NATIONAL TOXICOLOGY PROGRAM Technical Report Series No. 236



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 D-MANNITOL

(CAS NO. 69-65-8)

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



NATIONAL TOXICOLOGY PROGRAM Box 12233 Research Triangle Park North Carolina 27709 and Bethesda, Maryland 20205

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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 is a potential 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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D-Mannitol

6

CARCINOGENESIS BIOASSAY OF D-MANNITOL



D-MANNITOL

CAS NO. 69-65-8 C₆H₁₄O₆ Mol. Wt. 182.17

ABSTRACT

A carcinogenesis bioassay of D-mannitol (98%-100% pure), a food and drug additive, was conducted by feeding diets containing 25,000 or 50,000 ppm D-mannitol to groups of 50 F344/N rats and 50 B6C3F1 mice of each sex for 103 weeks. Groups of 50 rats and 50 mice of each sex served as controls.

Survival and mean body weights of dosed and control male rats and of dosed and control mice of each sex were comparable. Survival of high-dose female rats was significantly higher (P < 0.05) than that of the low-dose female rats. However, neither the survival of the low-dose group nor that of the high-dose group was significantly different from that of the controls. Throughout the study, mean body weight gain of dosed female rats was depressed ($\leq 10\%$) relative to that of controls. Feed consumption by dosed and control rats and mice of each sex was similar.

Although the rats and mice of each sex might have been able to tolerate higher doses, a dietary level of 50,000 ppm (5%) is the maximum concentration of a test substance in feed recommended in the guidelines of the Bioassay Program.

Dilatation of the gastric fundal gland was observed in increased incidence in dosed female rats when compared with that of controls (control, 6/50, 12%; low dose, 23/50, 46%; high dose 23/50, 46%). Retinopathy and cataracts occurred at increased incidences in high-dose males and in low- and high-dose female rats.

A mild nephrosis, characterized by focal vacuolization of renal tubular epithelium, was observed in increased incidence in dosed mice of each sex and was considered to be related to administration of D-mannitol (males: control, 15/50, 30%; low dose, 29/50, 58%; high dose, 30/47, 64%; females: control, 1/48, 2%; low dose, 3/48, 6%; high dose, 14/49, 29%).

Under the conditions of this bioassay, D-mannitol was not carcinogenic for F344/N rats or B6C3F1 mice of either sex.

CONTRIBUTORS

The bioassay of D-mannitol was conducted at Southern Research Institute under a subcontract to Tracor Jitco, Inc., the prime contractor for the Carcinogenesis Testing Program. The chronic study in rats was begun in April 1978 and completed in May 1980. The chronic study in mice was begun in June 1977 and completed in June 1979.

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The chemicals used in this bioassay of D-mannitol were analyzed by the Midwest Research Institute, 425 Volker Blvd., Kansas City, Missouri 64110, and analysis of the formulated diets and reanalysis of the bulk chemical were performed by Southern Research Institute.

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SUMMARY OF PEER REVIEW COMMENTS

On December 16, 1981, this report underwent peer review by the National Toxicology Program Board of Scientific Counselors' Technical Reports Review Subcommittee and associated Panel of Experts. The review meeting began at 9:00 a.m. in Conference Room A, Landow Building, 7910 Woodmont Avenue, Bethesda, Maryland.

Dr. Schwetz, a principal reviewer for the report on the bioassay of D-mannitol, agreed with the conclusion that, under the conditions of this bioassay, D-mannitol was not carcinogenic for F344/N rats of B6C3F1/N mice of either sex. He commented on the finding of retinopathy and cataracts in male and female rats in the chronic study and questioned the wording of the support for the conclusion in the report that the lesions could be associated with the distance of the animals from a fluorescent light source. He said that before discharging the observation, evidence should be cited that the lesions were not related to administration of D-mannitol in the diet.

As a second principal reviewer, Dr. Vore also agreed with the conclusions of the report. She said that the highest dose used, 50,000 ppm, had little effect on survival or weight gain but was the highest concentration recommended for feeding in the bioassay program. She stated that other monosaccharides have been shown to induce cataracts and expressed concern that the degree of exposure to the fluorescent light was not controlled; this precluded interpretation or association of D-mannitol with the lesion. Dr. Mirer asked whether the induction of ocular lesions by light was dose related, and, further, whether such lesions could be distinguished from chemically-induced lesions. Dr. Schwetz replied that, in his experience, light-induced lesions were not readily distinguishable from chemical-induced lesions, nor is the onset time different.

Dr. Schwetz moved that the report on the bioassay of D-mannitol be accepted with minor changes noted in the discussion and in the reviewer's comments. Dr. Vore seconded the motion and the report was approved unanimously by the Peer Review Panel.

p-Mannitol

I. INTRODUCTION



D-MANNITOL

D-Mannitol occurs in algae, fungi, bacteria, and a variety of higher plants, including pumpkins, onions, celery, strawberries, and cocoa beans (Food and Agriculture Organization, 1967; Kirk-Othmer, 1963). It is used primarily in the production of chewable tablets. Since D-mannitol has half the caloric value of glucose, it is also used as a replacement for sugar in dietary foods (Furia, 1972). Concentrations of 3%-10% D-mannitol may be found in sugarless chocolate, gum, and hard candy (Furia, 1972). Its generally recognized as safe (GRAS) status was reevaluated by the U.S. Food and Drug Administration, and it was approved subject to interim food additive regulation No. 121.4005 for use as a food additive (U.S. Code of Fed. Reg., 1976, 1977) and, as such, must be at least 96% pure (Food Chemicals Codex, 1972). The Joint FAO/WHO Expert Committee on Food Additives classified D-mannitol consumption of 50-150 mg/kg/day as "conditionally acceptable" for humans (Food and Agriculture Organization, 1967).

D-Mannitol is also used to retain moisture and give bulk to food and drugs and to improve the properties of stored products such as skim milk powder, blood, semen, and freeze-dried bacteria (Furia, 1972; Kirk - Othmer, 1978; Redway and LaPage, 1974). It is administered intravenously to humans as an osmotic diuretic (Kirk - Othmer, 1979), and is used to prevent or treat oliguria and anuria associated with major surgery (American Medical Association, 1973), to decrease intraocular pressure in patients with glaucoma (Weiss et al., 1962), and to reduce intracranial pressure (Wise and Chater, 1961). D-Mannitol is produced commercially by the reduction of glucose or sucrose (Kirk - Othmer, 1978). Approximately 789,000 kg of D-mannitol was used in processed foods in 1970 (Life Sciences Research Office, 1972). Current production figures are not available (USITC, 1980).

The reported oral LD₅₀ value is 17.3 g/kg in rats and 22 g/kg in mice (Food and Agriculture Organization, 1967). In mice, the reported LD₅₀ value for D-mannitol administered intravenously is 16.8 g/kg (Food and Agriculture Organization, 1967) and for D-mannitol administered intraperitoneally is 14-16 g/kg (Beck et al., 1936).

Death in mice was preceded by central nervous system depression, damage to the gastrointestinal tract, and diarrhea (Food and Agriculture Organization, 1967).

Intravenous administration of D-mannitol (0.3 g initial dose, followed by hourly 1-g injections) to Sprague-Dawley rats resulted in complete inhibition of salt and water resorption from the medullary collecting system of the kidney (Sonnenberg, 1978). Only 1.3%-2% of the labeled carbon from [1⁴C]-D-mannitol administered by intraperitoneal injection to rats was recovered in expired carbon dioxide by 12 hours as compared with 50% for orally administered [1⁴C]-D-mannitol. This suggests that the liver plays an important role in the metabolism of this compound (Wick et al., 1954).

In humans, single oral doses greater than 20 g have a laxative effect (Ellis and Krantz,

CAS NO. 69-65-8 C₆H₁₄O₆ Mol. Wt. 182.17

1941). Human subjects ingesting $[^{14}C]$ -D-mannitol eliminated 1%-7% of the label in the urine in 48 hours and 18.7% in the expired carbon dioxide in 12 hours (Nasrallah and Iber, 1969).

D-Mannitol was not mutagenic for Salmonella typhimurium G-46 or TA 1530 or for Saccharomyces cerevisiae D-3 when tested without metabolic activation (Green, 1977). Mutagenesis testing results of the National Toxicology Program at three different laboratories showed that Dmannitol was not mutagenic for Salmonella typhimurium TA 98, 100, 1535, and 1537 (NTP Tech. Bull., 1981). Results of a dominant lethal assay in rats at doses of 20, 200, 2,000, and 5,000 mg/kg of D-mannitol by gavage were negative. No increases in chromosome aberrations were observed in an *in vivo* rat bone marrow study or in an *in vitro* study using WI-38 human cells (FDA, 1974).

D-Mannitol was tested for carcinogenicity because of its widespread use (as a food additive and as a medicinal) and human exposure and because of the lack of long-term carcinogenicity studies.

II. MATERIALS AND METHODS

CHEMICAL ANALYSES PREPARATION OF TEST DIETS PRECHRONIC STUDIES Single-Dose Study Fourteen-Day Study Thirteen-Week Study CHRONIC STUDY Study Design Animal Maintenance Clinical Examinations and Pathology Data Recording and Statistical Methods

CHEMICAL ANALYSES

USP grade D-mannitol was obtained in three batches from ICI America, Atlas Chemical Division (Wilmington, DE).

Lot No. 4644 was used for the 13-week studies in rats and mice, for the first 14 months of the chronic study in mice, and for the first 2 months of the chronic study in rats. Lot No. 00041 was used for the final 10 months of the chronic study in mice and for months 3 to 6 in rats. Lot No. 20022 was used for the final 18 months of the chronic study in rats.

Purity and identity analyses were performed at Midwest Research Institute (Kansas City, MO) (Appendix E). Results of elemental analyses for carbon and hydrogen agreed with the theoretical values for all three lots. The results of titration with thiosulfate after periodate oxidation of D-mannitol indicated that Lot No. 4644 was 100.5% pure, Lot No. 00041 was 97.8% pure, and Lot No. 20022 was 99.0% pure. No impurities were detected by thin-layer chromatography in any lots. The remainder of both Lot No. 00041 and Lot No. 20022 was basically comprised of water. The ultraviolet/visible spectrum was consistent with that expected for the structure of Dmannitol. The infrared and nuclear magnetic resonance spectra were consistent with those reported in the literature.

The bulk chemical was examined at Midwest Research Institute and was found to be stable when stored at temperatures up to 60° C for 2 weeks (Appendix F). To ensure the stability of the chemical, the bioassay laboratory stored it in the dark at 5°C. Southern Research Institute analyzed each batch in use every 4 weeks throughout the study by gas chromatography after derivatization with either a silylating agent (Appendix E, Section G) or n-butane boronic acid (Appendix G) and by infrared spectroscopy. No evidence of any degradation was seen.

PREPARATION OF TEST DIETS

The feed used in the prechronic and chronic studies was ground Wayne Lab Blox[®] (Allied Mills, Inc., Chicago, IL). Manufacturer information indicated that the feed contained no antibiotics and that it was tested regularly to assure the absence of estrogenic activity and Salmonella. The diet composition with regard to nutritional materials was also known.

In the 14-day, 13-week, and 2-year studies, the required amount of D-mannitol was first mixed with a known amount of feed and then blended for 10 minutes (Table 1). The premix and the rest of the feed was then added to a Patterson-Kelly Twin-Shell blender and mixed for 15 minutes. This procedure was found to produce the most homogenous mixture (Appendix G). D-Mannitol mixed in feed was found to be stable for at least 2 weeks at temperatures up to 45° C. The stability of the chemical was ensured by storing formulated diets at 5°C in sealed plastic bags and using them within 2 weeks.

Samples of formulated diets used in the chronic study were periodically analyzed for concentrations of D-mannitol (Appendix H). All but five samples were within $\pm 10\%$ of the specified concentrations. No analyses were performed to confirm the concentrations of D-mannitol used in the 14-day or in the 13-week studies.

PRECHRONIC STUDIES

Single-Dose Study

Male and female F344/N rats and B6C3F1/N mice were obtained from Frederick Cancer Research Center and held for approximately 10 days before the study began. Rats and mice were approximately 6 weeks old when placed on study.

Animals of the same sex and species were housed five per cage in stainless steel cages. Assignments to cages and dosage groups were made according to tables of random numbers. Feed and water were available *ad libitum* during the 16-day observation period. Additional information on animal maintenance appears in Table 1.

Groups of five animals of each sex and species were administered a single dose of 300, 600, 1,200, 2,500, or 5,000 mg/kg D-mannitol in distilled water by gavage. Animals were observed twice daily for mortality and other clinical signs. No necropsies were performed.

Fourteen-Day Study

F344/N rats and B6C3F1/N mice of each sex were obtained from Frederick Cancer Research Center and held for 10 days before the study began. The animals were 6 weeks old when the study began. Animals were assigned to cages and to dosage groups according to tables of random numbers.

Groups of five males and five females of each species were fed diets containing 6,000, 12,500, 25,000, 50,000, or 100,000 ppm D-mannitol for 14 days (Table 1). No control groups were used. Animals were observed twice daily for mortality and were weighed on days 1 and 15. Animals were killed on days 16 to 20, and necropsies were performed on all animals.

Thirteen-Week Study

Thirteen-week studies were conducted to evaluate the cumulative toxicity of D-mannitol and to determine the concentrations to be used in the chronic studies.

Four-week-old male and female F344/N rats and B6C3F1/N mice were obtained from the Frederick Cancer Research Center and observed for 6 days. Animals of the same sex and species were housed five per cage in stainless steel cages. The animals were assigned to cages and dosage groups according to tables of random numbers. Ten rats and 10 mice of each sex were fed ad libitum diets containing 0, 3,000, 6,000, 12,500, 25,000, or 50,000 ppm D-mannitol for 13 weeks. [Male and female rats and mice in the 3,000-and 6,000-ppm groups accidentally received diets containing 3,000 or 6,000 ppm ziram (CAS No. 137-30-4) for one day (day 56).] Environmental conditions and animal maintenance procedures are described in Table 1.

Animals were checked for mortality and signs of morbidity twice daily. Those animals that were judged moribund were killed and necropsied. Each animal was given a weekly clinical examination which included palpation for tissue masses or swelling. Body weight and feed consumption data were collected weekly.

At the end of the 91-day study, survivors were killed with carbon dioxide, and necropsies were performed on animals that survived to the end of the study and on all dead animals not autolyzed or cannibalized.

The following tissues were examined for control, 25,000-ppm, and 50,000-ppm groups: peripheral blood, skin, lymph nodes, mammary glands, skeletal muscles, bone marrow, thymus, larynx, trachea, heart, thyroid, lung, parathyroid, esophagus, stomach, small intestine, colon, liver, pancreas, spleen, kidneys, adrenals, urinary bladder, seminal vesicles, prostate, testes, uterus, ovaries, brain, and pituitary. Tissues were preserved in 10% neutral buffered formalin, embedded in paraffin, sectioned, and stained with hematoxylin and eosin.

CHRONIC STUDY

Study Design

Three- to four-week-old male and female F344/N rats were obtained from Harlan Industries, Inc. and observed for 13 days before being placed on study (Table 1). Four-week-old male and female B6C3F1/N mice were obtained from the NCI Frederick Cancer Research Center and observed for 7 days before being placed on study. The initial weights of animals used in the study were: male rats, 82-128 g; female rats, 70-120 g; male mice, 13-25 g; and female mice, 13-20 g. Only those animals that appeared healthy were used for the study.

Fifty male and 50 female rats and a similar number of male and female mice were fed diets containing 0, 25,000, or 50,000 ppm D-mannitol for 103 weeks. The assignment of animals to dosage groups was done according to tables of random numbers.

Animal Maintenance

Animals of the same sex and species were housed in groups of five in polycarbonate cages. Distribution of animals to cages was done according to a table of random numbers. Bedding and cages were changed twice weekly and racks and filters were changed once every 2 weeks. Tap water was offered via an automatic watering system. Experimental diets were offered ad libitum for 103 weeks. The animal room temperature was 20°-24°C with 30%-60% relative humidity. Room air underwent 15 changes per hour. Fluorescent light illumination was provided 12 hours per day. No other chemicals were on test in the same room with rats used for the D-mannitol study. However, mice used in this study were housed with mice fed eugenol (CAS No. 97-53-0) for the first year and with mice fed ziram (CAS No. 137-30-4) for the entire study period.

Clinical Examinations and Pathology

All animals were observed twice daily for signs of toxicity. Clinical signs were recorded monthly. Body weights and feed consumption by cage were recorded at least every 4 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. The average feed consumption per animal was calculated by dividing the total feed consumption measured for all cages by the number of surviving animals in the group. Moribund animals and animals that survived to the end of the bioassay were killed with carbon dioxide and necropsied at weeks 104-106.

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. Special staining techniques were used as necessary. Tissues examined microscopically are listed in Table 1.

Necropsies were performed on all animals not autolyzed or cannibalized. 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.

The pathology report and selected slides were evaluated by the NTP Pathology Working Group as described by Ward et al. (1978). Neoplastic nodules were classified according to the recommendations of Squire and Levitt (1975) and the National Academy of Sciences (1980). The diagnoses represent a consensus of contracting 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 for 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. The 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 dying 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, 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 carried out 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 compound administration has little effect on survival, the results of the three alternative analyses are usually similar. When differing results are obtained by the three methods, the final interpretation of the data depends on the extent to which the tumor under consideration is regarded as being the cause of death.

D-Mannitol

TABLE 1. EXPERIMENTAL DESIGN AND MATERIALS AND METHODS OF PRECHRONIC AND CHRONIC STUDIES OF RATS AND MICE FED DIETS CONTAINING D-MANNITOL

	Single-Dose	14-Day Study	13-Week Study	Chronic Study
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	300, 600, 1,200, 2,500, or 5,000 mg/kg p-mannitol in distilled water by gavage	6,000, 12,500, 25,000, 50,000, or 100,000 ppm p-mannitol in feed; available <i>ad libitum</i>	0. 3,000. 6,000, 12,500, 25,000, or 50,000 ppm p-mannitol in feed; available <i>ad libitum</i>	0, 25,000, or 50,000 ppm D-mannitol in feed; available <i>ad libitum</i>
Duration of Dosing	Single dose; killed day 16	14 days; killed days 16 to 20	13 weeks; killed days 92 to 99	103 weeks; killed weeks 104 to 106
Type and Frequency of Observation	Observed twice daily for mortality	Observed twice daily for mortality and weighed on days 1 and 15.	Observed twice daily; weighed once per week	Observed twice daily; weighed every 4 weeks
Necropsy and Histologic Examination	None performed	All animals necropsied	All animals necropsied; controls and test groups receiving 25,000 ppm and 50,000 ppm received histo- pathologic examination (a)	All animals necropsied and examined histologi- cally (b)
Animals and Animal Mainten	ance			
Species	F344/N rats; B6C3F1/N mice	F344/N rats; B6C3F1/N mice	F334/N rats; B6C3F1/N mice	F344/N rats; B6C3F1/N mice
Animal Source	Frederick Cancer Research Center (Frederick, MD)	Frederick Cancer Research Center (Frederick, MD)	Frederick Cancer Research Center (Frederick, MD)	Rats: Harlan Industries (Indianapolis, IN) Mice: Frederick Cancer Research Center (Frederick, MD)
Time Held Before Start of Test	10 days	10 days	6 days	Rats: 13 days Mice: 7 days
Age When Placed on Study	6 weeks	6 weeks	5 weeks	Rats: 36 days old Mice: 40 days old

	Single-Dose	14-Day Study	13-Week Study	Chronic Study
Method of Animal				Same as single-dose
Distribution	Assigned to cages according to a table of random numbers, then to dosed groups according to a second table of random numbers	Same as single-dose study	Same as single-dose study	study
Feed	Wayne Lab Blox® Allied Mills, Inc. (Chicago, IL); available ad libitum	Same as single-dose study	Same as single-dose study; hoppers changed once a week	Same as single-dose study; hoppers changed once a week
Bedding	Heat-treated hardwood chips, Beta-Chips® Northeastern Products Corp. (Warrensburg, NY)	Same as single-dose study	Same as single-dose study; bedding replaced twice weekly	Same as single-dose study (c); bedding replaced twice weekly
Water	Tap water in bottles available <i>ad libitum</i>	Same as single-dose study	Same as single-dose study; bottles replaced once a week	Automatic Watering System, Edstrom Industries, Inc. (Waterford, WI)
Cages	Stainless steel, Hahn Roofing and Sheet Metal Co. (Birmingham, AL)	Same as single-dose study	Same as single-dose study; cages replaced once a week.	Polycarbonate, Lab Products, Inc. (Garfield, NJ) Cages replaced twice weekly.
Cage Filters	Filter Bonnets	Same as single-dose study	Same as single-dose study; Racks and filters changed once every 2 weeks.	Spun-bonded polyester filters. Racks and filters changed once every 2 weeks.
Animals per Cage	5	5	5	5

TABLE 1. EXPERIMENTAL DESIGN AND MATERIALS AND METHODS OF PRECHRONIC AND CHRONIC STUDIES OF RATS AND MICEFED DIETS CONTAINING D-MANNITOL (Continued)

	Single-Dose	14-Day Study	13-Week Study	Chronic Study
Animal Room Environment	20°-24°C; 30%-60% relative humidity, room air changed 15 times per hour. 9 hours of fluorescent light	Same as single-dose study	Same as single-dose study	20°-24°C; 30%-60% relative humidity, room air changed 15 times per hour, 12 hours of fluorescent light per day
Other Chemicals on Test in the Same Room			Stannous chloride, ziram, ethyl acrylate, eugenol, allyl isothiocyanate, propyl gallate, zearalenone	Rats: none Mice: eugenol (first year) ziram (entire test period)
Chemical Feed Mixture Preparation	Weighed portion of D-mannitol added to distilled water: mixture heated (110°F) until dissolved	Weighed portion of D-mannitol for each dose level was sifted, then mixed with small amount (1 cup) Wayne Lab Blox® mash. Mixture was blended in Hamilton Beach Mixmaster until uniform. This mixture was added to remaining mash and mixed in a Patterson-Kelly® Twin Shell Blender for 15 min.	Same as 14-day study	Weighed portion of D- mannitol for each dose level was mixed with portion of Wayne Lab Blox® mash. Mixture was blended in Patterson-Kelly® Twin Shell Blender for 10 min. Remainder of allotted feed was then added to blender and mixed additional 15 min.
Maximum Storage Time		7 days	14 days	14 days

TABLE 1. EXPERIMENTAL DESIGN AND MATERIALS AND METHODS OF PRECHRONIC AND CHRONIC STUDIES OF RATS AND MICE FED DIETS CONTAINING D-MANNITOL (Continued)

(a) The following tissues were examined: peripheral blood, skin, lymph nodes, mammary glands, salivary glands, skeletal muscles, bone marrow, thymus, larynx, lung, trachea, heart, thyroids, parathyroids, esophagus, stomach, small intestines, colon, liver, pancreas, spleen, kidneys, adrenals, urinary bladder, seminal vesicles, uterus, ovary, prostate, testes, brain, and pituitary.

(b) The following tissues were examined: pituitary, abnormal lymph nodes, tissue masses, brain, eyes, external and middle ear, spinal cord, mandibular lymph node, nasal cavity, thyroid, parathyroids, salivary glands, thymus, larynx, heart, liver, gall bladder, pancreas, spleen, adrenals, kidneys, urinary bladder, inguinal lymph node, mesenteric lymph node, mammary gland, sciatic nerve, bone (femur), trachea, esophagus, lungs, bronchi, costochondral junction, (rib), stomach, duodenum, jejunum, ileum, cecum, colon, rectum, bone marrow (femoral), thigh muscle, ovaries, fallopian tubes, uterus, vagina, seminal vesicles, prostate, testes, epididymis, skin (abdominal).

(c) In the mouse study the bedding was changed to sawdust (P.W.I., Inc.; Lowville, N.Y.) for days 234-344, 371-555, and 620-630. In the rat study sawdust was used for days 1-177 and 242-252.

III. RESULTS

RATS

PRECHRONIC STUDIES

Single-Dose Study

Fourteen-Day Study

Thirteen-Week Study

CHRONIC STUDY

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

MICE

PRECHRONIC STUDIES

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

CHRONIC STUDY

Body Weights and Clinical Signs

Survival

Pathology and Statistical Analyses of Results

PRECHRONIC STUDIES

Single-Dose Study

Rats were observed for 15 days. All animals survived to the end of the 16-day test period. No compound-related effects were observed. Because of these findings, dose levels of 6,000, 12,500, 25,000, 50,000, and 100,000 ppm were selected for the 14-day study. The 100,000-ppm dose level was selected so that the effects of doses above and below 50,000 ppm could be examined.

Fourteen-Day Study

All animals survived to the end of the dosing period (Table 2). Females fed diets containing 100,000 ppm gained less weight than did other groups of dosed females. Two of the five male rats administered the 100,000-ppm diets had diarrhea from days 4 to 6. No gross lesions were observed at necropsy. The dose levels selected for the 13-week study were 0, 3,000, 6,000, 12,500, 25,000, and 50,000 ppm D-mannitol in the diet.

TABLE 2. DOSAGE, SURVIVAL, AND	MEAN BODY WEIGHTS OF RATS FED DIETS CONTAINING
D-MANNITOL FOR 14 DAY	'S

			Mean Body \	Veights (grams)
Dose (ppm)	Survival (a)	Initial	Final	Change
ales				
6.000	5/5	80	138	+ 58
12,500	5/5	89	144	+ 55
25,000	5/5	94	139	+ 45
50,000	5/5	87	131	+ 44
100.000	5/5	84	135	+ 51
emales				
6.000	5/5	80	120	+ 40
12,500	5/5	84	111	+ 27
25.000	5/5	76	107	+ 31
50,000	5/5	84	112	+ 28
100.000	5/5	80	101	+ 21

(a) Number surviving/number initially in the group.

Thirteen-Week Study

All animals survived. Mean body weight gain of males administered diets containing 50,000 ppm D-mannitol was depressed 9.6% relative to controls; mean body weight gains of other dosed groups were approximately the same as those of controls (Table 3). No compound-related clinical signs or histopathologic effects were observed. The principal histopathologic findings in the control, 25,000-ppm, and 50,000-ppm groups were mild to moderate peribronchial lymphoid hyperplasia and cystic ovaries. These changes did not appear to be related to administration of Dmannitol and were considered to be incidental.

Doses of 25,000 and 50,000 ppm D-mannitol in the diet were selected for rats in the chronic study because the latter dose is the maximum concentration recommended for chronic feeding studies (NCI, 1976).

TABLE 3. DOSAGE, SURVIVAL, AND MEAN BODY WEIGHTS OF RATS FED DIETS CONTAININGD-MANNITOL FOR 13 WEEKS

		Mean	Body Weight (grams)	Weight Change Relative to	Daily Feed
Dose (ppm)	Survival (a)	Initial	Final	Change (b)	Controls (c) (Percent)	Consumption (grams)
Males				······		
0	10/10	73.3 ± 3.0	304.4 ± 5.9	+231.1 ± 4.4		13.7
3,000	10/10	70.3 ± 2.3	296.7 ± 4.9	$+226.4 \pm 5.0$	- 2.0	15.5
6,000	10/10	66.1 ± 1.7	293.9 ± 3.0	$+227.8 \pm 4.0$	- 1.4	15.2
12,500	10/10	73.5 ± 3.8	306.9 ± 4.9	$+233.4 \pm 2.0$	+ 1.0	15.5
25,000	10/10	71.2 ± 2.5	302.1 ± 5.6	$+230.9 \pm 5.0$	- 0.1	15.4
50,000	10/10	74.6 ± 2.6	283.6 ± 4.8	$+209.0 \pm 4.8$	- 9.6	16.1
Females						
0	10/10	68.9 ± 2.8	183.3 ± 3.1	$+114.4 \pm 3.0$		10.9
3,000	10/10	63.7 ± 1.9	178.6 ± 2.5	$+114.9 \pm 2.4$	+ 0.4	10.8
6,000	10/10	67.1 ± 3.0	184.7 ± 3.6	$+117.6 \pm 2.9$	+ 2.8	10.5
12,500	10/10	64.1 ± 1.9	182.9 ± 3.4	$+118.8 \pm 4.1$	+ 3.8	11.0
25,000	10/10	66.3 ± 2.8	184.8 ± 4.3	$+118.5 \pm 2.7$	+ 3.6	10.9
50,000	10/10	62.1 ± 2.5	173.6 ± 3.3	$+111.5 \pm 3.8$	- 2.5	10.4

(a) Number surviving/number initially in the group.

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

(c) Weight change of the dosed group relative to that of the controls

Weight Change (Dosed Group) - Weight Change (Control Group)

Weight Change (Control Group)

100

CHRONIC STUDY

Body Weights and Clinical Signs

Mean body weights of dosed and control male rats were comparable throughout the study; those for dosed female rats were slightly lower than control values during most of the study period (Figure 1 and Table 4). The average daily feed consumption for low- and high-dose rats compared with controls was 108% (16.6/15.4) and 102% (15.7/15.4) that of controls for males, and 99% (11.3/11.4) and 96% (10.9/11.4) for females (Appendix 1, Table 11).



Figure 1. Growth Curves for Rats Fed Diets Containing D-Mannitol

Week	Cumulative Mean Body Weight Change (grams)			Weight Change Relative to Controls (a) (Percent)	
	Control	Low Dose	High Dose	Low Dose	High Dose
Males			- <u></u>		
0	106 <i>(b)</i>	105 <i>(b)</i>	103 <i>(b)</i>		
4	84	85	84	+ 1	0
26	256	255	247	0	- 4
48	318	319	308	0	- 3
68	335	336	332	0	- 1
89	329	336	336	+ 2	+ 2
104	302	311	309	+ 3	+ 2
Females					
0	91 <i>(b)</i>	90 (b)	92 (b)		
4	42	38	38	-10	-10
26	114	104	103	- 9	-10
48	145	134	131	- 8	-10
68	182	174	163	- 4	-10
89	215	201	200	- 7	- 7
104	220	214	208	- 3	- 5

TABLE 4. CUMULATIVE MEAN BODY WEIGHT CHANGE (RELATIVE TO CONTROLS) OF RATSFED DIETS CONTAINING D-MANNITOL IN THE CHRONIC STUDY

(a) Weight change of the dosed group relative to that of the controls =Weight Change (Dosed Group) - Weight Change (Control Group)

Weight Change (Control Group)

× 100

(b) Initial Weight

Survival

Estimates of the probabilities of survival for male and female rats fed diets containing Dmannitol at the concentrations used in this bioassay, and those for the control groups, are shown by the Kaplan and Meier curves in Figure 2. The incidence of surviving high-dose female rats was significantly greater (P=0.018) than that of lowdose females. No other significant differences in survival were observed. In male rats, 32/50 (64%) of the controls, 36/50 (72%) of the low-dose group, and 32/50 (64%) of the high-dose group lived to the end of the study at 104-106 weeks. In female rats, 36/50 (72%) of the controls, 32/50 (64%) of the low-dose group, and 42/50 (84%) of the high-dose group lived to the end of the study. These incidences include as survivors three control males, one high-dose male, and two low-dose females that died during the termination of the study; for statistical purposes, these animals were considered as killed during this period.



Figure 2. Survival Curves for Rats Fed Diets Containing D-Mannitol

Pathology and Statistical Analyses of Results

Histopathologic findings on neoplasms in rats are summarized in Appendix A, Tables A1 and A2; Tables A3 and A4 give the survival and tumor status for each individual animal in the male and female rat studies, respectively. Findings on noneoplastic 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.

Eye: Retinopathy and cataracts occurred at increased incidences in high-dose male rats and

dosed female rats (retinopathy: males—17/50, 6/50, 42/50; females—10/50, 43/50, 33/50; cataracts: males—15/50, 6/50, 40/50; females—9/50, 40/50, 32/50). This increase appears to be associated with the distance of the animals from sources of fluorescent light; yet a contributing effect of D-mannitol cannot be discounted completely.

Stomach: Dilatation of the gastric fundal gland was observed at increased incidences in dosed females (control, 6/50, 12%; low-dose, 23/50, 46%; high-dose, 23/50, 46%).

No statistically significant incidences of tumors were observed at any site in rats of either sex.

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

	Control	Low Dose	High Dose
Subcutaneous Tissue: Fibroma			
Tumor Rates			
Overall (b)	2/50 (4%)	3/50 (6%)	5/50 (10%)
Adjusted (c)	6.3%	8.3%	14.5%
Terminal (d)	2/32 (6%)	3/36 (8%)	4/32 (13%)
Statistical Tests (e)	_/ _ (- / 0/) (- ,0)	·/····································
Life Table	P=0.154	P=0.554	P=0.218
Incidental Tumor Test	P=0.148	P=0.554	P=0.208
Cochran-Armitage Trend,			
Fisher Exact Tests	P=0.159	P=0.500	P=0.218
Lung: Alveolar/Bronchiolar Adenoma Tumor Rates	or Carcinoma		
Overall (b)	0/50 (0%)	3/50 (6%)	2/50 (4%)
Adjusted (c)	0.0%	8.3%	6.3%
Terminal (d)	0/32 (0%)	3/36 (8%)	2/32 (6%)
Statistical Tests (e)	0/52 (070)	5/55 (570)	2,02 (070)
Life Table	P=0.196	P=0.142	P=0.238
Incidental Tumor Test	P=0.196	P=0.142	P=0.238
Cochran-Armitage Trend,	1-0.170	1 0:142	1-0.250
Fisher Exact Tests	P=0.203	P=0.121	P=0.247
Hematopoietic System: Undifferentiate	ed Leukemia		
Tumor Rates			
Overall (b)	13/50 (26%)	14/50 (28%)	11/50 (22%
Adjusted (c)	30.9%	33.3%	27.2%
Terminal (d)	5/32 (16%)	9/36 (25%)	4/32 (13%)
Statistical Tests (e)	0,02 (10,0)		., •= (•• /0)
Life Table	P=0.391N	P=0.549	P=0.428N
Incidental Tumor Test	P=0.420N	P=0.383	P=0.499N
Cochran-Armitage Trend,			
Fisher Exact Tests	P=0.365N	P=0.500	P=0.408N
Hematopoietic System: Leukemia			
Tumor Rates			
Overall (b)	14/50 (28%)	14/50 (28%)	11/50 (22%
Adjusted (c)	33.4%	33.3%	27.2%
Terminal (d)	6/32 (19%)	9/36 (25%)	4/32 (13%)
Statistical Tests (e)			
Life Table	P=0.314N	P=0.527N	P=0.350N
Incidental Tumor Test	P=0.331N	P=0.480	P=0.402N
Cochran-Armitage Trend,			
Fisher Exact Tests	P=0.285N	P=0.588	P=0.322N
Hematopoietic System: Lymphoma or	Leukemia		
Tumor Rates		14/50 (00~)	11 100 1000
Overall (b)	16/50 (32%)	14/50 (28%)	11/50 (22%
Adjusted (c)	37.3%	33.3%	27.2%
Terminal (d)	7/32 (22%)	9/36 (25%)	4/32 (13%)
Statistical Tests (e)	D-0 100N	D-0 2/9N	D-0 33051
Life Table	P=0.190N	P=0.368N	P=0.220N
Incidental Tumor Test	P=0.191N	P=0.576	P=0.240N
Cochran-Armitage Trend,	D-0 15731	D-0 414N	D_0 1043
Fisher Exact Tests	P=0.157N	P=0.414N	P=0.184N

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

	Control	Low Dose	High Dose
Pituitary: Adenoma		t for a first destruction and a standard second	
Tumor Rates			
Overall (b)	9/46 (20%)	10/50 (20%)	8/50 (16%)
Adjusted (c)	25.5%	24.0%	21.5%
Terminal (d)	6/30 (20%)	6/36 (17%)	4/32 (13%
Statistical Tests (e)	,		,
Life Table	P=0.428N	P=0.592	P=0.473N
Incidental Tumor Test	P=0.394N	P=0.550N	P=0.478N
Cochran-Armitage Trend,			
Fisher Exact Tests	P=0.372N	P=0.581	P=0.424N
Adrenal: Pheochromocytoma			
Tumor Rates			
Overall (b)	14/50 (28%)	10/50 (20%)	9/ 50 (18%
Adjusted (c)	36.8%	27.8%	25.6%
Terminal (d)	9/32 (28%)	10/36 (28%)	7/32 (22%
Statistical Tests (e)			
Life Table	P=0.142N	P=0.176N	P=0.186N
Incidental Tumor Test	P=0.157N	P=0.255N	P=0.202N
Cochran-Armitage Trend,			
Fisher Exact Tests	P=0.140N	P=0.241N	P=0.171N
Thyroid: C-Cell Adenoma			
Tumor Rates			
Overall (b)	8/49 (16%)	4/50 (8%)	5/50 (10%
Adjusted (c)	23.0%	10.4%	15.6%
Terminal (d)	6/32 (19%)	3/36 (8%)	5/32 (16%
Statistical Tests (e)			
Life Table	P=0.217N	P=0.146N	P=0.279N
Incidental Tumor Test	P=0.219N	P=0.202N	P=0.274N
Cochran-Armitage Trend,			
Fisher Exact Tests	P=0.205N	P=0.168N	P=0.264N
Thyroid: C-Cell Adenoma or Carcinoma			
Tumor Rates			
Overall (b)	10/49 (20%)	5/50 (10%)	6/50 (12%)
Adjusted (c)	28.2%	12.5%	18.8%
Terminal (d)	7/32 (22%)	3/36 (8%)	6/32 (19%
Statistical Tests (e)			
Life Table	P=0.159N	P=0.107N	P=0.210N
Incidental Tumor Test	P=0.164N	P=0.170N	P=0.204N
Cochran-Armitage Trend,			
Fisher Exact Tests	P=0.148N	P=0.122N	P=0.194N
Pancreatic Islets: Islet-Cell Adenoma			
Tumor Rates	2 (50 (60))	2 (50 (601)	A (ED (001)
Overall (b)	3/50 (6%)	3/50 (6%)	4/50 (8%)
Adjusted (c)	8.5% 2/32 (6%)	8.3%	11.3%
Terminal (d) Statistical Texts (a)	2/32 (6%)	3/36 (8%)	3/32 (9%)
Statistical Tests <i>(e)</i> Life Table	D-0 /19	D-0 420N	D-0 404
	P=0.418	P=0.620N	P=0.496
Incidental Tumor Test	P=0.405	P=0.633	P=0.479
Cochran-Armitage Trend, Eisher Exact Tests	D-0 421	D-0 661	D-0 500
Fisher Exact Tests	P=0.421	P=0.661	P=0.500

	Control	Low Dose	High Dose
Testis: Interstitial-Cell Tumor			
Tumor Rates			
Overall (b)	45/50 (90%)	44/50 (88%)	45/50 (90%)
Adjusted (c)	95.7%	97.8%	100.0%
Terminal (d)	30/32 (94%)	35/36 (97%)	32/32 (100%)
Statistical Tests (e)	, , , , , , , , , , , , , , , , , , , ,	, , , , , , , , , , , , , , , , , , , ,	
Life Table	P=0.522	P=0.252N	P=0.558
Incidental Tumor Test	P=0.397	P=0.642N	P=0.545
Cochran-Armitage Trend,			
Fisher Exact Tests	P=0.564	P=0.500N	P=0.630
Zymbal's Gland: Squamous Cell Carc	inoma		
Tumor Rates			
Overall (b)	3/50 (6%)	2/50 (4%)	0/50 (0%)
Adjusted (c)	8.1%	4.9%	0.0%
Terminal (d)	1/32 (3%)	1/36 (3%)	0/32 (0%)
Statistical Tests (e)			
Life Table	P=0.085N	P=0.485N	P=0.126N
Incidental Tumor Test	P=0.104N	P=0.653N	P=0.133N
Cochran-Armitage Trend,			
Fisher Exact Tests	P=0.083N	P=0.500N	P=0.121N

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

(a) Dosed groups received doses of 25,000 or 50,000 ppm of D-mannitol in the diet.

(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 the dosed group incidence are the P-values corresponding to pairwise comparisons 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 nonfatal. The Cochran-Armitage and Fisher's exact tests compare directly the overall incidence rates. A negative trend is indicated by (N).
	Control	Low Dose	High Dose
Hematopoietic System: Undifferentiate	ed Leukemia		
Tumor Rates			
Overall (b)	10/50 (20%)	8/50 (16%)	4/50 (8%)
Adjusted (c)	25.1%	18.6%	8.9 %
Terminal (d)	7/36 (19%)	2/32 (6%)	2/42 (5%)
Statistical Tests (e)			
Life Table	P=0.051N	P=0.499N	P=0.052N
Incidental Tumor Test	P=0.097N	P=0.353N	P=0.109N
Cochran-Armitage Trend,			
Fisher Exact Tests	P=0.061N	P=0.398N	P=0.074N
Hematopoietic System: Leukemia			
Tumor Rates			
Overall (b)	10/50 (20%)	8/50 (16%)	5/50 (10%)
Adjusted (c)	25.1%	18.6%	11.2%
Terminal (d)	7/36 (19%)	2/32 (6%)	3/42 (7%)
Statistical Tests (e)		2,52 (676)	5/12 (1)()
Life Table	P=0.087N	P=0.499N	P=0.092N
Incidental Tumor Test	P=0.160N	P=0.353N	P=0.176N
Cochran-Armitage Trend,	1-0.100N	F=0.3331N	F-0.1/01
Fisher Exact Tests	P=0.107N	P=0.398N	P=0.131N
Pituitary: Adenoma Tumor Rates			
	24/50 (4907)	15/47 (220)	10/40 (400
Overall (b)	24/50 (48%)	15/47 (32%)	19/48 (40%
Adjusted (c)	53.7%	41.8%	41.7%
Terminal (d)	16/36 (44%)	11/31 (35%)	14/40 (35%
Statistical Tests (e)			
Life Table	P=0.127N	P=0.162N	P=0.149N
Incidental Tumor Test	P=0.259N	P=0.082N	P=0.334N
Cochran-Armitage Trend,			
Fisher Exact Tests	P=0.224N	P=0.079N	P=0.263N
Pituitary: Adenoma or Carcinoma			
Tumor Rates			
Overall (b)	25/50 (50%)	17/47 (36%)	19/48 (40%
Adjusted (c)	56.0%	44.2%	41.7%
Terminal (d)	17/36 (47%)	11/31 (35%)	14/40 (35%
Statistical Tests (e)	,		
Life Table	P=0.097N	P=0.227N	P=0.110N
Incidental Tumor Test	P=0.201N	P=0.096N	P=0.260N
Cochran-Armitage Trend,	1 0.20114	1 0.07014	1-0.2001
Fisher Exact Tests	P=0.171N	P=0.121N	P=0.202N
Advanale Phasabromoautoma			
Adrenal: Pheochromocytoma Tumor Rates			
Overall (b)	2/49 (4%)	3 (50 (60%)	1/50 (20%)
	, , , ,,	3/50 (6%)	1/50 (2%)
Adjusted (c)	5.7%	8.9%	2.4%
Terminal (d)	2/35 (6%)	2/32 (6%)	1/42 (2%)
Statistical Tests (e)	D 0 0001	D 0 454	D 0 1000
Life Table	P=0.339N	P=0.454	P=0.437N
Incidental Tumor Test	P=0.391N	P=0.448	P=0.437N
Cochran-Armitage Trend,			-
Fisher Exact Tests	P=0.392N	P=0.510	P=0.492N

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

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TABLE 6. ANALYSIS OF PRIMARY TUMORS IN FEMALE RATS (a) (Continued)	TABLE 6.	ANALYSIS OF	PRIMARY TUMORS I	N FEMALE RATS (a) (Continued)
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	Control	Low Dose	High Dose
Adrenal: Cortical Adenoma			
Tumor Rates			
Overall (b)	1/49 (2%)	4/50 (8%)	2/50 (4%)
Adjusted (c)	2.9%	12.5%	4.8%
Terminal (d)	1/35 (3%)	4/32 (13%)	2/42 (5%)
Statistical Tests (e)	,		
Life Table	P=0.491	P=0.152	P=0.563
Incidental Tumor Test	P=0.491	P=0.152	P=0.563
Cochran-Armitage Trend,			
Fisher Exact Tests	P=0.415	P=0.187	P=0.508
Thyroid: C-Cell Adenoma			
Tumor Rates			
Overall (b)	6/50 (12%)	6/50 (12%)	3/50 (6%)
Adjusted (c)	15.4%	17.3%	7.1%
Terminal (d)	4/36 (11%)	4/32 (13%)	3/42 (7%)
Statistical Tests (e)	₩/ JU (11%)	-1 52 (1570)	5/74(170)
Life Table	D-0 162N	P=0.529	D-0 194N
Incidental Tumor Test	P=0.152N	P=0.529 P=0.510	P=0.184N
	P=0.251N	F-0.510	P=0.275N
Cochran-Armitage Trend, Fisher Exact Tests	D-0.202N	P=0.620	D-0 242N
Fisher Exact Tests	P=0.203N	P=0.620	P=0.243N
Thyroid: C-Cell Adenoma or Carcinom	a		
Tumor Rates			
Overall (b)	6/50 (12%)	8/50 (16%)	4/50 (8%)
Adjusted (c)	15.4%	23.2%	9.5%
Terminal (d)	4/36 (11%)	6/32 (19%)	4/42 (10%)
Statistical Tests (e)			
Life Table	P=0.240N	P=0.298	P=0.289N
Incidental Tumor Test	P=0.359N	P=0.277	P=0.399N
Cochran-Armitage Trend,			
Fisher Exact Tests	P=0.323N	P=0.387	P=0.370N
Mammary Gland: Adenocarcinoma			
Tumor Rates			
Overall (b)	3/50 (6%)	3/50 (6%)	0/50 (0%)
Adjusted (c)	7.7%	9.1%	0.0%
Terminal (d)	2/36 (6%)	2/32 (6%)	0/42 (0%)
Statistical Tests (e)			.,
Life Table	P=0.085N	P=0.606	P=0.104N
Incidental Tumor Test	P=0.133N	P=0.590	P=0.151N
Cochran-Armitage Trend,			
Fisher Exact Tests	P=0.102N	P=0.661	P=0.121N
Mammary Gland: Fibroadenoma			
Tumor Rates			
Overall (b)	10/50 (20%)	14/50 (28%)	7/50 (14%)
Adjusted (c)	24.1%	38.0%	16.7%
Terminal (d)	6/36 (17%)	10/32 (31%)	7/42 (17%)
Statistical Tests (e)	0,00 (170)	(0) 52 (5170)	(174 (1770)
Life Table	P=0.184N	P=0.163	P=0.214N
Incidental Tumor Test	P=0.184N P=0.316N	P=0.163 P=0.160	P=0.214N P=0.363N
	r-0.3101N	r-0.100	r~0.3031N
Cochran-Armitage Trend, Fisher Exact Tests	P=0.269N	P=0.241	P=0.298N

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

	Control	Low Dose	High Dose
Uterus: Endometrial Stromal Polyp			
Tumor Rates			
Overall (b)	10/50 (20%)	5/50 (10%)	11/50 (22%)
Adjusted (c)	25.0%	14.9%	25.4%
Terminal (d)	7/36 (19%)	4/32 (13%)	10/42 (24%)
Statistical Tests (e)		, , , , , ,	
Life Table	P=0.529N	P=0.204N	P=0.559N
Incidental Tumor Test	P=0.462	P=0.206N	P=0.522
Cochran-Armitage Trend,			
Fisher Exact Tests	P=0.448	P=0.131N	P=0.500
Uterus: Endometrial Stromal Polyp o	r Sarcoma		
Tumor Rates			
Overall (b)	10/50 (20%)	7/50 (14%)	11/50 (22%)
Adjusted (c)	25.0%	19.0%	25.4%
Terminal (d)	7/36 (19%)	4/32 (13%)	10/42 (24%)
Statistical Tests (e)			
Life Table	P=0.528N	P=0.409N	P=0.559N
Incidental Tumor Test	P=0.444	P=0.358N	P=0.522
Cochran-Armitage Trend,			
Fisher Exact Tests	P=0.449	P=0.298N	P=0.500

(a) Dosed groups received doses of 25,000 or 50,000 ppm of p-mannitol in the diet.

(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 the dosed group incidence are the P-values corresponding to pairwise comparisons 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 nonfatal. The Cochran-Armitage and Fisher's exact tests compare directly the overall incidence rates. A negative trend is indicated by (N).

PRECHRONIC STUDIES

Single-Dose Study

All animals survived to the end of the 16-day observation period. No compound-related effects were observed. Based on the results of this study, levels of 6,000, 12,500, 25,000, 50,000, and 100,000 ppm were chosen for the 14-day study. The 100,000-ppm dose level was selected so that the effects of doses above and below 50,000 ppm could be examined.

Fourteen-Day Study

All animals survived to the end of the dosing period (Table 7). All groups of mice had similar increases in body weight. No compound-related effects were observed. The dose levels selected for the 13-week study were 0, 3,000, 6,000, 12,500, 25,000, and 50,000 ppm D-mannitol in the diet.

TABLE 7. DOSAGE, SURVIVAL,	AND MEAN BODY WEIGHTS OF MICE FED DIETS CONTAINING
D-MANNITOL FOR 14	DAYS

			Mean Body V	Weights (grams)
Dose (ppm)	Survival (a)	Initial	Final	Change
Males				
6,000	5/5	20	25	+5
12,500	5/5	20	25	+5
25,000	5/5	19	24	+5
50,000	5/5	21	25	+4
100,000	5/5	20	25	+5
Females				
6,000	5/5	16	18	+2
12,500	5/5	17	20	+3
25,000	5/5	16	19	+3
50,000	5/5	16	19	+3
100,000	5/5	15	19	+4

(a) Number surviving/number initially in the group.

Thirteen-Week Study

All mice survived. Feed consumption for dosed and control mice was approximately the same. Increases in mean body weight were higher in dosed mice of each sex than in controls, except for male mice receiving 50,000 ppm D-manitol in the diet. These mice had 0.8% depression in body weight gain relative to controls (Table 8). No compound-related effects were observed at necropsy or during histopathologic examination.

Doses selected for mice in the chronic study were 25,000 and 50,000 ppm D-mannitol in feed, the latter being the maximum concentration recommended for chronic feeding studies (NCI, 1976).

TABLE 8. DOSAGE, SURVIVAL, AND MEAN BODY WEIGHTS OF MICE FED DIETS CONTAINING D-MANNITOL FOR 13 WEEKS

		Mean	Mean Body Weight (grams)			Average Daily Feed
Dose (ppm) Survival (a)	Initial	Final	Change (b)	Controls <i>(c)</i> (Percent)	Consumption (grams)	
Males				·····		<u></u>
0	10/10	19.3 ± 0.6	$+31.5 \pm 0.6$	$+12.2 \pm 0.5$		10.8
3,000	10/10	19.5 ± 0.7	$+31.9 \pm 0.7$	$+12.4 \pm 0.5$	+ 1.6	10.7
6,000	10/10	19.1 ± 0.4	$+31.6 \pm 0.3$	$+12.5 \pm 0.5$	+ 2.5	10.8
12,500	10/10	18.7 ± 0.6	$+31.6 \pm 0.8$	$+12.9 \pm 0.7$	+ 5.7	10.4
25,000	10/10	19.3 ± 0.4	$+32.3 \pm 0.7$	$+13.0 \pm 0.6$	+ 6.6	10.6
50,000	10/10	19.0 ± 0.5	$+31.1\pm0.8$	$+12.1 \pm 0.5$	- 0.8	10.5
Females						
0	10/10	15.9 ± 0.4	$+23.7 \pm 0.5$	$+ 7.8 \pm 0.1$		10.2
3,000	10/10	15.9 ± 0.4	$+24.6 \pm 0.3$	$+ 8.7 \pm 0.4$	+11.5	10.2
6,000	10/10	15.8 ± 0.4	$+24.5 \pm 0.5$	$+ 8.7 \pm 0.5$	+11.5	10.0
12,500	10/10	16.0 ± 0.3	$+24.9 \pm 0.5$	$+ 8.9 \pm 0.4$	+14.1	9.5
25,000	10/10	17.5 ± 0.5	$+25.6 \pm 0.4$	$+ 8.1 \pm 0.5$	+ 3.8	10.3
50,000	10/10	16.1 ± 0.3	$+24.7 \pm 0.5$	$+ 8.6 \pm 0.5$	+10.3	10.1

(a) Number surviving/number initially in the group.

(b) Mean weight change of the group ±standard error of the mean.

(c) Weight change of the dosed group relative to that of the controls =

Weight Change (Dosed Group) - Weight Change (Control Group)

Weight Change (Control Group)

× 100

CHRONIC STUDY

Body Weights and Clinical Signs

Mean body weights of dosed and control mice of each sex were similar (Figure 3 and Table 9). The average daily feed consumption by individual low- and high-dose mice was 100% (8.1/8.1) and 99% (8.0/8.1) that of controls for males and 95% (7.9/8.3) and 98% (8.1/8.3) for females (Appendix I, Table 12). No compound-related clinical signs were observed.



Figure 3. Growth Curves for Mice Fed Diets Containing D-Mannitol

	Cumulative Mean Body Weight Change (grams)			Weight Change Relative Controls (a) (Percent)	
Week	Control	Low Dose	High Dose	Low Dose	High Dose
Males					
0	19 <i>(b)</i>	19 <i>(b)</i>	19 <i>(b)</i>		
5	8	8	8	0	0
27	16	16	18	0	+13
48	19	19	19	0	0
69	23	23	25	0	+ 9
87	21	22	22	+ 5	+ 5
104	19	21	23	+11	+21
emales					
0	17 <i>(b)</i>	16 <i>(b)</i>	16 <i>(b)</i>		
5	5	5	5	0	0
27	11	11	11	0	0
48	12	13	13	+ 8	+ 8
69	16	17	16	+ 6	0
87	18	18	19	0	+ 6
104	18	19	19	+ 6	+ 6

TABLE 9. CUMULATIVE MEAN BODY WEIGHT CHANGE (RELATIVE TO CONTROLS) OF MICEFED DIETS CONTAINING D-MANNITOL IN THE CHRONIC STUDY

(a) Weight change of the dosed group relative to that of the controls =
 Weight Change (Dosed Group) - Weight Change (Control Group)

Weight Change (Control Group)

<u>× 100</u>

(b) Initial Weight

Survival

Estimates of the probabilities of survival of male and female mice fed diets containing Dmannitol at the concentrations used in this bioassay and those of the control groups are shown by the Kaplan and Meier curves in Figure 4. No significant differences in survival were observed between any groups of males or females.

In male mice, 39/50 (78%) of the controls, 43/50 (86%) of the low-dose group, and 41/50

(82%) of the high-dose group lived to the termination period of the study at 104-106 weeks. In female mice, 37/50 (74%) of the controls, 38/50(76%) of the low-dose group, and 34/50 (68%) of the high-dose group lived to the termination period of the study at 104-106 weeks. These incidences include as survivors one male and two female control mice that died during the terminal kill period. For statistical purposes, these three animals are considered to have been killed during this period.



Figure 4. Survival Curves for Mice Fed Diets Containing D-Mannitol

Pathology and Statistical Analyses of Results

Histopathologic findings on neoplasms occurring in mice are summarized in Appendix B, Tables B1 and B2; Tables B3 and B4 give the survival and tumor status for each individual animal in the male and female mouse studies, respectively. Findings on nonneoplastic lesions are summarized in Appendix D, Tables D1 and D2. Tables 10 and 11 contain the statistical analyses of those primary tumors that occurred with an incidence of at least 5% in one of the three groups.

Hematopoietic System: Lymphocytic leukemia occurred in female mice in a statistically significant (P \leq 0.05) positive trend (0/48, 2/48, 4/49), but lymphocytic lymphoma was observed in females in a statistically significant (P \leq 0.01) negative trend (9/48, 3/48, 1/49). The combined incidences of lymphoma and leukemia did not differ significantly between dosed and control female mice (14/48, 13/48, 7/49). Tests of the incidence of hematopoietic tumors in male mice were not statistically significant.

Subcutaneous Tissues: Sarcomas occurred in male mice in a statistically significant (P < 0.05) negative trend, but tests between the dosed and the control groups were not statistically significant (4/50, 1/50, 0/49).

Mammary Gland: Malignant tumors in female mice occurred in a statistically significant (P<0.05) negative trend, but no tests between the dosed groups and the controls were statistically significant (3/48, 0/48, 0/49).

Kidney: Nephrosis was observed in increased incidences in dosed mice of each sex: control males, 15/50 (30%); low-dose males, 29/50 (58%); high-dose males, 30/47 (64%); control females, 1/48 (2%); low-dose females, 3/48 (6%); high-dose females, 14/49 (29%). The lesion was mild in most mice and was characterized primarily by focal vacuolization of the renal tubular epithelium.

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

	Control	Low Dose	High Dose
Subcutaneous Tissue: Fibrosarcoma			144 MB
Tumor Rates			
Overall (b)	3/50 (6%)	0/50 (0%)	0/49 (0%)
Adjusted (c)	6.8%	0.0%	0.0%
Terminal (d)	0/39 (0%)	0/43 (0%)	0/41 (0%)
Statistical Tests (e)			,
Life Table	P=0.035N	P=0.115N	P=0.116N
Incidental Tumor Test	P=0.052N	P=0.189N	P=0.141N
Cochran-Armitage Trend,			
Fisher Exact Tests	P=0.038N	P=0.121N	P=0.125N
Subcutaneous Tissue: All Sarcomas			
Tumor Rates			
Overall (b)	4/50 (8%)	1/50 (2%)	0/49 (0%)
Adjusted (c)	8.9%	2.3%	0.0%
Terminal (d)	0/39 (0%)	1/43 (2%)	0/41 (0%)
Statistical Tests (e)			
Life Table	P=0.024N	P=0.167N	P=0.062N
Incidental Tumor Test	P=0.028N	P=0.207N	P=0.056N
Cochran-Armitage Trend,			
Fisher Exact Tests	P=0.027N	P=0.181N	P=0.061N
Lung: Alveolar/Bronchiolar Adenoma			
Tumor Rates			
Overall (b)	6/50 (12%)	7/50 (14%)	7/49 (14%
Adjusted (c)	15.4%	16.3%	16.1%
Terminal (d)	6/39 (15%)	7/43 (16%)	5/41 (12%
Statistical Tests (e)			-, (, (
Life Table	P=0.483	P=0.576	P=0.543
Incidental Tumor Test	P=0.454	P=0.576	P=0.506
Cochran-Armitage Trend,	1 0.101	1 0.070	
Fisher Exact Tests	P=0.426	P=0.500	P=0.484
Lung: Alveolar/Bronchiolar Carcinoma			
Tumor Rates			
Overall (b)	3/50 (6%)	6/50 (12%)	4/49 (8%)
Adjusted (c)	7.1%	13.5%	9.8%
Terminal (d)	2/39 (5%)	5/43 (12%)	4/41 (10%
Statistical Tests (e)	, , , , , , ,	, , , , , , , , , , , , , , , , , , , ,	
Life Table	P=0.459	P=0.292	P=0.525
Incidental Tumor Test	P=0.431	P=0.247	P=0.492
Cochran-Armitage Trend,			
Fisher Exact Tests	P=0.418	P=0.243	P=0.489
Lung: Alveolar/Bronchiolar Adenoma o	or Carcinoma		
Tumor Rates			
Overall (b)	9/50 (18%)	12/50 (24%)	11/49 (229
Adjusted (c)	22.2%	27.1%	25.4%
Terminal (d)	8/39 (21%)	11/43 (26%)	9/41 (22%
Statistical Tests (e)			
Life Table	P=0.409	P=0.403	P=0.455
Incidental Tumor Test	P=0.368	P=0.367	P=0.402
Cochran-Armitage Trend,			
Fisher Exact Tests	P=0.338	P=0.312	P=0.382

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

	Control	Low Dose	High Dose
Hematopoietic System: Malignant Lymp	ohoma, Lymphocytic Type	· · · · · · · · · · · · · · · · · · ·	
Tumor Rates			
Overall (b)	3/50 (6%)	2/50 (4%)	2/49 (4%)
Adjusted (c)	7.5%	4.7%	4.7%
Terminal (d)	2/39 (5%)	2/43 (5%)	1/41 (2%)
Statistical Tests (e)		-/ -/ -/ -/ -/ -/ -/ -/ -/ -/ -/ -/ -/ -	-/ (-/0)
Life Table	P=0.387N	P=0.458N	P=0.480N
Incidental Tumor Test	P=0.426N	P=0.543N	P=0.527N
Cochran-Armitage Trend,			
Fisher Exact Tests	P=0.415N	P=0.500N	P=0.510N
Hematopoietic System: All Malignant L	vmphoma		
Tumor Rates	,		
Overall (b)	7/50 (14%)	4/50 (8%)	5/49 (10%
Adjusted (c)	16.8%	9.3%	10.8%
Terminal (d)	5/39 (13%)	4/43 (9%)	1/41 (2%)
Statistical Tests (e)	5,57 (1570)	4/ 45 (570)	1/41 (270)
Life Table	P=0.289N	P=0.217N	P=0.352N
Incidental Tumor Test	P=0.368N	P=0.313N	P=0.449N
Cochran-Armitage Trend,	1-0.50011	1-0.51514	1-0.44714
Fisher Exact Tests	P=0.326N	P=0.262N	P=0.394N
Fisher Exact rests	F-0.320N	F-0.2021	F-0.394IN
Hematopoietic System: Lymphoma or L	eukemia		
Tumor Rates			
Overall (b)	8/50 (16%)	4/50 (8%)	5/49 (10%
Adjusted (c)	18.7%	9.3%	10.9%
Terminal (d)	5/39 (13%)	4/43 (9%)	1/41 (2%)
Statistical Tests (e)			
Life Table	P=0.198N	P=0.147N	P=0.257N
Incidental Tumor Test	P=0.268N	P=0.257N	P=0.343N
Cochran-Armitage Trend,			
Fisher Exact Tests	P=0.226N	P=0.178N	P=0.290N
Circulatory System: Hemangiosarcoma			
Tumor Rates			
Overall (b)	1/50 (2%)	4/50 (8%)	1/49 (2%)
Adjusted (c)	2.6%	8.6%	2.4%
Terminal (d)	1/39 (3%)	2/43 (5%)	1/41 (2%)
Statistical Tests (e)			
Life Table	P=0.579N	P=0.209	P=0.751N
Incidental Tumor Test	P=0.580	P=0.159	P=0.751N
Cochran-Armitage Trend,			
Fisher Exact Tests	P=0.593	P=0.181	P=0.747
Liver: Adenoma			
Tumor Rates			
Overall (b)	3/50 (6%)	6/50 (12%)	4/49 (8%)
Adjusted (c)	7.7%	13.4%	9.5%
Terminal (d)	3/39 (8%)	5/43 (12%)	3/41 (7%)
Statistical Tests (e)		····	
Life Table	P=0.459	P=0.292	P=0.527
Incidental Tumor Test	P=0.420	P=0.228	P=0.506
Cochran-Armitage Trend.			

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TABLE 10. ANALYSIS	OF PRIMARY	TUMORS IN MALE	MICE (a) (Continued)
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	Control	Low Dose	High Dose
Liver: Carcinoma			
Tumor Rates			
Overall (b)	11/50 (22%)	8/50 (16%)	7/49 (14%)
Adjusted (c)	26.7%	17.8%	16.4%
Terminal (d)	9/39 (23%)	6/43 (14%)	6/41 (15%)
Statistical Tests (e)			
Life Table	P=0.151N	P=0.240N	P=0.189N
Incidental Tumor Test	P=0.192N	P=0.393N	P=0.223N
Cochran-Armitage Trend,			
Fisher Exact Tests	P=0.190N	P=0.306N	P=0.232N
Liver: Adenoma or Carcinoma			
Tumor Rates			
Overall (b)	14/50 (28%)	14/50 (28%)	11/49 (22%)
Adjusted (c)	34.0%	30.3%	25.3%
Terminal (d)	12/39 (31%)	11/43 (26%)	9/41 (22%)
Statistical Tests (e)			
Life Table	P=0.240N	P=0.476N	P=0.277N
Incidental Tumor Test	P=0.305N	P=0.492	P=0.323N
Cochran-Armitage Trend,			
Fisher Exact Tests	P=0.305N	P=0.588	P=0.343N

(a) Dosed groups received doses of 25,000 or 50,000 ppm of D-mannitol in the diet.

(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 the dosed group incidence are the P-values corresponding to pairwise comparisons 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 nonfatal. The Cochran-Armitage and Fisher's exact tests compare directly the overall incidence rates. A negative trend is indicated by (N).

	Control	Low Dose	High Dose
Lung: Alveolar/Bronchiolar Adenomi	a or Carcinoma		
Tumor Rates			
Overall (b)	3/48 (6%)	2/48 (4%)	1/49 (2%)
Adjusted (c)	8.1%	5.3%	2.9%
Terminal (d)	3/37 (8%)	2/38 (5%)	0/34 (0%)
Statistical Tests (e)			
Life Table	P=0.246N	P=0.488N	P=0.337N
Incidental Tumor Test	P=0.261N	P=0.488N	P=0.355N
Cochran-Armitage Trend,			
Fisher Exact Tests	P=0.217N	P=0.500N	P=0.301N
Hematopoietic System: Lymphocytic	Leukemia		
Fumor Rates			
Overall (b)	0/48 (0%)	2/48 (4%)	4/49 (8%)
Adjusted (c)	0.0%	4.7%	8.5%
Terminal (d)	0/37 (0%)	0/38 (0%)	0/34 (0%)
Statistical Tests (e)			
Life Table	P=0.035	P=0.235	P=0.063
Incidental Tumor Test	P=0.085	P=0.134	P=0.175
Cochran-Armitage Trend,			
Fisher Exact Tests	P=0.039	P=0.247	P=0.061
Hematopoietic System: Malignant Ly	mphoma, Lymphocytic Type		
Fumor Rates			
Overall (b)	9/48 (19%)	3/48 (6%)	1/49 (2%)
Adjusted (c)	22.8%	7.7%	2.9%
Terminal (d)	7/37 (19%)	2/38 (5%)	1/34 (3%)
Statistical Tests (e)	D 0 00 (1)	D	D 0 01 D 1
Life Table	P=0.006N	P=0.063N	P=0.015N
Incidental Tumor Test	P=0.007N	P=0.085N	P=0.017N
Cochran-Armitage Trend,	D 0 00 (N)	D 0 0 (0)	
Fisher Exact Tests	P=0.004N	P=0.060N	P=0.007N
Hematopoietic System: Malignant Ly. Fumor Rates	mphoma, Histiocytic Type		
Overall (b)	2/48 (4%)	5/48 (10%)	1/49 (2%)
Adjusted (c)	5.0%	11.7%	2.5%
Terminal (d)	1/37 (3%)	2/38 (5%)	0/34 (0%)
Statistical Tests (e)	-/ (-/0)	-, (-,0)	0,0,000
Life Table	P=0.455N	P=0.227	P=0.532N
Incidental Tumor Test	P=0.360N	P=0.303	P=0.577N
Cochran-Armitage Trend,			
Fisher Exact Tests	P=0.403N	P=0.218	P=0.492N
Hematopoietic System: Malignant Ly	nnhoma. Mixed Type		
fumor Rates			
Overall (b)	3/48 (6%)	2/48 (4%)	1/49 (2%)
Adjusted (c)	7.8%	5.3%	2.9%
Terminal (d)	2/37 (5%)	2/38 (5%)	1/34 (3%)
Statistical Tests (e)		, (.,.,	, , , , , , , , , , , , , , , , , , , ,
Life Table	P=0.248N	P=0.493N	P=0.339N
Incidental Tumor Test	P=0.261N	P=0.532N	P=0.355N
Cochran-Armitage Trend,			
	P=0.217N	P=0.500N	

TABLE 11. ANALYSIS OF PRIMARY TUMORS IN FEMALE MICE (a)

Low High Control Dose Dose Hematopoietic System: Lymphoma, All Malignant Tumor Rates 3/49 (6%) Overall (b) 14/48 (29%) 11/48 (23%) Adjusted (c) 33.9% 25.2% 8.2% 6/38 (16%) 2/34 (6%) Terminal (d) 10/37 (27%) Statistical Tests (e) P=0.321N P=0.009N Life Table P=0.009N P=0.008N P=0.003N P=0.262N Incidental Tumor Test Cochran-Armitage Trend. Fisher Exact Tests P=0.003N P=0.321N P=0.003N Hematopoietic System: Lymphoma or Leukemia Tumor Rates 14/48 (29%) 13/48 (27%) 7/49 (14%) Overall (b) Adjusted (c) 33.9% 28.7% 16.0% Terminal (d) 10/37 (27%) 6/38 (16%) 2/34 (6%) Statistical Tests (e) P=0.489N P=0.117N Life Table P=0.108N Incidental Tumor Test P=0.035N P=0.484N P=0.054N Cochran-Armitage Trend, P=0.500N P=0.062N Fisher Exact Tests P=0.054N Circulatory System: Hemangiosarcoma **Tumor** Rates Overall (b) 0/48 (0%) 2/48 (4%) 3/49 (6%) Adjusted (c) 0.0% 5.3% 8.2% 0/37 (0%) Terminal (d) 2/38 (5%) 2/34 (6%) Statistical Tests (e) P=0.244 P=0.108 P=0.069 Life Table P=0.179 P=0.244 Incidental Tumor Test P=0.093 Cochran-Armitage Trend, P=0.086 P=0.247 P=0.125 Fisher Exact Tests Liver: Carcinoma Tumor Rates 1/49 (2%) Overall (b) 3/48 (6%) 2/48 (4%) 8.1% 5.3% 2.9% Adjusted (c) 3/37 (8%) 2/38 (5%) 1/34 (3%) Terminal (d) Statistical Tests (e) P=0.244N P=0.488N P=0.335N Life Table P=0.488N P=0.335N Incidental Tumor Test P=0.244N Cochran-Armitage Trend, P=0.500N P=0.301N P=0.217N **Fisher Exact Tests** Liver: Adenoma or Carcinoma **Tumor Rates** Overall (b) 3/48 (6%) 3/48 (6%) 2/49 (4%) Adjusted (c) 8.1% 7.9% 5.9%

TABLE 11. ANALYSIS OF PRIMARY TUMORS IN FEMALE MICE (a) (Continued)

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Terminal (d)

Life Table

Statistical Tests (e)

Incidental Tumor Test Cochran-Armitage Trend,

Fisher Exact Tests

3/37 (8%)

P=0.450N

P=0.450N

P=0.403N

3/38 (8%)

P=0.652N

P=0.652N

P=0.661

2/34 (6%)

P=0.539N

P=0.539N

P=0.490N

TABLE 11. ANALYSIS OF PRIMARY TUMORS IN FEMALE MICE (a) (Continued)

	Control	Low Dose	High Dose
Mammary Gland: Mixed Tumor, M	alignant	······	<u></u> ., ., ., ., .,
Tumor Rates	9		
Overall (b)	3/48 (6%)	0/48 (0%)	0/49 (0%)
Adjusted (c)	7.9%	0.0%	0.0%
Terminal (d)	2/37 (5%)	0/38 (0%)	0/34 (0%)
Statistical Tests (e)		, , , ,	
Life Table	P=0.041N	P=0.120N	P=0.138N
Incidental Tumor Test	P=0.049N	P=0.147N	P=0.151N
Cochran-Armitage Trend,			
Fisher Exact Tests	P=0.036N	P=0.121N	P=0.117N

(a) Dosed groups received doses of 25,000 or 50,000 ppm of D-mannitol in the diet.

(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 the dosed group incidence are the P-values corresponding to pairwise comparisons 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 nonfatal. The Cochran-Armitage and Fisher's exact tests compare directly the overall incidence rates. A negative trend is indicated by (N).

IV. DISCUSSION AND CONCLUSIONS

The following prechronic studies of D-mannitol were conducted with F344/N rats and B6C3F1/N mice: a single-dose gavage study (300-5,000 mg/kg); a 14-day study (6,000-100,000 ppm in feed); and a 13-week study (3,000-50,000 ppm in feed). A carcinogenesis bioassay was then conducted by feeding diets containing 0, 25,000, or 50,000 ppm D-mannitol to rats and mice for 103 weeks.

All rats administered D-mannitol in the prechronic studies survived to the end of the test periods. The mean body weight gain for males administered 50,000 ppm in feed for 13 weeks was depressed 9.6% relative to that of the controls.

In the chronic study, survival and mean body weights were comparable for male rats fed diets containing 0, 25,000, or 50,000 ppm D-mannitol. Survival of female rats receiving 50,000 ppm was significantly greater (P < 0.05) than that for females receiving 25,000 ppm, and somewhat greater than that for control females at the end of the study. Throughout the study, mean body weights of dosed female rats were slightly lower than the mean body weight of the control group. Feed consumption by control and dosed rats of each sex was similar.

All mice administered D-mannitol in the prechronic studies survived to the end of the test periods. Weight gains and feed consumption of mice fed diets containing 0-50,000 ppm D-mannitol for 13 weeks were similar. In the 2-year chronic study, survival, mean body weight gains, and feed consumption were similar for mice fed diets containing 0, 25,000, or 50,000 ppm Dmannitol.

Although both rats and mice may have been able to tolerate higher doses, 50,000 ppm was selected as the high dose because it is the maximum concentration of a test substance in feed recommended in the guidelines of the Bioassay Program (NCI, 1976).

No statistically significant incidences of neoplastic lesions were observed at any site in rats of either sex.

Dilatation of the gastric fundal gland was observed in increased incidence in female rats fed diets containing 25,000 or 50,000 ppm D-mannitol (control, 6/50, 12%; low-dose, 23/50, 46%; high-dose, 23/50, 46%).

Retinopathy and cataract formation occurred at increased incidences in male rats administered 50,000 ppm and in female rats administered 25,000 or 50,000 ppm in the chronic study. The

incidences of these lesions in rats in this study are probably associated with the distance of the animals from the fluorescent light source. This observation seems consistent with the findings that age-related retinal degeneration in Fischer rats appeared to be exaggerated by light (Lai et al., 1978). In another study, Sprague-Dawley rats exposed continuously to light showed morphological damage to the retina (Reuter and Hobbelen, 1977). Further, different light sources, calibrated to deliver the same irradiances, have been shown to influence the latent period for tumor development and to induce reproductive changes (Chignell et al., in press, 1982). Cataract formation has also been associated with the marked elevation of the plasma concentration of monosaccharides structurally related to D-mannitol (White et al., 1978), but the relationship between cataracts and administration of D-mannitol in this study cannot be established from the data.

In female mice in the chronic study, lymphocytic leukemia occurred with a statistically significant positive trend (P< 0.05), whereas lymphocytic lymphoma occurred with a statistically significant negative trend (P< 0.01). The incidence of dosed female mice with lymphomas or leukemia was not statistically different from controls. The historical incidence in the Bioassay Program of control female B6C3F1/N mice with lymphocytic leukemia is 27/2819 (1%), the highest group incidence being 5/50. The historical incidence of control female mice with either lymphomas or leukemia is 729/2819 (25.9%), with a range of 8.0%-62.0% (Appendix J, Table J1).

Sarcomas in the subcutaneous tissue of male mice and malignant tumors of the mammary gland of female mice in the chronic study occurred with statistically significant (P < 0.05) negative trends, but none of the tests between dosed groups and controls were statistically significant.

Mild nephrosis, characterized by focal vacuolization of the renal tubular epithelium, was observed in increased incidence in dosed male and female mice in the chronic study; this finding was considered to be related to administration of D-mannitol. Dilatation of the renal tubules, with vacuole formation, has been seen in post mortem examinations of humans administered D-mannitol (Schreiner and Maher, 1965). Male Sprague-Dawley rats intravenously infused with D-mannitol had increased vacuolization of the renal proximal convoluted tubules (Maunsbach et al., 1962). This vacuolization was probably caused by osmotic imbalance.

The negative results from the available genotoxicity data on D-mannitol are compatible with the lack of any carcinogenic response from the long-term exposure study. The earliest reference located on the mutagenicity testing of D-mannitol is an FDA-supported study reported in 1974 (FDA, 1974; Green, 1977). Tests included the host-mediated assay in mice using Salmonella *typhimurium* G 46 and TA 1530 and *Saccharomyces cerevisiae* strain D 3, cytogenics in rat bone marrow and in W1-38 human cells, and a dominant lethal assay in rats. The NTP obtained reproducible (in three laboratories) negative results from *Salmonella typhimurium* strains TA 98, TA 100, TA 1535, and TA 1537 (NTP, 1981).

Conclusions: Under the conditions of this bioassay, D-mannitol was not carcinogenic for F344/N rats or B6C3F1 mice of either sex.

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APPENDIX A

SUMMARY OF THE INCIDENCE OF NEOPLASMS IN RATS FED DIETS CONTAINING D-MANNITOL

TABLE A1.

SUMMARY OF THE INCIDENCE OF NEOPLASMS IN MALE RATS FED DIETS CONTAINING D-MANNITOL

	CONTROL	LOW DOSE	HIGH DOSE
ANIMALS INITIALLY IN STUDY ANIMALS NECROPSIED ANIMALS EXAMINED HISTOPATHOLOGICALLY	50 50 50	50 50 50	50 50 50
INTEGUMENTARY SYSTEM			
*SKIN SQUAMOUS CELL PAPILLOMA KERATOACANTHOMA	(50) 1 (2%)	(50) 1 (2%) 2 (4%)	(50)
*SUBCUT TISSUE BASAL-CELL TUMOR FIBROMA FIBROSARCOMA FIBROUS HISTIOCYTOMA, MALIGNANT	(50) 2 (4%)	(50) 3 (6%) 1 (2%) 1 (2%)	(50) 1 (2%) 5 (10%)
RESPIRATORY SYSTEM			
*LARYNX C-CELL CARCINOMA, INVASIVE	(50)	(50) 1 (2%)	(50)
#LUNG/BRONCHUS Adenocarcinoma, nos	(50)	(50)	(50) 1 (2%)
#LUNG	(50)	(50) 1 (2%)	(50)
SQUAMOUS CELL CARCINOMA, METASTA Alveolar/bronchiolar adenoma Alveolar/bronchiolar carcinoma		1 (2%) 2 (4%)	1 (2%) 1 (2%)
HEMATOPOIETIC SYSTEM			
<pre>*MULTIPLE ORGANS MALIG.LYMPHOMA, LYMPHOCYTIC TYPE LEUKEMIA,NOS</pre>	(50) 1 (2%) 1 (2%)	(50)	(50)
UNDIFFERENTIATED LEUKEMIA #SPLEEN MALIG.LYMPHOMA, HISTIOCYTIC TYPE	13 (26%) (50) <u>1 (2%)</u>	(50)	(50)

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

	CONTROL	LOW DOSE	HIGH DOSE
#MANDIBULAR L. NODE Squamous cell carcinoma, metasta	(50)	(50) 1 (2%)	(50)
#THYMUS THYMOMA	(40) 1 (3%)	(40)	(38)
CIRCULATORY SYSTEM None			
DIGESTIVE SYSTEM			
#LIVER NEOPLASTIC NODULE HEPATOCELLULAR CARCINOMA	(50)	(50) 2 (4%)	(50) 1 (2%) 1 (2%)
#PANCREAS ACINAR-CELL ADENOMA	(50)	(50) 1 (2%)	(50)
#SMALL INTESTINE ADENOCARCINOMA, NOS	(50)	(49)	(50) 1 (2%)
URINARY SYSTEM			
#KIDNEY TUBULAR-CELL ADENOMA	(50)	(50) 1 (2%)	(50)
ENDOCRINE SYSTEM			
#PITUITARY Adenoma, Nos	(46) 9 (20%)	(50) 10 (20%)	(50) 8 (16%)
#ADRENAL Cortical Adenoma Cortical Carcinoma	(50) 1 (2%)	(50) 1 (2%) 1 (2%)	(50) 1 (2%)
PHEOCHROMOCYTOMA	14 (28%)	10 (20%)	9 (18%)
#ADRENAL MEDULLA GANGLIONEUROMA	(50) 1 (2%)	(50)	(50)
#THYROID Follicular-cell Adenoma	(49) <u>2 (4%)</u>	(50)	(50)

TABLE A1. MALE RATS: NEOPLASMS (CONTINUED)

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

	CONTROL	LOW DOSE	HIGH DOSE
C-CELL ADENOMA C-CELL CARCINOMA	8 (16%) 2 (4%)	4 (8%) 1 (2%)	5 (10%) 1 (2%)
<pre>#PANCREATIC ISLETS ISLET-CELL ADENOMA</pre>	(50) 3 (6%)	(50) 3 (6%)	(50) 4 (8%)
REPRODUCTIVE SYSTEM			
*MAMMARY GLAND FIBROADENOMA	(50) 1 (2%)	(50)	(50) 1 (2%)
*PREPUTIAL GLAND Adenoma, nos Adenocarcinoma, nos	(50) 1 (2%)	(50) 1 (2%) 1 (2%)	(50)
#PROSTATE Adenoma, Nos	(50) 1 (2%)	(50)	(50) 1 (2%)
#TESTIS INTERSTITIAL-CELL TUMOR	(50) 45 (90%)	(50) 44 (88%)	(50) 45 (90%)
*SCROTUM NEURILEMOMA, MALIGNANT	(50)	(50)	(50) 1 (2%)
IERVOUS SYSTEM			
#CEREBRAL CORTEX ADENOCARCINOMA, NOS, METASTATIC	(50)	(50)	(50) 1 (2%)
PECIAL SENSE ORGANS			
*EYE/CONJUNCTIVA SQUAMOUS CELL CARCINOMA	(50) 1 (2%)	(50)	(50)
*ZYMBAL'S GLAND Squamous cell carcinoma	(50) 3 (6%)	(50) 2 (4%)	(50)
1USCULOSKELETAL SYSTEM			
*SKULL ADENOCARCINOMA, NOS, METASTATIC	(50)	(50)	(50) 1 (2%)

TABLE A1. MALE RATS: NEOPLASMS (CONTINUED)

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

D-Mannitol

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	CONTROL	LOW DOSE	HIGH DOSE
*RIB OSTEOSARCOMA		(50)	(50) 1 (2%)
BODY CAVITIES			
*THORAX OSTEOSARCOMA	(50) 1 (2%)	(50)	(50)
*MESENTERY LIPOSARCOMA	(50)	(50)	(50) 1 (2%)
ALL OTHER SYSTEMS			
*MULTIPLE ORGANS FIBROSARCOMA	(50)	(50) 1 (2%)	(50)
HEAD Squamous cell carcinoma squamous cell carcinoma, invasiv	1	1	
LEG Synovial Sarcoma	1		
ANIMAL DISPOSITION SUMMARY			
ANIMALS INITIALLY IN STUDY NATURAL DEATHƏ MORIBUND SACRIFICE SCHEDULED SACRIFICE ACCIDENTALLY KILLED	50 6 15 6	50 4 10	50 4 15
TERMINAL SACRIFICE ANIMAL MISSING INCLUDES AUTOLYZED ANIMALS	23	36	3 1

TABLE A1. MALE RATS: NEOPLASMS (CONTINUED)

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

TABLE A1. MALE RATS: NEOPLASMS (CONTINUED)

	CONTROL	LOW DOSE	HIGH DOSE
TUMOR SUMMARY			
TOTAL ANIMALS WITH PRIMARY TUMORS* Total primary tumors	50 114	49 109	48 101
TOTAL ANIMALS WITH BENIGN TUMORS TOTAL BENIGN TUMORS	49 89	47 82	46 81
TOTAL ANIMALS WITH MALIGNANT TUMORS TOTAL MALIGNANT TUMORS	24 25	20 25	19 19
TOTAL ANIMALS WITH SECONDARY TUMORS TOTAL SECONDARY TUMORS	‡ 1 1	2 3	1 2
TOTAL ANIMALS WITH TUMORS UNCERTAIN- Benign or Malignant Total Uncertain Tumors		2 2	1 1
TOTAL ANIMALS WITH TUMORS UNCERTAIN- Primary or metastatic Total uncertain tumors			
PRIMARY TUMORS: ALL TUMORS EXCEPT SE Secondary Tumors: metastatic tumors			DJACENT ORGAN

TABLE A2.

SUMMARY OF THE INCIDENCE OF NEOPLASMS IN FEMALE RATS FED DIETS CONTAINING D-MANNITOL

	CONTROL	LOW DOSE	HIGH DOSE
ANIMALS INITIALLY IN STUDY ANIMALS NECROPSIED ANIMALS EXAMINED HISTOPATHOLOGICALLY	50 50 50	50 50 50	50 50 50
INTEGUMENTARY SYSTEM			
*SUBCUT TISSUE FIBROMA RHABDOMYOSARCOMA NEURILEMOMA, MALIGNANT	(50) 1 (2%) 1 (2%)	(50) 1 (2%) 1 (2%)	(50)
RESPIRATORY SYSTEM			
ADENOCARCINOMA, NOS, METASTATIC ALVEOLAR/BRONCHIOLAR ADENOMA ALVEOLAR/BRONCHIOLAR CARCINOMA NEURILEMOMA METASTATIC		(49)	(50) 2 (4%)
HEMATOPOIETIC SYSTEM			
*MULTIPLE ORGANS LEUKEMIA,NOS UNDIFFERENTIATED LEUKEMIA		(50) 8 (16%)	1 (2%)
#BONE MARROW NEURILEMOMA, METASTATIC	(50)	(50) 1 (2%)	(50)
#MANDIBULAR L. NODE Squamous cell carcinoma, metasta	(49)	(50) 1 (2%)	(50)
CIRCULATORY SYSTEM			
#MYOCARDIUM Adenocarcinoma, nos	(50) 1 (2%)	(50)	(50)

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

TABLE A2, FEMALE	RATS: N	EOPLASMS (CONTINUED)
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	CONTROL	LOW DOSE	HIGH DOSE
DIGESTIVE SYSTEM			
*LIP BASAL-CELL CARCINOMA	(50) 1 (2%)	(50)	(50)
*TONGUE Squamdus cell papilloma	(50)	(50) 1 (2%)	(50)
<pre>#PAROTID GLAND SQUAMOUS CELL CARCINOMA, INVASIV</pre>	(50)	(48) 1 (2%)	(50)
#LIVER NEOPLASTIC NODULE	(50)	(50) 1 (2%)	(50)
#STOMACH Squamous cell papilloma squamous cell carcinoma	(50) 1 (2%)	(50)	(50) 1 (2%)
#COLON NEURILEMOMA, INVASIVE	(50) 1 (2%)	(50)	
JRINARY SYSTEM			
#URINARY BLADDER NEURILEMOMA, INVASIVE	(48) 1 (2%)	(49)	(48)
ENDOCRINE SYSTEM			
<pre>#PITUITARY CARCINOMA,NOS SQUAMOUS CELL CARCINOMA, METASTA ADENOMA, NOS</pre>	(50) 1 (2%) 24 (48%)	(47) 2 (4%) 15 (32%)	(48) 1 (2%) 19 (40%)
#ADRENAL CORTICAL ADENOMA PHEOCHROMOCYTOMA PHEOCHROMOCYTOMA, MALIGNANT	(49) 1 (2%) 2 (4%)	(50) 4 (8%) 3 (6%) 1 (2%)	(50) 2 (4%) 1 (2%)
#THYROID Follicular-cell Adenoma Follicular-cell Carcinoma C-cell Adenoma	(50) 1 (2%) 6 (12%)	(50) 1 (2%) 6 (12%)	(50) 1 (2%) 3 (6%)

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

	CONTROL	LOW DOSE	HIGH DOSE
NERVOUS SYSTEM			
#PALLIUM ASTROCYTOMA	(50) 1 (2%)	(50)	(50)
SPECIAL SENSE ORGANS			
*ZYMBAL'S GLAND Squamous cell carcinoma Adenosquamous carcinoma	(50)	(50) 1 (2%) 1 (2%)	(50) 1 (2%)
1USCULOSKELETAL SYSTEM			
NONE			
BODY CAVITIES			
*MEDIASTINUM <u>ALVEOLAR/BRONCHIOLAR_CA, INVASIV</u>	(50)	(50)	(50)

TABLE A2. FEMALE RATS: NEOPLASMS (CONTINUED)

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

TABLE A2. FEMALE RATS: NEOPLASMS (CONTINUED)

	CONTROL	LOW DOSE	HIGH DOSE
C-CELL CARCINOMA		2 (4%)	1 (2%)
#PANCREATIC ISLETS ISLET-CELL ADENOMA	(50)	(49)	(49) 1 (2%)
REPRODUCTIVE SYSTEM			
*MAMMARY GLAND Adenocarcinoma, Nos Fibroma	(50) 3 (6%)	(50) 3 (6%) 1 (2%)	(50)
FIBROADENOMA	10 (20%)	14 (28%)	7 (14%)
*PREPUTIAL GLAND Adenoma, Nos	(50) 1 (2%)	(50)	(50)
ADENOSQUAMOUS CARCINOMA		2 (4%)	
#UTERUS ENDOMETRIAL STROMAL POLYP ENDOMETRIAL STROMAL SARCOMA	(50) 10 (20%)	(50) 5 (10%) 2 (4%)	(50) 11 (22%)
NEURILEMOMA, MALIGNANT	1 (2%)		
#OVARY Granulosa-cell tumor	(50) 1 (2%)	(50)	(50)
FIBROMA	(24)	1 (2%)	

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

	CONTROL	LOW DOSE	HIGH DOSE				
		(50) 1 (2%)	(50)				
ALL OTHER SYSTEMS							
HEAD Squamous cell carcinoma, invasiv		1					
NIMAL DISPOSITION SUMMARY							
ANIMALS INITIALLY IN STUDY Natural deathg Moribund Sacrifice Scheduled Sacrifice	50 2 12 6	50 4 16	50 1 7				
ACCIDENTALLY KILLED TERMINAL SACRIFICE Animal Missing	30	30	42				
) INCLUDES AUTOLYZED ANIMALS							
UMOR SUMMARY							
TOTAL ANIMALS WITH PRIMARY TUMORS* Total Primary Tumors	45 78	44 77	36 55				
TOTAL ANIMALS WITH BENIGN TUMORS Total Benign Tumors	37 56	35 51	32 48				
TOTAL ANIMALS WITH MALIGNANT TUMORS Total Malignant Tumors	19 21	23 25	777				
TOTAL ANIMALS WITH SECONDARY TUMORS# Total secondary tumors	3 4	2 5	1 1				
TOTAL ANIMALS WITH TUMORS UNCERTAIN- Benign or Malignant Total Uncertain Tumors	1	1 1					
TOTAL ANIMALS WITH TUMORS UNCERTAIN- Primary or metastatic Total Uncertain Tumors							
PRIMARY TUMORS: ALL TUMORS EXCEPT SE SECONDARY TUMORS: METASTATIC TUMORS			JACENT ORGAN				

TABLE A2. FEMALE RATS: NEOPLASMS (CONTINUED)

TABLE A3.

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

CONTROL

AN IMAL NUMBER	5	5	5 0 3	5 0 4	5	5 0 6	5 0 7	5 0 8	5 0 9	51	5 11 1	5 1 2	5	5	5	5	5 1 7	5	5 1 9	5 2 0	5 2	2	5 2 3	5	5251
WEEKS ON STUDY		0	0	0	0	8	01	0	0	1 0 6	0	0	0	0	0	9	0	9	1	9	0	9	0	0 7 0	0
INTEGUMENTARY SYSTEM	91	4	4	4	_91	91	4	4.1			01	<u>. P.I</u>	01	01	01	0	01	. <u>F</u>	01			.,	01	<u></u>	-
SKIN SQUAMOUS CELL PAPILLOMA	+	+	+	N	+	+	+	* x	+	н	+	+	+	N	+	+	+	*	+	•	+	+	+	+	+
SUBCUTANEOUS TISSUE FIBROMA	+	÷	+	N	+	÷	+	+	+	н	+	٠	+	N X	+	+	+	+	+	+	+	٠	٠	+	+
RESPIRATORY SYSTEM																									-
LUNGS AND BRONCHI	+	+	+	+	+	+	+	+	+	+	÷	+	+	+	+	+	+	+	+	+	+	+.	+	+	÷
TRACHEA	-	-	-	٠	+	-	+	-	+	٠	-	+	÷	+	+	-	٠	-	٠	-	+	+	+	+	+
HEMATOPOIETIC SYSTEM	[
BONE MARROW	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	.++	+	+	+	. <u>+</u>	+	+	+	+
SPLEEN MALIG.LYMPHOMA, HISTIOCYTIC TYPE	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	-		<u> </u>		·	-			•	_
LYMPH NODES	+	+	÷	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	÷	+	+	+	+	+
THYMUS THYMOMA	+	٠	+	+	+	+	+	-	+	+	+	+	+	+	+	-	+	+	+	+	-	+	+	+	+
CIRCULATORY SYSTEM																									
HEART	+	+	÷.	٠	+	+	+	+	+	+	+	+	+	+	.*	+	+	+	+	+	+	٠	+	+	٠
DIGESTIVE SYSTEM				•																					_
SALIVARY GLAND	+	+	+	+	+	<u> </u>	+ +	+	+	+	+	+	+	<u>+</u>	+	+	++	+	+	+	+	+	+	<u>+</u>	+
LIVER BILE DUCT	†÷	+	+	<u>+</u>	÷	+	+		+	+	+	• •	<u>.</u>	+	+	+	÷	+	+	+	+	+	+	+	 +
GALLBLADDER # COMMON BILE DUCT	N	N	N	N	N	N	Ň	N	N	N	N	N	N	N	N	N	N	N	н	N	N	N	N	N	N
PANCREAS	.	÷	+	+	÷	+	+	+	÷	+	+	+	+	+.	+	+	+	+	+_	+	+	+	+	+	+
ESOPHAGUS	+	+_	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	÷	+	+	+	÷	+	+
STOMACH	++	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	÷	+	+	+	+	+	<u>+</u>
SMALL INTESTINE	<u> </u>	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+
LARGE INTESTINE	L.	+	+	+	*	+	+	+	<u>.</u>	+	+	+	+	+	+	+	+	*	+	+	<u>+</u>	+	+	+	
URINARY SYSTEM	.														+	÷	÷	+	÷	÷	÷	÷	•	÷	+
KIDNEY URINARY BLADDER	ļ.	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+
ENDOCRINE SYSTEM	⊢																								
PITUITARY	-	+	+	÷	٠	-	+	+	+	+	+	÷	+	+	+	+	+	٠	+	+	÷	+	٠	+.	÷
ADENOMA, NOS Adrenal		+	+	_^ +	+	+	+	+	+	+	+	+	+	+"	+	+	+	+	+	+	+	+	+	+	+
CORTICAL ADENOMA Pheochromocytoma ganglidneuroma				×			x	××	x		x			x	×	×			x						
THYROID FOLLICULAR-CELL ADENOMA C-CELL ADENOMA	+	٠	+	+	+	+	* X	+	+ x	+	+	+	+ X	+	+	-	+ x	•	+	+	+ ×	+	+	+	+
C-CELL CARCINOMA Paratayroid	<u>† </u>		+	+	+	+	+	+	+	+	+	+	+	+	+	-	+	+	+	+	+	-	÷	÷	+
PANCREATIC ISLETS	+	+		+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	÷	+	+	+	+
ISLET-CELL ADENOMA																									X
REPRODUCTIVE SYSTEM MAMMARY GLAND	+			4			÷	+	÷	+	÷	+	•	÷	+	Ń	+	+	+	÷	÷	÷	÷	÷	+
FIBROADENOMA	Ļ						x																		
TESTIS Interstitial-cell tumor	+ ×	_*	×	+	* ×	×	* x	*.	* ×	×	* x	*	<u>*</u>	<u>*</u>	*	*	* x	* x	*.	<u>*</u>	+	<u>*</u>	<u>*</u>	*	×
PROSTATE Adenoma, Nos	+	+	+	+	+	+	+	٠	+	+	+	+	+	+	+	+	+	٠	+	+	+	+	+	+	+
ADENUMA, NUS PREPUTIAL/CLITORAL GLAND ADENOCARCINOMA, NOS	N	N	N	NX	N	N	N	н	N	н	N	N	N	N	N	N	N	N	N	N	N	N	н	N	H
NERVOUS SYSTEM																									
BRAIN	+	+	÷	٠	+	÷	÷	+	+	+	÷	+	+	÷	÷	+	+	+	+	+	٠	÷	+	+	÷
SPECIAL SENSE ORGANS	+												•												
EYE APPENDAGES Squamous cell carcinoma	н	N	N	N	N	N	N	N	N	N	N	N	N	н	N	N	N	N	N	N	N	н	N	N	N
ZYMBAL'S GLAND Squamous cell carcinoma	н	N	N	N	N	N	N	N	N	N	N	н	N	N	н	N	N	N	N	* ×	N	N	N	N	H
BODY CAVITIES	+																					-			-
PLEURA OSTEOSARCOMA	н	Ν	N	N	N	N	N	H	N	N	N	N	N	N	N	N	N	N	N	N	H	N	H	N X	Η
ALL OTHER SYSTEMS	1		•			_		•																	-
MULTIPLE ORGANS NOS Malig.lymphoma, lymphocytic type Leukemia,nos undteferentiated leukemia	N	н	N X	Η	N	к	н	N	H.	N	м х		N	н	н	N	N	X	N	N X	N	N	N	N	н
UNDIFFERENTIATED LEUKEMIA HEAD NOS								^			_^	· ^													-
SQUAMOUS CELL CARCINOMA, INVASIVE	\vdash																								
LEG HOS SYNDVIAL SARCOMA																									

. NU ISSUE INFURMATION SUBMITTED C: NECROPSY, NO HISTOLOGY DUE TO PROTOCOL A: AUTOLYSIS MICHAL MISSING B: NO NECROPSY PERFORMED

TISSUE EXAMINED MICROSCOPICALLY
 REQUIRED TISSUE NOT EXAMINED MICROSCOPICALLY
 TUMOR INCIDENCE
 NECROPSY, NO AUTOLYSIS, NO MICROSCOPIC EXAMINATION
ANIMAL NUMBER	5 2	527	51	5	5	5	5	5	5	5	5	5	5	53	5	51	5	5	5	5	5	5	5	5	5	
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STUDY	6	8	3	6	6	8	<u></u>	6	3	6	6	6	9	6	0 6	0 4	8	6	81	8 5	8	6	6	_2	-6	TUMOPS
SKIN	+	+	÷	÷	+	+	÷	+	+	+	÷	÷	÷	÷	÷	÷	÷	+	÷	•	+	÷	+	÷	+	50×
SQUAMOUS CELL PAPILLOMA	┝																								-	,
SUBCUTANEOUS TISSUE Fibroma	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	* ×	+	+	50× 2
RESPIRATORY SYSTEM	+																								-	
LUNGS AND BRONCHI	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	<u>+</u>	50
TRACHEA	+	.+	-	+	+	+	-	+	+	+	+	+	+	+	+	+	+	+	+	+	-	+	+	-	-	36
HEMATOPDIETIC SYSTEM							-																			
BONE MARROW	+	+	<u>+</u>	.	<u>+</u>	<u>+</u>	+	+	+	+	+	+ +	÷	÷	+	+ +	* *	+	+	+	+	+	+	+	-	<u>50</u> 50
SPLEEN Malig.lymphoma, histiocytic type	Ļ	*	+	+	ž.	+	+	<u> </u>			•		<u> </u>					· · ·						· ·	_	1
LYMPH NODES	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	.+	+	+	+	+	50
THYMUS Thymoma	×	+	+	+	+	+	-	+	+	+	•	+	+	-	+	-	+	-	-	+	+	-	-	+	+	40
CIRCULATORY SYSTEM																										
HEART	+	+	+	+	٠	+	+	÷	+	+	+	+	+	+	+	+	÷	+	÷	+	+	+	+	+	+	50
DIGESTIVE SYSTEM		•																							-	
SALIVARY GLAND	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	49
LIVER	+	+	+	+	+	+	+	+	. + .	+	+	+	+	+	+	•	+	+	+	+	+	+	. +	.+	+	50
BILE DUCT	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	50
GALLBLADDER & COMMON BILE DUCT	N .	N .	н	N	N	N .	N	N	N	N	N .	N	N	H	N	N	N .	N .	N	N	N	N	N .	H	H	50×
PANCREAS	+	+	+	+	<u>+</u>	<u>.</u>	. •	+ +	_++	+	+	+ +		• •	*	+	+	+ +	+	+	+	+	- <u>+</u>		+	<u>50</u>
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SMALL INTESTINE	1.	+	+	+	+	+	+	+	+	- <u>-</u>	+	+	÷	+	+	+	+	+	+	+	+	+	+	+	+	50
LARGE INTESTINE	1.	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	50
URINARY SYSTEM	-																								-	
KIDNEY	L.	_ <u>+</u> _	+	+	+	+	ŧ.,	<u>+</u>	+	+	•	+	+	+	+	÷	+	÷	+	+	+	+	+	+	_+	50
URINARY BLADDER	+	+	+	+	+	+	+	٠	+	+	٠	+	٠	+	+	+	+	+	+	+	+	+	٠	+	+	50
ENDOCRINE SYSTEM											_															
PITUITARY Adenoma, Nos	+	+	* x	+	+	*	+	+	+	+	+	+	+	-	-	×.	* x	+	+	+	+	* ×	*	+	+	46 9.
ADRENAL	+	+	÷	+	+	+	+	+	+	+	+	+	٠	+	٠	+	+	+	+	+	+	÷	+	+	+	50
CORTICAL ADENOMA Pheochromocytoma	×	x											x				x				x			x		14
GANGLIONEUROMA	+	•	+	+				+		+	+	+	+					+							_	49
THYROID Follicular-cell Adénoma C-cell Adenoma	x	•	×	•	•	•	•	•	•	Ť	•	x	x	•	Ŧ	Ť	Ŧ	×	Ť	x	Ŧ	Ŧ	•	•		2
C-CELL CARCINDMA	ļ.		<u>^</u>																					X		2
PARATHYROID	+•-	+	+	+	+	+	+	-	+	+	+	+	+	-	-	+	+	+	+	+	+	+	+	+		- 56
PANCREATIC ISLETS ISLET-CELL ADENOMA	+	+	٠	* x	+	+	* x	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	50 3
REPRODUCTIVE SYSTEM	+-																								-	
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TESTIS	+	+	+	+	+	+	+	+	+	+	÷	+	+	+	+	+	+	+	+	÷	+	÷	÷	+	+	50
INTERSTITIAL-CELL TUMOR	<u> </u>	X	X	X	X		<u>x</u>	×		X	X	x	x	<u>X</u>	X	<u>×</u>		x	<u>x</u>	<u>x</u>	X	X	<u>×</u>	<u>x</u>	-×	45_
PROSTATE Adenoma, nos	+	+	+	+	+	+	+	+	+	* ×	+	+	+	+	+	+	+	+	+	+	+	+	+	+	*	50
PREPUTIAL/CLITORAL GLAND ADENOCARCINOMA, NOS	н	н	N	N	N	N	N	H	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	H	50×
NERVOUS SYSTEM																									-	
BRAIN	+	+	+	+	+	÷	÷	÷	÷	+	+	+	+	÷	÷	+	+	÷	+	÷	+	+	+	+	+	50
SPECIAL SENSE ORGANS	+																								-+	
EYE APPENDAGES	H	H	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	н	N	N	н	N	N	н	50×
SQUAMOUS CELL CARCINOMA	+	.,	<u>×</u>									+		ы			u		v		N	N	 N	N		50×
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BODY CAVITIES	1		•																							
PLEURA OSTEOSARCOMA	N	N	N	N	N	N	N	N -	N	N	N	N	N	н	N	N	N	н	N	N	N	N	N	N	N	50×
ALL OTHER SYSTEMS																									-	
MULTIPLE ORGANS NOS	N	N	н	N	N	N	N	н	N X	N	N	N	N	м	N	н	N	н	N	N	N	N	N	N	н	50¥
MALIG.LYMPHOMA, LYMPHOCYTIC TYPE LEUKEMIA,NOS UNDIFFERENTIATED LEUKEMIA	×	x		. x					^				x						x		×					13
HEAD NOS	<u> </u>	<u>^</u>											-0						~			•				
	1		X																						- i	1
SQUAMOUS CELL CARCINOMA, INVASIVE																									. 1	

TABLE A3. MALE RATS: TUMOR PATHOLOGY (CONTINUED) 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 D-MANNITOL

LOW DOSE

STUDY STUDY <th< th=""><th>ANIMAL NUMBER</th><th>5</th><th>5</th><th>5</th><th>5</th><th>5</th><th>5</th><th>5</th><th>5</th><th>5</th><th>5</th><th>5</th><th>5</th><th>5</th><th>51</th><th>5</th><th>5</th><th>5</th><th>5</th><th>51</th><th>5</th><th>5</th><th>5 2 2 0</th><th>5</th><th>5</th><th>5</th></th<>	ANIMAL NUMBER	5	5	5	5	5	5	5	5	5	5	5	5	5	51	5	5	5	5	51	5	5	5 2 2 0	5	5	5
THTEURERTARY SYSTEM SUBJECT APPLICATIONS CELL ARTLIDDA SUBJECT APPLICATIONS CELL ARTLIDDA SUBJECT APPLICATIONS CELL ARTLIDDA SUBJECT APPLICATIONS TISSUE SUBJECT APPLICATIONS SUBJECT APPLICATION SUBJECT APPLICATION SUBJECT APPLICATION SUBJECT APPLICATION SUBJECT SU					4	-51	-6	-1	8	9	0		2						8	- 2		- 11	- 2	-3	4	-5 1 0
SSM_MODES CELL PAPILLONA REAMONES TABUE - <td></td> <td>5</td> <td></td> <td>5</td> <td>8</td> <td>5</td> <td>5</td> <td>5</td> <td>2</td> <td>2</td> <td>2</td> <td>5</td> <td>5</td> <td>5</td> <td>8</td> <td>5</td> <td>5</td> <td>5</td> <td>5</td> <td>7</td> <td>5</td> <td>5</td> <td>9</td> <td>5</td> <td>5</td> <td>5</td>		5		5	8	5	5	5	2	2	2	5	5	5	8	5	5	5	5	7	5	5	9	5	5	5
specific control transmer - <td>SKIN SQUAMOUS CELL PAPILLOMA</td> <td>+</td> <td>+</td> <td>+</td> <td>٠</td> <td>÷</td> <td>N</td> <td>÷</td> <td>÷</td> <td>÷</td> <td>٠</td> <td>+</td> <td>÷</td> <td>·+</td> <td>+</td> <td>+</td> <td>٠</td> <td>٠</td> <td>N</td> <td>٠</td> <td>٠</td> <td>+</td> <td>+</td> <td>٠</td> <td>٠</td> <td>+</td>	SKIN SQUAMOUS CELL PAPILLOMA	+	+	+	٠	÷	N	÷	÷	÷	٠	+	÷	·+	+	+	٠	٠	N	٠	٠	+	+	٠	٠	+
PIBBOD: Status x RESPIRED STATUS x INCLAMPS STATUS x INTERCIPAL x </td <td></td> <td><u> </u></td> <td></td>		<u> </u>																								
LUM2A AND BADNOLL SACELMANA, METASTAT ALVEOLASSESSACEDIDIAS ACCOUNTANA X TRACICLASSESSACEDIDIAS CONTANT, INVASIVE X TRACICLASSESSACEDIDIAS X TRACINA LUM2 TRACICLASSESSACEDIDIAS X TRACINA LUM2 TRACINA LUM2 LUM2 LUM2 LUM2 LUM2 LUM2 LUM2 LUM2	FIBROMA FIBROSARCOMA	+	•	•	•	•	м	•	•	·	•	•	•	•	•	•	·	×	N	Ţ	•	•	·	•	•	x
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C-C-CELL CARCINOMA, INVASIVE X X X		+	-	+	+	+	-	÷	+	+	+	÷	t	-	+		÷	+	-	+	-	-	+	-	-	-
BONE MARQUA	LARYNX C-CELL CARCINOMA, INVASIVE	н	+	N	H	н	+	н		Ν	H	+	н	+	N	+	N	N	٠	Ν	٠	٠	N	٠	+	+
SPIEEN - + + + + + + + + + + + + + + + + + + +	HEMATOPOIETIC SYSTEM																									
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Siguinus -<	SPLEEN	+	+	+	+	÷	+	+	+	_+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	ŧ	+
Investigation Image: Second	LYMPH NODES Squamous cell carcinoma, metastat	+	+	+	+	+	+	+	+	+	×	+	+	+	+	+	+	+	•	+					+	+
MEART + + + + + + + + + + + + + + + + + + +	THYMUS	-	+	+	-	+	-	+	+	-	-	+	+	+	+	+	+	+	+	-	+	+	+	-	+	-
TURAT SALT VARY GLAND + - + + + + + + + + + + + + + + + + + +																			_							
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ADENOMA, NOS X	ENDOCRINE SYSTEM																									
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MAMMARY GLAND + + + + + + + + + + + + + + + + + + +	PANCREATIC ISLETS ISLET-CELL ADENDMA	+	+	+	+	+	+	+	+	+	+	* ×	+	٠	+	+			+	+	+	+	+	+	+	* X
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SQUAMOUS CELL CARCINOMA X ALL OTHER SYSTEMS MULTIPLE ORGANS NOS NN	SPECIAL SENSE DRGANS																									_
MULTIPLE ORGANS NOS N N N N N N N N N N N N N N N N N	SQUAMOUS CELL CARCINOMA	N	н	N	N	N	н	N	н	N	×	N	н	N	н	N	N	N	н	н	N	N	N	N	N	N
UNDIFFERENTIATED LEUKEMIA X X X X X X X X X X X X X X X X X X X	MULTIPLE ORGANS NOS FIBROSARCOMA	N	N	N	н	н	н	N	н	N	н	н	N	N	N	N			N		N	H	H	N	N	N
SQUAMOUS CELL CARCINOMA I X	UNDIFFERENTIATED LEUKEMIA	×				<u>x</u>	X		-					<u>×</u>				x		X						
+: TISSUE EXAMINED MICROSCOPICALLY : NO TISSUE INFORMATION SUBMITTED	SQUAMOUS CELL CARCINOMA	L																								

+ - X 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 incoidence Nécropsy, no autolysis, no microscopic examination

ANIMAL NUMBER	5	5	5 2	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	
WEEKS ON	6	-71		8		#	-21-		4	1	6	1	8	2	0	1	2	1	4	5	-	7	8	9	-11	TOTAL TISSUES TUMORS
STUDY	5	2	5	8	5	5	5	5	5	5	8	5	5	5	4	51	5	5	5	5	<u>ši</u>	8	8	5	<u> </u>	
SKIN Squamous cell papilloma	+	N	+	+	+	+	+	+	+	+	+	+	+	*××	÷	÷	+	÷	÷	N	+	+ x	+	+	+	50¥ 1 2
KERATOACANTHOMA Subcutaneous tissue Fibroma Fibrosarcoma	+	N	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	×	+	+ X	+	+	×	50× 3
FIBROUS HISTIOCYTOMA, MALIGNANT			_																						_	1
RESPIRATORY SYSTEM Lungs and bronchi Squamous cell carcinoma, metastat Alveolar/bronchiolar adenoma Alveolar/bronchiolar carcinoma	·	٠	+ ×	٠	•+	+	+	⁺ x	٠	÷	٠	٠	٠	•	٠	÷	•	+	+	٠	+	٠	+	+	+	50 1 2
TRACHEA	-	-	-	+	-	+	+	-	+	+	+	-	+	+	÷	-	-	-	+	+	+	+	+	+	+	31
LADYNY	+	+	+	N	+	N	N	÷	N	N	N	÷	H	N	N	÷	+	+	N	N	N	N	H	N	н	50×
C-CELL CARCINOMA, INVASIVE HEMATOPOIETIC SYSTEM			~																						_	
BONE MARROW	+	+	÷	+	+	+*	+	÷	÷	÷	÷	÷	+	÷	÷	+	+	+	+	+	+_	+	+	+	+	5.0
SPLEEN	+	+	+	+	+	+	+	+	*	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	50
LYMPH NODES	+	+	+	+	+	+	+	+	+	+	+	+	+	+	÷	+	+	+	+	+	+	+	+	÷	+	50
SQUAMOUS CELL CARCINOMA, METASTAT	+									+		+	+	+	+		+	+	+	+	+	+	+	+	+	40
THYMUS	+	+	+	-	+	+	+	+	+	<u> </u>	+	-					, 		•							
HEART	+	+	+	+	•	÷	÷	+	+	÷	÷	+	+	+	+	+	÷	÷	÷	÷	÷	+	+	+	+	50
DIGESTIVE SYSTEM	<u>} </u>																									}
SALIVARY GLAND	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	49
LIVER	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	÷	+	+	٠	٠	+	50
NEOPLASTIC NODULE	f_{\cdot}		<u>×</u>	+					+	+	+	+	+	+								+		•	-	50
BILE DUCT Gallbladder & common bile duct	N N	, N	+ N	-+ N	+ N	+ N	Ť.		, T		 N	N.	N		N		<u>т</u> н	н	, N	N.		N.	N	<u>+</u>	Ň	50×
PANCREAS	+	_n_ +	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	50
ACINAR-CELL ADENOMA	<u> </u>	·										_						<u> </u>			<u>X</u>					<u> </u>
ESOPHAGUS	┝┿	+_	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	<u>+</u>	+	+	<u>+</u>	<u>+</u>	+	- <u>+</u>	+	50
STOMACH	<u> </u> -+	+	+	+	+	+	+	+	+	+	+	+	<u>.</u>	+	+	+	<u>.</u>	. <u>+</u>	÷	+	<u>_</u>	- <u>+</u>			-	<u> </u>
SMALL INTESTINE	+	+	+	+	_+	+	<u>+</u>	÷.	. <u>+</u>	+	+	+	*	+	+	+	+	+	 +	+	+	+	+	+	- +	50
LARGE INTESTINE	Ļ	+	+	+	+	+	<u> </u>	<u>+</u>	+	·	<u> </u>	-		·	·		•								_	
URINARY SYSTEM Kidney Tubular-Cell Adenoma	+	÷	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	50
URINARY BLADDER	+	+	+	+	+	+	÷	+	+	+	+	+	+	+	+	+	+	+	+	+	+	÷	٠	+	+	50
ENDOCRINE SYSTEM	┼																								-	
PITUITARY	l t	+	+	ţ	+	+	÷	ţ	+	+	+	+	÷	÷	+	+	+	+	+	+	٠	٠	+ ¥	+	+	50
ADENOMA, NOS Adrenal Cortical Adenoma Cortical Carcinoma	<u>+</u>	+	+	+	+	+	+	+	+	+	+	+	÷	+	+	+	+	+	+	÷	+	+	+	+	+	50
PHEOCHROMOCYTOMA	<u>↓×</u>						-		_					<u>×</u>			x								-	10
THYROID C-Cell Adenoma C-Cell Carcinoma	Ľ	+	+	+	•	+	+	+	×	+	+	+	+	+	+	*	+	•	+	•	+	×	•	+	+	50 4 1
PARATHYROID	++	+	+	-	+	+	+	+	+	+	+	+	+	+	+	+	+	+	ŧ	+	<u>+</u>	+	+	+	-+	45
PANCREATIC ISLETS ISLET-CELL ADENOMA	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	50 3
REPRODUCTIVE SYSTEM	+																								-	
MAMMARY GLAND	+	N	+	+	+	+	+	+	+	+	+	ŧ.	+	N	+	+	+	+	+	+	+	+	+	.+	+	<u>50¥</u>
TESTIS INTERSTITIAL-CELL TUMOR	•	ţ	ţ	+	ż	×	ź	*	*	÷	+	*	÷.	*	*	÷	*	÷	÷	*	ţ	÷	*	÷	÷	50
PROSTATE	†	<u>×</u>	_ <u>×</u>	+	- <u>^</u>	<u>+</u>		+	<u>+</u>	 +	+	<u>^</u>	<u>+</u>	+		+	+	+	<u>~</u>	+	+	_^	+	+	+	50
PREPUTIAL/CLITORAL GLAND ADENOMA, NOS ADENOCARCINOMA, NOS	N			N	N	N		N	N	N	N				N					N				N	N	50¥ 1
NERVOUS SYSTEM	_																						_		-	
BRAIN	+	+	+	÷	+	+	+	+	+	+	+	+	+	+	+	+	+	٠	+	٠	+	٠	+	+	+	50
SPECIAL SENSE DRGANS	<u>†</u>				-														_							
ZYMBAL'S GLAND Squamous cell carcinoma	н	N	N	N	N	н	N	н	н	N	N	N X	N	N	N	N	N	N	N	N	N	н	н	м	н	50¥ 2
ALL OTHER SYSTEMS MULTIPLE DRGANS NOS FIBRDSARCOMA	н	H X	N	N	н	N	н	N	н	H				н		N	N	N	N	N	N	N	н		н	50× 1
UNDIFFERENTIATED LEUKEMIA HEAD NOS	 		<u>×</u>	X							X	x	x		x								<u>x</u>	x		14
SQUAMOUS CELL CARCINOMA	L																									1

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

HEAD NUS SQUAMOUS CELL CARCINOMA * ANIMALS NECROPSIED

+: TISSUE EXAMINED MIGROSCOPICALLY -: REQUIRED TISSUE NOT EXAMINED MIGROSCOPICALLY X: Tumor Incidence N: Necropsy, no autolysis, no migroscopic examination

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

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TABLE A3.

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

HIGH DOSE

ANIMAL NUMBER	5	5	5	5	5	5	51	51	5	5	5	5	51	5	5	5	5	5	51	51	5	5	5	5	52
WEEKS ON	+	2	3	4	5	-6	-ř	-8	-1	ģ	- 1	-2	-3	-4	5	-6	-1	-	2	- Č	-	2	3	-4	j
STUDY	0	5	0	0 4	0	4	4	9	0	9	2	8	6	9	04	e l	ġ	ġ	0	3	9	ġ	9		0 4
INTEGUMENTARY SYSTEM																									
SUBCUTANEDUS TISSUE BASAL-CELL TUMOR FIBROMA	×	+	+	+	+	+	+	+ X	+	* X	N X	+	+	+	+	+	+	+	+	+	+	+	+	+	+
RESPIRATORY SYSTEM										• • •															
LUNGS AND BRONCHI Adenocarcinoma, nos Alveolar/Bronchiolar Adenoma Alveolar/Bronchiolar carcinoma	•	×	+	+	+	+	+	+	+	•	+	+	+	+	+	+	+	+	+	+	+	+	•	+	+
TRACHEA	+	-	+	+	-	+	+	٠	-	-	+	+	+	-	+	+	+	+	-	-	÷	+	-	+	-
HEMATOPOIETIC SYSTEM	+-						·																		
BONE MARROW	+	+	+	+	+	+	+	+	+	<u>+</u>	+	÷	+	+	.+	+	+	+	•	+	+	+	÷	+	+
SPLEEN	+	+	t.	.+	+	+	+	+	+	+	+	÷	+	+	+	+	+	+	+	+	+	+	+	+	+
LYMPH NODES	++	+		+	+	+		+	•		+	+	+	+	+	+	+	+	+	+	. +	٠	+	+	+
THYMUS	-	٠	-	-	+	+	-	+	٠	+	+	+	÷	٠	٠	+	-	٠	+	+	+	+	+	+	÷
CIRCULATORY SYSTEM	1																								
HEART	1 +	+	+	+	+	+	+	+	+	+	+	+	*	+	+	+	*	+	+	*	+	+	+	+	+
DIGESTIVE SYSTEM																									
SALIVARY GLAND LIVER NEOPLASTIC NODULE	ļ.	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+
HEPATDCELLULAR CARCINOMA	+										<u>×</u>														_
BILE DUCT Gallbladder & Common Bile Duct	T N	+ н	+ N	_+_ N	- <u>-</u>	<u>т</u> N	<u>т</u>	.+ н	. <u>т</u>	N	+ N	+ N	+ N	+ N	+ N	+ N	+	<u>т</u>		+	T_N	т н	т н	+	T N
PANCREAS	1î	Ţ.			•	-	T I	т П	1	1				1			1	1	м т					N _	
ESOPHAGUS	+	•	*	+	+	+		+	*	• <u>•</u>	+	+	^ +	+	•	•	÷	•	+	- <u></u> -	+	- <u>`</u> -	+	*	÷
STOMACH	1.	+	+	i +	•	+	+	+	+	+	+	+	+	+	+	 +	+	+	+	+	+	+	+	+	+
SMALL INTESTINE	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+
ADENOCARCINOMA, NOS	-												X							_					-
LARGE INTESTINE	+	+	+	+	+	+	+	+	+	+	+	+	+	-	+	+	+	+	+	<u>+</u>	+	+	+	+	+
KIDNEY											+	÷	÷												
URINARY BLADDER	ابْ	+	+	÷	+		÷	+	+	+	+	+	+	+	• •		+	+	+	+	+	+	+	+	+
ENDOCRINE SYSTEM	<u> </u>	-					·			_				'		·	·			-	·	· ·		-	-
PITUITARY Adenoma, Nos	+	+	+	*	+	+	* ×	+	+	+	+	+	+	+.	* ×	÷ ×	+	+	+	+	* x	+	•	+	+
ADRENAL Cortical Adenoma Pheochromocytoma	+	+	+ _X	+ X	+	+	+ x	+	+	+	+ x	+	+	+	+	+	+ x	+	+	+	+	+ X	+	+	+
THYROID C-Cell Adenoma C-Cell Carcinoma	+	+	٠	+	÷	+	* ×	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	* ×	+	* X
PARATHYROID	I.	+	+	+	+	+	+	+	+	+	+	+	t.	+	-	+	+	-	+	÷	+	+	-	+	+
PANCREATIC ISLETS ISLET-CELL ADENOMA	+	÷	÷	+	÷	+	+	* ×	+	+	+	+	+	+	+	+	+	+	+	+	+	٠	+	+	+
REPRODUCTIVE SYSTEM	+		-														••••••							• • • • •	-
MAMMARY GLAND FIBROADENDMA	+	+	+	+	+	+	+	+	м	+	N	+	+	+	+	+	+	+	N	+	+	+	+	* x	+
TESTIS Interstitial-Cell Tumor	+ ×	+	* ×	* ×	* ×	* ×	* ×	* ×	+ ×_	* ×	* x	* ×	+	*	+ X	+ ×	+ x	* ×	*	÷ x	+	, x	* ×	* ×	+ X
PROSTATE Adenoma, Nos	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	٠	+
REVOUS SYSTEM	+																		_						-
BRAIN Adenocarcinoma, nos, metastatic	+	* x	٠	٠	+	٠	٠	÷	+	٠	٠	٠	٠	+	٠	+	٠	+	+	+	+	+	٠	•	+
NUSCULOSKELETAL SYSTEM BORE Adenocarcinoma, NDS, Metastatic Osteosarcoma	н	н×	H	H	н	H	н	N	н	H	N	N	H	H	N	N	N	N	N	H	H	н	н	N	м
ODY CAVITIES	1																								4
MESENTERY £ IPOSARCOMA	N	H	N	H	N	н	H	H -	н	N	N	N	н	N	H	N	N	н	N	N	N	н	н	N	N
ALL OTHER SYSTEMS MULTIPLE ORGANS NOS UNDIFFERENTIATED LEUKEMIA	н	N	N	н	N	н	N	N	N	N	н	н Х	N	N X	н	N	N X	N	N	N X	N X	N	N	н	N
SCROTUM NOS	i																								- 1

TISSUE EXAMINED MICROSCOPICALLY
 REQUIRED TISSUE NOT EXAMINED MICROSCOPICALLY
 TUMDR INCIDENCE
 NECROPSY, NO AUTOLYSIS, NO MICROSCOPIC EXAMINATION

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

TABLE A3. MALE RAT	S:	T	UN	лU	H	۲۶	11	H	UL	.0	G١	()	UJ	IN I	ŧn	10	EU	יי		п	IG	n	U	Uð	E
ANIMAL NUMBER	5	5	5	5 2 9	5	5	5	5		5	5	5	5	5 5		5	5	5	5	5	5	5	5[5	
WEEKS ON		-7	-8	0	-0	╢		-31		-6	-6		11				3	-4	띾	6	7	8			TOTAL TISSUE TUMOR
STUDY	4	0 4	0	9	0 4	0 4	91	4	71	5	0 4	41	4	ق ا	ļõ	8 7	1	41	4	8	4)	ź	ě.	ź	
				÷	+		÷	÷	+	N	÷	+	÷ •		+	N	+	+	+	÷	+	+	+	+	50×
SUBCUTANEOUS TISSUE BASAL-CELL TUMOR FIBROMA										.,		x									x			Ì	1
RESPIRATORY SYSTEM	+																							-+	
LUNGS AND BRONCHI	+	+	+	+	÷	+	+	+	+	+	+	+	+ •		+	+	+	+	+	÷	+	+	+	+	50
ADENOCARCINOMA, NOS Alveolar/Bronchiolar Adenoma Alveolar/Bronchiolar Carcinoma	×											x												_	1 1
TRACHEA	+	-	-	+	+	-	-	+	+	+	-	+		+ +	-	+	-	+	+	-	+	-	+	-	30
HEMATOPOIETIC SYSTEM		-												_											
BONE MARROW	+	+	+	. <u>+</u>	+	*	+	+	+	+	+	+	+	+ +	+	+	+	+	+	+	+	+	+	+	50
SPLEEN	+	+	+	+	+	+	+	+	+	+	+	+	+ •	+ +	+	+	+	+	+	+	+	+	+	+	50
LYMPH NODES	<u> </u>	+	+	+	+	+	+	+	+	+	+_	+	+	<u>+</u>	+	+	+	+	+	+	+	+	+	+	50
THYMUS	1+	-	-	-	+	+	+	+	+	+	+	+	+ -	+ +	-	+	-	+	-	+	+	+	-	+	38
CIRCULATORY SYSTEM					_		-																		
HEART	+	+	+	+	+	+	+	+	+	+	+	+	+ -	+ +	+	٠	+	+	+	+	+	+	+	+	50
DIGESTIVE SYSTEM	1															_					_				
SALIVARY GLAND	+	+	+	+	+	+	+	+	.+	+	+	+	+	<u>+</u>	+	+	+	+	+	~	+	+	+	+	49
LIVER Neoplastic Nodule Hepatocellular carcinoma	Ľ	+	+	+	+	+	×	+	+	+	+	+	+ •	+ +	+	+	+	+	+	+	+	+	+	+	50
BILE DUCT	+	+	+	+	+	+	+	+	+	+	÷	+	• .:	+	+_	+	+	+	+	ŧ	+	+	+	+	50
GALLBLADDER & COMMON BILE DUCT	м	N	N	N	N	N	N	н	н	N	N	N	N P	н н	N	N	N	Ν	N	N	N	N	N	н	50×
PANCREAS	+	+	+	+	+	+	_+	+	. <u>+</u>	+	+	+	<u>+</u> ·	+ +	+	+	+	+	•	+	+	+	+	+	50
ESOPHAGUS	<u> +</u>	+	+	+	+	+	+	+	+	+	+	+	+	<u>+</u>	+	+_	+	+	+	+	+	+	+	+	50
STOMACH	+	+	+	+	+	+	+	+	+	+	+	+	+ •	+ +	+	. +	+	+	+	+	+	+	+	+	50
SMALL INTESTINE ADENOCARCINOMA, NOS	+	+	+	+	+	+	+	+	+	+	+	+	+ •	+ +	+	+	+	+	+	+	+	+	+	+	50,
LARGE INTESTINE	1.	+	+	+	+	+	+	+	+	+	+	+	+ -	+ +	+	+	+	+	+	+	+	+	+	+	49
JRINARY SYSTEM	_																							-+	
KIDNEY	1.	+	+	+	+	+	+	÷	+	÷	+	÷	+	+ +	+	+	+	+	+	+	+	+	+	+	50
URINARY BLADDER	+	+	+	+	+	+	+	+	+	-	÷	+	+ ·	+ +	+	+	+	+	+	+	+	÷	+	+	49
ENDOCRINE SYSTEM	+													·				_						+	
PITUITARY	+	+	+	÷	+	+	÷	÷	+	+	+	+	+ -	+ +	+	٠	+	+	+	+	+	+	÷	+	50
ADENOMA, NOS	+		~	X			<u>x</u>								<u>x</u>							<u> </u>			8
ADRENAL CORTICAL ADENDMA PHEOCHROMOCYTOMA	Ľ	+ X	+	+ 	+	+	+	+	+	+	+	*	+ ·	• •	+	+	+	+	+	+	+ 	+	+	+	50 1 9
THYROID C-CELL ADENOMA C-CELL CARCINOMA	+	٠	+	+	+	+	+	•	+	+	+	+	+ •	+ +	+	+	+	*	×	+	+	+	+ _X	+	50
PARATHYROID	+	÷		+	÷	+	+	+	·+	-	+	+	+	+ +	+	+	+	÷	+	+	+	+	+	+	45
PANCREATIC ISLETS	+	+	+	+	÷	+	+	+	+	+	٠		+ ·		+	+	+	+	+	+	÷	+	+	+	50 4
ISLET-CELL ADENOMA												×		X							×			_	
REPRODUCTIVE SYSTEM Mammary gland Fibroadenoma	+	+	+	÷	÷	+	+	÷	+	N	+	+	•	+ +	+	N	+	+	+	+	+	+	+	+	50¥
TESTIS Interstitial-cell tumor	+ ×	* X	*	* X	* x	* ×	* x	, x	* *	+	* ×	* ×	+ · x _ :	+ + × ×	* X	+	_*	* x	* ×	* ×	* x	* x	*	*	50 45
PROSTATE ADENOMA NOS	+	+ ×	+	+	+	+	+	٠	+	+	+	+	+ ·	• •	٠	+	+	٠	+	٠	+	+	+	+	50
ERVOUS SYSTEM	1																-							T	
BRAIN ADENDCARCINOMA, NOS, METASTATIC	+	+	+	+	+	+	٠	+	+	+	+	+	• •	• •	+	+	*	+	+	+	+	+	+	+	50
NUSCULOSKELETAL SYSTEM Bone Adenocarcinoma, nos, metastatic	N	N	н	н	N	N	H	N	N	N	N	N	ни	чи	н	н	м	N	N	N	N	N	N	н	50×
DSTEDSARCOMA																	×								i
ODY CAVITIES		_																							
MESENTERY LIPOSARCOMA	H	N	Ν	н	N	н	N	N	N	N	N	н	N	ч×	н	н	N	н	Η	N	N	Ν	н	H	50×
LL OTHER SYSTEMS																								+	·
	1.	N	N	N	N	N	N	N	N	N	N	N	N P	ł N	N	N	N	N	N	N	N	N	N	н	50×
MULTIPLE ORGANS NOS UNDIFFERENTIATED LEUKEMIA	-						<u>x</u> _	<u>^</u>										<u>.x</u>	_	<u>×</u>	<u>×</u>			-Ă-	

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

* ANIMALS NECROPSIED

+: TISSUE EXAMINED MICROSCOPICALLY -: REQUIRED TISSUE HOT EXAMINED MICROSCOPICALLY X: TUMOR INCIDENCE N: NECROPSY, NO AUTOLYSIS, NO MICROSCOPIC EXAMINATION N: NECROPSY, NO AUTOLYSIS, NO MICROSCOPIC EXAMINATION N: NECROPSY PERFORMED N: NO MECROPSY PERFORMED

TABLE A4.

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

CONTROL

ANIMAL NUMBER	0			0	i_5	0	5 0 7	5 0 8	5	5	5		5	5	1	5	5 1 7	5	5	520	2	2	2	2	
WEEKS ON Study	0	1	1	1	0	0	1	1	1	T	1	1	0	0	5 0 6	0	0 8	0	1	1	0	1	1	-4	F
INTEGUMENTARY SYSTEM		4	4	0	5	1.	4	. 0	4	L_6	6	6	6	6	3	9	9		6	1.6	6	6	6	10	1_
SUBCUTANEOUS TISSUE FIBROMA Rhabdomyosarcoma	+	N	н	+	+	+	+	+	٠	+	+	+	÷	+	*	+	+	+	+	+	٠	+	+	+	
RESPIRATORY SYSTEM	+	•									-									· · · ·					
LUNGS AND BRONCHI Adenocarcinoma, nos, metastatic Alveolar/bronchiolar carcinoma	+	+	+	+	+	+	+ x	+	+	+	+	+	+	+	+	+	+	+	+	٠	+	٠	+	+	
TRACHEA	+	+	+	+	+	+	+	+	-	+	+	+	+	+	+	-	+	+	÷	+	+	+	+	-	
EMATOPOLETIC SYSTEM	+																								_
BONE MARROW	+	+	+	+	+	+	÷	+	+	t.	+	+	+	+	+	÷	+	+	_+	+	+	+	+	+	
SPLEEN	+	t	t	+	+	+	+	+	+		+	. +	. +	+	+	+	÷	+	+	+	. +	.+	ŧ	+	
LYMPH NODES	1.t	+	+	-	+	+	+	+	_ <u>+</u> _	+	+	+	+	+	+	+	+	+	<u>+</u>	+	+	+	÷	+	
THYMUS	+	÷	+	+	٠	-	+	-	-	+	÷	+	÷	+	ŧ	-	+	+	+	+	-	+	-	÷	
IRCULATORY SYSTEM	+																						-		
HEART Adendcarcinoma, Nos	+	•	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	
IGESTIVE SYSTEM																									
ORAL CAVITY Basal-Cell Carcinoma	N N	N	N	N	N	N	N	H	N	N	N	N	N	N	N	N	H	N	N	N	H	N	N	н	
SALIVARY GLAND	++	+	+	+	ŧ	+	+	÷	+		<u>+</u>	+	+	+	+	+	÷	+	÷	+	ŧ	+	+	÷	
LIVER	+	+	+	+		+	÷	÷	+	÷	÷	+	+		÷.	+	÷	+	+	+	+	+	+	+	
BILE DUCT	+	+	+	÷	+	+	+	+	+	+	+	+	+	+	٠	+	+	٠	+	٠	٠	٠	+	+	
GALLBLADDER & COMMON BILE DUCT	ĻΝ.	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	<u>N</u>	N	N	N	N	N	
PANCREAS	++	. +	+	+	+	+	+	+	+	+	•	+	+	+	+	+	+	_ <u>+</u> _	+	+	+	+	+	+	
ESOPHAGUS	+	+	+	+	+	+	+	+	+	+	+	+	+	_ <u>+</u> _	+	+	+	ŧ	+	÷	÷	+	•	t	
STOMACH Squamous cell carcinoma	+	+	+	+	+	+	+	+	+	* ×	+	+	+	+	+	+	•	+	+	+	+	+	+	+	
SMALL INTESTINE	+	+	+	<u>+</u>	+	+	+	+	+	+	+	_+	+	+	+	+	+	+	+	+	+	+	*	+	
LARGE INTESTINE NEURILEMOMA, INVASIVE	1 *	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	٠	+	+	
RINARY SYSTEM	-																								
KIDNEY	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	÷	+	÷	+	+	+	_
URINARY BLADDER NEURILEMOMA, INVASIVE	•	+	٠	+	+	+	+	-	+	+	+	÷	+	+	+	+	٠	+	٠	+	٠	+	٠	+	•
NDOCRINE SYSTEM									_																
PITUITARY CARCINOMA,NOS Adenoma, Nos	Ľ	+	+ x	+ x	+	+ _x	•	+	+ x	+	+ X	+	+	+	* 	+ x	* ×	+ X	+ x	×	+	+ ×	+ 	+	,
ADRENAL Cortical Adenoma Pheochromocytoma	+	+	+	+	+	+	+	+	+	+	+ 	+	+	+	+	+	+	+	+	×	+	+	+	+	•
THYROID Follicular-cell adenoma C-cell adenoma	+	+	+	٠	٠	+	+	+	+	+	+	+ X	+	+	÷	+	+	+	+	٠	+	+ ¥	+	+ x	
PARATHYROID	+	-	+	+	+	+	+	+	-	+	+	+	+	+	+	-	+	+	+	+	-	+	+	+	
EPRODUCTIVE SYSTEM	+						<u> </u>									-									
MAMMARY GLAND Adenocarcinoma, nos Fibroadenoma	+	+	٠	+	+ X	٠	+	+	+	+ x	+ x	٠	+	٠	•	+	٠	٠	٠	*	÷	٠	÷	+ x	•
PREPUTIAL/CLITORAL GLAND Adenoma, NOS	N	N	N	ĸ	N	N	N	н	N	N	N	H	N	N	N	N	H	N	N	N	N	N	N	N	٢
UTERUS Endonetrial stromal Polyp Neurilemoma, malignant	×	+	+	+	+	+	+	×	*	*	+	*	+	+	+	+	+	٠	+	+	•	+	+	+	
OVARY GRANULOSA-CELL TUMOR	+	+	+	•	+	+	٠	+	+	+	+	٠	+	+	+	+	+	+	+	+	+	+	+	+	4
ERVOUS SYSTEM																									-
BRAIN Astrocytoma	+	+	+	+	٠	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	٠	٠	+	+	+
DDY CAVITIES																									_
MEDIASTINUM Alveolar/bronchiolar ca, invasive	н	N	H	N	N	N	ĸ	N	H	N	N	н	N	N	N	N	N	N	N	N	H	N	N	N	N
L OTHER SYSTEMS						-														-					
MULTIPLE ORGANS NOS UNDIFFERENTIATED LEUKEMIA	N	N	H	N X	N X	N	N	N	N	H	N	N	N X	NX	N	N	N	N	N	N	N	N	N	N	N

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

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

ANIMAL NUMBER	5	5	5	5	5	5	5	5	5 3 4	5	5	5	5	539	5	5	5	5 4 3	544	5	5 4 6	5	5	5 4 9	5	TOTAL
WEEKS ON Study	0 7 6	1	8 1 0 6	0	0	0	2	3 0 6	9	5	- 0 0	0	8 1 0 6	01	0 9 3	1	2	3	9	1	1 01 6	1	8	0	0	TISSUE
INTEGUMENTARY SYSTEM																										
SUBCUTANEOUS TISSUE Fibroma Rhaddumydsarcoma	*	+	+	+	+	+	+	•	٠	+	н	+ x	+	N	+	+	•	,	*	+	•	+	+	+	+	50× 1
RESPIRATORY SYSTEM						-		-		-																
LUNGS AND BRONCHI Adenocarcinoma, nos, metastatic Alveolar/Bronchiolar carcinoma	Ľ	•	+	•	+	•	+	•	+	+	+	+	+	+	+	+	+	×	+	+	+	+	+	*	+	50
TRACHEA	-	+	+	-	+	+	+	+	+	+	÷	+	+	+	+	+	+	+	٠	+	-	٠	-	٠	+	43
TEMATOPOIETIC SYSTEM																										
BONE MARROW	++	+	+	+	+	+	+	+ ·	+	+	÷	+	+	. +	+	+	+	•	+	+	+	+	+	+	+	50
SPLEEN	+	+	+	+	+	+	+	+	+	+	+	+	+	+_	+	+	+	+	+	+	+	+	+	+	+	50
LYMPH NODES	+	+	+	+	_+	+	+	+	<u>+</u>	+	+	+	•	+	+	+	+	+	+	+	+	+	+	+	-+	49
THYMUS	+	-	-	+	+	+	+	+	+	+	-	+	+	+	-	-	+	-	-	-	+	+	+	+	+	36
CIRCULATORY SYSTEM																										
HEART Adendcarcinoma, nos Digestive system	•	+	+	<u>+</u>	+	•	+	+	+	+	+	+	+	+	+	+	+	*	+	+	•	+ 	+	+	_	⁵⁰ 1
ORAL CAVITY BASAL-CELL CARCINOMA	м	N	N	N	N	N	N	N	N	H	H	H	N	H	н	N	H	N	N	Ħ	H	н	N ·	N	N	. 50×
SALIVARY GLAND	L.	+	+	+	+	+	+	+	+	+	+		+	+	÷	+	+	÷	+	÷	÷	+	+	÷	+	50
LIVER	Ŀ	+	÷	+	÷		+	+	+	+	+	+	+	+	+	+	+	+	÷	+	+	+	+	+	+	50
BILE DUCT	+	+	+	+	+	+	+	+	÷	+	+	÷	+	+	٠	٠	+	+	٠	٠	+	٠	+	+	+	50
GALLBLADDER & COMMON BILE DUCT	L.N.	N	N	н.	N	N	N	N	N .	N	Ν.	N	х.	N	<u>N</u>	N	N	N	N	N	N	N	N	N	N	<u>50×</u>
PANCREAS	<u> +</u>	+	+	<u>+</u>	+	+	+	<u>+</u>	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	<u>+</u>	+	50
ESOPHAGUS	++	+	+	+	+	+	+	<u>+</u>	+	+	t	+	+	-	+	+	+	+	+	+	+	+	+	+	+	49
STOMACH Squamdus cell carcinoma	ļ.	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+ '	+	+	+	+	+	+	•	+	1
SMALL INTESTINE	⊢	<u>+</u>	+	+	+	+	+	+	+	*	+	+	+	+	.+	÷	+	- <u>+</u>	+	+	+	+	+	+	+	50
LARGE INTESTINE NEURILEMOMA, INVASIVE	×	+	+	+	+	+	+	+	+	+	+	+	+	*	+	+	+	+	*	+	+	•	+	+	•	50
URINARY SYSTEM	.																									
KIDNEY URINARY BLADDER NEURILEMOMA, INVASIVE	1 t	-	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	Ŧ	48 1
NDOCRINE SYSTEM	+												-		_				_						-	
PITUITARY Carcinoma,Nos Adenoma, Nos	+	+	+	+	+ x	+ X	+ x	+	+	+ X	+	+	+ X_	+	+ X	+ .x	+ x	+ ×	+ X	+ _x	+	+	+	•	+	50 1 29
ADRENAL CORTICAL ADENOMA	+	+	+	-	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	÷	+	÷	+	+	+	49
PHEOCHROMOCYTOMA	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	× +	+	+	+	+	+	+	+	50
FOLLICULAR-CELL ADENOMA C-CELL ADENOMA	_	X															×				x		X		4	1 6
PARATHYROID	+	+	+	•	-	+	+	-	+	•	+	+	+	+	-	+	+	+	+	+	+	-	•	+	-	43
MAMMARY GLAND Adehocarcinoma, Nos Fibroadenoma	+	+	+	٠	+	٠	* ×	÷	* ×	+ ¥	+ ¥	+	+ x	٠	+ X	+	+	+	+ x	+	+	+ X	٠	٠	+	50* 3
PREPUTIAL/CLITORAL GLAND ADENOMA, NOS	N	N	N	H	N	N	N	H	H	N	N	N	N	N	N	N	N	N	N	н	N	N	N	н	н	50×
UTERUS Endometrial stromal polyp Neurilemoma, malignant	+ ×	+	+	٠	+	+	+	+	٠	٠	+	+	•	٠	* ×	* ×	+	* ×	+	٠	+	٠	*	* ×	+	50 10 1
DVARY GRANULOSA-CELL TUMOR	1.	+	+	÷	+	÷	+	÷	+	÷	+	+	+	٠	+	+	+	+	÷	* *	+	+	٠	+	+	50,
IERVOUS SYSTEM	-		_																						-t	
BRAIN ASTROCYTOMA	+	×	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	•	+	+	+	+	+	+	50,
NDY CAVITIES MEDIASTINUM	N	N	N	N	N	N	N	N	N	N	N	н	N	N	N	н	N	N	N	N	N	N	N	N	н	50×
ALVEOLAR/BRONCHIOLAR CA, INVASIVE															_				ó						+	1
MULTIPLE ORGANS NOS UNDIFFERENTIATED LEUKEMIA	N	N X	N	ĸ	N	н	N	N	N	N	N	H	H	N	N	N	N X	н	H	N X	N X	N	N X	N	н	50× 10

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

* ANIMALS NECROPSIED

 +: TISSUE EXAMINED MICROSCOPICALLY
 : NO TISSUE INFORMATION SUBMITTED

 -: REQUIRED TISSUE NOT EXAMINED MICROSCOPICALLY
 C: NECROPSY, NO HISTOLOGY DUE TO PROTOCOL

 X: TUMOR INCIDENCE
 A: AUTOLYSIS, NO MICROSCOPIC EXAMINATION

 N: NECROPSY, NO AUTOLYSIS, NO MICROSCOPIC EXAMINATION
 M: AUTOLYSIS

 N: NECROPSY, NO AUTOLYSIS, NO MICROSCOPIC EXAMINATION
 M: ANTIAL MISSING

 B: NO HECROPSY PERFORMED
 B: NO HECROPSY PERFORMED

TABLE A4.

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

LOW DOSE

0	0	0	4 -	0	0	5 0 7	5 0 8	5	5	1	1) 	1	1	1	5 1 7	5 1 8	1	2	2	22	23	5 2 4	
10	0		. 1	0		0 9	1	1	1		9	0	0 9	0 8	0	0	1	0	0	1	1	0	1	
5	5	5	. 5	5	5	6	5		_2	_5	9	5	9	9	5	5	5	1.5	2	5	5	4	5	1
•	+	+	+	٠	٠	+ X	+	+	٠	+	٠	٠	٠	+	٠	٠	+	+	٠	+	*	+	٠	•
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++		+	*	-	+	+	+	•	_	+	*	+	+	+	+	+	+	+	+	+	*	+	+	
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	 N	+ N	+ N	+ N	+ N	+	+ N	_+	 N	+N	+ N	+ N	+	+	+ N	+	+	+	+ N	+	+	_+	+	+ N
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++	+	+	+	+	+	+	+	+	+	+	+	+	÷	+	+	+	+	+	+	+	+	+	÷	+
++	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	<u>+</u>
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+	+	* X	+	* ×	٠	+	* ×	+	+	+	+	+	+ X	+	+	+	÷	+	+	+	+	+	+	+
+	+	+	+ X	+ x	÷	+ X	+	+	+ ×	+	+	+ X	+	+	+	+	+	+	+	+	+	+	+	+
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×	×	×						x		×										×			×	
⊢	N	N	N	N	N	N	N	N X	N	N	N	N	N	N	м	N	N	N	N	N	N	N	N	N
+	×	+	+	+	×	+	+	×	+	+	* ×	+	+	+ x	+	+	*	+	+	+	+	+	+	+
+	+	+	+	•	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+
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N	н	N	N	N	N	N	H	н	N X	N	H	H	N	N	N	H	N	N	N	N	N	N	N	н
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н	N	N	N	N	н	N	H	N	N	N	N	N	N X	N	N	н	N X	N X	н	н	H	H	N	N
														x										
	Image: Non-State State St	1 2 0 0 0 1 + + +	1 2 3 0 0 0 + + +	1 2 3 4 1 0 0 0 0 0 0 + + + + + + + + + + + + + + + + + + + + + + + + + + + + + + + + + + + + + + + + + + + + + + + + + + + + + + + + + + + + + + + + + + + + + + + + + + + + + + + + +	1 2 3 4 5 0 0 0 0 0 0 + + + + + + + + + + + + + + + + + + + + + + + + + + + + + + + + + + + + + + + + + + + + + + + + + + + + + + + + + + + + + + + + + + + + + + + + + + + + + + + + +	1 2 3 4 5 6 0 0 0 0 0 0 0 + + + + + + + + + + + + + + + + + + + + + + + + + + + + + + + + + + + + + + + + + + + + + + + + + + + + + + + + + + + + + + + + + + + + + + + + + + + + + + + + +	1 2 3 4 5 6 7 0 0 0 0 0 0 0 9 + + + + + + + + + + + + + + + + + + + + + + + + + + + + + + + + + + + + + + + + + + + + + + + + + +	I I	I 2 3 6 5 6 7 8 9 0 0 0 0 0 0 9 0 0 1 2 3 6 5 5 5 5 5 5 + + + + + + + + + + + + + + + + + + + + + + + + + + + + + + + + + + + + + + + + + + + + + + +	I 2 3 4 5 6 7 8 9 0 0 0	1 2 3 4 5 6 7 8 9 0 1 1 0	1 2 3 4 5 6 7 8 9 0 1 2 6 0	1 2 3 4 5 6 7 8 9 0 1 2 3 0	1 1 2 3 4 5 6 7 8 9 1 1 2 3 4 0	1 1 2 3 4 5 6 7 8 9 0 1 1 2 3 4 5 0	1 2 3 4 5 6 2 8 9 0 1 2 3 4 5 6 3 1 1 2 3 4 5 6 5	1 2 3 4 5 4 7 8 9 0 1 2 3 4 5 6 7 0	1 2 3 4 5 6 7 8 9 1 1 2 3 4 5 6 7 8 0	I I	1 2 3 4 5 6 7 7 8 9 0 0	1 2 3 4 5 4 7 8 9	1 2 1 2 1 2 1 2 1	1 2 3 4 2 4 2 4 2 4 5	1 1

A: AUTOLYSIS M: ANIMAL MISSING B: NO NECROPSY PERFORMED

.

ANIMAL NUMBER	5	527	5	5 2 9	5	5	5	5	5 3 4	5 3 5	5 3 6	5 3 7	5 3 8	5	54	5 4	5 4 2	5	5	5	5	5	548	5 4 9	5	10141
WEEKS ON STUDY		1	-8 0 8	-1	9		-1	1	-1	0	0		1	0	- 8-	9	1	3 0 8	9	1	6	1	1	11	- 0 7	TOTAL TISSUES TUMORS
INTEGUMENTARY SYSTEM	51	Š	2	Š	ź	51	5	3	5	ž	اق	أق	5	óİ	8	51	ŝ	ži	41	5	5	5	5	5	- 6	
SUBCUTANEOUS TISSUE Fibroma Neurilemoma, malignant	+	+	+	+	+	+	+	+	+	٠	+	٠	+	٠	+	+	+	+	+	N	٠	+	+	٠	+	50× 1 1
RESPIRATORY SYSTEM	†																				_					
LUNGS AND BRONCHI Neurilemoma, metastatic	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	49
TRACHEA	+	+	+	+	+	+	-	+	+	+	+	+	+	+	-	+	-	+	+	+	+	+	+	-	+	43
HEMATOPOIETIC SYSTEM BONE MARROW	+			+	+		+	+	+	+	÷	÷	+	÷	+	+	+	÷	+	+	÷	+			+	50
NEURILEMOMA, METASTATIC	+	+	+	+	+	.+ .+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+		+	50
LYMPH NODES	+	+	+	+	+	+	+	+	+	÷	+	+	+	+	÷	+	÷	÷	+	+	+	+	+	+	+	50
SQUAMOUS CELL CARCINOMA, METASTAT	+	+	+	+	-	+	+	+	+	+	+	+	+	-	+	+	+	+	+	+	+	+	+	-	+	36
CIRCULATORY SYSTEM	<u>}</u>							_							•			-							-	
HEART	+	+	+	+	+	÷	٠	+	+	+	+	+	٠	+	÷	٠	÷	٠	+	+	÷	٠	+	+	+	50
DIGESTIVE SYSTEM																										
ORAL CAVITY Squamous Cell Papilloma	N	N	Ņ	N	N	N	H	N	N	N	N	N	N	N	N	N	H	N	N	N	N	N	N	N	н	50×
SALIVARY GLAND Squamous cell carcinoma, invasive	+	-	+	+	+	+	-	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	48
LIVER NEOPLASTIC NODULE	+	+	+	+	+	+	+	+	+	٠	+	+	+	+	+	+	+	+	+	+	+	+	+	٠	+	50 I
BILE DUCT	+	+	÷	+.	+	+	+	+	+	+	+	+	+	+	+	+	+	+	÷	+	+	+	+	+	+	50
GALLBLADDER & COMMON BILE DUCT	N.	_N_	N	N	N	N	N	N	N	N	Ν.	N	N	N	N	N	N	N	N	N	N	N.	N	N	N	50×
PANCREAS	+-+	+	+	+	+	+	÷	+	+	+	*	+	+	+	+	+	+	+	+	+	+	+	+	+	_+	49
ESOPHAGUS	+	_ <u>+</u>	+	+	+	+	+	+	+	÷	+	+	+	+	+	+	+	+	+	+	+	.+	÷	+	+	50
STOMACH	+	+	+	+	<u>+</u>	+	+	+	+	+_	+	<u>+</u>	+	+	. <u>+</u>	+	+	+	+	+	<u>+</u>	+	+	+	+	50
SMALL INTESTINE	+	+	+	+	+	+	+	+	+	+	+	+	+	+	<u>+</u>	+	+	÷	+	+	<u>+</u>	+	+	+	+	50
URINARY SYSTEM	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	_	50
KIDNEY	+	+	÷	+ .	+	+	÷	+	+	÷	+	+	÷	÷	+	÷	•	÷	÷	÷	÷	+	+	+	+	50
URINARY BLADDER	+	+	+	+	+	+	+	+	+	+	+	+	÷	+	+	+	+	+	+	+	+	÷	+	+	+	49
ENDOCRINE SYSTEM						-																			-+	
PITUITARY Carcinoma,nos Adenoma, nos	-	+	+	+ x	-	+ x	+	+	+	+	*	+ x	+	+ x	+	-	+	+	+ x	+ X	* ×	+	•	+	×	47 2 15
ADRENAL Cortical Adenoma Pheochromocytoma Pheochromocytoma, Malignant	+	•	+	+	+	×	+	+	+	+	+	+	+	+	+	+	* ×	+	•	+	+	* ×	+	+	+	50 4 3
THYROID FOLLICULAR-CELL CARCINOMA C-CELL ADENOMA C-CELL CARCINOMA	* ×	+	+	+	+	+	+	+	+	+	+	+	+ ×	+	•	+	+	+	•	+	+	+	+	+	+	50 1 6
	 													+			+	<u> </u>	+					<u>*</u>	-+	47
PARATHYRDID REPRODUCTIVE SYSTEM	<u> </u>	+			+	-		_	+	+	+	+	-		+	*	<u> </u>	<u> </u>	-	+	+	<u> </u>	+		+	·····
MAMMARY GLAND Adenocarcinoma, nos Fibroma	+	+	٠	٠	٠	+	٠	* X	+	+	٠	+	+	+	٠	+	٠	+	+	٠	٠	+	٠	+	+	50×
FIBROADENOMA Preputial/clitoral_gland	N	N N	N	N	N	X N	N	х н	N	N	N	X N	N	N	N	х к	N	X N	X N	N	N	N	N	н	н	14 50×
ADENOSQUAMOUS CARCINOMA Uterus Endometrial stromal polyp	+	+	<u>×</u>	+	÷	+	+	+	+	+	+	+	+	+	+	+	+	+	•	+	+	+	•	+	+	?
ENDOMETRIAL STROMAL SARCOMA	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	× +	+	+	+	+	+	+	+	+	+	<u>ž</u> 50
FIBROMA																	×									1
NERVOUS SYSTEM	+	+	+	+	+	+		*	+	÷			•	•	+	÷	+	+	÷	÷	+	÷	•	•	+	50
BRAIN SPECIAL SENSE ORGANS	Ļ -	÷	*	-			+	+	*	*	·	· ·	•	-		•	т		•	· · · ·		•	•		-	
ZYMBAL'S GLAND SQUAMOUS CELL CARCINDMA ADENOSQUAMOUS CARCINOMA	н	н	N	н	N	N	N	N	N	N	N	н	н	N	N	N	N X	N	N	N	N	N	N	N	Ħ	50× 1 1
BODY CAVITIES			•																						+	
MESENTERY SARCOMA, NOS ALL OTHER SYSTEMS	H	н	н	N	N	N	N	N	н.	N	N	N	н	N	N	н	N	N	N	N	N	N	н	N	н	50× 1
MULTIPLE ORGANS NOS UNDIFFERENTIATED LEUKEMIA	N	N	N	н	N	н	N	N	N	N X	N	N	н	××	N X	N	N	N	N X	×	N	N	N	N	N	50× 8
HEAD NDS SQUAMOUS_CELL_CARCINOMA, INVASIVE																									į	f

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

* ANIMALS NECROPSIED

TISSUE EXAMINED MICROSCOPICALLY
 REQUIRED TISSUE NOT EXAMINED MICROSCOPICALLY
 TUMOR INCIDENCE
 NECROPSY, NO AUTOLYSIS, NO MICROSCOPIC EXAMINATION

: NO TISSUE INFORMATION SUBMITTED C: NECROFSY, NO HISTOLOGY DUE TO PROTOCOL A: Autorysis M: Animal Missing B: No Necrofsy Performed

TABLE A4.

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

HIGH DOSE

ANIMAL NUMBER	5		5	5 0 4	5	5	5 0 7	5	509	5	5	5	5	5	5	5	5 1 7		5	520	5	5	5	524	
WEEKS ON Study	1	-2 -1 -2	3	1	5 0 8	-6 -1 0	1	8 1 0	í 0	1	i	-2 1 0	 1 0	0	-5	-6 1 0	1	-8 1 0	÷	2007	1	2 1 0	3 1 0	9	
RESPIRATORY SYSTEM	-	41	4	4	1	<u> </u>	9	4	-4		4	3	. 4	4	4	4	4	4	- 4	_6	- 41		_4]	4	
LUNGS AND BRONCHI Alveolar/bronchiolar Adenoma	+	+	÷	+	+	÷	٠	÷	٠	+	÷	+	÷	ŧ	+	÷	÷	+	+	÷	+	÷	+	÷	
	+	+	+	+	+	+	+	+	+	+	+	+	÷	+	+	+	+	+	+					+	
TRACHEA RENATOPOIETIC SYSTEM	Ļ	•	*	-	+	·	+	•	*	+			+	•	<u> </u>	+	+	•	+	-	+	+	+	+	
BONE MARROW	Ι.																				+	+	÷	+	
SPLEEN	1÷	+	+		_ <u>*</u>	•	•	- <u>+</u>	•	<u>,</u>	+	+	÷	Ť	+	<u>,</u>			<u> </u>			- <u>-</u> -		-	-
LYMPH NODES		-				<u>,</u>		<u> </u>					-					-		-	<u></u> ,	<u> </u>			
THYMUS	Ť.	+	+	+	+	+	+	•	+	+	+	+	÷	+	-	+	+	+	+	- <u>*</u> - +	+	+	+		
CIRCULATORY SYSTEM	ļ.									·						·									
HEART	1.	÷	÷		+	+	+	÷	÷	+	÷	+	+	+	+	÷	÷	+	+	+	÷	+	+	+	
DIGESTIVE SYSTEM	1										· · ·								•••						_
SALIVARY GLAND	1.	+	+	+	+		+	+	+	÷	+	+	+	+	+	÷	+	+	•	+	+	+	+	+	
LIVER		+	+	+	+	+	+	+	+	•	+	+	+	+	+	+	+	+	+	+	+	+	+	+	
BILE DUCT	+	÷	+	+	+	+	+	÷	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	_
GALLBLADDER & COMMON BILE DUCT	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	
PANCREAS	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	_	
ESOPHAGUS	+	+	+	+	+	+	+	+	+	+	÷	+	+	+	+	+	+	+	+	+	+	+	+	+	_
STOMACH Squamous cell papilloma	•	+	+	+	÷	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	÷	
SMALL INTESTINE	1	+	+	+							4											+	+	_	
LARGE INTESTINE	İ.	÷	+	÷	÷	÷	÷	÷	÷	÷	ż	÷	÷	•	•	•	•	÷	•	÷	÷	+	÷	-	
RINARY SYSTEM	ļ								, 					<u> </u>						·					
KIDNEY	+	+	•	÷	+	÷	•	÷	÷	+	÷	•	+	+	÷	+	÷	÷	÷	+		+	•	÷	
URINARY BLADDER	+	+	+	+	+	+	+	+	+	+	+	+	- <u>-</u>	+	+	+	+	+	+	+	+	+	+	+	
NDOCRINE SYSTEM																	· ·								
PITUITARY Squamous cell carcinoma, metastat Adenoma, nos	•	+	•	+ .×	+ x	*	+	+	+ ×	•	+	+	+.	+	-	+	+ ×	+	+	+ ×	+ X	+	+ ×	+ ×	.,
ADRENAL CORTICAL ADENOMA PHEOCHROMOCYTOMA	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	* ×	+	+	+	+	+	+	+	
THYROID Follicular-cell Adenoma C-cell Adenoma C-cell Carcinoma	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+ ×	+	+	+	+	+	+ *	+	
PARATHYRDID	+	+	+	+	+	+	+	+	+	+	-	+	+	+	+	+	+	+	+	+	+	+	+	+	-
PANCREATIC ISLETS ISLET-CELL ADENOMA	•	÷	t	+	+	+	+	+	٠	÷	+	+	+	+	+	+	+	+	+	+	٠	+	+	-	
EPRODUCTIVE SYSTEM	┣																								-
MAMMARY GLAND FIBROADENCMA	*	٠	+	+	+	+	+	+	* ×	+	+	+	+	+	+	+	+	+	+	+	* x	+	+	+	
UTERUS ENDOMETRIAL STROMAL POLYP	+	٠	* x	٠	+	+	٠	* ×	÷	+	+	+	+	* x	+	+	+	+	+	+	+	+	*	+	
OVARY	+	•	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	
ERVOUS SYSTEM																•••••									-
BRAIN	+	+	+	+	+	+	+	+	+	+	+	+	٠	+	+	÷	+	+	+	÷	+	+	+	÷	,
PECIAL SENSE ORGANS	-					• • • •							••					·····							-
ZYMBAL'S GLAND Squamous cell carcinoma	н	N	H	N	N	* ×	N	N	N	H	N	н	N	N	N	N	H	N	H	Η	N	N	N	+	I
LL OTHER SYSTEMS																									
MULTIPLE ORGANS NOS LEUKEMIA.NOS UNDIFFERENTIATED LEUKEMIA	н	N	H	N	N	N	N	N	N	N	N	N X	H	N	H	N	N	N	N	N	N	N X	N	N	I
 TISSUE EXAMINED MICROSCOPI REOUIRED TISSUE NOT EXAMIN TUMOR INCIDENCE NECROPSY, NO AUTOLYSIS, NO 	CALL ED MIC	IICR ROS	2050 500F	OP1	EX/	LY MIN	IATI	01			: : : : :	NEC	ROP	SY,	HO	ні	STO	TION DLOG RMED	YC	BMI	TO	PRO	DTOC	. . .	

ANIMAL NUMBER	5	5	5	5	5	5	5	5	5	5	5	5	5	3	5	4	5	41	5	4	5	5 4 7	5	5	5	TOTAL
WEEKS ON Study	6 1 0	-7	-8	9	0	9	2		4	5 1 0	6 1 0	7	8	9			2	8	1	1	6		8	-1	0	TISSUE
RESPIRATORY SYSTEM	41	4	4	4	4		5	5	5	51	5	51	51	5	5	5	5	9	5	51	51	_5]	3	5	-5	
LUNGS AND BRONCHI Alveolar/Bronchiolar Adenoma	+	+	+	+	+	+	+	+	+	*	+	* ×	+	+	+	+	+	+	+	+	+	+	+	+	+	50
TRACHEA	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	-	+	+	+	+	+	+	48
HEMATOPOIETIC SYSTEM	<u>†</u>			-								_														
BONE MARROW	++	+	+	+	+	+	+	+	+.	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	50
SPLEEN	++	+	+	+	+	<u>+</u>	+	<u>+</u>	+	+	+	+	+	+	+	+	+	+	+	. <u>+</u>	+	+	+	+	+	50
LYMPH NODES	++	_t	+	+	+	+	+	+	+	+	+	.+	+	+	+	+	+	÷	+	+	+	*	+	t	+	50
THYMUS	-	+	-	+	+	-	+	+	+	+	+	+	+	+	+	+	-	+	+	+	-	+	-	-	+	41
CIRCULATORY SYSTEM																										
HEART	+	+	+	+	+	+.	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	50
DIGESTIVE SYSTEM																									T	
SALIVARY GLAND	+	+	+	+	+	+	+	*	+	+	+	+	<u>+</u>	+	+	+	+	+	+	+	+	+	+	+	+	5.0
LIVER	+-+-	+	+	+	+	+	+	+	<u>+</u>	+ '	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	50
BILE DUCT	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	. <u>+</u>	+	50
GALLBLADDER & COMMON BILE DUCT	<u> </u>	Ν.	N	N	N	<u>N</u>	N	N	N	Ν		N	N	<u>N_</u>	<u>N</u>	N	<u>N</u>	N	N	Η	N	Ν	N	Ν_	-11	50×
PANCREAS .	+-	+	+	+	+	+	+	+	+	+	+	+	<u>+</u>	+	+	+	+	+	+	+	+	+.	+	+	+	49
ESOPHAGUS	+-	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	.+	+	50
STOMACH Squamous cell papilloma	+	+	×	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	50
SMALL INTESTINE	+	+	+	+	+	+	+	+	+	+	+	÷	+	+	+	+	+	+	+	+	+	+	+	+	+	49
LARGE INTESTINE	+	+	+	+	+	÷	+	+	+	*	+	+	+	+	+	*	+	+	+	+	+	+	+	+	+	49
URINARY SYSTEM																-										
KIDNEY	+-	+	+	+	+	+	+	*	+	+	+	+		+	+	+	+	+	+	+	+	+	+	+	+	50
URINARY BLADDER	+	+	+	+	+	+	-	+	+	+	+	•	+	+	+	+	+	+	+	+	+	+	+	+	+	48
ENDOCRINE SYSTEM		+												+	÷	÷										48
PITUITARY Squamous cell carcinoma, metastat Adenoma, nos	+	* ×_	· •	+	* 	* X	×	• 	• x	÷ 	÷ 	x	·	+	· 	•	* x	*	·	<u>×</u>	<u>x</u>		x		_	40 19
ADRENAL Cortical Adenoma Pheochromocytoma	+	+ x	+	+	+	+	+	* x	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	•	50 2
THYROID Foliicular-cell Adenoma C-cell Adenoma C-cell Carcinoma	+	+ X	+	+	+	+	+	+	•	+	+	+	+	+	+ x	+	*	+	+	+	+	+	+	+	+	50 1 3 1
PARATHYROID	+	+	+	+	+	+	+	+	+	+	÷	+	+	+	+	+	÷	+	+	-	+	+	-	+	+	47
PANCREATIC ISLETS ISLET-CELL ADENOMA	+	+	* ×	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	÷	+	÷	+	+	+	+	49 1
REPRODUCTIVE SYSTEM	ļ	_															_		_				-		-+	
MAMMARY GLAND FIBROADENOMA	, + 	* x	+	+	+	+	+	+	+	+	+	+	*	* x	+ ·	+	+	+	+	+	+	•	+	+	+	50× 7
UTERUS ENDOMETRIAL STROMAL POLYP	+	+	*	+	+	+	+	+	* x	+	* ×	+	* ×	* ×	+	* ×	+	•	+	+	+	+	+	•	+	50 11
OVARY	+	+	+	٠	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	٠	+	50
VERVOUS SYSTEM																										
BRAIN	+	+	÷	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	50
SPECIAL SENSE ORGANS																										
ZYMBAL'S GLAND Squamous Cell Carcinoma	н	N	+	N	N	+	N	N	N	N	N	N	N	N	H	N	N	H	Ν	N	N	H	N	N	N	50 H
ALL OTHER SYSTEMS Multiple Organs NOS LEUKEMIA.NOS UNDIFFERENTIATED LEUKEMIA	н	NX	н	N	N	N	N	N	H	N	N	N	н	N	N	N	N	N	н	ĸ	N	N	н	N	N	50×

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

* ANIMALS NECROPSIED

ALS NECROPSIED :: NO TISSUE INFORMATION SUBMITTED :: NO TISSUE INFORMATION SUBMITTED :: RO TISSUE INFORMATION SUBMITTED :

APPENDIX B

SUMMARY OF THE INCIDENCE OF NEOPLASMS IN MICE FED DIETS CONTAINING D-MANNITOL

TABLE B1.

SUMMARY OF THE INCIDENCE OF NEOPLASMS IN MALE MICE FED DIETS CONTAINING D-MANNITOL

	CONTROL	LOW DOSE	HIGH DOSE
ANIMALS INITIALLY IN STUDY Animals necropsied Animals examined histopathologically	50 50 50	50 50 50	50 49 49
INTEGUMENTARY SYSTEM			
*SKIN NEURILEMOMA, MALIGNANT	(50)	(50)	(49) 1 (2%)
SARCOMA, NOS Fibroma	(50) 1 (2%) 2 (4%)	(50)	(49)
FIBROSARCOMA Rhabdomyosarcoma	3 (6%)	1 (2%)	
RESPIRATORY SYSTEM			
#LUNG	(50)	(50)	(49)
UNDIFFERENTIATED CARCINOMA HEPATOCELLULAR CARCINOMA, METAST ALVEOLAR/BRONCHIOLAR ADENOMA ALVEOLAR/BRONCHIOLAR CARCINOMA TUBULAR-CELL ADENOCARCINOMA, MET	1 (2%) 2 (4%) 6 (12%) 3 (6%)	7 (14%) 6 (12%) 1 (2%)	5 (10%) 7 (14%) 4 (8%)
PHEOCHROMOCYTOMA, METASTATIC			1 (2%)
IEMATOPOIETIC SYSTEM			
*MULTIPLE ORGANS Malignant Lymphoma, Nos	(50)	(50)	(49) 2 (4%)
MALIG.LYMPHOMA, LYMPHOCYTIC TYPE MALIG.LYMPHOMA, HISTIOCYTIC TYPE	2 (4%)	1 (2%)	1 (2%)
MALIGNANT LYMPHOMA, MIXED TYPE UNDIFFERENTIATED LEUKEMIA	1 (2%) 1 (2%)	1 (2%)	
#SPLEEN MALIG.LYMPHOMA, LYMPHOCYTIC TYPE	(49)	(49)	(47) 1 (2%)
MALIG.LYMPHOMA, HISTIDCYTIC TYPE	1 (2%)	<u></u>	

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

	CONTROL	LOW DOSE	HIGH DOSE
#MESENTERIC L. NODE Malig.lymphoma, lymphocytic type Malignant lymphoma, mixed type	(49) 1 (2%) 1 (2%)	(50)	(47)
#LIVER Malig.lymphoma, histiocytic type	(50)	(50) 1 (2%)	(49)
#DUODENUM Malig.lymphoma, lymphocytic type	(45)	(47) 1 (2%)	(47)
CIRCULATORY SYSTEM			
*MULTIPLE ORGANS HEMANGIOSARCOMA	(50)	(50)	(49) 1 (2%)
#SPLEEN Hemangiosarcoma	(49) 1 (2%)	(49) 1 (2%)	(47)
#LIVER HEMANGIOSARCOMA	(50)	(50) 3 (6%)	(49)
DIGESTIVE SYSTEM			
#LIVER HEPATOCELLULAR ADENOMA HEPATOCELLULAR CARCINOMA MIXED HEPATO/CHOLANGIO CARCINOMA	(50) 3 (6%) 11 (22%)	(50) 6 (12%) 8 (16%) 1 (2%)	(49) 4 (8%) 7 (14%)
#PYLORUS Adenomatous Polyp, Nos	(49)	(49)	(48) 1 (2%)
#CECUM LEIDMYOSARCOMA	(43)	(48) 1 (2%)	(47)
URINARY SYSTEM			
#KIDNEY Tubular-cell Adenocarcinoma	(50)	(50) 1 (2%)	(47)
#U. BLADDER/MUCOSA LEIOMYOMA	(48)	(50) 1 (2%)	(46)

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

	CONTROL	LOW DOSE	HIGH DOSE
ENDOCRINE SYSTEM			
#ADRENAL Pheochromocytoma, malignant	(49)	(50)	(46) 1 (2%)
#THYROID C-CELL CARCINOMA PAPILLARY CYSTADENOMA, NOS	(50)	(50)	(47) 1 (2%)
REPRODUCTIVE SYSTEM			
*MAMMARY GLAND Adenocarcinoma, nos	(50)	(50)	(49) 1 (2%)
*EPIDIDYMIS CARCINOMA,NOS	(50) 1 (2%)	(50)	(49)
NERVOUS SYSTEM None			
SPECIAL SENSE ORGANS			
*HARDERIAN GLAND Adenoma, Nos	1 (2%)	(50)	(49)
MUSCULOSKELETAL SYSTEM None			
BODY CAVITIES			
NONE			
ALL OTHER SYSTEMS			
*MULTIPLE ORGANS MIXED HEPATO/CHOLANGIDCA, METAST	(50)	(50)	(49)
# NUMBER OF ANIMALS WITH TISSUE EXAMI * NUMBER OF ANIMALS NECROPSIED	NED MICROSCOPI	CALLY	

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	CONTROL	LOW DOSE	HIGH DOSE
SARCOMA, NOS			1 (2%)
LEG NEUROFIBROSARCOMA	1		
NIMAL DISPOSITION SUMMARY			
ANIMALS INITIALLY IN STUDY NATURAL DEATHƏ MORIBUND SACRIFICE SCHEDULED SACRIFICE ACCIDENTALLY KILLED TERMINAL SACRIFICE	50 6 5 33	50 5 2 43	50 4 5 4 1
ANIMAL MISSING INCLUDES AUTOLYZED ANIMALS			
UMOR SUMMARY			
TOTAL ANIMALS WITH PRIMARY TUMORS* Total Primary Tumors	33 42	26 4 1	26 34
TOTAL ANIMALS WITH BENIGN TUMORS Total Benign Tumors	10 12	13 15	10 12
TOTAL ANIMALS WITH MALIGNANT TUMORS Total malignant tumors	27 30	18 26	20 22
TOTAL ANIMALS WITH SECONDARY TUMORS Total Secondary Tumors	# 2 2	2 2	6 6
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 ORGA

TABLE B2.

SUMMARY OF THE INCIDENCE OF NEOPLASMS IN FEMALE MICE FED DIETS CONTAINING D-MANNITOL

	CONTROL	LOW DOSE	HIGH DOSE
ANIMALS INITIALLY IN STUDY Animals necropsied Animals examined histopathologically	50 48 48	50 48 48	50 49 49
INTEGUMENTARY SYSTEM			
*SKIN Squamous cell papilloma Squamous cell carcinoma Basal-cell carcinoma	(48) 1 (2%) 1 (2%) 1 (2%)	(48)	(49)
*SUBCUT TISSUE Rhabdomyosarcoma	(48)	(48) 2 (4%)	(49)
RESPIRATORY SYSTEM			
#LUNG CARCINOMA, NOS, METASTATIC ALVEOLAR/BRONCHIOLAR ADENOMA ALVEOLAR/BRONCHIOLAR CARCINOMA	(48) 1 (2%) 2 (4%)	(48) 1 (2%) 1 (2%)	(49) 1 (2%) 1 (2%)

-

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

	CONTROL	LOW DOSE	HIGH DOSE
HEMATOPOIETIC SYSTEM			
#BRAIN Malignant Reticulosis	(48)	(48)	(49) 1 (2%)
*SPINAL CORD Malignant Reticulosis	(48)	(48)	(49) 1 (2%)
*CAUDA EQUINA Malignant reticulosis	(48)	(48)	(49) 1 (2%)
*MULTIPLE ORGANS MALIGNANT LYMPHOMA, NOS MALIG.LYMPHOMA, LYMPHOCYTIC TYPE MALIG.LYMPHOMA, HISTIOCYTIC TYPE MALIGNANT LYMPHOMA, MIXED TYPE LYMPHOCYTIC LEUKEMIA	1 (2%)	(48) 1 (2%) 2 (4%) 4 (8%) 2 (4%) 2 (4%)	
#SPLEEN Malig.lymphoma, lymphocytic type Malignant lymphoma, mixed type	(48) 1 (2%) 1 (2%)	(47)	(48)
#MANDIBULAR L. NODE Malig.lymphoma, histiocytic type	(48) 1 (2%)	(47)	(48)
<pre>#ILIAC LYMPH NODE LEIOMYOSARCOMA, INVASIVE</pre>	(48) 1 (2%)	(47)	(48)
#AXILLARY LYMPH NODE Rhabdomyosarcoma, metastatic	(48)	(47) 1 (2%)	(48)
#LIVER Malig.lymphoma, histiocytic type	(48)	(48) 1 (2%)	(49)
<pre>#PEYER'S PATCH Malig.lymphoma, lymphocytic type</pre>	(47)	(42) 1 (2%)	(44)

TABLE B2. FEMALE MICE: NEOPLASMS (CONTINUED)

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

KIN HEMANGIOMA DNE MARROW HEMANGIOSARCOMA PLEEN HEMANGIOSARCOMA IVER HEMANGIOSARCOMA TERUS HEMANGIOSARCOMA	CONTROL	LOW DOSE	HIGH DOSE
CIRCULATORY SYSTEM			
*SKIN Hemangioma	(48)	(48) 1 (2%)	(49) 1 (2%)
#BONE MARROW Hemangiosarcoma	(47)	(47) 1 (2%)	(47)
#SPLEEN HEMANGIOSARCOMA	(48)	(47)	(48) 1 (2%)
#LIVER HEMANGIDSARCOMA	(48)	(48) 1 (2%)	(49) 1 (2%)
#UTERUS HEMANGIOSARCOMA	(47)	(48)	(49) 1 (2%)
DIGESTIVE SYSTEM			
#LIVER	(48)	(48)	(49) 1 (2%)
	3 (6%)	1 (2%) 2 (4%)	1 (2%)

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

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	CONTROL	LOW DOSE	HIGH DOSE
ENDOCRINE SYSTEM			
#PITUITARY Adenoma, nos	(45)	(44) 2 (5%)	(47)
#ADRENAL Pheochromocytoma	(48)	(47)	(48) 1 (2%)
#THYROID Follicular-cell Adenoma Follicular-cell carcinoma	(46)· 1 (2%)	(48) 2 (4%)	(49) 1 (2%)
<pre>#PANCREATIC ISLETS ISLET-CELL CARCINOMA</pre>	(48)	(45) 1 (2%)	(45)
REPRODUCTIVE SYSTEM			
*MAMMARY GLAND Adenocarcinoma, Nos Intraductal carcinoma	(48) 1 (2%) 1 (2%)	(48) 1 (2%)	(49)
ADENOSQUAMOUS CARCINOMA ADENOCA/SQUAMOUS METAPLASIA MIXED TUMOR, MALIGNANT	1 (2%) 3 (6%)	1 (2%)	
#UTERUS LEIOMYOSARCOMA	(47) 1 (2%)	(48)	(49)
#OVARY LUTEOMA	(44)	(44) 1 (2%)	(46)
ERVOUS SYSTEM			
#BRAIN EPENDYMOMA	(48) 1 (2%)	(48)	(49)
PECIAL SENSE ORGANS			
<pre>*HARDERIAN GLAND CARCINOMA,NOS ADENOMA, NOS CYSTADENOMA, NOS</pre>	(48)	(48)	(49) 1 (2%) 1 (2%) <u>1 (2%)</u>

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

	ONTROL	LOW DOSE	HIGH DOSE
MUSCULOSKELETAL SYSTEM			
*FEMUR OSTEOSARCOMA	(48) 1 (2%)	(48)	(49)
BODY CAVITIES			
NONE			
ALL OTHER SYSTEMS			
*MULTIPLE ORGANS SARCOMA, NOS	(48)	(48)	(49)
ANIMAL DISPOSITION SUMMARY			
ANIMALS INITIALLY IN STUDY NATURAL DEATHƏ MORIBUND SACRIFICE SCHEDULED SACRIFICE	50 5 10 5	50 9 3	50 12 3
ACCIDENTALLY KILLED TERMINAL SACRIFICE ANIMAL MISSING	30	38	1 34
a INCLUDES AUTOLYZED ANIMALS			

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

	CONTROL	LOW DOSE	HIGH DOSE
TUMOR SUMMARY			
TOTAL ANIMALS WITH PRIMARY TUMORS* Total primary tumors	26 33	24 31	18 23
TOTAL ANIMALS WITH BENIGN TUMORS Total benign tumors	3 3	4 6	6 7
TOTAL ANIMALS WITH MALIGNANT TUMORS Total malignant tumors	24 29	21 25	14 16
TOTAL ANIMALS WITH SECONDARY TUMORS Total Secondary Tumors	‡ 1 1	1 1	1 1
TOTAL ANIMALS WITH TUMORS UNCERTAIN- Benign or Malignant Total Uncertain Tumors	- 1 1		
TOTAL ANIMALS WITH TUMORS UNCERTAIN- Primary or metastatic Total uncertain tumors			
PRIMARY TUMORS: ALL TUMORS EXCEPT SE Secondary Tumors: Metastatic tumors			ADJACENT ORGAN

TABLE B3.

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

CONTROL

ANIMAL NUMBER	0	0	0	0	0	0	0	0	0	0	0	0	0	1	0	0	?	6	0	0	0	0	0	0	0 2
WEEKS ON	- 1		- 3		-	- i	7	8		ġ			4	4	\$	6	귀	81	-	2	2	22074	23	2	
STUDY	9	0	0	ġ	0	04	6	9	0	0	6	0	0	0	0	0	0	9	0	8	5	7	0	0	0 5
INTEGUMENTARY SYSTEM																									
SUBCUTANEDUS TISSUE Sarcoma, nos Fibroma Fibrosarcoma	•	٠	•	+	+	+	٠	+	+	+	+	+	+	•	•	+	+	•	+	•	+	+	+	•	+
RESPIRATORY SYSTEM																									-
LUNGS AND BRONCHI UNDIFFERENTIATED CARCINOMA HEFATOCELULAR CARCINOMA, METASTA Alvedlar/bronchiolar adendia Alvedlar/bronchiolar carcinoma	+ ×	+	+	+	+	+ _x	٠	+	+	+	* X	+ x	+ ×	+	•	•	+ ×	* ×	+	+	+	+	+	+	+
TRACHEA	+	+	÷	-	+	÷	+	-	+	-	-	-	-	+	-	-	÷	÷	-	+	-	÷	-	÷	-
HEMATOPOIETIC SYSTEM														_											
BONE MARROW	+	+	+	+	+	+	+	÷	+	+	÷	-	÷	+	+	+	÷	+	÷	-	+	÷	+	+	+
SPLEEN Hemangidsarcoma Malig.lymphona, histiocytic type .	+	+	+	+	+	•	-	+	+	+	+	+	+	+	+	+	+	•	+	+	+	+	+ ×	+	+
LYMPH NODES Malig.lymphoma, lymphocytic type Malighant lymphoma, mixed type	+	+	+	+	+	+	+	+	+	-	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+
THYMUS	-	-	+	÷	+	-	+	+	+	+	+	+	+	-	÷	+	÷	÷	+	+	+	+	٠	+	÷
CIRCULATORY SYSTEM	1																								
HEART	+	+	+	+	٠	+	+	+	+	+	+	+	+	+	+	÷	÷	+	+	÷	+	+	+	+	ŧ
DIGESTIVE SYSTEM																									
SALIVARY GLAND	+	+	+	<u>+</u>	+	+	+	+	+	÷	+	+	+	+	+	+	+	+	÷	+	+	+	+	+	+
LIVER HERATOCELLULAR ADENOMA	+	+	+	+	+	+	٠	٠	+	+	÷	+	* ×	+	+	+	+	+	+	+	+	+	+	÷	+
HEPATOCELLULAR ADENOMA HEPATOCELLULAR CARCINOMA	×	X													x	x		X							X
BILE DUCT	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+
GALLBLADDER & COMMON BILE DUCT	++	+	м	+	+	+	N	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+
PANCREAS	+	+	+	+	+	+	-	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+
ESOPHAGUS	+	+	+	•	+_	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	<u>+</u>	+
STOMACH	<u> </u> +-	+	+	+	+	+	-	+	•	+	+_	+	+	+	.+	+	+	+	+	+	+	+	<u>+</u>	+	•
SMALL INTESTINE	<u> </u> -	<u>+</u>	+	+	+	-*	-	+	+	+	+	+	+	+	+	+	+	-	+	+	+	+	+	+	_+ +
LARGE INTESTINE	+	+	+	+	+	+	+	+	+	_	-	+	+	+	+	*	*	-	•	+	+	*	+	+	+
URINARY SYSTEM																									
KIDNEY .	+	÷	÷	+	+	+	<u>.</u>	+	+	+	+	+	+ +	+	+	+	+ +	+	+	+	+	+	+	+	+
URINARY BLADDER	Ļ	+	+	+	-			*	•	•	-		<u> </u>	<u> </u>	-	<u> </u>			·				·		
ENDOCRINE SYSTEM	1.										+	÷	+	÷		1		_							
PITUITARY	<u> </u>		Ť			<u>,</u>			- <u>-</u>	+	+	+	+	+	+	+	+			<u>,</u>	÷			÷	
ADRENAL	+		. <u>.</u>	<u> </u>		- <u>*</u>	<u>•</u>	<u>,</u>	<u>.</u>	+ +	<u>,</u>	- <u>-</u> -	<u>.</u>	÷	- <u>-</u>		-		<u>.</u>	4	+	+			<u> </u>
PARATHYROID	-	•	<u>*</u>	- <u>*</u>	+	+	-	+	+	+	•	•	+	+	+	+	-			+	+		+	+	-
REPRODUCTIVE SYSTEM	ļ															<u> </u>	_								
MAMMARY GLAND	N	N	+	N	Ν.,	N	N	N	N	N	N	<u> </u>	N	N	N	N	Ν	N	N	N	N	н	N	N	N
TESTIS	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	÷	+	+	•	÷
PROSTATE	+	+	+	+	+	+	+	÷	+	+	t.	+	+	+	+	+	+	+	+	+	÷	+	+	÷	+
EPIDIDYMIS Carcinoma, Nos	N	H	N	N	N	N	N	N	N	N	N	N	н	N	H	N	N	N	N	н	н	N	N	N	N
IERVOUS SYSTEM	[-		_			
BRAIN	+	+	+	+	+	+	+	+	+	+	+	+	+	<u>+</u>	+	+	+	+	+	+	+	+	+	+	+
SPECIAL SENSE ORGANS																									
HARDERIAN GLAND ADEHOMA, NOS ALL OTHER SYSTEMS	N	м	N	H	н	н	N	N	N	N	N	N	N	N	н	N	N	н	м	N	н	N	н	н	N
MULTIPLE ORGANS NOS MALIG.LYMPHOMA, LYMPHOCYTIC TYPE MALIG.LYMPHOMA, HISTIOCYTIC TYPE MALIGANNI LYMPHOMA, MIXED TYPE	н	N	N	N	N	N	N	N	H	N	N	N	H X	н	N	N	H	N	N	N	N	N X	N	H	ĸ
UNDIFFERENTIATED LEUKEMIA	1																								

+: TISSUE EXAMINED MICROSCOPICALLY -: REQUIRED TISSUE NOT EXAMINED MICROSCOPICALLY X: TUNOR INCIDENCE H: MECROPSY, NO AUTOLYSIS, NO MICROSCOPIC EXAMINATION

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

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

AN IMAL Number	2	0 2 7	2	29	0 3 0	0 3	3	3	0 3	0 3 5	036	0 3 7	038	0 3 9	4	0 4 1	0 4 2	4	044	045	4	4	4	4	5	TOTAS
WEEKS ON Study		1	8	1	1	0	3 2 0 9	1	1	11	11	1	8	8	0			1	1	5	6	7	8	1		TOTAL TISSUE Tumor
NTEGUMENTARY SYSTEM	6	6	61	6	6	6	51	Žİ.	6	6	6	š į	6	ŏ	3	91	<u>6</u>]	61	5	6	3	6	6	6	6	
SUBCUTANEDUS TISSUE Sarcoma, NOS Fibroma Fibrosarcoma	+	٠	٠	٠	+	+	+ x	+ ××	٠	+	N	·	•	* ×		+ x	+	·	÷	+	·	٠	+	+ ×	+	50
ESPIRATORY SYSTEM																					<i></i>				-	
LUNGS AND BRONCHI UNDIFFRENTIATED CARCINOMA HEPATOCELLULAR CARCINOMA, METASTA ALVEOLAR/BRONCHIOLAR ADENOMA ALVEOLAR/BRONCHIOLAR CARCINOMA	+	+ ×	+ x	÷	+	+ x	+	+	+	+	+	+	+	+	+	+	+	*	+	+	+	+	+ ×	+ x	•	50
TRACHEA	+	-	-	-	-	+	+	+	+	+	-	-	-	÷	+	÷	-	+	÷	-	+	-	-	-	-	25
EMATOPOIETIC SYSTEM	+																								-	
BONE MARROW	+	+	+	+	+	+	+	+	+	+	-	+	•	<u>t</u>	+	ŧ,	<u>+</u>	+	+	+	+	+	+	+	+	47
SPLEEN Hemangiosarcoma Malig.lymphoma, histiocytic type .	+	+	* ×	+	+	+	+	+	+	+	+	+	•	+	+ -	+	+	+	+	+	+	•	+	+	•	49
LYMPH NDDES Malig.lymphoma, lymphocytic type Malignant lymphoma, mixed type	+	+	+	+	+	+	•	*	•	+	+	+	+	•	+	+	+	+	+	+ x	+	+	+	+	+	49
THYMUS	+	+	+	+	-	+	÷	+	+	÷	+	÷	+ ·	+	+	+	-	-	-	+	-	+	+	+	+	41
IRCULATORY SYSTEM																									+	
HEART	+	+	+	+	+	+	+	+	+	+	+	+	+ ·	+	+	+	+	+	+	+	+	+	+	٠	+	50
IGESTIVE SYSTEM	1																								+	
SALIVARY GLAND	++	+	4	+	+	÷	+	+	+	+	+	÷	+	<u>+</u>	+	+	+	+	+	+	+	+	+	+	+	50
LIVER Hepatocellular Adenoma Hepatocellular carcinoma	+	+	×	+	×	+	+	•	+	+	+ x	+	+	+	+	•	+ x	+	+ ×	+	•	+ ×	+	+	+ ×	50
BILE DUCT	+	+	+	+	+	+	+	+	+	+	+	+	+ ·	+	+	÷	+	+	<u>+</u>	+	+	+	+	+	<u>+</u>	50
GALLBLADDER & COMMON BILE DUCT	+	+	+	+	+	+	+	+	+	ŧ	÷	+	+	•	+	•	+	÷	N	+	N	+	+	N	•	50
PANCREAS	+	+	+	+	+	+	+	+	+	÷	+	÷	+	<u>+</u>	+	<u>t.</u>	+	+	+	+	-	+	+	+	+	48
ESOPHAGUS	+	÷	÷	+	+	.+	+	+	÷	÷	+	+	+	t	<u>t</u>	<u>+</u>	•	÷	÷	+	÷	+	+	+	+	50
STOMACH	+	+	+	+	+	+	+	÷	÷	+	÷	+	+	<u>+</u>	+	+	+	÷	+	÷	÷	+	+	+	4	49
SMALL INTESTINE	+	+	+	+	+	+	+	+	+	+	÷	+	+	+		+	+	ŧ	+	+	-	+	+	+	+	45
LARGE INTESTINE	+	+	-	+	+	+	+	+	+	+	+	+	+	ŧ	+	+	• .	÷	-	+	-	+	+	+	+	43
RINARY SYSTEM	1				_				• • • • •					_											-	
KIDNEY .	+	+	+	+	+	+	+	+	+	+	+	÷	+	<u>t</u>	+	+	+	+	ŧ	+	+	+	+	+	<u>+</u> -	50
URINARY BLADDER	+	+	+	+	+	+	+	+	+	+	+	+	+ ·	٠	+	+	+	+	+	+	+	+	٠	+	+	48
NDOCRINE SYSTEM																										
PITUITARY	+		-	+	-	+	+	+	+	+	+	<u>+</u>	<u>+</u>	<u> </u>	+	•		+	+	-	-	+	+	+	╧┝╴	42
ADRENAL	+	+	+	+		+	+	+	+	+	+	+	+ ·	+	+	<u>+</u>	±	<u>+</u>	+	+	+	+	•	.+	∔⊢	49
THYROID .	+ +	+	+	+	+	+	+	+	*	+	+	+	<u>+ ·</u>		+	+	+	+	+	. +	+	<u>+</u>	+	+	+	50
PARATHYROID	i +	+	-	+	-	-	+	-	+	+	-	-	+ ·	+	+ ·	-	+ -	+	-	+	-	+	+	+	-	34
EPRODUCTIVE SYSTEM				_																					T	
MAMMARY GLAND	<u>.</u> N	N	N	N	N	N	+	Ν	Ν.	<u>N</u>		N	N		+	<u>+ </u>	<u>4</u>	<u>N</u>	<u>N</u>	N	<u>N</u>	H	N	N	<u>N</u> -	50
TESTIS	+	+	+	+	+	+	+	+	+	+	+	+	+ +	_	+ -	<u>+</u>	<u>t</u>	+	+	+	+	<u>+</u>	+	+	<u>+</u>	50
PROSTATE	+	+	+	+	+	+	<u>+</u>						+ +		+		<u>+</u>	+	+		+	+	+	+	╧╂╴	50
EPIDIDYMIS Carcinoma, Nos	N	H	N	N	N	N	Ν		н Х	N	N	N	N I	4	NI	N I	N	N	N	N	N	н	н	N	М	50
ERVOUS SYSTEM	† -																								+	
DRAIN	+	+	+	÷	+	+	+	+	+	+	+	+	+ •	÷	+	÷	+	+	+	+	+	+	÷	+	+	50
PECIAL SENSE ORGANS																	• • •								- -	
HARDERIAN GLAND Adenoma, Nos	N	H	H	N	N	N	н	N	N	N	N	N	н 1	4	ו א	N	N I	N X	н	N	N	N	N	N	н	50
LL OTHER SYSTEMS MULTIPLE ORGANS NOS Malig.lymfhoma, lymphocytic type Malig.lymfhoma, mistigcytic type Malignant lymphoma, mixed type Undifferentiated Leuxemia	N	н	H	N	N	N	н	н	H	н	ж Х	н	н		н I х	4 1	н		N X	н	N	н	н	N	н	50
LEG NOS																										

LEG NOS <u>NEUROFIBROSARCOMA</u> * ANIMALS NECROPSIED

+: TISSUE EXAMINED MICROSCOPICALLY -: REQUIRED TISSUE NOT EXAMINED MICROSCOPICALLY X: TUMOR INCIDENCE N: HECROPSY, 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.

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

LOW DOSE

ANIMAL NUMBER		0	0	0	0	0	0	01	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	21	0
WEEKS ON	+ + + +	-1		-	-1	6	-7	-8		0	ᆊ	2 0 9	3	4	-5 -		7	8	- ?			-2	-3	-41	2
STUDY	8	0 5	0 5	91 81	0 5	0 5	0 5	81	5	0 5	0 5	6	0 5	0 5	8	5	0 5	0 5	0 51	01 5	0 5	0 5	0 5	5	0
SUBCUTANEOUS TISSUE	+	+	÷	+	+	+	÷	÷	÷	+	÷	N	+	+	÷	+	+	+	÷	+	+	+	÷	+	+
RHABDOMYOSARCOMA																									
RESPIRATORY SYSTEM																									
LUNGS AND BRONCHI Alveolar/Bronchiolar Adenoma Alvfolar/Brochiolar Carcinoma Tubular-Cell Adenocarcinoma, meta		+	•	+	* ×	*	+	* ×	+	×	+	+	+	+	+	+	*	+	×	+ x	×	+	+	×	+
TRACHEA	+	-	-	+	-	+	-	+	+	-	-	+	÷	٠	+	+	+	-	٠	-	-	+	-	-	-
HEMATOPOIETIC SYSTEM						_																			
BONE MARROW	<u> </u> +	+	+	+	+	+	+	+	+	+	+	-	+	+	+	+	+	+	÷	+	+	+	+	_ <u>+</u> _	+
SPLEEN HEMANGIOSARCOMA	+	+	+	+	+	+	+	+	+	+	+	-	+	+	+	+	+	+	+	٠	+	+	+	+	+
LYMPH NODES	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	٠	+	+	+	+	+	+	+	+	+
THYMUS	(+	+	+	+	-	+	+	+	+	+	+	-	-	-	+	+	+	+	+	+	-	+	+	+	+
CIRCULATORY SYSTEM					-							_							_		-				
HEART	+	+	+	٠	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+
DIGESTIVE SYSTEM	r –																~~~~								_
SALIVARY GLAND	+	+	+	+	+	+	+	+	+	<u>+</u>	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+
LIVER HEPATOCELLULAR ADENOMA	+	+	٠	+	+ x	* x	+	+	+	+	+	+	+	+	+	+	+	+	* x	+	+	٠	+	٠	+
HEPATOCELLULAR CARCINOMA Mixed Hepato/Cholangio Carcinoma Hemingiosarcoma Malig Lymphoma Histiocytic type				×	Ŷ	Î	×	x				×							î				×		
BILE DUCT			4		÷		+	÷		÷	4	4	4	÷		4		4					Ĵ		
GALLBLADDER & COMMON BILE DUCT	<u>+</u>	+	+	+	+	+	+	+	+	+	+	N	+	+	N	+	+	+	+	+	+	+	+	+	+
PANCREAS	+	+	+	+	+	+	+	+	+	+	+	-	+	+	+	+	÷	+	+	+	+	+	+	+	+
ESOPHAGUS	+	+	+	+	+	+	+	+	+	+	+	+	+	÷	+	+	+	+	+	+	•	•	+	+	+
STOMACH	+	+	+	+	+	+	+	+	+	+	+	_	+	+	+	+	+	+	+	+	+	+	+	+	+
SMALL INTESTINE Malig Lymphoma, Lymphocytic type	+	+	+	+	+	÷	+	+	÷	+	+	-	+	+	+	÷	+	+	÷	+	+	+	+	+	+
LARGE INTESTINE LEIOMYOSARCOMA	+	+	+	+	+	+	+	+	+	+	+	-	+	+	+	+	+	+	+	+	* X	+	+	+	+
URINARY SYSTEM	-																								
KIDNEY TUBULAR-CELL ADENDCARCINOMA	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	* x	+	+	+	+	+
URINARY BLADDER LEIOMYOMA	+	٠	٠	+	÷	٠	٠	+	+	+	+	÷	+	+	+	+	t	+	+	+	+	* x	٠	+	+
ENDOCRINE SYSTEM	<u> </u>																_			_					-
PITUITARY	+-	+	+	+	+		+	+	+	÷	+	-	÷	+	+	+	+	+	+	+	+	+	+	+	+
ADRENAL	+	+	+	+	+	+	+	+	<u>+</u>	+	+	. <u>t</u>	+	+	+	+	+	+	+	+	+	+	+	+	<u>+</u>
THYROID PAPILLARY CYSTADENOMA, NDS	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+
PARATHYRDID	- 1		-	-	+	-	-	+	÷	+	+	+	+	+	+	٠	+	+	÷		+	+	-	-	٠
REPRODUCTIVE SYSTEM					~~															_					_
MAMMARY GLAND	N	N	н	N	N	N	N	+	N	Ν.	<u>N</u>	м	N	+	н.	н	н.	н	н	н	N	Ν	N	н	N
TESTIS	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+
PROSTATE	÷ +	٠	٠	÷	٠	٠	+	+	+	+	+	+	÷	+	+	+	+	÷	+	+	+	+	+	+	٠
NERVOUS SYSTEM										-						-									
BRAIN	+	+	+	÷	+	٠	+	+	٠	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+
ALL OTHER SYSTEMS																				_					
MULTIPLE ORGANS NOS MIXED HEPATO/CHOLANGIOCA, METASTA MALIG LYMPHOMA LYMPHOCYTIC TYPE MALIGNANT LYMPHOMA, MIXED TYPE	н	N	N	H	N	N	N	N X	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N

×N

TISSUE EXAMINED MICROSCOPICALLY NO TISSUE INFORMATION SUBMITTED REQUIRED TISSUE NOT EXAMINED MICROSCOPICALLY C NECROPSY, NO HISTOLOGY DUE TO PROTOCOL TUMOR INCIDENCE NECROPSY, NO AUTOLYSIS, NO MICROSCOPIC EXAMINATION NO AUTOLYSIS, NO MICROSCOPIC EXAMINATION B NO NECROPSY PERFORMED

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

ANIMAL NUMBER	2	2	28	2	3	3	3	3	3	3		31	0	0 0 3 4 9 0	4	4	4	4	4	4	0 4 7	04		0 5 0 TOTA
WEEKS ON Study	0	0		0	1	0		8	0	2	1	1	0	1 1	1	0	1	01	1	6	0	0	11	TTISSU OL TUMO
INTEGUMENTARY SYSTEM			_21	- 21		0	2		21		21	21	21		- 21	- 21	-		-21	2	-2-1		- 41 -	
SUBCUTANEOUS TISSUE RHABDOMYOSARCOMA	N	+	×	+	+	+	+	+	+	N	٠	+	+ ·	• •	+	+	+	٠	٠	•	٠	٠	٠	+ 50
RESPIRATORY SYSTEM	1															-								1
LUNGS AND BRONCHI Alvedlar/Bronchidlar Adenoma Alvedlar/Bronchidlar Carcinoma Tubular-Cell Adenocarcinoma, meta	+	+	•	+	×	+	+	+	+	+ ×	+	+	×	• •	+	+	+	* ×	+	+ X	×	•	•	+ 50
TRACHEA	-	-	-	-	-	+	-	+	-	-	-	-			-	-	-	÷	÷		-	-	-	- 17
HEMATOPOIETIC SYSTEM																								
BONE MARROW	+	+	÷	+	+	+	+	+	+	-	+	+	• •	+ +	+	+	÷	÷	÷	÷	+	÷	÷	48
SPLEEN Hemangiosarcoma	+	+	+	+	+	+	+	* ×	+	•	+	+	+ +	• •	+	+	+	+	+	+	+	+	+	49
LYMPH HODES	+	+	+	+	+	+	+	÷	+	+	+ -	÷	• •		٠	. +	+	÷	٠	÷	÷	+	•	50
THYMUS	+	+	+	+	+	+	+	٠	+	÷	+	+	+ +	• +	٠	+	+	-	٠	+	+	+	+	43
CIRCULATORY SYSTEM																								
HEART	+	٠	+	+	÷	÷	+	+	٠	+	+ ·	+	+ •	+	٠	÷	÷	+	÷	+	+	٠	+	50
DIGESTIVE SYSTEM	<u> </u>																							1
SALIVARY GLAND	+	+	+	<u>.</u>	. <u>+</u>	+	.+	+	+	+	+ •	+	+ +	+	+	+	÷	+	+	+	+	+	+	50
	+	* x	+	٠	+	÷	+	+	+	+	+ •		*. *	+	٠	٠	+	+	+	÷	+	+	+	50
LIVER HEPATOCELLULAR ADENOMA HEPATOCELLULAR CARCINOMA MIXED HEPATOCHOLANGIO CARCINOMA HEMANGIOSARCOMA MALIG.LYMPHOMA, HISTIOCYTIC TYPE		Ŷ	x		×	x				×	3		Ŷ×											
BILE DUCT	•	+	+	÷	÷	+	+	+	•	•		÷		•	٠	+	•	+	÷	•	÷	•	+ .	50
GALLBLADDER & COMMON BILE DUCT	+	+	+	+	+	+	•	N	+	N	+ •	+	+ +	+	+	+	+	+	+	+	•	+	+ -	50*
PANCREAS	+	+	+	+	+	+	+	÷	+	+	+ +	•	+ +	+	+	+	+	+	+	÷	+	+	+ •	49
ESOPHAGUS	+	+	+	÷	+	+	+	+	+	+	++	+	• •	+	+	+	+	+	÷	÷	+	÷	• •	50
STOMACH	+	+	+	+	+	+	+	+	+	+	+ +	•	+ +	+	÷	+	+	÷	+	+	+	•	+ .	49
SMALL INTESTINE Malig.lymphoma, lymphocytic type	+	+	+	+	+	-	+	-	+	+ ×	+ +	•	• •	+	+	+	+	+	+	+	+	÷	+ •	47
LARGE INTESTINE LEIOMYDSARCOMA	+	÷	+	÷	+	+	+	-	+	+	+ +	•	+ +	+	+	+	÷	÷	+	÷	÷	÷	•	48
IRINARY SYSTEM																								1
KIDNEY Tubular-Cell Adenocarcinoma	+	+	+	+	+	+	+	+	+	•	+ +	• •	• •	+	•	+	•	•	+	+	+	+	+ +	50,
URINARY BLADDER LEIOMYOMA	+	+	+	+	+	+	+	•	•	•	• •	•	• •	+	٠	+	+	+	٠	+	÷	+	+ •	50,
NDOCRINE SYSTEM																			•					<u> </u>
PITUITARY	+	+	+	•	+	•	+	+	+ -	, .	+ +		• •	+	+	-	+	•	•	•	•	+	• •	47
ADRENAL	+	+	+	•	+	+	+	+	+	•	• •		• •	+	+	•	+	+	+	+	+	•	+ +	50
THYROID Papillary Cystadenoma, Nos	+	+	+	* x	+	+	+	+	+	•	• •		• •	+	٠	+	+	+	+	÷	+	÷	• •	50,
PARATHYROID	-	+	+	-	-	+	+	÷		, .				-	-	-	_	+	÷	+	÷	÷	+ -	28
EPRODUCTIVE SYSTEM																								l
MAMMARY GLAND	N	N	н	N	N	N	N	+	н 1		N N	.,	N N	N	Ν.	н	N	Ν.	N	N	н	H.	н н	50*
TESTIS	•	+	+	÷	+		+		+ .				• •	+	+	+	+	+	+	+	+	+	+ +	49
PROSTATE	+	÷	÷	÷	+	÷	÷	+	+ •		• •		• •	÷	+	+	÷	÷	+	•	÷	÷	+ +	50
ERVOUS SYSTEM												_												
BRAIN	•	٠	+	+	+	+	٠	+				•	• •	+	+	+	÷	+	•		+	+		50
LL OTHER SYSTEMS																								
MULTIPLE ORGANS NOS Mixed Hepato/Cholangidca, metasta Malig.lymphoma, lymphocytic type Malignant lymphoma, mixed type		н Х	N	N	N	N	н	н	N 1		8 N	•	4 H	N	N	N	N	н	N	4 1	N	N	н н	50× 1

* ANIMALS NECROPSIED

+: TISSUE EXAMINED MICROSCOPICALLY -: Required Tissue not examined microscopically X: Tumor Incidence N: Hecropsy, 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.

•

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

ANIMAL		0	0	0	0	0	0	0	0	01	0	0	0 1	0	0	0	0	0	0	0	2	0 2 2	21	21
WEEKS ON	$\left \right $	2	3	-	5	6		-	9	0	⊹⊦	-	-3	4	-	61	7	-	9	-	2	11	31	4
STŪDÝ	4	4	4	0 4	0 4	4	4	4	3	4	4	4	7	4	4	0 4	81	4	81	4	4	0 4	4	9
INTEGUMENTARY SYSTEM																						÷	+	
SKIN NEURILEMOMA, MALIGNANT	+	+	×	+	ċ	+	N	+	+	+	+	+	+	+	+	•	N	+	A	+	+	•	•	N
ESPIRATORY SYSTEM		-																						
LUNGS AND BRONCHI Hepatocellular Carcinoma, metasta Alveolar/Bronchiolar Adenoma Alveolar/Bronchiolar Carcinoma Pheochromocytoma, metastafic	* ×	+	+	+	•	+	+ x	•	×	+	+ ×	*	+	+	+	+	* ×	* ×	A	+	+	+	* ×	•
TRACHEA	+	-	+	-	+	-	-	٠	+	-	-	+	+	-	-	-	+	-	A	-	-	-	-	+
EMATOPOIETIC SYSTEM													-							_				
BONE MARROW	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	A	+	+	+	+	+
SPLEEN Malig.lymphoma, lymphocytic type	+	+	+	+	+	+	+	+	+	*	+	+	-	+	+	+	+	+	A	+	+	+	+	+
LYMPH NODES	+	+	+	+	<u>+</u>	+	+	+	+	+	+	+	-	+	+	+	+	÷	A	+	+	+_	÷	+
THYMUS	+	+	-	-	2	-	+	-	+	+	+	٠	-	+	÷	+	+	-	A	+	+	٠	٠	+
IRCULATORY SYSTEM	<u> </u>						-																	
HEART	+	٠	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	A	+	+	+	٠	+
IGESTIVE SYSTEM											_													
SALIVARY GLAND	+	+	+	+	+	+	+	+	+	+	+	+	-	+	+	+	+	+	A	+	+	+	+	+
LIVER Hepatocellular adenoma Hepatocellular carcinoma	•	•	×	•	+ x	+	+	+	+ x	+	+	+ x	+	+	+	+	+	×	A	×	+	+	+	×
BILE DUCT	+	+	+	+	+	+	+	+	٠	+	+	+	+	+	+	+	+	+	Ą	٠	٠	٠	٠	+
GALLBLADDER & COMMON BILE DUCT	+	+	+	<u>N</u>	+	+	N	+	N	+	+	+	N	+	+	+	N	N	A	+		+	N	+
PANCREAS .	<u> +</u> -+	+	+	+	+	+	+	+	+	+	+	+		+	+	+	-	+	A	+	+	+	+	<u>+</u>
ESOPHAGUS	++	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	A	+	+	+	*	+
STOMACH Adenomátous Pólyp, nos	+	+	+	+	+	+	+	+	+	+	+	+	-	+	+	+	+	+	<u>^</u>	×	+	+	+	+
SMALL INTESTINE	+	+	+	+	+	+	+	+	+	+	+	+	-	+	+	+	+	+	A	+	+	+	+	+
LARGE INTESTINE	+	+	+	÷	+	+	+	+	+	+	+	+	-	+	+	+	+	٠	A	+	+	+	+	+
IRINARY SYSTEM																	_							
KIDNEY	+	+	+	<u>+</u>	+	+	+	<u>+</u> .	+	+	. <u>+</u>	+	-	+	+	+	+	+	A	÷	+	+	+	+
URINARY BLADDER	+	+	÷	+	+	+	+	-	+	+	+	+	-	+	+	+	٠	+	A	÷	+	+	+	+
NDOCRINE SYSTEM		-																						
PITUITARY .	-	+	+	÷	+	-	<u>+</u>	+	+	+	+	+	~	+	*	+	+	+	A	+	+	+	+	+
ADRENAL Pheochromocytoma, Malignant	+	+	+	+	+	+	+	+	+	+		+	+	+	+	+	+	+	A	+	+	+	+	+
THYROID C-CELL CARCINOMA	+	+	+	+	+	+	+	+	+	+	+	+	-	+	+	+	+	+	A	+	+	+	+	+
PARATHYROID	+	+	+	-	+	-	+	٠	-	-	4	-	-	+	÷	-	-	-	A	-	-	÷	+	÷
REPRODUCTIVE SYSTEM																			-					
MAMMARY GLAND Adenocarcinoma, NOS	N	н	N	N	N	N	N	N	н	N	N	N	N	N	H	N	N	N	A	N	N	N	N	N
TESTIS	+	+	+	+	+_	÷	÷	+_	+	+_	+	+	+	+	+	+	+	+	A	+	+	+	+	+
PROSTATE	+	+	٠	+	+	+	+	+	+	+	+	+	-	+	+	+	+	+	A	+	+	+	+	+
NERVOUS SYSTEM	+		_																					
BRAIN	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	A	+	٠	+	+	٠
LL OTHER SYSTEMS	-			•																				
MULTIPLE DRGANS NOS Sarcoma, NOS Hemangiosarcoma Malignant Lymphoma, NOS Malig.Lymphoma, Lymphocytic Type Malig.Lymphoma, Histiocytic Type	N	N	N	H	N	н	н	н	N	H	N	N	N X	N	н	N	××	N	A	H	N	н	N	N X
MALIG.LYMPHOMA. HISTIGCYTIC TYPE +: TISSUE EXAMINED MICROSCOP -: REQUIRED TISSUE NOT EXAMI X: TUMOR INCIDENCE N: NECROPSY, NO AUTOLYSIS, N	ICAI NED	MI MI ICR	CRO	5C0 0P1	PIC. C E	ALLI XAMI	([NA"	101		_	с: А: В:	AL	TI CRO ITOL IMA NE	YSI 1 M	5	TNG				DUR	117: E TC	PF	1010	00

HIGH DOSE

.

ÁNÍMAL NUMBER	2	21	2	0 2 9	0 3 0	3	3	0	0 31 4	3	0 3 6	0 3 7	0 3 8	0 3 9	0 4 0	4	042	047	0 4 4	4	4	0 4 7	4	0 4 9	0 5 0	TOTAL
WEEKS ON Study	0	0	8	0	1	0	2	3	0	9	1	8	1	0	0	0	0	1	0	1	6 1 0	0	8	1	1	TISSUE
INTEGUMENTARY SYSTEM					- 1						- 1									7.1				. 7 1	-1	
SKIN NEURILEMOMA, MALIGHANT	+	+	+	+	+	+,	+	N	+	+	+	+	+	+	+	+	N	+	+	٠	N	+	+	+	+	49× 1
RESPIRATORY SYSTEM																										
LUNGS AND BRONCHI HEPATOCELLULAR CARCINOMA, METASTA Alveolar/Bronchiolar adenoma Alveolar/Bronchiolar carcinoma Pheochromocytoma, metastatic	+ ×	+	+	٠	+ ×	+	+	+ ×	* x	+ x x	+	+	+	•	*	+	+	+	+	+	* x	+	+	+ x	+	49 5 4 1
TRACHEA	-	+	+	+	-	-	-	-	+	+	+	÷	-	-	-	-	-	-	-	-	+	-	÷	-	-	18
HEMATOPOIETIC SYSTEM														•												
BONE MARROW	+	+	+	+	+	+	+	-	÷	+	+	+	+	+	+	-	-	+	+	+	+	+	+	+	+	46
SPLEEN Malig.lymphoma, lymphocytic type .	+	+	+	+	+	•	+	+	+	-	+	+	+	+	•	+	+	+	+	+	+	+	+	+	+	47
LYMPH NODES	+	+	+	+	+	+	+	-	+	+	+	+	+	+	+	+	+	+	+	+	+	+	÷	+	_+	47
THYMUS	+	+	+	-	+	+	+	÷	+	+	+	+	+	÷	+	+	+	+	+	+	٠	٠	+	+	+	40
CIRCULATORY SYSTEM																									-	
HEART	+	+	+	+	+	+	+	+	+	+	٠	÷	+	÷	+	÷	+	+	+	+	+	+	÷	+	+	49
DIGESTIVE SYSTEM																									+	
SALIVARY GLAND	+	+	+	+	÷	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	•	+	+	4.8
LIVER HEPATOCELLULAR ADENOMA HEPATOCELLULAR CARCINOMA	+	+	+	+	+	÷	+	+	+	+	+	÷	+	+	+	+	+	+	+	+	+	+	÷	+	+	49 4
BILE DUCT		+	+	+	•	+		^ +	^ +	+	+	+	÷	+	<u>^</u>	+		1			+		+	+	1	49
GALEBLADDER & COMMON BILE DUCT]]	T L		Ţ		Ţ		Ţ		T N	T N		*		+	Ŧ N	Ţ	Ţ	Ţ	Ţ	Ţ	Ţ	Ţ]	49
PANCREAS	+	<u></u>	<u> </u>	<u>,</u>	<u>,</u>	<u>.</u>	• •	<u>.</u>	<u>,</u>	<u>n</u>	<u> </u>			I		<u>м</u> .	-	<u> </u>	<u>-</u>	<u>+</u>	<u></u>	<u>+</u>	<u>+</u>	<u>,</u>	-	49.
ESOPHAGUS	, T		-	1	* •				-	. <u>*</u>	<u>,</u>	+	- <u>-</u>	+	÷	+	-	- <u>-</u>	<u> </u>	<u> </u>	-	<u>,</u>	•	<u> </u>	Ť	47
STOMACH ADENOMATOUS POLYP, NOS	+	+	+	+	+	+	+	+	+	+				+			+	+	+	÷	+	+	+	+	+	48
SMALL INTESTINE	+	+	-	+	÷	÷	÷	+	+	+	+	+ .		÷	+	÷	÷	+	+	+	+	+	+	+	+	47
LARGE INTESTINE	+	+	-	+	+	+	÷	+	+	+	+	+	+	+	+	÷	+	+	+	+	+	+	+	+	+	47
JRINARY SYSTEM														-				• •	• • •						-	
KIDNEY	+	÷	+	+	÷	+	+	+	+	÷	+	+	÷	÷	+	+	-	+	÷	+	÷	+	÷	÷	+	47
URINARY BLADDER	+	÷	÷	+	+	+	+	+	+	+	+	+	÷	+	+	÷	-	+	÷	+	+	÷	+	÷	+	46
ENDOCRINE SYSTEM																									1	
PITUITARY	+	+	+	+	÷	+	+ .	+	÷ .	<u>+</u> .	+	÷	+	+	+	+	+	+	-	+	+	+	+	+	+	44
ADRENAL Pheochromocytoma, Malignant	+	+	+	+	-	+	+	+	+	* X	+	+	-	+	+	+	-	+	+	+	+	+	+	+	+	46
THYROID C-CELL CARCINOMA	+	+	-	+	+	+	+	•	+	+	+	+	+	+	*	+	+	+	+	+	+	+	+	+	+	47
PARATHYROID	+	+	-	+	+	-	-	+	+	+	+	+	-	÷	-	+	-	-	-	-	-	-	+	+	+	27
EPRODUCTIVE SYSTEM																									-+	
MAMMARY GLAND Adengcarcinoma, nos	н	N	H	N	N	N	N	H	N	H	H ·	+	N	н	N	N	N	N	N	N	N	N	* x_	H	н	49× 1
TESTIS	+	+	+	-	+	+	+	+	÷	+	+	+	<u>+</u>	+	+	+		+	+	+	+	+	÷	+	+	47
PROSTATE	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	-	+	+	+	+	+	+	+	+	47
ERVOUS SYSTEM																									T	
BRAIN	+ .	+.	+	+	+	+ .	+ .	+	+	+	+ ·	+	+ ·	+	+	+	+	+	+	+	+	+	+	+	<u>+</u>	49
IL OTHER SYSTEMS																									T	
MULTIPLE ORGANS NOS Sarcoma, nos Henangiosarcoma Maligaly Lynphoma, nos Maligalymphoma, lymphocytic type Maligalymphoma, histiocytic type	н		× ×	н	н	н	N	N	H	н	NI	N	N	ч	н		X	N	N	N	H	N	N	N	н	49× 1 2

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

* ANIMALS NECROPSIED

+: TISSUE EXAMINED MICROSCOPICALLY -: REQUIRED TISSUE NOT EXAMINED MICROSCOPICALLY X: TUMOR INCIDENCE N: MECROPSY, NO AUTOLYSIS, NO MICROSCOPIC EXAMINATION H: MECROPSY, NO AUTOLYSIS, NO MICROSCOPIC EXAMINATION H: MORE AND AUTOLYSIS, NO MICROSCOPIC EXAMINATION H: MORE AND AUTOLYSIS, NO MICROSCOPIC EXAMINATION H: MORE AND AUTOLYSIS, NO MICROSCOPIC EXAMINATION H: MORE AND AUTOLYSIS, NO MICROSCOPIC EXAMINATION H: MORE AND AUTOLYSIS, NO MICROSCOPIC EXAMINATION H: MORE AND AUTOLYSIS, NO MICROSCOPIC EXAMINATION H: MORE AND AUTOLYSIS, NO MICROSCOPICALLY H: MORE AND AUTOLYSIS AUT

TABLE 84.

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

CONTROL

ANIMAL NUMBER	0	0	0	0	0	0	0 0 7	0 0 8	0	1	1	2	1	1	1	11	1	1	0	20	2	22	231	2	_
WEEKS ON STUDY	0	-	3	3	0	31	3	0	9	1	1	1	귀	4	5	6	-71	1	0	1	1	1	-1	-	
INTEGUMENTARY SYSTEM	4	- 41	41	41	4	21	61	61	8	<u>61</u>	6	6	61	6	-31	3	61	_61	6	_61	61	6	.61	61	_(
SKIN Squamous Cell Papilloma Squamous Cell Carcinoma Basal-Cell Carcinoma	+	* X	н	.+	٠	+	+	+	•	+	н	+	•	+	۸	+	٠	+	٠	+	٠	+	N	٠	
RESPIRATORY SYSTEM	 					<u> </u>														_					
LUNGS AND BRONCHI Alveolar/Bronchiolar Adenoma Alveolar/Bronchiolar Carcinoma	+	*	+	+	*	+	+	+	+	+ x_	+ _x	+	+	+	A	+	+	+	+	+	+	+	+	+	
TRACHEA	-	÷	-	-	-	+	-	+	÷	+	-	-	-	÷	A	÷	÷	-	÷	٠	-	+	+	+	
HEMATOPOIETIC SYSTEM	\vdash																			-					-
BONE MARROW	+	+	-	+	+	+	+	÷	+	+	+	+	+	+	A	+	+	+	+	+	+	+	+	+	_
SPLEEN Malig.lymphoma, lymphocytic type Malignant lymphoma, mixed type	+	+	+	+	+	+	+	+	+	+	+ x	+	+	•	A	+	+	+	+	+	+	+	+	+	
LYMPH NODES Leiomyosarcoma, invasive Malig.lymphoma, histiocytic type .	+	+	+	+	+	+	+	+	+	+	+	+	•	+	A	+	+ '	•	+	+	+ x_	+	+	+	
THYMUS	+	+	+	÷	÷	+	+	÷	+	٠	٠	÷	+	÷	A	+	-	+	+	-	+	÷	+	+	
CIRCULATORY SYSTEM	t—																								-
HEART	+	÷	٠	+	÷	+	÷	+	+	+	+	٠	+	+	A	٠	+	+	+	+	+	+	+	+	
DIGESTIVE SYSTEM	t								_															_	-
SALIVARY GLAND	+-	+	+	+	+	+	+	+	+	+	<u>+</u>	+	<u>+</u>	+	A	<u>+</u>	+	+	*	+	<u>+</u>	+	+	+	_
LIVER Hepatocellular carcinoma	+ ×	+	+	+	+	+	+	+	+	+	+	٠	+	+	A	+	٠	+	+	+	+	+	+	*	
BILE DUCT	1î	÷	+	÷	+			1		+	+				A	÷	÷	•	+	÷	÷	+	+	+	
GALLBLADDER & COMMON BILE DUCT	N	+	+	+	+	N	+	+	•	+	+	N	+	+	A	+	+	+	+	+	N	÷	+	+	-
PANCREAS	1		•	•	+	+	+	+	+	+	+	+	+	+		+	+	+	+	+	+	+	+	+	
ESOPHAGUS		_ <u>`</u> _		+	+			+	+	+	+	+	+	+	4	+	+	+	+	+	+	+	+	+	
STOMACH	+	_ <u>.</u>	+	+	+	+	÷	+	+	+	+	+	+	+	A	+	+	+	+	+	+	+	+	+	
SMALL INTESTINE	†÷	_ <u>+</u>	+	<u>_</u>				<u> </u>		÷	i		+	+		+	•	+	+	+	+	+	+	+	-
LARGE INTESTINE	+	_ <u>`</u> _	+	+	+	+	÷	+	+	+	+	+	+	+	A	+	+	+	+	-	+	-	+	+	
JRINARY SYSTEM	-			-																	-				_
KIDNEY	+	+	+	÷	•	+	÷	+	÷	+	+	÷	+	÷	A	+	÷	÷	÷	÷	÷	÷	+	÷	
URINARY BLADDER	+	+	+	+	+	_	+	+	+	+	+	+	+	+	A	+	+	+	÷	+	+	+	+	+	,
ENDOCRINE SYSTEM																					•				_
PITUITARY	+	+	+	+	÷	÷	÷	+	÷	-	+	+	+	÷	Α.	+	+	÷	÷	+	÷	+	+	+	
ADRENAL	+	+	+	+	+	+	+	+	+	+	+	+	+	÷	A	+	÷	÷	+	+	÷	+	+	÷	
THYROID Follicular-Cell Adenoma	+	+	+	+	+	÷	-	+	÷	+	+	+	+	+	A	+	+	+	+	+	+	-	+	+	
PARATHYROID	+	-	+	+	+	-	-	٠	-	+	+	+	-	-	A	+	-	-	+	÷	+	-	÷	ŧ	
REPRODUCTIVE SYSTEM																		_						_	-
MAMMARY GLAND Adenocarcinoma, nds Intraductal carcinoma Adenosquamous carcinoma Mixed Tumor, malighant	+ x	+	N	+	+	+	+	٠	+	+	+	+	+	٠	٨	+	٠	н	+	+	+	+	н	+	
MIXED TUMOR, MALIGHANT	+						+	•	+	+	×	+	+	+	A	×	+	•	+	+	•	+	+	+	_
LEIGMYGSARCOMA	├		-		<u> </u>			-														-		•••••	_
OVARY	+	+	•+	+	*	-	+	+	+	+	+	+	+	+	A	+	+	+	+	+	+	+	+	<u>+</u>	_
IERVOUS SYSTEM																						L.			
BRAIN EPENDYMOMA	+	+	*	+	+	+	+	+	*	+	+	+	+	*	A	+	•	•	*	•	•	Ŧ	•	*	
USCULOSKELETAL SYSTEM															-										-
BONE OSTEDSARCOMA	N	N	N	N	N	N	N	N	N	N	N	N	N	H	A	N	N	N	H	N	N	N	н	N	1
ALL OTHER SYSTEMS																									
MULTIPLE ORGANS NOS Malig.lymphoma, lymphocytic type Malig.lymphoma, histiocytic type Malignant lymphoma, mixed type	N	N	н	×	N	×	н	H	N X	N	H	N	×	N X	A	н	×	н	н	н	N	N	м отос	H	

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

" NU LISSUE INFURMATION SUBMITTED C: Necropsy, no histology due to protocol A: Autolysis M: Antmal Missing B: No Necropsy Performed

TABLE B4. FEMALE MICE: TUMOR PATHOLOGY (CONTINUED) CONTROL

ANIMAL NUMBER	2	0 2 7	2	2	0 3 0	3	3	3	3	3	3	0 3 7	3	3	0 4 0	4	947	0 4 3	0	945	4	4	4	4	5	TOTAL
WEEKS ON Study	1	i		9	8	3	1	3	9	1	0	1	8	1	1		2 0 9	0	1	5	-6 -1 0	7	8	-9	0	TISSUE
INTEGUMENTARY SYSTEM	6	ž	ě	<u>.</u>	51	žİ.	6	il	ś	ě!	6	6	4	61	61	6	61	<u>il</u>	š	ěİ.	4	6	6	6	6	
SKIN SQUAMOUS CELL PAPILLOMA SQUAMOUS CELL CARCINOMA BASAL-CELL CARCINOMA	+	+	+	+	٠	+	+	٠	ŧ.	+	A	٠	+	+	* x	+	+	٠	÷	÷	+	+	÷	٠	+ X	48× 1 1
RESPIRATORY SYSTEM	+																								-	
LUNG5 AND BRONCHI Alveolar/Bronchiolar Adenoma Alveolar/Bronchiolar Carcinoma	ŀ	+	+	+	+	+	+	+	+	÷	۸	٠	•	٠	+	٠	٠	٠	+	+	+	+	+	+	٠	48 1 2
TRACHEA	+	+	+	+	+	+	+	+	÷	÷	A	+	+	٠	-	÷	+	÷	-	-	-	-	-	+	+	31
NEMATOPOIETIC SYSTEM				• • • •																					-	
BONE MARROW	+	<u>.</u>	+	+	+	+	+	÷	+	+	A	+	+	+	+	÷	+	÷	+	+	+	+	+	+	+	47
SPLEEN Malig.lymphoma, lymphocytic type Malignant lymphoma, mixed type	+	+	+	+	+	+	•.	+	+	+	A	+	+	+	×	+	+	+	•	•	+	+	+	+	•	48 1 1
LYMPH NODES Leiomyosarcoma, invasive Malig.lymphoma, histiocytic type .	+	+	+	+	+	+	+	+	•	+	Α.	•	+	+	+	+	+	+	×	+	+	+	+	+	+	48 1 1
THYMU5	+	+	+	+	+	+	+	+.	+	+	A	+	÷	+	+	+	+	+	-	+	-	+	÷	+	+	44
CIRCULATORY SYSTEM	1																								-†	
HEART	+	+	+	+	+	+	+	٠	+	+	A	+	+	+	+	+	+	+	+	+	+	+	+	+	٠	48
DIGESTIVE SYSTEM	<u> </u>				-																					
SALIVARY GLAND	<u> +</u>			+	+	+	+	+	_	+	A	+	+	+	+	+	+	+	+	+	+	+	+	+	+	47
LIVER Hepatocellular carcinoma	+	+	* ×	+	+	+	+	+	+	+	A	+	+	+	+	+	+	+	+	+	+	+	+	+	+	48
BILE DUCT	+	+	+	+	+	+	+	+	+	+	A	÷	÷	+	+	+	+	+	+	÷	+	+ .	+	+	+	48
GALLBLADDER & COMMON BILE DUCT	L.N	+	.+ .	+	+	+	+	<u>+</u>		+	Α	N	N	+	+	+	+	+	N	+	÷	+	÷	+	+	48×
PANCREAS	+	+	+	+	+	+	+	÷	+	+	A	÷	+	+	+	+	+	+	<u>+</u>	<u>+</u>	•	+	+	÷	+	48
ESOPHAGUS	+	+	+	+	+	+	+	÷	÷	+	A	+	+	+	+	+	+	+	+	+	+	+	+	+	+	47
STOMACH	+	+.	+	+	+	+	+	+	+	+	A	+	+	+	+	÷	÷	+	÷	÷	+	+	+	+	+	48
SMALL INTESTINE	+	•	+	+	+	+	+	÷	+	÷	A	÷	+	+	+	<u>+</u>	+	+	+	+	+	÷	÷	+	+	47
LARGE INTESTINE	+	+	+	÷	+	+	+	+	+	+	A	+	+	+	+	+	+	+	+	+	+	÷	÷	+	+	46
URINARY SYSTEM																						•			-+	
KIDHEY	+	+	+	+	+	+	+	+	+	+	A	÷	+	+	+	+	+	+	+	+	+	<u>+</u>	+	+	.+	48
URINARY BLADDER	+	+	+	+	+	+	÷	÷	+	÷	A	+	÷	+	+	+	+	÷	+	÷	+	+	+	÷	+	47
ENDOCRINE SYSTEM																									-+	
PITUITARY	+	+	+	+	+	+	+	٠	+	÷	A	÷	+	-	+	+	+		+	+	+	+	+	+	+	45
ADRENAL	+	+	+	+	+	+	+	+	+	÷	A	+	+	+	+	+	÷	+	+	+	÷	÷	+	+	+	48
THYROID	+	+	+	÷	÷	÷	+	+	+	+	A	÷	+	٠	+	+	÷	+	÷	+	٠	٠	÷	÷	+	46
FOLLICULAR-CELL ADENOMA	†				-			+		+		+	+	÷		+				+		-				
PARATHYROID	Ē			<u> </u>		<u> </u>		<u> </u>		<u> </u>	A	·	•	•	-	•	-	-	-	<u> </u>			<u> </u>	<u> </u>	1	29
REPRODUCTIVE SYSTEM MAMMARY GLAND ADENOCARCINOMA.NOS INTRADUCTAL CARCINOMA ADENOSQUAMOUS CARCINOMA MIXED TUMOR. MALIGNANT MIXED TUMOR.MALIGNANT	÷	+	٠	٠	٠	* X	·	N	٠	+	A	٠	÷	+ X	+	÷	+	٠	+	+	+ ×	+	+	٠	+	48× 1 1
UTERUS LEIOMYOSARCOMA	+	+	+	÷	+	÷	+	+	+	+	A	÷	+	•	+	+	+	+	* x	÷	+	+	÷	+	+	47
OVARY	+	÷	+	+	÷	+	+	+	÷	٠	A	÷	÷	÷	-	÷	+	÷	-	-	٠	+	+	٠	+	44
NERVOUS SYSTEM																									- †	
BRAIN EPENDYMOMA	+	+	+	٠	+	+	+	+	+	+	A	+	+	+	+	+	+	•	+	+	+	+	+	+	+	48,
HUSCULOSKELETAL SYSTEM Bone Osteosarcoma	н	N	н	N	н	¥	N	N	N	н	A	N	N	N	н	N	N	N	н	N	N	N	N	N	н	48× 1
NLL OTHER SYSTEMS Multiple organs nos Malig.Lymphoma, lymphocytic type Malig.Lymphoma, mistocytic type Malignant Lymphoma, mixed type	N	N	ĸ	н	N	н	H H	н Х	N	н	A	N	N	N	N	н	N	H	N	н	N	н	H X	N	N	48* 8 1

* ANIMALS NECROPSIED

 +:
 TISSUE EXAMINED MICROSCOPICALLY
 :
 NO TISSUE INFORMATION SUBMITTED

 -:
 REQUIRED TISSUE NOT EXAMINED MICROSCOPICALLY
 C:
 NECROPSY, NO HISTOLOGY DUE TO PROTOCOL

 X:
 TUMBR INCIDENCE
 A:
 AUIOLYSIS

 N:
 NECROPSY, NO AUTOLYSIS, NO MICROSCOPIC EXAMINATION
 M:
 AUIOLYSIS

 N:
 NECROPSY, NO AUTOLYSIS, NO MICROSCOPIC EXAMINATION
 M:
 ANIOLYSIS

TABLE B4.

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

LOW DOSE

AHIMAL NUMBER	0	0	0	0	0	0	0	0 0 8	0	0	0	1 2	1	0	1	0	11	0	0	20	0 2 1	0 2 2	0 2 3	0 2 4	
WEEKS ON Study	9	20	3	1	5	6	01	1	9	1	1	0	0	1	5	1	0	8	0 8	1	1	1	1	1	
INTEGUMENTARY SYSTEM	01	51	51	5	5	5	5	51	41	5	5	5	5	_51	51	51	_11	91	51	51	_5	5	5	5	
SKIN HEMANGIOMA	+	A	+	+	+	٠	+	+	+	+	+	+	+	+	N	+	+	+	+	+	+	+	+	+	
SUBCUTANEOUS TISSUE Rhabdomyosarcoma	+	A	+	÷	* x	÷	+	+	+	+	+	÷	+	+	N	+	+	+	+	÷	+	+	+	÷	4
RESPIRATORY SYSTEM				~ ~~																					
LUNGS AND BRONCHI Alveolar/Bronchiolar Adenoma Alveolar/Bronchiolar Carcinoma	+	A	+	•	+	+	+	+	+	+	+	+	+	+	+	+ _X	+	+	•	+	+	+	+	+	•
TRACHEA	+	A	-	-	+	-	-	-	+	-	-	-	+	-	-	+	+	+	+	٠	+	-	-	+	4
TEMATOPOIETIC SYSTEM	-									_															-
BONE MARROW Hemangiosarcoma	+	A	+	+	+	+	+	+	+	+	÷	+	+	+	+	+	+	+	+	+	+	+	+	+	1
SPLEEN	-	A	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	÷	+	+	+	+	_
LYMPH NODES Rhabdomyosarcoma, metastatic	+	A	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	
THYMUS	+	A	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	-	+	•
CIRCULATORY SYSTEM																									
HEART	+	A	+	+	+	÷	+	+	+	+	+	+	+	÷	+	+	+	+	÷	+	+	+	+	+	÷
DIGESTIVE SYSTEM																									-
SALIVARY GLAND	+	A	+	+	+	+	٠	+	+	+	+	+	+	÷	+	+	+	+	+	+	+	+	+	+	
LIVER HEPATDCELLULAR ADENOMA HEPATDCELLULAR CARCINOMA HEMANGIOSARCOMA HEMANGIOSARCOMA	+	A	+	+	+	+	٠	+	+	٠	+ x	٠	+	+	+	+	•	+	+	+	+	+	+	+	1
HEMANGIOSARCOMA Malig.lymphoma, histiocytic type																									>
BILE DUCT	+	<u>A</u> _	+	+	+	+	+	+	+	<u>+</u>	+	+	+	+	+	+	+	+	+	+	+	+	+	+	
GALLBLADDER & COMMON BILE DUCT	N	<u>A</u>	+	+	+	+	+	+	<u>N</u>	<u>+</u>	+	+	+	+	+	+	+	Ν	N	+	+	+	+	+	
PANCREAS	-	A	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	-	+	+	+	+	+	-
ESOPHAGUS .	+	Α	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	
STOMACH	+	<u>A</u>	+	+	+	+	+	+	+	*	+	+	+	+ +	<u>+</u>	. <u>+</u>	+	+	+	+	+	+	+	*	-
SMALL INTESTINE Malig.lymphoma, lymphocytic type	-	A	+	+	+	+	+	+	+	+	<u>*</u>	+	+	+	+	•			-						_
LARGE INTESTINE	-	A	+	+	+	-	+	+	+	+	+	+	+	+	+	+	-	-	-	+	+	+	+	+	+
JRINARY SYSTEM																									
KIDNEY .	+	A	+	+	+	+	+	+	+	+	+	+	+	+	+	<u>+</u>	+	+	+	+	+.	+	+	+	+
URINARY BLADDER	+	A	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	•
ENDOCRINE SYSTEM									-																
PITUITARY Adenoma, Nos	-	A	+	+	+	+	+	•	+	+	+	+	+	+	+	+	+	+	+	+	* ×	+	+	+	
ADREKAL	+	A.	+	+	+	+	+	+	+	+	÷	+	+	+	+	+	+	+	+	+	+	+	+	+	
THYRDID	+	A	+	+	÷	+	+	+	+	+	÷	+	÷	+	+	÷	÷	+	÷	+	÷	+	+	+	+
FOLLICULAR-CELL CARCINOMA																									~~
PARATHYROID		<u> </u>	+	+	+	+	+	+		÷.		. <u>+</u>	÷.	<u>.</u>		-	- <u>-</u> -	+	-	+	-		-	- <u>-</u> -	-
PANCREATIC ISLETS ISLET-CELL CARCINOMA	-	A	•	•	+	•	+	•	•	+	•	Ť	•	•	•	•		•	-	*	*	•	·	•	
REPRODUCTIVE SYSTEM		_																							
MAMMARY GLAND Adenocarcinoma, nos Adenoca/squamous metaplasia	N	A	+	+	+	+	+	+	н	+	+	+	+	+	N	+	+	+	+	*	+	+	+	+	-
UTERUS	+	A	+	+	+	+	+	+	+	+	+	•	+	+	+	+	+	+	+	+	+	+	+	+	-1
OVARY LUTEDMA	+	A	+	+	+	+	+	+	+	+	+	+	+	+	٠	* x	+	٠	+	+	+	+	+	+	1
VERVOUS SYSTEM	+ ·																								
BRAIN	+	A	÷	+	+	+	+	+	٠	+	÷	+	+	+	+	+	+	+	÷	÷	÷	+	÷	٠	
ALL OTHER SYSTEMS																		-							-
MULTIPLE ORGANS NOS MALIGNANT LYMPHOMA, NOS MALIG.LYMPHOMA, LYMPHOCYTIC TYPE MALIG.LYMPHOMA, HISTIOCYTIC TYPE MALIGNANT LYMPHOMA, MIXED TYPE	N	A	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N X	N	N	N	N	N	N	,
MALIGNANT LYMPHOMA, NOS Malig.lymphoma, lymphocytic type	x									×							x	^							

+: TISSUE EXAMINED MICROSCOPICALLY -: Required Tissue not examined microscopically x: Tumor Incidence n: Hecropsy, 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	2	2	3	0	03	<u>0</u>	0 3	0 3	03	3	0	0	0	9	0	9	2	2	0	0	0	0	0	
WEEKS ON		2 7	-8	2 9		+	- 2				- 6	11	-8		1	++	2	3	4	5	- 6	4	8 0 8	9	-1	TOTAL TISSUES
STUDY	0	0 5	0 5	5	0 5	0 5	9	5	0	9	0 5	0	0 5	5	5	5	5	0 5	5	6	0 5	2	8	0 5	0 5	TUMOR
INTEGUMENTARY SYSTEM																										
HEMANGIOMA	1×	+	+	+	+	+	+	+	+	+	+	+	+	+	*	+	+	+	N	+	+	+	A	+	-+	48× 1
SUBCUTANEOUS TISSUE RHABDOMYOSARCOMA	+	+	+	+	٠	+	+	.+	+	+	٠	+	٠	+	+	+	+	+	N	+	+	* X	A	٠	+	48× 2
RESPIRATORY SYSTEM	1			-																						
LUNGS AND BRONCHI Alveolar/bronchiolar Adenoma Alveolar/bronchiolar carcinoma	×	٠	+	٠	+	٠	+	+	. +	+	+	+	+	+	+	+	+	+	+	+	+	+	A	+	+	48 1
TRACHEA	+	-	÷	-	-	+	+	+	-	+	+	+	-	+	+	+	-	+	+	÷	+	+	A	+	-	29
HEMATOPOIETIC SYSTEM	-																								-	
BONE MARROW Hemangiosarcoma	+	•	+	+	*	+	+	+	-	+	+	+	+	+	+	+	+	+	+	٠	+	+	A	+	.+	47,
SPLEEN	+	٠	+	.+	+	÷	÷	+	÷	+	+	+	+	+	+	+	±	+	+	÷	÷	+	A	+	+	47
LYMPH NODES Rhabdomydsarcoma, metastatic	+	+	•	+	+		+	+	+	+	٠	+	+	+	-	+	+	٠	+	+	+	* ×	A	+	•	47
THYMUS	+	٠	+	٠	٠	+	+	+	٠	<u>.</u>	٠	+	٠	+	+	+	+	+	+	٠	+	+	A	+	-	46
CIRCULATORY SYSTEM	1																								-	
HEART	+	+	+	٠	٠	٠	٠	+	+	+	٠	٠	٠	+	+	+	+	+	+	+	٠	+	A	+	+	48
DIGESTIVE SYSTEM	1						-																		T	·
SALIVARY GLAND	+	+	+	<u>+</u>	•	+	•	+	+	+	+	+	-	+	+	+	+	+	+	÷	<u>+</u>	+	A	+	+	47
LIVER Hepatocellular Adenoma Hepatocellular Carcinoma Hemangidsarcoma Maigciymphoma, Histiocytic Type	+	•	٠	•	٠	٠	٠	٠	٠	٠	٠	•	٠	٠	٠	+	•	•	+	٠	* X	•	A	+ x	+ x	48 1 2 1
BILE DUCT	1.																								Ĵ	48
GALLBLADDER & COMMON BILE DUCT	T.	+	•	•	•	+	•	+	N	N	•	•	•	•	•	+	N	•	•	•	•	÷	^	Ň	÷.	48#
PANCREAS	t.	+	•	•	•	+	 +	•	*	-!! +	+	+	+	+	-	+	+	•	•	•	•	•	<u>,</u>	*	Ì	45
ESOPHAGUS	1.	+	+	•	*	+	+	+	+	+	+	+	+	+	+	+	+	+	 +	+	+	+		+	÷	48
STOMACH	1.	+	+	+	•	+	•	+	+	+	+	+	•	+	+	+	•	•	 +	•	 +	+	 ^	+	÷	48
SMALL INTESTINE Malig.lymphoma, lymphocytic type	1.	+	+	+	+	+	-	+	•	+	+	+	+	+			+	+	+	+	+	+	A	+	+	42
LARGE INTESTINE	1.	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	÷	+	÷	÷	A	+	-	43
URINARY SYSTEM					• • • •														_						-+	
KIDNEY	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	•	+.	÷	+	+	A	÷		48
URINARY BLADDER	•	+	+	+	•	+	+	+	+	+	+	+	+	÷	+	+	+	+	+	+	+	+	A	+	+	48
ENDOCRINE SYSTEM	+			• • • •																					+	
PITUITARY Adenoma, Nos	l ;	÷	+	+	+	+	+	٠	+	+	+	+	+	+	+	+	-	+	+	+	+	+	٨	-	-	44 2
ADRENAL	<u> </u>	+	+	+	+	+	÷	+	+	+	+	+	+	+	+	+	۰	+	÷	+	+	÷	A	÷	-	47
THYROID Follicular-cell carcinoma	+	+	+	+	+	+	+	+	+	÷	+	+	+	+	÷	+	•	•	÷	+	+	+ x	A	÷	+	48 2
PARATHYROID	1.	+	+	+	÷	+	+	_	+	+	+	+	+	+	+	-		+	÷	-	+	-	A	-	+	35
PANCREATIC ISLETS ISLET-CELL CARCINOMA	+	٠	+	÷	+	+	+	+	+	+	+	+	+	+	-	+	÷ ×	÷	+	÷	÷	+	A	+	+	45 1
REPRODUCTIVE SYSTEM	–		-																						-+	
MAMMARY GLAND Adenocarcinoma, nos Adenoca/squamous metaplasia	+	•	٠	+	٠	٠	•	٠	+	·	÷	+	٠	+	+	+	•	•	н	* ×	÷	+ ×	A	+	+	48× 1
UTERUS	+	+		+	+	+	+	+	+	+	+	+	+	+	+	•		+	+	+	+	+	A	÷	+	48
OVARY	+	+	+	+	+	•	+	+	•	+	-	+	+	+	+	+	ŀ	+	+	÷	+	+	A	-	•	44
LUTEOMA		<u> </u>																								1
VERVOUS SYSTEM																									T	
BRAIN	+	+	+	•	+	+	+	+	+	+	+	+	+	+	+	+ ·	•	+	+	+	•	+	۸	+	+	48
ALL OTHER SYSTEMS																										
MULTIPLE ORGANS NOS Malignant Lymphoma, Nos Malig.Lymphoma, Lymphocytic Type Malig.Lymphoma, Histiocytic Type Malignant Lymphoma, Mixed Type Lymphocytic Leukemia	N	N	N X	н	H	N	N			N X	N	N	н	N		N I X	4	N	N	N		N X	A	н	N	48* 1 2 4 2
LYMPHOCYTIC LEUKEMIA	1											*														2

TABLE B4. FEMALE MICE: TUMOR PATHOLOGY (CONTINUED) LOW DOSE

ANIMALS NECROPSIED

TISSUE EXAMINED MICROSCOPICALLY
 REQUIRED TISSUE NOT EXAMINED MICROSCOPICALLY
 TUMOR INCIDENCE
 NECROPSY, NO AUTOLYSIS, NO MICROSCOPIC EXAMINATION

¹ NO TISSUE INFORMATION SUBMITTED C: NECROPSY, NO HISTOLOGY DUE TO PROTOCOL AT AUIDIYSIS M: ANIMAL MISSING B: NO NECROPSY PERFORMED

TABLE B4.

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

HIGH DOSE

ANIMAL NUMBER	0	0	0	0	0	0	0	0	0	0 1 0	0	0	1	1	0 1 5	0	1	0 1 8	0	2	0 2 1	2	2	2	025
WEEKS DN STUDY	6	2 0 7	3	4	5	6 0 7	7	8	9	0	0	2	Ŷ,	1	1	1	7	1	1	0	9	-î	_3 1 0	4	5 1 0
INTEGUMENTARY SYSTEM		9	41	-41	4	3	4	4	4	4	4	2	1	4	41	41	4	4	31	8	. ėl	4	41	.4	4
SKIN Hemangioma	+	+	+	+	٠	+	+	+	+	+	+	+	A	+	+	+	+	N	+	٠	+	٠	+	٠	* ×
RESPIRATORY SYSTEM	+		•													··			·····						
LUNGS AND BRONCHI Carcinoma, Nos, metastatic Alveolar/Bronchiolar Adenoma	+	+	+	+	+	+	+	+	+	+	+	+	A	+	+	+	+	+	+ x	+	+	+	+	+	+
TRACHEA	-	+	-	+	-	+	+	-	+	+	-	+	A	-	÷	+	÷	+	+	+	٠	+	-	÷	-
HEMATOPOIETIC SYSTEM	+										• • • • •														
BONE MARROW	+	+	+	+	+	+	+	• +	+	+	+	+	Α	<u>+</u>	+	+	+	+	+	+	÷	+	+	+	+
SPLEEN Hemangiosarcoma	+	+	+	+	+	+	+	+	+	+	+	+	A	•	+	+	+	+	+	+	+	+	+	* ×	+
LYMPH NODES	-	+	+	+	+	ŧ	٠	+	+	+	+	+	A	+	+	+	+	+	+	+	+	+	+	+	+
THYMUS	-	+	+	+	+	+	+	-	+	+	+	+	A	+	+	+	÷	+	+	-	-	+	+	+	+
CIRCULATORY SYSTEM				-				-	_					_								_			_
HEART	+	+	+	+	+	+	+	+	٠	+	+	+	A	+	+	+	+	+	+	÷	+	+	٠	+	+
DIGESTIVE SYSTEM	T																	•••••							
SALIVARY GLAND	+		+	+	+	+	+	+	+	+	+	+	A	*	+	+	+	+	+	+	+	+	+	+	+
LIVER HEPATOCELLULAR ADENOMA HEPATOCELLULAR CARCINOMA HEMANGIOSARCOMA	+	+.	+	+	+	+	* X	+	+	+	+	+	•	+	+	+	+	+	•	+	+	+	+	+	+
BILE DUCT	+	+	+	+	÷	+	+	+	+	+	+	÷	٨	<u>+</u>	+	+	+	+	+	+	+	+	÷	÷	+
GALLBLADDER & COMMON BILE DUCT	N	N	+	+	+	+	+	N	+	+	+	+	A	+	N	+	÷	÷	÷	N	÷	+	+	÷	+
PANCREAS	+-		+	+	+	÷	+	+	+	+	+	+	A	<u>+</u>	+	+	+	+	<u>+</u>	+	ŧ	+	+	+	+
ESOPHAGUS	<u> +</u>	+	+	ŧ	ŧ	ŧ	+	+	+	+	+	÷	A	<u>+</u>	+	+	+	+	+	÷	ŧ	+	+	+	+
STOMACH	+	+	+	+	+	+	+	+	÷	+	+	+	A	<u>*</u>	+	+	+	+	÷	÷	+	+	+	+	+
SMALL INTESTINE	<u> ·</u>		+	÷	+	+	+	+	+	+	+	+	A	+	+	+	<u>+</u>	<u>+</u>	+	-	-	+	+	+	-
LARGE INTESTINE	+	-	+	+	+	+	+	+	+	+	+	+	A	+	+	+	+	+	+	+	-	+	+	+	+
URINARY SYSTEM																									
KIDNEY	<u> +</u> -	+	+	+	+	+	+	.+	+	<u>+</u>		+	A	+	+	+	+	+	<u>+</u>	+	+	+	+	+	+
URINARY BLADDER	+	+	+	+	+	+	+	+	+	+	+	+		+	+	+	+	+	+	+	+	+	٠	+	+
ENDOCRINE SYSTEM																									٦
PITUITARY	+-+-	+	+	+	+	+	+	+	+	+	+	+	A	<u> </u>	+		+	+	+	+	+		+	+	4
ADRENAL Pheochromocytoma	+	+	+	+	+	+	+	+	+	+	+	+	A	+	+	+ ·	•	+	+	+	+	-	+	+	+
THYROID Follicular-cell adenoma	+	+	+	+	+	+	+	+	+	+	+	+	A	+	+	+	+	+	+	+	+	+	+	+	+
PARATHYROID	-	-	-	-	-	-	+	-	+	-	+	-	A	-	+	-	-	-	+	+	+	+	+	+	+
REPRODUCTIVE SYSTEM																									
MAMMARY GLAND	+	+	+	+	+	+	+	+	+	+	+				+			N	+	+	+	+	+	+	+
UTERUS HEMANGIDSARCOMA	+	+	+	+	+	+	+	+	+	+	+	+	A	+	* ×	+ ·	ŀ	+	+	+	+	+	+	+	+
OVARY	+	+	+	+	+	+	+	+	+	+	+	+	A	+	+		ŀ	÷	-	+	÷	+	+	+	+
NERVOUS SYSTEM	-																					_			+
BRAIN Malignant reticulosis	+	+	+	+	+	+	+	+	+	+	+	+	A	+	+	+	•	+	+ x	+	+	+	+	+	+
SPINAL CORD Malignant reticulosis	N	N	N	н	N	N	N	Ν	N	N	N	N	A	N	N	N I	1	Ν	N Xa	H	н	н	H	н	N
SPECIAL SENSE DRGANS	+															11 k. / . has an									-f
HARDERIAN GLAND Carcinoma, Nos Adenoma, Nos Cystadenoma, Nos	N	N	н	N	N	N	N	N	N	N	N	N	A	н	N	н 1	•		N X	N	N	N	N	N	н
ALL OTHER SYSTEMS																									+
MULTIPLE DRGANS NDS Sarcoma, NDS Malig.Lymphoma, Lymphocytic Type Malig.Lymphoma, Histiocytic Type Malignant Lymphoma, Mixed Type Lymphocytic Leukemia	N		N	N	N	N	N	N	N	N	N	N	A	н	н	N I		N X	N		N X	N	N	N	н
LYMPHOCYTIC LEUKEMIA	1	Χ.								<u>x</u>															Ĺ

2: MULTIPLE OCCURENCE OF MORPHOLOGY +: TISSUE EXAMINED MICROSCOPICALLY -: REQUIRED TISSUE NOT EXAMINED MICROSCOPICALLY X: TUMOR INCIDENCE N: NECROPSY, NO AUTOLYSIS, NO MICROSCOPIC EXAMIN .ON

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

ANIMAL NUMBER	2	0 2 7	2 8	2	3	3	3	3	3	3	3	0 3 7	0 3 8	3	0 4 0	0	0420	41		0 4 5	0	0 4 7	048	4	0 5(TOTAL
WEEKS ON Study	- 6	0	-1	9	0	0	32038	3 1 0 4	4	5	6 0 7 8	1 0 1	8	9 8 2			8	1	11	5 1 0 4	6 1 0 4	7 0 7 8	0	9	0	TISSUE
INTEGUMENTARY SYSTEM																										
SKIN Hemangioma	+	٠	N	+	+	+	•	+	+	+	+	+	+	+	+	+	+	+	+	*	+	+	+	N	+	49*
RESPIRATORY SYSTEM																										
LUNGS AND BRONCHI Carcinoma, nos, metastatic Alveolar/Bronchiolar Adenoma	+	+	+	+	+	+	+	+	+	+	+	+	+	+	•	+	+		×	+	+	+	+	+	+	49 1
TRACHEA	+	-	+	-	-	-	+	-	+	-	+	ŧ	-	+	-	-	+	-	÷	-	-	+	-	+	-	27
HEMATOPOIETIC SYSTEM						••••					_												-		-	
BONE MARROW	++	+	+	+	+	+	+	+	+	+	+	÷	+	+	+	+	+	+	+	+	+	+	+		-	47
SPLEEN HEMANGIOSARCOMA	+	+	+	+	+	+	+	+	+	+	-	+	+	+	+	+	+	+	+	+	+	+	•	+	+	48
LYMPH NODES	++-	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	<u>+</u>	+	+	+	+	+	+	-+	48
THYMUS	+	-	+	+	+	٠	+	٠	-	٠	+	+	٠	+	+	+	+	+	+	+	+	+	+	+	+	43
CIRCULATORY SYSTEM	1		_																						-1	
HEART	+	+	+	+	+	+	+	٠	+	+	+	+	+	-	+	+	+	+	÷	+	+	+	+	٠	+	48
DIGESTIVE SYSTEM	1															_					_				1	
SALIVARY GLAND	++-	+	+	+	+	+	+	+	+	+	+	+	•	+	+	+	+	+	+	+	+	+	+	+	-+	48
LIVER HEPATOCELLULAR ADENOMA HEPATOCELLULAR CARCINOMA HEMANGIOSARCOMA	+ ×	+	+	+	+	+	+	+	•	+	+	+	+	+	+	+	+	+ x	+	+	+	+	+	+	+	49 1 1
BILE DUCT	+	÷	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	÷	+	+	+	٠	+	+	+	49
GALLBLADDER & COMMON BILE DUCT	N	+	+	+	٠	+	+	+	+	+	н	+	¥	N	÷	÷	N	+	÷	+	÷	+	+	N	+	49×
PANCREAS	+	+	+	+	+	+	+	+	+	+	-	+	+	-	+	+		<u>+</u>	+	+	+	+	+	+	<u>+</u>	45
ESOPHAGUS	L+	. <u>+</u>	+	.t	+	+	+	+	+	+	+	+	+	+	+	+	÷	+	÷	+	+	+	+	+	+	49
STOMACH	++	+	+	+	+	+	+	_ <u>+</u>	+	+	-	+	+	+	+	+		<u>+</u>	+	+	+	+	+	+	+	47
SMALL INTESTINE	++	+_	+	+	+	+	+	+	+	+	-	+	+	+	+	+	-	+	+	+	<u>t</u>	+	+	+	+	44
LARGE INTESTINE	+	+	+	+	+	+	+	+	+	+	-	+	÷	-	+	+	-	+	+	+	+	+	+	+	+	44
URINARY SYSTEM												-									_				_	
KIDNEY	++-	+	+	+	+	+	+	<u>+</u>	+	+	+	+	+	+	+	+	<u>+</u>	+	†	+	<u>+</u>	+	+	+	+	49
URINARY BLADDER	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	-	+	÷	+	+	+	+	+	+	48
ENDOCRINE SYSTEM	-							_																		
PITUITARY	++	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	*	-	+	+	+	+	-1	47
ADRENAL Pheochromocytoma	+	+	+	+	+	* ×	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	48
THYROID Follicular-cell Adenoma	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	* ×	+	+	+	+	+	+	49
PARATHYROID	-	٠	+	+	-	+	-	+	-	-	+	+	-	+	+	+	+	+	+	+	+	+	+	٠	+	30
REPRODUCTIVE SYSTEM	1																								-†	
MAMMARY GLAND	++	+	+	+	+	+	+	+	N	+	Ν.	+	+	+	+	+	+	+	+	+	+	N	+	N	+	49*
UTERUS HEMANGIOSARCOMA	+	+	+	+	+	+	+	+	+	+	+	+	•	+	•	+	+	+	+		•	+	+	•	+	49
OVARY	+	+	+	+	+	+	+	+	+	+	+	٠	+	+	+	+	+	+	-	+	+	+	+	+	+	46
NERVOUS SYSTEM	1							-																		
BRAIN Malignant Réticulosis	+	•	+	+	+	+	+	+	+	+	+	+	+	+			+	+	+	+	+	+	+	+	+	49
SPINAL CORD MALIGNANT RETICULOSIS	N	N	N	H	H	N	N	H	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	н	49× 1
SPECIAL SENSE ORGANS	1																									
HARDERIAN GLAND Carcinoma, Nos Adenoma, Nos Cystadenoma, Nos	N	N	N	N	м	H	N	н	N	N X	N	N	H	N	H	N	N	N	H X	N	H	N	N	н	н	49* 1 1
ALL OTHER SYSTEMS	1									_															+	
MULTIPLE DRGANS NOS Sarcoma, NOS Malig.Lymphoma.Lymphocytic type Malig.Lymphoma. Mistidcytic type Malignani Lymphoma, Mixed type Lymphocytic Leukemia	н	н	N	N	H	н	н	N X	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N X	N	49× 1 1

TABLE B4. FEMALE MICE: TUMOR PATHOLOGY (CONTINUED) HIGH DOSE

* ANIMALS NECROPSIED

+: TISSUE EXAMINED MICROSCOPICALLY -: REQUIRED TISSUE NOT EXAMINED MICROSCOPICALLY X: TUMOR INCIDENCE N: MECROPSY, NO AUTOLYSIS, NO MICROSCOPIC EXAMINATION N: MECROPSY, NO AUTOLYSIS, NO MICROSCOPIC EXAMINATION N: MECROPSY, NO AUTOLYSIS, NO MICROSCOPIC EXAMINATION N: MECROPSY PERFORMED
APPENDIX C

SUMMARY OF THE INCIDENCE OF NONNEOPLASTIC LESIONS IN RATS FED DIETS CONTAINING D-MANNITOL

TABLE C1.

SUMMARY OF THE INCIDENCE OF NONNEOPLASTIC LESIONS IN MALE RATS FED DIETS CONTAINING D-MANNITOL

	CONTROL	LOW DOSE	HIGH DOSE
ANIMALS INITIALLY IN STUDY ANIMALS NECROPSIED ANIMALS EXAMINED HISTOPATHOLOGICALLY	50 50 50	50 50 50	50 50 50
INTEGUMENTARY SYSTEM			
*SKIN EPIDERMAL INCLUSION CYST INFLAMMATION, SUPPURATIVE HYPERPLASIA, EPITHELIAL PARAKERATOSIS	(50) 4 (8%) 1 (2%) 1 (2%)	(50) 1 (2%)	(50) 6 (12%) 1 (2%)
RESPIRATORY SYSTEM			
#LUNG/BRONCHIOLE Hyperplasia, Nos	(50) 2 (4%)	(50)	(50)
#LUNG Congestion, Nos Lipogranuloma Hyperplasia, Alveolar Epithelium	(50) 1 (2%) 2 (4%)	(50) 1 (2%)	(50) 2 (4%) 1 (2%)
HEMATOPOIETIC SYSTEM			
*MULTIPLE ORGANS Hyperplasia, lymphoid	(50)	(50)	(50) 1 (2%)
#SPLEEN CONGESTION, NOS FIBROSIS, FOCAL INFARCT, NOS HEMOSIDEROSIS HYPERPLASIA, FOCAL	(50) 1 (2%) 1 (2%) 1 (2%)	(50) 1 (2%) 2 (4%)	(50) 1 (2%) 1 (2%) 1 (2%)
HEMATOPOIESIS #LYMPH NODE HYPERPLASIA, NOS	3 (6%) (50)	1 (2%) (50) <u>1 (2%)</u>	2 (4%)

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

D-Mannitol

	CONTROL	LOW DOSE	HIGH DOSE
#MANDIBULAR L. NODE CYST, NOS Hyperplasia, Nos	(50) 1 (2%)	(50)	(50) 2 (4%) 1 (2%)
HYPERPLASIA, CYSTIC Hyperplasia, lymphoid	1 (2%)	1 (2%) 2 (4%)	1 (2%)
#MEDIASTINAL L.NODE Angiectasis	(50)	(50) 1 (2%)	(50)
#PANCREATIC L.NODE Angiectasis	(50)	(50) 1 (2%)	(50)
#LUNG Leukocytosis, nos	(50) 1 (2%)	(50) 2 (4%)	(50)
#LIVER Leukocytosis, nos Hematopoiesis	(50) 5 (10%)	(50) 2 (4%) 1 (2%)	(50) 3 (6%)
#KIDNEY Hyperplasia, lymphoid	(50) 2 (4%)	(50)	(50)
#THYMUS CYST, NOS Hyperplasia, Cystic	(40)	(40)	(38) 1 (3%) 1 (3%)
CIRCULATORY SYSTEM			
#CEREBRAL BASAL SURFA Thrombosis, Nos	(50) 1 (2%)	(50)	(50)
*MULTIPLE ORGANS PERIARTERITIS	(50)	(50) 1 (2%)	(50) 1 (2%)
#PANCREATIC L.NODE Lymphangiectasis	(50)	(50)	(50) 1 (2%)
#HEART Inflammation, Chronic	(50)	(50) 1 (2%)	(50)
INFLAMMATION, CHRONIC FOCAL Fibrosis, diffuse	1 (2%)	1 (2%) 1 (2%)	
#HEART/ATRIUM Thrombosis, Nos	(50) <u>1 (2%)</u>	(50)	(50)

TABLE C1. MALE RATS: NONNEOPLASTIC LESIONS (CONTINUED)

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

	CONTROL	LOW DOSE	HIGH DOSE
#LEFT ATRIUM Thrombosis, nos	(50) 1 (2%)	(50)	(50)
#MYOCARDIUM INFLAMMATION, INTERSTITIAL INFLAMMATION, CHRONIC FIBROSIS, FOCAL FIBROSIS, DIFFUSE	(50) 1 (2%) 4 (8%) 1 (2%)	(50) 8 (16%) 4 (8%)	(50) 1 (2%) 2 (4%) 1 (2%) 1 (2%)
*PANCREATIC ARTERY Inflammation, Chronic Focal	^φ (50)	(50)	(50) 1 (2%)
#LIVER Thrombosis, Nos	(50) 1 (2%)	(50)	(50)
#PANCREAS PERIARTERITIS	(50)	(50) 1 (2%)	(50)
#GASTRIC SEROSA Periarteritis	(50)	(50)	(50) 1 (2%)
<pre>*MESENTERY PERIARTERITIS </pre>	(50) 2 (4%)	(50) 1 (2%)	(50) 2 (4%)
DIGESTIVE SYSTEM			
*INTESTINAL TRACT INFLAMMATION, NOS	(50) 1 (2%)	(50)	(50)
#PAROTID GLAND Atrophy, focal	(49)	(49) 1 (2%)	(49)
#LIVER Congestion, nos Hemorrhage	(50)	(50) 2 (4%)	(50)
ADHESION, FIBROUS Degeneration, cystic Necrosis, focal	3 (6%) 3 (6%)		1 (2%)
NECROSIS, COAGULATIVE METAMORPHOSIS FATTY HEMOSIDEROSIS	1 (2%)	1 (2%) 1 (2%)	1 (2%) 1 (2%)
CYTOPLASMIC VACUOLIZATION NODULAR REGENERATION	8 (16%) 1 (2%)	4 (8%)	4 (8%)

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

D-Mannitol

TABLE C1. MALE RATS: NONNEOPLASTIC LESIONS (CONTINU

·	CONTROL	LOW DOSE	HIGH DOSE
#LIVER/CENTRILOBULAR CONGESTION, NOS NECROSIS, NOS METAMORPHOSIS FATTY CYTOPLASMIC VACUOLIZATION ATROPHY, NOS	(50) 1 (2%) 1 (2%) 4 (8%) 1 (2%) 3 (6%)	(50) 3 (6%)	(50) 2 (4%) 1 (2%)
· · · · · · · · · · · · · · · · · · ·	(50) 1 (2%)	(50) 1 (2%)	(50)
#LIVER/HEPATOCYTES Degeneration, cystic Cytoplasmic vacualization	(50)	(50) 3 (6%) 1 (2%)	(50)
<pre>#BILE DUCT HYPERPLASIA, NOS HYPERPLASIA, CYSTIC</pre>	(50) 31 (62%) 1 (2%)	(50) 37 (74%)	(50) 37 (74%)
#PANCREAS Cystic ducts Inflammation, focal	(50)	(50) 1 (2%)	(50) 1 (2%)
<pre>#PANCREATIC DUCT HYPERPLASIA, EPITHELIAL</pre>	(50)	(50)	(50) 2 (4%)
#PANCREATIC ACINUS Fibrosis, focal Atrophy, nos Atrophy, focal	(50) 1 (2%) 2 (4%) 7 (14%)	(50) 14 (28%)	(50) 3 (6%) 5 (10%)
#GASTRIC MUCOSA INFLAMMATION, NOS ULCER, NOS CALCIFICATION, FOCAL HYPERTROPHY, NOS	(50) 1 (2%) 1 (2%)	(50) 1 (2%)	(50) 3 (6%) 1 (2%)
#GASTRIC FUNDAL GLAND DILATATION, NOS	(50) 4 (8%)	(50) 9 (18%)	(50) 3 (6%)
#GASTRIC SUBMUCOSA EDEMA, NOS	(50)	(50)	(50) 1 (2%)
#SMALL INTESTINE METAPLASIA, OSSEOUS	(50)	(49)	(50) 1 (2%)

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

URINARY SYSTEM			
#KIDNEY Cyst, Nos Inflammation, Chronic	(50) 1 (2%) 1 (2%)	(50) 1 (2%)	(50)
NEPHROSIS, NOS	45 (90%)	42 (84%)	42 (84%)
#KIDNEY/TUBULE Pigmentation, Nos	(50)	(50) 1 (2%)	(50)
#URINARY BLADDER Mucocele	(50)	(50)	(49) 1 (2%)
#U. BLADDER/MUCOSA NECROSIS, NOS	(50)	(50)	(49) 1 (2%)
ENDOCRINE SYSTEM			
#PITUITARY Hyperplasia, NOS Hyperplasia, Focal	(46) 3 (7%) 1 (2%)	(50) 1 (2%) 1 (2%)	(50) 1 (2%)
#ANTERIOR PITUITARY CYST, NOS Hemorrhagic Cyst	(46) 1 (2%)	(50)	(50) 1 (2%)
HEMOSIDEROSIS	(50)	1 (2%)	(50)
#ADRENAL Congestion, nos	(50)	(50) 1 (2%)	(50)
#ADRENAL CORTEX HEMORRHAGIC CYST	(50)	(50)	(50) 1 (2%)
METAMORPHOSIS FATTY Cytoplasmic change, nos		1 (2%)	1 (2%)
CYTOPLASMIC VACUOLIZATION	7 (14%)	5 (10%)	1 (2%)
#ADRENAL MEDULLA Cytoplasmic Change, Nos	(50) 1 (2%)	(50)	(50)
HYPERPLASIA, NOS Hyperplasia, focal Angiectasis	5 (10%)	2 (4%) 1 (2%)	1 (2%) 3 (6%)
#THYROID Thyroglossal duct cyst	(49)	(50)	(50)

TABLE C1. MALE RATS: NONNEOPLASTIC LESIONS (CONTINUED)

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

D-Mannitol

CYSTIC FOLLICLES Degeneration, cystic Hyperplasia, c-cell	2 (4%) 2 (4%) 6 (12%)	7 (14%) 7 (14%)	2 (4%) 7 (14%) 4 (8%)
<pre>#PANCREATIC ISLETS Hyperplasia, Nos</pre>	(50)	(50) 1 (2%)	(50)
REPRODUCTIVE SYSTEM			
*MAMMARY GLAND Cystic Ducts Hemorrhagic Cyst Reaction, foreign Body Pigmentation, nos Hyperplasia, Cystic Adenosis Cystic Disease		(50) 5 (10%) 1 (2%) 1 (2%) 1 (2%) 1 (2%) 1 (2%) 8 (16%)	(50) 1 (2%) 8 (16%)
		(50)	(50) 1 (2%)
*PREPUTIAL GLAND Inflammation, suppurative Hyperplasia, cystic	(50) 1 (2%) 1 (2%)	(50) 1 (2%)	(50) 4 (8%) 3 (6%)
<pre>#PROSTATE INFLAMMATION, NOS INFLAMMATION, SUPPURATIVE INFLAMMATION, CHRONIC INFLAMMATION, CHRONIC SUPPURATIV DEGENERATION, CYSTIC HYPERPLASIA, EPITHELIAL</pre>	1 (2%) 1 (2%)	1 (2%) 1 (2%)	1 (2%)
#TESTIS ATROPHY, NOS HYPERPLASIA, INTERSTITIAL CELL	(50) 30 (60%) 2 (4%)	(50) 37 (74%) 2 (4%)	(50) 33 (66%) 1 (2%)
*EPIDIDYMIS GRANULOMA, SPERMATIC	(50) 1 (2%)	(50)	(50)
NERVOUS SYSTEM			
#BRAIN HEMORRHAGE	(50) 1 (2%)	(50)	(50) 1 (2%)

NECROSIS, FOCAL	1 (2%)		1 (2%)
#CEREBRAL BASAL SURFA Inflammation, suppurative	(50) 1 (2%)	(50)	(50)
#BRAIN/THALAMUS Hemorrhage Necrosis, Focal	(50)	(50) 1 (2%) 1 (2%)	(50)
#HYPOTHALAMUS Compression	(50) 1 (2%)	(50) 2 (4%)	(50) 2 (4%)
#PONS Compression	(50) 1 (2%)	(50)	(50)
#CEREBELLUM PSAMMOMA BODIES	(50)	(50)	(50)
SPECIAL SENSE ORGANS			
*EYE HEMORRHAGE	(50) 3 (6%)	(50)	(50) 1 (2%)
RETINOPATHY CATARACT	17 (34%) 15 (30%)	6 (12%) 6 (12%)	42 (84% 40 (80%
*EYE/CORNEA PERFORATING WOUND	(50) 1 (2%)	(50)	(50)
FOREIGN BODY, NOS INFLAMMATION, NOS	1 (2%)	1 (2%)	
1USCULOSKELETAL SYSTEM			
NONE			
BODY CAVITIES			
<pre>*MESENTERY FIBROSIS, FOCAL</pre>	(50)	(50) 1 (2%)	(50)
NECROSIS, FAT	6 (12%)	5 (10%)	
ALL OTHER SYSTEMS			
LEG HEMATOMA, NOS	1		
OMENTUM	3	2	11
PECIAL MORPHOLOGY SUMMARY			
NONE			

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

TABLE C2.

SUMMARY OF THE INCIDENCE OF NONNEOPLASTIC LESIONS IN FEMALE RATS FED DIETS CONTAINING D-MANNITOL

	CONTROL	LOW DOSE	HIGH DOSE
ANIMALS INITIALLY IN STUDY ANIMALS NECROPSIED ANIMALS EXAMINED HISTOPATHOLOGICALLY	50 50 50	50 50 50	50 50 50
INTEGUMENTARY SYSTEM			
*SKIN Ulcer, Chronic	(50) 1 (2%)	(50)	(50) 1 (2%)
*SUBCUT TISSUE EPIDERMAL INCLUSION CYST	(50)	(50)	(50) 1 (2%)
RESPIRATORY SYSTEM			
#LUNG/BRONCHIOLE Hyperplasia, nos Hyperplasia, adenomatous	(50) 2 (4%) 2 (4%)	(49)	(50) 3 (6%)
#LUNG CONGESTION, NOS INFLAMMATION, INTERSTITIAL HYPERPLASIA, ALVEOLAR EPITHELIUM HISTIOCYTOSIS	(50) 1 (2%) 3 (6%)	(49) 1 (2%)	(50) 1 (2%) 4 (8%) 1 (2%)
#ALVEOLAR EPITHELIUM HYPERPLASIA, ADENOMATOUS	(50) 2 (4%)	(49)	(50)
HEMATOPOIETIC SYSTEM			
#BONE MARROW Myelofibrosis	(50)	(50) 2 (4%)	(50)
#SPLEEN	(50)	(50) 1 (2%)	(50)
HEMORRHAGE Hematopoiesis	1 (2%)	2 (4%)	1 (2%)
#LYMPH NODE Hyperplasia, Nos	(49)	(50)	(50)

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

	CONTROL	LOW DOSE	HIGH DOSE
#MANDIBULAR L. NODE INFLAMMATION, NOS	(49)	(50)	(50)
HYPERPLASIA, NOS Hyperplasia, cystic	3 (6%)	1 (24)	1 (2%)
#MESENTERIC L. NODE Hyperplasia, lymphoid	(49) 1 (2%)	(50)	(50)
#INGUINAL LYMPH NODE Hyperplasia, lymphoid	(49) 1 (2%)	(50)	(50)
#LUNG Leukocytosis, Nos	(50)	(49)	(50)
HEMATOPOIESIS		1 (2%)	1 (2%)
#LIVER Leukocytosis, Nos	(50) 5 (10%)	(50)	(50)
HEMATOPOIESIS		1 (2%)	
IRCULATORY SYSTEM			
#MYOCARDIUM Inflammation, Nos	(50) 1 (2%)	(50)	(50)
INFLAMMATION, FOCAL INFLAMMATION, INTERSTITIAL	1 (24)	1 (2%)	1 (2%)
INFLAMMATION, CHRONIC FIBROSIS, FOCAL	2 (4%)	3 (6%)	1 (2%) 2 (4%)
#LIVER Thrombosis, Nos	(50)	(50)	(50) 1 (2%)
#PANCREAS PERIARTERITIS	(50)	(49)	(49) 1 (2%)
IGESTIVE SYSTEM			
#LIVER DEFORMITY, NOS	(50) 2 (4%)	(50)	(50)
NECROSIS, COAGULATIVE CYTOPLASMIC CHANGE, NOS	2 (4%)	2 (4%)	
CYTOPLASMIC CHANGE, NUS CYTOPLASMIC VACUOLIZATION	1 (2%)	4 (8%)	3 (6%)

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

D-Mannitol

TABLE C2.	FEMALE RATS:	NONNEOPLASTIC LESIONS (CONTINUED)

CYTOLOGIC ALTERATION, NOS Nodular regeneration	1 (2%)	1 (2%)	
#LIVER/CENTRILOBULAR METAMORPHOSIS FATTY Cytoplasmic vacuolization Atrophy, NOS	(50)	(50) 2 (4%) 1 (2%) 1 (2%)	(50) 1 (2%)
#LIVER/PERIPORTAL Metamorphosis Fatty	(50) 1 (2%)	(50) 1 (2%)	(50)
<pre>#BILE DUCT Hyperplasia, Nos Hyperplasia, Focal</pre>	(50) 43 (86%)	(50) 40 (80%)	(50) 49 (98%) 1 (2%)
#PANCREAS Atrophy, focal	(50)	(49)	(49) 1 (2%)
#PANCREATIC ACINUS Atrophy, Nos	(50) 2 (4%)	(49)	(49)
ATROPHY, FOCAL	5 (10%)	2 (4%)	2 (4%)
#GASTRIC MUCOSA ULCER, NOS	(50) 1 (2%)	(50)	(50)
#GASTRIC FUNDAL GLAND DILATATION, NOS	(50) 6 (12%)	(50) 23 (46%)	(50) 23 (46%)
#PEYER'S PATCH Inflammation, Nos	(50)	(50)	(49) 1 (2%)
#COLON Nematodiasis	(50)	(50)	(49) 1 (2%)
#COLONIC CRYPT OF LIE DILATATION, NOS	(50)	(50) 2 (4%)	(49)
URINARY SYSTEM			
#KIDNEY CYST, NOS	(50)	(50)	(50) 1 (2%)
GLOMERULONEPHRITIS, NOS Nephrosis, nos	29 (58%)	10 (20%)	1 (2%) 12 (24%)
#KIDNEY/CORTEX PIGMENTATION, NOS	(50)	(50)	(50) <u>1 (2%)</u>

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

#KIDNEY/TUBULE PIGMENTATION, NOS	(50)	(50) 1 (2%)	(50) 1 (2%)
ENDOCRINE SYSTEM			
#PITUITARY Hyperplasia, nos	(50) 5 (10%)	(47) 2 (4%)	(48) 2 (4%)
#ANTERIOR PITUITARY ANGIECTASIS	(50) 2 (4%)	(47) 2 (4%)	(48) 2 (4%)
#ADRENAL Cytoplasmic vacuolization	(49)	(50) 1 (2%)	(50)
#ADRENAL CORTEX Hemorrhage Cytoplasmic vacuolization Hyperplasia, focal	(49) 11 (22%)	(50) 1 (2%) 7 (14%) 1 (2%)	(50) 9 (18%)
#ADRENAL MEDULLA Hyperplasia, focal	(49)	(50)	(50) 4 (8%)
<pre>#THYROID ULTIMOBRANCHIAL CYST DEGENERATION, CYSTIC ATROPHY, FOCAL HYPERPLASIA, CYSTIC HYPERPLASIA, C-CELL</pre>	(50) 2 (4%) 1 (2%) 1 (2%) 3 (6%)	(50) 5 (10%)	(50) 1 (2%) 5 (10%
REPRODUCTIVE SYSTEM			******
*MAMMARY GLAND CYSTIC DUCTS INFLAMMATION, SUPPURATIVE HYPERPLASIA, CYSTIC ADENOSIS CYSTIC DISEASE	(50) 2 (4%) 1 (2%) 3 (6%) 35 (70%)	(50) 3 (6%) 1 (2%) 5 (10%) 1 (2%) 36 (72%)	(50) 1 (2%) 1 (2%) 2 (4%) 40 (80%)
*PREPUTIAL GLAND CYST, NOS Epidermal inclusion cyst Cystic ducts	(50) 1 (2%)	(50)	(50) 1 (2%)

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

INFLAMMATION, SUPPURATIVE Hyperplasia, cystic	2 (4%) 1 (2%)	1 (2%) 2 (4%)	1 (2%) 2 (4%)
*VAGINA DISPLACEMENT, NOS	(50)	(50) 1 (2%)	(50)
#UTERUS Hydrometra Inflammation, Suppurative Decidual Alteration, Nos	(50)	(50) 1 (2%)	(50) 2 (4%) 1 (2%) 1 (2%)
#UTERUS/ENDOMETRIUM	(50)	(50)	(50)
CYST, NOS Inflammation, suppurative Hyperplasia, cystic Hyperplasia, adenomatous	1 (2%) 2 (4%) 1 (2%)	1 (2%) 1 (2%)	2 (4%)
#ENDOMETRIAL GLAND Cystic ducts	(50) 1 (2%)	(50)	(50)
	(50)	(50)	(50)
CYST, NOS Follicular Cyst, Nos Corpus Luteum Cyst Metamorphosis Fatty	1 (2%) 1 (2%)	1 (2%) 1 (2%)	3 (6%)
IERVOUS SYSTEM			
#BRAIN Metaplasia, osseous	(50)	(50) 1 (2%)	(50)
#HYPOTHALAMUS Compression	(50) 10 (20%)	(50) 3 (6%)	(50) 2 (4%)
#PONS Compression	(50)	(50)	(50) 1 (2%)
DEGENERATION, NOS	(50)	(50) 1 (2%)	(50)
PECIAL SENSE ORGANS			
*EYE HEMORRHAGE	(50)	(50) 2 (4%)	(50) 1 (2%)

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

RETINOPATHY CATARACT	9 (18%)	43 (86%) 40 (80%)	33 (66%) 32 (64%)
MUSCULOSKELETAL SYSTEM			
*SKULL Hyperostosis	(50)	(50)	(50) 1 (2%)
*MUSCLE OF BACK FIBROSIS	(50)	(50) 1 (2%)	(50)
BODY CAVITIES			
*ABDOMINAL WALL Necrosis, fat	(50)	(50) 1 (2%)	(50)
*MESENTERY Hematoma, Nos	(50)	(50)	(50) 1 (2%)
LIPOGRANÚLOMA NECROSIS, FAT	8 (16%)	1 (2%) 7 (14%)	3 (6%)
ALL OTHER SYSTEMS			
DIAPHRAGM NECROSIS, FAT		1	
OMENTUM Necrosis, fat	4	1	1
SPECIAL MORPHOLOGY SUMMARY			
NONE			
# NUMBER OF ANIMALS WITH TISSUE * NUMBER OF ANIMALS NECROPSIED	E EXAMINED MICROSCOPIC	CALLY	

APPENDIX D

SUMMARY OF THE INCIDENCE OF NONNEOPLASTIC LESIONS IN MICE FED DIETS CONTAINING D-MANNITOL

TABLE D1.

SUMMARY OF THE INCIDENCE OF NONNEOPLASTIC LESIONS IN MALE MICE FED DIETS CONTAINING D-MANNITOL

	CONTROL	LOW DOSE	HIGH DOSE
ANIMALS INITIALLY IN STUDY Animals necropsied Animals examined histopathologically	50 50 50	50 50 50	50 49 49
INTEGUMENTARY SYSTEM			
×SKIN	(50)	. (50)	(49)
INFLAMMATION, CHRONIC Ulcer, chronic	1 (2%) 1 (2%) 4 (8%) 1 (2%)	11 (22%) 1 (2%)	1 (2%)
FIBROSIS Keloid Hyperplasia, focal	1 (2%)	3 (6%)	1 (2%)
*SUBCUT TISSUE Inflammation, chronic Inflammation, granulomatous	(50) 2 (4%)	(50)	1 (2%)
RESPIRATORY SYSTEM		****	
<pre>#LUNG/BRONCHIOLE HYPERPLASIA, NOS</pre>	(50) 1 (2%)	(50) 4 (8%)	(49)
CONGESTION, NOS	(50) 1 (2%)	(50) 1 (2%)	(49) 4 (8%)
INFLAMMATION, INTERSTITIAL Inflammation, granulomatous Inflammation, focal granulomatou	0 ((9 %)	1 (2%) 8 (16%)	1 (2%) 20 (41%
PROTETNOCTO ALVEOLAR	11 (22%)	1 (2%)	
HYPERPLASIA, ADENOMATOUS Hyperplasia, alveolar epithelium	1 (22%)	10 (20%) 4 (8%)	26 (53%
EMATOPOIETIC SYSTEM			
*MULTIPLE ORGANS	(50)	(50)	(49)
HYPERPLASIA, LYMPHOID Hematopoiesis	1 (2%)		1 (2%)

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

	-	-	
#BONE MARROW Hyperplasia, lymphoid Hypoplasia, hematopoietic	(47) 1 (2%) 1 (2%)	(48)	(46)
#SPLEEN Hyperplasia, lymphoid Hematopoiesis	(49) 1 (2%) 4 (8%)	(49) 3 (6%)	(47) 9 (19%)
#MANDIBULAR L. NODE MASTOCYTOSIS	(49)	(50) 1 (2%)	(47)
#PANCREATIC L.NODE Hyperplasia, lymphoid	(49)	(50) 1 (2%)	(47)
#MESENTERIC L. NODE INFLAMMATION, SUPPURATIVE ANGIECTASIS Hyperplasia, lymphoid Hematopoiesis	(49) 7 (14%) 4 (8%)	(50) 2 (4%)	(47) 1 (2%) 1 (2%) 2 (4%)
#LUNG Hyperplasia, lymphoid Hematopoiesis	(50) 1 (2%)	(50) 1 (2%)	(49)
#PEYER'S PATCH Hyperplasia, Lymphoid	(45)	(47) 1 (2%)	(47)
IRCULATORY SYSTEM			
#BRAIN PERIARTERITIS	(50)	(50)	(49) 1 (2%)
#HEART Inflammation, acute/chronic	(50)	(50) 1 (2%)	(49)
*MESENTERY PERIARTERITIS	(50)	(50)	(49) 1 (2%)
DIGESTIVE SYSTEM			
#LIVER CYST, NOS	(50) 1 (2%)	(50) 1 (2%)	(49)

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

D-Mannitol

NECRUSIS, CUAGULATIVE	2 (4%) 1 (2%)	1 (2%)	1 (2%)
METAMORPHOSIS FATTY	2 (4%)		1 (2%)
CALCIFICATION, NDS Cytoplasmic vacuolization	2 (4%)	1 (2%)	1 (2%)
#LIVER/CENTRILOBULAR CYTOPLASMIC VACUOLIZATION	(50) 1 (2%)	(50) 4 (8%)	(49) 5 (10%)
#BILE DUCT Hyperplasia, Nos	(50) 1 (2%)	(50)	(49)
#PANCREAS CYSTIC DUCTS Inflammation, Chronic	(48)	(49) 2 (4%) 2 (4%)	(47) 1 (2%)
#PEYER'S PATCH Inflammation, Nos	(45)	(47)	(47) 1 (2%)
*RECTUM PROLAPSE Inflammation, Chronic Ulcer, Chronic	(50)	(50) 1 (2%) 1 (2%) 1 (2%)	(49)
*ANUS INFLAMMATION, CHRONIC	(50)	(50) 1 (2%)	(49)
URINARY SYSTEM			
#KIDNEY	(50)	(50)	(47)
INFLAMMATION, SUPPURATIVE Nephrosis, nos	1 (2%) 15 (30%)	29 (58%)	30 (64%)
#KIDNEY/TUBULE DILATATION, NOS	(50)	(50) 1 (2%)	(47)
#U.BLADDER/SUBMUCOSA FIBROSIS	(48) 1 (2%)	(50)	(46)
ENDOCRINE SYSTEM			
#THYROID DEGENERATION, CYSTIC	(50) 7 (14%)	(50) <u>8 (16%)</u>	(47) <u>6 (13%)</u>

* NUMBER OF ANIMALS NECROPSIED

<pre>#PARATHYROID Hyperplasia, Nos</pre>	(34) 1 (3%)	(28)	(27)
REPRODUCTIVE SYSTEM			
*PREPUTIAL GLAND Cystic Ducts Inflammation, suppurative Inflammation, chronic suppurativ		(50) 1 (2%) 2 (4%)	2 (4%)
THELAMMATION, CHRONIC		(50)	1 (2%)
NERVOUS SYSTEM			
#CEREBRUM HEMORRHAGE	(50) 1 (2%)	(50)	(49)
#BRAIN/THALAMUS PSAMMOMA BODIES	(50) 9 (18%)	(50) 13 (26%)	(49) 17 (35%
SPECIAL SENSE ORGANS None			
MUSCULOSKELETAL SYSTEM None			
BODY CAVITIES			
*MESENTERY STEATITIS NECROSIS, FAT	1 (2%)	(50)	(49) 1 (2%) 3 (6%)
ALL OTHER SYSTEMS			

* NUMBER OF ANIMALS NECROPSIED

SPECIAL MORPHOLOGY SUMMARY NO LESION REPORTED 3 2 1 AUTOLYSIS/NO NECROPSY 1 # NUMBER OF ANIMALS WITH TISSUE EXAMINED MICROSCOPICALLY * NUMBER OF ANIMALS NECROPSIED

TABLE D2.

SUMMARY OF THE INCIDENCE OF NONNEOPLASTIC LESIONS IN FEMALE MICE FED DIETS CONTAINING D-MANNITOL

	CONTROL	LOW DOSE	HIGH DOSE
ANIMALS INITIALLY IN STUDY ANIMALS NECROPSIED ANIMALS EXAMINED HISTOPATHOLOGICALLY	50 48 48	50 48 48	50 49 49
INTEGUMENTARY SYSTEM			
ETROCTE DIEEUCE	(48)	(48) 1 (2%)	(49)
RESPIRATORY SYSTEM			
*LARYNGEAL GLAND Inflammation, suppurative	(48)	(48)	(49) 1 (2%)
#TRACHEAL GLAND Inflammation, suppurative	(31)	(29) 1 (3%)	(27)
<pre>#LUNG/BRONCHIOLE Hyperplasia, Nos</pre>	(48) 1 (2%)	(48)	(49) 1 (2%)
#LUNG CONGESTION, NOS INFLAMMATION, INTERSTITIAL PNEUMONIA, ASPIRATION INFLAMMATION, FOCAL GRANULOMATOU	(48)	(48) 14 (29%)	
HYPERPLASIA, ADENOMATOUS Hyperplasia, alveolar epithelium	10 (21%) 1 (2%)	19 (40%) 1 (2%)	16 (33%) 1 (2%)
HEMATOPOIETIC SYSTEM			
*MULTIPLE ORGANS LEUKEMOID REACTION HYPERPLASIA, RETICULUM CELL	(48) 1 (2%)	(48) 1 (2%)	(49)
HYPERPLASIA, LYMPHOID HEMATOPOIESIS	1 (2%)	6 (13%)	1 (2%) 1 (2%)
*MEDIASTINUM Hyperplasia, lymphoid	(48)	(48) 1 (2%)	(49) 2 (4%)

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

#SPLEEN Hyperplasia, lymphoid Hematopoiesis	(48) 1 (2%) 4 (8%)	(47) 5 (11%) 5 (11%)	(48) 7 (15% 5 (10%)
#SPLENIC RED PULP Hyperplasia, lymphoid	(48)	(47) 1 (2%)	(48)
#BRONCHIAL LYMPH NODE Hyperplasia, lymphoid	(48)	(47) 1 (2%)	(48)
#MESENTERIC L. NODE NECROSIS, FOCAL ANGIECTASIS HYPERPLASIA, LYMPHOID HEMATOPOIESIS	(48)	(47) 1 (2%) 1 (2%) 3 (6%)	(48) 1 (2%) 1 (2%)
#RENAL LYMPH NODE Hyperplasia, lymphoid	(48)	(47)	(48) 1 (2%)
#INGUINAL LYMPH NODE Hyperplasia, lymphoid	(48)	(47)	(48) 1 (2%)
#LUNG Hyperplasia, lymphoid	(48)	(48) 2 (4%)	(49) 2 (4%)
#LIVER HYPERPLASIA, LYMPHOID HEMATOPOIESIS	(48) 1 (2%)	(48) 1 (2%)	(49) 3 (6%)
#KIDNEY Hyperplasia, lymphoid	(48) 1 (2%)	(48)	(49)
#URINARY BLADDER Hyperplasia, lymphoid	(47)	(48)	(48) 1 (2%)
#OVARY Hyperplasia, lymphoid	(44) 1 (2%)	(44)	(46)
IRCULATORY SYSTEM			
#HEART ENDOCARDITIS, BACTERIAL	(48) 1 (2%)	(48)	(48)
#MYOCARDIUM INFLAMMATION, SUPPURATIVE	(48) 1 (2%)	(48)	(48)

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

D-Mannitol

PERIARTERITIS			1 (2%)
#UTERUS PERIARTERITIS	(47)	(48) 1 (2%)	(49)
DIGESTIVE SYSTEM			
#LIVER INFLAMMATION, FOCAL INFLAMMATION, MULTIFOCAL INFLAMMATION, ACUTE/CHRONIC	(48) 2 (4%) 2 (4%) 1 (4%)	(48) 2 (4%) 4 (8%)	(49) 2 (4%) 15 (31%)
NECROSIS, COAGULATIVE Cytoplasmic change, nos	((24)	2 (4%)	1 (2%) 1 (2%)
CYTOPLASMIC VACUOLIZATION		2 (4%)	
#LIVER/PERIPORTAL Cytoplasmic vacuolization	(48) 1 (2%)	(48)	(49)
#BILE DUCT Degeneration, Hyaline Hyperplasia, Nos	(48)	(48) 1 (2%) 1 (2%)	(49)
#PANCREAS Cystic Ducts Abscess, Nos	(48) 1 (2%)	(45) 1 (2%)	(45) 1 (2%)
INFLAMMATION, CHRONIC Atrophy, focal	1 (2%)	1 (2%)	1 (2%)
#COLON Nematodiasis	(46)	(43)	(44) 1 (2%)
#COLONIC SUBMUCOSA Inflammation, suppurative	(46) 1 (2%)	(43)	(44)
URINARY SYSTEM			
*KIDNEY	(48)	(48)	(49)
INFLAMMATION, CHRONIC NEPHROSIS, NOS	1 (2%) 1 (2%)	3 (6%)	14 (29%)
ENDOCRINE SYSTEM			
#PITUITARY HEMORRHAGIC CYST	(45)	(44)	(47) 1 (2%)

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

D-Mannitol

HYPERPLASIA, NOS			1 (2%)
#ADRENAL Degeneration, Nos	(48) 1 (2%)	(47)	(48)
#ADRENAL CORTEX EOSINOPHILIC CYTO CHANGE	(48)	(47) 1 (2%)	(48)
#THYROID DEGENERATION, CYSTIC ATROPHY, SENILE Hyperplasia, Follicular-cell	(46) 4 (9%) 3 (7%) 2 (4%)	(48) 6 (13%) 2 (4%)	(49) 9 (18%)
REPRODUCTIVE SYSTEM			
*MAMMARY GLAND Cystic Ducts	(48) 1 (2%)	(48)	(49) 4 (8%)
*VAGINA Hyperplasia, epithelial	(48)	(48) 1 (2%)	(49)
#UTERUS Hydrometra Inflammation, suppurative Inflammation, chronic suppurativ	(47) 3 (6%) 1 (2%)	(48)	(49) 2 (4%) 13 (27%)
#UTERUS/ENDOMETRIUM INFLAMMATION, SUPPURATIVE ABSCESS, NOS DEGENERATION, CYSTIC HYPERPLASIA, NOS	(47) 2 (4%) 1 (2%)	(48) 3 (6%) 1 (2%) 1 (2%)	(49) 2 (4%) 1 (2%)
HYPERPLASIA, CYSTIC Metaplasia, squamous	35 (74%)	42 (88%)	35 (71%) 1 (2%)
#UTERUS/MYOMETRIUM Angiectasis	(47)	(48) 1 (2%)	(49)
#DVARY FOLLICULAR CYST, NOS INFLAMMATION, NOS INFLAMMATION, SUPPURATIVE	(44) 4 (9%) 1 (2%)	(44) 9 (20%) 1 (2%)	(46) 11 (24%) 1 (2%) 2 (4%) 2 (4%)
ABSCESS, NOS INFLAMMATION, CHRONIC SUPPURATIV Abscess, chronic	1 (2%) 1 (2%)	1 (2%) 1 (2%)	3 (7%)

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

D-Mannitol

INFLAMMATION, GRANULOMATOUS			1 (2%)
NERVOUS SYSTEM			
#BRAIN DEGENERATION, NOS CHOLESTEROL DEPOSIT	(48)	(48) 1 (2%) 1 (2%)	(49)
#BRAIN/THALAMUS PSAMMOMA BODIES	(48) 7 (15%)	(48) 19 (40%)	(49) 12 (24%
#HYPOTHALAMUS Compression	(48)	(48) 1 (2%)	(49)
SPECIAL SENSE ORGANS			
*EYE/CORNEA INFLAMMATION, NOS		(48)	(49) 1 (2%)
MUSCULOSKELETAL SYSTEM			
NONE			
BODY CAVITIES			
*PERITONEUM Inflammation, suppurative	(48)	(48) 1 (2%)	(49) 1 (2%)
*MESENTERY STEATITIS NECROSIS, FAT	(48)	(48) 1 (2%) 1 (2%)	(49) 1 (2%) 4 (8%)
ALL OTHER SYSTEMS			
*MULTIPLE ORGANS INFLAMMATION, NOS INFLAMMATION, SUPPURATIVE	(48) 1 (2%)	(48)	(49) 2 (4%)
BROAD LIGAMENT HEMORRHAGE		1	

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

	CONTROL	LOW DOSE	HIGH DOSE
SPECIAL MORPHOLOGY SUMMARY		·	
NO LESION REPORTED Autolysis/no necropsy	1 2	2	1
<pre># NUMBER OF ANIMALS WITH TISSUE EX/ * NUMBER OF ANIMALS NECROPSIED</pre>	AMINED MICROSCOP	ICALLY	

D-Mannitol

APPENDIX E

ANALYSIS OF D-MANNITOL (MIDWEST RESEARCH INSTITUTE)

A. ELEMENTAL ANALYSIS

Element	С	Н	0
Theory	39.56	7.74	52.70
Determined			
1. Lot No. 4644:	39.84 39.72	7.78 7.79	
2. Lot No. 00041:	40.04 40.08	7.83 7.67	
3. Lot No. 20022:	39.42 39.64	7.71 7.65	53.11 53.01

B. WATER ANALYSIS (Karl Fischer)

- 1. Lot No. 4644: $0.1614 \pm 0.0002(\delta)\%$
- 2. Lot No. 00041: $1.89 \pm 0.48(\delta)\%$
- 3. Lot No. 20022: $0.26 \pm 0.05(\delta)\%$

C. TITRATION WITH THIOSULFATE AFTER PERIODATE REACTION WITH MANNITOL

- (U.S. Pharmacopeia, 1975)
- 1. Lot No. 4644: $100.5 \pm 0.6(\delta)\%$
- 2. Lot No. 000441: 97.8 \pm 0.7(δ)% (corrected for 1.89% water)
- 3. Lot No. 20022: 99.0 \pm 0.4(δ)% (corrected for 0.26% water)

D. MELTING POINT (Lot No. 4644)

Determined 166° - 168°C (visual, capillary) 166° - 170°C (Du Pont 900DTA) Literature Values(Marti, 1930) 165.99°C

E. OPTICAL ROTATION (Lot No. 4644)

Determined

 $[\alpha]_{D}^{28^{\circ}} = + 18.3^{\circ} \pm 0.3^{\circ} (\delta)$

C = 0.4 mg/ml in 5% aqueous ammonium molybdate

 $[\alpha]_{D}^{28^{\circ}} = + 129.2^{\circ} \pm 0.8^{\circ} (\delta)$

C = 0.4 mg/ml in 5% acidified aqueous ammonium molybdate

F. THIN-LAYER CHROMATOGRAPHY

Plates: Silica gel 60 F-254

Ref. Standard: D-Glucose

Amount Spotted: 35 and 70 μ g

Visualization: 0.5% KMnO4 in 1N NaOH

 System 1 - Butanol:water (90:10), unsaturated tank Lot No. 4644: R_f = 0.20 R_{st} □ 0.87

Literature Values (Richtmyer and Hudson, 1951) $\left[\alpha\right]_{D}^{20^{\circ}} = + 14.9^{\circ}$

C = 0.4 mg/ml in 5% aqueous ammonium molybdate

 $[\alpha]_{D}^{20^{\circ}} = + 140.3^{\circ}$

C = 0.32 mg/ml in 5% acidified aqueous ammonium molybdate

2. System 2 -95% ethanol:water:ammonium hydroxide (77:15:8) Lot No. 4644: $R_f = 0.39$ $R_{st} = 1.1$ Lot No. 20022: $R_f = 0.44$ $R_{st} = 1.08$ Isobutanol:water (90:10) 3. System 3 -Lot No. 00041: Rf = 0.11 $R_{st} = 0.81$ Lot no. 20022: $R_f = 0.13$ R_{st} □ 0.79 4. System 4 - Ethanol:water:ammonium hydroxide (60:12:6) Lot No. 00041: $R_f = 0.27$ $R_{st} = 1.2$ **G. VAPOR-PHASE CHROMATOGRAPHY** Instrument: Tracor MT220 Detector: Flame ionization Column: 10% UCW-98, 1.8 m x 4 mm I.D. Oven Temperature Program: 100°-250°C at 10°C/minute

Preparation of Sample: The silvl derivative was prepared by adding the contents of a freshly opened 1-ml vial of "Tri-sil Z" (Pierce Chemical Co.) to 10-12 mg mannitol. The container was tightly capped and shaken vigorously for a minute in a water bath at 60°-70°C. The mannitol completely dissolved, and the resulting solution was injected on a gas chromatograph.

Lot No. 4644: Results: Major peak and one impurity

Peak	Retention Time (minutes)	Retention Time (Relative to Mannitol Derivative)	Area (Relative to Mannitol Derivative)
1	12.5	1.00	100
2	13.8	1.10	0.2

H. SPECTRAL DATA

	Methods	Results
1. Infrared		
a. Lot No. 4644	Instrument: Beckman IR-12 Cell: 1.5% KBr pellet	See Figure 5. Consistent with literature spectrum (Sadtler Standard Spectra)
b. Lot No. 00041 and Lot No. 20022	Instrument: Beckman IR-12 Cell: 1% KBr pellet	See Figures 6 and 7. Consistent with literature spectrum (Sadtler Standard Spectra)

	Methods	Results
2. Ultraviolet/Visible All three batches	Instrument: Cary 118 Solvent: Water	No maxima between 215 and 350 nm (ultraviolet range). No absorbance between 350 and 800 nm (visible range) at a concentration of 2 mg/ml. No literature value found. Spectra consistent with those expected for the structure.
 Nuclear Magnetic Resonance Lot No. 4644 	Instrument: Varian HA-100 Solvent: D ₂ O with internal sodium 3-trimethylsilyl propi- onate - 2,2,3,3-d4	Assignments: See Figure 8. (1) m, δ 3.57 to 4.00 ppm (2) s, δ 4.75 ppm Integration Ratios: (1) 8.00 (2) HDO, -OH Consistent with literature spectrum (Sadtler Standard Spectra)
b. Lot No. 00041	Instrument: Varian EM-360 60 MHz Solvent: D ₂ O with internal sodium 3-trimethylsilyl propi- onate - 2,2,3,3-d4	Assignments: See Figure 9. (1) m, δ 3.48 to 4.03 ppm (2) s, δ 4.77 ppm Integration Ratios: (1) 8.00 (2) HDO, -OH Consistent with literature spectrum (Sadtler Standard Spectra)
c. Lot No. 20022	Instrument: Varian EM 360-A Solvent: D ₂ O with internal sodium 3-trimethylsilyl propi- onate - 2,2,3,3-d4	Assignments: See Figure 10. (1) m, δ 3.35 to 4.07 ppm (2) s, δ 4.78 ppm Integration Ratios: (1) 8.00 (2) HDO, -OH Consistent with literature reference (Sadtler Standard Spectra)



Figure 5. Infrared Absorption Spectrum of D-Mannitol (Lot No. 4644)

D-Mannitol







Figure 7. Infrared Absorption Spectrum of D-Mannitol (Lot No. 20022)



Figure 8. Nuclear Magnetic Resonance Spectrum of D-Mannitol (Lot No. 4644)

D-Mannitol



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APPENDIX F

ANALYSIS FOR STABILITY OF D-MANNITOL (MIDWEST RESEARCH INSTITUTE)

D-Mannitol

A. STABILITY OF BULK CHEMICAL

Samples of D-mannitol were stored for 2 weeks at -20°, 5°, 25°, and 60°C and then analyzed by the periodate-iodate thiosulfate titration method (U.S. Pharmacopeia, 1975).

B. RESULTS

Storage Temperature (°C)	Average Percent Compound Recovered	
-20	97.6 ± 0.3	
5	98.1 ± 0.3	
25	98.2 ± 0.3	
60	97.8 ± 0.3	

C. CONCLUSION

D-Mannitol is stable under conditions of storage for 2 weeks at temperatures of up to 60°C.

APPENDIX G

ANALYSIS OF FORMULATED DIETS FOR HOMOGENEITY AND STABILITY (MIDWEST RESEARCH INSTITUTE)

A. HOMOGENIZATION

1. Mixing and sampling protocol: D-Mannitol and Wayne Lab-Blox® meal were mixed in equal amounts (152.8 g each). Then 604.4 g of plain feed was placed in a Patterson-Kelly® shell blender, followed by the above premix, equally distributed, and finally a second 604.4-g portion of plain feed (total D-mannitol, 152.8 g; total feed, 1,361.5 g; 10.1% chemical-on-feed mixture). At elapsed mixing times of 5, 10, and 15 minutes, samples were removed from the top of each shell and the bottom trap of the blender for subsequent analysis.

2. Extraction and analysis procedure: Two-gram samples of the D-mannitol/feed mixtures were mixed with 50 ml of water in an ultrasonic vibratory bath for 30 seconds and then triturated for 1 minute using a Polytron® high-speed blender. The resulting mixture was centrifuged, and the aqueous supernatant was decanted into a 100-ml volumetric flask. The extraction was repeated with fresh water on the feed residue, and the centrifuged supernatant was combined with the first supernatant solution and made up to the 100-ml volume with additional water.

One-milliliter aliquots of the aqueous extract solutions were mixed with 3 ml of n-butaneboronic acid solution (in pyridine, 10 mg/ml). The resulting solution contains a 1:15 molar ratio of D-mannitol: n-butaneboronic acid; lower ratios adversely affected the yield of the mannitol boronate ester (the species detected in the vapor-phase chromatographic analysis). The derivative solutions were placed in the ultrasonic vibratory bath for 30 seconds before injection into the chromatograph.

Instrument: Tracor MT-220 Vapor-phase chromatograph

Column: 3% OV-17 on Chromosorb Q, 80/100 mesh, 1.5 m x 4 mm I.D., glass, silanized

Detector: Flame ionization

Temperature: Inlet, 250°C Oven, 210°C, isothermal Detector, 260°C

Retention time of derivative: 2.9 minutes

3. Results

Sample Time (min)	Sampling Location	Average Percent Compound Recovered (a)	
5	Right	11.1 ± 1.1	
5	Left	12.5 ± 1.1	
5	Bottom	10.3 ± 1.1	
10	Right	12.0 ± 1.1	
10	Left	12.4 ± 1.1	
10	Bottom	9.6 ± 1.1	
15	Right	11.3 ± 1.1	
15	Left	11.5 ± 1.1	
15	Bottom	10.3 ± 1.1	

(a) Corrected for spike recovery yield of 102%

4. Conclusion: The most homogeneous mixture is obtained after 15 minutes mixing time.

B. HEAT STABILITY

1. Mixing and storage: D-Mannitol (2.5094 g) and Wayne Lab-Blox® Rodent Feed (22.5022 g) were mixed in a mortar. Samples of the mixture were removed and stored for 2 weeks at -20°, 5°, 25°, and 45°C, respectively. These samples were then extracted, derivatized, and analyzed by vapor-phase chromatography.

2. Analysis results

Storage Temperature (°C)	Average Percent Compound Recovered (a)	
-20	10.0 ± 1.1	
5	10.5 ± 1.1	
25	9.7 ± 1.1	
45	9.5 ± 1.1	

(a) Corrected for a spiked recovery value of 102%.

There is no significant difference between the samples stored at the various temperatures.

3. Conclusion: D-Mannitol mixed with feed is stable for 2 weeks at temperatures of up to 45°C.

D-Mannitol

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APPENDIX H

ANALYSIS OF FORMULATED DIETS FOR CONCENTRATIONS OF D-MANNITOL (SOUTHERN RESEARCH INSTITUTE)

A 0.500 g feed sample was weighed out in a small sample test tube. Five milliliters of distilled water was mixed with the sample and then triturated for 30 seconds using a low speed on the Polytron blender. This mixture was transferred to a 15-ml centrifuge tube and centrifuged for 5 minutes. The supernatant from this was then mixed with Celite filter aid and filtered using a Millipore-suction filtration apparatus with a Whatman 42 filter. The extraction of the feed was then repeated and the filter paper washed with three l-ml portions of distilled H₂O. The aqueous filtrate was then decanted into a 25-ml volumetric flask and brought to volume with washings from the filter flask. A l-ml aliquot was taken from the filtered extract and dried using a gentle stream of nitrogen. After drying, a l-ml aliquot of n-butaneboronic acid in pyridine (10 mg/ml) was added to the sample and shaken well. The samples were analyzed after 4 hours by vapor phase chromatography under conditions specified.

Column: 3% OV-17 on Chromosorb Q, 80/100 mesh, 0.6 m x 4 mm I.D., glass, silanized Detector: Flame ionization Temperature: Inlet, 250°C Oven, 210°C, isothermal

Detector, 260°C

Retention Time: 2.9 minutes

Injection Size: 1 μ 1

Results: See Table H1.

		Concentration (a) of D-mannitol for target concentration of		
Week Mixed	Week Used	25,000 ppm	50,000 ppm	
04/04/77	04/15/77		51,600	
06/27/77	06/29/77	27,600	47,600	
08/09/77	08/11/77	3,900 <i>(b)</i>	48,500	
10/03/77	10/05/77	20,600	44,950	
10/31/77	11/01/77	25,200	56,400	
12/05/77	12/07/77	24,700	48,900	
01/09/78	01/13/78	24,100	46,400	
02/06/78	02/08/78	27,000	52,500	
03/06/78	03/08/78	26,200		
04/03/78	04/05/78	,	49,200	
05/01/78	05/03/78	25,150	47,200	
06/05/78	06/07/78	27,600	49,900	
06/26/78	06/28/78	24,500	46,600	
07/24/78	07/26/78	23,400	48,700	
08/21/78	08/23/78	24,500	49,800	
09/18/78	09/20/78	27,800	51.300	
10/16/78	10/18/78	26,500	51,700	
11/13/78	11/15/78	23,600	47,200	
12/11/78	12/13/78		50.200	
12/14/78	12/16/78	26,450		
01/08/79	01/10/79	24,800	48,600	
		24,800		
02/05/79	02/07/79	22,500	48,250	
03/05/79	03/07/79	27,450	52,700	
04/02/79	04/04/79	26,900	54,400	
04/30/79	05/02/79	26,900	51,000	
05/28/79	05/30/79	25,500	51,700	
06/25/79	06/27/79	26,900	52,700	
07/26/79	07/28/79	25,000	47,800	
08/20/79	08/22/79		54,100	
08/23/79	08/25/79	24,000	- ,	
09/17/79	09/19/79	24,400	50,100	
10/15/79	10/17/79	23,600	43,900	
11/12/79	11/14/79	23,400	48,300	
12/10/79	12/12/79	24,400	26,700 (c)	
01/07/80	01/09/80	25,200	53,800	
02/04/80	02/06/80	24,500	51,600	
03/03/80	03/05/80	26,000	49,000	
03/31/80	04/02/80	27,400	54,700	
ean (ppm)		25,281	50,838	
andard Deviation		1,669	2,894	
befficient of Variation (%)		6.6	5.8	
ange (ppm)		20,600 - 27,800	43,900 - 56,40	
umber of Samples		34	34	

TABLE H1. ANALYSIS OF FORMULATED DIETS FOR CONCENTRATIONS OF D-MANNITOL

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

(b) Probably sampling error: not included in calculation of mean.

(c) Probably analyzed 25,000 ppm diet; not included in calculation of mean.

D-Mannitol

APPENDIX I

FEED CONSUMPTION BY RATS AND MICE RECEIVING D-MANNITOL IN THE CHRONIC STUDY

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	Control	Low Dose		High Dose	
Feed	Grams Feed/ Day <i>(a)</i>	Grams Feed/ Day <i>(a)</i>	Low/ Control (b)	Grams Feed/ Day <i>(a)</i>	High/ Control <i>(b)</i>
Aales					
4	16.0	16.0	1.0	16.0	1.0
26	15.0	19.0	1.3	16.0	1.1
48	17.4	17.4	1.0	16.4	0.9
68	16.0	17.0	1.1	17.0	1.1
89	14.0	15.0	1.1	14.0	1.0
104	14.0	15.0	1.1	15.0	1.1
Mean	15.4	16.6	1.1	15.7	1.0
SD (c)	1.3	1.6	0.1	1.1	0.1
CV (d)	8.4	9.6	9.1	7.0	10.0
emales	- <u> - </u>				
4	12.0	12.0	1.0	10.0	0.8
26	11.0	11.0	1.0	11.0	1.0
48	10.6	10.6	1.0	11.6	1.1
68	12.0	11.0	0.9	11.0	0.9
. 89	11.0	11.0	1.0	11.0	1.0
104	12.0	12.0	1.0	11.0	0.9
Mean	11.4	11.3	1.0	10.9	1.0
SD (c)	0.6	0.6	0.0	0.5	0.1
CV (d)	5.3	5.3	0.0	4.6	10.0

(a) Grams of feed consumed per animal per day.

(b) Grams of feed consumed per day by the dosed group divided by that for the controls.

(c) Standard deviation

(d) Coefficient of variation \blacksquare (standard deviation/mean) x 100

Week	Control	Low Dose		High Dose	
	Grams Feed/ Day (a)	Grams Feed/ Day <i>(a)</i>	Low/ Control (b)	Grams Feed/ Day <i>(a)</i>	High/ Control <i>(b)</i>
lales					
5	10.3	10.3	1.0	10.3	1.0
27	8.0	8.0	1.0	9.0	1.1
48	9.3	9.3	1.0	9.3	1.0
69	9.3	9.3	1.0	9.4	1.0
87	6.0	6.0	1.0	5.0	0.8
104	5.8	5.8	1.0	4.8	0.8
Mean	8.1	8.1	1.0	8.0	1.0
SD (c)	1.9	1.9	0.0	2.4	0.1
CV (d)	23.5	23.5	0.0	30.0	10.0
emales					
5	10.3	10.3	1.0	10.3	1.0
27	9.0	9.0	1.0	9.0	1.0
48	9.3	8.2	0.9	8.2	0.9
69	9.4	8.3	0.9	9.3	1.0
87	6.0	6.0	1.0	6.0	1.0
104	5.8	5.8	1.0	5.8	1.0
Mean	8.3	7.9	1.0	8.1	1.0
SD (c)	1.9	1.7	0.1	1.8	0.0
CV (d)	22.9	21.5	10.0	22.2	0.0

TABLE 12. FEED CONSUMPTION BY MICE RECEIVING D-MANNITOL IN THE CHRONIC STUDY

(a) Grams of feed consumed per animal per day.

(b) Grams of feed consumed per day by the dosed group divided by that for the controls.

(c) Standard deviation

(d) Coefficient of variation = (standard deviation/mean) x 100

D-Mannitol

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APPENDIX J

HISTORICAL INCIDENCE OF HEMATOPOIETIC TUMORS IN UNTREATED CONTROL FEMALE B6C3F1/N MICE

D-Mannitol

Laboratory	Lymphocytic Leukemia	All Leukemias	Lymphoma or Leukemia
Battelle	7/350 (2.0%)	8/350 (2.3%)	85/350 (24.3%)
Dow	2/99 (2.0%)	3/99 (3.0%)	41/99 (41.4%)
Frederick	1/435 (0.2%)	5/435 (1.1%)	100/435 (23.5%)
Hazleton	0/100 (0.0%)	1/100 (1.0%)	26/100 (26.0%)
Litton	4/513 (0.8%)	17/513 (3.3%)	133/513 (25.9%)
Mason	5/817 (0.6%)	7/817 (0.9%)	248/817 (30.4%)
Southern	8/505 (1.6%)	10/505 (2.0%)	96/505 (19.0%)
Total	27/2819 (1.0%)	51/2819 (1.8%)	729/2819 (25.9%)
High	5/50 (10%)	5/50 (10%)	31/50 (62%)
Low	0/50 (0%)	0/50 (0%)	4/50 (8%)

TABLE J1. HISTORICAL INCIDENCE OF HEMATOPOIETIC TUMORS IN UNTREATED CONTROL FEMALE B6C3F1/N MICE (a)

(a) Data as of January 17, 1981. Range is presented for groups of 35 or more animals.