Analysis of Polymers, Additives and Contaminates in Medical Devices using Pyrolysis-GCMS



Abstract

Polymers and additives are used in a variety of subcutaneous and intravascular medical devices, such as sutures and drug delivery systems. These devices typically can be classified as being either absorbable or non-absorbable by the human body.

Natural materials, such as silk and catgut, are largely being replaced by synthetic materials. So, the reliability of these devices relies on the quality and proper application of these synthetic compounds. But regardless of their composition, the materials used are foreign to human tissue and will elicit a foreign body reaction to a greater or lesser degree.

This poster will show the analysis of several types of implanted medical devices from different manufacturers using pyrolysis-GCMS. Traditionally, pyrolysis has been used as a technique to identify polymers, which will be shown. But in addition, one or more "pre-pyrolysis" steps will be programmed first so that we can analyze for residual monomers, solvents, additives and contaminates, if present. Undesired contaminates or the incorrect quantity of an additive can often lead to product failure or worse.

Experimental

Pyrolyzer

Samples were pyrolyzed using a resistively heated coil filament pyrolyzer (Pyroprobe 5200). The samples were placed into a quartz tube and held in place using plugs of quartz wool.

Interface Temperature: 325°C Py Filament Temperature: 150, 350, or 700°C for 15 sec. (noted in figures) Pyrolysis Gas: Helium Valve Oven: 325°C Transfer Line: 325°C

GC-MS

Injection port: 325°C Carrier: Helium, 1ml/min Column: 30m x 0.25 mm 5% phenyl methyl silicone Split: 75:1 Oven: Detector: Initial: 40°C 2 minutes Type: Quadrupole Ramp: 10°C/min Scan: 35-550 AMU Ion Mode: EI+ Final: 300°C 5 minutes

Results & Discussion

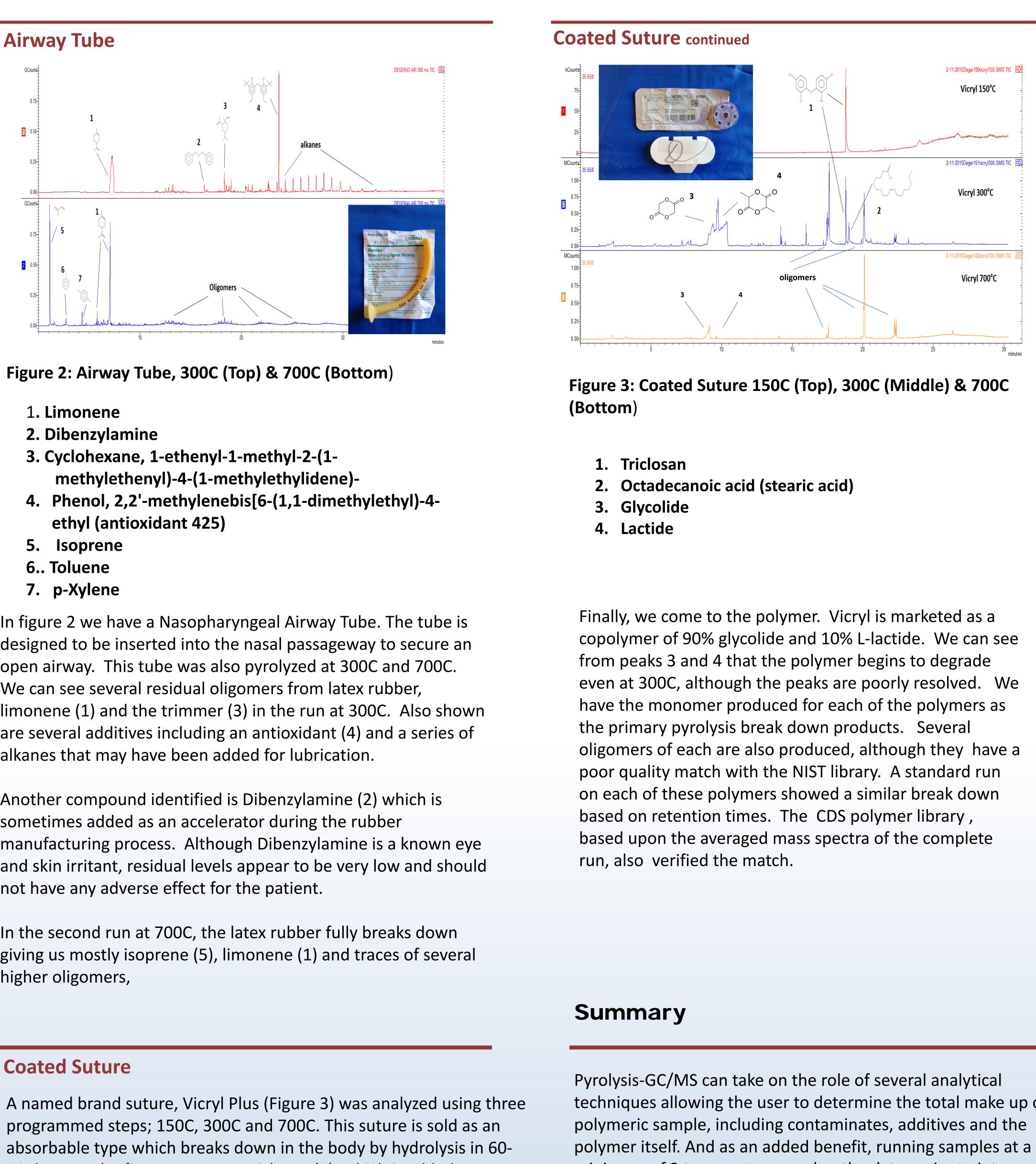
Several samples were analyzed including an absorbable suture and drain tubes. Multiple step runs at increasing temperatures were programmed for each so that we could analyze for additives, monomers and any contaminants before pyrolyzing the remaining polymers. In addition to using a NIST library, a polymer library developed by CDS was used in helping to identify the polymers.

Figu

benzene are common residuals seen when latex rubber (mainly polyisoprene) is pyrolyzed.

Gary Deger, Karen Sam CDS Analytical 465 Limestone Road, Oxford, PA 19363

Penrose Drain Tube	Airv
MCounts 400 3 5 6 0 DEGER71.ms TIC IIX	GCoun
$\begin{array}{c c} & & & & \\ 300 \\ & & & \\ 200 \end{array}$	0.7 1 0.5
100- 0- GCounts 7	0.2
CCounts 7 0.75 0.75	GCoun 0.7
	2 0.5 0.2
0.00	0.0
igure 1: Penrose Drain Tube, 300°C (Top) & 700°C (bottom).	Figu
1. Limonene	1
2. Cyclohexane, 1-ethenyl-1-methyl-2-(1-	2 3
methylethenyl)-4-(1-methylethylidene)- 3. Tetradecanoic acid	4
4. Octadecanoic acid	-
 5. Phenol, 2,2'-methylenebis[6-(1,1-dimethylethyl)- 4- ethyl (antioxidant 425) 	5 6
6. 9-Octadecenamide, (Z); (Oleamide)	7
7. Isoprene 8. Toluene	In fig
9. p-Xylene	desig
	oper We c
The first sample (figure 1) is a Penrose Drain Tube, which is	limo
typically placed in a wound to prevent the build-up of fluids.	are s
The sample was heated to two temperatures; 300C and then 700C.	alkar
	Anot
At 300C we see several compounds thermally extracted including limonene (1), which is the dimer of latex rubber and	some
also the trimer (2). So at 300C, we can see a slight	man and s
degradation of the polymer but it mostly is still intact. There	not ł
are a series of fatty acids (3 & 4) that probably are mold-	
release compounds on the surface of the airway tube left	In th
over from its manufacture. Two additives detected include an	givin
antioxidant (5) and another, Oleamide (6), which is sometimes used as a lubricant.	high
When the remaining sample is pyrolzyed to 700C, the	
pyrogram is typical for polyisoprene and it fully breaks down	Coa
to the monomer (isoprene marked as 7) and the dimmer	٨
(limonene, marked as 1). The small peaks for toluene and	A na



90 days. In the first run we see Triclosan (1), which is added as an antibacterial agent. At 300C, we still see some residual Triclosan and another peak for Octadecanoic acid (2). Some sutures are coated to ease the threading process and often the coating is Magnesium Stearate. In this case, it is believed that the Octadecanic acid (or stearic acid) is a pyrolysis product of the Magnesium Stearate coating.

techniques allowing the user to determine the total make up of a minimum of 3 temperatures makes the data easier to interpret since there are fewer peaks in each run. This will also help confirm that all the peaks in the final pyrolysis run (typically around 700C) are fragments from pyrolysis of the polymers, not from additives. There are many cases where a polymer fragment can also be the same as an additive, so a multiple step run will easily clear this up.