National Cancer Institute CARCINOGENESIS Technical Report Series NO. 70 1979
BIOASSAY OF PARATHION
FOR POSSIBLE CARCINOGENICITY
CAS No. 56-38-2
NCI-CG-TR-70
U.S. DEPARTMENT OF HEALTH, EDUCATION, AND WELFARE Public Health Service National Institutes of Health

•

ı

BIOASSAY OF

PARATHION

FOR POSSIBLE CARCINOGENICITY

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

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

DHEW Publication No. (NIH) 79-1320

.

BIOASSAY OF PARATHION FOR POSSIBLE CARCINOGENICITY

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

FOREWORD: This report presents the results of the bioassay of parathion 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 environmental chemicals have the capacity to produce cancer in animals. Negative results, in which the test animals do not have a greater incidence of cancer than control animals, 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 The to man. actual determination of the risk to man from chemicals found to be carcinogenic in animals requires a wider analysis.

CONTRIBUTORS: This bioassay of parathion was conducted by Gulf South Research Institute, New Iberia, Louisiana, initially under direct contract to NCI and currently under a subcontract to Tracor Jitco, Inc., Rockville, Maryland, prime contractor for the NCI Carcinogenesis Testing Program.

The experimental design was determined by Drs. J. H. Weisburger (1,2) and R. R. Bates (1,3); the doses were selected by Drs. T. E. Shellenberger (4,5), J. H. Weisburger, and R. R. Bates. Administration of the chemical and observation of the animals were supervised by Drs. T. E. Shellenberger and H. P. Burchfield (4), with the technical assistance of Ms. D. H. Monceaux (4) and Mr. D. Broussard (4). Histopathology was performed by Dr. T. E. Murchison (6), and the diagnoses included in this report represent his interpretation.

Animal pathology tables and survival tables were compiled at EG&G Mason Research Institute (7). Statistical analyses were performed by Dr. J. R. Joiner (8) and Ms. P. L. Yong (8), using methods selected for the bioassay program by Dr. J. J. Gart (9). Chemicals used in this bioassay were analyzed under the direction of Dr. H. P. Burchfield, and the analytical results were reviewed by Dr. S. S. Olin (8).

This report was prepared at Tracor Jitco (8) under the direction of NCI. Those responsible for the report at Tracor Jitco were Dr. L. A. Campbell, Director of the Bioassay Program; Dr. S. S. Olin, Deputy Director for Science; Drs. J. F. Robens and C. H. Williams, toxicologists; Dr. R. L. Schueler, pathologist; Dr. G. L. Miller, Ms. Y. E. Presley, and Mr. W. D. Reichardt, technical writers; and Dr. E. W. Gunberg, technical editor, assisted by Ms. P. J. Graboske.

The following scientists at NCI (1) 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 (10), Dr. Richard A. Griesemer, Dr. Morton H. Levitt, Dr. Harry A. Milman, Dr. Thomas W. Orme, Dr. Robert A. Squire (11), Dr. Sherman F. Stinson, Dr. Jerrold M. Ward, and Dr. Carrie E. Whitmire.

- Carcinogenesis Testing Program, Divison of Cancer Cause and Prevention, National Cancer Institute, National Institutes of Health, Bethesda, Maryland.
- (2) Now with the Naylor Dana Institute for Disease Prevention, American Health Foundation, Hammond House Road, Valhalla, New York.
- (3) Now with the National Institute of Environmental Health Sciences, P.O. Box 12233, Research Triangle Park, North Carolina.
- (4) Gulf South Research Institute, Atchafalaya Basin Laboratories,P. O. Box 1177, New Iberia, Louisiana.
- (5) Now with the National Center for Toxicological Research, Jefferson, Arkansas.
- (6) Dawson Research Corporation, P.O. Box 8272, Orlando, Florida.

- (7) EG&G Mason Research Institute, 1530 East Jefferson Street, Rockville, Maryland.
- (8) Tracor Jitco, Inc., 1776 East Jefferson Street, Rockville, Maryland.
- (9) Mathematical 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.
- (10) Now with Clement Associates, Inc., 1010 Wisconsin Avenue, N.W., Suite 660, Washington, D. C.
- (11) Now with the Division of Comparative Medicine, Johns Hopkins University, School of Medicine, Traylor Building, Baltimore, Maryland.

SUMMARY

A bioassay for possible carcinogenicity of technical-grade parathion was conducted by administering the test chemical in the diet to Osborne-Mendel rats and B6C3F1 mice.

Groups of 50 rats of each sex were administered parathion at one of two doses for 80 weeks, then observed for 32 or 33 weeks. Time-weighted average doses for males were 32 or 63 ppm; for females, they were 23 or 45 ppm. All surviving rats were killed at 112 or 113 weeks. Groups of 50 mice of each sex were administered parathion at one of two doses, either 80 or 160 The low-dose males were administered parathion for 71 ppm. weeks; the high-dose males for 62 weeks; and the low- and The animals were then maintained high-dose females for 80 weeks. for observation and all surviving mice were killed at 89 or 90 weeks. Matched controls consisted of groups of 10 untreated rats or mice of each sex; pooled controls of rats or mice taken from similar bioassays of other test chemicals were also used.

Mean body weights of high-dose male and female rats and of highand low-dose male mice were generally lower than those of the matched controls during the period of administration of the chemical. Mean body weights of the other groups of dosed rats and mice did not differ appreciably from those of the matched controls. Since body weights and survival of the female mice were not affected, female mice may have been able to tolerate a higher dose. Sufficient numbers of male and female animals of both species were at risk for the development of late-appearing tumors.

In both male and female rats, the incidences of cortical adenomas or carcinomas of the adrenal showed dose-related trends (P less than 0.001) using pooled controls and, in direct comparisons, were higher in the high-dose groups (P less than 0.001) than in pooled controls 3/80, matched the pooled controls (males: controls 0/9, low-dose 7/49, high-dose 11/46; females: pooled controls 4/78, matched controls 1/10, low-dose 6/47, high-dose 13/42). Most of the tumors were adenomas. When the matched controls were used, dose-related trends in incidences of the adrenal tumors were significant (males, P = 0.048; females, P = 0.028); in direct comparisons, however, the incidences of the tumors in the individual groups did not differ significantly from those in corresponding matched controls. The incidences of the

tumors in the dosed male and female rats were higher than those in corresponding historical controls (males 8/148, females 5/180).

In mice, no tumors occurred in either sex at incidences that were significiantly higher in the dosed groups than in the corresponding control groups.

It is concluded that under the conditions of this bioassay, parathion was not carcinogenic to B6C3F1 mice. In the male and female Osborne-Mendel rats receiving parathion in their diet, there was a higher incidence of cortical tumors of the adrenal than in pooled or historical controls, suggesting that parathion is carcinogenic to this strain of rat.

TABLE OF CONTENTS

I.	Intro	duct	ion	1
II.	Mater	ials	and Methods	3
	A. B. C. D. E. F. G. H.	Diet Anin Anin Sube Chro Clin	nical tary Preparation mals nal Maintenance chronic Studies onic Studies nical and Pathologic Examinations a Recording and Statistical Analyses	3 5 5 7 9 12 14
III	Resu	lts ·	- Rats	21
	A. B. C. D.	Sur Patl	y Weights and Clinical Signs (Rats) vival (Rats) nology (Rats) tistical Analyses of Results (Rats)	21 23 25 26
IV.	Resu	lts ·	- Mice	31
	A. B. C. D.	Sur Patl	y Weights and Clinical Signs (Mice) vival (Mice) nology (Mice) tistical Analyses of Results (Mice)	31 33 35 35
v.	Disc	ussi	on	37
VI.	Bibl	iogra	aphy	41
			APPENDIXES	
Арре	endix ,	A	Summary of the Incidence of Neoplasms in Rats Fed Parathion in the Diet	43
Τŧ	able A	1	Summary of the Incidence of Neoplasms in Male Rats Fed Parathion in the Diet	45
Τĕ	able A	2	Summary of the Incidence of Neoplasms in Female Rats Fed Parathion in the Diet	49

Page

Page

.

Appendix B	Summary of the Incidence of Neoplasms in Mice Fed Parathion in the Diet	53
Table Bl	Summary of the Incidence of Neoplasms in Male Mice Fed Parathion in the Diet	55
Table B2	Summary of the Incidence of Neoplasms in Female Mice Fed Parathion in the Diet	58
Appendix C	Summary of the Incidence of Nonneoplastic Lesions in Rats Fed Parathion in the Diet	61
Table Cl	Summary of the Incidence of Nonneoplastic Lesions in Male Rats Fed Parathion in the Diet	63
Table C2	Summary of the Incidence of Nonneoplastic Lesions in Female Rats Fed Parathion in the Diet	67
Appendix D	Summary of the Incidence of Nonneoplastic Lesions in the Mice Fed Parathion in the Diet	71
Table Dl	Summary of the Incidence of Nonneoplastic Lesions in the Male Mice Fed Parathion in the Diet	73
Table D2	Summary of the Incidence of Nonneoplastic Lesions in Female Mice Fed Parathion in the Diet	75
Appendix E	Analyses of the Incidence of Primary Tumors in Rats Fed Parathion in the Diet	79
Table El	Analyses of the Incidence of Primary Tumors in Male Rats Fed Parathion in the Diet	81
Table E2	Analyses of the Incidence of Primary Tumors in Female Rats Fed Parathion in the Diet	85
Appendix F	Analyses of the Incidence of Primary Tumors in Mice Fed Parathion in the Diet	91

Table Fl	Analyses of the Incidence of Primary Tumors in Male Mice Fed Parathion in the Diet	93
Table F2	Analyses of the Incidence of Primary Tumors in Female Mice Fed Parathion in the Diet	96
Appendix G	Analysis of Formulated Diets for Concentrations of Parathion	99

.

TABLES

Table	1	Parathion Subchronic Feeding Studies in Rats and Mice	8
Table	2	Parathion Chronic Feeding Studies in Rats 1	0
Table	3	Parathion Chronic Feeding Studies in Mice 1	1

FIGURES

Figure	1	Growth Curves for Rats Fed Parathion in the Diet	22
Figure	2	Survival Curves for Rats Fed Parathion in the Diet	24
Figure	3	Growth Curves for Mice Fed Parathion in the Diet	32
Figure	4	Survival Curves for Mice Fed Parathion in the Diet	34

I. INTRODUCTION



Parathion

Parathion (CAS 56-38-2; NCI COO226) is an organophosphorus pesticide that is relatively nonpersistent in the environment, with high activity against insects and mites (Benke and Murphy, 1975; Hayes, 1975). It is highly toxic to mammals, because of its rapid metabolic conversion in the liver to paraoxon, its oxygen analog (Benke and Murphy, 1975; Hayes, 1975). Paraoxon is the active form that accounts for toxicological and pharmacological effects of parathion (Koelle, 1975).

Parathion is an inhibitor of cholinesterase, as shown by a marked decrease in the concentration of enzyme in the erythrocytes of Osborne-Mendel rats fed 5 or 25 ppm of the chemical in the diet (Frawley et al., 1952). Parathion has a high acute oral toxicity in Osborne-Mendel rats (LD_{50} : 30 mg/kg in males, 3 mg/kg in females).

Parathion is used as an insecticide and acaricide on a wide variety of fruit and nut trees, berries, vegetables, field crops, and ornamental plants. Tolerances have been established for residues of parathion on many food crops (EPA Compendium of Registered Pesticides, 1973).

Parathion was selected for study in the Carcinogenesis Testing Program because of its extensive use on food and feed crops.

II. MATERIALS AND METHODS

A. Chemical

Parathion, which is the generic name for 0,0-diethy1-0-4nitrophenylphosphorothioate, was obtained as a technical-grade material from the manufacturer, Monsanto Chemical Co., St. Louis, Missouri. According to the manufacturer, the purity of the lot used for the chronic studies (Lot No. AA1142) was 99.5%. The chemical was stored at 4[°]C in the original container until used.

The identity of the chemical was confirmed by analyses at Gulf South Research Institute (infrared, ultraviolet, and nuclear magnetic resonance spectra; isobutane chemical ionization mass spectrum). Gas-liquid chromatography showed a single homogeneous peak, consistent with the manufacturer's assay. Elemental analysis was consistent with $C_{10}H_{14}NO_5PS$, the molecular formula for parathion.

The term parathion is used in the remainder of the report to designate the technical-grade material.

B. Dietary Preparation

All diets containing parathion were formulated once per week using Wayne[®] Lab Blox animal meal (Allied Mills, Inc., Chicago, Ill.) to which was added the required amount of parathion for each dietary concentration. The test chemical was first dissolved in a small amount of acetone (Mallinckrodt, Inc., St. Louis, Mo.), which was then added to the feed. Corn oil (LouAna[®], Opelousas Refinery Co., Opelousas, La.) was also added to the feed at 2% of the final feed weight, primarily as a dust suppressant, and the diets were mixed mechanically in a Hobart blender to assure homogeneity of the mixtures and evaporation of the acetone. Diets for the control groups of animals also contained corn oil equal to 2% of the final weight of feed. The diets were stored at room temperature until used, but no longer than 1 week before use.

The stability of parathion in feed was tested by determining the concentration of the chemical in formulated diets at intervals over a 7-day period. Diets containing 80 or 160 ppm parathion showed no significant change in concentration on standing at ambient temperature for this period.

As a quality control test on the accuracy of preparation of the

diets, the concentration of parathion was determined in different batches of formulated diets during the chronic studies. The results are summarized in Appendix G. At each dietary concentration, the mean of the analytical concentrations for the checked samples was within 2.0% of the theoretical concentration, and the coefficient of variation was never more than 6.5%.

C. Animals

Rats and mice of each sex, obtained through contracts of the Division of Cancer Treatment, National Cancer Institute, were used in these bioassays. The rats were of the Osborne-Mendel strain obtained from Battelle Memorial Institute, Columbus, Ohio, and the mice were B6C3F1 hybrids obtained from Charles River Breeding Laboratories, Inc., Wilmington, Massachusetts. On arrival at the laboratory, all animals were quarantined (rats for 10 days, mice for 12 days), then assigned to control or dosed groups.

D. Animal Maintenance

All animals were housed in rooms in which the temperature ranged

from 22 to 24^oC, and the relative humidity from 40 to 70%. The air in each room was changed 10 to 12 times per hour. Fluorescent light provided illumination 10 hours per day. Food and water were provided ad libitum.

The rats were housed individually in hanging galvanized steel mesh cages, and the mice were housed in plastic cages with filter bonnets, five animals per cage for females, or two or three animals per cage for males. Initially, rats were transferred every week to clean cages; later in the study, cages were changed every 2 weeks. Absorbent sheets under the rat cages were changed three times per week. were provided with Mouse cages Absorb-dri[®] bedding (Lab Products, Inc., Garfield, N. J.), and the mice were transferred to clean cages every week. Feeder jars and water bottles were changed and sterilized three times per week.

Cages of control and dosed mice were placed on separate racks in the same room. Animal racks for both species were rotated laterally every week; at the same time, each cage was changed to a different position within the same column. Rats were housed in a room by themselves. Mice were maintained in the same room as mice in the following feed studies:

(CAS 60-51-5) dimethoate (CAS 13171-21-6) phosphamidon

E. Subchronic Studies

Subchronic feeding studies were conducted to estimate the maximum tolerated doses of parathion, on the basis of which two concentrations (hereinafter referred to as "low" and "high" doses) were determined for administration in the chronic studies. Groups of five rats and five mice of each sex were administered feed containing parathion at one of several doses, and groups of five animals of each sex and species were administered basal diet only. The dosed groups were fed the test diets for 6 weeks, followed by 2 weeks of observation.

Table 1 shows the doses used and the mean body weights of dosed animals at week 6 expressed as percentages of the mean weights of controls; it also shows the number of animals that died in each dosed group during the course of administration and the week on study when the last death occurred.

On the basis of these results, the initial low and high doses for the chronic studies were set at 40 and 80 ppm for male rats and

<u></u>	Male			Female			
	.	Mean Weight			Mean Weight		
		tality	at Week 6		tality	at Week 6	
Dose	Number	Week on	as % of	Number	Week on	as % of	
<u>(ppm)</u>	Dead	Study	<u>Control</u>	Dead	Study	<u>Control</u>	
RATS							
5			101			101	
10			96			96	
20			97			94	
40			97			99	
80			92	2	1	76	
160	2	2	80	5	2		
320	5	2		5	1		
MICE							
First St	udy						
5			102			121	
10			103			113	
20			99			116	
40			106			106	
80			94			104	
160			88			111	
Second S	Study						
160			86			100	
320	5	2		4	3	85	
640	5	2		5	2		
1,280	5	1		5	1		

Table 1. Parathion Subchronic Feeding Studies in Rats and Mice

20 and 40 ppm for female rats; the low and high doses were set at 80 and 160 ppm for male and female mice.

F. Chronic Studies

The test groups, doses administered, and durations of the chronic feeding studies are shown in tables 2 and 3.

Since the numbers of animals in the matched-control groups were small, pooled-control groups also were used for statistical comparisons. In rats, the matched controls from the current bioassay of parathion were combined with matched controls from bioassays of azinphosmethyl (CAS 86-50-0), captan (CAS 133-06-2), chloramben (CAS 133-90-4), chlordane (CAS 57-74-9), dimethoate, heptachlor (CAS 76-44-8), malathion (CAS 121-75-5), and picloram (CAS 1918-02-1). The pooled-control groups for statistical tests using rats consisted of 90 males and 90 females.

In mice, the matched controls from the current bioassay of parathion were combined with matched controls from bioassays of azinphosmethyl, chlordane, dieldrin (CAS 60-57-1), dimethoate, heptachlor, lindane (CAS 58-89-9), malathion, phosphamidon, photodieldrin (CAS 13366-73-9), and tetrachlorvinphos (CAS

Sex and Test Group	Initial No. of Animals(a)	Parathion in Diet(b) <u>(ppm)</u>	Time on Study Dosed Observed(c) (weeks) (weeks)	Time-Weighted Average Dose(b) (ppm)
Male				
Matched-Contro	1 10	0	112	
Low-Dose	50	40 30 0	13 67 32	32
High-Dose	50	80 60 0	13 67 32	63
Female				
Matched-Contro	1 10	0	112	
Low-Dose	50	20 30 20 0	13 21 46 32	23
High-Dose	50	40 60 40 0	13 21 46 32-33	45

Table 2. Parathion Chronic Feeding Studies in Rats

(a) Animals were 5 weeks of age when placed on study.

- (b) After 13 weeks, doses for males and females were made uniform for both sexes of rats. After 33 weeks, doses for females were lowered, due to generalized tremors among the high-dose females.
- (c) When diets containing parathion were discontinued, dosed rats and their matched controls were fed control diets without corn oil for 1 week, then control diets (2% corn oil added) for an additional 31 or 32 weeks.
- (d) Time-weighted average dose = $\sum (\text{dose in ppm x no. of weeks at that dose})$ $\Sigma (\text{no. of weeks receiving each dose})$

Sex and Test Group	Initial No. of Animals(a)	Parathion in Diet (ppm)	Time o Dosed (weeks)			
Male						
Matched-Control	10	0		90		
Low-Dose	50	80 0	71	18		
High-Dose	50	160 0	62	28		
Female						
Matched-Control	10	0		90		
Low-Dose	50	80 0	80	9		
High-Dose	50	160 0	80	10		

Table 3. Parathion Chronic Feeding Studies in Mice

(a) Animals were 5 weeks of age when placed on study.

(b) When diets containing parathion were discontinued, high-dose males received control diets without corn oil for 8 weeks, then control diets (2% corn oil added) for an additional 20 weeks. Low-dose males and all females received control diets until termination of the study. 961-11-5). The pooled-control groups for statistical tests using mice consisted of 140 males and 130 females.

The bioassays of the test chemicals other than parathion were also conducted at Gulf South Research Institute, and the pooled controls used for statistical evaluation were started no more than 3 months apart from the matched controls of parathion. The matched-control groups of rats and mice for the different test chemicals that were used in the pool were of the same strain and obtained from the same supplier; they were diagnosed by different pathologists but the diagnoses were reviewed by NCI pathologists.

G. Clinical and Pathologic Examinations

All animals were observed twice per day. Animals were weighed at approximately every 2 weeks for the first 3 months, then monthly thereafter, and palpated for masses at each weighing. Moribund animals and animals that survived to the end of the bioassay were killed using ether and necropsied. Necropsies were also performed on all animals found dead, unless precluded by autolysis or severe cannibalization.

The pathologic evaluation consisted of gross and microscopic examination of major tissues, major organs, and all gross lesions. The tissues were preserved in 10% buffered formalin, embedded in paraffin, sectioned, and stained with hematoxylin and The following tissues were examined microscopically: eosin. skin, lungs and bronchi, trachea, bone and bone marrow, spleen, lymph nodes, heart, salivary gland, liver, gallbladder (mice), pancreas, stomach, small intestine, large intestine, kidney, urinary bladder, pituitary, adrenal, thyroid, parathyroid, mammary gland, prostate or uterus, testis or ovary, and brain. Occasionally, additional tissues were also examined microscopically. 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 may have died early, been missing, or been in advanced states of cannibalization or autolysis. 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 appropriate 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 However, was examined histologically. when macroscopic examination was required to detect lesions prior to histologic sampling (e.g., skin or mammary tumors), or when lesions could have appeared at multiple sites (e.g., lymphomas), the denominators consist of the numbers of animals necropsied.

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

dose level. When results for a number of dosed groups (k) are compared simultaneously with those for a control group, a correction to ensure an overall significance level of 0.05 may be made. The Bonferroni inequality (Miller, 1966) requires that the P value for any comparison be less than or equal to 0.05/k. In cases where this correction was used, it is discussed in the 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 one-tailed 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, upless 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, less than two-tailed test) were also noted.

The approximate 95 percent confidence interval for the relative risk of each dosed 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 dosed group of animals and p_c is the true probability of the spontaneous incidence of the same type of tumor in a control group. The hypothesis of equality between the true proportion of a specific tumor in a dosed group and the proportion in a control group corresponds to a relative risk of unity. Values in excess of unity represent the condition of a larger proportion in the dosed group than in the control.

The lower and upper limits of the confidence interval of the relative risk have been included in the tables of statistical analyses. The interpretation of the limits is that in approximately 95% of a large number of identical experiments, the true ratio of the risk in a dosed group of animals to that in a control group would be within the interval calculated from the experiment. When the lower limit of the confidence interval is greater than one, it can be inferred that a statistically significant result (P less than 0.025 one-tailed test when the control incidence is not zero, P less than 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 lowerlimit 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. RESULTS - RATS

A. Body Weights and Clinical Signs (Rats)

Mean body weights of high-dose male and high-dose female rats were generally lower than those of the matched controls during the period of administration of the chemical, particularly for females during weeks 14 through 35, at which time the dose was increased. After administration was discontinued, the mean body weights of dosed and control animals were more nearly comparable (figure 1). Fluctuation in the growth curve may be due to mortality; as the size of a group diminishes, the mean body weight may be subject to variation.

During the first 6 months of the bioassay, the dosed animals were generally comparable to the controls in appearance and behavior. One high-dose male and two high-dose females had body tremors during this period. During the second 6 months, 1/50 high-dose males, 1/50 low-dose females, and 25/50 high-dose females had generalized body tremors. During this same period, 1/50 highdose males, 1/50 low-dose females, and 5/50 high-dose females had diarrhea. At week 32, a few animals in both control and dosed groups developed exophthalmos and corneal opacity, accompanied in



Figure 1. Growth Curves for Rats Fed Parathion in the Diet
some cases by thickening of the palpebral conjunctival membranes. This was diagnosed as viral conjunctivitis by the pathologists at the laboratory.

During the first half of the second year, clinical signs among the dosed animals were noted at a low or moderate incidence, and during the second half of the year they increased. These signs were characteristic of aging, but also included hyperactivity and hyperexcitability generally associated with organophosphorus pesticide exposure.

B. Survival (Rats)

The Kaplan and Meier curves estimating the probabilities of survival for male and female rats fed parathion in the diet at the doses of this bioassay, together with those of the matched controls, are shown in figure 2. The results of the Tarone test for positive dose-related trend in mortality over the bioassay are not significant in either sex.

In male rats, 36/50 (72%) of the high-dose group, 31/50 (62%) of the low-dose group, and 7/10 (70%) of the matched controls lived to the end of the study. In female rats, 34/50 (68%) of the



Figure 2. Survival Curves For Rats Fed Parathion In The Diet

high-dose group, 36/50 (72%) of the low-dose group, and 7/10 (70%) of the matched controls lived to the end of the study. Sufficient numbers of animals in dosed and control groups were at risk for the development of late-appearing tumors.

C. Pathology (Rats)

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

The variety of neoplasms represented among both dosed and control rats was not unusual, with the exception of a pituitary tumor in one low-dose male rat. This was a solitary tumor that consisted of an area of solid adenoma, as commonly encountered in laboratory rats, and a second component that was made up of small, rounded glandular spaces lined by a single layer of mucin-secreting cells somewhat suggestive of goblet cells. Whether these areas represented two independent tumors of the pituitary or a mixed tumor or adenoma of the pituitary is uncertain. Each of the other types of tumors represented has been encountered previously as a spontaneous lesion in the Osborne-Mendel rat.

The incidence of adrenal cortical adenomas and carcinomas was increased in high-dose male (11/46) and female (13/42) rats, as compared with matched controls (male 1/9, female 0/10). However, since the number of matched-control rats was small, this finding could not necessarily be attributed to administration of the chemical.

A variety of nonneoplastic lesions were represented among both control and dosed animals. Such lesions have been encountered previously as spontaneous occurrences in laboratory rats and are considered as such in these animals.

Based on the pathologic examination, parathion did not appear to be carcinogenic in Osborne-Mendel rats under the conditions of this bioassay.

D. Statistical Analyses of Results (Rats)

Tables El and E2 in Appendix E contain the statistical analyses of the incidences of those primary tumors that occurred in at least two animals of one group and at an incidence of at least 5% in one or more than one group.

In male rats, the result of the Cochran-Armitage test on the incidence of animals with cortical adenomas or carcinomas of the adrenal significant (P less than 0.001) is when the pooled-control group is used, and the results of the Fisher exact show incidence in the high-dose group test that the is significantly higher (P less than 0.001) than that in the pooled-control group. The Fisher exact comparison of incidences in the low-dose and pooled-control groups indicates a probability level of 0.035, which is above the 0.025 level required by the Bonferroni inequality criterion when multiple comparison is considered. The adenomas were the principal lesions contributing the significance of the combined neoplasms. When the to incidences of cortical adenomas alone are tested, the results of the statistical tests are P = 0.001 in the Cochran-Armitage test using the pooled-control group and P = 0.002 in the Fisher exact test between the high-dose group and the pooled controls. In females, the Cochran-Armitage probability levels for the incidence of adrenal cortical adenomas or carcinomas are P less than 0.001 and P = 0.028, respectively, when the pooled and matched controls are used. The results of the Fisher exact test show that the incidence in the high-dose female rats is significantly higher (P less than 0.001) than that in the pooled Historical records of the Carcinogenesis Testing controls. Program at this laboratory indicate that in the male rats,

cortical adenomas, cortical carcinomas, or adenomas, NOS, were observed in 8/178 (4.5%) of the controls. In female rats there were 5/180 (2.7%) cortical adenomas or adenomas, NOS, of the adrenal.

In male rats, the result of the Cochran-Armitage test for dose-related trend in the incidence of islet-cell carcinomas of the pancreas shows a significant dose-related trend (P = 0.024) when the pooled-control group is used, but the results of the Fisher exact test for comparison of the incidences of tumors in the high-dose and pooled-control groups indicate a probability level of 0.048, which is above the 0.025 level required by the Bonferroni inequality criterion when multiple comparison is considered. The results of the tests using the matched controls are not significant.

In female rats, the Cochran-Armitage test for dose-related trend in the incidence of fibroadenomas of the mammary gland is not significant, but an indicated departure from linear trend is observed (P = 0.004) when the pooled-control group is used, since the incidence in the low-dose group is higher than that in the high-dose group. The results of the Fisher exact test show that the incidence in the low-dose group is significantly higher than that in the pooled controls (P = 0.002); however, this positive

result is not confirmed by the incidence in the high-dose group. The matched controls have an incidence of 2/10 (20%) compared with 8/50 (16%) in the high-dose group, and the results of the tests using the matched controls are not significant.

In male rats, the result of the Cochran-Armitage test for dose-related trend in the incidence of follicular-cell adenoma of the thyroid is significant (P = 0.037) when the pooled-control group is used. The Fisher exact comparison of incidences in the high-dose and pooled-control groups indicates a P value of 0.046, which is above the 0.025 level required for significance when the Bonferroni inequality criterion is used for multiple comparison. The Fisher exact comparison between the low-dose and the matched-control groups indicates a P value of 0.035 in the negative direction.

In summary, the incidence of the adrenal tumors in male and female rats may be associated with the administration of parathion.

IV. RESULTS - MICE

A. Body Weights and Clinical Signs (Mice)

Mean body weights of the dosed male mice were lower than those of the controls during the period of administration of the chemical, but were comparable when administration was discontinued (figure 3). Fluctuation in the growth curve may be due to mortality; as the size of a group diminishes, the mean body weight may be subject to variation. Mean body weights of dosed females were unaffected by the parathion when compared with controls.

During the first year of the bioassay, the dosed animals were generally comparable to the controls in appearance and behavior. Wounds from fighting were noted on the mice during the second half of the first year and continuing until termination of the bioassay.

Clinical signs in both male and female animals of the dosed groups noted with increasing frequency during the second year of the bioassay included tremors and alopecia; abdominal distention was noted in all dosed males, and most dosed females. Rough hair coats were observed beginning at week 52 in the low-dose male



Figure 3. Growth Curves For Mice Fed Parathion In The Diet

group and at week 75 in the high-dose male group. All low-dose males had diarrhea by week 64 and all high-dose males were showing signs of hyperexcitability by week 60.

B. Survival (Mice)

The Kaplan and Meier curves estimating the probabilities of survival for male and female mice fed parathion in the diet at the doses of this bioassay, together with those of the matched controls, are shown in figure 4. In male mice, the result of the Tarone test shows a positive dose-related trend in mortality (P =0.029) over the bioassay. In female mice, the result of the Tarone test does not show any significant dose-related trend in mortality; in fact, the controls showed a lower survival than the dosed groups.

There were 40/50 (80%) of the high-dose males, 46/50 (92%) of the low-dose males, and all 10 of the matched controls still alive at week 89. Forty-six out of 50 (92%) of the high-dose females, 46/50 (92%) of the low-dose females, and 8/10 (80%) of the matched controls were still alive at week 89. Sufficient numbers of animals in dosed and control groups were at risk for the development of late-appearing tumors.



Figure 4. Survival Curves For Mice Fed Parathion In The Diet

C. Pathology (Mice)

Histopathologic findings on neoplasms in mice are summarized in Appendix B, tables Bl and B2; findings on nonneoplastic lesions are summarized in Appendix D, tables Dl and D2.

A variety of neoplastic and nonneoplastic lesions are represented among both control and dosed animals. Both neoplastic and nonneoplastic lesions are judged to be distributed without any relationship to administration of the chemical.

Based on the pathologic examination, parathion was not carcinogenic in B6C3F1 mice under the conditions of this bioassay.

D. Statistical Analyses of Results (Mice)

Tables Fl and F2 in Appendix F contain the statistical analyses of the incidences of those primary tumors that occurred in at least two animals of one group and at an incidence of at least 5% in one or more than one group. In mice, the incidences of tumors at any site cannot be related in a positive direction to administration of the chemical. Significant results in the

negative trend are observed in the incidence of hepatocellular carcinoma in male mice when the pooled-control group is used.

In each of the 95% confidence intervals for relative risk, shown in the tables, the value of one or less than one is included; this indicates the absence of significant positive results. It should also be noted that each of the intervals (except that for the incidence of hepatocellular carcinoma in the high-dose and pooled-control groups of male mice) has an upper limit greater than one, indicating the theoretical possibility of the induction of tumors by parathion, which could not be detected under the conditions of this test.

V. DISCUSSION

Parathion was toxic to both rats and mice at the doses administered in this bioassay, as shown by decreased mean body weights of the dosed male and female rats and male mice, and by the presence of such clinical signs as tremors, hyperactivity, and hyperexcitability associated with intoxication by parathion and other cholinesterase inhibitors (Radeleff, 1970). Since mean body weights and survival of the female mice were not affected, female mice may have been able to tolerate a higher dose. Sufficient numbers of male and female animals of both species were at risk for the possible development of late-appearing tumors.

In both male and female rats, the incidences of cortical adenomas or carcinomas of the adrenal showed dose-related trends (P less than 0.001) using pooled controls and, in direct comparisons, were higher in the high-dose groups (P less than 0.001) than in the pooled controls (males: pooled controls 3/80, matched controls 0/9, low-dose 4/49, high-dose 11/46; females: pooled controls 3/80, matched controls 0/9, low-dose 6/47, high-dose 13/42). The principle contribution to the significance of these tumors is made by the incidence of adenomas. When the matched

controls were used, dose-related trends in incidences of the tumors were significant (males, P = 0.048; females, P = 0.028); in direct comparisons, however, the incidences of the tumors in the individual dosed groups did not differ significantly from those in corresponding matched controls. The incidences of the tumors in the dosed male and female rats were higher than those in corresponding historical controls (males 8/148, females 5/180).

Because of the statistical significance of the comparison of the incidence of adrenal tumors in dosed animals with that of pooled controls and the relatively low incidences observed among historical controls (even taking into account group variation), it is considered that the incidence of adrenal tumors in male and female rats may be associated with the administration of parathion.

In mice, no tumors occurred in either sex at incidences that were significantly higher in the dosed groups than in the corresponding control groups.

Chronic toxicity of parathion has previously been investigated in rats by Hazleton and Holland (1950), by Barnes and Denz (1951), and by the Food and Drug Administration (Lehman, 1965). In the Hazleton and Holland study, male albino rats were administered 0,

10, 25, 50, or 100 ppm of parathion in the diet for 2 years, and females albino rats were given 0, 10, or 50 ppm for 64 weeks or 100 ppm for an unstated period. At 100 ppm, peripheral tremors and irritability were noted in the males, but only for the first several weeks; females were more susceptible than the males at this dose. No neoplasms were reported in the tissues examined, which included the liver and adrenal gland. Barnes and Denz (1951) fed parathion in the diet for periods of up to 1 year to male and female albino rats at 10, 20, 50, 75, or 100 ppm. Typical cholinergic signs were observed in the groups receiving 50, 75, or 100 ppm. Survival was low at 50 ppm and above, but was high at 10 and 20 ppm, with no toxic signs observed. Lesions of the submaxillary gland and the pancreas and hypoplasia of the spleen and thymus, associated with acute poisoning in other studies by these authors, were found in animals dosed with 50 or 75 ppm but not in those dosed with 10 or 20 ppm. No neoplasms were reported. In the work carried out at the FDA (Lehman, 1965), male and female rats were fed parathion in the diet for 2 years at concentrations of 2, 5, 10, 25, 50, or 100 ppm. There was no significant effect on mortality, no histologic changes attributable to the administration of parathion were noted, and the incidence of tumors was not increased in the dosed animals.

It is concluded that under the conditions of this bioassay,

parathion was not carcinogenic to B6C3F1 mice. In the male and female Osborne-Mendel rats receiving parathion in their diet, there was a higher incidence of cortical tumors of the adrenal than in pooled or historical controls, suggesting that parathion is carcinogenic to this strain of rat.

.

VI. BIBLIOGRAPHY

Armitage, P., <u>Statistical Methods</u> in <u>Medical Research</u>, John Wiley & Sons, Inc., New York, 1971, pp. 362-365.

Barnes, J. M. and Denz, F. A., The chronic toxicity of p-nitrophenyl diethyl thiophosphate (E. 605). <u>J. Hygiene</u> 49:430-441, 1951.

Benke, G. M. and Murphy, S. D., The influence of age on the toxicity and metabolism of methyl parathion and parathion in male and female rats. Toxicol. Appl. Pharmacol. 31:254-269, 1975.

Berenblum, I., ed., <u>Carcinogenicity Testing: A Report of the</u> <u>Panel on Carcinogenicity of the Cancer Research Commission of</u> <u>the UICC, Vol. 2</u>. International Union Against Cancer, Geneva, 1969.

Cox, D. R., Regression models and life tables. J. R. Statist. Soc. B 34 (2):187-220, 1972.

Cox, D. R. <u>Analysis of Binary Data</u>, Methuen and Co., Ltd., London, 1970, pp. 48-52.

Environmental Protection Agency, <u>EPA</u> <u>Compendium of Registered</u> <u>Pesticides</u>, U.S. Government Printing Office, Washington, D.C., 1973, III-P-2.1-2.164.

Frawley, J. P., Hagan, E. C., and Fitzhugh, O. G., A comparative pharmacological and toxicological study of organic phosphate – anticholinesterase compounds. In: <u>The Journal of Pharmacology</u> <u>and Experimental Therapeutics</u>, <u>Vol.</u> <u>152</u>, van Dyke, H. B., ed., <u>American Society for Pharmacology</u> and Experimental Therapeutics Incorporated, Baltimore, Md., 1952, pp. 156-165.

Gart, J. J. The comparison of proportions: a review of significance tests, confidence limits and adjustments for stratificaton. Rev. Int. Statist. Inst. 39 (2):148-169, 1971.

Hayes, W. J., Jr., Factors influencing toxicity. In: <u>Toxicology</u> of <u>Pesticides</u>, Williams and Wilkins Co., Baltimore, Md., 1975, pp. 69 and 88. Hazleton, L. W. and Holland, E. G., Pharmacology and toxicology of parathion. In: <u>Agricultural</u> <u>Control</u> <u>Chemicals</u>, American Chemical Society, Washington, D. C., 1950, pp. 31-38.

Kaplan, E. L. and Meier, P., Nonparametric estimation from incomplete observations. J. Amer. Statist. Assoc. 53:457-481, 1958.

Koelle, G. B., Anticholinesterase agents. In: <u>The</u> <u>Pharmacological Basis of Therapeutics</u>, 5th edition, Goodman, L. S. and Gilman A., eds., Macmillan Publishing Co., Inc., New York, 1975, pp. 445-466.

Lehman, A. J., Cholinesterase inhibitors. In: <u>Summaries</u> of <u>Pesticide</u> <u>Toxicity</u>, Food and Drug Administration, Department of Health, Education, and Welfare, Washington, D. C., 1965, pp. 58-60.

Linhart, M. S., Cooper, J. A., Martin, R. L., Page, N. P., and Peters, J. A., Carcinogenesis bioassay data system. <u>Comp.</u> and Biomed. Res. 7:230-248, 1974.

Miller, R. G., Jr., <u>Simultaneous</u> <u>Statistical</u> <u>Inference</u>, McGraw-Hill Book Co., New York, 1966, pp. 6-10.

Radeleff, R. D., Parathion. In: <u>Veterinary</u> <u>Toxicology</u>, 2nd edition, Lea and Febiger, Philadelphia, Pa., 1970, pp. 228-229.

Saffiotti, U., Montesano, R., Sellakumar, A. R., Cefis, F. and Kaufman, D. G., Respiratory tract carcinogenesis in hamsters induced by different numbers of administrations of benzo (a) pyrene and ferric oxide. Cancer Res. 32:1073-1081, 1972.

Tarone, R. E., Tests for trend in life table analysis. Biometrika 62 (3):679-682, 1975. APPENDIX A

SUMMARY OF THE INCIDENCE OF NEOPLASMS IN

RATS FED PARATHION IN THE DIET

TABLE A1.

SUMMARY OF THE INCIDENCE OF NEOPLASMS IN MALE RATS FED PARATHION IN THE DIET

	CONTROL	LOW DOSE	HIGH DOSE
ANIMAIS INITIALLY IN STUDY ANIMALS NECROPSIED ANIMALS EXAMINED HISTOFATHOLOGICALLY	1C 1C 10 10	50 50 50 50	50 49 49
NTEGUMENTARY SYSTEM			
*SKIN KERATCACANTHOMA FIBRCMA FIEROSARCOMA	(10)	(50) 1 (2%) 1 (2%) 1 (2%)	(49) 1 (2%)
*SUECUT TISSUE SARCOMA, NOS FIBROSARCOMA	(10)	(50) 2 (4%)	(49) 1 (2%) 1 (2%)
RESPIFATORY SYSTEM			
*LUNG ALVEOLAR/BRONCHIOLAR ADENOMA ALVEOLAR/BRONCHIOLAR CARCINOMA CORTICAL CARCINOMA, METASTATIC	(10)	(50) 1 (2%) 1 (2%)	(48) 1 (2 %)
IEMATOPOIETIC SYSTEM			
*MULTIPLE CRGANS MALIG.LYMPHOMA, UNCIFFER-TYPE	(10)	(50) 1 (2%)	(49)
*SFLEEN FIBROSARCOMA HAMARTOMA	(10)	(50)	(47) 2 (4%) 1 (2%)
#LYMPH NODE HEMANGIOSARCOMA	(9)	(39) •1 (3%)	(34)
# MESENTERIC L. NODE HEMANGIOSARCOMA	(9)	(39) 1 (3%)	(34)
*FENCRAL LYMPH NODE <u>SARCCMA, NOS, METASTATIC</u>	(9)	(39)	(34)

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

	CONTROL	LOW DOSE	HIGH DOSE
CIRCULATORY SYSTEM			
#HEAST FIBRCSARCOMA, MFTASTATIC	(10)	(50)	(48) 1 (2 %)
DIGESTIVE SYSTEM			
#SALIVARY GIAND HEMANGIOSARCCMA	(9)	(48)	(44) 1 (2%)
<pre>#LIVER NECFLASTIC NODULE HEPATOCELLULAR CARCINOMA</pre>	(10)	(50)	(49) 3 (6%) 1 (2%)
URINAFY SYSTEM			
NC N E			
ENCCRINE SYSTEM			
#FITUITARY ADENOMA, NOS MIXED TUMOR, BENIGN	(9) 4 (44%)	(42) 10 (24%) 1 (2%)	(43) 13 (30 %
#ADRENAL CORTICAL ADENOMA CORTICAL CARCINOMA FHECCHROMOCYTOMA	(9)	(49) 5 (10%) 2 (4%)	(46) 9 (20% 2 (4%) 2 (4%)
#THYRCID FOLLICULAR-CEIL ADENOMA C-CELL CARCINCMA	(10) 3 (30%)	(46) 2 (4%) 1 (2%)	(43) 8 (19 % 1 (2%)
#FARATHYROID Adenoma, Nos	(5) 1 (20%)	(34)	(29)
#FANCREATIC ISLETS ISLET-CELL CARCINOMA	(9)	(49) 1 (2%)	(46) 3 (7 %)
REPRCEUCTIVE SYSTEM			
*MAMMARY GLAND FIBROMA	(10)	(50) 2 (4 %)	(49)

TABLE A1. MALE BATS: NEOPLASMS (CONTINUED)

NUMEER OF ANIMALS WITH TISSUE EXAMINED MICBOSCOPICALLY * NUMEER OF ANIMALS NECROPSIED

	CONTROL	LOW DOSE	HIGH DOSE
NERVCUS SYSTEM			
NONE			
SFECIAL SENSE ORGANS			
NCNE			
MUSCULCSKELETAL SYSTEM			
*SKELETAL MUSCLE SARCCMA, NOS	(10)	(50)	(49) 1 (2%)
BCCY CAVITIES			
NCNE		~~ _ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~	
ALL CTHER SYSTEMS			
NCNE			
ANIMAL DISFESITION SUMMARY			
ANIMALS INITIALLY IN STUDY	10	50	50
NATURAL CEATHD	2	9 10	6 8
MORIBUND SACRIFICE Scheduled Sacrifice	3	10	o
ACCIDENTALLY KILLED	_		
TERMINAL SACRIFICE Animal missing	7	31	36
@_INCLUDES_AUTCLYZED_ANIMALS			مرور می کا دو کر دو د
* NUMBER OF ANIMALS WITH TISSUE EXAMINE	D MICROSCOPICAL	L Y	

TABLE A1. MALE RATS: NEOPLASMS (CONTINUED)

* NUMBER OF ANIMALS NECROPSIED

	CONTROL	LOW DOSE	HIGH DOSE		
TUPCE SUMMARY					
TOTAL ANIMALS WITH PFIMARY TUMORS* TCTAL PPIMARY TUMOFS	5 8	25 33	34 51		
TCTAL ANIMALS WITH BENIGN TUMORS TCTAL BENICN TUMORS	5 8	17 23	26 33		
TOTAL ANIMALS WITH MALIGNANT TUMORS TCTAL MALIGNANT TUMORS		9 10	15 15		
TOTAL ANIMALS WITH SECONDARY TUMOPS* TOTAL SECONDARY TUMORS		1 1	2 2		
TOTAL ANIMALS WITH TUMORS UNCERTAIN- EENIGN OR MALIGNANT TCTAL UNCERTAIN TUMORS			3 3		
TCTAL ANIMALS WITH TUMORS UNCERTAIN- FFIMARY OF METASTATIC TCTAL UNCERTAIN TUMORS					
* FRIMARY TUMORS: ALL TUMORS EXCEPT SEC # SECCNDARY TUMORS: METASTATIC TUMORS C			CJACENT ORGAN		

TABLE A1. MALE RATS: NEOPLASMS (CONTINUED)

TABLE A2.

SUMMARY OF THE INCIDENCE OF NEOPLASMS IN FEMALE RATS FED PARATHION IN THE DIET

	CONTROL	LOW DOSE	HIGH DOSE	
ANIMAIS INITIALLY IN STUDY ANIMALS NECROPSIED ANIMALS IXAMINED HISTOFATHOLOGICALLY	10 10 10	50 50 50	50 50 49	
INTIGUMENTARY SYSTEM				
*SKIN NEOPLASM, NOS, MALIGNANT	(10)	(50)	(50) 1 (2%)	
*SUPCUT TISSUE C-CELL CARCINOMA, METASTATIC	(10)	(50)	(50) 1 (2%)	
RISPIRATORY SYSTEM				
<pre>#IUNG ALVEOLAR/BRONCHIOLAR ADENOMA C-CELL CARCINOMA, METASTATIC</pre>	(10) 1 (10%)		(47) 1 (2%) 1 (2%)	
HEMATOPOIETIC SYSTEM				
*MUITIFLE CRGANS LYMPHOCYTIC LEUKEMIA	(10)	(50)	(50) 1 (2%)	
*SPIEEN Sarcema, Nos	(10)	(50)	(49) 1 (2%)	
#IYFEH NCDE Hemangioma	(10) 1 (10%)	(41) 1 (2%)	(41)	
*CEPVICAL LYMPH NODE C-CELL CARCINOMA, METASTATIC	(10) 1 (10%)	(41)	(41)	
CIRCULATORY SYSTEM				
NCNE				
DICESTIVE SYSTEM				
#LIVER HEPATOCEILULAR_ACENONA	(10)	(49)	(48)	
# NUMBER OF ANIMALS WITH TISSUE EXAMIN * NUMBER OF ANIMALS NECROPSIED	NED MICROSCOPIO	CALLY		

	CONTROL		LOW D	OS₽	HIGH	DOSE
NEOPLASTIC NODULE			1	(2%)	2	(4%)
*BILL DUCT BILL DUCT ADLNOMA	(16) 1 (10	ž)	(50)		(50)	
UNINARY SYSTEM						
#KIDNLY † HAHARIOMA	(10) 1 (10)%)	(48)		(48)	
ENUJCRINE SYSPEM						
#PITUITARY ADENJMA, NOS	(8) 2 (25	5%)	(38) 11	(29%)	(39) 13	(33%)
★ADRENAL CORTICAL ADENOMA CORTICAL CARCINOMA C-CELL CANCINOMA, MELASTATIC PHLOCHROMOCYTOMA, MALIGNANT	(10) 1 (10 1 (10			(9%) (4%)	2	(26%) (5%) (2%)
#THYROID FOLLICULAR-CELL ADLNOMA C-CELL CARCINOMA	(10) 1 (10 2 (20)%)		(9%) (4%)		(2%) (7%)
#PANCFEATIC ISLETS ISLET-CELL ADENOMA ISLET-CELL CARCINOMA	(10) 1 (10)%)	(48)	(2%)	(49) 1	(2%)
REFRUDUCTIVE SYSTEM						
*HAMMARY GIAND ADENOMA, NOS PAPILLARY ADENOCARCINOMA FIBROMA	(10) 1 (10)%)	1	(2%) (2%) (2%)	(50)	(2%)
FIBROADLNOMA	2 (20)%)		(32%)	8	(16%)
#UFERUS ADENOCA IN ADENOMATOUS POLYP ENDOMETHIAL STROMAL POLYP	(10) 1 (10			(2%) (8%)	(45) 5	(11%)
*OVARY CYSIADENUCARCINOMA, NOS	(10)		(45)		(45)	(2%)

TABLE A2. FEMALE RATS: NEOPLASMS (CONTINUED)

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

† This is considered to be a benign form of the malignant mixed tumor of the kidney and consists of lipocytes, tubular structures, and fibroblasts in varying proportions.

	CONTROL	LOW DOSE	HIGH DO
NIFVCUS SYSTEM			
NCNE			
SPECIAL SENSE ORGANS			
NCNE			
NUSCULCSKELETAL SYSTEM			
NCNE			
BCTY CAVITIES			
*FEFITGNEUM FIBROUS HISTICCYTOMA, MALIGNANT	(1)	(50) 1 (2%)	(50)
ALL CIHFF SYSTEMS			
*YULTIPLE CRGANS FIBRCUS HISTICCYTOMA, MALIGNANT		(50) 1 (2%)	(50)
ANIMAL DISECSITION SUMMARY			
ANIMALS INITIALLY IN STUDY Natupal ceathd	10	50 2	50 5
MCRIBUND SACRIFICF Scheduled Sacrificf	3	12	11
ACCIDENTALLY KILLED TERMINAL SACRIPICF ANIMAL MISSING	7	36	34

TABLE A2. FEMALE RATS: NEOPLASMS (CONTINUED)

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

	CONTROL	LOW DOSE	HIGH DOSE
	~~~~~~		
UFCF SUMMAFY			
TOTAL ANIMALS WITH FRIMARY TUMORS*	10	34	32
TOTAL PRIMARY TUMORS	15	54	53
TCTAL ANIMALS WITH BENIGN TUMORS	8	31	25
TOTAL EFNIGN TUMORS	12	44	42
TOTAL ANIMALS WITH MALIGNANT TUMORS	3	9	8
TCTAL MALIGNANT TUMORS	3	9	9
ICTAL ANIMALS WITH SECONDARY TUMORS#	1		1
TOTAL SECONDARY TUMORS	2		3
TOTAL ANIMALS WITH TUMORS UNCERTAIN-			
EENIGN OR MALIGNANT		1	2
TCTAL UNCERTAIN TUMORS		1	2
TOTAL ANIMALS WITH TUMORS UNCERTAIN-			
FFIMARY OR METASTATIC			
ICTAL UNCERTAIN TUMORS			
FRIMARY TUMORS: ALL TUMORS EXCEPT SEC SECONDARY TUMORS: METASTATIC TUMORS O			

# TABLE A2. FEMALE RATS: NEOPLASMS (CONTINUED)

APPENDIX B

## SUMMARY OF THE INCIDENCE OF NEOPLASMS IN

MICE FED PARATHION IN THE DIET

### TABLE B1.

## SUMMARY OF THE INCIDENCE OF NEOPLASMS IN MALE MICE FED PARATHION IN THE DIET

	CONTROL	LOW DOSE	HIGH DOSE
ANIMAIS INITIAILY IN STUDY ANIMAIS NECHCESIED ANIMAIS EXAMINED HISTOFATHOLOGICALLY	10 10 10	50 49 49	50 49 48
INTEGUMENTARY SYSTEM			
*SKIN MALIGNANT MELANOMA	(10)	(49) 1 (2%)	(49)
*SUECUT TISSUE FIEROSARCCMA	(10)	(49) 1 (2%)	(49)
RESPIFATORY SYSTEM			
*IUNG ALVECLAK/BRONCHIGLAP ADENOMA	(9)	(49) 3 (6%)	(47) 5 (11 <b>%</b>
FMATCFOIETIC SYSTEM			
#SPIEEN MALIG.LYMFHOMA, LYMPHOCYTIC TYPF	(8)	(49) 1 (2%)	(47)
*KESENTFRIC L. NODE MALIG.LYKPHOMA, LYMPHOCYTIC TYPE	(10)	(35) 1 (3%)	(37)
*SMALL INTESTINE MALIG.LYMPHOMA, LYMPHOCYTIC TYPE	(10)	(48) 1 (2%)	(48)
IRCULATORY SYSTEM			
λC Ν Ε			
IGESTIVE SYSTEM			
<pre>#LIVEF NEOPLASTIC NODULE HEPATOCELLULAR_CARCINOMA</pre>	(10) 1 (10%) <u>1 (10%)</u>	(48) 3 (6%) <u>3 (6%)</u>	(47) 8 (17% 1 (2%)

* NUMEFR OF ANIMALS NECROPSIED

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

CONTROL LOW DOSE HIGH DOSE URINARY SYSTEM NONE INDCCAINE SYSTEM (40) 1 (3%) *IFYROID (10) (42) CARCINCMA, NOS . REPRODUCTIVE SYSTEM NCNE NEFVCUS SYSTEM NCNE _____ SFECIAL SENSE ORGANS NCNE MUSCULCSKELLTAL SYSTEM NGNE BOEY CAVITIES NCNE _____ ALL CTHER SYSTEMS <u>NCNE</u> # NUMEER OF ANIMALS WITH TISSUE EXAMINED MICROSCOPICALLY * NUMBER OF ANIMALS NECROPSIED

# TABLE B1. MALE MICE: NEOPLASMS (CONTINUED)

	CONTROL	LOW DOSE	HIGH DOS
NIFAL DISECSITICN SUFFARY			
ANIMALS INITIALLY IN STUDY	10	50	50
NATUFAL CEATHØ		1	4
MCRIBUND SACFIFICE		3	6
SCHEDULED SACRIFICE			
ACCIDENTALLY KILIED	10	4.6	
IFRMINAL SACRIFICE Animai missing	10	46	40
ANIMAL NISSING			
INCLUDES AUTCLYZED ANIMALS			
UNCE SUMMARY			
TCTAL ANIMALS WITH PPIMAPY TUMORS*	2	14	12
ICTAL FRIMARY IUMURS	2	15	14
ICTAL ANIMALS WITH BINIGN TUMORS		3	5
ICTAL BLNIGN TUMORS		3	5
TCIAL ANIMALS WITH MALIGNANT TUMOFS	1	в	1
"CTAL MALIGNANT TUNCRS	1	9	1
TOTAL ANIMALS WITH SECONDARY TUMORS*			
TOTAL SECONDARY TUNORS			
TOTAL ANIMALS WITH TUMORS UNCERTAIN-			
EINICN OR MALIGNANT	1	3	8
TCTAL UNCERTAIN TUMORS	1	3	8
TOTAL ANIMALS WITH TUMORS UNCERTAIN-			
FFIMAFY OR METASIATIC			
TCTAL UNCERTAIN TUMORS			
FRIMARY TUMORS: ALL TUMORS EXCEPT SE	CONDARY TUMOR	RS	
SECONDARY TUMORS: METASTATIC TUMORS (	OR TUMORS INV	VASIVF INTO AN A	<b>LJACENT ORGA</b>

## TABLE B2.

## SUMMARY OF THE INCIDENCE OF NEOPLASMS IN FEMALE MICE FED PARATHION IN THE DIET

	CONTROL	LOW DOSE	HIGH DOSE		
NIMALS INITIALLY IN STUDY NIMALS NECROPSIED NIMALS IXAMINED HISTUPATHOLOGICALLY	10 8 8	50 48 48	50 49 49		
NTIGUMENTARY SYSTEM					
*SLECUT TISSUE HEMANGIOMA	(8)	(48)	(49) 1 (2%)		
ESFIFATORY SYSTEM					
*LUNG AIVECLAF/BEONCHIGLAR ADENOMA HEMANGIOSARCOMA, METASTATIC	(9) 1 (11%)	(47)	(49) 2 (4% 1 (2%)		
EMAICFOIETIC SYSTEM					
*MULTIPLE OFGANS MALIG.LYMPHONA, LYMPHOCYTIC TYPF NALIG.LYMPHONA, HISTIOCYTIC TYPF LFUKEMIA,NOS GRANULOCYTIC LEUKEMIA	(8) 1 (13%)	(48) 4 (8%) 1 (2%) 1 (2%)	(49) 1 (2% 1 (2% 1 (2%		
#ECNE MARROW HEMANGICSARCOMA		(4) 1 (25%)			
#SPIEEN HEMANGIOMA MALIG.LYMPHOMA, LYMPHOCYTIC TYPE	(9)	(45)	(49) 1 (2% 1 (2%		
#KIENEY MALIG.LYNPHOMA, LYMPHOCYTIC TYPE	(9)	(46) 2 (4 <b>%</b> )	(49)		
IFCULATOPY SYSTEM					
_NCNE		الله والله الأله والله والله الله الله الله الله الله			
	CONTROL	LOW DOSE	HIGH DOSE		
-----------------------------------------------------------------------	-------------------------------------------------------------	-------------------------	------------------------------------------------------	--	--
DIGESIIVE SYSTEM					
*IIVER NEOFLASTIC NODULE	(9) 1 (11 <b>%</b> )	(47) 1 (2 <b>%</b> )	(49) 1 (2%)		
URINARY SYSTEM					
NCNE					
ENDOCRINE SYSTEM					
#FITUITARY ACENOMA, NOS	(6)	(30) 1 (3%)	(30)		
#THYROID FCILICULAR-CELL ADENOMA	(7)	(43)	(47) 1 (2 <b>%</b> )		
REPRODUCTIVE SYSTEM					
*MAMMARY GLAND	(8)	(48)	(49) 1 (2 <b>%</b> )		
ADENOMA, NOS ADENCCARCINONA, NOS HEMANGIOSARCOMA		1 (2%)	1 (2%)		
NEFVCUS SYSTEM					
KC N E		*****			
SPECIAL SENSE ORGANS					
NCNE		****	***		
MUSCULCSKELETAL SYSTEM					
NONE	****	***	*****		
BODY CAVITIES					
<u>KCNE</u>	وي وي منه بين وي منه وي	***	ه به هه به و چ چ چ <del>و چ چ</del> ه <del>م</del> م		
# NUMBER OF ANIMALS WITH TISSUE EXA * NUMBER OF ANIMALS NECROPSIED	MINED MICROSCOPI	CALLY			

# TABLE B2. FEMALE MICE: NEOPLASMS (CONTINUED)

	CONTROL	LOW DOSE	HIGH DOSE	
ALI CIHER SYSTEMS				
NCNE		** **		
ANIMAL DISECSITION SUMMARY				
ANIMALS INITIALLY IN STUDY Natural deathd Morifund Sacrifice Scheduled Sacrifice	10 2	50 4	50 3 3	
ACCIDENTALLY KILLED TERMINAL SACRIFICE ANIFAL MISSING	8	46	44	
a INCLUDES AUTCLYZED ANIMALS				
TUPCE SUMMARY				
IOIAL ANIMALS WITH PRIMARY TUMORS* ICTAL FRIMARY TUMOFS	3 3	12 12	9 12	
ICTAL ANIMALS WITH EENIGN TUMORS IOTAL BENIGN TUMCKS	1 1	1 1	4 6	
ICTAL ANIMALS WITH MALIGNANT TUMERS ICTAL MALIGNANT TUMORS	1 1	10 10	5 5	
TOTAL ANIMALS WITH SECONDARY TUMORS* TOTAL SECONDARY TUMORS			1 1	
IOTAL ANIMALS WITH TUMORS UNCERTAIN- PENIGN OR MALIGNANT ICTAL UNCERTAIN TUMORS	1 1	1 1	1 1	
TOTAL ANIMALS WITH TUMORS UNCERTAIN- FFIMARY OR METASTATIC ICTAL UNCERTAIN TUMORS				
* FRIMARY TUMORS: ALL TUMORS EXCEPT SEC # SECCNDARY TUMORS: METASTATIC TUMORS (			DJACENT ORGAN	

# TABLE B2. FEMALE MICE: NEOPLASMS (CONTINUED)

APPENDIX C

### SUMMARY OF THE INCIDENCE OF NONNEOPLASTIC LESIONS

IN RATS FED PARATHION IN THE DIET

# TABLE C1.

# SUMMARY OF THE INCIDENCE OF NONNEOPLASTIC LESIONS IN MALE RATS FED PARATHION IN THE DIET

	CONTROL	LOW DOSE	HIGH DOSE
ANIMAIS INITIALLY IN STUDY	10	50	50
ANIMALS NECECPSIED ANIMALS EXAMINED HISTOFATHOLOGICALLY	10 10	50 50	49 49
NTIGUMFNTARY SYSTEM			
*SKIN ULCER, NCS	(10) 1 (10%)	(50)	(49)
*SUECUT TISSUE Abscess, Nos	(10)	(50)	(49) 1 (2%)
RESPIRATORY SYSTEM			
* LUNG	(10)	(50)	(48)
ATELECIASIS CCNGESTION, NOS		3 (6%)	1 (2%)
EDIMA, NOS		1 (2%)	
IIPOIDOSIS Alveclar Macrophages			1 (2%) 1 (2%)
HEFATCFCIETIC SYSTEM #ECNE MARROW ATRCFHY, NOS HYPERPLASIA, NOS		(1) 1 (100%)	(1) 1 (100
*SPLEEN ACCESSORY SPLEEN THROMBOSIS, NOS	(10)	(50) 1 (2%) 1 (2%) 1 (2%)	(47)
CCNGESTICN, NCS INFARCT, NOS		1 (2%)	3 (6%)
ATROPHY, NOS Myeloid metaplasia		1 (2%)	3 (6%)
*IYMEH NODE INFLAMMATION, ACUTE/CHRONIC	(9)	(39)	(34) 1 (3 <b>%</b> )
#MANDIBULAR L. NODE ELANIN	(9)	(39)	(34)

	CONTROL	LOW DOSE	HIGH DOSE
CIFCULAICRY SYSTEM			
# FEARI SCAF	(10)	(50) 1 (2%)	(48)
*MYCCAPDIUM INFLAMMATICN, CHRCNIC INFLAMMATICN, CHFONIC FOCAL	(10)	(50) 1 (2%)	(48) 1 (2%) 3 (6%)
*AOFTA ARTERIOSCLEROSIS, NOS	(10)	(50)	(49) 1 (2%)
DICISTIVE SYSTEM			
#LIVER CCNGESTICN, NOS HEMCRPHAGE SCAP	(10)	(50) 1 (2%) 1 (2%) 1 (2%)	(49) 1 (2%)
CIFRHOSIS, BILIARY METAMORFHOSIS FATIY FOCAL CELLULAR CHANGE HEPATCCYTOMEGALY ANGIECTASIS	1 (10%)	2 (4%) 1 (2%) 1 (2%) 1 (2%)	3 (6%) 2 (4%) 5 (10%)
*EILE DUCT Pyperpiasia, Nos	(10) 1 (10%)	(50)	(49)
#FANCRFAS INFLAMMATION, CHRONIC PERIARTFRITIS ATROPHY, NOS	(9) 1 (11%)	(49) 1 (2%)	(46) 1 (2%) 4 (9%) 1 (2%)
#STCMACH MINERALIZATICN	(10)	(42)	(46) 1 (2 <b>%)</b>
URINARY SYSTEM			
#KIDNEY INFLAMMATION, CHRONIC	(10) 6 (60%)	(48) 7 (15%)	(48) 9 (19 <b>%</b> )
<pre>#KIENEY/FELVIS INFLAMMAIICN, SUPPURATIVE</pre>	(10)	(48) 1 (2%)	(48)
#UFINARY ELADDER CAICULUS, NOS <u>HYFTRPLASIA, EPITHELIAL</u>	(9)	(42) 1 (2%) 1 (2%)	(41) <u>    1 (2%)</u>

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

	CONTROL	LOW DOSE	HIGH DOSE
ENCOCRINE SYSTEM			
<pre># FITUITARY    CYST, NOS    MULTIPLE CYS1S</pre>	(9)	(42) 1 (2%)	(43) 1 (2%
*ADFENAL THROMBCSIS, NOS ANGIECTASIS	(9)	(49) 1 (2%) 1 (2%)	(46)
#FAFATHYROIC Hyfffpiasia, Nos	(5)	(34)	(29) 2 (7 <b>%</b>
REPRCEUCTIVE SYSTEM			
#FRCSTATE INFLAMMATICN, CHRONIC	(10)	(44) 3 (7%)	(46) 1 (2%
*TESIIS FEEMA, NCS AIRCPHY, NOS	(10) 1 (1C系)	(47) 9 (19%) 4 (9%)	(48) 2 (4% 2 (4%
IFVCUS SYSTEM			
NC NF			
PECIAL SENSE ORGANS			
NC NE			
USCULCSKEIETAL SYSTEM			
*FONE FXCSTOSIS	(10) 1 (10%)	(50)	(49)
*PALATINE BONE FRACTURE, NOS	(10) 1 (10%)	(50)	(49)
BOLY CAVITIES			
*MESENTERY PERIARIERIIIS	(10) 1_(10%)	(50)	(49) 2_(4%

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

# TABLE 01. MALE RATS: NONNEOPLASTIC LESIONS (CONTINUED)

	CONTROL	LOW DOSE	HIGH DOSE	
*TUNICA VAGINALIS HYFERPLASIA, NOS	(10)	(50) 1 (2%)	(49)	
ALL CIHER SYSTEMS				
N C N F				
SPECIAL MOFPHOLOGY SUMMARY				
NC LESICN REPORTED AUTOLYSIS/NC NECPOPSY	2	10	4 1	
<pre># NUMEER OF ANIMAIS WITH TISSUE EXAMIN * NUMEER OF ANIMALS NECROPSIED</pre>	NED MICROSCOP:	ICALLY		

### TABLE C2.

#### SUMMARY OF THE INCIDENCE OF NONNEOPLASTIC LESIONS IN FEMALE RATS FED PARATHION IN THE DIET

	CONTROL	LOW DOSE	HIGH DOSE
ANIMALS INITIALLY IN STUDY ANIMALS NECROPSIED ANIMALS FXAMINED HISTOFATHOLOGICALLY	10 10 10	50 50 50	50 50 49
INTEGUMENTARY SYSTEM			
*SKIN ULCER, NOS ULCER, FGCAL FIBROSIS ACANTHOSIS	(10)	(50) 1 (2%) 2 (4%) 3 (6%) 2 (4%)	(50) 1 (2%)
RESPIRATORY SYSTEM			
NCNE			
HEMATGFOIETIC SYSTEM			
#ECNE MARROW Hypoplasia, Nos Hyperplasia, Nos Hyperplasia, Erythroid		(2) 1 (50%) 1 (50%)	(2) 1 (50% 1 (50%
#SPIEEN Hyperplasia, focal	(10)	(50)	(49) 2 (4 <b>%</b> )
#THYMUS ULTIMOBRANCHIAL CYST		(13) 2 (15%)	(5)
CIRCULATORY SYSTEM			
#HYCCARDIUM INFLAMMATICN, CHRONIC		(50)	(49) 2 (4%)
DIGESTIVE SYSTEM			
#LIVER <u>KETANORPHOSIS PATIY</u>	(10)	(49) <u>3 (6%)</u>	(48) 3_(6 <b>%</b> )

	CONTROL	LOW DOSE	HIGH DOSE
FCCAL CELLULAR CHANGE	******	1 (2%)	1 (2%)
*EILE DUCT Hyperplasia, Nos	(10)	(50) 1 (2%)	(50)
#STCMACH FINEBALIZATION	(10)	(48)	(47) 1 (2%)
JRINARY SYSTEM			
<pre>#KIDNEY INFLAMMATION, CHRONIC INFARCT, NOS</pre>	(10) 1 (10%)	(48) 2 (4%) 1 (2%)	(48) 4 (8%)
#KICNEY/PELVIS INFLAMMATICN, SUFPURATIVE	(10) 1 (10%)	(48)	(48)
ENCOCRINE SYSTEM			
#ADRENAL ANGIECTASIS	(10) 1 (10%)	(47) 2 (4%)	(42)
*THYROID Hyferplasia, follicular-cell	(10)	(45) 1 (2%)	(43)
REFROEUCTIVE SYSTEM			
*MAMMARY GLAND NECROSIS, CENTRAL	(10)	(50) 1 (2%)	(50)
#UTERUS Hydrometra Cyst, Nos	(10)	(49) 1 (2%) 2 (4%)	(45)
#UTERUS/ENDOMETRIUM Hyperplasia, cystic	(10)	(49) 1 (2%)	(45)
IERVCUS SYSTEM			
NCNE			
SPECIAL SENSE ORGANS			
NQNE	والمحافية والمحافية والمحافية والمحافية والمحافية والمحافية والمحافية والمحافية	مند به من ۵۰ ش ۵۰ من ۲۰ من ۱۹ من م	و هو دی کار ایک چو چن هو دیک هار چار هو.

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

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

	CONTROL	LOW DOSE	HIGH DOSE
			*****
MUSCULCSKELETAL SYSTEM			
NONE			
		**-***	
BODY CAVITIES			
NCNE			
ALI CTHER SYSTEMS			
GASTROSPLENIC LIGAME			_
NECROSIS, FAT			
SPECIAL NORFHOLOGY SUMMARY			
NO LESION REFORTED		13	14
AUTO/NECROPSY/NO HISTO			1
<pre># NULEER CF ANIMALS WITH TISSUE EXAMINE # NUMBER OF ANIMALS NECROPSIED</pre>	D MICROSCOPICA	LLY	

1

ł

.

APPENDIX D

### SUMMARY OF THE INCIDENCE OF NONNEOPLASTIC LESIONS

# IN MICE FED PARATHION IN THE DIET

# TABLE D1.

### SUMMARY OF THE INCIDENCE OF NONNEOPLASTIC LESIONS IN MALE MICE FED PARATHION IN THE DIET

	CONTROL	LOW DOSE	HIGH DOSE
ANIMALS INITIALLY IN STUDY	10	50	50
ANIMALS NECROPSIED	10	49	49
ANIMALS EXAMINED HISTOFATHOLOGICALLY	10	49	48
INTEGUMENTARY SYSTEM			
*SKIN	(10)	(49)	(49)
ABSCESS, NOS INFLAMMATION, CHRONIC	1 (10%)		1 (2%)
RESPIRATORY SYSTEM			
NCNE			
HEMATCPOIETIC SYSTEM			
<b>#ECNE MARROW</b>		(2)	(1)
HYPERPLASIA, HEMATOPOIETIC			1 (100%
#MESENTERIC L. NODI	(10)	(35)	(37)
HEMORRHAGE INFLAMMATION, GRANULOMATOUS		2 (6%) 1 (3%)	
CIFCULATORY SYSTEM			
NCNE			
DIGESTIVE SYSTEM			
#LIVER	(10)	(48)	(47)
NECROSIS, FOCAL		1 (2%)	
EASOPHILIC CYTO CHANGE ANGIECTASIS		1 (2%) 1 (2%)	1 (2%)
JRINARY SYSTEM			
#KICNEY/PELVIS INFLAMMATION, SUPPURATIVE	(10)	(49)	(48)

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

	CONTROL	LOW DOSE	HIGH DOSI
#URINARY ELADDER	(1)	(41)	(45) 2 (4 <b>5</b>
NEOCRINE SYSTEM			
N C N E			
EFRCDUCTIVE SYSTEM			
*FPEPUTIAL GLAND CYST, NOS	(10)	(49)	(49) 1 (2%)
#FRCSTATE INFLAMMATION, SUPPURATIVE	(9)	(42)	(43) 2 (5%)
IERVCUS SYSTEM			
NCNE		** * # = = + * * * * * * * * * * *	
SPECIAL SENSE ORGANS			
NCNE			
USCULOSKELETAL SYSTEM			
NC N E			
BODY CAVITIES			
NO N E			
LI CTHER SYSTEMS			
NCNE			**********
PECIAL MORPHOLOGY SUMMARY			
NO LESION REFORTED Auto/Necropsy/No histo Autolysis/No n:cropsy	7	31	31 1 1

# TABLE D2.

## SUMMARY OF THE INCIDENCE OF NONNEOPLASTIC LESIONS IN FEMALE MICE FED PARATHION IN THE DIET

	CONTROL	LOW DOSE	HIGH DOSI
ANIMAIS INITIALLY IN STUDY Animals necropsied Animals fxamined histofathologically	10 8 8	50 48 48	50 49 49
NTEGUMENTARY SYSTEM			
NCNI	•	*****	
ESPIFATORY SYSTEM			
#LUNG GRANULCMA, PYOGENIC METAPLASIA, OSSEOUS	(9)	(47)	(49) 1 (2% 1 (2%
EMAICFOIETIC SYSTEM			
* EONE MARROW Hyfepplasia, Hematopoietic		(4) 3 (75%)	
*SFILEN INFARCT, NOS Kyfloid Metaplasia	(9)	(45)	(49) 1 (2% 1 (2%
#LYEFH NODE Abscess, Nos	(6)	(42)	(47) 1 (2%
*CERVICAL LYMPH NODE INFLAMMATICN, SUFFURATIVE	(6)	(42)	(47) 1 (2%
#MEDIASTINAI L.NODE Granulcma, pyogenic	(6)	(42)	(47) 1 (2 <b>%</b>
#MESENTERIC L. NODE Granulcma, pyogenic	(6)	(42)	(47) 1 (2%
IRCULATORY SYSTEM			
NCNE			

# TABLE D2. FEMALE MICE: NONNEOPLASTIC LESIONS (CONTINUED)

	CONTROL	LOW DOSE	HIGH DOSE
DIGESTIVE SYSTEM			
*LIVEP EASCEHILIC CYTO CHANGE	(9)	(47) 3 (6%)	(49)
*FANCREAS Cyst, Nos Atrophy, Nos	(7) 1 (14%) 1 (14%)	(47)	(48) 1 (2% 1 (2%
UPINARY SYSTEM			
<pre>#KIENEY CYST, NOS INFLAMMATICN, CHFCNIC</pre>	(9)	(46) 1 (2%) 2 (4%)	(49)
#UFINAFY ELADDER INFLAMMATICN, CHRONIC		(34) 1 (3%)	(40)
ENCOCHINE SYSTEM			
N C N E			
REFRCDUCTIVE SYSTEM			
*MAMMARY GIAND METAPLASIA, CSSECUS	(8)	(48)	(49) 1 (2%
#UTERUS INFLAMMATION, SUPPURATIVE FYOMETRA	(7)	(46) 1 (2%) 2 (4%)	(47)
ABSCESS, NOS		1 (2%)	2 (4%)
*CVARY INFLAMMATICN, SUFFURATIVE	(6)	(42) 1 (2%)	(45)
AESCESS, NOS INFLAMMATION, CHRONIC	1 (17%)	9 (21%)	4 (9%)
VERVCUS SYSTEM			
NCNE			
SPECIAL SENSE ORGANS		·	
N^ NE			

	CONTROL	LOW DOSE	HIGH DOSE	
MUSCULCSKELETAL SYSTEM				
NCNE				
BCEY CAVITIES				
NCNE				
ALL CTHER SYSTEMS				
N C N E				
SFECIAL MORFHOLOGY SUMMARY				
NC LESION REPORTED	3	21	32	
AUTOLYSIS/NO NECROFSY	2	2	1	
# NUMEER OF ANIMALS WITH TISSUE EXAMINE * NUMEER OF ANIMALS NECROPSIED	D MICROSCON	PICALLY		

# TABLE D2. FEMALE MICE: NONNEOPLASTIC LESIONS (CONTINUED)

APPENDIX E

### ANALYSES OF THE INCIDENCE OF PRIMARY TUMORS

#### IN RATS FED PARATHION IN THE DIET

	Pooled	Matched	Low	High
Topography: Morphology	<u>Control</u>	Control	Dose	Dose
Liver: Hepatocellular Carcinoma,				
Hepatocellular Adenoma, or				
Neoplastic Nodule (b)	3/85 (4)	0/10 (0)	0/50 (0)	4/49 (8)
P Values (c,d)	N.S.	N.S.	N.S.	N.S.
r values (c,d)	N. 5.	N • D •	N • 5 •	N • 3 •
Relative Risk (Pooled Control) (f)			0.000	2.313
Lower Limit			0.000	0.406
Upper Limit			2.833	15.125
Relative Risk (Matched Control) (f)				Infinite
Lower Limit				0.211
				Infinite
Upper Limit				Infinite
Weeks to First Observed Tumor				112
Pituitary: Chromophobe Adenoma	<u> </u>			
or Adenoma, NOS (b)	21/72 (29)	4/9 (44)	10/42 (24)	13/43 (30)
P Value (c,d)	N.S.	N.S.	N.S.	N.S.
Relative Risk (Pooled Control) (f)			0.816	1.037
Relative Risk (Pooled Control) (f) Lower Limit			0.816 0.377	
Relative Risk (Pooled Control) (f) Lower Limit Upper Limit				1.037 0.529 1.914
Lower Limit Upper Limit			0.377 1.612	0.529 1.914
Lower Limit Upper Limit Relative Risk (Matched Control) (f)			0.377 1.612 0.536	0.529 1.914 0.680
Lower Limit Upper Limit Relative Risk (Matched Control) (f) Lower Limit			0.377 1.612 0.536 0.230	0.529 1.914 0.680 0.312
Lower Limit Upper Limit Relative Risk (Matched Control) (f)			0.377 1.612 0.536	0.529 1.914 0.680

(continued)				
	Pooled	Matched	Low	High
Topography: Morphology	Control	<u>Control</u>	Dose	Dose
Adrenal: Cortical Adenoma (b)	2/80 (3)	0/9 (0)	5/49 (10)	9/46 (20)
P Values (c,d)	P = 0.001	N.S.	N.S.	P = 0.002**
Relative Risk (Pooled Control) (f)			4.082	7.826
Lower Limit			0.696	1.707
Upper Limit			41.364	71.374
Relative Risk (Matched Control) (f)			Infinite	Infinite
Lower Limit			0.262	0.584
Upper Limit			Infinite	Infinite
Weeks to First Observed Tumor			112	91
Adrenal: Cortical Adenoma				
or Carcinoma (b)	3/80 (4)	0/9 (0)	7/49 (14)	11/46 (24)
P Values (c,d)	P less than 0.001	$\mathbf{P} = 0.048$	P = 0.035**	P less than 0.001**
Relative Risk (Pooled Control) (f)			3.810	6.377
Lower Limit			0.914	1.789
Upper Limit			21.780	33.667
Relative Risk (Matched Control) (f)			Infinite	Infinite
Lower Limit			0.404	0.738
Upper Limit			Infinite	Infinite
Weeks to First Observed Tumor			85	91

	Pooled	Matched	Low	High
Topography: Morphology	<u>Control</u>	<u>Control</u>	Dose	Dose
Thyroid: Follicular-cell				
Adenoma (b)	5/76 (7)	3/10 (30)	2/46 (4)	8/43 (19)
P Values (c,d)	P = 0.037	N.S.	P = 0.035* (N)	P = 0.046**
Departure from Linear Trend (e)		P = 0.010		
Relative Risk (Pooled Control) (f)			0.661	2.828
Lower Limit			0.065	0.868
Upper Limit			3.830	10.237
Relative Risk (Matched Control) (f)			0.145	0.620
Lower Limit			0.015	0.201
Upper Limit			1.150	3.239
Weeks to First Observed Tumor		95	112	95
Pancreatic Islets: Islet-Cell				
Carcinoma (b)	0/79 (0)	0/9 (0)	1/49 (2)	3/46 (7)
P Values (c,d)	P = 0.024	N.S.	N.S.	P = 0.048 * *
Relative Risk (Pooled Control) (f)			Infinite	Infinite
Lower Limit			0.086	1.024
Upper Limit			Infinite	Infinite
Relative Risk (Matched Control) (f)			Infinite	Infinite
Lower Limit			0.011	0.133
Upper Limit			Infinite	Infinite
Weeks to First Observed Tumor			112	95

83

.

.

#### (continued)

- (a) Dosed groups received time-weighted average doses of 32 or 63 ppm.
- (b) Number of tumor-bearing animals/number of animals examined at site (percent).
- (c) Beneath the incidence of tumors in a control group is the probability level for the Cochran-Armitage test when P less than 0.05; otherwise, not significant (N.S.) is indicated. Beneath the incidence of tumors in a dosed group is the probability level for the Fisher exact test for the comparison of that dosed group with the matched-control group (*) or with the pooledcontrol group (**) when P less than 0.05 for either control group; otherwise, not significant (N.S.) is indicated.
- (d) A negative trend (N) indicates a lower incidence in a dosed group than in a control group.
- (e) The probability level for departure from linear trend is given when P less than 0.05 for any comparison.
- (f) The 95% confidence interval of the relative risk between each dosed group and the specified control group.

	Pooled	Matched	Low	High
Topography: Morphology	<u>Control</u>	<u>Control</u>	Dose	Dose
Liver: Neoplastic Nodule or				
Hepatocellular Adenoma (b)	5/84 (6)	0/10 (0)	1/49 (2)	3/48 (6)
P Values (c,d)	N.S.	N.S.	N.S.	N.S.
Relative Risk (Pooled Control) (f)			0.343	1.050
Lower Limit			0.007	0.169
Upper Limit			2.929	5.121
Relative Risk (Matched Control) (f)			Infinite	Infinite
Lower Limit			0.012	0.139
Upper Limit			Infinite	Infinite
Weeks to First Observed Tumor			112	109
Pituitary: Chromophobe Adenoma				
or Adenoma, NOS (b)	25/75 (33)	2/8 (25)	11/38 (29)	13/39 (33)
P Values (c,d)	N.S.	N.S.	N.S.	N.S.
Relative Risk (Pooled Control) (f)			0.868	1.000
Lower Limit			0.429	0.526
Upper Limit			1.601	1.766
Relative Risk (Matched Control) (f)			1.158	1.333
Lower Limit			0.355	0.424
Upper Limit			9.741	11.002

	Pooled	Matched	Low	High
Topography: Morphology	Control	Control	Dose	Dose
Adrenal: Cortical Adenoma (b)	4/78 (5)	1/10 (10)	4/47 (9)	11/42 (26)
P Values (c,d)	P = 0.001	P = 0.037	N.S.	P = 0.001**
Relative Risk (Pooled Control) (f)			1.660	5.107
Lower Limit			0.322	1.620
Upper Limit			8.460	20.469
Relative Risk (Matched Control) (f)			0.851	2.619
Lower Limit			0.103	0.479
Upper Limit			41.020	109.307
Weeks to First Observed Tumor		98	112	65
Adrenal: Cortical Adenoma	<del>السريم و البراسين وار الاستراك ( المار المراجع المار المراجع المار المراجع المار المراجع المار المراجع المار ا</del>			
or Carcinoma (b)	4/78 (5)	1/10 (10)	6/47 (13)	13/42 (31)
P Values (c,d)	P less than 0.001	$\mathbf{P} = 0.028$	N.S.	P less than 0.001**
Relative Risk (Pooled Control) (f)			2.489	6.036
Lower Limit			0.621	2.005
Upper Limit			11.349	23.541
Relative Risk (Matched Control) (f)			1.277	3.095
Lower Limit			0.192	0.587
Upper Limit			57.405	127.253
Weeks to First Observed Tumor		98	112	65

(continued)	Deslad	Matabad	T	ILich
	Pooled	Matched	Low	High
Topography: Morphology	<u>Control</u>	Control	Dose	Dose
Thyroid: Follicular-cell				
Adenoma (b)	3/80 (4)	1/10 (10)	4/45 (9)	1/43 (2)
P Values (c,d)	N.S.	N.S.	N.S.	N.S.
Relative Risk (Pooled Control) (f)			2.370	0.620
Lower Limit			0.417	0.012
Upper Limit			15.439	7.400
Relative Risk (Matched Control) (f)			0.889	0.233
Lower Limit			0.108	0.003
Upper Limit			42.792	17.864
Weeks to First Observed Tumor		112	84	113
Thyroid: C-cell Carcinoma (b)	7/80 (9)	2/10 (20)	2/45 (4)	3/43 (7)
P Values (c,d)	N.S.	N.S.	N.S	N.S.
Relative Risk (Pooled Control) (f)			0.508	0.797
Lower Limit			0.053	0.138
Upper Limit			2.517	3.274
Relative Risk (Matched Control) (f)			0.222	0.349
Lower Limit			0.019	0.050
Upper Limit			2.871	3.897

Topography: Morphology	Pooled Control	Matched Control	Low Dose	High Dose
ropography: Morphology	Control	0011101	Dose	DOSE
Mammary Gland: Fibroadenoma (b)	9/85 (11)	2/10 (20)	16/50 (32)	8/50 (16)
P Values (c,d)	N.S.	N.S.	P = 0.002 **	N.S.
Departure from Linear Trend (e)	P = 0.004			
Relative Risk (Pooled Control) (f)			3.002	1.511
Lower Limit			1.362	0.539
Upper Limit			7.077	4.098
Relative Risk (Matched Control) (f)			1.600	0.800
Lower Limit			0.493	0.207
Upper Limit			13.259	7.210
Weeks to First Observed Tumor		90	57	80
Uterus: Endometrial Stromal				
Polyp (b)	9/82 (11)	1/10 (10)	4/49 (8)	5/45 (11)
P Values (c,d)	N.S.	N.S.	N.S.	N.S.
Relative Risk (Pooled Control) (f)			0.744	1.012
Lower Limit			0.175	0.280
Upper Limit			2.497	3.126
Relative Risk (Matched Control) (f)			0.816	1.111
Lower Limit			0.099	0.154
Upper Limit			39.389	51.348
Weeks to First Observed Tumor		98	112	112

#### (continued)

- (a) Dosed groups received time-weighted average doses of 23 or 45 ppm.
- (b) Number of tumor-bearing animals/number of animals examined at site (percent).
- (c) Beneath the incidence of tumors in a control group is the probability level for the Cochran-Armitage test when P less than 0.05; otherwise, not significant (N.S.) is indicated. Beneath incidence of tumors in a dosed group is the probability level for the Fisher exact test for the comparison of that dosed group with the matched-control group (*) or with the pooled-control group (**) when P less than 0.05 for either control group; otherwise, not significant (N.S.) is indicated.
- (d) A negative trend (N) indicates a lower incidence in a dosed group than in a control group.
- 68
- (e) The probability level for departure from linear trend is given when P less than 0.05 for any comparison.
- (f) The 95% confidence interval of the relative risk between each dosed group and the specified control group.

APPENDIX F

### ANALYSES OF THE INCIDENCE OF PRIMARY TUMORS

IN MICE FED PARATHION IN THE DIET

Topography: Morphology	Pooled Control	Matched Control	Low Dose	High Dose
Lung: Alveolar/Bronchiolar Adenoma (b)	10/126 (8)	0/9 (0)	3/49 (6)	5/47 (11)
P Values (c,d)	N.S.	N.S.	N.S.	N.S.
Relative Risk (Pooled Control) (f) Lower Limit Upper Limit			0.771 0.140 2.828	1.340 0.374 4.026
Relative Risk (Matched Control) (f) Lower Limit Upper Limit			Infinite 0.125 Infinite	Infinite 0.274 Infinite
Weeks to First Observed Tumor			89	90
Liver: Hepatocellular Carcinoma (b)	21/127 (17)	1/10 (10)	3/48 (6)	1/47 (2)
P Values (c,d)	P = 0.003 (N)	N.S.	N.S.	P = 0.006 ** (N)
Relative Risk (Pooled Control) (f) Lower Limit Upper Limit			0.378 0.074 1.184	0.129 0.003 0.758
Relative Risk (Matched Control) (f) Lower Limit Upper Limit			0.625 0.061 32.146	0.213 0.003 16.378
Weeks to First Observed Tumor		90	67	85

Topography: Morphology	Pooled Control	Matched Control	Low Dose	High Dose
Liver: Hepatocellular Carcinoma, Hepatocellular Adenoma, or				
Neoplastic Nodule (b)	27/127 (21)	2/10 (20)	6/48 (13)	9/47 (19)
P Values (c,d)	N.S.	N.S.	N.S.	N.S.
Relative Risk (Pooled Control) (f) Lower Limit Upper Limit			0.588 0.209 1.340	0.901 0.397 1.796
Relative Risk (Matched Control) (f) Lower Limit Upper Limit			0.625 0.144 5.907	0.957 0.258 8.460
Weeks to First Observed Tumor		90	67	85
Hematopoietic System: Lymphoma (b)	3/133 (2)	0/10 (0)	3/49 (6)	0/48 (0)
P Values (c,d)	N.S.	N.S.	N.S.	N.S.
Relative Risk (Pooled Control) (f) Lower Limit Upper Limit			2.714 0.373 19.485	0.000 0.000 4.617
Relative Risk (Matched Control) (f) Lower Limit Upper Limit			Infinite 0.136 Infinite	 
Weeks to First Observed Tumor			89	
#### Table Fl. Analyses of the Incidence of Primary Tumors in Male Mice Fed Parathion in the Diet (a)

(continued)

95

- (a) Dosed groups received 80 or 160 ppm.
- (b) Number of tumor-bearing animals/number of animals examined at site (percent).
- (c) Beneath the incidence of tumors in a control group is the probability level for the Cochran-Armitage test when P less than 0.05; otherwise, not significant (N.S.) is indicated. Beneath the incidence of tumors in a dosed group is the probability level for the Fisher exact test for the comparison of that dosed group with the matched-control group (*) or with the pooled-control group (**) when P less than 0.05 for either control group; otherwise, not significant (N.S.) is indicated.
- (d) A negative trend (N) indicates a lower incidence in a dosed group than in a control group.
- (e) The probability level for departure from linear trend is given when P less than 0.05 for any comparison.
- (f) The 95% confidence interval of the relative risk between each de ed group and the specified control group.

	Pooled	Matched	Low	High
Topography: Morphology	<u>Control</u>	Control	Dose	Dose
Lung: Alveolar/Bronchiolar				
Adenoma (b)	3/128 (2)	1/9 (11)	0/47 (0)	2/49 (4)
P Values (c,d)	N.S.	N.S.	N.S.	N.S.
Relative Risk (Pooled Control) (f)			0.000	1.742
Lower Limit			0.000	0.148
Upper Limit			4.535	14.637
Relative Risk (Matched Control) (f)			0.000	0.367
Lower Limit			0.000	0.023
Upper Limit			3.585	21.260
Weeks to First Observed Tumor		90		90
Liver: Neoplastic Nodule or		······································		
Hepatocellular Adenoma (b)	3/126 (2)	1/9 (11)	1/47 (2)	1/49 (2)
P Values (c,d)	N.S.	N.S.	N.S.	N.S.
Relative Risk (Pooled Control) (f)			0.894	0.857
Lower Limit			0.017	0.016
Upper Limit			10.722	10.298
Relative Risk (Matched Control) (f)			0.191	0.184
Lower Limit			0.003	0.003
Upper Limit			14.743	14.153
Weeks to First Observed Tumor		90	89	90

96

## Table F2. Analyses of the Incidence of Primary Tumors in Female Mice Fed Parathion in the Diet (a)

	14016 12.	2	rathion in the Die	2	remare mice	
(continued)						

# Table F2. Analyses of the Incidence of Primary Tumors in Female Mice

Topography: Morphology	Pooled Control	Matched Control	Low Dose	High Dose
Hematopoietic System: Lymphoma (b)	13/128 (10)	1/9 (11)	7/48 (15)	3/49 (6)
P Values (c,d)	N.S.	N.S.	N.S.	N.S.
Relative Risk (Pooled Control) (f) Lower Limit Upper Limit			1.436 0.510 3.592	0.603 0.113 2.065
Relative Risk (Matched Control) (f) Lower Limit Upper Limit			1.313 0.215 57.828	0.551 0.055 28.360
Weeks to First Observed Tumor		90	89	85
Hematopoietic System: Lymphoma or Leukemia (b)	14/128 (11)	1/0 (11)	8/48 (17)	4/49 (8)
P Values (c,d)	N.S.	N.S.	N.S.	N.S.
Relative Risk (Pooled Control) (f) Lower Limit Upper Limit			1.524 0.585 3.595	0.746 0.185 2.226
Relative Risk (Matched Control) (f) Lower Limit Upper Limit			1.500 0.258 65.028	0.735 0.091 35.451
Weeks to First Observed Tumor		90	88	85

97

#### Table F2. Analyses of the Incidence of Primary Tumors in Female Mice Fed Parathion in the Diet (a)

(continued)

86

- (a) Dosed groups received 80 or 160 ppm.
- (b) Number of tumor-bearing animals/number of animals examined at site (percent) .

(c) Beneath the incidence of tumors in a control group is the probability level for the Cochran-Armitage test when P less than 0.05; otherwise, not significant (N.S.) is indicated. Beneath the incidence of tumors in a dosed group is the probability level for the Fisher exact test for the comparison of that dosed group with the matched-control group (*) or with the pooled-control group (**) when P less than 0.05 for either control group; otherwise, not significant (N.S.) is indicated.

- (d) A negative trend (N) indicates a lower incidence in a dosed group than in a control group.
  - (e) The probability level for departure from linear trend is given when P less than 0.05 for any comparison.
  - (f) The 95% confidence interval of the relative risk between each dosed group and the specified control group.

APPENDIX G

.

\$

#### ANALYSIS OF FORMULATED DIETS FOR

### CONCENTRATIONS OF PARATHION

.

#### APPENDIX G

# Analysis of Formulated Diets for Concentrations of Parathion

A 10-g sample of the formulated diet was shaken with 125 ml hexane for 16 hours at ambient temperature. The mixture was then filtered through Celite with hexane washes, and the combined filtrates were reduced in volume to 10 ml. After appropriate dilutions, the solution was analyzed quantitatively for parathion by gas-liquid chromatography (electron capture detector, 5% QF-1 on Chromosorb W column). Recoveries were determined with spiked samples, and external standards were used for calibration.

Theoretical Concentrations in Diet (ppm)	No. of Samples	Sample Analytical Mean (ppm)	Coefficient of Variation (%)	Range (ppm)
20	16	20.1	5.9%	17.2-21.6
30	11	29.7	4.7%	27.1-32.0
40	14	39.2	3.6%	37.5-41.8
60	10	59.0	6.5%	55.2-65.1
80	21	79.6	5.1%	75.0-89.0
160	14	160.8	4.5%	150.0-171.0

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

August 31, 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 Parathion for carcinogenicity.

A toxicologist with Monsanto Company presented a public statement regarding the bioassay of Parathion. He noted that Monsanto is the major producer of Parathion, an agent used for the control of insects and mites on food and fiber crops. He said that Parathion does not pose an undue hazard if used in accordance with prescribed precautions. He made the following points: 1) the high spontaneous incidence of adrenal cortical tumors in the Osborne-Mendel rat should be given due consideration in evaluating the significance of this tumor type among treated animals; 2) pathological examination of treated rats failed to detect non-tumorigenic adrenal lesions which would indicate an insult to the organ; and 3) results from the NCI bioassay are inconsistent with those from three other reported studies, indicating no treatmentrelated histological changes in animals fed Parathion. He urged that the overall conclusion in the report reiterate the statement from the pathology section that "Paration did not appear to be carcinogenic in Osborne-Mendel rats under the conditions of this bioassay."

The primary reviewer said that the report noted an elevated incidence of adrenal tumors in treated rats. No treatment-related tumors were observed in mice. Although the study was marred by the use of a small number of matched control animals, the deficiency was compensated for by using pooled controls in the statistical analysis of the study. He pointed out that the toxicity of Parathion inhibited the levels of the compound that could be administered. He further stated that the increased incidence of adrenal neoplasms in treated rats should not be taken as conclusive evidence for the carcinogenicity of Parathion. The primary reviewer recommended that consideration be given to a retest of the compound, possibly in a different species. He added that it would be premature to assess the possible human risk posed by Parathion.

The secondary reviewer indicated that the evidence was insufficient to conclude that Parathion was carcinogenic in treated rats or mice, under the conditions of test. He suggested that the conclusion in the report be reworded as follows: "There were more adrenal cortical adenomas and carcinomas among the treated rats than among pooled and historical controls, suggesting a carcinogenic effect that requires further study." He opined that the increase in adrenal neoplasms may have been associated with the stress of the animals. Although he agreed with the shortcomings noted by the primary reviewer, he still considered the study valid for the purpose for which it was undertaken. Based on the results of the study, he concluded that Parathion did not pose a carcinogenic risk to man.

A motion was approved unanimously that the report on the bioassay of Parathion be accepted as written.

Members present were:

Arnold Brown (Chairman), University of Wisconsin School of Medicine Joseph Highland, Environmental Defense Fund Michael Shimkin, University of California at San Diego Louise Strong, University of Texas Health Sciences Center

^{*} 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.

ı

DHEW Publication No. (NIH) 79-1320

.