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Written by:	WADA LabEG	Approved by:	WADA Executive Committee
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IN SITU FORMATION OF PREDNISONE AND PREDNISOLONE

The *World Anti-Doping Agency* wishes to draw the attention of the Laboratories to the following issue that may affect Laboratory operations. This pertains, in particular, to the possible detection of prednisone and/or prednisolone in urine *Samples* resulting from *in situ* microbial transformation of cortisone and cortisol, respectively.

This Technical Letter constitutes supplementary information to the Technical Letter TL10 “*In situ* Formation of Exogenous Compounds in urine *Samples*” (previously, TL03/2017).

The endogenous glucocorticoids cortisol (also known as hydrocortisone) and cortisone have a 3-oxo-4-ene structure (**Figure 1**). This structural element is a possible microbial Δ^1 -steroid-dehydrogenase (Δ^1 -SDH) target for 1,2-dehydrogenation, which may transform cortisol and cortisone into prednisolone and prednisone, respectively.¹

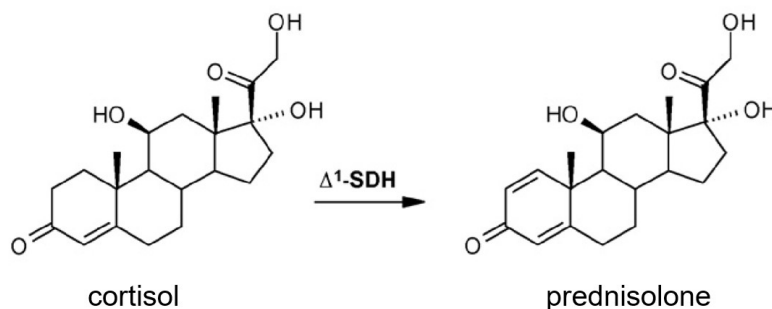


Figure 1. The microbial conversion of cortisol to prednisolone by Δ^1 -SDH enzymatic activity.

Therefore, when reporting findings for prednisone and/or prednisolone, Laboratories should consider the following recommendations:

1. When prednisone and/or prednisolone are present at levels higher than (>) the reporting limit of 30 ng/mL, perform a Confirmation Procedure using an extraction method [e.g., Solid Phase Extraction (SPE)] prior to the enzymatic hydrolysis step in order to avoid inducing the *in situ* formation of prednisone and prednisolone by the enzymatic activity of microbes already present in the *Sample* [However, if the *in situ* formation of prednisone and prednisolone have already occurred prior to the enzymatic hydrolysis, SPE will have no impact].
2. Evaluate the overall pattern of the *Metabolites* present in the *Sample*: the presence of aglycones only (*i.e.*, absence of the glucuronide *Metabolites*) and the absence of the 20 β -hydroxy-*Metabolite* can be used as an indication of microbial activity.
3. Perform GC/C/IRMS analysis (following consultation with the Testing Authority and depending on Laboratory's analytical capacity, which may require the subcontracting of the analysis) when prednisone and/or prednisolone are present at levels (after correction for SG, if needed ²) higher than (>) the reporting limit of 30 ng/mL and lower than (<) 60 ng/mL.

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Reporting of Results

- The finding shall be reported as a Negative Finding if:
 - Prednisone and/or prednisolone are detected at an estimated concentration (SG-adjusted, if needed ²), which is lower than (<) the reporting limit of 30 ng/mL; or
 - The estimated concentration of prednisone and/or prednisolone (SG-adjusted, if needed ²) is higher than (>) the reporting limit of 30 ng/mL and lower than (<) 60 ng/mL, but:
 - The overall pattern of relevant substances and *Metabolites* present in the *Sample* indicates microbial activity (e.g., absence of 20β-hydroxy- and glucuronide-*Metabolites* and/or indication of a Δ¹-SDH activity); and/or
 - The GC/C/IRMS analysis demonstrates an endogenous origin of the substance(s).
- The finding shall be reported as an *Atypical Finding* if:
 - The estimated concentration of prednisone and/or prednisolone (SG-adjusted, if needed ²) is higher than (>) the reporting limit of 30 ng/mL and lower than (<) 60 ng/mL, and the GC/C/IRMS analysis is inconclusive or cannot be performed.
 - If an *ATF* is reported, the Laboratory shall include a comment in the *ADAMS* Test Report recommending the Testing Authority to conduct at least one (1) follow-up no-notice test on the *Athlete* within a reasonable time frame (e.g. within 2 weeks).
- The finding shall be reported as an *Adverse Analytical Finding* if:
 - The estimated concentration (SG-adjusted, if needed ²) of prednisone and/or prednisolone in the *Sample* is higher than (>) 60 ng/mL and the evaluated metabolic pattern does not indicate microbial activity; or
 - The estimated concentration of prednisone and/or prednisolone (SG-adjusted, if needed ²) is higher than (>) the reporting limit of 30 ng/mL and lower than (<) 60 ng/mL, and the GC/C/IRMS analysis demonstrates an exogenous origin of the substance(s).
 - It is recommended that the Laboratory seeks a second opinion, in writing, from another Laboratory before reporting the *AAF*. The second opinion shall be recorded in the Laboratory Documentation Package.

Should you have any further questions, please do not hesitate to contact the WADA Science Department.

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REFERENCES

1. Bredehöft, M. *et. al.* Investigations of the microbial transformation of cortisol to prednisolone in urine samples. *J. Steroid Biochem. Mol. Biol.*, **129**(1-2), 54-60, 2012
2. WADA Technical Document TD IRMS: Detection of Synthetic Forms of Endogenous Anabolic Androgenic Steroids by GC/C/IRMS. <https://www.wada-ama.org/en/what-we-do/science-medical/laboratories>