

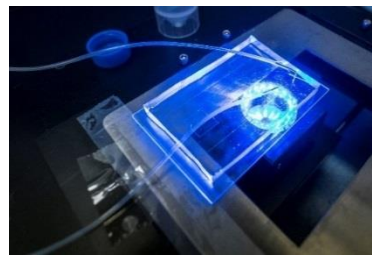
## BIOMOLECULAR MEASUREMENT DIVISION

# Providing Traceability for Protein Biomarkers

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# Protein Metrology at NIST

## Precision Medicine

### Protein quantitation

- Spectrophotometric
- Mass spectrometry (AAA, MRM)

### Protein characterization

- 3-D structure
- Post-translational modifications

Assay standardization/harmonization

Reference methods and reference materials

## Biomanufacturing

### Protein quantitation

- Spectrophotometric
- Mass spectrometry (future)

### Protein characterization

- 3-D structure
- Post-translational modifications

New technologies

Reference materials and protocols



<https://www.nist.gov/mml/biomolecular-measurement/bioanalytical-science-group>

# Current Protein Biomarkers of Interest

## Cardiovascular disease

- Cardiac troponin I (cTnI)
- Brain natriuretic peptide (BNP)
- C-reactive protein (CRP)



## Kidney disease

- Urine albumin

## Bone health/nutrition

- Vitamin D binding protein
- Parathyroid hormone (PTH)

## Forensics

- Insulin-like growth factor I (IGF-1)

In development:

SRM 2925 Human Serum Albumin Solution

SRM 2926 Human Insulin-Like Growth Factor 1

SRM 2927 <sup>15</sup>N-Labeled Recombinant Human Insulin-like Growth Factor 1

**NEW!**



# Approaches to Quantitation

Labeled peptide

QconCAT\*

Protein

Chemical synthesis with high purity

More closely resembles protein(s) of interest

Unlabeled or labeled forms can be used

Doesn't account for variability in sample prep

May not completely account for variability in sample prep

Closest to ideal internal standard

Synthesis of multiple peptides can be expensive

Useful for multiplex capabilities

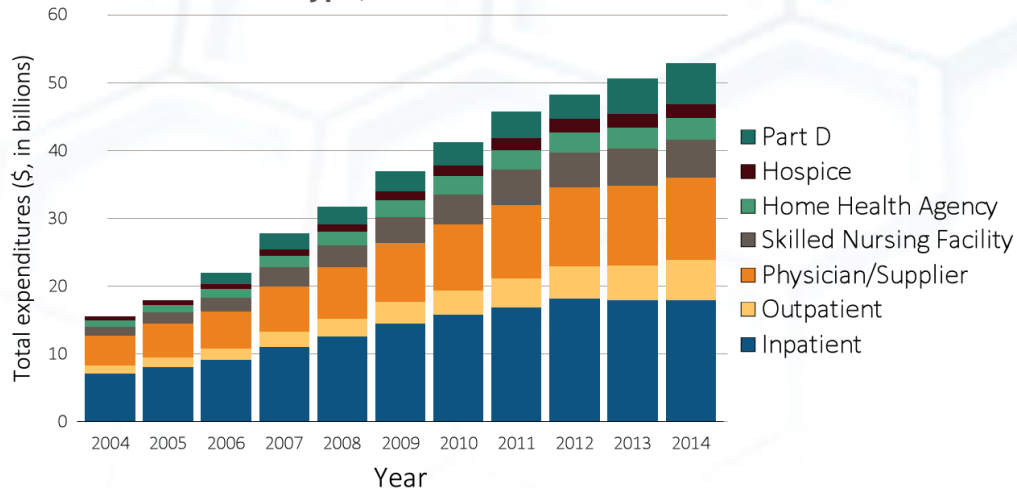
May be difficult to obtain

\* Artificial protein produced in cells, contains multiple linked peptides

Scott et al., Anal. Chem., 87 (2015) 4429-35

# An Example: Urine Albumin

Trends in total Medicare Parts A, B, and D fee-for-service spending for CKD patients aged 65 and older, by claim type, 2004-2014



## Current challenges of affinity-based methodologies:

- Potential heterogeneity of albumin
- Assay specificity
- Biological variability of urine
- Assay bias varies with concentration

## The problem:

- Chronic kidney disease is a growing problem in the U.S.
- Large financial and quality of life impacts
- Urine albumin is an indicator of kidney dysfunction
- May give earlier indication of disease, useful for staging
- Existing reference ranges

Clinical Chemistry 55:1  
24-38 (2009)

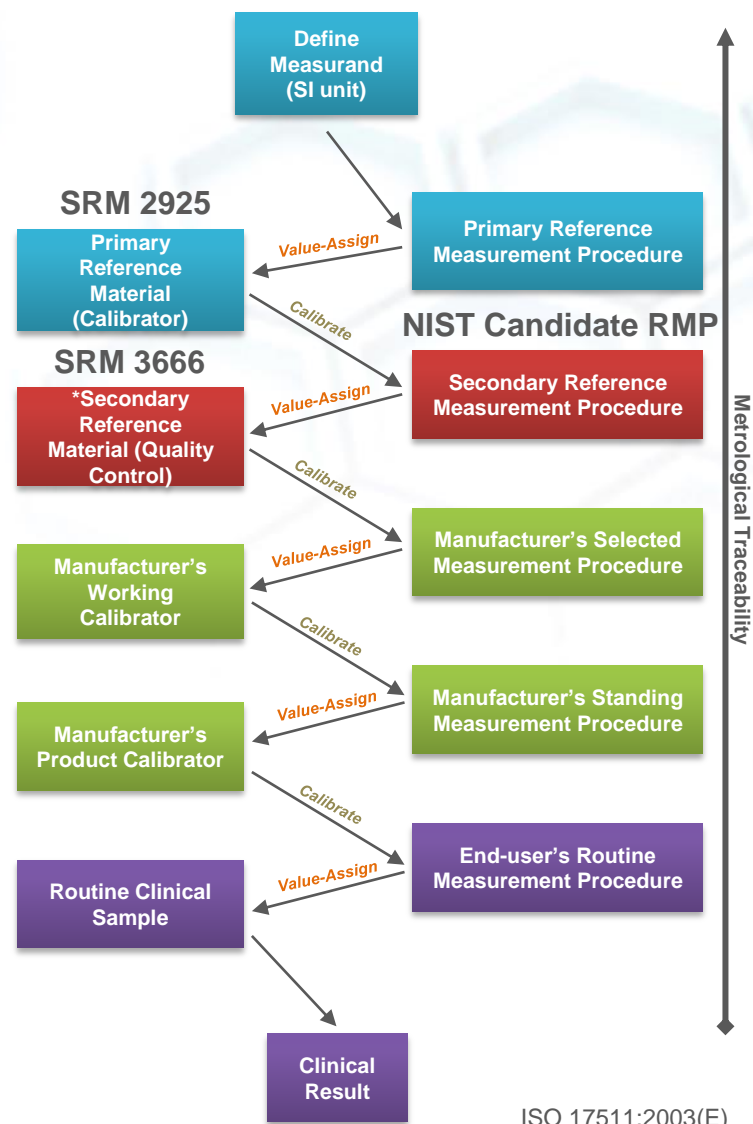
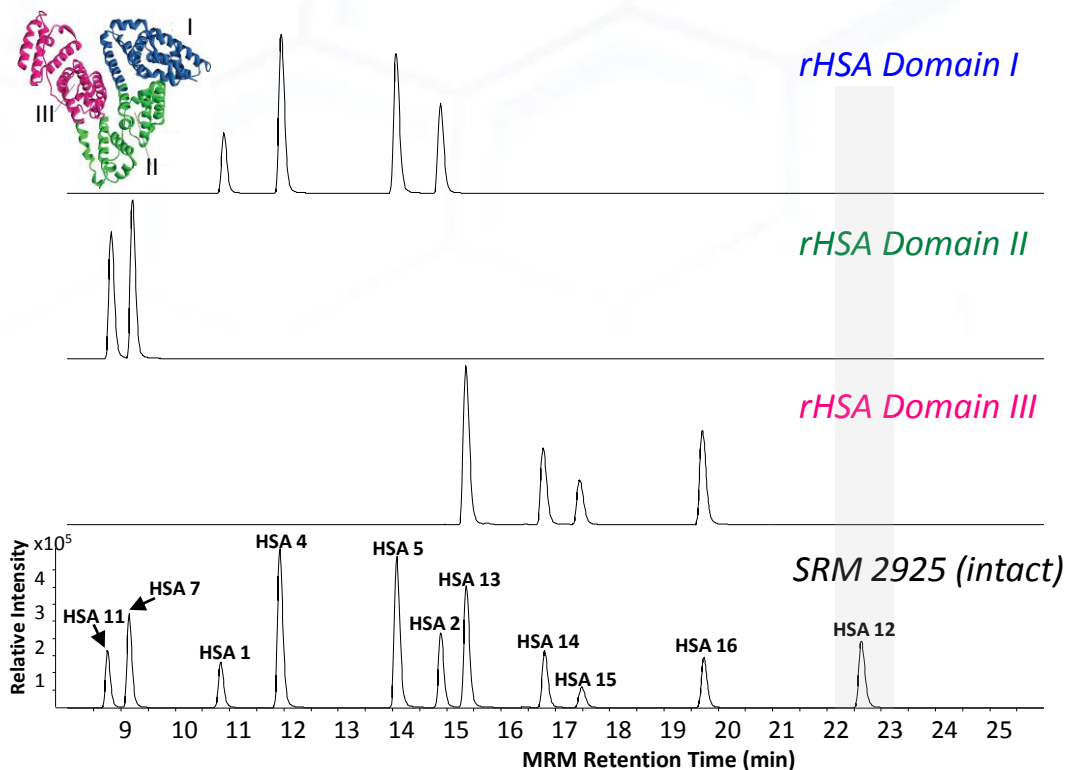
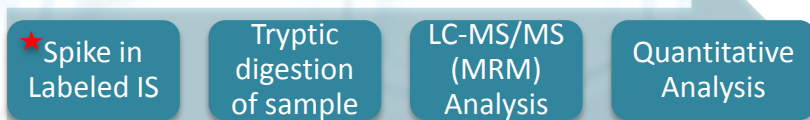
Reviews

### Current Issues in Measurement and Reporting of Urinary Albumin Excretion

W. Greg Miller,<sup>1\*</sup> David E. Bruns,<sup>2</sup> Glen L. Hortin,<sup>3</sup> Sverre Sandberg,<sup>4</sup> Kristin M. Aakre,<sup>4</sup> Matthew J. McQueen,<sup>5</sup> Yoshihisa Itoh,<sup>6</sup> John C. Lieske,<sup>7</sup> David W. Secombe,<sup>8</sup> Graham Jones,<sup>9</sup> David M. Bunk,<sup>10</sup> Gary C. Curhan,<sup>11</sup> and Andrew S. Narva,<sup>12</sup> on behalf of the National Kidney Disease Education Program-IFCC Working Group on Standardization of Albumin in Urine



# Reference Measurement System

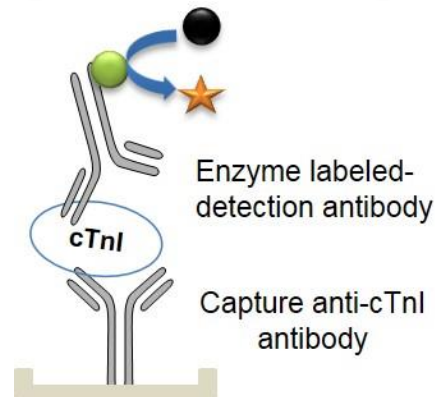
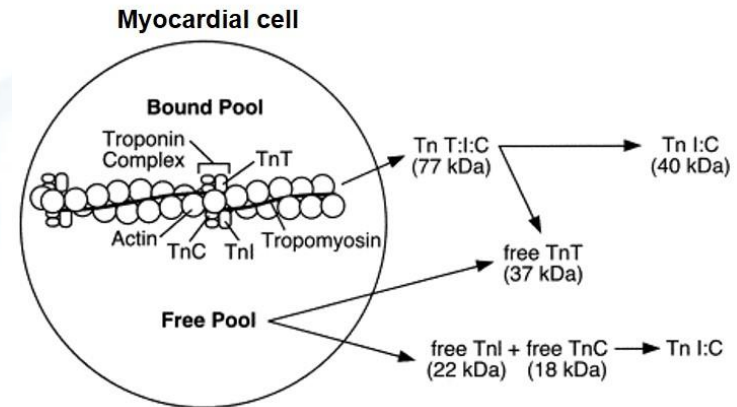


ISO 17511:2003(E)

A.B. Green et al., J. Proteome Res., 13 (2014) 3930-3939

# Exploratory: Cardiac Troponin I

- Cardiac troponin I and T (cTnI, cTnT) are the preferred biomarkers of acute coronary syndromes
- Large number of commercial assays, target different epitopes of cTnI
- Circulating cTnI is heterogeneous, undergoes modifications and degradation
- NIST introduced SRM 2921 Human Cardiac Troponin Complex in 2004
- SRM is not commutable with a number of immunoassays, matrix-based material might be preferable
- SRM 2921 may be suitable as a calibrator for a higher-order method



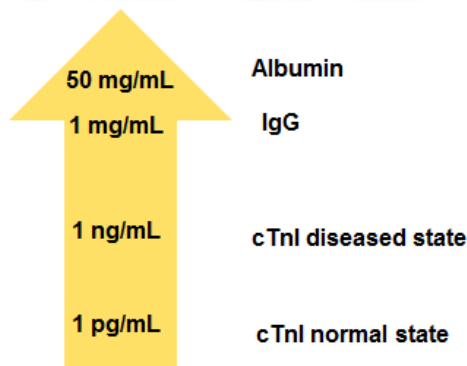
**SRM 2921**

Freda, B.J.; et al. Journal of the American College of Cardiology, 40, 2065-2071 (2002)

# Quantification of cTnI

## Technical challenges

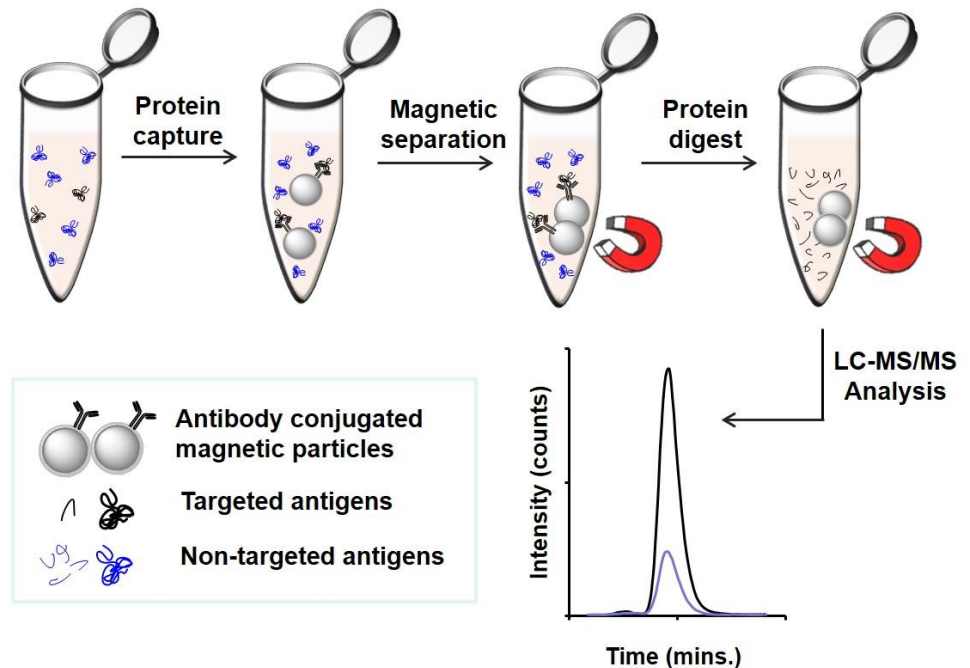
- cTnI is a low abundance protein in serum
  - Serum cTnI levels around 1-10 ng/mL after myocardial infarction
  - Near 1 pg/mL in healthy individuals
- Large dynamic range of protein concentrations in serum



*cTnI in human serum is undetectable by direct LC-MS/MS-based approaches*

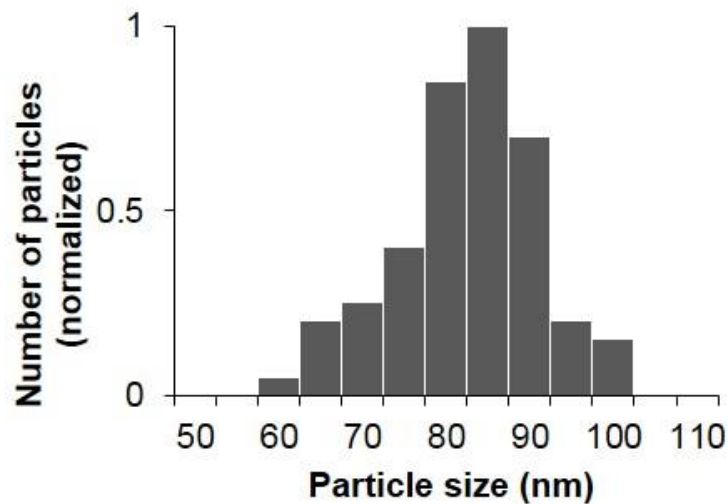
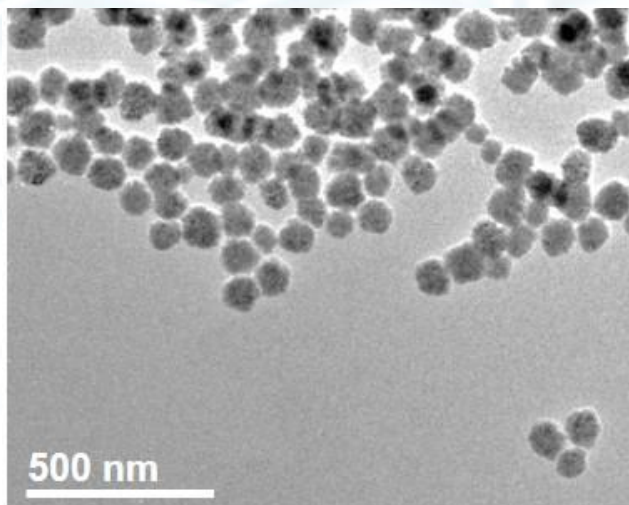
## Approach

- Use magnetic nanoparticle-based immunoaffinity enrichment prior to LC-MS/MS analysis
- Reduce sample complexity
- Increase analyte: background ratio

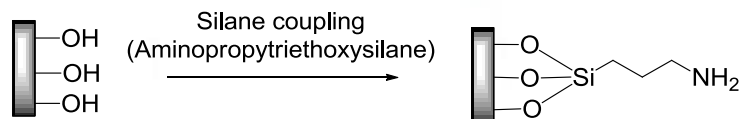




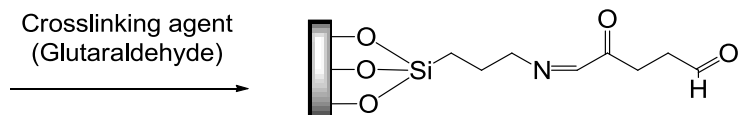
# Synthesis of Modified Nanoparticles



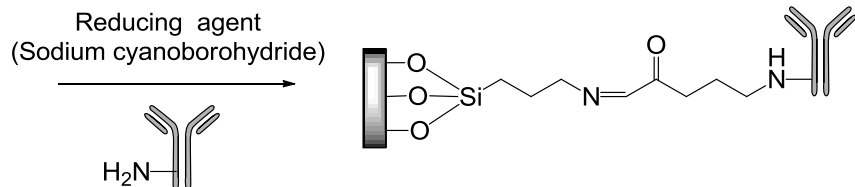
Modify nanoparticle  
with silane agents



Add activation or  
crosslinking agent

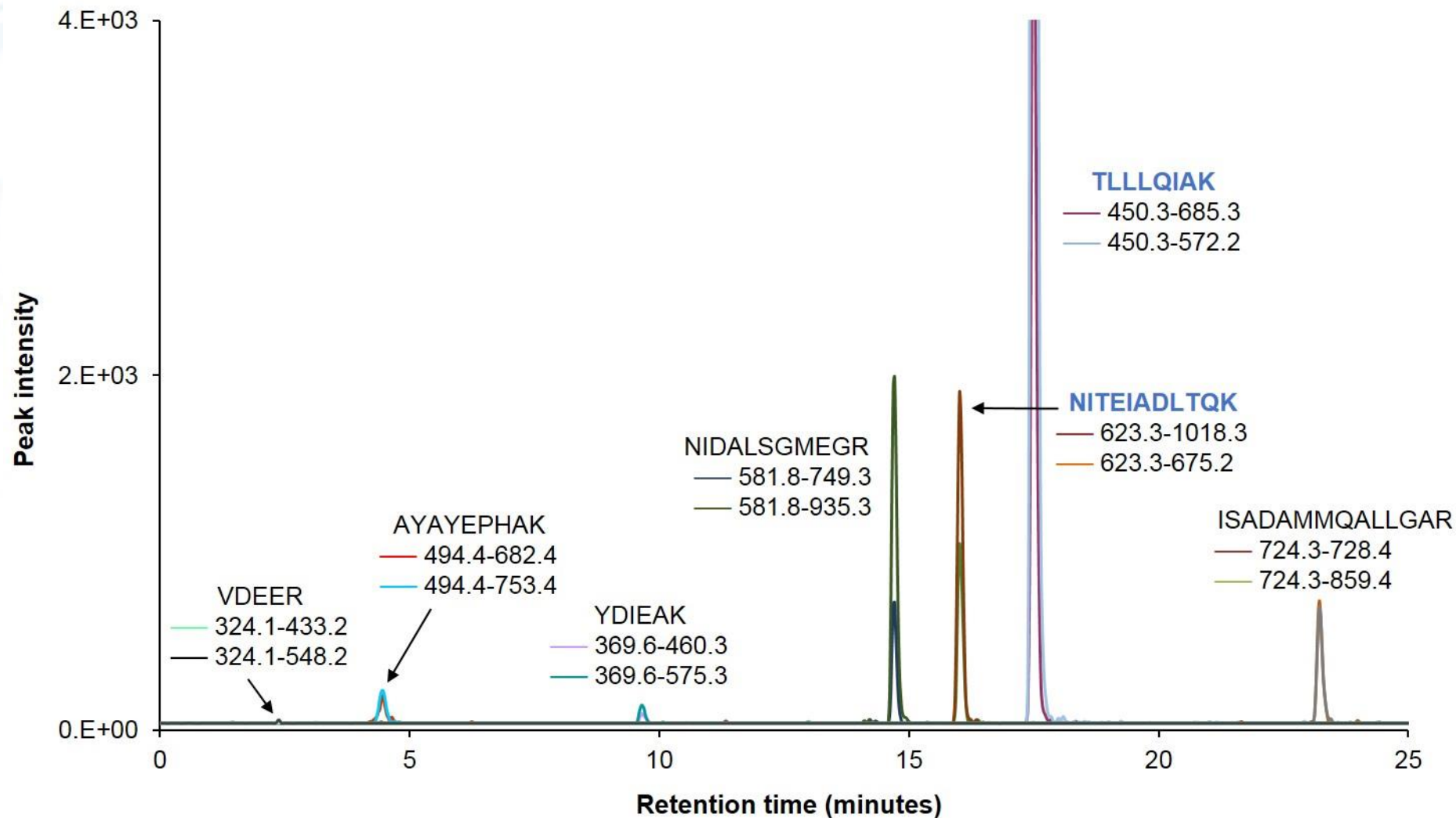


Immobilize antibody onto  
modified nanoparticle



Example of  
nanoparticle  
functionalization  
and antibody  
coupling scheme:

# Development of LC-MS/MS Method



Very few peptides with adequate signal, without potential modifications

# Quantification Approach

## Amino acid sequence of human cTnI

ADGSSDAAREPRPAPAPIRRRSS  
 NYR**AYATEPHAK**KKSKISASRKLQ  
 LK**TLLQIAK**QELEREAEERRGEK  
 GRALSTRQCPLLAGLGFAELQDL  
 CRQLHARVDKVDEERYDIEAKVTK  
**NITEIADLTQK**IFDLRGKFKRPTLR  
 RVRISADAMMQALLGARAKESLDL  
 RAHLKQVKKEDTEKENREVGDW  
 KNIDALSGMEGRKKKFES

## cTnI MRM transitions

### K.TLLQIAK.Q

450.3++	685.4+ (y6)
	572.4+ (y5)

### K.NITEIADLTQK.I

623.3++	1018.3+ (y9)
	675.2+ (y6)

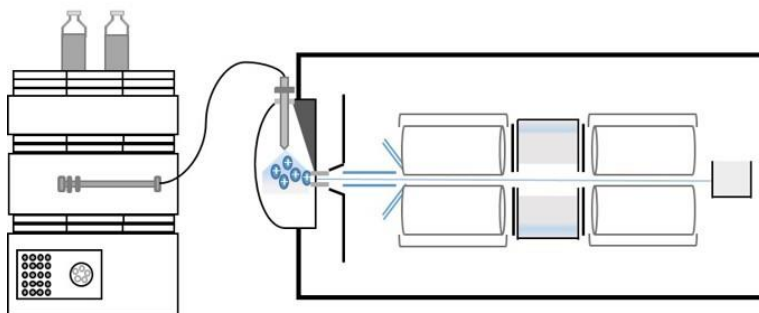
### R.AYATEPHAK.K

494.4++	753.4+ (y7)
	682.4+ (y6)

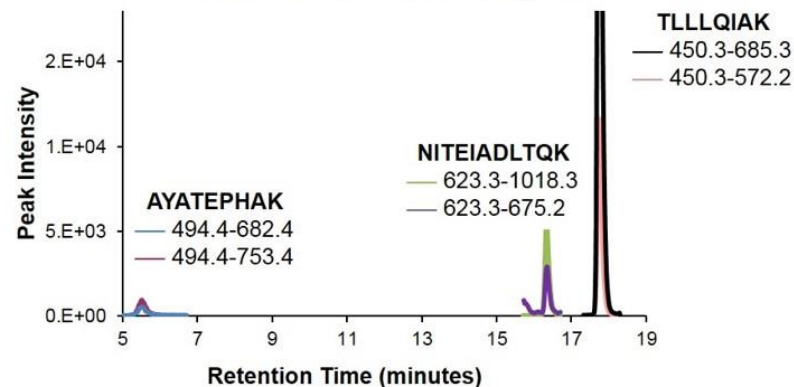
## Enzymatic digestion (e.g. trypsin)



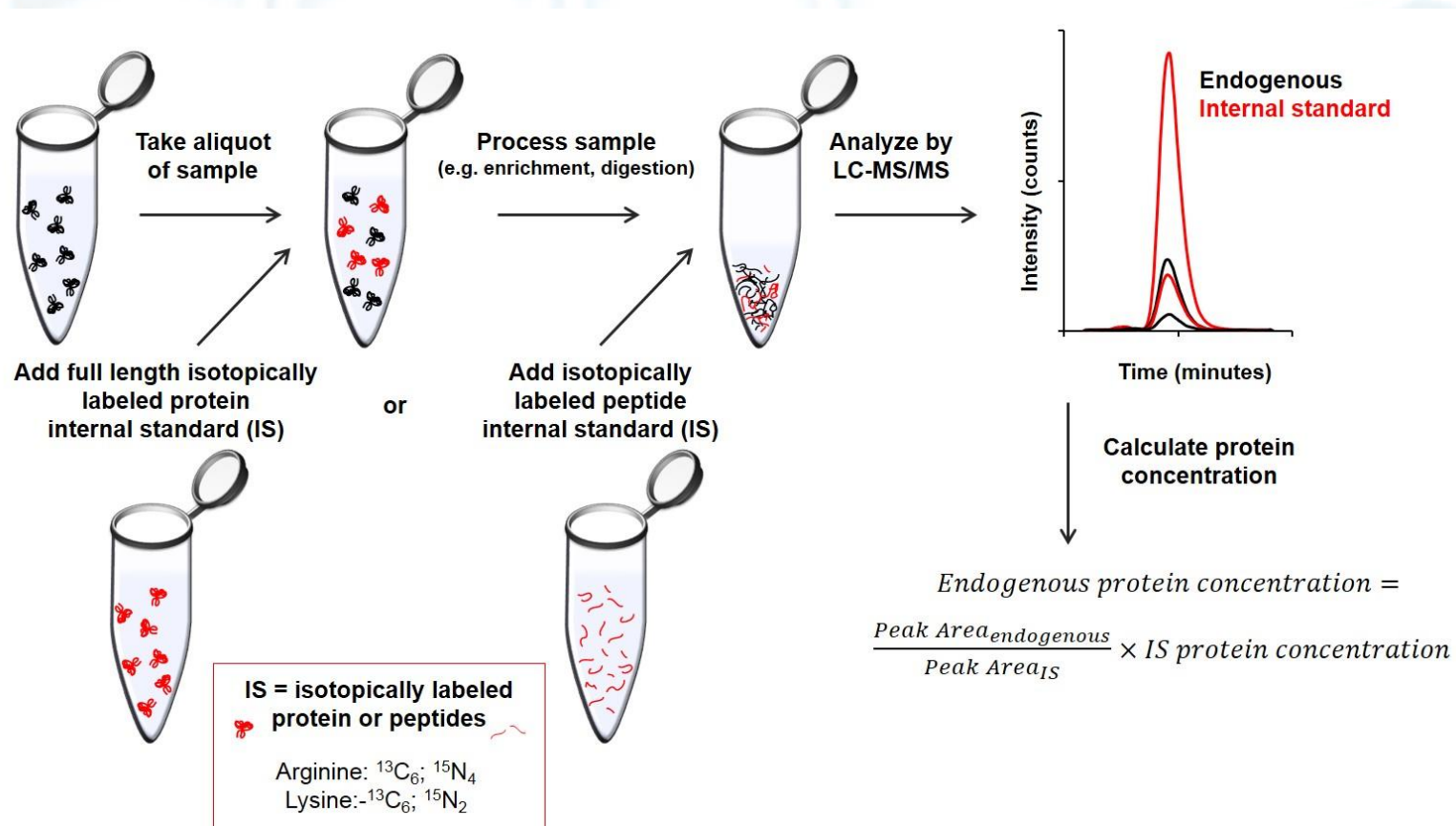
## LC-MS/MS with MRM analysis



## Extracted ion chromatogram



# Sample Preparation



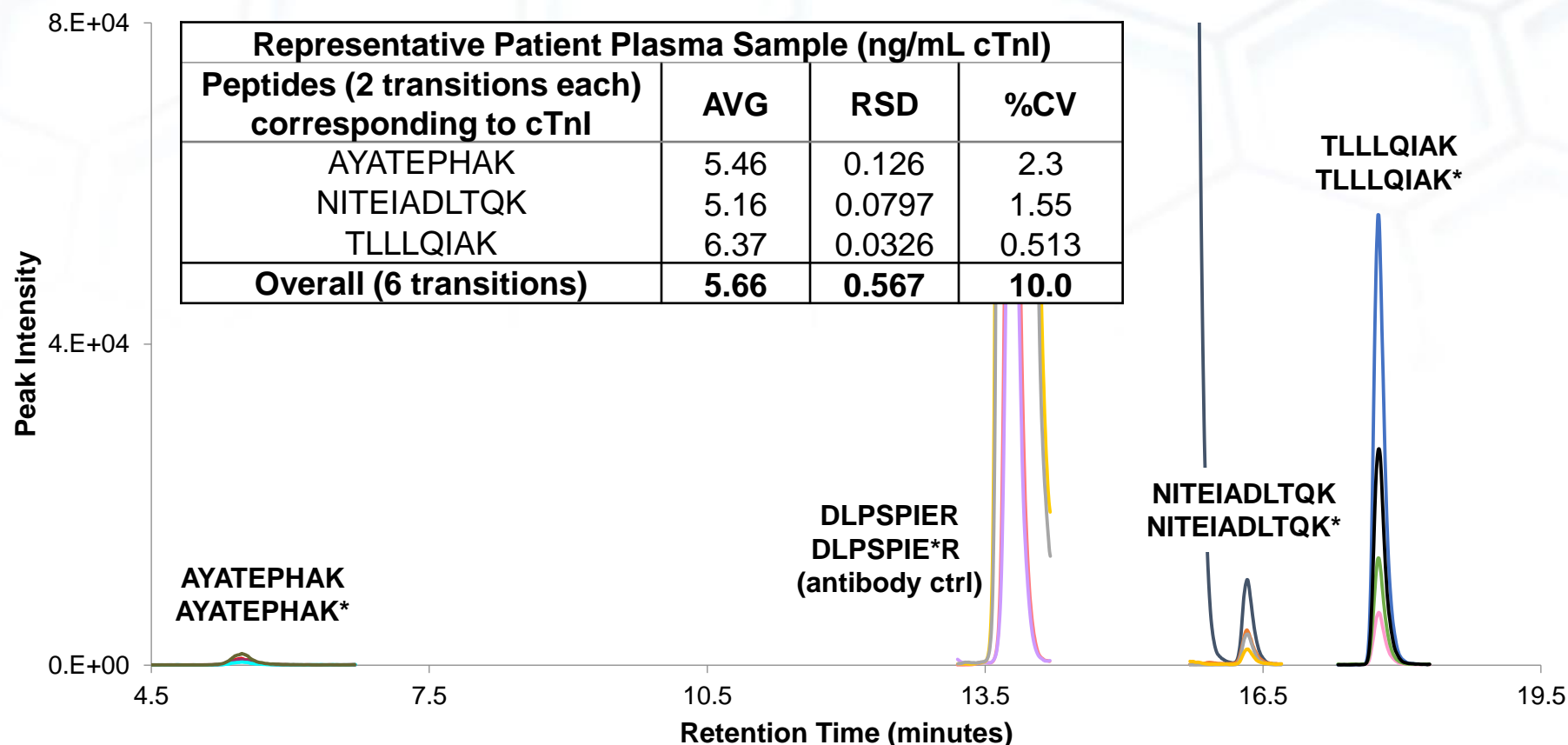
Full-length labeled protein used for quantification  
Labeled peptides used for recovery studies

Calibrants prepared by spiking cTnI-free plasma with  
SRM 2921 Human Cardiac Troponin Complex

# cTnI Quantification in Patient Plasma Samples

## Achievements

- Using magnetic nanoparticle enrichment and isotope dilution-LC-MS/MS (with an isotopically labeled protein internal standard), cTnI was measured in five myocardial infarction patients with concentrations between 4-11 ng/mL and CV's  $\leq 15\%$  using 3 peptides for quantification





# Ongoing Challenges for Protein Biomarkers

(from a mass spectrometry perspective)

- Appropriate primary standards/calibration materials
- Producing CRMs for both immunoassays and clinical mass spec
- Sources of isotopically labeled protein internal standards
- Instrument limitations (sensitivity)

*Anal. Chem.* 2009, 81, 8610–8616

## Reference Measurement Procedure Development for C-Reactive Protein in Human Serum

Eric L. Kilpatrick<sup>\*,†</sup> and David M. Bunk<sup>‡</sup>

*National Institute of Standards and Technology, Chemical Sciences Technology Laboratory, Analytical Chemistry Division, 331 Fort Johnson Road, Charleston, South Carolina 29412, and National Institute of Standards and Technology, Chemical Sciences Technology Laboratory, Analytical Chemistry Division, 100 Bureau Drive, Gaithersburg, Maryland 20899*



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Nicole Schneck

Andy Hoofnagle, University of Washington

Sang Bok Lee, University of Maryland



## Free resources:

### *NIST Mass and Fragment Calculator Software*

Calculates mass of input peptide or program and ions for various charge states

<https://www.nist.gov/services-resources/software/nist-mass-and-fragment-calculator-software>

Isotope and mass calculators

### *Isotope Enrichment Calculator*

Determines the percentage of  $^{15}\text{N}$  enrichment of stable isotope-labeled peptides or proteins

<https://www.nist.gov/services-resources/software/isotope-enrichment-calculator>