

Alzheimer's Association Global Biomarkers Standardization Consortium

CSF Round Robin Program

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CSF round robin program

- Initial focus: CSF A β ₁₋₄₂
- Analytical methodology: srm/tandem mass spectrometry
- Involve volunteer labs with significant experience in mass spectrometry analyses of biomarkers
- Follow an agreed on protocol
- Assess precision across 4 participating labs using CSF pools
- Share raw data amongst the labs
- Statistical analysis
- Report data to peers
- Publish this pilot study

CSF round robin program

- The 4 participating labs: Waters (Erin Chambers); PPD (Rand Jenkins); UPenn (Les Shaw); UGot (Kaj Blennow)
- Initial reports of methods in literature and in ASMS & AAIC meetings
- Initial pilot study compared performance across 4 participating laboratories; initial report at the AAIC 2013 meeting; manuscript submitted
- N=12 CSF pools (prepared & shipped by UGot to each participant laboratory)
- Use of a common sample preparation methodology
- 3 different mass spectrometer systems and 3 different HPLC systems
- 4 different calibration matrices
- Single-plex, triplex or pentaplex methods utilized
- Different batches of high purity rPeptide A β ₁₋₄₂ standard utilized

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Four Center collaborative study of mrm/tandem mass spectrometry reference methodology for measurement of $A\beta_{1-42}$ in 12 CSF pool samples

- 3 MS platforms
 - Thermo TSQ Vantage
 - Waters TQ-S
 - ABI Sciex API 5000
- 3 HPLC platforms
 - ACUITY 1D
 - ACUITY 2D
 - Accela 1250
- 4 different surrogate matrices
 - Artificial CSF + 5% rat plasma
 - Artificial CSF + 4 mg/mL BSA
 - Salt and phosphate buffer solution + 4 mg/mL HSA, 0.05 mg/mL IgG, glucose
 - Human CSF using N15 labeled $A\beta_{1-42}$ as calibrator
- Single-plex, tri-plex or penta-plex methods employed
- **Sample preparation is the same across the 4 centers**

Laboratories participating in the Global Biomarker Standardization Consortium collaborative study

- Erin Chambers & Mary Lame, Waters & Pfizer
- Moucun Yuan, Junlong Shao, William R. Mylott, and Rand Jenkins, PPD
- Magdalena Korecka, John Trojanowski, Leslie Shaw, UPenn
- Henrik Zetterberg, Kaj Blennow, Josef Pannee, Erik Portelius, Johan Gobom, UGot

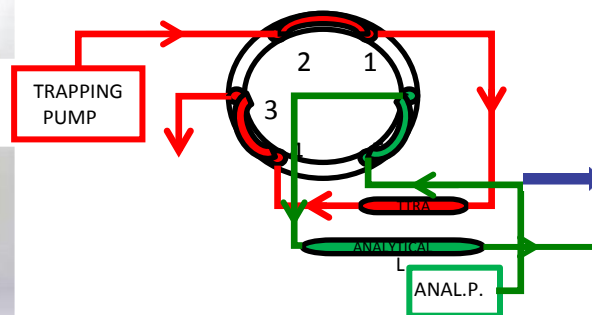
- mrm LC/MSMS method for A β peptides in CSF

- A β peptides from rPeptide
- N¹⁵-A β peptide ISTDs added to CSF samples
- Guanidine·HCl
- SPE extraction – 96 well Format
- 2D HPLC/SRM tandem mass spectrometry



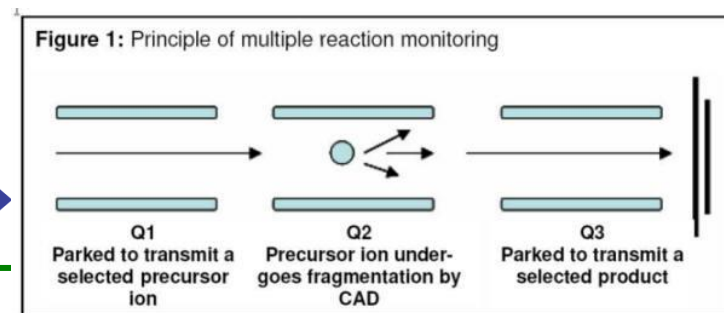
ACQUITY UPLC
Trapping column
Analytical column

- UPLC BEH-300
- C18 2.1x150mm, 1.7 μ m



Injection position of switching valve - 2D chromatography

Korecka M et al, AAIC 2012 Poster #P1-317



m/z 1129.0 \longrightarrow m/z 1078.8

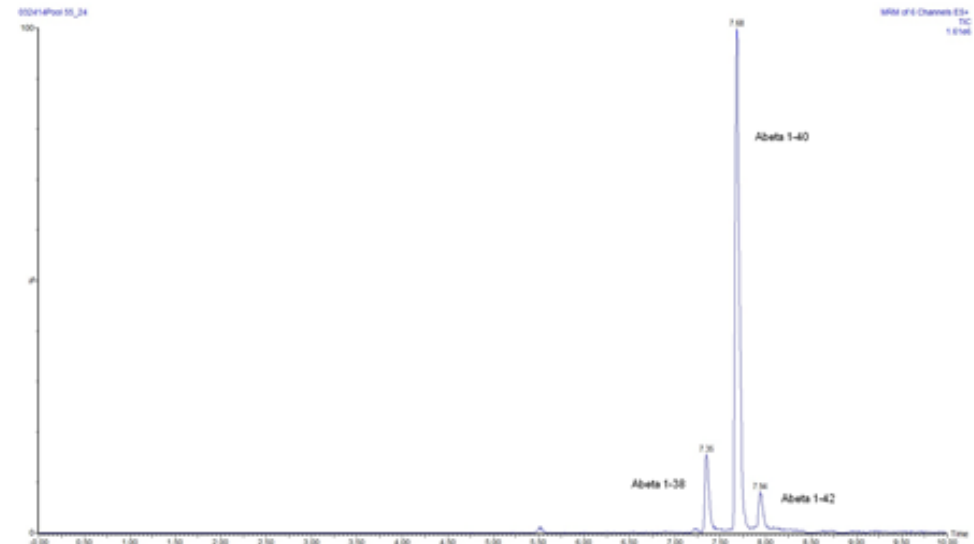
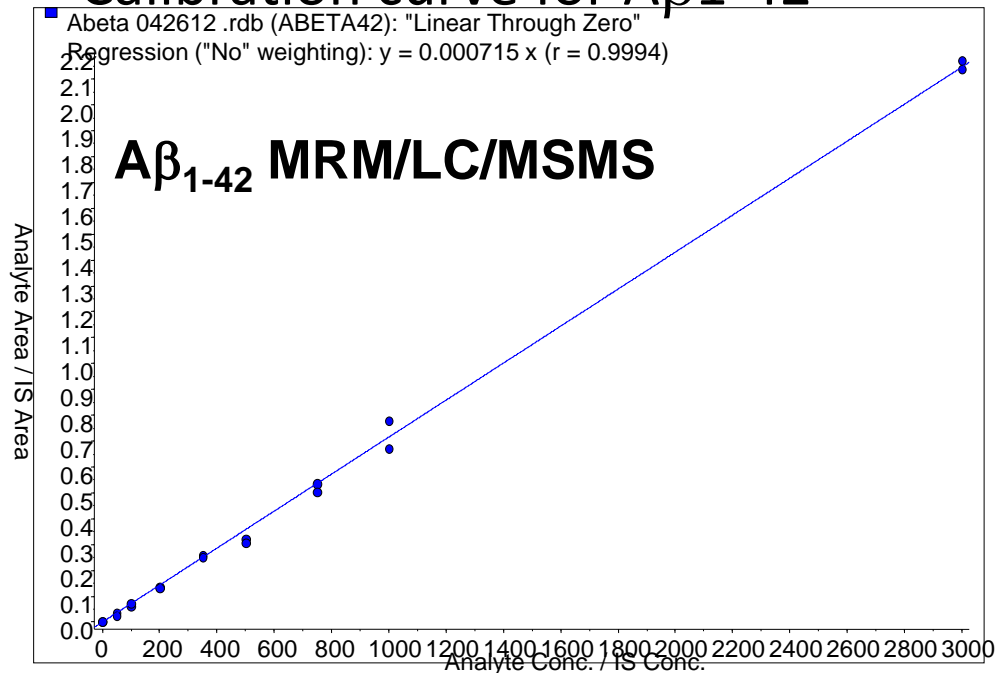
(A β_{1-42} precursor [4+] ion) (product [4+] ion)

AB SciexTandem mass spectrometer API 5000

SRM-tandem mass spectrometry

- Established
 - Surrogate matrix
 - LLOQ/UPOQ
 - Linearity
 - Precision performance
 - Recovery from hCSF
 - Freedom from ion suppression
 - Equivalence between surrogate matrix and

Calibration curve for A β 1-42



Total ion chromatogram of human CSF sample with the following concentrations of three Abeta peptides: 1320pg/mL (A β 1-38), 5720pg/mL (A β 1-40) and 545pg/mL (A β 1-42)

hCSF patient sample

Typical calibration curve for the quantitation of amyloid beta 1-42 (single analyte assay). An artificial CSF with addition of BSA (4mg/mL) is the matrix for calibrators preparation.

Round robin test on quantification of A β ₄₂ in CSF by mass spectrometry

Josef Pannee^{a,*}, Johan Gobom^a, Leslie M. Shaw^b, Magdalena Korecka^b, Erin E. Chambers^c,

Mary Lame^c, Rand Jenkins^d, William Mylott^d, Maria C. Carrillo^e, Ingrid Zegers^f, Henrik Zetterberg^{a,g},

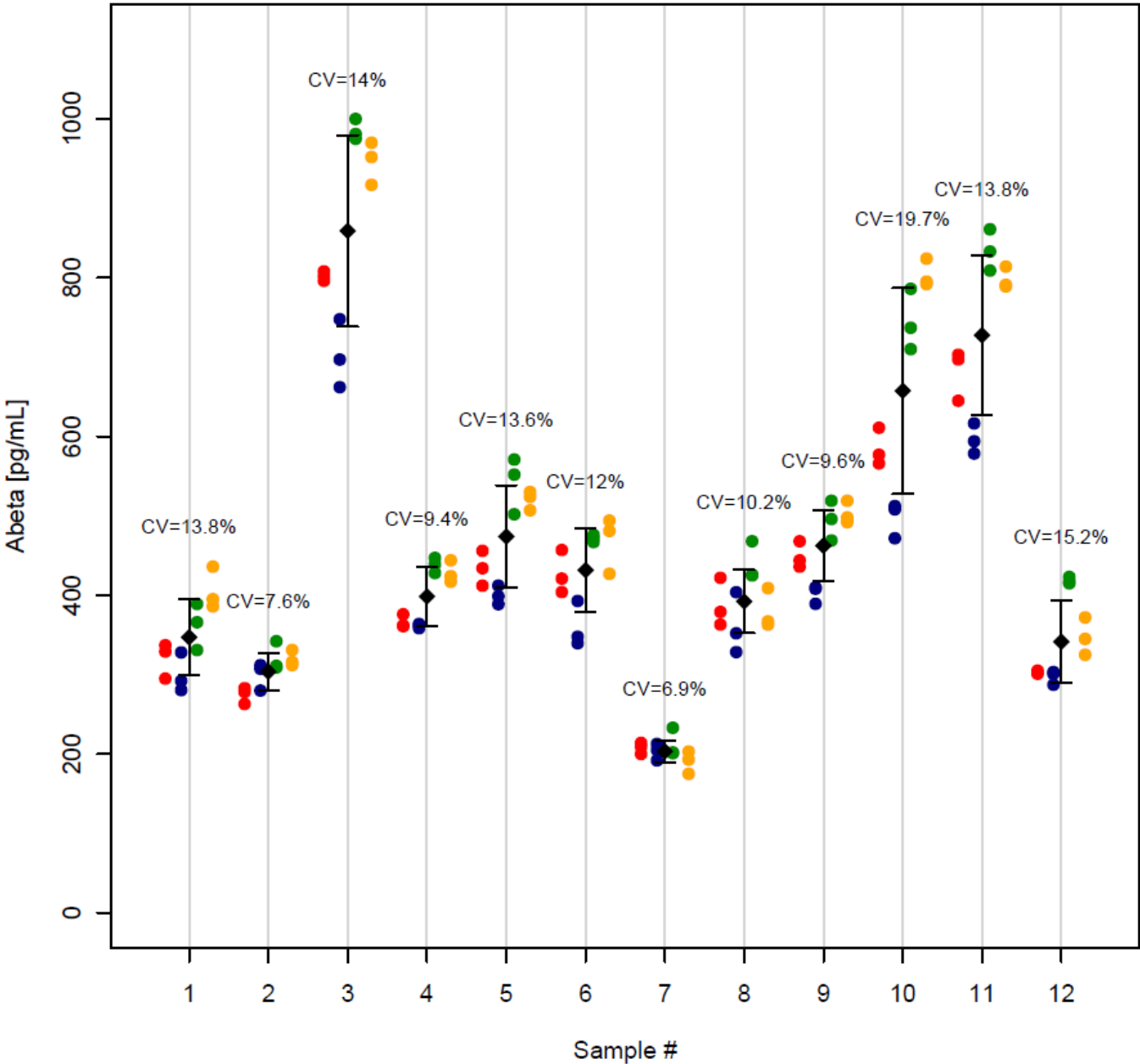
Kaj Blennow^a, Erik Portelius^a; *manuscript submitted for publication*

Table 1. Mass spectrometry methods summary for the 4 centers

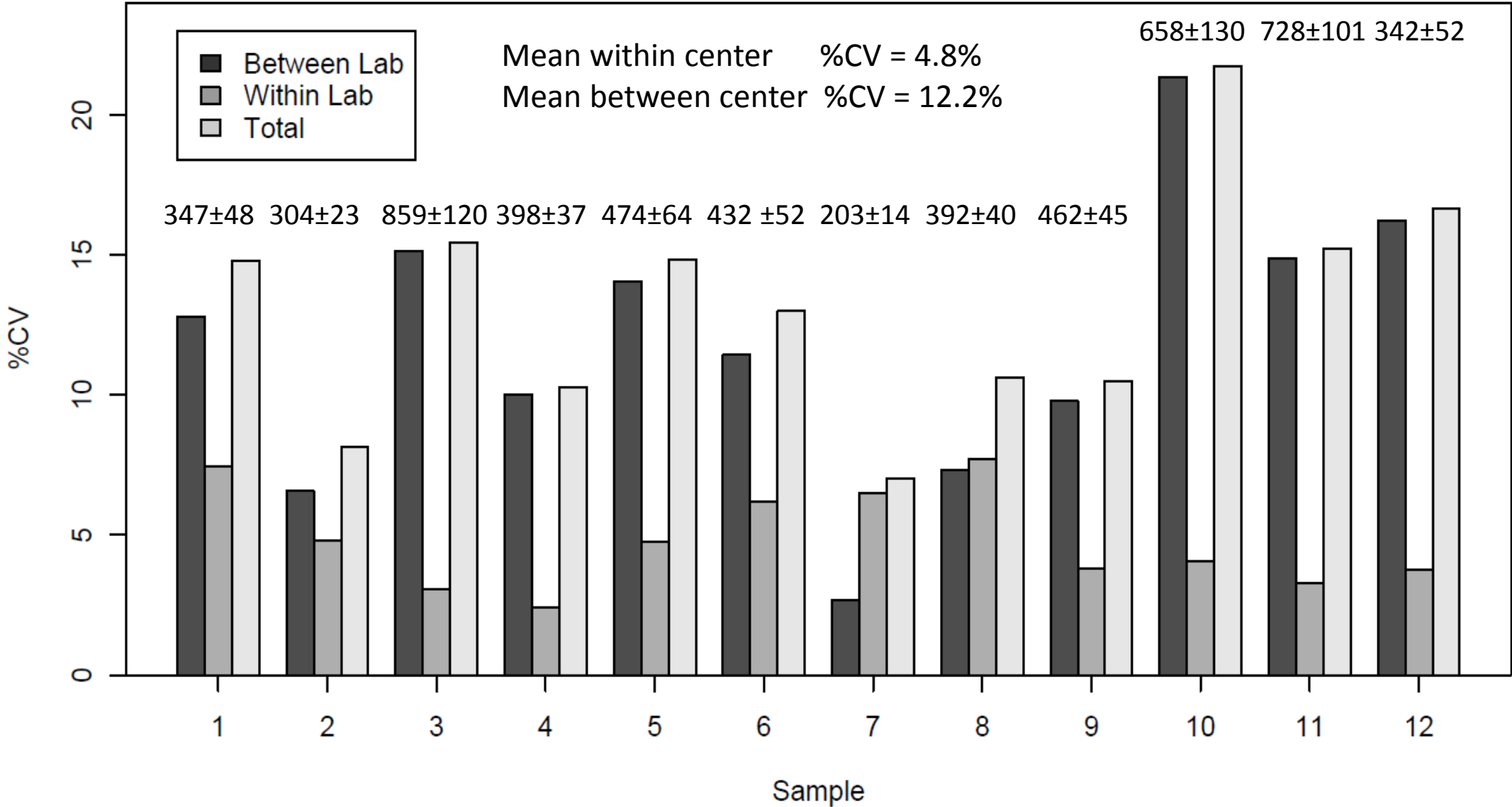
	Waters	PPD	U. Penn.	U. Got.
IS concentration	1 ng/mL	2 ng/mL (spiked from DMSO)	2 ng/mL	1.6 ng/mL
CSF Volume	200 µL	100 µL	250 µL	200 µL
Calibrator matrix	aCSF with 5% rat plasma	aCSF with 4 mg/mL HSA + IgG, glucose	aCSF with 4 mg/mL BSA	Human CSF
LC System	ACQUITY, 1D	ACQUITY; 2D Trapping/Eluting	ACQUITY; 2D Trapping/Eluting	Accela 1250
Dilution (injection)	50 µL + 25 µL H ₂ O (10µL)	50 µL + 50 µL H ₂ O (30 µL)	50 µL + 50 µL H ₂ O (50µL)	No dilution. Dried eluate resuspended in 25 µL, 20 µL injected.
LC mobile phases	A- 0.3% NH ₄ OH B- 90:10 ACN/MP A	A- 0.3% NH ₄ OH B- 90:5:5 ACN/TFE/H ₂ O	A- 0.1% NH ₄ OH B- 75:25:5 ACN/MeOH/TFE	A: 0.1% NH ₄ OH, 5% ACN B: 0.03% NH ₄ OH, 95% ACN
Column	BEH 300 2.1 x 150 mm, 1.7 µm, 50 C	BEH 300 2.1 x 150 mm, 1.7 µm, 50 C	BEH 300 2.1 x 50 mm, 1.7 µm, 60°C	ProSwift RP-4H 1x250 mm
Flow rate	200 µL/min	300 µL/min	200 µL/min	300 µL/min
Mass Spectrometer	Xevo TQ-S	Xevo TQ-S	API 5000	TSQ Vantage
Transitions, m/z	1129.0→1078.5	1129.0→1078.5	1129.0→1078.5	1129.58→1054.03, 1078.79, 1107.06
Run time	8.5 mins	8.5 minutes	12 minutes	14 minutes

Alzheimer's Association Global Biomarker Consortium mrmMSMS

Study data for 12 CSF pools



Pilot investigation of performance of 4 mrm/tandem mass spectrometry methods for measurement of Aβ₁₋₄₂ in human CSF
precision performance for 12 pooled CSF samples



Summary

- Initial pilot study comparing performance across 4 participating laboratories completed
- The 4 participating labs: Waters (Erin Chambers); PPD (Rand Jenkins); UPenn (Les Shaw); UGot (Kaj Blennow)
- N=12 CSF pools (prepared & shipped by UGot to each participant laboratory)
- Use of a common sample preparation methodology
- 3 different mass spectrometer systems and 3 different HPLC systems
- 4 different calibration matrices
- Single-plex, triplex or pentaplex methods utilized
- Different batches of rPeptide $A\beta_{1-42}$ standard utilized
- **Very good agreement across the 4 laboratories is consistent with the ruggedness of the methodologic approach and supports their working together on the IFCC ref method assignment of accurate $A\beta_{1-42}$ concentrations to planned CSF-based standard reference material**
- **The 4 centers have committed to a follow-up interlab study, as part of an IFCC/IRMM guided-study effort, that is planned and there are individual studies completed addressing areas of interest:**
 - Calibrator matrix comparison studies
 - CSF stability
- The mrm/tandem mass spectrometry-based methodology with high conc GuHCl followed by mixed-bed (ion exchange/RP) cartridge sample preparation is a suitable candidate reference method for assigning accurate and precise $A\beta_{1-42}$ values on CSF-based reference material.

Next steps

- Use the IRMM preparation of $A\beta_{1-42}$
 - Pilot: 2 lab (UGot and UPenn) study using 10 CSF pools prepared at UPenn→lab to lab comparison, just completed
 - Preliminary testing of the IRMM dilution protocol
 - conduct the full IRMM – guided “ring” trial
 - Compare across participating centers
 - Use gravimetric protocol for preparation of calibrators and include calibrators prepared by individual lab protocol in the two replicate runs
 - 20 patient CSFs, a set of neat and spiked CSFs
 - Statistical analyses
 - Report results
 - Use these qualified methods for assignment of concentration to the CSF pools for creation of reference materials
- Applications of mass spectrometry-based $A\beta_{1-42}$ analysis:
 - Comparisons to existing and new immunoassays including analytical performance and clinical performance
 - Provides an accuracy-based “anchor” in methods comparisons
 - Studies in various patient populations of $A\beta_{1-42}$, and various metabolites for assessment of age and or disease related changes in metabolism

Applications of mass spectrometry-based $A\beta_{1-42}$ analysis-comparison of clinical performance to an existing immunoassay

41 autopsy-proven AD cases and 41 living age- and gender-matched controls*

M. Korecka et al. / Surrogate Matrix-Based Method for $A\beta_{42}$ by MS

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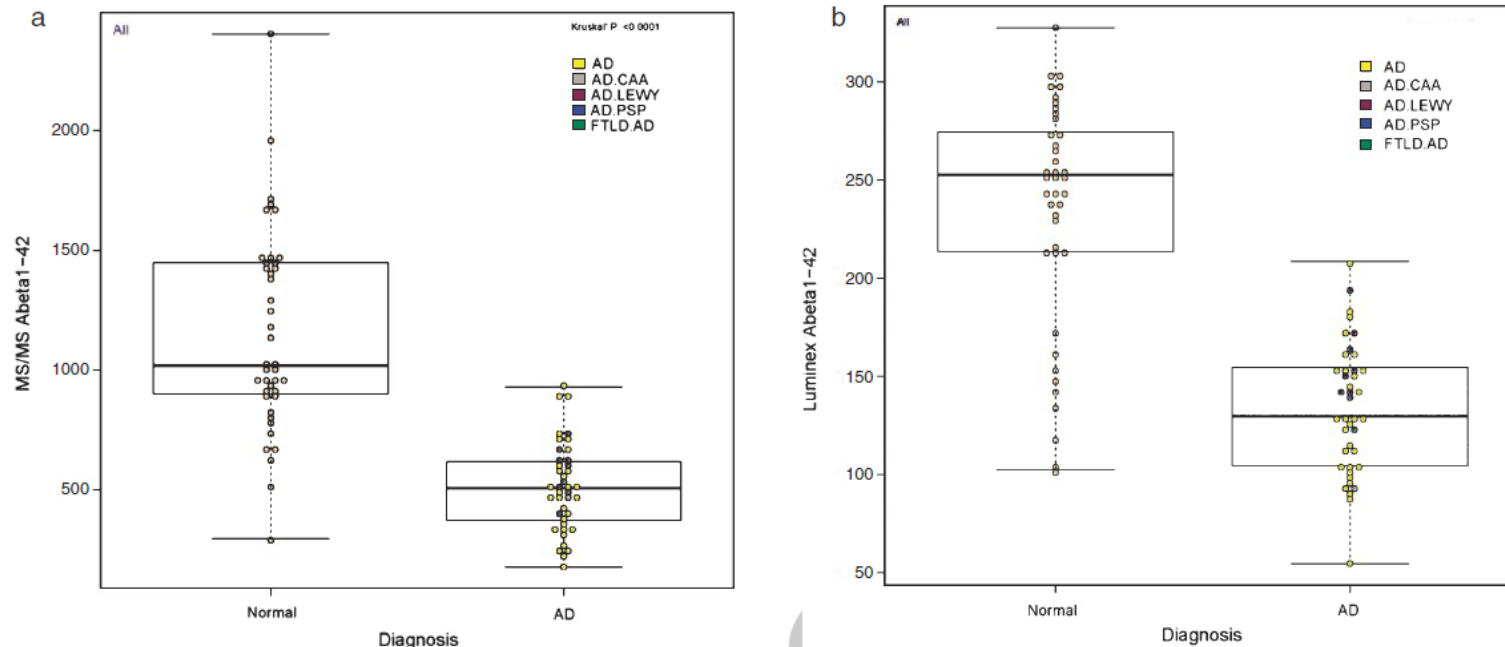


Fig. 3. Distribution of $A\beta_{42}$ results in the group of 41 autopsy proven Alzheimer's disease subjects and 41 age matched control group; A) 2D-UPLC-MS-MS, B) AlzBio3 Luminex.

*same population as described in AoN 2009

Analytical comparison

Clinical utility comparison

ROC analyses

Clinical performance using 41 AD, 41 cog normal controls:

Sensitivity: 92.7%

Specificity: 85.4%

PPV: 86.4%

NPV: 92.1%

Test accuracy: 89%

AUC: 0.94

Clinical performance using the same

41 AD and 41 controls for the AlzBio3

Immunoassay:

2009 AoN

Sensitivity: 100% (96.4%)

Specificity: 78% (76.9%)

PPV: 82% (82%)

NPV: 100% (95.2%)

Test accuracy: 89% (87%)

AUC: 0.90 (0.91)

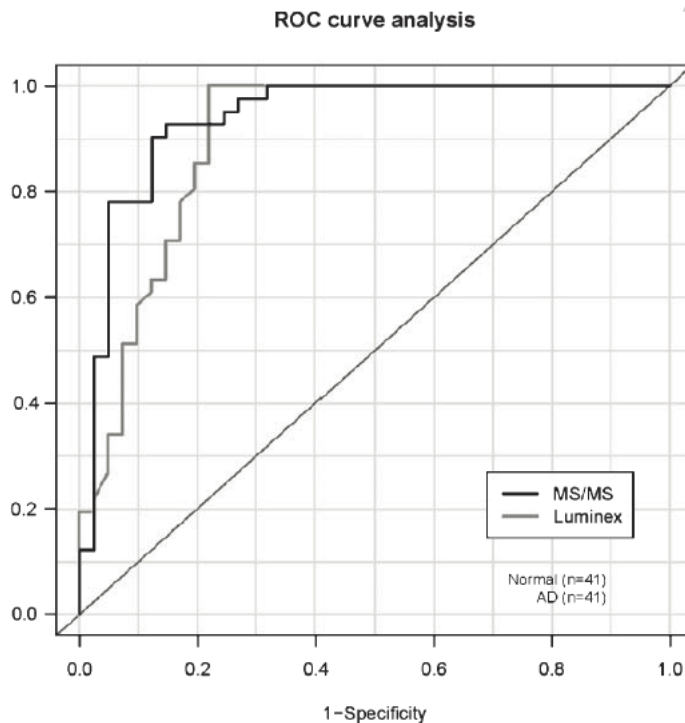
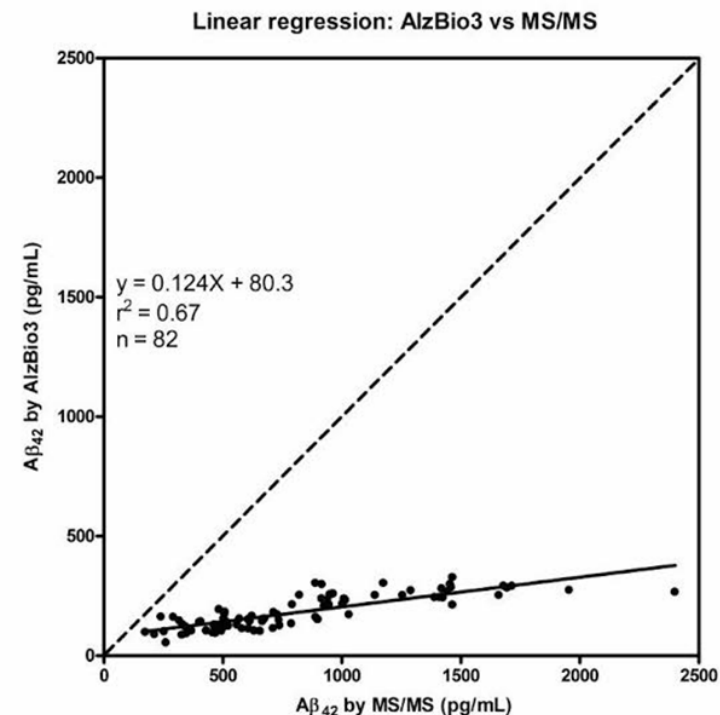


Fig. 4. Comparison of ROC curves for 2D-UPLC-MS-MS and AlzBio3 Luminex. The ROC AUC value for 2D-UPLC-MS-MS was 0.938, and for AlzBio3 Luminex immunoassay the AUC value was 0.900.

Two candidate ref methods (UGot and UPenn)

Journal of Alzheimer's Disease 41 (2014) 441–451
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IOS Press

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Clinical Chemistry 60:7
000–000 (2014)

Proteomics and Protein Markers

Mass Spectrometry–Based Candidate Reference Measurement Procedure for Quantification of Amyloid- β in Cerebrospinal Fluid

Andreas Leinenbach,^{1†} Josef Pannee,^{2†} Thomas Dülffer,¹ Andreas Huber,¹ Tobias Bittner,¹ Ulf Andreasson,² Johan Gobom,² Henrik Zetterberg,^{2,3} Uwe Kobold,¹ Erik Portelius,² and Kaj Blennow^{2*} on behalf of the IFCC Scientific Division Working Group on CSF proteins

Qualification of a Surrogate Matrix-Based Absolute Quantification Method for Amyloid- β_{42} in Human Cerebrospinal Fluid Using 2D UPLC-Tandem Mass Spectrometry

Magdalena Korecka^a, Teresa Waligorska^a, Michal Figurski^a, Jon B. Toledo^{a,d}, Steven E. Arnold^{b,c}, Murray Grossman^c, John Q. Trojanowski^{a,d} and Leslie M. Shaw^{a,d,*}

- Two candidate ref methods
- 10 CSF pools provided by UPENN
- 3 replicate runs
- Used A β_{1-42} prep provided by IRMM for the Ring trial & each lab used their calibration dilution protocol.

