

Biomonitoring and biomarkers to assess metal-based nanomaterial exposure of consumers, workers and the general population

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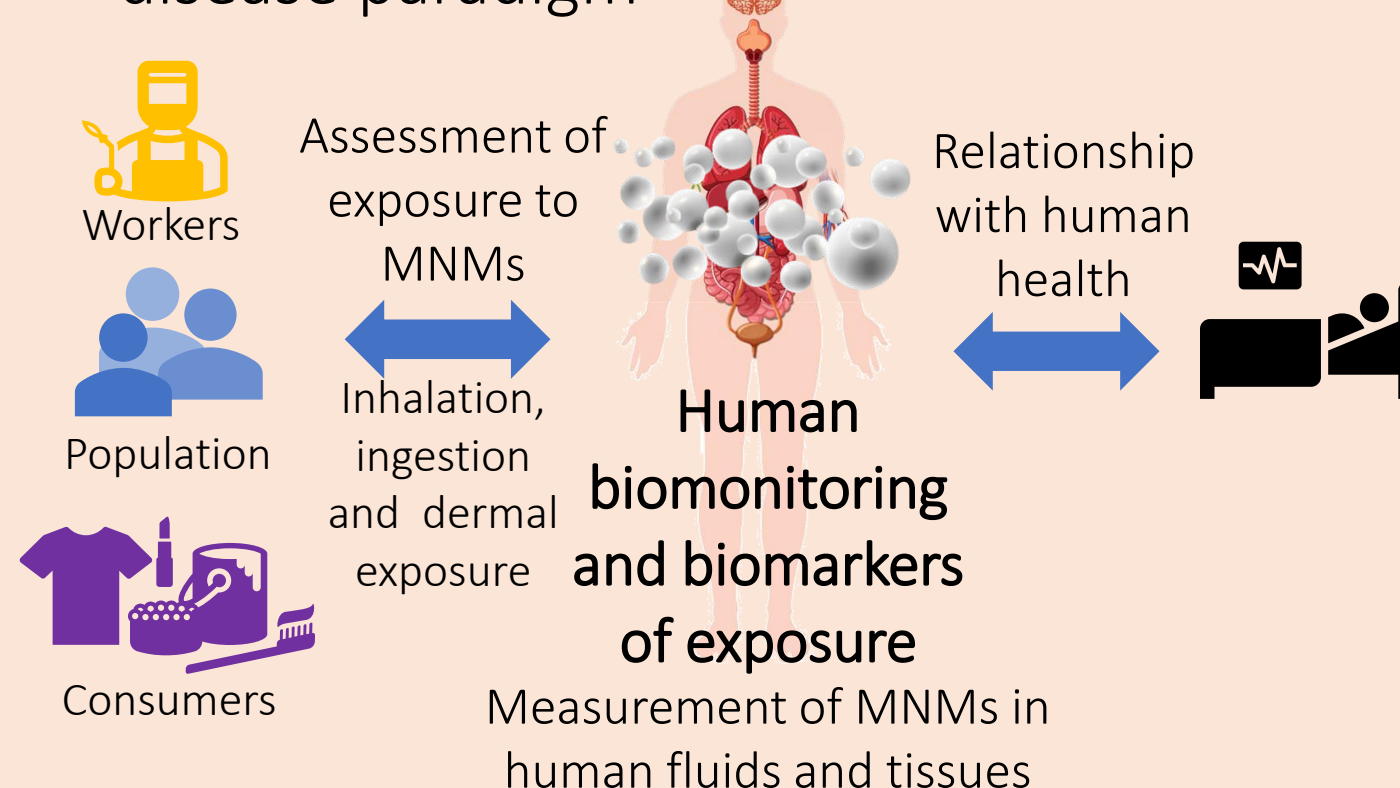


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Introduction

Human biomonitoring and biomarkers of exposure are central for measuring **metal-based nanomaterials (MNMs)** internal dose in human biological matrices, understanding the progression from MNMs exposure to effects and for health surveillance and evaluation of public interventions (Figure 1). There is a strong need to develop and harmonize MNMs **detection methods** because methods are limited and expensive, MNMs concentrations are low and many parameters have to be estimated.

Figure 1. Biomonitoring in the exposure-disease paradigm



Aim of the study

A **Single Particle Inductively Coupled Plasma Mass Spectrometry (SP-ICP-MS)** method capable of determining size, particle size distribution, composition and concentration of several MNMs was **in-house validated in human blood and urine** to be used in routine biomonitoring campaigns. Method performances as limit of detection (LoD), linearity working range, accuracy and repeatability were evaluated according to ISO/IEC 17025:2017 and others ISO on nanomaterials.

The process of MNMs detection

Table 3. In-house validation parameters

| Parameter | Value |
|-----------------|---|
| LoD | in diameter (nm) was automatically generated by the software in concentration (particles/mL) was calculated with the 3σ threshold criteria on 5 different measurements of matrix. |
| Accuracy | on size (%) was assessed by the ratio between the size certified by supplier and that found by the SP-ICP-MS analysis. |
| Repeatability | on diameter (nm) and number of particles/mL was calculated as the relative standard deviations (RSDs%) on 5 replicated measurements in matrix |
| Linearity range | in terms of R^2 of the calibration curve between number of particles/mL and the increasing of concentration. |

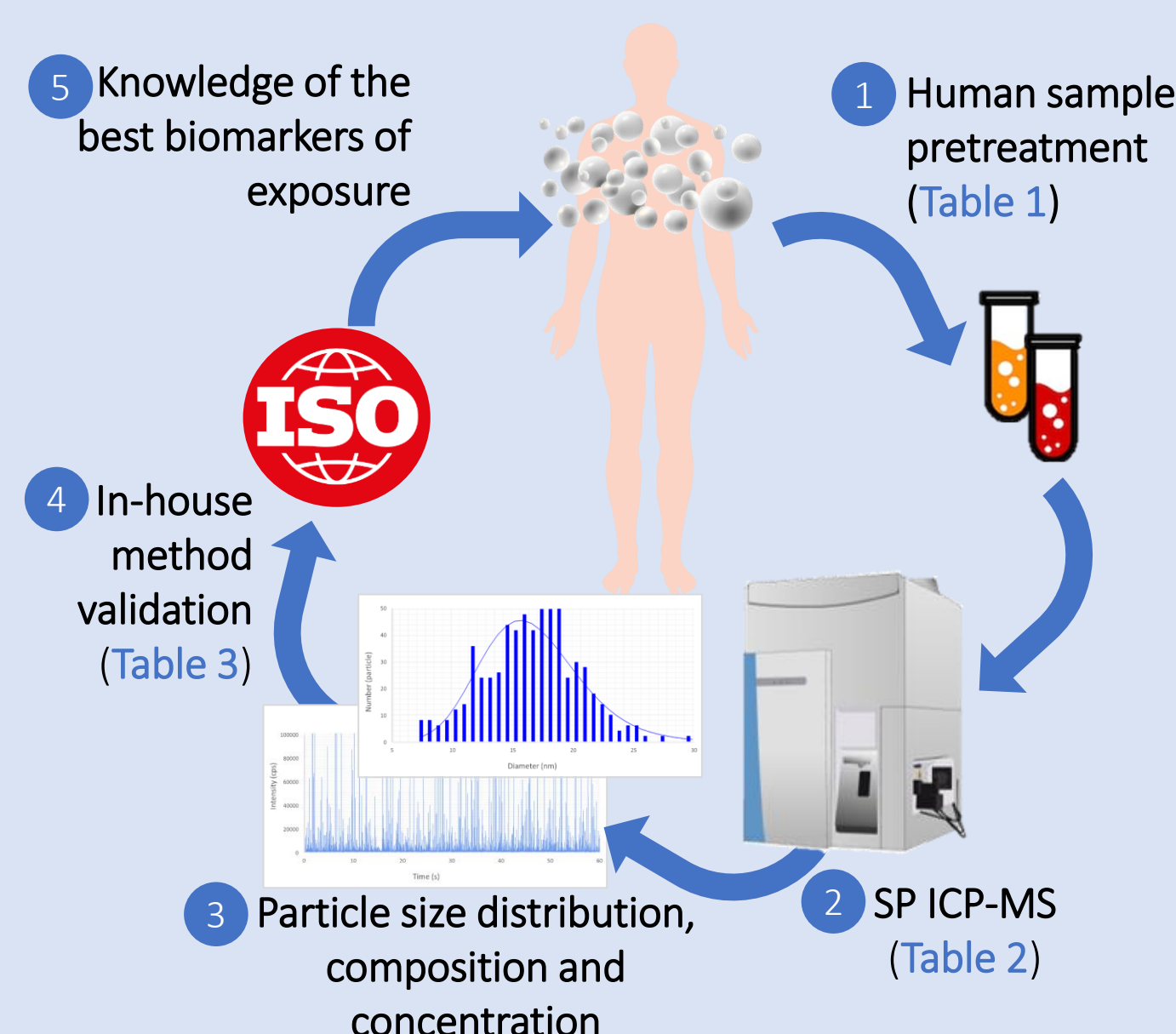


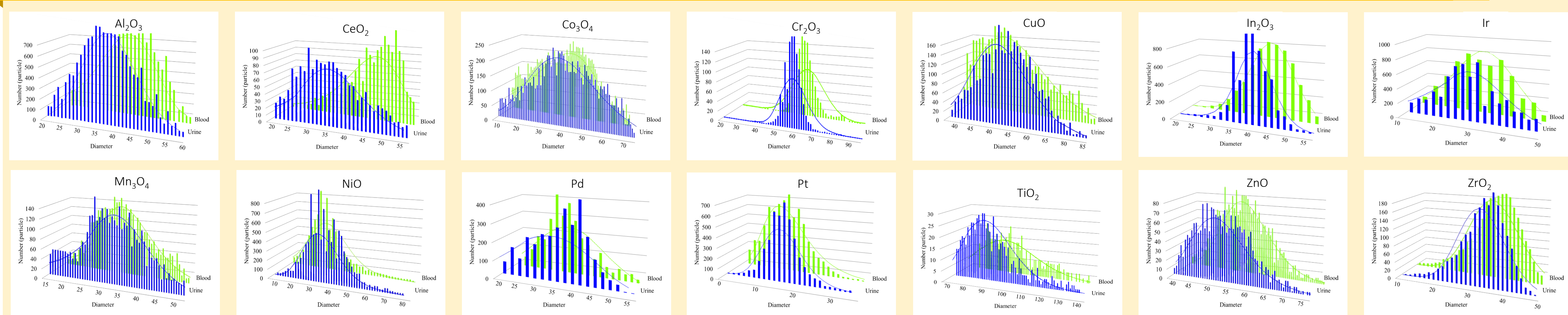
Table 1. Sample pre-treatment and standards

| | |
|-------------------------------|--|
| Urine | 1:10 v/v water dilution, sonication 10 min. |
| Blood | Alkaline extraction with 25% v/v TMAH, sonication 10 min and 24 hours at room temperature. Then, dilution with 0.1% v/v Triton-X. |
| Certified reference standards | Al ₂ O ₃ (30 nm), Co ₃ O ₄ (15 nm), Cr ₂ O ₃ (60 nm), CuO (25-55 nm), Ir ₂ O ₃ (20-70 nm), Ir (15 nm), Mn ₃ O ₄ (30 nm), NiO (18 nm), Pd (15 nm), TiO ₂ (< 100 nm), and ZnO (30-40 nm), CeO ₂ (30-50 nm), Pt (15 nm) and ZrO ₂ (30-40 nm) spiked in matrix. |

Table 2. Instrumental parameters for SP-ICP-MS data acquisition

| Parameter | Value |
|------------------------------|--|
| Instrument | iCAP-Q (Thermo Fisher) |
| Nebulizer; flow | Concentric cyclonic; 0.33 mL/min |
| Torch and injector | Quartz torch and Quartz 2.0 mm injector |
| RF Power | 1450 W |
| Dwell time | 5 msec |
| Acquisition mode | Q-Cell in KED (4.8 mL/min He), 60 s |
| Analytes | ²⁷ Al, ¹⁴⁰ Ce, ⁵⁹ Co, ⁵² Cr, ⁶³ Cu, ¹¹⁵ Ir, ¹⁹² Ir, ⁵⁵ Mn, ⁶⁰ Ni, ¹⁰⁶ Pd, ¹⁹⁵ Pt, ⁴⁷ Ti, ⁶⁶ Zn, ⁹¹ Zr |
| Density (g/cm ³) | Al ₂ O ₃ , 3.95; CeO ₂ , 7.22; Co ₃ O ₄ , 6.11; Cr ₂ O ₃ , 5.22; CuO, 6.31; Ir ₂ O ₃ , 7.18; Ir, 22.14; Mn ₃ O ₄ , 4.86; NiO, 6.67; Pd, 12.0; Pt, 21.4; TiO ₂ , 4.23; ZnO, 5.61; ZrO ₂ , 5.68 |

Particle size distribution in urine and blood



In-house validation results

Figure 2. LoD in size and concentration

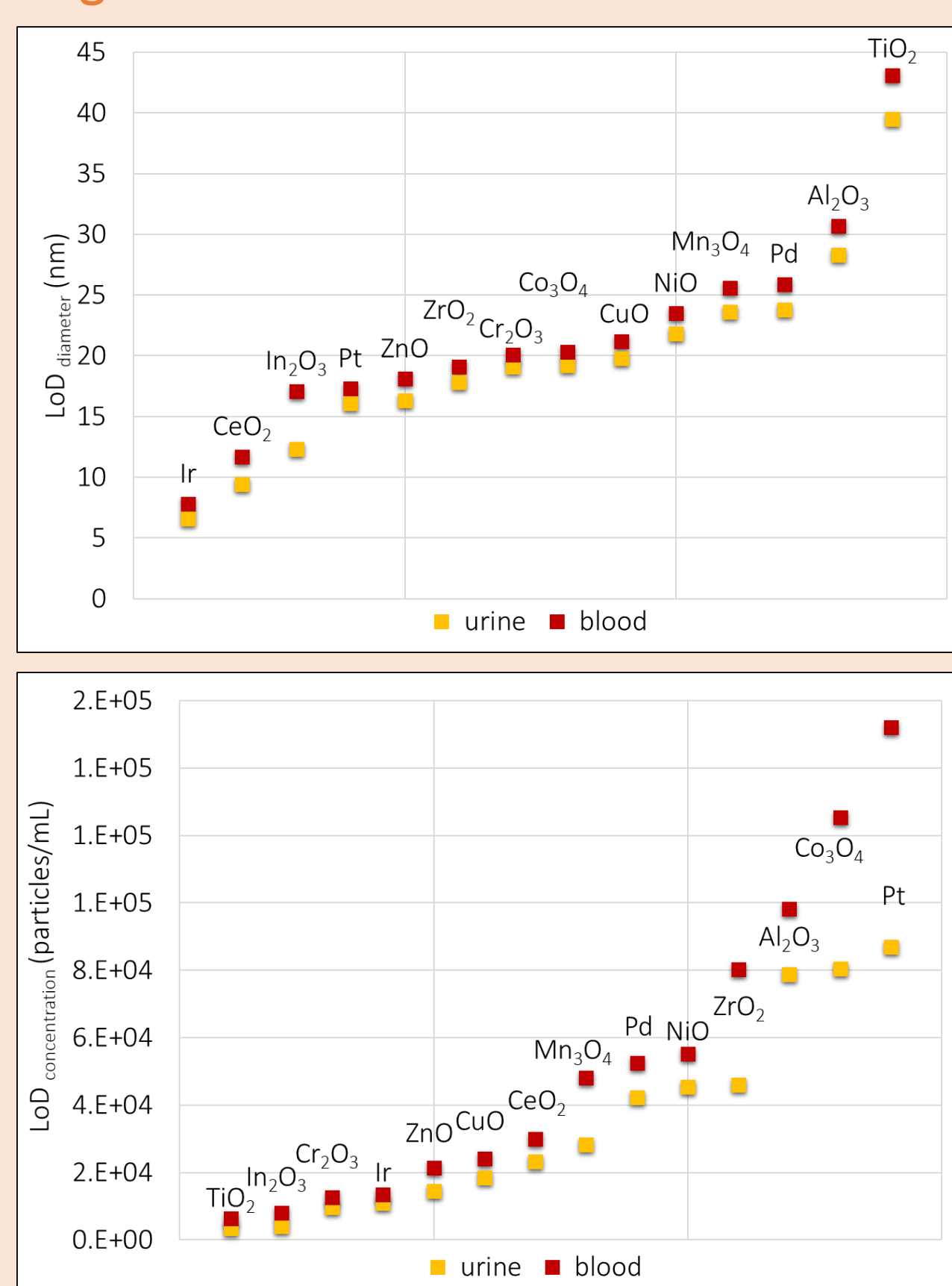


Figure 3. Measured diameter of MNMs respect to certified diameter

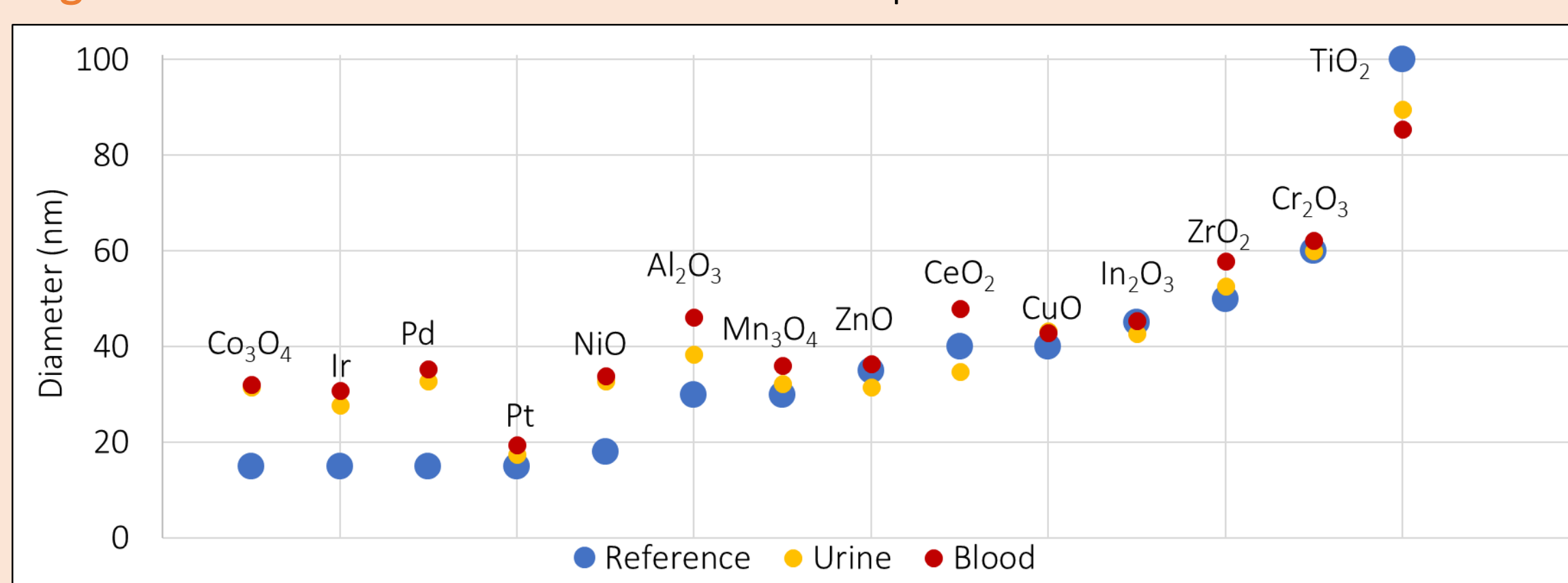
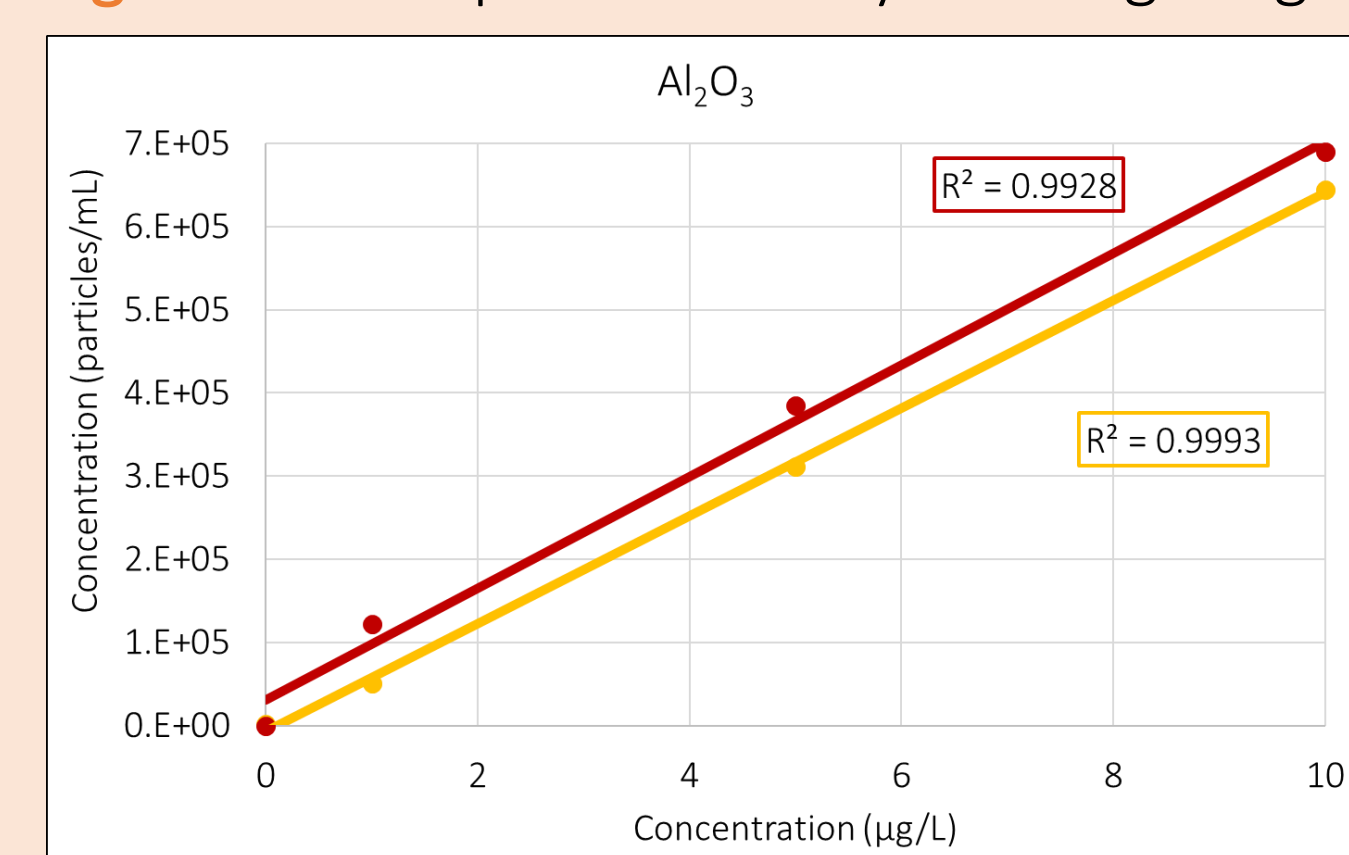


Figure 4. Example of linearity working range



- **Size LoD (Figure 2)** were low (6.6 nm) for some elements (Ir in urine) and higher (43.1 nm) for others (TiO₂ in blood)
- **Particle count LoD (Figure 2)** were low, e.g., ca. 3500 particles/mL in urine and 6000 particles/mL in blood for TiO₂
- **Accuracy (Figure 3)** was $<\pm 20\%$ for CeO₂, Cr₂O₃, CuO, In₂O₃, Mn₃O₄, Pt, TiO₂, ZnO and ZrO₂; accuracy for Al₂O₃, Co₃O₄, Ir, NiO, Pd was inappropriate due to certified size too close to method LoD or uncontrolled formation of aggregates/agglomerates
- **Repeatability** in diameter (RSD<8.7%) and particle counting (RSD<9.8%) were obtained in urine and blood for all MNMs
- Particle number increased **linearly (Figure 4)** in the range 0.10-10.0 µg/L with the **R²** values between **0.990 and 0.999**

Conclusions

The success of the SP-ICP-MS method validated in this study lies on the following aspects:

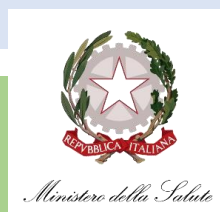
- simultaneous determination of composition, concentration (particles/mL) and size (nm)
- sample preparation simple without pre-concentration steps
- speed of analysis (60 sec) for routine measurements
- high instrumental sensitivity, accuracy and repeatability

Overall, this work identifies the MNMs (no. 14) to which the validated SP ICP-MS approach can be applied, in order to enable quantification of very small MNMs at low concentrations in human biomonitoring matrices

The method validated can be applied for the **assessment of human exposure to MNMs** both for the general population, consumers and workers

Acknowledgement

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References

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Bocca et al., 2020. Silver and gold nanoparticles characterization by SP-ICP-MS and AF4-FFF-MALS-UV-ICP-MS in human samples used for biomonitoring, Talanta, 220:121404.