

Reprint from

RECENT ADVANCES
IN DOPING ANALYSIS
(6)

W. Schänzer
H. Geyer
A. Gotzmann
U. Mareck-Engelke
(Editors)

Sport und Buch Strauß, Köln, 1999

G. SIGMUND, I. SEINSCH, W. SCHÄNZER:
Detection of Phentermine and Phentermine Derivatives as Metabolites of Oxethazine
In: W. Schänzer, H. Geyer, A. Gotzmann, U. Mareck-Engelke (eds.) Recent advances in
doping analysis (6). Sport und Buch Strauß, Köln, (1999) 483-487

Detection of phentermine and phentermine derivatives as metabolites of oxethazaine

Institute of Biochemistry, German Sports University,
Carl-Diem-Weg 6, D-50933 Köln

INTRODUCTION

Oxethazaine (Tepilta®) is a local anaesthetic for application to a mucus membrane, which is especially used for therapy of the acute and chronic gastritis and duodenitis [2]. It is not on the IOC list of prohibited substances.

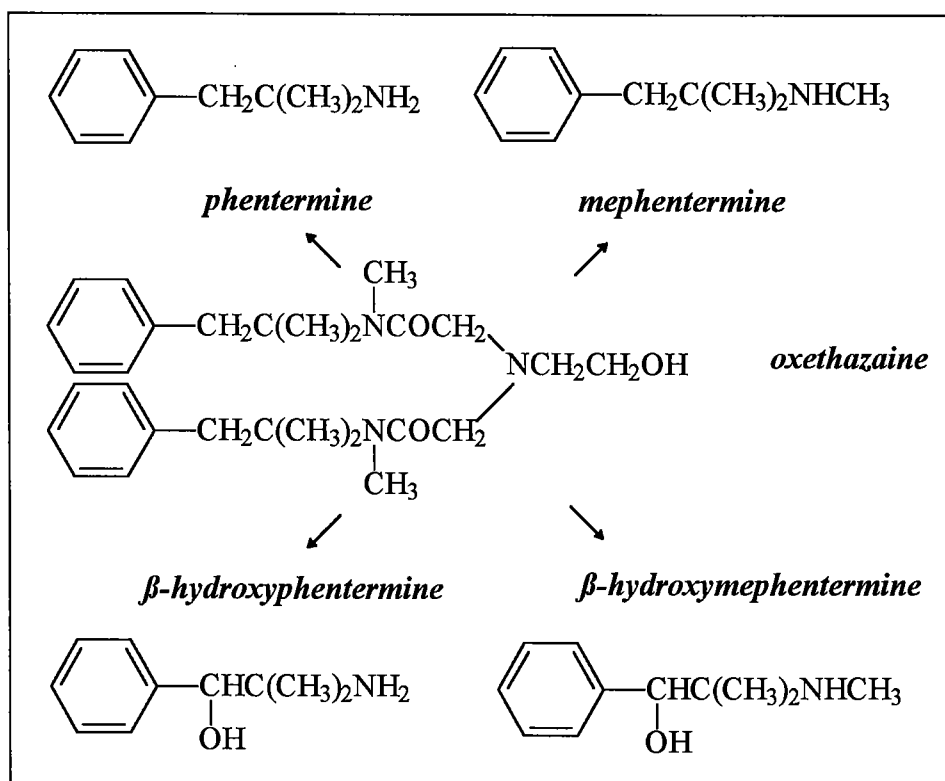


Fig.1: Metabolism of oxethazaine

EXPERIMENTAL

An excretion study with an oral application of therapeutical doses of oxethazaine was performed. Two volunteers took 4 doses of 10 mg oxethazaine during a period of 8 hours. The urine was prepared according to the standard procedure screening 1 [1].

GC/MS, GC/NPD PARAMETERS

A combined system GC/MSD and GC/NPD was applied.

GC/MSD, GC/NPD -System: Hewlett Packard 5890/5973
Carrier gas: Helium (1ml/min flow)
Split ratio: 1:10
Analytical column: HP-5 MS fused silica capillary column,
0.25 mm i.D., 0.25 μ m film thickness
length MSD: 24m
length NPD: 19m
Temperature program: 100°C, 22°C/min till 320°C, 1 min. constant

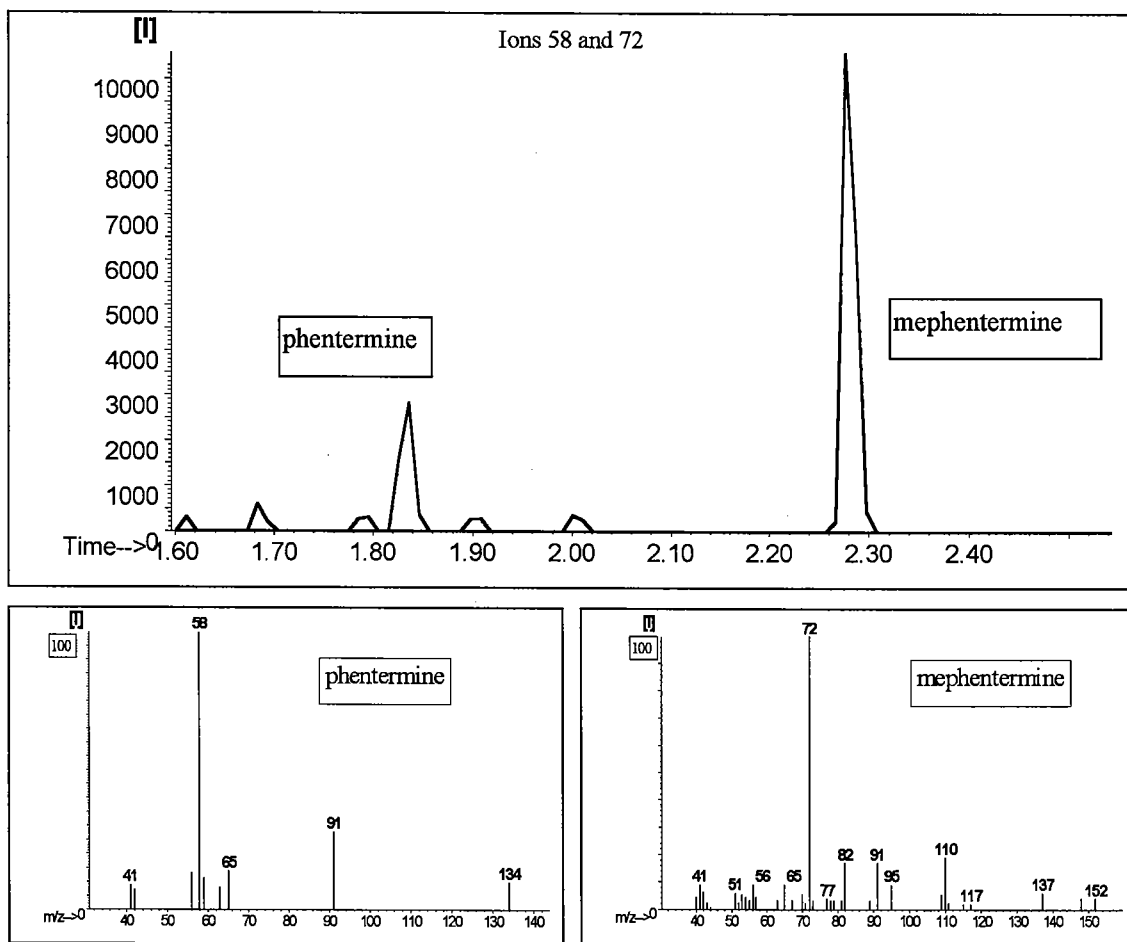


Fig. 2: GC/MSD-Chromatogram and spectra of phentermine and mephentermine; Scr.1 pH 14; 5 ml urine (2h after last application); extract concentrated in 200 μ l solvent

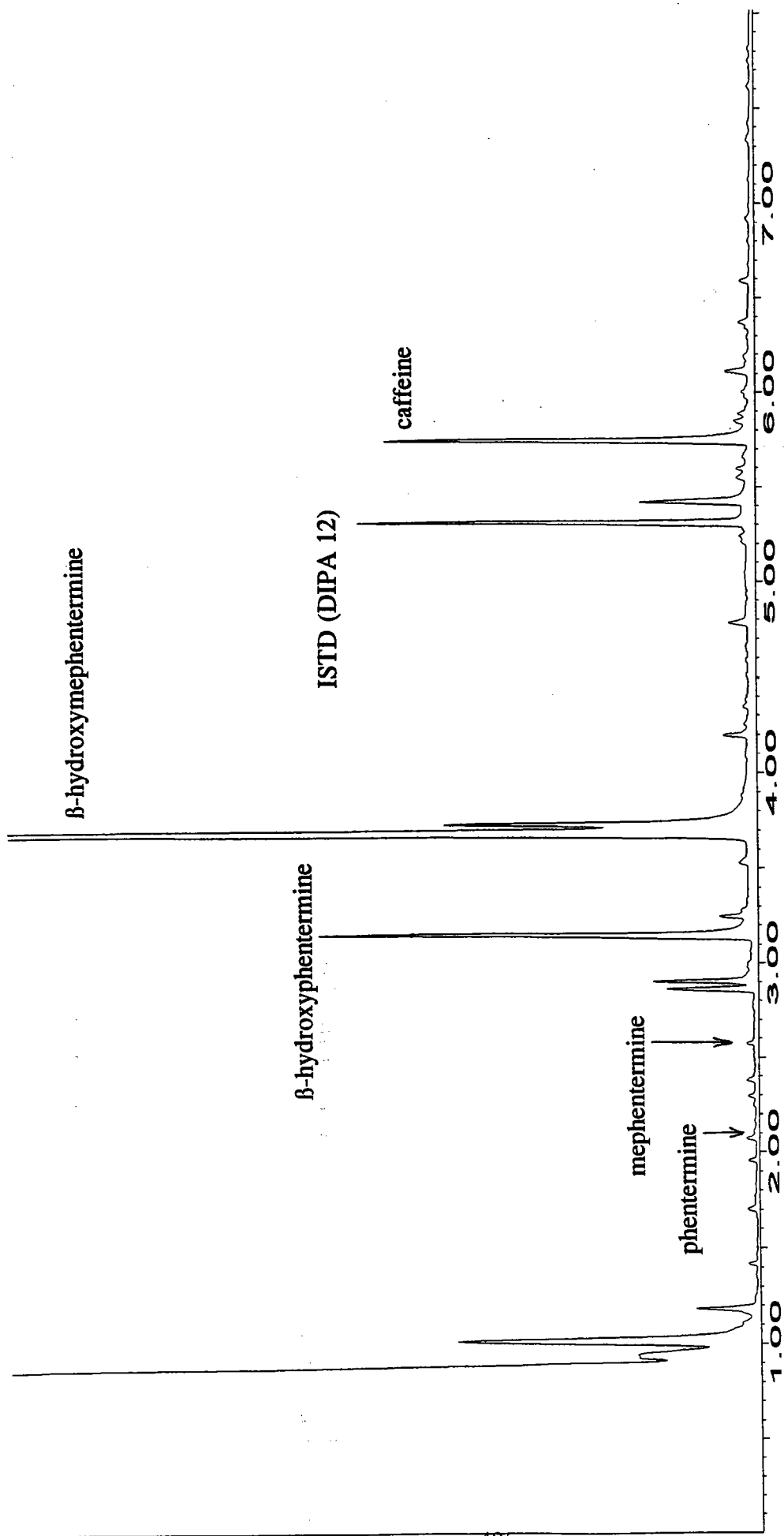


Fig. 3: GC/NPD-chromatogram; Screening 1 pH 14; 5 ml urine (2h after last application) extracted with 2ml ether

RESULTS AND CONCLUSION

Figure 3 shows the Screening 1 NPD chromatogram of a urine two hours after the last application of oxethazaine. As shown in figure 2 and 3 traces of phentermine and mephentermine could be detected in the urine with concentrations up to 0.2 $\mu\text{g/ml}$. The drug could be identified in full scan mode which would lead to a positive case.

In contrast to a phentermine or mephentermine abuse, the excretion study showed also the main metabolites of oxethazaine β -hydroxyphentermine and β -hydroxymephentermine. Both metabolites could be detected in much higher concentrations (up to 15 $\mu\text{g/ml}$). SCAN-spectra are shown in figure 4 and 5.

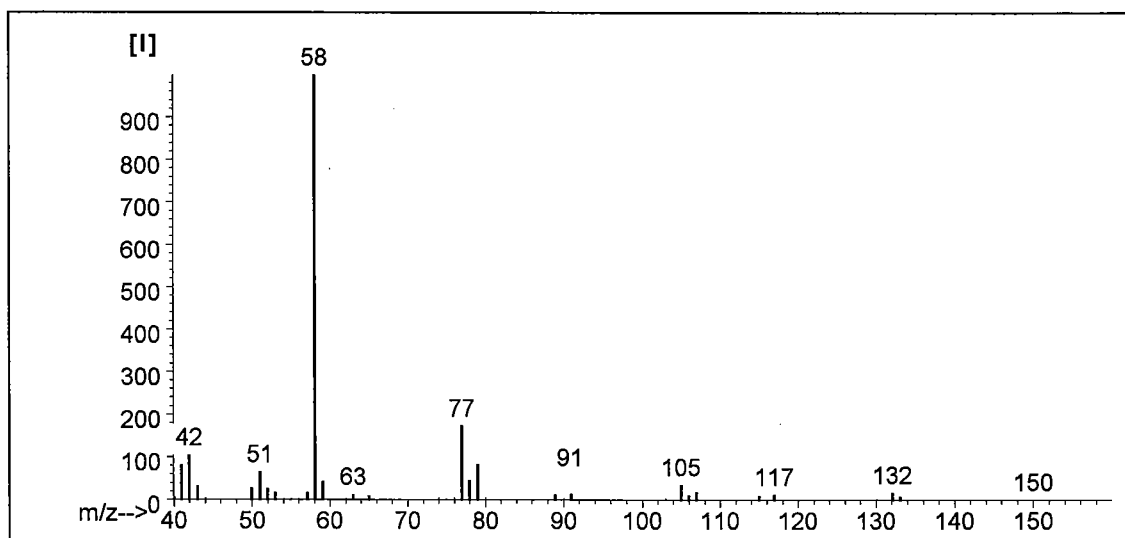


Fig. 4: Spectra of β -hydroxyphentermine (M^+ 150)

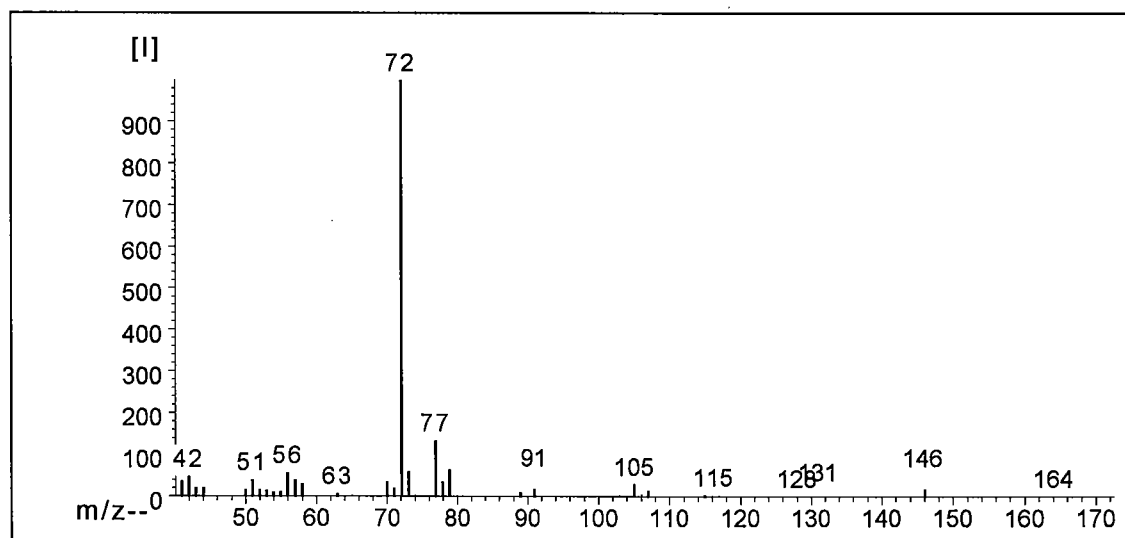


Fig. 5: Spectra of β -hydroxymephentermine (M^+ 164)

In a positive case of phentermine or mephentermine, we recommend to look for the higher concentrated β -hydroxymetabolites as indication for an oxethazaine application. Nevertheless it has to be discussed, if the detection of phentermine or mephentermine after an oxethazaine application has to be treated as a positive case or not.

LITERATURE

1. Donike M., Geyer H., Gotzmann A., Kraft M., Mandel F., Nolteernsting E., Opfermann G., Sigmund G., Schänzer W., Zimmermann J.: Dope Analysis. In: P. Bellotti, G. Benzi, A. Ljungquist (eds): Official Proceedings: International Athletics Foundation World Symposium on Doping in Sport, Florenz, 1987 International Athletic Foundation, Florenz 1988.
2. Fa. Wyeth Pharma GMBH, Fachinformationen
3. Donike M., Untersuchung zum Nachweis, zur Pharmakokinetik und zum Metabolismus von Oxethacain, 1988, not published