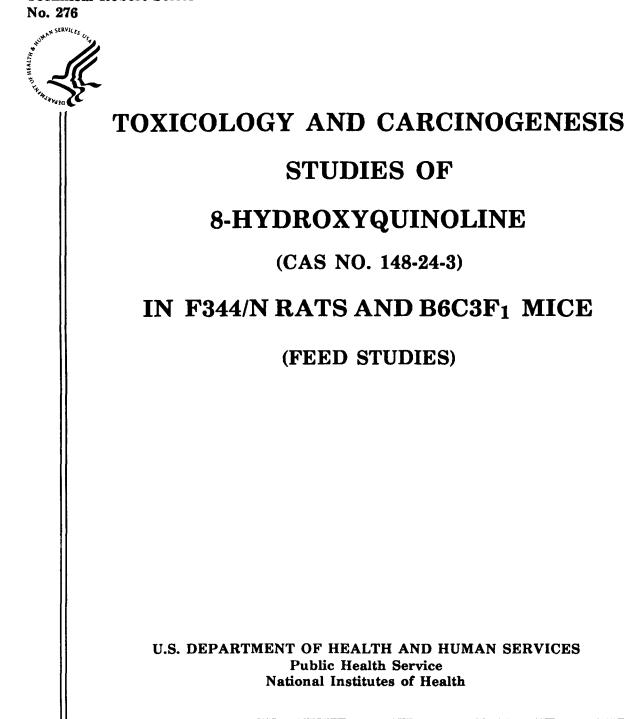
## NATIONAL TOXICOLOGY PROGRAM Technical Report Series No. 276



#### NATIONAL TOXICOLOGY PROGRAM

The National Toxicology Program (NTP), established in 1978, develops and evaluates scientific information about potentially toxic and hazardous chemicals. This knowledge can be used for protecting the health of the American people and for the primary prevention of disease. By bringing together the relevant programs, staff, and resources from the U.S. Public Health Service, DHHS, the National Toxicology Program has centralized and strengthened activities relating to toxicology research, testing and test development/validation efforts, and the dissemination of toxicological information to the public and scientific communities and to the research and regulatory agencies.

The NTP is made up of four charter DHHS agencies: the National Cancer Institute (NCI), National Institutes of Health; the National Institute of Environmental Health Sciences (NIEHS), National Institutes of Health; the National Center for Toxicological Research, Food and Drug Administration; and the National Institute for Occupational Safety and Health (NIOSH), Centers for Disease Control. In July 1981, the Carcinogenesis Bioassay Testing Program, NCI, was transferred to the NIEHS.

## NTP TECHNICAL REPORT ON THE

# TOXICOLOGY AND CARCINOGENESIS STUDIES OF 8-HYDROXYQUINOLINE

## (CAS NO. 148-24-3)

## IN F344/N RATS AND B6C3F1 MICE

## (FEED STUDIES)



## NATIONAL TOXICOLOGY PROGRAM P.O. Box 12233 Research Triangle Park, NC 27709

April 1985

**NTP TR 276** 

NIH Publication No. 85-2532 NTP-83-029

U.S. DEPARTMENT OF HEALTH AND HUMAN SERVICES Public Health Service National Institutes of Health

#### NOTE TO THE READER

These studies are designed and conducted to characterize and evaluate the toxicologic potential, including carcinogenic activity, of selected chemicals in laboratory animals (usually two species, rats and mice). Chemicals selected for testing in the NTP Carcinogenesis Program are chosen primarily on the bases of human exposure, level of production, and chemical structure. Selection per se is not an indicator of a chemical's carcinogenic potential. Negative results, in which the test animals do not have a greater incidence of cancer than control animals, do not necessarily mean that a test chemical is not a carcinogen, inasmuch as the experiments are conducted under a limited set of conditions. Positive results demonstrate that a test chemical is carcinogenic for animals under the conditions of the test and indicate that exposure to the chemical has the potential for hazard to humans. The determination of the risk to humans from chemicals found to be carcinogenic in animals requires a wider analysis which extends beyond the purview of this study.

Five categories of interpretative conclusions were adopted in June 1983 for use in the Technical Reports series to specifically emphasize consistency and the concept of actual evidence of carcinogenicity. For each definitive study result (male rats, female rats, male mice, female mice), one of the following quintet will be selected to describe the findings. These categories refer to the strength of the experimental evidence and not to either potency or mechanism.

- Clear Evidence of Carcinogenicity is demonstrated by studies that are interpreted as showing a chemically related increased incidence of malignant neoplasms, studies that exhibit a substantially increased incidence of benign neoplasms, or studies that exhibit an increased incidence of a combination of malignant and benign neoplasms where each increases with dose.
- Some Evidence of Carcinogenicity is demonstrated by studies that are interpreted as showing a chemically related increased incidence of benign neoplasms, studies that exhibit marginal increases in neoplasms of several organs/tissues, or studies that exhibit a slight increase in uncommon malignant or benign neoplasms.
- Equivocal Evidence of Carcinogenicity is demonstrated by studies that are interpreted as showing a chemically related marginal increase of neoplasms.
- No Evidence of Carcinogenicity is demonstrated by studies that are interpreted as showing no chemically related increases in malignant or benign neoplasms.
- Inadequate Study of Carcinogenicity demonstrates that because of major qualitative or quantitative limitations, the studies cannot be interpreted as valid for showing either the presence or absence of a carcinogenic effect.

Additionally, the following concepts (as patterned from the International Agency for Research on Cancer Monographs) have been adopted by the NTP to give further clarification of these issues:

The term *chemical carcinogenesis* generally means the induction by chemicals of neoplasms not usually observed, the earlier induction by chemicals of neoplasms that are commonly observed, or the induction by chemicals of more neoplasms than are generally found. Different mechanisms may be involved in these situations. Etymologically, the term *carcinogenesis* means induction of cancer, that is, of malignant neoplasms; however, the commonly accepted meaning is the induction of various types of neoplasms or of a combination of malignant and benign neoplasms. In the Technical Reports, the words *tumor* and *neoplasm* are used interchangeably.

This study was initiated by the National Cancer Institute's Carcinogenesis Bioassay Program, now part of the National Institute of Environmental Health Sciences, National Toxicology Program. The studies described in this Technical Report have been conducted in compliance with NTP chemical health and safety requirements and must meet or exceed all applicable Federal, state, and local health and safety regulations. All NTP toxicology and carcinogenesis studies are subjected to a data audit before being presented for peer review.

Although every effort is made to prepare the Technical Reports as accurately as possible, mistakes may occur. Readers are requested to identify any mistakes so that corrective action may be taken. Further, anyone who is aware of related ongoing or published studies not mentioned in this report is encouraged to make this information known to the NTP. Comments and questions about the National Toxicology Program Technical Reports on Toxicology and Carcinogenesis Studies should be directed to Dr. J.E. Huff, National Toxicology Program, P.O. Box 12233, Research Triangle Park, NC 27709 (919-541-3780).

These NTP Technical Reports are available for sale from the National Technical Information Service, U.S. Department of Commerce, 5285 Port Royal Road, Springfield, VA 22161 (703-487-4650). Single copies of this Technical Report are available without charge (and while supplies last) from the NTP Public Information Office, National Toxicology Program, P.O. Box 12233, Research Triangle Park, NC 27709.

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## 8-HYDROXYQUINOLINE

## (8-QUINOLINOL; OXINE; HYDROXYBENZOPYRIDINE)

## CAS NO. 148-24-3

## C<sub>9</sub>H<sub>7</sub>NO Mol. Wt. 145.15 Melting Pt. 76° C Boiling Pt. 267° C

## ABSTRACT

Carcinogenesis studies of 8-hydroxyquinoline (99% pure), a metal chelator and antimicrobial agent, were conducted by administering the test chemical in feed to groups of 50 male and 50 female F344/N rats and B6C3F<sub>1</sub> mice at concentrations of 0, 1,500, or 3,000 ppm for 103 weeks. These concentrations were selected because the chemical at higher concentrations resulted in reduced feed consumption, decreases in mean body weights, and deaths in the 15-day and 13-week studies. The average daily doses were estimated to be 73 and 143 mg/kg for male rats, 89 and 166 mg/kg for female rats, 217 and 396 mg/kg for male mice, and 349 and 619 mg/kg for female mice.

Survival of dosed male and female rats and mice in the 2-year studies was comparable to that of the corresponding controls. The high dose rats and mice of each sex exhibited slight decreases in mean body weights and decreased feed consumption.

Compound-related gross or microscopic pathologic effects were not observed in either species in the 15-day or 13-week studies. In the 2-year studies, C-cell adenomas/carcinomas of the thyroid gland showed a positive trend (P=0.03) for male rats (control, 1/50; low dose, 1/49; high dose, 6/47). The incidence of C-cell neoplasms in the high dose group was not significantly increased compared with the controls, and the occurrence of C-cell hyperplasia was not elevated (4/50; 3/49; 1/47). The incidence of alveolar/bronchiolar adenomas or carcinomas (combined) in male rats occurred with a positive trend, and the incidence in the high dose group was greater than that in the controls (0/50; 3/50; 4/50). This marginal effect was not supported by an increase in epithelial hyperplasia (5/50; 5/50; 3/50). These marginal increases in male rats were not regarded as being related to the administration of 8-hydroxyquinoline.

In in vitro tests, 8-hydroxyquinoline did not induce either unscheduled DNA synthesis in rat hepatocytes or transformation of BALB/c-3T3 cells.

An audit of the experimental data for these carcinogenesis studies on 8-hydroxyquinoline was conducted. No data discrepancies were found that significantly influenced the final interpretations.

Under the conditions of these studies, there was no evidence of carcinogenicity<sup>\*</sup> for male and female F344/N rats or for male and female  $B6C3F_1$  mice given 8-hydroxyquinoline in feed at concentrations of 1,500 or 3,000 ppm for 103 weeks.

<sup>\*</sup>Categories of evidence of carcinogenicity are defined in the Note to the Reader on page 2.

## **CONTRIBUTORS**

The NTP Technical Report on the Toxicology and Carcinogenesis Studies of 8-Hydroxyquinoline is based on the 13-week studies that began in January 1979 and ended in April 1979 and on the 2-year studies that began in December 1979 and ended in December 1981 at EG&G Mason Research Institute.

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#### PEER REVIEW PANEL

The members of the Peer Review Panel who evaluated this Technical Report on March 23, 1984, are listed below. Panel members serve as independent scientists, not as representatives of any institution, company, or governmental agency. In this capacity, Panel members have five major responsibilities: (a) to ascertain that all relevant literature data have been adequately cited and interpreted, (b) to determine if the design and conditions of the NTP studies were appropriate, (c) to ensure that the Technical Report presents the experimental results and conclusions fully and clearly, (d) to judge the significance of the experimental results by scientific criteria, and (e) to assess the evaluation of the evidence of carcinogenicity and other observed toxic responses.

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## SUMMARY OF PEER REVIEW COMMENTS ON THE TOXICOLOGY AND CARCINOGENESIS STUDIES OF 8-HYDROXYQUINOLINE

On March 23, 1984, the Technical Report on 8-hydroxyquinoline received peer review by the National Toxicology Program Board of Scientific Counselors' Technical Reports Review Subcommittee and associated Panel of Experts, The review meeting began at 9:00 a.m. in the Hubert Humphrey Building in Washington, DC.

Dr. Van Ryzin, a principal reviewer for the Technical Report on the carcinogenesis studies of 8-hydroxyquinoline, agreed with the conclusions. He proposed that discussion of marginal effects be reduced, noting that all of the statistical test results are available in the Appendixes. Dr. J. Huff, NTP, reminded the Panel that incidence rates for neoplasms having a trend or pairwise statistic of P < 0.05are placed routinely in the Results sections. For comparative purposes, the incidence of the same lesion for the other sex of that species is also recorded. Ordinarily, marginal effects in a single group receive little mention in the discussion unless considered compound related.

As a second principal reviewer, Dr. Kociba said he also agreed with the conclusions. He urged inclusion in future studies of routine measurements of hematology, urinalysis, serum chemistry, organ weights, and other parameters to allow for a more complete assessment of both chronic toxicity and carcinogenicity. Dr. E. McConnell, NTP, indicated that these indices are included in most current studies and in those designed during the past 2 years or so. Dr. Kociba asked that dietary exposure levels expressed as parts per million (ppm) also be expressed as milligrams per kilogram body weight (mg/kg) per day to aid in extrapolation. Dr. J. French, NTP, noted that this information is available in the food consumption appendix (Appendix L, page 161) but that these values often lack accuracy because of the group housing used and food scattering. He said the Program will include exposure levels as milligrams per kilogram in the text routinely. Dr. Kociba stressed the importance of including negative as well as positive data on chemicals because negative data are important in determining which parameters to evaluate in safety assessment and health surveillance programs.

As a third principal reviewer, Dr. Kotelchuck agreed in principle with the conclusions but noted an apparent marginal increase in the rate of alveolar/bronchiolar neoplasms among all exposed groups, although in no individual case was there statistical significance. He said, however, that aggregation of the incidence data from both sexes of rats or mice by Chi-square analysis suggested there was equivocal evidence for association of the lung tumors with exposure to 8-hydroxyquinoline. In discussion about the usefulness or appropriateness of grouping lesions across sexes and/or species for analysis, Dr. J. Haseman, NIEHS, said that although statistical procedures for pooling experimental test results across sexes and/or species are available, the NTP does not consider this biologically appropriate and does not do such analyses routinely. Further, a previous Peer Review Panel recommended this not be done. Dr. Kociba observed that combining incidence data from both species may also cancel or diminish overall incidences as well as enhance them. Dr. Davis agreed and said that in view of endocrinologic differences, there was no good biologic justification for combining results from both sexes. Dr. French stated that more clarification of the lung tumor data including the potential positive trends would be added to the Discussion section.

Dr. Davis asked that more prominence be given to nontumor effects or lack of effects reported by others, including hepatic and neurologic toxicity, especially in view of 8-hydroxyquinoline's being used in preparations such as vaginal suppositories. Dr. Swenberg reiterated a previous Panel recommendation that non-NTP data should not be included in the abstract.

Dr. Van Ryzin moved that the Technical Report on the toxicology and carcinogenesis studies of 8-hydroxyquinoline be accepted with the modifications discussed. Dr. Slaga seconded the motion, and the Technical Report was approved unanimously by the Peer Review Panel.

## I. INTRODUCTION

**Chemical Identification** 

Uses, Production, and Exposure

Absorption and Excretion

Toxicity

**Mutagenicity and Short-Term Tests** 

Carcinogenicity

**Reason for Testing** 



## 8-HYDROXYQUINOLINE

## (8-QUINOLINOL; OXINE; HYDROXYBENZOPYRIDINE)

#### CAS NO. 148-24-3

C<sub>9</sub>H<sub>7</sub>NO Mol. Wt. 145.15 Melting Pt. 76° C Boiling Pt. 267° C

## **Chemical Identification**

8-Hydroxyquinoline is a white to off-white crystal or crystalline powder that is insoluble in water or ether and freely soluble in ethanol, acetone, chloroform, benzene, and aqueous mineral acids. It readily forms stable metal chelates, which are soluble or precipitable in organic solvents, depending on the pH of the solution (Hollingshead, 1954). Both technical and reagentgrade 8-hydroxyquinoline are available in the United States (IARC, 1977).

## Uses, Production, and Exposure

8-Hydroxyquinoline has a wide variety of uses. Primarily because of their metal chelating properties, 8-hydroxyquinoline and its salts, halogenated derivatives, and metal complexes have been used as analytical reagents (Hollingshead, 1954) and as antimicrobial agents in medicine, fungicides, and insecticides (Harvey, 1975). It is also used as a preservative in cosmetics and tobacco, a chemical intermediate in dye synthesis (IARC, 1977), and a precipitating reagent for uranium and other radioactive metals in nuclear power plant liquid waste effluent. It is used in nuclear medicine with indium-111 (Davis et al., 1978).

The Toxic Substances Control Act (TSCA) inventory in 1977 listed U.S. production of 8hydroxyquinoline at 170,000 pounds. In 1976, Japan produced 0.22-1.1 million pounds and western Europe 1.1-2.2 million pounds (IARC, 1977). Imports to the United States totaled 103,400 pounds in 1974 (IARC, 1977), 60,500 pounds in 1977 (TSCA inventory), and 5,512 pounds in 1983 (USITC, 1984).

There is limited information available on human exposure to 8-hydroxyquinoline. Approximately 660 pounds of this chemical was estimated to be used per year in a wide variety of over-the-counter drugs (NCI/SRI Data Base on Category E Drug Exposure, 1978). This compound is listed as an active ingredient in microbicidal skin ointments, rectal suppositories, and vaginal gels, creams, and douche powders (Federal Register, 1983). Workers who manufacture or handle 8-hydroxyquinoline and its derivatives are presumed to make up the population at greatest risk.

8-Hydroxyquinoline has been placed tentatively in Category III (i.e., information available is inadequate to show that a substance is safe or effective) by the FDA/OTC Advisory Review Panel on Contraceptives and Other Vaginal Drug Products, the FDA committee that reviews nonprescription drugs (Federal Register, 1983). The copper derivative of 8-hydroxyquinoline used as a fungicide in agricultural and industrial applications was listed in the 1980 TSCA inventory (RTECS, 1980).

## **Absorption and Excretion**

Both glucuronide and sulfate conjugates were formed in male Albino Donryu rats when either the parent compound or halogenated derivatives (5-chloro-8-hydroxyquinoline, 5,7-dichloro-8-hydroxyquinoline, or 5-chloro-8-hydroxy-7iodoquinoline) were administered (3 mg/rat) intravenously (Sawada et al., 1978). Glucuronides of 8-hydroxyquinoline were excreted in both bile (9% total dose) and urine (60% total dose), whereas the sulfates were excreted only in the urine (23% total dose).

In humans (six volunteers), 750 mg of orally administered 5-chloro-8-hydroxyquinoline was absorbed, and up to one-fourth of this dose was excreted in the urine over 72 hours in the form of the glucuronide (Berggren and Hansson, 1968). Maximum plasma concentrations were reached approximately 4 hours after single oral administrations of 250, 750, or 1,500 mg of 5-chloro-7iodo-8-hydroxyquinoline to six volunteers each (Jack and Riess, 1973). The plasma half-life was estimated to vary between 11 and 14 hours after a single oral administration. Steady-state plasma concentrations were reached after 5 days of a 7-day course of administration with three daily doses of 250 or 500 mg of iodochlorohydroxyquinoline. No evidence of chemical accumulation in the tissues was found; there was no mention of toxicity.

## Toxicity

An  $LD_{50}$  value of 1,200 mg/kg was reported for oral administration of 8-hydroxyquinoline to rats (strain/sex unspecified; AAPCO, 1966); a value of 48 mg/kg was reported for intraperitoneal administration to mice (strain/sex unspecified; Bernstein et al., 1963).

Starting at week 52, feed consumption was stated to have decreased in male and female F344 rats fed diets containing 1,000 ppm 8-hydroxyquinoline (Fukushima et al., 1981). Administration of 8-hydroxyquinoline (8,000 ppm in the diet) for 52 weeks to 6-week-old male F344 rats resulted in weight gain reduction (approximately 22%) (Yamamoto et al., 1971). Depressed final body weights also occurred in rats (strain unknown) fed 100-250 mg/kg 8-hydroxyquinoline for 30-40 days (Galea and Popa, 1972).

Hemosiderosis in the liver and spleen occurred in male F344 rats fed a diet containing 8,000 ppm 8-hydroxyquinoline for 16 weeks (Yamamoto et al., 1971). Liver toxicity, decreased hepatic vitamin C content, and kidney toxicity were observed in rats fed diets containing 100250 mg/kg 8-hydroxyquinoline for 30-40 days (Galea and Popa, 1972).

Neurotoxic effects of halogenated 8-hydroxyquinoline (5-chloro-7-iodo-8-hydroxyquinoline, 5,7-dichloro-8-hydroxyquinoline, and 5,7-dichloro-2-methyl-8-hydroxyquinoline) were reported in several species. Dose-related increases in mortality and paralysis occurred in 7-day-old chick embryos administered 20 or 30 mg 8-hydroxyquinoline per egg (Preda et al., 1974). 8-Hydroxyquinoline caused depletion of the axonal sheath in sciatic but not lumbar nerves in rats (strain undefined) when administered intravenously (18 mg/kg) daily for 25 days (Murayama et al., 1974). In this study, 5-chloro-7-iodo-8hydroxyquinoline (18 mg/kg per day for 25 days) caused some degeneration in lumbar and sciatic neurons when given orally and severe neuronal degeneration when given intravenously.

In humans, 5-chloro-7-iodo-8-hydroxyquinoline (an antidiarrheal drug) was associated with an incidence of subacute myelooptic neuropathy (SMON) in Japan between 1956 and 1970 (Oakley, 1973). Recommended oral doses ranged from 250 mg up to 2 g per day (depending on the drug and the degree of halogenation). Neurotoxic symptoms were reported to have increased with increasing doses above 750 mg per day and the length of time on medication. The incidence of SMON in Japan decreased when the drug was removed from the market in 1970.

## **Mutagenicity and Short-Term Tests**

8-Hydroxyquinoline was mutagenic in Salmonella typhimurium strain TA100 only in the presence of rat liver S9 and was negative or weakly mutagenic in strain TA98 (Bowden et al., 1976; Sugimura et al., 1976; Talcott et al., 1976; Epler et al., 1977; Nagao et al., 1977; Rasanen et al., 1977; Hollstein et al., 1978; Simmon and Peirce, 1980; Gocke et al., 1981). Although 8-hydroxyquinoline gave equivocal results for the induction of aneuploidy in the fungus Neurospora crassa (Griffiths, 1979), it did induce chromosomal aberrations in the root tips of the broad bean Vicia faba (Kihlman, 1957). Gocke et al. (1981) reported that 8-hydroxyquinoline failed to induce sex-linked recessive lethal mutations in Drosophila or

micronuclei in mice; however, the data were inconclusive. Although 8-hydroxyquinoline was reported to induce DNA damage in Chinese hamster V79 cells in vitro (Hiss and Preston, 1977) and chromatid aberrations in human leukocytes in vitro (Epler et al., 1977), analysis of the data indicated that neither finding was significantly (P<0.05) different from that observed in the controls. In summary, 8-hydroxyquinoline was mutagenic in strain TA100 of Salmonella only in the presence of S9, caused chromosomal aberrations in the plant V. faba, and gave equivocal or inconclusive results in a variety of other short-term tests.

## Carcinogenicity

No compound-related histopathologic effects were observed in male and female F344 rats administered 1,000 ppm 8-hydroxyquinoline in the diet for 104 weeks (Fukushima et al., 1981). Similarly, no compound-related histopathologic effects were observed in male or female F344 rats (age not specified) given 8-hydroxyquinoline (0, 0.1, 3, 10, or 30 mg per rat per day) by gavage, five times per week for 52 weeks (Hadidian et al., 1968).

Carcinoma, papilloma, and hyperplasia of the urinary bladder occurred in some of the surviving mice (sex and strain not stated) receiving implanted pellets of 8-hydroxyguinoline and cholesterol at that site (Allen et al., 1957; Boyland and Watson, 1956). Boyland and Watson (1956) reported results of experiments using this route of administration: 4/13 dosed mice had bladder carcinomas and 2/13 had bladder papillomas compared with 0/25 controls. Similar results were reported by Allen et al. (1957): 3/16 surviving dosed mice had bladder carcinomas, 2/16 had bladder papillomas, and 1/24 controls had a carcinoma. The source and purity of the 8-hydroxyquinoline were not stated in either study. Bryan et al. (1964) reported the results of experiments using 8-hydroxyquinoline and paraffin wax pellets implanted into bladders of mice (8- to 13-week-old female Swiss mice): 1/35 surviving dosed mice had bladder carcinoma and 1/35 had bladder papilloma; 1/47 surviving controls had bladder carcinoma, and 1/47 had bladder papilloma. Chemical source and purity were not stated.

Glandular or papillary hyperplasia of the endometrium was seen in 7/30 and carcinoma of the uterus in 4/30 Bethesda black rats (3 months old) receiving a 20% suspension of 8-hydroxyquinoline in 20% gelatin by intravaginal administration of 0.2 ml two times per week for 2 years (Hueper, 1965). In this study, no effects were seen in 80 C57 black mice (2 months old) receiving the same dose for 2 years, but survival was reduced because of infection. Carcinoma of the vagina and cervix were reported after vaginal instillation of 0.1 ml of 8-hydroxyquinoline in polyethylene glycol in 20 female mice (age and strain not given) two times per week for 18 months, but low survival (control, 7/20; dosed, 2/20) precluded judging the results. In a later study, no compound-related cervical or uterine lesions occurred in 20 BALB/c mice receiving 0.1-ml intravaginal administrations of 8-hydroxyquinoline (1%) in gum tragacanth two times per week for up to 50 weeks (Boyland et al., 1966). Inhibition of ovulation and "regenerative nodes" in the uterus reportedly occurred in five CC-57 mice receiving 20% 8-hydroxyquinoline in saline suspension by intravaginal instillation two times per week for 116 weeks; the size of the test groups was not stated (Volfson, 1976).

Spermicidal preparations containing 0.02% 8hydroxyquinoline benzoate, 2% boric acid, and 0.02% phenylmercuric acetate in an emulsion of stearic acid, cetyl alcohol, glycerin, and perfume were tested in female Wistar rats by daily intravaginal swabbing or oral ingestion for 16-18 months (Hoch-Ligeti, 1957). The rats were fed either a low-protein or regular diet (Purina dog chow). Compared with the controls fed a regular diet (1/16 had a mammary tumor), the lowprotein-diet controls had a significant increase in the incidence of tumors (liver, 2/39; mammary, 13/39; other, 2/39). The study of rats that received the regular diet and were administered the spermicidal cream by intravaginal swabbing was considered inadequate because only five rats survived to the end of the study. In the oral study, stomach neoplasms were observed at increased incidence in rats that received the lowprotein diet and the cream as compared with the low-protein controls (3/29 vs 0/39). In the intravaginal study, uterine neoplasms were observed at increased incidence in rats that received the

low-protein diet and the cream as compared with the low-protein controls (4/10 vs 1/39). Lack of information on the source and purity of the vaginal cream and on experimental detail about the dose delivered by the two routes of administration makes interpretation of that study difficult. These results are further complicated because a mixture of seven chemicals was contained in the spermicidal preparation.

The International Agency for Research Against Cancer Working Group concluded that available data did not allow an evaluation of the carcinogenicity of 8-hydroxyquinoline (IARC, 1977).

Quinoline, the parent compound of 8-hydroxyquinoline, was found to be carcinogenic for male Sprague-Dawley rats, causing hepatocellular carcinomas and hepatic hemangioendotheliomas (Hirao et al., 1976). At dietary concentrations of 0, 500, 1,000, and 2,500 ppm (administered for up to 40 weeks, 20 animals per group), incidences of rats surviving 16-40 weeks with hepatic hemangioendothelioma were 0/6, 6/11, 12/16, and 18/19; the incidences of rats with nodular hyperplasia of the liver were 0/6, 6/11, 4/16, and 0/19, and those with hepatocellular carcinoma were 0/6, 3/11, 3/16, and 0/19. Since quinoline requires metabolic activation for conversion to a mutagen in the Ames Salmonella assay (Bowden et al., 1976; Sugimura et al., 1976; Talcott et al., 1976; Epler et al., 1977; Nagao et al., 1977; Rasanen et al., 1977; Hollstein et al., 1978; Simmon et al., 1980; Gocke et al., 1981), metabolic activation in vivo may be required for carcinogenicity. 4-Nitroquinoline-1-oxide also was found to be carcinogenic (Nakahara et al., 1957).

## **Reason for Testing**

8-Hydroxyquinoline was tested by the NTP Carcinogenesis Program because of its various uses and its proposed use as a dental antibacterial agent and because its parent compound quinoline and 4-nitroquinoline-1-oxide are carcinogenic to rodents. Previous long-term studies available when this study was initiated were considered to be inadequate. The dietary route was chosen to obtain a systemic exposure and not necessarily for its relevance to human exposure.

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## **II. MATERIALS AND METHODS**

## PROCUREMENT AND CHARACTERIZATION OF 8-HYDROXYQUINOLINE PREPARATION AND ANALYSIS OF FORMULATED DIETS FIFTEEN-DAY STUDIES THIRTEEN-WEEK STUDIES TWO-YEAR STUDIES

Study Design Source and Specifications of Test Animals Animal Maintenance Clinical Examinations and Pathology Statistical Methods

## PROCUREMENT AND CHARACTERIZATION OF 8-HYDROXYQUINOLINE

8-Hydroxyquinoline was obtained in one batch (Lot no. 7223-J) from Ashland Chemical Company (Englewood, NJ). Purity and identity analyses were conducted at Midwest Research Institute (Kansas City, MO) (Appendix G).

The test chemical was identified as 8-hydroxyquinoline by infrared, ultraviolet/visible, and nuclear magnetic resonance spectroscopy. Overall data indicated a purity of approximately 99%. This conclusion was based on elemental analyses that agreed with theoretical values; a value of 0.58% water by Karl Fischer titration; a value of 101.6% for titration of the amine function with perchloric acid; thin-layer chromatography, which detected one minor impurity by each of two systems; and gas chromatography, which detected impurities totaling 0.15% of the major peak area in one system and 0.07% in a second system.

A chemical stability test performed at Midwest Research Institute indicated that 8-hydroxyquinoline was stable at temperatures as high as  $60^{\circ}$  C for 2 weeks (Appendix G). 8-Hydroxyquinoline was stored in the dark at  $0^{\circ} \pm 5^{\circ}$  C. Results of periodic reanalyses of 8-hydroxyquinoline by infrared spectroscopy and gas chromatography indicated no notable chemical changes throughout the studies.

## PREPARATION AND ANALYSIS OF FORMULATED DIETS

The appropriate amount of 8-hydroxyquinoline was weighed and then mixed with an aliquot of feed in a mortar with a pestle. This premix was then layered between the remaining feed in a Patterson-Kelly<sup>(R)</sup> V-blender and mixed for 15 minutes.

Results of the initial stability study at the analytical chemistry laboratory indicated that formulated diets were stable for 2 weeks at  $5^{\circ}$ C but not at 25° or 45° C (Appendix H). Formulated diets were stored at  $5^{\circ}$ C.

Analysis of dosed feed mixtures to confirm homogeneity of the feed blends was conducted at both the testing and analytical chemistry laboratories (Appendix H). In addition, periodic analyses for 8-hydroxyquinoline in the feed mixtures were performed by the testing and analytical chemistry laboratories to confirm that the feed mixtures were administered to the animals at the correct concentrations. A recovery study indicated that 8-hydroxyquinoline was completely recovered from freshly prepared feed blends when methanol was used; but when feed blends had been stored for a period of time, recovery of the chemical was significantly reduced. Since 0.5% hydrochloric acid in methanol gave much greater recovery of test chemical from "aged" feed samples, it subsequently was used in the routine dose analysis procedure (Appendix I). The initial low recovery of 8-hydroxyguinoline in the stability study was attributed to poor extractability rather than chemical instability.

Results of analyses of formulated diets at the testing laboratory indicated that all but one of the analyzed diets prepared during the 2-year studies were properly formulated (Appendix J, Table J2). A summary of the analytical results is presented in Table 1 and Appendix J, Tables J2 and J3.

TABLE 1. ANALYSES OF FORMULATEDDIETS IN THE TWO-YEAR FEED STUDIESOF 8-HYDROXYQUINOLINE

	Target Concentration	
	1,500 ppm	3,000 ppm
Experimental mean (ppm)	1,485	2,982
Standard deviation (ppm) Coefficient of variation	89	132
(percent)	6.0	4.4
Range (ppm)	1,300-1,580	2,760-3,230
Number of samples	13	13

## FIFTEEN-DAY STUDIES

Male and female F344/N rats and  $B6C3F_1$  mice were obtained from Charles River Breeding

Laboratories and held for 20 days before the studies began.

Groups of five males and five females of each species were fed diets containing 0, 3,000, 6,000, 12,000, 25,000, or 50,000 ppm 8-hydroxyquinoline for 15 days. Animals were housed five per cage and received water and feed ad libitum. Details of animal maintenance are presented in Table 2.

Animals were observed two times per day for signs of moribundity or mortality and weighed on days 0, 14, and 16. Necropsies were performed on all animals.

## THIRTEEN-WEEK STUDIES

Thirteen-week studies were conducted to evaluate the cumulative effects of repeated administration of 8-hydroxyquinoline and to determine the concentrations to be used in the 2-year studies.

Four- to 5-week-old F344/N rats and 5- to 6week-old  $B6C3F_1$  mice of each sex were obtained from Charles River Breeding Laboratories, observed for 15 days, and then randomized by weight and assigned to test groups so that the average group weights were approximately equal for all animals of the same sex and species.

Groups of 10 rats of each sex were fed diets containing 0, 800, 1,500, 3,000, 6,000, or 12,000 ppm 8-hydroxyquinoline for 13 weeks. Groups of 10 mice of each sex were fed diets containing 0, 400, 800, 1,500, 3,000, or 6,000 ppm 8-hydroxyquinoline.

Rats and mice were housed five per cage in polycarbonate cages. Formulated diets, control diets, and water via an automatic watering system were available ad libitum. Further experimental details are summarized in Table 2.

Animals were checked two times per day for mortality and signs of moribundity; moribund animals were killed. Feed consumption was measured weekly by cage. Animal weights were recorded weekly. At the end of the 13-week studies, survivors were killed. Necropsies were performed on all animals, except those excessively autolyzed or cannibalized. Tissues and groups examined are listed in Table 2.

#### **TWO-YEAR STUDIES**

## Study Design

Diets containing 1,500 or 3,000 ppm 8-hydroxyquinoline were fed to groups of 50 rats or 50 mice of each sex for 103 weeks. Controls consisted of 50 untreated rats and 50 untreated mice of either sex.

### **Source and Specifications of Test Animals**

The male and female F344/N rats and  $B6C3F_1$  $(C57BL/6N \times C3H/HeN MTV^{-})$  mice used in this study were produced under strict barrier conditions at Charles River Breeding Laboratories under a contract to the Carcinogenesis Program. Breeding starts for the foundation colony at the production facility originated at the National Institutes of Health Repository. Animals shipped for testing were progeny of defined microflora-associated parents that were transferred from isolators to barrier-maintained rooms. The rats were shipped to the testing laboratory at 5 weeks of age and the mice at 4-6 weeks of age. The animals were guarantined at the testing facility (rats: 16 days; mice: 14 days). Thereafter, a complete pathologic examination was performed on a selected number of animals to assess their health. The rats were placed on study at 7 weeks of age and the mice at 6-8 weeks. The health of the animals was monitored during the course of the study according to the protocols of the NTP Sentinel Animal Program (Appendix K).

A quality control skin grafting program has been in effect since early 1978 to monitor the genetic integrity of the inbred mice used to produce the hybrid  $B6C3F_1$  test animal. In mid-1981, data were obtained that showed incompatibility between the NIH C3H reference colony and the C3H colony from a Program supplier. In August 1981, inbred parental lines of mice were further tested for genetic integrity via isozyme and protein electrophoretograms that demonstrate phenotype expressions of known genetic loci.

	Fifteen-Day Studies	Thirteen-Week Studies	Two-Year Studies
EXPERIMENTAL DESIGN			
Testing Laboratory	EG&G Mason Research Institute	EG&G Mason Research Institute	EG&G Mason Research Institute
Size of Test Groups	5 males and 5 females of each species	10 males and 10 females of each species	50 males and 50 females of each species
Doses	0, 3,000, 6,000, 12,000, 25,000, or 50,000 ppm 8- hydroxyquinoline in the diet	Rats0, 800, 1,500, 3,000, 6,000, or 12,000 ppm 8- hydroxyquinoline in the diet; mice0, 400, 800, 1,500, 3,000, or 6,000 ppm	0, 1,500, or 3,000 ppm 8-hydroxy- quinoline in the diet
Date of First Dose	11/13/78	1/24/79	Rats12/21/79; mice12/5/79
Date of Last Dose	11/27/78	4/24/79	Rats12/09/81;mice11/25/81
Duration of Dosing	15 d	13 wk	103 wk
Type and Frequency of Observation	Observed 2 × d for signs of moribundity and mortality; weighed initially, on d 14, and on d 16	Observed 2 × d for signs of moribundity and mortality; weight and feed consumption measured 1 × wk	Observed $2 \times d$ for signs of moribundity and mortality; weighed initially, weekly for the first $12$ wks, and every 4 wks thereafter; feed consumption: $1 \times 4$ wk
Necropsy and Histologic Examination	Necropsies performed on all animals	Necropsies performed on all animals. The following tissues were examined in the controls and 12,000- ppm rats and 6,000-ppm mice: gross lesions and tis- sue masses, mandibular lymph nodes, mammary gland, salivary glands, sternebrae, thyroid gland, skin, parathyroids, small intestine, colon, liver, prostate/testis or ovaries/ uterus, gallbladder (mice), lungs and bronchi, heart, brain, esophagus, stomach, thymus, trachea, pancreas, spleen, kidneys, adrenal gland, urinary bladder, pituitary gland	Necropsy performed on all animals. The following tissues were examined histologically: tissue masses, regional lymph nodes, skin, mandibular lymph nodes, mammary gland, salivary glands, thigh muscle, sciatic nerve, bone marrow, costochondral junction, thymus, larnyx, trachea, lungs and bronchi, heart, thyroid gland, parathyroids, colon, esophagus, stomach, duodenum, ileum, jejunum, mesenteric lymph node, liver, gallbladder (mice), pancreas, spleen, kidneys, adrenal glands, urinary bladder, seminal vesicles/prostate/ testis or ovaries/uterus, nasal cavity, brain, pituitary gland, eyes, external and middle ear, spinal cord
ANIMALS AND ANIMAL MAINTENANCE			
Strain and Species	F344/N rats; B6C3F1 mice	F344/N rats; B6C3F1 mice	F344/N rats; B6C3F1 mice
Animal Source	Charles River Breeding Labs (Portage, MI)	Same as 15-d studies	Same as 15-d studies
Testing Laboratory	EG&G Mason Research Institute	Same as 15-d studies	Same as 15-d studies
<b>Animal Identification</b>	Ear punch	Ear punch	Ear punch
Time Held Before Start of Test	20 d	15 d	Rats16 d; mice14 d
Age When Placed on Study	7 wk	Rats6-7 wk; mice7-8 wk	Rats7 wk; mice6-8 wk

# TABLE 2. EXPERIMENTAL DESIGN AND MATERIALS AND METHODS IN THE FEED STUDIES OF 8-HYDROXYQUINOLINE

8-Hydroxyquinoline, NTP TR 276

9 wk

Age When Killed

Rats--20-21 wk; mice--20- Rats--111 wk; mice--110-113 wk 21 wk

	Fifteen-Day Studies	Thirteen-Week Studies	Two-Year Studies
Necropsy Dates	Rats11/30-12/4/78; mice12/4-12/5/78	Rats5/2-5/9/79; mice4/25-5/2/79	Rats12/16-12/22/81; mice12/02-12/08/81
Method of Animal Distribution	Assigned to groups so that all cage weights were approximately equal (±5g)	Assigned to groups so that average body weight of each group was approximately equal	Random numbers table used to determine placement
Feed	Available ad libitum; ground Wayne Lab Blox® (Allied Mills, Chicago, IL)	Ground Wayne Lab-Blox® meal; available ad libitum	Same as 15-d studies
Bedding	Aspen Bed <sup>®</sup> (American Excelsior, Baltimore, MD)	Aspen Bed <sup>®</sup> (American Excelsior, Baltimore, MD) or Bettachips <sup>®</sup> (Agway, Northeastern Products Corp., Warrensburg, NY)	Same as 15-d studies
Water	Automatic watering system (Edstrom Industries, Waterford, WI); freely available	Same as 15-d studies	Same as 15-d studies
Cages	Polycarbonate (Lab Products, Garfield, NJ); changed 2 × wk	Same as 15-d studies	Same as 15-d studies
Cage Filters	Nonwoven fiber filters (Lab Products or Snow Filtration, Cincinnati, OH)	Same as 15-d studies	Same as 15-d studies
Animals per Cage	5	5	5
Animal Room Environment	Temp19°-27° C; humidity3%-39%; fluorescent light 12 h/d; 10 room air changes/h	Temp15.6°-26.7°C; humidity8%-68%; fluorescent light 12 h/d; 10 room air changes/h	Temp17.2°-30.6°C; humidity5%-78%; fluorescent light 12 h/d; 12 room air changes/h
Other Chemicals on Test in Same Room	None	None	None
CHEMISTRY			
Lot Numbers Used	7223-J	Same as 15-d studies	Same as 15-d studies
Supplier	Ashland Chemical Co., (Englewood, NJ)		
CHEMICAL/VEHICLE			
Preparation	Premix prepared with a mortar and pestle; final preparation mixed for 15 min in an 8-qt Patterson- Kelly <sup>®</sup> V-blender without intensifier bar	8-Hydroxyquinoline and an aliquot of feed were mixed with a mortar and pestle to homogeneity. Premix sandwiched between the remaining meal in an 8-qt Patterson- Kelly® V-blender without an intensifier bar and mixed 15 min	Same as 13-wk studies
Maximum Storage Time	2 wk	2 wk	2 wk
Storage Conditions	Stored in double plastic bags at 4° C	Same as 15-d studies	Stored in double plastic bags in covered plastic buckets at 0° ± 5°C

# TABLE 2. EXPERIMENTAL DESIGN AND MATERIALS AND METHODS IN THE FEED STUDIES OF 8-HYDROXYQUINOLINE (Continued)

The C57BL/6 mice were homogeneous at all loci tested. Eighty-five percent of the C3H mice monitored were variant at one to three loci, indicating some heterogeneity in the C3H line from this supplier. Nevertheless, the genome of this line is more homogeneous than that of randomly bred stocks.

Male mice from the C3H colony and female mice from the C57BL/6 colony were used as parents for the hybrid B6C3F<sub>1</sub> mice used in these studies. The influence of the potential genetic nonuniformity in the hybrid mice on these results is not known, but results of the studies are not affected because matched concurrent controls were included in each study.

#### **Animal Maintenance**

Rats and mice were housed five per cage in polycarbonate cages. Feed and water were available ad libitum. Details of animal maintenance are summarized in Table 2. Cage rotation was not carried out during these studies.

#### **Clinical Examinations and Pathology**

All animals were observed two times per day for mortality and signs of moribundity. Clinical signs were recorded once per week. Body weights by cage were recorded once per week for the first 12 weeks of the study and once per month thereafter. Mean body weights were determined for each group. Moribund animals were killed, as were animals that survived to the end of the study. Necropsies were performed on all animals, including those found dead unless they were excessively autolyzed or cannibalized. Thus, the number of animals from which particular organs or tissues were examined microscopically varies and is not necessarily equal to the number of animals that were placed on study in each group.

Examinations for grossly visible lesions were performed on major tissues or organs. Tissueswere preserved in 10% neutral buffered formalin, embedded in paraffin, sectioned, and stained with hematoxylin and eosin. Tissues examined microscopically are listed in Table 2.

When the pathology examination was completed, the slides, individual animal data records, and summary tables were sent to an independent quality assurance laboratory. Individual animal records and tables were compared for accuracy, slides and tissue counts were verified, and histotechnique was evaluated. All tumor diagnoses, all target tissues, and all tissues from a randomly selected 10% of the animals were evaluated by a quality assurance pathologist. Slides of all target tissues and those about which the original and quality assurance pathologists disagreed were submitted to the Chairperson of the Pathology Working Group (PWG) for evaluation. Representative coded slides selected by the Chairperson were reviewed by PWG pathologists, who reached a consensus and compared their findings with the original and quality assurance diagnoses. When diagnostic differences were found, the PWG sent the appropriate slides and comments to the original pathologist for review. This procedure has been described, in part, by Maronpot and Boorman (1982) and Boorman et al. (1985). The final diagnoses represent a consensus of contractor pathologists and the NTP Pathology Working Group.

Nonneoplastic lesions are not specifically examined routinely by the quality assurance pathologist or PWG. Certain nonneoplastic findings are reviewed by the quality assurance pathologist and PWG if they are considered part of the toxic response to a chemical or if they are deemed of special interest.

#### **Statistical Methods**

Data Recording: Data on this experiment were recorded in the Carcinogenesis Bioassay Data System (Linhart et al., 1974). The data elements include descriptive information on the chemicals, animals, experimental design, survival, body weight, and individual pathologic results, as recommended by the International Union Against Cancer (Berenblum, 1969).

Survival Analyses: The probability of survival was estimated by the product-limit procedure of Kaplan and Meier (1958) and is presented in the form of graphs. Animals were censored from the survival analyses at the time they were found dead of other than natural causes or were found to be missing; animals dying from natural causes were not 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 method for testing for a dose-related trend. All reported P values for the survival analysis are two-sided.

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

Analysis of Tumor Incidence: Three statistical methods are used to analyze tumor incidence data. The two that adjust for intercurrent mortality employ the classical method for combining contingency tables developed by Mantel and Haenszel (1959). Tests of significance included pairwise comparisons of high dose and low dose groups with vehicle controls and tests for overall dose-response trends.

For studies in which compound administration has little effect on survival, the results of the three alternative analyses will generally be similar. When differing results are obtained by the three methods, the final interpretation of the data will depend on the extent to which the tumor under consideration is regarded as being the cause of death. All reported P values for tumor analyses are one-sided. Life Table Analyses--The first method of analysis assumed that all tumors of a given type observed in animals dying before the end of the study were "fatal"; i.e., they either directly or indirectly caused the death of the animal. According to this approach, the proportions of tumor-bearing animals in the dosed and control groups were compared at each point in time at which an animal died with a tumor of interest. The denominators of these proportions were the total number of animals at risk in each group. These results, including the data from animals killed at the end of the study, were then combined by the Mantel-Haenszel method to obtain an overall P value. This method of adjusting for intercurrent mortality is the life table method of Cox (1972) and of Tarone (1975).

Incidental Tumor Analyses - The second method of analysis assumed that all tumors of a given type observed in animals that died before the end of the study were "incidental"; i.e., they were merely observed at necropsy in animals dying of an unrelated cause. According to this approach, the proportions of tumor-bearing animals in dosed and control groups were compared in each of five time intervals: 0-52 weeks, 53-78 weeks, 79-92 weeks, week 93 to the week before the terminal kill period, and the terminal kill period. The denominators of these proportions were the number of animals on which necropsies were actually performed during the time interval. The individual time interval comparisons were then combined by the previously described method to obtain a single overall result. (See Haseman, 1984, for the computational details of both methods.)

Unadjusted Analyses--Primarily, survival-adjusted methods are used to evaluate tumor incidence. In addition, the results of the Fisher's exact test for pairwise comparisons and the Cochran-Armitage linear trend test (Armitage, 1971; Gart et al., 1979) are given in the appendix containing the analyses of primary tumor incidence. These two tests are based on the overall proportion of tumor-bearing animals and do not adjust for survival differences.

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## **III. RESULTS**

RATS

FIFTEEN-DAY STUDIES

## THIRTEEN-WEEK STUDIES

## **TWO-YEAR STUDIES**

Body Weights and Clinical Signs Survival Pathology and Statistical Analyses of Results

## MICE

## FIFTEEN-DAY STUDIES

## THIRTEEN-WEEK STUDIES

## **TWO-YEAR STUDIES**

Body Weights and Clinical Signs Survival Pathology and Statistical Analyses of Results

#### **FIFTEEN-DAY STUDIES**

Two male rats that received 50,000 ppm 8hydroxyquinoline died, one on day 12 and the other on day 13 (Table 3). One male rat that received 25,000 ppm died during the necropsy period. None of the female rats died. Male rats that received 25,000 or 50,000 ppm and females that received 50,000 ppm lost weight during the study. Male and female rats that received 50,000 ppm appeared emaciated. Although feed consumption was not measured, rats of each sex that received 12,000 ppm or more appeared to eat less than did the controls.

#### TABLE 3. SURVIVAL AND MEAN BODY WEIGHTS OF RATS IN THE FIFTEEN-DAY FEED STUDIES OF 8-HYDROXYQUINOLINE

		Mean	<b>Final Weight</b>		
Dose (ppm)	Survival (a)	Initial (b)	Final	Change	Relative to Controls (percent)
MALE				<u></u>	
0	5/5	$152 \pm 3$	$225 \pm 6$	+ 73 ± 3	••
3,000	5/5	$151 \pm 3$	$222 \pm 4$	$+71 \pm 3$	98.7
6,000	5/5	$152 \pm 3$	$218 \pm 4$	+ 66 ± 3	96.9
12,000	5/5	$152 \pm 4$	$192 \pm 5$	$+40 \pm 2$	85.3
25,000	5/5	$151 \pm 4$	$145 \pm 4$	$-6\pm3$	64.4
50,000	(c) 3/5	$152 \pm 5$	$105 \pm 5$	$-47\pm8$	46.7
FEMALE					
0	5/5	$124 \pm 3$	153 ± 3	$+29 \pm 1$	
3,000	5/5	$123 \pm 3$	$149 \pm 3$	$+26 \pm 5$	97.3
6,000	5/5	$123 \pm 3$	$152 \pm 2$	$+29 \pm 2$	99.4
12,000	5/5	$124 \pm 3$	$152 \pm 3$	$+28 \pm 2$	99.2
25,000	5/5	$124 \pm 4$	$131 \pm 4$	$+7\pm1$	85.6
50,000	5/5	$123 \pm 4$	$103 \pm 5$	$-20 \pm 2$	66.9

(a) Number surviving/number initially in the group

(b) Initial body weight  $\pm$  standard error of the mean for all animals in the group. Subsequent calculations are based on those animals surviving to the end of the study.

(c) Deaths occurred on days 12 and 13.

## THIRTEEN-WEEK STUDIES

None of the rats died (Table 4). Final mean body weights relative to those of the controls were depressed 18.0% for male rats that received 12,000 ppm 8-hydroxyquinoline and 10.5% and 9.5% for female rats that received 6,000 or 12,000 ppm, respectively. Feed consumption by male rats was unaffected by 8-hydroxyquinoline, but feed consumption by female rats that received 3,000, 6,000, or 12,000 ppm was approximately 75% that of the controls.

Necropsies were performed on all animals. No

compound-related histopathologic lesions were found in the high dose (12,000 ppm) male rats. Lymphoid hyperplasia in the pancreatic lymph nodes was found in 2/10 females that received 12,000 ppm and in none of the controls. This lesion was not considered to be compound related.

In the absence of either dose-related increases in mortality or compound-related histopathologic lesions, body weight data formed the basis for the selection of concentrations of 1,500 and 3,000 ppm 8-hydroxyquinoline in feed for rats in the 2year studies.

TABLE 4.	SURVIVAL, MEAN BODY WEIGHTS, AND FEED CONSUMPTION OF RATS IN THE
	THIRTEEN-WEEK FEED STUDIES OF 8-HYDROXYQUINOLINE

Dose (ppm)	Survival (a)	<u>Mean Bo</u> Initial (b)	ody Weight (s Final	(rams) Change	Final Weight Relative to Controls (percent)	Feed Consumption (c)	Calculated Dose (mg/kg/day)
MALE	<u></u>				<u> </u>	······································	
0	10/10	$181 \pm 4$	$344 \pm 5$	$+163 \pm 5$		53	0
800	10/10	$182 \pm 4$	333 ± 6	$+151 \pm 7$	96.8	60	48
1,500	10/10	$183 \pm 4$	338 ± 8	$+155 \pm 6$	98.3	58	87
3,000	10/10	$182 \pm 4$	$324 \pm 8$	$+142 \pm 7$	94.2	56	168
6,000	10/10	$181 \pm 4$	327 ± 6	$+146 \pm 4$	95.1	57	342
12,000	10/10	$182 \pm 4$	$282 \pm 6$	$+100 \pm 6$	82.0	55	660
FEMALE							
0	10/10	$135 \pm 3$	$210 \pm 4$	+ 75 ± 2		79	0
800	10/10	$136 \pm 4$	$207 \pm 3$	$+71 \pm 4$	98.6	83	66
1,500	10/10	$135 \pm 3$	$203 \pm 5$	$+68 \pm 3$	96.7	85	128
3,000	10/10	$135 \pm 3$	$198 \pm 4$	$+63 \pm 2$	94.3	60	180
6,000	10/10	136 ± 3	188±3	$+52 \pm 1$	89.5	54	324
12,000	10/10	136 ± 3	190±3	+ 54 ± 3	90.5	55	660

(a) Number surviving/number per group

(b) Initial body weight  $\pm$  standard error of the mean for all animals in the group

(c) Grams per kilogram body weight per day during week 12

#### **TWO-YEAR STUDIES**

## **Body Weights and Clinical Signs**

Throughout most of the study, mean body weights of high dose rats of each sex were slightly lower than those of the controls (Table 5 and Figure 1). The average daily feed consumption per rat by low dose and high dose rats was 93% and 88% that of the controls for males and 89% and 78% for females (Appendix L, Tables L1 and L2). Approximate chemical consumption for low dose and high dose rats (rats were group housed) was 73 and 143 mg/kg for males and 89 and 166 mg/kg for females.

TABLE 5.	MEAN BODY V	VEIGHTS AND SURV OF 8-1	IVAL OF RATS	IN THE TWO	O-YEAR FEED	STUDIES
----------	-------------	----------------------------	--------------	------------	-------------	---------

Weeks on Study	Av. WL	<u>Control</u> 1.500 ppm Av. WL No. of Av. WL (percent No. of (grams) Survivors (grams) of controls) Survivors					3,000 ppm Wt. (percent of controls)	No. of
	(grams)	Survivors	(grams)	of controls)	Survivors	(grams)	of controls)	Survivors
MALE 0 1 2 3	160 180 218 238	50 50 50 50	159 176 221 261 275 289 300 312	99.4 97.8 101.4 101.7	50 50 50 50	159 172 219 240	99.4 95.6 100.5 100.8	50 50 50
0 1 2 3 4 5 6 7 8 9 0 10 1 5 6 7 7 8 9 0 4 3 7 3 5 9 3 5 9 3 7 2 3 7 7 9 5 9 3 7 2 3 7 8 9 0 10 11 15 9 3 7 3 5 9 3 7 7 8 9 0 11 15 9 3 7 7 8 9 0 11 15 9 3 7 7 8 9 0 11 15 9 3 7 7 8 9 0 11 15 9 3 7 7 8 9 0 11 15 9 3 7 7 16 9 3 7 7 16 9 3 7 7 16 9 3 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7	$\begin{array}{c} 160\\ 180\\ 2218\\ 2255\\ 269\\ 283\\ 305\\ 313\\ 3229\\ 3353\\ 395\\ 401\\ 417\\ 443\\ 445\\ 446\\ 476\\ 481\\ 476\\ 481\\ 476\\ 481\\ 463\\ 477\\ 483\\ 476\\ 481\\ 453\\ 455\\ 455\\ 455\\ 455\\ 455\\ 455\\ 455$	50000000000000000000000000000000000000	$\begin{array}{c} 2015\\ 215\\ 289\\ 300\\ 312\\ 321\\ 3229\\ 335\\ 335\\ 335\\ 401\\ 417\\ 434\\ 434\\ 434\\ 434\\ 434\\ 434\\ 434\\ 43$	99.4 97.8 101.4 102.2 102.2 102.3 102.3 102.3 102.3 102.3 102.3 102.3 102.3 101.1 101.6 101.5 101.7 101.5 101.9 100.9 100.6 101.5 100.4 100.9 100.4 98.4 98.4 95.3	50 50 50 50 50 50 50 50 50 50 50 50 50 5	159 159 219 257 267 288 319 322 355 3788 390 322 355 379 325 379 409 4227 435 444 455 455 455 440 438 440 438 418	$\begin{array}{c} 99.4\\ 99.6\\ 100.5\\ 100.8\\ 100.8\\ 100.7\\ 101.7\\ 101.7\\ 101.9\\ 100.9\\ 100.9\\ 100.9\\ 100.9\\ 98.2\\ 98.2\\ 98.2\\ 98.2\\ 98.2\\ 98.1\\ 98.1\\ 98.1\\ 98.4\\ 94.4\\ 94.6\\ 94.8\\ 94.4\\ 94.6\\ 94.8\\ 94.4\\ 94.6\\ 94.8\\ 94.4\\ 94.6\\ 94.8\\ 94.4\\ 94.6\\ 94.8\\ 94.4\\ 94.6\\ 94.8\\ 94.4\\ 94.6\\ 94.8\\ 94.4\\ 94.6\\ 94.8\\ 94.4\\ 94.6\\ 94.8\\ $	50 50 50 50 50 50 50 50 50 50 50 50 50 5
FEMALE		,						
0 1 2 3 4 5 6 7 8 9 10 11 12 16 24 24 22 32 340 448 526 60 448 526 60 468 776 80 4 88 99 100 104	125 137 158 169 169 192 195 201 203 211 229 227 235 237 246 253 260 275 286 297 316 328 339 340 344 335 336	50000000000000000000000000000000000000	125 132 155 169 175 183 190 196 2015 218 230 237 245 238 230 237 245 253 268 202 237 245 253 268 202 237 245 253 268 202 239 2325 333 333 334	$\begin{array}{c} 100.0\\ 996.4\\ 999.3\\ 100.0\\ 988.2\\ 996.2\\ 997.9\\ 996.2\\ 997.9\\ 996.2\\ 997.9\\ 996.4\\ 996.2\\ 997.9\\ 996.3\\ 997.5\\ 296.3\\ 997.5\\ 296.3\\ 997.5\\ 296.3\\ 997.5\\ 296.3\\ 997.5\\ 296.3\\ 997.5\\ 296.3\\ 997.5\\ 296.4\\ 102.4\\ \end{array}$	50 50 50 50 50 50 50 50 50 50 50 50 50 5	124 129 145 164 175 180 176 185 188 193 2008 210 219 225 238 251 269 269 269 286 293 286 293 296 306 300 301 302	99.2 98.0 97.0 95.6 97.0 96.2 96.4 95.1 96.4 95.1 95.1 95.1 95.1 95.5 95.1 95.5 95.5	50 50 50 50 50 50 50 50 50 50 50 50 50 5

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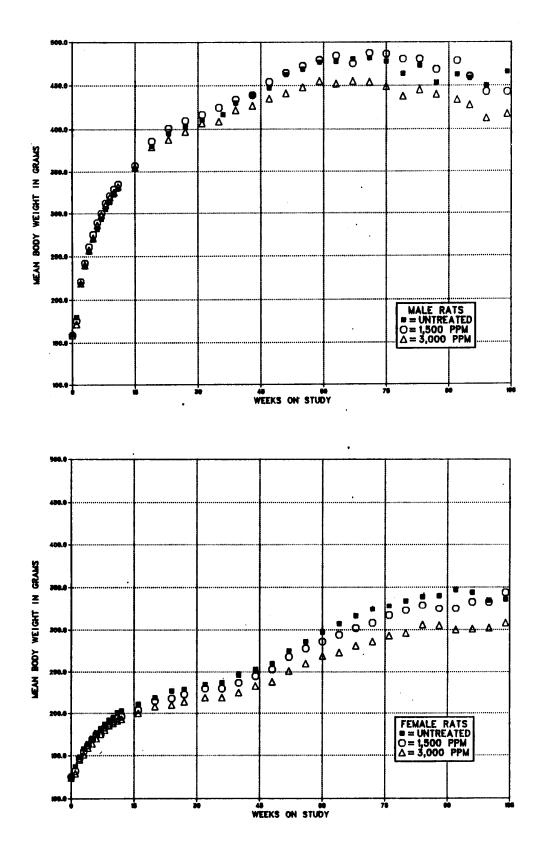


FIGURE 1. GROWTH CURVES FOR RATS ADMINISTERED 8-HYDROXYQUINOLINE IN FEED FOR TWO YEARS

## Survival

Estimates of the probabilities of the survival of male and female rats fed a control diet and diets containing 8-hydroxyquinoline as described earlier are shown in the Kaplan and Meier curves in Figure 2. No significant differences in survival were observed between any groups of either sex (Table 6).

# Pathology and Statistical Analyses of Results

This section describes significant or noteworthy changes in the incidences of animals with neo-

plastic or nonneoplastic lesions. Histopathologic findings on neoplasms in rats are summarized in Appendix A, Tables A1 and A2; Tables A3 and A4 give the survival and tumor status for individual male and female rats. Findings on nonneoplastic lesions are summarized in Appendix C, Tables C1 and C2. Appendix E, Tables E1 and E2, contain the statistical analyses of those primary tumors that occurred with an incidence of at least 5% in one of the three groups. The statistical analyses used are discussed in Chapter II (Statistical Methods) and Appendix E (footnotes).

	Control	1,500 ppm	3,000 ppm
MALE (a)			
Animals initially in study	50	50	50
Nonaccidental deaths before termination (b)	21	16	17
Killed at termination	28	34	33
Died during termination period	1	0	0
Survival P values (c)	0.391	0.341	0.445
FEMALE (a)			
Animals initially in study	50	50	50
Nonaccidental deaths before termination (b)	13	10	13
Killed at termination	36	39	37
Died during termination period	1	1	0
Survival P values (c)	0.935	0.706	0.851

## TABLE 6. SURVIVAL OF RATS IN THE TWO-YEAR FEED STUDIES OF 8-HYDROXYQUINOLINE

(a) Terminal kill period: males, week 104; females, weeks 104-105

(b) Includes animals killed in a moribund condition

(c) The result of the life table trend test is in the control column, and the results of the life table exact pairwise comparisons with the controls are in the dosed columns.

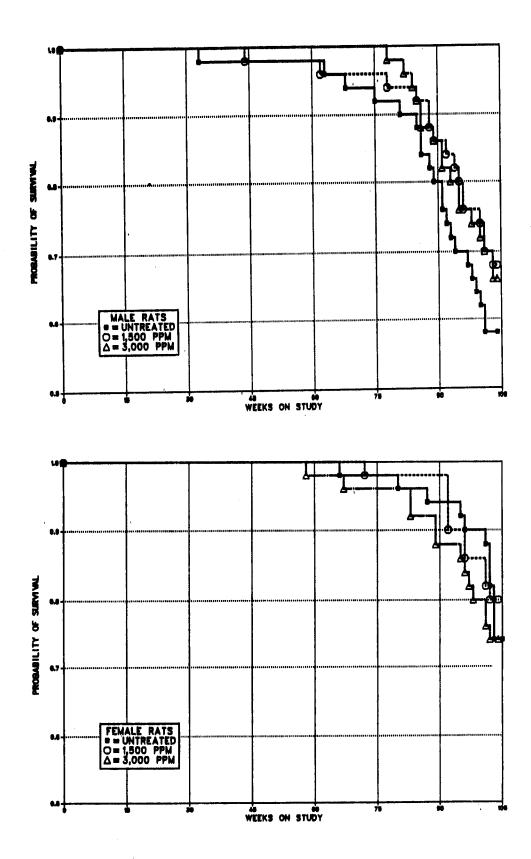


FIGURE 2. KAPLAN-MEIER SURVIVAL CURVES FOR RATS ADMINISTERED 8-HYDROXYQUINOLINE IN FEED FOR TWO YEARS

Lung: Incidences of epithelial hyperplasia were not significantly different in dosed and control groups of male rats (Table 7). Alveolar/bronchiolar adenomas or carcinomas (combined) in male rats occurred with a statistically significant positive trend, and the incidence in the high dose group was significantly greater than that in the controls. The incidences of alveolar/bronchiolar adenomas in female rats were as follows: control, 1/50; low dose, 2/50; high dose, 2/50. No carcinomas were observed in female rats.

Thyroid Gland: The incidence of C-cell hyperplasia was greater in the controls than in the male or female dosed groups (Table 8). Incidences of C-cell carcinomas and C-cell adenomas or carcinomas (combined) in male rats and C-cell adenomas in female rats were significantly increased by trend tests. The incidences in the dosed groups were not significantly different from those in the controls by either survival-adjusted test.

Other Tumor Effects: Marginal decreases were observed in the incidences of neoplastic nodules in the livers of dosed male rats (control, 6/49; low dose, 1/50; high dose, 3/48) and of mononuclear cell leukemia in male rats (control, 17/50; low dose, 8/50; high dose 9/50) (Appendix E, Table E1). These differences were not considered compound related.

2/33 (6%)

P = 0.143

P = 0.131

1/50 (2%)

4/50 (8%)

2/33 (6%)

P = 0.080

P = 0.037

10.1%

	Control	1,500 ppm (b)	3,000 ppm (b)			
Epithelial Hyperplasia Overall Rates	5/50 (10%)	5/50 (10%)	3/50 (6%)			
Alveolar/Bronchiolar Adenoma Overall Rates Adjusted Rates	0/50 (0%) 0.0%	2/50 (4%) 5.9%	3/50 (6%) 8.2%			

2/34 (6%)

P = 0.274

P = 0.274

1/50 (2%)

3/50 (6%)

2/34 (6%)

P = 0.143

P = 0.142

7.8%

0/29 (0%)

P=0.097

P = 0.094

0/50 (0%)

0/50 (0%)

0/29 (0%)

P = 0.061

P=0.018

0.0%

# TABLE 7. ANALYSIS OF LUNG LESIONS IN MALE RATS IN THE TWO-YEAR STUDIES OF 8-HYDROXYQUINOLINE (a)

(a) The statistical analyses used are described in Chapter II (Statistical Methods) and Appendix E (footnotes).
(b) The equivalent dose in milligrams per kilograms per day is given in Chapter III (Body Weights and Clinical Signs) and in Appendix L.

(c) Historical incidence: testing laboratory--13/696 (1.9%); NTP laboratories--57/2,357 (2.4%)

**Terminal Rates** 

Life Table Tests

**Overall Rates** 

**Overall Rates** 

**Adjusted Rates** 

**Terminal Rates** 

Life Table Tests

Incidental Tumor Tests

**Incidental Tumor Tests** 

Alveolar/Bronchiolar Carcinoma

Alveolar/Bronchiolar Adenoma or Carcinoma (c)

	Control	1,500 ppm	3,000 ppm
MALE			- <u> </u>
C-Cell Hyperplasia			
Overall Rates	4/50 (8%)	3/49 (6%)	1/47(2%)
C-Cell Adenoma			
Overall Rates	1/50 (2%)	1/49 (2%)	2/47 (4%)
C-Cell Carcinoma			
Overall Rates	0/50 (0%)	0/49 (0%)	4/47 (9%)
Adjusted Rates	0.0%	0.0%	11.2%
Terminal Rates	0/29 (0%)	0/34 (0%)	3/33 (9%)
Life Table Tests	P=0.018	(a)	P = 0.080
Incidental Tumor Tests	P = 0.016	(a)	P=0.068
C-Cell Adenoma or Carcinoma (b)			
Overall Rates	1/50 (2%)	1/49 (2%)	6/47(13%)
Adjusted Rates	2.5%	2.9%	17.1%
Terminal Rates	0/29 (0%)	1/34 (3%)	5/33(15%)
Life Table Tests	P = 0.030	P = 0.735N	P = 0.080
Incidental Tumor Tests	P = 0.025	P=0.717	P = 0.062
FEMALE			
C-Cell Hyperplasia			
Overall Rates	9/48 (19%)	6/50 (12%)	1/49(2%)
C-Cell Adenoma			
Overall Rates	1/48 (2%)	2/50 (4%)	5/49(10%)
Adjusted Rates	2.2%	4.8%	13.3%
Terminal Rates	0/37 (0%)	1/40 (3%)	4/36(11%)
Life Table Tests	P=0.054	P = 0.501	P=0.097
Incidental Tumor Tests	P = 0.041	P=0.350	P = 0.076
C-Cell Carcinoma			
Overall Rates	2/48 (4%)	0/50 (0%)	1/49(2%)
C-Cell Adenoma or Carcinoma			
Overall Rates	3/48 (6%)	2/50 (4%)	6/49(12%)
Adjusted Rates	7.5%	4.8%	16.0%
Terminal Rates	2/37 (5%)	1/40 (3%)	5/36 (14%)
Life Table Tests	P = 0.154	P=0.485N	P=0.227
Incidental Tumor Tests	P = 0.128	P = 0.602N	P=0.197

### TABLE 8. ANALYSIS OF THYROID GLAND LESIONS IN RATS IN THE TWO-YEAR FEED STUDIES OF8-HYDROXYQUINOLINE

(a) No P value is presented because no tumors were observed in the 1,500-ppm and control groups.
(b) Historical incidence: testing laboratory--54/664 (8.1%); NTP laboratories--203/2,282 (8.9%).

#### **FIFTEEN-DAY STUDIES**

All mice that received 25,000 or 50,000 ppm 8hydroxyquinoline in feed died before the end of the study (Table 9). Four of five male mice that received 12,000 ppm lost weight. Although feed consumption was not measured, mice that received 12,000 ppm or more ate noticeably less than did the controls. Five of five female mice that received 50,000 ppm and 4/5 female mice that received 25,000 ppm were emaciated according to necropsy reports.

#### TABLE 9. SURVIVAL AND MEAN BODY WEIGHTS OF MICE IN THE FIFTEEN-DAY FEED STUDIES OF 8-HYDROXYQUINOLINE

		Mear	<b>Final Weight</b>		
Dose Survival (a) (ppm)	Initial (b)	Final	Change (c)	Relative to Controls (percent)	
MALE					
0	5/5	$26.6 \pm 0.5$	$29.0 \pm 0.8$	$+2.4 \pm 0.6$	
3,000	5/5	$26.6 \pm 0.4$	$26.6 \pm 2.1$	$+0.0 \pm 2.1$	91.7
6,000	5/5	$26.4 \pm 0.8$	$26.8 \pm 0.7$	$+0.4 \pm 0.4$	92.4
12,000	5/5	$26.7 \pm 0.7$	$25.7 \pm 0.8$	$-1.0 \pm 0.4$	88.6
25,000	(d) 0/5	$26.5 \pm 0.4$	(e)	(e)	
50,000	(f) 0/5	$26.5 \pm 0.4$	(e)	(e)	
FEMALE					
0	5/5	$19.8 \pm 0.7$	$21.6 \pm 0.6$	$+1.8 \pm 0.4$	
3,000	5/5	$20.2 \pm 0.5$	$21.4 \pm 0.7$	$+1.2 \pm 0.4$	99.1
6,000	5/5	$20.2 \pm 0.3$	$20.9 \pm 0.6$	$+0.7 \pm 0.4$	96.8
12,000	5/5	$20.1 \pm 0.4$	$20.8 \pm 0.5$	$+0.7 \pm 0.1$	96.3
25,000	(g) 0/5	$19.7 \pm 0.4$	(e)	(e)	
50,000	(h) 0/5	$19.5 \pm 0.5$	(e)	(e)	

(a) Number surviving/number initially in the group

(b) Initial body weight  $\pm$  standard error of the mean for all animals in the group

(c) Mean weight change of the survivors of the group  $\pm$  standard error of the mean

(d) Deaths were on days 10, 11, 12, 12, and 12.

(e) No data are presented due to the 100% mortality in this group.

(f) Deaths were on days 4, 6, 6, 6, and 7.

(g) Deaths were on days 11, 11, 11, 11, and 12.

(h) Deaths were on days 4, 4, 4, 4, and 5.

#### THIRTEEN-WEEK STUDIES

No compound-related deaths occurred; all deaths were accidental (Table 10). Final mean body weights relative to controls were depressed 11% for male mice and 10% for female mice that received 6,000 ppm 8-hydroxyquinoline in feed. Feed consumption by mice that received 6,000 ppm 8-hydroxyquinoline was 82% that of controls for males and 74% that of controls for females. No compound-related histopathologic

effects were observed in the high dose (6,000 ppm) male or female mice. Mice in lower dose groups were not examined.

Because of weight gain depression observed at 6,000 ppm, concentrations selected for mice for the 2-year studies were 1,500 and 3,000 ppm 8-hydroxyquinoline in feed.

#### TABLE 10. SURVIVAL, MEAN BODY WEIGHTS, AND FEED CONSUMPTION OF MICE IN THE THIRTEEN-WEEK FEED STUDIES OF 8-HYDROXYQUINOLINE

		Mean E	ody Weight	(grams)	Final Weight Relative to	Feed	Calculated
Dose (ppm)	Survival (a)	Initial (b)	Final	Change	Controls (percent)	Consumption (c)	Dose (mg/kg/day)
MALE				<u> </u>			
0	(d) 9/10	$24.4 \pm 0.8$	$35.4 \pm 1.1$	$+11.0 \pm 0.8$		157	0
400	10/10	$24.7 \pm 0.7$	36.7 ± 0.8	$+12.0 \pm 0.7$	103.7	149	60
800	10/10	$24.3 \pm 0.5$	35.6 ± 0.9	$+11.3 \pm 0.7$	100.6	141	113
1,500	10/10	$24.6 \pm 0.6$	$34.3 \pm 0.6$	$+ 9.7 \pm 0.8$	96.9	130	195
3,000	10/10	$24.8 \pm 0.8$	34.8 ± 0.7	$+10.0 \pm 0.5$	98.3	135	405
6,000	10/10	$24.1 \pm 0.6$	$31.4 \pm 0.8$	$+ 7.3 \pm 0.6$	88.7	129	774
FEMALE							
0	10/10	$18.6 \pm 0.4$	26.9 ± 0.7	$+ 8.3 \pm 0.5$		200	0
400	10/10	$18.6 \pm 0.4$	$26.8 \pm 1.0$	$+ 8.2 \pm 0.7$	99.6	192	77
800	10/10	$18.7 \pm 0.4$	$27.2 \pm 0.9$	$+8.5\pm0.7$	101.1	207	166
1,500	10/10	$18.8 \pm 0.3$	$27.2 \pm 0.6$	$+8.4\pm0.5$	101.1	183	275
3,000	(d) 7/10	$18.8 \pm 0.4$	$26.3 \pm 1.1$	$+7.3 \pm 0.6$	97.8	392	1,176
6,000	10/10	$19.0 \pm 0.4$	$24.1 \pm 0.7$	$+ 5.1 \pm 0.5$	89.6	148	888

(a) Number surviving/number per group

(b) Initial body weight  $\pm$  standard error of the mean for all animals in the group. Subsequent calculations are based on

those animals surviving to the end of the study.

(c) Grams per kilogram body weight per day during week 12

(d) All deaths were accidental.

#### **TWO-YEAR STUDIES**

#### **Body Weights and Clinical Signs**

Mean body weights of high dose male mice were slightly lower than those of the controls throughout most of the study (Table 11 and Figure 3). Mean body weights of both low dose and high dose female mice were lower than those of the controls. The average daily feed consumption by low dose and high dose male mice was 81% and 72% that of the controls and by low dose and high dose female mice, 86% and 71% that of the controls (Appendix L, Tables L3 and L4). Approximate chemical consumption for low dose and high dose mice (mice were group housed) was 217 and 396 mg/kg for males and 349 and 619 mg/kg for females.

TABLE 11. MEAN BODY WEIGHTS AND SURVIVAL OF MICE IN THE TWO-YEAR FEED STUDIES OF 8-HYDROXYQUINOLINE

Weeks on Study	Co	ntrol		1.500 ppm			3.000 ppm	
on Study	Co Av. WL (grams)	No. of Survivors	Av. Wt. (grams)	1.500 ppm WL (percent of controls)	No. of Survivors	Av. WL (grams)	3,000 ppm WL (percent of controls)	No. of Survivors
MALE						· · ·	·	
$\begin{array}{c} 0 \\ 1 \\ 3 \\ 4 \\ 5 \\ 6 \\ 7 \\ 8 \\ 9 \\ 10 \\ 112 \\ 120 \\ 228 \\ 326 \\ 404 \\ 48 \\ 256 \\ 604 \\ 68 \\ 276 \\ 804 \\ 88 \\ 996 \\ 104 \\ \end{array}$	25789901112233334556899Q112413355555445544444322	50 500 500 550 550 550 550 550 550 550	25389900 3312233433568899411243335445554434431241	$\begin{array}{c} 100.0\\ 85.2\\ 100.0\\ 100.0\\ 100.0\\ 96.8\\ 100.0\\ 100.0\\ 100.0\\ 100.0\\ 100.0\\ 100.0\\ 100.0\\ 100.0\\ 100.0\\ 100.0\\ 100.0\\ 100.0\\ 100.0\\ 100.0\\ 100.0\\ 100.0\\ 100.0\\ 100.0\\ 97.6\\ 102.3\\ 100.0\\ 97.8\\ 100.0\\ 97.8\\ 100.0\\ 97.8\\ 100.0\\ 97.8\\ 100.0\\ 97.8\\ 100.0\\ 97.8\\ 100.0\\ 97.8\\ 100.0\\ 97.8\\ 100.0\\ 97.8\\ 100.0\\ 97.8\\ 100.0\\ 97.8\\ 100.0\\ 97.8\\ 97.7\\ 95.3\\ 100.0\\ 97.6\\ 100.0\\ 97.6\\ 100.0\\ 97.6\\ 100.0\\ 97.6\\ 100.0\\ 97.6\\ 100.0\\ 97.6\\ 100.0\\ 97.6\\ 100.0\\ 97.6\\ 100.0\\ 97.6\\ 100.0\\ 97.6\\ 100.0\\ 100.0\\ 97.6\\ 100.0\\ 97.6\\ 100.0\\ 100$	50 50 50 50 50 50 50 50 50 50 50 50 50 5	25 288 229 300 312 322 333 334 401 422 223 434 433 433 443 433 441 442 443 443 443 442 444 443 443 442 444 443 443	$\begin{array}{c} 100.0\\ 96.3\\ 100.0\\ 100.0\\ 996.8\\ 100.0\\ 997.0\\ 100.0\\ 977.0\\ 100.0\\ 977.1\\ 977.1\\ 977.1\\ 977.4\\ 977.5\\ 100.0\\ 977.7\\ 977.5\\ 100.0\\ 955.6\\ 935.6\\ 935.6\\ 935.6\\ 935.6\\ 935.6\\ 935.6\\ 935.6\\ 935.6\\ 935.8\\ 957.8\\ 955.8\\ 935.8\\ 957.8\\ 955.8\\ 935.8\\ 957.8\\ 955.8\\ 935.8\\ 957.8\\ 955.8\\ 935.8\\ 957.8\\ 955.8\\ 935.8\\ 957.8\\ 955$	5000099999999988877777777777766644444111785
FEMALE								
0 1 3 4 5 6 7 8 9 10 11 12 24 22 360 44 52 60 48 52 60 48 52 60 48 52 60 48 52 60 48 90 11 12 16 20 48 56 7 80 48 56 60 7 80 90 11 12 16 20 48 56 60 44 56 60 48 56 56 60 48 56 60 48 56 60 60 60 60 60 60 60 60 60 6	19 201 22224 244 255 288 288 291 324 367 391 144 448 490 559 488 498 475	50 50 50 50 50 50 50 50 50 50 50 50 50 5	$\begin{array}{c} 19\\ 21\\ 22\\ 222\\ 24\\ 24\\ 24\\ 26\\ 28\\ 30\\ 32\\ 33\\ 34\\ 37\\ 39\\ 423\\ 36\\ 46\\ 46\\ 46\\ 46\\ 46\\ 46\\ 46\\ 46\\ 44\\ 44$	$\begin{array}{c} 100.0\\ 105.0\\ 100.0\\ 100.0\\ 96.0\\ 100.0\\ 100.0\\ 100.0\\ 100.0\\ 100.0\\ 100.0\\ 100.0\\ 100.0\\ 100.0\\ 100.0\\ 100.0\\ 100.0\\ 100.0\\ 996.0\\ 996.0\\ 996.0\\ 995.5\\ 995.5\\ 995.5\\ 995.8\\ 993.9\\ 995.8\\ 993.9\\ 995.8\\ 993.9\\ 995.8\\ 993.9\\ 995.8\\ 993.9\\ 993.8\\ 993.8\\ 993.8\\ 993.8\\ 997$	50 50 50 50 50 50 50 50 50 50 50 50 50 5	$\begin{array}{c} 19\\ 201\\ 211\\ 223\\ 24\\ 24\\ 25\\ 25\\ 25\\ 27\\ 28\\ 30\\ 33\\ 32\\ 30\\ 33\\ 34\\ 53\\ 7\\ 38\\ 41\\ 41\\ 41\\ 40\\ 41\\ 41\\ 40\\ 39\\ 40\\ \end{array}$	$\begin{array}{c} 100.0\\ 100.0\\ 95.5\\ 100.0\\ 95.5\\ 100.0\\ 96.0\\ 96.0\\ 96.2\\ 96.2\\ 96.2\\ 96.4\\ 96.6\\ 93.5\\ 93.8\\ 91.2\\ 88.9\\ 28.9\\ 89.2\\ 85.4\\ 85.2\\ 85.4\\ 8$	50 500 500 500 500 500 500 500 500 500

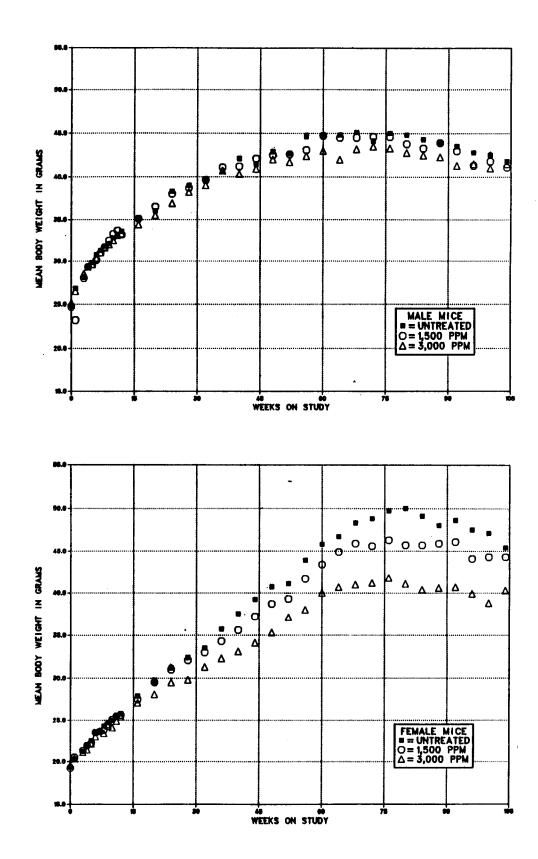


FIGURE 3. GROWTH CURVES FOR MICE ADMINISTERED 8-HYDROXYQUINOLINE IN FEED FOR TWO YEARS

#### Survival

Estimates of the probabilities of survival of male and female mice fed diets containing 8-hydroxyquinoline at the concentrations used in these studies and those of the controls are shown in the Kaplan and Meier curves in Figure 4. No significant differences in survival were observed between any groups of either sex (Table 12).

### Pathology and Statistical Analyses of Results

This section describes significant or noteworthy

changes in the incidences of animals with neoplastic or nonneoplastic lesions. Histopathologic findings on neoplasms in mice are summarized in Appendix B, Tables B1 and B2; Tables B3 and B4 give the survival and tumor status for individual male and female mice. Findings on nonneoplastic lesions are summarized in Appendix D, Tables D1 and D2. Appendix E, Tables E3 and E4, contain the statistical analyses of those primary tumors that occurred with an incidence of at least 5% in one of the three groups. The statistical analyses used are discussed in Chapter II (Statistical Methods) and Appendix E (footnotes).

#### TABLE 12. SURVIVAL OF MICE IN THE TWO-YEAR FEED STUDIES OF 8-HYDROXYQUINOLINE

	Control	1 <b>,500 ppm</b>	3,000 ppr	
MALE (a)	<u></u>		·······	
Animals initially in study	50	50	50	
Nonaccidental deaths before termination (b)	21	15	15	
Killed at termination	29	35	35	
Survival P values (c)	0.208	0.171	0.267	
FEMALE (a)				
Animals initially in study	50	50	50	
Nonaccidental deaths before termination (b)	26	23	19	
Killed at termination	24	26	2 <del>9</del>	
Died during termination period	0	1	2	
Survival P values (c)	0.181	0.381	0.236	

(a) Terminal kill period: weeks 104-105

(b) Includes animals killed in a moribund condition

(c) The result of the life table trend test is in the control column, and the life table exact pairwise comparisons with the controls are in the dosed columns.

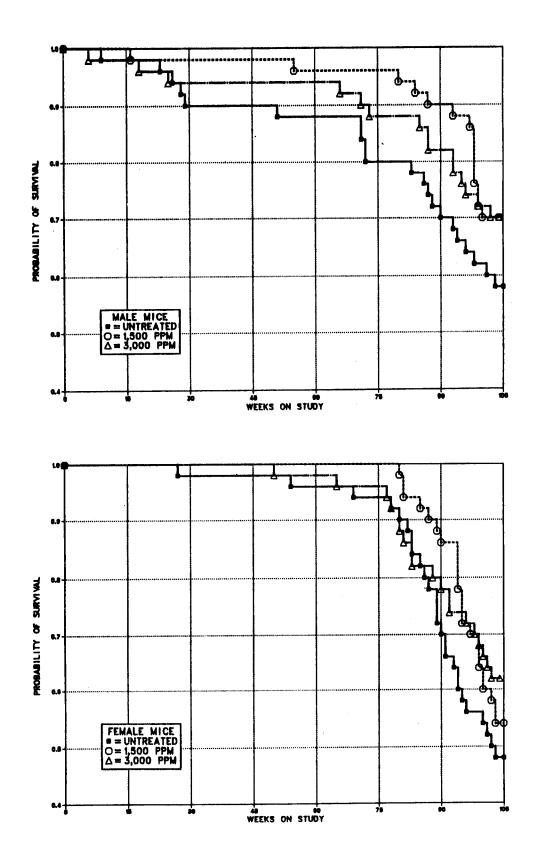


FIGURE 4. KAPLAN-MEIER SURVIVAL CURVES FOR MICE ADMINISTERED 8-HYDROXYQUINOLINE IN FEED FOR TWO YEARS

8-Hydroxyquinoline, NTP TR 276

Circulatory System: Hemangiomas and hemangiomas or hemangiosarcomas (combined) in male mice occurred with significant negative trends, and the incidences in the dosed groups were significantly lower than those in the controls (Table 13). The incidence of hemangiomas or hemangiosarcomas (combined) in low dose female mice was significantly greater than that in the controls by the Fisher exact test, but the difference was not significant by methods that adjusted for survival. The incidences of circulatory system tumors in the male control group were markedly greater than those observed in historical control groups, both at this laboratory and throughout the Program.

Other Tumor Effects: Marginal decreases in malignant lymphoma (control, 12/50; low dose,

6/50; high dose, 6/50) in dosed male mice and hepatocellular carcinomas (control, 3/49; low dose, 1/50; high dose, 0/49) in dosed female mice were not considered to be chemically related (Appendix E, Tables E3 and E4).

Multiple Organs: Necrotizing inflammation of the ovary, uterus, and thoracic or abdominal cavities was found in 20/26 control, 11/24 low dose, and 10/21 high dose female mice that died before the end of the study, primarily after week 80. The gross diagnosis of the necrotizing inflammation was based on the presence of thick yellow fluid. A microscopic review indicated that these lesions were consistent with Klebsiella infection, and overall 22/50 control, 13/50 low dose, and 12/50 high dose female mice were infected.

	Control	1,500 ppm (b)	<b>3,000 ppm (b</b> )	
MALE				
Hemangioma (c)				
Overall Rates	7/50 (14%)	1/50 (2%)	0/50 (0%)	
Adjusted Rates	21.0%	2.9%	0.0%	
Terminal Rates	4/29 (14%)	1/35 (3%)	0/35 (0%)	
Life Table Tests	P<0.001N	P = 0.019N	P=0.006N	
Incidental Tumor Tests	P = 0.002N	P=0.026N	P=0.010N	
Hemangiosarcoma (d)				
Overall Rates	3/50 (6%)	1/50 (2%)	1/50 (2%)	
Hemangioma or Hemangiosarcoma				
Overall Rates	10/50 (20%)	2/50 (4%)	1/50 (2%)	
Adjusted Rates	29.3%	5.1%	2.1%	
Terminal Rates	6/29 (21%)	1/35 (3%)	0/35 (0%)	
Life Table Tests	P<0.001N	P = 0.007 N	P=0.003N	
Incidental Tumor Tests	P = 0.002N	P=0.010N	P=0.006N	
FEMALE				
Hemangioma (e)				
Overall Rates	0/50 (0%)	4/50 (8%)	1/50 (2%)	
Adjusted Rates	0.0%	11.5%	3.2%	
Terminal Rates	0/24 (0%)	1/27 (4%)	1/31 (3%)	
Life Table Tests	P=0.467	P=0.096	P = 0.551	
Incidental Tumor Tests	P=0.351	P=0.132	P = 0.551	
Hemangiosarcoma (f)				
Overall Rates	0/50 (0%)	1/50 (2%)	0/50 (0%)	
Hemangioma or Hemangiosarcoma				
Overall Rates	0/50 (0%)	5/50 (10%)	1/50 (2%)	
Adjusted Rates	0.0%	14.9%	3.2%	
Terminal Rates	0/24 (0%)	2/27 (7%)	1/31 (3%)	
Life Table Tests	P=0.487	P=0.055	P = 0.551	
Incidental Tumor Tests	P=0.384	P=0.075	P = 0.551	

### TABLE 13. ANALYSIS OF CIRCULATORY SYSTEM TUMORS IN MICE IN THE TWO-YEAR FEEDSTUDIES OF 8-HYDROXYQUINOLINE (a)

(a) The statistical analyses used are described in Chapter II (Statistical Methods) and Appendix E (footnotes).
(b) The equivalent dose in milligrams per kilograms per day is given in Chapter III (Body Weights and Clinical Signs) and in Appendix L.

(c) Historical incidence for hemangioma: testing laboratory -- 17/745 (2.3%); NTP laboratories -- 34/2,395 (1.4%) (d) Historical incidence for hemangiosarcoma or angiosarcoma: testing laboratory--31/745 (4.2%); NTP laboratories--65/2,395 (2.7%)

(e) Historical incidence for hemangioma: testing laboratory--15/748 (2.0%); NTP laboratories--39/2,537 (1.5%) (f) Historical incidence for hemangiosarcoma or angiosarcoma: testing laboratory--14/748 (1.9%); NTP laboratories--51/2,537 (2.0%)

8-Hydroxyquinoline, NTP TR 276

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IV. DISCUSSION AND CONCLUSIONS

Studies were conducted by administering 8-hydroxyquinoline in feed to rats and mice for 15 days (0, 3,000-50,000 ppm) and 13 weeks (rats: 0, 800-12,000 ppm; mice: 0, 400-6,000 ppm). The 25,000- or 50,000-ppm diets produced emaciation, weight loss, and death. Weight gain depression and reduced feed consumption also occurred at the highest concentrations used in the 13-week studies. Decreased feed consumption and body weight depression were previously reported for rats and mice given diets containing 8-hydroxyquinoline (Yamamoto et al., 1971; Galea and Popa, 1972; Fukushima et al., 1981). No compound-related gross or microscopic pathologic lesions were observed in the studies.

Administration of 8-hydroxyquinoline in feed for 2 years (0, 1,500, or 3,000 ppm) did not affect survival of rats or mice. The slight reductions in mean body weight gains that occurred in the high dose groups were probably related to reduced feed consumption. Results of the 13-week and 2-year studies indicate that higher concentrations of 8-hydroxyquinoline in feed would not be palatable.

No evidence of compound-related nonneoplastic or neoplastic lesions was found in female rats. In male rats, alveolar/bronchiolar adenomas or carcinomas (combined) occurred with a positive trend in the dosed groups, and the incidence in the high dose group was significantly greater than that in the concurrent controls (Tables 7 and 14). The proportion of high dose animals with lung tumors (8%) was above the average in controls at this laboratory (2%) and throughout the Carcinogenesis Program (2.4%); neither the individual nor the combined incidences of adenomas and carcinomas were greater than those previously observed (Appendix F, Table F3). Most of these lesions did not appear to differ from lung tumors observed in control animals, and the adenomas were lesions that were borderline between focal epithelial hyperplasias and small adenomas. Epithelial hyperplasia was not increased in the dosed males. The difference between this lesion and alveolar/bronchiolar adenoma is one of degree. Dosed male and female mice also showed increased incidences of lung tumors (Table 14); however, these increases were not statistically significant and were

within the range of historical values. Hence, none of these marginal effects in the lungs of rats or mice was regarded as being associated with the administration of 8-hydroxyquinoline.

Thyroid gland C-cell adenomas and C-cell adenomas or carcinomas (combined) in male rats and C-cell adenomas in female rats occurred with positive trends (Tables 8 and 14). The incidences of these neoplasms in the high dose groups were not statistically significant compared with the controls. For both sexes, C-cell hyperplasia decreased with dose. Proliferation of C-cells in the thyroid gland of aging rats is not uncommon and appears to begin as mild, diffuse, or small focal collections of C-cells adjacent to the follicular epithelium. As the proliferation continues, the follicular epithelium is compressed and contiguous follicles become involved. Lesions smaller than three follicles are arbitrarily classified as hyperplasia. Lesions that are larger and restricted to one lobe are adenomas; and lesions involving the thyroid capsule, invading adjacent tissue, or having obvious malignant characteristics (such as metastases) are classified as C-cell carcinomas. Since these lesions occur in about 9% of F344/N rats (Appendix F, Tables F4 and F5) and the distinction between hyperplasia and adenoma is one of degree, the marginally increased incidences of these neoplastic lesions are not considered to be chemically related.

Neoplastic nodules or carcinomas of the liver decreased in low dose male rats, but the incidence in the high dose group was not significantly different from that in the controls. Mononuclear cell leukemia occurred with a negative trend in male rats, and the incidences in the dosed groups were lower than that in the controls. Neither of these decreases was considered to be related to administration of 8-hydroxyquinoline. Quinoline, the parent compound of 8-hydroxyquinoline, was found to produce increased incidences of hepatocellular carcinomas and hemangioendotheliomas when incorporated into the diet of male Sprague-Dawley rats at a concentration of 500 ppm for 40 weeks (Hirao et al., 1976). No such effects were observed in the present study.

	Control	1,500 ppm	3,000 ppm
MALE RATS			
Lung			
Epithelial Hyperplasia Alveolar/Bronchiolar Adenoma/Carcinoma	5/50 0/50	5/50 3/50	3/50 4/50
ጥե ፡ J			
Thyroid C-Cell Hyperplasia	4/50	3/49	1/47
C-Cell Adenoma/Carcinoma	1/50	1/49	6/47
Liver			
Neoplastic Nodule	6/49	1/50	3/48
Carcinoma	1/49	0/50	0/48
Hematopoietic System			
Mononuclear Cell Leukemia	17/50	8/50	9/50
FEMALE RATS			
Thyroid			
C-Cell Hyperplasia	9/48	6/50	1/49
C-Cell Adenoma/Carcinoma	3/48	2/50	6/49
MALE MICE			
Circulatory System			
Hemangioma	7/50	1/50	0/50
Hemangiosarcoma	3/50	1/50	1/50
Hematopoietic System			
Malignant Lymphoma	12/50	6/50	6/50
Lung			
Epithelial Hyperplasia	1/50	0/49	5/50
Alveolar/Bronchiolar Adenoma/Carcinoma	6/50	10/49	10/50
FEMALE MICE			
Circulatory System			
Hemangiona	0/50 0/50	4/50 1/50	1/50 0/50
Hemangiosarcoma	0/80	1/00	0/00
Hematopoietic System	1/50	1/50	6/50
Malignant Lymphocytic Lymphoma Malignant Lymphoma (all types)	1/50 13/50	1/50	6/50 12/50
mangnant Lymphonia (an types)	19/00	10/00	14/00
Liver	240	1/50	0/40
Carcinoma	3/49	1/50	0/49
Lung			
Epithelial Hyperplasia	1/49	0/50	0/50
Alveolar/Bronchiolar Adenoma/Carcinoma	2/49	5/50	5/50

### TABLE 14. INCIDENCES OF LESIONS IN RATS AND MICE IN THE TWO-YEAR FEED STUDIES OF8-HYDROXYQUINOLINE

In mice, incidences of hemangiomas and hemangiosarcomas or hemangiomas were decreased in dosed males. The incidences in the control group were notably greater than the highest incidence previously observed in the historical controls (Appendix F, Table F6). The combined incidence of these lesions was marginally increased in low dose female mice. and the incidence in the high dose group was not significantly greater than that in the controls. The decrease in circulatory system tumors in mice is considered to be unrelated to 8-hydroxyquinoline administration. No explanation is readily apparent for the increased incidence of circulatory system tumors in the concurrent controls relative to NTP historical control values.

Marginal decreases were observed in malignant lymphoma in dosed male mice and hepatocellular carcinoma in dosed female mice, but neither of these effects was considered to be chemically related.

In female mice, the incidence of necrotizing inflammation of multiple organs (utero-ovarian and thoracic or abdominal cavities) correlated with Klebsiella infection. The lesions were similar to those found in female mice in other NTP studies in which a diagnosis of Klebsiella was made.

Neurologic or neuropathologic lesions induced in humans or animals by halogenated derivatives of 8-hydroxyquinoline (Oakley, 1973; Murayama et al., 1974) were not observed in this study with 8-hydroxyquinoline.

8-Hydroxyquinoline is mutagenic in strain TA100 of Salmonella typhimurim and causes chromosomal aberrations in the bean plant Vicia faba; however, the compound gave equivocal or inconclusive results in a variety of other short-term tests (see Introduction). In NTP in vitro tests, 8-hydroxyquinoline did not induce either unscheduled DNA synthesis in rat hepatocytes or transformation of BALB/c-3T3 cells (Appendix M). These results are consistent with the lack of carcinogenicity in the present studies.

Conclusions: Under the conditions of these studies, there was no evidence of carcinogenicity<sup>\*</sup> for male and female F344/N rats or for male and female B6C3F<sub>1</sub> mice given 8-hydroxyquinoline in feed at concentrations of 1,500 or 3,000 ppm for 103 weeks.

<sup>\*</sup>Categories of evidence of carcinogenicity are defined in the Note to the Reader on page 2.

### **V. REFERENCES**

1. Allen, M.; Boyland, E.; Dukes, C.; Horning, E.; Watson, J. (1957) Cancer of the urinary bladder induced in mice with metabolites of aromatic amines and tryptophan. Br. J. Cancer 11:212-228.

2. Armitage, P. (1971) Statistical Methods in Medical Research. New York: John Wiley & Sons, Inc., pp. 362-365.

3. Association of American Pesticide Control Officials, Inc. (AAPCO) (1966) Pesticide Chemicals Official Compendium, p. 602.

4. Berenblum, I., Ed. (1969) Carcinogenicity Testing: A Report of the Panel on Carcinogenicity of the Cancer Research Commission of UICC, Vol. 2. Geneva: International Union Against Cancer.

5. Berggren, L.; Hansson, O. (1968) Absorption of intestinal antiseptics derived from 8-hydroxyquinoline. Clin. Pharmacol. Ther. 9:67-70.

6. Bernstein, E.; Pienta, P.; Gershon, H. (1963) Acute toxicity studies on 8-quinolinol and some derivatives. Toxicol. Appl. Pharmacol. 5:599-604.

7. Boorman, G.; Montgomery, C., Jr.; Hardisty, J.; Eustis, S.; Wolfe, M., McConnell, E. (1985) Quality assurance in pathology for rodent toxicology and carcinogenicity tests. Milman, H.; Weisburger, E., Eds.: Handbook of Carcinogen Testing. Park Ridge, NJ: Noyes Publications (in press).

8. Bowden, J.; Chang, K.; Andrews, A. (1976) Mutagenic activity of tryptophan metabolites produced by rat intestinal microflora. J. Natl. Cancer Inst. 57:921-924.

9. Boyland, E.; Watson, G. (1956) 3-Hydroxyanthranilic acid, a carcinogen produced by endogenous metabolism. Nature 177:837-838.

10. Boyland, E.; Roe, F.; Mitchley, B. (1966) Test of certain constituents of spermicides for carcinogenicity in genital tract of female mice. Br. J. Cancer 20:184-189.

11. Bryan, G.; Brown, R.; Price, J. (1964) Incidence of mouse bladder tumors following implantation of paraffin pellets containing certain tryptophan metabolites. Cancer Res. 24:582-585. 12. Cox, D. (1972) Regression models and life tables. J. R. Stat. Soc. B34:187-220.

13. Davis, H.; Siegel, B.; Joist, J.; Heaton, W.; Mathias, C.; Sherman, L.; Welch, M. (1978) Scintigraphic detection of atherosclerotic lesions and venous thrombi in man by indium-111labelled autologous platelets. Lancet, June 3, pp. 1185-1187.

14. Epler, J.; Winton, W.; Ho, T.; Larimer, F.; Rao, T.; Hardigree, A. (1977) Comparative mutagenesis of quinolines. Mutat. Res. 39:285-296.

15. Federal Register (1983) Vaginal drug products for over-the-counter human use; establishment of a monograph. 48(199):46694-46729.

16. Fukushima, S.; Ishihara, Y.; Nishio, O.; Ogiso, T.; Shirai, T., Ito, N. (1981) Carcinogenicities of quinoline derivatives in F344 rats. Cancer Lett. 14:115-123.

17. Galea, V.; Popa, L. (1972) Chronic toxicity of some oxyquinoline drugs. Farmacia (Bucharest) 20:403-410.

18. Gart, J.; Chu, K.; Tarone, R. (1979) Statistical issues in interpretation of chronic bioassay tests for carcinogenicity. J. Natl. Cancer Inst. 62(4):957-974.

19. Gocke, E.; King, M.; Eckhardt, K.; Wild, D. (1981) Mutagenicity of cosmetics ingredients licensed by the European communities. Mutat. Res. 90:91-109.

20. Griffiths, A. (1979) Neurospora prototroph selection system for studying aneuploid production. Environ. Health Perspect. 31:75-80.

21. Hadidian, Z.; Fredrickson, T.; Weisburger, E.; Weisburger J.; Glass, R.; Mantel, N. (1968) Tests for chemical carcinogens. Report on the activity of derivatives of aromatic amines, nitrosamines, quinolines, nitroalkanes, amides, epoxides, aziridines and pure anti-metabolites. J. Natl. Cancer Inst. 41:985-1036.

22. Harvey, S. (1975) Antimicrobial drugs. Osol, A. et al., Eds.: Remington's Pharmaceutical Sciences, 15th ed. Easton, PA: Mack, pp. 1093, 1103, 1159. 23. Haseman, J. (1984) Statistical issues in the design, analysis and interpretation of animal carcinogenicity studies. Environ. Health Perspect. (in press).

24. Hirao, K.; Shinohara, Y.; Tsuda, H.; Fukushima, S.; Takahashi, M.; Ito, N. (1976) Carcinogenic activity of quinoline on rat liver. Cancer Res. 36:329-335.

25. Hiss, E.; Preston, R. (1977) The effects of cytosine arabinoside on the frequency of singlestrand breaks in DNA of mammalian cells following irradiation or chemical treatment. Biochim. Biophys. Acta 478:1-8.

26. Hoch-Ligeti, C. (1957) Effect of prolonged administration of spermicidal contraceptives on rats kept on low-protein or on full diet. J. Natl. Cancer Inst. 18:661-685.

27. Hollingshead, R. (1954) Oxine and its Derivatives. London: Butterworth Scientific Publications.

28. Hollstein, M.; Talcott, R.; Wei, E. (1978) Quinoline: Conversion to a mutagen by human and rodent liver. J. Natl. Cancer Inst. 60:405-410.

29. Hueper, W. (1965) Experimental studies on 8-hydroxyquinoline in rats and mice. Arch. Pathol. 79:245-250.

30. International Agency for Research Against Cancer (IARC) (1977) 8-Hydroxyquinoline. IARC Monographs on the Evaluation of the Carcinogenic Risk to Man: Some Miscellaneous Pharmaceutical Substances, Vol. 13. Lyon, France: IARC, pp. 101-112.

31. Jack, D.; Riess, W. (1973) Pharmacokinetics of iodochlorhydroxyquin in man. J. Pharm. Sci. 62:1929-1932.

32. Kakunaga, T. (1973) A quantitative system for assay of malignant transformation by chemical carcinogens using a clone derived from BALB/3T3. Int. J. Cancer 12:463-473.

33. Kaplan, E.; Meier, P. (1958) Nonparametric estimation of incomplete observations. J. Am. Stat. Assoc. 53:457-481. 34. Kihlman, B. (1957) Experimentally induced chromosome aberrations in plants. J. Biophys. Cytol. 3:363-380.

35. Linhart, M.; Cooper, J.; Martin, R.; Page, N.; Peters, J. (1974) Carcinogenesis bioassay data system. Comp. Biomed. Res. 7:230-248.

36. Mantel, N.; Haenszel, W. (1959) Statistical aspects of the analysis of data from retrospective studies of disease. J. Natl. Cancer Inst. 22:719-748.

37. Maronpot, R.R.; Boorman, G.A. (1982) Interpretation of rodent hepatocellular proliferative alterations and hepatocellular tumors in chemical safety assessment. Toxicol. Pathol. 10:71-80.

38. Merck Index, (1976) 9th ed. Rahway, NJ: Merck and Company, p. 644.

39. Murayama, S.; Yamada, S.; Tashiro, K. (1974) Histopathological study of the effect of chinoform and its related compounds on the rat. Nippon Yakurigaku Zasshi 70:241-249.

40. Nagao, M.; Yahagi, T.; Seino, Y.; Sugimura, T.; Ito, N. (1977) Mutagenicities of quinoline and its derivatives. Mutat. Res. 42:335-342.

41. Nakahara, W.; Fukuoka, F., Sagimura, T. (1957) Carcinogenic action of nitroquinoline-N-oxide. GANN 48:129-137.

42. NCI/SRI Mark II. Data Base on Category E Drug Exposure (1978) National Cancer Institute, Contract No. N01-CP-33285.

43. Oakley, G. (1973) The neurotoxicity of the halogenated hydroxyquinolines. J. Am. Med. Assoc. 225:395-397.

44. Preda, N.; Popa, L.; Sendrea, D.; Galea, V. (1974) Estimation de la nocivite des medicaments par le test a embryon de poulet. J. Eur. Toxicol. 7:177-181.

45. Rasanen, L.; Hattula, M.; Arstila, A. (1977) The mutagenicity of MCPA and its soil metabolites, chlorinated phenols, catechols, and some widely used slimicides in Finland. Bull. Environ. Contam. Toxicol. 18:565-571. 46. Registry of Toxic Effects of Chemical Substances (RTECS) (1980) National Institute for Occupational Safety and Health, Vol. 2, p. 574.

47. Sadtler Standard Spectra, IR No. 187, UV No. 76, NMR No. 24M.

48. Sawada, Y.; Hayashi, M.; Awazu, S.; Hanano, M. (1978) In vivo and in vitro fates of 8hydroxyquinoline derivatives in rat. Chem. Pharmacol. Bull. 26:1357-1363.

49. Simmon, V.; Peirce, M. (1980) Design, implementation, and monitoring of laboratories for handling chemical carcinogens and mutagens. Walters, D., Ed.: Safe Handling of Chemical Carcinogens, Mutagens, Teratogens, and Highly Toxic Substances, Vol. 1. Ann Arbor: Ann Arbor Science Publications, Inc., pp. 153-166.

50. Sugimura, T.; Sato, S.; Nagao, M.; Yahagi, T.; Matsuastrima, T.; Seino, Y.; Takeachi, M.; Kawachi, T. (1976) Overlapping of carcinogens and mutagens. Magee, P., et al., Eds.: Fundamentals in Cancer Prevention. Baltimore: University Park Press, pp. 191-215.

51. Talcott, R.; Hollstein, M.; Wei, E. (1976) Mutagenicity of 8-hydroxyquinoline and related compounds in the *Salmonella typhimurium* bioassay. Biochem. Pharmacol. 15:1323-1328. 52. Tarone, R. (1975) Tests for trend in life table analysis. Biometrika 62:679-682.

53. U.S. International Trade Commission (USITC) (1984) Imports of Benzenoid Chemicals and Products 1983. USITC Publication 1548, July. 101 p.

54. Volfson, N. (1976) On the genesis of granulosa-cell ovarian tumors experimental data. Neoplasma 23:151-160.

55. Williams, G. (1977) Detection of chemical carcinogens by unscheduled DNA synthesis in rat liver primary cell cultures. Cancer Res. 37:1845-1851.

56. Williams, G.; Bermudez, E.; Scaramuzzino, D. (1977) Rat hepatocyte primary cell cultures. III. Improved dissociation and attachment techniques and the enhancement of survival by culture medium. In Vitro 13:809-881.

57. Yamamoto, R.; Williams, G.; Frankel, H.; Weisburger, J. (1971) 8-Hydroxyquinoline: Chronic toxicity and inhibitory effect on the carcinogenicity of N-2-fluorenylacetamide. Toxicol. Appl. Pharmacol. 19:687-698.

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### **APPENDIX A**

# SUMMARY OF THE INCIDENCE OF NEOPLASMS IN RATS IN THE TWO-YEAR FEED STUDIES OF 8-HYDROXYQUINOLINE

C	ONTRO	L (UNTR)	LOWI	DOSE	HIGH	DOSE
ANIMALS INITIALLY IN STUDY	50	<u> </u>	50			
ANIMALS NECROPSIED	50		50		50	
ANIMALS EXAMINED HISTOPATHOLOGICALLY	50		50		50	
NTEGUMENTARY SYSTEM						,
*SKIN	(50)		(50)		(50)	
SQUAMOUS CELL PAPILLOMA			1	(2%)		
SQUAMOUS CELL CARCINOMA		(2%)				(0.0)
BASAL-CELL CARCINOMA	1	(2%)	1	(2%)	1	•
KERATOACANTHOMA	(20)		(50)			(4%)
*SUBCUT TISSUE	(50)		(50)	(90)	(50)	
CARCINOMA, NOS		(0.0)	1	(2%)		
KERATOACANTHOMA		(2%)				(90)
SARCOMA, NOS		(4%)		(901)		(2%)
FIBROMA FIBROSARCOMA	2	(4%)	4	(8%)		(10%) (2%)
			<u></u>	\		
RESPIRATORY SYSTEM			/EA\		(20)	
#LUNG	(50)		(50)	(40)	(50)	
CARCINOMA, NOS, METASTATIC	<b>.</b> .	(0.21)	z	(4%)		
HEPATOCELLULAR CARCINOMA, METAST	r I	(2%)		(40)		(00)
ALVEOLAR/BRONCHIOLAR ADENOMA				(4%)		(6%)
ALVEOLAR/BRONCHIOLAR CARCINOMA			1	(2%)		(2%)
C-CELL CARCINOMA, METASTATIC						(2%)
SARCOMA, NOS, METASTATIC					1	(2%)
SARCOMA, NOS, UNC PRIM OR META			1	(2%)		(
OSTEOSARCOMA, METASTATIC					1	(2%)
HEMATOPOIETIC SYSTEM						
*MULTIPLE ORGANS	(50)		(50)		(50)	
MALIGNANT LYMPHOMA, NOS	1	(2%)	2	(4%)	1	(2%)
MALIG. LYMPHOMA, LYMPHOCYTIC TYPE	C 1	(2%)				
MALIG. LYMPHOMA, HISTIOCYTIC TYPE	1	(2%)				(2%)
LEUKEMIA, MONONUCLEAR CELL	17	(34%)		(16%)		(18%)
#SPLEEN	(50)		(49)		(47)	
MESOTHELIOMA, INVASIVE	1	(2%)				
MALIGNANT LYMPHOMA, NOS			1	(2%)		
#MANDIBULAR L. NODE	(48)		(48)		(48)	
SARCOMA, NOS, UNC PRIM OR META			1	(2%)		
CIRCULATORY SYSTEM						
#SPLEEN	(50)		(49)		(47)	
HEMANGIOSARCOMA		(2%)	2	(4%)		
#LUNG	(50)		(50)		(50)	
HEMANGIOSARCOMA, METASTATIC				(2%)		
#LIVER	(49)		(50)		(48)	
HEMANGIOSARCOMA, METASTATIC			1	(2%)		
DIGESTIVE SYSTEM						
#SALIVARY GLAND	(49)		(46)		(49)	
NEUROFIBROSARCOMA		(2%)				
#LIVER	(49)		(50)		(48)	
NEOPLASTIC NODULE		(12%)	1	(2%)	3	(6%)
HEPATOCELLULAR CARCINOMA	1	(2%)				
						(2%)

#### TABLE A1. SUMMARY OF THE INCIDENCE OF NEOPLASMS IN MALE RATS IN THE TWO-YEAR FEED STUDY OF 8-HYDROXYQUINOLINE

8-Hydroxyquinoline, NTP TR 276

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	CONTRO	)L (UNTR)	LOWI	DOSE	HIGH DOSI		
DIGESTIVE SYSTEM (Continued)							
#PANCREAS	(47)		(48)		(45)		
ACINAR-CELL ADENOMA #STOMACH	(50)		(49)			(2%)	
#SIOMACH MESOTHELIOMA, INVASIVE		(2%)	(49)		(46)		
DIGESTIVE SYSTEM (Continued)	•	(2,0)					
#GLANDULAR STOMACH	(50)		(49)		(46)		
ADENOCARCINOMA, NOS			1	(2%)			
JRINARY SYSTEM							
#KIDNEY	(50)		(50)		(48)		
TUBULAR-CELL ADENOMA	1	(2%)					
NDOCRINE SYSTEM							
#PITUITARY	(48)	(000)	(50)		(47)	(0.0	
ADENOMA, NOS	-	(38%)		(34%)		(26%)	
<b>#PITUITARY INTERMEDIA</b> ADENOMA, NOS	(48)		(50)	(2%)	(47)		
#ADRENAL	(50)		(50)	(270)	(48)		
CORTICAL ADENOMA		(2%)	(00)		(10)		
PHEOCHROMOCYTOMA	12	(24%)	8	(16%)	13	(27%)	
#THYROID	(50)		(49)		(47)		
C-CELL ADENOMA	1	(2%)	1	(2%)		(4%)	
C-CELL CARCINOMA	(10)		(90)		-	(9%)	
#PARATHYROID ADENOMA, NOS	(18)		(20)	(5%)	(20)		
#PANCREATIC ISLETS	(47)		(48)	(070)	(45)		
ISLET-CELL ADENOMA		(6%)		(10%)	• •	(2%)	
ISLET-CELL CARCINOMA		(2%)		(		(2%)	
REPRODUCTIVE SYSTEM							
*MAMMARY GLAND	(50)		(50)		(50)		
FIBROADENOMA		(4%)		(6%)		(8%)	
*PREPUTIAL GLAND	(50)		(50)	(	(50)		
CARCINOMA, NOS		(2%)		(6%)	1	(2%)	
ADENOMA, NOS #TESTIS		(2%)	(50)	(2%)	(48)		
INTERSTITIAL-CELL TUMOR	(47) 39	(83%)		(84%)		(92%)	
VERVOUS SYSTEM							
#BRAIN	(50)		(50)		(50)		
CARCINOMA, NOS, INVASIVE				(2%)		_	
ASTROCYTOMA					1	(2%)	
PECIAL SENSE ORGANS							
*ZYMBAL GLAND	(50)		(50)	(07)	(50)	(0~)	
CARCINOMA, NOS SQUAMOUS CELL CARCINOMA	1	(2%)	1	(2%)	1	(2%)	
MUSCULOSKELETAL SYSTEM		<u></u>					
*SKULL	(50)		(50)		(50)		
OSTEOSARCOMA	1	(2%)					

### TABLE A1. SUMMARY OF THE INCIDENCE OF NEOPLASMS IN MALE RATS IN THE TWO-YEAR FEED STUDY OF 8-HYDROXYQUINOLINE (Continued)

	CONTROL (UNTR)	LOW DOSE	HIGH DOSI
BODY CAVITIES			
*ABDOMINAL CAVITY	(50)	(50)	(50)
OSTEOSARCOMA *TUNICA VAGINALIS	(50)	1 (2%) (50)	(50)
MESOTHELIOMA, NOS	(00)	1 (2%)	(00)
MESOTHELIOMA, MALIGNANT	1 (2%)		
ALL OTHER SYSTEMS			
BASE OF TAIL KERATOACANTHOMA	1		
# NUMBER OF ANIMALS WITH TISSUE EXAM NUMBER OF ANIMALS NECROPSIED	INED MICROSCOPICALI	LY	
			······································
NIMAL DISPOSITION SUMMARY	<b>F</b> 0	50	F.0.
ANIMALS INITIALLY IN STUDY	50 10	50 11	50 12
NATURAL DEATH MORIBUND SACRIFICE	10 12	5	12
SCHEDULED SACRIFICE	12	0	0
TERMINAL SACRIFICE	28	34	33
DOSING ACCIDENT	20	01	60
ACCIDENTALLY KILLED, NDA			
ACCIDENTALLY KILLED, NOS			
ANIMAL MISSING			
ANIMAL MISSEXED			
		<u></u>	
TUMOR SUMMARY TOTAL ANIMALS WITH PRIMARY TUMORS	** 47	50	49
TOTAL PRIMARY TUMORS	120	112	113
TOTAL ANIMALS WITH BENIGN TUMORS	44	46	47
TOTAL BENIGN TUMORS	82	86	87
TOTAL ANIMALS WITH MALIGNANT TUM		21	18
TOTAL MALIGNANT TUMORS	32	22	23
TOTAL ANIMALS WITH SECONDARY TUM		3	3
TOTAL SECONDARY TUMORS	3	5	4
TOTAL ANIMALS WITH TUMORS UNCERTA	6 6	2	3
BENIGN OR MALIGNANT TOTAL UNCERTAIN TUMORS	6	2	3
TOTAL UNCERTAIN TUMORS TOTAL ANIMALS WITH TUMORS UNCERTA		4	3
PRIMARY OR METASTATIC		1	
TOTAL UNCERTAIN TUMORS		2	

### TABLE A1. SUMMARY OF THE INCIDENCE OF NEOPLASMS IN MALE RATS IN THE TWO-YEAR FEED STUDY OF 8-HYDROXYQUINOLINE (Continued)

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TABLE A2.	SUMMARY OF THE INCIDENCE OF NEOPLASMS IN FEMALE RATS IN THE TWO-YEAR FEED
	STUDY OF 8-HYDROXYQUINOLINE

С	ONTRO	DL (UNTR)	LOWI	DOSE	HIGH	DOSE
ANIMALS INITIALLY IN STUDY	50		50		50	
ANIMALS NECROPSIED	50		50		50	
ANIMALS EXAMINED HISTOPATHOLOGICALLY	50		50		50	
INTEGUMENTARY SYSTEM						
*SUBCUT TISSUE	(50)		(50)		(50)	
SARCOMA, NOS		(0~)		(2%)		
FIBROMA FIBROSARCOMA		(2%) (2%)	1	(2%)	Z	(4%)
LEIOMYOSARCOMA	1	(270)	1	(2%)		
RESPIRATORY SYSTEM		<u> </u>		·····	·····	
#LUNG	(50)		(50)		(50)	
ALVEOLAR/BRONCHIOLAR ADENOMA		(2%)		(4%)		(4%)
SARCOMA, NOS, METASTATIC			1	(2%)		
FIBROSARCOMA, METASTATIC	1	(2%)			· ·	
HEMATOPOIETIC SYSTEM						
*MULTIPLE ORGANS	(50)		(50)		(50)	
MALIGNANT LYMPHOMA, NOS			1	(2%)		
LEUKEMIA, NOS	~	(100)	•	(00)	1	(2%)
LEUKEMIA, MONONUCLEAR CELL		(12%)	3	(6%)	9	(18%)
CIRCULATORY SYSTEM NONE						
DIGESTIVE SYSTEM						
#LIVER	(50)		(50)		(49)	
NEOPLASTIC NODULE		(6%)	2	(4%)	4	(8%)
HEPATOCELLULAR CARCINOMA		(2%)	(40)		(47)	
#ILEAL SUBMUCOSA SARCOMA, NOS	(49)		(48)		(47)	(2%)
#CECUM	(45)		(48)		(48)	(270)
SARCOMA, NOS	(40)			(2%)	(40)	
JRINARY SYSTEM						
#KIDNEY	(50)		(50)		(49)	
SARCOMA, NOS, METASTATIC				(2%)		
#URINARY BLADDER	(50)		(49)	(0~)	(49)	
TRANSITIONAL-CELL PAPILLOMA				(2%)		
ENDOCRINE SYSTEM						
#PITUITARY	(47)		(49)	(00)	(46)	
CARCINOMA, NOS	00	(109)		(2%) (55%)	95	(E 401 \
ADENOMA, NOS #ADRENAL	(49)	(49%)	(50)	(55%)	25 (49)	(54%)
CORTICAL ADENOMA		(2%)	(00)			(2%)
CORTICAL CARCINOMA		(2%)			-	
PHEOCHROMOCYTOMA	1	(2%)	4	(8%)		(4%)
						(2%)
GANGLIONEUROMA			(50)		(49)	
#THYROID	(48)	(00)		(40)		
#THYROID C-CELL ADENOMA	1	(2%)	2	(4%)		(10%)
#THYROID	1	(2%) (4%)	2 (16)	(4%)		(10%) (2%)

	CONTRO	L (UNTR)	LOWI	DOSE	HIGH	DOSE
REPRODUCTIVE SYSTEM		······				
*MAMMARY GLAND	(50)		(50)		(50)	
ADENOMA, NOS					2	(4%)
FIBROADENOMA	19	(38%)	15	(30%)	13	(26%)
*CLITORAL GLAND	(50)		(50)		(50)	
ADENOMA, NOS	3	(6%)			3	(6%)
#UTERUS	(49)		(49)		(49)	
ENDOMETRIAL STROMAL POLYP	11	(22%)	13	(27%)	14	(29%)
ENDOMETRIAL STROMAL SARCOMA			1	(2%)		
#OVARY	(49)		(49)		(49)	
GRANULOSA-CELL TUMOR		(2%)				(2%)
SERTOLI-CELL TUMOR		(2%)				
NERVOUS SYSTEM	<u></u>					
#BRAIN	(49)		(50)		(50)	
ASTROCYTOMA	()					(4%)
SPECIAL SENSE ORGANS						
*EAR	(50)		(50)		(50)	
FIBROSARCOMA		(4%)	(00)		(00)	
MUSCULOSKELETAL SYSTEM						
NONE						
BODY CAVITIES NONE						
ALL OTHER SYSTEMS NONE						

### TABLE A2. SUMMARY OF THE INCIDENCE OF NEOPLASMS IN FEMALE RATS IN THE TWO-YEAR FEEDSTUDY OF 8-HYDROXYQUINOLINE (Continued)

# NUMBER OF ANIMALS WITH TISSUE EXAMINED MICROSCOPICALLY
• NUMBER OF ANIMALS NECROPSIED

CON	TROL (UNTR)	LOW DOSE	HIGH DOSE
ANIMAL DISPOSITION SUMMARY			
ANIMALS INITIALLY IN STUDY	50	50	50
NATURAL DEATH	5	7	8
MORIBUND SACRIFICE	9	4	5
SCHEDULED SACRIFICE			
TERMINAL SACRIFICE	36	39	37
DOSING ACCIDENT			
ACCIDENTALLY KILLED, NDA			
ACCIDENTALLY KILLED, NOS			
ANIMAL MISSING			
ANIMAL MISSEXED			
TOTAL PRIMARY TUMORS TOTAL ANIMALS WITH BENIGN TUMORS TOTAL BENIGN TUMORS TOTAL ANIMALS WITH MALIGNANT TUMORS TOTAL MALIGNANT TUMORS TOTAL ANIMALS WITH SECONDARY TUMORS TOTAL SECONDARY TUMORS TOTAL ANIMALS WITH TUMORS UNCERTAIN- BENIGN OR MALIGNANT TOTAL UNCERTAIN TUMORS	79 37 62 12 13 ≇ 1 1 3 4	76 40 65 9 9 1 2 2	41 71 13 14 5
TOTAL UNCERTAIN TUMORS TOTAL ANIMALS WITH TUMORS UNCERTAIN- PRIMARY OR METASTATIC TOTAL UNCERTAIN TUMORS	4	2	0
** PRIMARY TUMORS: ALL TUMORS EXCEPT SECON ## SECONDARY TUMORS: METASTATIC TUMORS 0		IVE INTO AN ADJACI	ENT ORGAN

### TABLE A2. SUMMARY OF THE INCIDENCE OF NEOPLASMS IN FEMALE RATS IN THE TWO-YEAR FEED STUDY OF 8-HYDROXYQUINOLINE (Continued)

AN IMAL Number Weeks on		21			5		辨		-	╣	╢	뷖	#	4	4	1	;			4	21	2	3	21
STUDY	1	5	<u>ii</u>	3	8) 6	1	9	0   4	0   4	5	4	•	-	!		4	<u></u>	?	4	1	:	31	31	į
87 TH	٠	٠	٠	٠	٠	٠	٠	٠	٠	٠	٠	٠	٠	٠	٠	٠	+	٠	٠	٠	٠	٠	٠	٠
SQUAMOUS CELL CARCINOMA Basal-Cell Carcinoma													<u>×</u>								•	•		•
SUBCUTANEOUS TISSUE Keratgacanthoma Sarcoma, nos Fibroma	•	•	•	•	•	•	×	•	•	•	•	•	×		•	×		•		•	•	x	•	•
ESFIRATORY SYSTEM	•	•	•	•	•	•	•	•		•	•	•		•	٠	•	•	•	•	•	•	٠	٠	•
HEPATOCELLULAR CARCINOMA, METASTA	•	-		•	•	•	•	•	•		•	•	•	•	•	•	•	•	•	•	+	+	•	•
TRACHEA	<u> </u>			-		-		-					-	-								-		
SONE MARRON	•	·	•	•	+	٠	*	•	*		•	•	•	•	+	+	•	٠	•	•	<u>.</u>	+	•	-
SPLEEN Mesothelioma, invasive Hemangiosarcoma	•	+	•	•	•	•		• 	•	• 	-	• •	•	• •	•	•	<u>.</u>	• •	•	•	• •	•	-	<u>.</u>
LYMPH HODES . Thymus	÷	÷	÷	-	•	•	•	÷	•	-	•	•	+	•	•	•	•	•	•	•	•	٠	+	+
IRCULATORY SYSTEM							-										-			-				
HEART	٠	•	•	•	•	<u>.</u>	•	٠	•	•	•	•	٠	•	٠	•	<u>.</u>	•	•	•	٠	+	<u>.</u>	<u>.</u>
IGESTIVE SYSTEM Salivary gland	•	٠	•	•	٠	•	٠	•	•	•	٠	•	•	•	•	•	٠	٠	٠	•	•	٠	٠	٠
NEUROFIBROSARCOMA Liver Meoplastic Hodule	ż	•	•	•	٠	•	ż	•	÷	*	*	٠	٠	٠	+	•	•	٠	٠	÷	•	•	•	•
HEPATOCELLULAR CARCINOMA Bile duct	•	•	÷	•	۰.	٠.	•	•	÷	•	•	÷	٠	•	•	+	•	•	٠	٠	•	-	÷	•
GALLBLADDER & COMMON BILE DUCT	N	M	N	N	M	Ħ	N.	М.	N	N	м.,	. н	Ν.	.H	н	н	н	N	N	N	H	•	М.,	H.
PANCREAS ESOPHAGUS	÷	<u>.</u>	<u>+</u>	•	•	•	•	•	*	<u>*</u>	•	*	•	•	<u>+</u>	<u>*</u>	÷	*	<u>*</u>	*	•	•	•	<u>.</u>
STOMACH	٠	+	+	•	٠	•	٠	٠	+	٠	•	+	٠	٠	٠	٠	٠	٠	+	+	+	٠	٠	٠
MESOTHELIOMA, INVASIVE Small intestine	•	٠	۰.	•	•	÷	•	•	•	•	•	•	•	٠	•	۰.	•	•	•	•	•	•.	÷	÷
LARGE INTESTINE	٠	٠	-	-	٠	٠	٠	٠	٠	٠	٠	-	٠	+	•	•	•	٠	٠	+	٠	٠	٠	٠
RINARY SYSTEM	•	•	•	•	•	•	•	•	•	•		•	•	•	• .		•	•	•	•	•	•	•	•
KIDNEY Tubular-Cell Adenoma				-			_			X			_						_					
URINARY BLADDER NDUCRINE SYSTEM	•	•	•	+	•	*	•	•	*	•	*	•	•	<u>.</u>	*	<u>.</u>	•	•	•	•	•	•	+	•
PITUITARY Adenoma, NGS	·	ż	٠	•	٠	ž	ż	ż	•	•	•	÷.	•	ż	÷	٠	•	•	٠	ż	•	-	•	•
ADRENAL Cortical Adenoma Pheochromocytoma	•	•	٠	•	٠	+	•	• x	• x	•	•	•	•	•	•	•	•	•	*	•	•	•	* x	•
THYROID C-CELL ADENOMA	٠	٠	•	٠	+	٠	•	+	٠	٠	٠	+	٠	٠	•	٠	٠	÷x	٠	•	٠	•	٠	٠
PARATHYROID		•		÷	-	-	•	•		•	۰.	٠	٠	•	۰.	۰.	-	-	-	-	<u>.</u>	•	•	•
PANCREATIC ISLETS Islet-cell Adenoma Islet-cell Carcinoma	•	٠	٠	٠	٠	٠	×	•	×	* x	٠	•	•	•	×	•	•	•	•	•	•	•	•	•
EPRODUCTIVE SYSTEM	н	•	N		н	•	N		*		•	N	N		N	H	•	N	•	H	N	N	•	N
MAMMARY GLAND FIBROADENOMA	Ļ	<u> </u>												×.								•	•	_
TESTIS Interstitial-Cell Tumor	ż	ż	•	<u>.</u>	×	<u>.</u>	•	×	ż	<u>.</u>	ż	×	ż	ž.	<u>.</u>	×.	ž	×	ž	ž	ž	<u>.</u>	ž.	
PROSTATE Preputial/clitoral gland Carcingma, NOS Adenoma, NOS	N	N	N	N	N	N	N	H	N	N	N	N	N	N	N	N	N	N	N	H	N	N	N	N
RERVOUS SYSTEM																			-					
BRAIN Special Sense Organs	•	•	•	*	•	•	•	•	<u>.</u>	<u> </u>	*	•	•	<u>.</u>	*	•	•	•	•	•	•	•	•	<u> </u>
ZYMBAL GLAND Syuamous cell carcingma	H	×	N	м	N	N	H	H	н	H	н	ж	N	M	н	N	M	ĸ	N	N	N	H	H	N
BONE		H	N	н	N	•	н	N	N	N	H	N	H	н	н	N	н.	H	N	N	N	N	N	N
OSTEOSARCOMA	X																							
TUNICA VAGINALIS Mesothelioma, Malignant	•	٠	٠	٠	٠	٠	٠	٠	٠	٠	٠	٠	٠	٠	•	٠	٠	٠	٠	•	٠	•	+	N
NUL OTHER SYSTEMS Multiple organs nos Malionant Lymphoma, nos Malio.Lymphoma, lymphocytic type Malig.Lymphoma, histiocytic type	N	N	H	N	NX	N	H	N	N	N	N	N	N X	H	N	H	н	N	N	N	N	M	N	N
LEUKEMIA, MONONUCLEAR CELL Base of Tail	┝		X		-			X		X		<u> </u>	-			-	-	<u> </u>			<u> </u>		<u>^.</u>	-
<ul> <li>XÉRATOACAÑTHOMA</li> <li>ITASUE EXAMINED MICROSCOPICALLY</li> <li>REQUIRED 'ISSUE NOT EXAMINED MICI</li> <li>TUMOR INCIDENCE</li> <li>NECROPS', NO AUTOLYSIS, NO MICRO</li> <li>ANIMAL NIS-SERED</li> </ul>	ROSC	0P1 1C	CAL EXA	LY MIN	ATI	0 N	-	C A M B	:	NO NEC AUT ANT NO	OLY Mal	515	551)	G			SU! r Di	SMI VË	77 E1	PRO	TOCI	01		

#### TABLE A3. INDIVIDUAL ANIMAL TUMOR PATHOLOGY OF MALE RATS IN THE TWO-YEAR FEED STUDY OF 8-HYDROXYQUINOLINE: UNTREATED CONTROL

AITMAL HUMBER HEEKS GN STUDY Integumentary system Sisal-Cell Carcinoma Subautaneous TISSUE Keratoacantmora Sarcota. Nos	0 2 6 1 0 4	27	┼┩	Н		3	31	3	3	3	31	31	0 31 71	31	31	4		4	4		0 41 51	0 4 6	0 41 7		11	51 51 61 TOT.	
STUDY INTEGUMENTARY SYSTEM Squamous Cell Carcinoma Basal-Cell Carcinoma Subcutaneous Tissue Keratoacanthora Sarcoma. Nos						11							11	- 61-	11			T	11	QΤ		91				TTISS	
SKIN Sguamdus Cell Carcinoma Basal-Cell Carcinoma Subcutaneous Tissue Keratoacantmora Sarcoma, Nos	•			1.4	1	:	2	ł	i	i	į	ġÌ	ė	8	i	<u>.</u>	<u>; </u>	ġ		<u>i</u>	91 71 5	3	8			Í TUM	
SQUAMOUS CELL CARCINOMA Basal-Cell Carcinoma Subcutanegus Tissue Keratoacanthoma Sarcoma. Nos	1						•		•	•	•	•	•	•	•	•			•	•	•	•	•	•	•		
KERATGACANTHOMA Sarcoma, Ngs	1	Ţ				•	·	Ť	·		Ť	·			÷						·						Ï
FIBROMA	ŀ	٠	•		•	٠	٠	٠	•	•	٠	٠	٠	٠	٠	•	•	+ x	•	٠	٠	٠	•	٠	٠	• 5	8 H 1 2 2 2
RESPIRATORY SYSTEM	+	-											-	-	-			-		-					_	+	-
LUNGS AND BRONCHI Hepatocellular carcinoma, metasta	Ŀ	•	•	_	•	٠	٠	•	•	•	+	•	•	•	•	•	٠	•	•	•	•	+	ż	•	•	+ 5	•
TRACHEA	+	•	•	•		•	٠	٠	•	+	٠	•	٠	*	•	•	•	+	•	•	+	•	•	<u>.</u>	•	+ 5	•
HEMATOPOLETIC SYSTEM	Γ.	•																									
SONE MARROW Spleen	÷	•			• •	<u>.</u>	÷	÷	÷	÷	÷	•	÷	÷	÷	÷	÷	÷	•	÷	÷	+	•	•	÷	• •	
MESOTHELIOMA. INVASIVE Hemangiosarcoma				×	¢	·			_											_					_		1
LYMPH HODES	<u> .</u>	. •	•		, -	٠	٠	٠	+	٠	٠	٠	•	•	٠	+	•	•	•	<u>+</u>	٠	-	•	+	٠	• •	4_
THYMUS	ŀ	٠	•	•	•	•	•	٠	•	•	•	-	+	٠	•	•	•	•	•	•	-	-	•	٠	•	• •	3
TIRCULATORY SYSTEM	•	+	•	•		•	•	•	•	•		•	•	•	•	•	•	•	•	•	•		•	•	•		
HEART DIGESTIVE SYSTEM	Ļ	_				-	-	<u> </u>	<u> </u>	-	•			•	<u> </u>			•		_	-			·	·	+	-
SALIVARY GLAND Neurofibrosarcoma		٠	٠	•	•	•	٠	٠	٠	٠	٠	٠	٠	٠	٠	•	•	٠	٠	•	٠	٠	-	٠	•	• •	•
NEUROFIBRUSARCOMA Liver	1.	•			,	•	•	•	•	•	•	•	•	•	•	•	٠	•	•	•	•	•	•	•	•	• •	,
NEOPLASTIC HODULE Hepatocellular Carcingra						•		×															x.		_		1
BILE DUCT		٠			_	•	٠	•	+	٠	٠	٠	٠	ŧ	<u>.</u>	•	<b>.</b>	•	•	•	•	+	+	٠	•	4	2
GALLBLADDER & COMMON BILE DUCT	<u>⊢≞</u>	الى			L_	H.,	H	N	М.,	N		N	Н.	N	<u> </u>	Ħ.,	<u>N</u>	N	N	۴.,	<u>H_</u>	N	H	N.,	<u>H</u>	T	<u>a</u> x
PANCREAS	++	•	<u>.</u>		<b>}_</b>	<u>*</u>	<u>*</u>	•	<u>+</u>	<u>.</u>	•	*	•	•	<u>+</u>	<u>*</u>	•	•	<u>*</u>	-	•	<u>*</u>	<u>*</u>	*	<u> </u>		
ESOPHAGUS NTOMACH	÷	<u></u>		-	<u>.</u>	<u>.</u>	•	•	÷	•	÷	÷	<u>.</u>	÷	÷	•	<u>•</u>	÷	•	•	•	÷	•	÷	÷	• •	
MESOTHELIGMA, INVASIVE	Ĥ	_			<u>.</u>	-	-			_	·			•						_				-	_		_1
SMALL INTESTINE	++	*	<u></u>	•	•	•	•	•	<u>+</u>	÷	•	* *	*	<u>.</u>	<u>+</u>	<u>*</u>	<u>*</u>	•		÷	•	•	<u>.</u>	<u>+</u>	•	•	
LARGE INTESTINE	ŀ	_			<u> </u>	-	-			<u> </u>	-	-			-	•		-	-	-	-	•	•			• •	-
KIDNEY	•	•	٠		•	•	٠	٠	٠	•	٠	+	٠	٠	٠	٠	٠	•	•	٠	٠	٠	٠	٠	•	• 5	•
TÜBÜLAR-CELL ADENOMA Urinary Bladder	+-	•	•			•	•	•	•	•	•	•	÷	•	•	•	•	•	•		•	•	•	•	•		•
ENDOCRINE SYSTEM	1-	_		_				_			-				_		_		-				-	_		+	_
PITUITARY Adenoma, Nos	÷	* x	٠	•	•	٠	٠	٠	÷	٠	÷.	•	٠	•	÷	٠	÷	÷	÷	÷	٠	÷	٠	•	•	• •	1
ADRENAL Cortical Adenoma Pheochromocytoma	•	•	•	•	•	٠	•	٠	•	٠	ż	٠	•	•	٠	٠	•	٠	٠	٠	•	•	٠	•	٠	• 5	• , 12
THYROID	1.		<u>ة</u>	.,	,	÷	•	•	•	•	•	•	•	٠	•	•	*	٠	•	•	•	•	٠	÷	•	+ 5	
C-CELL ADENOMA	-						-		_			_														<u>.</u>	 -
PARATHYROID Pancreatic islets	÷	-	-		<u> </u>	÷	•	•	÷	+	<u></u>	•	•	÷	•	<u>.</u>	<u>.</u>	•	•	÷	<u>.</u>	÷	•	•	•	• •	
ISLET-CELL ADENOMA ISLET-CELL CARCINOMA																											3
REPRODUCTIVE SYSTEM	+								-						-					-					_	+	-
MAMMARY GLAND Fibrgadenoma	Ŀ	٠	-		1	*	*	N	*	*	N	N	N	N	÷	N	•	N	•	N.	N	N	N	×	N	• 5	87
TESTIS Interstitial-Cell Tumor	Ŀ	•	ż	;	È	ż	ż	÷	÷	÷	*	-	÷	•	\$	ż	*	•	÷	÷	ż	*	ż	ż	÷		<u>,</u>
PROSTATE	+	•				•	+	•	+	٠	•	•	٠	•	•	•	٠	•	•	2	<u>+</u>	•	•	•	<u>+</u>	•	
PREPUTIAL/CLITORAL GLAND Carcinoma, nos Adenoma, nos	N	N	H	N	•	N	N	M	H	N X	H	N	N	M	N	N	H	H	N	N	H	X	H	N	H	• 5	0 H 1 1
NERVOUS SYSTEM																									•	. ,	
BRAIN SPECIAL SENSE ORGANS	<u>↓·</u>		_	•	_	•	•	-	<u> </u>	•			•	÷	•	-	•			-	÷	*	<u> </u>	-	-	<b>`</b>  "	_
ZYMBAL GLAND Squamous Cell Carcinoma	N	N	H	H	1	N	M	N	H	N	N	N	N	N	N	N	N	•	H	N	H	н	н	N	H	4 5	<b>8</b> M 1
HUSCULOSKELETAL SYSTEM Bone Osteosarcoma	N	N	N	H	1	H	H	N	N	N	N	N	N	м	N	N	N	H	N	H	N	M	N	Ħ	N 1	v 51	<b>#</b> ₩ 1
SODY CAVITIES	+					_			_					,			-			-	-				-	+	
TUNICA VAGINALIS Mesothelioma, malighant	•	٠	٠	,	č	٠	٠	٠	٠	٠	٠	H	٠	N	٠	·	٠	٠	•	٠	٠	٠	٠	٠	•	- 5	<b>0</b> ¥
ALL OTHER SYSTEMS	+								_	••••									-							+	
MULTIPLE GROANS HOS Maligmant Lymphoma, nos Malig.Lymphoma, Lymphocytic type Malig.Lymphoma, Histigcytic type Leukenia, Mgnonuclear Cell	N	N	H		•	N	M	M	N	H V	N	N Y	N X.	H	H V	N X	N X	H	N X	H	H X	H	N	н	N I		0 H
SASE OF TALL KERATOAGANTHOMA	1	_							_	<u> </u>		<u> </u>	•		<b>^</b>		<u> -</u>										-

### TABLE A3. INDIVIDUAL ANIMAL TUMOR PATHOLOGY OF MALE RATS: UNTREATED CONTROL (Continued)

ANIMALS HECROPSIED

																		_							
ANIMAL NUMBER	0 ( 8 ( 1	01	0 0 3	0   0   4	0	01	0 0 7	0 01 8	0 0 9			11			ļ	11	2		1	2	121	21	21	2	000
WEEKS ON STUDY	2			i		2	i		2		8	è	2	ŝ		ò	i	il.	6	ġ			į		
INTEGUNENTARY SYSTEM					- 11																				
SKIN Squamqus cell papillona Basal-Cell carcinoma	ŀ	•	•	•	•	•	+	•	•	•	•	•	•	•	•	•	•	•	•	•	÷ ×	<u>.</u>	•	•	<u>+</u>
SUBCUTANEGUS TISSUE Carcinoma, nos Fibroma	•	٠	٠	٠	* ×	٠	•	•	×	* x	•	٠	•	٠	٠	•	•	•	٠	•	٠	٠	+	•	•
RESPIRATORY SYSTEM	-													-		~~~									-
LUNGS AND BRONCHI Carcinoma, Nos. Metastatic Alveolar/Bronchiolar Adenoma Alveolar/Bronchiolar Carcinoma Sarcoma, Nos. UNC PRIM or Meta Hemanglosarcoma, Metastatic	•	•	۰ ×	+	•	•	* ×	•	×	•	×	•	•	* ×	•	•	•	•	•	•	•	.+	•	•	•
TRACHEA	+	+	٠	٠	٠	٠	•	٠	٠	٠	٠	+	+	•	٠	•	٠	٠	٠	•	•	+	+	•	+
HEMATOPOIETIC SYSTEM										-															
BONE MARRON	<u>+</u>		•	*	•	•	*	•	<u>.</u>	<u>*</u>	<u>*</u>	<u>*</u>	•	•	•	<u>.</u>	-	<u>*</u>	•	+	•	÷	÷	•	<u>*</u>
SPLEEN Hemangidsarcoma Malignant Lymphoma, NGB	÷	•	x	•	•	•	•	•	•	•	•	•	• 	+	• 	• 	•	•	<u> </u>						-
LYMPH HODES Sarcoma, Hos. Unc prim or meta	+	*	•	*	<u>.</u>	<u> </u>	*	*	٠	•	<u>.</u>	*	<u>.</u>	ż.	<u>.</u>	•	•	•	_	*	+	•	+	*	•
THYPUS	•	٠	٠	٠	٠	٠	•	٠	-	+	-	•	•	٠	•	٠	•	٠	-	+	-	٠	+	٠	+
CIRCULATORY SYSTEM																						_			
HEART DIGESTIVE SYSTEM	+.		*	*	*	•	.+	•	•	•	•	•	•	٠.		.*	•	•	•	•	+	*	•	•	*
SALIVARY GLAND		•	-	. + _	<b>.</b>		•	•	٠	•	-	•	•	•	*	•	٠	٠.	۰.	٠	•	٠	•	٠.	•
LIVER Neoplastic Hodule Hemangiosarcoma. Metastatic	ŀ	•	÷ ×	+	•	×	•	•	•	•	*	٠	•	•	*	•	•	•	•	•	•	•	•	•	•
BILE DUCT		. • .	٠	+	+	•	٠	٠	•	٠.	+.	<u>+</u>	٠	•	٠	٠	٠	٠	+	÷	٠	•	٠		٠
GALLBLADDER & COMMON BILE DUCT	1	H	Ħ	X.		H.	Н.,	Ħ	X	X	N	N.,,	M	Н.,	N		N.	N	N	М.,	М.,		<u>.</u>	H.	4
PANGREAS .	<u> </u>	*	*	*	٠	٠	•	٠	•	*	*	•	٠.	+	٠	٠	۰.	•	-	•	+	•	+	•	*
ESOPHAGUS .	+	<u>*</u>	<u>+</u>		<u>*</u>	•	•	•	•	+	÷	*	<u>*</u>	-	*	•	+	•	•	<u>*</u>	÷	÷	÷	*	*
STOMACH Adenocarcinoma, NOS	ŀ	*	<u>.</u>	*	+	•	•	•	•	_	-	-	*	*	•	•	<u> </u>	_	ž.			-	-	-	_
SMALL INTESTINE	┝╺╸	<u>.</u>	*	*	•	•	•	٠	٠	•	•	•	٠	•	٠	•	<u>.</u>	•	-	*	•	•.	*	•	*
LARGE INTESTINE	•	+	•	+	*	•	•	*	•	*	_	•	*	•	•	*	*	•	-	•	+	•	•	•	÷
URTHARY SYSTEM KIDNEY			•	•	•	•	÷				•				•			•	•	•	•		•	•	•
URIMARY BLADDER	•	•	•	+	•	•	+	+	•	•	+	•	•	•	•	+	•	+	-	•	٠	+	٠	٠	+
ENDOCRINE SYSTEM																		-				_			
PITUITARY Adenoma, NGS	ŀ	+	•	•	•	÷	٠	٠	*	ż	÷	÷	•	+	•	•	٠	÷	•	•	÷	•	•	ż	+
ADRENAL Pheochropidcytoma	•	+	•	٠	٠	•	÷	٠	•	٠	•	•	+	•	;	+	÷	•	٠	ż	•	•	•	+	*
THYROID	•	٠	٠	*	+	•	+	+	•	•	٠	÷	•	+	٠	٠	٠	٠	+	٠	٠	+	٠	٠	٠
C-CELL ADENOMA Parathyroid	-	•						•	-	•	-	<u>م</u>			•	•		•	•			•	•	•	+
ADENOMA, HOS	-																	<u>×</u>					_	٠	_
PANGREATIG ISLETS ISLET-CELL ADENOMA Reproductive system	·	•	•	<u>+</u>	<u>.</u>	-	-	-	•	•	ż	•	•	•	•	•	•	•	•	<u>.</u>	<u>.</u>	•			-
MANNARY GLAND Fibroadenoma	H	÷	N	N	<u>.</u>	<u>.</u>	•	N	N	H	•	N	•	Ħ	H	N	N	•	M	Ħ	٠	•	<u>.</u>	M	÷
TESTIS Interstitial-cell turor	ţ	\$	:	ţ	\$	÷	÷	*	\$	÷	٠	:	÷	÷	÷	÷	÷	÷	٠	÷	*	*	*	÷	÷
PROSTATE		•	•			•	•	•	•	•	•	•		•	+	٠	•	•	+	٠	÷	٠	•	•	٠
PREPUTIAL/CLITORAL GLAND Carcinoma, Nos Adenoma, Nos	H	N	H	N	M	N	N	NX	Ħ	H	N	N	N	N	N X	Ħ	H	M	M	N	N	N	N	N	N
NERVOUS SYSTEM	$\vdash$	-	-	_												_									-
BRAIN Carcinoma, Hos, Invasive	•	٠	٠	+	•	•	•	٠	•	٠	×	•	•	•	٠	•	•	٠	•	•	٠	٠	+	+	٠
SPECIAL SENSE GROANS Zymbal gland Carcingma, Ngs	H	м	Ħ	N	N	N	N	N	N	N	÷	N	N	N	N	N	N	N	N	N	N	N	N	N	N
BCDY CAVITIES		•			_		;																_		-
PERITONEUM Osteosarcoma	<b>N</b>	M	N	N	N	N							N								_				-
TUNICA VAGINALIS MESOTHELIGMA, NOS ALL OTHER SYSTEMS	•	•	•	+	•	•	•	•	•	+	•	•	•	•	•	•	•	•	•	•	•	*	+	•	-
	н	н	N	N	N	н	N	N	н	н	N	н	N	N	N	н	N	N	N	N	N	N	N	N	N
MULTIPLE ORGANS NOS Malionant Lymphoma, Hos Leukemia, Mononuclear Cell													x			x		x	x					x	

## TABLE A3. INDIVIDUAL ANIMAL TUMOR PATHOLOGY OF MALE RATS IN THE TWO-YEARFEED STUDY OF 8-HYDROXYQUINOLINE: LOW DOSE

TABLE AS	INDIVIDUAL ANIMAL TUMOR PATHOLOGY OF MALE RATS: LOW DOSE (Continued)
IADLE AJ.	INDIVIDUAL ANIMAL I UMUN PATHOLOGI UP MALE NAIS; LOW DOSE (COnunded)

AM ZPLAL NUPO ER		ş	2	2	3	Ţ	1	1	]	1		3	1	1	1				1	ļ	-	-	-	TOTAL
WEEKS 'ON STUDY			1	-11	-	╣	Ĩ		1	:				#	:			ļ		1		1	H	TISSUES
NYEGUNENTARY SYSTEM	11	-	ăì.	<u>i</u>	اف	<u> </u>	ji.	61	ă İ		i i	1. 41	لغ.	<u>. 16</u>	<u>ii</u>	فلة	فل	نغيا		<u> </u>	<u></u>	11	ېف	
SKIN Squamous Cell Papilloma Basal-Cell Carcinoma	ŀ	•	•	٠	٠	٠	•	٠	•	•	• •	•	٠	٠	•	• •	×	٠	•	•	•	•	·	58H 1 1
SUBCUTANEOUS TISSUE Carcinoma, Hos Fibroma	+ x	٠	٠	•	٠	•	٠	٠	٠	+ X	• •	٠	٠	•	•	• •	•	٠	٠	٠	٠	٠	•	58M 1 4
ESPIRATORY SYSTEM	+																				_		1	
LUMOS AND SRONCHI Carcinoma, Nos, metastatic Alveolarsbroheniglar Ademoma Alveolarsbroheniglar Carcinoma Sarcoma, Nos, Unc Prim or Meta Hemanoiosarcoma, metastatic	•	•	•	•	* ×	•	•	•	•	•	••	* ×	•	•	•	• •	•	•	•	•	•	•	•	30 2 2
TRACHEA	+	٠	٠	٠	٠	٠	٠	٠	•	•	• •	٠	٠	٠	٠	• •	•	•	٠	٠	٠	٠	٠	50
EMATOPOIETIC SYSTEM			-																					
BONE MARROW	+	•	+	<u> </u>	<u>.</u>	*	•	*	*	<u>*</u>	• •	•	<u>+</u>	<u>*</u>	*	• •	•	+	•	<u>_</u>	*	<u>*</u>	<u>+</u>	49
SPLEEN Hemangiosarcoma Malighant Lymphoma, NGS	Ļ	•	×	•	•	•	•	•	•		•••	•	•.			• •			•	<u> </u>	<u> </u>	•	_	49 2 1
LYMPH NODES Sarcoma, Hos, UNC PRIM or meta	Ŀ	<u>.</u>	•	•	•	+	•	•	•	•	* *	-		•	•	• •	• •	•	•	•	*	<u> </u>	*	48
THYMUS	•	٠	•	٠	•	٠	٠	٠	•	٠	• •	•	٠	٠	٠	• •	•	٠	+	٠	+	٠	-	45
TROULATORY SYSTEM	+								-														1	
HEART DIGESTIVE SYSTEM	╇	٠	<u>.</u>		٠	•	. <b>e</b> .	•	•	<u>.</u>	**	*	+	•	•	• •		•	*	*	+	+	-+	58
SALIVARY QLAND	L.	•	•	٠		•		•	•	•	••		. •	<b>*</b>	ŧ	<u>.</u>			•	•	•	٠	•	. 44
LIVER Negplastic Nodule Hemanoiosarcoma, metastatic	ŀ	•	٠	٠	•	•	٠	٠	•	•	• •	•	+	•	•	• •	• •	٠	٠	•	•	٠	•	50 [
SILE DUCT	1.	<u>.</u>	*	*	•	<u> </u>	٠	•	•	<u>+</u>	••		<u>.</u>	+	÷	•	•	٠	•	•	•	•	٠	56
GALLBLADDER & COPPION BILE DUCT	-		_ ال	_ <b>.</b>			Ħ	N	M	M	8 8	<u>.</u>	<u>x</u>	.11	H	H	L., I	•	. 11		H	<u> </u>	_11	58#
PANCREAS	+	<u>.</u>	*	<u>.</u>	*	<u> </u>	•	*	<u>* .</u>	÷	• •	*	- <b>*</b>	•	<u>*</u>	<u>* * *</u>	•	•	•	*	+	<u>+</u>	+	
ESOPHAGUS STOMACH	+	÷	÷	÷	÷	÷	<u>.</u>	*	•	* *	<u></u> 	<u> </u>	<u>.</u>	÷	•	• •			•	<u>.</u>	÷	<u>.</u>	-	<u></u>
ADENGCARCINGMA, NOS	<u> </u>		-	<u> </u>	-			-													-		4	
SMALL INTESTINE	+	•	•	+		<b>t</b>	*	*			• •	+	•			<u>•</u>		•	+	<u> </u>	<u>+</u>	<u>.</u>	-	<u>47</u>
LARGE INTESTINE	<u>↓·</u>	•		•	•	<u>.</u>	•	•	•	•	• •	-	•	•	*	• •		<u> </u>	•	•	•	*	_	
KIDNEY		•	•	•	•	•	•	•	•	•	• •		•	٠	•	• •		•	•	•	•	•	•	
URINARY BLADDER	1.	٠	•	٠	٠	•	٠	٠	•	٠	• •	•	٠	•	•	• •	• •	٠	+	•	•	٠	+	- 49
ENDOCRINE SYSTEM	+						-		_													-		
PITUITARY Adengra, NGS		•	:	•	•	٠	÷	•	•	٠	• •	•	÷	:	•	:::		•	٠	+	٠	ż	+	58 18
ADRENAL PHEDCHROMOCYTOMA	:	٠	:	٠	٠	٠	:	٠	٠	٠	• :	٠	+	•	٠	• •	•	٠	+	٠	٠	٠	•	58
THYROID	1.		•	٠	٠	•	•	٠	٠	٠		•	٠	٠	•	• •		-	+	٠	+	•	•	49
C-CELL ADENOMA PARATHYROID	+	_							•				•	•	-	• •						_	╉	28
ADENOMA, HOS	⊢ <b>⊢</b>	•	•	_	-	_	-									* *		-				_		
PANCREATIC ISLETS Islet-cell Adenoma Reproductive system	÷	•	•	÷	•	•	•	•	•	•		•	•	•	•	* '		-	•	•	•	•	-	
MAMMARY GLAND Fibroadenoma	ŀ	•	N	•	٠	Ħ	H	N		<u>.</u>		N	н			N P		<u> </u>	٠	•	N	•	*	58#
TESTIS Interstitial-Cell Tungr	li	ż	÷	÷	÷	÷	٠	÷.	÷	÷	¢ •	+	ż	•	÷_	÷		•	ż	ż	ż	÷	•	58
PROSTATE	+	<u> </u>	٠	•	•	•	•	•	•	•	• •	•	٠	•	•	• •	+	•		•	•	•	4	- 50
PREPUTIAL/CLITORAL GLAMB Carcinoma, nos Adenoma, nos	H	N	N	H	H	N	H	H	N	Ħ I	4 14	N	N	M	N X	N H	N	N	N X	N	N	N	M	58× 3
NERVOUS SYSTEM		_																					+	
SRAIN Carcinoma, Hos. Invasive	٠	٠	•	٠	•	•	•	•	•	•	• •	•	•	•	•	• •	•	•	٠	•	•	٠	·	58
SPECIAL SENSE ORGANS Zymbal Gland Carcingma, Ngs	н	H	н	N	H	N	н	N	N	N 1	4 14	N	H	N	N	H H	N	N	н	N	H	H	н	50 <b></b> #
IODY CAVITIES		_																					+	
PERITONEUM OSTEDSARCOMA	H	H	H	*	н	N	N	*	Ħ	N 1	• •	H	N	N	Ņ	N H	N	N	N	N	M	N	N	58M
TUNICA VAGINALIS Mesotheligma, Nos	•	×	•	•	•	•	•	•	•	•	• •	•	•	•	•	• •	•	•	•	•	•	•	4	504
																							- {	
NUL OTHER SYSTEMS Multiple organs nos malignant Lymphoma, nos Leukenta, mongnuclear cell	H	N	N	н		м							M	м	N	н н	ы	н	Ħ	H	N	н	нÌ	58#

\* ANIMALS NECROPSIED

ANIMAL Number	0	0	0	0	0	01	0	0 0 8	9	1		12	1	1	1	0 1 6	0 1 7	1	1	2	2	22	23	24	0.00
WEEKS ON Study	1	-11	9	-		-	9	-	8	1	-	1	1		1	1	-	3	1		9	1	1	1	-
INTEGUMENTARY SYSTEM	<b>- 4</b> 1	41	_11	41	.41	4	51	- 41	21	41	41	.61	لگ	41	41	41	41	41		-41	-11		41	ي ف	-1
SKIN Basal-Cell Carcinoma Keratoacanthoma	•	+	•	•	•	•	+	•	•	•	•	•	+	•	•	*	*	•	*	•	•	•	•	•	,
SUBCUTANEGUS TISSUE Sarcoma, nos Fibroma Fibrosarcoma	•	•	•	•	+ X	•	•	•	٠	٠	•	•	•	•	+	•	•	+	•	+	+	•	•	•	1
RESPIRATORY SYSTEM				_		-																			-
LUNGS AND BRONCHI Alveolar/bronchiolar Adenoma Alveolar/bronchiolar Carcinoma C-Cell Carcinoma, metastatic Sarcoma, Hos, Metastatic Osteosarcoma, Metastatic	•	•	*	•	•	×	•	•	•	•	•	×	+	•	•	•	•	•	•	•	×	•	•	•	
TRACHEA	+	+	+	+	٠	+	+	٠	٠	+	+	+	•	•	•	+	٠	٠	+	٠	-	٠	+	•	
HEMATOPOIETIC SYSTEM																									-
SCHE MARROW	•	+	•	٠.	٠	+	•	٠	٠	•	+	+	•	•	•	•	٠	•	٠	+	•	•	+	+	_
SPLEEN .	++	+	+	+	+		•	•	٠	*	+	+	<u>+</u>	•	•	•	•	٠	٠		+	٠	•	٠.	-
LYMPH NODES	<u>+</u>	+	•	+		٠	•	٠.	٠	+	+	٠	+	<u>+</u>	+	•	٠	+	٠	٠	*	٠	+	•	_
THYMUS	-	-	•	٠	٠	+	+	٠	•	+	+	•	٠	•	•	•	٠	٠	+	+	٠	٠	+	+	
CIRCULATORY SYSTEM	1																								~
HEART	•	+	+	+	+	٠	+	+	+	+	+	+	+	•	•	+	+	•	+	+	•	٠	•	٠	
DIGESTIVE SYSTEM	<u> </u>																								
SALIVARY GLAND	<u> </u> *-	•	+	•	•	<u>+</u>	-	٠	•		<u>+</u>	•	<u>.</u>	<u>+</u>	•	•	٠	+	•	•	٠		٠	•	-
LIVER Neoplastic Nodule Sarcoma, Nos, metastatic	•	•	•	٠	•	•.	•	•	•	•	•	•	•	•	•	•	•	×	•	•	•	•	+	•	
BILE DUCT	•		<u>.</u>	٠	•		٠	٠.	•	٠		٠	•	ŧ.,	٠	+	*	•	•	•	•	٠	+	+	
GALLBLADDER & CONMON SILE DUCT	H	. N.,	N.	N	N	н	<u>.H</u>	н.	N.,	JL	N	н	N	N	H	N	N	N	N	N	N		N.	N	
PANCREAS	+	+	٠	٠	+	+	-	+	•	٠	•	•	•	•	+	٠	+	٠	٠	+	-	٠	٠	٠	
ACIHAR-CELL ADENOMA	<u> </u>																								-
ESOPHAGUS .	<u> </u>	<u> </u>	-	<u>.</u>	<u> </u>	<u>.</u>	<u> </u>		<u>+</u>	÷	*			<u>*</u>		<u>.</u>	<u>.</u>			- <b>*</b>					^
STOMACH .	†÷		<u>.</u>	<u> </u>	<u> </u>	÷	•		÷	÷	÷	÷	÷	÷	•	•	÷	÷	- <u>*</u>	÷.	-		*	÷	-
SMALL INTESTINE	L.	<u>.</u>	÷.		÷	•	-	÷	<u> </u>	÷	+	*		÷	•	*	÷	÷	÷	÷	÷	÷	÷	÷	
LARGE INTESTINE	+	<u> </u>		_	<u> </u>	<u> </u>	_		-	<u> </u>	<u> </u>	-	<u> </u>	-	<u> </u>	<u> </u>	-	-	<u> </u>	<u> </u>	-			<u>.</u>	
URINARY SYSTEM		+		•							•	•	+	+	+		+				•	+	•	+	
KIDNEY .		•	•	Ť	<u> </u>	•	•	•	÷	<u>.</u>	•					•		•		+	<u>.</u>			÷	-
URINARY BLADDER	+		<u> </u>	<u> </u>		<u> </u>	•	<u> </u>	<u> </u>	<u> </u>		<u> </u>		•	<u> </u>	-	<u> </u>		_	_	<u> </u>			<u> </u>	
ENDOCRINE SYSTEM	1.						_		_															•	
ADENOM/0 NOS	+	*	÷.	÷.	<u> </u>	<u> </u>	-	*	_	<u> </u>	<u> </u>	+	+	+	*	ž	ž.	ž.	<u> </u>		_	×.			
ADREMAL Pheochromocytoma	•	+	•	+	•	٠	•	÷.	•	•	*	+	•	•	ż	•	•	•	÷	•	•	•	•	•	
THYROID G-Gell Adenoma G-Gell Carcinoma	•	•	•	•	•	•	-	+	+	•	•	+	•	+	•	•	•	+ ×	•	•	-	<u>.</u>	* *	•	
PARATHYROID	+			+	-	-	-		+		•	•	-	•	-	ę	٠	-	*	*	-		+	*	-
PANCREATIC ISLETS ISLET-CELL ADENOMA ISLET-CELL CARCINOMA Reproductive system	ŀ	•	•	•	•	•	-	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	
MAMMARY GLAND		щ	н	24				•	N		•	м	N			н		÷		•	H	N	•	N	
FIBROADEHOMA	N	N		H		N	N	ž.	N	-	ž.							<u> </u>		-		.4			-
TESTIS Interstitial-cell tumor	×	*	*	ż	÷	*	<u>*</u>	*	•	÷.	*	<u>*</u>	*	<u>*</u>	<u>*</u>	÷.	ż	÷.	ż	×	-	*	<u>*</u>	ż	
PROSTATE PREPUTIAL/CLITORAL GLAND	+ N	.+ H	н	+ H	• N	• N	+ N	+ H	N	<u>+</u> н		+ H	+ N	+ N	+	* N	* N	+ N	• N	+ N	<u>+</u>	н н	+ N	+ N	
CARCINOMA, NOS									_		×			_											
NERVOUS SYSTEM																									
BRAIN Astrocytoma	+	•	×	+	•	+	+	•	•	•	•	+	•	+	+	+	•	•	+	•	•	•	+	+	
SPECIAL SENSE ORGANS	<u> </u>													_					·						-
ZYMBAL'S GLAND Carcinoma, Nos	N	N	N	N	N	м	N	N	N	N	н	H	N	N	N	N	M	H	N	H	N	N	H	N	
ALL OTHER SYSTEMS																									4
MULTIPLE ORGANS NOS Malignant l'Imphoma, nos Malignant l'Imphoma, histiocytic type Leuxemta, Mononuclear Cell	N	H	N	N	N	N	N X	N .	N X	N	N X	H	N	H	N X	N	N	M	N	M	Ħ	N	N	N	
			- a -		-		- <b>a</b> -	-	-		- Ch.,	_		-	-6				_			_		÷ • •	-

### TABLE A3. INDIVIDUAL ANIMAL TUMOR PATHOLOGY OF MALE RATS IN THE TWO-YEARFEED STUDY OF 8-HYDROXYQUINOLINE: HIGH DOSE

8-Hydroxyquinoline, NTP TR 276

TABLE A3. INDIVIDUAL ANIMAL TUMOR PATHOLOGY OF MALE RATS: HIGH DOSE (Continued	TABLE A3.	UAL ANIMAL TUMOR PATHOLOGY OF MALE RATS: HIGH DOSE (Continued)
--	-----------	--

ANIMAL NUMBER	2	27	2	ŝ	3	3	3	3	3	3	3 3	3	3	4		4		4	4	4	4		5	TOTAL
WEEKS ON Study	1	0	0	9	-	9	1	1	1	-		8	1	8	1		9	0	0	8	8	1	7773	TUMORS
NTEGUMENTARY SYSTEM	+•1		_31	-21		-31	<u>.</u> 3L		91	91.7	<u>81 - 8</u>	1.6	91	-	-10	<u>ar -</u>		يو ا	_91		-21	-14	1	
SKIN Basal-Cell Carcinoma Keratoacanthoma	Ŀ	+	+	+	٠	•	+	•	•	•	• •	•	×	+	•	• • ×	· •	•	+	+	•	•	•	50× 1 2
SUBCUTAMEDUS TISSUZ Sarcoma, nos Fibroma Fibrosarcoma	•	•	•	•	+	+	+ x	•	•	•	• •	* ×	•	٠	•	•	×	•	+ X	•	* ×		+ ×	58H 1 5 1
ESPIRATORY SYSTEM																						•		50
LUNGS AND BRONCHI Alvedlar/Bronchiolar Adenoma Alvedlar/Bronchiolar Carcinoma C-Cell Carcinoma, metastatic Sarcoma, Hos, metastatic Ostedsarcoma, metastatic		•	•	•	•	•	•	•	•		× •	×	·	•	•				x	•	×	•		30 1 1
TRACHEA	•	+	+	+	+	+	+	+	+	+	• •	•	+	+	+	+	• •	+	+	٠	٠	+	+	49
EMATOPOIETIC SYSTEM	-						_	••••••																
BONE MARROW	+	<u>.</u> t.	٠.	+	٠	•	•	+	•	•	• •		+		•	•	<u>+</u>		<u> </u>	+	+	+	*	. 69
SPLEEN	+	•	+	+	<u>.</u>	*	٠	+	+	+	- •	_	+	•	+	• •	•	+	+	+	+	+	╧┥╴	47
LYMPH NODES	+	<u></u>	+	+			٠	+	+	<u>+</u>	- +	•	<u>+</u>	•	+	<u>*</u>	• •	+	•	+	•	•	╧┥─	48
THYMUS	+	+	+	-	+	+	•	•	•	+	• •	•	•	•	+	•		+	+	*	•	•	•	38
IRCULATORY SYSTEM	Ι.																						Τ	
HEART	+	+	+	+	*	<u> </u>	•	<u> </u>	*	<u>.</u>	+ +	+	+	<u>.</u>	÷	•	• •	<u> </u>	+	+	•	+	1	50
													•		•	•								49
SALIVARY GLAND Liver	1.	÷		- <u>ڈ</u>	<u>T</u>	• •	*	<u>مت</u> ب	•	•	<u> </u>		÷	•		•			•	*		•	1	48
NEOPLASTIC NODULE Sargoma, Nos, Metastatic		•	•	•	•	•	•	•	•	•		y.	x	*		x i		•	·	_	-	-		3
SILE DUCT		+	•	•	•	•	•	•	+	•	. ,		•	•	•	•		•	•	•	•		•	48
GALLBLADDER & COMMON SILE DUCT		N	H	N	N	N	н	N.	N.	N	HH	N	N	N.	н.	N	LN	N	N	N	N	Η.	H	50%
PANCREAS	1.	+	٠	+	+	+	+	+	•	+	- +		٠	•	+	•	• •	٠	٠	٠	٠	٠	+	45
ACINĂR-CELL ADENOMA	+							-	<u>.</u>														<u>×</u>	
ESOPHAGUS	+	<u>*</u>	<u>.</u>	<u>+</u>		•	<u>•</u>	<u> </u>	*	•	<u> </u>	-	*	<u>+</u>	<u>.</u>	• •	<u> </u>	•	<u>+</u>	<u>.</u>	-	•	╬╴	
STOMACH	+	*	<u>•</u>	<u> </u>	<u>.</u>	<u>.</u>	<u>.</u>	<u>*</u>	•	<u>•</u>			<u> </u>	•	•	• •	<u>. +</u>	÷	- <u>*</u> -	*	÷	- <u>-</u>	-	<u></u>
SMALL INTESTINE Large intestine	t.	÷	÷	•	÷	÷		÷	÷	÷		•		<u>.</u>		•		•	- <u>*</u> -	•	•	•	-	<u>44</u>
RINARY SYSTEM	+			_															-					
KIDNEY	L	+	+	•	+	•	•	•	<b>.</b>	+	- •	•	+	•	•	•	•	•	•	•	•	•	•	
URINARY BLADDER	•	+	+	+	+	٠	٠	+	+	+	• •	•	+	-	•	•	• •	+	٠	+	+	•	+	46
NDOCRINE SYSTEM	+	-															_						+-	
PITUITARY Adenoma, Nos	•	+	ż	•	+	÷.	+	•	•	÷.	• •	+	+	•	•	•	; +	<u></u>	•	-	٠	•	ż	47
ADRENAL Pheochromocytoma	•	+	ż	+	+	+	+	+	÷	ż	- +	•	÷	٠	÷	÷.	• •	÷	÷	٠	٠	٠	÷	48
THYROID C-Cell Adenoma C-Cell Carcinoma	Ŀ	+	+	٠	+	٠	+	*	*	•	• •	+	+	•	٠	•	• •	×	+ X	+	•	+	•	47 2 4
PARATHYROID	L.	•	+	+	•		•	*	•	<u>.</u>		_	_	•		-				-	-	-	•	_20
PANCREATIC ISLETS ISLET-CELL ADENOMA Islet-CELL Carcinoma Eproductive system	×	•	•	*	•	• 	•	•	•	•	- •	•	•	•	•	•	• •	•	•	•	•	•	•	45
MAMMARY GLAND FIBROADENOMA	ŀ	•	•	N	•	N	•	•	•	<b>H</b>	N N	N	N	N	N	÷	1 11	•	N	÷	N		•	58×
TESTIS Interstitial-cell tumor	1×	ż	ż	ż	ż	+	ż	ż	÷	ż	<u> </u>	÷	ż	÷	÷	<u>* :</u>	; ; ;	<u>*</u>	÷	+	÷	÷.	*	48
PROSTATE	·	+		•	•	•	+	•	•	•	• •	•	+	-	٠	•	•	٠	•	٠	+	•	ᅪ	48
PREPUTIAL/CLITORAL GLAND Carcinoma, NGS	N	N	H	N	н	N	N	N	H	N	N N	N	N	N	N	N I		N	N	N	N	N	N	50M 1
ERVOUS SYSTEM	+																						1	
BRAIN Astrocytoma	+	+	+	+	+	٠	+	+	+	٠	• •	•	٠	٠	٠	•	• •	+	٠	٠	+	+	•	50,
PECIAL SENSE ORGANS	+		_		_					_			_		_					_				
ZYMBAL'S GLAND	N	н	N	N	H	H	Ħ	н	N	N	и н	i N	N	N	N	• (		N	N	N	N	N	н	50 M
CARCINOMA, NOS															_	×								1
NLL OTHER SYSTEMS Multiple organs nos Malignant Lymphoma, nos Malig.lymphoma, histiocytic type Leukemia.monohugiear cell	н	н	N	XZ	N	N	N	N	N X	N		I N	H	N	N	N	4 14	N	N	H	N	N	N	50M

\* ANIMALS NECROPSIED

.

NUMBER		9	0	0	0	i	9	0	;	1	1	1	3	-	1	1	2			2	2	2	23	2	25
WEEKS ON STUDY	;	1	-	1	•			1	1	1		•	•		1	-		•	•	J	•	1	•	•	
INTEGUMENTARY SYSTEM		-41	.41			-		. 31	_91	- 1		-	<u>.</u>	91.	-	21	-	91	<u></u>				-24	<u>, 91.</u>	-
SUBCUTANEDUS TISSUE Fibroma Fibrosarcoma	•	٠	•	N	٠	٠	+	•	٠	•	+	•	•	•	•	٠	+	•	•	٠	+ x	•	•	•	+
RESPIRATORY SYSTEM				_																			-		
LUNGS AND BRONCHI Alvedlar/Bronchiolar Ademoma Fibrosarcoma, Metastatic	ŀ	•	•	•	•	•	•	•	•	•	•	•	•	•	*	*	•	•	•	*	•	+	<u> </u>	•	•
TRACHEA	+	+	+	+	+	+	•	+	٠	+	•	*	+	+	+	+	*	•	*	+	+	+	+	+	*
HEMATUPOIETIC SYSTEM																									
BONE MARRON	+	<u></u>	<u> </u>	•	<u>.</u>	*			*	<u>+</u>	÷	÷	•	<u>.</u>	<u>.</u>	÷	•	<u>.</u>	÷	<u>.</u>	÷	•	<u></u>	<u>•</u>	
SPLEEN	+	*	<b>*</b>	•	<u>.</u>	<u> </u>	<u>.</u>	<u>.</u>	<u>.</u>	<u>+</u>	<u>*</u>	<u>*</u>	- <u>-</u> -	÷		÷	-		÷	-		÷	•	÷	<u>~</u>
LYMPH HODES	†÷	<u> </u>	<u> </u>	<u> </u>	<u> </u>	<u>.</u>	•	÷.	<u></u>	-	<u> </u>	÷	÷	•	•		- <u>-</u>	÷	- <u>-</u>	÷	*	÷	<u>,</u>	÷	<u>ت</u> ــ
THYMUS	<u> </u>	+	+	_	<u> </u>	<u> </u>	_	<u> </u>					<u> </u>						-			•			_
CIRCULATORY SYSTEM	1.	•	•	•						•	•	•	•				•	•	•	•	•	•	•	•	•
HEART DIGESTIVE SYSTEM	+			÷		-			<u> </u>					*											
SALIVARY GLAND	Ŀ	•	٠	+	<u>+</u>	•	•	•		•	٠	•	+	•	•	•	÷	٠	•	٠	٠	+	•	•	+
LIVER Neoplastic Nodule Hepatocelular Carcinoma	•	+	•	•	+	•	*	•	•	•	+ X	+	•	•	•	٠	•	•	+	•	•	٠	+	•	+
BILE DUCT	I.	•	٠	٠	•	•	٠	۰.	•		•	٠	•	÷	٠	•	•	•	•	+		•	•	*	•
GALLBLADDER & COMMON BILE DUCT	LH	N	M	N	N	N	H.	M	H	H	м	М.	N		N	JI.	N.	N	N	N	N	N	N		. 1
PANCREAS	Ŀ	٠	•	•	•		•	٠	•	•	•	•	•	•	•	+	•	٠	+	+	÷	•	•	÷	•
ESOPHAGUS	•	•	•	-			٠			٠	+	+	•	•	٠	٠	•		٠	٠	٠	٠	+	•	•
STOMACH	L.	•	•	٠	٠	•	٠	•		٠	٠	•	٠	•	•	•	+	•	•	•	•	+	•	٠	•
SMALL INTESTINE	L.	+	•		٠	•	+	٠	٠	•	+	+	+	٠	+	٠	٠	+			٠	+	+	+	٠
LARGE INTESTINE	•	+	+	•	+	٠	٠	+	٠	+	٠	+	٠	٠	•	+	٠	٠	•	•	+	+	٠	+	+
RINARY SYSTEM	+				_			-	-			-					-			_					
KIDNEY .	<u>ا</u>		+	•		٠	•	•	+	+	٠	+	٠	.+	•	•	٠	+	<u>.</u>	٠		٠	<u>+</u>	+	_
URINARY BLADDER	+	+	+	٠	٠	+	+	٠	٠	+	+	+	+	•	+	+	٠	٠	٠	٠	٠	+	٠	+	+
ENDOCRINE SYSTEM			_									-			_										-
PITUITARY Adenoma, NGS	+	•	×	•	ż	* *	ż	÷	•	*	•	-	•	ż	•	<u> </u>	•	•	ż	•	ż	•	ż	ż	* *
ADREMAL Cortical Adenoma Cortical Carcinoma Pheochromocytoma	Ļ	•	+ 	•	•	•	+	•	•	+	•	•	•	•	•	+	•	•	•	•	•	•	•	•	-
THYROID C-Cell Abenoma C-Cell Carcinoma	×	•	•	•	•	•	•	•	•	+	•	•	•	•	•	•	•	•	•	•	•	•	•	+	•
PARATHYROID	•	٠	+	٠	٠	-	٠	٠	٠	٠	٠	+	٠	-	-	•	•	•	٠	+	•	-	-	-	+
REPRODUCTIVE SYSTEM							•							-		-		_	-					-	-
MAMMARY GLAND Fibrgadenoma	÷	N	+	N	*	N	*	*	+	*	÷	N	٠	÷	+	÷	+	٠	H	•	٠	*	* X	H	+
PREPUTIAL/CLITORAL GLAND Adenoma, Nos		N	H	N	м	N	N	NX	Ħ	N	N	H	N	Ħ	N	N	N	N	ĸ	N	N	N	N	N	N
UTERUS Endometrial stromal polyp	1±	•	•	٠	•	+	•	•	÷	•	•	•	•	÷	+	+	•	+	•	*	+	ż	+	+	_
QVARY GRANULOSA-CELL TUMOR Sertoli-Cell Tumor Iervous System	•	•		<u>.</u>	•	•	•	•	•	•	•	•	<u>.</u>	•	•	<u>.</u>	•	•	•	•	• 	•	<u> </u>	• 	•
BRAIN	•	٠	٠	٠	٠	٠	٠	٠	٠	٠	٠	٠	٠	+	+	•	+	٠	-	+	٠	•	٠	+	+
PECIAL SENSE ORGANS	+																						-		
EAR FIBROSARCOMA	•	H	M	N	N	н	N	•	N	N	N	N	N	N	H	N	N	N	H	H	N	*.	н	N	N
MULTIPLE ORGANS NOS	н	N	N	N	N	N	N	Ņ	N	N	N	N	N	N	N	N	N	N	н	N	N	N	N	N	N
LEUKEMIA, MONONUCLEAR CELL + TISSUE EXAMINED MICROSCOPICALL - REQUIRED TISSUE NOT EXAMINED M				X	_			<u>×</u>		_		_			MAT				_				<u> </u>		

#### TABLE A4. INDIVIDUAL ANIMAL TUMOR PATHOLOGY OF FEMALE RATS IN THE TWO-YEAR FEED STUDY OF 8-HYDROXYQUINOLINE: UNTREATED CONTROL

-: REQUIRED TISSUE NOT EXAMINED MICROSCOPICALLY X: Tumor incidence H: Necropsy, no Autolysis, no microscopic examination S: Animal Mis-Sexed

C: NECKOPSY, NO HISTOLOGY DUE TO PROTOCOL A: Autolysis M: Animal Missing B: No Neckopsy Performed

						- U	<b>CO</b>	nti	nu	ea	)															
ANIMAL NUMBER	2	0 2 7	0 2 8	29	0 3 0	3	32	3	3	3	3	37	3	0 3 9	8 4 0		4	4	4	0 4 5	4	4	-	-	5	TOTAL
STUDY		9	0	ġ	0	8 7	8	G	9	2		-	ġ	ġ	ģ	ġ	ġ	9	4	9	ġ	ġ	ġ	ġ	ġ	TUMOR
INTEGUMENTARY SYSTEM Subcutanegus tissue Fibroma	•	+	+	٠	٠	٠	٠	٠	٠	٠	•	+	* ×	٠	•	•	•	+	٠	٠	+	٠	٠	٠	•	50%
FIBROSARCOMA																									_	1
RESPIRATORY SYSTEM																										
LUNGS AND BRONCHI Alveolar/Bronchiolar Adenoma Fibrosarcoma, metastatic	Ļ	×	•	•	+	+	+	+	+	+	•	•	•	+	•	+	•	+	•	•	+	* 	<u> </u>	•	•	50
TRACHEA	+	+	+	+	+	+	+	+	+	+	+	+	•	٠	•	•	+	+	+	•	٠	٠	+	+	+	58
TEMATOPOIETIC SYSTEM																							, incrusion			
BONE MARROW	+	-	+	+	•	•	-	٠		-	+	+	+	. •	+	*	+	+	+	•	٠	٠	*	+	+	47
SPLEEN	1.	+	•	•	+				+	٠	٠	+	. <b>.</b>	+	•	÷	+	+	•	+	<u>.</u>	+	+	<u>.</u>	╧	50
LYMPH NODES	+		•	•		+	-	٠	÷	٠	+		+	+	•	<b>•</b>	. +	+	+	٠	٠	+	<u>+</u>	+	•	49
THYMUS	+	+	+	٠	+	-	•	٠	٠	-	+	+	+	+	+	•	-	+	+	+	٠	+	+	+	+	48
CIRCULATORY SYSTEM				· · · · · ·																						
HEART	•	+	+	+	+	•	-	+	+	٠	+	٠	+	+	•	٠	•	•	•	•	٠	+	+	+	+	49
DIGESTIVE SYSTEM																										
SALIVARY GLAND	- <u>+</u> -	*	•	•	t.			. +	+	ŧ	+	.+	+	+	+	÷	+	•	+	+	•	+	+		+	67
LIVER Neoplastic Nodule Hepatocellular carcingma	×	+	•	•	•	•	*	×	•	+	+	+	•	•	•	•	ż	•	•	+	*	•	•	•	1	34
BILE DUCT	L.	+	÷	+	+	+		•	<b>.</b>	+	•	٠	•		•	٠	•	٠	۰.	.+	•	<u>+</u>	<u>+</u>	.+	•	54
GALLBLADDER & COMMON BILE DUCT			N				N	N	N.	N	N	. N.	_H	н	Ħ	N	Н.	. M.	1		R.	Ν.	М.,			581
PANCREAS	Ŀ	٠	٠	٠		•		•	٠	•.	+	٠	٠	+	•	•	•			٠	•	+.	<b>.</b>	+	بغ	- 49
ESOPHAGUS	1±	•	+	•	+	-	-	٠.	. + .	+	+	÷	٠	•	+	٠	+	•	٠	•	٠		<u></u>	+	+	47
STOMACH	1 tot	•	. +	•	+	•	-	•	+.		+	٠	+	+	•	+	٠	٠.		٠	٠	٠.	<u>.</u>	+	.*	48
SMALL INTESTINE	+±-	•	•	٠	. •	٠	-	+	+	+.		+	+	+	٠	٠	٠	٠	+	•		+	+	٠.	+	
LARGE INTESTINE	+	+	+	+	+	-	-	+	+	+	٠	٠	+	+	•	•	•	+	•	+	٠	+	+	٠	+	45
URINARY SYSTEM	-			-																						
KIDNEY	_ <del>  *</del>	•	٠	•			+	+	•		<u>+</u>	•	+	•	•	+	+	٠.	•	•	÷	•	<u> </u>	. <del>.</del>	+	50
URINARY SLADDER	•	+	+	+	+	+	+	+	+	٠	٠	٠	+	+	•	•	+	+	•	+	+	•	•	+	+	50
ENDOCRINE SYSTEM																										
PITUITARY Adenoma, N <b>os</b>	1×	* *	•	*	×	-	•	ż.	ż	•	•	•	+	* x.	+	•	÷.	*.	+	ż	ż	+	•	+	+	47
ADRENAL Cortical Adenoma Cortical Carcinoma Pheochromocytoma	ŀ	•	•	•	•	•	-	•	×	* ×	•	•	•	•	•	+	•	•	•	•	•	+	•	•	•	<b>49</b>
THYROID C-Cell Adenoma C-Cell Carcingma	+	•	+	•	•	-	-	•	+	•	•	+	+ x	•	+	•	•	•	•	•	+ .x.	•	+	+	*	48
PARATHYRGID	-	+	-	+	-	•	•	•	•	•	•	-	+	+	-	+	+	+	+	+	٠	•	+	+	-	27
REPRODUCTIVE SYSTEM	+-										_												_			
MAMMARY GLAND	1 :	N	+	٠	<b>:</b>	t	+	N	t	N	N	+	+	+	t	t	٠	:	٠	\$	ţ	N	N	N	N	588
FIBROADENOMA Preputial/clitoral gland Adenoma, nos	H	N	N	N	N	N	H	H	N	N	N	N	H	H	ħ	N	N	H	N	N	N	H	N	N	н	50%
UTERUS Endometrial Stromal Polyp	•	÷	*	+	•	+	-	+	+	+	÷	*	+	+	*	+	+	٠	+	*	٠	+	+	٠	٠	49
OVARY Granulosa-Cell Tumor Seroli-Cell Tumor Nervous System	×	•	•	٠	٠	٠	-	• ۲	+	+	•	+	•	٠	٠	٠	٠	٠	٠	•	•	•	•	•	٠	49
																								,		
BRÁIN	•	+	•	*	•	•	•	•	•	+	+	*	•	•	<u>.</u>	<u> </u>	•	<u>.</u>	*	+	•	•	<u> </u>	*	*	49
SPECIAL SENSE ORGANS																										
EAR FIBROSARCOMA ALL OTHER SYSTEMS		н	N	H 1		N	N	N	N	M	N	N	H	N	N	H	N	N	N	N	N	×		H	N	501
MULTIPLE ORGANS NOS	N	м	м	N	N	N	N	N	Ħ	N	N	N	ж	N	N	N	N	N	N	N	N	N	Ħ	N	н	50×
LEUKEMIA.MONONUCLEAR CELL		.4	X			ÿ				X																6

# TABLE A4. INDIVIDUAL ANIMAL TUMOR PATHOLOGY OF FEMALE RATS: UNTREATED CONTROL (Continued)

+ ANIMALS HECROPSIED

			<u>а</u> т	- 01	- - T		1	. ५ ग	<u>_</u>	- 81	- ST		11. 11	æر T	- <b>a</b> T	1	স	э.с. Т	- 11	-01		01	01	61	-7
NUMBER		2	3	:	3		2	4	-	4	1	2	1	4	1	1	1	8	1	2 0	2	2	3	2	
WEEKS ON Study	0	0	0		9		0	0	9	•	7			0			4		9	0		0	91	0	
INTEGUMENTARY SYSTEM	1			_																					
SUBCUTANEOUS TISSUE Sarcoma, Nos Fibroma Leidmygsarcoma	+	+	+	+	N	•	+	•	* ×	•	•	•	N	•	•	•	•	* ×	•	+	•	•	•	+	1
RESPIRATORY SYSTEM																				-			_		
LUNGS AND BRONCHI Alveolar/Bronchiolar Adenoma Sarcoma, Nos, metastatic	•	•	+	•	•	•	•	•	• ×	•	•	+	•	•	•	•	•	•	×	+	•	•	×	+	•
TRACHEA	+	+	+	٠	+	+	+	٠	٠	٠	٠	+	+	+	+	+	٠	+	+	+	+	+	+	+	1
HEMATOPOIETIC SYSTEM	1-																			-					
BONE MARROW	++	+_	<u>_*</u> _	•			+	•	٠	. +	+	+	+	٠	٠	+	+	+	+	•	+	+	•	÷	
SPLEEN	<u>+</u>	•	•	•	+	•		+	+	•	٠	+	•	+	+_	.+	+	+.	+	•	+	+	+	+	_
LYMPH HODES	++	+	•	•	+	+	+	•	-	۰.	+	<u>+</u>		+	٠	•	-	+.	+	+	+	+	+	+	_
THYMUS	+	+	•	•	-	+	+	-	•	+	+	+	+	+	+	•	٠	+	+	•	+	+	+	•	•
CIRCULATORY SYSTEM																									-
HEART	+	٠	+	+	+	•	+	+	+	+	+	+	+	+	•	•	•	+	+	+	٠	+	+	+	4
DIGESTIVE SYSTEM																									
SALIVARY GLAND	+	+	•	+	+	<u>+</u>	•	+	<u> </u>	+	+	+	+	+	+_	+	•	+	+	+	+	+	+	*	_
LIVER Heoplastic Nodule	1.	+	•	+	+	*	+	+	+	+	. +	+	+	+	•	+	+	+	+	+	٠	+	+	+	•
BILE DUCT	•	+		+.	•	+		•	•	٠	٠	•	÷	•	+	•	•	•	+	+_	•	٠	+	•	
GALLBLADDER & COMMON BILE DUGT	N	. н.		N	N	. NL	N	N.		н	N	H	H	N.	N	N	Nł.	N	×	M	Ν.	N	H	N	1
PANCREAS	•	•	•	•	•	•	•		•	•		•	•	•	•	+	•	+	•	٠	+	•		•	
ESOPHAGUS	•	+.	•	•	•	•	+	+	•	•	+	•	•	٠	•	+	+	+	.+	•	•	+		+	
STOMACH	•	+	•	+.	•	+	+	+	•	+	٠	+	+	•	•	+		+			+	+	+	*	,
SMALL INTESTINE	Ŀ	+	+	+	•	+	+	+	•	+	+	+	+	+	•	٠	•		•	+	•	+	+	+	
LARGE INTESTINE Sarcoma, nos	•	+	+	٠	+	+	+	+	-	+	٠	+	+	٠	+	٠	•	+	٠	+	+	٠	٠	٠	
URINARY SYSTEM	+									-															-
KIDHEY Sarcoma, Nos, Metastatic	ŀ	•	+	•	•	•	•	•	÷.	•	•	•	•	•	•	•	+	+	•	•	+	•	+	+	-
URINARY BLADDER TRANSITIONAL-CELL PAPILLOMA	•	*	•	+	*	+	+	•	-	+	•	+	•	•	•	•	+	+	+	•	•	•	<u>+</u>	•	
ENDOCRINE SYSTEM																		,	,	•	•	•		•	
PITUITARY Carcinoma,nos Adendma, nos	L.	• 	•	×	×	•	* 	+ x	•	• _×_	•	•	•	* *	•	+ _X	•	* ×.	×	•	* 	×	+	×	
ADRENAL Pheochromocytoma	Ŀ	+	ż	+	+	•	•	•	•	•	+	•	+	•	+	+	+	+	+	+	+	+	+	*	•
THYROID C-Cell Adenoma	•	+	+	•	+	•	+	+	٠	+	•	+	+	÷	+	+	+	+	•	•	•	+	+	•	
PARATHYROID	+	-	•	-	•	•	•	•	-	٠	+	+	+	-	-	•	+	•	•	-	-	•	-	٠	
REPRODUCTIVE SYSTEM	+-															_						-	-		
MAMMARY GLAND Fibroadenoma	N	N	•	N	N	H	H	N	•	÷.	+	N	N	N	ż.	* x	* ×	÷	N	N	H	* ×	N	•	-
UTERUS Endometrial stromal polyp Endometrial stromal sarcoma	Ŀ	+	•	•	+ 	×	×	ż	_	•	×	ż	+	+	×	•	+	×	•	+	×	•	+	•	
OVARY NERVOUS SYSTEM	+•	<u>.</u>	•	<u> </u>	•	+	+	•	-	•	•	. +	+	•		•	+	•	+	٠	•	+	<u>+</u>	•	_
BRAIN	•	٠	•	•	٠	•	٠	٠	٠	٠	+	+	•	+	٠	٠	٠	٠	+	+	+	•	٠	+	
ALL OTHER SYSTEMS				_	_		_													-					-
MULTIPLE ORGANS NOS Malignant Lymphoma, nos Leukemta, mononuclear cell	N	н	н	н	N	N	н	N	N	M	H	N	N	N	N	N	N	N	N	м	н	N	×	N	1

### TABLE A4. INDIVIDUAL ANIMAL TUMOR PATHOLOGY OF FEMALE RATS IN THE TWO-YEARFEED STUDY OF 8-HYDROXYQUINOLINE: LOW DOSE

AN IMAL Number	2	2	2	2	3	3	3	3	3	3	3	3	3	3		1	2	1		4	4	;	i	اف	š,	TOTAL
WEEKS ON Study	8	8	0	0	ļ					į		0				<u> </u>		è	9 2	1 0 4	i		1 0 4	9		TUMOR
SUBCUTANEOUS TISSUE					•	•	N			•	н	•			•	•	•	•	•	÷	•	•	•	•	•	50×
SARCOMA, NOS Fibroma Leiomyosarcoma		•	•	·	•	·		•	•	·		•	·		•	•					•			x		1
RESPIRATORY SYSTEM																						-		-	Ť	
LUNGS AND BRONCHÍ Alveolar/bronchíolar adenoma Sarcoma, nos, metastatic	ŀ	+	•	•	•	+	•	•	+	+	+	•	•	•	•	+	+	+	+	+	+	+	+	•	+	50 2 1
TRACHEA	+	٠	+	¢	٠	+	+	+	+	٠	+	*	+	÷	٠	+	+	•	+	٠	+	+	٠	+	•	50
HEMATOPOIETIC SYSTEM		_																							+	
SONE MARROW	+	+	+	+	+	+	٠	+	<u>+</u>	<u>+</u>	+	-	+	•	•	+	•	•	<u>+</u>	+	+	+	+	+	+	- 48
SPLEEN	+•	÷	+	+	•	+	•	+	*	•	+	٠	+	+	+	٠.	<del>•</del>	•	*	+	+	÷	+	<u>+</u>	+	50
LYMPH NODES	++	+	+	٠	+	+	+	*	٠	÷	+	٠.	+	*	+	+	+	+	•	+	+	+	+	+	╇	. 43
THYMUS	+	•	+	+	+	+	•	+	+	•	+	•	+	•	+	-	+	•	-	+	+	+	+	-	+	40
CIRCULATORY SYSTEM																										
HEART	+	+	٠	+	+	+	•	+	•	٠	+	+	+	+	+	٠	•	+	+	+	+	+	•	+	+	50
DIGESTIVE SYSTEM																										
SALIVARY GLAND	- <del>  +</del>	. +	. +.	+	+	+	+	+	+	•	+	+	•	•	+	÷ .	÷	+	+	+	+	+	•	•	*	49
LIVER Neoplastic Nodule	Ŀ	+	•	•	+	+	+	•	+	÷	+	*	•	+	+	+	•	+	+	+	ż	+	*	<u>+</u>	+	50
BILE DUCT	•	٠	٠	•	+	٠	٠	•	٠	٠	٠.	•	٠	٠	٠	٠.	•	+	•	+	+	•	٠	٠	•	50
GALLBLADDER & COMMON BILE DUCT		N	Ħ	N	N	M	N	N	N	N	н_	N.	М	<u>×</u>	<u>N</u>	N.	N	N	N	.H _	х	N	H	N	N	58#
PANCREAS	<b>_</b>	•	•	-	+	٠.	٠	+	٠	٠	+	٠	٠	•	٠	•	•	٠	٠	+	•	٠	٠	+	•	46
ESOPHAGUS	↓.	+		+	+	<u>+</u>	+	•		÷	+	٠.	+	+	+	•	<u>+</u>	+	÷	÷	٠	+	<u>+</u>	+	÷.	56
STOMACH	+	٠	+	٠	+		<u>.</u>	•	•	•	+	٠	+	+	÷	<b>+</b> .	•	÷	•	+	+	٠	+	+	+	50
SMALL INTESTINE	+	+	+	+	+	+	+	+	+	•	+	٠	•	+	+	÷	¢	+	•	+	+	•	٠	•	4	48
LARGE INTESTINE Sarcoma, Nos	+	*	-	+	•	•	+	•	•	•	+	+	+	+	+	•	•	•	٠	• .	+	•	•	•	+	<sup>48</sup> ,
URINARY SYSTEM																									1	
KIDNEY Sarcoma, Hos, Metastatic	ŀ	+	+	•	•	•	•	+	+	•	•	+	•	•	•	•	•	+	•	•	•	+	•	•	•	50,
URINARY BLADDER TRANSITIONAL-CELL PAPILLOMA	•	•	+	•	•	*	*	•	•	•	•	+	+	+	+	+	+	•	•	•	•	•	•	+	•	49 1
ENDOCRINE SYSTEM PITUITARY																			_							49
CARCINOMA, NOS Adenoma, Nos		•	Ĵ	Ţ	•	•	J	J	J	•	Ĵ	•	•	•	J	•	J	•	-	Ĵ	•	Ĵ	•	Ţ	J	,,
ADERUMA, NUS Adrenal Pheochromocytoma	ŀ	•	+	+	+	•	•	÷	÷	+	+	+	+	÷	•	•	+	٠	+	÷	٠	÷	+	ż	·	50
THYROID C-Cell Adenoma	+	+	ţ	+	+	+	+	٠	+	+	٠	÷	•	٠	÷	•	+	•	•	٠	٠	٠	+	+	•	50
PARATHYRGID	-	<u> </u>	<u>م</u> مہ +	+	•	•	•	-	-	-	-	-			•		-	+		-	-	-	+	_	-	16
REPRODUCTIVE SYSTEM						•	•		_																-+-	
MAMMARY GLAND FIBROADENOMA	İż	N	÷	ż	÷	٠	N	+	÷ x	N	н	* ×	+	+	* ×	N	+	+	H	+	÷ ×	٠	÷ ×	Ħ	+	50× 15
UTERUS Endometrial stromal polyp Endometrial stromal sarcoma		•	•	×	•	•	+	•	×	•	•	•	×	+	•	•	•	*	ż	•	•	ż	٠	+	•	49 13
OVARY NERVOUS SYSTEM	- ·	+	+	•	+	+	+	<u>+</u>	•	•		•	•	+	•	•	+	•	•	•	+	+	÷	•	+	69
BRAIN		•	•	•	•	•	•	÷	•	•	•	٠	٠	•	•	•	•	•	•	•	•	•	•	•		59
ALL OTHER SYSTEMS	-	<u> </u>	•		•	-	•	*	•	•	Ŧ	-	•	•	÷	-	-		•		•	·	÷		-	
MULTIPLE ORGANS NOS Malignant Lymphoma, Nos Leukenta, Mondnuclear Cell	N	N	N	N	N	N	N	N	N	N	N	N	N	N	н	н	N	N	N	N	N	N	N	N	N	50%

TABLE A4. INDIVIDUAL ANIMAL TUMOR PATHOLOGY OF FEMALE RATS: LOW DOSE (Continued)

\* ANIMALS NECROPSIED

																_									
AN IMAL NUMBER	0	0	0	0	0 0 5	0	0 0 7	0	0	0	0	1	0 1 3	1	1	0 1 6	11	0	0	2	2	222	2	24	25
WEEKS ON Study		0	0		-11	9	2	0	8	0	1	-	9	•	•	0	5	0		9	0	0	0	1	0
INTEGUMENTARY SYSTEM	+				_9.1	- 2/		91	- 11		-91		• /	2	_	-	<u>.</u>	- 21			-91				-
SUBCUTANEGUS TISSUE Fibroma	•	٠	٠	•	٠	+	N	* x	+	+	+	+	•	+	•	+	+	•	+	+	•	•	+	٠	+
RESPIRATORY SYSTEM	T																								
LUNGS AND BRONCHI . Alvedlar/bronchidlar Adenoma	<b> </b>	+	+	+	+	+	+	•	+	*		+	+	•	ż	+	•	•	+	+	*	+	+	•	+
TRACHEA	+	+	+	+	+	•	•	*	*	+	*	*	+	+	+	+	+	+	*	+	*	+	+	*	+
HEMAYOPOIETIC SYSTEM																									
BONE MARROW	+			•	- <b>-</b>	<u>.</u>		<u>+</u>	•	÷	<u>*</u>		÷	•	÷	<u>.</u>	.*	•	<u>.</u>	<u> </u>	<u> </u>	_ <u>+</u>	<u> </u>	<u>+</u>	<u></u>
SPLEEN	<del>†</del>			÷				<u>*</u>	-	÷	÷.		• •	<u>.</u>	•	<u>.</u>			÷	<u> </u>	<u> </u>	<b>-</b>		<u> </u>	<u> </u>
LYMPH NODES Thymus	1÷	÷	+	+	÷	<u>.</u>	<u>.</u>	*	-	+	•		<u>+</u>	+	+	+	÷	÷	÷	÷		•	÷	÷	÷
CIRCULATORY SYSTEM	Ļ			_	<u> </u>		_	<u> </u>	_	_	_		•	·	<u> </u>	<u> </u>			_	_					_
HEART		•	٠	•	٠	•	•	•	•	•	•	•	•	•	٠	•	•	•	•	•	•	•	٠	٠	
DIGESTIVE SYSTEM	Ļ		_		-	÷	•	·					· · · ·			-	-	-	-				-	<u> </u>	-
SALIVARY GLAND		•	•	•	•	•	•	٠	٠	•	•	•	•	٠	•	•	٠	•	•	+	+	•	•		•
LIVER NEOPLASTIC NODULE	Ŀ	+	+	٠	٠	٠	٠	٠	٠	٠	٠	٠	+	•	•	•	+	+	+	•	+	•	+	+	٠
BILE DUCT	+	: <b>+</b>	•		+	+	<b>.</b>		+	+	٠	+	+	+	+	٠	+	٠	•	<u>+</u>	<u>.</u>	<u> </u>		*	+
GALLBLADDER & COMMON BILE DUCT	<b> </b> #	N	N	М.	<u>. N</u>	N.		1	N.	N	8	N	N	N	N	N	N	N	N	N		<u>N</u>	. N	N	N
PANCREAS	+	+	•	+	•	<u>+</u>	+		*		•	٠	•	+	•	٠	•	+	+	-	+	+		<u> </u>	*
ESOPHAGUS	+	<u>+</u>	•	•	•	•	•	•	•	•	+_	-	•	+	+	*	<u>+</u>	*	•	<u> </u>	+		+	<u>+</u>	+
STOMACH	++	*	•			•	•	+	•	.+			+	•	•	+	*	<u>.</u>	•	<u>+</u>	<u>+</u>	+	٠.	+	*
SMALL INTESTINE Sarcoma, Nos	<b> </b> •	+	*	*	•	+	-	•	+	•	•	•	•	•	•	+	•	•	+	+	+	+	•	•	+
LARGE INTESTINE	•	+	•	+	+	•	•	٠	٠	+	+	+	٠	+	+	+	٠	•	+	+	+	+	+	+	+
URINARY SYSTEM	Г																								
KIDNEY	+	+		+	. +			+	+		•	*	+	•	+	٠.	•	+	+	+	+	+	•	*	*
URINARY BLADDER	•	+	•	+	+	+	+	+	۰.	+	+	+	+	+	•	+	-	+	•	+	+	•	•	•	+
ENDOCRINE SYSTEM PITUITARY	+	•	•	•	•	•		•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•
ADENOMA, NOS	<u><u> </u></u>					x		X		×.			×.		X	X	X	X	×	X	<u> </u>		<u> </u>		Ă.
ADRENAL Cortical Adenoma Pheochromocytoma Ganglioneuroma	•	•	+	•	•	•	•	•	•	•	•	•	•	•	•	+	+	•	•	•	•	+	•	٠	•
THYROID	1.	•	•	•	•	+	•	•	•	•	•	•	•	•	•	+	+	•	•	•	•	-	•	+	-
C-CELL ADENOMA C-CELL CARCINGMA	Ļ		·			·																			
PARATHYROID Adenama, Nos	+	+	•	-	-	•	•	•	•	-	•	-	+	•	•	•	•	•	•	-	-	-	-	-	*
REPRODUCTIVE SYSTEM	1																	•							-
MAMMARY GLAND Adenoma, NGS Fibroadenoma		+	+	+	N	+ X	N	N	• x	N	N	H	+ x	•	•	•	N	•	•	* × ×	+	•	+ x	•	•
PREPUTIAL/CLITORAL GLAND Adenoma, Nos	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	NX	N	N	N	N	N	N	N	N	N
UTERUS Endometrial stromal polyp	ŀ	ż	•	ż	+	•	+	•	ż	ż	•	ż	•	ż	٠	•	٠	•	•	٠	•	*	÷.	+	ż
OVARY GRANULOSA-CELL TUNOR NERVOUS SYSTEM	•	•	•	•	•	٠	٠	٠	•	•	•	•	•	•	•	+	•	•	•	•	•	•	•	•	•
	1						•	•	•	•	•	٠	•	•	•	•	•	+	٠	•		•	•	•	+
BRAIN Astrocytoma	•	•	×	•	•	•																•			
BRAIN	+	•	×							<u> </u>															-

### TABLE A4. INDIVIDUAL ANIMAL TUMOR PATHOLOGY OF FEMALE RATS IN THE TWO-YEARFEED STUDY OF 8-HYDROXYQUINOLINE: HIGH DOSE

ANIMAL NUMBER	2	27	2	2	3	3	3	3	3	3	3	37	3 3	4	4	2	3	i			3			5	TOTAL
WEEKS ON Study	0	8	1	0	8	8	1	1	-	1	0	1	0 0	0	1	į	•	2	2	1		2	•	1	TUMO
INTEGUMENTARY SYSTEM					-21		. 7	-71	-11-			<u>.</u>	71 7	1_3	-6.1	_ 71				- 71		- 1	_11.	-	
SUBCUTANEDUS TISSUE Fibroma	+	•	+	+	•	•	•	•	•	+	•	+	* *	•	н	•	+		+	+	+	+	•	•	50
RESPIRATORY SYSTEM																			•						••
LUNGS AND BRONCHI Alveolar/Bronchiolar Adenoma	+	+	*	+	+	•	•	+	+	+		+	<u>*</u> *	+	•	•	•	•	•	•	+	+	•	*	50
TRACHEA	+	*	+	+	+	+	+	+	+	+	+	+	+ +	+	*	+	. +	•	+	.+	+	+	+	+	50
HEMATOPOIETIC SYSTEM																									
BONE MARROW	+	<u> </u>	<b>.</b>	+	+	+	*	+	+	<u>+</u>	+	+	* *	+	+	+	+	+		•	+	•	+	+	49
SPLEEN	+	•	+	+	+	-	•	+	+	+		<u>*</u>	• •		•	*	+	•	+	+	. + .	•	+	+	<u>47</u>
LYMPH NODES	++	+	•	*	+	+	<u>.</u>	+	•	•	<u>+</u>	+	• •	+	+	+	+		+	.+	-	+	+	*	
THYMUS	+	+	+	+	+	-	+	+	+	*	+	+	- +	+	-	+	+	+	+	+	+	-	-	+	40
CIRCULATORY SYSTEM																									
HEART	+	+	+	*	+	<u>.</u>	<u>+</u>	*	•	•	<u>+</u>	+	• •	+	*	*	•	•	+	•	+	+	<u>+</u>	*	58
DIGESTIVE SYSTEM Salivary gland					•	•																			49
SALIVARY GLAND LIVER	+	÷	+	÷.	*	<u>.</u>	•	•	•	•	+	+	• • • •	+	•	•	•	<u>*</u>	÷	<u>.</u>	÷	•	•	Ť	<u>49</u>
NEOPLASTIC NODULE	Ļ	-	•	*	*	-	Ŧ	•	x	-	•			<b>.</b>		x	-	ŕ	*	•	×.	×.		4	
BILE DUCT	++	.•	٠	•	+	- 7	٠	.+	+	÷	+	•	• •	. +	+	+	+	٠	+	٠	+	+	+	+	49
GALLBLADDER & COMMON BILE DUCT	+	N		N	N.	N	N	М	N	N	N	<u>N</u>	<u>I N</u>	H	N	M	H	N	N	N	N	N	N	N	501
PANCREAS	++	<u>+</u>	+	•	٠	-	•	•	+	<u>+</u>	•	<u>+</u>	• •	-	-	٠	•	٠	+	+	٠		+	+	45
ESOPHAGUS	+	+	•	•	•	•	+	٠	+	+	+	•	• •	•	+	+	•	•		٠.	+	٠	+	+	- 48
STOMACH	÷	•	<u>.</u>	٠	•	-	•	•	<u>*</u>	•	+	•	• •		+	+	•	٠	٠	٠	+	•	*	╧┝	49
SMALL INTESTINE Sarcoma, Hos	ŀ	•	•	٠	٠	-	•	•	+	+	÷.	+	• •	+	•	+	+	+	+	+	+	+	+	+	47
LARGE INTESTINE	+	+	٠	٠	+	-	+	•	+	•	+	+	• •	+	+	+	٠	٠	+	+	+	+	+	•	48
URINARY SYSTEM	-																							Τ	
KIDNEY	+	+	+	•	•	<u> </u>	<u>+</u>	+.	•	*	<u>+</u>	<u>+</u>	• •	+	+	•	+	+	*	٠	+	+	+	+	49
URINARY BLADDER	+	•	+	•	+	+	•	+	+	•	+	+	• •	+	•	+	*	+	+	+	•	+	+	+	49
ENDOCRINE SYSTEM	$\square$																							Т	
PITUITARY Adenoma, Nos	-	ż	<u> </u>	ż	-	ž	•	<u>*</u>	•	+	•	*	• •	+	•	<u>×</u>	÷.	÷	•	÷.	+	*	+	ż.	46
ADRENAL Cortical Adenoma	+	+	+	٠	٠	-	+	٠	+	•	+	•	• •	+	+	*	+	+	+	+	+	•	+	+	49
CORTICAL ADENOMA Pheochromocytoma Ganglioneuroma													X										x		1
TUYPOTO	•	+	+	•	+	+	•	+	+	÷	+	•	• •	+	+	+	+	+	+	+	+	+	+	+	49
C-CELL ADENOMA C-CELL CARCINOMA			x						×		* X					X		X						×	
PARATHYROID Adenoma, Hos	-	-	+	+	+	-	٠	•	-	-	+	-		-	-	+	+	٠	-	+	+	-	•	•	20
REPRODUCTIVE SYSTEM			-							_											_			+	
MAMMARY GLAND ADENOMA, NOS FIBROADENOMA	•	•	* ×	N	N	n	N	•	H	•	N	N	• •	•	N	N	•	•	•	N	•	+	N	•	58
PIERUADERURA Preputial/clitoral gland Adenoma, nos	N	N	N	N	N	н	N	N	н	А Н	N	N	4 N	N	N	Ħ	N	N	N	N	N	H	N	Ņ	50
UTERUS Endometrial stromal Polyp	•	+	ţ	٠	+	-	+	ţ	٠	•	•	÷	• ;	+	ţ	+	+	٠	٠	٠	٠	•	+	+	49
OVARY	•	•	ــهـ. ب	•	•		•	<u>م</u>	+	•	•	•	• •	•	<u>,</u>	•	*	•	•	+	+	•	+	•	49
GRANULOSA-CELL TUMOR Nervous system	+-	•	-		-	-	•	-		-			<u> </u>	-		-		-	- -	-		-	-	+	
BRAIN Astrocytuma	+	•	٠	٠	٠	+	•	٠	+	•	•	•	• •	•	•	٠	•	* x	٠	٠	+	•	+	•	50
ALL OTHER SYSTEMS		ota menta	an Barris	111111				0100.41200																	<u></u>
MULTIPLE ORGANS HOS LEUKEMIA.HOS	H	H	N	н	Ħ	ĸ	H	N	H	N	H	N 1	N N	N	N	N	N	н	N	N	N	N	N	N	50

 TABLE A4. INDIVIDUAL ANIMAL TUMOR PATHOLOGY OF FEMALE RATS: HIGH DOSE (Continued)

\* ANIMALS NECROPSIED

8-Hydroxyquinoline, NTP TR 276

#### **APPENDIX B**

# SUMMARY OF THE INCIDENCE OF NEOPLASMS IN MICE IN THE TWO-YEAR FEED STUDIES OF 8-HYDROXYQUINOLINE

CO	NTRO	L (UNTR)	LOWI	DOSE	HIGH	DOSE
ANIMALS INITIALLY IN STUDY	50		50		50	
ANIMALS NECROPSIED	50		50		50	
ANIMALS EXAMINED HISTOPATHOLOGICALLY	50		50		50	
NTEGUMENTARY SYSTEM						
*SKIN	(50)		(50)		(50)	
KERATOACANTHOMA				(2%)		
SARCOMA, NOS				(2%)		
*SUBCUT TISSUE	(50)		(50)		(50)	
SARCOMA, NOS		(12%)	7	(14%)		(18%)
FIBROMA FIBROSARCOMA	1	(2%)	1	(2%)		(4%) (2%)
RESPIRATORY SYSTEM						
#LUNG	(50)		(49)		(50)	
NEOPLASM, NOS, METASTATIC			1	(2%)	•	(90)
NEOPLASM, NOS, UNC PRIM OR META HEPATOCELLULAR CARCINOMA, METAST	1	(994)	0	(194)	1	(2%)
ALVEOLAR/BRONCHIOLAR ADENOMA		(2%) (10%)		(4%) (18%)	۵	(18%)
ALVEOLAR/BRONCHIOLAR ADENOMA ALVEOLAR/BRONCHIOLAR CARCINOMA		(10%)		(10%)		(10%)
SARCOMA, NOS, METASTATIC		(2%)		(2,6)		(2 %)
HEMATOPOIETIC SYSTEM						
*MULTIPLE ORGANS	(50)		(50)		(50)	
MALIGNANT LYMPHOMA, NOS		(14%)		(2%)		(6%)
MALIG. LYMPHOMA, UNDIFFER-TYPE	•	(14,0)	-	(2 %)		(2%)
MALIG. LYMPHOMA, LYMPHOCYTIC TYPE			3	(6%)	-	(,
MALIG. LYMPHOMA, HISTIOCYTIC TYPE	1	(2%)		(2%)		
#SPLEEN	(49)		(48)		(50)	
MALIGNANT LYMPHOMA, NOS	1	(2%)				
#LYMPH NODE	(44)		(45)		(42)	
HEPATOCELLULAR CARCINOMA, METAST	-		1	(2%)		
MALIGNANT LYMPHOMA, NOS		(5%)	(50)			
#LIVER	(50)		(50)	(0.0)	(50)	
MALIGNANT LYMPHOMA, NOS	( 4.57)			(2%)	(50)	
#GASTRIC SEROSA	(47)		(49)	(90)	(50)	
MAST-CELL TUMOR #PEYER'S PATCH	(43)		(45)	(2%)	(47)	
MALIGNANT LYMPHOMA, NOS		(2%)	(40)			(2%)
#THYMUS	(20)	(270)	(27)		(26)	(270)
MALIGNANT LYMPHOMA, NOS	(20)		(21)			(4%)
CIRCULATORY SYSTEM						
*ABDOMINAL CAVITY	(50)		(50)		(50)	
HEMANGIOMA				(2%)		
*SUBCUT TISSUE	(50)		(50)		(50)	
HEMANGIOMA	1	(2%)				
HEMANGIOSARCOMA				(2%)		
#SPLEEN	(49)		(48)		(50)	
HEMANGIOMA		(6%)		(0~)		(0.0)
HEMANGIOSARCOMA		(2%)		(2%)		(2%)
#LYMPH NODE	(44)	(00)	(45)		(42)	
HEMANGIOMA		(2%)	(FA)		(10)	
#HEART ALVEOLAR/BRONCHIOLAR CA, METASTA	(50)		(50)	(2%)	(49)	
#LIVER	(50)		(50)	(470)	(50)	
۲ هاشه ۲ های ۲	(00)		(00)		(00)	
HEMANGIOMA	2	(4%)				

### TABLE B1. SUMMARY OF THE INCIDENCE OF NEOPLASMS IN MALE MICE IN THE TWO-YEAR FEEDSTUDY OF 8-HYDROXYQUINOLINE

C	CONTROL (UNTR)	LOW DOSE	HIGH DOSE
DIGESTIVE SYSTEM		. <u></u>	<b></b>
#LIVER	(50)	(50)	(50)
HEPATOCELLULAR ADENOMA	9 (18%)	8 (16%)	14 (28%)
HEPATOCELLULAR CARCINOMA	5 (10%)	7 (14%)	3 (6%)
SARCOMA, NOS, UNC PRIM OR META		1 (2%)	
#STOMACH	(47)	(49)	(50)
HEPATOCELLULAR CARCINOMA, METAST		1 (2%)	
HEPATOCELLULAR CARCINOMA, INVASI		1 (2%)	
#GLANDULAR STOMACH	(47)	(49)	(50)
ADENOCARCINOMA, NOS		1 (2%)	
#JEJUNUM	(43)	(45)	(47)
ADENOCARCINOMA, NOS		1 (2%)	
URINARY SYSTEM			
#KIDNEY	(50)	(50)	(50)
ALVEOLAR/BRONCHIOLAR CA, METASTA		1 (2%)	
TUBULAR-CELL ADENOCARCINOMA		1 (2%)	
ENDOCRINE SYSTEM			
#PITUITARY	(39)	(48)	(46)
ADENOMA, NOS	(00)	1 (2%)	1 (2%)
#ADRENAL	(49)	(50)	(46)
ADENOMA, NOS	(+0)	1 (2%)	1 (2%)
CORTICAL ADENOMA	1 (2%)	4 (8%)	2 (4%)
PHEOCHROMOCYTOMA	2 (4%)	3 (6%)	- (-~)
#ADRENAL/CAPSULE	(49)	(50)	(46)
ADENOMA, NOS	1 (2%)	1 (2%)	(10)
#THYROID	(50)	(50)	(48)
FOLLICULAR-CELL ADENOMA	(00)	1 (2%)	(10)
FOLLICULAR-CELL CARCINOMA		1 (2%)	
REPRODUCTIVE SYSTEM			
#TESTIS	(49)	(48)	(47)
INTERSTITIAL-CELL TUMOR	1 (2%)	(40)	(1)
	1 (2%)		
NERVOUS SYSTEM			
#BRAIN	(50)	(49)	(49)
ASTROCYTOMA		1 (2%)	<u> </u>
SPECIAL SENSE ORGANS			
*HARDERIAN GLAND	(50)	(50)	(50)
ADENOMA, NOS	1 (2%)	4 (8%)	1 (2%)
CYSTADENOMA, NOS	1 (2%)		1 (2%)
MUSCULOSKELETAL SYSTEM NONE			
BODY CAVITIES			
*ABDOMINAL CAVITY	(50)	(50)	(50)
SARCOMA, NOS			1 (2%)

# TABLE B1. SUMMARY OF THE INCIDENCE OF NEOPLASMS IN MALE MICE IN THE TWO-YEAR FEED STUDY OF 8-HYDROXYQUINOLINE (Continued)

TABLE B1.	SUMMARY OF THE INCIDENCE OF NEOPLASMS IN MALE MICE IN THE TWO-YEAR FEEI	D
	STUDY OF 8-HYDROXYQUINOLINE (Continued)	

ALL OTHER SYSTEMS *MULTIPLE ORGANS SARCOMA, NOS, METASTATIC LEG SARCOMA, NOS NEUROFIBROSARCOMA *NUMBER OF ANIMALS WITH TISSUE EXAMINE NUMBER OF ANIMALS NECROPSIED	(50) ED MICROSCOPICALI	(50) 1 LY	(50) 1 (2%) 1
SARCOMA, NOS, METASTATIC LEG SARCOMA, NOS NEUROFIBROSARCOMA MURDER OF ANIMALS WITH TISSUE EXAMINE		1	1 (2%)
LEG SARCOMA, NOS NEUROFIBROSARCOMA	ED MICROSCOPICALI		
SARCOMA, NOS NEUROFIBROSARCOMA NUMBER OF ANIMALS WITH TISSUE EXAMINE	ED MICROSCOPICALI		1
NEUROFIBROSARCOMA	ED MICROSCOPICALI		1
NUMBER OF ANIMALS WITH TISSUE EXAMINE	ED MICROSCOPICALI		
	ED MICROSCOPICALI	LY	
NIMAL DISPOSITION SUMMARY			
ANIMALS INITIALLY IN STUDY	50	50	50
NATURAL DEATH	19	12	12
MORIBUND SACRIFICE	2	3	3
SCHEDULED SACRIFICE			
TERMINAL SACRIFICE	29	35	35
DOSING ACCIDENT			
ACCIDENTALLY KILLED, NDA			
ACCIDENTALLY KILLED, NOS			
ANIMAL MISSING ANIMAL MISSEXED			
	<u> </u>		<del></del>
UMOR SUMMARY	35	35	35
TOTAL ANIMALS WITH PRIMARY TUMORS** TOTAL PRIMARY TUMORS	35 56	35 67	30 55
TOTAL ANIMALS WITH BENIGN TUMORS	25	21	25
TOTAL BENIGN TUMORS	29	34	31
TOTAL ANIMALS WITH MALIGNANT TUMORS		22	21
TOTAL MALIGNANT TUMORS	27	31	23
TOTAL ANIMALS WITH SECONDARY TUMOR	S## 2	4	1
TOTAL SECONDARY TUMORS	2	8	1
TOTAL ANIMALS WITH TUMORS UNCERTAIN	ſ <b>-</b>		
BENIGN OR MALIGNANT		1	
TOTAL UNCERTAIN TUMORS		1	
TOTAL ANIMALS WITH TUMORS UNCERTAIN	•		
PRIMARY OR METASTATIC		1	1
TOTAL UNCERTAIN TUMORS		1	1
* PRIMARY TUMORS: ALL TUMORS EXCEPT SEC	CONDARY TUMORS		
# SECONDARY TUMORS: METASTATIC TUMOR		IVE INTO AN ADJACE	ENT ORGAN

Со	NTRO	)L (UNTR)	LOWI	DOSE	HIGH	DOSE
ANIMALS INITIALLY IN STUDY	50	<u>.</u>		<u>, , , , , , , , , , , , , , , , , , , </u>	50	
ANIMALS NECROPSIED	50		50		50	
ANIMALS EXAMINED HISTOPATHOLOGICALLY	50		50		50	
NTEGUMENTARY SYSTEM		· , ::			·, · · ,	_
*SUBCUT TISSUE	(50)		(50)		(50)	
SARCOMA, NOS	1	(2%)	1	(2%)		
ESPIRATORY SYSTEM						
#LUNG	(49)		(50)		(50)	
NEOPLASM, NOS, UNC PRIM OR META			1	(2%)		
HEPATOCELLULAR CARCINOMA, METAST		(2%)	_			
ALVEOLAR/BRONCHIOLAR ADENOMA		(2%)	5	(10%)		(8%)
ALVEOLAR/BRONCHIOLAR CARCINOMA		(2%)				(2%)
ADENOSQUAMOUS CARCINOMA, METASTA						(2%)
PHEOCHROMOCYTOMA, METASTATIC					1	(2%)
SARCOMA, NOS, METASTATIC	1	(2%)				
OSTEOSARCOMA, METASTATIC					1	(2%)
IEMATOPOIETIC SYSTEM						
*MULTIPLE ORGANS	(50)		(50)		(50)	
MALIGNANT LYMPHOMA, NOS	8	(16%)	10	(20%)	6	(12%)
MALIG. LYMPHOMA, UNDIFFER-TYPE	2	(4%)				
MALIG. LYMPHOMA, LYMPHOCYTIC TYPE	1	(2%)	1	(2%)	6	(12%)
MALIG. LYMPHOMA, HISTIOCYTIC TYPE	1	(2%)	1	(2%)		
#SPLEEN	(49)		(48)		(47)	
MALIGNANT LYMPHOMA, NOS			1	(2%)		
#UTERUS	(50)		(47)		(49)	
MALIG. LYMPHOMA, HISTIOCYTIC TYPE	1	(2%)				
CIRCULATORY SYSTEM						
*SUBCUT TISSUE	(50)		(50)		(50)	
HEMANGIOSARCOMA			1	(2%)		
#LYMPH NODE	(42)		(47)		(44)	
HEMANGIOMA			1	(2%)		
#LIVER	(49)		(50)		(49)	
HEMANGIOMA			1	(2%)	1	(2%)
#OVARY	(43)		(46)		(43)	
HEMANGIOMA			2	(4%)		
DIGESTIVE SYSTEM						
<b>#SALIVARY GLAND</b>	(48)		(46)		(48)	
SARCOMA, NOS, INVASIVE		(2%)				
#LIVER	(49)		(50)		(49)	
HEPATOCELLULAR ADENOMA	2	(4%)	1	(2%)	4	(8%)
HEPATOCELLULAR CARCINOMA		(6%)		(2%)		
LIPOMA		(2%)				
#DUODENUM	(43)		(44)		(45)	
ADENOMATOUS POLYP, NOS		- <u></u>		······································	1	(2%)
JRINARY SYSTEM						
#KIDNEY	(49)		(50)		(48)	
TUBULAR-CELL ADENOMA				(2%)	57	
				•		

### TABLE B2. SUMMARY OF THE INCIDENCE OF NEOPLASMS IN FEMALE MICE IN THE TWO-YEARFEED STUDY OF 8-HYDROXYQUINOLINE

	CONTROL (UNTR)	LOW DOSE	HIGH DOSE
ENDOCRINE SYSTEM			
#PITUITARY	(40)	(44)	(37)
ADENOMA, NOS	12 (30%)	14 (32%)	11 (30%)
#ADRENAL	(49)	(48)	(47)
PHEOCHROMOCYTOMA	1 (2%)		
PHEOCHROMOCYTOMA, MALIGNANT			1 (2%)
GANGLIONEUROMA		(10)	1 (2%)
#THYROID	(48)	(48)	(47)
FOLLICULAR-CELL ADENOMA	4 (8%)	2 (4%)	2 (4%)
FOLLICULAR-CELL CARCINOMA	1 (2%)	(17)	
#PANCREATIC ISLETS ISLET-CELL ADENOMA	(47)	(47)	(45)
		1 (2%)	
REPRODUCTIVE SYSTEM			
*MAMMARY GLAND	(50)	(50)	(50)
ADENOCARCINOMA, NOS		2 (4%)	
ADENOSQUAMOUS CARCINOMA	1 (2%)		1 (2%)
#UTERUS	(50)	(47)	(49)
ENDOMETRIAL STROMAL POLYP	1 (2%)		( <b>1</b> • • •
#OVARY	(43)	(46)	(43)
CYSTADENOMA, NOS	1 (2%)		
PAPILLARY CYSTADENOMA, NOS	1 (2%)	1 (07)	
GRANULOSA-CELL TUMOR		1 (2%)	<u> </u>
NERVOUS SYSTEM			
#BRAIN	(49)	(50)	(47)
MENINGIOMA	1 (2%)		
SPECIAL SENSE ORGANS			<u></u>
*HARDERIAN GLAND	(50)	(50)	(50)
ADENOMA, NOS	1 (2%)		1 (2%)
*EAR	(50)	(50)	(50)
SQUAMOUS CELL PAPILLOMA		1 (2%)	
MUSCULOSKELETAL SYSTEM NONE	. <u> </u>		
BODY CAVITIES NONE			
ALL OTHER SYSTEMS			<u> </u>
LEG			
OSTEOSARCOMA			1

### TABLE B2. SUMMARY OF THE INCIDENCE OF NEOPLASMS IN FEMALE MICE IN THE TWO-YEAR FEED STUDY OF 8-HYDROXYQUINOLINE (Continued)

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

	CONTROL (UNTR)	LOW DOSE	HIGH DOSI
ANIMAL DISPOSITION SUMMARY		<u> </u>	
ANIMALS INITIALLY IN STUDY	50	50	50
NATURAL DEATH	25	22	21
MORIBUND SACRIFICE	1	2	
SCHEDULED SACRIFICE			
TERMINAL SACRIFICE	24	26	29
DOSING ACCIDENT			
ACCIDENTALLY KILLED, NDA			
ACCIDENTALLY KILLED, NOS			
ANIMAL MISSING			
ANIMAL MISSEXED			
TUMOR SUMMARY TOTAL ANIMALS WITH PRIMARY TUMO	)RS** 33	30	25
TOTAL PRIMARY TUMORS TOTAL ANIMALS WITH BENIGN TUMOR TOTAL BENIGN TUMORS TOTAL ANIMALS WITH MALIGNANT TU TOTAL MALIGNANT TUMORS TOTAL ANIMALS WITH SECONDARY TU TOTAL SECONDARY TUMORS TOTAL ANIMALS WITH TUMORS UNCER BENIGN OR MALIGNANT	46 RS 19 25 IMORS 19 21 IMORS## 2 4	30 49 22 29 17 18	25 41 17 25 15 16 3 3
TOTAL ANIMALS WITH PRIMARY TUMO TOTAL PRIMARY TUMORS TOTAL ANIMALS WITH BENIGN TUMOR TOTAL BENIGN TUMORS TOTAL ANIMALS WITH MALIGNANT TU TOTAL MALIGNANT TUMORS TOTAL ANIMALS WITH SECONDARY TU TOTAL SECONDARY TUMORS TOTAL ANIMALS WITH TUMORS UNCEF BENIGN OR MALIGNANT TOTAL UNCERTAIN TUMORS	46 RS 19 25 IMORS 19 21 IMORS## 2 4 RTAIN-	49 22 29 17	41 17 25 15 16 3
TOTAL ANIMALS WITH PRIMARY TUMO TOTAL PRIMARY TUMORS TOTAL ANIMALS WITH BENIGN TUMOR TOTAL BENIGN TUMORS TOTAL ANIMALS WITH MALIGNANT TU TOTAL MALIGNANT TUMORS TOTAL ANIMALS WITH SECONDARY TU TOTAL SECONDARY TUMORS TOTAL ANIMALS WITH TUMORS UNCER BENIGN OR MALIGNANT	46 RS 19 25 IMORS 19 21 IMORS## 2 4 RTAIN-	49 22 29 17	41 17 25 15 16 3

### TABLE B2. SUMMARY OF THE INCIDENCE OF NEOPLASMS IN FEMALE MICE IN THE TWO-YEAR FEED STUDY OF 8-HYDROXYQUINOLINE (Continued)

## SECONDARY TUMORS: METASTATIC TUMORS OR TUMORS INVASIVE INTO AN ADJACENT ORGAN

ANIMAL Humber		0		01	91	2	ġį	0	0	11		11	1	1	1	1	ļ	1		2	2	2	2	2
WEEKS ON STUDY				-		ð Z	2		5		3	1	1	1		1	ţ		1	ţ,		亰	Ţ	1
NTEQUMENTARY SYSTEM	نف	Ľ.		_ii	لغ	أق	ě.	1	١ĩ.	اف.	لف	أف	ji.	اف	ji.	j	21	لف	il.	اف	1	11	21	_لغ
SUBCUTANEDUS TISSUE Sarcoma, Nos fibroma Remandioma	×	* ×	٠	x	•	٠	+	٠	٠	٠	* X	٠	* ×	+ x	٠	٠	٠	٠	٠	٠	٠	•	٠	•
RESPIRATORY SYSTEM			-			-					-					-								
LUNGS AND SECNCKI Mepatocellular carcinoma, metasta Alveolar/secnchiolar ademoma Alveolar/secnchiolar carcinoma Sarcoma, Nos, metastatic	•	+ ×	•	•	•	•	•	×	•	* ×	•	+	×	•	•	•	+	•	•	•	•	•	•	•
TRACHEA	+	٠	٠	+	٠	+	+	٠	٠	٠	٠	٠	٠	٠	٠	٠	٠	٠	٠	•	٠	٠	٠	٠
MEMATUPULETIC SYSTEM		_														_								
SONE MARROW	+		٠		. *	•	•	+	•	•	÷	•	<u>.</u>	+	+	+	+	•	٠	٠	-	٠	+	<u>.</u>
SPLEEN Hemangioma Hemangiosarcoma Malignant Lymphoma, Hos	•	٠	+	•	×	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•
LYMPH HODES Hemahoioma Malignant Lymphoma, Hos	·	•	-	•	-	•	-	•	•	•	•	•	•	•	•	-	•	•	-	* *	•	•	×	•
THYMUS	-	•	-	•	-	•	•	•	-	•	-	-	٠	-	+	+	•	+	•	•	+	•	-	•
CIRCULATORY SYSTEM														_										
HEART	•	+	+	•	•	•	+	•	+	+	٠	+	•	٠	•	•	٠	•	•	•	+	*	•	*
DIGESTIVE SYSTEM																							_	
SALIVARY GLAND	<u> </u> *	•	*	+	•	•	•	*	٠	٠.		•	•	*	•	*	*	+	*	•	•		<u> </u>	+
LIVER Hepatocellular Adenoma Hepatocellular carcinoma	+	٠	٠	٠	+	٠	+	٠	٠	•	٠	+	٠	٠	•	*	* x	•	٠	•	•	٠	•	*
HEPATOCELLULAR CARCINOMA Hemangioma Hemangiosarcoma					×						x			×	×				x					
BILE DUCT	<u>  -</u>	•	<u>.</u>	*	<u> </u>	•	•	+	*	*	<u>.</u>	•	<u>+</u>	*	+	+	•	*	•	+	÷	•	<u>*</u>	*
GALLBLADDER & COMMON BILE DUCT	<u> </u>	+		N	+	<u>H</u>	N.	<u></u>	•	<u>.</u>	×	N	*	*	*	•	Н.	+	Н.	<u>.</u>	*	<u>N_</u>	<u> </u>	+
PANCREAS	<u> </u>	<u>.</u>	•		<b>.</b>	<u>.</u>	•	+			÷	•	<u>.</u>	*	٠.	*	•	*	<b>.</b>	•		+	<u>.</u>	+
ESOPHAGUS	<u>ئىم</u>	<u>+</u>	•	<u>.</u>	+	*	•	*	+	<u>.</u>	*	.+	+	<u>.</u>	٠	*	۰.	*	.*	•	<u>.</u>	+	<u></u>	<u> </u>
STOMACH	<u> </u>	•	<u>.</u>	<u></u>	÷	*		•	•	+	*	*	+	*	•	÷	•	÷	-	<u>•</u>	<u>.</u>	•		•
SMALL INTESTINE Malignant Lymphoma, Nos	+	•	*	-	*	•	•	•	+	٠	•	•	+	•	•	•	•	•	-	<u>.</u>	<u>.</u>	•		•
LARGE INTESTINE	•	•	•	•	•	•	+	•	-	+	٠	+	+	•	•	•	+	٠	•	٠	٠	•	•	•
URINARY SYSTEM				-				_	-				_			-	÷							_
KIDNEY	L.			t	+		٠		<u>.</u>	•		_ <u>*</u>		•	•	•	٠		•	٠	•		<u>.</u>	<u>+</u>
URINARY BLADDER	*	٠	٠	٠	٠	٠	•	•	٠	٠	-	+	+	٠	٠	٠	٠	٠	•	٠	٠	٠	٠	٠
ENDOGRINE SYSTEM	1																					_		-
PITUITARY	<u> </u>		٠	-		•		٠.	•	•	÷	•		•	•	•			٠	<u>.</u>	•		<u>*</u>	<u> </u>
ADRENAL Adenoma, Nos Curtical Adenoma Pheochromocytoma	ŀ	•	•	•	•	•	•	•	•	•	*	•	×		•	•	•	•	•	•	•	•	•	•
THYRDID	±			٠		٠	•	•	•	•	<u>.</u> +	<u>.</u>		•	٠	•	<u>.</u>	•		•	٠	•	+	
PARATHYROID	+	٠	٠	•	•	•	-	٠	+	٠	-	٠	٠	•	•	•	•	-	•	•	٠	•	•	٠
REPRODUCTIVE SYSTEM	+							-		-										_			-	
MAMMARY GLAND	<u> </u>		H.	N	H.,	. 8	H	H.	N.		н.	N.	<u>. N</u>		N	<u>×</u>	X.	н.		Н.,	Н.,	M	<u>_H_</u>	
783715	+	٠	٠	٠	٠	٠	٠	٠	•	+	٠	٠	٠	٠	\$	٠	٠	٠	٠	٠	٠	٠	•	•
INTERSTITTAL-CELL TUMOR		•	•	•	•	•	•	•	•	•	•	•	•	-	•	•		•		•	•	•	•	•
PROSTATE NERVOUS SYSTER	╇┷	-	_	-			-		-										_	-	_	-	-	
BRAIN	1.	•	•	•	•	•	•	•	•	•	٠	•		٠	•	•	٠	٠	•	•	•	•	•	•
SPECIAL SENSE ORGANS	<u> </u>												_				_						-	_
HARDERIAN GLAND Adenoma, Nos Cystadenoma, Hos	H	N	N	N	N	N	N	N	N	H	N	N	H	M	H	Ħ	N	H	H	H	н	N,	H	N
ALL OTHER SYSTEMS																								
MULTIFLE ORGANS HOS Malignant Lymphoma, Hos Malig.Lymphoma, Mistiocytic 1925	N	X	н	××	N	H	H	N	N	N	N	N	N	м	н	N	N	N	N	н	N	N	*	N
<ul> <li>TISSUE EXAMINED MICROSCOPICALLY</li> <li>REQUIRED TISSUE NOT EXAMINED MIC</li> <li>Tumor incidence</li> <li>NECROPSY, NO AUTOLYSIS, NO MICRO</li> <li>ANIMA MIS-SEED</li> </ul>	805C SCOP	1991 10	CAL	LY MIH	ATI	OM		C A M B	1	ANT	MAL	MI.	INI HQ \$\$11 \$7	16			SU Y Di	BMI	TTE TO I	RQ	7001	92		

TABLE B3. INDIVIDUAL ANIMAL TUMOR PATHOLOGY OF MALE MICE IN THE TWO-YEAR FEED STUDY OF 8-HYDROXYQUINOLINE: UNTREATED CONTROL

				(	C	on	un	ue	d)																	
ANIMAL		-	1		1	3	ļ	1	3	ì	3	Į	1	I				1		-	:	1	-		-	TOTAL TISSU
WEERS ON STUDY	ļ	j.	ġ	ł	Ľ	į	ġ			<u>  </u>	ġ.	ž.	7	2	i	i		i	ġÌ	8	ģ	ļ	1		j	Tumoi
NIEGUMERIARI IISIEM Subcutanedus Tibsue Sarcora, nos Fibroma Memangioma	·	٠	•	٠	٠	٠	٠	٠	ż	٠	٠	٠	٠	٠	•	•	٠	•	•	٠	٠	٠	*×	٠	+	50
SPIRATORY SYSTEM	+	<u>de la consta</u>					-		tininike:	-	10000				6-18		-			-			-			
LUMGS ANG BRONCHI Hepatgoellular Carcinoma, metasta Alveolarsbronchiolar Ademoma Alveolarsbronchiolar Carcinoma Sarcoma, Hos, metastatic	•	٠	•	٠	•	•	٠	×	* X	٠	٠	•	* x	*	•	•	•	•	•	٠	•	•	•	٠	*	58
TRACHEA	+	+	•	٠	+	+	٠	•	+	+	+	+	+	•	•	•	*	•	•	•		•	٠	•	•	54
ENATOPOSETIC SYSTEM	+																-								-+	
SONE MARRON	<u>_</u>	÷	•	•	•	•	•	•	•	<u>.</u>	÷	<u>.</u>	-	•	•	<u>.</u>	+	•	•	•	٠	•	•	4		- 41
SPLEEN Hemangioma Hemangiosarcoma Malionant Lymphoma, Nos	·	+	•	•	+ ×	•	×	•	•	•	+	+	•	٠	•		•	×	•	•	•	•	٠	•	٠	49
LYMPH HODES Hemangiomá Malighant Lymphoma, Nos	×	•	•	-	•	•	•	•	•	•	•	•	+	•	•	•	•	•	•	•	•	•	•	•	•	44
THYMUS	-	+	•	•	•	+	•	•	-	•	•	+	•	•	•	•	•	•	+	-	+	•	•	•	•	28
IRCULATORY SYSTEM																									Τ	
HEART	•	•	•	•	•	•	+	+	•	•	+	*	+	+	* •	•	•	+	•	•	•	•	*	٠	*	54
IGESTIVE SYSTEM									_																Τ	
SALIVARY GLAND	۲	- <u>+</u>	*	•	*	•	*	*	<u>.</u>	*	*	*	•	<u>.</u>	<u>*</u>	<u>}</u>	•	•	<u>*</u>	•	*	*	•	*	4	
LIVER Hepatocellular Adenoma Hepatocellular Carcinoma Hemangiona Hemangiosarcoma	ŀ	•	•	•	•	•	ż	×	•	×	×	*	•	•	•		•	•	•	•	•	×	•	ž	×	50
BILE DUCT	ŀ	•		•	+.	+	+	•	•	•	+	•	٠	ŧ	•	,	•	•	•	*	•	+	٠	+		50
GALLBLADDER & CONNON SILE DUCT	1.		+	_N_		. М.	•	•	N	<u>+</u>		н.,	•	•	•		•	<u>+</u>	•	•	N		+	+	•	50
PANCREAS	ŀ		+		•	+	•	+	•	•	+	•	•	•	•		+	•	•	٠	•	•	•		+	47
ESOPHAGUS	<u>.</u>		•	•		•	+	+	<u>+</u>	÷	+	<u>+</u>	•	÷	•	•	•	+	•	•	•	+	•	+	<u>+</u>	50
STONACH			•	•	•	+	•	•	•	<u>.</u>	<u>+</u>	•	•	•	•		•	•	•	+	•	*	•	+	•	47
SMALL INTESTINE Malignant Lymphoma, Nos	ŀ	+		•	•	•	•	•	•	·	•	+	•	•	•		•	•	•	÷	•	•	÷	•	٠	43
LARGE INTESTINE	-	٠	٠	٠	-	+	٠	•	-	•	•	٠	٠	•	• •	•	•	•	•	+	•	٠	٠	٠	•	41
RINARY SYSTEM	<b></b>																								-	
KIDNEY	<u> </u>				t	•	•	•	<u>.</u>	±			÷	*	<u>.</u>		<u>+</u>	<u>.</u>	<u>*</u>	÷	*		•	•	*	
URINARY SLADDER	+	+	٠	٠	٠	٠	٠	٠	٠	•	٠	-	٠	•	+ •	•	•	٠	•	•	٠	•	٠	٠	+	46
NDOCRINE SYSTEM		<b>Lane 1</b> .22																				(and a state of the		990.00	-	
PITUITARY .	<u>_</u> *_		<u> </u>	÷	<u>.</u>	•	<u>*</u>	<u>.</u>	•	<u>.</u>	<u>+</u>	<u>*</u>	•	•	<u></u>	<b>L</b>	+	*	<u>.</u>	•	*	<u>*</u>	٠	٠	+	39
ADRENAL Adenoma, Nos Cortical Adenoma Pheochromocytoma	•	•	٠	+	٠	•	٠	٠		• x	•	•	٠	•	• •	•	•	•	•	•	٠	٠	•	٠	•	49
		***																					<u>.</u>		$\frac{1}{2}$	50
THYROID .	Ť		÷	÷	÷	÷	÷	<u>.</u>	÷	•	÷	<u>.</u>	÷	•	• •		<u>.</u>	<u>.</u>	•	÷	<u>.</u>		÷	÷	Ť	<u>30</u> 24
EPRODUCTIVE SYSTEM	Ļ						-			-	-		-	·			-	_			-	-	•	•	-	¢ 9
MAMMARY GLAND	N	ж	*	N	н	н	N	N	н.	N	N	H	м	N	н•		N	N	N	N	N	н	N	н		501
		•	•	<u>م</u>	•	•	•								+ •				_			_	•	•	•	49
TESTIS Interstitial-cell tumor				_						_				·		-									4	
PROSTATE	•	٠	•	٠	•	+	•	٠	•	•	•	•	•	•	• •	•	•	•	•	•	•	•	•	•	•	47
ERVOUS SYSTEM																										
BRAIN	•	*	•	•	*	*	•	•	•	+	•	•	•	•	• •		•	•	•	•	•	٠	•	•	٠	50
FECIAL SENSE ORGANS Harderian Gland Adenoma, NGS Cystadenoma, NGS	н	N	N	N	N	N	N	N	N	H.	H	N	N	N	Ni N		N I	N I	4	N	N X	N	N	н	N	58)
LL OTHER SYSTEMS			-					· · ·							×									_		
LL UINER STRIEMS Multiple Drams nos Malignant Lymphoma, nos Malig.Lymphoma, Histiocytic Type	X	Ņ	N	N	N	H	N	N	м	M	N	N	H I	ł	H H	I	H I	N I	N	N	N	N	N	N	н	50

#### TABLE B3. INDIVIDUAL ANIMAL TUMOR PATHOLOGY OF MALE MICE: UNTREATED CONTROL (Continued)

· ANIMALS HECROPSIED

FEED STUDY	OF	8-	H	YĽ	R	02	XY	Q	U	IN	01		NE	C: .	LC	) И		ю	SI	C					
ANIMAL	0	21	01	0	01	-	01	0 0 8	01	11		01 11 21		11	10	01 1  5	0 1 7	10	01	21	0 2 1	0 2 2 2		4	025
WEEKS ON Study		0		ė		1		2			ė				ġ		ģ	2	0	0	0	0		0	0
INTEGUMENTARY SYSTEM	1					-					-11	- 11		- 11	-				-1						-
SKIN Keratdacamthoma Sarcoma, Hos	Ŀ	•	•	•	•	•	•	•	·	•	N	•	•	٠	•	•	•	•	.•	•	•	•	•	•	•
SUBCUTANEOUS TISSUE Sarcoma, nos Fibrosarcoma Hemangoidsarcoma	×	٠	٠	٠	٠	٠	×	* ×	×	٠	N	٠	٠	٠	٠	٠	٠	• ×	٠	٠	٠	٠	٠	٠	٠
RESPIRATORY SYSTEM	┝		-					-									-			_	-				-
LUNGS AND BRONCHI Meoplasm, Hos. Metastatic Hepatocellular carcinoma. Metasta Alyeolar/Bronchiolar Adermona Alyeolar/Bronchiolar carcinoma	•	•	•	•	•	•	•	•	•	×	* ×	•	•	٠	•	•	•	٠	•	•	•	٠	+	•	* x
TRACHEA	•	٠	٠	٠	٠	٠	٠	٠	٠	٠	٠	٠	٠	٠	٠	٠	٠	٠	٠	٠	٠	٠	٠	٠	٠
HEMATOPOIETIC SYSTEM							_		-			_				-		-		_		-			-
BONE MARROW	<u>├</u> •	•	٠	•	•	٠	٠	٠	٠	•	٠	٠	•	٠	•	<u>.</u>	+_	٠	•	٠	•	+	+	٠	•
SPLEEN Hemangiosarcoma	ŀ	•	•	• •	•	•	• •	• •	÷	•	•	•	•	•	•	•	•	•	<u>.</u>	•	•	•	•	•	-
LYMPH HODES Hepatocellular carcinoma, metasta	Ŀ	•	<u> </u>	-	<u> </u>	<u>.</u>	_	_	<u> </u>	<u> </u>	•	_	•	<u>.</u>	<u>.</u>	÷	<u>.</u>	<u>.</u>	•	•	<u>.</u>	_	<u>.</u>	•	_
THYMUS	-	•	•	•	٠	•	-	-	-	•	-	•	•	•	٠	٠	•	٠	•	٠	٠	•	+	•	-
CIRCULATORY SYSTER				_															_						
HEART LUVEOLAR/BRONCHIOLAR CA. METASTAT DIGESTIVE SYSTEM	ŀ	•	•	<u>.</u>	•	•	•	•	•	•	•	•	•	•	•	•	•	•	<u>.</u>	•	•	<u>·</u>	-	ż	<u>.</u>
SALIVARY GLAND	Ŀ	•	٠	٠	•	•	+	•	٠	•	•	٠	•	٠	٠	٠	٠	+	•	٠	٠	٠	•	•	•
LIVER Heratocellular Adenoma Heratocellular Carcinoma Sarcoma, Hoš, unc frim or meta Malignant Lympugna, Hoš	·	٠	•	* x	* ×	* ×	×	•	٠	• ×	*	* x	٠	٠	×	٠	•	٠	٠	٠	* x	*	•	* x	×
BILE DUCT	•	•	•	•	•	•	•	•	•	•	+	•	•	•	•	•	+	•	•	÷	•	•	•	+	
GALLBLADDER & COMMON BILE DUCT	•	н	•	•		N	•	•	٠	•	•	•	•	•	•	•	•	•	•	+	•	•	•	•	+
PANCREAS	•	•	•	•	•	•	•	•	•	٠	•	•	•	٠	•	٠	٠	•	•	•	•	٠	•	٠	
ESOPHAGUS	•	•	٠	•	+	۰.	•	•	٠	•	+	•	٠	•	•	٠	•	•	•	٠	•	•	+	٠	•
STOMACH Ademocarcinoma, nos Hepatocellular carcinoma, metasta Hepatocellular carcinoma, invasiv Mast-cell tundr	•	•	•	•	•	٠	•	•	•	•	•	•	•	•	•	•	•	٠	•	•	•	•	•	•	•
SMALL INTESTINE Adenocarcinoma, Hos	·	٠	٠	٠	•	•	٠	•	•	•	٠	٠	•	٠	•	•	٠	٠	٠	•	•	٠	•	٠	•
LARGE INTESTINE	Ŀ	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	٠	٠	•	<u> </u>	•	•
I TOMEY	+	٠	•	٠	٠	•	•	٠	٠	٠	•	•	•	٠	٠	•	•	٠	٠	٠	٠	•	•	٠	•
ALVEOLAR/BRONCHIOLAR CA. METASTAT Tubular-Cell Adenocarcingma	L			<u>×</u>																				×	
URINARY BLADDER ENDOCRINE SYSTEM	·	•	<u>.</u>	•	÷	•	•	<u>.</u>	•	•		:	•	•	•	•	•	<u>.</u>	<u>.</u>	•	<u>.</u>	•	÷	•	
PITUITARY Adenoma, NOS	•	٠	٠	•	•	٠	٠	٠	٠	٠	٠	•	٠	٠	٠	٠	٠	٠	٠	٠	٠	٠	٠	٠	٠
ADRENAL	•	٠	٠	٠	•	÷	٠	•	٠	٠	٠	•	٠	٠	٠	٠	٠	٠	÷	٠	٠	٠	+	•	•
ADENOMA, NOS Cortical Adenoma Pheochromocytoma	_	-		_		_	_	_	¥.							_			_				-	x	×
THYROID Follicular-Cell Adenoma Follicular-Cell Carcingma	·	٠	•	•	•	• ¥	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	٠
PARATHYROID	-	٠	•	٠	•	٠	•	٠	٠	٠	٠	•	•	٠	•	•	٠	٠	٠	٠	•	٠	•	•	٠
REPRODUCTIVE SYSTEM					_	-				_			-	_	-				-	_					-
MAMMARY GLAND		N	Н.,	H_	N	Ħ	ð	<u> </u>	N	Ν.,	<u>H</u>	Ν	N	<u>N</u>	N.	н.	M	Ν	N	Ν.,	N	H	<u>. H</u>		N
TESTIS	÷	•	٠	٠.	٠	•	•	•	٠	•	•	٠	•	•	٠.	٠	•	٠	•	٠	٠	٠	•	•	•
PROSTATE	•	٠	٠	٠	٠	٠	٠	٠	٠	٠	٠	٠	٠	٠	٠	٠	٠	٠	٠	٠	٠	٠	٠	٠	٠
NERVOUS SYSTEM								_		_					_				-		_				-
SRAIN ASTROCYTOMA	·	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	*	٠	•	•	٠
HARDERIAN GLAND	н		N		н	N			н		*		N		N								н		N
HARDERIAN GLAND Adenoma, Nos											×					14						.,			
DDY CAVITIES PERITONEUM HEMANGIGMA	н	N	N	N	N	N	N	N	N	N	N	N	N	H	*	N	N	N	H	N	н	N	N	N	*
ALL OTHER SYSTEMS									_								_		_	_	_				-
MULTIPLE JEGANS HOS Malighant (Thphoma, Hos Malighant (Thphoma, Jyphocytic Type Malig.(Jyphoma, Histiocytic Type	N	H	H	N	N	N	N	N	H	н Х	N	N	H	н	N	H	H	N	N	н	×	N	N	*	N
LOWER LEG NOS VEUROFIBROSARCOMA											_								_			_			

# TABLE B3. INDIVIDUAL ANIMAL TUMOR PATHOLOGY OF MALE MICE IN THE TWO-YEARFEED STUDY OF 8-HYDROXYQUINOLINE: LOW DOSE

TABLE	B3.	INDIVIDUA	AL ANIMAI	TUMOR	PATHOL	OGY OF	MALE MICE	: LOW D	OSE (Continued)	
			794.1	AL AL AL AL	AT BU AT AT A	AT AT AT AT	AL AL AT AL AL A			

ANIMAL NUMBER	2	2	2	2	3	3	31	31	31	31	3	31	3				1	1	1		4	1	1	1 5	
WEEKS ON STUDY		- 7 0 5		- 01	- 01	╣	21			╬	<del> </del>  -	计			$H_{1}$						┝╉		-9	- 0	TOTAL TISSUES TUMORS
INTEGUMENYARY SYSTEM		1	ġ	31	اه	ŝ	4	4	4	41	4	اه	3				فا	6	4	i,	Ľ		Ľ.	Ľ	TUNUK
SKIN Keratoacanthoma Sarcoma, Ngs	.* *	٠	٠	٠	٠	٠	٠	٠	٠	٠	+ x_	•	•	• •	•	•	٠	•	•	٠	٠	٠	٠	٠	50% 1
SUBCUTANEOUS TISSUE Sarcoma, nos fibrosarcoma Hemanoiosarcoma	•	•	•	•	•	٠	•	* X	٠	•	•	•	• ; ×				•	٠	٠	٠	+	٠	٠	٠	50 H 7 1
RESPIRATORY SYSTEM				-							_						-						_	-	
LUNGS AND BRONCHI Neoplasm, Nos, metastatic Hepatocelular Garcinoma, metasta Alveolar/Bronchiolar Adenoma Alveolar/Bronchiolar Garcinoma	+ ×	•	٠	•	٠	+ ×	* ×	*	* ×	+ ××	•	•	•	• •	• •	• •	+	•	٠	+ x	+ x	•	•	-	49 2 9
TRACHEA	٠	٠	٠	٠	٠	٠	٠	٠	•	٠	٠	٠	•	• •		• •	+	+	٠	+	+	•	+	•	49
HEMATCHOIETIC SYSTEM						-			• • •					-							_	-			
SONE MARROW		*	•	•	*	•	•	•	٠	•	•	*	• •	-		•		•	•	•		<u> </u>	<u>.</u>	+	49
SPLEEN Hemangiosarcoma	Ŀ	•	•	<u>.</u>	*	•	•	•	•	•	•	•	÷ '			• •	•	•	•	•	•	•	•	+	48,
LYMPH NODES Hepatocellular carcinoma. Metasta	•	+	٠	-	٠	٠	٠	•	÷	٠	•	•	• •	•	•	•	٠	٠	٠	٠	٠	٠	•	•	45,
THYMUS	•	•		•	•	٠			•			-		, ,				•	٠		•	٠			27
CIRCULATORY SYSTEM						_														-	-		-	$\neg$	
HEART <u>ALVEOLAR/BRONCHIGLAR_CA. METASTAT</u> DIGESTIVE SYSTEM	•	•	•	٠	•	•	•	•	•	•	•	٠	•			•	•	•	•	•	•	•	•	٠	50,
SALIVARY GLAND	•	٠		•	٠	+	•	•	•	+	•	•	<u>.                                     </u>			•	•	٠	٠	+		÷			48
LIVER Hepatocellular ademoma Hepatocellular carcinoma Sarcoma, nos, unc frim or meta Malignant lympioma, nos	·	•	•	٠	×	•	٠			* X	•	•	• •	•	•	×	٠	٠	•	٠	٠	٠	٠	٠	50
BILE DUCT	÷	•		•	•	÷	•	•	•	•	•	•	• •				•	. +	•	•	•	•	•	•	50
GALLBLADDER & CONNON SILE DUCT		. +	H	м	+	٠	•		•	•	н	٠	н. (	, ,			•		. •	•	٠	•	N	N	508
PANCREAS	<u>+</u>	*	•	•	•	*	•	,	٠	•	•	•	<u>* (</u>	•		•	<u>.</u>		. •	•	•	<u></u>	-	•	47
ESOPHAGUS	+	+	<u>.</u>	٠.	•		+	•	•	*	•	•	• •		. •	•		•	<u>.</u>	•	.+	+		-+	50
STOMACH Adenocarcinoma, NDS Hepatocellular Carcinoma, Metasta Hepatocellular Carcinoma, Invasiv Mast-Cell Judar	•	•	•	•	•	•	٠	•		****	•	•	• •	•	•		+	•	•	•	٠	•	•	٠	49
SMALL INTESTINE Adenocarcinoma, Nos	•	•	•	٠	٠	٠	٠	٠	:	٠	٠	•	• •	•	٠	•	٠	•	٠	٠	٠	٠	•	-	45
LARGE INTESTINE	•	•			•	•	•	٠	•	•	•	•	• •		•	•	+	•	+	•	•	•			45
JRINARY SYSTEM			_													··					-	í			
KIDNEY Alvedlar/bronchiolar ca, metastat Tubular-celi Adenocarcinoma	•	•	•	•	•	٠	•	•	•	•	•	•	• •	•	•	•	•	٠	•	•	•	•	•	•	58
URINARY BLADDER	٠	٠	•	•	٠	•	•	•	+	•	•	•	• •	•	•	+	•	•	•	•	•	٠	•	•	48
PITUITARY	٠	•	-	•	•	•	•	•	•	•	•	•	- •	•	•	•	•	•	•	•	•	•	•	+	48
ADENOMA, NGS	•	•	•	•	•	•	÷	•	•	•	•	•	×	•	•	•	•	•	٠	•	•	•	•	+	50
ADENOMA, NOS Cortical Adenoma Pheochromocytoma					x	_	×										_		X	×	x			_	3
THYROID Follicular-Cell Adenoma Follicular-Cell Carcinoma	•	*	•	•	•	•		X			•	•	• •	•	٠	•	•	•	•	•	•	•	•	·	50
PARATHYROID Reproductive system	·	•	-	•	<u>.</u>	*	•	•	-	•	•	•	• •	•		•	<u>.</u>	•	٠	•	-	<u> </u>	-	-1	35
MANNARY GLAND	N	N	N	N	м	н	N	N	N	N	ы.	H I	- N 4	۔ بر	N	N	Ħ	_ بر	μ	н	μ.	. N	м		581
TESTIS		*	•	•	*	•	•	•	•	*	M	-	Ч <u> </u> Н	•				<u>H</u>	_ <u>+</u>	- H			N	•	48_
PROSTATE	+	+	-	٠	•	•	٠	•	•	•	•	•	• •	•	+	٠	٠	+	+	+	٠	٠		٠	48
ERVOUS SYSTEM			-		_																			-+	
SRAIN ASTRUCYTOMA	٠	٠	•	٠	٠	•	٠	٠	٠	٠	•	•	• •	٠	٠	+	•	٠	٠	٠	٠	٠	٠	•	••,
PECIAL SENSE ORGANS				_				_																+	
HARDERIAN GLAND Adengma, Nos	H	N	H	н	N	н	NX	N	N	N	N		N N	Ň	N	N	N	N	N	N	NX	N	N	N	588
BODY CAVITIES				_			-			-														+	
PERITONEUM Hemangioma	N	N	N	N	N	N	N	N	N	N	N I	N I	N N	N	H	Ħ	Ħ	N	H	N	×	×	N	N	50 .
ALL OTHER SYSTEMS																-	_							-+	
MULTIPLE ORGANS HOS "ALIGNANT LYMPHOMA, HOS TALIG.LYMPHOMA, LYMPHOCYTIC TYPE HALIG.LYMPHOMA, HISTIOCYTIC TYPE	н	H	H	H	N X	N X	н	N	N ·	N	N 1	• •	N N	N	N	N X	H	н	H	N	H	к	×	8	50× 1 3
LOWER LEG NOS																								Ţ	
	_												_		_							<u> </u>			1

+ ANIMALS NECROPSIED

7

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FEEDSICDI	OF	0-1		U	n,	J A		ųι		NC.		11	£:	n		źН			21						
ANIMAC Number	0	0	0	0	0	0	01	01	01	1	1	11	11				<u>}</u>		-	S N	2	22	2	2	929
HEEKS ON			0	;	-	1	1	1	1	1	11	1	1	•	1	6	4	1	6	6		7	31	ŝ	
INTEGUMENTARY SYSTEM	4.	4	<u>.</u> 41	لك	-11	41	41	<u>e</u> L	21	41	16	-11	41	<u>1</u>	41	41_	41	41	41	41	41	31	41	21	4
SUBCUTANEOUS TISSUE Sarguma, Hos Fibrona Fibrona	+	٠	×	٠	٠	٠	• ×	٠	•	٠	٠	٠	•	* ×	•	٠	•	٠	٠	٠	×	٠	•	٠	•
RESPIRATORY SYSTEM	+		_		··						_			-			-		_						
LUNGS AND BRONCHI HEUFLASM, NOS. UNC PRIM OR MEYA Alveolar/Bronchiolar Adenoma Alveolar/Bronchiolar Carcinoma	Ŀ	•	×	×	•	×	•	•	•	•	•	•	•	*	•	* ×	·	•	•	•	•	•	•	×	•
TRACHEA	•	٠	٠	٠	٠	٠	٠	•	•	٠	٠	٠	•	•	٠	•	•	٠	٠	٠	٠	٠		•	٠
HEMATOPOTETIC SYSTEM	1		_					_	_																-
SONE MARROW	+•		*		*	<u>.</u>	•	+	•	*	•	<u>.</u>	<u>.</u>	-	•	<u>.</u>	<u>.</u>	*	•	•	*	+	<u>+</u>	•	*
SPLEEN Hemangiosarcoma	+	•	٠	•	+	•	•	•	•	+	•	•	•	•	•	+	+	*	٠	*	*	•	٠	•	+
LYMPH NODES			•	-	•	+	•		•	+	•		•	•	•	•	•	•	٠	٠	٠	•	•	•	•
THYPUS		+	+	-	•	+	•	+	•	•	•	-	•	-	•	-	•	٠	٠	•	•	-	•	•	٠
MALIGNANT LYMPHOMA. NOS	1	_							_		×			_	_		_		_						_
CIRCULATORY SYSTEM	1																								
HEART	•	•	•	•	<u>+</u>	•	•	•	•	•	<u>.</u>	<u> </u>	*	•	*	•	-	<u>*</u>	•	<u>.</u>	<u>.</u>	<u>.</u>	•	<u>.</u>	_
DIGESTIVE SYSTEM																	•								
SALIVARY GLAND	÷	-	*	<u> </u>	<u>.</u>	<u>.</u>	<u>*</u>	<u>.</u>	<u>.</u>	÷		<u>*</u>	<u>.</u>	<u>.</u>	÷	-	•	<u>.</u>	÷	-		÷	<u>.</u>		Ť
LIVER Hefatocellular Adenoma Hepatocellular Carcinoma	Ľ	_	•	<u>.</u>	×	•	•	•	• <u>*</u> _	×	•	•	<u> </u>	•	ż	<u> </u>		<u> </u>	-	<u> </u>	<u> </u>	×.	ż	×	-
BILE DUCT	+	-		*	•	•	٠	•	•	•	*	*	•	*	÷.	*	*	•	*	*	<u>+</u>	*	<u>.</u>		2
GALLELADDER & CONNON BILE DUCT	+-	<u> </u>	<u>.</u>	*	<u> </u>	<u> </u>	<u>*</u>	•	*	+	*	*	<u>*</u>	•	•	•	*	•	*	•	<u>+</u>	*	N	H	*
PANCREAS	++	•			*	*	*	*	*	*	*	*	•	<u>.</u>	*	+	<u>*</u>	•	*	•	•	<u> </u>	<u>+</u>	*	*
ESOPHAGUS	++	*	-	*	<u> </u>	*	*	*	•	*	*	*	•	<u>*</u>	-	<u>.</u>	<u>*</u>	<u>.</u>	<u>*</u>	+	•	<u>*</u>	<u>*</u>	*	*
STOMACH	++		<u> </u>	<u>.</u>	÷	<u>.</u>	*	<u>.</u>	<u>*</u>	<u>*</u>	<u>.</u>	<u>*</u>	<u>*</u>	<u>.</u>	<u>*</u>	<u>*</u>	<u>*</u>	÷	<u>*</u>	<u>*</u>	<u>*</u>	*	<u>*</u>	<u>*</u>	*
SMALL INTESTINE Malignant Lymphoma, NOS	Ŀ	*	<u> </u>		<u>.</u>	<u> </u>	<u>.</u>	<u>.</u>	<u>.</u>	•	<u>*</u>	•	<u>.</u>	•	•	•	•	•	•	•	*	•	*	•	
LARGE INTESTINE	•	٠	٠	٠	٠	٠	٠	٠	٠	•	•	•	•	•	٠	•	•	•	٠	•	٠	٠	-	-	+
JRENARY SYSTEM					_		_					_						-	-					_	-
KIDNEY	++	.+				•	+	٠.	•	+	٠	٠	•	•	٠	•	<u>+</u>	+	*	٠	٠.	٠.	<u>*</u>	•	<u>+</u>
URINARY BLADDER	+	٠	+	٠	٠	٠	٠	•	٠	•	•	•	•	•	•	٠	+	٠	٠	٠	٠	٠	+	•	٠
ENGOCRINE SYSTEM	+			_																					-
PITUITARY Ademona, HOS	ŀ	<u>.</u>	•	•	•	•	•	•	•	•	_		-	-	-	-	_	_	•	•	•	•	•	•	*
AGRENAL Adenoma, Hos Cortical Adenoma	1.	+	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	*
THYROID	1.	-	•	-	•	•	÷	•		•	•	•	•	•	•	•	•	÷	÷	÷	+	•	• .		
PARATHYROID		<u> </u>					•	•	•	•	•	•	•		•	+	•	•		-		•			
EPHODUCTIVE SYSTEM	+								-	~	**	-				~	-	-	-		_	_		_	-
HAMMARY GLAND	Ĺĸ	. N	. N	H	NI -	8	H	N	H	н	N	н	н 1	۱_	Ħ	N I	ML.	ĸ	н.	н.	н.	N	N	н	Л
TESTIS	<b>_</b> .	•	•	•	•	•	•	+	•		•	•	•		•	•	•	+		•	•	•	•	•	٠
PROSTATE	Γ.	•	•	•	•	•	•	<u>.</u>	•	•	•	•	•		•	•	•	•	-	•	•	۰.	٠	•	٠
	1															•	•	•	•	•	•	•	•	•	
BRAIN	1.	+	<u> </u>	<u> </u>	<u>.</u>	<u>.</u>	<u>.</u>	<u>.</u>	•	•	•	<u>.</u>	<u> </u>	• 	<u>*</u>	<u> </u>	<u>.</u>	<u>.</u>	÷	<u> </u>	<u>.</u>	<u>.</u>	•		-
SPECIAL SENSE ORGANS Harderian gland Ademona, NGS Gystagengra, NGS	*	N	н	N	N /	N	H	н	N	Ħ	N X	H	N I	H	N	N	N	N	N	N	N	H	N	N	н
BOBY CAVITIES	+						-				_														4
PERITONEUM Sarcoma, Nos	"	H	N	N	Ħ	H	N	H	H	H	N	H	N 1	H	N	N	N	N	N	H	M	H	N	Ni.	N
ALL OTHER SYSTEMS	+															-				-			-	-	-
MULTIPLE ORGANS NOS Sarcoma, Nos, metastatic Malignant Lymphoma, nos Malign.lymphoma, undiffer-type		N	×	H	*	H	н	н	н	N X	н	N	H	K.	N .	N	NI	H	H	N	N	H		N X	H
LOWER LEG HOS																									
		_	_		_	_		_	-	_	-		-		_	_	_	-	-	-			_		

# TABLE B3. INDIVIDUAL ANIMAL TUMOR PATHOLOGY OF MALE MICE IN THE TWO-YEARFEED STUDY OF 8-HYDROXYQUINOLINE: HIGH DOSE

8-Hydroxyquinoline, NTP TR 276

ANIMAL NUMBER	2	2	2	2	3	3	3	3	3	3	3	31	1	3	1	Ţ	Ţ	-	1	-	1	-	1	-	5	
WEEKS ON Study		ģ	-	ţ	뷞	히		:	1	1	1	1	Ť	#		81	ţ	1	1	1	北	i	2	1		TOTAL TISSUE TUMORS
NYEGUMENYARY SYSTEM	اف ا	أف_	اف_	11	لغ	لف	4 i	61		41	61	أف	81	<u> </u>	61	Ĵ.	1	61	. 61	áL.	61	21	اق	41	4	
SUBCUTANEOUS TISSUE Sarcoma, nos Fibroma Fibrosarcoma	+	• x	٠	+ x	٠	٠	٠	٠	٠	٠	٠	٠	٠	٠	٠	*	* ×	×	٠	* ×	* ×	ĸ	٠	٠	x	50x 9 2
ESPIRATORY SYSTEM	+		~~~							_					-		_								-+	
LUNGS AND BRONCHÍ Heoplash, nos, unc prin or meta Alveolar/Bronchidlar Adenoma Alveolar/Bronchidlar Carcinoma	Ŀ	•	* x	•	•	•	•	٠	•	•	•	•	•	+	•	•	×	• x	* x	٠	* x	•	•	•	٠	50
TRACHEA	+	-	٠	٠	٠	٠	٠	٠	٠	٠	٠	+	٠	٠	٠	٠	٠	٠	٠	٠	٠	•	٠	٠	+	49
EMATOPOLETIC SYSTEM		_									-					_										
BONE MARROW	<u>+</u> **	*	*	*	*	*	•	•	٠	٠	•	٠		•	•	٠	+	-	•	-	•	٠	<u>.</u>	٠	*	46
SPLEEN Hemangiosarcoma	L*	•	٠	٠	٠	+	•	÷.	•	•	*	*	•	+	•	*	•	•	•	•	*	+	•	•	*	<b>50</b>
LYMPH HODES	L.	•				•	•	•	•	•	•		•	٠	•		÷	•	•	•	•	•	•	•	+	42
THYMUS Malignant Lymphoma. Ngs	•	•	•	•	+	•	+	+	•	+	•	•	•	٠	•	•	•	•	٠	٠	-	•	•	•	-	26
IRCULATORY SYSTEM	1			-	-	-		•													·····				-	
HEART	+	•	٠	+	•	•	•	•	٠	٠	•	٠	٠	٠	•	٠	٠	٠	٠	•	•	•	•	•	+	49
IGESTIVE SYSTEM																									T	
SALIVARY GLAND	+	+	•	<u>*</u>	<u>*</u>	<u>*</u>	*	•	•	•	*	•	•	•	*	<u>.</u>	*	•	*	*	*	*.	<u>*.</u>	*	井	_ 11.
LIVER Mepatocellular A <b>denóm</b> a Mepatocellular carcinoma	Ľ	×	x	•	×	•	ż	•	•	•	¥	•	•	•	•	<u>.</u>	• 	•	•	*	ż	<u>.</u>	<u>.</u>	×	×	34
BILE DUCT	<u>↓</u>	٠	٠	٠	٠	٠	٠	٠.	٠	•	•	<u>.</u>	•	٠	+	•	•	•	•	+	.+	٠	•	٠	-4	58
GALLBLADDER & CONWON BILE DUCT	┢	٠	•		+	N	٠	٠	٠	٠	٠	+	H.	N	•	N	N.	•	+	.+	٠	N	H.	H.	+	584
PANCREAS	┝┷	•	+	٠	*	•		•	•	٠	٠	٠	•	•	•	٠	-		<u>+</u>	•	٠	•	*	*	╇	- 48
ESOPHAGUS	++	+	-	•	*	*	*	*	٠		•	٠	•	•	<u>+</u>	•.	•	•	•	*	*	•	<b>+</b> .	٠	4	46
STOMACH	+-	+		٠	•	•	٠	•	*	*	*	*	•	+	•	•	•	•	•	+	<u>+</u>	•	+		╇	58
SMALL INTESTINE Malignant Lymphoma. Nos	Ŀ	<u>.</u>	•	•	<u>.</u>	•	•	•	+	÷	•	•	•	•	•	*	•	+	•	•	<u>.</u>	•	•	•	-	47
LARGE INTESTINE	•	٠	٠	٠	٠	٠	٠	•	٠	٠	٠	•	-	٠	٠	•	•	٠	•	٠	٠	٠	•	٠	•	46
RINARY SYSTEM	+						-											· · · ·								
KIDNEY	┝┷	•	•	•	•	٠	•	•	٠.	•	٠	٠	٠.	•	+	٠.	•	٠	٠	٠	٠	٠	•	٠.	4	50
URINARY BLADDER	+	•	•	+	•	•	٠	•	•	•	+	•	٠	•	•	•	•	•	•	•	•	•	+	•	•	48
NDOCRINE SYSTEM	Ι.																				_					
PITUITARY Adenoma, mos	Ŀ	•	*	•	•	<u>.</u>	<u>*</u>	•	<u> </u>	•	•	•	-	•	•	<u> </u>	ż.	•	*	•	-	•	<u>.</u>	-	-	. 46 1
AGRENAL Adenoma, nos Cortical A <b>denoma</b>	Ŀ	•	•	•	•	•	٠	٠	•	•	•	٠	•	•	ż	٠	•	•	•	•	•	-	•	•	+	46 2
THYROID	Ŀ	•	•	٠	•	٠	•	•	٠	<u>.</u>	•	٠.	•	+	+	٠	•	•	±	•	•	•	+		٠	
PARATHYROID	•	٠	•	٠	٠	•	٠	٠	-	•	٠	•	•	٠	-	-	-	•	٠	•	٠	-	•	٠	•	27
EPROBUCTIVE SYSTEM	$\square$		-						-		_			-					-					_	+	
MARMARY GLAND	<u> </u>	H.,	<u>N</u>	¥	1	Ν.	N	N	N	N	N	H	N	H.,	<u>N.</u>	Μ.,	N.	N	N	N	N	N	N	N	Мİ	588
TESTIS	+	٠	•	•	•	+	٠	٠	•	•	*	•	•	•	•	+	•	+	•	•	•	<u> </u>	*	*	4	47
PROSTATE VERVOUS SYSTEM	+	+	*	<u>+</u>	*	• .	٠	•	•	*	*-	<u>.</u>	<u>+</u>	•	•		-	•	•	•	•	•	*	-	+	
BRAIN	•	٠	٠	٠	٠	٠	٠	٠	٠	٠	٠	٠	•	٠	٠	٠	+	•	٠	٠	٠	٠	+	٠	•	49
PECIAL SENSE ORGANS	1-				_					_								-			-				1	
HARDERIAH GLAND Adenoma, Hos Cystadenoma, Nos	N	N	N	N	M	H	N	N	N	X	N	N	Ħ	×	H	N	H	N	N	N	N	N	H	*	N	58H 1 1
ODY CAVITIES																										
PERITONEUM Sarcoma, nos LL Other Systems		H	M	н	н	N	N	N	H	N	H	H	H	н	N	H	N	H	N	H	N	X	N	N	M	58# 1
		¥	¥			N				N	м	N	н	H	H	N	N	N	ж	N	N		н	N	н	58×
MULTIPLE ORGANS HOS Sarcoma, NOS, metastatic Malignant lymphoma, NOS Malig.lymphoma, Undiffer-type		-	M			~		-	-	-			-	а 	"	"	ŗ	~	7	"		"	-			30H 3 3
THE FALL THE OWNER AND THE FLEE																										

#### TABLE B3. INDIVIDUAL ANIMAL TUMOR PATHOLOGY OF MALE MICE: HIGH DOSE (Continued)

4 ANIMALS NECROPSIED

AHIMAL     0     0     0     0     0       NUMBER     0     0     0     0     0       LEEKS ON     3     0     0     0       SUBCUTAMEDUS TISSUE     +     +     +       LUNGS AND BRONCHI     -     +     +       HEPATOCELLUAR CARCINOMA     METASTATIC     +     +       TRACHEA     +     +     +       BONE MARROM     +     +     +       SPLEEN     +     +     +       LYMPH MODES     -     -     +       THYMUS     -     -     +       SALIVARY GLAND     -     -     +       SALIVARY OLAND     -     -       SALIVARY OLAN	+ + + + + + - + - + - +		0     0     0     0       1     1     1     1       1     1     1     1       0     0     0     0       5     5     2     5	0 0 0 1 1 2 8 9 0 1 0 0 0 8 9 5 2 5	2 2 1 2 1 0 9 5 0	2 2 3 4
STÜDY     ?     3     0     0     1       INTEGUMENTARY SYSTEM	<u>  5  5  5  9</u> - + + + +	· • • • • •			1 0 0 9 5 0	0 0
INTEGUMENTARY SYSTEM     11.41 SI QI II       SUBCUTAMEDUS TISSUE     * * * * *       SARCOMA, NOS     * * * * *       RESPIRATORY SYSTEM     * * * * *       LUNOS AND BRONCHI     * * * * *       HEPATORY SYSTEM     * * * * *       LUNOS AND BRONCHI     * * * * *       ALVEOLAR/BRONCHIOLAR ADENOMA     * * * * *       ALVEOLAR/BRONCHIOLAR ADENOMA     * * * * *       ALVEOLAR/BRONCHIOLAR ADENOMA     * * * * *       BONE MARROW     * * * * * *       BONE MARROW     * * * * * *       SPLEEN     * * * * * *       LYMPH NODES     * * * * * *       THYMUS     * * *       CIRCULATORY SYSTEM     * * * * * *       SALIVARY GLAND     - * * * * *       SALIVARY GLAND     - * * * * *       SALIVARY GLAND     - * * * * *       SALIVARY GLAND     - * * * * *       SALIVARY GLAND     - * * * * *       SALIVARY GLAND     - * * * * *       SALUARY SYSTEM     * * * * * *       SALUARY CARCINOMA     X       LIPOMA     * * * * * *       BILE DUCT     * * * * *       GALLBLADDER & COMMON BILE DUCT     * * * * *       PANCREAS     * * * * *       STOMACH     * * * * *       STALL INTESTINE     * * * * *	+ + + + * X	* * * * *	• • • • •	51 21 5	51.01	-11-21-
SUBCUTANEOUS TISSUE     + + + +       SARCOMA, NOS     * + + + +       RESPIRATORY SYSTEM     . + + + +       LUNOS AND BRONCHI     HEPATORY SYSTEM       LUNOS AND BRONCHI     ALVEOLAR/BRONCHIOLAR ADENOMA       ALVEOLAR/BRONCHIOLAR ADENOMA     . + + + +       BARCOMA, NOS, METASTATIC     * + + + +       TRACHEA     * + + + +       BONE MARROW     - + + + +       SPLEEN     + + +       LYMPH NODES     + + +       THYMUS     + + +       DIGESTIVE SYSTEM     + + + +       SALIVARY GLAND     - + + + + +       DIGESTIVE SYSTEM     - + + + + +       SALIVARY GLAND     - + + + + +       SALUAR ADENOMA     X       LIPOMA     SALUAR CARCINOMA       LIPOMA     - + + + +       SALUAR ADENOMA     X       LIPOMA     - + + + +       SALUAR ADENOMA     - + + + +       GALIBLADDER & COMMON BILE DUCT     + + + + +       PANCREAS     - + + +       STOMACH     + + + +       STOMACH     - + + + </td <td>* * * * * *</td> <td>* * * *</td> <td>• • • •</td> <td></td> <td></td> <td></td>	* * * * * *	* * * *	• • • •			
LUNGS AND BRONCHI HEPATOCELLULAR CARCINOMA, METASTA ALVEGLAR/BRONCHIGLAR CARCINOMA SARCOMA, NOS, METASTATIC TRACHEA HEMATOPOIETIC SYSTEM BONE MARROM SPLEEN LYMPH NODES THYMUS CIRCULATORY SYSTEM HEART DIGESTIVE SYSTEM HEART DIGESTIVE SYSTEM LIVERY GLAND SARCOMA, NOS, INVASIVE LIVER HEPATOCELLULAR ADENOMA MEPATOCELLULAR ADENOMA LIPOMA BILE DUCT GALLBLADDER & COMMON BILE DUCT PANCREAS ESOPHAGUS STOMACH SMALL INTESTINE LARGE INTESTINE LARGE INTESTINE KIDNEY KIDNEY KIDNEY KIDNESY HEART HEART CIRCULATORY SYSTEM CALLSLADER COMMON BILE DUCT CALLSLADER COMMON BILE DUCT CALLSLADER COMMON SILE DUCT CALLSLADER COMMON SILE DUCT CALLSLADER COMMON SILE COMMON SILE CALLSLADER COMMON SILE COMMON SILE CALLSLADER COMMON SILE CALLSLADER CALLSLADER COMMON SILE CALLSLADER CALLSLADER COMMON SILE CALLSLADER CALSLADER CALLSLADER				• • •	+ N	• •
HEPATOCELLULAR CARCINOMA, METASTA ALVEGLAR/BRONCHIGLAR CARCINOMA SARCOMA, NOS. METASTATIC       TRACHEA       HEMATOPOIETIC SYSTEM       BONE MARROW       \$\$\phi \cdot + \cd					ونبيته والمتنابين	
HEMATOPOIETIC SYSTEM       BORE MARROW       SPLEEN       LYMPH NODES       THYMUS       + - +       CIRCULATORY SYSTEM       HEART       DIGESTIVE SYSTEM       HEART       SALLVARY GLAND       SARCOMA, NOS, INVASIVE       LIVER       HEFATOCELLULAR ADENOMA       HEFATOCELLULAR CARCINOMA       LIPOMA       BILE DUCT       GALLSLADDER & COMMON BILE DUCT       N + + +       STOMACH       STOMACH       SMALL INTESTINE       LARDE INTESTINE       LARDE INTESTINE       VENHARY SYSTEM       KIDNEY	× * * * *	· • • • •	* * * * * ×	• • •	••	• •
BOME MARROW     + + + +       SPLEEN     + + + +       LYMPH HODES     + +       THYMUS     + +       CIRCULATORY SYSTEM     -       HEART     + + + +       DIGESTIVE SYSTEM     -       SALIVARY GLAND     - + + + +       SARCOMA, NOS, INVASIVE     - + + + +       IVER     + + + +       BARCOLLULAR ADENOMA     - + + + +       HEPATOCELLULAR ADENOMA     X       LIPOMA     X       BILE DUCT     + + + +       QALLSLADDER & COMMON BILE DUCT     H + + +       PANCREAS     + + + +       ESOPHAGUS     + + + +       STOMACH     + + + +       LARGE INTESTINE     + + + +       URIHÄRY SYSTEM     - + + +       KIDNEY     + + + + +		• • • •	* * * *	• • •	+ +	+ +
SPLEEN     + + + +       LYMPH HODES     + +       THYMUS     + +       CIRCULATORY SYSTEM     -       HEART     + + + +       DIGESTIVE SYSTEM     -       SALIVARY GLAHD     - + + + +       SARCOMA, HOS, INVASIVE     - + + + +       IVER     + + + +       HEPATOCELLULAR ADENOMA     -       HEPATOCELLULAR CARCINOMA     X       LIPOMA     X       BILE DUCT     + + + +       OALLSLADDER & COMMON BILE DUCT     H + + +       PANCREAS     + + + +       STOMACH     + + + +       LARGE INTESTINE     + + + +       URIHÄRY SYSTEM     - + + + +       KIDNEY     + + + + +						
LYMPH HODES THYMUS + + CIRCULATORY SYSTEM HEART + + + + DIGESTIVE SYSTEM SALIVARY GLAND SARCOMA, NOS, INVASIVE + + + + HEPATOCELLULAR ADENOMA HEPATOCELLULAR CARCINOMA LIPOMA BILE DUCT GALLSLADDER & COMMON BILE DUCT + + + + COMMON + + + + + COMMON + + + + + + + + + + + + + + + + + + +	• • • •	• • • •	<u>• • • •</u>	+ + +	<u>+ +</u>	<u>+ +</u>
THYMUS + + + + + + + + + + + + + + + + +	· · · · ·	• • • •	<u>+ + + +</u>	<u>+ + +</u>	<u>+ -</u>	<u>+ +</u>
CIRCULATORY SYSTEM HEART • • • • • • DIGESTIVE SYSTEM SALIVARY GLAND SARCOMA, NOS, INVASIVE I VER HEPATOCELLULAR ADENOMA HEPATOCELLULAR CARCINOMA LIPOMA BILE DUCT GALLSLADDER & COMMON BILE DUCT N • • • • PANCREAS ESOPHAGUS STOMACH SMALL INTESTINE LARGE INTESTINE URIHÄRY SYSTEM KIDNEY + • • • •	• • • •	• • • • •	<u>• • • •</u>	<u>• • •</u>	<u> </u>	<u> </u>
HEART     • • • • • •       DIGESTIVE SYSTEM       SALIVARY GLAND       SARCOMA, NOS, INVASIVE       LIVER       HEFATOCELLULAR ADENOMA       HEFATOCELLULAR CARCINOMA       LIPOMA       BILE DUCT       GALLBLADDER & COMMON BILE DUCT       N. • • • •       PANCREAS       ESOPHAGUS       STOMACH       SMALL INTESTINE       LARDE INTESTINE       URINARY SYSTEM       KIDNEY		• • •	- + - +	*	+ -	
DIGESTIVE SYSTEM SALIVARY GLAND SARCOMA, HOS, INVASIVE LIVER HEFATOCELLULAR ADENOMA HEFATOCELLULAR CARGINOMA LIPOMA BILE DUCT GALLBLADDER & COMMON BILE DUCT N • • • • PANCREAS ESOPHAGUS • • • • • LARGE INTESTINE LARGE INTESTINE VIRHÄRY SYSTEM KIDNEY • • • • •						
SALIVARY GLAND     - * * * *       SARCOMA, HOS, INVASIVE     - * * * *       LIVER     HEPATOCELLULAR ADENOMA       HEPATOCELLULAR CARCINOMA     X       LIPOMA     X       BILE DUCT     • * * *       GALLSLADDER & COMMON BILE DUCT     N * * * *       PANCREAS     • * * * *       STOMACH     * * * * *       SMALL INTESTINE     • * * * *       URTHÄRY SYSTEM     * * * * * *	• • • • •	• • • •	* * * *	• • •	+ +	• •
SARCOMA, HOS, INVASIVE LIVER HEFATOCELLULAR ADENOMA HEFATOCELLULAR CARGINOMA LIPOMA BILE DUCT GALLBLADDER & COPMON BILE DUCT PANCREAS ESOPHAGUS STOMACH SMALL INTESTINE LARGE INTESTINE URIHÄRY SYSTEM KIDNEY + + + + +						
HEPATOCELLULAR ADENOMA     X       HEPATOCELLULAR CARCINOMA     X       LIPOMA     * * * * *       BILE DUCT     * * * * * *       GALLBLADDER & COMMON BILE DUCT     N * * * * *       PANCREAS     * * * * * *       EBOPHAGUS     * * * * * *       STOMACH     * * * * * *       SMALL INTESTINE     * * * * *       LARGE INTESTINE     * * * * *       URINARY SYSTEM     * * * * *	• • • • •	• • • •	• • • •	* * *	* *	• •
BILE DUCT     • • • • • •       GALLBLADDER & COMMON BILE DUCT     N. • • • •       PANCREAS     • • • • • •       ESOPHAGUS     • • • • • •       STGMACH     • • • • • •       SMALL INTESTINE     • • • • • •       LARGE INTESTINE     • • • • • •       URTHARY SYSTEM     • • • • • •       KIDNEY     • • • • • • •	× * * * *	• • • •	• • • • • ×	• • •	••	• •
PANCREAS         • • • • • • •           ESOPHAGUS         • • • • • •           STOMACH         • • • • • • •           SMALL INTESTINE         • • • • • • •           LARGE INTESTINE         • • • • • • •           WININARY SYSTEM         • • • • • • •	• • • • •		• • • •	<u> </u>	+ -	<u>• •</u>
ESOPHAGUS     • • • • • •       STOMACH     • • • • • •       SMALL INTESTINE     • • • • • •       LARGE INTESTINE     • • • • • •       URINARY SYSTEM     • • • • • •       KIDNEY     • • • • • •	• N • N	<u>+ N + +</u>	<u>+ + H +</u>	<u> </u>	<u>+ N</u>	• •
STOMACH          • • • • • • •         • • • •	• • • •	· · · · ·		• • •	<u>+ -</u>	<u>+ +</u>
SMALL INTESTINE         • • • • •           LARGE INTESTINE         • • • • • •           URINARY SYSTEM         + • • • • •			<u></u>	+ + +	<u></u>	<u>+ +</u>
LARGE INTESTINE + + + + + URINARY SYSTEM KIDNEY + + + + +	• • • •	<u></u>	• • • •	<u> </u>	<u>+ +</u>	<u></u>
URINARY SYSTEM KIDNEY + + + +		· • • • •		<u> </u>	<u> </u>	• •
KIDNEY + + + + +			• • • •	+	+ -	• •
SARCOMA, HOS, METASTATIC	• • • • •		* * * *	• • •	• •	• •
URINARY BLADDER + + + + +		* * * * *	* * * *	* * *	+ -	• •
ENDOCRINE SYSTEM						
PITUITARY - + + + + ADENGMA, NGS	• • • • -	- + + + +	<u>* * * *</u>	+ - +	<u> </u>	* *
ADRENAL + + + + + + + + + + + + + + + + + + +	• • • • •	· · · · ·	• • • •	* * *	+ -	• •
THYROID FOLLICULAR-CELL ADENOMA FOLLICULAR-CELL GARCINOMA	• • • • •	• • • • •	* * * *	• • •	• •	* *
PARATHYROID - +	+	- + - + +	• • - •	• • •		• •
REPRODUCTIVE SYSTEM						
MAMMARY GLAND Adenosquamous carcinoma	N N N N N	• N N N +	<u>H H + H</u>	N N N	N N	H H
UTERUS ENDOMETRIAL STROMAL POLYP Malig.Lymphoma, Histidgytig type	• • • • •	• • • • •	* * * *	• • •	•••	• •
OVARY Cystadenoma, NOS Papillary Cystadenoma, NOS	• • • • •	• • • • •	* * * *	• • •	••	• •
	• • • • •	• • • • •	* * * *	• • •	• -	* *
SPECIAL SENSE ORGANS				,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		
ADEHOMA. NOS	нинин		<b>N N N N</b>	N N N	N N	N N
ALL OTHER SYSTEMS MULTIPLE DEGAMS NOS MALIGNANT LYMPHOMA, NOS MALIGLYMPHOMA, UNDIFFER-TYPE MALIGLYMPHOMA, LYMPHOCYTIC TYPE MALIGLYMPHOMA, HISTIOCYTIC TYPE X						

### TABLE B4. INDIVIDUAL ANIMAL TUMOR PATHOLOGY OF FEMALE MICE IN THE TWO-YEARFEED STUDY OF 8-HYDROXYQUINOLINE: UNTREATED CONTROL

					(C	or	ıçır	ıu€	ed)	}																
ANIMAL HUMBER WEEKS ON	0 2 6	0 2 7 0	0 2 8	29	3	031	3	3	0 3 4	3	3	0 3 7	0 3 8	3	4	4	0 4 2	0 4 3	4	0 4 5	0 4 6	47	0 4 8	0 4 9	0 5 0	TOTAL
STUDY		6	9	8	8	5	3	5	\$	2	ŝ	9	8   7	9	1	3	0 5	ŝ	2	5	3	3	8	8	8 9	TUMORS
SUBCUTANEOUS TISSUE Sarcoma, Hos	•	٠	+	٠	+	٠	٠	٠	٠	٠	+	+	٠	٠	+	+	٠	•	٠	+	٠	٠	+	+	+	50× 1
RESPIRATORY SYSTEM	+										-							·		• •					-	
LUNGS AND BRONCHI Hepatocellular Carcinoma, metasta Alveolar/Bronchidlar Adenoma Alveolar/Bronchidlar Carcinoma Sarcoma, Nos, metastatic	ŀ	* ×	•	•	•	•	+	•	•	•	+	•	•	+	+	•	•	-	•	•	•.	+	•	•	•	49
TRACHEA	•	+	+	٠	٠	+	+	+	+	+	+	•	+	+	+	+	+	+	+	. +	+	+	٠	•	+	50
HEMATOPOIETIC SYSTEM	+								_		-														-	
BONE MARROW	Ŀ	+	+	+		•	+	+	-	٠	٠	+	÷	٠	-	.+	+	•	٠	+	+	٠	•	+	•	47
SPLEEN	<u>↓</u>	•	+	+	+	+	.+	+	. •	+.	+	t.	•	•	+	+	•	+	+	٠	+	+	+	+	╧┥	49
LYMPH NODES	<b></b>	. +	÷	+	. +	-`	+	÷	-		+	+		٠	+	+	٠	+		+	+	+	+	+	+	42
THYMUS	-	-	-	•	-	٠	+	-	-	-	-	+	٠	-	-	-	٠	•	-	٠	-	+	•	+	-	19
CIRCULATORY SYSTEM	1		<u> </u>																							
HEART	+	+	+	+	٠	+	+	+	٠	٠	+	+	٠	+	٠	+	+	+	+	٠	٠	+	+	٠	•	50
DIGESTIVE SYSTEM	1														ř.											
SALIVARY GLAND Sarcoma, NOS, Invasive	Ŀ	•	+	•	•	•	•	+	•	+	•	•	•	+	•	•	+	+	•	+	+	+	•	•	∸	<u>48</u>
LIVER Hepatocellular Adenoma Hepatocellular carcinoma Lipoma	•	•	+	•	٠	* ×	•	•	•	•	•	•	×	•	•	•	+ X	•	•	•	•	•	•	•	•	49 2 3
BILE DUCT	ŀ	٠	•	•	٠	٠	٠	•	٠	•	٠	٠	٠	٠	٠	•	٠	•	٠	٠	•	٠	٠	•	•	49
GALLBLADDER & CONNON BILE DUCT	•	٠	N	٠		٠	N	٠	N	N	٠	٠	N	٠	•	•	٠	٠	٠	•	•	•		•	N	58%
PANCREAS	Ŀ	•	+	+			. +	٠	+.	•	+	+	+	•	•	*	•	•		+	٠	+	٠	+	+	
ESOPHAGUS	L.	•	+		<b>.</b>		•		•	٠	÷	+	٠	•	-	_	•	÷	٠	•	٠	٠	٠	•	+	46
STOMACH	Ŀ					•	•	٠.	•	•	•	•	•	٠	+	٠	٠	٠	٠	٠	•	٠	+	•	+	47
SMALL INTESTINE	<u> </u>	+	•	+	+	٠	+	٠	+	-	•	٠	+	+	+	+	+	+	•	+	+	+	+	+	-	43
LARGE INTESTINE	-	٠	٠	٠	٠	٠	♦.	٠	+	+	٠	٠	+	•	•	٠	٠	+	•	+	٠٠	٠	+	٠	+	44
URINARY SYSTEM	+					-																	_		-+	·
KIDNEY Sarcoma, Nos, Metastatic	ŀ	•	+	•	٠	٠	•	•	٠	•	•	•	•	•	•	•	•	٠	•	+	•	٠	•	•	+	49
URINARY BLADDER	+	+	+	+	+	٠	٠	+	+	٠	+	+	+	٠	+	+	•	+	+	+	-	+	-	٠	-	46
ENDOCRINE SYSTEM	<u>†</u>															· · ·							-		1	
PITUITARY Adenoma, Nos	Ŀ	•	×	<u>.</u>	ż	-	•	•	-	+	-	•	+	•	•	•	÷	ż.	٠	*	+	•	•	×	-	40 12
ADRENAL Phedchromocytona	+	+	+	•	+	+	•	+	•	+	+	+	•	•	+	•	+	+	•	* ×	+	+	+	+	٠	49
THYROID Follicular-cell Adenoma Follicular-cell Carcinoma	+	+	+	+	٠	+	*	+	+	+	-	+	+	•	+	•	•	* ×	+	•	•	+	+	+	•	48,
PARATHYROID	- 1	+	•		+	•	+	•	·	•	-	•		÷	+	-	+	÷		•	•	+	+			26
REPRODUCTIVE SYSTEM	+								_						·	_		•		· ·					_	
MAMMARY GLAND Adenosquamous carcinoma	н	N	H	H	н	N	H	N	н	H	N	H	H	•	٠	N	+	+	H	+	N	+	N	•	N	58×
UTERUS Endometrial stromal polyp Malig.lymphoma, histidcytic type	·	•	+	+	+	•	٠	٠	+	٠	٠	+	•	+	•.	٠	٠	+	+	٠	+	٠	٠	+	+	50
OVARY Cystadenoma, Nos <u>Papillary Cystadenoma, Nos</u>	-	-	•	•	•	•	•	•	•	×	•	•	•	•	•	•	+	•	-	+	-	•	+ X	•	-	43
NERVOUS SYSTEM Brain Meningioma	•	٠	٠	٠	٠	٠	٠	٠	٠	٠	٠	•	٠	٠	٠	٠	٠	•	٠	٠	٠	٠	٠	+	•	49 <sub>1</sub>
SPECIAL SENSE ORGANS Harderian gland	N	N	N	N	N	N	N	N	н	N	N	N	н	н	N	N	N	N	N	N	N	N	N	N	N	504
ADENOMA, NOS	ļ		_			-							×										_			1
ALL OTHER SYSTEMS Multiple organs nos Malignant lymphoma. Nos Malig.lymphoma. Undiffer-type Malig.lymphoma. lymphocytic type Malig.lymphoma. Histigcytic type	N	N	N	N	N	N	××	N	N	N	NX	¥X	H	H	N	N	N	м	N	N N X	H	H X	N	N	N	58 H 8 2

 TABLE B4. INDIVIDUAL ANIMAL TUMOR PATHOLOGY OF FEMALE MICE: UNTREATED CONTROL

 (Continued)

\* ANIMALS NECROPSIED

AN IMAL NUMBER	1	0	0   0   1	0	-	4						2		I			;			ł	2	2	1	2
WEEKS ON STUDY	1	ġ	-	1	-	1	2	é	J			ġ.		2	1	ļ	į	į	1	1	ġ	1		ė
CHTEGUMERTARY SYSTEM	+-84	القين	a dha	واعكري	- Heler			خلاج	علدائي			علبالته	-	1.1.		, in the second								
SUSCUTANEGUS TISSUE Sarcoma, nos Hemangiosarcoma	•	•	*	٠	•	٠	٠	٠	٠	•	٠	٠	٠	•	٠	•	•	•	٠	•	•	٠	•	٠
ESPERATORY SYSTEM	+	dra an		-	-			-		i sinak	ing ( part of the	نتيرية غلي										,		
LUNGS AND BROMCHI Meoplasm, Nos, Uno prim or Meya Alveolar/Sromoniolar Adenoma	-	•	•	•	+	•		•	•	*	•	•	•	•	•	* *	•	•	•	ż	•	•	•	•
TRACHEA	+	+	+	٠	٠	٠	٠	٠	٠	٠	٠	٠	٠	•	٠	٠	٠	•	•	•	•	•	٠	٠
EMATOPOIETIC SYSTEM	1	****	-																					
SONE MARROW	م <u>ٹ</u>	t.			÷			<u>.</u>			÷			•	*	•			÷		<u>.</u>	<u>.</u>	÷	•
SPLEEN Malignant Lymphoma, NGS	Ļ	•		•	•	•	<u>.</u>	<u>.</u>	+	•	•		÷.	•	•	•	•	*	•	•	•	•	•	•
LYMPH HOBES Hemangioma	-	+		<u>.</u>	•	•	-			*	+	+	•	•	÷	•	•	-	-	-	-	•	-	<u>.</u>
THYPUS		*	•	*	•	+	~	•	•		+	•	•	•	•	•	•	•	•	*	-	-	•	•
TROULATURY SYSTEM	T																							
HEART		•	•	•	•	•	•	•	٠	*	*	<u>.</u>	*	*	<u>*</u>	•	<u>.</u>	<u>.</u>	•	•		•	•	<u>.</u>
DIGESTIVE SYSTEM	T																							
SALIVARY GLAND	+-		- <b>i</b> -	*	<u>.</u>	•		*	*		<u> </u>	- <u>+</u>	*	<u>.</u>	÷	•	•		÷	*	<b>.</b>	÷	<u>.</u>	<u>.</u>
LIVER Hefatocellular adenoma Hefatocellular carcinoma Hemangioma	Ľ	•	•	•	•	•	•	•	×	•	•	•	•	•	ż	•	•	•	•	•	•	•	•	•
SILE DUCT		•	•	•	•	•	•		•	•		•	•	•	•	•	•			•	•	•	•	<u>.</u>
GALLBLADDER & COMMON BILE DUCT		•	N		٠	H	٠	N		H	•	•	•	•	•	•	•	+				٠	•	•
PANCREAS	L.	•		•		•	•	•	•	•		•	•	•	•	+	•	•	•		•		•	۰.
ESOPHAGUS	L.	•	-	•		٠	•		•	•	*	•	•		•	•	•	•	٠	٠		•	٠	+
STOMACH	Ŀ				•		٠	٠	٠	•	•	•	•	٠	•	•	•	•	•	۰.	•	•	•	•
SMALL INTESTINE		•	_		•	•	•	•	•	•	•	•	•	•	+		•	•	٠	•	•	•	•	+
LARGE INTESTINE		-	•	•	•	•	+	+	•	-	•	+	•	•	٠	•	+	•	٠	•		٠	•	٠
ATHARY SYSTEM	+					-																		_
KIDNEY Tubular-Cell Agenoma	ŀ	•	•	•	•	٠	•	•	•	<u> </u>	•		•	•	٠	•	•	٠	•	÷	٠	•	•	٠
URINARY BLADDER	•	٠	-	•	٠	٠	•	٠	٠	٠	•	٠	٠	٠	•	•	٠	٠	٠	٠	٠	٠	٠	•
ENDOCRINE SYSTEM	1																							
PITUITARY Adenoma, NGS	1	•	•	÷	•	ż	•	<u>.</u>	<u>.</u>	<u>.</u>	ż	<u>.</u>	•	•	÷	•	•	•	÷.	•	-	•	*	
AGRENAL	+	*-		÷	<u></u>	÷		<u> </u>	÷	*	<u> </u>		÷		-				<u>.</u>	<u> </u>	•	<u>.</u>	<u>.</u>	<u>.</u>
THYROID Follicular-Cell Adenoma	Ŀ	•	-	•	<u> </u>	•	•	•	÷	•	•	•	•	•	*	٠	<u>.</u>	<u>.</u>	<u>.</u>		•	<u>.</u>	<u>.</u>	•
PARATHYRGID				t			•					•	•	•	•	•	-	•	•		•	•	•	
PANCREATIC ISLETS ISLET-CELL ADENOMA	•	٠	•	٠	٠	٠	٠	٠	٠	•	•	٠	٠	٠	٠	٠	٠	٠	٠	٠	٠	٠	٠	×
LEPRODUCTIVE SYSTEM	+																							
MARMARY GLAND Adenocarcinoma. Ngs	H	N	N	•	N	٠	N	H	N	H	H	N	•	•	<u>.</u>	٠	÷	N	H	H	N	N	N	N
UTERUS	++		•	٠	÷	•	-	٠	•	•	•		•	٠	٠.	•	٠	+		*	<u>.</u>	٠	•	•
GVARY GRANULGSA-CELL TUMOR Hemangioma Kervous System	·	•	•	•	•	•	•	•	•	•	•	:	•	•	•	ż	•	•	•	•	٠	•	•	•
HERVOUS SYSTEM Brain	1.	•		•	•	•		•	٠	•			•	•	•	•	•	•	•	•	•	•	٠	
SPECIAL SENSE ORGANS	÷			-	•	*			-			<u> </u>	*	-		•	-		-	<i>.</i>			<u> </u>	•
EAR Squamous cell papilloma		N	H	N	Ħ	M	*	N	N	N	N	N	M	Ħ	H	Ħ	H	Ħ	H	H	N	M	H	N
HLL DYNER SYSTEMS Multiple graans nos Malignaat Lymphoma, nos Malig.Lymphoma, lymphocytic type Malig.Lymphoma, mistigcytic type	*	H	н	Η	H	н	н	N	N	××	Ň	NX	N	×	N	N	N	H	X	N	N	N	N	N

# TABLE B4. INDIVIDUAL ANIMAL TUMOR PATHOLOGY OF FEMALE MICE IN THE TWO-YEARFEED STUDY OF 8-HYDROXYQUINOLINE: LOW DOSE

AH IMAL Numser	2	ž	ž	ŝ	š	3	ž	j	51 5	3	ş	ši t	j	i			1		i		1	il.		TOTA
WEEKS ON Study	ġ	9	ŝ		9	-	2			ş	ġ	į	9	â	ġ		1	9 7	<u>i</u>	9	è	ġ		TUTA TISSU TUMO
INTEGUMENYARY SYSTEM Subcutamegus tissue Sarcoma, Nos Hemangusarcoma	+	* ×	٠	٠	٠	٠	٠	•	• •	٠	٠	٠	+	N	٠	٠	•	•	٠	٠	٠	٠	٠	• 50
					_							×		_						_				
LESPIRATORY SYSTEM Lungs and Bronchi Nedplasm, Nos. Unc Prim or Meta Alygolar/Srokchiolar Adenoma		٠	٠	٠	٠	٠	٠	•	• •	٠	٠	٠	٠	٠	٠	•	٠	•	٠	٠	٠	٠	٠	• 50
			_																		•		<u>×</u>	+ 50
TRACHEA	Ļ	<u> </u>	•	<u>.</u>	*	<u>.</u>	•	• •	· ·	•	<u> </u>	*	+	•	•	+	• 	+	•	-	<u> </u>	<u> </u>	-	* 30
EMATOPOIETIC SYSTEM	1.						•	•		•	÷	•	•	٠	•	•	•	•	•	•	•	•	+	
SPLEEN Malignant Lymphoma, Ngs	•	+	÷	•	٠	+	•	•	• •	+	٠	٠	٠	+	•	•	٠	•	•	•	٠	+	٠	• 48
HALIGHANT CTHRIDHA, NUS Lymph Nodes Hemangioma	1.	•	•	٠	٠	•	٠	•	• •	+	+	٠	٠	•	•	•	+	•	+	•	•	٠	•	. 47
HEMANGIOMA Thymus	+-	•		-	•	•	•	• •	, .		+		•		•	-			-		•	+	•	23
TROULATORY SYSTEM	+												-											+
HEART	+	٠	٠	٠	٠	+	•	• •	• •	+	+	٠	٠	•	•	•	•	•	٠	•	•	•	•	58
DIGESTIVE SYSTEM	+						_				-				-			-		-				+
SALIVARY GLAND	<u> </u>	•		•	٠	•	•	• •	•	+	•	-		•	٠.	•	•	<u>.</u>	•	•	<u>*</u>	<u>+</u>	•	•
LIVER Hepatocellular Adengma Hepatocellular Carcingma Hemangioma	+	٠	٠	٠	•	٠	•	• •	• •	+	•	٠	٠	•	•	•	*	•	•	*	٠	٠	•	- 58
BILE DUCT	•	•	•	÷	•	•	•	•	•	•	•	•	÷	•	•	•	•	•	•	•	•	•	•	50
GALLELADDER & COMMON BILE DUCT	•	•	÷	•	•	•	•	н	•	H.	•	•	N	•	•	N	•		•	N.	•	•	•	1 .50
PANCREAS	Ŀ	•	+	•	٠	•	•	• •	• •			•	•	•	•	•	•	•	•	_	•	•	•	67
ESOPHAGUS	Ŀ	•	+	٠	٠	•	÷	•	•			+	•	-	•	•	<u>.</u>	•	<b>•</b>	-	•	•	•	47
STOMACH	<u> .</u>	. •	t.	٠	٠	•	٠	•	• •	٠	<u>+</u>	•	٠	•	<u>.</u>	÷	<u>.</u>	<u>.                                    </u>	٠	<u>.</u>	<u>+</u>	•	•	
SMALL INTESTINE	1÷	+	•	٠	٠.	<u>+</u>	•	-	• •		<u>+</u>	٠	٠		٠	•	•	٠	+	-	+	۰.	•	- 49
LARGE INTESTINE	+	٠	٠	+	•	•	•		• •	-	+	٠	•	٠	•	•	-	•	•	•	•	•	•	• •
RINARY SYSTEM															_									
KIDNEY Tubular-cell Adenoma	•	•	*	+	•	+	•	• •	• •	*	•	•	+	•	*	•	•	•	•	*	•	•	•	51
URINARY BLADDER	•	•	•	•	٠	٠	•	• •	• •	•	+	٠	٠	•	•	•	•	•	•	-	٠	+	•	4
INDOCRINE SYSTEM	+							-						_	- 114		_							+
FITUITARY Adenoma, Ngs	-	÷	٠	٠	٠	٠	÷	•	; •	•	÷	*	•	+	•	•	•	•	-	•	+	-	•	44
ADRENAL	•	٠	•	٠	•		•	• •	• •	÷	+	, <b>•</b>	•	•	•	•	•	۰	٠	-	+	ŧ.,	•	
THYROID Follicular-cell Adenoma	•	•.	+	٠	•	•	٠	÷`•	• •	•	•	•	•	•	•	•	•	+	٠	•	•	٠	•	- 48
POLLICULAR-CELL ADENOMA Parathyrgid	+-										<u>À-</u>				•			•	•	-		•		
PANCREATIC ISLETS ISLET-CELL ADEMOMA	•	•	•	•	•	•	•	+ •	• •	•	+	+	+	٠	•	•	+	•	•	-	•	+	•	47
TEPRODUCTIVE SYSTEM	+		-				_				-											_		+
MAMMARY GLAND Adengcarcinoma, NGS	N	H	N	N	N	H	H	N (	H N	N	•	•	N	•	N	H	N 1	•	H	H	N	H	N	50
UTERUS	Ŀ				•	•	•	•	<u> </u>				•	•	•	•	•	•	•	•	<u>.</u>	<u>*</u>	•	47
GVARY GRANULOSA-CELL TUMOR Hemangioma Kervous System	•	•	•	•	• ×	•	•	• •	•	•	•	•	•	•	•	•	•	•	•	•	•	•	 ر	46
BRAIN	1.	•	•	•	•	•	•	•		•	•	•	٠	•	•	•	•	•	•	•	•	•	•	50
SPECIAL SENSE ORGANS	+				-						-			-							-			+
SAR Squamqus cell papilloma	H	N	н	N	N	H	H	N )	4 H	N	H	N	N	N	M	N	N	N	H	N	N	N	H (	50
ILL OTHER SYSTEMS Multiple organs nos Malignant Lymphoma, nos Malig.Lymphoma, Lymphogytic type Malig.Lymphoma, Histiocytic type	N	N	Ħ	Ħ	×	××	N	N I	( N	N	N	H	N		N X	N	N	4	N	N	N	N	N I	50

#### TABLE B4. INDIVIDUAL ANIMAL TUMOR PATHOLOGY OF FEMALE MICE: LOW DOSE (Continued)

+ ANIMALS NECROPSIED

ANIMAL HUMBER	0	8	8	8	0	8	8	8	8	1	1	•	9	1	1	:	1	0	0	21	2	2	2	2	2
WEEKS ON STUDY						-		-	빍		╬				╢		1	-			╣	╣		1	뷝
RESPIRATORY SYSTEM	لف	ě.	اف		4	i	_1	ź	ź	4	1	å		21_	<u>.</u>	il.	1	لف	1	2	4		4	4	4
LUNGS AND BRONCHI Alvedlar/Bronchidlar Adenoma Alvedlar/Bronchidlar Carcinoma Adenosquamous Carcinoma, metastat Pheochromocytoma, metastatic Osteosarcoma, metastatic	•	•	•	•	•	+ x	*	٠	•	•	*	٠	•	•	+ ×	+ ×	•	•	*x	٠	•	•	*	٠	•
TRACHEA	+	٠	٠	٠	+	٠	+	+	٠	+	+	•	+	•	+	•	+	+	•	+	+	+	+	+	ᅱ
HEMATOPOIETIC SYSTEM		_														•••	-				_				+
BONE MARROW	<u>  +</u>	+		•	+	٠	٠	A	+	+	<u>+</u>	.+	•	•	+	•	•		٠	•	٠	+	.+	-	÷
SPLEEN		<u> </u>	٠	•	+	+	+	<b>.</b>	-	+	<u>+</u>	٠	•		٠	<u>+</u>	÷	.+	•	٠	+	+	+	•	٠
LYMPH HODES	+	۸.,	-	•	+	+	+		+	+	+	+	÷ •	•	<b>•</b>	+	•	+	•	٠	+_		+	•	٠
THYMUS	+		•	٠	+	-	-	A	-	+	•	-	• •	•	-	-	+	A	٠	-	٠	٠	٠	•	-
CIRCULATORY SYSTEM															_		-				-	_		<i>a</i>	+
HEART	•	+	+	+	٠	٠	٠	+	٠	•	٠	+	• •	•	•	•	+	٠	•	٠	+	٠	+	•	+
DIGESTIVE SYSTEM														·											+
SALIVARY GLAND	<u> </u>	+	+	+	<u>+</u>	•	•		•	+	•	<u>+</u>	• •		÷	•	+	•	+	٠	+	+	+	<u>+</u>	•
LIVER Hepatocellular Adenoma Hemangioma	+	•	+	•	•	ż	*	<b>A</b>	•	•	+	•	• •		•	•	*	+	•	•	•	٠	٠	•	•
BILE DUCT	+	•	+	•	•	•	+		•	+	+	+	• •		•	•	•	+	•	٠	•	+	•	+	Ţ
GALLBLADDER & COMMON BILE DUCT	•	.N.,	+	N	+	٠	Н.	M	•	+	•	н.	+ 4		•		•	N	•	M	•	•	+	•	Π
PANCREAS	+	A	+	<u>+</u>	.+	+	+		-	٠	+	•	• •		•	•	٠	Ă.	+	+	•	+	•	٠	•
ESOPHAGUS	•	+	<u>+</u>	+	+	٠	+		•	•	<u>+</u>	•	• •	_	•	•	•	•	•	•	•	÷	•	•	•
STOMACH	<u> </u>		+	+	+	٠	•		٠	•	<u>.</u>	٠	• •		•	•	÷	٠.	٠	•	٠	+	٠	+	•
SMALL INTESTINE Adenomatous Polyp, Nos	•	٨	+	•	•	•	٠	A	٠	٠	•	•	• •		•	-	•	A	•	•	+	+	+	•	•
LARGE INTESTINE	+		•	٠	+	•	+		٠	+	+	•	• •	•	•	-	•	+	-	+	+	+	+	+	+
URINARY SYSTEM			Net Con																		-				1
KIDNEY	+	+		+	+	+	٠	A	-	+	+	•	• •	•	٠	<b>•</b>	<b>.</b>	+	٠	٠	٠	٠	<u>+</u>	+	+
URINARY BLADDER	+	A	٠	+	٠	+	+	A	<b>+</b> ·	+	+	+	+ +	•	+	•	•	٠	•	٠	+	•	+	٠	+
ENDOCRINE SYSTEM														-											1
PITUITARY Adenoma, Nos	•	٠	•	•	ż.	ż.	٠	A	-	ż	•	•	• •	•	•	-	ż.	A	-	÷	•	-	ż	•	٠
ADRENAL Pheochromocytoma, malignant ganglidheuroma	*	•	+	•	+	•	•	A	•	•	•	•	• •	•	+	•	•	•	•	•	•	•	•	•	١
THYROID Follicular-cell Adenoma	•	•	+	•	٠	٠	٠	A	+	+	•	•	• •	•	•	•	٠	٠	•	٠	•	٠	÷	•	-
PARATHYROID .	+	٠	•	-	٠	٠	-	A	•	-	-	•	- •	•	•	•	٠	A	-	٠	+	-	-	•	•
REPRODUCTIVE SYSTEM	<u> </u>					_																			1
MAMMARY GLAND Adenosquamous carcinoma	N	N	N	N	+	ż	N	N	N	N	+	N	• •	•	N	N	N	N	•	N	+	N	•	N	N
UTERUS .	+	٠	+	*	+	•	+	A	+	.+	<u>*</u>	<u>+</u>	+ (		*	•	+	•	٠	<u>+</u>	+	+	<u>.</u>	<u>*</u>	4
OVARY	+	+	+	+	•	٠	-	A	+	•	•	•	• •	•	•	•	+	•	•	•	+	+	+	•	•
NERVOUS SYSTEM																									Τ
BRAIN	+	+	+	+	+	•	+	A	+	+	*	+	+ •	•	+	•	+	•	+	•	+	•	+	+	•
SPECIAL SENSE ORGANS																									T
HARDERIAN GLAND <u>Adenoma, Nos</u> All Other Systems	N	H	N	N	N	N	N	H	N	H X	N	N-	N P		N	H	M	N	N	N	N	H	N	N	N
MULTIPLE ORGANS NOS Malignant Lymphoma, nos Malig.lymphoma, lymphocytic type .	N	N	H	N X	н	H	N	N	N	*	H	H X	N P	•	N	H	N X	N	N	N X	M	N	N	H	N
LEG NOS OSTEOSARCOMA																x								-	

# TABLE B4. INDIVIDUAL ANIMAL TUMOR PATHOLOGY OF FEMALE MICE IN THE TWO-YEARFEED STUDY OF 8-HYDROXYQUINOLINE: HIGH DOSE

ANIMAL Number Weeks on	2	277	2	2	30	3	32	33	3	3	3	3	3	39	040		2	•	4		4	•	0	•	5	TOTAL
STUDY	0	ġ	7	ġ	9		ġ	å	8	å	ė	ģ	į	ġ	į	ġ	ė	ġ	i	0	5	ġ	ġ	ė	8	TUMOR
RESPIRATORY SYSTEM																										
LUNGS AND BRONCHI Alveolar/Bronchiolar Adenoma Alveolar/Bronchiolar Carcinoma Adenosquamous Carcinoma, metastat Pheochromocytoma, metastatic Osteosarcoma, metastatic		•	•	+ ×	•	•	•	•	+	•	•	•	+	•	•	•	•	•	•	•	•	•	•	•		58
TRACHEA	+	٠	٠	+	+	٠	٠	+	+	+	+	+	+	+	٠	+	+	•	+	+	+	+	+	+	•	50
EMATOPOIETIC SYSTEM																									-	
BONE MARROW	+	+	+		•	.+	+	٠	٠	٠	÷.	-	+	+	٠	+	-	٠	<u>+</u>	+	٠	+	+	+	.+	45
SPLEEN	+	*	+	.+	+	+	•	<u>+</u>	•	+	+	*	+	÷	٠	+	•	+	•	<u>+</u>	٠	+	÷	+	+	47
LYMPH NODES	+	•	٠	•	+	٠	+	٠	•	-	+	•	٠	+	<b>*</b>	<u>.</u>	•	+	+	•	٠	٠	<u>+</u>	•	-	66
THYMUS	•	+	-	+	-	+	-	-	-	٠	+	-	+	٠	٠	-	+	•	٠	+	-	٠	٠	+	-	27
CIRCULATORY SYSTEM																_	_									
HEART	+	٠	+	+	٠	٠	+	٠	٠	+	٠	٠	٠	٠	+	٠	+	٠	+	٠	+	+	٠	٠	+	54
DIGESTIVE SYSTEM	<u> </u>			-					•		-		_			-					_		-			
SALIVARY GLAND	<b>.</b>	+	÷	÷		•	+	•	+	•	+_	•	٠	•	+	٠	÷	٠	<u>*</u>	•	•	<u>.</u>	٠	•	•	- 48
LIVER Hepatocellular adenoma Hemangioma	•	٠	+	٠	٠	+ X	<b>•</b> 1	٠	٠	•	٠	•	•	*	+	•	•	•	*	+	+	•	•	•	+	49
BILE DUCT	•	+.	+	•	+	+	+	•	+	+	+	٠	+	•	•	•	•	+	•	+	+	+	•	•	+	
GALLBLADDER & COMMON BILE DUCT	•	+	М.	+	+	•	•	•	٠	+	+.	•	+	+	•	•	•	•	٠	•	•	+	+	•	+	50 8
PANCREAS	•	+	+	•	+		+		•	٠.		•	٠	•	•	•	•	+	•		•	+	•	•		- 43
ESOPHAGUS	+	+	+	+	+	•	•	+	+	•	+	•	•	٠	•	•	•	•	•	•	•	+	+	•	+	
STOMACH	•	+	+	+	+	•	+	+	+	•	+	+	•	•	+	+	+	+	•	+	+	•	•	+	•	48
SMALL INTESTINE Adenomatous PGLYP, Nos	•	+	٠	٠	+	٠	٠	•	•	•	٠	+	+	•	•	•	•	•	•	٠	+	•	٠	÷.	•	<b>45</b>
LARGE INTESTINE	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	•	+	+	٠	+	+	+	٠	+	+	46
JRINARY SYSTEM		-			_			_								_										
KIDNEY	+	+	٠	+	<u>+</u>	٠	+	+	+	+	•	+	•	+	+	•	+	+	•	٠	•	•	٠	٠	•	48
URINARY BLADDER	+	+	+	+	+	+	•	+	+	+	+	+	+	+	•	+	+	+	+	+	٠	+	٠	٠	+	48
ENDOCRINE SYSTEM					-			-		-						-		-							-	
PITUITARY Adenoma, Hos	ż	٠	٠	•	•	* x	-	•	+	-	•	-	•	٠	•	ż	-	•	ż	* ×	-	•	+	•	+	37
ADRENAL Pheochromocytoma, Malignant Ganglioneuroma	•	•	•	* ×	٠	+	•	-	•	•	•	•	•	•	•	+	•	•	•	•	•	•	•	•	+	47
THYRGID Follicular-cell Adenoma	+	+	+	+	+	٠	+	-	+	+	*	٠	+	٠	٠	* x	+	٠	+	٠	-	•	٠	•	٠	¢7
PARATHYRGID	-	٠	+	+	+	•	+	•	+	•	-	-	•	-	-	•	-	+	+	•	-	•	•	•	-	22
REPRODUCTIVE SYSTEM	+									-			ò			-							_		-+	
MAMMARY GLAND Adenosquamous carcinoma	N	N	N	N	N	•	•	٠	N	N	N	N	N	N	N	N	H	H	N	•	N	N	+	•	N	50×
UTERUS		+	+	<u></u>	•	+	٠	•	•	+	+	•	+	+	•	•	+	+	٠	٠	*	*	٠	+	+	49
OVARY	-	٠	+	+	+	+	-	•	•	٠	+	٠	+	+	•	+	•	+	•	+	+	•	+	+	-	43
RERVOUS SYSTEM	1		i																_		_					
BRAIN Special sense organs	•	•	•	-	+	+	•	-	•	+	•	•	+	•	•	+	+	•	•	•	•	•	•	٠	•	47
HARDERIAN GLAND Adenoma, Nos All other systems	N	N	N	N	N	N	N	N	H	N	N	N	N	N	N	N	H	N	N	N	N	N	N	N	•	501
MULTIPLE ORGANS NOS Malignant lymphoma, nos Malig.lymphoma, lymphocytic type	N	N X	ĸ	N X	N	N	N	н	N	N	N	N	N	H X	N	N	N	X	N	N X	H X	NX	N	N	N	58N 6
LEG NOS	<b></b>																								Τ	

TABLE B4. INDIVIDUAL ANIMAL TUMOR PATHOLOGY OF FEMALE MICE: HIGH DOSE (Continued)

\* ANIMALS NECROPSIED

8-Hydroxyquinoline, NTP TR 276

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#### **APPENDIX C**

# SUMMARY OF THE INCIDENCE OF NONNEOPLASTIC LESIONS IN RATS IN THE TWO-YEAR FEED STUDIES OF 8-HYDROXYQUINOLINE

C	ONTRO	DL (UNTR)	LOW	DOSE	HIGH	DOSE
ANIMALS INITIALLY IN STUDY	50	. <u></u>	50	<u></u>	50	
ANIMALS NECROPSIED	50		50		50	
NIMALS EXAMINED HISTOPATHOLOGICALLY	50		50		50	
NTEGUMENTARY SYSTEM						
*SKIN	(50)		(50)		(50)	
EPIDERMAL INCLUSION CYST		(2%)	1	(2%)		
INFLAMMATION, NOS		(4%) (9%)	6	(1994)	9	(694)
HYPERKERATOSIS ACANTHOSIS	1	(2%)		(12%) (6%)		(6%) (2%)
*SUBCUT TISSUE	(50)		(50)	(0%)	(50)	(470)
MINERALIZATION	(00)			(2%)	(00)	
INFLAMMATION, NOS	1	(2%)		(2%)	1	(2%)
INFLAMMATION, ACUTE/CHRONIC	-	(470)		(2%)	1	(2,20)
INFLAMMATION, GRANULOMATOUS				(2%)		
NECROSIS, NOS				(2%)		
HYPERPLASIA, BASAL CELL			•	<u>, - , - , - , - , - , - , - , - , - , -</u>	1	(2%)
HYPERKERATOSIS						(2%)
METAPLASIA, OSSEOUS			1	(2%)		
ESPIRATORY SYSTEM						
#LUNG/BRONCHUS	(50)		(50)		(50)	
INFLAMMATION, NOS		(2%)		(6%)		
INFLAMMATION, FOCAL	_	(	-	(	1	(2%)
FIBROSIS, DIFFUSE			1	(2%)		
INFARCT, NOS				(2%)		
ALVEOLAR MACROPHAGES				(2%)		
#LUNG	(50)		(50)	•	(50)	
MINERALIZATION	1	(2%)	1	(2%)	2	(4%)
HEMORRHAGE	1	(2%)	2	(4%)		
INFLAMMATION, NOS	5	(10%)		(16%)	5	(10%)
INFLAMMATION, FOCAL			1	(2%)	5	(10%)
INFLAMMATION, MULTIFOCAL	1	(2%)				
INFLAMMATION, ACUTE		(0		(6%)		
INFLAMMATION, ACUTE/CHRONIC		(2%)		(2%)		
INFLAMMATION, FOCAL GRANULOMATOU		(0~)		(2%)	0	(
ALVEOLAR MACROPHAGES		(8%)		(2%)		(4%)
HYPERPLASIA, EPITHELIAL	5	(10%)		(10%)	3	(6%)
METAPLASIA, SQUAMOUS			1	(2%)		
IEMATOPOIETIC SYSTEM						
*MULTIPLE ORGANS	(50)	(0.77)	(50)	(00)	(50)	
HEMATOPOIESIS		(2%)		(6%)	(47)	
#SPLEEN	(50)		(49)		(47)	(9a)
HEMORRHAGE			1	(296)	1	(2%)
FIBROSIS FIBROSIS, FOCAL	1	(2%)	1	(2%)		
NECROSIS, NOS		(2%)	9	(4%)		
INFARCT, NOS	-			(2%)		
LYMPHOID DEPLETION	1	(2%)		~_ /- /		
ANGIECTASIS	-	~~ / • /	1	(2%)		
MASTOCYTOSIS	1	(2%)	-			
HEMATOPOIESIS		(38%)	27	(55%)	25	(53%)
#SPLENIC FOLLICLES	(50)		(49)	/	(47)	
ATROPHY, NOS	()			(4%)	(	
#LYMPH NODE	(48)		(48)		(48)	
ANGIECTASIS		(2%)	/			(2%)
		(6%)				(2%)
PLASMACYTOSIS	J					
PLASMACYTOSIS HYPERPLASIA, LYMPHOID	3		1	(2%)		(4%)

	CONTRO	DL (UNTR)	LOWI	DOSE	HIGH	DOSE
IEMATOPOIETIC SYSTEM (Continued)		<u></u>				
#PEYER'S PATCH	(49)		(47)		(44)	
"HYPERPLASIA, LYMPHOID		(6%)		(26%)	9	(20%)
#THYMUS	(43)		(43)	~~~~	(38)	<b>、</b> — ,
INFLAMMATION, ACUTE/CHRONIC	(			(2%)	·/	
NECROSIS, NOS			1	(2%)		
HYPERPLASIA, EPITHELIAL			1	(2%)		
IRCULATORY SYSTEM		· · · · ·				
#SPLEEN	(50)		(49)		(47)	
THROMBOSIS, NOS				(4%)		
#LUNG/BRONCHUS	(50)		(50)		(50)	
THROMBOSIS, NOS				(2%)		
#HEART	(50)		(50)		(50)	
THROMBOSIS, NOS	1	(2%)				(2%)
INFLAMMATION, FOCAL	-	(4.6.00)	-	(19)	1	(2%)
FIBROSIS		(16%)		(4%)		
#MYOCARDIUM	(50)		(50)	(000)	(50)	(0.4~
DEGENERATION, NOS		(88%)		(86%)		(94%)
*ARTERY	(50)		(50)		(50)	
PERIVASCULITIS *PANCREATIC ARTERY		(2%)	(50)		(50)	
THROMBOSIS, NOS	(50)		(50)		(50)	(2%)
PERIVASCULITIS						(2%)
#PANCREAS	(47)		(48)		(45)	(270)
PERIVASCULITIS	(**/)		(40)			(7%)
*MESENTERY	(50)		(50)		(50)	(1,20)
PERIVASCULITIS	(00)		(00)			(2%)
DIGESTIVE SYSTEM *ORAL MUCOUS MEMBRANE	(50)		(50)		(50)	
		(2%)	(00)		(00)	
INFLAMMATION, NOS NECROSIS, NOS		(2%)				
HYPERKERATOSIS		(2%)				
*GUM	(50)		(50)		(50)	
ACANTHOSIS	(00)		(00)			(2%)
#LIVER	(49)		(50)		(48)	(2,0)
DILATATION, NOS		(2%)	(		(	
INFLAMMATION, NOS		(4%)	1	(2%)		
FIBROSIS		(2%)				
CHOLANGIOFIBROSIS		(8%)	6	(12%)	-	
DEGENERATION, NOS		(4%)			2	(4%)
DEGENERATION, CYSTIC	1	(2%)		(4%)	-	
NECROSIS, NOS	-			(2%)		(2%)
NECROSIS, FOCAL	5	(10%)		(4%)	2	(4%)
NECROSIS, ISCHEMIC	~~	(150)		(4%)		(00~
METAMORPHOSIS FATTY		(45%)		(38%)		(38%)
	3	(6%)		(6%)		(4%)
<b>BASOPHILIC CYTO CHANGE</b>	05	(51%)	32	(64%)		(60%) (2%)
BASOPHILIC CYTO CHANGE FOCAL CELLULAR CHANGE	25					(470)
BASOPHILIC CYTO CHANGE FOCAL CELLULAR CHANGE ANGIECTASIS			(50)		(48)	
BASOPHILIC CYTO CHANGE FOCAL CELLULAR CHANGE ANGIECTASIS #LIVER/HEPATOCYTES	25 ( <b>4</b> 9)		(50) 1	(296)	(48)	
BASOPHILIC CYTO CHANGE FOCAL CELLULAR CHANGE ANGIECTASIS #LIVER/HEPATOCYTES DEGENERATION, NOS	(49)		1	(2%)		
BASOPHILIC CYTO CHANGE FOCAL CELLULAR CHANGE ANGIECTASIS #LIVER/HEPATOCYTES DEGENERATION, NOS #BILE DUCT	(49) (49)			(2%)	(48) (48)	
BASOPHILIC CYTO CHANGE FOCAL CELLULAR CHANGE ANGIECTASIS #LIVER/HEPATOCYTES DEGENERATION, NOS #BILE DUCT FIBROSIS	(49) (49) 1	(2%)	1 (50)		(48)	(58%)
BASOPHILIC CYTO CHANGE FOCAL CELLULAR CHANGE ANGIECTASIS #LIVER/HEPATOCYTES DEGENERATION, NOS #BILE DUCT FIBROSIS HYPERPLASIA, NOS	(49) (49) 1		1 (50) 38	(76%)	(48) 28	. ,
BASOPHILIC CYTO CHANGE FOCAL CELLULAR CHANGE ANGIECTASIS #LIVER/HEPATOCYTES DEGENERATION, NOS #BILE DUCT FIBROSIS	(49) (49) 1	(2%)	1 (50) 38		(48) 28	(58%) (2%)

	CONTRO	DL (UNTR)	LOWI	DOSE	HIGH	DOSE
DIGESTIVE SYSTEM (Continued)		<u> </u>				
#PANCREATIC ACINUS	(47)		(48)		(45)	
ATROPHY, NOS		(13%)		(15%)		(2%)
ATROPHY, FOCAL		(4%)	•	(10,0)	-	(2/0)
HYPERPLASIA, NOS	4	(40)	9	(4%)	3	(7%)
HYPERPLASIA, FOCAL			4	(4.0)		(2%)
#ESOPHAGUS	(48)		(46)		(45)	(270)
HYPERKERATOSIS		(2%)	(40)		(40)	
	(50)	• •	(49)		(46)	
#STOMACH EDEMA, NOS		(4%)	(43)		(40)	
					1	(2%)
INFLAMMATION, NOS		(4%)			1	(270)
INFLAMMATION, ACUTE/CHRONIC		(4%)			0	(10)
NECROSIS, NOS		(6%)			2	(4%)
NECROSIS, FOCAL		(2%)		(10)		( <b>7 0</b> )
HYPERPLASIA, EPITHELIAL		(4%)	2	(4%)	3	(7%)
HYPERPLASIA, BASAL CELL		(4%)	~	(00)		(0~)
HYPERKERATOSIS	4	(8%)		(6%)	4	(9%)
ACANTHOSIS				(4%)		
#GASTRIC SUBMUCOSA	(50)		(49)	(	(46)	
INFLAMMATION, NOS				(2%)		
#COLON	(46)		(44)		(44)	
PARASITISM					1	(2%)
JRINARY SYSTEM					-	
#KIDNEY	(50)		(50)		(48)	
MINERALIZATION		(8%)		(4%)		(2%)
INFLAMMATION, NOS		(42%)		(64%)		(69%)
FIBROSIS		(//		(•••••		(2%)
FIBROSIS, DIFFUSE	24	(48%)	33	(66%)		(63%)
NEPHROPATHY		(96%)		(94%)		(98%)
<b>#URINARY BLADDER</b>	(50)	(	(49)	(0 = 10)	(46)	(000.00)
CALCULUS, MICROSCOPIC EXAMINATIO		(4%)	(,		(	
HEMORRHAGE		(2%)				
HYPERPLASIA, EPITHELIAL		(2%)	1	(2%)		
NDOCRINE SYSTEM						
#PITUITARY	(48)		(50)		(47)	
MINERALIZATION	(-3)			(2%)		
DILATATION, NOS	8	(13%)		(14%)		
HYPERPLASIA, NOS		(15%)		(6%)	3	(6%)
HYPERPLASIA, FOCAL		(2%)	0			(2%)
ANGIECTASIS		(2%)				(13%)
#ADRENAL	(50)	·	(50)		(48)	(
MINERALIZATION	(00)					(2%)
HEMORRHAGE						(2%)
METAMORPHOSIS FATTY	2	(4%)	1	(2%)		(4%)
ANGIECTASIS	4		-	<u> </u>		(2%)
#ADRENAL CORTEX	(50)		(50)		(48)	
HYPERTROPHY, FOCAL		(AGL)		(2%)	(90)	
	-	(4%)	1	(470)		
HYPERPLASIA, NOS		(6%)				
HYPERPLASIA, FOCAL		(6%)	180		(10)	
#ADRENAL MEDULLA	(50)	(00)	(50)		(48)	
MINERALIZATION		(2%)				
NECROSIS, NOS		(2%)		(007)		
HYPERPLASIA, NOS	9	(18%)	11	(22%)	14	(29%)
HYPERPLASIA, FOCAL		(4%)		(		

	CONTRO	)L (UNTR)	LOW DOSE		HIGH DOSE		
ENDOCRINE SYSTEM (Continued)							
#THYROID	(50)		(49)		(47)		
FOLLICULAR CYST, NOS	(00)		(10)			(2%)	
INFLAMMATION, CHRONIC	1	(2%)				<b>、</b> — ••• <i>γ</i>	
HYPERPLASIA, C-CELL		(8%)	3	(6%)	1	(2%)	
HYPERPLASIA, FOLLICULAR-CELL	1	(2%)					
REPRODUCTIVE SYSTEM							
#PARATHYROID	(18)		(20)		(20)		
HYPERPLASIA, NOS			1	(5%)			
MAMMARY GLAND	(50)		(50)		(50)		
MINERALIZATION	1	(2%)					
GALACTOCELE	2	(4%)	4	(8%)	2	(4%)	
*PREPUTIAL GLAND	(50)		(50)		(50)		
INFLAMMATION, NOS			1	(2%)	1	(2%)	
INFLAMMATION, SUPPURATIVE						(2%)	
INFLAMMATION, NECROTIZING			1	(2%)			
NECROSIS, NOS	1	(2%)		(6%)	1	(2%)	
HYPERKERATOSIS			1	(2%)			
#PROSTATE	(49)		(50)		(48)		
INFLAMMATION, NOS	15	(31%)		(20%)	15	(31%)	
INFLAMMATION, NECROTIZING			1	(2%)			
INFLAMMATION, ACUTE/CHRONIC	2	(4%)			1	(2%)	
FIBROSIS	1	(2%)	1	(2%)			
FIBROSIS, DIFFUSE	5	(10%)	2	(4%)			
HYPERPLASIA, NOS					1	(2%)	
HYPERPLASIA, EPITHELIAL	4	(8%)			4	(8%)	
HYPERPLASIA, FOCAL					1	(2%)	
#TESTIS	(47)		(50)		(48)		
MINERALIZATION	7	(15%)	5	(10%)	2	(4%)	
INFLAMMATION, NOS	1	(2%)					
NECROSIS, NOS		(2%)	1	(2%)			
ATROPHY, NOS	25	(53%)	22	(44%)	23	(48%)	
HYPERPLÁSIA, INTERSTITIAL CELL	13	(28%)	9	(18%)	5	(10%)	
*EPIDIDYMIS	(50)		(50)		(50)		
SPERMATOCELE	1	(2%)					
INFLAMMATION, ACUTE/CHRONIC	1	(2%)					
FIBROSIS	1	(2%)					
Hyperplasia, epithelial	1	(2%)					
NERVOUS SYSTEM						_	
#BRAIN/MENINGES	(50)		(50)		(50)		
INFLAMMATION, ACUTE				(2%)			
#BRAIN	(50)		(50)	(0.7.)	(50)	( <b>A C</b> )	
HEMORRHAGE			1	(2%)		(2%)	
INFLAMMATION, NOS			-	(0	1	(2%)	
MALACIA				(2%)	/ <b>#</b> A •		
#CEREBELLUM	(50)		(50)		(50)		
HEMORRHAGE	1	(2%)					
SPECIAL SENSE ORGANS							
*EAR	(50)		(50)		(50)		
HYPERKERATOSIS						(2%)	
*ZYMBAL GLAND	(50)		(50)		(50)		
INFLAMMATION, NOS				(2%)			
NECROSIS, NOS				(2%)			
HYPERKERATOSIS	1	(2%)	1	(2%)			

	CONTROL (UNTR)	LOW DOSE	HIGH DOS		
MUSCULOSKELETAL SYSTEM NONE					
BODY CAVITIES NONE					
ALL OTHER SYSTEMS *MULTIPLE ORGANS INFLAMMATION, NOS	(50)	(50)	(50) 1 (2%)		
OMENTUM MINERALIZATION NECROSIS, FAT	1 1	1	1		
SPECIAL MORPHOLOGY SUMMARY NONE					

\* NUMBER OF ANIMALS NECROPSIED

	CONTRO	L (UNTR)	LOW DOSE		HIGH DOSE		
ANIMALS INITIALLY IN STUDY	50		50		50		
ANIMALS NECROPSIED	50		50		50		
ANIMALS EXAMINED HISTOPATHOLOGICALLY	Y 50		50		50		
NTEGUMENTARY SYSTEM							
*SKIN	(50)		(50)		(50)		
INFLAMMATION, NOS		(6%)			2	(4%)	
HYPERPLASIA, EPITHELIAL	1	(2%)					
*SUBCUT TISSUE	(50)		(50)		(50)		
INFLAMMATION, NOS				(	1	(2%)	
NECROSIS, NOS	1	(2%)	1	(2%)			
RESPIRATORY SYSTEM							
#LUNG/BRONCHUS	(50)		(50)		(50)		
INFLAMMATION, NOS						(2%)	
#LUNG	(50)		(50)		(50)		
HEMORRHAGE					1	(2%)	
<b>BRONCHOPNEUMONIA, NOS</b>						(4%)	
INFLAMMATION, NOS		(4%)		(6%)		(4%)	
INFLAMMATION, FOCAL	2	(4%)		(2%)	2	(4%)	
INFLAMMATION, ACUTE			2	(4%)			
ABSCESS, NOS						(2%)	
INFLAMMATION, ACUTE/CHRONIC	,					(6%)	
INFLAMMATION, GRANULOMATOUS						(4%)	
ALVEOLAR MACROPHAGES HYPERPLASIA, EPITHELIAL	1	(2%)				(2%) (4%)	
HEMATOPOIETIC SYSTEM *MULTIPLE ORGANS	(50)		(50)	*	(50)		
HEMATOPOIESIS		(4%)		(2%)	(00)		
#SPLEEN	(50)	(4,0)	(50)	(= /~/	(47)		
HEMORRHAGE		(2%)	(00)		(/		
NECROSIS, NOS		(2%)					
INFARCT, FOCAL	•	(1,0)			1	(2%)	
FOCAL CELLULAR CHANGE			1	(2%)	-	(=,	
HEMATOPOIESIS	39	(78%)		(80%)	33	(70%)	
#SPLENIC FOLLICLES	(50)		(50)		(47)		
ATROPHY, NOS		(2%)	• •	(4%)		(11%)	
#LYMPH NODE	(49)		(48)		(48)		
HYPERPLASIA, RETICULUM CELL						(2%)	
HYPERPLASIA, LYMPHOID		(2%)				(4%)	
#LIVER	(50)		(50)		(49)		
HEMATOPOIESIS	1	(2%)		(2%)			
#PEYER'S PATCH	(49)		(48)		(47)		
HYPERPLASIA, LYMPHOID	9	(18%)	8	(17%)	9	(19%)	
CIRCULATORY SYSTEM							
*MULTIPLE ORGANS	(50)		(50)		(50)		
PERIVASCULITIS						(2%)	
#HEART	(49)		(50)		(50)		
FIBROSIS		(2%)					
#MYOCARDIUM	(49)	(500)	(50)	(500)	(50)	(000)	
DEGENERATION, NOS		(76%)		(52%)		(62%)	
<b>#PANCREAS</b> PERIVASCULITIS	(49)	(2%)	(46)		(45)		

	CONTRO	DL (UNTR)	LOWI	DOSE	HIGH DOSE		
DIGESTIVE SYSTEM							
<b>#SALIVARY GLAND</b>	(47)		(49)		(49)		
HYPERTROPHY, FOCAL						(2%)	
#LIVER	(50)		(50)		(49)		
DILATATION, NOS		(6%)					
INFLAMMATION, ACUTE		(2%) (2%)					
CHOLANGIOFIBROSIS DEGENERATION, NOS		(4%)	1	(2%)	1	(2%)	
NECROSIS, FOCAL		(4%)		(4%)		(4%)	
METAMORPHOSIS FATTY		(36%)		(26%)		(18%)	
<b>BASOPHILIC CYTO CHANGE</b>		(50%)		(30%)	20	(41%)	
FOCAL CELLULAR CHANGE	18	(36%)	32	(64%)	24	(49%)	
ANGIECTASIS					1	(2%)	
<b>#BILE DUCT</b>	(50)		(50)		(49)		
HYPERPLASIA, NOS		(24%)	14	(28%)		(22%)	
<b>#PANCREATIC ACINUS</b>	(49)		(46)		(45)		
ATROPHY, NOS						(7%)	
ATROPHY, FOCAL		(2%)	(7.0)			(2%)	
#ESOPHAGUS	(47)		(50)		(48)	(0.01)	
HYPERKERATOSIS	(40)		(50)			(2%)	
#STOMACH	(48)		(50)	(2%)	(49)		
INFLAMMATION, ACUTE/CHRONIC NECROSIS, FOCAL	9	(4%)		(2%)			
HYPERPLASIA, EPITHELIAL	2	(470)		(4%)	2	(4%)	
HYPERKERATOSIS	3	(6%)		(4%)		(2%)	
ACANTHOSIS			-	(12)		(2%)	
#COLON	(45)		(48)		(48)	(=,	
PARASITISM	• • •	(7%)		(2%)		(4%)	
#CECUM	(45)		(48)	•	(48)		
INFLAMMATION, ACUTE/CHRONIC					1	(2%)	
JRINARY SYSTEM							
#KIDNEY	(50)		(50)		(49)		
MINERALIZATION	1	(2%)	5	(10%)	2	(4%)	
HYDRONEPHROSIS				(2%)			
INFLAMMATION, NOS		(26%)		(24%)		(24%)	
FIBROSIS, DIFFUSE		(24%)		(18%)		(18%)	
NEPHROPATHY	-	(92%)	42	(84%)	37	(76%)	
DEGENERATION, CYSTIC	1	(2%)		(90)			
HYPERPLASIA, TUBULAR CELL #RENAL PAPILLA	(50)		(50)	(2%)	(49)		
#RENAL PAPILLA MINERALIZATION	(00)			(6%)		(6%)	
#KIDNEY/TUBULE	(50)		(50)	(0,2)	(49)	(0,0)	
NECROSIS, FOCAL	(00)		(00)			(2%)	
ENDOCRINE SYSTEM							
#PITUITARY	(47)		(49)		(46)		
DILATATION, NOS		(34%)		(43%)			
		(2%)					
DEGENERATION, NOS		(21%)	2	(4%)		(15%)	
HYPERPLASIA, NOS	1	(2%)				(28%)	
HYPERPLASIA, NOS ANGIECTASIS			(50)		(49)		
HYPERPLASIA, NOS ANGIECTASIS #ADRENAL	(49)		(00)				
HYPERPLASIA, NOS ANGIECTASIS #ADRENAL DILATATION, NOS	( <b>49</b> ) 1	(2%)	(00)				
HYPERPLASIA, NOS ANGIECTASIS #ADRENAL DILATATION, NOS HEMORRHAGE	( <b>49</b> ) 1		(00)			(90)	
HYPERPLASIA, NOS ANGIECTASIS #ADRENAL DILATATION, NOS HEMORRHAGE DEGENERATION, NOS	( <b>49</b> ) 1	(2%)	(00)			(2%) (2%)	
HYPERPLASIA, NOS ANGIECTASIS #ADRENAL DILATATION, NOS HEMORRHAGE	( <b>49</b> ) 1	(2%)		(2%)	1	(2%) (2%) (2%)	

	CONTRO	L (UNTR)	LOW DOSE		HIGH DOSI		
ENDOCRINE SYSTEM (Continued)					<u> </u>	<u> </u>	
#ADRENALCORTEX	(49)		(50)		(49)		
DEGENERATION, NOS		(2%)	(00)		(/		
HYPERTROPHY, FOCAL		(4%)	1	(2%)			
HYPERPLASIA, NOS	4	(4,0)	•	(2,0)	1	(2%)	
#ADRENAL MEDULLA	(49)		(50)		(49)		
#ADRENAL MEDULLA HYPERPLASIA, NOS		(4%)		(4%)	·/	(4%)	
		(470)		(4170)	(49)	(470)	
#THYROID	(48)	(97)	(50)		(49)		
FOLLICULAR CYST, NOS	1	(2%)		(00)			
HYPERPLASIA, FOCAL	-	(4 <b>4</b> 4)		(2%)		(	
HYPERPLASIA, C-CELL	9	(19%)		(12%)	1	(2%)	
HYPERPLASIA, FOLLICULAR-CELL				(2%)			
#PARATHYROID	(27)		(16)		(20)		
HYPERPLASIA, NOS	1	(4%)					
REPRODUCTIVE SYSTEM							
*MAMMARY GLAND	(50)		(50)		(50)		
GALACTOCELE		(26%)		(18%)	,	(30%)	
HYPERPLASIA, ADENOMATOUS		(2%)	•	(10,0)			
*CLITORAL GLAND	(50)	(2%)	(50)		(50)		
	(80)		(00)		(00)	(2%)	
INFLAMMATION, NOS							
INFLAMMATION, SUPPURATIVE						(2%)	
NECROSIS, NOS					1	(2%)	
HYPERKERATOSIS		(2%)					
*VAGINA	(50)		(50)		(50)		
POLYP				(2%)			
#UTERUS	(49)		(49)		(49)		
HYDROMETRA	2	(4%)	3	(6%)	2	(4%)	
INFLAMMATION, NOS	4	(8%)	1	(2%)	1	(2%)	
INFLAMMATION, ACUTE FOCAL	1	(2%)					
INFLAMMATION, ACUTE/CHRONIC			1	(2%)			
NECROSIS, NOS	1	(2%)		(2%)			
#UTERUS/ENDOMETRIUM	(49)		(49)	(2 ~)	(49)		
		(9a)		(90)	(40)		
HYPERPLASIA, NOS	1	(2%)	1	(2%)			
HYPERPLASIA, FOCAL		(2%)			(10)		
#OVARY	(49)		(49)		(49)	·	
HEMORRHAGE		<u></u>			1	(2%)	
NERVOUS SYSTEM							
#BRAIN	(49)		(50)		(50)	(	
HEMORRHAGE					1	(2%)	
SPECIAL SENSE ORGANS							
*EAR	(50)		(50)		(50)		
NECROSIS, NOS		(2%)	(				
		~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~					
MUSCULOSKELETAL SYSTEM NONE							
BODY CAVITIES NONE		<u></u>	<u> </u>		<u></u>		

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	CONTROL (UNTR)	LOW DOSE	HIGH DOSE	
LL OTHER SYSTEMS				
FOOT				
INFLAMMATION, ACUTE/CHRONIC		1		
FIBROSIS		1		
NECROSIS, NOS		1		
OMENTUM				
NECROSIS, FAT	1	1	4	

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

#### **APPENDIX D**

# SUMMARY OF THE INCIDENCE OF NONNEOPLASTIC LESIONS IN MICE IN THE TWO-YEAR FEED STUDIES OF 8-HYDROXYQUINOLINE

	CONTRO	)L (UNTR)	LOW DOSE		HIGH DOSE		
ANIMALS INITIALLY IN STUDY	50		50		50		
ANIMALS NECROPSIED	50		50		50		
ANIMALS EXAMINED HISTOPATHOLOGICALL	Y 50		50		50		
NTEGUMENTARY SYSTEM							
*SKIN	(50)		(50)		(50)		
INFLAMMATION, NOS		(18%)	6	(12%)	6	(12%)	
FIBROSIS	1	(2%)					
NECROSIS, NOS				(2%)			
HYPERKERATOSIS		( <b>AA</b> )	1	(2%)			
METAPLASIA, OSSEOUS		(2%)	(50)		(50)		
*SUBCUT TISSUE	(50)		(50)	(1	(50)	مغرب	
MINERALIZATION		(07)	2	(4%)	1	(2%)	
DILATATION, NOS		(2%)		·	_		
INFLAMMATION, NOS	2	(4%)	3	(6%)	5	(10%)	
ABSCESS, NOS	~	(00)	1			(00)	
INFLAMMATION, ACUTE/CHRONIC	3	. (6%)		(6%)	4	(8%)	
GRANULOMA, NOS	•	(00)		(4%)		<i>(</i> <b>0</b> <i>m</i> ).	
FIBROSIS	3	(6%)		(2%)	4	(8%)	
INFECTION, FUNGAL		(00)		(4%)	-	(1 400)	
NECROSIS, NOS	4	(8%)	•	(12%)		(14%)	
RESPIRATORY SYSTEM							
#LUNG/BRONCHUS	(50)		(49)		(50)		
INFLAMMATION, NOS				(6%)	2	(4%)	
INFLAMMATION, ACUTE				(2%)	·= 4 .		
#LUNG	(50)		(49)		(50)		
MINERALIZATION		(4%)	-			(2%)	
HEMORRHAGE		(2%)		(4%)		(4%)	
INFLAMMATION, NOS		(18%)	11	(22%)	7	(14%)	
INFLAMMATION, FOCAL		(2%)					
INFLAMMATION, ACUTE	2	(4%)		(2%)		(6%)	
INFLAMMATION, ACUTE/CHRONIC				(10%)		(8%)	
ALVEOLAR MACROPHAGES		(6%)	6	(12%)		(8%)	
HYPERPLASIA, EPITHELIAL	1	(2%)			5	(10%)	
HEMATOPOIETIC SYSTEM	(50)		(70)				
*MULTIPLE ORGANS	(50)		(50)	(00)	(50)		
MASTOCYTOSIS	••	(904)	1	~~ / / /	04	(40~	
HEMATOPOIESIS	-	(20%)	18	(36%)		(42%)	
#BONE MARROW	(43)	(90)	(49)	(90)	(46)		
ANGIECTASIS	1	(2%)		(2%)			
HYPERPLASIA, HEMATOPOIETIC	(40)			(2%)	/EAN		
#SPLEEN MINERALIZATION	(49)	(4%)	(48)		(50)		
HEMORRHAGE		(4%) (2%)					
INFLAMMATION, NOS		(2%)					
NECROSIS, NOS		(2%)	1	(2%)			
NECROSIS, FOCAL	1	(2,0)		(2%)			
LYMPHOID DEPLETION				(2%)			
ANGIECTASIS			•		9	(4%)	
HYPERPLASIA, LYMPHOID			9	(4%)	4	(= <i>rv)</i>	
HEMATOPOIESIS	19	(39%)		(25%)	15	(30%)	
				~~~/~/			
			(45)		(42)		
#LYMPH NODE MINERALIZATION	(44)		(45) 1	(2%)	(42)		

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	CONTRO	L (UNTR)	LOW DOSE		HIGH DOSI	
HEMATOPOIETIC SYSTEM (Continued)	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,				9999 - Canada San Angel, Canada San Angel, Canada San Angel, Canada San Angel, Canada San Angel, Canada San Ang	
#LYMPH NODE (Continued)	(44)		(45)		(42)	
FIBROSIS	( <i>)</i>		1	(2%)		
NECROSIS, NOS	2	(5%)	2	(4%)		
ANGIECTASIS	11	(25%)	19	(42%)	16	(38%)
PLASMACYTOSIS	1	(2%)	3	(7%)	1	(2%)
HYPERPLASIA, RETICULUM CELL			2	(4%)		
HYPERPLASIA, LYMPHOID	2	(5%)	4	(9%)	1	(2%)
MASTOCYTOSIS			2	(4%)		
HEMATOPOIESIS	9	(20%)	16	(36%)	13	(31%)
#LIVER	(50)		(50)		(50)	
HEMATOPOIESIS	2	(4%)	1	(2%)	1	(2%)
#PEYER'S PATCH	(43)		(45)		(47)	
HYPERPLASIA, LYMPHOID		(19%)		(18%)		(6%)
CIRCULATORY SYSTEM						
*SUBCUT TISSUE	(50)		(50)		(50)	
THROMBOSIS, NOS		(2%)				
#HEART	(50)		(50)		(49)	
THROMBOSIS, NOS				(2%)	•	
ENDOCARDITIS, BACTERIAL	3	(6%)	_			
INFLAMMATION, NOS	-	(****	1	(2%)		
FIBROSIS			-	(2%)		
#AURICULAR APPENDAGE	(50)		(50)	(=)	(49)	
THROMBOSIS, NOS	(00)			(2%)		
#MYOCARDIUM	(50)		(50)	(2,0)	(49)	
DEGENERATION, NOS		(2%)	(,		()	
#ADRENAL	(49)	(2,20)	(50)		(46)	
THROMBOSIS, NOS				(2%)	(,	
DIGESTIVE SYSTEM	anden in Legislanden i Handrichten gestaarde					
#SALIVARY GLAND	(50)		(48)		(50)	
DEGENERATION, NOS					1	(2%)
#LIVER	(50)		(50)		(50)	
MINERALIZATION		(4%)	1	(2%)	2	(4%)
HEMORRHAGE	. –			(2%)		
INFLAMMATION, NOS	4	(8%)		(2%)		
INFLAMMATION, ACUTE/CHRONIC	-	~~ /~ /	-		1	(2%)
FIBROSIS	1	(2%)				(2%)
DEGENERATION, NOS	-	( /• /				(4%)
NECROSIS, NOS	3	(6%)	6	(12%)		(2%)
NECROSIS, FOCAL		(6%)		(18%)	9	· · _ · · ·
NECROSIS, ISCHEMIC		(8%)		(6%)	2	(4%)
INFARCT, NOS		(2%)	•			
METAMORPHOSIS FATTY		(20%)	11	(22%)	10	(20%)
CYTOPLASMIC CHANGE, NOS		(4%)				
BASOPHILIC CYTO CHANGE	-		1	(2%)		
HEPATOCYTOMEGALY			-		1	(2%)
*GALLBLADDER	(50)		(50)		(50)	
INFLAMMATION, NOS	(00)			(2%)		
#PANCREAS	(47)		(47)		(48)	
INFLAMMATION, ACUTE	1	(2%)	(=))		(0)	
NECROSIS, NOS		(2%)				
#STOMACH	(47)	~~/~/	(49)		(50)	
						(ACL)
INFLAMMATION, NOS		(6%)		(6%)	4	(4%)

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	CONTRO	DL (UNTR)	LOWI	DOSE	HIGH	DOSE
DIGESTIVE SYSTEM (Continued)						
#STOMACH (Continued)	(47)		(49)		(50)	
INFLAMMATION, ACUTE/CHRONIC	(47)			(4%)	(00)	
				(2%)		
NECROSIS, NOS	1	(90)	1	(270)		
NECROSIS, FOCAL	1	(2%)				(901)
HYPERPLASIA, EPITHELIAL		(00)		(1.40)		(2%)
HYPERKERATOSIS	4	(9%)		(14%)	Ð	(10%)
ACANTHOSIS				(2%)		
#JEJUNUM	(43)		(45)		(47)	
INFLAMMATION, ACUTE		(5%)				
ABSCESS, NOS		(2%)				
NECROSIS, NOS	1	(2%)				
JRINARY SYSTEM						
#KIDNEY	(50)		(50)		(50)	
MINERALIZATION		(36%)		(42%)		(34%)
INFLAMMATION, NOS		(2%)		(2%)		\ <b>v</b> = /V
INFLAMMATION, NOS		(2%)	•			
	1	(470)			0	(4%)
ABSCESS, NOS						(4%)
INFLAMMATION, ACUTE/CHRONIC	-	(100)	14	(000)	_	
NEPHROPATHY	5	(10%)		(28%)	4	(8%)
GLOMERULOSCLEROSIS, NOS			1	(2%)		
INFARCT, NOS						(2%)
<b>#RENAL PAPILLA</b>	(50)		(50)		(50)	
MINERALIZATION						(2%)
#KIDNEY/TUBULE	(50)		(50)		(50)	
NECROSIS, FOCAL	1	(2%)				
<b>#URINARY BLADDER</b>	(46)		(48)		(48)	
INFLAMMATION, NOS			1	(2%)		
INFLAMMATION, ACUTE	1	(2%)				
INFLAMMATION, ACUTE/CHRONIC	1	(2%)	1	(2%)		
NECROSIS, NOS			1	(2%)		
<b>*PROSTATIC URETHRA</b>	(50)		(50)		(50)	
INFLAMMATION, NOS	1	(2%)				
ENDOCRINE SYSTEM				<u> </u>		
#PITUITARY	(39)		(48)		(46)	
HYPERPLASIA, NOS	· •	(3%)	(20)		(	
#ADRENAL	(49)	(3,6)	(50)		(46)	
HYPERPLASIA, NOS	· · · ·	(20%)	• •	(36%)		(30%)
#ADRENAL/CAPSULE	(49)		(50)	(30.0)	(46)	
HYPERPLASIA, NOS	(•)			(4%)		(2%)
#ADRENAL CORTEX	(49)		(50)		(46)	(,
HYPERTROPHY, NOS	(		(00)			(2%)
HYPERTROPHY, FOCAL	9	(4%)	3	(6%)		(2%)
	2		5	(3,0)		(2%)
HYPERPLASIA, NOS	(40)		(50)		(46)	(470)
#ADRENAL MEDULLA	(49)	(1496)		(40)		(110)
HYPERPLASIA, NOS		(14%)	Z	(4%)		(11%)
REPRODUCTIVE SYSTEM						
*PENIS	(50)		(50)		(50)	
INFLAMMATION, NOS		(2%)				(2%)
NECROSIS, NOS	1	(2%)				
*#PREPUTIAL GLAND	(50)		(50)		(50)	
			1	(2%)		(4%)
MINERALIZATION			-		_	
MINERALIZATION HEMORRHAGE	1	(2%)	•	(2,0)	_	()

	CONTRO	DL (UNTR)	LOW	DOSE	HIGH	DOSE
REPRODUCTIVE SYSTEM (Continued)	i	<u> </u>			· · · · · · · · · · · · · · · · · · ·	
#PREPUTIAL GLAND (Continued)	(50)		(50)		(50)	
ABSCESS, NOS		(4%)	(00)		(00)	
INFLAMMATION, ACUTE/CHRONIC	-	(10)	1	(2%)	1	(2%)
FIBROSIS			-	(2.00)		(2%)
NECROSIS, NOS			2	(4%)		(4%)
HYPERKERATOSIS			-	(-,-,-,		(2%)
#PROSTATE	(47)		(48)		(44)	(= /0/
INFLAMMATION, NOS		(9%)		(6%)		(2%)
INFLAMMATION, ACUTE/CHRONIC		(2%)	•	(****	-	()
FIBROSIS, DIFFUSE	-	(=,	1	(2%)		
HYPERPLASIA, NOS	1	(2%)	-	(,		
*SEMINAL VESICLE	(50)		(50)		(50)	
INFLAMMATION, NECROTIZING				(2%)	(00)	
INFLAMMATION, ACUTE/CHRONIC			-	~~~	1	(2%)
INFLAMMATION, CHRONIC	1	(2%)			•	(= /0/
FIBROSIS		(2%)				
HYPERPLASIA, PAPILLARY	-				1	(2%)
#TESTIS	(49)		(48)		(47)	(270)
MINERALIZATION		(2%)		(2%)	• •	(94)
ATROPHY, NOS	1	(470)		(2%)		(2%)
#TESTIS/TUBULE	(49)			(270)		(2%)
ATROPHY, FOCAL		(4%)	(48)	(401)	(47)	(10)
*EPIDIDYMIS	(50)	(470)		(4%)		(4%)
INFLAMMATION, NECROT' /ING	(00)		(50)	(2%)	(50)	
INF MAMMATION, NEOROT AND			+	(470)		
NONE SPECIAL SENSE ORGANS NONE		- <u></u>	<del></del>	······································		
MUSCULOSKELETAL SYSTEM NONE						
BODY CAVITIES					<u></u>	
*ABDOMINAL CAVITY	(50)		(50)		(50)	
MINERALIZATION	(00)		(00)			(2%)
HEMORRHAGE						(2%)
						(2,2)
ALL OTHER SYSTEMS						
*MULTIPLE ORGANS	(50)		(50)		(50)	
INFLAMMATION, NOS		(8%)		(4%)	1	(4%)
INFLAMMATION, ACUTE		(2%)	4	(-170)	6	(
LOWER LEG	1					
MINERALIZATION			1			
			1			
INFLAMMATION CHRONIC			3		2	
INFLAMMATION, CHRONIC			J		4	
OSTEOARTHRITIS	1					
OSTEOARTHRITIS OSTEOCHONDROSIS	1					
OSTEOARTHRITIS OSTEOCHONDROSIS OMENTUM	_					
OSTEOARTHRITIS OSTEOCHONDROSIS	1 1 1 1		1			

### TABLE D1. SUMMARY OF THE INCIDENCE OF NONNEOPLASTIC LESIONS IN MALE MICE IN THE TWO-YEAR FEED STUDY OF 8-HYDROXYQUINOLINE (Continued)

## TABLE D1. SUMMARY OF THE INCIDENCE OF NONNEOPLASTIC LESIONS IN MALE MICE IN THETWO-YEAR FEED STUDY OF 8-HYDROXYQUINOLINE (Continued)

CONTROL (UNTR) LOW DOSE HIGH DOSE

#### SPECIAL MORPHOLOGY SUMMARY NONE

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

C	ONTRO	L (UNTR)	LOWI	DOSE	HIGH	DOSE
ANIMALS INITIALLY IN STUDY	50		50		50	
ANIMALS NECROPSIED	50		50		50	
ANIMALS EXAMINED HISTOPATHOLOGICALLY	50		50		50	
INTEGUMENTARY SYSTEM						
*SUBCUT TISSUE NECROSIS, NOS	(50)	(2%)	(50)		(50)	
		(2 k)				
RESPIRATORY SYSTEM	(40)		(50)			
#LUNG/BRONCHUS	(49)		(50)	(90)	(50)	
INFLAMMATION, NOS	(40)			(2%)	(50)	
#LUNG	(49)	(6%)	(50)	(2%)		(6%)
INFLAMMATION, NOS	ა	(070)			3	(070)
INFLAMMATION, ACUTE FOCAL				(2%) (2%)		
INFLAMMATION, ACUTE/CHRONIC ALVEOLAR MACROPHAGES	1	(2%)		(4%) (4%)	ŋ	(4%)
HYPERPLASIA, EPITHELIAL		(2%)	4	(470)	2	(470)
HEMATOPOIETIC SYSTEM						
*MULTIPLE ORGANS	(50)		(50)		(50)	
HEMATOPOIESIS		(58%)		(40%)		(46%)
<b>#BONE MARROW</b>	(47)	(	(49)	(,	(45)	(
ANGIECTASIS			()			(2%)
HEMATOPOIESIS	1	(2%)				• •
#SPLEEN	(49)		(48)		(47)	
HYPERPLASIA, LYMPHOID	4	(8%)			3	(6%)
HEMATOPOIESIS	8	(16%)	16	(33%)	16	(34%)
#LYMPH NODE	(42)		(47)		(44)	
INFLAMMATION, NOS	1	(2%)			2	(5%)
NECROSIS, NOS		(2%)				
LYMPHOID DEPLETION		(2%)	-	(4.4.44)	•	( <b>m</b> m)
ANGIECTASIS		(5%)		(11%)		(5%)
PLASMACYTOSIS	4	(10%)		(4%)	1	(2%)
HYPERPLASIA, RETICULUM CELL			1	(2%)		(00)
HYPERPLASIA, LYMPHOID	•	(EM)		(00)	1	(2%)
HEMATOPOIESIS		(5%)		(2%)	(10)	
#LIVER HEMATOPOIESIS	(49)	(60)	(50)	(2%)	(49)	
		(6%)		(470)	(48)	
#PEYER'S PATCH	(43)	(70)	(44)	(7%)	(45)	(4%)
HYPERPLASIA, LYMPHOID #THYMUS	(19)	(7%)	3 (25)	(170)	(27)	(1970)
HYPERPLASIA, LYMPHOID	(19)			(4%)	(27)	
CIRCULATORY SYSTEM		······································				
*MULTIPLE ORGANS	(50)		(50)		(50)	
PERIVASCULITIS				(2%)		
#HEART	(50)		(50)		(50)	
INFLAMMATION, NOS		(2%)				
#MYOCARDIUM	(50)		(50)		(50)	
DEGENERATION, NOS					• •	(2%)
DIGESTIVE SYSTEM						
	(40)		(46)		(48)	
#SALIVARY GLAND	(48)		(180)			
#SALIVARY GLAND INFLAMMATION, NOS NECROSIS, FOCAL	(48)			(2%)	(40)	

### TABLE D2. SUMMARY OF THE INCIDENCE OF NONNEOPLASTIC LESIONS IN FEMALE MICE IN THE TWO-YEAR FEED STUDY OF 8-HYDROXYQUINOLINE

	CONTRO	DL (UNTR)	LOWI	DOSE	HIGH	DOSE
DIGESTIVE SYSTEM (Continued)			- <u></u>			
#LIVER	(49)		(50)		(49)	
MINERALIZATION		(2%)				
DILATATION, NOS		(2%)	1	(2%)		
DEGENERATION, NOS	••	(		(2%)		
NECROSIS, NOS	¥	(2%)		(2%)		
NECROSIS, FOCAL		(6%)		(20%)	6	(12%)
NECROSIS, ISCHEMIC	•3	(0.0)	10	(20%)		(6%)
	11	(990)	90	(40%)		
METAMORPHOSIS FATTY		(22%)	20	(40%)	11	(22%)
CYTOPLASMIC CHANGE, NOS	1	(2%)				
OLEAR-CELL CHANGE			1	(2%)		
HYPERPLASIA, NOS		(2%)				
*GALLBLADDER	(50)		(50)		(50)	
INFLAMMATION, NOS			1	(2%)		
<b>#PANCREATIC ACINUS</b>	(47)		(47)		(45)	
ATROPHY, NOS		(4%)			1	(2%)
HYPERPLASIA, NOS	-	-				(2%)
#STOMACH	(47)		(48)		(48)	
INFLAMMATION, NOS		(4%)		(2%)		(2%)
NECROSIS, NOS		(2%)		(4%)		
HYPERPLASIA, EPITHELIAL	-	(=,•,	-	()	1	(2%)
HYPERKERATOSIS	9	(19%)	7	(15%)		(21%)
JRINARY SYSTEM	(10)		(50)		(40)	
#KIDNEY	(49)		(50)		(48)	
MINERALIZATION	1	(2%)	3	(6%)		(2%)
HYDRONEPHROSIS					1	(2%)
INFLAMMATION, NOS			1	(2%)		
NEPHROPATHY	3	(6%)	3	(6%)	1	(2%)
GLOMERULOSCLEROSIS, NOS			1	(2%)		
NECROSIS, NOS	1	(2%)	1	(2%)		
<b>#RENAL PAPILLA</b>	(49)		(50)		(48)	
MINERALIZATION	,,			(2%)		
#KIDNEY/TUBULE	(49)		(50)	()	(48)	
DEGENERATION, NOS	(40)			(4%)	(10)	
	(46)		(48)	(4,0)	(48)	
#URINARY BLADDER		(40)	(40)		(40)	
HYPERPLASIA, EPITHELIAL	Z	(4%)				
NDOCRINE SYSTEM						
<b>#PITUITARY</b>	(40)		(44)		(37)	
DILATATION, NOS	2	(5%)	2	(5%)	7	(19%)
HYPERPLASIA, NOS	2	(5%)				
<b>#PITUITARY INTERMEDIA</b>	(40)		(44)		(37)	
HYPERPLASIA, NOS	,		1	(2%)		
#ADRENAL	(49)		(48)		(47)	
NECROSIS, NOS	(-0)		(			(2%)
METAMORPHOSIS FATTY	1	(2%)			-	(= /0/
HYPERPLASIA, NOS			99	(48%)	0 E	(53%)
		(43%)		(+070)		(0070)
#ADRENAL/CAPSULE	(49)	(07)	(48)	(00)	(47)	100
HYPERPLASIA, NOS		(6%)		(2%)		(6%)
#ADRENAL CORTEX	(49)		(48)		(47)	
HYPERPLASIA, NOS	1	(2%)				
<b>#ADRENAL MEDULLA</b>	(49)		(48)		(47)	
		(		(001)		
	1	(296)	1	(2%)		
HYPERPLASIA, NOS #THYROID	1 (48)	(2%)	(48)	(2%)	(47)	

### TABLE D2. SUMMARY OF THE INCIDENCE OF NONNEOPLASTIC LESIONS IN FEMALE MICE IN THE<br/>TWO-YEAR FEED STUDY OF 8-HYDROXYQUINOLINE (Continued)

8-Hydroxyquinoline, NTP TR 276

	CONTRO	L (UNTR)	LOWI	DOSE	HIGH	DOSI
REPRODUCTIVE SYSTEM					<u> </u>	
*MAMMARY GLAND	(50)		(50)		(50)	
NECROSIS, NOS		(2%)	(00)		,	(2%)
HYPERKERATOSIS		(2%)			•	(2,0)
	(50)	(270)	(47)		(49)	
#UTERUS	(50)				(49)	
HYDROMETRA				(2%)	0	(100)
INFLAMMATION, NOS			. Z	(4%)		(12%)
INFLAMMATION, FIBRINOUS	-					(2%)
INFLAMMATION, NECROTIZING		(18%)		(9%)	2	(4%)
ANGIECTASIS		(4%)		(2%)		
#UTERUS/ENDOMETRIUM	(50)		(47)		(49)	
HYPERPLASIA, NOS						(4%)
HYPERPLASIA, CYSTIC		(20%)		(40%)		(31%)
#OVARY	(43)		(46)		(43)	
MINERALIZATION	1	(2%)	3	(7%)		
HEMORRHAGE			1	(2%)		
INFLAMMATION, NOS				(2%)		
INFLAMMATION, NECROTIZING	16	(37%)		(15%)	7	(16%)
INFLAMMATION, ACUTE		(01.10)	•	(10,00)		(2%)
FIBROSIS						(2%)
			9	(4%)	1	(270)
NECROSIS, NOS ANGIECTASIS			4	(4170)	1	(2%)
						(270)
VERVOUS SYSTEM						
#BRAIN	(49)		(50)		(47)	
HEMORRHAGE					1	(2%)
SPECIAL SENSE ORGANS						
*EAR	(50)		(50)		(50)	
NECROSIS, NOS	(00)		••••	(2%)	(00)	
			•	(2 %) 		
MUSCULOSKELETAL SYSTEM						
*MANDIBLE	(50)		(50)		(50)	
MINERALIZATION			1	(2%)		
INFLAMMATION, ACUTE			1	(2%)		
ABSCESS, NOS			1	(2%)		
NECROSIS, NOS			1	(2%)		
BODY CAVITIES						
*THORACIC CAVITY	(50)		(50)		(50)	
INFLAMMATION, NECROTIZING		(6%)		(6%)		(4%)
*ABDOMINAL CAVITY	(50)		(50)	(3.0)	(50)	
INFLAMMATION, NECROTIZING		(1406)		(1906)		(12%)
	7	(14%)	0	(12%)		
FIBROSIS			120			(4%)
*PERITONEUM	(50)	(00)	(50)		(50)	(407)
INFLAMMATION, NOS	3	(6%)			2	(4%)
ALL OTHER SYSTEMS						
*MULTIPLE ORGANS	(50)		(50)		(50)	
INFLAMMATION, NOS		(32%)		(24%)		(18%)
INFLAMMATION, ACUTE				(2%)	•	
OMENTUM			-			
NECROSIS, FAT	1		3		1	

### TABLE D2. SUMMARY OF THE INCIDENCE OF NONNEOPLASTIC LESIONS IN FEMALE MICE IN "HETWO-YEAR FEED STUDY OF 8-HYDROXYQUINOLINE (Continued)

## TABLE D3. SUMMARY OF THE INCIDENCE OF NONNEOPLASTIC LESIONS IN FEMALE MICE IN THE TWO-YEAR FEED STUDY OF 8-HYDROXYQUINOLINE (Continued)

	CONTROL (UNTR)	LOW DOSE	HIGH DOSE
SPECIAL MORPHOLOGY SUMMARY AUTO/NECROPSY/HISTO PERF			3
<ul> <li>NUMBER OF ANIMALS WITH TISSUE EXA</li> <li>NUMBER OF ANIMALS NECROPSIED</li> </ul>	MINED MICROSCOPICAL	LY	

### APPENDIX E

# ANALYSES OF PRIMARY TUMORS IN RATS AND MICE IN THE TWO-YEAR FEED STUDIES OF 8-HYDROXYQUINOLINE

	Control	1,500 ppm	3,000 ppm
ubcutaneous Tissue: Fibroma	<u>.</u>		
Overall Rates (a)	2/50 (4%)	4/50 (8%)	5/50 (10%)
Adjusted Rates (b)	6.9%	11.1%	13.4%
Terminal Rates (c)	2/29 (7%)	3/34 (9%)	3/33 (9%)
Life Table Tests (d)	P = 0.210	P=0.411	P = 0.267
Incidental Tumor Tests (d)	P = 0.198	P = 0.400	P = 0.250
Cochran-Armitage Trend Test (d)	P = 0.169	1 -0:400	1 - 0.200
Fisher Exact Tests		P=0.339	P = 0.218
ubcutaneous Tissue: Fibroma or Fib	rosarcoma		
Overall Rates (a)	2/50 (4%)	4/50 (8%)	6/50 (12%)
Adjusted Rates (b)	6.9%	11.1%	15.8%
Terminal Rates (c)	2/29 (7%)	3/34 (9%)	3/33 (9%)
Life Table Tests (d)	P = 0.132	P = 0.411	P = 0.182
Incidental Tumor Tests (d)	P = 0.132 P = 0.118	P = 0.400	P = 0.152
		1 - 0.400	1 -0.105
Cochran-Armitage Trend Test (d) Fisher Exact Tests	P=0.099	P=0.339	P=0.134
ung: Alveolar/Bronchiolar Adenom		0/20/400	6 IF 6 1000
Overall Rates (a)	0/50 (0%)	2/50 (4%)	3/50 (6%)
Adjusted Rates (b)	0.0%	5.9%	8.2%
Terminal Rates (c)	0/29 (0%)	2/34 (6%)	2/33 (6%)
Life Table Tests (d)	P=0.097	P = 0.274	P = 0.143
Incidental Tumor Tests (d) Cochran-Armitage Trend Test (d)	P = 0.094 P = 0.082	P=0.274	P=0.131
Fisher Exact Tests	r = 0.082	P=0.247	P=0.121
	Consinome		
ung: Alveolar/Bronchiolar Adenoma Overall Rates (a)	0/50 (0%)	3/50 (6%)	4/50 (8%)
	0.0%	7.8%	10.1%
Adjusted Rates (b)			
Terminal Rates (c)	0/29 (0%)	2/34 (6%)	2/33 (6%) D-0.080
Life Table Tests (d)	P = 0.061	P = 0.143	P = 0.080
Incidental Tumor Tests (d)	P=0.018	P=0.142	P = 0.037
Cochran-Armitage Trend Test (d) Fisher Exact Tests	P=0.049	P=0.121	P=0.059
lematopoietic System: Mononuclear Overall Rates (a)	Cell Leukemia 17/50 (34%)	8/50 (16%)	9/50 (18%)
	43.3%	20.4%	22.9%
Adjusted Rates (b)			
Terminal Rates (c)	8/29 (28%)	5/34 (15%) D 0 001 N	4/33 (12%)
Life Table Tests (d)	P = 0.026N	P = 0.021 N	P = 0.040N
Incidental Tumor Tests (d)	P=0.042N	P=0.048N	P = 0.055N
Cochran-Armitage Trend Test (d) Fisher Exact Tests	P=0.037N	P=0.032N	P=0.055N
lematopoietic System: Lymphoma, A		0/20 /000	0/20/4/
Overall Rates (a)	3/50 (6%)	3/50 (6%)	2/50 (4%)
	9.0%	6.4%	4.5%
Adjusted Rates (b)		0/34 (0%)	0/33 (0%)
Terminal Rates (c)	2/29 (7%)		
Terminal Rates (c) Life Table Tests (d)	P = 0.373N	P = 0.611N	
Terminal Rates (c) Life Table Tests (d) Incidental Tumor Tests (d)	P=0.373N P=0.488N		P=0.453N P=0.498N
Terminal Rates (c) Life Table Tests (d)	P = 0.373N	P=0.611N P=0.518	P=0.453N P=0.498N
Terminal Rates (c) Life Table Tests (d) Incidental Tumor Tests (d)	P=0.373N P=0.488N	P = 0.611N	
Terminal Rates (c) Life Table Tests (d) Incidental Tumor Tests (d) Cochran-Armitage Trend Test (d) Fisher Exact Tests	P=0.373N P=0.488N	P=0.611N P=0.518	P=0.498N
Terminal Rates (c) Life Table Tests (d) Incidental Tumor Tests (d) Cochran-Armitage Trend Test (d) Fisher Exact Tests iver: Neoplastic Nodule	P=0.373N P=0.488N P=0.412N	P=0.611N P=0.518 P=0.661N	P=0.498N
Terminal Rates (c) Life Table Tests (d) Incidental Tumor Tests (d) Cochran-Armitage Trend Test (d) Fisher Exact Tests iver: Neoplastic Nodule Overall Rates (a)	P=0.373N P=0.488N P=0.412N 6/49 (12%)	P = 0.611 N P = 0.518 P = 0.661 N 1/50 (2%)	P=0.498N P=0.500N 3/48 (6%)
Terminal Rates (c) Life Table Tests (d) Incidental Tumor Tests (d) Cochran-Armitage Trend Test (d) Fisher Exact Tests <b>iver: Neoplastic Nodule</b> Overall Rates (a) Adjusted Rates (b)	P=0.373N P=0.488N P=0.412N 6/49 (12%) 18.7%	P=0.611N P=0.518 P=0.661N 1/50 (2%) 2.9%	P=0.498N P=0.500N 3/48 (6%) 8.6%
Terminal Rates (c) Life Table Tests (d) Incidental Tumor Tests (d) Cochran-Armitage Trend Test (d) Fisher Exact Tests iver: Neoplastic Nodule Overall Rates (a) Adjusted Rates (b) Terminal Rates (c)	P=0.373N P=0.488N P=0.412N 6/49 (12%) 18.7% 4/29 (14%)	$P = 0.611 N$ $P = 0.518$ $P = 0.661 N$ $\frac{1}{50} (2\%)$ $2.9\%$ $\frac{1}{34} (3\%)$	P=0.498N P=0.500N 3/48 (6%) 8.6% 2/33 (6%)
Terminal Rates (c) Life Table Tests (d) Incidental Tumor Tests (d) Cochran-Armitage Trend Test (d) Fisher Exact Tests iver: Neoplastic Nodule Overall Rates (a) Adjusted Rates (b) Terminal Rates (c) Life Table Tests (d)	P = 0.373N $P = 0.488N$ $P = 0.412N$ $6/49 (12%)$ $18.7%$ $4/29 (14%)$ $P = 0.121N$	P = 0.611 N $P = 0.518$ $P = 0.661 N$ $1/50 (2%)$ $2.9%$ $1/34 (3%)$ $P = 0.040 N$	P = 0.498N P = 0.500N 3/48 (6%) 8.6% 2/33 (6%) P = 0.190N
Terminal Rates (c) Life Table Tests (d) Incidental Tumor Tests (d) Cochran-Armitage Trend Test (d) Fisher Exact Tests iver: Neoplastic Nodule Overall Rates (a) Adjusted Rates (b) Terminal Rates (c)	P=0.373N P=0.488N P=0.412N 6/49 (12%) 18.7% 4/29 (14%)	$P = 0.611 N$ $P = 0.518$ $P = 0.661 N$ $\frac{1}{50} (2\%)$ $2.9\%$ $\frac{1}{34} (3\%)$	P=0.498N P=0.500N 3/48 (6%) 8.6% 2/33 (6%)

## TABLE E1. ANALYSIS OF PRIMARY TUMORS IN MALE RATS IN THE TWO-YEAR FEEDSTUDY OF 8-HYDROXYQUINOLINE

	Control	1,500 ppm	3,000 ppm
liver: Neoplastic Nodule or Carcinoma			······································
Overall Rates (a)	7/49 (14%)	1/50 (2%)	3/48 (6%)
Adjusted Rates (b)	20.4%	2.9%	8.6%
Terminal Rates (c)	4/29 (14%)	1/34 (3%)	2/33 (6%)
Life Table Tests (d)	P = 0.067N	P = 0.023N	P = 0.122N
Incidental Tumor Tests (d)	P = 0.085N	P = 0.037N	P = 0.151N
Cochran-Armitage Trend Test (d)	P = 0.093N	1 = 0.00114	1 = 0.10114
Fisher Exact Tests	1 -0.00011	P = 0.028N	P=0.167N
ituitary: Adenoma	10/10 (00 %)		
Overall Rates (a)	18/48 (38%)	17/50 (34%)	12/47 (26%)
Adjusted Rates (b)	52.1%	40.9%	32.7%
Terminal Rates (c)	13/29 (45%)	10/34 (29%)	9/33 (27%)
Life Table Tests (d)	P = 0.064N	P = 0.306N	P = 0.074N
Incidental Tumor Tests (d)	P=0.093N	P = 0.403N	P = 0.100N
Cochran-Armitage Trend Test (d)	P=0.128N		
Fisher Exact Tests		P = 0.440N	P = 0.151N
drenal: Pheochromocytoma			
Overall Rates (a)	12/50 (24%)	8/50 (16%)	13/48 (27%)
Adjusted Rates (b)	34.5%	20.6%	35.9%
Terminal Rates (c)	34.3 <del>%</del> 7/29 (24%)	4/34 (12%)	
Life Table Tests (d)			10/33 (30%) R = 0.526N
	P = 0.513N	P = 0.144N	P = 0.536N
Incidental Tumor Tests (d) Cochran-Armitage Trend Test (d)	P=0.485 P=0.409	P = 0.172N	P=0.555
Fisher Exact Tests	r - 0.408	P = 0.227 N	P=0.453
hyroid: C-Cell Carcinoma Overall Rates (a)	0/50 (0%)	0/49 (0%)	4/47 (9%)
Adjusted Rates (b)	0.0%	0.0%	11.2%
Terminal Rates (c)	0/29 (0%)	0/34 (0%)	3/33 (9%)
Life Table Tests (d)	P = 0.018	(e)	P = 0.080
Incidental Tumor Tests (d)	P = 0.016	(e)	P=0.068
Cochran-Armitage Trend Test (d) Fisher Exact Tests	P=0.013	(-)	D-0051
FISHER LASCI TESUS		(e)	P = 0.051
hyroid: C-Cell Adenoma or Carcinoma	l .		
Overall Rates (a)	1/50 (2%)	1/49 (2%)	6/47 (13%)
Adjusted Rates (b)	2.5%	2.9%	17.1%
Terminal Rates (c)	0/29 (0%)	1/34 (3%)	5/33 (15%)
Life Table Tests (d)	P=0.030	P = 0.735N	P = 0.080
Incidental Tumor Tests (d)	P = 0.025	P = 0.717	P = 0.062
Cochran-Armitage Trend Test (d)	P=0.019		
Fisher Exact Tests		P=0.747	P = 0.047
ancreatic Islets: Islet Cell Adenoma			
Overall Rates (a)	3/47 (6%)	5/48 (10%)	1/45 (90)
			1/45 (2%)
Adjusted Rates (b)	10.3%	13.3%	3.0%
Terminal Rates (c)	3/29 (10%)	3/34 (9%)	1/33 (3%)
Life Table Tests (d)	P = 0.215N	P = 0.442	P = 0.259N
Incidental Tumor Tests (d)	P = 0.243N	P = 0.403	P = 0.259N
Cochran-Armitage Trend Test (d)	P = 0.280N		
Fisher Exact Tests		P=0.369	P = 0.325N
ancreatic Islets: Islet Cell Adenoma or	Carcinoma		
Overall Rates (a)	4/47 (9%)	5/48 (10%)	2/45 (4%)
Adjusted Rates (b)	12.5%	13.3%	5.4%
Terminal Rates (c)	3/29 (10%)	3/34 (9%)	1/33 (3%)
Life Table Tests (d)	P = 0.232N	P = 0.586	P = 0.288N
Incidental Tumor Tests (d)	P = 0.232N P = 0.283N		
		P=0.507	P=0.329N
Cochran-Armitage Trend Test (d) Fisher Exact Tests	P = 0.301 N	P = 0.514	P=0.359N

### TABLE E1. ANALYSIS OF PRIMARY TUMORS IN MALE RATS IN THE TWO-YEAR FEED STUDY OF 8-HYDROXYQUINOLINE (Continued)

	Control	1, <b>500 ppm</b>	3,000 ppm
Mammary Gland: Fibroadenoma		4 <u></u>	·····
Overall Rates (a)	2/50 (4%)	3/50 (6%)	4/50 (8%)
Adjusted Rates (b)	6.9%	8.2%	10.6%
Terminal Rates (c)	2/29 (7%)	2/34 (6%)	2/33 (6%)
Life Table Tests (d)	P = 0.312	P = 0.570	P = 0.394
Incidental Tumor Tests (d)	P = 0.294	P = 0.558	P = 0.370
Cochran-Armitage Trend Test (d)	P = 0.264		
Fisher Exact Tests		P = 0.500	P=0.339
Preputial Gland: Carcinoma			
Overall Rates (a)	1/50 (2%)	3/50 (6%)	1/50 (2%)
Adjusted Rates (b)	2.7%	8.4%	3.0%
Terminal Rates (c)	0/29 (0%)	2/34 (6%)	1/33 (3%)
Life Table Tests (d)	P = 0.566N	P=0.364	P = 0.734N
Incidental Tumor Tests (d)	P = 0.583N	P=0.333	P = 0.746N
Cochran-Armitage Trend Test (d)	P = 0.610		
Fisher Exact Tests		P=0.309	P=0.753
Preputial Gland: Adenoma or Carcino	ma		
Overall Rates (a)	2/50 (4%)	4/50 (8%)	1/50 (2%)
Adjusted Rates (b)	6.1%	11.2%	3.0%
Terminal Rates (c)	1/29 (3%)	3/34 (9%)	1/33 (3%)
Life Table Tests (d)	P = 0.353N	P = 0.412	P = 0.458N
Incidental Tumor Tests (d)	P = 0.367N	P=0.387	P = 0.470N
Cochran-Armitage Trend Test (d)	P = 0.406N		
Fisher Exact Tests		P=0.339	P = 0.500N
Festis: Interstitial Cell Tumor			
Overall Rates (a)	39/47 (83%)	42/50 (84%)	44/48 (92%)
Adjusted Rates (b)	88.5%	97.6%	100.0%
Terminal Rates (c)	24/29 (83%)	33/34 (97%)	33/33 (100%)
Life Table Tests (d)	P=0.526	P = 0.364N	P=0.565
Incidental Tumor Tests (d)	P=0.284	P=0.610N	P=0.315
Cochran-Armitage Trend Test (d)	P = 0.140		
Fisher Exact Tests		P=0.554	P = 0.167

#### TABLE E1. ANALYSIS OF PRIMARY TUMORS IN MALE RATS IN THE TWO-YEAR FEED **STUDY OF 8-HYDROXYQUINOLINE (Continued)**

(a) Number of tumor-bearing animals/number of animals examined at the site
(b) Kaplan-Meier estimated tumor incidence at the end of the study after adjusting for intercurrent mortality

(c) Observed tumor incidence at terminal kill

(d) Beneath the control incidence are the P values associated with the trend test. Beneath the dosed group incidence are the P values corresponding to pairwise comparisons between that dosed group and the controls. The life table analysis regards tumors in animals dying prior to terminal kill as being (directly or indirectly) the cause of death. The incidental tumor test regards these lesions as nonfatal. The Cochran-Armitage and Fisher's exact test compare directly the overall incidence rates. A negative trend or lower incidence in a dosed group is indicated by (N).

(e) No P value is presented because no tumors were observed in the 1,500 ppm and control groups.

	Control	1,500 ppm	3,000 ppm
Hematopoietic System: Mononuclear	Cell Leukemia		<u></u>
Overall Rates (a)	6/50 (12%)	3/50 (6%)	9/50 (18%)
Adjusted Rates (b)	13.5%	7.2%	21.1%
Terminal Rates (c)	2/37 (5%)	2/40 (5%)	5/37 (14%)
Life Table Tests (d)	P = 0.211	P = 0.240N	P = 0.276
Incidental Tumor Tests (d)	P = 0.240	P = 0.240 N P = 0.299 N	P = 0.276 P = 0.345
		P=0.2991	P=0.345
Cochran-Armitage Trend Test (d)	P = 0.221	D-0.944N	D 0 999
Fisher Exact Tests		P = 0.244N	P = 0.288
iver: Neoplastic Nodule			
Overall Rates (a)	3/50 (6%)	2/50 (4%)	4/49 (8%)
Adjusted Rates (b)	8.1%	5.0%	10.8%
Terminal Rates (c)	3/37 (8%)	2/40 (5%)	4/37 (11%)
Life Table Tests (d)	P = 0.415	P = 0.464N	P = 0.500
Incidental Tumor Tests (d)	P = 0.415	P = 0.464N	P = 0.500
Cochran-Armitage Trend Test (d)	P = 0.407		<b>.</b>
Fisher Exact Tests		P = 0.500 N	P = 0.489
iven Neonlastia Nedule en Carainar			
iver: Neoplastic Nodule or Carcinon Overall Rates (a)		9/50 (494)	A/AD (900)
	4/50 (8%)	2/50 (4%) 5.0%	4/49 (8%)
Adjusted Rates (b)	10.8%	5.0% 2/40 (5%)	10.8%
Terminal Rates (c)	4/37 (11%)	2/40 (5%)	4/37 (11%)
Life Table Tests (d)	P = 0.581	P = 0.301N	P=0.645
Incidental Tumor Tests (d)	P = 0.581	P = 0.301N	P = 0.645
Cochran-Armitage Trend Test (d)	P = 0.569	-	
Fisher Exact Tests		P = 0.339N	P = 0.631
ituitary: Adenoma Overall Rates (a)	99/47 (40%)	97/40 (550)	DE LAG (EACL)
	23/47 (49%)	27/49 (55%)	25/46 (54%)
Adjusted Rates (b)	55.5%	59.9%	56.2%
Terminal Rates (c)	18/36 (50%)	22/40 (55%)	17/36 (47%)
Life Table Tests (d)	P = 0.356	P = 0.421	P = 0.392
Incidental Tumor Tests (d)	P = 0.246	P = 0.271	P = 0.336
Cochran-Armitage Trend Test (d)	P = 0.337		
Fisher Exact Tests		P = 0.344	P = 0.377
ituitary: Adenoma or Carcinoma	00/15 (10%)	00/10/2522	
Overall Rates (a)	23/47 (49%)	28/49 (57%)	25/46 (54%)
Adjusted Rates (b)	55.5%	62.1%	56.2%
Terminal Rates (c)	18/36 (50%)	23/40 (58%)	17/36 (47%)
Life Table Tests (d)	P = 0.356	P = 0.354	P = 0.392
Incidental Tumor Tests (d)	P = 0.246	P = 0.209	P=0.336
Cochran-Armitage Trend Test (d)	P = 0.336		
Fisher Exact Tests		P = 0.274	P = 0.377
1 1 101			
drenal: Pheochromocytoma	1 (40 (97)		0/10/100
Overall Rates (a)	1/49 (2%)	4/50 (8%)	2/49 (4%)
Adjusted Rates (b)	2.7%	9.4%	5.4%
Terminal Rates (c)	1/37 (3%)	3/40 (7%)	2/37 (5%)
Life Table Tests (d)	P = 0.402	P = 0.204	P = 0.500
Incidental Tumor Tests (d)	P = 0.451	P = 0.278	P = 0.500
Cochran-Armitage Trend Test (d)	P = 0.406		
Fisher Exact Tests		P = 0.187	P = 0.500
hyroid: C-Cell Adenoma	1 (40 (90)	D/FA ( 4~~ \	F/16 /16 6
Overall Rates (a)	1/48 (2%)	2/50 (4%)	5/49 (10%)
Adjusted Rates (b)	2.2%	4.8%	13.3%
Terminal Rates (c)	0/37 (0%)	1/40 (3%)	4/36 (11%)
Life Table Tests (d)	P = 0.054	P = 0.501	P=0.097
Incidental Tumor Tests (d)	P = 0.041	P=0.350	P = 0.076
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## TABLE E2. ANALYSIS OF PRIMARY TUMORS IN FEMALE RATS IN THE TWO-YEAR FEEDSTUDY OF 8-HYDROXYQUINOLINE

### 8-Hydroxyquinoline, NTP TR 276

	Control	1,500 ppm	3,000 ppm
Fhyroid: C-Cell Adenoma or Carcino	ma		
Overall Rates (a)	3/48 (6%)	2/50 (4%)	6/49 (12%)
Adjusted Rates (b)	7.5%	4.8%	16.0%
Terminal Rates (c)	2/37 (5%)	1/40 (3%)	5/36 (14%)
Life Table Tests (d)	P = 0.154	P = 0.485N	P = 0.227
Incidental Tumor Tests (d)	P = 0.128	P = 0.602N	P = 0.197
Cochran-Armitage Trend Test (d)	P = 0.175	1 -0.00210	1 -0.10
Fisher Exact Tests	1 = 0.170	P=0.480N	P=0.254
Mammary Gland: Fibroadenoma			
Overall Rates (a)	19/50 (38%)	15/50 (30%)	13/50 (26%)
Adjusted Rates (b)	42.0%	35.7%	29.6%
Terminal Rates (c)	11/37 (30%)	13/40 (33%)	7/37 (1 <b>9%</b> )
Life Table Tests (d)	P = 0.159N	P = 0.232N	P = 0.200N
Incidental Tumor Tests (d)	P = 0.168N	P = 0.391N	P = 0.200 N P = 0.178 N
Cochran-Armitage Trend Test (d)	P = 0.108 N P = 0.118 N	1 -0.00111	1 -0.110M
Fisher Exact Tests	1 -0.11010	P = 0.264N	P = 0.142N
litoral Gland: Adenoma			
Overall Rates (a)	3/50 (6%)	0/50 (0%)	3/50 (6%)
Adjusted Rates (b)	7.7%	0.0%	8.1%
Terminal Rates (c)	2/37 (5%)	0/40 (0%)	3/37 (8%)
Life Table Tests (d)	P = 0.595	P = 0.115N	P = 0.654
Incidental Tumor Tests (d)	P = 0.573	P = 0.151N	P = 0.635
Cochran-Armitage Trend Test (d)	P = 0.601	0.2011	0.000
Fisher Exact Tests		P = 0.121N	P = 0.661
Jterus: Endometrial Stromal Polyp			
Overall Rates (a)	11/49 (22%)	13/49 (27%)	14/49 (29%)
Adjusted Rates (b)	26.8%	30.4%	34.4%
Terminal Rates (c)	8/37 (22%)	11/40 (28%)	11/37 (30%)
Life Table Tests (d)	P = 0.275	P = 0.474	P=0.313
Incidental Tumor Tests (d)	P = 0.324	P = 0.430	P = 0.334
Cochran-Armitage Trend Test (d)	P = 0.282		
Fisher Exact Tests		P=0.407	P=0.322
terus: Endometrial Stromal Polypo	r Sarcoma		
Overall Rates (a)	11/49 (22%)	14/49 (29%)	14/49 (29%)
Adjusted Rates (b)	26.8%	32.0%	34.4%
Terminal Rates (c)	8/37 (22%)	11/40 (28%)	11/37 (30%)
Life Table Tests (d)	P = 0.276	P = 0.387	P = 0.313
Incidental Tumor Tests (d)	P = 0.315	P = 0.316	P = 0.334
Cochran-Armitage Trend Test (d)	P = 0.284		
Fisher Exact Tests		P = 0.322	P = 0.322

### TABLE E2. ANALYSIS OF PRIMARY TUMORS IN FEMALE RATS IN THE TWO-YEAR FEED STUDY OF 8-HYDROXYQUINOLINE (Continued)

(a) Number of tumor-bearing animals/number of animals examined at the site

(b) Kaplan-Meier estimated tumor incidence at the end of the study after adjusting for intercurrent mortality

(c) Observed tumor incidence at terminal kill

(c) Observed tumor incidence at terminal kill (d) Beneath the control incidence are the P values associated with the trend test. Beneath the dosed group incidence are the P values corresponding to pairwise comparisons between that dosed group and the controls. The life table analysis regards tumors in animals dying prior to terminal kill as being (directly or indirectly) the cause of death. The incidental tumor test regards these lesions as nonfatal. The Cochran-Armitage and Fisher's exact test compare directly the overall incidence rates. A negative trend or lower incidence in a dosed group is indicated by (N).

	Control	1, <b>500</b> ppm	3,000 ppm
Subcutaneous Tissue: Sarcoma			
Overall Rates (a)	6/50 (12%)	7/50 (14%)	9/50 (18%)
Adjusted Rates (b)	16.9%	16.3%	23.0%
Terminal Rates (c)	2/29 (7%)	2/35 (6%)	6/35 (17%)
Life Table Tests (d)	P = 0.353	P = 0.568N	P = 0.419
Incidental Tumor Tests (d)	P = 0.195	P = 0.581	P = 0.282
Cochran-Armitage Trend Test (d)	P = 0.240	1 - 0.001	1 - 0.202
Fisher Exact Tests	1 - 0.240	P = 0.500	P=0.288
ntegumentary System: Sarcoma			
Overall Rates (a)	6/50 (12%)	8/50 (16%)	9/50 (18%)
Adjusted Rates (b)	16.9%	18.3%	23.0%
Terminal Rates (c)	2/29 (7%)	2/35 (6%)	6/35 (17%)
Life Table Tests (d)	P = 0.360	P = 0.558	P=0.419
Incidental Tumor Tests (d)	P = 0.197	P = 0.484	P = 0.282
Cochran-Armitage Trend Test (d)	P = 0.244	1 - 0:404	1 - 0.202
Fisher Exact Tests	1 1.444	P=0.387	P=0.288
ubcutaneous Tissue: Fibroma or Fib	rosarcoma		
Overall Rates (a)	1/50 (2%)	1/50 (2%)	3/50 (6%)
Adjusted Rates (b)	3.4%	2.9%	7.5%
Terminal Rates (c)	3.4% 1/29 (3%)	2.5% 1/35 (3%)	1/35 (3%)
Life Table Tests (d)	P = 0.239	P = 0.720N	• •
			P=0.359
Incidental Tumor Tests (d) Cochran-Armitage Trend Test (d)	P=0.213 P=0.202	P = 0.720N	P=0.315
Fisher Exact Tests		P=0.753	P=0.309
ubcutaneous Tissue: Fibroma, Fibro	sarcoma or Sarcoma		
Overall Rates (a)	7/50 (14%)	8/50 (16%)	12/50 (24%)
Adjusted Rates (b)	20.0%	18.8%	29.2%
Terminal Rates (c)	3/29 (10%)	3/35 (9%)	7/35 (20%)
Life Table Tests (d)	P = 0.217	P=0.544N	P=0.276
Incidental Tumor Tests (d)	P=0.096	P=0.597	P=0.151
Cochran-Armitage Trend Test (d)	P=0.121		
Fisher Exact Tests		P=0.500	P=0.154
ntegumentary System: Fibroma, Saro	coma or Fibrosarcom		
Overall Rates (a)	7/50 (14%)	- 9/50 (18%)	12/50 (24%)
Adjusted Rates (b)	20.0%	20.8%	29.2%
Terminal Rates (c)	3/29 (10%)	3/35 (9%)	7/35 (20%)
Life Table Tests (d)	P = 0.224	P = 0.574	P = 0.276
Incidental Tumor Tests (d)	P = 0.224 P = 0.097	P = 0.507	P = 0.276 P = 0.151
Cochran-Armitage Trend Test (d)	P = 0.097 P = 0.124	1 -0.007	1 -0.101
Fisher Exact Tests	1 - 0.124	P=0.393	P=0.154
ung: Alveolar/Bronchiolar Adenoma	L .		
Overall Rates (a)	5/50 (10%)	9/49 (18%)	9/50 (18%)
Adjusted Rates (b)	15.8%	24.7%	22.6%
Terminal Rates (c)	4/29 (14%)	8/35 (23%)	5/35 (14%)
Life Table Tests (d)	P=0.269	P = 0.312	P = 0.305
Incidental Tumor Tests (d)	P = 0.209 P = 0.217	P = 0.312 P = 0.250	P = 0.305 P = 0.232
		r = 0.200	r = 0.232
Cochran-Armitage Trend Test (d) Fisher Exact Tests	P = 0.166	P=0.183	P=0.194
ung: Alveolar/Bronchiolar Adenoma	or Caroinomo		
Overall Rates (a)	6/50 (12%)	10/40 (904)	10/50 (904)
Adjusted Rates (b)		10/49 (20%) 27 Act	10/50 (20%) 25.14
• • • • • •	19.1% 5/20 (17%)	27.4%	25.1%
Terminal Rates (c)	5/29 (17%) D = 0.295	9/35 (26%) D=0 220	6/35 (17%) D=0 222
Life Table Tests (d)	P = 0.295	P = 0.339	P = 0.332
Incidental Tumor Tests (d)	P = 0.243	P = 0.278	P = 0.261
Cochran-Armitage Trend Test (d)	P = 0.178	P=0.194	P=0.207
Fisher Exact Tests			

### TABLE E3. ANALYSIS OF PRIMARY TUMORS IN MALE MICE IN THE TWO-YEAR FEED STUDYOF 8-HYDROXYQUINOLINE

	Control	1,500 ppm	<b>3,000 ppm</b>
lematopoletic System: Malignant Lym	nhoma Lymnhooyti	с Тупе	
Overall Rates (a)	0/50 (0%)	3/50 (6%)	0/50 (0%)
Adjusted Rates (b)	0.0%	8.6%	0.0%
Terminal Rates (c)	0/29 (0%)	3/35 (9%)	0/35 (0%)
Life Table Tests (d)	P = 0.592N	P = 0.156	(e) (a)
Incidental Tumor Tests (d)	P = 0.592N	P = 0.156	(e)
Cochran-Armitage Trend Test (d) Fisher Exact Tests	P = 0.640	P = 0.121	(e)
			(4)
ematopoietic System: Lymphoma, All			
Overall Rates (a)	12/50 (24%)	6/50 (12%)	6/50 (12%)
Adjusted Rates (b)	34.1%	16.5%	16.3%
Terminal Rates (c)	7/29 (24%)	5/35 (14%)	5/35 (14%)
Life Table Tests (d)	P=0.032N	P=0.046N	P = 0.052N
Incidental Tumor Tests (d)	P = 0.047 N	P = 0.055N	P = 0.073N
Cochran-Armitage Trend Test (d)	P=0.067N		
Fisher Exact Tests		P = 0.097 N	P=0.097N
rculatory System: Hemangioma	7/50 (14%)	1/80 (04.)	0/E0 (04)
Overall Rates (a)		1/50 (2%)	0/50 (0%)
Adjusted Rates (b)	21.0%	2.9%	0.0%
Terminal Rates (c)	4/29 (14%)	1/35 (3%)	0/35 (0%)
Life Table Tests (d)	P<0.001N	P=0.019N	P = 0.006N
Incidental Tumor Tests (d)	P = 0.002N P = 0.002N	P = 0.026N	P=0.010N
Cochran-Armitage Trend Test (d) Fisher Exact Tests	P = 0.002N	P=0.030N	P = 0.006N
rculatory System: Hemangiosarcoms			
Overall Rates (a)	3/50 (6%)	1/50 (2%)	1/50 (2%)
Adjusted Rates (b)	9.4%	2.3%	2.1%
Terminal Rates (c)	2/29 (7%)	0/35 (0%)	0/35 (0%)
Life Table Tests (d)	P=0.167N	P=0.233N	P=0.261N
Incidental Tumor Tests (d)	P=0.237N	P=0.272N	P=0.343N
Cochran-Armitage Trend Test (d)	P=0.202N		
Fisher Exact Tests		P=0.309N	P=0.309N
rculatory System: Hemangioma or H		0/20 (4/4)	1/20/001
Overall Rates (a)	10/50 (20%)	2/50 (4%)	1/50 (2%)
Adjusted Rates (b)	29.3%	5.1%	2.1%
Terminal Rates (c)	6/29 (21%)	1/35 (3%)	0/35 (0%)
Life Table Tests (d)	P<0.001N	P = 0.007 N	P = 0.003N
Incidental Tumor Tests (d)	P = 0.002N	P=0.010N	P=0.006N
Cochran-Armitage Trend Test (d)	P = 0.001N		
Fisher Exact Tests		P = 0.014N	P=0.004N
er: Hepatocellular Adenoma			
Overall Rates (a)	9/50 (18%)	8/50 (16%)	14/50 (28%)
Adjusted Rates (b)	27.9%	21.7%	36,5%
Terminal Rates (c)	27,9% 7/29(24%)	7/35 (20%)	30.5% 11/35(31%)
Life Table Tests (d)	P = 0.245	P = 0.338N	P = 0.319
Incidental Tumor Tests (d)	P=0.178	P = 0.477N	P = 0.240
Cochran-Armitage Trend Test (d) Fisher Exact Tests	P=0.133	P = 0.500 N	P≈0.171
er: Hepatocellular Carcinoma		10 10 a. 1 a. 1 a. 1	
Deserve II Deserve (a)	5/50 (10%)	7/50 (14%)	3/50 (6%)
	16.0%	20.0%	7.7%
Overall Rates (a) Adjusted Rates (b)			
		7/35 (20%)	1/35 (3%)
Adjusted Rates (b)	4/29 (14%)	7/35(20%) P≖0.514	1/35(3%) P=0.273N
Adjusted Rates (b) Terminal Rates (c) Life Table Tests (d)	<b>4/29</b> (14%) P=0.213N	P=0.514	P = 0.273N
Adjusted Rates (b) Terminal Rates (c)	4/29 (14%)		

### TABLE E3. ANALYSIS OF PRIMARY TUMORS IN MALE MICE IN THE TWO-YEAR FEED STUDY OF 8-HYDROXYQUINOLINE (Continued)

#### TABLE ES. ANALYSIS OF PRIMARY TUMORS IN MALE MICE IN THE TWO-YEAR FEED STUDY OF S-HYDROXYQUINOLINE (Continued)

	Control	1,500 ppm	3,000 ppm
Liver: Hepatocellular Adenoma or Ca	reinoma	nan yan kanan k	an an an an an an an an an an an an an a
Overall Rates (a)	14/50 (28%)	15/50 (30%)	17/50 (34%)
Adjusted Rates (b)	42.5%	41.3%	42.2%
Terminal Rates (c)	11/29 (38%)	14/35 (40%)	12/35 (34%)
Life Table Tests (d)	P=0.509	P=0.439N	P=0.556
Incidental Tumor Tests (d)	P=0.391	P = 0.598	P=0.424
Cochran-Armitage Trend Test (d)		P=0.090	F = V.949
Fisher Exact Tests	P=0.294	P=0.500	P=0.333
L THUAL THINGLE I ADAR		F = 0.000	r=0.000
Adrenal: Cortical Adenoma			
Overail Rates (a)	1/49 (2%)	4/50 (8%)	2/46 (4%)
Adjusted Rates (b)	3.6%	11.4%	6.1%
Terminal Rates (c)	1/28 (4%)	4/35 (11%)	2/33 (6%)
Life Table Tests (d)	P=0.473	P = 0.251	P=0.558
Incidental Tumor Tests (d)	P=0.473	P = 0.251	P=0.558
Cochran-Armitage Trend Test (d)	P=0.379		
Fisher Exact Tests	1 = 0.010	P = 0.187	P=0.476
Adrenal: Adenoma or Cortical Adeno	ma		
Overall Rates (a)	2/49 (4%)	6/50 (12%)	3/46 (7%)
Adjusted Rates (b)	7.1%	17.1%	9.1%
Terminal Rates (c)	2/28 (7%)	6/35 (17%)	3/33 (9%)
Life Table Tests (d)	P=0.512	P = 0.213	P = 0.575
Incidental Tumor Tests (d)	P = 0.512	P = 0.213	P = 0.575
Cochran-Armitage Trend Test (d)	P=0.389		
Fisher Exact Tests		P=0.141	P=0.470
Adrenal: Pheochromocytoma			
Overall Rates (a)	2/49 (4%)	3/50 (6%)	0/46 (0%)
Adjusted Rates (b)	7.1%	7.8%	0.0%
Terminal Rates (c)	2/28 (7%)	1/35 (3%)	0/33 (0%)
Life Table Tests (d)	P=0.161N	P = 0.600	P = 0.202N
Incidental Tumor Tests (d)	P=0.178N	P=0.651	P = 0.202N
Cochran-Armitage Trend Test (d)	P=0.216N		
Fisher Exact Tests	a — VIE a VA1	P=0.510	P=0.263N
Harderian Gland: Adenoma			
Overall Rates (a)	1/50 (2%)	4/50 (8%)	1/50 (2%)
Adjusted Rates (b)	3.4%	10.3%	2.9%
Terminal Rates (c)	1/29 (3%)	2/35 (6%)	1/35 (3%)
Life Table Tests (d)	P=0.532N	P=0.252	P=0.720N
Incidental Tumor Tests (d)	P=0.555N	P=0.286	P=0.720N
Cochran-Armitage Trend Test (d)	P=0.601	41244	
Fisher Exact Tests		P = 0.181	P=0.753
Harderian Gland: Adenoma or Cystad	enoma		
Overall Rates (a)	2/50 (4%)	4/50 (8%)	2/50 (4%)
Adjusted Rates (b)	6.9%	10.3%	5.7%
Terminal Rates (c)	2/29 (7%)	2/35 (6%)	2/35 (6%)
Life Table Tests (d)	P=0.506N	P = 0.438	P = 0.626N
Incidental Tumor Tests (d)	P = 0.525N	P=0.479	P=0.626N
Cochran-Armitage Trend Test (d)	P=0.588		
Fisher Exact Tests		P=0.339	P=0.691

(e) No P value is presented because no tumors were observed in the 3,000 ppm and control groups.

<sup>(</sup>a) Number of tumor-bearing animals/number of animals examined at the site

<sup>(</sup>b) Kaplan-Meier estimated tumor incidence at the end of the study after adjusting for intercurrent mortality

<sup>(</sup>c) Observed tumor incidence at terminal kill

<sup>(</sup>d) Beneath the control incidence are the P values associated with the trend test. Beneath the dosed group incidence are the P values corresponding to pairwise comparisons between that dosed group and the controls. The life table analysis regards tumors in animals dying prior to terminal kill as being (directly or indirectly) the cause of death. The incidental tumor test regards these lesions as nonfatal. The Cochran-Armitage and Fisher's exact test compare directly the overall incidence rates. A negative trend or lower incidence in a dosed group is indicated by (N).

## TABLE E4. ANALYSIS OF PRIMARY TUMORS IN FEMALE MICE IN THE TWO-YEAR FEED STUDYOF 8-HYDROXYQUINOLINE

	Control	1, <b>500 ppm</b>	3,000 ppm
ung: Alveolar/Bronchiolar Adenom: Overall Rates (a)		5/50 (10%)	4/50 (8%)
Adjusted Rates (b)	1/ <b>49</b> (2%) 2.1%	17.0%	12.4%
Terminal Rates (c)	2.1% 0/23 (0%)	4/27 (15%)	3/31 (10%)
Life Table Tests (d)	P = 0.250	P = 0.145	P = 0.254
Incidental Tumor Tests (d)	P = 0.210	P = 0.057	P = 0.211
Cochran-Armitage Trend Test (d)	P = 0.210 P = 0.164	F = 0.007	1 -0.211
Fisher Exact Tests	1 - 0.104	P = 0.107	P=0.187
ung: Alveolar/Bronchiolar Adenom	a or Carcinoma		
Overall Rates (a)	2/49 (4%)	5/50 (10%)	5/50 (10%)
Adjusted Rates (b)	6.3%	17.0%	15.5%
Terminal Rates (c)	1/23 (4%)	4/27 (15%)	4/31 (13%)
Life Table Tests (d)	P=0.292	P=0.286	P = 0.325
Incidental Tumor Tests (d)	P=0.251	P=0.161	P = 0.283
Cochran-Armitage Trend Test (d)	P = 0.186		
Fisher Exact Tests		P=0.226	P=0.226
ematopoietic System: Malignant Ly		: Туре	
Overall Rates (a)	1/50 (2%)	1/50 (2%)	6/50 (12%)
Adjusted Rates (b)	4.2%	3.4%	16.4%
Terminal Rates (c)	1/24 (4%)	0/27 (0%)	4/31 (13%)
Life Table Tests (d)	P=0.039	P = 0.731N	P=0.096
Incidental Tumor Tests (d)	P=0.039	P=0.683N	P=0.094
Cochran-Armitage Trend Test (d)	P=0.023		
Fisher Exact Tests		P=0.753N	P = 0.056
ematopoietic System: Lymphoma, A			
Overall Rates (a)	13/50 (26%)	13/50 (26%)	12/50 (24%)
Adjusted Rates (b)	45.1%	37.5%	32.7%
Terminal Rates (c)	9/24 (38%)	7/27 (26%)	8/31 (26%)
Life Table Tests (d)	P = 0.241 N	P = 0.424N	P = 0.282N
Incidental Tumor Tests (d)	P=0.389N	P=0.408N	P = 0.407 N
Cochran-Armitage Trend Test (d)	P = 0.454N		<b>_</b>
Fisher Exact Tests		P=0.590N	P = 0.500N
rculatory System: Hemangioma			1 10 10 1
Overall Rates (a)	0/50 (0%)	4/50 (8%)	1/50 (2%)
Adjusted Rates (b)	0.0%	11.5%	3.2%
Terminal Rates (c)	0/24 (0%)	1/27 (4%)	1/31 (3%)
Life Table Tests (d)	P = 0.467	P = 0.096	P = 0.551
Incidental Tumor Tests (d)	P = 0.351	P = 0.132	P = 0.551
Cochran-Armitage Trend Test (d) Fisher Exact Tests	P=0.390	P=0.059	P=0.500
		1.774	
irculatory System: Hemangioma or I		5/50 /100	1/EA (00)
Overall Rates (a)	0/50 (0%)	5/50 (10%)	1/50 (2%)
Adjusted Rates (b)	0.0%	14.9%	3.2%
Terminal Rates (c)	0/24 (0%)	2/27 (7%) D=0.055	1/31 (3%) D=0.551
Life Table Tests (d)	P = 0.487	P = 0.055	P = 0.551
Incidental Tumor Tests (d)	P=0.384	P=0.075	P=0.551
Cochran-Armitage Trend Test (d) Fisher Exact Tests	P=0.399	P=0.028	P=0.500
ver: Hepatocellular Adenoma			
Overall Rates (a)	2/49 (4%)	1/50 (2%)	4/49 (8%)
Adjusted Rates (b)	2/49 (4%) 6.6%	3.7%	4/49(870) 12.9%
Adjusted Rates (D) Terminal Rates (C)	0.0% 1/24 (4%)	3.770 1/27 (496)	12.9% 4/31 (13%)
Life Table Tests (d)	P = 0.320	P=0.457N	P = 0.441
Incidental Tumor Tests (d)	P = 0.320 P = 0.295	P = 0.437 N P = 0.534 N	P = 0.441 P = 0.405
		L - 0.00414	F = 0.400
Cochran-Armitage Trend Test (d)	P=0.238		

8-Hydroxyquinoline, NTP TR 276

### TABLE E4. ANALYSIS OF PRIMARY TUMORS IN FEMALE MICE IN THE TWO-YEAR FEED STUDY OF 8-HYDROXYQUINOLINE (Continued)

	Control	1, <b>500 ppm</b>	3,000 ppm
Liver: Hepatocellular Carcinoma			
Overall Rates (a)	3/49 (6%)	1/50 (2%)	0/49 (0%)
Adjusted Rates (b)	10.6%	3.7%	0.0%
Terminal Rates (c)	2/24 (8%)	1/27 (4%)	0/31 (0%)
Life Table Tests (d)	P = 0.043N	P = 0.265N	P = 0.094N
Incidental Tumor Tests (d)	P = 0.055N	P = 0.320N	P = 0.113N
Cochran-Armitage Trend Test (d)	P = 0.060 N		
Fisher Exact Tests		P = 0.301 N	P = 0.121N
Liver: Hepatocellular Adenoma or Ca	ircinoma		
Overall Rates (a)	5/49 (10%)	2/50 (4%)	<b>4/49</b> (8%)
Adjusted Rates (b)	16.8%	7.4%	12.9%
Terminal Rates (c)	3/24 (13%)	2/27 (7%)	4/31 (13%)
Life Table Tests (d)	P=0.310N	P = 0.173N	P=0.376N
Incidental Tumor Tests (d)	P = 0.354N	P = 0.241N	P=0.431N
Cochran-Armitage Trend Test (d)	P = 0.424N		
Fisher Exact Tests		P=0.210N	P = 0.500 N
Pituitary: Adenoma			
Overall Rates (a)	12/40 (30%)	14/44 (32%)	11/37 (30%)
Adjusted Rates (b)	40.7%	47.3%	40.4%
Terminal Rates (c)	7/22 (32%)	10/24 (42%)	10/26 (38%)
Life Table Tests (d)	P = 0.288N	P = 0.550	P = 0.346N
Incidental Tumor Tests (d)	P = 0.451N	P = 0.524	P = 0.518N
Cochran-Armitage Trend Test (d)	P = 0.541 N		
Fisher Exact Tests		P = 0.523	P = 0.589N
Thyroid: Follicular Cell Adenoma		••••	
Overall Rates (a)	4/48 (8%)	2/48 (4%)	2/47 (4%)
Adjusted Rates (b)	15.7%	7.4%	6.5%
Terminal Rates (c)	2/23 (9%)	2/27 (7%)	2/31 (6%)
Life Table Tests (d)	P = 0.159N	P = 0.270N	P = 0.224N
Incidental Tumor Tests (d)	P = 0.190N	P = 0.219N	P = 0.305N
Cochran-Armitage Trend Test (d)	P = 0.260N	<b>D</b>	5
Fisher Exact Tests		P=0.339N	P=0.349N
Thyroid: Follicular Cell Adenoma or		0/40 / 40	0/45 (40)
Overall Rates (a)	5/48 (10%)	2/48 (4%)	2/47 (4%)
Adjusted Rates (b)	19.7%	7.4%	6.5%
Terminal Rates (c)	3/23 (13%)	2/27 (7%)	2/31 (6%)
Life Table Tests (d)	P = 0.079N	P=0.160N	P = 0.123N
Incidental Tumor Tests (d)	P = 0.095N	P = 0.125N	P = 0.176N
Cochran-Armitage Trend Test (d) Fisher Exact Tests	P = 0.152N	P = 0.218N	P=0.226N

(a) Number of tumor-bearing animals/number of animals examined at the site

(b) Kaplan-Meier estimated tumor incidence at the end of the study after adjusting for intercurrent mortality

(c) Observed tumor incidence at terminal kill

(d) Beneath the control incidence are the P values associated with the trend test. Beneath the dosed group incidence are the P values corresponding to pairwise comparisons between that dosed group and the controls. The life table analysis regards tumors in animals dying prior to terminal kill as being (directly or indirectly) the cause of death. The incidental tumor test regards these lesions as nonfatal. The Cochran-Armitage and Fisher's exact test compare directly the overall incidence rates. A negative trend or lower incidence in a dosed group is indicated by (N).

### APPENDIX F

# HISTORICAL INCIDENCES OF TUMORS IN F344/N RATS AND B6C3F1 MICE RECEIVING NO TREATMENT

#### TABLE F1. HISTORICAL INCIDENCE OF HEMATOPOIETIC SYSTEM TUMORS IN MALE F344/N RATS RECEIVING NO TREATMENT (a)

Study	Incidence of Leukemia in Controls	
Historical Incidence at EG&G Mason I	lesearch Institute (b)	
1,4'-Methylenedianiline · 2 HCl	12/50	
Monuron	5/50	
-Hydroxyquinoline	17/50	
Di(2-ethylhexyl)phthalate	13/50	
Di(2-ethylhexyl)adipate	9/49	
Juar gum	13/50	
ocust bean gum	21/50	
Jum arabic	10/50	
\gar	9/50	
ara gum	14/50	
2,6-Toluenediamine · 2 HCl	9/50	
,4'-Oxydianiline	23/50	
-Biphenylamine · HCl	15/50	
Cinnamyl anthranilate	(b) 0/50	
TOTAL	170/699 (24.3%)	
SD (c)	11.96%	
lange (d)		
High	23/50	
Low	(e) 0/50	
Overall Historical Incidence at All Lab	oratories	
TOTAL	648/2,320 (27.9%)	
SD (c)	10.67%	
lange (d)		
High	23/50	
Low	(f) 0/50	

(a) Data as of March 16, 1983, for NTP carcinogenesis studies of at least 104 weeks.
(b) 7/50 malignant lymphoma were observed, possibly representing a difference in nomenclature.
(c) Standard deviation

(d) Range and SD are presented for groups of 35 or more animals.
(e) Second lowest: 9/50

(f) Second lowest: 5/50

### TABLE F2. HISTORICAL INCIDENCE OF LIVER TUMORS IN MALE F344/N RATS RECEIVING NO TREATMENT (a)

	Incidence in Controls		
Study	Neoplastic Nodule	Hepatocellular Carcinoma	Neoplastic Nodule or Hepatocellular Carcinoma
Historical Incidence at EG&G Mason F	lesearch Institute		
4,4'-Methylenedianiline · 2HCl	1/50 (2%)	0/50 (0%)	1/50 (2%)
Monuron	1/50 (2%)	0/50 (0%)	1/50(0%)
3-Hydroxyquinoline	6/49 (12%)	1/49 (2%)	7/49 (14%)
Di(2-ethylhexyl)phthalate	2/50 (4%)	1/50 (2%)	3/50(6%)
Di(2-ethylhexyl)adipate	2/49 (4%)	0/49 (0%)	2/49(0%)
Guar gum	2/50 (4%)	1/50 (2%)	3/50(6%)
ocust bean gum	0/50 (0%)	1/50 (2%)	1/50(2%)
Jum arabic	3/49 (6%)	1/49 (2%)	4/49(8%)
Agar	0/50 (0%)	0/50 (0%)	0/50(0%)
fara gum	1/49 (2%)	0/49 (2%)	1/49 (2%)
.6-Toluenediamine · 2HCl	0/50 (0%)	0/50 (0%)	0/50 (0%)
4'-Oxydianiline	1/50 (2%)	0/50 (0%)	1/50 (2%)
Biphenylamine · HCl	0/49 (0%)	0/49 (0%)	0/49 (0%)
Cinnamyl anthranilate	1/48 (2%)	0/48 (0%)	1/48 (0%)
TOTAL	20/693 (3%)	5/693 (1%)	25/693 (4%)
SD (b)	3.27%	1.00%	3.93%
Range (c)	0%-8%	0%-2%	0%-14%
Overall Historical Incidence at All Lab	oratories		
TOTAL	78/2,306 (3%)	18/2,306 (1%)	96/2,306(4%)
SD (b)	4.47%	1.16%	5.06%
Range (c)	0%-12%	0%-4%	0%-14%

(a) Data as of March 16, 1983, for studies of at least 104 weeks

(b) Standard deviation
(c) Range and SD are presented for groups of 35 or more animals.

Incidence in Controle			
Study	Alveolar/Bronchiolar Adenoma	Alveolar/Bronchiolar Carcinoma	Alveolar/Bronchiolar Adenoma or Carsinoma
fistorical Incidence at EG	AG Mason Research Inst	ltute	
,4'-Methylenedianiline - 2HC	2/50	0/50	2/50
lonuron	1/50	0/50	1/50
-Hydroxyquinoline	0/50	0/50	0/50
M(2-ethylhexyl)phthalate	1/50	0/50	1/50
M(2-ethyihexyl)adipate	0/49	0/49	0/49
huar gum	0/50	1/50	1/50
ocust bean gum	0/50	0/50	0/50
ium arabic	0/50	0/50	0/50
lgar	0/50	0/50	0/50
ara gum	2/50	0/50	2/50
6-Toluenediamine dihydroch	loride 3/49	0/49	3/49
4'-Oxydianiline	1/50	0/50	1/50
-Biphenylamine · HCl	2/50	0/50	2/50
linnamyl anthranilate	0/48	0/48	0/48
TOTAL	12/696 (1.7%)	1/696 (0,1%)	13/696 (1.9%)
SD (b)	2.07%	0.53%	2.01%
lange (c)			
High	3/49	1/50	3/49
Low	0/50	0/50	0/50
overall Historical Incidence	•		
TOTAL	36/2,357 (1.5%)	23/2,357 (1.0%)	57/2,357 (2.4%)
SD (b)	2.05%	1.71%	2.35%
lange (c)			
High	3/47	3/50	4/49
Low	0/89	0/50	0/50

### TABLE F3. HISTORICAL INCIDENCE OF LUNG TUMORS IN MALE F344/N RATS RECEIVING NO TREATMENT (a)

(a) Data as of March 16, 1983, for studies of at least 104 weeks
(b) Standard deviation
(c) Range and SD are presented for groups of 35 or more animals.

	Incidence in Controls C-Cell Adenoma C-Cell Carcinoma C-Cell Adenom		
Study	C-Cell Adenoma	C-Cell Carcinoma	C-Cell Adenoms or Carcinoma
listorical Incidence at EG&G Mas	on Research Institute		
4'-Methylenedianiline · 2HCl	1/49	2/49	3/49
fonuron	4/49	6/49	10/49
-Hydroxyquinoline	1/50	0/50	1/50
i(2-ethylhexyl)phthalate	1/48	4/48	5/48
N(2-ethylhexyl)adipate	1/49	2/49	3/49
uar gum	0/50	1/50	1/50
ocust bean gum	1/49	4/49	5/49
um arabic	3/47	0/47	3/47
gar	0/49	2/49	2/49
ara gum	3/45	1/45	4/45
6-Toluenediamine dihydrochloride	5/44	2/44	7/44
4'-Oxydianiline	3/46	2/46	5/46
Biphenylamine · HCl	2/47	1/47	3/47
innamyl anthranilate	2/42	0/42	2/42
TOTAL	27/664 (4.1%)	27/664 (4.1%)	54/664 (8.1%)
SD (b)	3.31%	3.54%	5.16%
lange (c)			
High	5/44	6/49	10/49
Low	0/50	0/50	1/50
Verall Historical Incidence			
TOTAL	121/2,282 (5.3%)	84/2,282 (3.7%)	203/2,282 (8.9%)
SD (b)	4.49%	3.31%	4.99%
lange (c)			
High	9/50	6/49	10/49
Low	0/89	0/52	0/47

## TABLE F4. HISTORICAL INCIDENCE OF THYROID GLAND TUMORS IN MALE F344/N RATS RECEIVING NO TREATMENT(a)

(a) Data as of March 16, 1983, for studies of at least 104 weeks
(b) Standard deviation
(c) Range and SD are presented for groups of 35 or more animals.

	Incidence in Controls		
Study	C-Cell Adenoma	C-Cell Carcinoma	C-Cell Adenoma or Carcinoma
Historical Incidence at EG&G Masc	on Research Institute		
4,4'-Methylenedianiline · 2HCl	0/47	1/47	1/47
Monuron	2/49	0/49	2/49
B-Hydroxyquinoline	1/48	2/48	3/48
Butyl benzyl phthalate	0/47	2/47	2/47
Di(2-ethylhexyl)phthalate	0/48	1/48	1/48
Di(2-ethylhexyl)adipate	1/50	3/50	4/50
Guar gum	2/48	1/48	3/48
ocust bean gum	1/50	5/50	6/50
Gum arabic	3/49	1/49	4/49
Agar	0/49	4/49	4/49
l'ara gum	3/46	1/46	4/46
6-Toluenediamine dihydrochloride	2/49	1/49	3/49
.4'-Oxydianiline	2/49	0/49	2/49
2-Biphenylamine · HCl	2/49	3/49	5/49
Cinnamyl anthranilate	2/46	0/46	2/46
TOTAL	21/724 (2.9%)	25/724 (3.5%)	46/724 (6.4%)
SD (b)	2.22%	3.01%	2.88%
lange (c)			
High	3/46	5/50	6/50
Low	0/49	0/49	1/48
Overall Historical Incidence			
TOTAL	119/2,317 (5.1%)	81/2,317 (3.5%)	197/2,317 (8.5%)
SD (b)	4.34%	2.99%	4.74%
Range (c)			
High	8/52	6/48	9/50
Low	0/86	0/52	0/50

## TABLE F5. HISTORICAL INCIDENCE OF THYROID GLAND TUMORS IN FEMALE F344/N RATS RECEIVING NO TREATMENT(a)

(a) Data as of March 16, 1983, for studies of at least 104 weeks (b) Standard deviation

(c) Range and SD are presented for groups of 35 or more animals.

	Incidence in Controls		
Study	Hemangioma	Hemangiosarcoma	Hemangioma or Hemangiosarcoma
Historical Incidence at EG&G M	ason Research Institute		
4,4'-Methylenedianiline • 2HCl	3/49	5/49	7/49
Monuron	0/50	2/50	2/50
8-Hydroxyquinoline	7/50	3/50	10/50
Butyl benzyl phthalate	0/50	1/50	1/50
Di(2-ethylhexyl)phthalate	0/50	1/50	1/50
Di(2-ethylhexyl)adipate	0/50	2/50	2/50
Guar gum	1/50	4/50	5/50
Locust bean gum	1/50	3/50	4/50
Gum arabic	0/49	2/49	2/49
Tara gum	3/50	1/50	4/50
Agar	0/49	1/49	1/49
2,6-Toluenediamine · 2HCl	1/50	0/50	1/50
4,4'-Oxydianiline	0/50	4/50	4/50
2-Biphenylamine · HCl	0/50	0/50	0/50
Cinnamyl anthranilate	1/48	2/48	3/48
TOTAL	17/745 (2.3%)	31/745 (4.2%)	47/745 (6.3%)
SD(b)	3.85%	3.00%	5.36%
Range (c)			
High	7/50	5/49	10/50
Low	0/50	0/50	0/50
Overall Historical Incidence			
TOTAL SD (b)	(d) <b>34/2,395</b> (1.4%) 2.43%	(e) 65/2,395 (2.7%) 2.55%	98/2,395 (4.1%) 3.89%
Range (c)			
High	7/50	5/49	10/50
Low	0/52	0/50	0/50

## TABLE F6. HISTORICAL INCIDENCE OF CIRCULATORY SYSTEM TUMORS IN MALE B6C3F1 MICE RECEIVING NO TREATMENT (a)

(a) Data as of March 16, 1983, for studies of at least 104 weeks
(b) Standard deviation
(c) Range and SD are presented for groups of 35 or more animals.
(d) Includes one diagnosis of angioma
(e) Includes 17 diagnoses of angiosarcoma

	Incidence in	Controls
Study	Malignant Lymphoma	Lymphoma or Leukemia
torical Incidence at EG&G Ma	ason Research Institute (b)	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
'-Methylenedianiline • 2 HCl	10/49	10/49
onuron	3/50	3/50
Iydroxyquinoline	12/50	12/50
yl benzyl phthalate	13/50	14/50
-ethylhexyl)phthalate	8/50	8/50
2-ethylhexyl)adipate	16/50	16/50
r gum	7/50	7/50
ust bean gum	12/50	12/50
n arabic	9/49	9/49
a gum	6/50	6/50
r	2/49	3/49
Foluenediamine · 2 HCl	2/50	2/50
Oxydianiline	9/50	9/50
phenylamine · HCl	6/50	6/50
amyl anthranilate	4/48	4/48
OTAL	119/745 (16%)	121/745 (16.2%)
D (b)	8.43%	8.42%
ge (c)		
High	16/50	16/50
ow	2/50	2/50
rall Historical Incidence		
TOTAL	281/2,395 (11.7%)	298/2,395 (12.4%)
D (b)	6.81%	7.08%
ge (c)		
High	16/50	16/50
Low	1/52	1/52

#### TABLE F7. HISTORICAL INCIDENCE OF HEMATOPOIETIC SYSTEM TUMORS IN MALE B6C3F<sub>1</sub> MICE RECEIVING NO TREATMENT (2)

(a) Data as of March 16, 1983, studies of at least 104 weeks

(b) Standard deviation

(c) Range and SD are presented for groups of 35 or more animals.

	Incidence in Controls		
Study	Hemangioma	Hemangiosarcoma	Hemangioma or Hemangiosarcoma
Historical Incidence at EG&G N	fason Research Institute		
4,4'-Methylenedianiline · 2HCl	2/50	1/50	3/50
Monuron	1/50	1/50	2/50
B-Hydroxyquinoline	0/50	0/50	0/50
Butyl benzyl phthalate	1/50	1/50	2/50
Di(2-ethylhexyl)phthalate	3/50	0/50	3/50
Di(2-ethylhexyl)adipate	0/50	3/50	3/50
Guar gum	3/50	0/50	3/50
Locust bean gum	0/50	3/50	3/50
Gum arabic	1/49	0/49	1/49
fara gum	1/50	1/50	2/50
Agar	0/50	1/50	1/50
2,6-Toluenediamine · 2HCl	2/50	0/50	2/50
4'-Oxydianiline	0/50	0/50	0/50
-Biphenylamine · HCl	0/49	0/49	0/49
Cinnamyl anthranilate	1/50	3/50	4/50
TOTAL	15/748 (2.0%)	14/748 (1.9%)	29/748 (3.9%)
SD(b)	2.14%	2.33%	2.56%
Range (c)			
High	3/50	3/50	4/50
Low	0/50	0/50	0/50
Overall Historical Incidence			
TOTAL SD (b)	(d) <b>39/2,537</b> (1.5%) 1.87%	(e) 51/2,537 (2.0%) 2.37%	90/2,537 (3.5%) 2.61%
Range (c)			
High	3/47	4/50	5/49
Low	0/51	0/50	0/50

### TABLE F8. HISTORICAL INCIDENCE OF CIRCULATORY SYSTEM TUMORS IN FEMALE B6C3F1MICE RECEIVING NO TREATMENT (a)

(a) Data as of March 16, 1983, for studies of at least 104 weeks.(b) Standard deviation

.

(c) Range and SD are presented for groups of 35 or more animals.
(d) Includes three diagnoses of angioma
(e) Includes eight diagnoses of angiosarcoma

	Incidence in Controls		
Study	Malignant Lymphoma	Lymphoma or Leukemia	
4,4'-Methylenedianiline • 2 HCl	13/50	13/50	
Monuron	16/50	16/50	
8-Hydroxyquinoline	13/50	13/50	
Butyl benzyl phthalate	17/50	17/50	
Di(2-ethylhexyl)phthalate	10/50	10/50	
Di(2-ethylhexyl)adipate	23/50	23/50	
Guar gum	19/50	19/50	
Locust bean gum	31/50	31/50	
Gum arabic	18/49	19/49	
Tara gum	16/50	16/50	
Agar	9/50	9/50	
2,6-Toluenediamine · 2 HCl	4/50	4/50	
4,4'-Oxydianiline	15/50	15/50	
2-Biphenylamine · HCl	10/49	10/49	
Cinnamyl anthranilate	18/50	18/50	
TOTAL	232/748 (31%)	233/748 (31,1%)	
SD(b)	12.78%	12.85%	
Range (c)			
High	31/50	31/50	
Low	4/50	4/50	
Overall Historical Incidence			
TOTAL	637/2,537 (25,1%)	689/2,537 (27,2%)	
SD (b)	10.03%	9.87%	
Range (c)			
High	31/50	31/50	
Low	4/50	4/50	

## TABLE F9. HISTORICAL INCIDENCE OF HEMATOPOIETIC SYSTEM TUMORS IN FEMALEB6C3F1 MICE RECEIVING NO TREATMENT (a)

(a) Data as of March 16, 1983, for studies of at least 104 weeks

(b) Standard deviation (c) Range and SD are presented for groups of 35 or more animals.

### APPENDIX G

### CHEMICAL CHARACTERIZATION OF

### 8-HYDROXYQUINOLINE

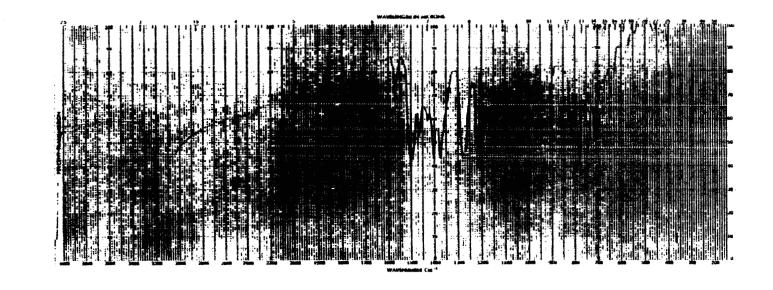
#### I. Identity and Purity Determinations of Lot No. 7223-J Performed by the Analytical Chemistry Laboratory

A. Physical Properties			
1. Appearance: Crea	m-colored powder		
2. Melting Point:	Determined	Literature Values	
	73°-74° Ć (visual, capillary)	76° C (Merck Index, 1976)	
B. Spectral Data			
1. Infrared	Determined	Literature Values	
a. Instrument:	Beckman IR-12		
b. Phase:	2% Potassium bromide pellet		
c. Results:	See Figure 5	Consistent with literature spectrum (Sadtler Standard Spectra)	
2. Ultraviolet/Visible	Determined	Literature Values	
a. Instrument:	Cary 118		
b. Solvent:	Methanol	Cyclohexane	

c. Results: No absorbance seen in visible region (800-350 nm) at a concentration of 3 mg/ml in methanol. Two maxima observed in ultraviolet region (350-228 nm)

λmax	(nm) ε x 10 <sup>-3</sup>	λ <sub>max</sub> (nm)	ε x 10 <sup>-8</sup>
<b>31</b> 1	2.56 ± 0.003 (8)	318	2.30
241	40.00 ± 0.02 (8)	243	43.04
		(Sadtler Star	ndard Spectra)

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3. Nuclear Magnetic Resonance

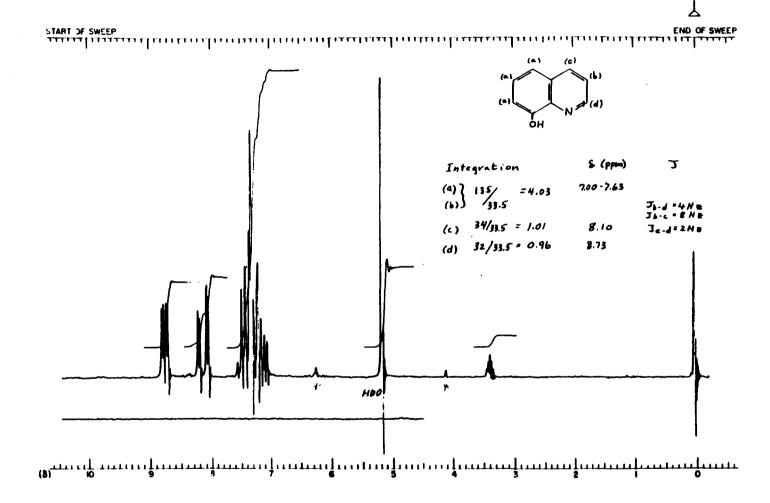
	Determined	Literature Values
a. Instrument:	Varian EM 360-A	
b. Solvent:	Methanol-d4 with internal tetramethylsilane	
c. Assignments:	See Figure 6	Consistent with literature spectrum (Sadtler Standard Spectra)
d. Chemical Shift (8): a b d d d	· · ·	
e. Coupling Constant:	$J_{bd} = 4 Hz$ $J_{cb} = 8 Hz$ $J_{cd} = 2 Hz$	
f. Integration Ratios:		

C. Titration: Percent purity based on titration of one amine group per molecule with perchloric acid in an acetic acid medium,  $101.6\% \pm 0.2(\delta)\%$ 

#### **D.** Water Analysis (Karl Fischer): $0.58\% \pm 0.06(\delta)\%$

#### E. Elemental Analysis:

Element	C	Н	N
Theory (T)	74.47	4.86	9.65
Determined (D)	74.57 74.25	4.79 4.88	9.61 9.92
Percent D/T	99.9	99.5	101.2



#### F. Chromatographic Analyses

#### 1. Thin-Layer Chromatography

a. Plates: Silica Gel 60, F254, 0.25 mm layer
b. Reference Standard: 2-Methyl, 8-quinolinol (2 µl of a 10 µg/µl solution in chloroform)
c. Amount Spotted: 100 and 300 µg (10 and 30 µl of a 10 µg/µl solution in chloroform)

d. Visualization: Ultraviolet light (254 and 366 nm) and iodine vapor

System 1: Chloroform: methanol (90:10)

(1) Rf: 0.60 (major), 0.40 (minor)

(2) R<sub>st</sub>: 0.74, 0.50

System 2: Toluene:methanol (80:20)

(1) Rf: 0.43 (major), 0.33 (minor)

(2) R<sub>st</sub>: 0.69, 0.53

#### 2. Gas Chromatography:

a. Instrument: Varian 3740

b. Detector: Flame ionization

- c. Inlet Temperature: 200° C
- d. Detector Temperature: 250°C
- e. Carrier Gas: Nitrogen

f. Flow Rate: 70 cc/min

g. Sample Injected:  $4 \mu l$  of a 10 mg/ml solution in methylene chloride to quantitate impurities and  $4 \mu l$  of a 5 mg/ml solution in methylene chloride to check for detector overloading

System 1:

(1) Column: 3% OV-225 on 80/100 Supelcoport, 1.8 m  $\times$  4 mm ID, glass

(2) Oven Temperature Program: 5 min at 50° C; then 50°-220° C at 10° C/min

(3) **Results:** Major peak and two impurities before the major peak with a combined area of 0.15%, relative to the area of the major peak

Peak	Retention Time (min.)	RetentionTime Relative to <u>Major Peak</u>	Area (percent of <u>major peak)</u>
1	13.3	0.87	0.09
2	13.9	0.91	0.06
3	15.3	1.00	100

#### System 2:

(1) Column: 3% OV-17 on 80/100 Supelcoport, 1.8 m  $\times$  4 mm ID, glass

(2) Oven Temperature Program: 5 min at 50° C; then 50°-250° C at 10° C/min

(3) **Results:** Major peak and one impurity after the major peak with an area of 0.07% relative to the major peak.

<u>Peak</u>	Retention <u>Time (min.)</u>	RetentionTime Relative to <u>Major Peak</u>	Area (percent of <u>major peak)</u>
1 2	15.8 20.4	1.00 1.29	100 0.07
2	20.4	1.29	0.07

#### II. Heat Stability at the Analytical Chemistry Laboratory

**A. Sample Storage:** Samples of 8-hydroxyquinoline were stored in glass vials with Teflon<sup>®</sup>-lined screw caps at - 20°, 5°, 25°, and 60° C for 2 weeks.

**B.** Analysis: Samples from each storage temperature were weighed and dissolved in chloroform containing hexadecane as an internal standard, at a concentration of 5  $\mu$ g/ $\mu$ l. The samples were analyzed on a gas chromatographic system, comparing the internal standard peak to the sample peak. The recovery of 8-hydroxyquinoline for each sample was compared with the recovery for the  $-20^{\circ}$  C sample.

- 1. Instrument: Varian 3740
- 2. Detection: Flame ionization
- 3. Column: 3% OV-225 on 80/100 Supelcoport, 1.8 m  $\times$  4 mm ID, glass
- 4. Inlet Temperature: 200° C
- 5. Oven Temperature Program: 130°, isothermal
- 6. Detector Temperature: 250° C
- 7. Carrier Gas: Nitrogen
- 8. Carrier Flow Rate: 70 cc/min
- **9. Sample Injected:** 5 µl solutions of 8-hydroxyquinoline from each storage temperature (5 µg/µl) in chloroform containing 1.2 µg/µl hexadecane internal standard
- 10. Retention times: Hexadecane, 0.7 min; 8-hydroxyquinoline, 1.8 min

#### C. Results:

torage Temperature (degrees Celsius)	Percent Purity
- 20	$100.0 \pm 2.9$ (8)
5	$103.1 \pm 2.9(\delta)$
25	$101.6 \pm 2.9(8)$
60	$103.7 \pm 3.1$ (8)

**D.** Conclusion: 8-hydroxyquinoline is stable when stored as the bulk chemical at temperatures up to 60° C for 2 weeks.

#### III. Test Chemical Stability at the Testing Laboratory

#### A. Methods:

#### 1. Gas chromatography:

- a. Instrument: Varian 1440 or 3700
- **b. Detection:** Flame ionization
- c. Column: 3% SP2250 on 100/120 Supelcoport, 6 ft × 2 mm ID, glass
- d. Inlet Temperature: 190°-250° C
- e. Oven Temperature Program: 70°-250° C at 6° C/min
- f. Detector Temperature: 230°-300° C

#### 2. Infrared Spectroscopy:

- a. Instrument: Perkin-Elmer Infracord<sup>®</sup> #137
- **b. Phase:** Potassium bromide

#### **B.** Results:

#### 1. Purity:

Date of	Percent Purity	
Analysis	Bulk	Reference
10/05/79	99.9	>99.9
12/26/79	<b>99.8</b>	<b>99.8</b>
02/25/79	<b>99.6</b>	99.6
06/12/80	<b>99.</b> 7	99.7
10/09/80	99.8	99.8
02/09/81	99.7	99.8
06/16/81	99.8	99.8
10/09/81	99.7	99.7
12/30/81	99.8	99.7

**2. Identity:** Periodic reanalysis of test and reference samples of 8-hydroxyquinoline by infrared spectroscopy confirmed the identity of the chemical.

C. Conclusion: No notable degradation occurred throughout the studies.

### **APPENDIX H**

## **PREPARATION AND CHARACTERIZATION**

### **OF FORMULATED DIETS**

### I. Studies Conducted at the Analytical Chemistry Laboratory

### A. Preparation Procedure

1. Premix: 8-Hydroxyquinoline (11.660  $\pm$  0.001 g for 8,000 ppm preparation) was added directly to 100 g of Wayne Lab-Blox<sup>©</sup> rodent feed. This premixture was homogenized by rotating it in a 1-qt large-mouth glass jar for 15 min on a ball-mill type tumbler apparatus, with manual end-over-end tumbling every 5 min.

2. Bulk Mixing: The above premix and 1,400 g more feed were mixed in a Patterson-Kelly<sup>®</sup> Twin Shell Blender for 15 min. The blender was loaded from the top of the shells as follows: 700 g of feed was poured in and allowed to settle and level at the bottom (vertex of the "V"); then the premix was poured in on top of the feed from each side; this layer was covered with the remaining 700 g of feed poured in from each side. After 10- and 15-min mixing times, duplicate 5-g samples were removed from the top of each shell and the bottom trap of the blender for subsequent analysis. The target concentration of 8-hydroxyquinoline in feed was 7,770  $\pm$  50 ppm.

**3. Extraction and Analysis:** Each sample was placed in a 200-ml centrifuge bottle (quantitative transfer), and 50 ml of absolute methanol was added. The mixture was placed in an ultrasonic vibratory bath for 30 sec and centrifuged for 10 min. The supernatant solution (40 ml) was removed by pipette; the feed residue was mixed with an additional 50 ml of methanol and extracted again as described above. The combined supernatant solutions (80 ml) were diluted 10/100 and 5/100 with methanol and then analyzed by ultraviolet absorption spectroscopy at 241.3 nm on a Cary 118 spectrophotometer.

4. Quality Control: Blank (undosed) feed samples and individual spiked (8,000 ppm level) mixtures were extracted and prepared for analysis in the same manner described for the test samples above. Standard solutions of 8-hydroxyquinoline in methanol (1.06, 1.48, 1.92, and 2.11 µg/ml) were used to determine the extinction coefficient for the compound at the analytical wavelength and to test the Beer-Lambert relationship. The system was found effectively linear with concentration, having a least-squares correlation coefficient of >0.999. Blank sample absorbance values were 0.019  $\pm$  0.001 absorbance unit, or 3.2% of sample absorbance, and were substracted from the absorbance values of samples containing 8-hydroxyquinoline.

#### B. Homogeneity

#### 1. Results:

Sample Time (min)	Average Percent Found
and Location	in Chemical/Vehicle Mixture (a.b)
10, Right	0.76 ± 0.03
10, Left	0.89 ± 0.03
10, Bottom	0.71 ± 0.03
15, Right	0.70 ± 0.03
15, Left	0.68 ± 0.03
15, Bottom	0.74 ± 0.03

(a) Mean  $\pm$  standard deviation. Corrected for a spiked recovery yield of 95.0%  $\pm$  0.9% (extraction efficiency, 102%; volume correction, 93.3%).

(b) Theoretical concentration of chemical in feed,  $0.777\% \pm 0.005\%$ 

2. Conclusion: The mixture of 8-hydroxyquinoline in stock rodent feed at 8,000 ppm was homogeneous after 10 min and 15 min mixing in a Patterson-Kelley<sup>®</sup> 4-qt, twin-shell blender with intensifier bar. The variations in the samples of the mixtures were within 10% of the target concentration of chemical in the feed.

### C. Heat Stability (First Study: Extraction with Methanol)

1. Sample Mixing and Storage: Samples were prepared by weighing 5 g of Wayne Lab-Blox<sup>®</sup> rodent feed into 200-ml centrifuge bottles. 8-Hydroxyquinoline (40 mg, individual samples accurately weighed to  $\pm$  0.1 mg) was added to each feed sample, and the contents of the bottles were mixed on a vortex mixer for 15 sec. Duplicate samples were used as spikes for recovery determinations and stored for 2 weeks at  $-20^{\circ}$ , 5°, 25°, and 45° C. No attempt was made to protect the samples from light.

2. Extraction and Analysis: Each 5-g sample was equilibrated at room temperature and triturated with 60 ml of methanol for 30 sec using a Brinkmann Polytron<sup>®</sup> high-speed blender. The mixture was then placed in an ultrasonic vibratory bath for 30 sec and then centrifuged for 10 min. A portion of the supernatant solution (50 ml) was pipetted into a separate flask. The feed residue was mixed with an additional 25 ml of methanol and extracted again as described above. An 8-ml aliquot of the combined supernatant solutions (75 ml total) was transferred to a 10-ml volumetric flask, and 2 ml of a 2 mg/ml solution of 2-methoxy-naphthalene in methanol was added (as internal reference standard for chromatographic analysis). This solution was then used for gas chromatographic analysis.

- a. Instrument: Bendix 2500
- **b.** Column: 3% OV-1 on 80/100 mesh Supelcoport;  $1.8 \text{ m} \times 2 \text{ mm}$  ID, glass
- c. Detector: Flame ionization
- d. Carrier Gas: Nitrogen
- e. Flow Rate: 30 cc/min
- f. Temperatures: Oven, 130° C, isothermal; injector, 170° C; detector, 250° C
- g. Retention Times: 8-Hydroxyquinoline, 2.8 min; internal standard, 4.5 min

3. Quality Control: Analyses were performed in duplicate for each storage temperature. 2-Methoxynaphthalene was used as an internal reference standard. Room temperature recovery studies were performed in duplicate at the 8,000-ppm level. Blank (undosed) feed samples were extracted and prepared for analysis in the same manner described above for the test samples. Blanks showed no interference from feed at the retention time of the major component. Detector linearity was established using methanolic standard solutions of 25.2, 50.4, and 100.9  $\mu$ g/ml for the 8-hydroxyquinoline and 25.4, 50.8, and 101.5 for the 2-methoxynapththalene internal reference compound. Least-squares plot correlation coefficients for both compounds were >0.999 (effectively 1.0, linear).

### 4. Results:

Storage Temperature ( <u>°C)</u>	Target Concentration (a) <u>(percent wt/wt)</u>	Determined Concentration (a,b) (percent wt/wt)	Percent <u>of Theory (a)</u>
-20	$0.81 \pm 0.01$	$0.80 \pm 0.03$	99 ± 3
5	$0.82 \pm 0.01$	$0.80 \pm 0.03$	98 ± 3
25	$0.81 \pm 0.01$	$0.64 \pm 0.03$	79 ± 3
45	$0.80 \pm 0.01$	$0.47 \pm 0.03$	59 ± 3

(a)  $\pm$  Standard deviation

(b) Corrected for spike recovery yield of 99  $\pm$  3% (extraction efficiency, 103.8%;

volume correction, 95.2%)

**5.** Conclusions: 8-Hydroxyquinoline mixed with stock rodent feed at 8,000 ppm was stable when stored for 2 weeks at temperatures of 5° C and below. Samples stored at 25° and 45° C for the 2-week period showed significant loss of the test chemical upon analysis.

### D. Stability (Second Study: Extraction with Acidified Methanol)

1. Preparation and Storage of Experimental Feed Blend: A 1-kg batch of feed formulated with 8-hydroxyquinoline to a concentration of approximately 8,000 ppm was prepared for the new stability study and for evaluating the effectiveness of different extracting solutions to recover the chemical from aged feed blend. 8-Hydroxyquinoline (7.988  $\pm$  0.001 g) was transferred to a 600-ml beaker and mixed with approximately 8 g of feed (NIH 07 Rat and Mouse Ration). More feed was added in 15- and 30-g amounts with mixing between additions; then a final weight of feed was added and mixed in, making the total weight of the premix 200.0 g.

A 350-g portion of feed was layered evenly into the bottom of a stainless steel 4-qt capacity Patterson-Kelly<sup>®</sup> twin-shell blender equipped with an intensifier bar. The 200-g premix was added in equal amounts to both sides of the blender; then the fine material adhering to the beaker walls was taken up by stirring 100 g of feed in the beaker for a few seconds and adding it to the blender. A final 350-g portion of feed was layered over the premix, and the blender ports were sealed.

Blending was conducted with the intensifier bar turned ON for the first 5 min and turned OFF for the next 10 min of mixing. The outside of the blender was given a firm tap periodically with a block of wood to dislodge any feed packed in the corners of the blender. At the end of the 15-min mixing period, the blend was divided equally into four screw-cap jars and tightly sealed. The individual jars were stored in the dark at  $-20^{\circ}$ , 5°, 25°, or 45° C for the 2-week stability study. The target concentration of the 8-hydroxyquinoline in the feed blend was 7.99 mg/g.

8-Hydroxyquinoline was completely recovered from freshly prepared feed blends using methanol alone as the extractant; however, when the feed blend had been stored for a period of time, recovery of the chemical was significantly reduced. Therefore, for evaluating the different extracting mixtures, the feed sample prepared above and stored 2 weeks at 45° C was used for the study.

A series of methanol solutions containing 0.05%, 0.1%, 0.5%, 1%, and 5% hydrochloric acid by volume were prepared and used for the analysis of the stored feed blend, following the procedure below.

2. Analysis Procedure: Feed samples (10.00 g in 200-ml centrifuge bottles) were extracted with 100 ml of the selected solvent mixture by shaking for 30 min on a Burrell Wrist Action<sup>®</sup> shaker.

Aliquots from the extracts (2 ml), clarified by centrifugation, were diluted to 200 ml with methanol-acetic acid solution (99:1). After thorough mixing, a few milliliters of the diluted solution were filtered through a  $0.5-\mu$  Millipore<sup>®</sup> filter into 5-ml septum vials. The 8-hydroxyquinoline content of the solution was determined by the high-performance liquid chromatography system described below.

- a. Instrument: Varian 500 Liquid Chromatograph
- **b.** Column: Waters Associates  $\mu$ Bondapak C<sub>18</sub>, 300 mm  $\times$  4 mm ID
- c. Guard Column: Whatman CO:PELL, 72 mm  $\times$  4 mm ID
- d. Detector: Waters Associates Model 440, UV at 254 nm
- e. Mobile Phase: 60% 2 mM ethylenediaminetetraacetic acid, disodium salt in wateracetic acid (99:1); 40% methanol-acetic acid (99:1)
- f. Flow Rate: 1 ml/min
- g. Retention Time: 4.1 min

### 3. Recovery Study Results:

Hydrochloric Acid in Methanol Extracting Mixture (v/v)	8-Hydroxyquinoline in Feed (mg/g)	Percent Recovered (Detected/Target × 100)(a)
0	-	59
0.05%	6.15	77
0.10%	6.15	77
0.50%	6.7	84
1.00%	6.5	81
5.00%	5.9	74

(a) Target concentration of 8-hydroxyquinoline in feed was 7.99 mg/g.

4. Conclusions: Highest recovery of 8-hydroxyquinoline (approximately 84%) was obtained from the feed stored 2 weeks at 45° C when methanol containing 0.5% hydrochloric acid by volume was used as the extractant. This contrasts with the 59% recovery previously reported when methanol alone was used as the extractant.

8-Hydroxyquinoline, NTP TR 276

### **APPENDIX I**

### **ANALYSIS OF FORMULATED DIETS: METHODS**

8-Hydroxyquinoline, NTP TR 276

### I. Analysis at Analytical Chemistry Laboratory

### A. Preparation of Standard Spiked Feed

Two working standard solutions of 8-hydroxyquinoline in acidified methanol (5 ml concentrated hydrochloric acid per liter of solution) were prepared independently at concentrations of 2.49 and 1.97 mg/ml. These solutions were further diluted with acidified methanol to concentrations of 1.25, 0.99, 0.62, or 0.49 mg/ml. Aliquots (20 ml) of the six standard solutions were pipetted into individual 200-ml centrifuge bottles containing 5 g of undosed feed to make spiked feed standards bracketing the specified dose range of the referee sample. One 200-ml centrifuge bottle containing 5 g of undosed feed was treated with 20 ml of acidified methanol for use as a blank. The spiked feeds and the feed blank were sealed and allowed to remain overnight at room temperature prior to analysis.

### B. Preparation of the Referee Sample

Triplicate weights of the dosed feed sample (approximately 5 g weighed to the nearest 0.01 g) were transferred to individual 200-ml centrifuge bottles. Acidified methanol (20 ml) was pipetted on each sample; then the bottles were sealed and allowed to stand overnight at room temperature with the standards and feed blank.

### C. Analysis Procedure

The next day, 80 ml of acidified methanol was pipetted into each blank, standard, and referee sample bottle. The bottles were sonicated in an ultrasonic vibratory bath for 1 min and shaken for 15 min at maxium stroke on a Burrell Model 75 Wrist-Action<sup>®</sup> shaker. The extraction mixtures were centrifuged for 10 min; then 10-ml aliquots of the supernatant solutions were diluted to 100 ml with acidified methanol. A 5-ml aliquot of each sample was further diluted to 100 ml with acidified methanol, and the absorbance of the solutions was read versus acidified methanol at 256 nm in 1-cm quartz cells on a Cary 118 spectrophotometer.

The total amount of 8-hydroxyquinoline in the dosed referee feed samples was computed from the linear regression equation obtained by plotting the absorbance of each spiked feed sample and blank versus the amount of chemical in the respective spiked feed sample and blank.

### **D.** Quality Assurance Measures

The dosed referee feed sample was analyzed in triplicate, and the undosed feed sample was analyzed once. Individually spiked portions of undosed feed (six levels) prepared from two independently weighed standards were treated like the dosed referee feed samples for obtaining standard curve data. The linearity of the standard curve data was evaluated by the regression equation.

# II. Analysis of Formulated Diets for Concentration of 8-Hydroxyquinoline at the Testing Laboratory

### A. Method Used Until June 1980

Duplicate samples of 2 g each were extracted with 50 ml of absolute methanol in 100-ml ground-glass-stoppered graduated cylinders by repeated inversions of the cylinders for approximately 15 min. The feed particles were allowed to settle overnight in a refrigerator at  $4^{\circ}$  C, and the absorbances of the supernatants were measured at 241.5 nm in a Beckman DU<sup> $\oplus$ </sup> spectrophotometer after appropriate dilutions with methanol. Spiked feed samples and blank feed were extracted and analyzed in the same manner to provide a calibration curve that was used to determine the concentration of test compound in the submitted samples.

### B. Method Used After June 1980

In the revised method, feed samples were extracted with 50 ml methanol containing 0.5% hydrochloric acid, rather than with absolute methanol.

8-Hydroxyquinoline, NTP TR 276

## **APPENDIX J**

## ANALYSES OF FORMULATED DIETS: DATA

8-Hydroxyquinoline, NTP TR 276

ate Mixed	Target Concentration (ppm)	Actual Concentration (ppm)		
1/19/79	(a) 400	300		
	400	460		
	400	360		
	800	980		
	1,500	1,600		
	3,000	2,800		
	6,000	6,000		
	(a) 12,000	12,000		
	12,000	12,800		
	12,000	11,600		
3/7/79	(a) 400	410		
	400	410		
	400	380		

## TABLE J1. ANALYSIS OF FORMULATED DIETS IN THE THIRTEEN-WEEK FEED STUDIES OF8-HYDROXYQUINOLINE

(a) Samples of the 400- and 1,200-ppm dose mixtures were taken from three different areas of the blender to confirm homogeneity of feed blends.

	<b>Determined Concentration for Target Concentration of</b>					
Date Mixed	1,500 ppm	3,000 ppm				
12/18/79	1,550	3,000				
02/08/80	1,480	3,000				
04/18/80	1,480	2,950				
06/27/80	1,550	3,100				
07/18/80	1,350	2,830				
09/19/80	1,400	2,850				
12/19/80	1,550	3,000				
01/23/81	1,550	3,050				
03/13/81	1,500	2,850				
06/05/81	(b) 1,300	2,760				
06/09/81	(c) 1,460	,				
07/02/81	1,440	3,230				
09/11/81	1,580	3,100				
11/06/81	1,570	3,050				
Mean (ppm)	1,485	2,982				
Standard deviation	89.0	131.6				
Coefficent of variation (percent)	6.0	4.4				
Range (ppm)	1,300-1,580	2,760-3,230				
Number of samples	13	13				

#### TABLE J2. CONCENTRATIONS OF 8-HYDROXYQUINOLINE IN FEED IN THE TWO-YEAR STUDIES (a)

(a) The data presented are the average of the results of duplicate analyses.
(b) Out of tolerance. Not used in study.
(c) Remix. Not included in mean.

		Determined (ppm)				
Date Mixed	Target Concentration (ppm)	<b>Testing Laboratory</b>	Analytical Laboratory			
04/18/80	1.500	1,480	1,460			
09/19/80	3,000	2,850	2,930			
06/05/81	1,500	1,300	1,510			
11/06/81	3.000	3,050	3,000			

### TABLE J3. REFEREE SAMPLE DATA FOR THE TWO-YEAR FEED STUDIES OF 8-HYDROXYQUINOLINE

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## APPENDIX K

## SENTINEL ANIMAL PROGRAM

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### A. METHODS

Rodents used in the Carcinogenesis Program of the National Toxicology Program are produced in optimally clean facilities to eliminate potential pathogens that may affect test results. The Sentinel Animal Program is part of the periodic monitoring of animal health that occurs during the toxicologic evaluation of chemical compounds. Under this program, the disease state of the rodents is monitored via viral serology on sera from extra (sentinel) animals in the test rooms. These animals are untreated, and these animals and the test animals are both subject to identical environmental conditions. The sentinel animals come from the same production source and weanling groups as the animals used for the studies of chemical compounds.

Fifteen B6C3F<sub>1</sub> mice and 15 F344/N rats of each sex are selected at the time of randomization and allocation of the animals to the various study groups. Five animals of each designated sentinel group are killed at 6, 12, and 18 months on study. Data from animals surviving 24 months are collected from 5/50 randomly selected control animals of each sex and species. The blood from each animal is collected and clotted, and the serum is separated. The serum is cooled on ice and shipped to Microbiological Associates' Comprehensive Animal Diagnostic Service for determination of the viral antibody titers. The following tests are performed:

	Hemagglutination <u>Inhibition</u>	Complement <u>Fixation</u>	ELISA
Mice	PVM (pneumonia virus of mice) Reo 3 (reovirus type 3) GDVII (Theiler's encephalomyelitis virus) Poly (polyoma virus) MVM (minute virus of mice) Ectro (infectious ectromelia) Sendai (12, 18, and 24 months)	M.Ad. (mouse adenovirus) LCM (lymphocytic choriomeningitis virus Sendai (6 months) MHV (6, 12, and 18 months)	MHV (mouse hepatitis virus) (24 months)
Rats	PVM KRV (Kilham rat virus) H-1 (Toolan's H-1 virus) Sendai (12, 18, and 24 months)	RCV (rat coronavirus) Sendai (6 months)	

### **B. RESULTS**

Results are presented in Table K1.

Interval	No. of Animals	Positive Serologic Reaction for	
RATS	<u> </u>		
6 months	10/10 10/10	PVM RCV	
12 months	10/10 9/10 1/10	PVM Sendai KRV	
18 months	8/8 8/8 8/8	PVM Sendai RCV	
24 months	9/10 10/10 2/2	PVM Sendai RCV	
MICE			
6 months	8/10	PVM	
12 months	6/8 1/10	PVM Sendai	
18 months	2/10 2/10	PVM Sendai	
24 months	6/10 2/10 1/10 1/10	PVM Reo 3 Sendai MHV	

# TABLE K1. MURINE VIRUS ANTIBODY DETERMINATIONS FOR RATS AND MICE IN THE TWO-YEAR FEED STUDIES OF 8-HYDROXYQUINOLINE (a)

(a) Blood samples were taken from sentinel animals at 6, 12, and 18 months after the start of dosing and from the control animals just before they were killed; samples were sent to Microbiological Associates, Inc. (Bethesda, MD) for the Animal Disease Screening Program.

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### **APPENDIX L**

# FEED AND COMPOUND CONSUMPTION BY RATS AND MICE IN THE TWO-YEAR FEED STUDIES OF 8-HYDROXYQUINOLINE

## TABLE L1. FEED AND COMPOUND CONSUMPTION BY MALE RATS IN THE TWO-YEAR FEED STUDY OF 8-HYDROXYQUINOLINE

	Con	Control		Low Dose				High Dose			
Week	Grams Feed/ Day (a)	Body Weight	Grams Feed/ Day (a)	Body Weight (grams)	Low/ Control (b) (grams)	Dose/ Day (c)	Grams Feed/ Day (a)	Body Weight (grams)	High/ Control (b) (grams)	Dose/ Day (c)	
3	17.6	238	19.9	242	1.1	123	19.1	240	1.1	239	
7	20.0	293	19.9	300	1.0	99	20.1	298	1.0	203	
11	18.1	329	17. <del>9</del>	335	1.0	80	18.1	332	1.0	164	
15	19.1	353	19.0	357	1.0	80	18.7	355	1.0	158	
19	21.6	380	21.6	386	1.0	84	19.1	379	0.9	152	
23	25.9	395	22.9	401	0.9	86	22.1	388	0.9	171	
27	26.1	403	23.9	410	0.9	87	23.3	397	0.9	176	
31	27.3	411	26.9	417	1.0	97	23.9	407	0. <del>9</del>	176	
39	23.6	430	20. <b>6</b>	434	0.9	71	18.9	422	0.8	134	
43	22.6	438	20.7	439	0. <b>9</b>	71	19.4	427	0.9	137	
47	21. <b>9</b>	447	19.9	454	0.9	66	18.4	435	0.8	127	
51	21.6	462	19.9	464	0.9	64	18.3	441	0.8	124	
55	20.9	468	19.9	472	1.0	63	18.6	448	0.9	124	
59	20.7	476	19.4	479	0.9	61	18. <b>9</b>	455	0.9	124	
63	21.1	477	19.6	484	0.9	61	17.9	452	0.8	119	
67	20.7	480	19.6	475	0. <del>9</del>	62	18.6	455	0. <del>9</del>	122	
71	21. <b>9</b>	481	20.1	487	0.9	62	18.9	454	0.9	125	
75	21.4	477	18.9	486	0.9	58	17.9	449	0.8	119	
79	20.1	463	18.4	480	0. <b>9</b>	58	16.7	438	0.8	114	
83	20.6	472	18.9	480	0.9	59	16.9	445	0.8	114	
87	20.7	453	20.0	468	1.0	64	18.3	440	0.9	125	
92	22.4	462	18.1	478	0.8	57	16.3	434	0.7	113	
95	23.0	458	19.6	460	0.9	64	19.9	428	0.9	139	
9 <b>9</b>	21.6	450	20.6	443	1.0	70	19.9	413	0.9	144	
Mean	21.7	425	20.2	430	0.9	73	19.1	410	0.9	143	
SD (d)	2.3		1.9		0.1	16	1.8		0.1	32	
CV (e)	10.6		9.4		11.1	21.9	9.4		11.1	22.4	

(a) Grams of feed consumed per animal per day
(b) Grams of feed per day for the dosed group divided by the same value for the controls
(c) Milligrams of compound consumed per day per kilogram of body weight
(d) Standard deviation

(e) Coefficient of variation = (standard deviation/mean)  $\times$  100

## TABLE L2. FEED AND COMPOUND CONSUMPTION BY FEMALE RATS IN THE TWO-YEAR FEEDSTUDY OF 8-HYDROXYQUINOLINE

	Cont	trol		Low Dose				High Dose				
Week	Grams Feed/ Day (a)	Body Weight (grams)	Grams Feed/ Day (a)	Body Weight (grams)	Low/ Control (b) (grams)	Dose/ Day (c)	Grams Feed/ Day (a)	Body Weight (grams)	High/ Control (b) (grams)	Dose/ Day (c)		
4	14.1	164	14.4	162	1.0	134	12.4	159	0.9	235		
8	15.1	187	14.4	183	1.0	118	13.7	180	0.9	229		
12	16.9	203	12.9	196	0.8	98	12.1	193	0.7	189		
16	16.1	211	14.3	204	0.9	105	13.0	200	0.8	195		
20	18.0	219	14.7	215	0.8	103	12.9	208	0.7	185		
24	17.6	227	14.4	218	0.8	99	14.1	210	0.8	202		
27	16.4	229	14.4	223	0.9	97	13.3	214	0.8	18 <b>6</b>		
32	16.0	235	16.4	230	1.0	107	13.3	219	0.8	182		
36	14.9	237	12.6	230	0.8	82	11.1	219	0.7	153		
40	16.9	246	13.3	237	0.8	84	13.6	225	0.8	181		
44	17.1	253	15.7	245	0.9	96	13.0	233	0.8	167		
48	17.6	260	14.9	253	0.8	88	12.9	238	0.7	162		
52	19.1	275	18.1	268	0.9	102	14.3	251	0.7	171		
56	19.3	286	19.6	278	1.0	106	13.6	260	0.7	157		
60	16.9	297	15.1	286	0.9	79	13.3	269	0.8	148		
64	17.1	307	16.0	294	0.9	82	12.3	273	0.7	135		
68	17.0	316	16.4	302	1.0	82	14.3	281	0.8	153		
72	17. <del>9</del>	324	16.0	308	0. <b>9</b>	78	13.3	286	0.7	139		
76	16.7	328	15.0	317	0.9	71	13.6	293	0.8	139		
80	15.7	334	15.4	323	1.0	72	14.4	296	0.9	146		
84	17.6	339	14.7	329	0.8	67	14.1	306	0.8	139		
88	17.4	340	14.4	325	0.8	67	14.6	305	0.8	143		
92	17.4	347	13.3	325	0.8	61	12.4	300	0.7	124		
96	18.3	344	16.4	333	0.9	74	14.1	301	0.8	141		
100	16.9	335	16.9	333	1.0	76	14.9	302	0. <del>9</del>	148		
Mean	17.0	274	15.2	265	0.9	89	13.4	249	0.8	166		
SD (d)	1.2		1.6		0.1	18	0.9		0.1	29		
CV (e)	7.1		10.5		11.1	20.2	6.7		12.5	17.5		

(a) Grams of feed consumed per animal per day
(b) Grams of feed per day for the dosed group divided by the same value for the controls
(c) Milligrams of compound consumed per day per kilogram of body weight
(d) Standard deviation

(e) Coefficient of variation = (standard deviation/mean)  $\times 100$ 

## TABLE L3. FEED AND COMPOUND CONSUMPTION BY MALE MICE IN THE TWO-YEAR FEED STUDY OF 8-HYDROXYQUINOLINE

	Cont	rol	Low Dose				High Dose				
Week	Grams Feed/ Day (a)	Body Weight	Grams Feed/ Day (a)	Body Weight	Low/ Control (b) (grams)	Dose/ Day (c)	Grams Feed/ Day (a)	Body Weight (grams)	High/ Control (b) (grams)	Dose/ Day (c)	
4	7.4	29	7.4	29	1.0	384	5.6	29	0.7	576	
8	7.1	32	5.7	32	0.8	268	5.7	32	0.8	536	
12	5.9	34	5.9	33	1.0	266	5.0	33	0.9	455	
16	6.6	35	6.1	35	0.9	263	5.3	34	0.8	466	
20	6.6	36	6.3	36	1.0	262	5.9	36	0.9	488	
24	6.1	38	5.4	38	0.9	214	5.0	37	0.8	405	
28	6.6	39	6.0	39	0.9	231	5.4	38	0.8	429	
32	6.6	40	5.7	40	0. <del>9</del>	214	5.6	39	0.8	429	
36	7.4	41	5.9	41	0.8	214	5.4	41	0.7	397	
40	7.4	42	5. <del>9</del>	41	0.8	214	5. <del>9</del>	40	0.8	439	
44	7.1	41	5.6	42	0.8	199	5.1	41	0.7	376	
48	6.6	43	5.7	43	0.9	199	5.6	42	0.8	398	
52	6.6	43	5.6	43	0.8	194	5.4	42	0.8	388	
56	6.6	45	5.9	43	0. <b>9</b>	204	5.0	42	0.8	357	
60	6.6	45	5.9	45	0.9	195	5.0	43	0.8	349	
64	6.9	45	5.4	44	0.8	185	4.9	42	0.7	347	
68	6.6	45	5.4	45	0.8	181	5.3	43	0.8	369	
<b>72</b>	6.9	44	5.6	45	0.8	186	5.1	44	0.8	351	
76	7.1	45	5.6	45	0.8	186	5.3	43	0.7	369	
80	6.9	45	5.3	44	0.8	180	4.6	43	0.7	319	
84	7.0	44	5.3	43	0.8	184	4.9	43	0.7	33 <b>9</b>	
88	7.6	44	4.9	44	0.6	166	4.4	42	0.6	316	
92	10.6	44	5.4	43	0.5	18 <b>9</b>	4.3	41	0.4	314	
96	8.4	43	6.3	41	0.7	230	5.0	41	0.6	366	
100	9.9	42	5.9	42	0.6	209	4.6	41	0.5	334	
Mean	7.2	41	5.8	41	0.8	217	5.2	40	0.7	3 <b>96</b>	
SD (d)	1.1		0.5		0.1	45	0.4		0.1	68	
CV (e)	15.3		8.6		12.5	20.7	7.7		14.3	17.2	

(a) Grams of feed consumed per animal per day
(b) Grams of feed per day for the dosed group divided by the same value for the controls
(c) Milligrams of compound consumed per day per kilogram of body weight

(d) Standard deviation (e) Coefficient of variation = (standard deviation/mean) × 100

## TABLE L4. FEED AND COMPOUND CONSUMPTION BY FEMALE MICE IN THE TWO-YEAR FEEDSTUDY OF 8-HYDROXYQUINOLINE

	Control			Low D	ose			High Dose			
Week	Grams Feed/ Day (a)	Body Weight (grams)	Grams Feed/ Day (a)	Body	Low/ Control (b)	Dose/ Day (c)	Grams Feed/ Day (a)	Body Weight (grams)	High/ Control (b) (grams)	Dose/ Day (c)	
4	8.1	22	8.0	22	1.0	545	6.6	21	0.8	939	
8	8. <b>9</b>	24	7.3	24	0.8	455	5.9	23	0.7	764	
12	8.1	26	8.0	26	1.0	462	6.1	25	0.8	737	
16	9.1	28	8.7	28	1.0	467	6.0	27	0.7	667	
20	8.6	29	8.9	30	1.0	443	7.0	28	0.8	750	
24	9.0	31	8.9	31	1.0	429	7.4	29	0.8	768	
28	9.7	32	9.1	32	0. <b>9</b>	429	6.7	30	0.7	671	
32	8.0	34	7.6	33	0.9	344	5.7	31	0.7	553	
36	8.1	36	7.1	34	0. <del>9</del>	315	6.3	32	0.8	589	
40	9.4	37	8.6	36	0.9	357	7.1	33	0.8	649	
44	9.7	39	8.6	37	0.9	347	6.9	34	0.7	605	
48	8.4	41	7.9	39	0.9	302	6.6	35	0.8	563	
52	10.3	41	8.1	39	0.8	313	7.4	37	0.7	602	
56	8.7	44	9.3	42	1.1	332	8.3	38	1.0	654	
60	9,9	46	8.9	43	0.9	309	7.9	40	0.8	589	
64	12.0	47	7. <del>9</del>	45	0.7	262	7.0	41	0.6	512	
68	9,4	48	8.1	46	0. <b>9</b>	266	7.7	41	0.8	564	
72	10.0	49	8.4	46	0.8	275	7.9	41	0.8	575	
76	9.4	50	7.9	46	0.8	256	7.4	42	0.8	531	
80	9.1	50	7.3	46	0.8	238	6.7	41	0.7	491	
84	11.3	49	9.1	46	0.8	298	6.9	40	0.6	514	
88	11.6	48	8.4	46	0.7	275	7.3	41	0.6	533	
92	12.6	49	8.6	46	0.7	280	7.1	41	0.6	523	
96	13. <b>9</b>	48	11.0	44	0.8	375	8.0	40	0.6	600	
100	13.0	47	10.4	44	0.8	356	6.9	39	0.5	527	
Mean	9.9	40	8.5	38	0.9	349	7.0	35	6.7	619	
SD (d)	1.6		0.9		0.1	81	0.7		0.1	10 <b>6</b>	
CV (e)	16.2		10.6		11.1	23.2	10.0		14.3	17.1	

(a) Grams of feed consumed per animal per day
(b) Grams of feed per day for the dosed group divided by the same value for the controls
(c) Milligrams of compound consumed per day per kilogram of body weight
(d) Standard deviation
(e) Coefficient of variation = (standard deviation/mean) × 100

8-Hydroxyquinoline, NTP TR 276

.

## APPENDIX M

## **GENETIC TOXICOLOGY OF 8-HYDROXYQUINOLINE**

8-Hydroxyquinoline, NTP TR 276

## TABLE M1. INDUCTION OF UNSCHEDULED DNA SYNTHESIS IN RAT HEPATOCYTES BY 8-HYDROXYQUINOLINE

Compound (a)	Dose	Net Grains per Nucleus ± Standard Error		
DMSO (percent)	1	-4.99 ± 0.23		
2-Acetylaminofluorene (ug/ml)	10	$18.87 \pm 0.42$		
8-Hydroxyquinoline (µg/ml)	2.5	$-3.19 \pm 0.21$		
	5	$-3.43 \pm 0.21$		
	10	$-3.42 \pm 0.22$		
	25	Toxic		

(a) Unscheduled DNA synthesis was determined essentially by the method of Williams (1977). Hepatocytes from male F344/N rats were isolated according to the procedure of Williams et al. (1977); inoculated into Williams Medium E supplemented with 2mM glutamine, 50  $\mu$ g/ml gentamicin, and 10% fetal bovine serum; and allowed to attach for 2 hours. After incubation, the cells were washed, and serum-free medium was added. Three cultures were used per dose of compound (and for controls), and cultures were exposed simultaneously to the test compound and to tritiated thymidine ( $10\mu$ Ci/ml for 18 h. After exposure, cultures were washed, swelled in a hypotonic solution, fixed, and washed with water. The coverslips were mounted to slides, dipped in Kodak NTB-2 emulsion, and exposed at 20° C for 6 days. Cells were stained with methyl-free Pyronin. The grains over 50 morphologically unaltered cells were counted, and the highest count from two nuclear-sized areas over the most heavily labeled cytoplasmic areas adjacent to the nucleus was subtracted from the nuclear count to obtain the net grains per nucleus.

Compound (a)	Dose (b)	No. of Dishes With Foci	Total No. of Foci	No. of Foci/Dish
DMSO (percent)	0.5	• 1	1	0.03
3-Methylcholanthrene (µg/ml)	5	14	22	1.1
8-Hydroxyquinoline (µg/ml)	0.031	0	0	0
	0.063	1	2	0.12
	0.125	0	0	0
	0.250	0	0	0
	0.500	0	0	0

#### TABLE M2. TRANSFORMATION OF BALB/c-3T3 CELLS BY 8-HYDROXYQUINOLINE

(a) The protocol was based on that of Kakunaga (1973). Twenty-four hours before treatment, 60-mm dishes were inoculated with 104 cells/dish and incubated. Test compound was then added, and the cells were incubated for 72 h. Cells were then washed, fresh medium was added, and incubation continued for approximately 4 weeks with refeeding twice a week. Cell monolayers were then fixed with methanol, stained with Giemsa, and examined by eye and by microscope to determine the number of foci of transformed cells.

(b) Before the transformation experiment, the cytotoxicity of the compound was determined by incubating 200 cells/60-mm dish for 24 h, adding various doses of test compound, and incubating for 72 h. The cells were then washed, fresh medium was added, and incubation continued for an additional 3-5 days. The surviving colonies were fixed, stained, and counted. The relative survival obtained after treatment with 8-hydroxyquinoline was: 108% (0.008 µg/ml), 93% (0.031 µg/ml), 82% (0.063 µg/ml), 44% (0.125 µg/ml), and 4% (0.25 µg/ml).

## APPENDIX N

## DATA AUDIT SUMMARY

8-Hydroxyquinoline, NTP TR 276

The experimental data and tables of the draft NTP Technical Report on the Toxicology and Carcinogenesis Studies of 8-Hydroxyquinoline were examined for completeness, consistency, and accuracy and for compliance with Good Laboratory Practice during the period November 28-December 2, 1983. The following persons were involved in the audit: National Toxicology Program--Ms. C. Davies, Dr. S. Eustis, Dr. J. French, Ms. A. Grant, Dr. B. Gupta, Dr. C. Lingeman, Dr. B. Schwetz, Dr. C. Whitmire, and Dr. M. Wolfe; Dynamac Corporation--Dr. H. Appleton, Mr. D. Dippel, Mr. C. Lunchick, Mr. J. Plautz, Dr. R. Schueler, and Ms. C. Synier.

The full report of the audit of these studies on 8-hydroxyquinoline is on file at the National Toxicology Program, NIEHS. The audit consisted of (a) review of records for the inlife portion of the studies, including clinical observations and body weight data for 10% of the animals and all environmental and mortality records, (b) review of all chemistry data, and (c) review of pathology data, including all individual animal pathology records (IADR's), 100% slide/block match for all animals, and wet tissues for 10% of the animals in each group.

There were no discrepancies or omissions that were considered of sufficient importance to affect the interpretation of the studies. Examples of discrepancies of lesser importance are as follows: Although environmental conditions were not considered adequately controlled compared with current standards, adverse effects observed during the course of the studies could not be related to any significant deviations in temperature or humidity. Another minor discrepancy was a lack of correlation between some of the grossly observed lesions and microscopic descriptions of the same lesions. For example, some of the fight wounds in male mice and some of the joint arthritides reported in mice grossly were not always described microscopically. Because these are common observations that are unrelated to the test chemical, the level of attention given to these lesions was not always as great as for lesions that were more likely related to chemical exposure.

In summary, there were no findings that were considered to have significantly influenced the final interpretation of these studies. Minor problems not mentioned here were likewise not considered to have affected the outcome of the studies.