

Determination of U, Pu and Am in biological samples by SF-ICP-MS for biokinetic studies of actinides



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Introduction

The U.S. Transuranium & Uranium Registries (USTUR) studies the uptake, translocation and biokinetics of actinides (U, Pu and Am) in humans. Currently α -spectrometry is the primary method for analysis of U, Pu and Am in human autopsy tissues. However for environmental samples, inductively coupled plasma mass spectrometry (ICPMS) is now a well established technique for ^{235,238}U and ^{239,240}Pu determination.^{1,2} With recent ICPMS instrument developments, it is possible to detect ²⁴¹Am³, although application of ICPMS for the analysis of Pu and Am in biological samples has been limited due to their low concentrations.

The aim of this work was to develop protocols to measure U, Pu and Am isotopes in human bone and soft tissue samples from occupationally exposed individuals by the SF-ICPMS technique, and compare the results with α -spectrometry. ICPMS is expected to offer important advantages for determining isotopic fingerprints of U and Pu.

Materials and Methods

Sector field ICPMS at Northern Arizona University



Table 3. SF-ICPMS Operating Conditions

Instrument	ICP-AES 5000
Resolving power	8,000 (at 10% height)
RF power	1200 Watts
Aspirated flow	1.0 L/min
Plasma	11.5 L/min
Auxiliary	1.0 L/min
Sample gas	0.750 L/min
Nebulizer	Nebul
Nebulizer type	CF3AC U5000AT ultrasonic
Condenser temperature	15°C
Sampler temperature	5°C
Sample uptake rate	800 L/min
UI (p)	0.0002-0.0003 (measured by ²⁴¹ Pu)
Mass bias factor	1.000 ± 0.001 (measured using natural ²³⁸ U/ ²³⁵ U)
Detector	Electron multiplier, single channel counting
Da mass spectral scans	20 points per set in range 230.0-239.0
U mass spectral scans	20 points per set in range 235.0-238.0
Am mass spectral scans	Electrostatic sector 0.2 peak width, 10 points peak
Peak jump scan method	100-200
Integration time	2-5
Scans per integration	100-200
Integration delay	2-5
Peak jump time measured	
Plutonium analysis	²⁴¹ Am, ²⁴² Am (National standard), ²⁴⁰ Am
Americium analysis	

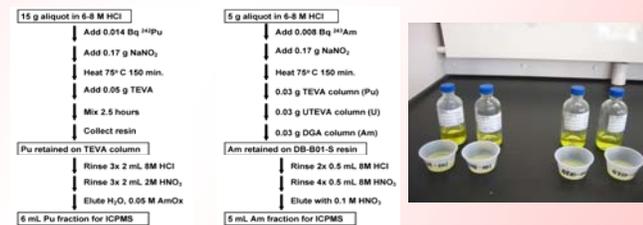
α -spectrometry at USTUR



Table 2. Alpha Spectrometry Operating Conditions

Instrument	4 units OctoFET™ PC system 4096-channel analyzer
Energy range	3-8 MeV in 1024 channels
Detectors	450 mm ² EG&G ORTEC ULTRA SiC/Au surface barrier
Software	MAESTRO-32 v.6.06 - AlphaVision®-32 v.5.30
Measurement time	
Background	300,000 s
Sample	150,000 s
Plutonium analysis	²³⁹⁻²⁴⁰ Pu, ²³⁸ Pu, ²⁴¹ Pu (spike, NIST SRM 4334C)
Americium analysis	²⁴¹ Am, ²⁴² Am (spike, NIST SRM 4332D)
Limit of detection	0.0003 Bq sample ⁻¹

Samples. Voluntarily donated soft tissue and bone samples are prepared by USTUR following autopsies and are subsequently dry-ashed; the ashed residues are dissolved in 6-8 M HCl (aq). Digested samples from USTUR Cases 0269, 0425, and 0720 (Pu exposure) and 1028 (U exposure) have been analyzed by ICPMS at NAU. All samples were previously analyzed at USTUR using α -spectrometry. The primary methods used were USTUR-100,110 (sample ashing), USTUR-150, 220, 310 (Pu/Am separation) and USTUR 510, 610 (α -counting). All USTUR methods are available on-line.⁴ Four samples were analyzed independently by α -spectrometry at a commercial laboratory. All samples are initially ashed and dissolved without U, Pu, and Am yield tracers; these are added to gravimetric aliquots of the sample solutions at the ICPMS or α -spectrometry laboratory. Results are calculated in terms of activity (Bq) present in each original tissue sample.



Separation procedures for ICPMS. Two separation schemes were used for ICPMS (figure above). Resins were obtained from Eichrom (Darien, IL, USA). The procedure at left was used in cases where Pu was the only targeted analyte. The procedure at right was used for the determination of Am. Uranium isotopic compositions were measured after separation on a UTEVA column (chart at right). Samples were analyzed both with and without an added ²³⁸U internal standard; some samples contained detectable indigenous ²³⁶U. In future work, we plan to use ²³³U as U yield tracer.

References

- 1) Ketterer et al., *Environ. Sci. Technol.* 2000, 34, 966-972.
- 2) Ketterer et al., *JAAS* 2004, 19, 241-245.
- 3) Varga et al., *Radiochim. Acta* 2007, 95, 81-87.
- 4) USTUR Procedures Manual. The manual and poster are available from: www.ustur.wsu.edu

Results and Discussion

Figures of merit for SF-ICPMS. For the "whole sample" (nominally 700 grams of solution) detection limits are: ²³⁴U, 0.0001 Bq in the sample using a 5 g aliquot; ²³⁵U, 0.006 mBq in the sample using a 5 g aliquot; ²³⁸U, 0.00009 Bq in the sample using a 5 g aliquot; ²³⁹⁺²⁴⁰Pu, 0.005 Bq in the sample using a 15 g aliquot; ²⁴¹Pu, 1.4 Bq in the sample using a 15 g aliquot; ²⁴¹Am, 0.05 Bq in the sample using a 5 g aliquot. U, Pu, and Am are all analyzed separately. For each element, the sample throughput is ~ 6 samples per hour. We expect to improve sample throughput in the future with use of an APEX HF sample introduction system with PFA nebulizer.

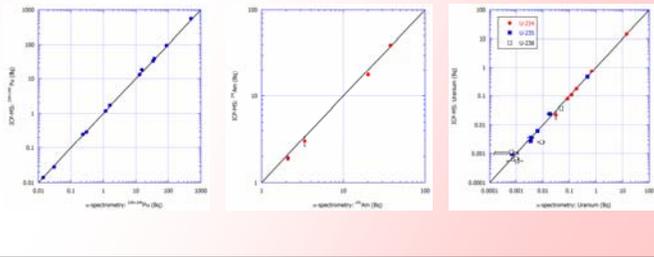
Activity results. For some samples where high levels of Pu were encountered, it was also possible to detect ²⁴¹Pu. ²⁴⁰Pu/²³⁹Pu atom ratios indicated that the Pu was of weapons-grade isotope composition. The ICPMS results provide several important insights into uranium exposure; the source of the U in USTUR Case 1028 consisted of ²³⁵U-enriched material that also contained some ²³⁶U. ²³⁹⁺²⁴⁰Pu, ²⁴¹Am, and U activities compare favorably for results obtained independently by ICPMS and α -spectrometry.

Table 3. Results of analyses of ²³⁹⁻²⁴⁰Pu, ²⁴¹Pu, ²⁴²Pu, ²⁴¹Am and ²⁴²Am with SF-ICP-MS and α -spectrometry

No.	Tissue	²³⁹⁻²⁴⁰ Pu, Bq		²⁴¹ Pu, Bq		²⁴² Pu, Bq		²⁴¹ Am, Bq		²⁴² Am, Bq	
		α -spectrometry	ICP-MS	α -spectrometry	ICP-MS	α -spectrometry	ICP-MS	α -spectrometry	ICP-MS	α -spectrometry	ICP-MS
269001	Lung	1.53E+01	2.04E-01	1.86E+01	2.12E-01	6.20E-02	1.80E-03	< 115 ^c	2.5E+00	0.9E-02	
269003	Liver	5.00E+02	1.20E+03	5.54E+02	2.69E+00	6.30E-02	1.00E-03	3.12E+02	3.4E+01	3.77E+01	0.4E-01
269031	Femur, PE	3.70E+01	6.03E-01	3.91E+01	5.00E-01	6.30E-02	1.00E-03	2.30E+01	7.0E+00	9.65E+00	2.1E-01
269052	Humerus, PE	1.30E+01	2.10E-01	1.31E+01	1.00E-01	6.30E-02	1.00E-03	8.70E+00	5.0E-01	3.37E+00	6.7E-02
425003	Liver	1.59E+00	1.44E-02	1.67E+00	3.00E-02	6.20E-02	1.00E-03	1.66E-01	7.5E-03	3.00E+00	4.0E-01
425004	Bladder Gall	1.99E-03	5.64E-04	< 0.005 ^d				7.91E-04	4.9E-04		
425007	Spleen	2.34E-01	5.00E-03	2.49E-01	3.00E-03	6.40E-02	2.00E-03	4.78E-02	2.3E-03		
425009	Kidney	1.40E-02	1.55E-03	1.45E-02	1.00E-03	6.00E-02	4.00E-02	8.10E-03	1.2E-03		
425040	Fibula, PE	3.05E-02	2.66E-03	2.80E-02	2.00E-03	8.00E-02	2.00E-02	1.52E-02	1.6E-03		
425057	Scapula Spine	2.99E-01	2.84E-02	2.90E-01	7.00E-03	8.00E-02	1.00E-03	1.43E-01	1.8E-02		
425082	Sacrum	1.17E+00	6.15E-02	1.17E+00	3.00E-02	6.10E-02	1.00E-03	3.55E-01	3.1E-02		
425082	Sacrum ²	1.17E+00	6.15E-02	1.21E+00	1.44E-02	6.30E-02	3.00E-03	3.55E-01	3.1E-02		
720001	Lung	8.78E+01	2.61E+00	9.44E+01	4.00E-01	6.30E-02	1.00E-03	8.30E+01	3.0E+00	2.01E+01	5.6E-01
720004	Liver	1.90E+01	1.00E+00	3.36E+01	1.00E-01	5.90E-02	1.00E-03	2.70E+01	4.0E+00	2.10E+00	7.2E-02

Table 4. Results of analyses of ²³⁸U, ²³⁵U, ²³⁴U, and ²³⁹⁺²⁴⁰Pu atom ratio with SF-ICP-MS; comparison to α -spectrometry

Sample #	Tissue	²³⁸ U, Bq		²³⁵ U, Bq		²³⁴ U, Bq		²³⁹⁺²⁴⁰ Pu, Bq		²⁴¹ Pu, Bq		²⁴² Am, Bq	
		α -spectrometry	ICP-MS	α -spectrometry	ICP-MS	α -spectrometry	ICP-MS	α -spectrometry	ICP-MS	α -spectrometry	ICP-MS	α -spectrometry	ICP-MS
269001	Lung	7.3E-03	3.80E-04			2.79E-04	6.6E-06			8.47E-03	5.0E-05		
269003	Liver	2.6E-03	6.40E-04			7.94E-05	6.1E-06			1.36E-03	5.0E-05		
269031	Femur, PE	1.53E-03	3.40E-04			7.11E-05	2.4E-06			1.32E-03	5.0E-05		
269052	Humerus, PE	1.1E-04	1.00E-04			1.41E-05	2.2E-07			3.00E-04	1.0E-05		
425003	Liver	2.63E-03	8.97E-04	4.93E-04	1.10E-04	3.89E-03	1.10E-03	1.10E-05	4.2E-07	1.50E-03	6.9E-04	4.30E-04	1.0E-05
425009	Kidney	6.89E-03	1.90E-03	2.79E-04	6.00E-05	2.23E-03	1.29E-03	1.48E-05	3.7E-07	1.12E-03	8.26E-04	3.30E-04	1.0E-05
425040	Fibula, PE	1.73E-02	3.00E-03	8.74E-04	1.00E-04	1.57E-02	2.89E-03	4.58E-05	6.4E-07	6.18E-03	1.7E-03	9.90E-04	1.0E-05
425057	Scapula Spine	4.58E-02	1.27E-02	5.87E-03	8.20E-04	3.41E-02	1.09E-02	2.83E-04	2.3E-06	6.39E-03	5.4E-03	5.24E-03	3.6E-04
425082	Sacrum	5.73E-02	6.13E-03	4.99E-03	3.30E-04	2.20E-02	4.00E-02	2.13E-04	1.14E-05	1.23E-02	1.00E-02	5.54E-03	5.0E-04
425082	Sacrum ²	5.73E-02	6.13E-03	3.46E-03	5.20E-04	2.20E-02	4.00E-02	1.76E-04	1.9E-06	1.23E-02	2.8E-03	3.44E-03	3.0E-05
720001	Lung			4.62E-02	4.27E-03			3.99E-03	6.9E-05			2.09E-01	5.0E-03
720004	Liver			1.45E-03	3.90E-04			6.27E-05	4.97E-06			2.84E-03	2.9E-04
100001	S. Liver	1.43E+01	3.38E-01	1.43E+01	6.93E-01	4.73E-01	2.29E-02	4.69E-01	9.1E-05	4.88E-02	6.2E-03	2.84E-03	1.6E-03
100002	Spleen	3.07E-02	3.10E-03	2.24E-02	6.30E-03	6.60E-04	5.49E-04	6.60E-04	1.6E-05	5.90E-04	6.2E-04	9.1E-04	6.0E-05
100003	A. Kidney	1.21E-02	6.77E-03	1.06E-02	3.10E-03	3.60E-03	8.69E-04	3.62E-03	7.1E-05	6.00E-04	5.0E-04	1.14E-03	2.0E-04
100007	Femur, PE	9.88E-03	2.60E-03	7.28E-03	1.19E-03	1.13E-02	3.80E-03	2.44E-02	1.81E-04	9.30E-03	2.0E-02	2.80E-03	6.1E-03
100007	Hum. PE	8.45E-02	4.09E-03	7.88E-02	3.93E-03	8.19E-02	3.83E-04	2.63E-02	6.4E-04	6.93E-02	2.9E-04	3.80E-04	4.5E-03
100003	Humerus, PE	1.82E-01	4.60E-03	1.79E-01	5.44E-03	6.10E-03	7.15E-04	6.18E-03	1.9E-04	8.00E-04	3.0E-04	6.70E-04	1.0E-05



Conclusions

- ✓ This study confirmed the suitability of ICPMS for the analysis of ²³⁹⁺²⁴⁰Pu, ²⁴⁰Pu/²³⁹Pu, ²⁴¹Am, and U isotopes in bones and soft tissues of exposed individuals.
- ✓ The detection limits for SF-ICPMS are comparable with those of α -spectrometry, with time per single analysis significantly shorter.
- ✓ The ability to measure the ²⁴⁰Pu/²³⁹Pu isotopic ratio and ²⁴¹Pu is an substantial advantage of ICPMS over α -spectrometry.
- ✓ There is some residual bias in ICPMS/ α -spectrometry measurements for Pu (+3.4%) and Am (-8.1%). This will be investigated.
- ✓ Improvements in the ICPMS-based U measurements are expected using ²³³U tracer.