1 A comprehensive study of a new versatile microchip device based liquid phase microextraction

2 for stopped-flow and double-flow conditions.

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9 Abstract

10 A new geometry for a versatile microfluidic-chip device based liquid phase microextraction was developed in order to enhance the preconcentration in microfluidic chips and also to enable 11 double-flow and stopped-flow working modes. The microchip device was combined with a HPLC 12 13 procedure for the simultaneous determination of two different families as model analytes, which were parabens and non-steroidal anti-inflammatories (NSAIDs): Ethyl 4-hydroxybenzoate (Et-P), Propyl 4-14 hydroxybenzoate (Pr-P), Butyl 4-hydroxybenzoate (Bu-P), IsoButyl 4-hydroxybenzoate (iBu-P), 15 salycilic acid (SAC), ketoprofen (KET), naproxen (NAX), diclofenac (DIC) and ibuprofen (IBU) in 16 urine samples. The new miniaturized microchip proposed in this work allows not only the possibility 17 of working in double-flow conditions, but also under stagnant conditions (stopped-flow) (SF-µLPME). 18 The sample (pH 1.5) was delivered to the SF-µLPME at 20 µL min⁻¹ while keeping the acceptor phase 19 (pH 11.75) under stagnant conditions during 20 minutes. The highest enrichment factors (between 16 20 and 47) were obtained under stopped-flow conditions at 20 µL min⁻¹ (sample flow rate) after 20 min 21 22 extraction; whereas the extraction efficiencies were within the range of 27-81% for all compounds. The procedure provided very low detection limits between 0.7 and 8.5 μ g L⁻¹ with a sample volume 23 24 consumption of 400 µL. Parabens and NSAIDs have successfully been extracted from urine samples with excellent clean up and recoveries over 90 % for all compounds. In parallel, the new device was 25 also tested under double flow conditions, obtaining good but lower enrichment factors (between 9 and 26

27 20) and higher extraction efficiencies (between 45 and 95) after 7 min extraction, consuming a volume 28 sample of $140 \,\mu$ L.

The versatile device offered very high extraction efficiencies and good enrichment factor for double flow and stopped-flow conditions, respectively. In addition, this new miniaturized SF-µLPME device significantly reduced costs compared to the existing analytical techniques for sample preparation since this microchip require few microliters of sample and reagents and it is reusable.

33 Keywords: microextraction, miniaturization, sample preparation, microfluidic, drugs, urine sample.

34 1. Introduction

35 Liquid Phase microextraction (LPME) is a very well-known and popular technique used for the extraction of acid and basic drugs based on the passive diffusion of the analytes from the sample (donor 36 solution) into an acceptor solution, through a membrane (which support an organic solvent into its 37 38 porous). LPME has been applied to many different fields, considering biological, pharmaceutical, 39 environmental, food, toxicology analysis, among others [1–7]. The transport phenomena based on passive diffusion depends not only on the nature of the analytes, and the optimal parameters (as phase's 40 41 composition, organic solvent, stirring speed, flow rate, etc), but also on the geometry of the system used for LPME. Another popular technique based liquid phase microextraction, named 42 electromembrane extraction (EME), has also been frequently used since it improves the extraction of 43 compounds in many cases due to an external electrical field created to both sides of the support liquid 44 45 membrane [8–16]. However, EME also offers some limitations since its requirement is the use of a 46 suitable and conductor organic solvent for carrying out the extractions. Both techniques have been widely used for the determination of pharmaceutical drugs either in biological samples (urine) or water 47 samples [17-23] due to the great concern that exists regarding their contribution as emergent pollutants 48 49 in the environment. Also, parabens have been studied due to the concern about their endocrine disrupting potential [24-29]. This has required the use of powerful, fast and sensitive techniques that 50 offer better limits of quantification. 51

52 Up to date, parabens and non-steroidal antiinflamatories haven been determined by traditional LPME and EME procedures resulting in very good enrichment factors [1-4,17,19, 20, 30-33]. Those 53 54 procedures allowed good enrichment factors but low extraction efficiencies. In the last years, liquidliquid extraction has been miniaturized into microfluidic devices in order to address the limitations 55 from traditional procedures and these chip devices are becoming an attractive alternative due to the 56 many advantages that it presents [34-42]. The microchip devices for sample treatment have two 57 58 channels that allow working in two different ways based on the flow rate of each phase: double-flow or stopped-flow conditions. In double-flow conditions, both phases (sample and acceptor) are moving 59 60 at some flow rate. However, in stopped-flow conditions, the acceptor phase keep stagnant while the sample solution is used at some flow rate. Recent microchip devices based LPME, have been 61 demonstrated to work only under double-flow conditions but not under stopped-flow conditions in a 62 63 single step since the latter required to collect several extracts for its direct injection into HPLC. This was due to the low sample volume available in the acceptor channel (~ 2μ L) [41,42] and consequently, 64 the analysis time increased and the reproducibility decreased when an enrichment factor was necessary 65 prior to the sample analysis. On the other hand, the devices did not allowed high preconcentration 66 67 factors although the sample flow rate was significantly increased under double-flow conditions.

Based on the current limitations of microfluidic devices for microextraction procedures, the aim of this
work was to develop a new versatile and effective microfluidic device in order to overcome the
limitations from previous microfluidic devices, increasing the preconcentration and allowing working
under stopped-flow conditions compatible with direct analysis.

Based on geometry aspects, an increase of the depth channel would increase the volume capacity contained in the channel but it could decrease the transport phenomena by passive diffusion since the analytes are farther away from the membrane. Microfluidic systems that follow a laminar regimen do not carry agitation, so diffusion can be slow if the distance between the analytes and extraction solvent is increased. Moreover, an increase of the channel's width would increase the contact surface between

the sample and the analytes, however, very wide channels could destabilize the laminar flow and affectthe membrane stability.

In this work, we present for the first time a new versatile and effective microfluidic chip based LPME 79 80 which allow the possibility of working under two different working modes (double-flow or stoppedflow conditions). The microchip was applied to the simultaneous determination of two different 81 families in urine samples. This way, a comprehensive study between both different working conditions 82 was carried out. The microchip decreased the sample volume and time of analysis since no collecting 83 samples were needed for direct injection. The proposed stopped-flow device (SF- µLPME) is the 84 85 easiest microfluidic chip for the simultaneous extractions of different drugs resulting in higher enrichment factors with lower cost instrumentation, simple handling, reusability and is still considered 86 a "green method" by keeping low organic solvent ($< 5\mu$ L) consumption. The proposed device has been 87 88 successfully applied to urine samples.

89 2. Experimental

90 2.1. Chemicals and solutions

Ethyl 4-hydroxybenzoate (Et-P), Propyl 4-hydroxybenzoate (Pr-P), Butyl 4-hydroxybenzoate (Bu-P), 91 IsoButyl 4-hydroxybenzoate (iBu-P), salicylic acid (SAC), ketoprofen (KTP), naproxen (NPX), 92 diclofenac (DIC), ibuprofen (IBU),1-octanol, dihexyl ether, 2-nitrophenyl octhyl ether (NPOE), 93 formic acid, sodium hydroxide, chloride acid, sodium chloride and methanol were purchased from 94 Fluka–Sigma–Aldrich (Madrid, Spain). 100 mg L^{-1} stocks solutions were prepared in methanol except 95 96 SAC, DIC and IBU that were prepared in Milli-Q Plus water (Elga, purelab option S-R 7-15 (Madrid, Spain). All working dilutions were prepared using ultrapure water from a Milli-Q Plus by adequate 97 dilutions from stored at 4°C. A membrane (Celgard 2500) of 25 µm thickness, 55% porosity, and 0.21 98 99 μm x 0.05 μm pores was obtained from Celgard (Charlotte, NC, USA).

100 2.2 Fabrication of the microfluidic-chip device

101 Figure 1 shows a scheme of the microfluidic device based liquid phase microextraction. This microfluidic device has been re-designed and modified in order to overcome the limitations and 102 103 disadvantages from previous microfluidic devices. The optimal poly(methyl methacrylate(PMMA) device consisted of two symmetrical patterned plates with one channel of 23 mm length, 120 µm depth 104 105 and 3 mm width each. Four holes of 3 mm and 1.35 mm diameter were drilled for assembling and fixing in/outlets Teflon tubes, respectively. A flat polypropylene membrane piece of 27 mm length x 106 107 5 mm width separated the acceptor phase (channel 1) and the donor phase (channel 2). Firstly, the membrane was placed over one channel and impregnated with 4 µL of dihexyl ether. Once the 108 109 extracting solvent was immobilized along the membrane by capillary forces, the channels were aligned and the device was closed using four small crews. The final size of a microfluidic device for one single 110 extraction was 47×29×6 mm, however by increasing the size of both PMMA plates, an arbitrarily large 111 112 number of extraction channels can be implemented and independently addressed. Also, the microchipdevice can be opened any time when exchange membrane is needed. 113

A laser cutter (Epilog Mini 24-30 W) was used to fabricate this chip. The best quality was obtained
using a writing speed of 40%, power of 33%, a resolution of 1500 and a frequency of 5000.

116 Inlets Teflon tubes (acceptor and donor inlets) were connected to two separate micro-syringe pumps 117 (Cetoni GmbH, Korbussen, Germany). The sample (pH 1.5) was pumped into the microfluidic device 118 at $20 \,\mu$ Lmin⁻¹ while keeping the acceptor phase (pH 11.75) constant. The microfluidic device was also 119 tested under double-flow conditions as described below, in order to compare different working modes. 120 The acceptor phase was collected using a micropipette and was directly injected into a HPLC for 121 analysis.

122 2.3. Chromatographic conditions

An Agilent 1100 series (Barcelona, Spain) liquid chromatography equipped with a G1312A Bipump and an autosamplerG1313A for 5 μ L of sample injection was used as HPLC system. The column used for the separation of the nine compounds was a LiChroCART[®] 75-4 Purospher[®] STAR RP-18e 3 μ m 126 (75 mm x 4.0 mm i.d.) (VWR, Barcelona, Spain) proceeded by a guard column Kromasil1 100 Å, C18,

127 5 μm (20 mm x 4.6 mm i.d.) (Scharlab S.L., Barcelona, Spain).

128 The mobile phase consisted of 0.1% formic acid (pH 2.6) (component A) and methanol (component

B) at a flow rate of 0.5 mL min-1. Separation was performed at 25°C. An initial 60% component B

- 130 was used in isocratic mode for 2 min, and then a linear elution gradient was programmed from 60% to
- 131 80% (B) for 3.4 min and from 80 % to 86 % B for another 2.4 minutes. Three minutes were waited
- between injections which allowed re-equilibration of the column to the initial conditions.
- 133 The wavelengths used for DAD were 235, 255, 230, 280 and 225 nm for SAC, KTP, NAX, DIC and
- 134 IBU, respectively and 255 nm for all parabens. The chromatogram was completed in less than 10
- 135 minutes and the retention time was 3.1, 3.3, 4.7, 5.3, 6.3, 6.6, 6.8, 8.9 and 9.1, for SAC, Et-P, Pr-P,

136 KTP, NPX, iBu-P, Bu-P, DIC and IBU, respectively.

137 2.4. Preparation of biological samples analysis using µLPME extraction

Spiked urine samples were adjusted to pH 1.5 with HCl and filtered through Pall NylafloTM nylon
membrane filter 0.45 µm (Pall Corporation, Ann Arbor, Michigan, USA) prior to microextraction
procedure.

141 2.5. Calculations of extraction efficiency and enrichment factor

142 The enrichment factor (EF_i) for the analyte *i* was calculated according to the following equation (1): 143

144
$$EF_i = \frac{C_{f,a,outlet}}{C_{i,s,inlet}}$$
(1)

145

146 where $C_{f,a,outlet}$ is the concentration of the analyte i at the outlet of the acceptor channel and $C_{i,s,inlet}$ 147 is the initial concentration of the analyte in the sample. $C_{f,a,outlet}$ was determined by HPLC UV-148 detection using external calibration. The enrichment factor is calculated using the same equation either 149 using double-flow or stopped-flow conditions. The extraction efficiency (*EE*) was defined as the fraction of analyte transferred to the acceptor phase from the sample. Using a double-flow working
mode, the extraction efficiency (EE %) was calculated according to the following equation (2):

152
$$EE (\%) = \frac{C_{f,a,outlet}}{C_{i,s,inlet}} x \frac{v_a}{v_s} x 100 = EF_i x \frac{v_a}{v_s} x 100$$
(2)

153 Where v_a and v_s , are the acceptor and sample flow rate, respectively.

However, under stopped-flow conditions, the extraction efficiency (EE %) was calculated by substituting the parameter "acceptor and sample flow rate" by the "acceptor and sample volume" corresponding to each phase sample.

In order to obtain a global EE value for the 9 analytes, the average extraction efficiency index (avEEi)
was defined (3):

$$AvEEi = 1 - \sqrt{\frac{\sum_{i=1}^{n} (EE_i - 100)^2}{n}}$$
(3)

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161 **3. Results and discussion**

162 *3.1. Principle of the extraction*

The model analytes corresponded to two different families: non-steroidal antiinflamatories and 163 parabens. The extraction of the analytes is based on a passive diffusion process due to a strong pH 164 165 gradient difference between the acceptor and the sample solution. Non-steroidal antiinflamatories 166 contain acid groups within a pKa range value of 2.5-5, while the paraben are esters of parahydroxybenzoic acid and contain alcohol group which pK_a value are within the range of 5-8.8. A 167 three phases liquid phase microextraction configuration presents two aqueous solutions (acceptor and 168 169 sample) separated by the support liquid membrane (organic solvent). The analytes of interest were in neutral form in the sample solution and negatively charged in the acceptor solution. This way, a pH 170 171 value of under 7 (HCl solution) and over 9 (NaOH solution) were used as sample and acceptor solution, respectively. The microfluidic device was tested using two different working modes: double-flow mode 172 and stopped-flow conditions. The membrane was reused for consecutive extractions without observing 173

memory effects and the acceptor phase collected was analyzed by HPLC once the extraction was
completed. Under stopped-flow conditions, the acceptor phase was pumped continuously for at least
2-3 minutes between extractions to clean the SLM avoiding memory effects.

177 *3.2. Optimization of the microchip's geometry*

In LPME, the extraction of the analytes depends on a transport phenomenon based on passive 178 diffusion. The design of a new geometry was focused on the increasement of the channel volume 179 180 capacity (compatible with direct injection into HPLC) without decelerating the transport phenomena. Different length, wide and depth were tested in order to obtain an adequate and stable laminar flow 181 182 during the extraction, considering a final channel volume capacity between 7 and 10 µL for its direct analysis by HPLC after stopped-flow conditions. The length was fixed at 23 mm and the wide and 183 depth were tested between 1-3 mm and 50-300 µm, respectively. The depth was the most critical 184 185 parameter and it was limited to 120 µm since an increased depth significantly decelerated the transport phenomena. In one hand, a less deep channel kept high extraction efficiencies under double-flow 186 conditions (over 90%) but the channel volume capacity was not enough for working under stopped-187 flow conditions. On the other hand, a depth over 150 µm decreased the extraction efficiency under 188 double-flow conditions (less than 70%) and the enrichment factor decreased 20 % for all compounds 189 190 under stopped-flow conditions. Additionally, a wide of 2 mm required a deeper channel in order to increase the volume capacity and it decreased the extraction efficiencies and a wide of 4 mm did not 191 offer good reproducibility and stable flow rate. For this reasons, a compromise between depth, length 192 193 and width was carried out to increase transport phenomena and channel's volume but still maintaining 194 miniaturization size and simple handling conditions. The best results and the most reproducible and stable flow were obtained with a channel geometry of 23 mm length, 120 µm depth and 3 mm width. 195 196 Based on the fundamental basis for LPME, this new geometry presents longer and wider channels for increasing the contact area between the analytes and the support liquid membrane compared to 197

previous one made on PMMA. Additionally, the depth was increased to allow a greater volume capacity compared to the only 2 μ L volume capacity from the previous μ LPME device [41].

200 *3.3. Optimization and evaluation of experimental conditions*

201 According to data founded in the bibliography for individual microextraction of parabens or non-202 steroidal antiinflamatories, preliminary experiments were performed to determinate the most suitable organic solvent to be used as SLM for the simultaneous extraction of both families. For the 203 204 optimization of the organic solvent, a pH 3 (HCl) sample solution, pH 11.75 (NaOH) as acceptor solution, and 1 µL min⁻¹ as sample and acceptor flow rate were used. 2-nitrophenil octyl ether (NPOE), 205 206 1-octanol, 1-heptanol and dihexylether were tested by opening the microfluidic device for membrane exchange after each organic solvent test. As seen in Table 1, the extraction efficiency (based on 3 207 replicate experiments) was very different depending on the analyte. Best avEEi was obtained when 208 209 dihexylether was used as support liquid membrane, which was consequently used as SLM for the rest 210 of the study.

For optimization of sample and acceptor composition, the acceptor and donor phase were tested within 211 212 the ranges of pH 10-12 (aqueous NaOH solutions) and 1-4 (aqueous HCl solutions), respectively. The donor phase, containing 1 mg mL⁻¹ of each analyte, was tested keeping the acceptor phase fixed at pH 213 11.75. As seen in Figure 2, the highest peak areas were obtained at pH 1.5 after 7 minutes extraction, 214 not observing a significant decrease for the rest of the pH range tested. Then, acceptor phase 215 216 composition was optimized by keeping the sample solution fixed at pH 1.5 for all experiments. Figure 217 3 shows that the highest peak areas were obtained at pH 12 and pH 11.75 for five non-steroidal antiinflamatories and four parabens, respectively. On the other hand, parabens were not stable over pH 218 12 due to a slight degradation during their extraction, so a compromised pH of 11.75 was selected for 219 220 the extraction of both families. A relative standard deviation (RSDs %) below 4 % for all analytes resulted based on 3 replicate experiments of each experimental point for Figure 2 and 3. Consequently, 221

a pH of 1.5 and 11.75 were fixed as sample and acceptor composition, respectively, for the study ofthe flow rate for all compounds.

224 Next, the device was tested on two different working modes in order to compare the best results 225 obtained related to extraction efficiencies and enrichment factors. This new geometry allows testing 226 both working modes without the necessity of collecting different extracts (from acceptor outlet) under stopped-flow conditions, a limitation that a previous geometry presented [41,42]. First, for double-227 flow conditions experiments, the acceptor and donor flow rate were optimized within a range of 1-4 228 μ L min⁻¹ and 1-20 μ L min⁻¹, respectively. The acceptor phase was tested keeping the donor phase flow 229 rate at 1 μ L min⁻¹, obtaining the highest extraction efficiencies at 1 μ L min⁻¹ (data not shown). Then, 230 the donor flow rate was tested while the acceptor flow rate was kept constant at 1 µL min⁻¹. Figure 4 231 shows that the highest extraction efficiencies were obtained at $1 \,\mu L \,\min^{-1}$ flow rate for all compounds, 232 233 observing a decrease as the donor flow rate increased significantly due to the decrease residence time 234 of the sample. The extraction efficiencies were over 65 % for all compounds, except for Bu-P and SAC being slightly lower. However, as seen in Figure 5, the enrichment factor significantly increased when 235 the donor flow rate increased, resulting in an EF between 8 and 20 at 1 μ L min⁻¹ (acceptor flow rate) 236 and 20 μ L min⁻¹ (sample flow rate) for all compounds. 237

Second, stopped-flow condition was studied. The size and geometry of the new proposed microchip-238 device allowed the collection of a higher acceptor volume in one step (7 µL) after stagnant conditions 239 240 extractions. The microfluidic device was tested at different sample flow rates while keeping the 241 acceptor phase constant. Preliminary experiments were tested at different sample flow rate (5,10,20,30, 40 and 50 μ L min⁻¹) and extraction times, observing that extraction times depends on the sample flow 242 rate. Hence, extraction time and sample flow rate were investigated together. Flow rates over 60 µL 243 min⁻¹ were not tested since it showed not reproducible results due to certain instability of the support 244 liquid membrane. As shown in Figure 6, enrichment factors increased by increasing sample flow rate 245 from 5 to 20 μ Lmin⁻¹, but it decreased by increasing the sample flow rate over 20 μ L min⁻¹ since the 246

target analytes do not have enough time to pass through the SLM into acceptor phase. The highest enrichment factors were reached at 20 μ L min⁻¹ after 20 minutes extraction. At those conditions, extraction efficiencies and enrichment factors were within the range of 27-81 and 16-47, respectively. Each point from figure 4, 5 and 6 was based on 3 replicate experiments resulting in a relative standard deviation (RSDs %) below 6 % for all analytes.

Therefore, the new geometry of this microfluidic device allowed the possibility of either working under stopped-flow conditions resulting in higher enrichment factors and good extraction efficiencies, or under double-flow conditions obtaining lower enrichment factors but better extraction efficiencies.

Finally, the influence of salt addition was studied under stopped-flow conditions. NaCl and Na₂SO₄ were tested as salting-out reagent within the concentration range of 0–20% (w/v) and 0.5-1.5 M, respectively. It was observed an increase of the recoveries between 5 and 25 % for all compounds when 10 % of NaCl was added, except for DIC that did not show an increase and IBU which offered the highest recovery when 0.5 M of Na₂SO₄ was added. Then, 10 % NaCl was added to each sample experiment.

In order to demonstrate the performance of this new geometry, stopped-flow conditions mode was selected since it offered the highest enrichment factors for its application in urine samples. The optimal experimental conditions were pH 11.75 as acceptor phase, pH 1.5 as sample or donor phase, 20 μ L min⁻¹ as sample flow rate and 20 minutes extraction.

265 *3.4. Method evaluation*

A 10-point calibration curve was constructed using a least-square linear regression analysis of 10 different standard mixtures (in triplicate). Optimal conditions for stopped-flow working mode were applied to find out the linearity, repeatability, LODs, and LOQs of the method that summarized in Table 2. Several aqueous pH 1.5 solutions (containing the nine compounds) were injected into the microfluidic liquid phase microextraction procedure and analyzed according to the described HPLC procedure under stopped-flow conditions. Detection and quantification limits were calculated as three

272 and ten times the standard deviation of the background signal, respectively. The calibration curves were linear in the range of 6.0-100 µg L⁻¹ for SAC, Et-P, Pr-P, NPX, iBu-P and Bu-P; 9.7-100 µg L⁻¹ 273 for KTP; 14-100 μ g L⁻¹ for DIC and 28-200 μ g L⁻¹ for IBU. The linear range remained up to 10 mg L⁻¹ 274 ¹ for all compounds. R² values exceeded in all cases 0.9990. The repeatability was tested using different 275 membranes in order to evaluate the viability of the device by changing membranes during one month. 276 277 The relative standard deviation for repeatability (n=4) and interday repeatability (n=3, 5 days) were below 4% for all analytes. The results obtained after more than 12 consecutive extractions were not 278 reproducible, so the membrane was replaced after 10 extractions. Very low detection and quantitation 279 limits between 0.7-8.5 and 3-28 μ g L⁻¹ were obtained, respectively. 280

Under optimized conditions, the SF-µLPME provided high enrichment factors and good extraction efficiencies within the range of 16-47 and 27-81 %, respectively. Compared to our previous optimization for individual extraction of parabens and NSAIDs into a microfluidic chip [41-42], much higher enrichment factors have been obtained with also good extraction efficiencies by using this new microchip compared to double-flow conditions.

286 *3.4. Urine samples analysis using microfluidic SF-µLPME*

In order to evaluate the capability of the proposed microchip device in real samples, two urine sampleswere tested (Table 3).

Urine samples were collected from a 32 and 30 year-old female and male volunteer, respectively. 289 290 Samples were spiked at three different concentration levels of parabens and NSAIDs and were 291 submitted to the microchip device under stopped-flow conditions. The recovery was studied by comparing the extraction efficiency obtained from aqueous solution (containing the analytes) with the 292 extraction efficiencies obtained from spiked urine samples. The recoveries were over 90 % for all 293 294 compounds. Compared with previous procedures using HF-LPME for urine sample analysis, this SFµLPME purposed decrease significantly the sample volume required for the analysis and offers also 295 296 an excellent clean-up.

Figure 7 shows a representative chromatogram of a spiked urine sample containing 16 μ g L⁻¹ for all compounds except for IBU that was 30 μ g L⁻¹, observing an excellent clean-up with no sample dilution and low sample consumption compared to traditional LPME procedures, which requires much higher sample volume. The results indicated applicability of the proposed SF- μ LPME system for simultaneous analysis of parabens and NSAIDs.

Compared to previous methodologies and devices founded in the literature, this microchip based 302 LPME is more versatile and sensitive since it allowed to work under stopped flow conditions in one 303 step, resulting in higher enrichment factors and less sample volume consumption compared to 304 305 traditional LPME. Table 4 shows a comparison between different techniques based on SPE, LPME, DLLME and EME. Recent microchip devices published in the literature offered advantages like low 306 sample volume and high extraction efficiency [41, 42] with enrichment up to 10 [42]however, the 307 308 methodology could not be applied to samples where very low LOQ were required. Then, its application 309 was very limited to some real samples where no enrichment factor was required.

Other traditional methods for parabens or NSAIDs extraction (as SPE, HF-LPME or EME) have 310 showed lower [3], similar [33] or higher enrichment factors [4, 32], however, it required 20x and 125x 311 higher sample volume, longer extraction times and did not allow consecutive extractions using the 312 same membrane. On the other hand, other methods previously published offered higher EF between 313 28-49 [17] and 51-86 [20] and lower extraction time, but required 250x higher sample volume, the 314 membrane could not be reusable and it did not allow working under double-flow conditions which 315 316 requires lower sample volumes and offer shorter extraction times and very high extraction efficiencies. Finally, this new device presented as SF-µLPME demonstrate to be a very high and fast potential 317 method which is also reusable, allow several consecutive extractions and offer satisfactory EF from 318 319 very low microliters of sample.

4. Conclusions

In this work, a versatile on-chip liquid phase extraction was successfully designed for enabling working either under double-flow or stopped-flow conditions allowing good enrichment factors. The microchip was optimized and employed for the simultaneous analysis of SAC, Et-P, Pr-P, KTP, NPX, iBu-P, Bu-P, DIC and IBU as model analytes in the low volumes of urine samples.

325 The new microchip device proposed not only offer advantages over traditional LPME or EME, but it also gives many new important advantages over previous miniaturized LPME since it allows (1) an 326 327 enhancement of the pre-concentration factors in microfluidic systems, and (2) the possibility of also working under stopped-flow conditions (without the necessity of collecting extracts) resulting in a 328 329 sample outlet volume for injection (7 µL) that is compatible for direct analysis. Under stopped-flow conditions, low LODs, high sample cleanup, high preconcentration factors (16-47), and good 330 extraction efficiencies (27-81) were achieved by this microchip chip compared to previous 331 332 microfluidic devices based LPME. On the other hand, very high extraction efficiencies were achieved 333 using double-flow conditions (90-100).

Additionally, this miniaturized device also offer the additional advantages of using miniaturized 334 systems compared to traditional ones: decrease of the organic solvent volume, simple handling, the 335 possibility of being reusable (decreasing cost instrumentation) and small sample volume consumption. 336 The microchip can be used either in one mode or another depending of the LOQ requirements for real 337 samples and can be coupled online to analytical instruments such as HPLC allowing automation of 338 both the extraction procedure and its consequent analysis. The new geometry proposed in this work 339 340 (SF-µLPME) could be introduced as an appropriate alternative for the simultaneous analysis of different classes of analytes in complicated matrices, importantly for the analysis of samples with 341 limited available volumes (especially for biofluids). 342

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- 478 Leyend for the tables and figures captions
- 479 Figure 1. Schematic of the microchip device based liquid phase microextraction
- 480 Figure 2. Optimization of the donor phase composition. SLM: dihexylether, flow rate (donor and
- 481 acceptor phase): $1 \,\mu L \,\min^{-1}$, acceptor phase composition: pH 11.75
- 482 Figure 3. Optimization of the acceptor phase composition. SLM: dihexylether, flow rate (donor phase):
- 483 1 μ L min⁻¹, flow rate (acceptor phase): 1 μ L min⁻¹, donor phase composition: pH 1.5
- 484 Figure 4. Extraction efficiency versus sample flow rate. SLM: dihexylether, flow rate (acceptor phase):
- $1 \,\mu L \,min^{-1}$, donor phase composition: pH 11.5 and acceptor phase composition: pH 1.5
- 486 Figure 5. Extraction enrichment versus sample phase flow rate. SLM: dihexylether, flow rate (acceptor
- 487 phase): 1 μL min⁻¹, donor phase composition: pH 11.75 and acceptor phase composition: pH 1.5
- 488 Figure 6. Optimization of sample solution flow rate and extraction time for SAC, Et-P, Pr-P, NPX,
- 489 KTP, iBu-P, Bu-P, DIC and IBU.
- 490 Figure 7.Chromatogram of a spiked urine sample containing $16 \ \mu g \ L^{-1}$ for all compounds except for
- 491 IBU that was $30 \ \mu g \ L^{-1}$. Extraction time: 20 minutes. SLM: diexylether; donor phase composition: pH
- 492 11.75 and acceptor phase composition: pH 1.5. Sample flow rate: 20 µL min⁻¹. No sample dilution
- 493 Table 1. Extraction efficiencies (RSD %) of the model substances using different organic solvents as
- 494 the SLM for μ LPME of acid drugs.

495	Table 2. µLPME calibration parameters, method detection limit (MLOD), method quantitation limit
496	(MLOQ), extraction efficiencies and enrichment factor for all analytes in a) stopped-flow conditions
497	mode after 20 min extraction and b) in double-flow conditions mode with an extraction time of 7 min.
498	Table 3. SF- μ LPME/HPLC recoveries (average of three determinations \pm standard deviation) from
499	non-diluted spiked urine samples.
500	Table 4. Comparison of figures of merit of μ LPME with other analytical techniques for determination
501	of non-steroidal anti-inflammatories and parabens.
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511	Tables
512	Table 1
513	Table 1. Extraction efficiencies (RSD %) of the model substances using different organic solvents as
514	the SLM for µLPME of acid drugs.

		% Extraction effi	ciency (%RSD, n=3))
	NPOE	Dihexylether	1-heptanol	1-octanol
Salicylic acid	15 (2)	89 (1)	3 (1)	9 (1)
Ethyl 4-hydroxybenzoate	82 (1)	100 (2)	77 (2)	85 (1)
Propyl 4-hydroxybenzoate	99 (1)	99 (1)	79 (1)	88 (1)
Ketoprofen	94 (4)	98 (2)	12 (3)	86 (3)
Naproxen	81 (2)	93 (2)	17 (1)	58 (2)
IsoButyl 4-hydroxybenzoate	100 (2)	100 (1)	82 (2)	94 (2)
Butyl 4-hydroxybenzoate	70 (2)	98 (2)	81 (3)	97 (1)
Diclofenac	54 (1)	88 (2)	10(1)	33 (1)

Ibuprofen	70 (2)	100 (3)	5 (2)	22 (3)	
AvEEi	64	94	31	51	
^a Sample: 1 µL min ⁻¹ of	HCl at pH 3 containing	the nine drugs each a	it 1 μg mL ⁻¹ ; accept	tor: 1 μL min ⁻¹ of N	aOH at pH
11.75; extraction time: 7	min. NPOE: 2-Nitrophen	nyl octyl ether			
Table 2. μLPME ca	libration parameters,	method detection	limit (MLOD),	method quantita	tion limit
(MLOQ), extraction	efficiencies and enrice	chment factor for	all analytes in a) stopped-flow c	onditions
mode after 20 min ex	straction and b) in do	uble-flow condition	ons mode with ar	n extraction time	of 7 min.

	Stooped	-flow condi	tions ^a			Double-fl condition	OW S ^{b,c}	Double condition	-flow ons ^{b,d}
	MLOD	MLOQ	\mathbb{R}^2	EF	\mathbf{EE}^*	EF	\mathbf{EE}^*	EF	\mathbf{EE}^*
	(µg L ⁻¹)	(µg L ⁻¹)							
Salicylic acid	2.0	6.7	0.9997	47	81	9	44	-	98 (1)
Ethyl 4-hydroxybenzoate	1.1	3.7	0.9995	42	73	15	74	-	100 (1)
Propyl 4-hydroxybenzoate	0.7	2.3	0.9992	35	61	17	87	-	98 (1)
Ketoprofen	2.9	9.7	0.9991	34	60	18	89	-	99 (1)
Naproxen	1.8	6.0	0.9994	41	71	13	64	-	100 (1)
IsoButyl 4-hydroxybenzoate	0.9	3.0	0.9990	21	44	14	70	-	100 (1)
Butyl 4-hydroxybenzoate	1.5	5.0	0.9992	16	27	11	55	-	99 (1)
Diclofenac	4.2	14.0	0.9989	19	34	15	76	-	92 (1)
Ibuprofen	8.5	28.3	0.9991	35	61	19	94	-	99 (1)

537	*% Extraction efficiency (%RSD, n=4)
538	^a Extraction time: 20 min and sample flow rate 20 µL min ⁻¹
539	^b Extraction time: 7 min
540	^c Acceptor flow rate of 1 μ L min ⁻¹ and sample flow rate of 20 μ L min ⁻¹
541	^d Acceptor and sample flow rate of 1 µL min ⁻¹
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568	Table 3. SF-µLPME/HPLC recoveries (average of three de

age of three determinations \pm standard deviation) from

non-diluted spiked urine samples.

7 18	92.5 ± 0.6 94.2 + 1.2	N.Q	94.4 ± 0.9	NO	ND
18	94.2 ± 1.2			1.Q	N.D
	77.2 ± 1.2	93.3 ± 0.8	92.4 ± 1.1	86.6 ± 0.7	$89.1\pm0.3^*$
50	95.5 ± 0.6	95.5 ± 0.8	98.2 ± 0.5	85.0 ± 0.5	90.2 ± 0.4
7	90.1 ± 0.5	N.Q	95.2 ± 0.4	N.Q	N.D
18	92.4 ± 0.8	93.4 ± 0.9	93.3 ± 0.8	86.1 ± 0.7	$87.2 \pm 1.5^{*}$
50	95.9 ± 1.2	94.0 ± 1.0	100.0 ± 0.8	88.8 ± 0.4	91.7 ± 0.6
tration: 30	μg L ⁻¹				
t	$\frac{18}{50}$	$7 90.1 \pm 0.5$ $18 92.4 \pm 0.8$ $50 95.9 \pm 1.2$ ration: 30 µg L ⁻¹	$\begin{array}{cccc} 7 & 90.1 \pm 0.5 & \text{N.Q} \\ 18 & 92.4 \pm 0.8 & 93.4 \pm 0.9 \\ 50 & 95.9 \pm 1.2 & 94.0 \pm 1.0 \\ \hline \text{ration: 30 } \mu\text{g } \text{L}^{-1} \end{array}$	$\begin{array}{cccccccccccccccccccccccccccccccccccc$	$\begin{array}{cccccccccccccccccccccccccccccccccccc$

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590	Table 4. C	Comparison	of figures	of merit of	of µLPME	with other a	analytical	techniques f	or determination
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591 of non-steroidal anti-inflammatories and parabens.

Analytical method	Analyte	Matrix	Sample	LOQ	EF	EE %	Extraction	Multi-	Reference
			Volume (ml.)	(µg L ⁻¹)			time (min)	extraction	
HF(3)-LPME-HPLC/UV	SAC, DIC, IBU	Urine	50	41-180	70-900	-	15	No	4
HF(3)-LPME-MS/MS	SAC, DIC, IBU	Waste water	50	0.5-5	-	50-100	15	No	1
SPE-LC-MS/MS	SAC, DIC, IBU	Waste Water	500	0.1-3	-	70	> 30	No	21
DLLME-SFO-HPLC/UV	KTP, DIC	Urine	5	4-5	-	95-100	5	No	22
µLPME-HPLC/UV double-flow	SAC, KTP, NAX, DIC, IBU	Urine	0.007	100-500	-	75-100	5	Yes	41
HF-LPME-GC ^a	MeP, EtP, PrP	Water and urine	8	100-300	21-154	-	40	No	32
HF-LPME- ^b	MeP, EtP, PrP, BuP, iPrP iBuP. BzP	Water	3.5	0.5	3-16	24-60	30	No	3

EME-HPLC/UV	EtP, PrP, BuP, iBuP. BzP	Water	10	2.4-5	32-49	< 8	40	No	33
DF-µLPME- HPLC/UV double-flow	EtP, PrP, BuP, iBuP	Water	0.05	5-12	9-10	84-100	5	yes	42
DF-µLPME- HPLC/UV (1 µL min ⁻¹)	SAC, KTP, NAX, DIC, IBU	Urine	0.007	55-980	-	92-100	7	Yes	This work
DF-µLPME- HPLC/UV (20 µL min ⁻¹)	ETP, PrP, BuP, iBuP SAC, KTP, NAX, DIC, IBU	Urine	0.14	4.5-49	9-19	44-94	7	Yes	This work
SF- μLPME- HPLC/UV	EUF, FIP, BuP, iBuP SAC, KTP, NAX, DIC, IBU EtP, PrP, BuP iBuP	Urine	0.4	2.3-28	21-47	27-81	20	Yes	This work

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^a Hollow fiber liquid phase microextraction- 2 phases ^b Hollow fiber liquid phase microextraction- 3 phases