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BIOASSAY OF

ACRONYCINE

FOR POSSIBLE CARCINOGENICITY

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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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Carcinogenesis Testing Program Division of Cancer Cause and Prevention National Cancer Institute National Institutes of Health

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

<u>CONTRIBUTORS</u>: This bioassay of acronycine was conducted by Southern Research Institute, Birmingham, Alabama, initially under direct contract to the 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 and the administration of the test chemical. 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. The reported neoplasms and chemical-related lesions were reviewed

by Dr. J. F. Hardisty⁴, who 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 obtained through Mr. C. A. Hewitt⁹. Chemical analyses were performed by Drs. J. Stewart⁸ and R. H. Iwamoto⁸, and the analytical results were reviewed by Dr. S. S. Olin⁶. The structural formula was supplied by NCl².

This report was prepared at Tracor Jitco⁶ under the direction of NCI. Those responsible for the report at Tracor Jitco were Dr. Marshall Steinberg, Director of the Bioassay Program; Dr. L. A. Campbell, Deputy Director for Science; Drs. J. F. Robens and C. H. Williams, toxicologists; Dr. R. L. Schueler, pathologist; Dr. G. L. Miller, Ms. M. S. King and Mr. W. D. Reichardt, bioscience writers; and Dr. E. W. Gunberg, technical editor, assisted by Ms. Y. E. Presley.

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

The following other scientists at NCI² 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, Dr. Harry A. Milman, Dr. Thomas W. Orme, Dr. Robert A. Squire¹⁰, and 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, P.O. Box 474, 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, Life Sciences Division, Menlo Park, California.

⁹Developmental Therapeutics Program, Division of Cancer Treatment, National Cancer Institute, National Institutes of Health, Bethesda, Maryland.

¹⁰Now with the Division of Comparative Medicine, Johns Hopkins University, School of Medicine, Traylor Building, Baltimore, Maryland.

SUMMARY

A bioassay of acronycine for possible carcinogenicity was conducted by administering the test chemical by intraperitoneal injection to Sprague-Dawley rats and B6C3F1 mice.

Initially, groups of 35 rats of each sex were administered acronycine at one of two doses, either 7.5 or 15 mg/kg body weight, in a vehicle composed of 0.05% polysorbate 80 in phosphate-buffered saline. Control groups of each sex consisted of 10 untreated rats (untreated controls) and 10 rats injected with the vehicle (vehicle controls). Because of high mortality rates in the dosed animals, new dosed groups of 35 rats of each sex were started later at a dose of 3.75 mg/kg. Additional groups of 10 untreated and 10 vehicle controls of each sex were also started. The rats were administered the acronycine or the vehicle for 51 or 52 weeks, then observed for an additional 28-30 weeks. All surviving rats were killed at 80-82 weeks.

Initially, groups of 35 mice of each sex were administered acronycine at one of two doses, either 12.5 or 25 mg/kg body weight, in a vehicle composed of 0.05% polysorbate 80 in phosphate-buffered saline. Control groups of each sex consisted of 10 untreated mice (untreated controls) and 10 mice injected with the vehicle (vehicle controls). Because of high mortality rates in the dosed animals, two additional dosed groups were started later: 35 mice of each sex at 6 mg/kg and 40 mice of each sex at 2 mg/kg, together with 10 untreated controls and 10 vehicle controls of each sex for the groups dosed at 6 mg/kg, and 20 untreated controls and 20 vehicle controls for the groups dosed at 2 mg/kg. Periods of administration of the chemical to the mice varied from 25 weeks to 92 weeks, depending on toxicity or length of time of survival. Surviving control animals were killed at 78-105 weeks.

Acronycine was toxic to rats and mice of each sex at the doses used in this bioassay, as shown by the high mortality rates in all but the low-dose groups and by the lower mean body weights in dosed rats and mice at all doses throughout most of the bioassay. Because of this high number of deaths, time-adjusted statistics are used for the analyses of all incidences of tumors.

In male rats, the dose-related trend in the mid- and high-dose groups for the incidence of osteosarcoma at all sites was significant (P = 0.002) using the respective vehicle-control group (vehicle controls 0/8, mid-dose 13/30, high-dose 12/18). Comparisons of the individual groups with respective control groups were also significant for the mid-dose (P = 0.022) and high-dose (P = 0.002) groups, but not for the low-dose group. In female rats, osteosarcoma was observed only in 1/8 high-dose animals.

Sarcomas and other related tumors of the peritoneum were observed in all three dosed groups of both male and female rats, but in none of the control groups (males: low-dose 5/30, mid-dose 3/26, high-dose 7/16; females: low-dose 1/35, mid-dose 5/30, high-dose 13/28). In both sexes, the dose-related trends were significant (males, P = 0.006; females, P = 0.002), and the comparison of the incidences in the high-dose females with the vehicle-control group was significant (P = 0.016). None of the incidences in the individual dosed groups of males were significant when compared with vehicle controls. However, since the tumors were observed in all dosed groups but did not occur in historical-control animals at this laboratory, they are considered to be related to the administration of the chemical.

In female rats, the incidence of all tumors of epithelial origin of the mammary gland was significant only at the low dose (low-dose vehicle controls 1/10, low-dose 22/35, P = 0.004). Adenocarcinomas of the mammary gland were observed in seven lowdose, five mid-dose, and two high-dose female rats, but in no control females. The reverse dose relationship of both benign and malignant tumors was probably due to the higher number of early deaths which occurred in the high-dose group.

In mice, the low survival in all dosed groups except the lowdose animals precluded an evaluation of the significance of the incidences of tumors. Lymphomas occurred in low-dose groups of both males and females; however, the incidence of lymphoma in different control groups was highly variable. The high incidence in the low-dose vehicle controls may have been due to a procedural problem associated with the possibility of transfer of tumor cells or oncogenic viruses during the intraperitoneal injection of the test chemcial.

It is concluded that under the conditions of this bioassay, the low survival of the dosed and control mice and the possible procedural problems associated with the intraperitoneal injection of the chemical did not allow a determination to be made of the carcinogenicity of acronycine in this species. In Sprague-Dawley rats, acronycine in the vehicle of 0.05% polysorbate 80 in phosphate-buffered saline was carcinogenic, producing tumors of the mammary gland in females, osteosarcomas in males, and sarcomas and other related tumors of the peritoneum in both males and females. ł

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I. INTRODUCTION

Acronycine (CAS 7008-42-6, NSC 403169, NCI C01536), an alkaloid derived from the bark of the Australian scrub ash (Lahey and Thomas, 1949), has been investigated as an experimental anticancer drug. In preclinical screening tests in mice, broadspectrum antitumor activity of acronycine was demonstrated (Svoboda et al., 1966). Phase I clinical trials were conducted but have not been reported (Carter, 1971). Acronycine inhibits cellular uptake of two extracellular nucleosides (uridine and thymidine) necessary for DNA and RNA synthesis, apparently by interfering with their transport across cell membranes (Dunn et al., 1973).

Acronycine was selected for screening in the carcinogenesis program in an attempt to evaluate the carcinogenicity of certain drugs that may be used for prolonged periods in humans.

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II. MATERIALS AND METHODS

A. Chemical

ACRONYCINE



Acronycine, which is the name used most commonly for 3,12-dihydro-6-methoxy-3,3,12-trimethy1-7H-pyrano(2,3-c)acridin-7-one, was obtained through the Developmental Therapeutics Program, Division of Cancer Treatment, National Cancer Institute, in two batches were manufactured by the Commonwealth Scientific and that Industrial Research Organization, East Melbourne, Australia. The identity of the chemical was confirmed in analyses performed by Stanford Research Institute for the Developmental Therapeutics These analyses included melting point of the chemical Program. and its picrate salt; elemental analyses (C, H, N) for C₂₀H₁₉NO₃; infrared, ultraviolet, and nuclear magnetic resonance and spectra. Thin-layer chromatography showed only trace impurities.

No attempt was made to identify or quantitate these impurities. All data indicate that these batches of acronycine were nearly 100% pure.

The bulk chemical was stored in a brown glass bottle. This bottle was enclosed in a plastic bag containing $\text{Drierite}^{\textcircled{0}}$ and was refrigerated at 5°C.

B. Dosage Preparation

Test solutions were prepared daily by adding a specified amount of the drug to a vehicle composed of 0.05% polysorbate 80 in phosphate-buffered saline. This mixture was emulsified in a 10-ml Potter-Elvehjem tissue grinder with a Teflon pestle for 20 seconds. Each concentration (0.02, 0.06, 0.125, 0.15, 0.25, 0.3, or 0.6%) was administered on the day of preparation.

C. Animals

Sprague-Dawley rats obtained from Charles River Breeding Laboratories, Inc., Wilmington, Massachusetts, were used for all groups of this species. B6C3F1 mice obtained from A. R. Schmidt, Madison, Wisconsin, were used for the upper mid- and high-dose groups and respective controls; B6C3F1 mice from Charles River Laboratories, for the lower mid-dose groups and controls; and B6C3F1 mice from Litton Bionetics, Frederick, Maryland, for the

low-dose groups and controls. The rats used in the chronic studies were 30-42 days old on arrival at the laboratory; the mice were 30-32 days old. All animals were quarantined (rats: 5 days in the original study, 12 days in the rerun; mice: 5 days in the original study, 10 days in the first rerun, 13 days in the second rerun). Animals having no visible signs of disease were assigned to control and treated groups and earmarked for individual identification.

D. Animal Maintenance

Animals were placed on study at different intervals during a 4-year period. Some techniques for animal care were improved during this time, and as a result, the animal groups placed on study at the beginning of the bioassay (high- and mid-dose rats, high- and upper mid-dose mice) were exposed to somewhat different environmental conditions than the groups started later (low-dose rats; lower mid- and low-dose mice).

During all of the studies, animals were housed in temperatureand humidity-controlled rooms. The temperature range was 20-24°C, and the relative humidity was maintained at 40-60%. The room air was changed 15 times per hour and passed through both intake and exhaust fiberglass roughing filters. In addition to natural light, illumination was provided by fluorescent light for

9 hours per day. Wayne[®] Lab Blox animal meal (Allied Mills, Inc., Chicago, Ill.) and water were supplied daily and were available ad <u>libitum</u>.

All animals were housed in solid-bottom stainless steel cages (Hahn Roofing and Sheet Metal Co., Birmingham, Ala.). Rats were housed five per cage, and mice in the original groups (high- and upper mid-dose) were housed seven per cage; mice in later groups (lower mid- and low-dose) were housed five per cage, due to a reduction in cage size. 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 34 for the high- and mid-dose groups of rats and at week 1 for the low-dose group of rats.

Mouse cages were provided with Sterolit[®] clay bedding (Englehard Mineral and Chemical Co., New York, N. Y.), except for the cages of the low-dose mice, which were provided with Betta-Chip[®] hardwood bedding (Northeastern Products Corp., Warrensburg, N.Y.) from week 84 until termination of the study. Filter bonnets were installed on cages of the low-dose mice in week 32.

Bedding was replaced once per week; cages, water bottles, and feeders were sanitized at 82°C once per week; and racks were cleaned once per week, except during the later studies with

low-dose rats and low-dose mice, when clean cages and fresh bedding were provided twice per week.

Rats and mice were housed in separate rooms. Control animals were housed with respective treated animals. Animals treated with acronycine 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)
5-azacytidine (CAS 320-67-2)
beta-2'-deoxy-6-thioguanosine monohydrate (beta-TGdR)
  (CAS 789-61-7)
1,4-butanediol dimethanesulfonate (busulfan) (CAS 55-98-1)
emetine dihydrochloride tetrahydrate (CAS 316-42-7)
3,3'-iminobis-l-propanol dimethanesulfonate (ester)
  hydrochloride [IPD] (CAS 3458-22-8)
(+)-4,4'-(1-methyl-1,2-ethanediyl)bis-2,6-piperazinedione
  (ICRF-159) (CAS 21416-87-5)
N, 3-bis(2-chloroethy1)tetrahydro-2H-1, 3, 2-oxazaphosphorin-2-
  amine-2-oxide (isophosphamide) (CAS 3778-73-2)
N-(2-chloroethyl)-N-(1-methyl-2-phenoxyethyl)benzylamine
  hydrochloride (phenoxybenzamine hydrochloride) (CAS 63-92-3)
N-(1-methylethyl)-4-((2-methylhydrazino)methyl)benzamide
  monohydrochloride (procarbazine) (CAS 366-70-1)
tris(l-aziridinyl)phosphine sulfide (thio-TEPA) (CAS 52-24-4)
2,4,6-tris(dimethylamino)-s-triazine (CAS 645-05-6)
```

MICE

Feed Studies

```
4-acety1-N-((cyclohexylamino)carbonyl)benzenesulfonamide
  (acetohexamide) (CAS 968-81-0)
anthranilic acid (CAS 118-92-3)
l-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)
2,6-diamino-3-(phenylazo)pyridine hydrochloride (phenazopyridine
  hydrochloride) (CAS 136-40-3)
L-tryptophan (CAS 73-22-3)
N-9H-fluoren-2-ylacetamide (CAS 53-96-3)
N-(p-toluenesulfonyl)-N'-hexamethyleniminourea
  (tolazamide) (CAS 1156-19-0)
1-phenethylbiguanide hydrochloride (phenformin) (CAS 114-86-3)
pyrazinecarboxamide (pyrazinamide) (CAS 98-96-4)
4,4'-sulfonyldianiline (dapsone) (CAS 80-08-0)
4,4'-thiodianiline (CAS 139-65-1)
ethionamide (CAS 536-33-4)
reserpine (CAS 50-55-5)
```

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)
5-azacytidine (CAS 320-67-2)
beta-2'-deoxy-6-thioguanosine monohydrate (beta-TGdR)
(CAS 789-61-7)
1,4-butanediol dimethanesulfonate (busulfan) (CAS 55-98-1)
emetine dihydrochloride tetrahydrate (CAS 316-42-7)
3,3'-iminobis-1-propanol dimethanesulfonate (ester)
hydrochloride [IPD] (CAS 3458-22-8)
(+)-4,4'-(1-methyl-1,2-ethanediyl)bis-2,6-piperazinedione
(ICRF-159) (CAS 21416-87-5)
N,3-bis(2-chloroethyl)tetrahydro-2H-1,3,2-oxazaphosphorin-2-
amine-2-oxide (isophosphamide) (CAS 3778-73-2)
```

```
N-(2-chloroethyl)-N-(1-methyl-2-phenoxyethyl)benzylamine
hydrochloride (phenoxybenzamine hydrochloride) (CAS 63-92-3)
N-(1-methylethyl)-4-((2-methylhydrazino)methyl)benzamide
monohydrochloride (procarbazine) (CAS 366-70-1)
tris(1-aziridinyl)phosphine sulfide (thio-TEPA) (CAS 52-24-4)
2,4,6-tris(dimethylamino)-s-triazine (CAS 645-05-6)
hexamethylmelamine (CAS 148-82-3)
```

E. Subchronic Studies

Subchronic studies were conducted to estimate the maximum tolerated doses of acronycine, on the basis of which low and high concentrations (hereinafter referred to as "low doses" and "high doses") were determined for administration in the chronic studies using one or both sexes of each species. In subchronic studies of acronycine, male and female Sprague-Dawley rats and male Swiss mice were administered the test chemical by intraperitoneal injection three times per week for 45 days at one of five different doses. Following administration of the chemical, all surviving animals were observed for an additional 45 days. Treated groups each consisted of five animals, untreated-control groups consisted of 10 animals, and vehicle control (0.05%)polysorbate in buffered saline) groups consisted of 10 animals. All animals were observed daily and weighed once per week.

The first subchronic study was on female rats using 60, 150, 300, 600, or 1,200 mg/kg body weight for each injection. Weight depression and deaths occurred at all doses. Thus, a second

study was performed, using 1.5, 3.75, 7.5, 15, or 30 mg/kg. Male Sprague-Dawley rats which were available at the time were used. Four animals receiving 30 mg/kg died, but no deaths occurred in the remaining four groups. Mean body weights were depressed during the period of chemical administration, but the animals recovered and no weight depression greater than the 15% limit was present at day 90. No gross abnormalities were observed. Low and high doses for chronic studies using rats were set at 7.5 and 15 mg/kg.

All mice treated at the doses originally selected (100, 250, 500, 1,000, or 2,000 mg/kg) died by week 6. A second study was performed using doses of 2.5, 6.25, 12.5, 25, or 50 mg/kg. By day 90, only one animal treated at a dose of 50 mg/kg had survived. No deaths occurred in the groups receiving 2.5, 6.25, or 25 mg/kg, although one animal treated at 12.5 mg/kg died during week 8. Weight gains were not affected in these latter four groups, and no gross abnormalities were observed at necropsy. Low and high doses for chronic studies using mice were set at 12.5 and 25 mg/kg.

F. Designs of Chronic Studies

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

Sex and	Initial	Acronycine	Time	on Study
Test	No. of	Doseb	Treated	Untreated
Group	<u>Animals</u> ^a	(mg/kg)	(weeks)	(weeks)
Male				
Low-Dose				
Untreated-Control ^c Low-Dose	10	0		81
Vehicle-Control ^C	10	0d	52	28
Low-Dose ^C	35	3.75	52	28
rom-pose		J.1J	52	20
Mid- and High-Dose				
Untreated-Control	10	0		82
Mid- and High-Dose				
Vehicle-Control	10	0q	52	30
Mid-Dose	35	7.5	52	29
High-Dose	35	15	51 ^e	
Female				
Low-Dose				
Untreated-Control ^C	10	0		80
Low-Dose	10	Ū		00
Vehicle-Control ^c	10	0q	52	28
Low-Dose ^C	35	3.75	52	28
	55	3473	5-	10
Mid- and High-Dose				
Untreated Control	10	0		82
Mid- and High-Dose				
Vehicle Control	10	0d	52	30
Mid-Dose	35	7.5	52	29-30
High-Dose	35	15	52	28-29

Table 1. Design of Chronic Studies of Acronycine in Rats

^aAges of rats when placed on study: mid- and high-dose males, 40 days; mid- and high-dose females, 47 days; low-dose males and females, 42 days.

^bAcronycine was administered intraperitoneally in a vehicle consisting of polysorbate 80 in phosphate-buffered saline at a volume of 0.25 ml/100 g body weight three times per week; doses were based on individual weights. The same needle for injection was used for each group of five animals within a cage. Table 1. Design of Chronic Studies of Acronycine in Rats

(continued)

^CBecause of high mortality in treated groups, new treated and control groups were started 77 weeks after the original start of the study.

^dVehicle controls received only polysorbate 80 in phosphate-buffered saline at the same volume as the treated animals. The same bottle of vehicle solution was used for all vehicle-control animals on study at any given time.

eAll high-dose males died or were killed by week 51.

Sex and	Initial	Acronycine	Time o	on Study
Test	No. of	Doseb	Treated	Untreated
Group	<u>Animals</u> a	(mg/kg)	(weeks)	(weeks)
Low-Dose				
Untreated-Control ^C	20	0 ,		105
Low-Dose				
Vehicle-Control ^C	20	0d	71 ^e	
Low-Dose ^C	40	2	92 ^e	
Lower Mid-Dose				
Untreated-Control ^f	10	0		79
Lower Mid-Dose				
Vehicle-Control ^f	10	0^{d}	52	26
Lower Mid-Dose ^f	35	6	49 ^e	
Upper Mid-Dose and				
High-Dose Untreate	d			
Control	10	0		78
Upper Mid-Dose and				
High-Dose Vehicle				
Control	10	0q	31	47
Upper Mid-Dose	35	12.5	31	14
High-Dose	35	25	25 ^e	

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

^aAges of mice when placed on study: upper mid-dose and high-dose 35 days; lower mid-dose, 42 days; low-dose, 43 days.

^bAcronycine was administered intraperitoneally in a vehicle consisting of polysorbate 80 in phosphate-buffered saline at a volume of 1 ml/100 g body weight three times per week; doses were based on the mean weight of the animals in each cage. The same needle for injection was used for each group of five animals (restarted groups) or seven animals (original groups) within a cage.

^CBecause of high mortality in the treated animals, treated and control groups, designated "low-dose," were started 97 weeks after the original start of the study.

dvehicle controls received only polysorbate 80 in phosphate-buffered saline at the same volume as the treated animals. The same bottle of vehicle solution was used for all vehicle-control animals on study at any given time. Table 2. Design of Chronic Studies of Acronycine in Male Mice

(continued)

eAll animals died or were killed by the times indicated.

^fBecause of high mortality in the treated animals, treated and control groups, designated "lower mid-dose," were started 46 weeks after the original start of the study.

Sex and	Initial	Acronycine	Time on Study		
Test	No. of	Doseb	Treated	Untreated	
Group	<u>Animals</u> a	(mg/kg)	(weeks)	(weeks)	
Low-Dose					
Untreated-Control ^C	20	0		105	
Low-Dose					
Vehicle-Control ^c	20	$0^{\mathbf{d}}$	56 ^e		
Low-Dose ^C	40	2	87 ^e		
Lower Mid-Dose					
Untreated-Control ^f	10	0		7 9	
Lower Mid-Dose					
Vehicle-Control ^f	10	0^{d}	52	26	
Lower Mid-Dose ^f	35	6	49e		
Upper Mid-Dose and					
High-Dose Untreated	d				
Control	10	0		79	
Upper Mid-Dose and					
High-Dose Vehicle					
Control	10	0^{d}	31	47	
Upper Mid-Dose	35	12.5	31	10 ^e	
High-Dose	35	25	25e		

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

^aAges of mice when placed on study: upper mid-dose and high-dose, 35 days; lower mid-dose, 42 days; low-dose, 43 days.

^bAcronycine was administered intraperitoneally in a vehicle consisting of polysorbate 80 in phosphate-buffered saline at a volume of 1 ml/100 g body weight three times per week; doses were based on mean weight of the animals in each cage. The same needle for injection was used for each group of five animals (restarted groups) or seven animals (original groups) within a cage.

^cBecause of high mortality in the treated animals, treated and control groups, designated "low-dose," were started 97 weeks after the original start of the study.

dVehicle controls received only polysorbate 80 in phosphate-buffered saline at the same volume as the treated animals. The same bottle of vehicle solution was used for all vehicle-control animals on study at any given time.

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

(continued)

eAll animals died or were killed by the times indicated.

^fBecause of high mortality in the treated animals, treated and control groups, designated "lower mid-dose," were started 46 weeks after the original start of the study.

G. Clinical and Pathologic Examinations

All animals were observed twice daily for signs of toxicity, and animals that were moribund were killed and necropsied. The animals were weighed individually each week, every 2 weeks, or once per month, depending on the schedule in use at the time the animals were weighed. Palpation for masses was carried out at each weighing.

The pathologic evaluation consisted of gross and microscopic examination of major tissues, major organs, and all gross lesions from killed animals and from animals found dead. The following tissues were examined microscopically: skin, muscle, lungs and bronchi, trachea, bone and bone marrow, spleen, lymph nodes, thymus, heart, salivary gland, liver, gallbladder and bile duct (mice), pancreas, esophagus, stomach, small intestine, large intestine, kidney, urinary bladder, pituitary, adrenal, thyroid, parathyroid, mammary gland, prostate or uterus, testis or ovary, brain, and sensory organs. Peripheral blood smears were prepared from each animal killed. Occasionally, additional tissues were also examined microscopically. The different tissues were preserved 10% buffered formalin, embedded in 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 The interpretation of limits is that in analyses. the 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)

Mean body weights of both male and female rats at all doses were lower than those of the vehicle and untreated controls during most of the study (figures 1 and 2). 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.

Rales were noted in a few animals of both treated and control groups. No other clinical signs were recorded that could be related to toxicity or early deaths. To control respiratory disease, the mid- and high-dose groups and respective controls received oxytetracycline in the drinking water at 0.6 mg/ml during weeks 34 to 40 and at 0.3 mg/ml during weeks 40 to 44.

B. <u>Survival (Rats)</u>

The Kaplan and Meier curves estimating the probabilities of survival for male and female rats administered acronycine by injection at the doses of this experiment, together with the untreated and vehicle controls, are shown in figures 3 and 4.



Figure 1. Growth Curves for Male Rats Treated With Acronycine



Figure 2. Growth Curves for Female Rats Treated with Acronycine



Figure 3. Survival Curves for Male Rats Treated with Acronycine



Figure 4. Survival Curves for Female Rats Treated with Acronycine

In male rats, the results of the Tarone test for positive doserelated trend in mortality over the period of the bioassay are significant (P < 0.001), using either set of controls. Also, each of the treated groups has a significantly lower survival than either control group. In the high-dose group, only 2/35(6%) animals survived to week 47 of the study, and the median time on study was 31 weeks; however, the first observed tumors occurred as early as week 32. In the mid-dose group, 1/35 (3%) animals survived to the end of the study, 9/35 (31%) survived to week 52, the median time on study was 42 weeks, and the first observed tumor occurred at week 35. In the low-dose group, 9/35(26%) animals survived to termination of the study, 20/35 (57%) survived to week 52, the median time on study was 56 weeks, and the first observed tumor occurred at week 48. At least 70% of the animals in the control groups (10/10 in either set of lowdose controls and 7/10 in either set of mid- and high-dose controls) lived to the end of the study. The early deaths of the male treated rats may have suppressed the incidences of lateappearing tumors.

In female rats, the results of the Tarone test are significant (P < 0.001), using the high-dose, the mid-dose, and either set of control groups, and an indicated departure from linear trend is observed (P = 0.008), due to the steep increase in deaths in the

female high-dose rats. The survival of the low-dose group did not differ significantly from that of either of its control groups. In the high-dose group, only 4/35 (11%) animals survived to week 80, 14/35 (40%) survived to week 52, the median time on study was 46 weeks, and the first observed tumor occurred at week 39. In the mid-dose group 19/35 (54%), in the low-dose group 23/35 (66%), and in the controls at least 80% of the animals (9/10 of the low-dose vehicle controls, 8/10 of the mid- and high-dose vehicle controls, 8/10 of the low-dose untreated controls, and 8/10 of the mid- and high-dose untreated controls) survived to termination of the study. The early deaths of the high-dose female rats may have suppressed the incidences of lateappearing tumors.

C. Pathology (Rats)

Histopathologic findings on neoplasms in rats are summarized in Appendix A, tables Al-A4; findings on nonneoplastic lesions are summarized in Appendix C, tables Cl-C4.

A variety of neoplasms were observed in the control and treated rats. There was a high incidence of neoplasms observed in the treated rats when compared with the untreated- or vehiclecontrol rats. The treated female rats had a higher incidence of adenocarcinoma of the mammary gland than the control female rats. In the treated male and female rats, there were malignant neoplasms of mesenchymal tissue, especially of the peritoneal cavity; these included poorly differentiated sarcomas, fibrosarcomas, hemangiosarcomas, malignant mesotheliomas, and osteosarcomas. Similar neoplasms were not observed in any of the control rats.

Malignant neoplasms of the mammary gland were observed in seven low-dose, five mid-dose, and two high-dose female rats. No malignant mammary neoplasms were observed in the control females. The reverse dose relationship of these neoplasms was likely due to the higher number of early deaths and killed moribund animals which occurred in the mid- and high-dose groups. Although the malignant mammary neoplasms varied in histologic appearance, they were classified as adenocarcinomas. These neoplasms were highly cellular and were characterized as focal proliferations of hyperchromatic glandular epithelium. The proliferating epithelium formed small nests and acini which were supported by a fibrous Papillary proliferation of the mammary epithelium was stroma. observed in one of the adenocarcinomas, and large cystic areas were present in a second adenocarcinoma.

A high incidence of osteosarcoma (low-dose 3/31, mid-dose 13/32, high-dose 12/34) was observed in the treated male rats. Most of these neoplasms were observed grossly as enlargements involving

the long bones of the limbs. Two osteosarcomas involved vertebrae. Occasionally, the neoplasm appeared to involve only soft tissues, and primary bone involvement was not observed. The osteosarcomas were characterized as anaplastic spindle-cell neoplasms which were forming varying amounts of osteoid. Several of the osteosarcomas had metastasized to other organs, most frequently, to the lung and the liver.

Other types of malignant mesenchymal neoplasms, especially of tissues of the peritoneal cavity, were observed frequently in treated male and female rats. Although all of these neoplasms were poorly differentiated spindle-cell tumors, they were variable in histologic appearance.

Some of the neoplasms were undifferentiated and composed of very pleomorphic spindle cells. These neoplasms were highly cellular and contained undifferentiated mesenchymal cells, poorly differentiated spindle cells, and multinucleated giant cells. The neoplasms were rapidly proliferating, and contained numerous mitotic figures. These undifferentiated sarcomas were classified as sarcomas, NOS (not otherwise specified).

Other poorly differentiated neoplasms appeared to be composed of malignant fibroblasts which were producing varying amounts of collagen. These neoplasms were classified as fibrosarcomas.

A third group of malignant mesenchymal neoplasms found in the treated rats were forming clefts and blood-filled spaces lined by pleomorphic, hyperchromatic endothelial cells. These neoplasms were classified as hemangiosarcomas.

A fourth type of neoplasm observed in the treated rats was classified as mesothelial sarcoma (malignant mesothelioma). These neoplasms were nodular growths arising from the serous membranes lining the peritoneal cavity. They were characterized as papillary projections consisting of a fibrous core covered by large mesothelial cells.

The mesenchymal neoplasms described above appeared to be highly malignant, as evidenced by a high incidence of invasion into adjacent organs and soft tissues and/or metastasis to other sites. Many of these neoplasms were generalized and involved the serosal surfaces of the abdominal viscera.

A variety of nonneoplastic lesions were present in both treated and control animals. The only lesion which appeared to be related to the injection was chronic inflammation in the peritoneal cavity, involving the serosal surfaces of the mesentery and visceral organs. There were also focal areas of coagulative necrosis observed in the liver. These lesions occurred in one vehicle-control rat and several treated rats.

In the judgment of the pathologists, acronycine, at the doses used in this bioassay, induced malignant neoplasms in both male and female rats. Adenocarcinoma of the mammary gland in female rats and malignant neoplasms of mesenchymal tissues in both male and female rats were observed only in the treated groups.

D. Statistical Analyses of Results (Rats)

Tables El and E2 in Appendix E contain the time-adjusted statistical analyses of the incidences of those primary tumors that were observed in at least two animals in one group and with an incidence of at least 5% in one or more than one group. Time-adjusted analyses eliminate animals that died before week 52 on study unless a tumor was found at the specific site before this time; in the latter instance, the analysis is based on animals that survived at least as long as the animal in which the first tumor was found. The untreated controls are not included in the tables and the analyses, since the test conditions of the vehicle controls more closely resembled those of the treated animals.

In male rats, the result of the Cochran-Armitage test for positive dose-related trend in the incidence of osteosarcoma of the musculoskeletal system is significant (P = 0.019), using the mid- and high-dose vehicle-control group, the mid-dose group, and

the high-dose group, and the results of the Fisher exact test show that the incidences in the mid- and high-dose groups are significantly higher than that in the vehicle-control group (P =0.027 and P = 0.013, respectively); however, the probability level in the mid-dose group is above the 0.025 level for significance required by the multiple comparison criterion. The life table of the incidence of this tumor in the male rats is shown in figure 5. The result of the Tarone test is significant (P < 0.001) when the mid- and high-dose groups are used with their designated control group; however, the result of the Cox test comparing the low-dose group and its vehicle-control group The statistical conclusion is that the is not significant. incidence of osteosarcoma of the musculoskeletal system in male rats is associated with the administration of acronycine. No such tumor was observed in female rats.

Two osteosarcomas of the liver were found in the high-dose male rats. The result of the Cochran-Armitage test on the incidence of this tumor is significant (P = 0.048), using the mid- and high-dose vehicle-control group, the mid-dose group, and the high-dose group; however, the results of the Fisher exact test are not significant. Results of statistical tests on the incidences of this tumor in female rats are not significant.

When osteosarcomas of all sites are considered together, the



Figure 5. Life Table for Male Rats Treated with Acronycine: Osteosarcoma of the Musculoskeletal System

result of the Cochran-Armitage test is significant (P = 0.002) in the male rats, using the mid- and high-dose vehicle-control group, the mid-dose group, and the high-dose group. The results of the Fisher exact test indicate that the incidences in both the mid- and high-dose groups are significantly higher than that in the control group (P = 0.022 and P = 0.002, respectively). The statistical conclusion is that the incidence of osteosarcomas at all sites in male rats is dose associated. Results of statistical tests on the incidences of these tumors in female rats are not significant.

The result of the Cochran-Armitage test on the incidence of cortical adenoma of the adrenal in male rats is significant (P = 0.045), using the mid- and high-dose vehicle-control group, the mid-dose group, and the high-dose group, but the results of the Fisher exact test are not significant. Results of statistical tests on the incidences of this tumor in female rats are not significant.

The results of the Fisher exact test show that the incidence of fibroadenoma of the mammary gland in low-dose female rats is significantly higher (P = 0.007) than that in the low-dose vehicle controls; however, the incidences of the tumor in the mid- and high-dose groups are not significant. When all tumors of the mammary gland, except fibroma, are combined for analysis,

the results of the Fisher exact test show that the incidence in the low-dose group is significantly higher (P = 0.004) than that in the low-dose vehicle controls; however, the result of the Cochran-Armitage test using the mid- and high-dose groups and the appropriate control indicates a significant trend (P = 0.034) in the negative direction. This significant negative trend is due, principally, to the lower incidence observed in the high-dose group. The life-table analysis made using the times of observations of this tumor also yielded a significant negative trend (P= 0.017). As shown in the section concerning survival of the female rats, the high-dose group evidences a steep decrease in survival compared with the other groups.

In female rats, five sarcomas, NOS, of the peritoneum were found in the high-dose group, but none were observed in the other groups studied. The result of the Cochran-Armitage test on the incidence of this tumor is significant (P = 0.010), using the mid- and high-dose vehicle-control group, the mid-dose group, and the high-dose group, but the results of the Fisher exact test are not significant. Results of statistical tests on the incidences of this tumor in male rats are not significant.

When sarcoma and other related tumors of the peritoneum are considered together, the results of the statistical tests are significant in each sex. The results of the Cochran-Armitage

test, using the mid- and high-dose vehicle-control group, the mid-dose group, and the high-dose group indicate probability levels of P = 0.006 in males and P = 0.002 in females, and the Fisher exact comparisons of the incidences in the high-dose groups with those in the control groups are P = 0.033 in males and P = 0.016 in females; however, the P value for the males is above the 0.025 level required for significance by the multiple comparison criterion. The statistical conclusion is that the incidence of these tumors is dose associated in female rats.

In summary, the statistical tests indicate dose association in the incidence of osteosarcoma of the musculoskeletal system and in osteosarcoma at all sites in male rats, and also in sarcoma and other related tumors of the peritoneum in female rats.

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

A. Body Weights and Clinical Signs (Mice)

Mean body weights of the high-, upper mid-, and lower mid-dose male mice and of all treated female groups were generally lower than those of the untreated- and vehicle-control groups (figures 6 and 7), while the weights of the low-dose males were more comparable to those of the control groups. Fluctuations in the growth curve may be due to mortality; as the size of a group diminishes, the mean body weight may be subject to wide variation.

Abdominal distention was the only consistent clinical sign reported in the treated animals; it occurred in all but the high-dose group, in which the time of survival was very short. To control respiratory disease, propylene glycol vapor was used during weeks 11 to 22 in the room housing the low-dose mice.

B. Survival (Mice)

The Kaplan and Meier curves estimating the probabilities of survival for male and female mice administered acronycine by injection at the doses of this experiment, together with the untreated and vehicle controls, are shown in figures 8 and 9.



Figure 6. Growth Curves for Male Mice Treated with Acronycine



Figure 7. Growth Curves for Female Mice Treated with Acronycine



Figure 8. Survival Curves for Male Mice Treated with Acronycine





In each sex, the result of the Tarone test for positive doserelated trend in mortality over the period of the bioassay is significant (P < 0.001), using the high-dose group, the upper mid-dose group, and the vehicle-control groups; all animals in the treated groups died before the end of the study. The median number of weeks on study of male mice was 18 for the high-dose group, 30 for the upper mid-dose, 48 for the lower mid-dose, and 89 for the low-dose. In the low-dose group of male mice, 33/40 (82%) animals were alive after week 52 on study, and no tumor was observed before this time. In the lower mid-, upper mid-, and high-dose groups, all 35 male mice in each group died before week 52. No tumor was observed in the lower mid- and high-dose groups, but in the upper mid-dose group, a carcinoma of the bile duct was observed at week 30 on study.

In females, the median number of weeks on study was 17 for the high-dose, 31 for the upper mid-dose, 48 for the lower mid-dose and 74 for the low-dose groups. In the low-dose group, 31/40 (78%) animals lived to week 52 on study, and no tumor was observed before week 52. All 35 female mice in each of the three other treated groups (lower mid-, upper mid-, and high-dose groups) died before week 52. No tumor was observed in the lower mid- and high-dose groups, while in the upper mid-dose group, two tumors were observed, one at week 29 (adenocarcinoma, NOS, of the

bile duct) and the other at week 32 (granulocytic leukemia of the bone marrow). The survival rates of the control groups within each sex are not comparable, since, in male mice, the percentage survivals to 78 weeks among the upper mid- and high-dose, lower mid-dose, and low-dose vehicle-control groups are 5/10 (50%), 7/10 (70%), and 0/20 (0%), respectively; among the corresponding untreated-control groups, they are 10/10 (100%), 9/10 (90%), and 16/20 (80%). In females, the percentage survivals to 78 weeks among the three vehicle-control groups are 9/10 (90%), 8/10 (80%), and 0/20 (0%); among the untreated-control groups, they are 9/10 (90%), 10/10 (100%), and 19/20 (95%). The early deaths of the treated mice of both sexes may have suppressed 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 were observed at approximately the same incidence in the control mice as in the low-dose mice. No neoplasms were observed in any of the high-dose mice, and very few neoplasms were observed in upper and lower mid-dose mice. There was a high incidence of early deaths and killed moribund

animals in these three treated groups of animals during the exposure period, which may be related to the unusually low incidence of neoplasia observed in these groups.

There were cases in this study in which some types of neoplasms occurred only in treated mice. These have been observed as spontaneously occurring neoplasms in this strain of mouse. The nature and low incidence of these neoplasms in this study provide no evidence that they are related to the administration of acronycine.

A variety of nonneoplastic lesions were observed in both control and treated mice. The only apparent acronycine-induced lesions observed in this study were acute and chronic inflammatory lesions involving the thoracic and abdominal viscera, renal medullary necrosis, and bile duct hyperplasia in several mice.

In the judgment of the pathologists, the results of this microscopic examination of mice receiving acronycine at any of the four doses are inconclusive. Although there were no obvious acronycine-induced neoplasms observed in the treated animals when compared with control animals, the high incidence of early deaths and killed animals in the treated groups precludes a definitive conclusion on the effect of acronycine in mice in this study.

D. Statistical Analyses of Results (Mice)

Tables Fl and F2 in Appendix F contain the time-adjusted statistical analyses of the incidences of those primary tumors that were observed in at least two animals in one group and with an incidence of at least 5% in one or more than one group. The untreated controls are not included in the tables and the analyses, since the test conditions of the vehicle controls more closely resembled those of the treated animals. This bioassay originally started with 25 mg/kg as the high dose. In both sexes, survival was low, and no tumors were observed in the high-dose groups. In the groups of male and female mice receiving 12.5 mg/kg (upper mid-dose groups) survival was also low, and only one tumor, a carcinoma of the bile duct, was observed among the male mice. In the upper mid-dose females, one animal had leukemia and another had adenocarcinoma of the bile Subsequently, two other groups were started at doses of 6 duct. mg/kg (lower mid-dose group) and 2 mg/kg (low-dose group). No tumors were observed in the lower mid-dose group. Since the survival and numbers of tumors observed in all groups except for the low-dose group and its control group were so low that meaningful analysis was precluded, only the low-dose group and its control group were subjected to statistical analysis. A

summary of all tumors in all treated groups is given in tables BI-B4 of Appendix B.

No significant increase in incidences of tumors in the treated groups was observed when compared with their control groups, although statistical analysis of the incidence of tumors in the mice was performed using all mice evaluated histopathologically and also using only those animals that lived beyond week 52 or beyond the week of the first observation of a specific tumor, whichever number of weeks was smaller. In each sex, the incidences of lymphoma in the low-dose groups were lower than those observed in the respective controls. When the incidences of lymphoma in the untreated-control groups are compared with those of the corresponding vehicle-control groups, no significant difference is observed between the lower mid-dose vehicle controls (0/10 in each sex) and the lower mid-dose untreated controls (0/9 in males and 0/10 in females); however, a significant difference is observed between the low-dose vehicle controls (13/17 in males and 19/19 in females) and the low-dose untreated controls (3/18 in males and 6/19 in females). These extremely high incidences in the vehicle-control groups compared with the untreated groups may indicate procedural difficulties. Overall, the shortened life spans of the treated and vehiclecontrol groups of mice precluded meaningful evaluation.

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V. DISCUSSION

Acronycine was toxic to both sexes of rats and mice when administered by intraperitoneal injection at the doses used in this bioassay. This is shown by the high mortality rates in all but the low-dose groups, and by the lower mean body weights in dosed rats and mice at all doses throughout most of the study. Because of this high number of deaths, time-adjusted statistics were used for the analyses of all incidences of tumors.

In male rats, the dose-related trend in the mid- and high-dose groups for the incidence of osteosarcoma of all sites was significant (P = 0.002) using the respective vehicle-control group (vehicle controls 0/8, mid-dose 13/30, high-dose 12/18). Comparisons of the individual groups with respective control groups were also significant for the mid-dose (P = 0.022) and high-dose (P = 0.002) groups, but not for the low-dose group. Most of these neoplasms were observed grossly as enlargements of the long bones of the limbs, but occasionally, the tumors appeared to involve only soft tissues, and primary bone involvement was not observed. In female rats, osteosarcoma was observed only in 1/8 high-dose animals.

Sarcomas and other related tumors of the peritoneum (listed in the appendixes as sarcoma, NOS; mesothelioma, NOS; malignant

mesothelioma; and fibrosarcoma of the peritoneum or multiple organs) were observed in all three dosed groups of both male and female rats, but in none of the control groups (males: low-dose 5/30, mid-dose 3/26, high-dose 7/16; females: low-dose 1/35, mid-dose 5/30, high-dose 13/28). In both sexes, the doserelated trends were significant (males, P = 0.006; females, P =0.002), and the comparison of the incidences in the high-dose females with the vehicle-control group was significant (P = 0.016). None of the incidences in the individual dosed groups of males were significant when compared with vehicle controls. However, since the tumors occurred in all dosed groups but did not occur in any of the historical-control animals at this laboratory, they are considered to be related to administration of the chemical.

In female rats, the incidence of all tumors of epithelial origin of the mammary gland was significant only at the low dose (low-dose vehicle controls 1/10, low-dose 22/35, P = 0.004). Adenocarcinomas of the mammary gland were observed in seven low-dose, five mid-dose, and two high-dose female rats, but in no control females. The reverse dose relationship of both benign and malignant tumors was probably due to the higher number of early deaths which occurred in the high-dose group.

All mice of each sex of the three upper dosed groups had died by

week 52. Among the low-dose mice, 33/40 males and 31/40 females lived to week 52 on study; however, only 5/20 male and 1/20 female low-dose vehicle controls lived beyond 1 year. Among the high-, upper, and lower mid-dose groups, only one tumor was observed in males and two in females in the upper mid dose. Even among the low-dose groups, no tumor was observed in a statistically significant incidence.

Lymphomas were observed at lower incidences in the low-dose male mice (10/37)and low-dose females (6/37)than in the corresponding male (13/17) and female (19/19) low-dose vehicle controls. However, the incidences in the upper mid-dose and high-dose vehicle-control and the lower mid-dose vehicle-control groups were not increased. When the incidences of lymphoma in the untreated- and vehicle-control groups were compared, no significant differences were observed between the lower mid-dose vehicle controls (0/10 in both sexes) and the lower mid-dose untreated controls (0/9 in males and 0/10 in females); however, a significant difference was observed between the low-dose vehicle controls (13/17) in males and 19/19 in females) and the low-dose untreated controls (3/18 in males and 6/19 in females).

This high incidence in the low-dose vehicle controls may have been due to a procedural problem. The same needle for injection was used for each group of five animals within a cage, and

furthermore, the same bottle of vehicle solution was used for all vehicle-control animals. Thus, the possibility of transfer of tumor cells or oncogenic viruses cannot be excluded.

Nonneoplastic lesions of the peritoneal cavity, i.e., inflammation and fibrosis, were found in rats and mice from each of the dosed groups, but not in any control animals.

Since 1966, acronycine has been tested as an antineoplastic agent in humans; however, no long-term studies in animals or humans have been reported. In a 6-month study for pulmonary tumor response in strain A mice, Stoner et al. (1973) found that intraperitoneal injection of total doses of 0.53 to 2.60 mg/kg of acronycine did not elicit a carcinogenic response.

The vehicle used for the acronycine for all groups in this bioassay contained polysorbate 80, which in itself has been implicated as a carcinogen, but only in the production of local sarcomas following subcutaneous injections (Grasso et al., 1971). However, in these bioassays no local sarcomas were observed in the vehicle-control animals administered polysorbate 80 by intraperitoneal injection.

It is concluded that under the conditions of this bioassay, the low survival of the dosed and control mice and the possible procedural problems associated with intraperitoneal injection of
the chemical do not allow a determination to be made of the carcinogenicity of acronycine in this species. In Sprague-Dawley rats, acronycine in the vehicle of 0.05% polysorbate 80 in phosphate-buffered saline was carcinogenic, producing tumors of the mammary gland in females, osteosarcomas in males, and sarcomas and other related tumors of the peritoneum in both males and females.

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APPENDIX A

SUMMARY OF THE INCIDENCE OF NEOPLASMS IN RATS GIVEN INTRAPERITONEAL INJECTIONS OF ACRONYCINE

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SUMMARY OF THE INCIDENCE OF NEOPLASMS IN MALE RATS GIVEN INTRAPERITONEAL INJECTIONS OF ACRONYCINE (CONTROL GROUPS)

	LOW DOSE UNTREATED CONTROL	MID AND HIGH DOSE UNTREAT- ED CONTROL	LOW DOSE VEHICLE CONTROL	MID AND HIGH DOSE VEHICLE CONTROL
WINALS INITIALLY IN STUDY	10		10 10	10
ANIMALS NECROFSIED ANIMALS EXAMINED HISTOPATHOLOGICALLY	10	9	10 10	8
NTEGOMENTARY SYSTEM				
NONE				
RESPIRATORY SYSTEM				
IUNG ALVEOLAR/ERCNCHIOLAR ADENONA	• •	(9)	• •	(8) 1 (13%
IBNATOPOIETIC SYSTEM				
NONE				
IRCULATORY SYSTEM				
NONE				
IGESTIVE SYSTEM				
NONE				
IFINARY SYSTEM				
NONE				
ENDOCRINE SYSTEM				
#PITUITARY	(5)	(8)	(4)	(7)
CHROMOPHOBE ADENOMA CHROMOPHOEE CARCINOMA		1 (13%)		2 (29%

TABLE A1 CONTROL MALE RATS: NEOPLASMS (CONTINUED)

	CONTROL	MID AND HIGH DOSE UNTREAT- ED CONTROL	CONTROL	CONTROL
ACIDOPHIL ADENOMA				1 (14%
#ADRENAL CORTICAL PEENCMA	(10)	(9)	(1C)	(8) 1 (13%
EPRODUCTIVE SYSTEM				
*MAMMARY GLANE ADENOCARCINOMA, NOS	• •	(9)	(10)	(8) 1 (13%
ERVOUS SYSTEM				
NONE				
SPECIAL SENSE CRGANS				
NONE				
MUSCULOSKELFTAI SYSTEM				
NONE				
ECTY CAVITIES				
NONE				
ALL OTHER SYSTEMS				
NONE				
INIMAL DISPOSITION SUMMARY				
ANIMALS INITIALLY IN STUDY Natural dfathð Noribund Sacrifice Schfulfe Sacrifice	10	10 3	10	10 2 1
ACCIDENTALLY KILLED TERMINAL SACRIFICE ANIMAL HISSING	10	7	10	7
<u>2 INCLUDES_AUIOLIZED_ANIMALS</u>				

NUMBER OF ANIMALS RITH TISSUE BXAMINED MICROSCOPICALLY * NUMBER OF ANIMAIS NECROPSIED

TABLE A1 CONTROL MALE RATS: NEOPLASMS (CONTINUED)

	UNTREATED	MID AND HIGH DOSE UNTREAT- ED CONTROL	VEHICLE	DOSE VEHICLE
TUMOR SUMMARY				
ICHOS SOUGREI				
TOTAL ANIMALS WITH PRIMARY TUMOBS* TOTAL PPIMARY TUMORS		1 1		4 6
TOTAL ANIMAIS WITH BENIGN TUMORS TOTAL EFNICN TUMORS				4 5
TOTAL ANIMALS WITH MALIGNANT TUMORS TOTAL MALIGNANT TUMORS		1		1 1
TOTAL ANIMALS WITH SECONDARY TUMORS TOTAL SECCNDARY TUMOPS	•			
TOTAL ANIMALS WITH TUMORS UNCERTAIN BENIGN OR MALIGNANT TOTAL UNCEFTAIN TUMORS	-			
TOTAL ANIMALS WITH TUMORS UNCEBTAIN PRIMARY OR HETASTATIC TOTAL UNCEFTAIN TUMORS	-			
* PRIMARY TUMORS: ALL TUMORS EXCEPT 3 * SECONDARY TUMORS: MPTASTATIC TUMORS			DJACENT ORGAN	

SUMMARY OF THE INCIDENCE OF NEOPLASMS IN MALE RATS GIVEN INTRAPERITONEAL INJECTIONS OF ACRONYCINE (TREATED GROUPS)

		MID DOSE	
ANIMALS INITIAILY IN STUDY	35	35	35
ANIHALS NECFOESIED	31	32	34
ANIMALS EXAMINE HISTOPATHOLOGICALLY	30	31	34
INTEGUMENTARY SYSTEM			
*SUBCUT TISSUE	(31)	(32)	(34)
SARCCHA, NOS	1 (3%)		
PIBRCMA FIBROSAECOMA	1 (3%)	1 (3%)	1 (3%)
OSTECSAFCCEA		1 (3%)	1 (3%)
RESPIRATORY SYSTEM			
#LUNG	(30)	(31)	(34)
ALVEOLAR/EBCNCHIOLAR ADENOMA	1 (3%) 1 (3%)		
HENANGIOSAFCOMA, METASTATIC Osteosarcoma, metastatic	2 (7%)	9 (29%)	10 (29%
FENATOPOIBTIC SYSTEM		*	
*LYMPH NODE	(30)	(20)	(21)
OSTEOSARCCEA, METASTATIC	()	1 (5%)	1 (5%)
MMESENTERIC I. NODE MESOTHELICMA, METASTATIC	(30) 1 (3%)	(20)	(21)
CIRCULATCRY SYSTEM			
NONE			
LIGESTIVE SYSTEM			
#LIVER	(29)	(31)	(34)
HEPATOCFLLULAR APENOMA <u>HEPATOCFLLULAF CARCINOMA</u>	1 (3%)		

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

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TABLE A2 TREATED MALE RATS: NEOPLASMS (CONTINUED)

	LOW DOSE	MID DOSE	HIGH DOSE
FIBROSAFCCHA			1 (3%)
HE MA NGIOSAFCC MA	4 (14%)		1 (3%)
OSTBOSARCCHA Ostecsarccha, metastatic	2 (108)	4 (13%)	2 (6%) 5 (15%
USIEUSARCCHA, MEIASIATIC	3 (10%)	4 (138)	אנו) כ
BILE DUCT	(31)	(32)	(34)
BILE DUCT CAFCINOMA	2 (6%)		
*PANCR EAS	(24)	(26)	(30)
FIBROSARCCEA		1 (4%)	
OSTECSARCCHA, METASTATIC		1 (4%)	1 (3%)
STONACH	(29)	(30)	(30)
OSTEOSARCCEA, METASTATIC		1 (3%)	
*LARGE INTESTINE	(24)	(29)	(28)
SQUAMOUS CELL CARCINOMA	(=)	1 (3%)	(2-1)
RINARY SYSTEM			
KIDNEY	(29)	(31)	(33)
OSTEOSARCCEA, METASTATIC	. ,	Ì 1 (3¶)	1 (3%)
ADRENAL CORTICAL PFENOMA CORTICAL CPRCINOMA	(28) 1 (4%)	(31) 2 (6%) 1 (3%)	(33) 4 (12%
OSTROSARCCMA, MPTASTATIC	1 (4%)		3 (9%)
EPRODUCTIVE SYSTEM			
*NAMNARY GLAND	(31)	(32)	(34)
PIBROADFNCMA		1 (34)	•- •
ITESTIS	(28)	(30)	(32)
INTERSTITIAL-CELL TUMOR	1 (4%)		
ERVOUS SYSTEM			
NONE			
PECIAL SENSE CRGANS			
_NONE			

* NUMBER OF ANIMALS WITH HISSUE * NUMBER OF ANIMALS NECROPSIEC

	LOW DOSE	MID DOSE	HIGH DOSE
USCULOS KELET # I SYSTEM			
* BONE OSTEOSARCCEA	(31) 3 (10%)	(32) 10 (31%)	(34) 8 (24%
* VERT E BR A OSTEOSA FCC F A	(31)	(32) 1 (3%)	(34) 1 (3 %)
*SKELETAL HUSCLE OSTECSAFCCEA, METASTATIC	(31)	(32)	(34) 1 (3%)
ODY CAVITIES			
*ABDOMINAL CAVITY PIBROSARCOMA	(31)	(32)	(34) 1 (3%)
* PERITONEUN SARCCMA, NCS FIBROSARCOMA	(31) 2 (6 %)	(32)	(34) 1 (3%) 2 (6%)
NESOTHELICFA, NOS MESOTHELICFA, HALIGNANT HEMANGIOSARCOHA, METASTATIC	1 (3%) 2 (6%) 1 (3%)	1 (3%)	2 (0 4)
OSTEOSARCOMA Osteosarcoma, metastatic	1 (3%)		1 (3%)
*PFRITONEAL CAVITY FIBRCSARCCHA	(31)	(32)	(34) 1 (3 %)
+ MESENTERY OSTEOSARCCEA	(31)	(32) 1 (3 %)	(34)
ALL OTHER SYSTEMS			
*BULTIPIE ORGANS SARCCHA, NCS, METASTATIC	(31) 2 (6 %)	(32)	(34)
FIBROSARCONA OSTEOSARCONA, METASTATIC	1 (3%)	2 (6%) 2 (6%)	2 (6%)
DI AP HR AGH FIRBCSARCCHA			

TABLE A2 TREATED MALE RATS: NEOPLASMS (CONTINUED)

NUMBER OF ABIMALS WITH TISSUE EXAMINED MICROSCOPICALLY
 NUMBER OF ANIMALS NECROPSIED

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TABLE A2 TREATED MALE RATS: NEOPLASMS (CONTINUED)

		MID DOSE	HIGH DC
ABIHAL DISECSITICN SUMMARY			
ANIMALS INITIALLY IN STUDY	35	35	35
NATUFAL DEATH@	17	17	9
MORIBUNE SACRIFICF	9	17	26
SCHEDULED SACRIFICE			
ACCIDENTALLY KILLED			
TERMINAL SPCRIFICE	9	1	
ANIHAL MISSING			
@ INCLUDES AUICLYZED ANIMALS			
TUMOR SUMMARY			
TOTAL ANIMALS WITH PRIMARY TUMORS*	17	16	15
TOTAL PRIMARY TUMORS	21	23	28
TOTAL ANIMALS WITH BENIGN TUNORS	5	4	4
TOTAL BENIGN TUMORS	5	4	4
TOTAL ANIMALS WITH MALIGNANT TUBORS	12	16	14
TOTAL MALIGNANT TUMORS	15	18	24
TOTAL ANIMALS WITH SECONDARY TUBORS		12	10
TOTAL SECONDARY TUMORS	13	19	22
TOTAL ANIMALS WITH TUMORS UNCERTAIN			
EENIGN OR MAIIGNANT	1	1	
TOTAL UNCEFTAIN TUMORS	1	1	
TOTAL ANIMAIS WITH TUNOPS UNCERTAIN	-		
FRIMARY OR METASTATIC			
TOTAL UNCEFTAIN TUMORS			
* PRIMARY TUMORS: ALL TUMORS EXCEPT S			
# SECONDARY TUEORS: METASTATIC TUBORS	OR TUMORS IN	VASIVE INTO AN AD	JACENI ORG

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SUMMARY OF THE INCIDENCE OF NEOPLASMS IN FEMALE RATS GIVEN INTRAPERITONEAL INJECTIONS OF ACRONYCINE (CONTROL GROUPS)

	LOW DOSE UNTREATED CONTROL	MID & HIGH DOSE UNTREATED CONTROL	LOW DOSE VEHICLE CONTROL	MID & HIGH DOSE VEHICLE CONTROL
ANIMALS INITIALLY IN STUDY	10	10	1C 10	10
ANIMALS NECFOESIED	10	9		9
NIMALS EXAMINED HISTOPATHOLOGICALL			10	9
INTEGUNENTARY SYSTEM				
NONE				
RESPIRATORY SYSTEM				
ATRACHEA CARCINONA, NOS, METASTATIC	(10)	(8)	(10)	(9) 1 (11%
	<i>(</i> 1 1 1 1 1 1 1 1 1 1		(40)	•
*LUNG ALVECLAR/ERCNCHIOLAR CARCINGNA	(10)	(7)	(10)	(9) 1 (11 %
FEMATOPOIETIC SYSTEM				
NONE				
·····				
CIRCULATORY SYSTEM				
NON E				
CIGESTIVE SYSTEM				
IESOPHAGUS CARCINONA, NOS, NFTASTATIC		(8)		(6) 1 (17%)
UBINARY SYSTEM				
NONB				
INCOCRINE SYSTEM				
*PITUITARY CHROMOPHOFI ADENOMA	(7) 3_(43\$)	(7)	(6) 2_(33)	(9) \$)1_(11\$)

* NUMBER OF ANIMALS NECROPSIED

TABLE A3 CONTROL FEMALE RATS: NEOPLASMS (CONTINUED)

	LOW DOSE UNTREATED CONTROL	MID & HIGH DOSE UNTREATED CONTROL	LOW DOSE VEHICLE CONTROL	MID & HIGH DOSE VEHICLE CONTROL
CHROMOPHCEE CARCINONA		1 (14%)		
ADRENAL CORTICAL ALENOMA	(10)	(8)	(10)	(9) 1 (11%)
#THYROIC CARCINCMA, NOS		(7)	(10)	(7) 1 (14%)
EPRODUCTIVE SYSTEM				
*HAMMARY GLARI FIBROADENCHA	(10) 4 (40%)	(9) 1 (11%)	*(10) 1 (10%)	(9) 3 (33%)
*CERVIX UTERI SQUANOUS CELL PAPILLONA	(10)	(8)	(10) 1 (10 %)	(9)
ERVOUS SYSTEM				
NON E				
PECIAL SENSE CEGANS				
NONB				
USCULOSKELETAI SYSTEM				
NONE				
OEY CAVITIES				
NONB				
LL OTHER SYSTEMS				
NONE				*
NUMBER OF ANIMALS WITH TISSUE NUMBER OF ANIMALS NECROPSIED	EXAMINED NICROSCO	PICALLY		

TABLE A3 CONTROL FEMALE RATS: NEOPLASMS (CONTINUED)

	LOW DOSE UNTREATED CONTROL	MID & HIGH DOSE UNTREATED CONTROL	LOW DOSE VEHICLE CONTROL	MID & HIGH DOSE VEHICLE CONTROL
NIMAL DISECSITION SUMMARY				
ANIMALS INITIALLY IN STUDY	10	10	10	10
NATURAL CEPTHƏ	1	1	1	2
MORIBUND SACFIFICE	1	1		
SCHETULED SACRIFICE				
ACCIDENTALLY KILLED				
TERMINAL SACRIFICE	8	8	9	8
ANIMAL MISSING				
INCLURES ANTCLYZED ANIMALS				
UNOR SUMMARY				
TOTAL ANIHALS WITH PRIMARY TUMORS* Total primary tumors	5	4 5	ц Ц	3 7
IOTAL PRIMARI TOMORS	'	,	4	,
TOTAL ANIMALS WITH BENIGN TUMORS TOTAL BENIGN TUMORS	5 7	3 4	4 4	3
TOTAL ANIBALS WITH MALIGNANT TUMOR: TOTAL MALIGNANT TUMORS	5	1 1		2 2
TOTAL ANIMAIS WITH SECONDARY TUMOR Total Secondary Tumors	5#			1
TOTAL ANTHALS WITH TUHORS UNCERTAIN Benign or maiignant Total uncertain tuhors	N -			
TOTAL ANIMALS WITH TUMORS UNCERTAIN PRIMARY OF METASTATIC	N			
TOTAL UNCEFTAIN TUMORS				
FRIMARY TUMORS: ALL TUMORS EXCEPT	SECONDARY TU	HORS		
SECONDARY TUBORS: METASTATIC TUBOR	S OR TUMORS	INVASIVE INTO AN A	DJACENT ORGAN	

TABLE A4

SUMMARY OF THE INCIDENCE OF NEOPLASMS IN FEMALE RATS GIVEN INTRAPERITONEAL INJECTIONS OF ACRONYCINE (TREATED GROUPS)

LOW DOSE MID DOSE HIGH DOSE ANIMALS INITIAILY IN STUDY ANIMALS NECFOESIED ANIMALS EXAMINE: HISTOPATHOLOGICALLY 35 32 32 35 34 33 35 35 INTEGUMENTARY SYSTEM (35) (32) (34) *SKIN FIBROSARCCEA *SUBCUT TISSUE (35) (32) {34) 1 (3%) CARCINOMA,NOS SARCCMA, NCS FIBRCMA 4 (11%) 2 (6%) 1 (3%) 1 (3%) 1 (3%) FIBROSARCOMA 2 (6%) LI POMA RHABDOMYOSARCOMA 1 (3%) RESPIRATORY SYSTEM #LUNG (35) (32) (33) 4 (12%) CARCINONA, NOS, METASTATIC Alveolar/eforchiolar adenoma Alveclar/eforchiolar carcinoma 2 (6%) 1 (3%) SARCCMA, NCS SARCCMA, KCS, METASTATIC HEMANGIOSAFCOMA, METASTATIC 1 (3%) 1 (3%) 1 (3%) 1 (3%) HENATOPOIETIC SYSTEM (28) 1 (4%) #LYMPH NODE (35) (12) CARCINOMA, NOS, METASTATIC (6) 1 (17%) #THYNUS (14) (16) CARCINOMA, NOS, MFTASTATIC CIRCULATORY SYSTEP __NONE____

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

TABLE A4 TREATED FEMALE RATS: NEOPLASMS (CONTINUED)

CORTICAL CARCINONA 1 (3%) #ADRENAL CORTEX (32) (30) (31)				
*LIYER (35) (32) (33) CARCINONA, NOS, HETASTATIC 4 (135) 1 HEPATOCELLULAR ADENORA 4 (135) 1 HEPATOCELLULAR CARCHONA 4 (135) 1 HERANCICSAFCONA 1 (30) 1 (35) HERANCICSAFCONA 5 (145) 1 (35) CARCINONA, NOS (34) (30) (31) 1 (35) CARCINONA, NOS (34) (30) (31) 1 (35) CARCINONA, NOS (34) (30) (31) 1 (35) SARCCNA, NOS (35) (30) (32) 1 (35) OSTEOSARCCNA, NOS 1 (35) (29) 1 (35) SARCCNA, NOS 1 (35) (29) (30) 1 (35) OSTEOSARCCNA NETASTATIC 1 (35) (29) (31) #LUH (35) (29) (30) 1 (35) UFINARY SYSTEM (35) (31) 1 (35) #NEDOSARCONA, NOS		LOW DOSE	MID DOSE	HIGH DOSE
*LIYER (35) (32) (33) CARCINONA, NOS, HETASTATIC 4 (135) 1 HEPATOCELLULAR ADENORA 4 (135) 1 HEPATOCELLULAR CARCHONA 4 (135) 1 HERANCICSAFCONA 1 (30) 1 (35) HERANCICSAFCONA 5 (145) 1 (35) CARCINONA, NOS (34) (30) (31) 1 (35) CARCINONA, NOS (34) (30) (31) 1 (35) CARCINONA, NOS (34) (30) (31) 1 (35) SARCCNA, NOS (35) (30) (32) 1 (35) OSTEOSARCCNA, NOS 1 (35) (29) 1 (35) SARCCNA, NOS 1 (35) (29) (30) 1 (35) OSTEOSARCCNA NETASTATIC 1 (35) (29) (31) #LUH (35) (29) (30) 1 (35) UFINARY SYSTEM (35) (31) 1 (35) #NEDOSARCONA, NOS				
CARCINONA, NOS, METASTATIC HEPATOCELLULAR ADENONA HEPATOCELLULAR CARCINONA HERANGICSARCONA, METASTATIC CARCINONA, NOS GSTEOSARCONA, METASTATIC 4PANCREAS CARCINONA, NOS SARCCHA, NOS SARCCHA, NOS SARCCHA, NOS SARCCHA, MOS SARCCHA,	TIGESTIVE SYSTEM			
HEPATOCELLULAR DENORA 4 (13%) HEPATOCELLULAR CARCINONA 1 (3%) HEPANCELULAR CARCINONA 5 (14%) OSTEOSARCCHA, METASTATIC 1 (3%) Image: Stress and the stress		(35)	(32)	
HEPATOCELLULAF CARCINONA 1 (3%) HEMANGICSAFCOMA 5 (14%) 1 (3%) OSTEOSARCCMA, METASTATIC 5 (14%) 1 (3%) SARCCMA, NOS 1 (3%) 1 (3%) OSTEOSARCCHA, METASTATIC 1 (3%) 1 (3%) #ILPUM (35) (30) (32) FIBROSARCCHA (35) (29) (36) #LARGE INTESTINE (35) (29) (31) SARCCHA, BCS 2 (6%) 2 (6%) UFINARY SYSTEF (35) (31) (32) #KIDNEY ENDOCETINE STSTEM 1 (3%) 1 (3%) #UNDOCETINE STSTEM (32) (30) (30) #NDOCETINE STSTEM (32) (30) (21) #ADEENAL OCRTICAL PENDAR 3 (30) (21) GORTICAL PENDAR 32) (30) 1 (3%)				1 (3%)
HENANGTCSAFCONA 5 (14%) 1 (3%) OSTEOSARCCNA, METASTATIC 1 (3%) 1 (3%) GARCINONA, NOS (30) (31) GARCINONA, NOS 1 (3%) 1 (3%) SARCCHA, NOS 1 (3%) 1 (3%) OSTEOSARCCHA, HETASTATIC 1 (3%) 1 (3%) #STONACH (35) (30) (32) SARCCHA, NOS 1 (3%) 1 (3%) 1 (3%) OSTEOSARCCHA, METASTATIC 1 (35) (30) (32) SARCCHA, NOS 1 (3%) 1 (3%) 1 (3%) GSTEOSARCCHA, METASTATIC 1 (3%) 1 (3%) 1 (3%) #LLPUM (35) (29) (31) (32) #LLARGE INTESTINE (35) (29) (21) 2 (5%) UFINARY SYSTEF (35) (31) (32) 1 (3%) #UBINARY ELAFIER (32) (26) (31) 1 (3%) #UFINARY ELAFIER (32) (30) (30) (20) FIBRONA 4 (14%) 1 (3%) 1 (3%) 1 (3%) #NDOCRINE SYSTEM (32) (30) (20)				
OSTEOSARCCHA, METASTATIC 1 (3%) #PANCREAS (34) (30) (31) CARCINOBA,NOS 1 (3%) 1 (3%) SARCCHA, NOS 1 (3%) 1 (3%) OSTEOSARCCHA, METASTATIC 1 (35) (30) (32) SARCCHA, NOS 1 (3%) 1 (3%) 1 (3%) SARCCHA, NOS 1 (35) (30) (32) SARCCHA, NOS 1 (35) (30) (32) SARCCHA, NOS 1 (35) 1 (3%) 1 (3%) #ILPUN (35) (29) (30) 1 (3%) #LARGE INTESTINE (35) (29) (21) 2 (6%) UFINARY SYSTEP (35) (31) (32) 2 (6%) UFINARY SYSTEP (35) (31) (32) 1 (3%) #UBINARY BLAICER (32) (26) (31) 1 (3%) PAPTILOMA, NOS 1 (3%) 1 (3%) 1 (3%) 1 (3%) #UBINARY BLAICER (32) (26) (30) (23) FINDOCRINF SYSTEM (32) (30) (23) (23) #ADBENAL DENOHA<			ן (3%)	
#PANCREAS (34) (30) (31) CARCINOHA, NOS 1 (35) 1 (35) SARCCMA, NOS 1 (35) 1 (35) 1 (35) SARCCMA, NOS 1 (35) (30) (135) 1 (35) SARCCMA, NOS 1 (35) (30) 1 (35) 1 (35) SARCCMA, NOS 1 (35) (29) (30) 1 (35) SARCCMA, NOS (35) (29) (30) 1 (35) VEINARY STATIC 1 (35) (29) (21) 2 (55) VEINARY STATIC (35) (29) (21) 2 (55) 2 (57) VEINARY STATIC (35) (21) 1 (35) 1 (35) VEINARY STATIC (35) (21) 1 1 1 1 1 VEINARY STATIC (35) (21) 1 1 1 1 1 1 1 1 1 1 1 1 1 1		5 (14%)		
CARCINONA, NOS SARCCHA, NOS OSTECSARCCHA, HETASTATIC #STOMACH SARCCHA, NOS OSTEOSARCCHA, NETASTATIC #ILPUM FIBROSARCCHA #ILPUM FIBROSARCCHA #ILPUM FIBROSARCCHA #ILPUM FIBROSARCCHA #ILPUM FIBROSARCCHA #ILPUM FIBROSARCCHA #ILPUM FIBROSARCCHA #ILPUM FIBROSARCCHA #ILPUM FIBROSARCCHA #ILPUM FIBROSARCCHA #ILPUM FIBROSARCCHA #ILPUM FIBROSARCCHA #ILPUM FIBROSARCCHA #ILPUM FIBROSARCCHA #ILPUM FIBROSARCCHA #ILPUM FIBROSARCCHA #ILPUM FIBROSARCCHA #ILPUM FIBROSARCCHA #ILPUM FIBROSARCCHA #ILPUM #ILPUM FIBROSARCCHA #ILPUM #ILP	OSTEOSARCCHA, METASTATIC			1 (3%)
SARCCMA, NOS 1 (3%) OSTECSARCCPA, HETASTATIC 1 (3%) #STOMACH (35) (30) (32) SARCCMA, NOS 1 (3%) 1 (3%) 1 (3%) OSTEOSARCCMA, NETASTATIC 1 (35) (29) (30) 1 (3%) #ILPUM (35) (29) (30) 1 (3%) #ILPUM (35) (29) (31) (35) #LARGE INTESTINE (35) (29) (31) 2 (6%) SARCCMA, NCS (35) (31) (22) (6%) UBINARY SYSTEF (35) (31) (22) (6%) #KIDNEY (35) (31) (22) (3%) #UBINARY BLAFTER (32) (26) (31) 1 (3%) #UBINARY BLAFTER (32) (26) (31) 1 (3%) #UBINARY BLAFTER (32) (30) (30) (20) USINARY SYSTEM (32) (30) (30) (21) #PHILOBA, NOS (32) (30) (30) (20) URGRANDOPHOEI ADENONA 4 (14%) 1 (3%) 1 (3%)	#PANCREAS	(34)	(30)	(31)
OSTECSARCCPA, HETASTATIC 1 (3%) #STOHACH (35) (30) (32) SARCCMA, NOS 1 (3%) 1 (3%) 1 (3%) OSTEOSARCCMA, METASTATIC (35) (29) (30) 1 (3%) #ILPUM (35) (29) (30) 1 (3%) #ILPUM (35) (29) (21) (3%) #LARGE INTESTINE (35) (29) (21) SARCCMA, NCS 2 (6%) 2 (6%) 2 (6%) UFINARY SYSTEF (35) (31) (32) 1 (3%) #KIDNEY (35) (31) (32) 1 (3%) #UBINARY ELATTER (32) (26) (31) 1 (3%) #UBINARY ELATTER (32) (26) (31) 1 (3%) #UBINARY ELATTER (32) (30) (30) (20) FINDOCRINE SYSTEM (32) (30) (30) (21) #ADRENAL JENOHA 9 (30%) 7 (23%) 1 (3%) #ADRENAL JENOHA 9 (30%) 7 (23%) 1 (3%) #ADRENAL COFTFX (32) (30) <td>CARCINONA, NOS</td> <td></td> <td></td> <td>1 (3%)</td>	CARCINONA, NOS			1 (3%)
#STONACE (35) (30) (32) SARCCMA, NOS 0STEOSABCCMA, NETASTATIC 1 (3%) 1 (3%) #ILEUM (35) (29) (30) #ILEUM (35) (29) (30) #ILEUM (35) (29) (30) #ILEUM (35) (29) (21) SARCCMA, NCS (35) (29) (21) SARCCMA, NCS (35) (31) (32) UFINARY SYSTEF (35) (31) (32) #KIDNEY (35) (31) (32) FIBRONA (32) (26) (31) #UBINARY BLATCER (32) (26) (31) PAPILLONA, NOS 1 (3%) 1 (3%) 1 (3%) #UBINARY BLATCER (32) (20) (30) (30) FINDOCRINE SYSTEM (32) (30) (30) (30) #ADRENAL (32) (30) (21) 7 (23% CORTICAL ACTINOBA 9 (30%) 7 (23% 1 (3%) #ADRENAL COFFFX (32) (30) (31)	SARCCHA, NOS			1 (3%)
SARCCRA, NOS 1 (3%) GSTEOSARCCRA, METASTATIC 1 (3%) 4ILPUM (35) (29) (30) PIBROS ARCCRA (35) (29) (31) (3%) 4LARGE INTESTINE (35) (29) (21) 2 (6%) UFINARY SYSTEF (35) (31) (32) (6%) 1 (3%) UFINARY SYSTEF (35) (31) (32) (26) 1 (3%) UFINARY ELATTER (32) (26) (14%) 1 (3%) 1 (3%) #UBINARY ELATTER (32) (26) (30) (30) (30) 1 (3%) #UBINARY ELATTER (32) (26) 1 (3%) 1 (3%) #UBINARY ELATTER (32) (30) (30) (30) 1 (3%) #UBINARY ELATTER (32) (30) (30) (30) 1 (3%) #NDOCRINE SYSTEM (32) (30) (31) 1 (3%) 1 (3%) #ADRENAL CORTICAL PENOBA 9 (30%) 7 <td>OSTECSARCCEA, METASTATIC</td> <td></td> <td></td> <td>1 (3%)</td>	OSTECSARCCEA, METASTATIC			1 (3%)
SARCCMA, NOS 1 (3%) GSTEOSARCCMA, METASTATIC 1 (3%) 4ILPUM (35) (29) (30) FIBROS ARCCMA (35) (29) (31) (3%) 4LARGE INTESTINE (35) (29) (21) 2 (6%) UFINARY SYSTEF (35) (31) (32) (6%) 1 (3%) UFINARY SYSTEF (35) (31) (32) (26) 1 (3%) UFINARY ELATTER (32) (26) (14%) 1 (3%) 1 (3%) #UBINARY ELATTER (32) (26) (14%) 1 (3%) 1 (3%) #UBINARY ELATTER (32) (26) (30) (30) 1 (3%) #UBINARY ELATTER (32) (30) (30) 1 (3%) 1 (3%) #UBINARY ELATTER (32) (30) (30) (30) (21) 1 (3%) #UBINARY ELATTER (32) (30) (30) (31) 1 (3%) #NDOCRINE SYSTEM (32) (30) (31)	I STONACH	(35)	(30)	(32)
OSTEOSAŘCCHA, METASTATIC 1 (3%) 4ILPUM (35) (29) (30) FIBROSARCCHA (35) (29) (21) SARCCHA, NCS (35) (29) (21) SARCCHA, NCS (35) (29) (21) UNINARY SYSTEF (35) (31) (22) #KIDNEY (35) (31) (22) PIEROMA (32) (26) (31) #UBINARY BLAFIER (32) (26) (31) PAPILLONA, NOS 1 (4%) 1 (3%) OSTEOSARCONA, RETASTATIC 1 (3%) 1 (3%) INDOCRINE SYSTEM (28) (30) (30) #PITUITARY (28) (30) (30) (21) CORTICAL ACENONA 4 (14%) 1 (3%) 1 (3%) 1 (3%) #ADRENAL (32) (30) (21) 7 (23%) #ADRENAL COFFFX (32) (30) (31)				
4ILPUM (35) (29) (30) FIBROS ARCCHA (35) (29) (21) 4LARGE INTESTINE (35) (29) (21) SARCCHA, RCS (35) (29) (21) UNINARY SYSTEF (35) (31) (22) #KIDNEY (35) (31) (22) PIBRONA (35) (31) (22) #KIDNEY (35) (31) (22) PIBRONA (32) (26) (31) #UBINARY BLACIER (32) (26) (31) PAPILLONA, NOS 1 (35) 1 (35) INDOCRINE SYSTEM 1 (4) 1 (30) (30) INDOCRINE SYSTEM (32) (30) (21) (30) (23) #ADRENAL GRTICAL PENOBA (32) (30) (21) (35) #ADRENAL COFFFX (32) (30) (31) (31)				
FIBROS ARCCHA 1 (3%) 4LARGE INTESTINE SARCCHA, BCS (35) (29) (21) 2 (6%) URINARY SYSTEF (35) (31) (22) 1 (3%) #KIDNEY FIBRONA (35) (31) (22) 1 (3%) #UBINARY BLAFTER PAPILLONA, NOS OSTEOSABCONA, RETASTATIC (32) (26) 1 (4%) (31) INDOCRINE SYSTEM 1 (4%) 1 (3%) 1 (3%) #PIDUITARY CHRONOPHOEL ACENONA (28) 4 (14%) (30) 1 (3%) (30) 7 (23%) #ADRENAL CORTICAL AFEINOBA CORTICAL CARCINONA (32) (30) 9 (30%) (21) 7 (23% 1 (3%) #ADRENAL COFFFX (32) (30) (31)				
4LARGE INTESTINE SARCCHA, NCS (35) (29) (21) 2 (6%) URINARY SYSTER (35) (31) (32) 1 (3%) #KIDNEY FIBRONA (35) (31) (32) 1 (3%) #UBINARY ELATIER PAPILLOHA, NOS OSTEOSABCOHA, HETASTATIC (32) (26) 1 (4%) (31) #UBINARY ELATIER PAPILOHA, NOS OSTEOSABCOHA, HETASTATIC (32) (30) 1 (4%) (30) 1 (3%) #NDOCRINE SYSTEM (28) 4 (14%) (30) 1 (3%) (30) 1 (3%) (30) 7 (23%) #ADRENAL CORTICAL ATENOBA CORTICAL CARCINONA (32) (30) 1 (3%) (21) 7 (23% 1 (3%) #ADRENAL COFFFX (32) (30) (31)		(35)	(29)	
SARCCHA, NCS 2 (6%) UFINARY SYSTEF * *KIDNEY (35) (31) (22) PIBRONA (35) (31) (22) *UBINARY ELAFIER (32) (26) (31) PAPILLONA, NOS 1 (4%) 1 (3%) *UBINARY ELAFIER (32) (26) (31) 1 (3%) *UDEINARY ELAFIER (32) (28) (30) (30) (30) *PIDCCRINE SYSTEM * * * 1 (3%) 1 (3%) *PROCRIME SYSTEM * (28) (30) (30) (21) 1 (3%) 1 (3%) *ADRENAL (32) (30) (21) 9 (30%) 7 (23%) *ADRENAL COFFFX (32) (30) (31) * 1 (3%)	PIBROS ARCCHA			1 (3%)
SARCCHA, NCS 2 (6%) URINARY SYSTEF *KIDNEY (35) (31) (32) PIBRONA (35) (31) (32) *UBINARY ELATIER (32) (26) (31) PAPILLONA, NOS 1 (4%) 1 (3%) *UBINARY ELATIER (32) (26) (31) OSTEOSABECONA, NETASTATIC 1 (4%) 1 (3%) *PIDICRINE SYSTEM * * * * (30) (30) *PROCEINE SYSTEM (28) (30) (30) (30) (30) *PROCEINE SYSTEM (32) (30) (30) (21) *ADRENAL (32) (30) (21) 7 (23%) *ADRENAL 05100000 9 (30%) 7 (23%) 1 (3%) *ADRENAL COEFFX (32) (30) (31) (31) *	ALARGE INTESTINE	(35)	(29)	(31)
URINARY SYSTEP *KIDNEY PIBRONA *UBINARY BLACTER PAPTILONA, NOS OSTEOSABCONA, METASTATIC *PIDULANA, NOS OSTEOSABCONA, METASTATIC *PITUITARY CHRONOPHOEI ACENONA *ORTICAL ACENONA *ADRENAL CORTICAL ACENONA *ADRENAL COFFFX (32) (33) (34) (35) (35) (31) (32) (30) (31) (33) (34) (35) (35) (36) (37) (37) (38) (37) (38) (37) (38) (38) (38) (37) (38) (3	SARCCHA, NCS	,		
#KIDNEY (35) (31) (22) FIBRONA (32) (26) (31) #UBINARY BLACTER (32) (26) (31) PAPTILONA, NOS 1 (4%) 1 (3%) OSTEOSABCONA, HETASTATIC 1 (4%) 1 (3%) FNDOCRINE SYSTEM #PITULTARY (28) (30) (30) CHRONOPHOEF PDENONA 4 (14%) 1 (3%) 1 (3%) #ADRENAL (32) (30) (21) 9 (30%) 7 (23%) #ADRENAL COBTEX (32) (30) (31) (31)				
FIBRONA 1 (3%) UUBINARY ELACTER PAPILLONA, NOS OSTEOSABCONA, NETASTATIC (32) (26) (31) I (4%) 1 (4%) 1 (3%) 1 (3%) FINDOCRINE SYSTEM (28) (30) (30) IPITUITARY CHRONOPHOEL ADENONA (28) (30) (30) I (3%) 1 (3%) 1 (3%) 1 (3%) I (30) (30) (21) (30) (21) CORTICAL ADENONA 9 (30%) 7 (23%) 1 (3%) I (3%) 1 (3%) 1 (3%) 1 (3%) I ADRENAL CORTICAL CARCINONA (32) (30) (31)	UFINARY SYSTEM			
#UBINARY ELATTER PAPILLONA, NOS OSTEOSABCONA, METASTATIC (32) (26) (31) I (4%) 1 (3%) FNDOCRINE SYSTEM #PITUITARY CHRONOPHOEF ADENOMA (28) (30) (30) I (3%) 1 (3%) 1 (3%) I ADRENAL CORTICAL ADENOMA (32) (30) (21) I (3%) 9 (30%) 7 (23%) I ADRENAL CORTICAL CARCINONA (32) (30) (31)	#KIDNEY	(35)	(31)	(32)
PAPILLONA, NOS OSTEOSARCONA, HETASTATIC 1 (4%) I (3%) I </td <td>FIBRONA</td> <td>• •</td> <td>. ,</td> <td>1 (3%)</td>	FIBRONA	• •	. ,	1 (3%)
PAPILLONA, NOS OSTEOSARCONA, HETASTATIC 1 (4%) I (3%) Intersection (30) Intersection (31) Intersection (32) Intersection (31)				
OSTEOSARCONA, METASTATIC 1 (3%) FNDOCRINE SYSTEM *PITUITARY CHRONOPHOEF PDENOMA (28) 4 (14%) (30) 1 (3%) (30) 1 (3%) *ADRENAL CORTICAL PDENOMA (32) 9 (30%) (31) 7 (23%) *ADRENAL CORTICAL CARCINONA (32) 1 (3%) (30) 7 (23%) *ADRENAL COFFFX (32) 1 (3%) (30) 1 (31)		(32)		(31)
INDOCRINE SYSTEM IPITUITARY CHRONOPHOEL PDENONA (28) 4 (14%) (30) 1 (3%) (30) 1 (3%) IADRENAL CORTICAL PDENOBA CORTICAL CARCINONA (32) 9 (30%) (30) 7 (23%) (31) 1 (3%) IADRENAL CORTICAL CARCINONA (32) 1 (3%) (30) 1 (3%) (31)			• (+*)	1 (3%)
#PITUITARY CHRONOPHOEF ADENONA (28) 4 (14%) (30) 1 (3%) (30) 1 (3%) #ADRENAL CORTICAL PDENOMA (32) 9 (30%) (30) 7 (23%) (21) 7 (23%) #ADRENAL COFFFX (32) (30) 1 (3%) (31)				
CHRONOPHOEF PERNMA 4 (14%) 1 (3%) 1 (3%) #ADRENAL (32) (30) (31) CORTICAL PENONA 9 (30%) 7 (23%) CORTICAL CARCINONA 1 (3%) 1 (3%) #ADRENAL COBTEX (32) (30) (31)	ENDOCRINE SYSTEM			
CHRONOPHOEF PERNMA 4 (14%) 1 (3%) 1 (3%) #ADRENAL (32) (30) (31) CORTICAL PENONA 9 (30%) 7 (23%) CORTICAL CARCINONA 1 (3%) 1 (3%) #ADRENAL COBTEX (32) (30) (31)	#PTT117T&RY	(28)	(30)	(30)
#ADRENAL (32) (30) (21) CORTICAL PERNOBA 9 (30%) 7 (23%) CORTICAL CARCINONA 1 (3%) 1 (3%) #ADRENAL COBTEX (32) (30) (31)		4 (14%)		
CORTICAL FENORA 9 (30%) 7 (23%) CORTICAL CARCINONA 1 (3%) #ADRENAL COBTEX (32) (30) (31)			(,	
CORTICAL FENORA 9 (30%) 7 (23%) CORTICAL CARCINONA 1 (3%) #ADRENAL COBTEX (32) (30) (31)	4 ADRENAL	(32)	(30)	(31)
CORTICAL CARCINONA 1 (3%) MADRENAL CORTEX (32) (30) (31)	CORTICAL ACENONA			7 (23%)
1ADRENAL CORTEX (32) (30) (31)	CORTICAL CARCINONA			1 (3%)
		(32)		(31)
CORTICAL ADDINGHA	CORTICAL IDENCHA	بر ۵۰۰۰ ها کا ی مدینه دا ک با بیده بردو ی]_[35]	·

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

TABLE A4 TREATED	FEMALE RATS: NEOPLASMS (CONTINUED)
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IABLE A4 IKEAIED FEMALI	E RATS: NEOPL	ASMS (CUNTIN	UED)
	LOW DOSE	MID DOSE	HIGH DOSE

	LOW DOSE	MID DOSE	HIGH DOSE
REPRODUCTIVE SISTEM			
*MAMMARY GLANE	(35)	(32)	(34)
ADENCCARCINCHA, NOS	6 (17%)	4 (13%)	2 (6%)
PAPILLARY ADENOCARCINON A	1 (3%)	4 (15%)	- (04)
CYSTADENOMA, NOS	. (,	1 (3%)	
CYSTADENOCARCINOMA, NOS		1 (35)	
FIBRCMA		2 (6%)	1 (3%)
FIBRCADENCHA	20 (57%)	13 (41%)	3 (9%)
tterus.	(34)	(32)	(32)
SARCONA, NCS			1 (3%)
LEIOMYOSAFCOMA		1 (3%)	
ENDOMETRIAL STROMAL POLYP	5 (15%)		1 (3%)
#O VAR Y	(31)	(31)	(21)
LETONYONS		1 (35)	
SPECIAL SENSE CEGANS NONE			
*SKELETAL MUSCLF Sarcoma, NCS		(32)	(34) 1 (3%)
SARCOMA, NCS	(35)		1 (3%)
SARCOMA, NCS			1 (3%)
SARCONA, NCS ECCY CAVITIES			1 (3%)
SARCONA, NCS ECCY CAVITIES *Abdominal Cavity		(32) 1 (3%)	(34) (34) (34)
SARCONA, NCS FCDY CAVITIES *Abdoninal Cavity Fibrosarcefa	(35)	(32) 1 (3%) (32)	(34) (34) (34)
SARCONA, NCS ECCY CAVITIES *ABDOMINAL CAVITY FIBROSARCCEA *PERITONEUM SARCCMA, KCS FIBROSARCCEA	(35) (35)	(32) 1 (3%)	(34) (34) (34)
SARCONA, NCS FCDY CAVITIES *ABDOMINAL CAVITY FIBROSARCCFA *PERITONEUM SARCCMA, KCS	(35)	(32) 1 (3%) (32)	(34) (34) 1 (3%)

NUMBER OF ANIMALS WITH TISSUF EXAMINED MICROSCCPICALLY
 NUMBER OF ANIMALS NECROPSIID

TABLE A4 TREATED FEMALE RATS: NEOPLASMS (CONTINUED)

	LOW DOSE	MID DOSE	HIGH DOSE
+NESENTERY SARCCHA, NOS	(35)	(32)	(34) 1 (3 %)
LL OTHER SYSTEMS			
<pre>#HULTIPLF CRGANS SARCCHA, NCS FIBRCSARCCHA</pre>	(35)	(32) 2 (6%) 2 (6%)	(34) 3 (9%) 1 (3%)
NIMAL DISFOSITION SUMMARY			
ANIHALS INITIALLY IN STUDY NATURAL DEATHƏ Horibuni sacrifice Schfiuled sacrifice	35 5 8	35 7 9	35 9 24
ACCIDENTAIIY KILLED TERNINAL SACRIFICE Animal Hissing	22	19	ĩ
INCLUDES AUTCLYZED ANIMALS			
UNOR SUMMARY			
TOTAL ANIMALS WITH PRIMARY TUMORS* Total primary tumors	31 51	20 52	25 44
TOTAL ANIMALS WITH BENIGN TUMORS TOTAL BENIGN TUMORS	24 32	18 35	10 15
TOTAL APINALS WITH MALIGNANT TUBORS Total Malignant Tubors	16 19	12 17	20 29
TOTAL ANIMALS WITH SPCONDARY TUBORS TOTAL SECCHEARY TUBORS	1 1		6 13
TOTAL ANIMALS WITH TUMORS UNCERTAIN- Benigh or maiignant Total unceftain tumors	-		
TOTAL ANIMALS WITH TUBORS UNCERTAIN- PRIMARY OR METASTATIC TOTAL UNCEFTAIN TUBORS	-		

* SECONDARY TUMORS: METASTATIC TUMORS OR TUMORS INVASIVE INTO AN ADJACENI OBGAN

APPENDIX B

SUMMARY OF THE INCIDENCE OF NEOPLASMS IN MICE GIVEN INTRAPERITONEAL INJECTIONS OF ACRONYCINE

TABLE B1

SUMMARY OF THE INCIDENCE OF NEOPLASMS IN MALE MICE GIVEN **INTRAPERITONEAL INJECTIONS OF ACRONYCINE (CONTROL GROUPS)**

	LOWER MID DOSE UNTREATED CONTROL	UPPER MID AND HIGH DOSE UNTREAT- ED CONTROL	LOW DOSE UNTREATED CONTROL	LOWER MID DOSE VEHICLE CONTROL	UPPER MID AND HIGH DOSE VEHICLE CONTROL
ANIMALS INITIAILY IN STUDY ANIMALS NECFORSIED ANIMALS EXAMINED HISTOPATHOLOGICALL	10 9 Y 9	10 10 10 10	20 20 20	10 10 10	10 10 10
INTEGUMENTARY SYSTEM					
*SKIN PAPILLCHA, NOS	(9)	(10)	(20) 1 (5%)	(10)	(10)
*SUBCUT TISSUF SARCCHA, NCS	(9)	(10)	(20) 2 (10%)	(10)	(10)
RESPIRATORY SYSTEM					
*LUNG HEPATOCELLULAR CARCINONA, METAS ALVEOLAB/EFONCHIOLAR ADENOMA ALVECLAB/EFCNCHIOLAR CAFCINONA	(9) T	(10) 1 (10%) 1 (10%)	(20) 1 (5%) 2 (10%)	(10)	(10)
EFNATOPOIPTIC SYSTEM					
*NULTIPLE ORGANS NALIG.LYNPBONA, UNDIFFER-TYPE LYNPHOCYTIC IFUKEMIA	(9)	(10)	(20) 3 (15%)	(10) 3 (30 %)	(10)
IINGUINAL LYNFH NODE SARCCHA, NCS, HETASTATIC	(9)	(9)	(2°) 1 (5%)	(10)	(9)
CIRCULATORY SYSTEM					
NONE					
LIGESTIVE SYSTEM					
<pre>#LIVER HEPATOCELLULAR ADENONA HEPATOCELLULAE CARCINONA</pre>	(9) 1_(11%	(10) 2 (20%) 2 (20%)	(20) 4 (20%) 3 (15%)	(10) 1 (10%) <u>1 (10%)</u>	(10)

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

TABLE B1 CONTROL MALE MICE: NEOPLASMS (CONTINUED)

	LOWER MID DOSE UNTREATED CONTROL	UPPER MID AND HIGH DOSE UNTREAT- ED CONTROL	LOW DOSE UNTREATED CONTROL	LOWER MID DOSE VEHICLE CONTROL	UPPER MID AND HIGH DOSE VEHICLE CONTROL
CRINARY SYSTEM					
NONE				4 - 4 4	
ENCOCRINE SYSTEM					•
NONB					
REPRODUCTIVE SYSTEM					
NCNE					
NERVOUS SYSTEM					
NONE					
SPECTAL SENSE CRGANS					
NCNE					
RUSCULOSKELETAL SYSTEM					
* FEMUR CSTBCCHCNEFCMA	(9)	(10)	(2C) 1 (5%)	(10)	(10)
FODY CAVITIES					
*MESENTERY LIPOMA	(9)		(20)	(10)	(10) 1 (10%)
ALL OTHER SYSTEMS					
NONE					
* NUMBER OF ANIMALS WITH TIS	SSUE PAAMINED MICROSC	CPICALLY			CONTINUED ON

* NUMBER OF ANIMALS WITH LISSUE * NUMBER OF ANIMALS NECROPSIED

TABLE B1 CONTROL MALE MICE: NEOPLASMS (CONTINUED)

	LOWER MID DOSE UNTREATED CONTROL	UPPER MID AND HIGH DOSE UNTREAT- ED CONTROL	LOW DOSE UNTREATED CONTROL	LOWER MID DOSE VEHICLE CONTROL	UPPER MID AND HIGH DOSE VEHICLE CONTROL
ANIMAL DISPOSITION SUMMARY					
ANIMALS INITIALLY IN STOLY NATUFAL DEPTHƏ Moribund sacripice Scheduled sacripice	10 1	10	20 5 6	10 2 1	1 <u>0</u> 5
ACCIDENTALLY KILLED Terminal sacrifice Animal missing	9	10	9	7	5
& INCLUDES AUTCLYZED ANIMALS					·
TUNOR SUMMARY					
TOTAL ANIHALS WITH PRIMARY TUMORS Total primary tumors	• 1 1	4 5	13 17	5 5	1 1
TOTAL ANIMALS WITH BENIGN TUMORS Total benign tumors		3 3	6 7	1 1	1 1
TOTAL ANIMALS WITH MALIGNANT TUNO TOTAL MALIGNANT TUMORS	RS 1 1	2 2	9 10	4 4	
TOTAL ANIMALS WITH SECONDARY TUNO TOTAL SECCHLARY TUNORS	RS#	1 1	1 1		
TOTAL ANIMALS WITH TUNORS UNCERTA PENIGN OR MAIIGNANT TOTAL UNCEFTAIN TUNORS	IN -				
TOTAL ANIBAIS WITH TUBORS UNCERTA PRIMARY OF METASTATIC TOTAL UNCEFTAIN TUBORS	IN-				
* FRIMARY TUMORS: ALL TUMORS EXCEPT § SECONDARY TUMORS: METASTATIC TUMO	RS OR TUMORS	INVASIVE INTO AN	ADJACENI ORGAN		

TABLE B2

SUMMARY OF THE INCIDENCE OF NEOPLASMS IN MALE MICE GIVEN INTRAPERITONEAL INJECTIONS OF ACRONYCINE (CONTROL AND TREATED GROUPS)

	LOW DOSE VEHICLE CONTROL	LOW DOSE	LOWER MID DOSE	UPPER MID DOSE	HIGH DOSE
NINALS INITTAILY IN STUDY NIMALS MISSING	20	40	35	35 1	35
NIMALS NECHOFSIEC NIMALS EXAMINED HISTOPATHOLOGICALLY	20 20	40 40	35 35	34 33	29 12
KTEGUNPNTAFY SYSTPH					
NC NE					
ESPIRATORY SYSTEM					
ŧLUNG ALVEOLAR∕EFCNCHIOLAR ADENOMA	(18)	(40) 1 (3₹)		(33)	
EMATOPOIETIC SYSTEM					
*HULTIPLE ORGANS MALIGNANT LYMPHOMA, NOS MALIG.LYMPHOMA, UNDIPPER-TYPE MALIG.LYMPHOMA, LYMPHOCYTIC TYPE	(20) 2 (10%) 5 (25%) 6 (30%)	(4.0) 6 (15%) 3 (8%)	(35)	(34)	(29)
ISPLEEN HEMANGIOS ARCOMA	(19)	(38) 1 (3 %)	(35)	(30)	(12)
THYMUS MALIG.LYMPHCMA, LYMPHOCYTIC TYPP		(7) 1 (14%)	(15)	(2)	(9)
IRCULATORY SYSTEM					
NONE					
IGESTIVE SYSTEM					
*BILE DUCT BILE DUCT CARCINOMA	(20)	(40)	(35)	(34) 1 (3%)	
CRINARY SYSTEM					
NONE					

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	LOW DOSE VEHICLE CONTROL	LOW DOSE	LOWER MID DOSE	UPPER MID DOSE	HIGH DOSI
NDOCRINE SYSTEM					
# ADRENAL PHEOCHRCMCCYTCMA	(20)	(37) 1 (3%)	(32)	(29)	(11)
#THYROIC POLLICULAR-CFLL CARCINOPA	(18)	(38) 1 (3%)	(18)	(17)	(7)
RPRODUCTIVE SYSTEM					
ATESTIS HEMANGIOSFRCCHA	(20)	(38) 1 (3%)		(31)	
ERVOUS SYSTEM					
NON B					
PECIAL SENSE CEGANS					
NONE					
USCULOS KELETAI SYSTEM					
*KNEE JCINT OSTEOCHCNEFOMA	(20)	(40) 1 (3%)	(35)	(34)	(29)
ODY CAVITIES					
NON E			~ ~ * * * * * * * * * * * * * * *		
LL OTHER SYSTEMS					
*MULTIPLE GEGANS <u>SARCCHA. NCS</u>	(20)	(40) <u>2 (5%)</u>	(35)	(34)	(29)
NUMBER OF ANIMALS WITH TISSUE I	XAMINED MICRCSC	CPICALLY			CONTINUE

TABLE B2 CONTROL	& TREATED	MALE MICE:	NEOPLASMS (CONTINUED)
		-		

	LOW DOSE VEHICLE CONTROL	LOW DOSE	LOWER MID DOSE	UPPER MID DOSE	
NIMAL DISFOSITION SUMMARY					
NATUFAL CEATHD Norieund Sacrifice	20 8 12	40 12 28	35 12 23	35 19 14	35 25 9
SCHELULEL SACRTFICE ACCIDENTALLY KILLED TERNINI SACRIFICE ANIMAL MISSING				1 1	1
I INCLUDFS AUTCLYZED ANIMALS					
UMOR SUMMARY					
TOTAL ANIFALS WITH PRIMARY TUMOBS* Total primary tumors	13 13	14 18		1 1	
TOTAL ANIMALS WITH BENIGN TUMORS TOTAL BINIGN TUMORS		3 3			
TOTAL ANIMALS WITH MALIGNANT TUMORS TOTAL MALIGNANT TUMORS	13 13	13 15		1 1	
TOTAL ANIMALS WITH SECONDARY TUMORS Total speckbary tumors	*				
TOTAL ANIMALS WITH TUNORS UNCERTAIN Benign or Baiignant Total Uncebtain Tumors	-				
TOTAL ANIHAIS WITH TUMORS UNCERTAIN FRIBARY OF METASTATIC TOTAL UNCEFTAIN TUMORS	-				
FRIMARY OR METASTATIC	ECONDARY TO		ADJACENT ORGAN		

TABLE B3

SUMMARY OF THE INCIDENCE OF NEOPLASMS IN FEMALE MICE GIVEN INTRAPERITONEAL INJECTIONS OF ACRONYCINE (CONTROL GROUPS)

	LOWER MID DOSE UNTREATED CONTROL	HIGH DOSE	LOW DOSE UNTREATED CONTROL	LOWER MID DOSE VEHICLE CONTROL	UPPER MID AND HIGH DOSE VEHICLE CONTROL
	10	10	20	10	10
WINALS NECROFSIED	10	10	19	10	10
NINALS EXAMINED HISTOPATHOLOGICAL	.¥ 10	10	19	10	10
NIEGUNENTARY SYSTEM					
*SUBCUT TISSUE	(10)	(10)		(10)	(10)
SARCCHA, NCS HEMANGIONA			1 (5%) 2 (11%)		
FSPIRATCRY SYSTEM					
NONB					
EBATOPOIETIC SYSTEM					
*NULTIPIF ORGANS	(10)	(10)	(19)	(10)	(10)
HALIG.LYMFEONA, UNDIFFER-TYPE	-		3 (16%)		
MALIG.LYNFHCHA, LYNPHOCYTIC TYN Malig.lynfhcma, histiocytic tyn			1 (5%) 1 (5%)		1 (10%)
LYNPHOCYTIC LEUKEMIA	3 (30%)		. (34)	1 (10%)	(((),)
O DO D'EN UM	(10)	(10)	(19)		(10)
NALIG.LYMPHONA, UNDIPPER-TYPE			1 (5%)		
IRCULATORY SYSTEP					
NONE					
IGESTIVE SYSTEM					
#LIVER HBPATOCFLIULAR ADENOMA	• •	{10}	(19) 1 (5 %)		(10)
RINARY SYSTER					
NONE			*****		
NUMBER OF ANIMALS WITH TISSUE EXA	NTRED STOROSCO	PTCALLY		I	

.

TABLE B3 CONTROL FEMALE MICE: NEOPLASMS (CONTINUED)

	LOWER MID DOSE UNTREATED CONTROL	UPPER MID AND HIGH DOSE UNTREATED CONTROL		LOWER MID DOSE VEHICLE CONTROL	UPPER MID AND HIGH DOSE VEHICLE CONTROI
ENCOCRINE SYSTEM					
4PITUITARY CHROMOPHOEF ACENOMA		(9)			(9)
EPRODUCTIVE SYSTEM					
UTERUS HEMANGIOSARCCHA	(10)	(9) 1 (11%)		(10)	(9)
NERVOUS SYSTEE					
NONE					
FPECIAL SENSE CEGANS					
*HARDERIAN GIANC PAPILLARY CYSTADENOMA, NOS		(10)	1 (5%)	(10)	(10)
USCULOS FELETAI SYSTEM					
NONE					
OTY CAVITIES					
NONE					
LL OTHER SYSTEMS					
*HULTIPLE ORGANS PIBROSARCCDA	(10)	(10)	(19) <u>1_(5</u> %)	(10)	(10)

NUMBER OF ANIMALS WITH TISSUE EXAMINED MICROSCCPICALLY * NUMBER OF ANIMALS NECROPSIFC

.

TABLE B3 CONTROL FEMALE MICE: NEOPLASMS (CONTINUED)

		UPPER MID AND HIGH DOSE UNTREATED CONTROL			UPPER MID AND HIGH DOSE VEHICLE CONTRO
NIMAL DISECSITION SUMMARY					
ANIMALS INITIALLY IN STUDY NATURAL DEATHO MORIBUND SACRIFICF	10	10 1	20 6 4	10 1 1	10 1
SCHELULET SACRIFICE Accidentally killed Terninal Sacrifice Animal Missing	10	9	10	8	9
INCLUDES AUTCLYZED ANIMALS					
UNOR SUMMARY					
TOTAL ANIMALS WITH PRIMARY TUNC Total primary tunors	€S* 3 3	1	13 15	1	1 1
TOTAL ANIMALS WITH BENIGN TUMOR TOTAL BENIGN TUMORS	IS		777		
TOTAL ANIMALS WITH NALIGNANT TO TOTAL MALIGNANT TUMORS	IMORS 3 3	1 1	8 8	1 1	1 1
TOTAL ANIMALS WITH SECONDARY TO TOTAL SFCONDARY TUMORS	IHORS#				
TOTAL ANIMALS WITH TUMORS UNCER EENIGN OR MALIGNANT TOTAL UNCEPTAIN TUMORS	TAIN-				
TOTAL ANIMALS WITH TUMORS UNCER FRIMARY OF METASTATIC TOTAL UNCEFTAIN TUMORS	TAIN-				

TABLE B4

SUMMARY OF THE INCIDENCE OF NEOPLASMS IN FEMALE MICE GIVEN INTRAPERITONEAL INJECTIONS OF ACRONYCINE (CONTROL AND TREATED GROUPS)

	LOW DOSE VEHICLE CONTROL	LOW DOSE	LOWER MID DOSE	UPPER MID DOSE	HIGH DOSE
ANIMALS INITIALLY IN STUDY ANIMALS NPCRCESIED ANIMALS EXAMINED HISTOPATHOLOGICALLY	20 2 0 20	40 39 39	35 33 33	35 33 33	35 32 15
INTFGUMENTAFY SYSTEM					
NON E					
RESPIRATORY SYSTEM					
#LUNG ALVEOLAR/ERCNCHIOLAR CARCINCMA	(17)	(38) 1_(34)		(33)	(15)
FEMATOPCIETIC SYSTEM					
*NULTIPIF CRGANS MALIGNANT IYFBOMA, NOS MALIG.LYMFBOMA, UNDIPPEP-TYPF MALIG.LYMFBOMA, LYMFBOCYTIC TYPE MALIG.LYMFHOMA, HISTIOCYTIC TYPE	2 (10%)	(39) 1 (3%) 4 (10%) 1 (3%)	(33)	(33)	(32)
FONE NARROW GRANULOCYTIC LEUKPMIA	(18)	(39)	(3 1)	(32) 1 (3*)	(14)
#THYMUS Alveolab/ercnchiolar ca, metasta	(9)	(11) 1 (9*)	(22)	(7)	(4)
CIRCULATORY SYSTEM					
NONE					
LIGFSTIVE SYSTEM					
#IIVEP HEPATOCIIIULAR CARCINOBA	(20)	(39) 1 (3%)	(31)	(32)	(15)
* PILE DUCT ADENCCAHCINCHA_NOS	(20)	(39)	(33)	(33)	(32)

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

TABLE B4 CONTROL & TREATED FEMALE MICE: NEOPLASMS (CONTINUED)

. .

	LOW DOSE VEHICLE CONTROL	LOW DOSE	LOWER MID DOSE	UPPER MID DOSE	HIGH DOSE
4COODENUN ADENCHATOUS POLYP, NOS	(12)	(39) 1 (3%)		(32)	(6)
BINARY SYSTEM					
NONE					
NDOCRINE SYSTEM				1	
NONE		:			
IPRODUCTIVE SYSTEM					
*NAMMARY GLANE Adenocafcincha, nos		(39) 1 (3%)		(33)	
ERVOUS SYSTER					
NONE					
PECIAL SENSE CEGANS					
NON B					
USCULOS KELETAL SYSTEM					
NONE					
CDY CAVITIES					
NONE					
LL OTHER SYSTEMS					
*HULTIPLE OFGANS SARCCMA, NCS	(20)	(39) <u>2 (5%)</u>	(33)	(33)	(32)

TABLE B4 CONTROL & TREATED FEMALE MICE: NEOPLASMS (CONTINUED)

	LOW DOSE VEHICLE CONTROL	LOW DOSE	LOWER MID DOSE	UPPER MID DOSE	HIGH DOS
NIMAL DISFOSITION SUMMARY					
ANIMALS INITIALLY IN STUDY NATUFAL CEATHƏ MORTBUND SACRIFICE SCHEDUIFD SACRIFICE ACCIDENTALLY KILLED TERMINAL SACRIFICE ANIMAL MISSING	20 14 6	40 7 31 2	35 14 21	35 12 23	35 29 6
I INCLUDES AUTCLYZED ANIMALS					
IUMOR SUMMARY					
TOTAL ANIMALS WITH PRIMARY TUMOR TOTAL PRIMARY TUMORS	RS* 19 19	9 12		2 2	
TOTAL ANIMALS WITH BENIGN TUMOR: TOTAL BENIGN TUMORS	5	1			
TOTAL ANIMALS WITH MALIGNANT TO Total Malignant Tumors	10RS 19 19	9 11		2 2	
TOTAL ANIMALS WITH SECONDARY TUN TOTAL SECCNEARY TUNORS	10RS#	1 1			
TOTAL ANIMALS WITH TUMORS UNCER Benign or maiignant Total Unceftain Tumors	N I N -				
TOTAL ANIMAIS WITH TUMORS UNCER FRIMARY OF METASTATIC TOTAL UNCEFTAIN TUMOPS	FAIN-				

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APPENDIX C

SUMMARY OF THE INCIDENCE OF NONNEOPLASTIC LESIONS

IN RATS GIVEN INTRAPERITONEAL INJECTIONS

OF ACRONYCINE
TABLE C1

SUMMARY OF THE INCIDENCE OF NONNEOPLASTIC LESIONS IN MALE RATS GIVEN INTRAPERITONEAL INJECTIONS OF ACRONYCINE (CONTROL GROUPS)

	LOW DOSE UNTREATED CONTROL	MID AND HIGH DOSE UNTREATED CONTROL	LOW DOSE VEHICLE CONTROL	MID AND HIGH DOSE VEHICLE CONTROL
ANIMALS INITIALLY IN STUDY ANIMALS NECFOFSIED	10	10 9	10 10	10 8
NIMALS EXAMINED HISTOPATHOLOGICALLY		9	10	8
NTEGUNENTARY SISTEM				
NONE				
ESPIRATORY SYSTEM				
TTRACH5A INFLANMATICN, CHRONIC INFLAMMATICN, CHRONIC SUPPURATIV	(9)	(9) 2 (22%)	(8)	(8) 1 (13) 1 (13)
*LUNG/BEONCHIOLE HYPERPLASIA, LYMPHOID	(10)	(9) 3 (33%)	(10)	(8) 1 (131
ILUNG BRONCHOPNFUNCNIA, NOS BRONCHOPNEUMONIA SUPPURATIVE PNEUMONIA, CHRONIC MURINE	(10) 5 (50%)	(9) 1 (11%)	(10) 7 (70%)	(8) 1 (13) 2 (25)
ENATOPOIETIC SYSTEM				
*BONE MARROW Atrophy, NCS Hypefplasia, Nos	(9) 1 (11%)	(9) 4 (44%)	(10) 2 (20%)	(8) 2 (25) 1 (13)
#MANDIBULAR L. NODB Hyperplasia, plasma Celi	(7)	(9)	(6) 1 (17%)	(7)
IRCULATORY SYSTEM				
TENDOCARDIUM PIBROSIS, FOCAL	(9)	(9)	(10) 1 (10%)	(6)
*CELIAC ARTERY DEGENERATION_NOS	(10)	(9) 1_(115)	(10)	(8)

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

	LOW DOSE UNTREATED CONTROL	MID AND HIGH DOSE UNTREATED CONTROL	LOW DOSE VEHICLE CONTROL	MID AND HIGH DOSE VEHICLE CONTROL
LIGESTIVE SYSTEM				
ISMALL INTESTINP PERIARTERITIS	(8)	(9) 1 (11%)	(10)	(6)
JRINARY SYSTEM				
# KIDNEY	(9)	(9)	(10)	(8)
CALCULUS, NOS Inflammation, interstitial		2 (22%)		1 (13%) 1 (13%)
INPLAMMATICN, CHRONIC	3 (33%)	3 (33%)	7 (70%)	2 (25%)
#KIDNEY/TUBULF MINERALIZATION	(9)	(9) 1 (11%)	(10)	(8)
ENDOCRINE SYSTEM				
NONE				
REPRODUCTIVE SYSTEM				
IPROSTATE INFLAMMATICN, SUPPURATIVE	(9)	(7) 2 (29%)	(10)	(8)
VERVOUS SYSTEM				
NONE				
SPECIAL SENSE CEGANS				
NON E				
USCULOSKELFTAI SYSTEM				
NON 2				
ECDY CAVITIES				
NONE				

TABLE C1 CONTROL MALE RATS: NONNEOPLASTIC LESIONS (CONTINUED)

* NUMBER OF ANIMALS WITH TISSUE BAR

TABLE C1 CONTROL MALE RATS: NONNEOPLASTIC LESIONS (CONTINUED)

	LOW DOSE UNTREATED CONTROL	MID AND HIGH DOSE UNTREATED CONTROL	LOW DOSE VEHICLE CONTROL	MID AND HIGH DOSE VEHICLE CONTROL
ALL OTHER SYSTEMS				
NONB				
SPECIAL MORPHOLOGY SUMMARY				
NO LESION FEFORTED Autolysis/No becropsy	3	1	1	1 2
 NUMBER OF ABIMALS WITH TISSUE E: NUMBER OF ANIMALS NECROPSIED 	XAMINED MICROSC	CPICALLY		

TABLE C2

SUMMARY OF THE INCIDENCE OF NONNEOPLASTIC LESIONS IN MALE RATS GIVEN INTRAPERITONEAL INJECTIONS OF ACRONYCINE (TREATED GROUPS)

	LOW DOSE	MID DOŞE	HIGH DOSE
NIMALS INITIPILY IN STODY	35	35	35
ANTHALS NECFOESIED Animals examined histopathclogically	31 30	32 31	34 34
ATTALS FARTINED TESTOPATHCEOGICALE		31	
INTEGUMENTARY SYSTEM			
*SUBCUT TISSUF	(31)	(32)	(34)
EPIDERNAL INCLUSION CYST	1 (3%)		
HEMOFRHAGF Inflammaticn, necrotizing	1 (3%)		1 (3%)
INFLAMMATION, FOCAL GRANULOMATOU			
RESPIRATORY SYSTEM			
#TRACHEA	(29)	(31)	(31)
INFLAMMATICN, SUPPURATIVE	2 (7%)	1 (3%)	2 (6%)
INFLAMMATICN, ACUTF/CHRONIC INPLAMMATICN, CHRONIC SUPPURATIV	1 (3%)	2 (6%)	4 (13%
*LUNG/BRONCHUS	(30)	(31)	(34)
INFLAMMATICN, NOS	(307	1 (3%)	()
#LUNG	(30)	(31)	(34)
HEMORRHAGE			2 (6%)
BRONCHCENEUPCNIA, NOS Inflammaticn, interstitial		1 (3%)	1 (3%)
BRONCHOFREUMCNIA SUPPURATIVE	1 (3%)	3 (10%)	1 (3%)
PNEUMONIA, CHRONIC MURINE	8 (27%)	-	
HYPERPLASIA, ALVEOLAR EPITHELIUM		1 (3%)	
HENATOPOIETIC SYSTEM			
4BONE MARBCW	(28)	(29)	(32)
ATROPHY, NCS	6 (21%)	8 (28%)	19 (59%
4 SPLEEN	(27)	(31)	(33)
FIBROSIS HEMATOPCIFSIS	3. (11%)	1 (3%)	

NUMBER OF ANIMALS WITH TISSUE EXAMINED MICROSCOPICALLY * NUMBER OF ANIMAIS NECROPSIEC

TABLE C2 TREATED MALE RATS: NONNEOPLASTIC LESIONS (CONTINUED)

	LOW DOSE	MID DOSE	HIGH DOSE
		< 20 h	
#MEDIASTINAL I.NODE HEMORRHAGE	(30)	(20)	(21) 1 (5%)
*PANCREATIC L.NODE Hyperplasip, lymphoid	(30) 1 (3%)	(20)	(2 1)
#MESENTERIC L. NODE	(30)	(20)	(21)
CONGESTION, NCS	(30)	1 (5%)	(2.1)
HENOFRHAGE		1 (5%)	
HYPERPLASIA, LYMPHOID	1 (3%)		
IRCULATORY SYSTEM			
#HYOCARCIUN	(29)	(30)	(33)
HENORRHAGE	1 (3%)		
IN PLAMMATICN, INTERSTITIAL	1 (3%)		
INPLAMMATICN, CHRONIC POCAL	1 (3%)		
INFLAMMATION, CHRONIC SUPPURATIV	1 (3%)		
*PULMONARY ARTERY	(31)	(32)	(34)
ARTERIOSCLEROSIS, NOS	1 (3%)		
IGESTIVE SYSTEM			
#LIVER	(29)	(31)	(34)
HEMORRHAGE	1 (3%)	2 (6%)	1 (3%)
INFLAMMATION, NECROTIZING	1 (3%)		
INFLAMMATION, CHRONIC	1 (28)		1 (3%)
INFLAMMATICN, CHRONIC NECROTIZIN FIBROSIS	1 (3%)	1 (3%)	
NECROSIS, KCS		1 (3%)	1 (3%)
NECROSIS, COAGULATIVE	4 (14%)		1 (3%)
CYTOLOGIC CEGENERATION	1 (3%)		, (34)
HYPEBPLASIA, NODULAR	5 (17%)		
HYPERPLASIA, LYMPHOID	1 (3%)		
#LIVER/PERIPOFTAL	(29)	(31)	(34)
PIBROSIS, CIPPUSE			1 (3%)
* EILE DUCT	(31)	(32)	(34)
FIBRCSIS, FOCAL	1 (3%)		
HYPERPLASIA, NOS	2 (6%)		
#PANCREAS	(24)	(26)	(30)

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

TABLE C2 TREATED MALE RATS: NONNEOPLASTIC LESIONS (CONTINUED)

	LOW DOSE	MID DOSE	HIGH DOSE	
FIBRCSIS HYPEFFLASIA, NOG METAPLASIA, CSSEOUS		1 (4%)	1 (39 1 (31	
*COLON INFLAMMATICN, HEMORRHAGIC	(24)	(29)	(28) 1 (49	
#CECUM HEMORRHAGE	(24)	(29)	(28) 1 (4)	
RINARY SYSTEM				
<pre>#KIDNFY INFLAMMATICN, CHRONIC</pre>	(29) 7 (24%)	(31)	(33)	
NURINARY BLAITER PIBROSIS	(24)	(29)	(33) 1 (3)	
ENDOCRINE SYSTEM				
#ADRENAL COFTEX HYPERPLASIA, NODULAR	(28)	(31)	(33) 2 (65	
THYROID CYSTIC FOLLICURS	(26) 1 (4¥)	(26)	(22)	
REPRODUCTIVE SYSTEM				
#PROSTATE INPLAMMATICN, SUPPURATIVE	(26)	(31) 1 (3%)	(32)	
NERVOUS SYSTEM				
NONE				
SPECIAL SENSE CEGANS				
NONE				
USCULOS KELETAI SYSTEM				
*BONE OSTEOPFIRCEIS HIPEFPLASIA, NOS	(31)	(32)	(34) 1 (39 <u>1 (</u> 39	

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

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TABLE C2 TREATED MALE RATS: NONNEOPLASTIC LESIONS (CONTINUED)

	LOW DOSE	MID DOSE	HIGH DOSE
			**
EODY CAVITIES			
*PERITONEUM	(31)	(32)	(34)
INFLAMMATION, SUPPURATIVE		,	1 (3%)
ABSCESS, NCS			1 (3%)
INFLANMATICN, CHRONIC	1 (3%)		5 (15%)
INFLAMMATION, CHRONIC DIFFUSE	1 (3%)		•
FIBROSIS		1 (3%)	2 (6%)
ADHESICN, NCS	1 (3%)		- (
METAPLASIA, OSSEOUS	1 (3%)	1 (3%)	
ALL OTHER SYSTEMS *NULTIPLE ORGANS FIBROSIS	(31)	(32) 1 (3%)	(34)
SPECIAL CORFHCIOGY SUNHARY			
NO LESION FEFORTED		4	1
NO NECROPSY PERPORMED	1	,	•
AUTC/NECRCESY/NO HISTO	1	1	
AUTOLYSIS/BC NECROPSY	3	3	1

NUMBER OF ADIMALS WITH TISSUE EXAMINED NICFOSCOPICALLY
 NUMBER OF ANIMALS NECROPSIED

TABLE C3

SUMMARY OF THE INCIDENCE OF NONNEOPLASTIC LESIONS IN FEMALE RATS GIVEN INTRAPERITONEAL INJECTIONS OF ACRONYCINE (CONTROL GROUPS)

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	LOW DOSE UNTREATED CONTROL	MID AND HIGH DOSE UNTREAT- ED CONTROL	LOW DOSE VEHICLE CONTROL	MID AND HIGH DOSE VEHICLE CONTROL
ANIMALS INITIALLY IN STUDY	10	10	10	10
ANIMALS BECECISIED	10	9	10	9
INIMALS EXAMINED HISTOPATHCLOGICAIL	(10 	8	10	9
INTEGUNENTAFY SYSTEM				
*SUBCUT TISSUE INFLAMMATICN, CHRONIC FCCAL	(10)	(9)	(10) 1 (10%)	(9)
BESPTRATCRY SYSTEM				
*TRACHEA	(10)	(8)	(10)	(9)
INFLAMMATICN, NOS	•	1 (13%)		
INFLAMMATION, ACUTE/CHRONIC		2 (25%)		
#LUNG/BFONCHIOLE	(10)	(7)	(10)	(9)
HYPERPLASIA, LYMPHOID		•••	• •	2 (22)
#L UN G	(10)	(7)	(10)	(9)
INFLAMMATICN, INTEPSTITIAL PNERMONIA, CHRONIC MURINE	1 (10%)	1 (14%)	1 (10%)	
RENATOPOIETIC SYSTEM				· · · ·
#BCNE MARKCW	(10)	(8)	(9)	(9)
ATROPHY, NCS		5 (63%)		4 (44%
#SPLEEN	(10)	(8)	(10)	(9)
HEMATOFOIISIS	1 (10%)			
CIRCULATORY SYSTEM				
NONE				
LIGESTIVE SYSTEM				
#HEPATIC CAFSULE	(10)	(8)	(9)	(9)
NECROSIS, COAGULATIVE	1,57	···	1 (118)	\-/

98

· · · ·	LOW DOSE UNTREATED CONTROL	MID AND HIGH DOSE UNTREAT- ED CONTROL	LOW DOSE VEHICLE CONTROL	MID AND HIGH DOSE VEHICLE CONTROL
DRINARY SYSTEM				
#KIDNFY	(10)	(8)	(10)	(9)
CALCULUS, NOS INFLAMMATION, CHRONIC	2 (20%)	3 (38%)		1 (111
ENDOCRINE SYSTEM				
NONE				
REPRODUCTIVE STSTEM				
*MAMMARY GLANE Cyst, Nos	(10)	(9) 1 (11%)	(10)	(9)
IUTERUS/BWEOBETRIUM INFLAMMATICN, SUPPURATIVE INFLAMMATICN, CHRONIC SUPPURATIV	(10) 3 (30%) 1 (10%)	(8) 3 (38%)	(10) 2 (20%)	
ERVODŠ SYSTEM				
NONE				
SPECIAL SENSE CEGANS				
NONE				
USCULOSKELETAI SYSTEM				
NONE				
EODY CAVITIES				
*PERITONEUN INFLANMATICN, CHRONIC SUPPURATIV	(10) 1 (10%)	(9)	(10)	(9)
ALL OTHER SYSTEMS				
NONE				

* NUMBER OF ANIMALS WITH HISSUE F

TABLE C3 CONTROL FEMALE RATS: NONNEOPLASTIC LESIONS (CONTINUED)

	LOW DOSE UNTREATED CONTROL	MID AND HIGH DOSE UNTREAT- ED CONTROL	LOW DOSE VEHICLE CONTROL	MID AND HIGH DOSE VEHICLE CONTROL
SPECIAL MORFHCIOGY SUMMARY				
NO LESICN FEFCRTED Necropsy ferp/no histo performed	2	1	3	2
AUTOINSIS/NC NECROPSY		i	*	1
# NUMBER OF ANIMALS WITH TISSUE EXAM * NUMBER OF ANIMALS NECROPSIED	INED MICROSCO	PICALLY		

TABLE C4

SUMMARY OF THE INCIDENCE OF NONNEOPLASTIC LESIONS IN FEMALE RATS GIVEN INTRAPERITONEAL INJECTIONS OF ACRONYCINE (TREATED GROUPS)

NIMALS INITIALLY IN STUDY NIMALS NECFOFSIED NIMALS EXAMINED HISTOPATHOLOGICALLY	35		
		35	35
	35 7 35	32 32	34 33
NTEGUMENTARY SYSTEM			
*SKIN	(35)	(32)	(34)
ULCER, CHECNIC	1 (3%)		
ESPIRATCRY SYSTEM			
TRACHEA	(35)	(30)	(32)
INFLAMMATICN, NOS INFLAMMATION, ACUTE/CHRONIC		1 (3%)	1 (3%)
INPLAEMATICN, CHRONIC		2 (7%)	1 (3%)
#LUNG/BRONCHUS	(35)	(32)	(33)
BRONCHIECTASIS		1 (3%)	
INFLAMMATICN, NOS		1 (3%)	
#LUNG	(35)	(32)	(33)
HEMORREAGE Inflammaticn, Interstitial		2 (6%)	1 (3%)
BRONCHCENEUMCNIA SUPPURATIVE		2 (6%)	1 (3%)
PNEUMCNIA, CHFONIC MURINE INFLAMMATICN, CHRONIC	5 (14%)	1 (3%)	
EHATOPCIETIC SYSTEM			
#BCNE MARRCW	(35)	(32)	(31)
ATROPHY, NCS	3 (9%)	7 (22%)	10 (32%
#SPLEFN	(35)	(31)	(31)
HEMATOPOIFSIS	10 (29%)	1 (3%)	
#AXILLARY LYMFH NODE	(35)	(12)	(28)
HYPERPLASIA, PLASMA CELL	1 (3%)		
IRCULATORY SYSTEM			
<u>NONE</u>			

TABLE (4 TREATED FEMALE RATS: NONNEOPLASTIC LESIONS (CONTINUED)

j j

	LOW DOSE	MID DOSE	HIGH DOSE
LIGESTIVE SYSTEM			
LIVER HEMORSHAGIC CYST	(35)	(32) 1 (3%) 1 (3%)	(33)
INFLAMMATICN, CHRONIC PIBRC3IS, DIFFUSE Necrc3IS, Nos		1 (3%) 1 (3%)	1 (3%)
NECRCSIS, CCAGULATIVE Hyperplasia, Nodular	1 (3%) 1 (3%)	1 (3%)	3 (9%)
LIVER/CENTRILOEULAR NECROSIS, COAGULATIVE	(35) 1 (3%)	(32)	(33)
*EILE DUCT CYST, NOS	(35) 1 (3%)	(32)	(34)
HYPERPLASIA, NOS Hyperplasia, cystic	(38)	1 (3%) 1 (3%)	1 (3%) 1 (3%)
#PANCREAS Fibrosis	(34)	(30) 1 (3%)	(31)
#STONACH FIBROSIS	(35)	(30) 1 (3 %)	(32)
BINARY SYSTER			
<pre>#KIDNEY CALCULUS, NOS HYDRONEPHFOSIS</pre>	(35) 1 (3%)	(31) 1 (3%)	(32)
INFLAMMATION, SUPPURATIVE INFLAMMATICN, CHRONIC	3 (9%)	1 (3%)	1 (3%)
<pre>#KIDNEY/TUBULE NEPHROSIS, NOS</pre>		(31)	(32) 1 (3%)
ENDOCRINE SYSTEM			
#ADRENAI INFLAMMATICN, CHRONIC ANGIECTASIS	(32) 1 (3%)	(30) 1 (3%) 2 (7%)	(31)
NADRENAI CORTEX	(32)	(30)	(E 1) 1. (3%)

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

TABLE C4 TREATED FEMALE RATS: NONNEOPLASTIC LESIONS (CONTINUED)

	LOW DOSE	MID DOSE	HIGH DOSE
EPRODUCTIVE SISTEM			
*MAMMARY GLANE	(35)	(32)	(34)
INFLAMMATICN, NECROTIZING Hyperplasia, cystic	1 (3%)	1 (3%)	1 (3%
*VAGINA INFLAMMATICN, SUPPURATIVE	(35)	(32)	(34) 1 (3 %
UTERUS/ENCOMFTRIUM INFLAMMATICN, SUPPURATIVF HYPEFPLASIA, CYSTIC	(34) 6 (18%) 2 (6%)	(32) 1 (35)	(32)
40 VAR Y/OVIEUCT HEMORR HAGE	(34) 1 (3%)	(32)	(32)
TO VAR Y	(31)	(31)	(3 1)
INFLAMMATICN, SUPPURATIVE INFLAMMATICN, CHRONIC	1 (3%)	1 (3%)	
NONE			
NONE			
NONE VUSCULOSKELETAI SYSTEM NONE			
USCULOS KELETAI SYSTEM	(35)	(32) 2 (6\$)	(34) 2 (6% 1 (3%
NONE VUSCULOS KELETAI SYSTEM NONE CCEY CAVITIES *PERITONEUM INFLAMATICN, CHRONIC FIBRESIS	(35)	(32) 2 (6\$)	2 (6%

TABLE C4 TREATED FEMALE RATS: NONNEOPLASTIC LESIONS (CONTINUED)

	LOW DOSE	MID DOSE	HIGH DOSE
ACIPOSE TISSUE INFLAMMATICN, CHRONIC POCAL	1		
SPECIAL FORFEOLOGY SUMMARY			
NO LESICK FFECRTED Auto/NPCROPST/NO HISTO Autolysis/NC NECROPSY	1	1	1
NUMBER CF ANIMALS WITH TISSUF FX NUMBER OF ANIMALS NECROPSIED	ANINED MICROSCOP	ically	

APPENDIX D

SUMMARY OF THE INCIDENCE OF NONNEOPLASTIC LESIONS

IN MICE GIVEN INTRAPERITONEAL INJECTIONS

OF ACRONYCINE

TABLE D1

SUMMARY OF THE INCIDENCE OF NONNEOPLASTIC LESIONS IN MALE MICE GIVEN INTRAPERITONEAL INJECTIONS OF ACRONYCINE (CONTROL GROUPS)

	LOWER MID DOSE UNTREATED CONTROL	UPPER MID AND HIGH DOSE UNTREAT ED CONTROL	LOW DOSE UNTREATED CONTROL	LOWER MID DOSE VEHICLE CONTROL	UPPER MID AND HIGH DOSE VEHICLE CONTROL
ANIMALS INITIALLY IN STUDY	10 9	10	20	10	10
ANIMALS NECROFSIED ANIMALS FXAMINED HISTOPATHOLOGICALL		10 10	20 20	10 10	10 10
INTEGUMENTARY SYSTEM					
*SKIN	(9)	(10)	(20)	(10)	(10)
ULCER, FOCAL			1 (5%)		
FIBROSIS FIBRCSIS, FOCAL			1 (5%) 2 (10%)		
ACARIASIS			1 (5%)		
*SUBCUT TISSUF	(9)	(10)	(20)	(10)	(10)
GRANULATION, TISSOF			1 (5%)		
FESPIRATORY SYSTEM		н 			
#LUNG	(9)	(10)	(20)	(10)	(10)
INPLAMMATICN, INTERSTITIAL Bronchopneumonia suppurative	1 (11%)			1 (10%)	
HYPERPLASIA, ALVEOLAR EPITHELIU HYPEFPLASIA, LYMPHOID	R		1 (5%) 2 (10%)		

HENATOPOIETIC SYSTEM					
SPLEEN ATROPHY, NCS	(9)	(10)	(20)	(9)	(10)
HY PEFPLASIA, HENATOPOIETIC	1 (11%)			1 (11%)	
HYPEFPLASIA, LYMPHOID				1 (11%)	
HEMATOPOIESIS			3 (15%)		
HLYMPH NODE ATROPHY, NCS	(9)	(9)	(2 C)	(10)	(9) 1 (11 %
MEDIASTINAL L.NODE ATROPHY, NCS	(9)	(9)	(20)	(10) 1 (10%)	(9)
#PANCREATIC I.NOCE HYPERPLASIA_IYMPHOID	(9)	(9)	(20)	(10)	(9)

* NUMBER OF ANIMALS WITH TISSUE BIANINED HICROSCOPICALLY * NUMBER OF ANIMALS NECROPSIEC

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TABLE D1 CONTROL MALE MICE: NONNEOPLASTIC LESIONS (CONTINUED)

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	LOWER MID DOSE UNTREATED CONTROL	UPPER MID AND HIGH DOSE UNTREAT- ED CONTROL	LOW DOSE UNTREATED CONTROL	LOWER MID DOSE VEHICLE CONTROL	UPPER MID AND HIGH DOSE VEHICLE CONTROL
AMPSENTERIC L. NODE HEMORRHAGE ATROFHY, NCS ANGIPCTASIS	(9) 1 (11%) 1 (11%) 1 (11%) 1 (11%)	(9)	(20)	(10)	(9)
#THYNUS ATROPHY, NCS	(3)		(4)	(1) 1 (100%)	(1) 1 (100%
IRCULATCRY SYSTEM					
#MYOCARCIUM INPLANMATICN, INTPRSTITIAL	(9)	(10)	(20) 1 (5%)	(10) 1 (10%)	(10)
IGESTIVE SYSTEM					
*LIVER NECROSIS, NOS HYPEFTFOFHY, NOS HYPEFTFASIA, NODULAR	(9) 2 (22%)	(10) 1 (10%)	(20) 1 (5%)	(10) 1 (10%)	(10)
HYPERPLASTIC NODULE Hyperplasia, henatopoietic Hyperplasia, lynphoid	2 (22*)			2 (20%) 2 (20%)	
<pre>#LIVER/CENTRILOBULAR DEGENERATICN, NOS</pre>	(9)	(10)	(2¢)	{10} 1 (10¶)	(10)
#LIVER/HEPATCCYTES Hypprplasi, Nos	(9)	(10) 1 (10%)	(20)	(10)	(10)
FINARY SYSTEP					
<pre>#KIDNEY HYDRON®PHRCSIS INFLAMMATICR, CHRONIC INFAFCT, KCS</pre>	(9)	(10)	(20) 2 (10%) 1 (5%)	(10)	(10) 1 (10%)
URINARY BLIFIFR INFLAMMATICN, CHRONIC	(9)	(10)	(20)	(8)	(10) 2 (20 %)
ENDOCRINE SYSTEM					
#ADRENAI PIBROSIS <u>CALCIFICATION. NOS</u>	(8)	(10)	(18)	(10) 1 (10%) <u>1 (10%)</u>	(9)

NUMBER OF ANIMALS WITH TISSUE EXAMINED MICROSCOPICALLY

	LOWER MID DOSE UNTREATED CONTROL	UPPER MID AND HIGH DOSE UNTREAT ED CONTROL		LOWER MID DOSE VEHICLE CONTROL	UPPER MID AND HIGH DOSE VEHICLE CONTROL
PEPRODUCTIVE SYSTEM					
<pre>#PROSTATE Implammaticn, suppurative Implammation, chronic suppurati</pre>	(2) (V	(10)	(20)	(10) 1 (10%)	(10) 1 [103
#TESTIS CALCIPICATION, NOS	(9)	(10)	(20)	(10) 1 (10%)	(10)
FR VOUS SISTEM					
NONE					
SPECIAL SENSE CRGANS NONE NUSCULOS RELETAI SYSTEM NONE					
ECDY CAVITIES					-
NON 8					
NLL OTHER SYSTEMS					
SPECIAL HOBEHCIOGY SUMMARY					
NO LESION FEFORTED AUTOINSIS/NO NECBOPSY	5 1	5	4	2	7
	1			-	

TABLE D1 CONTROL MALE MICE: NONNEOPLASTIC LESIONS (CONTINUED)

TABLE D2

SUMMARY OF THE INCIDENCE OF NONNEOPLASTIC LESIONS IN MALE MICE GIVEN INTRAPERITONEAL INJECTIONS OF ACRONYCINE (CONTROL AND TREATED GROUPS)

	LOW DOSE VEHICLE CONTROL	LOW DOSE	LOWER MID DOSE	UPPER MID DOSE	HIGH DOSE
INIMALS INITIAILY IN STUDY INIMALS MISSING	20	40	35	35 1	35
NIMALS NECEOPSIED NIMALS EXAMINED HISTOPATHOLOGICALLY	20 2 0	40 40	35 35	34 33	29 12
NTEGUMENTABY SYSTPM					
*SKIN HEMATCMA, BOS	(20)	(40)	(35)	(34)	(29) 1 (3%)
*SUBCUT TISSUE HENOFBRAGE	(20)	(40)	(35)	(34)	(29) 1 (3%)
RESPIRATORY SYSTEM					
TTRACHEA INPLANNATION, SUPPURATIVE	(16) 1 (6%)	(38)	(= 1)	(29)	(11)
ILUNG HENORE HAGE	(18)	(40)	(35) 2 (6 %)	(33)	(12) 1 (8 %)
INPLAMMATICN, INTERSTITIAL BRONCHOPMEUMONIA SUPPURATIVE Hypebplasia, Lynphoid	2 (11%) 1 (6%)	1 (3%) 2 (5%) 1 (3%)	1 (3%)		
ENATOPOIETIC SYSTEM					
IBONE MARROW ATROPHY, WCS Hypefplasia, Hematopoietic Hypefplasia, granulocytic	(20)	(38) 1 (3%)	(34) 1 (3%) 1 (3%)	(33)	{12} 1 (8%)
SPLEEN ATROPHY, NOS	(19)	(38)	(35) 2 (6%)	(30) 1 (3%)	(12) 1 (8 %)
<pre>#MEDIASTINAL L.NODE HEMORRBAGE ATROFRY, NCS</pre>	(17)	(40)	(3 1)	(31) 2 (6%)	(10) 1 (101 7 (701
INESENTERIC L. NODE	(17)	(40)	(31)	(31)	(10)

NUMBER OF ANIMALS WITH TISSUE BIANINED HICROSCOPICALLY
 NUMBER OF ANIMALS NECROPSIED

	LOW DOSE VEHICLE CONTROL	LOW DOSE	LOWER MID DOSE	UPPER MID DOSE	HIGH DOSE
HIPERPLASIA, LIMPHOID		1 (3%)			
4THYNUS ATROPHY, WOS	(5)	(7)	(15) 15 (100%)	(2) 2 (100%)	, (9) 9 (100 %
IRCULATORY SYSTER					
INYOCARCIUN INFLAMMATICN, SUPPURATIVE INFLAMMATICN, CHRONIC DIPPUSE	(20)	(39) 3 (8%) 1 (3%)	(35) 2 (6%)	(32)	. (12)
SENDOCASEIUS INFLAMBATICN, NOS INFLAMBATICN, NOCAL INFLAMBATICN, SUPPURATIVE	(20)	(39) 2 (5%) 1 (3%)	(35)	(32)	(12)
INFLAMMATICM, ACUTF/CHRCHIC *AORTA INFLAMMATICM, SUPPURATIVE	(20)	(40)	1 (3%) (35) 1 (3%)	(34)	(29)
EIGESTIVE SYSTEM #LIVER THRONBOSIS, NOS INFLANMATICN, SUPPURATIVE ABSCESS, KCS INFLANMATICN, CHNONIC SUPPURATIVE MECRCSIS, FOCAL MECRCSIS, COAGULATIVE HYPEFPLASIA, NODULAR ANGIECTASIS HYPEFPLASIA, HEMATOPOIETIC HYPEFPLASIA, IYMPHOID HEMATOPOIESIS	1 (5%)	(39) 3 (8%) 1 (3%) 1 (3%)	(34) 1 (3%) 1 (3%) 1 (3%) 1 (3%) 1 (3%) 1 (3%)	(33)	(12)
*BILE DUCT INFLAMMATICN, SUPPURATIVE INFLAMMATICN, CHRONIC SUPPURATIV MYPEFPLASIA, NOS HYPEFPLASIA, NOS	(20)	(40) 1 (3%) 1 (3%)	(35) 3 (9%) 1 (3%) 5 (14%) 7 (20%)	(34) 1 (3%)	(29) 1 (3%)
<pre>#PANCRPAS INFLAMMATICN, INTERSTITIAL ATROFHI, NOS</pre>	(20)	(38)	(33) 2 (6%) 2 (6%)	(30)	(12) 1 (8%)

TABLE D2 CONTRUL AND TREATED MALE MICE: NONNEOPLASTIC LESIONS (CONTINUED)

* NUMBER OF ANIMALS WITH TISSUE BIANIMED MICBOSCOPICALLY * NUMBER OF ANIMALS MECROPSIEL

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	LOW DOSE VEHICLE CONTROL	LOW DOSE	LOWER MID DOSE	UPPER MID DOSE	HIGH DOSE
ATROFHY, FCCAL Hypefplasia, Nodular			***************	1 (3%)	1 (8%)
IGASTRIC SUENUCOSA HENORRHAGE	(20)	(30)	(32)	(30)	(12) 1 (8 %)
URINARY SYSTER					
#KIDÉTY PYELONEPHEITIS, FOCAL INFLAHMATICN, INTERSTITIAL INFLAHMATICN, SOPPURATIVE INFLAHMATICN, CHBONIC INFLAMMATICN, CHBONIC PCCAL INFLAMMATICN, CHBONIC SUPPURATIV	(20)	(40) 2 (5 %)	(35) 2 (65) 2 (65) 1 (35) 1 (35) 2 (65)	(33)	(12) 1 (8%) 2 (17%
FIBROSIS, DIFFUSE NECROSIS, EEDULLARY		1 (3%)	6 (17%)		1 (8%)
IKIDNEY/CORTEX ATROPHY, NCS ATBOFHY, FOCAL	(20)	(40)	(35)	(33)	(12) 1 (8%) 1 (8%)
IKIDNEY/TUBULE CAST, NCS	(20)	(40)	(35) 1 (3%)	(33)	(12)
AKIDNPY/PPLVIS Abscess, Nos	(20)	(40)	(35)	(33)	(12) 1 (8%)
ØGRINARY ELÆCTER INPLANDATICN, SUPPURATIVE HEMOSIDEFOSIS	(20)	(38)	(33) 1 (3%)	(33)	(12) 1 (8%)
FROCEINE SYSTEM					
NCNE					
REPRODUCTIVE SYSTEM					
*SEMINAL VESICLE INPLAMMATICN, SUPPURATIVE	(20)	(40)	(35) 1 (3%)	(34)	(29)
TESTIS FIBROSIS, TIPPUSE Atrofhy. NCS	(20)	(38)	(34) 1 (3%)	(31)	(12)

TABLE D2 CONTROL AND TREATED MALE MICE: NONNEOPLASTIC LESIONS (CONTINUED)

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

	LOW DOSE VEHICLE CONTROL	LOW DOSE	LOWÊR MID DOSE	UPPER MID DOSE	HIGH DOSE
FR VOUS SYSTEM					
TERAIN/MENINGES INFLAMMATICN, SUPPURATIVE	(20)	(40)	(33) 1 (3%)		(12)
PECIAL SENSE CEGANS					
NCNE					
USCOLOSKELFTAL SYSTEM					
NONE					
CDY CAVITIES					
*PEBITONEUH INFLAMMATICN, NOS INFLAMMATICN, SUPPURATIVE INFLAMMATICN, FIBRIMOUS INFLAMMATICN, ACUTE AND CHRONIC INFLAMMATICN, ACUTE/CHRONIC INFLAMMATICN, CHRONIC POCAL INFLAMMATICN, CHRONIC DIFFUSE	(20)	(40) 1 (3%) 1 (3%) 1 (3%) 1 (3%)	(35) 1 (35) 2 (65) 1 (35) 1 (35) 1 (35) 21 (605) 2 (65)	(34)	(29)
INFLAMMATICN, CHBONIC SUPPURATIV INFLAMMATICN, PYOGRANULCHATOUS FIBROSIS FIBRCSIS, FOCAL			1 (3%)	2 (6%)	1 (3 1 (3
*PLEURA INFLAMMATICN, SUPPURATIVE	(20)	(40)	(35) 3 (9%)	(34)	(29)
LL OTHER SYSTEMS					
<pre>*HULTIPLE ORGANS ATROPHY, NCS HIPEFPLASIA, LYMPHOID</pre>	(20)	(40) 1 (3%)	(35)	(34) 1 (3%)	(29)
SPECIAL NOFFHÇIOGY SUMMARY					
NO LESION FEPORTED	_4	13	3	29	1

TABLE D2 CONTROL AND TREATED MALE MICE: NONNEOPLASTIC LESIONS (CONTINUED)

NUMBER OF ANIMALS WITH TISSUE EXAMINED NICBOSCOPICALLY
 NUMBER OF ANIMALS NECROPSIED

TABLE D2 CONTROL AND TREATED MALE MICE: NONNEOPLASTIC LESIONS (CONTINUED)

	LOW DOSE VEHICLE CONTROL	LOW DOSE	LOWER MID DOSE	UPPER MID DOSE	HIGH DOSE
ANIMAL KISSING/NO NECROPSY NECROPSY FERF/NO HISTO FERFORM Autc/NECFCFS/NO HISTO Autolysis/NC Hecropsy	ED			1 1	17 6
4 NUMBER OF ANIMALS WITH TISSUE EX * NUMBER OF ANIMALS NECROPSIED	AMINED MICROSCO	PICALLY			

TABLE D3

SUMMARY OF THE INCIDENCE OF NONNEOPLASTIC LESIONS IN FEMALE MICE GIVEN **INTRAPERITONEAL INJECTIONS OF ACRONYCINE (CONTROL GROUPS)**

	LOWER MID DOSE UNTREATED CONTROL	UPPER MID AND HIGH DOSE UNTREAT- ED CONTROL	LOW DOSE UNTREATED CONTROL	LOWER MID DOSE VEHICLE CONTROL	UPPER MID AND HIGH DOSE VEHICLE CONTROL
ANIHALS INITIAILY IN STUDY ANIHALS NECHOFSIED MINALS EXAMINED HISTOPATHOLOGICALLI	10 10 7 10	10 10 10	2C 19 19	10 10 10	10 10 10
INTEGUMENTAFY SYSTEM					
*SKIN ULCPR, POCAL	(10)	(10)	(19) 1 (5%)	(10)	(10)
RESPIRATORY SYSTEM					
4LUNG/BRONCHUS BRONCHIECTASIS INPLAMMATICN, SUPPURATIVE HYPEFPLASIA, LYMPHOID	(10) 1 (10%)	(19)	(19)	(10) 1 {10%} 1 {10%}	(9)
<pre>#LUNG/BRONCHIOLE HYPERPLASIA, LYMPHOID</pre>	(10)	(10)	(19)	(10) 1 (10%)	(9)
\$LUNG EDENA, NOS BRONCHOPNEUMONIA, NOS INFLAMAATICN, INTERSTITIAL RYPERPLASIA, ALVEOLAR EPITHELIUI HYPEFPLASIA, LYPENOID	1 1 (10%) 2 (20%)		(1\$) 1 (5%) 6 (32%)	(10) 1 (10%) 1 (10%) 4 (40%) 1 (10%)	(9)
EENATOPOIETIC SYSTEM					
<pre>#SPLEPN NECROSIS, COAGULATIVE Hypefplasia, hPM atopoietic Hypefplasia, lymphoid He Matopoipsis</pre>	(10) 1 (10%)	(10)	((19) 3 (16%) 5 (26%)	(10) 3 (30%)	(10)
AMESENTERIC L. NODE Hyperplasi), Lynphoid	(10)	(1)	(19)	(10) 1 (10%)	(10)
4THYRUS ATROPHY, NCS Hypefplasia, Lymphoid		(1)	(6) 1 (17 %)	(1) 1 (100%)	

• NUMBER OF ANIMALS WITH TISSUE BYAMINED MICROSCOPICALLY • NUMBER OF ANIMALS NECROFSIED

	LOWER MID DOSE UNTREATED CONTROL	UPPER MID AND HIGH DOSE UNTREAT- ED CONTROL	LOW DOSE UNTREATED CONTROL	LOWER MID DOSE VEHICLE CONTROL	UPPER MID AND HIGH DOSE VEHICLE CONTROL
CIRCULATORY SYSTEM					
#HEART PERIART FRITIS	(10)	(10) 2 (20%)	(19)	(10)	(9)
CIGESTIVE SYSTEM					
*LIVER NECROSIS, COAGULATIVP CYTOPLASHIC VACUOLIZATION BASOFHILIC CYTO CHANGE HYPPRPLASTIC NODULP HYPPFPLASTA, HEMATOPOIETIC HYPPRPLASTA, LYMPHOID	(10) 1 (10%) 1 (10%) 1 (10%) 2 (20%)	(10)	(19) 1 (5%) 1 (5%)	(10) 1 (10%) 2 (20%)	(10)
*BILE DUCT HYPFRPLASIA, HENATOPOIETIC	(10)	(10)	(19)	(10) 1 (10 %)	(10)
	(10)	(9)	(19) 1 (5%)	(10) 1 (10%)	(10)
◆PANC PEATIC PCIN US ATROPHY, NCS ATROEHY, FCCAL	(10)	(9)	(19) 1 (5%) 1 (5%)	(10)	(10)
URINARY SYSTEM					
<pre>#KIDNEY INFLAMMATICN, CHRONIC INPAECT, NOS</pre>	(10)	(10) 1 (10%)	(19) 1 (5%)	(10)	(10)
#URINAFY BLACIFR HYPERPLASIA, LYMPHOID	(10)	(9)	(15)	(8) 1 (13%)	(9)
ENDOCRINE SYSTEM					
ATHYROID HYPERPLASIA, CYSTIC HYPEPLASIA, FOLLICULAR-CELL	(5)	(8)	(19) <u>1_(5%)</u>	(6) 1 (17%)	(10)

TABLE D3 CONTROL FEMALE MICE: NONNEOPLASTIC LESIONS (CONTINUED)

NUMBER OF ANIMALS WITH TISSUE EXAMINED MICROSCOPICALLY
 NUMBER OF ANIMALS NECROPSIED

	LOWER MID DOSE UNTREATED CONTROL	UPPER MID AND HIGH DOSE UNTREAT- ED CONTROL	LOW DOSE UNTREATED CONTROL	LOWER MID DOSE VEHICLE CONTROL	UPPER MID AND HIGH DOSE VEHICLE CONTROL
REPRODUCTIVE SYSTEM					
I OT ER US	(10)	(9)	(19)	(19)	(9)
CYST, NOS	1 (10%)		••••	(,	(-)
HENOFRHAGF PY ONET RA		1 (11%)		1 (10%)	
ANGIECTASIS		1 (11%)			
#CTERUS/ENCOMETRIUM Hyperplasia, Cystic	(10) 8 (80%)	(9)	(19) 15 (79%)	(10) 9 (90%)	(9)
#OVARY MINERALIZATION	(8)	(3)	(18) 1 (6%)	(6)	(6)
POLLICULAE CYST, NOS Atroeny, NCS			1 (6%)	2 (33%)	
ER VOUS SYSTEM					
NONE					
PFCIAL SENSE CRGANS					
NONE					
NONE IUSCULOSKELFTAI SYSTEM NONE					
NONE NUSCULOSKELETAI SYSTEM NONE					
NONE NUSCULOSKELFTAI SYSTEM NONE ODY CAVITIES NONE					
NONE NUSCULOSKELETAI SYSTEM NONE CODY CAVITIES NONE					
NONE MUSCULOSKELFTAI SYSTEM NONE CODY CAVITIES NONE ALL OTHER SYSTEMS ADIPOSE TISSUE					
NONE NUSCULOS KELETAI SYSTEM NONE CODY CAVITIES NONE NUNE					
NONE MUSCULOSKELETAI SYSTEM NONE CODY CAVITIES NONE ALL OTHER SYSTEMS ADIPOSE TISSUE					

TABLE D3 CONTROL FEMALE MICE: NONNEOPLASTIC LESIONS (CONTINUED)

TABLE D4

SUMMARY OF THE INCIDENCE OF NONNEOPLASTIC LESIONS IN FEMALE MICE GIVEN **INTRAPERITONEAL INJECTIONS OF ACRONYCINE (CONTROL AND TREATED GROUPS)**

	LOW DOSE VEHICLE CONTROL	LOW DOSE	LOWER MID DOSE	UPPER MID DOSE	HIGH DOSE
NIMALS INITIALLY IN STUDY NIMALS NECRCESIED	20 20	40 39	35 33	35 33	35 32
NIALS EXAMINED HISTOPATHOLOGICALLY		39	33	33	15
NTEGUNENTARY SYSTEM					
*SKIN INPLANNATICN, SUPPURATIVE	(20)	(39)	(33) 1 (3%)	(33)	(32)
*SUBCUT TISSUE INFLAMMATICN, SUPPURATIVE	(20)	(39)	(33)	(33)	(32) 1 (3%)
ABSCESS. NCS				1 (3%)	1 (3%)
ESPIRATORY SYSTEM					
TTBACHEA INFLANNATICN, SUPPURATIVE	(18)	(38) 3 (8%)	(30)	(32)	(14)
LUNG EDENA, NOS	(17)	(38)	(33) 1 (3%)	(33)	(15)
HEMOREHAGE Inflammaticn, interstitial			2 (6%)	1 (3%)	2 (13
BRONCHOPNEUMONIA SUPPURATIVE INFLAMMATICN, ACUTE SUPPURATIVE		11 (29%)	1 (3%)	1 (3%)	
HYPEFPLASIA, IYNPHOID		2 (5%)	1 (3%)		
ENATOPOIETIC SYSTEM					
BONE NARRCH	(18)	(39)	(31)	(32)	(14)
ATROPHY, NCS Hypefplasia, Nos			1 (3%)	4 (13%) 1 (3%)	
HIPEFPLASIA, HEMATOPOIETIC				3 (9%)	
ISPLEEN HEBORRHAGE	(20)	(39)	(33)	(31) 1 (3 %)	(15)
ATROFHY, NCS HYPEFPLASIA, NOS HYPEFPLASIA, BEHATOPOIETIC			5 (15%)	3 (10%) 2 (6%) 4 (13%)	1 (7%)

NUMBER OF ANIMALS WITH TISSUE EXAMINED MICROSCOPICALLY
 NUMBER OF ANIMALS NECROPSIED

TABLE D4. CONTROL AND TREATED FEMALE MICE: NONNEOPLASTIC LESIONS (CONTINUED)

	LOW DOSE VEHICLE CONTROL	LOW DOSE	LOWER MID DOSE	UPPER MID DOSE	HIGH DOSE
HYPEFPLASIA, LYMPHOID Hematofciesis		10 (26%) 1 (3%)	***********		
INEDIASTINAL I.NODE Atrophy, NCS Hypefplasia, plasma cell	(20)	(37)	(28)	(31) 5 (16%) 3 (10%)	(12) 3 (25%)
ITHYNUS Atrophy, Nos Hyprfplasi≯, plasha Cëll	(9)	(11)	(22) 22 (100%)	(7) 6 (86%) 1 (14%)	(4) 4 (100%
TIRCULATORY SYSTEM					
HYOCARDIUN INFLAMMATICN, INTERSTITIAL INFLAMMATION, SUPPURATIVE INFLAMMATICN, ACUTP FOCAL INFLAMMATICN, ACUTE SUFFURATIVE	(19)	(38) 3 (8%)	(33) 1 (3%) 1 (3%) 1 (3%)	(33) 1 (3%)	(15)
VENDOCAEDIUM INPLANATICN, NOS INPLAMMATION, SUPPURATIVE INPLAMMATICN, FIBRINOUS INPLAMMATICN, ACUTE	(19) 1 (5%)	(38) 2 (5 %)	(33) 1 (3%) 10 (30%) 1 (3%) 2 (6%)	(33)	(15)
*AORTA INPLAMBATICN, SUPPURATIVE INPLAMMATICN, ACUTE SUPPURATIVE	(20)	(39)	(33) 3 (9%) 1 (3%)	(33)	(32)
CIGESTIVE SYSTEM					
<pre>\$LIVER INPLAMMATICN, SUPPURATIVE INFLAMMATICN, NECROTIZING INFLAMMATICN, ACUTE SUPPURATIVE</pre>	(20)	(39)	(31) 1 (3%) 2 (6%) 1 (3%)	(32) 1 (3%)	(15)
NECROSIS, FOCAL NECROSIS, CCAGULATIVE LEUROCYTOSIS, NOS HYPEFPLASIA, LYMPHOID	1 (5%)	1 (3%)	4 (13%)	2 (6%) 2 (6%)	
<pre>#LIVER/PERIPORTAL NECROSIS, NOS</pre>	(20)	(39)	(3 1)	(32) 1 (3%)	(15)
*BILE DUCT DILATATION, NOS	(20)	(39)	(33)	(33)	(32)

NUMBER OF ANIMALS WITH TISSUE EXAMINED MICROSCOPICALLY
 NUMBER OF ANIMALS NECROPSIID

	LOW DOSE VEHICLE CONTROL	LOW DOSE	LOWER MID DOSE	UPPER MID DOSE	HIGH DOSE
INFLAMMATICN, SUPPORATIVE INFLAMMATICN, ACUTE SUPPURATIVE			2 (6%)	1 (3%) 1 (3%)	
HYPFFPLASIA, NOS Hypefplasia, focal			3 (9%) 12 (36%)	19 (58%)	1 (3%
HYPEEPLASIA, CIPPUSE Hypeeplasia, Cystic			2 (6%)	1 (3%)	
*PANCREAS INFLAMMATICN, FOCAL	(16)	(35)	(3C)	(29)	(15) 1 (7%)
INPLAMMATION, INTERSTITIAL	1 (6%)		1 (3%)		•
NECROSIS, COAGULATIVE Atroeny, ncs Atroeny, fccai			1 (3%) 1 (3%)	1 (3%)	1 (7%)
*STONACH HYPEFPIASIA, FIASMA CBLL	(18)	(39)	(29)	(32) 1 (3%)	(14)
ILARGE INTESTINE NEMATODIASIS	(13)	(36)	(28) 1 (4%)	(32)	(11)
JRINARY SYSTEM					
<pre>%KIDNEY INFLAMMATICN, INTERSTITIAL</pre>	(20)	(39)	(33) 1 (3%)	(33)	(13)
INFLAMMATICN, SUPPORATIVE			3 (9%)	1 (78)	
PYELCNEFHEITIS SUPPURATIVE Inplammaticn, acute suppurative			1 (3%)	1 (3%)	
INFLAMMATICN, CHRONIC INFLAMMATICN, CHRONIC POCAL		1 (3%)	1 (3%)	2 (6%)	1 (8%)
INFLAMMATICN, CHRONIC DIFFUSE NECRCSIS, CCAGULATIVE		1 (3%)	1 (3%)		
NECROSIS, MECULLARY		3 (8%)	6 (18%)		
#KIDNEY/CORTEX INFLAMMATICN, SUPPURATIVE	(20)	(39)	(33) 1 (3%)	(33)	(13)
4KIDNEY/METULIA Abscess, NCS	(20)	(39)	(33)	(33) 1 (3 %)	(13)
NECROSIS, COAGULATIVE				1 (3%)	
#KIDNFY/TUBULF CAST, NOS	(20)	(39)	(33) 2 (6%)	(33)	(13)
CALCIFICATION, NOS			1 (3%)		
AKIDNEY/FRLVIS ABSCESS, NCS	(20)	(39)	(33)	(33)	(13) 1_(8%)

TABLE D4. CONTROL AND TREATED FEMALE MICE: NONNEOPLASTIC LESIONS (CONTINUED)

NUMBER OF ANIMALS WITH TISSUE EXAMINED MICROSCOPICALLY
 NUMBER OF ANIMALS NECROPSIEL

	LOW DOSE VEHICLE CONTROL	LOW DOSE	LOWER MID DOSE	UPPER MID DOSE	HIGH DOSE
NCOCRINE SYSTEM					
NCNE					
FPRODUCTIVE SYSTEM					
UTER US CIST, NOS PIONETRA	(20)	(39)	(31) 2 (6%) 2 (6%)	(32)	(15)
UTERUS/ENCOMFIRIUN HYPERPLASIA, CYSTIC	(20) 2 (10%)	(39) 21 (54%)	(31) 7 (23%)	(32)	(15)
IOVARY/OVICUCT INFLAMMATICN, SUPPURATIVE	(20)	(39)	(31)	(32) 1 (3%)	(15)
IOVARY CYST, NOS Follicular Cyst, Nos	(20)	(39) 1 (3%)	(27) 1 (4%)	(29)	(11)
INFLAMMATICN, SUPPURATIVE Atrofhy, NCS			1 (4%)	1 (3%) 1 (3%)	
ERVOUS SYSTEM					
NONE					
PECIAL SENSE CEGANS					
NON E					
USCULOSRELETAI SYSTEM					
*SKELETAL HUSCLE INFLAMMATICN, POCAL	(20)	(39)	(33) 1 (3 %)	(33)	(32)
CDY CAVITIES					
*ABDOMINAL WAIL Abscrss, Nos	(20)	(39)	(33)	(33)	(32)
* PERI TO NE UM INFLAMMATICN, NOS	(20)	(39)	(33)	(33)	(32)

TABLE D4. CONTROL AND TREATED FEMALE MICE: NONNEOPLASTIC LESIONS (CONTINUED)

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

TABLE D4. CONTROL AND TREATED FEMALE MICE: NONNEOPLASTIC LESIONS (CONTINUED)	

	LOW DOSE VEHICLE CONTROL	LOW DOSE	LOWER MID DOSE	UPPER MID DOSE	HIGH DOSE
INFLAMMATION, SUPPORATIVE INFLAMMATICN, FIBRINOUS Abscess, NCS		2 (5%)	8 (24%) 3 (9%)	1 (3%) 4 (12%) 1 (3%)	
INPLAMBATION, ACUTE/CHBONIC INPLAMBATION, CHBONIC INPLAMBATION, CHBONIC POCAL INPLAMBATION, CHBONIC SUPPUBATIV PIBROSIS		1 (3%)	9 (27%) 1 (3%) 1 (3%)	7 (21%) 1 (3%) 1 (3%)	2 (6%
*PLEURA INFLAMMATICN, NOS INFLAMMATICN, SUPPURATIVE INFLAMMATICN, FIBRINOUS	(20)	(39)	(33) 1 (3%)	(33) 1 (3%) 1 (3%)	(32)
LI OTHER SYSTEMS					
*NULTIPIE OFGANS HYPEFPLASIA, LYMPHOID	(20)	(39) 1 (3%)	(33)	(33)	(32)
PPCIAL MOFFHCIOGY SUMMARY					
NO LESION REFORTED NECROPSY PIRF/NO HISTO PERFORMED AUTOLYSIS/NO NECROPSY		4	1 2	8 2	9 17 3

* NUMBER OF ANIMALS NECROPSIED

APPENDIX E

ANALYSES OF THE INCIDENCE OF PRIMARY TUMORS IN RATS

GIVEN INTRAPERITONEAL INJECTIONS

OF ACRONYCINE

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Topography: Morphology	Lo w- Dose Vehicle <u>Control</u>	Mid- and High-Dose Vehicle Control	Low Dose	Mid Dose	High Dose
Liver: Hepatocellular Adenoma or Carcinoma ^b (52)	0/10 (0)	0/8 (0)	2/21 (10)	0/11 (0)	0/0 (-)
P Values ^{c,d}			N.S.		
Relative Risk (Vehicle Control) ^f Lower Limit Upper Limit			Infinite 0.156 Infinite		
Weeks to First Observed Tumor		نگ من د	80		
Liver: Osteosarcoma ^b (41)	0/10 (0)	0/8 (0)	0/25 (0)	0/18 (0)	2/7 (29)
P Values ^{c,d}		P = 0.048			N.S.
Relative Risk (Vehicle Control) ^f Lower Limit Upper Limit			 		Infinite 0.392 Infinite
Weeks to First Observed Tumor					41

Table El. Time-adjusted Analyses of the Incidence of Primary Tumors in Male Rats Given Intraperitoneal Injections of Acronycine^a, Using Vehicle Controls

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	Low-Dose Vehicle	Mid- and High-Dose Vehicle	Low	Mid	High
Topography: Morphology	<u>Control</u>	<u>Control</u>	Dose	Dose	Dose
Musculoskeletal System:					
Osteosarcoma ^b (33)	0/10 (0)	0/8 (0)	3/29 (10)	11/26 (42)	8/15 (53)
P Values ^c ,d		P = 0.019	N.S.	P = 0.027	P = 0.013
Relative Risk (Vehicle Control) ^f			Infinite	Infinite	Infinite
Lower Limit			0.231	1.192	1.442
Upper Limit			Infinite	Infinite	Infinite
Weeks to First Observed Tumor			50	35	33
All Sites:					
Hemangiosarcoma ^b (46)	0/10 (0)	0/8 (0)	4/23 (17)	0/13 (0)	1/4 (25)
P Values ^c ,d		N.S.	N.S.		N.S.
Relative Risk (Vehicle Control) ^f			Infinite		Infinite
Lower Limit			0.452		0.117
Upper Limit			Infinite		Infinite
Weeks to First Observed Tumor			48		46

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Table El. Time-adjusted Analyses of the Incidence of Primary Tumors in Male Rats Given Intraperitoneal Injections of Acronycine^a, Using Vehicle Controls
(continued)					
Topography: Morphology	Lo w- Dose Vehicle <u>Control</u>	Mid- and High-Dose Vehicle <u>Control</u>	Low Dose	Mid Dose	High Dose
All Sites: Osteosarcoma ^b (25)	0/10 (0)	0/8 (0)	4/31 (13)	13/30 (43)	12/18 (67)
P Values ^{c,d}		P = 0.002	N.S.	P = 0.022	P = 0.002
Relative Risk (Vehicle Control) ^f Lower Limit Upper Limit			Infinite 0.334 Infinite	Infinite 1.248 Infinite	Infinite 1.941 Infinite
Weeks to First Observed Tumor			50	35	25
Bile Duct: Bile Duct Carcinoma ^b (52)	0/10 (0)	0/8 (0)	2/20 (10)	0/11 (0)	0/0 (-)
P Values ^{c,d}			N.S.		
Relative Risk (Vehicle Control) ^f Lower Limit Upper Limit			Infinite 0.164 Infinite	 	
Weeks to First Observed Tumor			62		

	Low-Dose Vehicle	Mid- and High-Dose Vehicle	Low	Mid	High
Topography: Morphology	Control	<u>Control</u>	Dose	Dose	Dose
Adrenal: Cortical					
Adenoma ^b (41)	0/10 (0)	1/8 (13)	1/24 (4)	2/18 (11)	4/7 (57)
P Values ^{c,d}		P = 0.045	N.S.	N.S.	N.S.
Relative Risk (Vehicle Control) ^f			Infinite	0.889	4.571
Lower Limit			0.024	0.058	0.629
Upper Limit			Infinite	49.343	153.053
Weeks to First Observed Tumor	1988 (1999) 	72	80	61	41
Adrenal: Cortical Adenoma					
or Carcinoma ^b (41)	0/10 (0)	1/8 (13)	1/24 (4)	3/18 (17)	4/7 (57)
P Values ^{c,d}		N.S.	N.S.	N.S.	N.S.
Relative Risk (Vehicle Control) ^f			Infinite	1.333	4.571
Lower Limit			0.024	0.138	0.629
Upper Limit			Infinite	65.560	153.053
Weeks to First Observed Tumor		72	80	61	41

		Mid- and			
	Low-Dose	High-Dose			
	Vehicle	Vehicle	Low	Mid	High
<u> Iopography: Morphology</u>	<u>Control</u>	<u>Control</u>	Dose	Dose	Dose
Peritoneum: Sarcoma, NOS ^b (32)	0/10 (0)	0/8 (0)	2/29 (7)	0/26 (0)	1/16 (6)
P Values ^{c,d}		N.S.	N.S.		N.S.
Relative Risk (Vehicle Control) ^f			Infinite		Infinite
Lower Limit			0.112		0.030
Upper Limit			Infinite		Infinite
Weeks to First Observed Tumor			56		32
Peritoneum: Fibrosarcoma ^b (32)	0/10 (0)	0/8 (0)	0/29 (0)	0/26 (0)	2/16 (13)
P Values ^c ,d		N.S.			N.S.
Relative Risk (Vehicle Control) ^f					Infinite
Lower Limit					0.169
Upper Limit					Infinite
Weeks to First Observed Tumor					32

		Mid- and			
	Low-Dose	High-Dose			
	Vehicle	Vehicle	Low	Mid	High
Topography: Morphology	<u>Control</u>	Control	Dose	Dose	Dose
Peritoneum: Mesothelioma ^b (52)	0/10 (0)	0/8 (0)	3/20 (15)	1/11 (9)	0/0 (-)
P Values ^{c,d}		N.S.	N.S.	N.S.	
Relative Risk (Vehicle Control) ^f			Infinite	Infinite	
Lower Limit			0.336	0.044	
Upper Limit			Infinite	Infinite	
Weeks to First Observed Tumor		دو دو	58	55	
Peritoneum: Sarcoma and					
Other Related Tumors ^b $(32)^+$	0/10 (0)	0/8 (0)	5/30 (17)	3/26 (12)	7/16 (44)
P Values ^{c,d}		P = 0.006	N.S.	N.S.	P = 0.033
Relative Risk (Vehicle Control) ^f			Infinite	Infinite	Infinite
Lower Limit			0.470	0.213	1.142
Upper Limit			Infinite	Infinite	Infinite
Weeks to First Observed Tumor			56	55	32

+These tumors consist of sarcoma, fibrosarcoma, or mesothelioma.

(continued)					
Topography: Morphology	Low-Dose Vehicle <u>Control</u>	Mid- and High-Dose Vehicle <u>Control</u>	Low Dose	Mid Dose	High Dose
Multiple Organs: Fibrosarcoma ^b (33)	0/10 (0)	0/8 (0)	0/29 (0)	2/26 (8)	2/15 (13)
P Values ^{c,d}		N.S.		N.S.	N.S.
Relative Risk (Vehicle Control) ^f Lower Limit Upper Limit			 	Infinite 0.104 Infinite	Infinite 0.181 Infinite
Weeks to First Observed Tumor				61	33

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^aTreated groups received doses of 3.75, 7.5, or 15 mg/kg by intraperitoneal injection.

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

^CBeneath the incidence of tumors in the mid- and high-dose control group is the probability level for the Cochran-Armitage test when P < 0.05 using only the mid- and high-dose groups in the trend analysis; 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 its appropriate control group when P < 0.05; otherwise, not significant (N.S.) is indicated.

(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 its appropriate control group.

Topography: Morphology	Low-Dose Vehicle Control	Mid- and High-Dose Vehicle Control	Low Dose	Mid Dose	High Dose
Subcutaneous Tissue: Fibroma ^b (52)	0/10 (0)	0/9 (0)	2/34 (6)	0/29 (0)	1/14 (7)
P Values ^{c,d}		N.S.	N.S.		N.S.
Relative Risk (Vehicle Control) ^f Lower Limit Upper Limit			Infinite 0.096 Infinite		Infinite 0.037 Infinite
Weeks to First Observed Tumor			79		80
Subcutaneous Tissue: Fibrosarcoma ^b (52)	0/10 (0)	0/9 (0)	1/34 (3)	2/29 (7)	0/14 (0)
P Values ^{c,d}		N.S.	N.S.	N.S.	
Relative Risk (Vehicle Control) ^f Lower Limit Upper Limit			Infinite 0.017 Infinite	Infinite 0.103 Infinite	
Weeks to First Observed Tumor			58	56	

(continued)					
Topography: Morphology	Low-Dose Vehicle <u>Control</u>	Mid- and High-Dose Vehicle <u>Control</u>	Low Dose	Mid Dose	High Dose
Subcutaneous Tissue: Fibroma or Fibrosarcoma ^b (52)	0/10 (0)	0/9 (0)	3/34 (9)	2/29 (7)	1/14 (7)
P Values ^{c,d}		N.S.	N.S.	N.S.	N.S.
Relative Risk (Vehicle Control) ^f Lower Limit Upper Limit			Infinite 0.197 Infinite	Infinite 0.103 Infinite	Infinite 0.037 Infinite
Weeks to First Observed Tumor			58	56	80
Lung: Alveolar/Bronchiolar Adenoma ^b (32)	0/10 (0)	0/8 (0)	0/35 (0)	2/31 (6)	0/28 (0)
P Values ^c ,d		N.S.		N.S.	N.S.
Relative Risk (Vehicle Control) ^f Lower Limit Upper Limit			 	Infinite 0.087 Infinite	
Weeks to First Observed Tumor	400 600 · · · · · · · · · · · · · · · · ·	~-		32	

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(continued)					
Topography: Morphology	Low-Dose Vehicle <u>Control</u>	Mid- and High-Dose Vehicle <u>Control</u>	Low Dose	Mid Dose	High Dose
Lung: Alveolar/Bronchiolar					
Adenoma or Carcinoma ^b (32)	0/10 (0)	1/8 (13)	1/35 (3)	2/31 (6)	0/28 (0)
P Values ^{c,d}		N.S.	N.S.	N.S.	N.S.
Relative Risk (Vehicle Control) ^f Lower Limit Upper Limit			Infinite 0.017 Infinite	0.516 0.034 29.485	0.000 0.000 5.278
Weeks to First Observed Tumor		82	76	32	
Liver: Hepatocellular Adenoma or Carcinoma ^b (52)	0/9 (0)	0/8 (0)	0/34 (0)	4/29 (14)	0/13 (0)
P Values ^{c,d}		N.S.		N.S.	
Relative Risk (Vehicle Control) ^f				Infinite	
Lower Limit				0.296	
Upper Limit				Infinite	
Weeks to First Observed Tumor				64	

(continued)	,,,				
Topography: Morphology	Low-Dose Vehicle <u>Control</u>	Mid- and High-Dose Vehicle Control	Low Dose	Mid Dose	High Dose
Adrenal: Cortical Adenoma or Carcinoma ^b (40)	0/10 (0)	1/8 (13)	0/32 (0)	9/28 (32)	7/23 (30)+
P Values ^{c,d}		N.S.		N.S.	N.S.
Relative Risk (Vehicle Control) ^f Lower Limit Upper Limit				2.571 0.477 107.105	2.435 0.418 103.211
Weeks to First Observed Tumor		82		58	40
Mammary Gland: Adenocarcinoma, NOS ^b (32)	0/10 (0)	0/8 (0)	6/35 (17)	4/34 (12)	2/30 (7)
P Values ^{c,d}		N.S.	N.S.	N.S.	N.S.
Relative Risk (Vehicle Contol) ^f Lower Limit Upper Limit			Infinite 0.512 Infinite	Infinite 0.252 Infinite	Infinite 0.090 Infinite
Weeks to First Observed Tumor			73	32	61

+One animal in this group was diagnosed with both adenoma and carcinoma.

(continued)	:				
Topography: Morphology	Low-Dose Vehicle <u>Control</u>	Mid- and High-Dose Vehicle <u>Control</u>	Low Dose	Mid Dose	High Dose
Mammary Gland: Fibroma ^b (52)	0/10 (0)	0/8 (0)	0/34 (0)	2/29 (7)	1/14 (7)
P Values ^c ,d		N.S.		N.S.	N.S.
Relative Risk (Vehicle Control) ^f Lower Limit Upper Limit			 	Infinite 0.093 Infinite	Infinite 0.034 Infinite
Weeks to First Observed Tumor	<u></u>				80
Mammary Gland: Fibroadenoma ^b (51)	1/10 (10)	3/8 (38)	20/34 (59)	13/29 (45)	3/15 (20)
P Valuesc,d		N.S.	P = 0.007	N.S.	N.S.
Relative Risk (Vehıcle Control) ^f Lower Limit Upper Limit			5.882 1.209 227.093	1.195 0.491 5.422	0.533 0.104 3.235
Weeks to First Observed Tumor	80	82	76	51	61

(continued)					
Topography: Morphology	Low-Dose Vehicle Control	Mid- and High-Dose Vehicle Control	Low Dose	Mid Dose	High Dose
Mammary Gland: All Tumors Except Fibroma ^b (32) ⁺	1/10 (10)	3/8 (38)	22/35 (63)	16/34 (47)	5/30 (17)
P Values ^c ,d		P = 0.034(N)	P = 0.004	N.S.	N.S.
Relative Risk (Vehicle Control) ^f Lower Limit Upper Limit		:	6.286 1.310 237.797	1.255 0.535 5.627	0.444 0.128 2.471
Weeks to First Observed Tumor	80	82	66	32	61
Uterus: Endometrial Stromal Polyp ^b (45)	0/10 (0)	0/8 (0)	5/34 (15)	0/30 (0)	1/19 (5)
P Values ^c ,d		N.S.	N.S.		N.S.
Relative Risk (Vehicle Control) ^f Lower Limit Upper Limit			Infinite 0.415 Infinite	 	Infinite 0.025 Infinite
Weeks to First Observed Tumor			80		45

⁺These tumors consist of adenocarcinoma, fibroadenoma, papillary adenocarcinoma, cystadenoma, or cystadenocarcinoma. The fibromas are omitted from this combination.

	Low-Dose	Mid- and High-Dose			
	Vehicle	Vehicle	Low	Mid	High
Topography: Morphology	Control	Control	Dose	Dose	Dose
Peritoneum: Sarcoma, NOS ^b (42)	0/10 (0)	0/8 (0)	0/35 (0)	0/30 (0)	5/22 (23)
P Values ^{c,d}		P = 0.010			N.S.
Relative Risk (Vehicle Control) ^f					Infinite
Lower Limit					0.533
Upper Limit					Infinite
Weeks to First Observed Tumor		- <u>-</u>	مته مي ••••••••••••••••••••••••••••••••••••	م ه ند. 	42
Peritoneum: Fibrosarcoma ^b (52)	0/10 (0)	0/8 (0)	0/34 (0)	2/29 (7)	0/14 (0)
P Values ^{c,d}		N.S.		N.S.	
Relative Risk (Vehicle Control) ^f				Infinite	
Lower Limit				0.093	
Upper Limit				Infinite	
Weeks to First Observed Tumor				58	

(continued)					
Topography: Morphology	Low-Dose Vehicle <u>Control</u>	Mid- and High-Dose Vehicle <u>Control</u>	Low Dose	Mid Dose	High Dose
Peritoneum: Mesothelioma ^b (43)	0/10 (0)	0/8 (0)	1/35 (3)	0/30 (0)	2/21 (10)
P Values ^{c,d}		N.S.	N.S.		N.S.
Relative Risk (Vehicle Control) ^f Lower Limit Upper Limit			Infinite 0.017 Infinite	 	Infinite 0.129 Infinite
Weeks to First Observed Tumor			46		43
Peritoneum: Sarcoma and Other Related Tumors ^b (34) ⁺	0/10 (0)	0/8 (0)	1/35 (3)	5/30 (17)	13/28 (46)
P Values ^{c,d}		P = 0.002	N.S.	N.S.	P = 0.016
Relative Risk (Matched Control) ^f Lower Limit Upper Limit			Infinite 0.017 Infinite	Infinite 0.390 Infinite	Infinite 1.339 Infinite
Weeks to First Observed Tumor			46	51	34

+These tumors consist of sarcoma, fibrosarcoma, or mesothelioma.

(continued)					
Topography: Morphology	Low-Dose Vehicle <u>Control</u>	Mid- and High-Dose Vehicle Control	Low Dose	Mid Dose	High Dose
Multiple Organs: Sarcoma, NOS ^b (34)	0/10 (0)	0/8 (0)	0/35 (0)	2/30 (7)	3/29 (10)
P Values ^{c,d}		N.S.		N.S.	N.S.
Relative Risk (Vehicle Control) ^f Lower Limit Upper Limit			 	Infinite 0.090 Infinite	Infinite 0.192 Infinite
Weeks to First Observed Tumor		***		51	34
Multiple Organs: Fibrosarcoma ^b (41)	0/10 (0)	0/8 (0)	0/35 (0)	2/30 (7)	1/25 (4)
P Valuesc,d		N.S.		N.S.	N.S.
Relative Risk (Vehicle Control) ^f Lower Limit Upper Limit				Infinite 0.090 Infinite	Infinite 0.019 Infinite
Weeks to First Observed Tumor				51	41

	<u></u>	Mid- and			
	Low-Dose	High-Dose			
	Vehicle	Vehicle	Low	Mid	High
Topography: Morphology	Control	Control	Dose	Dose	Dose
All Sites: Osteosarcoma ^b (52)	0/10 (0)	0/8 (0)	0/32 (0)	0/22 (0)	1/8 (13)
P Values ^{c,d}		N.S.			N.S.
Relative Risk (Matched Control) ^f					Infinite
Lower Limit					0.059
Upper Limit					Infinite
Weeks to First Observed Tumor					65
All Sites:					
Hemangiosarcoma ^b (52)	0/10 (0)	0/8 (0)	5/34 (15)	0/29 (0)	1/14 (7)
P Values ^{c,d}		N.S.	N.S.		N.S.
Relative Risk (Vehicle Control) ^f			Infinite		Infinite
Lower Limit			0.415		0.034
Upper Limit			Infinite		Infinite
Weeks to First Observed Tumor			70		80

(continued)

^aTreated groups received doses of 3.75, 7.5, or 15 mg/kg by intraperitoneal injection.

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

^CBeneath the incidence of tumors in the mid- and high-dose control group is the probability level for the Cochran-Armitage test when P < 0.05 using only the mid- and high-dose groups in the trend analysis; 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 its appropriate control group when P < 0.05; otherwise, not significant (N.S.) is indicated.

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 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 its appropriate control group.

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APPENDIX F

ANALYSES OF THE INCIDENCE OF PRIMARY TUMORS IN MICE

GIVEN INTRAPERITONEAL INJECTIONS

OF ACRONYCINE

	Low-Dose Vehicle	Low
Topography: Morphology	Control	Dose
Hematopoietic System: Lymphoma ^b (33)	13/17 (76)	10/37 (27)
P Values ^{c,d}		P < 0.001(N)
Relative Risk (Vehicle Control) ^e		0.353
Lower Limit		0.218
Upper Limit		0.687
Weeks to First Observed Tumor	33	89
Multiple Organs: Sarcoma, NOS ^b (52)	0/5 (0)	2/33 (6)
P Values ^{c,d}		N.S.
Relative Risk (Vehicle Control) ^e		Infinite
Lower Limit		0.057
Upper Limit		Infinite
Weeks to First Observed Tumor		81

(continued)

^aThe low-dose group received 2 mg/kg.

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

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

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

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

	Low-Dose	
	Vehicle	Low
Topography: Morphology	Control	Dose
Hematopoietic System: Lymphoma ^b (28)	19/19 (100)	6/37 (16)
P Values ^{c,d}		P < 0.001 (N)
Relative Risk (Vehicle Control) ^e		0.162
Lower Limit		0.000
Upper Limit		0.289
Weeks to First Observed Tumor	28	74
Multiple Organs: Sarcoma, NOS ^b (52)	0/2 (0)	2/31 (6)
P Values ^{c,d}		N.S.
Relative Risk (Vehicle Control) ^e		Infinite
Lower Limit		0.039
Upper Limit		Infinite
Weeks to First Observed Tumor		. 85

(continued)

^aThe low-dose group received 2 mg/kg.

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

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

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

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

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

March 7, 1978

The Clearinghouse on Environmental Carcinogens was established in May, 1976, in compliance with DHEW Committee Regulations and the Provisions of the Federal Advisory Committee Act. The purpose of the Clearinghouse is to advise the Director of the National Cancer Institute (NCI) on its bioassay program to identify and to evaluate chemical carcinogens in the environment to which humans may be 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 chemistry, biochemistry, biostatistics, toxicology, pathology, and epidemiology. Representatives of various Governmental agencies participate as ad hoc members. The Data Evaluation/Risk Assessment Subgroup of the Clearinghouse is charged with the responsibility of providing a peer review of reports prepared on NCI-sponsored bioassays of chemicals studied for carcinogenicity. It is in this context that the below critique is given on the bioassay of Acronycine for carcinogenicity.

The primary reviewer for the report on the bioassay of Acronycine described the experimental design and conditions under which Acronycine was tested. A dose-related incidence of osteosarcomas occurred in the high dose male rats; one osteosarcoma was observed among the treated females. Other tumors were reported in the peritoneal cavity in both sexes of treated rats. A statistically significant increase also was found in the incidence of mammary gland tumors in treated female rats. Although survival was inadequate to evaluate the carcinogenicity of Acronycine in mice, increases in lymphomas were observed among the treated animals. The primary criticism of the study was the use of excessively high dose levels. Since Acronycin is used as a chemotherapeutic agent, the primary reviewer said that it should receive special consideration in assessing human risk.

The secondary reviewer commented that Acronycine was probably carcinogenic, although he said the study was

deficient. Another Subgroup member agreed with the conclusion given in the report. However, he felt that the value of the study was diminished as a result of the excessively high dose levels administered and the fact that animals were housed in the same room in which other chemicals were under study.

A motion was made that the report on the bioassay of Acronycine be accepted as written. The motion was seconded and approved unanimously.

Members present were:

Gerald N. Wogan (Chairman), Massachusetts Institute of Technology
Arnold Brown, Mayo Clinic
E. Cuyler Hammond, American Cancer Society
Joseph Highland, Environmental Defense Fund
Henry Pitot, McArdle Laboratory
George Roush, Jr., Monsanto Company
Michael Shimkin, University of California at San Diego

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