

A Rapid Sample Preparation for Quantitative Analysis of Cortisol in Saliva and Urine by LC-MS/MS

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HIGHLIGHTS: Reduce manual sample prep. time



ABSTRACT

For determining saliva and urine cortisol levels, LC-MS/MS is the measurement method of choice, with high sensitivity and specificity. However, the conventional LC-MS/MS approach requires lengthy manual sample preparation by liquid-liquid extraction [LLE] or solid phase extraction [SPE], and patient samples are processed in a batch mode. To shorten sample preparation time, Stanford investigated Dispersive Pipette XTRaction tips that contained weak anion exchange (WAX) sorbent and salt (S) necessary for SALLE (Salting-out Assisted Liquid-Liquid Extraction) as a quick alternative. Stanford validated this improved LC-MS/MS method in a clinical chemistry laboratory. Assay characteristics such as sensitivity, specificity, linearity, and precision are presented here. We conclude that the improved LC-MS/MS method is rapid and as sensitive as the conventional LC-MS/MS approach much more suitable for clinical diagnostic use.

INTRODUCTION

Late night saliva and 24-hour urine cortisol are the first line screening tests for cortisol excess [i.e. Cushing's syndrome or disease]. Early morning saliva cortisol may be used to assess and rule out adrenal insufficiency [i.e. Addison's syndrome]. LC-MS/MS is the measurement method of choice, due to improved sensitivity and specificity over traditional immunoassay. To utilize the LC-MS/MS method with superior sensitivity and specificity, WAX-S-XTR tips were validated in order to shorten the manual sample preparation time and to make it amendable to be processed in a random access mode.

MATERIALS AND METHODS

Stable deuterium labeled cortisol (cortisol-d4; CDN Isotopes, Inc., Pointe-Claire, Quebec) was used as internal standard (IS). BSA [0.2%] based calibration standards and quality control standards were made by spiking pure cortisol compound. A Shimadzu Liquid Chromatography system (model LC-20AD) with API 5000 tandem mass spectrometer (Turbo V Source; AB Sciex, Redwood City, CA) was used for all the analysis. Universal style 1 mL tips with 55-65 μ – 10 mg + 40 mg salt (WAX-S) from DPX Technologies, Columbia, SC. LC column was from Phenomenex (Torrance, CA). All patient saliva samples were collected in Salivette [Sarstedt, Numbrecht, Germany].

Table 1. MS/MS parameters

Mass Spectrometry Settings and Multiple Reaction Monitoring						
Collision Gas=9; Curtain Gas =30; Ion Source Gas=50						
Neubilizer Current=5; Source Temp=500°C; Interface heater=on						
Analyte	Parent Ion	Product Mass	CE	DP	EP	CXP
Cortisol	363.21	121.1	30	80	10	20
	363.21	97.0	35	80	10	15
Cortisol-d4	367.3	121.0	30	66	10	20

Table 2. Sample Preparation

Pretreatment	Add 50 μ L Internal standard and 500 μ L acetonitrile to 250 μ L of patient saliva and patient urine samples. Vortex and incubate at room temperature for ten minutes.
Extraction	Aspirate/Dispense 3x with WAX-S-XTR tips
Elution	Transfer 300 μ L organic upper layer
Prep for injection	Solvent evaporation and reconstitute in 120 μ L of H ₂ O/MeOH

RESULTS

The improved LC-MS/MS method with rapid sample preparation are is shown to have comparable characteristics to a conventional LC-MS/MS method. The new sample preparation method was much more rapid [up to 1 hour] compared with the conventional approach [~6 hours].

CONCLUSIONS

Utilizing XTR tips may reduce sample preparation by 80%. The improved LC-MS/MS method with rapid sample preparation retained satisfactory assay characteristics and is much more suitable for a clinical diagnostic lab.

Table 3.

	Saliva (ng/dL)	Urine (ng/dL)
AMR	20-5,000	20- 5,000
CPR	20-5,000	20-50,000
LLOD	5	5
LLOQ	20	20
Correlation	$y=0.97X+23$ $R^2= 0.95$ [n=26]	$y= 0.97X +88$ $R^2= 0.98$ [n=50]
Precision	L= 18% H= 10%	L= 6% H= 4%

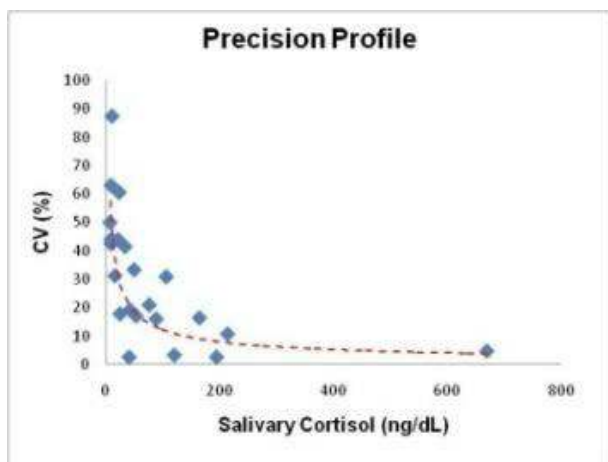


Figure 4. Saliva cortisol precision profile

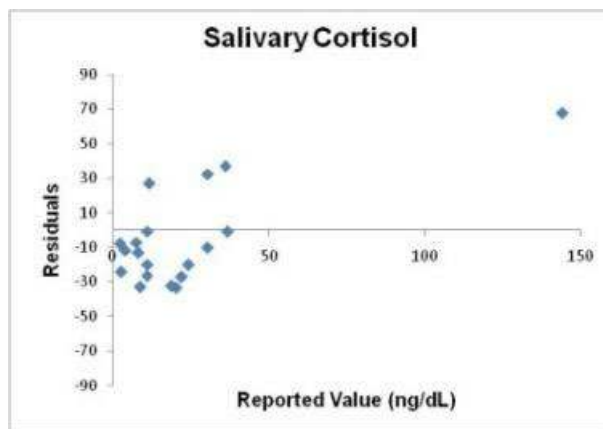


Figure 5. Saliva cortisol residual plot

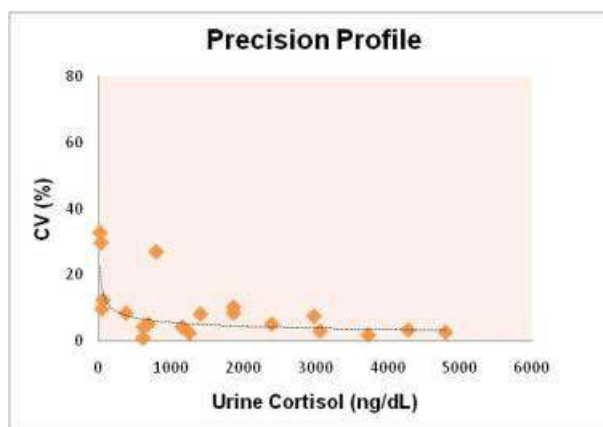


Figure 6. Urine cortisol precision profile

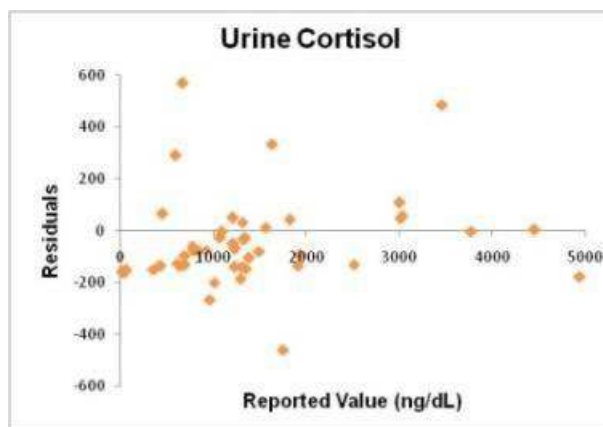


Figure 7. Urine cortisol precision profile

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