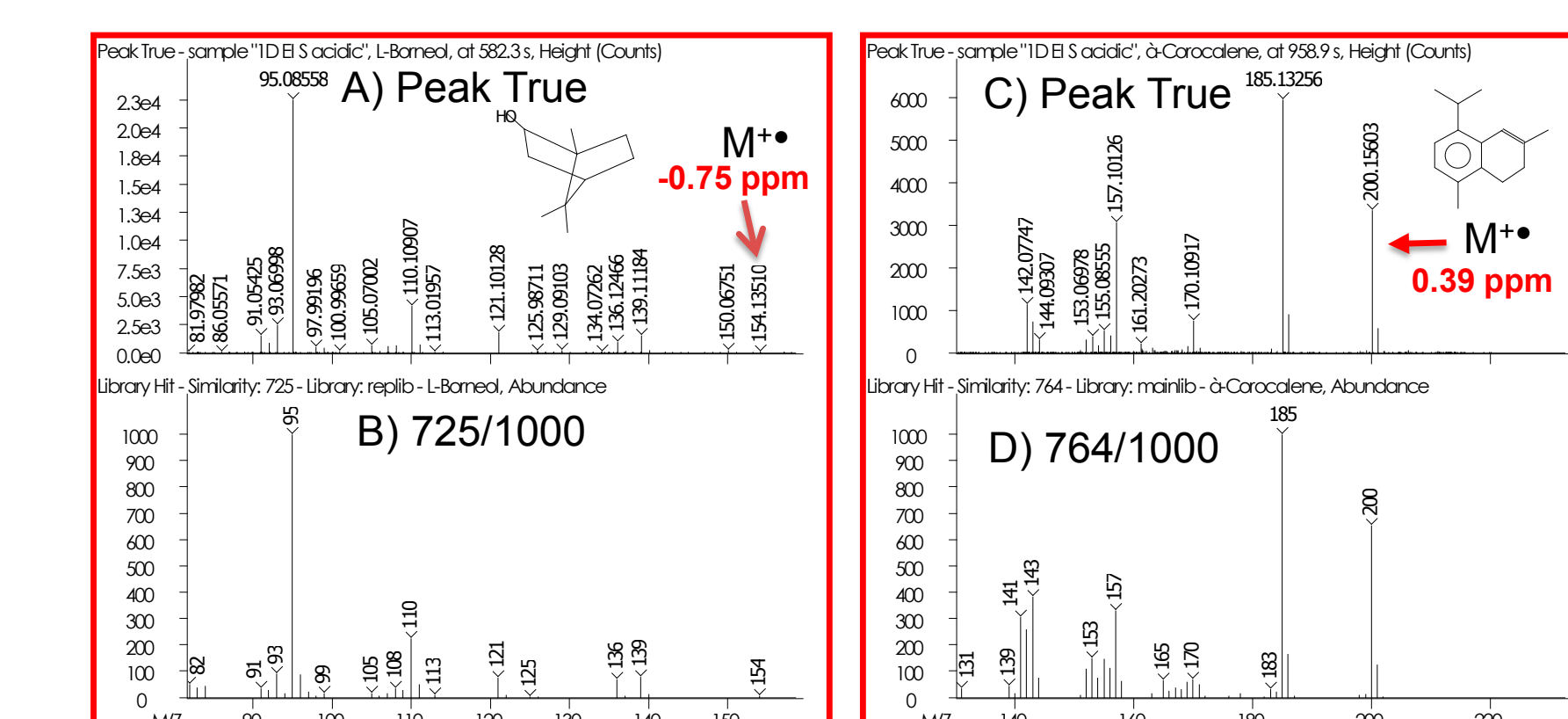


Figure 3. Peak True and Library Mass Spectral Data for L-Borneol and α-Coracalene.

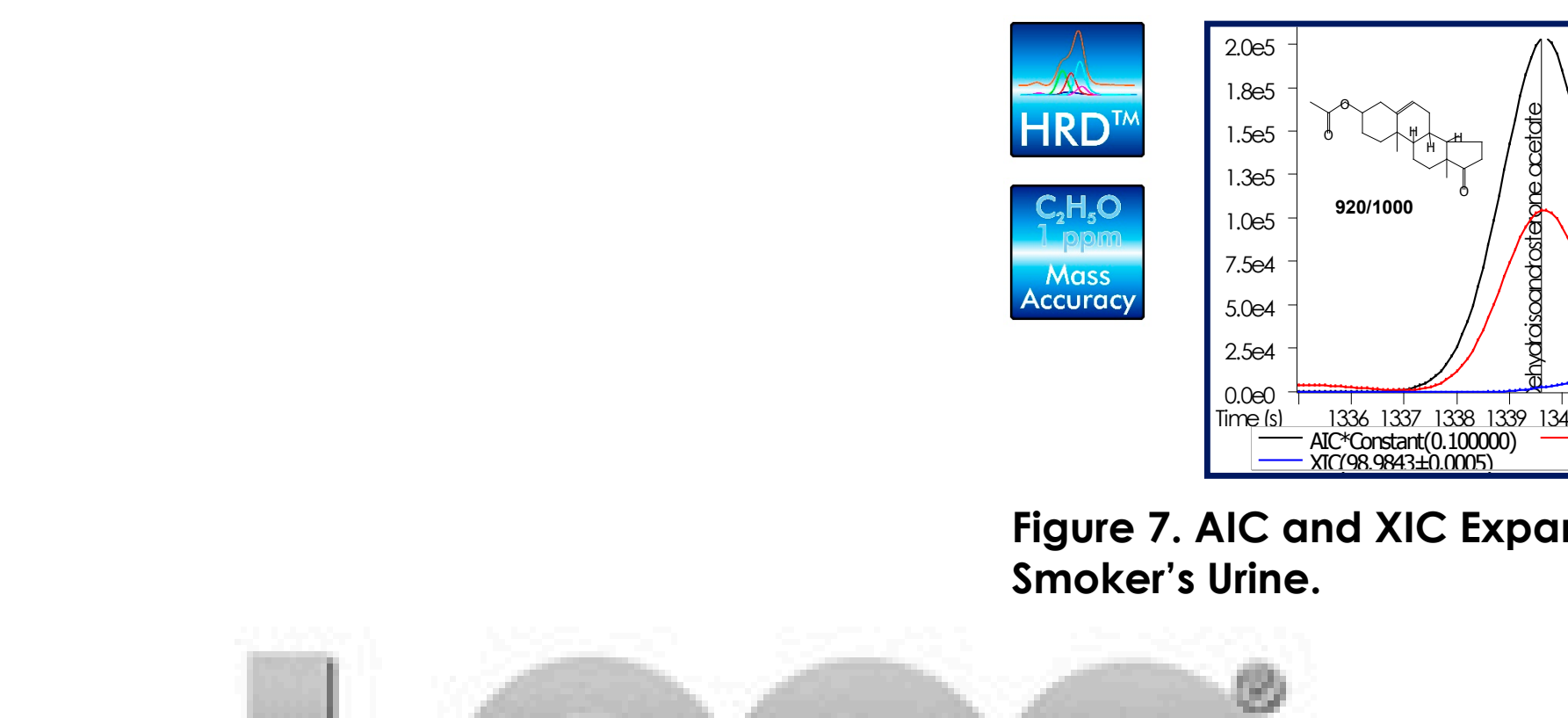


Figure 7. AIC and XIC Expansion of Smoker's Urine.

Results: DHS

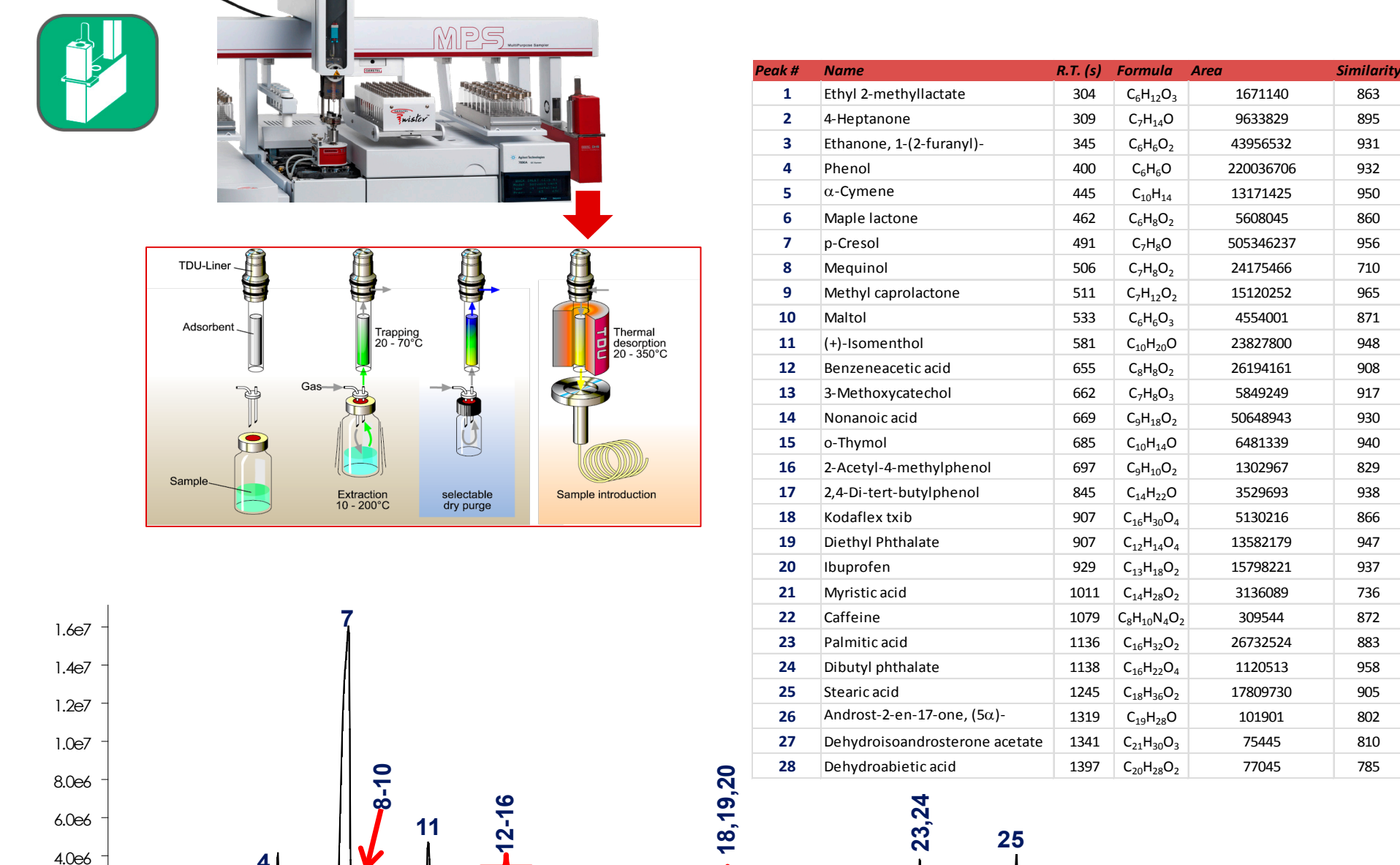


Figure 4. AIC and Table of Representative Compounds in Smoker's Urine.

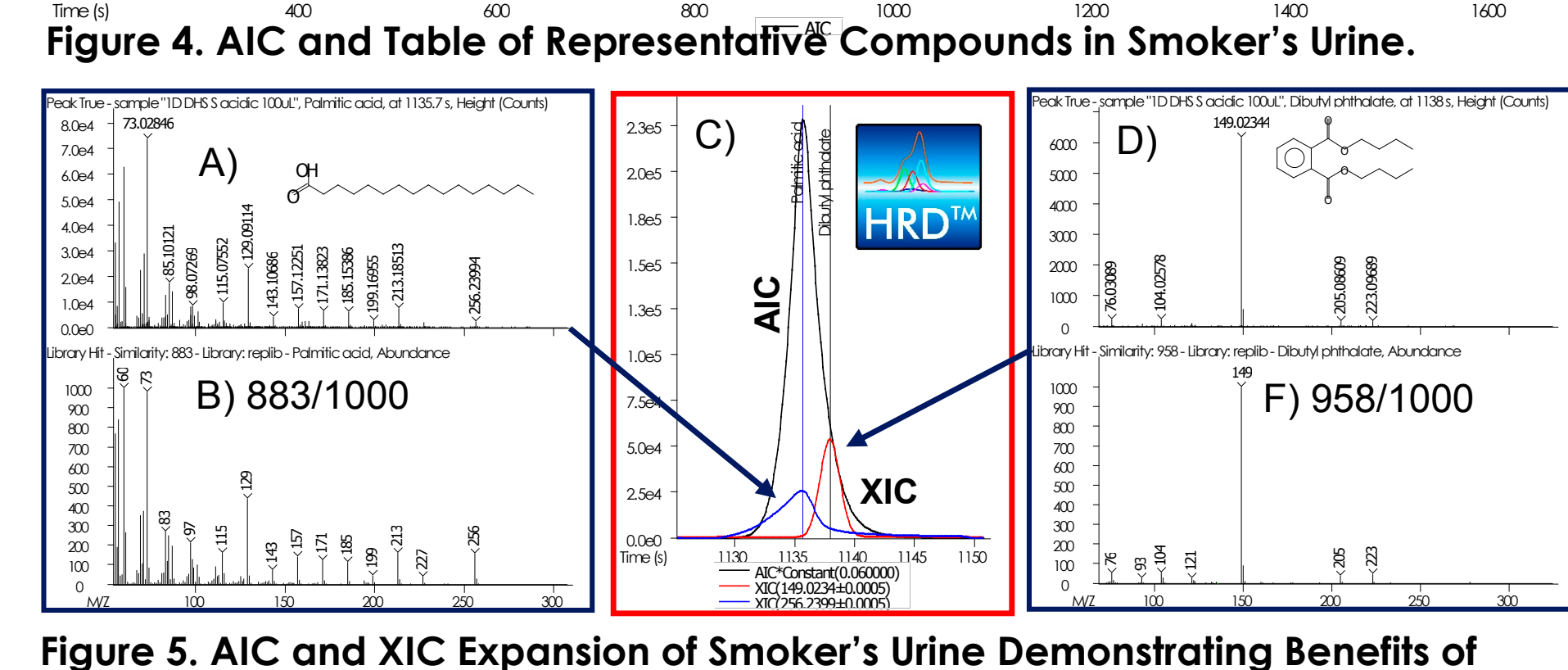


Figure 5. AIC and XIC Expansion of Smoker's Urine Demonstrating Benefits of High Resolution Deconvolution. Peak True and Library Mass Spectral Data for Palmitic Acid and Dibutyl Phthalate.

Results: Twister

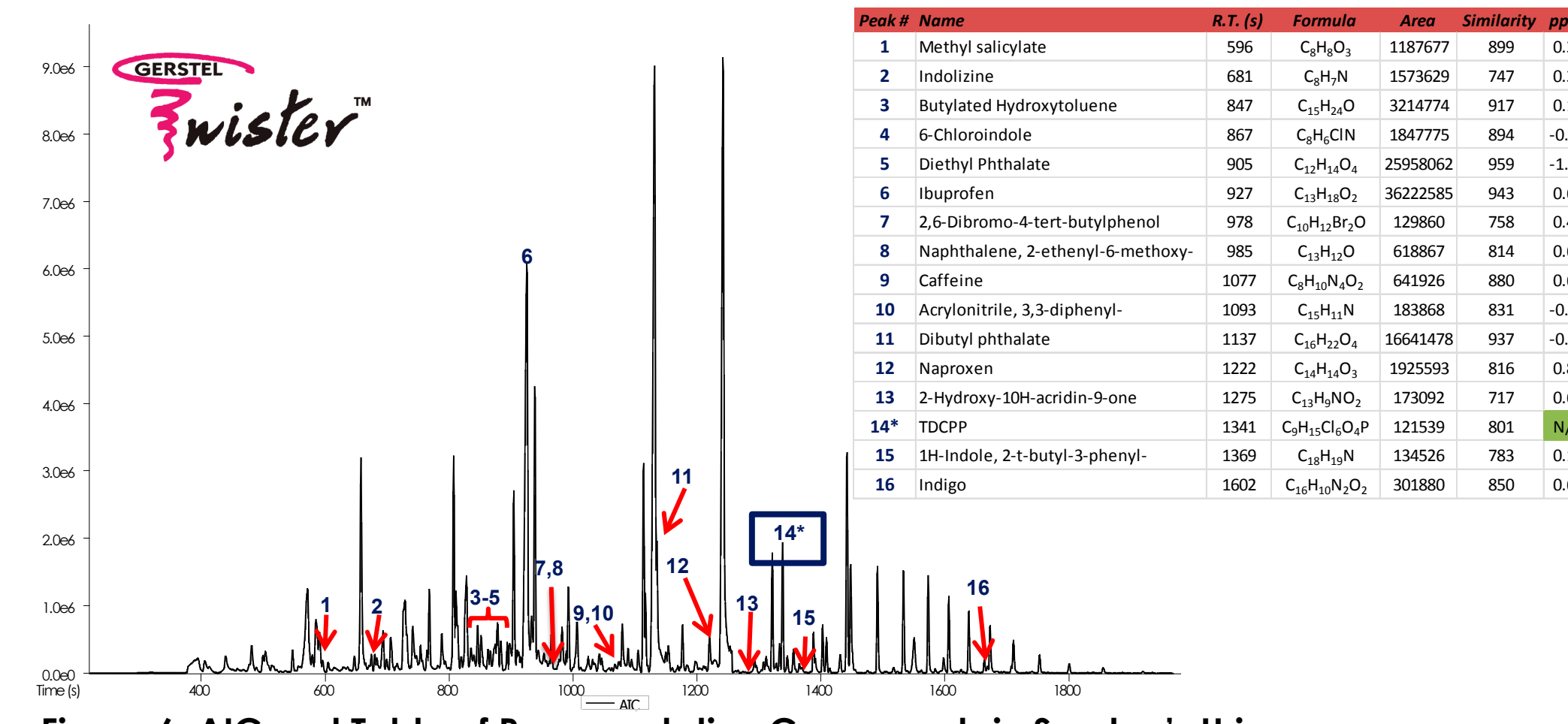


Figure 6. AIC and Table of Representative Compounds in Smoker's Urine.

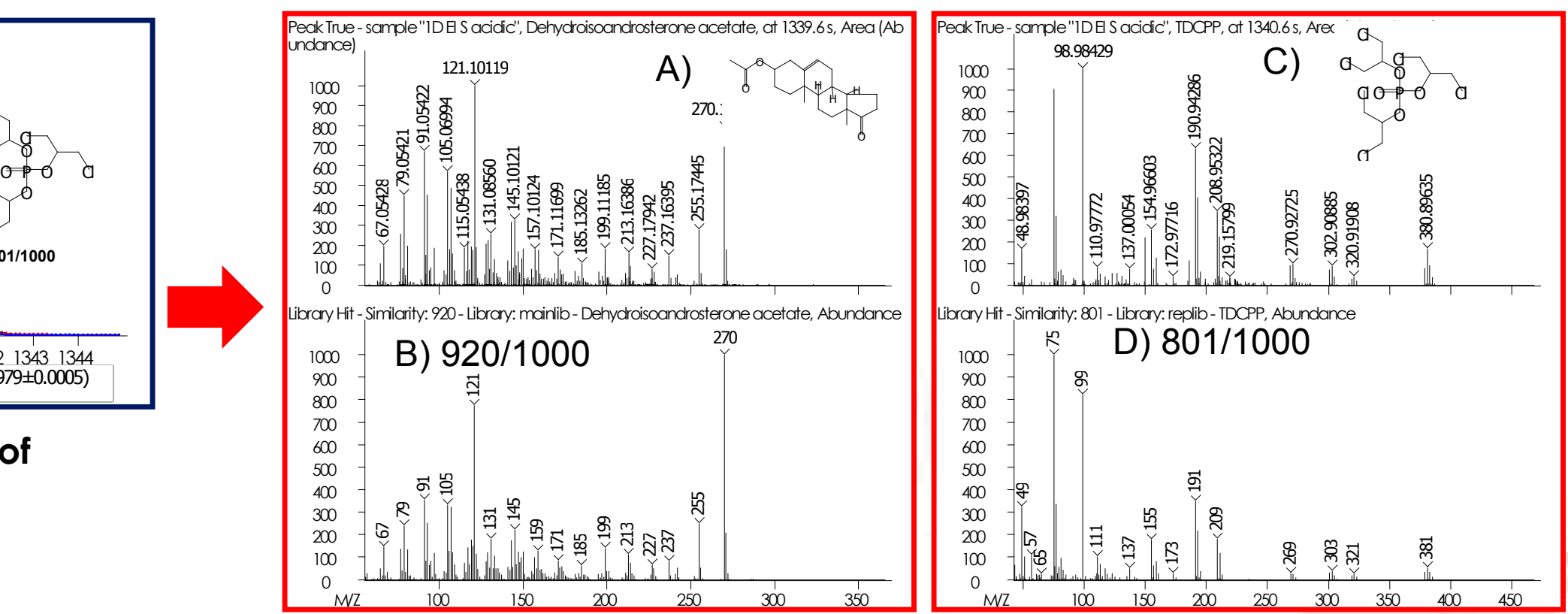


Figure 8. Peak True and Library Mass Spectral Data for Dehydroisandrosterone Acetate and TDCPP in Smoker's Urine.

Results: Derivatization/Liquid Injection

HRT 4D: GCxGC-HRTOFMS

- Enhanced Chromatographic and Mass Spectral Resolution
- Group Clustering – Structured Chromatograms
- Improved Characterization of Compounds

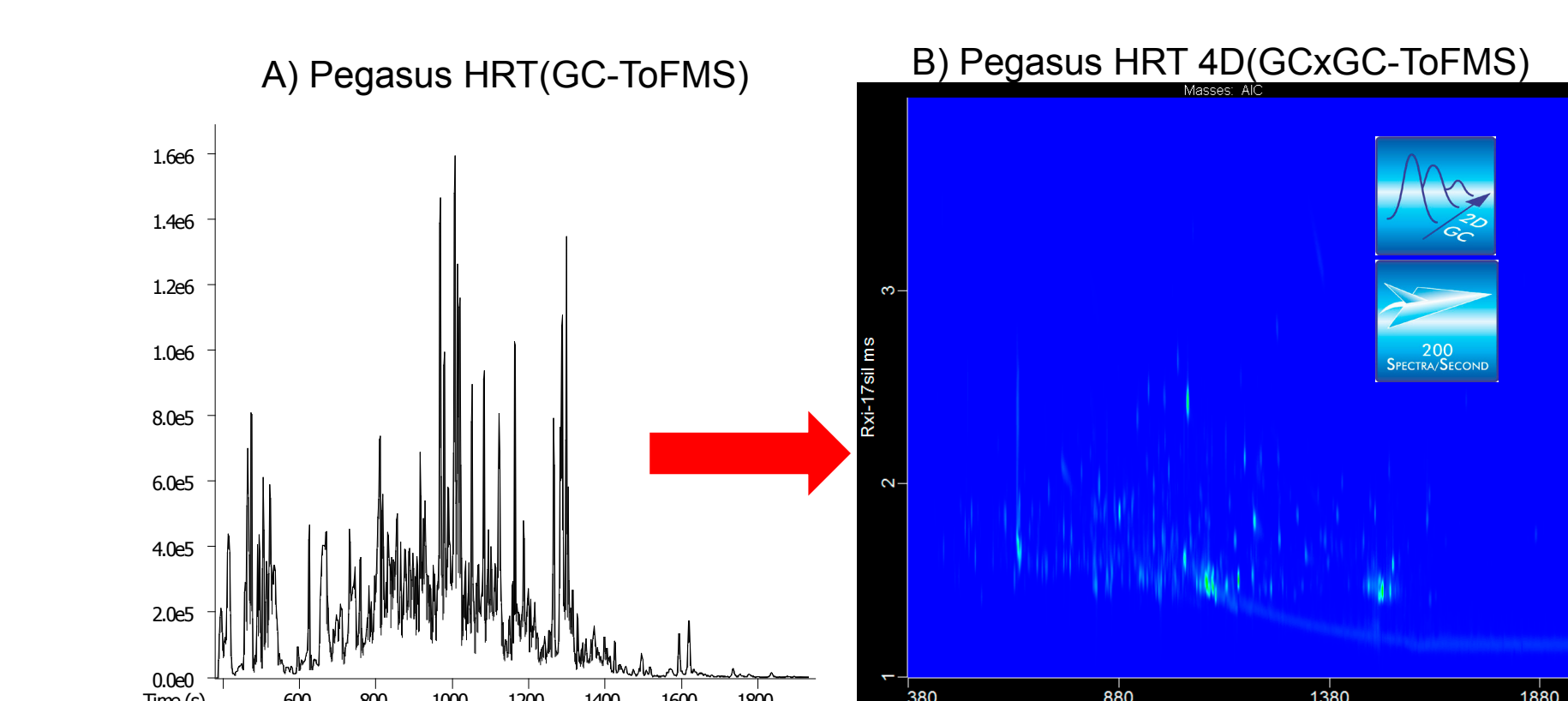
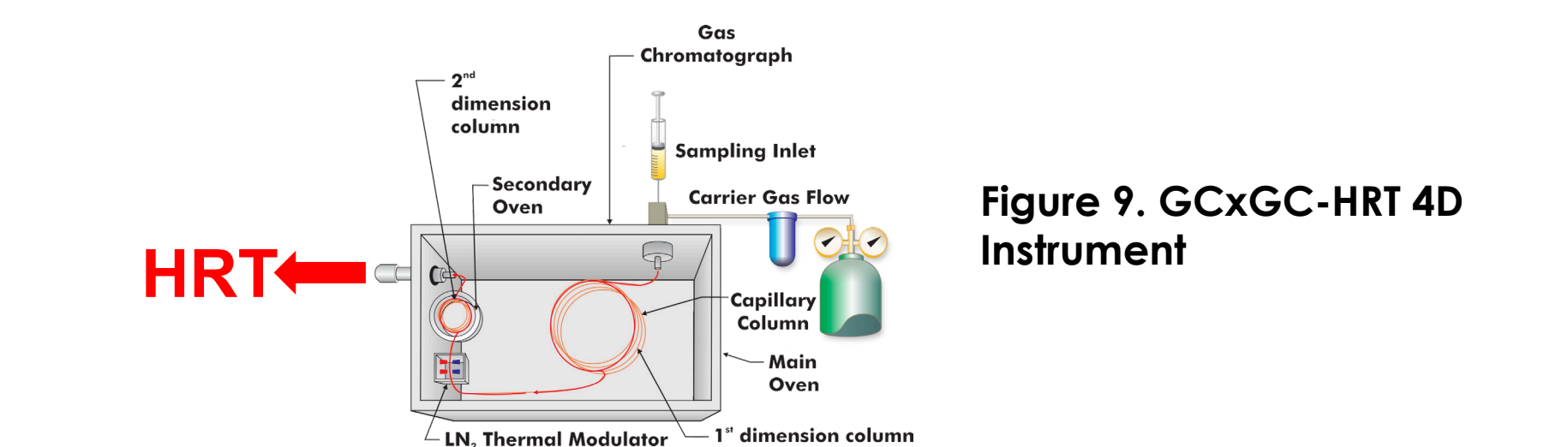


Figure 10. A) GC-HRT AIC and B) GCxGC-HRT 4D Contour Plot Smoker's Urine.

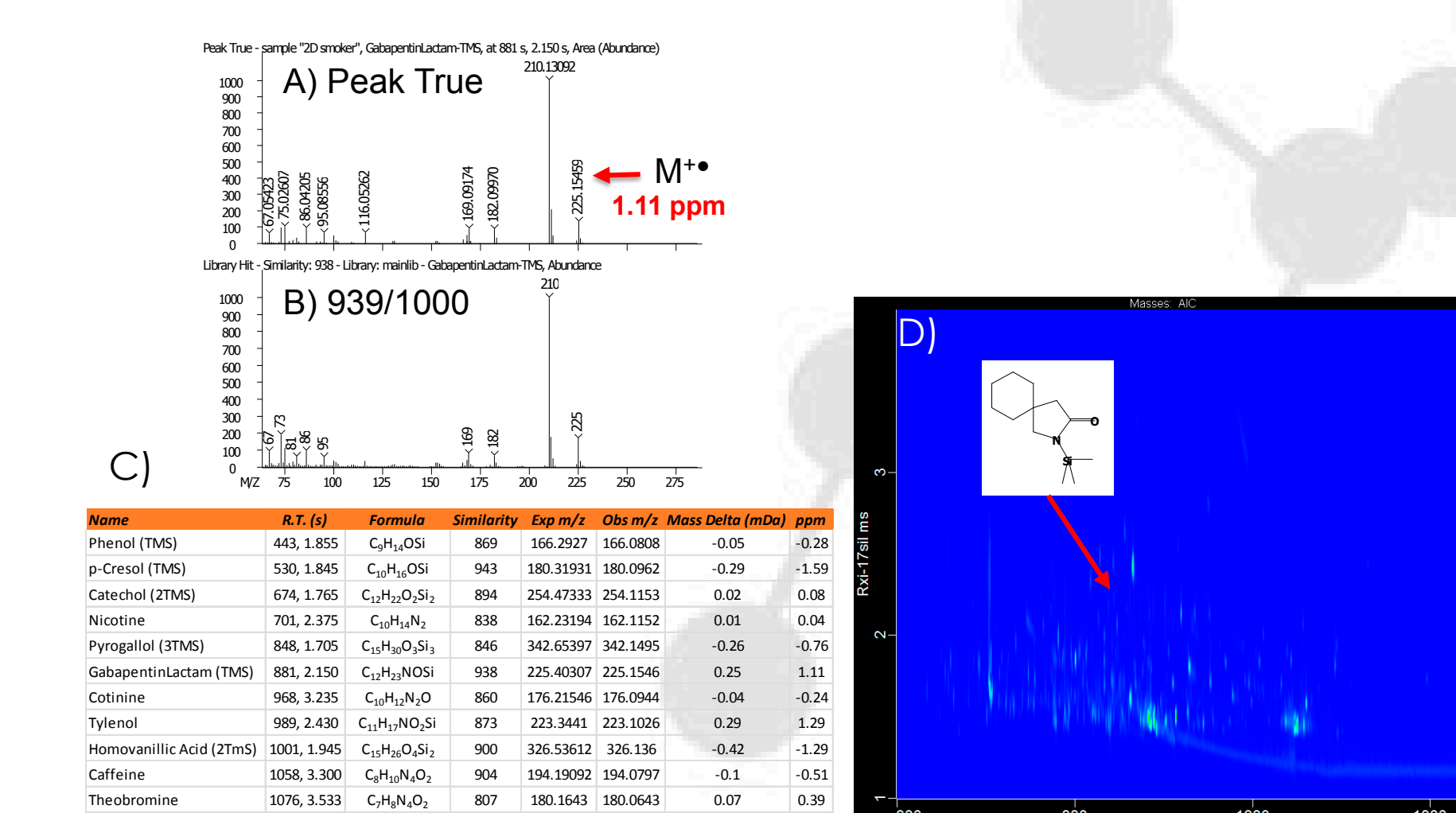


Figure 11. A) Peak True and B) Library Mass Spectral Data for GabapentinLactam in Smokers Urine. C) Table of Representative Compounds. D) Contour Plot.

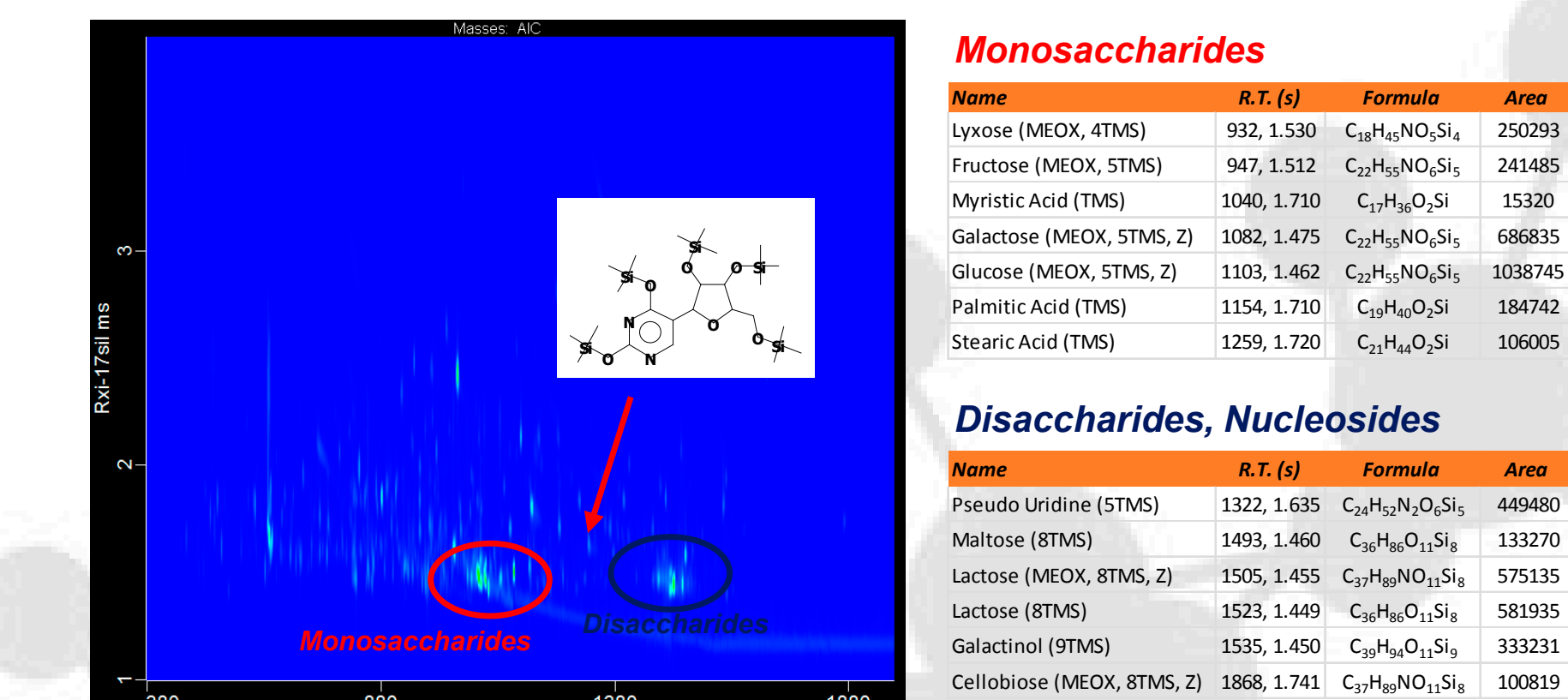


Figure 12. Contour Plot of Non-Smoker's Urine. Table of Representative Mono-, Nucleosides and Disaccharides in Non-Smoker's Urine.

Conclusion

- The Pegasus GC-HRT 4D facilitates fast and confident compound identification through enhanced two-dimensional chromatographic resolution, spectral similarity searches of large, well-established databases, and formula determinations using high resolution accurate mass ions.
- SPME, DHS, and Twister compound sampling techniques are a viable alternative for the analysis of volatiles, semi-volatiles, and hydrophilic compounds in urine samples.
- Derivatization and liquid injections greatly increase the number of compound classes amenable to GC-HRT 4D analysis.

