

Analytical Methods

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3 1 **Communications**
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8 3 **Rapid assay of neopterin and biopterin in urine by wooden-tip electrospray**
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10 4 **ionization mass spectrometry**
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29 12 + Bi-cheng Yang and Fa-ying Liu contributed equally to the work, and should be considered as first
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31 13 authors.
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35 15 **Abstract** A rapid and sensitive method based on wooden-tip electrospray ionization mass spectrometry
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37 16 (WT-ESI-MS) has been established for the quantitative detection of neopterin and biopterin in urine with
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39 17 only little sample preparation. The limit of detections (LOD) for the analysis of neopterin and biopterin
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41 18 were determined to be 30 ng mL⁻¹ and 50 ng mL⁻¹ (S/N₃), respectively. Acceptable relative standard
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43 19 deviation (RSD) values (6.3~9.5%) and the recovery values (90~133.6%) were obtained for direct
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45 20 measurement of neopterin and biopterin in raw urine. Moreover, neopterin and biopterin were directly
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47 21 detected from 9 clinical urine samples by WT-ESI-MS. A single sample analysis was completed within a
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49 22 few minutes, indicating that the present WT-ESI-MS method is a promising strategy for the rapid analysis
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51 23 of clinical sample.
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55 25 **Keywords:** neopterin, biopterin, WT-ESI-MS, urine
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3 28 Neopterin (Neo) and biopterin(Bio) belong to a group of unconjugated pterins derived from guanosine
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5 29 triphosphate by guanosine triphosphate cyclohydrolase I. Neopterin and biopterin, occur normally in body
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7 30 fluids including urine. Neopterin is synthesized mainly by activated monocytes/macrophages after
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9 31 stimulation by the cytokine interferon-gamma (IFN- γ), which is released by natural killer cells and T-
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11 32 lymphocytes.¹ Neopterin is a useful biomarker for the intensity of the immune response mediated by Th-1
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13 33 type cells. Biopterin is produced by nonenzymatic oxidation of tetrahydrobiopterin. Synthesis also takes
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15 34 place in cells such as T-cells, B-cells, endothelium, smooth muscle cells, fibroblasts, and potentially in
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17 35 liver and kidney.^{2, 3} Recent research studies have focused on the detection and monitoring of
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19 36 concentration of neopterin and biopterin in human fluids as diagnostic markers for prognosis of a host of
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21 37 diseases and assessing treatment efficacy.⁴⁻⁷ Increasing levels of biopterin and neopterin in human serum
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23 38 and urine were reported in patients with some cancers.⁸ The ratio of urinary biopterin-to-neopterin in urine
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25 39 is an important marker for diagnosis of hyperphenylalaninemia, since hyperphenylalaninemia is caused not
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27 40 only by defective by phenylalanine 4 monooxygenase as an classical phenylketonuria (PKU), but also
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29 41 about 2% by tetrahydrobiopterin deficiency (BH4D) as atypical PKU,⁹ these patients require different
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31 42 treatments.¹⁰ Differential diagnosis is most commonly performed by analysis of urinary neopterin and
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33 43 biopterin.¹¹ Quantification of urinary neopterin and biopterin has been successful performed by high-
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35 44 performance liquid chromatography (HPLC) coupled with electrochemical, fluorescence or MS.¹²⁻¹⁵ Due
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37 45 to the complicated matrix, extensive sample pre-treatment, including extraction, pre-concentration, and
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39 46 chromatographic separation, etc., which can take tens of minutes or even hours is usually required. The
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41 47 cost of consumables, such as consumable kits for extraction of samples and solvents for sample extraction
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43 48 and chromatographic separation, is also relatively high. Therefore, development of novel assay methods
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45 49 that are simple, rapid, accurate and sensitive is highly beneficial to quantification of urinary neopterin and
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47 50 biopterin.

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53 52 Electrospray ionization mass spectrometry (ESI-MS) is a useful analytical tool for the analysis of complex
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55 53 mixtures, providing information on the molecular weights and chemical structures of the analytes. In
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57 54 conventional ESI, a sample solution is introduced into a capillary and usually with the assistance of gas. In
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59 55 the late 1990s, use of a copper wire as solid-substrate ESI emitter was firstly introduced by Shiea et al.¹⁶
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56 56 Recent non-capillary ESI techniques with solid substrates, such as metal needle,¹⁷ wooden tip,¹⁸ paper,¹⁹

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3 57 aluminium foil,²⁰ and other solid materials²⁰⁻²³ have been successfully developed as emitters for ESI and
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5 58 applied for analysis of various complex samples.
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10 60 In this study, a simple wooden-tip ESI-MS (WT-ESI-MS) was adopted for the quantitative determination
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12 61 of neopterin and biopterin in urine. The disposable wooden tips (purchased from Nanchang supermarket)
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14 62 used are cheap, are readily available, and can be directly mounted on commercial nano-ESI ion source
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16 63 device; the angle between wooden tip and the MS inlet was ninety degrees like previous methods.^{18, 25, 26}
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18 64 Briefly, sample solutions were loaded to the sharp tip-end by pipetting. Upon application of a high voltage
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20 65 (+3.5 kV) to the wooden tip, spray ionization was generated and mass spectrum was observed by a triple-
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22 66 quadrupole mass spectrometer (Waters xevo TQD). Furthermore, internal standard method by WT-ESI-
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24 67 MS for quantitation of trace amount of analytes in urine has been successfully confirmed in previous
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26 68 study.²⁶ Herein, the raw urine samples spiked with neopterin, biopterin, and tyrosine (as internal standard²⁷)
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28 69 were diluted with methanol. An aliquot of 2 μ L of the prepared sample solution was applied onto a
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30 70 wooden-tip for analysis. As shown in the MS spectrum (Fig. 1a) of raw urine with spiked neopterin (0.1
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32 71 ng/mL), biopterin (0.1 ng/mL), and tyrosine (0.1 ng/ml), the predominant peaks are ions of urea and/or
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34 72 creatinine. Because concentrations of urea and creatinine are very high in urine,²⁸ resulting in intensities
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36 73 of protonated neopterin (m/z 254) and biopterin (m/z 238) are relatively weak, thus their peaks are hardly
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38 74 seen in the same scale. However, ions of m/z 254, 238 and 182 were selected for MS/MS studies. The
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40 75 main fragments recorded at m/z 254 (Fig.1b) and m/z 238 (Fig.1c) were similarly generated in MS/MS
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42 76 experiments by loss of H₂O or/and NH₂CN from protonated neopterin and protonated biopterin due to their
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44 77 similar structures, the fragmentation pathways were shown in inset of Fig. 1. These MS/MS data were in
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46 78 agreement with previous results.²⁷ The peaks at m/z 165 and 136 in MS/MS could be produced by loss of
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48 79 H₂O and HCOOH from the protonated tyrosine, respectively (Fig.1d). The MS/MS experiments of
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50 80 neopterin, biopterin, and tyrosine were also confirmed with authentic compounds (Sigma, St. Louis, MO,
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52 81 USA). Therefore, the experimental data show that trace amounts of neopterin and biopterin in the urine
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54 82 samples can be rapidly detected using WT-ESI-MS.
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59 84 In selected-reaction monitoring (SRM) mode with selected reactions, m/z 254 \rightarrow 206, m/z 238 \rightarrow 220 and
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85 m/z 182 \rightarrow 136 were used for quantification of neopterin, biopterin, and tyrosine, respectively.²⁷ The

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3 86 calibration curves for quantitation of urinary neopterin and biopterin were constructed by averaging five
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5 87 sets of experimental data, while each set of data was obtained by applying samples containing different
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7 88 concentrations of the analytes (concentration of neopterin, biopterin in urine: 50, 100, 200, 500, 1000,
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9 89 2000, 5000 ng mL⁻¹) and a fixed amount of the internal standard (concentration of tyrosine in urine: 200
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11 90 ng mL⁻¹) onto disposable wooden tip. The internal standard was used to compensate variations in
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13 91 instrumental responses, which were mainly caused by different sample loadings and the use of different
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15 92 wooden tips. With tyrosine as the internal standard, the calibration curves of neopterin (Fig. 2a) and
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17 93 biopterin (Fig. 2b) were obtained with excellent linearities ($R^2 > 0.99$). The linear regression equations for
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19 94 the concentration ranges of neopterin (50–5000 ng mL⁻¹) and biopterin (50–5000 ng mL⁻¹) were $y =$
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21 95 $0.0028x + 0.6689$ and $y = 0.0015x + 0.3235$, respectively ($n = 5$). This linear range achieved is comparable
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23 96 to the HPLC-MS methods in previous studies.¹³
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28 98 To investigate the accuracy and precision of the WT-ESI-MS method in rapid quantitation of urinary
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30 99 neopterin and biopterin, raw urine samples with spiked analytes in low, medium, and high concentration
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32 100 ranges were assayed. Each sample was determined five times using disposable wooden tip, and the data
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34 101 obtained were averaged for comparison. As shown in table. 1, the accuracy and precision determined were
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36 102 in the range of 90~133.6% and 6.3~9.5%, respectively, which were comparable to the HPLC-MS studies.¹³
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38 103 The LOD of the assay was estimated as three times the signal-to-noise ratio (S/N). The LOD determined
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40 104 for neopterin and biopterin were experimentally found to be 30 ng mL⁻¹ and 50 ng mL⁻¹, respectively,
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42 105 which were suitable for assay of real samples.
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46 107 Clinic urine samples, which were collected from patients (from Jiangxi Provincial Neonatal Screening
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48 108 Center, all patients signed an informed consent for research purposes), were investigated in this study
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50 109 under the approval by the Ethics Committee of Jiangxi Provincial Maternal and Child Health Hospital. As
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52 110 shown in the clinical data (Table 2), neopterin and biopterin were successfully detected in 9
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54 111 hyperphenylalaninemic patients (6 with classical PKU; 3 with 6-pyruvoyl-tetrahydropterin synthase (PTPS)
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56 112 deficiency, the most common form of atypical PKU). Assay results of detection of Phe dried blood
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58 113 concentration by Neonatal Phenylalanine kits (PerkinElmer Wallac Inc, Turku, Finland) were shown in
59
60 114 Table 2. All patients have increased Phe concentrations (i.e., > cut-off level of 120 μ mol/L). Compared

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3 115 with classical PKU patients, PTPS deficiency patients showed significant lower biopterin-to-neopterin
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5 116 ratios; this findings are in good agreement with reported values for similar patients.²⁹ In addition, previous
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7 117 study showed that the biopterin-to-neopterin ratio decreased with age and severity in Alzheimer's Disease
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9 118 patients.³⁰

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13 120 A rapid, sensitive method based on wooden-tip electrospray ionization mass spectrometry (WT-ESI-MS)
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15 121 has been established for the quantitative detection of neopterin and biopterin in urine with only little
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17 122 sample preparation. The wooden tips used in WT-ESI-MS are cost-effective, are readily available, and can
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19 123 be directly coupled to various commercial mass spectrometers. The sampling of this method is very simple
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21 124 and convenient. Wooden-tip ESI allows direct sample loading, ionization with little sample preparation
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23 125 prior to MS analysis, providing a rapid way to obtain quantitative information on the neopterin and
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25 126 biopterin content in the clinical urine. The analytical performances, including the linear range, accuracy,
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27 127 precision, LOD of the method were well acceptable for analysis of clinical urine samples. The single
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29 128 sample analysis was completed within a few minutes, indicating that the present WT-ESI-MS method is a
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31 129 promising strategy for the rapid analysis of clinical sample. Further investigation will be performed to
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33 130 further optimize this technique for analysis of more small molecules in clinical samples.

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Figure Captions

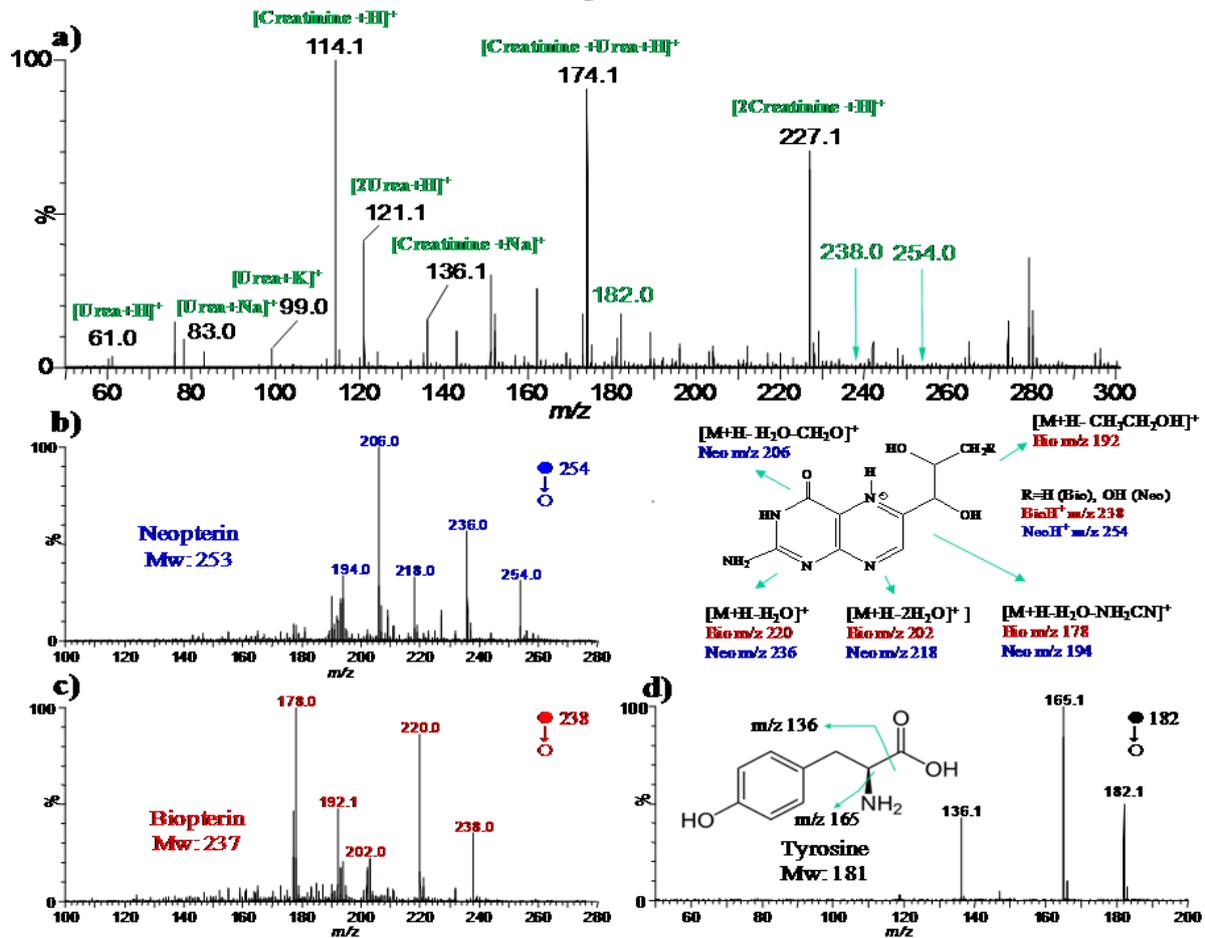
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Fig.1 a) Mass spectrum of raw urine with spiked neopterin ($0.1 \mu\text{g mL}^{-1}$), biopterin ($0.1 \mu\text{g mL}^{-1}$), and tyrosine ($0.1 \mu\text{g mL}^{-1}$); MS/MS mass spectra obtained for $0.1 \mu\text{g mL}^{-1}$ of (b) neopterin (c) biopterin and (d) tyrosine in raw urine, inserted structures shows the fragmentation pathways of these ions.

Fig. 2 Calibration curves obtained for (a) neopterin and (b) biopterin in urine

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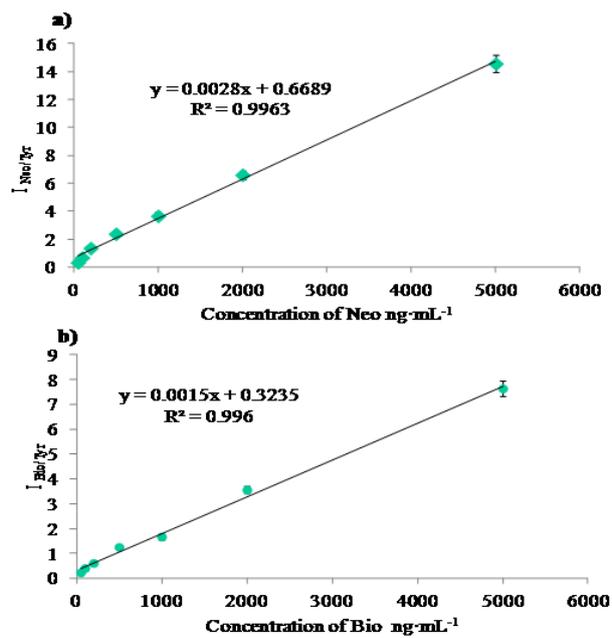
Figures



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185 Fig. 1

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188 **Fig. 2**

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Tables

Table 1. Experimental data for determination of accuracy and precision of the WT-ESI-MS method in quantitation of Neo and Bio in urine

Spiked ng mL ⁻¹	Detection ng mL ⁻¹		Accuracy %		RSD (n=5)	
	Neo	Bio	Neo	Bio	Neo	Bio
100	133.6±8.2	90.3±9.5	133.6	90	8.2	9.5
600	645.8±48	682.6±52	107.5	113.7	7.5	7.6
3000	2780±220	3320.6±209	92.7	110.6	7.9	6.3

198 Table 2. assay results for urine specimens from nine patients with Hyperphenylalaninemia
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Diagnosis	Age (years)	Bio ng mL ⁻¹ (n=3) ^a	Neo ng mL ⁻¹ (n=3) ^a	Ratio of Bio to Neo	Phe μmol L ^{-1b}
Classical PKU	4	95.2±5.7	112.1±25.6	0.85	311
Classical PKU	3	303.7±32.3	197.6±66.4	1.54	864
Classical PKU	4	101.7±11.1	135.4±30.4	0.75	326
Classical PKU	1	140.1±19.2	190.3±51.2	0.74	407
Classical PKU	5	83.2±10.9	154.9±28.8	0.54	302
Classical PKU	7	59.7±5.4	86.7±17.7	0.69	187
PTPS	9	55.4±9.1	120.0±24.1	0.46	216
PTPS	11	52.1±10.7	193.3±31.9	0.27	337
PTPS	14	52.0±7.6	182.3±5.9	0.29	198

200 ^a obtained by WT-ESI-MS.

201 ^b Phe dried blood concentration was obtained by Neonatal Phenylalanine kits.

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