Dopamine (plasma, urine)

1 Name and description of analyte

- 1.1 Name of analyte Dopamine
- 1.2. Alternative names 4-(2-aminoethyl)benzene-1,2-diol
- 1.3 NLMC code To follow

1.4 Description of analyte Dopamine is a catecholamine produced predominantly by chromaffin bodies of adrenergic nerves. Dopamine is synthesised from tyrosine. It has a short plasma half-life, of the order of several minutes.

1.5 Function of analyte

Dopamine functions predominantly as a neurotransmitter. It is thought to play a role in cognition, reward, voluntary movement, motivation and punishment. It exerts its actions through five dopamine receptors (D_1 - D_5). Loss of dopamine-secreting neurones is a constant feature of Parkinson's disease; high plasma concentrations have been associated with psychoses including schizophrenia. Many antipsychotics function as dopamine antagonists, inhibiting the action of dopamine action at its receptors. Dopamine also functions as the neuroendocrine inhibitor of prolactin synthesis. Dopamine is used therapeutically for its effects on the kidneys, to promote natriuresis, and cardiac muscle, to increase cardiac output.

2 Sample requirements and precautions

- 2.1 Medium in which measured Dopamine is usually measured in urine.
- 2.2 Precautions re sampling, handling etc. Urine samples must be collected into acid containers (pH <3.5). A 24 h collection is preferred for adults and a random collection for children. In difficult cases, analysis of three separate collections may increase the clinical sensitivity of the test.

3 Summary of clinical uses and limitations of measurements

3.1 Uses

Dopamine is measured in the investigation of suspected catecholaminesecreting tumours e.g. neuroblastomas and dopamine-secreting phaeochromocytomas

3.2 Limitations None

4 Analytical considerations

4.1 Analytical methods

Dopamine is measured by high performance liquid chromatography (HPLC) with electrochemical detection or HPLC coupled to liquidchromatography tandem mass spectrometry (LC-MS/MS). Both methods require extraction of catecholamines prior to analysis.

- 4.2 Reference method: none
- 4.3 Reference materials: none
- 4.4 Interfering substances Grossly haemolysed samples are unsuitable for analysis.
- 4.5 Sources of error

1. Amitryptiline can interfere with HPLC analysis of plasma dopamine, causing falsely elevated results.

2. Several drugs used to treat psychiatric patients prevent catecholamine reuptake and may increase urinary excretion.

3. The following can interfere with or cause non-pathological increases in urine dopamine measurements:

- paracetamol
- L-DOPA
- α -methyl-DOPA.

5 Reference intervals and variance

- 5.1.1 Reference interval (adults) Urine: <3194 nmol/24 h (derived in a hypertensive population)
- 5.1.2 Reference intervals (children)
 - Plasma: dopamine is usually undetectable in plasma by HPLC analysis Urine: 0–24m <2216 nmol/mmol creatinine; 2–4 y <1132 nmol/mmol creatinine, 5–9 y <774 nmol/mmol creatinine, 10-19 y <403 nmol/mmol creatinine. A comprehensive schedule of reference values is provided in Davidson DF *et al*, Ann Clin Biochem 2011;48:358-366.
- 5.1.3 Extent of variation (all figures relate to measurements in urine)
- 5.1.3.1 Interindividual CV: 18.5%
- 5.1.3.2 Intraindividual CV: 8.5%
- 5.1.3.3 Index of individuality: 0.46
- 5.1.3.4 CV of method: ~10% (urine and plasma)
- 5.1.3.5 Critical difference: 36.4%
- 5.1.3 Sources of variation Urinary dopamine excretion increases with increasing salt intake.

6 Clinical uses of measurement and interpretation of results

6.1 Indications for measurement

Dopamine measurements are used:

- in the diagnosis of catecholamine-secreting tumours e.g. neuroblastomas
- to assess the completeness of surgical removal of catecholaminesecreting tumours

- to detect recurrence of a catecholamine-secreting tumour following surgical removal .
- 6.2 Confounding factors None

7 Causes of abnormal results

- 7.1 High values
- 7.1.1 Causes:
 - neuroblastoma
 - consumption of a high-salt diet
 - (extremely rarely) phaeochromocytomas and paragangliomas.
- 7.1.2 Investigation

When high concentrations or urinary excretion of dopamine are demonstrated, further investigation is by imaging and/or venous sampling for localisation of the source.

- 7.2 Low values
- 7.2.1 Causes:
 - low plasma concentrations of dopamine are found in patients with autonomic neuropathies including diabetic neuropathy and Parkinson's disease. However, dopamine measurements are of no value in the diagnosis or management of these conditions.
- 7.2.2 Investigation Not applicable
- 7.3 Notes

Individuals on treatment with L-dopa for Parkinson's disease or dopamine-responsive dystonia have extremely high excretion of dopamine (usually >30,000nmol/24h). Medication should be stopped several weeks before samples are taken for diagnostic purposes. A high dietary salt intake has been shown to increased dopamine excretion to above the reference range.

8 Performance

8.1 Sensitivity, specificity etc. for individual conditions
Diagnosis of neuroblastomas (note that the figures given are approximate: exact values will depend on the precise cut-offs used).
Urine: sensitivity 61%; specificity 86%.

9 Systematic reviews and guidelines

- 9.1 Systematic reviews Peaston RT, Weinkove C. Measurement of catecholamines and their metabolites. Ann Clin Biochem 2004;41:17-38.
- 9.2 Guidelines

1. Brodeur GM, Pritchard J, Berthold F *et al.* Revisions of the international criteria for neuroblastoma diagnosis, staging, and response to treatment. J Clin Oncol 1993;11:1466-1477.

2. Brodeur GM, Seeger RC, Barrett A *et al*. International criteria for diagnosis, staging, and response to treatment in patients with neuroblastoma. J Clin Oncol 1988;6:1874-1881.

9.3 Recommendations

1. Pacak K. Eisenhofer G. Ahlman H *et al.* Pheochromocytoma: recommendations for clinical practice from the First International Symposium. October 2005. Nat Clin Pract Endocrinol Metab 2007;3:92-102.

10. Links

10.1 Related analytes

3-Methoxytyramine is a metabolite of dopamine. This can be measured in both plasma and urine and is considered more sensitive than measurement of dopamine in the investigation of neuroblastomas. In addition, measurement of homovanillic acid, another metabolite of dopamine, is useful in the diagnosis of neuroblastomas.

10.2 Related tests

Dopamine is usually measured as part of a catecholamine assay set in combination with adrenaline and noradrenaline.

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