



Stability of oxylipins during plasma generation and long-term storage

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ABSTRACT

Oxidized unsaturated fatty acids – i.e. eicosanoids and other oxylipins – are lipid mediators involved in the regulation of numerous physiological functions such as inflammation, blood coagulation, vascular tone and endothelial permeability. They have raised strong interest in clinical lipidomics in order to understand their role in health and diseases and their use as biomarkers. However, before the clinical translation, it is crucial to validate the analytical reliability of oxylipins. This notably requires to assess the putative artificial formation or degradation of oxylipins by (unsuitable) blood handling during plasma generation, storage and sample preparation. Using a liquid chromatography-mass spectrometry method covering 133 oxylipins we comprehensively analyzed the total (free + esterified) oxylipin profile in plasma and investigated the influence of i) addition of additives during sample preparation, ii) different storage times and temperatures during the transitory stage of plasma generation and iii) long-term storage of plasma samples at -80°C . Addition of radical scavenger butylated hydroxytoluene reduced the apparent concentrations of hydroxy-PUFA and thus should be added to the samples at the beginning of sample preparation. The concentrations of all oxylipin classes remained stable (within analytical variance of 20%) during the transitory stage of plasma generation up to 24 h at 4°C or 4 h at 20°C before centrifugation of EDTA-whole blood and up to 5 days at -20°C after plasma separation. The variations in oxylipin concentrations did not correlate with storage time, storage temperature or stage of plasma generation. A significant increase of potentially lipoxygenase derived hydroxy-PUFA compared to immediate processing was only detected when samples were stored for longer times before centrifugation, plasma separation as well as freezing of plasma revealing residual enzymatic activity. Autoxidative rather than enzymatic processes led to a slightly increased concentration of 9-HETE when plasma samples were stored at -80°C for 15 months. Overall, we demonstrate that total plasma oxylipins are robust regarding delays during plasma generation and long-term storage at -80°C supporting the application of oxylipin profiling in clinical research.

1. Introduction

Eicosanoids and other oxylipins are oxygenated metabolites of polyunsaturated fatty acids (PUFA) which are formed via three different enzymatic pathways and autooxidation [1–3]. These pathways result in a diversity of products from different PUFA, e.g. cyclooxygenase (COX) conversion leads to prostanoids such as prostaglandins and thromboxanes [4], lipoxygenase (LOX) conversion leads via hydroperoxy-PUFA to mid-chain hydroxy- or multiple hydroxylated-PUFA [5] and conversion by cytochrome P450 monooxygenases (CYP) leads either to terminal (n) and n-1 hydroxy-PUFA or to epoxy-PUFA [6]. Epoxy-PUFA

are further metabolized to dihydroxy-PUFA by soluble epoxide hydrolase (sEH) [7]. Hydro(pero)xy-PUFA and prostaglandin-like structures, called isoprostanes (IsoP), are also formed during autoxidative processes [8,9]. The biology of free oxylipins has been investigated in numerous studies over the past decades [1–3]. For instance, PGE_2 , a prostaglandin formed from arachidonic acid (ARA, $\text{C}_{20:4}$ n6) via COX, is a potent mediator in the regulation of pain, fever and inflammation [4], e.g. by arterial dilation and increase of microvascular permeability leading to increased blood flow in the inflammation site or by interaction with EP1 receptor having an effect on neurons at the inflammation site resulting in hyperalgesia [10,11]. In contrast, epoxy-

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Abbreviations

AdA	adrenic acid
ALA	α -linolenic acid
ARA	arachidonic acid
BHT	butylated hydroxytoluene
CI	confidential interval
COX	cyclooxygenase
CV	coefficient of variation
CYP	cytochrome P450 monooxygenase
DGLA	dihomo- γ -linolenic acid
DHA	docosahexaenoic acid
DiHDPE	dihydroxy-docosapentaenoic acid
DiHETE	dihydroxy-eicosatetraenoic acid
DiHETrE	dihydroxy-eicosatrienoic acid
DiHOME	dihydroxy-octadecenoic acid
EA	ethyl acetate
EDTA	ethylenediamine-tetraacetic acid
EPA	eicosapentaenoic acid
EpDPE	epoxy-docosapentaenoic acid
EpETE	epoxy-eicosatetraenoic acid
EpETrE	epoxy-eicosatrienoic acid
EpOME	epoxy-octadecenoic acid
GLA	γ -linolenic acid
HDHA	hydroxy-docosahexaenoic acid
HEPE	hydroxy-eicosapentaenoic acid
HETE	hydroxy-eicosatetraenoic acid
HOAc	acetic acid
HODE	hydroxy-octadecadienoic acid
HOTrE	hydroxy-octadecatrienoic acid

IS	internal standard
isoP	isoprostane
LA	linoleic acid
LLOQ	lower limit of quantification
LOD	limit of detection
LOX	lipoxygenase
LT	leukotriene
Lx	lipoxine
MeOH	methanol
n3-DPA	n3-docosapentaenoic acid
NSAIDs	non-steroidal anti-inflammatory drugs
OA	oleic acid
oxo-ETE	oxo-eicosatetraenoic acid
oxo-ODE	oxo-octadecadienoic acid
oxo-OTrE	oxo-octadecatrienoic acid
PG	prostaglandin
PUFA	polyunsaturated fatty acid
QS	quality standard
RBC	red blood cells
Rv	resolvin
SEH	soluble epoxide hydrolase
SPE	solid phase extraction
SPM	specialized pro-resolving lipid mediator
<i>t</i> -AUCB	<i>trans</i> -4-(4-(3-adamantan-1-yl-ureido)-cyclohexyloxy)-benzoic acid
TriHODE	trihydroxy-octadecadienoic acid
TriHOME	trihydroxy-octadecenoic acid
Tx	thromboxane
ULOQ	upper limit of quantification

PUFA formed via CYP from ARA, eicosapentaenoic acid (EPA, C20:5 n3) and docosahexaenoic acid (DHA, C22:6 n3) have anti-inflammatory properties [12]. Epoxy-PUFA are also involved in several biological processes like vasodilation, angiogenesis and hypertension [13]. However, epoxy-PUFA are rapidly metabolized by SEH to their corresponding dihydroxy-PUFA which are less active [13,14].

Several studies investigated the modulation of oxylipin synthesis via nutrition or therapeutic treatment. Nutritional intervention by supplementation of n3-PUFA on a Western diet leads to a shift in the relative proportions of n3- and n6-PUFA influencing the oxylipin profile due to variable affinity of the PUFA metabolizing enzymes to the various PUFA and changes in the substrate availability [15–19]. The expression and/or activity of enzymes involved in the ARA cascade can further be modified by drug intervention leading to altered oxylipin profiles [1]. For instance, COX can be inhibited competitively by non-steroidal anti-inflammatory drugs (NSAIDs) or in case of the NSAID aspirin irreversibly through acetylation of serine at the active enzyme site [11,20]. Moreover, food derived secondary products like polyphenols can affect the enzyme activity resulting in altered oxylipin patterns [1]. For example, the activity of CYP can be altered *in vitro* by the polyphenol apigenin [21] and the activity and the expression of COX-2 can be influenced by resveratrol, hopeaphenol and apigenin [22].

The influence of these potent lipid mediators on health and disease as well as the interaction with nutrition or drugs have been investigated in numerous clinical studies. However, the results can be massively affected by (unsuitable) sample handling, e.g. artificial formation of oxylipins during sample preparation, ion suppression due to insufficient removal of interfering matrix [1,23–25] or inefficient extraction of oxylipins from biological samples [1].

Besides analytical challenges, the stability of oxylipins is crucial because samples are often stored for different periods of time prior to analysis in daily clinical routine or longitudinal studies. However, only few reports exist on the influence of the transitory stage between blood

collection and plasma generation on the oxylipin profile. First studies revealed that the apparent pattern of free oxylipins changes depending on storage procedures of whole blood [22,26] or plasma [27]. However, the reported results are conflicting, e.g. Dorow et al. found all detectable oxylipins being stable in EDTA-whole blood up to 120 min at 4 °C [26], while Willenberg et al. showed reduced concentrations of hydroxy-PUFA at storage times longer than 60 min at 4 °C [22].

Similarly, little is known about the impact of storage conditions on the profile of total oxylipins. However, the data are urgently needed since the major part of epoxy- and hydroxy-PUFA as well as isoprostanes are found to be esterified in lipids [28,29]. Total oxylipins might be a good option in the field of biomarker discovery as they represent the plasma oxylipin pattern, might be biologically active and their levels fluctuate depending on lipoprotein concentration and composition [1].

In the present study we employed a comprehensive liquid chromatography-tandem mass spectrometry (LC-MS/MS) method covering 133 analytes to evaluate the sample preparation/storage induced effects on the pattern of plasma oxylipins. We investigated the efficacy of different additives to prevent artificial formation of oxylipins during sample preparation. Additionally, we monitored the impact of different storage times and temperatures at different stages of plasma generation, which are representative for current practices in clinics, on the apparent total plasma oxylipin concentrations. Finally, we examined the long-term stability of total oxylipins in plasma stored at –80 °C during a period of 15 months.

2. Materials and methods

2.1. Chemicals

The analyte standards 10-HODE, 12-HODE, 15-HODE, 13-oxoOTrE, 9,10,11-TriHOME, 9,12,13-TriHOME, 9,10,13-TriHOME, 9,10,11-

TriHODE, 9,12,13-TriHODE and 9,10,13-TriHODE were purchased from Larodan (Solna, Sweden). All other oxylipin standards and deuterated internal standards were bought from Cayman Chemical (local distributor Biomol, Hamburg, Germany). LC-MS grade acetic acid, acetonitrile, *iso*-propanol and methanol (MeOH) were obtained from Fisher Scientific (Schwerte, Germany). HPLC grade *n*-hexane was purchased from Carl Roth (Karlsruhe, Germany) and HPLC grade ethyl acetate was purchased from VWR (Darmstadt, Germany). The ultrapure water ($> 18 \text{ M}\Omega\cdot\text{cm}$) was generated by the Barnstead Genpure Pro system from Thermo Fisher Scientific (Langensfeld, Germany).

2.2. Generation of the quality standard (QS) plasma

Human EDTA-blood was collected from 4 to 6 healthy male and female individuals aged between 25 and 38 years. The blood was centrifuged ($1200 \times g$, 15 min, 4°C), the collected plasma supernatants were pooled, aliquoted and immediately stored at -80°C as quality standard (QS) plasma.

2.3. Calibration

A wide range of oxylipins from different structural classes and derived from different precursor fatty acids (ARA, EPA, DHA, dihomo- γ -linolenic acid (DGLA, C20:3 n6), adrenic acid (AdA, C22:4 n6), n3- and n6-docosapentaenoic acid (DPA, C22:5 n3/n6), γ -linolenic acid (GLA, C18:3 n6), α -linolenic acid (ALA, C18:3 n3), linoleic acid (LA, C18:2 n6) and oleic acid (OA, C18:1 n9)) were selected for calibration. Only alkali stable prostanoids, such as B-ring or F-ring prostaglandins, were included in the calibration. For the quantification of oxylipins the deuterated internal standards $^2\text{H}_4$ -6-keto-PGF $_{1\alpha}$, $^2\text{H}_4$ -8-*iso*-PGF $_{2\alpha}$, $^2\text{H}_4$ -PGF $_{2\alpha}$, $^2\text{H}_5$ -RvD2, $^2\text{H}_{11}$ -8,12-*iso*-iPF $_{2\alpha}$ -VI, $^2\text{H}_5$ -LxA $_4$, $^2\text{H}_5$ -RvD1, $^2\text{H}_4$ -PGB $_2$, $^2\text{H}_4$ -LTB $_4$, $^2\text{H}_4$ -9,10-DiHOME, $^2\text{H}_{11}$ -11,12-DiHETrE, $^2\text{H}_6$ -20-HETE, $^2\text{H}_4$ -13-HODE, $^2\text{H}_4$ -9-HODE, $^2\text{H}_8$ -15-HETE, $^2\text{H}_3$ -13-oxo-ODE, $^2\text{H}_8$ -12-HETE, $^2\text{H}_8$ -5-HETE, $^2\text{H}_4$ -12(13)-EpOME, $^2\text{H}_{11}$ -14(15)-EpETrE, $^2\text{H}_7$ -5-oxo-ETE, $^2\text{H}_{11}$ -8(9)-EpETrE were used. Before pipetting of the calibration standards, purity and concentration of all analyte standards were controlled according to Hartung et al. [30]. The preparation of the calibration series is described in detail in the Supporting Information (Tables S1 and S2, Fig. S1). Validation criteria of the European Medicines Agency (EMA) guidelines for bioanalyses were considered during method development [31].

2.4. Preparation of samples for storage assays

Short-term transitory storage assay: Blood from 4 healthy volunteers

aged 25–30 years was collected in EDTA-monovettes (S-Monovette K3E, 02.1066.001, Sarstedt, Nümbrecht, Germany). The subjects did not take NSAIDs. Blood from each individual was pooled, aliquoted and submitted to different treatments before final storage at -80°C (Table 1). “Best case” samples were immediately centrifuged (10 min, 4°C , $1200 \times g$), the plasma was collected, snap-frozen in liquid nitrogen and stored at -80°C until further analysis. “Vortex” samples were strongly shaken (Vortex Genie 2, Scientific Industries (local distributor Carl Roth, Karlsruhe, Germany) max. intensity) for 1 min directly after blood withdrawal, centrifuged (10 min, 4°C , $1200 \times g$), the plasma was frozen in liquid nitrogen and stored at -80°C until further analysis. The influence of storage conditions was investigated in three different ways:

1. Whole blood was stored at room temperature (20°C) or in the fridge (4°C) for different time periods, centrifuged plasma was collected and stored at -80°C until analysis.
2. Whole blood was directly centrifuged, stored at 4°C for different periods of time, plasma was collected and stored at -80°C until analysis.
3. Whole blood was directly centrifuged, plasma was collected and temporarily stored at 4°C or at -20°C for different time periods and finally stored at -80°C until analysis.

Additionally, a “worst case” sample was prepared that combines the longest time periods of all three storage conditions described above. Samples from each individual were prepared and analyzed separately together with two QS plasma samples as a quality control.

Long-term storage assay: The human EDTA-plasma used for long-term storage experiments was bought from Etablissement Français du Sang (Saint-Denis, France; pool of 50 donors) aliquoted and stored at -80°C until analysis. The samples were prepared in triplicates together with 3 QS plasma samples as a quality control. In the first 6 months of the long-term storage experiment plasma samples were prepared and analyzed every month and thereafter every three months (month 9, 12 and 15).

2.5. Sample preparation and LC-ESI(-)-MS/MS analysis

Human plasma samples were extracted using solid phase extraction (SPE) following protein precipitation and alkaline hydrolysis as described [32] and in detail in the SI. Samples were analyzed by means of LC-ESI(-)-MS/MS (Table S3) as described [33,34].

In order to investigate the effects of the compounds included in the antioxidant mixture each compound (butylated hydroxytoluene, BHT

Table 1

Overview of the sampling design to investigate the influence of storage at transitory stages on the oxylipin pattern. Blood from 4 individuals was collected into EDTA tubes, aliquoted and submitted to different subsequent treatments before final storage at -80°C . Best case samples were immediately centrifuged and frozen. Other samples were stored at room temperature or at 4°C for different time periods before centrifugation. After centrifugation samples were stored at 4°C without removing the plasma supernatant and at 4°C as well as room temperature after plasma separation. Additionally, one sample from each individual was vigorously shaken “vortex” for 1 min to provoke hemolysis.

	Sample collection	Vortexing	Storage before centrifugation		centrifugation	Storage after centrifugation			Storage at – 80°C
			20°C (RT)	4°C (fridge)		Plasma NOT separated 4°C	Plasma separated 4°C -20°C		
Best case (directly -80°C)		-	-	-		-	-	-	
Storage before centrifugation		-	1 h, 2 h, 3 h	-		-	-	-	
		-	-	1 h, 8 h, 24 h		-	-	-	
Storage after centrifugation		-	-	-		1 h, 2 h	-	-	
		-	-	-		-	1 h, 2 h, 8 h, 24 h	-	
		-	-	-	-	-	8 h, 24 h, 3 d, 5 d		
		-	-	-	-	1 h	3 d		
Shaking of sample		1 min	-	-		-	-	-	
Worst case		-	3 h	24 h		2 h	2 h	5 d	

and EDTA, each 0.2 mg/mL and indomethacin and *trans*-4-(4-(3-Adamantan-1-yl-ureido)-cyclohexyloxy)-benzoic acid, *t*-AUCB, each 100 μ M) was added individually and in combination to QS plasma samples.

2.6. Data analysis

Inter-individual analyte variance in oxylipin patterns [1,19] was compensated by normalizing the oxylipin level against the respective oxylipin concentration in the “best case” samples (i.e. directly processed samples) determined in triplicate for each subject. The results are shown as mean (%) \pm 95% confidence interval (CI). Normal distribution was shown using the Shapiro-Wilk test. Outliers were identified using the ROUT (Robust regression and OUTlier removal, maximum false discovery rate (Q) = 1%) outlier test and removed. The variability of all conditions was assessed by an unsupervised multivariate analysis, a principal component analysis (PCA). The differences between best case and storage conditions were determined by one-way ANOVA following Tukey post-test. *p* values < 0.05 were considered significant.

Long-term storage data were evaluated firstly by controlling if the concentrations were comprised within a range of acceptable analytical variance of \pm 30% relative to month 1 of the monitoring. Then data were evaluated using linear regression model for each oxylipin. The hypothesis of residuals independence, normality and homogeneity was tested to validate the linear models (using Durbin-Watson test, Shapiro-Wilk test and non-constant error variance test, respectively). The significance of the slope of each linear regression model was calculated with a *t*-test, *p*-values < 0.05 were considered significant. For the oxylipins, which show a significant slope, the trend line was inserted into the respective diagram.

Statistical analyses were performed using GraphPad Prism software (version 6.0, San Diego, CA; USA), R software or SIMCA (version 14,

Umetrics). All other calculations were done with Excel Microsoft Office (version 365, Redmond, WA, USA).

3. Results

3.1. Effects of additives on the oxylipin pattern

The addition of BHT before sample preparation yielded significantly lower apparent concentrations of hydroxy-PUFA (Fig. 1A; Table S4) whereas levels of epoxy-PUFA were mostly unaffected (Fig. 1B, Table S4). For EDTA no effects on the plasma oxylipin pattern were observed (Fig. 1). Similarly, the enzyme inhibitors indomethacin (COX-1/-2) and *t*-AUCB (sEH) did not change the apparent oxylipin pattern (Fig. 1). The results obtained following addition of an antioxidant mixture containing all four tested additives (BHT, EDTA, indomethacin and *t*-AUCB) were consistent with the results yielded with BHT addition alone.

3.2. Oxylipin concentrations in plasma

Quality standard (QS) plasma was prepared and analyzed with each data set. The concentrations of total oxylipins in QS plasma are presented in the Table S5. In this pooled human plasma 78 analytes could be quantified in the range of 150 \pm 40 pM (11,12-DiHETE and 14,15-DiHETE) to 186 \pm 53 nM (9(10)-Ep-stearic acid). The LLOQ in plasma ranged from 5 pM (9,10-DiHOME) to 500 pM (PGF_{3 α} or 8,15-DiHETE) for most of the analytes. Only for 15-F_{3t}-IsoP, 13- γ -HOTrE, 19-HETE, 17-oxo-DPA (n3) and 17-oxo-DHA the method was less sensitive (LLOQ 1.25–5 nM). Regarding intra-day and inter-day variance, for most of the quantified analytes the coefficient of variation (CV) was < 20% and thus slightly higher than for the determination of free oxylipins [35]. For epoxy-PUFA high variations of > 30% were observed.

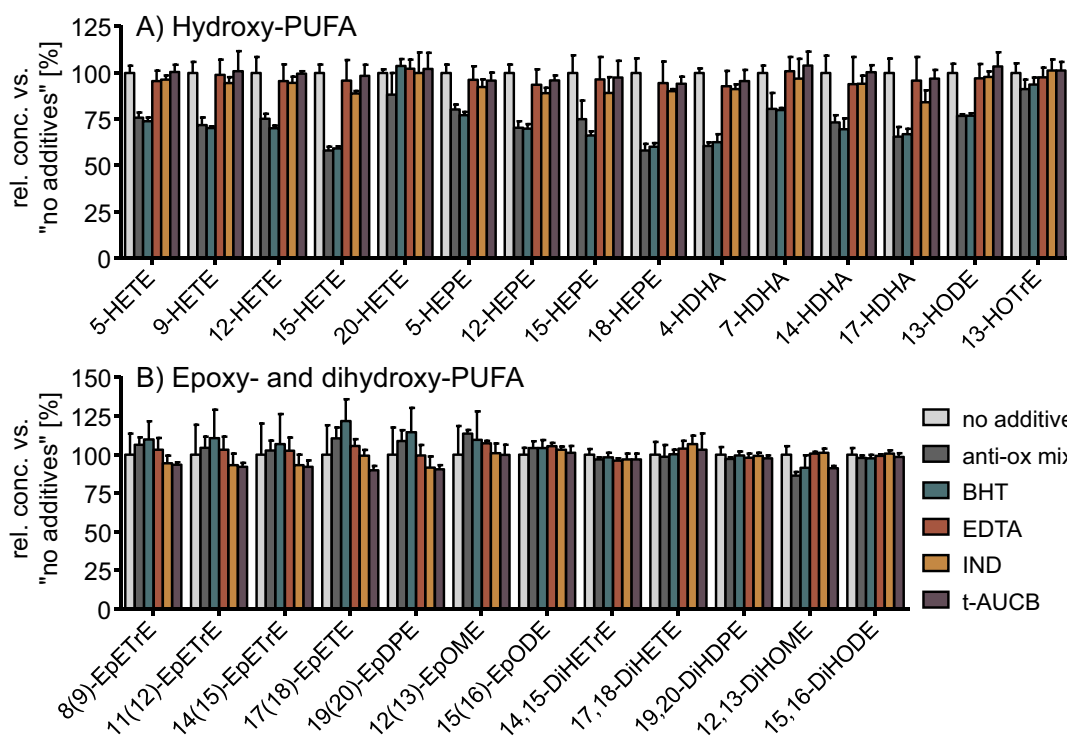


Fig. 1. Effects of additives on the apparent oxylipin pattern. Shown are relative oxylipin concentrations of a representative set of analytes using different additives during sample preparation (mean \pm SD; *n* = 4). Samples were prepared using no additives, butylated hydroxytoluol (BHT), ethylenediamine-tetraacetic acid (EDTA), indomethacin (IND) and the sEH inhibitor *t*-AUCB, respectively or a mix containing all additives (anti-ox mix). Relative concentrations were calculated against the mean analyte concentration obtained from sample preparation without additives (no additives). Statistical differences between “no additive” and different additives were evaluated by two-way ANOVA followed by Bonferroni post-test (Table S4).

3.3. Transitory stage of plasma generation

In the best case plasma samples 78 oxylipins could be quantified with concentrations ranging from 149 ± 54 pM (14,15-DiHETE) to 158 ± 65 nM (9(10)-Ep-stearic acid, Table S6). The concentrations of all detected oxylipins at all time points can be found in the SI (Table S6). The PCA, unsupervised multivariate analysis, shows the variability of the all dataset ($R^2X = 0.799$ and $Q^2 = 0.506$, Fig. S2). As shown in the score plot (Fig. S2 A), the condition “worst case” is the main contributor of the variability of the dataset (i.e. concentrations of the 78 oxylipins) on the first component that brings 48% of the variability. On the second component bringing 19% of the variability, the effect of “vortex” seems to be also significant. The loading plot (Fig. S2 B) reveals that the condition “worst case” mostly increase the concentration of hydroxy-PUFAs (e.g. 5-HETE, 20-HDHA, ...) whereas the “vortex” affects particularly all epoxy-PUFAs of the dataset. Among all these oxylipins, several oxylipins were selected which represent the four branches of the arachidonic acid cascade [1,2] and can therefore be used to study the effect of different storage conditions on the oxylipin profile. The influence of transitory stage after blood collection until storage of plasma at -80°C on the oxylipin pattern in plasma is shown exemplarily as fold change relative to immediate processing for a representative set of oxylipins (Fig. 2). The concentration of most of the representative analytes did not change markedly at the various storage conditions. The levels of the products derived from LOX catalyzed reactions (such as 5-, 12- and 15-HETE) and of the presumably autoxidatively formed products (such as 9-HETE and 5(R,S)-F_{2t}-IsoP) were slightly (1.2–1.5 fold) increased when plasma was stored at 4°C after centrifugation and > 1.5 fold elevated for the worst case scenario (Fig. 2). The epoxy-PUFA concentrations were generally increased at prolonged storage times at elevated temperatures in comparison to the best case scenario. These trends were also reflected by the mean \pm 95% CI of the concentrations for representative oxylipins derived from ARA, EPA, DHA, LA and ALA calculated against concentration in the best case sample (relative concentrations, Fig. 3, Figs. S3–8). 5-HETE, 12-HETE and 15-HETE reached the highest levels in the worst case sample (1.8–3.5-fold increase) which were also significantly different

from the best case sample (Fig. 3A–C). This accumulative effect towards worst case and the significant difference of the concentrations compared to best case could also be observed for 5-, 12- and 15-LOX products derived from other PUFA (Figs. S3–6, Table S6). For 14(15)-EpETrE no significant changes in the concentrations could be detected at any storage condition, however the variance was massively increased, e.g. when plasma was stored for 1 h or 6 h at 4°C (Fig. S9). These strong variations of the concentrations of 14(15)-EpETrE during different storage conditions (Fig. 3F) were also detected for other epoxy-PUFA (Fig. S7). Levels of the isoprostane 5(R,S)-5-F_{2t}-IsoP varied in a similar range (Figs. 2 and 3D, Fig. S8) while dihydroxy-PUFA such as 14,15-DiHETE were not influenced by the storage (Figs. 2 and 3E, Fig. S7).

3.4. Long-term storage of plasma

In plasma samples used to evaluate the effect of long-term storage (at -80°C , up to 15 months) on the stability of different oxylipin types 74 oxylipins could be quantified (Table 2, Fig. S10). Considering that an analytical variance of 20% up to $\pm 30\%$ is acceptable, 69 oxylipins (93% of the quantified oxylipins) were considered to be stable during the 15 months of monitoring (Table S7). Nevertheless, the concentration of some oxylipins changed over time. On the one side, the concentration of 17 oxylipins (hydroxy-PUFAs) significantly increased (Table 2, left hand side, highlighted in grey) among which 13-HODE and 9-HETE had the highest coefficients of slope. When considering the difference between month 15 and month 1, the difference of plasma concentration was more pronounced for 9-HETE (+25%) than for 13-HODE (+7%). Importantly, 9-HETE and 8,15-DiHETE were the only two oxylipins for which the change of the concentrations over the investigated period exceeded the threshold of analytical variance ($\pm 30\%$, Fig. 4). Of note, the concentration of the isoprostane 5(R,S)-F_{2t}-IsoP remained stable over time (non-significant coefficient of slope and concentrations within the range of $\pm 30\%$). On the other side, the concentration of 8 oxylipins significantly decreased during the 15 months of monitoring (Table 2, right hand side, highlighted in grey). These oxylipins are all derived from the CYP pathway and 15(16)-

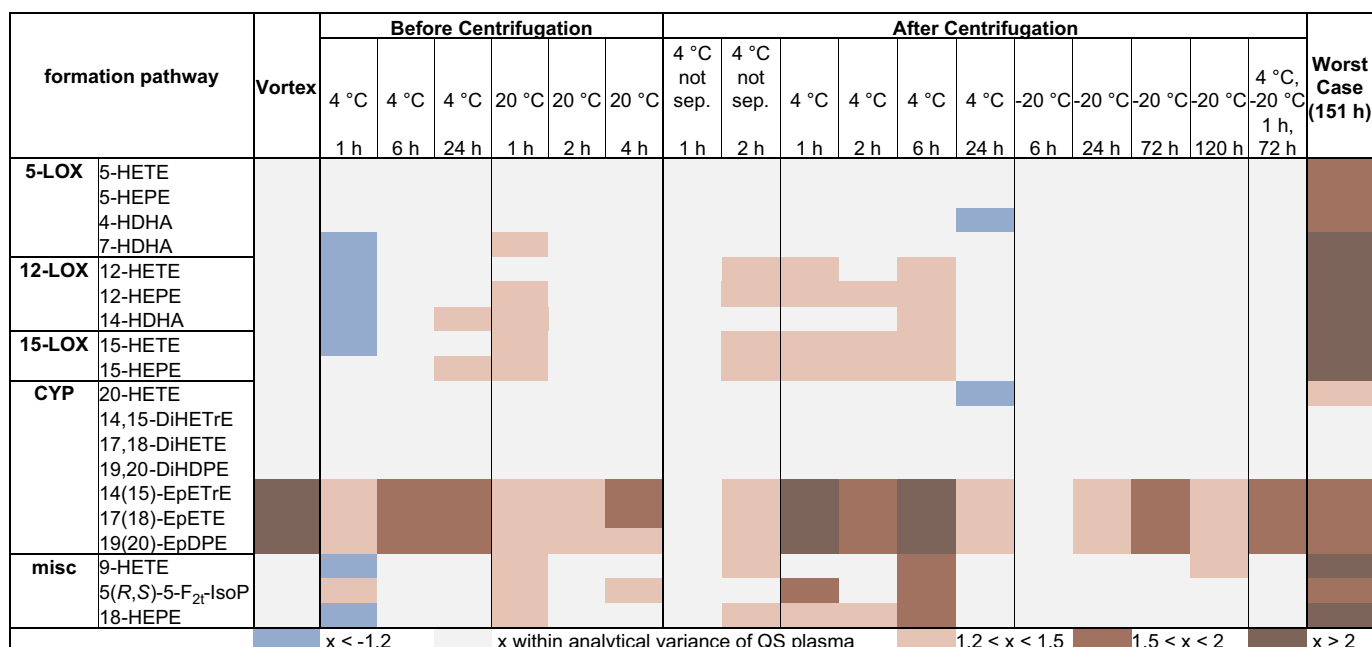


Fig. 2. Effects of different storage conditions on the total oxylipin concentration. The heatmap shows the fold change of the mean concentration for representative analytes relative to mean concentration of best case (processed immediately). Marked in grey are samples within the analytical variance ($\pm 20\%$) of QS plasma. Blue represents a decrease of > 1.2 -fold against the “best case”. An increase is highlighted in the different shades of red (light red 1.2–1.5-fold; red 1.5–2.0-fold; dark red > 2 -fold). (For interpretation of the references to colour in this figure legend, the reader is referred to the Web version of this article.)

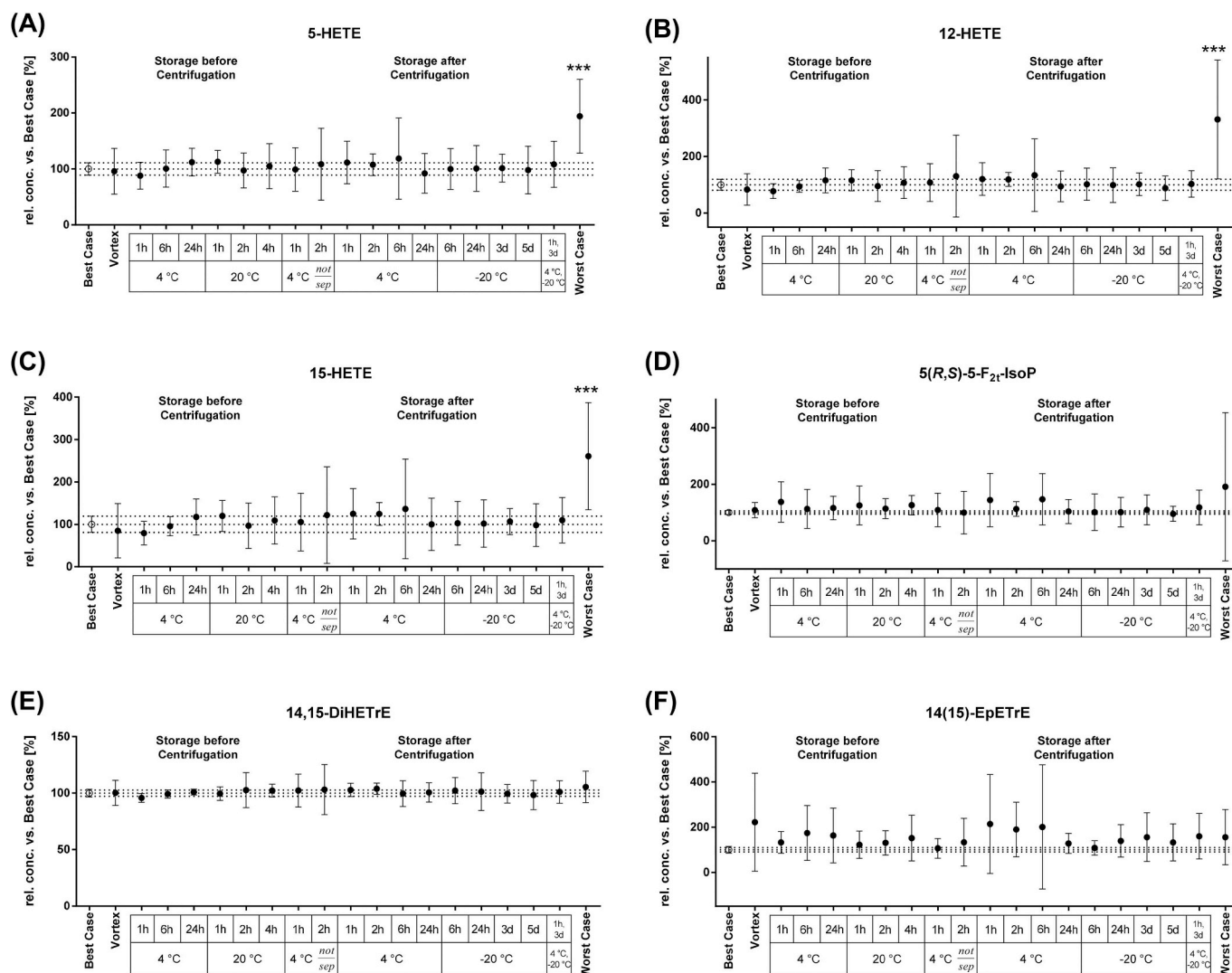


Fig. 3. Stability of total oxylipins during plasma generation with different transitory storage times. The relative concentrations of selected ARA derived oxylipins (A) 5-HETE, (B) 12-HETE, (C) 15-HETE, (D) 5(R,S)-5-F_{2t}-IsoP, (E) 14,15-DiHETrE and (F) 14(15)-EpETrE were calculated against the concentration of the best case. Shown are mean \pm 95% CI (n = 4–12). The dotted lines mark the 95% CI of the best case scenario. Statistical differences between best case and different storage conditions were evaluated by one-way ANOVA followed by Tukey post-test (**p < 0.01, ***p < 0.001). The data for oxylipins derived from other precursor PUFA (ARA, EPA, DHA, ALA, LA) can be found in the SI.

EpODE as well as 12,13-DiHOME had the lowest coefficients of slope. When considering the difference between month 15 and month 1, the plasma concentrations of 15(16)-EpODE and 12,13-DiHOME decreased by 21% and by 14%, respectively. Finally, 8(9)-EpETE was the only oxylipin which exceeded the threshold of analytical variance (\pm 30%, Fig. 4).

4. Discussion

Oxylipins are formed from polyunsaturated fatty acids which can easily be oxidized. Therefore, in the analysis of oxylipins in biological samples such as blood particular attention should be paid to their stability during plasma generation, storage and sample handling. Only a few studies have been published investigating the influence of the plasma generation procedure and long-term storage on the profile of oxylipins [22,26,27]. However, these studies only evaluated free, i.e. non-esterified oxylipins. A major part of oxylipins occurs esterified in biological samples, e.g. bound in lipids [28,36] and a large number of studies utilizes the total oxylipin pattern to understand the biology of the oxylipins [1,18,22].

Our study is the first one investigating the stability of total oxylipins with respect to sample collection, preparation and storage. We assessed the effect of different additives prior to sample preparation, the effect of different duration and temperature during plasma generation as well as the effect of long-term storage on a large pattern of oxylipins using one of the most comprehensive targeted metabolomic platforms (quantitative analysis of > 133 oxylipins) available.

Influence of additive addition prior to sample preparation. Additives are commonly added before analytical sample preparation to avoid degradation and artifact formation [22,33,37]. Indeed, the addition of BHT at the beginning of sample preparation resulted in a reduction of apparent hydroxy-PUFA concentrations in comparison to samples prepared without additives. The antioxidant BHT reduces peroxy radical oxidation of PUFA [38] and is therefore commonly used to quench radical catalyzed reactions [39] resulting in a reduction of autoxidative processes. The autoxidation of PUFA is initiated by free radical hydrogen abstraction at a bis-allylic position resulting in a hydroperoxy-PUFA that is reduced to the corresponding hydroxy-PUFA. In case of ARA 8-, 9-, 11-, 12- and 15-H(p)ETE can be formed [40] whereas for EPA hydrogen is primarily abstracted at positions C7, C10, C13 or C16

Table 2

Slopes coefficients (left: positive slope, right: negative slope) and associated p-value from the linear regression models for each oxylipin. Oxylipins with a significant evolution ($p\text{-val} < 0.05$) during the long-term storage are highlighted in grey and sorted by the coefficient of slope.

Oxylipins	Coefficient of positive slope	p-value	Oxylipins	Coefficient of negative slope	p-value
13-HODE	2.0440	0.0055	15(16)-EpODE	-0.8775	0.0345
9-HETE	0.9167	0.0107	12,13-DiHOME	-0.3957	0.0068
12-HETE	0.6325	0.0136	8(9)-EpETE	-0.0458	0.0124
11-HETE	0.5885	3.00E-04	20-HETE	-0.0440	0.0151
8-HETE	0.4874	3.00E-04	20-HEPE	-0.0359	0.0247
8-HDHA	0.4538	0.0123	19,20-DiHDPE	-0.0236	0.0058
17-HDHA	0.4276	0.0012	14(15)-DiHETrE	-0.0087	0.0025
15-HETE	0.3777	0.0175	11(12)-DiHETE	-0.0021	0.0108
15(S)-HETrE	0.2190	0.0304	12(13)-EpOME	-1.1686	0.0548
14-HDHA	0.2183	0.0248	5(6)-EpETrE	-0.5579	0.4088
9-HEPE	0.2018	0.0028	9(10)-EpOME	-0.3766	0.3078
20-HDHA	0.1491	0.0275	9,10-DiH-stearic acid	-0.3451	0.2094
13-HDHA	0.1455	0.0011	5(6)-DiHETrE	-0.1522	0.1221
11-HDHA	0.1325	0.0091	14(15)-EpETrE	-0.1388	0.4754
16-HDHA	0.1096	0.0132	7-HDHA	-0.0959	0.0694
8,15-DiHETE	0.0461	0.0097	11(12)-EpETrE	-0.0953	0.4629
10-HDHA	0.0450	0.0309	9-HOTrE	-0.0688	0.2634
9(10)-Ep-stearic acid	3.6023	0.1841	19(20)-EpDPE	-0.0617	0.1646
9-HODE	0.4128	0.6896	9,10-DiHOME	-0.0605	0.1888
5-HETE	0.3128	0.0835	8(9)-DiHETrE	-0.0382	0.2585
21-HDHA	0.0624	0.2058	19-HEPE	-0.0370	0.0864
4-HDHA	0.0606	0.4082	12-HHTrE	-0.0369	0.4040
13-HOTrE	0.0539	0.1937	15-HEPE	-0.0338	0.1176
18-HEPE	0.0530	0.1619	9(10)-EpODE	-0.0305	0.0781
12-HEPE	0.0504	0.3281	12(13)-EpODE	-0.0280	0.1811
11-HEPE	0.0462	0.4821	10(11)-EpDPE	-0.0268	0.5585
15,16-DiHODE	0.0362	0.8049	8(9)-EpETrE	-0.0220	0.7249
8-HEPE	0.0282	0.2762	14(15)-EpETE	-0.0150	0.4343
5-HEPE	0.0213	0.3121	7,8-DiHDPE	-0.0137	0.5564
5(S)-HETrE	0.0169	0.0962	17(18)-EpETE	-0.0112	0.4341
16(17)-EpDPE	0.0135	0.5110	11(12)-DiHETrE	-0.0092	0.1581
4,5-DiHDPE	0.0117	0.7976	10,11-DiHDPE	-0.0066	0.1818
9,10-DiHODE	0.0040	0.4161	8(9)-DiHETE	-0.0057	0.1479
17(18)-DiHETE	0.0012	0.7127	16,17-DiHDPE	-0.0049	0.1034
13(14)-EpDPE	0.0003	0.9924	13,14-DiHDPE	-0.0038	0.2535
14(15)-DiHETE	0.0002	0.7934	5(R,S)-F2t-IsoP	-0.0030	0.5571
			22-HDHA	-0.0007	0.9718
			12,13-DiHODE	-0.0002	0.9839

[25,41]. Consistently, after addition of BHT we observed a reduction of almost all hydroxy-PUFA with a slight preference for 15-HETE and 18-HEPE whereas 20-HETE was not affected (Fig. 1).

Neither EDTA nor indomethacin nor *t*-AUCB influenced the apparent oxylipin concentrations. It is likely that protein precipitation with *iso*-propanol which is the first step during sample preparation is sufficient to remove residual enzyme activity in plasma, however inhibition of enzymes involved in oxylipin formation might be relevant for other samples like tissues or other sample preparation strategies. Indomethacin is a non-selective COX-1 and COX-2 inhibitor [42] and is added in order to suppress *ex vivo* formation of prostanoids. Since the majority of COX products is base labile, the effect of indomethacin was hard to deduce in our data set, and inhibition of COX seems to be less relevant for determination of total oxylipins in plasma. However, free oxylipin levels might be influenced by residual COX activity. The metabolism of epoxy-PUFA to vicinal dihydroxy-PUFA by sEH can be prevented by the use of inhibitors such as *t*-AUCB [43]. Particularly, in samples with high sEH activity such as liver or kidney tissue [44] the addition of an inhibitor before homogenization and lipid extraction can be relevant. EDTA can serve as a chelator of metal ions in particular of iron ions which promote lipid peroxidation [45] and of calcium ions which activate phospholipase A₂ [46]. However, it is poorly soluble in MeOH and thus may not be included in the additive mixture. Overall,

our results show that the different aspects of the sample preparation procedure may have a relevant impact on the apparent oxylipin concentrations. Particularly, the addition of antioxidants like BHT is crucial in order to minimize the artificial formation of oxylipins during sample preparation.

Stability of oxylipins during the transitory stage of plasma generation. Human whole blood contains in addition to the plasma/serum several blood cell types namely erythrocytes, leukocytes and platelets. Most of the enzymes of the ARA cascade are expressed in blood and immune cells. For instance, 5-LOX is expressed in activated polymorphonuclear leukocytes (PMNL) or monocytes [47,48]. In platelets active 12-LOX and COX-1 can be found [49,50] whereas 15-LOX can be expressed in macrophages [51]. Additionally, COX-2 is expressed in activated monocytes [52].

Particularly, platelets and thus 12-LOX metabolites are often considered to cause alteration in the apparent plasma oxylipin pattern through unsuitable plasma preparation and storage. Therefore, the required steps during the generation of plasma should be performed immediately in order to minimize *ex vivo* metabolism. In large study cohorts or daily clinical routine, direct processing of collected whole blood is often not possible resulting in longer periods of time during the transitory stage. Here, we demonstrate that the concentrations of all oxylipin classes remained almost stable during the transitory stage and

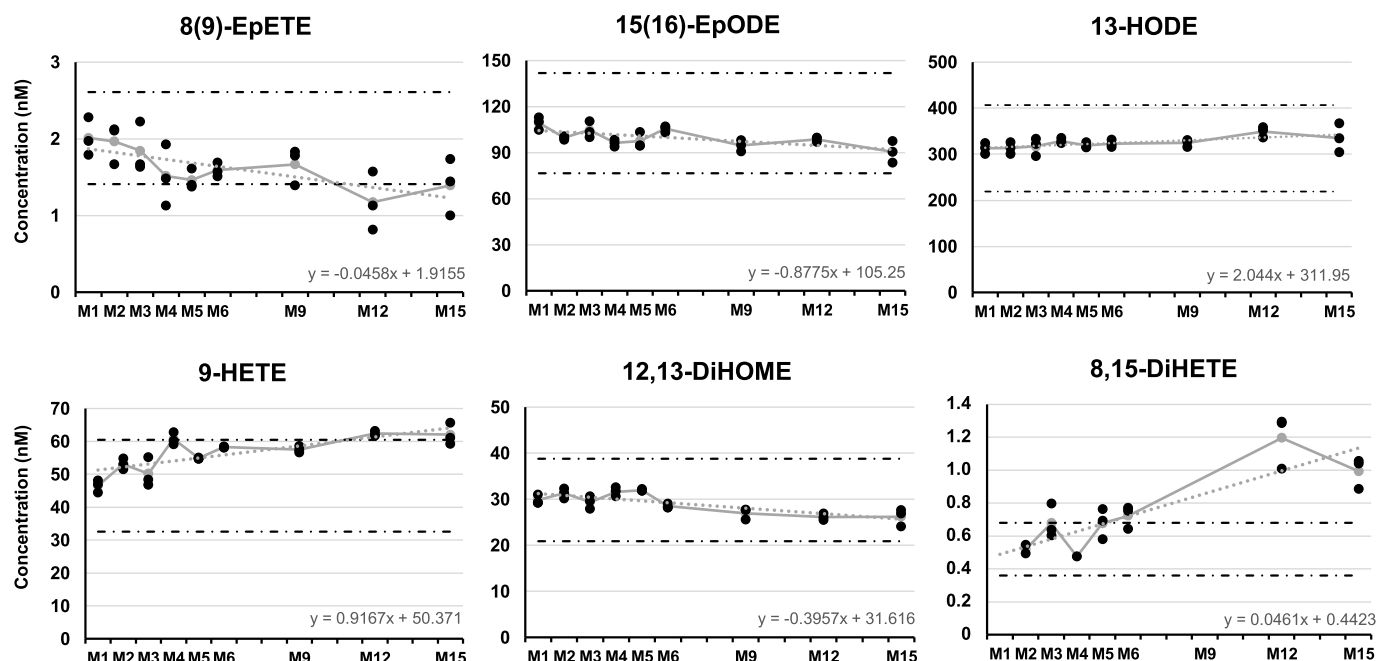


Fig. 4. Long-term storage evaluation over 15 months for oxylipins with significant slopes (positive and negative, $n = 25$). The black dotted lines mark the $\pm 30\%$ of acceptable analytical variance. Black dots represent the samples. Grey dots are the mean of samples by month and a grey line connects these means. The grey dotted lines are the straight linear regression with the mathematical equation shown near the name of oxylipins.

only drastic intervention in the storage conditions (as it was performed in the worst case) resulted in significantly increased oxylipin levels particularly of hydroxy-PUFA (Fig. 3, Figs. S3–8). The worst case included delays in all steps of plasma generation with a total duration of 151 h before freezing at -80°C . It should be noted that apart from the worst case scenario the highest effect of this transitory storage was an increase of epoxy-PUFA by factor 2. Even though a combination of different storage conditions affected the total oxylipin concentration, no clear correlation between storage time, temperature or stage of plasma generation and the total oxylipin concentration was observable. Nevertheless, some trends can be deduced. The concentrations of the 5-/12-/15-LOX metabolites derived from ARA, EPA and DHA were reduced when whole blood was stored at 4°C for 1 h compared to baseline and increased during 24 h. Additionally, the increased concentrations of products derived from 12- and 15-LOX when storing whole blood for 24 h at 4°C may be caused by platelet activation. Although the blood cells are separated from the plasma by centrifugation, residual LOX activity or autoxidation might also lead to increased concentrations of 12- and 15-LOX metabolites when samples were stored at 4°C after centrifugation before as well as after plasma separation. However, one would assume that this happens more in whole blood than in plasma. It can be assumed that (intact) platelets are efficiently removed by centrifugation at $1200 \times g$ for 10 min [53], too harsh centrifugation might also lead to platelet activation [54]. Furthermore, plasma generated from chilled whole blood, as it was performed in our study, has been reported to contain lower concentrations of platelet derived oxylipins due to possibly slowed enzymatic activity and/or cold-induced aggregation of platelets *ex vivo* leading to more efficient removal [55,56].

Additionally, unsuitable blood handling may cause hemolysis, i.e. the release of hemoglobin upon disruption or damage of erythrocyte membranes [57] which might lead to increased oxylipin concentrations e.g. by Fenton-type catalyzed autoxidation [55]. In case of the vortexed samples which was intended to simulate hemolysis no increase in the concentrations was observed. However, this may also indicate that the sample treatment was not sufficient to cause hemolysis.

The effects of storage temperature and time with regard to the pattern of free oxylipins have been previously described [22,26,27,58].

These studies revealed a clear effect of sample storage at temperatures above -80°C on the free oxylipin pattern. In a study by Jonasdottir et al. most of the free oxylipins were stable up to 120 min at 4°C in whole blood and plasma whereas 9-HETE increased after 60 min at 4°C . Also, the storage of whole blood at room temperature led to higher concentrations of 12-HETE and 12-HHTe after storing for 30 min [26]. Ramsden et al. also described the increase of 12-LOX and platelet derived oxylipins in whole blood at room temperature in a time dependent manner, whereas storage on ice for up to 2 h had no effect on oxylipin concentrations [58]. However, in Willenberg et al. the concentrations of 11-HETE, 15-HETE, PGF_{2 α} , 11(12)-EpETe and 14(15)-EpETe were reduced by half in plasma and whole blood after 60 min when stored at room temperature or on ice whereas other oxylipins remained stable [22]. In contrast, Jonasdottir et al. reported that several hydroxy-PUFA were significantly increased in plasma after 8 h at room temperature, while no significant differences could be observed at 6°C up to 24 h. 12-HETE was massively increased after 24 h at -20°C [27]. Of note, these studies differ regarding their used analytical method which influences the apparent oxylipin concentrations [22,59].

Although our results for total oxylipins indicate that oxylipins can be considered to be stable during the transitory stage, it cannot be ruled out that oxylipin levels might be affected in other studies. Especially the blood of non-healthy participants might have higher concentrations of released precursor PUFA or ARA cascade enzymes [1]. Thus, this blood samples might be more prone to storage induced changes. The only way to reduce the potential risk of an artificially changed oxylipin pattern is to perform all steps between blood withdrawal and freezing of the plasma samples as soon as possible and as comparable as possible between the study samples. This also contributes to lower variances of oxylipin concentrations close to the analytical variance. Though there was no significant increase in the concentrations during storage higher coefficients of variations were observed for some storage conditions. Storage of centrifuged plasma for 2 h without plasma separation and for 6 h after separation at 4°C resulted in coefficients of variations (CV) for hydroxy-PUFA being 10% higher than the respective analytical variance determined from the variance of the quality control plasma (Fig. S9) and storage for 1 h or 6 h at 4°C increased the CV of epoxy-PUFA. Of note, the increased variances of the epoxy-PUFA might also be due to

possible artificial formation of epoxy-PUFAs during sample preparation using a silica based solid phase extraction material [32]. Additionally, vortexing of samples (simulating hemolysis) increased the CV of many oxylipins. Interestingly, it seems that autoxidative processes do not contribute to increased variances (except for the worst case scenario) since the CV of the isoprostane 5(R,S)-F_{2t}-IsoP did not change. The higher variation with no change in the relative concentrations compelled us to conclude that the blood of the participants is differently affected by storage (Fig. S9, Table S6) [1]. This emphasizes the importance of a standardized method for plasma generation, storage and preparation to ensure a good comparability in clinical studies.

Oxylipin stability during long-term storage at -80 °C. Biological samples such as human plasma are usually stored at -80 °C until analysis to minimize artificial alteration of the oxylipin profile. In longitudinal studies with large cohorts, plasma samples are generated at different time points and thus are often stored for years before analysis. Hence, the storage stability of oxylipins is crucial for the comparability and validity of such studies. Indeed, basically almost all oxylipins were stable and the observed changes in the concentrations were within the analytical variance of ± 20 –30% (Fig. 4, Table 2, Fig. S10) which is in line with our previous observation on the stability of free oxylipins [1]. Autoxidatively rather than enzymatically formed products seem to be relevantly affected when plasma samples are stored for longer time periods at -80 °C. The concentration of 9-HETE exceeded the analytical variance over the span of 15 months probably due to peroxidation wherein first a hydroperoxide is formed which is subsequently reduced to the corresponding hydroxy-PUFA [60,61]. Interestingly, oxylipins whose concentrations showed a slight decreasing trend over time are mainly CYP-derived or CYP-derived secondary products like vicinal dihydroxy-PUFA (Fig. 4, Table 2, Table S7). However, the change was within the analytical variance, thus indicating that epoxy-PUFA, which are of high interest in biological studies due to their pronounced physiological activity, remain stable and were not hydrolyzed (non)enzymatically to their respective dihydroxy-PUFA in stored plasma.

In other long-term studies investigating the influence of storage on the pattern of mainly free oxylipins contradictory results were observed [26,27]. The storage of plasma at -80 °C for 6 months resulted in decreased levels of most eicosanoids [26] whereas storing of plasma at -80 °C for one year led to increased levels of hydroxy-PUFA and TxB₂ [27]. Barden et al. reported elevated levels of total (i.e. free and esterified) F₂-isoprostanes after 6 months of storage at -80 °C [62]. These findings which are different from our results might be again explained by the generation and the quality, i.e. its initial peroxide content, of the used plasma. Nevertheless, our results indicate that storage of plasma samples at -80 °C is suitable for total oxylipin analysis. This aspect of stability of oxylipins in properly stored plasma samples is another key point regarding their potential use as biomarkers in health and disease.

5. Conclusion

In our study we investigated the influence of different additives during sample preparation and the impact of the transitory stage during plasma generation as well as the effects of long-term storage of plasma on the pattern of total oxylipins in human plasma.

Our results demonstrate that the use of the antioxidant BHT reduced the artificial formation of hydroxy-PUFA highlighting the importance of standardized analytical methods for reliable and reproducible quantification of total oxylipins.

The levels of total oxylipins in plasma are stable during the transitory stage of plasma generation. Significant differences in the concentrations result only when delays occur in all steps, namely centrifugation of whole blood, plasma separation as well as freezing of the plasma. Storage of plasma at -80 °C for 15 months slightly increased autoxidatively formed products.

Overall, our results indicate that the total oxylipin pattern is – if

antioxidants are used during sample preparation – robust towards minor variations in plasma generation and long-term storage. As a consequence, it is possible to investigate the total oxylipin pattern in clinical samples and in prospective cohorts. Thus, using a targeted metabolomics approach as described here allows to generate biologically meaningful oxylipin pattern which can pave the route towards a mechanistical understanding of oxylipin biology and their role as biomarkers in diseases.

Declaration of competing interest

The authors declare no conflict of interest.

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Appendix A. Supplementary data

Supplementary data to this article can be found online at <https://doi.org/10.1016/j.talanta.2020.121074>.

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