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Analysis of urinary calculi obtained from a patient with idiopathic hypouricemia using micro area x-ray diffractometry and LC-MS

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Abstract Urolithiasis is a common complication in patients with hypouricemia. Using a microarea x-ray diffractometer and nanoflow liquid chromatography-mass spectrometry (LC-MS) following SDS-polyacrylamide gel electrophoresis (PAGE), recurrent urinary calculi complicating a hypouricemic patient were analyzed. Analysis with the microarea x-ray diffractometer showed that one of the calculi was composed of calcium oxalate monohydrate and hydroxyapatite. The other was found to be formed from calcium oxalate dihydrate. After determination with LC-MS, both were found to contain uromodulin, albumin, osteopontin, protein Z, and defensins. Lysozyme and calgranulin A were also identified in these calculi. Defensins, which were antimicrobial peptides, and lysozyme, a mucopeptide glycohydrolase, were identified as new organic components of urinary stones. The role of these proteins in the process of urolithiasis is of particular interest.

Keywords Urinary calculi · LC-MS · Microarea x-ray diffractometer · Calcium oxalate · Defensins · Lysozyme

Introduction

Hypouricemia due to an isolated tubular defect of uric acid transport is a relatively rare disease. Patients with idiopathic renal hypouricemia show a high uric acid clearance because of abnormal tubular transport of uric acid in the kidney. It is known that urinary calculi are often complications in patients with hypouricemia [1]. It is important to carefully analyze each patient's individual urinary calculus in order to investigate the mechanisms of calculi recurrence.

Several proteins, collectively dubbed “the matrix”, have been reported as organic components of renal stones [2, 3]. Albumin, Tamm-Horsfall protein, α -globulins and γ -globulins have been reported to be present within the calculi as matrix proteins. Osteopontin and prothrombin, which are calcium-binding proteins, have been reported in the matrix of calcium oxalate stones [4–7]. Calprotectin was also found both in struvite stones and calcium oxalate stones [8–10]. Furthermore, we identified protein Z, which is reported to be a vitamin K-dependent calcium-binding protein [11–16], in a urinary calculus composed of calcium oxalate monohydrate [17]. This protein has been reported to be a factor acting in the coagulation process [18, 19].

In other studies, after polyacrylamide gel electrophoresis (PAGE) was performed, liquid chromatography-mass spectrometry (LC-MS) was applied for the analysis of various proteins [20–23]. LC-MS is of importance because of its high sensitivity.

In this study, we employed LC-MS equipped with a nanoelectrospray interface, and an ion-trap detector, in order to analyze the matrix protein in recurrent calculi from a hypouricemic patient. An algorithm with tandem mass spectrum database matching tools was also employed for identifying proteins [24]. Furthermore, in order to determine the inorganic components of the calculus, a microarea x-ray diffractometer [25, 26] was used, enabling the fine inorganic components of the calculus to be analyzed.

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Materials and methods

Urinary calculi

Urinary calculi were obtained from a male patient with idiopathic hypouricemia [27]. He had suffered from recurrent urolithiasis and came to the Department of Internal Medicine at Teikyo University Hospital for treatment. Calculus 1 (2×3 mm) was discharged in 1994, and calculus 2 (1.5×3 mm) in 1997. The patient brought the calculi to the hospital for further clinical examination. Routine IR analysis showed that they were mainly composed of calcium oxalate (more than 95%). The patient was informed that his urinary calculi would be used in further analysis.

Microarea x-ray diffractometry

The urinary calculi were analyzed with a microbeam of x-rays at several spots. After the outer surface of the unbroken calculus was determined, it was divided into two or three pieces and was analyzed at several points on its inner face. For this study, a microarea x-ray diffractometer (JEOL JDX-8030, DX-MAP2, Tokyo, Japan) with a microscope was used according to previously reported methods [25]. The analytical conditions were as follows: target: Cu; filter: Ni; voltage: 40 kV; current: 40 mA; diameter of the collimator: 100 μ m. The diffraction pattern obtained was compared with the data registered in the Joint Committee on Powder Diffraction Standards (JCPDS) database.

Protein extraction from urinary calculi

Extraction was performed mainly according to previously reported methods [17]. Calculus 1 was powdered and extracted with 4 M guanidine hydrochloride in 50 mM Tris/HCl buffer (pH 7.4) containing 1 mM phenyl methyl sulfonyl fluoride (PMSF), and 0.5 M EDTA in 50 mM Tris/HCl buffer (pH 7.4). Calculus 2 was powdered in the same way, and then extracted separately with 0.6 M KCl, 10% formic acid, 4 M guanidine hydrochloride in 50 mM Tris/HCl buffer (pH 7.4) containing 1 mM phenyl methyl sulfonyl fluoride (PMSF), and 0.5 M EDTA in 50 mM Tris/HCl buffer (pH 7.4). After every extraction, the sediment was washed three times and the supernatant dialyzed and concentrated by lyophilization. The dialyzed samples were kept at -80°C until electrophoresis.

SDS-PAGE

Proteins were analyzed by sodium dodecyl sulfated-polyacrylamide gel electrophoresis (SDS-PAGE) or two-dimensional polyacrylamide gel electrophoresis

(2D-PAGE) [20]. The sample was dissolved in 125 μ l of buffer containing 8 M urea, 2% CHAPS, IPG buffer and bromophenol blue. The gel was stained with Coomassie brilliant blue (CBB).

In gel digestion with trypsin

Protein spots were excised from the gel and digested with trypsin according to published procedures [28].

Liquid chromatography-mass spectrometry

A portion of the tryptic peptide solution was analyzed by LC-MS. The HPLC system used was the Magic 2002 from Michrom BioResources (USA). The analytical conditions were as follows: column: Magic C₁₈, 0.2 mm ID×50 mm; solvent: 0.1 M formic acid with CH₃CN gradient (5–65% in 20 min); flow rate: 2 μ l/min.

The mass spectrometer employed was a ThermoQuest LCQ_{DACA} (USA) equipped with an ion trap, and a nano ESI interface from Michrom BioResources. The electrospray voltage was 1.5 kV and the temperature of the heated capillary was 170°C. During the chromatographic separation, the LCQ_{DACA} performed the “dynamic exclusion” experiment. The experiment produced a full-scan MS spectrum and full-scan MS/MS spectrum based on a maximum intensity threshold. Using ion-trap detection, the mass fragmentation from the selected ions was easily collected. The MS/MS spectra were subjected to a database search using SEQUEST (X calibur 1.3, Bioworks 3.0) [29]. SEQUEST correlates uninterpreted tandem mass spectra on peptides with amino acid sequences in a protein and nucleotide database.

Chemicals

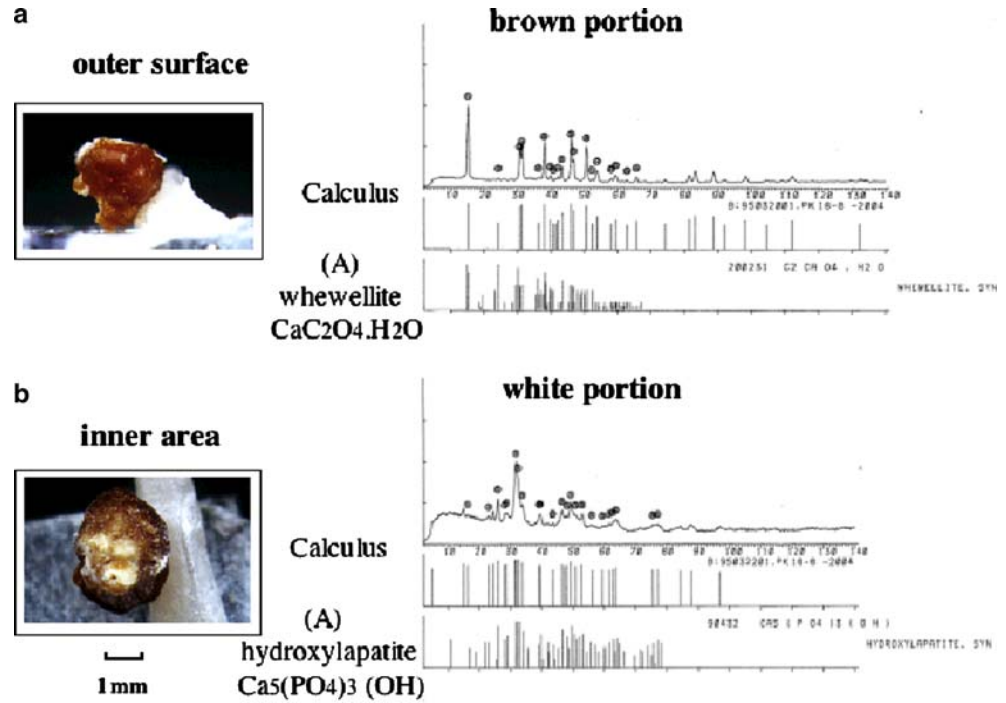
All chemicals were of the highest commercial quality available. Chemicals were purchased from Wako Pure Chemicals (Japan) or Sigma (USA).

Results

Analysis using a microarea x-ray diffractometer

Figure 1 indicates the x-ray diffraction pattern of a spot on the outer surface of the unbroken calculus 1. The brown portion on the surface of this calculus was composed mainly of calcium oxalate monohydrate (whewellite). The intensity of the diffracted x-rays was strong, and the diffraction angles agreed well with those of calcium oxalate monohydrate as listed in the JCPDS database. Calculus 1 also contained a white colored internal area. When this portion was determined, the intensity of the diffracted x-ray was not very strong

Fig. 1 X-ray diffraction pattern of: **a** a spot on the outer surface and **b** a spot in the inner area of calculus 1. Several points of calculus 1 were analyzed using microbeam x-rays. The x-ray diffraction pattern was recorded with an x-ray goniometer and is represented in intensity as a function of twice the diffraction angle (2θ) curve. The vertical line shows the intensity of x-ray diffraction. The retrieved standard substance in the JCPDS database is indicated by (A) at the bottom



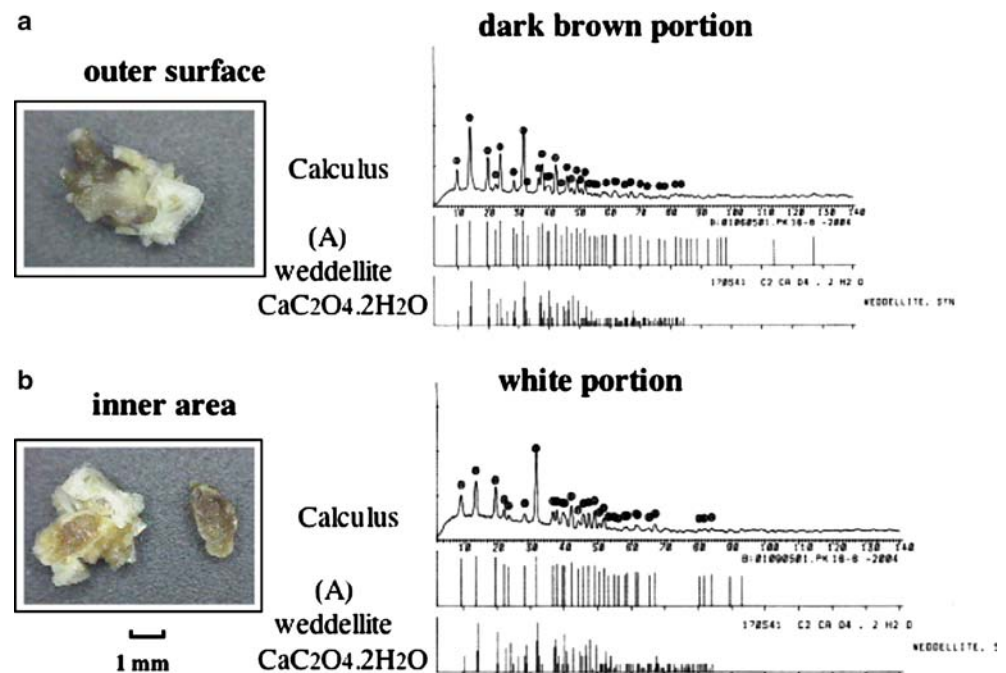
when compared with the outer surface. However, the data indicated a high degree of similarity to hydroxylapatite as listed in the JCPDS database (Fig. 1). Therefore, we determined this portion to be hydroxylapatite, an inorganic component.

Figure 2 shows the x-ray diffraction pattern of calculus 2. Both the brown-colored outer surface and the white-colored inner portion were considered to be calcium oxalate dihydrate (weddellite).

SDS-PAGE of urinary stones

In Fig. 3a, the polyacrylamide gel electrophoresis of guanidine and EDTA extracted proteins from calculus 1 is shown. From calculus 1, several protein bands were stained with CBB. Most of the proteins migrated to 40–75 kDa and <25 kDa. Figure 3b shows SDS-PAGE of extracted proteins from calculus 2 with four different solvents: 0.6 M KCl, 10% formic acid, 4 M guanidine

Fig. 2 X-ray diffraction pattern of: **a** a spot on the outer surface and **b** a spot in the inner area of calculus 2. Refer to the legend in Fig. 1 for details



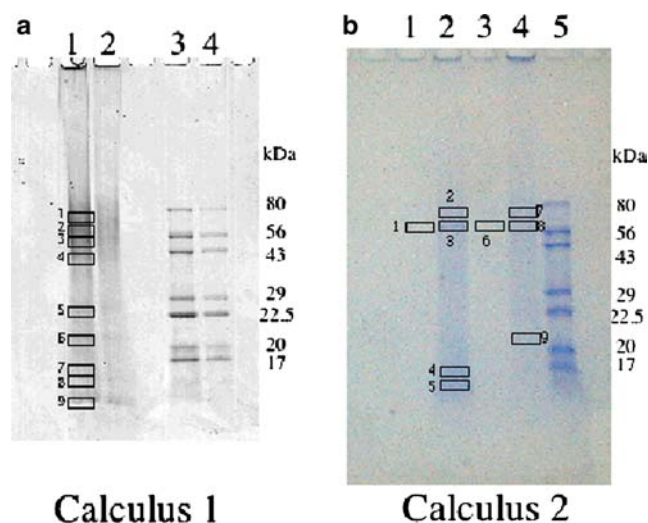


Fig. 3 SDS-polyacrylamide gel electrophoresis (PAGE) of calculus 1 (**a**) and calculus 2 (**b**). **a** Extracted protein, together with guanidine-HCl and EDTA, from calculus 1 were subjected to SDS-PAGE. Proteins were stained with Coomassie brilliant blue (CBB). Lane 1: extract 10 µl; lane 2: extract 5 µl; lane 3: marker 10 µl; lane 4: marker 5 µl. **b** Proteins in calculus 2 were extracted in sequence with 0.6 M KCl, 10% formic acid, 4 M guanidine-HCl, and 0.5 M EDTA. Proteins were subjected to SDS-PAGE and stained with CBB. Lane 1: extract with 0.6 M KCl; lane 2: extract with 10% formic acid; lane 3: extract with 4 M guanidine-HCl; lane 4: extract with 0.5 M EDTA; lane 5: marker

hydrochloride, and 0.5 M EDTA. Stained bands were seen in both the formic acid and EDTA fractions.

Though protein bands were not well isolated as individual bands, these spots were excised, and digested with trypsin in gel, then applied to LC-MS.

Protein detection using LC-MS

Analysis of proteins from each excised spot was conducted, and multiple MS/MS spectra obtained. The

computerized protein identification program, SEQUEST, a tandem mass spectrum database-matching tool, was applied.

Proteins identified in these urinary calculi are summarized in Table 1. Protein Z, which is a vitamin K-dependent protein that we previously identified in a renal stone [17], was detected in bands 1, 2, 3 and 4 of the SDS-PAGE of calculus 1, as shown in Fig. 3a. The molecular weight of protein Z is reported to be 62 kDa, but in calculus 1, protein Z was detected in four bands with molecular weights of 40–75 kDa. After LC-MS analysis, four peptides of protein Z were detected in calculus 1. The positions of the detected peptides were 204–215, 232–240, 320–327 and 413–418 amino acids, respectively. The protein coverage rate was 8.3%. The spectrum obtained from calculus 1 was similar to the theoretical fragmentation of the corresponding peptide.

Lysozyme, a protease with a molecular weight of 17 kDa, was detected in band 8 of calculus 1. Six peptides were detected and the protein coverage rate was 46.6% (Fig. 4a). The MS/MS spectrum of the peptide, positions 69–80, is indicated in Fig. 4b.

Neutrophil defensins, which have a molecular weight of 10 kDa, were identified in band 9. Three peptides were detected by LC-MS analysis and the protein coverage rate was 26.6% (Fig. 5a). The MS/MS spectrum of the peptide, positions 70–78, are shown in Fig. 5b.

From calculus 1, three other proteins, uromodulin, albumin and osteopontin, were determined in several areas. Uromodulin was identified in bands 1, 3, 4, and 6. Albumin was detected in bands 2 and 4, and osteopontin was identified in bands 1, 2, and 3.

In calculus 2, the protein extraction procedure from the calculi was changed and the elution pattern of the proteins studied. Few proteins were stained with CBB in both 0.6 M KCl and 4 M guanidine hydrochloride extracts, as indicated in Fig. 3b. Protein candidates could not be detected in these extracts (Table 1). On the other hand, several bands were stained with CBB in 10% formic acid extract and in the 0.5 M EDTA extract. In

Table 1 Proteins identified in calculus 1 and calculus 2

		Identified protein	Bands
Calculus 1	SDS-PAGE	Uromodulin	Band 1, 3, 4, 6
		Osteopontin	Band 1, 2, 3
		Protein Z	Band 1, 2, 3, 4
		Albumin	Band 2, 4
		Lysozyme	Band 8
		Defensins	Band 9
		Uromodulin	
Calculus 2	SDS-PAGE	Protein Z	
	0.6 M KCl	Not detected	
		Calgranulin A	Band 2, 3, 4, 5
		Uromodulin	Band 2
		Albumin	Band 3
		Defensins	Band 5
	4 M Guanidine-HCl	Not detected	
		Osteopontin	Band 8
		Protein Z	Band 8
	0.5M EDTA		

Fig. 4 Lysozyme identified by LC-MS of calculus 1. With the SEQUEST search program from MS/MS spectra obtained from the calculus 1 analysis, six peptides in protein Z were detected. The results of the protein search are shown in **a**, and the protein coverage rate was 46.6%. MS/MS spectrum of a peptide, positions 69–80 (STDYGIFQINSR), is indicated in **b**. The theoretical mass numbers of MS/MS fragmentation are shown on the left. The MS/MS spectrum actually obtained from the extract of the calculus is shown in the box to the right. The theoretical mass numbers, which were found to be identical to the actual mass numbers observed in calculus, are indicated in *bold* or *colored print* in the theoretical data table and are marked accordingly on the spectrum. Most of the spectra agreed with the theoretical fragmentation mass numbers in the calculus

database=C:\Xcalibur\database\human.fasta, accession=gij126615|sp|P00695|LYC_HUMAN
peptide(s)=YWCNDGK WESGYNTR QYVQCGV AWWAWR STDYGIFQINSR
TPGAVNACHLSCSALLQDNIADAVACAK

Analyzing ...

>gij126615|sp|P00695|LYC_HUMAN LYSOZYME C PRECURSOR (1,4-BETA-N-ACETYLMURAMIDASE C) [gij2144473|pir|LZHU lysozyme (EC 3.2.1.17) c precursor - human [gij307140 (J03801) lysozyme precursor (EC 3.2.1.17) [Homo sapiens] [gij307142 (M19045) lysozyme precursor (EC 3.2.1.17) [Homo sapiens] [gij1790941 (U76912) lysozyme c precursor [Pan troglodytes] [gij1790961 (U76933) lysozyme c precursor [Pan paniscus]

[MASS=16537]

MKALIVLGLV LLSVTVQGV FERCELARTL KRLGMDGYRG ISLANWMCLA KWESGYNTRA
TNYNAGDRST DYGFQINSR YWCNDGKTPG AVNACHLSCS ALLQDNIAD VACAKRVVRD
PQGIRAWVAV RNRCQNRDVR QYVQCGCV

>average mass = 16519

position sequence (NCBI BLAST link)

81- 87 YWCNDGK

52- 59 WESGYNTR

141- 148 QYVQCGV

126- 131 AWWAWR

69- 80 STDYGIFQINSR

88- 115 TPGAVNACHLSCSALLQDNIADAVACAK

Protein Coverage: 69/148 = 46.6% by amino acid count, 7587/16519 = 45.9% by mass

Search SWISS-PROT with [gij126615|sp|P00695|LYC_HUMAN](#) via [accession](#), [descr./ID](#), or [full text](#) field.

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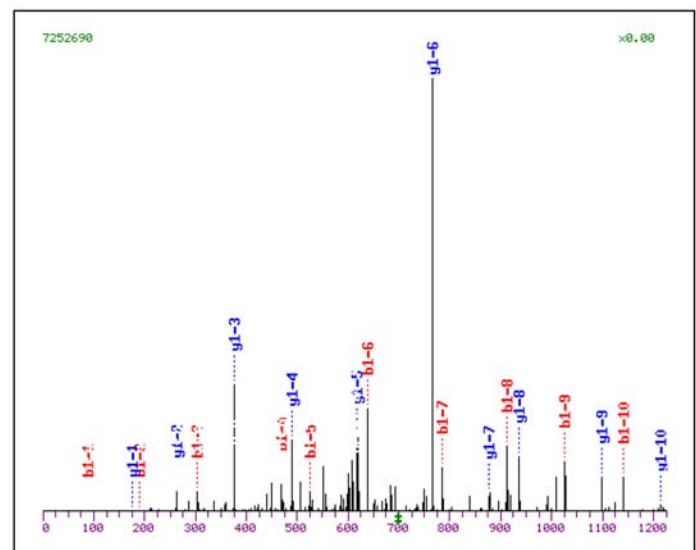
Lysozyme C precursor peptide, position 69-80 (STDYGIFQINSR) **b**

Seq # b y (+1)

S	1	88.1	1401.5	12
T	2	189.2	1314.4	11
D	3	304.3	1213.3	10
Y	4	467.4	1098.2	9
G	5	524.5	935.0	8
I	6	637.7	878.0	7
F	7	784.8	764.8	6
Q	8	913.0	617.7	5
I	9	1026.1	489.5	4
N	10	1140.2	376.4	3
S	11	1227.3	262.3	2
R	12	1383.5	175.2	1

Seq # b y (+2)

S	1	44.5	701.3	12
T	2	95.1	657.7	11
D	3	152.6	607.2	10
Y	4	234.2	549.6	9
G	5	262.8	468.0	8
I	6	319.3	439.5	7
F	7	392.9	382.9	6
Q	8	457.0	309.3	5
I	9	513.6	245.3	4
N	10	570.6	188.7	3
S	11	614.2	131.6	2
R	12	692.3	88.1	1



the extract with 10% formic acid, calgranulin A, uromodulin, and albumin were identified. In the EDTA extract, osteopontin and protein Z, which are both calcium-binding proteins, were detected.

Discussion

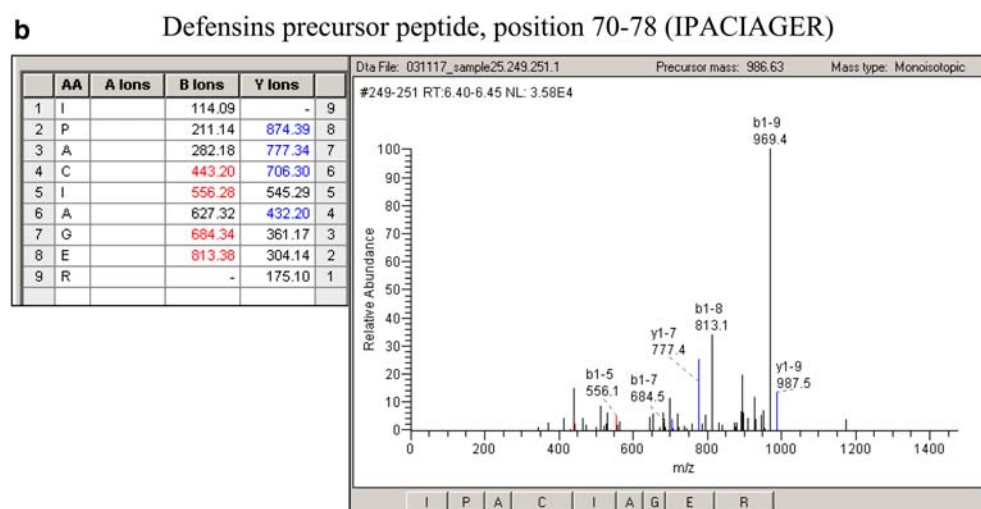
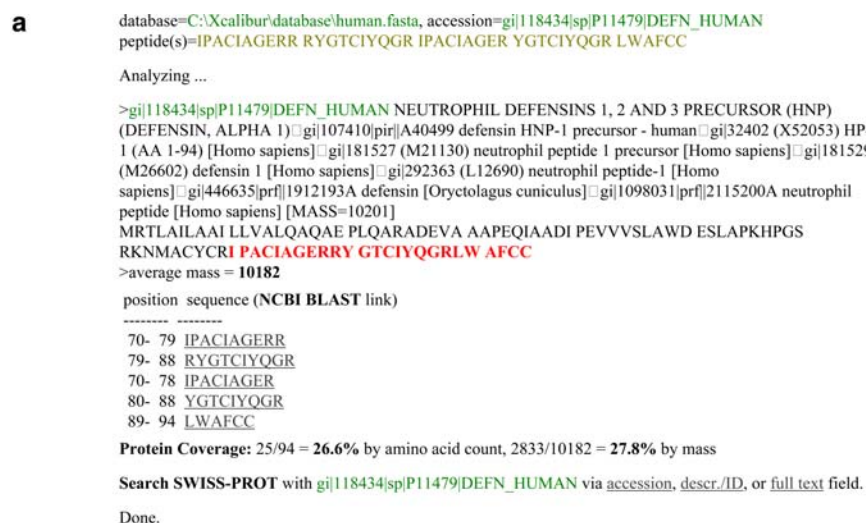
Urinary calculi obtained from a hypouricemic patient were analyzed in detail. Microarea x-ray diffractometry was first carried out with unbroken stones in order to determine the inorganic components. For the analysis of matrix proteins, extraction, SDS-PAGE and LC-MS were performed.

Using SDS-PAGE, proteins in calculi could not be clearly isolated as individual protein bands because of a strong tendency to aggregate, as reported previously [3]. Proteins in the calculus seem to interact and associate with each other, and are not easily isolated.

Calculus 1 was composed of calcium oxalate monohydrate and hydroxyapatite as crystal components. When this calculus was extracted with guanidine-HCl and EDTA, it contained uromodulin, osteopontin, albumin, protein Z, defensins, and lysozyme as the matrix proteins.

Calculus 2 was mainly composed of calcium oxalate dihydrate as an inorganic component. When we used 10% formic acid, we were able to obtain calgranulin A,

Fig. 5 Defensins identified by LC-MS of calculus 1. **a** Shows the results of the protein search. Three peptides were detected by LC-MS and the protein coverage rate was 26.6%. **b** Indicates the MS/MS spectrum of peptide, positions 70–78 (IPACIAGER). Most of the spectra in the calculus agreed with the theoretical fragmentation mass numbers



uromodulin, albumin, and defensins. Furthermore, osteopontin and protein Z were detected with 0.5 M EDTA.

The common proteins in these two calculi were uromodulin, osteopontin, albumin, protein Z and defensins. The three former proteins are widely known to exist in urinary calculi [2–5, 7, 10]. We previously reported the presence of protein Z, a vitamin K-dependent calcium-binding protein, in a calculus [17]. Although the physiological role of protein Z is little understood, it is believed to act as a regulator in the coagulation process [11–16, 18, 19]. Osteopontin and protein Z are considered to be relevant to the formation of calcium oxalate stones.

Defensins are reported to be antimicrobial peptides in vertebrates [30, 31]. The present study is the first to detect defensins in urinary calculi. Defensins contain a relatively large number of basic amino acids, and therefore we were able to extract them with formic acid in calculus 2. The presence of defensins in urinary calculi is thought to be the result of a preventive reaction to some type of infection.

In addition to these proteins, calculus 1 contained lysozyme and calculus 2 calgranulin A. Calgranulin A

has previously been reported in urinary calculi [8–10]. Because it is a calcium binding protein, it probably plays this role in the matrix of calcium stones. Lysozyme has not previously been reported as a matrix protein in urinary calculi. Because lysozyme is a comparatively small enzyme, it has been used as a marker for renal dysfunction and abnormal urinalysis [32, 33]. The patient had idiopathic renal hypouricemia with a defect in post-secretory reabsorption of uric acid [27]. The presence of lysozyme in his calculus is probably related to this renal abnormality.

The differences in protein between the two calculi can be derived from their crystal components. Calculus 1 contained calcium oxalate monohydrate and hydroxyapatite and calculus 2 was composed of calcium dihydrate. There have been few reports in which different calculi from the same individual have been analyzed minutely using sensitive methods. It is considered important to carefully analyze each calculus from a patient with recurrent urolithiasis and to compare the data obtained.

In this study, urinary calculi obtained from a hypouricemic patient with recurrent urolithiasis were

analyzed minutely using a microarea x-ray diffractometer and LC-MS. Novel matrix proteins, defensins and lysozyme, were detected in urinary calculi mainly composed of calcium oxalate. In recurrent urolithiasis, these organic substances may well play a significant role in the formation of the calculus. Further investigation is considered to be important.

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References

1. Sperling O (1989) Hereditary renal hypouricemia. In: Scriver CR, Beaudet AL, Sly WS (eds) *The metabolic basis of inherited disease*, 6th edn. McGraw-Hill, New York, p 2605
2. Binette J, Binette M, Gawinowicz M, Kendrick N (1996) Urinary stone proteins: an update. *Scanning Microsc*, 10: 509
3. Siddiqui A, Sultana T, Buchhols NP, Waqar M, Talati J (1998) Protein in renal stones and urine of stone formers. *Urol Res* 2: 6383
4. Kohri K, Nomura S, Kitamura Y, Nagata T, Yoshioka TK, Iguchi M, Yamate T, Umekawa TT, Suzuki Y, Sinohara H, Kurita T (1993) Structure and expression of the mRNA encoding urinary stone protein (osteopontin). *J Biol Chem* 268: 15180
5. Yamate T, Umekawa T, Iguchi M, Kurita T, Kohri K (1997) Detection of osteopontin as matrix protein in calcium-containing urinary stones. *Acta Urol Jpn* 43: 623
6. Grover P, Stapleton A, Ryall R (1999) Prothrombin gene expression in rat kidneys provides an opportunity to examine its role in urinary stone. *J Am Soc Nephrol* 10: S404
7. Nishio S, Hatanaka M, Takeda H, Aoki K, Iseda T, Iwata H, Yokoyama M (2000) Calcium phosphate crystal-associated proteins: α 2-HS-glycoprotein, prothrombin F1, and osteopontin. *Mol Urol* 4: 383
8. Umekawa T, Kurita T (1994) Calprotectin-like protein is related to soluble organic matrix in calcium oxalate urinary stone. *Biochem Mol Biol Int* 34: 309
9. Bennett J, Dretler S, Selengut J, Orme-Johnson W (1994) Identification of the calcium-binding protein calgranulin in the matrix of struvite stones. *J Endourol* 8: 95
10. Tawada T, Fujita K, Sakakura T, Shibutani T, Nagata T, Iguchi M, Kohri K (1999) Distribution of osteopontin and calprotectin as matrix protein in calcium-containing stone. *Urol Res* 27: 238
11. Prowse C, Esnouf M (1977) The isolation of a new warfarin-sensitive protein from bovine plasma. *Biochem Soc Trans* 5: 255
12. Broze G, Miletich J (1984) Human protein Z. *J Clin Invest* 73: 933
13. Miletich J, Broze G (1987) Human plasma protein Z antigen: range in normal subjects and effect of warfarin therapy. *Blood* 69: 1580
14. Sejima H, Hayashi T, Deyashiki Y, Nishioka J, Suzuki K (1990) Primary structure of vitamin K-dependent human protein Z. *Biochem Biophys Res Commun* 171: 661
15. Fujimaki K, Yamazaki T, Taniwaki M, Ichinose A (1998) The gene for human protein Z is localized to chromosome 13 at band q34 and is coded by eight regular exons and one alternative exon. *Biochemistry* 37: 6838
16. Ravi S, Mauron T, Lammle B, Willemin W (1998) Protein Z in healthy human individuals and in patients with a bleeding tendency. *J Haematol* 102: 1219
17. Kaneko K, Yamanobe T, Nakagomi K, Mawatari K, Onoda M, Fujimori S (2004) Detection of protein Z in a renal calculus composed of calcium oxalate monohydrate with the use of LC-MS/MS following 2D-PAGE separation. *Anal Biochem* 324: 191
18. Rost S, Fregin A, Koch D, Compes M, Muller C, Oldenburg J (2004) Compound heterozygous mutations in the gamma-glutamyl carboxylase gene cause combined deficiency of all vitamin K-dependent blood coagulation factors. *Br J Haematol* 126: 546
19. Vossen C, Hasstedt S, Rosendaal F, Callas P, Bauer K, Broze G, Hoogendoorn H, Long G, Scott B, Bovill E (2004) Heritability of plasma concentrations of clotting factors and measures of a prethrombotic state in a protein C-deficient family. *J Thromb Haemost* 2: 242
20. Gorg A, Postel W, Gunther S (1988) The current state of two-dimensional electrophoresis with immobilized pH gradients. *Electrophoresis* 9: 531
21. Eng J, McCormack A, Yates J (1994) An approach to correlate tandem mass spectral data of peptides with amino acid sequences in a protein database. *J Am Soc Mass Spectrom* 5: 976
22. Kawakami T, Nagata T, Muraguchi A, Nishimura T (2000) Alteration of protein composition in mouse thymocytes by signals through T-cell receptor. *Electrophoresis* 21: 1846
23. Figeys D (2003) Proteomics in 2002: a year of technical development and wide-ranging application. *Anal Chem* 75: 2892
24. Lin D, Tabb D, Yates J III (2003) Large-scale protein identification using mass spectrometry. *Biochim Biophys Acta* 1646: 1
25. Kaneko K, Fujimori S, Kamatani N, Yamanaka H, Yamaoka N, Akaoka I (1997) Microanalysis of pathological crystals and urinary calculi. *Adv Exp Med Biol* 431: 41
26. Kaneko K, Maru M (2000) Determination of urate crystal formation using flow cytometry and micro area X-ray diffractometry. *Anal Biochem* 281: 9
27. Kaneko K, Fujimori S, Ito H, Nakayama Y, Oyama H, Kanbayashi T, Miyashita H, Akaoka I (1988) Renal handling of hypoxanthine and xanthine in normal subjects and in four cases of idiopathic renal hypouricemia. *J Rheumatol* 15: 325
28. Shevchenko A, Wilm M, Vorm O, Mann M (1996) Mass spectrometric sequencing of proteins from silver-stained polyacrylamide gels. *Anal Chem* 68: 850
29. Bleasby A, Krigger D, Attwood T (1994) OWL-A non-redundant composite protein sequence database. *Nucleic Acids Res* 22: 3574
30. Campopiano D, Clarke D, Polfer N, Barran P, Langley R (2004) Structure-activity relationships in defensin dimers. A novel link between beta-defensin tertiary structure and antimicrobial activity. *J Biol Chem* (2004) 279: 48671
31. Ganz T (2004) Defensins: antimicrobial peptides of vertebrates. *C R Biol* 327: 539
32. Ozasa H, Suzuki T, Takahashi K, Ota K (1989) Protein components of amyloid-like kidney stones of chronic hemodialysis patients. *Nephron* 53: 257
33. Barak M, Ginesin Y, Hornstein L, Levin R, Gruener N (1990) Excretion of urinary protein induced by extracorporeal piezoelectric lithotripsy. *Br J Urol* 66: 575