Quality Assurance for Tandem Mass Spectrometry (MS/MS) Assays in Newborn Screening

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National Conversation: Tandem Mass Spectrometry in Newborn Screening

February 5 - 6,2015



MS/MSin Neonatal Screening

Today

- All USIabs use MS/MS
- Widespread adoption worldwide
- QA materials available from CDC
- Several manufacturers provide kits
- Second-tier tests to improve specificity
 - CAH, MSUD, others
- Additional compounds/disorders have been incorporated
 - SUAC, LSDs





MS/MS Use in Neonatal Screening System Activities Worldwide

North America

- 100% US labs
- Canada, Mexico

Central America

Costa Rica

South America

Argentina, Brazil, Chile, Colombia, Uruguay

Europe

Germany, Italy, Netherlands,
 Spain, United Kingdom

Middle East

Israel, Lebanon, Qatar, Saudi Arabia

□ Asia-Pacific

Australia, China, Japan,
 Philippines, South Korea,
 Taiwan, Thailand

Laboratory Considerations when Implementing MS/MSTesting

Maintenance

PMs; daily checks

Reagents

• 3N HCl (DER); hydrazine



 Corrosion-resistant dryers; Fume hoods; vacuum exhaust

Training

Hands-on; best practices guidelines





□ EQAS: CDC





CDC'S QUALITY ASSURANCE ACTIVITIES FOR MS/MS

Services Provided by CDC's Newborn Screening Quality Assurance Program (NSQAP)

The only comprehensive quality assurance program using dried blood spots

- Proficiency testing
- Quality control materials
- Reference materials

- Training and consultation
- NBS translation research
- Filter paper evaluations



Preparation of whole blood pools



Certification of Blood Spots



Packaging and Shipment to Participating Labs



Filter paper evaluations

National Impact of CDC's Newborn Screening Quality Assurance Program (NSQAP)

- ☐ Sole provider of comprehensive quality assurance services for screening labs
 - Essential for evaluation of method performance
- Over 850,000 dried-blood spots (DBS) produced each year
 - 3 challenges of 5 blind-coded samples/year
 - UDOT
 - Proactive follow-up of false negative results
- □ 100% of US states covered by program
 - Allows for accreditation of screening labs
 - Provide summary reports and feedback for all participating labs



Program Timeline – MS/MS Analytes

2001	2002	2003	2007	2008	2009	2010	2011	2012	2013
Phe	Cit	C5	C 0	C3DC	C5OH	Arg	C18:1	Ala	C18OH
Leu	C 6	C5DC	C2	SUAC	C18	C4OH		C10:2	
Met	C10		C10:1			C5:1			
Tyr			C14:1			C12			
Val						C16OH			

C3

C4

C8

C14

C16

100% Coverage of RUSP MS/MS Primary Biomarkers Achieved in 2012

MS/MS-Detectable Markers in CDC QA Materials

- Alanine
- □ Citrulline
- Phenylalanine
- Leucine
- Valine
- Methionine
- Arginine
- Tyrosine
- □ Succinylacetone (SUAC)
- □ Free carnitine (C0)
- Acetylcarnitine (C2)
- □ Propionylcarnitine (C3)
- Malonylcarnitine (C3DC)
- □ Isobutyrylcarnitine (C4)
- □ Hydroxyisobutyrylcarnitine (C4OH)
- □ Isovalerylcarnitine (C5)
- □ Glutarylcarnitine (C5DC)
- □ Tiglylcarnitine (C5:1)
- □ Hydroxyisovalerylcarnitine (C5OH)

- □ Hexanoylcarnitine (C6)
- Octanoylcarnitine (C8)
- □ Decanoylcarnitine (C10)
- □ Decenoylcarnitine (C10:1)
- □ Decadienoylcarnitine (C10:2)
- Dodecanoylcarnitine (C12)
- Myristoylcarnitine (C14)
- □ Tetradecenoylcarnitine (C14:1)
- □ Hydroxypalmitoylcarnitine (C16OH)
- □ Palmitoylcarnitine (C16)
- □ Stearoylcarnitine (C18)
- □ Oleoylcarnitine (C18:1)
- □ Hydroxystearoylcarnitine (C18OH)
- 17-OHP/Androstenedione/cortisol/11deoxy/21-deoxy (2nd tier CAH)
- □ Isoleucine/allo-isoleucine (2nd tier)
- □ 24:0 LPC, 26:0-LPC
- □ MMA, EMA, MCA, HCY (2nd tier)
- Orotic acid

NBSMS/MSMethods/Kits

- Derivatized
 - Perkin Emer Neo Gram
 - Chromsystems MassChrom
 - Laboratory-developed tests

- Non-derivatized
 - Perkin Emer NeoBase
 - Chromsystems MassChrom
 - Siemens MS-Neo
 - Laboratory-developed tests

The choice is yours!*

*Maybe

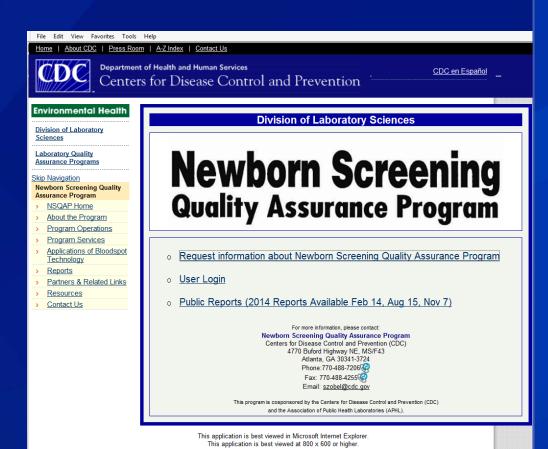
QCDBSMaterials

- QC data 2x per year
- 4 concentration levels
 - Certification: 20 runs in duplicate
- Data sorted by method
- Mean, SD, slopes
- Reports on web site

94					March	n 2014							
Table 17u. 2013 Quality Control Data Summaries of Statistical Analyses													
HYDROXYBUTYRYLCARNITINE (µmol C4OH/L whole blood)													
METHOD			Average Within		Y-								
METHOD	N N	Mean	Lab SD	SD	Intercept*	Slope							
Lot 1265 - Nonenriched 0.0 µmol/L whole blood													
Derivatized - MS/MS non-kit	577	0.07	0.02	0.03	0.05	0.7							
Derivatized - MS/MS PE NeoGram Kit	118	0.08	0.03	0.04	0.05	0.7							
Derivatized - MS/MS Chromsystems MassChrom Kit	76	0.06	0.02	0.02	0.04	0.6							
Lot 1266 - Enriched 0.5 μmol/L whole blood													
Derivatized - MS/MS non-kit	570	0.37	0.06	0.11	0.05	0.7							
Derivatized - MS/MS PE NeoGram Kit	120	0.40	0.08	0.13	0.05	0.7							
Derivatized - MS/MS Chromsystems MassChrom Kit	76	0.34	0.05	0.07	0.04	0.6							
Lot 1267 - Enriched 1.0 µmol/L whole blood													
Derivatized - MS/MS non-kit	574	0.69	0.09	0.18	0.05	0.7							
Derivatized - MS/MS PE NeoGram Kit	118	0.76	0.13	0.22	0.05	0.7							
Derivatized - MS/MS Chromsystems MassChrom Kit	75	0.67	0.11	0.13	0.04	0.6							
Lot 1268 - Enriched 2.5 μmol/L whole blood													
Derivatized - MS/MS non-kit	581	1.73	0.20	0.48	0.05	0.7							
Derivatized - MS/MS PE NeoGram Kit	116	1.92	0.27	0.48	0.05	0.7							
Derivatized - MS/MS Chromsystems MassChrom Kit	77	1.63	0.21	0.30	0.04	0.6							

Proficiency Testing (PT)

- □ 3X per year
- One-month reporting period
- Dedicated web page
 - Methods, quantitative values, cutoffs, classifications
- Reports issued to participants one week after data reporting deadline

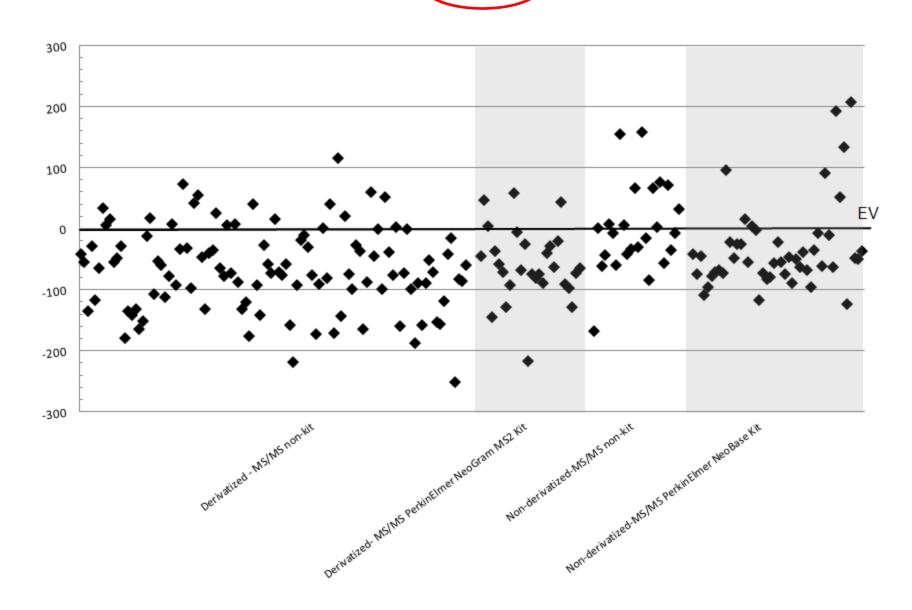


https://wwwn.cdc.gov/nsqap/Public/default.aspx

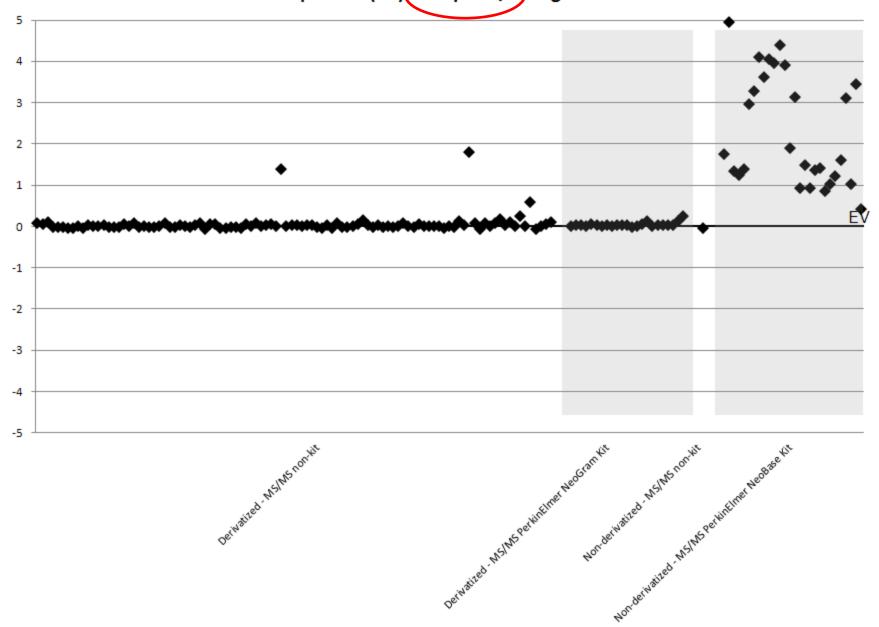
Importance of Quality Assurance *Proficiency Testing*

- Laboratory performance assessed at one point in time
- Required for regulatory purposes and lab certification
 - Labs should participate in a certain number of challenges each year
 - If formal PT programs are not available, labs should establish alternative PT
- Proficiency must be demonstrated to inspectors to maintain certification

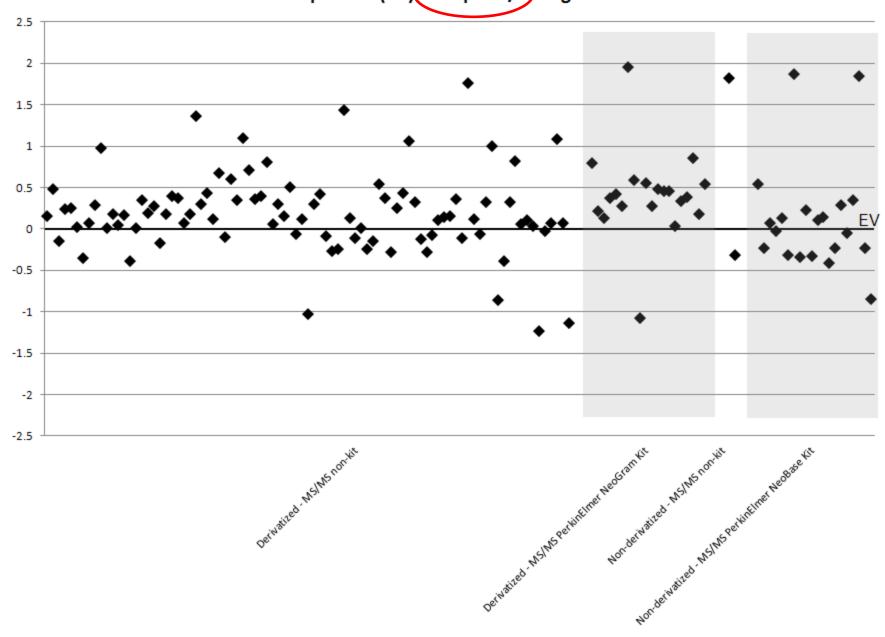
Gráfica Bland Altman: Fenilalanina (Phe)
Quarter 1, Muestra 1154
Valor Esperado (EV) = 503 μmol/L sangre



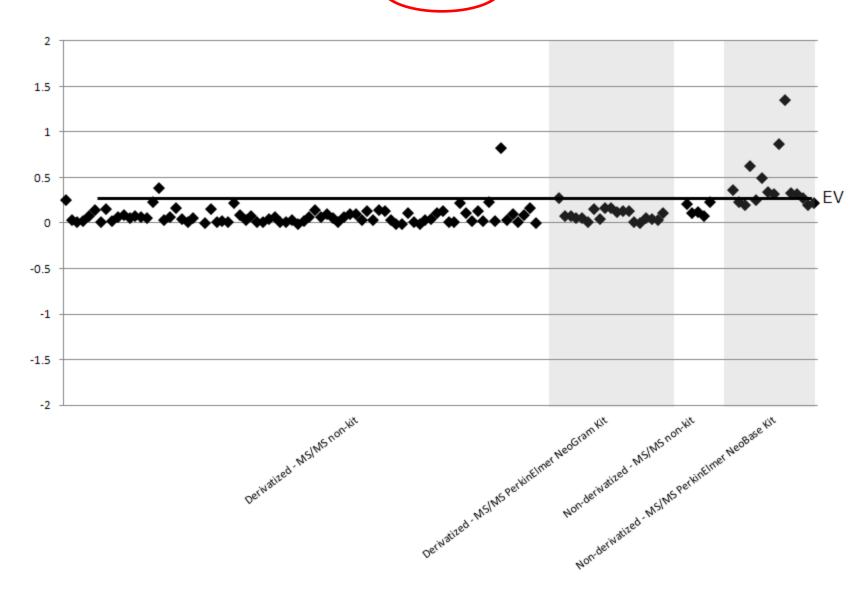
Gráfica Bland Altman: Malonylcarnitina (C3DC) Quarter 3, Muestra 3161 Valor Esperado (EV) 0.07 μmol/L sangre



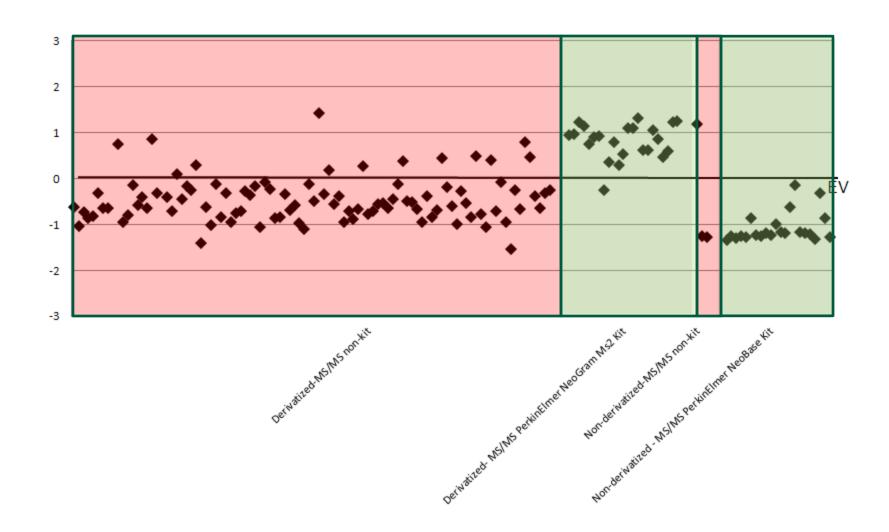
Gráfica Bland Altman: Hydroxybutyrylcarnitina (C4OH) Quarter 3, Muestra 3161 Valor Esperado (EV) 1.33 μmol/L sangre



Gráfica Bland Altman: Hydroxybutyrylcarnitina (C4OH) Quarter 1, Muestra 1163 Valor Esperado (EV) = 0.07 μmol/L sangre



Gráfica Bland Altman: Malonylcarnitina (C3DC) Quarter 1, Muestra 1163 Valor Esperado(EV) = 1.57 μmol/L sangre



Other MS/MS Programs at CDC

□ CURRENT:

- Second tier CAH
- Second tier MSUD
- X-ALD
- Hemoglobin peptides

□ UNDER DEVELOPMENT:

- Second tier MMA
- Linearity materials (CLSI EP6-A)
- ORN, GLY for AAQC
- GAMT
- ADA-SCID







MS/MSTRAINING WORKSHOP

Newborn Screening by Tandem Mass Spectrometry: A Hands-On Course in Understanding Laboratory Issues and Interpreting Test Results

- 5-day workshop
- 10 participants per course
- Lectures:
 - Biochemical pathways
 - Interferences
 - Stable isotopes
- Lab exercises:
 - MSTuning
 - Der, Non-der
 - 2nd tier CAH, X-ALD, Plasma AC





The reviews are in...

- I enjoyed very much learning from the hands-on lab activities. An opportunity to familiarize myself with various MS/MS instruments and to learn basic instrument PM/tuning which / can practically use.
- The CAH & ALD tests were also beneficial as our NBS lab is looking into piloting it. The lab is super clean and organized and the staff were friendly. Over all it was *one of the best learning experiences* I have had.....
- The optimization of the common analytes did convince me that my method used at home *could be significantly improved* an example being front end fragmentation of citrulline.



ADDITIONAL RESOURCES: CLSI NBS04-A2 GUIDELINE UPDATE

CLSI I/LA32-A (NBS04)

WG members:

- Víctor R. De Jesús (Chair)
- Mark A. Morrissey (Secretary)
- Donald H. Chace, PhD, MSFS, FACB
- Uttam Garg, PhD, DABCC
- Christopher A. Haynes, PhD
- Patricia R Hunt
- David C. Kasper, PhD
- Mark Kuracina, MBA, BSc
- Giancarlo la Marca, Pharm Sc
- Raquel Yahyaoui Macías, MD, PhD
- Adrienne Manning
- Mary A. Seeterlin, PhD
- Dianne Webster, PhD, FHGSA
- Ronald J. Whitley, PhD, DABCC, FACB
- William W. Wood, PhD

I/LA32-A Vol. 30 No. 16 Replaces I/LA32-P Vol. 29 No. 25

Newborn Screening by Tandem Mass Spectrometry; Approved Guideline

This guideline serves as a reference source for the numerous activities related to operating a tandem mass spectrometry laboratory as part of public and private newborn screening programs with the goal of creating greater test accuracy, performance, and consistency among laboratories, thereby ensuring data quality that will ultimately benefit all newborns worldwide.

A guideline for global application developed through the Clinical and Laboratory Standards Institute consensus process.



CLSI I/LA32-A (NBS04)

- Updated content
 - MS/MS basics and nomenclature
 - Enhanced guidelines for MS/MS data interpretation
 - Informative markers / ratios
 - Non-derivatized assay considerations
 - Improved documentation of interferences and other MS/MS-detectable disorders

- Project timeline
 - April 2014 inaugural meeting
 - September 2014 face-toface meeting
 - December 2014 final draft submitted to CLSI
 - 2015 public comments, voting and publication

Summary

- Newborn screening by tandem mass spectrometry is a successful public health program
 - 42/57 RUSP disorders are MS/MS-detectable
- Multiple considerations to the selection of appropriate MS/MS method
- Many challenges remain for MS/MS screening
 - Establish proper steps to eliminate false positives and negatives
 - Second-tier testing?
 - Cutoffs and interpretation
 - Harmonization of analytical data
 - Quality indicators

Summary

- Participation in EQAS helps maintain MS/MS assay proficiency
- NSQAP is a comprehensive resource for laboratory services
 - PT and QC materials invaluable for MS/MS laboratories
- ☐ Training opportunities available at CDC
 - Next course: April 2015
- ☐ Continued quality improvement is our mission

Acknowledgments

Biochemical Mass Spectrometry Laboratory, NSMBB



- Newborn Screening Quality Assurance Program
 - Joanne V. Mei, Chief
 - Kelsey Sheard
 - Sarah Klass
- NSQAP Participating Laboratories
- APHL

Thank you!



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