

MEASUREMENT OF BIOMARKERS OF NEUROPATHOLOGY USING DRIED BLOOD SPOTS

Bharat Thyagarajan

Professor

Program Director, Advanced Research and Diagnostics Laboratory

Director, Division of Molecular Pathology and Genomics

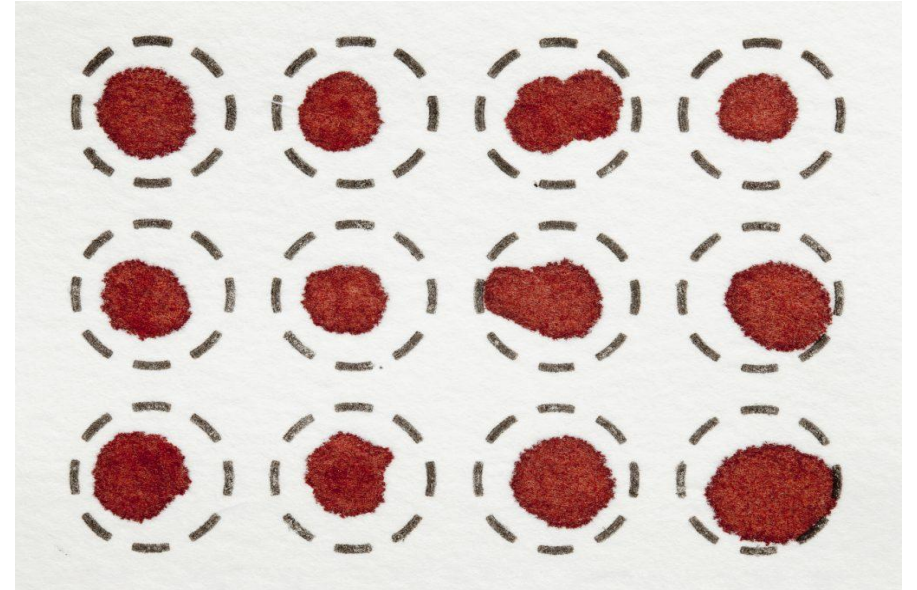
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BACKGROUND

- Blood based biomarkers of neuropathology are increasingly being used in several research studies
 - Blood based biomarkers have been shown to be associated with dementia
- Blood that has been collected and processed soon after collection for optimal 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.

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

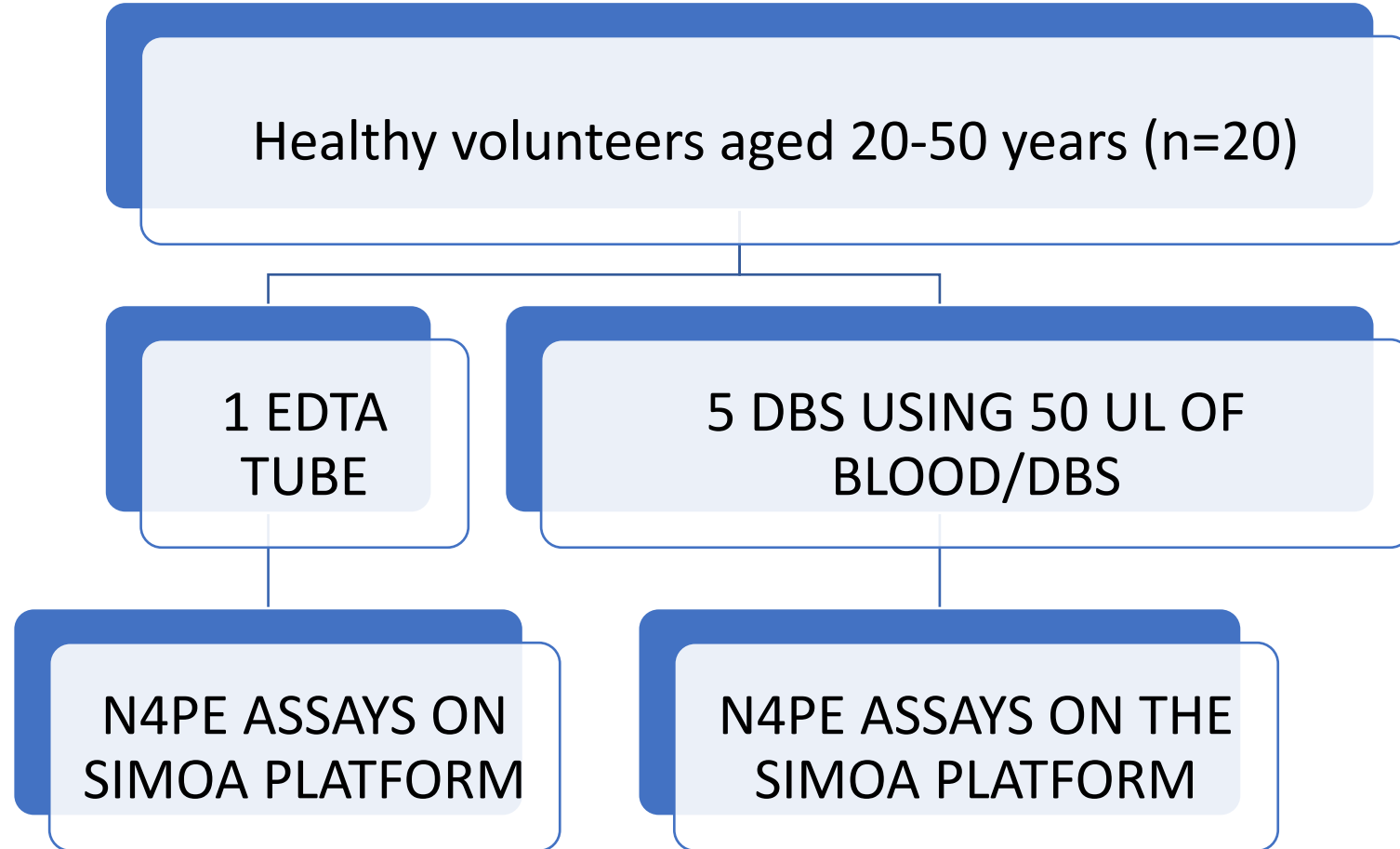


DRIED BLOOD SPOTS: LABORATORY PROCESSING

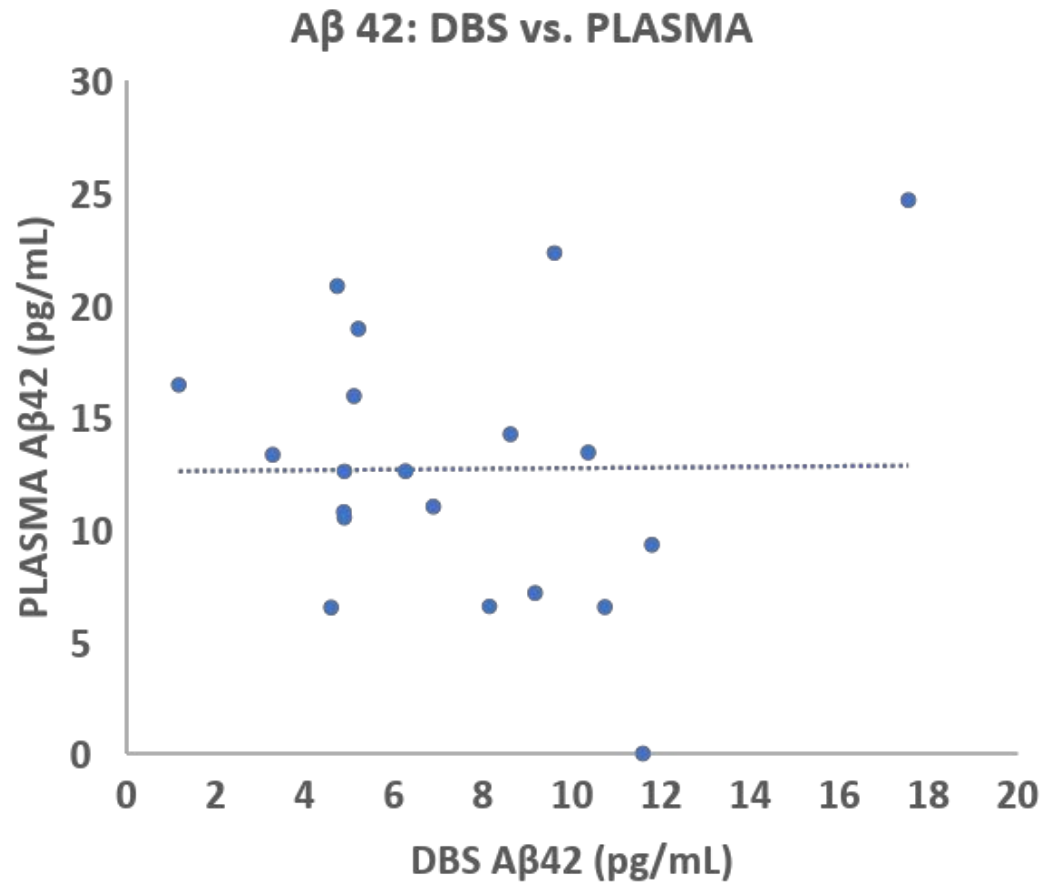
- DBS placed in a shaker (500 rpm) for 4 hours with 200 μ l of sample diluent (sample diluent provided by Quanterix Inc.)
- 30 minutes of sonication
- Centrifugation for 10 minutes (9900 rcf)

- Control sample: 25 μ l of plasma + 200 μ l of sample diluent
 - Control used to estimate % recovery of biomarkers with the processing method used in the laboratory

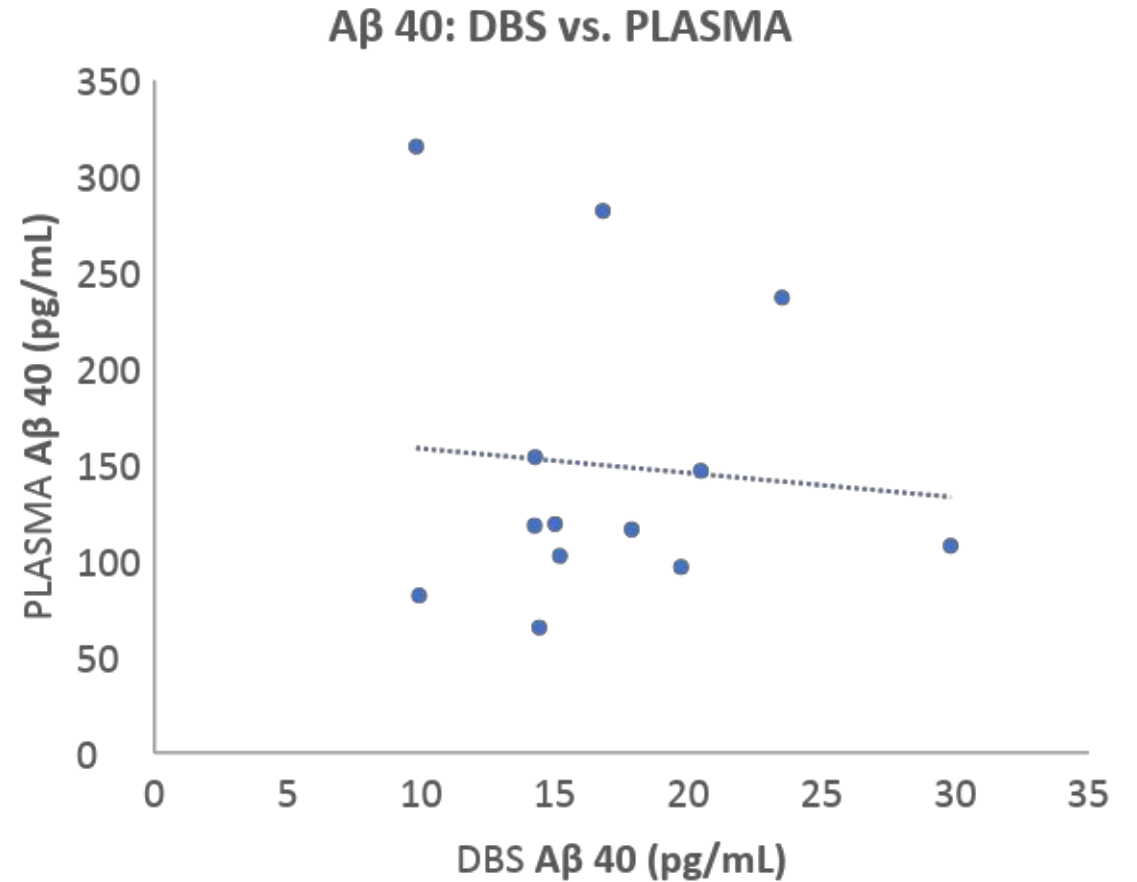
STUDY DESIGN: COMPARISON OF DBS AND PLASMA



RESULTS: DBS VS. PLASMA

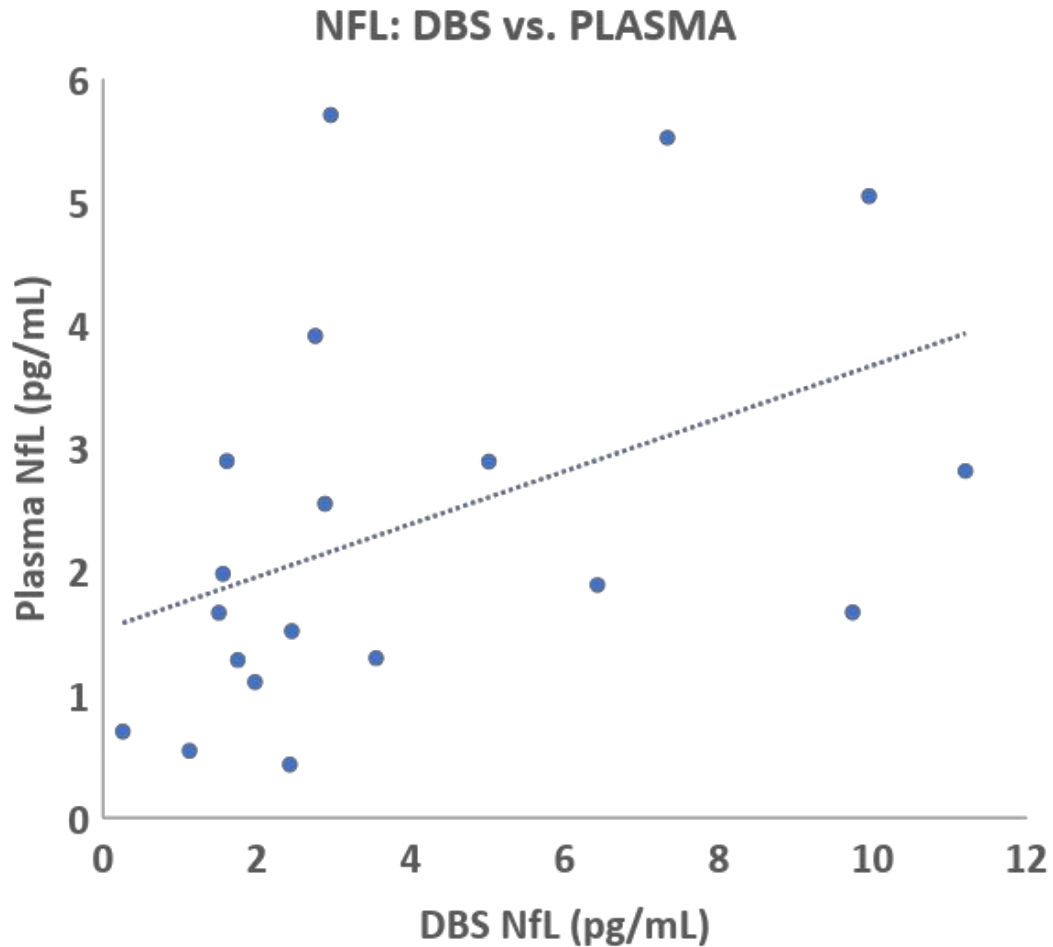


Average CV DBS: 38%
Average CV Plasma: 28%



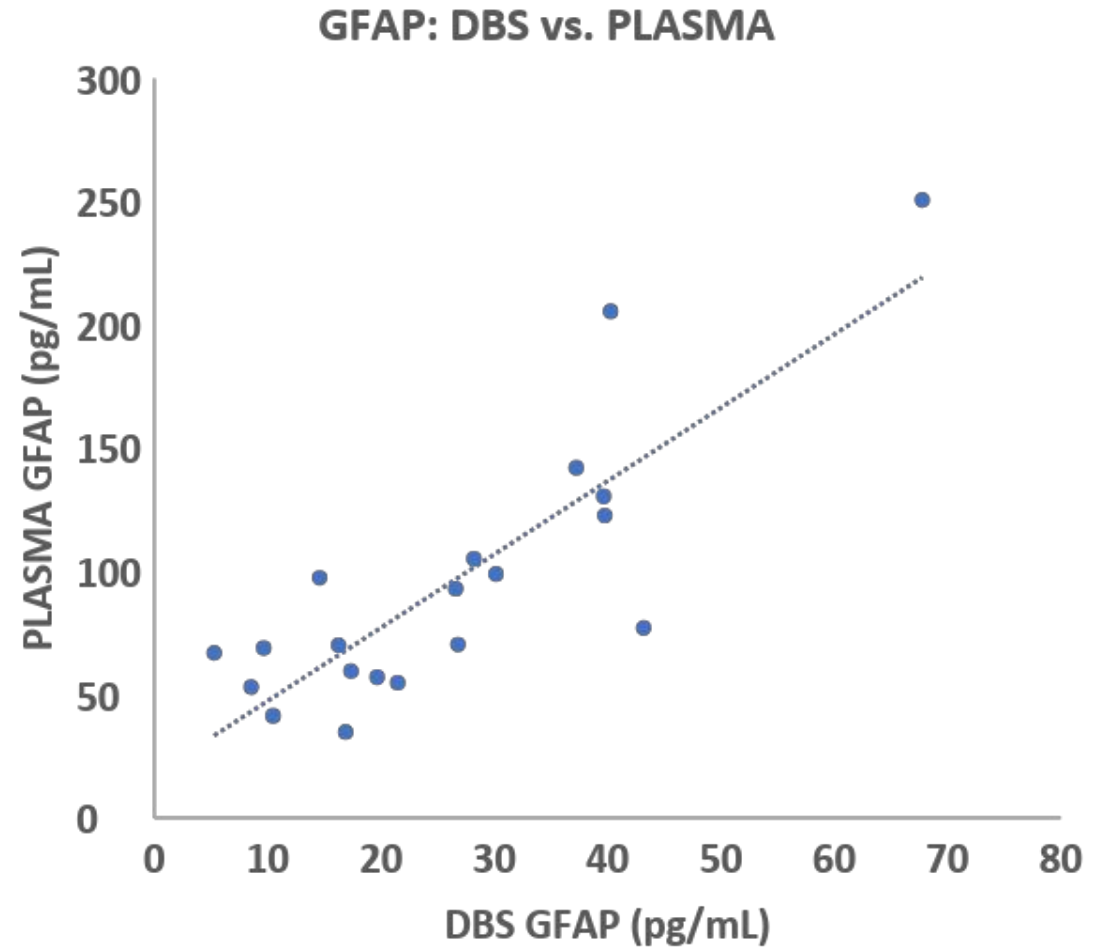
Average CV DBS: 53%
Average CV Plasma: 8%

RESULTS: DBS VS. PLASMA



Average CV DBS: 23%

Average CV Plasma: 17%



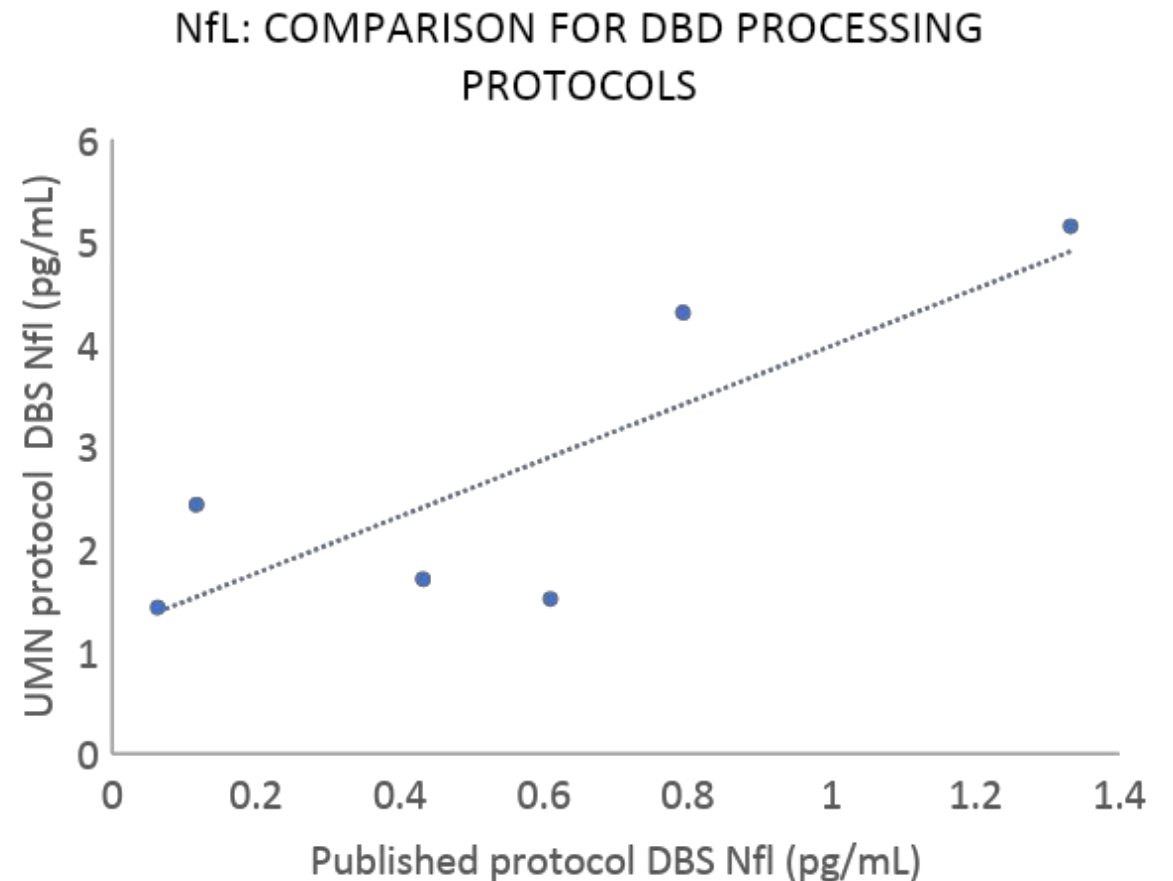
Average CV DBS: 33%

Average CV Plasma: 6%

COMPARISON OF BIOMARKER RECOVERY USING DIFFERENT DBS PROCESSING

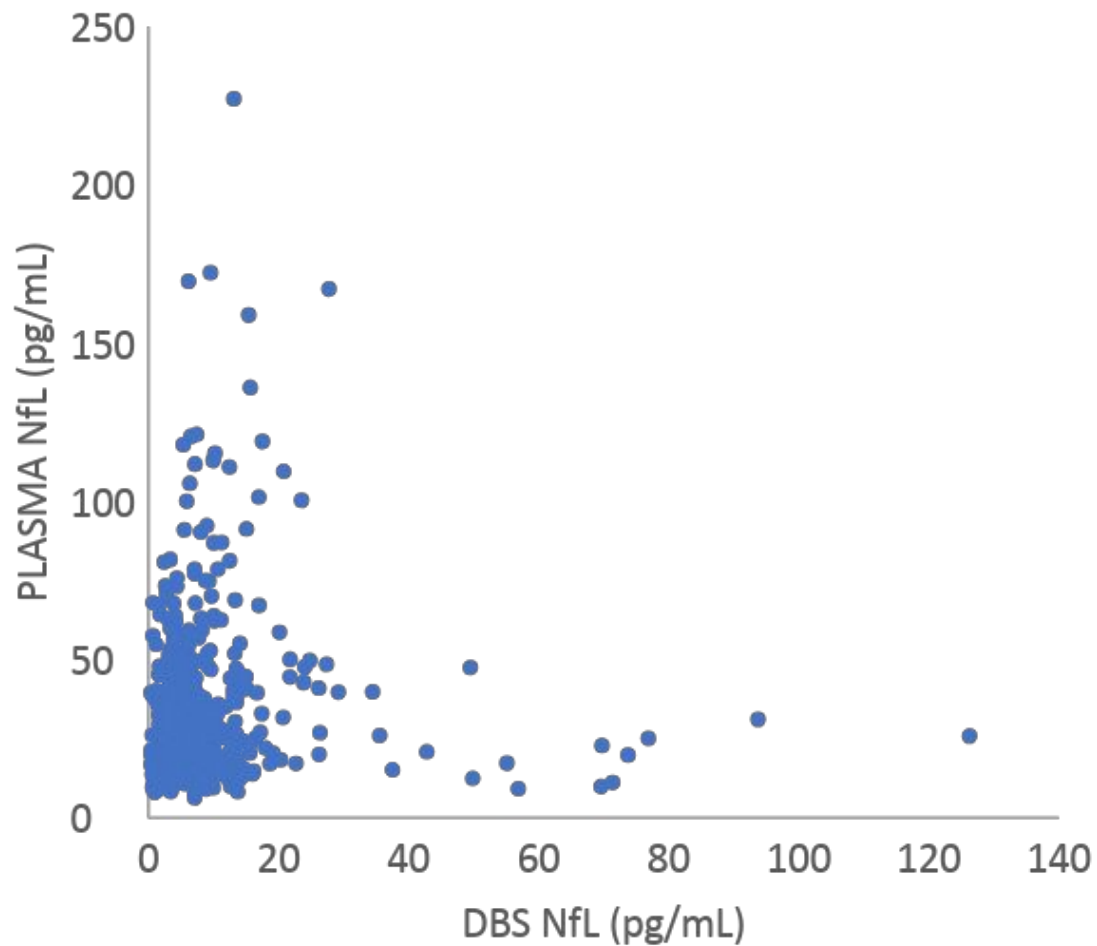
METHODS

- We compared NfL values (n=6) obtained by our lab protocol to published protocols where NfL was measured from DBS
 - 120 ul of PBS in a shaker (400 rpm) at 37°C for 1 hour.
 - Centrifugation for 10 minutes (2000 rpm)
- % Recovery of NfL with DBS protocols
 - UMN: 140.37% (1.42 vs. 1.01 pg/ml)
 - Published method: 6.24% (0.06 vs. 1.01 pg/ml)
- % Recovery of GFAP with DBS protocols
 - UMN: 60.31% (4.54 vs. 7.03 pg/ml)
 - Published method: 40.64% (3.056 vs. 7.03 pg/ml)



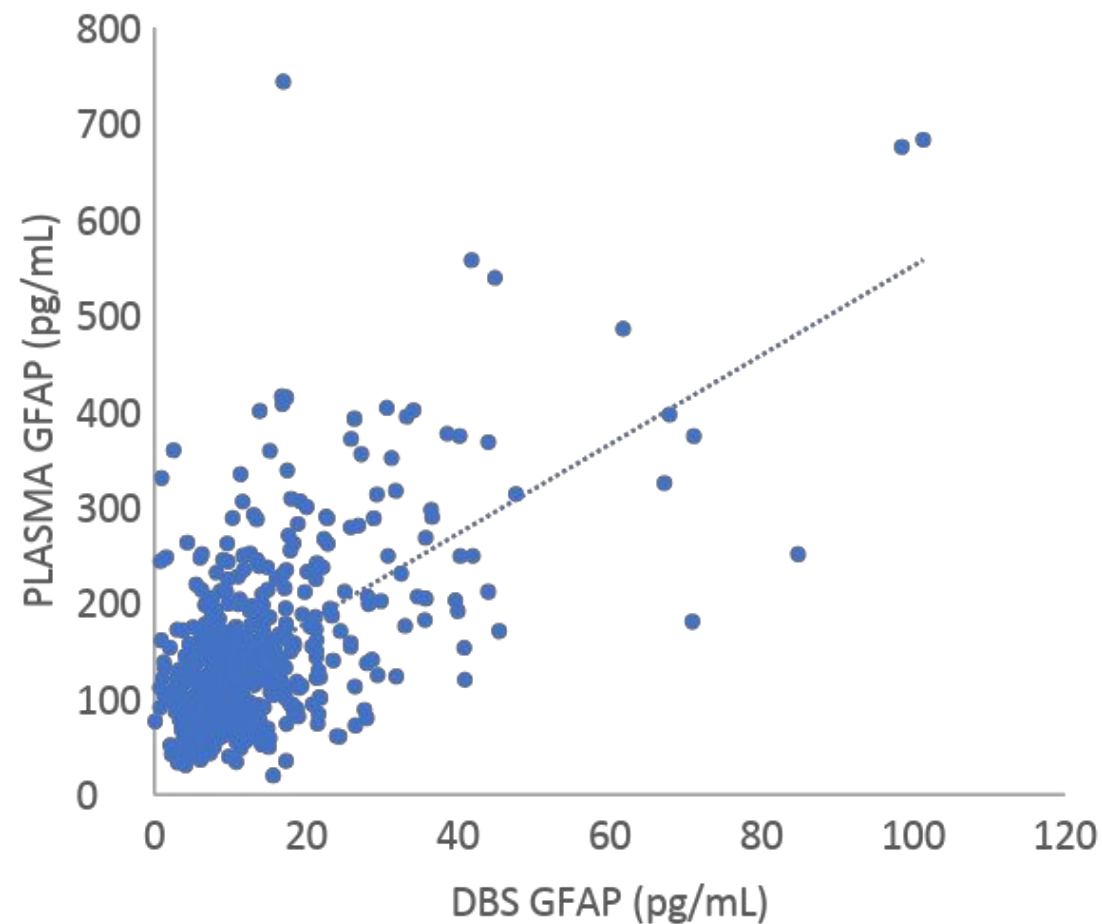
HRS: DBS vs. PLASMA RESULTS

NfL: DBS vs. PLASMA



Average CV DBS: 8%

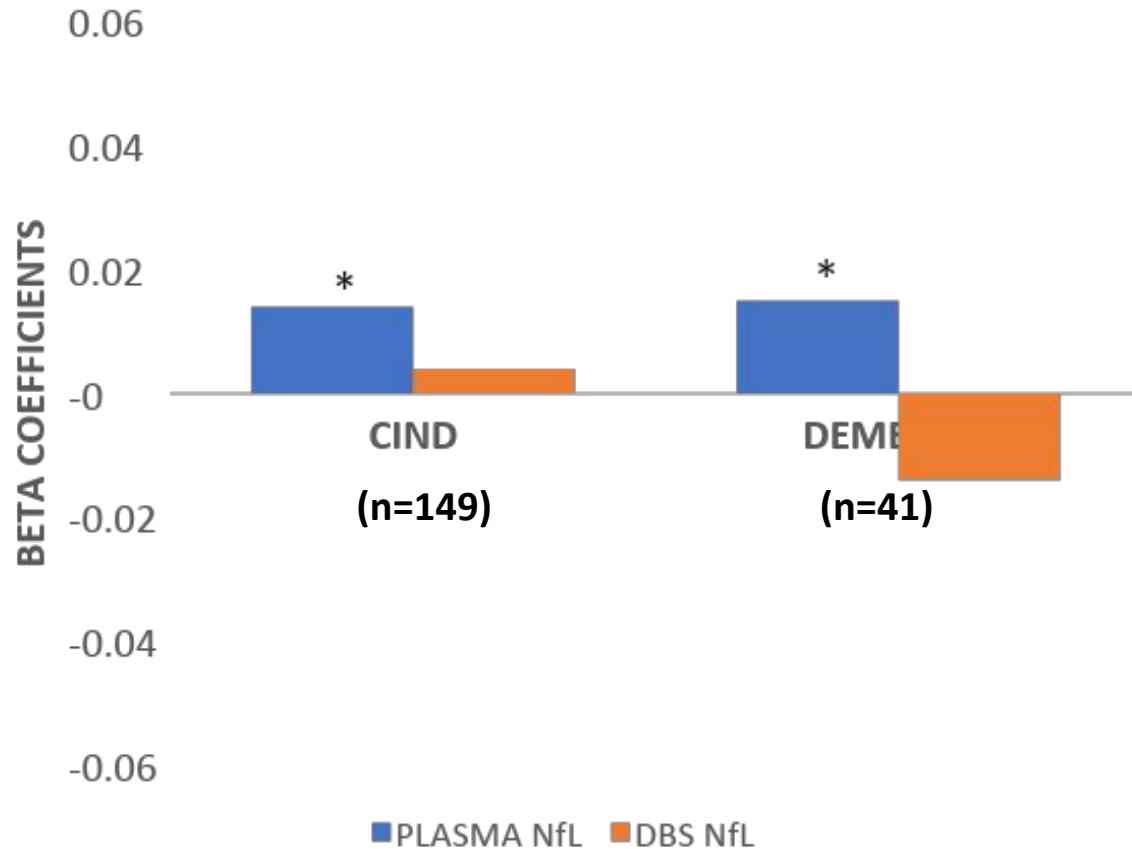
GFAP: DBS vs. PLASMA



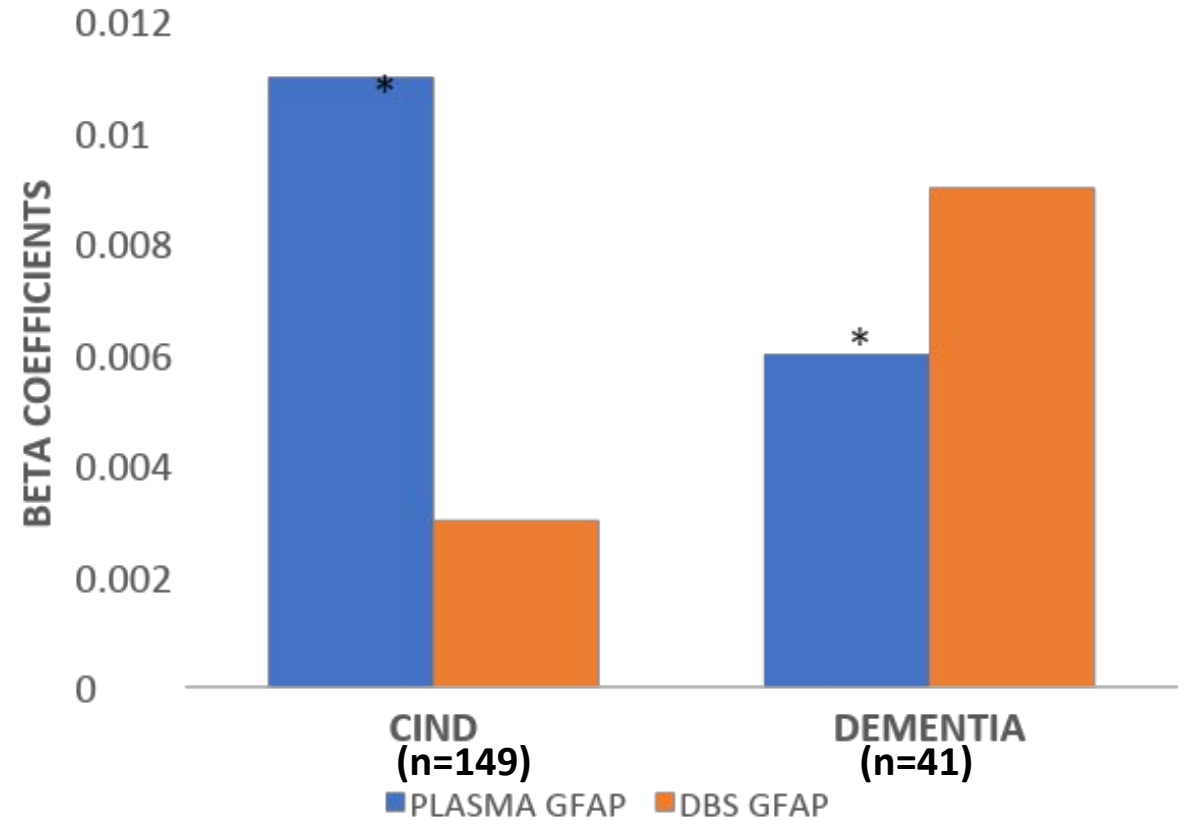
Average CV DBS: 14%

HRS: DBS BIOMARKERS VS. COGNITIVE STATUS

PLASMA AND DBS NfL vs. COGNITIVE STATUS



PLASMA AND DBS GFAP vs. COGNITIVE STATUS



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
 - Biomarker recovery from DBS is reasonable (>60%) for all biomarkers.
- DBS NfL did not correlate well with plasma NfL
 - This result is in contrast to published studies that demonstrate a reasonable correlation between DBS and plasma NfL (0.76-0.80)
- DBS GFAP shows reasonable correlation with plasma GFAP values
 - Consistent associations with cognitive status
- In HRS, DBS GFAP could be considered as an alternative to plasma GFAP when venous blood samples are not available..

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-
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RESULTS: PHOSPHORYLATED TAU-181

