

FEASIBILITY OF USING DRIED BLOOD SPOTS FOR BIOMARKERS OF NEUROPATHOLOGY

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BACKGROUND

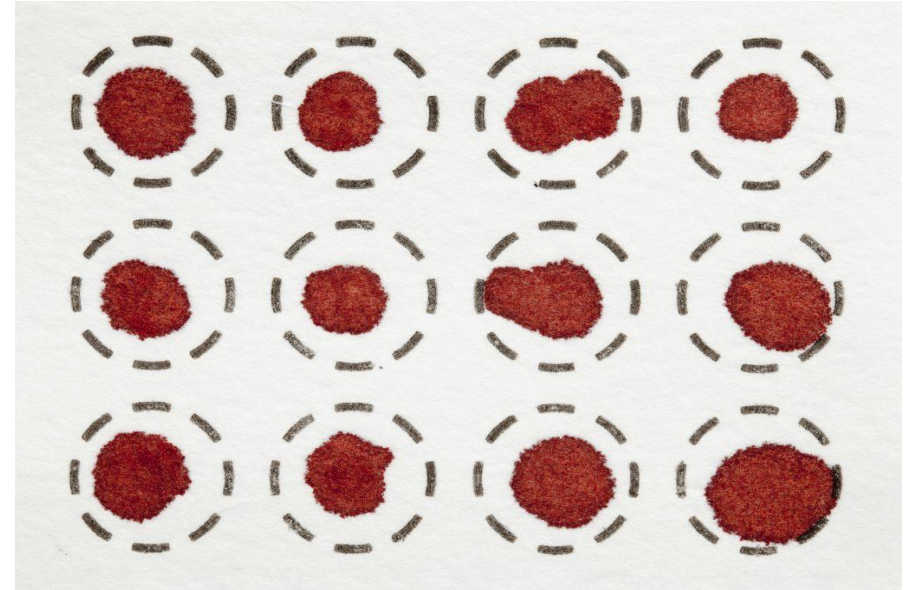
- Blood based biomarkers of neuropathology are increasingly being used in several research studies
 - Blood based biomarkers have been shown to be associated with dementia
- Most studies use blood that has been collected and processed soon after collection for biomarker measurement
 - These methods cannot be practically implemented in resource poor settings
- Alternate methods that do not rely on complex processing or cold storage can improve application of these biomarkers in a more broad research context.

BIOMARKERS OF NEUROPATHOLOGY

- Two previous papers have demonstrated the feasibility of using dried blood spots for measurement of neurofilament light (NfL)
 - NfL is a part of the axonal cytoskeleton and is a non-specific marker of neurodegeneration
 - Both studies showed that NfL levels are lower in DBS as compared to plasma but reasonably high levels of correlation between DBS and plasma levels were observed in both studies ($r=0.76 - 0.80$).
- Elution volumes and elution conditions are not standardized across studies

ALTERNATE METHODS: DRIED BLOOD SPOTS (DBS)

- Dried Blood Spots (DBS) is the most commonly used microsampling method
 - newborn screening programs,
 - pharmacokinetics
 - toxicology
 - infectious disease
- LIMITATIONS
 - Hematocrit effect
 - Sample heterogeneity
 - Environmental conditions
 - Labor intensive processing in the laboratory



DBS: PROCESSING METHODS

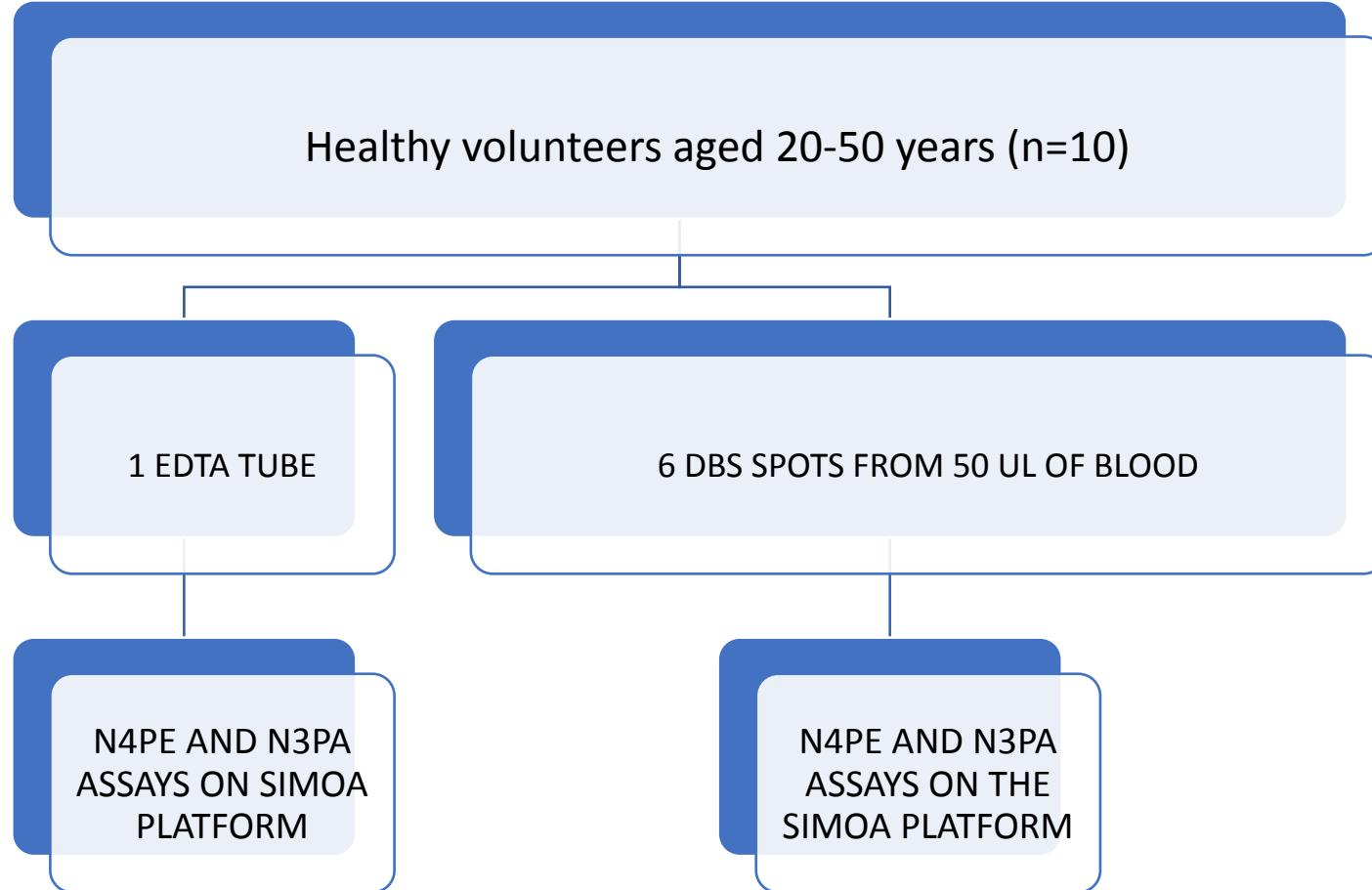
- **Method A:** Manufacturer's recommendation: DBS placed in a shaker (500 rpm) for 4 hours with 200 ul of sample diluent (sample diluent provided by Quanterix Inc.)
- **Method B:** Manufacturer's recommendation + 30 minutes of sonication
- **Method C:** Manufacturer's recommendation + 30 minutes of sonication + centrifugation for 10 minutes (9900 rcf)
- Samples were analyzed using the N4PA assay kit on the SR-X platform (Quanterix Inc.)
 - Biomarkers included NfL, GFAP, total Tau and UCHL-1
- Samples were analyzed in triplicate

RESULTS: PROCESSING CONDITIONS

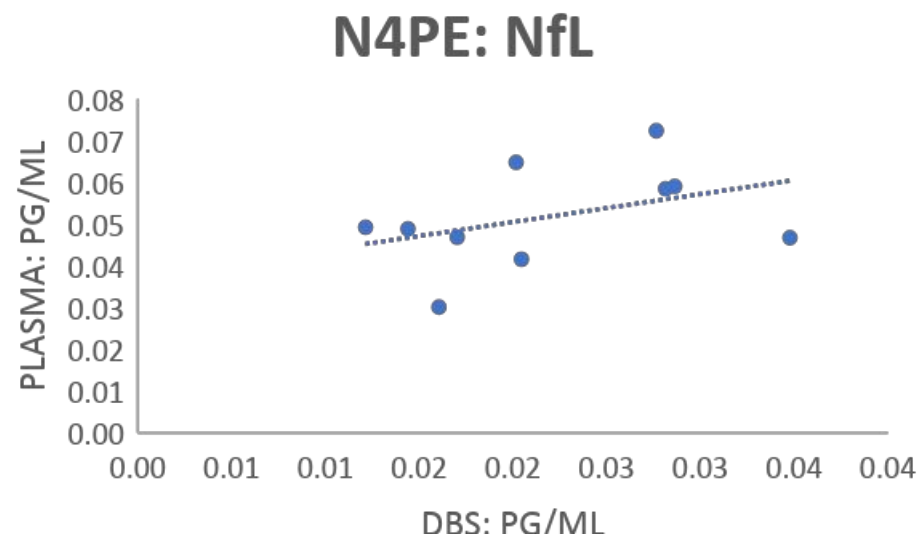
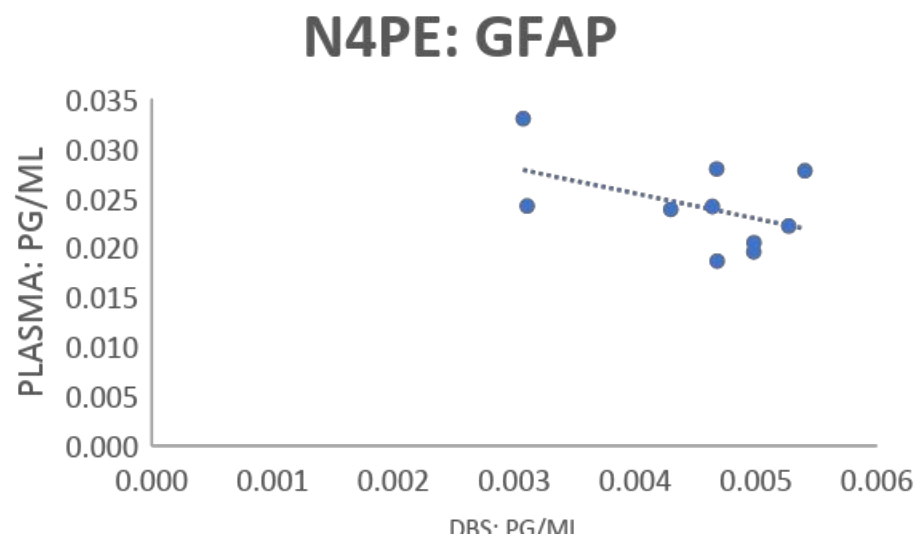
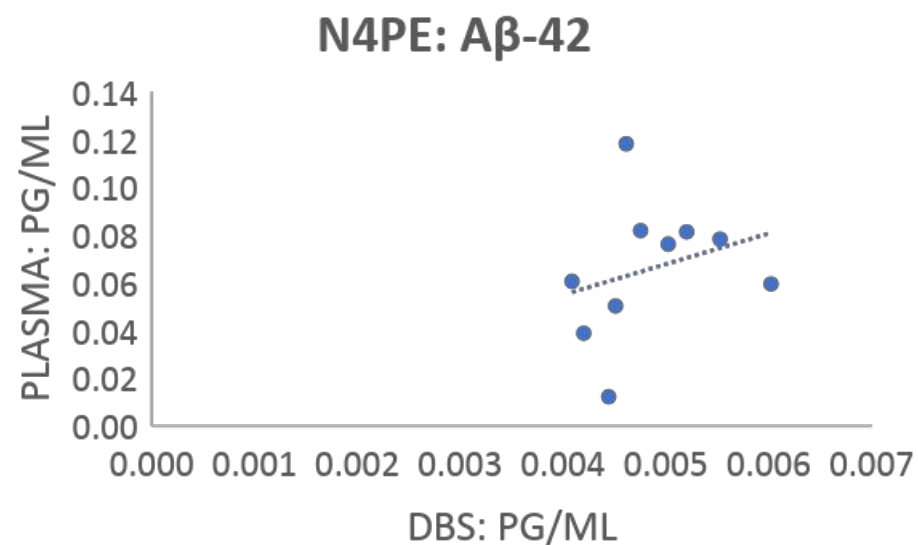
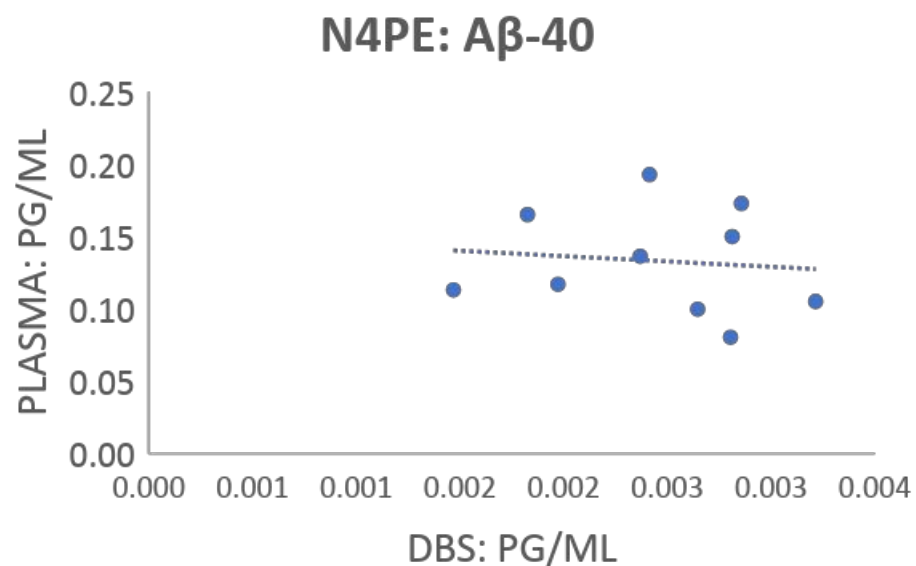
ANALYTE	METHOD A	METHOD B	METHOD C
Total Tau	8%	6%	4%
UCH L1	6%	5%	6%
Neurofilament light	17%	19%	20%
Gilial Fibrillary Acidic Protein (GFAP)	20%	13%	11%

- Decided to use **Method C** for all future assay development using DBS

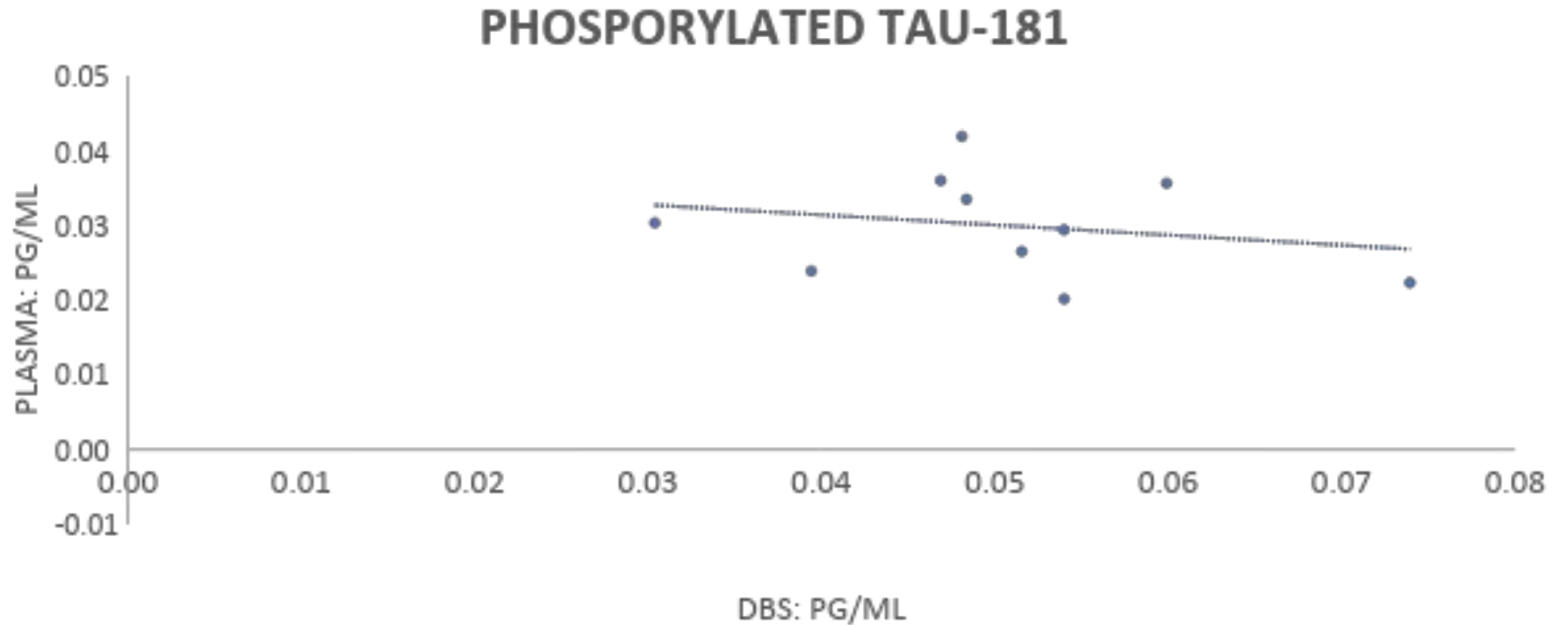
STUDY DESIGN: COMPARISON OF DBS AND PLASMA



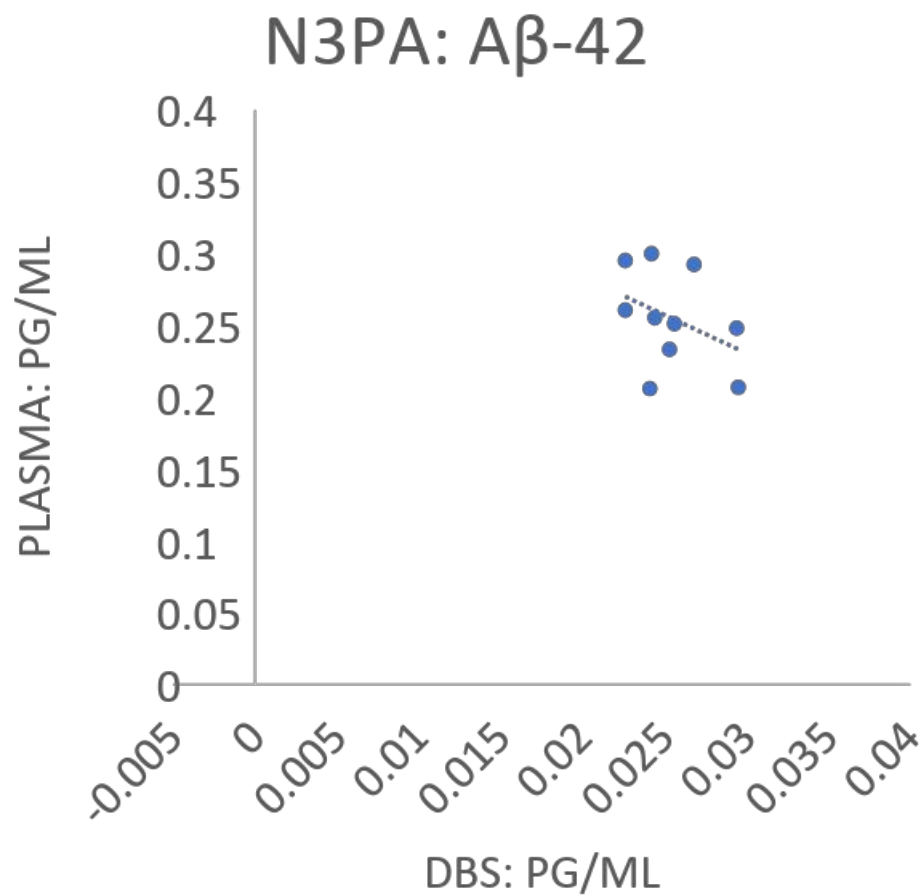
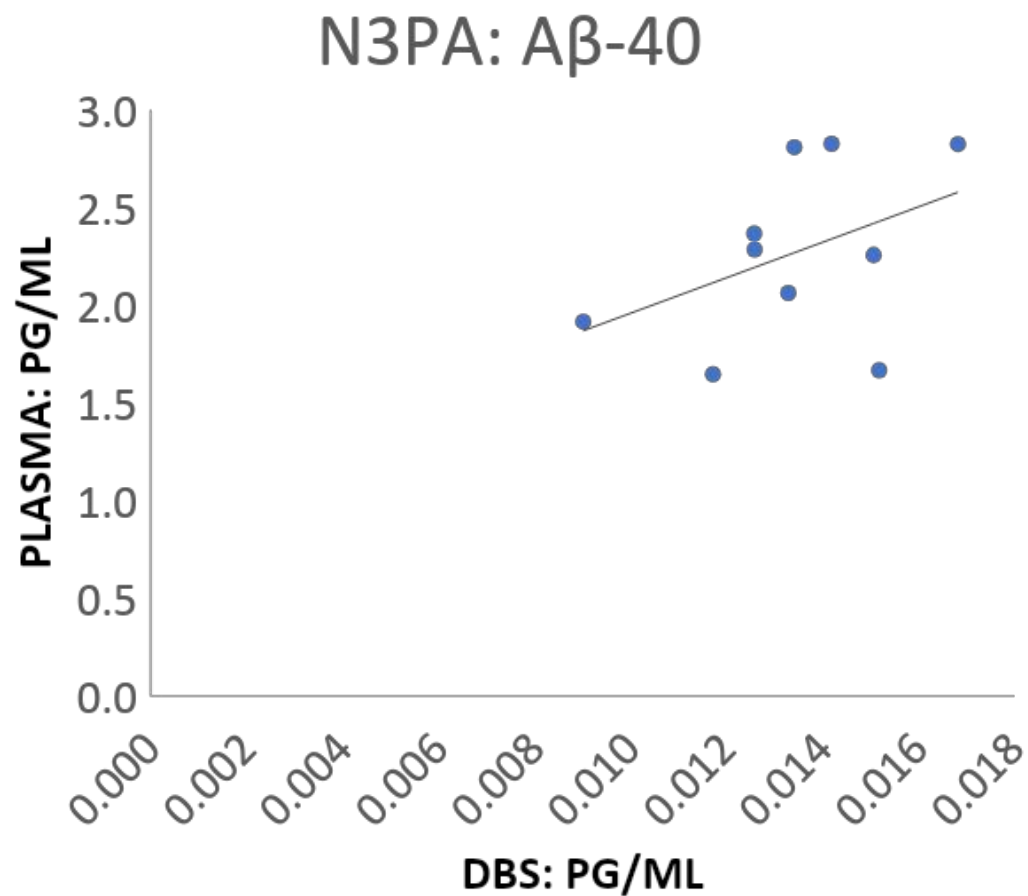
RESULTS: DBS VS. PLASMA



RESULTS: DBS VS. PLASMA (CONTD).....



.....AND MORE RESULTS



CONCLUSIONS AND FUTURE DIRECTIONS

- DBS values for all biomarkers are markedly lower than the corresponding plasma values
 - All values are well within the analytical range of the highly sensitive Simoa assays
- Correlation between DBS and plasma values depends on both the analyte and the antibodies used to estimate the analyte
 - Vastly different results for DBS and plasma with different assays for A β -40 and A β -42.
- Case-control studies within HRS to evaluate DBS can be used to replicate the association between neuropathological biomarkers and dementia observed with plasma samples
 - Larger range of biomarker values may change the observed correlation between DBS and plasma values

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