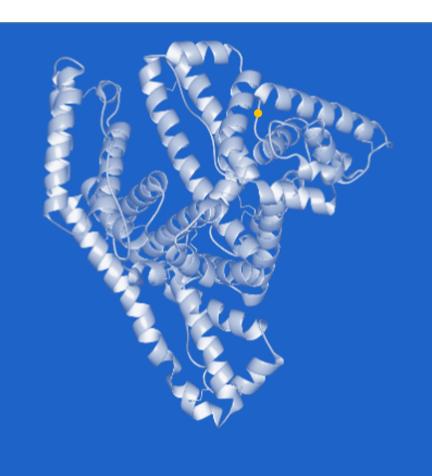


# **DETERMINATION OF** PARACETAMOL-ALBUMIN **ADDUCTS** VIA LC-(HR)MS

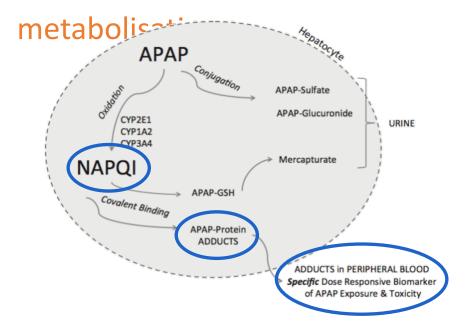
<u>Lisa Delahaye</u>, Christophe Stove

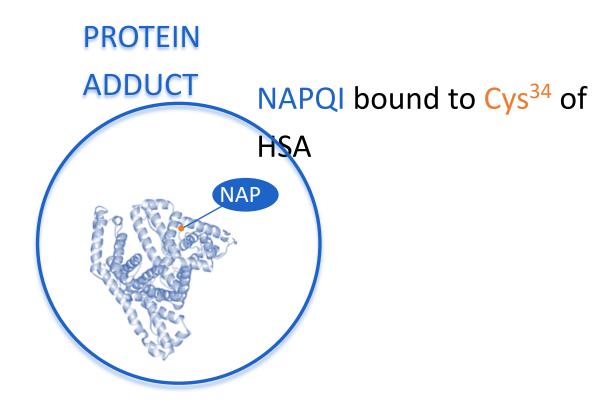




#### PARACETAMOL-ADDUCTS

#### Paracetamol (APAP)



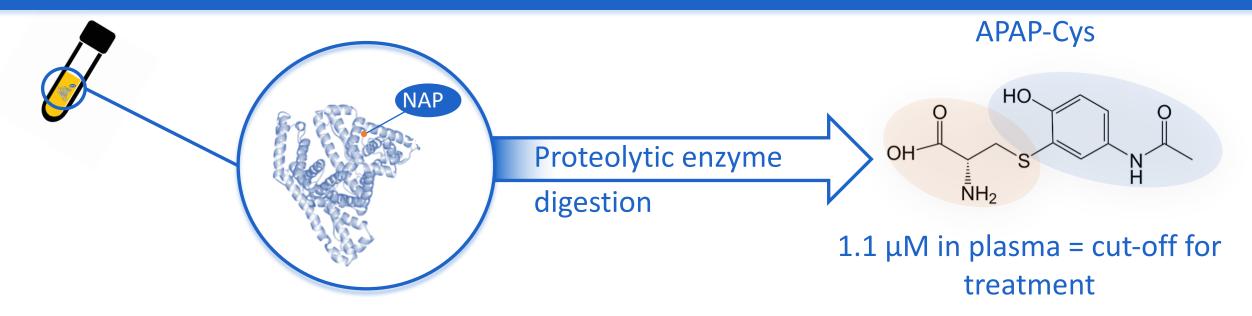


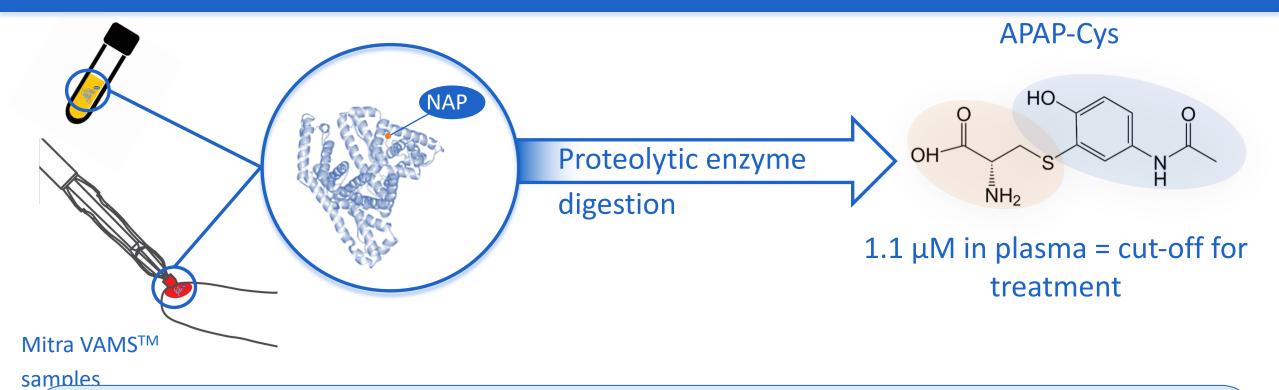
Biomarker specific for paracetamol

Suitable for evaluation of acute and chronic

Study and steer **paracetamol treatment** in patients with increased risk



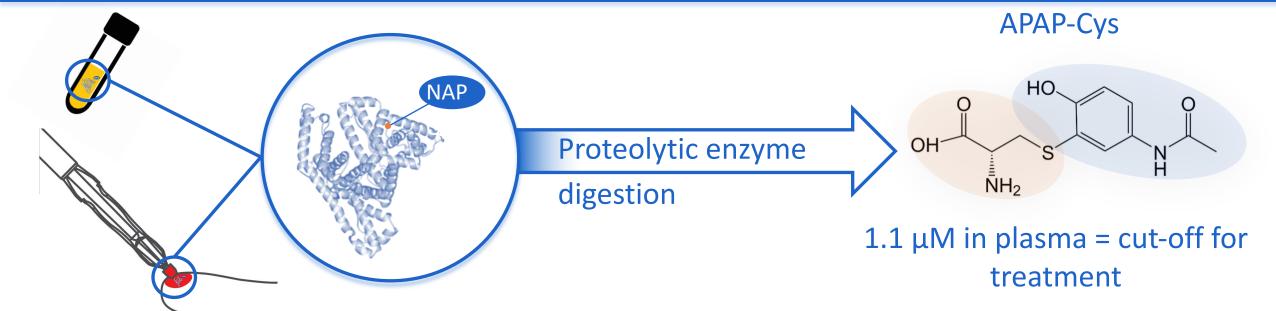




Validated methods: Protein derived APAP-Cys in blood VAMS and plasma VAMS samples

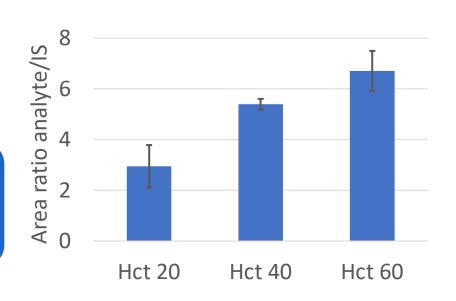
Application: Patient population: Pediatric ICU

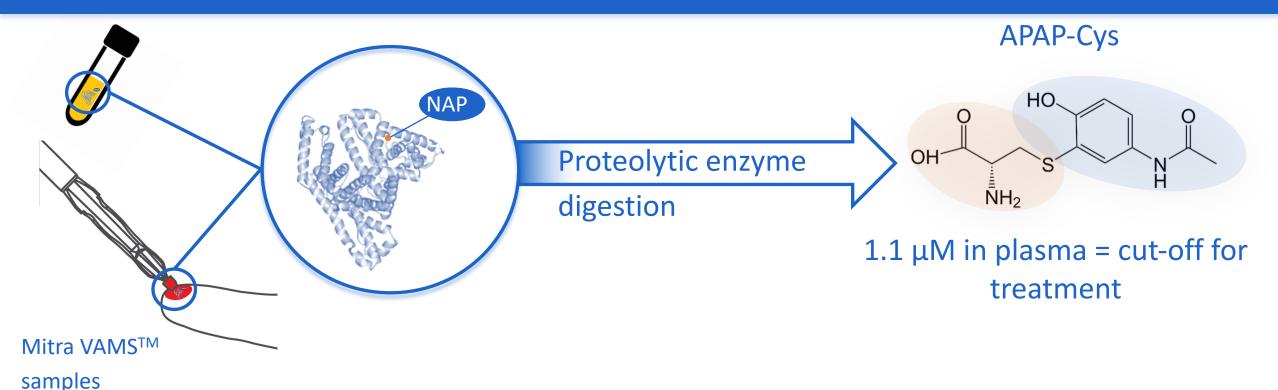
Therapeutic doses of APAP (IV)



Spike paracetamol (80  $\mu$ g/mL) to blank blood with different hematocrits (n=3)

Detection of APAP-Cys:
Increasing concentration with increasing Hct





Validated methods: APAP-Cys in blood VAMS and plasma VAMS samples

Application: Patient population: Pediatrid ICU

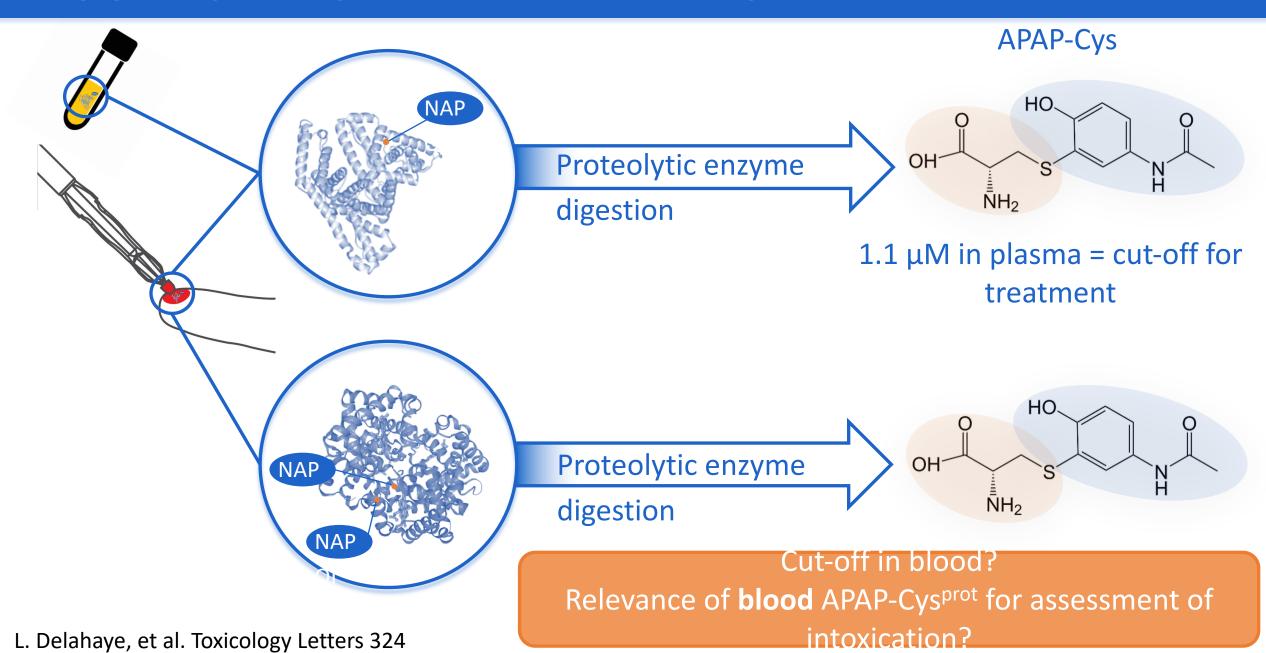
Concentration of some samples >

Therapeutic doses of APAP

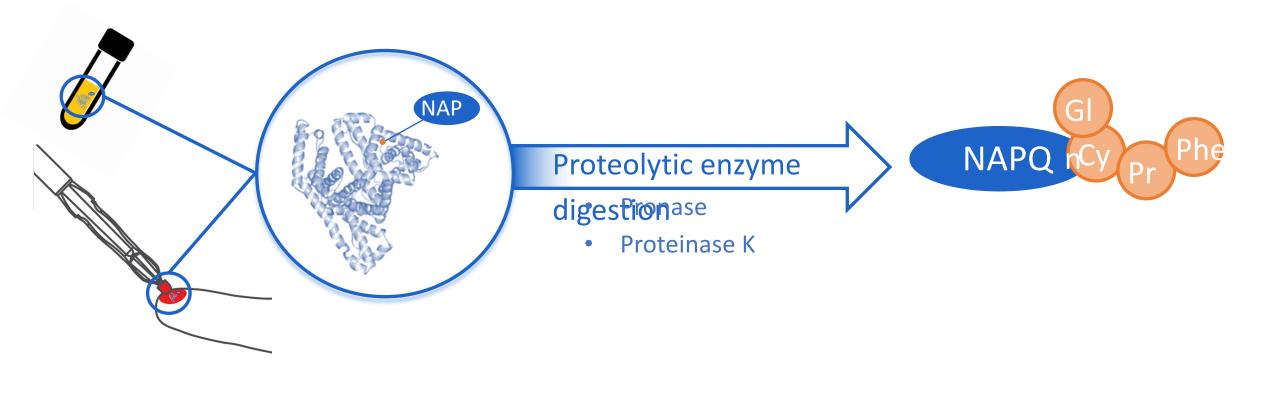
Presence of APAP-Cys in blood spiked with APAP (no metabolisation)

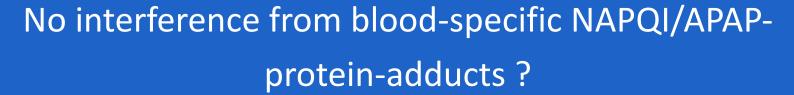
L. Delahaye, et al. Toxicology Letters 324

# BLOOD VS. PLASMA: INTERPRETATION?



### **ALTERNATIVE APPROACH**

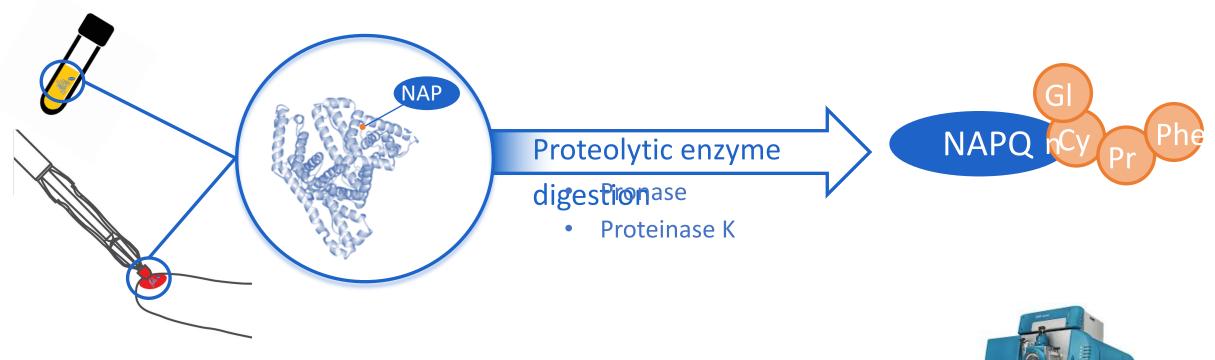






Increased selectivity for APAP-HSA?

### **ALTERNATIVE APPROACH**





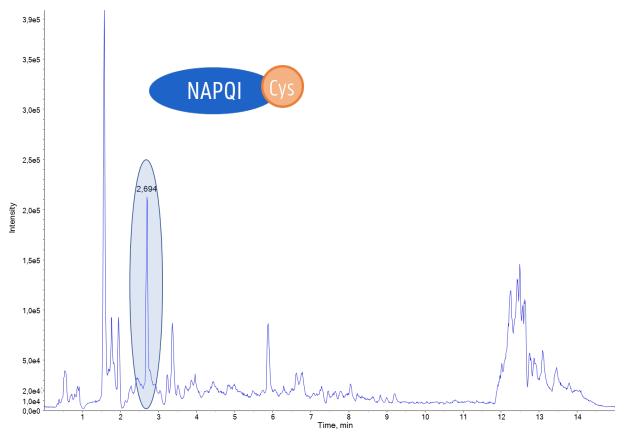
Identification of digestion products in blood and plasma samples via LC-HRMS (SCIEX TT 5600+)

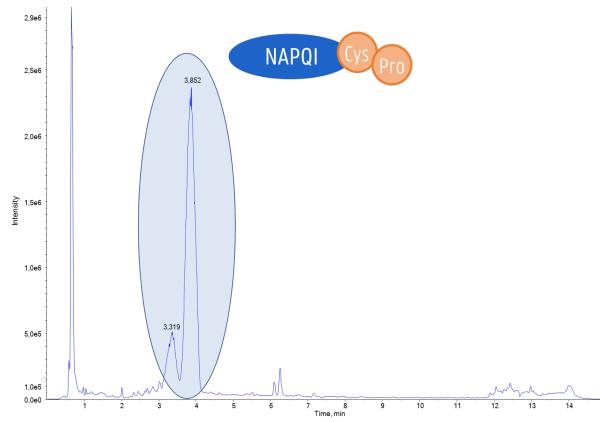


#### IDENTIFICATION OF DIGESTION PRODUCTS

Digestion of native plasma VAMS sample with both enzymes:

#### 1. Pronase: APAP-Cys and APAP-CP

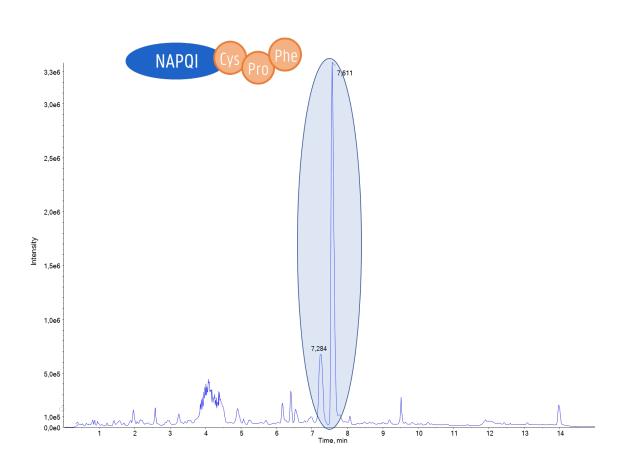


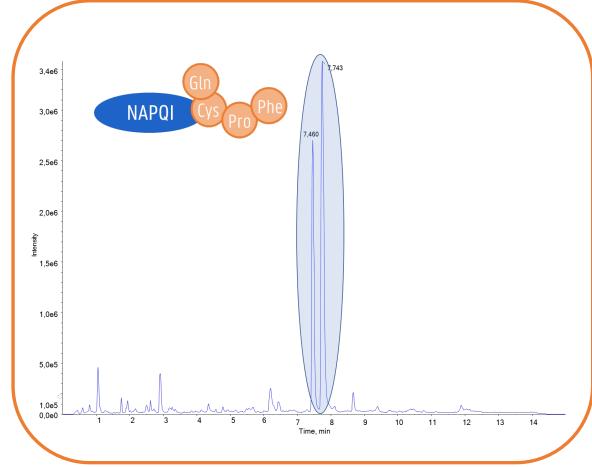


#### IDENTIFICATION OF DIGESTION PRODUCTS

Digestion of native plasma VAMS sample with both enzymes:

2. Proteinase K: APAP-CPF and APAP-QCPF

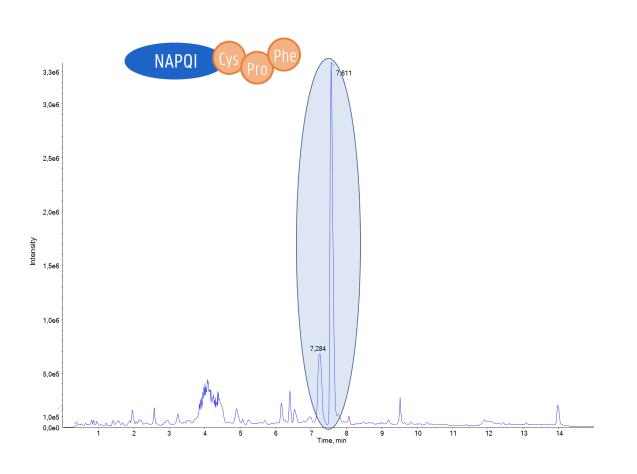


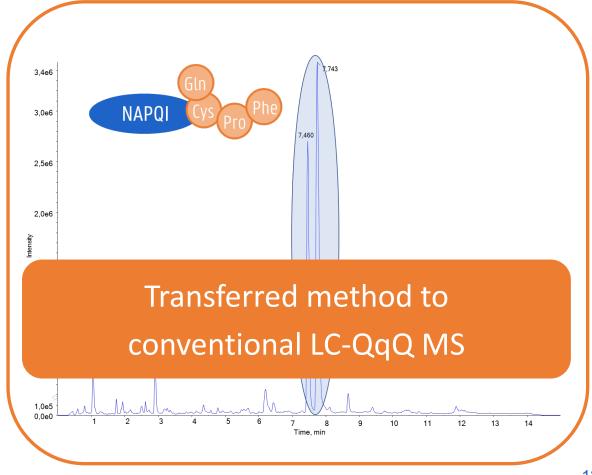


#### IDENTIFICATION OF DIGESTION PRODUCTS

Digestion of native plasma VAMS sample with both enzymes:

2. Proteinase K: APAP-CPF and APAP-QCPF





#### INTERNAL STANDARD

Generation of labeled NAPQI-HSA

d3-labeled NAPQI became available in 20

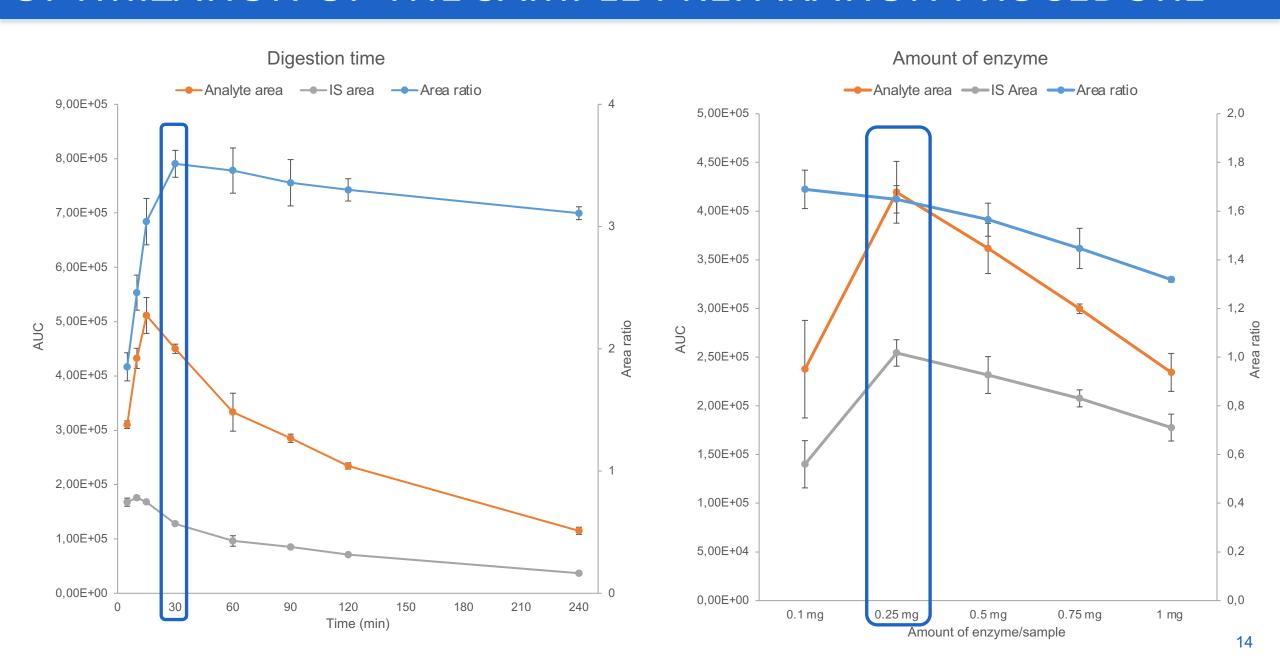
Incubation of d3-NAPQI with HSA → labeled IS

Add IS prior to digestion

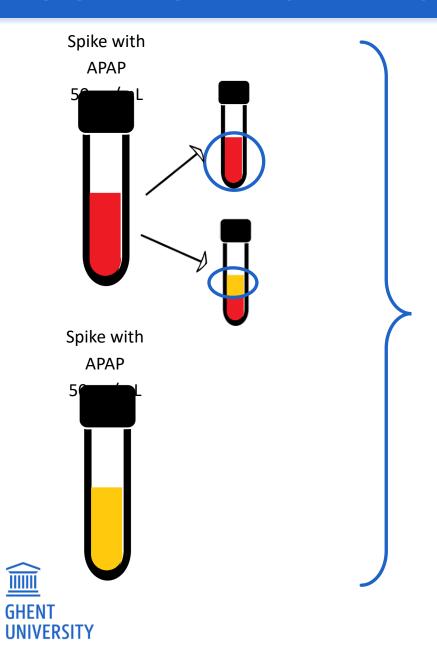
- → Compensation for ME and analytical variation
- → Compensation for digestion efficiency

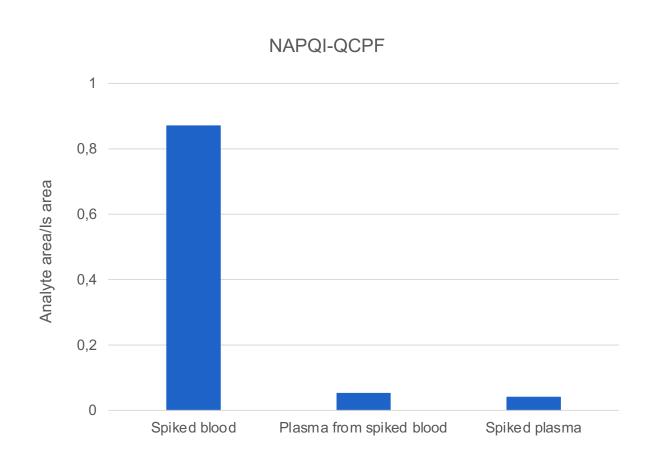


#### OPTMIZATION OF THE SAMPLE PREPARATION PROCEDURE

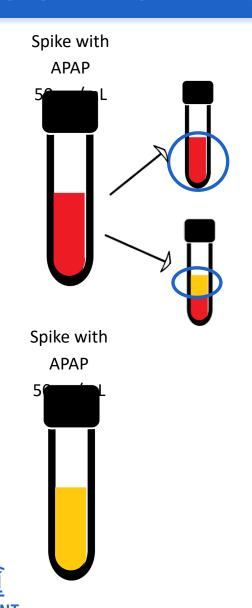


## **BLOOD VS PLASMA: ISSUE SOLVED?**





#### BLOOD VS PLASMA: ISSUE SOLVED?



? Still increased signals when spiking APAP to blood

- → Results confirmed with HRMS method
- → Hb does not contain QCPF AA-sequence
- ? Other protein in RBC fraction of blood which can bind NAPQI/APAP?
- ? Other cause for increased signal in spiked blood?

#### CONCLUSION & FUTURE PERSPECTIVES

Validation of the method for the determination of APAP-Cys in blood, using Mitra® devices, revealed:

Formation of additional protein adducts, which contribute to the signal of APAP-Cys,

due to the presence of paracetamol in blood

Therefore, we:

Identified **alternative digestion products** using HRMS, aiming to develop a more specific method;

Made use of another proteolyic enzyme, proteinase K, generating NAPQI-QCPF;

Optimized the digestion process, to increase the sensitivity of the method;

Included a **SIL internal standard**. generated via incubation of HSA with labeled Future perspectives:

Determine concentration in blood samples from patients taking therapeutic doses of APAP

Possibly switch to (capillary) plasma samples for NAPQI-HSA adduct



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