National Cancer Institute CARCINOGENESIS Technical Report Series NO. 161 1979

BIOASSAY OF

PHTHALAMIDE

FOR POSSIBLE CARCINOGENICITY

CAS No. 88-96-0

NCI-CG-TR-161

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



BIOASSAY OF PHTHALAMIDE FOR POSSIBLE CARCINOGENICITY

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

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

DHEW Publication No. (NIH) 79-1717

• • • , ,

BIOASSAY OF PHTHALAMIDE 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 phthalamide conducted for the Carcinogenesis Testing Program, Division of Cancer Cause and Prevention, National Cancer National Institutes of Health, Institute (NCI), Bethesda. This is one of a series of experiments designed to Maryland. determine whether selected chemicals have the capacity to produce cancer in animals. A negative result, in which the test animals do not have a greater incidence of cancer than control animals, does not necessarily mean that the test chemical is not a carcinogen, inasmuch as the experiments are conducted under a limited set of circumstances. A positive result demonstrates that the test chemical is carcinogenic for animals under the conditions of the test and indicates that exposure to the chemical is a potential risk to man. The actual determination of the risk to man from chemicals that are carcinogenic in animals requires a wider analysis.

CONTRIBUTORS: This bioassay of phthalamide was conducted by the NCI Frederick Cancer Research Center (FCRC) (1), Frederick, Maryland, operated for NCI (2) by Litton Bionetics, Inc.

The manager of the bioassay at FCRC was Dr. B. Ulland, the toxicologist was Dr. E. Gordon, and Drs. R. Cardy and D. Creasia compiled the data. Ms. S. Toms was responsible for management of data, Mr. D. Cameron for management of histopathology, Mr. L. Callahan for management of the computer branch, and Mr. R. Cypher for the management of the facilities. Mr. A. Butler performed the computer services. Necropsies were performed by Drs. B. Ulland, R. Schueler, R. Ball, and R. Cardy. Histopathologic evaluations were performed by Dr. D. A. Willigan (3), and the diagnoses included in this report represent his interpretation.

Animal pathology tables and survival tables were compiled at EG&G Mason Research Institute (4). The statistical analyses were performed by Dr. J. R. Joiner (5) and Ms. P. L. Yong (5), using methods selected for the bioassay program by Dr. J. J. Gart (6). The chemicals used in this bioassay were analyzed at FCRC (1) by Dr. W. Zielinsky. The chemical narrative and analyses were reviewed and approved by Dr. W. Lijinsky (1).

This report was prepared at Tracor Jitco (5) under the direction of NCI. Those responsible for the report at Tracor Jitco were Dr. C. R. Angel, Acting Director of the Bioassay Program; Dr. S. S. Olin, Deputy Director for Science; Dr. J. F. Robens, toxicologist; Dr. R. L. Schueler, pathologist; Dr. G. L. Miller, Ms. L. A Owen, Ms. M. S. King, and Mr. W. D. Reichardt, bioscience writers; and Dr. E. W. Gunberg, technical editor, assisted by Ms. Y. E. Presley.

The following scientists at NCI were responsible for evaluating the bioassay, interpreting the results, and reporting the findings: Dr. Kenneth C. Chu, Dr. Cipriano Cueto, Jr., Dr. J. Fielding Douglas, Dr. Richard A. Griesemer, Dr. Thomas E. Hamm, Dr. William V. Hartwell, Dr. Morton H. Levitt, Dr. Harry A. Milman, Dr. Thomas W. Orme, Dr. A. R. Patel, Dr. Sherman F. Stinson, Dr. Jerrold M. Ward, and Dr. Carrie E. Whitmire.

- Frederick Cancer Research Center, P.O. Box B, Frederick, Maryland.
- (2) Carcinogenesis Testing Program, Division of Cancer Cause and Prevention, National Cancer Institute, National Institutes of Health, Bethesda, Maryland.
- (3) Donald A. Willigan, Inc., 309 East Second Street, (P.O. Box 831), Bound Brook, New Jersey.
- (4) EG&G Mason Research Institute, 1530 East Jefferson Street, Rockville, Maryland.
- (5) Tracor Jitco, Inc., 1776 East Jefferson Street, Rockville, Maryland.
- (6) Mathematical Statistics and Applied Mathematics Section, Biometry Branch, Field Studies and Statistics, Division of Cancer Cause and Prevention, National Cancer Institute, National Institutes of Health, Bethesda, Maryland.

SUMMARY

A bioassay of phthalamide for possible carcinogenicity was conducted by administering the test chemical in feed to F344 rats and B6C3F1 mice.

Groups of 50 rats of each sex were administered phthalamide at one of two doses, either 15,000 or 30,000 ppm for the males and either 5,000 or 10,000 ppm for the females, for 106 weeks. Groups of 50 mice of each sex were administered the test chemical at one of two doses, 25,000 or 50,000 ppm, for the males, and at one of three doses, 6,200, 12,500, or 25,000 ppm, for the females, for 103 or 105 weeks. Matched controls consisted of 20 untreated rats of each sex, 20 untreated male mice, and two groups of 20 untreated female mice. All surviving rats and mice were killed at the end of administration of the test chemical.

Mean body weights of the dosed groups of rats and mice were either slightly lower than those of corresponding control groups or essentially unaffected by administration of the test chemical. Also, survival was unaffected in the rats and mice except for early deaths in the high- and mid-dose groups of female mice. Survival was 66% or greater at the end of the bioassay in all dosed and control groups of each species and sex except for the high-dose group of female mice (36%). With the exception of the high-dose female mice, sufficient numbers of animals were at risk in all groups for the development of late-appearing tumors.

No tumors occurred in the rats or mice of either sex at incidences that were significantly higher in the dosed groups than in the corresponding control groups. However, phthalamide produced toxic lesions in the livers of male and female rats and the urinary systems of female rats and mice. The presence of nonneoplastic lesions suggests that the MTD may have been used or exceeded.

It is concluded that under the conditions of this bioassay, phthalamide was not carcinogenic for F344 rats or B6C3F1 mice of either sex.

TABLE OF CONTENTS

		<u>P</u>	age		
I.	Intro	duction	1		
11.	Mater	ials and Methods	3		
	A. B. C. D. E. F. G. H.	Chemical. Dietary Preparation. Animals. Animal Maintenance. Subchronic Studies. Chronic Studies. Clinical and Pathologic Examinations. Data Recording and Statistical Analyses.	3 4 5 7 10 10 14		
III	. Resu	lts - Rats	21		
	A. B. C. D.	Body Weights and Clinical Signs (Rats) Survival (Rats) Pathology (Rats) Statistical Analyses of Results (Rats)	21 21 24 26		
IV.	Resu	lts - Mice	29		
	A. B. C. D.	Body Weights and Clinical Signs (Mice) Survival (Mice) Pathology (Mice) Statistical Analyses of Results (Mice)	29 31 33 34		
v.	Disc	ussion	37		
VI.	Bibl	iography	39		
APPENDIXES					
••		A Summary of the Incidence of Neoplasms in Rats Administered Phthalamide in the Diet	41		
Т	able A	l Summary of the Incidence of Neoplasms in Male Rats Administered Phthalamide in the Diet	43		
T	able A	2 Summary of the Incidence of Neoplasms in Female			

Rats Administered Phthalamide in the Diet

Table Bl	Summary of the Incidence of Neoplasms in Male Mice Administered Phthalamide in the Diet	53
Table B2	Summary of the Incidence of Neoplasms in Female Mice Administered Phthalamide in the Diet	57
Appendix C	Summary of the Incidence of Nonneoplastic Lesions in Rats Administered Phthalamide in the Diet	61
Table Cl	Summary of the Incidence of Nonneoplastic Lesions in Male Rats Administered Phthalamide in the Diet	63
Table C2	Summary of the Incidence of Nonneoplastic Lesions in Female Rats Administered Phthalamide in the Diet	69
Appendix D	Summary of the Incidence of Nonneoplastic Lesions in Mice Administered Phthalamide in the Diet	75
Table Dl	Summary of the Incidence of Nonneoplastic Lesions in Male Mice Administered Phthalamide in the Diet	77
Table D2	Summary of the Incidence of Nonneoplastic Lesions in Female Mice Administered Phthalamide in the Diet	82
Appendix E	Analyses of the Incidence of Primary Tumors in Rats Administered Phthalamide in the Diet	89
Table El	Analyses of the Incidence of Primary Tumors in Male Rats Administered Phthalamide in the Diet	91
Table E2	Analyses of the Incidence of Primary Tumors in Female Rats Administered Phthalamide in the Diet	96
Appendix F	Analyses of the Incidence of Primary Tumors in Mice Administered Phthalamide in the Diet	101

Page

Table Fl	Analyses of the Incidence of Primary Tumors in Male Mice Administered Phthalamide in the Diet	103
Table F2	Analyses of the Incidence of Primary Tumors in Female Mice Administered Phthalamide in the Diet	108

TABLES

Table l	Phthalamide Subchronic Feeding Studies in Rats and Mice	9
Table 2	Phthalamide Chronic Feeding Studies in Rats	11
Table 3	Phthalamide Chronic Feeding Studies in Mice	12

FIGURES

Figure	1	Growth Curves for Rats Administered Phthalamide in the Diet	22
Figure	2	Survival Curves for Rats Administered Phthalamide in the Diet	23
Figure	3	Growth Curves for Mice Administered Phthalamide in the Diet	30
Figure	4	Survival Curves for Mice Administered Phthalamide in the Diet	32

x

I. INTRODUCTION

Phthalamide, o-phthalic acid diamide, or P-D (CAS 88-96-0; NCI CO3612) is recommended for use as an accelerator for curing epoxy It is believed to be resins. chiefly used in the paint industry (Sherwin Williams, personal communication, 1978; Cleiford and Coulter, 1969).



Phthalamide

Phthalamide was selected as a representative phthalic acid derivative for evaluation of possible carcinogenicity by the National Cancer Institute.

.

II. Materials and Methods

A. Chemical

Phthalamide (o-phthalic acid diamide) was obtained from Sherwin Williams Chemicals as a fine, white powder. Elemental analysis showed mean values of 58.3% carbon, 4.9% hydrogen, and 17.3% nitrogen (theoretical: 58.5% C, 4.9% H, and 17.1% N). Its infrared spectrum was consistent with its chemical structure and was identical to that of a reference standard of phthalamide. Mass spectral analysis showed a molecular ion at m/e 164 and a base peak at m/e 148. Proton NMR analysis confirmed the structure of phthalamide and showed no peaks due to impurities. Analysis at two different wavelengths indicated that the effluent from high-pressure liquid chromatography contained three components one of which was greater than 99%, with two minor Thin-layer chromatography of the material gave contaminants. only one detectable spot.

The test material was stored at 5°C until used.

B. Dietary Preparation

Test diets containing phthalamide were prepared fresh every 1 to 1-1/2 weeks in 6- to 12-kg batches at the appropriate doses. A known weight of the chemical was first mixed with an equal weight of autoclaved Wayne[®] Sterilizable Lab Meal with 4% fat (Allied Mills, Inc., Chicago, Ill.), using a mortar and pestle. The mixing was continued with second and third additions of feed, and final mixing was performed with the remaining quantity of feed for a minimum of 15 minutes in a Patterson-Kelly twin-shell blender. The diets were routinely stored at 5[°]C until used.

C. Animals

Male and female F344 (Fischer) rats and B6C3F1 mice were obtained as 4-week-old weanlings, all within 3 days of the same age, from the NCI Frederick Cancer Research Center (Frederick, Md.). The animals were housed within the test facility for 2 weeks and were then assigned four rats to a cage and five mice to a cage on a weight basis for each cage of animals of a given species and sex. Male rats used in the chronic study weighed 90 to 105 g, averaging at least 100 g; the female rats, 80 to 95 g, averaging at

least 90 g; the male mice, 18 to 22 g, averaging at least 19.5 g; and the female mice, 17 to 21 g, averaging at least 18.5 g. Individual animals were identified by ear punch.

D. Animal Maintenance

The animals were housed in polycarbonate cages (Lab Products Inc., Garfield, N. J.), 19 x 10-1/2 x 8 inches for the rats and $11-1/2 \times 7-1/2 \times 5$ inches for the mice. The cages were suspended from aluminum racks (Scientific Cages, Inc., Bryan, Tex.) and were covered by nonwoven polyester-fiber 12-mil-thick filter paper (Hoeltge, Inc., Cincinnati, Ohio). The bedding used was Absorb-dri[®] hardwood chips (Northeastern Products, Inc.. Warrenburg, N. Y). The feed supplied was presterilized Wayne® Sterilizable Lab Meal with 4% fat, provided ad libitum in suspended stainless steel hoppers and replenished as required, at least three times per week. Water, acidified to pH 2.5, was supplied ad libitum from glass bottles with sipper tubes suspended through the tops of the cages.

The contaminated bedding was disposed of through an enclosed vacuum line that led to a holding tank from which the bedding was fed periodically into an incinerator. The cages were sanitized

twice per week and the feed hoppers twice per month at 82 to 88° C in a tunnel-type cagewasher (Industrial Washing Machine Corp., Mataway, N. J.), using the detergents, Clout[®] (Pharmacal Research Laboratories, Greenwich, Conn.) or Oxford D'Chlor (Oxford Chemicals, Atlanta, Ga.). The glass bottles and sipper tubes were sanitized at 82 to 88° C in a tunnel-type bottle washer (Consolidated Equipment Supply Co., Mercersburg, Pa.) three times per week, using a Calgen Commercial Division detergent (St. Louis, Mo.). The racks for the cages were sanitized at or above 82° C in a rack washer (Consolidated Equipment Co.) once per month, using the Calgen Commercial Division detergent, and the filter paper was changed at the same time.

The animal rooms were maintained at 22 to 24°C and 45 to 55% relative humidity. Incoming air was passed through a filter of 65% efficiency and a bag filter of 95% efficiency at the intake and was expelled without recirculation through a "Z"-type roughing filter of 30% efficiency and a bag system of 90 to 95% efficiency at the exhaust (American Air Filters, Louisville, Ky.; Mine Safety Appliances, Pittsburgh, Pa.). Room air was changed 15 times per hour. The air pressure was maintained negative to a clean hallway and positive to a return hallway. Fluorescent lighting was provided automatically on a 12-hour-per-day cycle.

Rats administered phthalamide and their corresponding controls were housed in the same room as rats on feeding studies of the following chemicals:

```
(CAS 128-37-0) butylated hydroxytoluene (BHT)
(CAS 137-17-7) 2,4,5-trimethylaniline
```

Mice administered phthalamide and their corresponding controls were housed in the same room as mice on feeding studies of the following chemicals:

```
(CAS 156-62-7) calcium cyanamide
(CAS 999-81-5) (2-chloroethy1)trimethylammonium chloride (CCC)
(CAS 95-80-7) 2,4-diaminotoluene
(CAS 19010-66-3) lead dimethyldithiocarbamate
(CAS 86-30-6) N-nitrosodiphenylamine
(CAS 120-62-7) piperonyl sulfoxide
(CAS 137-17-7) 2,4,5-trimethylaniline
```

E. Subchronic Studies

Subchronic feeding studies were conducted to estimate the maximum tolerated doses (MTD's) of phthalamide, on the basis of which two concentrations (referred to in this report as "low" and "high" doses) were selected for administration in the chronic studies. Groups of five rats and five mice of each sex were fed diets containing phthalamide for 7 weeks, followed by 1 week of additional observation; groups of five control animals of each sex and species were administered basal diet only. Each animal was weighed twice per week. Table 1 shows the number of animals in each dosed group that survived during the course of administration and the mean body weights of dosed animals at week 7, expressed as percentages of mean body weights of the controls.

At the end of the subchronic studies, all animals were killed using CO₂ and necropsied. Clinical signs and histopathologic findings are included in table 1 as footnotes.

In the rats, ten percent depression in body weight was a major criterion for selection of the MTD. The doses required to produce this response were determined by the following procedure: first, least squares regressions of mean body weights versus days on study were used to estimate mean body weights of each of the dosed groups at day 49. Next, probits of the percent weights of dosed groups at day 49 relative to weights of corresponding control groups were plotted against the logarithms of the doses, and least squares regressions fitted to the data were used to estimate the doses required to induce 10% depression in weight. In the mice, there was no effect on weights and the doses were set at the maximum amount allowed for use in the Carcinogenicity Testing Program.

The low and high doses for the chronic studies were set at 15,000

Male			Female		
Dose (ppm)	<u>Survival(a)</u>	Mean Weight at Week 7 as % of Control	Survival(a)	Mean Weight at Week 7 as % of Control	
RATS					
6,200	5/5	99	5/5	98	
12,500 (b,c)	5/5	86	5/5	96	
25,000 (d)	5/5	87	3/5	70	
50,000 (b,d)	5/5	90	0/5		
MICE					
6,200	5/5	120	5/5	102	
12,500	4/5	120	5/5	111	
25,000 (c)	5/5	107	5/5	105	
50,000 (Ъ)	5/5	111	0/5		

Table 1. Phthalamide Subchronic Feeding Studies in Rats and Mice

(a) Number surviving/number in group.

- (b) The tissues of male rats and mice at these doses were examined histopathologically and were found to be essentially normal.
- (c) The tissues of female rats and mice at these doses were examined histopathologically and were found to be essentially normal.
- (d) Clinical signs in female rats included arched back and rough hair.

and 30,000 ppm for male rats and 5,000 and 10,000 ppm for female rats. For mice, the low and high doses for the chronic studies were set at 25,000 and 50,000 ppm for males and 12,500 and 25,000 ppm for females.

F. Chronic Studies

The test groups, doses administered, and durations of the chronic feeding studies are shown in tables 2 and 3. Due to early deaths in the initial groups of female mice, a group of 50 female mice dosed at 6,200 ppm, together with a group of 20 additional control animals, was placed on study at week 9, as shown in table 3.

G. Clinical and Pathologic Examinations

All animals were observed twice daily. Observations for sick, tumor-bearing, and moribund animals were recorded daily. Clinical examination and palpation for masses were performed each month, and the animals were weighed at least once per month. Moribund animals and those that survived to the end of the bioassay were killed using CO_2 and necropsied.

Sex and Test <u>Group</u>	Initial No. of Animals(a)	Phthalamide in Diet(b) (ppm)	Time on Study (weeks)
<u>Male</u>			
Matched-Control	20	0	106
Low-Dose	50	15,000	106
High-Dose	50	30,000	106
Female			
Matched-Control	20	0	106
Low-Dose	50	5,000	106
High-Dose	50	10,000	106

Table 2. Phthalamide Chronic Feeding Studies in Rats

(a) All animals were 6 weeks of age when placed on study.

(b) Test and control diets were provided <u>ad libitum</u> 7 days per week.

Initial No. of Animals(a)	Phthalamide in Diet(b) (ppm)	Time on Study (weeks)
20	0	105
50	25,000	105
50	50,000	105
20(c)	0	103
e 20	0	105
50(c)	6,200	103
50	12,500	105
50	25,000	105
	No. of <u>Animals(a)</u> 20 50 50 20(c) e 20 50(c) 50	No. of Animals(a) in Diet(b) (ppm) 20 0 20 0 50 25,000 50 50,000 20(c) 0 20(c) 0 20 0 50(c) 6,200 50 12,500

Table 3. Phthalamide Chronic Feeding Studies in Mice

(a) All animals were 6 weeks of age when placed on study.

- (b) Test and control diets were provided <u>ad libitum</u> 7 days per week.
- (c) The group of 50 female mice dosed at 6,200 ppm was placed on study at week 9, together with 20 additional control animals (low-dose control), because of early deaths in the initial group of high-dose female mice.

Gross and microscopic examinations of major tissues, major organs, and all gross lesions were performed. The tissues were preserved in 10% neutral buffered formalin, embedded in paraffin, sectioned, and stained with hematoxylin and eosin. The following tissues were examined microscopically: skin, lungs and bronchi, trachea, bone marrow (femur), spleen, lymph nodes (mesenteric and heart, submandibular), thymus, salivary glands (parotid, sublingual, and submaxillary), liver, pancreas, esophagus, stomach (glandular and nonglandular), small and large intestine, kidney, urinary bladder, pituitary, adrenal, thyroid, parathyroid, testis, prostate, mammary gland, uterus, ovary, cerebellum), and all tissue (cerebrum and brain masses. Peripheral blood smears also were made for all animals, whenever possible.

Necropsies were also performed on all animals found dead, unless precluded in whole or in part by autolysis or cannibalization. Thus, the number of animals from which particular organs or tissues were examined microscopically varies and does not necessarily represent the number of animals that were placed on study in each group.

H. Data Recording and Statistical Analyses

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

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

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

14

*~

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

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

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

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

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

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

such an early tumor was found, comparisons were based exclusively on animals that survived at least as long as the animal in which the first tumor was found. Once this reduced set of data was obtained, the standard procedures for analyses of the incidence of tumors (Fisher exact tests, Cochran-Armitage tests, etc.) were followed.

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

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

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

the induction of tumors by the test chemical, which could not be detected under the conditions of this test.

III. RESULTS - RATS

A. Body Weights and Clinical Signs (Rats)

Mean body weights of the low- and high-dose male rats were only slightly lower than those of the corresponding controls (figure 1). Mean body weights of the low-dose females were essentially unaffected by administration of the test chemical throughout the bioassay; mean body weights of the high-dose females were lower than those of the corresponding controls only after week 70. Fluctuation in the growth curve may be due to mortality; as the size of a group diminishes the mean body weight may be subject to wide variation. Incidences of tissue masses and of wasting were higher in the dosed groups of males and females than in corresponding control groups.

B. Survival (Rats)

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



Figure 1. Growth Curves for Rats Administered Phthalamide in the Diet



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

Tarone test for dose-related trend in mortality is not significant in either sex.

In male rats, 35/50 (70%) of the high-dose group, 40/50 (80%) of the low-dose group, and 14/20 (70%) of the control group lived to the end of the bioassay. In females, 33/50 (66%) of the high-dose group, 42/50 (84%) of the low-dose group, and 16/20 (80%) of the control group lived to the end of the bioassay.

Sufficient numbers of rats of each sex were at risk for the development of late-appearing tumors.

C. Pathology (Rats)

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

A variety of neoplasms are represented among the dosed and control groups of rats. Each type has been commonly seen in aged F344 rats and occurred with no appreciable difference in frequency between control and dosed rats.
Hepatocellular carcinomas and neoplastic nodules of the liver occurred in the dosed groups, but the incidences were low and were probably not significantly different from those of the controls; however, fatty metamorphosis of the liver in the male rats (controls 1/20, low-dose 15/50, high-dose 11/50) and chronic pericholangiolitis, coded in Appendix C, table C2, as cholangiofibrosis, in the females (controls 0/20, low-dose 7/50, high-dose 4/49) appeared related to administration of the test chemical.

A variety of nonneoplastic lesions other than those cited above in the liver are represented among both control and dosed groups of rats. Most of these have been encountered previously and are considered to be those commonly observed in aging F344 rats; however, pyelonephritis (controls 1/20, low-dose 0/50, high-dose 9/50) and cystitis (controls 1/18, low-dose 0/49, high-dose 7/50) occurred in the high-dose females. The inflammatory changes involving the urinary bladder mucosa in the high-dose females were usually associated with mucosal hyperplasia (7/50) and transitional-cell infrequently [] with the development of papillomas, coded in Appendix A, table A2, as adenomatous polyps (1/50)and transitional-cell carcinoma with some squamous differentiation, coded in Appendix A, table A2, as adenocarcinomas (2/50). Urinary bladders of the low-dose females and of both the low- and high-dose males were unaffected.

The histopathologic examination provided no conclusive evidence carcinogenicity under this bioassav: of the conditions of however, phthalamide may have induced inflammatory and lesions of the bladder and inflammatory proliferative and degenerative lesions of the liver in F344 rats under the conditions of this bioassay.

D. Statistical Analyses of Results (Rats)

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

The results of the Cochran-Armitage test for dose-related trend in the incidences of tumors and the results of the Fisher exact test comparing the incidences of tumors in the control group with those in each dosed group are not significant in the positive direction. However, significant results in the negative direction are observed in the incidences of lung tumors and hematopoietic tumors in male rats and the incidences of adenomas of the pituitary in both male and female rats.

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

IV. RESULTS - MICE

A. Body Weights and Clinical Signs (Mice)

Mean body weights of the low- and high-dose male mice were slightly lower than those of the corresponding controls throughout the bioassay (figure 3). Mean body weights of the low-dose females were consistently lower than those of the corresponding low-dose controls although the mean body weights of midhigh-dose females did the and not show consistent differences from those of the mid- and high-dose controls. Fluctuation in the growth curve may be due to mortality; as the size of a group diminishes the mean body weight may be subject to wide variation. Corneal opacity occurred in the high-dose females at an incidence that was higher than the incidences in any other dosed or control groups. Tissue masses occurred at comparable incidences in dosed and control groups.

B. Survival (Mice)

Estimates of the probabilities of survival for male and female mice administered phthalamide in the diet at the doses of this



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

bioassay, together with those for the matched controls, are shown by the Kaplan and Meier curves in figure 4. The result of the Tarone test for dose-related trend in mortality of the males is not significant. In females, there are five groups: three dosed groups (high-, mid-, and low-dose) of 50 animals each and two matched-control groups of 20 animals each. The low-dose group and one control group (low-dose control) were started on study 9 weeks later than the other three groups (see table 3, above). The statistical analysis in this report combined the two control groups, and the Tarone test for dose-related trend in mortality is applied as if all groups were started on study at the same The result of the Tarone test for dose-related trend in time. mortality of the females is significant (P less than 0.001). An indicated departure from linear trend is observed (P less than 0.001), due to the relatively steep decrease in survival among the high- and mid-dose animals.

In male mice, 37/50 (74%) of the high-dose group, 35/50 (70%) of the low-dose group, and 18/20 (90%) of the control group lived to the end of the bioassay. In females, 18/50 (36%) of the high-dose group, 33/50 (66%) of the mid-dose group, 41/50 (82%) of the low-dose group, and 32/40 (80%) of the combined control group lived to the end of the bioassay.



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

Except for the high-dose female mice, in which there were large numbers of early deaths, sufficient numbers of mice of each sex were at risk for the development of late-appearing tumors.

C. Pathology (Mice)

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

A variety of neoplasms are represented among the dosed and control groups of mice. Each type has been encountered previously as a spontaneous lesion in the B6C3F1 mouse and occurred with no appreciable difference in frequency between control and dosed mice.

A variety of nonneoplastic responses also are represented among the control and dosed groups of mice. Such lesions have been encountered previously and are similar to those commonly observed in aging B6C3F1 mice. The incidence and type of lesion are without relationship to exposure to the test chemical, except for urinary-tract lesions, which occurred only in dosed animals. Crystals occurred in the urinary bladders of 17/44 high-dose and 5/46 mid-dose female mice; a few occurred in dosed males. Mucosal hyperplasia was seen in 3/44 high-dose and 4/46 mid-dose female mice and a few dosed male mice. Obstructive nephropathy was noted in 14/48 high-dose and 4/49 mid-dose females and in one dosed and one control male.

This histopathologic examination provided no evidence for the carcinogenicity of phthalamide in B6C3F1 mice under the conditions of the bioassay. However, nonneoplastic renal and bladder lesions were induced in the female mice.

D. Statistical Analyses of Results (Mice)

Tables Fl and F2 in Appendix F contain the statistical analyses of the incidences of those primary tumors that occurred in at least two animals of one group and at an incidence of at least 5% in one or more than one group.

In male mice, the two dosed groups and their corresponding matched-control group were all started on study at the same time. In females, however, the low-dose group and one matchedcontrol group were started on study 9 weeks later than the other three groups (see table 3, above). For statistical analysis, the

female control groups are combined, and the Cochran-Armitage test for dose-related trend in incidence of tumors is applied as if all groups were started on study at the same time. Due to the early mortality of the high-dose animals, the Cochran-Armitage test is also made using only the combined control, low-, and mid-dose groups, excluding the high-dose group. Both results are reported in the statistical table F2.

In male mice, the results of the Cochran-Armitage test for doserelated trend in the incidences of tumors and the results of the Fisher exact test comparing the incidence of tumors in the control group with those in each dosed group are not significant in the positive direction. A significant trend in the negative direction is observed in the incidence of hepatocellular carcinomas, but when the incidence of male mice with either hepatocellular carcinoma or adenoma is analyzed, no significant trend is observed.

In female mice, the results of the Fisher exact test comparing the incidences of tumors in the control group with those in each dosed group are not significant in the positive direction. Significant trends in the negative direction are observed in the incidences of lung tumors, liver tumors, and adenomas of the pituitary, when the Cochran-Armitage test is applied to the control, low-, mid-, and high-dose groups. This significance in the negative direction may be accounted for by the early mortality of the high-dose female mice. When the Cochran-Armitage test is applied, excluding the incidence in the high-dose group, a significant (P = 0.042) trend in the positive direction is observed in the incidence of hematopoietic tumors. However, when the life-table method is applied to the incidences of hematopoietic tumors in female mice, excluding the incidences in the high-dose group, the result of the Tarone test for dose-related trend is not significant.

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

V. DISCUSSION

Mean body weights of the dosed groups of rats and mice were either slightly lower than those of corresponding control groups or were essentially unaffected by administration of the phthalamide. Also, survival was unaffected in the rats and mice except for early deaths in the high- and mid-dose groups of female mice. Survival was 66% or greater at the end of the bioassay in all dosed and control groups of each species and sex except for the high-dose group of female mice (36%). Except for these high-dose female mice, sufficient numbers of animals were at risk in all groups for the development of late-appearing tumors.

No tumors occurred in the rats or mice of either sex at incidences that were significantly higher in the dosed groups than in the corresponding control groups. The presence of nonneoplastic lesions suggests that the MTD may have been used or exceeded. Fatty metamorphosis of the liver in the male rats, chronic pericholangiolitis, pyelonephritis, cystitis, and bladder mucosal hyperplasia in the female rats, and cystitis, bladder mucosal hyperplasia, and obstructive nephropathy in the female mice may each have been related to administration of the test chemical.

No previous studies on the possible carcinogenicity of phthalamide have been identified.

It is concluded that under the conditions of this bioassay, phthalamide was not carcinogenic for F344 rats or B6C3F1 mice of either sex.

VI. BIBLIOGRAPHY

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

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

Cox, D. R., Regression models and life tables. <u>J. R. Statist</u>. Soc. B 34:187-220, 1972.

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

Clelford, P. and Coulter, J. M., Phthalamide epoxy curing agents. Chem. Abst. 70:32, 1969.

Gart, J. J., The comparison of proportions: a review of significance tests, confidence limits and adjustments for stratification. Rev. Int. Stat. Inst. 39:148-169, 1971.

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

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

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

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

Sherwin Williams, personal communication, 1978.

Tarone, R. E., Tests for trend in life table analysis. <u>Biometrika</u> 62 (3):679-682, 1975.

APPENDIX A

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

TABLE A1.

SUMMARY OF THE INCIDENCE OF NEOPLASMS IN MALE RATS ADMINISTERED PHTHALAMIDE IN THE DIET

	CONTROL	LOW DOSE	HIGH DOSE
ANIMALS INITIALLY IN STUDY ANIMALS NECROPSIED ANIMALS EXAMINED HISTOPATHOLOGICALLY	20 20 20	50 50 50	50 50 50 50
INTEGUMENTARY SYSTEM			
*SKIN PAPILLOMA, NOS Squamous cell carcinoma Keratoacanthoma	(20)	(50) 1 (2%) 2 (4%)	(50) 2 (4%)
SQUAMOUS CELL CARCINOMA SARCOMA, NOS FIBROMA FIBROSARCOMA	(20)	(50) 1 (2%) 1 (2%) 1 (2%)	(50) 1 (2%) 2 (4%) 1 (2%)
RESPIRATORY SYSTEM			
#LUNG ALVEOLAR/BRONCHIOLAR ADENOMA FOLLICULAR-CELL CARCINOMA, METAS LEIOMYOSARCOMA, METASTATIC	(20) 3 (15%)	(50) 3 (6%) 1 (2%)	(50) 1 (2%)
HEMATOPOIETIC SYSTEM			
*MULTIPLE ORGANS Malignant Lymphoma, Nos Malig.lymphoma, Histiocytic Type Leukemia,Nos Monocytic Leukemia	(20) 6 (30%) 1 (5%)	(50) 9 (18%) 1 (2%) 1 (2%)	(50) 5 (10%) 1 (2%) 1 (2%)
*SUBCUT TISSUE Malig.lymphoma, histiocytic type	(20) 1 (5%)	(50)	(50)
#BONE MARROW Malig.lymphoma, histiocytic type	(20)	(50)	(50)

	CONTROL	LOW DOSE	HIGH DOSE
#SPLEEN Malignant Lymphoma, Nos	(20)	(50)	(50) 1 (2%)
#CERVICAL LYMPH NODE Follicular-cell carcinoma, metas	(20)	(49)	(48) 1 (2%)
#MEDIASTINAL L.NODE Squamous cell carcinoma, metasta	(20)	(49) 1 (2%)	(48)
#MESENTERIC L. NODE Hemangioma	(20)	(49)	(48) 1 (2%)
CIRCULATORY SYSTEM			
#HEART LEIOMYOSARCOMA	(20)	(50) 1 (2%)	(50)
DIGESTIVE SYSTEM			
#LIVER NEOPLASTIC NODULE	(20)	(50)	(50) 1 (2%)
HEPATOCELLULAR CARCINOMA Leiomyosarcoma, metastatic		1 (2%) 1 (2%)	
#PANCREAS ACINAR-CELL ADENOMA	(20)	(49) 1 (2%)	(49)
URINARY SYSTEM			
NONE			
ENDOCRINE SYSTEM			
#PITUITARY ADENOMA, NOS Chromophobe Adenoma Chromophobe Carcinoma	(18) 3 (17%) 3 (17%) 1 (6%)	(49) 4 (8%) 16 (33%) 2 (4%)	(49) 1 (2%) 9 (18% 8 (16%
#ADRENAL Pheochromocytoma	(20)	(50) 11 (22%)	(50) 11 (22%

TABLE A1. MALE RATS: NEOPLASMS (CONTINUED)

TABLE A1. MALE RATS: NEOPLASMS (CONTINUED)

	CONTROL	LOW DOSE	HIGH DOSE
HEMANGIOSARCOMA		1 (2%)	
#THYROID FOLLICULAR-CELL ADENOMA FOLLICULAR-CELL CARCINOMA C-CELL ADENOMA C-CELL CARCINOMA CYSTADENOMA, NOS	(19) 1 (5%)	(50) 3 (6%) 1 (2%) 1 (2%)	
#PANCREATIC ISLETS ISLET-CELL ADENOMA	(20) 1 (5%)	(49)	(49) 2 (4%)
REPRODUCTIVE SYSTEM			
*MAMMARY GLAND LIPOMA FIBROADENOMA	(20)	(50) 1 (2%) 1 (2%)	(50) 1 (2%)
<pre>#TESTIS INTERSTITIAL-CELL TUMOR INTERSTITIAL-CELL TUMOR, MALIGNA</pre>	(20) 1 (5%) 17 (85%)	(50) 3 (6%) 41 (82%)	(50) 3 (6%) 37 (74%
NERVOUS SYSTEM			
CONTRACTOR OFFIC ALBORNAM		(50)	4 7 6 4 3
SPECIAL SENSE ORGANS NONE			
MUSCULOSKELETAL SYSTEM None			
BODY CAVITIES			
*MESENTERY MESOTHELIOMA, NOS	(20)	(50) 1 (2%)	(50) 2 (4%)
<pre>*TUNICA VAGINALIS MESOTHELIOMA, NOS</pre>	(20)	(50)	(50) 1 (2%)

	CONTROL	LOW DOSE	HIGH DOSE
ALL OTHER SYSTEMS			
NONE			
ANIMAL DISPOSITION SUMMARY			
ANIMALS INITIALLY IN STUDY NATURAL DEATHƏ MORIBUND SACRIFICE SCHEDULED SACRIFICE ACCIDENTALLY KILLED TERMINAL SACRIFICE ANIMAL MISSING	20 3 3	50 8 2 40	50 10 5 35
N INCLUDES AUTOLYZED ANIMALS			
UMOR SUMMARY			
TOTAL ANIMALS WITH PRIMARY TUMORS* TOTAL PRIMARY TUMORS	20 42	50 110	48 100
TOTAL ANIMALS WITH BENIGN TUMORS TOTAL BENIGN TUMORS	14 16	33 47	29 38
TOTAL ANIMALS WITH MALIGNANT TUMORS TOTAL MALIGNANT TUMORS	18 26	46 62	44 58
TOTAL ANIMALS WITH SECONDARY TUMORS Total secondary tumors	#	2 3	1 2
TOTAL ANIMALS WITH TUMORS UNCERTAIN BENIGN OR MALIGNANT TOTAL UNCERTAIN TUMORS	-	1	4 4
TOTAL ANIMALS WITH TUMORS UNCERTAIN Primary or metastatic Total uncertain tumors	-		
* PRIMARY TUMORS: ALL TUMORS EXCEPT S # SECONDARY TUMORS: METASTATIC TUMORS			DJACENT ORGAN

TABLE A1. MALE RATS: NEOPLASMS (CONTINUED)

TABLE A2.

SUMMARY OF THE INCIDENCE OF NEOPLASMS IN FEMALE RATS ADMINISTERED PHTHALAMIDE IN THE DIET

	CONTROL		
ANIMALS INITIALLY IN STUDY ANIMALS NECROPSIED ANIMALS EXAMINED HISTOPATHOLOGICALLY	20 20	50 50 50	50 50 50 50
INTEGUMENTARY SYSTEM			
*SKIN Papilloma, NOS Basal-Cell Carcinoma	(20) 1 (5%)	(50)	(50) 1 (2%)
*SUBCUT TISSUE FIBROMA FIBROSARCOMA	(20)	(50) 2 (4%) 1 (2%)	(50)
RESPIRATORY SYSTEM			
#LUNG ALVEOLAR/BRONCHIOLAR ADENOMA	(20) 1 (5%)	(50)	(49)
EMATOPOIETIC SYSTEM			
*MULTIPLE ORGANS Malignant lymphoma, nos leukemia,nos monocytic leukemia	(20) 3 (15%) 1 (5%)	(50) 4 (8%) 1 (2%)	(50) 4 (8%) 2 (4%)
#MESENTERIC L. NODE MALIG.LYMPHOMA, HISTIOCYTIC TYPE	(18) 1 (6%)	(49)	(48)
CIRCULATORY SYSTEM			
NONE			
DIGESTIVE SYSTEM			
#SALIVARY GLAND CYSTADENOMA, NOS	(20)	(49)	(48)

	CONTROL	LOW DOSE	
	(20) 2 (10%)		
URINARY SYSTEM			
#KIDNEY FIBROADENOMA	(20)	(50) 1 (2%)	(50)
#URINARY BLADDER ADENOCARCINOMA, NOS (a) ADENOMATOUS POLYP, NOS (b)	(18)	(49)	(50) 2 (4%) 1 (2%)
ENDOCRINE SYSTEM			
#PITUITARY ADENOMA, NOS ADENOCARCINOMA, NOS CHROMOPHOBE ADENOMA CHROMOPHOBE CARCINOMA	(19) 3 (16%) 5 (26%)	(50) 2 (4%) 3 (6%) 23 (46%) 2 (4%)	(48) 1 (2%) 1 (2%) 22 (46%) 2 (4%)
#ADRENAL Cortical Adenoma Pheochromocytoma	(20)	(50) 1 (2%)	(50) 2 (4%)
#THYROID C-Cell Adenoma Cystadenoma, nos	(20) 1 (5%) 1 (5%)	(50) 5 (10%)	(48) 2 (4%) 1 (2%)
#THYROID FOLLICLE CYSTADENOMA, NOS	(20)	(50)	1 (2%)
REPRODUCTIVE SYSTEM			
*MAMMARY GLAND Adenoma, nos Adenocarcinoma, nos	(20)	(50) 2 (4%) 1 (2%)	(50) 1 (2%)
CYSTADENOMA, NOS FIBROADENOMA CYSTFIBROADENOMA	3 (15%)	1(2%)	3 (6%) 9 (18%) 1 (2%)

TABLE A2. FEMALE RATS: NEOPLASMS (CONTINUED)

NERVOUS SYSTEM

NONE

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

(a) TRANSITIONAL-CELL CARCINOMA

(b) TRANSITIONAL-CELL PAPILLOMA

	CONTROL	LOW DOSE	HIGH DOSE
SPECIAL SENSE ORGANS			
NONE			
MUSCULOSKELETAL SYSTEM			
NONE			
BODY CAVITIES			
NONE			
ALL OTHER SYSTEMS			
NONE			
ANIMAL DISPOSITION SUMMARY			
ANIMALS INITIALLY IN STUDY NATURAL DEATHƏ Moribund sacrifice Scheduled sacrifice	20 3 1	50 5 3	50 10 7
ACCIDENTALLY KILLED TERMINAL SACRIFICE ANIMAL MISSING	16	42	33
<u>a includes autolyzed animals</u>			

TABLE A2. FEMALE RATS: NEOPLASMS (CONTINUED)

	CONTROL	LOW DOSE	HIGH DOSE
UMOR SUMMARY			
TOTAL ANIMALS WITH PRIMARY TUMORS* Total primary tumors	14 22	39 62	39 62
TOTAL ANIMALS WITH BENIGN TUMORS Total benign tumors	12 14	33 48	32 44
TOTAL ANIMALS WITH MALIGNANT TUMORS Total malignant tumors	6	12 12	10 11
TOTAL ANIMALS WITH SECONDARY TUMORS Total Secondary Tumors	#		
TOTAL ANIMALS WITH TUMORS UNCERTAIN BENIGN OR MALIGNANT TOTAL UNCERTAIN TUMORS	2 2	2 2	7 7
TOTAL ANIMALS WITH TUMORS UNCERTAIN PRIMARY OR METASTATIC TOTAL UNCERTAIN TUMORS	-		
PRIMARY TUMORS: ALL TUMORS EXCEPT SI SECONDARY TUMORS: METASTATIC TUMORS			DJACENT ORGA

TABLE A2. FEMALE RATS: NEOPLASMS (CONTINUED)

APPENDIX B

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

TABLE B1.

SUMMARY OF THE INCIDENCE OF NEOPLASMS IN MALE MICE **ADMINISTERED PHTHALAMIDE IN THE DIET**

	CONTROL	LOW DOSE	HIGH DOSE
ANIMALS INITIALLY IN STUDY ANIMALS NECROPSIED ANIMALS EXAMINED HISTOPATHOLOGICALLY	20 20 20	50 50 50	50 50 50
INTEGUMENTARY SYSTEM			
*SKIN Cystadenoma, Nos	(20)	(50)	(50) 1 (2%)
*SUBCUT TISSUE Fibrous Histiocytoma	(20) 1 (5%)	(50)	(50)
RESPIRATORY SYSTEM			
#LUNG HEPATOCELLULAR CARCINOMA, METAST ALVEOLAR/BRONCHIOLAR ADENOMA ALVEOLAR/BRONCHIOLAR CARCINOMA	(20)	(50)	(50)
	3 (15%)	7 (14%)	8 (16%) 2 (4%)
HEMATOPOIETIC SYSTEM			
*MULTIPLE ORGANS	(20)		(50)
MALIGNANT LYMPHOMA, NOS Malig.lymphoma, histiocytic type	2 (10%)	5 (10%)	5 (10%) 1 (2%)
#BONE MARROW Hemangiosarcoma	(20)	(50)	(49) 1 (2%)
#SPLEEN Hemangioma	(20)	(49) 1 (2%)	(50) 1 (2%)
HEMANGIOSARCOMA Malignant Lymphoma, NOS Malig.Lymphoma, Histiocytic Type	1 (5%)	1 (2%) 1 (2%)	1 (2%)
#MESENTERIC L. NODE Hemangioma Malignant Lymphoma, Nos	(20)	(50) 2 (4%)	(46) 1 (2%) 3 (7%)

TABLE B1. MALE MICE: NEOPLASMS (CONTINUED)

	CONTROL	LOW DOSE	HIGH DOSE
#PEYERS PATCH Malig.lymphoma, histiocytic type	(20)	(49) 1 (2%)	(49)
*MESENTERY Malig.lymphoma, histiocytic type	(20)	(50)	(50) 1 (2%)
#THYMUS Malignant Lymphoma, Nos	(12)	(30) 1 (3%)	(33)
CIRCULATORY SYSTEM			
DIGESTIVE SYSTEM			
#LIVER BILE DUCT CARCINOMA HEPATOCELLULAR ADENOMA HEPATOCELLULAR CARCINOMA HEMANGIOSARCOMA	(20) 1 (5%) 8 (40%)	(50) 5 (10%) 12 (24%)	(50) 1 (2%) 5 (10%) 9 (18%) 1 (2%)
#CECUM HEMANGIOMA	(20)	(49)	(49) 1 (2%)
URINARY SYSTEM			
NONE			
ENDOCRINE SYSTEM			
#ADRENAL Cortical Adenoma Pheochromocytoma	(20)	(49) 2 (4%) 1 (2%)	(45) 1 (2%) 2 (4%)
#THYROID Adenocarcinoma, Nos	(19)	(48)	(50) 1 (2%)
#PANCREATIC ISLETS ISLET-CELL ADENOMA	(20) 2 (10%)	(50) 1 (2%)	(49) 6 (12%)
REPRODUCTIVE SYSTEM			
NONE			

	CONTROL	LOW DOSE	HIGH DOSE
NERVOUS SYSTEM			
NONE			
SPECIAL SENSE ORGANS			
*EYE/LACRIMAL GLAND PAPILLARY ADENOMA PAPILLARY CYSTADENOMA, NOS	(20) 1 (5%) 1 (5%)	(50) 2 (4%)	(50)
MUSCULOSKELETAL SYSTEM			
NONE			
BODY CAVITIES			
SAPCOMA, NOS	(20)	(50) 1 (2%)	(50)
ALL OTHER SYSTEMS			
*MULTIPLE ORGANS Sarcoma, Nos, Metastatic Hemangioma	(20)	(50) 1 (2%) 1 (2%)	(50)
ANIMAL DISPOSITION SUMMARY			
ANIMALS INITIALLY IN STUDY Natural death@ Moribund sacrifice Scheduled sacrifice	20 2	50 15	50 13
ACCIDENTALLY KILLED TERMINAL SACRIFICE ANIMAL MISSING	18	35	37
a includes autolyzed animals			

TABLE B1. MALE MICE: NEOPLASMS (CONTINUED)

	CONTROL	LOW DOSE	HIGH DOSE
UMDR SUMMARY			
TOTAL ANIMALS WITH PRIMARY TUMORS* Total primary tumors	15 20	33 44	32 52
TOTAL ANIMALS WITH BENIGN TUMORS Total benign tumors	8 9	18 22	2 1 26
TOTAL ANIMALS WITH MALIGNANT TUMORS Total Malignant Tumors	9 1 1	19 22	19 26
TOTAL ANIMALS WITH SECONDARY TUMORS Total Secondary Tumors	8	2 2	
TOTAL ANIMALS WITH TUMORS UNCERTAIN Benign or Malignant Total Uncertain Tumors	-		
TOTAL ANIMALS WITH TUMORS UNCERTAIN Primary or metastatic Total Uncertain Tumors	-		
PRIMARY TUMORS: ALL TUMORS EXCEPT SI Secondary Tumors: Metastatic tumors			DJACENT ORGA

--*-*

TABLE B1. MALE MICE: NEOPLASMS (CONTINUED)

TABLE B2.

SUMMARY OF THE INCIDENCE OF NEOPLASMS IN FEMALE MICE
ADMINISTERED PHTHALAMIDE IN THE DIET

	LOW DOSE CONTROL	MID AND HIGH DOSE CONTROL	LOW DOSE	MID DOSE	HIGH DOSE
ANIMALS INITIALLY IN STUDY ANIMALS MISSING	20	20	50 1	50 1	50 2
ANIMALS NECROPSIED Animals Examined Histopathologically	20 20	20 20	49 49 	49 49	48 48
INTEGUMENTARY SYSTEM					
*SKIN Adnexal carcinoma Hemangioma	(20)	(20)	(49) 1 (2%)	(49)	(48) 1 (2%)
*SUBCUT TISSUE Hemangioma	(20)	(20)	(49) 1 (2%)	(49)	(48)
RESPIRATORY SYSTEM					
<pre>#LUNG Alveolar/bronchiolar adenoma Adnexal carcinoma, metastatic</pre>		(20) 2 (10%)			(48) 1 (2%)
HEMATOPOIETIC SYSTEM					
*MULTIPLE ORGANS Malignant Lymphoma, Nos Malig.lymphoma, Histiocytic Type	(20) 2 (10%)	(20) 2 (10%) 1 (5%)	(49) 3 (6%) 5 (10%)	(49) 6 (12%) 5 (10%)	(48) 1 (2%) 1 (2%)
*HEMATOPOIETIC SYSTEM Malignant Lymphoma, Nos granulocytic leukemia	(20) 1 (5%)	(20)	(49) 1 (2%)	(49)	(48)
#BONE MARROW Hemangioma Hemangiosarcoma	(20)	(20) 1 (5%)	(49) 1 (2%)	(49) 1 (2%) 1 (2%)	(47)
#CERVICAL LYMPH NODE Hemangiosarcoma	(20)	(20)	(48)	(47) 1 (2%)	(47)
#MESENTERIC L. NODE Malignant Lymphoma, Nos	(20)	(20)	(48)	(47) *	(47)

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

TABLE B2. FEMALE MICE: NEOPLASMS (CONTINUED)

	LOW DOSE CONTROL	MID AND HIGH DOSE CONTROL	LOW DOSE	MID DOSE	HIGH DOSE
MALIG.LYMPHOMA, HISTIDCYTIC TYPE				2 (4%)	1 (2%)
<pre>#LIVER Malig.lymphoma, Histiocytic type</pre>	(20)	(20)	(49) 1 (2%)	(49)	(48)
#PEYERS PATCH Malig.lymphoma, Histiocytic type	(20)	(20)	(48)	(49) 3 (6%)	(48)
#KIDNEY Malignant Lymphoma, Nos	(20)	(20) 1 (5%)	(49)	(49)	(48)
*VAGINA Granulocytic Sarcoma	(20)	(20)	(49)	(49) 1 (2%)	(48)
*THYMUS Malignant Lymphoma, Nos	(11)	(17)	(43) 1 (2%)	(37) 1 (3%)	(43)
CIRCULATORY SYSTEM					
NONE					
DIGESTIVE SYSTEM					
#LIVER HEPATOCELLULAR ADENOMA HEPATOCELLULAR CARCINOMA HEMANGIOMA	(20) 4 (20%) 1 (5%)	(20)	(49) 1 (2%) 1 (2%)	(49) 1 (2%) 1 (2%)	(48)
*CARDIAC STOMACH Squamous Cell Papilloma		(20)	(49)	1 (2%)	(48)
URINARY SYSTEM					
NONE					
ENDOCRINE SYSTEM					
#PITUITARY Adenoma, Nos	(20) 5 (25%)	(18) 2 (11%)	(46) 11 (24%)	(47) 5 (11%)	(41) 3 (7%)
#ADRENAL CORTICAL ADENOMA	(20)	(20)	(49)	(49)	(47)

NUMBER OF ANIMALS WITH TISSUE EXAMINED MICROSCOPICALLY NUMBER OF ANIMALS NECROPSIED

.

TABLE B2. FEMALE MICE: NEOPLASMS (CONTINUED)

	LOW DOSE Control	MID AND HIGH DOSE CONTROL	LOW DOSE	MID DOSE	HIGH DOSE
PHEOCHROMOCYTOMA				2 (4%)	
#THYROID Follicular-cell Adenoma	(20) 1 (5%)	(19)	(46)	(47)	(48)
#PANCREATIC ISLETS ISLET-CELL CARCINOMA		(20)	(47) 1 (2%)	(49) 1 (2%)	(48)
REPRODUCTIVE SYSTEM					
*MAMMARY GLAND Adenocarcinoma, nos	(20)	(20)	(49) 1 (2%)	(49)	(48)
#DVARY Papillary adenoma Papillary cystadenoma. Nos	(19)	(20)	(48)	(47)	(44) 2 (5%)
EMBRYONAL CARCINOMA		7 (34)		1 (2%)	
NERVOUS SYSTEM					
SPECIAL SENSE ORGANS					
PAPTILARY ADENOMA		(20)	1 (2%)	(49)	
MUSCULOSKELETAL SYSTEM					
NONE					
BODY CAVITIES					
NONE					
ALL OTHER SYSTEMS			************		
NONE					

TABLE B2.	FEMALE MICE:	NEOPLASMS	(CONTINUED)
		HEVI ENVINO	(onumber)

	LOW DOSE CONTROL	MID AND HIGH DOSE CONTROL	LOW DOSE	MID DOSE	HIGH DOSE
NIMAL DISPOSITION SUMMARY					
ANIMALS INITIALLY IN STUDY NATURAL DEATHƏ MORIBUND SACRIFICE	20 4	²⁰ 2	50 5 2	50 16	50 24 2
SCHEDULED SACRIFICE ACCIDENTALLY KILLED TERMINAL SACRIFICE ANIMAL MISSING	1 15	17	1 4 5 1	33 1	18 2
INCLUDES AUTOLYZED ANIMALS					
UMOR SUMMARY					
TOTAL ANIMALS WITH PRIMARY TUMORS* Total Primary Tumors	11 15	8 10	29 36	27 35	8 ₉
TOTAL ANIMALS WITH BENIGN TUMORS TOTAL BENIGN TUMORS	9 12	5 6	19 21	12 12	5 5
TOTAL ANIMALS WITH MALIGNANT TUMORS TOTAL MALIGNANT TUMORS	3 3	4	15 15	22 23	4
TOTAL ANIMALS WITH SECONDARY TUMORS	ŧ				1
TOTAL ANIMALS WITH TUMORS UNCERTAIN- Benign or Malignant Total Uncertain Tumors	-				
TOTAL ANIMALS WITH TUMORS UNCERTAIN- PRIMARY OR METASTATIC TOTAL UNCERTAIN TUMORS					
PRIMARY TUMORS: ALL TUMORS EXCEPT SE Secondary tumors: metastatic tumors			JACENT ORGAN		
APPENDIX C

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

61

TABLE C1.

		LOW DOSE	
ANIMALS INITIALLY IN STUDY ANIMALS NECROPSIED ANIMALS EXAMINED HISTOPATHOLOGICALLY	20	50 50 50	50 50 50 50
INTEGUMENTARY SYSTEM			
*SUBCUT TISSUE Abscess, Chronic	(20)	(50) 1 (2%)	(50)
RESPIRATORY SYSTEM			
#LUNG Congestion, nos Hemorrhage	(20) 1 (5%)	(50) 1 (2%)	(50) 3 (6%) 1 (2%)
INFLAMMATION, NOS Hyperplasia, alveolar epithelium	1 (5%)	1 (2%)	1 (2%)
#LUNG/ALVEOLI INFLAMMATION, NOS	(20)		(50)
HEMATOPOIETIC SYSTEM			
#BONE MARROW Hemorrhage	(20)	(50)	(50) 1 (2%)
HYPERPLASIA, GRANULOCYTIC Hypoplasia, Hematopoietic	2 (10%)	3 (6%) 1 (2%)	2 (4%) 3 (6%)
#SPLEEN Congestion, Nos	(20)	(50) 1 (2%)	
HEMOSIDEROSIS Hyperplasia, nos		1.(2%)	8 (16%)
HYPERPLASIA, RETICULUM CELL Hyperplasia, lymphoid Hematopoiesis		4 (8%)	1 (2%) 1 (2%) 2 (4%)
#LYMPH NODE Lymphangiectasis	(20)	(49) 1 (2%)	(48)

SUMMARY OF THE INCIDENCE OF NONNEOPLASTIC LESIONS IN MALE RATS ADMINISTERED PHTHALAMIDE IN THE DIET

	CONTROL		
HYPERPLASIA, LYMPHOID		1 (2%)	
*CERVICAL LYMPH NODE LYMPHANGIECTASIS CONGESTION, NOS PLASMA-CELL INFILTRATE HEMOSIDEROSIS ERYTHROPHAGOCYTOSIS HYPERPLASIA, RETICULUM CELL HYPERPLASIA, LYMPHOID	(20) 5 (25%) 1 (5%) 1 (5%) 1 (5%)	(49) 14 (29%) 2 (4%) 3 (6%)	(48) 14 (29%) 1 (2%) 1 (2%) 1 (2%) 1 (2%) 2 (4%)
#HEPATIC LYMPH NODE Congestion, nos	(20)	(49) 1 (2%)	(48)
#MESENTERIC L. NODE LYMPHANGIECTASIS EDEMA, NOS PLASMA-CELL INFILTRATE ATROPHY, NOS HYPERPLASIA, RETICULUM CELL HYPERPLASIA, LYMPHOID	(20) 1 (5%) 3 (15%)	(49) 2 (4%) 1 (2%) 1 (2%) 1 (2%) 5 (10%)	(48) 3 (6%) 1 (2%) 2 (4%) 6 (13%)
#THYMUS Hemorrhage Atrophy, Nos	(10) 1 (10%)	(22) 1 (5%) 7 (32%)	(24) 8 (33%)
IRCULATORY SYSTEM			
#HEART MINERALIZATION	(20)	(50) 1 (2%)	(50)
#HEART/ATRIUM Thrombus, organized	(20)	(50)	(50) 1 (2%)
#AURICULAR APPENDAGE Thrombus, organized Calcification, dystrophic	(20)	(50) 2 (4%) 1 (2%)	(50) 1 (2%)
#MYOCARDIUM Inflammation, Chronic	(20) 16 (80%)	(50) 40 (80%)	(50) 41 (82%)
#ENDOCARDIUM FIBROSIS	(20)	(50)	(50)

	CONTROL	LOW DOSE	HIGH DOSE
DIGESTIVE SYSTEM			
#SALIVARY GLAND Inflammation, chronic fibrosis, diffuse	(20)	(49)	(48) 1 (2%) 1 (2%)
#LIVER CONGESTION, NOS LYMPHOCYTIC INFLAMMATORY INFILTR INFLAMMATION, CHRONIC CHOLANGIOFIBROSIS NECROSIS, NOS METAMORPHOSIS FATTY LIPOIDOSIS HYPERTROPHY, NOS	(20) 8 (40%) 2 (10%) 1 (5%) 2 (10%)	(50) 3 (6%) 5 (10%) 15 (30%) 2 (4%)	(50) 1 (2%) 1 (2%) 1 (2%) 7 (14%) 1 (2%) 11 (22%) 1 (2%)
HYPERPLASIA, NOS #PORTAL TRACT FIBROSIS	6 (30%) (20)	18 (36%) (50) 1 (2%)	12 (24%) (50)
#LIVER/CENTRILOBULAR LIPOIDOSIS	(20) 1 (5%)	(50)	(50)
#BILE DUCT Inflammation, Chronic Hyperplasia, Nos	(20) 5 (25%) 18 (90%)	(50) 29 (58%) 47 (94%)	(50) 24 (48%) 43 (86%)
#PANCREAS PERIARTERITIS	(20)	(49) 6 (12%)	(49) 3 (6%)
#STOMACH Ulcer, acute	(20) 1 (5%)	(50)	(50)
#GASTRIC SUBMUCOSA Edema, nos	(20) 1 (5%)	(50)	(50)
#COLON Hyperplasia, lymphoid	(20) 2 (10%)	(49)	(50) 2 (4%)
#COLONIC SUBMUCOSA Hyperplasia, lymphoid	(20) 1 (5%)	(49)	(50)
URINARY SYSTEM			
#KIDNEY MINERALIZATION	(20)	(50)	(50)

	CONTROL	LOW DOSE	HIGH DOSE
INFLAMMATION, CHRONIC NEPHROPATHY HEMOSIDEROSIS	15 (75%)	38 (76%) 1 (2%)	36 (72%) 3 (6%) 1 (2%)
#KIDNEY/CORTEX CYST, NOS	(20)	(50)	(50) 1 (2%)
ENDOCRINE SYSTEM			
#PITUITARY CYST, NOS Hemorrhagic Cyst Hyperplasia, Focal	(18) 2 (11%)	(49) 4 (8%) 1 (2%) 1 (2%)	(49) 5 (10%)
#ADRENAL Congestion, Nos Angiectasis	(20)	(50) 1 (2%)	(50) 1 (2%)
#ADRENAL CORTEX LIPOIDOSIS Hyperplasia, nos	(20)	(50) 2 (4%) 2 (4%)	(50) 1 (2%) 4 (8%)
#THYROID Follicular cyst, nos Hyperplasia, c-cell	(19) 1 (5%) 3 (16%)	(50) 1 (2%) 7 (14%)	(48) 9 (19%)
#PARATHYROID Hyperplasia, Nos	(17) 1 (6%)	(46) 3 (7%)	(41)
<pre>#PANCREATIC ISLETS HYPERPLASIA, NOS</pre>	(20)	(49) 1 (2%)	(49) 1 (2%)
REPRODUCTIVE SYSTEM			
*MAMMARY GLAND DILATATION/DUCTS	(20)	(50)	(50) 1 (2%)
GALACTOCELE Lactation	1 (5%) 15 (75%)	5 (10%) 31 (62%)	5 (10%) 37 (74%)
*PREPUTIAL GLAND DILATATION, NOS	(20)	(50) 1 (2%)	(50)
#PROSTATE Inflammation, acute	(20)	(48) <u>5 (10%)</u>	(49) <u>4 (8%)</u>

	CONTROL		
ABSCESS, NOS INFLAMMATION, ACUTE/CHRONIC FIBROSIS, DIFFUSE ATROPHY, NOS		8 (17%)	1 (2%) 1 (2%) 1 (2%)
HYPERPLÁSIA, NOS Hyperplasia, focal	2 (10%)	8 (17%) 2 (4%) 2 (4%)	1 (2%) 1 (2%)
#TESTIS ATROPHY, NOS Hyperplasia, interstitial cell	(20) 3 (15%)	(50) 16 (32%) 1 (2%)	(50) 20 (40%
*EPIDIDYMIS EDEMA, NOS INFLAMMATION, CHRONIC LIPOGRANULOMA	(20)	(50)	(50) 1 (2%) 1 (2%)
GRANULOMA, FOREIGN BODY Fibrosis, diffuse Atrophy, Nos	2 (10%)	1 (2%) 9 (18%) 2 (4%)	14 (28% 3 (6%)
IERVOUS SYSTEM			
#BRAIN Hydrocephalus, Nos		(50)	(49) 2 (4%)
HEMORRHAGE Atrophy, pressure	1 (5%) 1 (5%)	1 (2%)	
PECIAL SENSE ORGANS			
NONE			
1USCULOSKELETAL SYSTEM			
NONE			
BODY CAVITIES			
*MESENTERY LIPOGRANULOMA HEMOSIDEROSIS		(50)	1 (2%)
ALL OTHER SYSTEMS			
*MULTIPLE ORGANS ATROPHY, NOS	(20) 14 (70%)	(50) 21 (42%)	(50) 17 (34%

	CONTROL	LOW DOSE	HIGH DOSE
SPECIAL MORPHOLOGY SUMMARY	,		
SPECIAL MORPHOLOGY SUMMARI			
NONE			

TABLE C2.

		LOW DOSE	
ANIMALS INITIALLY IN STUDY Animals necropsied Animals examined histopathologically	20 20	50 50 50 50	50. 50 50
INTEGUMENTARY SYSTEM			
*SUBCUT TISSUE Cyst, Nos	(20)	1 (24)	(50)
RESPIRATORY SYSTEM			
#LUNG Congestion, Nos Inflammation, Chronic	(20)	(50)	(49) 1 (2%) 1 (2%)
HYPERPLASIA, ALVEOLAR EPITHELIUM		1 (2%)	
HEMATOPOIETIC SYSTEM			
<pre>#BONE MARROW Hyperplasia, granulocytic Hypoplasia, erythroid</pre>	(19) 2 (11%)	(49) 4 (8%)	(49) 1 (2%)
#SPLEEN Congestion, Nos	(20)	(50)	(49)
HEMOSIDEROSIS ATROPHY, NOS	6 (30%) 1 (5%)		13 (27%) 2 (4%)
HYPERPLASIA, LYMPHOID Hematopoiesis		1 (2%) 1 (2%)	1 (2%)
#MANDIBULAR L. NODE Hyperplasia, lymphoid	(18)	(49)	(48) 1 (2%)
#CERVICAL LYMPH NODE Lymphangiectasis	(18)	(49) 3 (6%)	(48) 13 (27%)
HEMORRHAGE PLASMA-CELL INFILTRATE HEMOSIDEROSIS	1 (6%)	1 (2%)	2 (4%)

SUMMARY OF THE INCIDENCE OF NONNEOPLASTIC LESIONS IN FEMALE RATS **ADMINISTERED PHTHALAMIDE IN THE DIET**

		LOW DOSE	
ATROPHY, NOS Erythrophagocytosis Hyperplasia, reticulum cell Hyperplasia, lymphoid	1 (6%)	 1 (2%) 5 (10%)	5 (10%)
#LUMBAR LYMPH NODE Erythrophagocytosis	(18) 1 (6%)	(49)	(48)
#MESENTERIC L. NODE CONGESTION, NOS ATROPHY, NOS ERYTHROPHAGOCYTOSIS HYPERPLASIA, RETICULUM CELL	(18)	(49) 2 (4%) 2 (4%) 1 (2%)	(48) 1 (2%) 4 (8%) 1 (2%) 2 (4%)
LYMPHANGIECTASIS Hemosiderosis Erythrophagocytosis	1 (6%) 1 (6%)	(49)	(48) 1 (2%) 1 (2%)
#THYMUS Atrophy, Nos	(18) 15 (83%)	(31) 28 (90%)	(23) 20 (87%)
IRCULATORY SYSTEM			
#MYOCARDIUM Inflammation, Chronic	(20) 9 (45%)	(50) 28 (56%)	(50) 25 (50%)
IGESTIVE SYSTEM			
HYPERTROPHY, NOS	(20) 1 (5%) 17 (85%)	(50) 7 (14%) 1 (2%) 5 (10%) 3 (6%) 40 (80%) 1 (2%) 1 (2%)	(49) 1 (2%) 1 (2%) 4 (8%) 1 (2%) 1 (2%) 2 (4%) 35 (71%)
#LIVER/KUPFFER CELL PIGMENTATION, NOS	(20)	(50) 1 (2%)	(49)
#BILE DUCT INFLAMMATION, CHRONIC	(20) 1 (5%)	(50) 1 (2%)	(49) <u> </u>

		LOW DOSE	HIGH DOSE
HYPERPLASIA, NOS		40 (80%)	26 (53%)
#PANCREAS PERIARTERITIS	(19) 1 (5%)	(49) 1 (2%)	(48) 1 (2%)
<pre>#PANCREATIC ACINUS Atrophy, NOS</pre>	(19)	(49) 1 (2%)	(48)
#STOMACH CYST, NOS INFLAMMATION, ACUTE INFLAMMATION, CHRONIC	(20) 1 (5%) 1 (5%)	(50) 1 (2%)	(49)
<pre>#PEYERS PATCH ULCER, CHRONIC HYPERPLASIA, LYMPHOID</pre>	(20)	(50) 1 (2%) 1 (2%)	(48)
<pre>#COLON HYPERPLASIA, LYMPHOID</pre>	(20) 2 (10%)	(50) 4 (8%)	(48) 1 (2%)
JRINARY SYSTEM			
#KIDNEY Hydronephrosis Pyelonephritis, nos Inflammation, nos	(20)	(50)	(50) 2 (4%) 5 (10%) 1 (2%)
PYELONEPHRITIS, ACUTE Inflammation, chronic Pyelonephritis, chronic Nephropathy	1 (5%) 1 (5%)	9 (18%)	14 (28%) 4 (8%) 1 (2%)
#KIDNEY/MEDULLA MINERALIZATION	(20)	(50)	(50) 2 (4%)
#KIDNEY/PELVIS INFLAMMATION, NOS HYPERPLASIA, EPITHELIAL	(20)	(50)	(50) 1 (2%) 2 (4%)
#URINARY BLADDER Hemorrhage Inflammation, Nos	(18)	(49)	(50) 1 (2%) 2 (4%)
INFLAMMATION, ACUTE Inflammation, Chronic Hyperplasia, Epithelial	1 (6%)		5 (10%) 7 (14%)

TABLE C2. FEMALE RATS: NONNEOPLASTIC LESIONS (CONTINUED)

	CONTROL	LOW DOSE	
#U. BLADDER/MUCOSA Calculus, Nos	(18)	(49)	(50)
ENDOCRINE SYSTEM			
#PITUITARY CYST, NOS HEMORRHAGIC CYST	(19) 7 (37%) 4 (21%)	(50) 4 (8%) 3 (6%)	(48) 4 (8%)
#ADRENAL FIBROSIS ANGIECTASIS	(20) 4 (20%)	(50) 1 (2%) 1 (2%)	(50) 4 (8%)
#ADRENAL CORTEX NECROSIS, FOCAL LIPOIDOSIS Hyperplasia, Nos	(20)	(50) 2 (4%)	(50) 1 (2%) 3 (6%) 4 (8%)
#THYROID Hyperplasia, C-Cell	(20) 4 (20%)	(50) 11 (22%)	(48) 9 (19%)
#PARATHYROID Hyperplasia, Nos	(18)	(41)	(42) 1 (2%)
REPRODUCTIVE SYSTEM			
*MAMMARY GLAND GALACTOCELE Hyperplasia, nos Lactation	(20) 1 (5%) 17 (85%)	(50) 4 (8%) 40 (80%)	(50) 11 (22%) 1 (2%) 28 (56%)
#UTERUS POLYP, INFLAMMATORY	(20) 7 (35%)	(50)	(49) 1 (2%)
#UTERUS/ENDOMETRIUM CYST, NOS Inflammation, acute vesicular Inflammation, acute/chronic Hyperplasia, cystic	(20)	(50) 2 (4%) 1 (2%)	(49) 1 (2%) 1 (2%) 1 (2%)
#OVARY/PAROVARIAN LIPOGRANULOMA	(20)	(50) 1 (2%)	(49)

	CONTROL	LOW DOSE	
#OVARY Follicular cyst, nos		(50) 2 (4%)	
NERVOUS SYSTEM			
#BRAIN Hydrocephalus, Nos	(19)	(50)	(49) 1 (2%)
ABSCESS, NOS ATROPHY, PRESSURE		4 (8%)	1 (2%) 3 (6%)
SPECIAL SENSE ORGANS			
NONE			
MUSCULOSKELETAL SYSTEM			
NONE			
BODY CAVITIES			
NONE			
ALL OTHER SYSTEMS			
*MULTIPLE ORGANS HYPERPLASIA, LYMPHOID		(50)	1 (2%)
SPECIAL MORPHOLOGY SUMMARY			
NO LESION REPORTED		1	
# NUMBER OF ANIMALS WITH TISSUE EX * NUMBER OF ANIMALS NECROPSIED	AMINED MICROSCOP	ICALLY	

APPENDIX D

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

•

TABLE D1.

	CONTROL	LOW DOSE	HIGH DOSE
ANIMALS INITIALLY IN STUDY ANIMALS NECROPSIED ANIMALS EXAMINED HISTOPATHOLOGICALLY	20 20 20	50 50 50	50 50 50 50
INTEGUMENTARY SYSTEM			
NONE			
RESPIRATORY SYSTEM			
#LUNG CONGESTION, NOS HYPEREMIA EDEMA, NOS	(20)	(50) 2 (4%) 1 (2%) 3 (6%)	(50) 4 (8%) 1 (2%) 1 (2%)
INFLAMMATION, NOS INFLAMMATION, DIFFUSE HYPERPLASIA, ALVEOLAR EPITHELIUM	1 (5%) 1 (5%)	3 (6%)	1 (2%) 1 (2%) 1 (2%) 1 (2%)
HEMATOPOIETIC SYSTEM			
#SPLEEN ATROPHY, NOS ANGIECTASIS	(20)	(49)	(50) 1 (2%) 1 (2%)
HYPERPLASIA, LYMPHOID Hematopoiesis	1 (5%)	4 (8%)	5 (10%) 3 (6%)
#SPLENIC FOLLICLES NECROSIS, NOS	(20)	(49)	(50) 1 (2%)
#HEPATIC LYMPH NODE Hyperplasia, lymphoid	(20)	(50) 1 (2%)	(46)
#MESENTERIC L. NODE Congestion, Nos Hemorrhage Undersegeste	(20) 4 (20%)	(50) 6 (12%) 1 (2%)	(46) 5 (11%) 2 (4%)
HEMOSIDEROSIS ERYTHROPHAGOCYTOSIS	1 (5%)	1 (2%)	1 (2%)

SUMMARY OF THE INCIDENCE OF NONNEOPLASTIC LESIONS IN MALE MICE ADMINISTERED PHTHALAMIDE IN THE DIET

		LOW DOSE	
HYPERPLASIA, RETICULUM CELL Hyperplasia, lymphoid Hematopoiesis	2 (10%) 5 (25%) 9 (45%)	5 (10%) 10 (20%)	1 (2%) 9 (20%) 11 (24%)
<pre>#RENAL LYMPH NODE HYPERPLASIA, RETICULUM CELL</pre>	(20)	(50) 1 (2%)	(46)
<pre>#THYMUS CYST, NOS ATROPHY, NOS</pre>	(12)	(30)	(33) 3 (9%) 1 (3%)
IRCULATORY SYSTEM			
*MESENTERIC.ARTERY THROMBOSIS, NOS	(20)	(50)	(50) 1 (2%)
<pre>*HEPATIC VEIN THROMBOSIS, NOS</pre>	(20)	(50) 1 (2%)	(50)
DIGESTIVE SYSTEM			
#LIVER HERNIA INCOMPLETE Congestion, Nos Necrosis, Nos Necrosis, Focal Lipoidosis	(20) 1 (5%) 2 (10%) 2 (10%)	(50) 4 (8%) 1 (2%) 5 (10%)	(50) 1 (2%) 2 (4%) 1 (2%) 3 (6%)
#STOMACH Ulcer, Focal Inflammation, acute	(19)	(49) 1 (2%)	(49) 1 (2%)
#CARDIAC STOMACH Inflammation, Nos Inflammation, Chronic Hyperkeratosis	(19)	(49) 1 (2%) 1 (2%)	(49) 1 (2%)
<pre>#PEYERS PATCH Hyperplasia, Lymphoid</pre>	(20)	(49) 1 (2%)	(49) 2 (4%)
JRINARY SYSTEM			
#KIDNEY HYDRONEPHROSIS	(20)	(50) 2 (4%)	(50)

	CONTROL	LOW DOSE	HIGH DOSE
INFLAMMATION, SUPPURATIVE INFLAMMATION, CHRONIC NEPHROPATHY HYPERPLASIA, LYMPHOID	1 (5%) 1 (5%) 1 (5%)	1 (2%) 4 (8%)	1 (2%) 1 (2%)
#KIDNEY/CORTEX CYST, NOS	(20)	(50) 1 (2%)	(50) 1 (2%)
#KIDNEY/TUBULE DILATATION, NOS LIPOIDOSIS CYTOPLASMIC VACUOLIZATION	(20) 6 (30%)	(50) 1 (2%)	(50) 1 (2%) 2 (4%)
#KIDNEY/PELVIS DILATATION, NOS	(20)	(50)	(50) 1 (2%)
#URINARY BLADDER HEMORRHAGE CRYSTALS, NOS HYPERPLASIA, EPITHELIAL	(20)	(46) 1 (2%)	(48) 1 (2%) 3 (6%) 1 (2%)
ENDOCRINE SYSTEM			
#PITUITARY CYST, NOS	(17)	(48)	(42) 2 (5%)
#ADRENAL CORTEX CYST, NOS LIPOIDOSIS	(20) 1 (5%) 1 (5%)	(49)	(45)
HYPERPLASIA, NOS		5 (10%)	1 (2%)
#THYROID Follicular cyst, nos	(19)	(48) 2 (4%)	(50)
#PARATHYROID CYST, NOS	(10) 2 (20%)	(21)	(26)
#PANCREATIC ISLETS Hyperplasia, NOS	(20) 1 (5%)	(50)	(49)
REPRODUCTIVE SYSTEM			
#PROSTATE Lymphocytic inflammatory infiltr	(19) 1 (5%)	(48)	(44)

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

	CONTROL	LOW DOSE	HIGH DOSE
ABSCESS, NOS			1 (2%)
#TESTIS Atrophy, Nos	(20)	(50) 1 (2%)	(50) 1 (2%)
NERVOUS SYSTEM			
NONE			
SPECIAL SENSE ORGANS			
NONE			
MUSCULOSKELETAL SYSTEM			
*BONE Osteoporosis	(20)	(50)	(50) 1 (2%)
*ABDOMINAL MUSCLE INFLAMMATION, NOS NECROSIS, NOS	(20)	(50) 1 (2%) 1 (2%)	(50)
BODY CAVITIES			
*ABDOMINAL CAVITY Infarct, Nos	(20)	(50) 1 (2%)	(50)
*PERITONEUM Inflammation, Chronic	(20)	(50) 1 (2%)	(50)
*MESENTERY LIPOGRANULOMA	(20) 1 (5%)	(50)	(50) 2 (4%)
ALL OTHER SYSTEMS			
*MULTIPLE ORGANS Congestion, NOS Hyperplasia, lymphoid	(20) 1 (5%) 1 (5%)	(50)	(50)
SPECIAL MORPHOLOGY SUMMARY			
NO LESION REPORTED	1	1	2

	CONTROL	LOW DOSE	HIGH DOSE
AUTO/NECROPSY/HISTO PERF			1
# NUMBER OF ANIMALS WITH TISSUE EXA * NUMBER OF ANIMALS NECROPSIED	MINED MICROSCO	PICALLY	

~~~~~~

## TABLE D2.

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

|                                                            | LOW DOSE<br>Control | MID AND HIGH<br>DOSE CONTROL | LOW DOSE | MID DOSE       | HIGH DOSE                |
|------------------------------------------------------------|---------------------|------------------------------|----------|----------------|--------------------------|
| ANIMALS INITIALLY IN STUDY<br>ANIMALS MISSING              | 20                  | 20                           | 50       | 50             | 50<br>2                  |
| ANIMALS NECROPSIED<br>ANIMALS EXAMINED HISTOPATHOLOGICALLY | 20<br>20            | 20<br>20                     | 49<br>49 | 49<br>49       | 48<br>48                 |
| INTEGUMENTARY SYSTEM                                       |                     |                              |          |                |                          |
| NONE                                                       |                     |                              |          |                |                          |
| RESPIRATORY SYSTEM                                         |                     |                              |          |                |                          |
| #LUNG/BRONCHUS<br>Lymphocytic inflammatory infiltr         | (20)                | (20)<br>1 (5%)               | (48)     | (49)           | (48)                     |
| HYPERPLASIA, LYMPHOID                                      |                     | 1 (34)                       |          |                | 2 (4%)                   |
| #LUNG<br>Congestion, nos                                   | (20)                | (20)                         | (48)     | (49)           | (48)<br>1 (2%)           |
| HYPEREMIA<br>EDEMA, NOS<br>PERIARTERITIS                   |                     |                              | 1 (2%)   |                | 2 (4%)<br>1 (2%)         |
|                                                            |                     |                              | 1 (2%)   |                |                          |
| HEMATOPOIETIC SYSTEM                                       |                     |                              |          |                |                          |
| #BONE MARROW<br>Hyperplasia, nos<br>erythropoiesis         | (20)                | (20)                         | (49)     | (49)           | (47)<br>1 (2%)<br>1 (2%) |
| #SPLEEN<br>INFLAMMATION, ACUTE                             | (19)                | (20)                         | (49)     | (49)           | (48)                     |
| ATROPHY, NOS<br>Hyperplasia, lymphoid                      | 1 (5%)              | 1 (5%)                       | 7 (14%)  | 5 (10%)        | 1 (2%)<br>7 (15%)        |
| HEMATOPOIESIS                                              | 1 (5%)              |                              | 1 (2%)   | 3 (6%)         | 4 (8%)                   |
| #SPLENIC RED PULP<br>HISTIOCYTOSIS                         | (19)                | (20)                         | (49)     | (49)<br>1 (2%) | (48)                     |
| #CERVICAL LYMPH NODE<br>Hyperplasia, lymphoid              | (20)                | (20)                         | (48)     | (47)           | (47)<br>1 (2%)           |

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

|                                                                                    | LOW DOSE<br>CONTROL | MID AND HIGH<br>DOSE CONTROL | LOW DOSE          | MID DOSE                   | HIGH DOSE                |
|------------------------------------------------------------------------------------|---------------------|------------------------------|-------------------|----------------------------|--------------------------|
| #LUMBAR LYMPH NODE<br>Inflammation, acute                                          | (20)                | (20)                         | (48)<br>1 (2%)    | (47)                       | (47)                     |
| <pre>#MESENTERIC L. NODE<br/>CONGESTION, NOS<br/>INFLAMMATION, GRANULOMATOUS</pre> | (20)<br>1 (5%)      | (20)                         | (48)<br>3 (6%)    | (47)<br>1 (2%)<br>1 (2%)   | (47)<br>2 (4%)           |
| ATROPHY, NOS<br>HYPERPLASIA, LYMPHOID<br>HEMATOPOIESIS                             | 4 (20%)             | 2 (10%)                      | 7 (15%)<br>1 (2%) | 1 (2%)<br>2 (4%)<br>1 (2%) | 4 (9%)                   |
| #THYMUS<br>Cyst, Nos                                                               | (11)                | (17)                         | (43)              | (37)                       | (43)                     |
| NECROSIS, NOS<br>Atrophy, Nos<br>Hyperplasta lymphotr                              |                     |                              |                   | 1 (3%)<br>3 (8%)<br>1 (3%) | 8 (19%)<br>6 (14%)       |
| CIRCULATORY SYSTEM                                                                 |                     |                              |                   |                            |                          |
| #MYOCARDIUM<br>Inflammation, Chronic Suppurativ                                    | (20)                | (20)                         | (48)<br>1 (2%)    | (49)                       | (48)                     |
| *RENAL ARTERY<br>Degeneration, nos<br>Necrosis, nos                                | (20)                | (20)                         | (49)              | (49)                       | (48)<br>1 (2%)<br>1 (2%) |
| <pre>#HEPATIC SINUSOID     LEUKOCYTOSIS, NOS</pre>                                 | (20)                | (20)                         | (49)<br>1 (2%)    | (49)                       | (48)                     |
| DIGESTIVE SYSTEM                                                                   |                     |                              |                   |                            |                          |
| #LIVER<br>NECROSIS, NOS<br>METAMORPHOSIS FATTY                                     | (20)<br>1 (5%)      | (20)                         | (49)<br>2 (4%)    | (49)<br>3 (6%)             | (48)<br>1 (2%)           |
| LIPOIDOSIS<br>FOCAL CELLULAR CHANGE                                                | 1 (5%)<br>1 (5%)    | 4 (20%)                      | 2 (4%)<br>1 (2%)  | 7 (14%)<br>1 (2%)          | 2 (4%)<br>1 (2%)         |
| HYPERPLASIA, RETICULUM CELL<br>Hyperplasia, lymphoid                               | 2 (10%)             |                              | 1 (2%)            | 1 (2%)                     |                          |
| #LIVER/CENTRILOBULAR<br>LIPOIDOSIS                                                 | (20)                | (20)                         | (49)<br>1 (2%)    | (49)                       | (48)                     |
| #LIVER/PERIPORTAL<br>LIPOIDOSIS                                                    | (20)                | (20)                         | (49)              | (49)                       | (48)                     |

|                                                                                                                                                           | LOW DOSE<br>Control | MID AND HIGH<br>Dose control | LOW DOSE       | MID DOSE                           | HIGH DOSE                                     |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------|------------------------------|----------------|------------------------------------|-----------------------------------------------|
| #LIVER/KUPFFER CELL<br>Hyperplasia, Nos                                                                                                                   | (20)                | (20)<br>1 (5%)               | (49)           | (49)                               | (48)                                          |
| #PANCREAS<br>DILATATION/DUCTS                                                                                                                             | (20)<br>1 (5%)      | (20)<br>1 (5%)               | (47)           | (49)                               | (48)                                          |
| #PANCREATIC ACINUS<br>Atrophy, Nos                                                                                                                        | (20)<br>1 (5%)      | (20)<br>2 (10%)              | (47)           | (49)                               | (48)                                          |
| #STOMACH<br>EPIDERMAL INCLUSION CYST<br>ULCER, NOS<br>ULCER, FOCAL                                                                                        | (20)                | (20)                         | (49)           | (48)                               | (48)<br>1 (2%)<br>3 (6%)<br>2 (4%)            |
| #CARDIAC STOMACH<br>Inflammation, acute<br>Inflammation, acute/chronic<br>Hyperkeratosis                                                                  | (20)                | (20)<br>1 (5%)               | (49)           | (48)                               | (48)<br>2 (4%)<br>1 (2%)                      |
| #SMALL INTESTINE<br>Hypertrophy, Nos                                                                                                                      | (20)                | (20)                         | (48)           | (49)                               | (48)<br>1 (2%)                                |
| #PEYERS PATCH<br>Hyperplasia, lymphoid                                                                                                                    | (20)<br>1 (5%)      | (20)                         | (48)<br>3 (6%) | (49)                               | (48)<br>1 (2%)                                |
| #COLON<br>NEMATODIASIS                                                                                                                                    | (20)                | (20)                         | (49)           | (46)                               | (46)<br>1 (2%)                                |
| COLONIC SEROSA<br>CYST, NOS<br>INFLAMMATION, CHRONIC                                                                                                      | (20)<br>1 (5%)      | (20)                         | (49)           | (46)                               | (46)                                          |
| RINARY SYSTEM                                                                                                                                             |                     |                              |                |                                    |                                               |
| <pre>#KIDNEY<br/>CALCULUS, NOS<br/>HYDRONEPHROSIS<br/>LYMPHOCYTIC INFLAMMATORY INFILTR<br/>PYELONEPHRITIS, ACUTE<br/>PERIVASCULITIS<br/>NEPHROPATHY</pre> | (20)<br>1 (5%)      | (20)<br>1 (5%)<br>2 (10%)    | (49)<br>1 (2%) | (49)<br>2 (4%)<br>1 (2%)<br>4 (8%) | (48)<br>3 (6%)<br>1 (2%)<br>1 (2%)<br>14 (2%) |
| HYPERPLASIA, LYMPHOID<br>#KIDNEy/CORTEX<br>MINERALIZATION                                                                                                 | 1 (5%)              | (20)                         | (49)           | 1 (2%)<br>(49)                     | (48)                                          |

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

| TABLE D2. FEMALE MICE: NONNEOPLASTIC LESIONS (CONTINUED | 11 |
|---------------------------------------------------------|----|
|---------------------------------------------------------|----|

|                                                                      | LOW DOSE<br>CONTROL | MID AND HIGH<br>DOSE CONTROL | LOW DOSE       | MID DOSE          | HIGH DOSE                          |
|----------------------------------------------------------------------|---------------------|------------------------------|----------------|-------------------|------------------------------------|
| <pre>#RENAL PAPILLA<br/>INFLAMMATION, NECROTIZING</pre>              | (20)                | (20)                         | (49)           | (49)              | (48)<br>1 (2%)                     |
| #KIDNEY/TUBULE<br>Mineralization<br>Dilatation, Nos<br>Necrosis, Nos | (20)                | (20)                         | (49)           | (49)              | (48)<br>2 (4%)<br>1 (2%)<br>1 (2%) |
| *URETER<br>Retention fluid                                           | (20)                | (20)                         | (49)           | (49)              | (48)<br>1 (2%)                     |
| #URINARY BLADDER<br>Hemorrhage                                       | (20)                | (20)                         | (48)           | (46)              | (44)                               |
| INFLAMMATION, NOS<br>Lymphocytic inflammatory infiltr                | 1 (5%)              |                              |                | 2 (4%)            | 1 (2%)                             |
| CRYSTALS, NOS<br>Hyperplasia, Epithelial                             | 1 (5%)              |                              |                | 5 (11%)<br>4 (9%) | 17 (39%<br>3 (7%)                  |
| <pre>#U. BLADDER/MUCOSA<br/>Dysplasia, Nos</pre>                     | (20)                | (20)                         | (48)           | (46)              | (44)<br>1 (2%)                     |
| #U.BLADDER/SUBMUCOSA<br>Edema, Nos                                   | (20)                | (20)                         | (48)           | (46)              | (44)<br>7 (16%                     |
| ENDOCRINE SYSTEM                                                     |                     |                              |                |                   |                                    |
| #PITUITARY<br>HEMORRHAGE                                             | (20)                | (18)                         | (46)           | (47)              | (41)<br>1 (2%)                     |
| #ADRENAL CORTEX<br>LIPOIDOSIS                                        | (20)                | (20)                         | (49)           | (49)              | (47)                               |
| HYPERPLASIA, NOS                                                     | 1 (5%)              | 2 (10%)                      | 2 (4%)         |                   |                                    |
| #ZONA RETICULARIS<br>ATROPHY, NOS                                    | (20)                | (20)                         | (49)           | (49)              | (47)<br>1 (2%)                     |
| #THYROID<br>Follicular cyst, Nos                                     | (20)<br>2 (10%)     | (19)                         | (46)<br>1 (2%) | (47)              | (48)                               |
| REPRODUCTIVE SYSTEM                                                  |                     |                              |                |                   |                                    |
| #UTERUS<br>PYOMETRA                                                  | (20)                | (20)                         | (48)           | (47)              | (46)                               |

|                                                                                            | LOW DOSE<br>CONTROL | MID AND HIGH<br>DOSE CONTROL        | LOW DOSE                    | MID DOSE                    | HIGH DOSE                           |
|--------------------------------------------------------------------------------------------|---------------------|-------------------------------------|-----------------------------|-----------------------------|-------------------------------------|
| POLYP, INFLAMMATORY                                                                        |                     | 1 (5%)                              | 1 (2%)                      |                             |                                     |
| #UTERUS/ENDOMETRIUM<br>CYST, NOS<br>Inflammation, acute suppurative<br>Hyperplasia, cystic | (20)<br>10 (50%)    | (20)<br>15 (75%)                    | (48)<br>21 (44%)<br>7 (15%) | (47)<br>18 (38%)<br>5 (11%) | (46)<br>12 (26%<br>1 (2%)<br>1 (2%) |
| #OVARY<br>Cyst, Nos<br>Hemorrhage<br>Hemorrhagic Cyst<br>Calcification, Dystrophic         | (19)<br>3 (16%)     | (20)<br>5 (25%)<br>1 (5%)<br>1 (5%) | (48)<br>9 (19%)<br>1 (2%)   | (47)<br>5 (11%)             | (44)<br>5 (11%<br>1 (2%)            |
| NERVOUS SYSTEM                                                                             |                     |                                     |                             |                             |                                     |
| NONE                                                                                       |                     |                                     |                             |                             |                                     |
| SPECIAL SENSE ORGANS                                                                       |                     |                                     |                             |                             |                                     |
| *EYE/RETINA<br>Atrophy, Nos                                                                |                     | (20)                                |                             |                             | (48)<br>1 (2%)                      |
| MUSCULOSKELETAL SYSTEM                                                                     |                     |                                     |                             |                             |                                     |
| BODY CAVITIES                                                                              |                     |                                     |                             |                             |                                     |
| *PERITONEUM<br>Inflammation, suppurative                                                   | (20)                | (20)                                | (49)                        | (49)                        | (48)<br>1 (2%)                      |
| *MESENTERY<br>LIPOGRANULOMA                                                                | (20)<br>4 (20%)     | (20)                                | (49)<br>4 (8%)              | (49) 1 (2%)                 | (48)                                |
| ALL OTHER SYSTEMS                                                                          |                     |                                     |                             |                             |                                     |
| *MULTIPLE ORGANS<br>Hematopoiesis                                                          | (20)                | (20)                                | (49)                        | (49)                        | (48)                                |
| SPECIAL MORPHOLOGY SUMMARY                                                                 |                     |                                     |                             |                             |                                     |
| NO LESION REPORTED                                                                         | 2                   | 1                                   | 1                           | 3                           | 1                                   |

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

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

|                                                                      | LOW DOSE<br>Control | MID AND HIGH<br>DOSE CONTROL | LOW DOSE | MID DOSE | HIGH DOSE |
|----------------------------------------------------------------------|---------------------|------------------------------|----------|----------|-----------|
| ANIMAL MISSING/NO NECROPSY<br>AUTO/NECROPSY/HISTO PERF               |                     |                              | 1        | 1        | 2<br>1    |
| # NUMBER OF ANIMALS WITH TISSUE EX<br>* NUMBER OF ANIMALS NECROPSIED | AMINED MICROSCOP    | ICALLY                       |          |          |           |

87

APPENDIX E

# ANALYSES OF THE INCIDENCE OF PRIMARY TUMORS IN

#### RATS ADMINISTERED PHTHALAMIDE IN THE DIET

|                               | Matched       | Low        | High          |
|-------------------------------|---------------|------------|---------------|
| Topography: Morphology        | Control       | Dose       | Dose          |
| Lung: Alveolar/Bronchiolar    |               |            |               |
| Adenoma (b)                   | 3/20 (15)     | 3/50 (6)   | 0/50 (0)      |
| P Values (c,d)                | P = 0.010 (N) | N.S.       | P = 0.021 (N) |
| Relative Risk (f)             |               | 0.400      | 0.000         |
| Lower Limit                   |               | 0.060      | 0.000         |
| Upper Limit                   |               | 2.802      | 0.659         |
| Weeks to First Observed Tumor | 93            | 106        |               |
| Hematopoietic System:         |               |            |               |
| Lymphoma or Leukemia (b)      | 8/20 (40)     | 12/50 (24) | 8/50 (16)     |
| P Values (c,d)                | P = 0.026 (N) | N.S.       | P = 0.035 (N) |
| Relative Risk (f)             |               | 0.600      | 0.400         |
| Lower Limit                   |               | 0.280      | 0.161         |
| Upper Limit                   |               | 1.471      | 1.073         |
| Weeks to First Observed Tumor | 91            | 79         | 91            |

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

|                               | Matched        | Low      | High                                     |
|-------------------------------|----------------|----------|------------------------------------------|
| Topography: Morphology        | <u>Control</u> | Dose     | Dose                                     |
| Pituitary: Adenoma, NOS (b)   | 3/18 (17)      | 4/49 (8) | 1/49 (2)                                 |
| P Values (c,d)                | P = 0.031 (N)  | N.S.     | N.S.                                     |
| Relative Risk (f)             |                | 0.490    | 0.122                                    |
| Lower Limit                   |                | 0.095    | 0.002                                    |
| Upper Limit                   |                | 3.118    | 1.435                                    |
| Weeks to First Observed Tumor | 106            | 97       | 106                                      |
| Pituitary: Chromophobe        |                |          | an a |
| Carcinoma (b)                 | 1/18 (6)       | 2/49 (4) | 8/49 (16)                                |
| P Values (c,d)                | N.S.           | N.S.     | N.S.                                     |
| Relative Risk (f)             |                | 0.735    | 2.939                                    |
| Lower Limit                   |                | 0.042    | 0.448                                    |
| Upper Limit                   |                | 42.478   | 127.379                                  |
| Weeks to First Observed Tumor | 106            | 106      | 98                                       |

92

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

|                               | Matched   | Low        | High       |
|-------------------------------|-----------|------------|------------|
| Topography: Morphology        | Control   | Dose       | Dose       |
| Pituitary: Chromophobe        |           |            |            |
| Carcinoma or Adenoma (b)      | 4/18 (22) | 18/49 (37) | 17/49 (35) |
| P Values (c,d)                | N.S.      | N.S.       | N.S.       |
| Relative Risk (f)             |           | 1.653      | 1.561      |
| Lower Limit                   |           | 0.660      | 0.616      |
| Upper Limit                   |           | 6.011      | 5.720      |
| Weeks to First Observed Tumor | 93        | 94         | 91         |
| Adrenal: Pheochromocytoma (b) | 4/20 (20) | 11/50 (22) | 11/50 (22) |
| P Values (c,d)                | N.S.      | N.S.       | N.S.       |
| Relative Risk (f)             |           | 1.100      | 1.100      |
| Lower Limit                   |           | 0.384      | 0.384      |
| Upper Limit                   |           | 4.321      | 4.321      |
| Weeks to First Observed Tumor | 104       | 83         | 96         |

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

|                               | Matched  | Low      | High      |
|-------------------------------|----------|----------|-----------|
| Topography: Morphology        | Control  | Dose     | Dose      |
| Thyroid: C-cell Adenoma or    |          |          |           |
| Carcinoma (b)                 | 0/19 (0) | 4/50 (8) | 6/48 (13) |
| P Values (c,d)                | N.S.     | N.S.     | N.S.      |
| Relative Risk (f)             |          | Infinite | Infinite  |
| Lower Limit                   |          | 0.368    | 0.662     |
| Upper Limit                   |          | Infinite | Infinite  |
| Weeks to First Observed Tumor |          | 99       | 98        |
| Testis: Interstitial-cell     |          |          |           |
| Tumor (b)                     | 1/20 (5) | 3/50 (6) | 3/50 (6)  |
| P Values (c,d)                | N.S.     | N.S.     | N.S.      |
| Relative Risk (f)             |          | 1.200    | 1.200     |
| Lower Limit                   |          | 0.106    | 0.106     |
| Upper Limit                   |          | 61.724   | 61.724    |
| Weeks to First Observed Tumor | 78       | 83       | 86        |

.

| Table El. | Analyses of the Incidence of Primary Tumors in Male Rats |
|-----------|----------------------------------------------------------|
|           | Administered Phthalamide in the Diet (a)                 |

|                               | Matched    | Low        | High       |
|-------------------------------|------------|------------|------------|
| Copography: Morphology        | Control    | Dose       | Dose       |
| Cestis: Interstitial-cell     |            |            |            |
| Tumor, Malignant (b)          | 17/20 (85) | 41/50 (82) | 37/50 (74) |
| Values (c,d)                  | N.S.       | N.S.       | N.S.       |
| Relative Risk (f)             |            | 0.965      | 0.871      |
| Lower Limit                   |            | 0.802      | 0.719      |
| Upper Limit                   |            | 1.310      | 1.224      |
| leeks to First Observed Tumor | 97         | 96         | 90         |

| Table El. | Analyses of the Incidence of Primary Tumors in Male Rats |  |
|-----------|----------------------------------------------------------|--|
|           | Administered Phthalamide in the Diet (a)                 |  |

95

(a) Dosed groups received 15,000 or 30,000 ppm.

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

|                                                   | Matched   | Low                     | High                    |
|---------------------------------------------------|-----------|-------------------------|-------------------------|
| Topography: Morphology                            | Control   | Dose                    | Dose                    |
| Hematopoietic System:<br>Lymphoma or Leukemia (b) | 5/20 (25) | 5/50 (10)               | 6/50 (12)               |
| P Values (c,d)                                    | N.S.      | N.S.                    | N.S.                    |
| Relative Risk (f)<br>Lower Limit<br>Upper Limit   |           | 0.400<br>0.107<br>1.583 | 0.480<br>0.143<br>1.807 |
| Weeks to First Observed Tumor                     | 80        | 78                      | 101                     |
| Liver: Neoplastic                                 |           |                         |                         |
| Nodule (b)                                        | 2/20 (10) | 2/50 (4)                | 6/49 (12)               |
| P Values (c,d)                                    | N.S.      | N.S.                    | N.S.                    |
| Relative Risk (f)                                 |           | 0.400                   | 1.225                   |
| Lower Limit                                       |           | 0.032                   | 0.248                   |
| Upper Limit                                       |           | 5.278                   | 11.804                  |
| Weeks to First Observed Tumor                     | 106       | 106                     | 106                     |

| Table E2.                                | Analyses of the Incidence of Primary Tumors in Female Rats |  | |
|---|---|---|---|
| Administered Phthalamide in the Diet (a) |                                                            |  |
|                                    | Matched        | Low      | High     |
|------------------------------------|----------------|----------|----------|
| Topography: <u>Morphology</u>      | <u>Control</u> | Dose     | Dose     |
| Pituitary: Adenoma, NOS (b)        | 3/19 (16)      | 2/50 (4) | 1/48 (2) |
| P Values (c,d)                     | P = 0.040 (N)  | N.S.     | N.S.     |
| Relative Risk (f)                  |                | 0.253    | 0.132    |
| Lower Limit                        |                | 0.023    | 0.003    |
| Upper Limit                        |                | 2.077    | 1.547    |
| Weeks to First Observed Tumor      | 80             | 76       | 80       |
| Pituitary: Adenocarcinoma, NOS (b) | 0/19 (0)       | 3/50 (6) | 1/48 (2) |
| P Values (c,d)                     | N.S.           | N.S.     | N.S.     |
| Relative Risk (f)                  |                | Infinite | Infinite |
| Lower Limit                        |                | 0.238    | 0.022    |
| Upper Limit                        |                | Infinite | Infinite |
| Weeks to First Observed Tumor      |                | 95       | 106      |

|                               | Matched        | Low        | High       |
|-------------------------------|----------------|------------|------------|
| Topography: Morphology        | <u>Control</u> | Dose       | Dose       |
| Pituitary: Chromophobe        |                |            |            |
| Carcinoma or Adenoma (b)      | 5/19 (26)      | 25/50 (50) | 24/48 (50) |
| P Values (c,d)                | N.S.           | N.S.       | N.S.       |
| Relative Risk (f)             |                | 1.900      | 1.900      |
| Lower Limit                   |                | 0.876      | 0.872      |
| Upper Limit                   |                | 5.526      | 5.528      |
| Weeks to First Observed Tumor | 103            | 104        | 98         |
| Thyroid: C-cell Adenoma (b)   | 1/20 (5)       | 5/50 (10)  | 2/48 (4)   |
| P Values (c,d)                | N.S.           | N.S.       | N.S.       |
| Relative Risk (f)             |                | 2.000      | 0.833      |
| Lower Limit                   |                | 0.249      | 0.047      |
| Upper Limit                   |                | 92.596     | 48.155     |
| Weeks to First Observed Tumor | 106            | 95         | 106        |

| Topography: Morphology              | Matched<br>Control | Low<br>Dose | High<br>Dose |
|-------------------------------------|--------------------|-------------|--------------|
| Mammary Gland: Cystadenoma, NOS (b) | 0/20 (0)           | 1/50 (2)    | 3/50 (6)     |
| ? Values (c,d)                      | N.S.               | N.S.        | N.S.         |
| Relative Risk (f)                   |                    | Infinite    | Infinite     |
| Lower Limit                         |                    | 0.022       | 0.250        |
| Upper Limit                         |                    | Infinite    | Infinite     |
| Weeks to First Observed Tumor       |                    | 106         | 106          |
| fammary Gland: Fibroadenoma (b)     | 3/20 (15)          | 10/50 (20)  | 9/50 (18)    |
| P Values (c,d)                      | N.S.               | N.S.        | N.S.         |
| Relative Risk (f)                   |                    | 1.333       | 1.200        |
| Lower Limit                         |                    | 0.398       | 0.346        |
| Upper Limit                         |                    | 7.002       | 6.408        |
| Veeks to First Observed Tumor       | 106                | 106         | 99           |

(continued)

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

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

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

(e) The probability level for departure from linear trend is given when P is less than 0.05 for any comparison.

- 100
- (f) The 95 percent confidence interval of the relative risk between each dosed group and the control group.

APPENDIX F

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

.

|                               | Matched   | Low                                                                                                             | High       |
|-------------------------------|-----------|-----------------------------------------------------------------------------------------------------------------|------------|
| Topography: Morphology        | Control   | Dose                                                                                                            | Dose       |
| Lung: Alveolar/Bronchiolar    |           |                                                                                                                 |            |
| Carcinoma or Adenoma (b)      | 3/20 (15) | 7/50 (14)                                                                                                       | 10/50 (20) |
| P Values (c,d)                | N.S.      | N.S                                                                                                             | N.S.       |
| Relative Risk (f)             |           | 0.933                                                                                                           | 1.333      |
| Lower Limit                   |           | 0.245                                                                                                           | 0.398      |
| Upper Limit                   |           | 5.215                                                                                                           | 7.002      |
| Weeks to First Observed Tumor | 105       | 105                                                                                                             | 102        |
| Hematopoietic System:         |           | 1997 - 1997 - 1997 - 1997 - 1997 - 1997 - 1997 - 1997 - 1997 - 1997 - 1997 - 1997 - 1997 - 1997 - 1997 - 1997 - | ······     |
| Lymphoma (b)                  | 2/20 (10) | 9/50 (18)                                                                                                       | 9/50 (18)  |
| P Values (c,d)                | N.S.      | N.S.                                                                                                            | N.S.       |
| Relative Risk (f)             |           | 1.800                                                                                                           | 1.800      |
| Lower Limit                   |           | 0.426                                                                                                           | 0.426      |
| Upper Limit                   |           | 16.255                                                                                                          | 16.255     |
| Weeks to First Observed Tumor | 105       | 88                                                                                                              | 92         |

|                                | Matched  | Low         | High     |
|--------------------------------|----------|-------------|----------|
| Topography: Morphology         | Control  | <u>Dose</u> | Dose     |
| All Sites: Hemangioma (b)      | 0/20 (0) | 4/50 (8)    | 3/50 (6) |
| P Values (c,d)                 | N.S.     | N.S.        | N.S.     |
| Relative Risk (f)              |          | Infinite    | Infinite |
| Lower Limit                    |          | 0.386       | 0.250    |
| Upper Limit                    |          | Infinite    | Infinite |
| Weeks to First Observed Tumor  |          | 105         | 105      |
| All Sites: Hemangiosarcoma (b) | 1/20 (5) | 0/50 (0)    | 3/50 (6) |
| P Values (c,d)                 | N.S.     | N.S.        | N.S.     |
| Relative Risk (f)              |          | 0.000       | 1.200    |
| Lower Limit                    |          | 0.000       | 0.106    |
| Upper Limit                    |          | 7.475       | 61.724   |
| Weeks to First Observed Tumor  | 105      |             | 78       |

| Table Fl. | Analyses of the Incidence of Primary Tumors in Male Mice |  |
|-----------|----------------------------------------------------------|--|
|           | Administered Phthalamide in the Diet (a)                 |  |

|                               | Matched        | Low        | High      |
|-------------------------------|----------------|------------|-----------|
| Topography: Morphology        | <u>Control</u> | Dose       | Dose      |
| All Sites: Hemangioma or      |                |            |           |
| Hemangiosarcoma (b)           | 1/20 (5)       | 4/50 (8)   | 6/50 (12) |
| P Values (c,d)                | N.S.           | N.S.       | N.S.      |
| Relative Risk (f)             |                | 1.600      | 2.400     |
| Lower Limit                   |                | 0.175      | 0.325     |
| Upper Limit                   |                | 77.169     | 108.021   |
| Weeks to First Observed Tumor | 105            | 105        | 78        |
| Liver: Hepatocellular         |                |            |           |
| Carcinoma (b)                 | 8/20 (40)      | 12/50 (24) | 9/50 (18) |
| P Values (c,d)                | P = 0.045 (N)  | N.S.       | N.S.      |
| Relative Risk (f)             |                | 0.600      | 0.450     |
| Lower Limit                   |                | 0.280      | 0.190     |
| Upper Limit                   |                | 1.471      | 1.174     |
| Weeks to First Observed Tumor | 99             | 80         | 96        |

|                               | Matched        | Low        | High       |
|-------------------------------|----------------|------------|------------|
| Topography: Morphology        | <u>Control</u> | Dose       | Dose       |
| Liver: Heptocellular          |                |            |            |
| Carcinoma or Adenoma (b)      | 9/20 (45)      | 17/50 (34) | 13/50 (26) |
| P Values (c,d)                | N.S.           | N.S.       | N.S.       |
| Relative Risk (f)             |                | 0.756      | 0.578      |
| Lower Limit                   |                | 0.404      | 0.289      |
| Upper Limit                   |                | 1.639      | 1.316      |
| Weeks to First Observed Tumor | 99             | 80         | 96         |
| Pancreatic Islets: Islet-cell |                |            |            |
| Adenoma (b)                   | 2/20 (10)      | 1/50 (2)   | 6/49 (12)  |
| P Values (c,d)                | N.S.           | N.S.       | N.S.       |
| Relative Risk (f)             |                | 0.200      | 1.224      |
| Lower Limit                   |                | 0.004      | 0.248      |
| Upper Limit                   |                | 3.681      | 11.802     |
| Neeks to First Observed Tumor | 105            | 105        | 105        |

| Table Fl. | Analyses of the Incidence of Primary Tumors in Male Mic |
|-----------|---------------------------------------------------------|
|           | Administered Phthalamide in the Diet (a)                |

#### (continued)

- (a) Dosed groups received 25,000 or 50,000 ppm.
- (b) Number of tumor-bearing animals/number of animals examined at site (percent)
- (c) Beneath the incidence of tumors in the control group is the probability level for the Cochran-Armitage test when P is less than 0.05; otherwise, not significant (N.S.) is indicated. Beneath the incidence of tumors in a dosed group is the probability level for the Fisher exact test for the comparison of that dosed group with the matched-control group when P is less than 0.05; otherwise, not significant (N.S.) is indicated.
- (d) A negative trend (N) indicates a lower incidence in a dosed group than in a control group.
- (e) The probability level for departure from linear trend is given when P is less than 0.05 for any comparison.
  - (f) The 95 percent confidence interval of the relative risk between each dosed group and the control group.

|                                                                                        | Combined                          | Low                | Mid                | High             |
|----------------------------------------------------------------------------------------|-----------------------------------|--------------------|--------------------|------------------|
| Topography: Morphology                                                                 | Control                           | Dose               | Dose               | Dose             |
| Lung: Alveolar/Bronchiolar                                                             |                                   |                    |                    |                  |
| Adenoma (b)                                                                            | 3/40 (8)                          | 5/48 (10)          | 1/49 (2)           | 0/48 (0)         |
| P Values (c,d)                                                                         | P = 0.024* (N)<br>N.S.**          | N•S•               | N.S.               | N.S.             |
| Relative Risk (f)                                                                      |                                   | 1.389              | 0.272              | 0.000            |
| Lower Limit                                                                            |                                   | 0.290              | 0.005              | 0.000            |
| Upper Limit                                                                            |                                   | 8.481              | 3.241              | 1.382            |
| Weeks to First Observed Tumor                                                          | 103                               | 79                 | 101                |                  |
| Hematopoietic System: Lymphoma or                                                      |                                   |                    |                    |                  |
| Leukemia (b)                                                                           | 7/40 (18)                         | 12/49 (24)         | 17/49 (35)         | 3/48 (6)         |
| Leukemia (b)                                                                           | 7/40 (18)<br>P = 0.042**<br>N.S.* | 12/49 (24)<br>N.S. | 17/49 (35)<br>N.S. | 3/48 (6)<br>N.S. |
| Leukemia (b)<br>P Values (c,d)                                                         | P = 0.042 **                      | • • •              | •                  |                  |
|                                                                                        | P = 0.042**<br>N.S.*              | • • •              | •                  |                  |
| Leukemia (b)<br>P Values (c,d)<br>Departure From Linear Trend (e)                      | P = 0.042**<br>N.S.*              | N.S.               | N.S.               | N.S.             |
| Leukemia (b)<br>P Values (c,d)<br>Departure From Linear Trend (e)<br>Relative Risk (f) | P = 0.042**<br>N.S.*              | N.S.<br>1.399      | N.S.<br>1.983      | N.S.<br>0.357    |

|                               | Combined       | Low      | Mid      | High     |
|-------------------------------|----------------|----------|----------|----------|
| Topography: Morphology        | <u>Control</u> | Dose     | Dose     | Dose     |
| All Sites: Hemangioma (b)     | 2/40 (5)       | 3/49 (6) | 1/49 (2) | 0/48 (0) |
| P Values (c,d)                | N.S.           | N.S.     | N.S.     | N.S.     |
| Relative Risk (f)             |                | 1.224    | 0.408    | 0.000    |
| Lower Limit                   |                | 0.148    | 0.007    | 0.000    |
| Upper Limit                   |                | 14.113   | 7.568    | 2.812    |
| Weeks to First Observed Tumor | 103            | 97       | 105      |          |
| All Sites: Hemangioma or      |                |          |          |          |
| Hemangiosarcoma (b)           | 2/40 (5)       | 3/49 (6) | 3/49 (6) | 0/48 (0) |
| P Values (c,d)                | N.S.           | N.S.     | N.S.     | N.S.     |
| Relative Risk (f)             |                | 1.224    | 1.224    | 0.000    |
| Lower Limit                   |                | 0.148    | 0.148    | 0.000    |
| Upper Limit                   |                | 14.113   | 14.113   | 2.812    |
| Weeks to First Observed Tumor | 103            | 97       | 105      |          |

|                               | Combined                 | Low        | Mid       | High          |
|-------------------------------|--------------------------|------------|-----------|---------------|
| Topography: Morphology        | Control                  | Dose       | Dose      | Dose          |
| Liver: Hepatocellular         |                          |            |           |               |
| Adenoma or Carcinoma (b)      | 4/40 (10)                | 2/49 (4)   | 2/49 (4)  | 0/48 (0)      |
| P Values (c,d)                | P = 0.030* (N)<br>N.S.** | N.S.       | N.S.      | P = 0.039 (N) |
| Relative Risk (f)             |                          | 0.408      | 0.408     | 0.000         |
| Lower Limit                   |                          | 0.039      | 0.039     | 0.000         |
| Upper Limit                   |                          | 2.697      | 2.697     | 0.896         |
| Weeks to First Observed Tumor | 78                       | 103        | 105       |               |
| Pituitary: Adenoma, NOS (b)   | 7/38 (18)                | 11/46 (24) | 5/47 (11) | 3/41 (7)      |
| P Values (c,d)                | P = 0.038* (N)<br>N.S.** | N.S.       | N.S.      | N.S.          |
| Relative Risk (f)             |                          | 1.298      | 0.578     | 0.397         |
| Lower Limit                   |                          | 0.514      | 0.157     | 0.071         |
| Upper Limit                   |                          | 3.577      | 1.946     | 1.602         |
| Weeks to First Observed Tumor | 103                      | 100        | 105       | 105           |

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

#### (continued)

- (a) Dosed groups received 6,200, 12,500, or 25,000 ppm.
- (b) Number of tumor-bearing animals/number of animals examined at site (percent).
- (c) Beneath the incidence of tumors in the control group is the probability level for the Cochran-Armitage test using combined control, low-, mid- and high-dose groups (\*) and using combined control, low- and mid-dose groups (\*\*) when P is less than 0.05; otherwise, not significant (N.S.) is indicated. Beneath the incidence of tumors in a dosed group is the probability level for the Fisher exact test for the comparison of that dosed group with the control group when P is less than 0.05; otherwise, not significant (N.S.) is indicated.
- (d) A negative trend (N) indicates a lower incidence in a dosed group than in a control group.
- (e) The probability level for departure from linear trend is given when P is less than 0.05 for any comparison.
- (f) The 95 percent confidence interval of the relative risk between each dosed group and the control group.

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

December 13, 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 on the Institute's bioassay program to identify and evaluate chemical carcinogens in the environment to which humans may be exposed. The members of the Clearinghouse have been drawn from academia. industry, organized labor, public interest groups, and State health officials. 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 Phthalamide.

The reviewer for the report on the bioassay of Phthalamide agreed with the conclusion that the compound was not carcinogenic under the conditions of test. After a brief description of the experimental design, he noted that the weight depression "was not particularly impressive" among the treated high-dose animals. Based on the results of the study, he said that the compound did not appear to pose a carcinogenic risk to human beings. The reviewer moved that the report on the bioassay of Phthalamide be accepted as written. The motion was seconded and approved without objection.

#### Clearinghouse Members Present:

Arnold L. Brown (Chairman), University of Wisconsin Medical School Joseph Highland, Environmental Defense Fund William Lijinsky, Frederick Cancer Research Center Henry Pitot, University of Wisconsin Medical Center Verne A. Ray, Pfizer Medical Research Laboratory Verald K. Rowe, Dow Chemical USA Michael Shimkin, University of California at San Diego Louise Strong, University of Texas Health Sciences Center Kenneth Wilcox, Michigan State Health Department

\* 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.

CU.S. GOVERNMENT PRINTING OFFICE: 1979-281-217/3011

DHEW Publication No. (NIH) 79-1717