Supplementary Information

The metabolome of [2-14C](−)-epicatechin in humans: implications for the assessment of efficacy, safety, and mechanisms of action of polyphenolic bioactives

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Supplementary Tables

Supplementary Table S1. Summary of adverse events (AE). There were 6 adverse events reported by 3 different participants. The physician responsible for medical aspects of the study determined that all reported adverse events were mild in severity, and none was deemed related to study treatment.

Supplementary Figures

Supplementary Figure S1. Total [2- ¹⁴C](−)-epicatechin-derived radioactivity in circulation. Amount of $[2-14C](-)$ -epicatechin $({}^{14}C\text{-}EC)$ -derived radioactivity in circulation as a function of time. Data are expressed as mean values \pm SEM [n=8] of the amount of 14 C-EC-derived radioactivity present in circulation relative to the amount of ¹⁴C-EC consumed, in percentage $(\%)$. The amount of ¹⁴C-EC-derived radioactivity in circulation was calculated from the concentration of 14 C-EC-derived radioactivity in whole blood and the volume of blood for each participant. Volume of blood was calculated using Nadler's equation $¹$ [.](#page-7-0)</sup>

Supplementary Methods Chemicals

Authentic, chemically de novo synthesized (−)-epicatechin metabolite standards, including $5-(3',4'-dihydroxyphenyl)-\gamma-valerolactone$ and the ammonium salts of $5-(3',4'-dihydroxyphenyl)-\gamma-valerolactone$ dihydroxyphenyl)-γ-valerolactone-3'-sulfate, 5-(3',4'-dihydroxyphenyl)-γ-valerolactone-4′-sulfate, (−)-epicatechin-4′sulfate, (−)-epicatechin-3′sulfate, (−)-epicatechin-5-sulfate, (-)-epicatechin-7-sulfate, (-)-epicatechin-4'-*O*-β-D-glucuronide, (-)-epicatechin-3'-*O*-β-D-glucuronide, (−)-epicatechin-5-*O*-β-D-glucuronide, (−)-epicatechin-7-*O*-β-Dglucuronide, 3′*O*-methyl-(−)-epicatechin-4′-sulfate, 3′*O*-methyl-(−)-epicatechin-5-sulfate, 3'-*O*-methyl-(−)-epicatechin-7-sulfate, 3'-*O*-methyl-(−)-epicatechin-5-*O*-β-Dglucuronide, 3′*O*-methyl-(−)-epicatechin-7-*O*--D-glucuronide, 4′*O*-methyl-(−) epicatechin-5-sulfate, 4′-O-methyl-(−)-epicatechin-7-sulfate, 4′-O-methyl(−)-epicatechin-3'-*O*-β-D-glucuronide, 4'-*O*-methyl-(−)-epicatechin-5-*O*-β-D-glucuronide and 4'*-O*-methyl-(−)-epicatechin-7-*O*-β-D-glucuronide were provided by the Institute of Pharmaceutical Discovery, LLC (Branford, CT). 3-(3′-Hydroxyphenyl)hydracrylic acid was purchased from Medical Isotopes, (Pelham NH). Toronto Research Chemicals (North York, ON) supplied 5-(3',4'-dihydroxypheny)- γ -hydroxyvaleric acid

Participants

We screened healthy, male volunteers between 18 and 50 years of age, with a body weight between 60 and 100 kg, and a body mass index between 19 and 30 kg/m². Exclusion criteria were a history or clinical symptoms of significant metabolic, hematological, pulmonary, cardiovascular, gastrointestinal, neurologic, hepatic, renal, urological, and psychiatric disorders. Based on a dietary/life-style questionnaire, we also excluded volunteers with food allergies, lactose intolerance, a history of stomach or intestinal surgery; users of tobacco products within 6 months prior to study entry; and vegans, vegetarians, and anyone who consumed less than 1 to 2 servings of fruits/vegetables per day. During the study, volunteers received a standardized high-fiber diet at scheduled times that did not conflict with other study-related activities and were encouraged to maintain an adequate level of hydration (water ad libitum). Volunteers were asked to fast for 8 h before the initiation of the study and for at least 4 h after the intake of the $[2^{-14}C](-)$ -epicatechin test drink (water ad libitum).

Clinical Parameters and Laboratory Evaluation

Clinical parameters determined included oral temperature, respiratory rate, automated seated blood pressure, pulse, and 12-lead electrocardiogram. Laboratory evaluation included the assessment of cell blood count and metabolic, kidney and liver panel in blood and plasma, respectively. Clinical parameters and laboratory evaluations were assessed at screening, on study day -1 , and after completing the study. All samples for clinical laboratory evaluations were analyzed by Meriter Laboratories (Madison, Wisconsin).

Metabolite Profiling and Quantification

Samples were analyzed on a Surveyor HPLC system comprising an autosampler cooled to 4 $^{\circ}$ C, an HPLC pump and a column oven, maintained at 40 $^{\circ}$ C, a photodiode array (PDA) detector, scanning from 250 nm to 600 nm (Thermo Finnigan, CA, USA). After

passing through the HPLC column and the flow cell of the PDA detector the column eluate was split and 0.2 mL directed to an LCQ Duo tandem mass spectrometer (Thermo-Finnigan, UK), with an electrospray interface in negative ionization mode. The remaining 0.8 mL of eluate was mixed at a "T" with scintillation cocktail (Optiflow Safe One, Fisons, Loughborough, UK,) pumped at 2.5 mL/min and directed to a radioactivity monitor (Reeve Analytical Model 9701, LabLogic, Sheffield, UK) fitted with a 1.0 mL homogeneous flow cell.

Tuning of the mass spectrometer was optimized by infusing a standard of EC dissolved in the initial HPLC mobile phase into the source at a flow rate of 0.2 mL/min. Capillary temperature was 290° C; sheath and auxiliary gases were 30 and 60 units/min, respectively; source voltage was 4 kV and collision energy was set at 35%. The mass spectrometer was operated either in full scan mode from *m/z* 100 to 600 or selective reaction monitoring (SRM) mode for a number of SREMs and 5C-RFM derivatives (Supplementary Table S2).

Data were processed by Xcalibur software program version 2.1. The quantification of the EC metabolites in plasma was based on calibration curves with de novo chemically synthesized authentic reference standards, and total recoveries were based on the levels of radioactivity measured by scintillation counts present in aliquots of samples prior to HPLC analysis. Due to the absence of standards, the quantification of some 5C-RFMs was based on dilutions of a urine sample that contained ${}^{14}C$ -peaks partially identified as a 5-(phenyl)- γ -valerolactone-sulfate-*O*-glucuronide (m/z 463), and a 5-(hydroxyphenyl)- γ hydroxyvaleric acid-sulfate (*m/z* 305) and the corresponding glucuronide (*m/z* 401) metabolite. In this way, calibrations curves were constructed $(r=0.9983 - 0.9631)$, in which the response of the mass spectrometer was related to radioactivity, which in turn equated with nmoles of the metabolites derived exclusively from 14 C-EC

HPLC-MS identifications of radiolabeled [2- ¹⁴C](−)-epicatechin metabolites in urine Urine was analyzed with radioactivity and mass spectrometry (MS) detection using a 250 mm x 4.6 mm i.d. 5 µm Luna Phenyl-Hexyl column (Phenomenex, Macclesfield, UK) eluted at a flow rate of 1 mL/min with a 120 min gradient of 5-35% methanol in 0.1 % formic acid. Metabolite identification was performed by 1) co-chromatography of metabolites with reference compounds and a comparison of their MS fragmentation patterns ^{[2](#page-7-1)}, 2) by comparing m/z fragmentation patterns with earlier in-house observed metabolites in urine after polyphenol intake $3,4$ $3,4$ and 3) by comparing m/z fragmentation patterns to databases of metabolites reported in earlier polyphenol feeding studies^{[5-7](#page-8-0)}.

The basis of the identifications of 28 urinary metabolites is summarized in Supplementary Table S2, which also provides information on the MSI MI (Metabolite Standards Initiative – Metabolites Identification) level, a confidence level for identification where level 1 stands for fully elucidated (i.e., by comparison with a standard) and level 2 for a well characterized, but not yet fully structurally elucidated metabolite ^{[8](#page-8-1)}. Since all radiolabeled ring fission products such as valerolactones, valeric acids and phenolic acids are derived from $[2^{-14}C](-)$ -epicatechin, the 3'- and/or 4' carbons are the probable positions of hydroxyl groups as well as sulfation, *O*-methylation and *O*-glucuronidation. Some of the radiolabeled HPLC peaks in urine from some, but not all, volunteers contained more than one metabolite that were resolved when detected by MS but not by the radioactivity monitor because the response of the detector was, of necessity,averaged over a \sim 10s period through the operation of a time constant $\frac{9}{2}$.

As shown in Supplementary Table S2, the following 11 structurally related (−) epicatechin metabolites (SREM) were identified at MSI MI level 1 via cochromatography with a reference compound and matching $MS²$ spectra: (-)-epicatechin-3'-*O*-β-D-glucuronide, (−)-epicatechin-7-*O*-β-D-glucuronide, 3'-*O*-methyl-(−)epicatechin-5-*O*-β-D-glucuronide, 3'-*O*-methyl-(−)-epicatechin-7-*O*-β-D-glucuronide, (−)-epicatechin-3′-sulfate, (−)-epicatechin-5-sulfate, (−)-epicatechin-7-sulfate, 3′-*O*methyl-(−)-epicatechin-5-sulfate, 3′-*O*-methyl-(−)-epicatechin-7-sulfate, 4′-*O*-methyl- (−)-epicatechin-5-sulfate and 4′-*O*-methyl-(−)-epicatechin-7-sulfate. Also identified in this manner, using reference compounds isolated from urine, were the 5-carbon-side chain ring fission metabolites (5C-RFM) $5-(4'-hydroxyphenyl)-\gamma$ -valerolactone-3'-sulfate, 5-(4'-hydroxyphenyl)-γ-valerolactone-3'-*O*-glucuronide, and 5-(3'-hydroxyphenyl)-γvalerolactone-4'-O-glucuronide, $5-(\text{phenvl})$ - γ -valerolactone-3'-sulfate and $5-(\text{phenvl})$ - γ valerolactone-3′-*O*-glucuronide. Partial identification at MSI MI level 2 was obtained for a further six 5C-RFMs namely two 5-(phenyl)-y-valerolactone-sulfate-O-glucuronides, a 5-(hydroxyphenyl)-γ-hydroxyvaleric acid-*O*-glucuronide, two 5-(hydroxyphenyl)-γhydroxyvaleric acid-sulfates and a 5-(phenyl)- γ -hydroxyvaleric acid-sulfate. MSI MI level 1 identifications were also achieved with 3-(3′-hydroxyphenyl)-3-hydroxypropionic acid, hippuric acid and 3′-hydroxyhippuric acid whereas level 2 identification was obtained with a hydroxyphenylacetic acid-sulfate (Supplementary Table S2). Quantification of these compounds, or groups of compounds, was based on the size of the appropriate radiolabeled HPLC peak. The structures of metabolites identified at the MSI MI level 1 are presented in Supplementary Fig. S2.

HPLC-MS analysis of plasma

The level of radioactivity in plasma was low compared to that excreted in urine and, as a consequence, it was not a practical option to use an on-line radioactivity monitor with HPLC. Specific SREMs and 5C-RFMs were therefore analyzed by HPLC with MS in the selected reaction monitoring mode using a 150 mm x 4.6 mm i.d. 2.6 µm Kinetex Phenyl-Hexyl column (Phenomenex) eluted at a flow rate of 1 mL/min with a 30 min gradient of 5-20% acetonitrile in 0.1 % formic acid. Supplementary Table S2 provides details of HPLC retention times and the m/z values that were monitored.

Supplementary Table S2. Detection of (−)-epicatechin metabolites. HPLC retention times and selected reaction monitoring ions used for the HPLC-MS analysis of (−)-epicatechin metabolites in plasma.

Supplementary References

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