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Highly Selective Bioanalytical Quantitation Method for Analysis of (R)-Amlodipine and (S)-Amlodipine Enantiomers in Human Plasma Using LC-MS/MS

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Amlodipine is a calcium channel blocker used to treat high blood pressure, chest pain and other conditions caused by coronary artery disease. It acts by improving blood flow by dilating blood vessels. (S)-Amlodipine is the pharmacologically active enantiomer of Amlodipine but a racemic mixture of Amlodipine is used for therapeutic purposes. The use of racemic mixture of the Amlodipine has shown adverse effects like peripheral edema and other side effects like headache, dizziness, flushing and abdominal pain [101]. Studies have reported these adverse effects are rarely associated with (S)-Amlodipine [14]. (S)-Amlodipine and (R)-Amlodipine enantiomers exhibit different pharmacokinetics and pharmacodynamics. According to regulatory guidelines [12, 13] individual enantiomers should be measured in case the enantiomers exhibit different pharmacokinetic or pharmacodynamic properties or the exposure ratio of enantiomers is modified by a difference in the rate of absorption. If one enantiomer is pharmacologically active and other is inactive or has low contribution to activity, it is sufficient to demonstrate bioequivalence for the active enantiomer. This validated LC-MS/MS method is developed to monitor concentrations of (S)-Amlodipine and (R)-Amlodipine enantiomers in human plasma to evaluate the pharmaceutical equivalence for both racemic and (S)-Amlodipine formulations of Amlodipine.

The purpose of the study was to develop an improved selective and rugged validated LC-MS/MS method for the quantitation of Amlodipine enantiomers in human plasma samples.

Key Features of QTRAP 4500 and Phenomenex Lux Columns

- SCIEX QTRAP 4500 provides sensitivity to detect Amlodipine enantiomers at therapeutic levels in human plasma
- Phenomenex Lux Cellulose-4 column allows for baseline chromatographic separation of the (R) and (S) enantiomers of Amlodipine.



SCIEX QTRAP® 4500 system



Example Chromatogram of (R) and (S)-Amlodipine Isomers

Drug Discovery and Development



Method Development

A thorough literature review revealed that several LC-MS/MS methods have been published for separation of (S)-Amlodipine and (R)-Amlodipine enantiomers in various biological matrices. The major challenge in developing this method was to have good peak shape, published LC-MS/MS methods using various chiral columns and chromatographic conditions had peak tailing and longer methods. Published methods have used various basic mobile phase additives e.g. ammonium hydroxide, trimethylamine and diethylamine for chiral separations. Various additives were tried for method development, ethanolamine at the concentration of 0.05%v/v showed best peak shapes and signal for amlodipine isomers. It is important to setup a rapid, selective and sensitive LC-MS/MS method for bioanalysis approach to ensure wide concentration range (50pg/mL to 50ng/mL) to cover PK and bioequivalence studies for all dosage forms ranging from 2.5mg to 10mg per day.

Experimental

- Chemicals and Reagents: Analytical Standards of (S)-Amlodipine, (R)-Amlodipine, (S)-Amlodipine-d4 and (R)-Amlodipine-d4 were purchased from Toronto Research Chemicals, Canada with the purity of 99%. Acetonitrile, Water, Methanol, Ethanol Amine, Formic acid and Isopropyl alcohol were purchased for Sigma Aldrich. Strata[™]-X 33 µm Polymeric Reversed Phase SPE cartridges and Analytical LC Column Lux® 3 µm Cellulose-4, 150 x 2 mm were provided by Phenomenex.
- Stock and Working Standard Solutions: Stock solution of (S)-Amlodipine and (R)-Amlodipine were prepared in methanol at the concentration of 1mg/mL. Working standard solutions of various concentrations for spiking into plasma were prepared with methanol: water (50:50v/v). Working stock of internal standard was prepared at the concentration of 100ng/mL.
- Calibration and Quality Control Samples: Stock solution of (S)-Amlodipine and (R)-Amlodipine were prepared in methanol at the concentration of 1mg/mL. Working standard solutions of various concentrations for spiking into plasma were prepared with methanol: water (50:50v/v). Working stock of internal standard was prepared at the concentration of 100ng/mL.
- Sample Preparation: The extraction of Amlodipine enantiomers from human plasma was carried out using a solid phase extraction technique. Phenomenex Strata[™]-X 33 µm Polymeric Reversed Phase cartridge was first conditioned with 1mL of methanol and equilibrated with 1mL of water. 5µL of internal standard working solution was added to 100µL

spiked human plasma and mixed. 500µL of 0.2%v/v ethanolamine in water was added to sample and vortexed. Sample was loaded on conditioned cartridge and allowed to pass through the cartridge at moderate speed. Cartridge was washed with 1mL of water followed by 1mL of 20% methanol in water to remove polar and non-polar interferences. The elution of the analytes was performed by 1mL of 0.1% formic acid in methanol. The eluent was evaporated at 50°C under nitrogen stream and reconstituted with 100µL of mobile phase.

Table 1: HPLC Conditions

Lux® 3µm Cellulose-4, 150x2mm
10µL
0.30 mL/min
0.05% Ethanolamine in Acetonitrile and
Isopropyl Alcohol (96:4 v/v)

Table 2: QTRAP 4500 Compound Dependent Parameters

Compound	Precursor m/z	Fragment m/z
(R)-Amlodipine	409.3	237.9
S)-Amlodipine	409.3	237.9
(R)-Amlodipine-d4	413.1	237.9
(S)-Amlodipine-d4	413.4	237.9
Ionization Mode IS Voltage Positive, ESI 550	e Source Temp 0v 300°c	Collision Energy 15v

LC-MS/MS analysis: Quantitation of (R)-Amlodipine and (S)-Amlodipine was performed using a SCIEX LC-MS/MS system. SCIEX ExionLC[™] AD HPLC system was coupled with SCIEX QTRAP® 4500 system. Separation of Isomers was achieved on a Phenomenex Lux® 3 µm Cellulose-4, LC Column 150 x 2 mm with a flow rate of 0.3mL/min mobile phase. The mobile phase consisted of 0.05% Ethanol amine in Acetonitrile and Isopropyl Alcohol (96:4v/v) details listed in Table 1. Electrospray ionization (ESI) was used in positive acquisition mode at multiple reaction monitoring (MRM) scan type with the transitions 409.3/237.9 for (R)-Amlodipine and (S)-Amlodipine enantiomers and 413.3/237.9 for (R)-Amlodipined4 and (S)-Amlodipine-d4 Internal standard enantiomers. The turbo gas temperature was 300°C and ion spray voltage was set at 5500V. Optimized LC-MS/MS conditions are listed in Table 2.

Method Validation

System Suitability: Six replicates of analyte and internal standard mixture 1ng/mL were injected every day at the start of the experiment to ensure instrument performance at the start of the day. %CV criteria for the area ratio for the analyte to the internal standard peak area was established to be ≤5% for both analytes and, IS and retention time deviation was less than 2% for both the analytes and IS for the system suitability



study. Chromatograms of (R)-Amlodipine and (S)-Amlodipine enantiomers and deuterated internal standards is presented in figure 1.

Figure 1: Amlodipine Isomers and Internal Standards

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(R) and (S) Amlodipine Isomers

(R) and (S) Amlodipine d4 Internal Standards

Selectivity, specificity and carryover: Eight different lots of blank plasma were extracted and analyzed using the developed LC-MS/MS method along with the corresponding lots of plasma spiked at the lower limit of quantitation (LLOQ) and working internal standard concentration. Carry over was evaluated by injecting the following sample set: extracted blank, LLOQ, ULOQ and extracted blank. Percentage interference at the retention time of the analyte was monitored and calculated against the LLOQ area response and internal standard area response. Analytes and Internal standard showed high degree of selectivity and specificity in the proposed method. Blank samples injected after ULOQ samples did not show quantifiable response, demonstrating that the proposed method has no carry over. Chromatograms of extracted plasma blank, plasma spiked LLOQ are displayed in Fig.2. A summary of carry over data is presented in Table

Figure 2: Plasma Blank and LLOQ QC: 409.3à 237.9



Table 3: Evaluation of Carry Over

odipine	(S)-Am	lodipine
Analyte Peak Area	a Sample	Analyte Peak An
22	Plasma Blank	66
3761	LLOQ	3706
6536117	ULOQ	6468086
82	Plasma Blank	119
	odipine Analyte Peak Area 22 3761 6536117 82	odipine (S)-Aml Analyte Peak Area Sample 22 Plasma Blank 3761 LLOQ 6536117 ULOQ 82 Plasma Blank

Below 20% of LLOQ area response

• Linearity and sensitivity: Calibration curves were generated by spiking analytes in blank human plasma at 8 different concentration levels ranging from 0.050ng/mL to 50ng/mL. Standards/calibrators should not deviate by more than 15% of nominal concentrations, except at LLOQ where the standard/calibrator should not deviate by more than 20%. The acceptance criterion for the standard curve is that at least 75% of non-zero standards should meet the above criteria, including the LLOQ and ULOQ. The calibration curve was found to be linear over the specified range for both (R)-Amlodipine and (S)-Amlodipine enantiomers. The regression coefficient (r value) was greater than 0.99 for all calibration linearity data for (R)-Amlodipine and (S)-Amlodipine and (S)-Amlodipine

Figure 3: Calibration for (R) and (S) Amlodipine



(R) Amlodipine in Blue, (S) Amlodipine in Purple

enantiomers is displayed in Fig.3.

Accuracy and precision: Intraday and interday precision and accuracy was evaluated using 6 replicates of extracted LLOQ QC (0.050ng/mL), LQC (0.150ng/mL), MQC (20.000ng/mL) and HQC (40.000ng/mL) samples in human plasma. According to the USFDA Regulatory guidelines, mean % nominal concentration at each QC level, other than LLOQ QC, must be within 85% to 115% and precision (% CV) should be ≤15%. Mean % of nominal concentration at LLOQ QC level must be within 80% to 120% and the precision (% CV) should be ≤20%. Intraday and interday precision and accuracy was studied, and met both the precision and accuracy requirements. The study data is presented in the



supplemental data, in Table 4.

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- *Recovery:* The extraction recoveries for both (R)-Amlodipine and (S)-Amlodipine at three concentration levels were determined by measuring the mean peak area response of 6 replicates of extracted quality control samples and comparing to the mean peak area response of extracted blank matrix that was spiked after preparation with the nominal amount of both analytes at the low, medium and high QC levels. The extraction recoveries of analytes were uniform and reproducible. Extraction recovery for (R)-Amlodipine was 94.14% and 92.23% for (S)-Amlodipine. Table 4, summarizes the percentage recovery of (R)-Amlodipine and (S)-Amlodipine enantiomers, obtained from plasma samples spiked at 3 concentration levels.
- *Matrix Effect:* Matrix effect was determined by measuring the corresponding analyte peak area response in reconstituted matrix samples from 6 different plasma lots against the analyte mean peak area response in reference solution at 2 different concentration levels (Low and High QC Concentrations). Matrix effect was also studied for all 6 replicates and the developed method showed no matrix effect.
- *Dilution integrity:* The upper level of quantitation for (R)-Amlodipine and (S)-Amlodipine is 50ng/mL. A dilution integrity test was performed by spiking 1.6x concentrations of ULOQ in plasma samples and diluted 4-fold and 2-fold with blank plasma. The average percentage recoveries for 4-fold and 2fold dilutions for 6 replicate injections each were 94.90% for (R)-Amlodipine and 96.40% for (S)-Amlodipine.
- Stability: Stability studies in human plasma were evaluated to cover a wide range of expected experimental and storage conditions. Analytes and Internal standard were found to be stable at benchtop for 6 hours, in autosampler for 48 hours and for 3 freeze thaw cycles of stability studies. Sample stock solutions were also found stable in refrigerator conditions (2°C to 8°C) for 4 days. A summary of stability data is listed in Table 5.

Conclusion

A selective and sensitive LC-MS/MS method was developed for the separation and quantitation of (R)-Amlodipine and (S)-Amlodipine in human plasma. A solid phase extraction sample preparation technique was developed for extraction of the analytes from human plasma. The developed LCMSMS method was 7 min long, with LLOQ of 0.050ng/mL from (R)-Amlodipine and (S)-Amlodipine enantiomers. This method is unique in that it can quantify both the pharmacologically active and inactive enantiomers of Amlodipine in human plasma. We trust that this method for quantitation of (R)-Amlodipine and (S)-Amlodipine in human plasma will have application in bioavailability/bioequivalence studies, and also in preclinical studies, because it is simple, sensitive and reproducible. We anticipate that this method can be easily extended to other preclinical species with little or no modification.

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Supplementary Data

Table 4: Evaluat	tion of Inter Run	and Intra Run Ac	curacy and Pr	recision		
Interday Precision & Accuracy, n=6			Intraday Precision	and Accuracy (n	=18, 3 Batches)	
			(R)-Amlodipi	ne		
Nominal Conc, ng/ml	Measured Conc, ng/ml	Precision (%CV)	Accuracy(%)	Measured Conc, ng/ml	Precision (%CV)	Accuracy(%)
0.050	0.048	6.00	96	0.047	8.66	94
0.150	0.151	4.05	101	0.149	3.47	99
20	20.399	3.11	102	20.576	2.46	103
40	41.922	2.79	105	42.410	2.74	106
			(S)-Amlodipi	ne		
0.050	0.048	9.67	96	0.047	8.51	94
0.150	0.152	3.10	101	0.151	4.64	101
20	20.812	2.89	104	20.693	2.38	103
40	42.599	3.19	107	42.279	2.98	106

Stability Test	Nominal Conc	Measured Conc	%CV
	(R)-Am	lodipine	
Bench Top	0.150	0.159	4.92
(25°C, 6hr)	40.000	43.338	5.85
Autosampler Sampler	0.150	0.155	2.36
(5°Ċ, 36hr)	40.000	42.1452	3.98
Freeze Thaw Stability	0.150	0.153	3.60
	40.000	40.55	4.00
	(S)-Am	lodipine	
Bench Top	0.150	0.160	5.00
(25°C, 6hr)	40.000	43.401	4.13
Autosampler Sampler	0.150	0.163	4.67
(5°Ċ, 36hr)	40.000	41.771	4.57
Freeze Thow Stability	0.150	0.161	3.02
Freeze maw Stability	40.000	41.269	3.21



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