

## **Liquid Sample Introduction for ICP-AES**

Measurement of Elemental Impurities in a Higher Daily Dose Drug Product by USP <232>/<233> using Ultrasonic Nebulization with ICP-AES Detection



#### USP <232>/<233>

On January 1, 2018 the U.S. Pharmacopeia (USP) enacted new criteria for element impurities in finished drug products. These criteria, detailed in USP <232>/<233>, recommend analysis of drug products for element impurities by either Inductively Coupled Plasma Atomic Emission Spectroscopy (ICP-AES) or Inductively Coupled Plasma Mass Spectrometry (ICP-MS).

Laboratories must measure impurities based on a J value for each drug product; drug products may be oral, parenteral (ex. intravenous, injection), or inhalation types. The J value of the drug is calculated based on an established permissible daily exposure (PDE), maximum daily dose (MDD) of the drug, and the dilution factor used in the sample preparation method. As a result of the J value calculation, drugs with a larger MDD require lower element impurity detection limits.



#### Liquid Sample Introduction for ICP-AES Ultrasonic Nebulization

An ultrasonic nebulizer is an accessory for ICP-AES that enables higher sample transport efficiency (versus a standard pneumatic nebulizer) to the ICP-AES plasma. This benefit can be helpful for detection of more difficult elements such as As, Cd, Pb, Hg, and TI.

This work describes the use of ultrasonic nebulization for ICP-AES detection of element impurities in aspirin, a drug with a higher daily dose than a low dose drug (ex. 1 tablet per day) such as an allergy or sleep aid medicine.



## Liquid Sample Introduction Ultrasonic Nebulization

In place of a regulated gas flow for generation of a liquid sample aerosol (pneumatic nebulization), liquid sample is pumped across a quartz plate with an underlying oscillating (piezoelectric) crystal.

The oscillations of the crystal will break up the liquid flow and cause formation of a sample aerosol. Ultrasonic nebulization is typically up to 10x more efficient (versus a conventional pneumatic nebulizer) for conversion of liquid sample into a useable aerosol.



#### U5000AT<sup>+</sup> Ultrasonic Nebulizer Dimensions and Weight



Width: 35.6 cm (14.0 in) Depth: 34.9 cm (13.7 in) Height: 25.4 cm (10.0 in)

Weight: 12.3 kg (27 lbs)



#### Teledyne CETAC U5000AT<sup>+</sup> Ultrasonic Nebulizer Front View



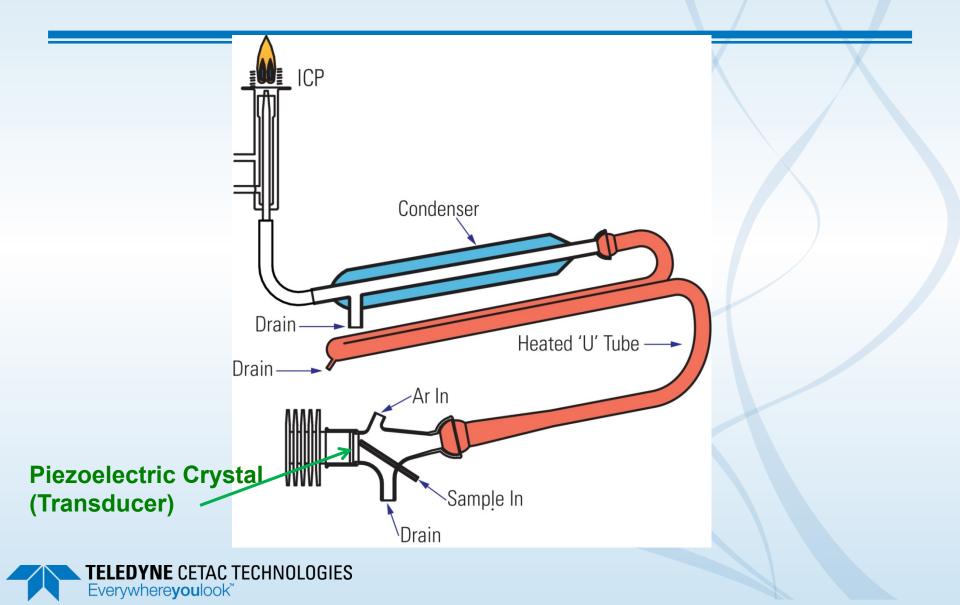


#### Teledyne CETAC U5000AT<sup>+</sup> Ultrasonic Nebulizer Back View





#### **Teledyne CETAC U5000AT<sup>+</sup> Schematic**



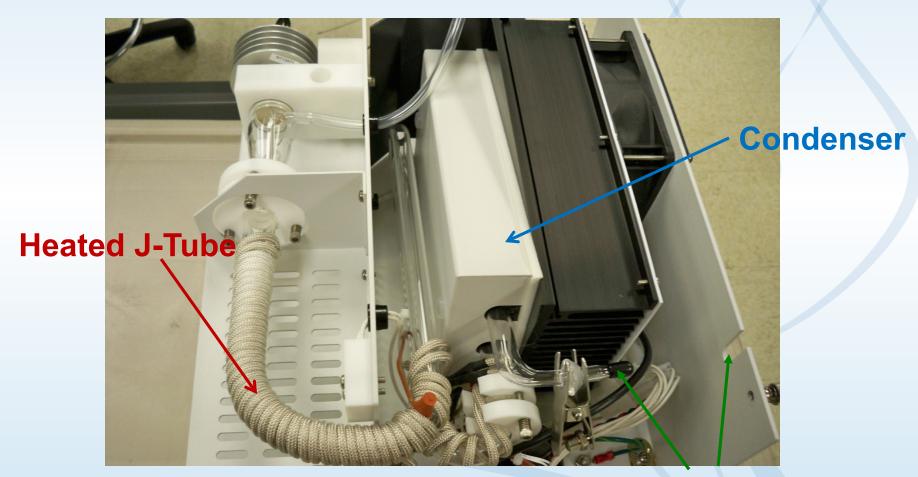
## **U5000AT<sup>+</sup> Transducer Assembly**

Piezoelectric Crystal (disk shape)

Quartz Plate



#### U5000AT<sup>+</sup> Ultrasonic Nebulizer Desolvation System



#### **Sample Out**



#### U5000AT<sup>+</sup> Ultrasonic Nebulizer Example Interface Kit





## U5000AT<sup>+</sup> Ultrasonic Nebulizer Installation Steps

- 1. Remove standard nebulizer and spray chamber from the ICP-AES.
- 2. Connect nebulizer gas inlet line from ICP-AES to the USN.
- 3. Connect sample out line from USN to ICP torch.

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- 4. Connect sample line from autosampler to USN inlet line.
- 5. Connect power cord to USN and turn on. Wait 10 minutes for heater and cooler to stabilize. Start ICP, introduce tune solution, press one button (Operate) to begin nebulizing samples.

**Overall setup takes about 15 minutes. No computer control, no software installation needed**.

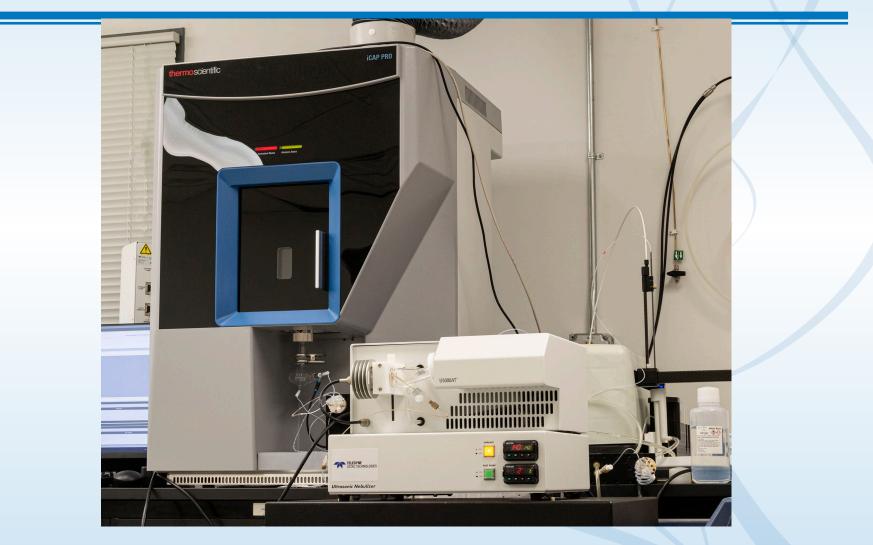
### **ICP-AES w. Ultrasonic Nebulization**



#### Agilent 5100 ICP-AES & U5000AT<sup>+</sup> USN



#### **ICP-AES w. Ultrasonic Nebulization**



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#### Thermo iCAP PRO & U5000AT<sup>+</sup> USN

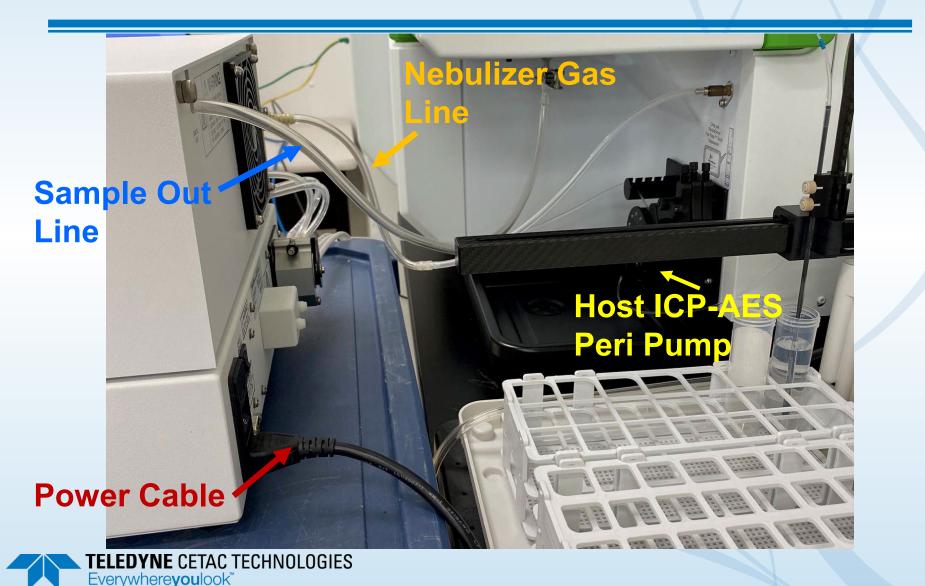
#### **ICP-AES w. Ultrasonic Nebulization**



#### PerkinElmer Avio 500 ICP-AES, U5000AT<sup>+</sup> USN & ASX-280 Autosampler



#### Connections Between Host ICP-AES and U5000AT<sup>+</sup> Ultrasonic Nebulizer



#### **Example Torch Adapter Connection**



#### Instrumentation

**ICP-AES:** PerkinElmer Avio 500

#### Ultrasonic Nebulizer (USN): Teledyne CETAC U5000AT<sup>+</sup>

#### **Microwave Digestion System: CEM Mars 6**

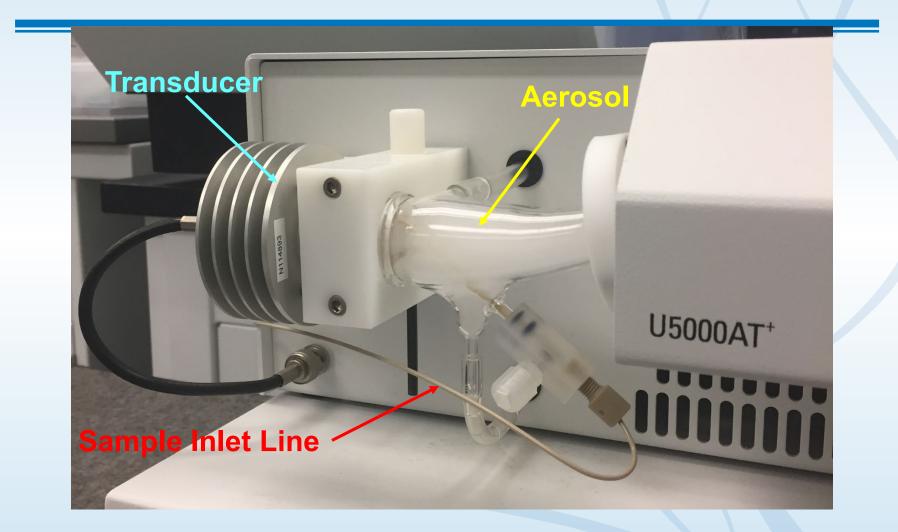


#### U5000AT<sup>+</sup> Ultrasonic Nebulizer Aerosol Generation





#### Ultrasonic Nebulizer Aerosol Close-Up View





## **USP <232> Elements Class Grouping**

- Class 1 and 2A elements must be measured; Class 1 elements are most toxic (Cd, Pb, As, Hg).
- Class 2B elements must be measured if added to the drug product generation process.
- Class 3 elements are of lower toxicity via oral administration, but require measurement if drug product given by inhalation or parenteral routes.



#### Maximum Oral Daily Exposures for Elements Defined in USP <232> - I

	Element	Class	Max. Oral Daily Exposure (μg/day)	
	Cd	1	5	
	Pb	1	5	
	As	1	15	
	Hg	1	30	
	Со	2A	50	
	V	2A	100	
	Ni	2A	200	
	TI	2B	8	
	Au	2B	100	
	Pd	2B	100	
	Ir	2B	100	
	Rh	2B	100	
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#### Maximum Oral Daily Exposures for Elements Defined in USP <232> - II

Element	Class	Max. Oral Daily Exposure (μg/day)	
Ru	2B	100	
Se	2B	150	
Ag	2B	150	
Pt	2B	100	
Li	3	550	
Sb	3	1200	
Ва	3	1400	
Мо	3	3000	
Cu	3	3000	
Sn	3	6000	
Cr	3	11000	



\* inorganic

## **Sample Preparation**

A 0.5 g aspirin sample with multielement spike was added to each digestion vessel followed by 5 mL of reagent grade  $HNO_3$  and 1 mL of reagent grade HCI. The vessels were left uncapped for 10 minutes in a fume hood to allow any initial gases to vent prior to sealing the vessels. Spiked and unspiked samples were digested using a closed vessel microwave digestion program as specified by USP <233>.

Stage	Power(W)	Ramp	Hold	Temp (°C)
1	1050	15 min	15 min	200



## **Sample Dilution and J Values**

The final dilution for each sample after digestion was 100x with deionized water. With that dilution factor and a maximum daily dose of 4.32 g (one aspirin tablet is 0.36g, maximum dose is 12 tablets per day), the calculated J values (rounded down) are listed in the next two slides in mg/L. Following USP <233> protocol, a reagent blank, 0.5 J standard, and 1.5 J standard were used for calibration.



#### **Analytical Concentrations at Different J Values - I**

Element	J-value (mg/L)	0.5 J	1.5 J	
 Cd	0.01	0.005	0.015	X
Pb	0.01	0.005	0.015	
As*	0.03	0.015	0.06	
Hg*	0.06	0.03	0.09	
Со	0.10	0.05	0.15	
V	0.20	0.10	0.30	
Ni	0.40	0.20	0.60	
ті	0.016	0.008	0.024	
Au	0.20	0.10	0.30	
Pd	0.20	0.10	0.30	
lr	0.20	0.10	0.30	
Rh	0.20	0.10	0.30	



\* inorganic

#### **Analytical Concentrations at Different J Values - II**

 Element	J-value (mg/L)	0.5 J	1.5 J	X
Ru	0.20	0.10	0.30	
Se	0.30	0.15	0.45	
Ag	0.30	0.15	0.45	
Pt	0.20	0.10	0.30	
Li	1.1	0.55	1.65	
Sb	2.4	1.2	3.6	
Ва	2.8	1.4	4.2	
Мо	6	3	9	
Cu	6	3	9	
Sn	12	6	18	
Cr	22	11	33	



## **Calibration & Reagent Addition**

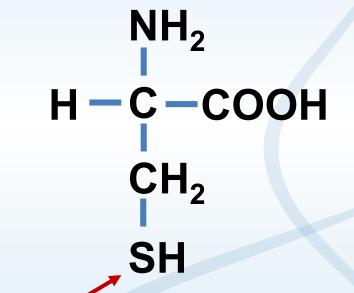
The ICP-AES was calibrated using standards that were matrix matched to the acid concentrations of the digested samples. An internal standard solution of 50  $\mu$ g/L Y was added to all samples and standards using a mixing tee.

Samples for the Class 1 elements (includes Hg), 2A elements, and thallium were digested and analyzed separately from the Class 2B and Class 3 elements. For these elements, the reagent **L-cysteine**, **a thiol-containing amino acid**, was added to digested samples to assist element transport of Hg through the ultrasonic nebulizer.

L-cysteine was added to the 50  $\mu$ g/L Y internal standard solution so the final concentration after sample mixing was 3 mg/ml. As nitric acid rapidly oxidizes L-cysteine, the internal standard solution was prepared in 0.07M HCl.



## L-Cysteine (C<sub>3</sub>H<sub>7</sub>NO<sub>2</sub>S) Structure



#### Thiol functional group



## **Aspirin Tablets: Notes**

- Aspirin tablets did not contain SiO<sub>2</sub> or TiO<sub>2</sub>, so hydrofluoric acid (HF) not needed for digestion
- If HF was required for digestion, then a neutralization of residual HF would be needed (ex. boric acid) before introduction to any glass components



## **Emission Line Selection**

- All elements required by USP <232> and other elements potentially in the aspirin sample (ex. Ca, Na, Si, Mg) were run individually to check for spectral interferences.
- When possible emission lines free of interferences were selected; otherwise multicomponent spectral fitting (MSF) or interelement correction factors (IECs) were used.
- An interference check solution was measured during the sample run to verify that spectral correction techniques were working properly.



#### **Operating Conditions**

#### **ICP-AES with Standard Nebulizer and U5000AT<sup>+</sup> USN**

Parameter	Std Nebulizer	U5000AT <sup>+</sup> USN	
ICP Power	1500 W	1500 W	
Plasma Gas	8.0 L/min	8.0 L/min	
Auxiliary Gas	0.2 L/min	0.2 L/min	
Nebulizer Gas	0.70 L/min	0.62 L/min	
Torch Injector	2 mm	2 mm	
Uptake Rate	1.5 mL/min	1.0 mL/min	
<b>Cassette Position</b>	-3.0	-5.0	
Resolution	Normal	Normal	
Nebulizer Type	Meinhard K	Piezoelectric	
Spray Chamber	Baffled cyclonic	Conical	
Heater Temp	N/A	120°C	
Cooler Temp	N/A	5°C	
Integration Time	2 s min, 10 s max	2 s min, 10 s max	
Peak Area	3 pts/peak	3 pts/peak	
Replicates	3	3	
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#### Elements, Wavelengths, Plasma View - I

Element	Wavelength (nm)	Plasma View	Χ
Cd	228.802	Axial	
Pb	220.353	Axial	
As	188.979	Axial	
Hg	253.652	Axial	
Со	228.616	Axial	
V	292.402	Axial	
Ni	231.604	Axial	
ті	190.801	Axial	
Au	242.795	Axial	
Pd	340.458	Radial	
Ir	208.882	Axial	
Rh	343.489	Radial	

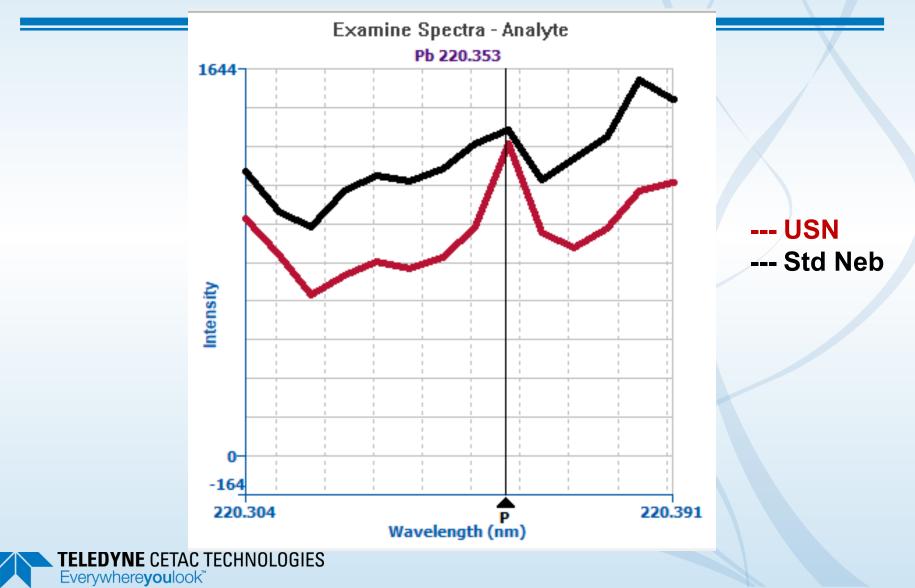


#### Elements, Wavelengths, Plasma View - II

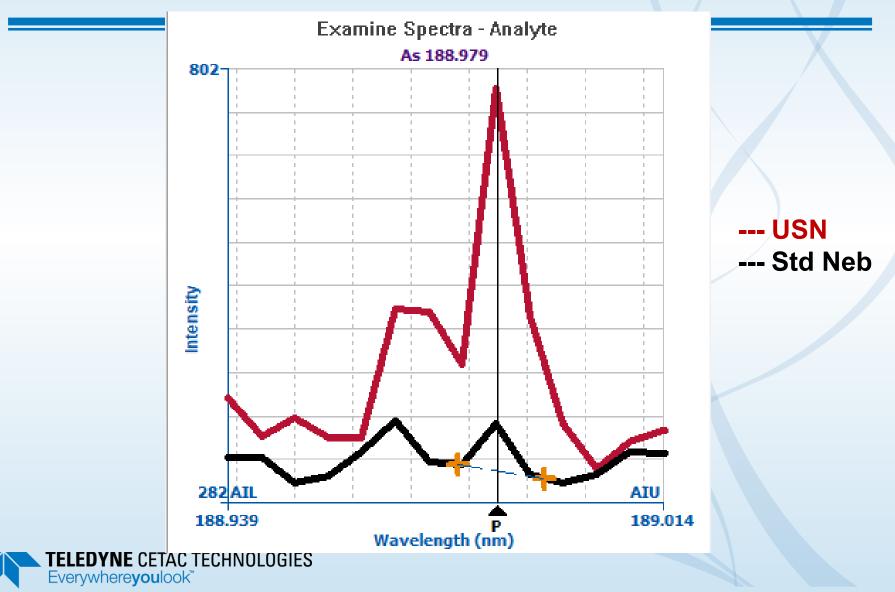
Element	Wavelength (nm)	Plasma View	X
Ru	349.894	Radial	
Se	196.026	Axial	
Ag	338.289	Axial	
Pt	265.945	Axial	
Li	670.784	Radial	
Sb	231.146	Radial	
Ва	493.408	Radial	
Мо	202.030	Axial	
Cu	324.752	Radial	
Sn	189.927	Axial	
Cr	267.716	Radial	



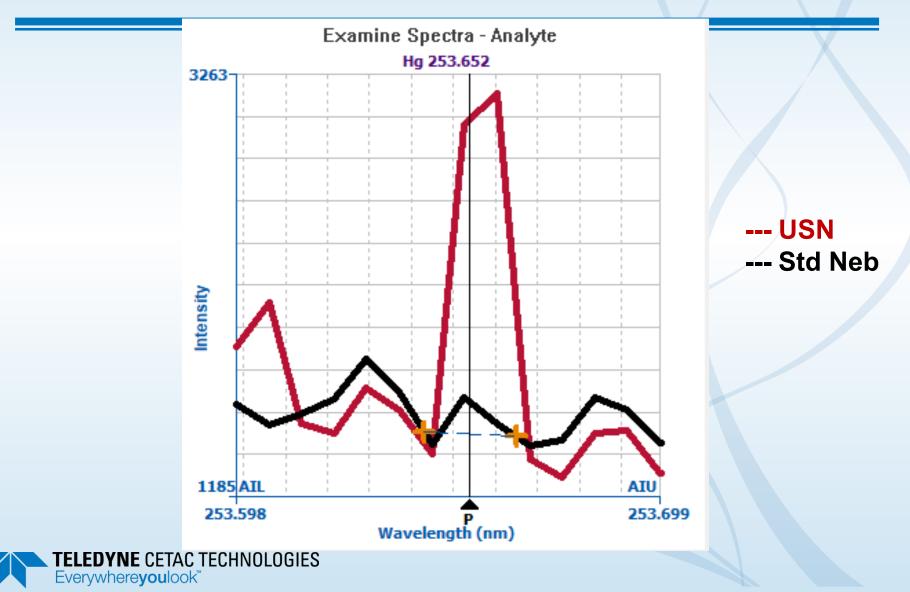
# Pb (220.353 nm) Spectra at 0.01 mg/L Pb (Class 1)



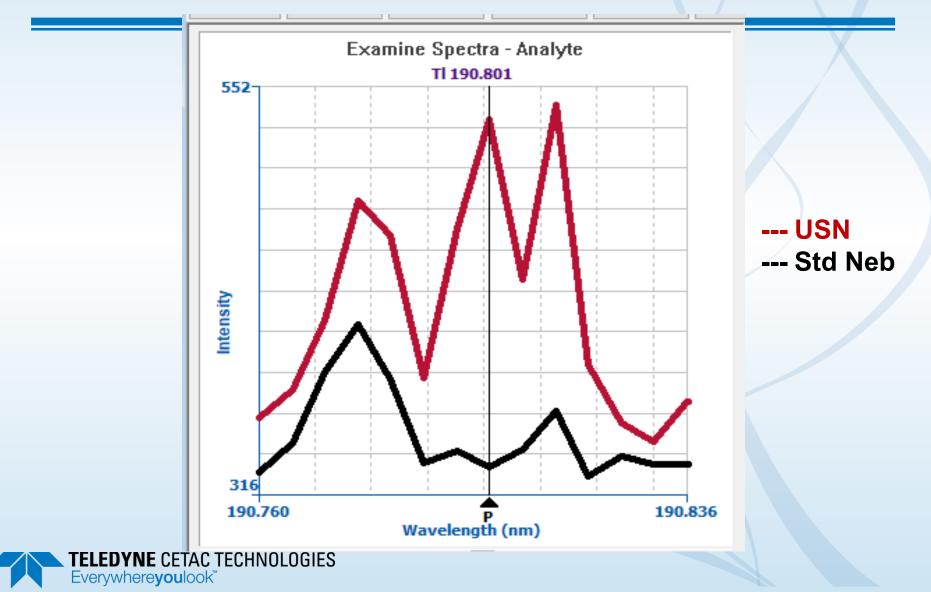
# As (188.979 nm) Spectra at 0.03 mg/L As (Class 1)



## Hg ( 253.652 nm) Spectra at 0.06 mg/L Hg (Class 1)



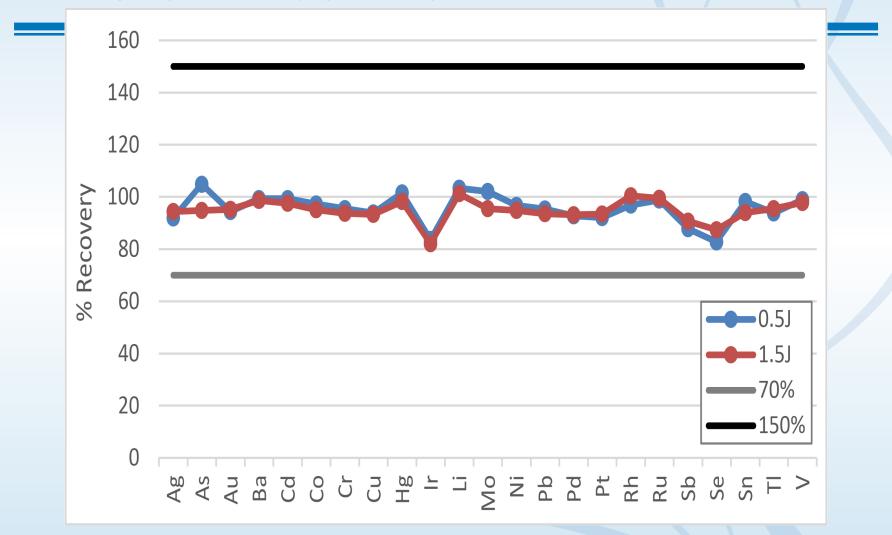
## TI (190.801 nm) Spectra at 0.016 mg/L TI (Class 2B)



#### Analytical Criteria Defined in USP <233> for Quantitative Procedures

Criteria	Description
Accuracy	Spike recoveries at 0.5J, J, and 1.5J must be between 70-150%
Repeatability	The %RSDs of measurements of six independent samples spiked at J must be less than 20%
Ruggedness	Six solutions must be analyzed on different days, with different instruments, or with different analysts. The %RSDs over the 12 measurements must be less than 25%
System Suitability	The difference in the results of the high calibration standard (1.5J) measured at the beginning and end of a batch must be < 20%

#### Accuracy: 0.5J and 1.5J Spike Recoveries in Aspirin Black (top) and Gray (bottom) Lines Show USP <233> Limits

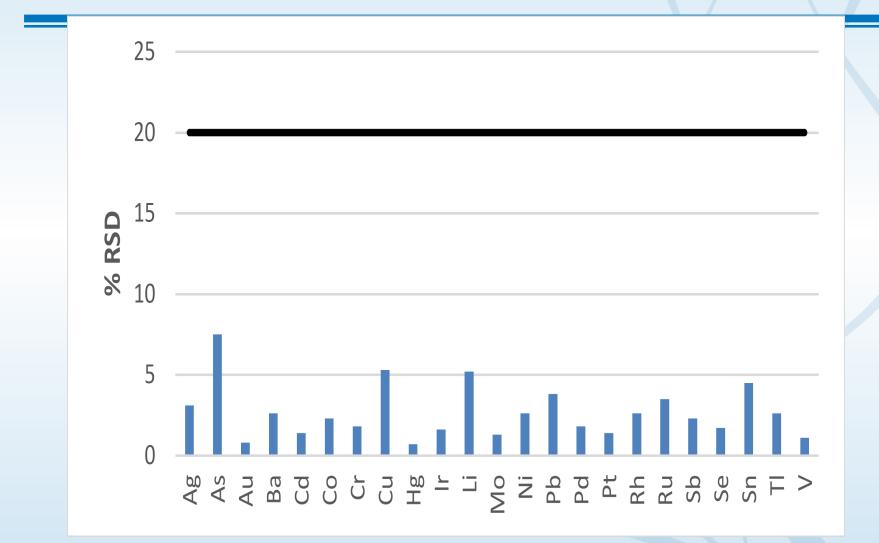


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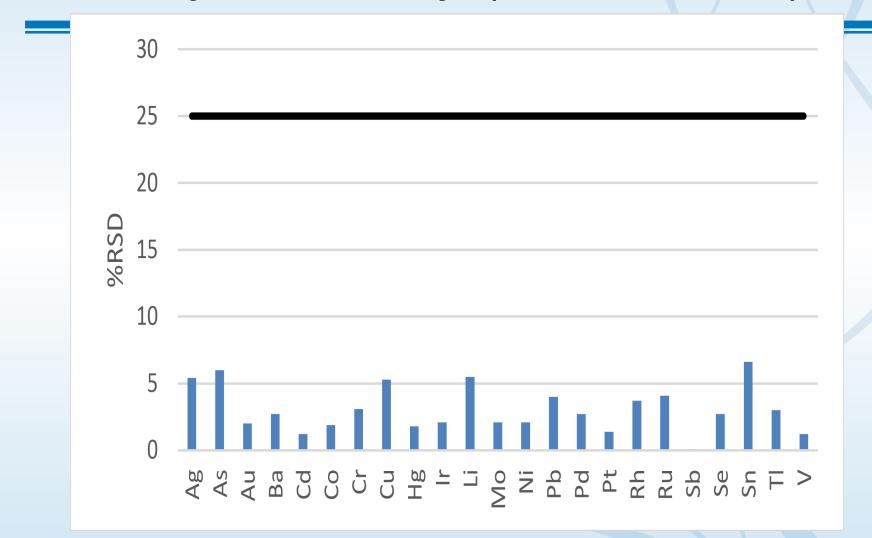
Spike recoveries must be between 70% and 150%

#### Repeatability: %RSDs of Six Independent Samples Spiked at 1J



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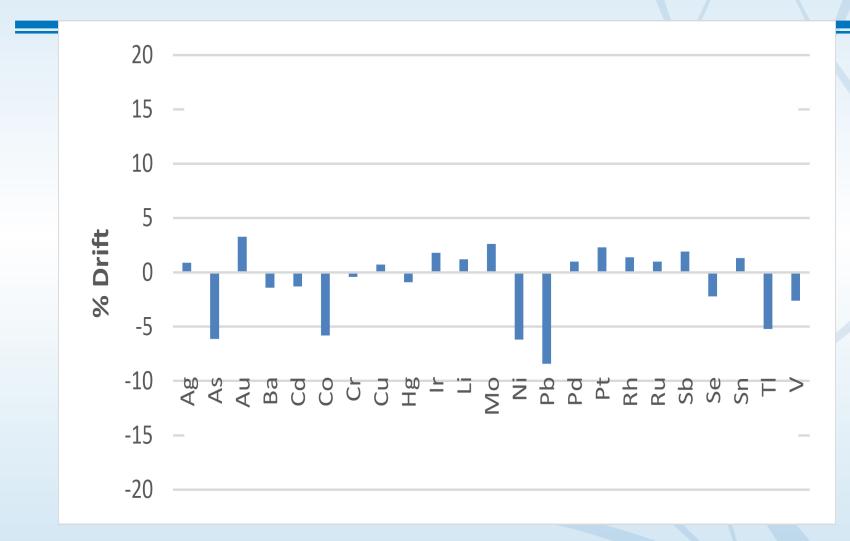
#### Ruggedness: %RSDs of 6 Independent Samples Analyzed Over 2 Days (12 Measurements)





%RSDs must be < 25%

#### System Suitability: Analysis of 1.5J at the Beginning and End of Analytical Run



Difference in the results must be < 20%.

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## Summary

All criteria required by USP <233> were met using the U5000AT<sup>+</sup> Ultrasonic Nebulizer with ICP-AES detection of trace elements in aspirin. The U5000AT<sup>+</sup> enables enhanced analyte sensitivity and lower background emission, improving ICP-AES measurement of more difficult elements in this example of a higher daily dose drug product.



## U5000AT<sup>+</sup> USN: Benefits & Advantages

- Enhanced detection of difficult Class 1 elements such as Pb, As, Hg and Class 2B element TI
- Lower background emission due to less injected water vapor
- Fast and easy setup of the U5000AT<sup>+</sup>
- Convenient placement on laboratory cart or benchtop
- One button operation
- No computer control required
- Simple connection to autosampler (ex. ASX-280/560) for automated sample introduction



### Ultrasonic Nebulizers for ICP-AES Top Level Part Numbers

- U5000AT<sup>+</sup> Ultrasonic Nebulizer
  - U51-99-0001A+ (115 V)
  - U51-99-0001B+ (220 V)



#### U5000AT<sup>+</sup> Interface Kits for ICP-AES U5000AT<sup>+</sup> Compatibility

- All ICP-AES Models
  - Examples with Interface Kit SP Numbers ()
    - Agilent (SP5155Y)
    - Analytik Jena (SP5155Y)
    - PerkinElmer (SP5155L)
    - Shimadzu (SP5155Z)
    - Spectro (SP5155P)
    - Teledyne Leeman (SP5155I)
    - Thermo Fisher (SP5155CC)

One interface kit provided at no charge with each U5000AT<sup>+</sup>



### Acknowledgement

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# Where to go for more information

- Service support
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- Web information
  - <u>http://www.teledynecetac.com/products/nebulizers/u5000at+</u>
  - <u>http://www.teledynecetac.com/resourceSite/Application%20Notes/AP-U5000-003.pdf</u>

