NATIONAL TOXICOLOGY PROGRAM **Technical Report Series** No. 293

HUMAN SERVICES. **TOXICOLOGY AND CARCINOGENESIS STUDIES OF** HC BLUE NO. 2 2,2'-((4-((2-HYDROXYETHYL)AMINO)-3-NITROPHENYL)IMINO)BIS(ETHANOL) (CAS NO. 33229-34-4) IN F344/N RATS AND B6C3F1 MICE (FEED STUDIES) **U.S. DEPARTMENT OF HEALTH AND HUMAN SERVICES**

Public Health Service National Institutes of Health

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 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 made up of four charter DHHS agencies: the National Cancer Institute (NCI), National Institutes of Health; the National Institute of Environmental Health Sciences (NIEHS), National Institutes of Health; the National Center for Toxicological Research (NCTR), Food and Drug Administration; and the National Institute for Occupational Safety and Health (NIOSH), Centers for Disease Control. In July 1981, the Carcinogenesis Bioassay Testing Program, NCI, was transferred to the NIEHS. NTP TECHNICAL REPORT ON THE

TOXICOLOGY AND CARCINOGENESIS STUDIES OF HC BLUE NO. 2

2,2'-((4-((2-HYDROXYETHYL)AMINO)-3-NITROPHENYL)IMINO)BIS(ETHANOL)

(CAS NO. 33229-34-4)

IN F344/N RATS AND B6C3F1 MICE

(FEED STUDIES)



NATIONAL TOXICOLOGY PROGRAM P.O. Box 12233 Research Triangle Park, NC 27709

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NOTE TO THE READER

These studies are designed and conducted to characterize and evaluate the toxicologic potential, including carcinogenic activity, of selected chemicals in laboratory animals (usually two species, rats and mice). Chemicals selected for testing in the NTP Carcinogenesis Program are chosen primarily on the bases of human exposure, level of production, and chemical structure. Selection per se is not an indicator of a chemical's carcinogenic potential. Negative results, in which the test animals do not have a greater incidence of cancer than control animals, do not necessarily mean that a test chemical is not a carcinogen, inasmuch as the experiments are conducted under a limited set of conditions. Positive results demonstrate that a test chemical is carcinogenic for animals under the conditions of the test and indicate that exposure to the chemical has the potential for hazard to humans. The determination of the risk to humans from chemicals found to be carcinogenic in animals requires a wider analysis which extends beyond the purview of this study.

Five categories of interpretative conclusions were adopted for use in June 1983 in the Technical Reports series to specifically emphasize consistency and the concept of actual evidence of carcinogenicity. For each definitive study result (male rats, female rats, male mice, female mice), one of the following quintet will be selected to describe the findings. These categories refer to the strength of the experimental evidence and not to either potency or mechanism.

- Clear Evidence of Carcinogenicity is demonstrated by studies that are interpreted as showing a chemically related increased incidence of malignant neoplasms, studies that exhibit a substantially increased incidence of benign neoplasms, or studies that exhibit an increased incidence of a combination of malignant and benign neoplasms where each increases with dose.
- Some Evidence of Carcinogenicity is demonstrated by studies that are interpreted as showing a chemically related increased incidence of benign neoplasms, studies that exhibit marginal increases in neoplasms of several organs/tissues, or studies that exhibit a slight increase in uncommon malignant or benign neoplasms.
- Equivocal Evidence of Carcinogenicity is demonstrated by studies that are interpreted as showing a chemically related marginal increase of neoplasms.
- No Evidence of Carcinogenicity is demonstrated by studies that are interpreted as showing no chemically related increases in malignant or benign neoplasms.
- Inadequate Study of Carcinogenicity demonstrates that because of major qualitative or quantitative limitations, the studies cannot be interpreted as valid for showing either the presence or absence of a carcinogenic effect.

Additionally, the following concepts (as patterned from the International Agency for Research on Cancer Monographs) have been adopted by the NTP to give further clarification of these issues:

The term *chemical carcinogenesis* generally means the induction by chemicals of neoplasms not usually observed, the earlier induction by chemicals of neoplasms that are commonly observed, or the induction by chemicals of more neoplasms than are generally found. Different mechanisms may be involved in these situations. Etymologically, the term *carcinogenesis* means induction of cancer, that is, of malignant neoplasms; however, the commonly accepted meaning is the induction of various types of neoplasms or of a combination of malignant and benign neoplasms. In the Technical Reports, the words *tumor* and *neoplasm* are used interchangeably.

This study was initiated by the National Cancer Institute's Carcinogenesis Bioassay Program, now part of the National Institute of Environmental Health Sciences, National Toxicology Program. The studies described in this Technical Report have been conducted in compliance with NTP chemical health and safety requirements and must meet or exceed all applicable Federal, state, and local health and safety regulations. All NTP toxicology and carcinogenesis studies are subjected to a data audit before being presented for peer review.

Although every effort is made to prepare the Technical Reports as accurately as possible, mistakes may occur. Readers are requested to identify any mistakes so that corrective action may be taken. Further, anyone who is aware of related ongoing or published studies not mentioned in this report is encouraged to make this information known to the NTP. Comments and questions about the National Toxicology Program Technical Reports on Toxicology and Carcinogenesis Studies should be directed to Dr. J.E. Huff, National Toxicology Program, P.O. Box 12233, Research Triangle Park, NC 27709 (919-541-3780).

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HC BLUE NO. 2 2,2'-((4-((2-HYDROXYETHYL)AMINO)-3-NITROPHENYL)IMINO)BIS(ETHANOL) CAS No. 33229-34-4 Molecular Formula: C₁₂H₁₉N₃O₅ Molecular Weight: 285

ABSTRACT

Toxicology and carcinogenesis studies of HC Blue No. 2 (approximately 98% pure), a semipermanent hair dye, were conducted by administering the test chemical in feed for 103 weeks to groups of 50 F344/N rats of each sex and for 104 weeks to groups of 50 B6C3F₁ mice of each sex. The dietary concentrations used were 0, 5,000, or 10,000 ppm for male rats and male mice and 0, 10,000, or 20,000 ppm for female rats and female mice. These concentrations were selected on the basis of results from single-administration gavage and 14-day and 13-week feed studies. For the 2-year studies, the average daily doses were approximately 195 and 390 mg/kg in male rats, 465 and 1,000 mg/kg in female rats, 1,320 and 2,240 mg/kg in male mice, and 2,330 and 5,600 mg/kg in female mice.

The survival of high dose male rats and male mice was better than that for controls, and the survival of dosed female rats was comparable to that of the controls. The survival of high dose female mice was reduced (P < 0.05) relative to that of the controls (control, 35/50; low dose, 27/50; high dose 19/50); this reduced survival was attributed to a reproductive tract infection. Final mean body weights relative to those of the controls were depressed less than 10% in dosed male rats, whereas depressions of 13% and 22% were observed in the low dose and high dose groups of female rats. Final mean body weights for dosed male mice were within 5% of control values, but final mean body weights for dosed females were 15% (low dose) and 22% (high dose) lower than that of controls.

A dose-related increase in the incidence of hyperostosis of the skull was detected in rats (male, 5/50, 8/50, 25/49; female, 2/50, 19/50, 49/50) and in 1/49 high dose male and 4/50 high dose female mice. Mixed mesenchymal neoplasms of the kidney were detected in 2/50 high dose female rats; none was observed in any other group of female or male rats. This tumor is considered uncommon and has not been found in 1,863 historical control female F344/N rats. A negative trend in fibroadenomas of the mammary gland was seen in female rats (20/50, 10/50, 4/50).

A marginal (P=0.05) positive trend occurred in the incidence of lymphomas in male mice (1/50; 5/48; 8/49); the incidences in the dosed groups were not significantly greater than that in the controls when survival differences were taken into account.

HC Blue No. 2 was mutagenic for strains TA97 and TA98 but not for strains TA100 or TA1535 of Salmonella typhimurium in the presence or absence of Aroclor 1254-induced male Sprague-Dawley rat or Syrian hamster liver S9. HC Blue No. 2 was mutagenic in the mouse lymphoma L5178Y/TK^{+/-} assay in the presence of Aroclor 1254-induced male F344 rat liver S9.

An audit of the experimental data was conducted for these carcinogenesis studies on HC Blue No. 2. No data discrepancies were found that influenced the final interpretations.

Under the conditions of these studies, there was no evidence of carcinogenicity^{*} in male and female F344/N rats or in male and female B6C3F₁ mice receiving HC Blue No. 2 in the diet at concentrations of 0.5% and 1.0% for males and 1.0% and 2.0% for females for 2 years. HC Blue No. 2 administration caused a dose-related increase in the incidence of hyperostosis of the skull in male and female rats.

^{*}Categories of evidence of carcinogenicity are defined in the Note to the Reader on page 2.

CONTRIBUTORS

The NTP Technical Report on the Toxicology and Carcinogenesis Studies of HC Blue No. 2 is based on the 13-week studies that began in June 1978 and ended in September 1978 and on the 2-year studies that began in February 1980 and ended in February 1982 at Southern Research Institute.

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PEER REVIEW PANEL

The members of the Peer Review Panel who evaluated the draft Technical Report on HC Blue No. 2 on July 27, 1984, are listed below. Panel members serve as independent scientists, not as representatives of any institution, company, or governmental agency. In this capacity, Panel members have five major responsibilities: (a) to ascertain that all relevant literature data have been adequately cited and interpreted, (b) to determine if the design and conditions of the NTP studies were appropriate, (c) to ensure that the Technical Report presents the experimental results and conclusions fully and clearly, (d) to judge the significance of the experimental results by scientific criteria, and (e) to assess the evaluation of the evidence of carcinogenicity and other observed toxic responses.

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SUMMARY OF PEER REVIEW COMMENTS ON THE TOXICOLOGY AND CARCINOGENESIS STUDIES OF HC BLUE NO. 2

On July 27, 1984, the draft Technical Report on the toxicology and carcinogenesis studies of HC Blue No. 2 received 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 the Conference Center, Building 101, South Campus, National Institute of Environmental Health Sciences, Research Triangle Park, North Carolina.

Dr. S. Tannenbaum, a principal reviewer, agreed with the conclusions. He noted that two lots of test chemical were used, one 98 percent pure and one 75 percent pure, and requested clarification on which lots were used for which studies. Dr. J. Mennear, NTP, replied that the lot used for one 14-day study, the 2-year studies, and the mutagenicity experiments was 98% pure, whereas the lot used for the 13-week studies was 75% pure and that this would be emphasized in the report [see pp. 22-23]. Dr. Mennear reported that following Dr. Tannenbaum's suggestion at the review of HC Blue No. 1 (NTP TR 271, peer reviewed by the Panel in March 1984), nitrosamine contents had been measured for both dyes; based on dietary concentrations of these dyes, animals in the HC Blue No. 2 study received nearly twice as much nitrosamine (220 ppb for high dose rats and male mice; 440 ppb for female mice) in the feed as those in the HC Blue No. 1 study; HC Blue No. 1 was positive for carcinogenicity. [Results of these chemical analyses are presented in the final Technical Reports for both dye studies.]

As a second principal reviewer, Mr. L. Beliczky critiqued several issues, especially the comparisons of the toxicities of HC Blue No. 1 and 2 and that the presence of nitrosamines did not influence the findings. Dr. J. Huff, NTP, suggested that because the dietary concentrations of HC Blue No. 2 were about three times as great as those for HC Blue No. 1, some might consider HC Blue No. 2 to be at least three times less toxic; such extrapolations could be misleading and would not be presented in the Technical Report. Mr. Beliczky asked that more explanation be added as to why a second 14-day study was conducted and that an expanded discussion be included on the significance of mixed mesenchymal kidney tumors in female rats, C-cell carcinomas of the thyroid gland in male rats, and lymphomas in mice. Dr. G. Boorman, NTP, said that although the incidence in the high dose female rats was not significantly increased, the kidney tumors were uncommon and emphasizing the effect in the abstract seemed appropriate.

As a third principal reviewer, Dr. Turnbull agreed with the conclusions. He asked for inclusion of information as to why the dermal route was not chosen for the study, since that would be the likely route of human exposure [see page 54]. Dr. Mennear said the only use of HC Blue No. 2 was in hair dyes.

There was some discussion about the dose-related increases in the incidence of hyperostosis in male and female rats, and the Panel agreed that this was unusual and should be mentioned in the conclusion. Further discussion centered on whether the various nitrosamines present as impurities should be identified and whether significant in vivo nitrosation was likely.

Dr. Tannenbaum moved that the Technical Report on the toxicology and carcinogenesis studies of HC Blue No. 2 be accepted with the modifications discussed. Dr. Turnbull seconded the motion, and the Technical Report was approved by seven affirmative votes; there were two negative votes (Mr. Beliczky and Dr. Jones).

HC Blue No. 2, NTP TR 293

I. INTRODUCTION



HC BLUE NO. 2 2,2'-((4-((2-HYDROXYETHYL)AMINO)-3-NITROPHENYL)IMINO)BIS(ETHANOL) CAS No. 33229-34-4 Molecular Formula: C₁₂H₁₉N₃O₅ Molecular Weight: 285

HC Blue No. 2 is a nitrophenylenediamine derivative used as a semipermanent hair dye. Semipermanent hair color products are generally "shampoo-in" preparations that are applied to the hair, lathered, and then allowed to remain in contact with the hair and scalp for 30-45 minutes. The concentration of HC Blue No. 2 used in these preparations ranges from 1.6% to 2%. Approximately 30,000 pounds of HC Blue No. 2 was used in the United States in 1983 (Burnett, C., personal communication to NTP, 1984).

Studies in which HC Blue No. 2 has been administered to laboratory animals have been conducted on complex mixtures of dyes, dye intermediates, and product base chemicals (solvents and detergents). Wernick et al. (1975) administered a composite of 15 semipermanent hair dyes, formulated in product base materials, to dogs, rats, and rabbits. The composite contained 6.95% dye chemicals, including 1.63% HC Blue No. 2. The mixture was tested for systemic effects in beagle dogs (dietary administration for 2 years), for teratologic effects in Sprague-Dawley rats (dietary administration on days 6 through 15 of gestation) and New Zealand white rabbits (gavage administration on days 6 through 18 of gestation), and for reproductive effects in Sprague-Dawley rats (dietary administration). The largest doses of HC Blue No. 2 delivered in the mixture were 1.59 mg/kg per day to dogs and

rabbits and 12.7 mg/kg per day to rats. No compound-related effects were reported.

Burnett et al. (1976) studied a formulation containing 13 dyes and dye intermediates and 8 base chemicals. This mixture, which contained 1.7% HC Blue No. 2, was applied to the shaved skin of New Zealand white rabbits (1.0 ml/kg twice weekly for 13 weeks) and to pregnant Charles River rats (2.9 ml/kg on days 1, 4, 7, 13, 16, and 19 of gestation). Neither systemic nor teratologic effects were produced.

No published studies have been found concerning the absorption of HC Blue No. 2 through skin. Under conditions of use, the absorption of HC Blue No. 2 has been estimated to be less than 0.1% of the amount of the dye applied to the hair and scalp (Burnett, C., personal communication to NTP, 1984).

There are no literature citations on the mutagenicity of HC Blue No. 2; however, the NTP (Appendix N) found that HC Blue No. 2 (lot no. 9233, 98% pure) was mutagenic in strains TA97 and TA98 but not in strains TA100 or TA1535 of *Salmonella typhimurium* in the presence or absence of Aroclor 1254-induced Sprague-Dawley rat or Syrian hamster liver S9. HC Blue No. 2 also was mutagenic in the mouse lymphoma L5178Y/TK^{+/-} assay.

HC Blue No. 2 is a structural analog of HC Blue No. 1, another semipermanent hair dye that has been studied for carcinogenic effects (NTP, 1985). The structures of these chemicals differ only in the nature of the substituent on the secondary amine in position number 4 of the molecule. In HC Blue No. 1, this substitution is a methyl group, whereas it is a hydroxyethyl group in HC Blue No. 2. In the earlier study, HC Blue No. 1 was found to be carcinogenic for both male and female mice, increasing the incidences of hepatocellular carcinomas in each sex (dietary administration of 0, 1.500, or 3.000 ppm to males and 0, 3,000, or 6,000 ppm to females). Dietary concentrations of 1,500 and 3,000 ppm also produced marginally significant increases in the incidences of neoplastic nodules/carcinomas of the liver in male rats. There was some evidence of carcinogenicity in female rats: dietary administration of 3,000 or 6,000 ppm was associated with increases in the incidence of alveolar/bronchiolar adenomas or carcinomas (NTP, 1985).

The International Agency for Research on Cancer (IARC, 1982) has published a monograph

on aromatic amines, including hair dye preparations. The epidemiologic information concerning relationships between various human cancers and either employment as a hairdresser or the personal use of hair dyes was evaluated as inconclusive.

HC Blue No. 2 is one of five semipermanent hair dyes that were selected for toxicology and carcinogenicity assessment in a class study of hair color materials. The results of the evaluation of HC Blue No. 1 were reported earlier (NTP, 1985). The results for two other dyes (HC Red No. 3 and C.I. Disperse Blue 1) were peer reviewed in 1985, and a fifth dye, C.I. Acid Orange 3, is still under study.

The present report summarizes the results of 2-year toxicology and carcinogenesis studies of HC Blue No. 2 given in the diet of F344/N rats and B6C3F₁ mice. The oral (feed) route of administration was selected to maximize chances of detecting systemic effects associated with chemical administration.

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II. MATERIALS AND METHODS

PROCUREMENT AND CHARACTERIZATION OF HC BLUE NO. 2 PREPARATION AND CHARACTERIZATION OF FORMULATED DIETS ANALYSIS OF FORMULATED DIETS SINGLE-ADMINISTRATION STUDIES FOURTEEN-DAY REPEATED-EXPOSURE STUDIES THIRTEEN-WEEK STUDIES TWO-YEAR STUDIES Study Design Source and Specifications of Test Animals Animal Maintenance Clinical Examinations and Pathology Statistical Methods

PROCUREMENT AND CHARACTERIZATION OF HC BLUE NO. 2

HC Blue No. 2 (2,2'-((4-((2-hydroxyethyl)amino)-3-nitrophenyl)imino)bis(ethanol)) was obtained in two lots. Lot no. 5130777 was obtained from Clairol Laboratories (Stamford, Connecticut), and lot no. 9233 was obtained from Southland Corp. (Dallas, Texas).

The identities of both lots of HC Blue No. 2 were confirmed by infrared, ultraviolet/visible, and nuclear magnetic resonance spectroscopy (Appendix G). All spectroscopic data were consistent with those expected for the structure of HC Blue No. 2 and the spectra of the purified dye provided by Clairol.

The purity of HC Blue No. 2 was determined to be approximately 75% for lot no. 5130777 and approximately 98% for lot no. 9233 by elemental analysis, water analysis, titration of the amine group, thin-layer chromatography, and highperformance liquid chromatography. Results of the elemental analyses agreed with the theoretical values. The water content was between 1% and 2%. By titration of the amine function, lot no. 5130777 was found to be 79% pure and lot no. 9233 to be 103% pure. When chromatographic analysis was performed on both lots in the same system, the chromatographic profiles of both lots were very similar; lot no. 513077 had more impurities than did lot no. 9233, and the impurities were present in greater concentrations. Chromatographic data indicated 10 impurities in lot no. 5130777; 3 impurities had areas of 1.4%, 17.3%, and 5.6% that of the major peak and the remaining 7 had a combined area of less than 1.5% that of the major peak. Five impurities were detected in lot no. 9233; one had an area of 1.5% that of the major peak, and the other four had a combined area that was less than 1% that of the major peak.

HC Blue No. 2 was found to be stable for 2 weeks at 60° C (Appendix G). HC Blue No. 2 was stored at 5° C at the testing laboratory. Periodic characterization of HC Blue No. 2 by infrared and ultraviolet/visible spectroscopy detected no deterioration over the course of the studies (Appendix G).

PREPARATION AND CHARACTERIZATION OF FORMULATED DIETS

The formulated diets were prepared by adding a dry premix (approximately equal amounts of feed and HC Blue No. 2) to the appropriate amount of feed. The mixture was blended for 15 minutes. The homogeneity of diet mixtures formulated at the analytical chemistry and testing laboratories was evaluated (Appendix H). Further studies showed that HC Blue No. 2 was stable in feed when stored for 2 weeks at temperatures equal to or less than 25° C. Formulated diets were stored at 5° C for no longer than 14 days.

ANALYSIS OF FORMULATED DIETS

Periodic analyses for HC Blue No. 2 in feed mixtures were performed by the testing and analytical chemistry laboratories to determine if the formulated diets contained the correct concentrations of HC Blue No. 2 (Appendix I). The method of analysis involved a methanolic extraction followed by a spectrophotometric guantitation step. Occasionally, samples were not within 10% of the target concentration (Appendix J). Because 70 of 82 feed mixtures analyzed were within 10% of the target concentrations, the feed mixtures were estimated to have been within specifications 85% of the time throughout the entire study (Table 1). All mixtures were within 25% of the target concentrations.

SINGLE-ADMINISTRATION STUDIES

Male and female F344/N rats and B6C3F₁ mice were obtained from Harlan Industries (Indianapolis, Indiana) and held for approximately 13 days before the test began. The animals were approximately 8 weeks old when placed on study. Groups of five rats of each sex were administered a single dose of 31, 62, 125, 250, or 500 mg/kg HC Blue No. 2 (lot no. 5130777) in 1% carboxymethyl cellulose ether sodium salt in saline by gavage; and groups of five mice of each sex were administered 62, 125, 250, 500, or 1,000 mg/kg by the same route. Details of animal maintenance are presented in Table 2.

	Determined Concentration for Target Concentration of				
Date Mixed	5,000 ppm	10,000 ppm	20,000 ppm		
Mean (ppm)	4,734	9,753	19,301		
Standard Deviation	539.0	584.4	1,605.6		
Coefficient of Variation (%)	· 11.4	6.0	8.3		
Range (ppm)	3,380-6,160	8,380-11,500	15,660-22,900		
Number of Samples	27	38	17		

TABLE 1. RESULTS OF ANALYSES OF FORMULATED DIETS IN THE TWO-YEAR FEED STUDIESOF HC BLUE NO. 2

Animals were observed for mortality two times per day for 14 days. Body weights were taken on the day of dosing and on day 15. Necropsies were not performed.

FOURTEEN-DAY REPEATED-EXPOSURE STUDIES

Fourteen-day repeated-exposure studies were conducted on both lots of HC Blue No. 2. The second study, conducted because of a substantial difference in the purity of the test material, began after the 13-week studies were completed. The lot used in the first study (lot. no. 5130777) was approximately 75% pure, whereas the purity of the lot used in the second study (lot no. 9233) was approximately 98% pure.

Male and female F344/N rats and $B6C3F_1$ mice were obtained from Harlan Industries (first study) and from Charles River Laboratories (second study) and held for approximately 2 weeks before the study began.

Animals were approximately 8 weeks old when placed on study. Groups of five males and three or five females of each species were fed diets containing 0, 3,100, 6,200, 12,500, 25,000, or 50,000 ppm HC Blue No. 2 for 14 days. Rats and mice were observed two times per day for moribundity or mortality and were weighed on days 1 and 15. Necropsies were performed on all animals. Details of animal maintenance are presented in Table 2.

THIRTEEN-WEEK STUDIES

Thirteen-week studies were conducted to evaluate the cumulative toxic effects of repeated administration of HC Blue No. 2 and to determine the concentrations to be used in the 2-year studies. Lot no. 513077, 75% pure, was used in these studies.

Male and female F344/N rats and $B6C3F_1$ mice were obtained from Harlan Industries, observed for 15 days, and then assigned to cages according to a table of random numbers. Animals were approximately 8 weeks old when placed on test. The cages were assigned to dosed and control groups according to another table of random numbers.

Dosed animals received Wayne Lab Blox[®] mash and the required amount of HC Blue No. 2 (3,100, 6,200, 12,500, 25,000, or 50,000 ppm). Control diets consisted of Wayne Lab Blox[®] mash. Formulated diets, control diets, and water (via an automatic watering system) were available ad libitum. Further experimental details are summarized in Table 2.

Animals were checked two times per day for mortality and signs of moribundity. Feed consumption was measured weekly by cage. Individual animal weights were recorded weekly. At the end of the 13-week studies, survivors were killed. Necropsies were performed on all animals. Tissues and groups examined are listed in Table 2.

TWO-YEAR STUDIES

Study Design

Diets containing 0, 5,000, or 10,000 ppm HC Blue No. 2 (lot no. 9233, 98% pure) were fed to groups of 50 male rats and 50 male mice. Groups of 50 female rats and 50 female mice were fed diets containing 0, 10,000, or 20,000 ppm. Rats received formulated diets for 103 weeks, and mice received formulated diets for 104 weeks.

	Single- Administration Studies	Fourteen-Day Repeated- Exposure Studies	Thirteen-Week Studies	Rerun Fourteen-Day Repeated- Exposure Studies	Two-Year Studies
EXPERIMENTAL DESIGN	- «.				
Testing Laboratory	Southern Research Institute	Southern Research Institute	Southern Research Institute	Southern Research Institute	Southern Research Institute
Size of Test Groups	5 males and 5 femaies of each species	5 males and 3 or 5 females of each species	10 males and 10 females of each species	5 males and 5 females of each species	50 males and 50 females of each species
Doses	Rats31, 62, 125, 250, or 500 mg/ kg HC Blue No. 2 in 1% carboxy- methyl cellulose in saline by ga- vage; mice62, 125, 250, 500, or 1,000 mg/kg HC Blue No. 2	0, 3,100, 6,200, 12,500, 25,000, or 50,000 ppm HC Blue No. 2 in the diet	0, 3,100, 6,200, 12,500, 25,000, or 50,000 ppm HC Blue No. 2 in the diet	0, 3, 100, 6, 200, 12, 500, 25, 000, or 50,000 ppm HC Blue No. 2 in the diet	Males0, 5,000, or 10,000 ppm HC Blue No. 2 in the diet; females0, 10,000, or 20,000 ppm HC Blue No. 2 in the diet
Date of First Dose	1/24/78	2/15/78	6/07/78	10/25/79	2/06/80
Date of Last Dose	N/A	2/28/78	9/05/78	11/07/79	Rats1/26/82; mice2/02/82
Duration of Dosing	Single dose	14 d	91 d	1 4 d	Rats103 wk; mice104 wk
Type and Frequency of Observation	Observed 2 × d for mortality; weighed on d 0 and d 15	Observed 2 × d for moribundity and mortality; weighed on d 0 and d 15	Animals weighed weekly and observed 2 × d for mori- bundity and mortality. Clinical exams were made weekly; feed con- sumption mea- sured 1 × wk	Animals weighed initially and weekly thereafter; observed 2 × d for moribundity and mortality	Animals weighed weekly for 13 wk; monthly there- after; food con- sumption meas- ured 1 × 4-6 wk. Observed 2 × d for moribundity and mortality
Necropsy and Histologic Examination	Not performed	Necropies were performed on all animals. No histopathologic examination was performed	All animals necropsied; all controls and all animals in the 50,000-ppm dose group were ex- amined histo- pathologically. Tissues exam- ined: skin, man- dibular and mes- enteric lymph nodes, mammary gland, salivary gland, thigh muscle, femur including mar- row, thymus, trachea, lungs and mainstem bronchi, heart, thyroid gland, parathyroids, esophagus, small intestine, colon, liver, stomach,	Same as 14-d repeated-exposure studies	Necropsies were performed on all animals; tissues examined micro- scopically include: tissue masses, mandibular lymph nodes, salivary gland, femur in- cluding marrow, gallbladder (mice), thyroid gland, parathyroids, small intestine, colon, liver, prostate/ testes or ovaries/ uterus, lungs and main- stem bronchi,skin, heart, esophagus, stomach, urinary bladder, brain, thymus, trachea, pancreas, spleen, kidneys, adrenal glands,

	Single- Administration Studies	Fourteen-Day Repeated- Exposure Studies	Thirteen-Week Studies	Rerun Fourteen-Day Repeated- Exposure Studies	Two-Year Studies
Necropsy and Histologic Examination (Continued)			pancreas, spleen, gallbladder (mice), kidneys, adrenal glands, urinary bladder, brain, vesicular gland, prostate/ testes or ovaries/ uterus, and pituitary gland		pituitary gland, mammary gland, eyes, regional lymph nodes, and spinal cord if abnormal
ANIMALS AND ANIMAL MAINTENANCE	-				
Strain and Species	F344/N rats; B6C3F ₁ mice	F344/N rats; B6C3F ₁ mice	F344/N rats; B6C3F ₁ mice	F344/N rats; B6C3F ₁ mice	F344/N rats; B6C3F ₁ mice
Animal Source	Harlan Indus- tries (Indiana- polis, IN)	Same as single- administration studies	Same as single- administration studies	Charles River Breeding Labs (Portage, MI)	Charles River Breeding Labs (Portage, MI)
Method of Animal Identification	Earmarked with poultry punch	Same as single- administration studies	Same as single- administration studies	Same as single- administration studies	Same as single- administration studies
Time Held Before Test	13 d	13 d	15 d	16 d	14 d
Age When Placed on Study	8 wk	8 wk	8 wk	8 wk	Rats6-7 wk; mice7 wk
Age When Killed	10 w k	10 wk	21 wk	10 wk	Rats110-112 wk; mice112-113 wk
Necropsy Dates	2/8/78	3/02/78-3/06/78	9/06/78-9/09/78	11/9/79-11/10/79	Rats2/03/82- 2/09/82; mice 2/10/82-2/15/82
Method of Animal Distribution	Randomized to cages and then to groups using two tables of random numbers	Same as single- administration studies	Same as single- administration studies	Same as single- administration studies	Same as single- administration studies
Feed	Wayne Lab- Blox® pellets (Allied Mills, Inc., Chicago, IL); available ad libitum	Wayne Lab- Blox® Mash (Allied Mills, Inc., Chicago, IL); available ad libitum	Same as 14-d repeated-exposure studies	NIH 07 open formula (Ziegler Bros., Gardners, PA); available ad libitum	Same as rerun 14-d repeated-exposure studies
Bedding	Heat-treated hardwood chips (PWI, Inc, Lowville, NY)	Same as single- administration studies	Same as single- administration studies	Heat-treated hardwood chips (Northeastern Products Corp., Warrensburg, NY)	Same as rerun 14-d repeated-exposure studies
Water	Automatic watering system (Edstrom Indus- tries, Waterford, WI); available ad libitum	Same as single- administration studies	Same as single- administration studies	Same as single- administration studies	Same as single- administration studies

TABLE 2. EXPERIMENTAL DESIGN AND MATERIALS AND METHODS IN THE STUDIES OF HC BLUE NO. 2
(Continued)

	Single- Administration Studies	Fourteen-Day Repeated- Exposure Studies	Thirteen-Week Studies	Rerun Fourteen-Day Repeated- Exposure Studies	Two-Year Studies
Cages	Polycarbonate (Lab Products, Inc., Garfield, NJ)	Same as single- administration studies	Same as single- administration studies	Same as single- administration studies	Same as single- administration studies
Cage Rotation	None	None	None	None	None
Cage Filters	Reemay spun- bonded polyester filters (Snow Fil- tration, Cincin- nati, OH)	Same as single- administration studies	Same as single- administration studies	Same as single- administration studies	Same as single- administration studies
Animals per Cage	5	5	5	5	5
Animal Room Environment	Temp21°-23° C; hum40%-60%; fluorescent light 12 h/d; 15 room air changes/h	Same as single- administration studies	Temp21°-23° C; hum30%-50%; fluorescent light 12 h/d; 15 room air changes/h	Same as 13-wk studies	Temp23° ± 1°C; hum40%-60%; fluorescent light 12 h/d; 15 room air changes/h
CHEMISTRY					
Lot Numbers Used	5130777	5130777	5130777	9233	9233
Date of Initial Use of Subsequent Lot	N/A	N/A	N/A	N/A	N/A
Supplier	Clairol Research Laboratories (Stamford, CT)	Same as single- administration studies	Same as single- administration studies	Southland Corporation (Dallas, TX)	Same as rerun 14-d repeated- exposure studies
CHEMICAL/VEHICLE					
Preparation	Mixed on a w/v basis with 1% carboxymethyl cellulose ether sodium salt in saline by a sonifier with a probe for 10 min	Mixed on a w/w basis with feed. Premix was added to remaining feed in a 16-qt P-K® twin-shell blender and mixed for 15 min	Premix prepared in a Waring blender by mixing for 2 min; then sandwiched be- tween three equal portions of the plain feed in a 16- qt P-K [®] twin-shell blender and mixed for 15 min	Premix sandwiched between two portions of feed in 16-qt blender with an intensi- fier bar and mixed for 15 min	Premix originally prepared by shaking manually in a specimen cup; premix later prepared with a mortar and pestle. Premix was sand- wiched between two layers of plain feed in a 16-qt P-K [©] blender and mixed for 15 min (with an inten- sifier bar turned off for 5 min)
Maximum Storage Time	3 h	7 d	7 d	2 wk	2 wk
Storage Conditions	Stored in plastic bags in sealed plastic con- tainers in the animal rooms	Same as single- administration studies	Stored in double plastic bags in sealed plastic containers at 5° C	Same as 13-wk studies	Same as 13-wk studies

TABLE 2. EXPERIMENTAL DESIGN AND MATERIALS AND METHODS IN THE STUDIES OF HC BLUE NO. 2
(Continued)

Source and Specifications of Test Animals

The male and female F344/N rats and B6C3F1 (C57BL/6N, female, \times C3H/HeN MTV⁻, male) mice used in this study were produced under strict barrier conditions at the Charles River Breeding Laboratories (Portage, Michigan) under a contract to the Carcinogenesis Program. Breeding starts for the foundation colony at the production facility originated at the National Institutes of Health Repository. Animals shipped for testing were progeny of defined microflora-associated parents that were transferred from isolators to barrier-maintained rooms. Animals were shipped to the testing laboratory at 4-5 weeks of age. The animals were quarantined at the testing facility for 2 weeks. Thereafter, a complete necropsy was performed on five animals of each sex and species to assess their health status. The rodents were placed on study at 6-7 weeks of age. The health of the animals was monitored during the course of the study according to the protocols of the NTP Sentinel Animal Program (Appendix K).

A quality control skin grafting program has been in effect since early 1978 to monitor the genetic integrity of the inbred mice used to produce the hybrid $B6C3F_1$ test animal. In mid-1981, data were obtained that showed incompatibility between the NIH C3H reference colony and the C3H colony from a Program supplier. In August 1981, inbred parental lines of mice were further tested for genetic integrity via isozyme and protein electrophoretograms that demonstrate phenotype expressions of known genetic loci.

The C57BL/6 mice were homogeneous at all loci tested. Eighty-five percent of the C3H mice monitored were variant at one to three loci, indicating some heterogeneity in the C3H line from this supplier. Nevertheless, the genome of this line is more homogeneous than that of randomly bred stocks.

Male mice from the C3H colony and female mice from the C57BL/6 colony were used as parents for the hybrid $B6C3F_1$ mice used in these studies. The influence of the potential genetic nonuniformity in the hybrid mice on these results is not known, but results of the studies are not affected because matched concurrent controls were included in each study.

Animal Maintenance

Rats and mice were housed five per cage. Formulated diets, control diets, and water (via an automatic watering system) were available ad libitum. Details of animal maintenance are presented in Table 2.

Clinical Examinations and Pathology

All animals were observed two times per day for signs of moribundity or mortality. Clinical signs were recorded once per week. Body weights by cage were recorded once per week for the first 13 weeks of the study and once per month thereafter. Feed consumption was recorded every 4-5 weeks. Mean body weights were calculated for each group. Moribund animals were killed, as were animals that survived to the end of the study. Necropsies were performed on all animals, including those found dead unless they were excessively 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.

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. Tissues examined microscopically are listed in Table 2.

When the pathology examination was completed, the slides, individual animal data records, and summary tables were sent to an independent quality assurance laboratory. Individual animal records and tables were compared for accuracy, slides and tissue counts were verified, and histotechnique was evaluated. All tumor diagnoses, all target tissues, and all tissues from a randomly selected 10% of the animals were evaluated by a quality assurance pathologist. Slides of all target tissues and those about which the original and quality assurance pathologists disagreed were submitted to the Chairperson of the Pathology Working Group (PWG) for evaluation. Representative coded slides selected by the Chairperson were reviewed by PWG pathologists, who reached a consensus and compared their findings with the original and quality assurance diagnoses. When diagnostic differences were found, the PWG sent the appropriate slides and comments to the original pathologist for review. This procedure has been described, in part, by Maronpot and Boorman (1982) and Boorman et al. (1985). The final diagnoses represent a consensus of contractor pathologists and the NTP Pathology Working Group.

Nonneoplastic lesions are not examined routinely by the quality assurance pathologist or the PWG. Certain nonneoplastic findings are reviewed by the quality assurance pathologist and the PWG if they are considered part of the toxic response to a chemical or if they are deemed of special interest.

Statistical Methods

Data Recording: 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, survival, body weight, and individual pathologic results, as recommended by the International Union Against Cancer (Berenblum, 1969).

Survival Analyses: The probability of survival was estimated by the product-limit procedure of Kaplan and Meier (1958) and is presented in the form of graphs. Animals were censored from the survival analyses at the time they were found dead of other than natural causes or were found to be missing; animals dying from natural causes were not 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 method for testing for a dose-related trend. All reported P values for the survival analysis are two-sided.

Calculation of Incidence: The incidence of neoplastic or nonneoplastic lesions is 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 include only those animals for which the 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 number of animals on which necropsies were performed.

Analysis of Tumor Incidence: Three statistical methods are used to analyze tumor incidence data. The two that adjust for intercurrent mortality employ the classical method for combining contingency tables developed by Mantel and Haenszel (1959). Tests of significance included pairwise comparisons of high dose and low dose groups with vehicle controls and tests for overall dose-response trends.

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

Life Table Analyses--The first method of analysis assumed that all tumors of a given type observed in animals dying before the end of the study were "fatal"; i.e., they either directly or indirectly caused the death of the animal. According to this approach, the proportions of tumor-bearing animals in the dosed and control groups were compared at each point in time at which an animal died with a tumor of interest. The denominators of these proportions were the total number of animals at risk in each group. These results, including the data from animals killed at the end of the study, were then combined by the Mantel-Haenszel method 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).

Incidental Tumor Analyses--The second method of analysis assumed that all tumors of a given type observed in animals that died before the end of the study were "incidental"; i.e., they were merely observed at necropsy in animals dying of an unrelated cause. According to this approach, the proportions of tumor-bearing animals in dosed and control groups were compared in each of five time intervals: 0-52 weeks, 53-78 weeks, 79-92 weeks, week 93 to the week before the terminal kill period, and the terminal kill period. The denominators of these proportions were the number of animals on which necropsies were actually performed during the time intervals. The individual time interval comparisons were then combined by the previously described method to obtain a single overall result. (See Haseman, 1984, for the computational details of both methods.)

Unadjusted Analyses--Primarily, survivaladjusted methods are used to evaluate tumor incidence. In addition, the results of the Fisher exact test for pairwise comparisons and the Cochran-Armitage linear trend test (Armitage, 1971; Gart et al., 1979) are given in the appendix containing the analyses of primary tumor incidence. These two tests are based on the overall proportion of tumor-bearing animals and do not adjust for survival differences.

Historical Control Data: Although the concurrent control group is always the first and most appropriate control group used for decisionmaking, there are certain instances in which historical control data can be helpful in the overall evaluation of tumor incidence. Consequently, control tumor incidences from the NTP historical control data base (Haseman et al., 1984) are included for those tumors in these studies appearing to show compound-related effects.

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III. RESULTS

RATS

SINGLE-ADMINISTRATION STUDIES FOURTEEN-DAY REPEATED-EXPOSURE STUDIES RERUN FOURTEEN-DAY REPEATED-EXPOSURE STUDIES THIRTEEN-WEEK STUDIES TWO-YEAR STUDIES Body Weights and Clinical Signs Survival Pathology and Statistical Analyses of Results

MICE

SINGLE-ADMINISTRATION STUDIES FOURTEEN-DAY REPEATED-EXPOSURE STUDIES RERUN FOURTEEN-DAY REPEATED-EXPOSURE STUDIES THIRTEEN-WEEK STUDIES TWO-YEAR STUDIES Body Weights and Clinical Signs Survival Pathology and Statistical Analyses of Results

SINGLE-ADMINISTRATION STUDIES

All the rats survived to the end of the studies, and there were no dose-related effects on body weight gains (Table 3). The urine of dosed rats was blue on day 1 but not on day 2 or later.

TABLE 3. SURVIVAL AND MEAN BODY WEIGHTS OF RATS IN THE SINGLE-ADMINISTRATION **GAVAGE STUDIES OF HC BLUE NO. 2**

Dose (mg/kg)	Survival (a)	Mean Body Weights (grams)			
		Initial	Final	Change (b)	
MALE					
31	5/5	111 ± 4	178 ± 8	$+67 \pm 5$	
62	5/5	108 ± 2	171 ± 5	$+63 \pm 4$	
125	5/5	110 ± 5	173 ± 6	$+63 \pm 3$	
250	5/5	111 ± 2	187 ± 2	$+76 \pm 3$	
500	5/5	110 ± 3	178 ± 7	$+68 \pm 4$	
FEMALE					
31	5/5	94 ± 1	126 ± 3	$+32 \pm 2$	
62	5/5	103 ± 2	136 ± 2	$+33 \pm 2$	
125	5/5	97 ± 4	129 ± 5	$+32 \pm 1$	
250	5/5	97 ± 3	131 ± 3	$+34 \pm 2$	
500	5/5	96 ± 5	125 ± 8	$+29 \pm 4$	

(a) Number surviving/number initially in the group (b) Mean weight change \pm standard error of the mean

FOURTEEN-DAY REPEATED-EXPOSURE STUDIES (Lot No. 5130777)

All the rats survived to the end of the studies (Table 4). Rats that received 25,000 or 50,000 ppm HC Blue No. 2 gained notably less weight than did the controls. Dosed rats had dark violet urine. Bluish discoloration of various tissues was noted at necropsy in the rats that received 50,000 ppm.

TABLE 4. SURVIVAL AND MEAN BODY WEIGHTS OF RATS IN THE FOURTEEN-DAY REPEATED-
EXPOSURE FEED STUDIES OF HC BLUE NO. 2

	Survival (a)	Me	Final Weight		
Concentration (ppm)		Initial	Final	Change (b)	Relative to Controls (percent)
IALE			<u> </u>		
0	5/5	139±6	190 ± 3	$+51 \pm 6$	
3,100	5/5	126 ± 9	170 ± 10	$+44 \pm 2$	89
6,200	5/5	11 3 ± 9	155 ± 9	$+42 \pm 2$	82
12,500	5/5	120 ± 9	165 ± 12	$+45 \pm 4$	87
25,000	5/5	114 ± 5	146 ± 6	$+32 \pm 3$	77
50,000	5/5	133 ± 9	146 ± 8	$+13 \pm 4$	77
EMALE					
0	3/3	111 ± 4	130 ± 0	$+19 \pm 5$	
3,100	5/5	97±5	120 ± 5	$+23 \pm 2$	92
6,200	5/5	117 ± 6	135 ± 2	$+18 \pm 5$	104
12,500	5/5	104 ± 4	119 ± 3	$+15 \pm 3$	92
25,000	5/5	93 ± 10	104 ± 11	$+11 \pm 4$	80
50,000	5/5	108 ± 3	117 ± 5	+9±2	90

(a) Number surviving/number initially in the group

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

RERUN FOURTEEN-DAY REPEATED-EXPOSURE STUDIES (Lot No. 9233)

These studies were conducted after the 13-week studies. All the rats survived to the end of the studies (Table 5). The final mean body weight of male rats that received 50,000 ppm HC Blue No. 2 was depressed 23% relative to that of the controls. Dosed rats had violet urine. The thymus gland was red in 2/5 males and 3/5 females that received 50,000 ppm HC Blue No. 2 and in 2/5 males that received 25,000 ppm. Since there were no marked differences in the results of the two 14-day repeated-exposure studies, the results of the 13-week studies with lot no. 5130777 were used to select doses for the 2-year studies with lot no. 9233.

Concentration (ppm)	Survival (a)	Mean l	Final Weight		
		Initial	Final	Change (b)	Relative to Controls (percent)
MALE	<u> </u>	<u></u>		·····	, , , , , , , , , , , , , , , , , , ,
0	5/5	131 ± 3	203 ± 4	$+72 \pm 1$	
3,100	5/5	124 ± 3	190 ± 3	$+66 \pm 2$	94
6,200	5/5	128 ± 4	194 ± 4	$+66 \pm 2$	96
12,500	5/5	129 ± 3	194 ± 4	$+65 \pm 3$	96
25,000	5/5	129 ± 3	185 ± 6	$+56 \pm 3$	91
50,000	5/5	134 ± 1	157 ± 1	$+23 \pm 2$	77
FEMALE					
0	5/5	118 ± 2	146 ± 3	$+28 \pm 1$	
3,100	5/5	111 ± 1	1 39 ± 1	$+28 \pm 2$	95
6,200	5/5	114 ± 5	144 ± 6	$+30 \pm 1$	99
12,500	5/5	116 ± 3	142 ± 4	$+26 \pm 1$	97
25,000	5/5	113 ± 4	138 ± 5	$+25 \pm 1$	95
50,000	5/5	122 ± 1	141 ± 2	$+19 \pm 2$	97

TABLE 5. SURVIVAL AND MEAN BODY WEIGHTS OF RATS IN THE RERUN FOURTEEN-DAY REPEATED-EXPOSURE FEED STUDIES OF HC BLUE NO. 2

(a) Number surviving/number initially in the group

(b) Mean weight change \pm standard error of the mean
THIRTEEN-WEEK STUDIES

All the rats survived to the end of the studies (Table 6). Purple urine and dark feces were observed after day 9. Final mean body weights relative to those of the controls were depressed 12%-21% in males fed diets containing 6,200-50,000 ppm. Feed consumption by dosed and control rats was not dose related. At necropsy, the thyroid glands were dark in 40%-80% of the rats in each dose group; the incidences were dose related (8/10 males and 8/10 females that received 50,000 ppm and 7/10 males and 4/10 females that received 3,100 ppm). No compound-related histopathologic effects were observed.

Concentrations of 5,000 and 10,000 ppm were selected for male rats and 10,000 and 20,000 ppm were selected for female rats in the 2-year studies. These concentrations were selected on the basis of body weight gain data from the 13week studies.

TABLE 6. SURVIVAL, MEAN BODY WEIGHTS, AND FEED CONSUMPTION OF RATS IN THE THIRTEEN-WEEK FEED STUDIES OF HC BLUE NO. 2

Concen-		Меа	n Body Weig	hts (grams)	Final Weight	Feed Consumption (c) (grams)	
tration (ppm)	Survival (a)	Initial	Final	Change (b)	Relative to Controls (percent)	Day 30 Day 86	
MALE		<u></u>					
0	10/10	112 ± 4	318 ± 8	+ 206 ± 8		18.2	15.6
3,100	10/10	102 ± 3	295 ± 7	$+193 \pm 6$	93	16.0	15.3
6,200	10/10	102 ± 4	279 ± 10	$+177 \pm 9$	88	16.4	14.2
12,500	10/10	101 ± 2	273 ± 7	$+172 \pm 7$	86	19,4	15.0
25,000	10/10	110 ± 4	269 ± 11	$+159 \pm 8$	85	18.9	14.6
50,000	10/10	98 ± 4	252 ± 10	$+154 \pm 8$	79	26.2	16.4
FEMALE							
0	10/10	83 ± 2	170 ± 5	$+87 \pm 4$		12.3	9.8
3,100	10/10	97 ± 1	187 ± 4	$+90 \pm 4$	110	13.4	10.0
6,200	10/10	91 ± 3	177 ± 6	$+86 \pm 6$	104	12.2	9.7
12,500	10/10	87 ± 3	171 ± 5	$+84 \pm 4$	101	11.9	9.8
25,000	10/10	95 ± 3	175 ± 3	$+80 \pm 2$	103	11.2	9.1
50,000	10/10	92 ± 3	169 ± 4	+77±3	99	16.7	8.6

(a) Number surviving/number in group

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

(c) Grams of feed per animal

TWO-YEAR STUDIES

Body Weights and Clinical Signs

Throughout most of the studies, mean body weights of dosed rats of each sex were less than those of the controls (Table 7 and Figure 1). The mean body weights were dose related. Mean body weights of low dose and high dose female rats were less than 90% those of the controls after week 32, and the mean body weights of the low dose and high dose females were 87% and 78% that of the controls at the end of the studies. The mean body weight of high dose males was 92% that of the controls. The average daily feed consumption per rat by low dose and high dose rats was 99% and 96%, respectively, that of the controls for males and 91% and 92% for females (Appendix L, Tables L1 and L2). No compoundrelated clinical signs were observed. The average dose per day was approximately 195 and 390 mg/kg for low dose and high dose male rats and 465 and 1,000 mg/kg for low dose and high dose female rats.

TABLE 7. MEAN BODY WEIGHTS AND SURVIVAL OF RATS IN THE TWO-YEAR FEED STUDIES OF HC BLUE NO. 2

Weeks on Study	Co Av. WL (grams)	ntrol No. of Survivors	Av. Wt. (grams)	Low Dose WL (percent of controls)	No. of Survivors	Av. Wt. (grams)	High Dose Wt. (percent of controls)	No. of Survivors
	(grams)	Survivors	(grams)			(grams)		
MALE 0 1234 56789 10112317 226232 34050 1112332 34050 54953 672761 859939 93992 102	$\begin{array}{c} 132\\ 155\\ 184\\ 208\\ 250\\ 264\\ 278\\ 305\\ 317\\ 327\\ 337\\ 363\\ 387\\ 431\\ 452\\ 387\\ 451\\ 452\\ 453\\ 473\\ 473\\ 473\\ 473\\ 473\\ 473\\ 473\\ 47$	50000000000000000000000000000000000000	$\begin{array}{c} 133\\ 156\\ 182\\ 203\\ 2243\\ 257\\ 272\\ 285\\ 296\\ 308\\ 314\\ 327\\ 335\\ 374\\ 327\\ 335\\ 374\\ 327\\ 430\\ 447\\ 454\\ 447\\ 454\\ 450\\ 445\\ 450\\ 445\\ 450\\ 446\\ 441\\ 439\\ 431\\ \end{array}$	5,000 ppm 100.8 100.6 98.9 97.6 97.2 97.3 97.3 97.3 97.3 97.2 96.0 97.0 97.0 97.0 97.0 97.0 97.0 97.0 97	50 50 50 50 50 50 50 50 50 50 50 50 50 5	$\begin{array}{c} 131\\ 149\\ 173\\ 192\\ 227\\ 254\\ 268\\ 278\\ 284\\ 208\\ 334\\ 336\\ 334\\ 3370\\ 386\\ 409\\ 424\\ 430\\ 424\\ 438\\ 438\\ 438\\ 438\\ 438\\ 438\\ 438\\ 43$	10,000 ppm 99.2 96.1 94.0 92.3 90.8 90.5 91.4 91.5 91.1 90.9 89.9 90.8 90.9 89.9 90.8 90.1 92.0 91.7 90.9 90.9 90.9 90.8 90.9 90.0 90.9 90.0 90.8 90.3 90.1 90.3 90.1 90.7 90.8 90.3 90.1 90.7 90.8 90.3 90.1 90.7 90.8 90.3 90.1 90.7 90.7 90.8 90.7 90.7 90.7 90.7 90.8 90.4 90.7 90.7 90.7 90.7 90.7 90.7 90.7 90.8 90.4 90.4 90.7	55000000000000000000000000000000000000
104 FEMALE	473	32	441	93.2 1 0,0 00 ppm	38	434	91.8 20,000 ppm	42
0 1 2 3 4 5 6 7 8 9 10 1 12 3 7 2 6 2 5 5 9 9 10 1 12 3 7 2 6 2 5 5 5 5 5 5 5 5 5 5 6 7 8 9 10 1 12 3 7 2 6 7 8 9 10 1 12 3 7 2 6 7 8 9 10 11 2 3 4 5 6 7 7 8 9 10 11 2 3 4 5 5 6 7 7 8 9 10 11 2 3 5 0 5 5 4 5 5 6 7 7 8 9 10 11 2 3 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5	$\begin{array}{c} 102\\ 114\\ 128\\ 137\\ 147\\ 160\\ 165\\ 171\\ 177\\ 179\\ 186\\ 193\\ 208\\ 216\\ 230\\ 230\\ 230\\ 234\\ 244\\ 244\\ 244\\ 244\\ 244\\ 244\\ 244$	50000000000000000000000000000000000000	103 113 125 135 142 156 166 170 174 179 178 189 193 208 208 209 218 209 238 239 238 239 238 239 238 239 253 283 277 280 277 280 277 286 277 286		50 500 500 500 500 500 500 500 500 500	$\begin{array}{c} 104\\ 110\\ 124\\ 133\\ 140\\ 151\\ 156\\ 161\\ 161\\ 176\\ 176\\ 176\\ 176\\ 179\\ 204\\ 209\\ 209\\ 209\\ 209\\ 209\\ 209\\ 209\\ 209$	$\begin{array}{c} 102.0\\ 96.5\\ 96.9\\ 97.1\\ 94.4\\ 94.5\\ 94.2\\ 94.2\\ 93.8\\ 95.5\\ 94.6\\ 93.3\\ 92.5\\ 94.6\\ 93.3\\ 92.5\\ 94.2\\ 85.7\\ 84.3\\ 80.3\\ 85.7\\ 85.7\\ 75.4\\ 80.3\\ 80.3\\ 80.3\\ 80.3\\ 80.3\\ 80.3\\ 77.5\\ 75.1\\ 75.4\\ 77.5\\ 75.1\\ 75.4\\ 72.4\\ 73.4\\ 72.9\\ 77.9\\ 77.9\end{array}$	50 500 500 500 500 500 500 500 500 500



FIGURE 1. GROWTH CURVES FOR RATS FED DIETS CONTAINING HC BLUE NO. 2 FOR TWO YEARS

Survival

Estimates of the probabilities of the survival of male and female rats fed diets containing HC Blue No. 2 at the concentrations used in these studies and those of the controls are shown in the Kaplan and Meier curves in Figure 2. The survival of the control group of male rats was significantly less than that of the high dose group after week 102 (Table 8). HC Blue No. 2 had no significant effect on survival of female rats.

Pathology and Statistical Analyses of Results

This section describes significant or noteworthy changes in the incidences of rats with neoplastic or nonneoplastic lesions. 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 individual male and female rats. Findings on nonneoplastic lesions are summarized in Appendix C, Tables C1 and C2. Appendix E, Tables E1 and E2, contains the statistical analyses of those primary tumors that occurred with an incidence of at least 5% in one of the three groups. The statistical analyses used are discussed in Chapter II (Statistical Methods) and Appendix E (footnotes). Historical incidences of tumors in control animals are listed in Appendix F.

Liver: Focal inflammation was observed at increased incidences in dosed male rats and in high dose female rats (male: control, 1/50; low dose, 17/50; high dose, 7/49; female: control, 19/50; low dose, 18/50; high dose, 28/50). The inflammation of the liver consisted of granulomas in the nonportal areas. These granulomas were small, consisting of six to eight cells, and were not numerous. Many livers had only one of these granulomas; some had three or four. When the livers were reevaluated in a blind fashion, the severity of inflammation did not appear to be dose related.

Cytoplasmic vacuolization (graded as minimal to mild) was observed at increased incidences in dosed male rats and low dose female rats (male: control, 6/50; low dose, 17/50; high dose, 22/49; female: control, 5/50; low dose, 15/50; high dose, 8/50).

Neoplastic nodules or carcinomas were observed in dosed female rats (control, 0/50; low dose, 2/50; high dose, 3/50) but not at statistically significant incidences.

	Control	Low Dose	High Dose
MALE (a)		5,000 ppm	10,000 ppm
nimals Initially in Study	50	50	50
Vonaccidental Deaths Before Termination (b)	18	12	8
Killed at Termination	32	38	42
urvival P Values (c)	0.030	0.249	0.043
EMALE (a)		10 ,000 ppm	20,000 ppm
nimals Initially in Study	50	50	50
Ionaccidental Deaths Before Termination (b)	9	10	11
Killed at Termination	41	40	39
urvival P Values (c)	0.660	0.952	0.740

TABLE 8. SURVIVAL OF RATS IN THE TWO-YEAR FEED STUDIES OF HC BLUE NO. 2

(a) Terminal kill period: weeks 104-105

(b) Includes animals killed in a moribund condition

(c) The results of the life table trend test are in the control column, and the results of the life table exact pairwise comparisons with the controls are in the dosed columns.



FIGURE 2. KAPLAN-MEIER SURVIVAL CURVES FOR RATS FED DIETS CONTAINING HC BLUE NO. 2 FOR TWO YEARS

Skull: Hyperostosis was observed at increased incidences in dosed rats of each sex (male: control, 5/50; low dose, 8/50; high dose, 25/49; female: control, 2/50; low dose, 19/50; high dose, 49/50). The hyperostosis consisted mainly of an increase in the number or thickness of the lamellae of the compact bone tissue of the calvaria, as compared with the calvaria of rats in the control groups. In the animals with hyperostosis, the new bone appeared similar to the old bone but was separated from it by a smooth basophilic cement line, suggesting that previous bone resorption did not precede the deposition of new bone. One high dose male and nine high dose females also had hyperostosis of the tympanic cavity.

Lung: Histiocytosis was observed at increased incidences in low dose male rats and in dosed female rats (male: control, 4/50; low dose, 14/50; high dose, 4/49; female: control, 6/50; low dose,

28/50; high dose, 19/50). The histiocytosis consisted of subpleural collections of macrophages in alveoli. These cells often contained fine cytoplasmic brown pigment.

Kidney: Malignant mixed mesenchymal tumors were observed in two high dose female rats. Both mesenchymal tumors were relatively large; one involved one-fourth and the other replaced three-fourths of the kidney. The tumors were characterized by spindle cells with round to irregular vesicular nuclei and moderate cytoplasm. Myxomatous and fibrosarcomatous areas were both present within the tumors. Neither tumor appeared to be encapsulated.

Thyroid Gland: C-cell carcinomas in male rats occurred with a significant positive trend, but the incidences of C-cell adenomas or carcinomas (combined) were not significant by any of the statistical tests (Table 9).

	Control	5,000 ppm (b)	10,000 ppm (b
C-Cell Adenoma			
Overall Rates	7/50 (14%)	2/50 (4%)	5/49 (10%)
C-Cell Carcinoma			
Overall Rates	0/50 (0%)	3/50 (6%)	5/49 (10%)
Adjusted Rates	0.0%	7.6%	11.9%
Terminal Rates	0/32 (0%)	2/38 (5%)	5/42 (12%)
Life Table Tests	P = 0.044	P=0.154	P=0.061
Incidental Tumor Tests	P=0.029	P=0.123	P = 0.061
C-Cell Adenoma or Carcinoma			
Overall Rates	7/50 (14%)	5/50 (10%)	10/49 (20%)
Adjusted Rates	19.5%	12.0%	23.8%
Terminal Rates	5/32 (16%)	3/38 (8%)	10/42 (24%)
Life Table Tests	P = 0.414	P = 0.290N	P = 0.510
Incidental Tumor Tests	P = 0.273	P = 0.395N	P = 0.407

TABLE 9. ANALYSIS OF THYROID GLAND TUMORS IN MALE RATS IN THE TWO-YEAR FEEDSTUDY OF HC BLUE NO. 2 (a)

(a) The statistical analyses used are discussed in Chapter II (Statistical Methods) and Appendix E (footnotes).

(b) The equivalent dose in milligrams per kilogram per day is given in Chapter III (Body Weights and Clinical Signs) and Appendix L.

Eve: A number of rats were found to have cataracts and/or retinopathy (Table 10). These ocular changes are not believed to be related to the administration of HC Blue No. 2 but are thought to be due to the proximity of the animals' cages to the light source in the animal room. These studies were conducted before the initiation of routine animal cage rotation, a procedure done for the purpose of randomizing animals with respect to artificial light sources. High dose males and low dose females (the two groups most severely affected) were housed in the top rows of their respective cage racks. Control males and high dose females were housed in intermediate rows, and control females and low dose males (the least severely affected groups) were housed in the bottom rows. Ocular changes were not found in mice.

Negative Trends: Certain tumors occurred at decreased incidences in dosed groups relative to those of the controls. Significant negative trends for male rats included basal cell tumors or carcinomas of the skin (control, 4/50; low dose, 0/50; high dose, 0/49), integumentary system fibromas (control, 5/50; low dose, 2/50; high dose, 1/49), mononuclear cell leukemia (control, 12/50; low dose, 6/50; high dose, 5/49), adrenal pheochromocytoma (control, 13/50; low dose, 9/50; high dose, 7/49), and interstitial cell tumors of the testis (control, 45/50; low dose, 47/50; high dose, 37/49).

In female rats, a negative trend was observed for mammary gland fibroadenoma (control, 20/50; low dose, 10/50; high dose, 4/50).

TABLE 10.	NUMBER	OF RATS WITH	I RETINOPATHY	OR CATARACTS	IN THE TWO-YEAR FEED
		8	STUDIES OF HC B	BLUE NO. 2	

	Control	Low Dose	High Dose
MALE		5,000 ppm	10,000 ppm
No. of animals examined	50	50	49
Retinopathy	6	2	16
Cataracts	3	2	14
FEMALE		10,000 ppm	20,000 ppm
No. of animals examined	50	50	50
Retinopathy	3	12	10
Cataracts	Ō	10	2

SINGLE-ADMINISTRATION STUDIES (Lot No. 5130777)

All the mice survived to the end of the studies, and there were no notable effects on body weight gain (Table 11). The urine of dosed mice that received 125, 250, 500, or 1,000 mg/kg was blue on day 1. The urine of one or two mice in these dosed groups was blue on day 2. The urine of one female mouse that received 1,000 mg was bluish red through day 4. Mice that received 1,000 mg/kg were slightly inactive for 4 days after dosing.

TABLE 11.	SURVIVAL AND MEAN BODY WEIGHTS OF MICE IN THE SINGLE-ADMINISTRATION
	GAVAGE STUDIES OF HC BLUE NO. 2

		Mean Body Weights (grams)				
Dose (mg/kg)	Survival (a)	Initial	Final	Change (b)		
ÍALE	<u></u>					
62	5/5	19.4 ± 0.6	23.4 ± 0.4	$+4.0 \pm 0.6$		
125	5/5	23.0 ± 0.7	25.6 ± 0.9	$+2.6 \pm 0.7$		
250	5/5	20.8 ± 0.6	23.6 ± 0.5	$+2.8 \pm 0.7$		
500	5/5	20.6 ± 0.8	23.4 ± 0.5	$+2.8 \pm 0.7$		
1,000	5/5	20.0 ± 0.3	23.0 ± 0.5	$+3.0 \pm 0.3$		
EMALE						
62	5/5	17.8 ± 0.9	19.4 ± 0.7	$+1.6 \pm 0.2$		
125	5/5	17.4 ± 0.4	19.8 ± 0.2	$+2.4 \pm 0.2$		
250	5/5	16.6 ± 0.7	17.4 ± 0.7	$+0.8 \pm 0.5$		
500	5/5	18.2 ± 0.8	20.0 ± 0.8	$+1.8 \pm 0.4$		
1,000	5/5	16.8 ± 0.8	18.4 ± 0.5	$+1.6 \pm 0.5$		

(a) Number surviving/number initially in the group

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

FOURTEEN-DAY REPEATED-EXPOSURE STUDIES (Lot No. 5130777)

All the mice survived to the end of the studies (Table 12). Mice that received 50,000 ppm lost weight, and female mice receiving 25,000 ppm showed a 10% decrease in body weight relative to that of the controls. The final body weights of

other dosed groups were similar to those of the controls. Dosed mice had violet urine throughout the studies. No compound-related effects were observed at necropsy.

		Mean	Final Weight		
Concentration (ppm)	Survival (a)	Initial	Final	Change (b)	Relative to Controls (percent)
MALE		·			
0	5/5	21.6 ± 0.7	22.0 ± 0.8	$+0.4 \pm 0.7$	
3,100	5/5	20.8 ± 0.4	21.6 ± 0.5	$+0.8 \pm 0.4$	98.2
6,200	5/5	20.6 ± 0.6	21.0 ± 1.2	$+0.4 \pm 0.9$	95.5
12,500	5/5	20.2 ± 0.7	21.8 ± 0.6	$+1.6 \pm 0.4$	99.1
25,000	5/5	20.8 ± 0.7	21.0 ± 0.7	$+0.2 \pm 0.5$	95.5
50,000	5/5	21.4 ± 0.7	20.6 ± 0.7	-0.8 ± 0.4	93.6
FEMALE					
0	5/5	18.4 ± 0.6	19.6 ± 0.5	$+1.2 \pm 0.4$	
3,100	5/5	17.4 ± 0.7	19.4 ± 1.0	$+2.0 \pm 0.3$	99.0
6,200	5/5	17.6 ± 0.8	19.0 ± 0.4	$+1.4 \pm 0.4$	96.9
12,500	5/5	18.6 ± 0.2	19.6 ± 0.4	$+1.0 \pm 0.3$	100.0
25,000	5/5	17.2 ± 0.6	17.6 ± 0.5	$+0.4 \pm 0.2$	89.8
50,000	5/5	18.4 ± 0.5	18.0 ± 0.3	-0.4 ± 0.5	91.8

TABLE 12. SURVIVAL AND MEAN BODY WEIGHTS OF MICE IN THE FOURTEEN-DAY REPEATED-EXPOSURE FEED STUDIES OF HC BLUE NO. 2

(a) Number surviving/number initially in the group

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

RERUN FOURTEEN-DAY REPEATED-EXPOSURE STUDIES (Lot No. 9233)

These studies were conducted after the 13-week studies. All the mice survived to the end of the studies (Table 13). Dosed mice had violet urine. Control male mice gained no weight during the studies. Final mean body weights of mice were not dose related. No compound-related effects were observed at necropsy. It was concluded that the results of the 13-week studies with lot no. 5130777 could be used to select doses for the 2-year studies with lot no. 9223.

		Mea	Final Weight		
Concentration (ppm)	Survival (a)	Initial	Final	Change (b)	Relative to Controls (percent)
MALE			· · · · · · · · · · · · · · · · · · ·	<u> </u>	
0	5/5	27.6 ± 0.7	27.6 ± 0.7	0.0 ± 0.5	
3,100	5/5	28.0 ± 0.8	29.8 ± 0.8	$+1.8 \pm 0.7$	108.0
6,200	5/5	28.0 ± 0.4	28.8 ± 0.6	$+0.8 \pm 0.4$	104.3
12,500	5/5	28.4 ± 0.2	30.0 ± 0.5	$+1.6 \pm 0.5$	108.7
25,000	5/5	28.4 ± 0.9	29.2 ± 1.2	$+0.8 \pm 0.4$	105.8
50,000	5/5	26.6 ± 0.4	26.8 ± 0.6	$+0.2 \pm 0.6$	97.1
FEMALE					
0	5/5	19.2 ± 0.2	20.8 ± 0.2	$+1.6 \pm 0.2$	••
3,100	5/5	19.4 ± 0.6	20.8 ± 0.4	$+1.4 \pm 0.2$	100.0
6,200	5/5	18.0 ± 0.4	19.2 ± 0.5	$+1.2 \pm 0.4$	92.3
12,500	5/5	20.0 ± 0.5	20.2 ± 1.0	$+0.2 \pm 0.6$	97.1
25,000	5/5	19.8 ± 0.6	20.4 ± 0.6	$+0.6 \pm 0.4$	98.1
50,000	5/5	19.0 ± 0.5	20.0 ± 0.5	$+1.0 \pm 0.0$	96.2

TABLE 13. SURVIVAL AND MEAN BODY WEIGHTS OF MICE IN THE RERUN FOURTEEN-DAYREPEATED-EXPOSURE FEED STUDIES OF HC BLUE NO. 2

(a) Number surviving/number initially in the group

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

THIRTEEN-WEEK STUDIES (Lot No. 5130777)

All the mice survived to the end of the studies (Table 14). Final mean body weights of mice that received 50,000 ppm were depressed 11.5% for males and 9.9% for females, compared with their respective controls. Feed consumption was not dose related. The urine of dosed mice was purple. No compound-related histopathologic effects were observed.

Concentrations of 5,000 and 10,000 ppm HC Blue No. 2 were selected for male mice and 10,000 and 20,000 ppm were selected for female mice in the 2-year studies. The doses were selected primarily on the basis of body weight gain data.

TABLE 14. SURVIVAL, MEAN BODY WEIGHTS, AND FEED CONSUMPTION OF MICE IN THE THIRTEEN-WEEK FEED STUDIES OF HC BLUE NO. 2

Concen-		Mean Body Weights (grams)			Final Weight	Feed Consumption (c) (grams per animal)	
tration (ppm)	Survival (a)	Initial	Final	Change (b)	Relative to Controls (percent)	Day 30	Day 86
MALE				·			
0	10/10	21.4 ± 0.6	31.2 ± 0.7	$+9.8\pm0.5$		4.9	5.1
3,100	10/10	21.9 ± 0.4	31.1 ± 1.0	$+9.2\pm0.7$	99.7	4.7	5.6
6,200	10/10	22.4 ± 0.6	29.8 ± 0.8	$+7.4 \pm 0.5$	95.5	5.2	6.0
12,500	10/10	23.6 ± 0.5	30.8 ± 0.8	$+7.2 \pm 0.6$	98.7	6.0	5.6
25,000	10/10	22.7 ± 0.5	29.2 ± 0.6	$+6.5\pm0.4$	93.6	6.5	5.2
50,000	10/10	22.4 ± 0.5	27.6 ± 0.7	$+ 5.2 \pm 0.5$	88.5	6.1	6.5
FEMALE	1						
0	10/10	18.7 ± 0.4	26.2 ± 0.6	$+7.5 \pm 0.5$		6.0	7.2
3,100	10/10	19.5 ± 0.5	26.3 ± 0.6	$+ 6.8 \pm 0.5$	100.4	3.9	4.3
6,200	10/10	18.0 ± 0.4	24.7 ± 0.4	$+6.7\pm0.4$	94.3	3.6	3.2
12,500	10/10	18.4 ± 0.5	25.5 ± 0.4	$+7.1 \pm 0.3$	97.3	5.7	5.1
25,000	10/10	19.0 ± 0.6	24.5 ± 0.6	$+ 5.5 \pm 0.6$	93.5	5.6	3.8
50,000	10/10	18.1 ± 0.7	23.6 ± 0.6	$+5.5 \pm 0.2$	9 0.1	5.5	4.5

(a) Number surviving/number in group

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

(c) Grams of feed per animal

TWO-YEAR STUDIES

Body Weights and Clinical Signs

Mean body weights of high dose male mice were lower than those of the controls after week 22; mean body weights of dosed female mice were lower than those of the control group after week 12 (Table 15 and Figure 3). Low dose and high dose male mice consumed 104% and 85% as much feed as the controls per day; low dose and high dose female mice consumed 110% and 120% as much feed as the controls (Appendix L, Tables L3 and L4). The average dose per day was approximately 1,320 and 2,240 mg/kg for low dose and high dose male mice and 2,330 and 5,600 mg/kg for low dose and high dose female mice.

TABLE 15. MEAN BODY WEIGHTS AND SURVIVAL OF MICE IN THE TWO-YEAR FEED STUDIES OF HC BLUE NO. 2

Weeks	Av. WL	ntrol		Low Dose			High Dose Wt. (percent	
Weeks on Study	Av. Wt. (grams)	No. of Survivors	Av. Wt. (grams)	Wt. (percent of controls)	No. of Survivors	Av. Wt. (grams)	Wt. (percent of controis)	No. of Survivors
MALE				5,000 ppm			10,000 ppm	
012345678901123722625059667261593971105	25788990 331222333333468890142241132223333334688901422411432223333333346889014224114444444444444444444444444444444	500000099999986432220099544333221944 4444444900995544333221944	26 289 300 312 333 34 44 357 890 401 412 41 422 421 409 88 88 37 890 401 412 41 422 424 409 88 88 37 890 337 338 337 337 337 337 337 337 337 337	$\begin{array}{c} 104.0\\ 103.7\\ 103.6\\ 103.4\\ 103.3\\ 100.0\\ 100.0\\ 103.1\\ 103.1\\ 103.0\\ 103.0\\ 103.0\\ 103.0\\ 103.0\\ 103.0\\ 103.0\\ 102.9\\ 102.8\\ 100.0\\ 100.0\\ 100.0\\ 100.0\\ 100.0\\ 100.0\\ 97.6\\ 100.0\\ 100.0\\ 100.0\\ 97.7\\ 100.0\\ 100.0\\ 97.7\\ 100.0\\ 100.0\\ 97.7\\ 100.0\\ 97.7\\ 97.4\\ 97.4\\ 97.4\\ 94.9\\ 94.9\\ \end{array}$	50 550 500 500 500 500 500 500 500 500	25 27 28 29 30 31 31 32 33 33 33 33 33 33 33 33 33 33 33 33	$\begin{array}{c} 100.0\\ 100.0\\ 100.0\\ 100.0\\ 100.0\\ 100.0\\ 100.0\\ 100.0\\ 100.0\\ 100.0\\ 100.0\\ 100.0\\ 100.0\\ 100.0\\ 100.0\\ 100.0\\ 102.9\\ 97.4\\ 97.5\\ 95.1\\ 95.1\\ 95.2\\ 95.1\\ 95.2\\ 95.1\\ 95.2\\ 95.1\\ 95.2\\ 95.1\\ 95.2\\ 95.1\\ 95.1\\ 95.2\\ 95.1\\ 95.4\\ 97.6\\ 93.0\\ 95.4\\ 95.0\\ 95.4\\ 95.0\\ 95.1\\ 95.0\\ 95.4\\ 95.4\\ $	50500000000000000000000000000000000000
FEMALE				10 ,000 ppm			20,000 ppm	
0 123456789 101123722622593726 1123722623344505593726 8850937 105	19 21 22 22 22 22 22 22 22 22 22 22 22 22	50 50 50 50 50 50 50 50 50 50	20 20222 223 225 225 225 225 225 225 225 225	$\begin{array}{c} 105.3\\ 95.2\\ 104.8\\ 100.0\\ 100.0\\ 100.0\\ 100.0\\ 100.0\\ 100.0\\ 100.0\\ 100.0\\ 104.0\\ 104.2\\ 96.0\\ 104.2\\ 96.7\\ 93.8\\ 91.4\\ 91.4\\ 91.4\\ 91.4\\ 91.4\\ 91.4\\ 91.4\\ 91.4\\ 91.4\\ 91.4\\ 91.4\\ 91.4\\ 91.4\\ 91.4\\ 85.0\\ 83.7$	50 50 50 50 50 50 50 50 50 50 50 50 50 5	19 20 21 22 22 22 24 25 25 25 25 26 28 20 29 20 29 20 20 20 20 20 20 20 20 20 20 20 20 20	$\begin{array}{c} 100.0\\ 95.2\\ 100.0\\ 95.5\\ 95.7\\ 95.7\\ 95.8\\ 96.0\\ 100.0\\ 100.0\\ 100.0\\ 100.0\\ 100.0\\ 104.2\\ 96.0\\ 100.0\\ 104.2\\ 96.0\\ 100.0\\ 100.0\\ 87.5\\ 82.8\\ 77.4\\ 77.5\\ 71.1\\ 73.8\\ 85.7\\ 74.4\\ 76.9\\ 68.9\\ 74.4\\ 76.2\\ 78.0\\ \end{array}$	50000999999999999999999999999999999999



FIGURE 3. GROWTH CURVES FOR MICE FED DIETS CONTAINING HC BLUE NO. 2 FOR TWO YEARS

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Survival

Estimates of the probabilities of survival of male and female mice fed diets containing HC Blue No. 2 at the concentrations used in these studies and those of the controls are shown in the Kaplan and Meier curves in Figure 4. The survival of the control group of male mice was significantly lower than that of the high dose group after week 100 and was somewhat lower than the historical survival of control male mice at this laboratory (Table 16). In the previous feeding studies at this laboratory, the mean survival in untreated control male B6C3F₁ mice was 76% \pm 7% (range, 64%-84%). Survival of the high dose female group was significantly lower than that of the controls after week 97.

Pathology and Statistical Analyses of Results

This section describes significant or noteworthy changes in the incidences of mice with neoplastic or nonneoplastic lesions. Histopathologic findings on neoplasms in mice are summarized in Appendix B, Tables B1 and B2; Tables B3 and B4 give the survival and tumor status for individual male and female mice. Findings on nonneoplastic lesions are summarized in Appendix D, Tables D1 and D2. Appendix E, Tables E3 and E4, contain the statistical analyses of those primary tumors that occurred with an incidence of at least 5% in one of the three groups. The statistical analyses used are discussed in Chapter II (Statistical Methods) and Appendix E (footnotes). Historical incidences of tumors in control animals are listed in Appendix F.

	Control	Low Dose	High Dose
MALE (a)		5,000 ppm	10,000 ppm
Animals Initially in Study	50	50	50
Nonaccidental Deaths Before Termination (b)	26	26	16
Animals Missing	Ō	1	Ō
Killed at Termination	24	23	34
Survival P Values (c)	0.027	0.965	0.030
FEMALE (a)		10,000 ppm	20,000 ppm
Animals Initially in Study	50	50	50
Nonaccidental Deaths Before Termination (b)	15	22	30
Killed at Termination	35	27	19
Died During Termination Period	Ó	1	1
Survival P Values (c)	0.005	0.256	0.008

TABLE 16. SURVIVAL OF MICE IN THE TWO-YEAR FEED STUDIES OF HC BLUE NO. 2

(a) Terminal kill period: weeks 105-106

(b) Includes animals killed in a moribund condition

(c) The results of the life table trend test are in the control column, and the results of the life table exact pairwise comparisons with the controls are in the dosed columns.



FIGURE 4. KAPLAN-MEIER SURVIVAL CURVES FOR MICE FED DIETS CONTAINING HC BLUE NO. 2 FOR TWO YEARS

III. RESULTS: MICE

Hematopoietic System: Lymphocytic malignant lymphomas and malignant lymphomas (all types) occurred in male mice with significant positive trends, but the incidences in the dosed groups were not significantly greater than those in the controls by pairwise comparisons (Table 17). The incidence of lymphomas in high dose female mice was lower than that in the controls. Leukemia was not observed in either male or female mice. Hematopoiesis was observed at an increased incidence in the liver and spleen of high dose female mice (Table 18).

TABLE 17. ANALYSIS OF HEMATOPOIETIC SYSTEM TUMORS IN MICE IN THE TWO-YEAR FEED STUDIES OF HC BLUE NO. 2 (a)

	Control	Low Dose	High Dose
MALE		5,000 ppm (b)	10,000 ppm (b
Malignant Lymphoma, Lymphocytic Type			
Overall Rates	0/50 (0%)	2/48 (4%)	5/49 (10%)
Adjusted Rates	0.0%	8.7%	13.5%
Terminal Rates	0/24 (0%)	2/23 (9%)	3/34 (9%)
Life Table Tests	P = 0.043	P = 0.228	P = 0.069
Incidental Tumor Tests	P=0.040	P = 0.228	P=0.068
Lymphoma, All Malignant (c)			
Overall Rates	1/50 (2%)	5/48 (10%)	8/49 (16%)
Adjusted Rates	4.2%	17.6%	19.7%
Terminal Rates	1/24 (4%)	2/23 (9%)	4/34 (12%)
Life Table Tests	P = 0.053	P = 0.110	P = 0.060
Incidental Tumor Tests	P=0.050	P = 0.157	P=0.095
FEMALE		1 0,000 ppm (b)	20,000 ppm (b)
Lymphoma, All Malignant (d)			
Overall Rates	12/50 (24%)	11/50 (22%)	7/50 (14%)
Adjusted Rates	27.8%	32.1%	20.2%
Terminal Rates	5/35 (14%)	7/28 (25%)	1/20 (5%)
Life Table Tests	P=0.399N	P = 0.523	P=0.397N
Incidental Tumor Tests	P=0.065N	P = 0.479N	P = 0.030N

(a) The statistical analyses used are discussed in Chapter II (Statistical Methods) and Appendix E (footnotes).

(b) The equivalent dose in milligrams per kilogram per day is given in Chapter III (Body Weights and Clinical Signs) and Appendix L.

(c) Historical incidence at testing laboratory (mean \pm standard deviation): 8.9% \pm 4.69%; historical incidence in NTP studies: 12.0% \pm 6.7%

(d) Historical incidence at testing laboratory : 19.7% ± 7.7%; historical incidence in NTP studies: 25.1% ± 10.1%

TABLE 18. INCIDENCES OF MICE WITH HEMATOPOIESIS IN THE LIVER AND SPLEEN IN THETWO-YEAR FEED STUDIES OF HC BLUE NO. 2

	Control	Low Dose	High Dose
MALE		5,000 ppm	10,000 ppm
Liver Spleen	0/50 10/50	2/48 6/47	1/49 4/49
FEMALE		10 ,000 ppm	20,000 ppm
Liver Spleen	2/50 8/50	3/50 9/50	11/49 20/49

Pituitary: The incidence of pituitary adenomas in low dose female mice was significantly less than that in the controls (control, 9/49; low dose, 2/48; high dose, 5/49).

Forestomach: Squamous cell papillomas were observed in 2/49 high dose male mice and in 1/49 control female mice.

Bone: Fibrous osteodystrophy was observed at increased incidences in dosed female mice (control, 2/50; low dose, 5/50; high dose, 12/50) but not in any male mice. Hyperostosis of the skull was observed in 4/50 high dose female mice and 1/49 high dose male mice but not in any of the other groups of mice.

Multiple Organs: Suppurative inflammation of the prostate, preputial gland, seminal vesicle, urethra, bulbourethral gland, or multiple organs was observed in 7/50 control, 10/48 low dose, and 5/49 high dose male mice. Suppurative inflammation of the uterus or multiple organs or ovarian abscesses were observed in 8/15 (53%) control, 12/23 (52%) low dose, and 26/31 (84%) high dose female mice that died before the end of the study. The suppurative inflammation in the female mice usually caused death by spreading to multiple secondary sites and because of possible concurrent septicemia.

IV. DISCUSSION AND CONCLUSIONS

The oral route of administration was selected to maximize chances of detecting systemic effects associated with administration of HC Blue No. 2. Absorption of HC Blue No. 2 from the gastrointestinal tract was evident by the observation of blue urine during single-administration gavage and 14-day repeated-exposure feed studies. Except for one mouse in the single-administration studies, blue urine was noted only on the day of dosing and on the following day. This observation is similar to those made during the HC Blue No. 1 studies (NTP, 1985) in which blue urine was observed for 1-2 days after dosing. HC Blue No. 2 is known to be absorbed through the skin, albeit less than 0.1% (Burnett, C., personal communication to NTP, 1984).

During the HC Blue No. 2 prechronic studies conducted on both species, the only endpoint that was noticeably influenced by dosing was body weight gain. All animals survived to the completion of the 13-week studies, which used diets with concentrations ranging from 0 to 50,000 ppm. All dosed rats and mice gained weight during this experiment, and weight gained by female rats was comparable to that gained by the control group. Male rats that received as little as 6,200 ppm HC Blue No. 2 exhibited a 12% depression in final mean body weight relative to the controls. This decrease in body weight gain could not be explained on the basis of decreased feed consumption. Male and female mice receiving diets with 50,000 ppm of HC Blue No. 2 had final mean body weights that were 88% (males) and 90% (females) those of the controls. Other dose groups also exhibited slight weight differences; these changes ranged from +0.4% in females receiving diets with the 3,100ppm concentration to -6.5% in females receiving 25,000 ppm. The selection of dietary concentrations to be used in the 2-year studies (5,000 or 10,000 ppm for male rats and mice and 10,000 or 20,000 ppm for female rats and mice) was based largely on weight gains during the 13week studies.

The survival of dosed male and female rats was not adversely affected by dietary administration of HC Blue No. 2 for 103-104 weeks. In fact, the survival of high dose males (42/50) was significantly greater than that of control males (32/50) at 104 weeks. The final mean body weights in dosed male rats were within 10% that of the controls, whereas the final mean body weights in low dose and high dose females were 13% and 22% lower than that of the controls.

Hyperostosis of the skull was produced by HC Blue No. 2 administration. This alteration was characterized by an increase in the number or thickness of lamellae of the compact bone of the calvaria. This unusual finding was present in a few control animals, whereas the incidence was increased considerably in the dosed groups with females being more affected than males (male: control, 5/50; low dose, 8/50; high dose, 25/49; female: control, 2/50; low dose, 19/50; high dose, 49/50). Hyperostosis of the skull was also observed in 4/50 high dose female mice and 1/49 high dose male mice. This skeletal alteration was not detected in control or low dose mice. This thickening of the bone was apparently not secondary to renal or parathyroid effects of HC Blue No. 2, since no parathyroid lesions were detected in the animals in these studies. Restriction of the hyperostosis to the skull may be more a reflection of the method of examination than the actual distribution of the lesion. The hyperostosis was visible grossly as white nodular raised areas on the calvaria when the brain was removed. The rest of the skeleton was not systematically examined grossly, but there was some bone deposition in other bones examined histologically. Bone changes are a dynamic process; thus, without studies using a time marker, it is not possible to determine the pathogenic mechanisms in the HC Blue No. 2 study.

A second skeletal change, fibrous osteodystrophy, was observed in all groups of female mice. Although the incidences were increased in a dose-related manner (control, 2/50; low dose, 5/50; high dose, 12/50), the change is not considered to be due to HC Blue No. 2 administration because fibrous osteodystrophy is a common finding in aged B6C3F₁ mice.

Malignant mixed mesenchymal neoplasms of the kidney were seen at the end of the study in two high dose female rats but not in any of the other groups of rats. Although those renal lesions are uncommon neoplasms in female F344/N rats at this laboratory and in NTP studies (0/1,863), the occurrence of these two neoplasms is not considered to be compound related. The incidence of C-cell carcinomas of the thyroid gland increased in male rats (0/50, 3/50, 5/49), but this increase was accompanied by a decrease in C-cell adenomas, and the incidences of C-cell adenomas or carcinomas (combined) were not significantly different. Thus, the C-cell carcinomas were considered unrelated to HC Blue No. 2 administration.

The survival of male mice was not reduced by the administration of HC Blue No. 2, and, as in the rat studies, the survival of high dose male mice (34/50) was greater than that of the control males (24/50) at weeks 105-106. The survival of high dose female mice (19/50) was significantly lower than that of the controls (35/50), but it is difficult to attribute this decreased survival to the administration of HC Blue No. 2 since at week 90, 78% of the control females were alive as compared with 70% of the high dose females. During the final 15 weeks of the study, 4 control females died, whereas 16 high dose females died. Most of the early deaths among female mice in this study (control, 8/15, 53%; low dose, 12/23, 52%; high dose, 26/31, 84%) were attributable to a reproductive tract infection characterized by ovarian abscesses and suppurative inflammation of the uterus which spread to multiple organs. The dose-related increases in hematopoiesis of the liver and spleen in female mice are believed to be a part of a leukemoid reaction in response to this infection; similar infections have been found at this and other laboratories. Both Klebsiella oxytoca and K. pneumoniae have been isolated from ovarian abscesses; however, the exact source is not known. The early deaths among the high dose female mice are not considered to have been due to HC Blue No. 2. Despite the infection, over half of the animals in the high dose group (54%) survived for more than 97 weeks.

The final mean body weights of dosed male mice were within 5% of that of the control group, but final mean body weights for dosed females were 85% (10,000 ppm) or 78% (20,000 ppm) that of the control group.

Negative trends occurred in the incidences of basal cell tumors or carcinomas of the skin, pheochromocytomas of the adrenal gland, mononuclear cell leukemia, skin or subcutaneous fibromas, and testicular interstitial cell tumors in male rats and of mammary gland fibroadenomas in female rats. Most of these negative trends could be related to greater than usual tumor incidences in the concurrent control groups. Reduced incidences of mammary gland fibroadenomas in female F344/N rats were found in previous NTP studies to be associated with decreased weight gain (Haseman, 1983); this association was observed in the current study as well.

A marginal positive trend (P=0.05) occurred in the incidences of lymphoma in male mice, but the incidences in the dosed groups were not significantly elevated relative to that in the controls. This trend may be due to a low incidence of these tumors in the control group. Lymphocytic-type malignant lymphoma was not observed in the controls; a single malignant lymphoma was diagnosed in the control group. The historical incidences of lymphomas (all types) are 9% for this laboratory and 12% for the Program. The marginal positive trend noted in this study is not considered to be associated with the administration of HC Blue No. 2.

The results of these studies afford an opportunity to compare the toxicologic and carcinogenic properties of two closely related chemicals that are both used as hair dyes. Structurally, HC Blue No.1 and HC Blue No 2 differ only in the substituent on the secondary amine in position number 4 of the molecule. In HC Blue No. 1, this substituent is a methyl group, whereas in HC Blue No.2, it is a hydroxyethyl group (Figure 5).

Both studies were conducted at the same laboratory, in the same strains of animals, and at approximately the same time. The 2-year portion of the HC Blue No. 1 studies was conducted between May 1979 and April 1981, and the HC Blue No. 2 studies were conducted between February 1980 and February 1982. Also, the doses used for the single-administration and 14day repeated-exposure studies were the same.

Because of the absence of any remarkable toxicologic effects during the 13-week phases of both studies, concentrations for the 2-year studies were based on chemical-induced reductions in body weight gains. Concentrations selected for the 13-week studies of HC Blue No. 1 ranged



HC BLUE NO. 1 2,2'-((4-METHYLAMINO)-3-NITROPHENYL)IMINO)BIS(ETHANOL) CAS NO. 2784-94-3



HC BLUE NO. 2 2,2'-((4-((2-HYDROXYETHYL)AMINO)-3-NITROPHENYL)IMINO)BIS(ETHANOL) CAS NO. 33229-34-4

FIGURE 5. CHEMICAL STRUCTURES OF HC BLUE NO.1 AND HC BLUE NO.2

from 750 to 12,500 ppm as compared with concentrations of 3,100 to 50,000 ppm in the 13week HC Blue No. 2 studies. During the 13week studies of HC Blue No. 1, a golden-brown pigment (not identified) was observed in the cytoplasm of thyroid epithelial cells in both rats and mice. No microscopic changes were detected in animals dosed for 13 weeks with HC Blue No. 2 (at dose concentrations four times greater than those used for HC Blue No. 1).

Hepatocellular neoplasia in mice and in male rats was the most striking effect of the 2-year administration of HC Blue No. 1 (NTP, 1985). Ninety-six percent of the high dose female mice in that study developed hepatocellular carcinomas. In addition, HC Blue No. 1 administration caused proliferative lesions of the thyroid gland in male mice and of the lung in female rats. In contrast, the long-term administration of HC Blue No. 2 was not considered to be associated with increases in the incidences of any primary tumors in either rats or mice. Also, proliferative changes of the thyroid gland and lung or pigmentation of the thyroid gland were not features of HC Blue No. 2 administration. The single effect produced by the administration of HC Blue No. 2 was hyperostosis of the skull, an effect seen primarily in rats, although it was found also in a small number of high dose mice.

The differences in the toxicologic potentials of these two closely related chemicals might be attributable to differing rates of absorption from the gastrointestinal tract, to excretion, or to different routes of biotransformation. Since colored urine is produced after single gavage administrations of the dyes to both rats and mice, both chemicals are absorbed to some extent, and both are excreted at least partly in the urine. In the earlier report on the HC Blue No. 1 studies (NTP, 1985), it was suggested that the compound might be subject to N-demethylation of the secondary amine, resulting in the formation of an aromatic amine. The presence of the hydroxyethyl substituent on the secondary amine moiety of HC Blue No. 2 may favor conjugation rather than dealkylation. Conjugation would favor more rapid urinary excretion, inhibit Ndealkylation, and therefore reduce the amount of free amine formed.

After this study ended, the dye sample used for the 2-year studies was found to contain approximately 22 ppm of nitrosamines. Five discrete nitrosamines were found in the sample, and only one (N-nitrosodiethanolamine, 2.7 ppm) was identified. Based on total nitrosamine content of the dye and concentrations of the dye in the diet, high dose male rats and mice received an estimated 220 ppb of total nitrosamines and high dose female rats and mice received 440 ppb. Since there was no evidence of carcinogenicity attributable to the administration of HC Blue No. 2, the presence of the nitrosamines is not considered to be a significant factor in this study.

Conclusions: Under the conditions of these studies, there was no evidence of carcinogenicity^{*} in male and female F344/N rats or in male and female $B6C3F_1$ mice receiving HC Blue No. 2 in the diet at concentrations of 0.5% and 1.0% for males and 1.0% and 2.0% for females for 2 years. HC Blue No. 2 administration caused a doserelated increase in the incidence of hyperostosis of the skull in male and female rats.

^{*}Categories of evidence of carcinogenicity are defined in the Note to the Reader on page 2.

V. REFERENCES

V. REFERENCES

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APPENDIX A

SUMMARY OF THE INCIDENCE OF NEOPLASMS IN RATS IN THE TWO-YEAR FEED STUDIES

OF HC BLUE NO. 2

C	CONTRO)L (UNTR)	LOWI	DOSE	HIGH	DOSE
ANIMALS INITIALLY IN STUDY	50		50		50	
ANIMALS NECROPSIED	50		50		49	
ANIMALS EXAMINED HISTOPATHOLOGICALLY	50		50		49	
NTEGUMENTARY SYSTEM						
*SKIN	(50)		(50)		(49)	
SQUAMOUS CELL PAPILLOMA	1	(2%)				(2%)
SQUAMOUS CELL CARCINOMA					1	(2%)
BASAL-CELL TUMOR		(6%)				
BASAL-CELL CARCINOMA	1	(2%)	-			
ADNEXAL ADENOMA	•	(00)		(4%)		(2%)
KERATOACANTHOMA FIBROMA		(6%)	2	(4%)	1	(2%)
*SUBCUT TISSUE		(4%)	(50)		(40)	
SQUAMOUS CELL CARCINOMA	(50)	(2%)	(50)		(49)	
SARCOMA, NOS		(2%)				
FIBROMA		(6%)	9	(4%)	1	(2%)
FIBROSARCOMA	5		4	(= / /		(2%)
LIPOMA	1	(2%)			-	
OSTEOSARCOMA, INVASIVE		(2%)				
NEUROFIBROSARCOMA		(2%)				
RESPIRATORY SYSTEM						
#TRACHEA	(48)		(43)		(47)	
C-CELL CARCINOMA, INVASIVE	(40)			(2%)	(47)	
#LUNG	(50)		(50)	(270)	(49)	
CARCINOMA, NOS, METASTATIC	(00)			(2%)	(40)	
ALVEOLAR/BRONCHIOLAR ADENOMA	1	(2%)	•	(2,2)	1	(2%)
ALVEOLAR/BRONCHIOLAR CARCINOMA	-	(= //)				(2%)
HEMATOPOIETIC SYSTEM						
*MULTIPLE ORGANS	(50)		(50)		(49)	
MALIG. LYMPHOMA, HISTIOCYTIC TYPE	• •	(2%)	(00)		(10)	
LEUKEMIA, MONONUCLEAR CELL		(24%)	6	(12%)	4	(8%)
#SPLEEN	(50)	(===,,,,	(50)	((49)	(0,0)
LEIOMYOSARCOMA	(,			(2%)	(-•)	
#SPLENIC SEROSA	(50)		(50)	()	(49)	
MESOTHELIOMA, NOS	1	(2%)				
#LIVER	(50)		(50)		(49)	
LEUKEMIA, MONONUCLEAR CELL					1	(2%)
CIRCULATORY SYSTEM NONE						
DIGESTIVE SYSTEM					<u> </u>	
#LIVER	(50)		(50)		(49)	
NEOPLASTIC NODULE		(2%)				(4%)
#HEPATIC SEROSA	(50)	()	(50)		(49)	
MESOTHELIOMA, NOS		(2%)	((
#PANCREAS	(50)		(50)		(49)	
ACINAR-CELL ADENOMA	/			(2%)		
#JEJUNUM	(50)		(50)		(49)	
SARCOMA, NOS	1	(2%)	. ,			
LEIOMYOSARCOMA	1	(2%)				
#COLONIC MUCOSA	(49)		(50)		(49)	
ADENOMATOUS POLYP, NOS				(2%)		

TABLE A1. SUMMARY OF THE INCIDENCE OF NEOPLASMS IN MALE RATS IN THE TWO-YEARFEED STUDY OF HC BLUE NO. 2

	CONTRO	L (UNTR)	LOWI	DOSE	HIGH	DOSE
URINARY SYSTEM						
#KIDNEY	(50)		(50)		(49)	
LIPOMA		(2%)				
#KIDNEY/PELVIS	(50)	,	(50)		(49)	
TRANSITIONAL-CELL CARCINOMA		(2%)				
ENDOCRINE SYSTEM	····	- 17		<u> </u>	·	
#PITUITARY	(50)		(49)		(48)	
ADENOMA, NOS		(18%)		(18%)		(21%)
ACIDOPHIL ADENOMA		(18%)	5	(10%)	10	(21 %)
#ADRENAL		(270)	(50)		(49)	
PHEOCHROMOCYTOMA	(50)	(900)		(18%)		(14%)
		(26%)				(1470)
#THYROID	(50)		(50)		(49)	(00)
FOLLICULAR-CELL CARCINOMA	-	(1.4.77)		(10)		(2%)
C-CELL ADENOMA	1	(14%)		(4%)		(10%)
C-CELL CARCINOMA				(6%)		(10%)
#PANCREATIC ISLETS	(50)		(50)		(49)	
ISLET-CELL ADENOMA		(2%)		(4%)	1	(2%)
ISLET-CELL CARCINOMA	1	(2%)	1	(2%)		
REPRODUCTIVE SYSTEM						
*MAMMARY GLAND	(50)		(50)		(49)	
FIBROADENOMA	1	(2%)			1	(2%)
*PREPUTIAL GLAND	(50)		(50)		(49)	
CARCINOMA, NOS		(2%)	2	(4%)		
#TESTIS	(50)	(,	(50)		(49)	
INTERSTITIAL-CELL TUMOR		(90%)		(94%)		(76%)
NERVOUS SYSTEM						
#BRAIN	(49)		(50)		(49)	
OSTEOSARCOMA, INVASIVE		(2%)	(00)		(10)	
SPECIAL SENSE ORGANS						
*EYELID	(50)		(50)		(49)	
NEURILEMOMA			(00)			(2%)
*EAR	(50)		(50)		(49)	(2,0)
SQUAMOUS CELL PAPILLOMA	(00)			(2%)	(43)	
	(50)		(50)	(270)	(49)	
*ZYMBAL GLAND	(50)			(00)	(43)	
CARCINOMA, NOS				(2%)		
SQUAMOUS CELL CARCINOMA			1	(2%)		(97)
ADENOSQUAMOUS CARCINOMA				·		(2%)
MUSCULOSKELETAL SYSTEM						
*SKULL	(50)		(50)		(49)	
OSTEOSARCOMA	1	(2%)	1	(2%)		
SODY CAVITIES						
*PELVIC ORGANS	(50)		(50)		(49)	
SARCOMA, NOS					1	(2%)
RHABDOMYOSARCOMA					1	(2%)
*TUNICA VAGINALIS	(50)		(50)		(49)	
MESOTHELIOMA, NOS				(6%)	1	(2%)

TABLE A1. SUMMARY OF THE INCIDENCE OF NEOPLASMS IN MALE RATS IN THE TWO-YEAR FEED STUDY OF HC BLUE NO. 2 (Continued)

TABLE A1. SUMMARY OF THE INCIDENCE OF NEOPLASMS IN MALE RATS IN THE TWO-YEAR FEED STUDY OF HC BLUE NO. 2 (Continued)

C	ONTROL (UNTR)	LOW DOSE	HIGH DOSE
ALL OTHER SYSTEMS *MULTIPLE ORGANS	(50)	(50)	(40)
C-CELL CARCINOMA, METASTATIC	(50)	(50) 1 (2%)	(49)
SARCOMA, NOS	1 (2%)	1 (2%)	
LUMBAR REGION			
OSTEOSARCOMA	1		
* NUMBER OF ANIMALS WITH TISSUE EXAMINE NUMBER OF ANIMALS NECROPSIED	D MICROSCOPICALI	LY	
ANIMAL DISPOSITION SUMMARY			
ANIMALS INITIALLY IN STUDY	50	50	50
NATURAL DEATH	4	6	3
MORIBUND SACRIFICE	14	6	5
SCHEDULED SACRIFICE TERMINAL SACRIFICE		<u>00</u>	10
DOSING ACCIDENT	32	38	42
ACCIDENTALLY KILLED, NDA			
ACCIDENTALLY KILLED, NOS			
ANIMAL MISSING			
ANIMAL MISSEXED			
OTHER CASES			
TUMOR SUMMARY			
TOTAL ANIMALS WITH PRIMARY TUMORS**	50	49	47
TOTAL PRIMARY TUMORS	120	98	87
TOTAL ANIMALS WITH BENIGN TUMORS	49	48	45
TOTAL BENIGN TUMORS	92	78	67
TOTAL ANIMALS WITH MALIGNANT TUMORS	23	14	13
TOTAL MALIGNANT TUMORS	25	17	17
TOTAL ANIMALS WITH SECONDARY TUMORS		2	
TOTAL SECONDARY TUMORS	2	3	
TOTAL ANIMALS WITH TUMORS UNCERTAIN-		^	^
BENIGN OR MALIGNANT TOTAL UNCERTAIN TUMORS	2 3	3 3	3 3
TOTAL ANIMALS WITH TUMORS UNCERTAIN-	=	J	J
PRIMARY OR METASTATIC			
TOTAL UNCERTAIN TUMORS			
* PRIMARY TUMORS: ALL TUMORS EXCEPT SEC			
## SECONDARY TUMORS: METASTATIC TUMORS	SOR THMORS INVAS	IVE INTO AN ADJACE	INTORGAN

C	ONTROL (UNTR)	LOW DOSE	HIGH DOSE
ANIMALS INITIALLY IN STUDY	50	50	50
ANIMALS NECROPSIED	50	50	50
ANIMALS EXAMINED HISTOPATHOLOGICALLY	50	50	50
INTEGUMENTARY SYSTEM			
*SKIN	(50)	(50)	(50)
SQUAMOUS CELL PAPILLOMA	1 (2%)	1 (2%)	
BASAL-CELL CARCINOMA		1 (2%)	
KERATOACANTHOMA	1 (2%)	(50)	(50)
*SUBCUT TISSUE FIBROMA	(50)	(50)	(50) 1 (2%)
RESPIRATORY SYSTEM	······································	······································	
*NOSE	(50)	(50)	(50)
SQUAMOUS CELL CARCINOMA			1 (2%)
#LUNG	(50)	(50)	(50)
ADENOCARCINOMA, NOS, METASTATIC		1 (2%)	,
ALVEOLAR/BRONCHIOLAR ADENOMA		1 (2%)	
ALVEOLAR/BRONCHIOLAR CARCINOMA		1 (2%)	
HEMATOPOIETIC SYSTEM			
*MULTIPLE ORGANS	(50)	(50)	(50)
LEUKEMIA, MONONUCLEAR CELL	4 (8%)	6 (12%)	3 (6%)
#LIVER	(50)	(50)	(50)
LYMPHOCYTIC LEUKEMIA	1 (2%)		
CIRCULATORY SYSTEM NONE			
DIGESTIVE SYSTEM		· · · · · · · · · · · · · · · · · · ·	
#LIVER	(50)	(50)	(50)
NEOPLASTIC NODULE		1 (2%)	2 (4%)
HEPATOCELLULAR CARCINOMA		1 (2%)	1 (2%)
#GASTRIC MUCOSA	(50)	(50)	(50)
ADENOMATOUS POLYP, NOS		1 (2%)	
URINARY SYSTEM			/ - - \
#KIDNEY	(50)	(50)	(50)
MIXED MESENCHYMAL TUMOR, MALIG			2 (4%)
ENDOCRINE SYSTEM	(40)	(50)	(49)
#PITUITARY CARCINOMA, NOS	(49) 1 (2%)	(50)	(43)
ADENOMA, NOS	19 (39%)	18 (36%)	16 (33%)
#ADRENAL	(49)	(50)	(49)
PHEOCHROMOCYTOMA	3 (6%)	7 (14%)	5 (10%)
#THYROID	(49)	(50)	(49)
FOLLICULAR-CELL CARCINOMA	· /		1 (2%)
C-CELL ADENOMA	6 (12%)	4 (8%)	5 (10%)
C-CELL CARCINOMA	1 (2%)	2 (4%)	2 (4%)
#PANCREATIC ISLETS	(49)	(50)	(50)
ISLET-CELL ADENOMA	1 (2%)		(•••/

TABLE A2. SUMMARY OF THE INCIDENCE OF NEOPLASMS IN FEMALE RATS IN THE TWO-YEAR FEED STUDY OF HC BLUE NO. 2

	CONTRO	L (UNTR)	LOWI	DOSE	HIGH	DOSE
REPRODUCTIVE SYSTEM	<u></u>		<u></u>	- <u>.</u>		
*MAMMARY GLAND	(50)		(50)		(50)	
ADENOMA, NOS		(2%)	(00)		(00)	
ADENOCARCINOMA, NOS		(2%)	1	(2%)		
FIBROADENOMA		(40%)		(20%)	4	(8%)
*CLITORAL GLAND	(50)	(40 /0)	(50)	(20%)	(50)	(0,0)
CARCINOMA, NOS	(00)			(2%)	(00)	
ADENOMA, NOS			1	(270)	1	(2%)
KERATOACANTHOMA						(2%)
*VAGINA	(50)		(50)		(50)	(270)
SQUAMOUS CELL PAPILLOMA	(00)		(60)		1 /	(2%)
#UTERUS	(50)		(50)			(270)
LEIOMYOSARCOMA	(50)		(50)		(50)	(2%)
ENDOMETRIAL STROMAL POLYP	10	(26%)	7	(1492)		(2π)
	13	(20%)	1	(14%)		
ENDOMETRIAL STROMAL SARCOMA #UTERUS/ENDOMETRIUM	(50)					(2%)
ADENOMA, NOS	(50)	(2%)	(50)		(50)	
ADENOMA, NOS ADENOCARCINOMA, NOS				(07)		
#OVARY		(2%)		(2%)	(50)	
	(50)	(00)	(50)	(00)	(50)	
GRANULOSA-CELL TUMOR		(2%)	1	(2%)		
GRANULOSA-CELL CARCINOMA		(2%)				
NERVOUS SYSTEM						
#BRAIN	(50)		(50)		(50)	
CARCINOMA, NOS, INVASIVE	1	(2%)				
ASTROCYTOMA			1	(2%)		
*CAUDA EQUINA	(50)		(50)		(50)	
SARCOMA, NOS					1	(2%)
SPECIAL SENSE ORGANS						
*EAR	(50)		(50)		(50)	
NEURILEMOMA	(00)		(00)			(2%)
*ZYMBAL GLAND	(50)		(50)		(50)	(270)
	(50)		(50)	(90)	(50)	
ADENOSQUAMOUS CARCINOMA			1	(2%)		
MUSCULOSKELETAL SYSTEM						
*SKULL	(50)		(50)		(50)	
OSTEOSARCOMA	1	(2%)				
SODY CAVITIES						
*MEDIASTINUM	(50)		(50)		(50)	
ALVEOLAR/BRONCHIOLAR CA, INVASIVE				(2%)	(
	(50)		(50)	-	(50)	
*ABDOMINAL CAVITY			(00)		(00)	
*ABDOMINAL CAVITY ADENOCARCINOMA, NOS, INVASIVE	(00)		1	(2%)		

TABLE A2. SUMMARY OF THE INCIDENCE OF NEOPLASMS IN FEMALE RATS IN THE TWO-YEAR FEED STUDY OF HC BLUE NO. 2 (Continued)

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

CON	FROL (UNTR)	LOW DOSE	HIGH DOSE
ANIMAL DISPOSITION SUMMARY			
ANIMALS INITIALLY IN STUDY	50	50	50
NATURAL DEATH	2	2	4
MORIBUND SACRIFICE	7	8	7
SCHEDULED SACRIFICE			
TERMINAL SACRIFICE	41	40	39
DOSING ACCIDENT			
ACCIDENTALLY KILLED, NDA			
ACCIDENTALLY KILLED, NOS			
ANIMAL MISSING			
ANIMAL MISSEXED			
OTHER CASES			
TOTAL ANIMALS WITH PRIMARY TUMORS** TOTAL PRIMARY TUMORS TOTAL ANIMALS WITH BENIGN TUMORS TOTAL BENIGN TUMORS TOTAL ANIMALS WITH MALIGNANT TUMORS	43 78 38 66 10	36 68 30 49 15	41 65 33 50 11
TOTAL MALIGNANT TUMORS	11	17	13
TOTAL ANIMALS WITH SECONDARY TUMORS##		3	
TOTAL SECONDARY TUMORS	1	3	
TOTAL ANIMALS WITH TUMORS UNCERTAIN-		0	•
BENIGN OR MALIGNANT	1	2	2
TOTAL UNCERTAIN TUMORS	1	2	2
TOTAL ANIMALS WITH TUMORS UNCERTAIN- PRIMARY OR METASTATIC			
TOTAL UNCERTAIN TUMORS			
I U I ALI UNUERIAIN I UMURO			

TABLE A2. SUMMARY OF THE INCIDENCE OF NEOPLASMS IN FEMALE RATS IN THE TWO-YEARFEED STUDY OF HC BLUE NO. 2 (Continued)

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TABLE A3. INDIVIDUAL ANIMAL TUMOR PATHOLOGY OF MALE RATS IN THE TWO-YEAR FEED STUDY OF HC BLUE NO. 2: UNTREATED CONTROL

ANIMAL NUMBER	0	2	1	1	3 5	8 - 1	ġ	8	9	j	1	ż	4	4	_	ii ii	-1	11 	01 1 9	2i	2	2	Ž	2	
STUDY	0	0	0	01	91 31	1	04	01	91 21	91 - 61	0	0	0	01	01	01	0 0 5	1 0 5	0 7 8	0 91 7	01 51	01	0 5	0	
TEGUMENTARY SYSTEM	Γ.																						•		
SKIN Squamous Cell Papilloma Basal-Cell Tumūr Basal-Cell Carcinoma Keratoacanthoma Fibroma	+	•	•	•	•	•	N	•	•	•	•	+	×	•	•	• ×	•	×	•	•	•	•	•	•	
SUBCUTANEOUS TISSUE Squamqus cell carcinoma Sarcoma, nos Fibroma	·	•	•	+	•	+	N	•	+	•	+	+	+	* ×	+	+	•	+	٠	٠	•	•	٠	+	· .
LIPOMA Osteosarcoma, invasive Heurofibrosarcoma													x								X				
ESPIRATORY SYSTEM									-											_				4	
LUNGS AND BRONCHI Alvedlar/bronchiolar Adenoma	·	•	•	•	+	•	•	•	+	÷	+	+	•	+	•	•	+	+	+	•	+	•	•	•	
TRACHEA	+	*	<u>+</u>	+	+	<u> </u>	<u>.</u>	+	+	+	+	+	•	+	+	+	<u>+</u>	+	+	_	+	+	+	+	
EMATOPOIETIC SYSTEM Bone Marrow	•	•	•		÷	÷	÷	•	•			•	+		•	•				÷		•		•	
SPLEEN	•	+	+	÷	•	+	+	+	+	+	+ -	+	+	+	+	+	+	+	+	+	+	+	+	+	-
MESOTHELIOMA, HOS		•	•	•	•	+	+	•	+	•	_ <u>×</u>	•	+	•		•	+	+	+	+	•	•	•	+	
THYMUS	+	+	+	+	+	-	+	•	+	+	-	+	-	÷	÷	+	•	÷	-	÷	•	+	-	+	
IRCULATORY SYSTEM																		_				_			
HEART Igestive system	+	•	+	+	•	+	+	+	+	*	+	+	+	•	+	٠	+	+	+	•	٠	•	+	+	
SALIVARY GLAND	•	+	+	÷	•	•	٠	٠	÷		+	•	٠	•	•	+	+	÷	+	•		+	+	+	_
LIVER Neoplastic Nodule Mesothelioma, Hos	•	+	•	+	٠	+	•	+	+	+	+ X	+	•	+	•	•	•	+	•	+	+	+	+	+	
BILE DUCT	•	٠	+	٠	+	+	+	٠	٠	•	٠		٠	+	+	+	•	•		+	٠	٠	٠	+	
GALLBLADDER & COMMON BILE DUCT	8	N	N	<u>. N</u> .	<u>. N</u> .	<u>.</u> M	<u>N</u>	N	<u>N</u>	<u>N</u> .	<u>N</u>	<u>.</u>	<u>.</u> H	N.		<u>N</u>	<u>N</u>	<u>. H.</u>	N	<u>N</u>	<u>.</u> M	<u>N</u> .	N	N.	-
PANCREAS		÷	÷	÷	÷	••••	÷	÷	÷	÷	÷	*	•	+	•	+	÷	•	+	÷	•		. +	+	
STOMACH	•	+	÷	•	•	+	÷	•	•	÷	÷	÷	•	+	+	÷	*	+	+	•	•	•	+	+	
SMALL INTESTINE Sarcoma, Nos Leiomyosarcoma	•	+	+	+	+	+	+	+	+	+	+	+	٠	+	+	•	٠	+	.+	+	+	+	٠	•	
LARGE INTESTINE	+	+	+	٠	+	+	+	+	+	+	+		*	+	٠	٠	÷	+	+	+	+	+	٠	+	•
RINARY SYSTEM	-																								
KIDNEY LIPOMA	<u>.</u>	+	•	•	÷	<u>.</u> *	+	+	+	+	+	+	+	+	•	+	+	+	<u>+</u>	+	+	+	•	-	•
KIDNEY/PELVIS Transitional+Cell Carcingma	+	•	+	+	•	÷	•	+	+	+	+	•	•	+	*	+	*	+	+	+	<u> </u>	*	+	+	
URINARY BLADDER	+	+	+	٠	٠	+	-	+	+	+	+	+	٠	+	+	+	+	•	٠	+	+	+	٠	•	_
NDOCRIHE SYSTEM Pituitary Adenoma, Nos	•	٠	* ×	٠	٠	* ×	٠	+	•	+	+	٠	+	٠	*	* ×	•	÷	•	٠	* x	•	•	×	• • •
ACIDOPHIL ADENOMA	+	÷	÷	•	÷	+	+	+	÷	÷	+	+	•	+	÷	٠	٠	+	+	+	٠	+	٠	٠	
PHEOCHROMOCYTOMA	-	<u>×</u> .		<u>بة</u>			<u>.</u>	<u> </u>			×.	•			•	+	•	•	+	•	•	+		÷	
C-CELL ADENOMA	<u>├</u>	-	×.						X				_	X	X						-		X		
PARATHYRGID Pangreatic Islets Islet-cell Adenoma Islet-cell Carcinoma	+	•	* *	•	•	•	•	•	+	•	•	•	+	+	+	+	+	•	•	+	•	• •	•	•	•
EFRODUCTIVE SYSTEM Mammary gland	+	•	•	•	•	•	•	+	•	÷	•	•	•	+	•	+	•	•	+	•	+	+	+	•	
FIBRGADENOMA Testis	<u>;</u>	÷	÷	÷	÷		+	÷	:	ţ	÷	÷	÷	÷	:	÷	÷	•	+	<u>+</u>	÷	÷	÷	÷	
INTERSTITIAL-CELL TUMOR Prostate	× +	.×	<u>×</u>	*	* *	×	÷	× +	×	* *	×.	× •	×	× •	× •	×	.X. -	× 	•	*	× •	*	× •	× •	
PREPUTIAL/CLITORAL GLAND Carcinoma.nos	H	н	N	ĸ	н	N	н	H	N	H	H	н	H	H	N	N	н	H	N	H	H	N	N	H	•
ERVOUS SYSTEM Brain Osteosarcoma, invasive	+	+	•	•	٠	٠	•	+	٠	•	٠	+	* ×	٠	+	•	+	•	+	•	+	+	+	+	•
BONE	N		н		~		н					н	н	н	N	н	N			н			N		
OSTEOSARCOMA		"	"	^	"				.4		a	a	X		a			"				"	"	"	•
LL OTHER SYSTEMS Multiple Grans NOS Sarcoma NOS Malig_tmendma, histiocytic type	×	ΞX	N	H	н	H	H	H	H Y	N	H	N	N	N	N	н	н	N				N	N	N	N
LEUKEMIA, MONONUCLEAR CELL Lumbar region	-								Ă.	<u> </u>									X	X	<u>×</u>				

X: UMOR TRCIDENCE 4: VECROPST, VO AUTOLYSIS, NO MICROSCOPIC EXAMINATION 4: ANTAL MISSING 3: ANTAL MISSING 3: VO NECROPSY PERFORMED

TABLE A3. INDIVIDUAL ANIMAL TUMOR PATHOLOGY OF MALE RATS: UNTREATED CONTROL (Continued)

NUMBER	1 g	2	0	21	Ţ	31	3	31 3		1	Ţ	01	٩.	1	1	21			11	2		0	1	
WEEKS CH	+-	-7	Ā	- 21	-4	Ŧ		1-1	1	6	- 7	-41		1	1				6	H		- 8	<u> </u>	TOTAL
STUDY	13	2	ŝ	8 7	0 (5	ŝ	5			3	3	S	5	31	3	ŝ	1			3	8	6	3	TUMORS
SKIN Squamous Cell Papilloma Basal-Cell Tarcinoma Keratoacanthoma Fibroma	•	•	٠	•	•	•	•	• •	• •	٠	* x	•	٠	٠	•	•	• •	•	•	• ×	٠	•	* X	50m 3 1 3 2
SUBCUTANEDUS TISSUE Squamdus Cell Carcingma Sarcoma, Hos Firgama Lipoma Gstedsarcoma, invasive Neurofirgosarcoma	•	•	• x	٠	•	•	•	• •	N	•	•	•	•	•	•	* ;		• •	•	•	+ x	•	•	50m 1 3 1 1
RESPIRATORY SYSTEM	+					_		_	_										_				\neg	
LUNGS AND BRONCHI Alveolar/sronchiolar adenoma Trachea	ŀ	•	•	•	<u>.</u>	•	•	• • 	· •	+	<u>.</u>	•	•	<u>.</u>	<u>.</u>	•				•	•	+	•	58 ₁ 48
HEMATOPOIETIC SYSTEM	+				-						_				-								-	
SONE MARRON	+	+	•	•	•	•	•	•		÷			•	•	<u>•</u>	• •	•	•	•	•		•	•	50
SPLEEN Mesothelioma, Nos	ŀ	•	•	+	•	-	•	_			<u> </u>	•	•		_	• •			•	+	-	-	-	- 50
LYMPH HODES	+	•	<u> </u>	•	÷	÷	• •	<u></u>		<u>.</u>	÷	<u>+</u>	•			<u>• •</u>			<u>.</u>	•	*	<u>.</u>	-	<u></u>
CIRCULATORY SYSTEM	+-			_		_					_								_				-	
HEART DIGESTIVE SYSTEM	+	٠	•	+	•	+	•	• •	•	+	+	•	٠	•	<u>+</u>	• •	•	+	•	•	+	•-	•	50
SALIVARY GLAND	Ŀ	•		٠	+	•	•	• •	•	•	•	•	•	•	•	••	•		•	•		+	•	50
LIVER Neoplastic Hodule Mesothelicma. Nos	Ŀ	•	•	•	•	×	• •	• •	•	٠	•	•	٠	•	•	• •	•	•	•	•	•	•	٠	58
SILE DUCT	+		•	•	<u>+</u>	•	• •	•	+	+	•	+	•	*	+ .	••	•		•	•		•	-+	50
GALLBLADDER & COMMON SILE DUCT Pancreas		<u> </u>	_H	<u>N</u>	<u>.</u> н.	*	* *	<u> </u>	<u>N</u>	*	N			*	M	×			H	_ <u>H</u> _	_ <u>H</u>	_ <u>H</u> _		<u>50 H</u>
ESOPHAGUS	Ŀ	+	+	•	•	-	• •		•	÷	÷	+	•	•	•	• •		•	•	•	•		÷	49
STOMACH		+		٠	٠	٠	•	•		. +	÷	+	•	•	•	• •	•		+	+	٠	٠	•	
SMALL INTESTINE Sarcoma, nos Leiomyosarcoma	Ŀ	•	•	•	•	•	• •	· ·	•	•	•	•	•	×	•	• •	•	•	•	•	•	•	٠	50
LARGE INTESTINE	ŀ	•	•	•	•	• ·	•.•	• •	•	•	•	•	٠	•	•	• •	•	•	•	•	•	٠	•	49
KIDNEY Lipoma	ŀ	٠	٠	•	•	•	• •	• •	٠	٠	٠	•	•	•	•	• •	•	•	٠	٠	•	٠	٠	50
XIDNEY/PELVIS TRANSITIGHAL-CELL CARCINOMA	•	+	+	٠	+	•	• •	• •	+	+	•	•	+	+	•	• •	•	+	+	٠	•	٠	+	50
URINARY BLADDER	•	+	•	•	•	•	• •	• •	•	•	٠	+	•	+	•	• •	+	+	+	٠	•	٠	•	48
HDDCRINE SYSTEM Pituitary Adenoma, Ngs Actiddphil Adenoma	·	•	٠	•	•	•	• •	• •	×	•	÷	٠	•	•	•	• •	×	•	٠	•	٠	٠	٠	50 9
ADRENAL Pheochromocytoma	ŀ	٠	ż	٠	ż	•	• •	•	٠	٠	•	* ×	•	•	• .	:;;	ż	ż	٠	* ×	•	٠	٠	50
THYROID C-CELL ADENOMA	Ŀ	•	•	•	٠	•	• •	•	•	٠	÷	٠	•	•	<u>.</u>	• •	•	•	•	ż	•	•.	•	50 7
PARATHYROID	<u> + -</u>	+	•	•	•				•	•	•	•	•	•		<u>.</u>	<u>.</u>		<u>.</u>	<u>.</u>	<u>.</u>	<u>.</u>	+	48
PANCREATIC ISLETS ISLET-CELL ADENOMA ISLET-CELL CARCINOMA	·	•	•	•	•	•	· ·	· ·	•	•	•	•	•	•	• •	• •	•	•	·	•	·	•	×	50 1 1
MAMMARY GLAND FIBROADENDMA	•	•	٠	+	٠	•	• •	•	×	N	•	٠	•	•	• ;	•	•	•	•	•	•	٠	۰	50×
TESTIS Interstitial-cell tumor	ż	÷	* ×	ż.	* ×	÷ ;	; ;		*	ż	* ×	•	÷.	÷.;	3	ż	ţ	ż	* *	٠	ż	÷	ż	50 45
PROSTATE Preputial/clitdral gland	+ H	+ N	+ H	+ H		+ . N 1			N	+ N	• N			•	_	• •	+	<u>.</u> н	*	+ N	• µ	+	+	49 50#
CARCINOMA.NOS		ž													. '		.4		~					1
SRAIN Brain Osteosarcoma, invasive	•	•	•	٠	•	• •	• •	•	٠	٠	•	•	•	•		•	٠	•	+	-	•	•	+	49 ₁
OSTEOSARCOMA	N	н	н	N	N	N)	• •	N	N	N	×	N	N	н н		. н	N	N	н	N	Ħ	N	ж	50 M
LL OTHER SYSTEMS				_			_															-		
MULTIPLE ORGANS NOS Sarcoma, Nos Malig.lymphoma, histiocytic type Leukenza,mononuclear cell	1	N X	N X	н Х	ж	N)		N X	N	N	N	ж	N	м н >	• •	к и 	×	м	N	N	H X	н Х	N	50×
LUMBAR REGION																			¥					,
ANTMALS NECENDESTED							_			-		-				_		-	<u> </u>				-	

+ ANIMALS NECROPSIED

TABLE A3. INDIVIDUAL ANIMAL TUMOR PATHOLOGY OF MALE RATS IN THE TWO-YEAR FEED STUDY OF HC BLUE NO. 2: LOW DOSE

		- 7.1				A I					<u>.</u>				1 8				- 1 -		- 71	- 11	31	61
AN IMAL NUMBER		ġ	ě	ě	ě.	ŏ	9	ě.	ġ.	1	1	1				ļļ	1		2	2	2	2	2	Ž
WEEKS ON STUDY	1	-	-	-		1	9	-	11	11		91	11			1 0	0		0	1	31	-	1	-
INTEGUMENTARY SYSTEM	4	4	41	6	<u>ă</u> ľ	41	اف	41	41	41	ái.	<u> </u>	<u>il</u>	<u>.</u>	6	ف	4	4	4	أف	<u>i</u> l	41	41	4
SKIN	•	٠	٠	٠	٠	٠	٠	•	٠	٠	٠	٠	•	• •	• •	٠	٠	٠	•	٠	٠	٠	٠	+
ADNEXAL ADENOMA Keratgacanthoma	L							x		_				_				_X	×					_
SUBCUTANEOUS TISSUE Fibroma	•	٠	٠	٠	٠	٠	٠	٠	٠	٠	٠	٠	•	• •	• •	٠	٠	•	٠	٠	٠	٠	٠	•
RESPIRATORY SYSTEM	┝				_	_	_	_				_								_	_			+
LUNGS AND BRONCHI		٠	+	٠	•	•	•	•	٠	٠	٠	٠	•	• •	• •	٠	٠	٠	٠	٠	٠	٠	+	+
CARCINOMA, HOS, METASTATIC	<u> </u>		_																					
TRACHEA C-Cell Carcingma, Invasive	•	•	•	•	•	•	•	•	•	• .	•	•	•			•	•	•	•	•	•	•	•	
HEMATOPOIETIC SYSTEM																	_							٦
SONE MARROW	+	•	+	•	÷	٠	+	•	+	•	+	+	•		• •	+	+	+	+	•	•	+	+	+
SPLEEN Leidmydsarcoma	+	•	•	•	•	•	•	•	•	٠	•	•	•		• •	•	•	•	•	•	•	•	*	+
LYMPH NODES	•	•	- '	•	+		+	÷	٠	÷	•	•	•	_	•		+	•	÷	•	•	•		+
THYMUS	+	٠	٠	٠	-	٠	-	٠	٠	-	-	٠	-	•	• •	-	٠	+.	٠	•	٠	٠	٠	+
CIRCULATORY SYSTEM																								
HEART	+	+	•	•	+	*	٠	+	•	+	•	+	+	• •	• •	•	+	+	•	•	•	+	•	+
DIGESTIVE SYSTEM																								
SALIVARY GLAND	†	<u>.</u>		<u>.</u>		<u>*</u>	+	•	•	•	<u>+</u>	-	•				÷	÷	<u>.</u>	÷	<u>.</u>	÷	<u> </u>	Ť
LIVER .	<u>.</u>	÷	<u>,</u>	<u>,</u>	- <u>-</u>		*	•	<u>.</u>		•	•				÷	Ť		÷	•	÷	•	•	Ť
GALLBLADDER & COMMON SILE DUCT	L.	ž	ž	,	N	- <u>-</u>		÷.		×		ž.				N	N		X	N		N	N	1
PANCREAS	1.	•	•	•	+	•	•	•	•	•	•	•	•			•	•	•	•	•	•	+	+	-
ACINAR-CELL ADENOMA	—				_						_		_	-				-	_		_			+
ESOPHAGUS	╧	+	+	+	•	•	+	•		+	•	•	•		<u></u>	*	+			+	•	•	<u>.</u>	+
STOMACH	+	•	<u>+</u>	+	•	•	•	•	÷	•	•	<u>*</u>	•	<u> </u>			•	•	<u>.</u>	<u>.</u>	<u>+</u>	• •	÷	1
SMALL INTESTINE	1:	÷	<u> </u>	<u>.</u>	<u>.</u>	<u>.</u>	<u>.</u>	<u>.</u>	•	<u>.</u>	•	•		<u>.</u>		<u> </u>	÷	-	-	÷	-	<u> </u>	<u>.</u>	Ť
LARGE INTESTINE Adenomatous polyp, nos	ľ	Ť	•	•	•	•	•	•	•	•	•	•	•			·		•	Ţ	·	•	•	•	
URINARY SYSTEM																								
KIDNEY	+-		<u> </u>	*	*	+	<u>+</u>	+	•	•	•	•	<u>*</u>		• •	•			•	+			•	÷
URINARY BLADDER	Ŀ	<u>.</u>	<u>.</u>	•	÷	•	<u>.</u>	<u> </u>	•	•	•	•					•	<u> </u>	_			•	•	_
PITUITARY		•	•	•	•	•	•	•	•	•	•	•	•				•			•	•	•	•	
ADENOMA, NOS	<u> </u>	-						-		×.								ý.	-					_
ADRENAL Pheochromocytona	Ŀ	÷	•	•	÷.	•	<u>.</u>	*	÷	•	•	•	•		• •	<u> </u>	•	•	•	•	-	+	ż	4
THYROID C-Cell Adenoma C-Cell Carcinoma	+	•	•	•	•	•	•	* X.	•	•	•	×	•	• •	• •	+	•	•	•	•	•	*	•	×
PARATHYROID	-	٠	+	٠	+	+	÷	+	•	+	+	•	+			+	.+	. +	٠	•	÷		+	٠
PANCREATIC ISLETS Islet-Cell Adenoma	·	٠	٠	+	٠	•	•	•	•	٠	٠	٠	• •	•	• •	٠	٠	٠	٠	٠	٠	٠	٠	٠
ISLET-CELL CARCINOMA REPRODUCTIVE SYSTEM								-		_												-		_
MAMMARY GLAND		•	•	•	•	٠	+_	+	•	.+	•	•	•		•	÷	٠	+	•	•	٠	+	•	
TESTIS	÷	•	•	•	:	•	•	:	•	÷	:	•	: :		: :	•	•	•	•	•	•	:	•	÷
INTERSTITIAL-GELL TUMOR	L.	<u> </u>	<u> </u>	<u> </u>	<u>×</u>	<u>x</u> .	<u>.</u>	<u>.</u>	<u>×</u>	<u>.</u>	<u>*</u>		<u>.</u>			<u> </u>	<u> </u>	<u> </u>	<u>.</u>	<u> </u>		÷	÷	Ă
PROSTATE Preputial/Clitoral gland	Ň	N	N	N	N	N	N	N	N	N	N	N	N	_		N	N	N	N	N	Ň	N	N	N
CARCINOMA, NOS																								-
SRAIN		٠	٠	•	•	÷	•	•	٠	٠	÷	٠	•		• •	+	•	٠	٠	٠	•	٠	•	+
SPECIAL SENSE ORGANS	+	_																		_				+
EAR Squamous cell papilloma	×	к	N	٠	н	N	N	н	•	N	N	N	N 1	• •	ки	н	H	M	н	н	N	×	* ×	N
ZYMBAL GLAND Carcinoma, Hôs Squamous cell carcinoma	H	N	N	٠	N	N	N	M	٠	N	N	N	N	• •	4 H	N	×	×	N	N	H	N	٠	М
														_		_				_				_
BONE	н	N	N	N	N	N	N	N	N	N	N	N	y i	• •	4 N	N	N	N	N	N	N	N	н	N
				-									*											_
TUNICA VAGINALIS		•	٠	+	•	•	÷	٠	٠	•	٠	•			• •	•	•	٠	٠	٠	٠	٠	•	+
MESOTHELIOMA, NOS	-			×															_	_				4
MULTIPLE ORGANS NOS	N	N	N	м	ĸ	н	N	N	N	N	N	N		• •		N	N	N	N	N	N	N	N	N
C-CELL CARCINOMA, METASTATIC Sarcoma, NOS Eukemia, Mononuclear Cell												×												
AUSCULOSKELETAL SYSTEM BONE DSTEDSARCOMA BODY CAVITIES TUNICA VADIMALIS MESOTHELIOMA. NOS ALL STHER SYSTEMS MULTIPLE ORGANS NOS C-CELL CARCINOMA, METASTATIC BARCOMA. NOS	•	•	•	•	н + Н	н +	•	•	•	•	+	+ H	×	 	• •	+	•	•	•	•	•	•	•	•
TABLE A3. INDIVIDUAL ANIMAL TUMOR PATHOLOGY OF MALE RATS: LOW DOSE (Continued)

ANIMAL Humber	21	0 21 7	21	2	0 2 0	0 3 11	3	0 3 3	3		0 3 7	0 3 8	3	41 41	3 4 1	0 4 2	0 4 3	4	0 4 5	01 41 6	4	0 4 8	0 4 9	9 5 0	TOTAL
WEEKS ON Study		1	0	0	0	0	2				0	0	0	21	2		8	0	2	-	81	21		!	TUMOR
NYEGUMENTARY SYSTEM			_31	21	.91			91.	<u>.</u>	<u></u>	1 91		-91	21	<u> </u>	<u> </u>	21	21	<u></u>	31	/1		-		
SKIN Adhexal Adenoma Keratdacanthoma	Ŀ	•	•	•	•	•	•	•	•	• N	•	•	•	٠	•	•	•	•	•	H	•	• ×	•	+	50× 2
SUBCUTANEOUS TISSUE Fibroma	+	٠	٠	٠	٠	٠	٠	•	•	N	٠	٠	٠	•	٠	* ×	•	٠	+	H	+	•	٠	+	58 H
ESPIRATORY SYSTEM																	_							T	
LUNGS AND BRONCHI Carcinoma, Hos, Metastatic	Ŀ	٠	•	*	•	+	+	•	• •		•	+	+	•	+	•	÷ x	•	•	+ '	.*	٠	٠	+	50
TRACHEA C-CELL CARCINGMA, INVASIVE	+	٠	٠	* ×	•	•	٠	•	•	•	•	٠	•	٠	-	-	•	-	•	•	•	-	•	•	43,
EMATOPOLETIC SYSTEM	+																	-					_	+	
BONE MARROW	++	+	+	•	<u>+</u>	+	•	•	<u>+</u> ·	•	.	+	+	•	+	•	•	<u>+</u>	+	+	<u>+</u>	•	+	4	50
SPLEEN Leiomyosarcoma	+	•	•	+	+	* *	+	•	+ •	• •	•	+	+	•	•	+	+	+	•	+	*	•	+	+	50
LYMPH NODES	+	+	•	+	+	+	+	+	• •		+	+	+	+	+	+	•	+	•	+	+	÷	•	+	49
THYMUS	• •	-	+	+	•	+	+	• ;		• •	+	+	-	-	•	+	•	+	•	•	•	•	•	+	33
IRCULATORY SYSTEM	+						_																-	+	••
HEART	+	٠	٠	٠	+	٠	٠	•	• •	•	+	+	٠	+	٠	•	•	•	+	+	•	+	•	+	50
IGESTIVE SYSTEM	1				-		_			_		-		_		_		_				-		+	
SALIVARY GLAND	+	÷	<u>+</u>	+	•	+	+	*:	<u>+ </u>			*	•	•	+	+	<u>+</u>	÷	*	•	•	-	•	+	48
LIVER	+	*	•	+	*	•	*	•	<u>• •</u>	•	<u> </u>	+	<u>+</u>	*	*	+	•	÷	*	*	+	<u>ب</u>	<u>.</u>	*	<u> </u>
	-	<u>*</u>	*	•	*	•	<u>*</u>	<u>*</u>	<u>•</u> ••	<u> </u>	<u> </u>	<u>+</u>	*	<u>.</u>	+	<u>.</u>	<u>*</u>	<u>+</u>	+	+	<u>*</u>	*	<u>*</u>	#	58
GALLBLADDER & COMMON BILE DUCT		*	*	*	*	*	<u>+</u>	•	• •		 •	*	*	*	*	•	•	•	+	+	+	•	•	1	<u>50</u>
PANCREAS Acimar-Cell Adengma	!	<u> </u>				<u> </u>							-	·	<u> </u>	<u> </u>		•	•	ž.		•	<u> </u>	4	
ESOPHAGUS	+	+	٠	•	+	•	+	•	• •	•	•	•	٠	+	<u>.</u>	÷	•	÷	*	*	•	+	*	+	. 49
STOMACH	+-	+	<u>.</u>	+	٠	+ .	+	• •	• •	•	+	*	+	*	+	*	•	<u>+</u>	•	+	+	*	*	+	
SMALL INTESTINE	+-	+	٠	+	•	+	+	•	• •	•	•	+	•	. e	+	+	•	<u>+</u>	<u>+</u>	•	٠.	*	<u>*</u>	4	
LARGE INTESTINE Adenomatous Polyp, Nos	•	•	•	+	+	•	•	•	• •	• •	×	•	•	•	+	+	•	•	+	+	+	•	•	1	54 ,
RINARY SYSTEM																									
KIDHEY	+	<u>.</u>	*	<u>.</u>	<u> </u>	<u>*</u>	<u>*</u>	<u>*</u>	• • • •	<u> </u>	<u>+</u>	<u>+</u>	÷	<u>*</u>	<u>*</u>	<u>*</u>	•			<u>*</u>	<u>*</u>	<u>.</u>	<u>*</u>	╧	<u>58</u>
URIHARY BLADDER NDOCRINE SYSTEM	+•	+	•	+	÷	•	*	+		_			·			<u> </u>		-		-	·		<u> </u>	+	
PITUITARY Adenoma, Nos	L.	ż	•	٠	•	•	•	•	• ;	ż	٠	•	÷.	•	•	+	•	•	•	÷.	•	•	ż	•	<u> </u>
ADRENAL Pheochromocytoma	L.	•	•	•	•	÷	•	•	• •	•	•	•	÷	+	+	•	•	•	•	+	÷.	•	+ '	•	58,
THYRDID C-Cell Adendma	•	+	+	•	•	•	•	•	• •	•	+	•	٠	•	•	•	•	+	•	•	•	•	٠	•	56 -
C-CELL CARCINOMA Paratnyrgid '	1.			•		•			• •		•	+	•	+		+	÷	•	+	+.	*	•	+	•	67
PANCREATIC ISLETS ISLET-CELL ADENOMA ISLET-CELL CARCINOMA	•	•	٠	+ x	•	* ×	•	•	• •		•	•	+	+	•	•	•	•	•	+	٠	•	٠	•	58
EPRODUCTIVE SYSTEM														_		_				_				+	
MAMMARY GLAND	L .	•	•	٠	•	•		•	• •	•	+_	+	•	•	•	+	•	•	•	•	٠	÷	٠	•	
TESTIS	•	+	•	•	•	•	٠	<u>.</u>	÷	: :	÷	÷	:	<u>.</u>	÷	<u>.</u>	÷	t	÷	t	÷	t	:	:	58
INTERSTITIAL-CELL TUMOR	<u>-×</u>	<u>.</u>	- <u>×</u> -	<u> </u>	<u> </u>	<u>.</u>		×	<u>.</u>			•	•	÷	*	* *	*	⊷ +	•	<u>مە</u>	<u>.</u>	<u>مه</u>	<u>.</u>	1	49
PROSTATE Preputial/clitoral gland Carcingma.nds	H	N	N	N	N	N	N	<u>т. </u>	N 1		N	N	N		N				N	N	N	N	N	N	50N 2
ERVOUS SYSTEM																_		_			-			Ť	
SRAIN PECIAL SENSE ORGANS	•	٠	٠	•	•	٠	+	•	•	· •	*	•	•	•	•	•	•	•	•	•	•	•	•	+	50
EAR Squamous cell papilloma	N	N	N	N	N	H	H	н 1	H H	N	N	H	H	N	н	N	•	N	H	N	N	٠	N,	N	50H
ZYMBAL GLAND CARCINOMA.NOS SQUANOUS CELL CARCINOMA	N	N	N	N	N	N	H	N I	N)	N	N	N	N	N	N	N	÷.	N	N	N		+ x	N	N	58M 1 7
USCULOSKELETAL SYSTEM	+			_				_		_		-		_										+	
BONE DISTEDSARCOMA	н	H	N	N	H	N	N	н н		N	N	N	N	N	N	H	N	N	N+ -*	ĸ	H	N	N	N	50% 1
ODY CAVITIES	+												_	_		-		-			_		_	+	
TUNICA VAGINALIS Mesothelioma, Nos	•	+	•	•	٠	•	×	+	• •	•	•	•	٠	•	•		ž	•	•	•	•	•	•	•	58× 3
LL OTH er systems Multiple organs nos 2-cell carcinoma, metastatic	N	N	N	N X	N	N	N	N 1	N 1	IN	N	N	N	N	N	N	•	н	N	N	N	N	N	N	50×

ANIMALS NECROPSIED

.

TABLE A3. INDIVIDUAL ANIMAL TUMOR PATHOLOGY OF MALE RATS IN THE TWO-YEARFEED STUDY OF HC BLUE NO. 2: HIGH DOSE

ANIMAL NUMBER	0	01	0	0	01	01	01	01	0	01	1	11			0	0	0		21	2	21	21	21
WEEKS ON STUDY	1	1					1		-		1									1	1	?	
INTEQUMENTARY SYSTEM	لفب	41	4	61	41	أ ف	41	41	أغ	41	<u>اه</u>	١	1 1		4		Ă.	ž	اف_	41.	41	<u>i i</u>	41.4
SKIN Squamous Cell Papilloma Squamous Cell Carcinoma Adnexal Adenoma Keratoacanthoma	•	٠	٠	•	•	•	٠	٠	•	٠	•	×	• •	• •	•	٠	•	•	٠	• ×		+ ×	• •
SUBCUTANEOUS TISSUE Fibroma Fibrosarcoma	ŀ	+ x	٠	٠	•	•	•	٠	•	٠	•	•	• •	• •	•	٠	٠	٠	•	•	+	•	•
RESPIRATORY SYSTEM	+-																						
LUNGS AND BRONCHI Alveolar-bronchiolar Adenoma Alveolar-bronchiolar Carcinoma Trachea		•	•	•	•	•	•	• 	* •	•	• 	•	• •			• 	•	• •	• 	• •	• •	•	
HEMATOPOIETIC SYSTEM	<u>+-</u>						-			-		-				-	-						
BONE MARROW	L +	.+	•	•	+	•	•	٠	•	•	•	÷	• •		•	•	+	•	÷	+	•	•	•
SPLEEN	+	÷	+	•	•	+	•	٠	•	•	•	٠	• •		•		. +	+	•	+	•	•	•
LYMPH HODES	+	+	•	٠	٠	•	·	•	٠	٠	<u>+</u>	٠.,	• •		•	•	•	•	<u>.</u>	•	<u>+</u>	•	•
THYMUS	-	-	٠	•	٠	•	٠	٠	•	٠	+	٠	• •	• •	• •	-	٠	٠	٠	٠	٠	•	-
CIRCULATORY SYSTEM	+																						
HEART	+	+	•	•	•	•	•	*	•	•	•	•	• •	• •	• •	•	•	•	+	*	+	•	•
DIGESTIVE SYSTEM																							
SALIVARY GLAND	+-	÷	<u>+</u>	÷	•	<u>*</u>	÷	<u>.</u>	<u>.</u>	<u>*</u>	<u>*</u>	<u>+</u>	<u>•</u>	•		<u>.</u>	<u>*</u> -	<u>.</u>	. <u>+</u>	<u>*</u>	•	• •	<u>.</u>
LIVER Neoplastic Module Leukemia.Mononuclear Cell	Ŀ	·	•	•	•	÷ ×	×	•	•	•	•	•			•		• 	•	×	÷	•	•	-
BILE DUCT	+	•	•	•	•	<u>+</u>	•	+	•	.+	•	<u>+</u>	+ +	<u></u>	•		•	_ ± .	+	•	•	•	<u>.</u>
GALLBLADDER & COMMON BILE DUCT			H	H	N	N	<u>N</u>	N	N	8	<u>N.</u>	N	<u>N_</u>	LN	8	<u> </u>	<u>N</u>	N		<u>N</u>	N	<u>N</u>	<u>_</u>
PANCREAS Esophagus .	÷	÷	<u>.</u>	÷	÷	<u>.</u>	<u>.</u>	÷	<u>.</u>	<u>.</u>	<u>.</u>	<u>.</u>	<u></u>			<u>.</u>	-		<u> </u>	<u>.</u>			<u> </u>
STOMACH	+	•	÷	÷	•	÷	÷	+	•	÷	<u>*</u>	+	• •			÷	+	÷	÷	<u>.</u>	•	+	
SMALL INTESTINE	1.		+	+	+	+	÷	•	•	+	•	+		. ,	•	+	+	+	÷	÷	+	+	•
LARGE INTESTINE	1.	٠	+	٠	٠	÷	•	٠	•	•	•	÷	+ +		•	•	+	•	+	•	+	•	•
URINARY SYSTEM	+					_						_											
KIDHEY .	1	•	+	•	•	•	٠	•	•	+	+	•	+		•	•	•	٠		•	•	•	•
URINARY SLADDER	•	٠	٠	٠	٠	•	•	٠	٠	٠	٠	•	• •	• •	•	٠	٠	•	•	٠	+	•	•
ENDOCRINE SYSTEM	1																						
PITUITARY Adenoma, Hos	Ļ	ż	•	•	÷.	<u>.</u>	•	•	÷	•	ż	*	• •		•	•	•	•	+	÷.	•	<u>.</u>	<u>.</u>
ADRENAL Pheochromocytoma	+	٠	٠	٠	٠	٠	٠	٠	٠	٠	٠	•	+ +	•	+	٠	÷	٠	٠	•	•	• ;	;
THYROID Follicular-cell carcinoma C-cell carcinoma C-cell carcinoma	·	*	٠	+	٠	+	+	+	•	٠	•	•	• •		•	٠	•	•	+ x	÷	•	•	+ •
	+	<u>×</u>	<u> </u>		<u>×</u>											-			-		<u>×</u>	• •	• •
PARATHYROID Pancreatic islets	†	<u>.</u>	<u>.</u>	<u>.</u>	<u> </u>	÷	÷	÷	<u>.</u>	÷	<u>.</u>	•	· ·			Ť	÷	<u>.</u>	÷	÷			_
ISLET-CELL ADENOMA		•	•	•	•	•	•	•	•	•	• .			x		,							
REPRODUCTIVE SYSTEM	T																						·
MAMMARY GLAHD Fibroadehoma	Ŀ	ż	•	•	•	•	•	•	•	•	• .	+	• •	•	•	<u> </u>	<u>.</u>	•	+	•	•	•	• · ·
TESTIS Interstitial-cell tumor	:	٠	÷	÷	٠	•	÷	÷	٠	÷	•	÷ ;	••	•	÷	÷	÷	٠	;	÷	÷ .	• •	• ;
PROSTATE	1.	+	+	+	+	•	•	•	+	÷	÷	•	• •		- ÷	- <u>-</u>	•	÷	•	÷	• •	• •	
NERVOUS SYSTEM	+	_	-	-				-		-			-										
BRAIH	+	٠	٠	٠	٠	٠	٠	٠	٠	+	÷	٠	• •	•	+	٠	+	•	•	٠	+	•	•
SPECIAL SENSE ORGANS				_	_						_											-	
EYE APPENDAGES Heurilemoma	H	N	к	N	H	N X		н	N				н н			N	N						• •
ZYMBAL GLAND Agehosquamous carcingma	+	N	N	N	٠	٠	N	N	N	•	N	N	+ N	N	N	٠	٠	N .	٠	٠	•	+ }	•
SODY CAVITIES	+		_			_																	
PERITOHEUM Sarcoma, NOS Rhabdomyosarcoma	N	N	N	H	н	н	*	H	н	N	H	H	N N		H	H	N	H	N	H	H I	N)	N 1
TUNICA VAGINALIS Mesothelioma, nos	•	٠	•	٠	٠	•	•	٠	٠	•	÷	•	•••	•	+	٠	٠	+	•	•	•	•	•
ALL OTHER SYSTEMS Multiple organs nos Leuxemia.mononuclear cell	N	N	N	N	ĸ	N	N	н	N	N	н	н	х ч		4	N	۲	н	н	N	н	н ,	
LEUXEMIA.MONONUCLEAR CELL		_			<u>×</u> .				X	_													_

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TABLE A3. INDIVIDUAL ANIMAL TUMOR PATHOLOGY OF MALE RATS: HIGH DOSE (Continued)

ANIMAL Number Weeks on	2	2	2	21	31	3	3	3		3 6	3 7	31	31			2			5		1	4		5	TOTAL
STUDY		6 8	0 4	Ż	4	9			4	0	0	2	8	0		\$1	2	4 4	0	-	빏				TUMOR
STIN Squamdus Cell Papilloma Squamdus Cell Carcinoma	•	*	٠	٠	٠	٠	•	н	•	٠	٠	٠	٠	٠	٠	٠	٠	•	٠	٠	٠	٠	٠	•	49H 1 1
ADNEXAL ADENOMA Keratuacanthoma Subcutanegus tissue	+-		•	•	•	•	×	• •	+	÷	•	•	•	•	•	÷	•	•		+	•	•	÷	+	49¥
FIBROMA FIBROSARCOMA Espiratory system						<u> </u>													×			_			
LUNGS AND BRONCHI Alveolar/Bronchidlar Adenoma Alveolar/Bronchidlar Carcinoma	•	•	٠	+	•	•	•	• •	•	٠	+ 	٠	٠	٠	•	•	•	•	•	•	+	•	+	•	49 1
TRACHEA	•	A	+	٠	•	٠	• •	• •	•	٠	٠	•	•	٠	•	٠	•	•	•	+	+	•	•	•	• 47
SEMATOPOIETIC SYSTEM																									69
SPLEEN		<u>_</u>	÷	<u>.</u>	- <u>-</u>	÷				- <u>-</u> -	÷	<u>.</u>	÷.	÷	•	<u>.</u>	÷	•	•	+	•	+	•		
LYMPH NODES	1.		+	•	+	+	• •			+	•	+	+	+	•		•	•	+	+	•	•	•		49
THYMUS	•	A	-	+	-	-	• •	• •	•	+	+	-	+	•	+	+	+	+	+	•	-	٠	+	+	33
CIRCULATORY SYSTEM	+															-			_	-				-+-	
HEART	+	A	٠	٠	+	+	• •	• •	+	' +	٠.	٠	•	•	٠	٠	•	•	٠	٠	٠	٠	٠	+	49
DIGESTIVE SYSTEM																		_				_	÷	+	
SALIVARY GLAHD	L		+	•	•	•	+ .	•	•		_*	٠	+	+	+	+	•	•	•	<u>+</u>	•	•	٠	•	69
LIVER Neoplastic nodule Leukemia,mohonuclear cell	•	A	٠	•	+	•	•	• •	•	•	•	•	+	•	•	•	•	•	•	•	•	•	٠	•	49 2
BILE DUCT	<u>_</u>	۸.	+	•	•	+	•	•	•	+	<u>.</u>	+	+	•	•	•	+	<u>.</u>	•	+	+	+	+	•	49
GALLBLADDER & COMMON BILE DUCT			N	N	N	N	N	<u> </u>	N	N		N	N	н	N	н	N	١	N.,	N	N	Н.,	H	H.	698
PANCREAS	+•		*	•	+	+	<u></u>	<u> </u>	+	+	•	•	+	+	٠.	+	•	•	•	•	•	•	•	+	49
ESOPHAGUS	+±	A.	+	•	+	+	•	•	•	<u>+</u>	•	٠.	+	٠	+	•	<u>+</u>	÷	÷	•	<u>+</u>	•	<u>+</u>	*	
STOMACH	++		•	•	+		<u>+</u>	<u>+</u>	•	+	+	+	<u>.</u>	•	<u>+</u>	•	÷	<u>*</u>	•	<u>+</u>	+	٠	•	*	69
SMALL INTESTINE	+		•	*	*	+	+	<u> </u>	•	<u> </u>	<u> </u>	*	+	*	•	*	*	<u>*</u>	<u>*</u>	*	•	•	•	4	69
LARGE INTESTINE	+	٨	+	+	+	•	•	• •	•	+	•	+	+	•	+	+	+	•	+	•	+	•	+	+	49
URINARY SYSTEM								•																	
KIDNEY	+	Å	•	+	•	•	<u>*</u>		+	*	<u></u>	+	+.	*	<u>*</u>	*	+	•	*	+	•	+	*	*	49
URINARY BLADDER -	+	A	*	+	+	+	+	• •	•	+	+	+	+	+	+	+	*	+	+	+	•	.	+	*	49
ENDOCRINE SYSTEM													. •												
PITUITARY Adenoma, nos	Ļ	A	+	_	•	·	•		<u> </u>	<u> </u>	<u>.</u>	<u>+</u>	<u> </u>	<u>.</u>	ż	<u>.</u>	•	•	•	•	•	•	+	-	48
ADRENAL Pheochromocytoma	i		*	•	•	•	•	<u>.</u>	•	٠	•	•	٠	+	•	•	•	•	•	÷ ×	+	•	•	ż	49 ,
THYROID Follicular-cell carcinoma C-cell Adenoma	•	*	٠	+	٠	٠	•	• •	+	٠	÷ x	• x	٠	٠	٠	٠		• X	٠	•	٠	٠	+ x	•	49 1 5
C-CELL ADENOMA C-CELL CARCINOMA	+															×.	<u>×</u>			-				+	5
PARATHYROID	++	<u> </u>	<u>.</u>	<u> </u>	*	*	• •	<u> </u>	+	<u>+</u>	*	*	<u>.</u>	+	*	•	<u>*</u>	÷	<u>*</u>	<u>*</u>	<u>*</u>	*	÷	*	- 68
PANCREATIC ISLETS ISLET-CELL ADEMOMA Reproductive system	<u> </u>	<u> </u>	+	•	•	• 	•	• •	•	•	•	•	•	•	+	•	•	•	•	•	<u>.</u>	• 	•	1	49 1
MAMMARY GLAND FIBROADENOMA	•	٨	٠	•	+	+	•	• •	+	٠	•	٠	+	•	+	+	٠	•	•	•	•	٠	•	•	498
TESTIS	•	A	÷	•	•	t	• •	•	+	÷	+	t	+	•	•	•	+	•	•	•	•	+	•	•	49
INTERSTITIAL-CELL TUMOR	<u> </u>		X	<u> </u>	X	X	<u>x</u>	<u> </u>	X	Ă.		<u>×</u>	_	X	<u>×</u>	×	<u>×</u>	š	<u>×</u>	<u>× -</u>	<u>×</u>	×	×	×I-	32
PROSTATE	+	A	*	÷	+	<u>.</u>	• •	• •	•	•	+	•	•	•	+	+	•	•	•	•	*	+	•	1	49
HERVOUS SYSTEM BRAIN	+	A	٠	+	•	٠	• •	• •	+	٠	٠	٠	٠	•	٠	٠	٠	•	٠	•	٠	•	٠	•	49
SPECIAL SENSE ORGANS				-,														-			_				
EYE APPENDAGES NEURILEMOMA	-						N N				н					-	н :				N			N	498
ZYMBAL GLAND Adenosquamous carcinoma	+	A	н	×	•	*	н н 	N 1	N	N	N	N	1	N	M	11	4		•	N	N	•		N I	491
BODY CAVITIES Peritoneum Sarcoma, vos Shabodydosarcoma	N	A	н	N Y	н	N	ни	r N	N	X	н	N	N	N	N	ĸ	N 1	•	N	N	N	N	N	N	49 #
TUNICA VAGINALIS Mesothelioma, Nos	•	A	+	+	÷	•	• •	+	÷	٠	÷	٠	٠		* ×	+	•	•	٠	•	٠	+	•	•	49× 1
ALL OTHER SYSTEMS													_						_	<u> </u>	~~			1	
MULTIPLE ORGANS NOS	N	4	Я	н	۲	N	N 8	I N	н	N	×	н	N Y	N	N	N	N	•	H	N	N	N	N	нį	49N

. ANIMALS NECROPSIED

TABLE A4. INDIVIDUAL ANIMAL TUMOR PATHOLOGY OF FEMALE RATS IN THE TWO-YEAR FEED STUDY OF HC BLUE NO. 2: UNTREATED CONTROL

ANIMAL Number	0	01	01	0	0	0	0 0 7	0 0 0 0 8 9		1		3	1	1	1	1	11	11	2 2	22	2	2	Ĺ
WEEKS ON Study	0 7	0	0	10		1	0	0 0	0	0	0	-	1	0	1	2	i	2	7 0	0	è	- 0	
INTEGUMENTARY SYSTEM	+21			21	21		<u>.</u>	21_2	4		<u> </u>	21		-11-	-11	21	21		<u> </u>		بدينا		
SKIN Squamous cell papillona Xeratgacanthoma	•	٠	٠	•	•	•	•	• •	•	•	*	+	٠	٠	•	•	•	•	• •	•	•	+	
RESPIRATORY SYSTEM																							
LUNGS AND BRONCHI	++	+	•	•	+	+	• •	• •	+	<u>+</u>	•	+	+		•	<u>.</u>	<u>+</u>	<u>.</u>	• •	-	+	•	
TRACHEA	+	+	+	•	+	•	• •	• •	•	+	+	+	+	+	•	•	+	•	- +		+	-	
HEMATOPOIETIC SYSTEM																							
BONE MARROW	++	•	•	•	٠	+	* ·	* *	+	*	<u> </u>	+	. <u>*</u>		+	•	•	•	• •		+	٠	_
SPLEEN	- <u>+</u> -	+	+	•	+	•	•	• •	•	+	٠	+	+	+	•	+	•	•	• •	+	+	•	-
LYMPH HODES	++	•	*	•	+	<u>+</u>	<u></u>	<u>.</u>	•	*	•	.+	<u>.</u>	٠	*	•	•	•	• •	•	+	+	-
THYNUS	•	٠	٠	•	•	•	• •	• •	•	+	•	+	•	+	•	•	•	•	- +	•	+	٠	
SIRCULATORY SYSTEM													_										-
HEART	+	+	•	•	•	•	• •	• •	•	+	+	+	•.	•	•	+	•	•	+ +	+	+	+	
DIGESTIVE SYSTEM																							
SALIVARY GLAND	+	•	÷	÷	+	•		• •		. •	+	+	*	•	•	*	•	• •	<u>+ +</u>	*	.+	•	-
LIVER Lymphogytic Leukemia	Ŀ	•	*	+	+	•	• •	• •	•	+	•	.*	<u>.</u>	*	•	•	•	•	* *	+	+	٠	
SILE DUCT	+	+	+	•	•	•	• •	• •	÷	٠	+	+	<u>.</u>	+	•	•	+	t	•	٠	+	•	Ĵ
GALLBLADDER & COMMON BILE DUCT		М	N	N	н	N		<u>e n</u>	н	N	. N	H	н	N	N	M _ 3	N I	4 7	L N	N	N	N	
PANCREAS	L	+	÷	+	٠.	•	• •	• •			+	٠	•	+	•	•	•		•		+	•	
ESOPHAGUS		•	+	•	4	•	• . •	• •	•			+	•	•	•	•	• •		• •	+	•		
STOMACH	1.	•	•	•	•	•	÷ •	• •	+	÷	+	+	•	•.	•	.	•	•	• •	+		٠	
SMALL INTESTINE	•	+	+	•	•	•	• •	• •	•	+		+	•	+	٠	•	•		•		+	•	
LARGE INTESTINE	+	+	+	•	+	•	• •	• •	•	+	+	+	•	•	•	•	• •	• •	• •	+	+	+	
IRINARY SYSTEM				_							_		-				_						-
KIDNEY	_ <u>+</u> _		+	+	+	•	• •	• •	•	•		÷	<u>+</u>	•	+	• ·	•	<u> </u>	•		٠.	٠	
URINARY BLADDER	+	٠	•	•	•	•	• •	• •	•	٠	+	٠	•	+	•	•	•	• •	• •	+	٠	+	
ENDOCRINE SYSTEM		_															·						-
PITUITARY Carcinoma, NGS Adenoma, NGS	ŀ	•	÷ x	•	+ x	• ×	• • ×	- •	•	, x	•	•	• ×	•	+	•	• ×	• •	• •	• 	•	+ ×	
ADRENAL Phedchromocytoma	L.	٠	ż.	•	٠	•	•	• •	-	•	٠	+	•	•	•	•	•	• •	• •	•	•	+	_
THYROID C-Cell Adenoma C-Cell Carcinoma	+	•	•	•		×	• •	×		•	•	•	•	•	•	•	•	• •	• •	×	•	+	
PARATHYROID	+	•	-	•		•	•	• •	+		+	+	+	+	*	÷ .				.	•	•	
PANCREATIC ISLETS Islet-Cell Adenoma	•	٠	•	•	•		* •	• •	•	+	٠	٠	٠	• ·	•	•	•	• •	•	٠	•	•	
REPRODUCTIVE SYSTEM																							
MAMMARY GLAND Adenoma, nos Adenocarcinoma, nos fibroadenoma	•	+ x	•	•	•	• •	• •	• • •	*	+ x	+ x	* *	٠	+ x	•	• ·	* ·	• •	• •	* x	•	* *	:
UTERUS	•	•	•	÷	•	• •	• •	• •	+	+	+	+	÷	+	•	•	• •		•	+	+	+	-
ADENOMA, NOS Adenocarcinoma, Nos Endometrial stromal poltp		x	×		<u>.</u>						×	x				,	<u> </u>				x	·	
QVARY Granuldsa-Cell Tumor Granuldsa-Cell Carcinoma. (Ervous System	•	•	•	•	•	•	• •	• •	•	•	•	•	•	٠	•	• •	• •		•	•	×	•	
BRAIN Carcinoma, Nos, invasive	•	٠	٠	٠	٠	•	• •	• •	٠	٠	٠	•	٠	٠	•	•	• •	• •	•	٠	٠	٠	
TUSCULOSKELETAL SYSTEM				-	-								-										-
SONE OSTEOSARCOMA	я	N	N	N	N	• •	• •	н н 	N	N	N	N	H	N	N :	H 1	• •	4 1	N	H	н	N	,
ALL OTHER SYSTEMS																							
MULTIPLE ORGANS NOS Leukemia.mongnuclear cell	1 11	N	N	N	N	N 1	N N	(N	N	N	N	N	N	N	N :	н :	N P	6 1	I N	N	N	N	

* : : X : S :

IISSUE EXAMINED MICROSCOPICALLY REQUIRED TISSUE NOT EXAMINED MICROSCOPICALLY TUMOR INCIDENCE ANIMAL MISSING ANIMAL MISSING 3: NO NECROPSY PERFORMED

TABLE A4. INDIVIDUAL ANIMAL TUMOR PATHOLOGY OF FEMALE RATS: UNTREATED CONTROL (Continued)

ANIMAL NUMBER	2	2	21	21	31	31	31	3	31	3	3	3	31	3	•	-	0 4 2	2	4	41	1	1	4	61	5	TOTAL
WEEKS ON STUDY	i	-	j.	1	8	0	1	1	1	0	1	ė	0	01	8	0	1	1	0	-	0		8	1		TISSUES
INTEGUMENTARY SYSTEM		2	-11-	31	21	31		51.	51	5	51	31	-11-	31	31	51	2	<u>. 9 (</u>	51	<u>, 15</u>	51	51	31	51	-1	
SKIN Squamdus cell papilloma Keratdaganthoma	•	•	٠	•	•	•	* x	N	•	٠	•	٠	٠	•	•	•	•	•	•	•	•	٠	٠	٠	•	50× 1
RESPIRATORY SYSTEM				_											_			_		_						
LUNGS AND BRONCHI	++	<u>*</u>	*	÷	*	•	<u>.</u>	•	•	÷	•	+.	<u>+</u>		÷	•	<u>*</u>	<u>*</u>	•	•	÷.	•	<u>+</u>	÷	+	50
TRACHEA HEMATOPOIETIC SYSTEM	· ·	<u> </u>	•	-	-	•	<u>.</u>	•	•	÷	•	<u> </u>	÷	<u> </u>	<u> </u>	<u>.</u>	•	·	-	<u>.</u>	<u> </u>	<u> </u>	•	<u>.</u>	-	45
BONE MARROW							•				•	•	•		•.	٠	•	•								50
SPLEEN	+	+	+	+	•		•	•	+	•	+	+	•	•	•	+	+		•	+	÷	+	÷	+	•	50
LYMPH NODES	Ŀ	+	•	÷	٠	•	٠	÷	٠	•	٠	•	+	•	•	٠	•	•	+.	÷		+	*	+		50
THYMUS	-	٠	+	+	+	•	•	•	-	+	٠	٠	•	٠	•	٠	•	•	-	•	+	+	+	-	+	43
CIRCULATORY SYSTEM	+	_		-													_				-				÷	
HEART	•	٠	٠	٠	٠	٠	٠	٠	٠	٠	٠	٠	٠	٠	٠	٠	٠	٠	٠	٠	٠	٠	٠	٠	+	50
DIGESTIVE SYSTEM				_		_	-									_	-	_								
SALIVARY GLAND	+-	+	•	+	٠	٠	+	٠	÷	+	<u>+</u>	٠	+	•	•	•	+	<u>*</u>	+	•	+	+	+	•	÷	50
LIVER Lymphocytic Leukemia	+	+	+	+	+	•	•	•	*	•	+	+	+	•	•	•	•	•	•	•	•	+	•	•	+	50
SILE DUCT		+	÷		٠	٠	•	•	+	•	•	•	÷	•	•	+	•	٠	٠	+ .	•	•	•	•		50
GALLBLADDER & COMMON BILE DUCT	н	N.	н	N	N	N	н.	N	N	N.	N	N	н	N	н.	H	N	Ν	N	N	N	Ы	N	8	н	50×
PANCREAS	÷	+	•	•	<u>+</u>	•	•	•	•	+	•	•	•	٠	•	•	٠.	<u>+</u>	٠	+	+	+	*	+	+	49
ESOPHAGUS	<u> </u>	+	•	•	٠	•	•	•	.	•	•	•	•	•	•	•	٠	•	<u>+</u>	٠	٠	+	٠	٠	+	
STOMACH	+·	•	•	٠	•	•	•	•	•	+	٠	•	•	•	•	*	•	•	•	+	÷	+	+_	٠	+	50
SMALL INTESTINE	<u>+</u>	٠	•	•	٠	•	•	+	•	•	٠	+	+	+	•	•	•	•	•	+	*	+	•	٠	4	50
LARGE INTESTINE	+	+	•	+	+	•	•	•	•	+	•	+	•	•	•	•	•	•	•	•		•	+	•	+	48
URINARY SYSTEM																					_				Т	
KIDNEY	+	•	+.	+	+	+	+	<u>+</u>	<u>+</u>	<u>+</u>	*	+			_	•	•		*	*	÷	<u>+</u>	+	*	+	50
URINARY BLADDER	·	+	+	<u>+</u>	<u>.</u>	<u>.</u>	<u>.</u>	•	*	+	÷	+	•	<u>+</u>	÷	<u>+</u>	•	<u>+</u>	+	+	*	+	*	<u>+</u>	+	50
PITUITARY	1.	•	•											•									•		+	49
CARCINOMA, NOS Adenoma, Nos		Ţ.	•	ž	•	•	Ţ	•	•	•	•	•	•	Ţ	¥	•	•	•	Ţ	•	•	Ţ	ž	Ţ	Ţ	1
ADRENAL		+	•	•	•	•	•	•	÷	+	÷	•	•	•	•	÷	•	•	+	•	÷	+	÷	•	-	49
PHEOCHROMOCYTOMA	+									<u>×</u>		_									X				+	
THYROID C-CELL ADENOMA	•	*	٠	•	•	•	*	٠	•	•	•	•	*	•	•	•	•	•	•	•	•	•	•	•	*	49
C-CELL CARCINOMA Paratnyrgid									-																	43
PANCREATIC ISLETS	+	÷	÷	<u> </u>	÷	÷	<u> </u>	<u>.</u>		÷	÷	÷	<u>.</u>		-	÷	÷	 -	÷	÷	÷	•	÷	÷	Ť	49
ISLET-CELL ADENOMA			-				•			•	·	·						•			•					1
REPRODUCTIVE SYSTEM																										
ADENOMA, NOS	•	٠	٠	٠	•	٠	+	N	٠	•	+	+	٠	* x	•	•	•	+	•	+	•	•	•	•	•	50 .
ADENOMA, NGS Adengcarcinoma. Ngs Fibroadenoma	Lx	X					x							x	X				x		x	x				20
UTERUS	+	÷	٠	+	•	•	•	+	•	+	•	•	•	•	•	•	٠	•	+	•	•	•	•	•	+	50
ADENOMA, HOS ADENOCARCINGMA, HOS									¥			x	¥													1
ENODMETRIAL STROMAL POLYP Ovary	+	•					-	<u> </u>	<u> </u>	<u> </u>	<u> </u>		_			<u>.</u>	<u>م</u> ـــــ					÷			*	50
GRANULOSA-CELL TUMOR TRANULOSA-CELL CARCINOMA			<u>x</u>							-							_					-			-	
BRAIN Carcinoma, Nos, invasive	+	٠	•	•	•	•	•	•	•	+	•	٠	+	+	•	•	•	•	•	•	+	+	×	•	·	⁵⁰ ,
MUSCULOSKELETAL SYSTEM																										
BONE JSTEDSARCOMA	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	×	N	N	N	N	N	N	"	50 M
ALL OTHER SYSTEMS	-										-						_								1	
MULTIPLE ORGANS HOS	N	NX	۲	N	NX	N	N	N	Ħ	N	N	N	N	N	N	м	N	N	N	N	N	N	NX	N	нİ	50×
ANIMALS MECROPSIED									_					_		_			-	_						

ANIMALS NECROPSIED

TABLE A4. INDIVIDUAL ANIMAL TUMOR PATHOLOGY OF FEMALE RATS IN THE TWO-YEAR FEED STUDY OF HC BLUE NO. 2: LOW DOSE

AN IMAL Number	0	01	0 0 3	0	0 0 5	0 0 1 6	0 0 7	0		11	0 1 1	0		0		0	0 1 7	0	0 1 9	21	0 21 1	2	2	21	25
STUDY	3	0	0	5	0	91	0	1			0		1	0		-	•			0	•	ł	0		ļ
INTEGUMENTARY SYSTEM	- 81	-		.71	•1	51		-	•!	•	-	-	•1					•	•	-		-	41	4	•
SKIN Squamdus cell papilloma Basal-cell carcinoma	N	٠	٠	٠	٠	٠	٠	٠	٠	٠	٠	٠	٠	٠	• x	٠	٠	٠	٠	٠	٠	٠	٠	٠	٠
RESPIRATORY SYSTEM	_	-																							-
LUNGS AND BROHCHI Ademocarcinoma, NOS, metastatic Alveolar/Brohchidlar Ademoma Alveolar/Bronchidlar Carcinoma	·	•	•	•	•	•	•	•	•	•	•	•	•	* x	•	•	•	•	•	•	•	•	•	•	•
TRACHEA	٠	٠	٠	٠	٠	٠	٠	٠	٠	٠	٠	٠	٠	•	٠	•	•	٠	٠	٠	٠	٠	٠	٠	٠
HEMATOPOIETIC SYSTEM		-															-						_		
BONE MARROW	+	<u>+</u>	+	٠	.+	٠	+	٠	•	+	٠	•	+	۰.	•	+	•	+	+	٠	+	+	+		٠
SPLEEN	•	+	. •	۰.	٠	•	<u>.</u>	٠	۰.	+	•	•	+	•	•	•	٠	+	٠	•	+		+	+	٠
LYMPH HODES	. +	•	•	•		٠	•	٠	•	•	•	٠	٠	•	•	٠	•	•	٠	•	+	•	*	+	+
THYMUS	-	•	٠	٠	•	•	•	•	•	•	•	•	-	•	•	•	•	٠	•	•	•	•	•	•	•
CIRCULATORY SYSTEM																									_
HEART	•	*	•	*	+	+	•	•	•	•	+	•	•	•	•	•	•	•	•	•	•	*	•	*	+
DIGESTIVE SYSTEM																									
SALIVARY GLAND	•	÷	<u>.</u>	<u>+</u>	*	•	÷	<u>.</u>	•	÷	-	+	÷	÷	÷		÷	*	•	÷.	÷	<u>.</u>		+	<u>+</u>
LIVER Heoplastic Hodule Hepatocellular carcinoma	•	•	•	•	•	•	•	•	•	•			x	•	•	*	•	•	•	•	•	Ť	•	¥	*
SILE DUCT		•	•	•	+	٠	+		÷	•	•	•	•	•	•	+	•	÷	•	÷	÷	•	+	+	•
GALLBLADDER & COMPON BILE DUCT	N	N	н	н	H	N	н	н	H	н	H	N	N	×	N.	N	N	H	N	N	M	8	N	N	N
PANCREAS		•	+	+	•	•	•	•		•	•	•	+	+	•	٠	•	+	•	٠	+	÷	+	+	+
ESOPHAGUS	+	+		+	+	•	+	•	•	+	+	+	+	+	÷	+	+	٠	٠	•	+	÷	.+	+	÷
STOMACH	•	•	•	٠	+	+	•	÷	•	•	•	÷	•	•	٠	•	•	•	•	٠	+	+	٠	٠	÷
ADENOMATOUS POLYP, HOS		X.						_				_										-			
SMALL INTESTINE	<u>+</u>	.+	+	+	+	+	•	+	+	•	+	,	+	+	•	+	+	•	•	•	+	*	+	+	*
LARGE INTESTINE	•	+	+	+	+	•	•	*	+	+	+	*	+	+	+	•	+	•	•	•	•	+	+	+	+
URINARY SYSTEM																									
KIDNEY .	*	<u>+</u>	•	•	•	•	•	÷	•	•	•	<u>+</u>	•	<u>*</u>	÷	•	•	<u>.</u>	•	÷	<u>.</u>	<u>*</u>	÷.	÷	÷
URINARY BLADDER	·	÷	•	+	*	•	•	<u>.</u>	<u>.</u>	<u>.</u>	•	*	+	<u>.</u>	<u>.</u>	<u>.</u>	•	•	•	•	•	Ť			
PITUITARY Carcinoma, NOS	٠	٠	٠	٠	٠	٠	٠	٠	•	•	٠	•	٠	•	٠	٠	٠	٠	٠	•	٠	•	•	٠	÷
ADENOMA, NOS Adrenal			* •			<u>×</u>			÷	÷	•	<u>.</u>	•	<u>.</u>		÷	•	•	÷	•	•	<u>ة</u>	÷.		
PHEOCHROMOCYTOMA		<u> </u>			·	•		<u> </u>	-	-		ž.	-	ž.							·	×.	-	×.	-
THYROID C-CELL ADENOMA C-CELL CARCINGMA	٠	•	•	٠	•	•	•	•	•	•	٠	•	٠	•	•	•	.*	•	•	•	·	•	•	•	+ ×
PARATHYROID	٠	-	٠	٠	-	٠	٠	٠	٠	٠	٠	٠	٠	٠	-	٠	٠	٠	٠	٠	•	٠	٠	٠	٠
REPRODUCTIVE SYSTEM	<u> </u>	_											_		_										
MAMMARY GLAHD Adenocarcinoma, NOS Fibroadenoma	N	•	• x	•	•	+ x	•	• x	•	•	•	٠	•	+ X	+ ×	•	•	•	•	•	•	•	•	• x	•
PREPUTIAL/CLITORAL GLAND Carcinoma.nos	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N
UTERUS ADENOCARCINOMA. HOS Endometrial stromal Polyp	·	٠	٠	÷	٠	٠	٠	÷	٠	+	٠	+	•	+	٠	•	+	•	٠	٠	÷	÷	٠	•	•
OVARY GRANULOSA-CELL TUMOR	٠	٠	٠	•	٠	٠	٠	•	•	٠	٠	•	٠	÷	٠	٠	٠	•	٠	٠	+	٠	٠	٠	+
NERVOUS SYSTEM		_			-																				
BRAIN ASTRDCYTOMA	•	•	•	+	•	•	•	•	•	•	•	•	•	•	<u>.</u>	•	•	•	•	•	•	•	•	•	•
ZYMBAL GLAND Adenosquamous carcinoma	H	H	N	N	N	N	H	×	H	н	N	*	N	N	N	N	N	Ν.	•	N	N	N	N	N	•
SODY CAVITIES	-											_	_									_			_
MEDIASTINUM Alveolar/bronchidlar CA. Invasive;	N	N	N	H	N	N	N	N	н	N	N	N	N	н	N	N	N	N	N	N	N	н	N	Ħ	Ħ
PERITONEUM Adenocarcihoma, Nos, ihvasive	H	н	н	H	м	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N
ALL OTHER SYSTEMS																									

TABLE A4. INDIVIDUAL ANIMAL TUMOR PATHOLOGY OF FEMALE RATS: LOW DOSE (Continued)

AN IMAL HUMBER	2	27	2	2	3	31	3	3	31	3	3	31	81	31	61					1 6	17	4	4	5	TOTAL
WEEKS ON Study	3	0		0	0	0	0	0		0	0	0	9		0	0				5	0	1	0	0	TISSUE
NTEGUMENTARY SYSTEM	+ •			- ¥.		_41	-		-12				-21	41		<u>•1</u>	قب ال			1_0	-	2	- 91	-	
SKIN Squamous cell papilloma Basal-cell carcinoma	•	٠	٠	٠	н	٠	٠	٠	٠	٠	٠	٠	٠	•	٠	• ;		• •	• •	•	٠	٠	٠	•	50# 1 t
ESPIRATORY SYSTEM	+					_			_				-	_			-	_						-	
LUNGS AND SRONCHI Adenocarcinoma, ngs, metastatic Alveqlar/Bronchidlar Adenoma Alvedlar/Bronchidlar carcinoma	+	٠	٠	٠	٠	٠	٠	٠	٠	٠	٠	٠	٠	•	•	•	• •	•	•	+ x	•	* ×	٠	•	50
TRACHEA		•		+	•				+	+				•	+	• •				_	•		•		48
IEMATOPOIETIC SYSTEM	Ļ		<u> </u>	<u> </u>		-	<u> </u>				<u> </u>	-	_		_								-	_	
																									50
SONE MARROW	Ħ	Ť		ž	Ť	÷	Ť	Ť	Ť	Ť	<u> </u>		<u> </u>	<u>.</u>	<u> </u>						Ť	Ť	Ť	Ť	50
LYMPH KODES	1	Ť	Ť	Ť	÷	÷	Ť	Ť	- <u>-</u> -		<u> </u>	ž	÷		<u> </u>	_				<u> </u>		÷	<u> </u>		.50
THYMUS	Ť		- <u>-</u>	-	<u>.</u>		÷	-	- <u>`</u>	÷	÷				+					ž	<u> </u>	÷		Ť	32
IRCULATORY SYSTEM		-	· ·	-			·		<u> </u>	·	<u> </u>		_	_		_			_			<u> </u>		-1	
HEART			+		•	+	•	•	•	•	•	•	٠	•	•				•	•	•		•		50
IGESTIVE SYSTEM		_					-		<u> </u>			_	·	·	·							-		-1	
SALIVARY GLAND												<u>.</u> .													50
LIVER NEOPLASTIC NODULE	•	+	•	+	+	+	+	•	+	•	•	+	•	•	•		•	•	•	•	•	•	•	٠	50
HEPATOGELLULAR CARCINOMA	-																							_	
BILE DUCT	<u>.</u>	<u>+</u>	<u>.</u>		•	• 	<u>.</u>	÷	*	<u>.</u>	•	*	•	<u>.</u>	<u>* * * * * * * * * * * * * * * * * * * </u>		+		-		*	•	•	+	50
GALIBLADDER & COMMON BILE DUCT	┝┻						М.		<u>N</u>		N	N_	<u>×</u>	H	M., I			8					8	-	58×
PANCREAS	++	+	+	+	•	•	•	+	•	•	+	<u>+</u>	+	•	••		•		•	•	+	÷.	•	-++	50
ESOPHAGUS	+	+	+	+	+	+	•	+	+	+	+	•			<u>.</u>	_	•	+	•	+	•	+	*	+	50
STOMACH Adehomatous Polyp, Hos	+	•	+	•	•	+	+	•	٠	•	•	+	+	•	• •	• •	• •	+	•	+	+	•	+	+	50,
SMALL INTESTINE	•	+	÷	+	+	+	+	+	+	+	+	+	•	•	+		•	+	*	+	+	*	+	+	50
LARGE INTESTINE	+	+	٠	+	٠	•	+	+	٠	+	•	÷	٠	•	• •	•	•	÷	+	+	+	٠	+	+	50
RINARY SYSTEM													_					_						+	
KIDHEY	+	+	+.	+	+	+	•	+	+	÷	÷	٠	+	•	• •		+	+	. +		+	+	+	+	50
URINARY BLADDER	+	٠	٠	٠	٠	٠	٠	٠	+	+	+	+	•	•	• •	• •	•	٠	+	٠	٠	٠	٠	+	50
HDOCRINE SYSTEM									_			-		_							-			-+	
PITUITARY Carcinoma, nos Adenoma, nos	÷	٠	٠	٠ x	٠	٠	•	•	• ×	•	÷ ××	•	٠	•	+ + x_)		• •	•	٠	٠	• ×	٠	٠	+ X	50 18
ADRENAL PHEOCHROMOCYTOMA	•	÷	٠	٠	٠	٠	٠	٠	٠	•	٠	٠	٠	•	* ·	• •	•	٠	٠	٠	٠	٠	٠	÷	50,
THYROID C-Cell Adenoma C-Cell Carcinoma	·	÷	•	•	٠	÷	+	•	÷	ż	* ×	÷	* ×	•	• •	• •	•	÷	•	÷	٠	*	٠	+	50
PARATHYROID	•	•	+	+	+	•	•	+	•	+	+	÷	+	•	• •		•	•	+	•		÷	+		46
EPRODUCTIVE SYSTEM	-					_		_						_						_				-+	
MAMMARY GLAND Adenocarcingma, Nos Fibroadenoma	+	٠	٠	٠	٠	٠	• x	٠	٠	٠	+ ×	٠	•	•	• •	• •	•	٠	٠	N	٠	* ×	+ X	+	50m
PREPUTIAL/CLITORAL GLAND Carcinoma.nos	н	N	н	N	N	N	N	N	н	N	Ņ	H	н	N	N P	IN	N	N	N	ж	н	н	ж	N	50×
UTERUS ADENOCARCINOMA, NOS Endometrial stromal polyp	·	÷	÷	*	٠	+	÷	٠	·	÷	• •	÷ ×	+	•	• •	•	•	•	÷	÷	٠	÷	٠	•	50
OVARY. GRANULOSA-CELL TUMOR	•	+	•	+	٠	•	+	+	٠	•	+	•	•	•	• •	•	•	•	* ×	+	•	٠	•	•	50 1
ERVOUS SYSTEM	-			_			_					-		_										+	
SRAIN Astrocytoma	+	+	•	•	+	•	•	×	٠	•	+	•	•	•	•••	•	•	+	•	+	•	+	•	+	59,
PECIAE SENSE ORGANS Zymbal gland Adenosquamous carcinoma	н	н	N	н	H	H	н	н	N	H	N	N	н 1	•	N X	к	N	н	M	H	N	н	N	N	50# 1
DDY CAVITIES	-																		_					1	
MEDIASTIHUM Alveolar/bronchiolar ca, invasive	н	H	N	N	N	Ν.	N	N	N	N	H	N	н	N 1	N N	N	N	N	N	N X	N	H	н	NÍ.	50×
PERITONEUM Ademocarcinoma, nos, invasive	N	н	N	N	N	N	N	N	N	N	н	N X	н	• •	N N	N	N	M	N	M	N	H	N	N	50×
MULTIPLE ORGANS NOS	N	H	н					N		4	м	м	N !	4 1		м	N		N	N	N	N	N	н	50×

* ANIMALS HECROPSIED

TABLE A4. INDIVIDUAL ANIMAL TUMOR PATHOLOGY OF FEMALE RATS IN THE TWO-YEAR FEED STUDY OF HC BLUE NO. 2: HIGH DOSE

AHIMAL Number	8	0	01	01	0	0	0	0	0	1	0	1	0	1	01	1	1	1	1	2	2	2	21	21	02
WEEKS ON	+	11	81				-	1	辨	-11		1				井	쉶				ġ	- 1			1
STUDY	لف	. 41	?	4	4	4	از	4	á	4	4	4	4	4	4	4	6	. 41	4		2	31	. 4	ŝ	4
SUBCUTANEGUS TISSUE FIBROMA	•	٠	٠	٠	٠	٠	٠	٠	٠	٠	٠	٠	٠	٠	٠	٠	٠	٠	٠	٠	•.	٠	٠	•	•
RESPIRATORY SYSTEM	┢──			_			-					-													-
LUNGS AND BRONCHI	L +	+	+	•	٠	+	+	+	+	+	+	+	+	+	+	+	•	•	+	+	•	+	•	•	+
TRACHEA		+	-	+	+	+	-	•	+	+	+	+	+	+	+	•	+	•	•	+	+	•	+	+	+
HASAL CAVITY	H	N	+	N	N	•	н	N	N	N	+	N	N	÷	N	+	N	N	+	+	N	к	н	н	+
SQUAMOUS CELL CARCINOMA			×	_																					
HEMATOPOIETIC SYSTEM																									
BONE MARROW	+	+	+	+	+	+	+	÷	+	<u></u>	+	+	+		*	<u>.</u>	•	•	+	-	•	•	•	+	-
SPLEEN	÷	+	-	•	÷.	+	+	+	*	÷.	*	<u>.</u>	•	÷	•	•	•	<u>.</u>	*	<u>+</u>	<u>+</u>		+	+	+
LYMPH HODES		<u> </u>	•	÷.	÷	<u> </u>	<u>.</u>	÷	<u>+</u>	- <u>+</u>		÷	<u>.</u>	÷.	÷	÷	•	÷.	*	<u>.</u>	•	•	+	• •	<u>.</u>
THYMUS	·	•	•	<u>.</u>	•	•	+	<u>.</u>	•	<u>.</u>	•	•	<u>.</u>	•	-	<u>.</u>	*	•	+	*	•	•	•	+	+
CIRCULATORY SYSTEM	1.																								
HEART DIGESTIVE SYSTEM	L.	•	•	<u> </u>	•	•	•	<u> </u>	+	<u>.</u>	•	•	<u>.</u>		+	·	<u>.</u>	<u> </u>	<u>•</u> •	+	•	<u> </u>	+	•	*
SALIVARY GLAND														•.	•										
LIVER Neoplastic Hodule	·	•	•	•	•	•	•	+	+	+	•	+	÷	+	•	+	+	+	+	+	•	•	•	•	+
HEPATOCELLULAR CARCINOMA Bile duct.	1.								•	•	•	•	•	•					<u>م</u>						-
	١ <u>.</u>	÷	<u> </u>	÷	<u> </u>	<u> </u>	<u> </u>	÷		<u> </u>	<u> </u>	<u>.</u>	- <u>-</u>	÷	<u> </u>	-	Ţ	÷		÷	÷	<u> </u>	<u> </u>	<u> </u>	÷
GALLBLADDER & COMMON BILE DUCT Pancreas	1	•		-		-	<u> </u>	<u>a</u>	- <u>-</u>		•	•		- <u>-</u>	-							•		- 	-
ESOPHAGUS	ا ا	- <u>-</u> -	÷	Ť	<u> </u>	- <u>-</u> -	- <u>Ť</u> -	Ť		- <u>-</u> -	÷	÷	÷		<u> </u>	Ť		<u> </u>		÷	<u> </u>		<u> </u>	<u>.</u>	Ť
STOMACH	ا ز	- <u>-</u>	÷	Ť	÷	Ť	<u> </u>	- <u>-</u>	Ť	÷	÷		÷	÷	Ť	<u>.</u>	Ť	Ť	-	Ť		<u> </u>	÷	<u> </u>	-
SMALL INTESTINE	Ť	<u> </u>	Ť		- <u>T</u> -	Ť	Ť	Ť	•	÷.	÷	•	•	Ť		Ť	- <u>-</u>	Ť				Ť	Ť	Ť	Ť
LARGE INTESTINE	T.	ž		Ť			<u> </u>	Ť	÷	÷		÷	<u> </u>	÷	Ť	<u>-</u>	- <u>-</u>	Ť	÷	÷	•	÷		÷	Ì
URINARY SYSTEM	Ļ.	•	· · ·		•	· ·		-		· ·		<u> </u>		<u> </u>	•	•		<u> </u>	· ·	<u> </u>	<u> </u>			<u> </u>	_
KIDNEY		•	•	•	•	+	•	٠	•	•	+	•	•	٠	•	.+	•	٠	•	•	+	٠	•	•	+
MIXED MESENCHYMAL TUMOR, MALIGNAN	┣	-				_									-		_								_
URINARY BLADDER	•	+	+	+	+	-	•	+	+	+	+	+	+	•	٠	•	•	•	+	•	٠	+	+	+	+
ENDOCRINE SYSTEM																				_			_		
ADEHOMA, NOS	<u>l</u> ż.	, x	<u>.</u>	•	•	•	ż	ż	•	ż	•	ż	•	•	ż	÷	•	•	+	•	ż.	•	ż	•	+
ADRENAL Pheochromocytoma	ŀ	•	•	÷.	•	•	•	•	ż	ż	•	٠	•	•	•	•	ż	•	•	•	•	•	•	•	٠
THYROID Follicular-cell carcinoma C-cell adenoma C-cell carcinoma	•	٠	٠	٠	٠	٠	-	• ×	•	٠	* x	٠	٠	٠	•	٠	٠	*	٠	٠	٠	٠	٠	٠	+ X
PARATHYRGID		_	•	-	-	+	_	+	+	•	+	+		•	+	+	+	÷	•	•	+	+	+	÷	•
REPRODUCTIVE SYSTEM																						_			-
MAMMARY GLAND + FIBROADENOMA	ŀ	٠	٠	٠	٠	٠	٠	÷	٠	٠	٠	٠	٠	٠	÷	÷	٠	•	٠	٠	٠	٠	•	•	•
PREPUTIAL/CLITORAL GLAND Adenoma, Nos Keratoacanthoma	N	N	N	×	N	×	×	H	н	H	H	H	N	н	H	н	N	N	×	H	N	н	н	×	N
VAGINA Squamous cell papilloma	N	N	N	NX	N	N	N	N	H	N	N	N	N	N	×	N	N	N	N	N	N	N	N	H	N
UTERUS Leidmyosarcoma Endometrial Stromal Polyp Endometrial Stromal Sarcoma	* *	٠	* x	٠	٠	•	•	• ××	•	•	•	•	•	* ×	+ x	* ×	٠	•	٠	+ x	•	•	٠	×	+
OVARY	+	+	+	+	+	•	+	+	•	+	+	•	•	•	+	•	+	٠	•	+	•	•	٠	٠	+
NERVOUS SYSTEM																					_				-
SRAIN	+	+	٠	+		٠	+	•	•	÷	•	•	•	•	•	•	+	٠	+	٠	+	•	+	+	•
SPINAL CORD Sarcoma, Nos	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	Ν.	N	N	N	N	N	N	N
SPECIAL SENSE ORGANS	-								_				-							-					-
EAR NEURILEMOMA	•	•	N	•	•	•	N	N	N	N	•	•	N	٠	N	•	•	N	٠	٠	N	N	•	•	•
ALL OTHER SYSTEMS MULTIPLE ORGANS NOS Eukemia.mondnuclear cell	N	4	N	N	N	N	N	N	N	N	н	N	N	N	N	N	N	N	H	N	N	н	N	N	N
	-		_		_		_	_	-	_				_				_	_	_		_	_		_

ANIMAL Number	2	2	2	21	3	31	3	31	3	35	31	3	31	3		:	2İ		4	41	9	4 7	0 4 8	4	0 5 0	TOTAL
WEEKS ON Study		0	0	0	0	8	01	91	7		•	ò	0	0	0		7	21	0	-	01	ġ	0	0	0	TISSUE
INTEGUMENTARY SYSTEM .	<u> -*</u>			- 1	. •1	_ <u>.</u>	-21	<u> 1</u>	- 11		•	-91	- 1	•			- 16	21			<u> </u>	- 1	- 41		-1	
SUBCUTANEOUS TISSUE Fibroma	•	•	٠	٠	•	+	٠	+	+	•	+	+	٠	+	+	+	•	+	٠	+	•	•	٠	* x	+	50× 1
RESPIRATORY SYSTEM	1				_																					
LUNGS AND BRONCHI	<u>↓</u> •	+	+		+	+.	+	+		+	+	*	+	+	+	*	+	+	+	•	+	٠	+		+	50
TRACHEA	<u> </u>	+	•	+	+	+	+	*	+	•	+	+	+	<u>.</u>	+	•	•	•	+	+	<u>+</u>	+	+	+	+	47_
NASAL CAVITY Squamdus cell carcingma	+	+	N	N	N	N	N	H	H	H	N	N	N	•	N	H	N	N	N	M	N	H	N	H	N	58)
IEMATOPOIETIC SYSTEM																		_								
SCHE MARROW	┼┷		<u>+</u>	*	<u>+</u>	•	+	<u>.</u>	.*	+	•	*	+	<u>+</u>	*	<u>*</u>	•	*	+	+	+.	. +	+	+	-+	50
SPLEEN	÷	*	<u> </u>	÷.	<u>+</u>	•	÷	<u>.</u>	÷	<u>+</u>	<u>*</u>	<u> </u>	. .	÷	<u>*</u>	<u>*</u>	•	•	*	<u>*</u>	<u> </u>	*	*	+	+	.50
LYMPH NODES	<u>†</u>	- <u>-</u>	<u> </u>	<u>*</u>		<u> </u>			-	+		- <u>*</u>		<u>*</u>	<u>+</u>	*	<u>*</u>	<u>.</u>	-	•	<u> </u>		<u> </u>			50
	Ľ		_		<u> </u>	<u> </u>				-	-	+	<u> </u>	Ĺ.	<u> </u>	+	•	_	-	•	<u> </u>	<u> </u>	<u>+</u>	<u>·</u>	+	48
SIRCULATORY SYSTEM		•	•	•	÷	•	•	•	•	•	•	•	•	•	•	•	٠	•		•	•	•	•	•	+	
HEART	Ļ	-	Ť	·	<u> </u>	_			·	<u> </u>	<u> </u>			Ť	·	·	•	<u> </u>	<u> </u>	<u> </u>	<u> </u>		÷	-	_	58
SALIVARY GLAND		•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	-	•		49
LIVER Neoplastic Nodule	•	•	+	+	+	+	•	+	+	+	+	+	•	•	+		*	+	•	+	+	+	+	•	•	50
HEPATOCELLULAR CARCINOMA	1.	+	•	•			•	•	•	•	•	•	•	•	•	•	•	•	-	-	-	•	•	•		50
GALLBLADDER & COMPON BILE DUCT	Ť	ý M	N	*	ý.			Ň	с <u>ў</u>	Ň	Ň		¥.		<u>.</u> н	H	ŕ H	й	Ň	N	<u> </u>	И	Ň	Ň	, i	30 501
PANCREAS	1	•	*		*	*	-¤	<u>بہ</u>		• •	*	-a	•	•	•	*	*	•	<u>م</u> ــــــــــــــــــــــــــــــــــــ	+	- ²	*	•	*	-	50
ESOPHAGUS	Ť.	÷	÷	•	•	<u>.</u>	•	÷	÷	•	•	- <u>-</u>	÷	÷.	•	•	•	•	•	•	- <u></u>	•	•	•		58
STOMACN	T,	+	+	+	+	•	* ·	+	•	•	+	+	+	+	+	• `	•	+	+	÷	+	+	+	+	+	58
SMALL INTESTINE	1.	.+	+	•	+	+	+	+	+	+	+	÷	+	+	+	÷	•	•	+	÷	+	+	•	+	•	58.
LARGE INTESTINE	•	+	•	+	+	٠	+	+	+	+	+	+	+	+	+	÷	+	+	+	+	+	+	•	+	+	58
IRINARY SYSTEM																		_	_		_				-+	
KIDHEY MIXED MESENCHYMAL TUMOR, MALIGHAN		+	٠	+	+	٠	٠	+	•	٠	٠	+	+	+	•	•	•	•	•	٠	+	+	÷ x	+	÷	58
URINARY BLADDER	1.	÷	•	+	+	•	÷	+		•	•	+	+	+	•	٠	•	+	+	+	+	•	÷	+	+	48
NDOCRINE SYSTEM			_								_	-				_				_		_	. , ·		-	
PITUITARY	•	+	•	+	÷	•	+	+	٠	•	÷	+	+	•	•	•	-	•	•	•	+	•	+	+	+	49
ADENOMA, NOS	<u> </u>						X	X		<u>×</u> _	×.						•	_	X					_	4	16
ADRENAL Pheochromocytoma	↓ •	•	+	•	×.	•	•	•	-	•	+	<u>+</u>	•	•	•	•	•	•	•	+	+	•	•	•	4	-''
THYRDID Follicular-cell carcinoma C-cell adenoma C-cell carcinoma	•	•	•	•	•	•	•	•	•	•	•	•	×	•	•	•	•	٠ .	* ×	•	•	•	• ×	• ×	*	•••
PARATHYRDID	+	٠	٠	+	+	+	+	•	+	٠	٠	+	+	+	+	•	•	•	•	+	+	٠	-	٠	-	44
REPRODUCTIVE SYSTEM	1																								+	
MAMMARY GLAND Fibroadenoma	•	•	•	•	<u>.</u>	٠	ž	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	ż	•	+	50×
PREPUTIAL/CLITORAL GLAND Adenoma, nos Keratoacanthoma	н	н	N	н Х	N	H	N	N	н	N	H	N	н	N	N	N	N	N	N	N	N	N	H	H	N	50×
VAGINA Squamdus cell papilloma	N	N	N	N	N	H	N	N	N	н	N	H	H	N	N	н	H	н	H	N	н	н	N	N	M	504
UTERUS Leidmydsarcoma Endometrial Stromal Polyp Endometrial Stromal Sarcoma	•	٠	•	•	•	* x	•	* ×	•	+ x	•	•	* x		•	•	•		+ ×	•	•	•	٠	•	+ ×	50 15
GYARY	+	· •	•	+	+	+	+	+	+	+	٠	+	+	+	•	+	•	•	+	+	+ .	+	+	+	+	50
RERVOUS SYSTEM	 		_					• •			_														╉	
BRAIN	+	+	•	•	•	٠	•	•	+.	+	•	•	+	•	•	•	•	•	÷	•	٠	+	•	÷	+	50
SPINAL CORD Sarcoma, Hos	N	N	N	H	N	N	N	N	* ×	H	H	N	N	N	H i	M	• 1	N	N	H	N	N	N	N	N	50× 1
SPECIAL SENSE ORGANS	1																								T	
EAR NEURILEMOMA	+	•	•	+	+	N	H	N .	•	H	•	×	H	•	N 1	N	N 1	•	M	•	•	н	•	*	•	50×
ALL OTHER SYSTEMS		, ,	ų		ų	U	y.		N	w	w	J			N	н	N I	N	н	н	N	N	N	N		5 a M
MULTIPLE ORGANS NOS Leukemia, Mononuclear Cell	1."	r i	X	14	n	al .	a	ri I	n	13	13	n		a.	14		x	χ		a	4					3

* ANIMALS NECROPSIED

HC Blue No. 2, NTP TR 293

APPENDIX B

SUMMARY OF THE INCIDENCE OF NEOPLASMS IN MICE IN THE TWO-YEAR FEED STUDIES OF HC BLUE NO. 2

HC Blue No. 2, NTP TR 293

C	ONTRO	L (UNTR)	LOWI	DOSE	HIGH	DOSE
ANIMALS INITIALLY IN STUDY	50		50		50	
ANIMALS MISSING			1		•••	
ANIMALS NECROPSIED	50		48		49	
ANIMALS EXAMINED HISTOPATHOLOGICALLY	50		48		49	
INTEGUMENTARY SYSTEM						
*SKIN	(50)		(48)		(49)	
SQUAMOUS CELL CARCINOMA	1	(2%)				
FIBROMA			2	(4%)		
FIBROSARCOMA			1	(2%)		
*SUBCUT TISSUE	(50)		(48)		(49)	
CARCINOMA, NOS					1	(2%)
SARCOMA, NOS	4	(8%)			1	(2%)
FIBROMA		(2%)	3	(6%)		(6%)
FIBROSARCOMA		(6%)		(17%)		(12%)
RHABDOMYOSARCOMA	·	(0,0)	•	(= • /• /		(2%)
OSTEOSARCOMA						(4%)
NEURILEMOMA	1	(2%)	1	(2%)	_	(4%)
NEURILEMOMA, MALIGNANT	•	(2 %)	•	(2 %)		(2%)
RESPIRATORY SYSTEM						
	(20)		(49)		(49)	
#LUNG	(50)	(00)	(48)		(47)	
SQUAMOUS CELL CARCINOMA, METASTA		(2%)		(0~)		(00)
HEPATOCELLULAR CARCINOMA, METAST				(2%)		(2%)
ALVEOLAR/BRONCHIOLAR ADENOMA		(6%)		(17%)		(4%)
ALVEOLAR/BRONCHIOLAR CARCINOMA	2	(4%)		(2%)		(8%)
SARCOMA, NOS, METASTATIC				(2%)		(2%)
FIBROSARCOMA, METASTATIC			3	(6%)	1	(2%)
HEMATOPOIETIC SYSTEM						
*MULTIPLE ORGANS	(50)		(48)		(49)	
MALIG. LYMPHOMA, LYMPHOCYTIC TYPE			2	(4%)	4	(8%)
MALIG. LYMPHOMA, HISTIOCYTIC TYPE		(2%)	2	(4%)	2	(4%)
MALIGNANT LYMPHOMA, MIXED TYPE	-	(,		(2%)	1	(2%)
#SPLEEN	(50)		(47)	(=,	(49)	. ,
MALIG. LYMPHOMA, LYMPHOCYTIC TYPE			()		, , ,	(2%)
#LYMPH NODE	(50)		(47)		(49)	(=)
	(00)		(47)			(2%)
FIBROSARCOMA, METASTATIC	(50)		(47)		(49)	(20)
#AXILLARY LYMPH NODE	(50)		(47)			(2%)
SARCOMA, NOS, METASTATIC FIBROSARCOMA, METASTATIC						(2%)
CIRCULATORY SYSTEM	(50)		(49)		(40)	
*SUBCUT TISSUE	(50)		(48)		(49)	
HEMANGIOMA		(90)	1	(2%)		
HEMANGIOSARCOMA, UNC PRIM OR MET		(2%)	(47)		(40)	
#SPLEEN	(50)	(07)	(47)		(49)	
HEMANGIOSARCOMA		(2%)				
*PULMONARY VEIN	(50)		(48)		(49)	
ALVEOLAR/BRONCHIOLAR CA, INVASIVE						(2%)
#LIVER	(50)		(48)		(49)	
HEMANGIOSARCOMA	, . ,	(2%)				(2%)

TABLE B1. SUMMARY OF THE INCIDENCE OF NEOPLASMS IN MALE MICE IN THE TWO-YEARFEED STUDY OF HC BLUE NO. 2

	CONTROL (UNTR)	ĹOW D	OSE	HIGH	DOSE
DIGESTIVE SYSTEM				<u></u>	
#LIVER	(50)	(48)		(49)	
HEPATOCELLULAR ADENOMA	6 (12%)	, .,	(17%)	, /	(16%)
HEPATOCELLULAR CARCINOMA	5 (10%)		(19%)		(24%)
HEPATOBLASTOMA	0 (10%)		(2%)		(==,,,,
#FORESTOMACH	(50)	(47)	()	(49)	
SQUAMOUS CELL PAPILLOMA		(,,	(4%)
#COLON	(50)	(47)		(49)	,
ADENOMATOUS POLYP, NOS			(2%)		
URINARY SYSTEM NONE					
ENDOCRINE SYSTEM					
#ADRENAL	(50)	(47)		(49)	
CORTICAL ADENOMA	(*-)		(2%)		(2%)
PHEOCHROMOCYTOMA			(2%)		(2%)
#THYROID	(44)	(45)	(- ~)	(49)	(= ~)
FOLLICULAR-CELL ADENOMA	2 (5%)		(4%)		(2%)
	······································	<u> </u>			
REPRODUCTIVE SYSTEM NONE					
NERVOUS SYSTEM NONE					
SPECIAL SENSE ORGANS					
*HARDERIAN GLAND	(50)	(48)		(49)	
ADENOMA, NOS				1	(2%)
MUSCULOSKELETAL SYSTEM NONE		·	<u></u>		
BODY CAVITIES					
*ABDOMINAL WALL	(50)	(48)		(49)	
FIBROSARCOMA, INVASIVE	()	((2%)
ALL OTHER SYSTEMS				<u> </u>	
*MULTIPLE ORGANS	(50)	(48)		(49)	
SARCOMA, NOS			(2%)		
FIBROSARCOMA	1 (2%)	-			
FIBROSARCOMA, METASTATIC	/	1	(2%)		
MESOTHELIOMA, MALIGNANT			(2%)		
		1			

TABLE B1. SUMMARY OF THE INCIDENCE OF NEOPLASMS IN MALE MICE IN THE TWO-YEAR FEED STUDY OF HC BLUE NO. 2 (Continued)

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

CON	TROL (UNTR)	LOW DOSE	HIGH DOSE
ANIMAL DISPOSITION SUMMARY			
ANIMALS INITIALLY IN STUDY	50	50	50
NATURAL DEATH	11	11	4
MORIBUND SACRIFICE	15	15	12
SCHEDULED SACRIFICE			
TERMINAL SACRIFICE	24	23	34
DOSING ACCIDENT			
ACCIDENTALLY KILLED, NDA			
ACCIDENTALLY KILLED, NOS			
ANIMAL MISSING		1	
ANIMAL MISSEXED			
OTHER CASES			
TUMOR SUMMARY TOTAL ANIMALS WITH PRIMARY TUMORS** TOTAL PRIMARY TUMORS TOTAL ANIMALS WITH BENIGN TUMORS	23 33 11	33 56 17	37 58 15
TOTAL BENIGN TUMORS	13	28	21
TOTAL ANIMALS WITH MALIGNANT TUMORS	15	22	30
TOTAL MALIGNANT TUMORS	19	28	37
TOTAL ANIMALS WITH SECONDARY TUMORS##	1	6	5
TOTAL SECONDARY TUMORS	1	6	8
TOTAL ANIMALS WITH TUMORS UNCERTAIN-			
BENIGN OR MALIGNANT			
TOTAL UNCERTAIN TUMORS			
TOTAL ANIMALS WITH TUMORS UNCERTAIN-			
PRIMARY OR METASTATIC	1		
TOTAL UNCERTAIN TUMORS	1		

TABLE B1. SUMMARY OF THE INCIDENCE OF NEOPLASMS IN MALE MICE IN THE TWO-YEAR FEED STUDY OF HC BLUE NO. 2 (Continued)

SECONDARY TUMORS: METASTATIC TUMORS OR TUMORS INVASIVE INTO AN ADJACENT ORGAN

CO	NTRO	L (UNTR)	LOWI	DOSE	HIGH	DOSE
ANIMALS INITIALLY IN STUDY	50		50			
ANIMALS NECROPSIED	50		50		50	
ANIMALS EXAMINED HISTOPATHOLOGICALLY	50		50		50	
INTEGUMENTARY SYSTEM						
*MULTIPLE ORGANS FIBROUS HISTIOCYTOMA, MALIGNANT	(50) 1	(2%)	(50)		(50)	
*SUBCUT TISSUE	(50)	(4,0)	(50)		(50)	
NEURILEMOMA	x = x		1	(2%)		
RESPIRATORY SYSTEM						
#LUNG	(50)		(49)		(50)	
HEPATOCELLULAR CARCINOMA, METAST		(2%)	,			
ALVEOLAR/BRONCHIOLAR ADENOMA				(4%)		
ALVEOLAR/BRONCHIOLAR CARCINOMA	1	(2%)	1	(2%)		
HEMATOPOIETIC SYSTEM						
*MULTIPLE ORGANS	(50)		(50)		(50)	
MALIGNANT LYMPHOMA, NOS		(2%)				
MALIG. LYMPHOMA, LYMPHOCYTIC TYPE		(6%)		(10%)		(4%)
MALIG. LYMPHOMA, HISTIOCYTIC TYPE		(2%)		(6%)		(4%)
MALIGNANT LYMPHOMA, MIXED TYPE		(14%)		(2%)		(4%)
#SPLEEN	(50)		(50)	(00)	(49)	
MALIG. LYMPHOMA, LYMPHOCYTIC TYPE				(2%)		
MAST-CELL TUMOR #PEYER'S PATCH	(49)		(46)	(2%)	(48)	
MALIG. LYMPHOMA, LYMPHOCYTIC TYPE	(43)			(2%)		(2%)
CIRCULATORY SYSTEM						
*SUBCUT TISSUE	(50)		(50)		(50)	
HEMANGIOSARCOMA					1	(2%)
DIGESTIVE SYSTEM		<u></u>				
#LIVER	(50)		(50)		(49)	
HEPATOCELLULAR ADENOMA	3	(6%)			3	(6%)
HEPATOCELLULAR CARCINOMA	4	(8%)	1	(2%)	7	(14%)
#FORESTOMACH	(49)		(48)		(49)	
SQUAMOUS CELL PAPILLOMA		(2%)	(. . .			
#DUODENUM ADENOMATOUS POLYP, NOS	(49) 1	(2%)	(46)		(48)	
URINARY SYSTEM NONE						
ENDOCRINE SYSTEM #PITUITARY	(49)		(48)		(49)	
ADENOMA, NOS		(18%)		(4%)		(10%)
#THYROID	(48)	((49)	<	(49)	,
FOLLICULAR-CELL ADENOMA		(8%)	(19)			(2%)
FOLLICULAR-CELL CARCINOMA		(6%)	1	(2%)		(2%)
#THYROID FOLLICLE	(48)		(49)		(49)	
CYSTADENOMA, NOS		(2%)				

TABLE B2. SUMMARY OF THE INCIDENCE OF NEOPLASMS IN FEMALE MICE IN THE TWO-YEAR FEED STUDY OF HC BLUE NO. 2

	CONTRO	L (UNTR)	LOW DOSE	HIGH	DOSE
*MAMMARY GLAND	(50)		(50)	(50)	
ADENOMA, NOS	(50)		(00)		(2%)
ADENOCARCINOMA, NOS					(2%)
MIXED TUMOR, MALIGNANT			1 (2%)	•	(2 %)
#UTERUS	(50)		(50)	(50)	
LEIOMYOMA			· /		(2%)
ENDOMETRIAL STROMAL POLYP	3	(6%)			
#OVARY	(49)		(50)	(50)	
ADENOCARCINOMA, NOS		(2%)			
GRANULOSA-CELL TUMOR	2	(4%)			
NERVOUSSYSTEM					
#BRAIN/MENINGES	(50)		(50)	(50)	
MYXOSARCOMA		(2%)		()	
SPECIAL SENSE ORGANS					
*HARDERIAN GLAND	(50)		(50)	(50)	
ADENOMA, NOS	(00)		1 (2%)	(00)	
MUSCULOSKELETAL SYSTEM NONE					
BODY CAVITIES NONE					
ALL OTHER SYSTEMS					
LEG					
OSTEOSARCOMA				1	
FOOT SARCOMA, NOS	1				
# NUMBER OF ANIMALS WITH TISSUE EX • NUMBER OF ANIMALS NECROPSIED	AMINED MICR	OSCOPICALI	·Υ		· · · · · · · · · · · · · · · · · · ·
ANIMAL DISPOSITION SUMMARY					
ANIMALS INITIALLY IN STUDY	50		50	50	
NATURAL DEATH	10		15	21	
MORIBUND SACRIFICE	5		8	10	
SCHEDULED SACRIFICE	~~		07		
TERMINAL SACRIFICE	35		27	19	
DOSING ACCIDENT ACCIDENTALLY KILLED, NDA					
ACCIDENTALLY KILLED, NDA ACCIDENTALLY KILLED, NOS					
ANIMAL MISSING					
ANIMAL MISSEXED					

TABLE B2. SUMMARY OF THE INCIDENCE OF NEOPLASMS IN FEMALE MICE IN THE TWO-YEAR FEED STUDY OF HC BLUE NO. 2 (Continued)

HC Blue No. 2, NTP TR 293

CC	ONTROL (UNTR)	LOW DOSE	HIGH DOSE
JMORSUMMARY			
TOTAL ANIMALS WITH PRIMARY TUMORS**	31	19	22
TOTAL PRIMARY TUMORS	48	22	29
TOTAL ANIMALS WITH BENIGN TUMORS	17	6	11
TOTAL BENIGN TUMORS	22	6	11
TOTAL ANIMALS WITH MALIGNANT TUMORS	22	15	15
TOTAL MALIGNANT TUMORS	24	15	18
TOTAL ANIMALS WITH SECONDARY TUMORS	## 1		
TOTAL SECONDARY TUMORS	1		
TOTAL ANIMALS WITH TUMORS UNCERTAIN-			
BENIGN OR MALIGNANT	2	1	
TOTAL UNCERTAIN TUMORS	2	1	
TOTAL ANIMALS WITH TUMORS UNCERTAIN-			
PRIMARY OR METASTATIC			
TOTAL UNCERTAIN TUMORS			

TABLE B2. SUMMARY OF THE INCIDENCE OF NEOPLASMS IN FEMALE MICE IN THE TWO-YEAR FEED STUDY OF HC BLUE NO. 2 (Continued)

			~ ~ ~ ~		- 27																			
ANIMAL Number	0	01	01	0	01	01	2	3	0		1	1	1		1	1	7	1	1	2	2	2	2	2
WEEKS ON Study	0 1	0	-	0	0		0	0	91	6		4	1	2	1	0	8	0	2	1	8	0	1	4
INTEGUMENTARY SYSTEM		-21	-21	- 21	- 21	-21	-21	_21	21	ــــــــــــــــــــــــــــــــــــــ	-1-			21	21	- <u>1</u>	51	21	-21		- 1	-21		_61_
SKIN Squamdus cell carcinoma	+	+	•	٠	+	+	•	+	+ 	+	+	+	+	<u>+</u>	+	ż	+	•	+	+	+	٠	+	•
SUBCUTANEGUS TISSUE Sarcoma, nos Fibroma Fibrosarcoma Hemanglosarcoma, unc prim or meta Heurilemoma	•	•	х +	•	•	+ x	٠	*	+ ×	٠	٠	٠	٠	•	٠	×	٠	•	*×	·	+ x	•	+ x	•
ESPIRATORY SYSTEM									<u></u>															·
LUNGS AND BRONCHI Squamous cell carcinoma, metastat Alveolar/bronchiolar adenoma Alveolar/bronchiolar carcinoma	*	۰ 	•	٠	+	•	•	+	+	+	•	+	•	•	•	×	+	•	•	•	•	•	+ ــــــــــــــــــــــــــــــــــــ	•
TRACHEA	+	+	+	٠	٠	+	+	+	+	٠	+	+	٠	•	+	+	+	+	+	+	٠	٠	+	+
EMATOPOIETIC SYSTEM	┢╺╼╍																							
BONE MARROW	<u> </u>		+	+	+	.+	+	+		+	+	•	+	+	<u>+</u>	+	+	+	•	÷.	•	•	*	<u> </u>
SPLEEN Hemangiosarcoma	+	*	+	•	+	<u>+</u>	+	+	•	+	+	+	•	+	+	•	•	•	•	*	•	•	ż	+
LYMPH HODES	<u></u>	+	+	+	•	+		+	÷	<u> </u>	+	+	+	<u>+</u>	<u>+</u>	+	+	٠	<u>+</u>	+	+	+	<u>+</u>	<u>+</u>
THYMUS	+	٠	٠	٠	٠	+	+	٠	+	+	+	٠	+	+	+	•	٠	+	٠	٠	+	+	+	٠
CIRCULATORY SYSTEM																			_					
HEART	+	٠	+	٠	٠	+	+	٠	+	٠	+	•	+	+	+	+	+	+	+	+	+	+	+	+
DIGESTIVE SYSTEM									_										-					
SALIVARY GLAND		<u>t</u>	•	+	+		•	+		<u>+</u>	<u>+</u>	+	+	•	•	•	•	+	•	•	+	•	<u>+</u>	+
LIVER Hepatocellular adenoma Hepatocellular carcinoma Hemangiosarcoma	+	•	+ X	••	+	٠	•	* ×	+	+	+ * * *	•	•	•	•	+	•	*	•	•	•	٠	•	+
SILE DUCT	•	+	÷	•	+	+	+	•	+	+	+	•	+	+	+	•	•	٠	÷	•	+	+	+	+
GALLBLADDER & COPHION BILE DUCT	+	+	+	•	•	٠	٠	н	•	÷	+	+	М.,	•	+	٠	М.	+	H	N	•	٠	+	. М
PANCREAS	÷		+		+	•	•	+	+	+	+	+	٠	•	+	+	+	٠	+	•	•	٠	+	+
ESOPHAGUS	·		+	+	+	+	,	+	+	+	<u>.</u>	٠	+	•	*	•	•	•	+	÷	•	÷	+	•
STDMACH	±.	<u></u>	•	+	+	+	•	<u>.</u>	•	<u>.</u>	+	+	+	•	+	+	<u>*</u>	.+	٠	+		+	<u>+</u> _	<u>.</u>
SMALL INTESTINE	+	_ t	+	+	+	+	•	+	+	<u>+</u>	+	•		4	+	+	٠	+	*	<u>+</u>	+	+	<u>+</u> _	•
LARGE INTESTINE	+	٠	+	+	٠	٠	٠	+	+	+	+	٠	•	•	+	+	•	+	٠	+	+	٠	+	+
URINARY SYSTEM					-			-		_					-				-				-	
KIDNEY	+	+	+	•	•	+	+	+	+	<u>.</u>	<u>+</u>	+	+	+	•	•	+	÷	<u>.</u>	•	+	+	+	<u>+</u>
URIHARY BLADDER	+	+	+	٠	٠	+	+	+	+	+	٠	+	+	+	٠	+	+	+	٠	٠	+	٠	٠	٠
ENDOCRINE SYSTEM					· · · · ·											_	-							
PITUITARY	+	+	•	+	+	+	+	•	+	•	•	•	•	•	•	•	٠	•	÷	+	+	+	•	. <u>.</u>
ADRENAL	<u>+</u>	<u>+</u>	+	+	•	•	•	•	٠	<u>.</u>	+	•	•	•	•	•	+	+	•	+	+	+	+	+
THYROID Follicular-cell Adenoma	+	+.	+	+	+	•	•	+	ż	-	+	+	+	•	•	•	•	+	•	•	•	٠	+	•
PARATHYROID	•	•	٠	٠	+	+	+	+	٠	-	•	٠	-	+	•	•	•	٠	٠	•	٠	+	٠	+
REPRODUCTIVE SYSTEM									·										_					_
MAMMARY GLAND	4	н	M	N	N	N.,	N	N	•	N	н	Ν.,	N	۲	•	•	N	N	N	N	٠	N	<u>+</u>	N
TESTIS	+	•	<u>.</u>	•	+	٠	٠	٠	٠	+	÷	+	•	<u>.</u>	+	•	ŧ	٠	•	+	•	÷	<u>+</u>	+
PROSTATE NERVOUS SYSTEM	 	<u>+</u>	*	+	+	+	•	+	+	÷	+	÷	+	<u>.</u>	+	<u>+</u>	+	٠	*	+	+	•	<u></u>	•
BRAIN	+	+	•	+	÷	÷	•	•	÷	+	÷		•		•		•	•	•		•		+	•
ALL OTHER SYSTEMS	Ļ	-	<u> </u>		÷		<u> </u>	<u> </u>	<u>.</u>	<u> </u>	. <u>.</u>	-	•	·	·	-	*	*	_	<u>.</u>	•	+	<u> </u>	<u> </u>
ALL JIHER SYSTEMS Multiple organs NDS Fibrosarcoma Malio Lymphoma, histiocytic type	н	н	н	N	N	N	н	н×	н	н	N	н	н	н	н.	N	N	н	Ħ	N	н	н	н	N .

TABLE B3. INDIVIDUAL ANIMAL TUMOR PATHOLOGY OF MALE MICE IN THE TWO-YEAR FEED STUDY OF HC BLUE NO. 2: UNTREATED CONTROL

+: TISSUE EXAMINED MICROSCOPICALLY -: Required fissue not examined microscopically X: Tumor incidentolysis, no microscopic examination 4: Autoropsy, no autolysis, no microscopic examination 5: Animal MIS-Sexed

: NO TISSUE INFORMATION SUBMITTED C: Necropsy, no nistology due to protocol A: Autolysis M: Animal missing S: No Hecropsy Performed

TABLE B3. INDIVIDUAL ANIMAL TUMOR PATHOLOGY OF MALE MICE: UNTREATED CONTROL (Continued)

ANIMAL Number Weeks on	2	2	2	21	31	3	3	3	31	3	31	31	4	31	4		2	3		5	41	2		8	5	TOTAL
STUDY	0	6	6	ġ	6	6	6	51	1	61	3	91 81	0	6	6	9	7	5	91	01	0 6	0 6	2	21	91 31	TUMO
INTEGUMENTARY SYSTEM																				-					Π	
SKIN Squamous cell carcingma	+	+	+	+	+	+	•	+	+	+	+	+	+	+	+	+	•	+	<u>+</u>	+	+	+	+	+		50
SUBCUTANEOUS TISSUE Sarcoma, nos Fibrona Fibrosarcoma Hemangiosarcoma, unc prim or meta Neurilemoma	•	٠	•	٠	٠	٠	•	•	٠	٠	•	* ×	٠	٠	+ x	٠	×	٠	٠	٠	•	•	•	٠	+	50
RESPIRATORY SYSTEM		-								-															-+	
LUNGS AND BRONCHI Squamgus Cell Carcingma, metastat Alveolar/Bronchiolar Adenoma Alveolar/Bronchiolar Carcingma	•	•	•	•	•	•	•	•	•	•	•	+	•	•	* X	+	•	•	•	* ×	* x	•	•	•	•	50
TRACHEA	+	٠	٠	+	+	+	+	+	٠	٠	+	+	٠	+	+	+	+	+	+	٠	+	+	٠	+	+	50
EMATOPOIETIC SYSTEM										-									-	-						
BONE MARROW	+	.	٠	+	+	+	٠	+	<u>+</u>	÷	<u>+</u>	+	+	+	+	+	+	+	+	<u>+</u>	+	+	+	<u>+</u>		50
SPLEEN Hemangiosarcoma	•	+	٠	•	+	•	+	•	•	÷	+	•	•	•	•	+	+	•	•	٠	•	•	•	+	+	50
LYMPH NODES	+	•	+	+	+	+	٠	+	•	+	+	+	+	+	•	+	+	+	*	+	+	+	+	+	-+	50
THYMUS	+	٠	+	+	+	-	•	+	+	+	٠	+	+.	+	٠	+	+	+	+	٠	•	+	+	+	+	48
CIRCULATORY SYSTEM						-																			T	
HEART	•	٠	٠	٠	+	٠	٠	+	+	+	+	+	+	+	+	+	+	+	+	+	٠	•	+	+	+	50
DIGESTIVE SYSTEM																										
SALIVARY GLAND	+	+	•	÷	+	•	+	+	+	<u>.</u>	+	+	+	+	•	+	+	+		+	+	. <u>.</u>	+	<u>+</u>	*	4
LIVER HEPATOCELLULAR ADENOMA HEPATOCELLULAR CARCINOMA Hemangiosarcoma	×	+	•	•	+	×	•	+	+	+	+	+	+ ×	•	•	•	•	×	•	•	×	+	+	+	•	50
SILE DUCT	+		+	÷	•	. +	+	+	+	+	+	<u>+</u>	+	•	+	+	+	+	+	+	+	*	÷	+	+	51
GALLBLADDER & COMMON BILE DUCT	+	+	<u>.</u>	<u>+</u>	+	+	+	+	N	+	N		+	<u>+</u>	•	*	+	+	+	+	+	+	+	М	•	50
PANCREAS	+	+	+	. t	+	+	•	+	+	+	+	•	+	+	•	•	÷	+	+	+	+	+	+		+	56
ESOPHAGUS	+	+	•	+	+	+	+	+	+	•	+	. +		•	•	+	÷	+	•	+	+	+	+	+	+	
STOMACN	÷	+		•	+	+	+	+	+	+	+	+	+	+	÷	+	+	÷	•	+	+		+	٠	+	
SMALL INTESTINE	ŀ	+	+	+	+	+	+	+	÷	+	٠	+	+	+	+	•	•	+	•	+	+	÷	+	-	+	48
LARGE INTESTINE	+	+	+	٠	٠	+	+	٠	+	÷	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	50
URINARY SYSTEM						·····								-											-+	
KIDNEY	+	+	+	+	÷	*	+		<u>.</u>	÷	+.	+	+	+	•	٠	٠	+	÷	<u>+</u>	<u>+</u>	+	+	÷	+	50
URINARY BLADDER	•	٠	٠	+	٠	٠	٠	+	+	٠	٠	+	+	+	٠	+	+	٠	٠	٠	٠	+	٠	+	+	30
ENDOCRINE SYSTEM														<u> </u>							<u> </u>					<u> </u>
PITUITARY	<u>+</u>	<u></u>	٠	•	+	+	+	٠	+	+	-	-	•	+	+	٠	+	•	+	+	<u>+</u>	<u>+</u>	<u>+</u>	<u>+</u>	+	46
ADRENAL	<u>+</u>	<u>.</u>	+	+	٠	•	•	+	+	•	+	٠.		•	+	٠	•	•	•	<u>+</u>	*	+	+	•	-+	50
THYROID Follicular-cell Adenoma	+	+	٠	٠	•	•	•	+	•	+	•	•	•	•	•	•	+	٠	ż	+	•	•	•	•	•	44
PARATHYROID	•	+	٠	٠	+	-	-	٠	-	٠	•	+	-	-	+		•	٠	-	+	+	٠	+	•	+	34
REPRODUCTIVE SYSTEM																			_						-	
MAMMARY GLAND	- M -	N	N	N	N	N	N	8	N	<u>N</u>	N.	•	N	н.	N	<u>N</u>	M .	Ν.	<u>+</u>	N	N	+	<u>N</u>	N	+	50
TESTIS	+	+	۰.	+	+	÷	•	+	+	+	<u>.</u>	+	•	+	+	•	<u>+</u>	•	÷	+	<u>+</u>	<u>+</u>	+	+	+	30
PROSTATE VERVOUS SYSTEM	<u> </u>	+	•	•	+	. *	•	<u>+</u>	+	+	•	+	•	•	•	•	+	<u>+</u> ·	*	+	÷	<u>.</u>	+	<u>+</u>	+	
BRAIN	•	÷	٠	+	+	•	+	•	•	•	÷	•	•	÷	•	•	÷	•	•	•	•	٠	+	•	+	50
ALL OTHER SYSTEMS																-					,				+	
MULTIPLE ORGANS HOS Fibrosarcoma Malig.lymphoma, Histidcytic type	N	H	н	н	H	н	н	н	N	H	н	N	н	H	H	N	н	N	N	N	N	N	H	N	H	50

* ANIMALS HECROPSIED

ANTMAL NUMBER	0	0	Į	-	0	0	9	0	01	1			1	1		1	1	1	1	2	2	2	2	21
WEEKS ON STUDY		•		1	;		1		91	1	:	;	:	1	ţ	1	1	1	ļ	1	3	9	-	
INTEGUMENTARY SYSTEM	- 51	51	- 11	- 11	. 41	5	51	51	71	51	1	21	21	21	81	1	<u>si</u>	31	91	51	91	- 11	-11	91
SKIN Fibroma • Fibrosarcoma -	·	٠	٠	٠	•	×	•	٠	•	•	٠	•	•	•	•	•	•	•	٠	•	•	٠	٠	٠
SUBCUTANEDUS TISSUE Fibroyarcoma Fibroyarcoma Menangioya Neuriletoma	•	* ×	* x	• ×	٠	•	* x	٠	٠	٠		* x	•	*	٠	•	•	•	•	×	٠	٠	•	* x
RESPIRATORY SYSTEM			•••••								_		_				_					_		
LUNGS AND BRONCHI Hepatocelular Carcinoma, metasta Alveolar/bronchiolar Adenoma Alveolar/bronchiolar Carcinoma Sarcoma, Nos, metastatic Fibrosarcoma, metastatic	•	•	•	×	* ×	•	•	* ×	* ×	•	•	•	×	•	•	• ×	×	•	•	• ×	•	• ×	•	•
TRACHEA	•	٠	٠	٠	٠	٠	٠	٠	٠	٠	٠	٠	•	٠	٠	٠	٠	٠	٠	•	٠	•	٠	*
ENATOPOLETIC SYSTEM						_					_		-				_					_		
SONE MARROW	•	٠	٠	•	•	•	÷	•	•	•	٠.	•	•	÷	÷	+	-	٠	•	٠	•	•	<u>+</u>	+
SPLEEN	+	•	٠	+	+	+	+	•	•	+	•	<u>+</u>	•	+	+ .	. _	•	•	٠	+	•	•	+	+
LYNPH HODES	+	٠	•	•	•	•	•	+	+	•	•	•	•	•	+	•	•	٠	٠	٠	•	•	٠	+
THYMUS	٠	٠	٠	٠	•	٠,	•	• -	٠	•	•	٠	•	•	٠	٠	•	٠	٠	•	٠	٠	٠	٠
TREULATORY SYSTEM											_	•											-	
HEART IGESTIVE SYSTEM	•.	•	*	•	•		•	•	+	+	<u>+</u>	•	•	•	٠	•	•	+	•	•	•	•	٠	•
SALIVARY GLAND	•	•	٠	٠	•	٠	•	•	•	•	•	•	•	•	•	٠	•	•	•	•	•	•	•	٠
LIVER HEPATOCELLULAR ADENOMA HEPATOCELLULAR CARCINOMA HEPATOCELLULAR CARCINOMA	•	* x	٠	*	٠	•	•	•	•	•	•	•	* : x	×		* ×	+ * *	•	+ x	•	•	+ x	×	٠
SILE DUCT		•	•	•	+	•	•	+	•	+	•	•	• •	•	•	•	•	+		÷	÷	•	÷	+
GALLBLADDER & CONNON BILE DUCT		•	•	•	•	•	•	•	•	•	+	•	N .		N	+	N	•	+	•	•	•	÷	+
PAHCREAS	+	+	•	٠	•	•	+	+	÷	•	•	•	•	•	•	+	•	+	•	÷	•	+	+	+
ESOPHAGUS	+		٠	•	•	•	•	+	+ .	•	•	•	•	•	•	•	•	•	•	•	•	•	•	+
STOMACH	•	•	•	٠	•	+	•	•	÷	•	+	•	• . •	•	•	+	•	٠	•	•	•	+	•	+
SMALL INTESTINE	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	÷	+
LARGE INTESTINE Adengmatous Polyp, Nos	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	٠	•	•	•	•	•	•
RINARY SYSTEM																								
KIDNEY	+	٠	٠.,	*	٠	•	+	<u>.</u>					<u>.</u>					÷	•	+	<u>+</u>	+	•	+
URINARY BLADDER	*	•	•	•	•	•	•	•	•	•	•	•	•	•	+	+	•	•	•	•	•	•	•	•
NDUCRINE SYSTEM																								
PITUITARY	+	•	•	•	•	+	•	+	•	•	•	•	<u> </u>	•						+	<u>.</u>	<u>+</u>	•	+
ADRENAL Cortical Adenoma Pheochromocytoma	<u>.</u>	•	•	•	•	·	• x	•	•	•	•			·	•		×	•	•	•	•	·	•	•
THYROID Follicular-CELL ADENOMA	•	٠	٠	•	٠	•	•	•	•	•	•	•	•	•	•	•	÷	•	•	•	•	-	* ×	•
EPRODUCTIVE SYSTEM	+	-	•	*	•	٠.	•	÷	-	•	•		•	•	•	•	<u>.</u>	*	*	*	٠	•	*	٠
HARMARY GLAND	N	N	N.	N	N	N	N.	N	•	N	N			L	N		١.	N	•	N	N	N	N	N
TESTIS	•	+	•	•	•	•	•	•	•	+	•	•			• .	•	•	٠.	•	•	٠	•	•	+
PROSTATE	•	٠	٠	٠	٠	٠	•	•	•	•	•	•	• •	•	•	•	٠	•	•	•	•	٠	٠	٠
ERVOUS SYSTEM			_		-						-	_		_			-					-		
SRAIN	٠	٠	٠	٠	٠	٠	+	•	٠	•	•	•	• •	•	•	•	•	٠	•	•	٠	٠	٠	٠
LL OTHER SYSTEMS	-		_					-					_						-			-		-
MULTIPLE ORGANS NOS Sarcona, NOS Firrosarcona, metastatic Mesotheliona, malionant Neurilemona, malionant Malio.lymphoma, lymphocytic type Malio.lymphoma, mistiocytic type Malio.lymphoma, mistiocytic type Malio.lymphoma, mistiocytic type	н	N X	N	M		N X	н :	н	M	N	N)		• •		N	N 1	M		×	N	N .	NX	N	N

TABLE B3. INDIVIDUAL ANIMAL TUMOR PATHOLOGY OF MALE MICE IN THE TWO-YEAR FEED STUDY OF HC BLUE NO. 2: LOW DOSE

HC Blue No. 2, NTP TR 293

AN IMAL Xumber	2	2	2	21	3	3	3	3	31	3	3	3	3						1				3	TOTAL
WEEKS ON Study		1	21	0	2	81	0 2	9	01	3	1	1	0		!	2	0	8	5	-	2	1		TUMO
NTEGUMENTARY SYSTEM			-11	يو	<u> </u>		21, 2			_/]	21	21	2.					_21	- 11	- 14	-21	21	4	
ŠKIN Fibroma Fibrosarcoma	·	•		•	• ×	•	•••	•	•	•	•	A	•	• •	•	M	•	•	•	•	+	×	•	44)
SUBCUTANEOUS TISSUE Fibroma Fibrosarcoma Hemanoioma Neurilemoma	×	٠	٠	•	•	•	• •	٠	٠	•	* ×	•	•	• •	* x	Ħ	•	+ x	٠	٠	+ x	٠	·	48
ESPIRATORY SYSTEM	 						_												-		-	_	+	·
LUNGS AND BRONCHI Hepatocilular Carcinoma, metasta Alvedlar/Bronchiglar Adenoma Alvedlar/Bronchiglar Carcinoma Sarcoma, Nos, metastatic Fibrosarcoma, metastatic	·	•	•	•	•	•	••	•	•	•	* ×	•	•	• •	•	M	•	• ×	•	•	•.	•	×	48
TRACHEA	•	٠	٠	•	•	•	• •	٠	+	٠	•		• •	•	٠	Ħ	٠	٠	٠	٠	٠	•	+	47
MATOPOLETIC SYSTEM			_													_					_	-	+	
BONE MARROW	-	+	+	<u>+</u>	٠	<u>+</u>	• •		+	٠	•		<u>.</u>	•	+		+	+	+	. t	٠	+		45
SPLEEN	•	-	٠	+	÷	+	• •	+	+	+	•	٨	•	• •	•		+	•	+	٠	•	•	•	47
LYMPH NODES	•	-	+	<u>+</u>	•	•	• •	+	+	+	*	A		+	+		•	+	+	+	+	+	+	67
THYMUS	•	-	٠	•	•	•	• •	+	٠	٠	•	A -	• •	• •	٠	M	٠	٠	٠	٠	+	+	+	47
RCULATORY SYSTEM					-								_						-		-		+	_
HEART	•	•	+	+	٠	•	• •	•	•	+	•			•		#	•	٠.	+	۰.	<u>+</u>	•	•	
SALIVARY GLAND		•	•	•	•	•				•	•					-		•			•			48
LIVER		•	•	•	<u>.</u>		<u> </u>		•	÷	*	A .			•	M	÷	<u> </u>	•	•	•	÷	Ť	48
NEPATOCELLULAR ADEMOMA Hepatocellular carcinoma Hepatoslastoma	ľ	•	×	•					x		×			. x			×		·		×			
BILE DUCT	•	+	+	•	•	•	• •	•		+	•			•	+	M		+	+.	+	•	•	•	
GALLBLADDER & COMMON BILE DUCT	+	. N	N	N	+	• •	h H	. •	٠	н	•		Þ	•	+		+	٠	+	+	•	•	WI.	
PANCREAS	•		+	+	+	•	• •	+	+	•	•			•	•	M	•		.+	•	•	+	+	46
ESOPHAGUS	+	+	•	+	•	•	• •		+	•	•			•	•	M.,	•		•		•	•	•	47
STOMACH	•	•	+	•	•	••	• •	•	+	•	•			•	٠	M	•	•	•	•	•	•	•	47
SMALL INTESTINE	•		•	•	•	•	•	•	•	٠.	•			•	•	M	•	•	٠	•	•	•	•	45
LARGE INTESTINE Adenomatous Polyp, Nos	•	٠	٠	٠	٠	•	• •	٠	٠	٠	•	A -	• •	•	•	M	٠	•	٠	٠	•	٠	•	47
INARY SYSTEM					_																		T	
KIDNEY	+	<u>.</u>	+	<u>.</u>	•	<u>.</u>	•	•	•	•	•	<u> </u>	•	•	t	M	+	+	*	•	+	+	+	48
URINARY SLADDER	+	-	٠	٠	٠	• •	• •	+	٠	•	•	A .	• •	•	+	M	+	•	+	•	•	•	+	47
DOCRINE SYSTEM																							Τ	
PITUITARY	+	•	•	•	•	• •	+	+	+	+	+	A .		+	+	м	•	+	•	•	•	•	+	47
ADRENAL Cortical Adenoma Phedchromocytoma	٠	-	•	•	•	• •	• •	·	٠	•	•	A -		•	•	M	•	•	•	•	•	•	•	47
THYROID Follicular-cell Adenoma	٠	•	•	•	•	•	• •	•	•	٠	•	A -	• •	-	•	M	•	٠	•	-	•	•	•	45
PARATHYROID PRODUCTIVE SYSTEM	+	•	+	•	•	• •	•	•	•		-	A		_	•	М.	•	+	+	•	+	•	+	35
MANMARY GLAND	N	N	•	N	•	•	I.N	N	N	N	N	. ,	L N	N		M	N	N	N	N	•	N		481
TESTIS	+	+	•	÷	•		•	+	•	-		A				M					•	•	•	48
PROSTATE	+	÷	÷	•	•	• •	• •	+	+	+	+									+	•	+	•	48
RVOUS SYSTEM								_													-		+	
BRAIN	٠	٠	•	٠	•	• •	• •	٠	٠	٠	•		• •	•	٠	M	٠	٠	٠	٠	٠	٠	•	48
L OTHER SYSTEMS	-																						+	
MULTIPLE ORGANS NOS Sarcoma, Nos Tibrosarcoma, metastatic Mesotneligna, malignant Neurilendma, malignant maliglymphoma, ymphogytic type Maliglymphoma, histiggytic type	N	N	N	N		N N X	N 1	N	N		N			N X	N	M	×	×	N	N	N	N	N	48 H

TABLE B3. INDIVIDUAL ANIMAL TUMOR PATHOLOGY OF MALE MICE: LOW DOSE (Continued)

* ANIMALS NECROPSIED

INTEGLATOR TAY STATE 11 51 51 51 51 51 51 51 51 51 51 51 51 5	Animal Humber	0	21	ŝ	ě	5	ġ	2	8	9	1	1	1	3	1	1	1	11	11	11	21	21	2	21	21
ULUUMAGUS TISUU EXCELLUNA CONTRACTOR CONTRA	WEEKS CH Study		0			91	9	1	01		1	8	1	0	6	1	1	1		-	0	0	91	-	8
TARGELONG TOTAL X	NTEGUMENTARY SYSTEM	-21	-21	21	- 21			- 21	- 21	21		. 11	21	21	91	21	21	21	21	21	21	- 21	- 21	- 12	-21
37 SEPARCENA X X 1000000000000000000000000000000000000	GARCINOMA, NOS Sarcoma, NOS Fibroma Fibrosarcoma Riabomyosarcoma	+ x	•	٠	٠	•	+ ×	٠	٠	٠	+ ×	٠	٠	٠	•	٠	٠	• ×	•	٠	+ x	• ×	٠	٠	×
ESPIRATORY VYTEM X X X X LUNGS ADD. MUAAT CARE INDIAL, METATATA ACCORD. MUAAT CARE INDIAL, METATATA ACCORD. MUAAT CARE INDIAL, METATATA ACCORD. MUAAT CARE INDIAL, ACCORD. MUAAT CARE INDIAL, ACCORD. MUAAT CARE INDIAL X X X ACCORD. MUAAT CARE INDIAL, METATATA ACCORD. MUAAT CARE INDIAL X X X X TAROPALENT C TYPEN X X X X X X SALES LIVERMORAL, LIMPHORYTIC TYPE X X X X X X TAROPALENT C TYPEN X X X X X X X TAROPALENT SYSTEM X <td>OSTEDSARCOMA Neurilemoma</td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td>×</td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td>x</td> <td></td> <td></td> <td></td> <td></td> <td></td>	OSTEDSARCOMA Neurilemoma									×										x					
If Products Construmed and the second sec			_									_								_				_	_
EMATGPOLETIC SYSTEM SOME ARARGM SOLUTION SYSTEM ALCOLATIONAL LYMPMOCYTIC TYPE CALCULATION ADDRESS ACCOMAL ADDR	HEPATOCELLULAR CARCINOMA, METASTA Alveolar/sronchiolar Adenoma Alveolar/sronchiolar carcinoma Sarcoma, nos, metastatic	·	•	•	•	×	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	+ ×	•	٠
BOME MARROW	TRACHEA	•	٠	٠	٠	٠	٠	٠	٠	٠	٠	٠	٠	• `	٠	+	٠	٠	٠	٠	٠	٠	+	+	٠
SPLES.LUMPHONA.LUMPHORYTIC TYPE • • •	EMATOPOLETIC SYSTEM						_																		
MALES.LYMPHOMA.LUMPHOFUE TYPE JATEMAN ADD. <	SONE MARRON	+	+	+	<u>.</u>	•	+	٠	•		+	+	+	٠	٠	٠	÷	٠	•	+	+	+	+	+	٠
A1600%	SPLEEN Malig.lynphoma. Lymphocytic type .	·	•	•	•	•	•	•	٠	٠	•	٠	٠	•	•	٠	٠	•	•	٠	+	+	•	•	٠
IRCULATORY SYSTEM	SARCOMA, HOS, METASTATIC	•	•	•	٠	٠	+ x	•	•	•	•	٠	•	•	•	•	•	•	٠	•	•	٠	•	٠	•
HEART L	THYMUS	+	٠	٠	٠	٠	٠	٠	٠	٠	٠	•	٠	٠	٠	٠	+	٠	٠	٠	٠	٠	٠	٠	٠
BLOOD VEBSIS N	TROULATORY SYSTEM	<u> </u>					_			_					_	-						_			_
Idestive system Idestive system Idestive		+		•	•	•	•	•	•	•	•	• '	•	•	•	•	•	<u>+</u>	•	•	•	•			•
SALIVARY GLAND	BLOOD VESSELS Alveglar/Bronchiglar CA, Invasive	N	N	N	N	м	M	N	м	N	N	N	H	N	M	M	M	M	×	N	N	N	X	×	N
LIVER HEAMSCOREA SILE DUCT GALLBLADDER & COMMON BILE DUCT ALLBLADDER & COMMON BILE DUCT ALLBLADDER & COMMON BILE DUCT PARCELAS STOTACM STOTACM STOTACM STOTACM STOTACM STOTACM STOTACM STOTACM C STOTACM STOTACM C STOTACM C STOTACM C STOTACM C STOTACM C STOTACM STOTACM C STOTACM C STOTACM STOTACM STOTACM STOTACM C STOTACM STOT	IGESTIVE SYSTEM					_																			
MERATOCELLULAR ADEMORMA x <td>SALIVARY GLAND</td> <td>+</td> <td>•</td> <td>+</td> <td>+</td> <td>+_</td> <td>•</td> <td>+</td> <td>•</td> <td>+</td> <td>+</td> <td>+</td> <td>٠</td> <td>+</td> <td>+</td> <td>•</td> <td>•</td> <td>•</td> <td>+</td> <td>•</td> <td>٠.</td> <td><u>+</u></td> <td>+</td> <td>+</td> <td>+</td>	SALIVARY GLAND	+	•	+	+	+_	•	+	•	+	+	+	٠	+	+	•	•	•	+	•	٠.	<u>+</u>	+	+	+
BILE DUCT • • • • • • • • • • • • • • •	HEPATOCELLULAR ADENOMA Hepatocellular carcinoma	٠		٠	٠		•		٠	•	٠	+ ×	*	•	•	*	•	* ×	×	•	•			٠	٠
GALLBLADDER & COPMON BILE DUCT		•			•	•	•	•		٠	•	•	•	•	•			÷		•	•		•		
PARCREAS									•						N	•									
ESOPMAGUS • • •		÷.	Ť	Ť.	÷		÷		Ť.		÷		÷	÷.		÷	-	ž	ž	<u> </u>	÷	÷	<u>.</u>		Ť
STOMACH SQUARDUS CELL PAPILLOMA		Ť	ž		1	Ť		Ť	Ť						ž			Ī.	Ť	Ť	<u> </u>	Ť	Ť	Ť	Ť
SMALL INTESTINE • • • • • • • • • • • • • • •	STOMACH	÷	•			•		•	÷									•	÷						÷
LARGE INTESTINE • • • • • • • • • • • • • • • • • • •					<u> </u>		4							*											-
RIMARY SYSTEM		Ť	ž			ž	ž.		÷				_						- <u>-</u>						
KIDNEY L + + + + + + + + + + + + + + + + + + +		Ť.		·	<u> </u>	<u> </u>		·		·	·	· .	<u> </u>	<u> </u>	<u> </u>	·	·	<u> </u>	<u> </u>	_	<u> </u>	Ľ.	·	<u> </u>	<u> </u>
URINARY SLADDER • • • • • • • • • • • • • • • • • • •																									
NDUCAINE SYSTEM PITUITARY ADRENAL CORTICAL ADEHOMA PROCEPTIONA THYROID FOLLIGULAR-CELL ADENOMA N N N N + + + + + + + + + + + + + + +			÷			÷	÷	•				<u> </u>	<u>.</u>	• •	•	<u>.</u>	÷	<u>.</u>		•	<u>.</u>	<u>*</u>	•	÷	•
PITUITARY L L L L L L L L L L L L L L L L L L L		<u> </u>	<u> </u>		-	_	<u> </u>	<u> </u>	-	<u> </u>	<u> </u>	<u> </u>	<u> </u>	-	-	<u> </u>	<u> </u>	<u> </u>	-	•	-	<u> </u>	•	•	<u> </u>
ADRENAL CORTICAL ADENDMA PHECOMPORTOTIONA THYROID FOLLIGULAR-CELL ADENOMA PARDONCOTTOMA 2 * * * * * * * * * * * * * * * * * * *	,																								
THYROID FOLLIGULAR-CELL ADENOMA * * * * * * * * * * * * * * * * * * *	ADRENAL CORTICAL ADENOMA	•	•	•	•	•	•	•	•	•	•	•	•	+	•	•	•	+	•	•	+	+	•	÷	÷
PARATHYROID + + + + + + + + + + + + + + + + + + +	THYROID	•	•	÷	•	+	÷	+	•	٠	٠	•	+	•	÷	•	•	•	٠	•	+	<u>×</u> +	+	•	÷
PRODUCTIVE SYSTEM N N N N + + N N N + N N N N N N N N +	PAPATHYPOTO	•	•	÷	٠	•	•	•	-	٠		•	•	-		•	•	•	•				•	•	+
TESTIS + + + + + + + + + + + + + + + + + + +																									
PROSTATE + + + + + + + + + + + + + + + + + + +		<u> </u>								-			_					_				_			<u>*</u>
ERVOUS SYSTEM SRAIN + + + + + + + + + + + + + + + + + + +		<u>.</u>																							•
SRAIN + + + + + + + + + + + + + + + + + + +	-	•	•	•	*	•	•	• .	•	•	•	•	•	•	•	٠	•	•	•	•	•	•	+	•	•
PECTAL SENSE ORGANS VARDERTAN GLAND ADENOMA, NOS DDY CAVITIES PERTONEUM FIROSARCOMA, INVASIVE IN N N N N N N N N N N N N N N N N N N																									
VARDERIAN GLAND N N N N N N N N N N N N N N N N N N N		•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	٠	•	•	•	+	•	*
PERITOHEUM PERITOHEUM FIBROSARCOMA, INVASIVE X CL OTHER SYSTEMS WIITTEFE OPRAME MOS	HARDERIAN GLAND	н	N	N	N	N	N	N	H	N	н	N	н	N	N	н	N	N .	N	H	N	н	N	N	N
FIBROSARCOMA, INVASIVE X									_				_						-						
	PERITONEUM Fibrosarcoma, invasive	N	N	N	N	N	××	н	N	N	N	н	N	N	N	H	н	N	N	N	н	N	н	н	H
		N	н	N	H	H	N	н	N	н	N	н	я	N	N	N	H	H.	N	н	н	н	N	N T	н.

TABLE B3. INDIVIDUAL ANIMAL TUMOR PATHOLOGY OF MALE MICE IN THE TWO-YEARFEED STUDY OF HC BLUE NO. 2: HIGH DOSE

TABLE B3. INDIVIDUAL ANIMAL TUMOR PATHOLOGY OF MALE MICE: HIGH DOSE (Continued)

.

ANIMAL Number Weeks on	21	21	21	21	31	3	3121	3	31	31	31	31	31	3			01 41 21							41	51	TOTAL
STUDY	9	5	5	ġ	ŝ	ġ	ŝ	1	1	ġ	ġ	?	3	2		5	ŝ	ž	2	ġ	ŝ	ġ	ġ		3	TUMORS
INTEGUMENTARY SYSTEM	Γ																								Τ	
SUBCUTANEOUS TISSUE Carcinoma,nos Sarcora, nos fibroma fibrosarcoma	×	•	• x	٠	•	• ×	٠	• ×	•	٠	٠	•	•	•	•	•	•	•	•	•	•	•	• ×	•	•	49# 1 3 6 1
RHÀBDGHYGSÀRCOMA Osteosarcoma Neurilemoma, Malignant Neurilemoma, Malignant				x															x		×					1221
RESPIRATORY SYSTEM	1								-																	
LUNGS AND BRONCHI Hepatoceliular Carcinoma, metasta Alveolar/sronchiolar Adenoma Alveolar/sronchiolar Carcinoma Sarcoma, Nos, metastatic Fibrosarcoma, metastatic	* ×	•	* ×	* ×	•	× ·	•	٠ ×	•	•	•	•	•	•	•	•	•	•	•	•.	* ×	•	•	* ×	•	49 1 2 4 1 1
TRACHEA	+.	٠	٠	+	٠	٠	٠	٠	A	٠	٠	٠	٠	٠	٠	٠	•	•	٠	٠	٠	٠	•	٠	+	49
HEMATOPOIETIC SYSTEM	\vdash	-								_						-	-		_						+	
BOHE MARROW	Ŀ	+.	<u>.</u>	+	•	•	ŧ.	•	۸	+	•	•	•	+	•	٠	٠_	•	+	+	•	•	+	•	·	- 49
SPLEEN Malig.lymphoma, lymphocytic type	ŀ	٠	•	•	•	•	•	•	A	•	•	•	•	•	٠	* ×	•	•	•	•	•	٠	•	•	4	49 1
LYMPH NODES Sarcoma, Hos, metastatic Fibrosarcoma, metastatic	×	•	•	•	•	•	•	• x	A	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	49 1 2
THYMUS	+	٠	٠	٠	٠	٠	٠	٠	4	•	•	٠	٠	•	٠	٠	٠	٠	٠	٠	٠	٠	٠	۰.	+	49
CIRCULATORY SYSTEM	-			_										_						_					1	
HEART	<u> </u> ⁺	•	٠	+	+	•	۰	•	۸	•	•	٠	+	+	+	÷	•	٠.	•	٠	÷	•	•	+	4	
BLOOD VESSELS ALVEDLAR SRONCHIGLAR CA, INVASIVE	M	N	N	M	ж	N	N	ж		N	Ħ	N	N	H	N	N	H	M	N	N	N	H	Ħ	H	H	49 8
DIGESTIVE SYSTEM																									T	
SALIVARY GLAND	+	•	<u>+</u>	•	<u>.</u>	<u>*</u>	<u>*</u>	•	<u>.</u>	<u>.</u>	<u>.</u>	÷	<u>*</u>	<u>*</u>	•	<u>•</u>	<u>*</u>	• •	<u>*</u>	<u>*</u>	<u>*</u>	<u>.</u>	÷	<u>*</u>	+	
LIVER Hepatocellular Adenoma Hepatocellular Carcinoma Hemangiojarcoma	ŀ	×	×	××	•	•	×	•	<u> </u>	•	•	•	-		* ×	•	•	•	•	×	•	•		*××	1	49 12 1
SILE DUCT	•	. •	•	+	+	+	+	+		+	•	٠	•	+	+	÷	•	÷	٠.	•	٠	÷	•	•	•	. 49
GALLBLADDER & CONMON BILE DUCT	Ŀ	٠	٠	+.	. +	•	+	+		•	•	•	N	+	+	+	•	•	÷	•	•	•	•	÷ · .	•	498
PANCREAS	+	÷	<u>.</u>	+	٠	4	•	•		٠	+	•	•	•	+	•	•	•	•	٠	•	•	•	+	4	49
ESOPHAGUS	+	+	+	+	*	•	•	+ .		٠.	+	<u>+</u>	+	+	•	+	•	٠.	<u>.</u>	•	+	•	٠	•	+	49
STOMACH Squahous Cell Papilloma	•	•	•	٠	•	•	•	÷.	A	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	49 ₂
SMALL INTESTINE	÷	<u>.</u>	<u>.</u>	÷	<u>.</u>	<u>.</u>	<u>.</u>	•	<u>.</u>	•	<u>*</u>	•	<u>.</u>	÷	<u>.</u>	<u>.</u>	• •	<u>.</u>	•	<u>.</u>	•	•	÷	•	1	- 48
LARGE INTESTINE	•	•	<u>.</u>	•	•	<u>.</u>	<u>•</u>	<u> </u>	_	<u>.</u>	•	<u>.</u>	•	·	•	•	·		•	•	<u> </u>	•		·	1	49
URINARY SYSTEM		•												. ·	٠											49
KIDHEY URINARY BLADDER		÷		÷	<u>.</u>	÷	<u>.</u>	÷	<u>.</u>	÷	÷	÷	÷			•	÷	<u>.</u>	÷	÷	•	•	÷	÷	Ì	48
ENDOCRINE SYSTEM	Ļ	-							_									_		_	_		_		-	
PITUITARY		•	٠	•	٠	•	٠	٠	A	٠	•	٠	•	•	•	•	÷	•	÷	•	•	•	٠	÷	•	49
ADRENAL Cortical Adenoma Pheochromocytoma	•	٠	•	٠	٠	•	•	٠	4	٠	•	٠	٠	٠	•	•	•		* ×	•	•	•	•	•	•	49
THYROID Follicular-Cell Adenoma	•	٠	÷	٠	٠	٠	٠	٠	A	٠	٠	٠	÷	٠	٠	٠	٠	•	٠	٠	٠	•	•	•	·	49
PAPATHYROTO			+	•	÷	•	٠	•		٠	+	٠	•	•	•	•	•	•	-		•	•	٠	•	•	
REPRODUCTIVE SYSTEM																										
MAMMARY GLAND	+	<u>N</u> .		<u>N.</u>	<u>N</u>			<u>N</u>					_	<u>N.</u>						<u>N</u>	*	<u>*</u>	*	+		<u>498</u>
TESTIS	+ •	÷	÷	÷	•		_	÷	<u>A</u>							+			_		<u>.</u>					49
PROSTATE	Ŀ		-		-	<u> </u>	-	<u> </u>		·	-	-						<u></u>	· .					_	+	
BRAIN		٠	٠	٠	•	•	٠	•		•	•	•	•	•	•	•	•	•	•	٠	•	•	٠	•	•	49
SPECIAL SENSE ORGANS	-							-											_	_		_			+	
HARDERIAN GLAND ADEHOMA, HOS	*	×	X	N	N	H	N	н	•	N	M	N	N	н	N	N	н	N	H	N	×	×	N	N	N	498 1
SODY CAVITIES			-																	_			-		1	
PERITOHEUM FIBROSARCOMA, INVASIVE	N	H	×	N	ж	N	N	N	۸	N	N	N	м	N	N	H	H	N	H	N	N	×	N	N	N	492
ALL OTHER SYSTEMS Multiple organs nos malig.lymphoma, lymphocytic type malig.lymphoma, mistiocytic type maliganat lymphoma, mixed type typed type	N	N X	Ħ	N	N	н	N	N	A	N	N X	N X	H	N	N	N			N X	N	N	N	N	N	N	49# 6 2

* ANIMALS NECROPSIED

AN IMAL Number	0	9	0	0	-	0	9	0	0	1		11	1	1	1	1	1	1	0	2	2	21	2	2	2
WEEKS ON Study		ę	0	-1		0	, ,	7	0	0 4 3	2	81	8	2	01			01	-1	8	01	01	4	0	
LESPIRATORY SYSTEM	1		~				_																		
LUNGS AND BRONCHI Hepatocellular carcinoma, metasta Alveolar/Sronchiolar carcinoma	Ŀ	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	×	•	•
TRACHEA	+	٠	+	٠	+	+	٠	٠	٠	٠	٠	٠	+	٠	٠	٠	٠	٠	٠	٠	٠	٠	+	٠	•
REMATOPOTETIC SYSTEM	-																_								
SONE MARROW	<u> </u> +	٠	+	+	+	•	•	•	<u>+</u>	*	•	+	<u>+</u>	•	•	+	•	+	•	+	•	•	•	•	<u>.</u>
SPLEEN	┝┷	•	•	*	+	•	.	.		+	*	*		+	•	•	•	+	+	•	•				
LYMPH NODES	├		+	٠	+	+		+	*	<u> </u>	*	*	<u>.</u>	+	*	*	•	<u>.</u>	٠	٠	+	+	+	+	
THYMUS	•	+	•	•	•	*	+	•	•	+	+	+	+	•	*	•	+	•	•	•	+	•	+	•	•
TRCULATORY SYSTEM																				_					_
HEART	+	*	•	•	+	+	+	+	•	•	+	*	+	•	+	•	.*		•	+	•	+	+	*	1
JEGESTIVE SYSTEM																									
SALIVARY GLAND	┝	•	*	•	*	*	*	<u>.</u>	*	*	<u>+</u>	*	•	*	+	+	<u>+</u>		+	+	<u>.</u>	+	*	*	
LIVER Hepatocellular adenoma Hepatocellular carcinoma	Ľ	•	•	•	•	•	×	•	•	•	×	•	•	•	•	•	•	•	•	•	×	•		•	
SILE DUCT	<u> </u> *	•	+	•	+		٠	•	•	.+	•	+	•	•	+	+	+	+	+	+	+	٠	•	•	-
GALLBLADDER & CONNON BILE DUCT	+	٠	•	٠	•	+	+	+	*	N	+	+	+	•	٠	+	+	٠	+	N	+	+	•	+	
PANCREAS	+	+	<u>.</u>	+			*	. <u>*</u>	÷	*	*	*	+	*	*	*	*	*	+	•	+	+	. +	*	_
ESOPHAGUS	*	•	+	<u>+</u>	+	•	+	*	+	*	<u>*</u>	+	*	*	•	<u>+</u>	*	•	*	*	+	•	<u>+</u>		
STOMACH Squamous Cell Papilloma	Ļ	•	•	•	•	•	•	•	•		•	•		•	•	•	•	•	•	•	•	•	•	•	
SMALL INTESTINE Adenomatous Polyp, Hos	• •	<u>.</u>	÷	<u>.</u>	<u>.</u>	<u>+</u>	<u>.</u>	<u>.</u>	<u>.</u>		<u>.</u>	• •		•	• •	<u>*</u>	• •	<u>+</u>	•	<u>.</u>	÷	<u>.</u>	<u>.</u>	<u>*</u>	-
LARGE INTERTINE	•	<u>.</u>	<u> </u>	÷		<u> </u>			<u>.</u>	-		<u>.</u>	<u> </u>	÷	•	-	·	<u> </u>		_	<u> </u>	<u> </u>	<u> </u>		_
RENARY SYSTEM																									
KIDNEY . URINARY BLADDER		÷	•	•	•	•	÷	•	÷	÷	•	•		•	•	•	•	•	÷	•	+	÷	<u>.</u>	•	<u>تب</u> ر ہ
ADDCRINE SYSTEM													-										-		_
PITUITARY Adenoma, Nos	•	·	٠	+	٠	-	٠	•	÷.	٠	•	٠	•	•	•	÷	÷	•	•	•	* *	٠	•	٠	•
ADRENAL .	•	٠	. +	+	٠			+	.*	•	٠	•	+	•	•	•	٠	٠	٠	•	٠	+	٠	٠	
THYRGID Follicular-Cell Adenoma Follicular-Cell Carcingma Cystadenoma, Mos	•	٠	٠	•	•	٠	٠	٠	+ x	-	٠	٠	٠	•	٠	٠	* x	٠	•	٠	٠	×	٠	٠	×
PARATHYRGID .	-	٠	+	+	+	+	+	+	-	-	+	-	٠	+	•	•	٠	٠	٠	٠	٠	• `	÷	÷	4
EFRODUCTIVE SYSTEM												_				-	-								-
HAPMARY GLAND		•	٠.	٠	•	+	+	+	+	٠	•	•	+	٠	٠	٠	٠	+	٠	+	٠	+	+	.+	
UTERUS Endometrial stromal Polyp	·	•	+	٠	•	•	•	•	•	•	•	•	٠	•	•	* x	•	٠	•	•	•	•	٠	•	•
OVARY Adehocarcinoma. Ngs Grahuldsa-gell tumor	+	* x	•	٠	•	٠	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•
ERVOUS SYSTEM																									
BRAIH Hyxosarcoma	+	٠	٠	٠	٠	•	•	•	•	•	•	+	•	•	٠	•	•	٠	٠	•	+	•	•	•	x
LL OTHER SYSTEMS	+	_		-											_							_		-	-
MULTIPLE ORGANS HOS Fibrous Histiocytoma, Malionant	N	N	N	M	H	H	N	м	N	N	H	H	N X	H	N	H	N	н	N	N	N X	N	H	H	N
MULTIPLE ORGANS NOS Fibrous Histiocytoma, Malignant Malignant Lymphoma, Nos Malig.Lymphoma, Lymphocytic Type Malig.Lymphoma, Histiocytic Type Malignant Lymphoma, Mixed Type			Χ.					•		x			^			v					^				

TABLE B4. INDIVIDUAL ANIMAL TUMOR PATHOLOGY OF FEMALE MICE IN THE TWO-YEAR FEED STUDY OF HC BLUE NO. 2: UNTREATED CONTROL

+: TISSUE EXAMINED MICROSCOPICALLY -: GRAVINED TISSUE NOT EXAMINED MICROSCOPICALLY -: Tung incidence -: August of Augusts, no Microscopic Examination -: Animal Mis-Sexed

: HO TISSUE INFORMATIOH SUBMITTED C: NECROPSY, NO HISTOLOGY DUE TO PROTOCOL A: Autolysis M: Animal Missing S: No yecropsy performed

TABLE B4.	INDIVIDUAL ANIMAL TUMOR PATHOLOGY OF FEMALE MICE: UNTREATED CONTROL
	(Continued)

AN IMAL NUMBER	Ž	21	2	2	31	3	3	3	31	3	3	ş	3	31	41	41	4	4	4	4	4	-	4	4	5	TOTA
WEEKS ON STUDY	9	-	0		-		1	9	-	1	,	1		1	11		3	0	0	8	81	-	0	8	6	TISSU
RESPIRATORY SYSTEM	- 41	- 21	_61		_61	61	61	51	6	21	- <u>61</u>	31	.61	61		<u></u>	<u>.</u>	<u>.</u>	بلغ	-21	.91		- 11		-4	
LUNGS AND BRONCHI Hepatocellular carcinoma. Metasta Alveolar/Bronchiolar carcinoma	•	•	•	•	• x	•	•	•	•	•	•	•	•	•	•	+	•	•	•	•	•	+	•	•	•	50
TRACHEA	+	٠	+	+	٠	٠	+	+	+	٠	+	+	+	•	•	•	+	٠	+	٠	٠	+	-	+	+	41
HEMATOPOIETIC SYSTEM	<u> </u>				-											_							ţ			
BONE MARROW	+	٠	+	+	+	+	+		+	+	+	•	•	+	•	*	•	٠	•	+	+	•	í+	٠	-+	
SPLEEN	<u>+</u>	•	+	+	+	+	•	•	٠	+	+	+	•	+	+	<u>+</u>		+	٠	•	+	+	•	٠	-+	5(
LYMPN HODES	<u> </u>	٠	•	+		+	.*	•	*	+	*	*	•	*	*	<u>+</u>	+	+	+	*	+	+	+	. <u>+</u>	-+	5
THYMUS	+	+	+	+	*	*	+	*	•	+	•	*	*	•	•	•	•	+	*	•	+	<u>.</u>	-	+	+	41
CIRCULATORY SYSTEM																										54
HEART	<u>+</u>	<u> </u>	•	•	+	•	•	•	+	•	+	•	•	•	<u>*</u>	<u>+</u>	•	•	•	•	•	<u> </u>	*	<u>.</u>	+	30
DIGESTIVE SYSTEM	Ι.																							•		4.9
SALIVARY GLAND		•	•	÷	•	+	•	÷	÷	•	÷	÷	÷		• •	•	• •	•	•	÷	•	÷	÷	•		50
LIVER Hepatgcellular ademoma Hepatgcellular garcinoma	Ŀ	•	•		×	-		-		-			_	<u> </u>			_	×	x		-	<u> </u>	• 	•		
SILE DUCT	+		+	+	•	•	<u>_*</u> _	*	•	٠.	÷	+	+	+	*	•	٠	+	+	•	+	*	+	*	-++	
GALLBLADDER & COMMON BILE DUCT	+	+	N	+	*	*		÷		<u>N</u>	*	*	*	*	*	*	*	*	*	*	*	*	<u>.</u>	*	+	
PANCREAS .	<u> </u>	*	<u>+</u>	<u>+</u>	÷.	<u>+</u>	*	-	<u>+</u>	<u> </u>	÷.	+	<u>*</u>	<u>*</u>	*	<u>•</u>	<u>*</u>	<u>*</u>	<u>*</u>	*	<u>.</u>	÷.	+		+	69 69
ESOPHAGUS . STOMACH	÷	÷.	•	+	÷	÷.	+	•	*	*	÷	•	+	•	• •	<u>.</u>	<u>*</u>	•	•	•	+	÷.		÷.		 61
SQUAMOUS CELL PAPILLOMA	Ļ	-	•	+	-			_	_	-	-	ž	-		-	<u> </u>			÷	•	*	-		*.	1	41
SMALL INTESTINE Adenomatous Polyp, Nos	·	•	•	+	•	•	•		•	•	•						•		•	•	•	•	•	•	•	41
LARGE INTESTINE	*	+	+	+	•	+	+	+	+	+	+	+	+	•	•	+	+	+	+	•	+	•	+	+	*	50
URINARY SYSTEM																		-			•					
KIDNEY	+	*	<u>.</u>	<u> </u>	*	+	•	<u>.</u>	<u>+</u>	*	÷	<u>*</u>		*	<u>+</u>	<u>+</u>	+	<u>*</u>		*	•	<u>+</u>	+	*	+	
URINARY BLADDER	*	٠	+	+	+	*	+	+	+	+	*	+	+	+	+	•	*	+	+	+	+	<u>+</u>	+	+	+	41
ENDOCRINE SYSTEM																										
ADENOMA. NOS	!	*	* x	+	+	<u>*</u>	•	+	•	•	•	•	÷	* x	•	•	+	•	+	+	+	÷.	*	•	<u>x</u>	49
ADRENAL	<u>+</u>	•	٠	•	+	•	•	•	+	•	+	•	+	+	<u>+</u>	+	•	•	٠	+	٠	٠	-	•	+	49
THYRGID Follicular-cell Adengma Follicular-cell Carcinoma Cystadeanda, Nos	•	٠	٠	•	٠	٠	* ×	•	٠	٠	•	•	٠	+ x	•	٠	٠	•	+	•	٠	×	•	٠	•	48
PARATHYROID	•	•	•	•	÷	•	-	•			•		-		-		-	•	+	-						31
REPRODUCTIVE SYSTEM											-					-										
MAMMARY GLAND		•	•	٠	٠	•	•	N	•	•	•	•	+	•	•	٠	•	•	+	•	٠	٠	+	+	•	50
UTERUS ENDOMETRIAL STROMAL POLYP	٠	٠	٠	٠	٠	•	٠	• `	•	•	•	•	* x	*	÷	٠	•	•	÷	٠	٠	٠	•	٠	+	50
GVARY Adenocarcinoma, NGS Granulgsa-cell tumor	•	٠	•	٠	٠	+	٠	•	*	٠	•	٠	٠	•	•	٠	•	٠	+ X	٠	•	٠	٠	٠	•	49
NERVOUS SYSTEM			_					•		_															1	
BRAIN Myxosarcoma	٠	•	•	•	•	•	٠	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	*	•	•	50
ALL OTHER SYSTEMS																									T	
MULTIPLE ORGANS NOS Fibrous Histocytoma, Malignant Malignant Lymphoma, Nos Malig.Lymphoma, Lymphocytic Type Malig.Lymphoma, Mistiocytic Type Malignant Lymphoma, Mistiocytic Type	N	X	N	N	N	N	N X	N	H	X X	н	N X	N	н	N	N	N	H .	н	n X	N	N X	N X	N	N	50
FOOT NOS																			_						T	

A ANIMALS NECROPSIED

ANIMAL	1	- 21	0	01	01	01	<u>.</u>	01	<u>e</u> l	01	1	٩I	٥Į	91	0 I		<u>si</u>	il	0	21	91	01	-11-	1	- !
NUMBER WEEKS ON		2	4	-	-	4	?	4	-	- 1	-11	-żi	4	4	4	4	ż	∔	4	ا	1	2	4	4	-
STUDY	ģ	ġ		ŝ	5	ġ	0 7 9	ġ	ġ	<u>,</u>	ġ	5	5	ġ	ġ	9	9	ġ	ŝ		8 7 3	ŝ		8	-
INTEGUMENTARY SYSTEM																									
SUBCUTANEOUS TISSUE Neurilenoma	•	•	•	•	•	+	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	×	1
RESPIRATORY SYSTEM																								_	
LUNGS AND BRONCHI Alvedlar/Sronchiolar Adenoma Alvedlar/Sronchiolar Carcinoma	·	•	•	•	•	٠	•	•	•	•	•	•	•	•	•	•	×	•	•	•	•	•	•	•	•
TRACHEA	+	•	٠	+	٠	٠	٠	+	+	٠	٠	٠	•	٠	٠	+	٠	٠	+	٠	٠	٠	٠	٠	
EMATOPOIETIC SYSTEM	-																								-
SONE MARRON	•	+	+	•	•	•		÷.	.	÷	•	•	•	+	٠	•	•	٠	+	٠	٠	÷	+	+	
SPLEEN Malig.lymphoma, lymphgcytic type Mast-cell tumor	•	٠	٠	+	•	۰.	٠	•	٠	٠	• x	٠	٠	•	٠	•.	•	•	•	•	٠	•	٠	٠	
LYNPH HODES	+	•	•	•	+	+	•	•	•	•	+	+	+	•	+	+.	+	+	+	•	+.	•	+	+	,
TNYMUS	•	٠	•	•	+	٠	٠	÷	٠	•	•	•	•	÷	•	٠	•	•	٠	•	+	•	•	•	,
CIRCULATORY SYSTEM									_											_					-
HEART	•	٠	٠	٠	٠	٠	٠	٠	٠	٠	٠	÷	٠	٠	٠	٠	٠	٠	٠	٠	٠	+	+	٠	
DIGESTIVE SYSTER				_																-					-
SALIVARY GLAND	+	•	•	+	•	+	•	•	•	•	•	•	-	•	•	•	٠	•	•	+	+	+	•	+	
LIVER HEPATOCELLULAR CARCINOMA	•	+	÷.	٠	٠	•	•	+	+	+	+	+	•	•	•	•	•	•	+	+	+	+	+	+	
SILE DUCT	•	+	+	÷	+	+	+	+	÷	÷	•	+	+	•	•	+	٠	•	٠	+	•	٠	•	+	
GALLBLADDER & COMMON BILE DUCT	•	•	•	•	•.	+	+	•	٠	+	N	٠	+	•	•	٠	+	+	٠	•	н.			+	
PANCREAS	•	+	•	+	+	•	•	•	٠	•	•	+	•	•	•	•	•	•	•	•	•	•	•	+	
ESOPHAGUS	•	+	•	+	٠	+	•	+	٠	+	+	+	+	٠	•	+	+	•	•	+	+	•	•	+ .	
STOMACH	•	+	•	+	+	÷	+	+	•	+	•	+	+	٠	+	•	٠	÷	+	+	-	+	٠	+	
SMALL INTESTINE Malig.lymphoma, lymphocytic type	ŀ	+	٠	•	•	•	•	•	٠	•	+	•	•	•	٠	•	•	٠	•	•	-	٠	٠	٠	•
LARGE INTESTINE	•	+	٠	٠	٠	٠	٠	+	+	+	+	+	•	٠	+	+	٠	٠	٠	٠	-	٠	٠	٠	,
JRINARY SYSTEM	-	_												-		_				_				-	-
KIDHEY	•	•	٠	٠	+	•	÷	•	÷	+	•	٠	÷	÷	+	÷	÷	+	+	+	•	÷	÷	÷	
URIMARY BLADDER	+	•	٠	٠	٠	٠	٠	٠	٠	٠	٠	٠	٠	٠	٠	٠	٠	٠	٠	٠	٠	٠	+	٠	
INDOCRINE SYSTEM											_			_			_								-
PITUITARY Adenoma, Hos	+	•	+	•	•	÷.	٠	•	٠	•	•	•	•	•	٠	•	٠	٠	٠	•	-	٠	٠	•	
ADRENAL	<u>+ +</u>	<u>.</u>	•	٠		٠.	÷	•	٠	+	÷	•	•	•	•	+	+	+	•	+	٠	٠	+	٠	
THYRGID FOLLICULAR-CELL CARCINOMA	·	٠	•	+	+	•	٠	•	+	•	٠	+	•	٠	+	•	٠	٠	+	•	+	+	٠	•	•
PARATHYROID	+	-	٠	٠	٠	٠	٠	٠	+	٠	٠	٠	٠	٠	٠	-	٠	-	٠	٠	+	+	+	+	
REPRODUCTIVE SYSTEM														-								_			-
MAMMARY GLAND Mixed Tumor, Malignant	i	•	٠	٠	٠	•	٠	•	•	•.	•	•	ĸ	•	•	•	•	•	•	•	٠	٠	•	•	•
UTERUS	<u>.</u>	+	•	٠	•	•	٠	٠	+	•	٠	•	+	÷	+	٠	+	٠	٠	+	٠	٠	+	٠	
OVARY	+	٠	٠	٠	٠	٠	• .	٠	٠	+	٠	٠	٠	+	٠	٠	•	٠	+	٠	+	+	٠	•	•
NERVOUS SYSTEM		_					-																		
SRAIN SPECIAL SENSE ORGANS	ŀ	•	•	•	٠	•	•	•	+	+	÷	•	•	٠	•	•	•	•	•	<u>.</u>	•	•	•	•	-
HARDERIAN GLAND Adenoma, Nos	N	ĸ	H	N	N	N	N	N	N	N	N	H	N	н	N.	N	N	N	н	н	N	N	Ħ	H	1
ALL OTHER SYSTEMS				_																-					
MULTIPLE ORGANS NOS Malig.lymphoma, lymphocytic type Malig.lymphoma, histiccytic type Malignamt Lymphoma, mixed type	N	N	N	Ħ	N X	N	H	N	N	Ħ	N	H	H X	N	N X	N	N X	M	N	N	N	×	X	H	,

TABLE B4. INDIVIDUAL ANIMAL TUMOR PATHOLOGY OF FEMALE MICE IN THE TWO-YEAR FEED STUDY OF HC BLUE NO. 2: LOW DOSE

TABLE B4. INDIVIDUAL ANIMAL TUMOR PATHOLOGY OF FEMALE MICE: LOW DOSE (Continued)

ANIMAL Humber	2	21	21	21	3	31	31	3	34	3	3	31	0 3 8	31	0	41	0 4 2	0 4 3	-	0 4 5	•	4	4	0	0 5	TOTAL
WEEKS CH Study	e	6	1		91	?	81	-	?	1	0	0	8	0	1		8	9	1	91	0	91	1	9	-	TUMORS
INTEQUMENTARY SYSTEM	1 21		51	51	2	4	01	51	91	51	51	51	91	31	51	1	-	41	51	21	-	2[51	11	-4	
SUBCUTANEGUS TISSUE Neurilemoma	•	٠	٠	٠	٠	٠	٠	٠	٠	٠	٠	٠	٠	٠	٠	٠	٠	٠	٠	٠	٠	٠	٠	٠	•	50% 1
RESPIRATORY SYSTEM		-														_										
LUMOS AND BRONCHI Alveolar/Bronchiglar Adenoma Alveolar/Bronchiglar Carcinoma	ŀ	•	•	+	•	٠	+	×	•	•	•	•	•	•	-	+	•	٠	•	•	+	•	•	* x	•	49 2
TRACHEA	+	+.	٠	+	+	٠	٠	٠	٠	٠	+	٠	٠	+	-	٠	٠	٠	٠	+	+	٠	+	+	+	49
HEMATOPOIETIC SYSTEM			-																			· · · ·		-	-	
SONE MARROW	Ŀ	•	٠	•	+	•	+	٠	+	٠	+	٠	٠	+	+	٠	•	+	•	+	+	٠	÷	+	•	. 50
SPLEEN Malio.lymphoma, lymphocytic type Mast-cell tumor	ŀ	•	•	٠	•	•	•	•	•	•	×	٠	•	•	•	÷.	٠	•	•	•	•	٠	٠	٠	•	50
LYMPH HODES	•	· •	+	•	•	•	٠	+	+	•	+	•	+	+	+	•	•	•	•	•	+		+	٠	•	50
THYMUS	•	+	+	+	٠	•	٠	+	+	+	•	•	٠	+	-	+	+	•	•	+	٠	٠	+	+	+	49
CIRCULATORY SYSTEM	 				_		_	_															_		-	
HEART	•	٠	+	٠	٠	٠	٠	٠	٠	+	•	•	٠	+	•	٠	٠	٠	٠	•	+	•	•	+	+	50
DIGESTIVE SYSTEM							-			-					-										-	
SALIVARY GLAND	ŀ	٠	•			+	•	•	٠	٠	+	٠	٠	•	+	+	٠	+	+	+	+	•	•	•	•	49
LIVER HEPATOCELLULAR CARCINOMA	••	•	•	•	•	٠	+	•	•	••	•	+	•	•	•	•	•	•	٠	٠	٠	•	•	•	٠	58
BILE DUCT	<u> - </u>	•	•	•	+	٠.	•	•	•	•	٠	٠	٠	٠	•	•	•	•	٠	+	٠		•	+	•	
GALLBLADDER & COMMON BILE DUCT	Ŀ		•	٠	+	٠	٠	٠	H.	٠	•	•	+	M	+	Ħ	•	•	•	+	+	N	•		+	50×
PANCREAS	<u> </u>	+	٠	•	•	•	•	+	•	٠	•	•	•	-	+	+	٠	+	٠	٠	٠	+	•	•	•	48
ESOPHAGUS	+	•	•	•	•	٠	+	٠	+	•	+	+	٠	+	-	•	<u>.</u>	+	+	÷	÷	+	•	•	•	49
STOMACH		+	٠	٠	•	+	+	+	+	÷	+	*	•	• -	+ .	+	•	+	•	٠	+	•	<u>+</u>	+	•	48
SMALL INTESTINE Malig.lymphoma, lymphogytic type	•	•	•	•	+	•	•	٠	٠	•	•	•	-	٠	+	•	•	•	÷	+	+	+	•	+	•	46 1
LARGE INTESTINE	+	+	•	•	٠	+	٠	٠	+	•	+	•	•	•	+	٠	٠	٠	+	+	+	+	•	+	+	49
URINARY SYSTEM							-																			
KIDNEY	<u>+ •</u>	*	•	•	••.	.+	<u>.</u>	•	+	•	•	+	•	+	•	.+.	•	+	•	+	•	•	•	•	+	50
URINARY SLADDER	+	+	•	•	•.	•	•	•	•	•	+	•	•	+	•	•	•	•	+	+	•	•	•	+	•	50
ENDUCRINE SYSTEM																								_	Τ	
PITUITARY Adenoma, Nos	+	•	•	•	+	٠	٠	٠	•	•	•	•	+	•	•	•	٠	+	٠	*	•	•	•	•	+	48 2
ADRENAL	•	+	•	+	+	•	+	•	+	٠	•	+	+	•	+	+	•	•	•	•	•	•	+	•	+	50
THYROID	+	٠	+	•	•	٠	•	+	•	•	•	+	•	+	-	٠	٠	+	•	+	+	+	+	•	+	49
FOLLICULAR-CELL CARCINGMA	┼──					_			•					X.		_	_		_					_	+	1.
PARATHYROID	+	-	+	•	-	•	+	•	+	٠	+	+	•	•	-	•	+	•	•	+	+	+	+	•	+	43
REPRODUCTIVE SYSTEM																										
MAMMARY GLAND Mixed Tumor, Malighant	+	+	+	•	•	٠	•	•	•.	•	+	+	•	+	•	•	•	•	•	•	•	+	+	+	•	50 M
UTERUS	•	•	•	٠	•	•	+	•	٠	٠	•	+	•	•	•	•	٠	•	•	•	•	•	•	•	•	50
QVARY	•	•	٠	٠	٠	٠	٠	٠	٠	٠	٠	÷	•	٠	•	٠	٠	٠	•	•	•	•	•	٠	+	50
NERVOUS SYSTEM				-							_		_		-		_		_						+	
BRAIN SPECIAL SENSE ORGANS	+	•	•	•	•	٠	٠	÷	٠	•	٠	٠	÷	•	•	•	•	<u>+</u>	•	٠	+	٠	٠	•	+	50
HARDERIAN GLAND Adenoma, Mos	N	H	ж	N	N	N	N	N	N	N	NX	N	N	N	N	N	N	N	N	н	N	N	N	N	N	50
ALL OTHER SYSTEMS			_		-			_												_					+	
MULTIPLE ORGANS HOS Malig.lymphoma.lymphocytic type Malig.lymphoma.lymphocytic type Taligamat Lymphoma.mixed type	н	N	H	H	N	N	N	H	N X	N	N	N	H	N	N.	ĸ	N	N. X	H	N	H	×	××	×	•	50× 5 3

ANIMALS HEGROPSIED

TABLE B4.	INDIVIDUAL ANIMAL TUMOR PATHOLOGY OF FEMALE MICE IN THE TWO-YEAR
	FEED STUDY OF HC BLUE NO. 2: HIGH DOSE

ANIMAL NUMBER	0	01	01	0	01	01	3	01	31	1	1	11	11	1	0	1	11	1	11	2	2	21	2	21	21
WEEKS ON STUDY	1			31	-1	31	2	7	-	;		31	-	3	3				-	1	9	;	-	31	1
INTEGUMENTARY SYSTEM		ġį	51	8	5	<u>1</u>	4	91	او	1	61	81	51	9	őİ.	أف	اف	Ĩ	اف	5	41	41	j	<u>.</u>	3
SUBCUTANEOUS TISSUE Hemangiosarcoma	+	٠	٠	٠	٠	٠	٠	٠	٠	٠	٠	٠	٠	٠	٠	٠	٠	٠	* x	٠	٠	٠	٠	٠	٠
RESPIRATORY SYSTEM	1-				_																				
LUNGS AND BRONCHI	+	<u>+</u>	+	+	+	+	÷	٠	+	+	+	+	+	+	٠	+	٠	•	+	+	+	+	+	+	+
TRACHEA	+	٠	٠	٠	٠	٠	٠	٠	٠	٠	+	•	+	٠	٠	•	٠	٠	٠	+	+	٠	٠	٠	+
HEMATOPOIETIC SYSTEM	+		-			_								-											٦
BONE MARROW	+±-	+	+	٠	•		•	•	•	٠	+	ŧ.	+	•	٠	•	٠	+	٠	+	+	+	٠	٠	+
SPLEEN	<u>+</u>	+	•	•	٠	•		٠	+	•	٠	•	٠	+	•	+	•	-	•	٠	٠	•	+	+	٠
LYMPH NODES	Ŀ	+	<u>.</u>	٠	•	+	٠	•	•	•	+	٠	٠	÷	٠	+	•	•	٠	+	+	+	•	•	÷
THYMUS	+	٠	٠	٠	•	٠	٠	٠	٠	٠	٠	٠	٠	٠	٠	٠	٠	•	٠	٠	٠	٠	٠	٠	٠
CIRCULATORY SYSTEM	+						-							-			_								٦
HEART	+	٠	٠	٠	٠	٠	٠	٠	٠	٠	٠	٠	٠	٠	•	٠	٠	٠	٠	+	٠	٠	٠	٠	•
DIGESTIVE SYSTEM	+					_																÷			-
SALIVARY GLAND		+	+	+	+	+	•	•	+	•	+	+	+	÷	+	+	+	-	+	+	+	+	+	-	+
LIVER Hepatocellular adenoma Hepatocellular carcinoma	Ŀ	+	* *	•	•	•	•	•	* *	•	+	×	•	•	•	•	•	•	٠	•	•	•	٠	•	٠
SILE DUCT	<u> </u>	•	+	٠	+	٠	٠	٠	٠	•	+	•	+	•	•	+	•	-	•	÷	+	•	•	•	÷
GALLBLADDER & COMMON SILE DUCT	L.	•	+	÷	•	н	•	+	•	•	+	٠	•	•	N	•	•	N	٠	٠	٠	٠	N	•	٠
PANCREAS	L.	+	•	٠	+	•	٠	•	•	•	٠	•	+	•	٠	•	•	-	٠	•	+	+	٠	٠.	÷
ESOPHAGUS	<u>L.</u>	•	•	•	٠	•	+	+	•	•	+	•	+	•	٠	+	•	٠	•	•	+	•	÷	٠	•
STOMACH	L.	٠	•	•	+	•	٠	•	+	•	•	+	•_	•	•	•	•	-	٠	•	•	•	+	•	•
SMALL INTESTINE Malig.lymphoma, lymphocytic type	·	•	•	٠	٠	•	•	٠	٠	÷	÷	+	+	٠	•	٠	•	•	+	+	٠	•	•	•	+
LARGE INTESTINE	+	+	٠	٠	٠	•	٠	•	+	+	•	•	•	٠	٠.	•	٠	-	٠	•	+	+	+	٠	+
URINARY SYSTEM	+									-		-					-				_				+
KIDNEY	┝	+	+	+	٠	•	•	٠.	•	•	•	+	+	+	٠	•	•	+	+	+	•	•	•	+	÷
URINARY BLADDER	•	٠	٠	٠	٠	٠	٠	٠	٠	٠	٠	٠	+	٠	•	•	•	٠	٠	٠	+	٠	٠	•	٠
ENDOCRINE SYSTEM	-									-							-								1
ADENOMA, NOS	L.	•	•	•	×	•	•	•	ż	•	•	•	•	•	•	•	•	•	•	ż	•	•	•	•	•
ADRENAL	┝┷	•	•	•	•	•	•	•	•	+	+	•	•	•	٠	٠.	•	•	٠	•	•	*	٠	•	4
THYROID Follicular-cell Adenoma Follicular-cell Carcinoma	•	•	•	•	•	•	٠	•	•	•	•	•	*	•	٠	•	•	٠	٠	•	•	٠	-	٠	٠
PARATHYROID		•	•	•	+	•		•	÷		+	•	•	•	٠	+	÷	-	٠	•	٠	-	•	+	-
REPRODUCTIVE SYSTEM	+																_								+
MAMMARY GLAND Adenoma, Nos Adenocarcinoma, Nos	•	٠	٠	٠	٠	٠	٠	•	٠	٠	•	٠	•	٠	٠	٠	•	N	٠	٠	٠	٠	×	٠	•
UTERUS LEIOMYOMA	•	+	٠	٠	٠	·	•	٠	٠	•	+	٠	٠	÷	•	٠	+	٠	+	•	•	* ×	·	•	•
OVARY		•	٠	•	•	•	•	٠	•	•	•	•	•	٠	•	•	٠	٠	+	•	•	٠	٠	•	•
HERVOUS SYSTEM				-	_		-					-			_					_	_		_		+
BRAIN	+	٠	٠	٠	٠	٠	٠	٠	٠	•	٠	÷	٠	٠	٠	٠	٠	٠	٠	٠	٠	٠	٠	•	•
ALL OTHER SYSTEMS	\vdash											_					-		-						+
MULTIPLE ORGANS NOS Malig.Lymphoma, Lymphocytic type Malig.Lymphoma, Histiocytic type Malignant Lymphoma, Mixed Type	H	ĸ	N	N	H	H	M	N X	H	N	N	H	*	H	N	N	×	N	н	ĸ	*	H	*	N 1	
LEG NOS OSTEDSARCOMA																									

TABLE B4. INDIVIDUAL ANIMAL TUMOR	PATHOLOGY OF FEMALE MICE:	HIGH DOSE (Continued)
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AN IMAL NUMBER	2	21	21	21	3	3	31	31	0 (3 4	3	61	31	31	31	41		4	4	4	4	3	?	4	41	51	TOTAL
WEEKS ON STUDY		1		81	1	1	?!	1	9		1	91	9	81	8	8	3	9	81	91	91	9	1	-11	-	TISSUES
INTEQUMENTARY SYSTEM	- 51	5	51	71	51	1	71	51	21	1	51	8	51	21	81	81	11	21	71	81	2	71	31	51	4	
SUBCUTANEOUS TISSUE Hemangiosarcoma	+	٠	٠	٠	+	•	٠	٠	•	٠	٠	٠	٠	٠	•	•	•	•	٠	٠	٠	•	٠	٠	•	50H 1
RESPIRATORY SYSTEM	+						-																			
LUNGS AND BRONCHI	+÷	+	+	+	+ .	+	+	+	+	•	+	•	+	<u>+</u>	+	•	•	•	•	+	•	•	٠	+	+	50
TRACHEA	•	٠	٠	٠	٠	٠	٠	•	•	٠	+	٠	٠	٠	•	•	•	•	٠	٠	٠	٠	٠	+	+	50
HEMATOPOIETIC SYSTEM	1																									
BONE MARROW	1·	•	+	+	٠.	*	٠	+	•	+	+	•	•	<u>.</u>	•	•	•	•	÷	•	+	•	+	•	•	50
SPLEEN	L±	٠	+	٠		•	÷	٠	٠	<u>+</u>	٠	•	٠.	<u>+</u>	+	<u>.</u>	<u>.</u>	•	•	٠	+	+	+	+	٠	69
LYMPH NODES	L.	•	•	÷	÷	+	+	•	+	<u>+</u>	+	•	•	*	•	•	•	<u>+</u>	•	٠	+_	٠	٠.	٠	•	48
THYRUS	+	٠	٠	٠	٠	٠	٠	٠	•	٠	٠	٠	•	•	•	•	•	•	٠	•	٠	٠	٠	٠	+	49
CIRCULATORY SYSTEM	+																	-				_		_	-	
HEART	+	٠	٠	٠	+	٠	٠	٠	•	•	٠	٠	٠	•	•	•	•	٠	•	٠	٠	٠	٠	٠	+	50
DIGESTIVE SYSTEM	+						_						-	~				-					_		+	
SALIVARY GLAND	Ŀ	+	+	+	٠	•	٠	+	+	+	٠	+	+	+	+	•		<u>.</u>	+	•	•	•	•	+	+	. 48
LIVER Hepatocellular ademoma Hepatocellular carcinoma	•	٠	٠	• x	٠	٠	•	+ X	× ·	• x	٠	•	٠	•	•	•	•	•	•	٠	•	•	* ×	•	•	49 37
BILE DUCT	+	•	+	+	+	+	+	•	•	•	+	•	+	+	•	•		+	•	•	+	+	+	•	+	49
GALLBLADDER & COMMON BILE DUCT	[.	+	•	+	+	+	+	+	•	•	+	+	•	+	•	• •	•	•	+	•	+	•	•	+	N	50*
PANCREAS	I.	+	•	•	•	•	+	•	•	•	+	÷	٠	•	÷ •	•		•	÷	•	+	•	•	•	•	. 49
ESOPHAGUS	•	•	•	•	+	+	•	•	•	•	•	+	•	•	•	•		•	•	•	+	+	٠	•	+	50
STOMACH				•	•		•	•	•	•	•	•	•	+	•	•		•	•	•	•	•	•	•	•	44
SMALL INTESTINE MALIG.LYMPHOMA, LYMPHOCYTIC TYPE	ŀ	٠	•	÷	٠	·	٠	٠	ż	•	٠	•	٠	÷	•	•	•	•	•	٠	٠	٠	•	٠	•	48,
LARGE INTESTINE	+	٠	٠	٠	٠	٠	٠	٠	•	٠	٠	•	٠	•	•	• •	•	•	٠	•	٠	•	•	•	+	49
JRINARY SYSTEM	+																-		-	-					+	
KIDHEY	•	٠	+	÷	+	•	÷	•	•	•	+	÷	+	+	• . •	•		•	•	•	•	•	•	÷	٠	50
URIHARY SLADDER		٠	+	٠	٠	٠	٠	•	•	•	•	•	٠	•	•	•	•	•	•	٠	٠	٠	٠	٠	+	49
ENDOCRINE SYSTEM	+							-									-					-			+	
PITUITARY Adenoma, Hos	ŀ	•	•	•	•	•	•	٠	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	٠	ž.	'' ,
ADRENAL	L.	٠		٠	٠	•	;	•	•		•	٠	٠	<u>.</u>	•	•		•	•	+	<u>+</u>	•	•	•	•	49
THYROID Follicular-cell Adenoma Follicular-cell Carcinoma	•	٠	٠	•	•	•	٠	٠	•	•	• x	•	• .	•	•	• •	•	•	•	•	•	•	•	•	•	49
PARATHYROID	1.	•	+	•	•	•	•	+	•	+	•	•	•	•	• •		•	•	•	•	•	+	•	•	•	45
REPRODUCTIVE SYSTEM	+	-														_							_		+	
MAMMARY GLAND Adenoma, Nos Adenocarcinoma, Nos	•	٠	٠	•	٠	•	٠	•	•	•	٠	•	•	•	•	•	•	•	•	•	*	٠	٠	٠	•	50×
UTERUS LEIOMYOMA	ŀ	٠	٠	٠	٠	٠	٠	•	•	•	•	•	٠	•	•	•	•	•	+	٠	•	•	•	•	•	50
OVARY	•	٠	٠	٠	٠	٠	٠	٠	•	÷	٠	٠	٠	+	•	•	•	٠	+	٠	٠	+	٠	٠	+	50
REVOUS SYSTEM	+					~	_									-									-	
BRAIN	•	٠	٠	٠	٠	٠	٠	٠	•	٠	٠	٠	•	•	•	• •	•	•	٠	٠	٠	٠	٠	٠	•	50
ALL OTHER SYSTEMS	+						-									-			-			-			+	
MULTIPLE ORGANS NOS Malig.Lymphoma, lymphocytic type Malig.Lymphoma, mistiocytic type Malignamt Lymphoma, mixed type	N	N	N	N X	н	N	N	N	н	M	N	H	N	N	н 1	4 1	•	N X	н Х	N X	H	H	н	H	N	50× 2 2 2
LEG NOS OSTEOSARCOMA																		X								1

* ANIMALS NECROPSIED

HC Blue No. 2, NTP TR 293

APPENDIX C

SUMMARY OF THE INCIDENCE OF NONNEOPLASTIC LESIONS IN RATS IN THE TWO-YEAR FEED STUDIES OF HC BLUE NO. 2

C	ONTRO	DL (UNTR)	LOWI	DOSE	HIGH	DOSE
ANIMALS INITIALLY IN STUDY	50		50		50	
ANIMALS NECROPSIED	50		50		49	
ANIMALS EXAMINED HISTOPATHOLOGICALLY	50		50		49	
NTEGUMENTARY SYSTEM		<u> </u>				
*SKIN	(50)	•	(50)		(49)	
INFLAMMATION, CHRONIC	1	(2%)				(0.2)
ULCER, CHRONIC						(2%)
HYPERPLASIA, EPITHELIAL *SUBCUT TISSUE	(50)		(50)			(2%)
INFLAMMATION, SUPPURATIVE	(50)	(2%)	(50)	(6%)	(49)	(2%)
INFLAMMATION, SOFF CRATIVE		(2%)	3	(0%)	1	(270)
NECROSIS, FAT	•	(2,0)	1	(2%)		
RESPIRATORY SYSTEM				<u> </u>		
*NASAL CAVITY	(50)		(50)		(49)	
HEMORRHAGE	(22)			(2%)	(
*NASAL MUCOSA	(50)		(50)		(49)	
INFLAMMATION, FOCAL		(2%)				(2%)
#TRACHEA	(48)		(43)		(47)	
INFLAMMATION, NOS		(2%)				
#PERITRACHEAL TISSUE	(48)		(43)		(47)	
PIGMENTATION, NOS				(2%)		
#LUNG	(50)	((50)		(49)	(
CONGESTION, NOS		(6%)		(4%)		(4%)
HYPERPLASIA, ALVEOLAR EPITHELIUM		(4%)		(4%)	1	(2%)
HISTIOCYTOSIS		(8%)		(2%)	(40)	
#LUNG/ALVEOLI HYPERPLASIA, ADENOMATOUS	(50)		(50)		(49)	(2%)
HISTIOCYTOSIS			13	(26%)		(2%)
HEMATOPOIETIC SYSTEM						
*MULTIPLE ORGANS	(50)		(50)		(49)	
LEUKOCYTOSIS, NOS				(2%)	1	(2%)
#BONE MARROW	(50)		(50)		(49)	
ATROPHY, FATTY					1	(2%)
#SPLEEN	(50)		(50)		(49)	
ACCESSORY STRUCTURE			1	(2%)		
CYST, NOS		(2%)				
HEMATOMA, NOS		(2%)				
FIBROSIS		(2%)				
INFARCT, NOS		(6%) (4%)		(90)		(901)
HEMATOPOIESIS #LYMPH NODE	(50)	(4%)	(49)	(2%)	(49)	(2%)
HYPERPLASIA, NOS	(00)		(43)			(2%)
#MANDIBULAR L. NODE	(50)		(49)		(49)	(4,0)
HYPERPLASIA, NOS	•	(14%)		(2%)		(2%)
				(2%)	-	,
ANGIECTASIS			(49)		(49)	
ANGIECTASIS #CERVICAL LYMPH NODE	(50)					(2%)
	(50)				1	
#CERVICAL LYMPH NODE	(50) (50)		(49)		(49)	
#CERVICAL LYMPH NODE HYPERPLASIA, NOS	(50)	(2%)	(49)		(49)	
#CERVICAL LYMPH NODE HYPERPLASIA, NOS #MEDIASTINAL L. NODE ANGIECTASIS #PANCREATIC L. NODE	(50)	(2%)	(49) (49)		(49) (49)	
#CERVICAL LYMPH NODE HYPERPLASIA, NOS #MEDIASTINAL L. NODE ANGIECTASIS #PANCREATIC L. NODE CONGESTION, NOS	(50) 1 (50)	(2%)	(49)		(49) (49) 1	(2%)
#CERVICAL LYMPH NODE HYPERPLASIA, NOS #MEDIASTINAL L. NODE ANGIECTASIS #PANCREATIC L. NODE CONGESTION, NOS #MESENTERIC L. NODE	(50) 1 (50) (50)		•		(49) (49)	(2%)
#CERVICAL LYMPH NODE HYPERPLASIA, NOS #MEDIASTINAL L. NODE ANGIECTASIS #PANCREATIC L. NODE CONGESTION, NOS #MESENTERIC L. NODE HYPERPLASIA, NOS	(50) 1 (50) (50)	(2%) (2%)	(49)		(49) (49) 1 (49)	
#CERVICAL LYMPH NODE HYPERPLASIA, NOS #MEDIASTINAL L. NODE ANGIECTASIS #PANCREATIC L. NODE CONGESTION, NOS #MESENTERIC L. NODE HYPERPLASIA, NOS HYPERPLASIA, CYSTIC	(50) 1 (50) (50) 1	(2%)	(49)		(49) (49) 1 (49)	(2%) (2%)
#CERVICAL LYMPH NODE HYPERPLASIA, NOS #MEDIASTINAL L. NODE ANGIECTASIS #PANCREATIC L. NODE CONGESTION, NOS #MESENTERIC L. NODE HYPERPLASIA, NOS	(50) 1 (50) (50) 1		(49)		(49) (49) 1 (49)	

TABLE C1. SUMMARY OF THE INCIDENCE OF NONNEOPLASTIC LESIONS IN MALE RATS IN THE TWO-YEAR FEED STUDY OF HC BLUE NO. 2

	CONTRO)L (UNTR)	LOWI	DOSE	HIGH	DOSE
HEMATOPOIETIC SYSTEM (Continued)		······				<u> </u>
#LIVER	(50)		(50)		(49)	
LEUKOCYTOSIS, NOS		(2%)		(2%)		
*MESENTERY	(50)		(50)		(49)	
MASTOCYTOSIS			1	(2%)		
IRCULATORY SYSTEM						
#HEART	(50)		(50)		(49)	
INFLAMMATION, FOCAL	1	(2%)				
#MYOCARDIUM	(50)		(50)		(49)	
INFLAMMATION, FOCAL	1	(2%)				
FIBROSIS, FOCAL	29	(58%)	23	(46%)	31	(63%)
*MESENTERIC ARTERY	(50)		(50)		(49)	
PERIARTERITIS			1	(2%)		
*MESENTERY	(50)		(50)		(49)	
PERIARTERITIS						(2%)
#TESTIS	(50)		(50)		(49)	
PERIARTERITIS			1	(2%)		(4%)
IGESTIVE SYSTEM						
#SALIVARY GLAND	(50)		(48)		(49)	
CYST. NOS		(2%)	(10)		(10)	
METAMORPHOSIS FATTY	-	(= /• /	1	(2%)		
ATROPHY, NOS				(2%)		
#LIVER	(50)		(50)	(2 %)	(49)	
DEFORMITY, NOS		(4%)		(2%)		(4%)
CONGESTION, NOS		(2%)	•	(2,0)	4	(4,0)
INFLAMMATION, FOCAL		(2%)	17	(34%)	7	(14%)
CHOLANGIOFIBROSIS		(68%)		(80%)		(69%)
DEGENERATION, CYSTIC		(14%)		(20%)	-	(22%)
NECROSIS, FOCAL		(2%)	10	(20%)		
INFARCT, NOS		(2%)				
METAMORPHOSIS FATTY		(6%)	1	(2%)		
PIGMENTATION, NOS	Ŭ	(0,0)	-	(= ///	1	(2%)
CYTOPLASMIC VACUOLIZATION	6	(12%)	17	(34%)		(45%)
BASOPHILIC CYTO CHANGE		(2%)		(2%)		(10%)
FOCAL CELLULAR CHANGE		(2%)		(2%)		(4%)
ANGIECTASIS	•	(2 %)		(2%)		(2%)
NODULAR REGENERATION	1	(2%)	-			(2%)
#LIVER/CENTRILOBULAR	(50)	(270)	(50)		(49)	(2 %)
NECROSIS, NOS		(4%)	(00)		(40)	
ATROPHY, NOS	2	(= ~)	1	(2%)		
#BILE DUCT	(50)		(50)	((49)	
HYPERPLASIA, NOS		(98%)		(100%)		(96%)
HYPERPLASIA, FOCAL		(3)				(2%)
#PANCREAS	(50)		(50)		(49)	<u>,_</u> ,_,
CYSTIC DUCTS		(2%)	(23)			(2%)
DEGENERATION, CYSTIC	•	()	1	(2%)	-	<u>,</u> ,
ATROPHY, FOCAL	11	(22%)		(20%)	15	(31%)
HYPERPLASIA, FOCAL		,	-•	,		(2%)
#STOMACH	(50)		(50)		(49)	,
EDEMA, NOS				(2%)		(2%)
ULCER, NOS	1	(2%)	•		-	
#GASTRIC MUCOSA	(50)	~= /*/	(50)		(49)	
NECROSIS, FOCAL		(2%)	(00)		(
#FORESTOMACH	(50)		(50)		(49)	
ULCER, NOS		(4%)		(2%)		(2%)
INFLAMMATION, FOCAL		(476)	T	(# ~)	-	
LITE MERINALE AND IT, E COTTA		(2%)				

TABLE C1. SUMMARY OF THE INCIDENCE OF NONNEOPLASTIC LESIONS IN MALE RATS IN THETWO-YEAR FEED STUDY OF HC BLUE NO. 2 (Continued)

CO	ONTRO	L(UNTR)	LOWI	OOSE	HIGH	DOSE
URINARY SYSTEM		4. december 1000 af a construction of the				
#KIDNEY	(50)		(50)		(49)	
CYST, NOS		(2%)		(2%)	()	
CONGESTION, NOS	-	(= /0)		(2%)		
NEPHROPATHY				(2%)		
NEPHROSIS, NOS	45	(90%)		(88%)	45	(92%)
NECROSIS, FOCAL		(2%)		(00 %)	40	(32 %)
#KIDNEY/MEDULLA	(50)	(2,0)	(50)		(49)	
CAST, NOS	(00)		(00)			(2%)
#PERIRENAL TISSUE	(50)		(50)		(49)	(2 %)
NECROSIS, FAT		(2%)	(00)		(43)	
ENDOCRINE SYSTEM	(50)		(49)		(48)	
#PITUITARY	(50)			(90)	(48)	
HEMATOMA, NOS			1	(2%)		(90)
LIPOGRANULOMA						(2%)
CYTOPLASMIC VACUOLIZATION		(07)		(00)		(2%)
FOCAL CELLULAR CHANGE		(2%)		(2%)		(2%)
HYPERPLASIA, FOCAL		(14%)	-	(18%)		(4%)
ANGIECTASIS	4	(8%)		(10%)		(2%)
#ADRENAL	(50)		(50)		(49)	
CYTOPLASMIC CHANGE, NOS			1	(2%)		
FOCAL CELLULAR CHANGE	1	(2%)			1	(2%)
ANGIECTASIS					1	(2%)
#ADRENAL CORTEX	(50)		(50)		(49)	
ACCESSORY STRUCTURE					1	(2%)
METAMORPHOSIS FATTY	1	(2%)	1	(2%)		
CYTOPLASMIC VACUOLIZATION		(4%)	9	(18%)	9	(18%)
FOCAL CELLULAR CHANGE	5	(10%)	1	(2%)		
#ADRENAL MEDULLA	(50)		(50)		(49)	
HYPERPLASIA, FOCAL		(18%)	5	(10%)	9	(18%)
ANGIECTASIS		((2%)	1	(2%)
#THYROID	(50)		(50)	(,	(49)	. ,
ULTIMOBRANCHIAL CYST		(6%)	(,		(
CYSTIC FOLLICLES		(10%)	2	(4%)	3	(6%)
DEGENERATION, CYSTIC		(10%)	-	(1,0)		(4%)
PIGMENTATION, NOS		(10%)				(2%)
HYPERPLASIA, C-CELL		(2%)	4	(8%)		(6%)
#THYROID FOLLICLE	(50)	(2/0)	(50)	(0,0)	(49)	(0.0)
ACCESSORY STRUCTURE	,	(2%)			. (40)	
INFLAMMATION, FOCAL		(2%)				
PIGMENTATION, NOS		(4%)	e	(12%)	5	(10%)
HYPERPLASIA, CYSTIC		(2%)	0	(12 %)	v	(10,0)
#PARATHYROID	(48)	(270)	(47)		(48)	
FOCAL CELLULAR CHANGE	(40)			(4%)	(40)	
*MAMMARY GLAND	(50)		(50)		(49)	
GALACTOCELE	1	(2%)				
CYSTIC DUCTS					2	(4%)
HEMORRHAGIC CYST			2	(4%)		
LIPOGRANULOMA						(4%)
CYSTIC DISEASE	23	(46%)	32	(64%)		(57%)
*MAMMARY DUCT	(50)		(50)		(49)	
HEMORRHAGIC CYST						(2%)
*PREPUTIAL GLAND	(50)		(50)		(49)	
		(6%)		(6%)		
INFLAMMATION. SUPPURATIVE						
INFLAMMATION, SUPPURATIVE INFLAMMATION CHRONIC SUPPURATIVE		(0,0)			1	(2%)
INFLAMMATION, SUPPORATIVE INFLAMMATION CHRONIC SUPPURATIVE HYPERPLASIA, NOS						(2%) (2%)

TABLE C1. SUMMARY OF THE INCIDENCE OF NONNEOPLASTIC LESIONS IN MALE RATS IN THE TWO-YEAR FEED STUDY OF HC BLUE NO. 2 (Continued)

	CONTRO	OL (UNTR)	LOWI	DOSE	HIGH	DOSE
REPRODUCTIVE SYSTEM (Continued)						
#PROSTATE	(49)		(49)		(49)	
INFLAMMATION, SUPPURATIVE		(47%)		(53%)		(67%)
DEGENERATION, CYSTIC	20	(4170)		(4%)	33	(0770)
HYPERPLASIA, CYSTIC	1	(2%)	2	(4270)		
		(2%)	(50)		(40)	
*SEMINAL VESICLE COLLAPSE	(50)	(00)	(50)	(10)	(49)	
	1	(2%)	z	(4%)		(00)
DEPLETION	(50)		(50)			(2%)
#TESTIS	(50)		(50)		(49)	(0~)
EDEMA, NOS						(2%)
HEMORRHAGE					1	(2%)
DEGENERATION, CYSTIC				(2%)		
ATROPHY, NOS		(28%)	12	(24%)		(41%)
ATROPHY, FOCAL		(2%)				(2%)
HYPERPLASIA, INTERSTITIAL CELL		(2%)	. – •			(4%)
*EPIDIDYMIS	(50)	(0~)	(50)		(49)	
DILATATION, NOS	1	(2%)	-	(0~)		
EDEMA, NOS	-	(07)	1	(2%)		
NECROSIS, FAT		(2%)				
*SPERMATIC CORD	(50)		(50)		(49)	
NECROSIS, FAT	2	(4%)	5	(10%)		
IERVOUS SYSTEM						
#BRAIN	(49)		(50)		(49)	
HEMORRHAGE		(4%)		(4%)	(
NECROSIS, FOCAL		(4%)		(2%)		
#PALLIUM	(49)	(1)0)	(50)	(= ,0)	(49)	
DISPLACEMENT, NOS	(40)		(00)			(2%)
#CEREBRAL BASAL SURFA	(49)		(50)		(49)	(2,0)
DISPLACEMENT, NOS	(40)		(00)			(2%)
#HYPOTHALAMUS	(49)		(50)		(49)	(2,0)
DISPLACEMENT, NOS	(40)		(00)		• •	(4%)
#PONS	(49)		(50)		(49)	(4/0)
DISPLACEMENT, NOS	· - /	(2%)	(00)		(43)	
	<u></u>					
SPECIAL SENSE ORGANS	(=0)		(50)		(10)	
*EYE	(50)		(50)		(49)	
HEMORRHAGE		(4%)	-	(1.44)		/
RETINOPATHY		(12%)		(4%)		(33%)
CATARACT		(6%)	2	(4%)		(29%)
PHTHISIS BULBI		(2%)	/			(2%)
*EAR CANAL	(50)		(50)		(49)	(40)
INFLAMMATION, NOS	/ - - ·					(4%)
*ZYMBAL GLAND	(50)		(50)		(49)	(0~)
HYPERPLASIA, FOCAL						(2%)
*TYMPANIC CAVITY	(50)		(50)		(49)	(05)
HYPEROSTOSIS					1	(2%)
IUSCULOSKELETAL SYSTEM						
*SKULL	(50)		(50)		(49)	
HYPEROSTOSIS		(10%)		(16%)		(51%)
BODY CAVITIES						
*MESENTERY	(50)		(50)		(49)	
NECROSIS, FAT		(2%)		(2%)		(4%)
		· · · · /	-		-	

TABLE C1. SUMMARY OF THE INCIDENCE OF NONNEOPLASTIC LESIONS IN MALE RATS IN THE
TWO-YEAR FEED STUDY OF HC BLUE NO. 2 (Continued)

TABLE C1. SUMMARY OF THE INCIDENCE OF NONNEOPLASTIC LESIONS IN MALE RATS IN THE
TWO-YEAR FEED STUDY OF HC BLUE NO. 2 (Continued)

	CONTROL (UNTR)	LOW DOSE	HIGH DOSE
ALL OTHER SYSTEMS			
*MULTIPLE ORGANS	(50)	(50)	(49)
CONGESTION, NOS	3 (6%)		1 (2%)
SOLE OF FOOT CALLUS			1
CALLUS 			1
AUTOLYSIS/NO NECROPSY			1

NUMBER OF ANIMALS WITH TISSUE EXAMINED MICROSCOPICALLY * NUMBER OF ANIMALS NECROPSIED
C	ONTRO	DL (UNTR)	LOWI	DOSE	HIGH	DOSE
ANIMALS INITIALLY IN STUDY	50		50		50	
ANIMALS NECROPSIED	50		50		50	
ANIMALS EXAMINED HISTOPATHOLOGICALLY	50		50		50	
NTEGUMENTARY SYSTEM						
*SKIN	(50)		(50)		(50)	
EPIDERMAL INCLUSION CYST		(2%)				
ABSCESS, NOS INFLAMMATION, CHRONIC		(2%) (2%)				
RESPIRATORY SYSTEM						
*NASAL MUCOSA	(50)		(50)		(50)	
EDEMA, NOS	(00)			(2%)	(50)	
INFLAMMATION, FOCAL			-	(2,0)	1	(2%)
INFLAMMATION, SUPPURATIVE						(2%)
*LARYNGEAL GLAND	(50)		(50)		(50)	(2170)
INFLAMMATION, SUPPURATIVE		(2%)	(00)		(50)	
#LUNG	(50)	(470)	(50)		(50)	
CONGESTION, NOS		(2%)		(4%)	, <i>F</i>	(6%)
EDEMA, INTERSTITIAL	1	(470)	Z	(4870)		
HYPERPLASIA, ALVEOLAR EPITHELIUM			1	(2%)	1	(2%)
HISTIOCYTOSIS	1	(2%)		(4%)		
#LUNG/ALVEOLI	(50)	(270)	(50)	(4970)	(50)	
HYPERPLASIA, ADENOMATOUS		(4%)		(2%)		(2%)
HISTIOCYTOSIS		(10%)		(52%)		(38%)
*MULTIPLE ORGANS LEUKOCYTOSIS, NOS #BONE MARROW HYPERPLASIA, RETICULUM CELL #SPLEEN PIGMENTATION, NOS HEMOSIDEROSIS HEMATOPOIESIS #MANDIBULAR L. NODE HYPERPLASIA, CYSTIC #MEDIASTINAL L. NODE CONGESTION, NOS ANGIECTASIS HYPERPLASIA, RETICULUM CELL	(50) 1 (50)	(4%) (2%) (2%)	(50) 1 (50) (50)	(2%) (2%) (2%)	(50) (50) 1 3 3 (50) 9 1 (50)	(2%) (2%) (6%) (18%) (2%) (4%)
#CELIAC LYMPH NODE	(50)	(470)	(50)		(50)	
HYPERPLASIA, NOS	(00)		(00)			(2%)
#PANCREATIC L. NODE HYPERPLASIA, CYSTIC	(50)		(50)		(50)	(2%)
#MESENTERIC L. NODE CONGESTION, NOS	(50)		(50)		(50)	(2%)
ANGIECTASIS HYPERPLASIA, RETICULUM CELL	1	(2%)				(2%)
#RENAL LYMPH NODE HYPERPLASIA, NOS	(50)		(50)		(50)	(2%)
#INGUINAL LYMPH NODE HYPERPLASIA, NOS	(50) 1	(2%)	(50)		(50)	()
#TRACHEA	(45)		(48)		(47)	
HYPERPLASIA, LYMPHOID	(-10)		(40)			(2%)
#LUNG	(50)		(50)		(50)	(~ ~)
LEUKOCYTOSIS, NOS	(00)		(00)			(2%)
#LIVER	(50)		(50)		(50)	(= /0)
			(00)			(2%)

TABLE C2. SUMMARY OF THE INCIDENCE OF NONNEOPLASTIC LESIONS IN FEMALE RATS IN
THE TWO-YEAR FEED STUDY OF HC BLUE NO. 2

	CONTRO	DL (UNTR)	LOWI	DOSE	HIGH	DOSE
HEMATOPOIETIC SYSTEM (Continued) #ADRENAL CORTEX	(49)		(50)	<u>, , , , , , , , , , , , , , , , , , , </u>	(49)	_ .
HEMATOPOIESIS		(2%)			()	
CIRCULATORY SYSTEM						
#MYOCARDIUM	(50)		(50)		(50)	
INFLAMMATION, FOCAL		(2%)				
FIBROSIS, FOCAL		(6%)	_	(8%)		(4%)
#CARDIAC VALVE INFLAMMATION, FOCAL	(50)		(50) 1	(2%)	(50)	
DIGESTIVE SYSTEM						
#SALIVARY GLAND	(50)		(50)		(49)	
INFLAMMATION, NOS	(30)			(2%)		
#LIVER	(50)		(50)		(50)	
DEFORMITY, NOS		(4%)		(4%)		(6%)
INFLAMMATION, FOCAL		(38%)		(36%)		(56%)
CHOLANGIOFIBROSIS		(18%)	14	(28%)	- 4	(8%)
DEGENERATION, CYSTIC				(4%)		(2%)
NECROSIS, FOCAL				(2%)		(2%)
METAMORPHOSIS FATTY	1	(2%)		(2%)	2	(4%)
PIGMENTATION, NOS	-	(100)		(2%)	•	(100)
CYTOPLASMIC VACUOLIZATION	-	(10%)		(30%) (20%)		(16%)
BASOPHILIC CYTO CHANGE FOCAL CELLULAR CHANGE	13	(26%)		(30%) (2%)	2	(4%)
CLEAR CELL CHANGE			1	(270)	1	(2%)
ANGIECTASIS	9	(4%)			1	(470)
HISTIOCYTOSIS		(2%)			1	(2%)
#LIVER/PERIPORTAL	(50)	(270)	(50)		(50)	(470)
CYTOPLASMIC VACUOLIZATION		(2%)	(00)		(00)	
#BILE DUCT	(50)	(2,0)	(50)		(50)	
HYPERPLASIA, NOS		(70%)		(88%)		(86%)
#PANCREAS	(49)		(50)		(50)	
ATROPHY, NOS				(2%)		
ATROPHY, FOCAL		(18%)	-	(18%)		(20%)
#STOMACH	(50)		(50)		(50)	(
INFLAMMATION, FOCAL			((2%)
#GASTRIC MUCOSA	(50)		(50)		(50)	(00)
EROSION	(50)		(50)			(2%)
#FORESTOMACH DEFORMITY, NOS	(50)		(50)		(50)	(2%)
EDEMA, NOS			9	(4%)	1	(4.70)
INFLAMMATION, NOS				(2%)		
INFLAMMATION, CHRONIC	1	(2%)	•	(/ - /		
#S. INTEST/MUSCULARIS	(50)	((50)		(50)	
HYPERPLASIA, FOCAL			(-))			(2%)
#CECUM	(48)		(50)		(50)	
PIGMENTATION, NOS		. <u> </u>			1	(2%)
JRINARY SYSTEM						
#KIDNEY	(50)		(50)	((50)	
CONGESTION, NOS		(3	(6%)	1	(2%)
INFLAMMATION, FOCAL		(2%)				/ ** **
NEPHROSIS, NOS		(50%)	25	(50%)	16	(32%)
NECROSIS, MEDULLARY		(2%)				
PIGMENTATION, NOS		(2%)			/ 2 A	
#KIDNEY/MEDULLA CAST, NOS	(50)		(50)		(50)	(2%)

TABLE C2. SUMMARY OF THE INCIDENCE OF NONNEOPLASTIC LESIONS IN FEMALE RATS IN THE TWO-YEAR FEED STUDY OF HC BLUE NO. 2 (Continued)

	CONTRO	L (UNTR)	LOWI	DOSE	HIGH	DOSE
URINARY SYSTEM (Continued)					<u></u>	
#KIDNEY/TUBULE	(50)		(50)		(50)	
CAST, NOS		(2%)	(00)		(00)	
DEGENERATION, HYALINE	-	(=,	1	(2%)		
#KIDNEY/PELVIS	(50)		(50)	(=,	(50)	
DILATATION, NOS		(2%)			(,	
CALCIFICATION, NOS	-	(=,0)			2	(4%)
#URINARY BLADDER/MUCOSA	(50)		(50)		(48)	
POLYPOID HYPERPLASIA	(00)					(2%)
NDOCRINE SYSTEM		- <u></u>				
#PITUITARY	(49)		(50)		(49)	
CYST, NOS	(45)		(00)			(6%)
FOCAL CELLULAR CHANGE			1	(2%)	5	(0 , 0)
HYPERPLASIA, NOS	1	(2%)		(2%)		
HYPERPLASIA, FOCAL		(4%)		(14%)	2	(6%)
ANGIECTASIS		(470)		(14%) (26%)		(0%) (16%)
#ADRENAL	(49)	(070)	(50)	(20%)	(49)	(10%)
CONGESTION, NOS	(43)			(2%)		(2%)
ANGIECTASIS	1	(2%)		(2%)	1	(270)
#ADRENAL CORTEX	(49)	(270)	(50)	(2,0)	(49)	
ACCESSORY STRUCTURE		(2%)		(4%)		(4%)
					23	
CYTOPLASMIC VACUOLIZATION		(6%)		(16%)	3	(6%)
FOCAL CELLULAR CHANGE		(6%)	2	(4%)		
ANGIECTASIS		(2%)			(10)	
#ADRENAL MEDULLA	(49)		(50)	(07)	(49)	
HYPERPLASIA, NOS		(1		(2%)		(0~)
HYPERPLASIA, FOCAL		(4%)	2	(4%)	4	(8%)
ANGIECTASIS		(2%)				
#THYROID	(49)		(50)		(49)	
ULTIMOBRANCHIAL CYST		(2%)			2	(4%)
CYSTIC FOLLICLES		(4%)				
HYPERPLASIA, C-CELL		(8%)		(6%)		(4%)
#THYROID FOLLICLE	(49)		(50)		(49)	
PIGMENTATION, NOS			1	(2%)		
REPRODUCTIVE SYSTEM						
*MAMMARY GLAND	(50)		(50)		(50)	
GALACTOCELE		(4%)				
CYSTIC DUCTS	1	(2%)				
HYPERPLASIA, CYSTIC				(0.0.4)		(2%)
CYSTIC DISEASE		(88%)		(88%)		(58%)
*PREPUTIAL GLAND	(50)		(50)		(50)	
INFLAMMATION, SUPPURATIVE		(2%)				
*CLITORAL GLAND	(50)		(50)		(50)	
CYSTIC DUCTS				(2%)		(2%)
INFLAMMATION, SUPPURATIVE				(2%)		(2%)
*VAGINA	(50)		(50)		(50)	
INFLAMMATION, SUPPURATIVE				(2%)		
#UTERUS	(50)		(50)		(50)	
HYDROMETRA			2	(4%)		(4%)
HEMORRHAGE					1	(2%)
HEMATOMETRA	1	(2%)			1	(2%)
INFLAMMATION, SUPPURATIVE		(2%)	1	(2%)		(6%)
			(50)		(50)	
#UTERINE SEROSA	(50)		(00)			

TABLE C2. SUMMARY OF THE INCIDENCE OF NONNEOPLASTIC LESIONS IN FEMALE RATS IN
THE TWO-YEAR FEED STUDY OF HC BLUE NO. 2 (Continued)

	CONTROL	(UNTR)	LOWI	DOSE	HIGH	DOSE
REPRODUCTIVE SYSTEM (Continued)					···	
#UTERUS/ENDOMETRIUM	(50)		(50)		(50)	
CYST, NOS		4%)		(2%)		(2%)
INFLAMMATION, CHRONIC						(2%)
HYPERPLASIA, PAPILLARY	1 (2%)				x
HYPERPLASIA, CYSTIC	,	8%)	8	(16%)	14	(28%)
DECIDUAL ALTERATION, NOS	- 、	,		(2%)		
#ENDOMETRIAL GLAND	(50)		(50)		(50)	
CYST, NOS	(/		()			(2%)
#OVARY/PAROVARIAN	(50)		(50)		(50)	
INFLAMMATION, SUPPURATIVE					1	(2%)
#OVARY	(50)		(50)		(50)	
CYST, NOS	1 (2%)	1	(2%)	3	(6%)
FOLLICULAR CYST, NOS	3 (6	(12%)		(6%)
PAROVARIAN CYST	1 (2%)			3	(6%)
INFLAMMATION, SUPPURATIVE				(2%)		
#MESOVARIUM	(50)		(50)		(50)	
NECROSIS, FAT	1 (2%) 				
NERVOUS SYSTEM						
#BRAIN	(50)		(50)		(50)	
HEMORRHAGE	1 ()	2%)	1	(2%)		
NECROSIS, FOCAL	1 (2%)				
#PALLIUM	(50)		(50)		(50)	
DISPLACEMENT, NOS					-	(12%)
#CEREBRAL BASAL SURFACE	(50)		(50)		(50)	(0.21)
DISPLACEMENT, NOS	1 (2%)				(8%)
#HYPOTHALAMUS	(50)	•	(50)		(50)	
DISPLACEMENT, NOS	4 (8%)		(4%)		
GLIOSIS				(2%)	(50)	
*SPINAL CORD	(50)		(50)	(00)	(50)	
HEMORRHAGE			1	(2%)		
SPECIAL SENSE ORGANS						
*EYE	(50)		(50)		(50)	
RETINOPATHY	3 (6%)		(24%)		(20%)
CATARACT				(20%)		(4%)
*EAR	(50)		(50)	(0~)	(50)	
INFLAMMATION, SUPPURATIVE				(2%)	/=	
*TYMPANIC CAVITY HYPEROSTOSIS	(50)		(50)		(50) 9	(18%)
MUSCULOSKELETAL SYSTEM *SKULL	(50)		(50)		(50)	
HYPEROSTOSIS	2 (4	196)		(38%)		(98%)
······································	<u> </u>	• <i>r</i> 0)	19			(00 %)
BODY CAVITIES			/ 			
*MEDIASTINUM	(50)		(50)		(50)	
INFLAMMATION, NOS	1 (270)			•	(904)
INFLAMMATION, SUPPURATIVE	(20)		(20)			(2%)
*MESENTERY NECROSIS, FAT	(50) 3 (1	COL)	(50)	(6%)	(50)	(2%)
	3 0			117771	1	14701

TABLE C2.SUMMARY OF THE INCIDENCE OF NONNEOPLASTIC LESIONS IN FEMALE RATS IN
THE TWO-YEAR FEED STUDY OF HC BLUE NO. 2 (Continued)

	CONTROL (UNTR)	LOW DOSE	HIGH DOSE
ALL OTHER SYSTEMS			
*MULTIPLE ORGANS	(50)	(50)	(50)
INFLAMMATION, SUPPURATIVE	1 (2%)	1 (2%)	
PIGMENTATION, NOS		1 (2%)	
SOLE OF FOOT			
ABSCESS, NOS	1		
INFLAMMATION, CHRONIC	1		
ULCER, CHRONIC	1		
HYPERPLASIA, EPITHELIAL	1		
CALLUS	12	6	
OMENTUM			
NECROSIS, FAT		1	
BROAD LIGAMENT			
NECROSIS, FAT	6	2	

TABLE C2. SUMMARY OF THE INCIDENCE OF NONNEOPLASTIC LESIONS IN FEMALE RATS IN
THE TWO-YEAR FEED STUDY OF HC BLUE NO. 2 (Continued)

SPECIAL MORPHOLOGY SUMMARY NONE

NON

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

HC Blue No. 2, NTP TR 293

APPENDIX D

SUMMARY OF THE INCIDENCE OF NONNEOPLASTIC LESIONS IN MICE IN THE TWO-YEAR FEED STUDIES OF HC BLUE NO. 2

NIMALS INITIALLY IN STUDY NIMALS MISSING NIMALS NECROPSIED NIMALS EXAMINED HISTOPATHOLOGICALLY *SKIN ULCER, NOS INFLAMMATION, FOCAL ULCER, FOCAL INFLAMMATION, SUPPURATIVE INFLAMMATION, ACUTE SUPPURATIVE INFLAMMATION, ACUTE/CHRONIC INFLAMMATION, CHRONIC	50 50 50 (50) 10		50 1 48 48		50 49	
NIMALS MISSING NIMALS NECROPSIED NIMALS EXAMINED HISTOPATHOLOGICALLY *SKIN ULCER, NOS INFLAMMATION, FOCAL ULCER, FOCAL INFLAMMATION, SUPPURATIVE INFLAMMATION, ACUTE SUPPURATIVE INFLAMMATION, ACUTE/CHRONIC INFLAMMATION, CHRONIC	(50)	<u></u>	1 48			
NIMALS EXAMINED HISTOPATHOLOGICALLY NTEGUMENTARY SYSTEM *SKIN ULCER, NOS INFLAMMATION, FOCAL ULCER, FOCAL INFLAMMATION, SUPPURATIVE INFLAMMATION, ACUTE SUPPURATIVE INFLAMMATION, ACUTE/CHRONIC INFLAMMATION, CHRONIC	(50)		-			
NTEGUMENTARY SYSTEM *SKIN ULCER, NOS INFLAMMATION, FOCAL ULCER, FOCAL INFLAMMATION, SUPPURATIVE INFLAMMATION, ACUTE SUPPURATIVE INFLAMMATION, ACUTE/CHRONIC INFLAMMATION, CHRONIC	(50)		48			
*SKIN ULCER, NOS INFLAMMATION, FOCAL ULCER, FOCAL INFLAMMATION, SUPPURATIVE INFLAMMATION, ACUTE SUPPURATIVE INFLAMMATION, ACUTE/CHRONIC INFLAMMATION, CHRONIC					49	
*SKIN ULCER, NOS INFLAMMATION, FOCAL ULCER, FOCAL INFLAMMATION, SUPPURATIVE INFLAMMATION, ACUTE SUPPURATIVE INFLAMMATION, ACUTE/CHRONIC INFLAMMATION, CHRONIC						
INFLAMMATION, FOCAL ULCER, FOCAL INFLAMMATION, SUPPURATIVE INFLAMMATION, ACUTE SUPPURATIVE INFLAMMATION, ACUTE/CHRONIC INFLAMMATION, CHRONIC	10		(48)		(49)	
ULCER, FOCAL INFLAMMATION, SUPPURATIVE INFLAMMATION, ACUTE SUPPURATIVE INFLAMMATION, ACUTE/CHRONIC INFLAMMATION, CHRONIC		(20%)	4	(8%)	6	(12%)
INFLAMMATION, SUPPURATIVE INFLAMMATION, ACUTE SUPPURATIVE INFLAMMATION, ACUTE/CHRONIC INFLAMMATION, CHRONIC				(2%)		
INFLAMMATION, ACUTE SUPPURATIVE INFLAMMATION, ACUTE/CHRONIC INFLAMMATION, CHRONIC	_		1	(2%)		
INFLAMMATION, ACUTE/CHRONIC INFLAMMATION, CHRONIC		(4%)				
INFLAMMATION, CHRONIC		(2%)				
		(2%)				
		(34%)	25	(52%)	5	(10%)
ULCER, CHRONIC	1	(2%)		(84)		
INFLAMMATION, CHRONIC FOCAL			1	(2%)	1	(2%)
INFLAMMATION CHRONIC SUPPURATIVE		(2%)				
FIBROSIS		(12%)	_		13	(27%)
FIBROSIS, FOCAL	2	(4%)		(2%)		
INFECTION, FUNGAL				(2%)		
NECROSIS, NOS				(2%)		
PIGMENTATION, NOS				(2%)		(0.0)
HYPERPLASIA, NOS				(4%)	1	(2%)
ACANTHOSIS	(50)			(4%)	(40)	
*SUBCUT TISSUE	(50)		(48)		(49)	(00)
EDEMA, NOS				(00)	1	(2%)
INFLAMMATION, NECROTIZING		(0~)	1	(2%)		
INFLAMMATION, ACUTE/CHRONIC		(2%)		(0.0)	•	(100)
INFLAMMATION, CHRONIC		(12%)	1	(2%)		(18%)
INFLAMMATION, CHRONIC FOCAL		(2%)			1	(2%)
INFLAMMATION CHRONIC SUPPURATIVE	2	(4%)		(
INFLAMMATION, GRANULOMATOUS	_			(2%)		
INFLAMMATION GRANULOMATOUS FOCAL	L			(2%)		
INFLAMMATION, PYOGRANULOMATOUS		(1	(2%)		
FIBROSIS	1	(2%)		(07)		
INFECTION, FUNGAL		(0.01)	1	(2%)		
METAPLASIA, OSSEOUS	1	(2%)				(2%)
ESPIRATORY SYSTEM	(FA)				(40)	
#TRACHEAL GLAND INFLAMMATION, SUPPURATIVE	(50)		(47)		(49) 1	(2%)
#LUNG/BRONCHUS	(50)		(48)		(49)	(470)
LYMPHOCYTIC INFLAMMATORY INFILTR	(00)		(40)	(2%)	(47)	
	(50)		(48)	(470)	(49)	
#LUNG LYMPHOCYTIC INFLAMMATORY INFILTR	(00)			(4%)		(4%)
INFLAMMATION, INTERSTITIAL				(4,70) (2%)	2	
INFLAMMATION, INTERSTITIAL INFLAMMATION, CHRONIC			1	(470)	1	(2%)
PNEUMONIA INTERSTITIAL CHRONIC			9	(4%)	1	
INFLAMMATION, CHRONIC FOCAL			4		1	(2%)
CRYSTALS, NOS	1	(2%)			•	(= //)
ALVEOLAR MACROPHAGES		(2%)			1	(2%)
HYPERPLASIA, ALVEOLAR EPITHELIUM	•			(2%)	•	~,

TABLE D1. SUMMARY OF THE INCIDENCE OF NONNEOPLASTIC LESIONS IN MALE MICE IN
THE TWO-YEAR FEED STUDY OF HC BLUE NO. 2

	CONTRO	L (UNTR)	LOWI	DOSE	HIGH	DOSE
IEMATOPOIETIC SYSTEM						
*MULTIPLE ORGANS	(50)		(48)		(49)	
LEUKEMOID REACTION		(2%)	(40)		(10)	
HEMATOPOIESIS	-	(=,+,	1	(2%)	1	(2%)
#BONE MARROW	(50)		(45)	(_,_,	(49)	(,
NECROSIS, NOS	(= =)	(2%)	(/		• •	(2%)
ATROPHY, NOS		(2%)			_	(,
MYELOFIBROSIS		(2%)				
HYPERPLASIA, GRANULOCYTIC		(4%)	3	(7%)	2	(4%)
MYELOPOIESIS	_	()		(2%)	_	、 - ,
#SPLEEN	(50)		(47)	()	(49)	
ATROPHY, NOS	,			(2%)		
HYPERPLASIA, LYMPHOID				(2%)	1	(2%)
HEMATOPOIESIS	10	(20%)		(13%)		(8%)
#SPLENIC CAPSULE	(50)	(/	(47)	((49)	
ACCESSORY STRUCTURE	(,		(/			(2%)
#PANCREATIC L. NODE	(50)		(47)		(49)	(,
INFLAMMATION, GRANULOMATOUS	((2%)	()	
INFECTION, FUNGAL				(2%)		
#LUMBAR LYMPH NODE	(50)		(47)		(49)	
HYPERPLASIA, LYMPHOID	•	(2%)	(,		(,	
#MESENTERIC L. NODE	(50)	(=,=,	(47)		(49)	
ANGIECTASIS	,	(16%)		(9%)	· _	(14%)
HYPERPLASIA, LYMPHOID		(2%)		(2%)		(4%)
#AXILLARY LYMPH NODE	(50)	(2,0)	(47)	(2,0)	(49)	(4,4)
HYPERPLASIA, LYMPHOID	(00)			(2%)	(40)	
#INGUINAL LYMPH NODE	(50)		(47)	(2 %)	(49)	
PIGMENTATION, NOS		(2%)	(47)		(40)	
HYPERPLASIA, LYMPHOID		(4%)	9	(4%)		
#LIVER	(50)	(470)	(48)	(4,0)	(49)	
LEUKOCYTOSIS, NOS	(00)			(2%)	(40)	
HEMATOPOIESIS				(4%)	1	(2%)
#PEYER'S PATCH	(48)		(45)	(4,0)	(48)	
HYPERPLASIA, LYMPHOID		(2%)		(2%)	(10)	
IRCULATORY SYSTEM		·····				
*MULTIPLE ORGANS	(50)		(48)		(49)	
THROMBUS, ORGANIZED					1	(2%)
*SKIN	(50)		(48)		(49)	
LYMPHANGIECTASIS			1	(2%)		
*SUBCUT TISSUE	(50)		(48)		(49)	
LYMPHANGIECTASIS						(2%)
#MYOCARDIUM	(50)		(48)		(49)	
INFLAMMATION, CHRONIC FOCAL					1	(2%)
*SPERMATIC ARTERY	(50)		(48)		(49)	
LYMPHOCYTIC INFLAMMATORY INFILT	R 1	(2%)				
DIGESTIVE SYSTEM						
#LIVER	(50)		(48)		(49)	_
NECROSIS, COAGULATIVE	4	(8%)		(6%)	1	(2%)
NECROSIS, ISCHEMIC			1	(2%)		
CYTOPLASMIC VACUOLIZATION				(2%)	1	(2%)
FOCAL CELLULAR CHANGE	1	(2%)		(2%)	3	(6%)
ANGIECTASIS						(2%)
#LIVER/CENTRILOBULAR	(50)		(48)		(49)	
		(2%)				
NECROSIS, FOCAL			(40)		(49)	
#BILE DUCT	(50)		(48)		(40)	
	(50)			(2%)		
#BILE DUCT	(50) (50)			(2%)	(49)	

TABLE D1. SUMMARY OF THE INCIDENCE OF NONNEOPLASTIC LESIONS IN MALE MICE IN THE TWO-YEAR FEED STUDY OF HC BLUE NO. 2 (Continued)

	CONTRO	L (UNTR)	LOWI	DOSE	HIGH	DOSE
DIGESTIVE SYSTEM (Continued)		<u></u>				
#GASTRIC MUCOSA	(50)		(47)		(49)	
CYST, NOS	(00)			(2%)	(43)	
HYPERPLASIA, ADENOMATOUS				(2%) (2%)		
#COLON	(50)		(47)	(270)	(49)	
PARASITISM	(00)			(2%)	(43)	
	an rai an an tha tha dha day ay na an an an an					i
URINARY SYSTEM	(FO)		(40)		(40)	
#KIDNEY	(50)	(0.0)	(48)		(49)	
HYDRONEPHROSIS	1	(2%)				(07)
CYST, NOS					1	(2%)
MULTIPLE CYSTS		(2%)				
LYMPHOCYTIC INFLAMMATORY INFILT		(30%)	16	(33%)	10	(20%)
INFLAMMATION, SUPPURATIVE	1	(2%)				
GLOMERULONEPHRITIS, CHRONIC						(2%)
NEPHROSIS, NOS		(2%)				(6%)
#KIDNEY/CORTEX	(50)		(48)		(49)	
CYST, NOS	1	(2%)				
#KIDNEY/TUBULE	(50)		(48)		(49)	
DEGENERATION, HYALINE					1	(2%)
#URINARY BLADDER	(50)		(47)		(48)	
LYMPHOCYTIC INFLAMMATORY INFILT		(2%)	× - • •			
INFLAMMATION, CHRONIC		(2%)				
*URETHRA	(50)	(2,2)	(48)		(49)	
INFLAMMATION, SUPPURATIVE	• •	(4%)	(40)		(40)	
ENDOCRINE SYSTEM #PITUITARY CYST, NOS HYPERPLASIA, FOCAL #ADRENAL CORTEX CYTOPLASMIC VACUOLIZATION HYPERPLASIA, FOCAL #ADRENAL MEDULLA HYPERPLASIA, FOCAL #THYROID CYSTIC FOLLICLES INFLAMMATION, ACUTE/CHRONIC DEGENERATION, CYSTIC	(50) (50) 1 (44)	(2%) (2%) (5%)	1 (47) (47) 2 (45) 2	(2%) (2%) (4%) (4%) (18%)	1 (49) 1 (49) 2 1	(2%) (2%) (2%) (4%) (2%) (12%)
HYPERPLASIA, CYSTIC		(2%)	0	(10%)	U	(12%)
HYPERPLASIA, CISIC HYPERPLASIA, FOLLICULAR-CELL		(11%)	0	(4%)	A	(8%)
#THYROID FOLLICLE	(44)	(1170)	(45)	(=70)	(49)	
CRYSTALS, NOS	(44)		(10)			(2%)
PIGMENTATION, NOS						(2%)
HYPERPLASIA, CYSTIC	1	(2%)	1	(2%)		(2%)
#PANCREATIC ISLETS	(50)		(46)		(49)	~~~~/
HYPERPLASIA, NOS		(2%)	()		()	
EPRODUCTIVE SYSTEM *BULBOURETHRAL GLAND INFLAMMATION, SUPPURATIVE *PREPUTIAL GLAND	(50)		(48)		(49) 1 (49)	(2%)
CYST, NOS	(00)			(2%)	(
CYSTIC DUCTS	R	(12%)		(8%)	3	(6%)
LYMPHOCYTIC INFLAMMATORY INFILT		(2%)	4			(2%)
INFLAMMATION, SUPPURATIVE		(2%)	9	(4%)	1	
INFLAMMATION, SUPPORATIVE INFLAMMATION, CHRONIC		(2%)	2	(-170)		
INFLAMMATION, CHRONIC INFLAMMATION CHRONIC SUPPURATIVI		(6%)	5	(10%)	A	(8%)

TABLE D1. SUMMARY OF THE INCIDENCE OF NONNEOPLASTIC LESIONS IN MALE MICE IN THE TWO-YEAR FEED STUDY OF HC BLUE NO. 2 (Continued)

HC Blue No. 2, NTP TR 293

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	CONTRO	DL (UNTR)	LOWI	DOSE	HIGH	DOSE
REPRODUCTIVE SYSTEM (Continued)						
#PROSTATE	(50)		(48)		(49)	
INFLAMMATION, SUPPURATIVE		(2%)		(2%)	()	
INFLAMMATION, ACUTE FOCAL		(2%)	-	(1,0)		
INFLAMMATION CHRONIC SUPPURATIV		(2%)				
HYPERPLASIA, EPITHELIAL		(2%)				
*SEMINAL VESICLE	(50)	(270)	(48)		(49)	
DILATATION, NOS	(00)			(2%)	(40)	
DISTENTION	9	(4%)	•	(2,~)		
RETENTION OF CONTENT		(2%)				
INFLAMMATION, SUPPURATIVE		(4%)	1	(2%)		
INFLAMMATION, ACUTE/CHRONIC	~	(4,0)		(4%)		
INFLAMMATION, CHRONIC	1	(2%)		(6%)	3	(6%)
HYPERPLASIA, EPITHELIAL	•	$(2 \mathcal{N})$		(4%)	Ŭ	(0,0)
#TESTIS	(50)		(48)		(49)	
ATROPHY, NOS	(00)			(2%)	(40)	
*EPIDIDYMIS	(50)		(48)		(49)	
DILATATION, NOS	(00)			(2%)	(40)	
INFLAMMATION, CHRONIC FOCAL				(4%)		
*SPERMATIC CORD	(50)		(48)		(49)	
STEATITIS	(00)			(2%)		(2%)
	<u> </u>					
NERVOUS SYSTEM *CHOROID PLEXUS	(50)		(48)		(49)	
LYMPHOCYTIC INFLAMMATORY INFILT		(2%)	(40)		(40)	
#BRAIN		(270)	(48)		(49)	
HEMORRHAGE	(50)	(90)	(40)		(43)	
CORPORA AMYLACEA		(2%) (10%)	1	(2%)		
SPECIAL SENSE ORGANS						
NONE						
MUSCULOSKELETAL SYSTEM			, <u></u> ,,			
*SKULL	(50)		(48)		(49)	
HYPEROSTOSIS						(2%)
*ABDOMINAL MUSCLE	(50)		(48)		(49)	
HEMORRHAGE	1	(2%)				
INFLAMMATION, GRANULOMATOUS			1	(2%)		
NECROSIS, FOCAL	1	(2%)				
BODY CAVITIES						
*ABDOMINAL WALL	(50)		(48)		(49)	
INFECTION, FUNGAL				(2%)		
*MESENTERY	(50)		(48)		(49)	
STEATITIS	/			(2%)		(4%)
NECROSIS, FAT	2	(4%)				
ALL OTHER SYSTEMS						
	(50)		(48)		(49)	
*MULTIPLE ORGANS						

TABLE D1. SUMMARY OF THE INCIDENCE OF NONNEOPLASTIC LESIONS IN MALE MICE IN
THE TWO-YEAR FEED STUDY OF HC BLUE NO. 2 (Continued)

TABLE D1. SUMMARY OF THE INCIDENCE OF NONNEOPLASTIC LESIONS IN MALE MICE IN
THE TWO-YEAR FEED STUDY OF HC BLUE NO. 2 (Continued)

	CONTROL (UNTR)	LOW DOSE	HIGH DOSE
SPECIAL MORPHOLOGY SUMMARY NO LESION REPORTED			2
ANIMAL MISSING/NO NECROPSY AUTOLYSIS/NO NECROPSY		1 1	1

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

. C	ONTRO	DL (UNTR)	LOWI	DOSE	HIGH	DOSE
ANIMALS INITIALLY IN STUDY	50		50		50	
ANIMALS NECROPSIED	50		50		50	
ANIMALS EXAMINED HISTOPATHOLOGICALLY	50		50		50	
NTEGUMENTARY SYSTEM						
*SKIN	(50)		(50)		(50)	
ULCER, NOS		(2%)				
INFLAMMATION, CHRONIC	1	(2%)	_	/ - - / .		
ALOPECIA			1	(2%)		
ACANTHOSIS		(2%)				
*SUBCUT TISSUE	(50)		(50)		(50)	
INFLAMMATION, CHRONIC		(2%)			1	(2%)
RESPIRATORY SYSTEM						
#LUNG	(50)		(49)		(50)	
CONGESTION, NOS		(2%)				
LYMPHOCYTIC INFLAMMATORY INFILTR	1	(2%)			2	(4%)
INFLAMMATION, CHRONIC		(2%)				
INFLAMMATION GRANULOMATOUS FOCA	L 2	(4%)				
PIGMENTATION, NOS			1	(2%)		
ALVEOLAR MACROPHAGES				(2%)		
HYPERPLASIA, ADENOMATOUS	1	(2%)	2	(4%)		
IEMATOPOIETIC SYSTEM						
*MULTIPLE ORGANS	(50)		(50)		(50)	
MYELOPROLIFERATIVE DISORDER	(,			(2%)	(
HYPERPLASIA, LYMPHOID	2	(4%)	-	(=)	3	(6%)
HEMATOPOIESIS	_	(1.0)	3	(6%)		(4%)
*SUBCUT TISSUE	(50)		(50)		(50)	
MASTOCYTOSIS		(2%)				
#BONE MARROW	(50)		(50)		(50)	
DEGENERATION, NOS		(2%)				
MYELOFIBROSIS	-	、	1	(2%)		
HYPERPLASIA, GRANULOCYTIC				(6%)	4	(8%)
#SPLEEN	(50)		(50)	(,	(49)	
HYPERPLASIA, LYMPHOID		(12%)	• •	(2%)	1 - 7	(4%)
HEMATOPOIESIS		(16%)		(18%)		(41%)
#SPLENIC CAPSULE	(50)	((50)	((49)	(,
INFLAMMATION, CHRONIC	((2%)	()	
FIBROSIS, DIFFUSE				,	1	(2%)
#MANDIBULAR L. NODE	(50)		(50)		(48)	
HYPERPLASIA, LYMPHOID		(2%)				
#MESENTERIC L. NODE	(50)		(50)		(48)	
ANGIECTASIS			2	(4%)		
HYPERPLASIA, LYMPHOID	2	(4%)				(2%)
#RENAL LYMPH NODE	(50)		(50)		(48)	
CONGESTION, NOS					1	(2%)
ANGIECTASIS			1	(2%)		
HYPERPLASIA, LYMPHOID						(8%)
#LIVER	(50)		(50)		(49)	
LEUKOCYTOSIS, NOS		(4%)		(2%)		(8%)
HEMATOPOIESIS	2	(4%)		(6%)		(22%)
#PEYER'S PATCH	(49)		(46)		(48)	
HYPERPLASIA, LYMPHOID		(2%)				(2%)
#ADRENAL	(49)		(50)		(49)	
HEMATOPOIESIS					•	(4%)

TABLE D2. SUMMARY OF THE INCIDENCE OF NONNEOPLASTIC LESIONS IN FEMALE MICE IN THE TWO-YEAR FEED STUDY OF HC BLUE NO. 2

C C	CONTRO	DL (UNTR)	LOWI	DOSE	HIGH	DOSI
HEMATOPOIETIC SYSTEM (Continued)				· · · · · · · · · · · · · · · · · · ·		
#THYMUS	(49)		(49)		(49)	
HYPERPLASIA, LYMPHOID		(2%)	(,			(2%)
CIRCULATORY SYSTEM					<u> </u>	
#THYROID	(48)		(49)		(49)	
PERIARTERITIS			1	(2%)		
DIGESTIVE SYSTEM						
#LIVER	(50)		(50)		(49)	
CYST, NOS	1	(2%)				
MULTIPLE CYSTS	1	(2%)				
LYMPHOCYTIC INFLAMMATORY INFILTE			3	(6%)	1	(2%)
INFLAMMATION, ACUTE/CHRONIC		(2%)				
INFLAMMATION GRANULOMATOUS FOC.			1	(2%)		
NECROSIS, FOCAL	1	(2%)		(0~)	-	(A ~
NECROSIS, COAGULATIVE		(0.27)	4	(8%)	1	(2%)
NECROSIS, ISCHEMIC	1	(2%)		(0~)		
PIGMENTATION, NOS	-	(4.47)		(2%)	-	/0~·
CYTOPLASMIC VACUOLIZATION	3	(6%)	1	(2%)		(2%)
FOCAL CELLULAR CHANGE	-				1	(2%)
CYTOLOGIC ALTERATION, NOS		(2%)				
ANGIECTASIS		(2%)				
#PANCREAS	(49)		(48)	(0~)	(49)	(A ~)
CYST, NOS			-	(2%)	1	(2%)
INFLAMMATION, ACUTE NECROTIZING		(0))	1	(2%)	•	(10)
INFLAMMATION, CHRONIC		(2%)	(40)			(4%)
#PANCREATIC ACINUS	(49)	(07)	(48)		(49)	(00)
ATROPHY, NOS		(2%)			1	(2%)
HYPERPLASIA, FOCAL		(2%)	(40)		(40)	
#STOMACH	(49)		(48)	(90)	(49)	
CYST, NOS	(40)			(2%)	(49)	
#FORESTOMACH	(49)		(48)	(2%)	(45)	
ULCER, NOS				(2%)		
INFLAMMATION, GRANULOMATOUS	0	(40)				
HYPERKERATOSIS #SMALL INTESTINE		(4%)		(2%)	(48)	
#SMALL INTESTINE	(49)	(99)	(46)		(48)	
AMYLOIDOSIS #COLONIC MUSCULARIS PROPRIA		(2%)	(49)		(49)	
ABSCESS, CHRONIC	(50)			(2%)	(43)	
JRINARY SYSTEM		<u></u>				
#KIDNEY	(50)		(50)		(50)	
HYDRONEPHROSIS		(2%)	(00)		(00)	
GLOMERULONEPHRITIS, NOS	-				1	(2%)
PYELONEPHRITIS, NOS						(4%)
LYMPHOCYTIC INFLAMMATORY INFILTR	2 11	(22%)	25	(50%)		(30%)
INFLAMMATION, CHRONIC		(2%)		-		
GLOMERULONEPHRITIS, CHRONIC					1	(2%)
INFLAMMATION, CHRONIC FOCAL	1	(2%)				
#RENAL PAPILLA	(50)		(50)		(50)	
NECROSIS, NOS		(2%)				
#KIDNEY/GLOMERULUS	(50)		(50)		(50)	
AMYLOIDOSIS	1	(2%)				
#KIDNEY/PELVIS	(50)		(50)		(50)	
LYMPHOCYTIC INFLAMMATORY INFILTR		(2%)		(2%)		
#URINARY BLADDER	(49)		(50)	_	(49)	
LYMPHOCYTIC INFLAMMATORY INFILTR	2		1	(2%)		

TABLE D2. SUMMARY OF THE INCIDENCE OF NONNEOPLASTIC LESIONS IN FEMALE MICE IN
THE TWO-YEAR FEED STUDY OF HC BLUE NO. 2 (Continued)

(CONTRO	DL (UNTR)	LOWI	DOSE	HIGH	DOSE
ENDOCRINE SYSTEM						
#PITUITARY	(49)		(48)		(49)	
CYST, NOS		(2%)		(2%)	(43)	
HYPERPLASIA, NOS	1	(270)	1	(270)	1	(2%)
HYPERPLASIA, NOS HYPERPLASIA, FOCAL	0	(6%)	9	(6%)		
ANGIECTASIS						(2%)
		(12%)		(6%)		(12%
#ADRENAL	(49)		(50)		(49)	
ANGIECTASIS	(10)		(50)			(2%)
#ADRENAL CORTEX	(49)		(50)		(49)	
ECTOPIA		(0~)	1	(2%)		
DEGENERATION, CYSTIC		(2%)				
CYTOPLASMIC VACUOLIZATION	1	(2%)				
HYPERPLASIA, NOS						(2%)
#ADRENAL MEDULLA	(49)		(50)		(49)	
HYPERPLASIA, FOCAL				(2%)		
#THYROID	(48)		(49)		(49)	
CYSTIC FOLLICLES		(2%)			1	(2%)
LYMPHOCYTIC INFLAMMATORY INFILTE	1 ک	(2%)				
DEGENERATION, CYSTIC		(6%)	2	(4%)	1	(2%)
HYPERPLASIA, CYSTIC	-		-			(4%)
HYPERPLASIA, FOLLICULAR-CELL	3	(6%)	2	(4%)		(2%)
#THYROID FOLLICLE	(48)	(0,6)	(49)		(49)	(= /•/
PIGMENTATION, NOS	(10)		(10)			(2%)
HYPERPLASIA, CYSTIC						(2%)
						(2,0)
REPRODUCTIVE SYSTEM						
*MAMMARY GLAND	(50)		(50)		(50)	
CYSTIC DUCTS	2	(4%)			5	(10%)
*CLITORAL GLAND	(50)		(50)		(50)	
CYSTIC DUCTS	1	(4%)				(4%)
#UTERUS	(50)		(50)		(50)	()
HEMORRHAGE		(2%)	(00)		(00)	
INFLAMMATION, SUPPURATIVE	-	(2,0)			1	(2%)
	1	(2%)			1	(270)
INFLAMMATION, ACUTE SUPPURATIVE		(270)	(50)		(50)	
#UTERUS/ENDOMETRIUM	(50)	(0.01)	(50)	(0.00)	(50)	
INFLAMMATION, SUPPURATIVE	4	(8%)		(6%)		(10%)
ABSCESS, CHRONIC				(2%)		(2%)
HYPERPLASIA, CYSTIC	-	(86%)	45	(90%)	38	(76%)
HYPERPLASIA, ADENOMATOUS		(2%)				
#UTERUS/MYOMETRIUM	(50)		(50)		(50)	
ABSCESS, CHRONIC						(2%)
#OVARY	(49)		(50)		(50)	
CYST, NOS		(4%)		(2%)	1	(2%)
CYSTIC FOLLICLES		(4%)	14	(28%)	3	(6%)
INFLAMMATION, ACUTE SUPPURATIVE				(2%)		
ABSCESS, CHRONIC	5	(10%)		(20%)	23	(46%)
HYPERPLASIA, GRANULOSA-CELL		(2%)		(,
HYPERPLASIA, NOS	_	(1	(2%)
EDVALCE SVSTEM						
IERVOUS SYSTEM	1201		(20)		(50)	
#BRAIN/MENINGES	(50)	(90)	(50)		(00)	
LYMPHOCYTIC INFLAMMATORY INFILTR	, 1	(2%)			•	(901)
PIGMENTATION, NOS						(2%)
#CEREBRAL VENTRICLE	(50)	((50)		(50)	
HYDROCEPHALUS, NOS		(2%)	-			
#BRAIN	(50)		(50)		(50)	
CORPORA AMYLACEA	4	(8%)				
*SPINAL CORD	(50)		(50)		(50)	
STATUS SPONGIOSUS	/			(2%)		

TABLE D2. SUMMARY OF THE INCIDENCE OF NONNEOPLASTIC LESIONS IN FEMALE MICE IN
THE TWO-YEAR FEED STUDY OF HC BLUE NO. 2 (Continued)

	CONTRO	L (UNTR)	LOWI	OSE	HIGH	DOSE
SPECIAL SENSE ORGANS NONE						
MUSCULOSKELETAL SYSTEM						
*BONE	(50)		(50)		(50)	
FIBROUS OSTEODYSTROPHY		(4%)		(10%)		(24%)
•SKULL	(50)		(50)		(50)	
HYPEROSTOSIS		_			4	(8%)
BODY CAVITIES						
*MEDIASTINUM	(50)		(50)		(50)	
HEMORRHAGE					1	(2%)
*PLEURA	(50)		(50)		(50)	
INFLAMMATION, SUPPURATIVE					1	(2%)
*MESENTERY	(50)		(50)		(50)	
STEATITIS			1	(2%)		
INFLAMMATION, SUPPURATIVE					1	(2%)
INFLAMMATION CHRONIC SUPPURATIV	Έ				1	(2%)
ABSCESS, CHRONIC			1	(2%)		
NECROSIS, FAT	2	(4%)	1	(2%)		
ALL OTHER SYSTEMS						
*MULTIPLE ORGANS	(50)		(50)		(50)	
LYMPHOCYTIC INFLAMMATORY INFILT	R		1	(2%)		
INFLAMMATION, SUPPURATIVE		(6%)	6	(12%)	14	(28%)
INFLAMMATION, ACUTE SUPPURATIVE		(4%)		(4%)		(10%)
INFLAMMATION CHRONIC SUPPURATIV			4	(8%)	2	(4%)
NECROSIS, NOS	-				1	(2%)
OMENTUM						
STEATITIS	1					
NECROSIS, FAT	1					
BROAD LIGAMENT						
STEATITIS	4					
NECROSIS, FAT	1					
SPECIAL MORPHOLOGY SUMMARY NO LESION REPORTED					1	

TABLE D2. SUMMARY OF THE INCIDENCE OF NONNEOPLASTIC LESIONS IN FEMALE MICE IN
THE TWO-YEAR FEED STUDY OF HC BLUE NO. 2 (Continued)

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

APPENDIX E

ANALYSES OF PRIMARY TUMORS IN RATS AND MICE IN THE TWO-YEAR FEED STUDIES OF HC BLUE NO. 2

	Control	5,000 ppm	10,000 ppm
Skin: Basal Cell Tumor		<u></u>	<u></u>
Overall Rates (a)	3/50 (6%)	0/50 (0%)	0/49 (0%)
Adjusted Rates (b)	9.4%	0.0%	0.0%
Terminal Rates (c)	3/32 (9%)	0/38 (0%)	0/42 (0%)
Life Table Tests (d)	P = 0.023N	P = 0.092N	P = 0.078N
Incidental Tumor Tests (d)	P = 0.023N	P = 0.092N	P = 0.078N
Cochran-Armitage Trend Test (d)	P = 0.023N P = 0.038N	F = 0.0321	1 -0.01814
Fisher Exact Test	r - 0.03014	P = 0.121N	P = 0.125N
Skin: Basal Cell Tumor or Carcinoma			
Overall Rates (a)	4/50 (8%)	0/50 (0%)	0/49 (0%)
Adjusted Rates (b)	12.5%	0.0%	0.0%
Terminal Rates (c)	4/32 (13%)	0/38 (0%)	0/42(0%)
Life Table Tests (d)	P = 0.008N	P = 0.043N	P = 0.034N
Incidental Tumor Tests (d)	P = 0.008N	P = 0.043N	P = 0.034N
Cochran-Armitage Trend Test (d)	P = 0.015N		
Fisher Exact Test		P = 0.059N	P = 0.061 N
Skin: Keratoacanthoma			
Overall Rates (a)	3/50 (6%)	2/50 (4%)	1/49 (2%)
Adjusted Rates (b)	8.9%	4.8%	2.4%
Terminal Rates (c)		4.8% 1/38 (3%)	2,470 1/42 (2%)
	2/32 (6%) D = 0.155N	P = 0.427N	
Life Table Tests (d)	P = 0.155N	-	P = 0.219N
Incidental Tumor Tests (d)	P = 0.256N	P = 0.511N	P = 0.312N
Cochran-Armitage Trend Test (d) Fisher Exact Test	P = 0.228N	P = 0.500N	P = 0.316N
		1 -0.00014	1 - 0.01014
Subcutaneous Tissue: Fibroma			
Overall Rates (a)	3/50 (6%)	2/50 (4%)	1/49 (2%)
Adjusted Rates (b)	8.3%	5.0%	2.4%
Terminal Rates (c)	2/32 (6%)	1/38 (3%)	1/42 (2%)
Life Table Tests (d)	P = 0.163N	P = 0.440N	P=0.237N
Incidental Tumor Tests (d)	P = 0.258N	P = 0.527 N	P = 0.305N
Cochran-Armitage Trend Test (d)	P = 0.228N		
Fisher Exact Test		P = 0.500 N	P=0.316N
Subautanaans Tissues Filmana Filmasaaa	na ar Naurafikrasaraan		
Subcutaneous Tissue: Fibroma, Fibrosarcor Overall Rates (a)	na, or Neurofibrosarcon 4/50 (8%)	na 2/50 (4%)	2/49 (4%)
Adjusted Rates (b)	4/00 (8%)	5.0%	4.8%
Terminal Rates (c)	3/32 (9%)	1/38 (3%)	4.070 2/42 (5%)
Life Table Tests (d)			
	P = 0.174N	P = 0.277N	P = 0.240N
Incidental Tumor Tests (d)	P = 0.259N	P = 0.348N	P = 0.297 N
Cochran-Armitage Trend Test (d) Fisher Exact Test	P=0.259N	P=0.339N	P=0.349N
Integumentary System: Fibroma	E /FA /4 A	0/EA (4/2)	1/40/07
Overall Rates (a)	5/50 (10%)	2/50 (4%)	1/49 (2%)
Adjusted Rates (b)	14.4%	5.0%	2.4%
Terminal Rates (c)	4/32 (13%)	1/38 (3%)	1/42 (2%)
Life Table Tests (d)	P = 0.034N	P = 0.166N	P = 0.061 N
Incidental Tumor Tests (d)	P = 0.061N	P = 0.216N	P = 0.082N
Cochran-Armitage Trend Test (d)	P = 0.062N		
Fisher Exact Test		P = 0.218N	P=0.107N
Integumentary System: Fibroma, Fibrosarc	oma, or Neurofibroserco	ma	
Overall Rates (a)	6/50 (12%)	2/50 (4%)	2/49 (4%)
Adjusted Rates (b)	17.5%	5.0%	4.8%
Terminal Rates (c)	5/32 (16%)	1/38 (3%)	4.670 2/42 (5%)
Life Table Tests (d)		P = 0.095N	P = 0.072N
	P = 0.043N		
Incidental Tumor Tests (d)	P = 0.071N	P = 0.127N	P=0.094N
Cochran-Armitage Trend Test (d)	P = 0.084N		
Fisher Exact Test		P=0.134N	P = 0.141N

TABLE E1. ANALYSIS OF PRIMARY TUMORS IN MALE RATS IN THE TWO-YEAR FEED STUDY OFHC BLUE NO. 2

	Control	5,000 ppm	10 ,000 ppm
Hematopoietic System: Mononuclear Cell I	eukemia		
Overall Rates (a)	12/50 (24%)	6/50 (12%)	5/49 (10%)
Adjusted Rates (b)	26.4%	13.6%	11.1%
Terminal Rates (c)	3/32 (9%)	2/38 (5%)	3/42 (7%)
Life Table Tests (d)	P = 0.023N	P = 0.078N	P=0.040N
Incidental Tumor Tests (d)	P = 0.197N	P = 0.217N	P = 0.262N
Cochran-Armitage Trend Test (d)	P = 0.039N		
Fisher Exact Test		P=0.097N	P=0.059N
ituitary: Adenoma			
Overall Rates (a)	10/50 (20%)	9/49 (18%)	10/48 (21%)
Adjusted Rates (b)	28.8%	24.3%	22.5%
Terminal Rates (c)	8/32 (25%)	9/37 (24%)	8/42 (19%)
Life Table Tests (d)	P = 0.316N	P = 0.366N	P=0.369N
Incidental Tumor Tests (d)	P = 0.456N	P = 0.415N	P = 0.585N
Cochran-Armitage Trend Test (d)	P = 0.511		
Fisher Exact Test		P = 0.520N	P=0.558
drenal: Pheochromocytoma			
Overall Rates (a)	13/50 (26%)	9/50 (18%)	7/49 (14%)
Adjusted Rates (b)	36.6%	22.7%	16.7%
Terminal Rates (c)	10/32 (31%)	8/38 (21%)	7/42 (17%)
Life Table Tests (d)	P = 0.022N	P = 0.131N	P=0.030N
Incidental Tumor Tests (d)	P = 0.046N	P = 0.182N	P = 0.065N
Cochran-Armitage Trend Test (d)	P=0.089N		
Fisher Exact Test		P = 0.235N	P = 0.115N
byroid: C-Cell Adenoma			
Overall Rates (a)	7/50 (14%)	2/50 (4%)	5/49 (10%)
Adjusted Rates (b)	19.5%	4.6%	11.9%
Terminal Rates (c)	5/32 (16%)	1/38 (3%)	5/42 (12%)
Life Table Tests (d)	P = 0.193N	P = 0.058N	P = 0.229N
Incidental Tumor Tests (d)	P = 0.291N	P = 0.088N	P = 0.324N
Cochran-Armitage Trend Test (d)	P = 0.314N		
Fisher Exact Test		P = 0.080N	P = 0.394N
hyroid: C-Cell Carcinoma			
Overall Rates (a)	0/50 (0%)	3/50 (6%)	5/49 (10%)
Adjusted Rates (b)	0.0%	7.6%	11.9%
Terminal Rates (c)	0/32 (0%)	2/38 (5%)	5/42 (12%)
Life Table Tests (d)	P = 0.044	P=0.154	P=0.061
Incidental Tumor Tests (d)	P=0.029	P = 0.123	P=0.061
Cochran-Armitage Trend Test (d)	P = 0.021		
Fisher Exact Test		P = 0.121	P = 0.027
byroid: C-Cell Adenoma or Carcinoma			10/40 /000
Overall Rates (a)	7/50 (14%)	5/50 (10%)	10/49 (20%)
Adjusted Rates (b)	19.5%	12.0%	23.8%
Terminal Rates (c)	5/32 (16%)	3/38 (8%)	10/42 (24%)
Life Table Tests (d)	P = 0.414	P = 0.290N	P = 0.510
Incidental Tumor Tests (d)	P = 0.273	P = 0.395N	P = 0.407
Cochran-Armitage Trend Test (d)	P = 0.227		_
Fisher Exact Test		P = 0.380N	P = 0.282
ancreatic Islets: Islet Cell Adenoma or Ca		9/KA (60)	1/40/00
Overall Rates (a)	2/50 (4%)	3/50 (6%)	1/ 49 (2%)
Adjusted Rates (b)	6.3%	7.6%	2.4%
Terminal Rates (c)	2/32 (6%)	2/38 (5%)	1/42 (2%)
Life Table Tests (d)	P = 0.300N	P = 0.576	P = 0.405N
In all and all Three an Tranta (d)	P = 0.369N	P = 0.534	P = 0.405 N
Incidental Tumor Tests (d)			
Cochran-Armitage Trend Test (d)	P = 0.407N	P=0.500	P=0.508N

TABLE E1. ANALYSIS OF PRIMARY TUMORS IN MALE RATS IN THE TWO-YEAR FEED STUDY OF HC BLUE NO. 2 (Continued)

TABLE E1. ANALYSIS OF PRIMARY TUMORS IN MALE RATS IN THE TWO-YEAR FEED STUDY OF HC BLUE NO. 2 (Continued)

	Control	5,000 ppm	10,000 ppm
Testis: Interstitial Cell Tumor			
Overall Rates (a)	45/50 (90%)	47/50 (94%)	37/49 (76%)
Adjusted Rates (b)	91.8%	97.9%	84.1%
Terminal Rates (c)	28/32 (88%)	37/38 (97%)	35/42 (83%)
Life Table Tests (d)	P<0.001N	P = 0.247N	P<0.001N
Incidental Tumor Tests (d)	P = 0.008N	P = 0.420	P = 0.027 N
Cochran-Armitage Trend Test (d)	P = 0.025N		
Fisher Exact Test		P = 0.357	P = 0.050N
Funica Vaginalis: Mesothelioma			
Overall Rates (a)	0/50 (0%)	3/50 (6%)	1/49 (2%)
Adjusted Rates (b)	0.0%	7.2%	2.4%
Terminal Rates (c)	0/32(0%)	2/38 (5%)	1/42 (2%)
Life Table Tests (d)	P=0.443	P = 0.145	P = 0.554
Incidental Tumor Tests (d)	P=0.369	P=0.111	P = 0.554
Cochran-Armitage Trend Test (d)	P=0.372		
Fisher Exact Test		P=0.121	P=0.495
All Sites: Mesothelioma			
Overall Rates (a)	1/50 (2%)	3/50 (6%)	1/49 (2%)
Adjusted Rates (b)	3.1%	7.2%	2.4%
Terminal Rates (c)	1/32 (3%)	2/38 (5%)	1/42 (2%)
Life Table Tests (d)	P = 0.532N	P = 0.355	P=0.700N
Incidental Tumor Tests (d)	P = 0.599N	P=0.306	P = 0.700N
Cochran-Armitage Trend Test (d)	P = 0.603		
Fisher Exact Test		P = 0.309	P = 0.748

(a) Number of tumor-bearing animals/number of animals examined at the site

(b) Kaplan-Meier estimated tumor incidence at the end of the study after adjusting for intercurrent mortality

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(c) Observed tumor incidence at terminal kill (d) Beneath the control incidence at terminal kill (d) 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 exact test compare directly the overall incidence rates. A negative trend or lower incidence in a dosed group is indicated by (N).

	Control	10,000 ppm	20,000 ppm
Iematopoietic System: Mononuclear Cell L	eukemia		
Overall Rates (a)	4/50 (8%)	6/50 (12%)	3/49 (6%)
Adjusted Rates (b)	8.6%	13.8%	6.7%
Terminal Rates (c)	1/41 (2%)	4/40 (10%)	1/39 (3%)
Life Table Tests (d)	P = 0.455N	P = 0.367	P = 0.521N
Incidental Tumor Tests (d)	P = 0.483N	P = 0.183	P = 0.482N
Cochran-Armitage Trend Test (d)	P = 0.429N		
Fisher Exact Test		P=0.370	P = 0.500N
ematopoietic System: Leukemia			
Overall Rates (a)	5/50 (10%)	6/50 (12%)	3/50 (6%)
Adjusted Rates (b)	10.9%	13.8%	6.7%
Terminal Rates (c)	2/41 (5%)	4/40 (10%)	1/39 (3%)
Life Table Tests (d)	P = 0.331N	P=0,491	P = 0.384N
Incidental Tumor Tests (d)	P = 0.348N	P = 0.304	P = 0.338N
Cochran-Armitage Trend Test (d)	P = 0.303N		
Fisher Exact Test	F - 0.00011	P = 0.500	P=0.358N
www.Neemlootie Nedule on Henotocollular	Carolnoma		
iver: Neoplastic Nodule or Hepatocellular		2/50 (49)	2/50 (60)
Overall Rates (a)	0/50 (0%)	2/50 (4%)	3/50 (6%) 7.0%
Adjusted Rates (b)	0.0%	5.0% 2/40 (5%)	
Terminal Rates (c)	0/41 (0%) D = 0.070	2/40 (5%)	2/39 (5%)
Life Table Tests (d)	P = 0.079	P = 0.233	P = 0.118
Incidental Tumor Tests (d) Cochran-Armitage Trend Test (d)	P = 0.106 P = 0.082	P = 0.233	P = 0.185
Fisher Exact Test		P=0.247	P=0.121
ituitary: Adenoma			
Overall Rates (a)	19/49 (39%)	18/50 (36%)	16/49 (33%)
Adjusted Rates (b)	42.0%	41.7%	37.1%
Terminal Rates (c)	14/40 (35%)	15/40 (38%)	12/39 (31%)
Life Table Tests (d)	P = 0.361N	P = 0.516N	P = 0.402N
Incidental Tumor Tests (d)	P = 0.271N	P = 0.432N	P = 0.284N
	P = 0.299N	1 -0,40211	1 - 0.20411
Cochran-Armitage Trend Test (d) Fisher Exact Test	P=0.299N	P=0.469N	P = 0.337 N
ituitary: Adenoma or Carcinoma			
Overall Rates (a)	20/49 (41%)	18/50 (36%)	16/49 (33%)
Adjusted Rates (b)	43.2%	41.7%	37.1%
	14/40 (35%)	15/40 (38%)	12/39 (31%)
Terminal Rates (c)		P = 0.440N	P = 0.333N
Life Table Tests (d)	P = 0.294N		
Incidental Tumor Tests (d)	P = 0.225N	P=0.399N	P = 0.240 N
Cochran-Armitage Trend Test (d) Fisher Exact Test	P = 0.231N	P=0.388N	P = 0.265N
drenal: Pheochromocytoma	0/40 (07)		E/40 (100)
Overall Rates (a)	3/49 (6%)	7/50 (14%)	5/49 (10%)
Adjusted Rates (b)	7.5%	17.5%	12.2%
Terminal Rates (c)	3/40 (7%)	7/40 (18%)	4/39 (10%)
Life Table Tests (d)	P = 0.293	P = 0.157	P = 0.342
Incidental Tumor Tests (d)	P = 0.326	P = 0.157	P = 0.413
Cochran-Armitage Trend Test (d)	P=0.308	-	
Fisher Exact Test		P=0.167	P = 0.357
iyroid: C-Cell Adenoma			
Overall Rates (a)	6/49 (12%)	4/50 (8%)	5/49 (10%)
Adjusted Rates (b)	14.2%	9.3%	12.8%
Terminal Rates (c)	5/41 (12%)	2/40 (5%)	5/39 (13%)
	P = 0.471N	P=0.389N	P = 0.538N
Life Table Tests (d) Incidental Tumor Tests (d)	P = 0.402N	P = 0.255N	P = 0.500N
Life Table Tests (d) Incidental Tumor Tests (d) Cochran-Armitage Trend Test (d)	P = 0.402N P = 0.434N	P=0.255N	P = 0.500N

TABLE E2. ANALYSIS OF PRIMARY TUMORS IN FEMALE RATS IN THE TWO-YEAR FEED STUDY OF HC BLUE NO. 2

	Control	10,000 ppm	20,000 ppm
Fhyroid: C-Cell Adenoma or Carcinoma	· · · · · · · · · · · · · · · · · · ·		······
Overall Rates (a)	7/49 (14%)	5/50(10%)	7/49 (14%)
Adjusted Rates (b)	16.6%	11.7%	17.9%
Terminal Rates (c)	6/41 (15%)	3/40 (7%)	7/39 (18%)
Life Table Tests (d)	P = 0.518	P = 0.400 N	P = 0.572
Incidental Tumor Tests (d)	P = 0.541 N	P = 0.276N	P = 0.605
Cochran-Armitage Trend Test (d)	P=0.560		
Fisher Exact Test		P = 0.365N	P=0.613
Mammary Gland: Fibroadenoma			
Overall Rates (a)	20/50 (40%)	10/50 (20%)	4/50 (8%)
Adjusted Rates (b)	45.3%	24.2%	10.0%
Terminal Rates (c)	17/41 (41%)	9/40 (23%)	3/39 (8%)
Life Table Tests (d)	P<0.001N	P = 0.033N	P<0.001N
Incidental Tumor Tests (d)	P<0.001N	P = 0.028N	P<0.001N
Cochran-Armitage Trend Test (d)	P<0.001N		
Fisher Exact Test		P = 0.024N	P<0.001N
Uterus: Endometrial Stromal Polyp			
Overall Rates (a)	13/50 (26%)	7/50 (14%)	15/50 (30%)
Adjusted Rates (b)	31.7%	17.0%	35.4%
Terminal Rates (c)	13/41 (32%)	6/40 (15%)	12/39 (31%)
Life Table Tests (d)	P = 0.313	P = 0.116N	P=0.357
Incidental Tumor Tests (d)	P = 0.281	P = 0.105N	P = 0.312
Cochran-Armitage Trend Test (d)	P = 0.361		
Fisher Exact Test		P = 0.106N	P = 0.412

TABLE E2. ANALYSIS OF PRIMARY TUMORS IN FEMALE RATS IN THE TWO-YEAR FEED STUDY OF HC BLUE NO. 2 (Continued)

(a) Number of tumor-bearing animals/number of animals examined at the site

(b) Kaplan-Meier estimated tumor incidence at the end of the study after adjusting for intercurrent mortality (c) Observed tumor incidence at terminal kill

(d) 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 exact test compare directly the overall incidence rates. A negative trend or lower incidence in a dosed group is indicated by (N).

	Control	5,000 ppm	10,000 ppm
ubcutaneous Tissue: Fibroma		······································	
Overall Rates (a)	1/50 (2%)	3/48 (6%)	3/49 (6%)
Adjusted Rates (b)	4.2%	13.0%	8.8%
Terminal Rates (c)	1/24 (4%)	3/23 (13%)	3/34 (9%)
Life Table Tests (d)	P = 0.383	P = 0.287	P = 0.436
Incidental Tumor Tests (d)	P = 0.383	P = 0.287	P = 0.436
Cochran-Armitage Trend Test (d)	P = 0.233		
Fisher Exact Test		P=0.293	P = 0.301
ubcutaneous Tissue: Fibrosarcoma			
Overall Rates (a)	3/50 (6%)	8/48 (17%)	6/49 (12%)
Adjusted Rates (b)	11.1%	25.5%	16.1%
Terminal Rates (c)	2/24 (8%)	3/23 (13%)	4/34 (12%)
Life Table Tests (d)	P = 0.425	P = 0.116	P = 0.426
Incidental Tumor Tests (d)	P = 0.518	P = 0.290	P = 0.514
Cochran-Armitage Trend Test (d)	P = 0.206		
Fisher Exact Test		P=0.087	P=0.233
ıbcutaneous Tissue: Fibroma or Fibrosarc			
Overall Rates (a)	4/50 (8%)	11/48 (23%)	9/49 (18%)
Adjusted Rates (b)	15.2%	36.7%	24.5%
Terminal Rates (c)	3/24 (13%)	6/23 (26%)	7/34 (21%)
Life Table Tests (d)	P = 0.322	P=0.051	P = 0.290
Incidental Tumor Tests (d)	P = 0.388	P = 0.135	P = 0.351
Cochran-Armitage Trend Test (d)	P = 0.102		
Fisher Exact Test		P = 0.037	P = 0.109
kin: Fibroma or Fibrosarcoma			
Overall Rates (a)	0/50 (0%)	3/48 (6%)	0/49 (0%)
Adjusted Rates (b)	0.0%	11.5%	0.0%
Terminal Rates (c)	0/24 (0%)	2/23 (9%)	0/34 (0%)
Life Table Tests (d)	P = 0.547N	P=0.119	(e)
Incidental Tumor Tests (d)	P = 0.457N	P = 0.185	(e)
Cochran-Armitage Trend Test (d)	P = 0.633		
Fisher Exact Test	1 0,000	P = 0.114	(e)
tegumentary System: Fibroma			
Overall Rates (a)	1/50 (2%)	5/48 (10%)	3/49 (6%)
Adjusted Rates (b)	4.2%	21.7%	8.8%
Terminal Rates (c)	1/24 (4%)	5/23 (22%)	3/34 (9%)
Life Table Tests (d)	P = 0.435	P = 0.088	P = 0.436
Incidental Tumor Tests (d)	P = 0.435	P = 0.088	P = 0.436
Cochran-Armitage Trend Test (d)	P = 0.256	0.000	* - 0.400
Fisher Exact Test		P=0.093	P=0.301
tegumentary System: Fibrosarcoma			
Overall Rates (a)	3/50 (6%)	9/48 (19%)	6/49 (12%)
Adjusted Rates (b)	11.1%	27.8%	16.1%
Terminal Rates (c)	2/24 (8%)	3/23 (13%)	4/34 (12%)
Life Table Tests (d)	P = 0.437	P = 0.076	P = 0.426
Incidental Tumor Tests (d)	P = 0.561N	P = 0.245	P = 0.514
Cochran-Armitage Trend Test (d)	P = 0.211		
Fisher Exact Test	1 - 0.211	P = 0.052	P=0.233
ntegumentary System: Fibroma or Fibrosar	coma		
texumentary system; fibroma of fibrosat	4/50 (8%)	14/48 (29%)	9/49 (18%)
Overall Rates (a)			24.5%
Overall Rates (a)	15.2%	40.070	
Overall Rates (a) Adjusted Rates (b)	15.2% 3/24 (13%)	45.8% 8/23 (35%)	
Overall Rates (a) Adjusted Rates (b) Terminal Rates (c)	3/24 (13%)	8/23 (35%)	7/34 (21%)
Overall Rates (a) Adjusted Rates (b) Terminal Rates (c) Life Table Tests (d)	3/24 (13%) P=0.360	8/23 (35%) P=0.011	7/ 34 (21%) P=0.290
Overall Rates (a) Adjusted Rates (b) Terminal Rates (c)	3/24 (13%)	8/23 (35%)	7/34 (21%)

TABLE E3. ANALYSIS OF PRIMARY TUMORS IN MALE MICE IN THE TWO-YEAR FEED STUDY OF HC BLUE NO. 2

TABLE E3. ANALYSIS OF PRIMARY TUMORS IN MALE MICE IN THE TWO-YEAR FEED STUDY OF
HC BLUE NO. 2 (Continued)

	Control	5,000 ppm	10,000 ppm
Subcutaneous Tissue: Sarcoma, NOS			
Overall Rates (a)	4/50 (8%)	0/48 (0%)	1/49 (2%)
Adjusted Rates (b)	12.4%	0.0%	2.7%
Terminal Rates (c)	0/24 (0%)	0/23 (0%)	0/34 (0%)
Life Table Tests (d)	P = 0.056N	P = 0.060N	P = 0.118N
Incidental Tumor Tests (d)	P = 0.280N	P = 0.100N	P = 0.627 N
Cochran-Armitage Trend Test (d)	P=0.086N	5 6 6 6 1 1	
Fisher Exact Test		P = 0.064N	P=0.187N
ubcutaneous Tissue: Neurilemoma or Neur	rilemoma, Malignant		
Overall Rates (a)	1/50 (2%)	1/48 (2%)	3/49 (6%)
Adjusted Rates (b)	3.3%	3.0%	7.9%
Terminal Rates (c)	0/24 (0%)	0/23 (0%)	2/34 (6%)
Life Table Tests (d)	P = 0.301	P = 0.760	P = 0.427
Incidental Tumor Tests (d)	P = 0.367	P = 0.614N	P = 0.444
Cochran-Armitage Trend Test (d)	P = 0.307 P = 0.198	1 - 0.01411	
Fisher Exact Test	1 -0.120	P = 0.742	P=0.301
ing: Alveolar/Bronchiolar Adenoma	0/EA (AM)	040 (177)	0/40 / 401
Overall Rates (a)	3/50 (6%)	8/48 (17%)	2/49 (4%)
Adjusted Rates (b)	12.5%	31.6%	5.9%
Terminal Rates (c)	3/24 (13%)	6/23 (26%)	2/34 (6%)
Life Table Tests (d)	P = 0.235N	P=0.086	P=0.342N
Incidental Tumor Tests (d)	P = 0.290N	P=0.091	P = 0.342N
Cochran-Armitage Trend Test (d)	P = 0.442N		
Fisher Exact Test		P=0.087	P = 0.510N
ung: Alveolar/Bronchiolar Carcinoma			
Overall Rates (a)	2/50 (4%)	1/48 (2%)	4/49 (8%)
Adjusted Rates (b)	7.9%	4.3%	10.1%
Terminal Rates (c)	1/24 (4%)	1/23 (4%)	2/34 (6%)
Life Table Tests (d)	P = 0.374	P = 0.510N	P = 0.494
		P = 0.494N	P = 0.605
Incidental Tumor Tests (d)	P = 0.429	F≈0.4541	F=0.000
Cochran-Armitage Trend Test (d)	P = 0.233		5 0 000
Fisher Exact Test		P = 0.515N	P = 0.329
ung: Alveolar/Bronchiolar Adenoma or Ca	rcinoma		
Overall Rates (a)	5/50 (10%)	9/48 (19%)	6/49 (12%)
Adjusted Rates (b)	19.9%	35.6%	15.7%
Terminal Rates (c)	4/24 (17%)	7/23 (30%)	4/34 (12%)
Life Table Tests (d)	P = 0.402N	P=0.171	P = 0.522N
Incidental Tumor Tests (d)	P = 0.419N	P = 0.182	P = 0.441N
Cochran-Armitage Trend Test (d)	P = 0.426	1 - 0.102	V. TTII
Fisher Exact Test	,,140	P=0.172	P=0.486
amatan alatia Oratana. Malimant Tarrak T	. Tummhaart - Maria		
ematopoietic System: Malignant Lymphom Overall Rates (a)		9/A9 (A0L)	E/AG (1000)
	0/50 (0%)	2/48 (4%)	5/49 (10%)
Adjusted Rates (b)	0.0%	8.7%	13.5%
Terminal Rates (c)	0/24 (0%)	2/23 (9%)	3/34 (9%)
Life Table Tests (d)	P=0.043	P = 0.228	P = 0.069
Incidental Tumor Tests (d)	P=0.040	P = 0.228	P=0.068
Cochran-Armitage Trend Test (d)	P=0.016		
Fisher Exact Test		P=0.237	P=0.027
ematopoietic System: Lymphoma, All Mali	mant		
Overall Rates (a)	1/50 (2%)	5/48 (10%)	8/49 (16%)
	4.2%	17.6%	19.7%
Adjusted Rates (b)		2/23 (9%)	4/34 (12%)
Adjusted Rates (b)	1/9/ /// (2.)		
Terminal Rates (c)	1/24 (4%) D=0.053		
Terminal Rates (c) Life Table Tests (d)	P = 0.053	P=0.110	P = 0.060
Terminal Rates (c) Life Table Tests (d) Incidental Tumor Tests (d)	P = 0.053 P = 0.050		
Terminal Rates (c) Life Table Tests (d)	P = 0.053	P=0.110	P = 0.060

	Control	5,000 ppm	1 0,000 ppm
Liver: Hepatocellular Adenoma			
Overall Rates (a)	6/50 (12%)	8/48 (17%)	8/49 (16%)
Adjusted Rates (b)	21.1%	32.5%	22.5%
Terminal Rates (c)	4/24 (17%)	7/23 (30%)	7/34 (21%)
Life Table Tests (d)	P = 0.492N	P = 0.370	P = 0.582N
Incidental Tumor Tests (d)	P = 0.542	P = 0.341	P=0.481
Cochran-Armitage Trend Test (d)	P=0.321		
Fisher Exact Test		P=0.355	P = 0.371
Liver: Hepatocellular Carcinoma			
Overall Rates (a)	5/50 (10%)	9/48 (19%)	12/49 (24%)
Adjusted Rates (b)	20.8%	27.3%	31.7%
Terminal Rates (c)	5/24 (21%)	2/23 (9%)	9/34 (26%)
Life Table Tests (d)	P = 0.190	P=0.213	P=0.195
Incidental Tumor Tests (d)	P = 0.120	P = 0.256	P=0.237
Cochran-Armitage Trend Test (d)	P=0.039		
Fisher Exact Test		P=0.172	P=0.049
Liver: Hepatocellular Adenoma or Carcino	oma		
Overall Rates (a)	10/50 (20%)	(f) 16/48 (33%)	18/49 (37%)
Adjusted Rates (b)	36.9%	49.7%	46.7%
Terminal Rates (c)	8/24 (33%)	8/23 (35%)	14/34 (41%)
Life Table Tests (d)	P=0.306	P = 0.138	P=0.294
Incidental Tumor Tests (d)	P = 0.182	P = 0.142	P = 0.214
Cochran-Armitage Trend Test (d)	P=0.043		
Fisher Exact Test		P = 0.103	P = 0.052

TABLE E3. ANALYSIS OF PRIMARY TUMORS IN MALE MICE IN THE TWO-YEAR FEED STUDY OF HC BLUE NO. 2 (Continued)

(a) Number of tumor-bearing animals/number of animals examined at the site

(b) Kaplan-Meier estimated tumor incidence at the end of the study after adjusting for intercurrent mortality

(c) Observed tumor incidence at terminal kill

(d) 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 exact test compare directly the overall incidence rates. A negative trend or lower incidence in a dosed group is indicated by (N).

(e) No P value is presented because no tumors were observed in the 10,000-ppm and control groups.

(f) One animal also had an hepatoblastoma.

	Control	10,000 ppm	20,000 ppm
ung: Alveolar/Bronchiolar Adenoma or C	arcinoma		
Overall Rates (a)	1/50 (2%)	3/49 (6%)	0/50 (0%)
Adjusted Rates (b)	2.9%	8.9%	0.0%
Terminal Rates (c)	1/35 (3%)	1/27 (4%)	0/20 (0%)
Life Table Tests (d)	P = 0.518N	P = 0.256	P = 0.612N
Incidental Tumor Tests (d)	P = 0.321N	P = 0.372	P = 0.612N
Cochran-Armitage Trend Test (d)	P = 0.379N	1 = 0.012	1 -0.01211
Fisher Exact Test		P = 0.301	P = 0.500N
lematopoietic System: Malignant Lympho	ma, Lymphocytic Type		
Overall Rates (a)	3/50 (6%)	7/50 (14%)	3/50 (6%)
Adjusted Rates (b)	8.0%	23.7%	11.3%
Terminal Rates (c)	2/35 (6%)	6/28 (21%)	1/20 (5%)
Life Table Tests (d)	P = 0.297	P = 0.094	P=0.483
Incidental Tumor Tests (d)	P = 0.507	P = 0.136	P = 0.587N
Cochran-Armitage Trend Test (d)	P = 0.571		- 0.00111
Fisher Exact Test	1 = 0.071	P = 0.159	P = 0.661 N
ematopoietic System: Malignant Lympho	ma. Histiocytic Type		
Overall Rates (a)	1/50 (2%)	3/50 (6%)	2/50 (4%)
Adjusted Rates (b)	2.0%	6.7%	4.7%
Terminal Rates (c)	2.0% 0/35(0%)	0/28 (0%)	9.770 0/20 (0%)
Life Table Tests (d)	P = 0.387	P = 0.309	P = 0.497
Incidental Tumor Tests (d)	P = 0.565	P = 0.305 P = 0.206	P = 0.631
Cochran-Armitage Trend Test (d)	P = 0.300 P = 0.399	r - 0.200	r = 0.031
Fisher Exact Test	- 0.000	P=0.309	P = 0.500
ematopoietic System: Malignant Lympho	ma Mixed Type		
Overall Rates (a)	7/50 (14%)	1/50 (2%)	2/50 (4%)
Adjusted Rates (b)	17.3%	3.6%	5.4%
Aujusteu Nates (D)			
Terminal Dates (a)	9/95/00/		
Terminal Rates (c) Life Tehle Tests (d)	3/35(9%)	1/28(4%)	0/20 (0%) B = 0.195 N
Life Table Tests (d)	P = 0.092N	P=0.060N	P = 0.195N
Life Table Tests (d) Incidental Tumor Tests (d)	P = 0.092N P = 0.015N	• •	
Life Table Tests (d)	P = 0.092N	P=0.060N P=0.021N	P=0.195N P=0.023N
Life Table Tests (d) Incidental Tumor Tests (d) Cochran-Armitage Trend Test (d) Fisher Exact Test	P=0.092N P=0.015N P=0.036N	P=0.060N	P = 0.195N
Life Table Tests (d) Incidental Tumor Tests (d) Cochran-Armitage Trend Test (d) Fisher Exact Test ematopoietic System: Lymphoma, All Mal	P=0.092N P=0.015N P=0.036N	P = 0.060N P = 0.021N P = 0.030N	P=0.195N P=0.023N P=0.080N
Life Table Tests (d) Incidental Tumor Tests (d) Cochran-Armitage Trend Test (d) Fisher Exact Test ematopoietic System: Lymphoma, All Mal Overall Rates (a)	P=0.092N P=0.015N P=0.036N lignant 12/50 (24%)	P = 0.060N P = 0.021N P = 0.030N 11/50 (22%)	P=0.195N P=0.023N P=0.080N 7/50 (14%)
Life Table Tests (d) Incidental Tumor Tests (d) Cochran-Armitage Trend Test (d) Fisher Exact Test ematopoietic System: Lymphoma, All Mal Overall Rates (a) Adjusted Rates (b)	P=0.092N P=0.015N P=0.036N lignant 12/50 (24%) 27.8%	P = 0.060N $P = 0.021N$ $P = 0.030N$ $11/50 (22%)$ $32.1%$	P = 0.195N P = 0.023N P = 0.080N 7/50 (14%) 20.2%
Life Table Tests (d) Incidental Tumor Tests (d) Cochran-Armitage Trend Test (d) Fisher Exact Test ematopoietic System: Lymphoma, Ali Mai Overall Rates (a) Adjusted Rates (b) Terminal Rates (c)	P=0.092N P=0.015N P=0.036N lignant 12/50 (24%) 27.8% 5/35 (14%)	P = 0.060N $P = 0.021N$ $P = 0.030N$ $11/50 (22%)$ $32.1%$ $7/28 (25%)$	P = 0.195N $P = 0.023N$ $P = 0.080N$ 7/50 (14%) 20.2% 1/20 (5%)
Life Table Tests (d) Incidental Tumor Tests (d) Cochran-Armitage Trend Test (d) Fisher Exact Test ematopoietic System: Lymphoma, All Mal Overall Rates (a) Adjusted Rates (b) Terminal Rates (c) Life Table Tests (d)	P = 0.092N $P = 0.015N$ $P = 0.036N$ lignant $12/50 (24%)$ $27.8%$ $5/35 (14%)$ $P = 0.399N$	P = 0.060N $P = 0.021N$ $P = 0.030N$ $11/50 (22%)$ $32.1%$ $7/28 (25%)$ $P = 0.523$	P = 0.195N $P = 0.023N$ $P = 0.080N$ $7/50 (14%)$ $20.2%$ $1/20 (5%)$ $P = 0.397N$
Life Table Tests (d) Incidental Tumor Tests (d) Cochran-Armitage Trend Test (d) Fisher Exact Test ematopoietic System: Lymphoma, Ali Mai Overall Rates (a) Adjusted Rates (b) Terminal Rates (c) Life Table Tests (d) Incidental Tumor Tests (d)	P = 0.092N $P = 0.015N$ $P = 0.036N$ lignant $12/50 (24%)$ $27.8%$ $5/35 (14%)$ $P = 0.399N$ $P = 0.065N$	P = 0.060N $P = 0.021N$ $P = 0.030N$ $11/50 (22%)$ $32.1%$ $7/28 (25%)$	P = 0.195N $P = 0.023N$ $P = 0.080N$ 7/50 (14%) 20.2% 1/20 (5%)
Life Table Tests (d) Incidental Tumor Tests (d) Cochran-Armitage Trend Test (d) Fisher Exact Test ematopoietic System: Lymphoma, All Mal Overall Rates (a) Adjusted Rates (b) Terminal Rates (c) Life Table Tests (d) Incidental Tumor Tests (d) Cochran-Armitage Trend Test (d)	P = 0.092N $P = 0.015N$ $P = 0.036N$ lignant $12/50 (24%)$ $27.8%$ $5/35 (14%)$ $P = 0.399N$	P = 0.060N $P = 0.021N$ $P = 0.030N$ $11/50 (22%)$ $32.1%$ $7/28 (25%)$ $P = 0.523$ $P = 0.479N$	P = 0.195N $P = 0.023N$ $P = 0.080N$ $7/50 (14%)$ $20.2%$ $1/20 (5%)$ $P = 0.397N$ $P = 0.030N$
Life Table Tests (d) Incidental Tumor Tests (d) Cochran-Armitage Trend Test (d) Fisher Exact Test ematopoietic System: Lymphoma, Ali Mai Overall Rates (a) Adjusted Rates (b) Terminal Rates (c) Life Table Tests (d) Incidental Tumor Tests (d)	P = 0.092N $P = 0.015N$ $P = 0.036N$ lignant $12/50 (24%)$ $27.8%$ $5/35 (14%)$ $P = 0.399N$ $P = 0.065N$	P = 0.060N $P = 0.021N$ $P = 0.030N$ $11/50 (22%)$ $32.1%$ $7/28 (25%)$ $P = 0.523$	P = 0.195N $P = 0.023N$ $P = 0.080N$ $7/50 (14%)$ $20.2%$ $1/20 (5%)$ $P = 0.397N$
Life Table Tests (d) Incidental Tumor Tests (d) Cochran-Armitage Trend Test (d) Fisher Exact Test ematopoietic System: Lymphoma, All Mal Overall Rates (a) Adjusted Rates (b) Terminal Rates (c) Life Table Tests (d) Incidental Tumor Tests (d) Cochran-Armitage Trend Test (d) Fisher Exact Test ver: Hepatocellular Adenoma	P = 0.092N $P = 0.015N$ $P = 0.036N$ lignant $12/50 (24%)$ $27.8%$ $5/35 (14%)$ $P = 0.399N$ $P = 0.065N$ $P = 0.130N$	P=0.060N P=0.021N P=0.030N 11/50 (22%) 32.1% 7/28 (25%) P=0.523 P=0.479N P=0.500N	P=0.195N P=0.023N P=0.080N 7/50 (14%) 20.2% 1/20 (5%) P=0.397N P=0.030N P=0.154N
Life Table Tests (d) Incidental Tumor Tests (d) Cochran-Armitage Trend Test (d) Fisher Exact Test ematopoietic System: Lymphoma, All Mal Overall Rates (a) Adjusted Rates (b) Terminal Rates (c) Life Table Tests (d) Incidental Tumor Tests (d) Cochran-Armitage Trend Test (d) Fisher Exact Test ver: Hepatocellular Adenoma Overall Rates (a)	P = 0.092N $P = 0.015N$ $P = 0.036N$ lignant $12/50 (24%)$ $27.8%$ $5/35 (14%)$ $P = 0.399N$ $P = 0.065N$ $P = 0.130N$ $3/50 (6%)$	P = 0.060N $P = 0.021N$ $P = 0.030N$ $11/50 (22%)$ $32.1%$ $7/28 (25%)$ $P = 0.523$ $P = 0.479N$ $P = 0.500N$ $0/50 (0%)$	P = 0.195N $P = 0.023N$ $P = 0.080N$ $7/50 (14%)$ $20.2%$ $1/20 (5%)$ $P = 0.397N$ $P = 0.030N$ $P = 0.154N$ $3/49 (6%)$
Life Table Tests (d) Incidental Tumor Tests (d) Cochran-Armitage Trend Test (d) Fisher Exact Test ematopoietic System: Lymphoma, All Mal Overall Rates (a) Adjusted Rates (b) Terminal Rates (c) Life Table Tests (d) Incidental Tumor Tests (d) Cochran-Armitage Trend Test (d) Fisher Exact Test ver: Hepatocellular Adenoma Overall Rates (a) Adjusted Rates (b)	P = 0.092N $P = 0.015N$ $P = 0.036N$ lignant $12/50 (24%)$ $27.8%$ $5/35 (14%)$ $P = 0.399N$ $P = 0.065N$ $P = 0.130N$ $3/50 (6%)$ $8.6%$	P = 0.060N $P = 0.021N$ $P = 0.030N$ $11/50 (22%)$ $32.1%$ $7/28 (25%)$ $P = 0.523$ $P = 0.479N$ $P = 0.500N$ $0/50 (0%)$ $0.0%$	P = 0.195N $P = 0.023N$ $P = 0.080N$ $7/50 (14%)$ $20.2%$ $1/20 (5%)$ $P = 0.397N$ $P = 0.030N$ $P = 0.154N$ $3/49 (6%)$ $11.3%$
Life Table Tests (d) Incidental Tumor Tests (d) Cochran-Armitage Trend Test (d) Fisher Exact Test ematopoietic System: Lymphoma, All Mal Overall Rates (a) Adjusted Rates (b) Terminal Rates (c) Life Table Tests (d) Incidental Tumor Tests (d) Cochran-Armitage Trend Test (d) Fisher Exact Test ver: Hepatocellular Adenoma Overall Rates (a) Adjusted Rates (b) Terminal Rates (c)	P = 0.092N $P = 0.015N$ $P = 0.036N$ lignant $12/50 (24%)$ $27.8%$ $5/35 (14%)$ $P = 0.399N$ $P = 0.065N$ $P = 0.130N$ $3/50 (6%)$ $8.6%$ $3/35 (9%)$	P = 0.060N $P = 0.021N$ $P = 0.030N$ $11/50 (22%)$ $32.1%$ $7/28 (25%)$ $P = 0.523$ $P = 0.479N$ $P = 0.500N$ $0/50 (0%)$ $0.0%$ $0/28 (0%)$	P = 0.195N $P = 0.023N$ $P = 0.080N$ $7/50 (14%)$ $20.2%$ $1/20 (5%)$ $P = 0.397N$ $P = 0.030N$ $P = 0.154N$ $3/49 (6%)$ $11.3%$ $1/20 (5%)$
Life Table Tests (d) Incidental Tumor Tests (d) Cochran-Armitage Trend Test (d) Fisher Exact Test ematopoietic System: Lymphoma, Ali Mai Overall Rates (a) Adjusted Rates (b) Terminal Rates (c) Life Table Tests (d) Incidental Tumor Tests (d) Cochran-Armitage Trend Test (d) Fisher Exact Test ver: Hepatocellular Adenoma Overall Rates (a) Adjusted Rates (b) Terminal Rates (c) Life Table Tests (d)	P = 0.092N $P = 0.015N$ $P = 0.036N$ lignant $12/50 (24%)$ $27.8%$ $5/35 (14%)$ $P = 0.399N$ $P = 0.065N$ $P = 0.130N$ $3/50 (6%)$ $8.6%$ $3/35 (9%)$ $P = 0.420$	P = 0.060N $P = 0.021N$ $P = 0.030N$ $11/50 (22%)$ $32.1%$ $7/28 (25%)$ $P = 0.523$ $P = 0.479N$ $P = 0.500N$ $0/50 (0%)$ $0.0%$ $0/28 (0%)$ $P = 0.162N$	P = 0.195N $P = 0.023N$ $P = 0.080N$ $7/50 (14%)$ $20.2%$ $1/20 (5%)$ $P = 0.397N$ $P = 0.030N$ $P = 0.154N$ $3/49 (6%)$ $11.3%$ $1/20 (5%)$ $P = 0.441$
Life Table Tests (d) Incidental Tumor Tests (d) Cochran-Armitage Trend Test (d) Fisher Exact Test ematopoietic System: Lymphoma, All Mal Overall Rates (a) Adjusted Rates (b) Terminal Rates (c) Life Table Tests (d) Incidental Tumor Tests (d) Cochran-Armitage Trend Test (d) Fisher Exact Test ver: Hepatocellular Adenoma Overall Rates (a) Adjusted Rates (b) Terminal Rates (c) Life Table Tests (d) Incidental Tumor Tests (d)	P = 0.092N $P = 0.015N$ $P = 0.036N$ lignant $12/50 (24%)$ $27.8%$ $5/35 (14%)$ $P = 0.399N$ $P = 0.065N$ $P = 0.130N$ $3/50 (6%)$ $8.6%$ $3/35 (9%)$ $P = 0.420$ $P = 0.571$	P = 0.060N $P = 0.021N$ $P = 0.030N$ $11/50 (22%)$ $32.1%$ $7/28 (25%)$ $P = 0.523$ $P = 0.479N$ $P = 0.500N$ $0/50 (0%)$ $0.0%$ $0/28 (0%)$	P = 0.195N $P = 0.023N$ $P = 0.080N$ $7/50 (14%)$ $20.2%$ $1/20 (5%)$ $P = 0.397N$ $P = 0.030N$ $P = 0.154N$ $3/49 (6%)$ $11.3%$ $1/20 (5%)$
Life Table Tests (d) Incidental Tumor Tests (d) Cochran-Armitage Trend Test (d) Fisher Exact Test matopoietic System: Lymphoma, All Mal Overall Rates (a) Adjusted Rates (b) Terminal Rates (c) Life Table Tests (d) Incidental Tumor Tests (d) Cochran-Armitage Trend Test (d) Fisher Exact Test ver: Hepatocellular Adenoma Overall Rates (a) Adjusted Rates (b) Terminal Rates (c) Life Table Tests (d) Incidental Tumor Tests (d) Incidental Tumor Tests (d) Cochran-Armitage Trend Test (d)	P = 0.092N $P = 0.015N$ $P = 0.036N$ lignant $12/50 (24%)$ $27.8%$ $5/35 (14%)$ $P = 0.399N$ $P = 0.065N$ $P = 0.130N$ $3/50 (6%)$ $8.6%$ $3/35 (9%)$ $P = 0.420$	P = 0.060N $P = 0.021N$ $P = 0.030N$ $11/50 (22%)$ $32.1%$ $7/28 (25%)$ $P = 0.523$ $P = 0.479N$ $P = 0.500N$ $0/50 (0%)$ $0.0%$ $0/28 (0%)$ $P = 0.162N$ $P = 0.162N$	P = 0.195N $P = 0.023N$ $P = 0.080N$ $7/50 (14%)$ $20.2%$ $1/20 (5%)$ $P = 0.397N$ $P = 0.030N$ $P = 0.154N$ $3/49 (6%)$ $11.3%$ $1/20 (5%)$ $P = 0.441$ $P = 0.634$
Life Table Tests (d) Incidental Tumor Tests (d) Cochran-Armitage Trend Test (d) Fisher Exact Test ematopoietic System: Lymphoma, All Mal Overall Rates (a) Adjusted Rates (b) Terminal Rates (c) Life Table Tests (d) Incidental Tumor Tests (d) Cochran-Armitage Trend Test (d) Fisher Exact Test ver: Hepatocellular Adenoma Overall Rates (a) Adjusted Rates (b) Terminal Rates (c) Life Table Tests (d)	P = 0.092N $P = 0.015N$ $P = 0.036N$ lignant $12/50 (24%)$ $27.8%$ $5/35 (14%)$ $P = 0.399N$ $P = 0.065N$ $P = 0.130N$ $3/50 (6%)$ $8.6%$ $3/35 (9%)$ $P = 0.420$ $P = 0.571$	P = 0.060N $P = 0.021N$ $P = 0.030N$ $11/50 (22%)$ $32.1%$ $7/28 (25%)$ $P = 0.523$ $P = 0.479N$ $P = 0.500N$ $0/50 (0%)$ $0.0%$ $0/28 (0%)$ $P = 0.162N$	P = 0.195N $P = 0.023N$ $P = 0.080N$ $7/50 (14%)$ $20.2%$ $1/20 (5%)$ $P = 0.397N$ $P = 0.030N$ $P = 0.154N$ $3/49 (6%)$ $11.3%$ $1/20 (5%)$ $P = 0.441$
Life Table Tests (d) Incidental Tumor Tests (d) Cochran-Armitage Trend Test (d) Fisher Exact Test ematopoietic System: Lymphoma, All Mai Overall Rates (a) Adjusted Rates (b) Terminal Rates (c) Life Table Tests (d) Incidental Tumor Tests (d) Cochran-Armitage Trend Test (d) Fisher Exact Test ver: Hepatocellular Adenoma Overall Rates (a) Adjusted Rates (b) Terminal Rates (c) Life Table Tests (d) Incidental Tumor Tests (d) Cochran-Armitage Trend Test (d) Fisher Exact Test ver: Hepatocellular Carcinoma	P = 0.092N $P = 0.015N$ $P = 0.036N$ lignant $12/50 (24%)$ $27.8%$ $5/35 (14%)$ $P = 0.399N$ $P = 0.065N$ $P = 0.130N$ $3/50 (6%)$ $8.6%$ $3/35 (9%)$ $P = 0.420$ $P = 0.571$ $P = 0.593$	P = 0.060N $P = 0.021N$ $P = 0.030N$ $11/50 (22%)$ $32.1%$ $7/28 (25%)$ $P = 0.523$ $P = 0.479N$ $P = 0.500N$ $0/50 (0%)$ $0.0%$ $0/28 (0%)$ $P = 0.162N$ $P = 0.162N$ $P = 0.121N$	P = 0.195N $P = 0.023N$ $P = 0.080N$ $7/50 (14%)$ $20.2%$ $1/20 (5%)$ $P = 0.397N$ $P = 0.030N$ $P = 0.154N$ $3/49 (6%)$ $11.3%$ $1/20 (5%)$ $P = 0.441$ $P = 0.634$ $P = 0.651$
Life Table Tests (d) Incidental Tumor Tests (d) Cochran-Armitage Trend Test (d) Fisher Exact Test ematopoietic System: Lymphoma, All Mai Overall Rates (a) Adjusted Rates (b) Terminal Rates (c) Life Table Tests (d) Incidental Tumor Tests (d) Cochran-Armitage Trend Test (d) Fisher Exact Test ver: Hepatocellular Adenoma Overall Rates (a) Adjusted Rates (b) Terminal Rates (c) Life Table Tests (d) Incidental Tumor Tests (d) Cochran-Armitage Trend Test (d) Fisher Exact Test ver: Hepatocellular Adenoma Overall Rates (c) Life Table Tests (d) Incidental Tumor Tests (d) Cochran-Armitage Trend Test (d) Fisher Exact Test ver: Hepatocellular Carcinoma Overall Rates (a)	P = 0.092N $P = 0.015N$ $P = 0.036N$ lignant $12/50 (24%)$ $27.8%$ $5/35 (14%)$ $P = 0.399N$ $P = 0.065N$ $P = 0.130N$ $3/50 (6%)$ $8.6%$ $3/35 (9%)$ $P = 0.420$ $P = 0.571$	P = 0.060N $P = 0.021N$ $P = 0.030N$ $11/50 (22%)$ $32.1%$ $7/28 (25%)$ $P = 0.523$ $P = 0.479N$ $P = 0.500N$ $0/50 (0%)$ $0.0%$ $0/28 (0%)$ $P = 0.162N$ $P = 0.162N$	P = 0.195N $P = 0.023N$ $P = 0.080N$ $7/50 (14%)$ $20.2%$ $1/20 (5%)$ $P = 0.397N$ $P = 0.030N$ $P = 0.154N$ $3/49 (6%)$ $11.3%$ $1/20 (5%)$ $P = 0.441$ $P = 0.634$
Life Table Tests (d) Incidental Tumor Tests (d) Cochran-Armitage Trend Test (d) Fisher Exact Test ematopoietic System: Lymphoma, All Mai Overall Rates (a) Adjusted Rates (b) Terminal Rates (c) Life Table Tests (d) Incidental Tumor Tests (d) Cochran-Armitage Trend Test (d) Fisher Exact Test ver: Hepatocellular Adenoma Overall Rates (a) Adjusted Rates (b) Terminal Rates (c) Life Table Tests (d) Incidental Tumor Tests (d) Cochran-Armitage Trend Test (d) Fisher Exact Test	P = 0.092N $P = 0.015N$ $P = 0.036N$ lignant $12/50 (24%)$ $27.8%$ $5/35 (14%)$ $P = 0.399N$ $P = 0.065N$ $P = 0.130N$ $3/50 (6%)$ $8.6%$ $3/35 (9%)$ $P = 0.420$ $P = 0.571$ $P = 0.593$	P = 0.060N $P = 0.021N$ $P = 0.030N$ $11/50 (22%)$ $32.1%$ $7/28 (25%)$ $P = 0.523$ $P = 0.479N$ $P = 0.500N$ $0/50 (0%)$ $0.0%$ $0/28 (0%)$ $P = 0.162N$ $P = 0.162N$ $P = 0.121N$	P = 0.195N $P = 0.023N$ $P = 0.080N$ $7/50 (14%)$ $20.2%$ $1/20 (5%)$ $P = 0.397N$ $P = 0.030N$ $P = 0.154N$ $3/49 (6%)$ $11.3%$ $1/20 (5%)$ $P = 0.441$ $P = 0.634$ $P = 0.651$
Life Table Tests (d) Incidental Tumor Tests (d) Cochran-Armitage Trend Test (d) Fisher Exact Test ematopoietic System: Lymphoma, All Mai Overall Rates (a) Adjusted Rates (b) Terminal Rates (c) Life Table Tests (d) Incidental Tumor Tests (d) Cochran-Armitage Trend Test (d) Fisher Exact Test iver: Hepatocellular Adenoma Overall Rates (a) Adjusted Rates (b) Terminal Rates (c) Life Table Tests (d) Incidental Tumor Tests (d) Cochran-Armitage Trend Test (d) Fisher Exact Test iver: Hepatocellular Carcinoma Overall Rates (a)	P = 0.092N $P = 0.015N$ $P = 0.036N$ lignant $12/50 (24%)$ $27.8%$ $5/35 (14%)$ $P = 0.399N$ $P = 0.065N$ $P = 0.130N$ $3/50 (6%)$ $8.6%$ $3/35 (9%)$ $P = 0.420$ $P = 0.571$ $P = 0.593$ $4/50 (8%)$	P = 0.060N $P = 0.021N$ $P = 0.030N$ $11/50 (22%)$ $32.1%$ $7/28 (25%)$ $P = 0.523$ $P = 0.479N$ $P = 0.500N$ $0/50 (0%)$ $0.0%$ $0/28 (0%)$ $P = 0.162N$ $P = 0.162N$ $P = 0.121N$ $1/50 (2%)$	P = 0.195N $P = 0.023N$ $P = 0.080N$ $7/50 (14%)$ $20.2%$ $1/20 (5%)$ $P = 0.397N$ $P = 0.030N$ $P = 0.154N$ $3/49 (6%)$ $11.3%$ $1/20 (5%)$ $P = 0.441$ $P = 0.651$ $7/49 (14%)$
Life Table Tests (d) Incidental Tumor Tests (d) Cochran-Armitage Trend Test (d) Fisher Exact Test ematopoietic System: Lymphoma, All Mal Overall Rates (a) Adjusted Rates (b) Terminal Rates (c) Life Table Tests (d) Incidental Tumor Tests (d) Cochran-Armitage Trend Test (d) Fisher Exact Test ver: Hepatocellular Adenoma Overall Rates (a) Adjusted Rates (b) Terminal Rates (c) Life Table Tests (d) Incidental Tumor Tests (d) Cochran-Armitage Trend Test (d) Fisher Exact Test ver: Hepatocellular Carcinoma Overall Rates (a) Adjusted Rates (a) Adjusted Rates (b)	P = 0.092N $P = 0.015N$ $P = 0.036N$ lignant $12/50 (24%)$ $27.8%$ $5/35 (14%)$ $P = 0.399N$ $P = 0.065N$ $P = 0.130N$ $3/50 (6%)$ $8.6%$ $3/35 (9%)$ $P = 0.420$ $P = 0.571$ $P = 0.593$ $4/50 (8%)$ $11.4%$	P = 0.060N $P = 0.021N$ $P = 0.030N$ $11/50 (22%)$ $32.1%$ $7/28 (25%)$ $P = 0.523$ $P = 0.479N$ $P = 0.500N$ $0/50 (0%)$ $0.0%$ $0/28 (0%)$ $P = 0.162N$ $P = 0.162N$ $P = 0.121N$ $1/50 (2%)$ $3.4%$	P = 0.195N $P = 0.023N$ $P = 0.080N$ $7/50 (14%)$ $20.2%$ $1/20 (5%)$ $P = 0.397N$ $P = 0.030N$ $P = 0.154N$ $3/49 (6%)$ $11.3%$ $1/20 (5%)$ $P = 0.634$ $P = 0.651$ $7/49 (14%)$ $29.1%$
Life Table Tests (d) Incidental Tumor Tests (d) Cochran-Armitage Trend Test (d) Fisher Exact Test ematopoietic System: Lymphoma, Ali Mai Overall Rates (a) Adjusted Rates (b) Terminal Rates (c) Life Table Tests (d) Incidental Tumor Tests (d) Cochran-Armitage Trend Test (d) Fisher Exact Test ver: Hepatocellular Adenoma Overall Rates (a) Adjusted Rates (b) Terminal Rates (c) Life Table Tests (d) Incidental Tumor Tests (d) Cochran-Armitage Trend Test (d) Fisher Exact Test ver: Hepatocellular Carcinoma Overall Rates (a) Adjusted Rates (b) Fisher Exact Test ver: Hepatocellular Carcinoma Overall Rates (a) Adjusted Rates (b) Terminal Rates (c)	P = 0.092N $P = 0.015N$ $P = 0.036N$ lignant $12/50 (24%)$ $27.8%$ $5/35 (14%)$ $P = 0.399N$ $P = 0.065N$ $P = 0.130N$ $3/50 (6%)$ $8.6%$ $3/35 (9%)$ $P = 0.420$ $P = 0.571$ $P = 0.593$ $4/50 (8%)$ $11.4%$ $4/35 (11%)$	P = 0.060N $P = 0.021N$ $P = 0.030N$ $11/50 (22%)$ $32.1%$ $7/28 (25%)$ $P = 0.523$ $P = 0.479N$ $P = 0.500N$ $0/50 (0%)$ $0.0%$ $0/28 (0%)$ $P = 0.162N$ $P = 0.162N$ $P = 0.162N$ $P = 0.121N$ $1/50 (2%)$ $3.4%$ $0/28 (0%)$	P = 0.195N $P = 0.023N$ $P = 0.080N$ $7/50 (14%)$ $20.2%$ $1/20 (5%)$ $P = 0.397N$ $P = 0.030N$ $P = 0.154N$ $3/49 (6%)$ $11.3%$ $1/20 (5%)$ $P = 0.441$ $P = 0.634$ $P = 0.651$ $7/49 (14%)$ $29.1%$ $5/20 (25%)$
Life Table Tests (d) Incidental Tumor Tests (d) Cochran-Armitage Trend Test (d) Fisher Exact Test ematopoietic System: Lymphoma, Ali Mai Overall Rates (a) Adjusted Rates (b) Terminal Rates (c) Life Table Tests (d) Incidental Tumor Tests (d) Cochran-Armitage Trend Test (d) Fisher Exact Test ver: Hepatocellular Adenoma Overall Rates (a) Adjusted Rates (b) Terminal Rates (c) Life Table Tests (d) Incidental Tumor Tests (d) Cochran-Armitage Trend Test (d) Fisher Exact Test ver: Hepatocellular Carcinoma Overall Rates (a) Adjusted Rates (b) Terminal Rates (a) Adjusted Rates (b) Terminal Rates (c) Life Table Tests (d) Cochran-Armitage Trend Test (d) Fisher Exact Test	P = 0.092N $P = 0.015N$ $P = 0.036N$ lignant $12/50 (24%)$ $27.8%$ $5/35 (14%)$ $P = 0.399N$ $P = 0.065N$ $P = 0.130N$ $3/50 (6%)$ $8.6%$ $3/35 (9%)$ $P = 0.420$ $P = 0.571$ $P = 0.593$ $4/50 (8%)$ $11.4%$ $4/35 (11%)$ $P = 0.050$	P = 0.060N $P = 0.021N$ $P = 0.030N$ $11/50 (22%)$ $32.1%$ $7/28 (25%)$ $P = 0.523$ $P = 0.479N$ $P = 0.500N$ $0/50 (0%)$ $0.0%$ $0/28 (0%)$ $P = 0.162N$ $P = 0.162N$ $P = 0.162N$ $P = 0.121N$ $1/50 (2%)$ $3.4%$ $0/28 (0%)$ $P = 0.251N$	P = 0.195N $P = 0.023N$ $P = 0.080N$ $7/50 (14%)$ $20.2%$ $1/20 (5%)$ $P = 0.397N$ $P = 0.030N$ $P = 0.154N$ $3/49 (6%)$ $11.3%$ $1/20 (5%)$ $P = 0.441$ $P = 0.634$ $P = 0.651$ $7/49 (14%)$ $29.1%$ $5/20 (25%)$ $P = 0.066$

TABLE E4. ANALYSIS OF PRIMARY TUMORS IN FEMALE MICE IN THE TWO-YEAR FEED STUDY OF HC BLUE NO. 2

	Control	10,000 ppm	20,000 ppm
liver: Hepatocellular Adenoma or Carcinon			
Overall Rates (a)	7/50 (14%)	1/50 (2%)	8/49 (16%)
Adjusted Rates (b)	20.0%	3.4%	31.8%
Terminal Rates (c)	7/35 (20%)	0/28 (0%)	5/20 (25%)
Life Table Tests (d)	P = 0.158	P = 0.062N	P = 0.151
Incidental Tumor Tests (d)	P = 0.301	P = 0.044N	P = 0.131 P = 0.275
Cochran-Armitage Trend Test (d)	P = 0.301 P = 0.422	F=0.04414	P = 0.275
Fisher Exact Test	F = 0.422	P = 0.030N	P = 0.483
rishet Elact lest		P=0.030N	P=0.483
ituitary: Adenoma			
Overall Rates (a)	9/49 (18%)	2/48 (4%)	5/49 (10%)
Adjusted Rates (b)	26.5%	6.0%	25.0%
Terminal Rates (c)	9/34 (26%)	1/28 (4%)	5/20 (25%)
Life Table Tests (d)			
	P = 0.379N	P = 0.051N	P = 0.579N
Incidental Tumor Tests (d)	P = 0.339N	P = 0.042N	P=0.579N
Cochran-Armitage Trend Test (d)	P = 0.129N	D 0 00000	n • • • • • •
Fisher Exact Test		P = 0.028N	P = 0.194N
hyroid: Follicular Cell Adenoma			
Overall Rates (a)	(e) 4/48 (8%)	0/49 (0%)	1/49 (2%)
Adjusted Rates (b)	10.4%	0.0%	5.0%
Terminal Rates (c)	3/35 (9%)	0/27 (0%)	1/20 (5%)
Life Table Tests (d)	P = 0.158N	P = 0.091N	P = 0.334N
Incidental Tumor Tests (d)	P = 0.312N	P = 0.031N P = 0.170N	P = 0.519N
		P = 0.170 M	P=0.019N
Cochran-Armitage Trend Test (d)	P=0.079N	B. A AFANT	
Fisher Exact Test		P = 0.056N	P = 0.175N
byroid: Follicular Cell Carcinoma			
Overall Rates (a)	3/48 (6%)	1/49 (2%)	1/49(2%)
Adjusted Rates (b)	8.6%	3.3%	5.0%
Terminal Rates (c)	3/35 (9%)	0/27 (0%)	1/20 (5%)
Life Table Tests (d)	P = 0.367N	P = 0.395N	P = 0.519N
Incidental Tumor Tests (d)	P = 0.255N	P = 0.288N	P = 0.519N
Cochran-Armitage Trend Test (d)	P = 0.255 N P = 0.196 N	1 = 0.28814	F 0.01914
	F=0.1901	D-0 901 N	D-0.001 M
Fisher Exact Test		P = 0.301N	P = 0.301 N
byroid: Follicular Cell Adenoma or Carcin	oma		
Overall Rates (a)	(e) 7/48 (15%)	1/49 (2%)	2/49 (4%)
Adjusted Rates (b)	18.8%	3.3%	10.0%
Terminal Rates (c)	6/35 (17%)	0/27 (0%)	2/20 (10%)
Life Table Tests (d)	P = 0.120N	P = 0.064N	P = 0.253N
Incidental Tumor Tests (d)	P = 0.145N	P = 0.070N	P = 0.374N
Cochran-Armitage Trend Test (d)	P = 0.033N	1 - 0.01011	1 -0.01414
Fisher Exact Test	F = 0.0331	P = 0.028N	P = 0.075 N
terus: Endometrial Stromal Polyp	0 (70, (0, 4))	0/50/07	
Overall Rates (a)	3/50 (6%)	0/50 (0%)	0/50 (0%)
Adjusted Rates (b)	8.6%	0.0%	0.0%
Terminal Rates (c)	3/35 (9%)	0/28 (0%)	0/20 (0%)
Life Table Tests (d)	P = 0.075N	P = 0.162N	P = 0.235N
Incidental Tumor Tests (d)	P = 0.075N	P = 0.162N	P=0.235N
Cochran-Armitage Trend Test (d)	P = 0.037N		
Fisher Exact Test		P = 0.121N	P = 0.121N

TABLE E4. ANALYSIS OF PRIMARY TUMORS IN FEMALE MICE IN THE TWO-YEAR FEED STUDY OF HC BLUE NO. 2 (Continued)

(a) Number of tumor-bearing animals/number of animals examined at the site

(b) Kaplan-Meier estimated tumor incidence at the end of the study after adjusting for intercurrent mortality

(c) Observed tumor incidence at terminal kill

(e) One animal also had cystadenoma, NOS, of the thyroid follicle.

⁽d) 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 exact test compare directly the overall incidence rates. A negative trend or lower incidence in a dosed group is indicated by (N).

HC Blue No. 2, NTP TR 293

APPENDIX F

HISTORICAL INCIDENCES OF TUMORS IN F344/N RATS AND B6C3F1 MICE RECEIVING NO TREATMENT

	Basal Cell Tumor	Basal Cell Carcinoma	Basal Cell Tumo or Carcinoma
istorical Incidence at Sou	uthern Research Institute		
eserpine	0/49	0/49	0/49
ytembena	0/50	1/50	1/50
genol	0/40	1/40	1/40
annous chloride	0/50	0/50	0/50
annitol	0/50	0/50	0/50
am	0/50	0/50	0/50
opyl gallate	2/50	1/50	3 /50
ralenone	1/50	0/50	1/50
Blue No. 1	0/50	0/50	0/50
TOTAL	3/439 (0.7%)	3/439 (0.7%)	6/439 (1.4%)
SD (b)	1.41%	1.09%	2.03%
ge (c)			
High	2/50	1/40	3/50
Low	0/50	0/50	0/50
erall Historical Incidence	ce		
TOTAL	7/2,320 (0.3%)	14/2,320 (0.6%)	21/2,320 (0.9%)
SD (b)	0.85%	1.34%	1.57%
nge (c)			
High	2/50	3/50	3/50
Low	0/90	0/90	0/90

TABLE F1. HISTORICAL INCIDENCE OF INTEGUMENTARY SYSTEM TUMORS IN MALE F344/N RATSRECEIVING NO TREATMENT (a)

(a) Data as of March 16, 1983, for studies of at least 104 weeks. Four trichoepitheliomas, three sebaceous adenomas, and one sebaceous adenocarcinoma were also observed. The inclusion of these tumors does not affect the reported range. (b) Standard deviation

(c) Range and SD are presented for groups of 35 or more animals.

	Pheochromocytoma	Malignant Pheochromocytoma	Pheochromocytoma or Malignant Pheochromocytoma
Historical Incidence	at Southern Research Inst	itute	·····
Reserpine	3/48	1/48	3/48
Cytembena	11/48	0/48	11/48
Eugenol	9/40	0/40	9/40
Stannous chloride	4/50	1/50	5/50
Mannitol	14/50	0/50	14/50
Ziram	7/50	0/50	7/50
Propyl gallate	4/50	0/50	4/50
Zearalenone	5/50	2/50	7/50
HC Blue No. 1	20/49	1/49	21/49
TOTAL	77/435 (17.7%)	5/435 (1.1%)	81/435 (18.6%)
SD(b)	11.63%	1.46%	11.68%
Range (c)			
High	20/49	2/50	21/49
Low	3/48	0/50	3/48
Overall Historical In	cidence		
TOTAL	(d) 388/2,280 (17.0%)	23/2,280 (1.0%)	409/2,280 (17.9%)
SD(b)	9.20%	1.44%	9.03%
Range (c)			
High	20/49	3/48	21/49
Low	2/50	0/50	3/50

TABLE F2. HISTORICAL INCIDENCE OF ADRENAL TUMORS IN MALE F344/N RATS RECEIVING
RECEIVING NO TREATMENT (a)

(a) Data as of March 16, 1983, for studies of at least 104 weeks

(b) Standard deviation
(c) Range and SD are presented for groups of 35 or more animals.
(d) Includes eight diagnoses of pheochromocytoma of the adrenal medulla

TABLE F3. HISTORICAL INCIDENCE OF MAMMARY GLAND TUMORS IN FEMALE F344/N RATS RECEIVING NO TREATMENT (a)

	Fibroadenoma				
Historical Incidence at Southern Research Institute					
Reserpine	14/50				
Cytembena	17/49				
Eugenol	14/40				
Stannous chloride	16/50				
Mannitol	10/50				
Ziram	16/50				
Propyl gallate	11/50				
learalenone	9/50				
IC Blue No. 1	13/50				
TOTAL	120/439 (27.3%)				
SD (b)	6.40%				
Range (c)					
High	14/40				
Low	9/50				
Overall Historical Incidence					
TOTAL	(d) 543/2,370 (22.9%)				
SD (b)	10.41%				
Range (c)					
High	22/50				
Low	0/50				

(a) Data as of March 16, 1983, for studies of at least 104 weeks
(b) Standard deviation.
(c) Range and SD are presented for groups of 35 or more animals.
(d) Includes four animals in one group diagnosed with cystfibroadenoma. Two fibroadenocarcinomas also have been observed.

	Leukemia	
listorical Incidence at Southern R	esearch Institute	
Reserpine	18/49	
	20/50	
Eugenol	13/40	
stannous chloride	6/50	
fannitol	14/50	
liram	10/50	
ropyl gallate	16/50	
earalenone	9/50	
IC Blue No. 1	13/50	
TOTAL	119/439 (27.1%)	
SD (b)	9.19%	
lange (c)		
High	20/50	
Low	6/50	
Dverall Historical Incidence		
TOTAL	648/2,320 (27.9%)	
SD (b)	10.18%	
Range (c)		
High	23/50	
Low	0/50	

TABLE F4. HISTORICAL INCIDENCE OF HEMATOPOIETIC SYSTEM TUMORS IN MALE F344/N RATS RECEIVING NO TREATMENT (a)

(a) Data as of March 16, 1983, for studies of at least 104 weeks
(b) Standard deviation
(c) Range and SD are presented for groups of 35 or more animals.

TABLE F5.	HISTORICAL INCIDENCE OF HEMATOPOIETIC SYSTEM TUMORS IN MALE B6C3F1 MICE
	RECEIVING NO TREATMENT (a)

	Leukemia	Lymphoma	Leukemia or Lymphoma
storical Incidence at S	outhern Research Institute		
serpine	2/50	6/50	8/50
rtembena	0/49	1/49	1/49
nnitol	1/50	7/50	8/50
am	0/49	3/49	3/49
genol	0/50	5/50	5/50
pyl gallate	0/50	1/50	1/50
aralenone	0/50	6/50	6/50
Blue No. 1	0/50	4/50	4/50
nnous chloride	0/50	7/50	7/50
TOTAL	3/448 (0.7%)	40/448 (8.9%)	43/448 (9.6%)
SD (b)	1.41%	4.69%	5.44%
ge (c)			
High	2/50	7/50	8/50
Low	0/50	1/50	1/50
verall Historical Incide	nce		
TOTAL	17/2,343 (0.7%)	280/2,343 (12.0%)	297/2,343 (12.7%)
SD (b)	1.76%	6.74%	6.98%
nge (c)			
High	5/48	16/50	16/50
Low	0/50	1/50	1/50

(a) Data as of March 16, 1983, for studies of at least 104 weeks
(b) Standard deviation.
(c) Range and SD are presented for groups of 35 or more animals.

	Leukemia	Lymphoma	Leukemia or Lymphoma
istorical Incidence at Se	outhern Research Institute		
eserpine	1/50	10/50	11/50
ytembena	0/48	12/48	12/48
annitol	0/48	14/48	14/48
am	5/50	6/50	11/50
genol	1/50	12/50	13/50
opyl gallate	1/50	8/50	9/50
Iralenone	0/50	15/50	15/50
Blue No. 1	1/50	6/50	7/50
nous chloride	1/50	5/50	6/50
TOTAL	10/446 (2.2%)	88/446 (19.7%)	98/446 (22.0%)
SD (b)	3.07%	7.65%	6.33%
ge (c)			
High	5/50	15/50	15/50
low	0/50	5/50	6/50
verall Historical Incider	nce		
TOTAL	52/2,486 (2.1%)	625/2,486 (25.1%)	677/2,486 (27.2%)
SD (b)	4.71%	10.14%	9.95%
nge (c)			
High	13/46	31/50	31/50
Low	0/50	4/50	4/50

TABLE F6. HISTORICAL INCIDENCE OF HEMATOPOIETIC SYSTEM TUMORS IN FEMALE $B6C3F_1$ MICE RECEIVING NO TREATMENT (a)

(a) Data as of March 16, 1983, for studies of at least 104 weeks
(b) Standard deviation
(c) Range and SD are presented for groups of 35 or more animals.

	Adenoma	Carcinoma	Adenoma or Carcinoma
listorical Incidence at S	outhern Research Institute		· · · ·
eserpine	0/48	0/48	0/48
ytembena	0/45	1/45	1/45
annitol	0/45	0/45	0/45
ram	0/44	1/44	1/44
agenol	1/41	0/41	1/41
opyl gallate	5/48	1/48	6/48
aralenone	3/46	0/46	3/46
CBlue No. 1	4/44	0/44	4/44
nnous chloride	0/43	0/43	0/43
TOTAL	13/404 (3.2%)	3/404 (0.7%)	16/404 (4.0%)
SD (b)	4.32%	1.10%	4.49%
nge (c)			
High	5/48	1/44	6/48
Low	0/48	0/48	0/48
verall Historical Incide	nce		
TOTAL	163/2,051 (7.9%)	8/2,051 (0.4%)	171/2,051 (8.3%)
SD (b)	8.71%	0.99%	8.59%
nge (c)			
High	13/41	2/44	13/41
Low	0/48	0/49	0/48

TABLE F7. HISTORICAL INCIDENCE OF PITUITARY GLAND TUMORS IN FEMALE $B6C3F_1$ MICE RECEIVING NO TREATMENT (a)

(a) Data as of March 16, 1983, for studies of at least 104 weeks. Includes adenomas and carcinomas designated NOS or

(a) Data has a main res, receiption brands of a state of
APPENDIX G

CHEMICAL CHARACTERIZATION

OF HC BLUE NO. 2

I. Identity and Purity Determinations Performed by the Analytical Chemistry Laboratory

- A. Lot No. 5130777
 - 1. Physical Properties

• •		
a. Appearance:	Dark blue microcrystalline po	owder
b. Melting Point:	Determined	Literature Values
	83.5°-90°C (visual melting point, capillary), small endotherm at 43.0°-51.0°C, larger endotherm at 90.5°-94.0°C (Dupont 900 DTA)	No literature reference found
2. Spectral Data		
a. Infrared	Determined	Literature Values
(1) Instrument:	Beckman IR-12	
(2) Phase:	1% in potassium bromide pellet	
(3) Results:	See Figure 6	Consistent with spectrum obtained from Clairol Research Laboratories and with structure
b. Ultraviolet/Visible	Determined	Literature Values
(1) Instrument:	Cary 118	
(2) Solvent:	Methanol	Water
(3) Results:	$\lambda_{\max}(nm)$ $\varepsilon \times 10^{-4}$	$\lambda_{\max}(nm)$ $\varepsilon \times 10^{-4}$
	$\begin{array}{ccc} 263 & 1.67 \pm 0.09 (\delta) \\ 531 & 0.24 \pm 0.01 (\delta) \end{array}$	525 0.363 (Clairol)



FIGURE 6. INFRARED ABSORPTION SPECTRUM OF HC BLUE NO. 2 (LOT NO. 5130777)

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APPENDIX G. CHEMICAL CHARACTERIZATION

c. Nuclear Magnetic Resonance	Determined	<u>Literature Values</u>	
(1) Instrument:	Varian EM-360 A		
(2) Solvent:	Deuterated methanol with internal tetramethylsilane		
(3) Assignments:	See Figure 7	No literature reference found. Spectrum is consistent with that expected for structure.	
(4) Chemical Shift (8):	a 2t, 3.00-3.94 ppm b d, 7.03 ppm c d of d, 7.35 ppm d d, 7.47 ppm e s, 4.82 ppm (H ₂ O and ex f s, 1.00 ppm (impurity)	changeable protons)	
(5) Coupling Constant:	$\begin{array}{l} J_{b-c} = 10 \ Hz \\ J_{c-d} = 4 \ Hz \end{array}$		
(6) Integration Ratios:	a 14.89 b 1.20 c 1.92 d H_2O and exchangeabl f 0.12 (impurity)	e protons	
3. Titration:	Titration of one amine functi 78.5%± 0.7(8)%	on with perchloric acid,	
4. Water Analysis (Karl Fischer):	1.61% ± 0.14(8)%		
5. Elemental Analysis:			
Element	СН	<u>N</u>	
Theory (T)	50.52 6.71 14	.73	
Determined (D)		.72 .89	
Percent D/T	81.5 84.9 80	.4	





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6. Chromatographic Analyses

a. Thin-Layer Chromatography

(1) Plates: Silica Gel-25; F-254

(2) Reference Standard: 2,6-diaminotoluene

(3) Amount Spotted: 100 and 300 µg, 10 µg/µl in methanol

(4) Visualization: Ultraviolet light (254 and 366 nm); furfural:glacial acetic acid (10 drops:10 ml) (Feigl, 1966)

System 1: Chloroform:methanol (75:25)

(a) R_f: 0.80 (trace), 0.72 (trace),
0.68 (trace), 0.65 (trace), 0.59 (major),
0.53 (minor), 0.42 (trace, 366 nm only),
0.19 (trace, 366 nm only), 0.14 (trace, 366 nm only)
0.06 (trace), 0.03 (trace, 366 nm only), origin (trace)

(**b**) **R**_{st}: 1.25, 1.13, 1.06, 1.02, 0.92, 0.83, 0.66, 0.30, 0.22, 0.09, 0.05, origin

System 2: Ethyl acetate:ethanol (88:12)

(a) R_{f} : 0.46 (trace), 0.41 (slight trace), 0.35 (minor), 0.32 (trace), 0.25 (major), 0.19 (minor), 0.16 (trace, 366 nm only), 0.11 (trace, 366 nm only), 0.03 (trace, 366 nm only), origin (minor)

(**b**) **R**_{st}: 1.00, 0.89, 0.76, 0.70, 0.54, 0.41, 0.35, 0.24, 0.07, origin

b. High-Performance Liquid Chromatography:

(1) Instrument: Waters Programmable Component System

(2) Column: μ Bondapak C₁₈, 300 × 4 mm, ID

(3) Detector: Ultraviolet, 254 nm

(4) Solvent Program: Water: acetonitrile (92:8), isocratic

(5) Solvent Flow: 1.0 ml/min

(6) Sample Injected: 10 µl of 1.0 mg/ml in methanol

(7) **Results:** Major peak and 10 impurities. Three impurities had areas of 1.4%, 17.3%, and 5.6% that of the major peak area. The other seven impurities had areas totaling less than 1.5% that of the major peak area. No other impurities were observed with higher acetonitrile:water ratios.

<u>Peak</u>	Retention Time (min)	RetentionTime Relative to <u>Major Peak</u>	Area (percent of <u>major peak)</u>
1	1.4	0.06	0.25
2	4.5	0.20	0.02
2 3	4.5 5.5} unresolv	^{ed} 0.24 [}]	0.23
4 5 6 7	9.5	0.42	0.09
5	11.3	0.51	1.4
6	13.2	0.59	0.09
7	16.8	0.75	17.3
8	22.5	1.00	100
8 9	27.0	1.20	0.41
10	33.2	1.48	0.27
11	41.0	1.82	5.6

7. Conclusions: Results of elemental analyses for carbon, hydrogen, and nitrogen were lower than the theoretical values. Titration of the amine function with perchloric acid indicated a purity of $78.5\% \pm 0.7(\delta)\%$. Thin-layer chromatography by one system indicated 1 minor impurity and 10 trace impurities. A second thin-layer chromatography system indicated three minor impurities, five trace impurities, and one slight trace impurity. High-performance liquid chromatography indicated 10 impurities. Three impurities had areas of 1.4%, 17.3%, and 5.6% that of the major peak area. The other seven impurities totaled less than 1.5% that of the major peak area. The infrared, ultraviolet/visible, and the nuclear magnetic resonance spectra were consistent with the structure of HC Blue No. 2.

APPENDIX G. CHEMICAL CHARACTERIZATION

B. Lot No. 9233				
1. Physical Properties				
a. Appearance:	Blackish-blue amorphous powder			
b. Melting point:	93°-98°C (visual, capillary)			
2. Spectral Data				
a. Infrared	Determined	Literature Values		
(1) Instrument:	Beckman IR-12			
(2) Phase :	0.5% in potassium bromide pellet			
(3) Results:	See Figure 8	Consistent with spectrum from Clairol Research Labs and with that for lot no. 5130777		
b. Ultraviolet/Visible	Determined	Literature Values		
(1) Instrument:	Beckman model 25			
(2) Solvent:	Methanol	Water		
(3) Results:	λ_{\max} (nm) $\epsilon \times 10^{-4}$	λ_{\max} (nm) $\epsilon \times 10^{-4}$		
	$\begin{array}{ccc} 534 & 0.34 \pm 0.04 (\delta) \\ 264 & 2.16 \pm 0.06 (\delta) \end{array}$	525 0.363 (Clairol Research Labs)		
c. Nuclear Magnetic Resonance	Determined	Literature Values		
(1) Instrument:	Varian EM-360A			
(2) Solvent:	Deuterated methanol with internal tetramethylsilane			
(3) Assignments:	See Figure 9	No literature reference found. Spectrum consistent with structure.		
(4) Chemical Shift (8):	a 2t, 3.37-3.90 ppm b d, 6.92 ppm c d of d, 7.28 ppm d d, 7.42 ppm e s, 4.83 ppm (HDO and exch	angeable protons)		
(5) Coupling Constant:	$ J_{b-c} = 10 \text{ Hz} \\ J_{c-d} = 4 \text{ Hz} $			

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FIGURE 8. INFRARED ABSORPTION SPECTRUM OF HC BLUE NO. 2 (LOT NO. 9233)







(6) Integration Ratios:	a b c d e	13.26 (includ 0.97 1.77 HDO and exc	es methanol) changeable pr	otons
3. Titration:	monito	on of one aming red potentions $p \pm 0.4(\delta)\%$	e function wit etrically with	h 0.1N perchloric acid, a combination electrode:
4. Water Analysis (Karl Fischer):	1.24% :	± 0.08(δ)%		
5. Elemental Analysis:				
Element	C	Н	N	
Theory (T)	50.5 2	6.71	14.73	
Determined (D)	48.11 48.35	6.90 6.84	14.41 14.37	
Percent D/T	95.47	102.38	97.69	

6. Chromatographic Analyses

a. Thin-Layer Chromatography

(1) Plates: Silica Gel 60 F-254

(2) Reference Standard: 1 μ l of a solution (10 μ g/ μ l) of 2,6-diaminotoluene in methanol

(3) Amount Spotted: 1, 10, and 30 μ l of a solution (10 μ g/ μ l) in methanol

(4) Visualization: Visible light, short (254 nm)and long (366 nm) wave ultraviolet; further visualization with furfural in acetic acid (1 drop/ml) (Feigl, 1966). Plates were warmed gently to intensify spots.

			Visualization			
Spot Intensity	<u>R</u> f	<u>R</u> st –	Vis. Light	<u>Spray</u>	<u>254 nm UV</u>	<u>366 nm UV</u>
System 1: Chloroform:methanol (75:25)						
Slight trace Trace Major Slight trace Trace Trace Slight trace	0.585 0.563 0.474 0.415 0.378 0.326 0.207	1.082 1.041 0.877 0.767 0.699 0.603 0.384	Brown Purple Gold 	Brown Green Purple Gold Purple	+ +/ + 	Gold Purple Gold
Trace Trace Minor Reference	0.126 0.037 Origin 0.541	0. 233 0. 068	Brown Brown +/-	Brown Brown Orange	 +/- + +	Blue Gold Brown

Trace	0.404	0.917	Purple	Purple	+	
Trace	0.338	0.767		'	+	
Major	0.250	0.567	Purple	Green	+	Purple
Trace	0.169	0.383	Yellow	Yellow		Yellow
Minor	0.125	0.283	Yellow	Pink	+	Yellow
Slight Trace	0.066	0.150		Blue		Blue
Trace	0.029	0.067				Blue
Minor	Origin		Brown	Brown	+	Gold
Reference	0.441		+/-	Orange	+	

System 2: Ethylacetate:ethanol (88:12)

b. High-Peformance Liquid Chromatography:

(1) Instrument System: Pump(s): Waters 6000A Programmer: Waters 660 Detector: Waters 440 Injector: Waters U6K

(2) Column: Waters μ Bondapak C₁₈, 300 \times 3.9 mm ID

(3) Detection: Ultraviolet, 254 nm

(4) Guard Column: Whatman CO:Pell ODS, 72×2.3 mm ID

(5) Solvent Program: 92% water:8% acetonitrile, isocratic

(6) Flow Rate: 2 ml/min

(7) Samples Injected: 20 μ l of a solution (0.98 mg/ml) of HC Blue No. 2 in methanol, filtered

(8) Results: A major peak and one impurity before the major peak with an area of 1.5% that of the major peak area. Four other impurities were observed, but all were less than 0.1% that of the major peak area. Some residue was found on the Millipore filter after filtration of the sample solution. Sample injections at 100%, 80%, 60%, 40%, 20%, 15%, and 10% acetonitrile each indicated no additional impurities.

<u>Peak</u>	Retention <u>Time (min)</u>	RetentionTime Relative to <u>Major Peak</u>	Area (percent of <u>major peak)</u>
1	8.4	0.84	1.5
2	10.0	1.00	100

The previous lot (no. 5130777) was chromatographed by this same chromatographic system; more and larger impurities were observed for that lot. The chromatographic profile was very similar to that obtained in the original analysis. The major peak of lot no. 5130777 was 28% smaller than that for lot no. 9233 with the same sample concentration and injection volume.

7. Conclusions: Results of elemental analysis for carbon was low, for nitrogen very slightly low, and for hydrogen in agreement with the theoretical value. Water analysis by Karl Fischer titration indicated $1.24\% \pm 0.08(\delta)\%$. Titration with perchloric acid of one amine group indicated a purity of $102.9\% \pm 0.4(\delta)\%$. Thin-layer chromatography by one system indicated a major spot, a minor spot (at the origin), five trace, and three slight trace impurities. A second system indicated a major spot, two minor spots (one at the origin), four trace impurities, and a slight trace impurity. High-performance liquid chromatography indicated one impurity before the major peak with an area of 1.5% that of the major peak. Four other impurities were observed, all of which were less than 0.1% that of the major peak. The infrared, ultraviolet/visible and nuclear magnetic resonance spectra were consistent with the structure of HC Blue No. 2.

APPENDIX G. CHEMICAL CHARACTERIZATION

II. Test Chemical Stability Study Performed by the Analytical Chemistry Laboratory

A. Sample Preparation and Storage: HC Blue No. 2 samples were stored for 2 weeks at -20° , 5°, 25°, and 60°C.

B. Analytical Method: Titration of the amine function with perchloric acid

C. Results

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Storage Temperature	Percent Purity
-20° C	$100.5 \pm 0.5 (\delta)$
5° C 25° C	100.4 ± 0.6 (δ) 100.1 ± 0.3 (δ)
60° C	$99.6 \pm 0.4 (\delta)$

D. Conclusion: HC Blue No. 2 is stable as the bulk chemical when stored for 2 weeks at temperatures of up to 60° C. The 60° C sample, however, was sticky and had condensed brown moisture.

III. Test Chemical Stability at the Testing Laboratory

A. Storage Conditions: The chemical was stored at 5°C.

B. Analytical Method:

1. Purity Determination: The absorbances of the bulk sample and reference aliquot were determined at 530 nm through the use of a Cary 17 spectrophotometer.

2. Identity Determination: The infrared absorption spectra of the sample was obtained as potassium bromide disks with a Perkin-Elmer 621.

C. Results:

1. Purity:

Date of <u>Analysis</u>	Lot No.	Abso Bulk	orptivity (a) <u>Reference</u>	Percent <u>Purity (b)</u>
05/24/78	5130777	0.26	0.27	96.3
08/25/78	5130777	0.26	0.27	96.3
12/19/78	5130777	0.231	0.237	97.5
04/26/79	5130777	0.244	0.229	106.6
08/10/79	5130777	0.276	0.257	107.4
12/09/79	9233	0.351	0.361	97.2
02/20/80	9233	0.333	0.338	98.5
06/10/80	9233	0.321	0.320	100.3
10/13/80	9233	0.339	0.338	100.3
02/11/81	9233	0.334	0.342	97.7
06/10/81	9233	0.349	0.357	97.8
10/21/81	9233	0.349	0.358	97.5
02/08/82	9233	0.351	0.355	98.9
		Mean Per	cent Purity	
			5130777	100.8
		Lot no.		98.5

(a) $(1/g-cm) \times 10^{-3}$

(b) Purity of material stored at 5° C relative to reference standard stored at -20° C.

2. Identity: All spectra were consistent with the original spectra supplied by the analytical laboratory.

D. Conclusion: No notable degradation occurred during the studies.

HC Blue No. 2, NTP TR 293

APPENDIX H

PREPARATION AND CHARACTERIZATION

OF FORMULATED DIETS

I. Studies Conducted at the Analytical Chemistry Laboratory

A. Preparation Procedure

1. Premix: HC Blue No. 2 (9.00 g) and NIH 07 feed (21.0 g) were ground together with a mortar and pestle until a uniform meal, free of lumps and agglomerates, was obtained. This weight of feed was approximately equal in volume to the volume of chemical used and was necessary to adequately disperse the chemical for the premix. The mixture in the mortar was transferred to a 2-liter stainless steel beaker and mixed by spatula with 170.0 g of feed for several minutes. About 40 g of the premix blend was placed in the mortar and stirred briefly to take up residual chemical and then returned to the beaker and mixed to complete preparation of 200-g premix.

2. Bulk Mixing: A 600-g portion of feed was layered evenly in the blender; then the 200 g of premix was added in roughly equal amounts to each blender shell. The fine material adhering to the beaker walls was taken up by stirring 100 g of feed in the beaker and pouring it onto the premix after adding an additional 600 g of feed in roughly equal amounts to both shells, and the blender ports were sealed. The feed and premix were blended with the intensifier bar turned on for the first 5 minutes and turned off for the last 10 minutes. The outside of the blender was periodically given a firm tap to dislodge any feed packed in the corners of the blender. The target concentration of HC Blue No. 2 in the blend was 6,000 ppm.

3. Extraction and Analysis: Each sample was placed in a 200-ml centrifuge bottle (quantitative transfer) and was extracted with 100 ml of methanol by shaking for 30 minutes on a wrist-action shaker set at maximum stroke. The extracts were clarified by centrifugation, and 5-ml aliquots were diluted to 100 ml with methanol. The absorbance of each sample and standard solution was measured versus methanol in 1-cm quartz cells at 538 nm with a Cary 219 spectrophotometer. Sample absorbances were corrected for the mean feed blank absorbance; then the concentration of HC Blue No. 2 in the sample solutions was calculated by the linear regression equation derived from the absorbance readings and concentrations of the standards.

4. Quality Control: Blank (undosed) feed samples and individual spiked mixtures (at the 6,000-ppm concentration) were extracted and prepared for analysis in the manner described above. Standard solutions of HC Blue No. 2 in methanol were used to determine the extinction coefficient for the compound at the analytical wavelength. Blank sample absorbance values were small and were subtracted from the absorbance values of samples containing HC Blue No. 2.

B. Homogeneity

1. Results:

Samp Local		Determined <u>Concentration (ppm)</u>	Determined Concentration Target Concentration (a)
Right	1	5,990	99.8
Right	2	5,920	98.8
Right		5,790	96.5
		,	$Avg = \frac{96.5}{98.3 \pm 1.7(8)}$
Left 1		5,960	99.4
Left 2		5,920	98.5
Left 3		5,840	97.3
		-,	$Avg = \frac{1}{98.4} \pm 1.0(8)$
Botto	m 1	5,690	94.8
Botto	m 2	5,900	98.3
Botto		5,680	94.7
		-,	$Avg = \frac{1}{95.9} \pm 2.0(8)$

(a) Target concentration of chemical in feed, 6,000 ppm

APPENDIX H. PREPARATION AND CHARACTERIZATION

2. Conclusion: A feed blend prepared by the recommended protocol at the 6,000 ppm concentration, and sampled at three blender locations, exhibited a maximum variation of 2.5% in dose concentration between any two sampling points.

C. Stability

1. Sample Mixing and Storage: A stock solution of HC Blue No. 2 in methanol (1.03 mg/ml) was prepared, and 5 ml of this solution was added to individual 5-g samples of Wayne Lab Blox[®] Rodent Feed. The methanol was removed from the samples on a rotary evaporator (20 minutes; water bath temperature, 35° C). The dried samples were thoroughly mixed with a vortex mixer and were stored in duplicate at -20° , 5°, 25°, or 45° C for 2 weeks.

2. Extraction and Analysis: Each stability sample was quantitatively transferred to a 200ml centrifuge bottle and extracted according to the procedure described in Section I.A.3. A 10ml aliquot of each extract solution was filtered through a 1.2-micron Millipore filter and then analyzed by high-performance liquid chromatography.

- a. Instrument: Waters Programmable Component System
- b. Column: μ Bondapak C₁₈, 300 × 4 mm, ID
- c. Detector: Ultraviolet, 254 nm
- d. Solvent: Water: acetonitrile (90:10), isocratic
- e. Solvent flow rate: 10 ml/min
- f. Retention time of compound: 15 min

3. Quality Control: Blank (undosed) feed samples and individual samples spiked at the 0.1% level were extracted and prepared for analysis in the manner described for test samples. The blank showed no feed interference.

4. Results

Average Percent Chemical Found in
<u>Chemical/Vehicle Mixture</u> (a)
0.103 ± 0.003
0.099 ± 0.003
0.095 ± 0.003
0.080 ± 0.003

(a) Mean \pm standard deviation corrected for a spiked recovery yield of 94% \pm 3%. Target concentration of chemical in feed, 0.103% \pm 0.001%

5. Conclusions: HC Blue No. 2 mixed with stock rodent feed at the 0.1% concentration was found to be stable to within experimental error over a 2-week storage period at 5°C or below. Samples stored at 25°C for 2 weeks showed a slight but significant loss of the major component when analyzed; samples stored at 45°C showed considerable loss of the major component.

II. Studies Conducted at the Testing Laboratory

A. Preparation: Formulated diets were prepared by adding a dry premix (approximately equal amounts of the feed and chemical) to the appropriate amount of feed and blending for 15 minutes. The mixtures were held at 5°C for no more than 2 weeks.

B. Homogeneity

1. Procedure: Five-gram feed samples were weighed, placed in a large test tube, and triturated with 20 ml of methanol for 2 minutes in a Polytron[®] high-speed blender. The mixture was filtered through a Millipore filtering apparatus. The feed residue was then twice mixed with an additional 20 ml of methanol and filtered through a Millipore filter. The residue was rinsed with additional aliquots of methanol until there was no trace of the dye in the feed residue. The combined filtrates were placed in a 100-ml volumetric flask and brought to volume with additional methanol. The absorbance of these solutions was measured at 532 nm to determine the HC Blue No. 2 content. These absorbances were compared with a standard absorption curve for HC Blue No. 2.

2. Results

Sample Location	Target Concentration (percent wt/wt)	Determined Concentration (percent wt/wt)	Percent of Target
Top left	0.31	0.29	93.5
Top right	0.31	0.31	100
Bottom	0.31	0.25	80.6
Top left	5.0	5.14	102.8
Top right	5.0	5.14	102.8
Bottom	5.0	5.47	109.4

C. Conclusion: The homogeneity of the low dose mixture was poor. The concentration at one sampling position was approximately 20% lower than the target concentration. All sampling locations of the high dose were within specifications.

APPENDIX I

ANALYSIS OF FORMULATED DIETS: METHODS

HC Blue No. 2, NTP TR 293

APPENDIX I. ANALYSIS: METHODS

The analytical procedures used by the testing and referee laboratories were similar. Both used a methanolic extraction procedure and a spectrophotometric quantitation step.

I. Testing Laboratory

A. Procedure

- 1. Samples of HC Blue No. 2 as a chemical/feed mixture were received for analysis.
- 2. Duplicate 5-g samples were weighed to the nearest 0.01 g into 50-ml test tubes.

3. Four 5-g samples of plain feed were weighed out, and two of these were spiked with 50 mg of HC Blue No. 2.

4. Twenty-five milliliters of reagent grade methanol was added to each sample, spiked plain feed, and plain feed.

5. The samples were triturated for 2 minutes on a Brinkman Polytron[®] Homogenizer.

6. Samples were filtered through a Millipore suction filter apparatus with a fiberglass filter.

7. Twenty-five milliliters of methanol was added to rinse the sample tube, and the rinse was added to the filtered feed residue with the suction off.

8. The feed mixture and methanolic rinse were stirred with a glass stirring rod.

9. The mixture was filtered by reattaching the suction.

10. Steps 7-9 were repeated.

11. The sample tube and feed residue were rinsed with 10-ml portions of methanol until no trace of HC Blue No. 2 was left in the feed residue.

12. The combined filtrates were transferred to a 100-ml volumetric flask and brought to volume with methanol.

13. The absorbance from 520 to 540 nm was measured against a methanol reference.

14. The concentration of HC Blue No. 2 in each sample and spike was calculated from the measured absorbance at 532 nm. The absorbance of the plain feed extracts was subtracted from the absorbances of the sample and spiked plain feed extracts.

B. Calculations

1. Concentrations of the sample may be read directly from a verified standard concentrationabsorbance curve.

2. A 5-mg sample of HC Blue No. 2 was weighed on the Cahn G-2 electrobalance to the nearest microgram and transferred to a 50-ml volumetric flask.

3. Methanol was added to the 50-ml mark.

4. Five different dilutions were made of the solution.

5. The absorbance was measured from 520 to 540 nm on all of the dilutions and the original stock solution through the use of a Cary 17 Absorption Spectrometer.

6. With the absorbance as the independent variable and the concentration as the dependent variable, the slope and intercept of the calibration line were determined by the method of least squares (the zero-concentration, zero-absorbance point was included as a valid point in this treatment). The correlation coefficient and the standard deviation in the concentration were calculated as a measure of the goodness of fit of the data to a straight line.

II. Analytical Chemistry Laboratory

A. Procedure

1. Preparation of Spiked Feed Standards: Two standard solutions of HC Blue No. 2 were prepared independently in methanol. These solutions were diluted with methanol to span the range of the dosing concentration. Ten-milliliter aliquots of the six standard solutions were pipetted into individual 200-ml centrifuge bottles containing 5 g of undosed feed to make spiked feed samples bracketing the specified dose range. One 200-ml centrifuge bottle containing 5 g of undosed feed was treated with 10 ml of methanol for use as a blank. The spiked feed and the feed blank were sealed and allowed to stand overnight at room temperature before being used in the following analytical procedure.

2. Preparation of Dosed Feed Sample: Triplicate weights of the dosed feed sample (approximately 5 g weighed to the nearest 0.001 g) were transferred to individual 200-ml centrifuge bottles. Ten milliters of methanol was pipetted into each sample; then the bottles were sealed and allowed to stand overnight at room temperature before being analyzed by the following procedure.

3. Analysis: Ninety milliliters of methanol was pipetted into each blank, standard, and sample bottle, and the bottles were shaken at maximum stroke for 30 minutes on a Burrell Model 75 Wrist Action® shaker. After the bottles were centrifuged for 10 minutes, a 5- to 7-ml aliquot from each extract was appropriately diluted with methanol (25-100 ml) and thoroughly mixed. The absorbance of each solution was measured at 532-538 nm versus methanol in 1-cm quartz cells on a Cary 118 spectrophotometer.

The total amount of HC Blue No. 2 in each feed sample was determined from the linear regression equation obtained from the standard data, relating the absorbance of each spiked feed and blank sample to the amount of chemical in the respective spiked feed.

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APPENDIX J

ANALYSES OF FORMULATED DIETS: DATA

HC Blue No. 2, NTP TR 293

I. Thirteen-Week Studies: Formulated diets were analyzed twice during the 13-week studies: before administration and after 1 week of dosing. The results ranged from 90.3% to 112.9% of the target concentrations.

	Determined Concentration for Target Concentration of							
	3,100 ppm	6,200 ppm	12,500 ppm	25,000 ppm	50,000 ppm			
Initial	2,800	7,000	13,500	26,000	52,500			
Week One	3,000		13,900		52,000			

II. Two-Year Studies: Samples of diet formulations were analyzed monthly. The results of the initial mixes ranged from 67.6% to 123.2% of the target concentrations (Table J1). It is assumed that the number of remixes required reflects the number of mixes out of specification $(\pm 10\%)$ of the target concentrations. The mixes were out of specification 14.6% of the time.

Split sample analyses were performed by the testing and analytical (referee) laboratories to verify analytical procedures. The analyses by both laboratories were within 10% of the target concentrations. The interlaboratory values were within 10% of each other (Table J2).

	Determined	d Concentration for Target (
late Mixed	5,000 ppm	10,000 ppm	20,000 ppm
2/12/80	(b) 4 ,200	9,970	18,280
2/15/80	(c) 3,860	- , - · · ·	
3/11/80	4,790	10,740	
0/11/00	4,100	10,880	
4/4/80	4,620	9,830	18,680
	4,500	10,500	10,000
5/6/80	4,500		
<i>c 10 1</i> 00	(1) (100	9,280	00.900
6/3/80	(b) 6,160	9,740	20,860
6/6/80	(c) 4 ,240	10	
7/1/80	4,830	10,500	
		9,330	
7/29/80	5,210	9,980	20,000
8/26/80	5,090	9,510	
		10,200	
9/23/80	4,840	9,800	18,500
10/2/80	4,560	9,570	,
	2,000	9,130	
11/18/80	4,100	9,340	20,200
12/16/80	4,610	9,390	20,200
12/10/80	4,010	9,460	
1/10/01	4 7 9 0		(b) 17 850
1/13/81	4,720	9,280	(b) 17,850
1/16/81	. 199	0.100	(c) 17,600
2/10/81	5,180	9,120	
		10,130	
3/10/81	(b) 4,45 0	10,140	20,920
3/13/81	(c) 4 ,730		
4/7/81	(b) 5,700	(b) 11,500	
	-	9,620	
4/9/81	(c) 4,630	(c) 9,360	
5/5/81	4,580	9,260	18,600
6/2/81	4,650	10,210	10,000
0/2/01	4,000	9,300	
6/30/81	(b) 4 ,110	9,680	(b) 15,660
		3,000	(c) 17,300
7/2/81	(c) 4,850	9,240	(c) 17,300
7/21/81	(b) 3,38 0		
		9,570	
7/23/81	(c) 4 ,790		
8/25/81	4,950	9,980	18,400
9/22/81	4,930	(b) 8,38 0	18,430
		9,300	
9/24/81		(c) 9,260	
10/20/81	4,790	9,640	19,530
11/10/81	(b) 4,270	9,690	(b) 22,900
	(6) =,0 / 0	9,390	(5) 22,000
11/12/01	(c) 4,82 0	3,030	(c) 18,810
11/13/81	4,500	10,420	19,130
12/8/81			
1/5/82	5,450	9,620	19,330
	4,660		20,840
Mean (ppm)	4,734	9,753	19,301
Standard deviation	539.0	584.4	1,605.6
Coefficient of variation (percent)	11.4	6.0	8.3
		8,380-11,500	15,660-22,900
lange (ppm)	3,380-6,160	8 380-11 500	

TABLE J1. CONCENTRATIONS OF HC BLUE NO.2 IN FEED IN THE TWO-YEAR STUDIES(a)

(a) The data presented are the results of duplicate analyses.
(b) Out of specifications. Not used in the study.
(c) Remix. Not included in the mean.

	Target	Determined	Concentration
Date Mixed	Concentration (ppm)	Testing Laboratory	Analytical Laboratory
7/27/80	5,000	5,210	5,240
11/18/80	5,000	4,100	4,600
6/2/81	10,000	9,300	8,400
10/20/81	20,000	19,530	18,700
1/5/82	5,000	5,450	4,500

TABLE J2. REFEREE SAMPLE DATA IN THE TWO-YEAR FEED STUDIES OF HC BLUE NO.2

APPENDIX K

SENTINEL ANIMAL PROGRAM

APPENDIX K. SENTINEL ANIMAL PROGRAM

I. Methods

Rodents used in the Carcinogenesis Program of the National Toxicology Program are produced in optimally clean facilities to eliminate potential pathogens that may affect test results. The Sentinel Animal Program is part of the periodic monitoring of animal health that occurs during the toxicologic evaluation of chemical compounds. Under this program, the disease state of the rodents is monitored via viral serology on sera from extra (sentinel) animals in the test rooms. These animals are untreated, and these animals and the test animals are both subject to identical environmental conditions. The sentinel animals come from the same production source and weanling groups as the animals used for the studies of chemical compounds.

Fifteen $B6C3F_1$ mice and 15 F344/N rats of each sex are selected at the time of randomization and allocation of the animals to the various study groups. Five animals of each designated sentinel group are killed at 6, 12, and 18 months on study. Data from animals surviving 24 months are collected from 5/50 randomly selected control animals of each sex and species. The blood from each animal is collected and clotted and the serum is separated. The serum is cooled on ice and shipped to Microbiological Associates' Comprehensive Animal Diagnostic Service for determination of the viral antibody titers. The following tests are performed:

	Hemagglutination Inhibition	Complement <u>Fixation</u>	ELISA
Mice	PVM (pneumonia virus of mice) Reo 3 (reovirus type 3) GDVII (Theiler's encephalomyelitis virus) Poly (polyoma virus) MVM (minute virus of mice) Ectro (infectious ectromelia) Sendai	M.Ad. (mouse adenovirus) LCM (lymphocytic choriomeningitis virus	MHV (mouse hepatitis virus) (24 mo)
Rats	PVM KRV (Kilham rat virus) H-1 (Toolan's H-1 virus) Sendai	RCV (rat coronavirus)	
II. Resu	lts		

Results are presented in Table K1.

	Interval (months)	No. of Animals	Positive Serologic Reaction for
RATS	<u> </u>		
	6	1/10	KRV
	12		None positive
	18	4/10	KRV
	24	4/10	KRV
AICE			
	6		None positive
	12	(a) 1/9	Ectro
	18	(a) 1/8	MHV
	24		None positive

TABLE K1. MURINE VIRUS ANTIBODY DETERMINATIONS FOR RATS AND MICE IN THE TWO-YEARFEED STUDIES OF HC BLUE NO. 2

(a) Probably false positive

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APPENDIX L

FEED AND COMPOUND CONSUMPTION BY RATS AND MICE IN THE TWO-YEAR FEED STUDIES OF HC BLUE NO. 2

TABLE L1. FEED AND COMPOUND CONSUMPTION BY MALE RATS IN THE TWO-YEAR FEED STUDYOF HC BLUE NO. 2

	Con	Control		Low D	ose			High Do	ose	
Week	Grams Feed/ Day (a)	Body Weight (grams)	Grams Feed/ Day (a)	Body Weight (grams)	Low/ Control (b) (grams)	Dose/ Day (c)	Grams Feed/ Day (a)	Body Weight (grams)	High/ Control (b) (grams)	Dose/ Day (c)
2	15	184	16	182	1.1	440	14	173	0.9	809
6	14	264	15	257	1,1	292	14	239	1.0	586
12	15	337	14	327	0.9	214	15	306	1.0	490
17	15	363	15	355	1.0	211	15	334	1.0	449
22	15	387	15	374	1.0	201	14	355	0.9	394
26	15	407	14	389	0.9	180	14	370	0.9	378
32	16	431	15	407	0.9	184	15	388	0. 9	387
35	17	443	15	420	0.9	179	15	396	0.9	379
40	17	452	17	430	1.0	198	16	406	0.9	394
45	16	453	15	430	0.9	174	14	409	0.9	342
50	16	468	15	445	0.9	169	14	424	0.9	330
54	16	473	15	447	0.9	168	14	427	0.9	328
59	15	479	15	451	1.0	166	15	430	1.0	349
63	16	473	15	447	0.9	168	15	525	0.9	286
57	16	479	15	454	0.9	165	15	435	0. 9	345
72	16	485	15	454	0.9	165	15	438	0. 9	342
76	16	482	15	450	0.9	167	16	440	1.0	364
81	16	486	17	453	1.1	188	16	438	1.0	365
85	16	486	16	450	1.0	178	15	441	0.9	340
90	15	478	15	446	1.0	168	15	434	1.0	346
93	14	477	16	441	1.1	181	12	431	0.9	278
99	14	476	15	4 39	1.1	171	15	427	1.1	351
10 2	15	466	14	431	0.9	162	15	425	1.0	353
104	14	473	15	441	1.1	170	16	434	1.1	369
Mean	15.4	433	15.2	409	1.0	194	14.8	397	1.0	390
SD (d)	0.9		0.8		0.1	59	0.9		0.1	110
CV (e)	5.8		5.3		10.0	30.4	6.1		10.0	28.2

(a) Grams of feed consumed per animal per day
(b) Grams of feed per day for the dosed group divided by that for the controls
(c) Milligrams of compound consumed per day per kilogram of body weight
(d) Standard deviation

(e) Coefficient of variation = (standard deviation/mean) \times 100

TABLE 12. FEED AND COMPOUND CONSUMPTION BY FEMALE RATS IN THE TWO-YEAR FEED STUDY OF HC BLUE NO. 2

	Con	trol		Low D	lose			High Do	ose	
Week	Grams Feed/ Day (a)	Body Weight (grams)	Grams Feed/ Day (a)	Body Weight (grams)	Low/	Dose/ Day (c)	Grams Feed/ Day (a)	Body Weight (grams)	High/ Control (b) (grams)	Dose/ Day (c)
2	12	128	11	125	0.9	880	11	124	0.9	1,774
6	11	165	10	156	0.9	641	10	156	0.9	1,282
12	11	193	9	179	0.8	503	9 9	180	0.8	1,000
17	10	201	10	189	1.0	529	9	190	0.9	947
22	10	208	9	193	0.9	466	9	196	0.9	918
26	10	216	10	200	1.0	500	11	200	1.1	1,100
32	11	230	10	208	0.9	481	11	204	1.0	1,078
35	11	234	10	209	0.9	478	11	203	1.0	1,084
40	11	244	10	218	0.9	459	9	20 9	0.8	861
45	11	248	9	220	0.8	409	9	209	0.8	861
50	11	262	10	229	0.9	437	10	216	0.9	9 26
54	12	269	10	232	0.8	431	10	216	0.8	926
59	11	276	10	238	0.9	420	8	223	0.7	717
63	8	282	11	239	1.4	46 0	11	222	1.4	991
57	12	293	11	253	0.9	435	10	231	0.8	866
72	12	307	11	263	0.9	418	10	238	0.8	840
76	13	315	12	271	0.9	443	11	238	0.8	924
81	14	325	12	275	0.9	436	12	244	0.9	984
85	13	329	11	280	0.8	393	12	248	0.9	968
90	12	333	11	280	0.9	393	11	248	0.9	887
93	12	337	11	277	0.9	397	13	244	1.1	1,066
99	13	342	11	286	0.8	385	11	251	0.8	876
102	13	340	11	287	0.8	383	13	248	1.0	1,048
104	11	344	11	2 9 8	1.0	369	14	268	1.3	1,045
Mean	11.5	268	10.5	234	0.9	464	10.6	217	0.9	999
SD (d)	1.3		0.8		0.1	106	1.5		0.1	201
CV (e)	11.3		7.6		11.1	22.8	14.2		11.1	20.1

(a) Grams of feed consumed per animal per day
(b) Grams of feed per day for the dosed group divided by that for the controls
(c) Milligrams of compound consumed per day per kilogram of body weight
(d) Standard deviation

(e) Coefficient of variation = (standard deviation/mean) \times 100

TABLE L3. FEED AND COMPOUND CONSUMPTION BY MALE MICE IN THE TWO-YEAR FEED STUDY OF HC BLUE NO. 2

	Control			Low D	ose			High Do	Dose		
Week	Grams Feed/ Day (a)	Body Weight (grams)	Grams Feed/ Day (a)	Body Weight (grams)	Low/ Control (b) (grams)	Dose/ Day (c)	Grams Feed/ Day (a)	Body Weight (grams)	High/ Control (b) (grams)	Dose/ Day (c)	
2	6	27.9	7	29.2	1.2	1,199	7	28.1	1.2	2,491	
6	8	30.6	8	31.8	1.0	1,258	9	30.7	1.1	2,932	
12	9	32.6	10	33.8	1.1	1,479	9	33.0	1.0	2,727	
17	8	\$3.7	8	35.1	1.0	1,140	7	34.6	0.9	2,023	
22	8	36.5	9	37.1	1.1	1,213	8	35.7	1.0	2,241	
26	9	38 .0	10	38.4	1.1	1,302	8	36.2	0.9	2,210	
32	8	38.8	8	38.9	1.0	1,028	8	38.0	1.0	2,105	
35	9	40.3	10	40.2	1.1	1,244	8	38.7	0.9	2,067	
40	9	41.1	9	40.5	1.0	1,111	8	39.0	0.9	2,051	
45	9	41.6	11	40.8	1.2	1,348	9	40.1	1.0	2,244	
50	10	41.7	9	41.7	0.9	1,079	9 8 8 9 7	40.4	0.8	1,980	
55	9	41.0	9	41.3	1.0	1,090	8	39.7	0.9	2,015	
59	10	41.3	10	41.4	1.0	1,208	9	39.7	0.9	2,267	
63	9	42.5	10	42.0	1.1	1,190	7	40.2	0.8	1,741	
67	11	42.1	11	42.3	1.0	1,300		40.0	0.7	2,000	
72	10	42.5	11	42.2	1.1	1,303	8 9 8 9 8 7	40.5	0.9	2,222	
76	11	41.6	9	41.6	0.8	1,082	8	39.5	0.7	2,025	
81	13	41.4	11	40.9	0.8	•	9	39.0	0.7	2,308	
85	11	40.9	10	40.2	0.9	1,244	8	38.9	0.7	2,057	
90	11	40.0	10	39.4	0.9	1,269	7	37.7	0.6	1,857	
93	13	39.4	13	38.4	1.0	1,693	9	37.7	0.7	2,387	
97	12	39.9	14	38.9	1.2	1,799	9	37.7	0.8	2,387	
101	11	39.4	14	37.9	1.3	1,847	9	37.0	0.8	2,432	
105	12	38.9	14	37.1	1.2	1,887	11	37.0		2,973	
Mean	9.8	38.9	10.2	38.8	1.0	1,319	8.3	37.5	0.9	2,239	
SD (d)	1.7		1.9		0.1	247	0.9		0.1	308	
CV (e)	17.3		18.6		10.0	18.7	10.8		11.1	13.8	

(a) Grams of feed consumed per animal per day
(b) Grams of feed per day for the dosed group divided by that for the controls
(c) Milligrams of compound consumed per day per kilogram of body weight
(d) Standard deviation
(e) Coefficient of variation = (standard deviation/mean) × 100
TABLE 14. FEED AND COMPOUND CONSUMPTION BY FEMALE MICE IN THE TWO-YEAR FEED STUDY OF HC BLUE NO. 2

	Control		Low Dose							
Week	Grams Feed/ Day (a)	Body Weight (grams)	Grams Feed/ Day (a)	Body Weight (grams)	Low/ Controi (b) (grams)	Dose/ Day(c)	Grams Feed/ Day (a)	<u>High Do</u> Body Weight (grams)	High/ Control (b) (grams)	Dose/ Day (c)
2	5	21.4	6	21.6	1.2	2,778	6	20.6	1.2	5,825
6	7	23.1	8	23.3	1.1	3,433	8	23.4	1.1	6,838
12	7	23.9	8	25.1	1.1	3,187	9	24.6	1.3	7,317
17	5	26.3	6	25.7	1.2	2,335	7	25.6	1.4	5,469
22	6	29.6	6	28.7	1.0	2,091	7	27.6	1.2	5,072
26	8	31.6	7	29.9	0.9	2,341	8 8	27.6	1.0	5,797
32	6 8 5 6	35.2	7	31.5	1.4	2,222	8	29.8	1.6	5,369
35		35.1	7	31.8	1.2	2,201	7	29.3	1.2	4,778
40	7	37.3	7	33.5	1.0	2,090	7	30.7	1.0	4,560
45	7	40.1	8	34.4	1.1	2,326	7	31.2	1.0	4,487
50	7	42.9	7	35.5	1.0	1,972	7	32.0		4,375
55	7	44.2	7	36.6	1.0	1,913	7	32.4		4,321
59	7	44.2	7	36.3	1.0	1,928	8	31.3		5,112
63	7	44.9	7	37.1	1.0	1,887	7	32.3	1.0	4,334
67	8	44.9	8	36.7	1.0	2,180	8	32.9	1.0	4,863
72	8	45.7	8	37.2	1.0	2,151	8 9 7	33.1	1.1	5,438
76	7	45.3	7	36.3	1.0	1,928	7	32.3	1.0	4,334
81	7	46.5	8	38.2	1.1	2,094	8	31.8	1,1	5,031
85	7	45.2	7	37.2	1.0	1,882	8	31.6	1.1	5,063
90	6	44.5	8	35.7	1.3	2,241	8	31.4	1.3	5,096
93	9	42.8	9	35.1	1.0	2,564	11	30.9	1.2	7,120
97	9 8	42.9	10	35.6	1.3	2,809	12	31.7		7,571
101	7	41.6	9	35.7	1.3	2,521	12	31.9		7,524
105	8	40.9	10	34.9	1.3	2,865	14	31.9		8,777
fean	6.9	38.3	7.6	33.1	1.1	2,331	8.3	29.9		5,603
SD (d)	1.0		1.1		0.1	419	2.0		0.2	1,250
CV (e)	14.5		14.5		9.1	18.0	24.1		16.7	22.3

(a) Grams of feed consumed per animal per day
(b) Grams of feed per day for the dosed group divided by that for the controls
(c) Milligrams of compound consumed per day per kilogram of body weight
(d) Standard deviation
(e) Coefficient of variation = (standard deviation/mean) × 100

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APPENDIX M

INGREDIENTS, NUTRIENT COMPOSITION, AND CONTAMINANT LEVELS OF THE NIH 07 DIET

Meal Diet: December 1979 to January 1982

(Manufactured by Zeigler Bros., Inc., Gardners, PA)

TABLE M1. INGREDIENTS OF THE NIH 07 RAT AND MOUSE DIET (a)

Ingredients (b)	Percent by Weight		
Ground #2 yellow shelled corn	24,50		
Ground hard winter wheat	23,00		
Soybean meal (49% protein)	12,00		
Fish meal (60% protein)	10.00		
Wheat middlings	10.00		
Dried skim milk	5.00		
Alfalfa meal (dehydrated, 17% protein)	4,00		
Corn gluten meal (60% protein)	3.00		
Soy oil	2,50		
Brewer's dried yeast	2.00		
Dry molasses	1.50		
Dicalcium phosphate	1.25		
Ground limestone	0.50		
Salt	0.50		
Premixes (vitamin and mineral)	0.25		

(a) NIH, 1978; NCI, 1976

(b) Ingredients should be ground to pass through a U.S. Standard Screen No. 16 before being mixed.

TABLE M2. VITAMINS AND MINERALS IN THE NIH O7 DIET (a)

	Amount	Source		
Vitamins				
A	5,500,000 IU	Stabilized vitamin A palmitate or acetate		
D3	4,600,000 IU	Dactivated animal sterol		
K ₃	2.8 g	Menadione activity		
d-A-tocopheryl acetate	20,000 IU			
Choline	560.0 g	Choline chloride		
Folic acid	2.2 g			
Niacin	30.0 g			
I-Pantothenic acid	18.0 g	d-Calcium pantothenate		
Riboflavin	3.4 g	-		
Thiamine	10.0 g	Thiamine mononitrate		
B ₁₂	4,000 µg			
Pyridoxine	1.7 g	Pyridoxine hydrochloride		
Biotin	140.0 mg	d-biotin		
Minerals				
Iron	120.0 g	Ironsulfate		
Manganese	60.0 g	Manganous oxide		
Zinc	16.0 g	Zincoxide		
Copper	4.0 g	Copper sulfate		
lodine	1.4 g	Calcium iodate		
Cobalt	0.4 g	Cobaltcarbonate		

(a) Per ton (2,000 lb) of finished product

TABLE M3. NUTRIENT COMPOSITION OF THE NIH 07 DIET (a)

	Mean	Range	Number of Samples
Nutrient (percent by weight)		· · · · · · · · · · · · · · · · · · ·	
Crude protein	24.40 ± 0.01	22.6-26.3	24
Crude fat	4.92 ± 0.44	4.4-6.0	24
Crude fiber	3.37 ± 0.58	1.4-4.3	24
Ash	6.78 ± 0.42	5.97-7.42	24
ssential Amino Acids (percer	nt of total diet)		
rginine	1.260	1.21-1.31	2
ystine	0.395	0.39-0.40	2
lycine	1.175	1.15-1.20	2
listidine	0.553	0.530-0.576	2
soleucine	0.908	0.881-0.934	2
eucine	1.905	1.85-1.96	2
ysine	1.250	1.20-1.30	2
Sethionine	0.310	0.306-0.314	2
henvlalanine	0.967	0.306-0.314	2
hreonine	0.834	0.840-0.827	2
ryptophan	0.834		2
ryptopnan Vrosine	0.175	0.171-0.178	2
vrosine	1.085	0.566-0.607 1.05-1.12	2 2
anne Ssential Fatty Acids (percent		1.00-1.12	-
inoleic	2.37		1
inolenic	0.308		1
rachidonic	0.008		s 1
litamins			
/itamin A (IU/kg)	$10,275 \pm 2,240$	6,700-17,000	24
itamin D (IU/kg)	6,300		1
-tocopherol (ppm)	37.6	31.1-44.0	2
hiamine (ppm)	16.2 ± 0.428	7.8-23.0	24
liboflavin (ppm)	6.9	6.1-7.4	2
liacin (ppm)	75	65-85	2
antothenic acid (ppm)	30.2	29.8-30.5	2
yridoxine (ppm)	7.2	5.6-8.8	2
olic acid (ppm)	2.1	1.8-2.4	2
liotin (ppm)	0.24	0.21-0.27	2
itamin B ₁₂ (ppb)	12.8	10.6-15.0	2
holine (ppm)	3,315	3,200-3,430	2
finerals			
alcium (percent)	1.32 ± 0.19	0.81-1.6	24
hosphorous (percent)	1.01 ± 0.09	0.82-1.10	24
otassium (percent)	0.809	0.772-0.846	2
hloride (percent)	0.557	0.479-0.635	2
odium (percent)	0.304	0.258-0.349	2
lagnesium (percent)	0.172	0.166-0.177	2
ulfur (percent)	0.278	0.270-0.285	2
ron (ppm)	418	409-426	2
fanganese (ppm)	90.8	86.0-95.5	2
inc (ppm)	55.1	54.2-56.0	2
opper (ppm)	12.68	9.65-15.70	2
odine (ppm)	2.58	1.52-3.64	2
			-
hromium (ppm)	1.86	1.79-1.93	2

(a) One or two batches of feed analyzed for nutrients reported in this table were manufactured in January and/or April 1983.

TABLE M4. CONTAMINANT LEVELS OF THE NIH 07 DIET

Contaminant	Mean ± Standard Deviation	Range	Number of Samples
Arsenic (ppm)	0.37 ± 0.19	<0.05-0.93	24
Cadmium (ppm) (a)	0.11 ± 0.07	< 0.05-0.40	24
Lead (ppm)	1.03 ± 0.61	0.33-2.62	24
Mercury (ppm) (b)	0.05		
Selenium (ppm)	0.27 ± 0.08	0.10-0.48	24
Aflatoxins (ppb) (b,c)	<10		24
Nitrate nitrogen (ppm) (d,e)	7.01 ± 4.08	< 0.1-13.0	24
Nitrite nitrogen (ppm) (d,e)	1.46 ± 1.03	<0.1-3.7	24
BHA (ppm) (f,g)	3.08 ± 3.04	<0.2-11.0	24
BHT (ppm) (f)	2.84 ± 1.59	1.06-5.3	24
Aerobic plate count (CFU/g) (h)	61,000 ± 30,510	10,000-110,000	21
Aerobic plate count (CFU/g) (i)	$87,312 \pm 80,152$	10,000-320,000	24
Coliform (MPN/g) (j)	66 ± 73	<3-240	15
Coliform (MPN/g) (k)	616 ± 823	<3-2,400	24
E. Coli (MPN/g) (1)	5.83 ± 6.08	<3-23	24
Total nitrosamines (ppb) (m,n)	7.42 ± 6.39	2.2-24.5	22
Total nitrosamines (ppb) (m,o)	15.22 ± 27.10	2.2-100.3	24
N-Nitrosodimethylamine (ppb) (m,n)	5.56 ± 5.87	0.7-20.0	22
N-Nitrosodimethylamine (ppb) (m,0)	13.30 ± 26.82	0.7-99.0	24
N-Nitrosopyrrolidine (ppb)	1.34 ± 0.82	0.5-3.5	24
Pesticides (ppm)			
Alpha BHC (b,p)	<0.01		24
Beta BHC (b)	< 0.02		24
Gamma BHC-Lindane (b)	< 0.01		24
Delta BHC (b)	< 0.01		24
Heptachlor (b)	< 0.01		24
Aldrin (b)	< 0.01		24
Heptachlor epoxide (b)	<0.01		24
DDE (b,q)	<0.01	0.05 (7/14/81)	24
DDD (b)	< 0.01		24
DDT (b)	< 0.01		24
HCB (b)	< 0.01		24
Mirex (b)	< 0.01		24
Methoxychlor (b)	< 0.05		24
Dieldrin (b)	< 0.01		24
Endrin (b)	< 0.01		24
Telodrin (b)	< 0.01		24
Chlordane (b)	<0.05 <0.1		24 24
Toxaphene (b)			24 24
Estimated PCB's (b)	<0.2 <0.01		24
Ronnel (b)	< 0.01		24
Ethion (b)	< 0.02		24
Trithion (b)	< 0.05		24
Diazinon (b) Methyl parathion (b)	< 0.1		24
Ethyl paration (b)	<0.02		24
Malathion (r)	0.10 ± 0.07	<0.05-0.25	24
Endosulfan I (b)	< 0.01	-0.00-0.20	24
Endosulfan II (b)	<0.01		24

(a) Three batches contained more than 0.1 ppm.

(c) Detection limit reduced from 10 ppb to 5 ppb after 7/81

(d) Source of contamination: Alfalfa, grains, and fish meal

(e) Two batches contained less than 0.2 ppm.

(f) Source of contamination: Soy oil and fish meal

(g) Six batches contained less than 0.5 ppm.

(h) Mean, standard deviation, and range exclude three extreme values (310,000, 310,000, and 320,000) obtained in batches produced on 12/21/79, 2/26/80, and 11/27/81. CFU = colony-forming units.

(i) Mean, standard deviation, and range include the two extreme values given in footnote h.

(j) Excludes nine very high values in the range 1,100-2,400 obtained in batches produced on 2/4/80, 2/26/80, 11/25/80, 12/16/80, 5/26/81, 7/14,81, 9/25/81, 10/23/81, and 11/27/81

(k) Includes the high values listed in footnote j

(1) Includes three values of 23. The remaining 21 values were less than 3 MPN/g. MPN = most probable number.

(m) All values were corrected for percent recovery.

(n) Mean, standard deviation, and range exclude two very high values of 101.6 and 100.3 ppb in batches produced on 1/26/81 and 4/27/81.

(o) Mean, standard deviation, and range includes the very high values given in footnote n.

(p) BHC = hexachlorocyclohexane or benzene hexachloride

(q) One observation was above the detection limit. The value and the date it was obtained is listed under the range.

(r) Eleven batches contained more than 0.05 ppm.

⁽b) All values were less than the detection limit, given in the table as the mean.

APPENDIX N

GENETIC TOXICOLOGY OF HC BLUE NO. 2

	Dose	Revertants/plate (a)			
Strain	(µg/plate)	- 59	+ S9 (rat)	+ S9 (hamster)	
A100	0	138 ± 13.2	152 ± 7.3	153 ± 6.1	
	333	104 ± 7.8	151 ± 8.6	154 ± 6.7	
	1,000	128 ± 8.2	152 ± 6.7	155 ± 3.5	
	3,333	133 ± 6.5	149 ± 7.9	159 ± 9.6	
	6,666	137 ± 6.8	165 ± 3.2	160 ± 17.6	
	10,000	123 ± 12.2	158 ± 4.4	149 ± 17.0	
A1535	0	21 ± 3.8	10 ± 2.2	13 ± 1.8	
	100	28 ± 5.4			
	333	24 ± 4.3	7 ± 1.2	12 ± 0.3	
	1,000	28 ± 1.5	7 ± 1.2	11 ± 2.5	
	3,333	16 ± 5.2	9 ± 2.6	12 ± 2.2	
	6,666		10 ± 1.2	12 ± 2.3	
	10,000	25 ± 2.0	8 ± 3.2	10 ± 2.0	
\9 7	0	151 ± 4.6	165 ± 6.5	176 ± 16.8	
	333	137 ± 5.5	167 ± 0.9	187 ± 6.4	
	1,000	149 ± 4.4	160 ± 10.9	200 ± 7.4	
	3,333	194 ± 4.9	156 ± 3.2	215 ± 4.8	
	6,666	218 ± 8.5	179 ± 8.0	205 ± 9.3	
	10,000	242 ± 15.8	194 ± 12.3	258 ± 6.9	
A98	0	15 ± 0.3	31 ± 4.6	35 ± 4.7	
	333	14 ± 1.0	51 ± 2.2	38 ± 4.6	
	1,000	25 ± 3.2	41 ± 3.2	52 ± 4.2	
	3,333	43 ± 3.6	44 ± 3.8	61 ± 2.3	
	6,666	62 ± 2.6	63 ± 3.4	82 ± 4.4	
	10,000	66 ± 4.0	157 ± 11.0	93 ± 4.9	

TABLE N1. MUTAGENICITY OF HC BLUE NO. 2 IN SALMONELLA

(a) The S9 fractions were prepared from the livers of Aroclor 1254-induced animals (male Sprague-Dawley rats and male Syrian hamsters). Cells and test compound or solvent (DMSO) were incubated for 20 minutes at 37° C in the presence of either S9 or buffer. After the addition of soft agar, the contents of each tube were poured onto minimal medium, and the plates were incubated at 37° C for 48 hours (Haworth et al., 1983). The experiment was performed twice, each in triplicate; because the results were similar, data from only one experiment are shown.

Compound	Dose (µg/ml)	Total Mutant Clones	Cloning Efficiency (percent)	Relative Total Growth (percent)	Mutation Frequency (mutants/10 ⁶ clonable cells)
DMSO	(1%)	54	97	100	19
		63	99	100	21
		51	98	100	17
		56	107	100	17
Methyl methane-					
sulfonate	5	377	72	59	175
		383	80	70	160
		392	83	57	158
HC Blue No. 2	75	104	91	40	38
		89	81	33	36
		70	69	37	34
	150	75	66	32	38
		183	82	21	74
		145	63	16	77
	200	130	94	28	46
		187	88	30	71
		101	67	30	50
	300	180	83	15	72
		163	64	5	85
		155	48	4	107
	400	170	73	9	77
		232	59	5	132
		276	60	4	152
	600	145	27	2	177
		281	57	4	165
		230	37	3	204
	800	Toxic			

TABLE N2. MUTAGENICITY OF HC BLUE NO. 2 IN IN L5178Y/TK+/- MOUSE LYMPHOMA CELLS IN THE PRESENCE OF S9 (a)

(a) Experiment was performed once, and all doses were tested in duplicate. The protocol was basically that of Clive et al. (1979): Cells (6 \times 10⁵/ml) were treated for 4 h at 37° C in medium, washed, resuspended in medium, and incubated for 48 h at 37° C. After expression, 3 \times 10⁶ cells were plated in medium supplemented with trifluorothymidine for selection of cells that were mutant at the thymidine kinase (TK) locus, and 600 cells were plated in nonselective medium to determine the percentage of viable cells. S9 was prepared from the livers of Aroclor 1254-induced male F344 rats. . .

APPENDIX O

DATA AUDIT SUMMARY

The experimental data and tables of the draft NTP Technical Report on the Toxicology and Carcinogenesis Studies of HC Blue No. 2 in F344/N rats and $B6C3F_1$ mice were examined for completeness, consistency, and accuracy and for procedures consistent with Good Laboratory Practice requirements. The audit was conducted by Argus Research Laboratories (Contract No. 1-ES-38049) and NTP personnel. The following persons were involved in the audit: Jane E. Goeke, Ph.D., James H. Hills, Peter D. Ference, Richard E. Long, D.V.M., Ph.D., and Carol L. Veigle, H.T. The 2-year studies in rats and mice were conducted between February 1980 and February 1982 at Southern Research Institute, Birmingham, Alabama, under a subcontract with Tracor Jitco, Inc.

The full report of the audit is on file at the National Toxicology Program, NIEHS, and is available upon request. The audit included but was not limited to a review of the records of the in-life portion of the studies for 10% of the animals, 100% of the available chemistry data, and a random 10% sample of the chemical mix calculations. All Individual Animal Data Records were examined for correspondence between necropsy observations and histopathologic findings. All wet tissue bags were counted, and 10% were reviewed for animal identification and the presence of untrimmed lesions. A complete slide-block match for both sexes of both species in the high dose and control groups was performed.

The audit revealed no major problems with the conduct of the studies or with collection and documentation of the experimental data. The analytical chemistry data were adequate and support the stated conclusions of the Technical Report. On four occasions, chemical/diet mixtures 11%-16% below the target concentrations were administered to animals.

The wet tissue bag count revealed one missing bag in the high dose male rat group. Two bags were missing in the low dose male mouse group, and one was missing in the high dose male mouse group. Slide-block matchup of a total of 4,983 blocks and 4,986 slides revealed 2 questionable matches, 16 missing slides, and 1 missing block. Of the 81 bags opened for verification of animal identity, a total of 18 animals (2 rats and 16 mice) were not readily identified. For 14 of the 18 animals, the ear punch was not clearly interpretable but could be read as the correct animal number or an alternate number. A portion of the ear was missing from one mouse, and the ear punch was not evident. For the remaining two rats and one mouse, the ear punch did not appear to correspond to the bag number. In all three cases, however, the alternate wet tissue bag was opened and the animal identification was verified, indicating that the three animals in question were appropriately identified on the wet tissue bag and IADR. Wet tissue examination revealed one control male rat with an untrimmed lesion (raised focus on the liver) and and six high dose female rats with untrimmed white areas on the dorsal calvaria.

No discrepancies that significantly influenced the final interpretation of these studies in rats and mice were found. Additional minor problems, not necessarily pursued to final resolution but identified in the NTP audit report, were considered to be inconsequential. The data examined in this audit are considered adequate to support the conclusions of the Technical Report.