NATIONAL TOXICOLOGY PROGRAM Technical Report Series No. 232



NATIONAL TOXICOLOGY PROGRAM

The National Toxicology Program (NTP), established in 1978, develops and evaluates scientific information about potentially toxic and hazardous chemicals. This knowledge can be used for protecting the health of the American people and for the primary prevention of chemically induced disease. By bringing together the relevant programs, staff, and resources from the U.S. Public Health Service, DHHS, the National Toxicology Program has centralized and strengthened activities relating to toxicology research, testing and test development/validation efforts, and the dissemination of toxicological information to the public and scientific communities and to the research and regulatory agencies.

The NTP is comprised of four charter DHHS agencies: the National Cancer Institute, National Institutes of Health; the National Institute of Environmental Health Sciences, National Institutes of Health; the National Center for Toxicological Research, Food and Drug Administration; and the National Institute for Occupational Safety and Health, Centers for Disease Control. In July 1981, the Carcinogenesis Bioassay Testing Program, NCI, was transferred to the NIEHS.

NTP TECHNICAL REPORT ON THE

CARCINOGENESIS BIOASSAY OF PENTACHLOROETHANE

(CAS NO. 76-01-7)

IN F344/N RATS AND B6C3F₁ MICE (GAVAGE STUDY)



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NOTE TO THE READER

This is one in a series of experiments designed to determine whether selected chemicals produce cancer in animals. Chemicals selected for testing in the NTP carcinogenesis bioassay program are chosen primarily on the bases of human exposure, level of production, and chemical structure. Selection per se is not an indicator of a chemical's carcinogenic potential. Negative results, in which the test animals do not have a greater incidence of cancer than control animals, do not necessarily mean that a test chemical is not a carcinogen, inasmuch as the experiments are conducted under a limited set of conditions. Positive results demonstrate that a test chemical is carcinogenic for animals under the conditions of the test and indicate that exposure to the chemical has the potential for hazard to humans. The determination of the risk to humans from chemicals found to be carcinogenic in animals requires a wider analysis which extends beyond the purview of this study.

This study was initiated by the National Cancer Institute's Carcinogenesis Testing Program, now part of the National Institute of Environmental Health Sciences, National Toxicology Program.

Comments and questions about the National Toxicology Program Technical Reports on Carcinogenesis Bioassays should be directed to the National Toxicology Program, located at Room A-306, Landow Building, Bethesda, MD 20205 (301-496-1152) or at Research Triangle Park, NC 27709 (919-541-3991).

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Pentachloroethane

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Pentachloroethane

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CARCINOGENESIS BIOASSAY OF PENTACHLOROETHANE



PENTACHLOROETHANE

CAS NO. 76-01-7 C₂HCl₅ Mol. Wt. 202.30

ABSTRACT

A carcinogenesis bioassay of technical grade pentachloroethane (95.5% pure, with 4.2% hexachloroethane) was conducted by administering the test chemical in corn oil by gavage to groups of 50 male and 50 female F344/N rats at doses of 75 or 150 mg/kg body weight and to groups of 50 male and 50 female B6C3F₁ mice at doses of 250 or 500 mg/kg. Doses were administered for 103 weeks for rats and 41-103 weeks for mice. Groups of 50 rats and 50 mice of each sex received corn oil by gavage on the same dosing schedule and served as vehicle controls. Prechronic testing (single-dose and 14-day and 13-week repeated-dose studies) did not indicate target organ toxicity for pentachloroethane. The dosage levels for the 2-year study were selected on the basis of survival and body weight gains during the prechronic test phase.

Survival of high-dose rats of each sex was significantly (P < 0.05) less than that of the controls. Mean body weights of dosed male and female rats were lower than those of the corresponding controls during the second year of the study. Final mean body weights for rats were 4%-5% lower for male rats and 8%-12% lower for female rats when compared to controls.

Chronic, diffuse inflammation of the kidney, distinguishable from nephropathy seen in aging F344/N rats, was found in male rats in a significant (P < 0.001) and dose-related incidence (control, 4/50, 8%; low-dose, 14/49, 29%; high-dose, 33/50, 66%). Mineralization of the renal papilla, considered to be secondary to chronic inflammation, was also observed at increased incidences in dosed male rats.

Pentachloroethane administration did not cause any increased incidences of tumors in either male or female rats. [See Note Added Subsequent to Peer Review on page 8.] Statistically significant negative trends were detected for subcutaneous tissue fibromas among males and for pituitary adenomas in both sexes.

Forty-two high-dose male mice died by week 41, and the 8 remaining animals in the group were killed at that time. Twenty-five male control mice were killed at week 44 to serve as controls for the high-dose males. Only 22/50 (44%) of the low-dose male mice survived to the end of the study. All high-dose female mice were dead by week 74, and only 9/50 (18%) low-dose females survived to the end of the study. Mean body weights of mice were lower than those of controls.

The incidence of hepatocellular carcinoma was significantly elevated in all groups of dosed mice (male: 4/48, 8%; 26/44, 59%, P < 0.001; 7/45, 16%; female: 1/46, 2%; 28/42, 67%, P < 0.001; 13/45, 29% P < 0.001). Early mortalities in the high-dose male mice precluded an evaluation of their lifetime incidence of hepatocellular carcinoma. There was a significant increase in incidence over that observed among 25 controls killed at week 44 (0/25 versus 7/45, P<0.05). There was also a significant (P < 0.001) dose-related increase in hepatocellular adenoma in female mice (2/46, 4%; 8/42, 19%; 19/45, 42%).

Under the conditions of this bioassay, technical grade pentachloroethane containing 4.2% hexachloroethane (a known carcinogen in mice) was not carcinogenic in F344/N rats. The decreased survival of dosed rats might have reduced the sensitivity for a carcinogenic response in this species. Pentachloroethane was nephrotoxic to male rats. Technical grade pentachloroethane was carcinogenic for B6C3F₁ mice, causing hepatocellular carcinomas in males and females, and adenomas in females.

NOTE ADDED SUBSEQUENT TO PEER REVIEW

After the Peer Review Panel meeting in June 1981, the National Toxicology Program determined that the kidney (especially in male F344/N rats) was a target organ for the short-chain chlorinated aliphatic hydrocarbons. This awareness came from the nonneoplastic and neoplastic diagnoses made on related chemicals in this class. Alerted to this lead, the NTP re-examined the originally-prepared histology slides on the rat kidney from the pentachloroethane bioassay. During the re-reading, additional renal tubular adenomas were discovered. Unfortunately, these slides were lost after they arrived at the Gulf South Research Institute laboratory; by necessity, a new set of slides was prepared.

In the second set of slides, three additional renal tubular-cell adenomas were discovered: one in a low-dose male and two in high-dose males; none were found in treated females or in male and female vehicle controls. Thus, rare tubular-cell adenomas of the kidney occurred in male rats with a dose-related trend (P < 0.05), and the incidence in the high-dose group was suggestive (P < 0.06; 0/50, 1/49, 4/50). Additionally, one control and one low-dose male each had an adenocarcinoma and another low-dose male had a carcinoma of the kidney (not otherwise specified); combining tubular-cell tumors reduced the statistical differences (1/50, 2/49, 4/50). These tumors are uncommon in male vehicle controls in the bioassay program, occurring in 1/293 (0.3%) at this bioassay testing laboratory and in 4/998 (0.4%) in all NCI/NTP bioassay testing laboratories. All tumors in these gavage controls were adenocarcinomas. The National Toxicology Program considers that these rare tubular-cell tumors of the kidney in male rats indicate a target organ and may have been associated with the administration of pentachloroethane. These additional tumor diagnoses were not presented to the Peer Review Panel. These are, however, the incidence rates recorded and analyzed statistically in this technical report (Table 5, Table A1, and Table A3).

CONTRIBUTORS

The bioassay of pentachloroethane was conducted at Gulf South Research Institute under a subcontract to Tracor Jitco, Inc., the prime contractor for the Carcinogenesis Testing Program. The 2-year study was begun in December 1977 and completed in December 1979.

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The pathology report and selected slides were evaluated on 14 and 19 November 1980 by the NTP Pathology Working Group, which was composed of Drs. G. Boorman (NTP), B. Gupta (NTP), P. Hildebrandt (Tracor Jitco), G. Reznik (NTP), and J. Ward (NTP).

The chemicals used in this bioassay of pentachloroethane were analyzed by the Midwest Research Institute, 425 Volker Blvd., Kansas City, Missouri 64110. Reanalysis of the bulk chemical and analysis of chemical/vehicle mixtures were performed at Gulf South Research Institute.

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*Unable to attend June 23, 1981 meeting

SUMMARY OF PEER REVIEW COMMENTS

On June 23, 1981, this carcinogenesis bioassay report on pentachloroethane underwent peer review and was approved by the National Toxicology Program Board of Scientific Counselors' Technical Reports Review Subcommittee and associated Panel of Experts at an open meeting held in Building 101, National Institute of Environmental Health Sciences, Research Triangle Park, North Carolina.

Dr. Harper, as the principal reviewer for the report on the bioassay of pentachloroethane, agreed with the conclusion that, under the conditions of the bioassay, technical grade pentachloroethane, containing 4.2 percent hexachloroethane, was carcinogenic for $B6C3F_1$ mice of either sex, causing increased incidences of hepatocellular carcinoma. The carcinogenicity of the test material may have been influenced by the presence of hexachloroethane, a known liver carcinogen in mice. Technical grade pentachloroethane was nephrotoxic for male (but not female) F344/N rats, but was not carcinogenic for either sex. Dr. Harper added that decreased survival of dosed rats might have contributed to the absence of a carcinogenic effect in F344/N rats. As a general comment, he noted the bioassays of halogenated hydrocarbons continue to be plagued with problems of poor survival in rats. He said the report alluded to the fact that pentachloroethane is metabolized to trichloroethylene, which was positive for carcinogenicity in an earlier bioassay. In that study, trichloroethylene was contaminated with epichlorohydrin and 1,2-epoxybutane, both powerful alkylating agents. This might be noted in the discussion. Dr. J. Douglas, NTP, reported that pathology results from another trichloroethylene bioassay should be available to cite in this report in response to Dr. Harper's question.

As the second principal reviewer, Dr. Breslow commented on the interpretation of the early mortality, specifically the significant increase in incidence of hepatocellular carcinoma in high-dose mice that was found by comparing the proportions of affected animals among those dying or killed by 44 weeks: 7/45 vs 0/25 in controls, P = 0.049. Since the analysis accounts for the number of animals at risk, he felt it was misleading to claim that early mortality was primarily responsible for the effect. A suggested rewording in the abstract and discussion would be: Early mortality of high-dose mice precluded an evaluation of their life-time incidence of hepatocellular carcinoma. There was a significant increase in incidence over that observed among 25 controls killed at week 44. In addition to the nephropathy previously noted, he said there was a significant dose-related trend in the incidence of interstitial inflammation of the lung for male rats.

Dr. Mirer stated he could see no justification for the use of technical grade material contaminated with other toxic compounds, and this usage interferes with interpretation of the significance of the results. In the future, some thought should be given as to when it is appropriate to use technical rather than reagent grade material. Dr. Swenberg also objected to the wording both in the Appendix and in the section on results in mice that the early mortality was responsible for the slight increase in tumors. He said the lack of pathologic data for the subchronic study was a major omission. Dr. Moore said he thought it had been included, but in any event, there were no pathological findings.

Dr. Harper moved that the report on the bioassay of pentachloroethane be accepted. Dr. Breslow seconded the motion, with the suggested modifications, and the technical report was approved unanimously by the Peer Review Panel.

I. INTRODUCTION

Pentachloroethane



PENTACHLOROETHANE

CAS NO. 76-01-7 C₂HCl₅ Mol. Wt. 202.30

Pentachloroethane (pentalin) is a solvent that was used primarily as an intermediate in the manufacture of tetrachloroethylene (Kirk-Othmer, 1979). With the development of alternate manufacturing processes for tetrachloroethylene, the annual production of pentachloroethane has declined to less than 5,000 pounds (USITC, 1980).

Exposure to pentachloroethane vapor produces irritation of the eyes and respiratory tract and mild narcosis in humans (International Technical Information Institute, 1975). The lowest published lethal concentrations of pentachloroethane, administered by inhalation to rats and mice, are 4,238 ppm and 35 g/m³, respectively (International Technical Information Institute, 1975). Single subcutaneous injections of pentachloroethane at doses of 1,100-1,800 mg/kg produced no deaths in female NMRI mice up to 72 hours after administration, and 12%-51% of the dose was expired unchanged (Yllner, 1971). The metabolites trichloroethanol (16%-32% of the dose) and trichloroacetic acid (9%-18% of the dose) were excreted in the urine, and trichloroethylene (2%-16% of the dose) and tetrachloroethylene (3%-9% of the dose) were identified in the expired air (Yllner, 1971).

Chlorinated ethanes and ethylenes are commercially important chemicals, several of which have been found to produce cancer in laboratory animals. For example, 1,2-dichloroethane, administered by gavage, increased the incidence of tumors in both sexes of B6C3F1 mice and Osborne-Mendel rats (NCI, 1978d). The more consistent pattern of response to chloroethanes and ethylenes has been an increase in hepatocellular carcinoma in B6C3F1 mice with little or no carcinogenicity apparent in Osborne-Mendel rats (NCI, 1976; 1977; 1978a; 1978b; 1978c). The results of these earlier carcinogenicity studies have been summarized (Weisburger, 1977) and reviewed (IARC, 1979).

The apparent absence of carcinogenic effects in Osborne-Mendel rats has been difficult to interpret because the treatment regimens employed generally shortened the survival times of the test animals. Therefore, the failure of the treatments to increase tumor incidences in the rats could have been due to the fact that the animals did not live long enough to develop the lesions. In most of the earlier studies, however, the survival times of both rats and mice were adversely affected by the treatments.

It is possible that the apparent lack of susceptibility of the Osborne-Mendel rat, or of rats in general, to the carcinogenic action of the chloroethanes and ethylenes is a genetic phenomenon. This possibility prompted the National Cancer Institute/National Toxicology Program to assess the carcinogenicity of several chlorohydrocarbons in different rat strains as well as in B6C3F1 mice. These studies were also initiated because some in this class of chemicals had been either inadequately studied or not studied at all. Pentachloroethane was in the latter category. While most of these studies are still in progress, the comparative testing of pentachloroethane in B6C3F1 mice and Fischer 344/N rats is completed. This report summarizes the results of that study.

Pentachloroethane did not induce any mutagenic response in *Salmonella typhimurium* strains TA 98, 100, 1535, and 1537 (with or without metabolic activation). Exogenous metabolic activation was provided by 9,000 x g liver supernatant (S-9) fractions from Aroclor 1254induced male Sprague-Dawley rats and male Syrian hamsters (NTP, 1982; NTP unpublished results).

II. MATERIALS AND METHODS

CHEMICAL ANALYSIS

ANIMALS

SHORT-TERM STUDIES

Single-Dose Study Fourteen-Day Study Thirteen-Week Study

TWO-YEAR STUDIES

Study Design

Source and Specifications of Test Animals

Animal Maintenance

Dosage Preparation

Clinical Examinations and Pathology

Data Recording and Statistical Methods

Pentachloroethane

II. MATERIALS AND METHODS-CHEMICAL ANALYSIS

CHEMICAL ANALYSIS

The technical grade pentachloroethane used in this bioassay was obtained from Columbia Organic Chemicals (Columbia, SC) in two batches. Lot No. CO41676 (89.5% pure) was used for the subchronic studies, and Lot No. CO102077 (95.5% pure) was used for the chronic studies. Both lots were stored at -20° C.

Elemental analyses agreed with theoretical values, and infrared and nuclear magnetic resonance spectra agreed with literature values (Appendixes E and F).

The impurities identified and quantitated are listed in Table 1. The technical-grade pentachloroethane was considered to be representative of the commercially available compound, and it was therefore judged to be suitable for use in the carcinogenesis bioassay. Gulf South Research Institute also analyzed the chemical periodically throughout the study using infrared spectroscopy and gas chromatography. There was no significant difference between the results, indicating that chemical decomposition had not taken place.

	Percent of Major Peak			
Chemical	Lot No. CO41676 (a)	Lot No. CO102077 <i>(b)</i>		
Acetone		0.08 (c)		
Hexachloroethane	10.40 <i>(d)</i>	4.20 (c)		
Pentachlorobutadiene	·	(e)		
1,2,4,4-Tetrachlorobutadiene		(e)		
1,1,1,2-Tetrachloroethane	<0.01 (d)	_		
1,1,2,2-Tetrachloroethane	<0.01 (d)	0.03 (c)		
Tetrachloroethylene	0.55 (d)	0.05 (c)		
Trichloroethylene	<0.01 (d)	0.13 (c)		
1,1,1-Trichloropropane		<0.01 (c)		

TABLE 1. IMPURITIES IDENTIFIED IN PENTACHLOROETHANE

(a) Used in subchronic studies

(b) Used in chronic studies

(c) Quantitated by vapor-phase chromatography.

(d) Quantitated using vapor-phase chromatography/mass spectrometry.

(e) Identified by mass spectrometry but not quantitated.

ANIMALS

F344/N rats and $B6C3F_1$ mice of each sex were used throughout these studies. Animals used in the prechronic studies were obtained from the Frederick Cancer Research Center (Frederick, MD), and those used in the chronic studies were obtained from the Charles River Breeding Laboratories (Portage, MI). All animals were acclimated to laboratory conditions for 9-26 days before being placed on study.

SHORT-TERM STUDIES

Single-Dose Study

Male and female F344/N rats and $B6C3F_1$ mice were observed for 7 days before the test began. Animals were approximately 5 weeks old when placed on study.

Groups of five males and five females of each species were administered single doses (0, 10, 50, 100, 500, or 1,000 mg/ kg) of pentachloroethane in corn oil by gavage. Surviving animals were killed on day 14.

Rats were housed individually and mice were housed five per cage. All animals received water and feed *ad libitum* during the observation period. Details of animal maintenance are presented in Table 2.

Animals were observed for mortality. Necropsies were performed on all animals. Animals were weighed on the day of dosing and on day 7 and day 14.

Fourteen-Day Study

Three- to four-week-old male and female F344/N rats and $B6C3F_1$ mice were obtained from Frederick Cancer Research Center and observed for 9 days (rats) or 26 days (mice).

Groups of five males and five females of each species were administered pentachloroethane (0, 10, 50, 100, 500, or 1,000 mg/kg) in corn oil by gavage for 14 days.

Rats were housed individually and mice were housed five per cage. All animals received water and feed *ad libitum*. Details of animal maintenance are presented in Table 2. Animals were observed daily for mortality and were weighed weekly. Necropsies were performed on all animals, and the lung, liver, and spleen were examined histologically.

Thirteen-Week Study

Thirteen-week studies were conducted to evaluate the cumulative toxicity of pentachloroethane and to determine the doses to be used in the 2-year studies.

Three-week-old male and female F344/N rats and $B6C3F_1$ mice were obtained from Frederick Cancer Research Center, observed for 2 weeks, and then assigned to test groups according to a table of random numbers.

Rats were housed individually in stainless steel wire mesh cages, and mice were housed five per cage in polypropylene cages covered with nonwoven polyester filter bonnets (Table 2). Racks and filters were changed once every 2 weeks. Cages, bedding, and water bottles were replaced twice per week.

Groups of 10 rats of each sex were administered pentachloroethane (5, 10, 50, 125, or 250 mg/kg) in corn oil by gavage, 5 days per week, for 13 weeks. Groups of 10 mice of each sex were administered 5, 10, 50, 100, or 500 mg/kg in corn oil by gavage on the same schedule. Vehicle controls received only corn oil.

Animals were checked for mortality and morbidity twice daily. Animals that were judged moribund were killed and necropsied. Each animal was given a clinical examination weekly, including palpation for tissue masses or swelling. Animals were group weighed at weekly intervals.

At the end of the 13-week study, survivors were killed with carbon dioxide, and necropsies were performed on all animals, unless precluded in whole or in part by autolysis or cannibalization. The following specimens were examined for control and high-dose animals: brain, pituitary, thyroid, parathyroid, esophagus, trachea, adrenal, liver, lung, kidney, spleen, salivary gland, lymph nodes (mandibular, mesenteric), pancreas, heart, testes, epididymis, prostate, seminal vesicle, ovary, uterus, vagina, urinary bladder, stomach, duodenum, colon, skin, mammary tissue, bone marrow, gallbladder (mice), and spinal cord. Tissues were preserved in 10% neutral buffered formalin, embedded in paraffin, sectioned, and stained with hematoxylin and eosin.

TWO-YEAR STUDIES

Study Design

Groups of 50 rats of each sex were administered 75 and 150 mg/kg pentachloroethane in corn oil by gavage, five times per week, for 103 weeks and observed for 0-1 week. Similar groups of mice received 250 or 500 mg/kg on the same schedule. Groups of 50 rats and 50 mice of each sex received corn oil alone five times per week and served as vehicle controls (Table 2).

Source and Specifications of Test Animals

Four-week-old male and female F344/N rats and 5-week-old male and female $B6C3F_1$ mice were obtained from Charles River Breeding Laboratories (Portage, MI), observed for 3 weeks, and assigned to cages according to a table of random numbers. Another table of random numbers was used to assign cages to control and dosed groups.

Animal Maintenance

Rats and mice were housed five per cage in polycarbonate cages covered with bonded, spun fiberglass filters (Table 2). Racks and filters were changed once every 2 weeks. Cages and bedding were replaced twice per week. Feed and city tap water (via an automatic watering system) were available *ad libitum*.

The temperature in the animal rooms was $23^{\circ} \pm 4^{\circ}$ C and the humidity was 40%-70\%. Room air was changed 12 times per hour. Fluorescent lighting provided illumination 12 hours per day.

All animals were housed in the same room; no other chemicals were on test in that room.

Dosage Preparation

Pentachloroethane was weighed and mixed with corn oil (Table 2) to give the desired concentration. Rats received 5 ml/kg and mice 10 ml/ kg body weight. Pentachloroethane/corn oil mixtures were stored at 4°C for no longer than 7 days.

Pentachloroethane/ corn oil mixtures were analyzed at Midwest Research Institute and found to be stable at room temperatures for up to 7 days (Appendix G). Blindly selected samples of pentachloroethane in corn oil were analyzed periodically (Appendix H).

Clinical Examinations and Pathology

All animals were observed three times daily for signs of toxicity. Clinical signs were recorded monthly. Body weights by cage were recorded approximately every 2 weeks. The mean body weight of each group was calculated by dividing the total weight of all animals in the group by the number of surviving animals in the group. Animals were killed with carbon dioxide and necropsied.

Examinations for grossly visible lesions were performed on major tissues or organs. Tissues were preserved in 10% neutral buffered formalin, embedded in paraffin, sectioned, and stained with hematoxylin and eosin. The following were examined microscopically: tissue masses, abnormal lymph nodes, skin, mandibular lymph nodes, mammary gland, salivary gland, thigh muscle, sciatic nerve, bone marrow, costochondral junction, thymus, larynx, trachea, lungs and bronchi, heart, thyroid, parathyroid, esophagus, stomach, duodenum, jejunum, ileum, colon, mesenteric lymph nodes, liver, gallbladder (mice), pancreas, spleen, kidneys, adrenals, urinary bladder, seminal vesicles/ prostate/testes or ovaries/uterus, nasal cavity, brain, pituitary, and spinal cord.

Necropsies were performed on all animals, 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 is not necessarily equal to the number of animals that were placed on study in each group.

Neoplastic nodules were classified according to the recommendations of Squire and Levitt (1975) and the National Academy of Sciences (1980). When the pathology examination was completed, the slides, individual animal data records, and summary tables were sent to an independent quality assurance laboratory. Individual animal records and tables were compared for accuracy, slides and tissue counts were verified, and histotechniques were evaluated. All tumor diagnoses, all target tissues, and all tissues from a randomly selected 10 percent of the animals were evaluated by an experienced rodent pathologist. Slides of all target tissues and those on which the original and quality assurance pathologists disagreed were submitted to the Chairperson of the Pathology Working Group (PWG) for evaluation. Representative slides selected by the PWG Chairperson were reviewed blindly by the PWG's experienced rodent pathologists, who reached a consensus and compared their findings with the original diagnoses. When conflicts were found, the PWG sent the appropriate slides and their comments to the original pathologist for review. (This procedure is described, in part, by Maronpot and Boorman, in press.) The final diagnosis represents a consensus of contractor pathologists and the NTP Pathology Working Group.

Data Recording and Statistical Methods

Data on this experiment were recorded in the Carcinogenesis Bioassay Data System (Linhart et al., 1974). The data elements include descriptive information on the chemicals, animals, experimental design, clinical observations, survival, body weight, and individual pathologic results, as recommended by the International Union Against Cancer (Berenblum, 1969).

Probabilities of survival were estimated by the product-limit procedure of Kaplan and Meier (1958) and are presented in this report in the form of graphs. Animals were statistically censored as of the time that they died of other than natural causes or were found to be missing; animals dying from natural causes were not statistically censored. Statistical analyses for a possible dose-related effect on survival used the method of Cox (1972) for testing two groups for equality and Tarone's (1975) extensions of Cox's methods for testing for a dose-related trend.

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

For the statistical analysis of tumor incidence data, two different methods of adjusting for intercurrent mortality were employed. Each used the classical methods for combining contingency tables developed by Mantel and Haenszel (1959). Tests of significance included pairwise comparisons of high- and low-dose groups with controls and tests for overall dose-response trends.

The first method of analysis assumed that all tumors of a given type observed in animals dying before the end of the study were "fatal;" i.e., they either directly or indirectly caused the death of the animal. According to this approach, the proportions of tumor-bearing animals in the dosed and control groups were compared at each point in time at which an animal died with a tumor of interest. The denominators of these proportions were the total number of animals at risk in each group. These results, including the data from animals killed at the end of the study, were then combined by the Mantel-Haenszel methods to obtain an overall P-value. This method of adjusting for intercurrent mortality is the life table method of Cox (1972) and of Tarone (1975).

The second method of analysis assumed that all tumors of a given type observed in animals dving before the end of the study were "incidental"; i.e., they were merely observed at autopsy in animals dying of an unrelated cause. According to this approach, the proportions of animals found to have tumors in dosed and control groups were compared in each of five time intervals: 0-52 weeks, 53-78 weeks, 79-92 weeks, week 93 to the week before the terminal kill period, and the terminal kill period. The denominators, of these proportions were the number of animals actually autopsied during the time interval. The individual time interval comparisons were then combined by the previously described methods to obtain a single overall result. (See Peto et al., 1980, for the computational details of both methods.)

In addition to these tests, one other set of statistical analyses was used and reported in the tables analyzing primary tumors: the Fisher's exact test for pairwise comparisons and the Cochran-Armitage linear trend test for doseresponse trends (Armitage, 1971; Gart et al., 1979). These tests were based on the overall proportion of tumor-bearing animals. All reported P values are one-sided.

For studies in which there is little effect of compound administration on survival, the results of the three alternative analyses will generally be similar. When differing results are obtained by the three methods, the final interpretation of the data will depend on the extent to which the tumor under consideration is regarded as being the cause of death.

	Single-Dose Study	14-Day Study	13-Week Study	2-Year Study (a)
Experimental Design				
Size of Test Groups	5 males and 5 females of each species.	5 males and 5 females of each species.	10 males and 10 females of each species.	50 males and 50 females of each species.
Doses	Rats and mice: 0, 10, 50, 100, 500, or 1,000 mg/kg body weight pentachloro- ethane in corn oil; Vehicle control groups: Lou Ana brand corn oil (Lou Ana Co., Opelousas, LA)	Same as single- dose study	Rats: 5, 10, 50, 125, or 250 mg/kg body weight penta- chloroethane in corn oil; Mice: 5, 10, 50, 100, or 500 mg/kg body weight pen- tachloroethane in corn oil; Vehicle control groups: Lou Ana brand corn oil (Lou Ana Co., Opelousas, LA)	Rats: 75 or 150 mg/kg body weight pentachloro- ethane in corn oil; Mice: 250 or 500 mg/kg body weight pentachloroethane in corn oil; Vehicle control groups: Lou Ana brand corn oil (Lou Ana Co., Opelousas, LA)
Duration of Dosing	Single dose	Daily for 14 days	5 days per week for 13 weeks	5 days per week for 103 weeks (b)
Type and Frequency of Observation	Observed daily for mortality	Same as single- dose study	Observed twice daily for mortality and morbidity	Observed three times daily for mortality and morbidity
Necropsy and Histo- logical Examination	Necropsies per- formed on all animals;	Necropsies per- formed on all animals; lung, liver, and spleen examined histo- logically	Necropsies performed on all animals. Histo- pathologic examina- tion performed on all control animals and all animals of the highest dose group of each sex and species	Necropsies and histological examina- tion of tissues per- formed on all animals
Animals and Animal Maintenance				
Species	F344/N rats; B6C3F ₁ mice	F344 rats/N; B6C3F ₁ mice	F344/N rats; B6C3F ₁ mice	F344/N rats; B6C3F ₁ mice
Animal Source	Frederick Cancer Research Center (Frederick, MD)	Same as single- dose study	Same as single- dose study	Charles River Breeding Laboratories (Portage, Ml)
Time Held Before Start of Test	7 days	Rats: 9 days; Mice: 26 days	14 days	22 days
Age When Placed On Study	Rats: 4-5 weeks old	Rats: 4-5 weeks old; Mice: 7-8 weeks old	5-6 weeks old	Rats: 7 weeks; Mice: 8 weeks
Method of Animal Distribution	Assigned to cages according to a table of random numbers and then to dosed and control groups accord- ing to a second table of random numbers	Distributed to cages by weight so that each dose group had ani- mals of approximately the same average weight	Same as single- dose study	Same as single- dose study

TABLE 2. EXPERIMENTAL DESIGN AND MATERIALS AND METHODS

	Single-Dose Study	14-Day Study	13-Week Study	2-Year Study (a)
Feed	Wayne [®] Lab Blox (Allied Mills, Chicago, IL); available <i>ad libitum</i>	Same as single- dose study	Same as single- dose study	Same as single- dose study
Bedding	Absorb-Dri® heat-treated hardwood chips (Lab Products, Inc., Garfield, NJ)	Same as single- dose study	Same as single- dose study	Same as single- dose study
Water	Tap water in glass bottles; stainless steel sipper tubes		Same as single- dose study	Tap water; automatic watering system (Edstrom Industries, Inc., Waterford, WI)
Cages	Rats: steel wire mesh (Hoeltge Co., Cincinnati, OH); Mice: Polypropylene (Lab Products, Inc., Garfield, NJ)	Same as single- dose study	Same as single- dose study	Rats and mice: Poly- carbonate (Lab Products, Inc., Garfield, NJ)
Animals per Cage	Rats: one Mice: five	Same as single- dose study	Same as single- dose study	Rats and mice: five
Cage Filters	Cage Filters Polyester filter bonnet (Lab Products, Inc., Garfield, NJ)		Same as single- dose study	Bonded spun fiberglass (Lab Products, Inc., Garfield, NJ)
Animal Room 23° ±4°C; Environment humidity 40%-70%; 12 changes of room air per hour		Same as single- dose study	Same as single- dose study	Same as single- dose study
Chemical/Vehicle Mixture				
Preparation	Pentachloroethane was added to corn oil on a weight per volume basis	Same as single- dose study	Same as single- dose study	High-dose mixture prepared by adding pentachloroethane to corn oil on a weight per volume basis; low- dose mixture prepared by diluting high-dose mixture with corn oil
Maximum Storage Time		7 days	7 days	7 days
Storage Conditions		4°C	4°C	4°C

TABLE 2. EXPERIMENTAL DESIGN AND MATERIALS AND METHODS (Continued)

(a) Within each study, control and dosed animals were of the same strain, sex, and age range and from the same source and shipment. All animals shared the same room, and all aspects of animal care and maintenance were similar.

(b) All high-dose male mice were dead by week 41; all high-dose female mice were dead by week 74.

Pentachloroethane

III. RESULTS

RATS

SHORT-TERM STUDIES

Single-Dose Study Fourteen-Day Study Thirteen-Week Study

TWO-YEAR STUDIES

Body Weights and Clinical Signs Survival Pathology and Statistical Analyses of Results

MICE

SHORT-TERM STUDIES

Single-Dose Study Fourteen-Day Study Thirteen-Week Study

TWO-YEAR STUDIES

Body Weights and Clinical Signs Survival Pathology and Statistical Analyses of Results

SHORT-TERM STUDIES

Single-Dose Study

The gavage doses employed in this experiment (0, 10, 50, 100, 500, and 1,000 mg/ kg) were well tolerated by both sexes. Weight gains were comparable for control and dosed groups. A single control female rat died on day 1 as a result of a gavage error. No effects that could be attributed to pentachloroethane administration were observed at scheduled necropsy.

The apparent lack of acute toxicity observed in this experiment resulted in the selection of the same dosage levels for the 14-day study.

Fourteen-Day Study

The survival and body weight changes observed in this experiment are summarized in Table 3. Clear signs of toxicity were noted, with all animals dying that received the 1,000 mg/kg/day dose and 3/5 animals of each sex dying that received the 500 mg/kg/day dose. Three animals of each sex died within 24 hours of receiving the first dose of 1,000 mg/kg, while the remaining high-dose rats died on days 3 and 4. Deaths among the 500 mg/kg/day dosage groups occurred between days 4 and 10. No gross or microscopic lesions were detected in the animals that died on test. The only clinical sign observed was lethargy among the rats receiving the 500 and 1,000 mg/kg/day doses. Body weight gains by animals receiving up to 100 mg/kg/day were similar to those of control rats. The two male and two female animals that survived the 500 mg/kg/day dosage regimen gained weight throughout the study; however, the males gained 29% less and the females gained 40% less than their respective controls. Final body weight differences for the 500 mg/kg/day dose groups were 10% (males) and 15% (females) less than those of controls. No compound-related gross changes were noted at necropsy, and microscopic lesions were not detected in liver, lungs, or spleen.

The findings of this study resulted in the selection of dosage levels of 5, 10, 50, 125, and 250 mg/kg/day for the 13-week study.

Thirteen-Week Study

The survival and body weight gains for rats receiving a daily administration of pentachloroethane 5 days per week for 13 weeks are summarized in Table 4. All animals survived the 13-week administration period, and no compoundrelated gross or histopathologic effects were observed. Body weight gains for rats receiving doses as high as 125 mg/ kg/ day were considered to be within normal limits. Body weight gains for animals receiving the 250 mg/ kg/ day dose were slightly depressed (10% for males and 17% for females); final body weights were 5% (males) and 9% (females) less than those of controls.

The body weight gain decrements noted at the 250 mg/kg/day dose and previous experience with chlorinated ethanes dictated the selection of doses of 75 and 150 mg/kg/day for the 2-year study in rats.

		м	Body Weight Relative to		
Dose Survival (mg/kg) (a)	Initial	Final	Change (b)	Controls (c) (Percent)	
MALE					
0	5/5	81.0 ±1.76	147.4 ±6.55	$+66.4 \pm 6.16$	_
10	5/5	82.2 ±2.37	156.4 ±3.59	+74.2 ±4.83	+ 6
50	5/5	83.2 ±2.48	153.4 ±5.99	+70.2 ±7.25	+ 4
100	5/5	83.2 ±2.22	147.8 ±4.98	+64.6 ±3.99	0
500	2/5(d)	85.5 ±4.50	132.5 ±1.50	+47.0 ±6.00	-10
1,000	0/5 <i>(e)</i>	(1)	Ø	Ю	
FEMALE					
0	5/5	75.8 ±1.66	112.6 ±2.16	$+36.8 \pm 0.86$	_
10	5/5	76.0 ±1.30	114.8 ±3.25	+38.8 ±3.99	+ 2
50	5/5	75.6 ±1.50	116.0 ±2.10	+40.4 ±1.57	+ 3
100	5/5	76.6 ±1.72	115.6 ±1.69	+39.0 ±1.05	+ 3
500	2/5(g)	74.5 ±0.50	96.5 ±2.50	$+22.0 \pm 2.00$	-15
1,000	0/5(h)	<i>(</i>)	(f)	0)	

TABLE 3. SURVIVAL AND MEAN BODY WEIGHTS OF RATS ADMINISTERED PENTACHLOROETHANE BY GAVAGE FOR 14 DAYS

(a) Number surviving/number initially in the group. All calculations are based on those animals surviving to the end of the study.

(b) Mean weight change of the survivors of the group \pm standard error of the mean.

(c) Weight of the dosed survivors relative to the survivors of the controls =

<u>Weight (Dosed Group)</u> — Weight (Control Group) Weight (Control Group) × 100

(d) One animal died on day 4 and two on day 8.

(e) Three animals died on day 1 and two animals on day 4.

(f) No data are presented due to the 100% mortality in this group.

(g) Two animals died on day 9 and one on day 10.

(h) Three animals died on day 1 and two on day 3.

TABLE 4. SURVIVAL AND MEAN BODY WEIGHTS OF RATS ADMINISTERED PENTACHLOROETHANE BY GAVAGE FOR 13 WEEKS

		Mean Body Weights (grams)			Body Weight Relative to
Dose (mg/kg)	Survival (a)	Initial	Final	Change	Controls (b) (Percent)
MALE		<u></u>			
0	10/10	105	322	+217	
5	10/10	110	321	+211	0
10	10/10	111	315	+204	-2
50	10/10	118	330	+212	+ 3
125	10/10	106	305	+199	-5
250	10/10	110	306	+196	-5
FEMALE					
0	10/10	103	196	+ 93	· <u> </u>
5	10/10	101	194	+ 93	-1
10	10/10	98	192	+ 94	-2
50	10/10	95	188	+ 93	4
125	10/10	93	178	+ 85	-9
250	10/10	102	179	+ 77	9

(a) Number surviving/number per group.

(b) Weight relative to controls =

Weight (Dosed Group) - Weight (Control Group) × 100

Weight (Control Group)

TWO-YEAR STUDIES

Body Weights and Clinical Signs

The growth curves for rats administered pentachloroethane 5 days per week for 103 weeks by gavage are shown in Figure 1. Male rats administered either the 75 or 150 mg/kg/ day dose maintained normal body weights through the first 76 weeks of the study. After this time, body weights of the dosed males tended to be slightly less than those of control animals. A dose-response relationship for this minimal effect was not evident. Dosed females maintained normal body weights through the initial 42 weeks of the study. Although the females continued to gain weight throughout the remainder of the study, a decrement (ranging from 8% to 21% as compared with controls) was evident during the final 62 weeks. Final mean body weights were less than those of controls for dosed male rats (4%-5%) and for dosed female rats (8%-12%) (Appendix I, Table I1). As was the case among males, a doseresponse relationship was not evident for this effect.



Figure 1. Growth Curves for Rats Administered Pentachloroethane by Gavage

Pentachloroethane

Survival

Estimates of the probabilities of survival of male and female rats administered pentachloroethane, together with those of the control groups, are shown by the Kaplan and Meier curves in Figure 2. One high-dose male, one low-dose female, and two high-dose females were killed as a result of gavage errors during weeks 93, 103, 98, and 101, respectively. The administration of pentachloroethane had a dose-related adverse effect on the survival of rats. Among males, 82% of the controls, 66% of the low-dose, and 52% of the high-dose animals survived to the end of the study. In females, 76% of the controls, 72% of the low-dose, and 50% of the high-dose animals survived to the end of the study. The survival of both high-dose males and females was significantly less than that of their respective controls (P < 0.01 and P < 0.05, respectively). There was also evidence (P=0.058) of reduced survival in the low-dose male group, but no differences were observed between the survival of low-dose females and controls.



Figure 2. Survival Curves for Rats Administered Pentachloroethane by Gavage

Pathology and Statistical Analyses of Results

Histopathologic findings on neoplasms in rats are summarized in Appendix A, Tables Al and A2; the survival and tumor status for each individual animal in the male and female rat studies appear in Appendix A, Tables A3 and A4. Findings on nonneoplastic lesions are summarized in Appendix C, Tables C1 and C2.

Tables 5 and 6 contain the statistical analyses of those primary tumors that occurred with an incidence of at least 5% in one of the three groups.

Statistical analyses of the incidences of primary tumors in rats revealed primarily negative trends. Among females, a negative trend was observed in the incidence of pituitary adenomas (P=0.016, incidental tumor test). Among males, negative trends were observed in the incidences of subcutaneous tissue fibromas (P<0.05) and pituitary adenomas (primarily chromophobe) (P<0.01).

Kidney: Chronic, diffuse inflammation of the kidney (nephropathy) was observed at a significant (P < 0.001) and dose-related, increased incidence in male rats (control, 4/50, 8%; low-

dose, 14/49, 29%; high-dose, 33/50, 66%). The nephropathy was characterized by prominent interstitial fibrosis, interstitial accumulation of mononuclear inflammatory cells, and severe tubular dilation in the pars recta (inner cortex), with some dilated tubules containing giant cells and casts. The lesions could be distinguished from those seen in "aging" nephropathy (Barthold, 1979) where interstitial fibrosis and tubular dilation are not as severe as in this toxic lesion. In addition, the giant cells within tubules are not a feature of aging nephropathy. Glomerular hyalinization was also observed. Mineralization of the renal papilla was seen at a significantly increased incidence (P < 0.001) in dosed male rats: controls, 4/50 (8%); low-dose, 29/49 (59%); high-dose, 29/50 (58%).[See on page 8 Note Added Subsequent to Peer Review.]

Lung: There was a significant (P=0.009) doserelated trend in the incidence of interstitial inflammation of the lung in male rats (control, 5/50, 10%; low-dose, 10/49, 20%; high-dose, 15/50, 30%). However, a higher incidence of acute/chronic inflammation was observed in controls than in the high-dose group (control, 27/50, 54%; low-dose, 31/49, 63%; high-dose, 19/50, 38%), and thus, an association between inflammation of the lung and pentachloroethane cannot be established.

	Vehicle Control	Low Dose	High Dose
Subcutaneous Tissue: Fibroma			
Tumor Rates			
Overall (b)	5/50(10)	0/49(0)	0/50(0)
Adjusted (c)	11.5%	0.0%	0.0%
Terminal (d)	3/41(7)	0/33(0)	0/26(0)
Statistical Tests (e)			
Life Table	P = 0.018N	$\mathbf{P} = 0.059 \mathbf{N}$	P=0.093N
Incidental Tumor Test	P = 0.021 N	P = 0.109N	P = 0.077 N
Cochran-Armitage Trend,	D 0.00(N	D 0 0201	D - 0 0303
Fisher Exact Tests	P = 0.006 N	P = 0.030N	P = 0.028 N
Hematopoietic System: Leukemia			
Tumor Rates			
Overall (b)	2/50(4)	3/49(6)	3/50(6)
Adjusted (c)	4.7%	8.7%	10.0%
Terminal (d)	1/41(2)	2/33(6)	1/26(4)
Statistical Tests (e)	-		
Life Table	P=0.221	P = 0.405	P=0.299
Incidental Tumor Test	P = 0.243	P = 0.224	P=0.337
Cochran-Armitage Trend,	D 0 410	D 0 100	D 0 500
Fisher Exact Tests	P=0.412	P=0.490	P=0.500
*Kidney: Tubular-Cell Adenoma			
Tumor Rates			
Overall (a)	0/50(0%)	1/49(2%)	4/50(8%)
Adjusted (b)	0.0%	3.0%	13.6%
Terminal (c)	0/41(0%)	1/33(3%)	2/26(8%)
Statistical Tests (d)			
Life Table	P=0.009	P=0.457	P=0.024
Incidental Tumor Test	P=0.020	P=0.457	P=0.055
Cochran-Armitage Trend,			
Fisher Exact Tests	P=0.026	P=0.495	P=0.059
*Kidney: Tubular-Cell Adenoma or A	Adenocarcinoma (f)		
Tumor Rates	V		
Overall (a)	1/50(2)%	2/49(4%)	4/50(8%)
Adjusted (b)	2.4%	5.8%	13.6%
Terminal (c)	1/41(2%)	1/33(3%)	2/26(8%)
Statistical Tests (d)		, , , , , , ,	
Life Table	P=0.047	P=0.426	P=0.077
Incidental Tumor Test	P=0.083	P=0.306	P=0.145
Cochran-Armitage Trend,			
Fisher Exact Tests	P=0.119	P=0.492	P=0.181
Pituitary: Chromophobe Adenoma			
Fumor Rates			
Overall (b)	20/48(42)	10/46(22)	2/46(7)
Adjusted (c)	45.0%		3/46(7)
Terminal (d)	45.0% 16/40(40)	31.9% 9/30(30)	11.6% 2/23(9)
Statistical Tests (e)	10/ 1 0(1 0)	97 JU(JV)	2/23(7)
Life Table	P = 0.004 N	P = 0.152N	P = 0.007 N
Incidental Tumor Test	P = 0.001 N	P = 0.135N	P = 0.002 N
	- 0.00114	1 - 0,15511	1 - 0.0021
Cochran-Armitage Trend,			

*See on page 8 Note Added Subsequent to Peer Review

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	Vehicle Control	Low Dose	High Dose
Pituitary: All Adenomas		· · ·	
Tumor Rates			
Overall (b)	23/48(48)	13/46(28)	4/46(9)
Adjusted (c)	52.0%	40 .1%	14.0%
Terminal (d)	19/40(48)	11/30(37)	2/23(9)
Statistical Tests (e)	D		
Life Table	P = 0.004 N	P = 0.212N	P=0.005N
Incidental Tumor Test	P<0.001N	P = 0.151N	P<0.001N
Cochran-Armitage Trend, Fisher Exact Tests	P<0.001N	P = 0.040 N	P<0.001N
Adrenal: Pheochromocytoma			
Fumor Rates			
Overall (b)	3/49(6)	1/48(2)	4/50(8)
Adjusted (c)	7.3%	3.1%	12.4%
Terminal (d)	3/41(7)	1/32(3)	1/26(4)
Statistical Tests (e)			
Life Table	P = 0.238	P = 0.397 N	P = 0.288
Incidental Tumor Test	P = 0.441	P = 0.397N	P = 0.608
Cochran-Armitage Trend,			
Fisher Exact Tests	P = 0.422	P = 0.316N	P = 0.511
Thyroid: C-Cell Adenoma			
Tumor Rates			
Overall (b)	6/50(12)	6/45(13)	3/46(7)
Adjusted (c)	14.6%	17.6%	10.6%
Terminal (d)	6/41(15)	4/31(13)	2/25(8)
Statistical Tests (e) Life Table	P=0.485N	P=0.425	P = 0.517N
Incidental Tumor Test	P = 0.348N P = 0.348N	P = 0.423 P = 0.439	P = 0.317 N P = 0.404 N
Cochran-Armitage Trend,	1 -0.5401	F = 0.439	F = 0.404 N
Fisher Exact Tests	P = 0.246N	P=0,543	P = 0.287 N
Pancreatic Islets: Islet-Cell Adenoma		1 01010	1 0120711
Fancreatic Islets: Islet-Cell Adenoma			
Overall (b)	4/48(8)	5/48(10)	0/50(0)
Adjusted (c)	9.5%	14.6%	0.0%
Terminal (d)	3/41(7)	4/33(12)	0/26(0)
Statistical Tests (e)			
Life Table	P = 0.181 N	P =0.372	P = 0.139 N
Incidental Tumor Test	P = 0.155N	P=0.262	P = 0.115 N
Cochran-Armitage Trend,			
Fisher Exact Tests	P = 0.064 N	P = 0.500	P = 0.054 N
Pancreatic Islets: Islet-Cell Adenoma	or Carcinoma		
Fumor Rates	5 40(10)	E 140/100	
Overall (b)	5/48(10)	5/48(10)	1/50(2)
Adjusted (c) Terminal (d)	11.9% 4/41(10)	14.6% 4/33(12)	3.8%
Statistical Tests (e)	7/71(10)	4/33(12)	1/26(4)
Life Table	P=0.337N	P = 0.494	P = 0.240 N
Incidental Tumor Test	P = 0.207 N	P = 0.383	P = 0.211N
Cochran-Armitage Trend,			
Fisher Exact Tests	P = 0.082N	P=0.630	P=0.093N

TABLE 5. ANALYSIS OF PRIMARY TUMORS IN MALE RATS (Continued) (a)

	Vehicle Control	Low Dose	High Dose
Testis: Interstitial-Cell Tumor	<u></u>		
Tumor Rates			
Overall (b)	41/49(84)	34/47(72)	33/49(67)
Adjusted (c)	91.0%	94.4%	94.3%
Terminal (d)	36/40(90)	31/33(94)	24/26(92)
Statistical Tests (e)			
Life Table	P = 0.044	P=0.548	P=0.060
Incidental Tumor Test	P = 0.113	P=0.381	P=0.209
Cochran-Armitage Trend,			
Fisher Exact Tests	P = 0.041 N	P = 0.137N	P=0.049N

TABLE 5. ANALYSIS OF PRIMARY TUMORS IN MALE RATS (Continued) (a)

(a) Dosed groups received doses of 75 or 150 mg/kg of pentachloroethane by gavage.

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

(c) Kaplan-Meier estimated lifetime tumor incidence after adjusting for intercurrent mortality.

(d) Observed tumor incidence at terminal kill.

- (e) Beneath the control incidence are the P-values associated with the trend test. Beneath each dosed group incidence is the P-value corresponding to the pairwise comparison between that dosed group and the controls. The life table analysis regards tumors in animals dying prior to terminal kill as being (directly or indirectly) the cause of death. The incidental tumor test regards these lesions as non-fatal. The Cochran-Armitage and Fisher's exact test compare directly the overall incidence rates. A negative trend is indicated by (N).
- (\mathcal{D}) The incidences of tubular-cell adenomas and adenocarcinomas in male rats were determined by the Pathology Working Group after the preparation of a second set of histopathology slides. This was necessitated by the inadvertent destruction of the original slides.

	Vehicle Control	Low Dose	High Dose
Hematopoietic System: Lymphoma			
Tumor Rates			
Overall (b)	1/49(2)	3/49(6)	1/48(2)
Adjusted (c)	2.4%	7.5%	3.1%
Terminal (d)	0/38(0)	1/36(3)	0/25(0)
Statistical Tests (e)			
Life Table	P = 0.484	P = 0.304	P=0.690
Incidental Tumor Test	P = 0.598N	P = 0.290	P = 0.735N
Cochran-Armitage Trend,		1 0.270	1 01/001
Fisher Exact Tests	P = 0.603	P=0.309	P=0.747
	. 0.000	1 0.507	• •
Hematopoietic System: Leukemia			
Fumor Rates	1 / 40(2)	1 (10 (0)	A (A A A A A A A A A A
Overall (b)	1/49(2)	4/49(8)	2/48(4)
Adjusted (c)	2.6%	9.8%	5.9%
Terminal (d)	1/38(3)	2/36(6)	0/25(0)
Statistical Tests (e)	D 0.075	D 0 455	
Life Table	P=0.275	P = 0.177	P = 0.395
Incidental Tumor Test	P = 0.380	P=0.232	P = 0.516
Cochran-Armitage Trend,			
Fisher Exact Tests	P = 0.397	P = 0.181	P = 0.492
Hematopoietic System: Lymphoma o	r Leukemia		
Fumor Rates			
Overall (b)	2/49(4)	5/49(10)	2/48(4)
Adjusted (c)	5.0%	12.1%	5.9%
Terminal (d)	1/38(3)	2/36(6)	0/25(0)
Statistical Tests (e)			
Life Table	P=0.419	P=0.217	P=0.575
Incidental Tumor Test	P=0.589	P = 0.261	P = 0.671 N
Cochran-Armitage Trend,			
Fisher Exact Tests	P=0.573	P = 0.218	P=0.684
liver: Neoplastic Nodule or Carcino	no		
Sumor Rates	lia		
Overall (b)	1/49(2)	2/19/6)	0 (45(0)
Adjusted (c)	2.6%	3/48(6)	0/45(0)
Terminal (d)	1/38(3)	8.1% 2/35(6)	0.0%
Statistical Tests (e)	1/38(3)	2/35(0)	0/22(0)
Life Table	P = 0.536N	P = 0.287	P = 0.609 N
Incidental Tumor Test	P = 0.488N	P = 0.285	P = 0.609 N
Cochran-Armitage Trend,	1 - 0.40011	1 -0.285	1 -0.00914
Fisher Exact Tests	P=0.405N	P=0.301	P = 0.521 N
	1 0.40514	1 - 0.501	1 -0.02110
Pituitary: Chromophobe Adenoma			
umor Rates			
Overall (b)	23/49(47)	14/46(30)	12/45(27)
Adjusted (c)	53.1%	33.3%	40.4%
Terminal (d)	18/38(47)	8/34(24)	7/24(29)
tatistical Tests (e)			
Life Table	P = 0.204 N	P = 0.104 N	P = 0.288 N
Incidental Tumor Test	P = 0.075 N	P = 0.021 N	P = 0.133 N
Cochran-Armitage Trend,			
Fisher Exact Tests	P = 0.025 N	P = 0.075 N	P = 0.034 N

TABLE 6. ANALYSIS OF PRIMARY TUMORS IN FEMALE RATS (a)

	V ehicle Control	Low Dose	High Dose
Pituitary: All Adenomas			
Tumor Rates			
Overall (b)	27/49(55)	17/46(37)	12/45(27)
Adjusted (c)	59.6%	41.0%	40.4%
Terminal (d)	20/38(53)	11/34(32)	7/24(29)
Statistical Tests (e)			, , , , ,
Life Table	P = 0.080 N	P=0.094N	P = 0.121 N
Incidental Tumor Test	P = 0.016N	P = 0.029 N	P = 0.028 N
Cochran-Armitage Trend,			
Fisher Exact Tests	P = 0.004N	P = 0.058N	P = 0.005 N
Гhyroid: C-Cell Adenoma			
Tumor Rates			
Overall (b)	4/46(9)	3/48(6)	2/45(4)
Adjusted (c)	10.5%	7.8%	8.3%
Terminal (d)	3/35(9)	2/35(6)	2/24(8)
Statistical Tests (e)			
Life Table	P = 0.417N	P = 0.497 N	P = 0.513N
Incidental Tumor Test	P = 0.347N	P = 0.341N	P = 0.455 N
Cochran-Armitage Trend,	D 0 07131	D 0 4001	D (1)
Fisher Exact Tests	P = 0.271N	P = 0.476N	P = 0.349 N
Mammary Gland: Fibroadenoma			
Fumor Rates			
Overall (b)	9/49(18)	8/49(16)	10/48(21)
Adjusted (c)	23.0%	19.6%	34.5%
Terminal (d)	8/38(21)	5/36(14)	7/25(28)
Statistical Tests (e)	D = 0.157	D. A COONT	D 0 150
Life Table	P = 0.156	P = 0.532N	P = 0.170
Incidental Tumor Test	P = 0.242	P = 0.431N	P = 0.238
Cochran-Armitage Trend, Fisher Exact Tests	P=0.429	P = 0.500N	D = 0.490
	F -0.429	F = 0.300N	P = 0.480
Uterus: Endometrial Stromal Polyp			
Tumor Rates			
Overall (b)	7/45(16)	12/48(25)	2/40(5)
Adjusted (c)	17.8%	29.5%	8.0%
Terminal (d) Statistical Tests (e)	6/38(16)	8/36(22)	2/25(8)
Life Table	P=0.297N	P=0.141	P = 0.221 N
Incidental Tumor Test	P = 0.235N	P = 0.141 P = 0.169	P = 0.221 N P = 0.209 N
Cochran-Armitage Trend,	P = 0.2551N	P=0.109	P = 0.209 N
Fisher Exact Tests	P=0.135N	P=0.192	P=0.109N
		1 - 0.172	1 0.1071
Jterus: Endometrial Stromal Polyp o	r Sarcoma		
Sumor Rates Overall (b)	9/45(20)	12/48(25)	2/40(5)
Adjusted (c)	23.0%	29.5%	8.0%
Terminal (d)	8/38(21)	8/36(22)	2/25(8)
Statistical Tests (e)		-//	-/(0)
Life Table	P = 0.158N	P = 0.283	P=0.109N
Incidental Tumor Test	P = 0.114N	P = 0.330	P = 0.102N
Cochran-Armitage Trend,			
Fisher Exact Tests	P=0.053N	P = 0.372	P = 0.039 N

TABLE 6. ANALYSIS OF PRIMARY TUMORS IN FEMALE RATS (Continued) (a)

Pentachloroethane

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TABLE 6. ANALYSIS OF PRIMARY TUMORS IN FEMALE RATS (Continued) (a)

(a) Dosed groups received doses of 75 or 150 mg/kg of pentachloroethane by gavage.

- (b) Number of tumor-bearing animals/number of animals examined at the site (percent).
- (c) Kaplan-Meier estimated lifetime tumor incidence (percent) after adjusting for intercurrent mortality.
- (d) Observed tumor incidence in surviving animals killed at the end of the study.
- (e) Beneath the control incidence are the P-values associated with the trend test. Beneath each dosed group incidence is the P-value corresponding to the pairwise comparison between that dosed group and the controls. The life table analysis regards tumors in animals dying before the end of the study as being (directly or indirectly) the cause of death. The incidental tumor test regards these lesions as nonfatal. The Cochran-Armitage trend and Fisher's exact tests compare directly the overall incidence rates. A negative trend is indicated by (N).
III. RESULTS: MICE-SHORT-TERM STUDIES

SHORT-TERM STUDIES

Single-Dose Study

The gavage doses employed in this experiment (0, 10, 50, 100, 500, or 1,000 mg/kg) were well tolerated by both sexes of mice. All animals survived to the end of the experiment (14 days) and no compound-related effects were observed at necropsy. Since control mice lost weight, weight changes in dosed mice were uninterpretable. The lack of acute toxicity in this experiment resulted in the selection of the same dosage levels for the 14-day study.

Fourteen-Day Study

The survival and body weight changes in mice receiving gavage doses of pentachloroethane for 14 days are summarized in Table 7. A single female mouse in the 1,000 mg/kg/day group

died on day 2 of the experiment and the surviving animals at this dose exhibited a slight weight loss. Females receiving doses from 50 to 500 mg/kg/day exhibited weight gain decrements from 25% to 50%, but these decrements were not dose-related. Pentachloroethane administration did not appear to decrease weight gains in male mice. No compound-related changes were observed at group necropsy, and microscopic lesions were not detected in liver, lungs, or spleen.

Dosage selection for the 13-week study was made on the basis of the one death and marked body weight gain decrements among the female mice receiving the 1,000 mg/kg/day dose. The doses selected were 0, 5, 10, 50, 100, and 500 mg/kg/day for both sexes.

		Me	ean Body Weight (g	rams)	Body Weight Relative to
Dose (mg/kg)	Survival <i>(a)</i>	Initial	Final	Change (b)	Controls (c) (Percent)
MALE					
0	5/5	26.8 ±0.58	27.0 ± 0.71	$+0.2 \pm 1.24$	
- 10	5/5	25.0 ± 0.32	26.2 ± 1.32	$+1.2 \pm 1.07$	-3
50	5/5	26.0 ± 0.84	27.6 ± 0.98	$\pm 1.6 \pm 0.68$	+2
100	5/5	22.8 ± 1.20	26.8 ± 1.11	$+4.0 \pm 2.00$	-1
500	5/5	25.8 ±1.53	26.8 ± 1.39	$+1.0 \pm 0.31$	-1
1,000	5/5	27.4 ±2.11	29.0 ± 0.55	+1.6 ±1.60	+7
FEMALE					
0	5/5	17.8 ±1.16	21.0 ± 0.32	$+3.2 \pm 0.97$	
10	5/5	18.6 ±0.93	21.6 ± 0.51	$+3.0 \pm 1.26$	+3
50	5/5	20.6 ± 0.68	22.2 ± 0.58	$+1.6 \pm 0.24$	+6
100	5/5	19.4 ±0.24	21.8 ± 0.37	$+2.4 \pm 0.24$	+4
500	5/5	19.2 ± 0.37	21.6 ± 0.24	$+2.4 \pm 0.51$	+3
1,000	4/5(d)	19.8 ±0.25	19.5 ±1.55	-0.3 ± 1.60	7

 TABLE 7.
 SURVIVAL AND MEAN BODY WEIGHTS OF MICE ADMINISTERED

 PENTACHLOROETHANE BY GAVAGE FOR 14 DAYS

(a) Number surviving/number initially in the group. All calculations are based on those animals surviving to the end of the study.

(b) Mean weight of the survivors of the group \pm standard error of the mean.

(c) Weight of the dosed survivors relative to the survivors of the controls =

Weight (Dosed Group) - Weight (Control Group) × 100

Weight (Control Group)

(d) Death occurred on day 2.

Thirteen-Week Study

The survival and body weight gains for mice receiving daily gavage doses of pentachloroethane for 13 weeks are summarized in Table 8. All male mice survived the compound administration, and their body weight gains were comparable with those of controls. One female mouse administered the 500 mg/kg/day dose died during week 13, and the mean body weight gain in that group was depressed by 29%, relative to the controls. No compound-related gross or microscopic lesions were detected among the mice in this study. Although one female receiving the 500 mg/kg/day dose died during the final week of the study, the lack of either gross or microscopic signs of toxicity and the variability of effects on body weight appeared to justify the selection of doses of 250 and 500 mg/kg/day for the 2-year study in mice.

		Mean I	Body Weight	ts (grams)	Body Weight Relative to
Dose (mg/kg)	Survival (a)	Initial	Final	Change	Controls (b) (Percent)
MALE					
0	10/10	22	33	+11	_
5	10/10	22	35	+13	+6
10	10/10	22	34	+12	+3
50	10/10	22	33	+11	0
100	10/10	22	33	+11	0
500	10/10	22	33	+11	0
FEMALE					
0	10/10	18	25	+ 7	_
5	10/10	19	25	+ 6	0
10	10/10	18	25	+ 7	0
50	10/10	18	25	. + 7	0
100	10/10	18	24	+ 6	-4
500	9/10(c)	18	23	+ 5	-8

TABLE 8. SURVIVAL AND MEAN BODY WEIGHTS OF MICE ADMINISTERED PENTACHLOROETHANE BY GAVAGE FOR 13 WEEKS

(a) Number surviving/number per group.

(b) Weight relative to controls =

Weight (Dosed Group) - Weight (Control Group) × 100

Weight (Control Group)

(c) Death occurred during week 13.

TWO-YEAR STUDIES

Body Weights and Clinical Signs

The growth curves for mice administered pentachloroethane in the chronic study are shown in Figure 3. Both dosage levels of pentachloroethane significantly depressed body weight gain in both sexes, but the males were affected earlier (Appendix I, Table I2). By week 12, the high-dose males had stopped growing appreciably, and by week 52, the body weights of the low-dose males were lower than those of controls. Between weeks 42 and 104, the lowdose males' mean body weight decreased by approximately 30%, while that of the controls remained essentially constant.

Mean body weights of high- and low-dose female mice were lower than that of controls after weeks 26 and 72, respectively. Between weeks 26 and 74 (when the last high-dose female died) the mean body weight of the high-dose females remained relatively constant. After weeks 75-80 body weights of low-dose females were lower than those of controls (>10%).



Figure 3. Growth Curves for Mice Administered Pentachloroethane by Gavage

Survival

Estimates of the probabilities of survival for male and female mice administered pentachloroethane, together with those of the control groups, are shown by the Kaplan and Meier curves in Figure 4.

The administration of pentachloroethane had a significant (P < 0.01) and dose-related adverse effect on the survival of both male and female mice. Among the high-dose males, the initial death was during week 18, and by week 41, 42/50 (84%) of the high-dose males had died. The 8 remaining high-dose males were killed during week 41, and 25 control males were killed during week 44 to provide control histopathological samples. Of the remaining control male mice, 19/25 (76%) survived to the end of the study. The initial death among the low-dose males occurred during week 31, and 22/50 (44%) of the low-dose males survived to the end of the study.

High-dose female mice survived the daily administration of pentachloroethane slightly longer than did the high-dose males. The initial high-dose female death occurred during week 38, and all of the animals were dead by week 74. Among the low-dose females, the initial death did not occur until week 53, but only 9/50 (18%)of the animals survived to the end of the study. Among the vehicle control female mice, 38/50(76%) survived to the end of the study. One female control was accidentally killed during week 98.



Figure 4. Survival Curves for Mice Administered Pentachloroethane by Gavage

Pathology and Statistical Analyses of Results

Histopathologic findings on neoplasms occurring in mice are summarized in Tables 9 and 10 and Appendix B, Tables B1 and B2; Tables B3 and B4 give the survival and tumor status of each individual animal in the male and female mouse studies. Findings on nonneoplastic lesions are summarized in Appendix D, Tables D1 and D2.

Tables 9 and 10 contain the statistical analyses of those primary tumors that occurred with an incidence of at least 5% in one of the three groups.

The markedly reduced survival observed in the high-dose male mice and the killing of 25 male controls at week 44 precluded the use of the usual statistical methods for these data. Observed tumor incidences in male mice were compared at 0-52 weeks, 53-103 weeks, and at terminal kill. The individual time interval comparisons were then combined by Mantel-Haenszel methods (1959) to obtain an overall result. The analyses of primary tumors in female mice were carried out by the procedures previously described. However, because there was little overlapping survival in the high-dose female and control groups, it was not feasible to compare these two groups by the incidental tumor test.

Liver: The incidence of hepatocellular carcinomas in dosed female mice was significantly increased (P < 0.001) relative to controls (controls, 1/46, 2%; low-dose, 28/42, 67%; highdose, 13/45, 29%). A significantly increased (P < 0.001) incidence of hepatocellular carcinoma was also observed in low-dose male mice (controls, 4/48, 8%, low-dose, 26/44, 59%; highdose, 7/45, 16%). Early mortality of high-dose male mice precluded an evaluation of their lifetime incidence of hepatocellular carcinoma. There was a significant (P < 0.05) increase in incidence over that observed among 25 controls killed at week 44. Carcinomas had areas of trabecular formations. These tumors metastasized to the lung in one low-dose female, two low-dose males, and one male control. There was also a significant (P < 0.001) dose-related increase in hepatocellular adenomas observed in female mice (controls, 2/46, 4%; low-dose, 8/42, 19%; high-dose, 19/45, 42%). Fatty metamorphosis occurred in increased incidences in dosed mice, but this effect was minimal and may reflect variability in nutritional status rather than a direct effect of the administration of pentachloroethane.

	V ehicle Control	Low Dose	High Dose
Lung: Alveolar/Bronchiolar Aden	oma	<u></u>	
Tumor Rates (b)			
Overall	3/47(6)	4/41(10)	0/44(0)
0-52 weeks	2/24(8)	0/1(0)	0/44(0)
53-103 weeks	0/4 (0)	1/16(6)	0/0
terminal kill	1/19(5)	3/24(12)	0/0
Statistical Significance (c)	P = 0.255N	P=0.359	P=0.118N
Lung: Alveolar/Bronchiolar Carci Tumor Rates (b)	noma		
Overall	3/47(6)	1/41(2)	0/44(0)
0-52 weeks	0/24(0)	0/1(0)	0/44(0)
53-103 weeks	1/4(25)	0/16(0)	0/0
terminal kill	2/19(11)	1/24(4)	0/0
Statistical Significance (c)	P = 0.147N	P = 0.147N	P = 1.000
Lung: Alveolar/Bronchiolar Aden Tumor Rates (b)	oma or Carcinoma		
Overall	6/47(13)	5/41(12)	0/44(0)
0-52 weeks	2/24(8)	0/1(0)	0/44(0)
53-103 weeks	1/4(25)	1/16(6)	0/0
terminal kill	3/19(16)	4/24(17)	0/0
Statistical Significance (c)	P = 0.085N	P = 0.475N	P=0.118N
Circulatory System: Hemangioma Tumor Rates (b)			
Overall	3/48(6)	4/44(9)	0/45(0)
0-52 weeks	0/25(0)	0/2(0)	0/45(0)
53-103 weeks	0/4(0)	2/18(11)	0/0
terminal kill	3/19(16)	2/24(8)	0/0
Statistical Significance (c)	P = 0.525N	P = 0.525N	P = 1.000
Circulatory System: Hemangioma Tumor Rates (b)	or Hemangiosarcoma		
Overall	3/48(6)	5/44(11)	0/45(0)
0-52 weeks	0/25(0)	0/2(0)	0/45(0)
53-103 weeks	0/4(0)	2/18(11)	0/0
terminal kill	3/19(16)	3/24(12)	0/0
Statistical Significance (c)	P = 0.650	P=0.650	P = 1.000
Liver: Adenoma			
Tumor Rates (b)			
Overall	10/48(21)	4/44(9)	7/45(16)
0-52 weeks	5/25(20)	0/2(0)	7/45(16)
53-103 weeks	0/4(0)	$\frac{2}{18(11)}$	0/0
terminal kill	5/19(26) D=0.225N	2/24(8)	0/0 P=0.444N
Statistical Significance (c)	P = 0.235N	P = 0.162N	P = 0.444 N
iver: Carcinoma			
Fumor Rates (b)			
Overall	4/48(8)	26/44(59)	7/45(16)
0-52 weeks	0/25(0)	1/2(50)	7/45(16)
53-103 weeks	0/4(0)	9/18(50)	0/0
terminal kill	4/19(21)	16/24(67)	0/0
Statistical Significance (c)	P<0.001	P<0.001	P=0.049

TABLE 9. ANALYSIS OF PRIMARY TUMORS IN MALE MICE (a)

	Vehicle Control	Low Dose	High Dose
Liver: Adenoma or Carcinoma			
Tumor Rates (b)			
Overall	14/48(29)	30/44(68)	14/45(31)
0-52 weeks	5/25(20)	1/2(50)	14/45(31)
53-103 weeks	0/4(0)	11/18(61)	0/0
terminal kill	9/19(47)	18/24(75)	0/0
Statistical Significance (c)	P=0.026	P=0.005	P=0.237
Stomach: Squamous Cell Papilloma			
Tumor Rates (b)			
Overall	0/46(0)	3/37(8)	0/40(0)
0-52 weeks	0/25(0)	0/1(0)	0/40(0)
53-103 weeks	0/4(0)	1/12(8)	0/0
terminal kill	0/19(0)	2/24(8)	0/0
Statistical Significance (c)	P = 0.249	P = 0.249	P = 1.000

TABLE 9. ANALYSIS OF PRIMARY TUMORS IN MALE MICE (a)

(a) Dosed groups received doses of 250 or 500 mg/kg of pentachloroethane by gavage.

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

(c) Beneath the control incidence are the P-values associated with the trend test. Beneath each dosed group incidence is the P-value corresponding to the pairwise comparison between that dosed group and the controls. A negative trend is indicated by N.

	Vehicle Control	Low Dose	High Dose
Lung: Adenoma			<u> </u>
Tumor Rates			
Overall (b)	3/46(7)	0/41(0)	3/41(7)
Adjusted (c)	8.1%	0.0%	25.0%
Terminal (d)	3/37(8)	0/9(0)	0/0
Statistical Tests (e)			
Life Table	P=0.015	P=0.449N	P=0.004
Incidental Tumor Test	P = 0.493	P = 0.449 N	(f)
Cochran-Armitage Trend,			
Fisher Exact Tests	P = 0.554	P=0.143N	P=0.605
Lung: Alveolar/Bronchiolar Adenon	na or Carcinoma		
Tumor Rates			
Overall (b)	4/46(9)	0/41(0)	3/41(7)
Adjusted (c)	10.8%	0.0%	25.0%
Terminal (d)	4/37(11)	0/9(0)	0/0
Statistical Tests (e)			0,0
Life Table	P=0.024	P=0.356N	P = 0.004
Incidental Tumor Test	P = 0.556	P=0.356N	<i>(f)</i>
Cochran-Armitage Trend,			07
Fisher Exact Tests	P = 0.458N	P=0.073N	P = 0.565 N
Hematopoietic System: Lymphoma			
Fumor Rates			
Overall (b)	9/48(19)	2/43(5)	3/45(7)
Adjusted (c)	20.8%	12.2%	25.0%
Terminal (d)	4/38(11)	0/9(0)	0/0
Statistical Tests (e)	4/56(11)	0/9(0)	0/0
Life Table	P=0.063	P=0.415N	P=0.003
Incidental Tumor Test	P = 0.091N	P = 0.007N	(f)
Cochran-Armitage Trend,	1 = 0.09114	1 -0.00714	07
Fisher Exact Tests	P = 0.382N	P=0.038N	P=0.075N
	1 = 0.5021	1 -0.05011	1 - 0.0751
Liver: Adenoma			
Fumor Rates	214((4))	8 (42(10)	10 46(40)
Overall (b)	2/46(4)	8/42(19)	19/45(42)
Adjusted (c) Terminal (d)	5.4%	44.6%	60.9%
Statistical Tests (e)	2/37(5)	3/9(33)	0/0
Life Table	P<0.001	P<0.001	P<0.001
Incidental Tumor Test	P = 0.060	P = 0.023	
Cochran-Armitage Trend,	F = 0.000	F =0.023	0)
Fisher Exact Tests	P<0.001	P = 0.032	P<0.001
	1 < 0.001	1 -0:032	r <0.001
Liver: Carcinoma			
Fumor Rates	1 (46(2))	28/42(67)	12 (45(20))
Overall (b) Adjusted (c)	1/46(2) 2.7%	28/42(67) 84.6%	13/45(29) 67.7%
Terminal (d)			
Statistical Tests (e)	1/37(3)	5/9(56)	0/0
Life Table	P<0.001	P<0.001	P<0.001
Incidental Tumor Test	P = 0.005	P < 0.001 P < 0.001	
inergentar i annor i est	1 -0.000	1 20.001	(f)
Cochran-Armitage Trend,			

TABLE 10. ANALYSIS OF PRIMARY TUMORS IN FEMALE MICE (a)

	V ehicle Control	Low Dose	High Dose
Liver: Adenoma or Carcinoma			
Tumor Rates			
Overall (b)	3/46(7)	36/42(86)	32/45(71)
Adjusted (c)	8.1%	96.8%	93.6%
Terminal (d)	3/37(8)	8/9(89)	0/0
Statistical Tests (e)			
Life Table	P<0.001	P<0.001	P<0.001
Incidental Tumor Test Cochran-Armitage Trend,	P<0.001	P<0.001	(f)
Fisher Exact Tests	P<0.001	P<0.001	P<0.001
Pituitary: Adenoma Tumor Rates			
Overall (b)	5/35(14)	3/29(10)	1/32(3)
Adjusted (c)	19.2%	57.1%	10.0%
Terminal (d)	5/26(19)	2/4(50)	0/0
Statistical Tests (e)			,
Life Table	P = 0.009	P = 0.065	P=0.257
Incidental Tumor Test	P = 0.115	P = 0.148	<i>(f)</i>
Cochran-Armitage Trend,			<i>•</i>
Fisher Exact Tests	P = 0.089N	P = 0.466N	P = 0.120N

TABLE 10. ANALYSIS OF PRIMARY TUMORS IN FEMALE MICE (Continued) (a)

(a) Dosed groups received doses of 250 or 500 mg/kg of pentachloroethane by gavage.

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

(c) Kaplan-Meier estimated lifetime tumor incidence (percent) after adjusting for intercurrent mortality.

- (d) Observed tumor incidence in surviving animals killed at the end of the study.
- (e) Beneath the control incidence are the P-values associated with the trend test. Beneath each dosed group incidence is the P-value corresponding to the pairwise comparison between that dosed group and the controls. The life table analysis regards tumors in animals dying before the end of the study as being (directly or indirectly) the cause of death. The incidental tumor test regards these lesions as nonfatal. The Cochran-Armitage trend and Fisher's exact tests compare directly the overall incidence rates. A negative trend is indicated by (N).
- (f) The configuration of survival and time of observation of tumor precludes the use of this statistic.

IV. DISCUSSION AND CONCLUSIONS

Despite a relatively cautious approach to the selection of dosage levels for the 2-year study, both rats and mice exhibited reduced survival due to compound-related toxicity. Neither gross observations nor histopathological evaluations revealed a specific cause or causes of decreased survival. The compound-related body weight decrements, especially for mice, and early deaths among dosed animals are evidence of a cumulative toxic effect of pentachloroethane in these species. A cumulative effect is consistent with pentachloroethane metabolism and excretion data presented by Yllner (1971). After a subcutaneous dose of 1,100-1,800 mg/kg, NMRI mice excreted only 55%, 80%, and 86% of the dose (as metabolites and parent compound) in 24, 48, and 72 hours, respectively. Further, quantifiable amounts of tri- and tetrachloroethylene, as well as parent compound, were excreted as long as 48 hours after treatment.

The results of the present study are similar to those of earlier bioassays of chloroethanes and chloroethylenes in that the earlier studies also showed the effects of compound administration on survival (Weisburger, 1977). The short-chain halogenated aliphatic hydrocarbon class of chemicals presents major problems in the selection of doses. In future studies with related chemicals, detailed metabolism and excretion experiments should be considered, with thought also given to the use of more than a control and two dosage levels in the bioassay. Such an approach would reduce the risk of generating equivocal data.

The major lesion produced in rats by the administration of pentachloroethane was a chronic, diffuse inflammation of the kidneys in males (control, 4/50, 8%; low-dose, 14/49, 29%; high-dose, 33/50, 66%). This lesion was distinguishable from the nephropathy normally seen in aging F344/N rats, and some of the dosed males had both types of change. The occurrence of this nonneoplastic effect in females was 0/44, 0/47, and 4/45. Mineralization of the renal papilla in dosed males was considered to be secondary to the lesion induced by compound administration rather than a direct effect. [See on page 8 Note Added Subsequent to Peer Review.]

Interstitial-cell tumors of the testis in male rats showed an increasing trend (P < 0.05) by the life table test, but a decreasing trend (P < 0.05) by the Cochran-Armitage test (Table 5). Since most F344/N male rats eventually develop these tumors, the life table analysis reflects primarily the significantly reduced overall survival observed in high-dose male rats. In contrast, the Cochran-Armitage test reflects the decreased tumor incidence observed in the dosed groups. Since this lesion is not generally regarded as fatal and the Cochran-Armitage test ignores survival differences, the most meaningful analysis is the incidental tumor test, which indicates no significant (P > 0.1) effect due to the administration of pentachloroethane.

Although the survival of the dosed mice was compromised by the dosage levels employed, the hepatocarcinogenicity of pentachloroethane was clearly established. The times to the first and second hepatocellular carcinomas in the highdose male group were only 35 and 39 weeks, respectively. By week 41, when the 8 surviving high-dose males were killed, 7/45 (16%) of the animals in this group had the lesion. None of the 25 control males sacrificed at 44 weeks were found to have hepatocellular carcinoma. This difference in tumor incidence was dose related (P < 0.001), and the incidence was increased in the low-dose (P < 0.001) and high-dose (P < 0.049) groups compared with concurrent controls. Early mortality of high-dose mice precluded an evaluation of their lifetime incidence of hepatocellular tumors. The conclusion of hepatocarcinogenicity in mice is strengthened by the significantly (P < 0.001) increased incidences of hepatocellular carcinoma in the low-dose male group and in both dosed groups of females. Furthermore, female mice had significantly (P < 0.001) elevated incidences of hepatocellular adenomas.

The early killing of 25 male control mice did not affect the overall incidence of hepatocellular carcinoma in the control group relative to past control experience. Table 11 summarizes the incidences of both hepatocellular adenomas and carcinomas among animals in the present study, previous control groups from the same laboratory, and historical controls from all laboratories. Although the male control incidence of adenomas in the present study was somewhat higher than in previous control groups, the incidences of hepatocellular carcinoma among the control groups from the present study were similar to those of historical controls. Further, the incidence of hepatocellular carcinoma observed in the low-dose males and both groups of dosed females far exceeded the historical control rates of this tumor, despite the reduced survival. The absence of a dose-related increase for the incidences of hepatocellular carcinoma in either males or females is likely to be a reflection of the shorter survival times of the high-dose animals.

	Pe	entachloroetha	ne	Same Lab	Same Laboratory		
	Vehicle	Low	Low High		Range		All Laboratories in Bioassay
Tumor Type	Control	Dose	Dose	Incidence	Low	High	Program
Adenoma							
Male	5/23(22%)(a)	4/44 (9%)	7/ 45 (16%)<i>(b)</i>	33/240 (14%)	8%	21%	99/904 (11.0%)
Female	2/46(4%)	8/42 (19%)	19/45 (42%) <i>(c)</i>	15/334 (4%)	3%	8%	38/996 (3.8%)
Carcinoma							
Male	4/23(17%)(a)	26/44 (59%)	7/45 (16%) <i>(b)</i>	48/240 (20%)	8%	32%	187/904 (20.7%)
Female	1/46(2%)	28/42 (67%)	13/45 (29%) <i>(c)</i>	11/334 (3%)	0%	6%	30/996 (3.0%)
Adenoma or Carcinoma							
Male	9/23(39%)(a)	30/44 (68%)	14/45 (31%) <i>(b)</i>	80/240 (33%)	25%	42%	276/904 (30.5%)
Female	3/46(7%)	36/42 (86%)	32/45 (71%)(c)	26/334 (8%)	4%	10%	67/996 (6.7%)

TABLE 11. INCIDENCE OF LIVER TUMORS IN MICE IN THE PRESENT STUDY AND IN VEHICLE
CONTROL GROUPS IN NCI/NTP BIOASSAYS OF 104 WEEKS

(a) Does not include 25 male mice killed during week 44. When these animals are included, the incidences are: adenoma 10/48 (21%), carcinoma 4/48 (8%), adenoma or carcinoma 14/48 (29%).

(b) All males were dead by week 41.

(c) All females were dead by week 74.

Life table analysis indicated a significant (P < 0.05) positive trend for lung adenomas and pituitary adenomas in female mice. However, since it was unlikely that these tumors were the cause of death and the alternative analyses revealed little evidence of an effect, these changes were not attributed to the administration of pentachloroethane.

Pentachloroethane has been reported to be metabolized to trichloroethylene (2% to 16% of the dose) and tetrachloroethylene (3% to 9% of the dose) in NMRI mice (Yllner, 1971). Both of these chloroethylenes have been shown to cause hepatocellular carcinoma in $B6C3F_1$ mice, but not in Osborne-Mendel rats (NCI, 1977; 1976).* If a similar metabolic pattern is assumed between NMRI and $B6C3F_1$ mice, the low- and high-dose animals in the present study could have been indirectly exposed to 40-80 and 23-46 mg/kg day of trichloroethylene and tetrachloroethylene, respectively. Therefore, it is possible that the carcinogenic action of pentachloroethane in mice is mediated through the biotransformation of the parent chemical to these active chloroethylenes. However, sufficient data do not exist to allow an adequate assessment of this possibility. The lowest doses of trichloroethylene (1,169 mg/ kg/ day in males and 869 mg/ kg/ day in females) and tetrachloroethylene (536 mg/ kg/ day in males and 386 mg/ kg/ day in females) tested earlier were associated with a high incidence of hepatocellular carcinoma. Further, these treatments with the chloroethylenes reduced the survival of test animals, an effect that could result in an underestimation of carcinogenic potency.

Hexachloroethane, the major contaminant (4.2%) in the pentachloroethane sample used for the chronic study, has also been shown to induce hepatocellular carcinoma in mice but not rats (NCI, 1978a). The low- and high-dose mice in the present study were exposed to doses of hexachloroethane of 10.5 and 21 mg/ kg/ day, respectively. In the earlier study, the lowest dose of

^{*}Although in the earlier study on trichloroethylene (NCI, 1977) small amounts of epichlorohydrin (0.09%) and 1,2-epoxybutane (0.19%) were present in the test material, a more recent study

⁽NTP 1983) has confirmed the hepatocarcinogenicity of epichlorohydrin-free trichloroethylene in male and female $B6C3F_1$ mice.

hexachloroethane (590 mg/kg/day) produced significant increases in hepatocellular carcinoma in both sexes of mice. Although it is impossible to assess adequately the potential impact of this contaminant on the outcome of the present study, it seems unlikely that the relatively low dose of hexachloroethane could have produced the high incidence of hepatocellular carcinoma seen in this study. However, an additive or potentiating interaction between pentachloroethane and hexachloroethane and the chloroethylene metabolites of the parent compound cannot be dismissed as a potential mechanism of carcinogenesis.

Weisburger (1977) summarized the results of a series of carcinogenesis bioassays of chlorohydrocarbons. The similarities between the effects of pentachloroethane and the previously tested chloroethylenes, chloroethanes, carbon tetrachloride, and chloroform are striking. In general, each of these chemicals induced a high incidence of hepatocellular carcinoma in mice, and had little or no carcinogenic effect in Osborne-Mendel rats. The same or similar mechanisms of action, as yet to be defined, seem likely for these agents.

The NTP mutagenicity test results were negative for S. typhimurium (TA 98, 100, 1535, 1537) with and without exogenous metabolic activation (NTP unpublished results). Mutagenicity testing of chlorohydrocarbons using Salmonella typhimurium tester strains generally yields negative results (Weisburger and Williams, 1980). This observation has lead Weisburger and Williams (1978) to suggest that the induction of hepatocellular carcinoma in mice by the chlorohydrocarbons may be mediated through a promoting action. The nature of the initiator remains to be elucidated, but it could be a genetically-mediated susceptibility. This is a possible hypothesis when one considers that the control incidence of hepatocellular carcinoma is greater in B6C3F₁ mice (187/904, 20.7% in males and 30/996, 3.0% in females) than it is in either Osborne-Mendel (0/270 in males and 1/270, 0.37% in females) or F344/N (7/992, 0.7% in males; 1/946, 0.1% in females) rats.

The results of this study show that pentachloroethane, like other chlorohydrocarbons tested earlier, induces hepatocellular carcinoma in both male and female $B6C3F_1$ mice. While the absence of a similar effect in F344/N rats appears to be due to a species difference in sensitivity, the decreased survival of treated rats must also be considered as a possible cause for the absence of a carcinogenic effect in this species.

Conclusions: Under the conditions of this bioassay, technical grade pentachloroethane containing 4.2% hexachloroethane (a known carcinogen in mice) was not carcinogenic in F344/N rats. The decreased survival of dosed rats might have reduced the sensitivity for a carcinogenic response in this species. Pentachloroethane was nephrotoxic to male rats. Technical grade pentachloroethane was carcinogenic for $B6C3F_1$ mice, causing hepatocellular carcinomas in males and females, and adenomas in females.

V. REFERENCES

V. REFERENCES

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Pentachloroethane

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APPENDIX A

SUMMARY OF THE INCIDENCE OF NEOPLASMS IN RATS ADMINISTERED PENTACHLOROETHANE BY GAVAGE

TABLE A1.

SUMMARY OF THE INCIDENCE OF NEOPLASMS IN MALE RATS ADMINISTERED PENTACHLOROETHANE BY GAVAGE

	VEHICLE Control	LOW DOSE	HIGH DOSE
ANIMALS INITIALLY IN STUDY Animals necropsied Animals examined histopathologically	50 50 50	50 49 49	50 50 50
INTEGUMENTARY SYSTEM			
*SKIN Squamdus cell carcinoma	(50) 1 (2%)	(49)	(50)
*SUBCUT TISSUE Keratoacanthoma Sarcoma, Nos Fibroma Fibrosarcoma	(50) 1 (2%) 1 (2%) 5 (10%) 1 (2%)	(49)	(50)
RESPIRATORY SYSTEM			
#LUNG SQUAMOUS CELL CARCINOMA Alveolar/bronchiolar Adenoma Alveolar/bronchiolar carcinoma	(50) 1 (2%) 1 (2%) 1 (2%)	(49) 2 (4%)	(50)
HEMATOPOIETIC SYSTEM			
*MULTIPLE ORGANS Malignant Lymphoma, nos Leukemia,nos Lymphocytic Leukemia	(50) 1 (2%) 2 (4%)	(49) 1 (2%) 1 (2%)	(50) 1 (2%) 2 (4%) 1 (2%)
#SPLEEN Sarcoma, nos	(50)	(48) 1 (2%)	(50)
*LYMPH NODE Malignant Lymphoma, Nos	(46)	(40)	(46) 1 (2%)
#LIVER LEUKEMIA,NOS	(50)	(48)	(50)

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

	VEHICLE Control	LOW DOSE	HIGH DOSE
CIRCULATORY SYSTEM			
*SKIN Hemangiopericytoma, Nos		(49)	1 (2%)
DIGESTIVE SYSTEM			
#SALIVARY GLAND FIBROSARCOMA	(49)	(47)	(49) 1 (2%)
#LIVER	(50)	(48)	(50)
BILE DUCT CARCINOMA Neoplastic Nodule Hepatocellular Carcinoma	2 (4%)	1 (2%)	1 (2%)
#HEPATIC CAPSULE MESOTHELIOMA, NOS	(50) 1 (2%)	(48)	(50)
#STOMACH PAPILLOMATOSIS Squamous cell carcinoma	(46) 1 (2%)	(43) 1 (2%)	(42)
URINARY SYSTEM			
T#KIDNEY	(50)	(49)	(50)
CARCINOMA,NOS TUBULAR-CELL ADENOMA TUBULAR-CELL ADENOCARCINOMA	1 (2%)	1 (2%)	4 (8%
ENDOCRINE SYSTEM			
#PITUITARY Adenoma, Nos Chromophobe Adenoma	(48) 3 (6%) 20 (42%)	(46) 3 (7%) 10 (22%)	(46) 1 (2% 3 (7%
#ADRENAL	(49)	(48)	(50)
ADENOMA, NOS Pheochromocytoma	3 (6%)	1 (2%) 1 (2%)	4 (8%
#THYROID ADENOMA, NOS	(50)	(45)	(46)

TABLE A1 MALE BATS: NEOPLASMS (CONTINUED)

NUMBER OF ANIMALS WITH TISSUE EXAMINED MICROSCOPICALLY * NUMBER OF ANIMALS NECROPSIED † SEE PAGE 8, NOTE ADDED SUBSEQUENT TO PEER REVIEW

	VEHICLE Control		HIGH DOSE
FOLLICULAR-CELL CARCINOMA C-CELL ADENOMA	1 (2%) 6 (12%)	6 (13%)	3 (7%)
<pre>#PANCREATIC ISLETS ISLET-CELL ADENOMA ISLET-CELL CARCINOMA</pre>	1 (2%)	(48) 5 (10%)	1 (2%)
REPRODUCTIVE SYSTEM			
*MAMMARY GLAND Fibroma Lipoma Fibroadenoma	(50) 2 (4%) 1 (2%)	(49) 1 (2%) 1 (2%) 1 (2%)	(50)
*PREPUTIAL GLAND Adenocarcinoma, Nos	(50)	(49) 1 (2%)	(50)
#TESTIS INTERSTITIAL-CELL TUMOR Seminoma/Dysgerminoma	1 (2%)	(47) 34 (72%)	
NERVOUS SYSTEM			
#BRAIN Glioma, Nos	(50) 1 (2%)	(47)	(49)
#MEDULLA OBLONGATA NEUROMA	(50) 1 (2%)	(47)	(49)
SPECIAL SENSE ORGANS	•		
*ZYMBAL'S GLAND Carcinoma,Nos	(50)	(49) 1 (2%)	(50)
MUSCULOSKELETAL SYSTEM			
NONE			
BODY CAVITIES			
*ABDOMINAL CAVITY LIPOMA	(50)	(49)	(50) <u>1 (2%)</u>

TABLE A1. MALE RATS: NEOPLASMS (CONTINUED)

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

	VEHICLE Control		HIGH DOS
MESOTHELIOMA, NOS		*****	2 (4%
*PERITONEUM MESOTHELIOMA, NOS	(50) 1 (2%)	(49) 1 (2%)	(50)
ALL OTHER SYSTEMS			
NONE			
ANIMAL DISPOSITION SUMMARY			
ANIMALS INITIALLY IN STUDY NATURAL DEATHƏ	50 6	50 15	50 16
MORIBUND SACRIFICE Scheduled sacrifice	3	2	7
DOSING ACCIDENT	41	33	26
ACCIDENTALLY KILLED, NDA ACCIDENTALLY KILLED, NOS			1
ANIMAL MISSING ANIMAL MISSEXED			
OTHER CASES			
D INCLUDES AUTOLYZED ANIMALS			
TUMOR SUMMARY			
TOTAL ANIMALS WITH PRIMARY TUMORS*	48 106	39 77	36 62
TOTAL ANIMALS WITH BENIGN TUMORS	46	38	36
TOTAL BENIGN TUMORS	88	67	50
TOTAL ANIMALS WITH MALIGNANT TUMORS TOTAL MALIGNANT TUMORS	11 16	8 8	5 8
TOTAL ANIMALS WITH SECONDARY TUMORS# Total secondary tumors			
TOTAL ANIMALS WITH TUMORS UNCERTAIN- Benign or malignant		2	4
TOTAL UNCERTAIN TUMORS	2 2	2 2	٦4
TOTAL ANIMALS WITH TUMORS UNCERTAIN- Primary or metastatic Total uncertain tumors			
<pre> PRIMARY TUMORS: ALL TUMORS EXCEPT SE SECONDARY TUMORS: METASTATIC TUMORS </pre>			MACENT ORCAN

TABLE A1, MALE RATS: NEOPLASMS (CONTINUED)

TABLE A2.

SUMMARY OF THE INCIDENCE OF NEOPLASMS IN FEMALE RATS ADMINISTERED PENTACHLOROETHANE BY GAVAGE

	VEHICLE Control	LOW DOSE	HIGH DOSE
ANIMALS INITIALLY IN STUDY Animals necropsied Animals examined histopathologically	49	50 49 49	50 48 48
NTEGUMENTARY SYSTEM			
*SUBCUT TISSUE FIBROMA FIBROSARCOMA	(49) 1 (2%)	(49)	(48)
ESPIRATORY SYSTEM			
<pre>#LUNG ADENOCARCINOMA, NOS, METASTATIC BILE DUCT CARCINOMA, METASTATIC ALVEOLAR/BRONCHIOLAR ADENOMA ALVEOLAR/BRONCHIOLAR CARCINOMA</pre>	1 (2%)	(49)	1 (2%)
EMATOPOIETIC SYSTEM			
*MULTIPLE ORGANS Malignant Lymphoma, nos Leukemia,nos Lymphocytic Leukemia	(49) 1 (2%)	(49) 3 (6%) 3 (6%)	(48) 1 (2%) 1 (2%) 1 (2%)
#LIVER LYMPHOCYTIC LEUKEMIA	(49) 1 (2%)	(48) 1 (2%)	(45)
IRCULATORY SYSTEM			
NONE			
DIGESTIVE SYSTEM			
#LIVER BILE DUCT CARCINOMA	(49)	(48)	(45)

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

· · · · · · · · · · · · · · · · · · ·	VEHICLE Control	LOW DOSE	HIGH DOSE
NEOPLASTIC NODULE HEPATOCELLULAR CARCINOMA		2 (4%) 1 (2%)	
URINARY SYSTEM			
#KIDNEY LIPOMA	(44)	1 (2%)	(45)
ENDOCRINE SYSTEM			
#PITUITARY	(49) 3 (6%)	(46) 3 (7%)	(45)
ADENOMA, NOS Chromophobe Adenoma Basophil Adenoma	23 (47%) 1 (2%)	14 (30%)	12 (27%)
#ADRENAL	(48)	(49)	(46)
ADENOMA, NOS Pheochromocytoma	1 (2%) 2 (4%)	1 (2%)	
#ADRENAL MEDULLA Ganglioneuroma	(48) 1 (2%)	(49)	(46)
#THYROID Follicular-cell Adenoma	(46)	(48)	(45) 1 (2%)
FOLLICULAR-CELL CARCINOMA FOLLICULAR-CELL CARCINOMA C-CELL ADENOMA PAPILLARY CYSTADENOMA, NOS	4 (9%) 1 (2%)	3 (6%)	1 (2%)
REPRODUCTIVE SYSTEM			
*MAMMARY GLAND Adenocarcinoma, Nos	(49) 2 (4%)	(49) 1 (2%)	(48) 1 (2%)
FIBROMA FIBROMA	9 (18%)	2 (4%) 8 (16%)	10 (21%)
*CLITORAL GLAND	(49)	(49)	(48)
ADENOCARCINOMA, NOS	1 (2%)		
#UTERUS Adenoma, nos Adenocarcinoma, nos	(45)	(48) 2 (4%)	(40) . 1 (3%)
FIBROSARCOMA		2 (74)	1 (3%)

TABLE A2. FEMALE RATS: NEOPLASMS (CONTINUED)

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

	VEHICLE Control	LOW DOSE	HIGH DOSE
ENDOMETRIAL STROMAL POLYP Endometrial s∢romal sarcoma	7 (16%) 2 (4%)	12 (25%)	2 (5%)
#OVARY	(47)	(48)	(45)
NERVOUS SYSTEM			
#BRAIN GLIOMA, INVASIVE	(42)	(46) 1 (2%)	(46)
SPECIAL SENSE ORGANS None			
MUSCULOSKELETAL SYSTEM			
BODY CAVITIES			
FIBROSARCOMA	(49)	(49)	(48) 1 (2%)
ALL OTHER SYSTEMS			
<pre>*MULTIPLE ORGANS ADENOCARCINOMA, NOS, METASTATIC BILE DUCT CARCINOMA, INVASIVE</pre>	(49)	(49) 1 (2%)	(48)
ANIMAL DISPOSITION SUMMARY			
ANIMALS INITIALLY IN STUDY NATURAL DEATHƏ MORIBUND SACRIFICE	50 7 5	50 6 7	50 21 2
SCHEDULED SACRIFICE ACCIDENTALLY KILLED TERMINAL SACRIFICE ANIMAL MISSING	38	1 36	2 25
N INCLUDES AUTOLYZED ANIMALS			

TABLE A2. FEMALE RATS: NEOPLASMS (CONTINUED)

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

	VEHICLE Control	LOW DOSE	HIGH DOSE
TUMOR SUMMARY			
TOTAL ANIMALS WITH PRIMARY TUMORS* Total primary tumors	37 63	36 59	26 36
TOTAL ANIMALS WITH BENIGN TUMORS Total benign tumors	33 53	30 45	2 1 2 9
TOTAL ANIMALS WITH MALIGNANT TUMORS Total malignant tumors	9 10	9 12	5 7
TOTAL ANIMALS WITH SECONDARY TUMORS# Total secondary tumors	1 2	2 2	1
TOTAL ANIMALS WITH TUMORS UNCERTAIN- Benign or malignant Total uncertain tumors		22	
TOTAL ANIMALS WITH TUMORS UNCERTAIN- PRIMARY OR METASTATIC TOTAL UNCERTAIN TUMORS			
PRIMARY TUMORS: ALL TUMORS EXCEPT SEC SECONDARY TUMORS: METASTATIC TUMORS O			JACENT ORGAN

TABLE A2. FEMALE RATS: NEOPLASMS (CONTINUED)

TABLE A3.

INDIVIDUAL ANIMAL TUMOR PATHOLOGY OF MALE RATS IN THE 2-YEAR STUDY OF PENTACHLOROETHANE

AN IMAL NUMBER	0	0	0	0	0	0	0	0	0	0	01	0	0	01	01			0	0	í 0	0	1 0) 0		
	11	ž	03	04	0 5	0	07	0	9	1	1	1	1	1	1.5	1	1	1	1		2	22	23	024	
WEEKS ON Study	0	1 0 2	1	0	0	ó	0	t 0	0	0	9	0	0	0	0	0	0	1	0	1	0	0	0	1 0 4	
INTEGUMENTARY SYSTEM		2		_4		_	4		- 4	-21		_ 4 [_41		_4.1	_31	41	_*J					-		<u>.</u>
SKIN Squamdus cell carcinoma	L.	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	• +	+	+	+	+	+	_
SUBCUTANEOUS TISSUE Keratoacanthoma Sarcoma, NOS Fibroma Fibrosarcoma	+	+	+ x	+	•	+	+	+	+	٠	+	+	+	+	+	+ x	+ ××	+	+ X	+	+ X	+	٠	+	
RESPIRATORY SYSTEM	-																								
LUNGS AND BRONCHI Squamous Cell Carcinoma Alveolar/Bronchiolar Adenoma Alveolar/Bronchiolar Carcinoma	+	+	+	+	+	+ ×	+	+	+	+	+	•	+	+	+	+	+	+	+	+	+	+ X	+	+	
TRACHEA	+	+	÷	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	
HEMATOPOIETIC SYSTEM	_			_																				_	
BONE MARROW	· +	+	+	+	+	+	+	+	+	+	+	+	<u>+</u>	+	+	+	+	+	+	+	+	+	+		_
SPLEEN	+	ŧ	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	<u>+</u>	+	+	+	+	-
LYMPH NODES	+	+_	+	+	*	+	+	+	.+	+	-	+	+	+	+	+	+	+	+	+	-	+	+_	+	
THYMUS	-	-		-	-	+	-	-		-	-	-	-	_	-	-	-		-	-		-	-	_	
CIRCULATORY SYSTEM	1.	+									+	+	+	+	+	+	÷	+	÷	+	+	÷	1	+	
HEART DIGESTIVE SYSTEM		+	+	*		÷	•	<u> </u>	*	+	+		-	*	*	-	*		•	-	-	•	-		
SALIVARY GLAND	1.	÷	÷	÷	÷	÷	÷	+	+	•	÷	÷	÷	+	÷	÷	+	÷	÷	+	+	÷	+	+	
LIVER HEPATOCELLULAR CARCINOMA MESOTHELIOMA, NOS	+	+	+	+	+	+	+	+	+	* ×	+	+	+	+	+	+ x	+	+	* ×	+	+	+	+	+	-
BILE DUCT	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	-
GALLBLADDER & COMMON BILE DUCT	N	N.	<u>N</u>	N	N	N	N	N	N	N	N	N	N	N	N	<u>N</u>	Ν_	N	N.	N	N	N	Ν.	<u>N</u>	-
PANCREAS	+	+	+	+	+	+	+	ŧ.	+	-	+	+	+	+	+	+	+	+	+	+	•	+	+	+	-
ESOPHAGUS	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	±	-
STOMACH Squamdus cell carcinoma	+	-	+	+	+	+	+	+	+	+	+	+	+	+	+	-	+	+	+	+	+	+	+	+	
SMALL INTESTINE	+	-	+	+	+	÷	÷	+	+	-	+	+	+	÷	+	+	+	÷	+	+	÷	+	+	+	
LARGE INTESTINE	+	-	+	+	+	+	+	+	+	_	+	+	+	+	+	+	+	+	+	÷	+	+	+	+	
IRINARY SYSTEM																									-
KIDNEY TUBULAR-CELL ADENOCARCINOMA	+	+	+	+	+	+	+	+	•	+	+	+	+	•	+	•	+	+	+	+	•	+	+	+	-
URINARY BLADDER	+	_	<u>+</u>	+	+	+	+	*	.+ 	+	+	+	+	+	÷	+	+	+	+	+	+	+	+	+	
NDÖCRINE SYSTEM																									
PITUITARY Adenoma, nos Chromophobe adenoma	×	+ _X	+ 	+	+	×	+ 	+	* 	+	+	+ 	* <u>×</u>	<u>*</u>	×	+	• 	+	+	+	• 		×	* _X	-
ADRENAL Pheochromocytoma	+	-	+	+	+	+	+	+	+	+	+	+	+	+	÷	+	+	+	•	+	+	+	+	-	-
THYROID Follicular-cell carcinoma c-cell adenoma	+	+	+	+	+	+	+	+	+	+	+	+ 	+	+	+	+	+	+	+	+	×	+	* x	+	
PARATHYROID	<u> </u>	+	<u> </u>	+	<u>+</u>	-	+	+		+	+_	-	+	+	+	+	+	+	+_	+	+	+	+	+	_
PANCREATIC ISLETS ISLET-CELL ADENOMA ISLET-CELL CARCINOMA	+	•	+	+	+	×	+	•	+	-	+	+	•	+	+	×	+	+	+	×	+	+	+	+	
EPRODUCTIVE SYSTEM Mammary gland Fibroma Fibroadenoma	N	N	N	H	N	N	N	N	N	N	+ × ×	N	N	N	N	N	N	H	+	+	+	N	٠	N	
TESTIS Interstitial-cell tumor Seminoma/dysgerminoma	×	+	* ×	*	×.	×	×	×	×	+	×	*	×	* ×	×	×	×	×	*	*	×	×	+	* ×	
PROSTATE	+	-	÷	÷	+	+	+	+	+	÷	+	÷	+	+	+	+	+	+	+	+	+	+	٠	÷	
ERVOUS SYSTEM																									-
BRAIN Glioma, nos Neuroma	+	+	+	+	•	٠	٠	+	+	+	•	+	+	+	• ×	+	+	+	+	•	+	•	+	+	
ODY CAVITIES Peritoneum mesothelioma, nos	N	н	N	N	N	N	N	N	×	н	н	N	N	N	N	N	N	N	N	н	N	N	N	N	
LL OTHER SYSTEMS																					_				-
MULTIPLE ORGANS NOS Malignant Lymphomá, Nos Leukemia,Nos	N .	N	N	N	N	N	N	H	N	N X X	N	N .	N	м	н	N	N	м	N	N	N	N	н	N	_

VEHICLE CONTROL

X: TUMOR INCIDENCE N: NECROPSY, NO AUTOLYSIS, NO MICROSCOPIC EXAMINATION

A: AUTOLYSIS M: Animal Missing B: No Necropsy Performed

AN IMAL NUMBER	2	2	0 2 8	2	0 3 0	3	0 3 2	0 3 3	0 3 4	0 3 5	0 3 6	0 3 7	0 3 8	0 3 9	0 4 0	4	4	0 4 3	4	0 4 5	0 4 6	0 4 7	4	0 4 9	0 5 0	TOTAL
WEEKS ON Study	1	0	1	1	9	0	0	0	0	0	0	0	1	0	0		0	1	1	0	0	1	1	9	0	TISSUES
INTEGUMENTARY SYSTEM	- 41	41	41	_4]	.91	91	4	41	91	0	91	91	91	01	.91	4	41	91	- 9	9	<u>4</u>]	4	41	11	-9	
SKIN Squamous cell carcinoma	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	•	+	+	+	+	+	+	+	<u>+</u>	50× 1
SUBCUTANEOUS TISSUE Keratdacanthoma Sarcoma, nos Fibroma Fibroma	+	+	+	٠	+	٠	+ x	+	+	+	•	•	* x	+	+	÷	+	+	+	+	+	+	+	•	+	50× 1 5 1
RESPIRATORY SYSTEM																									-	
LUNGS AND BRONCHI Squamdus cell carcinoma Alveolar/bronchiolar adenoma Alveolar/bronchiolar carcinoma	+	+	+	+	+	+	+	+	+	•	+	+	+	+	+	٠	+	+	+	+	•	+	+	+	* ×	50 1 1
TRACHEA	+	+	+	+	÷	÷	+	+	+	+	+	÷	+	+	÷	+	+	÷	+	÷	÷	+	+	+	+	50
HEMATOPOIETIC SYSTEM	+-																									
BONE MARROW	+	+	+	+_	+	+	÷	+	+	+	+	+	+	+	+	+	+	+	_+	+	+	+	+	+	+	49
SPLEEN	+	+	+	+	+	+	+	+	+	+	+	+	+	.+	<u>+</u>	+	÷	+	+	+	+	+	+	÷	+	50
LYMPH NODES	+	+	+	+	+	+	+	+	+	+	+	+	÷	+	+	+	+	+	+	-	+	+	+	-	+	46
THYMUS	-	~	-	-	-	-	-	-	-	-	-	-	-	-	+	-	-	-	-	-	-	-	-	-	-	2
CIRCULATORY SYSTEM	+																								+	
HEART	+	+	÷	÷	÷	+	+	÷	+	+	÷	+	+	+	+	+	÷	÷	+	+	÷	÷	+	÷	+	50
DIGESTIVE SYSTEM	+						-		_																+	
SALIVARY GLAND	L +	+	÷	+	÷	+	+	+	+	+	+	+	+	+	÷	+	+	+	<u>+</u>	-	÷	+	÷	+	+	49
LIVER Hepatocellular carcinoma Mesothelioma, Nos	+	+	+	+	٠	÷	+	+	٠	+	٠	+	+	÷	٠	•	+	+	+	+	+	+	÷	+	+	50 2 1
BILE DUCT	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	50
GALLBLADDER & COMMON BILE DUCT	N	N	N.	N	+	N	N	N	Ν.	N	N	Ν	N	N	N_	N	Ν.	N	N	N.	N	Ν	N	N	N	50×
PANCREAS	+	+	+	+	+	+	+.	+	+	+	+	+	+	-	+	+	÷	+	+	+_	+	÷	+	+	+	48
ESOPHAGUS	+	+	+	+	÷	+	+	+	+	+	+	÷	+	+	+	-	+	+	÷	+	+	+	+	+	+	49
STOMACH Squamous cell carcinoma	+	+	+	+	+	+	+	+	+	-	+	+	*	-	+	+	+	+	+	+	+	+	+	+	+	46
SMALL INTESTINE	+	+	+	+	+	+	+	+	+	-	+	+	+	-	+	+	+	+	+	+	ŧ.	+	+	+	+	46
LARGE INTESTINE	+	·+	+	+	+	+	÷	+	+	-	+	+	+	-	+	+	+	+	÷	+	+	+	+	÷	+	46
URINARY SYSTEM																		-	-	-				-		
KIDNEY Tubular-cell Adenocarcinoma	+	* ×	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	50
URINARY BLADDER	+	+	+	+	-	+	+	+	+	+	+	+	+	-	+	+	+	+	+	+	+	+	+	+	+	47
ENDOCRINE SYSTEM																							_			
PITUITARY Adenoma, nos Chromophobe Adenoma	+ X	+ X	+ x	+ .x.	+ x	+ 	+	+	+	+	+ x	+	+ X	-	+ X	+	-	+ X	+	+	+	+	+	+ x.	+	48 3 20
ADRENAL Pheochromocytoma	+	* ×	+	* ×	+	+	+	+	+	+	+	+	+	+	* ×	+	+	+	+	+	+	+	+	+	+	49 3
THYROID Follicular-cell carcinoma	+	÷	*	+	+	+	+	+	+	+	÷	+	+	÷	+	+	+	+	+	+ ×	+	+	+ x	+	+	50 1 6
C-CELL ADENOMA Parathyroid	1.	•	<u></u> +	+	+	+	+	+	+	+	-	+	+	+	+	+	+	-	+	-	+	+	-	+	-	39
PANCREATIC ISLETS ISLET-CELL ADENOMA ISLET-CELL CARCINOMA	+	+ X	* *	+	+	+	+	+	+	+	÷	+	+	-	+	+	+	+	+	+	+	+	+	+	+	48 4 1
REPRODUCTIVE SYSTEM	+																_									
MAMMARY GLAND FIBROMA FIBROADENOMA	N	N	N	N	N	+	N	N	N	+	H	N	N	н	N	N	H	N	N	N	+	N	N	* ×	N	50× 2 1
TESTIS Interstitial-cell tumor Seminoma/dysgerminoma	-	* ×	* ×	+	* ×	* ×	* ×	* ×	+	+	+	* ×	*	+	* ×	* ×	* ×	* ×	* *	* ×	* ×	* ×	* ×	×	×	49 41 1
PROSTATE	+	+	÷	+	+	+	+	+	+	+	+	-	+	-	+	+	+	+	+	+	+	+	+	+	+	47
NERVOUS SYSTEM	+			_																			_			
BRAIN GLIDMA, NOS NEUROMA	+	+	+	+	+	+	٠	+	+	* x	+	+	٠	٠	+	+	+	+	+	+	÷	+	+	+	+	50 1 1
BODY CAVITIES											-		-													
PERITONEUM Mesothelioma, Nos	N	N	м	N	н	N	N	N	N	N	н	N	N	H	N	้พ	N	N	н	N	н	N	N	н	N	50× 1
ALL OTHER SYSTEMS MULTIPLE ORGANS NOS						N							N	N			N	N	N	N	N		N	N	N	50×

TABLE A3. MALE RATS: TUMOR PATHOLOGY (CONTINUED) VEHICLE CONTROL

* ANIMALS NECROPSIED

+: TISSUE EXAMINED MICROSCOPICALLY -: REQUIRED TISSUE NOT EXAMINED MICROSCOPICALLY X: Tumor incidence N: Necropsy, No Autolysis, No Microscopic examination

: NO TISSUE INFORMATION SUBMITTED C: NECROPSY, NO HISTOLOGY DUE TO PROTOCOL A: Autolysis M: Animal Missing B: No NECROPSY PERFORMED

TABLE A3.

INDIVIDUAL ANIMAL TUMOR PATHOLOGY OF MALE RATS IN THE 2-YEAR STUDY OF PENTACHLOROETHANE

LOW DOSE

UTGEST NN UTGEST NN <t< th=""><th>ANIMAL NUMBER</th><th>0</th><th>0 2</th><th>0 0 3</th><th>004</th><th>0</th><th>006</th><th>0</th><th>0 0 8</th><th>0</th><th>0 1 0</th><th>0 1 1</th><th>12</th><th>0 1 3</th><th>0 1 4</th><th>0 1 5</th><th>0 1 6</th><th>7</th><th>0 1 8</th><th>9</th><th>2</th><th>2</th><th>22</th><th>23</th><th>24</th><th></th></t<>	ANIMAL NUMBER	0	0 2	0 0 3	004	0	006	0	0 0 8	0	0 1 0	0 1 1	12	0 1 3	0 1 4	0 1 5	0 1 6	7	0 1 8	9	2	2	22	23	24	
LUNCA MUD BENEMEL ALE ADEMONA TRACINEA MENATOPOLETIC SYSTEM DEME MARKON SPLEENA SPLEENA SPLEENA NOS L'UTAN HODES L'UTAN				0	8			0	0		8		2	3											0	
All'Declar, Radical Delar, A demona -	RESPIRATORY SYSTEM	- 8	8	. 41	8	- 41	_11	. 91	31	. 41	_6	91	21	91	91	91	-91	. 91	4	- 91	<u>. 91</u>	-91		<u></u>	. 9]	
TRACHEA + </td <td>LUNGS AND BRONCHI Alveolar/bronchidlar Adenoma</td> <td>+</td> <td>+</td> <td>+</td> <td>+</td> <td>+</td> <td>+</td> <td>+</td> <td>+</td> <td>+</td> <td>۸'</td> <td>+</td> <td>+</td> <td>+</td> <td>*</td> <td>+</td> <td></td>	LUNGS AND BRONCHI Alveolar/bronchidlar Adenoma	+	+	+	+	+	+	+	+	+	۸'	+	+	+	*	+	+	+	+	+	+	+	+	+	+	
EPHATOPDIETIC 3YSTEM BOHE MARROW SAECMA, NOS L'MPH NOSES L'MPH NOSES THYNUS SALLIVARY SYSTEM HEART SALLIVARY GLAND L'NPH NOSES SALLIVARY GLAND L'NPH NOSES SALLIVARY GLAND L'NPH NOSE SALLIVARY GLAND L'NPH NOSE SALLIVARY GLAND L'NPH NOSE SALLIVARY GLAND L'NPH NOSE MARCAN SALLIVARY GLAND L'NPH NOSE L'NPH NOSE SALLIVARY GLAND L'NPH NOSE L'NPH NOSE SALLIVARY GLAND L'NPH NOSE SALLIVARY GLAND L'NPH NOSE SALLIVARY GLAND L'NPH NN N N N N N N N N N N N N N N N N N		+	+	+	+	+	+	+	+	+	A	+	+	+	+	+	+	+	+	+	+	+	+	+	+	
BONE MARROW - <td< td=""><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td>-</td></td<>																										-
SPEEDMA, MOS + + + + + + + + + + + + + + + + + + +		+	÷	-	+	+	+	+	+	+	A		+	+	+	+	+	+	+	+	+	+	+	+	+	_
LYMPH NODES	SPLEEN	+	+	+	+	+	+	+	+	+	A	÷	-	+	+	÷	+	÷	÷	+	+	+	+	÷	+	
Similar - </td <td></td> <td>+</td> <td></td> <td></td> <td></td> <td>-<u>-</u></td> <td></td> <td></td> <td><u> </u></td> <td></td> <td></td> <td><u> </u></td> <td></td> <td></td> <td></td> <td>-</td> <td>·</td> <td>_</td> <td>_</td> <td>-</td> <td></td> <td></td> <td></td> <td></td> <td>+</td> <td></td>		+				- <u>-</u>			<u> </u>			<u> </u>				-	·	_	_	-					+	
ITRCULATORY SYSTEM		++	+	+	-	+	<u>+</u>	<u> </u>	<u> </u>	<u>.</u>	<u>.</u>	<u>.</u>	<u>+</u>	- <u>+</u>		<u>.</u>	<u> </u>	-	-	<u> </u>	<u> </u>	-	- <u>-</u>	<u> </u>	-	
HEART + + + + + + + + + + + + + + + + + + +		+	_		•		÷							<u> </u>							_				_	_
SALINGS + </td <td></td> <td>1.</td> <td>÷</td> <td>÷</td> <td>÷</td> <td>÷</td> <td>÷</td> <td>+</td> <td>+</td> <td>+</td> <td>٨</td> <td>+</td> <td>+</td> <td>+</td> <td>÷</td> <td>+</td> <td>+</td> <td>+</td> <td>+</td> <td>+</td> <td>+</td> <td>+</td> <td>+</td> <td>÷</td> <td>+</td> <td></td>		1.	÷	÷	÷	÷	÷	+	+	+	٨	+	+	+	÷	+	+	+	+	+	+	+	+	÷	+	
SALIVARY GLAND • • •		·																								
LIVES LIVES LIVES LIVES LIVES DILE DUCT * * * * * * * * * * * * * * * * * * *		1.	÷	+	÷	+	+	+	+	+	A	+	÷	+	÷	+	÷	+	÷	+	+	+	+	+	+	
MEDP.ASTIC NODULE X BILE DUCT • • • • • • • • • • • • • • • • • • •		1.	+	+	+	+	+	+	+	+	A	+	+	+	+	+	+	+	+	+	+	+	+	+	+	
BILE DUCT + + + + + + + + + + + + + + + + + + +	NEOPLASTIC NODULE								X							x	_									
GALLBLADDER & COMMON BILE DUCT H <		T	+	+	+	+	+	+	+	+	A	+	+	+	+	+	+	+	+.	+	+	+	+	+	+	
PARCREAS		N	N	N	N	N	N.	N	N	N		N	N	N	N	N	N	N	N	Ν.	N	N	н_	H	N	
ESOPHAOUS + + + + + + + + + + + + + + + + + + +		1.	+	+	+	+	+		+	+	A	+	-	+	+	+	+	+	÷	+	+	+	+	+	+	
STDMACH PARTILIOMATOSIS - + + + + + + + + + + + + + + + + + + +		+	+	+	+	+	+	+	+	+	A	+	+	+	-	+	+	+	+	+	+	+	+	+	+	
PAPLILONATOSIS	STOMACH	-	+	+	-	+	+	+	-	+	٨	+	-	+	+	+	+	+	+	+	+	+	+	+	+	
LARGE INTESTINE + + + + + + + + + + + + + + + + +	PAPILLOMATOSIS							X																		-
LANGE		+	+	+	-	+	+	+	-	+	<u>A</u> _	•	-	_ <u>+</u>	+	+	+	+	+	<u>+</u>	+	+			+	
KIDNEY CARCINOMA.NOS TUBULAR-CELL ADENOMA TUBULAR-CELL ADENOMA + + + + + + + + + + + + + + + + + + +		-	-	+	-	+	+	+	-	+	A	+		+	+	+	+	*	+	-	+	+	+	+	+	
URINARY BLADDER + + - + + + + + + + + + + + + + + + + +	KIDNEY Carcinoma,nos Tubular-Cell Adenoma	+	÷	+	+	+	+	+	•	+	A	+	+	+	٠	+	+	٠	÷	+	٠	+	+	+	+	
NDOCRINE SYSTEM + + + + + + + + + + + + + + + + + + +		+				·			<u> </u>			·								<u> </u>					+	-
PITUTTARY + + + + + + + + + + + + + + + + + + +		+•		_		÷	-			_				-			•		·		•		-		-	-
ADERMOMA, NOS X X X X X ADRENAL ADENOMA, NOS PHEOCREMOMORCTIOMA X X X X X ADRENAL ADENOMA, NOS PHEOCREMOMORCTIOMA +<				÷		÷	+	÷	÷	+		٠	÷	+	÷	+	+	÷	÷	÷	÷	+	+	+	+	
ADENOMA, NOS X THYROID + + + + + + + + + + + + + + + + + + +	ADENOMA, NOS	Ļ		×	<u>x</u>			×.										x		x		x	x		x	_
Image: Construction X X X X PARATHYROID + + + A + + - + + + - + + + + +	ADENOMA, NOS	+	+	+ 	+	+	+	+	+	+	A	+	+	+	+	+	+	+	+	+	+	+	+	+	+	
PARATHYROID + + + A + + - + + + + + + + + +	THYROID	+	+	+	+	+	+	÷	+	+	A	+	+	+	+	+	+	+	+	÷	+	+	÷	+	+	
PANCREATIC ISLETS ISLET-CELL ADEMOMA + + + + + + + + + + + + + + + + + + +		+							<u>x</u>														<u>×</u>		-	-
ISLET-CELL ADEMOMA X X EPRODUCTIVE SYSTEM N		++				- <u>-</u> -	+	<u>.</u>	<u> </u>		<u>^</u>	<u>.</u>	<u>+</u>		<u>+</u>	<u>+</u>		<u>*</u>	. <u>+</u>	<u> </u>	<u> </u>	-			+	-
MAMMARY GLAND H N <	ISLET-CELL ADENOMA	Ť	•	Τ.	Ŧ	•	Ť		Ŧ		A	•	-	•		•	•	٠		Ŧ	*	Ŧ		•	Ŧ	
FIROMA x FIROMA FIROMA FIROMA FIROMA FIROMA FIROMA FIROMA FIROMA FIROMA FIROMA FIROMA FIROMA FIROMA + + + + + + + + + + + + + + + + + + +	EPRODUCTIVE SYSTEM	+				-																				1
TESTIS INTERSTITIAL-CELL TUNDR + + + + + + + + + + + + + + + + + + +	FIBROMA Lipoma	N	N	H	N	* ×	N	N	H	H	A	н	N	+	N	N	N	+	+	N	N	N	+	N	+	
INTERSTITIAL-CELL TUMOR X <	TESTIS	+	+	+	+	+	+	+	+	+	A	+	•	+	+	+	+	+	+	+	+	+	÷	+	+	
PREPUTIAL/CLITORAL GLAND N	INTERSTITIAL-CELL TUMOR	+		<u> </u>		<u>×</u>			X	X		<u>×.</u>			<u>×</u>	×	X	<u>×</u>	<u>×</u>	<u>×</u>	<u>×</u>	<u>×</u>	<u>_x</u>		<u>×</u> _	-
ADEMOCARCINDAA, HOS ERVOUS SYSTEM BRAIN + + - + + + + + + + + + + + + + + + + +		++	+	-	+	*	+	+	+	+	<u>A</u> _	+	-	+	+	<u>+</u>	+					+	-		<u>+</u>	-
PECTAL SENSE ORGANS ZYMBAL'S GLAND CARCINDMA.NOS PDDY CAVITIES PERTIONEUM MESOTHELIOMA, NOS L OTHER SYSTEMS	PREPUTIAL/CLITORAL GLAND <u>Adenocarcinoma, nos</u> Ervous system	N	N	N	N	N	N	N	м 	N	A	N	N	N	N	N	N	N	N	н	N	N	N	N 	H	
ZYMBAL'S GLAND CARCINOMA.NOS NNNNNNNNNNNNNNNNNNNNNNNNN PERITOREUM MESOTHELIOMA, NOS NNNNNNNNNNNNNNN L OTHER SYSTEMS	BRAIN	+	+	-	+	+	٠	+	+	+	A	+	+	+	+	+	+	+	+	+	+	+	+	+	+	
CARCINOMA,NOS DDY CAVITIES PERITONEUM MESOTHELIOMA, NOS LL OTHER SYSTEMS	ECIAL SENSE ORGANS	1-																								
DDY CAVITIES PERITONEUM MESOTHELIOMA, NOS LL OTHER SYSTEMS	ZYMBAL'S GLAND Carcinoma, Nos	N	N	N	N	N	N	N	N	N	A	N	N	N	N	N	N	N	N	N	N	N	N	Η	N	
MESOTHELIOMA, NOS X		+																								-
L OTHER SYSTEMS	PERITONEUM	н	N	N	H	N	N	N	H	н	A	N	N	N	N	N	N	N	N	Ņ	N	N	N	N	N	
		1_																		<u>×</u>						
									v						ы		N			N	Ņ	v	ы	N		
MULTIPLE ORGANS NOS NNNNNNNNNNNNNNNNNNNNNNNNNN LEUKEMIA,NOS LYMPHOCYTIC LEUKEMIA	LEUKEMIA.NOS	N.	N	N	N	Ņ	N	N	N	N	A	N	N	N	N	N	N	N	N	N	N	N	N	N	N	

X: N: S:

AND ALL AND AL

: NO TISSUE INFORMATION SUBMITTED C: Necropsy, No Histology due to Protocol A: Autolysis M: Animal Missing B: No Necropsy Performed

ANIMAL NUMBER	2	2	2	029	3	3	3	3	3	3	3	3	3	3	0 4 0	4	4	943	4	4	4	047	0 4 8	040	0 5 0	TOTAL
WEEKS ON STUDY			1	1	1		1	-	-	1	1	-	0	5	- și	8	1		1	5	-1	0	9	1	-1	TISSUE
RESPIRATORY SYSTEM		_4	- 41	4	-	4	41	. 6	41	9	41	-41	_61	41	_71	1	41	4	41	9	_61	- 41	31	4	-4	
LUNGS AND BRONCHI Alveolar/Bronchiglar Adenomá	1:	+	٠	÷	٠	+	÷	÷	+	٠	+	٠	ŧ	٠	+	÷	÷	+	+	+	+	÷	+	+	+	49,
TRACHEA	1÷	+	+	+	•	•	+	+	+	-	+	+	+	+	+	+	+	-	+	+	+	+	+	+	+	47
HEMATOPOIETIC SYSTEM				-																						
BONE MARROW	L.	+	+	+.	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	•	47
SPLEEN NOT	+	+	+	+	+	+	÷	+	+	+	÷	+	÷	÷	÷	+	ţ	٠	+	+	+	÷	+	٠	+	48,
SARCOMA, NOS Lymph nodes	+	+	 +	+	•	+	•	+	+	_	+	•	- <u>-</u>	•	+	-	<u>^</u> +		-	+	+		-	+	+	.40
THYMUS	1.	-	-	-		-	-	-	-	+	-	-	-	-	+	-	-	-		-	-	-	-	-	_	5
CIRCULATORY SYSTEM								_																	-	
HEART	+	+	÷	÷	÷	÷	+	+	+	+	+	÷	+	÷	+	+	+	÷	÷	÷	+	÷	÷	+	+	49
DIGESTIVE SYSTEM																									-	
SALIVARY GLAND	++	+	+	+_	<u>+</u>	+	+	+	+	-	+	+	+	+	ŧ.	-	+	+	+	+	+	+	+	+	-+	47
LIVER Neoplastic Nodule Leukemia,Nos	Ļ	+	+	+	-	+	+	+	+	+	+	+	+	+	•	•	+	•	+	+	+	+	•	•	+	48
BILE DUCT	1±	_ <u>+</u> _	+	+		+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	.48
GALLBLADDER & COMMON BILE DUCT	<u>↓</u> .₩_	N.	N	N	<u> H </u>	<u>N</u>	N	N.	<u>N</u> _	N.	Ν	N	N	N	<u>N</u>	Ν	<u>N</u>	N	N.	N	N	N	N	N	-14	<u>49×</u>
PANCREAS	++-	+	+	+	+	+	+	+	+	+	+	+	+	+	<u>+</u>	+	+	+	+	<u>*</u>	. *	+	+	+	+	
ESOPHAGUS	+	+	<u>.</u>	<u>+</u>		+	. <u>+</u> .	<u>+</u>	*	-	*	+	<u>+</u>	+	<u>+</u>	*	<u>+</u>		<u>+</u>	*	<u>*</u>	+	. <u>+</u> .	*	╣	45
STOMACH Papillomatosis	Ļ.	+	+	+	+	+	+	+	+		+	+	-	+	+	+	-	+	+	+	+	¥.	Ľ.	-	4	43,
SMALL INTESTINE	++	+	+	+	- - -	+	+	+	+		+	+	-	+	+	+	+	+	+	-	+	+	<u>+</u>	+	<u>+</u>	40
LARGE INTESTINE	+	+	+	+	-	+	•	+	+	-	+	+	•	+	+	+	+	+	+	-	+	+	+	+	+	38
JRINARY SYSTEM																										
KIDNEY Carcinoma,ngs Tubular-cell adendma Tubular-cell adendcarcinoma	Ľ	•	+	×	•.	+	•	+	+	*	•	•	•	•	•	*	•	+	·		+ ×	+.	• 	*		49 1 1
URINARY BLADDER	+	+	+	+	-	÷	+	÷	+	+	+	٠	÷	٠	+	+	+	-	+	÷	+	+	+	+	+	44
ENDOCRINE SYSTEM										-															-	
PITUITARY Adenoma, Nos Chromophobe Adenoma	+	×	+	+	+	•	+	+	+ x	+	-	+	×	•	+	+	+ x	-	~	+	+	+	•	+ .X	+	46 3 10
ADRENAL Adenoma, nos Pheochromocytoma	ŀ	+	•	+	+	+	•	•	×	•	+	+	+	+	+	+	+	+	-	+	+	+	+	•	+	48 1 3
THYROID C-CELL ADENOMA	-	+ X	+	* x	-	+	+	+	+	-	+	+	+	+	+	ż	*	-	+	+	+	+	•	+	+	45
PARATHYROID	-	÷	-	+	-	_	-	+		-	-	÷	+_	+	+	+	+	-	-	•	+	+	-	+	-	27
PANCREATIC ISLETS	+	+	+	÷	+	+	+	÷	* ×	+	+	+	٠	+	+	+	÷	+	+	٠	÷	÷	+	+	+	48 5
ISLET-CELL ADENOMA Reproductive system								×	<u>^</u>													_			-+	
MAMMARY GLAND FIBROMA LIPOMA FIBROADENOMA	+	N	N	+ x	٠	н	+	N	N	N	N	N	٠	N	H	÷	N	н	N	H	N	N	+	N	N	49¥ 1 1
TESTIS	+	÷	ţ	ţ	+	;	÷.	÷	;	+	;	÷	ţ	;	+	÷	÷	÷	÷	+	÷	÷	÷	÷	ţ	47
INTERSTITIAL-CELL TUMOR Prostate	1.	 +	- <u>Å</u> -	ــفــ +	-	_م_ +	-å- +	-ŏ- +	<u>+</u>	•	<u>م</u>	. <u>^</u>	+	+	÷	•	+		<u>.</u>	+	+	+	•	+	+	43
PREPUTIAL/CLITORAL GLAND ADENOCARCINOMA, NOS	N	Ņ	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	н	N	N	N	N	N	N	49×
NERVOUS SYSTEM	1	_ <u>_</u>									-															
BRAIN	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	•	+	+	+	+	+	+	*	+	+	47
SPECIAL SENSE DRGANS															ы	ы	N		ы		v	N				
ZYMBAL'S GLAND CARCINOMA, NOS	N	N	н	N	N	N	N	Ň	H	N	N	N	N	~	N	<i>n</i>		<i>"</i>		л —			ž	n	-"	49× 1
PERITONEUM	N	N	N	N	H	N	H	N	H	N	H	N	N	н	N	N	N	N	N	N	N	H	N	N	H	49× 1
MESOTHELIOMA, NOS	1_																	_								
ALL OTHER SYSTEMS Multiple organs nos Leukemia, nos Lymphocytic Leukemia	N	N	N	N	N	N	.N	к	N	N	N	NX	N	N	N	н	N	N	N	N	N	H	N	N	N	49× 1

TABLE A3. MALE RATS: TUMOR PATHOLOGY (CONTINUED) LOW DOSE

A ANIMALS NECROPSIED
 +: TISSUE EXAMINED MICROSCOPICALLY
 -: REQUIRED TISSUE NOT EXAMINED MICROSCOPICALLY
 X: TUNOR INCIDENCE
 N: NECROPSY: NO AUTOLYSIS, NO MICROSCOPIC EXAMINATION

: NO TISSUE INFORMATION SUBMITTED C: Necropsy, no histology due to protocol A: Autolysis M: Animal Missing B: No Necropsy Performed

TABLE A3.

INDIVIDUAL ANIMAL TUMOR PATHOLOGY OF MALE RATS IN THE 2-YEAR STUDY OF PENTACHLOROETHANE

HIGH DOSE

ANIMAL NUMBER	0	0	0	0	0 0 5	0	0	0	0	0	1	0	0	0	0	0	0 1 7	0	0	2	0 2 1	22	2	2	025
WEEKS ON Study	9	1	1	9	0	1	3	1	1	-	0	1	8	1	6	0	1	0	9	1	0	1	3	1	0
INTEGUMENTARY SYSTEM	3	<u>ě</u>	4	<u>.</u>	51	4	41	4	4	41	4	41	4	4	6	8	41	41	21	41	5	4	41	41	4
SKIN Hemangiopericytoma, nos	+	+	٠	+	+	•	+	*	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+
RESPIRATORY SYSTEM																									
LUNGS AND BRONCHI	+	+	+	+	<u>+</u>	+	+	. *	. †	+	+	+	+	+	+	+	+	+	+	+	+	+	<u>+</u>	+	+
TRACHEA	+	+	٠	+	÷	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+
HEMATOPOIETIC SYSTEM																									
BONE MARROW	++	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+.	.+	+	.+	+	+
SPLEEN	++	+	+	+	+	+	+	+	+	+	+	+	+	+	+	. t _	+	+	+	+	+	+	+	+	+
LYMPH NODES Malignant Lymphoma, Nos	+	+	+	+	+	+	+	+	+	-	+	+	+	+	+	+	+	+	+	+	+	+	•	+	+
THYMUS	-	-	-	-	+	-	-	-	-	-	-	-	-	-	-	+	-	-	-	-	-	-	-	-	-
CIRCULATORY SYSTEM																									
HEART	+	+	+	+	+	+	+	+	+	+	÷	+	+	+	+	+	+	+	+	٠	+	+	+	+	+
DIGESTIVE SYSTEM	1							-							-										
SALIVARY GLAND FIBROSARCOMA	+	+	+	+	+	+	+	+	+	+	+	•	•	+	+	+	+	+	+	+	+	•	· +	+	+
LIVER Bile duct carcinoma Neoplastic nodule	Ļ	•	+	+	+	+	+	•	•	+	+	+	+	+ _x	+	+	+	+	+	+	+	+	+	•	+
BILE DUCT	+	ŧ	+	+	+	+	+.	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	. +
GALLBLADDER & COMMON BILE DUCT	Į.N.	N	N	<u>N</u> .	N	N	N	N	N	N	N	N	N	N	N	N	N.,	N	N	N	N	N	N	N	N
PANCREAS	++	+	+	+ _	+	+	+.	+	+	+	+	+	+	÷	+	+	+	+	+	+	÷	+	+	+	+
ESOPHAGUS	+	+	+	+	+	+	+	+	+	+	-	.+	+	+	÷	÷	ŧ	+	+	+	+	ŧ	+	+	+
STOMACH	1-	+	+	+	+	+	+	+	+	+	.+.	+	+	+	÷	+	+	+	+	+	-	+	+	+	-
SMALL INTESTINE	<u> </u>	+	+	+	+	+	+	+	-	+	+	+	+	÷	÷	+	+	+	+	-	-	+	+	+	-
LARGE INTESTINE	-	÷	+	+	٠	+	÷	+	+	+	+	+	+	٠	+	+	+	÷	-	-	-	+	+	+	-
URINARY SYSTEM																				_					
KIDNEY Tubular-Cell Adenoma	+	+	_x	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	•	*	+	+	+	+	+
URINARY BLADDER	+	+	+	-	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	-	+	.*	+	+	+
ENDOCRINE SYSTEM																									
PITUITARY Adenoma, Nos Chromophobe Adenoma	Ŀ	-	+	+	+	-	+	+	* ×	•	+	+	+	+	+	+	+	+	*	+	+	+	•	+	+
ADRENAL Pheochromocytoma	ŀ	+	+	+	+	*	+	+	+	+	+	+	+	+	×	+	+	+	+	+	+	+	+	+	+
THYROID Adenoma, Nos C-Cell Adenoma	+	+	+ X	+ X	+	+	+	+	+	+	×	+	-	+	+	-	+	+	+	+	+	+	+	•	+
PARATHYROID	-	+	+	-	+	+	+	+	-	+	+	-		-	+	-	+	+	+	-	-	-	-	-	. +
PANCREATIC ISLETS ISLET-CELL CARCINOMA	+	+	+	+	+	÷	÷	+	+	÷	+	+	+	÷	÷	٠	÷	+	÷	÷	÷	+	+	* ×	+
REPRODUCTIVE SYSTEM																									
MAMMARY GLAND	N	+	N	÷	N	N.	Ν.	N	+	N	N	N	N	+	+	N	N	N	N	N	N	N	N	N	N
TESTIS Interstitial-cell tumor	-	+	ż	*	+	*	ż	×.	•	*	ż	×	ż	×	+	•	ż.	ż_	ż	ż	+	ż	÷.	×	, x
PROSTATE NERVOUS SYSTEM	++	+	+	ŧ	+	+	+	+	+	+	. +	+	+	÷	-	+	+	+	+	-	+	+	+	+	+
BRAIN		÷	÷		· .					÷		÷	÷	÷	÷	•	÷	+	•	÷		•	+	•	
BODY CAVITIES	-+																-								
PERITONEUM Lipoma Mesothelioma, Nos	. N	н	N	н	H	H	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N X	N
ALL OTHER SYSTEMS																									
ALL OTHER SYSTEMS Multiple organs nos Malignant Lymphoma, nos Leukemia,nos Lymphocytic Leukemia	N	N	H	N	N	N	N X	N	N	н	N	N	N	N	N	N	н	N	н	N	N	N	N	N	H

+: TISSUE EXAMINED MICROSCOPICALLY -: Rebuired Tissue not examined microscopically X: Tumor incidence not examined microscopic examination H: McCropsy, NO Autolysis, No Microscopic examination S: Animal Mis-Sexed

: NO TISSUE INFORMATION SUBMITTED C: Herropsy, No Histology due to Protocol AUTOLYSIS M: Animal Missing B: No Necropsy Ferformed

ANIMAL Number	0 2 6	2	0 21 8	02	3	3	3	3	3	3	3	3	0 3	3	0 4 0	4	4	4	044	0 4 5	0 4 6	4	0 4 8	40	5	TOTAL
WEEKS ON Study	0	0	0	0	1	9	0 7 9	0	5	1	0	1	0	0	0		9	1	1	0 7	0	0 9	1	0		TISSUE
INTEGUMENTARY SYSTEM	- 21		01		41		91	-21	_4_		-21		_71_	<u>.</u>		-61	ـلك	-71			- 01		.2.1	_ 7 1		
SKIN Hemangiopericytoma, Nos	+	+	+	+	+	+	+	+	+	+	+	+	+	+ ·	+	+	+	+	+	+	+	+	+	+	+	50× 1
RESPIRATORY SYSTEM																										
LUNGS AND BRONCHI	++	+	<u>+</u>	+	+	+	+-	+	_ <u>+</u>	+	+	<u>+</u>	+	+	.*	+	+	+	+	+	+	+	+	<u>+</u>	-+	50
TRACHEA	+	+	+	+	+	+	+	+	+	+	+	+	+	-	+	+	+	+	+	+	+	+	+	+	+	49
EMATOPOLETIC SYSTEM																							,			
BONE MARROW	+	+	+	÷.	+	+	+	<u>+</u>	+	+	<u>+</u>	+	- <u>-</u>	+	. <u>+</u>	+	+ +	+	<u>+</u>	+	<u> </u>	+-	<u>.</u>	*	-	<u>49</u>
SPLEEN Lymph Nodes	++	• •	<u>+</u> -	. <u>+</u>	+	<u>+</u>	+	<u>+</u>	<u>+</u>	+		+	- <u>+</u>	<u>+</u>	+	<u>*</u> -	<u>*</u>	<u> </u>	- <u>*</u>	-		-	- <u>-</u> -	-	-	<u>50</u> 46
MALIGNANT LYMPHOMA, NOS	Ļ		+	. <u> </u>	+	x	<u> </u>	<u> </u>					<u> </u>		-	<u> </u>	<u> </u>	<u> </u>	-			-	_	·	_	40
THYMUS	-		+	•	-	-	-	+	+	-	-	-	-	-	÷	-	-	-	-	-	-	-	•	-	-	6
SIRCULATORY SYSTEM	1										-														1	
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DIGESTIVE SYSTEM																										
SALIVARY GLAND FIBROSARCOMA	+	+	+	+	+	+	+	+	+	+	+	+	+	-	+	+	+	+	*	+	+	+	+	+	+	49
LIVER BILE DUCT CARCINOMA Neoplastic Nodule	+	+	+	+	+	×	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	50
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GALLBLADDER & COMMON BILE DUCT	N	N	N	N	N	<u>N</u>	N	N_	N	N	N	N	N	N	N	N	N	N	<u>N</u>	N	N.	N	N	N	N	50
PANCEEAS	+	+	+	+	÷	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	50
ESOPHAGUS	1-	+	+	+	.+	+	+	+	-	+	+	+	+		+	+	+	<u>+</u>	+	+	+	+	+		+	45
STOMACH	+	-	+	+	+	t	+	+	+	+	+	+	+	-	+	+	-	+	+	-	+	+	+	+	-+	42
SMALL INTESTINE	+-		+	+	+	+	+	+		+	+	+	+	-	+	+	-	+	+	-	+	+	+	+		39
LARGE INTESTINE	+	-	+	+	•	+	÷	+	-	+	+	+	+	-	÷	+	-	+	+	-	+	+	+	÷	-	38
IRINARY SYSTEM																										
KIDNEY Tubular-Cell Adenoma	.+	*	+	+	+	+	+	+	+	+	+	+	+	+	•	* x	+	+	+	+	+	+	+	+	+	50
URINARY BLADDER	+	+	+	÷	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	48
INDOCRINE SYSTEM																										
PITUITARY Adenoma, nos Chromophobe Adenoma	+	+	+	+	+	+ _x	+	+	+	+	+ x	+	+	-	+	+ -	+	-	+	+	+	+	+	+	+	46
ADRENAL Pheochromocytoma	+	+	+	+	* x	+	+	+	+	+	+	•	+	+	+	+	* ×	+	+	+	+	+	+	+	+	50
THYROID Adenoma, Nos C-Cell Adenoma	+	+	.+	+	+	+	+	-	+	+ X	+	+	+	-	+	+	+	+	+	+	+	+	+	+	• +	46
PARATHYROID	+	+	-	+		+	-	-	-	+	+	+	+	-	-	+	+	+	+	+	~	+	+	+	+	30
PANCREATIC ISLETS ISLET-CELL CARCINOMA	+	+	+	+	+	+	+	+	+	÷	.+	•	+	+	٠	+	+	+	+	+	+	+	+	÷	+	50
REPRODUCTIVE SYSTEM	+																		_						-+	
MAMMARY GLAND	++	<u>N</u>	N	N	N	+	Ν.	+	N_	<u>N</u>	N	N	N	+	N	<u>N</u>	N	N	N	+	4	N	<u>N</u>	+	N	50*
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BRAIN	+	+	+	+	÷	÷	÷	+	+	÷	+	÷	+	-	÷	+	+	+	÷	÷	÷	+	÷	+	+	49
SODY CAVITIES					-																				-+	
PERITONEUM Lipoma Mesothelioma, Nos	N	N	н	N	H	N X	н	H	××	H	N	N	N	н	н	N	н	N	N	N	н	N	N	H	н	50¥ 1 2
ALL OTHER SYSTEMS																						-			-+	
MULTIPLE ORGANS NOS Malignant Lymphoma, Nos Leukemia,Nos Lymphocytic Leukemia	N	N	N	н	N	н Х	N	N	N	N	N	N	N	N	н	N	N	N	N	N	N	N	N	H	N X	50¥ 1 2

TABLE A3. MALE RATS: TUMOR PATHOLOGY (CONTINUED) HIGH DOSE

* ANIMALS NECROPSIED +: TISSUE EXAMINED MICROSCOPICALLY -: REQUIRED TISSUE NOT EXAMINED MICROSCOPICALLY X: Tumor incidence N: Necropsy, NO Autolysis, NO Microscopic examination

: NO TISSUE INFORMATION SUBMITTED C: NECROPSY, NO HISTOLOGY DUE TO PROTOCOL A: Autolysis M: Animal Missing B: No Necropsy Performed

TABLE A4.

INDIVIDUAL ANIMAL TUMOR PATHOLOGY OF FEMALE RATS IN THE 2-YEAR STUDY OF PENTACHLOROETHANE

VEHICLE CONTROL

1 01	0	0	0	0	0	0	0	0	0	0	0	0	01	0	01	0		<u> </u>	0	0	0	0		0
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L+	+	+	+	+	+	+	+	+	A	+_	+	+	+	-	-	÷	-	+	+	+	+	+	+	t
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+																					-			
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+: TISSUE EXAMINED MICROSCOPICALLY -: REQUIRED TISSUE NOT EXAMINED MICROSCOPICALLY X: TUMOR INCIDENCE N: NECROPSY, NO AUTOLYSIS, NO MICROSCOPIC EXAMINATION

: NO TISSUE INFORMATION SUBMITTED C: Necropsy, No histology due to protocol A: Autolysis M: Animal Missing B: No Necropsy Performed

ANIMAL	0	0	0 7	0	0	01	0	0	0	0	0	21	0	0	0	0	0	0	0	0	0	0	- O	0	11	
NUMBER	7	7	8	7	8	8	8	8	8	8	8	8	8	8 9	9	9	2	3	9	9	9	2	8	9	0	TOTAL
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NTEGUMENTARY SYSTEM	1 -											-													-1	
SUBCUTANEOUS TISSUE FIBROMA	+	+	+	+	+	+	N	+	+	+	+	+	+	+	.+	+	+	N X	+	+	+	+	+	+	+	49× 1
ESPIRATORY SYSTEM																										
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TRACHEA	+	+	-	÷	÷	÷	-	+	÷	+	-	+	+	+	+	+	+	+	÷	+	+	+	+	+	+	44
EMATOPOIETIC SYSTEM																									+	
BONE MARROW	+	+	+	-	+	+	+	+ _	+	+	+	-	+	+	-	÷	+	+	+	+	+	+	+	+	+	42
SPLEEN	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	48
LYMPH NODES	T +	+	-	+	+	+	+	+	+		-	+	+	+	+	+	+	+	+	-	+	-	+	+	+	42
THYMUS	1-	-		+	+	-	-	-	-		-	-	-	-	-	-	-	-	-	1	-	-	-	-	-	5
IRCULATORY SYSTEM	+		_																						-+	
HEART	+	÷	+	+	+	+	+	÷	÷	÷	+	÷	+	+	÷	÷	+	÷	+	÷	+	+	+	+	+	49
IGESTIVE SYSTEM	+	•		-										-										_	+	
SALIVARY GLAND	+	+	+	+	÷	+	÷	ŧ	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	49
	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	49
LIVER BILE DUCT CARCINOMA Hepatocellular carcinoma Lymphocytic Leukemia	×			·		x																				
BILE DUCT	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	÷	+	+	+	+	+	+	. 49
GALLBLADDER & COMMON BILE DUCT	N	R	N	N	N	N	N	N	N	N	+	N	+	N	N	N	N	N .	N	N	N	N	N	N	N	49×
PANCREAS	+	÷	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	49
ESOPHAGUS	-	+	+	-	+	+	-	+	+	+	+	+	-	+	+	-	+	+	-	+	+_	+	-	+	+	39
STOMACH	+	+		+	+	+	-	+	+	+	+	+	+	+	+	+	+	+_	+	-	+	+	+	+	+	45
SMALL INTESTINE	+	+	-	+	+	+	+	+	+	÷	+	+	+	+	+	+	+	+	+	-	+	+	+	+	+	45_
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URINARY BLADDER	+	+	+	+	+	+	+	+	+	+	÷	+	+	+	+	+	-	+	+	+	+	+	+	+	-	45
NDOCRINE SYSTEM	+																								+	
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ADENOMA, NOS Chromophobe Adenoma		x	x		×			x	x	x		x		x			x		×		x	x			x	23
BASOPHIL ADENOMA	<u> </u>																	<u>x</u> _							-+	1
ADRENAL Adenoma, Nos	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	48 1
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PAPILLART CISTADENUMA, NUS	+											-		_											+	1
PARATHYROID	+	-	+	*	-	_	-	+	+	-	-	*	-	-	-	-	-	+	-	-	+	-	-	+	+	22
REPRODUCTIVE SYSTEM																										
MAMMARY GLAND Adenocarcinoma, nos Fibroadenoma		+	+	•	+	н	н	+ X	+	×	+	*	+	•	+	+	+ ×	+	+ ×.	+	+ X_	N	+ _X	+	N X	49× 2
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UTERUS Endometrial stromal polyp Endometrial stromal sarcoma	+ ×	+	-	* ×	* ×	+	-	٠	* ×	+	+	+	+	•	+	+	•	-	+	+	+	+	+	+	+	45 7 2
OVARY	+.	+	+	÷	+	÷	+	+	+	+	+	+	+	+	+	+	+	+	+	÷	+	+	+	+	+	47
ALL OTHER SYSTEMS	+																								-	
MULTIPLE ORGANS NOS BILE DUCT CARCINOMA, INVASIVE Malignant Lymphoma, NOS	N	N	N	N	N	н	N	N	N	N	N	N	N	H	Ņ	N	N	H	H	H	H	H	N	N	N	49× 1 1

TABLE A4. FEMALE RATS: TUMOR PATHOLOGY (CONTINUED) VEHICLE CONTROL

* ANIMALS NECROPSIED

+: TISSUE EXAMINED MICROSCOPICALLY -: REQUIRED TISSUE NOT EXAMINED MICROSCOPICALLY X: Tumor Incidence N: Necropsy, No Autolysis, No Microscopic Examination

: NO TISSUE INFORMATION SUBMITTED C: Neckopsy, no histology due to protocol A: Autolysis M: Animal Missing B: No heckopsy ferformed

TABLE A4.

INDIVIDUAL ANIMAL TUMOR PATHOLOGY OF FEMALE RATS IN THE 2-YEAR STUDY OF PENTACHLOROETHANE

					_			0																	
ANIMAL NUMBER	05			0	5	95	0	0 5	0	6	0	6	6	0 6 4	0	0	0	0	0 6 9	7	9	9	9	1 0 7	Ť
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INTEGUMENTARY SYSTEM	4	4	4	4	Lī	Lå	Å	4	Å	4	Ž	Å	4	Ó	ا ف	ġ	<u>í</u>	4	4	Ĺż	4	Li	Li	Ĺź	1
SUBCUTANEOUS TISSUE Fibrosarcoma	+	+	+	٠	+	+	* x	÷	÷	+	+	÷	+	÷	+	÷	+	٠	+	+	+	N	A	÷	
RESPIRATORY SYSTEM	+										· · · · ·												_		
LUNGS AND BRONCHI	Ŀ	+	+	+	+	+	+	+	+	+	÷	+	+	+	+	+	+	+	+	+	+	+	A	+	
TRACHEA	+	-	÷	+	+	+	+	+	+	+	+	+	+	-	+	+	+	+	÷	+	+	-	A	+	
HEMATOPOIETIC SYSTEM	+																								_
BONE MARROW	L.	+		+	+	+	+	+	+	+	+	+	+	+	+	-	+	+	+	-	÷	+		<u></u>	
SPLEEN	+	+	_+	_+	+	+	+	÷	+	+	_+	<u>+</u>		-	÷	÷	+	+	<u>+</u>	-	+	+	A	+	
LYMPH NODES	1.		+	+	÷		+	+	+	+	-	+	+	-	+	+	-	+	+	+	+	+	_A	+	
THYMUS	-	-	-	-	-	-	-	-	-	-	-	+	٠	-	-	-	-	-	-	-	-	-	*	-	
CIRCULATORY SYSTEM	+										• • • • •														
HEART	+	+	+	+	+	+	+	+	+.	٠	+	+	+	+	٠	+	+	+	+	+	+	+	A	+	1
DIGESTIVE SYSTEM	1																								
SALIVARY GLAND	++	+	+	+	+	+	+	+	+	+	+		+	-	+	-	+	+	+	+	+	+	_A_	+	
LIVER Neoplastic Nodule Hepatocellular carcinoma Lymphocytic leukemia	Ľ	+	+	+	+	.+	+	+	+	×	+	+	+	+	+	+	+	+	+	+	+	+	•	+	•
BILE DUCT	++	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	÷	÷	+	+	+		+	
GALLBLADDER & COMMON BILE DUCT	N	N	N	N	н	N	N	N	N	N	N.	N	N	Ν_	N	N	N	N	N	N	N	N	_A.	<u>N</u>	N
PANCREAS	+	+	+	+	+	+	+	÷	+	+	+	+	+	-	+	+	+	+	+	-	+	+	A	+	+
ESOPHAGUS	++	-	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+		+	
STOMACH	+	+	+	+	+	+	<u>+</u>	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	A	+	+
SMALL INTESTINE	+	+	+	+	+	+	-	+	+	+	-	+	+		+	+	+	+	+	+	-	+	A	+	+
LARGE INTESTINE	+	+	+	+	+	+	+	+	+	+	-	+	+	-	+	+	+	+	+	-	+	+	A	+	+
URINARY SYSTEM	T																								
KIDNEY Lipoma	+	+	+	+	+	+	*	+	+	+	+	+	+	+	+	-	+	+	+	+	+	+	A	+	+
URINARY BLADDER	-	+	+	+	+	+	+	÷	+	+	+	+	+	+	+	+	+	+	+	-	+	-	A	+	+
ENDOCRINE SYSTEM	+					••••••											-								
PITUITARY Adenoma, nos Chromophobe adenoma	+	+	+	-	+	+	+	*	+	+ X	+	* *	*	-	+	-	+ X	+ X	+	+	+	+	۸	+ _X	+
ADRENAL Pheochromocytoma	+	÷	+	+	+	÷	÷	÷	+	+	+	+	÷	+	÷	÷	+	+	+	+	+	+	A	+	+
THYROID	+	-	+	+	+	+	+	+	+	+	+	+	+	+	÷	+	+	÷	+	+	+	÷	A	+	÷
C-CELL ADENOMA Parathyroid	<u> </u> [×]	_	+	+	•	+	_ <u>×</u>	+		+	+	+	+	+	+	+	+	+		+	+	+	A	 +	
REPRODUCTIVE SYSTEM	+					-		-	•						•	*	<u> </u>	•				•	~	<u> </u>	
MAMMARY GLAND Adenocarcinoma, nos fibroma fibroma	+	+	H	+ _x	+	+	N	٠	N	N	N	+	+	N	+	N	+	N	•	+	+	N	A	+	N
UTERUS Adenocarcinoma, nos Endometrial stromal polyp	+	+	+	+	-	+	+ X	+	+	+	+	+	+	•	+	+	+ X	+ X	+	*	+	+ X	A	+	+
OVARY Cystadenoma, nos	+	-	+	+	+	٠	+	+	+	+	* ×	٠	+	+	+	+	+	÷	+	+	+	+		+	÷
IERVOUS SYSTEM	+													·· ··										<u> </u>	
BRAIN GLIDMA, INVASIVE	+	+	+	+	+	٠	٠	÷	+	+	+	٠	+	+	+	+	* X	÷	•	-	+	٠	A	٠	+
ALL OTHER SYSTEMS	+					÷														•					
MULTIPLE ORGANS NOS ADENDCARCINOMA, NOS, METASTATIC Malignant Lymphoma, NOS Leukemia,Nos	N	N	N XX	N	н х	N	N	N	N	H X	H	N	N	N	N	N	N	N	N	××	N	N		N	N

LOW DOSE

+: TISSUE EXAMINED MICROSCOPICALLY -: Reguired Tissue Not Examined Microscopically X: Tumor Incidence N: Necropsy, No Autolysis, No Microscopic Examination

: NO TISSUE INFORMATION SUBMITTED C: Necropsy, no histology due to protocol A dutolysis M: Animal Missing B: No Necropsy Performed
TABLE A4. FEMALE RATS: TUMOR PATHOLOGY (CONTINUED)

LOW DOSE

ANIMAL NUMBER	7	7	078	7	8	8	0 8 2	0 8 3	8	85	8	8	8	8	9	9	9	9 3	9	9	9	2	9	9	0	TOTAL
WEEKS ON STUDY	9	8	1	0	8	1	8	0	0	1	6 1 0	9	3	1	1	1	3	1	0	1	1	1	1	1	6	TUMORS
INTEGUMENTARY SYSTEM	+ 11	4	. 4	3	_11	- 4	01	-61	4	- 41	<u>•</u>]	9	41	4	41	<u> </u>	91	91	9.1	يو.	41	21	-91.	- 11	-	
SUBCUTANEOUS TISSUE FIBROSARCOMA	+	+	+	+	+	+	+	+	+	+	+	+	+	+	•	+	•	+	+	+	•	+	+	+	+	49×
RESPIRATORY SYSTEM	+										_															
LUNGS AND BRONCHI	++	+	+	+	+	+	+	+	+	+	t	+	+	+	+	+	+	+	+	+	+	+	+	•	+	49
TRACHEA	+	٠	+	+	+	٠	+	+	+	+	+	+	+	+	+	+	+	+	٠	+	+	+	+	+	+	46
HEMATOPOIETIC SYSTEM		_					_																		1	
BONE MARROW	+	+	+	<u>+</u>	+	+	+	+	<u>+</u>	+	+	+	+	+	+	+	+	+	+	+	+	+	+		+	46
SPLEEN	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	<u>+</u>	+	+	+	+	+	+	╧┥	47
LYMPH NODES	++-	<u>+</u>	+	+	-	+	-	+	+	+	+	+	+	<u>+</u>	+	+	+	+	+	-	+	<u>+</u>	٠	<u>.</u>	+	41_
THYMUS	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-[2
CIRCULATORY SYSTEM	1						_					-	-												1	
HEART	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	•	49
DIGESTIVE SYSTEM	1								_																1	
SALIVARY GLAND	+	+	+	+	+	+	+	+	+	+	ŧ.	+	+	+	+	<u>+</u>	+	+	+	+	+	<u>+</u>	+	<u>+</u>	╇	47
LIVER Neoplastic Nodule Hepatocellular Carcinoma Lymphocytic Leukemia	+	+	+	+	+	+	+	+	+	+	+	+ x.	+	+	+	•	•	×	+	+	+	* ×	•	-	٠	48 2 1
BILE DUCT	<u>_+</u>	_+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	ŧ.	+	+	+	+	-	+	48
GALLBLADDER & COMMON BILE DUCT	N	N	N		N	N	N	N	N	N	N	Ν.	N	N	N	N	N	N	H	N	N	N.	N	<u>H</u>	н	49X
PANCREAS	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	÷	+	+	+	+	+	+	+	+	+	47
ESOPHAGUS	L+	+	+	+	+	+	ŧ.	-	+	+	+	+	+	+	+	+	+	-	+	+	+	+	٠	+	•	46
STOMACH	+	+	+	+.	÷	+	+	.+	+	+	+	+	+	+	+	+	+	+	+	+	+		+	+	+	48
SMALL INTESTINE	+	٠	+	+	+_	+	+	+	+	+	+	+	. +	+	+ .	+	+	+	٠	+	ŧ.	+	+		+	44
LARGE INTESTINE	+	+	÷	+	+	÷	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	-	+	45
URINARY SYSTEM	+-																								1	
KIDNEY LIPOMA	+	+	+	+	+	+	+	+	+	•	+	+	+	+	+	+	+	+	+	•	•	•	+	-	-	47
URINARY BLADDER	+	+	+	-	+	-	+	+	+	-	+	+	+	+	+	+	+	+	-	+	+	+	+	-	*	4 1
ENDOCRINE SYSTEM	1	-							_																Τ	
PITUITARY Adenoma, nos Chromophobe adenoma	+ ×	+	+	+	+ 	+ 	+ X	+ x	+ X	+	+	+	+	•	+	+	•	+	+	* x	*	+ . ×	+ x	+ x	•	46 3 14
ADRENAL Pheochromocytoma	L.	+	+	*	+	+	+	+	+	+	+	+	+	+	+	+	+	•	+	+	•	+	+	•	•	49,
THYROID C-Cell Adenoma	+	+	+	+	ż	+	+	+	+	+	•	+	+	•	+	+	+	•	+	+	+	•	•	+	+	483
PARATHYROID	+	-	+	+	٠	-	+	-	-	٠	-	-	-	-	+	+	-	٠	+	٠	+	٠	+	•	+	37
REPRODUCTIVE SYSTEM	+								~																1	
MAMMARY GLAND Adenocarcinoma, Nos Fibroma	+	N	N	* ×	+	•	•	+	+	+	+	•	+	•	* x	+	+	N	•	٠	٠	* *	+ X	•	"	47× 1 2
FIBRGADENOMA	1÷					_ <u></u>	<u> </u>	<u> </u>	+	<u>*</u>	+	•	+	- <u>A-</u> +	+	+	•	•	+		•	ــفــ	•	*		48
UTERUS Adenocarcinoma, nos Endometrial stromal Polyp	Ľ		÷	. X	<u> </u>					_ <u>x</u>	, х.	-	-	x	×	x			ž	-	<u>×</u>	۔ ت		•	·	12
DVARY Cystadenoma, Hos	•	+	+	+	+	٠	٠	+	+	+	+	٠	+	+	+	+	+	+	+	+	٠	+	٠	٠	٠	48 1
NERVOUS SYSTEM	1		-						-					-								-		-		
BRAIN Glioma, invasive	+	+	+	+	+	•	+	+	+	+	+	+	+	+	+	+	+	•	•	+	•	•	•	•	٠	46 ₁
ALL OTHER SYSTEMS																										
MULTIPLE ORGANS NOS Adenocarcinoma, Nos, metastatic Malignant Lymphoma, Nos Leukemia,Nos	H	N	N	N	H	N	N	N	N	N	N	N X	H	N	N	N	H	H	N	H	N	H X	N	N	N	49× 1 3

* ANIMALS NECROPSIED

+: TISSUE EXAMINED MICROSCOPICALLY -: Required Tissue not Examined Microscopically X: Tumor Incidence H: Necropsy, No Autolysis, No Microscopic Examination

: NO TISSUE INFORMATION SUBMITTED C: Necropsy, no histology due to protocol A: Autolysis M: Animal Missing B: No Hecropsy Performed

TABLE A4.

INDIVIDUAL ANIMAL TUMOR PATHOLOGY OF FEMALE RATS IN THE 2-YEAR **STUDY OF PENTACHLOROETHANE**

					-11(GH	D	03	SE																
ANIMAL NUMBER	0	0 5	0 5		0 5	S S	0	0	0	6	6	0	6	0	0	0	0	0	0	9	07	9	9	9	<u> </u>
WEEKS ON Study	1	2	3	4 0 3	5 0 3		. 7	8 0 7	9 0 5	0			3 0 9	4	5 0 9	- 6 - 1 0	- 7 - 1 0	- 8	-1		0	2 0 6	귀	- 4	╏
RESPIRATORY SYSTEM	+i	4		8	Ĵ	4	4	4	4	4	Li	4	8	4	ó	ě	4	41	4	<u> </u>	ō	ž	اف_	ě.	_é
LUNGS AND BRONCHI Adenocarcinoma, nos, metastatic Alveolar/Bronchiolar Adenoma	ŀ	+	+	.+	•	+	+	×	+	+	+	+	+	+	+	+	+	٠	٠	٠	+	•	+	٠	•
TRACHEA	+	+	. +	+	A	+	+	٠	+	+	+	+	÷	+	+	+	+	+	•	+	+	+	+	÷	+
HEMATOPOIETIC SYSTEM	+																								-
BONE MARROW	++	+	+	+		+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+			+	-
SPLEEN	<u>+-</u>	+	+	+	_ <u>A</u>	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	t	+	+.	. +	4
LYMPH NODES	++	+	+	+	A	+	+	-	+	+	+	+	+				+	+	. . .	+	+	+_	+	+	
THYMUS	-	-	-	+	A	-	-	-	+	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
CIRCULATORY SYSTEM	\top																								+
HEART	+	+	+	+	A	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	٠	+
DIGESTIVE SYSTEM	+																			·					1
SALIVARY GLAND	+	ŧ	ŧ	+	A	+	+	+	+	+	+	+	÷	+	+	+	+	+	+	+	+	+	+	+	+
LIVER	++	ŧ	+	<u>+</u>	. A	+	+	+	+	+	÷	+	÷	+	+	-	+	+	+	<u>+</u>	•	+	+		4
BILE DUCT	++	÷	ŧ	.+	A	+	+	.+	+	+	ŧ	+	+	+	+	-	+	t	+	<u>+</u>	<u>+</u>	+	<u>+</u>		4
GALLBLADDER & COMMON BILE DUCT	<u> N</u>	N	N	N	<u> </u>	<u>N</u>	N	N	N	N	N	N	N	<u>N</u>	<u>N</u>	N	N	N	N	N	N	N.	N	N	N
PANCREAS	+-	+	+	+	A	+	+	+	+	+	+	ŧ.	+	+	+	ŧ	+	+	+	+	+	+	+	+	4
ESOPHAGUS	++	+	-	+		+	+	+	+	+	+	+	+	+	-	+	+	+	+	+	-	+	+	+	4
STOMACH	<u> </u>	+	+	+	A	+	+	+	+	_ <u>+</u>		<u>+</u>	-	+	+	٠	+	+	+	+	+	+	+	+	+
SMALL INTESTINE	-	÷	+	+	A	+	+	+	-	+	-	+.	-	+	+	+	÷	+	+	+	+	+	+	+	+
LARGE INTESTINE	-	٠	+	-	A	+	+	+	+	+	-	+	-	+	+	+	+	+	+	٠	+	+	+	٠	+
URINARY SYSTEM	+																						<u> </u>		+
KIDNEY	<u> </u>	÷	+	+	A	÷	+	ŧ	+	+	+	+	+	+	+	+	+	÷	+	+	÷	+	+	+	+
URINARY BLADDER	-	+	+	+	A	+	+	-	+	-	-	+	-	+	+	+	+	+	+	+	÷	-	+	÷	+
ENDOCRINE SYSTEM	-																				-				
PITUITARY Chromophobe Adenoma	İż	-	* x	+	A	+	* x	+	+	*	, ×	+	*	+	-	+	*	+	ż	+	-	+	+	+	ż
ADRENAL	<u> </u> -	. † .	+	+	Α.	+	. +	+	ŧ	+	. +	+	+	. +	+	+	+	+	+	+	+	+	+	+	4
THYROID Follicular-cell Adenoma Follicular-cell Carcinoma C-cell Adenoma	+	+	٠	+	•	+	•	+	+	+ ×	+	+	٠	+	+	•	* ×	+	+	+	-	•	+	+	+
PARATHYROID	+	+	+	-	A	+	-	-	-	-	-	-	+	+	+	+	-	+	-	+	-	+	+	÷	7
REPRODUCTIVE SYSTEM																									+
MAMMARY GLAND Adenocarcinoma, nos fibroadenoma	+	+	N	H	A	N	+	* ×	+	٠	+	٠	+	+	N	+	+	+	+	+	N	N	+ .	+	+
UTERUS Adenoma, nos Fibrosarcoma	-	+	+	+	A	+	÷	-	-	* ×	•	+	+	+	+	÷	+	+	+	+	-	+ ×	+	+	1
ENDOMETRIAL STROMAL POLYP		•																							-+
DVARY	Ŀ	+	+	+	A	+	+	-	+	+	+	+	+	+ -	•	+	+	<u>+</u>	+	+	+	+	+	+	4
BODY CAVITIES Mesentery Fibrosarcoma	N	H	H	N	A	N	N	H	H	N	N	N	Ņ	N	N	н	N	H	N	N	N	NX	H	N	N
ALL OTHER SYSTEMS	├──																								+
MULTIPLE ORGANS HOS Malignant Lymphoma, Hos Leukemia, Nos Lymphocytic Leukemia	N	N	N	N	A	N	N	N	H	N	N	N	N	N	N X	N	N	N	N	N	N	N	H	H	н

+: TISSUE EXAMINED MICROSCOPICALLY -: Reguired Tissue not examined Microscopically X: Tumor Incidence -: Necropsy, no Autolysis, no Microscopic Examination

: NU TISSUE INFORMATION SUBMITTED C: NECROPSY, NO HISTOLOGY DUE TO PROTOCOL A: Autolysis M: Animal Missing B: No Hecropsy Performed

TABLE A4. FEMALE RATS: TUMOR PATHOLOGY (CONTINUED) HIGH DOSE

ANIMAL NUMBER	0 7 6	0 7 7	0 7 8	0 7 9	0 8 0	0 8 1	8	0 8 3	8	0 8 5	8 6	0 8 7	0 8 8	8	2	9	2	9	9	9	9	?	9	9	0	TOTAL
WEEKS ON Study	0 9	1	0 7 7	0	0	0 3(9	0	0 5	0 4 5	0	1	5	0	2	0	0	0	1	0	0	9	104	0	0 1 7	TISSU
ESPIRATORY SYSTEM	+		<u>_</u> д	. 91		_21	_11	_9.1	لع					_11		-11			ىتى		للقيت					
LUNGS AND BRONCHI Adenocarcinoma, nos, metastatic Alveolar/Bronchiolar Adenoma	Ļ	+	, _x_	+	+	+	+	A	+	•	*	+	+	+	+	+	+	+	+	+	+	+	+	+	+	48
TRACHEA	+	+	+	+	+	+	-	A	+	+	+	+	+	+	+	+	-	+	٠	+	+	+	+	+	+	46
EMATOPOIETIC SYSTEM	+																									
BONE MARROW	-	+	+	+	. +	+	+	A	.+	+	+	+	+	+	+	-	+	+	+	+	+	<u>,</u>	+	t	+	44
SPLEEN	++	+_	+	+	+	+	÷	A .	+	+	+	+	+	+	+	+	-		+	+	+	. <u>+</u>	+	+	+	45
LYMPH NODES	++	+	+	+	+	<u>+</u>	+	A	+	-	+	+	-	t	+	+	+	+	+	+	+	-	+	+	+	. 41
THYMUS	-	-	-	-	-	+	~	A	+	+	-	-	+	-	-	-	-	-	-	-	-	-	-	+	+	8
SIRCULATORY SYSTEM	+																					-			-1	
HEART	+	+	+	+	+	+	+	A	+	+	+	٠	+	+	+	÷	+	+	+	+	+	+	٠	+	+	48
DIGESTIVE SYSTEM	+																-								1	·
SALIVARY GLAND	++	+	+	+	+	+	-	٨	+	+	+	+	+	+	+	+	+	+	+	+	+	<u> </u>	+	+	+	. 46
LIVER	++	+	+	+	+	+	+	A	+	+.	t_	<u>+</u>	+	+	*	-	+	+	+	+	+	+	+	+	+	. 45
BILE DUCT	1 ·	+	+	+	+	+	*	A	+	+	+	+	+	+	+	-	+	+	+	+	+	+	+	÷	+	45
GALLBLADDER & COMMON BILE DUCT	N	N	N	N	N	N	N	A.,	Ν.	N	N.	N	Ν.	N	N	N	N	н.	N	N.,	Ν.,	<u>N</u>	N	_N_	N	48×
PANCREAS	1.	+	+	+	+	+	+		+	+	+	+	+	+	+	+	<u>+</u>	-	<u>+</u>	+	+	+	÷	+	+	46
ESOPHAGUS	1.	+	+	+	+	+		A	+	+	+	+	+	+	+	÷	-	+	+	+	+	+	-	+		42
STOMACH	+	+	+	+_	+	+		A	-	+	+	+	-	+	+	+	+	-	+		+		+	+	+	39
SMALL INTESTINE	+	+	+	+	+	+	÷	A	~	+	+	+	-	+	+	-	+	-	+	-	+	-	+	+	+	38
LARGE INTESTINE	+	+	+	+	+	+	+	A	-	+	÷	÷	-	+	+	-	+	-	+	-	+	-	+	+	+	38
RINARY SYSTEM	+																								-+	
KIDNEY	1+	+	+.	+	+	+	+	A	+	+	٠	+	+	+	+	-	<u>+</u>	-	+	+	+	+	+	+	.+	45
URINARY BLADDER	+	+	٠	+	-	+	-	A	+	+	+	+	+	+	+	-	+	-	+	+	+	-	÷	+	+	37
NDOCRINE SYSTEM	+				_			-								-							-		-	
PITUITARY Chromophobe Adenoma	ŀ	+	+	+	+	+	+		+	+	+	+	+	+	+	•	ż	ż.	ż.	+	•	•	+	+	+	45 12
ADRENAL	++	+	+	+	+	+	+	Α.	+	+	•	+	+	+	+	+	<u>+</u>	-	ŧ.	+	+	+	+	+	┵	46
THYROID Follicular-cell Adenoma Follicular-cell Carcinoma C-cell Adenoma	+	+ ×	•	•	•	+	-	A	+	+	+	+ X	+	+	+	+	-	+	+	+	+	+	+	+	+	45 1 2
PARATHYROID	1-	,	+	-	_	+	-		+	-	+	-	+	+	+	+	-	+	+	+	-	+	-	+	-	28
EPRODUCTIVE SYSTEM	+																								-+	
MAMMARY GLAND Adehocarcinoma, nos fibroadenoma	+	٠	N X	+	+	+	N	A	N	N	٠	٠	H	٠	+	+ x	N	+	+	N	N	+	+	N	N	48× 1 10
UTERUS Adenoma, Nos Fibrosarcoma Endometrial Stromal Polyp	+	+	+	•	+	+	+		+	-	+	+	+	+ ×	+	÷	+	-	+	+	.+	+	+	-	-	40 1 2
OVARY	1.	- <u>^</u>	+	+	+	+	+		+	+	+	+	+	<u>۔م</u>	+	+	+	-	÷	+	+	+	+	+	+	45
ODY CAVITIES	Ļ	<u> </u>														·	—			-					-+	
MESENTERY FIBROSARCOMA	N	N	N	N	N	N	N	A	H	N	N	N	N	N	н	N	N	N	N	н	N	H	N	N	N	48× 1
LL OTHER SYSTEMS	+						_					_													+	
MULTIPLE DRGANS NOS Malighant Lymphoma, NDS Leukemia,NOS Lymphocytic Leukemia	N	N	N	N	N	N	N X X	A	N	H	N	N	N	N	N	N	N	H	N	н	н	м	н	м	M	48× 1 1
AHIMALS NECROPSIED +: TISSUE EXAMINED MICROSCOP -: REQUIRED TISSUE NOT EXAMI X: TUMOR INCIDENCE N: NECROPSY, NO AUTOLYSIS, N											: 4: M:	AU	ITOL	55U P\$Y Y5I L M	E 1 , N S			0LC	N S	DUI	MITI E T(TED) Pi	101	000	L	

Pentachloroethane

APPENDIX B

SUMMARY OF THE INCIDENCE OF NEOPLASMS IN MICE ADMINISTERED PENTACHLOROETHANE BY GAVAGE

TABLE B1.

SUMMARY OF THE INCIDENCE OF NEOPLASMS IN MALE MICE ADMINISTERED PENTACHLOROETHANE BY GAVAGE

	VEHICLE Control	LOW DOSE	HIGH DOSE
ANIMALS INITIALLY IN STUDY ANIMALS NECROPSIED ANIMALS EXAMINED HISTOPATHOLOGICALLY	50 48 48	50 44 44	50 45 45
INTEGUMENTARY SYSTEM			
*MULTIPLE ORGANS FIBROUS HISTIOCYTOMA, MALIGNANT	(48)	(44) 1 (2%)	(45)
*SUBCUT TISSUE FIBROMA	(48)	(44) 1 (2%)	(45)
RESPIRATORY SYSTEM			
#LUNG HEPATOCELLULAR CARCINOMA, METAST ALVEOLAR/BRONCHIOLAR ADENOMA ALVEOLAR/BRONCHIOLAR CARCINOMA	(47) 1 (2%) 3 (6%) 3 (6%)	(41) 2 (5%) 4 (10%) 1 (2%)	(44)
EMATOPOIETIC SYSTEM			
*MULTIPLE ORGANS Malignant Lymphoma, Nos	(48)	(44) 1 (2%)	(45)
#SPLEEN MALIGNANT LYMPHOMA, NOS	(46) 1 (2%)	(38)	(42)
IRCULATORY SYSTEM			
#SPLEEN Hemangioma	(46) 3 (7%)	(38) 2 (5%)	(42)
#LIVER HEMANGIOMA HEMANGIOSARCOMA	(48) 1 (2%)	(44) 3 (7%) 1 (2%)	(45)

	VEHICLE Control	LOW DOSE	HIGH DOSE
DIGESTIVE SYSTEM			
#LIVER HEPATOCELLULAR ADENOMA HEPATOCELLULAR CARCINOMA	(48) 10 (21%) 4 (8%)	(44) 4 (9%) 26 (59%)	(45) 7 (16%) 7 (16%)
#STOMACH Squamous cell papilloma Basal-cell carcinoma	(46)	(37) 3 (8%) 1 (3%)	(40)
#JEJUNUM PAPILLARY ADENOMA	(45)	(30) 1 (3%)	(37)
URINARY SYSTEM			
#KIDNEY Tubular-cell Adenocarcinoma	(47) 1 (2%)	(40)	(45)
ENDOCRINE SYSTEM			
#PITUITARY Adenoma, Nos	(35)	(25)	(34) 1 (3%)
#ADRENAL Pheochromocytoma	(47) 1 (2%)	(40)	(45)
#THYROID Follicular-cell Adenoma	(45) 1 (2%)	(37) 1 (3%)	(36)
REPRODUCTIVE SYSTEM			
NONE			
NERVOUS SYSTEM			
NONE			
SPECIAL SENSE ORGANS			
NONE			

TABLE B1. MALE MICE: NEOPLASMS (CONTINUED)

* NUMBER OF ANIMALS NECROPSIED

TABLE B1. MALE MICE:	NEOPLASMS	(CONTINUED)
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	VEHICLE Control	LOW DOSE	HIGH DOSE
MUSCULOSKELETAL SYSTEM			
NONE			
BODY CAVITIES			
NONE			
ALL OTHER SYSTEMS			
*MULTIPLE ORGANS Sarcoma, Nos	(48) 1 (2%)	(44) 2 (5%)	(45)
ANIMAL DISPOSITION SUMMARY			
ANIMALS INITIALLY IN STUDY	50_	50	50
NATURAL DEATHƏ Moribund sacrifice	5	2 1 7	19 23
SCHEDULED SACRIFICE Accidentally killed	25		
TERMINAL SACRIFICE Animal missing	19	22	8
INCLUDES AUTOLYZED ANIMALS			

,

TABLE B1.	MALE MICE:	NEOPLASMS	(CONTINUED)

	VEHICLE Control	LOW DOSE	HIGH DOSE
TUMOR SUMMARY			
TOTAL ANIMALS WITH PRIMARY TUMORS* Total primary tumors	20 29	38 52	14 15
TOTAL ANIMALS WITH BENIGN TUMORS Total benign tumors	15 19	15 19	7 8
TOTAL ANIMALS WITH MALIGNANT TUMORS Total malignant tumors	7 10	31 33	777
TOTAL ANIMALS WITH SECONDARY TUMORS# Total secondary tumors	1	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 SE Secondary Tumors: Metastatic tumors (DJACENT ORGAN

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TABLE B2.

SUMMARY OF THE INCIDENCE OF NEOPLASMS IN FEMALE MICE ADMINISTERED PENTACHLOROETHANE BY GAVAGE

	VEHICLE Control	LOW DOSE	HIGH DOSI
ANIMALS INITIALLY IN STUDY Animals necropsied Animals examined histopathologically	50 48 48	50 43 43	50 45 45
INTEGUMENTARY SYSTEM			
RESPIRATORY SYSTEM			
#LUNG CARCINDMA, NOS, METASTATIC	(46)	(41)	(41)
HEPATOCELLULAR CARCINOMA, METAST Alveolar/bronchiolar Adenoma Alveolar/bronchiolar carcinoma Osteosarcoma, metastatic	3 (7%)	1 (2%)	3 (7%)
HEMATOPOIETIC SYSTEM	* = = = = = . * * * * = = = =		
<pre>MULTIPLE ORGANS MALIGNANT LYMPHOMA, NOS</pre>	(48) 7 (15%)	(43) 2 (5%)	(45) 1 (2%)
#SPLEEN Malignant Lymphoma, Nos	(45) 1 (2X)	(35)	(41)
<pre>#LIVER MALIGNANT LYMPHOMA, NOS</pre>	(46)	(42)	(45) 1 (2X)
#JEJUNUM Malignant Lymphoma, nos	(39)	(21)	(22)
#KIDNEY Malignant Lymphoma, nos	(42)	(39)	(43) 1 (2%)
CIRCULATORY SYSTEM			
#SPLEEN Hemangiosarcoma	(45)	(35)	(41)

	VEHICLE Control	LOW DOSE	HIGH DOSE
#LIVER HEMANGIOMA HEMANGIOSARCOMA	(46)	(42) 1 (2%) 1 (2%)	(45)
HEMANGIOSARCOMA DIGESTIVE SYSTEM			
#LIVER HEPATOCELLULAR ADENOMA HEPATOCELLULAR CARCINOMA LIPOMA	(46) 2 (4%) 1 (2%) 1 (2%)	(42) 8 (19%) 28 (67%) 1 (2%)	(45) 19 (42%) 13 (29%)
#STOMACH Papilloma, Nos squamous cell papilíoma	(42)	(23) 1 (4%)	(26) 1 (4%) 1 (4%)
#CECUM LEIOMYOMA	(38) 1 (3%)	(21)	(21)
NONE ENDOCRINE SYSTEM			
NONE		و هو به به به به به به به به به به به به به	
PITUITARY Adenoma, Nos	(35) 5 (14%)	(29) 3 (10%)	(32) 1 (3%)
#ADRENAL Cortical carcinoma Pheochromocytoma	(41)	(39) 1 (3%) 1 (3%)	(41)
#THYROID Follicular-cell Adenoma	(45) 2 (4%)	(38) 1 (3%)	(37)
REPRODUCTIVE SYSTEM			
#OVARY CYSTADENOMA, NDS	(41) 1 (2%)	(34)	(39)
NERVOUS SYSTEM			

TABLE B2. FEMALE MICE: NEOPLASMS (CONTINUED)

TABLE B2.	FEMALE MICE:	NEOPLASMS	(CONTINUED)

	VEHICLE Control	LOW DOSE	HIGH DOSE
SPECIAL SENSE ORGANS			
*EYE/LACRIMAL GLAND PAPILLARY ADENOMA	(48) 1 (2%)	(43)	(45)
MUSCULOSKELETAL SYSTEM			
*BONE OSTEOSARCOMA	(48) 1 (2%)	(43)	(45)
BODY CAVITIES			
NONE	~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~		
ALL OTHER SYSTEMS			
SITE UNKNOWN Carcinoma,nos	1		
ANIMAL DISPOSITION SUMMARY			
ANIMALS INITIALLY IN STUDY NATURAL DEATHƏ MORIBUND SACRIFICE	50 9 2	50 33 8	50 31 19
SCHEDULED SACRIFICE ACCIDENTALLY KILLED TERMINAL SACRIFICE ANIMAL MISSING	1 38	9	
A INCLUDES AUTOLYZED ANIMALS			

NUMBER OF ANIMALS WITH TISSUE * NUMBER OF ANIMALS NECROPSIED

	VEHICLE Control	LOW DOSE	HIGH DOSE
IUMOR SUMMARY			
TOTAL ANIMALS WITH PRIMARY TUMORS* Total primary tumors	22 31	38 48	33 41
TOTAL ANIMALS WITH BENIGN TUMORS Total Benign Tumors	13 16	13 16	22 25
TOTAL ANIMALS WITH MALIGNANT TUMORS TOTAL MALIGNANT TUMORS	14 15	29 32	15 16
TOTAL ANIMALS WITH SECONDARY TUMORS# Total secondary tumors	22	1 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 SEC Secondary Tumors: Metastatic tumors (CONDARY TUMOR Dr tumors inv	S ASIVE INTO AN AD	JACENT ORGAN

TABLE B2. FEMALE MICE: NEOPLASMS (CONTINUED)

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TABLE B3.

INDIVIDUAL ANIMAL TUMOR PATHOLOGY OF MALE MICE IN THE 2-YEAR STUDY OF PENTACHLOROETHANE

VEHICLE CONTROL

ANIMAL NUMBER	0	0	0	0	0	0	0	0	0	1	0	0	0	0	0	0	0	1	0 1 9	0 2 0	0	2	2	24	0
WEEKS ON STUDY	0	0 4	0	-7	0	-0 4	0	8	0	0	4	0	8	0	0	0	0	8	-8	0	0	0 4	04	4	- 2
RESPIRATORY SYSTEM	+41	4	- 91	_41	4	41	41	4)	41	41	. 41	41	41	4	.41	41	4]	41	4	4	- 4	4	- 4 [- 4	. 4
LUNGS AND BRONCHI Hepatocelular carcinoma, metasta Alveolar/bronchiolar adenoma Alveolar/bronchiolar carcinoma	+ ×	+	+ X	+	+	+	+	+	+	+	+	+	+	+	•	+	+	+	+	+	+	+	-	+	+
TRACHEA	+	+	÷	+	+	+	+	÷	+	+	+	+	+	÷	+	+	-	÷	+	+	÷	+	+	+	+
HEMATOPDIETIC SYSTEM	+-																								
BONE MARROW	L+	+	-	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+		+	+	+	+
SPLEEN Hemangioma Malignant lymphoma, nos	ŀ	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	-	+	+
LYMPH NODES	+	+	-	+	+	+	<u>+</u> .	+	+	+	+	+	+	+	+	+	-	-	+	+	+	+	+	_	+
THYMUS	+	+	-	-	-	+	+	+	+	-	+	-	+	+	+	+	+	+	+	+	+	+	+	+	+
CIRCULATORY SYSTEM	+	~										_						_							
HEART	+	+	+	+	÷	÷	÷	+	+	÷	+	+	÷	+	+	+	+	÷	+	+	+	+	-	÷	+
DIGESTIVE SYSTEM	╆──						_					,												-	
SALIVARY GLAND	4	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+
LIVER HEPATOCELLULAR ADENOMA HEPATOCELLULAR CARCINOMA HEMANGIOMA	×	+	* X	+	+	+	+	+	+	+	+	+	+		* x	+	+	+	+	+	+	+	+	* ×	* X
BILE DUCT	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+
GALLBLADDER & COMMON BILE DUCT	+	+	N	+	N	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	N	N
PANCREAS	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	-	+	+
ESOPHAGUS	+	+	+	+	*	+	+	+	+	-	+	+	•	+.	+	+	-	+	+	+	+	+	+	+	÷
STOMACH	+	+	+	+	+	+	+	+	+	+	+	+	+ -	+	+	+	÷	+	+	+	+	+	+	+	+
SMALL INTESTINE	+	+	+	+	-	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+
LARGE INTESTINE	+	+	+	+	+	÷	+	-	+	+	+	+	+ •	+	+	+	+	+	+	+	+	+	+	+	+
URINARY SYSTEM				-						<u> </u>															
KIDNEY Tubular-Cell Adendcarcinoma	+	+	+	+	+	+	+	+	+	+	+	+	+ •	+	+	+	+	+	+	+	+	+	+	+	+
URINARY BLADDER	+	+	+	+	+	+	+	+	+	+	+	+		+	-	+	+	+	+	+	+	+	+	÷	-
ENDOCRINE SYSTEM															_										-
PITUITARY	+	+	-	+	-	+	+	+	-	+	+	<u>+</u>		<u>+</u>	t	<u>+</u>	-	+	+	+	+	+	+	+	÷
ADRENAL Pheochromocytoma	+	+	+	+	+	+	+	+	+	+	+	+	+ +	•	+	+	-	+	+	+	+	+	+	+	+
THYROID Follicular-cell Adenoma	+	+`	+	+	+	+	+	+	+	+	+	+	+ +	•	+	+	-	+	+	+	+	+	•	+	+
PARATHYRDID	+	+	+	+	-	+	+	+	+	+	+	+ •	+ +	•	+ ·	•	-	+	+	+	+	+	+	-	-
REPRODUCTIVE SYSTEM																		-							1
MAMMARY GLAND	н	н_	N	N	н	<u>N</u>	<u>N</u>	<u>N</u>	N.	<u>N</u>	N	<u>1 1</u>	N N	<u> </u>	N_1	<u>ب</u>	N	N	<u>N</u>	N	Ν	Η	H	N	N
TESTIS	+	+	+	+	-	+	+	+	+	<u>+</u>	+ •	• •	+ +		+ •	<u>.</u>	+	+	+	+	+	+	+	+	+
PROSTATE	-	+ '	+	-	+	-	+	+	+	+	+ +	•_•	+ +	•	• •	• •	•	+	+	+	+	+	+	+	+
ALL OTHER SYSTEMS																									
MULTIPLE ORGANS NOS	N	N	N	N	N	N	N	N	N	N	N 1	4 1	N N	1 1	N 1	1 1	N	N	N _	N	N	N	N	N	N

+:: -:: N:

: NO TISSUE INFORMATION SUBMITTED C: NECROPSY, NO HISTOLOGY DUE TO PROTOCOL A: Autolysis M: Animal Missing B: No Necropsy Performed

TISSUE EXAMINED MICROSCOPICALLY Required Tissue not Examined Microscopically Tumor Incidence Necropsy, no Autolysis, no Microscopic Examination

	I UIV					טר		<i></i>		10					. U,								i W (
ANIMAL NUMBER	0	27	2	2	0	0 3	3	0	3	03	0	0	0	03	04	0	04	4	4	9	0 4	4	4	4	0	
WEEKS ON		11	8			╢	2	3	+	-0	1	#	1	什	1	╫	1	1	1	퀴	1	∄	-	-	-	TISSUE
STUDY	0	0 4	8 4	0 4	4	2	8	0 4	8	8	4	4	9	4	9	0 4	1	9	9	4	4	4	4	4	4	TUMOR
RESPIRATORY SYSTEM																										
LUNGS AND BRONCHI Hepatocellular carcinoma, metast Alveolar/bronchiolar adenoma Alveolar/bronchiolar carcinoma	A X	+	+	+	+	A	+ X	+	A	+	+	+	+	+	+	+	+	+	+ ×	+	+	•	+ .x	+	+	47 1 3 3
TRACHEA	+	+	+	+	+		+	+	A	+	+	+	+	+	4	+	+	+	+	+	+	+	÷	+	+	47
HEMATOPOIETIC SYSTEM											_														-	
BONE MARROW		+_	ŧ	. t_	+	A	+	+	A	+	+	+	+	-	+	+	+	+	-	+	+	+	+	+	+	44
SPLEEN Hemangioma Malignant Lymphoma, Nos	+ X	+	-	+	+	A	+	*	A	+	+	+	•	*	+	+	+	+	+	+	+	*	+	+	+	46 3 1
LYMPH NODES	l t	+_	_	+	-	_A	+	-	A	-	+	+	-	<u>+</u>	+		+	+	+	+	+	+	+	+	+	38
THYMUS	-	-	-	-	-	A	-	-	Α.	-	-	-	-	-	•	-	-	-	-	-	-	-	-	-	-	20
CIRCULATORY SYSTEM				_																					+	
HEART	+	÷	÷	+	÷	A	+	÷	A	+	÷	÷	÷	+	÷	+	+	+	+	+	+	+	+	+	+	47
DIGESTIVE SYSTEM															_										-+	
SALIVARY GLAND	<u>_</u> +_	+	+	+	+		ŧ.	+	A	+	+	+	+	+	+	+	+	+	+	+	<u>+</u>	+	+	+	+	48
LIVER	+	+	+	+	+	A	+	+	A	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	48
HEPATOCELLULAR ADENOMA Hepatocellular carcinoma Hemangioma	×			×				x				x			×				×		×	×		×	<u>×</u>	10 4 1
SILE DUCT	++	+	+	+	+	<u>A</u>	+	<u>+</u>	Α	+.	+	+	+	<u>+</u>	+	+	+	+	+	_+	+	+	+	+	+	48
GALLBLADDER & COMMON BILE DUCT	++	N	N	N	+	Α	<u>+</u>	+	Α	÷	+	+	+	N	+	+	+	+	N	N	N	+	N.	+	N	48*
PANCREAS	+	+	-	+	+	A	+	+	A	+	+	+	+	+	+	+	+	+	ŧ	+	+	+	+	+	+	46
ESOPHAGUS	++	<u>+</u>	+	+	+	A	+	*	Α_	+	+		+	+		-	+	+	+	+	+	+	+		+	42
STOMACH	1+	+	<u>+</u> _	+	+	Α	+	+	A	-	+	+	+	+	+	+	-	+	+	+	+	+	+	+	+	46
SMALL INTESTINE	+	+	-	+	+	<u>A</u>	+	+	A	-	+	<u>+</u>	+	+	<u>+</u>	<u>+</u>	+	+	+	+	+	+	+	+	+	45
LARGE INTESTINE	+	+	-	+	+	A	+	+	A	-	+	+	+	+	+	÷	+	+	+	+	+	+	+	+	+	45
URINARY SYSTEM	+											-				-		_					_			
KIDNEY TUBULAR-CELL ADENOCARCINOMA	+	+	+	+	+	٨	+	+	A	+	+	+	•	+	+	+	+	•	-	+	<u>+</u>	+	ż	+	+	47
URINARY BLADDER	+	+	+	+	+	A	+	+	A	+	+	+	+	+	+	7	+	+	-	+	+	+	+	+	+	43
ENDOCRINE SYSTEM			-																						Τ	
PITUITARY	++	+	+	-		<u> </u>	+	+	_A _	-	+	+	+	+	-	+	+	-	-			•	+	+	┿	35
ADRENAL Pheochromocytoma	+	•	+	+	+	A	+	<u>+</u>	A	+	+	*		+	+	+		+	+	+	+	+	+	+	+	47 1
THYROID Follicular-cell Adenoma		+	+	+	+	A			A	+	+	+	-	+		+		<u>*</u>	+	+	+	+	+	+	4	45
PARATHYROID	-	+	-	-	-	A	+	+	A	•	+	-	-	-	+	-	+	-	-	+	+	-	+	-	-	30
REPRODUCTIVE SYSTEM																										
MAMMARY GLAND	<u>↓</u> N	N	N	N	N_	A	<u>N</u>	<u>N_</u>	<u>A</u>	N	<u>N</u>	<u>N</u>	<u>N</u>	N	N	N		<u>N</u>	Ν.	Η_	<u>N</u>	<u>N</u>	N	<u>N</u>	-14	<u> 48×</u>
TESTIS	++-	+	+	+	<u>+</u> .	A	<u>+</u>	+	<u> </u>	+	<u>+</u>	+	+	+	+	+		+	+	+	.+	-	+	+	+	46
PROSTATE	+	+	-	+	+	A	+	+		+	-	+	+	+	+	+	-	+	+	+	+	-	+	+	*	41
ALL OTHER SYSTEMS																										
MULTIPLE ORGANS NOS	N I	NX	N	N	N	A	N	N	A	H	N	N	N	H	N	N	H	H	N	N	N .	N	H	N	N	48×

TABLE B3. MALE MICE: TUMOR PATHOLOGY (CONTINUED) VEHICLE CONTROL

+: TISSUE EXAMINED MICROSCOPICALLY -: Reguired Tissue not examined microscopically X: Tumor incidence N: Necropsy, No Autolysis, No Microscopic examination

: NO TISSUE INFORMATION SUBMITTED C: NECROPSY, NO HISTOLOGY DUE TO PROTOCOL A: Autolysis M: Animal Missing B: No Necropsy Performed

* ANIMALS NECROPSIED

TABLE B3.

INDIVIDUAL ANIMAL TUMOR PATHOLOGY OF MALE MICE IN THE 2-YEAR STUDY OF PENTACHLOROETHANE

					LO	W	D	OS	E																
ANIMAL	0	0	0	0	0	0	0	0	0	0	0	1	0	0	0	1	1	9	1	2	2	2	2	2	3
WEEKS ON	+	2	-3	4	5	-6	- 2	8	-8	8		4	3	4	5	6	- 1	4	2	- Ì	2	2	-	4	뷖
STUDY	0	8	0 4	0	3	0	8	9	6	8	0	4	6	04	03	9	0	4	0	04	0	8	0	0	0
INTEGUMENTARY SYSTEM																									Т
SUBCUTANEGUS TISSUE Fibroma	+	N	+	+	+	+	+	+	A	A	+	+	+	N	+	N	+	+	м	+	+	+	+	+	+
RESPIRATORY SYSTEM	+			• • •																	•				+
LUNGS AND BRONCHI Hepatocelular carcinoma, metasta Alveolar/Bronchiolar adenoma Alveolar/Bronchiolar carcinoma	+	-	+ x	+ X	+	+	+	+		A	+	+	+	+	-	+	+	+	+	+	*	+	+	+	+
TRACHEA	+	+	+	+	-	÷	+	+	A	A	+	÷	-	+	+	÷	÷	÷	+	+	÷	+	+	+	+
REMATOPOIETIC SYSTEM	+																								+
BONE MARROW	L+	+	+	+	+	+	+	+	A	Α.	+	+	+	+		+	+	+	÷	+	-	÷	+	+	+
SPLEEN Hemangioma	+	+	+	+	+	+	-	+	A	A	+	+ X	+	+	-	+	÷	÷	-	+	+	-	+	+	۰
LYMPH NODES	+	-	-	+	-	+	-	-	A	Α.	÷	+	+	-	+	+	+	+	+	+	+	-		+	+
THYMUS	-	-	-	-	-	-	-	-	A	A	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
CIRCULATORY SYSTEM	+						•							-								·			+
HEART	+	+	+	+	+	+	+	+	A	A	+	+	+	-	+	÷	+	÷	+	+	+	+	+	+	+
DIGESTIVE SYSTEM				_													-								┽
SALIVARY GLAND	+	-	+	+	+	+	+	+	Α.	A	+	+	+	t	+	+	+	+	+	+	+	+	+	+	+
LIVER HEPATOCELLULAR ADENOMA HEPATOCELLULAR CARCINOMA HEMANGIOMA HEMANGIOSARCOMA	+ ×	×	+	+	+ x	+	+ ×	+ ×	*	A	* × .	+ X		+ ×		+ x	+ ×	* ×	+ ×	•	+ X	+ ×	+ x		+ ×
BILE DUCT	+	+	+	+	+	+	+	+	A	A	+	+	+	+	+	+	÷	+	+	+	+	+	+	+	Ţ
GALLBLADDER & COMMON BILE DUCT	N.	+	+	N	+	N	N	N	A	A	N	N	+	+	N	+	+	+	Ν	+	N	N	+	+	۰Ī
PANCREAS	+	+	+	+	+	+	-	+		Α	+	+	+	+	-	+	+	+	-	+	÷	-	+	+	Ţ
ESOPHAGUS	+	+	+	+	-	+	+	+	A	A	+	+	-	÷	+	+	÷	+	÷	-	÷	+	-	+	+
STOMACH Squamous cell papilloma Basal-cell carcinoma	+ ×	-	+	+	+	•		*	A	•	•	* ×	+	+	-	+	+	+	-	+	+	+	+	+]
SMALL INTESTINE Papillary Adenoma	+	-	*	+	+	+	-	+	A	A	+	• •	+	+		+	+	+	-	+	+	-	+	+ •	•
LARGE INTESTINE	+	-	-	+	+	+	-	+	A	A	+ •	• •	+ •	+	-	+	+	+	-	+	+	-	+	+ •	-
URINARY SYSTEM										_			_												†
KIDNEY	+	+	-	+	+	<u>+</u>	+	+	<u>A</u>	Α	<u>+ </u> +	+ +	<u> </u>	• •	+ •	•	+	+		+	-	+	+	+ +	4
URINARY BLADDER	+	÷	+	+	+	+	+	+	A	A	+ +	+ +	• •	•		•	+	+	-	÷	÷	+	+	+ +	1
ENDOCRINE SYSTEM							_							_											+
PITUITARY	-	+	<u>+</u>	+	+	+	-	+	Α.	A	<u>+ </u>	<u> </u>	<u> </u>	ŀ. •			+	+	-	•		-			4
ADRENAL	+	+	+	+	+	<u>+</u>	+	+	Α	A	- 1	<u> </u>	<u> </u>			• •	+	+		<u>.</u>	<u>.</u>	+	<u>+</u>	+ +	4
THYROID Follicular-cell adenoma	+	+	•	+	-	+	+ -	+	A	A -	+ -			• •		• •	•		• •	•		+	+ •	• •	•
PARATHYROID	+	+	+	-	-		+	-	A i	A ·	+ -	• -	-	• -		• •	•				•	+	+ •		
REPRODUCTIVE SYSTEM														-						-					†
MAMMARY GLAND	<u>N</u>	N	N	N	Ν	N	N. 1	N	A i	<u> </u>	<u>4. N</u>			LN	<u> </u>	<u></u>	<u> </u>	N	1 1	1_1	<u></u>	N	<u>N_</u>	4 N	4
TESTIS		+	+	+	<u>+</u>	<u>+</u>	<u>+</u> _;	<u>.</u>	<u>A</u>	<u>م</u>	- +	+		-	<u> </u>			•	• •	<u>.</u> 1	<u> </u>	+	<u>+</u>	<u> </u>	4
PROSTATE	+	+	+	+	+ ·	+ •	• •	-	A I	4	+ +	-	+	-	- +	• •	• •	• •		• •	• •	•	+ +	+ +	1
ALL OTHER SYSTEMS Multiple organs nos Sarcoma, nos Etronas destrocytoma maltenant	N	N	N	N	N I	4 1	1	4	A /	•	I N	N	N	N	I N		}	• ;				4 1	N H	н н	ļ
SARCOMA, NOS FIBROUS HISTIOCYTOMA, MALIGNANT MALIGNANT LYMPHOMA, NOS						_	,	٢																	1

+: TISSUE EXAMINED MICROSCOPICALLY -: REQUIRED TISSUE NOT EXAMINED MICROSCOPICALLY X: TUMOR INCIDENCE N: NECROPSY, NO AUTOLYSIS, NO MICROSCOPIC EXAMINATION

: NO TISSUE INFORMATION SUBMITTED C: NECROPSY, NO HISTOLOGY DUE TO PROTOCOL A: AUTOLYSIS M: ANIMAL MISSING B: NO NECROPSY PERFORMED

TABLE B3. MALE MICE: TUMOR PATHOLOGY (CONTINUED)

LOW DOSE

ANIMAL NUMBER	2	2	2	2	3	3	3	3	3	3	3	3	3	3	4	4	4	4	4	4	4	4	0 4 8	049	5	TOTAL
WEEKS DN Study		ŝ	9	\$		4	6		1	1	ᡥ	ŝ	-		1		0 3	3	9	3	0	9	0	?		TISSUES
INTEGUMENTARY SYSTEM	لف	i	ó	اف	ă	61	ž	Ă.	4	<u> </u>	Ă.	-	Ă.	4	il	41	3	41		i	2	8	8	_فا_	4	
SUBCUTANEOUS TISSUE FIBROMA	÷	٠	+	٠	٠	٠	A	٠	٠	+	٠	+	+	+	٠	+	A	A	+	٠	٠	٠	٠	A	н	44× 1
RESPIRATORY SYSTEM							<u> </u>																-		-+	
LUNGS AND BRONCHI Hepatocellular carcinoma, metasta Alveolar/bronchiolar adenoma Alveolar/bronchiolar carcinoma	×	•	+	+	+	+	•	+	+	+	+ x	+	+ ×	+	+	•	*	A	+ ×	-	•	+	+		•	41 2 4
TRACHEA	+	+	-	٠	+	+	A	+	+	+	+	+	+	+	+	+	A	A	+	+	+	+	÷	A	+	41
HEMATOPOIETIC SYSTEM																				_					+	
BONE MARROW	+	-	+	+	+.	+		+	+	+	+	+	+	+	+	+		Α_	ŧ	+	+	+	+	A	_	40
SPLEEN Hemangioma	+	-	•	+	+	+	٨	•	٠	+	+	+	+	+	+	+		A	+	+	+	* x	+	A	-	38 2
LYMPH NODES	+	t	÷		-	+		+	+	+	+	+	+	+	+	<u>+</u>		٨	+	-	-	-	+	<u> </u>	-	30
THYMUS	-	-	-	-	-	÷	A	-	-	-	-	-	-	-	-	-	A	A	••	-	-	-	•	A	-	1
CIRCULATORY SYSTEM																							_		+	
HEART	+	+	+	÷	+	÷	A	٠	+	+	+	+	+	+	+	+	A	A	÷	+	+	+	٠	A	+	43
DIGESTIVE SYSTEM																									+	
SALIVARY GLAND	+	+	+	+	+	+	٨	+	+	+	t	+	+	+	+	÷	A	A	+	+	+	+	+	. A	+	.43
LIVER	+	+	+	+	+	+		+	•	+	+	+	+	+	+	+	A	A	+	+	* ×	+	÷	A	+	44
HEPATOCELLULAR ADENOMA HEPATOCELLULAR CARCINOMA Hemangioma Hemangiosarcoma	x			×	×	×		×	×	x	×	×		×	×	×			×		×	×			×	26 3
BILE DUCT	+	+	+	+	+	+	A	÷	+	+	+	+	+	+	+	+	A	A	+	÷	+	+	+	A	+	44
GALLBLADDER & COMMON BILE DUCT	+	4	+	_N	Ν	N		+	N.	+	+	N	+	+	N	N	Α.	A	Ν	+	N	+	N	A	N	44×
PANCREAS	+		+	+	+.	+	A	+	+	+	+	+.	+	+	+	+	A	A	+	+	+	+	+		-	38
ESOPHAGUS	+	+	+	+	+	+	A	+		+	÷	+	+	+	+	+	A	A.,	+	+	+	+	+	A	+	39
STOMACH Squamous cell Papilloma Basal-cell carcinoma	+	+ X	+	+	+	-	A	•	+	+	+	+	+	+	+	+	A	•	-	+	+	-	+	A	-	37 3 1
SMALL INTESTINE PAPILLARY ADENOMA	+	-	+	-	+	-	٨	+	+	+	+	-	+	+	-	+	A	A	-	+	-	-	+	A	-	30
LARGE INTESTINE	+	-	+	-	-	-	A	+	٠	· +	+	+	+	+	-	+	A	A	-	-	-	-	-	A	-	27
JRINARY SYSTEM										-													_		+	
KIDNEY	+	+	+	+	+	t.		+_	+	+	+_	+	+	+	+	+	Α.	<u>A</u>	+	+	+	+	+	Α.	-	40
URINARY BLADDER	+	+	+	•	+	+	A	-	+	+	+	ŧ	÷	+	-	+	A	A	+	+	٠	+	+		-	38
NDOCRINE SYSTEM																	• • •						-		┥	
PITUITARY	+	-	<u>+</u> .	-	+	-		+	+	+	+		-	_	+	+	. A .	<u> </u>	-	-	+	+	+	Α	-	25
ADRENAL	+	+	+	+	+	+	۸.	+	+	+	+	+	+	+	+	+		٨.	+	+	+	+	+	Α.	-	40
THYROID Follicular-celi adenoma	+	+	* X	+	-	•	A	+	+	+	+	+	+	+	+	+	A	A	+	+	-	+	+	A	+	37
PARATHYROID	+	-	-	-	-	+	A	+	+	-	-	•	+	-	-	-	A	A	•	-	•	-	+		-	14
EPRODUCTIVE SYSTEM										_															+	
MAMMARY GLAND	N.	+	N	N	N	.N.	A	N.	N	N	N	N	Ν.	N	N	N	A	A	N	N	N	N	N	A	М	
TESTIS	+	+	+	-	+	+	A	-	+	+	-	+	+	+	+	+		Α.	+	+	+	+	+	Α.	-	35
PROSTATE	-	+	+	-	+	+	A	-	+	÷	+	+	+	+	-	+	A	A	-	+	-	+	-	A	-	32
LL OTHER SYSTEMS	ļ																		_~~				-		-+	
MULTIPLE ORGANS NOS Sarcoma, NOS Fibrous Histiocytoma, Malighant Malighant Lymphoma, Nos	н	N	H X	N	H	N	A	N	N	N	H	H	H	N	H	H	A	A	н	N	NX	N	N	A	N	44× 2 1

* ANIMALS NECROPSIED

+: TISSUE EXAMINED MICROSCOPICALLY -: REQUIRED TISSUE NOT EXAMINED MICROSCOPICALLY X: TUMOR INCIDENCE N: NECROPSY, NO AUTOLYSIS, NO MICROSCOPIC EXAMINATION

: NO TISSUE INFORMATION SUBMITTED C: NECROPSY, NO HISTOLOGY DUE TO PROTOCOL A: Autolysis Mianal Missing B: No Necropsy Performed

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TABLE B3.

INDIVIDUAL ANIMAL TUMOR PATHOLOGY OF MALE MICE IN THE 2-YEAR STUDY OF PENTACHLOROETHANE

LUNGS AND BRONCHI + + A + + + + A + + + + + + A A TRACHEA + + A + + + + + + + + + A A BONE MARROM + + A + + + + + + + A A BONE MARROM + + A + + + + + + A A BONE MARROM + + A + + + + + + A A SPLEEN + + A + + + + + A + + + + + A A LYMPH NODES + + A + + + + + A + + + + + + A A TRYNUS - + A + + + + A + + + + + + + + + A A CIRCULATORY SYSTEM HEART DIGESTIVE SYSTEM HEART SALIVARY GLAND LIVER HEFATOCELLULAR ADENMA HEFATOCELULAR ADENMA HEFATOCELLULAR ADEN		HIGH DOSE
STUDY STUDY		0 1 1
RESPIRATORY SYSTEM J. J. J. J. J. J. J. J. J. J. J. J. J. J	WEEKS DN Study	
TRACHEA + + A + + + + + + + + + + + + + + + + +	RESPIRATORY SYSTEM	
INTER Image: Constraint of the second of t	LUNGS AND BRONCHI	+ + + A + + + + + + + + + + + + + + + +
BONE MARROW • • • A • • • • A • • • A • • • • + • +	TRACHEA	+ + + A + + + + + + A + + + + + + + + A A
SPLEEN • • • • • • • • • • • • • • • • • • •	HEMATOPOIETIC SYSTEM	
L YMPH HODES + - + A + + + + + + + + + + + + + +	BONE MARROW	+ + + A + + + + + + + A + + + + + + + +
THYMUS - + - A + A + A - + - A A CIRCULATORY SYSTEM + + A + + A + + A + + A + + A + + A A DIGESTIVE SYSTEM + + A + + A + + A + + A + + A + + A A SALIVARY GLAND + + A + + A + + A + + A + + + + A A SALIVARY GLAND + + A + + A + + + + + A A + + + + + A A SALIVARY GLAND + + A + + + + + + + + + + + + + + + A A + + + + + + + + + + + A A SALUARY GLAND + + + + + + + + + + + + + + + + + + +	SPLEEN	+ + + <u>A</u> + <u>+</u> + + + + <u>A</u> + <u>+</u> + + + + + + <u>+</u> + <u>A</u> A
CIRCULATORY SYSTEM HEART + + A + + + + + + + + + + + + + + + + +	LYMPH NODES	+ - + A + + + + + A - + + + + + + +
HEART + + + A + + + + + + + + + + + + + + + +	THYMUS	- + - A + A + - + - + - A A
DIGESTIVE SYSTEM SALTVARY GLAND LIVER HEPATOCELLULAR ADENOMA HEPATOCELLULAR ADENOMA HEPATOCELLULAR ADENOMA HEPATOCELLULAR CARCINOMA BILE DUCT GALLBLADDER & COMMON BILE DUCT PANCREAS STOMACH STOMACH	CIRCULATORY SYSTEM	
SALIVARY GLAND + + A + - + + + + + + + + + + + + + + +	HEART	· · · · · · · · · · · · · · · · · · ·
LIVER + + + A + + + + + A + + + + + + + + + +	DIGESTIVE SYSTEM	
x x x x x x x x BILE DUCT + + A + + A + + A + + A + + A A A GALLBLADDER & COMMON BILE DUCT + + A + + A + + + A + + + A + + + A A A PANCREAS + + A + + + + + + A + + + + + + + + + + + A A A ESOPHAGUS + - A + + + + + + + + + + + + + + + + + + +	SALIVARY GLAND	<u>+ + + A + - + + + + A + + + + + + + + + </u>
GALLBLADDER & COMMON BILE DUCT + + + A + + + + + H + + + + H + + + + H + + + + + H A PANCREAS + + + A + + + + H + + + + H + + + + H A A ESOPHAGUS + + + A + + + + H + + + + H + + + + H A A STOMACH + + - A + + + + + + + + + + + + + + + + + + +	HEPATOCELLULAR ADENOMA	
PANCREAS + + + A + + + + + + + + + + + + + + + + + + +	BILE DUCT	+ + + A + + + + + + A + + + + + + + + A A
HARLON ESOPHAGUS STOMACH STOMACH STOMACH SMALL INTESTINE LARGE INTESTINE LARGE INTESTINE URINARY SYSTEM KIDNEY + + - A + + + + + + A + + + + + + + + +	GALLBLADDER & COMMON BILE DUCT	+ + + A + + + + + N + A N + N + + + + +
STOMACH + + - A + + + + + A + + + + + + A A SMALL INTESTINE + + - A + + + + + + + + + + + + + + + +	PANCREAS	+ + + A + + + + - + + A + + + + + + + +
Small Intestine + + - A + + + + + + A + + + + + + + + +	ESOPHAGUS	+ + - <u>A</u> + + + + <u>A</u> + + + + + + + <u>A</u> A
LARGE INTESTINE + + - A + + + + + + A - + + + + + + A A URINARY SYSTEM KIDNEY + + A + + + + + + + + + + + + + + + + +	STOMACH	+ + - A + + + + - + + A + + + + + + + +
URINARY SYSTEM + + + A + + + + + A + + + + + + + + + A A KIDNEY + + + A + + + + + + + + + + + + + + + +	SMALL INTESTINE	+ + - A + + + + - + + A + + + + + + +
KIDNEY + + + A + + + + + + A + + + + + + + + +	LARGE INTESTINE	- + + - A + + + + + A - + + - + + + +
URINARY BLADDER + - + A + + + + + A + + + + A + + + + A A ENDOCRINE SYSTEM PIULTARY ADEHOMA, NOS ADRENAL + + A + + + + + + + + + + + + + + + + +	URINARY SYSTEM	
ENDOCRINE SYSTEM - + - A - + + + + - + A - + - + + + + +	KIDNEY	+ + + A + + + + + + + + + + + + + + A A
PITUITARY ADENOMA, NOS - + - A - + + + + + - + A - + - + + + +	URINARY BLADDER	
ADEHOMA, NOS ADRENAL ADRENAL THYROID PARATHYROID A - + - + + A + + + - + + + A A REPRODUCTIVE SYSTEM MAMMARY GLAND N N N N N N N N N N N N N N N N N N N	ENDOCRINE SYSTEM	
THYROID + + + A + + + + + A + + + + + A A PARATHYROID A - + - + + + + A + + A + A A REPRODUCTIVE SYSTEM A - + - + + A + A + A A MAMMARY GLAND N N N A N N N N N N A A + + + A + + + + + A + + + + + + + + + A A		- + - A - + + + + - + A - + - + + + + +
PARATHYROID A - + - + + A + - + + A A REPRODUCTIVE SYSTEM MAMMARY GLAND MAMMARY GLAND N N N N N N N N N N N N N N N N N N N	ADRENAL	+ + + A + + + + + + + + + + + + + + + +
REPRODUCTIVE SYSTEM N	THYROID	<u>+ + + A + + + + + + A + + + + + + A A</u>
MAMMARY GLAND N <	PARATHYROID	A - + - + - + A + + A A
TESTIS + + + + + + + + + + + + + + + + + + +	REPRODUCTIVE SYSTEM	
	MAMMARY GLAND	
PROSTATE + A + + + + + + A + + + - + + + A A	TESTIS	+ + + A + + + + + + A + + + + + + + + +
	PROSTATE	<u> + A + + + + + + + A + + + - + + + - + + + A A</u>

HIGH DOGE

+: TISSUE EXAMINED MICROSCOPICALLY -: Reguired Tissue not examined Microscopically X: Tumor Incidence N: Necropsy, no Autolysis, no Microscopic Examination

: NO TISSUE INFORMATION SUBMITTED C: Necropsy, No Histology due to Protocol A Auto(YS15 M: Animal Missing B: No Necropsy Performed

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TABLE B3. MALE MICE: TUMOR PATHOLOGY (CONTINUED) HIGH DOSE

ANIMAL NUMBER	2	2	2	2	3	3	3	3	5 3	3	3	3	3	4	4	4	4	4	4		4	4	0 0 4 5 9 0	
WEEKS ON Study	- 3	2	1	,	0	3	3			0	ŝ		4						3			킭	2 0 4 4	TTISSUE
RESPIRATORY SYSTEM	- 121	<u>o</u> l	<u> </u>	Ó	اف	9	9	او	ļ	8	اف	01	01	11	<u>0 i</u>	7	91_1	91	91 1	914	<u>8</u>	01	0 0	<u> </u>
LUNGS AND BRONCHI	+	+	+	+	+	+	+	• •	+ +	+	+	+	+	+	-	+	+	+	+ •	• _	Α	+	+ +	44
TRACHEA	+		+	+	+	+	+			+				+	+	+	+ +	•	+ +	+ /	A	-	+ +	44
HEMATOPOIETIC SYSTEM																				_	·			<u> </u>
BONE MARROW	+	÷	+	+	+	+	+	+ +	+	+	+	+	+	+	+	+	+	<u>+</u>	++		٨	+	+ +	54
SPLEEN	+	+	+	+	+	+	+	+ +	+	+	+	+	+	+	+	-	+ •	<u>.</u>	++	-	٩	_	- +	42
LYMPH NODES	+	¥	+	+	+	+	-		+ +		+	+	+	+	+	+	<u>+</u>	ŧ	+ •	<u> </u>	A		+ +	37
THYMUS	-	-	` . _	-	-	-	+	- •		-	-	+	-	-	-	-		-		• 1	A ·	-		9
CIRCULATORY SYSTEM																				_				
HEART	+	+	+	+	+	+	÷	+ +	• •	+	÷	٠	+	+	+	÷	+ +	•	+ +	• 1	A ·	+	+ +	45
DIGESTIVE SYSTEM													•											<u> </u>
SALIVARY GLAND	+	+	+	+	+	+	+	- 1	•	+	+	+	•	+	<u>+</u>	+	<u>t i</u>	١.	++	<u> </u>	<u> </u>	-	+ +	91
LIVER Hepatocellular Adenoma Hepatocellular Carcinoma	•	+	+	+	+	+	+	+ + ×	×	+	+	+	*	+	+	* ×	+ +	•	+ +		• •	+ X_	+ + ×	45
BILE DUCT	1.	+	+	+	+	+	+	+ +	• •	+	+	+	,	+	+	+	+ +	•	÷ •		<u>ــــــــــــــــــــــــــــــــــــ</u>	+	+ +	45
GALLBLADDER & COMMON BILE DUCT	1.	+	N	+	+	N	+	+ +		+	+	+	+	+	N	N	N 4	•	+ +		A	Ν	+ +	45×
PANCREAS	1.	+	+	+	+	+	+	+ +	• •	+	+	+	+	+	+ •	•	+ +	•	+ +			+	- +	43
ESOPHAGUS	1.	-	+	+	+		+	• •	• •	-	+		+	+	+	-		•	+ +		<u>ــــــــــــــــــــــــــــــــــــ</u>	-	+ +	33
STOMACH	Τ.	+	•	+	+	+	-	+ +	. +	+	+	+	+	+	+	+ -	+ +	•	+ •		Α	-	+ +	40
SMALL INTESTINE	1-	+	+	+	•	+	-	+ +	, ,	+	+	+	+	+	+	+ .	• •		+ +	+ 1	A -	-	+ +	37
LARGE INTESTINE	-	+	+	+	+	+	-	+ +	• •	-	+	+	+	+	÷	+	+ -		+ +		A -	-	+ +	35
IRINARY SYSTEM																								<u> </u>
KIDNEY	+	+	+	+	+	+	+	+ +	+	+	+	+	+	+	<u>+</u>	<u>+</u>	+ 4	<u> </u>	<u>+_</u> +		<u> </u>	+	+ +	-45
URINARY BLADDER	-	+	+	+	-	-	+	+ +	+	+	-	+	-	+	+		• •	• •	+ +	. ,	A -	ŧ	+ +	37
NDOCRINE SYSTEM																							<u> </u>	
PITUITARY Adenoma, Nos	ŀ	+	+	•	+	+	+	+ •	+	+	+	-	+	+	•	<u>*</u>	+ +	• •	- 4		\	+	- +	34
ADRENAL	1.	+_	+	+	+	. <u>+</u>	+	<u>+ </u> +	•	+	+	+	+	+	•	<u>+</u>	+	<u> </u>	+ •		<u>.</u>	<u>+</u>	+ +	45
THYROID	1-	+	-	+	+	+		<u>+ +</u>	•	+	+	<u>+</u>	<u>+</u>	+	<u> </u>		+	<u>.</u>	+	_/	<u> </u>	-	+ +	36
PARATHYROID	-	-	•	-	5	+	-		• +	-	÷	-	-	+	-			•	- 1	. 1	۸.	-	+ +	13
EPRODUCTIVE SYSTEM	+																							
MAMMARY GLAND	LN	N	N	N	Ν	.N	N	<u>N N</u>	<u>N</u>	N	N	Ν	N	<u>N_</u>	N	N	N	1	N_ N		<u> </u>	N	<u>N N</u>	45*
TESTIS	1+	+	+	+	+	+	+	+	•	+	+	+	+	<u>+</u>	+	+	+	<u> </u>	<u>. </u>		•	+ .	+ +	45
PROSTATE	-	+	+	+	+	+	+	+ +		+	+	+	+	+	+	+ ·	- +	•	+ +		<u>ا</u>	<u>+</u>	+_+	

* ANIMALS NECROPSIED

+: TISSUE EXAMINED MICROSCOPICALLY -: Reguired Tissue not examined Microscopically X: Tumor Incidence N: Necropsy, No Autolysis, No Microscopic examination

: NO TISSUE INFORMATION SUBMITTED C: Necropsy. No Histology due to Protocol a Auto(ysis M: Animal Hissing B: No Necropsy Performed

Pentachloroethane

TABLE B4.

INDIVIDUAL ANIMAL TUMOR PATHOLOGY OF FEMALE MICE IN THE 2-YEAR STUDY OF PENTACHLOROETHANE

			VE	EH	IC	LE	Cl	DN	T	RO	L														
ANIMAL Number	0	0	5	5	0	9 5	5	0	5	0 6	6	0	6	6	0	0	6	6	0	9 7	7	0	0 7 2	07	07
WEEKS ON Study	0	0		1	1	09	9	0	0	1			-	8	- 1	0	0	1	0	1	į	-	0	0	0
ESPIRATORY SYSTEM	0	4	9	9	1 1	<u>ē</u>	-21	<u></u>	. 91	- 41	-91	. 4	11	9	e [91	-91	-91	91	- 91	41	- 91	. 91	<u>•</u>	
LUNGS AND BRONCHI CARCINOMA, NOS, METASTATIC Alveolar/Bronchiolar Adenoma Alveolar/Bronchiolar Carcinoma Osteosarcoma, metastatic	+	+	+	+	+	+	+	+	+	-	+	+	*	+ x	+	+ ×	+	×	* ×	+	•	+	+ ×	+	+
TRACHEA	+	-	+	+	+	+	+	+	÷	-	+	+	A	+	+	+	÷	+	٠	+	+	+	+	+	+
EMATOPOIETIC SYSTEM	+-																								
BONE MARROW	+	÷	+	ŧ	+	+	+	+	+	•	+	+	A	+	+	+	+	+	+	+	+	÷	+	+	+
SPLEEN Hemangiosarcoma Malighant Lymphoma, nos	•	+	+	+	+	+	+	+	+	-	+	-	*	+	+	•	+	+	+	+	+	+	+	+	+
LYMPH NODES	1.	+	+		. +.	+	+.	+	+	-	+	+		-	+	-	+	+	+	+	+	+	÷	.+	
THYMUS	-	-	-	-	+	-	-	-	-	-	-	-	A	-	-	-	-	-	-	-	-	-	-	-	-
RCULATORY SYSTEM	+									_							_								
HEART	+	+	+	+	+	+	+	+	+	-	+	+	A	+	+	÷	٠	+	+	+	+	٠	+	+	+
GESTIVE SYSTEM	t - t																								
SALIVARY GLAND	++	<u>+</u>	+	+	+	+	-	+	+	-	.+	+	.A	+	+	+	÷	+	ŧ	+	+	+	t	+	+
LIVER Hepatocellular adenoma Hepatocellular carcinoma Lipoma Hemangidsarcoma	+	+	+	+ ×	•	+	+	+	+	+ ×	•	-	A	•	•	•	* ×	+ X	+	+	•	•	•	+	+
BILE DUCT	T.	+	+	+	+	+	+	÷	+	+	+	_		+	+	+	÷	+	+	+	+	÷	+	+	+
GALLBLADDER & COMMON BILE DUCT	+	+	+	+	N	+	N	÷	+	N	+	N	A	+	+	÷	÷	+	+	+	+	N	+	N	N
PANCREAS	L.	÷	+	+	+	÷	+	+	÷	-	+	-		+	+	+	+	+	+	+	+	+	+	+	
ESOPHAGUS	+	+	+	+	+	÷	÷	÷	÷	-	+	+	A	+	+	+	+	-	÷	+		+	+	+	.+
STOMACH	_	÷	+	+	-	. +	+	+	<u>+</u>	_	+	+	A	-	+	+	+	÷	+	÷	+	+	+	+	+
SMALL INTESTINE Malignant Lymphoma, Nos	-	+	+	+	-	+	+	+	-	-	+	-	A	-	+	+	+	+	+	+	+	+	+	+	+
LARGE INTESTINE LEIOMYOMA	-	+	+	+	-	+	+	+	+	-	+	-	*	-	+	+	٠	+	+	•	+	+	•	+	+
RINARY SYSTEM	Γ																								
KIDNEY .	++		+	+	+	+	+	+	+		+	+	A	-	+	÷	+	+	+	+	+	+	+	+	+
URINARY BLADDER	-	+	+	+	+	+	+	-	+	-	+	-	A	•	-	+	+	+	+	+	+	+	+	+	+
DOCRINE SYSTEM																									
PITUITARY Adenoma, Nos	+	+	-	-	+	+	+	+.	+	-	+	* ×	A	+	-	+	+	-	+	+	-	-	* X	-	-
ADRENAL	L+	+	+	+	_	+	+	+.	+	-	+	+	A	÷	+	÷	+	+	+	÷	-	+	+	+	+
THYROID	+	+	+	+	+	+	+	+	+	-	+	+	A	+	+	+	+	+	+	+	+	+	+	+	+
FOLLICULAR-CELL ADENOMA	+			X																			<u> </u>		_
	<u> </u>	+		-		-	-	-	-	-	-	-	<u> </u>	*	-	-	-		-	-	-	-	-	_	-
	N		N	N		+		N		N		N		N	N	N	÷	÷	÷	N	•	N	÷	N	N
	f.	+	+	+	•	+	+	+	+	-	+	+		*	+	-	+	+	- <u>`</u>	+	+	-	÷		+
OVARY	T÷	+	+	+	+	+	+	+	+	_	+	+	A .	-	+	+	+	+	+	+	+	+	+	+	+
CYSTADENOMA, NOS																	×								
	Ι																								
PAPILLARY ADENOMA	м	N	N	N	N	N	N	N	N	N	н	N	A	N	N	N	N	H	N	N	м	N	N	N	N
		N	N	ы	N	ы	N		N	N	N			N	N	N	N	5	N	N	N	N	N	N	
OSTEOSARCOMA	"	п	ď	п	n	Ч	п	n	ก	n	n	n	^	X	п	a	a	n	п	п	n	n	n	n	
L OTHER SYSTEMS	<u> </u>		м	N			N .	N	N		N	N .		N	N .	N	N .	N	N 1		N	N			
MALIGNANT LYMPHOMA, NOS	12				<u>x</u>	ri 	Ŷ.			n		n	^	н	R	n .	r i		n (n	n	n	n	n	-
SITE UNKNOWN Carcinoma, Nos													A					x							
PARATHYROID PRODUCTIVE SYSTEM MAMMARY GLAND UTERUS OVARY CYSTADEROMA, NOS ECIAL SENSE ORGANS LACRIMAL GLAND PAPILLARY ADENOMA SCULOSKELETAL SYSTEM BONE OSTEOSARCOMA L OTHER SYSTEMS MALIGNANT LYMPHOMA, NOS SITE UNKNOWN	R X	N	N	N	N	- + + N N	H	н	N		N	N N	A A A A A	RX R	+	N	× N N	N N N	N N N ³	N	H	N			N

VEHICLE CONTROL

TISSUE EXAMINED MICROSCOPICALLY Required Tissue not Examined Microscopically tumor incidence Necropsy, no Autolysis, no Microscopic Examination

+ - X X

: NO TISSUE INFORMATION SUBMITTED C: NECROPSY, NO HISTOLOGY DUE TO PROTOCOL A: Autolysis Miania Missing B: No Necropsy Performed

	TABLE B4. FEM/	ALE MICE:	TUMOR PATHOLO	GY (CONTINUED)	VEHICLE CONTROL
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ANIMAL NUMBER	07	0 7 7	7	7	8	8	8	8	8	8	8	8	8	8	9	9	9	9	9	9	0 9 6	9	0 9 8	9	0	TOTAL
WEEKS ON Study	0	1		-1		1	1	1	1	1	9	1	-11	1		9	1	1	1	0	9	i	1	1	8	TISSUE
RESPIRATORY SYSTEM	اق	4	4	4	4	4]	4	41	4	41	31	<u>ě</u>]	41	41	5	61	4]	<u>i</u>	41	41	41	41	41	4	5	
LUNGS AND BRONCHI Carcinoma, NOS, Metastatic Alveolar/Bronchiolar Ademoma Alveolar/Bronchiolar Carcinoma Osteosarcoma, Metastatic	A	+	+	+	+	+	+	+	+	+	A	+	+ ×	+	•	+	+	+	+	+	+	+	+	+	+	46 1 3 1 1
TRACHEA	A	+	+	+	+	+	+	+	÷	+	A	+	-	+	+	÷	÷	÷	+	÷	+	+	+	+	+	44
HEMATOPOIETIC SYSTEM	+																	•							+	
BONE MARROW	LA_	-	+	+	+	+	+	+	+	-	A	+	+	+	+	+	+	+	+	+	+	+.	+	+	+	44
SPLEEN Hemangiosarcoma Malignant Lymphoma, nos		+	+	+ 	+	+	+	+	+	+	•	+	+	+	+	*	+	+	+	+	+	+	+	+	+	45 1
LYMPH NODES	A	+	+	+	+	-	+	+	+	+	Α	÷	+	+	+	÷	+	+	+	÷	+	-	-	+	+	39
THYMUS	A	-	-	-	-	-	-	-	-	-	A	-	-	-	-	-	-	÷	+	-	-	-	-	-	-[2
CIRCULATORY SYSTEM																										
HEART	A	÷	+	÷	+	÷	÷	+	+	÷	A	÷	÷	+	+	+	+	+	+	÷	+	ŧ	+	+	+	46
DIGESTIVE SYSTEM	+																						_		+	
SALIVARY GLAND		+	+	+	+	+	+	+	+	+	<u>A</u>	÷	+	+	<u>+</u>	+	+	+	+	+	-	+	+	+	-	43
LIVER Hepatocellular Adenoma Hepatocellular Carcinoma Lipoma Hemangiosarcoma	+	+	+	+	+	+	+	+	+	+	A	+	+	+		+	+	* ×	•	+	+	•	+	+	•	46 2 1 1
BILE DUCT	+	+	+	+	÷	+	+	+	+	+	A	+	+	+		+	÷	+	+	+	÷	+	+	÷	+	46
GALLBLADDER & COMMON BILE DUCT	N	+	+	÷	٠	+	+	+	H	+	A	+	+	÷	N I	N	+ '	÷	+	÷	+	N	N	N	+	48×
PANCREAS	+A	+	+	+	+	+	+	+	+	+	<u>A</u>	+			<u>+</u>	+	+	+	+	<u>+</u>	+	+	+	+	┽	43
ESOPHAGUS	1	+	+	+	÷	+	+	+	+	+	<u> </u>	÷	-	<u>+</u>	<u>+</u>	+ .	<u>+</u>	+	<u>+</u>	<u>+</u>	+	-	+	+	-	41
STOMACH	A_	÷	+	+	+	+	+	+	+	+	A	+	+	+	+	-	+	+	+	+	+	ŧ	+	+	+	42
SMALL INTESTINE Malignant Lymphoma, nos	^	+	+	•	+	+	+	+	+	+	A			×		•	+					+	+	+	+	39
LARGE INTESTINE Leiomyoma	•	+	+	+	-	+	+	+	+	+	A	+	+	+		-	+			* X	+	+	+	+	*	38
JRINARY SYSTEM																							_			
KIDNEY	A.	+	+	+	+	+	+	+	+	-	<u>A</u>	+	+		<u>+</u> ·	-	+		+	<u>+</u>	+	+	+	+	┿	42
URINARY BLADDER	A	+	+	+	+	+	+	+	+	÷	A	÷	+	+ ·		-	+	•	+	+	+	+	+	+	+	39
NDOCRINE SYSTEM																									Τ	
PITUITARY Adenoma, nos	A	+	+	* X	+	+	*	-	-	+	A	+	+ :	+ ·	• •	+	- ·	•	+	+	+	+	<u>*</u>	+	+	35 5
ADRENAL	A	+	+	+	+	-	+	+	+	+	<u> </u>	+	-	+ ·	• •	<u>+</u>	+		<u>+</u>	+	+	+	+	+	+	
THYROID	A	+	+	+	٠,	+	+	+	+	+	A	+	-	+ ·	• •	÷	+ -	•	•	+	+	÷	÷	+	+	45
FOLLICULAR-CELL ADENOMA		-	+	_	_		+	+	+	+	A	+										-	-	-	-	11
PARATHYROID REPRODUCTIVE SYSTEM	1		-			-	-		•	*		т —									*	-		-	-	
MAMMARY GLAND	N	N	N	н	N	н	÷	N	N	+	A	N	N ·	+ 1	N 4	•	+ 1	ų .	÷	+	N	+	•	+	+	48×
UTERUS	A	+	+	+	+	+	+	+	+	+	Α.	+	+	+	• •	+	+	•	+	+	+	+ .	+	+	+	43
OVARY		+	-	+	+	-	+	+	+	+	A -	+	+ •	• •	+ +	•	+ •	، ،	•	+	+	+	-	-	+	41
CYSTADENOMA, NOS																										1
SPECIAL SENSE ORGANS																									T	
LACRIMAL GLAND Papillary Adenoma	N	N	N	N	N	N	N	N	N	N	A	N	H I	N I	• •	¢.	NI	N 1	N	N	N	N	N	N	N	48× 1
USCULOSKELETAL SYSTEM	+																								+	
BONE Osteosarcoma	н	N	N	N	N	N	H	N	н	N	A '	N	N 1	NI	4 7	4	N I	4 1	N	N	N	N	м	N	N	48× 1
ALL OTHER SYSTEMS	1-																									
MULTIPLE ORGANS NOS Malignant Lymphoma, nos	N	N	N	N	N	N	N	N	N		A	N	N 1 X	N I	•	۹	N	н I Х	N	N	N X	N	N	N	X	48× _7
SITE UNKNOWN Carcinoma.Nos											A															1

* ANIMALS NECROPSIED

*: TISSUE EXAMINED MICROSCOPICALLY -: REGUIRED TISSUE NOT EXAMINED MICROSCOPICALLY X: TUMOR INCIDENCE N: NECROPSY, NO AUTOLYSIS, NO MICROSCOPIC EXAMINATION

: NO TISSUE INFORMATION SUBMITTED C: Necropsy, no histology due to protocol A: Autolysis M: Animal Missing B: No Necropsy Performed

TABLE 84.

INDIVIDUAL ANIMAL TUMOR PATHOLOGY OF FEMALE MICE IN THE 2-YEAR STUDY OF PENTACHLOROETHANE

PANCREAS + + + + + - + + + + + + + + + + + + + +																									
ANIMAL	0		0	0	0	0	0	0											6					9	9
ANIMAL NUMBER D 1 D 2 2 D 2 <t< td=""><td>5</td></t<>														5											
HEEKS ON 1 2 3 4 5 4 5 4 5 4 5 4 5 4 5 4 5 4 5 4 5 5 7 5<														4											
NUMBER 1 3 <td>٠</td>														٠											
HEEKS DN 1 2 3 5 5 7 8 9 1 2 3 5 5 1 2 1<														+											
STUDY Q <td>-1</td>														-1											
MEERS ON STUDY 1 0 1 0 1 0 1 0 1 0 1 0 0 1 0 0 1 0 0 1 0 0 1 0 0 1 0 0 1 0 0 1 0 0 1 0 0 1 0 0 1 0 0 1 0 0 1 0 0 0 1 0 0 0 0 1 0														+											
STUDY QI														+											
4 4 4 5 3 5 2 9 2 2 4 7 4 1 2 4 7 4 1 2 4 7 4 1 2 4 7 4 1 2 4 7 4 1 2 4 7 4 1 2 4 7 4 1 2 4 7 4 1 2 4 7 4 1 2 4 7 4														-											
LUNGS AND BRONCHI + + + + + + + + + + + + + + + + + + +														-											
HEMATOPOIETIC SYSTEM BONE MARROW BONE MARROW SPLEEN + + + + + - + + + + + + + + + + + + + +																									
HEART + + + + + - + + + + + + + + + + + + + +															÷	+									
HEART + + + + + + + + + + + + + + + + + + +																+									
DIGESTIVE SYSTEM - + + + - + + + + + + + + + + + + + + +																+									
BONE MARROW + + + + + + + + + + + + + + + + + + +															+										
HEPATOCELLULAR ADENOMA Hepatocellular carcinoma Lipoma Hemangioma		x	x	x	X	x	×	x	x	x	x	x	x							x	x	x	×		x
THYMUS - <td>-</td> <td>1</td>															-	1									
BONE MARROW + + + + + + + + + + + + + + + + + + +															N	N									
TRACHEA + + + + + + + + + + + + + + + + + + +															+										
HEPATOCELLULAR CARCINOMA, METASTA TRACHEA HEMATOPOTETIC SYSTEM BONE MARROW SPLEEN + + + + - + + + + + + + + + + + + + + +															7										
LUNGS AND BRONCHI HEPATOCELULAR CARCINOMA, METASTA + + + + + + + + + + + + + + + + + + +														+											
BUNE MARROW + + + + + + + + + + + + + + + + + + +															÷										
THYMUS - <td>-</td> <td>+</td>															-	+									
SPLEEN + + + + + + + + + + + + + + + + + + +															┥										
	+	+	+	+	+	-	+	+	+	+	+	+	+	+	A	+	A .		+	+	+	. t _	+	-	+
URINARY BLADDER	+	+	+	+	+	_	+	+	+	+	+	+	+	÷	A	-	A	A	-	-	÷	-	+	-	+
ENDOCRINE SYSTEM	-																								+
PITUITARY Adenoma, NOS	-	-	+	+	+	-	+	+	+	+	-	+	+	+	A	-	A	A	+	+	* ×	+	+	-	-
CORTICAL CARCINOMA	+	٠	+	+	+	-	+	+	+	+	+	+	+	+	A	+	A	A	+	+	+	+	* × ×	-	+
THYROID Follicular-cell Adenoma	+	+	+	+	+	-	+	+	+	+	* X	+	+	+	A	+	A	A	+	+	+	-	+	-	+
HEMANGIOMA X BILE DUCT + + + + + + + + + + + + + + + + + + +														+											
ESOPHAGUS + + + + + + + + + + + + + + + + + + +														+											
LARGE INTESTINE + - + + + + + + + + + + + + + + + +														N											
UTERUS	-	+	+	+	+	-	+	+	+	+	-	+	+	÷	Α_	+	A	. A	-	-	+	+	+	-	-
OVARY	+	-	+	÷	+	-	+	-	+	+	ŧ	÷	+	+	A	+	A	A	÷	-	÷	÷	+	-	+
ALL OTHER SYSTEMS			-		• · ·																				+
HEMANGIOSARCOMA BILE DUCT GALIBLADDER & COMMON BILE DUCT + N N + N + N + N + N + N + N + N + A A A + O + N + N + N + N + N + N + N + N + N														N	N										

LOW DOSE

+: TISSUE EXAMINED MICROSCOPICALLY -: REQUIRED TISSUE NOT EXAMINED MICROSCOPICALLY X: TUMOR INCIDENCE N: NECROPSY, NO AUTOLYSIS, NO MICROSCOPIC EXAMINATION : NO TISSUE INFORMATION SUBMITTED C: NECROPSY, NO HISTOLOGY DUE TO PROTOCOL A: AUTOLYSIS M: ANIMAL MISSING B: NO NECROPSY PERFORMED TABLE B4. FEMALE MICE: TUMOR PATHOLOGY (CONTINUED)

LOW DOSE

ANIMAL						A. I.	ΠŪ	0			01	A 1		0T	01	OT		0	٥T	01	01	01	0	0		
NUMBER	0 7 6	0 7 7 7	0 7 8	0 7 9	0 8 0	8	82	83	84	85	8	0 8 7	81	8	2	9	9	9	9	9	9	9	9	9 9	0	TOTAL
WEEKS ON Study	8	7	8	ļ	05	7	0	07	5	7	9	08		0	6	9	6	9	080	8	0	0	9	0	0	TUMOR
RESPIRATORY SYSTEM	$+\alpha$	<u>.</u>	21	31	<u> </u>	<u> </u>	4.1.		0	21	21	. 41.	2	4	41	21	<u>.</u> .		<u>.</u>	_91		-41			-4	
LUNGS AND BRONCHI Hepatocellular carcinoma, metast/		+	+		+	+	+	-	+	+	+	A	A	+	•	* X	+	+	+	+	+	+	+	+		41
TRACHEA	+	+	+	A	+	+	+	+	+	+	+	A	A	+	+	+	+	+	+	+	+	+	-	+		39
HEMATOPOIETIC SYSTEM	1																									
BONE MARROW	++-	+	+	A.	+	+	+	-	+	+	+	A	A	+	+	+	+	.+	÷	+	+	+	+	+	. A.	40
SPLEEN	++	+	+	. A	+	-	+	-	.+	+	+	A	A	+	÷	-	+	+	-	+	+	+	+	+	- 1	35
LYMPH NODES	++	÷	+	Α		-	+	-	+	+	-	A	A	÷		+	-	-	-	+	+	-	+		_ A	20
THYMUS	-	-	-	A	-	-	-	-	-	-	-	A	A	-	-	-	-	-	-	-		-	-	-		1
CIRCULATORY SYSTEM	<u> </u>																									
HEART	+	+	٠	A	+	+	+	-	+	+	+	A	A	+	+	+	+	+	+	+	+	+	+	+	A	41
DIGESTIVE SYSTEM	1																					_				
SALIVARY GLAND	++-	+	+	Α	+	+	-	+	+	-	+	Α	A	+	+	+	+		+	+	+	+	+	+	-4	36
LIVER Hepatocellular adenoma	+	+	+	A	* x	+	*	+	+	+	+	٨	A	+	+	+	+	+	+	+	+	+	+	+	- 1	42
HEPATOCELLULAR CARCINOMA Lipoma Hemangioma	×	x	x			x	'n	x		x	x				×	×	x	x	x	x	x	×		x		28
HEMANGIOSARCOMA														X												1
BILE DUCT	+	.+	+	<u> </u>					+		+	<u>.</u>								+	+	+	+	+	<u>_</u>	42
GALLBLADDER & COMMON BILE DUCT	<u> </u>	+	+	<u>A</u>	<u>N</u>	N	+	+	+	N	Ν	. <u>.</u>	-	·	<u>р.</u>	<u>N</u>	+		<u>N</u>	+	+	+	<u>+</u>	<u> </u>	-	43×
PANCREAS	+	+	+	<u>A</u>	+		+	-	<u>+</u>	+	+	<u>A</u>			<u>+</u>		+	+	-	-	+	<u>+</u>	•	<u>+</u>	_	
ESOPHAGUS	•	+	+	A	+	+	+	+	+	+ `	+	A		+	+	•	+	+	+	+	+	+	+	+	A	40
STOMACH Squamous cell papilloma	+	+	-	A	-	-	+	-	+	+	-	A 	A	-	-	_	+	+	-	-	+	+	+	+	_	23
SMALL INTESTINE	+	+	-	Α	-	-	+		+	+	-	Α	<u>A</u>	-	-	-	-	+	-	-	+	+	-	+	4	21
LARGE INTESTINE	+	+	-	A	-	-	+	-	+	+	-	A	A	-	+	+	-	+	-	-	+	+	-	+		21
IRINARY SYSTEM	+																									
KIDNEY	+	+	+	Α	+	+	+	-	+	+	+	A	Α	<u>+</u>	+	+	+	ŧ	-	+	+	+	+	+		3.9
URINARY BLADDER	+	+	+	A	+	-	+	-	~	+	+	A	A	+	+	+	-	÷	-	+	+	+	+	+	A	32
NDOCRINE SYSTEM						~																			+	
PITUITARY ADENOMA, NOS	+	•	+	A		+	* × ·	-	+	-	+	A	A		+	-	+	+	+	+	-	-	+	* ×	A	29 3
ADRENAL Cortical carcinoma Pheochromocytoma	+	+	+	A	+	+	+	-	+	+	+	A	A	•	+	+	+	+	-	+	+	+	+	+	^	39 1 1
THYROID Follicular-cell Adenoma	+	+	+	A	-	÷	+	+	+	+	+	A	A ·	+	+	+	-	+	+	+	+	+	+	+	۸	38 1
PARATHYROID	+	+	÷	A	-	-	-	÷	-	-	+	A	A ·	• •		-	-	-	+	+	-	-	+	+	A	21
EPRODUCTIVE SYSTEM																									+	
MAMMARY GLAND	+	+	N	A	+	N	N	N	+	N	N	A	A	<u></u>		N	N	N	N	Ν	+	+	N	N		<u>43×</u>
UTERUS	+	+	+	A	+	+	+		+	-	+	A	Α.	+ •	+	+		+	-	+	+	+	+	_	A	31
DVARY	+	+	+	A	+	-	+	-	+	÷	+	A	A ·	• •	+ -	+	+	+	-	+	+	+	÷	-	A	34
LL OTHER SYSTEMS	+																					-			-+	
	1																								- 1	

* ANIMALS NECROPSIED

+: TISSUE EXAMINED MICROSCOPICALLY -: REQUIRED TISSUE NOT EXAMINED MICROSCOPICALLY X: TUMOR INCIDENCE N: NECROPSY, NO AUTOLYSIS, NO MICROSCOPIC EXAMINATION

NO TISSUE INFORMATION SUBMITTED Necropsy, no histology due to protocol Autolysis Animal Missing No Necropsy Performed : A: M: B:

TABLE B4.

INDIVIDUAL ANIMAL TUMOR PATHOLOGY OF FEMALE MICE IN THE 2-YEAR STUDY OF PENTACHLOROETHANE

							_	~																	
				1	111	GH	<u>U</u>	03	SE																
ANIMAL NUMBER	0	050	051	05	055	054	5	5	0 5	6	6	0 6 2	6	6	065	064	067	6	6	0 7 0	7	072	07	7	075
WEEKS ON Study	0	0	0 5	0	0 5	0	9	0	0 7	0	9	0	0 4	0	7	07	6	0	04	0	0	0	0	0	0
RESPIRATORY SYSTEM	- 01	0	9			01	11	11	4	91	41	41	91	.2	31	41	01	91					01	_/1	<u> </u>
LUNGS AND BRONCHI Alveolar/bronchiolar Adenoma	+	+	+	+	+	+	÷	+	+	* *	+	+	+	+	A	+	+	+	+	+	+	A	+	+	-
TRACHEA	+	÷	+	+	+	+	+	+	+	+	-	-	÷	+	A	+	+	÷	÷	+	+	A	+	+	÷
HEMATOPOIETIC SYSTEM	+																								
BONE MARROW	+	+	+	+	÷	+	+	-	<u>+</u>	÷	+	+	+	+	A	÷	+	+	+	+	+	A	+	+	ŧ
SPLEEN	+	÷	+	+	+	+	+	÷	÷	+	+	+	+	-	A	+	÷	+.	t	+	+	A.	+	+	÷
LYMPH NODES	+	-	+	+.		+	-	ŧ	+		+	÷	+	-	A	-	+		-	+	-	A	+	÷	÷
THYMUS	-	-	-	-	+	-	-	-	-	-	-	-	-	-	A	+	-	-	-	+	-	A	-	-	-
CIRCULATORY SYSTEM																									
HEART	+	+	+	+	+	+	+	+	+	+	+	+	+	+	A	+	+	+	+	+	+	A	+	+	ŧ
DIGESTIVE SYSTEM																					_				-
SALIVARY GLAND	L+	+	+	+	+	+	+	÷	+	+	+	-	+	+	A	+	+	+	-	+	+	A	+	+	+
LIVER Hepatdcellular Adenoma Hepatdcellular carcinoma Malignant Lymphoma, Nos	×	+ X	+	*	+	*	* x	* X	*	+	+	+	*	+	A	+ ×	* x	+ x	+	+ X	×	A	*	×	+ X
BILE DUCT	+	+	+	÷.	+	+	+	+	÷	+	+	+	+	+	Α.	+	+	+	+	+	+	A.	+	+	÷
GALLBLADDER & COMMON BILE DUCT	N	N	+	N	+	N	N	+	N	+	+	N	N	+	A	N	+	+	N	t	N.	A	Ν.	N	N
PANCREAS	+	÷	+	ŧ	+	+	+	+	+	+	÷	<u>+</u>	+	-	A	+	+	÷	÷	+	+	A	+	+	+
ESOPHAGUS	L.t.	+	_	+	+	+	-	+	+	÷	+		+	+	A	+	+		÷	+	+	A	+	÷	+
STOMACH Papilloma, Nos Squamous cell papilloma	+	-	-	٠	-	* ×	+	-	+	+	+	-	÷	-	A	+	+	-	-	+	-	A	-	-	-
SMALL INTESTINE	-	_	-	_	_	+	-	-	+	+	+	-	+	-	A	÷	+	+	-	+	-	A	-	-	-
LARGE INTESTINE	-	_	-	+	-	-	+		+	-	+	-	+	-	A	-	+	+	-	+	-	A	-	-	-
URINARY SYSTEM	+																								
KIDNEY Malignant Lymphoma, nos	+	+	+	+	+	+	+	+	+	+	+	+	+	+	A	+	+	+	+	+	+	A	-	+	+
URINARY BLADDER	-	-	+	+	+	÷	+	+	÷	+	-	+	+	+	A	-	+	+	-	+	٠	A	-	-	÷
ENDOCRINE SYSTEM	+									-															
PITUITARY Adenoma, Nos	-	+	+	-	-	+	+	+	* x	+	+	+	-	+	A	+	+	+	-	+	+	A	-	+	+
ADRENAL	+	+	+	+	+	÷	÷	+		+	÷	+	+	+	A	÷	+	+	+	+	+	Α	+	+	+
THYROID	+	+	-	+	+	+	+	+	÷	+	-	-	+	-	Α	+	+	+	-	+	+	_A	+	+	+
PARATHYROID	+	-	-	-	-	÷	+	-	-	+	-	-	+	-	A	÷	+	-	-	÷	-	A	+	+	-
REPRODUCTIVE SYSTEM	+																								-
MAMMARY GLAND	н	N	N	N	N	÷	÷	N_	N	+	N	+	N	N	<u> </u>	+	N	t	N	+	+	A	N	+	N
UTERUS	+	+	÷	-	+	+	+	+	+	+	+	÷	+	-	Α	+	+	+	+	+	+	A	+	+	+
OVARY	+	٠	-	+	+	+	+	+	+	+	-	+	+	+	A	+	÷	+	+	+	+	A	+	+	+
ALL OTHER SYSTEMS	+				-																_	-			-
MULTIPLE ORGANS NOS Malignant Lymphoma, NDS	N	N	N	H	H	N	H	H	N	N X	N	N	N	N	A	H	N	N	N	N	N	A	N	N	N
+: TISSUE EXAMINED MICROSCO	BICAL	1 ¥									:	NO	TI		= 11		-			IBM	T T T	ED			

+: TISSUE EXAMINED MICROSCOPICALLY -: REQUIRED TISSUE NOT EXAMINED MICROSCOPICALLY X: TUMOR INCIDENCE N: NECROPSY, NO AUTOLYSIS, NO MICROSCOPIC EXAMINATION

: NO TISSUE INFORMATION SUBMITTED C: NECROPSY, NO HISTOLOGY DUE TO PROTOCOL A: Autolysis M: Animal Missing B: NO NECROPSY PERFORMED

.

Pentachloroethane

TABLE B4. FEMALE MICE: TUMOR PATHOLOGY (CONTINUED)

HIGH DOSE

ANIMAL NUMBER	7	0 7	0 7	0 7	8	8	8	8	8	8	8	8	8	8	9	9	9	9	9	9	9	9	9	9	0	
WEEKS ON STUDY	- 6 0 4	7 0 7	8 0 4	9 0 7	0	0	0	- 3 0 3	- 6	0 5	0	-7 5	8	0	0	9	2	0	-4 0 7	0	-6 0 7	7 0 6	8 0 6	9 0 6	0 0 7	TOTAL TISSUE TUMOR
RESPIRATORY SYSTEM	<u> </u>	1	j j	il	4	<u>_i</u>	ó	8	ōi	ž	4	<u>4</u>	ō	<u>ē</u>	4	4	9	4	4	2	4	Ö	_ŏ l	ž	4	
LUNGS AND BRONCHI		+	÷	+	+	÷	÷	A	-	÷	+	A	+	+	÷	÷	+	•	÷	÷	+	-	_	A	+	41
ALVEGLAR/BRONCHIGLAR ADENOMA	+					•				<u> </u>			· ·		-		•		x	-					×	- 3
TRACHEA	+	-	-	+	+	+	+	A	+	÷	+	A	+	+	+	+	+	+	-	+	+	+	-	A	+	39
HEMATOPOIETIC SYSTEM									-																	
BONE MARROW	++		+	+	+	+ .	+	A	+	+	-	A	+	+	+	+	÷	+	+	+		+	<u> </u>	A	+	40
SPLEEN	+	+	+	+	+	+	+	A	_	+	-	A	+	+	ŧ.,	+	+	+	+_	+	+	+		<u>A</u>	+	41
LYMPH NODES	+		+	+_	+	-	-	A	+		-	Α.	.=	+	+		-	+	+	-	+	_		A	+	26
THYMUS		-	-	-	-	-	-	A	-	-	-	A	-	-	-	-	-	-	-	+	-	-	-	A	+	5
CIRCULATORY SYSTEM													-			-									_	
HEART	+	+	+	÷	+	÷	+	A	-	+	+	A	+	+	÷	+	+	+	+	+	÷	÷	-	A	+	43
DIGESTIVE SYSTEM							_																		-	
SALIVARY GLAND	+	+	<u>+</u>	+	+	÷	+	A	+	+	÷	. A	+	+	÷	+	+	+	÷	+	+	-	-	Α	+	41
LIVER	+	+	+	+	+	+	+	A	+	+	+	A	+	+	+	÷	+	+	÷	+	+	+	+	A	+	45
HEPATOCELLULAR ADENOMA Hepatocellular carcinoma Malignant lymphoma, nos		x	×	x	×		×		x	×						×	×	×	×	×	x	x	×		×	19 13 1
BILE DUCT	L+	+	+	+	+	+	+	Α.	+	+	+	A	+	+	+	÷	+	+	÷	+	+	÷	+	A	+	45
GALLBLADDER & COMMON BILE DUCT	N	+	+	+	N	N	Ν	A	N	N	N	A	+	N	N	+	N	+	N	N	+	+	N	Α	N	45*
PANCREAS	L+	ŧ.	+	+	+	+	+	A	-	+	-	A	+	+	+	+	+	+	÷	+	+	+	_	Α	+	41
ESOPHAGUS	L+	-	-	+	+	-	-	A	+	-	+	A	+	4.	+	+	+	+	+	+.	+	+	_	A	+	35
STOMACH Papilloma, nos squamous cell papilloma	+	÷	-	+	+	-	+	A	-	-	-	Á	+	+	-	÷	+	+	+	+	÷	+ x	-	A	+	26
SMALL INTESTINE	-	+	-	+	+	+	÷	Α_	-	-	-	Α	+	-	-	+	-	+	+	+	+	+	-	A	+	22
LARGE INTESTINE	-	+	-	+	+	+	+	A	-	-	-	A	+	-	Ŧ	+	-	+	+	+	+	+	-	A	+	21
JRINARY SYSTEM	+																		-						+	
KIDNEY Malignant Lymphoma, Nos	+	+	+	+	+	+	+	A	+	+	+	A	+	+	+	+	+	+	+	+	+	+	-	A	*	43
URINARY BLADDER	+	-	+	+	+	+	+	A	+	+	-	A	+	+	÷	+	-	+	+	+	+	+	-	A	-	33
ENDOCRINE SYSTEM																_					-			_	+	
PITUITARY Adenoma, Nos	-	-	+	+	+	+	+	A	+	+	-	A	-	+	+	+	+	+	-	+	+	+	-	A	-	32 t
ADRENAL	+	-	+	+	+	-	-	A	+	+	+	A	+	+	+	+	+	+	+	+	÷	+		Α	+	<u>41</u>
THYROID	+	_	_	+	+	+	+	A	+	+	+	Α	÷	+	÷	+	+	+	+	÷	+	+.		A_	+	37
PARATHYROID	-		-	+	+	-	+	A	-	-	-	A	+	-	÷	+	-	-	-	÷	-	-	_	A	+	18
EPRODUCTIVE SYSTEM																									-	<u>.</u>
MAMMARY GLAND	+	+	N	+	+	N	н	A	Ν	N	N	Α_	+	N	N	+	N	+	Ν.	N	÷	N	N	Α.	+	45×
UTERUS	T.	-	+	+	+	+	+	A	+	+	-	A	÷	+	+	+	+	-	+	+	÷	+	-	A	+	39
OVARY	+		+	+	+	+	+	A	+	+	-	A	+	+	+	+	+	-	+	+	+	+		A .	+	39
LL OTHER SYSTEMS																										
MULTIPLE ORGANS NOS	N	N	N	N	N	N	N		N	N	N		N												i	45×

* ANIMALS NECROPSIED

+: TISSUE EXAMINED MICROSCOPICALLY -: Reguired Tissue not examined microscopically X: Tumor Incidence -: Necropsy, ng Autolysis, ng Microscopic Examination

: NO TISSUE INFORMATION SUBMITTED C: Necropsy, no histology due to protocol A: Autolysis M: Animal Missing B: No Necropsy Performed

Pentachloroethane

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APPENDIX C

SUMMARY OF THE INCIDENCE OF NONNEOPLASTIC LESIONS IN RATS ADMINISTERED PENTACHLOROETHANE BY GAVAGE

TABLE C1.

		LOW DOSE	HIGH DOSE
ANIMALS INITIALLY IN STUDY ANIMALS NECROPSIED ANIMALS EXAMINED HISTOPATHOLOGICALLY		50 49 49	50 50 50
INTEGUMENTARY SYSTEM			
*SKIN *ABSCESS, NOS Hyperplasia, pseudoepitheliomato		(49)	(50) 1 (2%) 2 (4%)
*SUBCUT TISSUE Cholesterol deposit	(50)	(49) 1 (2%)	(50)
RESPIRATORY SYSTEM			
#TRACHEAL GLAND DILATATION, NOS	(50) 2 (4%)	(47) 1 (2%)	(49) 2 (4%)
CONGESTION, NOS	(50) 3 (6%) 1 (2%)	(49) 1 (2%) 1 (2%)	1 (2%)
EDEMA, INTERSTITIAL HEMORRHAGE INFLAMMATION, INTERSTITIAL PNEUMONIA, LIPID ABSCESS, NOS INFLAMMATION, ACUTE/CHRONIC INFLAMMATION, FOCAL GRANULOMATOU INFLAMMATION, FOCAL GRANULOMATOU	1 (2%) 5 (10%) 1 (2%)	2 (4%) 10 (20%)	1 (2%) 15 (30%)
ABSCESS, NOS INFLAMMATION, ACUTE/CHRONIC INFLAMMATION, FOCAL GRANULOMATOU INFLAMMATION PROLIFERATIVE	1 (2%) 27 (54%) 1 (2%) 1 (2%)	31 (63%) 2 (4%)	19 (38%)
		(49) 1 (2%)	
HEMATOPOIETIC SYSTEM		# # # # # #	
#BONE MARROW Hypoplasia, Nos	(49) 1 (2%)	(47)	(49)

SUMMARY OF THE INCIDENCE OF NONNEOPLASTIC LESIONS IN MALE RATS ADMINISTERED PENTACHLOROETHANE BY GAVAGE

	VEHICLE Control	LOW DOSE	HIGH DOSE
HYPERPLASIA, NOS Hyperplasia, diffuse Hyperplasia, hematopoietic	1 (2%) 2 (4%)	1 (2%)	
#SPLEEN Fibrosis, Focal Hyperplasia, Lymphoid Hematopoiesis	(50) 3 (6%)	(48) 1 (2%)	(50) 1 (2%) 1 (2%) 2 (4%)
SPLENIC CAPSULE Hemorrhagic cyst Hyperplasia, Nos	(50) 1 (2%)	(48)	(50) 2 (4%)
#SPLENIC RED PULP Congestion, nos	(50)	(48)	(50) 2 (4%)
LYMPH NODE Inflammation, acute diffuse Hyperplasia, lymphoid	(46)	(40) 1 (3%) 2 (5%)	(46)
#MANDIBULAR L. NODE Inflammation, serous Inflammation, acute serous	(46) 1 (2%)	(40)	(46) 1 (2%)
#SACRAL LYMPH NODE Hyperplasia, lymphoid	(46)	(40)	(46) 1 (2%)
#THYMUS Hyperplasia, lymphoid	(2) 1 (50%)	(5)	(6)
IRCULATORY SYSTEM			
#HEART Inflammation, acute/chronic Inflammation, chronic Inflammation, chronic focal	(50) 1 (2%) 5 (10%)	(49) 2 (4%)	(50) 1 (2%) 1 (2%) 2 (4%)
#LEFT AURICULAR APPEN MINERALIZATION THROMBUS, MURAL	(50)	(49)	(50) 1 (2%) 2 (4%)
#MYOCARDIUM Mineralization	(50)	(49)	(50) 1 (2%)
XAORTA	(50)	(49)	(50)

	VEHICLE Control	LOW DOSE	HIGH DOSE
*PULMONARY ARTERY Mineralization	(50)	(49) 1 (2%)	(50) 1 (2%)
#PANCREAS PERIARTERITIS	(48) 1 (2%)	(48)	(50) 1 (2%)
DIGESTIVE SYSTEM			
*INTESTINAL TRACT Inflammation, acute/chronic	(50) 1 (2%)	(49)	(50)
#SALIVARY GLAND DILATATION/DUCTS	(49) 1 (2%)	(47)	(49) 1 (2%)
#LIVER CYST, NOS Hemorrhage Inflammation, Necrotizing	(50) 1 (2%) 1 (2%) 1 (2%) 2 (6%)	(48) 1 (2%)	(50)
INFLAMMATION, ACUTE/CHRONIC Nodule	2 (4%)	1 (2%)	2 (4%) 1 (2%)
CHOLANGIOFIBROSIS Degeneration, granular Necrosis, focal	3 (6%)	1 (2%)	2 (4%)
NECROSIS, LIQUEFACTIVE Metamorphosis fatty	26 (52%)	1 (2%) 29 (60%)	20 (40%)
#LIVER/CENTRILOBULAR HEPATOCYTOMEGALY	(50)	(48) 1 (2%)	(50)
<pre>#BILE DUCT DILATATION, NOS CYST, NOS</pre>	(50) 1 (2%) 1 (2%)	(48)	(50)
FIBROSIS, FOCAL Hypertrophy, Focal	1 (2%)	1 (2%)	
FIBROSIS, FOCAL Hypertrophy, focal Hyperplasia, nos Hyperplasia, focal	1 (2%) 18 (36%)		1 (2%) 8 (16%)
<pre>#PANCREAS DILATATION/DUCTS</pre>	(48)	(48) 1 (2%)	(50)
HYPERPLASIA, NODULAR	9 (19%)	4 (8%)	3 (6%)
#PANCREATIC ACINUS Necrosis, Focal	(48)	(48)	(50)

	VEHICLE Control	LOW DOSE	HIGH DOSE
ATROPHY, FOCAL Hyperplasia, nodular	10 (21%) 2 (4%)	3 (6%) 6 (13%)	3 (6%) 4 (8%)
#STOMACH ULCER, ACUTE PARASITISM	(46) 1 (2%)	(43)	(42) 1 (2%)
#GASTRIC MUCOSA MINERALIZATION DILATATION, NOS	(46) 1 (2%)	(43)	(42) 1 (2%) 1 (2%)
#FORESTOMACH Inflammation, chronic diffuse Hyperplasia, pseudoepitheliomato	(46)	(43)	(42) 1 (2%) 1 (2%)
#DUODENUM Inflammation, acute/chronic	(46) 3 (7%)	(40) 2 (5%)	(39) 1 (3%)
#COLON NEMATODIASIS PARASITISM	(46) 1 (2%)	(38) 3 (8%)	(38) 1 (3%)
RINARY SYSTEM			
#KIDNEY CAST, NOS INFLAMMATION, DIFFUSE INFLAMMATION, INTERSTITIAL INFLAMMATION, CHRONIC INFLAMMATION, CHRONIC DIFFUSE HYPERPLASIA, TUBULAR CELL	(50) 3 (6%) 3 (6%) 4 (8%)		(50) 1 (2%) 2 (4%) 2 (4%) 3 (6%) 33 (66%) 1 (2%)
#RENAL PAPILLA MINERALIZATION	(50) 4 (8%)	(49) 29 (59%)	(50) 29 (58%)
#KIDNEY/TUBULE DILATATION, NOS CAST, NOS PIGMENTATION, NOS REGENERATION, NOS	(50) 2 (4%) 12 (24%) 1 (2%)	(49) 12 (24%) 18 (37%) 2 (4%)	(50) 2 (4%) 1 (2%)
#KIDNEY/PELVIS MINERALIZATION HYPERPLASIA, EPITHELIAL	(50) 1 (2%) 1 (2%)	(49) 1 (2%)	(50)

	VEHICLE Control	LOW DOSE	HIGH DOSE
#URINARY BLADDER Hemorrhage Inflammation, focal granulomatou	(47)	(44) 1 (2%)	(48) 1 (2%)
NDOCRINE SYSTEM			
<pre>#PITUITARY CYST, NOS MULTIPLE CYSTS CONGESTION, NOS HEMORRHAGE HEMORRHAGIC CYST HEMOSIDEROSIS HYPERPLASIA, FOCAL HYPERPLASIA, CHROMOPHOBE-CELL ANGIECTASIS</pre>	(48) 1 (2%) 1 (2%) 1 (2%) 1 (2%) 1 (2%) 2 (4%) 1 (2%)	(46) 1 (2%) 1 (2%)	(46) 1 (2%) 1 (2%) 1 (2%) 1 (2%)
#ADRENAL Hemorrhagic cyst Necrosis, liquefactive Metamorphosis fatty	(49) 3 (6%)	(48) 1 (2%) 3 (6%)	(50) 1 (2%) 3 (6%)
#ADRENAL CORTEX Hyperplasia, nodular	(49) 1 (2%)	(48)	(50)
ULTIMOBRANCHIAL CYST MINERALIZATION GDITER, COLLOID STORAGE	(50) 2 (4%) 1 (2%) 1 (2%)	(45)	(46) 1 (2%) 2 (4%)
EPRODUCTIVE SYSTEM			
*MAMMARY GLAND Lactation	(50)	(49) 2 (4%)	(50) 1 (2%)
*PREPUTIAL GLAND ULCER, ACUTE	(50)	(49)	(50) 1 (2%)
#PROSTATE Inflammation, focal granulomatou	(47)	(43)	(47) 2 (4%)
#TESTIS EDEMA, INTERSTITIAL	(49)	(47)	(49)

	VEHICLE Control	LOW DOSE	HIGH DOSE
HEMORRHAGE Abscess, NOS Fibrosis, Diffuse Hemosiderosis			1 (2%)
ATROPHY, NOS Hyperplasia, interstitial cell	6 (12%)	2 (4%) 1 (2%)	2 (4%)
<pre>#TESTIS/TUBULE MINERALIZATION ATROPHY, FOCAL ATROPHY, DIFFUSE</pre>	(49) 3 (6%) 8 (16%) 13 (27%)	(47) 1 (2%) 4 (9%) 14 (30%)	(49) 1 (2%) 2 (4%) 13 (27%)
*VAS DEFERENS SPERMATOCELE	(50)	(49) 1 (2%)	(50)
IERVOUS SYSTEM			
#BRAIN Hydrocephalus, Internal Spongiosis Inflammation, acute focal	(50) 1 (2%)	(47)	(49) 1 (2%) 1 (2%)
#CEREBELLAR WHITE MAT EXTRACELLULAR VACUOLE ALTERATION	(50) 9 (18%)	(47) 3 (6%)	(49) 6 (12%)
PECIAL SENSE ORGANS			
*EYE Synechia, posterior Cataract Phthisis bulbi	(50) 2 (4%) 1 (2%) 1 (2%)	(49)	(50)
*EYE ANTERIOR CHAMBER Hemorrhage	(50)	(49) 1 (2%)	(50)
*SCLERA MINERALIZATION	(50) 2 (4%)	(49)	(50)
*EYE/CORNEA VASCULARIZATION	(50) 2 (4%)	(49)	(50)
*EYEBALL TUNICA VASCU INFLAMMATION, ACUTE/CHRONIC	(50)	(49)	(50)

	VEHICLE Control	LOW DOSE	HIGH DOSE
*EYE/CRYSTALLINE LENS MINERALIZATION	(50) 6 (12%)	(49) 1 (2%)	(50)
JSCULOSKELETAL SYSTEM			
*ABDOMINAL MUSCLE Inflammation, chronic necrotizin	(50) 1 (2%)	(49)	(50)
DDY CAVITIES			
ABDOMINAL CAVITY Necrosis, Fat	(50)	(49)	(50) 1 (2%)
<pre> EPICARDIUM INFLAMMATION, CHRONIC DIFFUSE </pre>	(50) 1 (2%)	(49)	(50)
L OTHER SYSTEMS			
NONE		~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~	
PECIAL MORPHOLOGY SUMMARY			
NO LESION REPORTED Autolysis/no necropsy		1	2
NUMBER OF ANIMALS WITH TISSUE EXAMI NUMBER OF ANIMALS NECROPSIED	NED MICROSCOPI	CALLY	

TABLE C2.

SUMMARY OF THE INCIDENCE OF NONNEOPLASTIC LESIONS IN FEMALE RATS ADMINISTERED PENTACHLOROETHANE BY GAVAGE

	VEHICLE Control	LOW DOSE	HIGH DOSE
ANIMALS INITIALLY IN STUDY Animals Necropsied Animals Examined Histopathologically	50 49 49	50 49 49	50 48 48
INTEGUMENTARY SYSTEM			
*SUBCUT TISSUE Inflammation, granulomatous	(49)	(49)	(48) 1 (2%)
RESPIRATORY SYSTEM			
#TRACHEA Inflammation, acute/chronic	(44) 1 (2%)	(46)	(46) 1 (2%)
<pre>#TRACHEAL GLAND DILATATION, NOS</pre>	(44)	(46) 1 (2%)	(46) 1 (2%)
#LUNG Emphysema, Alveolar Congestion, Nos Hemorrhage Inflammation, Interstitial Pneumonia, Lipid	(49) 3 (6%) 15 (31%) 1 (2%)	(49) 7 (14%) 1 (2%)	(48) 4 (8%) 1 (2%) 3 (6%) 6 (13%)
INFLAMMATION, ACUTE FOCAL Inflammation, acute/chronic Inflammation, chronic focal Inflammation, chronic diffuse	1 (2%) 1 (2%) 26 (53%) 1 (2%) 1 (2%)	23 (47%) 1 (2%)	18 (38%) 1 (2%)
<pre>#LUNG/ALVEOLI EDEMA, NOS HEMORRHAGE</pre>	(49)	(49)	(48) 1 (2%) 1 (2%)
HEMATOPOIETIC SYSTEM			
#SPLEEN Congestion, Nos Fibrosis, Focal	(48)	(47) 3 (6%) 1 (2%)	(45)

	VEHICLE Control	LOW DOSE	HIGH DOSE
HEMOSIDEROSIS Hyperplasia, reticulum cell Hyperplasia, lymphoid Hematopoiesis	2 (4%) 1 (2%) 2 (4%)	3 (6%) 2 (4%)	1 (2%)
	(48) 2 (4%) 1 (2%)	(47) 1 (2%) 4 (9%)	(45) 1 (2%) 1 (2%)
#LYMPH NODE Inflammation, acute serous Hyperplasia, lymphoid		(41) 1 (2%) 1 (2%)	(41) 1 (2%) 1 (2%)
CIRCULATORY SYSTEM			
<pre>#HEART INFLAMMATION, ACUTE/CHRONIC INFLAMMATION, CHRONIC FOCAL</pre>	(49) 2 (4%) 2 (4%)	(49) 2 (4%) 1 (2%)	(48)
#PANCREAS PERIARTERITIS		(47)	(46) 1 (2%)
DIGESTIVE SYSTEM			
<pre>#LIVER INFLAMMATION, NECROTIZING INFLAMMATION, ACUTE/CHRONIC Nodule Cholangiofibrosis Metamorphosis fatty Angiectasis</pre>	(49) 1 (2%) 3 (6%) 1 (2%) 2 (4%) 4 (8%)	(48) 1 (2%) 2 (4%) 2 (4%) 2 (4%) 5 (10%)	(45) 2 (4%) 1 (2%) 4 (9%) 1 (2%)
<pre>#BILE DUCT Hyperplasia, NOS Hyperplasia, Focal Hyperplasia, Diffuse</pre>	(49) 1 (2%) 5 (10%) 1 (2%)	(48) 2 (4%) 3 (6%)	(45) 2 (4%)
<pre>#PANCREAS DILATATION/DUCTS Hyperplasia, Nodular</pre>	(49)	(47) 1 (2%)	(46) 1 (2%)
*PANCREATIC ACINUS Atrophy, focal	(49) 3 (6%)	(47)	(46) <u>1 (2%)</u>

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

Pentachloroethane
	VEHICLE Control	LOW DOSE	HIGH DOSE
HYPERPLASIA, NODULAR			1 (2%)
#STOMACH Ulcer, Acute	(45)	(48) 1 (2%)	(39)
#GASTRIC MUCOSA Dilatation, Nos Extracellular vacuole alteration	(45)	(48) 2 (4%)	(39) 2 (5%) 2 (5%)
#DUODENUM Inflammation, acute/chronic Inflammation, chronic diffuse	(45) 2 (4%)	(44)	(38)
JRINARY SYSTEM			
#KIDNEY	(44)	(47)	(45) 1 (2%)
CAST, NOS Inflammation, interstitial	2 (5%)	4 (9%)	2 (4%)
INFLAMMATION, CHRONIC FOCAL Inflammation, chronic diffuse Nephrosis, nos	1 (2%)	1 (2%)	4 (9%)
#KIDNEY/CORTEX CYST, NOS	(44) 1 (2%)	(47)	(45)
#RENAL PAPILLA MINERALIZATION	(44)	(47) 2 (4%)	(45) 1 (2%)
#KIDNEY/TUBULE CAST, NOS	(44)	(47)	(45) 3 (7%)
DEGENERATION, HYALINE Hemosiderosis	1 (2%)	1 (2%) 1 (2%)	2 (4%)
#KIDNEY/PELVIS Hyperplasia, epithelial	(44)	(47) 1 (2%)	(45)
#URINARY BLADDER Inflammation, Chronic Focal	(45)	(41) 1 (2%)	(37)
<pre>#U. BLADDER/MUCOSA HYPERPLASIA, DIFFUSE</pre>	(45) 1 (2%)	(41)	(37)
ENDOCRINE SYSTEM			
<pre>#PITUITARY CYST, NOS</pre>	(49)	(46)	(45) <u>3(7%)</u>

	VEHICLE Control	LOW DOSE	HIGH DOSE
MULTIPLE CYSTS Congestion, Nos	1 (2%)	5 (11%)	5 (11%) 1 (2%)
HEMORRHAGE Hemorrhagic cyst Inflammation, interstitial	1 (2%) 2 (4%)	2 (4%) 1 (2%)	
<pre>#PITUITARY/BASOPHIL HYPERPLASIA, FOCAL</pre>	(49) 1 (2%)	(46)	(45)
#ADRENAL Hemorrhage	(48)	(49) 2 (4%)	(46)
HEMORRHAGIC CYST	1 (2%)	1 (2%)	4 4 7 8 1
NECROSIS, FOCAL Metamorphosis fatty	4 (8%)	4 (8%)	1 (2%) 2 (4%)
THYROID	(46)	(48)	(45)
GOITER NODULAR Hyperplasia, focal	1 (2%)	1 (2%)	
EPRODUCTIVE SYSTEM *MAMMARY GLAND GALACTOCELE LACTATION	(49) 20 (41%)	(49) 1 (2%) 12 (24%)	(48) 12 (25%)
#UTERUS	(45)	(48)	(40)
DILATATION, NOS Hydrometra	1 (2%)		6 (15%)
HEMOSIDEROSIS ADENOMYOSIS	1 (2%)	1 (2%)	0 (13/67
UTERUS/ENDOMETRIUM CYST, NOS	(45)	(48)	(40)
HYPERPLASIA, CYSTIC	1 (2%)	1 (2%) 1 (2%)	
OVARY Cyst, NOS Multiple cysts	(47)	(48) 2 (4%) 1 (2%)	(45) 1 (2%)
ERVOUS SYSTEM			
#CEREBRUM Hydrocephalus, internal	(42)	(46)	(46) 2 (4%)

	VEHICLE Control	LOW DOSE	
#BRAIN COMPRESSION	(42) 1 (2%) 1 (2%)	(46) 1 (2%)	(46) 1 (2%)
#CEREBELLAR WHITE MAT EXTRACELLULAR VACUOLE ALTERATION		(46) 3 (7%)	(46) 9 (20%
#RAPHE MEDULLA OBLONG Extracellular vacuale alteration	(42)	(46) 1 (2%)	(46)
PECIAL SENSE ORGANS			
*EYE INFLAMMATION, CHRONIC DIFFUSE CATARACT	(49) 1 (2%) 1 (2%)	(49)	(48)
*EYE/CRYSTALLINE LENS MINERALIZATION DEGENERATION, NOS	(49) 5 (10%) 1 (2%)	(49) 1 (2%)	(48)
NUSCULOSKELETAL SYSTEM			
ODY CAVITIES			
*PLEURA INFLAMMATION, ACUTE/CHRONIC	(49)	(49) 1 (2%)	(48)
LL OTHER SYSTEMS			
CONGESTION, NOS		(49)	(48) 1 (2%)
PECIAL MORPHOLOGY SUMMARY			
NO LESION REPORTED		1	2

* NUMBER OF ANIMALS NECROPSIED

	VEHICLE Control	LOW DOSE	HIGH DOSE
AUTOLYSIS/NO NECROPSY	1	1	2
<pre># NUMBER OF ANIMALS WITH TISSUE EX * NUMBER OF ANIMALS NECROPSIED</pre>	XAMINED MICROSCOPI	CALLY	

APPENDIX D

SUMMARY OF THE INCIDENCE OF NONNEOPLASTIC LESIONS IN MICE ADMINISTERED PENTACHLOROETHANE BY GAVAGE

TABLE D1.

	VEHICLE Control	LOW DOSE	HIGH DOSE
ANIMALS INITIALLY IN STUDY ANIMALS NECROPSIED ANIMALS EXAMINED HISTOPATHOLOGICALLY	50 48 48	50 44 44	50 45 45
INTEGUMENTARY SYSTEM			
NONE			
RESPIRATORY SYSTEM			
#LUNG/BRONCHUS Inflammation, acute	(47)	(41)	(44) 1 (2%)
#LUNG Inflammation, NOS Inflammation, Acute	(47) 1 (2%) 1 (2%)	(41) 2 (5%)	(44)
HEMATOPOIETIC SYSTEM			
*SPLEEN Hyperplasia, lymphoid	(46)	(38) 1 (3%)	(42)
#MANDIBULAR L. NODE Hyperplasia, lymphoid	(38)	(30) 2 (7%)	(37)
SIRCULATORY SYSTEM			
<pre>#HEART PERIARTERITIS ARTERIOSCLEROSIS, NOS</pre>	(47) 1 (2%) 1 (2%)	(43)	(45)
#MYOCARDIUM Inflammation, focal	(47)	(43) 1 (2%)	(45)
#LIVER THROMBOSIS, NOS	(48)	(44) 2 (5%)	(45)

SUMMARY OF THE INCIDENCE OF NONNEOPLASTIC LESIONS IN MALE MICE ADMINISTERED PENTACHLOROETHANE BY GAVAGE

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

Pentachloroethane

	VEHICLE Control	LOW DOSE	HIGH DOSE
#THYROID ARTERIOSCLEROSIS, NOS	(45) 1 (2%)	(37)	(36)
DIGESTIVE SYSTEM			
#LIVER INFLAMMATION, NOS INFLAMMATION, FOCAL INFLAMMATION, DIFFUSE INFLAMMATION, CHRONIC NECROSIS, NOS	(48) 1 (2%)	(44) 1 (2%) 3 (7%) 1 (2%) 1 (2%)	(45) 1 (2%) 2 (4%)
NECROSIS, FOCAL NECROSIS, DIFFUSE NECROSIS, HEMORRHAGIC METAMORPHOSIS FATTY CYTOPLASMIC VACUOLIZATION	14 (29%)	4 (9%) 2 (5%) 9 (20%) 1 (2%)	1 (2%) 22 (49%)
BASOPHILIC CYTO CHANGE CLEAR-CELL CHANGE Cytologic Alteration, NOS Hepatocytomegaly Angiectasis	1 (2%) 1 (2%)	1 (2%) 1 (2%) 6 (14%) 1 (2%)	1 (2%)
*GALLBLADDER Dilatation, Nos	(48)	(44) 1 (2%)	(45)
#STOMACH Ulcer, NOS Inflammation, Focal	(46)	(37) 2 (5%) 1 (3%)	(40)
#GASTRIC MUCOSA Hyperplașia, focal	(46) 1 (2%)	(37) 3 (8%)	(40)
#FORESTOMACH INFLAMMATION, CHRONIC FOCAL Hyperplasia, epithelial Hyperkeratosis	(46)	(37) 1 (3%) 1 (3%) 1 (3%)	(40)
URINARY SYSTEM			
#KIDNEY Hydronephrosis Inflammation, focal	(47)	(40) 1 (3%) <u>1 (3%)</u>	(45)

TABLE D1. MALE MICE: NONNEOPLASTIC LESIONS (CONTINUED)

	VEHICLE CONTROL	LOW DOSE	HIGH DOSE
INFLAMMATION, CHRONIC INFLAMMATION, CHRONIC DIFFUSE METAMORPHOSIS FATTY	1 (2%)	2 (5%) 1 (3%)	
#URINARY BLADDER Inflammation, Chronic	(43)	(38) 1 (3%)	(37)
ENDOCRINE SYSTEM			
#THYROID Hemorrhage	(45)	(37) 1 (3%)	(36)
<pre>#PANCREATIC ISLETS HYPERPLASIA, NOS</pre>	(46) 1 (2%)	(38)	(43)
EPRODUCTIVE SYSTEM			
*SEMINAL VESICLE DILATATION, NOS	(48) 1 (2%)	(44)	(45)
<pre>#TESTIS ATROPHY, NOS ATROPHY, FOCAL</pre>	(46) 1 (2%) 1 (2%)	(35)	(45)
IERVOUS SYSTEM			
#BRAIN HEMORRHAGE INFLAMMATION, ACUTE	(46)	(39) 1 (3%) 1 (3%)	(44)
SPECIAL SENSE ORGANS			
*EYE/LACRIMAL GLAND EDEMA, NOS	(48) 1 (2%)	(44)	(45)
FIBROSIS Degeneration, cystic	1 (2%) 1 (2%)	1 (2%)	
NUSCULOSKELETAL SYSTEM			
NONE			
DODY CAVITIES			
NONE			

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TABLE D1. MALE MICE: NONNEOPLASTIC LESIONS (CONTINUED)

	VEHICLE Control	LOW DOSE	HIGH DOSE
ALL OTHER SYSTEMS			
*MULTIPLE ORGANS INFLAMMATION, GRANULOMATOUS	(48) 1 (2%)	(44)	(45)
PECIAL MORPHOLOGY SUMMARY			
NO LESION REPORTED Autolysis/No necropsy	13 2	6	14 5
# NUMBER OF ANIMALS WITH TISSUE EXA * NUMBER OF ANIMALS NECROPSIED	MINED MICROSCOPI	CALLY	

TABLE D1. MALE MICE: NONNEOPLASTIC LESIONS (CONTINUED)

TABLE D2.

SUMMARY OF THE INCIDENCE OF NONNEOPLASTIC LESIONS IN FEMALE MICE ADMINISTERED PENTACHLOROETHANE BY GAVAGE

	VEHICLE Control	LOW DOSE	HIGH DOSE
ANIMALS INITIALLY IN STUDY ANIMALS NECROPSIED ANIMALS EXAMINED HISTOPATHOLOGICALLY	50 48 48	50 43 43	50 45 45
INTEGUMENTARY SYSTEM			
*SKIN INFLAMMATION, FOCAL	(48)	4 / 04/ 1	(45)
RESPIRATORY SYSTEM			
#LUNG HEMORRHAGE	(46) 1 (2%)	(41) 2 (5%)	(41)
INFLAMMATION, NOS Inflammation, acute Inflammation, chronic			1 (2%) 1 (2%)
EMATOPOIETIC SYSTEM			
*MULTIPLE ORGANS Hyperplasia, reticulum cell	(48) 1 (2%)	(43)	(45)
#SPLEEN Abscess, nos	(45) 1 (2%)	(35)	(41)
HYPERPLASIA, LYMPHOID	5 (11%)	3 (9%)	2 (5%)
#LYMPH NODE Hyperplasia, lymphoid	(39) 1 (3%)	(20)	(26)
#MANDIBULAR L. NODE HEMOSIDEROSIS HYPERPLASIA, LYMPHOID	(39)	(20) 1 (5%) 1 (5%)	(26)
<pre>#PEYER'S PATCH Hyperplasia, Lymphoid</pre>	(39) 1 (3%)	(21)	(22)
#KIDNEY Hyperplasia, lymphoid	(42)	(39)	(43)

	VEHICLE Control	LOW DOSE	HIGH DOSE
CIRCULATORY SYSTEM			
#BRAIN PERIVASCULITIS	(43)	(39) 1 (3%)	(44)
#HEART MINERALIZATION Thrombosis, Nos Inflammation, Acute	(46)	(41) 2 (5%) 1 (2%) 1 (2%)	(43)
*AORTA MINERALIZATION	(48)	(43) 1 (2%)	(45)
#UTERUS THROMBOSIS, NOS	(43)	(31) 2 (6%)	(39)
DIGESTIVE SYSTEM			
#SALIVARY GLAND Inflammation, Chronic	(43)	(36)	(41) 1 (2%)
#LIVER HAMARTOMA HEMORRHAGE INFLAMMATION, NOS INFLAMMATION, FOCAL INFLAMMATION, DIFFUSE INFLAMMATION, FOCAL GRANULOMATOU	(46) 1 (2%) 3 (7%) 1 (2%) 1 (2%)	(42) 4 (10%) 2 (5%)	(45) 1 (2%)
NECROSIS, NOS Necrosis, focal Necrosis, diffuse	1 (2%)	5 (12%) 4 (10%) 2 (5%) 18 (43%)	4 (9%) 28 (62%)
METAMORPHOSIS FATTY Cytoplasmic vacuolization Focal cellular change Clear-cell change	1 (2%)	10 (434)	1 (2%) 4 (9%)
CYTOLOGIC ALTERATION, NOS Hepatocytomegaly Anglectasis	1 (2%)	1 (2%) 1 (2%)	2 (4%) 1 (2%)
#LIVER/HEPATOCYTES Mitotic Alteration Atrophy, focal	(46) 1 (2%)	(42) 1 (2%)	(45)
#PANCREAS DILATATION/DUCTS	(43)	(33)	(41)

	VEHICLE Control	LOW DOSE	HIGH DOSE
<pre>#PANCREATIC ACINUS ATROPHY, NOS</pre>	(43) 1 (2%)	(33)	(41)
<pre>#STOMACH ULCER, NOS INFLAMMATION, FOCAL NECROSIS, FOCAL Hyperplasia, epithelial</pre>	(42)	(23) 2 (9%) 1 (4%) 1 (4%)	(26) 1 (4%)
#GASTRIC MUCOSA Hyperplasia, focal	(42)	(23) 3 (13%)	(26)
#DUODENUM Abscess, Nos	(39)	(21) 1 (5%)	(22)
RINARY SYSTEM			
#KIDNEY MINERALIZATION Hydronephrosis Inflammation, Chronic Hemosiderosis	(42)	(39) 1 (3%) 1 (3%) 4 (10%) 1 (3%)	(43)
#URINARY BLADDER Inflammation, NOS Inflammation, Focal Hyperplasia, Epithelial	(39)	(32) 1 (3%) 1 (3%) 1 (3%)	(33)
NDOCRINE SYSTEM			
<pre>#PITUITARY NECROSIS, FOCAL ANGIECTASIS</pre>	(35) 2 (6%)	(29) 1 (3%)	(32)
#ADRENAL Cyst, Nos Congestion, Nos	(41) 1 (2%) 1 (2%)	(39)	(41)
EPRODUCTIVE SYSTEM			
*MAMMARY GLAND Lactation	(48) 2 (4%)	(43)	(45)

	VEHICLE Control	LOW DOSE	HIGH DOSE
#UTERUS	(43)	(31)	(39) 4 (10%)
HYDROMETRA Cyst, nos Inflammation, nos	1 (2%)	1 (3%)	1 (3%)
#UTERUS/ENDOMETRIUM Hyperplasia, cystic	(43) 31 (72%)	(31) 5 (16%)	(39) 6 (15%
#DVARY CYST, NOS INFLAMMATION, CHRONIC	(41) 4 (10%) 1 (2%)	(34) 5 (15%)	
NERVOUS SYSTEM			
#BRAIN MALACIA	(43)	(39) 1 (3%)	(44)
SPECIAL SENSE ORGANS			
*EYE/CORNEA ULCER, NOS	(48)	(43) 1 (2%)	(45)
*EYE/LACRIMAL GLAND DEGENERATION, CYSTIC	(48) 1 (2%)	(43)	(45)
MUSCULOSKELETAL SYSTEM			
NONE			
BODY CAVITIES			
*ABDOMINAL CAVITY STEATITIS	1 (2%)	(43)	
ALL OTHER SYSTEMS			
NONE			
SPECIAL MORPHOLOGY SUMMARY			
NO LESION REPORTED	3	1	2

TABLE D2.	FEMALE MICE:	NONNEOPLASTIC	LESIONS (CONTINUED)

	VEHICLE Control	LOW DOSE	HIGH DOSE
AUTO/NECROPSY/HISTO PERF Autolysis/no necropsy	1 2	7	5
<pre># NUMBER OF ANIMALS WITH TISSUE EX: * NUMBER OF ANIMALS NECROPSIED</pre>	AMINED MICROSCOP	ICALLY	

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APPENDIX E

ANALYSIS OF PENTACHLOROETHANE (LOT NO. CO41676) MIDWEST RESEARCH INSTITUTE (13-WEEK STUDY)

APPENDIX E

A. ELEMENTAL ANALYSIS

Element	С	Н	Cl
Theory	11.87	0.50	87.63
Determined	11.77 11.97	0.60 0.64	87.60 87.78

B. WATER ANALYSIS

(Karl Fisher) 0.0099% ±0.0003 (**b**)%

C. BOILING POINT

Determined

b.p.: 158°C at 742 mm (visual, microboiling point)

Literature Value 162.00°C (Timmermans and Martin, 1926)

D. INDEX OF REFRACTION

Determined

n¹⁵_D: 1.5043

Literature Value 1.50542 (Timmermans and Martin, 1926)

E. DENSITY

Determined	Literature Value
d ²⁷ : 1.6689	d ³⁰ : 1.6653 (Timmermans and Martin, 1926)

F. VAPOR-PHASE CHROMATOGRAPHY

Instrument: Tracor MT 220 Detection: Flame ionization Inlet temperature: 200°C Detector temperature: 270°C

(1) Detection of impurities

(a) System 1

Column: 10% Carbowax 20 M on 80/100 Chromosorb W (AW), 1.8 m x 4 mm l.D., glass

Oven temperature program: 10 min. at 50°C, then 50 to 200°C at 10°C/min. RESULTS: Major peak and six impurities (Table E1)

(b) System 2

Column: 20% SP 2100/0.1% Carbowax 1500 on 100/120 Supelcoport, 3 m x 2 mm I.D., stainless steel

Oven temperature program: 10 min. at 50°C, then 50 to 200°C at 10°C/min.

RESULTS: Major peak and four impurities (Table E2)

Pentachloroethane

Peak	Retention Time (min.)	Retention Time (Relative to Pentachloroethane)	Area (Percent of Pentachloroethane)
1	0.8	0.04	<0.05 (trace)
2	3.0	0.18	1.50 <i>(a)</i>
3	13.6	0.80	<0.05 (trace)
4	16.0	0.95	0.80 <i>(a)</i>
5	16.8	1.00	100
6	17.7	1.06	<0.05 (trace)
7	19.0	1.13	<0.05 (trace)

TABLE E1. VAPOR-PHASE CHROMATOGRAPHY DATA: SYSTEM 1

(a) Vapor-phase chromatography/mass spectrometry indicated that these peaks had mass fragmentation patterns identical to those in the literature for tetrachloroethylene. See Section F-2-C and F-2-D, Systems 3 and 4 for quantitation of Peak 2 and the explanation of Peak 4 (System 1).

Peak	Retention Time (min.)	Retention Time (Relative to Pentachloroethane)	Area (Percent of Pentachloroethane)
1	12.0	0.77	1.6 <i>(a)</i>
2	13.5	0.87	<0.005 (trace)
3	15.6	1.00	100
4	16.6	1.07	< 0.005 (trace)
5	17.4	1.12	4.5

TABLE E2. VAPOR-PHASE CHROMATOGRAPHY DATA: SYSTEM 2

(a) Vapor-phase chromatography/mass spectrometry indicated that this peak had mass fragmentation patterns identical to those in the literature for tetrachloroethylene. See Section F-2-D for quantitation of Peak 1.

- (2) Identification and quantitation of impurities
 - (a) System 1 (Trichloroethylene)

Column: 20% SP 2100/0.1% Carbowax 1500 on 100/120 Supelcoport, 3 m x 2 mm I.D., stainless steel

Oven temperature program: 50°C, isothermal

A standard solution was injected containing 0.01% v/v trichloroethylene in o-dichlorobenzene. Trichloroethylene had a retention time of 10.8 minutes. The same amount of pentachloroethane was injected under the same conditions. A peak was observed at a retention time of 11.3 minutes, but its area was less than that of the trichloroethylene standard

CONCLUSION: Trichloroethylene was not present in the sample at concentrations > 0.01%.

(b) System 2 (1,1,1,2- and 1,1,2,2-tetrachloroethane and hexachloroethane)

Column: 20% SP 2100/0.1% Carbowax 1500 on 100/120 Supelcoport, 3 m x 2 mm I.D., stainless steel

Oven temperature program: 100°C, isothermal

Standard solutions were injected containing 0.01% v/v 1,1,1,2- and 1,1,2,2-tetrachloroethane in hexane and 50.1 mg/ml hexachloroethane in hexane. 1,1,1,2-Tetrachloroethane had a retention time of 6.0 minutes; 1,1,2,2-tetrachloroethane of 7.8 minutes; and hexachloroethane of 21.6 minutes. The same amount of pentachloroethane was injected under the same conditions. Peaks were observed at retention times of 6.1, 7.8, and 22.0 minutes. The peaks at 6.1 and 7.8 minutes were less intense than the tetrachloroethane standards. The peak at 22.0 minutes was enhanced by addition of known hexachloroethane and was therefore quantitated against the hexachloroethane standard.

CONCLUSION: 1,1,1,2-Tetrachloroethane was *not present* in the sample at concentrations > 0.01%. 1,1,2,2-Tetrachloroethane was *not present* in the sample at concentrations > 0.01%. Hexachloroethane was *present* in the sample at a concentration of 10.4% (w/v).

(c) System 3 (Identification of Peak 4, System 1)

Column: 10% Carbowax 20 M on 80/100 Chromosorb W (AW), 1.8 m x 4 mm I.D., glass

Oven temperature program: 50°C, 5 min.; 50 to 150°C, 10°C/min.

On injection of varying volumes of pentachloroethane, all peaks except Peak 4 increased linearly with the volume injected. The area of Peak 4 increased to a constant area and remained unchanged with increased volume injections. The sample spiked with tetrachloroethylene showed an enhanced Peak 2 but no increase in the area of the fourth peak.

CONCLUSION: Peak 4, System 1, was due to column decomposition. Inlet decomposition was ruled out because spiked samples showed enhancement of Peak 2, not Peak 4. Detector decomposition was ruled out because both flame ionization detection and ion current detection showed the presence of Peak 4.

(d) System 4 (Tetrachloroethylene)

Inlet temperature: 75°C, 125°C, 200°C

Column and oven temperature program: Same as in System 3 above

The tetrachloroethylene—Peak 2, Section F-1-(a) Table E1 and Peak 1, Section F-1-(b)Table E2—in the pentachloroethane sample was quantitated against a standard at three inlet temperatures (75°C, 125°C, and 200°C). On plotting concentration versus inlet temperature, a straight line was obtained. The quantity of tetrachloroethylene was reported as that calculated for the inlet at 25°C.

CONCLUSION: The calculated concentration of tetrachloroethylene in the pentachloroethylene sample with the inlet at 25°C is 0.55%.

Pentachloroethane

G. VAPOR-PHASE CHROMATOGRAPHY/MASS SPECTROMETRY

Instrument: Varian MAT CH4B mass spectrometer interfaced via a Watson-Biemann helium separator to a Tracor MT 2000 MF vapor-phase chromatograph. Data processed by a Varian 620/i computer.

(1) Detection of trichloroethylene, 1,1,1,2-tetrachloroethane, 1,1,2,2-tetrachloroethane and hexachloroethane

Column: 20% SP 2100/0.1% Carbowax 1500 on 100/120 Supelcoport, 3 m x 2 mm I.D., stainless steel

Inlet temperature: 155°C

Oven temperature program: 16 min. at 80°C, then 80 to 110°C at 10°C/ min.

A standard was injected containing (0.01% v/v) trichloroethylene, (0.01% v/v) 1,1,1,2-tetrachloroethane, (0.01% v/v) 1,1,2,2-tetrachloroethane, and (0.01% v/v) hexachloroethane in pentane. Strong ion current monitor peaks were observed for each standard. The pentachloroethane sample chromatogram indicated ion monitor peaks that corresponded to 1,1,2,2-tetrachloroethane (less intense than the standard) and hexachloroethane (more intense than the standard). A computer search was also made for two ions characteristic of the mass fragmentation pattern of each standard: 130, 132 for trichloroethylene; 131, 131 for 1,1,1,2-tetrachloroethane; 83, 85 for 1,1,2,2-tetrachloroethane; and 201, 203 for hexachloroethane.

CONCLUSION: Trichloroethylene was not present at concentrations > 0.01%. 1,1,1,2-Tetrachloroethane was not present at concentrations > 0.01%. 1,1,2,2-Tetrachloroethane was present but at a concentration < 0.01%. Hexachloroethane was present at a concentration > 0.01%.

(2) Identification of impurities

(a) System 1 (Same system as that employed in G-1)

The results are given in Table E3. Nine impurity peaks were detected. Three of these were large enough to give good mass fragmentation data.

(b) System 2

Column: 10% Carbowax 20 M on 80/100 Chromosorb W (AW), 1.8 m x 4 mm I.D. Inlet temperature: 155°C

Oven temperature program: 10 min. at 50°C, then 50 to 150°C at 10°C/min.

The results are given in Table E4. Eight impurities were detected on the ion current monitor, but only the two tetrachloroethylene peaks were large enough to give good mass fragmentation data.

Peak No.	Peak No. in Table E2	Retention Time (min.)	Mass	Percent of Base Peak	Normalized Percent of Base Peak	Assignment	Literature Mass	Spectrum Percent of Base Peak	Reference
!		1.8	Fragments				Fragments		
2		2.8							
3		3.1							
4		4.4							
5		6.0							
6	1	8.3	168	49	49	Tatural to a start.	170	48	(Eistermeite in terme
0	1	0.2	166	100	49 100	Tetrachloroethylene	168 166	48	(Eight peak index of mass spectra)
			164	79	79		164	78	mass spectra)
			133	25	25		133	20	
			135	23 71	25 71		133	62	
			131	. 84	84		131	64	
			96	17	17		96	14	
			94	25	25		90	21	
7		9,9	74	20	25		74	21	
	2		17.0	10	10		140	0	
8	2	13.2	168 131	19 2	19 2	1,1,2,2- Tetrachloroethane	168	8	(Eight peak index of
			95	2 14		Tetrachloroethane	131	8	mass spectra)
			93 87		14		. 95	11	
				8	8		87	10	
			85	58	58		85	63	
			83 61	100	100		83	100	
			60	8 7	8 7		61	8	
	-						60	8.	
9	3	19-22	169	18	45	Pentachloroethane	169	48	(Eight peak index of
			167	41	100		167	100	mass spectra)
			166	6	15		166	60	
			165 164	24 3	57 60		165	78	
			119	41	100		164	46 97	
			117	47	115		119	97 99	
			82	2	5		117 82	61	
10	5	26,3	203	49	82	Howahlanatha		51	(Eicht nach inder of
10	3	20,3	203	49 60	82 100	Hexachloroethane	203 201	51 81	(Eight peak index of
			199	60 42	70		201 199	81 49	mass spectra)
			199	42 58	70 97		199	49	
			166	42	69		166	42 32	
			104	42	25		164	32	
			119	59	23 98		121	97	
			117	60	100		117	100	

.

TABLE E3. VAPOR-PHASE CHROMATOGRAPHY/MASS SPECTROMETRY DATA: SP 2100/CARBOWAX COLUMN

Peak No.	Peak No. in Table E1	Retention Time (min.)	Mass	Percent of Base Peak	Normalized Percent of Base Peak	Assignment	Literature Mass	Spectrum Percent of Base Peak	Reference
[1	1.2	Fragments				Fragments		
2		2.0							
3		2.7							
4	2	3.1	168 166 164 133 131 129 96	50 100 60 15 58 60 14	50 100 60 15 58 60 14	Tetrachloroethylene	168 166 164 133 131 129 96	48 100 78 20 65 64 20	(Eight peak index of mass spectra)
5		3.7							
6	4	16.4	168 166 164 133 131 129 96 94	50 100 97 24 84 69 18 25	50 100 97 24 84 69 18 25	Tetrachloroethylene	168 166 164 133 131 129 96	48 100 78 20 65 64 20	(Eight peak index of mass spectra)
7	5	17-19	169 167 166 165 164 119 117 82	18 37 13 27 8 39 37 37 3	49 100 35 73 22 106 100 9	Pentachloroethane	169 167 166 165 164 119 117 82	48 100 60 78 46 97 99 61	(Eight peak index of mass spectra)
8	6	19.7							
9	7	20.2							

TABLE E4. VAPOR-PHASE CHROMATOGRAPHY/MASS SPECTROMETRY DATA: CARBOWAX 20 M COLUMN

H. SPECTRAL DATA

(1) Infrared:

Instrument: Beckman IR-12

Cell: 0.015 mm liquid cell, sodium chloride windows

Results: (See Figure 5)

(2) Ultraviolet/Visible:

Instrument: Cary 118

Results: No absorbance detected between 350 and 800 nm (visible range). No maxima between 213 and 350 nm (ultraviolet range) but a gradual increase in absorbance toward the cutoff at 213 nm

Concentration: 1% v/v

Solvent: Methanol

(3) Nuclear Magnetic Resonance:

Instrument: Varian HA-100

Solvent: Neat, tetramethylsilane added

Determined

Assignments: See Figure 6 (a)s, δ 6.15 ppm

Integration ratios: (a) 1.00

Literature Values

Consistent with literature spectrum. (Sadtler Research Laboratories)

No literature reference found.

Literature Value

 δ 6.12 ppm (Jouvre, 1966)



Figure 5. Infrared Absorption Spectrum of Pentachloroethane (Lot No. C041676)



Figure 6. Nuclear Magnetic Resonance Spectrum of Pentachloroethane (Lot No. C041676)

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APPENDIX F

ANALYSIS OF PENTACHLOROETHANE (LOT NO. CO102077) MIDWEST RESEARCH INSTITUTE (TWO-YEAR STUDY)

APPENDIX F

A. ELEMENTAL ANALYSIS

Element	С	Н	Cl
Theory	11.87	0.50	87.63
Determined	12.02 12.14	0.54 0.44	87.33 87.16

B. WATER ANALYSIS

(Karl Fisher) $0.013\% \pm 0.001 (\delta)\%$

C. VAPOR-PHASE CHROMATOGRAPHY

(1) Detection of impurities

Instrument: Tracor MT 220 Detection: Flame ionization Carrier gas: Nitrogen

(a) System 1

Inlet temperature: 150°C

Detector temperature: 205°C

Carrier flow rate: 70 cc/min.

Column: 20% SP 2100/0.1% Carbowax 1500 on 100/120 Supelcoport, 1.8 m x 4 mm I.D., glass

Oven temperature program: 5 min. at 50°C, then 50 to 170°C at 10°C/min.

Sample injected: $4 \mu l$ neat liquid, diluted to 1.0% and 0.5% in pentane to quantitate the major peak and check for overloading.

RESULTS: Major peak and 13 impurities (Table F1). One impurity had an area 2.1% of the major peak. The other 12 impurities had a total area 2.4% of the area of the major peak. Peak 9, which quantitated as 2.1%, was identified by vapor-phase chromatography and vapor-phase chromatography/mass spectrometry as hexachloro-ethane. Hexachloroethane was quantitated against a 2% standard in Section C-2-e.

(b) System 2

Inlet temparature: 200°C

Detector temperature: 230°C

Carrier flow rate: 70 cc/min.

Column: 10% Carbowax 20M-TPA, on 80/100 Chromosorb W (AW), 1.8 m x 4 mm I.D., glass

Oven temperature program: 5 min. at 50°C, then 50 to 200°C at 10°C/min.

Sample injected: 5 μ l neat liquid, diluted to 1.0% and 0.5% in hexanes to quantitate the major peak and check for overloading.

RESULTS: Major peak and 14 impurities (Table F2). The areas of the 14 impurities total 2.0% of the area of the major peak.

Pentachloroethane

Peak	Retention Time (min.)	Retention Time (Relative to Pentachloroethane)	Area (Percent of Pentachloroethane
1	1.2	0.10	0.07
2	5.3	0.41	0.15
3	9.7	0.76	0.84
4	11.2	0.88	0.04
5	11.7	0.92	0.07 shoulder
6	11.9	0.93	0.54
7	12.1	0.95	0.28
8	12.8	1.00	100
9	14,1	1.10	2.10
10	15.0	1.18	0.01
11	15.8	1.24	0.19
12	16.3	1.28	0.15
13	17.1	1.34	0.04
14	22.4	1.76	0.01

TABLE F1. VAPOR-PHASE CHROMATOGRAPHY DATA: SYSTEM 1

TABLE F2. VAPOR-PHASE CHROMATOGRAPHY DATA: SYSTEM 2

Peak	Retention Time (min.)	Retention Time (Relative to Pentachloroethane)	Area (Percent of Pentachloroethane)
1	1.3	0.09	0.09
2	3.7	0.26	0.19
3	4.6	0.33	0.82
4	10.7	0.76	0.01
5	10.9	0.78	0.01
6	13.2	0.94	0.56
7	14.0	1.00	100
8	14.5	1.04	0.02
9	15.7	1.12	0.01
10	16.2	1.16	0.01
11	16.3	1.17	0.01
12	16.8	1.20	0.06
13	17.2	1.24	0.09
14	17.9	1.28	0.05
15	18.3	1.31	0.05

(2) Identification and quantitation of impurities

Instrument: Tracor MT-220

Detector: Flame ionization

Carrier gas: Nitrogen

Carrier flow rate: 70 cc/min.

Column: 20% SP 2100/0.1% Carbowax 1500 on 100/120 Supelcoport, 1.8 m x 4 mm I.D., glass

(a) System 1 (Acetone)

Inlet temperature: 205°C

Detector temperature: 225°C

Oven temperature program: 50°C, isothermal

Standards (4 μ l) of 0.1% acetone in o-dichlorobenzene were injected. Acetone had a retention time of 1.3 minutes. Pentachloroethane had a peak with a retention time of 1.3 mnutes when injected neat under the same conditions which was enhanced by the addition of acetone. The acetone in the sample was quantitated against the 0.1% standard in o-dichlorobenzene.

CONCLUSIONS: The sample was found to contain acetone at a concentration of 0.082 $\pm 0.007 (\delta)\%$.

(b) System 2 (Trichloroethylene)

Inlet temperature: 155°C

Detector temperature: 205°C

Oven temperature program: 50°C isothermal

Standards (4 μ l) of 0.15% trichloroethylene in o-dichlorobenzene were injected. Trichloroethylene had a retention time of 5.4 minutes. Neat pentachloroethane had a peak with a retention time of 5.4 minutes when injected under the same conditions, which was enhanced by the addition of trichloroethylene. Trichloroethylene in the sample was quantitated against the 0.15% standard in o-dichlorobenzene.

CONCLUSION: The sample contained 0.125 ± 0.001 (δ)% trichloroethylene

(c) System 3 (Tetrachloroethylene)

Inlet temperature: 155°C

Detector temperature: 215°C

Oven temperature program: 75°C isothermal

Standards (4 μ l) of 0.3% tetrachloroethylene in pentane were injected. Tetrachloroethylene had a retention time of 6.2 minutes. Pentachloroethane had a peak with a retention time of 6.2 minutes when injected under the same conditions at a concentration of 10% in pentane. This peak was enhanced by the addition of tetrachloroethylene. The tetrachloroethylene in the 10% pentachloroethane in pentane was quantitated against the 0.3% standard of tetrachloroethylene in pentane.

CONCLUSIONS: The sample contained 0.047 ± 0.001 (δ)% tetrachloroethylene.

(d) System 4 (1,1,2,2-Tetrachloroethane)

Inlet temperature: 215°C

Detector temperature: 255°C

Oven temperature program: 100°C isothermal

Standards (5 μ l) were injected containing 0.1% 1,1,2,2-tetrachloroethane in hexanes. 1,1,2,2-Tetrachloroethane had a retention time of 5.2 minutes. Pentachloroethane had a peak with a retention time of 5.2 minutes when injected neat under the same conditions, which was enhanced by the addition of 1,1,2,2-tetrachloroethane. 1,1,2,2-Tetrachloroethane in the sample was quantitated against the 0.1% standard in hexanes.

CONCLUSIONS: The sample was found to contain $0.0280 \pm 0.0002 (\delta)\% 1,1,2,2$ -tetrachloroethane.

(e) System 5 (Hexachloroethane)

Inlet temperature: 155°C

Detector temperature: 220°C

Oven temperature program: 120°C isothermal

Standards (5 μ l) were injected containing 2% hexachloroethane in hexanes. Hexachloroethane had a retention time of 6.7 minutes. Pentachloroethane had a peak with a retention time of 6.2 minutes when injected neat under the same conditions, which was enhanced by the addition of hexachloroethane. The hexachloroethane in the sample was quantitated against the 2% standard in hexanes.

CONCLUSIONS: The sample contained 4.23 ± 0.06 (δ)% hexachloroethane.

D. VAPOR-PHASE CHROMATOGRAPHY/MASS SPECTROMETRY

Instrument: Varian MAT CH4B mass spectrometer interfaced via a Watson-Biemann helium separator to a Tracor MT 2000 MF vapor-phase chromatograph. Data processed by a Varian 620/i computer.

Column: 20% SP 2100/0.1% Carbowax 1500 on 100/120 Supelcoport, 1.8 x 4 mm 1.D.

Inlet temperature: 170°C

Oven temperature program: 5 min. at 50°C, then 50°-170°C at 10°C/min.

Sample injected: I μ l neat liquid

Carrier gas: Helium

Carrier gas flow rate: 30 ml min.

RESULTS: Major peak and 10 impurities (Tables F3 and F4). Two of these were caused by system decomposition. Eight were identified as impurities present in the sample.

Peak	Retention Time (min.)	Retention Time (Relative to Pentachloroethane)	Corresponding Peak in Table F1
1	3.7	0.17	1
2	14.3	0.66	2
3	15.4	0.71	Not observed (<0.01%)
4	18.2	0.84	3
5	19.9	0.92	4
6	20.5	0.94	6
7	20.8	0.96	7
8	21.7	1.00	8
9	25.0	1.15	9
10	28.3	1.30	10 (tentative)
11	38.3	1.76	11 (tentative)

TABLE F3. VAPOR-PHASE CHROMATOGRAPHY DATA

Peak (Same as Table F3)				Literature			
	Mass	Percent of Base Peak	Assignment	Mass	Percent of Base Peak	Reference	
1	43	100	Acetone	43	100	(Eight peak index	
	58	46		58	33	of mass spectra)	
	15	22		15	27		
	42	7		42	11		
	27	4		27	5		
	39	3		39	4		
	29	21		29	4		
	26	4		26	3		
2	130	100	Trichloroethylene	130	98	(Eight peak index	
	132	96	-	132	94	of mass spectra)	
	95	83		95	100		
	97	55		97	64		
	134	31		134	30		
	60	19		60	31		
	99	8		99	11		
	62	8 .		62	10		
3	43	100	1,1,1-Trichloropropane	43	100	(Eight peak index	
	15	10		15	12	of mass spectra)	
	83	3		83	6		
	27	3		27	5		
	125	Not observed		125	4		
	63	4		63	4		
	47	Not observed		47	4		
	85	Not observed		85	3		
4	166	100	Tetrachloroethylene	166	100	(Eight peak index	
	164	99		164	78	of mass spectra)	
	129	88		129	64		
	131	87		131	62		
	168	83		168	48		
	133	25		133	20		
	94	24		94	21		
	96	15		96	14		
5	83	100	1,1,2,2-Tetrachloroethane	83	100	(Eight peak index	
	85	62		85	63	of mass spectra)	
	131	15		131	8		
	168	13		168	8		
	95	12		95	11		
	87	9		87	10		
	61	9		61	8		
	60	6		60	8		

TABLE F4. MASS SPECTROMETRY DATA

Peak				Literature			
(Same as Table F3)	Mass	Percent of Base Peak	Assignment	Percent of Mass Base Peak		Reference	
6	132	100	Trichloroethylene	132	94	(Eight peak index	
	130	98	from system decomposition	130	98	of mass spectra)	
	95	93		95	100	• *	
	97	55		97	64		
	134	30		134	30		
	60	25		60	31		
	99	10		99	11		
	62	10		62	10		
7	166	100	Tetrachloroethylene	166	100	(Eight peak index	
	164	82	from system decomposition	164	78	of mass spectra)	
	131	64		131	62	· · · · · · · · · · · · · · · · · · ·	
	129	64		129	64		
	168	46		168	48		
	94	27		94	21		
	96	21		96	14		
	133	20		133	20		
8	117	100	Pentachloroethane	117	99	(Eight peak index	
	119	98		119	97	of mass spectra)	
	167	92		167	100	• *	
	165	68		165	78		
	169	44		169	48		
	166	12		166	60		
	164	6		164	46		
	82	4		82	61		
9	117	100	Hexachloroethane	117	100	(Eight peak index	
	201	97		201	81	of mass spectra)	
	119	92		119	87		
	166	78		166	42		
	203	60		203	51		
	199	59		199	49		
	164	57		164	42		
	121	28		121	31		
10	191	100	Pentachlorobutadiene	191	100	(Eight peak index	
	189	69		189	78	of mass spectra)	
	226	58		226	46	•	
	193	46		193	48		
	119	31		119	29		
	156	25		156	30		
	154	20		154	31		
	84	17		84	44		
11	155	100	1,2,4.4-Tetrachlorobutadiene	155	100	(Eight peak index	
	157	91		157	96	of mass spectra)	
	192	54		192	52	•	
	190	43		190	38		
	119	40		119	46		
	159	30		159	30		
	194	28		194	24		
	121	28		121	30		

TABLE F4. MASS SPECTROMETRY DATA (Continued)

Pentachloroethane

APPENDIX F

With flame ionization detection, Section C-1-a, a cluster of two peaks and a shoulder, numbered Peaks 5, 6, and 7, were observed eluting shortly before the major peak. In the mass spectrum, two components were identified in this region, trichloroethylene and tetrachloroethylene which were formed by system decomposition. It is believed that Peak 5 by flame ionization detection is not a separate component but a shoulder formed during decomposition.

The assignment of peaks 10 and 11 in the mass spectrum as pentachlorobutadiene and 1,2,4,4-tetrachlorobutadiene must be considered tentative for several reasons. Two peaks, 11 and 12, in Section C-1-a were observed by flame ionization detection in the region of Peak 11, but only one peak was observed in the mass spectrum. Peak 10 is assigned as pentachlorobutadiene and Peak 11 as 1,2,4,4tetrachlorobutadiene, but it is probable that tetrachlorobutadiene would have a shorter retention time than pentachlorobutadiene. No standards were commercially available to spike the sample and determine which peak is enhanced. However, the match with the literature spectra is good, and it appears that compounds with these or very similar structures are present as impurities.

Specific ion searches were run for masses 47 and 83 characteristic of chloroform, and masses 119 and 131 characteristic of 1,1,1,2-tetrachloroethane. Masses 47 and 83 were both observed under Peaks 2, 4, 8, 9 and 11, and masses 119 and 131 were both observed under Peaks 4, 8 and 9, but the ratios of these masses were wrong for these peaks to be chloroform and 1,1,1,2-tetrachloroethane, and these peaks were identified as other compounds.

CONCLUSIONS: The sample does not contain > 0.01% chloroform or 1,1,1,2-teterachloroethane. The sample contains acetone, trichloroethylene, hexachloroethane as well as pentachloroethane, the major component. It also contains tetrachlorobutadiene and pentachlorobutadiene or compounds of similar structure.

E. SPECTRAL DATA

(1) Infrared:

Instrument: Beckman IR-12

Cell: Thin film between AgCl plates

RESULTS: (See Figure 7)

(2) Ultraviolet/Visible:

Instrument: Cary 118

No absorbance between 350 and 800 nm (visible region). No maximum between 212 and 350 nm (ultraviolet region) but a gradual increase in absorbance toward the solvent cutoff at 212 nm.

Concentration: 1%, 0.1%, and 0.01% Solvent: Methanol

(3) Nuclear Magnetic Resonance:

Instrument: Varian EM-360 60 MHz

Solvent: Neat, tetramethylsilane added

Assignments: (See Figure 8)

- (a) S, δ 6.11 ppm
- (b) δ 2.14 ppm
- Integration Ratios:
- (a) 1.00
- (b) < 0.01

Literature Values Consistent with literature spectrum. (Sadtler standard spectra)

No literature reference found.

Consistent with literature spectrum. (Sadtler standard spectra)



Figure 7. Infrared Absorption Spectrum of Pentachloroethane (Lot No. CO102077)

140





Υ

Pentachloroethane

142

APPENDIX G

ANALYSIS OF PENTACHLOROETHANE FOR STABILITY IN CORN OIL MIDWEST RESEARCH INSTITUTE

Pentachloroethane

A. SAMPLE PREPARATION

A 1% (w/v) sample solution of pentachloroethane in corn oil was prepared for each day of the study as follows: 10 ml of corn oil was transferred into a 50-ml septum vial, the vial was sealed, and then approximately 95 mg of pentachloroethane was added via a 100- μ l syringe. The samples were shaken and stored at room temperature from 1 to 7 days, respectively.

B. EXTRACTION AND ANALYSIS

The samples were extracted with 20 ml of methanol, which was injected into the sample vial via a 10-ml syringe. Samples for analysis were taken directly from the top (methanol) layer and analyzed by vapor-phase chromatography using the following system.

Instrument: Bendix 2500

Column: 10% Carbowax 20 M on 80/100 Chromosorb W (AW), 1.8 m x 4 mm l.D., glass

Detection: Flame ionization

Oven temperature: 130°C, isothermal

Inlet temperature: 250°C

Detector temperature: 280°C

Retention time of test compound: 3.00 minutes.

C. RESULTS

End of Day	Average % Compound (a)				
1	0.98 ± 0.05				
2	0.97 ± 0.05				
3	0.97 ± 0.05				
4	1.01 ± 0.05				
5	1.02 ± 0.05				
6	1.00 ± 0.05				
7	1.03 ± 0.05				

(a) Corrected for a spiked recovery value of 60.2%.

D. CONCLUSION

Pentachloroethane mixed in corn oil is stable for 7 days at room temperature.

APPENDIX H

ANALYSIS OF PENTACHLOROETHANE IN CORN OIL FOR CONCENTRATIONS OF PENTACHLOROETHANE GULF SOUTH RESEARCH INSTITUTE

Pentachloroethane

The sample (1.0 ml) was diluted with isooctane (10 ml) and an aliquot was analyzed by gas chromatography.

Instrument Parameters

Column: 20% SP 2100/0.1% Carbowax 1500 on 100/120 Supelcoport Detector: Flame Ionization Detector Temp: 250°C

Temp: 120°C

Flow: $\sim 30 \text{ ml/minute}$

RESULTS: See Table H1.

	Date Used	Concentration of Pentachloroethane (a in Samples with Target Concentrations of:			
Date Mixed	Week of:	30 mg/ml	50 mg/ml		
1/4/78	1/5/78		49.1		
3/29/78	3/30/78	_	50.2		
5/4/78	5/5/78		47.0		
8/3/78	8/4/78	_	50.6		
9/22/78	9/23/78		50.6		
9/29/78	9/30/78		54.5		
1/4/79	1/5/79	—	49.0		
3/20/79	3/21/79		47.1		
5/31/79	6/1/79		53.9		
7/26/79	7/27/79	28.0			
10/11/79	10/12/79	31.9	_		
11/2/79	11/3/79	32.6			
12/6/79	12/7/79	30.2	—		
 Mean (mg/ m	l) .	30.7	50.2		
Standard Dev	viation	2.05	2.62		
Coefficient of Variation (%		6.7	5.2		
Range (mg/ n	nl)	28.0-32.6	47.0-54.5		
Number of S	amples	4	9		

TABLE H1. ANALYSIS OF PENTACHLORO-ETHANE IN CORN OIL

(a) Data presented are the averages of the results of duplicate analyses.

APPENDIX I

MEAN BODY WEIGHTS OF ANIMALS ADMINISTERED PENTACHLOROETHANE BY GAVAGE IN THE TWO-YEAR STUDY

		Mean Body Weight (grams)			Body Weight Relative to Controls <i>(a)</i> (percent)		
	Week No.	Control	Low Dose	High Dose	Low Dose	High Dose	
MALE	0	133	140	138	+ 5	+ 4	
	2	181	185	181	+ 2	0	
	22	354	351	353	- 1	0	
	42	395	394	381	0	- 4	
	62	427	420	420	- 2	- 2	
	82	447	429	432	- 4	- 3	
	102	428	403	395	- 6	- 7	
	103	420	405	400	- 4	- 5	
FEMALE	0	101	100	102	- 1	+ 1	
	2	129	126	125	- 2	- 3	
	22	193	183	189	- 5	- 2	
	42	213	203	201	- 5	- 6	
	62	241	222	218	- 8	-10	
	82	271	251	243	- 7	-10	
	102	277	247	242	-11	-13	
	103	276	255	242	- 8	-12	

TABLE I1. MEAN BODY WEIGHTS (RELATIVE TO CONTROLS) OF RATS ADMINISTERED PENTACHLOROETHANE BY GAVAGE IN THE TWO-YEAR STUDY

(a) Weight relative to controls =

Weight (Dosed Group) – Weight (Control Group) × 100

Weight (Control Group)

		Mean Body Weight (grams)			Body Weight Relative to Controls <i>(a)</i> (percent)		
	Week No.	Control	Low Dose	High Dose	Low Dose	High Dose	
MALE	0	27	27	26	0	- 4	
	2	29	31	30	+ 7	+ 3	
	22	42	44	37	+ 5	-12	
	42	49	49		0		
	62	51	46		-10		
	82	49	42		-14		
	102	44	36	_	-18	-	
	103	44	36		-18		
FEMALE	0	20	20	20	0	0	
	2	22	23	24	+ 5	+ 9	
	22	28	30	29	+ 7	+ 4	
	42	37	36	30	- 3	-19	
	62	38	37	30	- 3	-21	
	82	42	34		-19		
	102	41	27		-34		
	103	39	34	_	-13		

TABLE 12.MEAN BODY WEIGHTS (RELATIVE TO CONTROLS) OF MICE ADMINISTERED
PENTACHLOROETHANE BY GAVAGE IN THE TWO-YEAR STUDY

(a) Weight relative to controls =

Weight (Dosed Group) – Weight (Control Group) × 100

Weight (Control Group)

* U.S. GOVERNMENT PRINTING OFFICE: 1983-381-132:3047