

Incomplete hydrolysis of midazolam-glucuronide can cause false negatives on urine drug confirmation by liquid chromatography tandem mass spectrometry

Christina Pierre¹, Catherine Gineste², Maggie Edwards², Amanda Reeves³, Bruce Goldberger³, Lindsay Bazydlo¹ 1. University of Virginia Department of Pathology, 2. University of Virginia Medical Laboratories, 3. University of Florida Health Pathology Laboratories

Introduction

Many controlled drugs, including benzodiazepines, undergo conjugation with glucuronic acid during their metabolism to increases their solubility for renal excretion¹. Current urine drug testing algorithms utilize immunoassay screens with reflex confirmation by liquid chromatography tandem mass spectrometry (LC-MS/MS) for positive or indeterminate results, due to the positive rates of drug screening false high immunoassays². LC-MS/MS is the gold standard for urine drug testing due to the high sensitivity and specificity of this method³. Prior to LC-MS/MS analysis, urine samples are hydrolyzed by β-glucuronidase enzymes to remove glucuronide groups⁴. Removal of the glucuronide group increases the sensitivity of the assay, since both parent drug and metabolites can be detected in urine for some drugs and glucuronide metabolites are often unstable in LC-MS/MS assays⁴.

Midazolam is a benzodiazepine that is widely used as a sedative, sleep aid and in clinical anesthesia. Both midazolam and its major metabolite α -hydroxymidazolam undergo conjugation with glucuronic acid prior to renal excretion. During the validation of an in-house labdeveloped LC-MS/MS assay for benzodiazepines confirmation, we observed poor agreement between midazolam measurements in our method comparison inefficient We hypothesized that studies. glucuronidase-mediated hydrolysis may account for differences in midazolam measurements the observed between laboratories.

Methods

Benzodiazepine confirmation LC-MS/MS assay method comparisons were performed on 20 midazolam positive urine samples collected at University of Virginia Hospital. Sample aliquots were measured in-house and sent to a commercial reference laboratory (Lab 1) and a university hospital clinical laboratory (Lab 2) for analysis. Both midazolam and α -hydroxymidazolam were measured inhouse and at the commercial reference laboratory, while the university hospital laboratory only measured midazolam. For quantitative analyses, only samples with concentrations above the lower limit of quantitation were included (11 samples total).

In-house LC/MS/MS measurements were performed on a Waters Acquity I Class Liquid Chromatography module and a Waters Micro TQS API (Atmospheric Pressure Ionization) mass spectrometer. LC was performed on a UPLC C18 column using an acidified acetonitrile gradient at a flow rate of 0.3 mL/min. D4-Midazolam was utilized as an internal standard for all measurements. Multiple reaction monitoring (MRM) scans in positive ion mode of the molecular ion and at least two of the most predominant fragments for each analyte were utilized. Selected MRM transitions for each analyte are listed in Table 1. A standard curve was prepared using midazolam and α -hydroxymidazolam standards to enable quantification (25-2500 ng/mL). Midazolamglucuronide and α -hydroxymidazolam-glucuronide were measured in unhydrolyzed samples based on their relative response.

midazolar α-hydroxy midazolar α-hydroxy

The efficiencies of 3 different commercially-available β glucuronidase enzymes for midazolam-glucuronide and α-hydroxymidazolam-glucuronide hydrolysis was assessed (Table 2.). Five midazolam positive urines were pooled and incubated for either 15, 30 or 60 minutes with enzymes prepared according to manufacturer recommendations prior to LC-MS/MS measurement.

Suppl Sigma Ale Kura Biot Kura Biot

> Large variations in quantitative midazolam measurements between labs

Diff -100

Figure 1- Difference plot showing significant negative biases in midazolam measurements by LC-MS/MS by 2 different labs relative to UVA

Differences in qualitative interpretation of midazolam positivity between labs

	Midazolam Test Result		α-hydroxymidazolam Test Result		Interpretation
Lab	+	-	+	-	Agreement
UVA	19	1	20	0	N/A
Lab 1	14	6	20	0	100%
Lab 2	11	9	N/A	N/A	60%

Table 3- Lab 2 incorrectly identified 9 samples as negative for midazolam, while UVA and Lab 1 correctly identified all samples as positive for midazolam either based on the presence of α hydroxymidazolam only or both α -hydroxymidazolam and midazolam. The cutoff for a positive result at UVA, Lab 1 and Lab 2 were 25, 20 and 25 ng/mL respectively.

Table 1- LC-MS/MS MRM transitions					
Analvte	Parent Ion	Qı			

Analyte	Parent Ion (m/z)	Qualifier Transitions (m/z)
n	326.0	291.1, 209.1,222.1
/midazolam	342.1	203.1, 168.1, 176.0
m glucuronide	502	291, 326
/midazolam glucuronide	518	168, 203.1, 342.1

Table 2- β-glucuronidase enzymes used for midazolamglucuronide and α -hydroxymidazolam-glucuronide hydrolysis

lier	Enzyme
drich	β-glucuronidase from <i>E. coli</i>
tech	BG100 H. rufescens β-Glucuronidase
tech	BGTurbo high-efficiency recombinant β-glucuronidase

Results

Section 1: The Problem



Average [Midazolam] ng/mL



agreed more closely and samples with higher proportions differed more significantly between labs. (% of Midazolam Glucuronide- Low: 5-19%, n=8; Intermediate= 23-42%, n= 8, High= 74-100%, n=6)

midazolam

- marker for midazolam detection



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- Morris AA, Chester SA, Strickland EC, McIntire GL. Rapid Enzymatic Hydrolysis Using a Novel Recombinant β -Glucuronidase in Benzodiazepine Urinalysis. J Anal Toxicol. 2014 Oct;38(8):610-4



concentrations of midazolam.

α-OH-midazolam 30%

