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BIOASSAY OF EMETINE FOR POSSIBLE CARCINOGENICITY

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



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EMETINE

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

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<u>CONTRIBUTORS</u>: This report presents the results of the bioassay of emetine for possible carcinogenicity, conducted for the Carcinogenesis Testing Program, Divison of Cancer Cause and Prevention, National Cancer Institute (NCI), Bethesda, Maryland. The bioassay was conducted by Southern Research Institute, Birmingham, Alabama, initially under direct contract to NCI and currently under a subcontract to Tracor Jitco, Inc., prime contractor for the NCI Carcinogenesis Testing Program.

The experimental design and doses were determined by Drs. D. P. Griswold¹, J. D. Prejean¹, E. K. Weisburger², and J. H. Weisburger²,³. Ms. J. Belzer¹ and Mr. I. Brown¹ were responsible for the care of the laboratory animals. Data management and retrieval were performed by Ms. C. A. Dominick¹. Histopathologic examinations were performed by Drs. S. D. Kosanke¹ and J. C. Peckham¹, and the diagnoses included in this report represent their interpretation. Reported neoplasms and treatment-related hyperplastic lesions were reviewed by Dr. J. F. Hardisty⁴, who also prepared the interpretive pathology summary included in this report.

Animal pathology tables and survival tables were compiled at EG&G Mason Research Institute⁵. The statistical analyses were performed by Dr. J. R. Joiner⁶, using methods selected for the bioassay program by Dr. J. J. Gart⁷. Chemicals used in this bioassay were analyzed by Drs. W. J. Morris⁸ and R. H. Iwamoto⁸, and the analytical results were reviewed by Dr. S. S. Olin⁶.

This report was prepared at Tracor Jitco⁶ under the direction of Dr. Marshall Steinberg, Director of the Bioassay Program; Drs. J.

F. Robens and C. H. Williams, toxicologists; Dr. R. L. Schueler, pathologist; Ms. M. S. King and Mr W. D. Reichardt, technical writers; and Dr. E. W. Gunberg, technical editor, assisted by Ms. Y. E. Presley and Ms. P. J. Graboske.

The statistical analysis was reviewed by one or more members of the Mathematical Statistics and Applied Mathematics Section of NCI⁷: Dr. John J. Gart, Mr. Jun-mo Nam, Dr. Hugh M. Pettigrew, and Dr. Robert E. Tarone.

The following other scientists at the National Cancer Institute were responsible for evaluating the bioassay experiment, interpreting the results, and reporting the findings:

> Dr. Kenneth C. Chu Dr. Cipriano Cueto, Jr. Dr. J. Fielding Douglas Dr. Dawn G. Goodman Dr. Richard A. Griesemer Mr. Harry A. Milman Dr. Thomas W. Orme Dr. Robert A. Squire⁹ Dr. Jerrold M. Ward

¹Southern Research Institute, 2000 Ninth Avenue South, Birmingham, Alabama.

²Carcinogenesis Testing Program, Division of Cancer Cause and Prevention, National Cancer Institute, National Institutes of Health, Bethesda, Maryland.

³Now with the Naylor Dana Institute for Disease Prevention, American Health Foundation, Hammond House Road, Valhalla, New York.

⁴Experimental Pathology Laboratories, 17 Pine Street, Herndon, Virginia. ⁵EG&G Mason Research Institute, 1530 East Jefferson Street, Rockville, Maryland.

⁶Tracor Jitco, Inc., 1776 East Jefferson Street, Rockville, Maryland.

⁷Mathematical Statistics and Applied Mathematics Section, Biometry Branch, Field Studies and Statistics, Division of Cancer Cause and Prevention, National Cancer Institute, National Institutes of Health, Bethesda, Maryland.

⁸Stanford Research Institute, Menlo Park, California.

⁹Now with the Division of Comparative Medicine, Johns Hopkins University, School of Medicine, Traylor Building, Baltimore, Maryland.

SUMMARY

A bioassay of emetine, an amebicide and anticancer drug, for possible carcinogenicity was conducted by administering the test material by intraperitoneal injection to Sprague-Dawley rats and B6C3F1 mice.

Groups of 35 rats of each sex were administered emetine at one of two doses, either 0.5 or 1 mg/kg body weight, three times per week for 52 weeks, and then observed for an additional 31 or 32 weeks. Control groups of each sex consisted of 10 untreated rats (untreated controls) and 10 rats injected with buffered saline (vehicle controls). Pooled-control groups, used for statistical evaluation, consisted of the vehicle-control rats of each sex for this study combined with 15 vehicle-control rats of each sex from a similar bioassay of another test chemical. All surviving rats were killed at 83 or 84 weeks.

Initially, groups of 35 mice of each sex were administered emetine at one of two doses, either 3.2 or 6.4 mg/kg body weight (mid- and high-dose), three times per week. Control groups of each sex consisted of 15 untreated mice (untreated controls) and 15 mice injected with buffered saline (vehicle controls). Due to high mortality rates in the initial treated groups, additional groups of 35 mice of each sex were later put on study at 1.6 mg/kg (low-dose), together with 10 untreated-control and 10 vehicle-control mice of each sex. The high-dose males were treated for 28 weeks and the mid- and high-dose females for 40 and 33 weeks, respectively. Mid- and low-dose male mice and low-dose female mice were treated for 52 weeks, and then observed for an additional 20 or 26 weeks. All surviving mice were killed at 78-83 weeks.

Emetine was toxic to male rats at the high dose, to both sexes of mice at the high and mid doses and to a lesser extent at the low dose, as shown by the low survival in these groups. Twenty-six percent of the high-dose male rats and 69% of the high-dose female rats, but none of the high- and mid-dose mice of either sex, survived to the end of the study. In the low-dose mice,

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30/35 males and 21/35 females lived at least 1 year, and the median time on study was 72 weeks for males and 59 weeks for females.

No tumors occurred at a statistically significant incidence in treated rats or mice compared with controls; however, it should be noted that in this study, treatment of both species was stopped at week 52 and the studies were terminated by week 83, which is earlier than in current bioassays where animals are treated until termination of the studies at 2 years. In addition, there was poor survival among the treated mice.

It is concluded that the results of this study do not allow evaluation of the possible carcinogenicity of emetine.

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I. INTRODUCTION

Emetine (CAS 483-18-1; NCI CO1605), an alkaloid derived from the root of the tropical plant <u>Cephaelis</u> <u>ipecacuanha</u>, is used to treat severe amebic intestinal infections, amebic hepatitis, and amebic involvement of the lung, brain, skin, and other tissues (Rollo, 1975). Clinical symptoms of toxicity due to emetine include nausea, vomiting, diarrhea, muscle weakness, and cardiovascular disturbance.

In experimental studies, emetine was cytotoxic to transplantable mouse osteosarcoma <u>in vitro</u> but not <u>in vivo</u> (Morasca et al., 1974). In clinical studies, emetine was effective against nonspecific granuloma (Grollman, 1966), and the analogue, dehydroemetine, was effective against leukemia, Hodgkin's disease, and rectal adenocarcinoma (Abd-Rabbo, 1966 and 1969; Wyburn-Mason, 1969). The drug has been shown to interfere with nucleic acid and protein biosynthesis in HeLa and other mammalian cells (Gilead and Becker, 1971; Grollman and Huang, 1973).

Emetine was tested in the carcinogenesis program in an attempt to evaluate the carcinogenicity of certain drugs that are used in humans over extended periods of time.

II. MATERIALS AND METHODS

A. <u>Chemical</u>

Emetine hydrochloride (6',7',10,11-tetramethoxyemetan dihydrochloride) was supplied by the Drug Development Branch, Division of Cancer Treatment (DCT), National Cancer Institute (NCI). The chemical was obtained in a single batch (Lot No. 988-0800) from Sigma Chemical Company, St. Louis, Missouri.

Analyses performed by Stanford Research Institute under contract to the Drug Development Branch, DCT, NCI, confirmed the identity and purity of this batch. Following United States Pharmacopeia (USP) assay procedures, the batch was found to contain 11.5% water, corresponding to a tetrahydrate, and approximately 1.5% cephaeline (a precursor in the synthesis). Less than 0.1% of one additional (unidentified) alkaloid was detected. These results conform to USP specifications. In addition, elemental analyses (C, H, N, C1⁻) were correct for $C_{20}H_{40}N_{2}O_{4} \cdot 2HC1 \cdot 4H_{2}O_{5}$ the molecular formula of emetine dihydrochloride tetrahydrate. Infrared, ultraviolet, and nuclear magnetic resonance spectra also were as expected for emetine hydrochloride, hereinafter called emetine.

According to the USP, the chemical is affected by light. Stanford Research Institute reported noticeable decomposition (by

thin-layer chromatography) of an aqueous solution (ca. 25 mg/ml) after 1 week of exposure to ordinary illumination at room temperature. Therefore, solutions were prepared immediately before injection.

The bulk chemical was stored at $-20^{\circ}C$.

B. Dosage Preparation

Buffered saline solution (pH 6.9) was used as the vehicle for intraperitoneal injection of the chemical. The drug and the vehicle were mixed in a 10-ml glass Potter-Elvehjem tissue grinder with a Teflon pestle. Fresh solutions were prepared daily and administered immediately. The concentrations were 0.02 and 0.04% for rats and 0.016, 0.032, and 0.064% for mice.

C. Animals

Sprague-Dawley rats and B6C3F1 mice of both sexes, obtained from Charles River Breeding Laboratories, Inc., Wilmington, Massachusetts, through contracts of the DCT, NCI, were used in this bioassay. On arrival at the laboratory, all animals were quarantined for an acclimation period (rats for 5 days, mice in the original study for 18 days, mice in the restarted study for 25 days), assigned to control and treated groups, and then earmarked for individual identification.

D. Animal Maintenance

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

Rats were housed five per cage and mice seven per cage in solidbottom stainless steel cages (Hahn Roofing and Sheet Metal Co., Birmingham, Ala.). The bottoms of the rat cages were lined with Iso-Dri[®] hardwood chips (Carworth, Edison, N.J.), and cage tops were covered with disposable filter bonnets beginning at week 18. Mouse cages were provided with Sterolit[®] clay bedding (Englehard Mineral and Chemical Co., New York, N.Y.). Cages of restarted groups of mice were provided with filter bonnets at week 75. Bedding was replaced once per week; cages, water bottles, feeders, and racks were sanitized once per week.

The rats and mice were housed in separate rooms. Control animals were housed with their respective treated animals. Animals treated with emetine were maintained in the same rooms as animals of the same species being treated with the following chemicals:

RATS

Gavage Studies

```
cholesterol (p-(bis(2-chloroethyl)amino)phenyl)acetate
  (phenesterin) (CAS 3546-10-9)
estradiol bis((p-(bis(2-chloroethyl)amino)phenyl)acetate)
  (estradiol mustard) (CAS 22966-79-6)
```

Intraperitoneal Injection Studies

```
4'-(9-acridinylamino)methansulfon-m-aniside monohydrochloride
  (MAAM) (NSC 141549)
acronycine (CAS 7008-42-6)
5-azacytidine (CAS 320-67-2)
beta-2'-deoxy-6-thioguanosine monohydrate (beta-TGdR)
  (CAS 789-61-7)
1,4-butanediol dimethanesulfonate (busulfan) (CAS 55-98-1)
3.3'-iminobis-l-propanol dimethanesulfonate (ester)
 hydrochloride [IPD] (CAS 3458-22-8)
(+)-4,4'-(1-methy1-1,2-ethanediy1)bis-2,6-piperazinedione
  (ICRF-159) (CAS 21416-87-5)
N, 3-bis(2-chloroethyl)tetrahydro-2H-1,3,2-oxazaphosphorin-2-
  amine-2-oxide (isophosphamide) (CAS 3778-73-2)
N-(2-chloroethyl)-N-(1-methyl-2-phenoxyethyl)benzylamine
 hydrochloride (phenoxybenzamine) (CAS 63-92-3)
N-(1-methylethyl)-4-((2-methylhydrazino)methyl)benzamide
  monohydrochloride (procarbazine) (CAS 366-70-1)
tris(1-aziridiny1)phosphine sulfide (thio-TEPA) (CAS 52-24-4)
2,4,6-tris(dimethylamino)-s-triazine (CAS 645-05-6)
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MICE

Feed Studies

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

Gavage Studies

```
cholesterol (p-(bis(2-chloroethyl)amino)phenyl)acetate
  (phenesterin) (CAS 3546-10-9)
estradiol bis((p-(bis(2-chloroethyl)amino)phenyl)acetate)
  (estradiol mustard) (CAS 22966-79-6)
```

Intraperitoneal Injection Studies

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

E. <u>Subchronic Studies</u>

Subchronic studies were conducted to estimate the maximum tolerated doses of emetine, on the basis of which low and high doses were determined for administration in the chronic studies. In the subchronic studies, Sprague-Dawley male rats and Swiss male mice were administered emetine by intraperitoneal injection three times per week for 45 days. Following treatment, all animals were observed for an additional 45 days before termination of the study. Five animals of each species were used at each dose, and 10 animals of each species were used as untreated or vehicle (saline) controls.

In rats, administration of emetine at 0.1, 0.25, 0.5, and 1.0 mg/kg body weight resulted in no deaths and in no weight depression that exceeded the 15% guideline. At 2.0 mg/kg, the mean body weight was depressed and two animals died, one in week 7 and one in week 8. No lesions were observed in any of the animals. The low and high doses for rats were set at 0.5 and 1 mg/kg for the chronic studies.

In mice, the subchronic study was initially conducted at doses of 0.17, 0.43, 0.85, 1.7, and 3.4 mg/kg. No deaths attributable to drug toxicity and no weight depression exceeding the 15% guideline resulted. A second study was then performed using doses of 6.4, 12.8, and 25.6 mg/kg. Four of the five animals receiving 12.8 mg/kg died prior to week 6, and 4/5 animals receiving 25.6 mg/kg died prior to week 4; however, there were no deaths at 6.4 mg/kg. Weight depression did not exceed the 15% guideline in animals receiving 6.4 mg/kg, and no lesions were

seen in any of the animals at necropsy. The low and high doses for mice were set at 3.2 and 6.4 mg/kg for the chronic studies.

F. Designs of Chronic Studies

The designs of the chronic studies are shown in tables 1, 2, and 3.

Since the numbers of rats in the matched vehicle-control groups were small, pooled vehicle-control groups of rats also were used for statistical comparisons. Vehicle-control rats from the current injection studies on emetine were combined with vehiclecontrol rats from injection studies performed on 5-azacytidine (CAS 320-67-2). The pooled controls for statistical tests using rats consisted of 25 males and 25 females. The study on 5-azacytidine in rats was also conducted at Southern Research Institute and overlapped the emetine study by at least 17 months. The vehicle-control groups for 5-azacytidine were of the same strain and from the same suppliers, and they were examined by the same pathologists.

G. <u>Clinical and Pathologic Examinations</u>

All animals were observed twice daily for signs of toxicity, and animals that were moribund were killed and necropsied. Rats and mice were weighed individually every week for the first 2 months

Sex and	Initial	Emetine	Time on Study	
Treatment	No. of	Dose ^b	Treated ^c	Untreated
Group	<u>Animals</u> ^a	(mg/kg)	(weeks)	(weeks)
Male				
Untreated-Control	10	0		84
Vehicle-Control	10	$0^{\mathbf{d}}$	52	32
Low-Dose	35	0.5	52	32
High-Dose	35	1	52	31
Female				
Untreated-Control	10	0		84
Vehicle-Control	10	$\mathbf{p}^{\mathbf{q}}$	52	32
Low-Dose	35	0.5	52	32
High-Dose	35	1	52	32

Table 1. Design of Chronic Studies of Emetine in Rats

^aMale rats were 34 days of age and female rats were 41 days of age when placed on study.

^bEmetine was administered intraperitoneally in buffered saline three times per week at a volume of 0.25 ml/100 g body weight. Doses were based on individual weights.

^CAll rats were placed on study on the same day.

^dVehicle-control groups received buffered saline solution at the same volume as the treated groups.

Sex and	Initial	Emetine	Time	on Study
Treatment	No. of	Dose ^b	Treated	Untreated
Group	<u>Animals</u> ^a	(mg/kg)	(weeks)	(weeks)
Low-Dose				
Untreated-Control ^C	10	0		80
Low-Dose				
Vehicle-Control ^C	10	$0^{\mathbf{d}}$	52	26
Low-Dose ^C	35	1.6	52	26
Mid- and High-Dose				·
Untreated-Control	15	0		83
Mid- and High-Dose				
Vehicle-Control	15	0^{d}	52	30
Mid-Dose	35	3.2	52	20 ^e
High-Dose	35	6.4	28 [£]	

Table 2. Design of Chronic Studies of Emetine in Male Mice

^aHigh- and mid-dose animals and their controls were 48 days of age when placed on study; low-dose animals and their controls were 58 days of age.

- ^bEmetine was administered intraperitoneally in buffered saline three times per week at a volume of 0.1 ml/l0 g body weight. Doses were based on the mean weights of the animals in each cage.
- ^CDue to the high mortality of the treated animals, one additional low-dose group and two low-dose control groups were started 32 weeks after the original start of the study. The original low-dose group became the mid-dose group.
- ^dVehicle-control groups received buffered saline solution at the same volume as the treated groups.

^eAll mid-dose animals died or were killed by week 72.

^fAll high-dose animals died or were killed by week 28.

Sex and	Initial	Emetine	Time o	on Study
Treatment	No. of	Dose ^b	Treated	Untreated
Group	<u>Animals</u> a	(mg/kg)	(weeks)	(weeks)
Low-Dose				
Untreated-Control ^c	10	0		80
Low-Dose				
Vehicle-Control ^C	10	0q	52	27
Low-Dose ^C	35	1.6	52	26
Mid- and High-Dose				
Untreated-Control	15	0		83
Mid- and High-Dose				
Vehicle-Control	15	0q	52	31
Mid-Dose	35	3.2	40e	
High-Dose	35	6.4	33f	

Table 3. Design of Chronic Studies of Emetine in Female Mice

^aHigh- and mid-dose animals and their controls were 49 days of age when placed on study; low-dose animals and their controls were 58 days of age.

^bEmetine was administered intraperitoneally in buffered saline three times per week at a volume of 0.1 ml/l0 g body weight. Doses were based on the mean weights of the animals in each cage.

^cDue to the high mortality of the treated animals, one additional low-dose group and two low-dose control groups were started 32 weeks after the original start of the study. The original low-dose group became the mid-dose group.

dVehicle-control groups received buffered saline solution at the same volume as the treated groups.

eAll mid-dose animals died or were killed by week 40.

^fAll high-dose animals died or were killed by week 33.

and every 2 weeks thereafter. Palpation for masses was carried out at each weighing.

The pathologic evaluation consisted of gross and microscopic examination of major tissues, major organs, and all gross lesions from killed animals and from animals found dead. The following tissues were examined microscopically: skin, muscle, lungs and bronchi, trachea, bone marrow, spleen, lymph nodes, thymus, heart, salivary gland, liver, gallbladder (mice), pancreas, esophagus, stomach, small intestine, large intestine, kidney, urinary bladder, pituitary, adrenal, thyroid, parathyroid, mammary gland, testis or ovary, prostate or uterus, brain, and sensory organs. Peripheral blood smears from each animal were Occasionally, additional tissues were also examined prepared. The different tissues were preserved in 10% microscopically. buffered formalin, embedded in paraffin, sectioned, and stained with hematoxylin and eosin. Special staining techniques were utilized when indicated for more definitive diagnosis.

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

represent the number of animals that were placed on study in each group.

H. Data Recording and Statistical Analyses

Pertinent data on this experiment have been recorded in an automatic data processing system, the Carcinogenesis Bioassay Data System (Linhart et al., 1974). The data elements include descriptive information on the chemicals, animals, experimental design, clinical observations, survival, body weight, and individual pathologic results, as recommended by the International Union Against Cancer (Berenblum, 1969). Data tables were generated for verification of data transcription and for statistical review.

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

Probabilities of survival were estimated by the product-limit procedure of Kaplan and Meier (1958) and are presented in this report in the form of graphs. Animals were statistically censored as of the time that they died of other than natural causes or were found to be missing; animals dying from natural causes were not statistically censored. Statistical analyses for

a possible dose-related effect on survival used the method of Cox (1972) for testing two groups for equality and Tarone's (1975) extensions of Cox's methods for testing for a dose-related trend. One-tailed P values have been reported for all tests except the departure from linearity test, which is only reported when its two-tailed P value is less than 0.05.

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

The purpose of the statistical analyses of tumor incidence is to determine whether animals receiving the test chemical developed a significantly higher proportion of tumors than did the control animals. As a part of these analyses, the one-tailed Fisher exact test (Cox, 1970) was used to compare the tumor incidence of a control group with that of a group of treated animals at each dose level. When results for a number of treated groups (k) are

compared simultaneously with those for a control group, a correction to ensure an overall significance level of 0.05 may be made. The Bonferroni inequality (Miller, 1966) requires that the P value for any comparison be less than or equal to 0.05/k. In cases where this correction was used, it is discussed in the narrative section. It is not, however, presented in the tables, where the Fisher exact P values are shown.

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

A time-adjusted analysis was applied when numerous early deaths resulted from causes that were not associated with the formation of tumors. In this analysis, deaths that occurred before the first tumor was observed were excluded by basing the statistical tests on animals that survived at least 52 weeks, unless a tumor was found at the anatomic site of interest before week 52. When such an early tumor was found, comparisons were based exclusively on animals that survived at least as long as the animal in which

the first tumor was found. Once this reduced set of data was obtained, the standard procedures for analyses of the incidence of tumors (Fisher exact tests, Cochran-Armitage tests, etc.) were followed.

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

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

group. The hypothesis of equality between the true proportion of a specific tumor in a treated group and the proportion in a control group corresponds to a relative risk of unity. Values in excess of unity represent the condition of a larger proportion in the treated group than in the control.

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

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

A. Body Weights and Clinical Signs (Rats)

Body weights of the low-dose male rats were comparable to those of both the untreated and vehicle controls (figure 1). The weights of the high-dose males were lower than those of the controls during the period in which emetine was administered, but were similar after treatment was discontinued. The high-dose female rats had lower body weights than those of both the control groups, while the body weights of the low-dose female rats were lower than those of the untreated controls, but similar to those of the vehicle controls. Fluctuations in the growth curve may be due to mortality; as the size of the group diminishes, the mean body weight may be subject to wide variation.

No other clinical signs clearly associated with the administration of emetine were recorded.

B. Survival (Rats)

The Kaplan and Meier curves estimating the probabilities of survival for male and female rats administered emetine by intraperitoneal injection at the doses used in this experiment, together with those of the matched controls, are shown in figure 2.



Figure 1. Growth Curves For Rats Treated With Emetine



Figure 2. Survival Curves for Rats Treated With Emetine

In male rats, the Tarone test result for positive dose-related trend in mortality is significant (P < 0.001), and an indicated departure from linear trend is observed (P < 0.001), due to the steep increase in mortality in the high-dose rats, of which only 26% lived to the end of the study, with a median time on study of 53 weeks. Of the high-dose male rats, 18/35 lived at least 52 weeks on study, and no tumor was observed before this time. At least 80% of the low-dose, vehicle-control, and untreated-control groups survived to the end of the study.

In female rats, the Tarone test result is not significant; 69% of the high-dose group, 83% of the low-dose group, all of the vehicle-control group, and 70% of the untreated-control group survived to termination of the study, providing sufficient numbers of treated female rats for development of late-appearing tumors.

C. Pathology (Rats)

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

A variety of neoplasms were seen both in control and treated rats. Neoplasms were seen more frequently in the females than in the males. The most frequently observed neoplasms in the female
rats were chromophobe adenomas of the pituitary gland, cortical adenomas of the adrenal gland, and fibroadenomas of the mammary gland. The neoplasms of the pituitary and adrenal glands occurred with approximately equal frequency in treated and control rats. The incidence of fibroadenomas of the mammary gland was higher in the treated female rats than in the controls. These tumors were characterized by local proliferations of welldifferentiated fibrous tissue surrounding proliferating mammary acinar and ductular epithelium. Much structural variation was In some of the neoplasms, the present in these neoplasms. connective tissue stroma was predominant, and in others, there was a marked epithelial overgrowth. The histologic appearance of the neoplasms in both the treated and control female rats was similar to fibroadenomas known to occur spontaneously in female Sprague-Dawley rats. Although the incidence of the neoplasm was higher in the treated rats than in the controls, it was comparable to published reports of spontaneously occurring mammary gland fibroadenomas in this strain of rat (Davis et al., 1959; Prejean et al., 1973; Thompson et al., 1961).

A variety of inflammatory, degenerative, and proliferative lesions commonly seen in aged Sprague-Dawley rats were observed with approximately equal frequency in treated and control animals. Although there was a higher incidence of spontaneous

deaths in the treated groups, there were no consistent neoplastic or nonneoplastic lesions in the animals that died spontaneously.

There were instances in this study where neoplastic lesions occurred only in treated animals, or with increased frequency when compared with the control group. The nature and incidence of these lesions were similar to those known to occur spontaneously in aged Sprague-Dawley rats. The histopathologic evaluation of the study indicated that emetine administered for the time period and at the doses used in this study did not induce neoplastic lesions in the Sprague-Dawley rat.

D. Statistical Analyses of Results (Rats)

Tables El and E2 in Appendix E contain the statistical analyses of the incidences of those primary tumors that were observed in at least 5% of a treated group. The untreated controls are not included in these tables and analyses, since the experimental conditions of the vehicle controls more closely resemble those of the treated animals.

In both sexes, the results of the Cochran-Armitage test for positive dose-related trend and the Fisher exact test for direct comparison of incidences between each of the control groups and each of the treated groups are not significant.

In female rats the Cochran-Armitage test and the incidence of cortical adenoma of the adrenal gland using pooled controls indicate a significant trend in the negative direction, but this negative trend is not substantiated by the Fisher exact test. Furthermore, the life-table-adjusted test for the incidence of cortical adenoma does not show a significant negative trend.

In each of the 95% confidence intervals of relative risk, shown in the tables, the value of one is included, indicating the absence of positive significant results. It should also be noted that each of the intervals has an upper limit greater than one, indicating the theoretical possibility of the induction of tumors by emetine, which could not be detected under the conditions of this test. .

IV. <u>RESULTS - MICE</u>

A. Body Weights and Clinical Signs (Mice)

The high-dose male and female mice gained little weight, and most of these animals died by week 33 (figures 3 and 4). The mean body weights of the male mid-dose mice were lower than those of both the control groups, while those of the female mid-dose mice were comparable to those of the vehicle controls during the 40 weeks these mice survived. Mean body weights of the low-dose groups of both sexes were comparable to those of both the control groups.

Emetine was sufficiently toxic at the mid dose and high dose to cause a shortened life span. No clinical signs of toxicity were reported for the low-dose groups.

To control respiratory disease, the initial groups of mice were treated with oxytetracycline in the drinking water at doses of 0.6 mg/ml for 5 days during week 55, followed by treatment for 5 days at 0.3 mg/ml. The restarted groups were not treated with oxytetracycline.

B. Survival (Mice)

The Kaplan and Meier curves estimating the probabilities of survival for male and female mice administered emetine by







Figure 4. Growth Curves For Female Mice Treated With Emetine

intraperitoneal injection at the doses used in this experiment, together with those of the matched controls, are shown in figures 5 and 6.

In both sexes, the Tarone test results for positive dose-related trend in mortality are significant (P < 0.001), and an indicated departure from linear trend is observed (P < 0.001), due to the steep increase in mortality in the high- and mid-dose mice. In male mice, none of the high- and mid-dose groups, but 41% of the low-dose group and at least 78% of the controls, lived to the end of the study. The median times on study for the high-, mid-, and low-dose male mice were 21 weeks, 30 weeks, and 72 weeks, respec-Only 1/35 high-dose and 2/35 mid-dose male mice lived tively. beyond week 52 on study; no tumor was observed in these two groups of mice. Thirty of 35 low-dose male mice survived beyond week 52, but one tumor (hepatocellular carcinoma) was found as early as week 50 on study. Time-adjusted analyses were also performed, eliminating animals that died before week 52 on study. Since one hepatocellular carcinoma occurred at week 50, the timeadjusted analysis of this particular incidence is based on animals that lived at least as long as week 50 on study.

In female mice, none of the high- and mid-dose groups, but 31% of the low-dose group, at least 60% of the vehicle controls, and at least 80% of the untreated controls lived to the end of the



Figure 5. Survival Curves For Male Mice Treated With Emetine



Figure 6., Survival Curves For Female Mice Treated With Emetine

study. The median times on study of the high-, mid-, and low-dose female mice were 25 weeks, 23 weeks, and 59 weeks, respectively. All of the high- and mid-dose female mice died before week 52 on study. No tumor was observed in the mid-dose group, but one alveolar/bronchiolar adenoma was found in the high-dose group as early as week 21. Of the low-dose female mice, 21/35 lived to at least week 52; no tumor was observed before that time.

The early deaths of the treated mice of both sexes may have affected the incidences of late-appearing tumors.

C. Pathology (Mice)

Histopathologic findings on neoplasms in mice are summarized in Appendix B, tables B1-B4; findings on nonneoplastic lesions are summarized in Appendix D, tables D1-D4.

A variety of neoplasms occurred with approximately equal frequency in control and treated mice. There was a low incidence of neoplasia in both control and treated mice. The extremely low incidence of neoplasia in the mid- and high-dose mice was probably due to the high number of early deaths that occurred in these groups.

Several inflammatory and degenerative lesions occurred with approximately equal frequency in the control and treated mice. The treated groups had a higher incidence of inflammatory lesions in the respiratory system, the digestive system, and the abdominal cavity when compared with the control groups. These inflammatory lesions appeared to be related to emetine at these doses and associated with an increase in mortality.

The histopathologic evaluation of the lesions indicated that emetine administered for the time period and at the doses used in this study had a toxic effect, since the higher doses caused a shortened life span.

D. Statistical Analyses of Results (Mice)

Tables F1 and F2 in Appendix F contain the statistical analyses of the incidences of those primary tumors that were observed in at least 5% of a treated group. The untreated controls are not included in these tables and analyses, since the experimental conditions of the vehicle controls more closely resemble those of the treated groups. There is no table or analysis for female mice, because the proportions of lesions in the treated groups are less than 5%. In fact, only three tumors were observed among all treated female mice: two in the low-dose and one in the high-dose group.

Since there was extremely high mortality in the treated male mice, time-adjusted analyses were performed, eliminating animals that died before week 52 on study. One hepatocellular carcinoma was found as early as week 50 in the low-dose group; thus, the time-adjusted analysis of the incidence of this tumor of the liver is based only on animals that lived at least as long as week 50 on study. These time-adjusted analyses of the male mice are shown in table F2 in Appendix F.

The Cochran-Armitage test is not applied here, because the survivals of the various treated and control groups are not comparable. The Fisher exact test for direct comparison of the incidences in each of the control groups with those in each of the treated groups are not significant, either before or after the time-adjustment. In each of the 95% confidence intervals of relative risk, shown in the tables, the value of one is included, indicating the absence of positive significant results. It should also be noted that each of the intervals has an upper limit greater than one, indicating the theoretical possibility of the induction of tumors by emetine, which could not be detected under the conditons of this test.

V. DISCUSSION

In this bioassay, emetine was toxic to male rats at the high dose, to both sexes of mice at the high and mid doses, and to a lesser extent at the low dose, as shown by the low survival in these groups. This study was terminated at week 84 in rats and week 83 in mice. Twenty-six percent of the high-dose male rats and 69% of the high-dose female rats survived to the end of the study. In mice, none of the high- and mid-dose animals of either sex survived to the end of the study. At the low-dose, 30/35 males and 21/35 females lived for at least 1 year, and the median time on study was 72 weeks for the males and 59 weeks for the females.

A variety of neoplasms were observed in both control and treated rats, but only the incidence of fibroadenoma of the mammary gland in the females was higher in the treated rats than in the controls. However, the incidence was not statistically significant.

The incidences of neoplasms in treated mice of each sex were low and were similar to those of both untreated and vehicle controls.

As early as 1912, the use of emetine in the chemotherapy of amebiasis was recorded, and reports of its antitumor activity appeared as early as 1918 and 1919 (Grollman and Jarkovsky,

1975). The results of a 24-week test for the carcinogenicity of emetine in mice, evaluated by measuring the induction of pulmonary tumors, was negative (Stoner et al., 1973).

It should be noted that in this study, treatment of both species was stopped at week 52 and the studies were terminated by week 83, which is earlier than in current bioassays where animals are treated until termination of the studies at 2 years. In addition, there was poor survival among the treated mice.

It is concluded that the results of this study do not allow evaluation of the possible carcinogenicity of emetine.

- Abd-Rabbo, H., Chemotherapy of neoplasia (cancer) with dehydroemetine. J. Trop. Med. Hyg. 72(12):287-290, 1969.
- Abd-Rabbo, H., Dehydroemetine in chronic leukemia. Lancet 1:1161-162, 1966.
- Armitage, P., <u>Statistical Methods in Medical Research</u>, John Wiley & Sons, Inc., 1971, pp. 362-365.
- Berenblum, I., ed., <u>Carcinogenicity Testing:</u> <u>A Report of the</u> <u>Panel on Carcinogenicity of the Cancer Research Commission</u> <u>of the UICC</u>, International Union Against Cancer, Geneva, 1969.
- Cox, D. R., Regression models and life tables. J. <u>R. Statist.</u> Soc. <u>B</u> 34(2):187-220, 1972.
- Cox, D. R., <u>Analysis</u> of <u>Binary Data</u>, Methuen & Co., Ltd., London, 1970, pp. 48-52.
- Davis, R. K., Stevenson, G. T., and Busch, K. A., Tumor incidence in normal Sprague-Dawley female rats. <u>Cancer Res.</u> 16:194-197, 1959.
- Gart, J. J., The comparison of proportions: a review of significance tests, confidence limits and adjustments for stratification. <u>Rev. Int. Statist. Inst.</u> 39:148-169, 1971.
- Gilead, Z. and Becker, Y., Effect of emetine on ribonucleic acid biosynthesis in HeLa cells. <u>Eur. J. Biochem.</u> 23:143-149, 1971.
- Grollman, A. P. and Jarkovsky, Z., Emetine and related alkaloids. In: <u>Antibiotics, Vol. III: Mechanism of Action of</u> <u>Antimicrobial and Antitumor Agents</u>, eds., Corcoran, J. W. and Hahn, F. E., Springer-Verlag, New York, 1975, pp. 420-435.
- Grollman, A. F. and Huang, M. T., Inhibitors of protein synthesis in eukaryotes: tools in cell research. <u>Federation Proc.</u> <u>32</u>:1673-1678, 1973.

- Grollman, A. P., Structural basis for inhibition of protein synthesis by emetine and cycloheximide based on an analogy between ipecac alkaloids and glutarimide antibiotics. <u>Proc.</u> Natl. Acad. Sci., USA <u>56</u>:1867-1874, 1966.
- Kaplan, E. L. and Meier, P., Nonparametric estimation from incomplete observations. <u>J. Amer. Statist. Assoc.</u> <u>53</u>:457-481, 1958.
- Linhart, M. S., Cooper, J., Martin, R. L., Page, N., and Peters, J., Carcinogenesis bioassay data system. <u>Comp. and Biomed.</u> <u>Res.</u> 7:230-248, 1974.
- Miller, R. G., Jr., <u>Simultaneous</u> <u>Statistical</u> <u>Inference</u>, McGraw-Hill Book Co., New York, 1966, pp. 6-10.
- Morasca, L., Balconi, G., Erba, E., Lilieveld, P. and van Putten, L. M., Cytotoxic effect <u>in vitro</u> and tumour volume reduction <u>in vivo</u> induced by chemotherapeutic agents. <u>Eur.</u> J. <u>Cancer</u> <u>10</u>(10):667-671, 1974.
- Prejean, J. D., Peckham, J. C., Casey, A. E., Greswald, D. P., Weisburger, E. K., and Weisburger, J. H., Spontaneous tumors in Sprague-Dawley rats and Swiss mice. <u>Cancer Res.</u> <u>33</u>:2768-2773, 1973.
- Rollo, I. M., Drugs used in the chemotherapy of amebiasis. In: <u>The Pharmacological Basis of Therapeutics</u>, eds., Goodman, L. S. and Gilman, A., MacMillan, New York, 1975, pp. 1069-1080.
- Saffiotti, U., Montesano, R., Sellakumar, A. R., Cefis, F., and Kaufman, D. G., Respiratory tract carcinogenesis in hamsters induced by different numbers of administrations of benzo(a) pyrene and ferric oxide. <u>Cancer Res.</u> 32:1073-1081, 1972.
- Stoner, G. D., Shimkin, M. B., Kniazeff, A. J., Weisburger, J. H., Weisburger, E. K., and Gori, G. B., Test for carcinogenicity of food additives and chemotherapeutic agents by the pulmonary tumor response in strain A mice. <u>Cancer Res.</u> 33:3069-3085, 1973.
- Tarone, R. E., Tests for trend in life table analysis. <u>Biometrika</u> <u>62(3)</u>:679-682, 1975.

- Thompson, S. W., Husby, R. A., Fox, M. A., Davis, C. L., and Hunt, R. D., Spontaneous tumors in the Sprague-Dawley rat. J. Natl. Cancer Inst. 27:1037-1057, 1961.
- Wyburn-Mason, R., Dehydroemetine in chronic leukemia. Lancet 1:1266-1267, 1966.

APPENDIX A

SUMMARY OF THE INCIDENCE OF NEOPLASMS IN

RATS TREATED WITH EMETINE

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TABLE A1.

SUMMARY OF THE INCIDENCE OF NEOPLASMS IN MALE RATS TREATED WITH EMETINE

	UNTREATED Control	VEHICLE Control	LOW DOSE	HIGH DOSE
ANTMALS INITIALLY IN STUDY ANIMALS NECROPSIED ANIMALS EXAMINED HISTOPATHOLOGICALLY	10 10 10	10 10 10	35 35 35 35	35 27 27
INTEGUMENTARY SYSTEM				
*SKIN SQUAMOUS CELL PAPILIONA	(10)	(10)	(35) 1 (3%)/	(27)
*SUBCUT TISSUE FIBROMA LIPOMA LEIOMYOSARCOMA	(10)	(10)	(35) 2 (6%) 1 (3%) 1 (3%)	(27)
RESPIRATORY SYSTEM				
NONE				
HEMATOPOIETIC SYSTEM				
NONE		·		
CIRCULATORY SYSTEM				
NONE				
DIGESTIVE SYSTEM				
*LIVER HEPATOCELLULAR ADENOMA	(13)	(10)	(35) 2 (6%)	(27)
#STOMACH FIBROSARCOMA	(10)	(10)	(35)	(27) 1 (4)
URINARY SYSTEM				
NONE				

TABLE A1. MALE RATS: NEOPLASMS (CONTINUED)

	UNTREATED Control	VEHICLE CONTROL	LOW DOSE	HIGH DOSE
ENDOCRINE SYSTEM				
*PITUITARY Chromophobe Adenoma Chromophobe Carcinoma	(10) 1 (10%) 2 (20%)	(10) 1 (10%) 1 (10%)	(32) 3 (9%) 1 (3%)	(22) 1 (5%) 1 (5%)
*ADRENAL Corticàl Adenoma Pheochromocytoma	(9)	(10) 1 (10 %)	(35) 1 (3%) 1 (3%)	(27)
<pre>*PARATHYROID Adenoma, NOS</pre>	(8)	(4)	(10)	(7) 1 (14 %
*PANCREATIC ISLETS ISLET-CELL ADENOMA	(10)	(9)	(34) 2 (6 %)	(26) 1 (4 %)
REPRODUCTIVE SYSTEM				
*MAMMARY GLAND Fibroadenoma	(10)	(10)	(35)	(27) 1 (4%)
*TESTIS INTERSTITIAL-CELL TUMOR	(9)	(10)	(34) 3 (9 %)	(27)
FERVOUS SYSTEM				
SPECIAL SENSE ORGANS NONE				
NUSCULOSKELETAL SYSTEM				
BODY CAVITIES				
NONE				
NLL OTHER SYSTEMS				

TABLE A1. MALE RATS: NEOPLASMS (CONTINUED)

			LOW DOSE	
ANIMAL DISPOSITION SUMMARY				
ANIMALS INITIALLY IN STUDY NATURAL DEATH@ Moribund Sacrifice Scheduled Sacrifice	10 2	10 1	35 1 2	35 15 11
ACCIDENTALLY KILLED TERMINAL SACRIFICE ANIMAL MISSING	8	9	1 31	9
D INCLUDES AUTOLYZED ANIMALS				
TUNOR SUMMARY				
TOTAL ANIMALS WITH PRIMARY TUMORS* Total primary tumors	3 3	3 3	13 18	5 6
TOTAL ANIMALS WITH BENIGN TUMORS TOTAL BENIGN TUMORS	1 1	2 2	13 16	4 4
TOTAL ANIMALS WITH MALIGNANT TUMORS Total Malignant Tumors	2 2	1 1	2 2	2 2
TOTAL ANIMALS WITH SECONDARY TUMORS# TOTAL SECONDARY TUMORS				
TOTAL ANIMALS WITH TUMORS UNCERTAIN- BENIGN OR MALIGNANT TOTAL UNCERTAIN TUMORS				
TOTAL ANIMALS WITH TUMORS UNCERTAIN- PRIMARY OR METASTATIC TOTAL UNCERTAIN TUMORS				
PRIMARY TUMORS: ALL TUMORS EXCEPT SE SECONDARY TUMORS: METASTATIC TUMORS			ADJACENT ORGAN	

TABLE A2.

SUMMARY OF THE INCIDENCE OF NEOPLASMS IN FEMALE RATS TREATED WITH EMETINE

UNTREATED Control	VEHICLE Control	LOW DOSE	HIGH DOSE		
10	10	35	35		
10 10	10 10	35 35	35 35		
(10)	(10)	(35)	(35)		
		1 (3%) 1 (3%)			
		1 (3%)			
(10)	(9)	(34)	(35)		
1 (10%)			1 (3%)		
		(35) 11_(31%)			
	CONTROL 10 10 (10) (10) (10) 1 (10%)	CONTROL CONTROL 10 10 10 10 10 10 (10) (10) (10) (10) (10) (10)	CONTROL CONTROL 10 10 35 10 10 35 (10) (10) (35) (10) (10) (35) (10) (10) (35) (10) (10) (35) (10) (10) (35) (10) (10) (35) (10) (10) (34)		

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TABLE A2.	FEMALE	RATS:	NEOPL	ASMS	(CONTINUED)

	UNTREATED Control	VEHICLE Control	LOW DOSE	HIGH D OSE
CHROMOPHOBE CARCINONA ACIDOPHIL ADENONA	1 (10%)	1 (10%)	1 (3%) 1 (3%)	1 (3%)
*ADRENAL	(10)	(10)	(35)	(35)
CORTICAL ADENOMA Pheochromocytona	1 (10%)	3 (30%)	9 (26%) 1 (3%)	2- (6%)
#THYROID C-CELL ADENOMA	(10)	(7)	(28) 1 (4 %)	(24) 1 (4%)
*PANCREATIC ISLETS ISLET-CELL ADENOMA	(10)	(10)	(35)	(34)
EPRODUCTIVE SYSTEM	•			
*NAMNARY GLAND	(10)	(10)	(35)	(35)
ADENOMA, NOS Adenocarcinoma, Nos	1 (10%)		1 (3%) 1 (3%)	2 (6%)
PAPILLARY ADENOMA			1 (3%)	
PIBRONA FIBROADENOMA	1 (10%) 1 (10%)	2 (20%)	14 (40%)	1 (3%) 10 (299
#UTBRUS	(10)	(10)	(35)	(35)
SQUANOUS CELL CARCINONA SARCOMA, NOS			1 (3%)	1 (3%)
LEIONYOMA				1 (3%)
LEIONYOSARCONA ENDONETRIAL STRONAL POLYP	1 (10%)		1 (3%) 3 (9%)	1 (3%) 1 (3%)
ERVOUS SYSTEM				
NONE				
PECIAL SENSE ORGANS				
NONE				
USCULOSKELETAL SYSTEM				
NONE				
ODY CAVITIES				
*MESENTERY LIPONA	(10)	(10)	(35)	(35) 2_(6%)

NUMBER OF ANIMALS WITH TISSUE EXAMINED MICROSCOPICALLY

	UNTREATED CONTROL	VEHICLE Control	LOW DOSE	HIGH DOSI
LL OTHER SYSTEMS				
NONE				
ANIMAL DISPOSITION SUMMARY				
	10	10	35	35
ANIMALS INITIALLY IN STUDY NATURAL DEATHØ	10	10	1	3 5
MORIBUND SACRIFICE	2		5	10
SCHEDULED SACRIFICE	2		5	10
ACCIDENTALLY KILLED				
TERMINAL SACRIFICE	7	10	29	24
ANIMAL MISSING	•			• •
Ð INCLUDES AUTOLYZED ANINALS 				
TOTAL ANIMALS WITH PRIMARY TUMORS*	7	6	26	22
TOTAL PRIMARY TUMORS	9	9	50	31
TOTAL ANIMALS WITH BENIGN TUMORS	5	6	22	20
TOTAL BENIGN TUMORS	7	8	44	26
TOTAL DENIGN TOHOND	,	Ū		20
TOTAL ANIMALS WITH MALIGNANT TUMORS	2	1	5	5
TOTAL MALIGNANT TUNORS	2	1	6	5
TOTAL ANIMALS WITH SECONDARY TUMORS#	1			1
TOTAL SECONDARY TUMORS	1			1
TOTAL ANIMALS WITH TUMORS UNCERTAIN-				
BENIGN OR MALIGNANT				
TOTAL UNCERTAIN TUMORS			•	
TOTAL ANIMALS WITH TUMORS UNCERTAIN-				
PRIMARY OR METASTATIC				
TOTAL UNCERTAIN TUMORS				
-		-		
PRIMARY TUMORS: ALL TUMORS EXCEPT SE	CUBDARY TUMORS	2		

TABLE A2. FEMALE RATS: NEOPLASMS (CONTINUED)

APPENDIX B

SUMMARY OF THE INCIDENCE OF NEOPLASMS IN

MICE TREATED WITH EMETINE

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TABLE B1.

SUMMARY OF THE INCIDENCE OF NEOPLASMS IN MALE MICE TREATED WITH EMETINE (CONTROL GROUPS)

	MID & HIGH DOSE UNTREATED CONTROL	LOW DOSE Untreated Control	MID & HIGH DOSE VEHICLE CONTROL	LOW DOSI VEHICLE CONTROI
ANIMALS INITIALLY IN STUDY	15			10
ANIMALS MISSING Animals necropsied	1	10	14	10
ANIMALS EXAMINED HISTOPATHOLOGICALLY	14 14	10	14	10
NTEGUMENTARY SYSTEM				
NONE				
RESPIRATORY SYSTEM				
#LUNG ALVEOLAR/BRONCHIOLAR ADENOMA	(14) .	(9)	(14) 1 (7 %)	(10)
IEMATOPOIETIC SYSTEM				
MONOCYTIC LEUKEMIA		(10)	(14)	(10) 1 (10%
CIRCULATORY SYSTEM				
NONE				
DIGESTIVE SYSTEM				
*LIVER HEPATOCELLULAR ADENOMA HEPATOCELLULAR CARCINOMA	(14) 2 (14%) 1 (7%)	(10)	(14) 1 (7%)	(10)
JRINARY SYSTEM				
NONE				
ENDOCRINE SYSTEM				
<u>NONE</u>				
* NUMBER OF ANIMALS WITH TISSUE EXAMI * NUMBER OF ANIMALS NECROPSIED	NED MICROSCOPIC	ALLY		

TABLE B1. MALE MICE: NEOPLASMS (CONTINUED)

	MID & HIGH DOSE UNTREATED CONTROL	LOW DOSE UNTREATED CONTROL	MID & HIGH DOSE VEHICLE CONTROL	LOW DOSI Vehicle Control
REPRODUCTIVE SYSTEM				
NONE				
ERVOUS SYSTEM				
NONE				
SPECIAL SENSE ORGANS				
NONE				
NUSCULOSKELETAL SYSTEM				
NONE				
BODY CAVITIES				
NONE				
ALL OTHER SYSTEMS				
NONE				
ANIMAL DISPOSITION SUMMARY				
ANIMALS INITIALLY IN STUDY	15	10	15	10
NATURAL DEATHƏ Moribund sacrifice Scheduled sacrifice	2 1	1	2	1 1
ACCIDENTALLY KILLED TERNINAL SACRIFICE ANINAL MISSING	11 1	9	13	8
INCLUDES AUTOLYZED ANIMALS				

NUMBER OF ANIMALS WITH TISSUE BIAMINED MICROSCOPICALLY * NUMBER OF ANIMALS NECROPSIED

TABLE B1. MALE MICE: NEOPLASMS (CONTINUED)

	UNTREATED	UNTREATED	MID & HIGH DOSE Vehicle Control	VEHICLE
TUHOR SUMMARY				
TOTAL ANIMALS WITH PRIMARY TUMORS* Total primary tumors	3		2 2	1 1
TOTAL ANIMALS WITH BENIGN TUMORS TOTAL BENIGN TUMORS	2 2		2 2	
TOTAL ANIMALS WITH MALIGNANT TUMORS Total Malignant Tumops	1 1			1 1
TOTAL ANIMALS WITH SECONDARY TUMORS Total secondary tumoes	*			
TOTAL ANIMALS WITH TUNCES UNCERTAIN Benign or malignant Total uncertain tunoes	-			
TOTAL ANIMALS WITH TUMORS UNCERTAIN Primary or metastatic Total uncertain tumofs	-			
* PRIMARY TUMORS: ALL TUPORS EXCEPT S * SECONDARY TUMORS: METASTATIC TUMORS	OR TUMORS INVA	SIVE INTO AN AI	JACENT ORGAN	

TABLE B2.

SUMMARY OF THE INCIDENCE OF NEOPLASMS IN MALE MICE TREATED WITH EMETINE (TREATED GROUPS)

		MID DOSE	
NIMALS INITIALLY IN STUDY	35 35 35	35	35
NIMALS NECROPSIED NIMALS EXAMINED HISTOPATHOLOGICALLY	35 35	30 29	30 30
NTEGUMENTARY SYSTEM			
NONE			
ESPIRATORY SYSTEM			
#LUNG	(35)	(28)	(29)
ALVEOLAR/BRONCHIOLAR ADENOMA ALVEOLAR/BRONCHIOLAR CARCINOMA	2 (6%)		
ENATOPOIETIC SYSTEM			
NONE			
IRCULATORY SYSTEM			
NONE			
IGESTIVE SYSTEM			
#LIVER	(35)	(27)	(30)
HEPATOCELLULAR CARCINOMA	3 (9%)		
RINARY SYSTEM			
NONE			
NDOCRINE SYSTEM			
*THYROID	(25)	(19)	(16)
PAPILLARY_CYSTADENOMA, NOS	1 (4%)		· · ·

* NUMBER OF ANIMALS NECROPSIED

TABLE B2. MALE MICE: NEOPLASMS (CONTINUED)

	LOW DOSE	MID DOSE	HIGH DO
EPRODUCTIVE SYSTEM			
NONE			
NERVOUS SYSTEM			
NONE			
PECIÁL SENSE ORGANS			
NONE			
USCULOSKELETAL SYSTEM			
NONE			
BODY CAVITIES			
NONE			
ALL OTHER SYSTEMS			
NONE			
ANIMAL DISPOSITION SUMMARY			
ANINALS INITIALLY IN STUDY	35	35	35
NATURAL DEATHƏ Moribund sacrifice	7 13	24 10	18 17
SCHEDULED SACRIFICE	13	IV	17
ACCIDENTALLY KILLED Termiwal sacripice Animal Hissing	1 14	1	
DINCLUDES AUTOLIZED ANIMALS			

* WUNBER OF ANIMALS WECROPSIED

TABLE B2. MALE MICE: NEOPLASMS (CONTINUED)

W DOSE , , 7 3	MID DOSE	HIGH DOSE
7		
7		
7		
3		
4		
ARY TUMORS SUNORS INVASIVE	INTO AN ADJACEN	NT ORGAN
		ARY TUMORS UNORS INVASIVE INTO AN ADJACEN
TABLE B3.

SUMMARY OF THE INCIDENCE OF NEOPLASMS IN FEMALE MICE TREATED WITH EMETINE (CONTROL GROUPS)

	MID & HIGH DOSE UNTREATED CONTROL	LOW DOSE Untreated Control	MID & HIGH DOSE VEHICLE CONTROL	LOW DOS Vehicle Controi
ANTHALS INITIALLY IN STUDY ANIMALS NECROPSIED ANIMALS EXAMINED HISTOPATHOLOGICALLY	15 15 15	10 10 10	15 15 15	10 10 10
INTEGUMENTARY SYSTEM				
NONE				
RESPIRATORY SYSTEM	,			
NONE				
ENATOPOIETIC SYSTEM				
<pre>*HULTIPLE ORGANS LYMPHOCYTIC LEUKEHIA</pre>	(15)	(10) 1 (10%)	(15)	(10)
#HESENTERIC L. NODE MALIG.LYMPHONA, UNDIFFER-TYPE	(6)	(8) 1 (13%)	(6)	(8)
IRCULATORY SYSTEM				
NONE				
DIGESTIVE SYSTEM				
NONE		··		
JRINARY SYSTEM		• •		
NONE				
ENDOCRINE SYSTEM			•	
<u>NONE</u>	*			
# NUMBER OF ANIMALS WITH TISSUE EXAM * NUMBER OF ANIMALS NECROPSIED	INED MICROSCOPIC	CALLY		

TABLE B3. FEMALE MICE: NEOPLASMS (CONTINUED)

	MID & HIGH DOSE UNTREATED CONTROL	LOW DOSE UNTREATED CONTROL	MID & HIGH DOSE VEHICLE CONTROL	LOW DOS VEHICLE CONTROI
REPRODUCTIVE SYSTEM				
#UTERUS ENDOMETRIAL STROMAL POLYP			(15)	(10)
NERVOUS SYSTEM				
NONE				
SPECIAL SENSE ORGANS				
NONE				
USCULOSKELETAL SYSTEM				
NONE				
BODY CAVITIES				
NONE				
ALL OTHER SYSTEMS				
NO N E				
ANIMAL DISPOSITION SUMMARY				
ANIMALS INITIALLY IN STUDY NATURAL DEATHƏ	15 3	10	15	10 2
MORIBUND SACRIFICE SCHEDULED SACRIFICE ACCIDENTALLY KILLED		1		2
TERMINAL SACRIFICE ANIMAL MISSING	12	9	15	6
INCLUDES AUTOLYZED ANIMALS		, 		

TABLE B3. FEMALE MICE: NEOPLASMS (CONTINUED)

		LOW DOSE UNTREATED CONTROL	MID & HIGH DOSE VEHICLE CONTROL	LOW DOSE VEHICLE CONTROL
TUNOR SUMMARY				
TOTAL ANIMALS WITH PRIMARY TUMORS ⁴ Total primary tumors	• 1 1	2 2		
TOTAL ANIHALS WITH BEWIGN TUMORS TOTAL BENIGN TUMORS	1 1			
TOTAL ANIMALS WITH MALIGNANT TUMON TOTAL MALIGNANT TUMORS	RS	2 2		
TOTAL ANIMALS WITH SECONDARY TUMO TOTAL SECONDARY TUMORS	RS#			
TOTAL ANIMALS WITH TUHORS UNCERTAD Benign or malignant Total uncertain Tumors	[W-			
TOTAL ANIMALS WITH TUMORS UNCERTAD Primary or metastatic Total uncertain tumors	(#-			
PRIMARY TUHORS: ALL TUMORS EXCEPT Secondary Tumors: Metastatic Tumor			ADJACENT ORGAN	

TABLE B4.

SUMMARY OF THE INCIDENCE OF NEOPLASMS IN FEMALE MICE TREATED WITH EMETINE (TREATED GROUPS)

	LOW DOSE	MID DOSE	HIGH DOS
ANIMALS INITIALLY IN STUDY	35		35
ANIMALS MISSING		1	
ANIMALS NECROPSIED		26	27
ANIMALS EXAMINED HISTOPATHOLOGICALLY	34	26	27
INTEGUMENTARY SYSTEM			
NONE			
RESPIRATORY SYSTEM			
*LUNG	(33)	(26)	(27)
ALVEOLAR/BRONCHIOLAR ADENOMA			1 (4
HENATOPOIETIC SYSTEM			
NONE			
NONE			
DIGESTIVE SYSTEM			
NONE			
URINARY SYSTEM			
NONE			
ENDOCRINE SYSTEM			
#THYROID	(31)	(12)	(16)
ADENONA, NOS	1 (3%)	• • •	
REPRODUCTIVE SYSTEM			
NONE			

TABLE B4. FEMALE MICE: NEOPLASMS (CONTINUED)

	LOW DOSE	MID DOSE	HIGH DOS
NERVOUS SYSTEM			
NONE			
SPECIAL SENSE ORGANS			
NONE			
MUSCULOSKELETAL SYSTEM			
NONE			
NUNE			
BODY CAVITIES			
*MESENTERY LIPOMA	1 (3%)	(26)	(27)
ALL OTHER SYSTEMS			
NONE			
ANIMAL DISPOSITION SUMMARY			
ANIMALS INITIALLY IN STUDY	35	35	35
NATURAL DEATHD	5	19	23
MORIBUND SACRIFICE	19	15	12
SCHEDULED SACRIFICE			
ACCIDENTALLY KILLED TERMINAL SACRIFICE	11		
ANIMAL MISSING		1	
and a costag		•	
INCLUDES AUTOLYZED ANIMALS			

* NUMBER OF ANIMALS NECROPSIED

TABLE B4. FEMALE MICE: NEOPLASMS (CONTINUED)

	LOW DOSE	MID DOSE	HIGH DOSE	
TUNOR SUNNARY				
TOTAL ANIMALS WITH PRIMARY TUMORS*	2		1	
TOTAL PRIMARY TUMORS	2		1	
TOTAL ANIMALS WITH BENIGN TUMORS	2		1	
TOTAL BENIGN TUMORS	2		1	
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				
TOTAL ANIMALS WITH TUMORS UNCERTAIN	-			
PRIMARY OR METASTATIC				
TOTAL UNCERTAIN TUMORS				
* PRIMARY TUMORS: ALL TUMORS EXCEPT S	ECONDARY TUMOR	S		
# SECONDARY TUMORS: METASTATIC TUMORS	OR TUMORS INV	ASIVE INTO AN AD	JACENT ORGAN	

APPENDIX C

SUMMARY OF THE INCIDENCE OF NONNEOPLASTIC LESIONS

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IN RATS TREATED WITH EMETINE

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TABLE C1.

SUMMARY OF THE INCIDENCE OF NONNEOPLASTIC LESIONS IN MALE RATS TREATED WITH EMETINE

	UNTREATED Control	CONTROL	LOW DOSE	HIGH DOSE
NIMALS INITIALLY IN STUDY	10	10	35	35
NIMALS NECROPSIED	10	10	35	27
NIMALS EXAMINED HISTOPATHOLOGICALLY	10	10	35	27
NTEGUMENTARY SYSTEM				
*SKIN EPIDERMAL INCLUSION CYST	(10)	(10)	(35) 2 (6%)	(27)
ESPIRATORY SYSTEM				
*TRACHBA INPLAMMATION, NOS	(10) 3 (30%)	(10) 5 (50≸)	(34) 6 (18%)	(26)
LYMPHOCYTIC INFILTRATE	1 (10%)	5 (50%)	0 (10%)	
INFLAMMATION, SUPPURATIVE			1 (3%)	1 (4%
INFLAMMATION, ACUTE/CHRONIC			3 (9%)	
INPLAMMATION, CHRONIC				1 (4%)
*LUNG/BRONCHUS	(10)	(10)	(35)	(27)
BRONCHIECTASIS	1 (10%)			• •
INFLAMMATION, NOS			2 (6%)	
INFLAMMATION, ACUTE/CHRONIC INFLAMMATION, CHRONIC		1 (10%)	1 (3%) 1 (3%)	
		(10,4)	((3%)	
#LUNG/BRONCHIOLE	(10)	(10)	(35)	(27)
INFLAMMATION, SUPPURATIVE PERIVASCULAR CUFFING	1 (10%)		1 (3%)	
HYPERPLASIA, LYMPHOID			1 (3%)	
*LUNG	(10)	(10)	(35)	(27)
ENPHYSENA, NOS		• ·	• •	1 (4 %)
ABSCESS, NOS	1 (10%)			
PNBUMONIA INTERSTITIAL CHRONIC		1 (10%)		1 (4%)
ENATOPOIETIC SYSTEM				
#BONE MARROW	(10)	(10)	(35) <u>12 (345)</u>	(27)
ATROPHY, NOS			12 (34%)	5 (19

* NUMBER OF ANIMALS NECROPSIED

TABLE C1. MALE RATS: NONNEOPLASTIC LESIONS (CONTINUED)

	UNTREATED CONTROL	VEHICLE CONTROL	LOW DOSE	HIGH DOSE
IRCULATORY SYSTEM				
#HEART CALCIFICATION, NOS	(10)	(10)	(35)	(27) 2 (7 %)
<pre>#MYOCARDIUM INPLAMMATION, NOS INFLAMMATION, INTERSTITIAL</pre>	(10)	(10)	(35)	(27) 2 (7%) 1 (4%)
IG ESTIVE SYSTEM				
*LIVER INFLAMMATION, SUPPURATIVE NECROSIS, COAGULATIVE	(10)	(10)	(35) 1 (3%)	(27) 1 (4%)
*PANCREAS INFLAMMATION, CHRONIC		(9)	(34) 1 (3%)	(26)
RINARY SYSTEM				
<pre>#KIDNEY PYBLONEPHRITIS, NOS ABSCESS, NOS</pre>	(10)	(10)	(35)	(27) 1 (4%)
INFLAMMATION, CHRONIC NEPHROSIS, NOS	4 (40%)	1 (10%)	10 (29%)	2 (7%) 4 (15%
<pre>#KIDNEY/GLOMERULUS INPLAMMATION, NOS FIBROSIS</pre>	(10)	(10)	(35) 1 (3%) 5 (14%)	(27)
#URINARY BLADDER Hyperplasia, epithelial	(9)	(9)	(26)	(24) 3 (139
NDOCRINE SYSTEM				
#ADRENAL Abscess, Nos	(9) 1 (11%)		(35)	(27)
EPRODUCTIVE SYSTEM				
*PROSTATE	(9)	(10)		(26) 3_(12)

TABLE C1. MALE RATS: NONNEOPLASTIC LESIONS (CONTINUED)

	UNTREATED Control		LOW DOSE	HIGH DOSE
INFLAMMATION, ACUTE SUPPURATIVE INFLAMMATION, CHRONIC INFLAMMATION, CHRONIC SUPPURATIV	1 (11%)			1 (4% 1 (4% 2 (8%
*SEMINAL VESICLE INPLANMATION, ACUTE/CHRONIC		•	(35)	{27} 1 (4 %
ERVOUS SYSTEM				
#CEREBELLUN GLIOSIS			(35) 1 (3 %)	(25)
SPECIAL SENSE ORGANS				
NONE				
USCULOSKELETAL SYSTEM				
*JOINT INFLAMMATION, SUPPURATIVE	(10) 1 (10%)	(10)	(35)	(27)
*SKELETAL MUSCLE FIBROSIS Atrophy, Focal	(10) 1 (10%) 1 (10%)	(10)	(35)	(27)
BODY CAVITIES				
INFLAMMATION, CHRONIC			(35)	1 (4%
ALL OTHER SYSTEMS				
NONE		•		
PECIAL MORPHOLOGY SUMMARY				
NO LESION REPORTED Autolysis/no necropsy	1	2	4	8 8

TABLE C2.

SUMMARY OF THE INCIDENCE OF NONNEOPLASTIC LESIONS IN FEMALE RATS TREATED WITH EMETINE

	UNTREATED Control	VEHICLE "CONTROL	LOW DOSE	HIGH DOSE
ANIMALS INITIALLY IN STUDY ANIMALS NECROPSIED ANIMALS EXAMINED HISTOPATHOLOGICALLY	10 10	10 10 10	35 35 35 35	35 35 35 35
INTEGUMENTARY SYSTEM				
*SUBCUT TISSUE EDENA, NOS	(10)	• •	(35)	(35) 1 (3%)
RESPIRATORY SYSTEM				
#TRACHEA INPLAMMATION, NOS INPLAMMATION, SUPPURATIVE INPLAMMATION, ACUTE/CHRONIC HYPERPLASIA, PLASMA CELL	(10) 1 (10%)	(10) 3 (30%)	(34) 11 (32%) 1 (3%) 5 (15%) 1 (3%)	(32) 5 (16%
<pre>#LUNG/BRONCHUS BRONCHIFCIASIS INFLAMMATION, NOS INFLAMMATION, CHRONIC SUPPURATIV</pre>	(10)	(9)	(34) 1 (3%) 1 (3%) 1 (3%)	(35)
#LUNG EMPHYSENA, NOS BRONCHOPNEUHONIA SUPPURATIVE BRONCHOPNEUHONIA CHRONIC SUPPURA BRONCHOPNEUHONIA CHRONIC SUPPURA	(10)	(9)	(34)	(35) 1 (3%) 1 (3%) 1 (3%)
HEMATOPOIETIC SYSTEM				
*BONE MARROW ATROPHY, NOS	(10)	(10)	(35) 1 (3%)	(35) 8 (239
CIRCULATORY SYSTEM				
NONE				
DIGESTIVE SYSTEM				
NONE				

	UNTREATED Control	VEHICLE CONTROL	LOW DOSE	HIGH DOSE
JRINARY SYSTEM				
<pre>#kidney inplammation, interstitial inplammation, chronic</pre>	(10)	(10)	(35) 1 (3%) 4 (11%)	(35) 1 (3%
#KIDNEY/GLOMERULUS FIBROSIS	(10)	(10)	(35) 1 (3%)	(35)
#KIDNEY/TUBULE MINERALIZATION	(10)	(10)	(35)	(35) 1 (3%
NDOCRINE SYSTEM				
NONE				
EPRODUCTIVE SYSTEM				
*MAMMARY GLAND HYPERPLASIA, CYSTIC.	(10)	(10)	(35)	(35) 1 (3%
#UTERUS PYONETRA	(10) 1 (10%)	(10) 1 (10%)	(35) 2 (6 %)	(35)
#UTBRUS/ENDOMETRIUM INPLAMMATION, SUPPURATIVE	(10) 1 (10%)	(10)	(35)	(35) 2 (6%
#OVARY CIST, NOS Abscess, Nos	(10)	(3)	(32)	(27) 1 (4 %
ERVOUS SYSTEM				
NONE				
PECIAL SENSE ORGANS				
*EAR/CARTILAGE HYPERPLASIA, NOS NETAPLASIA, OSSEOUS	(10)	(10)	(35)	(35) 1 (3% 1 (3%

TABLE C2. FEMALE RATS: NONNEOPLASTIC LESIONS (CONTINUED)

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

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TABLE C2. FEMALE RATS: NONNEOPLASTIC LESIONS (CONTINUED)

		LOW DOSE	HIGH DOSE
(10)	(10)	(35)	(35) 1 (37
(10)	(10)	(35)	(35) 1 (39
1	2	3	2
	(10) (10)	CONTROL CONTROL (10) (10) (10) (10)	(10) (10) (35) , (10) (35)

APPENDIX D

SUMMARY OF THE INCIDENCE OF NONNEOPLASTIC LESIONS

IN MICE TREATED WITH EMETINE

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TABLE D1.

SUMMARY OF THE INCIDENCE OF NONNEOPLASTIC LESIONS IN MALE MICE TREATED WITH EMETINE (CONTROL GROUPS)

	MID & HIGH DOSE UNTREATED CONTROL	LOW DOSE UNTREATED CONTROL	MID & HIGH DOSE Vehicle Control	LOW DOSE Vehicle Control
ANIMALS INITIALLY IN STUDY	15	10	15	10
NIMALS MISSING	1	10		
NIMALS NECROPSIED NIMALS EXAMINED HISTOPATHOLOGICALLY	14 14	10 10	14 14	10 10
NTEGUMENTARY SYSTEM				
*SKIN INFLAMMATION, NOS	(14) 2 (14%)	(10)	(14)	(10)
*SUBCUT TISSUE LIPOGRANULOMA	(14)	(10)	(14)	(10) 1 (10%
ESPIRATORY SYSTEM				
*TRACHEA INFLAMMATION, SUPPURATIVE	(13)	(8)	(13)	(9) 1 (11%
#LUNG	(14)	(9)	(14)	(10)
EDEMA, NOS Inplammation, interstitial	1 (7%) 1 (7%)			1 (10%)
BRONCHOPNEUMONIA SUPPURATIVE BRONCHOPNEUMONIA CHRONIC SUPPURA	1 (7%)			1 (10%
ENATOPOIETIC SYSTEM				
#SPLEEN HEMATOPOIESIS	(14)	(9)	(14) 2 (14%)	(10) 1 (10%
#MESENTERIC L. NODE	(7)	(4)	(11)	(9)
INFLAMMATION, SUPPURATIVE INFLAMMATION, NECROTIZING			1 (9%) 1 (9%)	
HYPERPLASIA, HEMATOPOIETIC	1 (14%)		(5,4)	
HYPERPLASIA, LYMPHOID			2 (18%)	3 (33%
#THYMUS	(8)	(1)	(10)	
ATROPHY, NOS .	1 (13%)			
IRCULATORY SYSTEM				
*HEART PERIARTERITIS	(14)	(10)	(14)	(10)

* NUMBER OF ANIMALS NECROPSIED

TABLE D1. MALE MICE: NONNEOPLASTIC LESIONS (CONTINUED)

	MID & HIGH DOSE UNTREATED CONTROL	LOW DOSE UNTREATED CONTROL	MID & HIGH DOSE VEHICLE CONTROL	LOW DOS Vehicle Contro
DIGESTIVE SYSTEM				
*LIVER INFLAMMATION, CHRONIC HYPERPLASTIC NODULE	(14) 1 (7%)	(10) 1 (10%)	(14) 1 (7%) 3 (21%)	(10)
JRINARY SYSTEM None				
NDOCRINE SYSTEM				
<pre>#THYROID PERIARTERITIS</pre>	1 (8%)		(10)	
REPRODUCTIVE SYSTEM				
*SEMINAL VESICLE Hyperplasia, cystic	1 (7%)		(14)	
IERVOUS SYSTEM None				
SPECIAL SENSE ORGANS NONE				
IUSCULOSKELETAL SYSTEM				
BODY CAVITIES NONE				
ALL OTHER SYSTEMS	•			
*MULTIPLE ORGANS CYTONEGALY	(14)	(10)	(14)	(10) <u>1_(10)</u>

* NUMBER OF ANIMALS NECROPSIED

TABLE D1. MALE MICE: NONNEOPLASTIC LESIONS (CONTINUED)

	MID & HIGH DOSE UNTREATED CONTROL	LOW DOSE Untreated Control	MID & HIGH DOSE VEHICLE CONTROL	LOW DOSE VEHICLE CONTROL
SPECIAL NORPHOLOGY SUMMARY				
NO LESION REPORTED	7	9	7	4
ANIMAL MISSING/NO NECROPSY Autolysis/no necropsy	,		1	
 NUMBER OF ANIMALS WITH TISSUE EXA NUMBER OF ANIMALS NECROPSIED 	MINED MICROSCOPICA	LLY		

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TABLE D2.

SUMMARY OF THE INCIDENCE OF NONNEOPLASTIC LESIONS IN MALE MICE TREATED WITH EMETINE (TREATED GROUPS)

	LOW DOSE	MID DOSE	HIGH DOSI
ANIMALS INITIALLY IN STUDY	35	35	35
NIMALS NECROPSIED	35	30	30
NNIMALS EXAMINED HISTOPATHOLOGICALLY	35	29	30
INTEGUMENTARY SYSTEM			
NONE			
RESPIRATORY SYSTEM			
*TRACHEA	(35)	(28)	(28)
INFLAMMATION, SUPPURATIVE	11 (31%)		• •
INFLAMMATION, ACUTE/CHRONIC	1 (3%)		
*LUNG/BRONCHUS	(35)	(28)	(29)
BRONCHIECTASIS	12 (34%)		
INFLAMMATION, NOS	2 (6%)		
INFLAMMATION, SUPPURATIVE	10 (29%)		
*LUNG/BRONCHIOLE	(35)	(28)	(29)
INPLAMMATION, FOCAL	1 (3%)		
INFLAMMATION, SUPPURATIVE	2 (6%)		
*LUNG	(35)	(28)	(29)
EDEMA, NOS	1 (3%)		
HEMORRHAGE	1 (3%)		
BRONCHOPNEUMONIA, NOS Inflammation, interstitial	10 (29%) 1 (3%)		
INFLAMMATION, SUPPURATIVE	1 (3%)		
BRONCHOPNEUMONIA SUPPURATIVE	5 (14%)		
BRONCHOPNEUMONIA, ACUTE	1 (3%)		
INFLAMMATION, ACUTE HEMORBHAGIC	1 (3%)		
INFLAMMATION, ACUTE/CHRONIC	1 (3%)		
BRONCHOPNEUMONIA CHRONIC SUPPURA	3 (9%)		
HEMATOPOIETIC SYSTEM			
#SPLEEN	(34)	(22)	(25)
HEMATOPOIESIS			· ·

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

	LOW DOSE	MID DOSE	HIGH DOSE
*MANDIBULAR L. NODE ATROPHY, NOS	(32) 1 (3 %)	(22)	(19)
#MEDIASTINAL L.NODE PLASMACYTOSIS	(32) 1 (3%)	(22)	(19)
*MESENTERIC L. NODE INFLAMMATION, NECROTIZING INFLAMMATION, CHRONIC	(32) 1 (3%)	(22)	(19) 1 (5%)
*THYMUS ATROPHY, NOS	(6) 6 (100%)	(1)	
IRCULATORY SYSTEM			
#HEART DEGENERATION, NOS NECROSIS, NOS	(35) 2 (6%) 2 (6%)	(27)	(29)
#HEART/ATRIUM THROMBOSIS, NOS	(35) 1 (3%)	(27)	(29)
*MYOCARDIUM INFLAMMATION, NOS INFLAMMATION, INTERSTITIAL INFLAMMATION, SUPPURATIVE	,(35) 1 (3%) 2 (6%) 1 (3%)	(27)	(29)
IGESTIVE SYSTEM			
#LIVER INFLAMMATION, SUPPURATIVE NECROSIS, FOCAL NECROSIS, COAGULATIVE BASOPHILIC CYTO CHANGE FOCAL CELLULAR CHANGE	(35) 1 (3%) 2 (6%) 1 (3%)	(27) 1 (4%) 3 (11%)	(30) 1 (3%)
*PANCREAS INFLAMMATION, CHRONIC	(33) 1 (3%)	(26) 1 (4%)	(29)
*PANCREATIC ACINUS ATROPHY, NOS	(33)	·(26) 1 (4%)	(29)
*ESOPHAGUS ULCER, NOS	(34)	(24)	(24)

TABLE D2. MALE MICE: NONNEOPLASTIC LESIONS (CONTINUED)

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

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TABLE D2. MALE MICE: NONNEOPLASTIC LESIONS (CONTINUED)

	LOW DOSE	MID DOSE	HIGH DOSE
INFLAMMATION, SUPPURATIVE	1 (3%)		
ULCER, CHRONIC		2 (8%)	1 (4%)
*SMALL INTESTINE HEMORRHAGE	(26)	(27)	(15) 1 (7%)
# DUODENUM HEMORRHAGE	(26)	(27)	(15) 1 (7%)
<pre>#ILEUM INFLANMATION, HEMORRHAGIC</pre>	(26)	(27)	(15) 1 (7 %
JRINARY SYSTEM			
NONE			
ENDOCRINE SYSTEM			
NONE			
REPRODUCTIVE SYSTEM			
*PROSTATE	(21)	(22)	(15)
ULCER, NOS	1 (5%) 1 (5%)		
INFLAMMATION, SUPPORATIVE	1 (37)		
*SEMINAL VESICLE	(35)	(30)	(30)
INPLAMMATION, SUPPURATIVE INPLAMMATION, CHRONIC	1 (3%) 1 (3%)		
NERVOUS SYSTEM			
<pre>#BRAIN/MENINGES INPLAMMATION, SUPPURATIVE</pre>	(35) 1 (3%)	(28)	(29)
SPECIAL SENSE ORGANS			
NONE			
USCULOSKELETAL SYSTEM			
NONE			
* NUMBER OF ANIMALS WITH TISSUE EX * NUMBER OF ANIMALS NECROPSIED	AMINED MICROSCOPI	CALLY	

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	LOW D	OSE	MID DOSE	HIGH DOSE
ODY CAVITIES				
*PERITONEUM	(35)		(30)	(30)
INFLAMMATION, SUPPURATIVE		(6%)		
INFLAMMATION, CHRONIC INFLAMMATION, CHRONIC NECROTIZIN	2	(6%)		1 (3%)
PIBROSIS	2	(6%)		1 (3/4)
HEMOSIDEROSIS		(3%)		
*VISCERAL PERITONEUM	(35)		(30)	(30)
INFLAMMATION, HEMORRHAGIC			1 (3%)	2 (7%)
INFLAMMATION, CHRONIC			16 (53%)	12 (40)
INFLAMMATION, CHRONIC NECROTIZIN				2 (7%)
*PLEURA	(35)		(30)	(30)
INFLAMMATION, SUPPURATIVE			1 (3%)	
INFLAMMATION, CHRONIC NECROTIZIN			1 (3%)	
LL OTHER SYSTEMS				
NONE				
SPECIAL MORPHOLOGY SUMMARY				
NO LESION REPORTED	5		12	12
NECROPSY PERF/NO HISTO PERFORMED			1	-
NO NECROPSY PERFORMED			1 4	1
AUTOLYSIS/NO NECROPSY			4	4

TABLE D2. MALE MICE: NONNEOPLASTIC LESIONS (CONTINUED)

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TABLE D3.

SUMMARY OF THE INCIDENCE OF NONNEOPLASTIC LESIONS IN FEMALE MICE TREATED WITH EMETINE (CONTROL GROUPS)

ITALS INITIALLY IN STUDY ITALS NECROPSIED ITALS EXAMINED HISTOPATHOLOGICALLY TEGUMENTARY SYSTEM SKIN INFLAMMATION, NOS INFLAMMATION, SUPPURATIVE	15	10 10 10	15 15 15	10 10 10 10
ITALS EXAMINED HISTOPATHOLOGICALLY TEGUMENTARY SYSTEM SKIN INPLAMMATION, NOS	15	10 10	15	10
TEGUMENTARY SYSTEM SKIN INPLAMMATION, NOS		10	15	10
SKIN INFLAMMATION, NOS				
INFLAMMATION, NOS				
INFLAMMATION, NOS INFLAMMATION, SUPPURATIVE	(15)	(10)	(15)	(10)
	1 (7%) 1 (7%)			
SPIRATORY SYSTEM				
TRACHEA INFLAMMATION, SUPPURATIVE	(14)	(7)	(14)	(9) 2 (22%
LUNG/BRONCHUS	(15)	(10)	(14)	(9)
INFLAMMATION, CHRONIC SUPPURATIV				1 (11%
LUNG	(15)	(10)	(14)	(9)
CONGESTION, NOS	1 (7%)			
EDEMA, NOS HEMORRHAGE	2 (13%) 1 (7%)			
BRONCHOPNEUMONIA CHRONIC SUPPURA				4 (44%
MATOPOIBTIC SYSTEM				
SPLEEN	(13)	(10)	(15)	(10)
HEMATOPOIESIS			3 (20%)	4 (40%)
RCULATORY SYSTEM				
MYOCARDIUM		(10)	(15)	(9)
INFLAMMATION, ACUTE	1 (7%)			
GESTIVE SYSTEM				
LIVER 	(14)	(10)	(15)	(10)

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

	MID & HIGH DOSE UNTREATED Control	LOW DOSE UNTREATED CONTROL	MID & HIGH DOSE Vehicle Control	LOW DOSE Vehicle Control
*STONACH INFLAMMATION, SUPPURATIVE HYPERPLASIA, NOS	(14) 1 (7%) 1 (7%)		(15)	
URINARY SYSTEM				
NONE				
ENDOCRINE SYSTEM				
NONE				
REPRODUCTIVE SYSTEM				
*MAMMARY GLAND Hyperplasia, cystic	(15) 1 (7%)	(10)	(15)	(10)
#UTERUS INFLAMMATION, SUPPURATIVE PYOMETRA	(15) 1 (7%) 3 (20%)	(9)	(15)	(10)
#UTERUS/ENDOMETRIUM HYPERPLASIA, CYSTIC	(15) 10 (67%)	(9) 8 (89%)	(15) 14 (93%)	(10) 8 (80%)
ERVOUS SYSTEM				
NONE				
SPECIAL SENSE ORGANS				
*EAR THROMBOSIS, NOS HEMORRHAGE	(15) 1 (7%) 1 (7%)	(10)	(15)	(10)
NUSCULOSKELETAL SYSTEM				
NONE				
BODY CAVITIES				
*PERITONEUM INFLAMMATION, SUPPURATIVE	(15)	(10)	(15)	(10)

TABLE D3. FEMALE MICE: NONNEOPLASTIC LESIONS (CONTINUED)

TABLE D3. FEMALE MICE: NONNEOPLASTIC LESIONS (CONTINUED)

	MID & HIGH DOSE UNTREATED CONTROL	LOW DOSE UNTREATED CONTROL	MID & HIGH DOSE VEHICLE Control	LOW DOSE Vehicle Control
*PLEURA INFLAMMATION, SUPPURATIVE	(15) 1 (7%)	(10)	(15)	(10)
*EPICARDIUM INFLAMMATION, SUPPURATIVE	(15) 1 (7%)	(10)	(15)	(10)
LL OTHER SYSTEMS				
NONE				
PECIAL MORPHOLOGY SUMMARY				
NO LESION REPORTED	1	2	1	

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

TABLE D4.

SUMMARY OF THE INCIDENCE OF NONNEOPLASTIC LESIONS IN FEMALE MICE TREATED WITH EMETINE (TREATED GROUPS)

	LOW DOSE	MID DOSE	HIGH DOSE
NIMALS INITIALLY IN STUDY NIMALS MISSING	35	35 1	35
NIMALS NECROPSIED NIMALS EXAMINED HISTOPATHOLOGICALLY	34 34	26 26	27 27
NTEGUMENTARY SYSTEM			
NONE			
ESPIRATORY SYSTEM			
*TRACHEA INFLAMMATION, SUPPURATIVE	(34) 1 (3%)	(19)	(27)
*LUNG INFLAMMATION, INTERSTITIAL BRONCHOPNEUMONIA SUPPURATIVE BRONCHOPNEUMONIA CHRONIC SUPPURA	(33) 2 (6%) 1 (3%) 9 (27%)	(26)	(27)
ENATOPOIETIC SYSTEM			
#BONE MARROW ATROPHY, NOS	(32) 1 (3%)	(21)	(25)
*SPLEEN INPLAMMATION, NECROTIZING	(34) 1 (3%)	(20)	(26)
HEMATOPOIESIS	4 (12%)	2 (10%)	3 (12)
#MESENTERIC L. NODE INPLAMMATION, NECROTIZING INPLAMMATION, ACUTE SUPPURATIVE	(26) 1 (4%)	(20)	(23)
HYPERPLASIA, LYMPHOID	(4,4)		1 (4%)
<pre>#INGUINAL LYMPH NODE Hyperplasia, lymphoid</pre>	(26)	(20) 1 (5 %)	(23)
IRCULATORY SYSTEM			
NONE			

	LOW DOSE	MID DOSE	HIGH DOSE
IGESTIVE SYSTEM			
#LIVER	(33)	(24)	(27)
INFLAMMATION, SUPPURATIVE	1 (3%)		· · · · -
INFLAMMATION, NECROTIZING	1 (3%)		1 (4%)
NECROSIS, FOCAL		1 (4%)	2 /110
NECROSIS, COAGULATIVE Hematopoiesis	1 (3%)	1 (4%)	3 (11%)
	(5.47		
#HEPATIC CAPSULE	(33)	(24)	(27)
CALCIFICATION, DYSTROPHIC	1 (3%)		
#ESOPHAGUS	(29)	(20)	(24)
ULCER, NOS	(23)	6 (30%)	3 (13%)
INFLAMMATION, SUPPURATIVE	1 (3%)	- (,	• • • • •
ULCER, CHRONIC		4 (20%)	
#STOMACH	(33)	(18)	(17)
ULCER, NOS	1 (3%)	(10)	(, , ,
#URINARY BLADDER INFLAMMATION, SUPPURATIVE ULCER, CHRONIC		(21) 1 (5%)	(18) 1 (6 %)
NDOCRINE SYSTEM			
NONE			
EPRODUCTIVE SYSTEM			
#UTERUS/ENDOMETRIUM	(29)	(22)	(25)
INFLAMMATION, SUPPURATIVE	1 (3%)	()	(/
INFLAMMATION, ACUTE/CHRONIC	1 (3%)		
HYPERPLASIA, CYSTIC	21 (72%)		
FOVARY	(21)	(19)	(24)
CYST, NOS		1 (5%)	(24)
BRVOUS SYSTEM			

TABLE D4. FEMALE MICE: NONNEOPLASTIC LESIONS (CONTINUED)

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

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TABLE D4. FEMALE MICE: NONNEOPLASTIC LESIONS (CONTINUED)

	LOW DOSE	MID DOSE	HIGH DOSE
PECIAL SENSE ORGANS			
NONE			
IUSĆULOSKELETAL SYSTEM			
NONE			
BODY CAVITIES			
*PERITONEUM INFLAMMATION, CHRONIC	(34) 13 (38%)	(26) 1 (4%)	(27)
*VISCERAL PERITONEUM INFLAMMATION, SUPPURATIVE	(34)	(26)	(27) 1 (4%)
INFLAMMATION, HEMORRHAGIC INFLAMMATION, CHRONIC INFLAMMATION, CHRONIC NECROTIZI)	3	24 (92%)	1 (4%) 14 (52) 1 (4%)
*PLEURA INFLAMMATION, SUPPURATIVE INFLAMMATION, CHRONIC	(34)	(26) 4 (15%) 2 (8%)	(27) 2 (7%)
ALL OTHER SYSTEMS			
NON E			
SPECIAL MORPHOLOGY SUMMARY			
NO LESION REPORTED ANIMAL MISSING/NO NECROPSY	2	. 1	6
NO NECROPSY PERFORMED AUTOLYSIS/NO NECROPSY	1	8	8

* NUMBER OF ANIMALS NECROPSIED

APPENDIX E

ANALYSES OF THE INCIDENCE OF PRIMARY TUMORS IN

RATS TREATED WITH EMETINE

Topography: Morphology	Pooled Control	Vehicle Control	Low Dose	High Dose
Subcutaneous Tissue: Fibroma ^b	0/25 (0)	0/10 (0)	2/35 (6)	0/27 (0)
P Values ^{c,d}	N.S.	N.S.	N.S.	N.S.
Relative Risk (Pooled Control) ^f			Infinite	
Lower Limit			0.218	
Upper Limit			Infinite	
Relative Risk (Vehicle Control) ^f			Infinite	
Lower Limit			0.093	
Upper Limit			Infinite	
Weeks to First Observed Tumor			75	
Liver: Hepatocellular				
Adenomab	0/25 (0)	0/10 (0)	2/35 (6)	0/27 (0)
P Values ^{c,d}	N.S.	N.S.	N.S.	N.S.
Relative Risk (Pooled Control) ^f			Infinite	
Lower Limit			0.218	
Upper Limit			Infinite	
Relative Risk (Vehicle Control) ^f			Infinite	
Lower Limit			0.093	
Upper Limit			Infinite	
Weeks to First Observed Tumor			84	

Table El. Analyses of the Incidence of Primary Tumors in Male Rats Treated with Emetine^a

	Pooled	Vehicle	Low	High
Topography: Morphology	<u>Control</u>	<u>Control</u>	Dose	Dose
Pituitary: Chromophobe				
Carcinoma ^b	2/25 (8)	1/10 (10)	1/32 (3)	1/22 (5)
P Values ^{c,d}	N.S.	N.S.	N.S.	N.S.
Relative Risk (Pooled Control) ^f			0.391	0.568
Lower Limit			0.007	0.010
Upper Limit			7.098	10.110
Relative Risk (Vehicle Control) ^f			0.313	0.455
Lower Limit			0.004	0.006
Upper Limit			23.802	34.087
Weeks to First Observed Tumor			84	80
Pituitary: Chromophobe				
Adenoma or Carcinoma ^b	3/25 (12)	2/10 (20)	4/32 (13)	2/22 (9)
P Values ^{c,d}	N.S.	N.S.	N.S.	N.S.
Relative Risk (Pooled Control) ^f			1.042	0.758
Lower Limit			0.195	0.069
Upper Limit			6.533	5.976
Relative Risk (Vehicle Control) ^f			0.625	0.455
Lower Limit			0.114	0.040
Upper Limit			6.349	5.664

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Table El. Analyses of the Incidence of Primary Tumors in Male Rats Treated with Emetine^a

(continued)	Pooled	Vehicle	Low	High
Topography: Morphology	<u>Control</u>	Control	Dose	Dose
Parathyroid:				
Adenoma, NOS ^b	0/9 (0)	0/4 (0)	0/10 (0)	1/7 (14)
P Values ^{c,d}	N.S.	N.S.	N.S.	N.S.
Relative Risk (Pooled Control) ^f				Infinite
Lower Limit				0.076
Upper Limit				Infinite
Relative Risk (Vehicle Control) ^f				Infinite
Lower Limit				0.039
Upper Limit				Infinite
Weeks to First Observed Tumor				83
Pancreatic Islets:				
Islet-cell Adenoma ^b	0/24 (0)	0/9 (0)	2/34 (6)	1/26 (4)
P Values ^{c,d}	N.S.	N.S.	N.S.	N.S.
Relative Risk (Pooled Control) ^f			Infinite	Infinite
Lower Limit			0.215	0.051
Upper Limit			Infinite	Infinite
Relative Risk (Vehicle Control) ^f			Infinite	Infinite
Lower Limit			0.088	0.020
Upper Limit			Infinite	Infinite
			84	83

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Table El. Analyses of the Incidence of Primary Tumors in Male Rats Treated with Emetine^a

(continued)	Pooled	Vehicle	Low	High
Topography: Morphology	<u>Control</u>	Control	Dose	Dose
Testis: Interstitial-cell Tumor ^b	0/25 (0)	0/10 (0)	3/34 (9)	0/27 (0)
P Values ^{c,d}	N.S.	N.S.	N.S.	N.S.
Departure from Linear Trend ^e	P = 0.029			
Relative Risk (Pooled Control) ^f			Infinite	
Lower Limit			0.453	
Upper Limit			Infinite	
Relative Risk (Vehicle Control) ^f			Infinite	
Lower Limit			0.197	
Upper Limit			Infinite	
Weeks to First Observed Tumor			84	

Table El. Analyses of the Incidence of Primary Tumors in Male Rats Treated with Emetine^a

^aTreated groups received doses of 0.5 or 1 mg/kg body weight by intraperitoneal injection.

^bNumber of tumor-bearing animals/number of animals examined at site (percent).

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^CBeneath the incidence of tumors in a control group is the probability level for the Cochran-Armitage test when P < 0.05; otherwise, not significant (N.S.) is indicated. Beneath the incidence of tumors in a treated group is the probability level for the Fisher exact test for the comparison of that treated group with the vehicle-control group (*) or with the pooledcontrol group (**) when P < 0.05 for either control group; otherwise, not significant (N.S.) is indicated.
Table El. Analyses of the Incidence of Primary Tumors in Male Rats Treated with Emetine^a

(continued)

 d A negative trend (N) indicates a lower incidence in a treated group than in a control group.

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

^fThe 95% confidence interval of the relative risk between each treated group and the specified control group.

	Pooled	Vehicle	Low	High
Topography: Morphology	<u>Control</u>	Control	Dose	Dose
Pituitary: Chromophobe				
Carcinoma ^b	2/25 (8)	1/10 (10)	1/35 (3)	1/33 (3)
P Values ^{c,d}	N.S.	N.S.	N.S.	N.S.
Relative Risk (Pooled Control) ^f			0.357	0.379
Lower Limit			0.006	0.007
Upper Limit			6.515	6.894
Relative Risk (Vehicle Control) ^f			0.286	0.303
Lower Limit			0.004	0.004
Upper Limit			21.825	23.104
Weeks to First Observed Tumor		84		84
Pituitary: Chromophobe				
Adenoma or Carcinoma ^b	9/25 (36)	4/10 (40)	12/35 (34)	9/33 (27)
P Values ^{c,d}	N.S.	N.S.	N.S.	N.S.
Relative Risk (Pooled Control) ^f			0.952	0.758
Lower Limit			0.445	0.320
Upper Limit			2.174	1.844
Relative Risk (Vehicle Control) ^f			0.857	0.682
Lower Limit			0.369	0.270
Upper Limit			3.071	2.563
Weeks to First Observed Tumor		84	84	61

Table E2. Analyses of the Incidence of Primary Tumors in Female Rats Treated with Emetine^a

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(continued)				
Topography: Morphology	Pooled <u>Control</u>	Vehicle <u>Control</u>	Low Dose	High Dose
Adrenal: Cortical Adenoma ^b	3/25 (12)	3/10 (30)	9/35 (26)	2/35 (6)
P Values ^{c,d}	N.S.	P = 0.018(N)	N.S.	N.S.
Departure from Linear Trend ^e	P = 0.026			
Relative Risk (Pooled Control) ^f			2.143	0.476
Lower Limit Upper Limit			0.608 11.255	0.043 3.876
Relative Risk (Vehicle Control) ^f			0.857	0.190
Lower Limit Upper Limit			0.291 4.323	0.020 1.494
Weeks to First Observed Tumor		84	66	84
Mammary Gland:				
Adenocarcinoma, NOS ^b	0/25 (0)	0/10 (0)	1/35 (3)	2/35 (6)
P Values ^{c,d}	N.S.	N.S.	N.S.	N.S.
Relative Risk (Pooled Control) ^f			Infinite	Infinite
Lower Limit			0.039	0.218
Upper Limit			Infinite	Infinite
Relative Risk (Vehicle Contol) ^f			Infinite	Infinite
Lower Limit			0.017	0.093
Upper Limit			Infinite	Infinite
Weeks to First Observed Tumor			84	61

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Table E2. Analyses of the Incidence of Primary Tumors in Female Rats Treated with Emetine^a

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	Pooled	Vehicle	Low	High
Topography: Morphology	<u>Control</u>	<u>Control</u>	Dose	Dose
Mammary Gland: Fibroadenoma ^b	5/25 (20)	2/10 (20)	14/35 (40)	10/35 (29)
P Values ^{c,d}	N.S.	N.S.	N.S.	N.S.
Relative Risk (Pooled Control) ^f			2,000	1.429
Lower Limit			0.802	0.516
Upper Limit			6.183	4.720
Relative Risk (Vehicle Control) ^f			2.000	1.429
Lower Limit			0.604	0.398
Upper Limit			16.343	12.223
Weeks to First Observed Tumor		84	66	52
Uterus: Endometrial Stromal				
Polyp ^b	0/25 (0)	0/10 (0)	3/35 (9)	1/35 (3)
P Values ^{c,d}	N.S.	N.S.	N.S.	N.S.
Relative Risk (Pooled Control) ^f			Infinite	Infinite
Lower Limit			0.443	0.039
Upper Limit			Infinite	Infinite
Relative Risk (Vehicle Control) ^f			Infinite	Infinite
Lower Limit			0.191	0.017
Upper Limit			Infinite	Infinite
Weeks to First Observed Tumor			84	83

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Table E2. Analyses of the Incidence of Primary Tumors in Female Rats Treated with Emetine^a

Table E2. Analyses of the Incidence of Primary Tumors in Female Rats Treated with Emetine^a

(continued)

^aTreated groups received doses of 0.5 or 1 mg/kg body weight by intraperitoneal injection.

^bNumber of tumor-bearing animals/number of animals examined at site (percent).

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

^dA negative trend (N) indicates a lower incidence in a treated group than in a control group.

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

^fThe 95% confidence interval of the relative risk between each treated group and the specified control group.

APPENDIX F

ANALYSES OF THE INCIDENCE OF PRIMARY TUMORS IN

MICE TREATED WITH EMETINE

Topography: Morphology	Vehicle Control	Low Dose	Mid Dose	High Dose
Lung: Alveolar/Bronchiolar Adenoma ^b	1/24 (4)	2/35 (6)	0/28 (0)	0/29 (0)
P Values ^{c,d}		N.S.	N.S.	N.S.
Relative Risk (Vehicle Control) ^e		1.371	0.000	0.000
Lower Limit		0.076	0.000	0.000
Upper Limit		78.550	15.768	15.243
Weeks to First Observed Tumor	82	72		
Lung: Alveolar/Bronchiolar				
Adenoma or Carcinoma ^b	1/24 (4)	3/35 (9)	0/28 (0)	0/29 (0)
P Values ^{c,d}		N.S.	N.S.	N.S.
Relative Risk (Vehicle Control) ^e		2.057	0.000	0.000
Lower Limit		0.180	0.000	0.000
Upper Limit		104.742	15.768	15.243
Weeks to First Observed Tumor	82	72		

Table Fl. Analyses of the Incidence of Primary Tumors in Male Mice Treated with Emetine^a

(continued)	Vehicle	Low	Mid	High
Topography: Morphology	<u>Control</u>	Dose	Dose	Dose
Liver: Hepatocellular				
Carcinoma ^D	1/24 (4)	3/35 (9)	0/27 (0)	0/30 (0)
P Values ^{c,d}		N.S.	N.S.	N.S.
Relative Risk (Vehicle Control) ^e		2.057	0.000	0.000
Lower Limit		0.180	0.000	0.000
Upper Limit		104.742	16.331	14.750
Weeks to First Observed Tumor	75	50		

Table Fl. Analyses of the Incidence of Primary Tumors in Male Mice Treated with Emetine^a

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^aTreated groups received doses of 1.6, 3.2, or 6.4 mg/kg body weights by intraperitoneal injection.

^bNumber of tumor-bearing animals/number of animals examined at site (percent).

^cBeneath the incidence of tumors in a treated group is the probability level for the Fisher exact test for the comparison of that treated group with the matched control group when P < 0.05; otherwise, not significant (N.S.) is indicated.

^dSince survivals were not comparable no trend tests were made.

^eThe 95% confidence interval of the relative risk between each treated group and the matched control group.

	Vehicle	Low	Mid	High
Topography: Morphology	<u>Control</u>	Dose	Dose	Dose
Lung: Alveolar/Bronchiolar				
Adenoma (52) ^b	1/23 (4)	2/30 (7)	0/2 (0)	0/1 (0)
P Values ^{c,d}		N.S.	N.S.	N.S.
Relative Risk (Vehicle Control) ^e		1.533	0.000	0.000
Lower Limit		0.085	0.000	0.000
Upper Limit		87.354	119.310	89.856
Weeks to First Observed Tumor	82	72		
Lung: Alveolar/Bronchiolar				
Adenoma or Carcinoma (52) ^b	1/23 (4)	3/30 (10)	0/2 (0)	0/1 (0)
P Values ^{c,d}		N.S.	N.S.	N.S.
Relative Risk (Vehicle Control) ^e		2.300	0.000	0.000
Lower Limit		0.200	0.000	0.000
Upper Limit		116.430	119.310	89.856
Weeks to First Observed Tumor	82	72		

Table F2. Time-adjusted Analyses of the Incidence of Primary Tumors in Male Mice Treated with Emetine^a

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(continued)				
	Vehicle	Low	Mid	High
Topography: Morphology	<u>Control</u>	Dose	Dose	Dose
Liver: Hepatocellular				
Carcinoma (50) ^b	1/23 (4)	3/31 (10)	0/2 (0)	0/1 (0)
P Values ^{c,d}		N.S.	N.S.	N.S.
Relative Risk (Vehicle Control) ^e		2.226	0.000	0.000
Lower Limit		0.196	0.000	0.000
Upper Limit		112.848	119.310	89.856
Weeks to First Observed Tumor	75	50		

Table F2. Time-adjusted Analyses of the Incidence of Primary Tumors in Male Mice Treated with Emetine^a

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^aTreated groups received doses of 1.6, 3.2, or 6.4 mg/kg body weight by intraperitoneal injection.

^bNumber of tumor-bearing animals/number of animals examined at site (percent), based upon animals that lived at least as long as the number of weeks on study shown in parentheses after the morphology.

^cBeneath the incidence of tumors in a treated group is the probability level for the Fisher exact test for the comparison of that treated group with the matched control group when P < 0.05; otherwise, not significant (N.S.) is indicated.

^dSince survivals were not comparable no trend tests were made.

^eThe 95% confidence interval of the relative risk between each treated group and the matched control group.

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

November 28, 1977

The Clearinghouse on Environmental Carcinogens was established in May, 1976 under the authority of the National Cancer Act of 1971 (P.L. 92-218). The purpose of the Clearinghouse is to advise on the National Cancer Institute's bioassay program to identify and evaluate chemical carcinogens in the environment to which humans may be exposed. The members of the Clearinghouse have been drawn from academia, industry, organized labor, public interest groups, State health officials, and quasi-public health and research organizations. Members have been selected on the basis of their experience in carcinogenesis or related fields and, collectively, provide expertise in organic chemistry, biochemistry, biostatistics, toxicology, pathology, and epidemiology. Representatives of various Governmental agencies participate as ad hoc members. The Data Evaluation/Risk Assessment Subgroup of the Clearinghouse is charged with the responsibility of providing a peer review of NCI bioassay reports on chemicals studied for carcinogenicity. In this context, below is the edited excerpt from the minutes of the Subgroup's meeting at which Emetine was reviewed.

It was noted that the drug was tested as part of a program to study the potential carcinogenicity of cancer chemotherapeutic agents. The experimental protocol deviated from the standard bioassay, since it was meant to mimic the clinical exposure situation. The primary reviewer said that the high dose levels initially tested were excessive, as evidence by the growth curves and mortality incidences. Although the NCI staff concluded that the study was inadequate to evaluate the carcinogenicity of Emetine, the Subgroup reviewer said that the survival was sufficient at low dosages to assess the drug when used as a chemotherapeutic agent in adults. He concluded that Emetine poses no carcinogenic hazard when used as an adult chemotherapeutic agent. He added that the study was inadequate as a carcinogenicity screen if the drug were to be used in children.

The secondary reviewer said that he agreed with the conclusions stated in the report. His assessment was based on the high mortality resulting in inadequate numbers of animals in each group. A discussion ensued as to the weight that should be given to a negative study that contained less than the desired number of animals. It was suggested by one Subgroup member that a probabilistic model be constructed that could be used for interpreting negative studies. A motion was made as follows: "As part of a program of research on the potential carcinogenicity of drugs used in cancer chemotherapy, Emetine was tested in rats and mice. Survival of the mice was poor. The bioassay is inadequate to answer the question of carcinogenicity in the absolute sense, but the data obtained do not seem to indicate (Emetine to be) an appreciable risk when used in chemotherapy in adults. If (its) independent use is contemplated, more adequate data need to be developed for a definitive conclusion to be drawn." The motion was seconded and approved by all present except Mr. Garfinkel, who opposed it.

Members present were:

Gerald N. Wogan (Chairman), Massachusetts Institute of Technology Lawrence Garfinkel, American Cancer Society Henry C. Pitot, University of Wisconsin Medical Center George Roush, Jr., Monsanto Company Verald K. Rowe, Dow Chemical U.S.A. Michael B. Shimkin, University of California at San Diego Louise Strong, University of Texas Health Sciences Center John H. Weisburger, American Health Foundation

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

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