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## Introduction

The majority of clinical decisions are based on laboratory test results. For many laboratories. Triple quadrupole MRM methods are used to deliver highly sensitive, selective and robust for precise quantification and identification verification. To help transition towards a more effective data review and higher confidence in reporting results. we have been rethinking the capability of MRM in compound identification and verification. In this workflow, 6-10 fragment ion transitions were monitored for each target compound as opposed to a conventional approach using 2-3 fragment ions. By acquiring a high number of fragment ion transitions, each target compound had a corresponding fragmentation spectra which could be used in routine library searching and compound verification using reference library match to clinical and forensic toxicology.

### Methods and Pretreatment

Whole blood was spiked with 33 drugs (Hypnotics). Calibration samples were prepared by modified QuEChERS method. In this study, MRM spectrum mode acquired a library of typically 7 or more MRM's per compound using certified reference materials. The library included retention time, CAS number, formula and MRM transitions for each target compound. As a comparison, MRM triggered product ion scan for three collision energies corresponding to CE: 15, 30, 45V as well as a fourth merged CE spectrum was performed for qualitative.

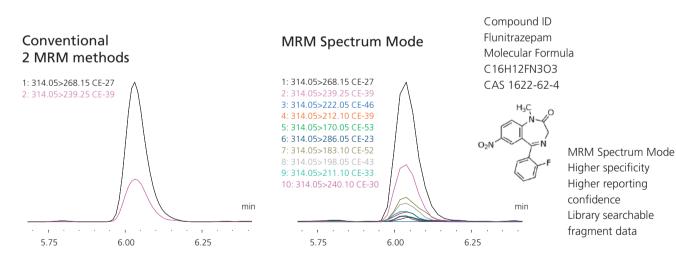


Fig.1 Comparison of conventional MRM and MRM spectrum mode with flunitrazepam



Table 1. LC and MS conditions

[LC] Nexera <sup>™</sup> X2 Syste	em		
Analytical Column Guard Column Solvent A Solvent B	: Phenomenex Secu : Water + 10 mmol/	rity Guard Ultra C18 2 /L ammonium formate	
Gradient Program	Time (min)	%B	
	0	5	
	7.5	95	
	10	95	
	10.01	5	
	15	STOP	
Flow Rate	: 0.3 mL/min		
Column Temp	: 40 °C		
[MS] LCMS-8060			
Ionization	: ESI (Positive)		
Nebulizer Gas	: 3 L/min		
Interface temperature	: 300 °C		
Desolvation Line	: 250 °C		
Heat Block temperatur	re : 400 °C		
Heating Gas	: 15 L/min		
Drying Gas	: 10 L/min		



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#### MRM spectrum mode and Library Searching for Enhanced Reporting Confidence in Forensic Toxicology

# Results

### Quantitation

Conventional qualitative data acquisition by triple quadrupole LC-MS/MS which typically uses 2 MRM per compound. MRM product mode acquires a higher number of precursor-fragment ion transitions to generate a library searchable product ion spectrum. For quantitative analysis, these compounds and QuEChERS extraction were diluted at 0.05, 0.1, 0.5, 1.0 ng/mL for calibration points. For accurate quantitative, internal standard was required. Low similarity score was obtained for some compounds, because some drugs have almost same mass which can't separate by nominal mass. Good LC separation was required for the good similarity score.

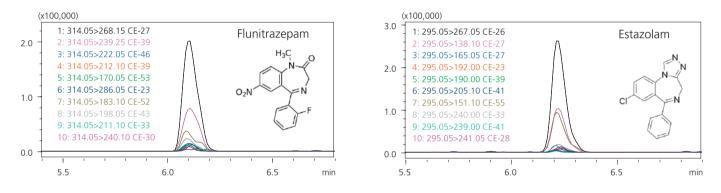


Fig.2 MS chromatogram of flunitrazepam and estazolam post-spiked in whole blood at 1 ng/mL

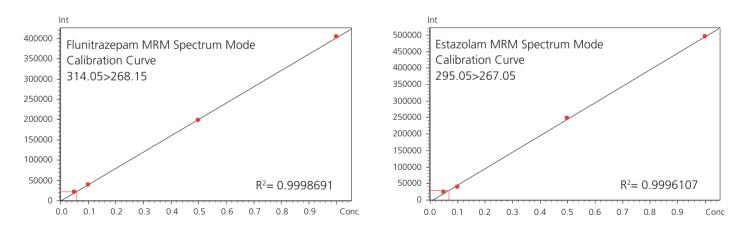


Fig.3 Calibration curve with MRM spectrum mode post-spiked sample (0.05, 0.1, 0.5, 1.0 ng/mL).

Compound	Similarity Score	RT (min)	Accuracy (%)	R <sup>2</sup>
7-aminoflunitrazepam	97	4.67	107	0.9960
7-aminoclonazepam	88	4.25	106	0.9969
Estazolam	93	6.18	85	0.9996
Zolpidem	96	4.68	78	0.9998
Flunitrazepam	98	6.16	77	0.9998
Bromazepam	65	5.78	115	0.9960
Clotiazepam	93	7.14	79	0.9913
Midazolam	98	5.82	111	0.9950
4-hydroxymidazolam	87	5.51	92	0.9992
Triazolam	76	6.32	87	0.9862
Ethyl loflazepate	77	6.95	89	0.9931
Flurazepam	100	5.46	89	0.9998
Nordiazepam	90	6.71	82	0.9833

 Table 2
 Similarity score, retention time, recovery rate, accuracy of typical compounds

 pre-spiked (2.0 ng/mL) and R<sup>2</sup> for post-spiked calibration curve with MRM spectrum mode.

### Library Identification

To minimize the possibility of false reporting without compromising the accuracy, precision and limits of detection, methods were developed to combine the sensitivity of MRM detection with the identification power of a product ion spectrum. The methods have the capability of simultaneously using both precursor and product ion information enabling precise, accurate quantification and library searchable compound identification. To assess the impact of methods designed to increase reporting confidence by library searching on quantification both product ion spectrum methods were compared to a data generated using conventional 2 MRM methods; MRM triggered product ion spectrum and MRM spectrum mode.

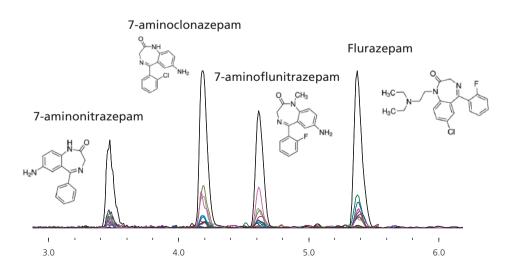


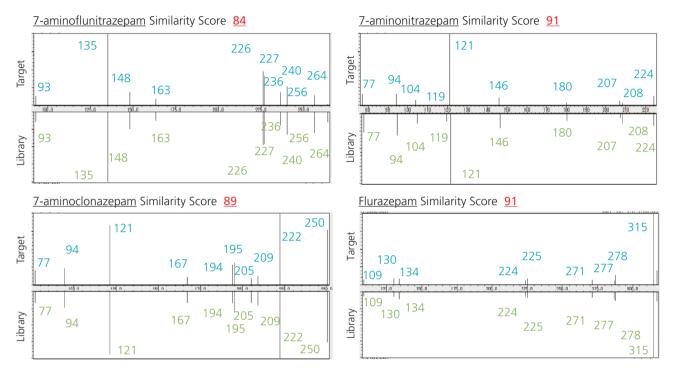
Fig.4 MS chromatogram of 7-aminonitrazepam, 7-aminoclonazepam, 7-aminoflunitrazepam, and flurazepam.

Compound	7-amino nitrazepam	7-amino clonazepam		7-amino flunitrazepam	Flurazepam	
MS/MS acquisition mode				MRM Spectrum Mode		
Precursor	252.1	286.1		284.1	388.2	
Product 1	121.1	222.1		135.1	315.0	
Product 2	208.1	194.1		148.1	225.0	
Product 3	119.1	209.1		236.2	288.0	
Product 4	207.5	205.1		264.1	134.1	
Product 5	180.1	167.1		163.2	317.0	
Product 6	94.1	121.1		227.1	287.0	
Product 7	77.1	250.1		226.1	271.0	
Product 8	224.1	94.1		93.1	109.0	
Product 9	146.1	77.1		240.1	130.1	
Product 10	104.1	195.1		256.1	224.0	
MS/MS acquisition mode				MRM Triggered Product Ion Scan		
Precursor	252.1	286.1		284.1	388.2	
Product 1	121.1	222.1		135.1	315.0	
Product 2	94.1	121.2		226.2	317.0	
CE: 15	20 : 262.1	20 : 296.1		20 : 294.1	20 : 398.2	
CE: 30	20 : 262.1	20 : 296.1		20 : 294.1	20 : 398.2	
CE: 45	20 : 262.1	20 : 296.1		20 : 294.1	20 : 398.2	

 Table 3 Acquisition parameters of MRM Spectrum Mode and MRM

 Triggered Product Ion Scan (Threshold was an intensity of 10,000 counts).

### MRM Spectrum Mode



### MRM Triggered Product Ion Spectrum (Merged Spectrum CE: 15/30/45)

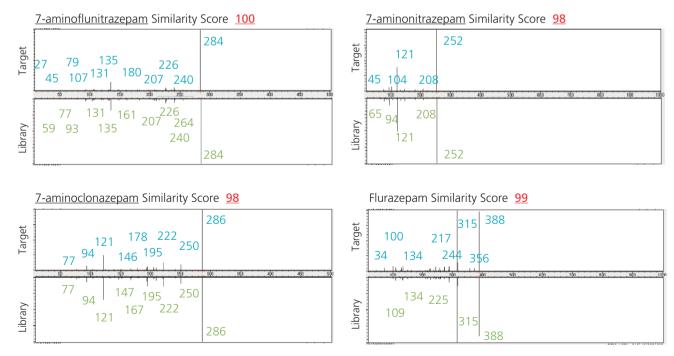


Fig.5 Compared to a conventional MRM triggered product ion scan and MRM spectrum mode, MRM spectrum mode has almost same qualitative ability for these compounds.



## Conclusion

MRM spectrum mode results in high data densities and a high data sampling rate across a peak. This approach generates a consistent loop time and sampling rate producing reliable guantification and peak integration without threshold triggering and creates new opportunities in toxicological screening.

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