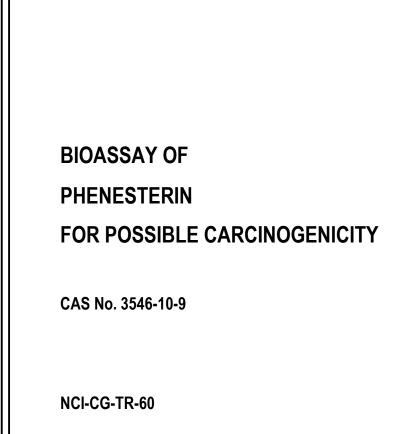
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U.S. DEPARTMENT OF HEALTH, EDUCATION, AND WELFARE Public Health Service National Institutes of Health



## **BIOASSAY OF**

## PHENESTERIN

## FOR POSSIBLE CARCINOGENICITY

Carcinogenesis Testing Program Division of Cancer Cause and Prevention National Cancer Institute National Institutes of Health Bethesda, Maryland 20014

U.S. DEPARTMENT OF HEALTH, EDUCATION, AND WELFARE Public Health Service National Institutes of Health

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## BIOASSAY OF PHENESTERIN FOR POSSIBLE CARCINOGENICITY

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FOREWORD: This report presents the results of the bioassay of phenesterin conducted for the Carcinogenesis Testing Program, Division of Cancer Cause and Prevention. National Cancer Institute (NCI). National Institutes of Health. Bethesda. This is one of a series of experiments designed to Maryland. determine whether selected chamicals have the capacity to produce cancer in animals. Negative results, in which the test animals do not have a greater incidence of cancer than control animals, not necessarily mean that the test chemical is not a do carcinogen, inasmuch as the experiments are conducted under a limited set of circumstances. Positive results demonstrate that the test chemical is carcinogenic for animals under the conditions of the test and indicate that exposure to the chemical is a potential risk to man. The actual determination of the risk to man from animal carcinogens requires a wider analysis.

<u>CONTRIBUTORS</u>: The bioassay was conducted by Southern Research Institute, Birmingham, Alabama, initially under direct contract to NCI and currently under a subcontract to Tracor Jitco, Inc., prime contractor for the NCI Carcinogenesis Testing Program.

The experimental design and doses were determined by Drs. D. P. Griswold<sup>1</sup>, J. D. Prejean<sup>1</sup>, E. K. Weisburger<sup>2</sup>, and J. H. Weisburger<sup>2</sup>,<sup>3</sup>. Ms. J. Belzer<sup>1</sup> and Mr. I. Brown<sup>1</sup> were responsible for the care of the laboratory animals and administration of the test chemical. Data management and retrieval were performed by Ms. C. A. Dominick<sup>1</sup>. Histopathologic examination was performed by Dr. J. C. Peckham<sup>1</sup>, and the diagnoses included in this report represent his interpretation.

Animal pathology tables and survival tables were compiled by EG&G

Mason Research Institute<sup>4</sup>. The statistical analyses were performed by Dr. J. R. Joiner<sup>5</sup>, using methods selected for the bioassay program by Dr. J. J. Gart<sup>6</sup>. Chemicals used in this bioassay were analyzed by Mr. E. Brunson<sup>7</sup> and Ms. N. Gross<sup>7</sup>, and the analytical results were reviewed by Dr. C. W. Jameson<sup>5</sup>.

This report was prepared at Tracor Jitco<sup>5</sup> under the direction of NCI. Those responsible for the report at Tracor Jitco were Dr. Marshall Steinberg, Director of the Bioassay Program; Dr. L. A. Campbell, Deputy Director for Science; Dr. J. F. Robens, toxicologist; Dr. R. L. Schueler, pathologist; Dr. G. L. Miller, Ms. L. A. Waitz, and Mr. W. D. Reichardt, bioscience writers; and Dr. E. W. Gunberg, technical editor, assisted by Ms. Y. E. Presley.

The statistical analysis was reviewed by members of the Mathematical Statistics and Applied Mathematics Section of NCI<sup>6</sup>: Dr. John J. Gart, Mr. Jun-mo Nam, Dr. Hugh M. Pettigrew, and Dr. Robert E. Tarone.

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#### SUMMARY

A bioassay of phenesterin for possible carcinogenicity was conducted by administering the chemical by gavage to Sprague-Dawley rats and B6C3F1 mice.

Groups of 35 rats of each sex were administered phenesterin at one of two doses, either 5 or 10 mg/kg body weight, three times per week for 52 weeks, then observed for an additional 32 or 33 weeks. The vehicle used was 0.05% polysorbate 80 in buffered saline. Controls consisted of groups of 10 rats of each sex which received the vehicle (vehicle control) and 10 rats of each sex which were untreated (untreated control). All surviving rats were killed at 84 or 85 weeks.

Groups of 35 mice of each sex were administered the chemical at one of two doses, either 15 or 30 mg/kg body weight, three times The males receiving 15 mg/kg were per week for 52 weeks. observed for an additional period of 29 weeks, and those surviving to this time were then killed; the animals of the remaining groups were observed for additional periods of only 10-22 weeks, due to early deaths. Seventy-seven weeks after the foregoing groups were started, additional groups of 40 mice of each sex were started and were administered the chemical at 7 mg/kg body weight three times per week; administration of the chemical terminated at week 102 for the males and at week 88 for the females, due to deaths of all females at this time. Controls for the low-dose (7 mg/kg) groups of mice consisted of groups of 20 mice of each sex which received the vehicle (vehicle control) and 20 mice of each sex which were untreated (untreated control); controls for the mid-dose (15 mg/kg) and the high-dose (30 mg/kg)controls consisted of groups of 15 mice of each sex similarly receiving the vehicle or untreated. All surviving low-dose controls were killed at 104 weeks, and all surviving mid- and high-dose controls were killed at 81-84 weeks.

Phenesterin was toxic to rats and mice at the doses used, as shown by reduced mean body weights and survival. Time-adjusted analyses were used for evaluation of incidences of tumors in the female mice. In female rats, a dose-related trend (P = 0.019) was present in adenocarcinoma of the mammary gland, using the pooled controls, and the incidences of the tumor in the individual dosed groups were significant (P  $\leq$  0.009) when compared with those in the pooled controls (controls 1/18, low-dose 12/29, high-dose 12/30).

In male mice, the incidence of alveolar/bronchiolar carcinomas or combined alveolar/bronchiolar adenomas and carcinomas in the low-dose group (18/40) was significantly higher ( $P \leq 0.020$ ) than that in the low-dose vehicle-control group (0/16). In female mice, seven low-dose animals had alveolar/bronchiolar adenomas and eight other low-dose animals had alveolar/bronchiolar carcinomas. When these tumors were combined, their time-adjusted incidence was significant (P = 0.004) when compared with that in the low-dose vehicle controls (controls 1/18, low-dose 15/35). The lower and nonsignificant incidences of these tumors observed in the mid- and high-dose groups may be due to the earlier mortality in these groups compared with the low-dose groups.

In each sex of mid- and high-dose mice, incidences of lymphoma and leukemia were dose related ( $P \leq 0.005$ ), using vehicle controls; they were also significant ( $P \leq 0.018$ ) in direct comparisons of mid- and high-dose groups of both sexes with respective vehicle controls (males: controls 0/14, mid-dose 9/29, high-dose 11/25; females, time-adjusted: controls 0/15, mid-dose 14/18, high-dose 17/19). The significance of the incidence of lymphoma and leukemia in the mid- and high-dose groups of males was increased ( $P \leq 0.001$ ) when the pooled-control group was used, both in the test for dose-related trend and in tests for direct comparisons of dosed groups with the controls.

In each sex of mice, sarcomas of the myocardium were found in all groups of dosed animals, but in no control animals (males: low-dose 5/40, mid-dose 7/29, high-dose 2/25; females: low-dose 8/34, mid-dose 2/7, high-dose 3/7). In males, the incidence in the mid-dose group was significant when compared with that in the pooled controls (P = 0.006); in females, the incidences in the low- and high-dose groups were significant ( $P \leq 0.023$ ).

It is concluded that under the conditions of this bioassay, phenesterin was carcinogenic in female Sprague-Dawley rats, producing adenocarcinomas of the mammary gland, and in both sexes of B6C3F1 mice, producing alveolar/bronchiolar carcinomas, hematopoietic tumors, and myocardial sarcomas.

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#### I. INTRODUCTION

Phenesterin (CAS 3546-10-9; NCI CO1558), an experimental anticancer agent, is a steroidal alkylating agent composed of the carboxylic acid ester of cholesterol and an aryl nitrogen mustard (Wall et al., 1969). The linkage to cholesterol was selected to improve the lipophilicity of the compound, and thereby, to facilitate its transport across cell membranes. Phenesterin has shown antitumor activity against a number of rat mammary tumors and leukemias and has been tested in clinical trials (Ansfield et al., 1971). Phenesterin selected for testing was for carcinogenic activity because of the possibility that, as an anticancer agent, it would be used on a chronic basis.

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#### **II. MATERIALS AND METHODS**

#### A. Chemical

(cholesteryl p-bis(2-chloroethyl)aminophenyl-The phenesterín acetate) used in the chronic study was obtained from the Upjohn Company, North Haven, Connecticut, as Lot Nos. 10328-BDA-8 and The identity and purity of Lot No. 10328-BDA-8 10328-BDA-612. was confirmed in analyses at the University of Tennessee College of Pharmacy. The melting point for this lot was  $89-92^{\circ}C$ , which was consistent with the reported value of 90-90.5°C (Merck Index, 1976). Four trace impurities were detected by thin-layer chromatography; no attempt was made to identify or quantitate these impurities. Infrared and nuclear magnetic resonance spectra were in agreement with the structure.

The bulk chemical was stored in the presence of a desiccant ( $Drierite^{(0)}$ ) at 5°C.

## B. Dosage Preparation

The dosage mixtures of the phenesterin were prepared fresh for each administration. The chemical was suspended in a buffered saline vehicle by mixing in a Potter-Elvehjem tissue grinder. The buffered saline vehicle (pH 6.9) contained 0.85% NaCl, 0.40% NaH<sub>2</sub>PO<sub>4</sub>, 0.65% Na<sub>2</sub>HPO<sub>4</sub>, and 0.05% polysorbate 80.

No concentration or stability analyses of the chemical in the buffered saline vehicle were performed.

## C. Animals

Male Sprague-Dawley rats and male Swiss mice were obtained from Charles River Breeding Laboratories, Inc., Wilmington, Massachusetts, for use in the subchronic studies.

For the chronic studies, male and female Sprague-Dawley rats and male and female B6C3F1 mice were obtained from Charles River Breeding Laboratories under a contract with the Division of Cancer Treatment, National Cancer Institute. Male rats were 30 days of age, female rats were 37 days of age, and male and female mice were 31 days of age on arrival at the laboratory. Animals were quarantined (rats for 5 days, mice for 12 days) prior to the start of the chronic studies. B6C3F1 mice that were started later in the study were received from Litton Bionetics, Inc., at 29 days of age and were quarantined for 12 days. At the end of the quarantine period, all animals with no visible signs of disease were assigned to control or dosed groups and earmarked for individual identification.

## D. Animal Maintenance

All animals were housed in temperature- and humidity-controlled

rooms. The temperature range was 20-24°C, and the relative humidity was maintained at 40-60%. The room air was changed 15 times per hour and passed through both intake and exhaust fiberglass roughing filters. In addition to natural light, illumination was provided by fluorescent light for 9 hours per day. Wayne<sup>®</sup> Lab Blox animal meal (Allied Mills, Inc., Chicago, Ill.) and water were supplied daily and were available <u>ad</u> <u>libitum</u>.

Rats were housed five per cage and mice seven per cage in solidbottom stainless steel cages (Hahn Roofing and Sheet Metal Co., Birmingham, Ala.). The rat cages were provided with Iso-Dri<sup>®</sup> hardwood chip bedding (Carworth, Edison, N.J.), and cage tops were covered with disposable filter bonnets beginning at week 17; mouse cages were provided with Sterolit<sup>®</sup> clay bedding (Englehard Mineral and Chemical Co., New York, N.Y.). Low-dose mice and the vehicle controls were housed similarly, except for the final 4 months of the study, during which time they were housed in cages provided with a hardwood chip bedding (Betta-Chip, Northeastern Products Corp., Warrenton, N.Y.). Bedding was replaced once or twice per week; cages, water bottles, and feeders were sanitized at 82°C once per week; racks were cleaned once per week.

The rats and mice were housed in separate rooms. Control animals were housed with respective dosed animals. Animals administered

phenesterin were maintained in the same rooms as animals of the same species being dosed with the following chemicals:

#### RATS

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Gavage Studies
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estradiol bis((p-(bis(2-chloroethyl)amino)phenyl)acetate)
  (estradiol mustard) (CAS 22966-79-6)
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Intraperitoneal Injection Studies
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4'-(9-acridinylamino)methansulfon-m-aniside monohydrochloride
  (MAAM) (NSC 141549)
acronycine (CAS 7008-42-6)
5-azacytidine (CAS 320-67-2)
beta-2'-deoxy-6-thioguanosine monohydrate (beta-TGdR)
  (CAS 789-61-7)
1,4-butanediol dimethanesulfonate (busulfan) (CAS 55-98-1)
emetine dihydrochloride tetrahydrate (CAS 316-42-7)
3,3'-iminobis-l-propanol dimethanesulfonate (ester)
  hydrochloride [IPD] (CAS 3458-22-8)
(+)-4,4'-(1-methyl-1,2-ethanediyl)bis-2,6-piperazinedione
  (ICRF-159) (CAS 21416-87-5)
N, 3-bis(2-chloroethy1)tetrahydro-2H-1, 3, 2-oxazaphosphorin-2-
  amine-2-oxide (isophosphamide) (CAS 3778-73-2)
N-(2-chloroethyl)-N-(1-methyl-2-phenoxyethyl)benzylamine
  hydrochloride (phenoxybenzamine hydrochloride) (CAS 63-92-3)
N-(1-methylethyl)-4-((2-methylhydrazino)methyl)benzamide
  monohydrochloride (procarbazine) (CAS 366-70-1)
tris(l-aziridinyl)phosphine sulfide (thio-TEPA) (CAS 52-24-4)
2,4,6-tris(dimethylamino)-s-triazine (CAS 645-05-6)
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## MICE

Feed Studies

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4-acetyl-N-((cyclohexylamino)carbonyl)benzenesulfonamide
(acetohexamide) (CAS 968-81-0)
anthranilic acid (CAS 118-92-3)
1-butyl-3-(p-tolylsulfonyl)urea (tolbutamide) (CAS 64-77-7)
4-chloro-N-((propylamino)carbonyl)benzenesulfonamide
(chlorpropamide) (CAS 94-20-2)
5-(4-chlorophenyl)-6-ethyl-2,4-pyrimidinediamine
(pyrimethamine) (CAS 58-14-0)
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```
2,6-diamino-3-(phenylazo)pyridine hydrochloride (phenazopyridine
hydrochloride) (CAS 136-40-3)
L-tryptophan (CAS 73-22-3)
N-9H-fluoren-2-ylacetamide (CAS 53-96-3)
N-(p-toluenesulfonyl)-N'-hexamethyleniminourea
(tolazamide) (CAS 1156-19-0)
1-phenethylbiguanide hydrochloride (phenformin) (CAS 114-86-3)
pyrazinecarboxamide (pyrazinamide) (CAS 98-96-4)
4,4'-sulfonyldianiline (dapsone) (CAS 80-08-0)
4,4'-thiodianiline (CAS 139-65-1)
ethionamide (CAS 536-33-4)
reserpine (CAS 50-55-5)
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Gavage Studies
```

```
estradiol bis((p-(bis(2-chloroethyl)amino)phenyl)acetate)
  (estradiol mustard) (CAS 22966-79-6)
```

Intraperitoneal Injection Studies

```
4'-(9-acridinylamino)methansulfon-m-aniside monohydrochloride
  (MAAM) (NSC 141549)
acronycine (CAS 7008-42-6)
5-azacytidine (CAS 320-67-2)
beta-2'-deoxy-6-thioguanosine monohydrate (beta-TGdR)
  (CAS 789-61-7)
1,4-butanediol dimethanesulfonate (busulfan) (CAS 55-98-1)
emetine dihydrochloride tetrahydrate (CAS 316-42-7)
3,3'-iminobis-l-propanol dimethanesulfonate (ester)
  hydrochloride [IPD] (CAS 3458-22-8)
(+)-4,4'-(1-methyl-1,2-ethanediyl)bis-2,6-piperazinedione
  (ICRF-159) (CAS 21416-87-5)
N, 3-bis(2-chloroethyl)tetrahydro-2H-1, 3, 2-oxazaphosphorin-2-
  amine-2-oxide (isophosphamide) (CAS 3778-73-2)
N-(2-chloroethyl)-N-(1-methyl-2-phenoxyethyl)benzylamine
  hydrochloride (phenoxybenzamine hydrochloride) (CAS 63-92-3)
N-(1-methylethyl)-4-((2-methylhydrazino)methyl)benzamide
  monohydrochloride (procarbazine) (CAS 366-70-1)
tris(l-aziridinyl)phosphine sulfide (thio-TEPA) (CAS 52-24-4)
2,4,6-tris(dimethylamino)-s-triazine (CAS 645-05-6)
adriamycin (CAS 23214-92-8)
```

#### E. <u>Subchronic Studies</u>

Subchronic studies were conducted with male Sprague-Dawley rats

and male Swiss mice to estimate the maximum tolerated doses of phenesterin, on the basis of which "low" doses and "high" doses were determined for the chronic studies. Phenesterin was administered by gavage in a vehicle of 0.05% polysorbate 80 in Rats received doses of 1.0, 2.5, 5.0, 10.0, or 20.0 saline. mg/kg and mice received doses of 1.7, 4.25, 8.5, 17.0, 34.0, 68.0, or 136.0 mg/kg. Animals were administered the chemical three times per week for 45 days, and were observed for 45 days following the administration of the chemical. Five animals of each species were tested at each dose (except for 10 animals tested at 34.0 mg/kg), 10 rats and 5 mice were maintained as untreated controls, and 10 rats and 10 mice received the vehicle only.

In rats, one animal administered 20 mg/kg died during week 10 of the study; there were no deaths at lower doses. Mean body weight gains were depressed 10% at 2.5 mg/kg, 11% at 5.0 mg/kg, 20% at 10 mg/kg, and 34% at 20 mg/kg by the end of the period of administration of the chemical. Mean weight gains remained depressed during the observation period. No gross abnormalities were seen at necropsy. The low and high doses for the chronic studies using rats were set at 5 and 10 mg/kg.

Mean weight gains in dosed mice did not show any trends and were similar to those of controls in all except the highest dosed

group (136 mg/kg) where weight gain during the period of administration of the chemical was depressed 45%. Except for accidental deaths, there were no other deaths at any of the doses tested. No gross abnormalities were observed at necropsy. Because the toxic effects of this drug were known to be cumulative, the high dose was set lower than would otherwise be predicted from these data. The low and high doses for the chronic studies using mice were set at 15 and 30 mg/kg.

#### F. Designs of Chronic Studies

The designs of the chronic studies are shown in tables 1 and 2.

Since the numbers of animals in the untreated- and vehiclecontrol groups of rats and in the mid- and high-dose untreatedand vehicle-control groups of mice were small, pooled vehiclecontrol groups of rats and mice also were used for statistical comparisons. The groups of 10 vehicle-control rats of each sex from the bioassay of phenesterin were combined with corresponding groups of 10 vehicle-control rats of each sex from a similar bioassay of estradiol mustard. The pooled controls for statistical tests using rats thus consisted of 20 males and 20 females. The groups of 15 mid- and high-dose vehicle-control mice of each sex from the bioassay of phenesterin were combined with the

Sex and	Initial	Phenesterin	Time on Study	
Test	No. of	Dose <sup>b</sup>	Dosed	Observed
Group	<u>Animals</u> a	<u>(mg/kg)</u>	(weeks)	(weeks)
Male				
Untreated-Control	10	0		85
Vehicle-Control	. 10	0c	52	33
Low-Dose	35	5	52	32-33
High-Dose	35	10	52	32
Female				
Untreated-Control	10	0		85
Vehicle-Control	10	0c	52	33
Low-Dose	35	5	52	33
High-Dose	35	10	52	32

Table 1. Design of Chronic Studies of Phenesterin in Rats

<sup>a</sup>Male rats were 35 days of age and female rats were 42 days of age when placed on study.

<sup>b</sup>Phenesterin was administered by gavage in a vehicle of 0.05% polysorbate 80 in buffered saline three times per week at a volume of 0.25 ml/100 g body weight. Doses were based on individual weights.

<sup>c</sup>Vehicle-control groups received only the vehicle of 0.05% polysorbate 80 in buffered saline at the same volume and on the same schedule as dosed rats.

Sex and	Initial	Phenesterin	Time of	on Study
Test	No. of	Doseb	Dosed	Observed
Group	<u>Animals</u> a	(mg/kg)	(weeks)	(weeks)
Male				
Mid- and High-Dose				
Untreated-Control Mid- and High-Dose	15	0		83-84
Vehicle-Control	15	0c	52	29-30
Low-Dose Untreated-Controld	20	0		104
Low-Dose	20	Ŭ		104
Vehicle-Control <sup>d</sup>	20	0c	103	1
Low-Dose <sup>d</sup>	40	7	102 <sup>e</sup>	
Mid-Dose	35	15	52	29
High-Dose	35	30	52	22f
Female				
Mid- and High-Dose				
Untreated-Control	15	0		84
Mid- and High-Dose				
Vehicle-Control	15	0c	52	30-31
Low-Dose				
Untreated-Control <sup>d</sup>	20	0		104
Low-Dose				
Vehicle-Control <sup>d</sup>	20	0c	103	1
Low-Dose <sup>d</sup>	40	7	88 <sup>e</sup>	_
Mid-Dose	35	15	52	$10^{f}$
High-Dose	35	30	52	10 <sup>f</sup>

Table 2. Design of Chronic Studies of Phenesterin in Mice

<sup>a</sup>High- and mid-dose mice and their controls were 43 days of age when placed on study; low-dose mice and their controls were 41 days of age.

<sup>b</sup>Phenesterin was administered by gavage in the vehicle of 0.05% polysorbate 80 in buffered saline three times per week at a volume of 0.1 ml/10 g body weight. Doses were based on the mean weight of the animals in each cage.

<sup>c</sup>Vehicle-control groups received only the vehicle of 0.05% polysorbate 80 in buffered saline at the same volume and on the same schedule as dosed mice.

Table 2. Design of Chronic Studies of Phenesterin in Mice

## (continued)

<sup>d</sup>The low-dose groups and their controls were started 77 weeks after the mid- and high-dose groups, because of deaths in these groups.

<sup>e</sup>Administration of the chemical terminated at the time indicated, due to death of all animals.

 $^{\rm f}{\rm Observation}$  terminated at the time indicated, due to death of all animals.

mice of each sex from a similar bioassay of estradiol mustard to give pooled-control groups of 30 mid- and high-dose vehiclecontrol mice of each sex. The vehicle-control groups of rats and the vehicle-control groups of mice that were used in the respective pooled-control groups were each of the same strain, obtained from the same supplier, and examined by the same pathologists. Further, the different control groups were placed on study at starting times differing by no more than 3 months.

#### G. Clinical and Pathologic Examinations

All animals were observed twice daily for signs of toxicity, and animals that were moribund were killed and necropsied, except for those dying prior to day 100, due, presumably, to toxicity of the test chemical. Rats were weighed once per week for 4 weeks and once every 2 weeks thereafter; mid- and high-dose mice were weighed every 2 weeks throughout the study; low-dose mice were weighed every 2 weeks for 34 weeks and once per month thereafter. Palpation for masses was carried out at each weighing.

The pathologic evaluation consisted of gross and microscopic examination of major tissues, major organs, and all gross lesions from killed animals and from animals found dead. The following tissues were examined microscopically: skin, muscle, lungs and bronchi, trachea, bone and bone marrow, spleen, lymph nodes,

thymus, heart, salivary gland, liver, gallbladder and bile duct (mice), pancreas, esophagus, stomach, small intestine, large intestine, kidney, urinary bladder, pituitary, adrenal, thyroid, parathyroid, mammary gland, prostate or uterus, testis or ovary, brain, and sensory organs. Peripheral blood smears were prepared from each animal whenever possible. Occasionally, additional tissues were also examined microscopically. The different tissues were preserved in 10% buffered formalin, embedded in paraffin, sectioned, and stained with hematoxylin and eosin. Special staining techniques were utilized when indicated for more definitive diagnosis.

A few tissues from some animals were not examined, particularly from those animals that died early. Also, some animals were missing, cannibalized, or judged to be in such an advanced state of autolysis as to preclude histopathologic evaluation. Thus, the number of animals from which particular organs or tissues were examined microscopically varies, and does not necessarily represent the number of animals that were placed on study in each group.

## H. Data Recording and Statistical Analyses

Pertinent data on this experiment have been recorded in an automatic data processing system, the Carcinogenesis Bioassay Data

System (Linhart et al., 1974). The data elements include descriptive information on the chemicals, animals, experimental design, clinical observations, survival, body weight, and individual pathologic results, as recommended by the International Union Against Cancer (Berenblum, 1969). Data tables were generated for verification of data transcription and for statistical review.

These data were analyzed using the statistical techniques described in this section. Those analyses of the experimental results that bear on the possibility of carcinogenicity are discussed in the statistical narrative sections.

Probabilities of survival were estimated by the product-limit procedure of Kaplan and Meier (1958) and are presented in this report in the form of graphs. Animals were statistically censored as of the time that they died of other than natural causes or were found to be missing; animals dying from natural causes were not statistically censored. Statistical analyses for a possible dose-related effect on survival used the method of Cox (1972) for testing two groups for equality and Tarone's (1975) extensions of Cox's methods for testing for a dose-related trend. One-tailed P values have been reported for all tests except the departure from linearity test, which is only reported when its two-tailed P value is less than 0.05.

The incidence of neoplastic or nonneoplastic lesions has been given as the ratio of the number of animals bearing such lesions at a specific anatomic site (numerator) to the number of animals in which that site is examined (denominator). In most instances, the denominators included only those animals for which that site was examined histologically. However, when macroscopic examination was required to detect lesions prior to histologic sampling (e.g., skin or mammary tumors), or when lesions could have appeared at multiple sites (e.g., lymphomas), the denominators consist of the numbers of animals necropsied.

The purpose of the statistical analyses of tumor incidence is to determine whether animals receiving the test chemical developed a significantly higher proportion of tumors than did the control animals. As a part of these analyses, the one-tailed Fisher exact test (Cox, 1970) was used to compare the tumor incidence of a control group with that of a group of dosed animals at each dose level. When results for a number of dosed groups (k) are compared simultaneously with those for a control group, a correction to ensure an overall significance level of 0.05 may be made. The Bonferroni inequality (Miller, 1966) requires that the P value for any comparison be less than or equal to 0.05/k. In cases where this correction was used, it is discussed in the narr-

ative section. It is not, however, presented in the tables, where the Fisher exact P values are shown.

The Cochran-Armitage test for linear trend in proportions, with continuity correction (Armitage, 1971), was also used. Under the assumption of a linear trend, this test determines if the slope of the dose-response curve is different from zero at the onetailed 0.05 level of significance. Unless otherwise noted, the direction of the significant trend is a positive dose relationship. This method also provides a two-tailed test of departure from linear trend.

A time-adjusted analysis was applied when numerous early deaths resulted from causes that were not associated with the formation of tumors. In this analysis, deaths that occurred before the first tumor was observed were excluded by basing the statistical tests on animals that survived at least 52 weeks, unless a tumor was found at the anatomic site of interest before week 52. When such an early tumor was found, comparisons were based exclusively on animals that survived at least as long as the animal in which the first tumor was found. Once this reduced set of data was obtained, the standard procedures for analyses of the incidence of tumors (Fisher exact tests, Cochran-Armitage tests, etc.) were followed.

When appropriate, life-table methods were used to analyze the incidence of tumors. Curves of the proportions surviving without an observed tumor were computed as in Saffiotti et al. (1972). The week during which an animal died naturally or was sacrificed was entered as the time point of tumor observation. Cox's methods of comparing these curves were used for two groups; Tarone's extension to testing for linear trend was used for three groups. The statistical tests for the incidence of tumors which used life-table methods were one-tailed and, unless otherwise noted, in the direction of a positive dose relationship. Significant departures from linearity (P < 0.05, two-tailed test) were also noted.

The approximate 95 percent confidence interval for the relative risk of each dosed group compared with its control was calculated from the exact interval on the odds ratio (Gart, 1971). The relative risk is defined as  $p_t/p_c$  where  $p_t$  is the true binomial probability of the incidence of a specific type of tumor in a dosed group of animals and  $p_c$  is the true probability of the spontaneous incidence of the same type of tumor in a control group. The hypothesis of equality between the true proportion of a specific tumor in a dosed group and the proportion in a control group corresponds to a relative risk of unity. Values in excess

of unity represent the condition of a larger proportion in the dosed group than in the control.

The lower and upper limits of the confidence interval of the relative risk have been included in the tables of statistical analyses. The interpretation of the limits is that in approximately 95% of a large number of identical experiments, the true ratio of the risk in a dosed group of animals to that in a control group would be within the interval calculated from the experiment. When the lower limit of the confidence interval is greater than one, it can be inferred that a statistically significant result (P < 0.025 one-tailed test when the control incidence is not zero, P < 0.050 when the control incidence is zero) has occurred. When the lower limit is less than unity, but the upper limit is greater than unity, the lower limit indicates the absence of a significant result while the upper limit indicates that there is a theoretical possibility of the induction of tumors by the test chemical, which could not be detected under the conditions of this test.

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### III. <u>RESULTS - RATS</u>

## A. Body Weights and Clinical Signs (Rats)

The mean body weights of the dosed male and female rats were lower than those of the untreated or vehicle controls throughout most of the study, especially in the high-dose groups (figure 1). Fluctuations in the growth curve may be due to mortality; as the size of a group diminishes, the mean body weight may be subject to variation. No other signs of toxicity related to the administration of the chemical were recorded.

Because of respiratory disease in the colony, oxytetracycline was administered in drinking water at 0.6 mg/ml during weeks 17-23 and at 0.3 mg/ml during weeks 23-27.

## B. Survival (Rats)

The Kaplan and Meier curves estimating the probabilities of survival for male and female rats administered phenesterin by gavage at the doses of this bioassay, together with those of the matched controls, are shown in figure 2.

In each sex, the Tarone test result for positive dose-related trend in mortality is significant (P < 0.001), using the high-dose, low-dose, and vehicle-control groups. In the males, 4/35 (11%) of the high-dose group, 8/35 (23%) of the low-dose

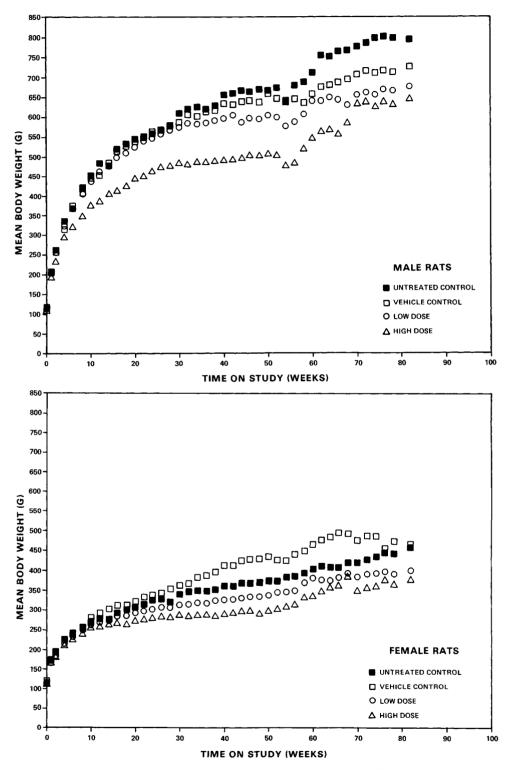


Figure 1. Growth Curves For Rats Administered Phenesterin by Gavage

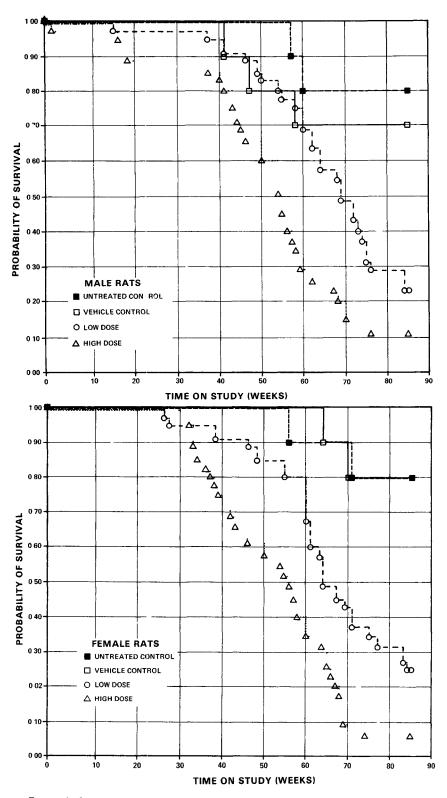


Figure 2. Survival Curves for Rats Administered Phenesterin by Gavage

group, and 7/10 (70%) of the controls were alive at the end of the bioassay. In females, 2/35 (6%) of the high-dose group, 9/35 (26%) of the low-dose group, and 8/10 (80%) of the controls were alive at the end of the bioassay. Over 50% of each group of males or females survived at least 52 weeks. The untreatedcontrol groups are not used in these comparisons, since the test conditions of the vehicle controls more closely resembled those of the dosed rats; however, the Kaplan and Meier curves of the untreated-control groups are shown in figure 2.

## C. Pathology (Rats)

Histopathologic findings on neoplasms in rats are summarized in Appendix A, tables Al and A2; findings on nonneoplastic lesions are summarized in Appendix C, tables Cl and C2.

A variety of neoplasms occurred in both the control (untreated and vehicle) and dosed groups. These lesions, however, are not uncommon in this strain of rat independent of any treatment. The following sarcomas occurred primarily in the dosed groups:

	RATS			
	MALE		FE	MALE
	Low	High	Low	High
	Dose	Dose	Dose	Dose
Number of Animals Necropsied	(32)	(30)	(29)	(30)
Subcutis				
-sarcoma, NOS*	2	1	0	1
-fibrosarcoma	1	0	1	0
<u>Bone</u> -osteosarcoma	1	1	0	0
Abdominal cavity				
-sarcoma, NOS	1	2	1	0
-hemangiosarcoma	1	0	0	0
Multiple organs, other -sarcoma, NOS	1	0	0	0
-sarcoma, NOS, metastatic (primary unknown)	0	0	0	1
	U	U	0	1
<u>Mammary gland</u> -sarcoma, NOS	0	0	0	1
Barcolla, nob	v	v	v	-
<u>Cranial Cavity</u> -sarcoma, NOS	0	0	0	1
Number of Animals With Tumors	7	4	2	4

## \*Not otherwise specified

These sarcomas included fibrosarcomas, osteosarcomas, hemangiosarcomas, and undifferentiated sarcomas, and they occurred more frequently in males than in females. Metastases to the lungs occurred in two high-dose males. Only one control animal, an untreated male, had a sarcoma (abdominal cavity).

Adenocarcinomas and fibroadenomas of the mammary gland were the

most frequent tumors in female rats. The incidence was as follows:

	RATS			
	Untreated <u>Control</u>	Vehicle <u>Control</u>	Low <u>Dose</u>	High Dose
FEMALE				
Number of Animals Necropsied	(10)	(10)	(29)	(30)
Mammary Gland	_			
-adenocarcinoma	0	1	12	12
-fibroadenoma	6	4	21	11
Number of Animals With Tumors	6	5	26	19

Metastases to the lung occurred in one high-dose animal.

In addition to the neoplastic lesions, a number of degenerative, proliferative, and inflammatory changes were encountered also in animals of the dosed and control groups (Appendix C). These nonneoplastic lesions are commonly seen in aged Sprague-Dawley rats.

Based on this histopathologic examination, phenesterin administered by gavage to Sprague-Dawley rats at doses of 5 or 10 mg/kg was associated with an increased frequency of tumors of the mammary gland, especially adenocarcinomas, in dosed females.

## D. Statistical Analyses of Results (Rats)

Tables El and E2 in Appendix E contain the statistical analyses of the incidences of those primary tumors that occurred in at least two animals in one group and with an incidence of at least 5% in one or more than one group. Vehicle-control groups and pooled vehicle-control groups are used in the statistical analysis. The untreated controls are not included in the tables and analyses, since the test conditions of the vehicle controls more closely resemble those of the dosed rats.

In male rats, the results of the Cochran-Armitage test for positive dose-related trend in the incidence of animals with lymphoma or leukemia are significant (P = 0.037) using the pooled controls, but the results of the Fisher exact test are not significant. Statistical test results on this incidence of tumors in female rats are not significant.

In female rats, the results of the Cochran-Armitage test on the incidence of adenocarcinomas of the mammary gland are significant (P = 0.019) when the pooled vehicle-control group is used. The Fisher exact tests show that the incidences in both of the dosed groups are significantly higher (P < 0.010) than the incidence in the pooled controls. These tumors of the mammary gland were first observed as early as 26 weeks in the low-dose group and 33

weeks in the high-dose group. The statistical conclusion is that this incidence of tumors in female rats is dose associated.

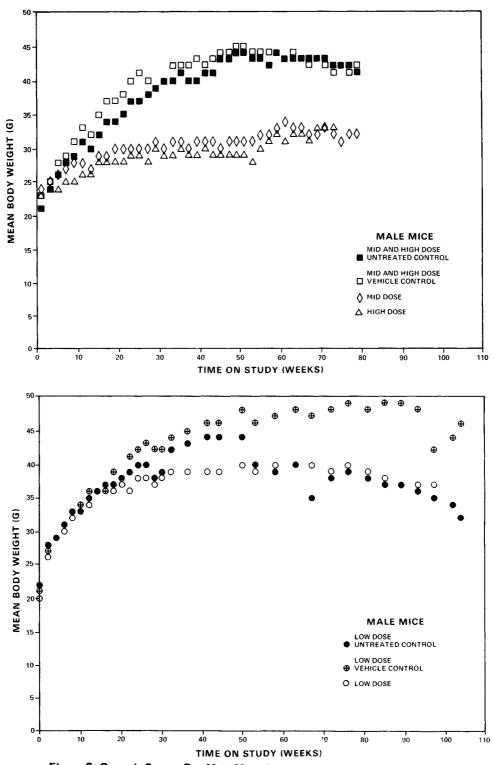
The results of the Cochran-Armitage test and the Fisher exact test on the incidence of fibroadenomas of the mammary gland in female rats are not significant. Significant results in the negative direction are observed in the incidence of chromophobe adenomas of the pituitary in female rats, where the incidences in the control groups exceed those in the dosed groups. Timeadjusted analysis, eliminating animals that died before 52 weeks on study, indicated similar levels of significance in the The time-adjusted data are 10/16 (63%) of negative direction. the pooled controls, 6/10 (60%) of the vehicle controls, 4/24(17%) of the low-dose group, and 0/16 of the high-dose group. Survival in the dosed groups was shorter than in the controls, and this shortened survival may account for the low incidence of the pituitary tumors in the dosed groups.

#### IV. RESULTS - MICE

### A. Body Weights and Clinical Signs (Mice)

The mean body weights of the low-dose groups of dosed male and female mice were unaffected during the first 20-30 weeks, but for the males, were lower than those of the vehicle controls, and for the females, were lower than those of both the untreated and vehicle controls, for the remaining period of the bioassay (figures 3 and 4). Progressive weight loss was recorded in several individual animals of each sex. The mean body weights of the mid- and high-dose groups of each sex were lower than those of the controls throughout most of the study. Fluctuations in the growth curve may be due to mortality; as the size of a group diminishes, the mean body weight may be subject to variation. No other signs of toxicity related to the administration of the chemical were recorded.

Some of the animals in the low-dose groups, together with corresponding controls, had signs of respiratory disease. These groups were administered oxytetracycline in the drinking water at 0.6 mg/ml during weeks 14-15 and at 0.3 mg/ml during week 15. To reduce the transmission of airborne microorganisms, propylene glycol was vaporized in the mouse room during weeks 14-25.





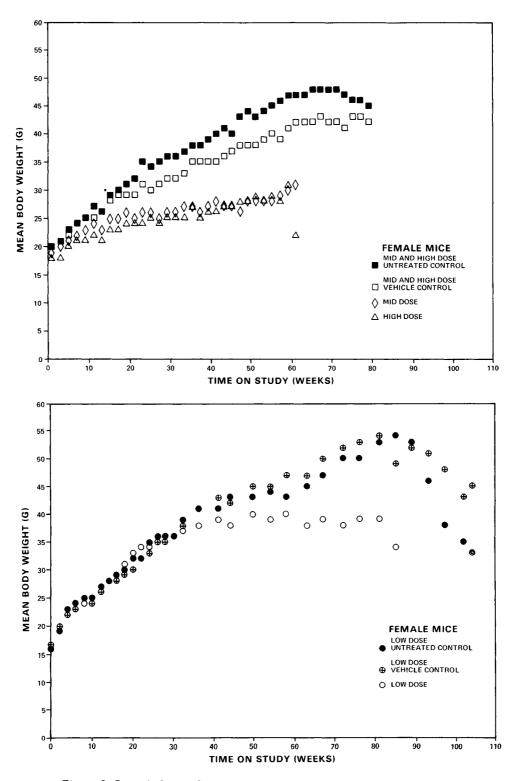


Figure 4. Growth Curves For Female Mice Administered Phenesterin by Gavage

## B. Survival (Mice)

The Kaplan and Meier curves estimating the probabilities of survival for male and female mice administered phenesterin by gavage at the doses of this bioassay, together with those of the matched controls, are shown in figures 5 and 6.

In each sex, the Tarone test result for positive dose-related trend in mortality is significant (P < 0.001), using the high-dose, mid-dose, and corresponding vehicle-control groups. Departures from linear trend are observed (P < 0.001 in males and P = 0.021 in females), because of the sharp decrease in survival in the dosed mice. The result of the Cox test comparing the low-dose vehicle-control group and the low-dose group is not significant in male mice, whereas in female mice, it is significant (P < 0.001). The untreated-control groups are not used for comparison, since the test conditions of the vehicle controls more closely resembled those of the dosed mice; however, the Kaplan and Meier curves of the untreated-control groups are included in figures 5 and 6.

In male mice, none of the dosed animals were alive at the end of the study, but over 55% of them lived at least as long as 52 weeks on study (20/35 [57%] in the high-dose group, 26/35 [74%] in the mid-dose group, and 33/40 [83%] in the low-dose group).

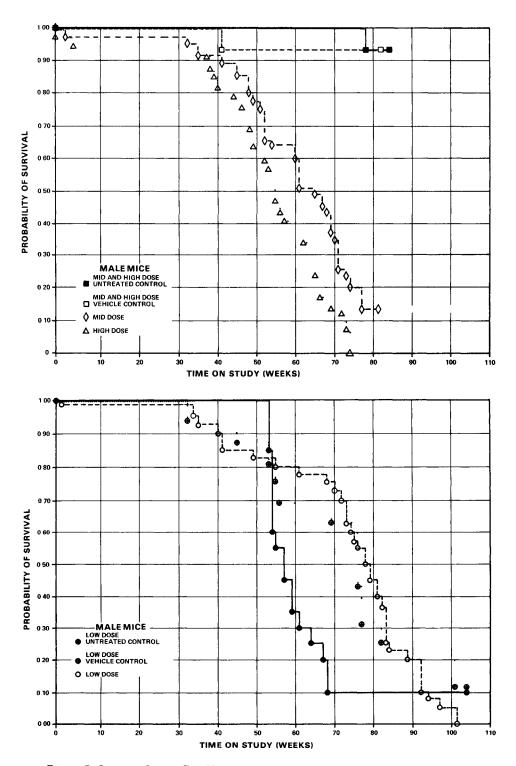


Figure 5. Survival Curves For Male Mice Administered Phenesterin by Gavage

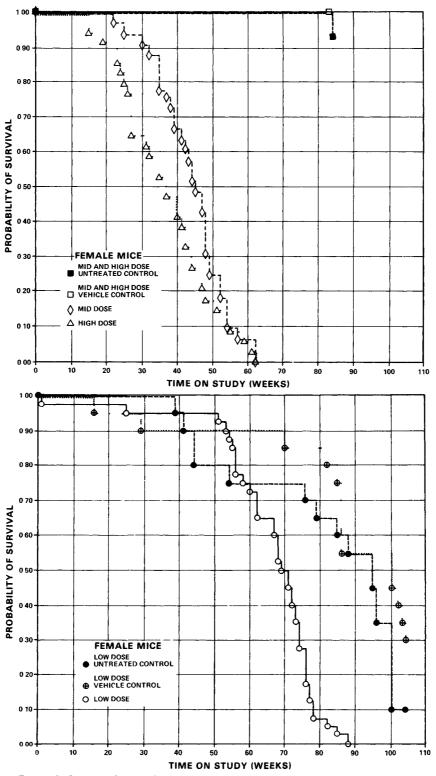


Figure 6. Survival Curves For Female Mice Administered Phenesterin by Gavage

The proportions of animals alive at week 75 are 0/35 in the highdose group, 7/35 (20%) in the mid-dose group, and 24/40 (60%) in the low-dose group.

In females, no dosed mice lived to termination of the study. Although 37/40 (93%) of the low-dose group were alive at week 52, only 5/35 (14%) of the high-dose group and 8/35 (23%) of the mid-dose group were alive at least as long as week 52; therefore, time-adjusted analyses were performed. At week 75 all of the animals in the mid- and high-dose groups were dead and only 11/40 (28%) in the low-dose group were alive.

### C. Pathology (Mice)

Histopathologic findings on neoplasms in mice are summarized in Appendix B, tables Bl-B4; findings on nonneoplastic lesions are summarized in Appendix D, tables D1-D4.

A variety of neoplasms occurred both in control groups (untreated and vehicle) and in dosed groups. Some types of neoplasms occurred only in mice of dosed groups, or with a greater frequency in dosed groups when compared with controls. These lesions are not uncommon in this strain of mouse independent of any treatment. However, many of the tumors appeared to be related to the administration of the chemical. These tumors were all malignant, many had metastasized to one or more locations,

and, except for the malignant lymphomas and mammary gland adenocarcinomas, were observed only in dosed mice.

Alveolar-cell adenocarcinomas were present in 14/40 (35%) low-dose males and 8/38 (21%) low-dose females. Alveolar-cell adenomas occurred in a few animals in all dosed groups as well as These neoplasms in three control males and one control female. consisted of cuboidal to columnar cells aligned along the Often the cells projected into the alveolar alveolar septa. resulting in the formation of numerous papillary spaces, structures. Neoplastic cell nuclei ranged from small and darkly basophilic to large and vesicular. The large open-faced nuclei often contained a prominent nucleolus. Pulmonary tumors had metastasized to the liver in 1/39 (3%) males and to the mediastinal lymphatics in 1/36 (3%) females. In some of the mice, the alveolar-cell adenocarcinomas were multiple in origin.

The hematopoietic neoplasms were observed in 11/25 (44%) highdose, 9/29 (31%) mid-dose, and 11/40 (28%) low-dose males; and in 17/32 (53%) high-dose, 14/27 (48%) mid-dose, and 12/38 (32%) low-dose females. Among controls these neoplasms were observed in 1/35 (3%) untreated-control and 1/30 (3%) vehicle-control males, and in 5/35 (14%) vehicle-control females, but in no other control groups. The malignant lymphomas were classified as lymphocytic, histiocytic, and mixed type. The lymphocytic type

was comprised of cells having a small, darkly basophilic to large, lightly basophilic, vesicular nucleus and a rim of eosinophilic Malignant lymphomas cytoplasm. composed of lymphoblastic (undifferentiated) cells were included in the The histiocytic type was comprised primarily lymphocytic type. of cells with a large open-faced nucleus, distinct eosinophilic nucleolus, and abundant eosinophilic cytoplasm. However, some histiocytic tumors contained many cells having a smaller, pleomorphic, often elliptical or indented, nucleus. The mixed-cell type was a combination of the lymphocytic and histiocytic types. The malignant lymphomas had cellular distortion which prevented further classification. Lymphocytic leukemia was differentiated from malignant lymphoma by the diffuse infiltration of the neoplastic cells within the involved organs, especially the In lymphoma, the neoplastic cells were more solid in liver. arrangement.

The eosinophilic leukemia was characterized by marked infiltration of spleen and liver sinusoids with cells having a segmented nucleus and numerous eosinophilic cytoplasmic granules.

Myocardial sarcomas were observed in 5/40 (13%) low-dose, 7/29 (24%) mid-dose, and 2/25 (8%) high-dose males; and in 8/36 (22%) low-dose, 2/27 (7%) mid-dose, and 3/31 (10%) high-dose females. The neoplastic cells were pleomorphic and varied from those with

a small round, basophilic nucleus to those with a large, vesicular nucleus. The larger nuclei contained one or more distinct nucleoli. All cells had an abundant cytoplasm. The marked interstitial proliferation of neoplastic cells resulted in compression atrophy and necrosis of adjacent myocardial fibers. The origin of the neoplastic cells was not determined, but they appeared to arise from the perimysial connective tissue surrounding myocardial fibers or from Antischkow cells. In some the mice, the neoplastic cells had invaded through of the endocardium and existed as large tumor thrombi within the ventricles. The myocardial sarcomas had metastasized to the lungs in 3/40 (8%) low-dose, 1/29 (3%) mid-dose, and 2/25 (8%) high-dose males; and in 6/38 (16%) low-dose, 2/27 (7%) mid-dose, and 2/31 (6%) high-dose females.

Adenocarcinomas of the mammary gland were present in 6/38 (16%) low-dose and in 2/20 (10%) untreated-control females. The morphology of the mammary tumors varied considerably. The lobular type consisted of multiple compact foci of cells having a large, open-faced nucleus, prominent nucleolus, and a moderate amount of cytoplasm. The foci of cells were separated by a fine fibrovascular stroma. The acinar type was comprised of cuboidal to columnar cells aligned along a basement membrane. The lining of the acini was often several cells thick, and the center of the

acinus often contained numerous concentric layers of keratin. In 1/38 (3%) low-dose mice, the mammary adenocarcinoma had metastasized to the lungs.

Hemangiosarcomas involved the subcutaneous tissue, liver, and abdominal cavity of dosed males and females; and the lungs, spleen, and bone of dosed females only. The incidence of the vascular tumor in any one organ in a group of dosed mice was low; however, when the incidences in the various organs were added together, the combined incidence was too significant to overlook.

Hemangiosarcomas involving the liver were present in 4/39 (10%) low-dose males and 1/37 (3%) low-dose females. The endothelial lining of many hepatic sinusoids was markedly thickened, with cells having a large, open-faced nucleus, one or more nucleoli, and abundant cytoplasm. The neoplastic cells were locally invasive, resulting in compression atrophy and necrosis of hepatocytes in the centrolobular zone. The sinusoidal spaces were observed to be greatly distended.

Hemangiosarcomas involving the other organs were similar in morphology. The neoplastic cells were often large and contained an open-faced nucleus, prominent nucleolus, and abundant cytoplasm. The neoplastic cells were associated with varioussized vascular spaces, and appeared to radiate out from these

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spaces. In 1/27 (4%) mid-dose females, a peritoneal hemangiosarcoma had invaded the liver and one of the kidneys.

Based on this histopathologic examination, phenesterin administered by gavage to B6C3F1 mice at doses of 7, 15, and 30 mg/kg was associated with an increase in both epithelial and nonepithelial malignant tumors. These tumors included pulmonary alveolar-cell adenocarcinomas, mammary gland adenocarcinomas, hemangiosarcomas of several organs, malignant lymphomas and leukemias, and sarcomas of the heart.

## D. Statistical Analyses of Results (Mice)

Tables F1-F6 in Appendix F contain the statistical analyses of the incidences of those primary tumors that occurred in at least two animals in one group and with an incidence of at least 5% in one or more than one group. Mid- and high-dose vehicle-control groups and mid- and high-dose pooled vehicle-control groups are used in the statistical analyses. No pooled low-dose control group is used, since there are no appropriate controls to be combined. The untreated controls are not included in the tables and analyses, since the test conditions of the vehicle controls more closely resemble those of the dosed mice. Due to poor survival of the dosed female mice, time-adjusted analyses are performed, eliminating animals that died before 52 weeks on

study, unless a tumor was found at the anatomic site of interest before week 52. When such an early tumor was found, comparisons are based exclusively on animals that survived at least as long as the animal in which the first tumor was found.

In the following paragraphs, the statistical narrative on female mice is based on time-adjusted data only.

In male mice, the Fisher exact test shows that the incidence of alveolar/bronchiolar carcinomas or combined alveolar/bronchiolar adenomas and carcinomas in the low-dose group is significantly ( $P \leq 0.020$ ) higher than that in the low-dose vehicle controls, but this positive result is not confirmed by the incidences in the mid- or high-dose groups when compared with their controls.

In female mice, the Fisher exact comparison of the incidence of alveolar/bronchiolar adenomas and carcinomas between the low-dose group and the low-dose vehicle-control group shows a probability level of 0.004. The incidences in the mid- and high-dose groups are not significant, nor are the occurrences of carcinomas alone in any group. The lower proportions of these tumors observed in the mid- and high-dose groups of either sex might be attributed to the earlier mortality in these groups compared with the lowdose group. For example, the first tumor to be observed in the low-dose groups of either sex was at week 68, and at that point

in the bioassay, 60/70 (83%) of the mid- and high-dosed males were dead and all of the female mid- and high-dose group were dead.

In each sex of mid- and high-dose mice, the results of the Fisher exact test indicate that the incidences of lymphomas or leukemias are significantly higher in each of the dosed groups than in their respective controls. The results of the Cochran-Armitage test for positive dose-related trend are significant (P < 0.005). An indicated departure from linear trend is observed in the females (P = 0.016), due to the steep increase of these tumors in the dosed animals. In the low-dose groups of each sex, an increased incidence of these tumors is observed when compared with the respective control group, (males: controls 1/16 [6%], low-dose 11/40 [28%]; females: controls 5/18 [28%], low-dose 12/36 [33%]). These tumors were observed as early as 32 weeks in both the low-dose and the low-dose vehicle-control groups of male mice and as early as 15 and 22 weeks in the dosed groups of female mice. While the comparisons in the low-dose groups are not statistically significant, the incidences are in the same direction as those of the statistically significant mid- and high-dose.

The analysis of the incidence of sarcomas of the myocardium is shown in the tables. In male mice, this tumor is seen in signifi-

cant incidences only in the mid-dose group when compared with the pooled controls (P = 0.006). In females, the high- and low-dose groups were observed to have this tumor in significant incidences (P  $\leq$  0.023). These data suggest an association of this tumor with administration of the chemical.

Although none of the results of the Fisher exact test of the incidence of hemangiosarcomas were statistically significant, it should be observed that each of the dosed groups of either sex had a higher incidence than the respective control group. No such tumor was reported in any control group, while dosed groups had incidences ranging from 3% to 33%.

The Fisher exact test shows that the incidence of tubular adenomas of the ovary in the low-dose females is significantly higher (P = 0.024) than that in the low-dose vehicle controls, but no such tumor was observed in the mid- and high-dose groups.

Significant results in the negative direction were observed in the incidence of hepatocellular adenomas in male mice, where the incidences in the mid- and high-dose groups are lower than those in the controls, probably due to the early mortality of the dosed animals.

In summary, while early mortality in the dosed groups may have curtailed the number of animals at risk for the development of

late-appearing tumors, the data indicate an association between the administration of the chemical and tumors of the lung, hematopoietic system, and myocardium.

## V. DISCUSSION

Under the conditions of this bioassay, phenesterin was toxic to rats and mice at the doses employed, as shown by reduced mean body weights and survival. Survival was sufficient, however, for the development of significant incidences of tumors in female rats and in both sexes of mice. Time-adjusted analyses were used for evaluation of the incidences of tumors in the female mice.

In male rats, a variety of sarcomas occurred in different organs (pooled controls 1/18, vehicle controls 0/9, low-dose 7/32, high-dose 4/30). The incidences in the individual dosed groups were not statistically significant, however, when compared with either the pooled or vehicle controls. Similar tumors occurred among the female rats (pooled controls 0/18, vehicle controls 0/10, low-dose 2/29, high-dose 4/30), but also at incidences that were not statistically significant. A dose-related trend (P = 0.037) was present in lymphoma and leukemia in male rats, using the pooled controls; however, the incidences of these neoplasms in the individual dosed groups were not significant when compared with incidences in either the pooled or vehicle controls (pooled controls 0/18, vehicle controls 0/9, low-dose 2/32, high-dose 5/30).

In female rats, a dose-related trend (P = 0.019) was present in

adenocarcinoma of the mammary gland, using the pooled controls, and the incidences of the tumor in the individual dosed groups were significant (P  $\leq$  0.009) when compared with those in the pooled controls (controls 1/18, low-dose 12/29, high-dose 12/30). Metastases to the lung occurred in one high-dose animal.

In male mice, the incidence of alveolar/bronchiolar carcinomas or combined alveolar/bronchiolar adenomas and carcinomas in the low-dose group (14/40) was significantly higher (P < 0.020) than that in the low-dose vehicle-control group (0/16). Alveolar/bronchiolar adenomas also occurred in the mid-dose (6/29) and highdose (2/25) groups, but these incidences were not significant when compared with either the respective pooled or vehicle controls. In female mice, seven low-dose animals had alveolar/bronchiolar adenomas and eight other low-dose animals had alveolar/bronchiolar carcinomas. When these tumors were combined, their time-adjusted incidence was significant (P = 0.004) when compared with that in the low-dose vehicle controls (controls 1/18, low-dose 15/35). Only two animals in the midand high-dose females had alveolar/bronchiolar neoplasms. The lower incidences of these tumors observed in the mid- and highdose groups may be due to the earlier mortality in these groups compared with the low-dose groups.

In each sex of mid- and high-dose mice, incidences of lymphomas

and leukemias were dose related (P < 0.005) using vehicle controls; they were also significant (P < 0.018) in direct comparisons of mid- and high-dose groups of each sex with respective vehicle controls (males: controls 0/14, mid-dose 9/29, high-dose 11/25; females, time-adjusted: controls 0/15, mid-dose 14/18, high-dose 17/19). The significance of the incidence of lymphomas and leukemias in the mid- and high-dose groups of males was increased (P < 0.001) when a pooled-control group was used, both in the test for dose-related trend and in tests for direct comparisons of dosed groups with the controls. In the low-dose groups of each sex, an increased incidence of these tumors was observed when compared with the respective controls (males: controls 1/16, low-dose 11/40; females: controls 5/18, low-dose 12/36). These incidences in the low-dose groups were not statistically significant.

In each sex of mice, sarcomas of the myocardium were found in all groups of dosed animals, but in no control animals (males: low-dose 5/40, mid-dose 7/29, high-dose 2/25; females: low-dose 8/34, mid-dose 2/7, high-dose 3/7). In males, the incidence in the mid-dose group was significant when compared with that in the pooled controls (P = 0.006); in females, the incidences in the low- and high-dose groups were significant (P  $\leq$  0.023). In some of the mice, the neoplastic cells had invaded the myocardium and

formed large thrombi within the ventricles. The myocardial sarcomas had metastasized to the lungs in several animals in each dosed group. No sarcomas of the myocardium have occurred in over 500 male and 500 female historical-control mice of this strain at the laboratory.

Hemangiosarcomas were observed in mice at the following incidences (males: low-dose vehicle controls 0/20, low-dose 6/40, mid- and high-dose vehicle controls 0/14, mid-dose 1/29, highdose 3/25; females: low-dose vehicle controls 0/18, low-dose 5/35, mid- and high-dose vehicle controls 0/15, mid-dose 1/7, high-dose 2/6). Although none of the direct comparisons of the dosed groups with controls were statistically significant, hemangiosarcomas occurred in each of the dosed groups of either sex, but in no control animals. Thus, the occurrence of this tumor may be related to administration of the test chemical.

In low-dose female mice, adenocarcinomas of the mammary gland were observed at an incidence of 6/35 and tubular adenomas of the ovary at an incidence of 8/34. Neither tumor was found in the vehicle controls or in the mid- or high-dose groups of female mice; however, there were two untreated-control mice with adenocarcinomas of the mammary gland. The different response of the low-dose mice may have resulted from their longer survival or

because they were started on study 75 weeks after the other groups studied.

Previous work showed that the toxicity of phenesterin administered by subcutaneous injection is relatively low, with an LD<sub>50</sub> for rats of 2.0 g/kg for a single injection (Larionov et al., 1962); this toxicity is less than that of some of the nitrogen 1969). mustards in general use (Wall et al., Chronic administration to rats, dogs, and monkeys (Vollmer et al., 1973) resulted, however, in cumulative toxicity, manifested by weight loss and myelosuppression. Chronic treatment of cancer patients (Ansfield et al., 1971) also resulted in myelosuppression. The carcinogenicity of phenesterin has been tested in a pulmonary tumor test system in strain A mice administered the chemical intraperitoneally three times per week for 8 weeks at total doses of 2,400, 6,000, or 12,000 mg/kg (Stoner et al., 1973). Under these conditions, phenesterin induced significant incidences (P = 0.001) of tumors of the lung in the mice at all doses tested.

It is concluded that under the conditions of this bioassay, phenesterin was carcinogenic in female Sprague-Dawley rats, producing adenocarcinomas of the mammary gland, and in both sexes of B6C3F1 mice, producing alveolar/bronchiolar carcinomas, hematopoietic tumors, and myocardial sarcomas.

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APPENDIX A

SUMMARY OF THE INCIDENCE OF NEOPLASMS IN

RATS ADMINISTERED PHENESTERIN BY GAVAGE

## TABLE A1.

## SUMMARY OF THE INCIDENCE OF NEOPLASMS IN MALE RATS **ADMINISTERED PHENESTERIN BY GAVAGE**

	UNTREATED VEHICLE CONTROL CONTROL		LOW DOSE	HIGH DOSE	
ANIMALS INITIALLY IN STUDY	10	10		35	
ANIMAIS NECFCESIED	10	9	32	30	
ANIMALS EXAMINED HISTOFATHOLOGICALLY	10	9	32	30	
NIEGUMENTARY SYSIEM					
*SKIN SQUAMOUS CELL PAPILLOMA	(10)	(9)	(32)	(30) 1 (3%)	
*SUECUT TISSUE	(10)	(9)	(32)	(30)	
SEBACECUS ADENOMA			1 (3%)		
SARCCMA, NOS			2 (6%)	1 (3%)	
FIBRONA			1 (3%) 1 (3%)		
FIEROSARCCMA IIFCMA	1 (10%)		1 (5A)		
CHCNDRCMA	(((0,%))		1 (3%)		
<pre>#IUNG SARCOMA, NOS, METASTATIC CSTECSARCOMA, METASTATIC</pre>	(10)	(9)	(32)	(30) 1 (3%) 1 (3%)	
IEMATCECIETIC SYSTEM					
*MULTIFLE CEGANS	(10)	(9)	(32)	(30)	
MALIG.LYEPHOMA, HISTIOCYTIC TYPE			1 (3%) 1 (3%)	3 (104	
LYNFHOCYTIC LEUKEMIA Granulccytic Leukemia	1 (10%)		( ( ) ( ) ( ) ( ) ( ) ( ) ( ) ( ) ( ) (	3 (10%) 2 (7%)	
CIFCULATORY SYSTEM					
NCNE					
CIGESTIVE SYSTEM					
NONE					

# NUMEER CF ANIMALS WITH TISSUE EXAMINED NICROSCOPICALLY # NUMEER OF ANIMALS NECROPSIED

# TABLE A1. MALE RATS: NEOPLASMS (CONTINUED)

	UNTREATED Control	VEHICLE Control	LOW DOSE	HIGH DOSE
UFINAFY SYSTEM				
*KICNEY IIPOMA	(10)	(9)	(32) 1 (3%)	(30)
ENICCHINE SYSTEM				
<pre>#FITUITARY CHROMOFHOBF ADENCMA CHROMOFHCBF CARCINOMA</pre>	(10)	(9) 1 (11 <b>%</b> )	(29) 2 (7%) 1 (3%)	(29)
#ADRENAL EHECCHROMCCYTOMA	(10)	(9)	(32) 1 (3%)	(30)
*FANCHEATIC ISLETS ISLET-CELL ADENOMA	(10)	(9)	(32) 1 (3%)	(30)
REFACEUCTIVE SYSTEM				
#1FSTIS INTERSTITIAL-CELL TUMOR	(10) 1 (10%)	(9)	(32)	(30)
NFFVCUS SYSTEM				
#EFAIN ASTROCYTCMA	(10)	(9)	(30) 1 (3%)	(30) 1 (3%
SPECIAL SENSE ORGANS				
*EAF CANAL SQUAMOUS CELL PAFILIOMA	(10)	(9)	(32) 2 (6%)	(30)
MUSCUICSKEIETAI SYSTEM				
*ECNE CSTECSARCCMA	(10)	(9)	(32) 1 (3 <b>%</b> )	(30) 1 (3%)
BCLY CAVITIES				
*AECOMINAL CAVITY SARCCMANCS	(10)	(9)	(32)	(30)

# NUMEER OF ANIMALS WITH TISSUE EXAMINED MICROSCOPICALLY # NUMEER OF ANIMALS NECROFSIED

TABLE A1.	MALE	RATS:	NEOPL	.asms (	CONTINUED)

	UNTREATED CONTROL	VEHICLE Control	LOW DOSE	HIGH DOSE
HEMANGIOSAECOMA			1 (3%)	
NIL CTHER SYSTEMS				
*MUITIFLE CEGANS Sarcoma, NCS	• •	(9)	(32) 1 (3%)	(30)
NIMAL CISPOSITION SUMMARY				
ANIMALS INITIALLY IN STUDY Natural ceath@ Moribung sacrifice Scheduleg sacrifice	10 2	10 3	35 15 12	35 10 21
ACCIDENTAILY KILLED Terminal sacrifice Animal missing	8	7	8	4
B INCLUEES AUTOLYZED ANIMALS				
LIFCE SUMMARY				
TCTAL ANIMALS WITH ERIMARY TUMCRS* TCTAL FRIMARY TUMOFS	4 4	1 1	18 21	11 11
TOTAL ANIMALS WITH BENIGN TUMORS ICTAL BENIGN TUMORS	2 2		9 10	1 1
ICTAL ANIMALS WITH MALIGNANT TUMORS ICTAL MALIGNANT TUMORS	2 2	1 1	11 11	10 10
TOTAL ANIMALS WITH SECONDARY TUMORS# ICTAL SECONDARY IUMORS				2 2
TOTAL ANIMALS WITH TUMORS UNCERTAIN- BENIGN CF MALIGNANI ICTAL UNCERTAIN TUMORS				
TCTAL ANIMALS WITH TUMORS UNCERTAIN- FFIMARY CR METASTATIC ICTAL UNCERTAIN TUMORS				
<ul> <li>FRIMARY TUMORS: ALL TUMORS EXCEPT SE</li> <li>SECONDARY TUMORS: METASTATIC TUMORS</li> </ul>	OR TUMORS IN	ASIVE INTO AN	ADJACENT ORGAN	

## TABLE A2.

#### SUMMARY OF THE INCIDENCE OF NEOPLASMS IN FEMALE RATS ADMINISTERED PHENESTERIN BY GAVAGE

	UNTREATED Control	VEHICLE Control	LOW DOSE	HIGH DOSE
ANIMALS INITIALLY IN STUDY ANIMALS NECFOPSIED ANIMALS EXAMINED HISTOPATHOLOGICALLY	10 10	10 10 10	35 29 29	35 30 30
INTEGUMENTARY SYSTEM				
*SUBCUT TISSUE Sarcona, nos Fibrcsarcona	(10)		(29) 1 (3 <b>%</b> )	(30) 1 (3%
RESPIFATORY SYSTEM				
<pre>#IUNG ADENOCARCINOMA, NOS, METASTATIC ALVECLAR/BRONCHIOLAR CARCINOMA</pre>		(10)	(28)	1 (3%
HEMATCECIETIC SYSTEM				
MAIIG.IYPPHOMA, HISTIOCYTIC TYFE Granulccytic leukemia		(19)	(29) 2 (7%)	1 (3%
CIFCULATORY SYSTEM				
NC NE				
DIGESTIVE SYSTEM				
NCNE				
UFINAFY SYSTEM				
NCNE				
ENECCFINE SYSTEM				
#FITUITARY CHROMOFHOBE ADENCMA	(10) 1 (10%)		(27) <u>4 (15%)</u>	

# NUMEER OF ANIMALS WITH TISSUE EXAMINED MICROSCOPICALLY \* NUMEER OF ANIMALS NECROPSIED

TABLE A2.	FEMALE	<b>RATS: NEOI</b>	PLASMS	(CONTINUED)

	UNTREATED CONTROL	VEHICLE CONTROL	LOW DOSE	HIGH DOSE
FFANCEFATIC ISLETS ISLET-CELL ADENOMA	(10)	(10) 1 (10%)	(29)	(30)
EFFCLUCTIVE SYSTEM				
*HANHARY GLAND ADENOCARCINONA, NOS SARCONA, NOS FIDRCADENCONA	(10) 6 (60%)		(29) 12 (41%) 21 (72%)	(30) 12 (40% 1 (3%) 11 (37%)
UTERUS ADENOCARCINOMA, NOS ENCCMETRIAL STROMAL POLYP		(10)	(29) 1 (3%)	(2.0.
#CEFVIX UTEFI Scuamous cell carcinoma	(10)	(10)	(29) 1 (3%)	(30) 1 (3%)
SFECIAL SENSE CRGANS *FYF/RFTINA	(10)	(10)	(29)	(30)
*EYE/RETINA NEUROELASTOMA		(10)		(30) 1 (3%)
IOSCULOSKELETAL SYSTEM				
NCNE				
CCTY CAVITIES *AEDCMINAL CAVITY ADENCCARCINOMA, NOS SARCCMA, NOS	(10) 1 (10 <b>%</b> )	(10)	(29) 1 (3%)	(30)
CCTY CAVITIES *AEDCMINAL CAVITY ADENCCARCINOMA, NOS SARCCMA, NOS	(10)	(10)		(30)

# TABLE A2. FEMALE RATS: NEOPLASMS (CONTINUED)

	UNTREATED CONTROL	VEHICLE Control	LOW DOSE	HIGH DOSE
SARCOMA, NOS, METASTATIC				1 (3%
CRANIAL CAVITY				
SARCOMA, NOS				1
NIMAL DISECSITION SUMMARY				
	10	10	35	35
NATURAL CEATHD	•	1	14	9
MORIBUND SACRIFICE	2	1	12	24
SCHEDULED SACRIFICE Accidentally kilifd				
TERMINAL SACRIFICE	8	8	9	2
ANIMAL MISSING	0	0	,	2
INCLUDES AUTCLYZED ANIMALS				
ONCE SUMMARY				
TOTAL ANIMALS WITH PRIMARY TUMORS*	6	7	28	22
TCTAL FRIMARY TUMORS	8	13	49	34
TOTAL ANIMALS WITH BENIGN TUMORS	6	7	23	13
ICTAL BENIGN TUMORS	7	12	30	13
TOTAL ANIMALS WITH MALIGNANT TUMORS	1	1	16	16
ICTAL MALIGNANT IUMORS	1	1	19	21
TOTAL ANIMALS WITH SECONDARY TUBORS#			1	2
ICTAL SECONDARY TUMORS	1		1	2
TOTAL ANIMALS WITH TUMORS UNCERTAIN-				
EENIGN OR MALIGNANT				
TOTAL UNCERTAIN TUMORS				
TOTAL ANIMALS WITH TUMORS UNCERTAIN-				
FBIMARY OR METASTATIC Total Uncertain Tumors				
FRIMARY IUMORS: ALL TUMORS EXCEPT SE	CONDARY THMOR	S		
SECONDARY TUMORS: METASTATIC TUMORS			DILCOND ODOLN	

APPENDIX B

SUMMARY OF THE INCIDENCE OF NEOPLASMS IN

MICE ADMINISTERED PHENESTERIN BY GAVAGE

## TABLE B1.

# SUMMARY OF THE INCIDENCE OF NEOPLASMS IN MALE MICE ADMINISTERED PHENESTERIN BY GAVAGE (CONTROL GROUPS)

	MID & HIGH DOSE UNTREATED CONTROL	CONTROL	MID & HIGH DOSE VEHICLE Control	LOW DOSE VEHICLE CONTROL
IMALS INITIALLY IN STUDY	15	20	15	20
NIMAIS NECRCESIED NIMALS EXAMINED HISTOPATHCLOGICALLY	1.5	20 20	14 14	16 16
ITEGUMENTARY SYSTEM				
NCNE				
SFIFATCRY SYSTEM				
LUNG	(15)	(20)	(14)	(16)
HUNG HEPATOCELLULAR ÇARCINOMA, METAST AIVECLAR/BRCNCHIOLAR ADENOMA	1 (7%)			2 (13%
MATOFCIETIC SYSTEM				
MULTIFLE ORGANS MALIG.LYPPHOMA, LYMPHOCYTIC TYPE	(15)	(20)	(14)	(16)
MALIG.LYMPHOMA, HISTIOCYTIC TYPE				1 (6%)
IECOLAICRY SYSTEM				
NCNE				
ICESTIVE SYSTEM				
HIIVER HEPATOCEILULAR ADENOMA	(15)	(19) 2 (11%)	(14) 4 (29 <b>%)</b>	(16) 3 (19%
HEPATOCEILULAR ADERONA HEPATOCEILULAR CARCINONA	2 (13%)	2 (11%)	4 (25%)	J (176
HEMANGIONA				1 (6%)

	MID & HIGH DOSE UNTREATED CONTROL	LOW DOSE UNTREATED CONTROL	MID & HIGH DOSE VEHICLE CONTROL	LOW DOSE VEHICLE CONTROL
REFRCEUCTIVE SYSTEM				
NCNE				
NEFVCOS SYSTEM				
NCHE				
SFECIAL SENSE CRGANS				
+HARCERIAN GLAND Adencha, Nos			(14)	
NUSCULOSKELFTAL SYSTEM				
NCNE				
ECDY CAVITIES				
*FEBITONEUM Sarcoma, Nos	(15) . 1 (7%)	(20)	(14)	(16)
ALL CTHEF SYSTEMS				
BCNE				
ANIPAL DISECSITION SUMMARY				
ANIMALS INITIALLY IN STUDY Natural deatha	15 1	<sup>20</sup> 7	15 1	20
HORIBUND SACRIFICE Scheduled Sacrifice	•	11	•	13
ACCIDENTALLY KILLED Terniwal sacripice Animal missing	14	2	14	4 2
INCLUDES AUTOLIZED ANIMALS				

# TABLE B1. MALE MICE (CONTROL GROUPS): NEOPLASMS (CONTINUED)

	MID & HIGH DOSE UNTREATED CONTROL		MID & HIGH DOSE VEHICLE CONTROL	LOW DOSE VEHICLE CONTROL
TUMOR SUMMARY				
IOTAL ANIMALS WITH ERIMARY TUMORS* Ictal Frimary Tumors	6 6	4 4	4	7 8
TOTAL ANIMAIS WITH BENIGN TUMORS TOTAL BENIGN TUMORS	2 2	2 2	4 4	6 7
TCTAL ANIMALS WITH MALIGNANT TUMORS ICTAL MALIGNANT TUMORS	4 4	2 2		1 1
TOTAL ANIMALS WITH SECONDARY TUMORS# TCTAL SECONDARY TUMORS	1 1			
TOTAL ANIMALS WITH TUMORS UNCERTAIN- Benign or malignani Total Uncertain Tumors				
TOTAL ANIMALS WITH TUMORS UNCERTAIN- FRIMARY OR METASTATIC Total Uncertain Tumors				
FRIMARY OR METASTATIC	CONDARY TUMORS			

# TABLE B1. MALE MICE (CONTROL GROUPS): NEOPLASMS (CONTINUED)

## TABLE B2.

# SUMMARY OF THE INCIDENCE OF NEOPLASMS IN MALE MICE ADMINISTERED PHENESTERIN BY GAVAGE (TREATED GROUPS)

	LOW DOS	SE	MID D	OSE	HIGH D	OSE
NIFAIS INITIALLY IN STUDY	40		35		35	
NIMALS MISSING NIMALS NECROPSIED	40		29		2 25	
NIMALS RECROPSIED NIMALS FXAMINED HISTOFATHOLOGICALLY			29		25	
NTEGUMENTARY SYSTEM						
*SKIN	(40)		(29)		(25)	)
CARCINCMA, NOS	1	(3%)				
KERAICACANTHCMA	1	(3%)				
*SUBCUT TISSUE	(40)		(29)		(25)	
FIEROSARCCMA	2	(5%)				
HENANGIOSARCOMA			1 	(3%)	3	(12%
ESFIGATORY SYSTEM						
#LUNG	(40)		(29)		(25)	
ALVECLAR/BRONCHIOLAR ADENOMA		(10%)	(2)	(21%)	(2)	(8%)
AIVECLAR/ERONCHIOLAR CARCINOMA		(35%)	Ŭ	(2.1%)	2	(0%)
TUPULAR-CELL ADENCCARCINOMA, MET		<b>x</b> = + + + <b>y</b>	1	(3%)		
SARCCMA, NOS, METASTATIC	3	(8%)	1	(3%)	2	(8%)
EMATCECIETIC SYSTEM						
MULTIPLE CRGANS	(40)		(29)		(25)	I
FALIGNANT LYMFHCMA, NOS					1	(4%)
MALIG.LYMPHOMA, UNDIFFER-TYPE		(5%)				
MALIG.LYMPHOMA, LYMPHOCYTIC TYPE			7	(24%)		(36%
MALIG.LYFPHOMA, HISTIOCYTIC TYPE		(13%)			1	(4%)
MALIGNANT LYPPHOMA, MIXED TYPE Lymphocytic leukemia		(3%) (3%)	2	(7%)		
ECSINOPHILIC LEUKEMIA		(3%)	2	(7,8)		
*PESENTERIC L. NODE	(35)		(4)			
MALIC.LYMPHOMA, HISTIOCYTIC TYPE			(-)			
IRCULATCRY SYSTEM						
MYOCARDIUM SARCCMA, NOS	(40) 5		(29) 7		(25)	(8%)

\* NUMEER OF ANIMALS WITH TISSUE EXAMINED MICFOSCOPICALLY \* NUMEER OF ANIMALS NECROPSIED

#### TABLE B2. MALE MICE (TREATED GROUPS): NEOPLASMS (CONTINUED)

LOW DOSE MID DOSE HIGH DOSE DIGESTIVE SYSTEM (39) 7 (18%) 3 (8%) 1 (3%) 4 (10%) (29) 2 (7%) #ITVER (25) HEPATOCEIIULAR ADENOMA ALVECLAR/PROPOSITORIA ALVECLAR/ERONCHIOIAR CA, METASTA HEMANGIOSARCCMA SQUAMOUS CELL PAPIILOMA #STCMACH (40) (29) (24) 1 (3%) -----URINARY SYSTEM (40) (29) 1 (3%) #KTENFY 10BULAR-CELL ADENCCARCINOMA (25) \_ \_ \_ \_ \_ \_ \_ \_ \_ ------ENECCEINE SYSTEM NCNE \_\_\_\_\_ REFFCEUCTIVE SYSTEM NCNE \_\_\_\_\_ -----NEEVCCS SYSTEM NCNE \_\_\_\_\_ SFECIAL SENSE CRGANS 
 \*HARCERIAN GLANC
 (40)

 ADENOMA, NOS
 2 (5%)
 (29) (25) 1 (4%) , \_\_\_\_\_ MUSCULCSKELFTAL SYSTEM NCNE BCTY CAVITIES (40) \*FERITCNEUM (29) (25) 1 (3%) SARCCMA, NOS \* NUMBER OF ANIMAIS WITH TISSUE EXAMINED MICROSCOPICALLY \* NUMBER OF ANIMAIS NECROPSIED

	LOW DOSE	MID DOSE	HIGH DOSI
HEMANGIOSARCOMA	2 (5%)		
II CIHEF SYSTEMS			
*HUITIPLE CRGANS SARCCMA, NOS, NETASTATIC	(40) 1 (3%)	(29)	(25)
NIMPI EISPOSITICN SUMMARY			
ANIMALS INITIALLY IN STUDY	40	35	35
NATURAL CEATHD	9	19	18
MORIEUND SACRIFICE Scheduled Sacrifice	31	11	13
ACCIDENTALLY KILLED			2
TERMINAL SACRIFICE		5	2
ANIMAL MISSING			2
INCIUDES AUTCLYZED ANIMALS			
URCE SUMMARY			
TOTAL ANIMALS WITH PRIMARY TUMORS*	29	20	17
ICTAL PRIMARY TUMORS	58	26	19
TOTAL ANIMALS WITH BENIGN TUMORS	11	7	2
ICTAL BENIGN TUMORS	15	8	3
TOTAL ANIMALS WITH MALIGNANT TOMORS	27	18	16
TCTAL MALIGNANT TUMORS	43	18	16
	-	-	
TOTAL ANIMALS WITH SECONDARY TUMORS* TCTAL SECONDARY TUMORS	5	2 2	2 2
IOINE ELCONDANT IONONE	0	-	•
TOTAL ANIMALS WITH TUMORS UNCERTAIN-			
BENIGN OR MALIGNANT Total Uncertain Tumors			
IOTAL UNCERTAIN IUNORS			
TOTAL ANIMALS WITH TUMORS UNCERTAIN-			
FFIMARY OR METASTATIC			
TCTAL UNCERTAIN TUMORS			

## TABLE B2. MALE MICE (TREATED GROUPS): NEOPLASMS (CONTINUED)

### TABLE B3.

## SUMMARY OF THE INCIDENCE OF NEOPLASMS IN FEMALE MICE ADMINISTERED PHENESTERIN BY GAVAGE (CONTROL GROUPS)

	MID & HIGH DOSE UNTREATED CONTROL	LOW DOSE UNTREATED CONTROL	MID & HIGH DOSE Vehicle Control	LOW DOS Vehicle Control
NNIMALS INITIALLY IN STUDY	15	20	15	20
ANIMAIS NECHCESIED	15	20	15	20
NIMALS EXAMINED HISTOPATHOLOGICALLY	15	20	15	20
NIEGOMENTARY SYSTEM				
*SUBCUT TISSUE Hemangiona			(15)	(20) 2 (10 <b>1</b>
RESPIFATORY SYSTEM				
	(15)	(20)	(15)	(20)
ALVEOLAR/BRONCHIOLAR ADENOMA Alveolar/bronchiolar carcinoma			1 (7%)	1 (5%)
IENATOFOIETIC SYSTEM				
*NUITIPLE CEGANS	(15)	(20)	(15)	(20)
MALIG.LYMPHOMA, LYMPHOCYTIC TYPE Malig.lymphoma, Histiocytic type				1 (5%) 3 (15)
HALIGNANT LYMPHOMA, MIXED TYPE				1 (5%)
#SPLEEN	(15)	(20)	(15)	(19)
HEMANGIONA	1 (7%)			
IFCULATORY SYSTEM				
NCNE				
DIGESTIVE SYSTEM				
#LIVER	(15)	(19)	(15)	(20)
HEPATOCEILULAR ADENONA HEPATOCEILULAR CARCINONA	2 (13%)			2 (109
DRINAFY SYSTEM				
BONE				

# NUMBER OF ANIMALS WITH TISSUE EXAMINED MICROSCOPICALLY \* NUMBER OF ANIMALS NECROPSIED

TABLE B3. FEMALE MICE (	CONTROL	<b>GROUPS</b> ):	NEOPL	ASMS	(CONTINUED)
	OOIL LIGE	0110010/1			

	MID & HIGH DOSE UNTREATED CONTROL	LOW DOSE UNTREATED CONTROL	MID & HIGH DOSE VEHICLE CONTROL	LOW DOSE VEHICLE CONTROL
ENECCFINE SYSTEM				
#FITUITARY CHROMOFHOBE ADENCMA	(14)	(17)	(15)	(14) 1 (7%)
#THYFOID FOLLICULAR-CFLL ADENOMA	(14)	(20)	(14) 1 (7%)	(16)
REFFCLUCTIVE SYSTEM				
*HAMMARY GLAND Adenocarcincha, ncs	(15)	0 /40#\	(15)	(20)
NERVCUS SYSTEM				
NCNE				
SFECIAL SENSE CRGANS				
BCNE				
NUSCULCSKEIETAL SYSTEM				
*EONE CSTECSARCOMA		(20) 1 (5%)	(15)	(20)
ECTY CAVITIES				
*FERITONEUM IIPOMA	(15)	(20) 1 (5%)	(15)	• •
ALL CTHEF SYSTEMS				
<u>DCFF</u>			ه ک اخلی وی در در این چهرانگ بند ک ک	

# NUMEER OF ANIMALS WITH TISSUE EXAMINED MICROSCOPICALLY \* NUMEER OF ANIMALS NECROPSIED

•

	MID & HIGH DOSE UNTREATED CONTROL	LOW DOSE Untreated Control	MID & HIGH DOSE VEHICLE CONTROL	LOW DOSE VEHICLE CONTROL
NIMAL DISFOSITION SUMMARY				
ANIMALS INITIALLY IN STUCY Natural deathg Moribund Sacrifice Scheduled Sacrifice	15 1	20 3 15	15	20 5 9
ACCIDENTALIY KILIFE TERMINAL SACRIFICE ANIMAL MISSING	14	2	15	6
INCIDDES AUTCLYZED ANIMALS				
UPCF SUMMARY				
TOTAL ANIMALS WITH FRIMARY TUMORS* TCTAL FRIMARY TUMORS	3 3	4 4	2 2	9 12
TOTAL ANIMALS WITH BENIGN TUMORS TCTAL BENIGN TUMORS	3 3	1 1	2 2	4 5
ICTAL ANIMALS WITH MALIGNANT TUMORS ICTAL MALIGNANT TUMORS		3 3		7 7
TOTAL ANIMALS WITH SECONDARY TUNORS	•			
TOTAL ANIMALS WITH TUMORS UNCERTAIN- EENIGN OR MALIGNANI ICTAL UNCERTAIN TUMORS	-			
TOTAL ANIMALS WITH TUMORS UNCERTAIN- FEIMARY CF METASTATIC ICTAL UNCERTAIN TUMORS	-			
FRIMARY TUMORS: ALL TUMORS EXCEPT SI Secondary tumors: Metastatic tumors	OR TUMORS INVA	SIVE INTO AN A		

# TABLE B3. FEMALE MICE (CONTROL GROUPS): NEOPLASMS (CONTINUED)

## TABLE B4.

## SUMMARY OF THE INCIDENCE OF NEOPLASMS IN FEMALE MICE **ADMINISTERED PHENESTERIN BY GAVAGE (TREATED GROUPS)**

	LOW DOSE	MID DOSE	HIGH DOSE
NIMAIS INITIALLY IN STUDY NIMAIS NECECESIEC NIMAIS EXAMINED HISTOFATHOLOGICALLY	40 38 38	35 27 27	35 32 31
NIEGUMENTAFY SYSTEM			
*SKIN Sçuamous celi papiiloma	(38) 1 (3%)	(27)	(32)
*SUECUT TISSUE CARCINOMA,NOS HEMANGICSARCOMA	(38) 2 (5%)	(27) 1 (4%)	(32)
ESFIFATORY SYSTEM			
#LUNG ALENOCARCINOMA, NOS, METASTATIC ALVECLAR/BRONCHIOLAR ADENOMA AIVECLAR/BRONCHIOLAR CARCINOMA SARCCMA, NCS, METASTATIC HEBANGIOSARCOMA	(38) 1 (3%) 7 (18%) 8 (21%) 6 (16%)	(27) 1 (4%) 2 (7%)	(31) 1 (3%) 2 (6%) 1 (3%)
FRATCECIETIC SYSTEM			
*PUITIFLE CEGANS MALIGNANT LYPPHCPA, NOS MALIG.LYMPHOMA, UNDIFFER-TYPE MALIG.LYMPHOMA, LYMPHOCYTIC TYPE MALIG.LYMPHCMA, HISTIOCYTIC TYFE LYMFHOCYTIC LEUKEMIA	2 (5%)	(27) 12 (44%) 2 (7%)	(32) 2 (6%) 14 (44%
#SPLEEN HEMANGIOSARCOMA	(38) 1 (3%)	(27)	(30)
FFEIASTINAL L.NODE Alveolar/eronchiolar ca, metasta	(36) 1 (3%)	(4)	(2)
#THYMUS MALIG.IYMPHONA. UNCIPPEP-TYPE	(35)	(27)	(28)

\* NUMBER OF ANIMALS WITH TISSUE EXAMINED MICROSCOPICALLY \* NUMBER OF ANIMAIS NECROPSIED

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	LOW DOSE	MID DOSE	HIGH DOSE
MALIG.LYNPHOMA, LYMPHOCYTIC TYPE		• • • • • • • • • • • • • • • • • • •	1 (4%)
TIFCULATORY SYSTEM			
#MYCCARDIUM SARCOMA, NOS	(36) 8 (22%)	(27) 2 (7%)	(31) 3 (101
CIGESTIVE SYSTEM			
<pre>#IIVER HEPATOCEILULAR CARCINOMA HEMANGIOSAFCCMA</pre>	(37) 1 (3%) 1 (3%)	(27)	(30)
#STCMACH Sçuamous cell carcinoma	(36) 1 (3%)	(26) 1 (4%)	(29)
JRINARY SYSTEM			
KCNE			
ENECCEINE SYSTEM			
NCNE			
REFECTIVE SYSTEM			
*MAMMARY GIAND Adenccarcingma, nos	(38) 6 (16%)	(27)	(32)
# CTEFUS FNCOMETRIAL STROMAL SARCOMA	(38) 1 (3%)	(27)	(30)
#CVAFY Carcincma, Nos Adencma, Nos Tubular Adencma	(37) 1 (3%) 1 (3%) 8 (22%)	(27)	(30)
NEEVCUS SYSTEM			

#### TABLE B4. FEMALE MICE (TREATED GROUPS): NEOPLASMS (CONTINUED)

\_\_\_\_\_

# NUMBER OF ANIMALS WITH TISSUE EXAMINED MICROSCOPICALLY \* NUMBER OF ANIMALS NECROFSIED

	LOW DOSE	MID DOSE	HIGH DOS
SFECIAL SENSE ORGANS			
*HAFCERIAN GLAND ACENOMA, NOS	(38) 1 (3%)	(27)	(32)
NUSCULCSKELETAL SYSTEM			
*EONE FEMANGICSARCCHA	(38) 1 (3%)	( 27)	(32)
EOLY CAVITIES			
*FERITONEUM HEMANGIOSARCOMA	(38)	(27) 1 (4%)	(32)
ALL CIHER SYSTEMS			
*RUITIFIE CFGANS SQUAMOUS CELL CARCINOMA, METASTA FIEROUS HISTIOCYTOMA, MALIGNANT HEMANGIOSARCOMA, METASTATIC	(38) 1 (3 <b>%</b> )	(27) 1 (4 <b>%</b> ) 1 (4 <b>%</b> )	(32)
ANIMAL DISFOSITION SUMMARY			
ANIMALS INITIALLY IN STUDY Natural Deathg McRibund Sacrifice Scheduled Sacrifice	40 13 27	35 13 20	35 18 16
ACCIDENTALLY KILLED TERMINAL SACRIPICE ANIMAL MISSING		2	1
@ INCLUDES AUTCLYZED ANIMALS		وب ف میگان خذاہ سے سے نواز ہے ہے	

## TABLE B4. FEMALE MICE (TREATED GROUPS): NEOPLASMS (CONTINUED)

			HIGH DOSE
MOR SUMMARY			
TOTAL ANIMALS WITH FRIMARY TUMCRS*	33	17	21
ICTAL FRIMARY TUMORS	62	20	23
TOTAL ANIMALS WITH BENIGN TUMCES	15	1	1
ICTAL BENIGN TUMORS	18	1	1
TOTAL ANIMALS WITH MALIGNANT TUMORS	30	17	21
ICTAL MALIGNANT TUMORS	44	19	22
TOTAL ANIMALS WITH SECONDARY TUMORS	* 8	4	2
ICIAL SECONDARY IUMORS	8	4	2
TOTAL ANIMALS WITH TUMORS UNCERTAIN	I <b>-</b>		
EENIGN OR MALIGNANT			
TOTAL UNCERTAIN TUMORS			
TOTAL ANIMALS WITH TUBORS UNCERTAIN	i <b>-</b>		
FFINARY CR METASTATIC			
TOTAL UNCERTAIN TUMORS			

# TABLE B4. FEMALE MICE (TREATED GROUPS): NEOPLASMS (CONTINUED)

APPENDIX C

## SUMMARY OF THE INCIDENCE OF NONNEOPLASTIC LESIONS

IN RATS ADMINISTERED PHENESTERIN BY GAVAGE

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#### TABLE C1.

#### SUMMARY OF THE INCIDENCE OF NONNEOPLASTIC LESIONS IN MALE RATS **ADMINISTERED PHENESTERIN BY GAVAGE**

	UNTREATED Control	VEHICLE Control	LOW DOSE	HIGH DOSE
ANIMAIS INITIAILY IN STUDY ANIMAIS NECRCESIED ANIMAIS EXAMINED HISTOPATHOLOGICALLY	10 10 10	10 9 9	35 32 32	35 30 30
ENTEGUMENTARY SYSTEM				
*SKIN FFIDERMAL INCLUSION CYST INFLAMMATICN, SUFEURATIVE INFLAMMATICN, NECFCTIZING INFLAMMATICN, CHFONIC HYPERKERATOSIS	(10)	(9)	(32) 1 (3%) 1 (3%) 2 (6%) 2 (6%)	(30) 1 (3 <b>%</b> )
*SUBCUT TISSUE GRANULATION, TISSUE	(10)	(9)	(32) 1 (3%)	(30)
RESPIFATORY SYSTEM	~~~~~~~~~~	2 (6%)		
#TEACHEA INFLAMMATION, SUFPURATIVE	(10) 1 (10%)	(9)	(32) 1 (3%)	(30) 1 (3%)
<pre>#IUNG/ERCNCHIOLE HYPEKPLASIA, LYMEHOID</pre>	(10)	(9)	(32) 2 (6%)	(30)
#LUNG INFLAMMATICN, INTERSTITIAL FNFUMONIA, LIPID ERCNCHCENEUMCNIA SUPPUPATIVE AESCESS, NCS ERCNCHCENEUMCNIA CHRONIC SUPFURA	(10)	(9)	(32) 4 (13%) 1 (3%) 1 (3%) 1 (3%) 2 (6%)	(30) 2 (7%) 1 (3%) 3 (10%
HEFATCFCIFTIC SYSTEM				
#EONE MARFON Atrophy, Nos	(9) 8 (89%)	(9) 8 (89%)	(32) 18 (56%)	(26) 14 (54%)
#SPIFFN HEMORRHAGE	(10) 1 (10%)	(9)	(32)	(29)

# NUMEER OF ANIMALS WITH TISSUE EXAMINED MICFOSCOPICALLY \* NUMEER OF ANIMALS NECROPSIED

	UNTREATED Control	VEHICLE Control	LOW DOSE	HIGH DOSE
INFLAMMATION WITH FIBROSIS HEMATOFOIESIS	1 (10%)		3 (9%)	1 (3%)
#PESENTERIC L. NODE CONGESTION, NOS			(1)	(4) 1 (25%)
CIFCULATORY SYSTEM				
<pre>#MYCCARDIUM INFLAMMATION, INTERSTITIAL INFLAMMATION, CHECNIC CALCIFICATION, METASTATIC</pre>	(10)	(9)	(32) 1 (3%) 1 (3%)	(30) 1 (3%)
DIGESTIVE SYSTEM				
#LIVER IIPOIDCSIS	(10)	(9)	(32)	(30) 1 (3%)
<pre>#LIVEP/CENTRILOEULAR     NECRCSIS, NOS</pre>	(10)	(9)	(32) 2 (6%)	(30) 1 (3%)
#FANCREAS ANEURYSM	(10)	(9)	(32) 1 (3%)	(30)
*FANCFEATIC ACINUS ATROFHY, NOS	(10)	(9) 1 (11%)	(32)	(30)
UFINAFY SYSTEM				
#KIENEY INFLAMMATICN, INTERSTITIAL INFLAMMATICN, CHRONIC INFLAMMATICN WITH FIBROSIS		(9) 5 (56%)	1 (3%) 18 (56%) 1 (3%)	(30) 16 (53%)
ENECCHINE SYSTEM				
#ADRENAL Angiectasis	(10) 1 (10%)	(9)	(32)	(30)
<pre>#1HYFCID INFLAMMATICN, INTERSTITIAL INFLAMMATICN, CHFCNIC</pre>	(10)	(8)	(28)	(27) 1 (4%)

### TABLE C1. MALE RATS: NONNEOPLASTIC LESIONS (CONTINUED)

# NUMEEF CF ANIMALS WITH TISSUE EXAMINED MICROSCOPICALLY \* NUMEER OF ANIMALS NECROPSIED

	UNTREATED Control	VEHICLE CONTROL	LOW DOSE	HIGH DOSE
EFFCLUCTIVE SYSTEM				
#FRCSTATE INFLAMMATION, SUPFURATIVE	(10)	(9)	(32)	(29) 2 (7)
EFVCUS SYSTEM				
#ERAIN/MENINGES INFLAMMATION, NOS	(10)	(9)	(30) 1 (3%)	(30)
ERAIN/EPENCYMA Inflammation, nos	(10)	(9)	(30) 1 (3%)	(30)
FERAIN FERIARTERITIS	(10)	(9)	(30) 1 (3%)	(30)
USCULCSKELETAL SYSTEM				
NCNE				
NCNE	(10)	(9)	(32)	(30)
NCNE		(9)	(32) 1 (3 <b>%</b> )	
NCNE CLY CAVITIES *FERITCNEUM INFLAMMATICN, FIBRINOUS INFLAMMATICN, CHRONIC INFLAMMATICN, CHRONIC NECROTIZIN *FELEURA				1 (3)
CIY CAVITIES *FERITCNEUM INFLAMMATICN, PIBRINOUS INFLAMMATICN, CHRONIC	1 (10%)		1 (3%)	1 (3)
NCNE CLY CAVITIES *FERITCNEUM INFLAMMATICN, FIBRINOUS INFLAMMATICN, CHRONIC INFLAMMATICN, CHRONIC NECROTIZIN *ELEURA INFLAMMATICN, CHRONIC	1 (10%)	(9)	1 (3%)	1 (3)

# TABLE C1. MALE RATS: NONNEOPLASTIC LESIONS (CONTINUED)

# TABLE C1. MALE RATS: NONNEOPLASTIC LESIONS (CONTINUED)

	UNTREATED Control	VEHICLE Control	LOW DOSE	HIGH DOSE
SFECIAL MORFEOLOGY SUPMARY				
NO LESION REFORTED Autolysis/nc necrofsy	1	1	3	5
# NUMEER OF ANIMALS WITH TISSUE EXA * NUMEER OF ANIMALS NECROPSIED	MINED MICPOSCOPI	CALLY	*	

#### TABLE C2.

#### SUMMARY OF THE INCIDENCE OF NONNEOPLASTIC LESIONS IN FEMALE RATS ADMINISTERED PHENESTERIN BY GAVAGE

	UNTREATED Control	VEHICLE Control	LOW DOSE	HIGH DOSE
ANIMAIS INITIAILY IN STUDY ANIMAIS NECFCESIED ANIMAIS EXAMINED HISTOFATHOLOGICALLY	10 10	10 10 10 10	35 29 29	35 30 30
INIEGUMENTAFY SYSTEM				
*SUECUT TISSUE INFLAMMATICN, CHRONIC FOCAL	(10)	( 10)	(29)	(30) 1 (3%)
RESEIFATORY SYSTEM				
*IRACHEA Inflammaticn, Chronic	(10)	(10)	(28)	(30) 1 (3%)
<pre>#IUNG/ERONCHIOLE METAPLASIA, SQUAMOUS</pre>	(10)	(10)	(28)	(30) 1 (3%)
#LUNG INFLAMMATICN, INTERSTITIAL ERCNCHCFNEUMONIA SUPPURATIVE	(10) 1 (10%)	(10) 2 (20 <b>%</b> )	(28) 2 (7%)	(30) 2 (7%)
AESCESS, NOS ERCNCHCENEUMONIA, CHRONIC ERCNCHCENEUMCNIA CHRONIC SUPFURA	1 (10%)	1 (10%)	1 (4%) 3 (11%)	1 (3%) 3 (10%)
HEMATCFOIETIC SYSTEM				
#ECNE MARROW Atrophy, nos	(9) 3 (33%)	(10) 7 (70%)	(29) 7 (24 <b>%</b> )	(28) 9 (32%
*SPIEEN HEMATOPOIESIS	(10)	(10)	(29) 4 (14 <b>%</b> )	(30) 11 (37%)
<pre>#MANCIEULAR L. NOCE Hyperplasia, lymphoid</pre>	(1)		(2) 1 (50%)	
<pre>#PESENTFRIC L. NODE CCNGESTICN, NOS</pre>	(1)		(2) 1 (50%)	
CIFCULATORY SYSTEM				
<u>LCDE</u>	18 19 19 19 19 19 19 19 19 19 19 19 19 19 19 19 19 19 19.		in the Q. The strength of the Strength and the statement	

TABLE C2	FEMALE BATS	: NONNEOPLAST	(CONTINUED)
IADLL UZ.	I LIMALL HAID		(COMTIMULD/

	UNTREATED CONTROL	VEHICLE Control	LOW DOSE	HIGH DOSE
DIGESTIVE SYSTEM				
<pre>#LIVER    HENORRHAGE    FIBRCSIS    LIPCIDCSIS    HYFERPLASIA, GRANULOCYTIC</pre>	(10)	(10) 2 (20 <b>%</b> )	(28) 1 (4%) 1 (4%) 1 (4%)	(30)
<pre>#LIVER/CENTFILOBULAR NECROSIS, NOS</pre>	(10)	(10) 1 (10 <b>%</b> )	(28)	(30) 1 (3%)
<pre>#FANCREATIC ACINUS ATROPHY, NOS</pre>	(10)	(10)	(29)	(30) 1 (3%)
IFINAFY SYSTEM				
<pre>#KICNEY INFLAMMATION, CHRONIC</pre>	(10) 1 (10%)	(10) 3 (30%)	(29) 5 (17 <b>%</b> )	(30) 3 (10 <b>%</b>
INDOCFINE SYSTEM				
#ACRENAL ANGIECTASIS	(10)	(10)	(29) 3 (10 <b>%</b> )	(30) 2 (7 <b>%</b> )
REFRCEUCTIVE SYSTEM				
*HAMMARY GLAND CYST, NOS	(10) 3 (30%)	(10) 4 (40%)	(29) 2 ( <b>7%</b> )	(30) 4 (13 <b>%</b>
#UTERUS Abscess, nos Metaplasia, sçuancus	(10)	(10)	(29)	(30) 1 (3%) 1 (3%)
#UTERUS/ENDCHETBIUM INFLAMMATION, SUPPURATIVE INFLAMMATION, CHRONIC SUPPURATIV BYPERPLASIA, CYSTIC		(10) 1 (10%)	(29) 7 (24%) 5 (17%) 1 (3%)	(30) 1 (3%) 2 (7%)
CVARY CYST, NOS INFLAMMATION, CHRONIC SUPPURATIV	(10) 1 (10%)	(10) 1 (10%)	(29)	(30)

\_\_NCNE\_\_\_

\* NUMBER OF ANIMALS WITH TISSUE EXAMINED NICROSCOPICALLY \* NUMBER OF ANIMALS NECROPSIED

	UNTREATED Control		LOW DOSE	HIGH DOSE
FECIAL SENSE OFGANS				
*EYE/CCENEA INFLAMMATICN, CHRONIC	(10)	(10)	(29)	(30) 1 (3
USCULCSKELFTAL SYSTEM				
NCNE				
BCIY CAVITIES				
NCNE				
ALL CTHEF SYSTEMS				
ACIFOSE TISSUE Inflammaticn, Chfonic Necrosis, Fat		1		1 1
SPECIAL MCREFOLOGY SUMMARY				
NC LESION REPORTED Autolysis/NC Necropsy	1		6	1 5

# TABLE C2. FEMALE RATS: NONNEOPLASTIC LESIONS (CONTINUED)

APPENDIX D

## SUMMARY OF THE INCIDENCE OF NONNEOPLASTIC LESIONS

IN MICE ADMINISTERED PHENESTERIN BY GAVAGE

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#### TABLE D1.

#### SUMMARY OF THE INCIDENCE OF NONNEOPLASTIC LESIONS IN MALE MICE ADMINISTERED PHENESTERIN BY GAVAGE (CONTROL GROUPS)

	MID & HIGH DOSE UNTREATED CONTROL	LOW DOSE UNTREATED Control	MID & HIGH DOSE Vehicle Control	LOW DOSE VEHICLE Control 20	
ANIMALS INITIALLY IN STUDY	15	20	15		
NIMALS NECFCESIED	15	20	14	16	
NINALS EXAMINED HISTOFATHOLOGICALLY	15	20	14	16	
INTEGUNENTARY SYSTEM					
NCNE					
RESEIFATCEY SYSTEM					
#TRACHEA	(15)	(19)	(14)	(16)	
INFLAMMATICN, SUFFURATIVE	(13)	4 (21%)	((+))	3 (19%)	
INFLAMMATICN, SUPPORATIVE		1 (5%)		5 (15%)	
INFLAMMATICN, CHRCNIC SUPPURATIV		1 (5%)			
*THNC/RECNERTOTE	(15)	(20)	(14)	1165	
#LUNG/BFCNCHICLE HYPERPLASIA, PLASMA CEIL	(15)	(20) 1 (5%)	(14)	(16) 2 (13%)	
DIFEMPLACIA, FLADAA CEIL		1 (58)		2 (13%	
#IUNG	(15)	(20)	(14)	(16)	
INFLAMMATICN, INTERSTITIAL			2 (14%)		
ERCNCHCFNEUMONIA SUPPURATIVE		10 (50%)		10 (63%)	
ERCNCHOFNEUMONIA CHRONIC SUPFURA		5 (25%)			
HFFATCFOIETIC SYSTEM					
#ECNE MARBON	(14)	(20)	(14)	(16)	
ATROFHY, NOS		•	<u>ີ</u> 1໌(7%)		
#SPIEEN	(15)	(19)	(14)	(16)	
HYPEFPIASIA, LYMEHCID	1 (7%)	• • •			
HEMATCFOIESIS	3 (20%)		3 (21%)		
#IYMEH NCDE	(6)	(18)	(3)	(16)	
HYPERPIASIA, LYMFHOID	,	··-/	~-/	1 (6 <b>%</b> )	
#MESENTFRIC L. NODE	(6)	(18)	(3)	(16)	
CONGESTICN, NOS	(0)	(10)	(3) 1 (33 <b>%</b> )	(10)	
INFLAMMATICN, ACUTE/CHRONIC			1 (33%)		

# NUMEER OF ANIMALS WITH TISSUE EXAMINED MICROSCOPICALLY \* NUMEER OF ANIMALS NECROPSIED

	MID & HIGH DOSE Untreated Control	LOW DOSE UNTREATED CONTROL	MID & HIGH DOSE VEHICLE CONTROL	LOW DOS Vehicle Contro
HYPERPLASIA, LYMEHCID Hematopoiesis	1 (17%) 1 (17%)			
<pre>#INGUINAL LYMPH NODE INFLAMMATION, CHRONIC HYPERPLASIA, LYMFHOID</pre>	(6) 1 (17%) 1 (17%)	(18)	(3)	(16)
TIFCULATORY SYSTEM				
<pre>#HYOCARCIUM MINERALIZATICN INFLAMMATICN, SUPPURATIVE INFLAMMATICN, CHRONIC DIFFUSE INFLAMMATICN, CHRONIC SUPPURATIV DEGENERATION, GRANULAR</pre>	(15)	(20) 1 (5%) 3 (15%) 1 (5%) 2 (10%) 4 (20%)	(14)	(16) 1 (6%) 1 (6%)
DIGESTIVE SYSTEM				
<pre>#IIVER    CYTOLOGIC DEGENERATICN    HYPERELASIA, NODULAR    HYPERPIASIA, LYMFHCID    HEMATOFOIESIS</pre>	(15)	(19) 6 (32%) 3 (16%)	(14) 1 ( <b>7%</b> )	(16) 2 (13%) 1 (6%)
<pre>#LIVER/CENTRILOEULAB NECRCSIS, NOS</pre>	(15) 1 (7%)	(19)	(14)	(16)
JEINAEY SYSTER				
<pre>#KIDNEY HYDRONEPEROSIS INFLAMMATICN, CHRONIC INFLAMMATICN, CHRONIC FOCAL</pre>	(15) 2 (13%)	(19) 1 (5%)	(14)	(16) 1 (6%)
*KICNEY/MECULLA AIROPHY, NOS	(15) 1 (7%)	(19)	(14)	(16)
#UFINARY PLADDER INFLAMMATION, CHRCNIC	(15)	(19)	(14) 1 (7%)	(16)
INECCFINE SYSTEM				
#FANCFFATIC ISLFTS <u>Hyferplasia, diffuse</u>	(15)	(18) 1 (6 <b>%</b> )	(14)	(16)

# TABLE D1. MALE MICE (CONTROL GROUPS): NONNEOPLASTIC LESIONS (CONTINUED)

# NUMEER OF ANIMALS WITH TISSUE EXAMINED MICROSCOPICALLY \* NUMEER OF ANIMALS NECROPSIED

	MID & HIGH DOSE UNTREATED CONTROL	LOW DOSE UNTREATED CONTROL	MID & HIGH DOSE VEHICLE CONTROL	LOW DOSE VEHICLE CONTROL
REFFCEUCTIVE SYSTEM				
NONE				
NEFVCUS SYSTEM				
<b>BCNE</b>				
SFECIAL SENSE CEGANS				
*FIDDIE BAR INPLANMATION, CHRONIC SUPPURATIV	(15)	(20) 1 (5 <b>%</b> )	(14)	(16) 2 (13 <b>%</b> )
NOSCOLCSKELETAL SYSTEM				
*JCINT EXOSTOSIS	(15)	(20) 1 (5%)	(14)	(16)
ECTY CAVITIES				
BC BE	*			
ALL CTHEF SYSTEMS				
HYDERDIASTA TYMEHOTO	(15)	(20)	(14) 1 (7%)	(16)
SPICIAL MOPEHOLOGY SUMMARY				
NC LESION REPORTED Accidental death Autolysis/No Necropsy	5		5	2 4

# TABLE D1. MALE MICE (CONTROL GROUPS): NONNEOPLASTIC LESIONS (CONTINUED)

#### TABLE D2.

#### SUMMARY OF THE INCIDENCE OF NONNEOPLASTIC LESIONS IN MALE MICE **ADMINISTERED PHENESTERIN BY GAVAGE (CONTROL GROUPS)**

	LOW DOS	E	MID D	DSE	HIGH DO	ISE
ANIPAIS INITIALLY IN STUDY	40		35		35	
NIMALS MISSING					2	
NIMALS NECROPSIED	40		29		25	
NNIMAIS EXAMINED HISTOFATHOLOGICALLY	40		29		25	
NIEGUMENTARY SYSIEM						
*SKIN	(40)		(29)		(25)	
INFLAMMATION, FIBRINOUS		(3%)	(2))		()	
DICER, CHRGNIC		(3%)				
HYPERKERATCSIS	•		1	(3%)		
ACANTHOSIS				(3%)		
*SUBCUT TISSUE	(40)		(29)		(25)	
HEMORRHAGE			1	(3%)		
INFLAMMATION, CHRONIC SUPPURATIV	3	(8%)				
RESFIFATORY SYSTEM						
#TFACHEA	(39)		(29)		(25)	
INFLAMMATION, SUPPORATIVE	3	(8%)				
INFLAMMATICN, CHRONIC SUPPURATIV	1	(3%)				
#IUNG/ERCNCHIOLE	(40)		(29)		(25)	
FIBROSIS				(3%)		
HYFERFLASIA, LYMPHOID			1	(3%)		
#IUNG	(40)		(29)		(25)	
INFLAMMATION, INTERSTITIAL			2	(7%)		
FNEUMONIA, LIPID					1	(4
ERCNCHOFNEUMONIA SUPPURATIVE				17.00		
ERCNCHOFNEUMONIA CHRONIC SUFFURA	1	(3%)	1	(3%)	-	
CHCLESTERCL DEFOSIT						(4
IEMATOFOIFTIC SYSTEM						
#ECNE MARROW	(39)		(28)		(24)	
CONGESTION, NOS ATROPHY, NCS						(8

# NUMEER OF ANIMALS WITH TISSUE EXAMINED NICROSCOPICALLY \* NUMEER OF ANIMAIS NECROPSIED

	LOW DOSE	MID DOSE		
HYPERPLASIA, NEUIROPHILIC			1 (4%)	
#SPLEEN	(40)	(29)	(25)	
HYPERPLASIA, NEUTROPHILIC HEMATOFOIESIS		5 (17%)	1 (4%) 5 (20%	
#MESENTERIC L. NODE	(35)	(4)		
INFLAMMATION, SUFFURATIVE Hyperplasia, lymphoid	1 (3%)	2 (50%)		
IFCULATCRY SYSTEM				
#BYCCARDIUM	(40)	(29)	(25)	
INFLAMMATION, SUPPURATIVE	1 (3%)	• •		
<pre>#BICCARDION INFLAMMATION, SUPPURATIVE INFLAMMATION, CHRONIC SUPPURATIV NECRCSIS, COAGULATIVE</pre>	1 (3%) 1 (3%)			
DIGESTIVE SYSTEM				
<b>\$LIVER</b>	(39)	(29)	(25)	
HEMORRHAGE	1 (3%)	2 (74)		
KECRCSIS, NOS NECROSIS, COAGULATIVE	4 (10%)	2 (7%)		
ANGIECTASIS	1 (3%)	1 (3%)		
HEMATOFOIESIS			1 (4%)	
#LIVER/CENTFILOBULAR	(39)	(29)	(25)	
NECROSIS, NOS		1 (3%)		
NECROSIS, COAGULATIVE	1 (3%)			
JFINABY SYSTEM				
#KIENEY INPLANMATION, CHECNIC	1 (3%)	(29)		
ENCCCBINE SYSTEM				
NCNE				
REFACEDCIIVE SYSTEM				

# TABLE D2. MALE MICE (TREATED GROUPS): NONNEOPLASTIC LESIONS (CONTINUED)

# NUMBER OF ANIMALS WITH TISSUE EXAMINED MICROSCOPICALLY \* NUMBER OF ANIMALS NECROPSIED

### TABLE D2. MALE MICE (TREATED GROUPS): NONNEOPLASTIC LESIONS (CONTINUED)

	LOW DOSE	MID DOSE	HIGH DOSE
IFFVCUS SYSTEM			
NCNE			
FECIAL SENSE CRGANS			
NCNE			
USCUICSKEIFTAL SYSTEM			
NCNE			
CLY CAVITIES			
*PERITONEUM INFLAMMATICN, HEMORRHAGIC INFLAMMATICN, CHRONIC SUPPURATIV NECROSIS, FAT	(40) 2 (5%) 1 (3%)	(29)	(25) 1 (4%)
*FLFURA INFLAMMATICN, CHRONIC SUPPURATIV	(40) 1 (3%)	(29)	(25)
II CTHEF SYSTEMS			
NCNE			
FECIAL PEFFECEGY SUMMARY			
NC LESION FEFORTED ANIMAL MISSING/NC NECROPSY ACCIDENTAL DEATH NC NECROFSY PERPORMED AUTO/NECFOFSY/HISIC FERP AUTOLYSIS/NO NECROPSY		4 1 1 5	2 2 2 1

~

### TABLE D3.

# SUMMARY OF THE INCIDENCE OF NONNEOPLASTIC LESIONS IN FEMALE MICE **ADMINISTERED PHENESTERIN BY GAVAGE (CONTROL GROUPS)**

MID & HIGH DOSE UNTREATED CONTROL	LOW DOSE UNTREATED CONTROL	MID & HIGH DOSE Vehicle Control	LOW DOSE Vehicle Control
15	20	15	20
			20
15	20	15	20
(15)	(20)	(15)	(20)
	1 (5%)		
(15)	(20)	(15)	(20)
	3 (15%)		2 (10%
	1 (5%)		1 (5%)
(15)	(20)	(15)	(20)
	1 (5%)		
(15)	(20)	(15)	(20)
1 (78)	9 (45%)	1 (70)	3 (15% 2 (10%
1 (7%)		1 (7%)	2 (10%
(15)	(20)	(15)	(20)
1 (7%)	1 (5%)	1 (7%)	1 (5%)
		1 (7%)	9 (45%
			1 (5%)
			1 (5%)
(13)	(20)	(14)	(18)
3 (23%)		3 (21%)	
(15)	(20)	(15)	(19)
1 (7%)		1 (7%)	
	$ \begin{array}{c} 15\\15\\15\\(15)\\(15)\\(15)\\(15)\\1&(7\%)\\(15)\\1&(7\%)\\(13)\\3&(23\%)\end{array} $	$ \begin{array}{cccccccccccccccccccccccccccccccccccc$	$\begin{array}{cccccccccccccccccccccccccccccccccccc$

# NUMBER OF ANIMALS WITH TISSUE FXAMINED MICROSCOPICALLY \* NUMBER OF ANIMALS NECROPSIED

	MID & HIGH DOSE UNTREATED CONTROL	LOW DOSE UNTREATED CONTROL	MID & HIGH DOSE VEHICLE CONTROL	LOW DOSI Vehicle Controi
CIGÉSTIVE SYSTEM				
#LIVER HEMORRHAGE NECRCSIS, CCAGULATIVE	(15)	(19)	(15)	(20) 1 (5%) 1 (5%)
HYPERPIASIA, LYMFHCID		1 (5%)		1 (5%)
DFINAFY SYSTEM				
*KICNEY Hyperplasia, lymfhoid	(15)		(15) 1 (7 <b>%</b> )	(19)
NICCFINE SYSTEM				
#FITUITARY HEMORRHACE	(14)	(17)	(15)	(14) 1 (7%)
# ACRENAL HEMORRHAGE	(15)		(15)	(20) 1 (5%)
REFFCENCTIVE SYSTEM				
<pre>#UTERUS/ENDCMETRIUM INFLAMMATICN, SUPFURATIVE UNDERSTON, SUPFURATIVE</pre>	(15) 13 (87%)	(20) 1 (5%)	(15)	(20)
HYPERPIASIA, CYSTIC #CVAFY CYST, NOS	(15)	(20)	(15) 1 (7%)	(20)
IEFVCUS SYSTEM				
#EFAIN FFIDERMAL INCLUSION CYST	(15)	(20) 1 (5%)	(15)	
FECIAL SENSE OFGANS				
NCNE				
NUSCUICSKEIETAI SYSTEM				

# TABLE D3. FEMALE MICE (CONTROL GROUPS): NONNEOPLASTIC LESIONS (CONTINUED)

NUMEER OF ANIMALS WITH TISSUE EXAMINED MICROSCOPICALLY
 NUMEER OF ANIMALS NECROPSIED

		LOW DOSE UNTREATED CONTROL	MID & HIGH DOSE VEHICLE CONTROL	LOW DOSE VEHICLE CONTROL
ECTY CAVITIES				
*FFRITCNEUM INFLAMMATION, CHRONIC	(15)	(20) 1 (5%)	(15)	(20)
INFLAMMATION, CHRONIC DIFFUSE NECROSIS, PAT	1 (7%)			1 (5%) 1 (5%)
ALL CIHER SYSTEMS				
*MOITIFLE CEGANS Hyferpiasia, flasma cell Hyperpiasia, reticulum cell Hyferpiasia, lymfhoid	(15)	(20) 1 (5%) 1 (5%) 1 (5%)	(15)	(20)
ACIFCSE TISSUE INFLAMMATICN, CHRONIC FOCAL		1		2
SPECIAL FOREBOLOGY SUBMARY				
NC IFSION REFORTED	1	1		3

# TABLE D3. FEMALE MICE (CONTROL GROUPS): NONNEOPLASTIC LESIONS (CONTINUED)

NUMEER OF ANIMALS NECROFSIED

# TABLE D4.

### SUMMARY OF THE INCIDENCE OF NONNEOPLASTIC LESIONS IN FEMALE MICE **ADMINISTERED PHENESTERIN BY GAVAGE (TREATED GROUPS)**

	LOW DOSE	MID DOSE	HIGH DOSE
NIMALS INITIALLY IN STUDY	40	35	35
NIMAIS NECECESIED NIMALS EXAMINED HISTOFATHOLOGICALLY	38 38	27 2 <b>7</b>	32 31
NTEGUMENTAFY SYSTEM			
*SUECUT TISSUE	(38)	(27)	(32)
HEMATOMA, NOS	1 (3%)		
ESFIBATCRY SYSTEM			
#TRACHEA	(38)	(27)	(30)
INPLAMMATION, SUPFURATIVE Plasma-cell infiltrate	3 (8%) 1 (3%)		
#IUNG/ERCNCHIOLE	(38)	(27)	(31)
HYPERPIASIA, PLASMA CELL	3 (8%)	(2.)	(0.)
#IUNG	(38)	(27)	(31)
CONGESTICN, NOS HEMORRHAGE		1 (4%) 1 (4%)	
INFLAMMATICN, INTERSTITIAL		1 (4%)	
FNEUMCHIA, LIFID			1 (3%)
ERCNCHCENEUMONIA SUPPURATIVE	5 (13%)		
PNEUMONIA INTERSTITIAL CHRONIC Ercnchceneumonia chronic supeura	1 (3%)	8 (30%)	
CHOLESTERCL DEPOSIT		• (••••,	1 (3%)
ALVECLAR MACROFHAGES		1 (4%)	
ENATOPCIETIC SYSTEM			
*ECNE MARFOW	(38)	(27)	(28)
CONGESTION, NOS		6 (22)	2 (7%) 14 (50%)
ATROPHY, NOS Hyperplasia, neutrophilic		6 (22%) 2 (7%)	14 (50%)
#SPIEEN	(38)	(27)	(30)
<u>CONTRACTORE</u>			1 (3%)

# NUMEER OF ANIMALS WITH TISSUE EXAMINED MICFOSCOPICALLY \* NUMEER OF ANIMALS NECROPSIED

	LOW DOSE	MID DOSE	HIGH DOSE
HYPERPLASIA, NEUTROPHILIC HEMATOFOIESIS		2 (7%) 6 (22%)	3 (10%)
SPLENIC FOLLICLES ATROPHY, NOS	(38)	(27)	(30) 1 (3%)
<pre>#FESENTERIC L. NODE Hyperplasia, neutrophilic Hyperplasia, lymehoid</pre>	(36) 1 (3%)	(4) 1 (25%)	(2)
TIFCULATORY SYSTEM			
NCNE			
CIGESTIVE SYSTEM			
#IIVER FEMORRHAGE INFLAMMATICN, CHRONIC SUPPURATIV DECRCSIS, NOS	(37) 1 (3%) 1 (3%) 1 (3%)	(27)	(30)
NECROSIS, MIDZCNAI CYTCLCGIC DEGENERATION Hyderplasia, nodular Angifctasis	1 (3%) 1 (3%)		1 (3%) 1 (3%)
<pre>#LIVER/CENTFILOEULAR NECRCSIS, NOS NECRCSIS, COAGULATIVE</pre>	(37) 3 (8%)	(27)	(30) 1 (3%)
UFINARY SYSTEM #KIENEY INPLANMATION, CHRONIC Afficidosis	(38) 1 (3%) 1 (3%)	(27)	(30)
ENCOCHINE SYSTEM			
) C NE			
REFACEUCTIVE SYSTEM			
#CTIBUS CONGESTICN, NOS	(38)	(27)	(30) 1 (3 <b>%</b> )

### TABLE D4. FEMALE MICE (TREATED GROUPS): NONNEOPLASTIC LESIONS (CONTINUED)

99

\* NUMEER OF ANIMALS NECROPSIED

#### TABLE D4. FEMALE MICE (TREATED GROUPS): NONNEOPLASTIC LESIONS (CONTINUED)

LOW DOSE MID DOSE HIGH DOSE (37) (30) #CVARY (27) 1 (3%) 1 (3%) 2 (7%) CYST, NOS CONGESTION, NOS 9 (24%) HEMORRHAGE INFLAPPATICN, SUFFURATIVE 1 (4%) -----\_\_\_\_\_ NEEVCUS SYSTEM NCNE SFECIAL SENSE CRGANS (38) 1 (3%) \*EYF/COFNEA (27) (32) INFLAMMATION, SUFPURATIVE MUSCUICSKEIFTAL SYSTEM MC N F -----ECEY CAVITIES \*FEFITCNEUM (27) (32) (38) 1 (3%) 1 (3%) FEMCFRHAGE INFLAMMATICN, SUFFURATIVE INFLAMMATICN, CHRONIC NECROSIS, FAT 1 (3%) 1 (3%) -----. . . . . . . . ALL CIFER SYSTEMS ACIFCSE TISSUE INFLAMMATICN, CHRONIC 1 INFLAMMATION, CHRONIC SUPPURATIV 1 ----------SFECIAL MCFEFOLOGY SUMMARY NC LESICN REFORTED 3 ACCIDENTAL DEATH 2 1 NECROFSY FERFANO HISTO PERFORMED # NUMBER OF ANIMALS WITH TISSUE EXAMINED MICROSCOPICALLY \* NUMEER OF ANIMALS NECROFSIED

# TABLE D4. FEMALE MICE (TREATED GROUPS): NONNEOPLASTIC LESIONS (CONTINUED)

	LOW DOSE	MID DOSE	HIGH DOSE		
NC NECROFSY FERFORMED AUTOLYSIS/NC NECRCFSY	 1 1	6	2		
<ul> <li>NUMEER OF ANIMALS WITH TISSUE</li> <li>NUMEER OF ANIMALS NECROPSIED</li> </ul>	FXAMINED MICFOSCO	PICALLY			

APPENDIX E

# ANALYSES OF THE INCIDENCE OF PRIMARY TUMORS IN

#### RATS ADMINISTERED PHENESTERIN BY GAVAGE

	Pooled	Vehicle	Low	High
Topography: Morphology	<u>Control</u>	Control	Dose	Dose
Hematopoietic System:				
Granulocytic Leukemia <sup>b</sup>	0/18 (0)	0/9 (0)	0/32 (0)	2/30 (7)
P Value <sup>c,d</sup>	N.S.	N•S•	N•S•	N.S.
Relative Risk (Pooled Control) <sup>f</sup>				Infinite
Lower Limit				0.186
Upper Limit				Infinite
Relative Risk (Vehicle Control) <sup>f</sup>				Infinite
Lower Limit				0.100
Upper Limit				Infinite
Weeks to First Observed Tumor				37
Hemeteredetic Greekens Nelienert				
Hematopoietic System: Malignant				
Lymphoma or Lymphocytic Leukemia <sup>b</sup>	0/18 (0)	0/9 (0)	2/32 (6)	3/30 (10)
Leukemia	0/10 (0)	073 (0)	2/32 (0)	5/50 (10)
P Valuesc,d	N.S.	N.S.	N.S.	N.S.
Relative Risk (Pooled Control) <sup>f</sup>			Infinite	Infinite
Lower Limit			0.174	0.379
Upper Limit			Infinite	Infinite
Relative Risk (Vehicle Control) <sup>f</sup>			Intinite	Intinite
Relative Risk (Vehicle Control) <sup>f</sup> Lower Limit			Infinite 0.093	Infinite 0.204
Relative Risk (Vehicle Control) <sup>f</sup> Lower Limit Upper Limit			Infinite 0.093 Infinite	

(continued)	Pooled	Vehicle	Low	High
Topography: Morphology	<u>Control</u>	<u>Control</u>	Dose	Dose
Hematopoietic System: Lymphoma or Leukemia <sup>b</sup>	0/18 (0)	0/9 (0)	2/32 (6)	5/30 (17)
P Values <sup>c,d</sup>	P = 0.037	N.S.	N•S•	N.S.
Relative Risk (Pooled Control) <sup>f</sup> Lower Limit Upper Limit			Infinite 0.174 Infinite	Infinite 0.798 Infinite
Relative Risk (Vehicle Control)f Lower Limit Upper Limit			Infinite 0.093 Infinite	Infinite 0.430 Infinite
Weeks to First Observed Tumor	······································		75	37
Pituitary: Chromophobe Adenoma <sup>b</sup>	0/18 (5)	0/9 (0)	2/29 (7)	0/29 (0)
P Values <sup>c,d</sup>	N•S•	N.S.	N.S.	N.S.
Relative Risk (Pooled Control) <sup>f</sup> Lower Limit Upper Limit			Infinite 0.192 Infinite	
Relative Risk (Vehicle Control) <sup>f</sup> Lower Limit Upper Limit			Infinite 0.103 Infinite	  
Weeks to First Observed Tumor			73	

(continued)	Pooled	Vehicle	Low	High
Topography: Morphology	<u>Control</u>	<u>Control</u>	Dose	Dose
Pituitary: Chromophobe Adenoma				
or Carcinoma <sup>b</sup>	1/18 (6)	1/9 (11)	3/29 (10)	0/29 (0)
P Values <sup>c,d</sup>	N.S.	N•S•	N.S.	N.S.
Relative Risk (Pooled Control) <sup>f</sup>			1.862	0.000
Lower Limit			0.167	0.000
Upper Limit			94.142	11.440
Relative Risk (Vehicle Control) <sup>f</sup>			0.931	0.000
Lower Limit			0.093	0.000
Upper Limit			47.120	5.736
Weeks to First Observed Tumor	······································		73	
Ear Canal: Squamous-cell				
Papilloma <sup>b</sup>	0/18 (0)	0/9 (0)	2/32 (6)	0/30 (0)
P Values <sup>c,d</sup>	N.S.	N.S.	N.S.	N.S.
Relative Risk (Pooled Control) <sup>f</sup>			Infinite	
Lower Limit			0.174	
Upper Limit			Infinite	
Relative Risk (Vehicle Control) <sup>f</sup>			Infinite	
Lower Limit			0.093	
Upper Limit			Infinite	
Weeks to First Observed Tumor			49	

	Pooled	Vehicle	Low	High
Topography: Morphology	Control	<u>Control</u>	Dose	Dose
All Sites: Sarcoma <sup>b</sup>	1/18 (6)	0/9 (0)	7/32 (22)	4/30 (13)
P Values <sup>c,d</sup>	N.S.	N•S•	N.S.	N.S.
Relative Risk (Pooled Control	)f		3.938	2.400
Lower Limit			0.579	0.268
Upper Limit			170.622	113.825
Relative Risk (Vehicle Contro	1)f		Infinite	Infinite
Lower Limit			0.621	0.315
Upper Limit			Infinite	Infinite
Weeks to First Observed Tumor			50	41

<sup>a</sup>Dosed groups received 5 or 10 mg/kg.

<sup>b</sup>Number of tumor-bearing animals/number of animals examined at site (percent).

<sup>C</sup>Beneath the incidence of tumors in a control group is the probability level for the Cochran-Armitage test when P < 0.05, otherwise, not significant (N.S.) is indicated. Beneath the incidence of tumors in a dosed group is the probability level for the Fisher exact test for the comparison of that dosed group with the vehicle-control group (\*) or with the pooledcontrol group (\*\*) when P < 0.05 for either control group; otherwise, not significant (N.S.) is indicated.

#### (continued)

 $d_A$  negative trend (N) indicates a lower incidence in a dosed group than in a control group.

<sup>e</sup>The probability level for departure from linear trend is given when P < 0.05 for any comparison.

<sup>f</sup>The 95 percent confidence interval of the relative risk between each dosed group and the specified control group.

	Pooled	Vehicle	Low	High
Topography: Morphology	Control	<u>Control</u>	Dose	Dose
Hematopoietic System:				
Granulocytic Leukemia <sup>b</sup>	0/18 (0)	0/10 (0)	2/29 (7)	1/30 (3)
P Values <sup>c</sup> ,d	N.S.	N•S•	N.S.	N•S•
Relative Risk (Pooled Control) <sup>f</sup>			Infinite	Infinite
Lower Limit			0.192	0.033
Upper Limit			Infinite	Infinite
Relative Risk (Vehicle Control) <sup>f</sup>			Infinite	Infinite
Lower Limit			0.113	0.019
Upper Limit			Infinite	Infinite
Weeks to First Observed Tumor			46	50
Hematopoietic System: Lymphoma				
or Leukemia <sup>b</sup>	0/18 (0)	0/10 (0)	2/29 (7)	2/30 (7)
P Values <sup>c</sup> ,d	N.S.	N.S.	N.S.	N.S.
Relative Risk (Pooled Control) <sup>f</sup>			Infinite	Infinite
Lower Limit			0.192	0.186
Upper Limit			Infinite	Infinite
Relative Risk (Vehicle Control) <sup>f</sup>			Infinite	Infinite
Lower Limit			0.113	0.109
Upper Limit			Infinite	Infinite
Weeks to First Observed Tumor			46	50

(continued) Topography: Morphology	Pooled Control	Vehicle Control	Low <u>Dose</u>	High Dose
Pituitary: Chromophobe Adenoma <sup>b</sup>	10/16 (63)	6/10 (60)	4/27 (15)	0/30 (0)
P Valuesc,d	P < 0.001(N)	P < 0.001(N)	P = 0.012*(N) P = 0.002**(N)	• •
Relative Risk (Pooled Control) <sup>f</sup> Lower Limit Upper Limit			0.237 0.076 0.673	0.000 0.000 0.169
Relative Risk (Vehicle Control)f Lower Limit Upper Limit			0.247 0.083 0.843	0.000 0.000 0.194
Weeks to First Observed Tumor		64	71	<b></b>
Mammary Gland: Adeno- carcinoma, NOS <sup>b</sup>	1/18 (6)	1/10 (10)	12/29 (41)	12/30 (40)
P Values <sup>c,d</sup>	P = 0.019	N.S.	P = 0.007 * *	P = 0.009 * *
Relative Risk (Pooled Control) <sup>f</sup> Lower Limit Upper Limit			7.448 1.284 300.235	7.200 1.239 291.162
Relative Risk (Vehicle Control) <sup>f</sup> Lower Limit Upper Limit			4.138 0.780 166.921	4.000 0.753 161.888
Weeks to First Observed Tumor		84	26	33

(continued)				
Topography: Morphology	Pooled <u>Control</u>	Vehicle Control	Low Dose	High <u>Dose</u>
Mammary Gland: Fibroadenoma <sup>b</sup>	8/18 (44)	4/10 (40)	21/29 (72)	11/30 (37)
P Values <sup>c,d</sup>	N.S.	N.S.	N.S.	N.S.
Departure from Linear Trend <sup>e</sup>	P = 0.008	P = 0.009		
Relative Risk (Pooled Control) <sup>f</sup>			1.629	0.825
Lower Limit			0.923	0.392
Upper Limit			3.090	1.942
Relative Risk (Vehicle Control) $^{f}$			1.810	0.917
Lower Limit			0.882	0.387
Upper Limit			5.317	3.277
Weeks to First Observed Tumor		64	60	42
Uterus: Endometrial Stromal				
Polyp <sup>b</sup>	1/17 (6)	1/10 (10)	5/29 (17)	2/30 (7)
P Values <sup>c,d</sup>	N.S.	N.S.	N.S.	N.S.
Relative Risk (Pooled Control) <sup>f</sup>			2,931	1.133
Lower Limit			0,375	0.065
Upper Limit			133.079	64.588
Relative Risk (Vehicle Control) <sup>f</sup>			1.724	0.667
Lower Limit			0.240	0.041
Upper Limit			78.324	38.024
Weeks to First Observed Tumor		85	67	69

	Pooled	Vehicle	Low	High
Topography: Morphology	Control	Control	Dose	Dose
All Sites: Sarcoma <sup>b</sup>	0/18 (0)	0/10 (0)	2/29 (7)	4/30 (13)
P Values <sup>c,d</sup>	N•S•	N.S.	N.S.	N.S.
Relative Risk (Pooled Control	)ť		Infinite	Infinite
Lower Limit			0.192	0.585
Upper Limit			Infinite	Infinite
Relative Risk (Vehicle Contro	1) <sup>f</sup>		Infinite	Infinite
Lower Limit			0.113	0.345
Upper Limit			Infinite	Infinite
Weeks to First Observed Tumor			60	34

aDosed groups received 5 or 10 mg/kg.

<sup>b</sup>Number of tumor-bearing animals/number of animals examined at site (percent).

<sup>C</sup>Beneath the incidence of tumors in a control group is the probability level for the Cochran-Armitage test when P < 0.05, otherwise, not significant (N.S.) is indicated. Beneath the incidence of tumors in a dosed group is the probability level for the Fisher exact test for the comparison of that dosed group with the vehicle-control group (\*) or with the pooledcontrol group (\*\*) when P < 0.05 for either control group; otherwise, not significant (N.S.) is indicated.

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(continued)

 $d_A$  negative trend (N) indicates a lower incidence in a dosed group than in a control group.

<sup>e</sup>The probability level for departure from linear trend is given when P < 0.05 for any comparison.

<sup>f</sup>The 95 percent confidence interval of the relative risk between each dosed group and the specified control group.

APPENDIX F

ANALYSES OF THE INCIDENCE OF PRIMARY TUMORS IN . MICE ADMINISTERED PHENESTERIN BY GAVAGE

١ (

	Low-Dose	
	Vehicle	Low
Topography: Morphology	<u>Control</u>	Dose
Lung: Alveolar/Bronchiolar Carcinoma <sup>b</sup>	0/16 (0)	14/40 (35)
P Values <sup>c,d</sup>		P = 0.004
Relative Risk (Low-Dose Control) <sup>e</sup>		Infinite
Lower Limit		1.857
Upper Limit		Infinite
Weeks to First Observed Tumor		68
Lung: Alveolar/Bronchiolar Adenoma		
or Carcinoma <sup>b</sup>	2/16 (13)	18/40 (45)
P Values <sup>c,d</sup>		P = 0.020
Relative Risk (Low <b>-</b> Dose Control) <sup>e</sup>		3.600
Lower Limit		1.037
Upper Limit		29.336
Weeks to First Observed Tumor	77	68

Table Fl.	Analyses of the Incidence of Primary Tumors in Low-Dose
	Male Mice Administered Phenesterin by Gavage <sup>a</sup>

(continued)		
Topography: Morphology	Low-Dose Vehicle Control	Low Dose
Hematopoietic System: Malignant Lymphoma or Lymphocytic Leukemia <sup>b</sup>	1/16 (6)	10/40 (25)
P Values <sup>c,d</sup>		N•S•
Relative Risk (Low-Dose Control) <sup>e</sup> Lower Limit Upper Limit		4.000 0.662 168.059
Weeks to First Observed Tumor	32	49
Hematopoietic System: Lymphoma or Leukemia <sup>b</sup>	1/16 (6)	11/40 (28)
P Values <sup>c,d</sup>		N•S•
Relative Risk (Low-Dose Control) <sup>e</sup> Lower Limit Upper Limit		4.400 0.745 183.149
Weeks to First Observed Tumor	32	49

(continued)		
Topography: Morphology	Low-Dose Vehicle <u>Control</u>	Low Dose
Liver: Hepatocellular Adenoma <sup>b</sup>	3/16 (19)	7/39 (18)
P Values <sup>c,d</sup>		N•S•
Relative Risk (Low-Dose Control) <sup>e</sup> Lower Limit Upper Limit		0.957 0.261 5.237
Weeks to First Observed Tumor	56	76
Liver: Hepatocellular Carcinoma <sup>b</sup>	0/16 (0)	3/39 (8)
P Values <sup>c,d</sup>		N•S•
Relative Risk (Low <del>-</del> Dose Control) <sup>e</sup> Lower Limit Upper Limit		Infinite 0.261 Infinite
Weeks to First Observed Tumor		73

Table Fl.	Analyses of the Incidence of Primary Tumors in Low-Dose
	Male Mice Administered Phenesterin by Gavage <sup>a</sup>

(continued)		
Topography: Morphology	Low-Dose Vehicle <u>Control</u>	Low Dose
Liver: Hepatocellular Adenoma or Carcinoma <sup>b</sup>	3/16 (19)	10/39 (26)
P Values <sup>c</sup> ,d		N•S•
Relative Risk (Low-Dose Control) <sup>e</sup> Lower Limit Upper Limit		1.368 0.425 7.013
Weeks to First Observed Tumor	56	73
Myocardium: Sarcoma, NOS <sup>b</sup>	0/16 (0)	5/40 (13)
P Values <sup>c</sup> ,d		N•S•
Relative Risk (Low-Dose Control) <sup>e</sup> Lower Limit Upper Limit		Infinite 0.535 Infinite
Weeks to First Observed Tumor	وی کی مرب می این می	78

Table Fl.	Analyses of the Incidence of Primary Tumors in Low-Dose
	Male Mice Administered Phenesterin by Gavage <sup>a</sup>

(continued)			
Topography: Morphology	Low-Dose Vehicle <u>Control</u>	Low Dose	
All Sites: Hemangiosarcoma <sup>b</sup>	0/20 (0)	6/40 (15)	
P Values <sup>c</sup> ,d		N•S•	
Relative Risk (Low-Dose Control) <sup>e</sup> Lower Limit Upper Limit		Infinite 0.835 Infinite	
Weeks to First Observed Tumor		78	

121

<sup>a</sup>Dosed group received 7 mg/kg.

<sup>b</sup>Number of tumor-bearing animals/number of animals examined at site (percent).

<sup>C</sup>Beneath the incidence of tumors in the dosed group is the probability level for the Fisher exact test for the comparison of the dosed group with the vehicle-control group when P < 0.05; otherwise, not significant (N.S.) is indicated.

 $^{d}A$  negative trend (N) indicates a lower incidence in the dosed group than in the control group.

<sup>e</sup>The 95 percent confidence interval of the relative risk between the dosed group and the control group.

Topography: Morphology	Mid- and High-Dose Pooled <u>Control</u>	Mid- and High-Dose Vehicle <u>Control</u>	Mid Dose	High <u>Dose</u>
Lung: Alveolar/Bronchiolar Adenoma <sup>b</sup>	2/28 (7)	0/14 (0)	6/29 (21)	2/25 (8)
P Values <sup>c,d</sup>	N.S.	N.S.	N.S.	N.S.
Departure from Linear Trend <sup>e</sup>		P = 0.038		
Relative Risk (Pooled Control) <sup>f</sup> Lower Limit Upper Limit			2.897 0.575 27.279	1.120 0.087 14.392
Relative Risk (Vehicle Control) <sup>f</sup> Lower Limit Upper Limit			Infinite 0.833 Infinite	Infinite 0.177 Infinite
Weeks to First Observed Tumor			71	73

(continued)				
	Mid- and	Mid- and		
	High-Dose	High-Dose		
	Pooled	Vehicle	Mid	High
Topography: Morphology	<u>Control</u>	Control	Dose	Dose
Hematopoietic System:				
Lymphoma or Leukemia <sup>b</sup>	0/28 (0)	0/14 (0)	9/29 (31)	11/25 (44)
P Values <sup>c,d</sup>	P < 0.001	P = 0.005	P = 0.018*	P = 0.003*
			P = 0.001 * *	P < 0.001 **
Relative Risk (Pooled Control) <sup>f</sup>			Infinite	Infinite
Lower Limit			2.616	3.859
Upper Limit			Infinite	Infinite
Relative Risk (Vehicle Control) <sup>f</sup>			Infinite	Infinite
Lower Limit			1.372	2.023
Upper Limit			Infinite	Infinite
Weeks to First Observed Tumor			32	49

(continued)		Mid- and	Mid- and		
		Mid- and High-Dose	High-Dose		
		Pooled	Vehicle	Mid	High
Topography:	Morphology	Control	Control	Dose	Dose
iopography.	Morphorogy	CONCION	CONCLOT	DOSE	DUSE
Myocardium:	Sarcoma, NOS <sup>b</sup>	0/28 (0)	0/14 (0)	7/29 (24)	2/25 (8)
P Value <sup>c,d</sup>		N.S.	N.S.	P = 0.048*	N.S.
				P = 0.006 * *	
Rolativo Ric	k (Pooled Control) <sup>f</sup>			Infinite	Infinite
	Lower Limit			1.928	0.339
	Upper Limit			Infinite	Infinite
	opper Limit			Infinite	THETHTCE
Relative Ris	k (Vehicle Control) <sup>f</sup>			Infinite	Infinite
	Lower Limit			1.012	0.177
	Upper Limit			Infinite	Infinite
Weeks to Fir	st Observed Tumor			48	57
All Sites:	Hemangiosarcomab	0/28 (0)	0/14 (0)	1/29 (3)	3/25 (12)
P Values <sup>c,d</sup>		P = 0.046	N•S•	N•S•	N.S.
Relative Ris	k (Pooled Control) <sup>f</sup>			Infinite	Infinite
	Lower Limit			0.053	0.691
	Upper Limit			Infinite	Infinite
Relative Ris	k (Vehicle Control) <sup>f</sup>			Infinite	Infinite
	Lower Limit			0.027	0.362
	Upper Limit			Infinite	Infinite
	st Observed Tumor			74	66

	Mid- and High-Dose Pooled	Mid- and High-Dose Vehicle	Mid	High
Topography: Morphology	Control	Control	Dose	Dose
Liver: Hepatocellular Adenoma <sup>b</sup>	6/28 (21)	4/14 (29)	2/29 (7)	0/25 (0)
P Values <sup>c</sup> ,d	P = 0.008 (N)	P = 0.005 (N)	N.S.	P = 0.012* (N) P = 0.016**(N)
Relative Risk (Pooled Control) <sup>f</sup> Lower Limit Upper Limit			0.322 0.034 1.623	0.000 0.000 0.677
Relative Risk (Vehicle Control) <sup>f</sup> Lower Limit Upper Limit			0.241 0.026 1.498	0.000 0.000 0.577
Weeks to First Observed Tumor		81	67	

<sup>a</sup>Dosed groups received 15 or 30 mg/kg.

<sup>b</sup>Number of tumor-bearing animals/number of animals examined at site (percent).

#### (continued)

<sup>C</sup>Beneath the incidence of tumors in a control group is the probability level for the Cochran-Armitage test when P < 0.05, otherwise, not significant (N.S.) is indicated. Beneath the incidence of tumors in a dosed group is the probability level for the Fisher exact test for the comparison of that dosed group with the vehicle-control group (\*) or with the pooledcontrol group (\*\*) when P < 0.05 for either control group; otherwise, not significant (N.S.) is indicated.

 $^{d}$ A negative trend (N) indicates a lower incidence in a dosed group than in a control group.

<sup>e</sup>The probability level for departure from linear trend is given when P < 0.05 for any comparison.

<sup>f</sup>The 95 percent confidence interval of the relative risk between each dosed group and the specified control group.

	Low-Dose Vehicle	Low	
Topography: Morphology	<u>Control</u>	Dose	
Lung: Alveolar/Bronchiolar Carcinoma <sup>b</sup>	1/20 (5)	8/38 (21)	
P Values <sup>c,d</sup>		N•S•	
Relative Risk (Low-Dose Control) <sup>e</sup>		4.211	
Lower Limit	0.638		
Upper Limit		180.874	
Weeks to First Observed Tumor	82	71	
Lung: Alveolar/Bronchiolar Adenoma			
or Carcinoma <sup>b</sup>	1/20 (5)	15/38 (39)	
P Values <sup>c,d</sup>		P = 0.004	
Relative Risk (Low-Dose Control) <sup>e</sup>		7.895	
Lower Limit		1.391	
Upper Limit		318.390	
Weeks to First Observed Tumor	82	68	

(continued)	Low-Dose	
	Vehicle	Low
Topography: Morphology	Control	Dose
Hematopoietic System: Lymphoma or Leukemia <sup>b</sup>	5/20 (25)	12/38 (32)
P Values <sup>c</sup> ,d		N•S•
Relative Risk (Low-Dose Control) <sup>e</sup>		1.263
Lower Limit		0.499
Upper Limit		4.019
Weeks to First Observed Tumor	86	51
Liver: Hepatocellular Carcinoma <sup>b</sup>	1/20 (5)	1/37 (3)
P Values <sup>c,d</sup>		N•S•
Relative Risk (Low-Dose Control) <sup>e</sup>		0.541
Lower Limit		0.007
Upper Limit		41.317
Weeks to First Observed Tumor	104	54

	Low-Dose	
	Vehicle	Low
Topography: Morphology	Control	Dose
Liver: Hepatocellular Adenoma		
or Carcinoma <sup>b</sup>	3/20 (15)	1/37 (3)
P Values <sup>c,d</sup>		N•S•
Relative Risk (Low-Dose Control) <sup>e</sup>		0.180
Lower Limit		0.004
Upper Limit		2.095
Weeks to First Observed Tumor	82	54
Myocardium: Sarcoma, NOS <sup>b</sup>	0/20 (0)	8/36 (22)
P Values <sup>c,d</sup>		P = 0.021
Relative Risk (Low-Dose Control) <sup>e</sup>		Infinite
Lower Limit		1.327
Upper Limit		Infinite
Weeks to First Observed Tumor		62

Table F3.	Analyses of	the Incidence	of Primary T	umors in Low-Dose
	Female Mice	Administered Ph	enesterin by	Gavage <sup>a</sup>

(continued)		
	Low-Dose Vehicle	Low
Topography: Morphology	Control	Dose
All Sites: Hemangiosarcoma <sup>b</sup>	0/20 (0)	5/38 (13)
P Values <sup>c</sup> ,d		N•S•
Relative Risk (Low-Dose Control) <sup>e</sup>		Infinite
Lower Limit Upper Limit		0.693 Infinite
opper fimit		11111116
Weeks to First Observed Tumor		62
Mammary Gland: Adenocarcinoma, NOS <sup>b</sup>	0/20 (0)	6/38 (16)
P Values <sup>c,d</sup>		N•S•
Relative Risk (Low-Dose Control) <sup>e</sup>		Infinite
Lower Limit		0.879
Upper Limit		Infinite
Weeks to First Observed Tumor		54

(continued)		
Topography: Morphology	Low-Dose Vehicle Control	Low Dose
Ovary: Tubular Adenoma <sup>b</sup>	0/20 (0)	8/37 (22)
P Values <sup>c</sup> ,d		P = 0.023
Relative Risk (Low-Dose Control) <sup>e</sup> Lower Limit Upper Limit		Infinite 1.291 Infinite
Weeks to First Observed Tumor		67

<sup>a</sup>Dosed group received 7 mg/kg.

<sup>b</sup>Number of tumor-bearing animals/number of animals examined at site (percent).

<sup>C</sup>Beneath the incidence of tumors in the dosed group is the probability level for the Fisher exact test for the comparison of the dosed group with the vehicle-control group when P < 0.05; otherwise, not significant (N.S.) is indicated.

 $^{d}$ A negative trend (N) indicates a lower incidence in the dosed group than in the control group.

<sup>e</sup>The 95 percent confidence interval of the relative risk between the dosed group and the control group.

Topography: Morphology	Mid- and High-Dose Pooled <u>Control</u>	Mid- and High-Dose Vehicle <u>Control</u>	Mid Dose	High Dose
Lung: Alveolar/Bronchiolar				
Adenoma <sup>b</sup>	1/31 (3)	1/15 (7)	1/27 (4)	1/31 (3)
P Values <sup>c</sup> ,d	N.S.	N.S.	N•S•	N.S.
Relative Risk (Pooled Control) <sup>f</sup>			1.148	1.000
Lower Limit			0.015	0.013
Upper Limit			86.774	75.984
Relative Risk (Vehicle Control) <sup>f</sup>			0.556	0.484
Lower Limit			0.008	0.007
Upper Limit			42.017	36.791
Weeks to First Observed Tumor		83	39	61

(continued)				
	Mid- and High-Dose	Mid- and High-Dose		
	Pooled	Vehicle	Mid	High
Topography: Morphology	Control	Control	Dose	Dose
Hematopoietic System: Lymphoma				
or Leukemia <sup>b</sup>	0/31 (0)	0/15 (0)	14/27 (52)	17/32 (53)
P Values <sup>c</sup> ,d	P < 0.001	P = 0.002	P < 0.001*	P < 0.001*
			P < 0.001 **	P < 0.001 **
Departure from Linear Trend <sup>e</sup>	P = 0.018	P = 0.036		
Relative Risk (Pooled Control) <sup>f</sup>			Infinite	Infinite
Lower Limit			5.181	5.399
Upper Limit			Infinite	Infinite
Relative Risk (Vehicle Control) <sup>f</sup>			Infinite	Infinite
Lower Limit			2.624	2.735
Upper Limit			Infinite	Infinite
Weeks to First Observed Tumor			22	15

(continued)				
Topography: Morphology	Mid- and High-Dose Pooled Control	Mid- and High-Dose Vehicle <u>Control</u>	Mid Dose	High Dose
All Sites: Hemangiosarcoma <sup>b</sup>	0/31 (0)	0/15 (0)	1/27 (4)	2/32 (6)
P Values <sup>c</sup> ,d	N.S.	N•S•	N•S•	N.S.
Relative Risk (Pooled Control) <sup>f</sup> Lower Limit Upper Limit			Infinite 0.062 Infinite	Infinite 0.291 Infinite
Relative Risk (Vehicle Control) Lower Limit Upper Limit	f		Infinite 0.031 Infinite	Infinite 0.147 Infinite
Weeks to First Observed Tumor			57	51

<sup>a</sup>Dosed groups received 15 or 30 mg/kg.

<sup>b</sup>Number of tumor-bearing animals/number of animals examined at site (percent).

(continued)

<sup>C</sup>Beneath the incidence of tumors in a control group is the probability level for the Cochran-Armitage test when P < 0.05, otherwise, not significant (N.S.) is indicated. Beneath the incidence of tumors in a dosed group is the probability level for the Fisher exact test for the comparison of that dosed group with the vehicle-control group (\*) or with the pooledcontrol group (\*\*) when P < 0.05 for either control group; otherwise, not significant (N.S.) is indicated.

<sup>d</sup>A negative trend (N) indicates a lower incidence in a dosed group than in a control group.

eThe probability level for departure from linear trend is given when P < 0.05 for any comparison.

<sup>f</sup>The 95 percent confidence interval of the relative risk between each dosed group and the specified control group.

Topography: Morphology	Low-Dose Vehicle <u>Control</u>	Low Dose
Lung: Alveolar/Bronchiolar Carcinoma <sup>C</sup>	1/18 (6)	8/35 (23)
P Values <sup>d</sup> ,e		N.S.
Relative Risk (Low-Dose Control) <sup>f</sup> Lower Limit Upper Limit		4.114 0.631 176.029
Weeks to First Observed Tumor	82	71
Lung: Alveolar/Bronchiolar Adenoma or Carcinoma <sup>C</sup>	1/18 (6)	15/35 (43)
P Values <sup>d</sup> ,e		P = 0.004
Relative Risk (Low-Dose Control) <sup>f</sup> Lower Limit Upper Limit		7.714 1.380 309.076
Weeks to First Observed Tumor	82	68

(continued)			
Topography: Morphology	Low-Dose Vehicle <u>Control</u>	Low Dose	
Hematopoietic System: Lymphoma or Leukemia <sup>b</sup>	5/18 (28)	12/36 (33)	
P Values <sup>d</sup> ,e		N•S•	
Relative Risk (Low-Dose Control) <sup>f</sup> Lower Limit Upper Limit		1.200 0.484 3.772	
Weeks to First Observed Tumor	86	51	
Liver: Hepatocellular Carcinoma <sup>C</sup>	1/18 (6)	1/34 (3)	
P Values <sup>d</sup> ,e		N•S•	
Relative Risk (Low-Dose Control) <sup>f</sup> Lower Limit Upper Limit		0.529 0.007 40.372	
Weeks to First Observed Tumor	104	54	

(continued)		
Topography: Morphology	Low-Dose Vehicle Control	Low Dose
Liver: Hepatocellular Adenoma or Carcinoma <sup>c</sup>	3/18 (17)	1/34 (3)
P Values <sup>d</sup> ,e		N•S•
Relative Risk (Low-Dose Control) <sup>f</sup> Lower Limit Upper Limit		0.176 0.004 2.038
Weeks to First Observed Tumor	82	54
Myocardium: Sarcoma, NOS <sup>C</sup>	0/18 (0)	8/34 (24)
P Values <sup>d</sup> ,e		P = 0.024
Relative Risk (Low-Dose Control) <sup>f</sup> Lower Limit Upper Limit		Infinite 1.276 Infinite
Weeks to First Observed Tumor	<b></b>	62

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(continued)			
Topography: Morphology	Low-Dose Vehicle <u>Control</u>	Low Dose	
All Sites: Hemangiosarcoma <sup>C</sup>	0/18 (0)	5/35 (14)	
P Values <sup>d</sup> ,e		N•S•	
Relative Risk (Low-Dose Control) <sup>f</sup> Lower Limit Upper Limit		Infinite 0.682 Infinite	
Weeks to First Observed Tumor		62	
Mammary Gland: Adenocarcinoma, NOS <sup>C</sup>	0/18 (0)	6/35 (17)	
P Values <sup>d</sup> ,e		N•S•	
Relative Risk (Low-Dose Control) <sup>f</sup> Lower Limit Upper Limit		Infinite 0.866 Infinite	
Weeks to First Observed Tumor		54	

Table F5.	Time-Adjusted Analyses of the Incidence of Primary Tumors in Low-Dose
	Female Mice Administered Phenesterin by Gavage <sup>a</sup>

	Low-Dose	
	Vehicle	Low
Topography: Morphology	Control	Dose
Ovary: Tubular Adenoma <sup>C</sup>	0/18 (0)	8/34 (24)
P Values <sup>d</sup> ,e		P = 0.024
Relative Risk (Low-Dose Control) <sup>f</sup>		Infinite
Lower Limit		1.276
Upper Limit		Infinite
Weeks to First Observed Tumor		67

140

<sup>a</sup>Dosed group received 7 mg/kg.

<sup>b</sup>Number of tumor-bearing animals/number of animals examined at site (percent) which survived at least 51 weeks of the study.

<sup>C</sup>Number of tumor-bearing animals/number of animals examined at site (percent) which survived at least 52 weeks of the study.

<sup>d</sup>Beneath the incidence of tumors in the dosed group is the probability level for the Fisher exact test for the comparison of the dosed group with the vehicle-control group when P < 0.05; otherwise, not significant (N.S.) is indicated.

<sup>e</sup>A negative trend (N) indicates a lower incidence in the dosed group than in the control group.

 $^{
m f}$ The 95 percent confidence interval of the relative risk between the dosed group and the control group.

	Mid- and		
	High-Dose Vehicle	Mid	High
Topography: Morphology	Control	Dose	Dose
ung: Alveolar/Bronchiolar			
Adenoma <sup>C</sup>	1/15 (7)	1/18 (6)	1/5 (20)
Values <sup>e,g</sup>	N.S.	N•S•	N.S.
elative Risk (Vehicle Control) <sup>i</sup>		0.833	3.000
Lower Limit		0.011	0.041
Upper Limit		61.743	178.689
leeks to First Observed Tumor	83	39	61
lematopoietic System:			
Lymphoma or Leukemia <sup>b</sup>	0/15 (0)	14/18 (78)	17/19 (89)
? Values <sup>f</sup> ,g	P < 0.001	P < 0.001	P < 0.001
)eparture from Linear Trend <sup>h</sup>	P = 0.016		
Relative Risk (Vehicle Control) <sup>1</sup>		Infinite	Infinite
Lower Limit		4.089	4.966
Upper Limit		Infinite	Infinite
leeks to First Observed Tumor		22	15

(continued)	Mid- and High-Dose		
	Vehicle	Mid	High
Topography: Morphology	<u>Control</u>	Dose	Dose
Myocardium: Sarcoma, NOS <sup>d</sup>	0/15 (0)	2/7 (29)	3/7 (43)
P Values <sup>f</sup> ,g	P = 0.012	N•S•	P = 0.023
Relative Risk (Vehicle Control) <sup>1</sup>		Infinite	Infinite
Lower Limit		0.685	1.421
Upper Limit		Infinite	Infinite
Weeks to First Observed Tumor		62	42
All Sites: Hemangiosarcoma <sup>e</sup>	0/15 (0)	1/7 (14)	2/6 (33)
P Values <sup>e,f</sup>	P = 0.033	N•S•	N.S.
Relative Risk (Vehicle Control) <sup>1</sup>		Infinite	Infinite
Lower Limit		0.119	0.802
Upper Limit		Infinite	Infinite
Weeks to First Observed Tumor		57	51

<sup>a</sup>Dosed groups received 15 or 30 mg/kg.

<sup>b</sup>Number of tumor-bearing animals/number of animals examined at site (percent) which survived at least 15 weeks of the study.

<sup>C</sup>Number of tumor-bearing animals/number of animals examined at site (percent) which survived at least 39 weeks of the study.

(continued)

<sup>d</sup>Number of tumor-bearing animals/number of animals examined at site (percent) which survived at least 42 weeks of the study.

<sup>e</sup>Number of tumor-bearing animals/number of animals examined at site (percent) which survived at least 51 weeks of study.

<sup>f</sup>Beneath the incidence of tumors in the control group is the probability level for the Cochran-Armitage test when P < 0.05, otherwise, not significant (N.S.) is indicated. Beneath the incidence of tumors in a dosed group is the probability level for the Fisher exact test for the comparison of that dosed group with the matched-control group when P < 0.05; otherwise, not significant (N.S.) is indicated.

<sup>g</sup>A negative trend (N) indicates a lower incide: ee in a dosed proup than in a control group.

<sup>h</sup>The probability level for departure from linear trend is given when P < 0.05 for any comparison.

<sup>i</sup>The 95 percent confidence interval of the rel ive risk between each dosed group and the control group.

Review of the Bioassay of Phenesterin\* for Carcinogenicity by the Data Evaluation/Risk Assessment Subgroup of the Clearinghouse on Environmental Carcinogens

March 6, 1978

The Clearinghouse on Environmental Carcinogens was established in May, 1976, in compliance with DHEW Committee Regulations and the Provisions of the Federal Advisory The purpose of the Clearinghouse is to Committee Act. advise the Director of the National Cancer Institute (NCI) on its bioassay program to identify and to evaluate chemical carcinogens in the environment to which humans may be The members of the Clearinghouse have been drawn exposed. from academia, industry, organized labor, public interest groups, State health officials, and quasi-public health and research organizations. Members have been selected on the basis of their experience in carcinogenesis or related fields and, collectively, provide expertise in chemistry, biochemistry, biostatistics, toxicology, pathology, and epidemiology. Representatives of various Governmental agencies participate as ad hoc members. The Data Evaluation/Risk Assessment Subgroup of the Clearinghouse is charged with the responsibility of providing a peer review of reports prepared on NCI-sponsored bioassays of chemicals studied for carcinogenicity. It is in this context that the below critique is given on the bioassay of Phenestrin for carcinogenicity.

In a written review submitted by a Subgroup member, the reviewer agreed with the conclusion in the report that, under the conditions of test, Phenesterin was carcinogenic in female rats and in both sexes of mice. He briefly described the experimental design and the conditions under which Phenesterin was tested. In his critique, he noted the following points: the inadequate size of the treatment and control groups; the use of excessively high dose levels; and animals were housed in the same room in which other chemicals were under test. The reviewer said that these shortcomings detracted from the value of the study. He added that extrapolation of the results was made difficult by the use of excessive doses and other conditions under which Phenesterin was tested.

The secondary reviewer noted the poor selection of dose levels. He agreed that it would be difficult to extrapolate to lower doses for purposes of assessing human risk. He added that human risk is a secondary consideration since Phenesterin is an anti-cancer agent. One Subgroup member said he would agree if Phenesterin is an effective anti-cancer agent. Another Subgroup member noted that anti-cancer agents also may be used to treat other diseases.

Another reviewer commented on the excessive amount of toxicity resulting from the high treatment doses administered, He felt, however, that an adequate number of animals survived to demonstrate the carcinogenicity of Phenesterin.

It was moved that the report on Phenesterin be accepted as written. The motion was seconded and approved unanimously,

#### Members present were

Gerald N. Wogan (Chairman), Massachusetts Institute of Technology
Arnold L. Brown, Mayo Clinic
Lawrence Garfinkel, American Cancer Society
E. Cuyler Hammond, American Cancer Society
Joseph Highland, Environmental Defense Fund
Henry Pitot, University of Wisconsin Medical Center
George Roush, Jr., Monsanto Company
Sheldon Samuels, Industrial Union Department, AFL-CIO
Michael Shimkin, University of California at San Diego
John Weisburger, American Health Foundation
Sidney Wolfe, Health Research Group

\* Subsequent to this review changes may have been made in the bioassay report either as a result of the review or other reasons. Thus, certain comments and criticisms reflected in the review may no longer be appropriate.

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