

1 **Quantitative profiling of 1-Carbon Metabolites, Amino Acids and Precursors,**
2 **and Plasmalogens in human plasma using Ultra-High-Pressure Liquid**
3 **Chromatography coupled with Tandem Mass Spectrometry and robotic**
4 **compound extraction**

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14 **Abstract (80 to 250 words)**

15 Amino acids (AAs) and one-carbon (1-C) compounds are involved in a range of key metabolic
16 pathways, and mediate numerous health and disease processes in the human body.
17 Previous assays have quantified a limited selection of these compounds. Here, we describe
18 an analytical method for the simultaneous quantification of 37 1-C metabolites, amino acids,
19 precursors, and plasmalogens using reversed-phase ultra-high pressure liquid
20 chromatography coupled with tandem mass spectrometry (UHPLC-MS/MS). Compound
21 extraction from human plasma was tested manually before being robotically automated.
22 The final analytical panel was validated on human plasma samples. Our automated and
23 multiplexed method holds promise for application to large cohort studies.

24 **1. Introduction**

25 In the 1930s, Donal Van Slyke and Robert Dillon were some of the first scientists to develop
26 a method for the analysis of free amino acids using crude analytical methods (1). Since then,
27 the comprehensive analysis of low-molecular weight metabolites (*i.e.* metabolomics) has
28 progressed thanks to advanced technology, in particular the coupling of chromatography
29 and mass spectrometry, to enable their accurate quantitation in biological samples (2,3).
30 Several metabolomics methods have been developed for amino acids and/or 1-C
31 metabolism compound quantification in different body fluids (*e.g.* plasma, cerebrospinal
32 fluid, red blood cells) (4,5). However, on their own, each of these methods only quantifies a
33 limited selection of metabolites (4,5).

34 **1.1 Amino acids and 1-C metabolites in human health**

35 Amino acids and 1-C metabolites are central to physiological processes in the human body
36 (*e.g.* nutritional metabolism, molecular, endocrine and neurological functions) (6). Due to
37 their ubiquitous involvement in biological processes, quantifying the concentration of amino
38 acids and 1-C compounds in human plasma can inform on the physiological status of an
39 individual. Specific metabolic profiles have been linked to health and disease outcomes
40 (7,8). Estimating nutritional status using dietary reporting alone is unreliable (9). Therefore,

41 an objective quantitation of nutritional metabolites is of utmost importance, to strengthen
42 our current understanding of human physiology and nutritional metabolism.

43 **1.2 The use of human plasma for quantitative metabolomics**

44 Plasma is the non-cellular component of human blood. As such, plasma contains virtually all
45 human proteins (*e.g.* blood clotting, binding proteins) representing those expressed
46 throughout the tissues in addition to glucose, vitamins, and other nutrients. Blood collection
47 from human subjects is relatively easy and non-invasive making it particularly appealing in
48 both clinical and research settings (10). In a healthy population, blood metabolites (*e.g.*
49 amino acids) typically maintain homeostatic levels when in a fasted state, but may fluctuate
50 substantially in the post-prandial state (11). Therefore, physiological extrapolations need to
51 be made cautiously when interpreting the results of plasma metabolomics studies, as these
52 reflect either states of homeostasis (in the fasted state), a postprandial response (in the fed
53 state), or metabolic exchanges between tissues. Notably, plasma-tissue correlations of
54 metabolites are not always reliable (11). For example, metabolites quantified in plasma are
55 typically not able to be assigned to cells or tissues of origin. However, an increasing level of
56 biological understanding of tissue-specific pathways has allowed for the development of
57 mathematical models, extrapolating organ-specific metabolite levels based on their plasma
58 measurements (12,13).

59 Here we present an automated method that combines a robotic extraction of plasma
60 samples with reversed-phase ultra-high-pressure liquid chromatography coupled with
61 tandem mass spectrometry (UHPLC-MS/MS) to quantitate 37 1-C metabolites, amino acids
62 and precursors, as well as plasmalogens in a single plasma sample. This method has wide
63 applicability for metabolomic studies using non-invasive sample collection methods.

64 **Materials and Methods**

65 **Ethics**

66 Plasma samples used for method validation were obtained from the Fish Oil in Pregnancy
67 trial, approved by the Northern A ethics Health & Disabilities Committees (Trial number
68 17/NTA/154). Participants provided written informed consent, and the trial was conducted
69 according to the principles of the declaration of Helsinki.

70 **Materials**

71 Materials used throughout the experiment are detailed in Supplementary table 1.

72 **Plasma sample collection**

73 Whole blood was collected in lithium heparin and EDTA blood collection tubes. Plasma was
74 separated by centrifugation ($1300 \times g$, 4°C , 15 min), then stored (-80°C).

75 **Standard preparation and quality controls**

76 A labelled amino-acid premix solution containing: L-Arginine:HCL ($^{13}\text{C}_6$, 99%; $^{15}\text{N}_4$, 99%); L-
77 Aspartic acid ($^{13}\text{C}_4$, 99%; ^{15}N , 99%); L-Cystine ($^{13}\text{C}_6$, 99%; $^{15}\text{N}_2$, 99%); L-Glutamic acid ($^{13}\text{C}_5$,
78 99%; ^{15}N , 99%); L-Histidine:HCL:H₂O (<5% D) (U- $^{13}\text{C}_6$, 97-99%; U- $^{15}\text{N}_3$, 97-99%); L-Isoleucine
79 ($^{13}\text{C}_6$, 99%; ^{15}N , 99%); L-Leucine($^{13}\text{C}_6$, 99%; ^{15}N , 99%); L-Methionine ($^{13}\text{C}_5$, 99%; ^{15}N , 99%); L-
80 Phenylalanine ($^{13}\text{C}_9$, 99%; ^{15}N , 99%); L-Proline ($^{13}\text{C}_5$, 99%; ^{15}N , 99%); L-Threonine ($^{13}\text{C}_4$, 97-

81 99%; ¹⁵N, 97-99%); L-Tyrosine (¹³C9, 99%; ¹⁵N, 99%); and L-Valine (¹³C5, 99%; ¹⁵N, 99%)
 82 (*Cambridge Isotope*) was diluted to 33 μM in 1% ascorbic acid MilliQ® H₂O (Millipore). Stock
 83 solutions of labelled 1-C compounds were prepared from their corresponding powders of:
 84 Homocysteine d4 (Novachem (CIL)); Cystathionine d4 (Novachem (CIL)); S-
 85 Adenosylhomocysteine d4 (Sapphire bioscience (Cayman)); 5-Methyltetrahydrofolate d3
 86 (Sapphire Bioscience Pty Ltd); Betaine d3 (SciVac PTY. Ltd. (CDN)), Dimethylglycine d3
 87 (SciVac PTY. Ltd. (CDN)); and Taurine d4 (SciVac PTY. Ltd. (CDN)) diluted in 0.1 M HCl for all
 88 standards, except for 5-MTHF d3, which was diluted in 10 mM ammonium acetate (NH₄OAc)
 89 with 10% ascorbic acid and 2% TCEP, at concentrations ranging from 0.5 to 5 mM. These
 90 stock solutions were then diluted to 33 μM in 1% ascorbic acid MilliQ® H₂O. A 1:1 mixture of
 91 labelled AAs and 1-C compounds was used as the internal standard solution.

92 Dilution series' of unlabelled amino acids (Kit No. LAA-21, SIGMA® Chemical company, USA)
 93 and 1-C metabolites were prepared at concentrations ranging from 1μM to 1000μM
 94 (Supplementary tables 2 and 3), and mixed in a 1:1 ratio to create standard 8 (S8; Table 1).
 95 The unlabelled standards consisted of Lysine, Taurine, OH-Proline, Proline, Aspartic acid,
 96 Glutamine, Glycine, Serine, Asparagine, Glutamic acid, Dimethylglycine, Citrulline, Proline,
 97 Betaine, Threonine, Cysteine, Ethanolamine, Alanine, Amino adipic acid, Homocysteine,
 98 Ornithine, Valine, Carnitine, Tyrosine, Choline, Methionine, Betaine, Cystathionine,
 99 Phenylalanine, Isoleucine, Leucine, Histidine, Arginine, S-Adenosylhomocysteine,
 100 Tryptophan, S-Adenosylmethionine, 1-Methylhistidine, 3-Methylhistidine, and 5-
 101 Methyltetrahydrofolate (all purchased from Sigma Aldrich). Dilutions of unlabelled mixes
 102 were prepared to create a wide dynamic range of concentrations that mirrors known
 103 physiological plasma concentrations (Table 1).

104 Stripped human plasma (SeraCare Life Sciences Inc.) was used as a quality control (QC)
 105 matrix to calculate compound recoveries. Triplicate QCs of stripped plasma at baseline and
 106 stripped plasma spiked with 70 μL of calibration standards (S7 and S8) were used for quality
 107 control checking.

Compound	S1	S2	S3	S4	S5	S6	S7	S8	Unit
Homocysteine	0.2	1	2	5	10	20	40	100	μM
Choline	0.4	2	4	10	20	40	80	200	μM
Dimethyl glycine									μM
Glutamic acid									μM
Ornithine									μM
Methionine									μM
Tyrosine									μM
Isoleucine									μM
Phenylalanine									μM

Tryptophan									μM
Ethanolamine									μM
Amino adipic acid									μM
Aspartic acid									μM
Citrulline									μM
1-methylhistidine									μM
3-methylhistidine									μM
OH-Proline									μM
Histidine									μM
Asparagine									μM
Cysteine	0.5	2.5	5	12.5	25	50	100	250	μM
Betaine									μM
Leucine	0.6	3	6	15	30	60	120	300	μM
Cystathionine									nM
S-Adenosylhomocysteine (SAH)									nM
S Adenosyl-L-methionine (SAM)									nM
Taurine									μM
Alanine									μM
Serine									μM
Glycine	1	5	10	25	50	100	200	500	μM
Glutamine									μM
Proline									μM
Lysine									μM
Arginine									μM
Valine									μM
Threonine									μM
Carnitine									μM
5-Methyltetrahydrofolic acid (5-MTHF)	5	25	50	125	250	500	1000	2500	nM

108

109 **Automated solid-phase extraction (SPE)**

110 An Eppendorf robot fitted with both a thermal mixer and vacuum manifold (EpMotion

111 5075vt, Germany) was programmed using the epBlue Client v. 40.6.2.6 software to

112 automate compound extractions from plasma samples (Figure 1). The protocol was
113 developed to extract one 96-well plate of samples including standards, blanks and QCs.
114 Internal standards, quality controls, calibration standards, the protein precipitation solution,
115 the TCEP solution, 1% ascorbic acid MilliQ® H₂O, and plasma samples were all placed in the
116 robot.

117 ***Protein precipitation***

118 Firstly, 300 µL of 1% (v/v) formic acid in LC-Grade MeOH (in P3) is transferred into the all
119 wells (in P4) of the 96-well IMPACT® protein precipitation plate (Phenomenex®) fitted onto
120 a square 96-well (2ml) collection plate (Phenomenex®). A volume of 100 µL of 1% ascorbic
121 acid in MilliQ® H₂O is dispensed into the first two wells as blanks with and without internal
122 standards. The internal standard solution (20 µL from P3) is dispensed into the remaining
123 wells of the plate. Standards (100 µL; in P2) and plasma samples (100 µL; in P1) are
124 transferred into the corresponding wells of the plate. Quality controls (QCs; 100 µL in
125 triplicate) are dispensed from P2 into three different locations across the plate, to enable
126 quantification of QC fluctuations at different injection times across the 96-well plate.

127

128 ***Mixing and vacuum extraction***

129 Once sample transfer is completed, the rack containing plasma samples in P1 is removed
130 from the robot, recapped, and stored (-80°C). The protein precipitation filtration plate and
131 catch plate are then placed on a thermomixer and agitated (5 min, 800rpm, room
132 temperature). Once mixed, the plate is placed on the vacuum stand. A vacuum (450mbar,
133 10 min) is applied and the extracted compounds are collected in the catch plate.

134

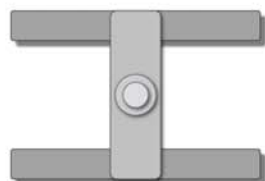
135 ***Addition of the reducing agent TCEP***

136 After precipitation of the extracted compounds, the filter plate is discarded and 100 µL of
137 Tris (2-carboxyethyl) phosphine (TCEP) is transferred from P3 to all wells of the collection
138 plate. TCEP reduces the disulphide bonds within cystine and homocystine, so they can be
139 quantified as cysteine and homocysteine.

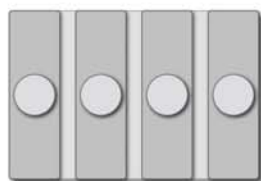
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141 ***Mixing and final dilution***

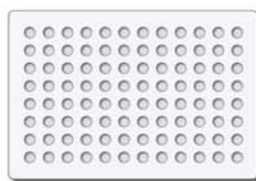
142 The collection plate is placed on P1 for mixing (15 min, 800 rpm, room temperature), to
143 provide sufficient contact time between the TCEP solution and the extracted compounds of
144 interest for optimal compound reduction. A volume (200 µL) of 1% ascorbic acid in MilliQ®
145 H₂O is then added to each well. The plate is capped using a 96 square sealing mat
146 (Phenomenex®), mixed (5 min, 800rpm, room temperature), and placed in the UHPLC
147 system auto-sampler (10°C) for analysis.



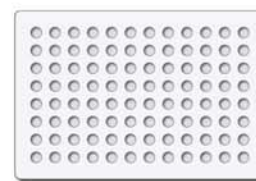
Pipette holder stand



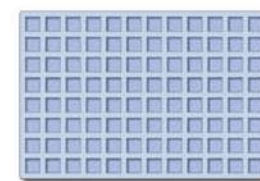
Pipette head stand



300µl tips



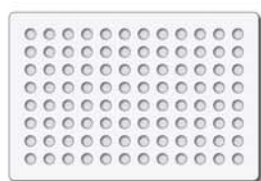
1000µl tips



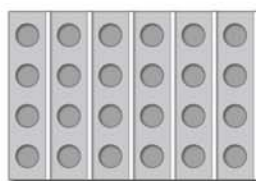
Position 1 (P1)
- Sample rack
- Collection plate
- Thermomixer



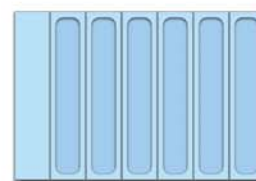
Waste



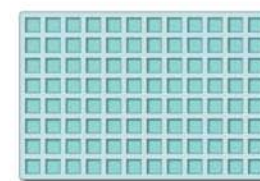
50µl tips



Position 2 (P2)
- Calibration curve
- Quality controls



Position 3 (P3)
- Protein precipitation
- Water
- Internal standard mix



Position 4 (P4)
- Filter plate
- Collection plate
- Vacuum position

149 **UHPLC/MS-MS working conditions**

150 Ultra-high-pressure liquid chromatography coupled with tandem mass spectrometry was
151 performed using a Vanquish UHPLC system, coupled with a TSQ Quantiva triple quadrupole
152 mass spectrometer (Thermo Scientific), using a heated electrospray ionisation source (H-ESI)
153 in positive ionization mode. A Kinetex[®] EVO C18 100 Å 150x2.1mm 1.7µm column
154 (Phenomenex[®]) at 40°C, coupled with a Krudkatcher (Phenomenex[®]) pre-column filter, was
155 used for chromatography. A flow of 400 µL/min starting at 2% Acetonitrile and 98% mobile
156 phase consisting of 5mM perfluorohexanoic acid (PFHA) in MilliQ[®] H₂O was applied to the
157 column, compounds of interest were eluted using an increasing acetonitrile gradient (Table
158 2). The sample injection volume was 7 µL, and the run time was 15.5 minutes.

Time	Flow (ml/min)	Percentage Acetonitrile (%)
0	0.4	2
0.5	0.4	2
2.5	0.4	15
4.0	0.4	15
6.3	0.4	20
7.3	0.4	20
9.5	0.4	95
11.5	0.4	95
11.6	0.4	2
15.5	0.4	2

159

160 **Data processing**

161 Data processing was carried out using Xcalibur version 4.0.27.19 (Thermo). Compounds
162 were assigned specific retention times (based on the injection of pure compounds), and
163 labelled standards for quantitation purposes. Unlabelled compounds that did not have
164 labelled counterparts were assigned other labelled compounds with similar properties (*e.g.*
165 SAM and SAH were both assigned SAH d4 as an internal standard for quantification). The
166 range of expected concentrations of the compounds in standards S1-S8 (Table 1) were also
167 included.

168 **Plasma sample validation**

169 The process was validated using stripped plasma and pooled plasma samples from pregnant
170 women taking part in the Fish Oil in Pregnancy study. The validation included: 1) measures
171 of specificity and selectivity based on retention times; chromatographic separations and
172 spectral detection; 2) measures of matrix effects and standard recoveries by comparing
173 pure stripped plasma versus spiked stripped plasma samples; and 3) measures of
174 reproducibility by calculating coefficients of variation for multiple injections of the
175 independent extractions of the same pooled plasma sample within and across multiple
176 assay runs.

177

178

179 **Method development**

180 **Spectral Tuning**

181 Compounds were tuned on a TSQ Quantiva mass spectrometer using the TSQ Quantiva Tune
182 Application v. 2.0.1292.15 software. Compound tuning identifies the lens' radio frequencies
183 (RF) and respective collision energies required to focus and fragment a parent ion into its
184 daughter ion(s). Each unlabelled standard was diluted from the stock solution in 1% ascorbic
185 acid of MilliQ® H₂O. The tuning solution of each individual compound was loaded into a
186 tuning syringe. A LC flow (100-200 µl/min) was introduced into the mass spectrometer via
187 'T' connector to mimic standard working conditions. After each standard was infused into
188 the mass spectrometer via a syringe, a stepwise entry of ascending collision energies was
189 applied to identify the ideal conditions for the detection of the most abundant daughter ion
190 of the corresponding parent ion of interest. The mass of the most abundant daughter ion
191 was identified along with its RF lens voltage and collision energy for each compound.

192 **UHPLC/MS-MS Instrument setup**

193 The instrument setup consisted of two stages: 1) chromatographic parameters; and 2)
194 spectral conditions. Chromatographic flow gradient parameters were optimised to maximise
195 compound separation whilst minimising assay run time. The optimised flow gradient is
196 detailed in Table 2. Spectral parameters were optimised through an instrument setup that
197 was drafted and edited throughout the method development process, including all
198 compound names, their corresponding collision energies, RF lens, parent and daughter mass
199 transitions, as well as expected retention times and windows.

200 **Chromatographic separations**

201 *Chromatographic columns*

202 Solutions of each compound and internal standard were tested to determine their retention
203 times under the gradient used. Initial work used a Kinetex® 2.6µm F5 100 Å 150x2.1 mm
204 column (Phenomenex®) column to test chromatographic separations. However, some
205 compound peaks showed poor resolution. A smaller particle size column, the Kinetex®
206 1.7µm EVO C18 100 Å 150 x2.1 mm column (Phenomenex®) showed improved resolution,
207 and was used for chromatographic separations instead.

208 *Ion-pairing reagents*

209 Ion-pairing reagents are mobile phase additives pairing with highly ionic compounds to
210 improve their adsorption to the stationary phase of the chromatographic column.
211 Heptafluorobutyric acid (HFBA) was initially tested as an ion-pairing reagent, but exhibited
212 poor retention of some compounds in this method. Perfluorohexanoic acid (PFHA)
213 improved compound retention on the chromatographic column (5mM of PFHA in MilliQ®
214 H₂O) and was subsequently used instead.

215

216

217

218 Results and discussion

219 Parent-product ion transitions, collision energies, and RF lens of all compounds were
220 obtained (Table 3). The compounds included in this panel are present in a wide range of
221 metabolic networks and have been associated with health and disease outcomes (*i.e.* the 1-
222 carbon metabolism, the urea cycle, ketogenic and glucogenic amino acids involved in the
223 tricarboxylic acid (TCA) cycle, branched-chain amino acid (BCAA) metabolism,
224 Trimethylamine N-Oxide (TMAO) metabolism, and gamma-aminobutyric acid (GABA)
225 metabolism (14–21)). It has been argued that quantifying single blood biomarkers that are
226 robustly associated with an outcome of interest (*e.g.* hsCRP, HbA1c) may be more clinically
227 relevant for bigger picture recommendations and the development of public health policies
228 (22). Whilst robust biomarkers must be profiled for diagnostic purposes, linking nutritional
229 metabolites (*e.g.* 1-C metabolites, and amino acid profiles), to pre-established markers of
230 health outcomes remains crucial for the characterisation of - potentially targetable -
231 underlying mechanistic layers linking exposure to outcome (19,23). Of these mechanisms,
232 epigenetic processes (such as DNA and histone methylation) are largely dependent on the
233 availability of methyl (-CH₃) groups released by methyl donors produced from the one-
234 carbon metabolism (24–28). Briefly, this analytical panel measures metabolites that are at
235 the intersection of lifestyle, nutrition, metabolism, and epigenetics (24–28). Whilst some of
236 these compounds are unstable, prone to oxidation, and tend to degrade in samples stored
237 for long periods, the exhaustiveness of our panel allows for a biologically relevant, yet still
238 practically applicable coverage of multiple biological networks in a single 100µl plasma
239 sample.

240

Compound	Retention Time (min)	Precursor (m/z)	Product	Collision Energy (V)	RF Lens (V)
Taurine	0.7	126.0	108.1	14	63
Taurine d4	0.7	130.1	112.1	14	63
Aspartic acid	1.4	134.0	74.0	20	63
Aspartic acid ¹³ C4 ¹⁵ N	1.4	139.0	74.2	15	63
OH-Proline	1.5	132.1	86.1	20	63
Asparagine	1.6	133.0	74.0	20	63
Serine	1.6	106.0	60.0	10	30
Glutamine	1.9	147.1	84.1	20	63
Glycine	1.9	76.2	30.2	10	30
Glutamic acid	2.0	148.1	84.0	20	63
Glutamic acid ¹³ C5 ¹⁵ N	2.0	154.1	89.1	15	63
Cysteine	2.0	122.0	59.1	17	63
Threonine	2.1	120.1	74.1	15	63
Threonine ¹³ C4 ¹⁵ N	2.1	125.1	78.2	10	63

DMG	2.3	104.1	58.1	20	63
DMG d3	2.3	107.1	61.1	20	63
Betaine	2.6	118.2	58.15	28	63
Betaine d3	2.6	121.1	61.1	28	63
Alanine	2.8	90.1	44.1	10	34
Amino adipic acid	2.9	162.1	98.1	14	35
Citrulline	3.3	176.1	159.0	10	32
Proline	3.5	116.1	70.1	20	63
Proline ¹³ C5 ¹⁵ N	3.6	122.1	75.2	16	63
Homocysteine	3.9	136.0	90.1	13	63
Homocysteine d4	3.9	140.0	94.1	13	63
Ethanolamine	4.0	62.3	44.1	10	30
Carnitine	5.0	162.1	103.0	30	63
Tyrosine	5.3	182.1	136.1	20	63
Tyrosine ¹³ C9 ¹⁵ N	5.3	192.1	145.2	13	63
Choline	5.5	104.2	60.2	20	63
Methionine	5.7	150.1	104.1	10	63
Methionine ¹³ C5 ¹⁵ N	5.7	156.1	109.1	10	63
Valine	5.8	118.1	72.1	20	63
Valine ¹³ C5 ¹⁵ N	5.8	124.1	77.2	10	63
5-Methyltetrahydrofolate (5-MTHF)	8.8	460.1	313.1	19	63
5-Methyltetrahydrofolate d3 (5-MTHF d3)	8.8	463.2	316.1	19.3	92
Isoleucine	8.2	132.1	86.1	20	63
Isoleucine ¹³ C6 ¹⁵ N	8.2	139.1	92.2	11	63
Leucine	8.7	132.1	86.1	20	63
Leucine ¹³ C6 ¹⁵ N	8.7	139.1	92.2	11	63
Phenylalanine	8.8	166.1	120.1	20	63
Phenylalanine ¹³ C9 ¹⁵ N	8.8	176.1	129.1	14	63
Cystathionine	8.9	223.0	134.1	14	58
Cystathionine d4	8.9	227.1	138.0	14	49
Tryptophan	9.1	205.1	159.1	20	63
1-Methyl histidine	9.1	170.1	124.1	20	63
3-Methyl histidine	8.9	170.1	96.1	20	63
Histidine	9.1	156.1	110.1	10	63
Histidine ¹³ C6 ¹⁵ N3	9.1	165.1	87.2	30	63
Ornithine	9.1	133.1	70.1	15	63
Lysine	9.2	147.0	128.8	10	60
S-Adenosyl-homocysteine (SAH)	9.2	385.0	134.0	20	63

S-Adenosyl-homocysteine d4	9.2	389.0	136.0	18	63
Arginine	9.2	175.1	70.1	20	63
Arginine ¹³ C6 ¹⁵ N4	9.2	185.1	75.2	23	63
S-Adosylmethionine (SAM)	9.4	399.0	250.1	11	63

241

242 **Compound recoveries and inter-assay coefficients of variations**

243 A number of plates were tested during method development. Quality control (QC) results of
244 96-well plates profiled by the same user between March and July 2019 were reported in the
245 following. QCs consisted of: QC-1 (stripped plasma at baseline), QC-2 (stripped plasma
246 spiked with S7 concentration), QC-3 (stripped plasma spiked with S8 concentration), and
247 QC-4 (real pooled plasma samples). Triplicate QCs were injected at three different locations
248 of a 96-well plate to track compound performance and stability across a plate taking 26-30h
249 to run. The injection time separating each set of QCs was approximately 10 hours allowing
250 for a good representation of real changes occurring in samples throughout the plate.

251 Compound recoveries reported were calculated by comparing baseline stripped plasma with
252 spiked stripped plasma (Table 4). Given that each compound behaves slightly differently
253 across plates profiled months apart, outliers were excluded from the total recovery
254 calculations (1, 2, and 3). The exclusion criteria were ± 2 sds for most compounds, and ± 1 sd
255 for those that tended to fluctuate more markedly over 5 months of runs (Asparagine,
256 Cysteine, Betaine, Ethanolamine, and S-Adosylhomocysteine). The reported recoveries
257 were mostly for the S7 spike, given that it is closer to physiological ranges of compound
258 concentrations in plasma, and is therefore more biologically relevant. For metabolites
259 exhibiting lower sensitivity or higher baseline levels in stripped plasma, a higher spike
260 concentration S8 was used for this calculation. These compounds were Cysteine, Betaine,
261 Alanine, S-Adosylhomocysteine, Asparagine, and Glutamic Acid. All compounds recovered
262 within two standard deviations of 100% recovery, highlighting a reliable quantitation of
263 compounds of interest (Table 4). 5-Methyltetrahydrofolate (5-MTHF) had an acceptable
264 recovery but results for this compound were inconsistent across runs. This is a clear
265 downfall of a complex panel attempting to quantify multiple compounds simultaneously.
266 Regardless of the acceptable recoveries in some plates, the inconsistencies between plates
267 highlight the need to quantify folate derivatives such as 5-MTHF in a specialized method
268 with minimal extraction time and stringent, light-protected blood collection methods given
269 the highly unstable and oxidative nature of these compounds (29,30).

270 **Mean concentration calculations across assays**

271 Compound concentrations were reported as average concentrations of pooled plasma QCs
272 within the ± 2 sds of the average across plates profiled between March and July 2019.
273 Compounds reported as below LOQ (limit of quantification) were those exhibiting
274 concentrations below the lowest calibration curve standard (S1).

275 **Reproducibility, inter- and intra-assay coefficients of variation**

276 Compound reproducibilities were calculated by comparing compound concentrations 1) at
277 different locations on the same 96-well plate to monitor fluctuations across a run (every

278 10h); and 2) between plates by calculating standard deviations of pooled plasma QCs (QC4)
279 injected in different plates, across several months. Inter- and intra-assay variabilities were
280 reported (Table 4), most of which were below our 20% cut-off, pinpointing a stable and
281 consistent quantitation of these metabolites for the same samples both within and between
282 assays. For compounds exhibiting low concentrations in pooled plasma, inter- and intra-
283 assay reproducibility was reported for spiked stripped plasma samples exhibiting higher
284 concentrations. These include: Aspartic acid, OH-Proline, Aminoadipic Acid, and 3-
285 Methylhistidine. The rationale behind that substitution is that very low concentrations are
286 bound to give falsely higher coefficients of variations, therefore falsely lower reproducibility.

Table 4: Compound recoveries and reproducibility in stripped and pooled plasma

Compound	Recoveries in stripped plasma (Rounded %)	Mean levels in pooled fasted plasma	Unit	Coefficient of variation of pooled plasma concentration within a plate or intra-assay variability (Rounded %)	Coefficient of variation of pooled plasma concentration across plates or inter-assay variability (Rounded %)
Lysine	105	178	μM	11	19
Taurine	111	33	μM	14	25
OH-Proline	91	8	μM	6	12
Aspartic acid	96	4	μM	7	13
Glutamine	102	678	μM	6	22
Serine	90	79	μM	9	8
Glycine	102	144	μM	10	13
Asparagine	87	31	μM	5	8
Glutamic acid	91	40	μM	4	7
DMG	92	2	μM	5	20
Citrulline	90	15	μM	10	20
Proline	91	141	μM	4	6
Betaine	79	13	μM	7	13
Threonine	84	138	μM	5	9
Cysteine	77	47	μM	10	17
Alanine	91	260	μM	7	10
Homocysteine	77	1	μM	14	20
Ornithine	83	14	μM	22	13
Valine	92	157	μM	4	8
Carnitine	109	25	μM	11	22
Tyrosine	89	36	μM	4	5

Choline	116	9	μM	10	15
Methionine	95	19	μM	4	7
Cystathionine	97	99	nM	14	18
Phenylalanine	92	48	μM	3	2
Isoleucine	91	43	μM	4	6
Leucine	90	80	μM	4	8
Histidine	100	76	μM	7	9
Arginine	96	60	μM	5	7
S-Adenosylhomocysteine (SAH)	79	31	nM	21	15
S-Adosylmethionine (SAM)	99	61	nM	14	18
Tryptophan	95	44	μM	12	22
1-Methyl Histidine	81	3	μM	6	19
3-Methyl Histidine	88	5	μM	8	9
Aminoadipic acid	81	3	μM	9	10
Ethanolamine	128	<LOQ*	μM	N/A	N/A
5-Methyltetrahydrofolate (5-MTHF)	91	27	nM	N/A	N/A

288

289 Conclusion

290 We have developed, robotically automated, and validated a methodology for the
291 simultaneous quantitation of an extensive metabolic panel of 1-C compounds, amino acids
292 and precursors, as well as plasmalogens in human plasma. Our method has two key
293 advantages over existing methods: Firstly, our technique is highly reproducible and robust
294 due to the robotic automation of sample preparation and compound extraction. The ability
295 to measure metabolites such as these directly from their sample vial with no manual
296 ‘intervention’ is attractive from an analysis and laboratory staffing point of view. Secondly,
297 our method has a greater coverage of compounds from a number of metabolic pathways,
298 when compared to previous methods (4,5), which provides simultaneous information on
299 interconnected biological processes rather than focusing on just one. These advantages
300 mean that this method has the potential for wide-spread application to large cohorts in a
301 wide range of fields (7,31–33).

302 References

- 303 1. Van Slyke DD. Physiology of the amino acids. *Nature* (1942) **149**:342–345.
304 doi:10.1038/149342a0
- 305 2. Vinayavekhin N, Saghatelian A. ‘Untargeted Metabolomics’, in *Current Protocols in Molecular*
306 *Biology* (Hoboken, NJ, USA: John Wiley & Sons, Inc.), Unit 30.1.1-24.
307 doi:10.1002/0471142727.mb3001s90
- 308 3. Roberts LD, Souza AL, Gerszten RE, Clish CB. Targeted metabolomics. *Curr Protoc Mol Biol*
309 (2012) **Chapter 30**:Unit 30.2.1-24. doi:10.1002/0471142727.mb3002s98
- 310 4. Guiraud SP, Montoliu I, Da Silva L, Dayon L, Galindo AN, Corthésy J, Kussmann M, Martin F-P.
311 High-throughput and simultaneous quantitative analysis of homocysteine-methionine cycle
312 metabolites and co-factors in blood plasma and cerebrospinal fluid by isotope dilution LC-
313 MS/MS. *Anal Bioanal Chem* (2017) **409**:295–305. doi:10.1007/s00216-016-0003-1
- 314 5. Da Silva L, Collino S, Cominetti O, Martin F-P, Montoliu I, Moreno SO, Corthésy J, Kaput J,
315 Kussmann M, Monteiro JP, et al. High-throughput method for the quantitation of metabolites
316 and co-factors from homocysteine–methionine cycle for nutritional status assessment.
317 *Bioanalysis* (2016) **8**:1937–1949. doi:10.4155/bio-2016-0112
- 318 6. Wu G. Functional amino acids in nutrition and health. *Amino Acids* (2013) **45**:407–411.
319 doi:10.1007/s00726-013-1500-6
- 320 7. Newgard CB, An J, Bain JR, Muehlbauer MJ, Stevens RD, Lien LF, Haqq AM, Shah SH, Arlotto
321 M, Slentz CA, et al. A Branched-Chain Amino Acid-Related Metabolic Signature that
322 Differentiates Obese and Lean Humans and Contributes to Insulin Resistance. *Cell Metab*
323 (2009) **9**:311–326. doi:10.1016/J.CMET.2009.02.002
- 324 8. Mayers JR, Wu C, Clish CB, Kraft P, Torrence ME, Fiske BP, Yuan C, Bao Y, Townsend MK,
325 Tworoger SS, et al. Elevation of circulating branched-chain amino acids is an early event in
326 human pancreatic adenocarcinoma development. *Nat Med* (2014) **20**:1193–1198.
327 doi:10.1038/nm.3686
- 328 9. Shim J-S, Oh K, Kim HC. Dietary assessment methods in epidemiologic studies. *Epidemiol*
329 *Health* (2014) **36**:e2014009. doi:10.4178/epih/e2014009
- 330 10. Ilić M, Hofman P. Pros: Can tissue biopsy be replaced by liquid biopsy? *Transl lung cancer Res*

- 331 (2016) 5:420–3. doi:10.21037/tlcr.2016.08.06
- 332 11. Canepa A, Filho JCD, Gutierrez A, Carrea A, Forsberg A, Nilsson E, Verrina E, Perfumo F,
333 Bergström J. Free amino acids in plasma, red blood cells, polymorphonuclear leukocytes, and
334 muscle in normal and uraemic children. *Nephrol Dial Transplant* (2002) **17**:413–421.
335 doi:10.1093/ndt/17.3.413
- 336 12. Reed MC, Nijhout HF, Sparks R, Ulrich CM. A mathematical model of the methionine cycle. *J*
337 *Theor Biol* (2004) **226**:33–43. doi:10.1016/J.JTBI.2003.08.001
- 338 13. Duncan TM, Reed MC, Nijhout HF. The relationship between intracellular and plasma levels of
339 folate and metabolites in the methionine cycle: A model. *Mol Nutr Food Res* (2013) **57**:628–
340 636. doi:10.1002/mnfr.201200125
- 341 14. KEGG PATHWAY: Citrate cycle (TCA cycle) - Reference pathway. Available at:
342 https://www.genome.jp/kegg-bin/show_pathway?map00020 [Accessed February 20, 2019]
- 343 15. KEGG PATHWAY: hsa00280. Available at: [https://www.genome.jp/dbget-](https://www.genome.jp/dbget-bin/www_bget?pathway+hsa00280)
344 [bin/www_bget?pathway+hsa00280](https://www.genome.jp/dbget-bin/www_bget?pathway+hsa00280) [Accessed February 20, 2019]
- 345 16. KEGG PATHWAY: One carbon pool by folate - Reference pathway. Available at:
346 https://www.genome.jp/kegg-bin/show_pathway?map=map00670&show_description=show
347 [Accessed February 20, 2019]
- 348 17. KEGG PATHWAY: Cysteine and methionine metabolism - Reference pathway. Available at:
349 https://www.genome.jp/kegg-bin/show_pathway?map=map00270&show_description=show
350 [Accessed February 20, 2019]
- 351 18. KEGG PATHWAY: hsa00220. Available at: [https://www.genome.jp/dbget-](https://www.genome.jp/dbget-bin/www_bget?hsa00220)
352 [bin/www_bget?hsa00220](https://www.genome.jp/dbget-bin/www_bget?hsa00220) [Accessed February 20, 2019]
- 353 19. Abbenhardt C, Miller JW, Song X, Brown EC, Cheng T-YD, Wener MH, Zheng Y, Toriola AT,
354 Neuhaus ML, Beresford SAA, et al. Biomarkers of One-Carbon Metabolism Are Associated
355 with Biomarkers of Inflammation in Women. *J Nutr* (2014) **144**:714–721.
356 doi:10.3945/jn.113.183970
- 357 20. Ducker GS, Rabinowitz JD. One-Carbon Metabolism in Health and Disease. *Cell Metab* (2017)
358 **25**:27–42. doi:10.1016/j.cmet.2016.08.009
- 359 21. Cho CE, Caudill MA. Trimethylamine- N -Oxide: Friend, Foe, or Simply Caught in the Cross-
360 Fire? *Trends Endocrinol Metab* (2017) **28**:121–130. doi:10.1016/j.tem.2016.10.005
- 361 22. Andraos S, Wake M, Saffery R, Burgner D, Kussmann M, O’Sullivan J. Perspective: Advancing
362 Understanding of Population Nutrient–Health Relations via Metabolomics and Precision
363 Phenotypes. *Adv Nutr* (2019) doi:10.1093/advances/nmz045
- 364 23. Shin S-Y, Fauman EB, Petersen A-K, Krumsiek J, Santos R, Huang J, Arnold M, Erte I, Forgetta
365 V, Yang T-P, et al. An atlas of genetic influences on human blood metabolites. *Nat Genet*
366 (2014) **46**:543–550. doi:10.1038/ng.2982
- 367 24. Ulrey CL, Liu L, Andrews LG, Tollefsbol TO. The impact of metabolism on DNA methylation.
368 *Hum Mol Genet* (2005) **14**:R139–R147. doi:10.1093/hmg/ddi100
- 369 25. Mentch SJ, Locasale JW. One-carbon metabolism and epigenetics: understanding the
370 specificity. *Ann N Y Acad Sci* (2016) **1363**:91–98. doi:10.1111/nyas.12956
- 371 26. Knight AK, Park HJ, Hausman DB, Fleming JM, Bland VL, Rosa G, Kennedy EM, Caudill MA,
372 Malysheva O, Kauwell GPA, et al. Association between one-carbon metabolism indices and

- 373 DNA methylation status in maternal and cord blood. *Sci Rep* (2018) **8**:16873.
374 doi:10.1038/s41598-018-35111-1
- 375 27. Clare CE, Brassington AH, Kwong WY, Sinclair KD. One-Carbon Metabolism: Linking Nutritional
376 Biochemistry to Epigenetic Programming of Long-Term Development. *Annu Rev Anim Biosci*
377 (2019) **7**:263–287. doi:10.1146/annurev-animal-020518-115206
- 378 28. James PT, Dominguez-Salas P, Hennig BJ, Moore SE, Prentice AM, Silver MJ. Maternal One-
379 Carbon Metabolism and Infant DNA Methylation between Contrasting Seasonal
380 Environments: A Case Study from The Gambia. *Curr Dev Nutr* (2019) **3**:nzy082.
381 doi:10.1093/cdn/nzy082
- 382 29. Spiros D. Garbis †, Alida Melse-Boonstra ‡, Clive E. West ‡,§ and, Richard B. van Breemen* †.
383 Determination of Folates in Human Plasma Using Hydrophilic Interaction
384 Chromatography–Tandem Mass Spectrometry. (2001) doi:10.1021/AC010741Y
- 385 30. World Health Organization, Food and Agriculture Organization of the United Nations. Chapter
386 4. Folate and folic acid. Rome (2002).
- 387 31. Zwart SR, Gibson CR, Mader TH, Ericson K, Ploutz-Snyder R, Heer M, Smith SM. Vision
388 Changes after Spaceflight Are Related to Alterations in Folate– and Vitamin B-12–Dependent
389 One-Carbon Metabolism. *J Nutr* (2012) **142**:427–431. doi:10.3945/jn.111.154245
- 390 32. Blomstrand E, Jackman SR, Witard OC, Philp A, Wallis GA, Baar K, Tipton KD. Branched-Chain
391 Amino Acid Ingestion Stimulates Muscle Myofibrillar Protein Synthesis following Resistance
392 Exercise in Humans. *Front Physiol* (2017) **8**:390. doi:10.3389/fphys.2017.00390
- 393 33. Labuschagne CF, van den Broek NJF, Mackay GM, Vousden KH, Maddocks ODK. Serine, but
394 Not Glycine, Supports One-Carbon Metabolism and Proliferation of Cancer Cells. *Cell Rep*
395 (2014) **7**:1248–1258. doi:10.1016/J.CELREP.2014.04.045

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397 **Acknowledgments**

398 This study was funded by a Faculty Research Development fund grant to MK, and a MBIE
399 Catalyst grant (The New Zealand-Australia LifeCourse Collaboration on Genes, Environment,
400 Nutrition and Obesity (GENO); UOAX1611; to JOS). SA is the recipient of a New Zealand
401 International Doctoral Research Scholarship 2017. Samples used in this study were collected
402 as part of the Fish Oil in Pregnancy Study, which was funded by a Health Research Council
403 Emerging Researcher First Grant and by a project grant from the A Better Start National
404 Science Challenge and Cure Kids.

405 The authors would like to thank PhD student Vidit Satokar for collecting the samples as part
406 of the Fish Oil in Pregnancy study, and the participants of the trial.

407 **Conflicts of interest**

408 The authors declare no competing financial interest

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