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FOR POSSIBLE CARCINOGENICITY

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

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REPORT ON THE BIOASSAY OF N,N'-DIETHYLTHIOUREA 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 N,N'-diethylthiourea conducted for the Carcinogenesis Testing Program, Division of Cancer Cause and Prevention, National Cancer Institute (NCI), National Institutes of Health, Bethesda, Maryland. This is one of a series of experiments designed to determine whether selected chemicals have the capacity to produce cancer in animals. Negative results, in which the test animals do not have a significantly greater incidence of cancer than control animals, do not necessarily mean the test chemical is not a carcinogen because the experiments are conducted under a limited set of circumstances. Positive results demonstrate that the test and indicate a potential risk to man. The actual determination of the risk to man from animal carcinogens requires a wider analysis.

<u>CONTRIBUTORS</u>: This bioassay of N,N'-diethylthiourea was conducted by Litton Bionetics, Inc., Bethesda, Maryland, initially under direct contract to the NCI and currently under a subcontract to Tracor Jitco, prime contractor for the NCI Carcinogenesis Testing Program.

The experimental design was determined by the NCI Project Officers, Dr. N. P. Page (1,2), Dr. E. K. Weisburger (1) and Dr. J. H. Weisburger (1,3). The principal investigators for the contract were Dr. F. M. Garner (4,5) and Dr. B. M. Ulland (4,5). Mr. S. Johnson (4) was the coprincipal investigator for the contract. Animal treatment and observation were supervised by Mr. R. Cypher (4), Mr. D. S. Howard (4) and Mr. H. D. Thornett (4); Mr. H. Paulin (4) analyzed dosed feed mixtures. Ms. J. Blalock (4) was responsible for data collection and assembly. Chemical analysis was performed by Midwest Research Institute (6) and the analytical results were reviewed by Dr. N. Zimmerman (7).

Histopathologic examinations were performed by Dr. N. J. Wosu (4) at Litton Bionetics, Inc., the pathology narratives were written by Dr. N. J. Wosu (4), and the diagnoses included in this report represent the interpretation of this pathologist. Histopathology findings and reports were reviewed by Dr. R. L. Schueler (8). Compilation of individual animal survival, pathology, and summary tables was performed by EG&G Mason Research Institute (9); the statistical analysis was performed by Mr. W. W. Belew (7,10) and Mr. R. M. Helfand (7), using methods selected for the Carcinogenesis Testing Program by Dr. J. J. Gart (11).

This report was prepared at METREK, a Division of The MITRE Corporation (7) under the direction of the NCI. Those responsible for this report at METREK are the project coordinator, Dr. L. W. Thomas (7), task leader Ms. P. Walker (7), senior biologist Mr. M. Morse (7), biochemist Mr. S. C. Drill (7), and technical editor Ms. P. A. Miller (7). The final report was reviewed by members of the participating organizations.

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SUMMARY

A bioassay for the possible carcinogenicity of N,N'-diethylthiourea was conducted using Fischer 344 rats and B6C3F1 mice. N,N'-Diethylthiourea was administered in the feed, at either of two concentrations, to groups of 50 males and 50 females of each species. Twenty animals of each sex and species, except for 19 male mice, were placed on test as controls. The high and low dietary concentrations of N,N'-diethylthiourea were, respectively, 250 and 125 ppm for rats and 500 and 250 ppm for mice. The compound was administered in the diet for 103 weeks, followed by an observation period of 1 week for all dosed groups.

There were no significant positive associations between the dosages of N,N'-diethylthiourea administered and mortality in rats or mice of either sex. Adequate numbers of animals in all groups survived sufficiently long to be at risk from late-developing tumors. Compound-related mean body weight depression was apparent among dosed male and female mice when compared to their respective controls, indicating that the concentrations of N,N'-diethylthiourea administered to mice may have approximated the maximum tolerated dosages.

There were statistically significant elevated incidences of follicular-cell carcinomas of the thyroid in high dose male rats. In addition, there were statistically significant elevated incidences of a combination of thyroid follicular-cell carcinomas and follicularcell adenomas in high dose male and female rats.

Under the conditions of this bioassay, N,N'-diethylthiourea was carcinogenic to Fischer 344 rats, causing follicular-cell carcinomas of the thyroid in males and follicular-cell neoplasms of the thyroid in females. There was no evidence for the carcinogenicity of the compound in B6C3F1 mice.

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I. INTRODUCTION

N,N'-Diethylthiourea (Figure 1) (NCI No. CO3816), a corrosion inhibitor and accelerator in elastomer manufacture, was selected for bioassay by the National Cancer Institute because of the structural similarity of this compound to ethylene thiourea, a tumorigen in hybrid mice (C57BL/6 x C3H/Anf and C57BL/6 x AKR) (Innes et al., 1969).

The Chemical Abstracts Service (CAS) Ninth Collective Index (1977) name for this compound is N,N'-diethylthiourea. * It is also called 1,3-diethyl-2-thiourea, and 1,3-diethylthiourea.

N,N'-Diethylthiourea is used as a corrosion inhibitor in solutions of hydrochloric acid or sulfuric acid for the pickling of iron or steel, and for reducing the corrosion of ferrous metals and aluminum alloys in brine (Hawley, 1971; Rose and Rose, 1966). N,N'-Diethylthiourea is also used as a vulcanization accelerator in the manufacture of elastomers (Hawley, 1971).

Specific production data for N,N'-diethylthiourea are not available; however, this compound is produced annually in quantities greater than 1000 pounds or \$1000 in value by two U.S. companies (Stanford Research Institute, 1977).

The potential for exposure to N,N'-diethylthiourea is greatest for workers involved in the production of this compound and the formulation and use of corrosion inhibitive solutions containing N,N'diethylthiourea, and those in the elastomer manufacturing industry.

^{*}The CAS registry number is 105-55-5.



FIGURE 1 CHEMICAL STRUCTURE OF N, N'-DIETHYLTHIOUREA

A. Chemicals

Practical-grade N,N'-diethylthiourea was purchased from Pfaltz and Bauer Chemical Company, Stamford, Connecticut. Chemical analysis was performed by Midwest Research Institute, Kansas City, Missouri. The experimentally determined range in melting point, 74° to 76°C, was close to that reported in the literature (77°C [Beilstein's Handbuch der Organischen Chemie, 1973]). Thin-layer chromatography (TLC) was performed utilizing two solvent systems (i.e., ethyl acetate and acetone: chloroform) and visualized by ultraviolet light, dichromate and heat. The plate developed with ethyl acetate revealed the presence of two spots, one of which was an impurity, remaining at the origin. Development with the second solvent system resulted in detection of no impurities. Elemental analysis was within the acceptable limits (5 percent) of experimental variation expected for C₅H₁₂N₂S, the molecular formula for N,N'-diethylthiourea. Titration of the thiourea function provided results greater than 99 percent of theoretical. High pressure liquid chromatography indicated the presence of two impurities. The results of infrared (IR) and nuclear magnetic resonance (NMR) analyses were consistent with those reported in the literature (Sadtler Standard Spectra). Ultraviolet/visible (UV/VIS) analysis revealed λ_{max} at 252 nm with a molar extinction coefficient

[&]quot;Similar to technical-grade (i.e., may contain minor impurities).

(ϵ) of 13.8 x 10³. The reported literature λ_{max} was at 250 nm and ϵ was 15.8 x 10³ (Gosaier and Rao, 1967).

A second batch of the compound was purchased nine months later from the same supplier. The experimentally determined range in melting point for this batch was 76° to 78°C. Elemental analysis was, as previously, within acceptable limits (5 percent) of experimental variation. TLC, performed as for the first batch, indicated no impurities. Titration of the thiourea function again provided results greater than 99 percent of theoretical. High speed liquid chromotography showed the presence of one impurity (0.1 percent of the total) of high motility. IR and NMR analyses were consistent with those reported in the literature (<u>Sadtler Standard Spectra</u>). UV/VIS analysis revealed λ_{max} at 215 and 240 nm with ϵ of 11 x 10³ and 14 x 10³, respectively.

Throughout this report the term N,N'-diethylthiourea is used to represent these batches of this practical-grade chemical.

B. Dietary Preparation

The basal laboratory diet for both dosed and control animals consisted of Wayne Lab-Blox[®] (Allied Mills, Inc., Chicago, Illinois). N,N'-Diethylthiourea was administered to the dosed animals as a component of the diet.

The chemical was removed from its container and a proper amount was blended with an aliquot of the ground feed using a mortar and pestle. Once visual homogeneity was attained, the mixture was placed in a 6 kg capacity Patterson-Kelley standard model twin-shell

stainless steel V-blender along with the remainder of the feed to be prepared. After 20 minutes of blending, the mixtures were placed in double plastic bags and stored in the dark at 4°C. The mixture was prepared once weekly.

Dosed feed preparations containing 250 and 500 ppm of N,N'-diethylthiourea were analyzed spectrophotometrically. The mean result immediately after preparation was 73.6 percent of theoretical (ranging from 62.8 to 83.2 percent) including correction for the analytical method of recovery used.

C. Animals

Two animal species, rats and mice, were used in the carcinogenicity bioassay. Fischer 344 rats and B6C3F1 mice were obtained through contracts of the Division of Cancer Treatment, National Cancer Institute. All rats were supplied by the Frederick Cancer Research Center, Frederick, Maryland. All mice were supplied by Charles River Breeding Laboratories, Inc., Wilmington, Massachusetts.

Rats and mice were approximately 4 weeks old when received. Upon receipt, animals were examined for visible signs of disease or parasites. Obviously ill or runted animals were culled. The remaining animals were quarantined for 2 weeks prior to initiation of test. Animals which did not manifest clinical signs of disease were placed on test at this time. Animals were assigned to groups and distributed among cages so that the average body weight per cage was approximately equal for a given species and sex.

D. Animal Maintenance

All animals were housed by species in temperature- and humiditycontrolled rooms. The temperature range was 22° to 26°C and the relative humidity was maintained between 45 and 55 percent. Incoming air was filtered through HEPA filters (Flanders Filters, McLean, Virginia) at a rate of 12 to 15 complete changes of room air per hour. Fluorescent lighting was provided 8 hours per day (9:00 a.m. to 5:00 p.m.).

All rats were housed four per cage by sex and all mice were housed five per cage by sex. Throughout the study dosed and control animals of both species were housed in polycarbonate cages (Lab Products, Inc., Garfield, New Jersey) suspended from aluminum racks. Racks were fitted with a continuous piece of stainless steel mesh over which a sheet of filter paper was firmly secured. Filter paper was changed at 2-week intervals, when the racks were sanitized. Clean cages and bedding were provided twice weekly. Ab-sorb-dri[®] hardwood chip bedding (Wilner Wood Products Company, Norway, Maine) was used in polycarbonate cages for the entire bioassay.

Acidulated water (pH 2.5) was supplied to animals in water bottles filled by an automated metering device that was checked daily for diluting accuracy. Water bottles were changed and washed twice weekly, and sipper tubes were washed at weekly intervals. During the period of chemical administration, dosed and control animals received treated or untreated Wayne Lab-Blox[®] meal as appropriate. The feed

was supplied in hanging stainless steel hoppers which were refilled three times per week and sanitized weekly. Food and water were available ad libitum for both species.

All dosed and control rats were housed in a room with other rats receiving diets containing^{*} 4-nitro-o-phenylenediamine (99-56-9); and 1-phenyl-3-methyl-5-pyrazolone (89-25-8); and other rats intubated with 3-(chloromethyl)pyridine hydrochloride (3099-31-8).

All dosed and control mice were housed in a room with mice receiving diets containing EDTA trisodium salt (150-38-9); 3,3'-dimethoxybenzidine-4,4'-diisocyanate (91-93-0); triphenyltin hydroxide (76-87-9); diaminozide (1596-84-5); carbromal (75-65-6); p-quinone dioxime (105-11-3); 4-amino-2-nitrophenol (119-34-6); other mice intubated with lithocholic acid (434-13-9); and other mice receiving I.P. injections of methiodol sodium (126-31-8).

E. Selection of Initial Concentrations

In order to establish the maximum tolerated concentrations of N,N'-diethylthiourea for administration to dosed animals in the chronic studies, subchronic toxicity tests were conducted with both rats and mice. Rats were distributed among five groups, each consisting of five males and five females. N,N'-Diethylthiourea was incorporated into the basal laboratory diet and supplied <u>ad libitum</u> to four of the five rat groups in concentrations of 147, 215, 316 and

CAS registry numbers are given in parentheses.

464 ppm. The remaining rat group served as a control group, receiving only the basal laboratory diet.

Mice were distributed among six groups, each consisting of five males and five females. N,N'-Diethylthiourea was incorporated into the basal laboratory diet and supplied <u>ad libitum</u> to five of the six mouse groups in concentrations of 680, 1000, 1470, 2160 and 3150 ppm. The sixth mouse group served as a control group, receiving only the basal laboratory diet.

The dosed dietary preparations were administered for a period of 7 weeks, followed by a 1-week observation period during which all animals were fed the basal laboratory diet. Individual body weights and food consumption data were recorded twice weekly throughout the study. Upon termination of the study all survivors were sacrificed and necropsied.

At the end of the subchronic test, mean body weight gain among male rats dosed with 316 ppm was 3 percent greater than the mean body weight gain of their controls, while female rats receiving the same concentration had a mean body weight gain 11 percent less than that of their controls. Mean body weight gain among male rats dosed with 215 ppm was 10 percent less than the mean body weight gain of their controls, while female rats receiving the same concentration had a mean body weight gain 1 percent less than that of their controls. One female rat receiving a concentration of 316 ppm died while

another had an arched back and rough coat. The high concentration selected for administration to dosed rats in the chronic bioassay was 250 ppm.

At the end of the subchronic test, mean body weight gain among male mice dosed with 680 ppm was 10 percent less than the mean body weight gain of their controls, while female mice receiving the same concentration had a mean body weight gain 8 percent less than that of their controls. The high concentration selected for administration to dosed mice in the chronic bioassay was 500 ppm.

F. Experimental Design

The experimental design parameters for the chronic study (species, sex, group size, concentrations administered, and duration of treated and untreated observation periods) are summarized in Tables 1 and 2.

All rats were approximately 6 weeks old at the time the test was initiated and were placed on test simultaneously. The dietary concentrations of N,N'-diethylthiourea utilized were 250 and 125 ppm. Throughout this report those rats receiving the former concentration are referred to as the high dose groups and those receiving the latter concentration are referred to as the low dose groups. Dosed rats were supplied with feed containing N,N'-diethylthiourea for 103 weeks followed by a l-week observation period.

All mice were approximately 6 weeks old at the time the test was initiated and were placed on test simultaneously. The dietary

TABLE 1

DESIGN SUMMARY FOR FISCHER 344 RATS N,N'-DIETHYLTHIOUREA FEEDING EXPERIMENT

	INITIAL GROUP SIZE	N, N'-DIETHYL- THIOUREA CONCENTRATION ^a	OBSERVAT TREATED (WEEKS)	ION PERIOD UNTREATED (WEEKS)
MALE				
CONTROL	20	0	0	104
LOW DOSE	50	125 0	103	1
HIGH DOSE	50	250 0	103	1
FEMALE				
CONTROL	20	0	0	104
LOW DOSE	50	125 0	103	1
HIGH DOSE	50	250 0	103	1

^a Concentrations given in parts per million.

TABLE 2

DESIGN SUMMARY FOR B6C3F1 MICE N,N'-DIETHYLTHIOUREA FEEDING EXPERIMENT

	INITIAL GROUP SIZE	N,N'-DIETHYL- THIOUREA CONCENTRATION ^a	OBSERVAT TREATED (WEEKS)	ION PERIOD UNTREATED (WEEKS)
MALE				
CONTROL	19	0	0	104
LOW DOSE	50	250 0	103	1
HIGH DOSE	50	500 0	103	1
FEMALE			· · · · · · · · · · · · · · · · · · ·	
CONTROL	20	0	0	104
LOW DOSE	50	250 0	103	1
HIGH DOSE	50	500 0	103	1

^aConcentrations given in parts per million.

concentrations of N,N'-diethylthiourea utilized were 500 and 250 ppm. Throughout this report those mice receiving the former concentration are referred to as the high dose groups and those receiving the latter concentration are referred to as the low dose groups. Dosed mice were supplied with feed containing N,N'-diethylthiourea for 103 weeks followed by a 1-week observation period.

G. Clinical and Histopathologic Examinations

Animals were weighed immediately prior to initiation of the experiment. From the first day, all animals were inspected twice daily for mortality. Food consumption data were collected at monthly intervals from 20 percent of the animals in each group. Body weights of rats were recorded once monthly throughout the bioassay. Body weights of mice were recorded once a week for the first 5 weeks and at monthly intervals thereafter.

All moribund animals or animals that developed large, palpable masses that jeopardized their health were sacrificed. A necropsy was performed on each animal regardless of whether it died, was sacrificed when moribund, or was sacrificed at the end of the bioassay. The animals were euthanized by carbon dioxíde asphyxiation, and were immediately necropsied. The histopathologic examination consisted of gross and microscopic examination of all major tissues, organs, and gross lesions taken from sacrificed animals and, whenever possible, from animals found dead.

Tissues were preserved in a 10 percent neutral buffered formalin solution, embedded in paraffin, sectioned, and stained with hematoxylin and eosin prior to microscopic examination.

Slides were prepared from the following tissues: skin, subcutaneous tissue, lungs and bronchi, trachea, bone marrow, spleen, lymph nodes, thymus, heart, salivary gland, liver, gallbladder (mice), pancreas, esophagus, stomach, small intestine, large intestine, kidney, urinary bladder, pituitary, adrenal, thyroid, parathyroid, testis, prostate, brain, tunica vaginalis, uterus, mammary gland, and ovary.

A few tissues were not examined for some animals, particularly for those that died early. Also, some animals were missing, cannibalized, or judged to be in such an advanced state of autolysis as to preclude histopathologic interpretation. Thus, the number of animals for which particular organs, tissues, or lesions were examined microscopically varies and does not necessarily represent the number of animals that were recorded in each group at the time that the test was initiated.

H. Data Recording and Statistical Analyses

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

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

Probabilities of survival were estimated by the product-limit procedure of Kaplan and Meier (1958) and are presented in this report in the form of graphs. Animals were statistically censored as of the time that they died of other than natural causes or were found to be missing; animals dying from natural causes were not statistically censored. Statistical analyses for a possible dose-related effect on survival used the method of Cox (1972) when testing two groups for equality and used Tarone's (1975) extensions of Cox's methods when testing 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 was examined (denominator). In most instances, the denominators included only those animals for which that site was examined histologically. However, when macroscopic examination was required to detect lesions prior to histologic sampling (e.g., skin or mammary

tumors), or when lesions could have appeared at multiple sites (e.g., lymphomas), the denominators consist of the numbers of animals necropsied.

The purpose of the statistical analyses of tumor incidence is to determine whether animals receiving the test chemical developed a significantly higher proportion of tumors than did the control animals. As a part of these analyses, the one-tailed Fisher exact test (Cox, 1970, pp. 48-52) was used to compare the tumor incidence of a control group to that of a group of treated animals at each dose level. When results for a number of treated groups, k, are compared simultaneously with those for a control group, a correction to ensure an overall significance level of 0.05 may be made. The Bonferroni inequality (Miller, 1966, pp. 6-10) 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, pp. 362-365), was also used when appropriate. Under the assumption of a linear trend, this test determined 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 was a positive dose relationship. This method also provides a two-tailed test of departure from linear trend.

A time-adjusted analysis was applied when numerous early deaths resulted from causes that were not associated with the formation of tumors. In this analysis, deaths that occurred before the first tumor was observed were excluded by basing the statistical tests on animals that survived at least 52 weeks, unless a tumor was found at the anatomic site of interest before week 52. When such an early tumor was found, comparisons were based exclusively on animals that survived at least as long as the animal in which the first tumor was found. Once this reduced set of data was obtained, the standard procedures for analyses of the incidence of tumors (Fisher exact tests, Cochran-Armitage tests, etc.) were followed.

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

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

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

III. CHRONIC TESTING RESULTS: RATS

A. Body Weights and Clinical Observations

No evidence of mean body weight depression was associated with compound administration in either male or female rats (Figure 2).

No abnormal clinical signs were recorded.

B. Survival

The estimated probabilities of survival for male and female rats in the control and N,N'-diethylthiourea-dosed groups are shown in Figure 3. The Tarone test for association between increased dosage and mortality was not significant for either males or females.

There were adequate numbers of male rats at risk from latedeveloping tumors as 82 percent (41/50) of the high dose, 82 percent (41/50) of the low dose, and 80 percent (16/20) of the controls survived on test until the termination of the study.

For females 84 percent (42/50) of the high dose, 88 percent (44/50) of the low dose, and 90 percent (18/20) of the controls survived on test until the termination of the study. Thus, there were adequate numbers of female rats at risk from late-developing tumors.

C. Pathology

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).



FIGURE 2 GROWTH CURVES FOR N,N'-DIETHYLTHIOUREA CHRONIC STUDY RATS



FIGURE 3 SURVIVAL COMPARISONS OF N,N'-DIETHYLTHIOUREA CHRONIC STUDY RATS

A relatively high incidence of thyroid tumors was observed and appeared to be related to the dietary administration of N,N'-diethylthiourea. The summary of thyroid tumor incidence is as follow:

	Males			Females		
	Control	Low Dose	High Dose	Control	Low Dose	High Dose
Thyroid Number of Animals with Tissues Examined Histopathologically	(18)	(45)	(48)	(18)	(46)	(46)
C-Cell Adenoma	0	0	2	0	1	1
C-Cell Carcinoma	1	0	1	0	0	1
Follicular-Cell Adenoma (All Types)	0	0	6	0	4	9
Follicular-Cell Carcinoma (All types)	0	1	11	0	1	8

Nearly all of these neoplasms were recognized and described during gross examination. Microscopically they were of follicular-cell as well as C-cell origin and included benign-appearing as well as malignant types. C-cell adenomas were discrete, well-delineated and generally consisted of a solid arrangement of monomorphous welldifferentiated cells. The malignant C-cell neoplasms were more pleomorphic and showed a less organized cellular arrangement, but remained well-differentiated and had moderate to low mitotic activity. Although generally less well-delineated than the adenomas, there was no extra glandular invasion or metastasis. The follicular adenomas were generally nodular, well-differentiated and in many cases cystic. They were mostly papillary in arrangement. The malignant follicular-cell neoplasms were generally large and showed variable histologic appearance even within the same neoplasm. Follicular, solid and papillary patterns, as well as combinations of these were recognized. Most of these were markedly cystic as well. The degree of differentiation was variable. Many of these destroyed adjacent parenchyma by invasion as well as by comparison. Three of these tumors invaded local tissue, the most frequent sites being the trachea and lungs. None was observed to metastasize to distant sites. Occasionally the same animal had more than one type of thyroid tumor (e.g., C-cell and follicular-cell types within the same lobe or benign and malignant tumors within contralateral lobes). Such neoplasms were listed individually. Thus, the number of neoplasms may be found to exceed the number of animals bearing them.

There were a few neoplasms found in other organs. These were similar in type, incidence, and distribution in dosed and control groups and were, therefore, not considered to be associated with compound administration.

Thyroid hyperplasia (cystic and follicular-cell) was commonly recognized and appeared to be related to dietary administration and dosage of the compound. Other nonneoplastic lesions were of the frequency and severity expected in aged Fischer 344 rats.

It was concluded from this pathologic examination that under the conditions of this bioassay N,N'-diethylthiourea was
carcinogenic in Fischer 344 rats, inducing thyroid neoplasms and hyperplasia.

D. Statistical Analyses of Results

The results of the statistical analyses of tumor incidence in rats are summarized in Tables 3 and 4. The analysis is included for every type of malignant tumor in either sex where at least two such tumors were observed in at least one of the control or N,N'-diethylthiourea-dosed groups and where such tumors were observed in at least 5 percent of the group.

For male rats, the incidence of follicular-cell carcinomas of the thyroid was significant (P = 0.001) using the Cochran-Armitage test when comparing the dosed groups to the control. The Cochran-Armitage test was supported by a significant (P = 0.021) Fisher exact test comparing the high dose group to the control. Furthermore, the combined incidences of follicular-cell carcinomas or follicular-cell adenomas of the thyroid in male rats resulted in a significant (P < 0.001) Cochran-Armitage test and a significant (P = 0.004) high dose Fisher exact test.

For female rats, the Cochran-Armitage test indicated a significant (P < 0.001) positive association between dose and the combined incidence of follicular-cell carcinomas or follicular-cell adenomas of the thyroid. This result was supported by a significant (P =0.001) high dose Fisher exact test comparison.

TABLE 3

ANALYSES OF THE INCIDENCE OF PRIMARY TUMORS AT SPECIFIC SITES IN MALE RATS TREATED WITH N,N'-DIETHYLTHIOUREA^a

TOPOGRAPHY: MORPHOLOGY	CONTROL	LOW DOSE	HIGH DOSE
Subcutaneous Tissue: Fibrosarcoma ^b	0/20(0.00)	3/50(0.06)	1/50(0.02)
P Values ^C	N.S.	N.S.	N.S.
Relative Risk (Control) ^d Lower Limit Upper Limit		Infinite 0.250 Infinite	Infinite 0.022 Infinite
Weeks to First Observed Tumor		87	104
Skin and Subcutaneous Tissue: Fibro- sarcoma or Neurofibrosarcoma ^b	0/20(0.00)	3/50(0.06)	2/50(0.04)
P Values ^C	N.S.	N.S.	N.S.
Relative Risk (Control) ^d Lower Limit Upper Limit		Infinite 0.250 Infinite	Infinite 0.123 Infinite
Weeks to First Observed Tumor		87	104
Hematopoietic System: Leukemia or Malignant Lymphoma ^b	2/20(0.10)	8/50(0.16)	2/50(0.04)
P Values ^C	N.S.	N.S.	N.S.
Relative Risk (Control) ^d Lower Limit Upper Limit		1.600 0.364 14.699	0.400 0.032 5.277
Weeks to First Observed Tumor	99	89	88

TOPOGRAPHY : MORPHOLOGY	CONTROL	LOW · DOSE	HIGH DOSE
Pituitary: Chromophobe Adenoma or			
Chromophobe Carcinoma ^b	0/17(0.00)	6/46(0.13)	6/48(0.13)
P Values ^C	N.S.	N.S.	N.S.
Relative Risk (Control) ^d		Infinite	Infinite
Lower Limit		0.624	0.598
Upper Limit		Infinite	Infinite
Weeks to First Observed Tumor		87	101
Adrenal: Pheochromocytoma ^b	1/18(0.06)	4/50(0.08)	3/50(0.06)
P Values ^C	N.S.	N.S.	N.S.
Relative Risk (Control) ^d		1.440	1.080
Lower Limit		0.159	0.096
Upper Limit		69.469	55,565
Weeks to First Observed Tumor	104	104	104
Thyroid: Follicular-Cell Carcinoma ^b	0/18(0.00)	1/45(0.02)	11/48(0.23)
P Values ^C	P = 0.001	N.S.	P = 0.021
Relative Risk (Control) ^d		Infinite	Infinite
Lower Limit		0.022	1.309
Upper Limit		Infinite	Infinite
Weeks to First Observed Tumor		104	91

TABLE 3 (CONTINUED)

TABLE 3 (CONTINUED)

TOPOGRAPHY: MORPHOLOGY	CONTROL	LOW DOSE	HIGH DOSE
Thyroid: Follicular-Cell Carcinoma or Follicular-Cell Adenoma ^b	0/18(0.00)	1/45(0.02)	15/48(0.31)
P Values ^C	P < 0.001	N.S.	P = 0.004
Relative Risk (Control) ^d Lower Limit Upper Limit	 	Infinite 0.022 Infinite	Infinite 1.857 Infinite
Weeks to First Observed Tumor		104	91
Thyroid: C-Cell Adenoma or C-Cell Carcinoma ^b	1/18(0.06)	0/45(0.00)	3/48(0.06)
P Values ^c	N.S.	N.S.	N.S.
Relative Risk (Control) ^d Lower Limit Upper Limit		0.000 0.000 7.461	1.125 0.100 57.811
Weeks to First Observed Tumor	104		104
Testis: Interstitial-Cell Tumor ^b	14/20(0.70)	37/49(0.76)	36/50(0.72)
P Values ^C	N.S.	N.S.	N.S.
Relative Risk (Control) ^d Lower Limit Upper Limit		1.079 0.793 1.629	1.029 0.753 1.579
Weeks to First Observed Tumor	94	88	88

TABLE 3 (CONCLUDED)

 $^{
m d}$ The 95% confidence interval on the relative risk of the treated group to the control group.

^aTreated groups received doses of 125 or 250 ppm in feed.

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

^CThe probability level for the Cochran-Armitage test is given beneath the incidence of tumors in the control group when P < 0.05; otherwise, not significant (N.S.) is indicated. The probability level for the Fisher exact test for the comparison of a treated group with the control group is given beneath the incidence of tumors in the treated group when P < 0.05; otherwise, not significant (N.S.) is indicated. For both Cochran-Armitage and Fisher exact tests a negative designation (N) indicates a lower incidence in the treated group(s) than in the control group.

TABLE 4

ANALYSES OF THE INCIDENCE OF PRIMARY TUMORS AT SPECIFIC SITES IN FEMALE RATS TREATED WITH N,N'-DIETHYLTHIOUREA^a

······································		LOW	HIGH
TOPOGRAPHY: MORPHOLOGY	CONTROL	DOSE	DOSE
Hematopoietic System: Leukemia or Malignant Lymphoma ^b	3/20(0.15)	7/50(0.14)	4/49(0.08)
P Values ^C	N.S.	N.S.	N.S.
Relative Risk (Control) ^d Lower Limit Upper Limit		0.933 0.245 5.215	0.544 0.104 3.477
Weeks to First Observed Tumor	104	89	83
Pituitary: Chromophobe Adenoma or Chromophobe Carcinoma ^b	5/18(0.28)	18/47(0.38)	22/45(0.49)
P Values ^C	N.S.	N.S.	N.S.
Relative Risk (Control) ^d Lower Limit Upper Limit		1.379 0.607 4.166	1.760 0.806 5.126
Weeks to First Observed Tumor	87	95	64
Thyroid: Follicular-Cell Carcinoma ^b	0/18(0.00)	1/46(0.02)	8/46(0.17)
P Values ^C	P = 0.006	N.S.	N.S.
Relative Risk (Control) ^d Lower Limit Upper Limit		Infinite 0.022 Infinite	Infinite 0.939 Infinite
Weeks to First Observed Tumor		104	100

TABLE 4 (CONTINUED)

TOPOGRAPHY: MORPHOLOGY	CONTROL	LOW DOSE	HIGH DOSE
Thyroid: Follicular-Cell Carcinoma or			
Follicular-Cell Adenoma ^b	0/18(0.00)	4/46(0.09)	17/46(0.37)
P Values ^C	P < 0.001	N.S.	P = 0.001
Relative Risk (Control) ^d		Infinite	Infinite
Lower Limit		0.380	2.227
Upper Limit		Infinite	Infinite
Weeks to First Observed Tumor		104	80
Mammary Gland: Fibroadenoma ^b	0/20(0.00)	6/50(0.12)	6/49(0.12)
P Values ^C	N.S.	N.S.	N.S.
Relative Risk (Control) ^d		Infinite	Infinite
Lower Limit		0.667	0.680
Upper Limit		Infinite	Infinite
Weeks to First Observed Tumor		101	84
Uterus: Endometrial Stromal Polyp ^b	4/19(0.21)	6/49(0.12)	4/48(0.08)
P Values ^C	N.S.	N.S.	N.S.
Relative Risk (Control) ^d		0.582	0.396
Lower Limit		0.161	0.085
Upper Limit		2.569	1.955
Weeks to First Observed Tumor	86	104	76

TABLE 4 (CONCLUDED)

^aTreated groups received doses of 125 or 250 ppm in feed.

 $^{\rm d}$ The 95% confidence interval on the relative risk of the treated group to the control group.

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

^CThe probability level for the Cochran-Armitage test is given beneath the incidence of tumors in the control group when P < 0.05; otherwise, not significant (N.S.) is indicated. The probability level for the Fisher exact test for the comparison of a treated group with the control group is given beneath the incidence of tumors in the treated group when P < 0.05; otherwise, not significant (N.S.) is indicated. For both Cochran-Armitage and Fisher exact tests a negative designation (N) indicates a lower incidence in the treated group(s) than in the control group.

There were no other significant positive associations between administration of the compound and an increased incidence of tumors at any site in either male or female rats.

Based upon these statistical results, the administration of N,N'-diethylthiourea was associated with the increased incidence of follicular-cell carcinomas of the thyroid in male and follicular-cell neoplasms of the thyroid in female Fischer 344 rats.

IV. CHRONIC TESTING RESULTS: MICE

A. Body Weights and Clinical Observations

Dose-related mean body weight depression was apparent in both male and female mice after week 30 (Figure 4).

No abnormal clinical signs were recorded.

B. Survival

The estimated probabilities of survival for male and female mice in the control and N,N'-diethylthiourea-dosed groups are shown in Figure 5. The Tarone test for association between dosage and mortality was not significant for either male or female mice.

The actual percentage of male and female mice surviving on test in the dosed and control groups are shown in Figure 6. There were adequate numbers of male mice at risk from late-developing tumors. Despite 2 low dose and 4 control males missing by week 18, 94 percent (47/50) of the high dose, 94 percent (47/50) of the low dose and 79 percent (15/19) of the controls survived on test for at least 80 weeks.

Eight females from the high dose group, 2 from the low dose group and 1 control were missing by week 22. There were, however, adequate numbers of female mice at risk from late-developing tumors as 60 percent (30/50) of the high dose, 66 percent (33/50) of the low dose and 70 percent (14/20) of the controls survived on test until the termination of the study.



FIGURE 4 GROWTH CURVES FOR N,N'-DIETHYLTHIOUREA CHRONIC STUDY MICE



FIGURE 5 SURVIVAL PROBABILITY COMPARISONS OF N,N'-DIETHYLTHIOUREA CHRONIC STUDY MICE



FIGURE 6 PERCENT SURVIVAL OF N,N'-DIETHYLTHIOUREA CHRONIC STUDY MICE

C. Pathology

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).

In both sexes, the neoplasms observed were similar in type and distribution in dosed and control mice, and were well within the incidence expected to occur spontaneously in aged B6C3F1 mice. The severity and incidence of nonneoplastic lesions were also not unusual.

Based on the results of this pathologic examination, N,N'-diethylthiourea was not carcinogenic in B6C3F1 mice under the conditions of this bioassay.

D. Statistical Analyses of Results

The results of the statistical analyses of tumor incidence in mice are summarized in Tables 5 and 6. The analysis is included for every type of malignant tumor in either sex where at least two such tumors were observed in at least one of the control or N,N'-diethylthiourea-dosed groups and where such tumors were observed in at least 5 percent of the group.

None of the statistical tests for any site in mice of either sex indicated a positive association between the administration of N,N'-diethylthiourea and an increased tumor incidence. Thus, under the conditions of this bioassay, there was no statistical evidence that N,N'-diethylthiourea was a carcinogen in B6C3F1 mice.

TABLE 5

TOPOGRAPHY : MORPHOLOGY	CONTROL	LOW DOSE	HIGH DOSE
Lung: Alveolar/Bronchiolar Adenoma or Alveolar/Bronchiolar Carcinoma ^b	2/13(0.15)	4/46(0.09)	6/46(0.13)
P Values ^C	N.S.	N.S.	N.S.
Relative Risk (Control) ^d Lower Limit Upper Limit		0.565 0.096 5.886	0.848 0.183 8.071
Weeks to First Observed Tumor	99	104	99
Hematopoietic System: Leukemia or Malignant Lymphoma ^b	3/15(0.20)	11/48(0.23)	12/49(0.24)
P Values ^C	N.S.	N.S.	N.S.
Relative Risk (Control) ^d Lower Limit Upper Limit		1.146 0.369 5.853	1.224 0.404 6.185
Weeks to First Observed Tumor	93	90	76
Circulatory System: Hemangioma or Hemangiosarcoma ^b	1/15(0.07)	1/48(0.02)	3/49(0.06)
P Values ^C	N.S.	N.S.	N.S.
Relative Risk (Control) ^d Lower Limit Upper Limit		0.313 0.004 24.060	0.918 0.083 47.229
Weeks to First Observed Tumor	104	104	99

ANALYSES OF THE INCIDENCE OF PRIMARY TUMORS AT SPECIFIC SITES IN MALE MICE TREATED WITH N,N'-DIETHYLTHIOUREA^a

TABLE 5 (CONCLUDED)

TOPOGRAPHY: MORPHOLOGY	CONTROL	LOW DOSE	HIGH DOSE
Liver: Hepatocellular Carcinoma ^b	2/14(0.14)	5/48(0.10)	2/49(0.04)
P Values ^C	N.S.	N.S.	N.S.
Relative Risk (Control) ^d Lower Limit Upper Limit		0.729 0.141 7.229	0.286 0.023 3.739
Weeks to First Observed Tumor	104	71	104
L iver: Hepatocellular Carcinoma or Hepatocellular Adenoma ^b	5/14(0.36)	7/48(0.15)	3/49(0.06)
P Values ^C	P = 0.006(N)	N.S.	P = 0.010(N)
Relative Risk (Control) ^d Lower Limit Upper Limit	 	0.408 0.143 1.439	0.171 0.033 0.788
Weeks to First Observed Tumor	93	71	104

^aTreated groups received doses of 250 or 500 ppm in feed.

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

^CThe probability level for the Cochran-Armitage test is given beneath the incidence of tumors in the control group when P < 0.05; otherwise, not significant (N.S.) is indicated. The probability level for the Fisher exact test for the comparison of a treated group with the control group is given beneath the incidence of tumors in the treated group when P < 0.05; otherwise, not significant (N.S.) is indicated. For both Cochran-Armitage and Fisher exact tests a negative designation (N) indicates a lower incidence in the treated group(s) than in the control group.

 d The 95% confidence interval on the relative risk of the treated group to the control group.

TABLE 6

		LOW	HIGH
TOPOGRAPHY: MORPHOLOGY	CONTROL	DOSE	DOSE
Hematopoietic System: Leukemia or		15 (10 (0. 01)	
Malignant Lymphoma ^b	8/19(0.42)	15/48(0.31)	9/41(0.22)
P Values ^C	N.S.	N.S.	N.S.
Relative Risk (Control) ^d		0.742	0.521
Lower Limit		0.374	0.224
Upper Limit		1.732	1.336
Weeks to First Observed Tumor	93	78	92
Uterus: Endometrial Stromal Polyp ^b	0/17(0.00)	3/45(0.07)	2/38(0.05)
P Values ^C	N.S.	N.S.	N.S.
Relative Risk (Control) ^d		Infinite	Infinite
Lower Limit	ويبيه والله فيتها	0.239	0.139
Upper Limit		Infinite	Infinite
Weeks to First Observed Tumor		62	104

ANALYSES OF THE INCIDENCE OF PRIMARY TUMORS AT SPECIFIC SITES IN FEMALE MICE TREATED WITH N,N'-DIETHYLTHIOUREA^a

^aTreated groups received doses of 250 or 500 ppm in feed.

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

^CThe probability level for the Cochran-Armitage test is given beneath the incidence of tumors in the control group when P < 0.05; otherwise, not significant (N.S.) is indicated. The probability level for the Fisher exact test for the comparison of a treated group with the control group is given beneath the incidence of tumors in the treated group when P < 0.05; otherwise, not significant (N.S.) is indicated. For both Cochran-Armitage and Fisher exact tests a negative designation (N) indicates a lower incidence in the treated group(s) than in the control group.

^dThe 95% confidence interval on the relative risk of the treated group to the control group.

In male mice a possible negative association between dose and the combined incidence of hepatocellular carcinomas or hepatocellular adenomas was noted.

To provide additional insight into the possible carcinogenicity of this compound, 95 percent confidence intervals on the relative risk have been estimated and entered in the tables based upon the observed tumor incidence rates. In many of the intervals shown in Tables 5 and 6, the value one is included; this indicates the absence of statistically significant results. It should also be noted that many of the confidence intervals have an upper limit greater than one, indicating the theoretical possibility of tumor induction in mice by N,N'-diethylthiourea that could not be established under the conditions of this test.

V. DISCUSSION

There were no significant positive associations between the dosages of N,N'-diethylthiourea administered and mortality in rats or mice of either sex. Adequate numbers of animals in all groups survived sufficiently long to be at risk from late-developing tumors. Compound-related mean body weight depression was apparent among dosed male and female mice when compared to their respective controls, indicating that the concentrations of N,N'-diethylthiourea administered to mice may have approximated the maximum tolerated dosages.

Neoplasms and hyperplasia of the thyroid were observed with greater frequency among dosed rats than among controls. When the incidences of follicular-cell carcinomas of the thyroid in male rats (i.e., 0/18, 1/45 [2 percent], and 11/48 [23 percent] in the control, low dose, and high dose, respectively) were analyzed, there was a statistically significant positive association between dosage and increased incidence. This finding was supported by the high dose to control Fisher exact comparison. In both sexes of rats, statistical analysis of the incidences of a combination of follicular-cell carcinomas and follicular-cell adenomas of the thyroid resulted in significant positive Cochran-Armitage tests. For males and females, the high dose to control Fisher exact comparisons were also significant.

For mice, none of the statistical tests for any site revealed a significant positive association between administration of the compound and increased tumor incidence.

Under the conditions of this bioassay, N,N'-diethylthiourea was carcinogenic to Fischer 344 rats, causing follicular-cell carcinomas of the thyroid in males and follicular-cell neoplasms of the thyroid in females. There was no evidence for the carcinogenicity of the compound in B6C3F1 mice.

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APPENDIX A

SUMMARY OF THE INCIDENCE OF NEOPLASMS IN RATS TREATED WITH N,N'-DIETHYLTHIOUREA

	CONTROL (UNTR) 11-1365	LOW DOSE 11-1363	HIGH DOSE 11-1361
ANIMALS JNITIALLY IN STUDY ANIMALS NECROPSIED ANIMALS EXAMINED HISTOPATHOLOGICAILY**	20 20	50 50 50	50 50 50
NTEGUMENTARY SYSTEM			
* SKJ N NEUROFIBROSARCOMA	(20)	(50)	(50) 1 (2%)
*SUBCUT TISSUE FIBROSARCOMA	(20)	(50) 3 (6%)	(50) 1 (2 %)
RESPIRATORY SYSTEM			
₩™RACHEA Follicular-cell carcinoma, invas	(19)	(44)	(46) 1 (2%)
<pre>#LUNG ALVEOLAR/BRONCHIOLAF ADENOMA ALVEOLAR/BRONCHIOLAR CARCINOMA POLLICULAR-CELL CARCINOMA, INVAS</pre>	(20)	(48) 1 (2%)	(49) 1 (2%) 1 (2%) 2 (4%)
OSTEOSARCOMA, METASTATIC		1 (2%)	
EMATOPOIETIC SYSTEM			
*MULTIPLE ORGANS LEUKEMIA,NOS UNDIFFERENTIATED LEUKEMIA	(20)	(50) 4 (8%) 1 (2%)	(5 0)
LYMPHOCYTIC LEUKEMIA Granulocytic leukemia Monocytic leukemia	1 (5%) 1 (5%)	2 (4%) 1 (2%)	1 (2%) 1 (2%)
#MESENTEPIC L. NODE OSTEOSARCOMA	(17)	(49) 1 (2%)	(44)
CIRCULATORY SYSTEM			
#HEAPT FOLLICULAP-CELL_CARCINOMA, INVAS_	(19)	(47)	(49) 1 (2%)

 TABLE AI

 SUMMARY OF THE INCIDENCE OF NEOPLASMS IN MALE RATS TREATED WITH N.N'-DIETHYLTHIOUREA

NUMBEP OF ANIMALS WITH TISSUE EXAMINED MICROSCOPICALLY * NUMBER OF ANIMALS NECROPSIED **EXCLUDES PARTIALLY AUTOLYZED ANIMALS

TABLE A1 (CONTINUED)

	CONTROL (UNTR) 11-1365	LCW DCSE 11-1363	HIGH DO SE 11-1361
IGESTIVE SYSTEM			
*SMALL INTESTINF NEOPIASM, NOS	(19)	(49)	(48) 1 (2 %)
ADENOCARCINOMA, NOS		1 (2%)	
*SMALL INTESTINAL SER OSTEOSAPCOMA	(19)	(49) 1 (2%)	(48)
RINARY SYSTEM			
*KIDNEY	(20)	(50)	(50)
LIPOSARCOMA O STEO SARCOMA		1 (2%) 1 (2%)	
DOCRINE SYSTEM			
#PITUITAFY	(17)	(46)	(48)
CHROMOPHOBE ADENOMA CHROMOPHOBE CAPCINOMA		6 (13%)	5 (10%) 1 (2%)
ADPENAL	(18)	(50)	(50)
PHEOCHROMOCYTOMA	1 (6%)	4 (8%)	3 (6%)
HEMANGIOMA OSTEOSARCOMA	1 (6%)	1 (2%)	
#THYROID	(18)	(45)	(48)
FOLLICULAR-CELL ADENOMA FOLLICULAR-CELL CARCINOMA		1 (2%)	6 (13%) 11 (23%)
C-CELL ADENOMA	a	. (2,2)	2 (4%)
C-CELL CAPCINOMA	1 (6%)		1 (2%)
#PAFATHYROIC ADENOMA, NOS	(13)	(29) 1 (3%)	(21)
·	(10)		(4.0)
*PANCREATIC ISLETS JSLET-CELL ADENOMA	(19)	(49) 2 (4%)	(48)
ISLET-CELL CARCINOMA	1 (5%)	· ·	
EPRODUCTIVE SYSTEM			
*PREPUTIAL GLAND	(20)	(50)	(50)
CARCINOMA_NOS			1 (2%)

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

TABLE A1 (CONTINUED)

ADDENONA, NOS 1 (2%) INTERSTITIAL-CELL TUMOR 14 (70%) 37 (76%) 36 (72%) YOUS SYSTEM 14 (70%) 37 (76%) 36 (72%) YOUS SYSTEM (19) (49) (49) YAIN (19) (49) (49) YOUS SYSTEM 1 (2%) 1 (2%) 1 (2%) YOUS SYSTEM 1 (5%) 1 (2%) 1 (2%) YOUS SYSTEM 1 (5%) 1 (2%) 1 (2%) YOUS SYSTEM 1 (5%) 1 (2%) 1 (2%) YOUN SELETAL SYSTEM 1 (5%) 1 (2%) 1 (2%) YOUL SKELETAL SYSTEM 1 (2%) 1 (2%) 1 (2%) YOUL SKELETAL SYSTEM 1 (2%) 1 (2%) 1 (2%) YOUL SKELETAL SYSTEM 1 (2%) 1 (2%) 1 (2%) YOUL SKELETAL SYSTEM 1 (2%) 1 (2%) 1 (2%) YOUL SKELETAL SYSTEM 1 (2%) 1 (2%) 1 (2%) YOUL SKELETAL SYSTEM 1 (2%) 1 (2%) 1 (2%) YOUL SKELETAL SYSTEM 1 (2%) 1 (2%) 1 (2%) YOUL SKELETAL SYSTEM 1 (2%) 1 (2%) <		CONTROL (UNTR) 11-1365	LCW DCSE 11-1363	HIGH DOSE 11-1361
YOUS SYSTEM AIN (19) (49) (49) OSTEDSARCOMA, METASTATIC 1 (2%) 1 (2%) 1 (2%) GLIOMA, NOS 1 (5%) 1 (2%) 1 (2%) FERDITIONMA 1 (5%) 1 (2%) 1 (2%) TAL SENSE ORGANS 1 (5%) 1 (2%) 1 (2%) TAL SENSE ORGANS (20) (50) (50) 1 (2%) TAL SENSE ORGANS (20) (50) 1 (2%) 1 (2%) WULOSKELETAL SYSTEM (20) (50) (50) 1 (2%) SCLE OF THORAX (20) (50) (50) 1 (2%) "CAVITIES (20) (50) (50) (50) NICA VAGINALIS (20) (50) (50) (50) MESOTHELIOMA, NOS 1 (2%) 1 (2%) 1 (2%) OTHER SYSTEMS (20) (50) (50) 1 (2%) NAL EISPOSTTION SUMMARY 1 (2%) 1 (2%) 1 (2%) MAL EISPOSTTION SUMMARY 3 6 6 6 MATURAL DEATHB 3 6 6 6 MORIBUND SACRIFICE <t< td=""><td>ADENOMA, NOS</td><td></td><td></td><td></td></t<>	ADENOMA, NOS			
NAIN (19) (49) (49) OSTEDSARCOMA, METASTATIC 1 (21) 1 (21) GLIOMA, NOS 1 (57) 1 (21) 1 (21) GLIOMA, NOS 1 (57) 1 (21) 1 1 (21) 1 1 (21) 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	TESTIS INTERSTITIAL-CELL TUMOR	(20) 14 (70%)	(49) 37 (76%)	(50) 36 (72%)
OSTEOSARCONA, METASTATIC 1 (2%) GLIOMA, NOS 1 (5%) IAL SENSE ORGANS 1 (5%) TAL SENSE ORGANS (20) TERNAL CAR (20) SQUAMOUS CELL PAPILLOMA 1 (2%) TULOSKELETAL SYSTEM (20) NICA VAGINALIS (20) NICA VAGINALIS (20) NICA VAGINALIS (20) OTHER SYSTEMS (20) ILTIPLE ORGANS (20) OTHER SYSTEMS (20) ILTIPLE ORGANS (20) MESOTHELIOMA, MALIGNANT 1 (2%) OTHER SYSTEMS (20) MESOTHELIOMA, MALIGNANT 1 (2%) OTHER SYSTEMS (20) MESOTHELIOMA, MALIGNANT 1 (2%) MAL DISPOSITION SUMMARY 1 (2%) MAL DISPOSITION SUMMARY 3 6 6 6 MATURAL DEATHØ 3 6 6 6 MATURAL DEATHØ 3 3 SCHEDULED SACRIFICE 1 3 3 ACCUDEWRALIK KILLED 3 3	RVOUS SYSTEM			
GLIOMA, NOS 1 (5%) 1 (2%) EPENDYMOMA 1 (5%) 1 (2%) SIAL SENSE ORGANS (20) (50) (50) TERNAL LAR (20) (50) 1 (2%) SQUAMOUS CELI PAPILLOMA (20) (50) 1 (2%) SULOSKELETAL SYSTEM (20) (50) (50) FOLLICULAR-CEIL CARCINOMA, INVAS (20) (50) (50) CAVITIES (20) (50) (50) (50) NICA VAGINALIS (20) (50) (50) (50) OTHER SYSTEMS (20) (50) (50) 1 (2%) OTHER SYSTEMS (20) (50) (50) 1 (2%) MESOTHELIOMA, MALIGNANT 1 (2%) 1 (2%) 1 (2%) MAL DISPOSITION SUMMARY 20 50 50 NATURAL DEATHD 3 6 6 MORTBUND SACRIFICE 1 3 3 SCHEDULED SACRIFICE 1 3 3		(19)		(49)
TERNAL EAR SQUAMOUS CELI PAPILLOMA(20)(50)(50) 1 (2%)UULOSKELETAL SYSTEMINCLE OF THORAX FOLLICULAR-CELL CARCINOMA, INVAS(20)(50)(50)CAVITIESNICA VAGINALIS MESOTHELIOMA, NOS(20)(50)(50)OTHER SYSTEMSILTIPLE ORGANS MESOTHELIOMA, MALIGNANT(20)(50)(50)ILTIPLE ORGANS MESOTHELIOMA, MALIGNANT(20)(50)(50)ILTIPLE ORGANS MESOTHELIOMA, MALIGNANT(20)(50)(50)INATURAL DEATHD SCHEDULED SACRIFICE366MORTBUND SACRIFICE ACCIDENTALLY KILLED133	GLIOMA, NOS EPENDYMOMA	1 (5%)		1 (2%)
SQUAMOUS CELI PAPILLOMA 1 (2%) SULOSKELETAL SYSTEM (20) (50) (50) SCLE OF THORAX (20) (50) 1 (2%) CAVITIES (20) (50) (50) NICA VAGINALIS (20) (50) (50) OTHER SYSTEMS (20) (50) (50) OTHER SYSTEMS (20) (50) (50) ILTIPLE ORGANS (20) (50) (50) MESOTHELIOMA, MALIGNANT 1 (2%) 1 (2%) IAL DISPOSITION SUMMARY 3 6 6 MORTBUND SACRIFICE 1 3 3 SCHEDULED SACRIFICE 1 3 3	CIAL SENSE ORGANS			
ISCLE OF THORAX (20) (50) (50) FOLLICULAR-CELL CARCINOMA, INVAS 1 (2%) CAVITIES NICA VAGINALIS (20) (50) (50) MESOTHELIOMA, NOS 1 (2%) OTHER SYSTEMS ILTIPLE ORGANS (20) (50) (50) MESOTHELIOMA, MALIGNANT 1 (2%) ILTIPLE ORGANS (20) (50) (50) (50) (50) MESOTHELIOMA, MALIGNANT 1 (2%) ILTIPLE ORGANS (20) (50) (50) (50) (50) (50) (50) (50) (5				1 (2%)
FOLLICULAR-CELL CARCINOMA, INVAS 1 (2%) CAVITIES (20) (50) (50) MESOTHELIOMA, NOS 1 (2%) 1 (2%) OTHER SYSTEMS (20) (50) (50) ILTIPLE ORGANS (20) (50) (50) MESOTHELIOMA, MALIGNANT 1 (2%) NAL EISPOSTTION SUMMARY 1 (2%) MAL EISPOSTTION SUMMARY 3 6 6 MORTBUND SACRIFICE 1 3 3 3 SCHEDULED SACRIFICE 1 3 3 3	CULOSKELETAL SYSTEM			
CAVITIES NICA VAGINALIS (20) (50) (50) MESOTHELIOMA, NOS 1 (2%) OTHER SYSTEMS ULTIPLE ORGANS (20) (50) (50) MESOTHELIOMA, MALIGNANT 1 (2%) INAL DISPOSITION SUMMARY NATURAL DEATH@ 3 6 6 MORTBUND SACRIFICE 1 3 3 SCHEDULED SACRIFICE 1 3 3				(50) 1 (2%)
MESOTHELIOMA, NOS 1 (2%) OTHER SYSTEMS (20) (50) NETTIPLE ORGANS (20) (50) MESOTHELIOMA, MALIGNANT 1 (2%) INAL DISPOSITION SUMMARY 11 (2%) NATURAL DEATHD 3 6 MORTBUND SACRIFICE 1 3 3 SCHEDULED SACRIFICE 3 3 3	Y CAVITIES			
OTHER SYSTEMS (20) (50) (50) MESOTHELIOMA, MALIGNANT 1 (2%) INAL DISPOSITION SUMMARY MALIS INITIALLY IN STUDY 20 50 50 NATURAL DEATHD 3 6 6 MORIBUND SACRIFICE 1 3 3 SCHEDULED SACRIFICE 3 3 3	MESOTHELIOMA, NOS			
MESOTHELIOMA, MALIGNANT 1 (2%) IAL DISPOSITION SUMMARY NATURAL DEATHD 20 50 50 NATURAL DEATHD 3 6 6 MORDBUND SACRIFICE 1 3 3 SCHEDULED SACRIFICE 3 3 3 ACCIDENTALLY KILLED 1 3 3	OTHER SYSTEMS			
IAL DISPOSITION SUMMARY ITMALS INITIALLY IN STUDY 20 50 50 NATURAL DEATHØ 3 6 6 MORIBUND SACRIFICE 1 3 3 SCHEDULED SACRIFICE ACCIDENTALLY KILLED	MULTIPLE ORGANS MESOTHELIOMA, MALIGNANT			1 (2%)
NATURAL DEATH@366MORTBUND SACRIFICE133SCHEDULED SACRIFICE33ACCIDENTALLY KILLED3	IMAL EISPOSTTION SUMMARY			
MORIBUND SACRIFICE 1 3 3 SCHEDULED SACRIFICE ACCIDENTALLY KILLED	ANIMALS INITIALLY IN STUDY			
	MORIBUND SACRIFICE SCHEDULED SACRIFICE			
	ACCIDENTALLY KILLED TERMINAL SACRIFICE ANIMAL MISSING	16	4 1	41

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

TABLE A1 (CONCLUDED)

	CONTROL (UNTR) 11-1365		HIGH DOSE 11-1361
TUMOR SUMMARY			
"O"AL ANIMALS WITH PPIMARY TUMORS*	15	48	47
"OTAL PPIMARY TUMORS	21	70	77
TOTAL ANIMALS WITH BENIGN TUMORS	15	42	4 3
TOTAL BENIGN TUMORS	16	50	55
TOTAL ANIMALS WITH MALIGNANT TUMORS	4	16	19
TOTAL MALIGNANT TUMORS	5	19	21
TOTAL ANIMALS WITH SECONDARY TUMORS#		1	3
TOTAL SECONDARY TUMORS		2	5
TOTAL ANIMALS WITH TUMORS UNCERTAIN- BENIGN OR MALIGNANT TOTAL UNCERTAIN TUMOPS		1 1	1 1
TOTAL ANIMALS WITH TUMORS UNCERTAIN- PRIMARY OR METASTATIC TOTAL UNCERTAIN TUMORS			

TABLE A2	
SUMMARY OF THE INCIDENCE OF NEOPLASMS IN FEMALE RATS TREATED	WITH N,N'-DIETHYLTHIOUREA

	CONTROL (UNTR) 11-1366	LOW EOSE 11-1364	HIGH DOSE 11-1362
	20	50	50 1
NIMALS NECROPSIED NIMALS EXAMINED HISTOPATHOLOGICALLY**		50 50	49 49
NTEGUNENTARY SYSTEM			
NON E			
ESPTRATORY SYSTEM			
*LUNG ALV EOLAR/BRONCHIOLAF ADENOMA	(20)	(49) 1 (2 %)	(49) 1 (2%)
ALVEOLAR/BRONCHIOLAR CARCINOMA			1 (2%)
ENATOPOIETIC SYSTEM			
*MULTIPLE ORGANS LEUKEMIA, NOS	(20) 1 (5 %)	(50)	(49)
GRANULOCYTIC LEUKEMIA	1 (5%)	4 (8%) 1 (2%)	3 (6%) 1 (2%)
MONOCYTIC LEUKEMIA	1 (5%)	1 (2%)	
#SPLEEN HEMANGIOSARCOMA	(20)	(49)	(48) 1 (2 %)
ILIVER GRANULOCYTIC LEUKENIA	(20)	(49)	(49)
		1 (2%)	
IRCULATORY SYSTEM			
NONE			
IGESTIVE SYSTEM			
PAROTID GLAND	(19)	(49) 1_(2%)	(46)

TABLE A2 (CONTINUED)

		LOW ECSE 11-1364	
#LIVER HEMANGIOMA	(20)	(49)	(49) 1 (2%)
IRINAPY SYSTEM			
NONE			
NDOCRINE SYSTEM			
#PITUITARY CHROMOPHOBE ADENOMA CHROMOPHOBE CARCINOMA	(18) 5 (28%)	(47) 17 (36%) 1 (2%)	(45) 20 (44%) 2 (4%)
#ADPENAL ADEMOMA, NOS CORTICAL ADENOMA PHEOCHPOMOCYTOMA	(20) 1 (5%)	(49) 1 (2%) 1 (2%)	(48) 1 (2%) 2 (4%)
#THYROID POLICULAR-CELL ADENOMA POLICULAR-CELL CARCINOMA C-CELL ADENOMA C-CELL CAPCINOMA	(18)	(46) 4 (9%) 1 (2%) 1 (2%)	(46) 9 (20%) 8 (17%) 1 (2%) 1 (2%)
EPRODUCTIVE SYSTEM			
*MAMMARY GLAND ADENOCARCINOMA, NOS PAPTILARY ADENOCARCINOMA CYSTADENOMA, NOS PIBRO ADENOMA	(20) 1 (5%)	(50) 1 (2%) 6 (12%)	(49) 1 (2%) 1 (2%) 6 (12%)
#UTPRUS A DENOCARCINOMA, NOS FNDOMETRIAL STROMAL POLYP	(19) 1 (5%) 4 (21%)	(49) 6 (12%)	(48) 4 (8 %)
#UTERUS/ENDOMETRIUM ADENOCARCINOMA, NOS	(19)	(49) 1 (2%)	(48) 1 (2 %)
EFVOUS SYSTEM			
*BPAIN <u>NEOPLASM, NOS, METASTATIC</u>	(20)	(49)	(48) <u>1_(2%)</u>

TABLE A2 (CONTINUED)

	CONTROL (UNTR) 11-1366	11-1364	
CHROMOPHOBE CAPCINOMA, INVASIVE			1 (2%)
PECTAL SENSE ORGANS			
NONE			
NUSCULOSKELETAL SYSTEM			
NONE			
BODY CAVITIES			
*MESENTERY LIPOMA	(20)	(50)	(49) 1 (2%)
ALL OTHER SYSTEMS			
NONE			
ANIMAL DISPOSITION SUMMARY			
ANIMALS INITIALLY IN STUDY	20	50	50
NATURAL DEATHƏ MORIBUND SACRIFICE SCHEDULED SACRIFICE ACCIDENTALLY KILLED	2	5 1	4 4
TEPMINAL SACRIFICE ANIMAL MISSING	18	44	4 1 1
D INCLUDES AUTOLYZED ANIMALS			

 $\pmb{\ast}$ number of animals with tissub examined microscopically $\pmb{\ast}$ number of animals necropsied

TABLE A2 (CONCLUDED)

				======
	CONTROL (UNTR) 11-1366	LOW DCSE 11-1364	HIGH DOSE 11-1362	
TUMOR SUMMARY				
TOTAL ANIMALS WITH PRIMARY TUMOPS* TOTAL PRIMARY TUMORS	13 15	33 49	4 1 66	
"O"AL ANIMATS WITH BENIGN TUNORS TOTAL BENIGN TUMOPS	10 10	28 38	31 47	
TOTAL ANIMALS WITH MALIGNANT TUMORS TOTAL MALIGNANT TUMORS	5 5	11 11	17 19	
TOTAL ANIMALS WITH SECONDARY TUMORS TOTAL SECONDARY TUMORS	•		2 2	
TOTAL ANIMALS WITH TUMORS UNCERTAIN DENIGN OF MALIGNANT TOTAL UNCERTAIN TUMORS	-			
TOTAL ANIMALS WITH TUMORS UNCERTAIN FRIMARY OR METASTATIC TOTAL UNCERTAIN TUMORS	-			
 PRIMARY TUMORS: ALL "UMOPS EXCEPT SI SECONDARY TUMOPS: METASTATIC TUMORS 			ADJACENT ORGAN	

APPENDIX B

SUMMARY OF THE INCIDENCE OF NEOPLASMS IN MICE TREATED WITH N,N'-DIETHYLTHIOUREA

	CONTROL (UNTR) 22-2365	LOW DOSE 22-2363	HIGH DOSE 22-2361
	a20	50	50
ANIMALS MISSING ANIMALS NECROPSIED	4	2	
ANIMALS NECROPSIED ANIMALS EXAMINED HISTOPATHOLOGICALLY*'	15	48 48	49 49
		40	47
INTEGUMENTARY SYSTEM			
*SUBCUT TISSUE	(15)	(48)	(49)
FIBROSARCOMA			1 (2%)
RESPIRATORY SYSTEM			
#LUNG	(13)	(46)	(46)
		4 10.00	• •
ALVEOLAR/BRONCHIOLAR ADENOMA	2 (15%)	4 (9%)	5 (11%)
ALVEOLAR/BRONCHIOLAR CARCINOMA SARCOMA, NOS, METASTATIC			1 (2%) 1 (2%)
HEMATOPOIETIC SYSTEM			
*MULTIPLE ORGANS	(15)	(48)	(49)
MALIGNANT LYMPHOMA, NOS		1 (2%)	4 (8%)
MALIGNANT LINPHONA, NOS MALIG.LYMPHONA, LYMPHOCYTIC TYPE MALIG.LYMPHONA, HISTIOCYTIC TYPE	0 (6) 7	1 (2%)	
HALIG.LYMPHONA, HISTIOCYTIC TYPE LEUKEMIA,NOS	2 (13%) 1 (7%)	2 (4%) 2 (4%)	6 (12%) 1 (2%)
GRANULOCYTIC LEUKEMIA	((/ //a)	1 (2%)	1 (2 *)
*SPLEEN	(14)	(48)	(43)
SARCOMA, NOS		1 (2%)	· · · · · ·
HEMANGIOMA	1 (79)	1 (297)	1 (2%)
HEMANGIOSARCOMA MALIG.LYMPHOMA, HISTIOCYTIC TYPE	1 (7%)	2 (4%)	1 (2%) 1 (2%) 1 (2%)
#LYMPH NODE	(14)	(45)	(42)
MALIG.LYMPHOMA, UNDIPPER-TYPE		1 (2%)	
#LIVER	(14)	(48)	(49)
MALIG.LYMPHOMA, LYMPHOCYTIC TYPE		1 (2%)	

 TABLE BI

 SUMMARY OF THE INCIDENCE OF NEOPLASMS IN MALE MICE TREATED WITH N,N'-DIETHYLTHIOUREA

<u>NONE</u>_____

NUMBER OF ANIMALS WITH TISSUE EXAMINED MICROSCOPICALLY
 NUMBER OF ANIMALS NECROPSIED
 20 ANIMALS INITIALLY IN STUDY BUT ONE ANIMAL WAS FOUND TO BE FEMALE IN A MALE GROUP

**EXCLUDES PARTIALLY AUTOLYZED ANIMALS

TABLE B1 (CONTINUED)

	CONTROL (UNTR) 22-2365	LOW DOSE 22-2363	HIGH DOSE 22-2361	
IGESTIVE SYSTEM				
<pre>#LIVER HEPATOCELLULAR ADENOMA HEPATOCELLULAR CARCINOMA SARCONA, NOS</pre>	(14) 3 (21%) 2 (14%)	(48) 2 (4%) 5 (10%)	(49) 1 (2%) 2 (4%) 1 (2%)	
HEMANGIOMA HEMANGIOSARCOMA	1 (7%)		1 (2%) 1 (2%)	
RINARY SYSTEM				
NONE				
NEOCRINE SYSTEM				
*ADPENAL PHEOCHROMOCYTOMA	(10)	(42)	(35) 1 (3%)	
*THYROID FOLLICULAR-CELL ADENOMA	(7) 1 (14%)	(30)	(34)	
REPPODUCTIVE SYSTEM				
#TESTIS INTERSTITIAL-CELL TUMOR	(15)	(47)	(44) 1 (2%)	
IERVOUS SYSTEM				
NONE				
PECTAL SENSE ORGANS				
NONE				
USCULOSKELETAL SYSTEM				
NON 2				
ODY CAVITIES				
NONE				

* NUMBER OF ANTMALS NECFOPSIED
TABLE B1 (CONCLUDED)

	CONTROL(UNTR) 22-2365	LCW DCSE 22-2363	HIGH DOSE 22-2361	·
LL OTHER SYSTEMS				
NONE				
NIMAL DISPOSITION SUMMARY				
ANIMALS INITIALLY IN STUDY	20	50	50	
NATURAL DEATHO	6	7	10	
NORIBUND SACRIFICE		1		
SCHEDULED SACRIFICE				
ACCIDENTALLY KILLED				
TERMINAL SACRIFICE	9	40	40	
ANIMAL MISSING	4	2		
ANIMAL DELETED (WRONG SEX)	1			
INCLUDES AUTOLYZED ANIMALS				
UNOR SUMMARY				
Show Sommer				
TOTAL ANIMALS WITH PRIMARY TUMORS*	8	20	23	
TOTAL PRIMARY TUMORS	13	24	29	
TOTAL ANIMALS WITH BENIGN TUMORS	5	6	8	
TOTAL BENIGN TUMORS	6	6	10	
TOTAL DEWIGE TOHORS	v	0	10	
TOTAL ANIMALS WITH MALIGNANT TUMORS	5	16	18	
TOTAL MALIGNANT TUMORS	7	18	19	
TOTAL ANIMALS WITH SECONDARY TUMORS	•	1	1	
TOTAL SECONDARY TUMORS		1	1	
TOTAL ANIMALS WITH TUMORS UNCERTAIN	_			
BENIGN OR MALIGNANT				
TOTAL UNCERTAIN TUMORS				
TOTAL ANIMALS WITH TUNORS UNCERTAIN-	-			
PRIMARY OR METASTATIC				
TOTAL UNCERTAIN TUMORS				

TABLE B2
SUMMARY OF THE INCIDENCE OF NEOPLASMS IN FEMALE MICE TREATED WITH N.N'-DIETHYLTHIOUREA

NIMALS INITIALLY IN STUDY NIMALS MISSING NIMALS NECROPSIED NIMALS EXAMINED HISTOPATHOLOGICALLY*' NTEGUMENTARY SYSTEM *SUBCUT TISSUE MYXOMA	20 1 19 * 19 	22-2364 50 2 48 47 (48) 1 (2%)	50 8 41 41 41	
NIMALS NECROPSTED NIMALS EXAMINED HISTOPATHOLOGICALLY ^{*/} NTEGUMENTARY SYSTEM *SUBCUT TISSUE	19 * 19 	48 47 	41 41 	
NIMALS EXAMINED HISTOPATHOLOGICALLY*' NTEGUMENTARY SYSTEM *SUBCUT TISSUE	* 19 (19)	47 	41	
NTEGUMENTARY SYSTEM *SUBCUT TISSUE	(19)	(48)		
*SUBCUT TISSUE			(41)	
			(41)	
MYXOMA				
		1 (2/0)		
HEM ANGIOSAR COM A		1 (2%)		
ESPIRATOPY SYSTEM				
*NOSE	(19)	(48)	(41)	
FIBROSARCOMA		1 (2%)	· ·	
#LUNG	(18)	(45)	(41)	
SQUAMOUS CELL CARCINOMA, METASTA			1 (2%)	
HEPATOCELLULAP CARCINOMA, METAST		1 (2%)		
ALVEOLAR/BOONCHIOLAR ADENOMA	· (6%)	1 (2%)		
ENATOPOIETIC SYSTEM				
*MULTIPLE ORGANS	(19)	(48)	(41)	
MALIGNANT LYMPHOMA, NOS	1 (5%)	3 (6%)	3 (/%)	
MALIG.LYMPHOMA, LYMPHOCYTIC TYPE		2 (4%)	1 (2%)	
MALIG.LYMPHONA, HISTIOCYTIC TYPE	3 (16%)	7 (15%) 1 (2%)	2 (5%) 1 (2%)	
IEUKEMIA,NOS PLASMACYTIC LEUKEMIA	1 (5%)	1 (2%)	1 (2%)	
ERYTHROCYTIC LEUKEMIA		1 (2%)		
#SPLEEN	(18)	(46)	(40)	
MALIG.LYMPHOMA, LYMPHOCYTIC TYPE			2 (5%)	
#MESENTERIC L. NODE	(17)	(46)	(40)	
MALIG.LYMPHONA, LYMPHOCYTIC TYPE	1 (6%)			
*KIDNEY MALIG.LYMPHOMA, HISTIOCYTIC_TYPE	(18)	(46)	(40)	

* NUMBER OF ANTHALS WITH TISSUE EXAMINED MICROSCOPICALLY * NUMBER OF ANIMALS NECROPSIED **EXCLUDES PARTIALLY AUTOLYZED ANIMALS

TABLE B2 (CONTINUED)

	CONTROL (UNTR) 22-2366		HIGH DO SE 22-2362
CIRCULATORY SYSTEM			
NON E			
DIGESTIVE SYSTEM			
*LIP	(19)	(48)	(41)
SQUAMOUS CELL CARCINOMA FIBROSARCOMA		1 (2%)	1 (2%)
*LIVER	(19)	(46)	(40)
HEPATOCELLULAP ADENOMA HEPATOCELLULAR CARCINOMA		1 (2%)	2 (5%)
URINARY SYSTEM			
NONE			
ENDOCRINE SYSTEM			
<pre>#PITUITARY CHROMOPHOBE CAPCINOMA BASOPHIL ADENOMA</pre>	(9)	(20) 1 (5%) 1 (5%)	(23)
#THYROID	(12)	(31)	(25)
FOLLICULAR-CELL ADENOMA	1 (8%)		
REPRODUCTIVE SYSTEM			
*MAMMARY GLAND CARCINOMA,NOS	(19) 1 (5%)	(48)	(41)
#UTERUS LEIONYOSARCOMA	(17)	(45) 1 (2%)	(38)
ENDOMETRIAL STROMAL POLYP		3 (7%)	2 (5%)
#OVARY PAPILLARY CYSTADENOMA, NOS	(16) 1 (6%)	(43)	(35)
GRANULOSA-CELL TUMOR	1 (0/4)		1 (3 %)

NUMBER OF ANIMALS WITH TISSUE EXAMINED MICROSCOPICALLY
 NUMBER OF ANIMALS NECROPSIED

TABLE B2 (CONTINUED)

	CONTROL (UNTR) 22-2366	LCW DCSE 22-2364	HIGH DOSE 22-2362
PECIAL SENSE ORGANS			
NONE			
JSCULOSKELETAL SYSTEM			
NONE			
ODY CAVITIES			
* ABDOMINAL WALL FIBROSARCOMA	(19)	(48) 1 (2 %)	(41)
L OTHER SYSTEMS			
NONE			
IMAL DISPOSITION SUMMARY			
ANIMALS INITIALLY IN STUDY	20	50	50
NATURAL DEATHƏ MORIBUND SACRIFICE SCHEDULEE SACRIFICE	4 1	12 3	6 6
ACCIDENTALLY KILLED TERMINAL SACRIPICE ANIMAL MISSING	14	33 2	30 8

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

B-8

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TABLE B2 (CONCLUDED)

		LOW DOSE 22-2364	
TUMOR SUMMARY			
TOTAL ANIMALS WITH PRIMARY TUMORS*	11	23	15
TOTAL PRIMARY TUMORS	12	28	15
TOTAL ANIMALS WITH BENIGN TUMORS	3	6	4
TOTAL BENIGN TUMORS	3	6	
TOTAL ANIMALS WITH MALIGNANT TUMORS	9	19	10
TOTAL MALIGNANT TUMOPS	9	22	10
TOTAL ANIMALS WITH SECONDARY TUMORS#		1	1
TOTAL SECONDARY TUMORS .		1	1
TOTAL ANIMALS WITH TUMORS UNCEPTAIN- BENIGN OR MALIGNANT TOTAL UNCERTAIN TUMORS			1 1
TOTAL ANIMALS WITH TUMORS UNCERTAIN- PRIMARY OR METASTATIC "OTAL UNCERTAIN TUMORS			

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APPENDIX C

-SUMMARY OF THE INCIDENCE OF NONNEOPLASTIC LESIONS IN RATS TREATED WITH N,N'-DIETHYLTHIOUREA

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	CONT: 11-	ROL (UNTR) 1365	LOW 11-	COSE 1363	HIGH 11-	DOS E 136 1
ANIMALS INITIALLY IN STUDY	20		50		50	
NIMALS NECROPSIED	20		50		50	
NYMALS EXAMINEE HISTOPATHOLOGICALLY	** 20		50		50	
NTEGUMENTARY SYSTEM						
NONE						
PESPIRATORY SYSTEM						
*TRACHEA	(19))	(44)	•	(46)	i
TNFLAMMATION, CHRONIC SUPPURATIV		(5%)	,		,	
#L11NG	(20))	(48))	(49)	I
MINEPALIZATION					1	(2%)
ATELECTASIS			5	(10%)	3 5	(6 %)
CONGESTION, NOS		(10%)	8	(17%)	5	(10%)
HEMORRHAGE	3	(15%)	'	(15%)	2	(4%)
BRONCHOPNEUMONIA, ACUTE PNEUMONIA, CHRONIC MURINE		(2.05)		(2%)	10	(20)
GRANULOMA, FOREIGN BODY	4	(20%)	,	(15%)		(20%) (2%)
PERIVASCULAR CUFFING			1	(2%)	•	(2.8)
	1	(5%)		(4%)		
ENATOPOIETIC SYSTEM						
#SPLEEN	(19)		(50)	•	(48)	i
HENOSICEROSIS					2	(4%)
HEM ATOPOIESIS		(5%)			1	(2%)
MYELOPOIESIS	1	(5%)				
#MANDIBULAR L. NODE	(17)		(49)	I.	(44)	
HYPERPLASIA, LYMPHOID			,			(2\$)
#MESENTEPIC L. NODE	(17)	1	(49)	I	(44)	
INFLAMMATION, CHRONIC			1	(2%)		
DEPLETION			1	(28)		

TABLE CI SUMMARY OF THE INCIDENCE OF NONNEOPLASTIC LESIONS IN MALE RATS TREATED WITH N, N'-DIETHYLTHIOUREA

NUMBER OF ANIMALS WITH TISSUE EXAMINED MICROSCOPICALLY * NUMBER OF ANIMALS NECROPSIED **EXCLUDES PARTIALLY AUTOLYZED ANIMALS

TABLE C1 (CONTINUED)

	CONTROL (UNTR) 11-1365	LOW DOSE 11-1363	HIGH DOSE 11-1361
HYPERPLASIA, LYMPHOID	1 (6%)	1 (2%)	1 (2%)
TRCULATORY SYSTEM			
#HEART THROMBUS, MUPAL	(19)	(47) 1 (2%)	(49)
<pre>#MYOCA RDIUM INFLAMMATION, ACUTE/CHRONIC INFLAMMATION, CHRONIC</pre>	(19)	(47)	(49) 1 (2%) 1 (2%)
INFLAMMATION, CHRONIC FOCAL FIBPOSIS FIBROSIS, FOCAL	6 (32%) 4 (21%)	8 (17%) 12 (26%) 1 (2%)	7 (14%) 11 (22%)
*CORONARY ARTERY INFLAMMATION, CHRONIC	(20)	(50) 1 (2%)	(50)
IGESTIVE SYSTEM			
<pre>#LIVER CONGESTION, NOS INFLAMMATION, FOCAL INFLAMMATION, CHRONIC FOCAL CHOLANGIOFIBROSIS DEGENERATION, NOS DEGENERATION, GRANULAR</pre>	(20) 1 (5 %)	(50) 1 (2%) 1 (2%) 1 (2%) 1 (2%)	(50) 2 (4%) 1 (2%)
DEGENERATION, HYDROPIC NECROSIS, NOS METAMORPHOSIS FATTY CYTOPLASMIC VACUOLIZATION CLEAR-CELL CHANGE ANGIECTASIS	1 (5%)	1 (2%) 3 (6%) 1 (2%)	1 (2%) 2 (4%) 1 (2%) 1 (2%)
*EILE DUCT HYPERPLASIA, NOS	(20) 6 (30%)	(50) 7 (14%)	(50) 24 (48%)
#PANCREAS ATROPHY, NOS ATROPHY, POCAI	(19) 1 (5%) 1 (5%)	(49) 1 (2%)	(48)
<pre>#PANCREATIC ACINUS ATROPHY, NOS</pre>	(19) 2 (11%)	(49) 1 (2 %)	(48)
*SMALL INTESTINE INFLAMMATION, NOS	(19) 1 (5%)	(49)	(48)

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

TABLE C1 (CONTINUED)

	CONTROL (UNTR) 11-1365	LCW CCSE 11-1363	HIGH DOSE 11-1361
<pre>#PEYERS PATCH HYPERPLASIA, LYMPHOID</pre>	(19) 1 (5 %)	(49)	(48) 1 (2%)
COLON PARASITISM	(20)		
RINARY SYSTEM			
<pre>*KIDNEY HYDRONEPHROSIS CONGESTION, ACUTE TNPLAMMATION, NOS INPLAMMATION, CHRONIC NEPHROPATHY NEPHROPATHY, TOXIC HYPERPLASIA, TUBULAR CELL</pre>	(20) 1 (5%) 2 (10%) 4 (20%)	(50) 1 (2%) 8 (16%) 9 (18%) 1 (2%)	(50) 1 (2%) 15 (30%) 1 (2%) 3 (6%) 1 (2%)
<pre>#KIDNEY/CORTEX CYST, NOS</pre>	(20)	(50) 1 (2 %)	(50)
#URINARY BLADDER CALCULUS, NOS	(18) 1 (6%)	(4 1)	(40)
NDOCRINE SYSTEM			
*PITUITARY CONGESTION, NOS HENORPHAGIC CYST	(17)	(46) 2 (4%)	(48) 1 (2 %)
#ADRENAL CONGESTION, NOS HEMOPRHAGIC CYST CYTOPLASMIC VACUOLIZATION	(18)	(50) 1 (2%) 1 (2%)	(50) 2 (4 %)
#ADPENAL CORTEX METAMORPHOSIS PATTY	(18)	(50) 1 (2 %)	(50)
#"HYROID POLLICULAR CYST, NOS A"ROPHY, NOS HYPERPLASIA, C-CELL HYPERPLASIA, FOLLICULAR-CELL	(18)	(45) 1 (2%) 2 (4%)	(48) 4 (8%) 1 (2%) 1 (2%) 1 (2%)

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

TABLE C1 (CONTINUED)

	CONTROL (UNTR) 11-1365	LCW DCSE 11-1363	HIGH DOSE 11-1361
<pre>#"HYROID FOLLICLE ATROPHY, NOS HYPERPLASIA, CYSTIC</pre>	(18)	(45) 6 (13%) 1 (2%)	(48) 6 (13%) 5 (10%)
PRODUCTIVE SYSTEM			
PROSTATE INFLAMMATION, GRANULOMATOUS Hyperplasia, Nos	(17)	(44) 1 (2%)	(50) 1 (2%)
TESTIS Atrophy, Nos	(20) 2 (10%)	(49)	(50) 7 (14%)
RVOUS SYSTEM			
BRAIN HEMATOMA, NOS	(19)	1 (2%)	(49)
ECTAL SENSE ORGANS			
PECTAL SENSE ORGANS NONE			
PECTAL SENSE ORGANS None JSCULOSKELETAL SYSTEM			
DECTAL SENSE ORGANS NONE SCULOSKELETAL SYSTEM NONE DY CAVITIES	(20) 1 (5 %)		(50)
ECTAL SENSE ORGANS NONE SCULOSKELETAL SYSTEM NONE DY CAVITIES ABDOMINAL CAVITY INFLAMMATION, NOS	(20) 1 (5 %)		(50)
PECTAL SENSE ORGANS NONE USCULOSKELETAL SYSTEM NONE DDY CAVITIES *ABDOMINAL CAVITY INFLAMMATION, NOS	(20) 1 (5 %)	(50)	(50) (50) 1 (2%)

TABLE C1 (CONCLUDED)

	CONTROL (UNTR) 11-1365	LCW DCSE 11-1363	HIGH DOSE 11-1361	
SPECTAL MORPHOLOGY SUMMARY				
NO LESION REPOPTED	2			
* NUMBER OF ANIMALS WITH TISSUE EX.	AMINED MICROSCOPIC	ALLY		

* NUMBER OF ANIMALS NECROPSIED

	11-3	ROL (UNTR) 1366	11-	1364	11-1	1362
	20		50		50 1	
ANIMALS MISSING Animals necropsied Animals examined histopathologically**	20 20		50 50		49 49	
NTEGUMENTARY SYSTEM						
*SKIN DERMAL INCLUSION CYST	(20)		(50)		(49) 1	(2%)
RESPIRATOFY SYSTEM						
<pre>#"PACHEA TNFLAMMATION, NOS INFLAMMATION, SUPPURATIVE</pre>	(19) 3	(16%)		(2%) (2%)	(46)	
INFLAMMATION, CHRONIC SUPPURATIV				(2%)	1	
<pre>#LUNG ATELECTASIS THRONBOSIS, NOS</pre>			1	(8%) (2%)	(49) 2	
CONGESTION, NOS Edema, Nos		(25%)	6 1	(12%) (2%)	1	
HEMORPHAGE BRONCHOPNEUMONIA, NOS	2	(10%)	3	(6%)		(2%)
INFLAMMATION, INTERSTITIAL PNEUMONIA, CHPONIC MURINE BRONCHOPNEUMONIA, CHRONIC	6	(30%)	7	(14%)	13	(2%) (27%) (2%)
HYPERPLASIA, ADENOMATOUS	1	(5%)	1	(2%)		
HEMATOPOIETIC SYSTEM						
#SPLEEN PIGMENTATION, NOS					(48) 1	(2%)
HEMOSIDEPOSIS HEMATOPOIESIS	2 3	(10%) (15%)	5 4	(10%) (8%)	4 2	
#MESENTERIC L. NODE HYPERPLASIA, DIFPUSE	(18)		(50))	(47)	(2%)

TABLE C2 SUMMARY OF THE INCIDENCE OF NONNEOPLASTIC LESIONS IN FEMALE RATS TREATED WITH N,N'-DIETHYLTHIOUREA

NUMBER OF ANIMALS WITH TISSUE EXAMINED MICROSCOPICALLY
 NUMBER OF ANIMALS NECROPSIED
 **EXCLUDES PARTIALLY AUTOLYZED ANIMALS

TABLE C2 (CONTINUED)

CONTROL(UNTR) LCW DOSE HIGH DOSE 11-1366 11-1364 11-1362 HYPERPLASIA, RETICULUM CELL 2 (4\$) IRCULATORY SYSTEM 1 2 (4\$) #MYOCARDIUM (18) (46) (48) INFLAMMATION, ACUTE/CHRONIC 1 (2\$) 5 (10\$) INFLAMMATION, CHRONIC POCAL 7 (15\$) 5 (10\$) PIDPOSIS 3 (17\$) 3 (17\$) 6 (7\$) SCLEPOSIS 3 (17\$) 1 (2\$) 1 (2\$) *AORTA (20) (50) (49) IGESTIVE SYSTEM *SAITVAFY GLAND 1 (2\$) 1 (2\$) "SAITVAFY GLAND (19) (49) (46) A"ROPHY, POCAL 1 (2\$) 1 (2\$) IBESTIVE SYSTEM *SAITVAFY GLAND 1 (2\$) 1 (2\$) IGESTIVE SYSTEM *SAITVAFY GLAND (19) (49) (46) #SAITVAFY GLAND (19) (49) (46) 1 (2\$) IBESTIVE SYSTEM *SAITVAFY GLAND 1 (2\$) 1 (2\$) #SAITUAPY OCAL 1 (2\$)				
HYPERPLASIA, RETICULUM CELL 2 (4%) IRCULATORY SYSTEM #MYOCARD JUM (18) (46) (48) INFLAMMATION, ACUTE/CHRONIC 1 (2%) 7 (15%) 5 (10%) PIPDOSIS 3 (17%) 3 (7%) 8 (17%) 5 (10%) SCLEPOSIS 3 (17%) 3 (7%) 8 (17%) 1 (2%) *AORTA (20) (50) (49) IMPLAMMATION, CHRONIC FOCAL 1 (2%) (46) *AORTA (20) (50) (49) IGESTIVE SYSTEM (20) (49) (49) #SAIIVAPY GLAND (19) (49) (49) INFLAMMATION, ACUTE FOCAL 1 (2%) 1 (2%) *LIVER (20) (49) (49) INFLAMMATION, ACUTE FOCAL 1 (2%) 1 (2%) BASOFHALIC CITO CHANGE 1 (5%) 4 (8%) 1 (2%) MECROSIS, FOCAL 1 (2%) 1 (2%) 1 (2%) MECROSIS, POCAL 1 (5%) 1 (2%) 1 (2%) MECROSIS, POCAL 1 (5%) 1 (2%) 1 (2%) MECROSIS, POCAL 1 (5%) 1 (2%)		CONTROL (UNTR) 11-1366	LCW DCSE 11-1364	HIGH DO SE 11-1362
RCULATORY SYSTEM (18) (46) (48) INFLAMMATION, ACUTE/CHRONIC 1 (2%) (10%) 5 INFLAMMATION, ACUTE/CHRONIC 7 (15%) 5 (10%) INFLAMMATION, CHRONIC POCAL 7 (15%) 5 (10%) SCLEPOSIS 3 (17%) 3 (7%) 6 (17%) AOGTA 1 (2%) 1 (2%) 1 (2%) ANOTA (20) (50) (49) (49) INFLAMMATION, CHRONIC POCAL 1 (2%) (49) GESTIVE SYSTEM (20) (49) (49) SAIIVAPY GLAND (19) (49) (46) A"ROPHY, FOCAL 1 (2%) 1 (2%) LIVER (20) (49) (49) 1 (2%) DEGENERATION, ACUTE FOCAL 1 (2%) 1 (2%) 1 (2%) IVVER (20) (49) 1 (2%) 1 (2%) 1 (2%) 1 (2%) 1 (2%) 1 (2%) 1				
INPLANMATION, ACUTE/CHRONIC 1 (2%) 1 (2%) INPLANMATION, CHRONIC POCAL 7 (15%) 5 (10%) SCLEPOSIS 3 (17%) 3 (7%) 8 (17%) SCLEPOSIS 1 (2%) 1 (2%) 1 (2%) AORTA 1 (2%) 1 (2%) 1 (2%) INPLANMATION, CHRONIC POCAL 1 (2%) (49) SESTIVE SYSTEM (19) (49) (46) ATROPHY, POCAL 1 (2%) 1 (2%) 1 (2%) SESTIVE SYSTEM (20) (49) (46) SAILVAPY GLAND (19) (49) (46) ATROPHY, POCAL 1 (2%) 1 (2%) 1 (2%) LIVER (20) (49) 1 (2%) 1 (2%) INPLAMMATION, ACUTE POCAL 1 (2%) 1 (2%) 1 (2%) 1 (2%) LIVER (20) (49) 1 (2%) 1 (2%) 1 (2%) 1 (2%) BASOPHILIC CYTO CHANGE 1 (5%) 4 (8%) 1 (2%) 1 (2%) 1 (2%) HYDERPLASIA, POCAL 3 (15%) 2 (4%) 1 (2%) 1 (2%) 1 (2%) LIVER/CENTRILOBULAF (20) </td <td></td> <td></td> <td></td> <td></td>				
INPLANMATION, CHRONIC FOCAL 7 (15%) 5 (10%) PIBPOSIS 3 (17%) 3 (7%) 8 (17%) SCLEPEOSIS 1 (2%) 1 (2%) *AORTA (20) (50) (49) INPLANMATION, CHRONIC FOCAL 1 (2%) (49) *AORTA (20) (50) (49) INPLANMATION, CHRONIC FOCAL 1 (2%) (46) *NOPHY, FOCAL 1 (2%) (46) *NPLAMMATION, ACUTE FOCAL 1 (2%) 1 (2%) *LIVER (20) (49) (49) INPLAMMATION, ACUTE FOCAL 1 (2%) 1 (2%) *LIVER (20) (49) 1 (2%) DEGENERATION, NOS 1 (2%) 1 (2%) MECROSIS, FOCAL 1 (5%) 4 (8%) 1 (2%) #ETAMORPHOSIS PATTY 1 (2%) 1 (2%) 1 (2%) #EAMORPHOSIS PATTY 3 (15%) 2 (4%) 1 (2%) #LIVER/CENTRI LOBULAP (20) (49) (49) NECROSIS, NOS 2 (4%) 1 (2%) * *BILE EUCT (20) (50) (49) HYPEPPLASIA,		(18)		(48)
SCLEPOSIS 1 (2%) FIBROSIS, FOCAL 1 (2%) *AORTA (20) (50) (49) INPLANMATION, CHRONIC FOCAL 1 (2%) (49) IGESTIVE SYSTEM (19) (49) (46) *SAILVAFY GLAND (19) (49) (46) ATROPHY, FOCAL 1 (2%) (46) *ILVER (20) (49) (49) INPLAMMATION, ACUTE FOCAL 1 (2%) 1 (2%) *LIVER (20) (49) (46) METAMORPHOSIS FATTY 1 (2%) 1 (2%) DEGENERATION, NOS 1 (2%) 1 (2%) METAMORPHOSIS FATTY 1 (2%) 1 (2%) BASOPHILIC CYTO CHANGE 1 (5%) 4 (8%) 1 (2%) HYDERPLASTA, FOCAL 3 (15%) 2 (4%) 1 (2%) IYNELMORTOSIS 1 (2%) 1 (2%) 1 (2%) *LIVER/CENTRI LOBULAF (20) (49) (49) NECROSIS, NOS 2 (4%) 1 (2%) * *BILE DUCT (20) (50) (49) HYPEPPLASIA, NOS 1 (5%) 4 (8%)	INFLAMMATION, CHRONIC FOCAL		7 (15%)	5 (10%)
*AORTA (20) (50) (49) IN PLANMATION, CHRONIC FOCAL (19) (49) (46) ATROPHY, FOCAL (19) (49) (46) ATROPHY, FOCAL (19) (49) (46) IN FLAMMATION, ACUTE FOCAL (20) (49) (49) (46) IN FLAMMATION, ACUTE FOCAL (20) (49) (49) (49) IN FLAMMATION, ACUTE FOCAL (20) (49) (49) (42) DEGENERATION, NOS 1 (2%) (48) 1 (2%) METAMORPHOSIS FATTY (12%) (12%) (12%) (12%) HYDERPLASIA, FOCAL (15%) 4 (8%) 1 (2%) (12%) (12%) (12%) (12%) HURL (20) (49) (49) (49) (49) (49) NECROSIS, NOS 2 (4%) 1 (2%) (49) (49) NECROSIS, NOS 2 (4%) (49) (49) NECROSIS, NOS 1 (5%) 4 (8%) 9 (18%) *BILE DUCT (20) (47) (48) TNFLAMMATION, ACUTE/CHRONIC (20) (47) (48)		3 (17%)	3 (7%)	8 (17%) 1 (2%)
IN PLANMATION, CHRONIC FOCAL 1 (2%) IGESTIVE SYSTEM *SAIIVAPY GLAND (19) (49) (46) *SAIIVAPY GLAND (19) (49) (46) A"ROPHY, FOCAL 1 (2%) 1 (2%) *LIVER (20) (49) (49) INFLAMMATION, ACUTE FOCAL 1 (2%) 1 (2%) GPANULOMA, NOS 1 (2%) 1 (2%) DEGENEPATION, NOS 1 (2%) 1 (2%) METAMORPHOSIS FATTY 1 (5%) 4 (8%) 1 (2%) BASOPHILIC CYTO CHANGE 1 (5%) 4 (8%) 1 (2%) HYDEPPLASIA, POCAL 3 (15%) 2 (4%) 1 (2%) #LIVER/CENTRILOBULAF (20) (49) (49) NECROSIS, NOS 1 (5%) 4 (8%) 9 (18%) *BILE DUCT (20) (50) (49) HYPEPPLASIA, NOS 1 (5%) 4 (8%) 9 (18%) *PANCREAS (20) (47) (48) TNFLAMMATION, ACUTE/CHRONIC 1 (2%) 1 (2%)	FIBROSIS, FOCAL		1 (2%)	
IGESTIVE SYSTEM *SAIIVAPY GLAND ATROPHY, FOCAL (19) (49) (46) *IVER (20) (49) (46) *IVER (20) (49) (49) INPLANMATION, ACUTE POCAL 1 (2%) 1 GPANULOMA, NOS 1 (2%) 1 (2%) DEGENERATION, NOS 1 (2%) 1 (2%) MECROSIS, POCAL 1 (5%) 4 (8%) 1 (2%) METAMORPHOSIS PATTY 1		(20)	(50)	(49)
#SAIIVAPY GLAND (19) (49) (46) A"ROPHY, FOCAL 1 (2%) (49) (49) #LIVER (20) (49) (49) INFLAMMATION, ACUTE FOCAL 1 (2%) 1 (2%) GPANULOMA, NOS 1 (2%) 1 (2%) DEGENERATION, NOS 1 (2%) 1 (2%) MECROSIS, FOCAL 1 (2%) 1 (2%) #ETAMORPHOSIS PATTY 1 (5%) 4 (8%) 1 (2%) BASOPHILIC CYTO CHANGE 1 (5%) 4 (8%) 1 (2%) HYPEPPLASIA, FOCAL 3 (15%) 2 (4%) 12 (24%) IYMPHOCYTOSIS 1 (2%) 1 (2%) 1 (2%) #LIVER/C ENTRI LOBULAP (20) (49) (49) NECROSIS, NOS 1 (5%) 4 (8%) 9 (18%) *BILE EUCT (20) (49) (49) HYPEPPLASIA, NOS 1 (5%) 4 (8%) 9 (18%) *PANCREAS (20) (47) (48) TNFLAMMATION, ACUTE/CHRONIC 1 (2%) 1 (2%)	INFLAMMATION, CHRONIC FOCAL		1 (2%)	
A*ROPHY, FOCAL 1 (2%) *LIVER (20) (49) (49) INPLAMMATION, ACUTE FOCAL 1 (2%) 1 (2%) GPANULOMA, NOS 1 (2%) 1 (2%) DEGENERATION, NOS 1 (2%) 1 (2%) MECROSIS, FOCAL 1 (2%) 1 (2%) METAMORPHOSIS PATTY 1 (5%) 4 (8%) 1 (2%) BASOPHILIC CYTO CHANGE 1 (5%) 4 (8%) 1 (2%) HYDEPPLASIA, POCAL 3 (15%) 2 (4%) 12 (24%) IYMPHOCYTOSIS 1 (2%) 1 (2%) 1 (2%) #LIVER/CENTRILOBULAF (20) (49) (49) NECROSIS, NOS 2 (4%) 1 (2%) 1 (2%) *BILE DUCT (20) (50) (49) HYPEPPLASIA, NOS 1 (5%) 4 (8%) 9 (18%) *PANCREAS (20) (47) (48)	GESTIVE SYSTEM			
*IIVER (20) (49) (49) INFLAMMATION, ACUTE FOCAL 1 (2%) GPANULOMA, NOS 1 (2%) DEGENEPATION, NOS 1 (2%) NECROSIS, FOCAL 1 (2%) METAMORPHOSIS PATTY 1 (2%) BASOPHILIC CYTO CHANGE 1 (5%) 4 HYPEPPLASIA, FOCAL 3 (15%) 2 (4%) IYMPHOCYTOSIS 1 (2%) 1 (2%) #LIVER/C ENTRI LOBULAF (20) (49) (49) NECROSIS, NOS 1 (5%) 4 (8%) 9 (18%) *BILE DUCT (20) (50) (49) (49) (48%) 9 (18%) *BILE DUCT (20) (50) (49) (18%) 9 (18%) 1 (2%) *PANCREAS (20) (47) (48) 1 (2%) 1 (2%)		(19)		(46)
INFLAMMATION, ACUTE FOCAL 1 (2%) GFANULOMA, NOS 1 (2%) DEGENERATION, NOS 1 (2%) DEGENERATION, NOS 1 (2%) METAMORPHOSIS, FOCAL 1 (2%) METAMORPHOSIS FATTY 1 (2%) BASOPHILIC CYTO CHANGE 1 (5%) 4 (8%) 1 (2%) HYDERPLASTA, POCAL 3 (15%) 2 (4%) 12 (2%) I YMPHOCYTOSIS 1 (2%) 1 (2%) 1 (2%) ELIVER/CENTRILOBULAP (20) (49) (49) NECROSIS, NOS 2 (4%) 2 (4%) 9 (18%) *BILE DUCT (20) (50) (49) HYPEPPLASIA, NOS 1 (5%) 4 (8%) 9 (18%) *PANCREAS (20) (47) (48) TNELAMMATION, ACUTE/CHRONIC 1 (2%) 1 (2%)	A"ROPHY, FOCAL		1 (2%)	
GPANULOMA, NOS 1 (2%) DEGENERATION, NOS 1 (2%) DEGENERATION, NOS 1 (2%) NECROSIS, POCAL 1 (2%) METAMORPHOSIS PATTY 1 (2%) BASOPHILIC CYTO CHANGE 1 (5%) 4 (8%) 1 (2%) HYPEPPLASIA, POCAL 3 (15%) 2 (4%) 12 (24%) IYMPHOCYTOSIS 1 (2%) 1 (2%) 1 (2%) KLIVER/CENTRILOBULAP (20) (49) (49) NECROSIS, NOS 2 (4%) 1 (5%) 4 (8%) 9 (18%) *BILE DUCT (20) (50) (49) (48%) 9 (18%) *PANCREAS (20) (47) (48) 1 (2%)		(20)	(49)	
NECROSIS, FOCAL 1 (2%) METAMORPHOSIS PATTY 1 (2%) BASOPHILIC CYTO CHANGE 1 (5%) 4 (8%) 1 (2%) HYDERPLASTA, FOCAL 3 (15%) 2 (4%) 1 (2%) IYMPHOCYTOSIS 1 (2%) 1 (2%) 1 (2%) HEMATOPOLESIS 1 (2%) 1 (2%) 1 (2%) ELIVER/CENTRILOBULAP (20) (49) (49) NECROSIS, NOS 2 (4%) 1 (5%) 4 (8%) 9 (18%) MELE DUCT (20) (50) (49) (49) HYPEPPLASIA, NOS 1 (5%) 4 (8%) 9 (18%) MEANCREAS (20) (47) (48) TNFLAMMATION, ACUTE/CHRONIC 1 (2%) 1 (2%)	GPANULOMA, NOS		1 (2%)	
METAMORPHOSIS PATTY 1 (2%) BASOPHILIC CYTO CHANGE 1 (5%) 4 (8%) 1 (2%) HYDEPPLASIA, POCAL 3 (15%) 2 (4%) 12 (24%) IYMPHOCYTOSIS 1 (2%) 1 (2%) 1 (2%) HLIVER/CENTRILOBULAP (20) (49) (49) NECROSIS, NOS 2 (4%) 1 (2%) 1 (2%) *BILE DUCT (20) (50) (49) HYPEPPLASIA, NOS 1 (5%) 4 (8%) 9 (18%) *PANCREAS (20) (47) (48) TNFLAMMATION, ACUTE/CHRONIC 1 (2%) 1 (2%)				
HYPEPPLASIA, POCAL 3 (15%) 2 (4%) 12 (24%) IYMPHOCYTOSIS 1 (2%) 1 (2%) HEMATOPOIESIS 1 (2%) 1 (2%) #LIVER/CENTRILOBULAP (20) (49) (49) NECROSIS, NOS 2 (4%) 2 (4%) (49) *BILE DUCT (20) (50) (49) HYPEPPLASIA, NOS 1 (5%) 4 (8%) 9 (18%) *PANCREAS (20) (47) (48) *NFLAMMATION, ACUTE/CHRONIC 1 (2%) 1 (2%)	METAMORPHOSIS PATTY			1 (2%)
I YMPHOCYTOSIS 1 (2%) H EM ATOPOIESIS 1 (2%) LIV ER/C ENTRI LOBULAP NECROSIS, NOS (20) (49) BILE DUCT (20) (50) (49) HYPEPPLASIA, NOS 1 (5%) 4 (8%) 9 (18%) PANCREAS TNFLAMMATION, ACUTE/CHRONIC (20) (47) (48)				
ELIVER/CENTRILOBULAP NECROSIS, NOS (20) (49) (49) DELLE DUCT HYPEPPLASIA, NOS (20) (50) (49) PANCREAS TNFLAMMATION, ACUTE/CHRONIC (20) (47) (48)	IYMPHOCYTOSIS	5 (154)		
NECROSTS, NOS 2 (4%) BILE DUCT (20) (50) (49) HYPEPPLASIA, NOS 1 (5%) 4 (8%) 9 (18%) PANCREAS (20) (47) (48) TNFLAMMATION, ACUTE/CHRONIC 1 (2%)	HEMATOPOIESIS		1 (2%)	
*BILE DUCT (20) (50) (49) HYPEPPLASIA, NOS 1 (5%) 4 (8%) 9 (18%) *PANCREAS (20) (47) (48) TNFLAMMATION, ACUTE/CHRONIC 1 (2%)		(20)		(49)
HYPEPPLASIA, NOS 1 (5%) 4 (8%) 9 (18%) #PANCREAS (20) (47) (48) TNFLAMMATION, ACUTE/CHRONIC 1 (2%)	NECROSIS, NOS		2 (4%)	
PANCREAS (20) (47) (48) TNFLAMMATION, ACUTE/CHRONIC 1 (2%)				
TNFLAMMATION, ACUTE/CHRONIC 1 (2%)	HIPEPPERDER, NOS	1 (5%)	4 (0.8)	5 (10%)
		(20)	(47)	
	FIBROSIS, DIFFUSE			1 (2%)
ATROPHY, FOCAL 1 (2%) 2 (4%)	ATROPHY, FOCAL		1 (2%)	2 (4%)
PANCREATIC ACINUS (20) (47) (48) CYTOPLASMIC VACUOLIZATION 1 (2%)		(20)		(48)

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

TABLE C2 (CONTINUED)

	CONTROL (UNTR) 11-1366	LCW DCSE 11-1364	HIGH DOSE 11-1362
*PEYEPS PATCH HYPERPLASIA, LYMPHOID	(19)	(49)	(48) 1 (2 %)
<pre>#ILEUM HYPEPPLASIA, LYMPHOID</pre>	(19)	(49)	(48) 1 (2 %)
COLON PARASITISM Hyperplasta, Lymphoid	(19) 5 (26%)	(49) 4 (8%)	(47) 5 (11%) 1 (2%)
IRINARY SYSTEM			
<pre>#KIDNEY INPLAMMATION, CHRONIC INPLAMMATION, CHPONIC FOCAL INPLAMMATION, GPANULONATOUS</pre>	(20) 5 (25%)	(50) 5 (10%)	(49) 17 (35%) 1 (2%) 1 (2%)
NEPHROPATHY, TOXIC NEPHROSIS, CHOLEMIC INFARCT, NOS		4 (8%) 1 (2%)	3 (6%) 1 (2%)
NDOCRINE SYSTEM			
*PITUITAFY CYST, NOS HEMORPHAGIC CYST HYPERPLASIA, CHROMOPHOBE-CELL	(18) 3 (17%) 1 (6%)	(47) 1 (2%) 1 (2%) 1 (2%)	(45) 1 (2 %)
*ADPENAL	(20)	(49)	(48)
HEMORRHAGIC CYST LIPOIDOSIS CYTOPLASMIC VACUOLIZATION ANGIECTASIS	1 (5%) 1 (5%)	2 (4%) 4 (8%) 2 (4%)	2 (4 %)
#ADRENAL CORTEX METAMORPHOSIS FATTY	(20)	(49) 1 (2%)	(48)
#THYROID FOLLICULAP CYST, NOS INFLAMMATION, ACUTE FOCAL ATROPHY, NOS	(18) 1 (6%)	(46) 3 (7%)	(46) 1 (2%) 1 (2%)
HYPERPLASIA, CYSTIC	1 (6%)	2 (4%)	1 (2%) 6 (13%)

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

TABLE C2 (CONTINUED)

#**HYBOTD FOLLICLE (16) (46) (46) ATEOPHY, NOS 1 (2%) 1 (2%) HYPERPLASIA, CYSTIC 1 (2%) 1 (2%) FYPERPLASIA, ADEMONATOUS 1 (2%) 1 (2%) FYPERPLASIA, ADEMONATOUS 1 (2%) (49) 1 (2%) EPRODUCTIVE SYSTEM (20) (50) (49) 1 (2%) STATION/DUCTS 1 (2%) (49) 1 (2%) CYSTIC DUCTS 2 (4%) 1 (2%) PUENATATION, NOS 1 (2%) (48) 1 (2%) DILATATION, NOS 1 (5%) 1 (2%) 1 (2%) PHEANTAN, NOS 1 (5%) 1 (2%) 1 (2%) 1 (2%) 1 (2%) 1 (2%) 1 (2%) 1 (2%) 1 (2%) 1 (2%) 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		CONTROL (UNTR) 11-1366	LOW DCSE 11-1364	HIGH DO SE 11-1362	
HTPERPLASIA, ADENOMATOUS 1 (2%) HTPERPLASIA, ADENOMATOUS 1 (2%) EPRODUCTIVE SYSTEM (20) (50) (49) ULIATATION/DUCTS 2 (4%) HYPERPLASIA, NOS 1 (2%) **MAMMARY GLAND (20) (50) (49) DILATATION/DUCTS 2 (4%) HYPERPLASIA, NOS 1 (2%) **MAMARY DUCT (20) (50) (49) DILATATION, NOS 1 (2%) (48) DILATATION, NOS 1 (5%) 1 (2%) **UTERUS (19) (49) (48) DILATATION, NOS 1 (5%) 1 (2%) HEMORPHAGE 2 (4%) 1 (2%) PERATONA, NOS 1 (5%) 1 (2%) INFLAMMATION, NOS 1 (5%) 1 (2%) INFLAMATION, NOS 2 (11%) 2 (4%) INPLAMATION, NOS 2 (11%) 1 (2%) INPLAMATION, NOS 2 (11%) 1 (2%) INPLAMATION, SUPPURATIVE 3 (16%) 1 (2%) INPLAMATION, CHENDRIVE 3 (16%) 1 (2%) INPLAMATION, CHENDRIC SUPPURATIVE 2 (11%) 2 (4	*THYROID FOLLICLE				
HTPERPLASIA, ADENOMATOUS 1 (2%) HTPERPLASIA, ADENOMATOUS 1 (2%) EPRODUCTIVE SYSTEM (20) (50) (49) ULIATATION/DUCTS 2 (4%) HYPERPLASIA, NOS 1 (2%) **MAMMARY GLAND (20) (50) (49) DILATATION/DUCTS 2 (4%) HYPERPLASIA, NOS 1 (2%) **MAMARY DUCT (20) (50) (49) DILATATION, NOS 1 (2%) (48) DILATATION, NOS 1 (5%) 1 (2%) **UTERUS (19) (49) (48) DILATATION, NOS 1 (5%) 1 (2%) HEMORPHAGE 2 (4%) 1 (2%) PERATONA, NOS 1 (5%) 1 (2%) INFLAMMATION, NOS 1 (5%) 1 (2%) INFLAMATION, NOS 2 (11%) 2 (4%) INPLAMATION, NOS 2 (11%) 1 (2%) INPLAMATION, NOS 2 (11%) 1 (2%) INPLAMATION, SUPPURATIVE 3 (16%) 1 (2%) INPLAMATION, CHENDRIVE 3 (16%) 1 (2%) INPLAMATION, CHENDRIC SUPPURATIVE 2 (11%) 2 (4		(/	3 (7%)	11 (24%)	
EPRODUCTIVE SYSTEM *MAMMARY GLAND (20) (50) (49) DILATATION/DUCTS 1 (2%) (49) CTSTIC DUCTS 1 (2%) (49) HYPERPLASIA, NOS 1 (2%) (49) DILATATION, NOS 1 (2%) (49) DILATATION, NOS 1 (2%) (49) DILATATION, NOS 1 (2%) 1 DILATATION, NOS 1 (5%) 1 PEDR TONA, NOS 1 (5%) 1 (2%) POLYPOID HYPERPLASIA 1 (5%) 1 (2%) INFLAMMATION, SOPPURATIVE 3 (16%) 1 (2%) INFLAMMATION, CHRONIC SUPPURATIVE 3 (16%) 1 (2%) INFLAMMATION, CHRONIC SUPPURATIVE 3<	HYPERPLASIA, CYSTIC		1 (2%)		
**AMMARY GLAND (20) (50) (49) DILATATION/DUCTS 2 (4%) HYDERPLASIA, NOS 1 (25) **AAMMARY DUCT (20) (50) (49) DILATATION, NOS 1 (25) **AAMMARY DUCT (20) (50) (49) (48) DILATATION, NOS 1 (55) 1 (2%) **UTERUS (19) (49) (48) DILATATION, NOS 1 (55) 1 (2%) HEM ORPHAGE 2 (4%) 1 (2%) HEM ORPHAGE 2 (4%) 1 (2%) NECROSIS, NOS 1 (55) 1 (2%) **UTERUS/ENDOMETRIUM (19) (49) (48) INFLAMMATION, NOS 1 (5%) POLYPOID HYDEPPLASIA 1 (5%) **UTERUS/ENDOMETRIUM (19) (49) (48) INFLAMMATION, NOS 1 (5%) 1 (2%) TYPLANGSIS, DIFFUSE 3 (16%) 1 (2%) HYDEMPLASIA, CYSTIC 2 (11%) 1 (2%) HYDEPPLASIA, CYSTIC 2 (11%) 1 (2%) #*UTERUS/HYONETRIUM (19) (49) (48) HYDERPLASIA, CYSTIC 2 (11%) 1 (2%) #*UTERUS/HYONETRIUM (19) (49) (47) CYST, NOS 1 (5%) 1 (2%) #*UTERUS/HYONETRIUM (19) (49) (47) CYST, NOS 1 (2%) 1 (2%) **UTERUS/HYONETRIUM (19) (49) (48) **UTERUS/HYONETRIUM (19) (49) (48) **UTERUS/HYONETRIUM (19) (49) (48) **UTERUS/HYONETRIUM (19) (49) (48)				1 (2%)	
DILATATION/DUCTS 1 (28) CYSTIC DUCTS 2 (48) HYPERPLASIA, NOS 1 (25) *MAMMARY DUCT (20) (50) (49) DILATATION, NOS 1 (27) 1 (28) *UTERUS (19) (49) (48) DILATATION, NOS 1 (55) 1 (28) *UTERUS (19) (49) (48) DILATATION, NOS 1 (55) 1 (28) #UTERUS (19) (49) (48) DILATATION, NOS 1 (55) 1 (28) #UTENS (19) (49) (48) DILATATION, NOS 1 (55) 1 (28) WEROSIS, NOS 1 (55) 1 (28) NECROSIS, DUPERPLASIA 1 (55) 1 (28) *UPLAMMATION, SUPPURATIVE 3 (163) 1 (28) HYPLARMATION, CHRONIC SUPPURATIV 2 (113) 1 (28) HYPERPLASIA, NOS 1 (55) 1 (28) HYPERPLASIA, NOS 1 (55) 2 (45) HYPERPLASIA, NOS 1 (55) 1 (28) #UTEPUS/MYONETRIUM (19) (49) (48) ABSCESS,	EPRODUCTIVE SYSTEM				
CYSTIC DUCTS 2 (4%) HYPERPLASIA, NOS 1 (2%) **NAMARY DUCT (20) (50) (49) DILATATION, NOS 1 (2%) 1 (2%) *UTERUS (19) (49) (48) DILATATION, NOS 1 (5%) 1 (2%) *UTERUS (19) (49) (48) DILATATION, NOS 1 (5%) 1 (2%) MEMORPHAGE 2 (4%) 1 (2%) PERATONA, NOS 1 (5%) 1 (2%) INPLAMMATION, NOS 1 (5%) 1 (2%) MUTENUM (19) (49) (48) INPLANMATION, FOCAL 1 (2%) 1 (2%) INPLAMMATION, SUPPUPATIVE 3 (16%) 1 (2%) INPLAMMATION, CREONIC SUPPURATIV 2 (11%) 1 (2%) THYLAMMATION, CHRONIC SUPPURATIV 2 (11%) 1 (2%) HYPERPLASIA, NOS 1 (5%) 1 (2%) HYPERPLASIA, NOS 1 (5%) 1 (2%) HYPERPLASIA, CYSTIC 2 (11%) 2 (4%) ABSCESS, NOS 1 (5%) 1 (2%) #OVARY (19) (49) (48)		(20)		(49)	
HYPERPLASIA, NOS 1 (2%) *MAMMARY DUCT (20) (50) (49) DILATATION, NOS 1 (2%) 1 (2%) #UTERUS (19) (49) (48) DILATATION, NOS 1 (5%) 1 (2%) HEMORPHAGE 2 (4%) 1 (2%) PENATONA, NOS 1 (5%) 1 (2%) HEMORPHAGE 2 (4%) 1 (2%) PENATONA, NOS 1 (5%) 1 (2%) MCCROSIS, NOS 1 (5%) 1 (2%) POLYPOID HYPEPPLASIA 1 (5%) 1 (2%) INFLAMMATION, NOS 2 (11%) 2 (4%) INFLAMMATION, SCOLL 3 (16%) 1 (2%) INFLAMMATION, CROPUPATIVE 3 (16%) 1 (2%) HYPERPLASIA, NOS 1 (5%) 1 (2%) HYPERPLASIA, NOS 1 (5%) 2 (4%) HYPERPLASIA, NOS 1 (5%) 1 (2%) HYPERPLASIA, CYSTIC 2 (11%) 1 (2%) #UTEPUS/MYONETRJUM (19) (49) (47) ABSCESS, NOS 1 (5%) 1 (2%) #OVARY (19) (49) (47) C					
**NAMMARY DUCT (20) (50) (49) DILATATION, NOS (19) (49) (48) DILATATION, NOS 1 (55) 1 (25) HEW ORPHAGE 2 (45) 1 (25) HEW ORPHAGE 2 (45) 1 (25) NECCOSIS, NOS 1 (55) 1 (25) HUTERUS/ENCOMETRIUM (19) (49) (48) INPLAMMATION, NOS 1 (55) 1 (25) HUTERUS/ENCOMETRIUM (19) (49) (48) INPLAMMATION, FOCAL 1 (25) 1 (25) INPLAMMATION, CHRONIC SUPPURATIVE 3 (165) 1 (25) INPLAMMATION, CHRONIC SUPPURATIV 2 (115) 1 (25) PIBROSIS, DIFFUSE 1 (55) 2 (45) HYDERPLASIA, NOS 1 (55) 2 (45) HYDERPLASIA, NOS 1 (55) 2 (45) HYDERPLASIA, NOS 1 (55) 1 (25) HYDERPLASIA, CISTIC 2 (115) 1 (25) #UTEPUS/MONETRIUM (19) (49) (47) CIST, NOS 1 (25) 1 (25) EFVOUS SYSTEM 1 (25) 1 (25) NONE					
DILATATION, NOS 1 (2%) #UTERUS (19) (49) (48) DILATATION, NOS 1 (5%) 1 (2%) HEMORPHAGE 2 (4%) 1 (2%) HEMORPHAGE 2 (4%) 1 (2%) INFLAMMATION, NOS 1 (5%) 1 (2%) NECROSIS, NOS 1 (5%) 1 (2%) #UTERUS/ENDOMETRIUM (19) (49) (48) INFLAMMATION, NOS 2 (11%) 2 (4%) 1 (2%) INFLAMMATION, NOS 2 (11%) 1 (2%) 1 (2%) INFLAMMATION, SUPPURATIVE 3 (16%) 1 (2%) 1 (2%) INFLAMMATION, CHRONIC SUPPURATIV 2 (11%) 1 (2%) 2 (4%) HYDERPLASIA, NOS 1 (5%) 1 (2%) 2 (4%) HYDERPLASIA, NOS 1 (5%) 1 (2%) 1 (2%) #UTEPUS/MYONETRIUM (19) (49) (48) ABSCESS, NOS 1 (5%) 1 (2%) 1 (2%) EPVOUS SYSTEM 1 (2%) 1 (2%) 1 (2%) NONE	HYPERPLASIA, NOS		1 (2%)		
#UTERUS (19) (49) (48) DILATATION, NOS 1 (25) HEMORPHAGE 2 (4%) 1 PENATONA, NOS 1 (5%) 1 (2%) INFLAMMATION, NOS 1 (5%) 1 (2%) NECROSIS, NOS 1 (5%) 1 (2%) POLYPOID HYPERPLASIA 1 (5%) 1 (2%) INFLAMMATION, NOS 2 (11%) 2 (4%) INFLAMMATION, NOS 2 (11%) 1 (2%) INFLAMMATION, SUPPURATIVE 3 (16%) 1 (2%) INFLAMMATION, CHRONIC SUPPURATIVE 3 (16%) 1 (2%) HYPERPLASIA, NOS 1 (5%) 1 (2%) HYPERPLASIA, NOS 1 (5%) 1 (2%) #UTEPUS/MYONFTRIUM (19) (49)	*MAMMARY DUCT	(20)	(50)	(49)	
DILATATION, NOS 1 (2%) HEM ORPHAGE 2 (4%) PENATOMA, NOS 1 (5%) INFLAMMATION, NOS 1 (5%) POLYDOID HYPEPPLASIA 1 (5%) #UTERUS/ENDOMETRIUM (19) (11%) 2 (4%) INFLAMMATION, NOS 1 (5%) #UTERUS/ENDOMETRIUM (19) (11%) 2 (4%) INFLAMMATION, NOS 2 (11%) INFLAMMATION, FOCAL 1 (2%) INFLAMMATION, CHRONIC SUPPURATIV 2 (11%) PIBROSIS, DIFFUSE 1 (15%) HYPERPLASIA, NOS 1 (5%) HYPERPLASIA, NOS 1 (5%) #UTEPUS/MYOMETRIUM (19) ABSCESS, NOS 1 (5%) #UTEPUS/MYOMETRIUM (19) ABSCESS, NOS 1 (2%) #OVARY (19) (49) CYST, NOS 1 (2%) PEVOUS SYSTEM NONE NONE	DILATATION, NOS		1 (2%)		
DILATATION, NOS 1 (2%) HEM ORPHAGE 2 (4%) PENATOMA, NOS 1 (5%) INFLAMMATION, NOS 1 (5%) POLYDOID HYPEPPLASIA 1 (5%) #UTERUS/ENDOMETRIUM (19) (11%) 2 (4%) INFLAMMATION, NOS 1 (5%) #UTERUS/ENDOMETRIUM (19) (11%) 2 (4%) INFLAMMATION, NOS 2 (11%) INFLAMMATION, FOCAL 1 (2%) INFLAMMATION, CHRONIC SUPPURATIV 2 (11%) PIBROSIS, DIFFUSE 1 (15%) HYPERPLASIA, NOS 1 (5%) HYPERPLASIA, NOS 1 (5%) #UTEPUS/MYOMETRIUM (19) ABSCESS, NOS 1 (5%) #UTEPUS/MYOMETRIUM (19) ABSCESS, NOS 1 (2%) #OVARY (19) (49) CYST, NOS 1 (2%) PEVOUS SYSTEM NONE NONE	#UT ERUS	(19)	(49)	(48)	
HEM OR PHAGE 2 (4%) HEM ATO MA, NOS 1 (5%) INFLAMMATION, NOS 1 (5%) POLYPOID HYDEPPLASIA #UTERUS/ENDOMETRIUM (19) (15%) 2 (4%) INFLAMMATION, NOS 1 (5%) POLYPOID HYDEPPLASIA #UTERUS/ENDOMETRIUM (19) (17%) 2 (4%) INFLAMMATION, NOS 2 (11%) POLYPOID HYDEPPLASIA INFLAMMATION, FOCAL 1 (2%) INFLAMMATION, SUPPURATIVE 3 (16%) 1 (2%) INFLAMMATION, CHRONIC SUPPURATIV 2 (11%) 1 (2%) PIBROSIS, DIFFUSE 1 (2%) 1 (2%) HYPERPLASIA, CYSTIC 2 (11%) 2 (4%) #UTEPUS/MYOMETRIUM (19) (49) (48) ABSCESS, NOS 1 (5%) 1 (2%) #OVARY (19) (49) (47) CYST, NOS 1 (2%) 1 (2%) PEVOUS SYSTEM NONE 1 (2%)		(12)	()		
INFLAMMATION, NOS 1 (5%) NECROSIS, NOS 1 (5%) POLYPOID HYPERPLASIA 1 (5%) #U"ERUS/ENDOMETRIUM (19) (49) (48) INFLAMMATION, NOS 2 (11%) 2 (4%) TNFLAMMATION, FOCAL 1 (2%) INFLAMMATION, SUPPURATIVE 3 (16%) 1 (2%) TNFLAMMATION, CHRONIC SUPPURATIV 2 (11%) 1 (2%) HYPERPLASIA, NOS 1 (5%) 2 (4%) HYPERPLASIA, NOS 1 (5%) 2 (4%) HYPERPLASIA, CYSTIC 2 (11%) #UTEPUS/MYONFTRJUM (19) (49) (48) ABSCESS, NOS 1 (5%) 1 (2%) #OVARY (19) (49) (47) CYST, NOS 1 (2%) PURCHASING 1 (2%) PURCHASION (47) PERVANCE NOS 1 (2%) HYPERPLASIA (47) PERVANCE NOS 1 (2%) HYPERPLASIA (47) PERVANCE NOS 1 (2%) HYPERPLASIA (47) HYPERPLASIA (47) HYPERPLA	HEMORPHAGE		2 (4%)	. ,	
NECROSIS, NOS 1 (5%) POLYPOID HYPEPPLASIA #U"ERUS/ENDOMETRIUM (19) (49) (48) INFLAMMATION, NOS 2 (11%) 2 (4%) 1 (2%) TNFLAMMATION, FOCAL 1 (2%) 1 (2%) 1 (2%) INFLAMMATION, SUPPURATIVE 3 (16%) 1 (2%) 1 (2%) TNFLAMMATION, CHRONIC SUPPURATIV 2 (11%) 1 (2%) 1 (2%) PIBROSIS, DIFFUSE 1 (5%) 1 (2%) 1 (2%) HYPERPLASIA, NOS 1 (5%) 2 (4%) 1 (2%) HYPERPLASIA, CYSTIC 2 (11%) 1 (2%) 1 (2%) #UTEPUS/HYOMETRIUM (19) (49) (48) ABSCESS, NOS 1 (5%) 1 (2%) 1 (2%) #OVARY (19) (49) (47) (47) CYST, NOS 1 (2%) 1 (2%) 1 (2%) 1 (2%) PERVOUS SYSTEM NONE 1 (2%) 1 (2%) 1 (2%)	FEMATOMA, NOS	1 (5%)		1 (2%)	
POLYPOID HYPEPLASIA 1 (5%) #UTERUS/ENDOMETRIUM (19) (49) (48) INFLAMMATION, NOS 2 (11%) 2 (4%) 1 (2%) TNFLAMMATION, FOCAL 1 (2%) 1 (2%) 1 (2%) INFLAMMATION, SUPPURATIVE 3 (16%) 1 (2%) 1 (2%) INFLAMMATION, CHRONIC SUPPURATIV 2 (11%) 1 (2%) 1 (2%) PIBROSIS, DIFFUSE 1 (5%) 1 (2%) 2 (4%) HYPERPLASIA, NOS 1 (5%) 2 (4%) 48) HYPERPLASIA, CYSTIC 2 (11%) 49) (48) ABSCESS, NOS 1 (5%) 1 (2%) 447) CYST, NOS 1 (2%) 1 (2%) 47) EPVOUS SYSTEM 1 (2%) 1 (2%) 47) PECIAL SENSE ORGANS 1 (2%) 1 (2%) 1 (2%)					
#UTERUS/ENDOMETRIUM (19) (49) (48) INFLAMMATION, NOS 2 (11%) 2 (4%) 1 (2%) INFLAMMATION, FOCAL 1 (2%) 1 (2%) INFLAMMATION, SUPPURATIVE 3 (16%) 1 (2%) INFLAMMATION, CHRONIC SUPPURATIV 2 (11%) 1 (2%) PIBROSIS, DIFFUSE 1 (5%) 2 (4%) HYPERPLASIA, NOS 1 (5%) 2 (4%) #UTEPUS/MYONETRIUM (19) (49) (48) ABSCESS, NOS 1 (5%) 1 (2%) #OVARY (19) (49) (47) CYST, NOS 1 (2%) 1 (2%) PEROUS SYSTEM NONE 1 (2%) 1 (2%)					
INFLAMMATION, NOS 2 (11%) 2 (4%) 'NFLAMMATION, FOCAL 1 (2%) INFLAMMATION, SUPPURATIVE 3 (16%) 1 (2%) INFLAMMATION, CHRONIC SUPPURATIV 2 (11%) 1 (2%) FIBROSTS, DIFFUSE 1 (5%) 1 (2%) HYPERPLASIA, NOS 1 (5%) 2 (4%) HYPERPLASIA, CYSTIC 2 (11%) 2 (4%) #UTEPUS/MYOMETRIUM (19) (49) (48) ABSCESS, NOS 1 (5%) 1 (2%) #OVARY (19) (49) (47) CYST, NOS 1 (2%) 1 2%) PERVOUS SYSTEM NONE 1 2%) PECIAL SENSE ORGANS 1000000000000000000000000000000000000	POLYPOID HYPERPLASIA	T (5%)			
INFLAMMATION, NOS 2 (11%) 2 (4%) 'NFLAMMATION, FOCAL 1 (2%) INFLAMMATION, SUPPURATIVE 3 (16%) 1 (2%) INFLAMMATION, CHRONIC SUPPURATIV 2 (11%) 1 (2%) FIBROSTS, DIFFUSE 1 (5%) 1 (2%) HYPERPLASIA, NOS 1 (5%) 2 (4%) HYPERPLASIA, CYSTIC 2 (11%) 2 (4%) #UTEPUS/MYOMETRIUM (19) (49) (48) ABSCESS, NOS 1 (5%) 1 (2%) #OVARY (19) (49) (47) CYST, NOS 1 (2%) 1 2%) PERVOUS SYSTEM NONE 1 2%) PECIAL SENSE ORGANS 1000000000000000000000000000000000000	#UTERUS/ENDOMETRIUM	(19)	(49)	(48)	
TNFLAMMATION, FOCAL 1 (2%) INFLAMMATION, SUPPURATIVE 3 (16%) 1 (2%) INFLAMMATION, CHRONIC SUPPURATIV 2 (11%) PIBROSIS, DIFFUSE 1 (2%) HYPERPLASIA, NOS 1 (5%) 2 (4%) HYPERPLASIA, CISTIC 2 (11%) #UTEFUS/MYONETRIUM (19) (49) (48) ABSCESS, NOS 1 (5%) 1 (2%) #OVARY (19) (49) (47) CYST, NOS 1 (2%) 1 (2%) PFVOUS SYSTEM NONE 1 (2%)	INFLAMMATION, NOS				
INPLAMMATION, CHRONIC SUPPURATIV 2 (11%) FIBROSIS, DIFFUSE 1 (2%) HYPERPLASIA, NOS 1 (5%) HYPERPLASIA, CYSTIC 2 (11%) #UTEPUS/MYOMETRIUM (19) ABSCESS, NOS 1 (5%) #OVARY (19) CYST, NOS 1 (2%) EPVOUS SYSTEM NONE	INFLAMMATION, FOCAL			1 (2%)	
PIBROSIS, DIFFUSE 1 (2%) HYPERPLASIA, NOS 1 (5%) 2 (4%) HYPERPLASIA, CYSTIC 2 (11%) #UTEFUS/MYOMETRIUM (19) (49) (48) ABSCESS, NOS 1 (5%) 1 (2%) #OVARY (19) (49) (47) CYST, NOS 1 (2%) 1 (2%) PPVOUS SYSTEM NONE 1 (2%) PECIAL SENSE ORGANS 1000000000000000000000000000000000000	INFLAMMATION, SUPPURATIVE	3 (16%)		1 (2%)	
HYPERPLASIA, NOS 1 (5%) 2 (4%) HYPERPLASIA, CYSTIC 2 (11%) 2 (4%) #UTEPUS/MYONETRJUM (19) (49) (48) ABSCESS, NOS 1 (5%) 1 (2%) #OVARY (19) (49) (47) CYST, NOS 1 (2%) 1 (2%) EPVOUS SYSTEM NONE 1 (2%) PECIAL SENSE ORGANS 10000 1 (2%)		2 (11%)			
HYPERPLASIA, CYSTIC 2 (11%) #UTEPUS/MYONETRTUM ABSCESS, NOS (19) (49) (48) *OVARY CYST, NOS (19) (49) (47) EPVOUS SYSTEM 1 (2%) 1 (2%)			1 (2%)	a (1, 4)	
#UTEPUS/MYOMETRIUM ABSCESS, NOS (19) (49) (48) *OVARY (19) (49) (47) CYST, NOS 1 (2%) EP VOUS SYSTEM 1 (2%) NONE PECIAL SENSE ORGANS 1000000000000000000000000000000000000				2 (4%)	
ABSCESS, NOS 1 (5%) 1 (2%) #OVARY (19) (49) (47) CYST, NOS 1 (2%) EPVOUS SYSTEM NONE	HIPERPLASIA, CISTIC	2 (11%)			
ABSCESS, NOS 1 (5%) 1 (2%) #OVARY (19) (49) (47) CYST, NOS 1 (2%) EPVOUS SYSTEM NONE	#UTEPUS/MYOMETRJUM	(19)	(49)	(48)	
CYST, NOS 1 (2%) EPVOUS SYSTEM NONE PECIAL SENSE ORGANS	ABSCESS, NOS		• •		
CYST, NOS 1 (2%) EPVOUS SYSTEM NONE PECIAL SENSE ORGANS	*OVARY	(19)	(49)	(47)	
EPVOUS SYSTEM NONE 	CYST, NOS		1 (2%)		
PECIAL SENSE ORGANS	EPVOUS SYSTEM None				
NONE					
	<u>NONE</u>				

TABLE C2 (CONCLUDED)

	CONTROL (UNTR) 11-1366	LOW DCSE 11-1364	HIGH DO SE 11-1362	
USCULOSKELETAL SYSTEM				
NONE				
DDY CAVITIES				
NONE				
LL OTHER SYSTEMS				
NONE				
PECIAL MORPHOLOGY SUMMARY				
NO LESION REPORTED ANIMAL MISSING/NO NECROPSY	2	9	2 1	

* NUMBER OF ANIMALS NECROPSIED

APPENDIX D

SUMMARY OF THE INCIDENCE OF NONNEOPLASTIC LESIONS IN MICE TREATED WITH N,N'-DIETHYLTHIOUREA

	CONTROL (UNTR) 22-2365	22-2363	22-2361	
ANIMALS INITIALLY IN STUDY	ð20	50	50	
ANIMALS MISSING	4	2	49	
ANIMALS NECROPSIED ANIMALS EXAMINED HISTOPATHOLOGICALL		48 48	49 49 	
INTEGUMENTARY SYSTEM				
*5KIN	(15)	(48)	(49)	
INFLAMMATION, GRANULOMATOUS			1 (2%)	
RESPIRATORY SYSTEM				
#LUNG	(13)	(46)	(46)	
ATELECTASIS			1 (2%)	
EDEMA, NOS		1 (28)	1 (2%)	
PNEUMONIA, ASPIPATION PNEUMONIA, CHRONTC MURINE		1 (2%)	1 (2%)	
INFLAMMATION, GRANULOMATOUS			1 (2%)	
HEMATOPOIETIC SYSTEM				
*SPLEEN	(14)	(48)	(43)	
HEMORRHAGE	1 (7%)	1 (2%) 2 (4%)	1 (2%)	
HYPEPPLASIA, LYMPHOID	(7%)	2 (4%)	1 (2*)	
#MANDIBULAR L. NODE	(14)	(45)	(42)	
HYPERPLASIA, NOS		1 (2%)	•••	
#MESENTERIC L. NODE	(14)	(45)	(42)	
CONGESTION, CHRONIC			1 (2%)	
HEMORRHAGIC CYST Inflammation, Hemorrhagic		1 (2%)	1 (2%)	
INFLAMMATION, GPANULOMATOUS	1 (75)	2 (4%)	2 (5%)	
HYPERPLASIA, DIFFUSE		• (•••)	1 (2%)	
HYPEPPLASIA, PLASMA CELL			1 (2%)	
	1 (7%)	2 (4%)	1 (2%)	

TABLE D1 SUMMARY OF THE INCIDENCE OF NONNEOPLASTIC LESIONS IN MALE MICE TREATED WITH N,N'-DIETHYLTHIOUREA

NONE ----

NUMBER ○● ANIMALS WITH TISSUE EXAMINED MICROSCOPICALLY
 # NUMBER OF ANIMALS NECROPSIED
 **EXCLUDES PARTIALLY AUTOLYZED ANIMALS
 ⑦ 20 ANIMALS INITTALLY ▼N STUDY BUT ONE ANIMAL WAS FOUND TO BE FEMALE IN A MALE GROUP

TABLE DI (CONTINUED)

	CONTROL (UNTR) 22-2365	10W D 22-2	OS E 36 3	HIGH 22-2	DO SE 2361
IGESTIVE SYSTEM					
#LIVER	(14)	(48)		(49)	
CYST, NOS	. ,		(2%)		
HEMORRHAGIC CYST			(2%)		
INFLAMMATION, NOS			(2%)	1	1) 91 \
DEGENERATION, GRANULAR DEGENERATION, HYDROPIC			(2%) (2%)	I	(2%)
TNFARCT, NOS	1 (7%)	•	(270)		
AMYLDIDOSIS				1	(2%)
METAMORPHOSIS FATTY					(4%)
NUCLEAR ENLAPGEMENT				1	(2%)
HYPERPLASIA, NOS Hypepplasia, diffuse		4	(2%)	,	(2%)
HYPEPPLASIA, DIFFUSE HYPEPPLASIA, PETICULUM CELL		1	(2%)	,	(2%)
·····					
#LIVER/HEPATOCYTES	(14)	(48)		(49)	
BASOPHILIC CYTO CHANGE					(2%)
HYPERPLASIA, DIFFUSE				2	(4%)
# DUODENUM	(15)	(46)		(47)	
AMYLOIDOSIS	、 -,		(2%)	. ,	
ATT 111 M	(15)	1117		10.7	
FIBROSIS	(15)	(46)		(47)	(2%)
11010515				•	(2%)
#COLON	(15)	(47)		(46)	
NEMATOCIASIS	4 (27%)	3	(6%)		
RINARY SYSTEM					
#KIDNEY	(14)	(4.8)		(<i>پ</i> ۲ م	
HY DRON EPHROSI S	(14)	1	(2%)	(47) 1	(2%)
PYELONEPHRITIS, CHRONIC			(2%)		
FIBROSIS, FOCAL	~	1	(2%)		
NDOCRINE SYSTEM					
NONE					
EPRODUCTIVE SYSTEM					
NONE					

TABLE D1 (CONCLUDED)

	CONTROL (UNTR) 22-2365	LCW DCSE 22-2363	HIGH DOSE 22-2361	
NEPVOUS SYSTEM				
#BRAIN CYTOPLASMIC VACHOLIZATION	(15)			
SPECTAL SENSE ORGANS				
NON B				
MUSCHLOSKELETAL SYSTEM				
*LAPYNGEAL MUSCLE PAPASITISM	(15)	(48) 1 (2%)	(49)	
BODY CAVITIES				
NON E				
ALL OTHER SYSTEMS				
*MULTIPLE ORGANS AMYLOIDOSIS	(15) 1 (7%)	(48)	(49)	
SPECTAL MORPHOLOGY SUMMARY				
NO LESION REPOFTED	3	15	15	
ANIMAL MISSING/NO NECROPSY AUTO/NECPOPSY/HISTO PERF AUTOLYSIS/NO NECROPSY	4	2 1	1 1	

	CON TROL (UNTR) 22-2366	LOW DOSE 22-2364	HIGH DOSE 22-2362
NIMALS INITIALLY IN STUDY	20	50	50
NIMALS HISSING	1	2	8
		48	41
NIMALS NECROPSIED NIMALS EXAMINED HISTOPATHOLOGICALLY**	19	40	41
			•••
NTEGUMENTARY SYSTEM			
NONE			
ESPIRATOPY SYSTEM			
#LUNG	(18)	(45)	(41)
AT ELECTASIS CONGESTION, NOS PNEUMONIA, CHRONIC MURINE		2 (4%)	2 (5%)
CONGESTION. NOS		1 (2%)	2 (5%)
PNEUMONIA, CHRONIC MURINE	2 (11%)	2 (4%)	2 (5%)
TNFLAMMATION, CHRONIC		1 (2%)	- ()
INFLAMMATION, GRANULOMATOUS		2 (4%)	
EMATOPOIETIC SYSTEM			
BONE MARROW HYPERPLASIA, GRANULOCYTIC	(19)	(44)	(39) 2 (5%)
	(19) (18)	(44) (46)	2 (5%)
HYPERPLASIA, GRANULOCYTIC #Spleen Congestion, chronic		(46)	
HYPERPLASIA, GRANULOCYTIC #SPLEEN CONGESTION, CHPONIC INPARCT, NOS		(46) 1 (2 %)	2 (5%) (40)
HYPERPLASIA, GRANULOCYTIC #SPLEEN CONGESTION, CHRONIC IN PARCT, NOS HYPERPLASIA, NOS	(18)	(46) 1 (2%) 1 (2%)	2 (5%) (40)
HYPERPLASIA, GRANULOCYTIC *SPLEEN CONGESTION, CHRONIC INPARCT, NOS HYPERPLASIA, NOS HYPERPLASIA, RETICULUM CELL	(18)	(46) 1 (2%) 1 (2%) 1 (2%)	22 (5%) (40) 1 (3%)
HYPERPLASIA, GRANULOCYTIC #SPLEEN CONGESTION, CHPONIC INPARCT, NOS HYPERPLASIA, NOS HYPERPLASIA, RETICULUM CELL HYPERPLASIA, LYMPHOID	(18) 1 (6%) 1 (6%)	(46) 1 (2%) 1 (2%) 1 (2%) 2 (4%)	2 (5%) (40)
HYPERPLASIA, GRANULOCYTIC *SPLEEN CONGESTION, CHRONIC INPARCT, NOS HYPERPLASIA, NOS HYPERPLASIA, RETICULUM CELL	(18)	(46) 1 (2%) 1 (2%) 1 (2%)	22 (5%) (40) 1 (3%)
HYPERPLASIA, GRANULOCYTIC #SPLEEN CONGESTION, CHPONIC INPARCT, NOS HYPERPLASIA, NOS HYPERPLASIA, RETICULUM CELL HYPERPLASIA, LYMPHOID HEMATOPOIESIS #SPLENTC FOLLICLES	(18) 1 (6%) 1 (6%)	(46) 1 (2%) 1 (2%) 1 (2%) 2 (4%) 1 (2%) (46)	22 (5%) (40) 1 (3%)
HYPERPLASIA, GRANULOCYTIC #SPLEEN CONGESTION, CHRONIC INPARCT, NOS HYPERPLASIA, NOS HYPERPLASIA, RETICULUM CELL HYPERPLASIA, LYMPHOID HEM ATOPOIESIS	(18) 1 (6%) 1 (6%) 1 (6%)	(46) 1 (2 %) 1 (2 %) 1 (2 %) 2 (4 %) 1 (2 %)	2 (5%) (40) 1 (3%) 3 (8%)
HYPERPLASIA, GRANULOCYTIC #SPLEEN CONGESTION, CHPONIC INPARCT, NOS HYPERPLASIA, NOS HYPERPLASIA, RETICULUM CELL HYPERPLASIA, LYMPHOID HEM ATOPOIESIS #SPLENTC POLLICLES HYPEPPLASIA, PETICULUM CELL #MANDTBULAR L. NODE	(18) 1 (6%) 1 (6%) 1 (6%) (18) (17)	(46) 1 (2%) 1 (2%) 1 (2%) 2 (4%) 1 (2%) (46)	2 (5%) (40) 1 (3%) 3 (8%)
HYPERPLASIA, GRANULOCYTIC #SPLEEN CONGESTION, CHPONIC IN PARCT, NOS HYPERPLASIA, NOS HYPERPLASIA, RETICULUM CELL HYPERPLASIA, LYMPHOID HEM ATOPOIESIS #SPLENTC POLLICLES HYPEPPLASIA, PETICULUM CELL #MANDIBULAR L. NODE HYPEPPLASIA, RETICULUM CELL	(18) 1 (6%) 1 (6%) 1 (6%) (18)	(46) 1 (2%) 1 (2%) 1 (2%) 2 (4%) 1 (2%) (46) 1 (2%) (46) (46)	2 (5%) (40) 1 (3%) 3 (8%) (40)
HYPERPLASIA, GRANULOCYTIC #SPLEEN CONGESTION, CHPONIC INPARCT, NOS HYPERPLASIA, NOS HYPERPLASIA, RETICULUM CELL HYPERPLASIA, LYMPHOID HEM ATOPOIESIS #SPLENTC POLLICLES HYPEPPLASIA, PETICULUM CELL #MANDTBULAR L. NODE	(18) 1 (6%) 1 (6%) 1 (6%) (18) (17)	(46) 1 (2%) 1 (2%) 2 (4%) 1 (2%) (46) 1 (2%)	2 (5%) (40) 1 (3%) 3 (8%) (40)
HYPERPLASIA, GRANULOCYTIC #SPLEEN CONGESTION, CHPONIC IN PARCT, NOS HYPERPLASIA, NOS HYPERPLASIA, RETICULUM CELL HYPERPLASIA, LYMPHOID HEM ATOPOIESIS #SPLENTC POLLICLES HYPEPPLASIA, PETICULUM CELL #MANDIBULAR L. NODE HYPEPPLASIA, RETICULUM CELL	(18) 1 (6%) 1 (6%) 1 (6%) (18) (17) 1 (6%)	(46) 1 (2%) 1 (2%) 1 (2%) 2 (4%) 1 (2%) (46) 1 (2%) (46) (46)	2 (5%) (40) 1 (3%) 3 (8%) (40)

TABLE D2 SUMMARY OF THE INCIDENCE OF NONNEOPLASTIC LESIONS IN FEMALE MICE TREATED WITH N,N'-DIETHYLTHIOUREA

NUMBER OF ANIMALS WITH TISSUE EXAMINED MICROSCOPICALLY
 NUMBER OF ANIMALS NECROPSIED
 **EXCLUDES PARTIALLY AUTOLYZED ANIMALS

TABLE D2 (CONTINUED)

	CONTROL (UNTR) 22-2366	LCW DCSE 22-2364	HIGH DO SE 22-2362	
INFLAMMATION, CHRONIC INFLAMMATION, GRANULOMATOUS PIGMENTATION, NOS HYPERPLASIA, RETICULUM CELL		1 (2%)	1 (3%) 1 (3%) 1 (3%) 1 (3%) 1 (3%)	
HYPERPLASIA, LYMPHOID		1 (2%)	2 (5%)	
IRCULATORY SYSTEM				
NON E				
IGESTIVE SYSTEM				
#LIVER INFLAMMATION, DIFFUSE	(19)	(46) 1 (2%)	(40)	
INFLAMMATION, SUPPURATIVE FIBROSIS, FOCAL		. (2/-)	1 (3%) 1 (3%)	
DEGENERATION, GRANULAR DEGENERATION, HYDROPIC	1 (5%) 1 (5%)	1 (2%)		
METAMORPHOSIS FATTY Hypepplasia, diffuse		2 (4%)	1 (3%) 1 (3%)	
<pre>#LIVER/PERIPORTAI INFLAMMATION, GRANULOMATOUS</pre>	(19)	(46)	(40) 1 (3 %)	
PIBPOSIS	1 (5%)		. (3,8)	
#LIVEP/HEPATOCYTES HYPERPLASIA, NOS	(19)	(46) 2 (4%)	(40)	
#PANC REAS	(18)	(44)	(40)	
ATROPHY, NOS #SMALL INTESTINE	1 (6%) (17)	(43)	(39)	
HYPERPLASIA, LYMPHOID	(17)	1 (2%)	(33)	
#PEYERS PATCH HYPERPLASIA, RETICULUM CELL	(17) 1 (6%)	(43)	(39)	
*COLON	(18)	(42)	(39)	
NEMATOLIASIS Parasitism		1 (2%) 1 (2%)	1 (3%)	
RINAPY SYSTEM				
*KIDNEY NPLAMMATIONCHRONIC	(18)	(46) 1 (2%)	(40) <u>1 (3%)</u>	

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

TABLE D2 (CONTINUED)

	CONTROL (UNTR) 22-2366	LOW DOSE 22-2364	HIGH DOSE 22-2302
PERIVASCULAR CUFFING			2 (5%)
#URINARY BLADDEF LYMPHOCYTIC INFLAMMATORY INFILTF	(15)	(34)	(28) 1 (4%)
NDOCRINE SYSTEM			
<pre>#PITUITAFY HEMOPRHAGIC CYST HYPERPLASIA, CHROMOPHOBE-CELL</pre>	(9)	(20) 1 (5%)	(23) 1 (4%)
#™HYROID CYST, NOS POLLICULAR CYST, NOS DEGENERATION, NOS HYPERPLASIA, FOCAL	(12)	(31) 1 (3%) 1 (3%)	(25) 1 (4%) 2 (8%)
*PANCREATIC ISLETS HYPERTROPHY, NOS	(18)	(44) 1 (2%)	(40)
EPRODUCTIVE SYSTEM			
#UTERUS HYDROMETPA PIBROSIS, DIFFUSE HYPERPLASIA, STROMAL	(17) 1 (6%)	(45) 6 (13%)	(38) b (16%) 1 (3%) 1 (3%)
#UTERUS/ENDOMETPIUM CYST, NOS HYPEPPLASIA, CYSTIC	(17) 1 (6%) 2 (12%)	(45) 5 (11%)	(38) 8 (21%)
#UTERUS/MYOMETRIUM ABSCESS, NOS AMYLOIDOSIS	(17)	(45) 1 (2%)	(38) 1 (3 %)
*OVARY/OVIDUCT CYST, NOS	(17) 1 (6%)	(45)	(38)
OVARY CYST, NOS PAROVARIAN CYST ABSCESS, NOS	(16) 3 (19%)	(43) 5 (12%) 1 (2%) 1 (2%)	(35) 4 (11%)

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

TABLE D2 (CONCLUDED)

	CONTROL (UNTR) 22-2366	LCW DOSE 22-2364	HIGH DO SE 22-2362	
NERVOUS SYSTEM				
#BRAIN Corpopa Amylacea	(19) 1 (5%)	(44)	(38)	
SPECTAL SENSE ORGANS				
NONE				
MUSCHLOSKELETAL SYSTEM				
NONE				
BODY CAVITIES				
*MESENTERY STEATITIS	(19)	1 (201)	(4 1)	
ALL OTHER SYSTEMS				
NONE				
SPECIAL MORPHOLOGY SUMMARY				
NO LESION REPORTED	1	5	5	
ANIMAL MISSING/NO NECROPSY AUTO/NECROPSY/HISTO PERF AUTO/NECROPSY/NO HISTO	1 1	2 1 1	8 1	
AUTOLYSIS/NO NECROPSY		1	1	
* NUMBER OF ANIMALS WITH TISSUE EX * NUMBER OF ANIMALS NECROPSIED	AMINED MICROSCOPIC	ALLY		

Review of the Bioassay of N,N'-Diethylthiourea* 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 N,N'-Diethylthiourea for carcinogenicity.

The primary reviewer agreed with the conclusion in the report that N,N'-Diethylthiourea was carcinogenic in both sexes of treated rats. After a brief description of the experimental design, she noted as shortcomings of the study: 1) the small number of matched controls; 2) the fact that other chemicals were under test in the same room in which this study was conducted; and 3) the treated animals may not have received a maximum tolerated dose, since a noticeable weight effect was not observed. Despite the shortcomings, she said that the study was still valid, although she questioned if the thyroid effect was sufficient evidence to regard N,N'-Diethylthiourea to be a carcinogen. The primary reviewer felt no statement could be made concerning the human risk posed by N,N'-Diethylthiourea.

A Program staff pathologist commented that C-cell tumors are the most common type of thyroid neoplasms in Fischer rats, occurring about three or four times more frequently than follicular-cell tumors.

A motion was approved unanimously that the report on the bioassay of N,N'-Diethylthiourea be accepted as written.

Members present were:

Arnold Brown (Chairman), University of Wisconsin Medical School 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.

DHEW Publication No. (NIH) 79-1705