

Analytical Methods

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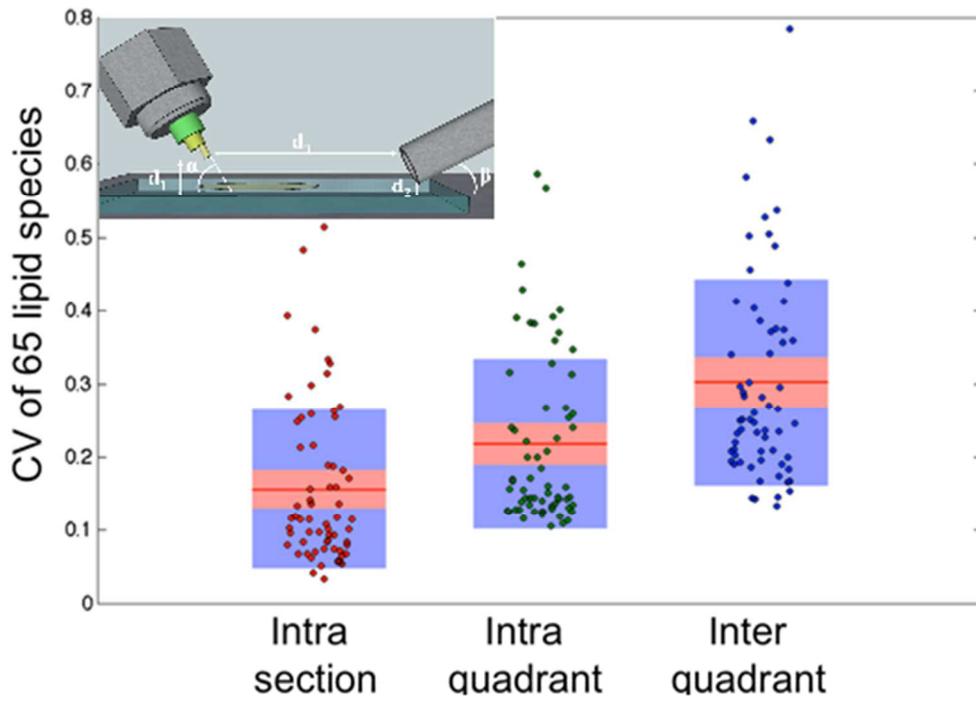


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Repeatability and reproducibility of desorption electrospray ionization-mass spectrometry (DESI- MS) for the imaging analysis of human cancer tissue: a gateway for clinical applications

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1 **Abstract**

2 In this study, we aim to demonstrate the repeatability and reproducibility of DESI-MS for the
3 imaging analysis of human cancer tissue using a set of optimal geometric and electrospray
4 solvent parameters. Oesophageal cancer tissue was retrieved from four quadrants of a freshly
5 removed tumor specimen, snap frozen, cryo-sectioned and mounted on glass slides for DESI-MS
6 image acquisition. Prior to assessing precision, optimal geometric and electrospray solvent
7 parameters were determined to maximize the number of detected lipid species and associated
8 Total Ion Count (TIC). The same settings were utilized for all subsequent experiments.
9 Repeatability measurements were performed using the same instrument, by the same operator on
10 a total of 16 tissue sections (four from each quadrant of the tumor). Reproducibility
11 measurements were determined in a different laboratory, on a separate DESI-MS platform and
12 by an independent operator on 4 sections of one quadrant and compared to the corresponding
13 measurements made for the repeatability experiments. The mean \pm SD CV of lipid ion intensities
14 was found to be 22 \pm 7% and 18 \pm 8% as measures of repeatability and reproducibility,
15 respectively. In conclusion, DESI-MS has acceptable levels of reproducibility for the analysis of
16 lipids in human cancer tissue and is suitable for the purposes of clinical research and diagnostics.

22 Introduction

23 Mass spectrometry imaging (MSI) can be used for spatially resolved analysis of ionised
24 metabolites from biological tissue sections. The chemical information is often represented in the
25 form of false colour images, that help the analyst to obtain metabolic profiles from histologically
26 distinct areas, rather than extracting non-specific metabolites from blocks of heterogeneous
27 tissue as is performed in analytical protocols involving tissue homogenization. Matrix assisted
28 laser desorption ionization mass spectrometry (MALDI-MS), secondary ion mass spectrometry
29 (SIMS) and desorption electrospray ionization mass spectrometry (DESI-MS) are common MSI
30 techniques that have been used to investigate a range of diseases including cancer, neurological
31 disorders and atherosclerosis.¹⁻¹⁰

32 DESI-MS is particularly suited at for the detection of lipids in biological tissue,⁹⁻¹¹ which are
33 defined as hydrophobic or amphiphilic low molecular weight molecules that originate mostly
34 from biological membranes.¹² Alterations in lipid metabolism in the cancer disease state has
35 attracted significant scientific interest and has bolstered the new discipline of lipidomics, which
36 is defined as the emerging field of systems-level analysis of lipids and factors that interact with
37 lipids.¹³

38 In case of DESI-MS analysis, a pneumatically assisted electrospray comprising high-velocity
39 charged liquid micro-droplets, molecular clusters and gaseous ions is directed at a surface. On
40 the impact of micro-droplets, the surface is wetted and the solvent extracts analyte molecules
41 into the liquid film temporarily present on the surface. The impact of incoming droplets results in
42 the formation of secondary droplets departing from the surface. Given that the surface is
43 electrically non-conductive, the secondary droplets will still carry net electric charge. Since the

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3 44 droplets already contain species dissolved from the surface, these species may undergo an
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5 45 electrospray-like ionization mechanism. The effective formation of gaseous ions usually takes
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8 46 place in the atmospheric interface of the mass spectrometer (MS).¹⁴ Due to their high abundance,
9
10 47 limited solubility in aqueous solvent systems and the virtually zero desorption enthalpy (i.e. from
11
12 48 the surface of electrically charged droplets) of ionization, lipids species are the dominant bio-
13
14 49 molecular compound class detected by DESI-MS (and any other electrospray-like ionization
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16 50 methods). The ionization involves minimal fragmentation of the molecules, which improves the
17
18 51 specificity of lipid identification in complex biological mixtures. Identification performance can
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20 52 be further enhanced by the application of high resolution/tandem mass spectrometry.
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25 53 There have been questions regarding the analytical performance characteristics of DESI-MS
26
27 54 including ion suppression effects (i.e. the degree that analytes suppress the ionization of other
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29 55 analytes present in the same sample) and overall yields (i.e. the fraction of the original material
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31 56 that is converted into gas-phase ions at the detector of the MS).¹⁴ Furthermore, fluctuations in the
32
33 57 solvent composition/voltage, gas flow rate, solvent flow rate and geometric set-up can also cause
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35 58 variation within the obtained mass spectral datasets.¹⁵⁻¹⁹ Bias introduced by these factors may
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37 59 compromise the precision of the technique and as a consequence may hinder the translation of
38
39 60 the technique to the level of routine clinical applications. The U.S. Food and Drug Agency
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41 61 (FDA) states that the co-efficient of variance (CV) of reproducibility should not exceed 20% for
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43 62 analytical techniques.²⁰
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50 63 In this study, we aim to demonstrate that by using a set of optimized geometric and electrospray
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52 64 parameters DESI-MS is capable of yielding highly repeatable spectral profiles of human cancer
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54 65 tissue on the same instrument and reproducible measurements performed by an independent
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56 66 operator using a different instrumental setup in a different laboratory.
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67 **Experimental section**

68 **Samples**

69 Specimen retrieval and analysis was performed under an approved and institutional review board
70 protocol, with informed written consent obtained by a licensed clinician. Tumor tissue obtained
71 from a patient with oesophageal adenocarcinoma was chosen as the measurand for comparative
72 analysis. In order to reduce biological variability affecting our measurements, we chose a
73 macro/microscopically homogenous tumor with uniform histological characteristics. Samples
74 were taken from each quadrant of the tumour after surgical resection of the oesophagus. The four
75 tissue samples were stored at -80°C prior to cryo-sectioning at 15µm thickness using a Bright
76 5030 Cryotome (Bright Instruments, Cambridgeshire, UK) set at -20°C, and thaw mounted onto
77 SuperFrost® Plus Glass slides (Thermo Fisher Scientific Inc., USA). The slides were stored in
78 closed containers at -80°C and were allowed to thaw under nitrogen flow at room temperature for
79 a standardized five minutes prior to DESI-MS analysis.

80

81 **Instrumentation**

82 DESI-MS analysis was performed using an Exactive Fourier-transform Orbitrap mass
83 spectrometer (Thermo Fisher Scientific Inc., Bremen, Germany) controlled by XCalibur 2.1
84 software and operated in negative ion mode. Data was acquired at a nominal mass resolution of
85 100,000 FWHM (mass accuracy of <4ppm); injection time was set to 1000 ms; mass to charge
86 (m/z) range was 150–1,000; capillary temperature was set to 250°C; capillary voltage was 50V;
87 tube lens voltage was -150V; and skimmer voltage was -40V. The MS parameters were kept
88 constant for the purpose of DESI-MS sprayer optimization. A 1/16” Swagelok T element-based

DESI-MS sprayer (for the details of the set-up see supplementary file 1) was used in conjunction with a home built 3D XYZ integrated linear stage, which acts as a sample holder and positioning device for the sprayer relative to the MS capillary inlet and sample (for set-up see supplementary file 2).

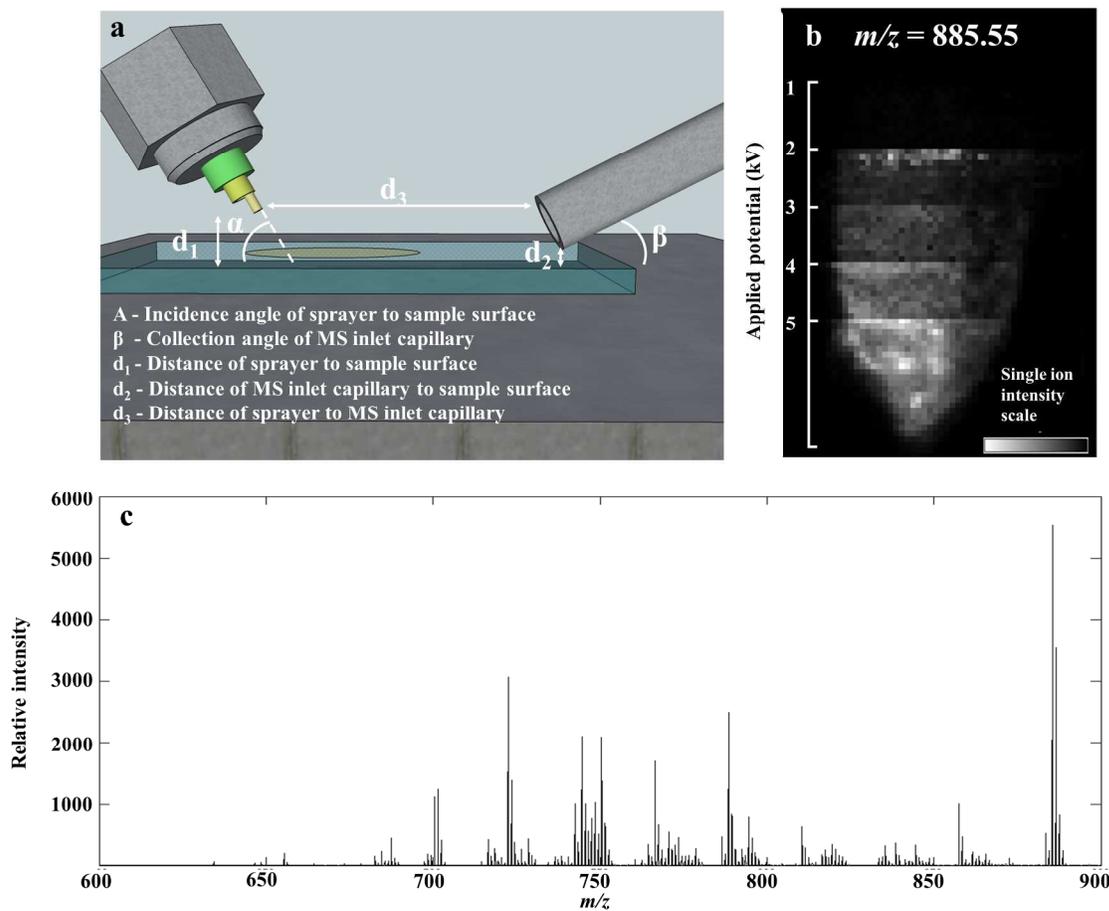


Figure 1 Optimization methodology **a)** Illustration of the DESI-MS sprayer and mass spectrometer (MS) inlet with respect to geometrical parameters **b)** An example of the optimization experiment: the settings of a given variable, in this case electric potential applied to generate the electrospray, is changed at fixed intervals during an imaging experiment on a single tissue section **c)** representative median mass spectrum in the 600-900 m/z range for the tissue analysed in this study.

102 **Process of Optimization**

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104 We optimized the parameters of the DESI-MS set-up for the purpose of lipidomic profiling by
105 determining optimal settings for maximum ion yield of lipid species. Geometric parameters of
106 the DESI-MS sprayer and electrospray solvent parameters were adjusted in a systematic fashion
107 to determine the optimum settings. Geometric parameters included the height of sprayer tip
108 relative to the sample surface, distance of sprayer tip from the MS inlet capillary and the angle of
109 the sprayer tip to the sample surface (figure 1a). Electrospray solvent parameters included the
110 ratio of MeOH and H₂O in the solvent, solvent flow rate, nebulizing gas flow rate, and electric
111 potential applied to generate the electrospray.

112 Distances were manually adjusted on the DESI-MS sprayer mount using built-in micrometre
113 screw gauges providing accuracy down to 50µm. The angle of the sprayer was manually adjusted
114 with a rotational manipulator with an accuracy of 1 degree. Solvent flow rates were adjusted with
115 a Sunchrom Micro Syringe pump carrying a 200µl syringe. Gas pressure was set using a BOC
116 Series 8500 nitrogen regulator, with an accuracy of 0.5 bar.

117 Multiple settings of each variable were tested on separate single tissue sections (example, Figure
118 1b). The tissue sections used for the optimization experiments were all from the same sample
119 from the first quadrant of the tumor, thereby minimizing biological variability influencing the
120 results. When adjusting the settings of one variable, all other variables were kept at pre-
121 determined values as follows: 2mm distance from sprayer tip to sample surface, 14mm from
122 sprayer tip to MS capillary inlet, 80° incidence angle of sprayer to surface, 95:5 v/v MeOH: H₂O
123 solvent concentration, 1.5µl/min solvent flow rate, 4 bar gas inlet pressure and a spray voltage of
124 4.5kV. The MS inlet capillary had a collection angle of 10° and set at 500µm from the sample

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3 125 surface and was not adjusted for optimization. The lateral resolution of the data acquisition (pixel
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5 126 size) was also kept constant at 75 μ m. Due to the inter-dependence of the solvent flow rate and
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8 127 gas inlet pressure for generating the nebulized solvent; these variables were tested together
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10 128 through multiple combinations of their settings.
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13 129 **Determination of precision**

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17 130 The precision of an instrument is defined as the closeness of agreement between independent test
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19 131 results obtained under stipulated conditions.²¹ Quantitative measures of precision depend
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21 132 critically on these conditions. Repeatability and reproducibility conditions are particular sets of
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23 133 extreme stipulated conditions. Repeatability is the precision obtained under the same conditions
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25 134 when independent test results are obtained with the same method, on identical test items, in the
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27 135 same laboratory, by the same operator, using the same equipment, and within short intervals of
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29 136 time. Repeatability leads to an estimate of the minimum value of precision. Reproducibility is the
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31 137 precision obtained under changing conditions when independent test results are obtained with the
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33 138 same method, on identical test items, but in different laboratories, with different operators, using
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35 139 different (or recalibrated) equipment.
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43 141 A total of 16 tissue sections including four from each quadrant of the tumor were subjected to
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45 142 DESI-MS image acquisition in a random order, performed consecutively in a single time frame,
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47 143 in the same laboratory and by the same operator for measures of repeatability. All geometric and
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49 144 electrospray parameters were kept constant as per the optimized values.
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3 146 A total of 4 tissue sections from a single quadrant of the tumor were subjected to DESI-MS
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5 147 image acquisition in a random order, performed consecutively, in a different laboratory, with a
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8 148 different operator, using a different sprayer and MS (LTQ Orbitrap Discovery, Thermo Fisher
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10 149 Scientific Inc., Bremen, Germany) and compared to the initial data set of the same quadrant, for
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12 150 measures of reproducibility. All geometric, electric and solvent parameters of the DESI-MS
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15 151 source were kept constant as per the previously determined optimized values. Stored samples of
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17 152 the tissue sections were analysed in the same time frame as the repeatability experiments to
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20 153 avoid any bias introduced through storage.

21 22 23 154 **Data analysis methods**

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26 155 Following DESI-MS image acquisition, an imzML converter (Justus-Liebig-Universität,
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28 156 Giessen, Germany) was used to combine the series of raw files for each imaging dataset. The
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30 157 subsequent imzML files were then read into a MATLAB (MathWorks) environment using an in-
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33 158 house written function, incorporating a mass range selection of m/z 600 to 900 to limit spectral
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36 159 feature identification to lipids.

37 38 39 160 **Optimization**

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42 161 The ion images from the tissue sections used for optimization were divided into sub-segments,
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44 162 directly relating to each setting or combination of settings of the variables under investigation
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47 163 (figure 1b). The relevant mass spectra (approximately 300) from each sub-segment were then
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49 164 extracted from the corresponding image dataset and a median spectrum was calculated. The
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51 165 number of spectral features, defined as the quantity of mass spectral peaks between the m/z range
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54 166 600-900 and with a height filter set to ten times the baseline noise, was calculated for each
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56 167 median spectrum using the *mspeaks* function within the bioinformatics toolbox of MATLAB.
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3 168 The spectral features were not de-isotoped for the purpose of the optimisation data analysis. The
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5 169 total ion count (TIC) was then calculated for the defined spectral features for each median
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11 171 ***Repeatability***

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14 172 A full resolution median spectrum was created from the tumour specific regions of the 16
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17 173 imaging dataset, in order to remove isotope peaks such that they were not included in the
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19 174 comparison. Following identification of all peaks in the 600-900 Da mass range, an in-house
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21 175 written de-isotoping algorithm scanned the surrounding of every peak for its carbon-13 isotope.
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24 176 A peak was identified as an isotope peak if 1) the mass to charge ratio difference to its parent
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26 177 peak was $(1.0034/\text{abs}(z) \pm \text{tolerance})$ and 2) the intensity difference matched theoretical value \pm
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28 178 tolerance. Approximate theoretical carbon-13 intensities were determined by using a virtual
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30 179 lipid, 'averagine', based on the elemental composition of 21 representative lipid species. Peaks
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33 180 not having a ^{13}C isotope peak and all found isotope peaks were excluded from the 16 imaging
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35 181 datasets. In order to ensure sufficient intensity for a meaningful comparison over all datasets,
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37 182 peaks with intensity less than ten times the base noise level in the median spectrum were
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39 183 removed, this resulted in a total of 65 lipid peaks for comparative analysis (supplementary file
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42 184 3). Integration regions of ± 50 ppm were set for peak extraction from the median fold normalised
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44 185 spectra with the data then stored in a sixteen-member data structure, with each cell containing the
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47 186 65 extracted lipid peaks for each individual spectrum from the sixteen datasets.

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51 187 For the CV calculations, 10 spectra were randomly selected from either a single sample (intra-
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53 188 section), or samples from the same quadrant (intra-quadrant) or samples from the whole dataset
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55 189 (inter-quadrant) and averaged to create a single data vector. For each data vector, the 65 pre-
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3 190 determined peak regions were integrated and the mean of their CVs were calculated. This
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6 191 process was repeated 50 times for each sampling group. The mean and standard of deviation of
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8 192 the 50 mean CVs of each sample group were calculated.
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11 193 In order to compare the lipid profiles of the 16 tissue sections, the average of 10 full spectra (m/z
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13 194 600-900), repeated 25 times were randomly collected from each of the 16 imaging datasets, pre-
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16 195 processed (vide supra), log transformed, and analysed by principal component analysis (PCA).
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18 196 Further comparisons were made by hierarchical cluster analysis (HCA). In this case, four regions
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21 197 of interest were manually selected from each of the 16 ion images and their corresponding
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23 198 spectral data were averaged, giving a total of 64 data vectors. Pairwise distances were calculated
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26 199 with the 'correlation' metric within the *pdist* MATLAB function. The hierarchical tree was
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28 200 encoded using the 'average' metric for the *linkage* function.
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31 201 The correlation pairwise distance metric calculates the distances based on one minus the
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33 202 correlation between points, whilst the average metric for computing distance between clusters
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36 203 uses the un-weighted average distance. These metrics were selected as they gave the highest
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38 204 score from all available combinations for a cophenetic correlation calculation (obtained using the
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40 205 *cophenet* function). This is a measure of correlation between the distances obtained from the tree
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43 206 and those used to construct the tree; a higher correlation score indicates a more faithful
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45 207 representation of the original distances.
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48 ***Reproducibility***

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51 209 Data from the eight tissue sections (four from each instrument) were pre-processed (as per the
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53 210 repeatability analysis). Due to the higher sensitivity of the Exactive instrument, not all of the
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56 211 peaks from the first analysis were consistently detected within the LTQ Orbitrap data. Using the
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3 212 same conservative ten times baseline noise metric as previously, the peak list for the comparison
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5 213 was reduced to 27 lipid species. The CV was calculated for their ion intensities across the four
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8 214 tissue sections for each separate instrument followed by combination of the whole data set.
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14 216 **Results and Discussion**

17 217 **Optimization of experimental parameters**

18 218 The number of spectral features in the m/z range of 600-900 and their associated TIC values
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21 219 obtained for various settings of geometric and electrospray parameters are demonstrated in figure
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25 220 2. Previous studies investigating the droplet dynamics of DESI-MS support our findings
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28 221 regarding the optimum values for different parameters.^{14-18,23-29}
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31 222 The optimal settings determined for our DESI-MS ion source were a sprayer to surface distance
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33 223 of 2mm, sprayer to MS capillary inlet of 14mm, solvent flow rate of 1.5ul/min, gas flow rate of 7
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36 224 bars, 90:10 v/v MeOH: H₂O solvent concentration and a spray potential of 5kV. An incidence
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38 225 angle of 75 degrees was selected due to the minimal variation observed in the studied range of
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41 226 values. We compared the outcome of two adjacent sections using the new versus our preliminary
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43 227 set of experimental values and demonstrated a 192% increase in the number of detected spectral
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45 228 features and increase in TIC by one order of magnitude in the 600-900 m/z range (figure 2h).
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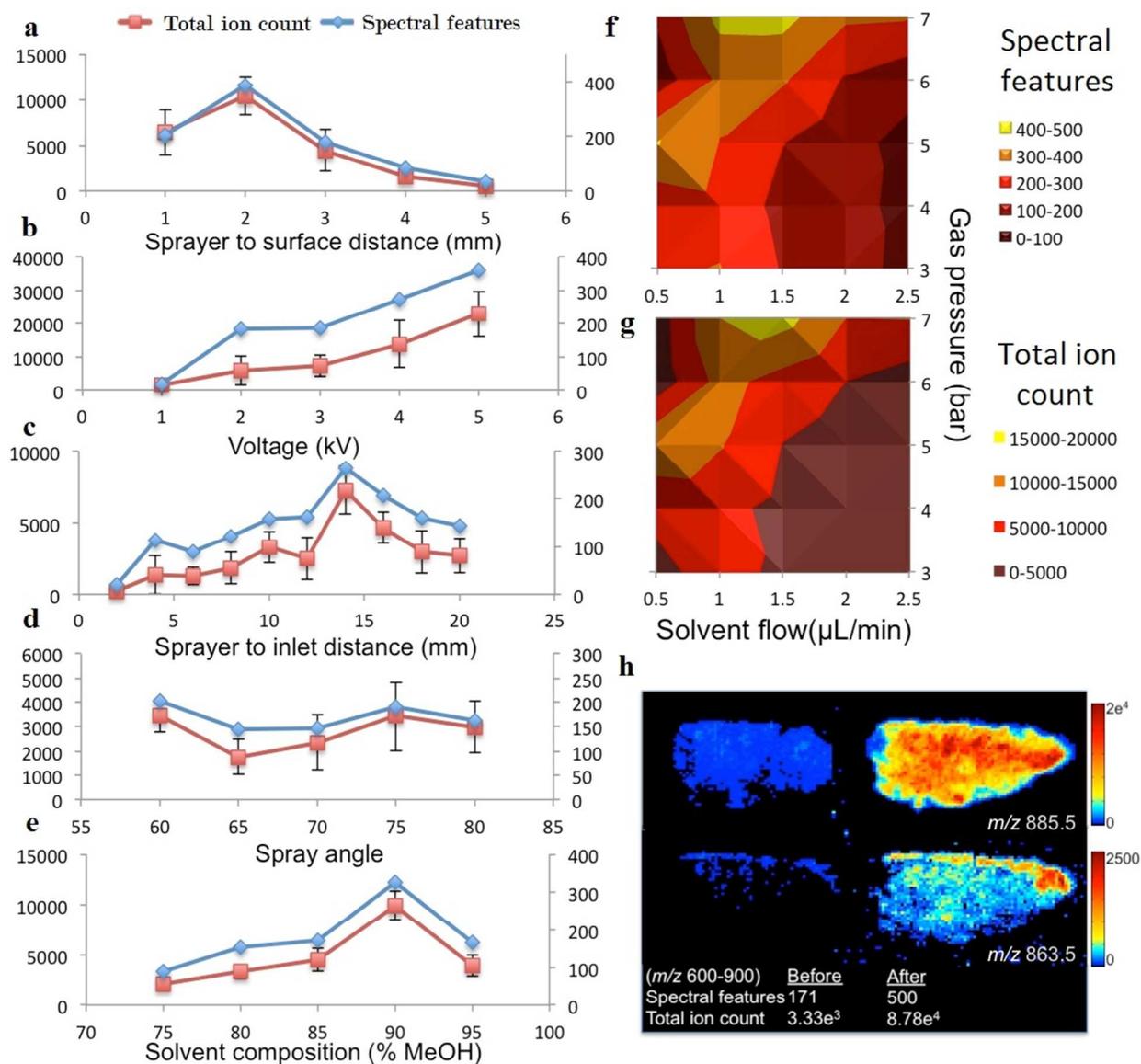


Figure 2 a-e) effect of different variable settings on total ion count (red) and spectral features (blue) for the m/z 600-900 spectral region, error bars indicate 95% confidence intervals **f) & g)** surface maps of spectral features and total ion count for the inter-relationship between solvent flow and gas pressure. **h)** before and after optimization images of two lipid species from a tumor section.

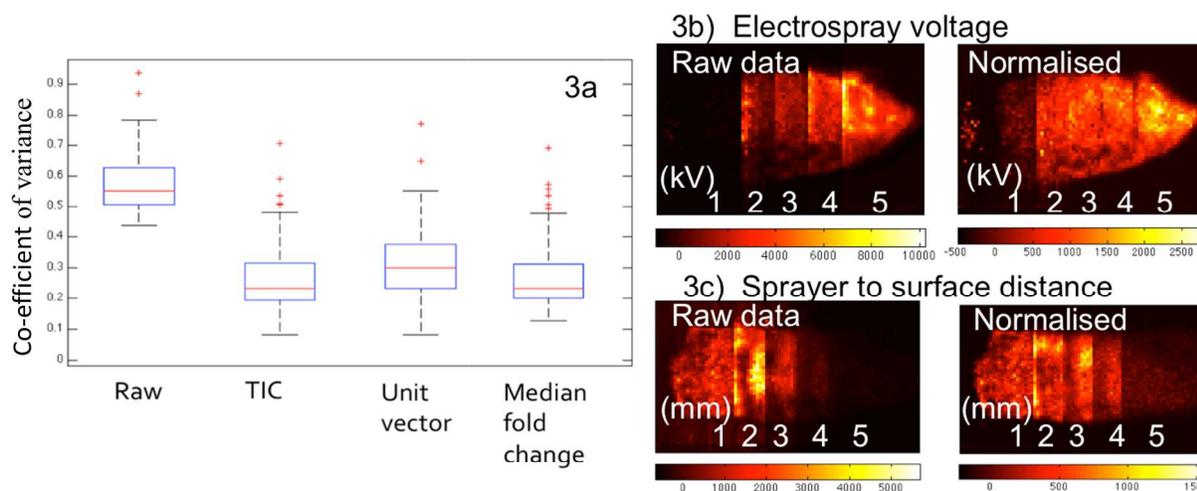
241 **Repeatability**242 *Normalization*

243 Ion intensity variations will occur within ion images of a homogenous tissue surface, due to
244 slight variations in the spray conditions, tissue thickness/moisture content and conductivity of the
245 slide. The phenomenon is analogous with variations in matrix coverage/laser power in MALDI
246 imaging leading to similar fluctuation of signal intensity.³⁰ We calculated the CV of the signal
247 intensity of Rhodamine B, marked on a glass slide in the form of red ink. Over a 4 minute time
248 period the CV of the Rhodamine B was 11%. The mean CV of our tissue raw data (without
249 normalisation) was 55% (figure 3a), suggesting that tissue factors are responsible for a greater
250 contribution to this variation in signal intensity.

251 Normalization is justified to ensure that pixels are not excluded from a group based on
252 systematically lower ion intensities across all peaks within the spectrum. While fluctuation of
253 overall intensity can be corrected by normalization, it does not correct for missing peaks or other
254 pattern-level fluctuations in the spectra. Therefore, the pixels with different feature sets will be
255 separately classified by multivariate statistical analysis methods.

256 The aim of normalization is to account for variation in ion intensities that is complicit within the
257 acquisition and not a naturally occurring biological fluctuation over the surface of the sample. By
258 far the most commonly used method – in the field of imaging mass spectrometry – is to
259 normalize to the sum of all spectral intensities, otherwise known as the TIC. However, the
260 performance of this approach can be compromised by the unexpected intensity change of a single
261 high intensity peak.³¹ Normalization to the base peak (unit vector normalization) is suitable when
262 the base peak is the same in each spectrum and it shows uniform intensity across the entire tissue
263 section (or histologically homogeneous segment).³² However, even in cases where the tissue

264 section is assumed to be homogenous, this approach is still likely to fail due to undetermined
265 biological variation.



266 **Figure 3 a)** Coefficient of variance for 65 lipid species identified in the 600-900 m/z range for
267 the full data set, and following different normalization methods. **b&c)** first principal component
268 score image of tissues analysed under varying conditions (electrospray voltage and sprayer to
269 surface distance respectively) when PCA analysis is performed on raw and then normalized
270 data.
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272 Although the spectra collected within the current study are expected to be highly uniform due to
273 the choice of tissue, the general purpose of tissue imaging experiments is still to identify regions
274 with different chemical profiles. Consequently, it would be desirable to have a normalization
275 technique that not only corrects for variance in the spectral intensity but also facilitates the
276 confident discovery of changes within lipid spectral patterns. For this reason we opt to use
277 median fold change within our workflow. From a computational point of view, the fold changes
278 of non-differentially expressed lipid species between pixels should be approximately one. If this
279 were not the case, the robust estimate of this systematic bias would be shown by the median of

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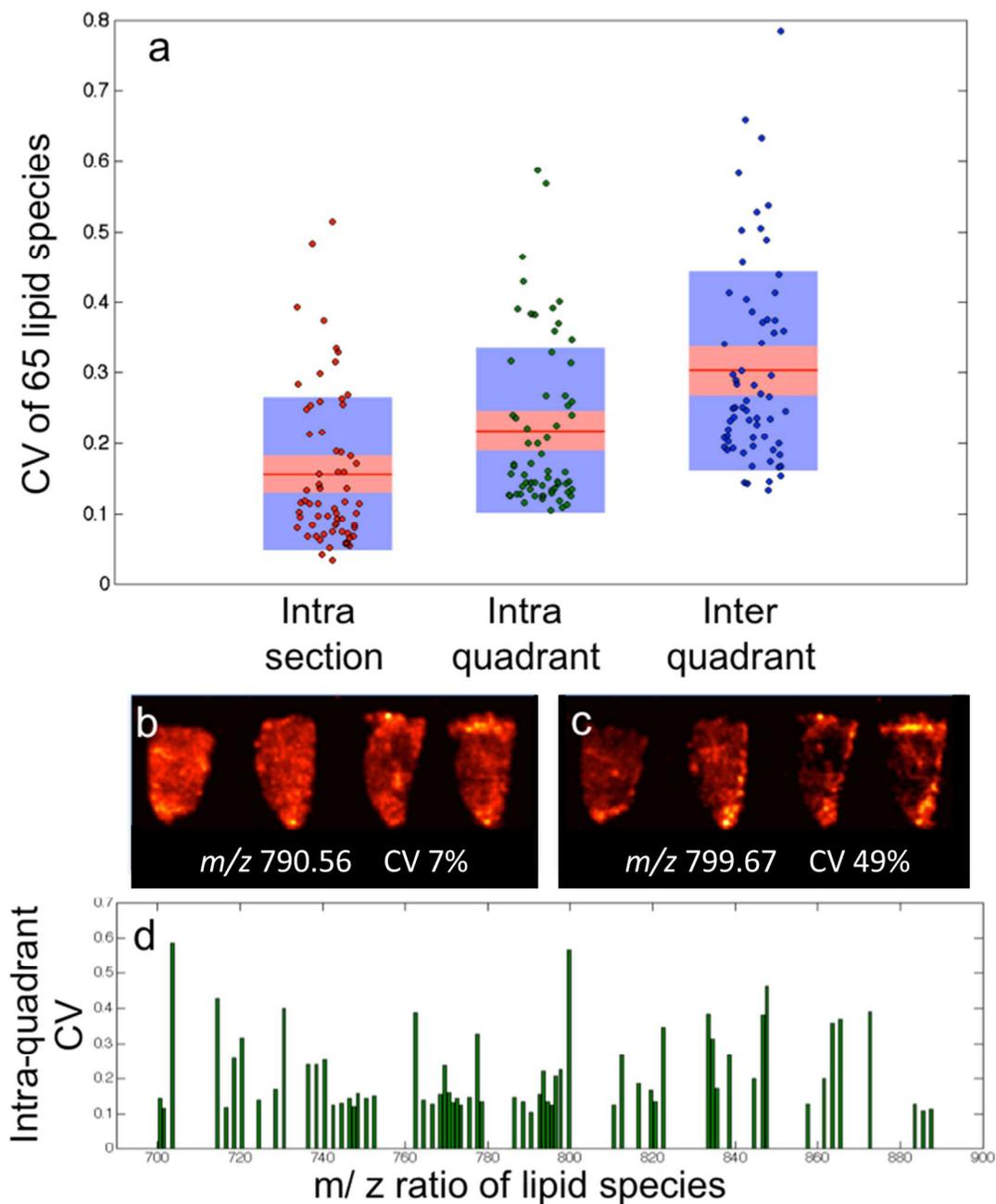
9 282 As seen in figure 3a, although the tissue samples are thought to be homogenous and all analysis
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11 283 parameters were kept the same, the CV for the selected lipid species when all sixteen samples are
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13 284 compared has a median value of 55% within the raw data, with some outliers in excess of 90%.
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15 285 This is accounted for by day-to-day variation in the analysis as no single tissue section has a
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17 286 median CV greater than 25%. All three of the normalization techniques discussed resulted in a
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19 287 considerable improvement; however the outliers still remained, suggesting the presence of a
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21 288 biological effect (heterogeneous distribution) as opposed to experimental.
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26 289 Figure 3b and 3c illustrate the ability of normalization to correct for fluctuations in analysis
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28 290 conditions. The image on the left shows the first principal component score image of the raw
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30 291 data of tissue sections analysed under five varying conditions, electrospray voltage in 3b and
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32 292 distance between sprayer tip and the tissue in 3c. The optimum setting is clearly demonstrated by
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34 293 the raw data in both cases, with the other values having a lower contribution to the PC
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36 294 proportionally to their distance from the optimum. When median fold normalization is carried
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38 295 out, the PC1 scores demonstrate that the datasets acquired under different conditions now group
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40 296 much closer together, although one would expect that these differences associated with
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42 297 significant changes in experimental conditions cannot be eliminated by sole normalization.
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44 298 However it is shown in 3c, the normalization can correct for a +/- 1mm change from the 2mm
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46 299 optimum of the sprayer to tissue distance, far greater than any human error (precision of human
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48 300 hands and eye). Similar observations were made for all of the conditions studied.
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3 302 ***Coefficient of variance of lipid species intra-section, intra-quadrant and inter-quadrant levels***
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7 303 The CV of the 65 lipid species were calculated when each tissue section is analysed separately
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9 304 (intra-section), when each tumor quadrant is treated as a single dataset (intra-quadrant) and
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11 305 finally all sixteen sections combined into one dataset (inter-quadrant). The mean CV of the 65
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13 306 lipid species (Supplementary file S3) was found to increase with each level of the hierarchy,
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15 307 from intra-section ($16\pm 7\%$) to intra-quadrant ($22\pm 7\%$) to inter-quadrant ($30\pm 14\%$, figure 4a).
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17 308 This is likely associated with increasing biological heterogeneity, which is a consequence of
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19 309 increased distance separation between samples taken from the tumor. For example, the lipids
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21 310 peaks with m/z value of 703.52 and 799.67 have a CV of 51% and 49% respectively, at the intra-
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23 311 quadrant level. The high CV values of these single ions can be explained by biological
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25 312 heterogeneity as shown by their non-uniform distribution across four tissue sections from the
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27 313 first tumor quadrant (figure 4c). In comparison, the lipid peak m/z 790.56 has a more uniform
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29 314 distribution across the four sections (figure 4b) and has a CV of only 7%. Despite the presence of
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31 315 sample heterogeneity, many of the lipids demonstrate similar signal stability across the multiple
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33 316 sections, especially the Phosphatidylethanolamine in the m/z range 720–760.
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317
 318 **Figure 4 a)** Boxplot (mean, red band; 95% confidence, pink box; 1 standard of deviation, blue
 319 box) representation for the coefficient of variance of 65 lipid species when each tissue section is
 320 analysed separately (intra-section), when each tumor quadrant is treated as a single dataset
 321 (intra-quadrant) and finally all sixteen sections combined into one dataset (inter-quadrant). **b)**
 322 Single ion ($m/z=790.56$) images of four sections from the same quadrant demonstrating
 323 biological homogeneity with a low CV value **c)** Single ion ($m/z=799.56$) images of four sections
 324 from the same quadrant demonstrating biological heterogeneity causing a high CV value. **d)**
 325 Intra-quadrant CV values for the 65 lipids plotted against mass to charge ratio to demonstrate
 326 that there is no relationship with lipid mass.

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3 327 The intra-quadrant mean \pm SD CV of 22 \pm 7% is the best representation of the repeatability of the
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6 328 instrument, as measurements are performed on different samples and have less contribution from
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8 329 biological heterogeneity as found at the inter-quadrant level. The repeatability of the instrument
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11 330 is such that if two regions of interest were compared from different samples, it would mean a
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13 331 fold change of only 1.3 would be required to determine a significant difference with a 95%
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15 332 confidence.

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18 333 *Lipid profile pattern*

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21 334 The variance of spectral pattern in a given histologically homogeneous region of a tissue is the
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24 335 most critical parameter for multivariate statistics-based tissue classification workflows.
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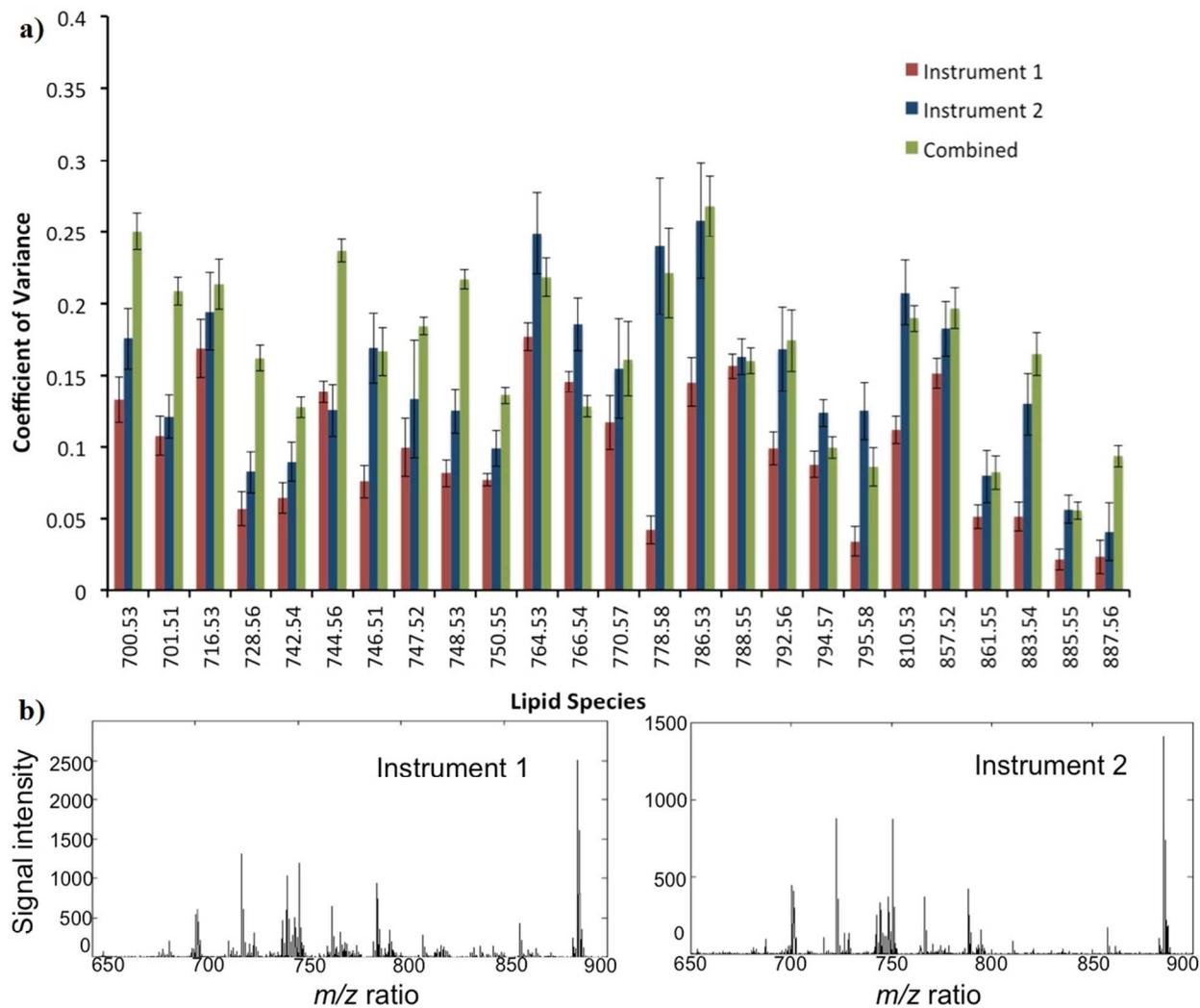
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3 343 Consequently, the lipid profiles were compared by PCA, with the resulting score plot colour
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5 344 coded by individual tissue section with each quadrant having its own colour group (figure 5a).
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8 345 Loading plots are included in supplementary file S4. The data points in figure 5a from each
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10 346 individual tissue section scatter within a single large group in the 3 dimensional PCA space (first
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12 347 three components); with few outlying data points. Within the main cluster, it is evident that the
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14 348 data groups from the different quadrants of the tumor show high levels of overlap. This is
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16 349 expected as these sections are from spatially remote regions of the biological mass, whereas the
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18 350 samples from the same quadrant are serial sections (original distance of corresponding voxels is
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20 351 less than 50 μ m). The fact that there is no apparent sub-grouping within the individual quadrants
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22 352 suggests that spectra from the same tissue analysed at different times cannot be differentiated
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24 353 based on their lipid fingerprint. This is supported by the HCA in figure 5b where mean spectra
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26 354 were created from four tumour specific areas from each section. Here again we see that each
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28 355 quadrant clusters together, however, at the following level the sub-regions of each tissue section
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30 356 do not cluster.
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37 **Reproducibility**

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40 358 The reproducibility of DESI-MS for the analysis of ion intensities of 25 selected lipid species is
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42 359 demonstrated in figure 6. The mean CV \pm SD for the 25 lipid species from instrument 1 (Exactive
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44 360 FTMS) and 2 (LTQ Orbitrap XL) were 10 \pm 5 and 16 \pm 7%, respectively. When data from the
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46 361 DESI-MS platforms are combined, the reproducibility or mean CV \pm SD is 18 \pm 8%. In general, the
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48 362 CVs of lipids for instrument 2 are greater than instrument 1, which can be attributed to a less
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50 363 stable DESI-MS ion source and an inferior MS sensitivity. The CV for reproducibility is less
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52 364 than that for repeatability as only sections from the fourth quadrant of the tumour were chosen
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365 for the purpose of analysis: to reduce the influence of biological heterogeneity confounding the
 366 results (Supplementary file S3).

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369 **Figure 6 a)** Coefficient of variance for 25 lipid species from four sections of the same quadrant
 370 when analysed on two different DESI-MS platforms and when the data is combined to determine
 371 the reproducibility of the lipid profiles **b)** Representative mass spectra of lipid profiles from
 372 instrument 1 (Exactive FTMS) and 2 (LTQ Orbitrap XL).

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3 374 In comparison, a study by Dill et al. investigated the reproducibility of DESI-MS in five serial
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5 375 sections of rat brain.³⁴ The methodology, however, was more in keeping with repeatability rather
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8 376 than reproducibility, which was assessed by two methods: first by calculating the ratio between
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10 377 the absolute intensity of two main peaks and then performing an analysis of the full spectrum
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12 378 based on normalized vectors. The best values for the ratio and normalized vector analysis were a
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15 379 relative standard deviation (RSD) of 4.7%-8% and 0.8%, respectively.³⁴
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18 380 A study of human plasma lipid extracts with LC-MS demonstrated a CV of less than 15%.³⁵ A
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20 381 further study of lipid extracts from rat heart/skeletal muscle mitochondria using HPLC-MS
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22 382 showed an inter-day CV of $\leq 11\%$ for different groups of glycerophospholipids.³⁶ However, these
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25 383 studies did not adhere to the strict stipulated conditions for measuring reproducibility as per the
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28 384 definition,²¹ and therefore meaningful comparisons cannot be made with our data. In our study,
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30 385 the results of reproducibility meet the requirements by the FDA, which states that the CV should
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32 386 not exceed 20% as per chromatographic methods.²⁰
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36 **Conclusion**

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39 388 This is the first study to report measurements of precision for the imaging analysis of human
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41 389 cancer tissue using DESI-MS. The optimal parameters for the DESI-MS ion source were in
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44 390 coarse agreement with the results of previous studies and they were consistent with the droplet
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46 391 pick-up ionization mechanism of DESI-MS. Median fold change provided the optimal method
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48 392 for normalization of data. Repeatability and reproducibility for measurements of lipid intensities
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51 393 in tissue sections were 22% and 18%, respectively.
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54 394 The reproducibility of DESI-MS is appropriate for accurate lipidomic profiling studies of human
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56 395 tissue for meaningful inter-sample comparison of various disease states such as cancer. Due to
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3 396 the inherent difficulties associated with introducing internal standards into intact human tissue,
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5 397 the technique is limited to a semi-quantitative capacity which means that is better suited to lipid
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8 398 ratio identification of specific tissue types, commonly referred to as the “fingerprint”, which can
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10 399 be used with increased confidence for the purpose of automated histology with MSI.

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13 400 The evolving field of lipidomics will benefit from technologies that have an acceptable level of
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15 401 precision for profiling and targeted studies of lipids in human disease. Well established
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17 402 chromatographic techniques such as LC-MS have remained the gold standard due to their
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19 403 quantitative capacity, range of lipid detection and ease of automation. However these techniques
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21 404 generally build on lipid extraction-type sample preparation, which lack histological specificity,
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23 405 encompassing all of the various cellular components rather than specific cells of interest. DESI-
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25 406 MS not only has the added advantage of spatially and histologically resolved data acquisition, it
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27 407 also has acceptable levels of reproducibility for the purposes of lipidomic profiling.

32 33 408 **Supporting Information**

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36 409 Contents of material supplied as Supporting Information:

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39 410 Supplementary files 1: DESI Sprayer construction

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41 411 Supplementary files 2: Home-built 3D XYZ integrated DESI-MS stage

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43 412 Supplementary files 3: Mean CVs of 65 lipid peaks

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45 413 Supplementary files 4: Loading plots

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3 418 **Author Contributions**
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5
6 419 ‡ NA and EJ are joint first authors and they contributed equally. The manuscript was written
7
8 420 through contributions of all authors. All authors have given approval to the final version of the
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10 421 manuscript
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13
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15

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33 429 **Abbreviations**
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35
36 430 DESI-MS, desorption electrospray mass spectrometry; MSI, Mass spectrometry imaging; total
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38 431 ion count; MALDI, Matrix assisted laser desorption ionization; SIMS, secondary ion mass
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40 432 spectrometry; MS, mass spectrometer; RSD, relative standard deviation; CV, co-efficient of
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42 433 variance; ppm, parts per million; PCA, principal component analysis; HCA, hierarchical cluster
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44 434 analysis ; SM, Sphingomyelin; PA, Phosphatidic acid; PS, Phosphatidylserine; HPLC-MS, high
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46 435 performance liquid chromatography mass spectrometry; LC-MS, liquid chromatography mass
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48 436 spectrometry.
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439 **References**

- 440 1. S. M. Rahman, A. L. Gonzalez, M. Li, E. H. Seeley, L. J. Zimmerman, X. J. Zhang, M.
441 L. Manier, S. J. Olson, R. N. Shah, A. N. Miller, J. B. Putnam, Y. E. Miller, W. A.
442 Franklin, W. J. Blot, D. P. Carbone, Y. Shyr, R. M. Caprioli, and P. P. Massion, *Cancer*
443 *Res.*, 2011, **71**, 3009-17.
- 444
- 445 2. M. Shi, J. Jin, Y. Wang, R. P. Beyer, E. Kitsou, R. L. Albin, M. Gearing, C. Pan and J. J.
446 Zhang, *Neuropathol. Exp. Neurol.*, 2008, **67**, 117-24.
- 447
- 448 3. J. Pierson, J. L. Norris, H. R. Aerni, P. Svenningsson, R. M. Caprioli and P. E. Andren, *J.*
449 *Proteome Res.*, 2004, **3**, 289-95.
- 450
- 451 4. N. Zaima, T. Sasaki, H. Tanaka, X. W. Cheng, K. Onoue, T. Hayasaka, N. Goto-Inoue,
452 H. Enomoto, N. Unno, M. Kuzuya and M. Setou, *Atherosclerosis*, 2011, **217**, 427-32.
- 453
- 454 5. P. Fragu, J. Klijanienko, D. Gandia, S. Halpern and J. P. Armand, *Cancer Res.*, 1992, **52**,
455 974-7.
- 456
- 457 6. E. S. Lee, H. K. Shon, T. G. Lee, S. H. Kim and D. W. Moon, *Atherosclerosis*, 2013,
458 **226**, 378-84.

- 1
2
3 460 7. A. N. Lazar, C. Bich, M. Panchal, N. Desbenoit, V. W. Petit, D. Touboul, L. Dauphinot,
4
5 461 C. Marquer, O. Laprevote, A. Brunelle and C. Duyckaerts, *Acta. Neuropathol.*, 2013,
6
7 462 **125**, 133-44.
8
9 463
10
11 464 8. N. E. Manicke, M. Nefliu, C. Wu, J. W. Woods, V. Reiser, R. C. Hendrickson and R. G.
12
13 465 Cooks, *Anal. Chem.*, 2009, **81**, 8702-7.
14
15 466
16
17 467 9. S. Gerbig, O. Golf, J. Balog, J. Denes, Z. Baranyai, A. Zarand, E. Raso, J. Timar, Z.
18
19 468 Takats, *Anal. Bioanal. Chem.*, 2012, **403**, 2315-25.
20
21 469
22
23 470 10. L. S. Eberlin, I. Norton, A. L. Dill, A. J. Golby, K. L. Ligon, S. Santagata, R. G. Cooks
24
25 471 and N. Y. Agar, *Cancer Res.*, 2012, **72**, 645-54.
26
27 472
28
29 473 11. T. A. Masterson, A. L. Dill, L. S. Eberlin, M. Mattarozzi, L. Cheng, S. D. Beck, F.
30
31 474 Bianchi and R. G. Cooks, *J. Am. Soc. Mass. Spectrom.*, 2011, **22**, 1326-33.
32
33 475
34
35 476 12. E. Fahy, S. Subramaniam, H. A. Brown, C. K. Glass, A. H. Merrill Jr, R. C. Murphy, C.
36
37 477 R. Raetz, D.W. Russell, Y. Seyama, W. Shaw, T. Shimizu, F. Spencer, G. van Meer, M.
38
39 478 S. van Nieuwenhze, S. H. White, J. L. Witstum and E.A. Dennis, *J. Lipid Res.*, 2005, **46**,
40
41 479 839-61.
42
43 480
44
45 481
46
47 482 13. M. R. Wenk, *Nat. Rev., Drug Discov.*, 2005; **4**, 594-610.
48
49
50
51
52
53
54
55
56
57
58
59
60

- 1
2
3 484 14. Z. Takats, J. M. Wiseman and R. G. Cooks, *J. Mass. Spectrom.*, 2005, **40**, 1261-75.
4
5 485
6
7
8 486 15. K. A. Douglass, S. Jain, W. R. Brandt and A. R. Venter, *J. Am. Soc. Mass. Spectrom.*,
9
10 487 2012, **23**, 1896-902.
11
12 488
13
14
15 489 16. F. M. Green, P. Stokes, C. Hopley, M. P. Seah, I. S. Gilmore and G. O'Connor, *Anal.*
16
17 490 *Chem.*, 2009, **81**, 2286-93.
18
19
20 491
21
22 492 17. A. Venter, P. E. Sojka and R. G. Cooks, *Anal. Chem.*, 2006, **78**, 8549-55.
23
24 493
25
26
27 494 18. A. Badu-Tawiah, C. Bland, D. I. Campbell and R.G. Cooks, *J. Am. Soc. Mass. Spectrom.*,
28
29 495 2010, **21**, 572-9.
30
31 496
32
33
34 497 19. A. Bodzon-Kulakowska, A. Drabik, J. Ner, J. H. Kotlinska and P. Suder. *Rapid Commun.*
35
36 498 *Mass Spectrom.* 2014, **28**, 1-9.
37
38 499
39
40
41 500 20. U.S. Department of Health and Human Services Food and Drug Administration. Guidance
42
43 501 for industry: bioanalytical method validation. September 2013.
44
45 502 <http://www.fda.gov/downloads/Drugs/GuidanceComplianceRegulatoryInformation/Guidances/UCM368107.pdf>.
46
47 503
48
49 504
50
51
52
53 505 21. Analytical methods committee. AMC technical brief: Terminology - the key to
54
55 506 understanding analytical science. Part 1: Accuracy, precision and uncertainty, 2013.
56
57
58
59
60

- 1
2
3 507 Royal Society of Chemistry Web site.
4
5
6 508 http://www.rsc.org/lap/rsccom/amc/amc_index.htm. (accessed Nov 28, 2013)
7
8 509
9
10 510 22. M. Senko, S. Beu and F. McLafferty, *J. Am. Soc. Mass Spectrom.*, 1995, **6**, 52-56.
11
12 511
13
14 512 23. A. B. Costa and R. G. Graham, *Chem. Phys. Lett.*, 2008; **464**, 1-8.
15
16 513
17
18 514 24. A. Venter and R. G. Cooks, *Anal. Chem.*, 2007, **79**, 6398–6403.
19
20 515
21
22 516 25. H. Chen, N. N. Talaty, Z. Takáts and R. G. Cooks, *Anal. Chem.*, 2005, **77**, 6915–6927.
23
24 517
25
26 518 26. Z. Takats, S. C. Nanita, R. G. Cooks, G. Schlosser and K. Vekey, *Anal. Chem.*, 2003; **75**,
27
28 519 1514.
29
30 520
31
32 521 27. R. Haddad, R. Sparrapan and M. N. Eberlin, *Rapid Commun. Mass Spectrom.*, 2006, **20**,
33
34 522 2901–2905.
35
36 523
37
38 524 28. H. Y. Liu and A. Montaser, *Anal. Chem.*, 1994, **66**, 3233.
39
40 525
41
42 526 29. A. Gomez and K. Q. Tang, *Physics of Fluids*, 1994, **6**, 404.
43
44 527
45
46 528 30. S-O. Deinenger, D. S. Cornett, R. Paape, M. Becker, C. Pineau, S. Rauser, A. Walch, E.
47
48 529 Wolski, *Anal. Bioanal. Chem.*, 2011, **401**, 167-181.
49
50
51
52
53
54
55
56
57
58
59
60

- 1
2
3 530
4 531 31. D. A. Cairns, D. Thompson, D. N. Perkins, A. J. Stanley, P. J. Selby, R. E. Banks,
5
6
7 532 *Proteomics*, 2008, **8**, 21-7.
8
9 533
10 534 32. G. T. Rasmussen and T. L. Isenhour, *J. Chem. Inf. Comput. Sci.*, 1979, **19**, 179–186.
11
12 535
13
14 536 33. K. A. Veselkov, L. K. Vingara, P. Masson, S. L. Robinette, E. Want, J. V. Li, R. H.
15
16
17 537 Barton, C. Boursier-Neyret, B. Walther, T. M. Ebbels, I. Pelczer, E. Holmes, J. C. Lindon
18
19 538 and J. K. Nicholson, *Anal. Chem.*, 2011, **83**, 5864-72.
20
21 539
22
23 540 34. A. L. Dill, L. S. Eberlin, A. B. Costa, D. R. Ifa and R. G. Cooks, *Anal. Bioanal. Chem.*,
24
25 541 2011, **401**, 1949-61
26
27 542
28 543
29
30 544 35. L. A. Heiskanen, M. Suoniemi, H. X. Ta, K. Tarasov and K. Ekroos, *Anal. Chem.*, 2013,
31
32 545 **85**, 8757-63.
33
34 546
35
36 547 36. J. Kim and C. L. Hoppel, *J. Chromatogr. B. Analyt. Technol. Biomed. Life Sci.*, 2013,
37
38 548 **912**, 105-14.
39
40
41
42
43
44
45
46
47
48
49
50
51
52
53
54
55
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