CARC	al Cancer Institute CINOGENESIS cal Report Series 2
	BIOASSAY OF DIBENZO-p-DIOXIN FOR POSSIBLE CARCINOGENICITY CAS No. 262-12-4 NCI-CG-TR-122

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

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**BIOASSAY OF** 

# DIBENZO-p-DIOXIN

# 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) 79-1377

#### BIOASSAY OF DIBENZO-p-DIOXIN FOR POSSIBLE CARCINOGENICITY

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

FOREWORD: This report presents the results of the bioassay of dibenzo-p-dioxin conducted for the Carcinogenesis Testing Program, Divison of Cancer Cause and Prevention, National Cancer Institute (NCI), Bethesda, Maryland. This is one of a series of experiments designed to determine whether selected 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 chemical is a potential risk to man. The actual the determination of the risk to man from chemicals found to be carcinogenic for animals requires a wider analysis.

<u>CONTRIBUTORS</u>: The bioassay of dibenzo-p-dioxin was conducted at the Illinois Institute of Technology Research Institute (IITRI), Chicago, Illinois, 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 project director was Mr. A. Shefner (1), Dr. M. E. King (1) was the principal investigator for this study, and Dr. P. Holmes (1) assembled the data. Doses of the test chemical were selected by Dr. King, Mr. Shefner, and Dr. R. R. Bates (2,3). Mr. T. Kruckeberg (1) and Mr. K. Kaltenborn (1) were in charge of animal care.

Histopathologic examinations were performed by Dr. A. R. Roesler (1). Tumor diagnoses were reviewed by Dr. R. L. Schueler (4), who also prepared the interpretive pathology summary included in this report. Pathologists at NCI and at Tracor Jitco have reviewed selected slides and concur with the overall pathologic evaluation of the study. Animal pathology tables and survival tables were compiled at EG&G Mason Research Institute (5). The statistical analyses were performed by Dr. J. R. Joiner (4), and Ms. P. L. Yong (4) using methods selected for the bioassay program by Dr. J. J. Gart (6). Chemicals used in this bioassay were synthesized and analyzed under the direction of Dr. A. Gray (1), with the assistance of Mr. S. Cepa (1) and Mr. V. DaPinto (1). Further analyses were conducted under the direction of Dr. E. Murrill (7). The results of the analytical work were reviewed by Dr. S. S. Olin (4).

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#### SUMMARY

A bioassay of dibenzo-p-dioxin (UDD) for possible carcinogenicity was conducted by administering the test chemical in feed to Osborne-Mendel rats and B6C3Fl mice.

Groups of 35 rats of each sex were administered UDD at one of two doses, either 5,000 or 10,000 ppm, for 110 weeks. Groups of 50 mice of each sex were administered the same doses for 87 or 90 weeks. Controls consisted of groups of 35 untreated rats of each sex and 50 untreated mice of each sex. All surviving male rats were killed at 110 weeks, all surviving female rats at 111 to 117 weeks, all surviving male mice at 92 to 97 weeks, and all surviving female mice at 91 to 93 weeks.

Mean body weights of the dosed male and female rats and mice were lower than those of the corresponding controls; the depression in the amount of weight gained in the dosed male mice was, however, relatively slight. Except for the male rats, survival at the end of the bioassay was lower in the dosed groups of both rats or mice than in the corresponding control groups. At week 90, at least 57% of the rats and 54% of the mice were still alive. Because the mean body weights and survival rats of the dosed animals were lower than those of corresponding controls and because there was an increase in the incidence of hepatotoxic lesions, the 10,000-ppm concentration administered to the rats and mice is considered to be maximum tolerated dose.

No tumors were induced in rats or mice of either sex at incidences that were significantly higher in the dosed groups than in the corresponding control groups.

It is concluded that under the conditions of this bioassay, UDD was not carcinogenic for Osborne-Mendel rats or B6C3F1 mice.

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#### I. INTRODUCTION

Unsubstituted dibenzo-p-dioxin, (CAS 262-12-4; NCI CO3656) is analog of series of an а chlorinated dibenzo-p-dioxins that were selected for carcinogenesis The testing. unsubstituted synonym for



Dibenzo p-dioxin

dibenzo-p-dioxin -- UDD -- is used throughout this report. The chlorinated compounds are formed as unwanted by-products during the synthesis of chlorophenols, and were discovered in the late 1960's industrial as contaminants in the microbicide pentachlorophenol, and in a widely used agricultural herbicide, 2,4,5-trichloro- phenoxyacetic acid (2,4,5-T) (Crossland and Shea. 1973). Certain members of the chlorinated series were shown to be highly toxic and teratogenic (Sparschu et al., 1971; Schwetz et al., 1973). Chronic carcinogenicity studies were begun with these compounds because of evidence that they were both widely distributed and persistent in the environment (Kearney et al., 1972). The unsubstituted dibenzo-p-dioxin has been reported to be a photodecomposition product of chlorinated dibenzo-p-dioxins (Crosby et al., 1971; Kearney et al., 1972).

Except for a preliminary report of the present bioassay (King et al., 1973), no previous information is available on the toxicity of UDD. Studies for the acute and subacute toxicities of the 2,7-dichloro-, 2,3,7,8-tetrachloro-, hexachloro-, and octachlorodibenzo-p-dioxin analogs of UDD have shown that the 2,3,7,8-tetrachloro analog (TCDD) is the most toxic, having an  $LD_{50}$  of 0.022 mg/kg in Sherman rats (Schwetz et al., 1973). The principal target organs of TCDD in rats, guinea pigs, and mice are the liver and thymus (International Agency for Research on Cancer, 1977), and evidence has been presented for the induction of carcinomas of the ear duct, kidney, and liver by TCDD administered in the diet to Sprague-Dawley rats (Van Miller et al., 1977).

The series of chlorinated dibenzodioxins was selected for carcinogenesis testing because of the wide distribution of some of them in the environment and the possibility of their entrance into the food chain, causing long-term human exposure. UDD was included in the series because of interest in it as the unsubstituted analog.

#### 11. MATERIALS AND METHODS

#### A. Chemical

The batch of UDD used for this bioassay was synthesized by the IITRI Chemistry Division. Analysis by Midwest Research Institute, Kansas City, Missouri, confirmed the identity of the chemical and indicated a purity of approximately 99.5% by vapor-phase chromatography (vpc). Results of mass spectrometry suggested a phenoxydibenzo-p-dioxin structure for an impurity accounting for 0.5% of the total vpc peak area. One other trace impurity (less than 0.02%) was detected by vpc, but no chlorinated compounds Elemental were detected. analyses were correct for  $C_{12}H_8O_2$ , the molecular formula of UDD. The melting point of this white crystalline material was 124.5 to 126.0°C (120 to 122°C given in the literature [Gilman and Dietrich, 1957]). Infrared, ultraviolet, and nuclear magnetic resonance spectra were consistent with the spectra given in Sadtler Standard Spectra (Sadtler Research Laboratories, Philadelphia, Pa.). Hereinafter this materials is referred to as "UDD".

## B. Dietary Preparation

Test diets were prepared by incorporating a known quantity of UDD into a 2-week supply of ground Wayne<sup>®</sup> Lab Blox animal feed (Allied Mills, Inc., Chicago, Ill.). Diets were mixed in a Patterson-Kelly twin-shell blender for approximately 1 hour, and were stored in sealed plastic containers at room temperature for no more than 2 weeks.

Analyses were performed to assess the accuracy of concentrations in two individual batches of test diet. These batches had been stored at room temperature and were analyzed several months after preparation. Ninety-eight percent of the expected concentration was found at the 10,000 ppm level and 80% of the expected concentration at 5,000 ppm.

#### C. Animals

Osborne-Mendel rats and B6C3F1 mice of each sex, obtained through a contract with the Division of Cancer Treatment, NCI, were used in the chronic study. Animals were obtained at various times from Charles River Breeding Laboratories, Inc., Wilmington, Massachusetts. The rats and mice were received at the laboratory

at approximately 4 weeks of age and were placed in quarantine for 1 week. Those animals with no visible signs of disease were assigned to dosed or control groups according to a series of random numbers and were earmarked for individual identification. Due to a loss of male rats occasioned by an air-conditioning failure, all groups of male rats were restarted 1 year after the beginning of the first tests, using new groups of 4-week-old animals obtained from Charles River Breeding Laboratories and quarantined for 1 week.

#### D. Animal Maintenance

The rats and mice were housed in temperatureand humidity-controlled rooms. The temperature was maintained at 22 to 23°C and the relative humidity at 40 to 50%. Fluorescent lighting was provided for 12 hours each day. Air in the animal rooms was changed 15 to 20 times per hour and exchanged through fiberglass filters (Air Filter Equipment Corp., Chicago, Ill.).

The rats were housed 4 per cage and the mice 10 per cage in suspended polypropylene cages (Maryland Plastics, Federalsburg, Maryland), covered with a wire mesh screen and a polyester filter (Research Equipment Co., Inc., Bryan, Tex.). Bedding used in the

cages was Absorb-dri<sup>®</sup> hardwood chips (Lab Products, Inc., Garfield, N. J.). Tap water was available <u>ad libitum</u> in glass water bottles with sipper tubes and was replenished twice per week. The control animals were fed Wayne<sup>®</sup> Lab Blox animal meal (Allied Mills, Inc.), and the test animals received the same diets, to which was added the test chemical. The diets were available <u>ad libitum</u> and were replenished as necessary, but at least once per week.

The cages, cage lids, and water bottles were sanitized weekly at 82°C; the feed hoppers, every 2 weeks at the same temperature. The detergent used was liquid Spearhead<sup>®</sup> (Economics Laboratory, Inc., St. Paul, Minn.). The dishwasher used was a flight-type conveyor belt washer (G. S. Blakeslee & Co., Chicago, Ill). The bedding was replaced each week. The racks were washed ordce per month in a Metalwash Rack Washer (Metalwash Machinery Corp., Elizabeth, N. J.) and were also rotated once per month. The rats and the mice were housed in separate rooms. The untreated controls and the UDD-dosed animals were housed in the same room as animals administered the following test compounds:

#### Drinking Water Studies

(CAS 123-91-1) 1,4-dioxane

#### Feed Studies

(CAS 3268-87-9) 1,2,3,4,6,7,8,9-octachlorodibenzo-p-dioxin (CAS 33857-26-0) 2,7-dichlorodibenzo-p-dioxin (DCDD)

#### E. Chronic Studies

The test groups, doses administered, and durations of the chronic studies are shown in tables 1 and 2. No subchronic studies were conducted. The concentrations of 5,000 and 10,000 ppm were chosen for use in the chronic studies because they were the highest amounts used in the Carcinogenesis Testing Program at the time these studies were initiated.

#### F. Clinical and Pathologic Examinations

All animals were observed twice daily. Body weights were measured monthly. Moribund animals and animals that survived to the end of the bioassay were killed using sodium pentobarbitol and necropsied. Necropsies were also performed on all animals found dead, unless precluded by autolysis or severe cannibalization.

Sex and	Initial	UDD	Time on S	
Test	No. of	in Diet	Dosed	Observed
Group	<u>Animals (a)</u>	(ppm)	(weeks)	(weeks)
<u>Male (b)</u>				
Control	35	0	110	0
CONLIGI		0	110	U
Low-Dose	35	5,000	110	0
		, , , , , , , , , , , , , , , , , , ,		-
High-Dose	35	10,000	110	0
0				
Female (c)				
Control	35	0	110	6-7
Low-Dose	35	5,000	110	6-7
Uich Dava	25	10 000	110	1 0
High-Dose	35	10,000	110	1-2

## Table 1. UDD Chronic Feeding Studies in Rats

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

<sup>(</sup>b) These groups were put on study 1 year after the study began, to replace the original groups of male rats that died during an air conditioning failure. The low-dose group was placed on study 8 weeks after the control group, and the high-dose group was placed on study 6 weeks after the control group.

<sup>(</sup>c) Female controls were started 4 weeks after the female dosed groups.

Sex and Test Group	Initial No. of Animals (a)	UDD in Diet (ppm)	Time or Dosed (weeks)	n Study Observed (weeks)
Male				
Control (b)	50	0	90	2-3
Low-Dose	50	5,000	90	7
High-Dose	50	10,000	87	6-7
Female				
Control (b)	50	0	90	1-2
Low-Dose	50	5,000	90	2-3
High-Dose	50	10,000	90	1-2

# Table 2. UDD Chronic Feeding Studies in Mice

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

(b) Controls were placed on study 2-1/2 weeks after the dosed groups.

The following tissues were taken at necropsy: lung, heart, liver, spleen, kidney, adrenal, gonads, brain, stomach, nasal septum, skin, and tissue masses. Two years after the start of the bioassay, a new necropsy protocol was instituted, and the tissues that were taken therefore included: skin, lymph node (mandibular and mesenteric), salivary gland, mammary gland, bone marrow, thymus, larynx, trachea, lungs and bronchi, heart, thyroid, parathyroids, esophagus, stomach, duodenum, colon, liver, gall bladder (mice), pancreas, spleen, kidney, adrenal, gonads, nasal cavity, brain, pituitary, spinal cord, skeletal muscle, sciatic nerve, and tissue masses. The tissues were preserved in 10% buffered formalin, embedded in paraffin, sectioned, and stained eosin. tissues with hematoxylin and A11 were examined microscopically by the pathologist, except for some tissues that were lost during necropsy or histologic processing.

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.

#### G. 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 the by 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 examined histologically. However, was when macroscopic examination was required to detect lesions prior to histologic sampling (e.g., skin or mammary tumors), or when lesions could have appeared multiple sites (e.g., lymphomas), at 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 onetailed 0.05 level of significance. Unless otherwise noted, the direction of the significant trend is а 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 less than 0.05, two-tailed test) were also noted.

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

The lower and upper limits of the confidence interval of the relative risk have been included in the tables of statistical analyses. The interpretation of the limits is that in approximately 95% of a large number of identical experiments, the true ratio of the risk in a dosed group of animals to that in a control group would be within the interval calculated from the experiment. When the lower limit of the confidence interval is greater than one, it can be inferred that a statistically significant result (P 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 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. RESULTS - RATS

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

Mean body weights of dosed groups of male and female rats were lower than those of the corresponding control groups (figure 1). Depressions in weight gains were similar in the low- and high-dose groups of both sexes, particularly toward the end of the bioassay. Some 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. No clinical signs other than those of lowered body weights were reported.

#### B. Survival (Rats)

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

In male rats, the low-dose group was started on study 8 weeks after the control group, and the high-dose group was started 6







Figure 2. Survival Curves for Rats Administered UDD in the Diet

weeks after the control group. In females, the two dosed groups were started at the same time, but the controls were started 4 weeks after the dosed groups. However, the Tarone test for dose-related trend in mortality is applied as if the different groups were started at the same time. In male rats, the result of the Tarone test is significant (P = 0.011), but in the negative direction. In females, the result of the Tarone test is significant in the positive direction (P = 0.007).

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In male rats, 29/35 (83%) of each dosed group, and 24/35 (69%) of the control group were still alive at week 90 on study. In females, 20/35 (57%) of the high-dose group, 31/35 (89%) of the low-dose group, and 32/35 (92%) of the control group were still alive at week 90 on study.

Sufficient numbers of dosed and control rats of each sex 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. Neoplasms occurred in a variety of tissues in dosed and control rats and were of the usual types seen in aged Osborne-Mendel rats. There was no evidence that any neoplasms were induced by administration of UDD in the diet.

In some male and more frequently in female rats there was a dose-related increase in incidence of hepatotoxic pathologic alterations characterized by fatty metamorphosis or necrosis. Other nonneoplastic lesions were of the usual types seen in aged Osborne-Mendel rats and were seen in comparable numbers in control and dosed groups of animals.

Based on the histopathologic examination, UDD was not 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 low-dose group was started on study 8 weeks after the control group, and the high-dose group was started 6 weeks after the control group. In females, the two dosed groups were started at the same time, but the controls were started 4 weeks after the dosed groups. However, the Cochran-Armitage test for dose-related trend in the incidence of tumors is applied as if the different groups were started at the same time.

In each sex, the results of the Cochran-Armitage test and the Fisher exact test are not significant in the positive direction. In male rats, significant results in the negative direction are observed in the incidences of fibroma of the subcutaneous tissue, cortical adenoma and pheochromocytoma of the adrenal, and C-cell In female rats, significant results in adenoma of the thyroid. the negative direction are observed in the incidences of adenoma of the pituitary, cortical adenoma chromophobe or carcinoma of the adrenal, and fibroadenoma of the mammary gland. Significant results in the negative direction in the incidence of in the female rats may have been occasioned by the tumors shortened survival in the high-dose groups compared with that in the controls, but in male rats survival was lowest in the control groups.

In each of the 95% confidence intervals of 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 most of the intervals have upper limits greater than one, indicating the theoretical possibility of the induction of tumors by UDD, which could not be detected under the conditions of this test.

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#### IV. RESULTS - MICE

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

Mean body weights of the dosed male and female mice were generally lower than those of corresponding controls throughout the bioassay, although the effect of the UDD was slight in the males (figure 3). Some 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. No clinical signs other than those of lowered body weight were reported.

#### B. Survival (Mice)

The Kaplan and Meier curves estimating the probabilities of survival for male and female mice administered UDD in the diet at the doses of this bioassay, together with those of the controls, are shown in figure 4.

In each sex, the control group was started on study 2-1/2 weeks after the dosed groups; however, the Tarone test for dose-related trend in mortality is applied as if the dosed and control groups



Figure 3. Growth Curves for Mice Administered UDD in the Diet



Figure 4. Survival Curves for Mice Administered UDD in the Diet

were started at the same time. In male mice, the result of the Tarone test is not significant. In females, the result of the Tarone test is significant (P less than 0.001). A departure from linear trend is observed (P = 0.006), because of the steep decrease in survival of the dosed animals.

In male mice, 46/50 (92%) of the high-dose group, all 50 of the low-dose group, and 48/50 (96%) of the controls were still alive at week 90 on study. In females, 27/50 (54%) of the high-dose group, 44/50 (88%) of the low-dose group, and 44/50 (88%) of the control group were still alive at week 90 on study.

Sufficient numbers of dosed and control mice of each sex were at risk for the development of late-appearing tumors.

#### 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.

Neoplasms which occurred in a variety of tissues of dosed and

control mice were of the usual types and incidences seen in aged B6C3F1 mice.

Toxic hepatic lesions including liver degeneration, necrosis, fibrosis, and/or cirrhosis were observed in slightly increased numbers in several of the dosed mice, mainly in the high-dose females. Other nonneoplastic lesions were of the usual types seen in aged B6C3F1 mice.

Based on the histopathologic evaluation, there was no evidence that UDD was 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 each sex, the control group was started on study 2-1/2 weeks after the dosed groups; however, the Cochran-Armitage test for

dose-related trend in the incidence of tumors is applied as if the dosed and control groups were started at the same time.

In male mice, the Fisher exact comparison of the incidence of alveolar/bronchiolar carcinomas between the low-dose and control groups indicates a P value of 0.027, which is above the 0.025 level required for significance when the Bonferroni inequality criterion is used for multiple comparison. The result of the Cochran-Armitage test for dose-related trend in this incidence of tumors and that of the Fisher exact test comparing the incidence in the high-dose group with that in the control group are not significant.

In females, the results of the statistical tests on the incidences of tumors are not significant.

A significant dose-related trend in the negative direction is observed in the incidence of squamous-cell papillomas of the stomach in male mice, in which the incidence in the control group is 5/49 (10%), but no such tumor is observed in either of the dosed groups.

In each of the 95% confidence intervals of relative risk, shown in the tables (except for the incidence of alveolar/bronchiolar

carcinomas in the low-dose male mice), 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 squamous-cell papilloma of the stomach in male mice) has an upper limit greater than one, indicating the theoretical possibility of the induction of tumors by UDD, which could not be detected under the conditions of this bioassay.

#### V. DISCUSSION

Toxicity of UDD for rats and mice at the doses of 5,000 and 10,000 ppm administered in the diet in this bioassay was indicated by lowered mean body weights and survivals of most of the dosed groups when compared with control groups. The mean body weights of the dosed male and female rats and the dosed female mice were lower than those of the corresponding controls; the depression in the amount of weight gained in the dosed male mice was, however, relatively slight. Survivals of the high-dose groups of female rats and male and female mice at the end of the bioassay were lower than those of the corresponding control groups; the survivals of the dosed groups of male rats were higher than that of the corresponding control group, but the survival of the control male rats may have been abnormally low. At week 90, at least 57% of the rats and 54% of the mice were still alive. In some male and, more frequently, female rats there was a dose-related increase in the incidence of hepatotoxic alterations characterized by fatty metamorphosis or necrosis. hepatic lesions including Also, in mice, toxic liver degeneration, necrosis, fibrosis and/or cirrhosis were observed in slightly increased numbers in the dosed mice -- particularly in the high-dose females. Thus the 10,000-ppm concentration

administered to the rats and mice is considered to be the maximum tolerated dose.

No tumors were induced in rats or mice of either sex at incidences that were significantly higher in the dosed groups than in the corresponding control groups.

Unlike 2,3,7,8-tetrachlorodibenzo-p-dioxin, which has been reported to be highly toxic in Sherman rats (Schwetz et al., 1973) and to be carcinogenic in Sprague-Dawley rats (Van Miller et al., 1977), UDD, the unsubstituted analog, was observed in the present bioassay to have a very low toxicity for Osborne-Mendel and B6C3F1 mice, and to be noncarcinogenic for both rats However, the degeneration and necrosis of the liver species. observed in the rats and mice administered UDD is similar to the damage observed in rats and mice administered TCDD liver (International Agency for Research on Cancer, 1977).

It is concluded that under the conditions of this bioassay, UDD was not carcinogenic for Osborne-Mendel rats or B6C3F1 mice.

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APPENDIX A

SUMMARY OF THE INCIDENCE OF NEOPLASMS IN RATS ADMINISTERED UDD IN THE DIET

## TABLE A1.

	CONTROL	LOW DOSE	HIGH DOSE
ANIMALS INITIALLY IN STUDY	35	35	35
ANIMALS NECROPSIED	34	33	35
NIMALS EXAMINED HISTOPATHOLOGICALLY	33	33	35
	*********		
NTEGUMENTARY SYSTEM			
*SKIN	(34)	(33)	(35)
TRICHOEPITHELIOMA		(00)	1 (3%
*SUBCUT TISSUE	(34)	(33)	(35)
FIBROMA	3 (9%)		
FIBROSARCOMA	A	1 (3%)	1 (3%)
LIPOMA	1 (3%)		
ESPIRATORY SYSTEM			
· · ·			
	(30)	(33)	(35)
ALVEOLAR/BRONCHIOLAR ADENOMA ALVEOLAR/BRONCHIOLAR CARCINOMA	1 (DB)		1 (3%
ALVEOLAR/ BRONCHIOLAR CARCINOMA	( <i>K</i> C) +		
EMATOPOIETIC SYSTEM			
*MULTIPLE ORGANS	(34)	(33)	(35)
MALIG. LYMPHOMA, LYMPHOCYTIC TYPE	(34)	(33)	(33)
	( ) • ·	(22)	(25)
#SPLEEN SARCOMA, NOS	(31) 1 (3%)	(33)	(35)
IRCULATORY SYSTEM			
NONE			
IGESTIVE SYSTEM			
*LIVER	(31)	(32)	(35)
HEPATOCELLULAR ADENOMA	1 (3%)		

## SUMMARY OF THE INCIDENCE OF NEOPLASMS IN MALE RATS ADMINISTERED UDD IN THE DIET

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

	CONTROL	LOW DOSE	HIGH DOSE
#STOMACH PAPILLOMA, NOS	(31)	(33)	(33) 2 (6%)
URINARY SYSTEM			
<pre>#KIDNEY LIPOSARCOMA MIXED TUMOR, MALIGNANT</pre>	(31) 1 (3%) 1 (3%)	(33)	(35)
#URINARY BLADDER TRANSITIONAL-CELL CARCINOMA	(28)	(31)	(30) 1 (3%)
ENDOCRINE SYSTEM			
*PITUITARY ADENOMA, NOS CHROMOPHOBE ADENOMA	(16) 2 (13%) 1 (6%)	(21)	(16) 1 (6%)
#ADR ENAL CORTICAL ADENOMA PHEOCHROMOCYTOMA	(31) 7 (23%) 6 (19%)	(30) 4 (13%)	(34) 2 (6%) 2 (6%)
#THYROID FOLLICULAR-CELL ADENOMA FOLLICULAR-CELL CARCINOMA	(29) 2 (7%) 1 (3%)	(33)	(33) 1 (3%)
C-CELL ADENOMA Cystadenoma, nos	3 (10%)	2 (6%)	
#PARATHYROID ADENOMA, NOS	(25) 2 (8%)	(27)	(27)
#PANCREATIC ISLETS ISLET-CELL ADENOMA	(24) 1 (4%)	(33) 2 (6%)	(31) 1 (3 <b>%</b> )
PEPRODUCTIVE SYSTEM			
*MAMMARY GLAND Adenoma, nos	( 34)	(33)	(35) 1 (3%)
NERVOUS SYSTEM			
#BRAIN A STR <u>OCYTOMA</u>	(31)	(30) <u> </u>	(35)

#### TABLE A1. MALE RATS: NEOPLASMS (CONTINUED)

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

	CONTROL	LOW DOSE	HIGH DOSI
SPECIAL SENSE ORGANS			
NONE			
USCULOSKELETAL SYSTEM			
NONE			
BODY CAVITIES			
*TUNICA VAGINALIS MESOTHELIOMA, NOS	(34) 2 (6%)	(33)	(35)
LL OTHER SYSTEMS			
ADIPOSE TISSUE LIPOMA	1		
ANIMAL DISPOSITION SUMMARY			
ANIMALS INITIALLY IN STUDY NATURAL DEATHƏ MORIBUND SACRIFICE	35 20	35 9	35 9 1
SCHEDULED SACRIFICE ACCIDENTALLY KILLED	1	1	
TERMINAL SACRIFICE Animal Missing	14	25	25

## TABLE A1. MALE RATS: NEOPLASMS (CONTINUED)

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

	CONTROL	LOW DOSE	HIGH DOSE				
TUMOR SUMMARY							
TOTAL ANIMALS WITH PRIMARY TUMORS* TOTAL PRIMARY TUMORS	21 37	11 11	11 14				
TOTAL ANIMALS WITH BENIGN TUMORS TOTAL BENIGN TUMORS	17 30	8 8	8 11				
TOTAL ANIMALS WITH MALIGNANT TUMORS TOTAL MALIGNANT TUMORS	5 5	3 3	3 3				
TOTAL ANIMALS WITH SECONDARY TUMORS# TOTAL SECONDARY TUMORS							
TOTAL ANIMALS WITH TUMORS UNCERTAIN- BENIGN OR MALIGNANT TOTAL UNCERTAIN TUMORS	2 2						
TOTAL ANIMALS WITH TUMORS UNCERTAIN- PRIMARY OR METASTATIC TOTAL UNCERTAIN TUMORS							
PRIMARY TUMORS: ALL TUMORS EXCEPT SEC Secondary Tumors: Metastatic Tumors o			DJACENT ORGAN				

## TABLE A1. MALE RATS: NEOPLASMS (CONTINUED)

## TABLE A2.

#### SUMMARY OF THE INCIDENCE OF NEOPLASMS IN FEMALE RATS ADMINISTERED UDD IN THE DIET

		LOW DOSE	
ANIMALS INITIALLY IN STUDY	35	35	35
ANIMALS NECROPSIED ANIMALS EXAMINED HISTOPATHOLOGICALLY	35 31	33 33	33 33
INTEGUMENTARY SYSTEM			
*SUBCUT TISSUE		(33)	(33)
FIBROMA FIBROSARCOMA	1 (3%) 1 (3%)		
RESPIRATORY SYSTEM			
NONE			
HENATOPOIETIC SYSTEM			
<b>#RENAL LYMPH NODE</b>	(25)	(23)	(14)
ADENOCARCINOMA, NOS, METASTATIC		1 (4%)	
CIRCULATORY SYSTEM			
NON E			
DIGESTIVE SYSTEM			
#LIVER	(31)	(32)	(32)
NEOPLASTIC NODULE	( )	()	1 (3%
HEPATOCELLULAR CARCINOMA			1 (3%)
JRINARY SYSTEM			
*KIDNEY	(31)	(32)	(32)
FIBROSARCOMA, METASTATIC	1 (3%)	·····	

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

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	CONTROL	LOW DOSE	HIGH DOSE
ENDOCRINE SYSTEM			
*PITUITARY ADENOMA, NOS CHROMOPHOBE ADENOMA	(18) 4 (22%)	(19) 1 (5%) 1 (5%)	(11)
#ADRENAL CORTICAL ADENOMA CORTICAL CARCINOMA	(30) 11 (37%)	(31) 8 (26%)	(30) 3 (10%) 1 (3%)
#ADR ENAL CORTEX CYSTADENOMA, NOS	(30)	(31)	(30) 2 (7%)
<pre>#THYROID     FOLLICULAR-CELL CARCINOMA     C-CELL ADENOMA     C-CELL CARCINOMA</pre>	(28) 4 (14%)	(28) 1 (4%) 1 (4%)	(24) 1 (4%)
*THYROID FOLLICLE CYSTADENOMA, NOS	(28) 2 ( <b>7%</b> )	(28)	(24)
*PANCREATIC ISLETS ISLET-CELL ADENOMA	(29) 1 (3%)	(28)	(21)
REPRODUCTIVE SYSTEM			
*MAMMARY GLAND ADENOMA, NOS ADENOCARCINOMA, NOS FIBROMA FIBROADENOMA	(35) 3 (9%) 1 (3%) 1 (3%) 13 (37%)	(33) 1 (3%) 8 (24%)	(33) 1 (3%) 5 (15%)
#UTERUS ADENOCARCINOMA, NOS PAPILLARY CYSTADENOMA, NOS	(30) 1 (3%) 1 (3%)	(30) 1 (3%)	(27) 1 (4%)
LEIOMYOMA Endometrial stromal polyp		1 (3%)	1 (4%) 1 (4%)
#UTERUS/ENDOMETRIUM ADENOCARCINOMA, NOS	(30)	(30) 1 (3%)	(27)
#OVARY GRANULOSA-CELL TUMOR	(26)	(29)	(21) 1 (5%)

## TABLE A2. FEMALE RATS: NEOPLASMS (CONTINUED)

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

TABLE A2	FEMALE RA	ATS: NEOPL.	ASMS (CON	TINUED)

	CONTROL	LOW DOSE	HIGH DOS
TUBULAR ADENOMA	1 (4%)		
IERVOUS SYSTEM			
NON E			
SPECIAL SENSE ORGANS			
*HARDERIAN GLAND ADENOCARCINOMA, NOS	(35) 1 (3%)	(33)	(33)
USCULOSRELETAL SYSTEM			
NON E			
BODY CAVITIES			
*ABDOMINAL WALL FIBROSARCOMA	1 (3%)	(33)	(33)
LL OTHER SYSTEMS			
NONE		***	
NIMAL DISPOSITION SUMMARY			
ANIMALS INITIALLY IN STUDY NATURAL DEATHƏ MORIBUND SACRIFICE	35 14	35 15 5	35 19
SCHEDULED SACRIFICE ACCIDENTALLY KILLED	4	13	
TERMINAL SACRIFICE ANIMAL MISSING	17	2	16

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

	CONTROL	LOW DOSE	HIGH DOS
UMOR SUMMARY			
TOTAL ANIMALS WITH PRIMARY TUMORS*	26	19	13
TOTAL PRIMARY TUMORS	47	24	19
TOTAL ANIMALS WITH BENIGN TUMORS	24	17	12
TOTAL BENIGN TUMORS	42	2 <b>0</b>	14
TOTAL ANIMALS WITH MALIGNANT TUMORS	5	4	2
TOTAL MALIGNANT TUMORS	5	4	3
TOTAL ANIMALS WITH SECONDARY TUMORS#	1	1	
TOTAL SECONDARY TUMORS	1	1	
TOTAL ANIMALS WITH TUMORS UNCERTAIN-			
BENIGN OR MALIGNANT			2
TOTAL UNCERTAIN TUMORS			2
TOTAL ANIMALS WITH TUMORS UNCERTAIN-			
PRIMARY OR METASTATIC			
TOTAL UNCERTAIN TUMORS			

## TABLE A2. FEMALE RATS: NEOPLASMS (CONTINUED)

APPENDIX B

SUMMARY OF THE INCIDENCE OF NEOPLASMS IN MICE ADMINISTERED UDD IN THE DIET

## TABLE B1.

#### SUMMARY OF THE INCIDENCE OF NEOPLASMS IN MALE MICE ADMINISTERED UDD IN THE DIET

	CONTROL	LOW DOSE	HIGH DOSE
ANIMALS INITIALLY IN STUDY ANIMALS NECROPSIED ANIMALS EXAMINED HISTOPATHOLOGICALLY	50 50 49	50 50 50	50 48 48
INTEGUMENTARY SYSTEM			
*SKIN PAPILLOMA, NOS FIBROSARCOMA	(50) 1 (2%)	(50)	(48) 1 (2%)
*SUBCUT TISSUE SEBACEOUS ADENOMA LEIOMYOSARCOMA	(50) 1 (2%) 1 (2%)	(50)	(48)
RESPIRATORY SYSTEM			
*NASAL SEPTUM Meningioma, metastatic	(50)	(50)	(48) 1 (2%)
#LUNG ALVEOLAR/BRONCHIOLAR ADENOMA ALVEOLAR/BRONCHIOLAR CARCINOMA	(49) 8 (16%)	(48) 6 (13%) 5 (10%)	(48) 5 (10% 1 (2%)
EMATOPOIETIC SYSTEM			
*MULTIPLE ORGANS MALIG.LYMPHOMA, HISTIOCYTIC TYPE	(50)	(50)	(48) 2 (4%)
#SPLEEN HEMANGIONA	(48)	(48) 3 (6%)	(44) 1 (2%)
CIRCULATORY SYSTEM			
NON E			
DIGESTIVE SYSTEM	·		
#LIVER HEPATOCELLULAR ADENOMA	(49) 4 (8%)	(50) 1 (2%)	(48) 2 (4%)

\* NUMBER OF ANIMALS NECROPSIED

		LOW DOSE	
HEPATOCELLULAR CARCINOMA	4 (8%)	7 (14%)	3 (6%
*BILE DUCT BILE DUCT CARCINONA	(50) 1 (2%)	(50)	(48)
#STONACH SQUAMOUS CELL PAPILLOMA	(49) 5 ( <b>10%)</b>	(49)	(45)
JRINARY SYSTEM			
NON E			
ENDOCRINE SYSTEM			
#THYROID PAPILLARY CYSTADENOMA, NOS	(39) 1 (3%)	(37)	(31)
REPRODUCTIVE SYSTEM			
NON E			
NERVOUS SYSTEM			
#BRAIN MENINGIOMA	(48)	(49)	1 (2%)
SPECIAL SENSE ORGANS			
NONE			
MUSCULOSKELETAL SYSTEM			
NONE			
BODY CAVITIES			
NONE			
ALL OTHER SYSTEMS			
NONE			

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

	CONTROL	LOW DOSE	HIGH DOSI
ILMAL DISPOSITION SUMMARY			
ANIMALS INITIALLY IN STUDY	50	50	50
NATURAL DEATHD	2		5
MORIBUND SACRIFICE		50	45
SCHEDULED SACRIFICE			
ACCIDENTALLY KILLED			
TERMINAL SACRIFICE	48		
ANIMAL MISSING			
INCLUDES AUTOLYZED ANIMALS			
MOR SUMMARY			
TOTAL ANIMALS WITH PRIMARY TUMORS*	19	19	16
TOTAL PRIMARY TUMORS	26	22	16
TOTAL ANIMALS WITH BENIGN TUMORS	17	10	8
TOTAL BENIGN TUMORS	20	10	8
TOTAL ANIMALS WITH MALIGNANT TUMORS	5	11	8
TOTAL MALIGNANT TUMORS	6	12	8
TOTAL ANIMALS WITH SECONDARY TUMORS#	1		1
TOTAL SECONDARY TUMORS			1
TOTAL ANIMALS WITH TUMORS UNCERTAIN-			· ·
BENIGN OR MALIGNANT			
TOTAL UNCERTAIN TUMORS			
TOTAL ANIMALS WITH TUMORS UNCERTAIN-			· · · .
PRIMARY OR METASTATIC			and the second second
TOTAL UNCERTAIN TUMORS			
PRIMARY TUMORS: ALL TUMORS EXCEPT SE		BC	
SECONDARY TUNORS: METASTATIC TUNORS			ADJACENT OPG
A A A A A A A A A A A A A A A A A A A	AN TARANA TE	TRUETA APAV AP	

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# TABLE B1. MALE MICE: NEOPLASMS (CONTINUED)

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#### TABLE B2.

#### SUMMARY OF THE INCIDENCE OF NEOPLASMS IN FEMALE MICE ADMINISTERED UDD IN THE DIET

CONTROL	LOW DOSE	HIGH DOSE
50	50	50
50	49	1 40
50	49	39
(50)	(49) 1 (2%)	(40)
(50)	• •	(1.0.)
(50) 1 (2%)	(49)	(40)
(50)	(47)	(37)
	1 (2%)	5 (14%
	- (	
(50)	(49)	(40)
4 (8%)		
5 (H) <b>4</b> 5	1 (2%)	1 (3%)
2 (4%)	5 (66)	1 (3%)
(50)	(46)	(39)
		1 (3%)
(5) 1 (20%)	(11)	(6)
	50 50 (50) (50) 1 (2%) (50) 3 (6%) (50) 4 (8%) 2 (4%) (50)	$\begin{array}{cccccccccccccccccccccccccccccccccccc$

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

	CONTROL	LOW DOSE	HIGH DOSE
JIGESTIVE SYSTEM			
*LIVER HEPATOCELLULAR CARCINOMA ANGIOSARCOMA	(50)	(47) 1 (2%) 1 (2%)	(38)
#STOMACH SQUAMOUS CELL PAPILLOMA	(48) 1 (2 <b>%)</b>	(47) 1 (2%)	(33)
IRINARY SYSTEM			
#URINARY BLADDER PAPILLOMATOSIS	(2) 2 (100%)	(2)	
ENDOCRINE SYSTEM			
NONE			
REPRODUCTIVE SYSTEM			
*V AGINA H EMA NGIOS ARCOM A	(50) 1 (2%)	(49)	(40)
#OVARY GRANULOSA-CELL TUMOR	(20)	(33) 1 (3%)	(21)
NERVOUS SYSTEM			
NONE			
SPECIAL SENSE ORGANS			
NONE			
USCULOSKELETAL SYSTEM			

# TABLE B2. FEMALE MICE: NEOPLASMS (CONTINUED)

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	CONTROL	LOW DOSE	HIGH DOSE
ODY CAVITIES			
*PERITONEUM LYMPHANGIOMA	(50) 1 (2%)	(49)	(40)
* MESENTERY HEMANGIOSARCOMA	(50)	(49)	(40) 1 (3%
LL OTHER SYSTEMS			
NON E			
NIMAL DISPOSITION SUMMARY			
ANIMALS INITIALLY IN STUDY	50_	50	50
NATURAL DEATHØ Moribund Sacrifice	5	6 44	22 27
SCHEDULED SACRIFICE		44	21
ACCIDENTALLY KILLED			
TERMINAL SACRIFICE	45		
ANIMAL MISSING			1
INCLUDES AUTOLYZED ANIMALS			
UMOR SUMMARY			
TOTAL ANIMALS WITH PRIMARY TUMORS*	14	12	9
TOTAL PRIMARY TUMORS	15	13	໌9
_	_	_	-
TOTAL ANIMALS WITH BENIGN TUMORS	7	3	6
TOTAL BENIGN TUMORS	/	3	6
TOTAL ANIMALS WITH MALIGNANT TUMORS	8	9	3
TOTAL MALIGNANT TUMORS	8	9	3
TOTAL ANIMALS WITH SECONDARY TUMORS#	1	1	
TOTAL SECONDARY TUMORS	<b>'</b> 1	1	
TOTAL ANIMALS WITH TUMORS UNCERTAIN-		4	
BENIGN OR MALIGNANT		1	
TOTAL UNCERTAIN TUMORS		1	
TOTAL ANIMALS WITH TUMORS UNCERTAIN-			
PRIMARY OR METASTATIC			
TOTAL UNCERTAIN TUMORS			
PRIMARY TUMORS: ALL TUMORS EXCEPT SE		c	
TATARAT TOROND, MEL TOROND BACEPI DE	COMPART TOUR	<i>u</i>	DJACENT ORGA

# TABLE B2. FEMALE MICE: NEOPLASMS (CONTINUED)

APPENDIX C

SUMMARY OF THE INCIDENCE OF NONNEOPLASTIC LESIONS IN RATS ADMINISTERED UDD IN THE DIET

#### TABLE C1.

#### SUMMARY OF THE INCIDENCE OF NONNEOPLASTIC LESIONS IN MALE RATS ADMINISTERED UDD IN THE DIET

35 34		
2/1	35	35
33	33 33	35 35
(34)	(33) 2 (6%)	(35)
(34) 1 (3%)	(33)	(35)
(34)	(33)	(35)
	1 (3%)	3 (9%)
(34)	(33)	(35)
5 (15%)		
2 (6%)		
(30)	(33)	(35)
• •		
• •	2 (6%)	3 (9%)
	(22)	(25)
		(35)
	5 (54)	
		1 (3%)
_		1 (3%)
8 (27%)	7 (21%)	21 (60%
(30)	(33)	(35)
		1 (3%)
(31)	(33)	(35)
	(34) 1 (3%) (34) 5 (15%) 6 (18%) 2 (6%) (30) 1 (3%) 7 (23%) 2 (7%) (30) 1 (3%) 8 (27%) (30)	$\begin{array}{cccccccccccccccccccccccccccccccccccc$

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

	CONTROL	LOW DOSE	HIGH DOSE
*SPLEEN HEMOSIDEROSIS ATROPHY, NOS	(31) 3 (10%)	(33) 1 (3%)	(35)
LYMPHOID DEPLETION		1 (3%)	1 (3%)
HYPERPLASIA, HEMATOPOIETIC HEMATOPOIESIS	3 (10%)	2 (6%)	1 (3%)
*SPLENIC FOLLICLES ATROPHY, NOS	(31) 1 (3%)	(33)	(35)
#SPLENIC RED PULP HEMOSIDEROSIS HYPERPLASIA, NOS	(31)	(33) 1 (3%)	(35) 4 (11%) 1 (3%)
*MANDIBULAR L. NODE HYPERPLASIA, LYMPHOID	(22) 5 (23%)	(29)	(30)
CERVICAL LYMPH NODE	(22)	(29)	(30)
HEMORRHAGE INFLAMMATION, CHRONIC		1 (3%)	1 (3%)
BRONCHIAL LYMPH NODE	(22)	(29)	(30)
HEMORRHAGE INFLAMMATION, CHRONIC	1 (5%)		1 (3%)
LUMBAR LYMPH NODE INFLAMMATION, CHRONIC	(22)	(29) 1 (3%)	(30)
<pre>#MESENTERIC L. NODE     HYPERPLASIA, LYMPHOID</pre>	(22)	(29) 1 (3%)	(30)
RENAL LYMPH NODE INFLAMMATION, CHRONIC	(22)	(29) 1 (3%)	(30)
THYMUS ATROPHY, NOS	(3) 3 (100%)	(25)	(20)
LRCULATORY SYSTEM			
*MYOCAR DIUM	(30)	(33)	(35)
INFLAMMATION, CHRONIC INFLAMMATION, CHRONIC FOCAL	4 (13%)		1 (3%) 1 (3%)

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

# NUMBER OF ANIMALS WITH TISSUE EXAMINED MICROSCOPICALLY # NUMBER OF ANIMALS NECROPSIED
	CONTROL	LOW DOSE	HIGH DOSE
DEGENERATION, NOS	* * * * * * - * * * * * * * * * * *	1 (3%)	
<pre>#ENDOCARDIUM DEGENERATION, MUCOID METAPLASIA, OSSEOUS</pre>	(30)	(33) 1 (3%) 1 (3%)	(35) 1 (3%)
* AORTA MINERALIZATION	(34)	(33) 1 (3%)	(35)
*ABDOMINAL AORTA PERIARTERITIS	(34)	(33)	(35) 1 (3%)
*PULMONARY ARTERY CALCIFICATION, DYSTROPHIC	(34) 1 (3%)	(33)	(35)
IGESTIVE SYSTEM			
#LIVER CYST, NOS CONGESTION, CHRONIC PASSIVE	(31) 1 (3%) 1 (3%)	(32)	(35)
ABSCESS, NOS CIRRHOSIS, CARDIAC METAMORPHOSIS FATTY	1 (3%) 2 (6%)	1 (3%) 1 (3%)	
FOCAL CELLULAP CHANGE CLEAR-CELL CHANGE HYPERPLASIA, NOS	2 (0%) 5 (16%)	1 (3%)	2 (6%) 6 (179
ANGIECTASIS HEMATOPOIESIS	1 (3%)	1 (3%)	1 (3%)
#LIVER/CENTRILOBULAR NECROSIS, NOS METAMORPHOSIS PATTY	(31)	(32) 1 (3%) 2 (6%)	(35) 1 (3%) 11 (31%
*BILE DUCT Hyperplasia, Nos	(34) 8 (24 <b>%)</b>	(33)	(35)
*PANCREAS Periarteritis	(24) 1 (4 <b>%</b> )	(33) 1 (3%)	(31)
<pre>#PANCREATIC ACINUS ATROPHY, FOCAL</pre>	(24)	(33)	(31) 1 (3%)
#GASTRIC MUSCULARIS MINERALIZATION	(31)	(33) 1 <b>(3%</b> )	(33)

	CONTROL	LOW DOSE	HIGH DOSE
BINARY SYSTEM			
<pre>#KIDNEY HYDRONEPHROSIS CYST, NOS MULTIPLE CYSTS</pre>	(31)	(33) 2 (6%)	(35) 2 (6%) 1 (3%) 1 (3%)
PYELONEPHRITIS, NOS INFLAMMATION, INTERSTITIAL INFLAMMATION, CHRONIC PYELONEPHPITIS, CHRONIC	23 (74%) 1 (3%)	2 (6%) 2 (6%)	1 (3%)
NEPHROPATHY NECROSIS, MEDULLARY	(3,4)	17 (52%) 1 (3%)	21 (60%
#URINARY BLADDER INFLAMMATION, CHRONIC	(28) 2 ( <b>7%</b> )	(31)	(30)
INFLAMMATION, CHRONIC SUPPURATIV Hyperplasia, epithelial		1 (3%) 1 (3%)	
ENDOCRINE SYSTEM *PITUITARY CYST, NOS	(16) 2 (13%)	(21)	(16)
<pre>#ADR ENAL ECTOPIA HYPERPLASIA, FOCAL ANGIECTASIS</pre>	(31) 1 (3%) 1 (3%)	(30) 1 (3%)	(34)
#ADRENAL CORTEX LIPOIDOSIS	(31) 11 (35%)	(30) 2 (7%)	(34)
THYROID Hyperplasia, C-Cell	(29)	(33) 1 (3%)	(33) 2 (6%)
<pre>#PARATHYROID     HYPERPLASIA, NOS</pre>	(25) 4 (16%)	(27) 1 (4%)	(27) 2 (7%)
PEPRODUCTIVE SYSTEM			
*MAMMARY GLAND Hyperplasia, Nos	(34)	(33) 1 (3%)	(35)

	CONTROL	LOW DOSE	HIGH DOSE
*PROSTATE	(29)	(31)	(30)
INFLAMMATION, ACUTE	2 (7%)	()	<b>\ /</b>
INFLAMMATION, CHRONIC	4 (14%)		
INFLAMMATION, CHRONIC SUPPURATIV		1 (3%)	3 (10%
*SEMINAL VESICLE	(34)	(33)	(35)
DILATATION, NOS	1 (3%)		
INFLAMMATION, CHRONIC	1 (3%)		
INFLAMMATION, CHRONIC SUPPURATIV		1 (3%)	
*TESTIS	(32)	(33)	(34)
ABSCESS, NOS	1 (3%)		
PERIARTERITIS	2 (6%)	0 ( <b>)</b> (1)	10 (00#
ATROPHY, NOS	9 (28%)	8 (24%) 1 (3%)	13 (38%
A TROPHY, FOCAL A SPERMATOGENESIS	1 (3%)	1 (34)	
HYPERPLASIA, INTERSTITIAL CELL	( ( ) / )		1 (3%)
IERVOUS SYSTEM NONE PECIAL SENSE ORGANS			
NON E			
NONE PECIAL SENSE ORGANS NONE			
NONE SPECIAL SENSE ORGANS NONE SUSCULOS KELETAL SYSTEM			
NONE SPECIAL SENSE ORGANS NONE SUSCULOS KELETAL SYSTEM			
NONE SPECIAL SENSE ORGANS NONE SUSCULOS KELETAL SYSTEM NONE			(35)
NONE SPECIAL SENSE ORGANS NONE USCULOS KELETAL SYSTEM NONE ODY CAVITIES *ABDOMINAL CAVITY	(34)	(33) 1 (3%)	(35)
NONE SPECIAL SENSE ORGANS NONE SUSCULOS KELETAL SYSTEM NONE SODY CAVITIES *ABDOMINAL CAVITY INFARCT, NOS	(34) (34) 1 (3%)	(33)	
NONE SPECIAL SENSE ORGANS NONE USCULOS KELETAL SYSTEM NONE ODY CAVITIES *ABDOMINAL CAVITY INFARCT, NOS *MESENTERY PERIARTERITIS	(34) (34) 1 (3%)	(33) 1 (3%)	(35)

	CONTROL	LOW DOSE	HIGH DOSE
SPECIAL MORPHOLOGY SUMMARY	****		
NO LESION REPORTED Auto/necropsy/histo perf	1	1 1	
AUTO/NECROPSY/NO HISTO AUTOLYSIS/NO NECROPSY	1 1	2	
* NUMBER OF ANIMALS WITH TISSUE EXAMINE	D MICROSCOPI	CALLY	

\* NUMBER OF ANIMALS NECROPSIED

# TABLE C2.

## SUMMARY OF THE INCIDENCE OF NONNEOPLASTIC LESIONS IN FEMALE RATS ADMINISTERED UDD IN THE DIET

	CONTROL	LOW DOSE	HIGH DOSE
NIMALS INITIALLY IN STUDY	35	35	35
ANIMALS NECROPSIED	35	33	33
ANIMALS EXAMINED HISTOPATHOLOGICALLY	31	33	33
INTEGUMENTARY SYSTEM			
*SKIN	(35)	(33)	(33)
ULCER, NOS			1 (39
*SUBCUT TISSUE	(35)	(33)	(33)
INFLAMMATION, CHRONIC GRANULOMA, FOREIGN BODY	1 (3%)	1 (3%)	
RESPIRATORY SYSTEM *NASAL CAVITY INFLAMMATION, NOS INFLAMMATION, ACUTE INFLAMMATION, CHRONIC INFLAMMATION, CHRONIC DIFFUSE INFLAMMATION, CHRONIC NECROTIZIN HYPERPLASIA, NOS	( 35)	(33) 3 (9%)	$(33) \\ 1 (39) \\ 1 ($
*NASAL SEPTUM INFLAMMATION, CHRONIC INFLAMMATION, CHRONIC DIFFUSE	(35)	(33)	(33) 3 (99 1 (39
*NASAL TURBINATE INFLAMMATION, ACUTE INFLAMMATION, ACUTE SUPPURATIVE	(35) 1 (3%) 1 (3%)	(33)	(33)
*TRACHEA INFLAMMATION, NOS INFLAMMATION, ACUTE SUPPURATIVE	(29) 5 (17%) 1 (3%)	(31)	(28)
INFLAMMATION, CHRONIC INFLAMMATION, CHRONIC DIFFUSE HYPERPLASIA, EPITHELIAL		3 (10%) 1 (3%) 1 (3%)	1 (49
METAPLASIA, SQUAMOUS		1 (3%)	1 (4)

	CONTROL	LOW DOSE	HIGH DOSE
*LUNG	(30)	(33)	(33)
EMPHYSEMA, NOS	• • •	1 (3%)	• •
ATELECTASIS		7 (21%)	1 (3%)
CONGESTION, NOS	2 (7%)		1 (3%)
BRONCHOPNEUMONIA, NOS		1 (3%)	
INFLAMMATION, ACUTE SUPPURATIVE	1 (3%)		
PNEUMONIA, CHRONIC MURINE	6 (20%)		19 (58%
BRONCHOPNEUMONIA CHRONIC SUPPURA	1 (30)	1 (3%)	
GRANULONA, NOS	1 (3%)	1 (3%)	
FIBROSIS HYPERPLASIA, ADENOMATOUS		3 (9%)	
HEMATOPOIETIC SYSTEM			
#BONE MARROW	(31)	(27)	(27)
HYPERPLASIA, HEMATOPOIETIC	4 (13%)		
#SPLEEN	(30)	(30)	(29)
INFLAMMATION, ACUTE	4 (13%)		
INFLAMMATION, CHRONIC	1 (3%)		
H EMOSI DEROSIS	2 (7%)		1 (3%)
ATROPHY, NOS	1 (3%)		
LYMPHOID DEPLETION		2 (7%)	5 (17%)
HYPERPLASIA, HEMATOPOIETIC		1 (3%)	· · · ·
H ENATO POI ESIS	6 (20%)		2 (7%)
GPANULOPOIESIS		1 (3%)	
#MANDIBULAR L. NODE	(25)	(23)	(14)
HEMORRHAGIC CYST	1 (4%)		
INFLAMMATION, ACUTE	1 (4%)		
PLASMA-CELL INFILTRATE	3 (12%)		
HYPERPLASIA, LYMPHOID	5 (20%)		
#CERVICAL LYMPH NODE	(25)	(23)	(14)
INFLAMMATION, NOS		1 (4%)	
<b>#BRONCHIAL LYMPH NODE</b>	(25)	(23)	(14)
INFLAMMATION, CHRONIC		1 (4%)	
MESENTERIC L. NODE	(25)	(23)	(14)
HYPERPLASIA, LYMPHOID	1 (4%)		
#THYMUS	(9)		
CYST, NOS	2 (22%)		

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

	CONTROL	LOW DOSE	HIGH DOSE
ATROPHY, NOS	9 (100%)		
IRCULATORY SYSTEM			
#HEART	(31)	(30)	(32)
CALCIFICATION, DYSTROPHIC	1 (3%)		
#ENDO CARDIUM	(31)	(30)	(32)
INFLAMMATION, CHRONIC		• •	1 (3%)
FIBROSIS, FOCAL			1 (3%)
*MESENTERIC ARTERY	(35)	(33)	(33)
THROMBOSIS, NOS	1 (3%)		
INFLAMMATION, CHRONIC	1 (3%)		
IGESTIVE SYSTEM			
*LIVER	(31)	(32)	(32)
CYST, NOS		()	2 (6%)
CONGESTION, NOS	1 (3%)		
ABSCESS, NOS		1 (3%)	
HEPATITIS, TOXIC			1 (3%)
NECROSIS, NOS	1 (3%)	4 49385	1 (3%)
NECROSIS, FOCAL	1 (3%)	4 (13%) 1 (3%)	1 (3%)
NECROSIS, DIFFUSE Metamorphosis patty		16 (50%)	18 (56)
LIPOIDOSIS	2 (6%)	10 (50 M)	10 (50
MEGALOCYTOSIS	2 (0,%)		1 (3%)
HYPERPLASIA, NOS	7 (23%)		• • •
ANISOCYTOSIS		1 (3%)	
HEMA TO POIESIS	1 (3%)	3 (9%)	1 (3%)
#LIVER/CENTR ILOBULAR	(31)	(32)	(32)
NECROSIS, NOS	_	2 (6%)	3 (9%
METAMORPHOSIS FATTY	1 (3%)	3 (9%)	7 (22)
ANGI ECTASIS		1 (3%)	
#LIVER/PERIPORTAL	(31)	(32)	(32)
FIBROSIS			3 (9%)
METAMORPHOSIS PATTY			1 (3%
*BILE DUCT	(35)	(33)	(33)
DILATATION, NOS	1 (3%)		

TABLE C2.	FEMALE RATS	: NONNEOPLASTIC	LESIONS (CONTINUED)

	CONTROL	LOW DOSE	HIGH DOSE
MULTIPLE CYSTS		******	1 (3%)
INFLAMMATION, CHRONIC	1 (3%)		
HYPERPLASIA, NOS	13 (37%)		1 (3%)
HYPERPLASIA, FOCAL		1 (3%)	4 (12%)
#PANCREAS	(29)	(28)	(21)
INFLAMMATION WITH FIBROSIS	1 (3%)		
<b>#PANCREATIC</b> DUCT	(29)	(28)	(21)
HYPERPLASIA, NOS	3 (10%)		
#PANCREATIC ACINUS	(29)	(28)	(21)
ATROPHY, NOS		2 (7%)	1 (5%)
ATROPHY, FOCAL		2 (7%)	1 (5%)
#STOMACH	(31)	(31)	(28)
CALCIFICATION, DYSTROPHIC	1 (3%)		
HYPERK ERA TOSIS			1 (4%)
*KIDNEY MINERALIZATION CAST, NOS	(31) 17 (55%)	(32)	(32) 3 (9%)
	1/ (55%)		3 (9%)
PYELONEPHRITIS, NOS INFLAMMATION, INTERSTITIAL	1 (3%)	1 (3%)	3 (9%)
PYELONEPHRITIS, ACUTE	1 (3%)	(34)	
INFLAMMATION, ACUTE INFLAMMATION, CHRONIC	5 (16%)		1 (3%)
INFLAMMATION, CHRONIC FOCAL	5 (10%)	1 (3%)	
GLOMERULOSCLEROSIS, NOS		2 (6%)	1 (3%)
NECROSIS, MEDULLARY		2 (6%)	5 (16%)
HYPERPLASIA, EPITHELIAL		1 (3%)	
#KIDNEY/MEDULLA	(31)	(32)	(32)
MINERALIZATION	1 (3%)		
*KIDNEY/TUBULE	(31)	(32)	(32)
DILATATION, NOS		3 (9%)	4 (13%)
CAST, NOS		10 (31%)	4 (13%)
CYST, NOS	4 (13%)		
#URINARY BLADDER	(25)	(15)	(8)
INFLAMMATION, NOS	1 (4%)		

	CONTROL	LOW DOSE	HIGH DOSE
INFLAMMATION, ACUTE	1 (4%)		
NDOCRINE SYSTEM			
<b>#</b> PITUITARY	(18)	(19)	(11)
CYST, NOS	3 (17%)		
# A DR EN A L	(30)	(31)	(30)
ANGIECTASIS	8 (27%)		
#ADRENAL CORTEX	(30)	(31)	(30)
HEMORRHAGIC CYST LIPOIDOSIS	9 (30%)		1 (3%
HYPERPLASIA, NOS	1 (3%)		
#THYROID	(28)	(28)	(24)
CYSTIC FOLLICLES	1 (4%)		
FOLLICULAR CYST, NOS Hyperplasia, C-Cell	1 (4%) 3 (11%)	1 (4%)	
EPRODUCTIVE SYSTEM *NAMMARY GLAND CYST, NOS	(35)	(33) 1 (3%)	(33)
#UTTERUS	(30)	(30)	(27)
PYOMET RA			1 (4%
INFLAMMATION, ACUTE Abscess, nos	2 (7%)		1 (4%
ATROPHY, NOS			2 (7%
#UTERUS/ENDOMETRIUM	(30)	(30)	(27)
CYST, NOS Inflammation, acute	2 (7%) 2 (7%)		
HYPERPLASIA, NOS	2 (7%)	1 (3%)	
HYPERPLASIA, CYSTIC			2 (7%
#O VAR Y	(26)	(29)	(21)
CYSTIC FOLLICLES Follicular cyst, nos	1 (4%) 1 (4%)	1 (3%)	1 (5%

NERVOUS SYSTEM

NONE

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

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

	CONTROL	LOW DOSE	HIGH DOSE
SPECIAL SENSE ORGANS			
*EYE INFLAMMATION, ACUTE CATARACT	(35) 2 (6%) 1 (3%)	(33)	(33)
*EYE/CORNEA INFLAMMATION, ACUTE	(35) 1 (3 <b>%</b> )	(33)	(33)
*EYE/RETINA INFLAMMATION, NOS	(35) 21 (60%)	(33)	(33)
*EYE/LACRIMAL GLAND INFLAMMATION, ACUTE SUPPURATIVE	(35) 1 (3%)	(33)	(33)
*HARDERIAN GLAND ABSCESS, NOS INFLAMMATION, CHRONIC INFLAMMATION, CHRONIC SUPPURATIV	(35) 1 (3%)	(33) 1 (3%) 1 (3%)	(33) 1 (3%)
USCULOSKELETAL SYSTEM			
*SKELETAL MUSCLE	(35) 1 (3%)	(33)	(33)
ODY CAVITIES			
*ABDOMINAL WALL INFLAMMATION, CHRONIC	(35) 1 (3%)	(33)	(33)
*PERITONEAL CAVITY INFLAMMATION, CHRONIC DIFFUSE	(35)	(33) 1 (3%)	(33)
*PLEURA INFLAMMATION, CHRONIC	<b>(</b> 35)	(33) 1 (3%)	(33)
LL OTHER SYSTEMS			
NONE			
PECIAL MORPHOLOGY SUMMARY			
AUTO/NECROPSY/NO HISTO	4	و هر برو چې وې و و و و و و و و و و و و و و و و	
NUMBER OF ANIMALS WITH TISSUE EXAMINATION NUMBER OF ANIMALS NECROPSIED	NED MICROSCOPI	CALLY	

	CONTROL	LOW DOSE	HIGH DOSE
AUTOLYSIS/NO NECROPSY		2	2
* NUMBER OF ANIMALS WITH TISSUE EXAMINED * NUMBER OF ANIMALS NECROPSIED	MICROSCOPI	CALLY	

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APPENDIX D

SUMMARY OF THE INCIDENCE OF NONNEOPLASTIC LESIONS IN MICE ADMINISTERED UDD IN THE DIET

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## TABLE D1.

### SUMMARY OF THE INCIDENCE OF NONNEOPLASTIC LESIONS IN MALE MICE ADMINISTERED UDD IN THE DIET

	CONTROL	LOW DOSE	HIGH DOSE
ANIHALS INITIALLY IN STUDY	50	50	50
ANIMALS NECROPSIED ANIMALS EXAMINED HISTOPATHOLOGICALLY	50 49	50 50	48 48
INTEGUMENTARY SYSTEM			
	(50)	(50)	(48)
ULCER, FOCAL INFLAMMATION, ACUTE/CHRONIC			1 (2%) 1 (2%)
INFLAMMATION, CHRONIC DIFFUSE			1 (2%)
ACANTHOSIS			6 (13%)
RESPIRATORY SYSTEM			
#TRACHEA	(45)	(46)	(41)
HYPERPLASIA, EPITHELIAL			2 (5%)
*LUNG	(49)	(48)	(48)
INPLAMMATION, NOS INFLAMMATION, INTERSTITIAL	1 (2%)		1 (2%)
PNEUMONIA, CHRONIC MURINE		1 (2%)	
PNEUMONIA INTERSTITIAL CHRONIC HYPERPLASIA, ADENOMATOUS		6 (13%) 2 (4%)	2 (4%)
HYPERPLASIA, ALVEOLAR EPITHELIUM	1 (2%)		
EMATOPOIETIC SYSTEM			
#SPLEEN	(48)	(48)	(44)
ATROPHY, FOCAL Lymphoid depletion		1 (2%)	1 (2%) 2 (5%)
HYPERPLASIA, LYMPHOID		2 (4%)	3 (7%)
*LUMBAR LYMPH NODE	(1)	(31)	(25)
INFLAMMATION, CHRONIC			1 (4%)
#MESENTERIC L. NODE INPLANMATION, CHRONIC	(1)	(31)	(25) 1 (4%)

	CONTROL	LOW DOSE	HIGH DOSE
#AXILLARY LYMPH NODE INFLAMMATION, CHRONIC	(1)	(31)	(25) 1 (4%)
*INGUINAL LYMPH NODE INFLAMMATION, CHRONIC	(1)	(31)	(25) 2 (8%)
IRCULATORY SYSTEM			
<pre>#HEART     PERIARTERITIS</pre>	(49)	(50)	(46) 1 (2%)
*MYOCARDIUM INFLAMMATION, CHRONIC FOCAL	(49)	(50)	(46) 1 (2%)
DIGESTIVE SYSTEM			
*LIVER HEMORRHAGE INFLAMMATION, ACUTE/CHRONIC INFLAMMATION, CHRONIC HEPATITIS, TOXIC NECROSIS, FOCAL METAMORPHOSIS PATTY BASOPHILIC CYTO CHANGE	(49)	(50) 1 (2%) 5 (10%) 1 (2%) 1 (2%) 2 (4%) 1 (2%)	(48) 1 (2% 1 (2% 1 (2%)
#STOMACH HYPERPLASIA, EPITHELIAL HYPERKERATOSIS ACANTHOSIS	(49)	(49) 1 (2%) 1 (2%)	(45) 1 (2%)
*GASTRIC MUSCULARIS NECROSIS, DIFFUSE	(49)	(49)	(45) 1 (2%)
RINARY SYSTEM			
#KIDNEY INFLAMMATION, INTERSTITIAL GLOMERULOSCLEROSIS, NOS	(49)	(50)	(48) 2 (4%) 1 (2%)
#URINARY BLADDER CALCULUS, NOS		(9) 1. (11%)	

	CONTROL	LOW DOSE	HIGH DOSE
INFLAMMATION, CHRONIC DIFFUSE		1 (11%)	
NDOCRINE SYSTEM			
#THYROID ATROPHY, FOCAL	(39)	(37)	(31) 1 (3%
*PARATHYROID CYST, NOS	(15)	(10)	(17) 1 (6%
EPRODUCTIVE SYSTEM			
*PREPUTIAL GLAND DILATATION, NOS INFLAMMATION, CHRONIC SUPPURATIV	(50) 1 (2%) 1 (2%)	(50)	(48) 1 (2%
<pre>#TESTIS GRANULOMA, SPERMATIC ATROPHY, NOS</pre>	(49) 1 (2%)	(49) 1 (2%)	(45)
IERVOUS SYSTEM			
PECIAL SENSE ORGANS			
USCULOSKELETAL SYSTEM			
ODY CAVITIES			
*PERITONBUM INFLAMMATION, CHRONIC	(50)	(50)	(48) <b>1 (</b> 2%
LL OTHER SYSTEMS			

TABLE D1.	MALE MICE: NONNEOPL	ASTIC LESIONS	(CONTINUED)

	CONTROL	LOW DOSE	HIGH DOSE
SPËCIAL MORPHOLOGY SUMMARY			
NO LESION REPORTED	26	18	16
AUTO/NECROPSY/NO HISTO AUTOLYSIS/NO NECROPSY	1		2

### TABLE D2.

## SUMMARY OF THE INCIDENCE OF NONNEOPLASTIC LESIONS IN FEMALE MICE ADMINISTERED UDD IN THE DIET

	CONTROL	LOW DOSE	HIGH DOSE
ANIMALS INITIALLY IN STUDY	50	50	50 1
ANIMALS MISSING ANIMALS NECROPSIED	5 <b>0</b>	49	40
ANIMALS EXAMINED HISTOPATHOLOGICALLY	50	49	39
INTEGUMENTARY SYSTEM			
*SKIN ACARIASIS	(50)	(49)	(40) 2 (5%)
RESPIRATORY SYSTEM			
#TRACHEA Hyperplasia, epithelial	(45)	(44)	(24) 1 (4%)
·	(5.0)	(1) 7)	
*LUNG/BRONCHIOLE HYPERPLASIA, EPITHELIAL	(50)	(47)	(37) 1 (3%)
*LUNG	(50)	(47)	(37)
CONGESTION, NOS INFLAMMATION, NOS	2 (4%)	1 (2%)	1 (3%)
INPLAMMATION, INTERSTITIAL	- (***)	1 (2%)	2 (5%)
BRONCHOPNEUMONIA, ACUTE Lobar pneumonia, acute			2 (5%) 1 (3%)
PNEUMONIA, CHRONIC MURINE		2 (4%)	3 (8%)
PNEUMONIA INTERSTITIAL CHRONIC Hyperplasia, alveolar epithelium	1 (2%)		6 (16%)
HEMATOPOIETIC SYSTEM			
#BONE MARROW	(48)	(43)	(24)
HYPERPLASIA, HEMATOPOIETIC	-	3 (7%)	
*SPLEEN	(50)	(46)	(39)
LYMPHOID DEPLETION HYPERPLASIA, HEMATOPOIETIC		1 (2%)	2 (5%) 2 (5%)
HYPERPLASIA, LYMPHOID HEMATOPOIESIS	6 (12%)	7 (15%) 1 (2%)	5 (13%)

	CONTROL	LOW DOSE	HIGH DOSE
<pre>#LYMPH NODE     HYPERPLASIA, LYMPHOID</pre>	(5) 1 (20%)	(11)	(6)
*BRONCHIAL LYMPH NODE INFLAMMATION, NOS	(5)	(11) 1 (9%)	(6)
<pre>\$LUMBAR LYMPH NODE INFLAMMATION, CHRONIC</pre>	(5)	(11) 1 (9%)	(6) 1 (17%)
<pre>#RENAL LYMPH NODE INFLAMMATION, CHRONIC HYPERPLASIA, LYMPHOID</pre>	(5)	(11) 1 (9%) 1 (9%)	(6) 1 (17%)
CIRCULATORY SYSTEM			
NONE			
DIGESTIVE SYSTEM			
<pre>#LIVER ABSCESS, NOS INFLAMMATION, ACUTE/CHRONIC INFLAMMATION, CHRONIC FIBROSIS CIRRHOSIS, NOS HEPATITIS, TOXIC NECROSIS, NOS MEGALOCYTOSIS HYPERPLASIA, NOS</pre>	(50)	(47) 2 (4%)	(38) 1 (3%) 1 (3%) 3 (8%) 2 (5%) 5 (13%) 3 (8%) 1 (3%)
HYPERPLASIA, HEMATOPOIETIC HEMATOPOIESIS GRANULOPOIESIS	( (2%)	3 (6%) 2 (4%)	1 (3%)
<pre>#LIVER/HEPATOCYTES NECROSIS, NOS</pre>	(50) 1 (2%)	(47)	(38)
*BILE DUCT HYPERPLASIA, NOS	(50)	(49)	(40) 1 (3%)
*PANCREAS DILATATION/DUCTS <u>INFLAMMATION, CHRONIC SUPPURATIV</u>	(26) 1 (4%)	(45) 1 (2%)	(25) <u>1 (4%)</u>

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

	CONTROL	LOW DOSE	HIGH DOSE
<pre>#PANCREATIC ACINUS ATROPHY, NOS</pre>	(26)	(45) 1 (2%)	(25)
IRINARY SYSTEM			
*KIDNEY	(50)	(47)	(39)
LYMPHOCYTIC INFLAMMATORY INFILT INFLAMMATION, INTERSTITIAL GLOMERULOSCLEROSIS, NOS	2 (4%)	7 (15%) 2 (4%)	5 (13%)
*KIDNEY/GLOMERULUS AMYLOIDOSIS	(50) 1 (2%)	(47)	(39)
*KIDNEY/TUBULE NECROSIS, NOS HYPOPLASIA, NOS	(50)	(47)	(39) 1 (3%) 1 (3%)
NDOCRINE SYSTEM			
#ADRENAL MEDULLA CYST, NOS	(43)	(29) 1 (3%)	(35)
REPRODUCTIVE SYSTEM			
*UTERUS	(49)	(48)	(26)
HYDROMETRA PYOMETRA	4 (8%)	1 (2%) 1 (2%)	
ATROPHY, NOS			
#UTERUS/ENDOMETRIUM	(49)	(48) 6 (139)	(26) 3 (12%)
#UTERUS/ENDOMETRIUM INFLAMMATION, SUPPURATIVE HYPERPLASIA, DIFFUSE	1 (2%)	6 (13%)	3 (12%)
#UTERUS/ENDOMETRIUM INFLAMMATION, SUPPURATIVE HYPERPLASIA, DIFFUSE HYPERPLASIA, CYSTIC	1 (2%) 48 (96%)	6 (13%) 37 (77%)	3 (12%) 18 (69%)
#UTERUS/ENDOMETRIUM INFLAMMATION, SUPPURATIVE HYPERPLASIA, DIFFUSE	1 (2%)	6 (13%)	3 (12%)
#UTER US/ENDOMETRIUM INFLAMMATION, SUPPURATIVE HYPERPLASIA, DIFPUSE HYPERPLASIA, CYSTIC #UTER US/MYOMETRIUM	1 (2%) 48 (96%)	6 (13%) 37 (77%) (48)	3 (12%) 18 (69%)

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

	CONTROL	LOW DOSE	HIGH DOSE
FOLLICULAR CYST, NOS HEMORRHAGIC CYST ABSCESS, NOS ABSCESS, CHRONIC	5 (25%)	2 (6%) 1 (3%)	2 (10) 2 (10) 1 (5%)
NERVOUS SYSTEM			
*BRAIN/MENINGES INFLAMMATION, CHRONIC FOCAL	(47)	(44) 1 (2 <b>%</b> )	(27)
SPECIAL SENSE ORGANS			
NONE			
MUSCULOSKELETAL SYSTEM			
NONE			
BODY CAVITIES			
*PERITONEUM	(50)	(49)	(40)
INFLAMMATION, CHRONIC INFLAMMATION, CHRONIC FOCAL INFLAMMATION, CHRONIC SUPPURATI	V	4 (8%)	1 (3%) 1 (3%)
ALL OTHER SYSTEMS			
ADIPOSE TISSUE LIPOGRANULOMA	1		
SPECIAL MORPHOLOGY SUMMARY			
NO LESION REPORTED	1	3	2
ANIMAL MISSING/NO NECROPSY	•	5	1
AUTO/NECROPSY/HISTO PERF AUTO/NECROPSY/NO HISTO			2
AUTOLYSIS/NO NECROPSY		1	9

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

APPENDIX E

### ANALYSES OF THE INCIDENCE OF PRIMARY TUMORS IN RATS ADMINISTERED UDD IN THE DIET

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Topography: Morphology	Control	Low Dose	High Dose
Integumentary System: Fibroma of the Subcutaneous Tissue (b)	3/34 (9)	0/33 (0)	0/35 (0)
<b>P Values</b> (c,d)	P = 0.036 (N)	N.S.	N.S.
Relative Risk (f) Lower Limit Upper Limit		0.000 0.000 1.687	0.000 0.000 1.594
Weeks to First Observed Tumor	96		
Stomach: Papilloma, NOS (b)	0/31 (0)	0/33 (0)	2/33 (6)
P Values (c,d)	N.S.		N.S.
Relative Risk (f) Lower Limit Upper Limit		· · · · · · · · · · · · · · · · · ·	Infinite 0.282 Infinite

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### Table El. Analyses of the Incidence of Primary Tumors in Male Rats Administered UDD in the Diet (a)

Weeks to First Observed Tumor

(continued)			
Topography: Morphology	Control	Low Dose	High Dose
Pituitary: Adenoma, NOS (b)	2/16 (13)	0/21 (0)	0/16 (0)
P Values (c,d)	N.S.	N.S.	N.S.
Relative Risk (ī) Lower Limit Upper Limit		0.000 0.000 2.475	0.000 0.000 3.190
Weeks to First Observed Tumor	110		
Adrenal: Cortical Adenoma (b)	7/31 (23)	4/30 (13)	2/34 (6)
P Values (c,d)	P = 0.039 (N)	N.S.	N.S.
Relative Risk (f) Lower Limit Upper Limit		0.590 0.141 2.068	0.261 0.028 1.245
Weeks to First Observed Tumor	91	110	110

(continued)

Topography: Morphology	Control	Low Dose	High Dose
Adrenal: Pheochromocytoma (b)	6/31 (19)	0/30 (0)	2/34 (6)
P Values (c,d)	P = 0.047 (N)	P = 0.013 (N)	N.S.
Departure from Linear Trend (e)	P = 0.038		
Relative Risk (f)		0.000	0.304
Lower Limit Upper Limit		0.000 0.631	0.032 1.554
Weeks to First Observed Tumor	86		110
Thyroid: Follicular-cell Adenoma			
or Carcinoma (b)	3/29 (10)	0/33 (0)	1/33 (3)
P Values (c,d)	N.S.	N.S.	N.S.
Relative Risk (f)		0.000	0.293
Lower Limit		0.000	0.006
Upper Limit		1.437	3.417
Weeks to First Observed Tumor	97		110

Tanaanahuutta Ménahikitaan	Control	Low	High
Topography: Morphology	Control	Dose	Dose
Thyroid: Cystadenoma, NOS (b)	0/29 (0)	2/33 (6)	0/33 (0)
P Values (c,d)	N.S.	N.S.	
Relative Risk (f)		Infinite	
Lower Limit		0.265	
Upper Limit		Infinite	
Weeks to First Observed Tumor		. 110	<b>••••</b>
Thyroid: C-cell Adenoma (b)	3/29 (10)	0/33 (0)	0/33 (0)
P Values (c,d) Abase a segue se do consequese	P = 0.029 (N)	N.S.	N.S.
Relative Risk (f)		0.000	0.000
Lower Limit		0.000	0.000
Upper Limit		1.437	1.437
Weeks to First Observed Tumor	110		

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		Low	High
Topography: Morphology	Control	Dose	Dose
Parathyroid: Adenoma, NOS (b)	2/25 (8)	0/27 (0)	0/27 (0)
P Values (c,d)	N.S.	N.S.	N.S.
Relative Risk (f)		0.000	0.000
Lower Limit		0.000	0.000
Upper Limit		3.057	3.057
Weeks to First Observed Tumor	110	'	
Pancreatic Islets: Islet-cell	n - <u> </u>		
Adenoma (b)	1/24 (4)	2/33 (6)	1/31 (3)
P Values (c,d)	N.S.	N.S.	N.S.
		1.455	0.774
Relative Risk (f)		0.081	0.010
Relative Risk (f) Lower Limit			60 00C
Relative Risk (f) Lower Limit Upper Limit		83.169	58.826

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Topography: Morphology	Control	Low Dose	High Dose
Tunica Vaginalis: Mesothelioma, NOS (b)	2/34 (6)	0/33 (0)	0/35 (0)
P Values (c,d)	N.S.	N . S .	N.S.
Relative Risk (f)		0.000	0.000
Lower Limit		0.000	0.000
Upper Limit		3.435	3.246
Weeks to First Observed Tumor	81		

(a) Dosed groups received 5,000 or 10,000 ppm.

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

(c) Beneath the incidence of tumors in the control group is the probability level for the Cochran-Armitage test when P is 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 control group when P is less than 0.05; 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 is less than 0.05 for any comparison.

(f) The 95% confidence interval of the relative risk between each dosed group and the control group.

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Topography: Morphology	Control	Low Dose	High Dose
Pituitary: Chromophobe Adenoma (b)	4/18 (22)	1/19 (5)	0/11 (0)
P Values (c,d)	P = 0.045 (N)	N.S.	N.S.
Relative Risk (f) Lower Limit Upper Limit		0.237 0.005 2.106	0.000 0.000 1.589
Weeks to First Observed Tumor	116	115	
Adrenal: Cortical Adenoma (b)	11/30 (37)	8/31 (26)	3/30 (10)
P Values (c,d)	P = 0.012 (N)	N.S.	P = 0.015 (N)
Relative Risk (f) Lower Limit Upper Limit		0.704 0.289 1.643	0.273 0.055 0.909
Weeks to First Observed Tumor	115	95	67

		Low	High
Topography: Morphology	Control	Dose	Dose
Adrenal: Cortical Adenoma or			
Carcinoma (b)	11/30 (37)	8/31 (26)	4/30 (13)
P Values (c,d)	P = 0.027 (N)	N.S.	P = 0.036 (N)
Relative Risk (f)		0.704	0.364
Lower Limit		0.289	0.096
Upper Limit		1.643	1.072
Weeks to First Observed Tumor	115	95	67
Adrenal Cortex: Cystadenoma, NOS (b)	0/30 (0)	0/31 (0)	2/30 (7)
P Values (c,d)	N.S.		N.S.
Relative Risk (f)			Infinite
Lower Limit			0.301
Upper Limit			Infinite
Weeks to First Observed Tumor			111

	0.000 3.310	0.000 3.834
	0.000	0.000
N.S.	N.S.	N.S.
2/28 (7)	0/28 (0)	0/24 (0)
115	114	111
••• 	0.005 2.322	0.006 2.680
	0.250	0.292
N.S.	N.S.	N.S.
4/28 (14)	1/28 (4)	1/24 (4)
Control	Dose	High Dose
	4/28 (14) N.S. 115 2/28 (7)	4/28 (14) 1/28 (4) N.S. N.S. 0.250 0.005 2.322 115 114 2/28 (7) 0/28 (0) N.S. N.S. 0.000 0.000

Topography: Morphology	Control	Low Dose	High Dose
iopography instructions			
Mammary Gland: Adenoma, NOS (b)	3/35 (9)	0/33 (0)	1/33 (3)
P Values (c,d)	N.S.	N.S.	N.S.
Relative Risk (f)		0.000	0.354
Lower Limit		0.000	0.007
Upper Limit		1.737	4.136
Weeks to First Observed Tumor	113	· · · · · · · · · · · · · · · · · · ·	
Mammary Gland: Fibroadenoma (b)	13/35 (37)	8/33 (24)	5/33 (15)
P Values (c,d)	P = 0.027 (N)	N.S.	P = 0.037 (N)
Relative Risk (f)		0.653	0.408
Lower Limit		0.272	0.129
Upper Limit		1.466	1.069
Weeks to First Observed Tumor	107	95	111

#### (continued)

- (a) Dosed groups received 5,000 or 10,000 ppm.
- (b) Number of tumor-bearing animals/number of animals examined at site (percent).
- (c) Beneath the incidence of tumors in the control group is the probability level for the Cochran-Armitage test when P is 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 control group when P is less than 0.05; 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 is less than 0.05 for any comparison.

(f) The 95% confidence interval of the relative risk between each dosed group and the control group.

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APPENDIX F

# ANALYSES OF THE INCIDENCE OF PRIMARY TUMORS IN MICE ADMINISTERED UDD IN THE DIET

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Topography: Morphology	Control	Low Dose	High Dose
Lung: Alveolar/Bronchiolar Carcinoma (b)	0/49 (0)	5/48 (10)	1/48 (2)
P Values (c,d)	N.S.	P = 0.027	N.S.
Departure from Linear Trend (e)	P = 0.008		· .
Relative Risk (f) Lower Limit Upper Limit	•	Infinite 1.289 Infinite	Infinite 0.055 Infinite
Weeks to First Observed Tumor		97	93
Lung: Alveolar/Bronchiolar Adenoma or Carcinoma (b)	8/49 (16)	11/48 (23)	6/48 (13)
P Values (c,d)	N.S.	N.S.	N.S.
Relative Risk (f) Lower Limit Upper Limit		1.404 0.565 3.665	0.766 0.236 2.322
Weeks to First Observed Tumor	92	97	93

## Table Fl. Analyses of the Incidence of Primary Tumors in Male Mice Administered UDD in the Diet (a)

Topography: Morphology	<u>Control</u>	Low Dose	High Dose
Spleen: Hemangioma (b)	0/48 (0)	3/48 (6)	1/44 (2)
P Values (c,d)	N.S.	N.S.	N.S.
Relative Risk (f) Lower Limit Upper Limit		Infinite 0.601 Infinite	Infinite 0.059 Infinite
Weeks to First Observed Tumor		97	93
Liver: Hepatocellular Carcinoma (b)	4/49 (8)	7/50 (14)	3/48 (6)
P Values (c,d)	N.S.	<b>N.S.</b>	N.S.
Relative Risk (f) Lower Limit Upper Limit		1.715 0.467 7.525	0.766 0.118 4.285
Weeks to First Observed Tumor	93	.97	94

# Table Fl. Analyses of the Incidence of Primary Tumors in Male Mice Administered UDD in the Diet (a)

andaria († 1915). 1913 – Antonio Maria, antonio († 1917). 1915 – Antonio Status, antonio († 1918). Antonio († 1918).

Topography: Morphology	Control	Low Dose	High Dose
Liver: Hepatocellular Adenoma or Carcinoma (b)	8/49 (16)	8/50 (16)	5/48 (10)
P Values (c,d)	N.S.	N.S.	N.S.
Relative Risk (f) Lower Limit Upper Limit		0.980 0.349 2.757	0.638 0.176 2.047
Veeks to First Observed Tumor	92	97	93
Stomach: Squamous-cell Papilloma (b)	5/49 (10)	0/49 (0)	0/45 (0)
Values (c,d)	P = 0.007 (N)	P = 0.028 (N)	P = 0.035 (N)
Relative Risk (f) Lower Limit Upper Limit		0.000 0.000 0.792	0.000 0.000 0.851
Jeeks to First Observed Tumor	92	an a	ана стана стана При стана стана При стана

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# Table Fl. Analyses of the Incidence of Primary Tumors in Male Mice Administered UDD in the Diet (a)

Topography: Morphology	Control	Low Dose	High Dose
Lung: Alveolar/Bronchiolar Adenoma (b)	3/50 (6)	2/47 (4)	5/37 (14)
P Values (c,d)	N.S.	N.S.	N.S.
Relative Risk (f) Lower Limit Upper Limit		0.709 0.061 5.913	2.252 0.467 13.614
Weeks to First Observed Tumor	91	92	91
Hematopoietic System: Lymphoma or Leukemia (b)	6/50 (12)	6/49 (12)	2/40 (5)
P Values (c,d)	N.S.	N.S.	N.S.
Relative Risk (f) Lower Limit Upper Limit		1.020 0.293 3.556	0.417 0.043 2.176
Weeks to First Observed Tumor	76	87	91

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

Table F2. Analyses of the Incidence of Primary Tumors in Female Mice Administered UDD in the Diet (a)

## (continued)

- (a) Dosed groups received 5,000 or 10,000 ppm.
- (b) Number of tumor-bearing animals/number of animals examined at site (percent).

(c) Beneath the incidence of tumors in the control group is the probability level for the Cochran-Armitage test when P is 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 control group when P is less than 0.05; 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 is less than 0.05 for any comparison.

(f) The 95% confidence interval of the relative risk between each dosed group and the control group.

## Review of the Bioassay of Dibenzo-p-Dioxin\* 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 Dibenzo-p-Dioxin for carcinogenicity.

The primary reviewer agreed with the conclusion in the report that Dibenzo-p-Dioxin was not carcinogenic in rats or mice, under the conditions of test. After a brief description of the experimental design, he noted the inadequate procedure by which the chronic dose levels were selected and the poor survival among high dose treated female mice. Despite the shortcomings, the primary reviewer said that the study still appeared to be valid. Based on the results of the bioassay, he said that Dibenzo-p-Dioxin would not appear to pose a carcinogenic risk to man.

The secondary reviewer agreed with the primary reviewer's critique.

A motion was approved unanimously that the report on the bioassay of Dibenzo-p-Dioxin be accepted as written.

#### Members present were:

Arnold Brown (Chairman), University of Wisconsin School of Medicine Joseph Highland, Environmental Defense Fund Marhael 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.

なU.S. GOVERNMENT PRINTING OFFICE: 1978-281-217/3268

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DHEW Publication No. (NIH) 79-1377