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## Abstract

### 3. Calibration of a lyophilized periplasmic extract against a highly purified preparation of pituitary hPRL (NIDDK-SIAFP-B-3)

Dose-response curve for hPRL-NIDDK

$Y_A = 392X_W - 39$  ( $n = 5$ ;  $r = 0.9982$ ;  $P < 0.001$ )  
 $A$  = peak area  
 $W$  = dose ( $\mu\text{g}$  of hPRL)

Dose-response curve for the "lnp" of rec-hPRL

$Y_A = 51.4X_v - 8.3$  ( $n = 6$ ;  $r = 0.9995$ ;  $P < 0.001$ )  
 $v$  = volume ( $\mu\text{L}$ ) withdrawn from a 100  $\mu\text{L}$  solution of the whole ampoule content

With basis on these two equations, an ampoule content of 13.1  $\mu\text{g}$  of hPRL was determined for this specific "irp".

An analogous dose-response curve was also constructed using the International Standard of rec-hGH (WHO 88/624).

$$Y_A = 690X_W - 84.7 \quad (n=6; r=0.9991; P < 0.001)$$

W = dose ( $\mu\text{g}$  of hGH)

We can observe that purified hGH (WHO) is presenting a much higher slope of the dose-response curve (~70%) when compared to that of purified hPRL (NIDDK). Specific absorbance was therefore determined by spectrophotometric reading at 220 nm, 276 nm, 279 nm and 280 nm, for two purified preparations of hPRL and for the International Standard of rec-hGH (Table 2).

**Table 2**  
Specific absorbance ( $A^{0.1\%}$ ) determination at different wavelengths ( $\lambda$ ) on two purified preparations of hPRL, in comparison with the International Standard of rec-hGH (WHO 88/624).

$\lambda$ (nm)	NPL-NDO <sup>a</sup> (Å <sup>2</sup> /m)	NPL-NOR <sup>b</sup> (Å <sup>2</sup> /m)	re-NR+WHF <sup>c</sup> (Å <sup>2</sup> /m)
220	10.4	14.9	19.6
278	0.78	0.01	0.67
279	0.79	0.00	0.65
280	0.78	0.01	0.63

a. hPRL concentration set up by sample weighing  
b. hPRL concentration set up by protein determination (Lowry)  
c. hGH ampoule content determined and stated by a WHO-NIBSC International Collaborative Study

#### 4. Accuracy of the method: recovery test

A recovery test was carried out running on RP-HPLC known amounts of highly purified hPRL-NOR and quantifying the eluted peak against our 'irp'. Recoveries averaged 91%, while the correlation between added and recovered hPRL was highly significant according to the relation:  $Y_{\text{rec}} = 0.937X_{\text{add}} - 0.211$  ( $n = 5$ ;  $r = 0.9953$ ;  $P < 0.001$ )

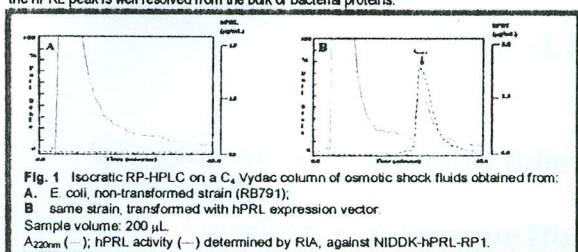
## 5. Precision and sensitivity of the method

**Table 3**  
Intra- and inter-day determination of hPRL by RP-HPLC in different periplasmic shock fluids

Shock Number	hPRL ( $\mu\text{g}/200 \mu\text{L}$ )	
	single day (n=3) <sup>a</sup>	inter-day (n=3) <sup>a</sup>
1	$4.95 \pm 3.1^b$	$5.13 \pm 3.1^b$
2	$4.87 \pm 2.5$	$4.73 \pm 5.2$
3	$3.15 \pm 2.1$	$3.10 \pm 17.6$
4	$1.15 \pm 7.5$	$1.04 \pm 10.3$
5	$0.74 \pm 6.7$	$0.78 \pm 24.1$

<sup>a</sup> Data collected over a 3-month time period and determined against our "lrp" of hPRL  
<sup>b</sup> Coefficient of variation (%)

**Sensitivity.** The value of 0.8 µg/200 µL, obtained with an inter-day CV = 24%, was considered the "working sensitivity" of the method.



**2. RP-HPLC retention times ( $t_R$ ) of different prolactin preparations**  
The  $t_R$  of different prolactin preparations, either native or biosynthetic, glycosylated or non-glycosylated, derived from different species, were determined in comparison with well known international Standards of pituitary and recombinant human growth hormone (hGH) (Table 1).

**Table 1**  
Retention times ( $t_R$ ) of different prolactins on isocratic RP-HPLC and relative retention times ( $t_{RR}$ ) determined against the International Standard of rec-hGH

[illegible]

NIDDK, kindly donated by Dr. A.F. Parlow (National Hormone and Pituitary Program, Torrance, CA, USA)  
RUS, kindly donated by DR. A. Buletov (National Research Center for Endocrinology, Moscow, Russia)  
NOR, kindly donated by DR. P. Tonnesen (Aker University Hospital, Oslo, Norway)

- All forms of prolactin are in general less hydrophobic than hGH;
- The glycosylated forms are 1.2-1.5 times less hydrophobic than the non-glycosylated forms;
- There is a good agreement between the  $t_R$  of human PRL of different origins, with the exception of the NIDDK preparation.

Typical chromatograms for rec-hGH, pit-hPRL, rec-hPRL and oPRL are reported in Fig. 2

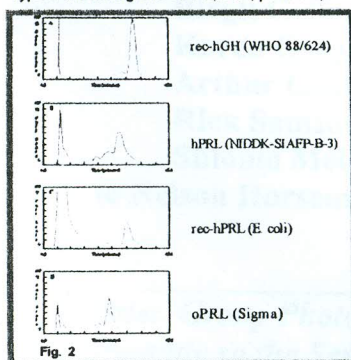


Fig. 2