

Comprehensive Drug Screening Using Supported Liquid Extraction (SLE) and Liquid Chromatography Quadrupole Time-of-Flight Mass Spectrometry (LC-QTOF-MS)

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Disclaimer

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OVERVIEW

- Challenges of New Psychoactive Substances (NPS)
- High Resolution Mass Spectrometry (HRMS)-based Drug Screening
- Standards for Analytical Testing
- Comprehensive Drug Screening Method
 - Validation
 - Supported liquid extraction (SLE) method using liquid chromatography quadrupole time-of-flight mass spectrometry (LC-QTOF-MS)
 - Applicability
 - Authentic specimen analysis

Challenges of NPS

- Transitory nature
 - Maintaining relevant drug screening protocols
- Analytical Challenges
 - Structural
 - Isobars, isomers, and stereoisomers
 - Pharmacological
 - Potency
 - Low concentrations
 - Reference Material
 - Availability
 - Development



HRMS-based Drug Screening

- **Non-targeted screening (increased scope of testing)**
- Increased specificity
- **Retrospective data analysis**
- Elucidate chemical formula and structural information
- HRMS
 - LC-QTOF-MS (Agilent 6530)
 - Merge TOF high mass resolution and LC/MS/MS mass filtering and fragmentation



Standards for Analytical Testing

- **Recommendations for DUID Investigations**

- Tier I
 - Commonly encountered drugs
 - Essential for routine testing
- Tier II
 - Regionally specific drugs
 - Require advanced instrumentation
- “Tier III”
 - New group created
 - Includes all other compounds not identified as Tier I or II

- **Standards for Analytical Scope and Sensitivity of Testing**

- ANSI/ASB Std. 119
 - Postmortem
- ANSI/ASB Std. 120
 - DUID
- ANSI/ASB Std. 121
 - DFC (in draft)

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Article



Article

Recommendations for Toxicological Investigation of Drug-Impaired Driving and Motor Vehicle Fatalities—2021 Update

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ANSI/ASB Standard 120, First Edition
2021

Standard for the Analytical Scope and Sensitivity of Forensic Toxicological Testing of Blood in Impaired Driving Investigations



Method Validation

Method Validation Overview

- Optimization and validation of supported liquid extraction protocol in whole blood using LC-QTOF-MS (Agilent 6530)
 - Drug list
 - 209 total drugs
 - 10 internal standards
 - Concentrations range from $< 1\text{ng/mL}$ to $50,000\text{ ng/mL}$
 - All Tier I drugs targeted at recommended screening cutoffs
 - Tier II/III drugs targeted at forensically significant concentrations
- Completed method validation with guidance from the ANSI/ASB Std. 036
 - Carryover
 - Interferences
 - Limit of detection
 - Matrix effects
 - Processed sample stability
 - Extraction efficiency (recovery)
 - Reproducibility

Optimized Drug List

| Drug Class | N |
|--------------------------|----|
| Amphetamines | 8 |
| Analgesics/NSAIDs | 4 |
| Anticonvulsants | 9 |
| Antidepressants/SSRIs | 18 |
| Antihistamines | 8 |
| Antihypertensives | 2 |
| Barbiturates | 18 |
| Cannabinoids | 3 |
| Cathinones | 12 |
| Designer Amphetamines | 13 |
| Designer Benzodiazepines | 15 |

Ten Deuterated
Internal
Standards

| Drug Class | N |
|----------------------------|-----|
| Dissociatives | 3 |
| Fentanyl-Analogs | 17 |
| Hallucinogens/Psychedelics | 6 |
| Hypnotics/Sedatives | 5 |
| Miscellaneous | 4 |
| Muscle Relaxants | 7 |
| Novel Synthetic Opioids | 11 |
| Opioids | 19 |
| Stimulants | 6 |
| Synthetic Cannabinoids | 11 |
| Total | 209 |

Supported Liquid Extraction (SLE)

- SLE
 - Novelty in forensic toxicology
 - Modified liquid/liquid extraction (LLE)
 - Advantages of general drug screen
 - No disadvantages of LLE
 - Diatomaceous earth
 - Inert material retains elements of sample and matrix
 - Selective analyte elution
 - Sample pretreatment
 - Non-ionized analyte form
 - Immiscible organic solvent
 - Parallels LLE



Optimized SLE Protocol

- **Spike 600 μ L of blood with selected drugs**
- **Add 300 μ L of 0.1M acetic acid**
- Centrifuge samples 4000 rpm for 10 mins.
- Load supernatant on 1mL SLE column (Biotage SLE+)
- Wait 5 mins.
- Add 3 mL of **70:23:7 Hexane:ETAC:IPA**
- Apply vacuum for 30 secs.
- Add 3 mL of **70:23:7 Hexane:ETAC:IPA**
- Apply vacuum for 5 mins.
- Add 30 μ L of acidic methanol
- Evaporate under nitrogen at 40°C
- **Reconstitute in 20 μ L 60:40 (MPA:MPB)**
 - A: 5mM ammonium formate; 0.01% FA in DIW
 - B: 0.01% FA in acetonitrile
- Centrifuge extracts 4000 rpm for 10 mins.
- Transfer to autosampler vials
- **Inject in positive and negative electrospray ionization**



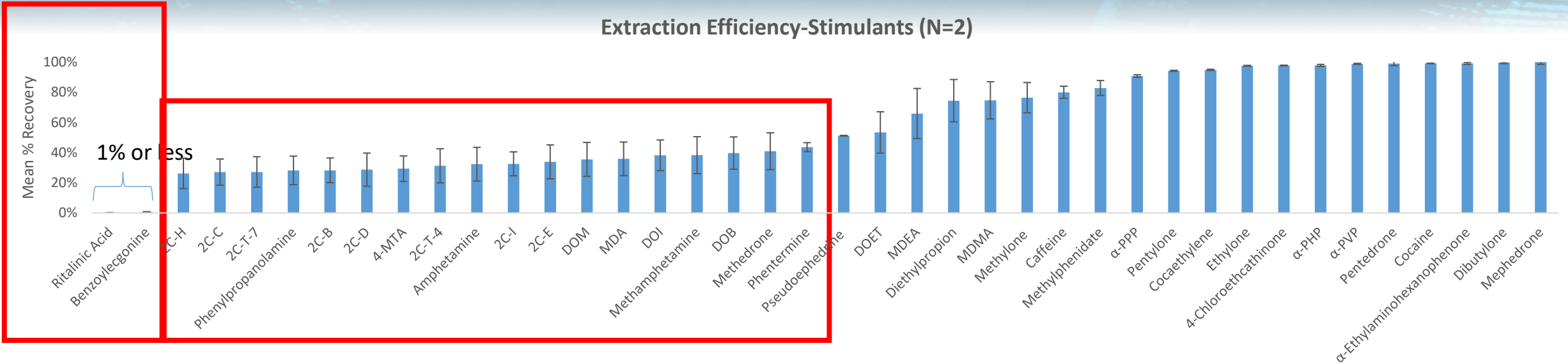
Extraction Efficiency (Recovery)

- Drugs with low recoveries
 - Analgesics/NSAIDs
 - Gabapentin
 - Cetirizine
 - Psilocin
 - GHB
 - BE
 - Ritalinic acid
 - Amphoteric compounds
- Low extraction efficiencies tolerated for drugs encountered at high concentrations
- Extraction methodology optimized for most challenging **essential** drugs
 - THC-COOH
 - Zwitterions (i.e. BE)

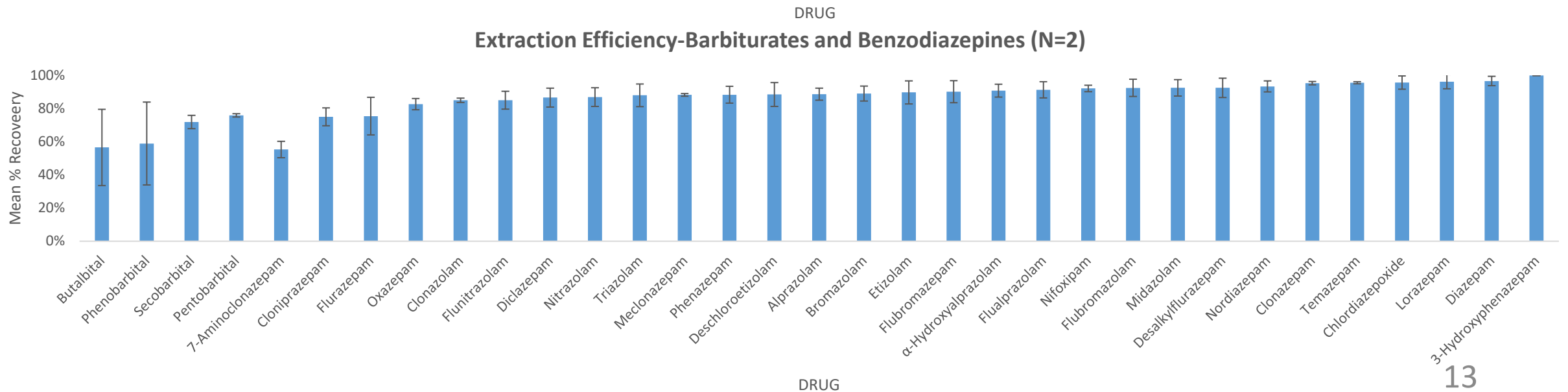
| Drug Category | Extraction Efficiency (%) [N=2] at the Decision Point |
|---------------------------|---|
| Amphetamines/SMAs | 28-75% |
| Anticonvulsants | 21-92% |
| Antidepressants | 58-100% |
| Antihistamines | 72-97% |
| Antihypertensives | 68-98% |
| Antipsychotics | 67-97% |
| Barbiturates | 57-76% |
| Benzodiazepines | 55-97% |
| Cannabinoids | 14-82% |
| Cathinones | 41-101% |
| Designer Amphetamines | 26-53% |
| Designer Benzodiazepines | 75-100% |
| Dissociatives | 90-100% |
| Fentalogs | 71-80% |
| Hallucinogen/Psychedelics | 29-92% |
| Hypnotics/Sedatives | 82-92% |
| Miscellaneous | 69-96% |
| Muscle Relaxants | 63-96% |
| Novel Synthetic Opioids | 82-94% |
| Opioids | 16-100% |
| Stimulants | 80-99% |
| Synthetic Cannabinoids | 53-100% |

Extraction Efficiency (Recovery)

Extraction Efficiency-Stimulants (N=2)

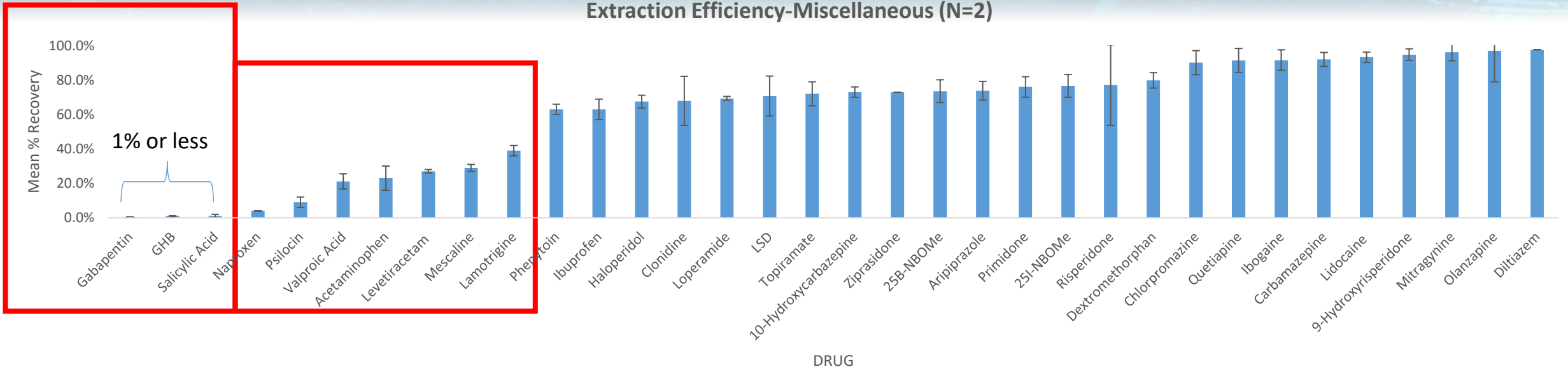


Extraction Efficiency-Barbiturates and Benzodiazepines (N=2)

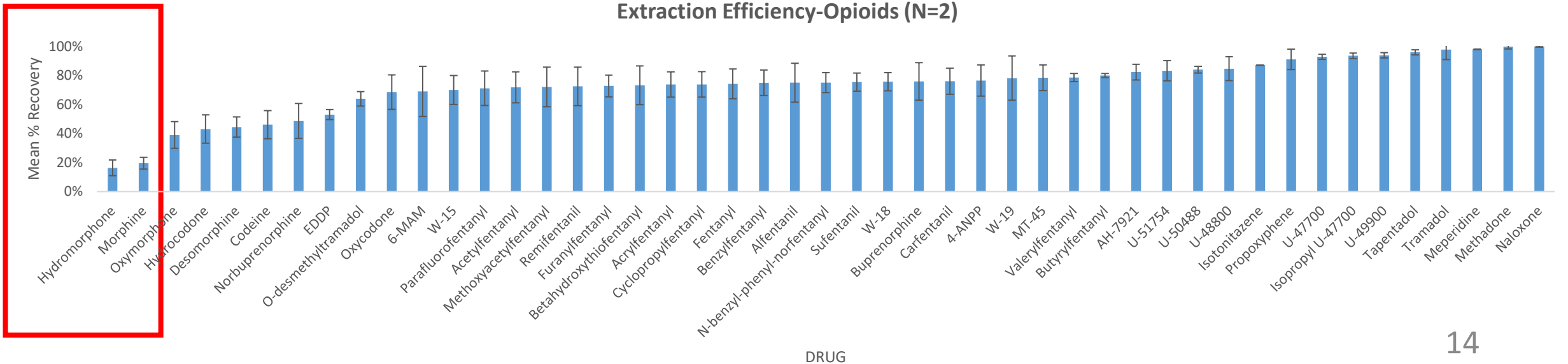


Extraction Efficiency (Recovery)

Extraction Efficiency-Miscellaneous (N=2)

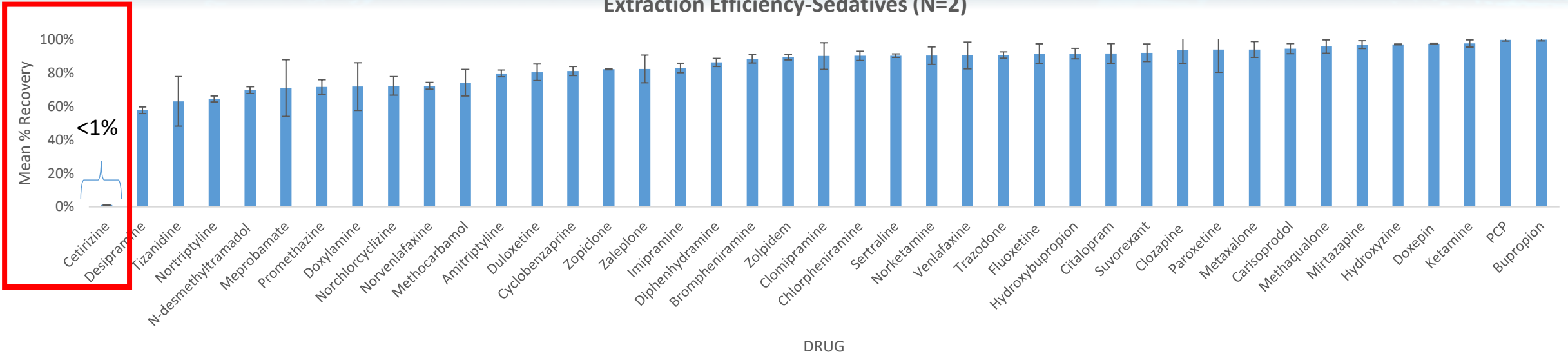


Extraction Efficiency-Opioids (N=2)

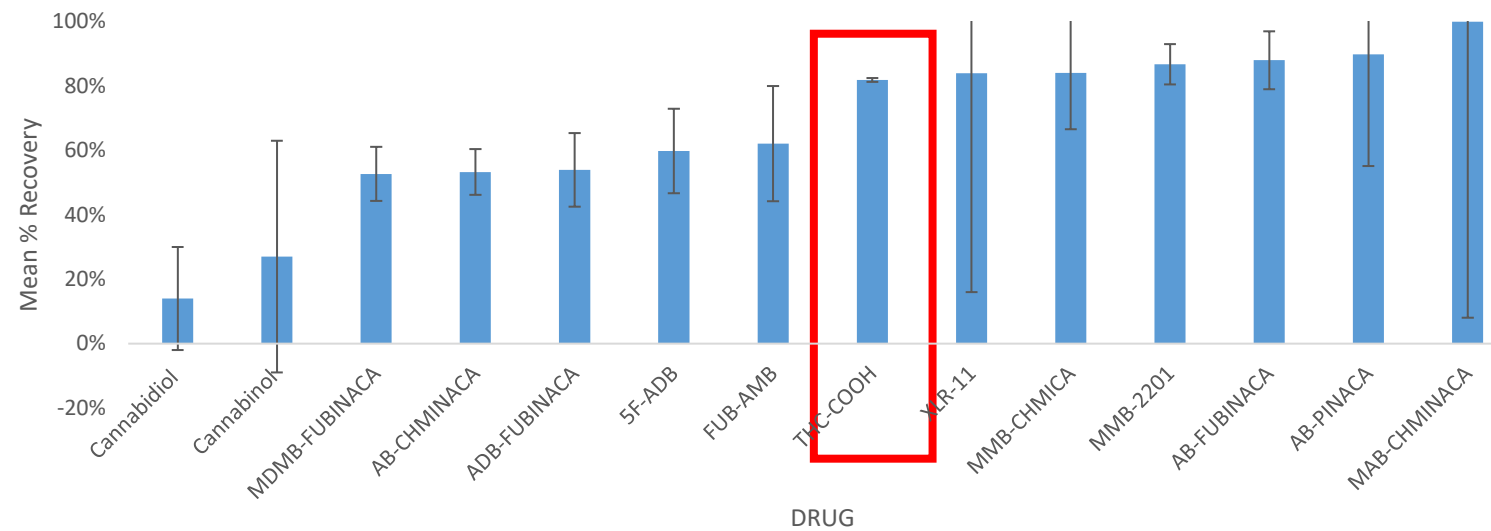


Extraction Efficiency (Recovery)

Extraction Efficiency-Sedatives (N=2)



Extraction Efficiency-Cannabinoids (N=2)



Limit of Detection (LOD)-Tier I Drugs

| DRUG | CutOff (ng/mL) | LOD (ng/mL) | Mass Accuracy | S/N Ratio | Cutoff/LOD |
|-----------------------------|----------------|-------------|---------------|-----------|------------|
| Amphetamine | 20 | 2 | -0.4 | 13 | 10 |
| Methamphetamine | 20 | 2 | -1.6 | 294 | 10 |
| MDMA | 25 | 2.5 | -1.2 | 268 | 10 |
| MDA | 25 | 12.5 | -1.1 | 60 | 2 |
| Lorazepam | 10 | 1 | 2.3 | > 1000 | 10 |
| Alprazolam | 10 | 1 | 0.3 | 86 | 10 |
| Clonazepam | 10 | 1 | 1.0 | 130 | 10 |
| 7-Aminoclonazepam | 10 | 2.5 | 0.3 | 343 | 4 |
| α -Hydroxyalprazolam | 10 | 5 | -2.9 | 19 | 2 |
| Oxazepam | 50 | 5 | -0.7 | 105 | 10 |
| Temazepam | 50 | 5 | 1.3 | 149 | 10 |
| Nordiazepam | 50 | 5 | 0.3 | 300 | 10 |
| Diazepam | 50 | 5 | -0.1 | 526 | 10 |
| THC-COOH | 10 | 10 | 0.6 | 22 | 1 |
| Fentanyl | 1 | 1 | -1.1 | 115 | 1 |
| Zolpidem | 10 | 1 | 2.5 | 24 | 10 |
| Carisoprodol | 500 | 5 | -2.0 | 225 | 100 |
| Meprobamate | 100 | 10 | 2.4 | 106 | 10 |
| 6-MAM | 5 | 0.5 | -2.3 | 127 | 10 |
| Norbuprenorphine | 1 | 1 | 1.4 | 109 | 1 |
| Buprenorphine | 1 | 1 | 0.0 | 93 | 1 |
| Oxymorphone | 10 | 1 | -0.4 | 12 | 10 |
| Codeine | 10 | 1 | -2.3 | 133 | 10 |
| Oxycodone | 10 | 1 | 1.4 | 45 | 10 |
| Hydrocodone | 10 | 1 | -0.2 | 69 | 10 |
| Hydromorphone | 10 | 5 | -1.6 | 31 | 2 |
| Methadone | 50 | 5 | -1.6 | 567 | 10 |
| Morphine | 10 | 10 | -0.5 | 552 | 1 |
| Tramadol | 100 | 25 | -3.1 | 3902 | 4 |
| O-desmethyltramadol | 100 | 50 | -8.8 | 855 | 2 |
| Cocaine | 50 | 5 | -1.9 | 900 | 10 |
| Cocaethylene | 50 | 5 | 0.7 | 971 | 10 |
| Benzoylceginine | 50 | 50 | 14 | 8 | 1 |

- Serial dilution (N=1)
- LODs 1 to 100-fold the cutoff concentration
 - Tier I at recommended concentrations (ANSI/ASB 120)
 - Tier II/III no defined concentrations
 - Data not shown
- Acceptance Criteria
 - Mass Accuracy \pm 10ppm
 - RT within \pm 2%
 - S/N Ratio > 3
 - Fragment ions
 - Ratios within \pm 20%
 - Coelution score > 60

Carryover

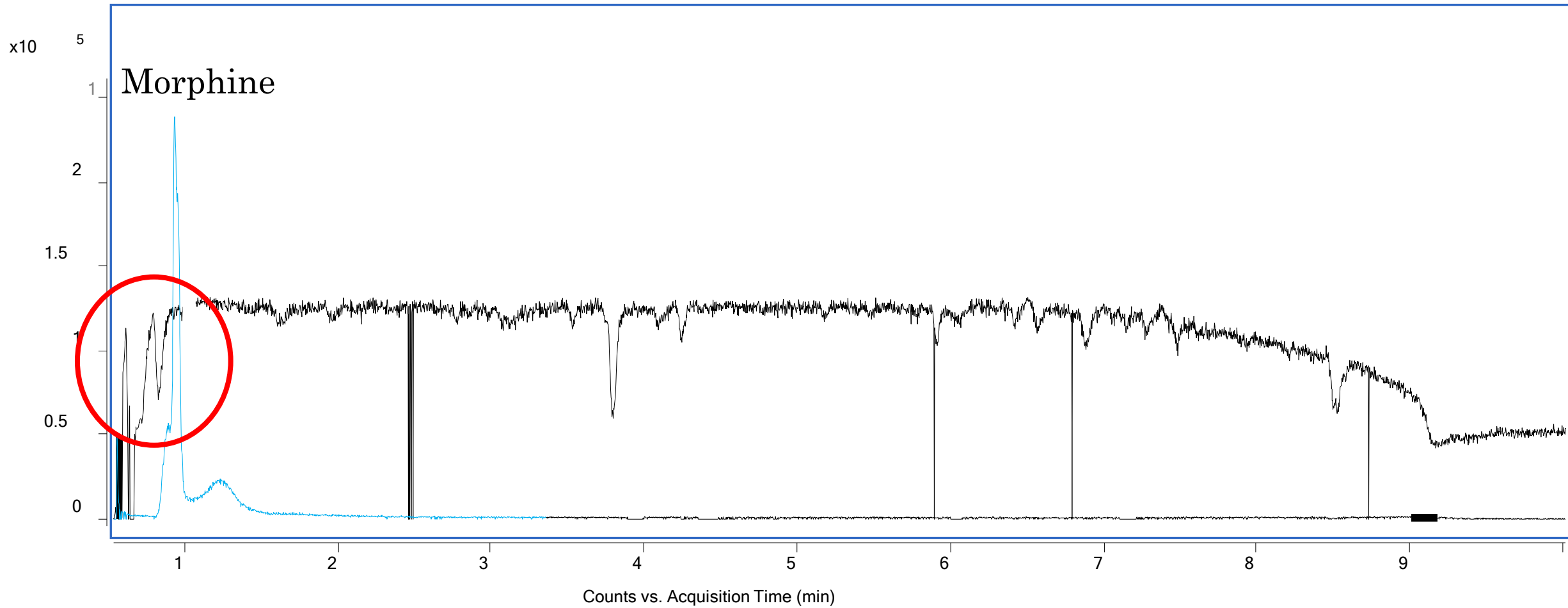
- Challenging for > 200 analytes
- Wide range of cutoff concentrations
 - < 1 ng/mL to 50,000 ng/mL
- Partitioned drugs by concentration
 - 6 drug mixes made
- Assessed drug mixes at multiple levels to evaluate relevant carryover for each analyte
 - 1 to 400 times the cutoff concentrations

Matrix Effects-Tier I Drugs

- Single analytes exhibited
 - ion suppression and enhancement
 - Matrix effects influenced by analytes in solution
 - Separated analytes by RT due to analyte mediated suppression/enhancement
 - Analyzed 10 distinct blood matrices in duplicate
- Tier I Drugs (screen) in **BOLD**
 - Performed post-extraction addition and post-column infusion
- Internal standards
 - Performed post column infusion
- ANSI/ASB Std. 036
 - %Matrix effects $\pm 25\%$ or %CV $\pm 20\%$

| Drug | Conc. (ng/mL) | Avg. ME (N=10) | % CV |
|-----------------------------|---------------|----------------|-------------|
| 6-MAM | 5 | -19% | |
| 7-Aminoclonazepam | 10 | 22% | |
| α -Hydroxyalprazolam | 10 | 11% | |
| Alprazolam | 10 | 7% | |
| Amphetamine | 20 | 11% | |
| Benzoylcegonine | 50 | 11% | |
| Buprenorphine | 1 | 10% | |
| Carisoprodol | 500 | -1% | |
| Clonazepam | 10 | -17% | |
| Cocaethylene | 50 | 6% | |
| Cocaine | 50 | 8% | |
| Codeine | 10 | 11% | |
| Diazepam | 50 | -10% | |
| Fentanyl | 1 | -1% | |
| Hydrocodone | 10 | 23% | |
| Hydromorphone | 10 | 14% | |
| Lorazepam | 10 | 49% | 32% |
| MDA | 25 | 17% | |
| MDMA | 25 | 6% | |
| Meprobamate | 100 | 13% | |
| Methadone | 50 | -2% | |
| Methamphetamine | 20 | 8% | |
| Morphine | 10 | -4% | |
| Norbuprenorphine | 1 | -32% | -32% |
| Nordiazepam | 50 | -27% | -71% |
| O-desmethyltramadol | 100 | -1% | |
| Oxazepam | 50 | 9% | |
| Oxycodone | 10 | 44% | 12% |
| Oxymorphone | 10 | 25% | 32% |
| Temazepam | 50 | 30% | 36% |
| THC-COOH | 10 | -97% | -2% |
| Tramadol | 100 | 6% | |
| Zolpidem | 10 | 17% | |

Post Column Infusion



Additional Parameters

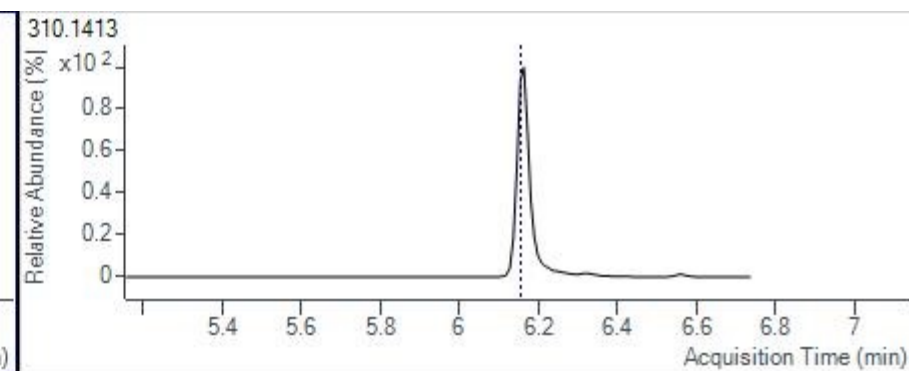
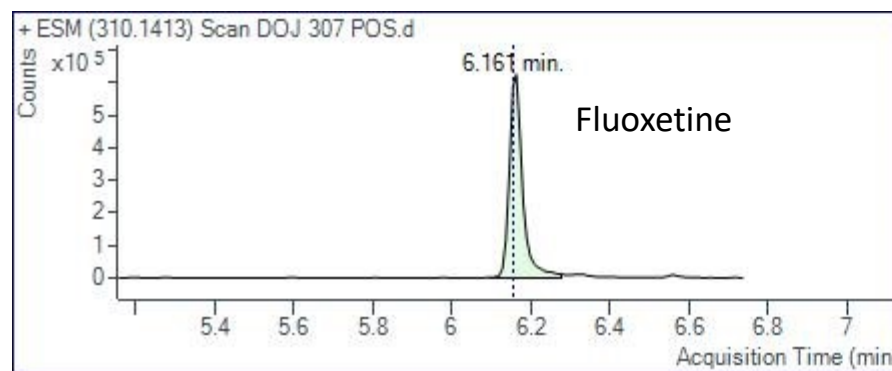
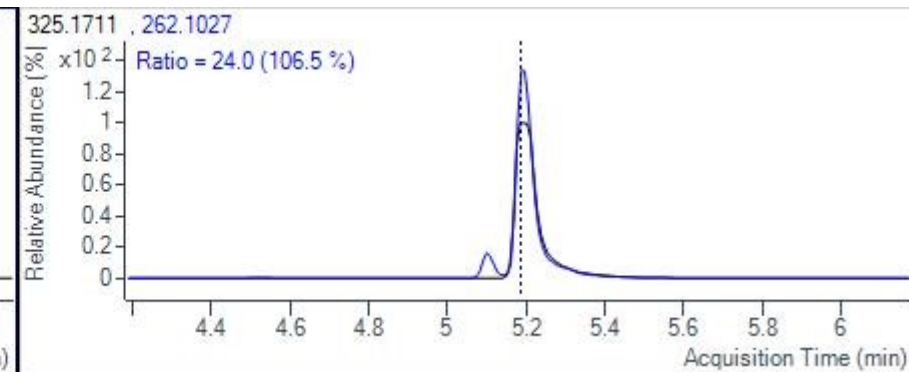
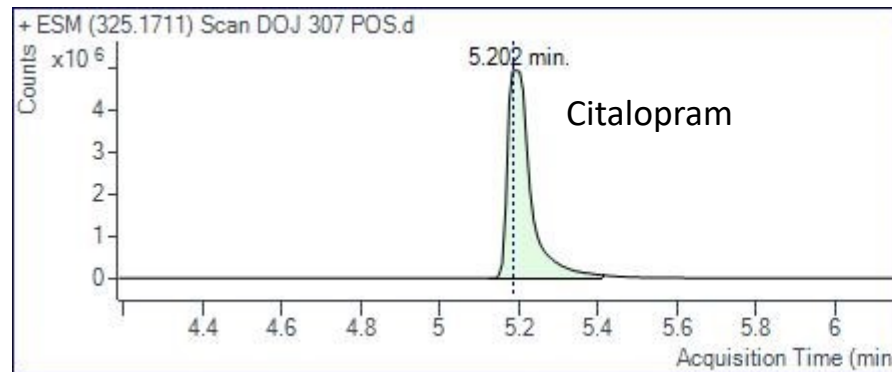
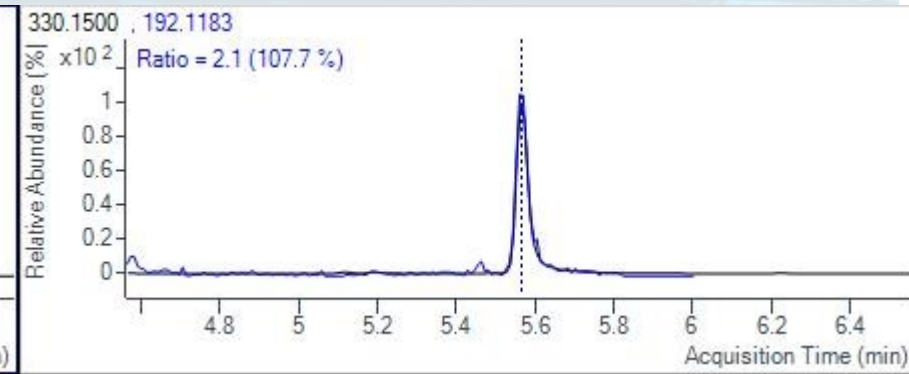
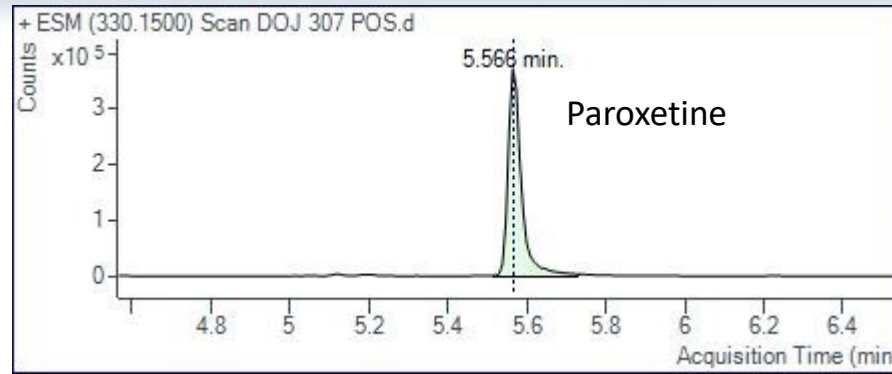
- **Matrix interferences:**
 - Observed for salicylic acid using bovine blood
 - Suspected contaminant from feed
 - No interference in human blood
 - No matrix interferences for remaining 208 drugs (inclusive of ISTDs)
- **Processed sample stability (0-72h)**
 - All drugs detectable for 24 hours
 - Variable (drug/class-dependent) stability thereafter
 - Loss of signal for select amphetamines, cannabinoids, synthetic cannabinoids, and psilocin
- **Reproducibility** at the cutoff (TIER I) or targeted concentration (TIER II/III) using independently sourced matrices (n=10) for all 209 drugs
 - Evaluated average S/N ratio
 - All drugs acceptable at > 3
 - All other acceptance criteria were met



Applicability and Authentic Specimen Analysis

Specimen F

- **Immunoassay Results**
 - NEGATIVE
- **LC-QTOF-MS Results**
 - Paroxetine
 - Citalopram
 - Fluoxetine
 - Doxylamine
 - Trazodone
 - DXM



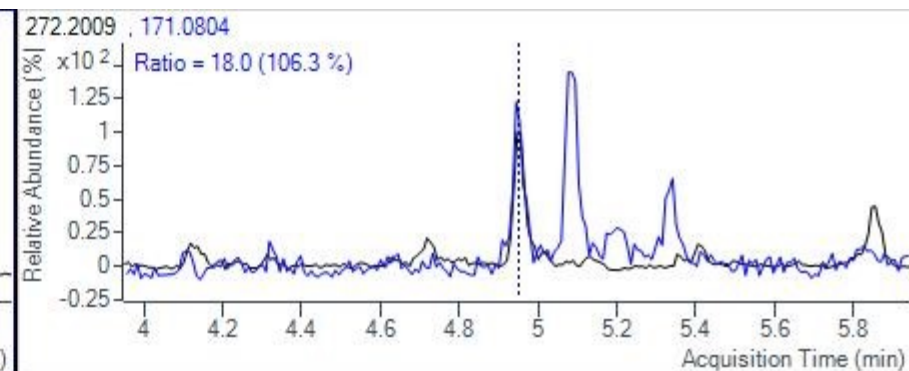
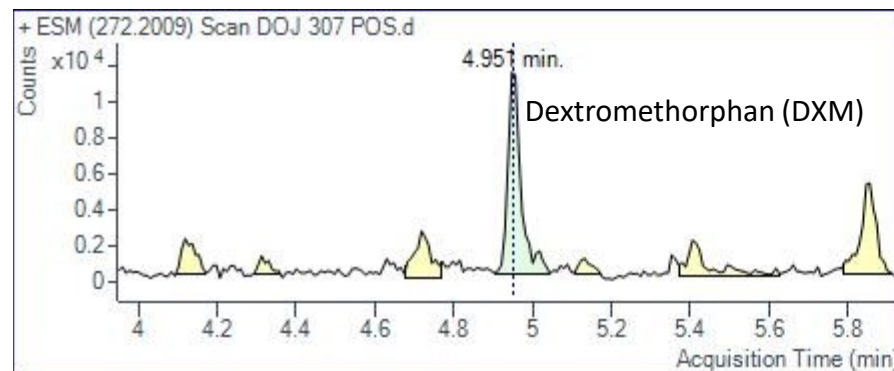
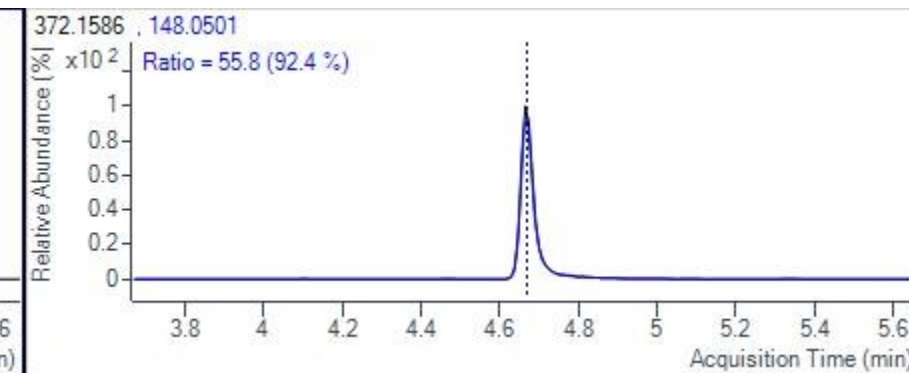
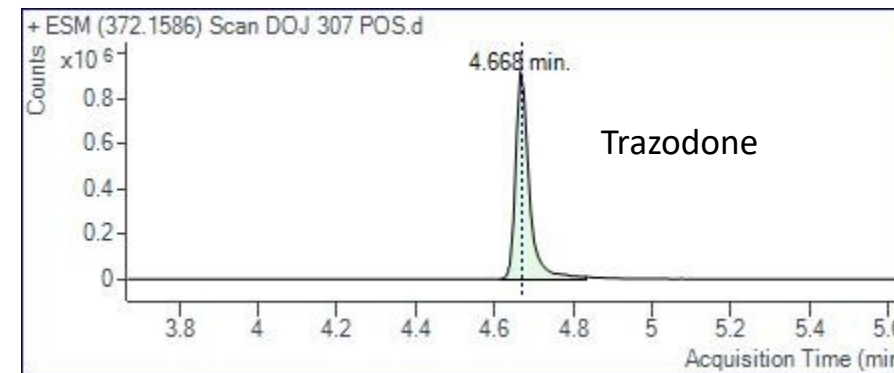
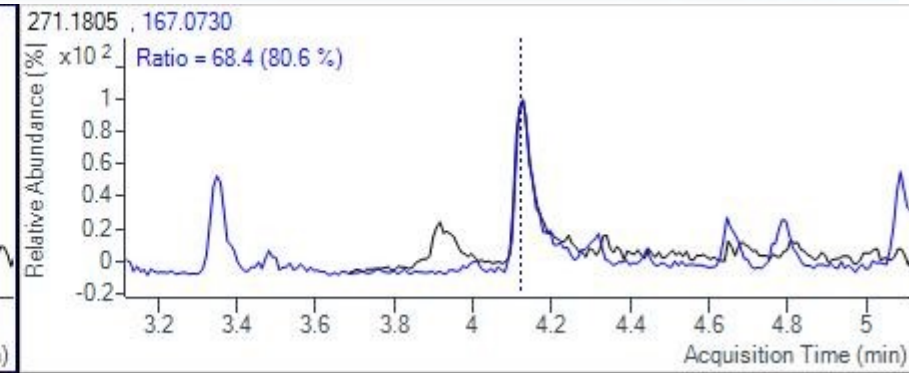
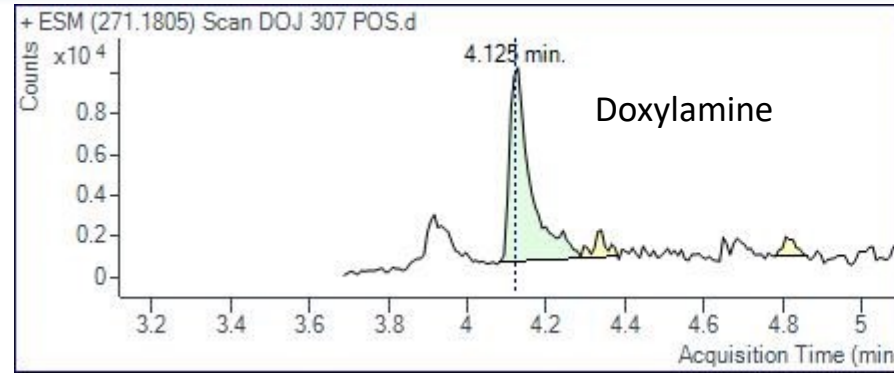
Specimen F

- **Immunoassay Results**

- **NEGATIVE**

- **LC-QTOF-MS Results**

- Paroxetine
- Citalopram
- Fluoxetine
- Doxylamine
- Trazodone
- DXM



Conclusion

- Traditional drug screening techniques
 - Cannot keep pace with NPS
- Unpredictability of the illicit drug market and drug legislation
 - Shifts the patterns of use
 - New substances emerge as replacements
 - Circumvent prosecution with legal highs
- HRMS-based screening
 - Broadens analytical capabilities and scope of drug testing
 - Improves delivery of forensic toxicology services

References

- Agilent Technologies. Comprehensive LC/MS Analysis of Opiates, Opioids, Benzodiazepines, Amphetamines, Illicits, and Metabolites in Urine for Forensic Toxicology. Agilent Application Note, 2014
- ANSI/ASB STD 119: Standard for the Analytical Scope and Sensitivity of Forensic Toxicology Testing for Medicolegal Death Investigations
- ANSI/ASB STD 120: Standard for the Analytical Scope and Sensitivity of Forensic Toxicology Testing in Impaired Driving Investigations
- ANSI/ASB STD 121: Standard for the Analytical Scope and Sensitivity of Forensic Toxicology Testing Urine Testing in Drug-Facilitated Crime Investigations (in draft)
- D’Orazio, AL, Mohr, ALA, Chan-Hosokawa, A, Harper, C, Huestis, M, Limoges, J, Mile, A, Scarneo, C, Kerrigan, S, Liddicoat, L, Scott, K, and Logan, B (2021) Recommendations for Toxicological Investigation of Drug-Impaired Driving and Motor Vehicle Fatalities-2021 Update. *Journal of Analytical Toxicology*, 45, 529-536.
- Logan, BK, D’Orazio, AL, Mohr, ALA, Limoges, JF, Miles, AK, Scarneo, CE, Kerrigan, S, Liddicoat, LJ, Scott, KS and Huestis, MA (2017) Recommendations for Toxicological Investigation of Drug-Impaired Driving and Motor Vehicle Fatalities-2017 Update. *Journal of Analytical Toxicology*, 42(2), 1-6.

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**THANK YOU
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Questions

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