

## C3-epimer of 25-hydroxyvitamin D<sub>3</sub> in maternal-cord dyads

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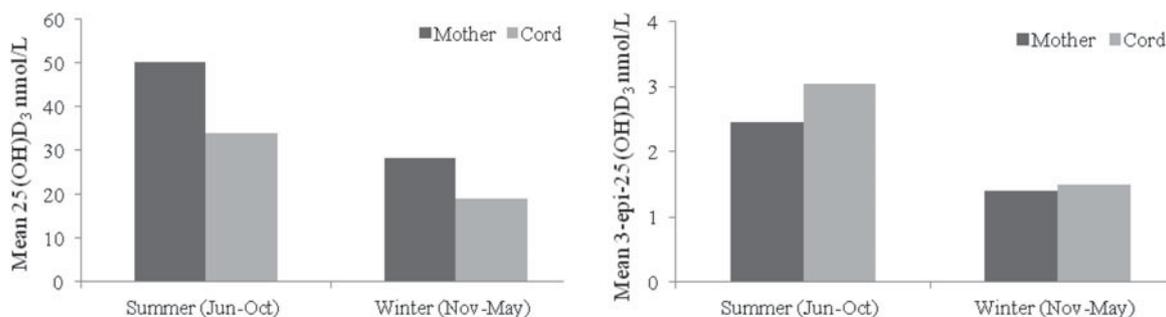
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Circulating total serum 25-hydroxyvitamin D (25OHD) is the most appropriate biomarker for the assessment of vitamin D status. Total 25OHD is the sum of 25OHD<sub>2</sub> and 25OHD<sub>3</sub> in serum. While the C3 epimer of 25OHD<sub>3</sub> (3-*epi*-25OHD<sub>3</sub>) has been detected in serum from adults and infants<sup>(1,2)</sup>, very little is known about the bioactivity of the 3-*epi* series of vitamin D structural analogs. As a result, 3-*epi*-25OHD<sub>3</sub> is not included in the calculation of total 25OHD in serum. The aim of this study was to quantify 3-*epi*-25OHD<sub>3</sub> concentrations in maternal-cord dyads around the time of delivery. A total of 82 cord blood samples were collected and within a week of delivery, matched maternal samples were drawn. Serum 25OHD<sub>2</sub>, 25OHD<sub>3</sub>, and 3-*epi*-25OHD<sub>3</sub> were extracted, separated and quantified using an LC-MS/MS method, which is traceable to the US National Institute for Standards and Technology (NIST) higher order reference measurement procedure<sup>(3)</sup>.

Mean (SD) of maternal and cord serum 25OHD<sub>3</sub> concentrations were 38.2 (21) and 25.4 (15) nmol/L, respectively ( $P < 0.001$ ). 3-*epi*-25OHD<sub>3</sub> was detected in all maternal and cord samples and while there was no significant difference between them ( $P = 0.056$ ), cord 3-*epi*-25OHD<sub>3</sub> concentrations were 118% of maternal levels on average. The relative percentage of 3-*epi*-25OHD<sub>3</sub> over 25OHD<sub>3</sub> was significantly higher in cord samples ( $P < 0.001$ ), see table.

		Mean	SD	Median	25th	75th	Min	Max
3- <i>epi</i> -25OHD <sub>3</sub> (nmol/L)	Cord	2.2	1.7	1.7	1.0	2.8	0.3	8.4
	Mother	1.9	1.1	1.7	1.1	2.5	0.4	5.5
Percentage 3- <i>epi</i> -25OHD <sub>3</sub> over 25OHD <sub>3</sub>	Cord	8.8	4.0	9.9	5.1	11.5	1.0	15.8
	Mother	5.1	1.4	4.9	3.9	5.9	2.3	9.0

Levels of 3-*epi*-25OHD<sub>3</sub> in mothers and cords tracked the seasonal variation in 25OHD<sub>3</sub>, see Figure. There were strong associations between maternal and cord concentrations of 25OHD<sub>3</sub> ( $r = 0.868$ ) and the 3-*epi*-25OHD<sub>3</sub> ( $r = 0.672$ ), (both  $P < 0.001$ ). In mothers, the association between serum 25OHD<sub>3</sub> and the 3-*epi*-25OHD<sub>3</sub> was  $r = 0.902$  and in cord serum was  $r = 0.782$  (both  $P < 0.001$ ).



The ubiquitous presence of 3-*epi*-25OHD<sub>3</sub> in human serum, the strong correlation with 25OHD<sub>3</sub>, and the relatively large proportion of the epimer in cord blood are of interest. Although the concentrations of 3-*epi*-25OHD<sub>3</sub> are not currently included in the estimate of total 25OHD, separate quantification of the epimer might be especially important for infants to provide a more complete estimate of total serum 25OHD concentrations, should the epimer have biological function and clinical significance.

Supported by the Higher Education Authority Program for Research in Third Level Institutions (PRTL Cycle 4)

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