NATIONAL TOXICOLOGY PROGRAM Technical Report Series No. 306



### 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**

# DICHLOROMETHANE

# (METHYLENE CHLORIDE)

# (CAS NO. 75-09-2)

# IN F344/N RATS AND B6C3F1 MICE

(INHALATION 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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### DICHLOROMETHANE

#### (Methylene Chloride)

(CAS No. 75-09-2

CH<sub>2</sub>Cl<sub>2</sub> Molecular weight 84.94

### ABSTRACT

Toxicology and carcinogenesis studies of dichloromethane (DCM, methylene chloride; 99% pure) were conducted by inhalation exposure of groups of 50 male and 50 female F344/N rats and B6C3F<sub>1</sub> mice 6 hours per day, 5 days per week, for 102 weeks. The exposure concentrations used (0, 1,000, 2,000, or 4,000 ppm for rats and 0, 2,000, or 4,000 ppm for mice) were selected on the basis of results from 13week inhalation studies in which groups of 10 rats and 10 mice of each sex were exposed to dichloromethane at concentrations of 525-8,400 ppm 6 hours per day, 5 days per week.

During the 2-year studies in rats, body weight gains for exposed males and females were comparable to those of the chamber controls. The survival of exposed male rats was comparable to that of the chamber controls; however, the survival of all groups of males at the termination of the study was low (control, 16/50; low dose, 16/50; mid dose, 17/50; high dose, 9/50). Most of the early deaths among male rats occurred during the final weeks of the study; the survival of male rats through week 86 of the study was 36/50, 39/50, 37/50, and 33/50. This decreased survival is believed to be related to the high incidence of leukemia (34/50; 26/50; 32/50; 35/50). Survival of female rats exposed at 4,000 ppm was reduced relative to that of the chamber controls (30/50; 22/50; 15/50); leukemia occurred frequently in all female rat groups. Final mean body weights of high dose male mice and low and high dose female mice were 10%-17% lower than those of the chamber controls; these reductions occurred during the last 16 weeks of the study. The survival of dosed male mice and high dose female mice was reduced relative to that of the chamber controls (male: control, 39/50; low dose, 24/50; high dose, 11/50; female: 25/50; 25/50; 8/50). This reduced survival may have been due to the chemically induced development of liver and lung neoplasia in male and female mice.

Increased incidences of benign mammary gland lesions (adenomas and fibroadenomas) occurred in male and female rats exposed to dichloromethane (male: 0/50; 0/50; 2/50; 5/50; female: 5/50; 11/50; 13/50; 23/50). The incidence of malignant mammary gland neoplasms was not increased in female rats (2/50; 2/50; 2/50; 0/50); none was observed in male rats. In addition, integumentary system tumors in the area of the mammary chain occurred with a positive trend in male rats (subcutaneous tissue fibroma or sarcoma: 1/50; 1/50; 2/50; 5/50); the combined incidence of all tumors in the mammary area in male rats was 1/50, 1/50, 4/50, and 9/50.

Exposure to dichloromethane was associated with increased incidences of hepatic hemosiderosis, cytomegaly, cytoplasmic vacuolization, necrosis, granulomatous inflammation, and bile duct fibrosis

in both male and female rats. There was a positive but marginal trend in the incidence of hepatocellular neoplastic nodules or hepatocellular carcinomas (combined) in female rats (2/50; 1/50; 4/50; 5/50). The incidence of squamous metaplasia of the nasal cavity was increased in female rats exposed at 4,000 ppm (1/50; 2/50; 3/50; 9/50) but not in males (4/50; 5/50; 3/50; 3/50). No nasal cavity tumors were observed in rats. The increased incidences of mononuclear cell leukemia in mid dose and high dose female rats (17/50; 17/50; 23/50; 23/50) were statistically significant by age-adjusted analyses. In male rats, mesotheliomas (arising primarily from the tunica vaginalis) occurred at increased incidences (0/50; 2/50; 5/50; 4/50).

Lung tumors occurred at increased incidences in male and female mice exposed to dichloromethane (alveolar/bronchiolar adenomas: male--3/50; 19/50; 24/50; female--2/50; 23/48; 28/48; alveolar/bronchiolar carcinomas: male--2/50; 10/50; 28/50; female--1/50; 13/48; 29/48). Cytologic degeneration of the liver was observed at increased incidences in high dose male and dosed female mice (male: 0/50; 0/49; 22/49; female: 0/50; 23/48; 21/48). Incidences of hepatocellular adenomas or hepatocellular carcinomas (combined) were increased in high dose male and dosed female mice (male: 22/50; 24/49; 33/49; female: 3/50; 16/48; 40/48). There were also dose-related increases in the numbers of mice bearing multiple lung or liver neoplasms. Dose-related increases were observed in the incidences of testicular atrophy in male mice and uterine and ovarian atrophy in female mice; these effects are considered to be secondary responses to neoplasia.

An audit of the experimental data was conducted for the 2-year studies of dichloromethane. No data discrepancies were found that influenced the final interpretations.

Under the conditions of these inhalation studies, there was some evidence of carcinogenicity<sup>\*</sup> of dichloromethane for male F344/N rats as shown by an increased incidence of benign neoplasms of the mammary gland. There was clear evidence of carcinogenicity of dichloromethane for female F344/N rats as shown by increased incidences of benign neoplasms of the mammary gland. There was clear evidence of carcinogenicity of dichloromethane for male and female B6C3F<sub>1</sub> mice, as shown by increased incidences of alveolar/bronchiolar neoplasms and of hepatocellular neoplasms.

<sup>\*</sup>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 Dichloromethane is based on the 13-week studies that began in March 1980 and ended in June 1980 and on the 2-year studies that began in April 1981 and ended in April 1983 at Battelle Pacific Northwest Laboratories.

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#### PEER REVIEW PANEL

The members of the Peer Review Panel who evaluated the draft Technical Report on dichloromethane on March 29, 1985, 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.

#### National Toxicology Program Board of Scientific Counselors Technical Reports Review Subcommittee

Jerry B. Hook, Ph.D. (Chair) Vice President, Preclinical Research and Development Smith Kline & French Laboratories Philadelphia, Pennsylvania

Curtis Harper, Ph.D. Associate Professor of Pharmacology School of Medicine University of North Carolina Chapel Hill, North Carolina James Swenberg, D.V.M., Ph.D. (Principal Reviewer) Chief of Pathology Chemical Industry Institute of Toxicology Research Triangle Park, North Carolina

#### **Ad Hoc Subcommittee Panel of Experts**

John J. Crowley, Ph.D. Division of Public Health Science The Fred Hutchinson Cancer Research Center Seattle, Washington

Kim Hooper, Ph.D. (Principal Reviewer) Chief, Hazard Evaluation System and Information Department of Health Services State of California Berkeley, California

Thomas C. Jones, D.V.M.\* Professor, Comparative Pathology New England Regional Primate Research Center Harvard Medical School Southborough, Massachusetts

Richard J. Kociba, D.V.M., Ph.D. Dow Chemical USA Midland, Michigan

David Kotelchuck, Ph.D. Environmental Health Science Program Hunter School of Health Sciences New York, New York

\*Unable to attend

Frederica Perera, Ph.D. Division of Environmental Sciences School of Public Health Columbia University

New York, New York

I.F.H. Purchase, Ph.D. (Principal Reviewer) Central Toxicology Laboratory Imperial Chemical Industries, PLC Alderley Park, England

Steven R. Tannenbaum, Ph.D. Professor, Department of Nutrition and Food Science Massachusetts Institute of Technology Cambridge, Massachusetts

Bruce W. Turnbull, Ph.D. (Principal Reviewer) Professor and Associate Director College of Engineering Cornell University Ithaca, New York

# SUMMARY OF PEER REVIEW COMMENTS ON THE TOXICOLOGY AND CARCINOGENESIS STUDIES OF DICHLOROMETHANE

On March 29, 1985, the draft Technical Report on the toxicology and carcinogenesis studies of dichloromethane 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, National Institute of Environmental Health Sciences, Research Triangle Park, North Carolina.

Dr. Swenberg, a principal reviewer, agreed with the conclusions for three of the four studies. He did not agree with the proposed conclusion for female rats (clear evidence of carcinogenicity) because the increase in neoplasia was for benign mammary gland fibroadenomas. He said the significant and dose-related increases in these tumors and the induction of this same type of tumor in two other studies supported a conclusion of some evidence of carcinogenicity for female rats. Dr. Swenberg said statements on causal relationships between leukemia and survival in female rats and between liver and lung tumors and survival in mice should be better supported. Dr. Hooper also asked for clarification as to whether the high incidence of leukemia in rats may have caused increased mortality. Dr. J. Mennear, NTP, presented data that supported causal relationships. For example, 22 of 35 (63%) high dose female rats dying before the termination of the study had leukemia versus 9 of 20 (45%) controls.

As a second principal reviewer, Dr. Hooper agreed with the conclusions. He asked whether the NTP had looked for a dose-related increase in multiplicity of mammary fibroadenomas in rats. Such an examination might influence the strength of the evidence for carcinogenicity, especially in male rats. He suggested inclusion of a table summarizing the experimental conditions and tumor findings for the various reported long-term dichloromethane studies [see Table 26, p. 59]. Dr. Hooper asked whether the testicular atrophy in male mice and the ovarian/uterine atrophy in female mice could be attributed to direct or indirect effects of the chemical. Dr. E. McConnell, NTP, replied that these effects were believed to be secondary to neoplasia.

As a third principal reviewer, Dr. Turnbull agreed with the conclusions as written. He asked that a statement in the Technical Report clarify whether the histopathology slides were identified during diagnoses. [The original pathologist and quality assessment laboratory use fully labeled slides; the NTP Pathology Working Group evaluates slides in a blind fashion.]

The discussion focused primarily on whether the appropriate descriptor for the conclusions in female rats was clear evidence of carcinogenicity, as written, or some evidence of carcinogenicity. The key issues centered on: (1) the relative weight given to concurrent control data versus historical (laboratory and Program) control data; (2) the interpretation of "a substantially increased incidence of benign neoplasms"; and (3) the issue of whether a conclusion of clear evidence of carcinogenicity based on benign neoplasms was appropriate. With regard to (1) and (2), Dr. Kociba, Dr. Purchase, and Dr. Swenberg argued that historical rates should be emphasized, since the concurrent rate (10%) was lower than the mean Program-wide rates (28%). Thus, Dr. Swenberg maintained that the rate in the high dose group for fibroadenomas (22/50; 44%) was less than double the historical average and not a "substantial" increase. Dr. J. Haseman, NIEHS, said the historical data base came primarily from feed studies and there was no good data base of chamber controls from inhalation studies. Dr. J. Huff, NIEHS, stated that the concurrent control data are given more weight by the NTP, whereas historical control data are for comparison. He noted that the rates for fibroadenomas for two previous inhalation studies at Battelle Northwest Laboratories were 14% and 18%. With regard to (3), Dr. Hook and Dr. Kotelchuck commented that the definitions of the categories for strength of evidence have been used by the Panel since June 1983. Dr. Kociba spoke for being able to factor in qualitative

considerations such as tumor types and their commonality and absence of malignancy. Dr. McConnell said that the NTP's stance mirrored that of the International Agency for Research on Cancer, i.e., "If a substance is found to induce only benign tumors in experimental animals, it should nevertheless be suspected of being a carcinogen..." Dr. Huff summarized the NTP's reasoning for the conclusion: With concurrent controls, there was a significant positive trend, a dose-related effect in which the incidence in the high dose animals was significantly greater than that in the controls; the effects were observed in both sexes; and these findings were supported by studies in the literature.

Dr. Kotelchuck moved that the conclusion of clear evidence of carcinogenicity in female rats be accepted with the addition of the word "benign" in front of "neoplasms." Dr. Perera seconded the motion, and it was approved with six affirmative votes; there were two negative votes (Dr. Crowley and Dr. Swenberg) and two abstentions by reason of company affiliation (Dr. Kociba and Dr. Purchase). Dr. Hooper then moved that the conclusion of some evidence of carcinogenicity in male rats be accepted also with inclusion of the "benign" in front of "neoplasms." Dr. Perera seconded the motion, and it was approved by seven affirmative votes; there were one negative vote (Dr. Crowley) and two abstentions (Dr. Kociba and Dr. Purchase). Dr. Swenberg moved that the conclusions of clear evidence of carcinogenicity in male and female mice be accepted as written. Dr. Hooper seconded the motion, and it was approved by eight affirmative votes; there were two abstentions (Dr. Kociba and Dr. Purchase).

# I. INTRODUCTION



DICHLOROMETHANE

(Methylene Chloride)

### (CAS No. 75-09-2

### CH<sub>2</sub>Cl<sub>2</sub> Molecular weight 84.94

Dichloromethane (DCM, methylene chloride) is widely used in industrial processes, food preparation, and agriculture. In industry, dichloromethane is used as a solvent in paint removers, degreasing agents, aerosol propellants, and triacetate solutions; as a blowing agent in flexible urethane foams; and as a process solvent in the manufacture of steroids, antibiotics, vitamins, and tablet coatings (Merck Index, 1976; Kirk-Othmer, 1964, 1966, 1967, 1979a,b, 1980; Simmons and Levitt, 1979). The use of dichloromethane as an extraction solvent for spice oleoresins, hops, and caffeine from coffee has been approved by the U.S. Food and Drug Administration (USCFR, 1974). Dichloromethane has been used as an inhalation anesthetic and as a fumigant for grain and strawberries (Valle-Riestra, 1974; Farm Chemicals Handbook, 1977; Merck Index, 1976). The International Program on Chemical Safety has recently published an environmental health criteria document on dichloromethane (WHO, 1984).

In 1980, 564 million pounds of dichloromethane was produced in the United States (USITC, 1981). Dichloromethane has been identified in drinking water, bottled artesian water, and water from the Mississippi River (Dowty et al., 1975).

Humans and laboratory animals readily absorb dichloromethane by inhalation and ingestion. Dermal absorption of dichloromethane has been observed in rats (Schutz, 1958) and humans (Stewart and Dodd, 1964). In humans, absorption of dichloromethane following dermal exposure occurs more slowly than absorption occurring after ingestion or inhalation.

Dichloromethane is distributed throughout the body after being inhaled or ingested by humans or laboratory animals. Dichloromethane has been detected in the urine of dogs and humans (MacEwen et al., 1972; DiVincenzo et al., 1972) and in human milk (Vozovaya et al., 1974). The solvent has been detected in the kidney (Moskowitz and Shapiro, 1952), liver, and brain (Bonventre et al., 1977) of humans accidentally poisoned by the chemical. Anesthesia and central nervous system depression have accompanied accidental dichloromethane poisoning, indicating that the chemical crosses the blood/brain barrier (Moskowitz and Shapiro, 1952; Hughes, 1954). Dichloromethane also crosses the placental barrier, but teratogenic effects were not observed when dichloromethane was administered by inhalation to Swiss-Webster mice and to Long Evans and Sprague-Dawley rats (Leong et al., 1975; Schwetz et al., 1975; Hardin and Manson, 1980).

Elimination of dichloromethane from the body occurs primarily through pulmonary excretion; approximately 85% is excreted unchanged. Small amounts of dichloromethane are eliminated via the kidney. The plasma half-life of inhaled dichloromethane in humans is estimated to be 40 minutes (DiVincenzo et al., 1972). Elimination of dichloromethane from human muscle and adipose tissue has been estimated to occur in 60-80 minutes and 240 minutes, respectively (Stewart et al., 1972a,b).

Carbon monoxide and carbon dioxide are known metabolites of dichloromethane in humans and laboratory animals (Stewart et al., 1972a,b; Kubic and Anders, 1975; Ahmed and Anders, 1976). Carboxyhemoglobin is formed when dichloromethane is metabolized to carbon monoxide (Stewart et al., 1972a,b). The biotransformation of dichloromethane to carbon monoxide has been postulated to occur through the process of microsomal oxidative dechlorination (Kubic and Anders, 1975); it takes place primarily in the liver, but microsomes in the lung and kidney can carry out this metabolic reaction. Dichloromethane is metabolized in the liver cytosol via a glutathione-dependent enzyme to formaldehyde (Ahmed and Anders, 1976). Formaldehyde can be oxidized to carbon dioxide. The detection of formic acid in the urine of workers exposed to dichloromethane has led investigators to suggest that dichloromethane is first metabolized to formaldehyde and then to formic acid (Kuzelova and Vlask, 1966).

Various in vivo toxicity experiments have established the liver as the primary target organ for dichloromethane and central nervous system depression as the major grossly observable effect. In cases of accidental poisoning in humans, the prominent effects include central nervous system depression, behavioral changes, irritation of the mucous membranes, cardiovascular effects, pulmonary irritation and edema, and carboxyhemoglobinemia.

In single-dose experiments in mice, the subcutaneous and intraperitoneal  $LD_{50}$  values for dichloromethane were found to be 6,452 and 1,987 mg/kg, respectively (Kutob and Plaa, 1962; Klaassen and Plaa, 1966).

When dogs, rabbits, guinea pigs, and rats were exposed to air containing 5,000 ppm dichloromethane (7 hours per day, 5 days per week) for up to 6 months, only the guinea pigs were affected (Heppel et al., 1944). Decreased growth in the guinea pigs was the only observable effect; no compound-related lesions were seen. Exposure to dichloromethane at a concentration of 10,000 ppm (4 hours per day, 5 days per week) for up to 8 weeks produced fatty metamorphosis of the liver in guinea pigs and dogs, but no compound-related lesions were seen in rats and rabbits.

Exposure of male and female Syrian hamsters to air containing 0, 500, 1,500, or 3,500 ppm dichloromethane (6 hours per day, 5 days per week) for 2 years did not adversely affect survival or produce compound-related lesions (Burek et al., 1980). When male and female Sprague-Dawley rats were exposed under the same conditions, reduced survival was seen in the group of females exposed at the highest concentration. Dose-related increases were observed in the total number of fibromas or fibroadenomas in the mammary gland of females. The increase in fibromas reflected an increase in the number of tumors found in individual animals, since the number of females with mammary tumors did not increase. Increased incidences of mammary tumors were also found in male rats exposed at 1,500 or 3,500 ppm dichloromethane, although the increases were not as pronounced as those seen in females.

The male rats exposed to dichloromethane at 1,500 or 3,500 ppm had increased incidences of sarcomas of the salivary gland (Burek et al., 1980). This effect might have been related to a viral salivary gland infection (sialodacryo-adenitis) in these animals, although these tumors were not detected among similarly infected females.

In a subsequent inhalation study, male and female Sprague-Dawley rats were exposed to dichloromethane at concentrations of 0, 50, 200, or 500 ppm (Nitschke et al., 1982). The compound at the 500-ppm concentration produced mammary fibroma/fibroadenomas in males and females, but salivary gland tumors were not observed. Exposure to dichloromethane at concentrations of 200 ppm or less was not associated with tumor production.

In 2-year studies sponsored by the National Coffee Association (1982, 1983), F344 rats were administered 0, 5, 50, 125, or 250 mg/kg per day of dichloromethane in drinking water and B6C3F<sub>1</sub> mice were administered 0, 60, 125, 185, or 250 mg/kg per day in drinking water. There was no evidence of chemically induced carcinogenesis; however, it is probable that the test animals could have tolerated higher doses of dichloromethane.

Although Theiss et al. (1977) reported a slight, but not statistically significant, increase in the incidence of lung adenomas in strain A mice, IARC found the study to be inadequate because of poor survival of the test animals.

When mortality in a group of 751 workers exposed to dichloromethane at 30-1,200 ppm for up to 30 years was compared with that in a group of workers not exposed to dichloromethane, no increase in cancer-related deaths was noted in the exposed group (Friedlander et al., 1978); these data were considered inadequate to assess the carcinogenicity of dichloromethane in humans (IARC, 1982).

Dichloromethane is mutagenic in Salmonella typhimurium in the presence and absence of S9 when the cells are exposed to dichloromethane vapor in a desiccator. The International Agency for Research on Cancer (IARC) has concluded that dichloromethane is mutagenic in S. typhimurium TA98 and TA100. The vapor is also mutagenic in the plant Tradescantia and causes mitotic recombination and gene conversion in yeast. Dichloromethane has given mixed results in the sex-linked recessive lethal assay in Drosophila and in cell transformation studies in vitro. Most in vivo or in vitro studies in mammalian systems have given negative results. Dichloromethane, however, did induce chromosomal aberrations in Chinese hamster ovary (CHO) cells (Table 1).

Investigation of the role of bacterial metabolism in the mutagenicity of dichloromethane revealed that S. typhimurium strain TA100 metabolized this compound to water-soluble metabolites and to both carbon monoxide and carbon dioxide. The detection of these gases suggests that metabolism by the bacteria occurs by pathways similar to those known in the rat. Brunner et al. (1980) have shown dichloromethane to be a C-1 substrate for bacterial strain DM-1, the metabolic pathways again being very similar to those in mammalian systems. The finding of a large number of water-soluble metabolites in the metabolism of dichloromethane by TA100 is consistent with the use of the compound as a C-1 substrate by these bacteria also.

Deactivation of the mutagenic metabolites occurs mainly by rapid chemical decomposition and is relatively independent of the site of formation or the distribution of deactivating enzymes (Green, 1983). Consequently, the lack of mutagenicity in mammalian systems (see Table 1) may be due to the inability of the target cells to metabolize dichloromethane or to the instability of mutagenic metabolities (if formed by the S9) preventing transport into the cell and interaction with the DNA.

Study Rationale: Dichloromethane was selected for study because of its widespread use and potential for human exposure and because other halogenated hydrocarbons have shown evidence of carcinogenic activity. These studies complement other studies (Burek et al., 1980, 1984; Nitschke et al., 1982; National Coffee Association, 1982, 1983) whose results were incomplete at the time these studies were initiated.

Short-Term Test	Result	Reference
 Salmonella typhimurium		
TA1535	+	McGregor, 1979
(+/-S9)	-	Nestmann et al., 1980
	+	Nestmann et al., 1981
TA98	+	Jongen et al., 1978
	+	Nestmann et al., 1981
	+	Gocke et al., 1981
TA100	+	Jongen et al., 1978
	+	Kanada and Uyeta, 1978
	+	Simmon, 1978
	-	Nestmann et al., 1980
	+	Nestmann et al., 1981
	+	Gocke et al., 1981
	+	Jongen et al., 1982
	+	Green (1983)
Bacillus subtilis		
Recassay	_	Kanada and Uyeta, 1978
fradescantia (plant)	+	Schairer and Sautkulis, 1982
Yeast D7		
Mitotic recombination	+	Callen et al.,1980
Mitotic gene conversion	+	Callen et al., 1980
Yeast D3	•	
Mitotic recombination	_	Simmon et al., 1977
Drosophila		
SLRL	+	Gocke et al., 1981
BLIND	-	Abrahamson and Valencia, 1980
CHO/HGPRT and V79/HGPRT	-	Jongen et al., 1981
79 and human fibroblasts	-	songen et al., 1901
UDS		Jongen et al., 1981
DNA-synthesis inhibition	-	Jongen et al., 1981
79	-	Jongen et al., 1961
Sister-chromatid exchange		Jongen et al., 1981
CHO	-	501gen et al., 1501
Sister-chromatid exchange		Thilager and Kumaroo, 1983
lat	-	Timager and Kunaroo, 1900
Chromosome aberration in vivo		Johnston et al., 1980
CHO	-	Johnston et al., 1500
Chromosome aberration in vitro	+	Thilager and Kumaroo, 1983
Mouse	Ŧ	Innager and Kumaroo, 1965
Mouse Micronucleus		Casha et al. 1091
		Gocke et al., 1981
lischer rat		Defense to 1 1079
Cell transformation in vitro	+	Price et al., 1978
Aice B/C 3T3		<i>G</i> : 1 1070
Cell transformation in vitro	-	Sivak, 1978
Syrian hamster embryo cells		Match et al. 1000
SA7 viral enhanced transformation	+	Hatch et al., 1983

### TABLE 1. SUMMARY OF RESULTS FROM GENETIC TOXICOLOGY TESTING OF DICHLOROMETHANE

# **II. MATERIALS AND METHODS**

PROCUREMENT AND CHARACTERIZATION OF DICHLOROMETHANE GENERATION AND MEASUREMENT OF CHAMBER CONCENTRATIONS IN THE TWO-YEAR STUDIES SINGLE-EXPOSURE STUDIES NINETEEN-DAY STUDIES THIRTEEN-WEEK STUDIES TWO-YEAR STUDIES Study Design Source and Specifications of Animals Animal Maintenance Clinical Examinations and Pathology Statistical Methods

### PROCUREMENT AND CHARACTERIZATION OF DICHLOROMETHANE

Dichloromethane was obtained from Fisher Scientific Company or Dow Chemical USA in five different lots (Table 2). Purity and identity analyses were conducted at Midwest Research Institute (Kansas City, Missouri). The identities of all lots were confirmed by spectroscopic analyses (Appendix G). The infrared and nuclear magnetic resonance spectra were consistent with the literature spectra. The ultraviolet spectrum was consistent with that expected for the structure. The cumulative data from elemental analysis and gas chromatography indicated that the purity of each of the five lots was greater than 99%.

A stability test demonstrated that dichloromethane was found to be stable for 2 weeks at temperatures up to  $35^{\circ}$  C (Appendix G). The testing laboratory performing the 2-year studies stored the chemical at room temperature in steel drums and periodically reanalyzed it by infrared spectroscopy and gas chromatography. These analyses indicated that no degradation of the stored chemical occurred during the course of the 2-year studies.

### GENERATION AND MEASUREMENT OF CHAMBER CONCENTRATIONS IN THE TWO-YEAR STUDIES

Dichloromethane was vaporized at 38°-42° C, diluted with air, and introduced into the chambers (Table 3; Appendix H). Concentrations in each exposure chamber were monitored 8-12 times per exposure period with a Hewlett-Packard 5840A Gas Chromatograph. Average weekly exposure concentrations are presented in Appendix H, Figures 16, 17, and 18. The weekly mean vapor concentrations were within 10% of the target concentrations at all positions sampled within the chamber. A summary of the chamber concentrations for the 2-year studies is presented in Tables 4 and 5.

	Single-Exposure	Nineteen-Day	Thirteen-Week	Two-Year
	Studies	Studies	Studies	Studies
Lot Numbers	766062	767132,77-26-22, 775007	775007	D112480
Date of Initial Use of Each Lot	6/9/77	10/7/77; 10/23/77; 10/24/77	NA	<b>4/29/</b> 81
Supplier	Fisher Scientific Co.	Fisher Scientific Co.	Fisher Scientific Co.	Dow Chemical USA
	(St. Louis, MO)	(St. Louis, MO)	(St. Louis, MO)	(Midland, MI)

TABLE 2. IDENTITY AND SOURCE OF LOTS IN THE INHALATION STUDIES OF<br/>DICHLOROMETHANE

# TABLE 3. GENERATION OF CHAMBER CONCENTRATIONS IN THE INHALATION STUDIES OF DICHLOROMETHANE

Single-Exposure	Nineteen-Day	Thirteen-Week	Two-Year
Studies	Studies	Studies	Studies
Clean, dry air (-40° C dewpoint) was introduced into the exposure chamber through all-glass impingers containing the test materia Concentrations were achieved by varying the amount of air that passed through the test material.		Dichloromethane liquid was metered onto a heated wick vaporizer located in the chamber fresh air duct.	Same as 13-wk studies

# TABLE 4.SUMMARY OF CHAMBER CONCENTRATIONS OF DICHLOROMETHANE DURING THE<br/>TWO-YEAR INHALATION STUDIES

Target Concentration (ppm)	Total Number of Readings	Mean Concentration (a) (ppm)	Maximum Concentration Observed (b)
1,000	5,238	$1,004 \pm 51$	1,559
2,000	5,188	$2,009 \pm 13$	2,411
4,000	5,199	$3.982 \pm 213$	5,293

(a) Mean  $\pm$  standard deviation

(b) Single observation, not daily mean

# TABLE 5. DISTRIBUTION OF MEAN DAILY CONCENTRATIONS OF DICHLOROMETHANE DURING<br/>THE TWO-YEAR INHALATION STUDIES

Range of	Nu	mber of Days Mean within F	lange
Concentration (percent of target)	1,000 ppm	2,000 ppm	4,000 ppm
>110	0	0	0
100-110	291	312	239
90-100	194	172	245
80-90	7	7	7
70-80	0	1	1
<70	0	0	0

### SINGLE-EXPOSURE STUDIES

Two shipments of male and female F344/N rats and  $B6C3F_1$  mice were obtained from Frederick Cancer Research Center and observed for 7 days before being placed on study. The studies were conducted at Industrial Biotest Laboratories.

Groups of five rats and mice of each sex were exposed for 4 hours to air containing 15,500, 16,500, 16,800, 17,250, 18,500, or 19,000 ppm dichloromethane (three groups at 19,000 ppm). Controls were not used. Animals were observed daily and were weighed on days 0 and 15. A necropsy was performed on all animals. Details of animal maintenance are presented in Table 6.

### NINETEEN-DAY STUDIES

Male and female F344/N rats and  $B6C3F_1$  mice were obtained from Harlan Industries and observed for 16 days before being placed on study. The studies were conducted at Industrial Biotest Laboratories.

Groups of five rats and mice of each sex were exposed to air containing dichloromethane at target concentrations of 0, 1,625, 3,250, 6,500, 13,000, or 16,000 ppm for 6 hours per day, 5 days per week for 19 days (11 exposures). Rats and mice were observed daily and were weighed on days 0, 5, 10, 15, and 19. A necropsy was performed on all animals. Details of animal maintenance are presented in Table 6.

### THIRTEEN-WEEK STUDIES

Thirteen-week studies were conducted to evaluate the cumulative toxic effects of repeated exposure to dichloromethane and to determine the concentrations to be used in the 2-year studies. The 13-week studies were conducted at Battelle Pacific Northwest Laboratories

Male and female F344/N rats and  $B6C3F_1$  mice were obtained from Charles River Breeding Laboratories, observed for 21 days, and assigned to test groups according to a table of random numbers. Feed was available ad libitum during nonexposure periods; water was available at all times. Groups of 10 rats and 10 mice of each sex were exposed to air containing dichloromethane at target concentrations of 0, 525, 1,050, 2,100, 4,200, or 8,400 ppm, 6 hours per day, 5 days per week for 13 weeks (63 exposures). Further experimental details are summarized in Table 6.

Animals were observed two times per day; moribund animals were killed. Individual animal weights were recorded weekly. At the end of the 13-week studies, survivors were killed. A necropsy was performed on all animals except those excessively autolyzed or cannibalized. Liver fat:liver weight ratios were determined for all survivors. Tissues and groups examined are listed in Table 6.

### **TWO-YEAR STUDIES**

### **Study Design**

Two-year studies were conducted at Battelle Pacific Northwest Laboratories. Groups of 50 rats of each sex were exposed to air containing dichloromethane at target concentrations of 0 (chamber controls), 1,000, 2,000, or 4,000 ppm, 6 hours per day, 5 days per week for 102 weeks. Groups of 50 mice of each sex were exposed to dichloromethane at concentrations of 0, 2,000, or 4,000 ppm on the same schedule. Actual concentrations are summarized in Table 4 and Appendix H, Figures 16, 17, and 18. During week 3 of the studies, the 1,000-ppm rats (both sexes) were exposed at 2,000 ppm and the 2,000-ppm rats and mice (both sexes) were exposed at 1,000 ppm.

### **Source and Specifications of Animals**

The male and female F344/N rats and B6C3F<sub>1</sub> (C57BL/6N, female,  $\times$  C3H/HeN MTV<sup>-</sup>, male) mice used in this study were produced under strict barrier conditions at Charles River Breeding Laboratories under a contract to the Carcinogenesis Program. Breeding stock for the foundation colonies 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 barriermaintained rooms. Animals were shipped to the

	Single-Exposure Studies	Nineteen-Day Studies	Thirteen-Week Studies	Two-Year Studies
EXPERIMENTA	L DESIGN	ande de a state ander Matterne Alassa		
Testing Laboratory	Industrial Biotest Laboratories (Northbrook, IL)	Industrial Biotest Laboratories (Northbrook, IL)	Battelle Pacific Northwest Laboratories (Richland, WA)	Battelle Pacific Northwest Laboratories (Richland, WA)
Size of Test Groups	5 males and 5 females of each species	Same as single- exposure studies	10 males and 10 females of each species	50 males and 50 females of each species
Doses	Target: 15,500, 16,500, 16,800, 17,250, 18,500, or 19,000 ppm dichloromethane by inhalation	Target: 0, 1,625, 3,250, 6,500, 13,000, or 16,000 ppm dichloro- methane by inhala- tion	Target: 0, 525, 1,050, 2,100, 4,200, or 8,400 ppm dichloromethane by inhalation	Rats0, 1,000, 2,000, or 4,000 ppm dichloro- methane by inhala- tion; mice0, 2,000 or 4,000 ppm
Date of First Dose	6/9/77-6/23/77	10/7/77	3/19/80	4/29/81
Date of Last Dose	N/A	10/24/77	6/17/80	4/15/83
Duration of Dosing	Single 4-h exposure	6-h/d, 5 d/wk on 11 d over a 19-d period	6 h/d, 5 d/wk for 13 wk	6 h/d, 5 d/wk for 102 wk
Type and Frequency of Observation	All animals were observed throughout exposure period and for 14 d thereafter; weighed before exposure and on d 15	All animals were ob- served 1 × d during exposure period; weighed on d 0, 5, 10, 15, and 19	Animals were weighed just before exposure and 1 × wk thereafter	Observed $2 \times d$ ; clinically examined $1 \times wk$ for $3.5 \text{ mo}$ , then $2 \times mo$ until mo 8; after mo 8, palpated and clinically examined $1 \times mo$ ; weighed $1 \times wk$ for $12 \text{ wk}$ , then $1 \times mo$
Necropsy and Histologic Examination	Complete necropsy performed on all animals; tissues were not examined histologically	Complete necropsy performed on all animals; tissues were not examined histologically	Complete necropsy performed on all animals; complete histologic exam performed on high dose and controls; lower dose groups examined to determine no-effect level	Necropsy performed on all animals; the following tissues were examined histo- logically: gross lesions and tissue masses, regional lymph nodes, tracheobronchial lymph nodes, mandibular lymph nodes, salivary glands, sternebrae including marrow, thyroid gland, parathyroids, larynx, small intestine, colon, duodenum, liver, heart, trachea, prostate/testes or ovaries/uterus, lungs and mainstem bronchi, skin, trachea gallbladder (mice), kidneys, spleen, stomach, brain, thymus, colon, adrenal glands, urinary bladder, pituitary gland, nasal cavity/turbinates, mammary glands, pre- putial gland (female rats), clitoral gland (female rats)

# TABLE 6. EXPERIMENTAL DESIGN AND MATERIALS AND METHODS IN THE INHALATIONSTUDIES OF DICHLOROMETHANE

	Single-Exposure Studies	Nineteen-Day Studies	Thirteen-Week Studies	Two-Year Studies
ANIMALS AND	ANIMAL MAINTENAN	NCE		
Strain and Species	F344/N rats; B6C3F <sub>1</sub> mice	F344/N rats; B6C3F <sub>1</sub> mice	F344/N rats; B6C3F <sub>1</sub> mice	F344/N rats; B6C3F <sub>1</sub> mice
Animal Source	Frederick Cancer Research Center (Frederick, MD)	Harlan Industries (Cumberland, IN)	Charles River Breeding Laboratories (Portage, MI)	Same as 13-wk studies
Time Held BeforeTest	7 d	16 d	21-22 d	21 d
Age When Placed on Study			7-9 wk	Rats7-8 wk; mice8-9 wk
Age When Killed			20-22 wk	Rats111-112 wk; mice112-113 wk
Necropsy Dates	14 d after exposure	10/25/77		4/25/83-4/29/83
Method of Animal Distribution	Assigned to groups according to compu- ter-generated tables of random numbers	Same as single- exposure studies	Same as single- exposure studies	Same as single- exposure studies
Animal Identification	Ear notch number	Same as single- exposure studies	Ear tag	Ear tag
Feed	Wayne Lab-Blox <sup>®</sup> (Allied Mills, Chicago, IL); ad libitum but feed removed during exposure	Same as single- exposure studies	NIH 07 Rat and Mouse Ration (Zeigler Bros., Gardners, PA); available ad libitum except during exposure	
Bedding				San-i-cell: ground corn- cob bedding (Paxton Processing, Paxton, IL); during quarantine only
Water	Ad libitum	Ad libitum	Automatic watering system (Edstrom Industries, Water- ford, WI)	Automatic watering system (quarantine Systems Engineering, Napa, CA; study Edstrom Industries, Waterford, WI)
Cages	Stainless steel mesh (Unifab Corp., Kalamazoo, MI)	Same as single- exposure studies	Stainless steel wire (Hazleton Systems, Aberdeen, MD)	Quarantine: solid botton polycarbonate and wire bottom (Lab Products, Inc., Rochelle Park, NJ); chamber cages: stainless steel mesh (Hazleton Systems, Aberdeen, MD)
Chambers				Hazleton-200 (Hazleton Systems, Aberdeen, MD)

# TABLE 6. EXPERIMENTAL DESIGN AND MATERIALS AND METHODS IN THE INHALATION STUDIES OF DICHLOROMETHANE (Continued)

	Single-Exposure Studies	Nineteen-Day Studies	Thirteen-Week Studies	Two-Year Studies
Animals per Cage	1	Rats 1, mice3 during quarantine, 1 during exposure	1	5 (rats), 10 (mice) for 2 wk during quarantine, 1 animal per cage thereafter
Other Chemicals on Test in Same Room		Tetrachloroethylene		Tetrachloroethylene
Animal Room Environment	Temp humidity fluorescent light 12 h/d	Temp humidity	Chamber72° 79° F, 43% 70% humidity, room 72° 76° F, 40% 60% humidity, fluorescent light 12 h/d	Chamber $77^{\circ} \pm 2^{\circ} F(a)$ , $58\% \pm 6\%$ humidity, room- 23° 25° C, 45% 65% humidity, fluorescent light 12 h/d, 20 room air changes/h

# TABLE 6. EXPERIMENTAL DESIGN AND MATERIALS AND METHODS IN THE INHALATION STUDIES OF DICHLOROMETHANE (Continued)

(a) Excursions to 69° F and 83° F

testing laboratory at 4-6 weeks of age The animals were quarantined at the testing facility for 3 weeks Thereafter, a complete necropsy was performed on five animals of each sex and species to assess their health status The rats were placed on study at 7-8 weeks of age and mice at 8-9 weeks of age

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 concurrent controls were included in each study.

### **Animal Maintenance**

All animals were housed individually Feed and water were available ad libitum except during exposure periods, during exposure periods, water but not feed was available Details of animal maintenance are given in Table 6. Serologic analyses were performed as described in Appendix I

### **Clinical Examinations and Pathology**

All animals were observed two times per day, and clinical signs were recorded once per week Body weights by cage were recorded once per week for the first 12 weeks of the study and once per month thereafter. Mean body weights were calculated for each group Moribund animals were killed, as were animals that survived to the end of the study. A necropsy was 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 6.

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. For subsequent evaluations, the diagnosed lesions for each tissue type are combined according to the guidelines of McConnell et al. (1986).

Nonneoplastic lesions are not examined routinely by the quality assurance pathologist or PWG. Certain nonneoplastic findings are reviewed by the quality assurance pathologist and 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) life table test 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 a necropsy was 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 controls and tests for overall doseresponse 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). The underlying variable considered by this analysis is time to death due to tumor. If the tumor is rapidly lethal, then time to death due to tumor closely approximates time to tumor onset. In this case, the life table test also provides a comparison of the time-specific tumor incidences.

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: weeks 0-52, weeks 53-78, weeks 79-92, 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 a necropsy was actually performed during the time interval. 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, survival-adjusted 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.

# **III. RESULTS**

# RATS

# SINGLE-EXPOSURE STUDIES

## NINETEEN-DAY STUDIES

# THIRTEEN-WEEK STUDIES

### **TWO-YEAR STUDIES**

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

# MICE

# SINGLE-EXPOSURE STUDIES

## NINETEEN-DAY STUDIES

### THIRTEEN-WEEK STUDIES

### **TWO-YEAR STUDIES**

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

### SINGLE-EXPOSURE STUDIES

The incidence of deaths in the various groups is given in Table 7. No compound-related effects were observed at necropsy.

### NINETEEN-DAY STUDIES

Four of five males and 5/5 females that were exposed to dichloromethane at 16,000 ppm and 1/5 males and 1/5 females exposed at 13,000 ppm died before the end of the studies (Table 8). The final mean body weight of male rats that were exposed at 13,000 ppm and that lived to the end of the study was 17% lower than that of the controls. The final mean body weights of females exposed at 6,500 and 13,000 ppm were 5% and 8% lower than that of the controls. Intermittent scratching, ataxia, and hyperactivity were observed in all but the two lowest dose groups. Dyspnea and anesthesia were observed in the two highest dosed groups.

	INHALATION	STUDIES OF DI	CHLOROMET	HANE
Target		Mean l	Body Weights ()	(rams)
Concentration	Survival (a)	Initial (b)	Final	Change (c)

TABLE 7. SURVIVAL AND MEAN BODY WEIGHTS OF RATS IN THE SINGLE-EXPOSURE

(ppm)	Survival (a)	Initial (D)	rinai	Change (c)
MALE	<u></u>			
15,500	4/5	$105 \pm 3$	$168 \pm 6$	$+ 62 \pm 3$
16,500	5/5	$105 \pm 2$	$169 \pm 4$	+ 64 ± 2
16,800	4/5	119 ± 1	186 ± 1	+ 68 ± 1
17,250	3/5	$106 \pm 2$	$170 \pm 2$	+ 61 ± 2
18,500	3/5	84 ± 5	$147 \pm 5$	+ 61 ± 3
19,000	2/5	99 ± 13	$175 \pm 1$	+ 60 ± 7
19,000	5/5	$118 \pm 4$	178 ± 4	$+60 \pm 1$
19,000	2/5	$112 \pm 3$	$188 \pm 2$	+ 73 ± 6
FEMALE				
15,500	5/5	89 ± 2	$124 \pm 2$	$+35 \pm 0.2$
16,500	5/5	94 ± 3	$126 \pm 4$	$+ 32 \pm 1$
16,800	5/5	96±3	$124 \pm 3$	$+28 \pm 1$
17,250	5/5	87±3	$118 \pm 3$	$+31 \pm 2$
18,500	4/5	$74 \pm 3$	$112 \pm 2$	$+37 \pm 3$
19,000	3/5	90±3	$123 \pm 1$	$+ 32 \pm 1$
19,000	5/5	95±3	$126 \pm 3$	$+31 \pm 1$
19,000	4/5	$102 \pm 1$	$130 \pm 2$	$+29 \pm 0.3$

(a) Number surviving/number initially in group

(b) Initial group mean body weight  $\pm$  standard error of the mean. Subsequent calculations are based on those animals surviving to the end of the study.

(c) Mean body weight change of the survivors of the group  $\pm$  standard error of the mean
Target		Mean	Final Weight Relative		
Concentration (ppm)	Survival (a)	Initial (b)	Final	Change (c)	to Controls (percent)
MALE	·····	<u> </u>		<u></u>	
0	5/5	$140 \pm 5$	$201 \pm 7$	$+ 61 \pm 3$	
1,625	5/5	$142 \pm 4$	$213 \pm 5$	$+71 \pm 5$	106
3,250	5/5	$141 \pm 4$	$197 \pm 5$	$+ 56 \pm 2$	98
6,500	5/5	$142 \pm 4$	197 ± 5	+ 55 ± 4	98
13,000	4/5	$140 \pm 5$	$167 \pm 4$	$+ 24 \pm 5$	83
16,000	1/5	$135 \pm 2$	149	+ 21	74
FEMALE					
0	5/5	109 ± 3	136 ± 3	$+ 27 \pm 1$	
1,625	5/5	$109 \pm 3$	$138 \pm 5$	$+ 29 \pm 2$	101
3,250	5/5	$111 \pm 4$	$139 \pm 5$	$+ 28 \pm 2$	102
6,500	5/5	$107 \pm 3$	$129 \pm 5$	$+ 22 \pm 2$	95
13,000	4/5	$110 \pm 4$	$125 \pm 4$	$+ 13 \pm 2$	92
16,000	0/5	$103 \pm 2$	(d)	(d)	

## TABLE 8. SURVIVAL AND MEAN BODY WEIGHTS OF RATS IN THE NINETEEN-DAY INHALATION STUDIES OF DICHLOROMETHANE

(a) Number surviving/number in group

(b) Initial group mean body weight  $\pm$  standard error of the mean. Subsequent calculations are based on those animals surviving to the end of the study.

(c) Mean body weight change of the survivors  $\pm$  standard error of the mean

(d) No data are reported due to the 100% mortality in this group.

### THIRTEEN-WEEK STUDIES

One of 10 males and 1/10 females exposed to dichloromethane at 8,400 ppm died before the end of the studies (Table 9). The final mean body weights of males and females exposed at 8,400 ppm were 23% and 11% lower than those of the controls. Foreign body pneumonia (focal accumulation of mononuclear and multinucleated inflammatory cells) was present in 4/10 males and 6/10 females exposed at 8,400 and in 1/10 females exposed at 4,011 ppm. The liver lipid:liver weight ratios for male and female rats exposed at 8,400 ppm were significantly (P < 0.05) lower

than those of the controls by Dunnett's test (Table 10).

Dose Selection Rationale: A maximum exposure concentration of 4,000 ppm was selected for the 2-year studies because of the minimal severity of the histopathologic changes as noted after exposure at 4,000 ppm for 13 weeks. The second exposure concentration selected was 2,000 ppm for both species, and a third, lower, concentration (1,000 ppm) was added for rats because, in an earlier inhalation study (Burek et al., 1980, 1984), exposure at 3,500 ppm had reduced the survival of male and female Sprague-Dawley rats.

Target		Mean	Body Weights	<b>Final Weight Relative</b>	
Concentrat (ppm)		Initial (b)	Final (c)	Change (d)	to Controls (percent)
MALE				10 <u>1</u>	
0	10/10	$142 \pm 5$	306 ± 8	$+ 164 \pm 8$	••
525	10/10	$161 \pm 3$	$315 \pm 7$	$+ 154 \pm 5$	103
1,050	10/10	$154 \pm 4$	$317 \pm 3$	$+ 163 \pm 4$	104
2,100	10/10	$155 \pm 4$	$322 \pm 5$	$+ 167 \pm 4$	105
4,200	10/10	$153 \pm 3$	$318 \pm 5$	$+ 165 \pm 3$	104
8,400	(e) 10/10	$157 \pm 3$	$237 \pm 5$	$+ 80 \pm 4$	77
FEMALE					
0	10/10	$105 \pm 2$	175 ± 5	$+ 70 \pm 6$	
525	10/10	$117 \pm 3$	$184 \pm 5$	$+ 67 \pm 3$	105
1,050	10/10	$114 \pm 3$	$187 \pm 4$	$+ 73 \pm 3$	107
2,100	10/10	$112 \pm 2$	$188 \pm 4$	$+ 76 \pm 2$	107
4,200	10/10	$110 \pm 3$	181 ± 3	$+ 71 \pm 3$	103
8,400	(f) 9/10	$111 \pm 2$	156 ± 4	$+ 46 \pm 2$	89

#### TABLE 9. SURVIVAL AND MEAN BODY WEIGHTS OF RATS IN THE THIRTEEN-WEEK INHALATION STUDIES OF DICHLOROMETHANE

(a) Number surviving/number in group

(b) Initial group mean body weight  $\pm$  standard error of the mean. Subsequent calculations are based on those animals that survived through the final weighing.

(c) Final body weights taken after 12 weeks of exposure
(d) Mean body weight change of the survivors ± standard error of the mean
(e) One animal died during week 12 after the final body weights were taken.

(f) Week of death: 10

#### TABLE 10. RATIO OF LIVER LIPID WEIGHT TO LIVER WEIGHT IN RATS EXPOSED TO DICHLOROMETHANE IN THE THIRTEEN-WEEK INHALATION STUDIES

Target Concentration	Milligrams Lipid/Gram Liver (a)				
(ppm)	Male	Female			
0		30 ± 8			
525	$31 \pm 6$	$25 \pm 5$			
1,050	28 ± 3	26 ± 5			
2,100	$34 \pm 6$	$24 \pm 4$			
4,200	$32 \pm 7$	$(b) 24 \pm 3$			
8,400	(c) $25 \pm 7$	$(c) 22 \pm 4$			

(a) Mean  $\pm$  standard deviation

(b) P < 0.05 vs the controls by Dunnett's test

(c) P<0.01 vs the controls by Dunnett's test

### **TWO-YEAR STUDIES**

### **Body Weights and Clinical Signs**

Mean body weights of dosed and control rats of each sex were comparable throughout the studies (Table 11 and Figure 1). Rats exposed at 4,000 ppm were restless and pawed at the eyes and muzzle during the exposure period.

## TABLE 11. MEAN BODY WEIGHTS AND SURVIVAL OF RATS IN THE TWO-YEAR INHALATION STUDIES OF DICHLOROMETHANE

Weeks	Cont Av Wt	rol		1.000 ppm Wt (percent			2,000 ppm			4,000 ppm Wt (percent	
on Study	Av Wt (grams)	No. of Survi- vors	Av Wt (grams)	Wt (percent of controls)	No. of Survi- vors	Av Wt (grams)	2,000 ppm Wt. (percent of controls)	No. of Survi- vors	Av Wt (grams)	Wt (percent of controls)	No. of Survi- vors
IALE	<u></u>				•	•					
0 1 2 3 4	166 202 226 246 269	50 50 50 50 50	162 205 232 248 272	98 101 103 101	50 50 50 50	163 202 229 244 271	98 100 101 99	50 50 50 50	166 198 223 242 265	100 98 99 98	50 50 50 50
4 5 6 7 8 9	280 291 304	50	272 285 296 312 324 332 342 351	101 102 102 103 103	50 50 50 50 50	271 280 289 311 323 327 336	101 100 99 102 102	50 50 50 50 50	278 289 312	99 99 99 103 99	50 50 50 50 50 50
10 11	318 327 344 350 355 376	50 50 50 50 50 50	332 342 351 358	102 99 100 101	50 50 50 50	327 336 348 357 377	100 98 99 101	50 50 50 50	314 322 331 347 353 377	99 98 96 99 99	50 50 50 50 50
12 16 25 29 38 46 55 66 48 67 377 86 90 95	395 414 421 432 441	50 50 50 50 50 50 50 50	358 382 392 413 426 434 446 458	102 99 100 101 100 101 101	50 50 50 50 50 50 50	390 408 418 425 440 451	100 99 99 99 98 100	50 50 50 50 50 50 50 50	377 390 406 417 432 440 451	100 99 98 99 100 100	50 50 50 50 50 50 50
42 46 51 55 60	455 462 461 469 475 478	50 50 50 49 49	458 465 469 473 479	101 101 10 <b>2</b> 101 101 101	50 50 50 50	451 454 469 467 469 476 479	99 98 100 100 99 100	50 50 50 50	451 460 462 467 470 480 482	99 100 100 100 99	50 50 50 50
68 73 77 81 86	476 480 484 475 471	47 45 42 41 36	465 469 473 485 489 490 485 472 489 481 478	103 102 100 99	48 46 44 43 43 39	476 479 485 484 471 475 473 467 462	100 101 101 100 99 101	50 50 48 44 41 37	484 476 477 479	100 101 101 98 100 102	48 48 48 46 40 33
99	467 475 465	34 26 21	481 476 464	103 100 100	35 28 23	473 467 462	101 98 99	34 28 21	482 471 456	103 99 98	33 28 19 16
EMALE											
0 1 2 3 4 5 6 7 8 9 10 11 12 16 21 5	127 142 152 161 173 177 181 193 198 203 208 216 224 233	500 500 500 500 500 500 500 500 500 500	127 146 155 160 170 178 185 191 196 200 203 208 210 219 224 234	100 103 102 99 101 102 101 102 101 101 101 102 101 101	50 50 50 50 50 50 50 50 50 50 50 50 50 5	126 145 155 161 174 180 186 190 197 201 204 209 210 216 223 231	99 102 102 100 101 102 103 101 102 102 101 103 101 103 101 100 100 100 99	50 50 50 50 50 50 50 50 50 50 50 50 50 5	127 142 152 159 173 178 183 190 194 195 200 207 209 217 222 232	100 100 100 99 100 101 101 101 101 101 1	50 50 50 50 50 50 50 50 50 50 50 50 50 5
10 11 12 16 25 29 34 38 46 51 55 60 68 87 37	240 246 252 260 269 279 289 300	50 50 50 50 49 49 49 49	242 245 253 261 267 280 288 299 305 314 322 330	101 100 100 100 99 100 100 100 100 100 1	50 50 50 50 50 50 50 49 49	237 241 259 265 277 290 302 309 315 323 325	99 98 100 100 99 99 100 101 102 101	50 50 50 50 50 50 50 50 50 50 86 44 42	238 243 257 265 277 284 295 304 312	99 99 98 99 99 99 98 98 100 100	50 50 50 50 50 50 50 49 48 48 48 45
77 81 86 90 95 99	304 312 318 322 317 322 324 335 332	49 47 45 42 40 36 31	322 330 326 336 337 347 345	101 102 103 104 104 104 104	49 45 44 41 39 33 26	323 325 320 324 337 342 337	102 101 101 101 104 102 102	44 42 33 30 27 26	323 328 322 322 322 327 335 335 334	102 102 102 100 101 101 100 101	45 44 38 32 27 21



FIGURE 1. GROWTH CURVES FOR RATS EXPOSED TO DICHLOROMETHANE BY INHALATION FOR TWO YEARS

### Survival

Estimates of the probabilities of the survival of male and female rats exposed to dichloromethane 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 high dose group of female rats was significantly lower than that of the controls (Table 12) after week 100. No other significant differences in survival were observed between any groups of either sex. Survival of all groups of males was low (18%-34%). Most of the early deaths among males occurred during the final 16 weeks of the study.

# Pathology and Statistical Analyses of Results

This section describes the significant or note-

worthy changes in the incidences of rats with neoplastic or nonneoplastic lesions of the mammary gland, integumentary system, liver, multiple organs, tunica vaginalis, hematopoietic system, nasal cavity, kidney, spleen, prostate, parathyroid, adrenal gland, testis, and pituitary gland. Histopathologic findings on neoplasms in rats are summarized in Appendix A (Tables A1 and A2); Appendix A (Tables A3 and A4) also gives 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 four 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	1,000 ppm	2,000 ppm	4,000 ppm
MALE (a)	<b>.</b>			
Animals initially in study	50	50	50	50
Nonaccidental deaths before termination (b)	34	34	33	41
Killed at termination	16	16	17	9
Survival P values (c)	0.116	0.945	0.935	0.163
FEMALE (a)				
Animals initially in study	50	50	50	50
Nonaccidental deaths before termination (b)	20	28	28	35
Killed at termination	30	22	22	15
Survival P values (c)	0.006	0.223	0.118	0.006

#### TABLE 12. SURVIVAL OF RATS IN THE TWO-YEAR INHALATION STUDIES OF DICHLOROMETHANE

(a) Terminal kill period: week 104

(b) Includes animals killed in a moribund condition

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



FIGURE 2. KAPLAN-MEIER SURVIVAL CURVES FOR RATS EXPOSED TO DICHLOROMETHANE BY INHALATION FOR TWO YEARS

Mammary Gland: Fibroadenomas and adenomas or fibroadenomas (combined) in male and female rats occurred with significant positive trends, and the incidences in high dose males and dosed females were significantly greater than those in the controls (Table 13). Subcutaneous fibromas and fibromas or sarcomas (combined) located in the mammary area in male rats occurred with significant positive trends; the incidences in the dosed groups were not significantly greater than those in the controls. These subcutaneous tumors all occurred in the area of the mammary chain and may have been derived from nonglandular mammary tissue. Therefore, the subcutaneous tumors and the mammary gland tumors were combined for comparative purposes. When combined, the tumors occurred in male rats with a significant positive trend and the incidence in the high dose group was significantly greater than that in the controls (Table 13).

Except for a single adenoma in a high dose female rat, all mammary tumors were visible at necropsy. The neoplasms ranged from 1 to 8 cm in diameter and were primarily located in the axillary and inguinal areas. Grossly, they appeared to be cystic and rubbery or firm and many contained a milky fluid.

The diagnosis of fibroadenoma was based on the presence of a prominent fibrous stroma made up of mature collagenous fibrous tissue and proliferating mammary epithelium forming acini and solid masses of columnar, cuboidal, or round epithelial cells with abundant, often foamy cytoplasm. The mitotic rate was low. The amount of these two components in tumors diagnosed as fibroadenomas varied from masses of mature collagen with small islands of proliferating mammary epithelium to masses made up largely of proliferating mammary epithelium but with a mature fibrous stroma.

A diagnosis of carcinoma of the mammary gland in a low dose female was based on the presence of solid sheets and nests of proliferating epithelial cells that were basophilic and had a high nuclear-to-cytoplasmic ratio and a high rate of mitosis. The diagnosis of a malignant mixed tumor in one control female rat was based on the presence of a dominant bone-forming sarcomatous component, accompanied by a small squamous epithelial component.

	Control	1,000 ppm	2,000 ppm	4,000 ppm
MALE				
Mammary Gland: Fibroadenoma ()	b)			
Overall Rates	0/50 (0%)	0/50 (0%)	2/50 (4%)	4/50 (8%)
Adjusted Rates	0.0%	0.0%	11.8%	34.0%
Terminal Rates	0/16(0%)	0/16 (0%)	2/17 (12%)	2/9(22%)
Week of First Observation			104	101
Life Table Tests	P<0.001	(c)	P = 0.250	P = 0.020
Incidental Tumor Tests	P = 0.003	(c)	P = 0.250	P = 0.040
Mammary Gland: Adenoma				
Overall Rates	0/50 (0%)	0/50 (0%)	0/50 (0%)	1/50 (2%)
Mammary Gland: Adenoma or Fil	oroadenoma			
Overall Rates	0/50 (0%)	0/50 (0%)	2/50 (4%)	5/50(10%)
Adjusted Rates	0.0%	0.0%	11.8%	36.6%
Terminal Rates	0/16(0%)	0/16(0%)	2/17 (12%)	2/9 (22%)
Week of First Observation			104	93
Life Table Tests	P<0.001	(c)	P = 0.250	P = 0.010
Incidental Tumor Tests	P<0.001	(c)	P = 0.250	P = 0.023

TABLE 13.ANALYSIS OF MAMMARY GLAND OR SUBCUTANEOUS TISSUE LESIONS IN RATS IN<br/>THE TWO-YEAR INHALATION STUDIES OF DICHLOROMETHANE (a)

	Control	1,000 ppm	2,000 ppm	4,000 ppm
MALE (Continued)				
Subcutaneous Tissue: Fibroma (d)				
Overall Rates	1/50 (2%)	1/50 (2%)	2/50 (4%)	4/50 (8%)
Adjusted Rates	6.3%	6.3%	9.2%	19.5%
Terminal Rates	1/16 (6%)	1/16 (6%)	1/17 (6%)	0/9 (0%)
Week of First Observation	104	104	96	89
Life Table Tests	P = 0.024	P = 0.764	P = 0.523	P = 0.095
Incidental Tumor Tests	P = 0.024 P = 0.064	P = 0.764	P = 0.525 P = 0.505	P = 0.000
	• •••••			
Subcutaneous Tissue: Sarcoma Overall Rates	0/50 (00)	0/50 (00)	0/50 (00)	1/50 (90)
Overall nates	0/50 (0%)	0/50 (0%)	0/50 (0%)	1/50 (2%)
Subcutaneous Tissue: Fibroma or Sarco				
Overall Rates	1/50 (2%)	1/50 (2%)	2/50 (4%)	5/50 (10%)
Adjusted Rates	6.3%	6.3%	9.2%	22.7%
Terminal Rates	1/16 (6%)	1/16 (6%)	1/17 (6%)	0/9 (0%)
Week of First Observation	104	104	96	89
Life Table Tests	P=0.008	P=0.764	P = 0.523	P=0.050
Incidental Tumor Tests	P = 0.026	P = 0.764	P=0.505	P = 0.125
Mammary Gland or Subcutaneous Tissue	· Adenoma Fib	roadenome or Fik	roma	
Overall Rates	1/50 (2%)	1/50 (2%)	4/50 (8%)	9/50 (18%)
Adjusted Rates	6.3%	6.3%	20.6%	49.0%
Terminal Rates	0.370 1/16(696)	0.370 1/16(696)	3/17 (18%)	2/9 (22%)
Week of First Observation				
	104 R < 0.001	104	96 D. 0.100	89 D-0.000
Life Table Tests	P<0.001	P = 0.764	P = 0.196	P = 0.002
Incidental Tumor Tests	P = 0.001	P = 0.764	P = 0.186	P = 0.008
FEMALE				
Mammary Gland: Epithelial Hyperplasia	L			
Overall Rates	0/50 (0%)	0/50 (0%)	1/50 (2%)	1/50 (2%)
Mammary Gland: Fibroadenoma (e)				
Overall Rates	5/50 (10%)	11/50 (22%)	13/50 (26%)	22/50 (44%)
				79.4%
Adjusted Rates	15.7%	41.2%	43.6%	
Terminal Rates	4/30 (13%)	8/22 (36%)	7/22 (32%)	10/15 (67%)
Week of First Observation	96	74	65	73
Life Table Tests	P<0.001	P = 0.028	P = 0.009	P<0.001
Incidental Tumor Tests	P<0.001	P = 0.049	P = 0.025	P<0.001
Mammary Gland: Adenoma				
Overall Rates	0/50 (0%)	0/50 (0%)	0/50 (0%)	1/50 (2%)
Mammary Gland: Adenoma or Fibroade	noma			
Overall Rates	5/50 (10%)	11/50 (22%)	13/50 (26%)	23/50 (46%)
Adjusted Rates	15.7%	41.2%	43.6%	83.5%
Terminal Rates	4/30 (13%)	8/22 (36%)	7/22 (32%)	11/15 (73%)
Week of First Observation	96	74	65	73
Life Table Tests	P<0.001	P = 0.028	P = 0.009	P<0.001
Incidental Tumor Tests	P<0.001	P = 0.049	P = 0.005 P = 0.025	P<0.001
				_
Mammary Gland: Adenocarcinoma or C		0/00/100	0.00	A # A /A # -
Overall Rates	1/50 (2%)	2/50 (4%)	2/50 (4%)	0/50 (0%)
Mammary Gland: Mixed Tumors, Maligr	lant			

## TABLE 13. ANALYSIS OF MAMMARY GLAND OR SUBCUTANEOUS TISSUE LESIONS IN RATS IN THE TWO-YEAR INHALATION STUDIES OF DICHLOROMETHANE (Continued)

(a) The statistical analyses used are discussed in Chapter II (Statistical Methods) and Appendix E (footnotes).
(b) Historical incidence at testing laboratory: 0/100; historical incidence in NTP studies (mean ± SD): 51/1,727 (3% ± 3%)
(c) No P value is reported because no tumors were observed in the 1,000-ppm and control groups.
(d) Historical incidence at testing laboratory: 6/100 (6%); historical incidence in NTP studies (mean ± SD): 91/1,727

(5% ± 3%)

(e) Historical incidence at testing laboratory: 16/99 (16%); historical incidence in NTP studies (mean ± SD): 492/1,772 (28% ± 10%)

-

*Liver*: Hemosiderosis, hepatocytomegaly, cytoplasmic vacuolization, and necrosis were observed at increased incidences in dosed male and female rats (Appendix C, Tables C1 and C2). Bile duct fibrosis was observed at increased incidences in dosed male rats and mid dose female rats. Neoplastic nodules and neoplastic nodules or hepatocellular carcinomas (combined) in female rats occurred with significant positive trends by the life table test; the incidences in the high dose group were not significantly greater than those in the controls (Table 14).

## TABLE 14. ANALYSIS OF LIVER TUMORS IN FEMALE RATS IN THE TWO-YEAR INHALATION STUDY OF DICHLOROMETHANE

	Control	1 <b>,000</b> ppm	2,000 ppm	4,000 ppm
Neoplastic Nodule	······		<u>.</u>	<u></u>
Overall Rates	2/50 (4%)	1/50 (2%)	3/50 (6%)	5/50 (10%)
Adjusted Rates	6.7%	2.0%	10.2%	19.6%
Terminal Rates	2/30 (7%)	0/22 (0%)	1/22 (5%)	1/15 (7%)
Week of First Observation	104	61	85	73
Life Table Tests	P = 0.030	P = 0.569N	P = 0.382	P = 0.080
Incidental Tumor Tests	P=0.097	P=0.494N	P = 0.482	P=0.229
Hepatocellular Carcinoma				
Overall Rates	0/50 (0%)	0/50 (0%)	1/50 (2%)	0/50 (0%)
Neoplastic Nodule or Hepatocelly	ılar Carcinoma (a)			
Overall Rates	2/50 (4%)	1/50 (2%)	4/50 (8%)	5/50 (10%)
Adjusted Rates	6.7%	2.0%	14.4%	19.6%
Terminal Rates	2/30 (7%)	0/22 (0%)	2/22 (9%)	1/15 (7%)
Week of First Observation	104	61	85	73
Life Table Tests	P = 0.027	P = 0.569N	P = 0.223	P = 0.080
Incidental Tumor Tests	P = 0.086	P = 0.494N	P = 0.297	P = 0.229

(a) Historical incidence at testing laboratory: 1/98 (1%); historical incidence in NTP studies (mean  $\pm$  SD): 48/1,766 (3%  $\pm$  3%)

## **III. RESULTS: RATS**

*Multiple Organs*: Mesotheliomas of the tunica vaginalis or multiple organs in male rats occurred with significant positive trends, and the incidences in the mid dose and high dose groups were significantly greater than that in the controls (Table 15).

Hematopoietic System: Mononuclear cell leukemia in male and female rats occurred with significant positive trends by the life table test; the incidences in the mid dose and high dose female rats were significantly greater than those in the controls by the life table test (Table 16). The incidence in low dose male rats was significantly lower than that in the controls.

TABLE 15. ANALYSIS OF MESOTHELIOMAS IN MALE RATS IN THE TWO-YEAR INHALATION STUDY OF DICHLOROMETHANE

	Control	1,000 ppm	2,000 ppm	4,000 ppm
Tunica Vaginalis: All Types				
Overall Rates	0/50 (0%)	1/50 (2%)	4/50 (8%)	4/50 (8%)
Adjusted Rates	0.0%	2.2%	19.2%	24.4%
Terminal Rates	0/16(0%)	0/16(0%)	2/17 (12%)	0/9(0%)
Week of First Observation		69	96	92
Life Table Tests	P = 0.009	P = 0.496	P = 0.070	P = 0.031
Incidental Tumor Tests	P = 0.030	P = 0.473	P = 0.062	P=0.097
All Sites: All Types (a)				
Overall Rates	0/50 (0%)	2/50 (4%)	5/50(10%)	4/50 (8%)
Adjusted Rates	0.0%	4.4%	22.8%	24.4%
Terminal Rates	0/16(0%)	0/16 (0%)	2/17 (12%)	0/9(0%)
Week of First Observation		69	96	92
Life Table Tests	P = 0.020	P = 0.243	P = 0.038	P = 0.031
Incidental Tumor Tests	P = 0.063	P = 0.225	P = 0.030	P = 0.097

(a) Historical incidence at testing laboratory: 4/100(4%); historical incidence in NTP studies (mean ± SD):  $44/1,727(3\% \pm 2\%)$ 

## TABLE 16. ANALYSIS OF HEMATOPOIETIC SYSTEM TUMORS IN RATS IN THE TWO-YEAR INHALATION STUDIES OF DICHLOROMETHANE

	Control	1,000 ppm	2,000 ppm	4,000 ppm
MALE				
Mononuclear Cell Leukemia(a)				
Overall Rates	34/50 (68%)	26/50 (52%)	32/50 (64%)	35/50 (70%)
Adjusted Rates	80.3%	77.0%	80.2%	89.4%
Terminal Rates	8/16 (50%)	9/16 (56%)	10/17 (59%)	6/9 (67%)
Week of First Observation	57	82	71	75
Life Table Tests	P = 0.045	P = 0.147N	P = 0.400 N	P = 0.134
Incidental Tumor Tests	P = 0.399	P = 0.049 N	P = 0.434N	P = 0.487 N
FEMALE				
Mononuclear Cell Leukemia(b)				
Overall Rates	17/50 (34%)	17/50 (34%)	23/50 (46%)	23/50 (46%)
Adjusted Rates	41.1%	44.4%	63.6%	58.1%
Terminal Rates	8/30 (27%)	4/22 (18%)	10/22 (45%)	1/15(7%)
Week of First Observation	73	76	73	63
Life Table Tests	P = 0.009	P = 0.402	P = 0.049	P = 0.028
Incidental Tumor Tests	P = 0.273	P = 0.425N	P = 0.189	P = 0.579

(a) Historical incidence at testing laboratory: 36/100 (36%); historical incidence in NTP studies (mean  $\pm$  SD): 458/1,727 (27%  $\pm$  9%)

(b) Historical incidence at testing laboratory: 27/99 (27%); historical incidence in NTP studies (mean  $\pm$  SD): 307/1,772 (17%  $\pm$  6%)

Nasal Cavity: Squamous metaplasia was observed at an increased incidence in high dose female rats (male: control, 4/50, 8%; low dose, 5/50, 10%; mid dose, 3/50, 6%; high dose, 3/50, 6%; female: control, 1/50, 2%; low dose, 2/50, 4%; mid dose, 3/50, 6%; high dose, 9/50, 18%).

*Kidney*: Degeneration of the kidney tubule was observed at an increased incidence in mid dose male rats and high dose female rats (male: control, 11/50, 22%; low dose, 13/50, 26%; mid dose, 23/50, 46%; high dose, 10/50, 20%; female: control, 14/50, 28%; low dose, 20/50, 40%; mid dose, 22/50, 44%; high dose, 25/49, 51%).

Spleen: Fibrosis was observed at increased incidences in dosed male and female rats (male: control, 2/50, 4%; low dose, 6/49, 12%; mid dose, 11/50, 22%; high dose, 8/50, 16%; female: control, 0/50; low dose, 2/50, 4%; mid dose, 4/50, 8%; high dose, 4/49, 8%).

*Prostate:* Suppurative inflammation was observed at increased incidences in dosed male rats

(control, 1/44, 2%; low dose, 4/42, 10%; mid dose, 10/46, 22%; high dose, 5/45, 11%).

*Parathyroid*: Hyperplasia was observed at increased incidences in dosed male rats (male: control, 0/29; low dose, 6/35, 17%; mid dose, 2/30, 7%; high dose, 4/32, 13%; female: control, 2/26, 18%; low dose, 0/19; mid dose, 1/26, 4%; high dose, 0/26).

Other Increased Tumor Incidences: Other tumors occurred at marginally significant increased incidences in the dosed groups relative to the controls. These increases were characterized by a significant trend but no significant pairwise effect, a pairwise difference that was significant only by life table analysis, or a significant effect at the low dose but no significant trend or effect at the high dose. These tumors included adrenal gland pheochromocytomas and interstitial cell tumors of the testis in males and pituitary gland adenomas or carcinomas (combined) in males and females (Appendix E, Tables E1 and E2).

## SINGLE-EXPOSURE STUDIES

The incidence of deaths in the various groups is given in Table 17. The  $LC_{50}$  value for male mice was calculated on the basis of time-weighted average concentrations of 15,975, 16,356, 16,948, 17,175, 18,035, 18,670, 19,271, and 20,398 by probit analysis (Finney, 1971) to be 17,703 ppm (95% confidence limit range, 16,163-18,505 ppm). No meaningful  $LC_{50}$  value could be determined for the female mice. No compound-related effects were observed at necropsy.

### NINETEEN-DAY STUDIES

All mice exposed to dichloromethane at 16,000 ppm and 3/5 males and 4/5 females exposed at 13,000 ppm died before the end of the studies (Table 18). The female mouse in the 13,000-ppm group that survived to the end of the study lost weight. Final mean body weights of other groups of dosed and control male and female mice were comparable. Hyperactivity was considered to be compound related. No compoundrelated effects were observed at necropsy.

 TABLE 17. SURVIVAL AND MEAN BODY WEIGHTS OF MICE IN THE SINGLE-EXPOSURE INHALATION STUDIES OF DICHLOROMETHANE

Target		Mea	n Body Weights (a	Mean Body Weights (grams)					
Concentration (ppm)	Survival (a)	Initial (b)	Final	Change (c)					
ALE	······································	- <u> </u>	,,, <u>,</u> ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,						
15,500	5/5	$20.4 \pm 0.7$	$25.8 \pm 0.6$	$+ 5.4 \pm 0.2$					
16,500	5/5	$21.0 \pm 0.7$	$25.2 \pm 0.7$	$+ 4.2 \pm 0.2$					
16,800	5/5	$20.2 \pm 2.1$	$27.4 \pm 0.2$	$+ 7.2 \pm 2.2$					
17,250	1/5	$19.8 \pm 0.6$	24.0	+ 5.0					
18,500	3/5	$18.6 \pm 0.5$	$24.3 \pm 0.3$	$+ 6.3 \pm 0.7$					
19,000	1/5	$20.8 \pm 0.2$	26.0	+ 5.0					
19,000	1/5	$22.0 \pm 0.9$	24.0	+ 1.0					
19,000	0/5	$22.0 \pm 0.4$	(d)	(d)					
MALE									
15,500	5/5	$17.2 \pm 0.4$	$20.8 \pm 0.2$	$+ 3.6 \pm 0.2$					
16,500	5/5	$16.6 \pm 0.6$	$20.0 \pm 0.7$	$+ 3.4 \pm 0.2$					
16,800	5/5	$19.4 \pm 0.2$	$21.2 \pm 0.4$	$+ 1.8 \pm 0.5$					
17,250	2/5	$18.6 \pm 0.7$	$20.0 \pm 0.0$	$+ 2.0 \pm 0.0$					
18,500	2/5	$16.4 \pm 0.4$	$22.5 \pm 0.5$	$+ 5.5 \pm 0.5$					
19,000	4/5	$18.8 \pm 0.4$	$21.3 \pm 0.3$	$+ 2.3 \pm 0.5$					
19,000	4/5	$19.2 \pm 0.6$	$20.3 \pm 0.5$	$+ 1.3 \pm 0.5$					
19,000	2/5	$18.2 \pm 0.7$	$20.5 \pm 0.5$	$+ 2.0 \pm 1.0$					

(a) Number surviving/number initially in group

(b) Initial group mean body weight  $\pm$  standard error of the mean. Subsequent calculations are based on those animals surviving to the end of the study.

(c) Mean body weight change of the survivors of the group  $\pm$  standard error of the mean

(d) No data are reported due to the 100% mortality in this group.

Target		Mea	n Body Weights	<b>Final Weight Relative</b>	
Concentration (ppm)	Survival (a)	Initial (b)	Final	Change (c)	to Controls (percent)
MALE	<u></u>	<u></u>			n , , , , , , , , , , , , , , , , , , ,
0	5/5	$24.8 \pm 0.6$	$26.8 \pm 0.6$	$+2.0 \pm 0.0$	
1,625	4/5	$24.6 \pm 0.4$	$27.8 \pm 0.3$	$+2.8 \pm 0.3$	103.7
3,250	5/5	$24.6 \pm 0.2$	$26.8 \pm 1.0$	$+2.2 \pm 1.0$	100.0
6,500	5/5	$24.4 \pm 0.2$	$28.0 \pm 0.3$	$+3.6 \pm 0.4$	104.5
13,000	2/5	$25.4 \pm 0.5$	$26.5 \pm 0.5$	$+ 1.0 \pm 0.0$	98.9
16,000	0/5	$25.0 \pm 0.4$	(d)	(d)	
FEMALE					
0	5/5	$19.2 \pm 0.4$	$22.6 \pm 0.5$	$+3.4 \pm 0.4$	
1,625	5/5	$19.4 \pm 0.7$	$23.0 \pm 0.5$	$+3.6 \pm 0.2$	101.8
3,250	5/5	$19.8 \pm 0.5$	$24.8 \pm 0.6$	$+5.0 \pm 0.3$	109.7
6,500	5/5	$19.4 \pm 0.2$	$24.8 \pm 0.6$	$+5.4 \pm 0.6$	109.7
13,000	1/5	$19.2 \pm 0.5$	17.0	- 2.0	75.2
16,000	0/5	$19.0 \pm 0.3$	(d)	(d)	

#### TABLE 18. SURVIVAL AND MEAN BODY WEIGHTS OF MICE IN THE NINETEEN-DAY INHALATION STUDIES OF DICHLOROMETHANE

(a) Number surviving/number initially in the group

(b) Initial group mean body weight  $\pm$  standard error of the mean. Subsequent calculations are based on those animals surviving to the end of the study.

(c) Mean body weight change of the survivors of the group  $\pm$  standard error of the mean

(d) No data are reported due to the 100% mortality in this group.

### THIRTEEN-WEEK STUDIES

The deaths of 4/10 males and 2/10 females exposed to dichloromethane at 8,400 ppm were considered to be compound related (Table 19). The final mean body weight of females exposed at 8,400 ppm was 8% lower than that of the controls. Centrilobular hydropic degeneration (pale perinuclear cytoplasm of centrilobular hepatocytes) of minimal-to-mild severity was observed in 3/10 males and 8/10 females exposed at 8,400 ppm and in 9/10 females exposed at 4,200 ppm. This lesion was considered to be due to

differences in glycogen storage and a consequence of the sequence in which the animals were killed. The liver lipid:liver weight ratio for female mice that were exposed at 8,400 ppm was significantly lower than that of the controls (P < 0.05, Dunnett's test) (Table 20).

Dose Selection Rationale: Based on deaths observed at 8,400 ppm and the severity of histologic changes noted in mice exposed at 4,000 ppm for 13 weeks, concentrations selected for mice for the 2-year inhalation studies of dichloromethane were 2,000 and 4,000 ppm.

Target		Mear	n Body Weights	(grams)	<b>Final Weight Relative</b>
Concentration (ppm)	Survival (a)	Initial (b)	Final (c)	Change (d)	to Controls (percent)
MALE					
0	(e) 9/10	$27.3 \pm 0.4$	$33.0 \pm 0.8$	$+5.7 \pm 0.8$	
525	10/10	$25.5 \pm 0.7$	$32.1 \pm 0.6$	$+ 6.6 \pm 0.8$	97.3
1,050	(f) 9/10	$27.2 \pm 0.6$	$33.7 \pm 0.8$	$+ 6.4 \pm 0.4$	102.1
2,100	10/10	$26.9 \pm 0.7$	$34.4 \pm 0.6$	$+7.5 \pm 0.6$	104.2
4,200	10/10	$26.1 \pm 0.5$	$32.9 \pm 0.7$	$+6.8\pm0.5$	99.7
8,400	(g) 6/10	$25.4 \pm 0.7$	$34.0 \pm 1.0$	$+7.7 \pm 1.0$	103.0
FEMALE					
0	(h) 7/10	$20.9 \pm 0.6$	$27.7 \pm 0.6$	$+ 6.3 \pm 0.4$	
525	10/10	$21.0 \pm 0.5$	$28.1 \pm 0.8$	$+7.1 \pm 0.9$	101.4
1,050	10/10	$21.0 \pm 0.4$	$28.9 \pm 0.5$	$+7.9 \pm 0.7$	104.3
2,100	10/10	$21.3 \pm 0.6$	$29.2 \pm 0.8$	$+7.9 \pm 0.4$	105.4
4,200	10/10	$20.6 \pm 0.4$	$28.7 \pm 0.5$	$+8.1\pm0.5$	103.6
8,400	(i) 7/10	$19.6 \pm 0.4$	$25.4 \pm 0.6$	$+5.6 \pm 0.5$	91.7

# TABLE 19. SURVIVAL AND MEAN BODY WEIGHTS OF MICE IN THE THIRTEEN-WEEKINHALATION STUDIES OF DICHLOROMETHANE

(a) Number surviving/number initially in group

(b) Initial group body weight  $\pm$  standard error of the mean. Subsequent calculations are based on those animals that survived through the final weighing. (c) Final body weights taken after 12 weeks of exposure

(d) Mean body weight change of the survivors  $\pm$  standard error of the mean

(e) Week of death: 8

(f) Week of death: 5

(g) Week of death: 2, 9, 12, 12

(h) Week of death: 8

(i) Week of death: 12; one death was accidental.

#### TABLE 20. RATIO OF LIVER LIPID WEIGHT TO LIVER WEIGHT IN MICE EXPOSED TO DICHLOROMETHANE IN THE THIRTEEN WEEK INHALATION STUDIES

Target Concentration	Milligrams L	pid/Gram Liver (a)	
(ppm)	Male	Female	
0	36 ± 4	41 ± 9	
525	$45 \pm 12$	44 ± 7	
1,050	$36 \pm 4$	$36 \pm 5$	
2,100	$43 \pm 19$	42 ± 9	
4,200	$32 \pm 4$	$40 \pm 7$	
8,400	$34 \pm 6$	(b) $30 \pm 4$	

(a) Mean  $\pm$  standard deviation

(b) P<0.01 vs controls by Dunnett's test

### **TWO-YEAR STUDIES**

### **Body Weights and Clinical Signs**

The initial weight of the high dose male mice was 15% lower than that of the controls (Table 21 and Figure 3). The mean body weight of the high dose group was generally comparable to that of the controls until week 90, after which they were 8%-11% lower than those of the controls. The initial mean body weight of the high dose female mice was 7% greater than that of the controls and remained greater until week 51. From week 51 to week 95, mean body weights of the high dose female mice were 0%-9% lower than those of the controls; at week 99, the mean body weight of the high dose female group was 17% lower than that of the controls. During exposure periods, high dose female mice (and to a lesser extent, high dose male mice and low dose female mice) were hyperactive. During the second year of the study, high dose female mice were lethargic.

TABLE 21. MEAN BODY WEIGHTS AND SURVIVAL OF MICE IN THE TWO-YEAR INHALATION STUDIES OF DICHLOROMETHANE

Weeks on Study	Co	ntrol		2,000 ppm Wt. (percent			4.000 ppn	1
on study	Av. Wt. (grams)	No. of Survivors	Av. WL (grams)	Wt. (percent of controls)	No. of Survivors	Av. WL (grams)	Wt. (percent of controls)	No. of Survivors
MALE								
0 1 2 3 4 5 6 7 8 9 10 11 12 21 22 9 38 29 38 29 38 29 38 29 38 29 38 29 55 60 64 8 90 89 99 99 99 99	$\begin{array}{c} 24.7\\ 24.3\\ 25.6\\ 28.1\\ 28.1\\ 24.7\\ 27.6\\ 28.8\\ 30.6\\ 29.4\\ 30.6\\ 29.4\\ 30.6\\ 33.2\\ 33.2\\ 33.2\\ 33.2\\ 33.2\\ 33.2\\ 33.8\\ 34.6\\ 33.8\\ 33.8\\ 34.6\\ 33.8\\ 33.8\\ 34.6\\ 33.8\\ 33.8\\ 34.6\\ 33.8\\ 33.8\\ 34.6\\ 33.8\\ 33.8\\ 34.6\\ 33.8\\ 33.8\\ 34.6\\ 33.8\\ 33.8\\ 34.6\\ 33.8\\ 33.8\\ 34.6\\ 33.8\\ 34.6\\ 33.8\\ 34.6\\ 33.8\\ 34.6\\ 35.6\\ 35.6\\ 4\\ 35.6\\$	50 50 50 50 50 50 50 50 50 50 50 50 50 5	24.3 266.6 29.0 29.1 30.3 31.9 31.6 31.6 31.6 31.6 31.6 31.6 31.6 33.0 7 32.2 31.6 33.0 7 32.2 31.6 33.0 7 34.5 35.6 4 39.3 39.1 39.9 6 40.1 39.9 39.6 40.1 39.5 39.6 39.5 39.6 39.6 39.5 39.6 39.5 39.5 39.5 39.5 39.5 39.5 39.5 39.5	98 108 104 105 103 104 123 116 107 105 106 104 100 108 103 105 105 106 105 106 105 106 105 106 105	50 50 50 50 50 50 50 50 50 50 50 50 50 5	$\begin{array}{c} 21.0\\ 25.8\\ 27.4\\ 27.6\\ 28.2\\ 29.7\\ 30.6\\ 31.4\\ 31.0\\ 32.5\\ 35.5\\ 35.5\\ 35.5\\ 36.1\\ 36.1\\ 36.1\\ 36.3\\ 36.7\\ 36.8\\ 35.7\\ 36.1\\ 36.1\\ 36.1\\ 36.1\\ 36.1\\ 36.7\\ 36.1\\ 36.1\\ 36.7\\ 36.1\\$	85 106 107 100 103 121 108 103 104 104 104 104 104 104 104 107 107 103 98 103 106 107 107 103 98 99 97 99 97 99 99 97 92 94 89	50 549 499 499 499 499 499 499 499 499 488 487 77 544 426 53 300 51
86 90 95 99 *Emale	36.1 36.6 35.7 35.3	43 42 41 39	41.0 39.7 40.7 38.8 37.9 39.3	113 109 113 106 106 111	37 32 30 28	35.0 33.5 33.5 31.3	97 92 94 89	33 30 25 21
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FIGURE 3. GROWTH CURVES FOR MICE EXPOSED TO DICHLOROMETHANE BY INHALATION FOR TWO YEARS

### Survival

Estimates of the probabilities of survival of male and female mice exposed to dichloromethane 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 both dosed groups of male mice (low dose after week 101, high dose after week 89) was significantly lower than that of the controls, and the survival of the high dose group was significantly lower than that of the low dose group (P=0.016) (Table 22). The survival of the high dose group of female mice was significantly lower than that of both the controls (after week 98) and the low dose group (P<0.01).

# Pathology and Statistical Analyses of Results

This section describes the significant or noteworthy changes in the incidences of mice with neoplastic or nonneoplastic lesions of the lung, liver, circulatory system, testis, ovary, uterus, kidney, stomach, and spleen. Histopathologic findings on neoplasms in mice are summarized in Appendix B (Tables B1 and B2); Appendix B (Tables B3 and B4) also gives 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) 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.

	Control	2,000 ppm	4,000 ppm
MALE (a)			
Animals initially in study	50	50	50
Nonaccidental deaths before termination (b)	11	24	38
ccidentally killed	0	2	1
Cilled at termination	39	24	9
lied during termination period	0	0	2
Survival P values (c)	< 0.001	0.010	< 0.001
EMALE (a)			
nimals initially in study	50	50	50
Ionaccidental deaths before termination (b)	24	22	40
Accidentally killed	1	2	1
nimals missing	0	1	1
Cilled at termination	25	25	8
Survival P values (c)	0.002	0.678	0.004

#### TABLE 22. SURVIVAL OF MICE IN THE TWO-YEAR INHALATION STUDIES OF DICHLOROMETHANE

(a) Terminal kill period: week 104

(b) Includes animals killed in a moribund condition

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



FIGURE 4. KAPLAN-MEIER SURVIVAL CURVES FOR MICE EXPOSED TO DICHLOROMETHANE BY INHALATION FOR TWO YEARS

Lung: Alveolar/bronchiolar adenomas, alveolar bronchiolar carcinomas, and alveolar/bronchiolar adenomas or carcinomas (combined) in male and female mice occurred with significant positive trends, and the incidences in the dosed groups were significantly greater than those in the controls (Table 23).

TABLE 23.	ANALYSIS OF LUNG LESIONS IN MICE IN THE TWO-YEAR INHALATION STUDIES O	F
	DICHLOROMETHANE (a)	

	Control	2,000 ppm	4,000 ppm
MALE			
Epithelial Hyperplasia			
Overall Rates	0/50 (0%)	0/50 (0%)	1/50 (2%)
lveolar/Bronchiolar Adenoma			
Overall Rates	3/50 (6%)	19/50 (38%)	24/50 (48%)
Adjusted Rates	7.7%	55.6%	78.5%
Terminal Rates	3/39 (8%)	10/24 (42%)	6/11(55%)
Week of First Observation	104	71	70
Life Table Tests	P<0.001	P<0.001	P<0.001
Incidental Tumor Tests	P<0.001	P<0.001	P<0.001
lveolar/Bronchiolar Carcinoma			
Overall Rates	2/50 (4%)	10/50 (20%)	28/50 (56%)
Adjusted Rates	4.9%	34.0%	92.9%
Terminal Rates	1/39 (3%)	6/24 (25%)	9/11 (82%)
Week of First Observation	94	78	72
Life Table Tests	P<0.001	P = 0.002	P<0.001
Incidental Tumor Tests	P<0.001	P = 0.016	P<0.001
lveolar/Bronchiolar Adenoma or Carcin			
Overall Rates	5/50 (10%)	27/50 (54%)	40/50 (80%)
Adjusted Rates	12.4%	74.2%	100.0%
Terminal Rates	4/39 (10%)	15/24 (63%)	11/11 (100%)
Week of First Observation	94	71	70 D - 0 001
Life Table Tests	P<0.001	P<0.001	P<0.001
Incidental Tumor Tests	P<0.001	P<0.001	P<0.001
EMALE			
pithelial Hyperplasia			
Overall Rates	0/50 (0%)	1/48 (2%)	0/48 (0%)
lveolar/Bronchiolar Adenoma			
Overall Rates	2/50 (4%)	23/48 (48%)	28/48 (58%)
Adjusted Rates	6.7%	66.5%	91.1%
Terminal Rates	1/25 (4%)	14/25 (56%)	6/8 (75%)
Week of First Observation	87	83	68
Life Table Tests Incidental Tumor Tests	P<0.001	P<0.001	P<0.001
incidental lumor lests	P<0.001	P<0.001	P<0.001
lveolar/Bronchiolar Carcinoma		10/40 /07/21	00.000.0000
Overall Rates	1/50 (2%)	13/48 (27%)	29/48 (60%)
Adjusted Rates	4.0%	45.9%	92.2%
Terminal Rates	1/25 (4%)	10/25 (40%)	6/8 (75%)
Week of First Observation	104 D <0.001	89 D < 0.001	68 D < 0.001
Life Table Tests Incidental Tumor Tests	P<0.001	P<0.001	P<0.001
incidental lumor lests	P<0.001	P<0.001	P<0.001
lveolar/Bronchiolar Adenoma or Carcin		00404000	11/10/08/
Overall Rates	3/50 (6%)	30/48 (63%)	41/48 (85%)
Adjusted Rates Terminal Rates	10.6%	82.9%	100.0%
Week of First Observation	2/25 (8%) 87	19/25 (76%) 83	8/8 (100%) 68
Life Table Tests	P<0.001	83 P<0.001	P<0.001

(a) The statistical methods used are discussed in Chapter II (Statistical Methods) and Appendix E (footnotes). (b) Historical incidence at testing laboratory: 31/100 (31%); historical incidence in NTP studies (mean  $\pm$  SD): 296/1,780 (17%  $\pm$  8%)

(c) Historical incidence at testing laboratory: 10/100 (10%); historical incidence in NTP studies (mean  $\pm$  SD): 122/1,777 (7%  $\pm$  4%)

Liver: Cytologic degeneration was observed at increased incidences in high dose male mice and dosed female mice (male: control, 0/50; low dose, 0/49; high dose, 22/49, 45%; female: control, 0/50; low dose, 23/48, 48%; high dose, 21/48, 44%). Hepatocellular adenomas, hepatocellular carcinomas, and hepatocellular adenomas or carcinomas (combined) in male and female mice occurred with significant positive trends. The

incidences of hepatocellular adenomas in high dose male and high dose female mice, hepatocellular carcinomas in high dose male and dosed female mice, hepatocellular adenomas and hepatocellular adenomas or carcinomas (combined) in dosed male mice, and hepatocellular adenomas or carcinomas (combined) in dosed female mice were significantly greater than those in the controls (Table 24).

TABLE 24.	ANALYSIS OF LIVER	TUMORS IN MICE I	IN THE TWO-YE	AR INHALATION STUDIES OF
		DICHLOROM	<b>IETHANE</b>	

	Control	<b>2,000</b> ppm	4,000 ppm
MALE		· · · · · · · · · · · · · · · · · · ·	
Hepatocellular Adenoma			
Overall Rates	10/50 (20%)	14/49 (29%)	14/49 (29%)
Adjusted Rates	23.0%	46.9%	68.3%
Terminal Rates	7/39 (18%)	9/24 (38%)	6/11 (55%)
Week of First Observation	73	71	80
Life Table Tests	P<0.001	P = 0.041	P=0.001
Incidental Tumor Tests	P = 0.075	P = 0.161	P = 0.095
Hepatocellular Carcinoma			
Overall Rates	13/50 (26%)	15/49 (31%)	26/49 (53%)
Adjusted Rates	29.7%	43.7%	76.4%
Terminal Rates	9/39 (23%)	7/24 (29%)	5/11 (45%)
Week of First Observation	73	72	61
Life Table Tests	P<0.001	P = 0.111	P<0.001
Incidental Tumor Tests	P = 0.016	P = 0.422	P = 0.042
Hepatocellular Adenoma or Carcinoma (a)			
Overall Rates	22/50 (44%)	24/49 (49%)	33/49 (67%)
Adjusted Rates	48.3%	66.8%	93.0%
Terminal Rates	16/39 (41%)	13/24 (54%)	9/11 (82%)
Week of First Observation	73 D <0.001	71	61 D < 0.001
Life Table Tests Incidental Tumor Tests	P<0.001	P = 0.048 P = 0.305	P<0.001 P=0.020
Incidental Lumor Tests	P = 0.010	P=0.305	P=0.020
FEMALE			
Hepatocellular Adenoma			
Overall Rates	2/50 (4%)	6/48 (13%)	22/48 (46%)
Adjusted Rates	6.5%	21.3%	83.0%
Terminal Rates	1/25 (4%)	4/25 (16%)	5/8 (63%)
Week of First Observation	84	96	68
Life Table Tests	P<0.001	P = 0.151	P<0.001
Incidental Tumor Tests	P<0.001	P = 0.155	P<0.001
Hepatocellular Carcinoma			00/40 (059)
Overall Rates	1/50 (2%)	11/48 (23%)	32/48 (67%)
Adjusted Rates	4.0%	34.0%	96.5% 7/8 (88%)
Terminal Rates Week of First Observation	1/25 (4%) 104	6/25 (24%) 83	7/8 (88%) 68
Life Table Tests	P<0.001	P = 0.005	P<0.001
Incidental Tumor Tests	P<0.001	P = 0.003	P<0.001
Hepatocellular Adenoma or Carcinoma (b)			
Överall Rates	3/50 (6%)	16/48 (33%)	40/48 (83%)
Adjusted Rates	10.4%	48.0%	100.0%
Terminal Rates	2/25 (8%)	9/25 (36%)	8/8 (100%)
Week of First Observation	84	83	68
Life Table Tests	P<0.001	P = 0.002	P<0.001
Incidental Tumor Tests	P<0.001	P = 0.002	P<0.001

(a) Historical incidence at testing laboratory: 28/100 (28%); historical incidence in NTP studies (mean  $\pm$  SD): 540/1,784 (30%  $\pm$  8%)

(b) Historical incidence at testing laboratory: 5/100 (5%); historical incidence in NTP studies (mean  $\pm$  SD): 147/1,781 (8%  $\pm$  5%)

Circulatory System: Hemangiosarcomas in male mice occurred with a significant positive trend by the life table test; the incidence in the 4,000ppm group was significantly greater than that in the controls in life table pairwise comparisons (Table 25). The following incidences of hemangioma or hemangiosarcoma (combined) were observed in female mice: control, 0/50; low dose, 2/49 (4%); high dose, 2/49 (4%).

Testis: Testicular atrophy was observed at increased incidences in dosed male mice (control, 0/50; low dose, 4/50, 8%; high dose, 31/50, 62%).

Ovary and Uterus: Ovarian atrophy was observed at increased incidences in dosed female mice (control, 6/50, 12%; low dose, 28/47, 60%; high dose, 32/43, 74%). Uterine atrophy was observed at increased incidence in high dose female mice (control, 0/50; low dose, 1/48, 2%; high dose, 8/47, 17%).

*Kidney*: The incidence of kidney/tubule casts was increased in high dose male mice (male: control, 6/50, 12%; low dose, 11/49, 22%; high dose, 20/50, 40%; female: control, 8/49, 16%; low dose, 23/48, 48%; high dose, 23/47, 49%).

Stomach: Dilatation of the stomach was observed at an increased incidence in high dose male and female mice (male: control, 3/49, 6%; low dose, 7/47, 15%; high dose, 9/49, 18%; female: control, 1/49, 2%; low dose, 2/47, 4%; high dose, 10/48, 21%).

Spleen: Atrophy of the splenic follicles was observed at increased incidence in high dose male mice (male: control, 0/49; low dose, 3/49, 6%; high dose, 7/48, 15%; female: control, 0/49; low dose, 0/48; high dose, 1/47, 2%).

	Control	2,000 ppm	4,000 ppm
Hemangioma	· · · · · · · · · · · · · · · · · · ·		<u></u>
Overall Rates	1/50 (2%)	0/50 (0%)	1/50 (2%)
Hemangiosarcoma			
Overall Rates	1/50 (2%)	2/50 (4%)	5/50 (10%)
Adjusted Rates	2.6%	7.6%	21.4%
Terminal Rates	1/39 (3%)	1/24 (4%)	1/11 (9%)
Week of First Observation	104	101	70
Life Table Tests	P = 0.007	P=0.352	P = 0.017
Incidental Tumor Tests	P=0.083	P=0.495	P = 0.142
Hemangioma or Hemangiosarcoma (a)			
Overall Rates	2/50 (4%)	2/50 (4%)	6/50 (12%)
Adjusted Rates	4.8%	7.6%	25.8%
Terminal Rates	1/39 (3%)	1/24 (4%)	1/11 (9%)
Week of First Observation	87	101	70
Life Table Tests	P=0.010	P=0.558	P = 0.022
Incidental Tumor Tests	P = 0.170	P = 0.643N	P = 0.301

## TABLE 25. ANALYSIS OF CIRCULATORY SYSTEM TUMORS IN MALE MICE IN THE TWO-YEARINHALATION STUDY OF DICHLOROMETHANE

(a) Historical incidence at testing laboratory: 2/100 (2%); historical incidence in NTP studies (mean  $\pm$  SD): 78/1,791 (4%  $\pm$  4%)

## **IV. DISCUSSION AND CONCLUSIONS**

Toxicology and carcinogenesis studies were conducted by exposing rodents to dichloromethane (99% pure) by inhalation. For the 2-year studies, groups of 50 male and 50 female F344/N rats and B6C3F<sub>1</sub> mice were exposed for 6 hours per day, 5 days per week. The exposure concentrations used in these studies (0 [chamber controls], 1,000, 2,000, or 4,000 ppm in rats and 0, 2,000, or 4,000 ppm in mice) were selected on the basis of the results of 13-week inhalation studies in which groups of rats and mice of each sex were exposed to dichloromethane at concentrations ranging from 500 to 8,400 ppm for 6 hours per day, 5 days per week.

## **Thirteen-Week Studies**

In the 13-week studies in rats, exposure at 8,200 ppm decreased body weight gain in both sexes; one male rat died before the end of the study. Body weight gains by dosed mice were comparable to those of chamber controls; four males in the 8,400-ppm group and two females in the 8,200-ppm and chamber control groups died before the end of the studies. The 8,200-ppm and 4,000-ppm concentrations produced mild to minimal lung changes in rats and hydropic changes in the livers of mice.

A maximum exposure concentration of 4,000 ppm was selected for the 2-year studies because of the minimal severity of the histopathologic changes noted in both rats and mice after exposure at 4,000 ppm for 13 weeks. The second exposure concentration selected was 2,000 ppm for both species, and a third, lower concentration (1,000 ppm) was added for rats because, in an earlier inhalation study (Burek et al., 1980, 1984), exposure at 3,500 ppm had reduced the survival of female Sprague-Dawley rats.

## **Two-Year Studies**

The results of the present studies as well as of other available long-term studies conducted on dichloromethane are summarized for ease of comparison in Table 26. In male rats, exposure at 1,000, 2,000, or 4,000 ppm dichloromethane had no effect on survival compared with the chamber controls; however, the survival of all groups of male rats was unusually low relative

to historical data (chamber control, 16/50; low dose, 16/50; mid dose, 17/50; high dose, 9/50). Most of these early deaths occurred during the last 16 weeks of the study; the survival at week 86 was considered average (control, 36/50; low dose, 39/50; mid dose, 37/50; high dose, 33/50). There was an unusually high incidence of advanced mononuclear cell leukemia in all groups of male rats (control, 34/50; low dose, 26/50; mid dose, 32/50; high dose, 35/50). The leukemia may have contributed to the early deaths. The survival of female rats exposed at 4,000 ppm was reduced (control, 30/50; low dose, 22/50; mid dose, 22/50; high dose, 15/50), and there was an increase in the incidence of leukemia in the 2,000-ppm and 4,000-ppm groups (control, 17/50; low dose, 17/50; mid dose, 23/50; high dose, The advanced leukemia, which may 23/50).have reduced survival of high dose females, may have been due to administration of dichloromethane. In light of the unusually high incidence of leukemia in all groups of males, it is not possible to make an unequivocal conclusion concerning the relationship between dichloromethane exposure and the marginally increased incidence of the disease in the mid dose and high dose female rats. Body weights for dosed male and female rats were comparable to those of chamber controls.

In mice, the survival of dosed males and high dose females was reduced relative to that of the chamber controls (see Table 22 and Figure 4). This reduced survival may have been because of the high incidences of liver and lung neoplasia in dosed animals. Total deaths increased in a dose-related manner during the final 16 weeks (male: control, 4/43, 9%; low dose, 9/37, 24%; high dose, 12/33, 36%; female: control, 10/36, 28%; low dose, 15/41, 37%; high dose, 19/31, 61%). Final mean body weights of high dose male mice and dosed female mice were 10%-17% lower than those of the chamber controls. These differences in body weight occurred during the last 16 weeks of the studies.

## **Mammary Gland Effects in Rats**

The administration of dichloromethane produced increased incidences of mammary gland neoplasms in both male and female rats (male:

Reference	Route	Species	Strain	Concentration	Tumor Site
Burek et al. (1980, 1984)	Inhalation	Rat	Sprague-Dawley	0, 500, 1,500, 3500 ppm	Mammary gland (both sexes)
	Inhalation	Hamster	Syrian	0, 500, 1,500, 3,500 ppm	No reported effect
Nitschke et al. (1982)	Inhalation	Rat	Sprague-Dawley	0, 50, 200, 500 ppm	Mammary gland (females)
National Coffee Association (1982)	Drinking water	Rat	F344	0, 5, 50, 125, 250 mg/kg	No reported effects
National Coffee Association (1983)	Drinking water	Mouse	B6C3F <sub>1</sub>	0, 60, 125, 185, 250 mg/kg	No reported effects
Current studies	Inhalation	Rat	F344/N	0, 1,000, 2,000, 4,000 ppm	Mammary gland (both sexes)
	Inhalation	Mouse	B6C3F1	0, 2,000, 4,000 ppm	Liver and lung (both sexes)

TABLE 26. SUMMARY OF RESULTS OF TWO-YEAR STUDIES ON DICHLOROMETHANE

control, 0/50; low dose, 0/50; mid dose, 2/50; high dose, 5/50; female: control, 7/50; low dose, 13/50; mid dose, 14/50; high dose, 23/50). In addition, there was a marginal increase in the incidence of subcutaneous tissue fibromas in the region of the mammary chain in male rats (control, 1/50; low dose, 1/50; mid dose, 2/50; high dose, 4/50). Since these fibromas were all found in the axillary and inguinal areas, they probably arose from mammary tissue. The incidences of the combined mammary tumors were: control, 1/50; low dose, 1/50; mid dose, 4/50; high dose, 9/50. The historical incidences of mammary gland tumors in chamber control rats at the same laboratory are 1/100 in males and 17/99 in Throughout the Program, the hisfemales. torical incidences for animals receiving no treatment are 54/1,727 (3%) in males and 520/1,772 (29%) in females (Tables F4 and F11).

Burek et al. (1980, 1984) exposed Sprague-Dawley rats to dichloromethane at concentrations of 0, 500, 1,500, or 3,500 ppm for 6 hours per day, 5 days per week for 2 years (see Table 26). The Sprague-Dawley rat strain has control incidences of mammary gland tumors of 10% in males and 80% in females (Burek et al., 1984). This high background incidence in females makes it difficult to detect significant increases in the number of tumor-bearing animals in 2year studies. Burek et al. (1980, 1984) reported that the number of animals with mammary gland tumors was not increased by exposure to dichloromethane (male: control, 7/92; low dose, 3/95; mid dose, 7/95; high dose, 14/97; female; control, 79/96; low dose, 81/95; mid dose, 80/96; high dose, 83/97) but that all exposure concentrations increased the number of mammary gland tumors per mammary gland-tumor-bearing female (mean number of tumors per tumorbearing female: control, 2.1; low dose, 2.7; mid dose, 3.1; high dose, 3.5). The same effect, although less pronounced, was produced in male rats exposed at 1,500 or 3,500 ppm. Burek et al. (1984) reported no evidence of carcinogenicity of dichloromethane in Syrian golden hamsters (exposures up to 3,500 ppm for 2 years).

In a followup study, Nitschke et al. (1982) exposed Sprague-Dawley rats at 0, 50, 200, or 500 ppm for 6 hours per day, 5 days per week for 2 years (see Table 26). An increase in the number of mammary gland tumors per mammary gland-tumor-bearing female was observed at 500 ppm (control, 2.0; 50 ppm, 2.3; 200 ppm, 2.2; 500 ppm, 2.7). In male rats, no effects on the mammary gland were reported.

In 2-year drinking water studies (National Coffee Association, 1982, 1983), dichloromethane was made available to F344 rats (5-250 mg/kg per day) and B6C3F<sub>1</sub> mice (60-250 mg/kg per day) (see Table 26). This dosing regimen was not reported to be associated with neoplasia in either species; however, it is probable that the animals could have tolerated higher doses.

The increased incidences of mammary gland tumors in female rats in the present study are consistent with the findings of Burek et al. (1980, 1984) and of Nitschke et al. (1982). These observations in females lend support to the dichloromethane-associated increased incidences of mammary gland tumors and subcutaneous fibromas in male rats. The weight of the evidence for the mammary gland effect in male rats is considered to be less than that for female rats.

## Hepatic Effects in Rats

Burek et al. (1984) reported that inhalation of dichloromethane at 500-3,500 ppm by Sprague-Dawley rats produced minimal, nonproliferative changes in the liver. The reported changes included hemosiderosis, focal necrosis of hepatocytes, basophilic change (females only), and cytoplasmic vacuolization. These changes were also noted in the present inhalation studies and were accompanied by hepatocytomegaly in males and females, bile duct fibrosis in males, and granulomatous inflammation in females. In addition, dichloromethane exposure produced a positive trend in the incidence of hepatocellular neoplastic nodules or carcinomas (combined) in female rats (control, 2/50; low dose, 1/50; mid dose, 4/50; high dose, 5/50). The liver neoplasia may have been due to dichloromethane exposure.

## Other Effects in Rats

The incidence of mesotheliomas (originating primarily in the tunica vaginalis) was increased in male rats (control, 0/50; low dose, 1/50; mid dose, 4/50; high dose, 4/50). This increase is not considered to be related to the administration of dichloromethane because the concurrent control incidence was low relative to earlier inhalation studies conducted at this laboratory (4/100, 4%).

Dose-related increases in the incidences of squamous metaplasia of the nasal mucosal epithelium in female rats and suppurative inflammation of the nasal cavity in male rats were noted. The metaplasia and inflammation may have been due to irritant properties of dichloromethane. No nasal cavity neoplasms were observed.

Other neoplasms that occurred with marginally increased incidences in dosed groups of rats included adrenal gland pheochromocytomas and interstitial cell tumors of the testis in males (Table E1) and pituitary gland adenomas/carcinomas in both sexes (Tables E1 and E2). The increases in pituitary gland, adrenal gland, and testicular tumors were significant only by life table analyses, which are inappropriate for these generally nonlethal tumors. An exception occurred in low dose male rats, where the increase in pituitary gland adenomas was significant by both life table and incidental tumor tests, and the incidence was substantially above concurrent and historical controls. Similar increases, however, were not observed in mid dose and high dose male rats, and diagnostic differences between pituitary gland hyperplasia (reduced in low dose males) and adenomas can be slight. Therefore, none of these marginally increased incidences was considered compound related.

## **Pulmonary Effects in Mice**

Exposure to dichloromethane increased the incidences of alveolar/bronchiolar adenomas in both male and female mice (male: control, 3/50; low dose, 19/50; high dose, 24/50; female: control, 2/50; low dose, 23/48; high dose, 28/48) and carcinomas (male: control, 2/50; low dose, 10/50; high dose, 28/50; female: control, 1/50; low dose, 13/48; high dose, 29/48). The observed incidences of alveolar/bronchiolar neoplasia in the chamber control groups were lower than those reported for other chamber control groups at this laboratory and for untreated controls throughout the Program (Tables F14 and F18).

In addition to dose-related increases in the number of male and female mice with lung tumors, there were dose-related increases in the incidences of dosed animals bearing multiple lung tumors (Table 27). No chamber control animal had more than one lung tumor, whereas 38% of all dosed male mice and 42% of all dosed female mice had multiple lung tumors; in those mice with lung tumors, 38/67 (57%) dosed males and 40/71 (56%) dosed females had multiple lung tumors. Lung tumor multiplicity included both alveolar/bronchiolar adenomas and carcinomas (see Table 27). In cases of lung tumor multiplicity, it was not possible to differentiate definitively between multiple primary carcinomas and primary carcinomas with multiple intrapulmonary metastatic lesions. However, the presence of numerous cases of multiple adenomas (15/100 dosed males and 16/96 dosed females) suggests that some of the carcinomas were multiple primary lesions rather than metastatic lesions.

	1	Exposure Groups (pp	m)
Diagnoses	0	2,000	4,000
MALE	<b></b>		
One adenoma			
and one carcinoma	0/50	1/50	3/50
Multiple adenomas	0/50	5/50	4/50
Multiple carcinomas	0/50	3/50	12/50
Multiple adenomas			
and multiple carcinomas	0/50	0/50	3/50
One adenoma			
and multiple carcinomas	0/50	1/50	3/50
Multiple adenomas			
and one carcinoma	0/50	0/50	3/50
Incidence of mice with multiple tumors	0/50 (0%)	10/50 (20%)	28/50 (56%)
No. of mice with multiple tumors/			
no. of mice with pulmonary tumors	0/5 (0%)	10/27 (37%)	28/40 (70%)
FEMALE			
One adenoma			
and one carcinoma	0/50	2/48	4/48
Multiple adenomas	0/50	4/48	5/48
Multiple carcinomas	0/50	1/48	8/48
Multiple adenomas			
and multiple carcinomas	0/50	0/48	2/48
One adenoma			
and multiple carcinomas	0/50	2/48	7/48
Multiple adenomas			
and one carcinoma	0/50	2/48	3/48
Incidence of mice with multiple tumors	0/50 (0%)	11/48 (23%)	29/48 (60%)
No. of mice with multiple tumors/			
no. of mice with pulmonary tumors	0/3 (0%)	11/30 (37%)	29/41 (71%)

# TABLE 27. MULTIPLICITY OF PULMONARY TUMORS IN MICE EXPOSED TO<br/>DICHLOROMETHANE

## **Hepatic Effects in Mice**

Dichloromethane produced cytologic degeneration of the liver in both male and female mice; this change was not observed in chamber control animals (Tables D1 and D2). Exposure to dichloromethane increased the incidence of hepatocellular carcinomas and of adenomas or carcinomas (combined) in male mice exposed to dichloromethane at 4,000 ppm (see Table 24). In female mice, dichloromethane produced doserelated increases in the incidences of both hepatocellular adenomas and hepatocellular carcinomas (see Table 24). The incidences of these tumors in the chamber control group were consistent with historical control incidences at this laboratory and in the overall Program (Table F19).

As was the case for lung tumors in mice, multiplicity of hepatocellular tumors in dichloromethane-exposed male and female mice was common (Table 28). The incidence of animals with multiple hepatocellular tumors was increased in both males and females in a doserelated manner (male: control, 2/50; low dose, 11/49; high dose, 16/49; female: control, 0/50; low dose, 3/48; high dose, 28/48). Hepatocellular tumor multiplicity was found in 4% of the male chamber control mice and in none of the female chamber controls, whereas 28% of all exposed males and 32% of all exposed females had multiple liver tumors. In the chamber control groups, 2/22 (9%) hepatocellular tumor-bearing males and 0/3 (0%) hepatocellular tumorbearing females had multiple liver tumors. In contrast, 27/57 (47%) liver tumor-bearing

#### TABLE 28. MULTIPLICITY OF LIVER TUMORS IN MICE EXPOSED TO DICHLOROMETHANE

	Ex	posure Groups (p	om)
Diagnoses	0	2,000	4,000
1ALE			
One adenoma			
and one carcinoma	1/50	2/49	3/49
Multiple adenomas	0/50	3/49	3/49
Multiple carcinomas	1/50	3/49	6/49
Multiple adenomas			
and multiple carcinomas	0/50	0/49	1/49
One adenoma			
and multiple carcinomas	0/50	0/49	2/49
Multiple adenomas			
and one carcinoma	0/50	3/49	1/49
ncidence of mice with multiple tumors	2/50 (4%)	11/49 (22%)	16/49 (33%)
No. of mice with multiple tumors/			
no. of mice with liver tumors	2/22 (9%)	11/24 (46%)	16/33 (48%)
FEMALE			
Dne adenoma			
and one carcinoma	0/50	1/48	6/48
Multiple adenomas	0/50	0/48	4/48
Multiple carcinomas	0/50	2/48	10/48
Multiple adenomas			
and multiple carcinomas	0/50	0/48	3/48
Dne adenoma			
and multiple carcinomas	0/50	0/48	1/48
Aultiple adenomas	A 17 A		
and one carcinoma	0/50	0/48	4/48
ncidence mice with multiple tumors	0/50 (0%)	3/48 (6%)	28/48 (58%)
lo. of mice with multiple tumors/			
no. of mice with liver tumors	0/3 (0%)	3/16 (19%)	28/40 (70%)

dichloromethane-exposed males and 31/56 (55%) liver tumor-bearing exposed females had hepatocellular tumor multiplicity.

In earlier studies, the National Coffee Association (1983) found no association between dichloromethane administration and liver tumors in mice (see Table 26). In the studies conducted by Burek et al. (1984) and by Nitschke et al. (1982), mice were not used as experimental animals.

## **Other Effects in Mice**

Increased incidences of testicular atrophy in males and ovarian and uterine atrophy in females were detected in dichloromethaneexposed mice. These changes may be secondary to the extensive lung and liver neoplasia produced by the inhalation exposures.

An increase in the incidence of hemangiomas or hemangiosarcomas (combined) was detected in high dose male mice (control, 2/50; low dose, 2/50; high dose, 6/50). Five of the six tumors in the high dose group were hemangiosarcomas of the liver. The apparent increase in hemangiosarcomas was not considered to be clearly compound related.

## Salivary Glands

Burek et al. (1984) reported an increased incidence of sarcomas in the ventral neck region (in or around the salivary glands) in male rats exposed to dichloromethane at 1,500 or 3,500 ppm. These authors speculated that exposure to dichloromethane in combination with an early infection of sialodacryoadenitis may have caused these lesions. In the present studies, there was no evidence of dichloromethane-related anomalies of the salivary glands in either sex of either species.

Conclusions: Under the conditions of these inhalation studies, there was some evidence of carcinogenicity<sup>\*</sup> of dichloromethane for male F344/N rats as shown by an increased incidence of benign neoplasms of the mammary gland. There was clear evidence of carcinogenicity of dichloromethane for female F344/N rats as shown by increased incidences of benign neoplasms of the mammary gland. There was clear evidence of carcinogenicity of dichloromethane for male and female B6C3F<sub>1</sub> mice, as shown by increased incidences of alveolar/bronchiolar neoplasms and of hepatocellular neoplasms.

<sup>\*</sup>Categories of evidence of carcinogenicity are defined in the Note to the Reader on page 2.

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Dichloromethane, NTP TR 306
#### **APPENDIX** A

# SUMMARY OF THE INCIDENCE OF NEOPLASMS IN RATS IN THE TWO-YEAR INHALATION STUDIES OF DICHLOROMETHANE

### TABLE A1. SUMMARY OF THE INCIDENCE OF NEOPLASMS IN MALE RATS IN THE TWO-YEAR INHALATION STUDY OF DICHLOROMETHANE

CO	NTRO	L (CHAMB)	LO	W DOSE	MI	D DOSE	HIG	H DOSE
ANIMALS INITIALLY IN STUDY	50		50	<u></u>	50		50	
ANIMALS NECROPSIED	50		50		50		50	
ANIMALS EXAMINED HISTOPATHOLOG	50		50		50		50	
NTEGUMENTARY SYSTEM				*****		· · · · · · · · · · · · · · · · · · ·		
*Skin	(50)		(50)		(50)		(50)	
Papilloma, NOS	4	(8%)				(2%)		
Basal cell carcinoma				(2%)		(2%)		
Trichoepithelioma		(2%)	2	(4%)	1	(2%)		
Sebaceous adenocarcinoma		(2%)	•	(101) 1			•	(00)
Keratoacanthoma		(4%)		(4%)‡	(50)			(6%)
*Subcut tissue	(50)		(50)		(50)		(50)	(901)
Sarcoma, NOS Fibroma	1	(2%)	1	(2%)	9	(4%)		(2%) (8%)
Neurilemoma, malignant	1	(270)	T	(270)	4	(470)		(2%)
							1 	(2%)
RESPIRATORY SYSTEM	/							
#Lung	(50)	(0~)	(49)		(50)	(0~)	(50)	
Alveolar/bronchiolar adenoma	1	(2%)		(90)		(2%)	-	(0/1)
Alveolar/bronchiolar carcinoma			1	(2%)		(2%)	1	(2%)
Pheochromocytoma, metastatic				(94)	1	(2%)		
Osteosarcoma, metastatic			1	(2%)				
HEMATOPOIETIC SYSTEM								
*Multiple organs	(50)		(50)		(50)		(50)	
Leukemia, mononuclear cell		(68%)		(52%)		(64%)		(70%)
#Spleen	(50)		(49)	(0.27)	(50)		(50)	
Sarcoma, NOS			1	(2%)				(00)
Mesothelioma, invasive			1	(90)			1	(2%)
Malignant lymphoma, NOS			I	(2%)	·		····	
CIRCULATORY SYSTEM None								
DIGESTIVE SYSTEM								
#Liver	(50)		(49)		(50)		(50)	
Neoplastic nodule				(4%)		(4%)		
Hepatocellular carcinoma		(4%)		(2%)		(4%)		(2%)
*Rectum	(50)		(50)		(50)	(00)	(50)	
Carcinoma, NOS						(2%)		
Neurofibrosarcoma					1	(2%)		
JRINARY SYSTEM								
#Urinary bladder	(50)		(47)		(50)		(48)	(0 <b>~</b> )
Mesothelioma, invasive							1	(2%)
ENDOCRINE SYSTEM								
#Anterior pituitary	(50)		(47)		(49)		(49)	
Carcinoma, NOS				(2%)			<b>.</b> .	
Adenoma, NOS		(40%)		(66%)		(55%)		(49%)
#Adrenal	(50)		(50)	(0~)	(50)		(50)	
Neoplasm, NOS				(2%)				
#Adrenal medulla	(50)	(100)	(50)	(990)	(50)	(900)	(50)	(90.00)
Pheochromocytoma Bhasabaanaaytamaa malignaat	5	(10%)	11	(22%)		(20%)	10	(20%)
Pheochromocytoma, malignant					1	(2%)		
Ganglioneuroma							0	(4%)

	CONTRO	L (CHAMB)	LO	W DOSE	MI	D DOSE	HIG	H DOSE
ENDOCRINE SYSTEM (Continued)	<u> </u>							
#Thyroid	(49)		(48)		(49)		(50)	
Neoplasm, NOS			1	(2%)			,	
Follicular cell adenoma							1	(2%)
Follicular cell carcinoma			1	(2%)	2	(4%)		
C-cell adenoma	1	(2%)	3	(6%)	6	(12%)	2	(4%)
C-cell carcinoma	1	(2%)	1	(2%)	1	(2%)		
#Pancreatic islets	(48)		(46)		(48)		(48)	
Islet cell adenoma	3	(6%)	6	(13%)	2	(4%)	2	(4%)
Islet cell carcinoma			1	(2%)				
REPRODUCTIVE SYSTEM								
*Mammary gland	(50)		(50)		(50)		(50)	
Adenoma, NOS	(00)		(00)		(00)			(2%)
Fibroadenoma					2	(4%)		(8%)
*Preputial gland	(50)		(50)		(50)	( = /0 /	(50)	(0,0)
Carcinoma, NOS	()	(6%)		(2%)		(6%)		(4%)
Adenoma, NOS	Ŭ	(* /* /	-		5	(0,0)	2	
#Testis	(50)		(49)		(50)		(50)	(4,0)
Interstitial cell tumor	(/	(78%)		(76%)	/	(82%)		(86%)
NERVOUS SYSTEM #Brain Carcinoma, NOS, invasive	(50)		(50)	(2%)	(50)		(49)	
SPECIAL SENSE ORGANS *External ear	(50)	· · · · · · · · · · · · · · · · · · ·	(50)		(50)	<u> </u>	(50)	
Papilloma, NOS	(00)		,	(2%)	(00)		(00)	
*Ear canal	(50)		(50)	(2,10)	(50)		(50)	
Carcinoma, NOS	(00)		(00)		(	(2%)	(00)	
*Zymbal gland	(50)		(50)		(50)	(210)	(50)	
Carcinoma, NOS	(/	(2%)	·	(4%)	,	(2%)		(4%)
MUSCULOSKELETAL SYSTEM	<u>,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,</u>							
*Femur	(50)		(50)		(50)		(50)	
Osteosarcoma	(00)		1 /	(2%)	(00)		(00)	
Usteosarcoma			۱ 	(270)		<u></u> _		
BODY CAVITIES								
*Peritoneal cavity	(50)		(50)		(50)		(50)	
Fibrosarcoma			1	(2%)				
Liposarcoma		(2%)						
*Tunica vaginalis	(50)		(50)		(50)		(50)	
Mesothelioma, NOS			-	(	4	(8%)		(2%)
Mesothelioma, malignant			1	(2%)			3	(6%)

# TABLE A1. SUMMARY OF THE INCIDENCE OF NEOPLASMS IN MALE RATS IN THE TWO-YEAR INHALATION STUDY OF DICHLOROMETHANE (Continued)

	CONTROL (CHAMB)	LOW DOSE	MID DOSE	HIGH DOSE
ALL OTHER SYSTEMS				
*Multiple organs	(50)	(50)	(50)	(50)
Mesothelioma, NOS			1 (2%)	
Mesothelioma, malignant		1 (2%)		
Mesothelioma, invasive		1 (2%)		1 (2%)
Lower leg				
Osteosarcoma			1	
Osteosarcoma, invasive		1		
Omentum				
Mesothelioma, invasive				1
ANIMAL DISPOSITION SUMMARY	<u> </u>			
Animals initially in study	50	50	50	50
Natural death	4	7	2	10
Moribund sacrifice	30	27	31	31
Terminal sacrifice	16	16	17	9
ſUMOR SUMMARY	·····	·····		·····
Total animals with primary tumors**	50	50	50	49
Total primary tumors	120	141	148	145
Total animals with benign tumors	47	46	49	47
Total benign tumors	77	95	93	98
Total animals with malignant tumors	39	33	40	<b>4</b> 0
Total malignant tumors	43	42	48	40
Total animals with secondary tumors#		42 3	40 1	40 3
Total secondary tumors	T	3	1 1	3
Total animals with tumors uncertain		-	L	*
benign or malignant		A	7	1
Total uncertain tumors		4	7	1

#### TABLE A1. SUMMARY OF THE INCIDENCE OF NEOPLASMS IN MALE RATS IN THE TWO-YEAR INHALATION STUDY OF DICHLOROMETHANE (Continued)

\* Number of animals necropsied
\*\* Primary tumors: all tumors except secondary tumors
# Number of animals with tissue examined microscopically
## Secondary tumors: metastatic tumors or tumors invasive into an adjacent organ

‡ Multiple occurrence of morphology in the same organ; tissue is counted once only.

TABLE A2.	SUMMARY OF	THE INCIDENCE	<b>OF NEOPLASM</b>	S IN FEMALE	RATS IN THE	TWO-YEAR
		INHALATION ST	TUDY OF DICHI	<b>OROMETHAN</b>	IE	

CO	)NTRO	L (CHAMB)	LO	W DOSE	MI	D DOSE	HIG	H DOSE
ANIMALS INITIALLY IN STUDY	50		50		50			
ANIMALS NECROPSIED	50		50		50		50	
ANIMALS EXAMINED HISTOPATHOLOG			50		50		50	
NTEGUMENTARY SYSTEM								
*Skin	(50)		(50)		(50)		(50)	
Papilloma, NOS	1	(2%)			1	(2%)		
Keratoacanthoma							1	(2%)
*Subcut tissue	(50)		(50)		(50)		(50)	
Sarcoma, NOS							1	(2%)
Fibroma					2	(4%)		
Lipoma							1	(2%)
RESPIRATORY SYSTEM								
*Larynx	(50)		(50)		(50)		(50)	
C-cell carcinoma, invasive	/**							(2%)
#Trachea	(50)		(48)		(49)		(46)	(00)
C-cell carcinoma, invasive	(50)		(		(50)			(2%)
#Lung Alveolar/bronchiolar adenoma	(50)	(2%)	(50)		(50)		(50)	
Alveolar/bronchiolar adenoma	1	(270)	1	(2%)				
Follicular cell carcinoma, metas				(2%)				
C-cell carcinoma, metastatic			T	(270)			1	(2%)
Pheochromocytoma, metastatic			1	(2%)			1	(270)
Endometrial stromal sarcoma, metas			-	(4,0)			1	(2%)
Osteosarcoma, metastatic								(2%)
		<u></u>		<u></u>				
HEMATOPOIETIC SYSTEM	(50)		(50)		(50)		(50)	
*Multiple organs	(50)		(50)		(50)		(50)	(90)
Malignant lymphoma, NOS	177	(9.40)	17	(940)	00	(46%)		(2%)
Leukemia, mononuclear cell		(34%)		(34%)		(40%)		(46%)
#Bronchial lymph node	(49)		(49)		(50)		(50)	(90)
Endometrial stromal sarcoma, metas	(01)		(00)		(24)			(2%)
#Thymus	(31)	(00)	(39)		(34)		(31)	
Thymoma, benign		(3%)			<b></b>			
CIRCULATORY SYSTEM	,				/		,	
*Subcut tissue	(50)		(50)		(50)		(50)	(90)
Hemangiosarcoma #Uport	(50)		(20)		(40)			(2%)
#Heart Adenocarcinoma, NOS, metastatic	(50)		(50)	(2%)	(48)		(50)	
*Vagina	(50)		(50)	(470)	(50)		(50)	
Hemangioma		(2%)	(00/		(00)		(00)	
- TOHRWPIANG	<b>_</b>	<u></u>						···
DIGESTIVE SYSTEM								
#Liver	(50)		(50)	(0~)	(50)		(50)	(100)
Neoplastic nodule	2	(4%)	1	(2%)		(6%)	5	(10%)
Hepatocellular carcinoma					1	(2%)		·
JRINARY SYSTEM			-					
#Kidney Mixed tumor, benign	(50)		(50)	(00)	(50)		(49)	
Mixed Lumor, benign			1	(2%)				

	CONTRO	L (CHAMB)	LO	W DOSE	MI	D DOSE	HIG	H DOSE
ENDOCRINE SYSTEM	<u> </u>				<u>.</u> ,		<u></u>	
#Pituitary	(49)		(49)		(49)		(49)	
Neoplasm, NOS	(10)			(2%)	(10)		(,	
Craniopharyngioma	1	(2%)	_	(=,				
#Anterior pituitary	(49)		(49)		(49)		(49)	
Carcinoma, NOS		(2%)				(4%)	()	
Adenoma, NOS		(49%)	30	(61%)		(51%)	25	(51%)
#Adrenal	(50)		(50)		(49)		(49)	
Cortical adenoma						(2%)		
Cortical carcinoma			1	(2%)				
#Adrenal medulla	(50)		(50)		(49)		(49)	
Pheochromocytoma	2	(4%)	1	(2%)	4	(8%)	1	(2%)
Pheochromocytoma, malignant		· · · ·		(4%)				
#Thyroid	(47)		(46)	( =,	(48)		(42)	
Follicular cell adenoma	(,		(,			(2%)	、- <b>-</b> ,	
Follicular cell carcinoma			1	(2%)		(2%)		
C-cell adenoma	2	(4%)	•	,		(8%)	9	(5%)
C-cell carcinoma		(6%)				(4%)	-	(5%)
#Pancreatic islets	(50)	(3.4)	(48)		(50)	()	(46)	,
Islet cell adenoma		(6%)	(10)		(00)		(10)	
REPRODUCTIVE SYSTEM						•		
*Mammary gland	(50)		(50)		(50)		(50)	
Carcinoma, NOS	(00)		(00)			(2%)	(00)	
Adenoma, NOS					-	(2.0)	1	(2%)
Adenocarcinoma, NOS	1	(2%)	9	(4%)	1	(2%)	•	(2,2)
Mixed tumor, malignant		(2%)	~	(4,0)	•	(2,0)		
Fibroadenoma		(10%)	11	(22%)	13	(26%)	22	(44%)
*Clitoral gland	(50)	(10,0)	(50)	(22.0)	(50)	(20.6)	(50)	(4470)
Carcinoma, NOS	,	(2%)		(4%)		(4%)	. ,	(4%)
Cystadenoma, NOS	•	(2.10)	-	(4,0)	4	(4.0)		(2%)
#Uterus	(50)		(49)		(50)		(47)	(2,0)
Endometrial stromal polyp		(14%)	· - •	(18%)		(14%)	. ,	(13%)
Endometrial stromal sarcoma	•	(140)		(6%)		(2%)		(4%)
#Ovary	(49)		(50)		(50)	(2,0)	(48)	(470)
Granulosa cell tumor		(4%)	(00)		(00)		(40)	
Sarcoma, NOS	2	(=,0)	1	(2%)				
VERVOUS SYSTEM		·······				<u> </u>		
#Cerebrum	(50)		(50)		(50)		(50)	
Carcinoma, NOS, invasive		(2%)	(00)			(2%)	(00)	
Oligodendroglioma						(2%)		
SPECIAL SENSE ORGANS			• • • • • • • • • • • • • • • • • • • •					
*Eye	(50)		(50)		(50)		(50)	
Neurofibroma						(2%)	<b>x</b> == <b>/</b>	
MUSCULOSKELETAL SYSTEM								
*Skull	(50)		(50)		(50)		(50)	
Osteosarcoma				(2%)				
*Sternum	(50)		(50)		(50)		(50)	
Osteosarcoma, invasive			7					(2%)
*Rib	(50)		(50)		(50)		(50)	
Osteosarcoma					/			(2%)
*Skeletal muscle	(50)		(50)		(50)		(50)	
Neurofibroma						(2%)	· ·	

### TABLE A2. SUMMARY OF THE INCIDENCE OF NEOPLASMS IN FEMALE RATS IN THE TWO-YEARINHALATION STUDY OF DICHLOROMETHANE (Continued)

С	ONTROL (CHAMB)	LOW DOSE	MID DOSE	HIGH DOSE
BODY CAVITIES				<del></del>
*Peritoneum	(50)	(50)	(50)	(50)
Mesothelioma, malignant				1 (2%)
ALL OTHER SYSTEMS				
*Multiple organs	(50)	(50)	(50)	(50)
Sarcoma, NOS, metastatic		1 (2%)		
Endometrial stromal sarcoma, invas	ive		1 (2%)	1 (2%)
Mesothelioma, metastatic				1 (2%)
ANIMAL DISPOSITION SUMMARY				
Animals initially in study	50	50	50	50
Natural death	5	6	5	11
Moribund sacrifice	15	22	23	24
Terminal sacrifice	30	22	22	15
TUMOR SUMMARY				
Total animals with primary tumors**	41	46	48	48
Total primary tumors	76	85	98	99
Total animals with benign tumors	33	39	40	34
Total benign tumors	47	52	60	60
Total animals with malignant tumors	21	29	29	32
Total malignant tumors	24	31	35	34
Total animals with secondary tumors##	£ 1	4	2	4
Total secondary tumors	1	4	2	9
Total animals with tumors uncertain				
benign or malignant	5	1	3	5
Total uncertain tumors	5	2	3	5

### TABLE A2. SUMMARY OF THE INCIDENCE OF NEOPLASMS IN FEMALE RATS IN THE TWO-YEAR INHALATION STUDY OF DICHLOROMETHANE (Continued)

\* Number of animals necropsied
\*\* Primary tumors: all tumors except secondary tumors
# Number of animals with tissue examined microscopically
## Secondary tumors: metastatic tumors or tumors invasive into an adjacent organ

ANIMAL	0	<u> 0</u>	OF	0	0	0	<u>ה</u>	O	0F	N	0	0	O.	TOT	TO	a	01	Ö	Ō	0	OI.	Ō	0	<u>0</u>	0
NUMBER	26	14	3	3 5	34	1	4	50	4 8	i i	3	42	4	27	0 7	13	0	39	05	1	4	2 9	04	0 9	1 2
WEEKS ON STUDY	0 5 7	0 6 5	0 6 7	0 7 0	0 7 3	0 7 5	0 7 5	0 7 7	0 8 1	0 8 5	0 8 5	0 8 5	0 8 5	0 8 6	0 8 7	0 9 0	0 9 1	0 9 1	092	0 9 2	0 9 2	0 9 4	0 9 5	0 9 5	0 9 6
INTEGUMENTARY SYSTEM Skin							-		+					_						_	-			 	-
Papilloms, NOS Trichospithelioma Sebaceous adenocarcinoma Keratoacanthoma Subcutaneous tissue	+	+	+	+	+	+	+	+	+	+	+	+	+	+	т х +	+	+	+	+	+	+	+	+	+	+
Fibroma								_																_	_
RESPIRATORY SYSTEM Lungs and bronchi Alveolar/bronchiolar adenoma Trachea	+	++	++	+	++	+ +	++	++	+ +	++	++	+ +	++	+ +	+ +	+ +	+ +	++	+ +						
HEMATOPOIETIC SYSTEM Bone marrow Spieen Lymph nodes Thymus	+++-	+++-	++++	+++ -	++++	++++	++++	+++-	++++	++++	+++-	++++	++++	++++	++++	+++-	++++	+++ -	++++	++++	+++-	+++-	++++-	++++	++++
CIRCULATORY SYSTEM Heart	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+
DIGESTIVE SYSTEM Salivary gland Liver Hepatocellular carcinoma Bile duct	+++++	+++++	+++	+++++	+ + +	++ +	+++++	+++++	++++++	+ + +	++++	+++++	++++++	++x+N	+++++	++**	-++	+++++	++ +	++ +	+++++	+++++	++ +	++ +	++++++
Gallbladder & common bile duct Pancreas Esophagus Stomach	N + + +	N + + +	N + + +	N + + +	N + + +	N - + +	N - + +	N + + +	N + + +	N + + +	N + + +	N + + +	N + - +	N + + +	N + + +	N+++	Z+++	N + + +	N+++	N+++	N+++	N + + +	N+ i +	N + + +	Z + + +
Small intestine Large intestine	+++	++	+ +	++	+++	+	++	++	+ +	++	++++	+ +	+	++	+++	+++	++	++	+ +	++	+ +	+ -	+ +	+ +	+
URINARY SYSTEM Kidney Urinary bladder	++	++	++	+++	++	++	+++	+++	++	+++	++	+ +	+ +	+++	+++	++	++	+++	+++	+++	++	++	+ + +	++++	- +
ENDOCRINE SYSTEM Pituitary Adenoma, NOS Adrenai	+	++	++	* *	++	+ x +	+++	+++	+++	* *	++	* *	++	**	+++	+ x +	++	+ x +	++	+++	++	* *	+ +	+++	+++++
Pheochromocytoms Thyroid C-cell adenoms C-cell carcinoma	+	+	+	+	+	X +	+	+	*	+	+	+	~	+	+	+	+	+	+	+	+	+	+	+	+
Parathyroid Pancreatic ialets Islet cell adenoma	+ +	Ŧ	++	++	+	+ ~	+ -	Ŧ	-+	+++	Ŧ	÷	÷	+++	+	++	+ +	+	+ +	+ +	+ * X	Ŧ	+	Ŧ	+
REPRODUCTIVE SYSTEM Mammary gland Testis Interstitial cell tumor	+++	+ + * ×	++	N +	N + X	N +	N + X		N + X	+ + *	N + X	N X	N + X	N +	N + X	+ +	+++	N +	N + X	N + X	+ + x	N +	+ + X	N + X	+ + X
Prostate Preputal/clitoral gland Carcinoma, NOS	+ N	4 + N	+ N	+ N	4 N	+ N	A + N	+	+	Â N	A + N	+	+	ที	+	+ N	+ N X	+ N	A + N	+	A + N	+ N	+	N	+1
NERVOUS SYSTEM Brain	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	-
SPECIAL SENSE ORGANS Zymbal gland Carcineme, NOS	N	N	N	N	N	N	ż	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N
BODY CAVITIES Peritoneum Liposarcoma	N	N X	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	- N
ALL OTHER SYSTEMS Multiple organs NOS Louizemia, monopulser coli	N X	N	N X	N	N X	N	N	N	N X	N	N	N X	N X	N X	N	N X	N X	- N X							

TABLE A3. INDIVIDUAL ANIMAL TUMOR PATHOLOGY OF MALE RATS IN THE TWO-YEAR INHALATION STUDY OF DICHLOROMETHANE: UNTREATED CONTROL

÷ ;

Tissue Examined Microscopically Required Tissue Net Examined Microscopically Tussee Incidence Necropsy, No Autolysis, No Microscopic Examination Animal Missexed Multiple Occurrence of Morphology

XNS:

No Tissue Information Submitted Neuropsy, No Histology Due To Pretocol Autolymin Animal Minesing No Neuropsy Performed :

C: A: M: B:

,

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ANIMAL NUMBER	0	0	0	Ģ	Q	ð	Q	0	9	Ŋ	Ŋ	0	Q	9	9	g	Ŋ	g	ğ	Ø	0	õ	9	<u>o</u>	0	Т
NUMBER	1 5	7	1	i	1	4	2 5	6	0	02	3	0 6	8	ő	6	0	2	3	8	0	3	7	3	5	<b>9</b>	TOTAL
WEEKS ON Study	0 9 6	0 9 6	0 9 8	099	1 0 1	1 0 2	1 0 2	102	1 0 3	104	1 0 4	104	104	104	104	104	104	104	104	104	104	104	104	104	104	TISSUES TUMORS
INTEGUMENTARY SYSTEM		+	+	+	+	+	+	+	+	N	+	+	+	+	+	+	+	+	+	+	+	+	+		_ _	*50
Papilloma, NOS Trichoepithelioma Sebaceous adenocarcinoma			x	x		X		•	×.	••	•	•	•	•		•	•	•	x 	•	•	•	•	•		4
Keratoscanthoms Subcutaneous tissue Fibroms	+	+	+	+	+	+	+	+	+	N	+	+	+	+	+	+	+	+	X +	+	*	+	+	+	¥ +	*50 1
RESPIRATORY SYSTEM Lungs and bronchi Alveolar/bronchiolar adenoma Traches	+	+ +	+ +	++	+ +	+ +	++	+ +	++	++	+ +	+	+ +	++	++	+ +	++	++	+++	++	++	* *	++	++	+++	50 1 50
HEMATOPOIETIC SYSTEM Bone marrow	-	+	+	 	+	+		+	-				+	-		+		+	+	-			-	-	_	50
Spleen Lymph nodes Thymus	+	++-	++-	÷+ + -	++-	+ + +	++++	++-	++++	·+++	÷ + +	+ + + +	·+++	.+++	·+++	++++	+++-	÷+ + -	÷+++	÷ + +	.+ ++ +	÷ + + +	;+ + -	·+++	+ + +	50 50 31
CIRCULATORY SYSTEM Heart	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	50
DIGESTIVE SYSTEM Salivary gland Liver	+++	+++	+	+	++	++	++	+++	+++	++	++	+	+++	++	++	+	+++	++	+++	+++	+	++	++	+++	+	49 50
Hepatocellular carcinoma Bile duct	+	±	÷	+	<u>+</u>	+	+	<u>+</u>	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	2 50
Gallbladder & common bile duct Pancreas	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 +	50 *50 48 43 50
Esophagus Stomach Small intestine	+++++	++++	Ŧ	+++	+++-	Ŧ	+++	+++	+++	+++	+++	+++	+++	+	+++	+++	+++	+++	Ŧ	+++	+++	+++	÷	+++	Ŧ	43 50 49
Large intestine	Ŧ	Ŧ	Ŧ	Ŧ	Ŧ	÷	÷	Ŧ	÷	÷	Ŧ	+++	÷	+++	++	+++	++	+	÷	÷	Ŧ	+	+	÷	++	49
URINARY SYSTEM Kidney Urinary bladder	+++	+++	++	++	++	+++	+++	+++	+++	++	++	++	+++	++	+++	++	++	+++	+++	++	++	++	+++	+	+	50 50
ENDOCRINE SYSTEM									·							-						<u> </u>				
Pituitary Adenoma, NOS Adrenal	x	+	Ţ	Ţ	÷	x	× ×	+	× +	+	Ţ	+ x +	Ť.	+	•	+	ŤX +	Ţ	x +	Ť,	x +	+ x +	x ¥		+	50 20 50
Pheochromocytoma Thyroid	Ţ	Ī	Ī	Ţ	Ţ	Ī	ž	Ī	ž	Ţ	Ţ	Ţ	Ī	ž	Ī	Ţ	Ţ	Ţ	Ī	Ĭ	Ţ	Ţ	Ī	Ī	Ť	5 49
C-cell adenoma C-cell carcinoma	+	x	Ŧ	Ŧ	Ŧ	*	Ŧ	•	Ŧ	Ŧ	Ŧ	-	•	Ť	Ŧ	Ŧ	Ŧ	т	Ŧ	Ŧ	Ŧ	Ŧ	Ŧ	T	Ŧ	1
Parathyroid Pancreatic islets Islet cell adenoma	+ +	+ +	+	++	+++	+ +	+ +	+ +	+ +	+ +	+ +	- +	Ŧ	+ +	+ +	<del>-</del> +	- + X	+++	+ +	- *	++	+	+	-+	+ +	29 48 3
REPRODUCTIVE SYSTEM Mammary gland	+	+	+	+	+	+	N	+	N	N	+	+	N	N	+	N	+	+	+	+	N	+		N	+	*50
Testis Interstitial cell tumor Prostate	*	* *	*	*	* *	+ x +	* *	* *	*	* *	* *	* *	* *	* *	* *	* *	*	* *	*	*	+	+	* *	+ X +	*	50 39 44
Preputial/clitoral gland Carcinoma, NOS				Ň			Ň		N	Ň		N X		N X			N	Ň	Ň	Ň	Ň	Ň			Ň	*50 3
NERVOUS SYSTEM Brain	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	50
SPECIAL SENSE ORGANS Zymhel gland Careinoma, 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	*50 1
BODY CAVITIES Peritoneum Liposarcoma	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	*50
ALL OTHER SYSTEMS Multiple organs NOS Leukemia, mononuclear cell	N X	N X	N X	N X	N X	N X	N X	N X	N X	N	N X	N	N X	N	N X	N	N X	N	N X	N X	N	N	N	N X	N X	*50 34

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

\* Animals Necropsied

							U							••				~				0.			
ANIMAL NUMBER	0 2 2	0 4 9	0 0 8	0 3 2	0 3 7	0 2 8	0 0 1	0 4 1	0 4 5	006	0 4 8	0 2 5	002	0 3 3	0 5 0	026	0 3 5	0 1 3	0 2 1	0 2 7	0 3 1	020	030	009	0 1 1
WEEKS ON STUDY	0 6 2	0 6 2	0 6 7	0 6 7	069	0 7 2	0 7 5	082	0 8 2	084	0 8 6	0 8 7	088	0 8 9	089	090	0 9 1	0 9 2	0 9 2	0 9 2	0 9 3	0 94	0 9 5	0 9	0 9 7
INTEGUMENTARY SYSTEM Skin Basal cell carcinoma	+	* *	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	N
Trichoepithelioma Keratoacanthoma Subcutaneous tissue Fibroma	+	• +	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	X. +	@_+	+	+	+	N
RESPIRATORY SYSTEM Lungs and bronchi Alveolar/bronchiolar carcinoma Osteosarcoma, metastatic Traches	+ x	+	+	-	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+
HEMATOPOIETIC SYSTEM Bone marrow Spleen	+	++	+ +		+	+++		+++	++	+	+++	+++	++	++	+++	+++	+ +	++	+++	++	+	+ +	+	+ +	_ ++
Sarcoma, NOS Malignant lymphoma, NOS Lymph nodes Thymus	+	-	+ -	x -	+ -	X + +	+ -	+ -	+++	+ +	+ +	+++	+++	+++	+ +	+++	+	+++	+++	+++	+ +	+ +	+ +	+++	++
CIRCULATORY SYSTEM Heart	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+
DIGESTIVE SYSTEM Salivary gland Liver	+		++	+	+	Ŧ	+	+	++	+	++	+	+	+++	+++	++	+	+	++	+++	‡	+	+	+	+
Neoplastic nodule Hepatocellular carcinoma Bile duct Gallbladder & common bile duct Pancrees Esophagus Stomach Small intestine	+2++++	+2++++	+ + + + Z + + + + +	12111	+2    +	+ 2 + + + +	+z  +++	+2++++	+ 2 1 1 + 1	+2++++	+2++++	+2++++	X +N++++	+2++++	+2++++	+2++++	+2++++	+2++++	+ + + + + + + + + + + + + + + + + + + +	+z+++	+2++++	+2++++	+2++++	+z++++	+2++++
Large intestine URINARY SYSTEM Kidney Urinary bladder	+	+ + +	++++	+	+	++++	+++	+++++++++++++++++++++++++++++++++++++++	+	+++	++++	+++	++++	+++	+++	++++	+ + +	+++	+++	+++	+ + + +	+ + +	+++	+++	+ - ++
ENDOCRINE SYSTEM Pituitary Carcinoma, NOS Adenoma, NOS Neoplasm, NOS Pheochromocytoma Thyroid Neoplasm, NOS	+++++	* * + +	+ x+ +	- + *	+ + * +	+ ×+ +	+++	+ + +	- + -	+ x + +	+ x +	+ x + +	++++	+ x+ + -	+ + x	+ x + +	- + +	+ + X +	++++	+ x + +	+ x + x +	+ x + +	+ x +	+ x + +	+ x++++
Follicular cell carcinoma C-cell adenoma C-cell carcinoma Parathyroid Pancreatic islets Islet cell adenoma Islet cell carcinoma	Ŧ	- +	+ +	-	-	- +	+ -	++	-	Ŧ	Ŧ	 +	+ + X	Ŧ	+ +	+ +	+ +	x Ŧ	+ +	+++	+++	+ +	+ +	++	+++
REPRODUCTIVE SYSTEM Mammary gland Testia Interstitial cell tumor Prostate Preputial/clitoral gland Carcinoma, NOS	N + + N	N + +N	++ +N	-	N + X - N	++ +N	+	*	*	+	++ +x	+	++x+N	++x+N	+	+ + X + N	* *	* *	**	+	++ +N	N + + N	+	N + X + N	+
NERVOUS SYSTEM Brain Carcinoma, NOS, invasive	+	*	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+
SPECIAL SENSE ORGANS Ear Papilloma, NOS Zymbal gland Carcinoma, NOS				N N					N									N							
MUSCULOSKELETAL SYSTEM Bone Osteosercome	N X	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	- N
BODY CAVITIES Peritoneum Fibrosarcoma Tunica vaginalis Mesothelioma, malignant		N +	N +	N N	N + X		N X +	N +	N +	N +	N +	N +	N +	N +	N +	N +	N +	N +	N +	N +	N +	N +	N +	N +	- N +
ALL OTHER SYSTEMS Multiple organa NOS Mesothelioma, malignant Mesothelioma, invasive Leukemia, mononuclear cell Lower leg NOS	N	N	N	N	N X	N		N X X			N		N X		N X			N X		N X		N X	N	N	N X

### TABLE A3. INDIVIDUAL ANIMAL TUMOR PATHOLOGY OF MALE RATS IN THE<br/>TWO-YEAR INHALATION STUDY OF DICHLOROMETHANE: LOW DOSE

TABLE A3.	INDIVIDUAL ANIMAL	TUMOR	PATHOLOGY	<b>OF MALE</b>	RATS:	LOW	DOSE
		( <b>C</b>	ontinued)				

ANIMAL NUMBER	029	04	0	0	040	04	0 2 3	024	0 1 6	0	0	0	007	0	0	0	0	0	0	034	038	039	040	043	047	1
WEEKS ON STUDY	9 9 8	9 8	4 0 9	10	1	9 1 0	의 1 0	4	1 0 3	의 1 0	4	의 1 0	1	い 1 0	4	9 1 0	9 1 0	1	ल 1 0	1	여 1 0	37 1 0	1	31 1 0	1	TOTAL. TISSUES TUMORS
INTEGUMENTARY SYSTEM	8	8	9	2	1	1	2	2	3	4	4	4	4  N	4	4	4	4	4	4	4	4	4	4	4	4	•50
Skin Basal cell carcinoma Trichoepithelioma Keratoscanthoma	x	<i>+</i>	-	+		+	•	+	•	<i>•</i>	•			-	×	-	-		-	•	•	•	-	- -	•	1 2 2
Subcutaneous tiasus Fibroma RESPIRATORY SYSTEM		+	+	+	+	+	+	+	+	+	+	+	N	+	+	+	+	+	+	x	+	_	+	_	-	*50 1
Lung and bronch Alveolar/bronchiolar carcinoma Osteosarcoma, metastatic Trachea	+	++	++	++	+	++	+	++	* *	++	++	++	++	++	+ +	+ +	++	++	++	++	++	++	++	++	++	49 1 1 48
HEMATOPOIETIC SYSTEM Bone marrow Spleen Sarcoma, NOS	++	++	++	+++	++	++	+++	++	++	++	++	+++	+	++	+++	+++	+++	++++	+++	++	++	+++	+++	++	++	49 49 1
Malignant lymphoma, NOS Lymph nodes Thymus	+ +	+ +	+++	+ -	+ +	+ +	+ -	+ +	+ +	+ +	+ +	+ +	+ +	+ +	+ -	++	+ +	+ +	+ +	++	+ +	+++	+ +	+ +	+ +	1 48 39
CIRCULATORY SYSTEM Heart	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	50
DIGESTIVE SYSTEM Salivary gland Liver Neoplastic nodule	+++	+++	+++	++	++	++	+++	+++	++	++		+++	+++	‡	+++	+++	++	+++	+++	+++	+++	+++	++*	++	+	47 49 2
Hepatocellular carcinoma Bile duct Gailbladder & common bile duct	+ N	+ N	+ N	+ N	+ N	+ N	+ N	+ N	+ N	+ N	+ N	+ N	+ N	+ N	+ N			+ N		+ N	+ N	+ N	^X + N	+ N	+ N	1
Pancreas Esophagus Stomach Small intestine	++++	++++	++++	++++	+ - + +	++++	++++	++++	++++	++++	++++	+ - + +	+ - + +	++++	++++	++++	++++	++++	++++	++++	++++	++++	++++	++++	+ - + +	•50 46 43 49 47
URINARY SYSTEM	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	÷	47
Kidney Urin <b>ary bladder</b>	+ +	+ +	++	+++	++	+++	++	+ +	+++	++	+++	++++	++	+++	+ +	+++	+ +	++	+++	+++	++	+++	+++	+++	++	50 47
ENDOCRINE SYSTEM Pituitary Carcinoma, NOS Adenoma, NOS	+	+ X	+ X	+ X	+ X	+	+ X	+	+ X	+ X	+ x	+ X	+ X	+ X	+ X	+ X	+ X	+	+	+ X	+ X	+ X	+	+ X	+	47 1 31
Adrenal Neoplaam, NOS Pheochromocytoma Thyroid	+	++	++	++	++	+ X +	+ X +	+ X +	+	+ X +	+ X+	++	++	++	+ X +	+ X +	++	+ X +	++	+	+	++	++	++	++	50 1 11 48
Neoplaam, NOS Follicular cell carcinoma C cell adenoma C cell carcinoma				x							x	x									x					1 1 3 1
Parathyroid Parathyroid Isiet ceil adenoma Isiet ceil carcinoma	+ + X	++	+ +	+ +	+ + X	÷	+ + x	÷	+++	+ +	÷ x	÷	++	++	+ +	++	+++	+ + X	+ + X	+++	+++	++++	+++	++	++	35 46 6 1
REPRODUCTIVE SYSTEM Mammary gland Testis	+	N +	+	++	++	N +	N +	+	N +	N +	N +	N +	N +	N +	N +	+	N +	N +	++	N +	++	N +	N +	N +	 +	*50
Interstitial cell tumor Prostate Preputial/clitoral gland Carcinoma, NOS	+	+	X + N	+	+	X + N	+	+	+	+	+	+ x + n		+	-	+	+	+	+	+		+	X + N	-	+	49 37 42 •50 1
NERVOUS SYSTEM Brain Carcinoma, NOS, invasive	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	<b>50</b> 1
SPECIAL SENSE ORGANS Ear Papuloma, NOS					-					-		N		-									x			• <b>50</b> 1
Zymbal giand 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	м 	*50
MUSCULOSKELETAL SYSTEM Bone Osteosurcoma	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	*50 1
BODY CAVITIES Peritoneum Fibrosarcoma	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	*50
Tunica vaginalis Mesothelioma, malignant ALL OTHER SYSTEMS	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	•50 1
Multiple organs NOS Mesothelioma, malignant Mesothelioma, invasive	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	*50 1 1
Leukemia, mononuclear cell Lower leg NOS Osteosarcoma, invasive	x		x	x		X	X	X	X		X				X	x			X	x	X	X	X	X		26 1
		_					_	_		_					_									~~~	_ 1	· 1

\* Animais Necropsied

ANIMAL NUMBER	0	0	0	0	0	A	- 71	-74			-71	- 71	- 71	- 71		- 21	AT		- <b>N</b>	~	707	AL	~	AL.	-
	5	0 7	0 2	1	0	30	1	42	40	32	46	03	44	12	04	200	19	202	29	35	4	43	17	22	23
WEEKS ON STUDY	0 7 0	0 7 1	075	0 7 5	0 7 6	0 7 6	0 7 8	0 7 8	0 7 9	0 8 4	0 8 4	086	086	0 8 8	0 8 9	0 8 9	0 9 2	092	0 9 2	0 9 2	092	094	096	0 9	0 9 6
INTEGUMENTARY SYSTEM Skin Papilloma, NOS	+	+ x	+	N	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+
Basal cell carcinoma Trichoepithelioma Subcutaneous tissue Fibroma	+	+	+	N	+	+	+	+	+	+	+	+	+	x +	+	+	+	+	+	+	+	+	+ x	+	+
RESPIRATORY SYSTEM Lungs and bronchi Alveolar/bronchiolar adenoma Alveolar/bronchiolar carcinoma	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+ x	+	+	+	+	+	+	+
Pheochromocytoma, metastatic Trachea	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	X +	+	+	+	+	+	+	+
HEMATOPOIETIC SYSTEM Bone marrow Spleen Lymph nodes Thymus	++++	+++-	++++	++++	++++	++++	+++-	++++	+++ -	++++	++++	++++	++++	++++	++++	-+++	+++-	+++++	+++ -	++++	++++	+++-	++++	+++-	++++
CIRCULATORY SYSTEM Heart	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+
DIGESTIVE SYSTEM Salivary gland Liver	+	+++	++	-	+++	+++	++	++	-	+++	+++	+++	-+	+++	+++	++++	+++	++	+++	++++	+++	+++	++	++	- ++ +
Neoplastic nodule Hepatocellular carcinoma Bile duct	<u>+</u>	+	<u>.</u>	÷	+	÷	÷	<u>+</u>	<u>.</u>	<u>+</u>	÷	<u>+</u>	+	<u>+</u>	<u>+</u>	÷	<u>+</u>	÷	÷	<u>+</u>	÷	+	<u>.</u>	÷	+
Gailbladder & common bile duct Pancreas Esophagus Stomach Small intestine	N + + + +	N++++	N++++	N+++	Z++++	N + + + +	<b>Z+++</b>	N   + + +	Z++++	N++++	N++++	Z++++	N++++	Z++++	N++++	N++++	N++++	N++++	Z - + + +	2++++	N++++	N++++	<b>N+++</b>	N++++	N + + + +
Large intestine Rectum Carcinoma, NOS Neurofibrosarcoma	N N	+ N	+ N	+ N	+ N	+	+ N	+ N	+ N	++	+ + X	++	++	++	++	++	++	+	++	++	++	++	++	+++	+++
URINARY SYSTEM Kidney Urinary bladder	+	+++	+++	+++	+ +	+++	+++	+++	+	+ +	+ +	++	++++	++	+++	+++	+++	++	+++	++	+++	+++	+++	++	- + +
ENDOCRINE SYSTEM Pitutary Adenoms, NOS Adrenal Pheochromocytoma	* *	* * *	++	+ +	+ x +	+++	+ +	+	+ +		* *	+ x +	++	+ +	++	+ *	+++	++	* *	* *	**	** +	* *	++	- + x +
Pheochromocytoma, malignant Thyroid Follicular ceil carcinoma C-ceil adenoma C-ceil carcinoma	+	+	+	+	+	+	+	+	+	+	-	+	+	+ x	+	+	+	X +	+	+	*	+ X	+	+ x	+
Parathyroid Pancreatic islets Islet cell adenoma	+	++	+++	+++	+++	<del>-</del>	Ŧ	+ -	+++	++	+	Ŧ	+	Λ + +	Ŧ	Ŧ	Ŧ	+ +	-	÷	-+	++	Ŧ	+++	+
REPRODUCTIVE SYSTEM Mammary gland Fibroadenoma	+	+		N	N	N	+	N	+	+	+	N	+	N	+	+	+	N	+	N	N	N	N	N	+
Testis Interstitial cell tumor Prostate Preputal/clitoral gland	+ + N		+ x - N			+ X + N	+	+ + N	+	+ X + N	+			+	+ X + N	+	+	+	+ + N			+ X + N	+	+	* + N
Carcinoma, NOS NERVOUS SYSTEM		<u> </u>							+	+	x +	+	+	+											-
Brain SPECIAL SENSE ORGANS		-		+	+	-	+ 								<u> </u>	<u>+</u>		+	+ 		÷	+		<u> </u>	-
Ear Carcinoma, NOS Zymbal gland Carcinoma, NOS	1				X																			N N	- 1
BODY CAVITIES Tunica vaginalis Mesothelioma, NOS	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	- +
ALL OTHER SYSTEMS Multiple organs NOS Mesothetioma, NOS Leukemia, mononuclear cell Lower leg NOS Osteosarcoma	N	N X		N X	N				N X			N X												N X	

### TABLE A3. INDIVIDUAL ANIMAL TUMOR PATHOLOGY OF MALE RATS IN THETWO-YEAR INHALATION STUDY OF DICHLOROMETHANE: MID DOSE

TABLE A3.	INDIVIDUAL ANIMAL	<b>TUMOR PATHOLOGY</b>	<b>OF MALE RATS:</b>	MID DOSE
		(Continued)		

ANIMAL NUMBER	0 2 4	0 3 1	047	049	014	0 2 1	0 5 0	045	006	008	0 0 9	0	0 1 1	0 1 3	0 1 5	020	025	027	0 3 3	0 3 4	036	0 3 7	0 3 8	0 3 9	0 4 8	TOTAL:
WEEKS ON STUDY	0 9 6	096	096	98	100	1 0 1	1 0 1	102	104	104	104	104	104	104	1 0 4	104	104	1 0 4	1 0 4	104	104	1 0 4	104	104	1 0 4	TISSUES
INTEGUMENTARY SYSTEM Skin Papilloma, NOS	+	+	+	+	+	+	+	+	+	N	+	+	N	+	+	+	+	N	+	+	+	+	N	+	+	*50
Basal cell carcinoma Trichospithelioma Subcutaneous tiasue Fibroma	+	+	+	+	+	X +	+	+	+	N	+	+	N	+	+	*	+	N	+	+	+	+	N	+	÷	i 1 •50 2
RESPIRATORY SYSTEM Lungs and broachi Alveolar/broachiolar adenoma Alveolar/broachiolar carcinoma Pheochromocytoma, metastatic Trachea	+	+	+	+	+	+	+	+	* *	+	+	+	+	+	+	+	+	+	+	+	++	+	++	+	+	50 1 1 50
HEMATOPOLETIC SYSTEM Bone marrow Spieen Lymph nodes Thymus	++++	+++-	++++	+++-	+++-	+++	+++-	++++	++++	++++	++++	++++	++++	++++	+++++	++++	++++	++++	++++	++++	++++	++++	++++	++++	+++1	49 50 50 35
CIRCULATORY SYSTEM Heart	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	50
DIGESTIVE SYSTEM Salivary gland Liver Neoplastic nodule Hepatocellular carcinoma Bile duct Gallbladder & common bile duct Pancreas Esophagus Somach Somach Somach Somach Somach Stati intestine Large intestine Rectum Carcinoma, NOS Neurofibrosarcoma	++ +Z++++++	++ x+N++++++	++ +Z++++++	++ +Z++++++	++X +Z+ +++++	++ +Z+++++ X	++ +Z+ +++++	++ +Z++++++	++ +Z++++++	++ +Z++++++	++ +Z++++++	++ +2++++++	++ +Z++++++	++ +2++++++	++ +Z++++++	++ +Z++++++	++ +Z++++++	++ +Z++++++	++ +Z++++++	++ +Z++++++	++x +z++++++	++ +Z++++++	++ +Z++++++	++ +2++++++	++ X+N++++++	47 50 2 50 *50 48 48 50 49 50 *50 1 1
CRINARY SYSTEM Kidney Urinary bladder	++	++	++	+++	++	+++	+++	++	+++	+++	++	++	+++	++	+	+++	+++	+++	++	+++	+++	+++	+++	+++	+	50 50
ENDOCRINE SYSTEM Pituitary Adenoma, NOS Adrenai Pheochromocytoma Pheochromocytoma, malignant Thyroid Follicular cell carcinoma C-cell adenoma	+ + +	+ * * +	+x+ +	- + +	++++	+x+x + x +	+x+x +	+ + x	+x + +	*x+ +	+ * * +	+ + + + +	+ + + + + +	+x+ +	+	+x+x +	*** *	*x + +	+x+x + x +	+x+ +	+ * * +	+x+ + x	+ + + X	** * + x	 + +	<b>49</b> 27 50 10 1 <b>49</b> 2 6
C-cell carcinoma Parathyroid Pancreatic isleta Islet cell adenoma	+ +	+ +	++	÷	<del>-</del> +	++	+ +	Ŧ	~ +	Ŧ	+ +	++	Ŧ	+ + * X	+ +	<del>-</del> +	+++	+++	++	<b>+</b> +	++	+ + X	+	++	+ +	1 30 48 2
REPRODUCTIVE SYSTEM Mammary gland Fibroadenoma Testis Interstitial cell tumor Prostate Preputal/clitoral gland Carcinoma, NOS	* *	+ X +	+	N +X+N	+ X +	N +X+N	+ X +	N +X+N	+ +x+N	X + X +	+ X +	+	+ x +	+ + + N	+ X +		+x +	X + X +	* *	-	+x +	+++	+	+ X +	N +X+N	*50 2 50 41 46 *50 3
NERVOUS SYSTEM Brain	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	50
SPECIAL SENSE ORGANS Ear Carcinoma, NOS Zymbel gland Carcinoma, NOS																					N N					*50 1 *50 1
BODY CAVITIES Tunica vaginalis Mesothelioma, NOS	+	*	+	۶	+	+	*	+	+	+	+	+	+	*	+	+	+	+	*	+	+	+	+	+	+	*50 4
ALL OTHER SYSTEMS Multiple organs NOS Mesothelioma, NOS Leukemia, mononuclear cell Lower leg NOS Osteosarcoma	N	N X	N	х	N X	N	N X		N	N		N X			N X					N X	N X	N		N X		*50 1 32 1

\*Animals Necropsied

ANIMAL NUMBER		45	25	946	18	1	32	36	548	03	13	4	19	37	04	000	10	47	14	17	35	38	27	16	3	43
WEEKS ON STUDY		0 6 2	0 6 3	075	0 7 6	0 7 8	0 7 8	0 7 9	079	080	0 8 0	0 8 2	0 8 3	0 8 3	0 8 5	085	086	0 8 6	0 8 7	0 8 9	0 8 9	0 8 9	0 9 0	0 9 2	0 9 2	92
INTEGUMENTARY SYSTEM	-  -	+	-	+	+	 +	•		N	+	N	+	+	+	<u></u>	+	+	+			-			+	+	~~~
Keratoacanthoma Subcutaneous tissue Sarcoma, NOS Fibroma Neurilemoma, malignant		+	+	+	+	+	+	+	N	+	N	+	+	+	+	+	+	+	+	+ X	+	+	+	+	+	4
RESPIRATORY SYSTEM Lungs and bronch: Alveolar/bronchiolar carcinoma Trachea	-	+++	+++	+	+++	+++	+	++	++	+	++	+++	++	++	++	+++	++	++	+	+	++	+	+	++	++	
HEMATOPOIETIC SYSTEM Bone marrow Spicen Mesothelioma, invasive Lymph nodes	-	+++	+++	+++++++++++++++++++++++++++++++++++++++	+++++++++++++++++++++++++++++++++++++++	++++	+++++++++++++++++++++++++++++++++++++++	+++++++++++++++++++++++++++++++++++++++	+++	+ +	+++++++++++++++++++++++++++++++++++++++	+++++++++++++++++++++++++++++++++++++++	+++	+++++++++++++++++++++++++++++++++++++++	+++	+++++++++++++++++++++++++++++++++++++++	++++	+++++	++	+++++++++++++++++++++++++++++++++++++++	+++++++++++++++++++++++++++++++++++++++	+++++++++++++++++++++++++++++++++++++++	++++++	++++	+++++++++++++++++++++++++++++++++++++++	
Thymus		-	÷	÷	÷	÷	÷	-	÷	-	-	÷	÷	-	÷	÷	÷	-	÷	+	-	+	÷	+	÷	4
CIRCULATORY SYSTEM Heart		+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	4
DIGESTIVE SYSTEM Salivary gland Liver Hepatocellular carcinoma		+++	Ŧ	+++	++++	+++	++	+ + x	+++	+++	+++	+++	+	++	+++	++	++	+++	++	++	+++	++	++	++	+++	+++
Bile duct Galibladder & common bile duct Pancreas Esophagus Stomach		+N+++	+ 2 + + + +	+ N + + + +	+ 2 + + + +	+ N + + +	+ N + + +	+ + + + +	+ z + + +	+ N + + +	+2+++	+2+++	+ z + + +	+ z + + +	+ 2 + 1 +	+N+++	+N+++	+ 2 + + + +	+ 2 + + + +	+ 2 + + + +	+N+++	+2+++	+ 2 + + + +	+ × + + +	+ z + + +	+ Z + + +
Mesothelioma, invasive Small intestine Large intestine		+	+++	++	++	+	+++	++	++	+	++	++	++	+++	+	++	+	+++	+	++	++	+++	++	++	+	+
URINARY SYSTEM Kidney Urinary bladder Mesothelioma, invasive		+ +	++	+ +	+ +	+ -	+ +	+ +	+ +	+ +	+ -	++	+++	+ +	+++	+ +	+ +	+ +	+ +	+ +	+ +	+ +	++	+ +	+++	+
ENDOCRINE SYSTEM Pituitary Adenoma, NOS Adrenai Pheochromocytoma Ganglioneuroma		* *	 +	+ x +	++	* * *	+ +	** *	+ +	***	* * * *	+	++	* * +	+ +	++	++	* * *	+x +	++	+x + x	+ +	* * *	+ +	++	+ + x x
Thyroid Follicular cell adenoma C cell adenoma		+	+	+	+	*	+	+	+ X	+ X	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+
Parathyroid Pancreatic islets Islet cell adenoma		+	Ŧ	+	÷	÷ x	Ŧ	+	Ŧ	Ŧ	Ŧ	Ŧ	+	÷	+	+	÷	Ŧ	+	Ŧ	+	Ŧ	÷	÷	+	+
REPRODUCTIVE SYSTEM Mammary gland Adenoma, NOS Fibrosdenoma	-	+	N	N	+	+	+	N	+	N	N	+	+	N	N	+	N	N	N	N	N	+	N	N	N	+
Festis Interstitial cell tumor Prostate Preputial/clitoral gland Carcinoma, NOS		+ + N	+ * N	+	+ <b>X</b> + N	+ + N	+ + N	+ X + N	+ X + N	+ X + N	+ x + n	+x + N	+ X + N	+	+	+ X + N	+ +N	+ + N	+ X + N	+ X + N	+ X + N X	+	+ X + N	+	+ X + N	+
Adenoma, NOS NERVOUS SYSTEM	-																									-
Brain SPECIAL SENSE ORGANS Symbal gland Carcinoma, NOS		+ N	+ N	T N	N	T N	T N	+ N	+ + x	Ť N	T N	T N	+ N	T N	T N		T N	T N	+ N	+ N	+ N	+ N	* N	+ N	+ N	+ N
SODY CAVITIES Funca vaginalis Mesothelioma, NOS Mesothelioma, malignant	-	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	4	+	+	+ x
ALL OTHER SYSTEMS duituple organs NOS Meacthelioma, invasive Leukemia, mononuclear cell	-	N						N X											N X	N	N		N X		N	NX

#### TABLE A3. INDIVIDUAL ANIMAL TUMOR PATHOLOGY OF MALE RATS IN THE TWO-YEAR INHALATION STUDY OF DICHLOROMETHANE: HIGH DOSE

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

ANIMAL	0	0	0	व	0	ज	Ø	0	Ø	a	0	0	a	or I	o	a	o	a	or	o	TO	Ю	o	-01	0	· · · · · · · · · · · · · · · · · · ·
NUMBER	2	4	4	07	24	0	5 0	3	2	3	0	2 6	4	2	0	29	0	0	12	15	2	2 8	3	39	4	TOTAL
WEEKS ON STUDY	0 9 3	0 9 3	093	094	094	95	097	98	000	999	101	01	1 0 1	1 0 2	103	03	104	104	1 0 4	104	104	104	1 0 4	104	1 0 4	TISSUES
INTEGUMENTARY SYSTEM Skin	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	*50
Keratoacanthoms Subcutaneous tissue Sarcoma, NOS Fibroma Neurilemoma, malignant	+	+	*	+ X	+	+ X	+	+	+	+		X +	+	+ X	+ x	X +	+	+	+	+	+	+	+	+	+	3 *50 1 4 1
RESPIRATORY SYSTEM Lungs and bronchu Aiveolarforonchuolar carcinoma Trachea	+	+	++	++	++	++	++	+ +	+ +	++	* *	++	++	+++	++	+++	+	+	+++	++	++	+++	++	++	+++	50 1 47
HEMATOPOIETIC SYSTEM Bone marrow Spieen Mesothelioma, invasive	++++	++	++	++	++	+++	+++	+++	++++	+++	+++	+++	+++	+ + *	+++	++++	+++	++	+++	+++	++	++	++	+++	++	49 50 1
Lymph nodes Thymus	+	+	+	+	-	-	+	+	++	-	+	+	-	+++	+	÷	+	+	÷	÷	-	++	+	+++	++++	50 28
CIRCULATORY SYSTEM Heart	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	50
DIGESTIVE SYSTEM Salivary gland Liver Hepatocellular carcinoma	+++	++	+++	++	+++	++++	+++	++	+++	+++	+ +	+ +	+++	+++	+++	+++	+++	++	++	++	++	+++	++	++	++	49 50 1
Bile duct Gailbladder & common bile duct Pancreas Esophagus	+ 2 + + +	+ N + I +	+ 2 + + +	+1 2+	+ N + I +	+ 1 + 1 + + +	+ 1 + 2 +	+ 2 + + +	+ N + + +	+ N + + +		+ N + + +	+ 2 + + +	+N -++	+ N + + +		+ N + + +	+ z + + +	+ N + + +	+ N + + +	+ N + + +	+ 2 + + +	+N+++	+2+++	+ z + + +	50 +50 48 46 50
Stomach Mesothelioma, invasive Small intestine Large intestine	+++++	+ +	+ +	+ + +	+ + +	+ + +	+ +	+ + +	+ + +	+ +	+ + +	+ +	+ +	+ + +	+ +	×++	+ +	+ + +	+ + +	+ + +	+ + +	+ + +	+ + +	+++	+ + +	1 50 46
URINARY SYSTEM Kidney Urinary bladder Mesothelioma, invasive	+ +	++	++	+++	+++	+++	+++	÷	+ +	+ +	+ +	+++	++	+ *	+++	+++	+ +	+++	+ +	+++	++	++++	÷	+++	+++	50 48 1
ENDOCRINE SYSTEM Pituitary Adenoma, NOS Adrenal Pheochromocytoma	+	+ x +	+x +	++	++		+x + x	+ *	++	+ X +		+ x + x	+ +	+ + +			+ x + x	+ +	+ x +	++	+ *	* * +	* x +	+ x + x * x	+++	49 24 50 10
Ganglioneuroma Thyroid Follicular cell adenoma C-cell adenoma	+	+	+	+	+	+	+	+	+	+	+	+	+	А +	+	+	+	+	+	+	+	+	+	+	+	2 50 1 2
Parathyroid Pancreatic ialets Islet cell adenoma	Ŧ	+	++	+	+	+++	++	+ +	++	+ +	+ · + ·		+ + X	+	+ +	÷	+	+ +	++	++	+++	+	+++	Ŧ	+	32 48 2
REPRODUCTIVE SYSTEM Mammary giand Adenoma, NOS Fibroadenoma	*	+	N	+	+	+	+	+	+	+	+ •	+ +	+ :	N	+	+ ·	-	+ x	+	+	N	N	N	+ x	N	*50 1 4
Testus Interstutual cell tumor Prostate Preputual/clitoral gland Carcinoma, NOS Adenoma, NOS	+ X + N	+x - N		+x N	+ X + N	* N		+x -N	+	+ x + N	+ 1 x 1 N 1	+ K + 1	+ : + : N :	-	X ∶ +	X + N 1	+ +	+ X + N	N	+	+	+ X + N	+	:+x + N	4	50 43 45 *50 2 2
NERVOUS SYSTEM Brain	+	+	+	+	+	+	+	+	+	+		+	+	+	+	+	 +	+	+	+	+	+	+	+	+ +	49
SPECIAL SENSE ORGANS Zymbal gland Carcinoma, NOS	N	N	N	N	N	N	N	N	N	N	+ ! X	N	N I	N	N	NI	N 1	N	N	N	N	N	N	N	- N	*50 2
BODY CAVITIES Tunica vaginalis Mesothelioma, NOS Mesothelioma, malignant	+	+	+	+	+	+	+	+	*	+	+ •	+	+	+ x	+	+ · x	+	+	+	+	+	+	+	+	+	*50 1 3
ALL OTHER SYSTEMS Multiple organs NOS Mesothelioma, invasive	N	N	N	N	N	N	N	N	N	N	N I	1	NI	N	NI	N I	N	N	N	N	N	N	N	N	N	*50

\*Animals Necropsied

ANIMAL NUMBER	0 3 0	004	0 3 3	0 2 4	020	0 1 1	0 4 7	050	0 3 5	023	0	0 1 6	038	008	002	0 1 5	0 3 1	043	0 2 5	009	0	0 0 3	005	006	0 0 7
WEEKSON STUDY	0 5 0	0 7 3	0 7 4	0 7 8	0 7 9	0 8 3	0 8 3	083	0 8 6	0 9 0	0 9 2	0 9 2	0 9 2	0 9 3	096	096	0 9 6	0 9 7	099	1 0 1	104	104	104	104	104
INTEGUMENTARY SYSTEM Skin Papilloma, NOS	+	+	+	+	+	N	+	+	+	+	+	+	+	*	+	+	+	+	+	+	+	+	+	+	+
RESPIRATORY SYSTEM Lungs and bronchi Alveolar/bronchiolar adenoma Trachea	++	++	+++	+++	+++	+++	+++	+++	+++	+++	+++	+++	+++	+	+++	++	+++	+++	+++	+++	+++	+++	+++	+++	+x +
HEMATOPOIETIC SYSTEM Bone marrow Spieen Lymph nodes Thymus Thymus Thymoma, benign	++ ++ -	++++	++++	+++-	++++	+++-	++++	+++-	+++-	++++	++++	++++	++++	++++	+++-	+++ -	+++-	+++++	+++-	+++-	++++	++++	++++	++++	++++++++++
CIRCULATORY SYSTEM Heart	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+
DIGESTIVE SYSTEM Salivary gland Liver Neoplastic nodule	+++	Ŧ	+++	+++	+++	++++	+++	+++	+++	++++	+++	+++	+++	++	+++	+++	+++	++	+++	+++	+++	++	++	+++	+++
Bile duct Gallbladder & common bile duct Pancreas Esophagus Stomach Small intestine Large intestine	+z++++	+ Z + + + + +	+2+++++	+z++++	+z+++ ! !	+z++++	+2+1+++	+z+++1	+ 2 + + + + + +	+2+++++	+2+++++	+2+++++	+ 2 + + + + + +	+2+++++	+2+++11	+2+++++	+2+++++	+2+++++	+z++++	+ Z + + + + +	+2+++++	+2+++++	+2+++++	+z++++	+z++++
URINARY SYSTEM Kidney Urinary bladder	++	++	+ -	++	++	+++	++	++	++	++	+	++	++	+	+	+++	++	++	++	+	+	+	++	+	 +
ENDOCRINE SYSTEM Pituitary Carcinoma, NOS Adenoma, NOS	+	+ x	+ x	+	+	+	+ X	+	+	+	+ x	+	+ x	+	-	+ x	+	+	+ X	+ X	+	+ X	*	+ X	+
Craniopharyngioma Adrenal Pheochromocytoma Thyroid C-cell adenoma	+ +	+ +	+ +	+ +	+ +	+ +	+ +	+ +	+ +	+ +	+ +	+ +	+ +	+ x +	+ +	+ +	+ + +	+ +	+ +	+ +	+ +	+ +	+ +	+ +	+
C-cell carcinoma Parathyroid Pancreatic islets Islet cell adenoma	<b>;</b>	-+	+ +	++	+++	++	- +	÷	++	Ŧ	Ŧ	Ŧ	- +	Ŧ	++	+ +	+++	+++	- +	+ +	+ +	+ +	+ +	+ +	<del>-</del> +
REPRODUCTIVE SYSTEM Mammary gland Adenocarcinoma, NOS Mized tumor, malignant	+	+	N	N	+	+	N	+	+	+	+	+ x	*	+	N	+	+	+	+	+	+	+	+	+	+
Fibroadenoma Preputia/clitoral gland Carcinoma, NOS Vagina	N N		N N				N N		N N		X	N N								N N				N N	
Hemangioma Uterus Endometrial stromal polyp Ovary Granulosa cell tumor	+ +	* -	+ +	+ +	+ +	+ +	+ X +	+ +	+ +	+ +	+ +	+ +	+ +	+ +	+	+ X +	+	+ +	+ +	+ +	+ +	++	+ +	+ +	+ +
NERVOUS SYSTEM Brain Carcinoma, NOS, invasive	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	*	+	+
ALL OTHER SYSTEMS Multiple organs NOS Leukemia, mononuclear cell	N	N X	N	N X	N X	N	N X	N	N X	N X	Ņ	N	N X	N	N X	N	N	N X	N	N	N	N	N X	N	N

### TABLE A4. INDIVIDUAL ANIMAL TUMOR PATHOLOGY OF FEMALE RATS IN THE TWO-YEAR INHALATION STUDY OF DICHLOROMETHANE: UNTREATED CONTROL

Evanue Examined Microscopically
 Required Tissue Not Examined Microscopically
 Tumor Incidence
 N : Necropsy, No Autolysis, No Microscopic Examination
 S : Animal Missezed

No Tissue Information Submitted
C : Necropsy, No Histology Due To Protocol
A : Autolysis
M : Animal Missing
B : No Necropsy Performed

			- 11															_							-	
ANIMAL NUMBER	1	0 1 2	0 1 3	0 1 7	0 1 8	0 1 9	0 2 1	0 2 2	0 2 6	0 2 7	0 2 8	0 2 9	0 3 2	0 3 4	036	037	39	040	4	042	4	045	04 6	0 4 8	0 4 9	TOTAL:
WEEKS ON STUDY	104	104	1 0 4	104	1 0 4	1 0 4	104	104	104	104	104	104	1 0 4	1 0 4	1 0 4	104	1 0 4	1 0 4	1 0 4	1 0 4	1 0 4	104	104	1 0 4	1 0 4	TISSUES
INTEGUMENTARY SYSTEM Skin Papilloma, NOS	+	+	+	+	+	+	+	+	N	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	*50 1
RESPIRATORY SYSTEM Lungs and bronchi Alveolar/bronchuolar adenoma Trachea	+ +	++	++	++	++	++	+	+++	+++	++	++	++	++	++	++	+++	+++	++	++	++	++	++	+++	++	 + +	50 1 50
HEMATOPOIETIC SYSTEM Bone marrow Spieen Lymph nodee Thymus Thymoma, benign	+ + + + + +	+++ -	++++	++++	++++	++++	++++	++++	++++-	++++X	+++ -	++++	+++-	++++	+++ -	+++-	++++	+++ -	++++	++++	++++	+++-	+++ -	++++	++++	50 50 49 31 1
CIRCULATORY SYSTEM Heart	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	50
DIGESTIVE SYSTEM Salivary gland Liver Neoplastic nodule Bile duct Galibladder & common bile duct Pancreas Esophagus Stomach Stomach Small intestine Large intestine	++ +z+++++	++ +Z+++++	++ +Z+++++	++ +Z+++++	++ +Z+++++	++ +2+++++	++ +Z+++++	++ +z+++++	++ +Z+++++	++ +Z+++++	++ +Z+++++	++ +Z+++++	++ +Z+++++	++ +z+++++	++ +Z+++++	++X+N+++++	++ +Z+++++	++ +Z+++++	++ +Z+++++	++ +2+++++	++x+z++++++	++ +2+++++	++ +2+++++	++ +Z+++++	++ +z+++++	49 50 2 50 *50 50 49 50 47 47
URINARY SYSTEM Kidney Urinary bladder	+++	+++	+++	+~	+++	+++	+++	++	++	+++	++	+++	++	+++	++	+++	+++	++	+++	+++	+++	+++	+++	++	++	50 47
ENDOCRINE SYSTEM Pituitary Carcinoma, NOS Adenoma, NOS Craniopharyngioma Adrenal Pheochromocytoma Thyroid C-cell adenoma C-cell adenoma C-cell adenoma Parathyroid Pancreatic islets Islet cell adenoma	+ x + +	+ x + + - +	+ + + + + + + + + + + + + + + + + + + +	+ + + x++	+ x + + x <del>-</del>	+ + + +	+ x + + + + + + + + + + + + + + + + + +	+ x + + = +	+ + + + + + + + + + + + + + + + + + +	+ x + - +	+ + + - +	+ + + x	+ x + + - +	+ x + + + + + + + x	+ + + + + + + + + + + + + + + + + + + +	+ x + + + + + + +	+ x + + + + + +	+ + + +	+ x +	+ x + + x + x + x + x + x + x + x + x +	+ + + -+	+ x + + - +	+ ++	+ X+ + ++	+ x + + + + + x	49 1 24 1 50 2 47 2 47 2 3 26 50 3
REPRODUCTIVE SYSTEM Mammary gland Adenocarctnoma, NOS Mixed tumor, malignant	+	+	+	+	N	+	+	+	+	+	+	+	+	N	+	+	+	+	+	+	+	+	+	+	+	*50 1 1
Fibroadenoma Preputia/clitoral gland Carcinoma, NOS Vagina	N N	X N N	N N	N N	N N	N N	N N	N N			X N N	N N	N N			N N				N N	X N N	-	N N	N N		5 *50 1 *50
Hemangioma Uterus Endometrial stromal polyp Ovary Granulosa cell tumor	* *	+ +	+ +	+ +	+ +	+ +	+ +	+ +	+ +	+ *	+ +	+ x +	+ +	+ +	+ +	+ +	X + +	+ +	+ +	+ * x	+ +	+ +	+ +	+ +	+ +	1 50 7 49 2
NERVOUS SYSTEM Brain Carcinoma, NOS, invasive	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	50 1
ALL OTHER SYSTEMS Multiple organs NOS Leukemia, mononuclear ceil	N X	N X	N	N	N X	N	N	N	N X	N	N	N	N	N	N	N	N X	N	N	N	N X	N	N	N	NX	*50 17

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

\* Animals Necropsied

ANIMAL NUMBER	0 2 1	0 1 4	0 1 5	0 1 0	0 2 0	0 2 5	0 4 1	0 4 3	0 4 5	0 3 2	0 1 6	0 3 4	0 3 6	0 4 7	0 5 0	0 3 8	0 4 4	0 2 9	0 1 3	0 4 0	0 4 6	0 2 3	0 2 4	0 3 7	0 2 6
WEEKS ON STUDY	0 6 1	0 7 4	074	0 7 6	0 7 6	0 7 8	0 8 4	0 8 5	0 8 6	0 8 8	0 8 9	0 9 0	0 9 2	0 9 2	0 9 2	0 9 4	0 9 4	0 9 5	0 9 7	0 9 7	0 9 7	0 9 8	0 9	0 9 8	1 0 0
RESPIRATORY SYSTEM Lungs and bronch Alveolar/bronchuolar carcinoma Folincular cell carcinoma, meta Pheochromocytoma, metastatic Trachea	+	+	+	+	+	+	+	+	++	+	+	+	+	+	+	++	+	+	+	+	+	+	+	+	+ ×+
HEMATOPOIETIC SYSTEM Bone marrow Spleen Lymph nodes Thymus	+++++	+++-	++++	+++-	++++	+++-	++++	++++	++++	++++	++++	++++	++++	++++	+++++	++++	+++ -	++++	++++	+++ -	++++	++++	++++	++++	++++
CIRCULATORY SYSTEM Heart Adenocarcinoma, NOS, metastatic	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	*	+	+
DIGESTIVE SYSTEM Salivary gland Liver Neoplastic nodule	+ + x	++	+++	++	+++	Ŧ	+++	+++	+++	++	+++	++++	+++	++++	+++	+++	++	+++	+++	++	+++	+++	* +	+++	+++++++++++++++++++++++++++++++++++++++
Sile duct Gallbladder & common bile duct Pancreas Esophagus Stomach Small intestine Large intestine	X+N  ++	+z++++	+N++++	+z+++	+ 2 + + + + + +	+ z + + + + +	+ z + + + + +	+z++++	+ 2 + + + + + +	+1 +1 - 1 - 2 +	+ 2 + 1 + + +	+2+++++	+z++++	+ 2 + + + + + + + + + + + + + + + + + +	+ 2 + + + + + + +	+z+++	+2++++4	+z++++	+N++++	+2+1++4	+ Z + + + + + +	+z++++	+z++++	+ 2 + + + + + +	+Z++++
URINARY SYSTEM Kidney Mixed tumor, benign Urinary bladder	+++	+	+	+	+++	++++	+ + +	• + +	+++	+++	+ +	+++	+++	++	+++	+++	+++	+++	+++	+++	+++	+ + +	+++	+	- + +
ENDOCRINE SYSTEM Pituitary Neoplasm, NOS Adenoma, NOS Adrenal Cortical carcinoma Pheochromocytoma	* *	+	+ X +	+ X +	+ +	+	+ +	+ X +	+ X +	+	+ X +	+	+	+ X +	+ X +	+ X + X	+ x +	-+	+	+	+	+ x +	+	+ x +	- + +
Pheochromocytoma, malignant Thyroid Follicular cell carcinoma Parathyroid	-	+	+	+	++	++	+ -	+ -	++	-	× + -	+	+	++	+	+	+	+	-	++	++	++	++	+++	¥ + +
REPRODUCTIVE SYSTEM Mammary gland Adenocarcinoma, NOS Fibroadenoma	+	+ x	*	+	N	N	+	+	+	+	N	+	+ x	N	+	+	+	+	+	+	+ x	+	*	+	- +
Preputial/clitoral gland Carcinoma, NOS Uterus	N +	N +	+	N +	N +	N +	N +	N +	N +	N +	N +	N +	N +	N +	N +	N +	N +	N + X	N +	N +	Ñ +	N +	N +	N +	N + X
Endometriai stromal polyp Endometrial stromal sarcoma Ovary Sarcoma, NOS	+	X +	x +	X +	+	л +	+	+	+	+	+	+	+	+	+	+	+	+	+	* x	+	X +	+	+	+
VERVOUS SYSTEM Brain	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+
MUSCULOSKELETAL SYSTEM Bone Osteosarcoma	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
ALL OTHER SYSTEMS Multiple organs NOS Sarcoma, NOS, metastatic Leukemia, mononuclear cell	N	N	N		N X	N	N		N X			N X		N X				N X		х	N X		N X	N X	-   N

### TABLE A4. INDIVIDUAL ANIMAL TUMOR PATHOLOGY OF FEMALE RATS IN THE<br/>TWO-YEAR INHALATION STUDY OF DICHLOROMETHANE. LOW DOSE

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

ANIMAL NUMBER	0 0 5	0 1 9	0 3 5	0 0 1	0 0 2	0	0	006	0	008	009	0 1 1	0 1 2	0 1 7	0 1 8	0 2 2	027	028	030	0 3 1	033	0 3 9	042	04	0 4 9	T
WEEKS ON STUDY	1 0 2	1 0 2	1 0 3	1 0 4	104	1 0 4	104	1 0 4	104	1 0 4	1 0 4	1 0 4	104	1 0 4	104	104	1 0 4	1 0 4	1 0 4	1 0 4	104	1 0 4	104	104	1 0 4	TOTAL. TISSUES TUMORS
RESPIRATORY SYSTEM Lungs and bronchi Alveolar/bronchiolar carcinoma Follicular ceil carcinoma, meta Pheochromocytoma, metastatic	+	+	+ x	+	+	+	+	+	+	+	+	+	+	+	*	+	+	+	+	+	+	+	+	+	+	50 1 1 1
Trachea HEMATOPOIETIC SYSTEM	+	+	+	+	_	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+		48
Bone marrow Spleen Lymph nodes Thymus	++++	++++	+++ -	++++	+++ -	+++ -	++++	+++ -	++++	++++	++++	++++	++++	++++	++++	++++	++++	+++ -	++++	++++	++++	++	++++	++++	+ + + +	50 50 49 39
CIRCULATORY SYSTEM Heart Adenocarcinoma, NOS, metastatic	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	50 1
DICESTIVE SYSTEM Salivary gland Liver	+ +	+++	+++	+++	++++	+++	+++	+++	+	++	+++	+++	++	+++	+++	+++	+++	++	++	+++	+ +	+ +	+++	++	+++++	49 50
Neoplast., nodule Bile duct Galibiadder & common bile duct Pancreas Esophagus Stomach	+z++	+ 2 + + 4	+ z + + +	+ 7 + + + +	+ 2 + + + +	+ N + + +	+ z + i +	+ z + + +	+ z + + +	+ z + l +	+ z + + +	+ z + + +	+ z + + +	+ z + + +	+z+++	+ z + + +	+ z + + +	+ 2 + + +	+ z + i +	+z+1+	+ 2 + + + +	+ z + + +	+ z + + +	+ N + + + +	+z+++	1 50 *50 48 43 50
Small intestine Large intestine	++++	+++	+++	+++	+ +	++	+ +	+ +	+ + +	+++	+++	+++	+++	+++	+++	+++	+ +	+++	+++	+++	; + +	+ +	+ +	+++	+ +	47 47
URINARY SYSTEM Kidney Wixed tumor, benign Urinary bladder	++	+++	++	++	++	++	++	+ x +	+	++	++	++	++	++	+	+	+++	++	++	++	++	++	++	++	+++	50 1 45
ENDOCRINE SYSTEM Pituitary Neoplasm, NOS	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	49 1
Adenoma, NOS Adrenal Cortical carcinoma Pheochromocytoma	X +	X +	X +	X +	X +	¥ +	X +	X +	X +	+	X +	+	X +	X +	X +	+	X +	+	+	+	X +	X + X	X +		X +	30 50 1
Pheochromocytoma, malignant Thyroid Follicular cell carcinoma Parathyroid	+ -	+ -	* x -	+ -	+ -	+ -	+ -	+ -	+ +	+ -	+ -	+ +	+ 	+ +	+ +	+ -	+ -	+ +	+ 	+ -	+ -	+ +	+ +	-	+ +	2 46 1 19
REPRODUCTIVE SYSTEM Mammary gland Adenocarcinoma, NOS	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	*50
Fibroadenoma Preputal/citoralgland Carcinoma, NOS Uterus	N	N	N	х		N	X N	X N	N	N	N	N	N	N	N	N	X N	N	N	X N	X N	X N	N	N X	X N +	11 *50 2
Endometrial stromal polyp Endometrial stromal sarcoma Ovary Sarcoma, NOS	+	+	+	* *	* * +	+	+	+	+	+	+	* *	+	+	* *	+	+	¥	+	+	+	+	+	+	+	49 9 3 50 1
VERVOUS SYSTEM Brain	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+		50
MUSCULOSKELETAL SYSTEM Bone Osteosarcoma	N X	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	*50 1
ALL OTHER SYSTEMS Multiple organs NOS Sarcoma, NOS, metastatic Leukemia, mononuclear ceil	N	N X	N	N	N X	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N		N X			*50 1 17

\* Animais Necropsied

ANIMAL NUMBER	02	0	02	0	0	0	0	0	4	0	0	0	007	0 2 3	048	0 2 7	0	03	0	0	0	0	0	03	(
WEEKS ON STUDY	0	- of	1	3	이	낅	0	읽	ગ	3  0	1 0	9 0 8	0	<u>.</u>	0	, DI	পু	입	빙	୍ୟ ପୁ	0 0 9	이	ণ বু	9 0 9	-
	62	4	5	5	2	3	7 6	7 6	8 2	8	8	4	8 5	8	85	8	8	8 9	8 9	9	1	9	9 7	8	
INTEGUMENTARY SYSTEM	.	• +	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	N	+	+	
Papilloma, NOS Subcutaneous tissue Fibroma	•	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	N	+	+	
RESPIRATORY SYSTEM Lungs and bronchi Trachea	;	+++++++++++++++++++++++++++++++++++++++	++	++	+++	++	++	++	+++	++	+++	+++	++	+	+++	+++	+++	+++	+++	++	++	++	++	++	
HEMATOPOIETIC SYSTEM	•	_	_														•				-				
Bone marrow Spieen		: +	+	±	+	±	±	±	1	±	1	±	±	+	±	Ξ	+	÷	±	÷	+	+	÷	+	
Lymph nodes		+	÷	+	÷	÷	÷	÷	÷	÷	÷	÷	÷	÷	÷	÷	+	÷	÷	÷	÷	÷	÷	÷	
Thymus	+	-	+	+	+	-	.+	-	+	-	+	+	-	+	+	+	+	-	+	+	+	+	+	-	
CIRCULATORY SYSTEM	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	۲	+	
DICESTIVE SYSTEM	·													····-											
Salivary gland Liver	‡	: +	++	++	++	++	++	+++	++	+++	+	+++	+	++	++	+	++	+++	++++	+++++++++++++++++++++++++++++++++++++++	+++++++++++++++++++++++++++++++++++++++	++	+	++++	
Neopiastic nodule Hepatocellular carcinoma						·								X					•		X		•		
Bile duct Gallbladder & common bile duct	+ N	+ N	+ N	+ N	* N	+ N	+ N	+ N	* N	+ N	* N	+ N	+ N	+ N	* N	+ N	, N	+ N	* N	+ N	, N	+ N	+ N	+ N	1
Pancreas Esophagus	1	+	+	+	+	+	+++	+	+	+++	+	+++	+	+++	+	+	+	+	+	++++	+	+	+++++++++++++++++++++++++++++++++++++++	+	
Stomach	+	÷	÷	÷	+	÷	÷	+	÷	÷	÷	÷	÷	÷	÷	÷	÷	÷	÷	÷	÷	÷	÷	÷	
Small intestine Large intestine	-	+	÷	+	+	÷	÷	÷	+	÷	++	++	+	+	++	+	+	÷	+	+	+	-	+	+	
URINARY SYSTEM															-										-
Kidney Jirinary bladder	+ -	++	+++	++	++	+	++	+++	++	++	++	+++	++	+	++	++	++	++	+++	+++	+++	++	++	++	
ENDOCRINE SYSTEM							<u> </u>									-								·····	
Carcinoma, NOS		Ŧ	Ŧ	Ŧ		T	Ŧ	Ŧ				T	т	T		T		T				Ŧ	Ŧ	Ť	1
Adenoma, NOS Adrenal	+	+	+	+	X +	+	+	+	X +	X +	Х +	+	+	+	¥	+	х +	+	Х +	X +	×	+	÷	+	
Cortical adenoma Pheochromocytoma																									
Thyroid Follicular cell adenoma	+	+	+	+	-	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	,
Follicular cell carcinoma	1																								
C cell adenoma C-cell carcinoma																	х								
Parathyroid	-	+		+	-	+	-	+	+	-	-	-	-	-	+	-	-	-	-	+	-	+	+	-	•
REPRODUCTIVE SYSTEM				-	N		+	N	M	_						-					-	N			
Carcinoma, NOS	1	Ŧ	Ť	Ŧ	14	Ŧ		14	14	Ŧ	Ť	T	T	Ŧ	Ť	Ŧ	T	T	т	Ŧ	Ŧ	14	Ť	Ť	
Adenocarcinoma, NOS Fibroadenoma			x	x			X												x	x					,
Preputial/clitoral gland	N	N	Ñ		N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	X N	N	N	N	N	1
Carcinoma, NOS Uterus	+	+	+	+	+	+	+	+	+	+	+	+	* x	+	+	+	÷	+	+	+	+	+	+	+	
Endometrial stromal polyp Endometrial stromal sarcoma	x							X					x	x								X		x	
Dvary	+	+	+	+	+	+	+	+	+	+	+	+	+	÷	+	+	+	+	+	+	+	+	+	+	•
VERVOUS SYSTEM				*	*	+	+	*	+	+	+	*	*	+	*		*		*	-		-			_
Carcinoma, NOS, invasive Oligodendroglioma		Ŧ	Ŧ	т	Ŧ	Ŧ	Ŧ	Ť	Ť	Ŧ	Ŧ	Ŧ	Ŧ	Ŧ	Ŧ	T	Ŧ	Ť	Ť	Ŧ	x	т	T	Ŧ	2
PECIAL SENSE ORGANS	-																								-
Eye Neurofibroma	N	N	N	N	+	+	N	N	N	N	N	N	N	N	N	ĮN	N	N	N	N	N	N	N	N	ľ
USCULOSKELETAL SYSTEM																									
Muscie Neurofibroma	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	1
ALL OTHER SYSTEMS	-			N	N			N				N				NT.	M	N	N	N	N	N	N		-
Multiple organs NOS Endometrial stromal sarcoma, invasive		N	P	IN .			ĽN						EN .							N					
Leukemia, mononuciear cell						X			X		X	X			X	X		X	X			X	X	X	X

#### TABLE A4. INDIVIDUAL ANIMAL TUMOR PATHOLOGY OF FEMALE RATS IN THE TWO-YEAR INHALATION STUDY OF DICHLOROMETHANE: MID DOSE

TABLE A4.	INDIVIDUAL ANIMAL	TUMOR PATHO	LOGY OF	FEMALE	RATS:	MID DOSE	;
		(Continued	)				

ANIMAL NUMBER	0	0 4	0	003	0	0	0	0	0	0	020	0 2 2	024	025	028	020	0 3 5	036	037	0	4	4	0	4	05	1
WEEKS ON STUDY	2  1  0	7	1	3	4	6  1  0	0	7	8  1  0	9	0	2	4	ī	8	T	5	6 1 0	7	2	3	4	5  1  0	6  1  0	0	TOTAL. TISSUES TUMORS
INTEGUMENTARY SYSTEM	ŏ	ĭ	ž	4	4	4	4	4	4	4	4	4	4	4	4	0	4	4	4	4	4	4	4	4	4	
Skin	N	+	+	+	+	+	+	+	N	+	+	+	+	+	+	+	+	+	+	N	N	+	+	+	+	*50
Papilloma, NOS Subcutaneous tissue Fibroma	N X	+	+	+	+	+	+	+	N X	+	+	+	X +	+	+	+	+	+	+	N	N	+	+	+	+	*50 2
RESPIRATORY SYSTEM Lungs and bronchi Trachea	+	++	++	+	++	+++	++	++	++	+++	+	++	+	++	++	++	+++	+++	++	+++	++	+++	++	+	+	50 49
HEMATOPOIETIC SYSTEM				<u> </u>																					-	48
Bone marrow Spleen	+	+	+	+	÷	÷	Ŧ	+	÷	÷	Ŧ	÷	Ŧ	÷	+	Ŧ	÷	Ŧ	Ŧ	Ŧ	Ŧ	Ŧ	Ŧ	Ŧ	Ŧ	50
Lymph nodes Thymus	++	+	+	+	++	+	++	++	++	+	+	+	++	<u>+</u>	+	+	++	+	++++	++	++	++	+++	+++	+++	50 34
CIRCULATORY SYSTEM																									-	<b> </b>
Heart	+	+	+	-	+	+	+	+	+	+	+	-	+	+	+	+	+	+	+	+	+	+	+	+	+	48
DIGESTIVE SYSTEM		*	 -								-							+	-	-	-	-	-	-	_	50
Salivary giand Liver	÷	÷	Ŧ	Ŧ	Ŧ	Ŧ	Ŧ	÷	÷	÷	Ŧ	÷	÷	÷	÷	÷	÷	÷	÷	Ŧ	+	÷	Ŧ	÷	÷	50
Neoplastic nodule Hepatocellular carcinoma									X							x										3
Bile duct Galibladder & common bile duct	+ N	+ N	+ N	+ N	+ N	+ N	+ N	+ N	* N	+ N	+ N	+ N	+ N	+ N	+ N	+ N	+ N	+ N	+ N	+ N	+ N	+ N	+ N	+ N	+ N	50 *50 50 45 50 49
Pancreas	÷	+	÷	+	÷	÷	÷	+	÷	÷	÷	+	÷	+	÷	÷	+	÷	+	+	÷	+	+	÷	+	50
Esophagus Stomach	+	+	+	Ŧ	+	+	÷	÷	+	÷	÷	Ŧ	÷	÷	÷	÷	÷	÷	Ŧ	÷	Ŧ	Ŧ	Ŧ	Ŧ	+ +	50
Small intestine Large intestine	+++	+++	++	++	+++	+++	++	++	+++	++	+++	++	+++	+++	+++	++	+++	+++	+++	+	++	++	++	++	+	49
URINARY SYSTEM																									-	
Kidney Urinary bladder	+	++	+++	+ +	+ +	+ +	+++	+ +	+ +	++	++	++	+++	++	++	++	++	++	+	+++	+++	+++	+-	++	+ +	50 46
ENDOCRINE SYSTEM Pituitary										4						+	<u> </u>				*	-		-		49
Carcinoma, NOS	т										т	-	x			т 	Ŧ	Ŧ	Ŧ						•	2
Adenoma, NOS Adrenal	+	× +	* *	X +	X +	х -	X +	X +	х +	X +	+	+	+	А +	X +	X +	+	+	+	× +	А +	А +	+	<b>*</b>	+	25 49
Cortical adenoma Pheochromocytoma													x			x	x							x	X	1
Thyroid	+	-	+	+	+	+	+	+	+	+	+	+	+	*	+	+	+	+	+	+	+	+	+	+	+	48 1
Follicular cell adenoma Follicular cell carcinoma														•		x										1
C-cell adenoma C cell carcinoma					х				X		X	x								X						4
Parathyroid	-	-	-	-	+	+	+	+	+	-	-	+	+	+	+	-	+	+	-	+	+	-	+	+	+	26
REPRODUCTIVE SYSTEM Mammary gland	<u> </u>		1	-	+	+		*	N	+	+	+	+	+	+	+	N	+	+	+	+	+	+	+	+	+50
Carcinoma, NOS	7'	٢	٣	-	۴	٣	Ŧ	Ŧ	14	Ŧ	٣	٣				x	44	٢	•		٢		۴			í
Adenocarcinoma, NOS Fibroadenoma		N	x		x	XN		X N							• *	x		• •		• -	• -	x	x	x		13
Preputial/clitoral gland Carcinoma, NOS	N	NX	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N X	N	N	N	N	N	N	N	*50 2
Uterus Endometrial stromal polyp	+	+	+	+	+	+	+	*	+	+	+	+	+	+	*	+	+	+	+	+	+	+	+	+	+	50 7
Endometrial stromal sarcoma																										i 50
Ovary	+	+	-	+	+	+	+	+	+	÷	+	+	+	+	+	+	+	<u> </u>	<u>+</u>	-	<u> </u>	<u> </u>	<u> </u>	_	_	
NERVOUS SYSTEM Brain	+	+	+	+	+	+	+	+	÷	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	50
Carcinoma, NOS, invasive Oligodendroglioma																										1
SPECIAL SENSE ORGANS																								<u> </u>	~	
Eye Neurofibroma	N	N	N	N	+	+	N	N	N	N	N	+	N	N	N	N	N	* X	N	N	N	N	N	N	N	*50 1
WUSCULOSKELETAL SYSTEM																									-	L
Muscle Neurofibroma	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N X	N	N	N	N	N	N	N	*50 1
ALL OTHER SYSTEMS Multiple organs 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	*50
CONTRACTOR OF CONT	**			••			.,			.,			••											••	• •	1
Endometrial stromal sarcome, uvasive Leukemia, mononucioar cell	x					х			х			х			х	¥.	¥.	¥.		х			х			23

\*Animais Necropsied

NUMBER	4	15	19	13	37	3	20	9	12	33	3	36	000	30	47	0 1	43	05	10	247	42	222	16	24	ĺ
WEEKSON STUDY	0 5 9	0 6 3	0 7 0	0 7 2	0 7 3	0 7 5	0 7 8	0 8 0	080	0 8 3	0 8 4	0 8 6	0 8 7	0 8 7	0 8 8	089	0 8 9	990	0 9 0	0 9 1	0 9 2	0 9 3	0 9 5	0 9 5	
INTEGUMENTARY SYSTEM Skin	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	
Keratoacanthoma Subcutaneous tasue Sarcoma, NOS Lapoma Hemangiosarcoma	+	+	+	+	+	+	+	+	+	+	X +	+	+	+	+	+	+	+	+	+	+	+	+	+	•
RESPIRATORY SYSTEM Lungs and bronchi C-cell carcinoma, metastatic Endometrial stromal sercoms, metastat	+ x	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	*	+	+	+	+	+	+	
Osteosarcoma, metastatic Frachea C-ceil carcinoma, invasive	+	+	- N	+	+	+	-	+	+	+	+	+	+	+	-	+	+	+ X	+	* *	+	+	+	+	
C cell carcinoma, invasive		+	N	+	+	*	N	+	+	+	+	+	+	+	IN	+	+	x	+	+	+	+	+	N	
HEMATOPOIETIC SYSTEM Bone marrow Spleen	+++	-	-	+++	+	+++	+	+++	++	++	+++	+++	+++	+++		+++	++++	+++	++	+++	+++	++	+++	+++	
ymph nodes Endometriai stromal sarcema, metastat Fhymus	x -	+	+	++	+	+	+ +	+	+ -	+ +	+ +	+ +	+ +	+ +	+	++	++	++	++	++	++	++	+	+	
IRCULATORY SYSTEM	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	-
DIGESTIVE SYSTEM	++	+	++	++	++	++	+	+++	+	+	++	++	+++	+++	Ŧ	+	++	++	++	+	++	++	+++	++	-
Neoplastic nodule hile duct Gallbiadder & common bile duct ancreas	+ N +	+ N +	+ N	+ N	X + N +	+ N +	+ N	+ N +	+ N +	+ N +	+ N +	+ N +	+ N +	+ N + N	+ N	X + N	+ N +	+ N +	+ N	+ N	X + N	+N	+ N +	+ N	
ancreas Isophagus Itomach imali intestine	++++	++++	+	++++	++++	++++	-+++	++++	++++	++++	+++++	+++	+++++	+++++	-+	++++	++++	++++	++++	++++	++++	++++	++++	++++	
Large intestine	+	+	-	+	-	÷	-	+	÷	÷	÷	+	+	÷	-	÷	+	÷	+	+	÷	+	÷	÷	
JRINARY SYSTEM Gidney Jrinary bladder	+++	+ +	+ -	+ +	+ +	+ -	+ +	+ +	+ +	+ +	+ +	<b>+</b> +	<b>+</b> +	<b>+</b> +	-	+ +	++	+ +	+ +	+ +	+++	+ +	<b>+</b> +	+ +	
NDOCRINE SYSTEM htuitary Adenoma, NOS	+	+	+	+	+	*	+	*	*	+	 *	*	* *	+ x	-	÷ x	 *	+	+	+	+	+	+	+	
Adrenal Pheochromocytoma Thyroid	+	+	+	+	+	+	+	+	÷	+	+	+	+	+	-	+	+	+	+	+	+	+	+	+	
C cell adenoma C cell carcinoma Parathyroid	+	+	-	+	-	+	_	-	-	+	+	-	+	+	-	+	+	× ×	+	ž	-	+	+	+	
EPRODUCTIVE SYSTEM	+	+	N	N	+	+	+	N	+	+	+	N	+	+	+	+	+	+	+	+	+	+	+	+	-
Adenoma, NOS Fibroadenoma reputual/clitoral gland	N	N	N	N	X N	X N	N	N	X N	N	N	N	N	X N	N	N	N	N	N	X N	N	N	X N	N	
Carcinoma, NOS Cystadenoma, NOS Iterus Fordematinai stroma i ankun	+	-	+	+	+	+	+	X +	+	÷	+	+	+	+	-	+	+	+	+	+	+	+	+	+	
Endometriai stromai polyp Endometriai stromai sarcoma Ivary	X +	+	-	+	+	÷	+	+	+	+	+	+	+	+	-	+	•	+	X +	+	+	+	+	+	
FERVOUS SYSTEM	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	-
USCULOSKELETAL SYSTEM one Osteosarcoma Osteosarcoma, invasive	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N X X	N	N	N	N	-
ODY CAVITIES eritoneum Meeothelioma, malignant	N	N	N	N X	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	1
LL OTHER SYSTEMS [ultiple organs NOS Endometrial stromal ascenne, invasive Mesothelioma, metastatic	N X	N	N	N X	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	1
Malignant lymphoma, NOS Leukemia, mononuclear cell		x			x		X	x		x	x			x :	x	x	x		x	x	x	x		x	

TABLE A4. INDIVIDUAL ANIMAL TUMOR PATHOLOGY OF FEMALE RATS IN THETWO-YEAR INHALATION STUDY OF DICHLOROMETHANE: HIGH DOSE

TABLE A4.	INDIVIDUAL ANIMAI	. TUMOR PATHOLOGY	OF FEMALE RATS:	HIGH DOSE
		(Continued)		

ANIMAL Number	0 3 5	040	045	0 4 1	039	049	004	038	029	025	0 0 2	0 0 3	006	007	0 1 1	0	0 1 7	0 1 8	0 2 1	023	028	0 3 2	044	04	0 5 0	
WEEKS ON STUDY	0 9 5	0 9 6	096	0 9 7	1 0 0	1 0	1 0 1	1 0 1	1 0 2	1 0 3	104	104	1 0 4	1 0 4	104	104	104	104	104	1	104	104	104	104	1 0 4	TOTAL: TISSUES TUMORS
INTEGUMENTARY SYSTEM	N		N	+	+	+	N	+	+	+		<u> </u>	-	+	+				•		+		-	-		50
Keratoscanthoma Subcutaneous tasus Sercoma, NOS Lupotna Hemangtosarcoma	N	+	N	+	+	+	N	+	+	+	+	+	+	+	+ X	+	+	+	*	+	+	+	+	+	+	50
RESPIRATORY SYSTEM Lungs and bronchi C-cell carcinoma, metastatic Endometrial stromal sarcoma, metas Osteosarcoma, metastatic	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	50
Trachea C-cell carcinoma, invasive Larynx C-cell carcinoma, invasive	+	++	++	+ +	+ +	- +	+ +	+ +	+ N	+ +	+ +	++	+ +	+ +	+ +	+ +	+ +	+ +	+	++	++	+ +	+	+ +	+ +	46 50
HEMATOPOIETIC SYSTEM Bone marrow Spleen Lymph nodes Endometrial stromal sarcoma, metas	++++	++++	++++	++++	+++++	+++++	++++	+++	+++	+++	++++	++++	++++	++++	++++	+++	++++	++++	++++	- + +	++++	++++	+++++	++++	- + + +	46 49 50
Thymus	-	-	_	+	+	-	-	-	+	+	+	+	+	+		+	+	-	+	+	+	+	+	+	+	31
CIRCULATORY SYSTEM Heart	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	50
DIGESTIVE SYSTEM Sahvary gland Liver Neoplastic nodule Bile duct	+++++	+++++	+++++	++++++	+++++	++ +	++ +	++++	+++ +	++ + X +	+++++++++++++++++++++++++++++++++++++++	+++++++++++++++++++++++++++++++++++++++	++++++	+++++	+++++++++++++++++++++++++++++++++++++++	++x+	++++++	+++++	+++++	+++++	+++++	++ +	+++++++++++++++++++++++++++++++++++++++	+++++++++++++++++++++++++++++++++++++++	++++	49 50 5 50
Gallbladder & common bile duct Pancreas Esophagus Stomach	N + + +	·N+++	N+++	N+++	Z +   +	N - + +	·N+++	N+++	N+++	N+++	N+++	N+++	N+++	N+++	N+++	N+++	N + + +	N+++	N+++	N+++	N+++	N + + +	N+++	·N +   +	N + - +	*50 46 47 48
Small intestine Large intestine	++	++	++	++	+ +	++	++	++	+ +	+ +	+ +	+ +	+ +	++	+ +	+ +	+ +	+ +	+++	++	+ +	+ +	+ +	+ +	+ +	47
URINARY SYSTEM Kidney Urinary bladder	+++	+++	++	++	++	++	+++	+++	++++	++	+++	+++	+++	+++	+++	+++	++	++	+++	++	++	+++	++	+++	++	49 47
ENDOCRINE SYSTEM Pituitary Adenoma, NOS Adrenal	+++	+ x +	++	+++	+++	**	++	**	++	+ x +	+ * *	* *	+++	* *	+	* *	* *	+++	+ x +	**	* *	**	+ * *	+++	- * *	49 25 49
Pheochromocytoma Thyroid C-cell adenoma	+	+	+	+	+ X	+	+	+	+	-	+	+	+	+	+	+	-	+	X -	+	+	+	+	-	-	42 2
C-cell carcinoma Parathyroid	+	+	_	-	+	-	-	-	-	~	+	X +	+	-	_	-	-	-	-	+	+	+	+	-	-	2 26
REPRODUCTIVE SYSTEM Mammary gland	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	*50
Adenoma, NOS Fibroadenoma Preputial/clitoral gland Carcinoma, NOS	N	X N	N	X N	N	X N	N	X N	X N X	X N	X N	X N	X N	X N	N	X N X	X N	X N	N	N	* N	X N	X N	N	X N	1 22 *50 2
Cystadenoma, NOS Uterus Endometrial stromal polyp Endometrial stromal sarcoma	+	+	+	+	-	+	+	+	+	*	+	+	*	+	+	+	+	+	*	+	+	+	*	+	*	1 47 6 2
Ovary NERVOUS SYSTEM	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+•	-	48
Brainvas MUSCULOSKELETAL SYSTEM	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	50
Osteosarcoma, invasive	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	*50 1 1
BODY CAVITIES Peritoneum Mesothelioms, malignant	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	*50 1
ALL OTHER SYSTEMS Multiple organs NOS Endometrial stromal sarcoma, invasive Mesothelioma, metastatic Malignant lymphoma, 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	*50 1 1
Leukemia, mononuclear cell	<u>x</u>		X	<u>x</u>	x	X	x	x		x											x				_	23

\*Animals Necropsied

#### **APPENDIX B**

# SUMMARY OF THE INCIDENCE OF NEOPLASMS IN MICE IN THE TWO-YEAR INHALATION STUDIES OF DICHLOROMETHANE

#### TABLE B1. SUMMARY OF THE INCIDENCE OF NEOPLASMS IN MALE MICE IN THE TWO-YEAR INHALATION STUDY OF DICHLOROMETHANE

	CONTR	OL (CHAMB)	LOW	DOSE	HIG	H DOSE
ANIMALS INITIALLY IN STUDY	50		50		50	
ANIMALS NECROPSIED	50		50		50	
ANIMALS EXAMINED HISTOPATHOLOGICALLY	Y 50		50		50	
INTEGUMENTARY SYSTEM None						
RESPIRATORY SYSTEM						<u></u>
*Nasal cavity	(50)		(50)		(50)	
Undifferentiated carcinoma						(2%)
#Lung	(50)		(50)		(50)	( <b>a a</b> :
Undiff. carcinoma, metastatic						(2%)
Adenocarcinoma, NOS, metastatic	-	(00)	~	(00)		(2%)
Hepatocellular carcinoma, metastatic		(2%)	-	(6%)		(8%)
Alveolar/bronchiolar adenoma Alveolar/bronchiolar carcinoma		(6%) (4%)		(38%)		(48%) (56%)
Aveolar/oroneniolar carcinoma	2	(4%)	10	(20%)		(56%)
HEMATOPOIETIC SYSTEM	/= 4					
*Multiple organs	(50)		(50)	(0.01)	(50)	( <b>A -</b> ) -
Malignant lymphoma, NOS		(4%)	1	(2%)		(2%)
Malig. lymphoma, lymphocytic type	1	(2%)	~	(00)	1	(2%)
Malignant lymphoma, mixed type	(10)			(2%)	140	
#Spleen	(49)	(90)	(49)		(48)	
Malignant lymphoma, mixed type		(2%)	(40)		/ 405	
#Mesenteric l. node Malignant lymphoma, mixed type	(42) 1	(2%)	(45) 1	(2%)	(40)	
		······································				
CIRCULATORY SYSTEM						
*Multiple organs	(50)		(50)		(50)	
Hemangiosarcoma						(2%)
#Heart	(50)		(50)		(50)	
Alveolar/bronchiolar carcinoma, metas		(90)	1	(2%)		
Hemangiosarcoma		(2%)	(40)		(40)	
#Liver	(50)	(90)	(49)		(49)	(90)
Hemangioma Hemangiosarcoma	1	(2%)	1	(2%)		(2%) (8%)
#Prostate	(50)		(50)	(470)	(47)	(070)
Hemangiosarcoma	(00)		<b>x</b> <i>y</i>	(2%)	(47)	
DIGESTIVE SYSTEM	(50)		(40)		(40)	
#Liver Hepatocellular adenoma		(20%)	(49) 14	(29%)	(49)	(29%)
Hepatocellular carcinoma		(26%)		(31%)		(29%)
Alveolar/bronchiolar carcinoma, metas	10			(2%)		(2%)
URINARY SYSTEM						
#Kidney	(50)		(49)		(50)	
Alveolar/bronchiolar carcinoma, metas	(00)		(40)			(2%)
Tubular cell adenoma						(2%)
Papillary cystadenoma, NOS			1	(2%)	•	,

#### TABLE B1. SUMMARY OF THE INCIDENCE OF NEOPLASMS IN MALE MICE IN THE TWO-YEAR INHALATION STUDY OF DICHLOROMETHANE (Continued)

	CONTROL (CHAMB)	LOW DOSE	HIGH DOSE
ENDOCRINE SYSTEM			
#Adrenal	(50)	(46)	(50)
Hepatocellular carcinoma, metastatic		()	2 (4%)
Alveolar/bronchiolar carcinoma, metas			1 (2%)
#Adrenal/capsule	(50)	(46)	(50)
Adenoma, NOS	1 (2%)		
REPRODUCTIVE SYSTEM			
#Testis	(50)	(50)	(50)
Interstitial cell tumor	3 (6%)		
NERVOUS SYSTEM			
None			
SPECIAL SENSE ORGANS			·
None			
MUSCULOSKELETAL SYSTEM			
*Vertebral column	(50)	(50)	(50)
Alveolar/bronchiolar carcinoma, metas		(***)	1 (2%)
*Rib	(50)	(50)	(50)
Alveolar/bronchiolar carcinoma, metas		1 (2%)	
BODY CAVITIES			
*Mediastinum	(50)	(50)	(50)
Alveolar/bronchiolar carcinoma, metas			1 (2%)
ALL OTHER SYSTEMS			
None			
ANIMAL DISPOSITION SUMMARY		<u></u>	
Animals initially in study	50	50	50
Natural death	5	12	16
Moribund sacrifice	6	12	24
Terminal sacrifice	39	24	9
Accidentally killed, nda		1	
Accidentally killed, NOS	······································	1	1
<b>FUMOR SUMMARY</b>			
Total animals with primary tumors**	34	37	46
Total primary tumors	39	64	102
Total animals with benign tumors	18	24	30
Total benign tumors Total animals with malignant tumors	18 21	34 26	40 43
Total animals with malignant tumors Total malignant tumors	21 21	30	43 62
Total animals with secondary tumors##	1	5	9
Total secondary tumors	ī	6	13

\* Number of animals necropsied \*\* Primary tumors: all tumors except secondary tumors

# Number of animals with tissue examined microscopically
 ## Secondary tumors: metastatic tumors or tumors invasive into an adjacent organ

# TABLE B2. SUMMARY OF THE INCIDENCE OF NEOPLASMS IN FEMALE MICE IN THE TWO-YEARINHALATION STUDY OF DICHLOROMETHANE

	CONTR	OL (CHAMB)	LOW	DOSE	HIG	H DOSE
ANIMALS INITIALLY IN STUDY	50	<u> </u>	50		50	
ANIMALS MISSING	- •		1		1	
ANIMALS NECROPSIED	50		49		49	
ANIMALS EXAMINED HISTOPATHOLOGICALL	Y 50		48		49	
INTEGUMENTARY SYSTEM						
*Subcut tissue	(50)		(49)		(49)	
Fibrosarcoma			2	(4%)	1	(2%)
RESPIRATORY SYSTEM			-			
#Lung	(50)		(48)		(48)	
Adenocarcinoma, NOS, metastatic				(2%)		
Hepatocellular carcinoma, metastatic	~	(4		(8%)		(6%)
Alveolar/bronchiolar adenoma		(4%)		(48%)		(58%)
Alveolar/bronchiolar carcinoma		(2%)		(27%) (2%)	29	(60%)
Osteosarcoma, metastatic	1	(2%)	1	(2%)		
IEMATOPOIETIC SYSTEM						
*Multiple organs	(50)	(	(49)		(49)	(00)
Malignant lymphoma, NOS		(4%)			1	(2%)
Malig. lymphoma, lymphocytic type	2	(4%)		(90)		(60)
Malig. lymphoma, histiocytic type				(2%) (8%)	3	(6%)
Malignant lymphoma, mixed type #Spleen	(49)		4 (48)	(8%)	(47)	
Malig. lymphoma, histiocytic type		(2%)	(40)			(2%)
#Bronchial lymph node	(49)	(270)	(47)		(43)	(470)
Alveolar/bronchiolar carcinoma, metas	()		(		• •	(2%)
#Mediastinal I. node	(49)		(47)		(43)	
Alveolar/bronchiolar carcinoma, metas					1	(2%)
#Mesenteric I. node	(49)	_	(47)		(43)	
Malignant lymphoma, NOS		(2%)				
*Pleural cavity	(50)		(49)	(0.2)	(49)	
Malignant lymphoma, NOS	(20)			(2%)	(40)	
#Liver	(50)	(07)	(48)		(48)	(00)
Malignant lymphoma, NOS		(2%)	(40)			(2%)
#Kidney	(49)		(48)		(47)	(2%)
Malignant lymphoma, mixed type #Uterus	(50)		(48)		(47)	(270)
Malig. lymphoma, histiocytic type	(00)			(2%)	(47)	
CIRCULATORY SYSTEM						
#Spleen	(49)		(48)		(47)	
Hemangiosarcoma	()		(40)			(2%)
#Heart	(49)		(48)		(49)	
Alveolar/bronchiolar carcinoma, metas						(4%)
#Liver	(50)		(48)		(48)	
Hemangiosarcoma			2	(4%)		(2%)
Hemangiosarcoma, metastatic						(2%)
#Thymus	(30)		(20)		(9)	(
Hemangiosarcoma, metastatic					1	(11%)
DIGESTIVE SYSTEM						
#Liver	(50)		(48)		(48)	
Hepatocellular adenoma		(4%)		(13%)		(46%)
Hepatocellular carcinoma	1	(2%)	11	(23%)		(67%)
Alveolar/bronchiolar carcinoma, metas					1	(2%)
Hepatoblastoma					-	(2%)

	CONTR	OL (CHAMB)	LOW	DOSE	HIG	H DOSE
DIGESTIVE SYSTEM (Continued)					<u></u>	
#Duodenum	(46)		(47)		(47)	
Adenocarcinoma in adenomatous polyp	1	(2%)		<u> </u>		
URINARY SYSTEM						
#Kidney	(49)		(48)		(47)	
Papillary cystadenoma, NOS			1	(2%)		
ENDOCRINE SYSTEM						
#Pituitary	(46)		(44)		(44)	
Adenoma, NOS			2	(5%)	1	(2%)
#Anterior pituitary	(46)		(44)		(44)	
Adenoma, NOS		(9%)				
#Adrenal	(50)		(48)		(48)	
Cortical adenoma						(2%)
#Thyroid	(48)	(0.4)	(47)	(	(46)	
Follicular cell adenoma	1	(2%)	1	(2%)	4	(9%)
REPRODUCTIVE SYSTEM						
*Mammary gland	(50)		(49)		(49)	
Adenocarcinoma, NOS	2	(4%)	3	(6%)		
#Uterus	(50)		(48)		(47)	
Adenocarcinoma, NOS	1	(2%)				
Leiomyosarcoma					1	(2%)
Endometrial stromal polyp		(2%)		(2%)		
#Ovary	(50)		(47)	(0.01)	(43)	
Cystadenoma, NOS		(0.77)	1	(2%)		
Papillary cystadenoma, NOS Teratoma, NOS	1	(2%)			1	(2%)
NERVOUS SYSTEM None						
SPECIAL SENSE ORGANS						
*Harderian gland	(50)		(49)		(49)	
Adenocarcinoma, NOS	1	(2%)				
MUSCULOSKELETAL SYSTEM						
*Rib	(50)		(49)		(49)	
Osteosarcoma			1	(2%)		
BODY CAVITIES						
*Pelvis	(50)		(49)		(49)	
Osteosarcoma		(2%)	/			
ALL OTHER SYSTEMS						
*Multiple organs	(50)		(49)		(49)	
Alveolar/bronchiolar carcinoma, metas						(2%)
Adipose tissue						
Hepatocellular carcinoma, metastatic						

### TABLE B2. SUMMARY OF THE INCIDENCE OF NEOPLASMS IN FEMALE MICE IN THE TWO-YEAR INHALATION STUDY OF DICHLOROMETHANE (Continued)

## TABLE B2. SUMMARY OF THE INCIDENCE OF NEOPLASMS IN FEMALE MICE IN THE TWO-YEAR INHALATION STUDY OF DICHLOROMETHANE (Continued)

	CONTROL (CHAMB)	LOW DOSE	HIGH DOSE
ANIMAL DISPOSITION SUMMARY			
Animals initially in study	50	50	50
Natural death	16	8	9
Moribund sacrifice	8	14	31
Terminal sacrifice	25	25	8
Accidentally killed, nda	1	1	1
Accidentally killed, NOS		1	
Animal missing		1	1
TUMOR SUMMARY Total animals with primary tumors** Total primary tumors Total animals with benign tumors Total benign tumors Total animals with malignant tumors Total animals with secondary tumors##	18 26 9 11 13 15 1	41 74 26 35 30 39 6	47 130 39 56 46 73 9
Total secondary tumors Total animals with tumors uncertain	1	7	11
benign or malignant			1
Total uncertain tumors			1

\* Number of animals necropsied
\*\* Primary tumors: all tumors except secondary tumors
# Number of animals with tissue examined microscopically
## Secondary tumors: metastatic tumors or tumors invasive into an adjacent organ

ANIMAL NUMBER	0 2 3	0 3 9	0 4 0	0 2 2	044	0 2 8	0 0 2	0 1  3	0 3 6	004	0 3 1	0 0 1	003	0 0 5	0 0 6	0 0 7	0 0 8	0 0 9	0 1 0	0 1 1	0 1 2	0 1 4	0 1 5	0 1 6	0 1 7
WEEKS ON STUDY	0 7 1	0 7 3	0 7 3	0 7 4	080	0 8 1	0 8 4	0 8 7	0 9 4	0 9 5	0 9 6	1 0 4	104	1 0 4	1 0 4	1 0 4	104	1 0 4	1 0 4	1 0 4	1 0 4	1 0 4	104	1 0 4	1 0 4
RESPIRATORY SYSTEM Lungs and bronchi Hepatocellular carcunoma, metastatic Alveolar/bronchiolar adenoma Alveolar/bronchiolar carcunoma Trachea	+	· +	+	++	++	+	+	++	+ X +	+	+	+	++	+	++	+ x+	+ x +	+	+	++	+ X +	++	++	+	+++
HEMATOPOIETIC SYSTEM Bone marrow Spleen Malignant lymphoma, mixed type Lymph nodes Malignant lymphoma, mixed type Thymus	+ + + -	· + · +	++++	+++-+	++++-	+++-	++ - +	++	++++-	++++-	+++-	++++-	++	++ + -	+++++	++++++	++++++	++	+++-	++ + +	++ + +	++ - +	++ - +	+ + + + +	+ +
CIRCULATORY SYSTEM Heart Hemanguosarcoma	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+
DIGESTIVE SYSTEM Salivary gland Liver Hepatocellular adenoma Hemangioma Bile duct Gallbladder & common bile duct Pancreas Esophagus Stomach Small untestune Large intestune	++ +++++	++x +z+++1	++ X ++++++	++X ++++++	++XX ++++++	++ X +N+++++	++ +++++++	++ X++++++	++ +2++++	++ x +++	++ ++++++	++X ++++++	++ +2+++++	++ ++++++	++ +Z+++++	++ ++++++	++ +++++++	++x +x++++	++X ++++++	++X ++++++	++ ++++++	++ ++++++	++ ++++++		++ X ++++++
URINARY SYSTEM Kidney Urinary bladder	++	++	+++	++++	+++	+++	++	++++	+++	÷	+++	++	++++	+++	+++	+++	+++	++++	++++	+++	+++	++	++	+	- + +
ENDOCRINE SYSTEM Pitutary Adrenai Adenoma, NOS Thyroid Parathyroid	 + + + +	++ ++ ++	+++ +++	++++++	+++ ++-	++++-	++ ++	++ +	+++	++++	++	++++	+++++	++ ++ ++	+++-	++++-	+	++	++++-	++++-	++++-	++++-	++ ++ ++	++++	+ + +
REPRODUCTIVE SYSTEM Mammary gland Testis Interstitial cell tumor Prostate	N + +	N + +	N + +	N + +	N + +	N + +	N + +	N + +	N + +	N + +	N + +	N + +	N + +	N + +	N + X +	N + +	N + +	N + +	N + +	N + +	N + +	N + +	N + +	N + +	- N + +
NERVOUS SYSTEM Brain	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+
ALL OTHER SYSTEMS Multiple organs NOS Malignant lymphoma, NOS Malig. lymphoma, lymphocytic type	N X	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N X	N	N	N	N	N	N

TABLE B3. INDIVIDUAL ANIMAL TUMOR PATHOLOGY OF MALE MICE IN THE TWO-YEAR INHALATION STUDY OF DICHLOROMETHANE: UNTREATED CONTROL

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Tissue Examined Microscopically Required Tissue Not Examined Microscopically Tumor Incidence Necropsy, No Autolysis, No Microscopic Examination Animal Missexed - : X : N : S ·

No Tissue Information Submitted
 C : Necropsy, No Histology Due To Protocol
 A : Autolysis
 M : Animal Missing
 B : No Necropsy Performed

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

ANIMAL NUMBER	0 1 8	0 1 9	020	0 2 1	024	0 2 5	0 2 6	0 21 7	0 2 9	0 8 0	0 3 2	0 3 3	0 3 4	0 3 5	0 3 7	0 3 8	0 4 1	0 4 2	0 4 3	0 4 5	046	047	0 4 8	0 4 9	0 5 0	
WEEKSON STUDY	1 0 4	1 0 4	1 0 4	104	104	1 0 4	1 0 4	104	1 0 4	1 0 4	104	1 0 4	104	1 0 4	104	1 0 4	1 0 4	104	1 0 4	104	1 0 4	1 0 4	104	104	1 0 4	TOTAL TISSUES TUMORS
RESPIRATORY SYSTEM Lungs and bronch: Hepatocellular carcinoma, metastatic Aiveolar/bronchiolar adenoma Aiveolar/bronchiolar carcinoma Trachea	+ x +	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+ X +	+	+	+	+	+	+	+	50 1 3 2 47
HEMATOPOLETIC SYSTEM Bone marrow Spleen Malignant lymphoma, mixed type Lymph nodes Malignant lymphoma, mixed type Thymus	+++++-	+ - + -	++X+ +	+++++++	++ ++ +	++ ++ +	++ ++ +	++++++	++ + +	++ + +	++ +x+	++ ++ + +	++++-	++ + -	++++-	++++-	++ + -	+++++	++ + -	++ + +	++ + +	++	++ + -	++++++	<b>-</b> ++ + +	49 49 1 42 1 26
CIRCULATORY SYSTEM Heart Hemangiosarcoma	+	+	+	+	+	*	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	50 1
DIGESTIVE SYSTEM Salivary gland Liver Hepatocellular adenoma Hepatocellular carcinoma Hemangroma	+ + x	÷ x	++	++	+++	+++	++	+++	+ + + + + + + + + + + + + + + + + + +	++++	+ * x	++++	‡ x	+ + x	++++	+ + X	+ + x	++	+ + x	+++	÷ x	+++	+ + x	- +	 + +	48 50 10 13 1
Sile duct Gallbladder & common bile duct Pancreas Esophagus Stomach Small intestine Large intestine	++++++	+ 2 + + + + + +	++++++	++++++	+ 7 + + + + + + + + + + + + + + + + + +	++++++	++++++	++++++	++++++	+2+++++	+++++++	++++++	+++++++	++++++	+ 7 + + + + +	+++++++	++++++	++++++	++++++	++++++	++++++	++++++	++++++	++++++	++++++	50 50 50 47 49 49 49
CRINARY SYSTEM Kidnev Urinary bladder	 +	+++	++	++	+++	+ +	+ + +	+ +	+ +		+ + +	++	 + +	+ +	++	++++	+++	÷	÷	+ +	++++	++	++++		- + +	50 50
ENDOCRINE SYSTEM Pituitary Adrenai Adenoma, NOS Thvroid Parathyroid		++ ++	++ ++ ++	++ + + -	++ + -	++ ++	++ ++	++ ++	++ ++	++++-	+++++	++ ++	· · · · · · · ·	++ ++	++	++ ++	++ + + -	++++-	+++++	++	++ ++	++ ++	++ ++	++X++	++ +-	48 50 1 45 21
REPRODUCTIVE SYSTEM Mammary gland Testis Interstitial cell tumor Prostate	N + +	N + +	N + X +	N++	N + +	N + +	N + +	N + +	N + +	N + +	N + +	N + +	N + X +	N + +	N + +	N + +	N + +	N + +	N + +	N + +	N + +	N + +	N + +	N + +	N + +	*50 50 3 50
NERVOUS SYSTEM Brain	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	50
ALL OTHER SYSTEMS Multiple organs NOS Malignant lymphoma, NOS Malig lymphoma, lymphocytic type	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N X	N	И	N	И	N	N	N	N	N	N	*50 2 1

\* Animals Necropsied

ANIMAL NUMBER	0	0 3 6	0 4 2	0 1 6	0 1 8	0 3 5	0 1 5	0 2 6	0 3 8	0 4 8	0 2 9	0 3 2	0 0 5	0  3  3	0 1 4	0 1 9	0 3 4	030	0 0 2	0 0 9	0 3 1	0 2 0	0 2 4	0 3 7	0 4 4
WEEKS ON STUDY	0 3 1	0 3 1	0 3 1	0 6 0	0 7 1	0 7 2	0 7 6	0 7 6	0 7 8	0 7 8	0 8 1	0 8 3	0 8 4	0 8 7	0 8 9	0 8 9	0 8 9	0 9 0	0 9 4	0 9 4	0 9 7	0 9 8	1 0 1	1 0 1	1 0 1
RESPIRATORY SYSTEM Lungs and bronch: Hepetoceilular carcinoma, metastatic Alveolar/bronchiolar adenoma Alveolar/bronchiolar carcinoma Trachea	+	+	+	+	+ x +	+	+	+	+ x x +	+ X +	+	+	+	+ X +	* * +	+ X X +	+	+ X +	+ X +	+	+ X +	+ x x +	+ X +	++	+ X +
HEMATOPOIETIC SYSTEM Bone marrow Spieen Lymph nodes Malignant lymphoma, mixed type Thymus	++++	+++	+++	+++ -	-++ + +	++++++	+++ -	+++	+ - + -	+++ +	+++ -	+++	++	+++++++++++++++++++++++++++++++++++++++	+++ +	+++ -	+++ -	++	+++++++++++++++++++++++++++++++++++++++	++++++++	++	+++	+++ -	+++ -	+++++++++++++++++++++++++++++++++++++++
CIRCULATORY SYSTEM Heart Alveolar/bronchiolar ca, metastatic	+	+	+	+	+	+	+	+	*	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+
DIGESTIVE SYSTEM Salıvary gland Lıver Hepatocellular adenoma Hepatocellular carcınoma Aiveolar/bronchiolar ca, metastatic	+ +	+++	++	+++	+ + x	+ + x	+++	+++	-	+ + x	++++	+ + x	+ + x	++++	+ + x	++	+++	+ + x	+ + X	++++	++++	+ + X X	+ + X X	+++	+ * X
Hemangiosarcoma Bile duct Galibiadder & common bile duct Pancreas Esophagus Stomach Small intestine Large intestine	+ 2, + + + + +	++++++	+++++++	+2,++111	+++++++	+++++++	+++++++	+++++++		+++++++	+++++++	+++++++	+ 2	+ >, + + + + + +	+++++++	+++++++	+ + + + + + +	+ >, + + + + + +	+++++++	+++++++	+++++++	+++++++	+ 7, + + + + + +	+ 7, + + + + + +	+++++++
CRINARY SYSTEM Kidney Pupillary cystadenoma, NOS Urinary bladder	++	++	++	++	++	+ -	+++	++	- +	++	+	+	+	+	++	+++	+++	+	+	+++	+++	+	+++	++	+++
ENDOCRINE SYSTEM Pituitary Adrenal Thyroid Parathyroid	++++-	+++-	++	+++++	+++-	+++-	++++	+++-	+ - + +	+ +	+++-	++	+	++++-	+++ -	++++-	+++-	++++	++++++	++++-	++-+	+++++	+++++	+++-	++++
REPRODUCTIVE SYSTEM Mammary gland Testus Prostate Hemangiosarcoma	N + +	N + +	X + +	N + +	N + +	N + +	N + +	N + +	N + +	N + +	N + +	N + +	N + +	N + +	N + +	N + +	7 + Y	N + +	N + +	N + +	N + +	N + +	N + +	N + +	- N + + X
NERVOUS SYSTEM Brain	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	-   +
MUSCULOSKELETAL SYSTEM Bone Alveolar/bronchiolar ca, metastatic	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N X	N	N	N	N	N	N	N	N	- א
ALL OTHER SYSTEMS Multiple organs NOS Malignant lymphoma, NOS Malignant lymphoma, mixed type	N	N	N	N	N	N	N X	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	- א 

### TABLE B3. INDIVIDUAL ANIMAL TUMOR PATHOLOGY OF MALE MICE IN THE<br/>TWO-YEAR INHALATION STUDY OF DICHLOROMETHANE: LOW DOSE

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

ANIMAL NUMBER	0 2 3	0	0	0	0	0	00	0	0	0	0	0 2 1	0 2 2	025	0 2 7	028	0  3  9	0+0	04	042	044	04	047	04	0 5 0	<u></u>
WEEKSON STUDY	1 0 2	1 0 4	104	1 0 4	104	1 0 4	104	104	1 0 4	104	104	1 0 4	104	104	101	104	1 0 4	104	104	104	104	1 0 4	1 0 4	104	1 0 4	TOTAL. TISSUES TUMORS
RESPIRATORY SYSTEM Lungs and bronchi Hepatocellular carcinoma, metastatic Alveolar/bronchiolar adenoma Alveolar/bronchiolar carcinoma Trachea	+ X -	+ X +	+ X +	+	+	+ X X +	+	+ X +	+ X +	+ X +	+ X +	+ X +	+ X +	+	+	+ X +	+ X +	+ X +	+	+	+	+ X +	+ X +	+ X +	+	50 3 19 10 48
HEMATOPOIETIC SYSTEM Bone marrow Spleen Lymph nodes Malignant lymphoma, mixed type Thymus	++	++++++	+++	+++ -	+++ -	+++ -	+++ -	++++++	++++++	+++ -	++++++	++-++	+++ +	+++ -	++++++	+ + + + X +	+++ -	++++++	+++ +	+++ +	++++++	++++++	+++ +	+++ -	+++++++	49 49 45 1 23
CIRCULATORY SYSTEM Heart Alveolar/bronchiolar ca. metastatic	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	50 1
DICESTIVE SYSTEM Salivary gland Liver Hepatocellular adenoma Hepatocellular carcinoma Alveolar/bronchiolar ca. metastatic Hemangiosarcoma	+ + x	+ + x	+++	++	+ + x x	+++	+ + x	+++	+ + x	+ * x	+ + x	++	+ + X X	+ + x x	+ + x	+ * x	++	+++	+++	+++	+ + +	+ + x	+ + x	+ + x	+++	49 49 14 15 1 1
Ble duct Galibladder & common bile duct Pancreas Esophagus Stomach Small intestine Large intestine	+ + + + + + +	++++++	++++++	+++++++	+ + + + + + + +	+++++++	+ + + + + + +	+ + + + + + + +	+ + + + + + +	++++++	+++++++	+ 7 + + + + + +	+++++++	+ 7. + + + + + +	+ > + + + + + +	+++++++	+++++++	+ + + + + + +	+ + + + + + + +	+++++++	+ Z + + + + + +	+++++++	+ + + + + + + +	++++++	+++++++	49 •50 48 48 47 46 46 46
CRINARY SYSTEM Kidney Papillary cystadenoma, NOS Urinary bladder	+	++	+	+	+	++	+++	++	++	++	+++	+	+	++	+	++	++	+	+	+	+	++	+	* *	+++	49 1 49
ENDOCRINE SYSTEM Pututary Adrenal Thyroid Parathyroid	+ + + +	++++	++++-	++++	+++ -	++++	++++	+++-	+++-	+++-	+++++++++++++++++++++++++++++++++++++++	+ + + + + -	+++++	+++-	++++	++++	+++ +	+++-	+++-	++++	++++	++++	++++	+ + + -	+++-	48 46 47 19
REPRODUCTIVE SYSTEM Mammary gland Testis Prostate Hemangiosarcoma	N + +	¥ + ×	X + +	N + +	++2	X + +	× + +	7++	++2	N + +	×++	X + +	N + +	N + +	N + +	N + +	++2	N + +	X + +	N + +	7++	7.++	N + +	N + +	N + +	*50 50 50 1
VERVOUS SYSTEM Brain	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	50
VIUSCULOSKELETAL SYSTEM Bone Alveolar/bronchiolar ca, metastatic	N	`	1	`	N	N	1	N	1	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	*50 1
ALL OTHER SYSTEMS Multiple organs NOS Malignant lymphoma, NOS Malignant lymphoma, mixed type	N	N	N	N	N	N	N X	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	*50 1 1

\* Animals Necropsied

												_							_			- 17			
ANIMAL NUMBER	0 4 2	0 4 1	0 5 0	0 1 4	0000	0 2 4	0 3 7	030	0 4 5	0 1 3	0 1 8	0 2 1	048	0 0 5	026	0 0 3	0 2 9	0 1 5	0 3 3	0 2 5	046	0 0 8	0 3 5	0 4 0	0 4 4
WEEKS ON STUDY	0 0 0	0 3 6	0 4 3	0 6 1	0 6 2	0 6 5	0 7 0	0 7 2	0 7 4	0 7 6	0 7 6	0 7 6	0 7. 6	0 7 7	0 8 0	0 8 3	0 8 3	0 8 9	0 8 9	090	0 9	0 9 3	0 9 3	0 9 3	0 9 3
RESPIRATORY SYSTEM Lungs and bronchi Unduff. carcinoma, metastatic	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+
Adenocarcinoma, NOS, metastatic Hepatocellular carcinoma, metastatic Alveolar/bronchiolar adenoma Alveolar/bronchiolar carcinoma Trachea Nasal cavity	++	- N	+ +	x + +	++	+++	x +	X X + +	++	x +	x ++	x +	x ++	++	X X + +	x ++	++	X + +	x ++	X++	x ++	X + +	X + +	x + +	XX++
Undifferentiated carcinoma			_																						
HEMATOPOIETIC SYSTEM Bone marrow Spieen Lymph nodes Thymus	++	1 1 1 1	++++	++	++	++	++++	+++-	++++	+++-	++++	+++ -	+++-	++++	+++	+++-	++++	+++-	+++ -	+++-	+++-	+++ =	++	+ - + -	+++-
CIRCULATORY SYSTEM Heart	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+
DIGESTIVE SYSTEM Salivary gland Liver Hepatocellular adenoma Hepatocellular carcinoma Alveolar/bronchiolar ca, metastatic	+ +	=	++	+ + x	+ + x	++	++	+++	+ + x	++	+++	+ + x	+ + x	+ + x	+ + + X X	+ + x	+++	+ + + X X	∓ x	+ + x	+ + x	+ + x	+ + + X X	‡ x	_ + + +
Hemangtoma Hemangtosarcoma Bile duct Gallbladder & common bile duct Pancreas Esophagus Stomach Small intestine	+ 7, + + + 1	12111	+ + + + + + + + + + + + + + + + + + + +	+ 7 + + + + + + + + + + + + + + + + + +	+++++	++++++	X+N++++	++++++	+ 2 + + + + + + + + + + + + + + + + + +	+++++	X++++++	++ +++++	+++++	+ 7, + + + + -	++++++	++++++	++++++	++++++	++++++	++++++	++++++	+ 2 + + + + + + + + + + + + + + + + + +	++++++	++++++	++++++
Large intestine CRINARY SYSTEM Kidney Alveolar/bronchiolar ca, metastatic Tubular cell adenoma Urinary bladder	+	+	+	+	+	+	+	+	+	+	+	+++++++++++++++++++++++++++++++++++++++	+	+	+	+	+	+ +	+	+	+	+++++++++++++++++++++++++++++++++++++++	+++++++++++++++++++++++++++++++++++++++	+	+ + +
ENDOCRINE SYSTEM Pituitary			+	++	++	++	• •		- + +	+		• •	+	+	+	++	++++	+++		+		++			- ++
Hepatocellular carcinoma, metastatic Alveolar/bronchiolar ca, metastatic Thyroid Parathyroid	-	-	+	+ -	++	+++	+	+++	+ -	+	++	+++	+	+ -	++	x +	+	++	++	+	++++	+	+	+	+
REPRODUCTIVE SYSTEM Mammary gland Testis Prostate	N + -	N + 1	N + +	N + +	× + +	N + +	N + +	N + +	Y + +	N + +	+ + K	N + +	N + + +	N + +	N + +	+++	N + +	N + +	N + +	N + -	N + +	N + +	N + +	N + +	- N + +
VERVOUS SYSTEM Brain	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	 +	+	+
MUSCULOSKELETAL SYSTEM Bone Alveolar/bronchiolar ca, metastatic	N	N	Я	N	N	N	N	N	N	N	Я	N	N	N	N	N	N	N	N	N	N	N	N	N	- N
BODY CAVITIES Mediastinum Alveolar/bronchiolar ca, metastatic	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
ALL OTHER SYSTEMS Multiple organs NOS Hemangiosarcoma Maligant lymphoma, NOS Malig. lymphoma, lymphocytic type	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N X	N		X	N X	N	N	N	N

#### TABLE B3. INDIVIDUAL ANIMAL TUMOR PATHOLOGY OF MALE MICE IN THE TWO-YEAR INHALATION STUDY OF DICHLOROMETHANE: HIGH DOSE
TABLE B3.	INDIVIDUAL	ANIMAL	TUMOR	PATHOLOGY	OF	MALE	MICE:	HIGH	DOSE
			( <b>C</b>	ontinued)					

ANIMAL	T 01	0	0	0	<u>_</u> 0	ត	-01	N	0	01	0	ਗ	n	0	<u>_</u>	70	0	0	0	a	a	0	0	5		T
NUMBER	3	1 6	28	12	20	32	3	0 9	36	49	04	1	34	0 6	0	02	0  7	1	1 7	1 9	22	23	2 7	43	<b>4</b> 7	TOTAL:
WEEKS ON STUDY	0 9 6	0 9 7	097	0 9 8	100	1 0 0	1 0 0	1 0 1	1 0 1	1 0 1	1 0 2	1 0 2	1 0 2	1 0 3	1 0 4	1 0 4	1 0 4	104	104	104	104	1 0 4	1 0 4	1 0 4	1 0 4	TISSUES
RESPIRATORY SYSTEM Lungs and bronchi Undiff. carcinoma, metastatic Adenocarcinoma, NOS, metastatic	+	+	+	+	+	+	+ x x	+	+	+	+	+	÷	+	+	+	+	+	+	+	+	+	+	+	+	50 1 1
Hepatocellular carcinoma, metastatic Alveolar/bronchiolar adenoma Alveolar/bronchiolar carcinoma Trachea	x	x	X	x	X	X +		X X +	X X +	x	x	X +	X X +	X X +	X X +	X X +	x +	X X +	X +	x +	X +	X X +	X X +	XX	x	4 24 28 48
Nasal cavity Undifferentiated carcinoma	÷	+	+	+	+	÷	÷ x	+	÷	÷	÷	+	÷	÷	+	+	+	÷	+	÷	÷	+	÷	+	+	*50 1
HEMATOPOIETIC SYSTEM Bone marrow Spieen Lymph nodes Thymus	++++	++++-	+++-	++++	+++-	++++	+++-	+++ =	+++ -	+++ -	++++	++	+++-	+++-	++++-	++++	+++-	++ -+	+++-	++++	++ -+	+++ -	+++-	+++-	++++	49 48 40 13
CIRCULATORY SYSTEM Heart	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	50
DICESTIVE SYSTEM Salivary gland Liver Hepatocellular adenoma Hepatocellular carcinoma Alveolar/bronchiolar ca, metastatic	+ +	+ + x	+ + x	+ * x	÷ x	++	+++	∓ x	+ + X	+ + x x	+ + x	+ +	+++	+ + X X	+ + X X	+ + x	+ + x	++	+ + + X X X X	+ + X	+ + x	+ * X	+ * x	+ + X	++	46 49 14 26 1
Hemangtoma Hemangtosarcoma Bile duct Galibiadder & common bile duct Pancreas Esophagus Stomach Small intestine Large intestine	+ + + + + + +	+++++++	+ + + + + 5 + + 7 + + + + + 5 + + + + +	++++++	+++++++	++++++	+++++++	+++++++	X +++++++	++++++	++++++	++++++	X+X+++++	++++++	+++++++	++++++	++++++	++++++	++++++	+ 7 + + + + + + +	++++++	X+++++++	+++++++	++++++	++++++	1 49 *50 47 49 49 47 47 47
CRINARY SYSTEM Kidney Alveolar/bronchiolar ca. metastatic Tubular cell adenoma Urinary bladder	+	+ X +	++	+	+	+	+	+	+	+	+	+	+ x +	+	+	+	+	+	+	+	+	+	+	+	++	50 1 1 47
ENDOCRINE SYSTEM Pituitary Adrenai Hepatocellular carcinoma, metastatic Alveolar/bronchiolar ca, metastatic	++	+++	+++	+++	+++	++	+++	++++	++	++++	+ + x	+++	+++	++	+++	+++	+++	++	+++	+++	<del>-</del>	+++	 +	+ * x	++	45 50 2 1
Thyroid Parathyroid	-	-	-	-	-	-	-	-	-	-	++	+	-	+	-	÷	÷	-	-	÷	-	+	-	-	+	48 17
REPRODUCTIVE SYSTEM Mammary gland Testis Prostate	N + +	N + +	N + +	N + +	N + +	N + +	N + +	N + +	N + +	N + +	N + +	N + +	N + + +	N + +	N + +	N + +	N + +	N + +	N + +	N + +	N + +	N + +	N + +	N + +	7 + +	*50 50 47
NERVOUS SYSTEM Brain	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	50
MUSCULOSKELETAL SYSTEM Bone Alveolar/bronchiolar ca, metastatic	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N X	N	N	N	N	N	- N	*50 1
BODY CAVITIES Mediastinum Alveolar/bronchiolar ca, metastatic	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N X	N	N	N	N	N	- N	*50 1
ALL OTHER SYSTEMS Multiple organs NOS Hemangiosarcoma Malignant lymphoma, NOS Malig. lymphoma, lymphocytic type	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	*50 [ 1 1

\*Animais Necropsied

ANIMAL NUMBER	039	027	018	04	019	0	0 4 6	030	0 4 2	044	0 3 8	04	032	007	006	040	0	0 1 2	0 3 1	040	008	026	025	0 5 0	0 3 5
WEEKS ON STUDY	0 0 2	0 1 9	038	0 5 8	0 ô 1	0 7 2	0 7 2	0 7 6	0 7 8	0 8 0	0 8 2	0 8 4	0 8 5	0 8 6	0 8 7	0 8 7	0 8 9	089	0 9 3	0 9 3	095	0 9 5	096	0 9 7	0 9 9
RESPIRATORY SYSTEM Lungs and bronchi Alveolar/bronchiolar adenoma Alveolar/bronchiolar carcinoma	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	*	+	+	+	+	+	+	+	+	+
Osteosarcoma, metastatic Trachea	+	+	+	+	+	+	-	+	+	+	-	X +	+	+	+	+	+	+	+	+	+	+	-	+	+
HEMATOPOIETIC SYSTEM Bone marrow	+	+	_	+	+	+	+	+	+	+	+	+	+	+	+	+	+	_	+	+	+	+	+	+	+
Spleen Malig lymphoma, histiocytic type Lymph nodes	+++	++	+	+	++	++	++	++	+++	++	++	++	++	++	++	++	+	++	++	++	++	++	++	++	++
Malignant lymphome, NOS Thymus	+	+	-	-	+	-	-	-	-	-	-	-	-	+	-	-	х -	+	+	+	-	-	-	-	-
CIRCULATORY SYSTEM Heart	+	+	-	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+
DIGESTIVE SYSTEM Salivary gland Liver Hepatocellular adenoma Hepatocellular carcinoma Malignant lymphoma, NOS	+++	+++	+ +	+++	++	+++	++	++	++	+++	* +	+ + * X	+ +	++	+++	+ +	+++	++	+ +	+++	+++	++	+++	+++	+
Bile duct Gallbladder & common bile duct	+ N	++	+ N	+ N	+ N	+ +	+ N	+++	+++	+ +	+ +	+ +	+++	+++	+++	+ +	+++	+++	+ N	+ +	+ +	+++	++	+ N	++
Pancreas Esophagus	+++++++++++++++++++++++++++++++++++++++	+++		+	+++	+++	+++	+++	+++	+++	+++	+++	+++	+++	+++	+++	+++	+++	+++	+++	++	+++	+++	++++	++++
Stomach Small intestine Adenoca in adenomatous polyp Large intestine	+ -	+ + +	+	- +	+	++++	++++	+ + +	++ +	++++	+++++	+++++	++++	++++	+++++	++ +	++ +	++++	++++	+++++	++ +	+++++	+++++	+++++	+++++
URINARY SYSTEM Kidney Urinary bladder	+	++	+	Ŧ	+++	++	+	+++	+++	++	+++	++	+++	+++	++	+++	+	++	++	+++	++	+++	+	++	+
ENDOCRINE SYSTEM Pitutary Adenoma, NOS	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	-	+	+	+	-	+	+	-	+	 *
Adrenal Thyroid	+	+++	+++	+++	+	+++	+++	+-+-	+	+++	+++	+++	+++	+++	+++	+++	+++	+++	+++	+++	+++	+++	+++	+++	++++
Follicular cell adenoma Parathyroid	-	+	+	-	-	-	+	-	+	-	+	+	-	-	-	-	-	+	+	+	-	+	+	-	-
REPRODUCTIVE SYSTEM Mammary gland	+	+	N	+	N	N	N	+	+	N	+	+	+	+	+	N	N	+	+	+	+	+	+	+	+
Adenocarcinoma, NOS Uterus Adenocarcinoma, NOS Endometriai stromai polyp	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+ x	+	+	+	+
Ovary Papillary cystadenoma, NOS	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+
NERVOUS SYSTEM Brain	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+
SPECIAL SENSE ORGANS Harderian gland Adenocarcinoma, 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
BODY CAVITIES Peritoneum Osteosarcoma	N	N	N	N	N	N	N	N	N	N	N	N X	N	N	N	N	N	N	N	N	N	N	N	N	N
ALL OTHER SYSTEMS Multiple organs NOS Malignant lymphoma, NOS Malig lymphoma, lymphocytic type	N	N	N	N	N	N	N	N X	N	N	N	N	N	N	N	N	N	N	N X	N	N	N	N	N	N

## TABLE B4. INDIVIDUAL ANIMAL TUMOR PATHOLOGY OF FEMALE MICE IN THE TWO-YEAR INHALATION STUDY OF DICHLOROMETHANE: UNTREATED CONTROL

Tissue Examined Microscopically Required Tissue Not Examined Microscopically Tumor Incidence Necropsy, No Autolysis, No Microscopic Examination Animal Missexed

+ - XN S

No Tissue Information Submitted Necropsy, No Histology Due To Protocol Autolysis Animal Missing No Necropsy Performed

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

ANIMAL NUMBER	0 0 2	0 0 3	004	0 0 5	009	0 1 0	0 1 3	0 1 4	0 1 5	0 1 6	0  1  7	0 2 0	0 2 1	0( 2) 2)	0 2 3	0 2 4	0 2 8	0 2 9	0 3 3	0 3 4	0 3 6	0 3 7	0 4 1	0  4  3	0 4 8	
WEEKSON STUDY	1 0 4	1 0 4	104	1 0 4	1 0 4	1 0 4	1 0 4	104	1 0 4	1 0 4	1 0 4	1 0 4	1 0 4	1 0 4	104	104	1 0 4	1 0 4	1 0 4	1 0 4	104	1 0 4	104	1 0  4	104	TOTAL. TISSUES TUMORS
RESPIRATORY SYSTEM Lungs and bronchi Aiveolar/bronchiolar adenoma Aiveolar/bronchiolar carcinoma	+	+	*	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+ x	+	+	+	+	+	50 2 1
Osteosarcoma, metastatic Trachea	+	+	+	+	+	+	+	+	+	+	+	+	+	-	+	+	+	+	+	+	+	+	+	-	+	1 45
HEMATOPOIETIC SYSTEM Bone marrow Spieen	++++	+++	++++	+++	+++	++++	+++	+++	++++	+++	+++	+++	+++	+++	+++	+++	++	+++	+++	+	+++	+++	+++	+++	+	48 49
Malig. lymphoma, histiocytic type Lymph nodes Malignant lymphoma, NOS	+	+	+	+	+	+	+	X +	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	1 49
Thymus	+	+	-	+	+	+	+	+	+	+	+	+	+	+	+	+	+	-	+	+	+	+	+	+	+	30
CIRCULATORY SYSTEM Heart	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	49
DIGESTIVE SYSTEM Salivary gland	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	50
Liver Hepatoceilular adenoma Hepatoceilular carcinoma Malignant lymphoma, NOS	+	+	+	+	+	+	+	+	Ŧ	Ť X	+	+	+	+	+	+	•	+	+	x	+	+	+	x	+	50 2 1 1
Bile duct Gallbladder & common bile duct	++	++++	+++	+	$_{\rm N}^{+}$	++	+++	++	++	+++	+++	+++	+++	++	+ +	+ +	++	+++	+++	+ +	+++	+ +	+++	+++	+ +	50 *50
Pancreas Esophagus	+++	++++	++++	++	++	++	++	++	+++	+++	++	+++	+++	++++	+++	+++	+++	++++	++++	++	+++	+++	+++	+++	+++	48 49
Stomach Small intestine	+	+	+	+	+++	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	49 46
Adenoca in adenomatous polyp Large intestine	+	+	+	× +	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	-	+	+	+	+	-	1 45
CRINARY SYSTEM	<u> </u>																									
Kidnev Urinarv bladder	÷	÷	÷	÷	÷	÷	÷	÷	+	+	÷	÷	÷	÷	÷	÷	Ŧ	÷	÷	÷	÷	÷	÷	÷	÷	49 48
ENDOCRINE SYSTEM Pituitary Adenoma, NOS	+	+	-	+	+	*	+	+	+	+	+	+	+	*	+	*	+	+	+	+	+	+	+	+	+	46
Adrenal Thyroid	+	+	+	+	+	÷	+	+	+	+	+	+	+	÷	+	÷	+	+	+	+	+	+	+	+	+	50
Follicular cell adenoma Parathyroid	+	-	× -	+	-	-	-	+	+	+	+	+	+	-	-	+	+	-	+	+	+	-	-	+	+ +	48 l 26
REPRODUCTIVE SYSTEM Mammary gland	+	+	+	N	N	+	+	+	+	+	+	+	+	+	N	+	+	+	+	+	+	+	+	+	+	*50
Adenocarcinoma, NOS Uterus Adenocarcinoma, NOS	+	+	Х +	+	+	х +	+	+	+	+	+	+	+	* x	+	+	+	+	+	+	+	+	÷	+	+	2 50
Endometrial stromal polyp Ovary Papillary cystadenoma, NOS	+	+	+	÷	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+ X	+	1 50 1
NERVOUS SYSTEM Brain	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	50
SPECIAL SENSE ORGANS Harderian gland Adenocarcinoma, NOS	N	N	N	N	N X	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	- N	*50 1
BODY CAVITIES Peritoneum Osteosarcoma	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	Ы	N	N	N	N	N	*50 1
ALL OTHER SYSTEMS Multiple organs NOS Malignant lymphoma, NOS Malig. lymphoma, lymphocytic type	N	N	N	N	N X	N	N	N	N	N	N	N	N	N	N	N	N	N	N	И	И	N	N X	N	- К	*50 2 2

\* Animals Necropsied

ANIMAL NUMBER	0 4 8	0 5 0	006	0 4 3	0 4 1	0 4 9	0 0 8	0 1 0	01 41 61	005	0 3 2	0  3  3	0 4 7	0 4 5	0 1 3	0 3 8	0 3 4	0 1 4	0 3 6	0 1 2	028	0 31 0	0 3 9	0 0 3	29
WEEKS ON STUDY	0 0 2	0 0 2	0 0 5	0 1 0	0  6  8	0 7 6	0 8 0	0 8 1	0 8 3	0 8 8	0 8 8	0 8 9	0 8 9	0 9 0	0 9 1	0 9 1	0 9 2	0 9 3	0) 9 6	0 9 7	0 9 8	0 9 8	01 91 81	0 9 9	103
INTEGUMENTARY SYSTEM Subcutaneous tissue Fibrosarcoma	+	N	м	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	*	+	+	+	2
RESPIRATORY SYSTEM Lungs and bronchi Adenocarcinoma, NOS, metastatic	+	A	м	+	+	+	+	+	+	+	*	+	+	+	+	+	+	+	+	+	+	+	+	+	
Hepatocellular carcinoma, metastatic Alveolar/bronchiolar adenoma Alveolar/bronchiolar carcinoma Osteosarcoma, metastatic						x			X X			x	x	x	X X	x		x				x	x	X X	2
Trachea	+	A	М	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	-	+	-	-	+	+	
HEMATOPOIETIC SYSTEM Bone marrow Spieen Lymph nodes Thymus	+++++++++++++++++++++++++++++++++++++++	A A A A	M M M M	-+++	++++	++++	+++ +	+++1	++++	+++ -	+++ -	++++	++++	++++	+++ +	++++	+++ -	++++	+++ -	+++ -	++++	+++ +	++++	+++	
CIRCULATORY SYSTEM	+	A	м	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	
DIGESTIVE SYSTEM Salivary gland Liver Hepatocellular adenoma Hepatocellular carcinoma	+++	A A	м м	++	+++	+++	++	++	+ + x	+ + x	+++	++	++	+++	+ + x	+	+ + x	-+	+ + * X	++	++	+ * *	+ + x	++	-
Hemangiosarcoma Bile duct Gallbladder & common bile duct Pancreas	+ N +	A N A	M M M	+++++	+++	+++	++++	+ N +	+ N +	+++	+++	+++	+++	++++	++++	+++	+++	++++	+++	X + + + +	+++	+++	+ N +	+++	
Esophagus Stomach Small intestine Large intestine	++	4 A A A	N N N N	+ + + +	++++	+ + + +	+ + + +	++++	++++	+ + + +	+ + + +	+ + + +	+ + + +	+ + + +	++++	+++-	++++	++++	+ + + +	++++	++++	++++	++++	+ + + +	
CRINARY SYSTEM Kidnev Papillary cystadenoma, NOS Urinary bladder	+	A	M	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	
ENDOCRINE SYSTEM			v	-	-	+	+	+	Ŧ	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	~
Adenoma, NOS Adrenal Follicular cell adenoma	++++	A A	M	+ +	+ +	+++	+ +	++	++	+ +	+++	+ +	+	++	++	++	+++	+ +	++	++	++	+++	+++	+++	
Parathyroid REPRODUCTIVE SYSTEM		A 	M 	-	_	-			+		<b>*</b>		-	+ 	-	-	-			* 			+	-	-
Mammary gland Adenocarcinoma, NOS Uterus Endometrial stromal polyp Malig lymphoma, histiocytic type	+	.• 4	M M	+	+	+	+	N +	N +	N +	¥ +	+	+	+	+	+	+	+	+	+	+ x	* *	+	+	•
Ovary Cvstadenoma, NOS NERVOUS SYSTEM	Ļ		<u>м</u>					- 		- -			_							_				-	
Brain	+	A	м	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	
AUSCULÖSKELETAL SYSTEM Bone Osteosarcoma	N	N	м	N	N	*	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	
SODY CAVITIES Pleura Malignant lymphoma, NOS	N	N	м	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	NX	
ALL OTHER SYSTEMS Multiple organs NOS Malig. lymphoma, histocytic type Malignant lymphoma, mixed type Adipose tissue Hepatocellular carcinoma, metastatic	N	N	M M	N	N	N	N X	N	N	N	N	N	N	N X	N	N	N	N	N	N	N	N	N	N	2

## TABLE B4. INDIVIDUAL ANIMAL TUMOR PATHOLOGY OF FEMALE MICE IN THE TWO-YEAR INHALATION STUDY OF DICHLOROMETHANE: LOW DOSE

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

						_`											_									
ANIMAL NUMBER	0	0 0 2	004	0 0 7	009	0 1 1	0 1 5	0 1 6	0 1 7	0 1 8	0 1 9	0 2 0	01 21 11	0 2 2	023	024	0 2 5	0 2 6	0 2 7	0 3 1	0 3 5	0 3 7	0 4 0	0 4 2	0 4 4	TOTAL.
WEEKS ON STUDY	1 0 4	104	104	1 0 4	1 0 4	1 0 4	1 0 4	104	1 0 4	104	1 0 4	104	1 0 4	104	104	104	1 0 4	1 0 4	1 0 4	104	1 0 4	1 0 4	104	1 0 4	1 0 4	TISSUES TUMORS
INTEGU VENTARY SYSTEM Subcutaneous tissue Fibrosarcoma	N	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	*49 2
RESPIRATORY SYSTEM Lungs and bronchi Adenocarcinoma, NOS, metastatic Hepstocellular carcinoma, metastatic	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+ X	+	+	+	+	+	+	+	+	*	+ x	48 1 4
Alveolar/bronchiolar adenoma Alveolar/bronchiolar carcinoma Osteosarcoma, metastatic Trachea	× +	х +	x +	X +	X X -	x +	+	X +	+	<b>x</b> +	î +	х +	A +	~ +	-	X X +	+	х +	+	X +	х +	X X +	X +	x ≁	+	23 13 1 43
HEMATOPOIETIC SYSTEM Bone marrow Spleen Lymph nodes Thymus	+++++++++++++++++++++++++++++++++++++++	++++	++++	++++	+++++	++++	+++++	++++	++++	++++	+++++	++++	++++	+++	+++++	++++	+ + +	+++++	++++	++++	++++	++++	++++		++++	47 48 47 20
CIRCULATORY SYSTEM Heart	-	+		+	+	+	+	+	+	+	+	+	+	+	+	- +	- +	+	+	+	+	 +	+		- +	48
DIGESTIVE SYSTEM Salivary gland Liver	:	Ŧ	++	++	+ +	+++	++	+++	+ + * X	++;	++	+++	+++	++++	Ŧ	+	++	+++	+	+++	+++	++	++>	++	++	45 48
Hepatocellular adenoma Hepatocellular carcinoma Hemangiosarcoma Bile duct Gallbiadder & common bile duct	+	++	+	++	x +	++	+	x +	л + +	+xx ++	^ ++	+++	++	x ++	x t	+	+	+	+	+	+	+	^ + +	X + N	x +	6 11 2 48 *49 48 48 48 48
Pancreas Esophagus Stomach Small intestine	+++++++++++++++++++++++++++++++++++++++	+++++	++++	+++++	++++	++++	++++	++++	++++	++++	+++++	++++	+++++	+++++	+++++	++++	++++	++++	+++++	++++	++++	++++	++++	<b>1</b> + + + + + + + + + + + + + + + + + + +	+ + + - +	49 48 48 47 47
Large intestine CRINARY SYSTEM	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	46 
Kidney Papillary cystadenoma, NOS Urinary bladder	+	+	+	+	+	+	+	+	+	* *	+	+	+	+	+	+	+	+	+	+	+	+	+	+ +	+ +	49 1 48
ENDOCRINE SYSTEM Pituitary Adenoma, NOS Adrenai	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	-	+	+ x +	* *	+	+	+++	14 2 48
Thyroid Follicular cell adenoma Parathyroid	++	+	+	+ +	+	+	+	+	+	++	+ +	÷ -	+ +	+	+	+	+	+ -	++	+ +	+	÷	+	+ -	+	47 1 25
REPRODUCTIVE SYSTEM Mammary gland Adenocarcinoma, NOS Uterus	+	+	+	+++	+	+	+	+	+	+	+++	+++	+++	+	+++	+++	+++	+	+	+	+++	* *	+	N +	+++	*49 3 48
Endometrial stromal polyp Malig Tymphoma, histocytic type Ovary Cystadenoma, NOS	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	x + x	+	+	+	+	1 1 47 1
VERVOUS SYSTEM Brain	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	48
MCSCULOSKELETAL SYSTEM Bone Osteosarcoma	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	*49 1
BODY CAVITIES Pleura Malignant lymphoma, 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	*49 1
ALL OTHER SYSTEMS Multuple organs NOS Malig: Jymphoma, histocytic type Malignant lymphoma, mixed type Adipose tissue Hepatocellular carcinoma, metastatic	N	N	N	N	N X	N	N	N	N	N	N	N	N		N X	N	N	N	N		N X	N	N	N	N	*49 1 4
																							_		_	L

\* Animals Necropsied

ANIMAL NUMBER	0 3 9	0 0 2	0 0 3	0 1 4	0 1 3	0 1 2	0 1 5	0 0 1	005	0 0 7	0  3  7	0 3 8	040	0 2 6	030	0 1 0	0 4 9	0 3 6	0 4 4	0 1 9	0 3 2	0 4 1	006	0 0 8	0 2 4
WEEKSON STUDY	0 0 1	0	0 0 6	0 0 9	0 6 8	0 6 9	0  7  0	0 7 5	0 7 6	0 7 7	0  7  7	0 7 8	0 7 8	0 8 0	0 8 3	0 8 4	0 8 4	0 8 5	0 8 5	0 8 6	0 8 7	0  8  8	0 8  9	0  8  9	0 8 9
INTEGUMENTARY SYSTEM Subcutaneous tissue Fibrosarcoma	м	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+
RESPIRATORY SYSTEM Lungs and bronch: Hepatocellular carcinoma, metastatic Alveolar/bronchiolar adenoma Alveolar/bronchiolar carcinoma Trachea	M M	+	+	-	+ X X +	* *	+ X +	+++	+ x x +	+ X +	+ X +	+	+ X +	+ X X +	+ X +	+ X +	+ X +	+ X +	+ x +	+ X X +	+ X +	+ X X +	+ X +	+ X X +	+
HEMATOPOIETIC SYSTEM Bone marrow Spleen Hemangiosarcoma Malig, lymphoma, histiocytic type Lymph nodes	M M M	+++++	-	+ -	+++	+++++		++++++	+++++++++++++++++++++++++++++++++++++++	+++++	+++++++++++++++++++++++++++++++++++++++	++++++	++++++	++++++	++++	+++	+ * *	++++++	++ + x	++++++	+++++++++++++++++++++++++++++++++++++++	++++++		+++++	+++
Alveolar/bronchiolar ca, metastatic Thymus Hemangiosarcoma, metastatic	м	+	-	-	× -	-	-	-	-	-	~	-	-	-	-	-	* X	-	× +	-	-	-	-	-	+
CIRCULATORY SYSTEM Heart Alveolar/bronchiolar ca, metastatic	м	+	+	+	+	+	+	+	+	+	+	+	+	*	+	+	+	+	*	+	+	+	+	+	+
DIGESTIVE SYSTEM Salivary gland Liver Hepatocellular adenoma Hepatocellular carcinoma Alveolar/bronchiolar ca, metastatic Hepatoblastoma	м V	++++	+-	+++	+ + X X X	+ + X	+++	+ + X X	÷ x	+ * X	+ + X X	÷ x x	+ +	+ * X	+ x	+ + x	+ + X	++++	* *	++++	++++	+++	+ x	++ * X	+ + x
Hemangiosarcoma Hemangiosarcoma Malignant lymphoma. NOS Bile duct Gallbiadder & common bile duct Pancreas Esophagus Stomach Small intestine	M M M M M	+ + + + + +	1 2 1 4 1 1	+ + + + -	+++++	+++++	+ + + + + +	+ + + + X +	+ + + + +	+++++	+ + + + × + + + + + + + + + + + + + + +	+ + + + + +	X + Y + + + + +	+++++	+++++	+ + + + + +	X ++++++	+ + + + + +	+++++	X +++++	+++++	+++++	+++++	+ + + + + +	++++7+
Large intestine CRINARY SYSTEM Kidney Malignant lymphoma, mixed type	м 	+	-	+	+	+	+.	+	+	+	+	+	+	+	+	+	+	+	+++++++++++++++++++++++++++++++++++++++	+	+	+	+++	+	+ - +
Urinary bladder ENDOCRINE SYSTEM Pituitary Adenoma, NOS Adrenai Cortical adenoma Thyroid Follicular cell adenoma Parathyroid	м м м м м	- + + -	+	- + -	+ + + + +	+ + + +	+ + + +	+ + + + +	+ + + +	+ + + + +	+ + + + + + X -	+ + * * *	+ + + + +	+ + + + +	+ + + + + + +	+ + + + +	+ + + +	+ - + + -	+ + + + +	++++	+ - + + +	+ + + + +	+ - + + +	+ + + + +	+ + + +
REPRODUCTIVE SYSTEM Mammary gland L'ierus Leioinyosarcoma Ovary Teratoma, NOS	M M M	++++++	+ - *	N - +	+++++	N + +	N + +	N + +	N + +	+++++	+++++	+++++	N + +	N + -	+++++	++++++	N + +	N + +	+++++	N + +	+++++	+ + +	+++++	+ + +	- + + +
NERVOUS SYSTEM Brain	м	+	-	-	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	-   +
ALL OTHER SYSTEMS Multiple organs NOS Alveolar/bronchiolar ca, metastatic Malignant lymphoma, NOS Malig. lymphoma, his -vtic type	м	N	N	N	N	N	N X	N		N X	N	N	N	N	N	N	N	N	N		N X	N	N	N	N

## TABLE B4. INDIVIDUAL ANIMAL TUMOR PATHOLOGY OF FEMALE MICE IN THE<br/>TWO-YEAR INHALATION STUDY OF DICHLOROMETHANE: HIGH DOSE

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

ANIMAL NUMBER	0  2  5	0  4  2	0 4 5	0  2  7	0 4 3	0 3 1	0 4 7	0 4 8	0 1 1	0 2 0	0 2 2	073	0 1 8	0 1 7	0 3 3	0 3 5	0 5 0	004	0 0 9	0 1 6	0 2 1	0 2 8	0 2 9	0 3 4	0 4 6	
WEEKS ON STUDY	0 8 9	0  8  9	0 8 9	0 9 0	0 9 3	0 9 6	0 9 6	0 9 7	0 9 8	8	0 9 8	0) 9) 8)	0 9 9	1 0 1	1 0 1	1 0 1	1 0 2	1  0  4	1 0 4	1 0 4	1 0 4	1 0 4	1 0 4	1 0 4	1 0 4	TOTAL. TISSUES TUMORS
INTEGUMENTARY SYSTEM Subcutaneous tissue Fibrosarcoma	+	N	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	, x	+	+	*49
RESPIRATORY SYSTEM Lungs and bronchi Hepatocellular carcinoma, metastatic Alveolar/bronchiolar adenoma Alveolar/bronchiolar carcinoma Trachea	+ X +	+ X X +	+ X +	* *	+ X X +	+ X +	+ X +	+ x +	+ x +	+ X +	+ x +	+ x x +	+ x +	+ X X +	+ x x +	+ x +	+ X X X +	+ x x +	+ X +	+ x +	+ x -	+ x x +	+ x x *	+ x x +	+ X +	48 3 28 29 47
HEMATOPOIETIC SYSTEM Bone marcow Spleen Hemangtosarcoma Mailg lymphoma, histiocytic type Lymph nodes Alveolar/bronchiolar ca, metastatic Thymus Hemangtosarcoma, metastatic	+++	+++++-	+++-	++++-	++++-	++	++++-	+++++-	++++-	++ + -	+++-	++++-	++ + +	++ + -	+++++	++	++ + ~	++	++++	++++++	+++-	+++-	+++-	+++-	+ + + +	45 47 1 43 2 9 1
CIRCULATORY SYSTEM Heart Alveolar/bronchiolar ca, metastatic	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	49 2
DIGESTIVE SYSTEM Salivary gland Liver Hepatocellular adenoma Hepatocellular carcinoma Alveolar/bronchiolar ca, metastatic Hepatoblastoma Hemangiosarcoma Hemangiosarcoma Hemangiosarcoma NOS	+ + x	+ + * X	+ x	‡ x	‡ x	+ + x	+ * X	+ * x	‡ x	+ * x x	+ + * x x	+ + x x	‡ x	‡ x	+ * x	+ + X X	+ + x x	- * x x	+ + X X	+ * x	+ + x x x x	+ + x	‡ x	+ + x	++ * X	47 48 22 32 1 1 1 1
Bie duct Gallbladder & common bile duct Pancreas Esophagus Stomach Small intestine [ arge intestine	+>+++++	+++++++	+ ~ + + + + + +	+++++++	+/+++++	+ + + + + + + + + + + + + + + + + + + +	+++++++	+++++++	+++++++	+++++++	++++++	+++++++	+++++++	+++++++	+ 7 + + + + + +	+ 7, + + + + + +	+7++++	+++++++	+++++++	++++++	+++++++	+>++++	+>++++	+ 7 + + + + + +	+ 7 + + + + +	18 *49 47 49 48 47 47 47
CRINARY SYSTEM Kidnev Malignant lymphoma, mixed type Urinary bladder	+ +	+++	+	* * *	++	++	+ +	++	++	++	+++	+++	++	++	+++	+ +	++	++	+ +	++	++	++	+ +	++	- + +	47 1 47
ENDOCRINE SYSTEM Pruntary Adenoma, NOS Adrenal Cortical adenoma Thyroid Follicular cell adenoma Parathyroid	+ + + +	+++++	+ + + +	+ + + +	++++-	+ + + +	- + +	++++-	+ + +	++++-	+ + +	+ + +	+ + -	+ + +	+ + + +	+ + + +	+ + + × -	+ + +	+ + + +	+ + +	+ + + X	+ + X -	+++-	+ + +	- + + + -	44 1 48 1 46 4 24
REPRODUCTIVE SYSTEM Mammary gland Leromvosarcoma Ovary Teratoma, NOS	N + +	N + +	+++++	+++	+++++	++++	+++++	+ + -	+++	++++++	+++++	+++++	V + +	+++++	N + X +	++	++++	++++	+++++	+++++	+ + +	Y + +	+++	+ + +	 ++ +	*49 47 1 43 1
VERVOUS SYSTEM Brain	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	47
ALL OTHER SYSTEMS Multiple organs NOS Alveolar foronchiolar ca, metastatic Malignant lymphoma, NOS Malig lymphoma, histiocytic type	N	N	N	N	N	N	N	N	N	N	N		N X	N		N X	N	N	N	N	N	N	N	N	М	*49 1 1 3

\* Animals Necropsied

Dichloromethane, NTP TR 306

#### **APPENDIX C**

### SUMMARY OF THE INCIDENCE OF NONNEOPLASTIC

### LESIONS IN RATS IN THE TWO-YEAR

### **INHALATION STUDIES**

**OF DICHLOROMETHANE** 

## TABLE C1. SUMMARY OF THE INCIDENCE OF NONNEOPLASTIC LESIONS IN MALE RATS IN THE TWO-YEAR INHALATION STUDY OF DICHLOROMETHANE

co	NTRO	L (CHAMB)	LO	W DOSE	MI	D DOSE	HIC	H DOSE
ANIMALS INITIALLY IN STUDY	50		50		50		50	
ANIMALS NECROPSIED	50		50		50		50	
ANIMALS EXAMINED HISTOPATHOLOG	50		50		50		50	
NTEGUMENTARY SYSTEM								
*Skin	(50)		(50)		(50)		(50)	
Epidermal inclusion cyst			1	(2%)				
Inflammation, suppurative	2	(4%)	1	(2%)				
Inflammation, chronic			2	(4%)				
Hyperkeratosis	_	(0.4)		(0				(2%)
Acanthosis		(2%)	3	(6%)	(20)			(4%)
*Subcut tissue Inflammation, suppurative	(50)		(50)		(50)		(50)	(2%)
Inflammation granulomatous focal			1	(2%)			1	(270)
RESPIRATORY SYSTEM								
*Nasal cavity	(50)		(50)		(50)		(50)	
Foreign body, NOS	3	(6%)	6	(12%)				(4%)
Hemorrhage				(4%)			1	(2%)
Inflammation, suppurative	8	(16%)	10	(20%)	6	(12%)	14	(28%)
Inflammation, chronic focal	1	(2%)		(2%)				
Infection, bacterial				(2%)				
Hyperplasia, epithelial		(0~)		(10%)	3	(6%)	-	(6%)
Metaplasia, squamous		(8%)		(10%)	-	(6%)	-	(6%)
*Larynx Foreign body, NOS	(50)		(50)	(2%)	(50)		(50)	(6%)
Hemorrhage			1	(270)			-	(2%)
Inflammation, focal	1	(2%)					1	(210)
Inflammation, suppurative		(10%)	6	(12%)	3	(6%)	6	(12%)
Inflammation, chronic focal	-		-	(2%)	-	,	-	,
Infection, bacterial				(2%)				
Hyperplasia, epithelial							1	(2%)
#Trachea	(50)		(48)		(50)		(47)	
Foreign body, NOS								(2%)
Inflammation, suppurative	1	(2%)		(2%)			2	(4%)
Infection, bacterial				(2%)				
Hyperplasia, epithelial				(2%)				
Dysplasia, epithelial	(50)			(2%)	(50)		(50)	
#Lung/bronchiole Hyperplasia, epithelial	(50)		(49)		(50)	(2%)	(50)	
#Lung	(50)		(49)		(50)	(470)	(50)	
Foreign body, NOS		(2%)	(10)		(00)			(2%)
Congestion, NOS	-							(2%)
Edema, NOS	2	(4%)						(2%)
Bronchopneumonia, NOS								(2%)
Pneumonia, aspiration							1	(2%)
Inflammation, granulomatous focal	1	(2%)						(0.61)
Proteinosis, alveolar	••	(997)		(0.4.77.)		(000)		(2%)
Alveolar macrophages	11	(22%)		(24%)		(20%)		(8%) (4%)
Hyperplasia, alveolar epithelium #Lung/alveoli	(50)		5 (49)	(10%)	1 (50)	(2%)	2 (50)	(4%)
Hemorrhage		(4%)		(10%)		(2%)	7	(14%)
Inflammation, interstitial	4		U			(2%)		(14.0) (2%)
Inflammation, suppurative			2	(4%)		(6%)		(6%)
Fibrosis, focal	2	(4%)				(2%)		(2%)
Fibrosis, multifocal		(4%)	3	(6%)		(2%)	1	(2%)
Fibrosis, diffuse	1	(2%)				(2%)		
Necrosis, focal					1	(2%)	1	(2%)
Metaplasia, osseous			1	(2%)				

	CONTRO	L (CHAMB)	LO	W DOSE	MI	D DOSE	HIC	H DOSE
HEMATOPOIETIC SYSTEM			<u></u>		ņ			. <u></u>
#Bone marrow	(50)		(49)		(49)		(49)	
Atrophy, NOS	1	(2%)		(4%)	1	(2%)	2	(4%)
#Spleen	(50)		(49)		(50)	-	(50)	
Hemorrhage	1	(2%)						
Fibrosis, focal	1	(2%)	5	(10%)		(20%)	7	(14%)
Fibrosis, multifocal	_				1	(2%)	_	
Fibrosis, diffuse		(2%)		(2%)	•	(00)		(2%)
Necrosis, focal		(4%)	1	(2%)	3	(6%)	Z	(4%)
Necrosis, diffuse Hemosiderosis	1	(2%)	1	(2%)				
Hyperplasia, lymphoid	1	(2%)	1	(270)				
#Splenic capsule	(50)		(49)		(50)		(50)	
Cyst. NOS	(00)			(2%)	(00)		(00)	
#Mandibular 1. node	(50)		(48)	(4,6)	(50)		(50)	
Inflammation, suppurative		(2%)	(=0)		(00)			
Necrosis, focal	î							
Hyperplasia, lymphoid	-						1	(2%)
#Bronchial lymph node	(50)		(48)		(50)		(50)	
Hyperplasia, lymphoid	1	(2%)						
CIRCULATORY SYSTEM								
*Multiple organs	(50)		(50)		(50)		(50)	
Periarteritis				(2%)				
*Mediastinum	(50)		(50)		(50)		(50)	
Periarteritis	(70)		(50)		(50)			(2%)
#Heart	(50)		(50)		(50)		(50)	(00)
Mineralization	(50)		(50)		(50)			(2%)
#Heart/atrium Thrombosis, NOS	(50)	(4%)	(50)	(2%)	(50)	(4%)	(50)	(8%)
Fibrosis, focal	2	(470)	L	(270)		(2%)		(2%)
#Heart/ventricle	(50)		(50)		(50)	(270)	(50)	(270)
Dilatation, NOS	(00)		(00)			(2%)	(00/	
#Myocardium	(50)		(50)		(50)	(2.07)	(50)	
Mineralization	(/		(		(+ - )			(2%)
Hemorrhage	1	(2%)						
Inflammation, chronic focal	1	(2%)	1	(2%)	1	(2%)		
Fibrosis, focal			-	(12%)	-	(6%)		(2%)
Fibrosis, multifocal				(2%)	1	(2%)		(2%)
Fibrosis, diffuse	6	(12%)	4	(8%)	1	(2%)	12	(24%)
Necrosis, focal	1	(2%)						_
Calcification, focal								(2%)
#Cardiac valve	(50)	(107)	(50)	(0.10)	(50)	(00%)	(50)	(100)
Metaplasia, cartilaginous		(16%)		(24%)		(20%)		(16%)
*Aorta Mineralization	(50)	(90)	(50)		(50)		(50)	
*Coronary artery	(50)	(2%)	(50)		(50)		(50)	
Thrombosis, NOS		(2%)	(40)		(00)		(00)	
*Pulmonary artery	(50)		(50)		(50)		(50)	
Mineralization	(007			(2%)		(2%)		(4%)
Calcification, focal			-		-	,		(2%)
*Sup. panc-duod. artery	(50)		(50)		(50)		(50)	
Inflammation, suppurative		(2%)						
#Liver	(50)	÷	(49)		(50)		(50)	
Thrombosis, NOS		(2%)		(2%)				
#Pancreas	(48)		(46)		(48)		(48)	
Periarteritis		(2%)	2	(4%)				
#Testis	(50)		(49)		(50)		(50)	
Periarteritis			3	(6%)	1	(2%)	1	(2%)

#### TABLE C1. SUMMARY OF THE INCIDENCE OF NONNEOPLASTIC LESIONS IN MALE RATS IN THE TWO-YEAR INHALATION STUDY OF DICHLOROMETHANE (Continued)

### TABLE C1. SUMMARY OF THE INCIDENCE OF NONNEOPLASTIC LESIONS IN MALE RATS IN THE TWO-YEAR INHALATION STUDY OF DICHLOROMETHANE (Continued)

	CONTRO	L (CHAMB)	LO	W DOSE	MI	D DOSE	HIC	GH DOSE
GESTIVE SYSTEM								
*Hard palate	(50)		(50)		(50)		(50)	
Acanthosis							1	(2%)
*Soft palate	(50)		(50)		(50)		(50)	
Inflammation, suppurative					1	(2%)		
*Tooth	(50)		(50)		(50)		(50)	
Malocclusion							1	(2%)
#Salivary gland	(49)		(47)		(47)		(49)	
Inflammation, chronic							1	(2%)
Inflammation, chronic focal	1	(2%)			1	(2%)		
Inflammation, chronic diffuse			1	(2%)				
#Liver	(50)		(49)		(50)		(50)	
Hemorrhage			•					(2%)
Inflammation, granulomatous								(6%)
Inflammation granulomatous focal	. 1	(2%)	7	(14%)	2	(4%)		(4%)
Inflammation, pyogranulomatous			1	(2%)			1	(2%)
Pigmentation, NOS					2	(4%)	_	
Hemosiderosis	8	(16%)	29	(59%)	37	(74%)	42	(84%)
Hepatocytomegaly		(4%)		(20%)		(12%)		(10%)
Angiectasis	1	(2%)	5	(10%)	2	(4%)		(2%)
#Liver/hepatocytes	(50)		(49)		(50)		(50)	
Necrosis, focal	7	(14%)	23	(47%)	6	(12%)	16	(32%)
Cytoplasmic vacuolization	8	(16%)	26	(53%)	22	(44%)	25	(50%)
Basophilic cyto change	15	(30%)	22	(45%)	13	(26%)	6	(12%)
Eosinophilic cyto change	1	(2%)					1	(2%)
#Bile duct	(50)		(49)		(50)		(50)	
Inflammation, suppurative					1	(2%)		
Inflammation granulomatous focal					1	(2%)		
Fibrosis		(16%)	10	(20%)		(34%)	23	(46%)
Hyperplasia, NOS	-	(84%)		(76%)		(82%)		(66%)
#Pancreas	(48)	(,	(46)		(48)		(48)	
Inflammation, suppurative	. ,				1	(2%)		
Inflammation, chronic focal			1	(2%)				
<b>#Pancreatic acinus</b>	(48)		(46)		(48)		(48)	
Basophilic cyto change							1	(2%)
Atrophy, focal	11	(23%)	15	(33%)	17	(35%)	10	(21%)
Atrophy, diffuse			1	(2%)	3	(6%)	1	(2%)
*Pharyngeal mucosa	(50)		(50)		(50)		(50)	
Acanthosis	,							(2%)
#Glandular stomach	(50)		(49)		(50)		(50)	
Mineralization		(2%)					,	(4%)
Inflammation, acute	-		1	(2%)			-	, <b>,</b>
#Forestomach	(50)		(49)		(50)		(50)	
Hernia, NOS		(2%)						
Ulcer, NOS			3	(6%)				
Inflammation, focal			1	(2%)				
Inflammation, acute	1	(2%)		(4%)	1	(2%)	2	(4%)
Hyperkeratosis			1	(2%)				
Acanthosis	2	(4%)				(4%)	2	(4%)
#Ileum	(49)		(47)		(49)		(50)	
Meckel's diverticulum	1	(2%)						
#Colon	(49)		(47)		(50)		(46)	
Parasitism	9	(18%)	15	(32%)	11	(22%)		(20%)
*Rectum	(50)		(50)		(50)		(50)	
Prolapse					1	(2%)		
Parasitism	2	(4%)			5	(10%)	1	(2%)

	CONTRO	L (CHAMB)	LO	W DOSE	MI	D DOSE	HIG	H DOSI
URINARY SYSTEM				<u>-</u>				
#Kidney	(50)		(50)		(50)		(50)	
Nephropathy		(94%)		(94%)		(96%)		(90%)
#Kidney/cortex	(50)		(50)	•	(50)	• •	(50)	
Mineralization			(00)		(			(6%)
Inflammation, suppurative			1	(2%)			•	(0,0)
Infarct, focal			-	(2,2)	1	(2%)		
#Kidney/tubule	(50)		(50)		(50)		(50)	
Degeneration, NOS		(22%)	• •	(26%)		(46%)		(20%)
	(50)	(2270)	(50)	(20%)	(50)		(50)	(20%)
#Kidney/pelvis Mineralization	(50)			(90)	(50)		(50)	
				(2%)				
Inflammation, suppurative			1					
Hyperplasia, epithelial	(50)			(2%)	(50)		(40)	
#Urinary bladder	(50)		(47)		(50)		(48)	
Calculus, unkn gross or micro						(2%)		
Hemorrhage						(2%)		
Inflammation, suppurative						(2%)	-	(
Hyperplasia, epithelial				(2%)		(4%)		(4%)
#U. bladder/submucosa	(50)		(47)		(50)		(48)	
Hemorrhage	1	(2%)						
NDOCRINE SYSTEM								
#Anterior pituitary	(50)		(47)		(49)		(49)	
Cyst, NOS	4	(8%)	2	(4%)	2	(4%)		
Hemorrhage	1	(2%)	1	(2%)	2	(4%)		
Necrosis, focal							1	(2%)
Hyperplasia, NOS	7	(14%)	2	(4%)	3	(6%)		(14%)
#Adrenal	(50)	(==;;;	(50)	(,	(50)	(0.07)	(50)	(==,-,
Atrophy, NOS	(00)		(00)		(00)			(2%)
#Adrenal cortex	(50)		(50)		(50)		(50)	(470)
Cyst, NOS	(00)			(2%)	(007		(00)	
Cytoplasmic vacuolization	7	(14%)		(34%)	6	(12%)	11	(22%)
Cytomegaly	•	(14,0)		(2%)	U	(12,0)		(22,0)
Hyperplasia, focal				(2%)				
#Adrenal medulla	(50)			(270)	(50)		(50)	
	(00)		(50)	(00)	(00)		(30)	
Cyst, NOS			1	(2%)		(0~)		
Hemorrhage				-	-	(2%)		(
Hyperplasia, NOS		(6%)		(2%)	3	(6%)		(2%)
Hyperplasia, focal		(12%)		(32%)		(22%)		(18%)
#Thyroid	(49)		(48)		(49)		(50)	
Ultimobranchial cyst			_					(2%)
Cystic follicles		(4.4.4)		(2%)		(4.8.4)	2	(4%)
Hyperplasia, C-cell		(10%)		(8%)		(16%)		(18%)
#Parathyroid	(29)		(35)		(30)		(32)	
Hyperplasia, NOS				(17%)		(7%)		(13%)
#Pancreatic islets	(48)		(46)		(48)		(48)	
Hyperplasia, NOS	1	(2%)			2	(4%)	1	(2%)
REPRODUCTIVE SYSTEM	_							
*Mammary gland	(50)		(50)		(50)		(50)	
Galactocele	()					(2%)	/	
*Preputial gland	(50)		(50)		(50)		(50)	
Cyst, NOS		(2%)		(4%)		(2%)		(2%)
Inflammation, suppurative		(12%)		(16%)		(22%)		(18%)
Inflammation, chronic		(2%)		(2%)		(22.07)		(2%)
Inflammation, chronic suppurativ		(2%)	-				•	
					1	(2%)	1	(2%)
	~ ~ ~	(4.%)						
Hyperplasia, epithelial		(4%) (2%)					1	(2.0)
		(4%) (2%)			1	(2%) (2%)		(2%)

## TABLE C1. SUMMARY OF THE INCIDENCE OF NONNEOPLASTIC LESIONS IN MALE RATS IN THE TWO-YEAR INHALATION STUDY OF DICHLOROMETHANE (Continued)

## TABLE C1. SUMMARY OF THE INCIDENCE OF NONNEOPLASTIC LESIONS IN MALE RATS IN THETWO-YEAR INHALATION STUDY OF DICHLOROMETHANE (Continued)

	CONTRO	L (CHAMB)	LO	W DOSE	MI	D DOSE	HIG	H DOSE
REPRODUCTIVE SYSTEM (Continued)		<u> </u>						
#Prostate	(44)		(42)		(46)		(45)	
Inflammation, suppurative		(2%)		(10%)		(22%)		(11%)
Inflammation, chronic		(2%)	-	(2010)		(== /0)	v	(/0)
Hyperplasia, epithelial	-	(2,2)	1	(2%)	1	(2%)	1	(2%)
*Seminal vesicle	(50)		(50)	(=,	(50)	(=,,,,	(50)	•
Inflammation, suppurative		(42%)	,	(44%)		(16%)		(40%)
Inflammation, chronic		(		(110)		(2%)		(10,0)
Hyperplasia, epithelial	2	(4%)	1	(2%)	-	(=)	1	(2%)
#Testis	(50)	(11)	(49)	(=,	(50)		(50)	• •
Hemorrhage								(2%)
Necrosis, focal								(2%)
Atrophy, NOS	31	(62%)	31	(63%)	31	(62%)		(76%)
Hyperplasia, interstitial cell		(8%)		(6%)	2	(4%)		(4%)
*Epididymis	(50)		(50)		(50)		(50)	
Inflammation, granulomatous foca	. ,			(2%)	,		(,	
NERVOUS SYSTEM			-		100		/10	
#Brain/meninges	(50)		(50)	(90)	(50)		(49)	
Fibrosis	/FA\			(2%)	(20)		(10)	
#Cerebrum	(50)	(00)	(50)		(50)		(49)	
Hemorrhage	1	(2%)						(2%)
Malacia								(2%)
Atrophy, pressure #Brain	(50)		(50)		(50)			(2%)
	(50)	(100)	(50)	(1.40)	(50)	(6%)	(49)	(100)
Hemorrhage		(10%)		(14%)	+	( = )	Э	(10%)
Atrophy, pressure		(4%)		(4%)	2	(4%)	(40)	
#Medulla oblongata	(50)	(0.7)	(50)		(50)		(49)	(0.21)
Hemorrhage	I	(2%)					1	(2%)
SPECIAL SENSE ORGANS							•	
*Eye/anterior chamber	(50)		(50)		(50)		(50)	
Inflammation, suppurative	1	(2%)						
*Eye/cornea	(50)		(50)		(50)		(50)	
Inflammation, suppurative	1	(2%)						
*Eye/lacrimal gland	(50)		(50)		(50)		(50)	
Inflammation, chronic focal	1	(2%)	1	(2%)	1	(2%)		
*Nasolacrimal duct	(50)		(50)		(50)		(50)	
Inflammation, suppurative	6	(12%)	3	(6%)	8	(16%)	2	(4%)
Acanthosis					1	(2%)	1	(2%)
*Zymbal gland	(50)		(50)		(50)		(50)	
Metaplasia, squamous			1	(2%)				
MUSCULOSKELETAL SYSTEM								
*Bone	(50)		(50)		(50)		(50)	
Pathologic fracture			(00)		(00)			(2%)
Healed fracture								(2%)
*Skull	(50)		(50)		(50)		(50)	(4 /0)
Osteoporosis	(00)			(2%)	(00)		(00)	
*Maxilla	(50)		(50)		(50)		(50)	
Hyperplasia, focal	(00)		(00)		(00)			(2%)
*Sternum	(50)		(50)		(50)		(50)	(2,0)
Hyperplasia, focal				(2%)	(00)		(00)	

### TABLE C1. SUMMARY OF THE INCIDENCE OF NONNEOPLASTIC LESIONS IN MALE RATS IN THE TWO-YEAR INHALATION STUDY OF DICHLOROMETHANE (Continued)

	CONTRO	L (CHAMB)	LO	W DOSE	MID DOSE	HIGH DOSE
BODY CAVITIES						<u></u>
*Peritoneum	(50)		(50)		(50)	(50)
Inflammation, chronic focal	1	(2%)				
Necrosis, fat	1	(2%)				
*Pleura	(50)		(50)		(50)	(50)
Fibrosis, multifocal					1 (2%)	
*Mesentery	(50)		(50)		(50)	(50)
Ectopia			1	(2%)		
Inflammation, chronic focal					1 (2%)	
*Tunica vaginalis	(50)		(50)		(50)	(50)
Hyperplasia, mesothelial			1	(2%)		
ALL OTHER SYSTEMS						
*Multiple organs	(50)		(50)		(50)	(50)
Mineralization			4	(8%)		
Inflammation, suppurative			3	(6%)		1 (2%)

SPECIAL MORPHOLOGY SUMMARY None

# Number of animals with tissue examined microscopically\* Number of animals necropsied

## TABLE C2. SUMMARY OF THE INCIDENCE OF NONNEOPLASTIC LESIONS IN FEMALE RATS IN<br/>THE TWO-YEAR INHALATION STUDY OF DICHLOROMETHANE

(	CONTRO	L (CHAMB)	LO	W DOSE	MI	D DOSE	HIG	H DOSE
ANIMALS INITIALLY IN STUDY	50		50		50		50	
ANIMALS NECROPSIED	50		50		50		50	
ANIMALS EXAMINED HISTOPATHOLO	G 50		50		50		50	
NTEGUMENTARY SYSTEM								
*Skin	(50)		(50)		(50)		(50)	
Hyperkeratosis		(2%)						(0
Acanthosis	1	(2%)					1	(2%)
ESPIRATORY SYSTEM								
*Nasal cavity	(50)		(50)		(50)		(50)	
Foreign body, NOS	3	(6%)	3	(6%)		(4%)	1	(2%)
Hemorrhage	_		-			(2%)		
Inflammation, suppurative	5	(10%)	3	(6%)	11	(22%)		(8%)
Inflammation, chronic focal Hyperplasia, epithelial	1	(2%)	1	(2%)	2	(4%)	2	(4%)
Hyperplasia, epithenai Hyperplasia, focal		(2%)	1	(470)	2	(4870)		
Metaplasia, squamous		(2%)	2	(4%)	3	(6%)	9	(18%)
*Larynx	(50)	,	(50)		(50)	(	(50)	(
Foreign body, NOS		(2%)	/		/			(8%)
Inflammation, suppurative	1	(2%)	4	(8%)	5	(10%)		(14%)
Inflammation, chronic focal	2	(4%)	4	(8%)	4	(8%)	1	(2%)
Hyperplasia, epithelial	1	(2%)						
Acanthosis					1	(2%)	1	(2%)
Metaplasia, squamous		(2%)						
#Trachea	(50)		(48)	(90)	(49)		(46)	
Inflammation, suppurative Inflammation, chronic			1	• • • •				
Hyperplasia, epithelial			1 2	(2%) (4%)				
#Lung/bronchiole	(50)		(50)	(4,0)	(50)		(50)	
Foreign body, NOS	(00)		(00)			(2%)	(00)	
#Lung	(50)		(50)		(50)		(50)	
Foreign body, NOS					1	(2%)		
Hemorrhage	1	(2%)					1	(2%)
Bronchopneumonia, focal							1	
Pneumonia, aspiration							1	(2%)
Inflammation, granulomatous					2	(4%)		
Granuloma, NOS		(2%)						
Inflammation, granulomatous focal		(4%)						
Granuloma, foreign body Alveolar macrophages		(2%) (18%)	13	(26%)	10	(20%)	11	(22%)
Hyperplasia, alveolar epithelium	-	(13%)		(2%)		(6%)		(4%)
#Lung/alveoli	(50)		(50)	,	(50)		(50)	
Mineralization	1	(2%)						
Congestion, NOS				(2%)				
Edema, NOS	-	(19)		(2%)		(0.0)		(0.21)
Hemorrhage		(4%)		(12%)		(8%)	1	(2%)
Inflammation, interstitial	1	(2%)		(4%)	1	(2%)		(90)
Inflammation, suppurative	•	(2%)	2	(4%)			1	(2%)
Granuloma, NOS Fibrosis, focal		(2%)	1	(2%)	1	(2%)	1	(2%)
Fibrosis, nultifocal		(2%)		(4%)		(6%)		(2.10)
Necrosis, focal		(2%)	-	、- <i>···</i> /	Ū			
IEMATOPOIETIC SYSTEM								
#Bone marrow	(50)		(50)		(48)		(46)	
Fibrosis, multifocal					1	(2%)	1	(2%)
Fibrosis, diffuse Atrophy, NOS	1	(2%)		(4%)	1	(2%)		(2%)

	CONTRO	L (CHAMB)	LO	W DOSE	MI	D DOSE	HIC	SH DOSE
HEMATOPOIETIC SYSTEM (Continued	ł)	<u></u>						·
#Spleen	(50)		(50)		(50)		(49)	
Hemorrhage							1	(2%)
Inflammation, granulomatous			1	(2%)				
Fibrosis, focal				(2%)	4	(8%)	4	(8%)
Fibrosis, multifocal			1	(2%)				
Angiectasis					1	(2%)		
Hyperplasia, reticulum cell					1	(2%)		
Hyperplasia, lymphoid			1	(2%)		<b>(</b>		
Hematopoiesis	3	(6%)	2	(4%)	1	(2%)		
#Mandibular I. node	(49)		(49)		(50)	<b>,</b> ,	(50)	
Cyst, NOS	()			(2%)	(+ -)		(	
#Bronchial lymph node	(49)		(49)	(=)	(50)		(50)	
Hemorrhage		(4%)		(2%)	(00)			(2%)
#Pancreatic l. node	(49)		(49)	(2.0)	(50)		(50)	
Hemorrhage	()		(10)			(2%)	(00)	
#Renal lymph node	(49)		(49)		(50)	(=)	(50)	
Fibrosis				(2%)	()		(00)	
Pigmentation, NOS				(2%)				
#Liver	(50)		(50)	,	(50)		(50)	
Hematopoiesis		(4%)		(2%)	(00)		(00)	
#Thymus	(31)		(39)		(34)		(31)	
Cyst, NOS	(02)			(3%)		(3%)	(2 = )	
IRCULATORY SYSTEM		<u></u>						
*Multiple organs	(50)		(50)		(50)		(50)	
Periarteritis				(2%)				
*Nasal cavity	(50)		(50)		(50)		(50)	
Thrombosis, NOS				(6%)	(		()	
#Heart/atrium	(50)		(50)		(48)		(50)	
Thrombosis, NOS		(4%)		(2%)		(6%)		(10%)
Hemorrhage	-	(=)	-	(= ,•,		(2%)	•	(20.0)
Inflammation, suppurative						(2%)		
#Myocardium	(50)		(50)		(48)	(=)	(50)	
Fibrosis, focal	(,			(4%)	• • •	(2%)	(00)	
Fibrosis, multifocal			-	(1,0)		(2%)		
Fibrosis, diffuse	9	(4%)	1	(2%)		(2%)	2	(4%)
#Endocardium	(50)	(4,0)	(50)	(4,7)	(48)	(2,0)	(50)	
Fibrosis, focal	(00)		(00)			(2%)	(00)	
#Cardiac valve	(50)		(50)		(48)	(270)	(50)	
Metaplasia, cartilaginous		(32%)	• •	(194)		(17%)	• •	(1.99)
*Pulmonary artery	(50)	(3470)	(50)	(18%)	(50)	(1170)	(50)	(18%)
Mineralization	(00)		(00)		(00)		. ,	(2%)
Hyperplasia, focal					1	(2%)	+	(470)
#Liver	(50)		(50)		(50)	(2.0)	(50)	
Thrombosis, NOS	(00)			(6%)	(00)		(00)	
IGESTIVE SYSTEM						·, ·, ·, ·		
*Tongue	(50)		(50)		(50)		(50)	
Acanthosis	(00)		(00)			(2%)	(00)	
#Salivary gland	(49)		(49)		(50)	(2,70)	(49)	
Inflammation, chronic		(2%)		(2%)		(2%)	(47)	
#Liver	(50)	(210)	(50)	(2,10)	(50)	(2.10)	(50)	
Inflammation, chronic diffuse	(00)		(00)		(00)			(2%)
Inflammation, chronic diffuse Inflammation, granulomatous			9	(4%)	1	(2%)		(2%)
Inflammation, granulomatous Inflammation, granulomatous foca	1 14	(2806)				• • • •		• •
Inflammation, granulomatous loca		(28%) (2%)	30	(60%)	20	(40%)	22	(44%)
		(2%) (39%)	00	(590)	00	(760)	4 10	(0.000)
Hemosiderosis		(38%)		(58%)		(76%)		(90%)
Hepatocytomegaly	3	(6%)	10	(20%)	19	(36%)	5	(10%)
Angiectasis				(2%)	-	(2%)		

## TABLE C2. SUMMARY OF THE INCIDENCE OF NONNEOPLASTIC LESIONS IN FEMALE RATS IN THE TWO-YEAR INHALATION STUDY OF DICHLOROMETHANE (Continued)

## TABLE C2. SUMMARY OF THE INCIDENCE OF NONNEOPLASTIC LESIONS IN FEMALE RATS IN THE TWO-YEAR INHALATION STUDY OF DICHLOROMETHANE (Continued)

	CONTRO	L (CHAMB)	LO	W DOSE	MI	D DOSE	HIG	H DOSI
DIGESTIVE SYSTEM (Continued)			• • • • • • •					
#Hepatic capsule	(50)		(50)		(50)		(50)	
Fibrosis, focal			2	(4%)	1	(2%)		
#Liver/hepatocytes	(50)		(50)		(50)		(50)	
Necrosis, NOS					1	(2%)		
Necrosis, focal	2	(4%)	32	(64%)	19	(38%)	9	(18%)
Cytoplasmic vacuolization	10	(20%)	43	(86%)	44	(88%)	43	(86%)
Basophilic cyto change	23	(46%)	33	(66%)	21	(42%)	16	(32%)
Clear cell change			1	(2%)				
<b>#Bile duct</b>	(50)		(50)		(50)		(50)	
Inflammation, suppurative							1	(2%)
Fibrosis	4	(8%)	3	(6%)	10	(20%)	3	(6%)
Hyperplasia, NOS	22	(44%)	21	(42%)	26	(52%)	21	(42%)
<b>#Pancreatic acinus</b>	(50)		(48)		(50)		(46)	
Atrophy, focal	12	(24%)	10	(21%)	11	(22%)	5	(11%)
#Esophagus	(49)		(43)		(45)		(47)	
Foreign body, NOS					1	(2%)		
Dilatation, NOS	1	(2%)						
#Glandular stomach	(50)		(50)		(50)		(48)	
Mineralization					1	(2%)		
Ulcer, NOS					1		1	(2%)
Inflammation, suppurative			1	(2%)			1	(2%)
Hyperplasia, NOS			1	(2%)	1	(2%)		
#Forestomach	(50)		(50)	•	(50)	<b>,</b> ,	(48)	
Ulcer, NOS					(			(2%)
Inflammation, acute	1	(2%)			2	(4%)		
Hyperkeratosis	-	(=)			1			
Acanthosis					-	(=,	1	(2%)
#Small intestine/mucosa	(47)		(47)		(49)		(47)	(4 /0)
Hyperplasia, diffuse	(41)		(11)			(2%)	(**)	
#Duodenum	(47)		(47)		(49)	(4 /0)	(47)	
Inflammation, suppurative	(47)		(41)		(49)	(2%)	(41)	
Erosion						(2%)		
#Colon	(47)		(47)		(47)	(2,0)	(46)	
Cyst. NOS	(47)			(2%)	(=)		(40)	
Parasitism	8	(17%)		(26%)	9	(19%)	5	(11%)
#Cecum	(47)	(11,0)	(47)	(20%)	(47)	(13%)	(46)	(1170)
Hemorrhage	(47)		(41)			(2%)	(40)	
*Rectum	(50)		(50)		(50)	(270)	(50)	
Parasitism		(4%)	(00)		• •	(10%)		(2%)
	Z	(470)				(10%)		(270)
RINARY SYSTEM								
#Kidney	(50)		(50)		(50)		(49)	
Inflammation, chronic				(2%)				
Nephropathy		(96%)		(90%)		(82%)		(84%)
#Kidney/capsule	(50)		(50)		(50)		(49)	
Hemorrhage				(2%)				
Inflammation, suppurative				(2%)				
#Kidney/medulla	(50)		(50)		(50)		(49)	
Mineralization		(2%)		(4%)				
#Kidney/tubule	(50)		(50)		(50)		(49)	
Mineralization		(2%)						
Degeneration, NOS		(28%)		(40%)		(44%)		(51%)
#Kidney/pelvis	(50)		(50)		(50)		(49)	
Mineralization	6	(12%)						
Dilatation, NOS				(2%)				
Hyperplasia, epithelial				(2%)				
#Urinary bladder	(47)		(45)		(46)		(47)	
Dilatation, NOS				(2%)			ŕ	
Inflammation, suppurative			2		1	(2%)		
Hyperplasia, epithelial					-			(2%)

	CONTRO	L (CHAMB)	LO	W DOSE	MI	D DOSE	HIG	H DOSE
URINARY SYSTEM (Continued)					······			
#U bladder/submucosa	(47)		(45)		(46)		(47)	
Edema, NOS	4	(9%)			1	(2%)	2	(4%)
Hemorrhage	1	(2%)			1	(2%)		
CNDOCRINE SYSTEM								
#Pituitary	(49)		(49)		(49)		(49)	
Cyst, NOS	1	(2%)						
#Anterior pituitary	(49)		(49)		(49)		(49)	
Cyst, NOS	2	(4%)	4	(8%)	7	(14%)		(8%)
Hemorrhage							1	(2%)
Necrosis, NOS		(100)		(2%)	•	(00)	-	(100)
Hyperplasia, NOS		(12%)		(4%)		(6%)		(10%)
#Adrenal cortex Cyst, NOS	(50)	(2%)	(50)		(49)		(49)	
Hemorrhage	1	(270)	1	(2%)			3	(6%)
Necrosis, NOS				(2%)			J	
Necrosis, focal			•	(210)	1	(2%)		
Cytoplasmic vacuolization	16	(32%)	11	(22%)		(27%)	23	(47%)
Cytomegaly		(4%)		,				(2%)
#Adrenal medulla	(50)	(2,0)	(50)		(49)		(49)	(,
Hyperplasia, focal		(2%)		(14%)		(16%)		(6%)
#Thyroid	(47)	( )	(46)	<b>, ,</b>	(48)		(42)	
Ultimobranchial cyst					2	(4%)		
Hyperplasia, C-cell	6	(13%)	1	(2%)	9	(19%)	15	(36%)
#Thyroid follicle	(47)		(46)		(48)		(42)	
Hyperplasia, cystic		(2%)						
#Parathyroid	(26)	( <b>0</b> ~)	(19)		(26)		(26)	
Hyperplasia, NOS	2	(8%)		- <u></u>	1	(4%)		
REPRODUCTIVE SYSTEM								
*Mammary gland	(50)		(50)		(50)		(50)	
Galactocele	1	(2%)	1	(2%)	2	(4%)		
Hyperplasıa, epithelial					1	(2%)	1	(2%)
*Chtoral gland	(50)		(50)		(50)		(50)	
Mineralization	1	(2%)						
Cyst, NOS			1	(2%)	1	(2%)	_	( <b>m</b> - 1)
Ulcer, NOS	F	(100)	•	(100)		(100)		(2%)
Inflammation, suppurative Inflammation, chronic focal		(10%) (2%)	8	(16%)	5	(10%)	1	(2%)
Hyperplasia, epithelial		(2%) (2%)	1	(2%)	1	(2%)		
Metaplasia, squamous	•		•	(2.0)	Ĩ		1	(2%)
*Vagina	(50)		(50)		(50)		(50)	(277)
Acanthosis	(00)		(20)			(2%)	(00)	
#Uterus	(50)		(49)		(50)		(47)	
Hemorrhage		(2%)	,			(2%)	(/	
Inflammation, suppurative		(2%)			-			
#Uterus/endometrium	(50)		(49)		(50)		(47)	
Hyperplasıa, NOS		(14%)		(8%)		(10%)		(6%)
Metaplasia, squamous						(4%)		(2%)
#Ovary	(49)		(50)		(50)		(48)	
Cyst, NOS		(4%)		(4%)		(2%)		(10%)
#Mesovarium	(49)		(50)		(50)	(0.07)	(48)	
Inflammation, chronic focal					1	(2%)	···	
NERVOUS SYSTEM								
#Brain/meninges	(50)		(50)		(50)		(50)	
Inflammation, suppurative						(2%)		
Inflammation granulomatous foca						(2%)		

## TABLE C2. SUMMARY OF THE INCIDENCE OF NONNEOPLASTIC LESIONS IN FEMALE RATS IN THE TWO-YEAR INHALATION STUDY OF DICHLOROMETHANE (Continued)

## TABLE C2. SUMMARY OF THE INCIDENCE OF NONNEOPLASTIC LESIONS IN FEMALE RATS IN THE TWO-YEAR INHALATION STUDY OF DICHLOROMETHANE (Continued)

	CONTROL	(CHAMB)	LO	W DOSE	MI	D DOSE	HIG	H DOS
NERVOUS SYSTEM (Continued)								
#Cerebrum	(50)		(50)		(50)		(50)	
Hemorrhage	(20)		(**)		()			(8%)
Inflammation, chronic focal								(2%)
#Brain	(50)		(50)		(50)		(50)	(
Hemorrhage		(2%)		(8%)		(4%)	• •	(2%)
Atrophy, pressure		(=,,,,		(2%)		(8%)		(2%)
#Medulla oblongata	(50)		(50)	(	(50)		(50)	<b>x</b> = <b>,</b>
Hemorrhage	1	(2%)	(,		,		2	(4%)
PECIAL SENSE ORGANS	<u></u>							
*Eye	(50)		(50)		(50)		(50)	
Atrophy, NOS			-				1	(2%)
*Eye/sclera	(50)		(50)		(50)		(50)	
Mineralization								(2%)
*Eye/crystalline lens	(50)		(50)		(50)		(50)	
Cataract	1	(2%)	-				3	(6%)
*Eye/lacrimal gland	(50)		(50)		(50)		(50)	
Inflammation, chronic					1	(2%)		
Inflammation, chronic focal	1	(2%)			1	(2%)		
*Nasolacrimal duct	(50)		(50)		(50)		(50)	
Inflammation, suppurative Acanthosis	2	(4%)	6	(12%)		(6%) (8%)	2	(4%)
MUSCULOSKELETAL SYSTEM None								
BODY CAVITIES								
*Peritoneum	(50)		(50)		(50)		(50)	
	(50)		(50)	(90)	(50)		(50)	(971)
Necrosis, fat *Pleura	(50)			(2%)	(50)			(2%)
Fibrosis, focal	(50)	(2%)	(50)		(50)		(50)	
*Mesentery	(50)	(470)	(50)		(50)		(50)	
Inflammation, necrotizing	(00)		(00)			(2%)	(00)	
				t				
ALL OTHER SYSTEMS								
*Multiple organs	(50)		(50)		(50)		(50)	
Hemorrhage					1	(2%)		(10)
Inflammation, suppurative						(00)	Z	(4%)
Hemosiderosis					1	(2%)		
Omentum Nameria facal	-							
Necrosis, focal	1							
Necrosis, fat							1	
Broad ligament	1				2		1	
Necrosis, fat								

None

# Number of animals with tissue examined microscopically\* Number of animals necropsied

#### **APPENDIX D**

# SUMMARY OF THE INCIDENCE OF NONNEOPLASTIC LESIONS IN MICE IN THE TWO-YEAR

### **INHALATION STUDIES**

**OF DICHLOROMETHANE** 

### TABLE D1. SUMMARY OF THE INCIDENCE OF NONNEOPLASTIC LESIONS IN MALE MICE IN THE TWO-YEAR INHALATION STUDY OF DICHLOROMETHANE

	CONTR	OL (CHAMB)	LOW	DOSE	HIG	H DOSE
ANIMALS INITIALLY IN STUDY	50		50	<u></u>	50	
ANIMALS NECROPSIED	50		50		50	
ANIMALS EXAMINED HISTOPATHOLOGICALL	Y 50	·····	50		50	
NTEGUMENTARY SYSTEM						
*Skin	(50)		(50)	• • • •	(50)	
Ulcer, NOS				(2%)		(00)
Inflammation, suppurative *Subcut tissue	(20)			(2%)		(2%)
Inflammation, suppurative	(50)	(2%)	(50)		(50)	
Abscess, NOS		(2%)				
Inflammation, acute/chronic		(2%)				
RESPIRATORY SYSTEM			····			
*Nasal cavity	(50)		(50)		(50)	
Inflammation, serous	2	(4%)		(4%)		(6%)
Inflammation, suppurative			2	(4%)		(2%)
Inflammation, chronic						(2%)
Hyperplasia, focal	(50)		(20)			(2%)
*Laryngeal submucosa	(50)	(90)	(50)		(50)	
Inflammation, suppurative		(2%)	(50)		(50)	
#Lung Congestion, NOS	(50)	(2%)	(50)		(50)	(2%)
Hemorrhage		(4%)	1	(2%)	1	(270)
Lymphocytic inflammatory infiltrate		(6%)		(10%)	1	(2%)
Inflammation, interstitial	Ŭ	(0,0)		(2%)		(2%)
Inflammation, acute/chronic	1	(2%)	_	<u> </u>		(2%)
Hyperplasia, epithelial					1	(2%)
Histiocytosis						(2%)
#Lung/alveoli Histiocytosis	(50)		(50) 1	(2%)	(50) 1	(2%)
HEMATOPOIETIC SYSTEM			(50)		(50)	
*Multiple organs Hematopoiesis	(50)	(6%)	(50)		(50)	
#Bone marrow	(49)	(070)	(49)		(49)	
Inflammation, suppurative	(40)			(2%)	(43)	
Hyperplasia, hematopoietic			•	(2,0)	1	(2%)
Hyperplasia, granulocytic	5	(10%)	3	(6%)		(4%)
#Spleen	(49)		(49)		(48)	
Hemorrhage						(2%)
Atrophy, NOS		(90)		(9/1)	1	(2%)
Hyperplasia, lymphoid Hematopoiesis	1	(2%)		(2%) (4%)	4	(8%)
#Splenic follicles	(49)		(49)	(470)	(48)	(0%)
Atrophy. NOS	(40)			(6%)		(15%)
#Lymph node	(42)		(45)		(40)	/
Hyperplasia, lymphoid				(9%)	( - <b>/</b> /	
#Mandibular lymph. node	(42)		(45)		(40)	
Hyperplasia, reticulum cell						(3%)
Mastocytosis						(3%)
#Bronchial lymph node	(42)	(90)	(45)		(40)	
Atrophy, NOS Atrophy, cystic	1	(2%)			1	(3%)
Hyperplasia, lymphoid					1	
#Mesenteric lymph node	(42)		(45)		(40)	
Hyperplasia, lymphoid				(2%)		
#Renal lymph node	(42)		(45)		(40)	
Hemosiderosis			1	(2%)		
Hyperplasia, lymphoid			-			(3%)

	CONTR	OL (CHAMB)	LOW	DOSE	HIG	H DOSE
HEMATOPOIETIC SYSTEM (Continued)						
#Axillary lymph node	(42)		(45)		(40)	
Hyperplasia, lymphoid				(2%)		
#Liver	(50)		(49)		(49)	
Hematopoiesis			1	(2%)		
CIRCULATORY SYSTEM						
#Heart	(50)		(50)		(50)	
Mineralization				(2%)		
Inflammation, acute/chronic	1	(2%)		(2%)		(2%)
#Cardiac valve	(50)		(50)		(50)	
Inflammation, suppurative			1	(2%)		
Pigmentation, NOS						(2%)
#Hepatic sinusoid	(50)		(49)	(99)	(49)	
Necrosis, NOS			1	(2%)		
DIGESTIVE SYSTEM						
*Tooth	(50)		(50)		(50)	
Congenital malformation, NOS	4	(8%)		(6%)		
Inflammation, suppurative			_	(2%)		
#Salivary gland	(48)	( <b>0</b> ~ )	(49)	(0~)	(46)	(10)
Inflammation, acute/chronic		(8%)		(2%)		(4%)
#Liver	(50)		(49)		(49)	(00)
Mineralization			0	(60)	1	(2%)
Torsion Congestion NOS			3	(6%)	1	(2%)
Congestion, NOS Inflammation, necrotizing	1	(2%)	9	(4%)		(2%)
Inflammation, acute/chronic		(4%)		(2%)		(4%)
Inflammation, chronic focal	4	(**70)		(2%)	4	(4.70)
Necrosis, NOS				(2%)	2	(4%)
Necrosis, focal			-	(=,.,,		(6%)
Focal cellular change			1	(2%)		
Eosinophilic cyto change	2	(4%)			1	(2%)
Cytologic degeneration					22	(45%)
#Liver/hepatocytes	(50)		(49)		(49)	
Necrosis, focal					2	(4%)
*Gallbladder	(50)		(50)		(50)	
Inflammation, acute/chronic				(2%)		
#Pancreas	(50)		(48)		(47)	
Amyloidosis			<i></i>			(2%)
#Pancreatic duct	(50)		(48)		(47)	(00)
Inflammation, NOS #Pancreatic acinus	(50)		(48)		1 (47)	(2%)
Atrophy, NOS	(00)		(40)			(2%)
#Gastric mucosa	(49)		(47)		(49)	(270)
Mineralization	(20)		(***()			(2%)
#Glandular stomach	(49)		(47)		(49)	(= .0)
Dilatation, NOS		(6%)		(15%)		(18%)
#Duodenum	(49)		(46)		(47)	,
Inflammation, acute/chronic			,			(2%)
#Ileum	(49)		(46)		(47)	·
Amyloidosis		(2%)				(2%)
*Rectum	(50)		(50)		(50)	-
Inflammation, suppurative			1	(2%)		
*Anus	(50)		(50)		(50)	
Inflammation, suppurative	1	(2%)				

## TABLE D1. SUMMARY OF THE INCIDENCE OF NONNEOPLASTIC LESIONS IN MALE MICE IN THE<br/>TWO-YEAR INHALATION STUDY OF DICHLOROMETHANE (Continued)

	CONTR	OL (CHAMB)	LOW	DOSE	HIG	H DOSE
URINARY SYSTEM				<u>,</u>		
#Kidney	(50)		(49)		(50)	
Mineralization		(4%)		(2%)		(2%)
Hydronephrosis	1	(2%)				
Cyst, NOS			2	(4%)		
Inflammation, suppurative	1	(2%)			1	(2%)
Inflammation, necrotizing					1	(2%)
Pyelonephritis, acute	1	(2%)	2	(4%)	3	(6%)
Inflammation, acute/chronic	4	(8%)	2	(4%)	2	(4%)
Inflammation, chronic	1	(2%)			1	(2%)
Glomerulonephritis, chronic		(6%)	1	(2%)	1	(2%)
Inflammation, chronic focal			1	(2%)		
Fibrosis, focal					1	(2%)
Nephropathy			1	(2%)		
Infarct, NOS					1	(2%)
Calcinosis, NOS						(2%)
Metaplasia, osseous			2	(4%)	-	(
#Kidney/tubule	(50)		(49)	(	(50)	
Cast, NOS		(12%)		(22%)	20	(40%)
Cyst, NOS		(4%)		(2%)		(/
Nephrosis, NOS		(4%)	-	()		
Pigmentation, NOS	-	(,	1	(2%)		
#Kidney/pelvis	(50)		(49)	(=,	(50)	
Hemorrhage		(2%)	(/		(	
Inflammation, suppurative		(2%)				
#Urinary bladder	(50)	<b>\_</b>	(49)		(47)	
Calculus, unkn gross or micro	(		<b>、</b> ,			(2%)
Distention	1	(2%)	2	(4%)		
Inflammation, NOS		• •			1	(2%)
Inflammation, suppurative	2	(4%)	4	(8%)	3	
Inflammation, acute/chronic		(2%)	-	(0,0)	2	(4%)
Inflammation, chronic		(2%)	1	(2%)		()
Hyperplasia, epithelial	-	(=,~)	-	(2.0)	3	(6%)
#Urinary bladder/submucosa	(50)		(49)		(47)	(0.0)
Angiectasis	(00)			(2%)	(41)	
*Urethra	(50)		(50)	(2,0)	(50)	
Mucocele				(2%)	(00)	
NDOCRINE SYSTEM						<u></u>
#Pituitary	(48)		(48)		(45)	
Congestion, NOS	(-0)			(2%)	(40)	
#Adrenal	(50)		(46)	(2,0)	(50)	
Inflammation, suppurative	(00)		()			(2%)
Necrosis, hemorrhagic	1	(2%)			4	(= /* /
Hyperplasia, focal		(2%)				
#Adrenal/capsule	(50)		(46)		(50)	
Hyperplasia, focal		(2%)	(40)		(00)	
#Adrenal cortex	(50)	(~~)	(46)		(50)	
Hyperplasia, NOS	(00)		(40)			(2%)
Hyperplasia, focal			3	(7%)	•	
#Adrenal medulla	(50)		(46)		(50)	
Hyperplasia, NOS	(00)			(4%)		(2%)
#Thyroid	(45)		(47)	\- <i>\</i>	(48)	( <b></b> / ··· /
Inflammation, acute/chronic		(2%)		(2%)	(40)	
	•			(2%)		
nvoerbiasia, V-cell						
Hyperplasia, C-cell #Thyroid follicle	(45)		(47)		(48)	

## TABLE D1. SUMMARY OF THE INCIDENCE OF NONNEOPLASTIC LESIONS IN MALE MICE IN THE TWO-YEAR INHALATION STUDY OF DICHLOROMETHANE (Continued)

	CONTR	OL (CHAMB)	LOW	DOSE	HIG	h dose
REPRODUCTIVE SYSTEM						
*Penis	(50)		(50)		(50)	
Inflammation, suppurative	(00)		·/	(2%)	(00)	
Inflammation, necrotizing	9	(4%)		(2%)		
*Prepuce	(50)	(4,0)	(50)	(2170)	(50)	
Inflammation, necrotizing	(00)		(00)			(2%)
*Preputial gland	(50)		(50)		(50)	
Dilatation, NOS		(2%)	(00)		(00)	
Dilatation/ducts	-	(4 10)	1	(2%)	1	(2%)
Cyst, NOS				(2%)	-	(=,0)
Cystic ducts	1	(2%)		(2%)		
Inflammation, suppurative		(4%)	-	(4%)		
Inflammation, necrotizing	-	(10)		(4%)		
Abscess, NOS	1	(2%)	2	(4%)		
Inflammation, acute/chronic			1	(2%)		
Inflammation, chronic	1	(2%)		-		
Hyperkeratosis			2	(4%)		
#Prostate	(50)		(50)		(47)	
Inflammation, suppurative	• •	(6%)	2	(4%)	3	(6%)
*Seminal vesicle	(50)		(50)		(50)	
Dilatation, NOS	1	(2%)				
Distention		(6%)	3	(6%)		
#Testis	(50)		(50)		(50)	
Mineralization	1	(2%)	2	(4%)	2	(4%)
Granuloma, spermatic	1	(2%)				
Atrophy, NOS			4	(8%)		(62%)
Hyperplasia, interstitial cell					1	(2%)
*Scrotum	(50)		(50)		(50)	
Inflammation, necrotizing			1	(2%)		
NERVOUS SYSTEM						
#Brain/meninges	(50)		(50)		(50)	
Lymphocytic inflammatory infiltrate	·,		1	(2%)		
Inflammation, acute/chronic	1	(2%)	_			
#Brain	(50)		(50)		(50)	
Mineralization		(50%)		(48%)		(32%)
Congestion, NOS				(2%)		
Hemorrhage				(2%)		
SPECIAL SENSE ORGANS None						
MUSCULOSKELETAL SYSTEM						,,,
*Bone	(50)		(50)		(50)	
Fibrous osteodystrophy					1	(2%)
BODY CAVITIES None						

## TABLE D1. SUMMARY OF THE INCIDENCE OF NONNEOPLASTIC LESIONS IN MALE MICE IN THE<br/>TWO-YEAR INHALATION STUDY OF DICHLOROMETHANE (Continued)

## TABLE D1. SUMMARY OF THE INCIDENCE OF NONNEOPLASTIC LESIONS IN MALE MICE IN THE TWO-YEAR INHALATION STUDY OF DICHLOROMETHANE (Continued)

	CONTROL (CHAMB)	LOW	DOSE	HIGH DOSI
ALL OTHER SYSTEMS				<u> </u>
*Multiple organs	(50)	(50)		(50)
Inflammation, suppurative		1	(2%)	
Inflammation, acute/chronic	3 (6%)	5	(10%)	1 (2%)
Foot				
Inflammation, suppurative				1
Adipose tissue				
Inflammation, suppurative		1		

# Number of animals with tissue examined microscopically\* Number of animals necropsied

## TABLE D2. SUMMARY OF THE INCIDENCE OF NONNEOPLASTIC LESIONS IN FEMALE MICE IN THE TWO-YEAR INHALATION STUDY OF DICHLOROMETHANE

C	ONTR	OL (CHAMB)	LOW	DOSE	HIGI	H DOSI
ANIMALS INITIALLY IN STUDY			50			
ANIMALS MISSING	00		1		1	
ANIMALS NECROPSIED	50		49		49	
ANIMALS EXAMINED HISTOPATHOLOGICALLY	50		48		49	
NTEGUMENTARY SYSTEM						
*Skin	(50)		(49)		(49)	
Epidermal inclusion cyst				(2%)		
Inflammation, suppurative			1	(2%)		
Inflammation, chronic focal	1	(2%)				
Hyperkeratosis			1	(2%)		
*Subcut tissue	(50)		(49)		(49)	
Inflammation, suppurative	1	(2%)				
		<u></u>				
RESPIRATORY SYSTEM	(50)		(10)		(10)	
*Nasal cavity	(50)	(1.00)	(49)	(00)	(49)	(40)
Inflammation, serous		(16%)		(8%)	2	(4%)
Inflammation, suppurative	1	(2%)		(4%)	•	(40)
Hyperplasia, epithelial	(50)			(2%)		(4%)
#Lung	(50)		(48)	(00)	(48)	
Congestion, NOS				(2%)		
Edema, NOS	-	(1.4.77.)		(2%)	•	(00)
Lymphocytic inflammatory infiltrate	1	(14%)		(10%)	3	(6%)
Inflammation, interstitial				(2%)	•	(10)
Inflammation, suppurative			1	(2%)		(4%)
Inflammation, necrotizing				(		(4%)
Inflammation, acute/chronic			1	(2%)		(2%)
Hyperplasia, NOS					1	(2%)
Hyperplasia, epithelial				(2%)		
#Lung/alveoli	(50)		(48)		(48)	
Crystals, NOS						(2%)
Histiocytosis					2	(4%)
IEMATOPOIETIC SYSTEM						
*Multiple organs	(50)		(49)		(49)	
Hyperplasia, lymphoid	(00)			(2%)	()	
Hematopoiesis	1	(2%)		(2%)		
#Bone marrow	(48)	(2,0)	(47)	(2,0)	(45)	
Atrophy, NOS	(10)		(			(2%)
Hyperplasia, hematopoietic						(2%)
Hyperplasia, granulocytic	4	(8%)			-	.=,
#Spleen	(49)	····	(48)		(47)	
Inflammation, necrotizing	(=0)			(2%)	(**)	
Amyloidosis	1	(2%)	•			
Hemosiderosis	-				1	(2%)
Hyperplasia, lymphoid	5	(10%)	1	(2%)	•	
Hematopoiesis		(14%)		(6%)	3	(6%)
#Splenic follicles	(49)	/	(48)	/	(47)	
Atrophy, NOS	/		/			(2%)
#Mandibular lymph node	(49)		(47)		(43)	
Hyperplasia, reticulum cell		(2%)			,	
Hyperplasia, lymphoid		(2%)	1	(2%)		
#Bronchial lymph node	(49)	(= /V/	(47)		(43)	
Congestion, NOS	(10)		(11)			(2%)
			1	(2%)	I	(4 10)
Inflammation service			1	14/01		
Inflammation, serous	1	(2%)				
Inflammation, suppurative		(2%) (6%)			1	(996)
		(2%) (6%)	(47)		1 (43)	(2%)

	CONTR	OL (CHAMB)	LOW	DOSE	HIG	H DOSE
HEMATOPOIETIC SYSTEM (Continued)						
#Lung	(50)		(48)		(48)	
Leukocytosis, NOS		(2%)	/			
#Liver	(50)	•	(48)		(48)	
Leukocytosis, NOS	1	(2%)				
Leukemoid reaction	1	(2%)	1	(2%)		
Hematopoiesis	1	(2%)	1	(2%)		
#Adrenal	(50)		(48)	,	(48)	
Hematopoiesis	()		· /			(2%)
#Thymus	(30)		(20)		(9)	
Atrophy, NOS		(3%)	(20)		(0)	
CIRCULATORY SYSTEM						
*Multiple organs	(50)		(49)		(49)	
Periarteritis					1	(2%)
#Heart	(49)		(48)		(49)	
Mineralization					1	(2%)
Inflammation, acute/chronic		(2%)				
Perivasculitis	1	(2%)				
#Cardiac valve	(49)		(48)		(49)	
Inflammation, NOS			1	(2%)		
*Aorta	(50)		(49)		(49)	
Inflammation, acute/chronic			1	(2%)		
DIGESTIVE SYSTEM						
*Tooth	(50)		(49)	(0.4)	(49)	
Congenital malformation, NOS				(2%)	<i>(</i> <b></b> .	
*Pulp of tooth	(50)		(49)		(49)	(0.0)
Abscess, NOS		(2%)				(2%)
#Salivary gland	(50)		(45)		(47)	
Inflammation, NOS	1	(2%)				
Inflammation, acute/chronic						(4%)
#Liver	(50)		(48)		(48)	
Mineralization					1	(2%)
Torsion	1	(2%)				
Congestion, chronic passive			1	(2%)		
Inflammation, suppurative	1	(2%)		. ,		
Inflammation, acute/chronic		(,	1	(2%)	1	(2%)
Inflammation, chronic				(2%)	-	(
Degeneration, cystic			-	(=,0)	1	(2%)
Necrosis, NOS						(4%)
Necrosis, focal	3	(6%)	1	(2%)		(4%)
Metamorphosis, fatty		(2%)	-	(- 10)		(2%)
Pigmentation, NOS		(2%)			1	~~~~
Cytologic degeneration	1		93	(48%)	91	(44%)
#Pancreas	(48)		(48)	(10 /0)	(47)	( = = // /
	(48)			(20)	(41)	
Inflammation, acute/chronic	(40)			(2%)	1400	
#Pancreatic acinus	(48)		(48)	(90)	(47)	
Atrophy, NOS				(2%)		
#Stomach	(49)	(07)	(47)		(48)	
Ulcer, NOS	1	(2%)	-	(24)		
Inflammation, suppurative				(2%)		
Hyperkeratosis		(2%)		(9%)		(2%)
#Glandular stomach	(49)		(47)		(48)	
Dilatation, NOS	1	(2%)	2	(4%)		(21%)
Inflammation, suppurative					1	(2%)
#Gastric submucosa	(49)		(47)		(48)	
Inflammation, suppurative			1	(2%)		
#Duodenum	(46)		(47)		(47)	
Inflammation, suppurative						(2%)

## TABLE D2. SUMMARY OF THE INCIDENCE OF NONNEOPLASTIC LESIONS IN FEMALE MICE IN THE TWO-YEAR INHALATION STUDY OF DICHLOROMETHANE (Continued)

	CONTR	ROL (CHAMB)	LOW	DOSE	HIG	H DOSE
DIGESTIVE SYSTEM (Continued)		<u></u>				
#Jejunum	(46)		(47)		(47)	
Amyloidosis	(40)			(2%)		(2%)
#Ileum	(46)		(47)	(2,0)	(47)	
# neum Amyloidosis		(2%)		(2%)	(47)	
				(270)	(49)	
*Rectum	(50)	(2%)	(49)		(49)	
Inflammation, necrotizing	۱ 	(2%)				
JRINARY SYSTEM						
#Kidney	(49)		(48)		(47)	
Hydronephrosis					2	(4%)
Hemorrhage			1	(2%)		
Glomerulonephritis, NOS	2	(4%)			1	(2%)
Inflammation, suppurative		(2%)			-	,
Pyelonephritis, acute		(2%)				
Inflammation, acute/chronic		(8%)	1	(2%)		
Glomerulonephritis, subacute		(2%)	•	(2,0)		
Inflammation, chronic		(2%)				
Glomerulonephritis, chronic		(8%)	A	(8%)		
	4	(070)		(8%)		(2%)
Infarct, NOS	(10)			(270)		(270)
#Kidney/tubule	(49)		(48)	(10~)	(47)	(100)
Cast, NOS		(16%)	23	(48%)		(49%)
Multiple cysts	1	(2%)				(2%)
Necrosis, NOS						(2%)
#Urinary bladder	(48)		(48)		(47)	
Distention			1	(2%)		
Lymphocytic inflammatory infiltrate			1	(2%)		
ENDOCRINE SYSTEM #Pituitary Congestion, NOS Necrosis, focal Hypertrophy, focal Hyperplasia, NOS Hyperplasia, focal Angiectasis #Adrenal Congestion NOS	1 2	(4%) (2%) (4%) (2%)		(2%) (11%)	1 1 (48)	(2%) (2%) (2%) (6%)
Congestion, NOS			1	(00)	3	(0%)
Inflammation, suppurative		(94)	1	(2%)		
Inflammation, fibrinous Amyloidosis		(2%) (2%)				
Amyloldosis Angiectasis	1	(2%)			•	(2%)
· · · · · · · · · · · · · · · · · · ·	(50)		(48)			(470)
#Adrenal cortex Cyst, NOS		(99)	(40)		(48)	
		(2%)	(40)		(40)	
#Adrenal medulla	(50)	(00)	(48)		(48)	
Hyperplasia, NOS	1	(2%)		(0/2)		
Hyperplasia, focal				(2%)		
#Thyroid	(48)		(47)		(46)	( <b>a a</b> :
Inflammation, suppurative						(2%)
Inflammation, acute/chronic						(2%)
Hyperplasia, follicular cell	2	(4%)			2	(4%)
#Thyroid follicle	(48)		(47)		(46)	
Hypertrophy, focal	,			(2%)		
EPRODUCTIVE SYSTEM						
*Mammary gland	(50)	10 <i>1</i>	(49)		(49)	
Dilatation/ducts Hyperplasia, focal		(2%) (2%)				

## TABLE D2. SUMMARY OF THE INCIDENCE OF NONNEOPLASTIC LESIONS IN FEMALE MICE IN THE TWO-YEAR INHALATION STUDY OF DICHLOROMETHANE (Continued)

	CONTR	OL (CHAMB)	LOW	DOSE	HIG	H DOSE
REPRODUCTIVE SYSTEM (Continued)	··· ···					· <u> </u>
#Uterus	(50)		(48)		(47)	
Mineralization	(00)		(10)			(2%)
Inflammation, suppurative	6	(12%)	2	(4%)	-	(=,.,,
Abscess, NOS		(2%)	-	(=,0)		
Inflammation, chronic	-	(270)	1	(2%)		
Atrophy, NOS				(2%)	8	(17%)
#Uterus/endometrium	(50)		(48)	(2.07	(47)	(11,0)
Hyperplasia, NOS		(30%)		(17%)		(9%)
#Ovary	(50)	(00 10)	(47)	(11,0)	(43)	(•.•)
Mineralization		(6%)	(41)			(2%)
Cyst, NOS		(16%)	9	(19%)		(14%)
Epidermal inclusion cyst	Ŭ	(10 %)		(2%)	•	(
Congestion, NOS	1	(2%)	•	(4 %)		
Hematoma, NOS	1	(20)	1	(2%)		
Hemorrhagic cyst	9	(4%)		(2%)	2	(7%)
Abscess, NOS		(18%)		(9%)	5	(1,20)
	9	(1070)				
Inflammation, chronic Inflammation necro granulomatous		(2%)	T	(2%)		
			00	(60%)		177 4 191 1
Atrophy, NOS	o	(12%)	28	(60%)	3Z	(74%)
NERVOUS SYSTEM						
#Brain/meninges	(50)		(48)		(47)	
Lymphocytic inflammatory infiltrate	1	(2%)				
#Brain	(50)		(48)		(47)	
Mineralization	21	(42%)	9	(19%)	12	(26%)
Lymphocytic inflammatory infiltrate	1	(2%)	1	(2%)		
Inflammation, hemorrhagic		•	1	(2%)		
Corpora amylacea					1	(2%)
SPECIAL SENSE ORGANS						
*Harderian gland	(50)		(49)		(49)	
Inflammation, suppurative	(00)		(40)			(2%)
miannation, supportative						(270)
MUSCULOSKELETAL SYSTEM						
*Maxilla	(50)		(49)		(49)	
Fibrous osteodystrophy	4	(8%)				
*Sternum	(50)		(49)		(49)	
Fibrous osteodystrophy	1	(2%)	3	(6%)	5	(10%)
BODY CAVITIES						
*Peritoneum	(50)		(49)		(49)	
Hematoma, NOS		(2%)	\_ <del>\</del> /		()	
Inflammation, suppurative		(2%)	1	(2%)		
Inflammation, acute/chronic		(2%)	•			
Inflammation, chronic	•	\	1	(2%)		
ALL OTHER SYSTEMS						
*Multiple organs	(50)		(49)		(49)	
Lymphocytic inflammatory infiltrate		(2%)	(97)		(40)	
Inflammation, suppurative		(6%)	1	(2%)	1	(2%)
Inflammation, suppurative Inflammation, acute/chronic		(20%)		(12%)		(270) (4%)
	10	120701	0	(1470)	2	(1870)
Adipose tissue						
Inflammation, chronic	•		1			
Calcification, NOS	1					
Connective tissue						
Inflammation, chronic			1			

## TABLE D2.SUMMARY OF THE INCIDENCE OF NONNEOPLASTIC LESIONS IN FEMALE MICE IN THE<br/>TWO-YEAR INHALATION STUDY OF DICHLOROMETHANE (Continued)

#### TABLE D2. SUMMARY OF THE INCIDENCE OF NONNEOPLASTIC LESIONS IN FEMALE MICE IN THE TWO-YEAR INHALATION STUDY OF DICHLOROMETHANE (Continued)

	CONTROL (CHAMB)	LOW DOSE	HIGH DOSE
SPECIAL MORPHOLOGY SUMMARY No lesion reported Animal missing/no necropsy Auto/necropsy/no histo	1	2 1 1	2 1

# 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 INHALATION STUDIES OF DICHLOROMETHANE

## TABLE E1. ANALYSIS OF PRIMARY TUMORS IN MALE RATS IN THE TWO-YEAR INHALATIONSTUDY OF DICHLOROMETHANE

	Control	1,000 ppm	<b>2,000 ppm</b>	4,000 ppm
Skin: Papilloma				<u></u>
Overall Rates (a)	4/50 (8%)	0/50 (0%)	1/50 (2%)	0/50 (0%)
Adjusted Rates (b)	20.0%	0.0%	2.0%	0.0%
Terminal Rates (c)	1/16(6%)	0/16 (0%)	0/17 (0%)	0/9 (0%)
Week of First Observation	99		71	
Life Table Tests (d)	P = 0.058N	P = 0.067 N	P = 0.187N	P = 0.137N
Incidental Tumor Tests (d)	P=0.040N	P = 0.054N	P=0.190N	P = 0.057N
Cochran-Armitage Trend Test (d)	P=0.039N			
Fisher Exact Test (d)		P = 0.059N	P = 0.181N	P = 0.059N
kin: Keratoacanthoma				
Overall Rates (a)	2/50 (4%)	2/50 (4%)	0/50 (0%)	3/50 (6%)
Adjusted Rates (b)	12.5%	9.1%	0.0%	21.2%
Terminal Rates (c)	2/16(13%)	1/16 (6%)	0/17 (0%)	0/9 (0%)
Week of First Observation	104	92		101
Life Table Tests (d)	P=0.268	P=0.693N	P = 0.223N	P = 0.303
Incidental Tumor Tests (d)	P = 0.395	P = 0.696	P = 0.223N	P = 0.453
Cochran-Armitage Trend Test (d)	P = 0.423			_ 01100
Fisher Exact Test (d)		P = 0.691	P = 0.247 N	P = 0.500
ubcutaneous Tissue: Fibroma				
Overall Rates (a)	1/50 (2%)	1/50 (2%)	2/50 (4%)	4/50 (8%)
Adjusted Rates (b)	6.3%	6.3%	9.2%	19.5%
Terminal Rates (c)	1/16(6%)	1/16 (6%)	1/17 (6%)	0/9 (0%)
Week of First Observation	104	104	96	89
Life Table Tests (d)	P = 0.024	P = 0.764	P = 0.523	P = 0.095
Incidental Tumor Tests (d)	P = 0.064	P = 0.764	P = 0.505	P = 0.204
Cochran-Armitage Trend Test (d)	P = 0.072	1 -0.104	1 -0.000	1 -0.204
Fisher Exact Test (d)	1 = 0.012	P=0753	P = 0.500	P=0.181
ubcutaneous Tissue: Fibroma or Sarc				
Overall Rates (a)	1/50 (2%)	1/50 (2%)	2/50 (4%)	5/50 (10%)
	6.3%	6.3%	, ,	5/50 (10%)
Adjusted Rates (b) Terminal Rates (c)		0.3% 1/16(6%)	9.2% 1/17 (6%)	22.7%
Week of First Observation	1/16 (6%) 104	104	96	0/9 (0%) 89
Life Table Tests (d)	P = 0.008	P=0.764	P = 0.523	P = 0.050
Incidental Tumor Tests (d)	P = 0.008 P = 0.026	P = 0.764	P = 0.525 P = 0.505	P = 0.030 P = 0.125
Cochran-Armitage Trend Test (d)	P = 0.020 P = 0.029	1 -0.704	r - 0.000	F -0.120
Fisher Exact Test (d)	r — 0.023	P = 0.753	P = 0.500	P=0.102
Iematopoietic System: Mononuclear C	all Laukamia			
Overall Rates (a)	34/50 (68%)	26/50 (52%)	32/50 (64%)	35/50 (70%)
Adjusted Rates (b)	80.3%	77.0%	80.2%	89.4%
Terminal Rates (c)	8/16 (50%)	9/16 (56%)	10/17 (59%)	6/9 (67%)
Week of First Observation	57	82	71	75
Life Table Tests (d)	P = 0.045	P = 0.147N	P = 0.400N	P = 0.134
Incidental Tumor Tests (d)	P = 0.399	P = 0.049N	P = 0.434N	P = 0.134 P = 0.487N
Cochran-Armitage Trend Test (d)	P = 0.355 P = 0.251	I - 0.04011	1 - 0.10111	1 - 0.3011
Fisher Exact Test (d)	1 -0.201	P=0.076N	P=0.417N	P = 0.500
iver: Neoplastic Nodule or Hepatocel	lular Carcinoma			
	2/50 (4%)	2/49 (4%)	4/50 (8%)	1/50 (2%)
Overall Rates (a)	5.5%	8.7%	19.0%	2.3%
Overall Rates (a) Adjusted Rates (b)		1/16 (6%)	2/17 (12%)	0/9 (0%)
Adjusted Rates (b)	0/16(0%)			
Adjusted Rates (b) Terminal Rates (c)	0/16(0%) 86		96	79
Adjusted Rates (b) Terminal Rates (c) Week of First Observation	86	88	96 P=0.357	79 = 0.523 N
Adjusted Rates (b) Terminal Rates (c) Week of First Observation Life Table Tests (d)	86 P = 0.555N	88 P=0.677N	P = 0.357	P = 0.523N
Adjusted Rates (b) Terminal Rates (c) Week of First Observation	86	88		

	Control	1,000 ppm	2,000 ppm	4,000 ppm
Pituitary: Adenoma				
Overall Rates (a)	20/50 (40%)	31/47 (66%)	27/49 (55%)	24/49 (49%)
Adjusted Rates (b)	67.2%	87.4%	81.9%	79.8%
Terminal Rates (c)	8/16 (50%)	12/16 (75%)	12/17 (71%)	5/9 (56%)
Week of First Observation	70	67	70	62
Life Table Tests (d)	P = 0.078	P = 0.057	P = 0.190	P = 0.063
Incidental Tumor Tests (d)	P = 0.363	P=0.013	P = 0.101	P=0.207
Cochran-Armitage Trend Test (d)	P=0.437	<b>D</b>	D 0.000	<b>D</b> 0.040
Fisher Exact Test (d)		P = 0.009	P = 0.096	P = 0.243
ituitary: Adenoma or Carcinoma				
Overall Rates (a)	20/50 (40%)	32/47 (68%)	27/49 (55%)	24/49 (49%)
Adjusted Rates (b)	67.2%	87.6%	81.9%	79.8%
Terminal Rates (c)	8/16 (50%)	12/16 (75%)	12/17 (71%)	5/9 (56%)
Week of First Observation	70	62	70	62
Life Table Tests (d)	P=0.089	P = 0.043	P=0.190	P = 0.063
Incidental Tumor Tests (d)	P = 0.383	P = 0.007	P = 0.101	P = 0.207
Cochran-Armitage Trend Test (d)	P = 0.466		A	0.201
Fisher Exact Test (d)	* - *****	P = 0.005	P=0.096	P=0.243
land Disselar				
drenal: Pheochromocytoma	F (F. A. 4 A. 4)	11/60 (00%)	10/20 /00/21	10/20 /00-21
Overall Rates (a)	5/50 (10%)	11/50 (22%)	10/50 (20%)	10/50 (20%)
Adjusted Rates (b)	23.5%	46.4%	45.4%	52. <b>9%</b>
Terminal Rates (c)	2/16 (13%)	5/16 (31%)	6/17 (35%)	3/9 (33%)
Week of First Observation	75	89	89	80
Life Table Tests (d)	P = 0.035	P=0.094	P = 0.149	P=0.039
Incidental Tumor Tests (d)	P=0.131	P=0.093	P = 0.131	P = 0.108
Cochran-Armitage Trend Test (d)	P = 0.192	D 0.000	5	
Fisher Exact Test (d)		P=0.086	P=0.131	P = 0.131
drenal: Pheochromocytoma or Phe	ochromocytoma, M	alignant		
Overall Rates (a)	5/50 (10%)	11/50 (22%)	11/50 (22%)	10/50 (20%)
Adjusted Rates (b)	23.5%	46.4%	47.0%	52.9%
Terminal Rates (c)	2/16 (13%)	5/16 (31%)	6/17 (35%)	3/9 (33%)
Week of First Observation	75	89	89	80
Life Table Tests (d)	P = 0.034	P = 0.094	P = 0.104	P = 0.039
Incidental Tumor Tests (d)	P=0.134	P = 0.093	P = 0.087	P = 0.108
Cochran-Armitage Trend Test (d)	P = 0.134 P = 0.186	1-0.000	1 -0.001	1 -0.100
Fisher Exact Test (d)	1 -0.100	P=0.086	P=0.086	P=0.131
hyroid: C-Cell Adenoma Overall Rates (a)	1/49 (2%)	3/48 (6%)	6/49 (12%)	2/50 (4%)
Adjusted Rates (b)	2.4%	16.5%	28.8%	4.6%
Terminal Rates (c)	0/16(0%)	2/16 (13%)	4/17 (24%)	4.0% 0/9 (0%)
Week of First Observation	81	101	4/1 ( (24%) 94	0/9 (0%) 79
Life Table Tests (d)	P = 0.253			
		P = 0.313	P = 0.067	P = 0.500
	P = 0.388	P=0.306	P = 0.061	P = 0.661
Incidental Tumor Tests (d)	D_0 407			
Cochran-Armitage Trend Test (d)	P = 0.435	D 0.001		
	P = 0.435	P=0.301	P = 0.056	P = 0.508
Cochran-Armitage Trend Test (d) Fisher Exact Test (d)		P=0.301	P=0.056	P=0.508
Cochran-Armitage Trend Test (d) Fisher Exact Test (d) hyroid: C-Cell Adenoma or Carcino Overall Rates (a)		P=0.301 4/48 (8%)	P=0.056 7/49 (14%)	P = 0.508 2/50 (4%)
Cochran-Armitage Trend Test (d) Fisher Exact Test (d) hyroid: C-Cell Adenoma or Carcino Overall Rates (a)	ma			2/50 (4%)
Cochran-Armitage Trend Test (d) Fisher Exact Test (d) hyroid: C-Cell Adenoma or Carcino Overall Rates (a) Adjusted Rates (b)	oma 2/49 (4%)	4/48 (8%) 19.0%	7/ <b>49</b> (1 <b>4%</b> ) 30.7%	2/50 (4%) 4.6%
Cochran-Armitage Trend Test (d) Fisher Exact Test (d) hyroid: C-Cell Adenoma or Carcino Overall Rates (a) Adjusted Rates (b) Terminal Rates (c)	oma 2/49 (4%) 6.1% 0/16 (0%)	4/48 (8%) 19.0% 2/16 (13%)	7/49 (14%) 30.7% 4/17 (24%)	2/50 (4%) 4.6% 0/9 (0%)
Cochran-Armitage Trend Test (d) Fisher Exact Test (d) hyroid: C-Cell Adenoma or Carcino Overall Rates (a) Adjusted Rates (b) Terminal Rates (c) Week of First Observation	oma 2/49 (4%) 6.1% 0/16 (0%) 81	4/48 (8%) 19.0% 2/16 (13%) 92	7/49 (14%) 30.7% 4/17 (24%) 88	2/50 (4%) 4.6% 0/9 (0%) 79
Cochran-Armitage Trend Test (d) Fisher Exact Test (d) hyroid: C-Cell Adenoma or Carcino Overall Rates (a) Adjusted Rates (b) Terminal Rates (c) Week of First Observation Life Table Tests (d)	oma 2/49 (4%) 6.1% 0/16 (0%) 81 P=0.413	4/48 (8%) 19.0% 2/16 (13%) 92 P=0.351	7/49 (14%) 30.7% 4/17 (24%) 88 P=0.098	2/50 (4%) 4.6% 0/9 (0%) 79 P=0.664
Cochran-Armitage Trend Test (d) Fisher Exact Test (d) hyroid: C-Cell Adenoma or Carcino Overall Rates (a) Adjusted Rates (b) Terminal Rates (c) Week of First Observation	oma 2/49 (4%) 6.1% 0/16 (0%) 81	4/48 (8%) 19.0% 2/16 (13%) 92	7/49 (14%) 30.7% 4/17 (24%) 88	2/50 (4%) 4.6% 0/9 (0%) 79

## TABLE E1. ANALYSIS OF PRIMARY TUMORS IN MALE RATS IN THE TWO-YEAR INHALATION STUDY OF DICHLOROMETHANE (Continued)

## TABLE E1. ANALYSIS OF PRIMARY TUMORS IN MALE RATS IN THE TWO-YEAR INHALATION STUDY OF DICHLOROMETHANE (Continued)

	Control	1 <b>,000 ppm</b>	<b>2,000 ppm</b>	4,000 ppm
Pancreatic Islets: Islet Cell Adenom	a			
Overall Rates (a)	3/48 (6%)	6/46 (13%)	2/48 (4%)	2/48 (4%)
Adjusted Rates (b)	15.2%	26.0%	11.8%	8.7%
Terminal Rates (c)	2/16 (13%)	2/16 (13%)	2/17 (12%)	0/9 (0%)
Week of First Observation	92	88	104	78
	-			
Life Table Tests (d)	P = 0.398N	P = 0.258	P = 0.475N	P = 0.635N
Incidental Tumor Tests (d)	P = 0.287 N	P = 0.247	P = 0.485N	P = 0.561 N
Cochran-Armitage Trend Test (d)	P = 0.228N			
Fisher Exact Test (d)		P = 0.222	P = 0.500N	P = 0.500N
ancreatic Islets: Islet Cell Adenom				
Overall Rates (a)	3/48 (6%)	7/46 (15%)	2/48 (4%)	2/48 (4%)
Adjusted Rates (b)	15.2%	31.3%	11.8%	8.7%
Terminal Rates (c)	2/16 (13%)	3/16 (19%)	2/17 (12%)	0/9 (0%)
Week of First Observation	92	88	104	78
Life Table Tests (d)	P=0.364N	P = 0.171	P = 0.475N	P = 0.635N
Incidental Tumor Tests (d)	P = 0.261 N	P = 0.162	P=0.485N	P = 0.561 N
Cochran-Armitage Trend Test (d)	P=0.194N			
Fisher Exact Test (d)	VILVILI	P=0.141	P = 0.500 N	P = 0.500 N
lammary Gland: Fibroadenoma				
Overall Rates (a)	0/50 (0%)	0/50 (0%)	2/50 (4%)	4/50 (8%)
	0.0%	0.0%		
Adjusted Rates (b)			11.8% 2/17 (12%)	34.0% 2/9 (22%)
Terminal Rates (c)	0/16 (0%)	0/16 (0%)		
Week of First Observation	D -0 -04	()	104	101
Life Table Tests (d)	P<0.001	(e)	P = 0.250	P = 0.020
Incidental Tumor Tests (d)	P = 0.003	(e)	P = 0.250	P = 0.040
Cochran-Armitage Trend Test (d)	P = 0.009			<b>n</b>
Fisher Exact Test (d)		(e)	P=0.247	P = 0.059
lammary Gland: Adenoma or Fibro				
Overall Rates (a)	0/50 (0%)	0/50 (0%)	2/50 (4%)	5/50 (10%)
Adjusted Rates (b)	0.0%	0.0%	11.8%	36.6%
Terminal Rates (c)	0/16 (0%)	0/16 (0%)	2/17 (12%)	2/9 (22%)
Week of First Observation			104	93
Life Table Tests (d)	P<0.001	(e)	P=0.250	P=0.010
Incidental Tumor Tests (d)	P<0.001	(e)	P = 0.250	P = 0.023
Cochran-Armitage Trend Test (d)	P = 0.003	(0)	1 -0.200	1 - 0.040
Fisher Exact Test (d)	1 - 0.000	(e)	P=0.247	P=0.028
fammary Gland or Subcutaneous Tiss	auer Adenoma Fik	roadanoma or Fil	roma	
Overall Rates (a)	1/50 (2%)	1/50 (2%)	4/50 (8%)	9/50 (18%)
Adjusted Rates (b)	6.3%	6.3%	20.6%	49.0%
		0.3% 1/16 (6%)		49.0% 2/9 (22%)
Terminal Rates (c)	1/16 (6%)		3/17 (18%)	
Week of First Observation	104 D < 0.001	104 D-0704	96 D= 0.100	89 D - 0 000
Life Table Tests (d)	P<0.001	P = 0.764	P = 0.196	P = 0.002
Incidental Tumor Tests (d)	P=0.003	P = 0.764	P = 0.186	P = 0.008
Cochran-Armitage Trend Test (d)	P<0.001			
Fisher Exact Test (d)		P=0.753N	P=0.181	P=0.008
reputial Gland: Carcinoma				
	3/50 (6%)	1/50 (2%)	3/50 (6%)	2/50 (4%)
Överall Rates (a)			11.5%	13.9%
	15.1%	3.0%		
Överall Rates (a)		3.0% 0/16 (0%)	1/17 (6%)	1/9 (11%)
Overall Rates (a) Adjusted Rates (b)	15.1%	0/16 (0%) 92		1/9 (11%) 89
Overall Rates (a) Adjusted Rates (b) Terminal Rates (c)	15.1% 2/16 (13%)	0/16 (0%) 92	1/17 (6%)	1/9 (11%) 89
Overall Rates (a) Adjusted Rates (b) Terminal Rates (c) Week of First Observation Life Table Tests (d)	15.1% 2/16 (13%) 91 P=0.522	0/16 (0%) 92 P=0.304N	1/17 (6%) 84 P=0.641N	1/9 (11%) 89 P=0.678N
Overall Rates (a) Adjusted Rates (b) Terminal Rates (c) Week of First Observation	15.1% 2/16 (13%) 91	0/16 (0%) 92	1/17 (6%) 84	1/9 (11%) 89
## TABLE E1. ANALYSIS OF PRIMARY TUMORS IN MALE RATS IN THE TWO-YEAR INHALATION STUDY OF DICHLOROMETHANE (Continued)

	Control	1,000 ppm	2,000 ppm	4,000 ppm
Preputial Gland: Adenoma or Carcin				
Overall Rates (a)	3/50 (6%)	1/50 (2%)	3/50 (6%)	4/50 (8%)
Adjusted Rates (b)	15.1%	3.0%	11.5%	35.4%
Terminal Rates (c)	2/16 (13%)	0/16 (0%)	1/17 (6%)	3/9 (33%)
	91	92	84	3/9 (33 <i>%)</i> 89
Week of First Observation			-	
Life Table Tests (d)	P = 0.139	P = 0.304N	P = 0.641N	P = 0.262
Incidental Tumor Tests (d)	P = 0.235	P = 0.305N	P = 0.654N	P = 0.334
Cochran-Armitage Trend Test (d)	P = 0.282			
Fisher Exact Test (d)		P = 0.309N	P = 0.661	P = 0.500
estis: Interstitial Cell Tumor				
Overall Rates (a)	39/50 (78%)	37/49 (76%)	41/50 (82%)	43/50 (86%)
Adjusted Rates (b)	94.9%	97.3%	95.2%	97.7%
Terminal Rates (c)	14/16 (88%)	15/16 (94%)	15/17 (88%)	8/9 (89%)
Week of First Observation	65	69	75	75
Life Table Tests (d)	P=0.009	P = 0.420N	P = 0.512	P = 0.029
Incidental Tumor Tests (d)	P = 0.009 P = 0.114	P = 0.385N	P = 0.312 P = 0.387	P = 0.029 P = 0.258
		L = 0'909M	r - 0.387	r=0.208
Cochran-Armitage Trend Test (d) Fisher Exact Test (d)	P = 0.129	P=0.478N	P=0.401	P=0.218
4/24-4 4 UP (4/		1 - U.TIULI	4 - 0,701	1 - 0.210
inica Vaginalis: Malignant Mesothe		1/00/000	0/50/07	0/20/00
Overall Rates (a)	0/50 (0%)	1/50 (2%)	0/50 (0%)	3/50 (6%)
Adjusted Rates (b)	0.0%	2.2%	0.0%	19.6%
Terminal Rates (c)	0/16 (0%)	0/16 (0%)	0/17 (0%)	0/9 (0%)
Week of First Observation		69		92
Life Table Tests (d)	P=0.025	P = 0.496	(e)	P = 0.068
Incidental Tumor Tests (d)	P = 0.060	P = 0.473	(e)	P = 0.172
Cochran-Armitage Trend Test (d)	P = 0.044			
Fisher Exact Test (d)		P = 0.500	(e)	P = 0.121
unica Vaginalis: Mesothelioma (All T		1 (50 (00))		450 (00)
Overall Rates (a)	0/50 (0%)	1/50 (2%)	4/50 (8%)	4/50 (8%)
Adjusted Rates (b)	0.0%	2.2%	19.2%	24.4%
Terminal Rates (c)	0/16 (0%)	0/16(0%)	2/17 (12%)	0/9 (0%)
Week of First Observation		69	96	92
Life Table Tests (d)	P=0.009	P = 0.496	P=0.070	P = 0.031
Incidental Tumor Tests (d)	P = 0.030	P = 0.473	P = 0.062	P = 0.097
Cochran-Armitage Trend Test (d)	P = 0.029			0.001
Fisher Exact Test (d)	1 - 0.049	P=0.500	P=0.059	P = 0.059
ll Sites: Malignant Mesothelioma Overall Rates (a)	0/50 (0%)	2/50 (4%)	0/50 (0%)	3/50 (6%)
Adjusted Rates (b)	0.0%	4.4%	0.0%	19.6%
Terminal Rates (c)	0/16 (0%)	0/16(0%)	0/17 (0%)	0/9 (0%)
	0/10(070)		0/1 ( (070)	
Week of First Observation	D 0.000	69 D 0 0 40	(.)	92 D
Life Table Tests (d)	P = 0.066	P = 0.243	(e)	P = 0.068
Incidental Tumor Tests (d)	P = 0.136	P = 0.225	(e)	P = 0.172
Cochran-Armitage Trend Test (d)	P=0.097			
Fisher Exact Test (d)		P = 0.247	(e)	P = 0.121
l Sites: Mesothelioma (All Types)				
Overall Rates (a)	0/50 (0%)	2/50 (4%)	5/50 (10%)	4/50 (8%)
Adjusted Rates (b)	0.0%	4.4%	22.8%	24.4%
Terminal Rates (c)	0/16 (0%)	0/16(0%)	22.8% 2/17 (12%)	0/9(0%)
	U/10(070)			
Week of First Observation	D - 0 000	69 P=0.243	96 D - 0 028	92 D - 0 021
X : C = (0 - 1 - 1 - (0 + + (3))			P=0.038	P=0.031
Life Table Tests (d)	P=0.020			
Incidental Tumor Tests (d)	P=0.063	P = 0.225	P = 0.030	P = 0.097

## TABLE E1. ANALYSIS OF PRIMARY TUMORS IN MALE RATS IN THE TWO-YEAR INHALATION STUDY OF DICHLOROMETHANE (Continued)

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

(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 reported because no tumors were observed in the dosed and control groups

<sup>(</sup>b) Kaplan-Meier estimated tumor incidences at the end of the study after adjusting for intercurrent mortality

<sup>(</sup>c) Observed tumor incidence at terminal kill

### TABLE E2. ANALYSIS OF PRIMARY TUMORS IN FEMALE RATS IN THE TWO-YEAR INHALATION STUDY OF DICHLOROMETHANE

	Control	1, <b>000</b> ppm	2,000 ppm	4,000 ppm
Hematopoietic System: Mononuclear	Cell Leukemia			<u></u>
Overall Rates (a)	17/50 (34%)	17/50 (34%)	23/50 (46%)	23/50 (46%)
Adjusted Rates (b)	41.1%	44.4%	63.6%	58.1%
Terminal Rates (c)	8/30 (27%)	4/22 (18%)	10/22 (45%)	1/15 (7%)
Week of First Observation	73	76	73	63
Life Table Tests (d)	P = 0.009	P = 0.402	P = 0.049	P = 0.028
Incidental Tumor Tests (d)	P = 0.273	P = 0.402 P = 0.425N	P = 0.189	P = 0.579
Cochran-Armitage Trend Test (d)	P = 0.086	1-0.42014	r = 0.105	1-0.079
Fisher Exact Test (d)	r = 0.000	P = 0.584N	P = 0.154	P = 0.154
iver: Neoplastic Nodule				
Overall Rates (a)	2/50 (4%)	1/50 (2%)	3/50 (6%)	5/50 (10%)
Adjusted Rates (b)	6.7%	2.0%	10.2%	19.6%
Terminal Rates (c)	2/30 (7%)	0/22 (0%)	1/22 (5%)	1/15 (7%)
Week of First Observation	104	61 D. 0.500N	85	73
Life Table Tests (d)	P = 0.030	P = 0.569N	P = 0.382	P = 0.080
Incidental Tumor Tests (d)	P=0.097	P = 0.494N	P = 0.482	P = 0.229
Cochran-Armitage Trend Test (d)	P = 0.078			
Fisher Exact Test (d)		P = 0.500N	P = 0.500	P = 0.218
iver: Neoplastic Nodule or Hepatoco				
Overall Rates (a)	2/50 (4%)	1/50 (2%)	4/50 (8%)	5/50 (10%)
Adjusted Rates (b)	6.7%	2.0%	14.4%	19.6%
Terminal Rates (c)	2/30 (7%)	0/22 (0%)	2/22 (9%)	1/15(7%)
Week of First Observation	104	61	85	73
Life Table Tests (d)	P = 0.027	P = 0.569N	P = 0.223	P = 0.080
Incidental Tumor Tests (d)	P = 0.086	P = 0.494N	P = 0.297	P = 0.229
Cochran-Armitage Trend Test (d)	P = 0.079			
Fisher Exact Test (d)		P = 0.500N	P=0.339	P=0.218
ituitary: Adenoma				
Overall Rates (a)	24/49 (49%)	30/49 (61%)	25/49 (51%)	25/49 (51%)
Adjusted Rates (b)	62.1%	82.2%	76.2%	83.5%
Terminal Rates (c)	16/30 (53%)	16/22 (73%)	14/21 (67%)	11/15(73%)
Week of First Observation	73	74	72	75
Life Table Tests (d)	P = 0.027	P = 0.033	P = 0.104	P = 0.020
Incidental Tumor Tests (d)	P = 0.380	P = 0.138	P = 0.374	P = 0.288
		1 -0.100	1 -0.0/4	1 -0.200
Cochran-Armitage Trend Test (d) Fisher Exact Test (d)	P = 0.461N	P = 0.155	P = 0.500	P = 0.500
		1 -0.100	r -0.500	r — 0.000
ituitary: Adenoma or Carcinoma Overall Rates (a)	25/49 (51%)	30/49 (61%)	97140 (550)	25/49 (51%)
Adjusted Rates (b)	25/49 (51%) 64.8%		27/49 (55%)	
Terminal Rates (c)		82.2% 16/09 (79%)	80.4%	83.5%
Week of First Observation	17/30 (57%)	16/22 (73%)	15/21 (71%)	11/15(73%)
	73 R = 0.020	74 D=0.045	72 D-0.005	75
Life Table Tests (d)	P = 0.030	P = 0.045	P = 0.065	P = 0.026
Incidental Tumor Tests (d)	P = 0.416	P = 0.179	P = 0.277	P = 0.338
Cochran-Armitage Trend Test (d) Fisher Exact Test (d)	P = 0.414N	P = 0.208	P = 0.420	P = 0.580
drenal: Pheochromocytoma	0/50 (10)	1 100 1000	440.00	
Overall Rates (a)	2/50 (4%)	1/50 (2%)	4/49 (8%)	1/49 (2%)
Adjusted Rates (b)	5.9%	2.9%	19.0%	6.7%
Terminal Rates (c)	1/30 (3%)	0/22 (0%)	4/21 (19%)	1/15 (7%)
Week of First Observation	93	94	104	104
Life Table Tests (d)	P = 0.465	P = 0.545N	P=0.195	P = 0.683N
Incidental Tumor Tests (d)	P = 0.551	P = 0.393N	P = 0.210	P = 0.581N
Cochran-Armitage Trend Test (d)	P = 0.510N			

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	Control	1, <b>000</b> ppm	2,000 ppm	4,000 ppm
Adrenal: Pheochromocytoma or Pheo	chromocytoms. N			<u></u>
Overall Rates (a)	2/50 (4%)	3/50 (6%)	4/49 (8%)	1/49 (2%)
Adjusted Rates (b)	5.9%	8.9%	19.0%	6.7%
Terminal Rates (c)	1/30 (3%)	0/22 (0%)	4/21 (19%)	1/15 (7%)
Week of First Observation	93	89	104	104
Life Table Tests (d)	P = 0.578	P=0.447	P=0.195	P=0.683N
Incidental Tumor Tests (d)	P = 0.455N	P=0.639	P = 0.210	P = 0.581N
Cochran-Armitage Trend Test (d)	P = 0.381N			1 0.0011
Fisher Exact Test (d)		P = 0.500	P = 0.329	P=0.508N
ayroid: C-Cell Adenoma				
Overall Rates (a)	2/47 (4%)	0/46 (0%)	4/48 (8%)	2/42 (5%)
Adjusted Rates (b)	6.4%	0.0%	18.2%	7.8%
Terminal Rates (c)	1/27 (4%)	0/21 (0%)	4/22 (18%)	0/11 (0%)
Week of First Observation	96		104	91
Life Table Tests (d)	P = 0.172	P = 0.281 N	P = 0.243	P = 0.512
Incidental Tumor Tests (d)	P=0.279	P=0.205N	P = 0.250	P=0.633N
Cochran-Armitage Trend Test (d)	P = 0.359			
Fisher Exact Test (d)		P=0.253N	P=0.349	P=0.648
hyroid: C-Cell Carcinoma				
Overall Rates (a)	3/47 (6%)	0/46 (0%)	2/48 (4%)	2/42 (5%)
Adjusted Rates (b)	11.1%	0.0%	7.3%	11.8%
Terminal Rates (c)	3/27 (11%)	0/21 (0%)	1/22 (5%)	1/11 (9%)
Week of First Observation	104		86	90
Life Table Tests (d)	P = 0.393	P = 0.167N	P = 0.591N	P = 0.541
Incidental Tumor Tests (d)	P = 0.469	P = 0.167 N	P = 0.542N	P = 0.598
Cochran-Armitage Trend Test (d) Fisher Exact Test (d)	P = 0.590	P=0.125N	P=0.490N	P = 0.554N
hyroid: C-Cell Adenoma or Carcinor	na			
Overall Rates (a)	5/47 (11%)	0/46 (0%)	6/48 (13%)	4/42 (10%)
Adjusted Rates (b)	17.2%	0.0%	24.9%	18.8%
Terminal Rates (c)	4/27 (15%)	0/21 (0%)	5/22 (23%)	1/11 (9%)
Week of First Observation	96		86	90
Life Table Tests (d)	P=0.138	P=0.056N	P=0.356	P=0.395
Incidental Tumor Tests (d)	P=0.245	P = 0.040 N	P=0.395	P = 0.625
Cochran-Armitage Trend Test (d)	P=0.384			
Fisher Exact Test (d)		P=0.030N	P=0.515	P=0.572N
ancreatic Islets: Islet Cell Adenoma		• • • • • • • • • • • • • • • • • • •		
Overall Rates (a)	3/50 (6%)	0/48 (0%)	0/50 (0%)	0/46 (0%)
Adjusted Rates (b)	10.0%	0.0%	0.0%	0.0%
Terminal Rates (c)	3/30 (10%)	0/22 (0%)	0/22 (0%)	0/15 (0%)
Week of First Observation	104	-	<b>D</b>	<b>N</b>
Life Table Tests (d)	P = 0.086N	P=0.180N	P=0.180N	P = 0.265N
Incidental Tumor Tests (d)	P = 0.086N	P=0.180N	P = 0.180N	P = 0.265N
Cochran-Armitage Trend Test (d)	P = 0.050N			
Fisher Exact Test (d)		P=0.129N	P=0.121N	P=0.137N
ammary Gland: Fibroadenoma		11/60/0000	10/20 (00%)	00/50/444
Overall Rates (a)	5/50 (10%)	11/50 (22%)	13/50 (26%)	22/50 (44%
Adjusted Rates (b)	15.7%	41.2%	43.6%	79.4%
	4/30 (13%)	8/22 (36%)	7/22 (32%) 65	10/15 (67% 73
Terminal Rates (c)	0.0		n n	1.5
Week of First Observation	96 D < 0.001	74 D-0.099		
Week of First Observation Life Table Tests (d)	P<0.001	P=0.028	P=0.009	P<0.001
Week of First Observation Life Table Tests (d) Incidental Tumor Tests (d)	P<0.001 P<0.001			
Week of First Observation Life Table Tests (d)	P<0.001	P=0.028	P=0.009	P<0.001

# TABLE E2. ANALYSIS OF PRIMARY TUMORS IN FEMALE RATS IN THE TWO-YEAR INHALATION STUDY OF DICHLOROMETHANE (Continued)

# TABLE E2. ANALYSIS OF PRIMARY TUMORS IN FEMALE RATS IN THE TWO-YEAR INHALATION STUDY OF DICHLOROMETHANE (Continued)

	Control	1,000 ppm	2,000 ppm	4,000 ppm
Mammary Gland: Adenoma or Fibro	adenoma			
Overall Rates (a)	5/50 (10%)	11/50 (22%)	13/50 (26%)	23/50 (46%)
Adjusted Rates (b)	15.7%	41.2%	43.6%	83.5%
Terminal Rates (c)	4/30 (13%)	8/22 (36%)	43.0 % 7/22 (32%)	11/15 (73%)
Week of First Observation	96 D 10 001	74	65	73
Life Table Tests (d)	P<0.001	P = 0.028	P = 0.009	P<0.001
Incidental Tumor Tests (d)	P<0.001	P=0.049	P = 0.025	P<0.001
Cochran-Armitage Trend Test (d)	P<0.001			
Fisher Exact Test (d)		P=0.086	P = 0.033	P<0.001
ammary Gland: Adenoma, Fibroado	enoma, or Adenoo	carcinoma		
Overall Rates (a)	6/50 (12%)	13/50 (26%)	14/50 (28%)	23/50 (46%)
Adjusted Rates (b)	17.8%	44.4%	44.9%	83.5%
Terminal Rates (c)	4/30 (13%)	8/22 (36%)	7/22 (32%)	11/15 (73%)
Week of First Observation	92	74	65	73
Life Table Tests (d)	P<0.001	P = 0.023	P = 0.012	P<0.001
Incidental Tumor Tests (d)	P<0.001	P = 0.053	P = 0.043	P<0.001
Cochran-Armitage Trend Test (d)	P<0.001			
Fisher Exact Test (d)	1	P=0.062	P = 0.039	P<0.001
mmon Claude Adamana Titura I			There are been to be a set of the	
ammary Gland: Adenoma, Fibroade		•		00/50 (10%)
Overall Rates (a)	7/50 (14%)	13/50 (26%)	(e) 14/50 (28%)	23/50 (46%)
Adjusted Rates (b)	20.0%	44.4%	44.9%	83.5%
Terminal Rates (c)	4/30 (13%)	8/22 (36%)	7/22 (32%)	11/15 (73%)
Week of First Observation	92	74	65	73
Life Table Tests (d)	P<0.001	P=0.045	P = 0.022	P<0.001
Incidental Tumor Tests (d)	P<0.001	P = 0.092	P = 0.083	P<0.001
Cochran-Armitage Trend Test (d)	P<0.001			
Fisher Exact Test (d)		P = 0.105	P = 0.070	P<0.001
litoral Gland: Cystadenoma or Carc	inoma			
Overall Rates (a)	1/50 (2%)	2/50 (4%)	2/50 (4%)	3/50 (6%)
Adjusted Rates (b)	2.5%	9.1%	8.5%	14.2%
Terminal Rates (c)	0/30 (0%)	2/22 (9%)	1/22 (5%)	
Week of First Observation	92		• •	1/15 (7%)
		104	101	80
Life Table Tests (d)	P = 0.101	P = 0.423	P = 0.399	P = 0.181
Incidental Tumor Tests (d)	P=0.212	P=0.428	P = 0.507	P = 0.383
Cochran-Armitage Trend Test (d)	P = 0.232			
Fisher Exact Test (d)		P = 0.500	P = 0.500	P=0.309
terus: Endometrial Stromal Polyp				
Overall Rates (a)	7/50 (14%)	9/49 (18%)	7/50 (14%)	6/47 (13%)
Adjusted Rates (b)	18.1%	32.0%	21.7%	33.2%
Terminal Rates (c)	2/30 (7%)	5/21 (24%)	2/22 (9%)	4/15 (27%)
Week of First Observation	73	74	76	89
Life Table Tests (d)	P=0.413	P = 0.253	P = 0.455	P = 0.377
Incidental Tumor Tests (d)	P = 0.381N	P = 0.530	P = 0.519N	P = 0.513N
Cochran-Armitage Trend Test (d)	P = 0.399N			
Fisher Exact Test (d)	1 - 0.00011	P=0.376	P=0.613	P=0.548N
man Fradamatulal Strength Sa	_			
erus: Endometrial Stromal Sarcoma		0/10/07		0/1 <b>0</b> /10/1
Overall Rates (a)	0/50 (0%)	3/49 (6%)	1/50 (2%)	2/47 (4%)
Adjusted Rates (b)	0.0%	7.4%	2.0%	5.0%
Terminal Rates (c)	0/30 (0%)	0/21 (0%)	0/22 (0%)	0/15 (0%)
Week of First Observation		74	62	5 <del>9</del>
Life Table Tests (d)	P = 0.296	P = 0.119	P = 0.504	P=0.218
Incidental Tumor Tests (d)	P = 0.494	P = 0.255	P = 0.695	P = 0.361
Cochran-Armitage Trend Test (d) Fisher Exact Test (d)	P = 0.317	P=0.117	P = 0.500	P=0.232

## TABLE E2. ANALYSIS OF PRIMARY TUMORS IN FEMALE RATS IN THE TWO-YEAR INHALATION STUDY OF DICHLOROMETHANE (Continued)

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

(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) A carcinoma was also present in one of the animals that had a fibroadenoma.

<sup>(</sup>b) Kaplan-Meier estimated tumor incidences at the end of the study after adjusting for intercurrent mortality

	Control	2,000 ppm	4,000 ppm
Lung: Alveolar/Bronchiolar Adenoma	<u> </u>	<u> </u>	**************************************
Overall Rates (a)	3/50 (6%)	19/50 (38%)	24/50 (48%)
Adjusted Rates (b)	7.7%	55.6%	78.5%
Terminal Rates (c)	3/39 (8%)	10/24 (42%)	6/11 (55%)
Week of First Observation	104	71	70
Life Table Tests (d)	P<0.001	P<0.001	P<0.001
Incidental Tumor Tests (d)	P<0.001	P<0.001	P<0.001
Cochran-Armitage Trend Test (d)	P<0.001		
Fisher Exact Test (d)		P<0.001	P<0.001
ing: Alveolar/Bronchiolar Carcinoma			
Overall Rates (a)	2/50 (4%)	10/50 (20%)	28/50 (56%)
Adjusted Rates (b)	4.9%	34.0%	92.9%
Terminal Rates (c)	1/39 (3%)	6/24 (25%)	9/11 (82%)
Week of First Observation	94	78	72
Life Table Tests (d)	P<0.001	P=0.002	P<0.001
Incidental Tumor Tests (d)	P<0.001	P=0.016	P<0.001
Cochran-Armitage Trend Test (d)	P<0.001		
Fisher Exact Test (d)		P=0.014	P<0.001
ung: Alveolar/Bronchiolar Adenoma or C	arcinoma		
Overall Rates (a)	5/50 (10%)	27/50 (54%)	40/50 (80%)
Adjusted Rates (b)	12.4%	74.2%	100.0%
Terminal Rates (c)	4/39 (10%)	15/24 (63%)	11/11 (100%)
Week of First Observation	94	71	70
Life Table Tests (d)	P<0.001	P<0.001	P<0.001
Incidental Tumor Tests (d)	P<0.001	P<0.001	P<0.001
Cochran-Armitage Trend Test (d)	P<0.001		
Fisher Exact Test (d)		P<0.001	P<0.001
ematopoietic System: Lymphoma, All Ma	alignant		
Overall Rates (a)	5/50 (10%)	3/50 (6%)	2/50 (4%)
Adjusted Rates (b)	12.1%	10.4%	6.5%
Terminal Rates (c)	4/39 (10%)	2/24 (8%)	0/11 (0%)
Week of First Observation	71	76	90
Life Table Tests (d)	P = 0.511N	P=0.573N	P=0.604N
Incidental Tumor Tests (d)	P = 0.301N	P=0.482N	P=0.365N
Cochran-Armitage Trend Test (d)	P = 0.158N		
Fisher Exact Test (d)		P=0.358N	P=0.218N
irculatory System: Hemangiosarcoma			
Overall Rates (a)	1/50 (2%)	2/50 (4%)	5/50 (10%)
Adjusted Rates (b)	2.6%	7.6%	21.4%
Terminal Rates (c)	1/39 (3%)	1/24 (4%)	1/11 (9%)
Week of First Observation	104	101	70
Life Table Tests (d)	P=0.007	P = 0.352	P=0.017
	P=0.083	P=0.495	P = 0.142
Incidental Tumor Tests (d)	-	-	
	P = 0.060		
Incidental Tumor Tests (d)	P=0.060	P=0.500	P=0.102
Incidental Tumor Tests (d) Cochran-Armitage Trend Test (d) Fisher Exact Test (d)		P=0.500	P = 0.102
Incidental Tumor Tests (d) Cochran-Armitage Trend Test (d) Fisher Exact Test (d) irculatory System: Hemangioma or Hema Overall Rates (a)		P=0.500 2/50 (4%)	P=0.102 6/50 (12%)
Incidental Tumor Tests (d) Cochran-Armitage Trend Test (d) Fisher Exact Test (d) irculatory System: Hemangioma or Hema	angiosarcoma		
Incidental Tumor Tests (d) Cochran-Armitage Trend Test (d) Fisher Exact Test (d) irculatory System: Hemangioma or Hema Overall Rates (a)	angiosarcoma 2/50 (4%)	2/50 (4%)	6/50 (12%)
Incidental Tumor Tests (d) Cochran-Armitage Trend Test (d) Fisher Exact Test (d) irculatory System: Hemangioma or Hema Overall Rates (a) Adjusted Rates (b)	angiosarcoma 2/50 (4%) 4.8%	2/50 (4%) 7.6%	6/50 (12%) 25.8%
Incidental Tumor Tests (d) Cochran-Armitage Trend Test (d) Fisher Exact Test (d) irculatory System: Hemangioma or Hema Overall Rates (a) Adjusted Rates (b) Terminal Rates (c)	angiosarcoma 2/50 (4%) 4.8% 1/39 (3%)	2/50 (4%) 7.6% 1/24 (4%)	6/50 (12%) 25.8% 1/11 (9%)
Incidental Tumor Tests (d) Cochran-Armitage Trend Test (d) Fisher Exact Test (d) inculatory System: Hemangioma or Hema Overall Rates (a) Adjusted Rates (b) Terminal Rates (c) Week of First Observation	angiosarcoma 2/50 (4%) 4.8% 1/39 (3%) 87	2/50 (4%) 7.6% 1/24 (4%) 101	6/50 (12%) 25.8% 1/11 (9%) 70
Incidental Tumor Tests (d) Cochran-Armitage Trend Test (d) Fisher Exact Test (d) rculatory System: Hemangioma or Hema Overall Rates (a) Adjusted Rates (b) Terminal Rates (c) Week of First Observation Life Table Tests (d)	angiosarcoma 2/50 (4%) 4.8% 1/39 (3%) 87 P=0.010	2/50 (4%) 7.6% 1/24 (4%) 101 P=0.558	6/50 (12%) 25.8% 1/11 (9%) 70 P=0.022

# TABLE E3. ANALYSIS OF PRIMARY TUMORS IN MALE MICE IN THE TWO-YEAR INHALATION STUDY OF DICHLOROMETHANE

	Control	2,000 ppm	<b>4,000 ppm</b>
Liver: Hepatocellular Adenoma			
Overall Rates (a)	10/50 (20%)	14/49 (29%)	14/49 (29%)
Adjusted Rates (b)	23.0%	46.9%	68.3%
Terminal Rates (c)	7/39 (18%)	9/24 (38%)	6/11 (55%)
Week of First Observation	73	71	80
Life Table Tests (d)	P<0.001	P=0.041	P = 0.001
Incidental Tumor Tests (d)	P = 0.075	P = 0.161	P=0.095
Cochran-Armitage Trend Test (d)	P=0.194		
Fisher Exact Test (d)		P = 0.224	P = 0.224
Liver: Hepatocellular Carcinoma			
Overall Rates (a)	13/50 (26%)	15/49 (31%)	26/49 (53%)
Adjusted Rates (b)	29.7%	43.7%	76.4%
Terminal Rates (c)	9/39 (23%)	7/24 (29%)	5/11 (45%)
Week of First Observation	73	72	61
Life Table Tests (d)	P<0.001	P=0.111	P<0.001
Incidental Tumor Tests (d)	P = 0.016	P = 0.422	P=0.042
Cochran-Armitage Trend Test (d)	P = 0.004		
Fisher Exact Test (d)		P=0.387	P = 0.005
liver: Hepatocellular Adenoma or Carcir	oma		
Overall Rates (a)	22/50 (44%)	24/49 (49%)	33/49 (67%)
Adjusted Rates (b)	48.3%	66.8%	93.0%
Terminal Rates (c)	16/39 (41%)	13/24 (54%)	9/11 (82%)
Week of First Observation	73	71	61
Life Table Tests (d)	P<0.001	P=0.048	P<0.001
Incidental Tumor Tests (d)	P = 0.010	P = 0.305	P=0.020
Cochran-Armitage Trend Test (d)	P = 0.013		
Fisher Exact Test (d)		P=0.384	P=0.016
estis: Interstitial Cell Tumor			
Overall Rates (a)	3/50 (6%)	0/50 (0%)	0/50 (0%)
Adjusted Rates (b)	7.7%	0.0%	0.0%
Terminal Rates (c)	3/39 (8%)	0/24 (0%)	0/11 (0%)
Week of First Observation	104		
Life Table Tests (d)	P = 0.137N	P=0.219N	P=0.410N
Incidental Tumor Tests (d)	P = 0.137N	P=0.219N	P=0.410N
Cochran-Armitage Trend Test (d)	P = 0.037N		
Fisher Exact Test (d)		P = 0.121N	P = 0.121 N

#### TABLE E3. ANALYSIS OF PRIMARY TUMORS IN MALE MICE IN THE TWO-YEAR INHALATION STUDY OF DICHLOROMETHANE (Continued)

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

(b) Kaplan-Meier estimated tumor incidences 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	2,000 ppm	4,000 ppm
Lung: Alveolar/Bronchiolar Adenoma			· · · · · · · · · · · · · · · · · · ·
Overall Rates (a)	2/50 (4%)	23/48 (48%)	28/48 (58%)
Adjusted Rates (b)	6.7%	66.5%	91.1%
Terminal Rates (c)	1/25 (4%)	14/25 (56%)	6/8 (75%)
Week of First Observation	87	83	68
		P<0.001	P<0.001
Life Table Tests (d)	P<0.001		
Incidental Tumor Tests (d)	P<0.001	P<0.001	P<0.001
Cochran-Armitage Trend Test (d)	P<0.001		
Fisher Exact Test (d)		P<0.001	P<0.001
ung: Alveolar/Bronchiolar Carcinoma			
Overall Rates (a)	1/50 (2%)	13/48 (27%)	29/48 (60%)
Adjusted Rates (b)	4.0%	45.9%	92.2%
Terminal Rates (c)	1/25 (4%)	10/25 (40%)	6/8 (75%)
Week of First Observation	104	89	68
Life Table Tests (d)	P<0.001	P<0.001	P<0.001
Incidental Tumor Tests (d)	P<0.001	P<0.001	P<0.001
Cochran-Armitage Trend Test (d)	P<0.001		
Fisher Exact Test (d)		P<0.001	P<0.001
ung Alussian/Branchistan Adamsus	Carainama		
ung: Alveolar/Bronchiolar Adenoma or		90/40 (00M)	A1 /A0 /02/
Overall Rates (a)	3/50 (6%)	30/48 (63%)	41/48 (85%)
Adjusted Rates (b)	10.6%	82.9%	100.0%
Terminal Rates (c)	2/25 (8%)	19/25 (76%)	8/8 (100%)
Week of First Observation	87	83	68
Life Table Tests (d)	P<0.001	P<0.001	P<0.001
Incidental Tumor Tests (d)	P<0.001	P<0.001	P<0.001
Cochran-Armitage Trend Test (d)	P<0.001		
Fisher Exact Test (d)		P<0.001	P<0.001
lematopoietic System: Lymphoma, Histi	ocytic		
Overall Rates (a)	1/50 (2%)	2/49 (4%)	4/49 (8%)
Adjusted Rates (b)	4.0%	5.5%	16.2%
Terminal Rates (c)	1/25 (4%)	0/25 (0%)	0/8 (0%)
Week of First Observation	104	80	77
Life Table Tests (d)	P = 0.054	P = 0.525	P = 0.078
Incidental Tumor Tests (d)	P = 0.224	P = 0.538	P = 0.243
Cochran-Armitage Trend Test (d)	P=0.118		
Fisher Exact Test (d)		P=0.500	P=0.181
lematopoietic System: Malignant Lymph	oma, Mixed Type		
Overall Rates (a)	0/50 (0%)	4/49 (8%)	1/49 (2%)
Adjusted Rates (b)	0.0%	13.9%	4.5%
Terminal Rates (c)	0/25 (0%)	2/25 (8%)	0/8 (0%)
Week of First Observation	•- •	90	90
Life Table Tests (d)	P=0.160	P = 0.072	P = 0.425
Incidental Tumor Tests (d)	P = 0.388	P = 0.077	P = 0.615
Cochran-Armitage Trend Test (d)	P = 0.390		
Fisher Exact Test (d)	L V.UUU	P=0.059	P=0.500
(amatanaiatia Quatana Tanahama All B	fallement		
ematopoietic System: Lymphoma, All M Overall Rates (a)	1alignant 7/50 (14%)	7/49 (14%)	7/49 (14%)
Adjusted Rates (b)	22.9%	21.7%	28.0%
Terminal Rates (c)	4/25 (16%)	2/25 (8%)	0/8 (0%)
Week of First Observation	76	80	77
Life Table Tests (d)	P = 0.201	P = 0.573N	P = 0.242
Incidental Tumor Tests (d)	P = 0.416N	P = 0.607 N	P = 0.553N
Cochran-Armitage Trend Test (d)	P = 0.557		
Fisher Exact Test (d)		P = 0.613	P = 0.613

# TABLE E4. ANALYSIS OF PRIMARY TUMORS IN FEMALE MICE IN THE TWO-YEAR INHALATION STUDY OF DICHLOROMETHANE

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	Control	2,000 ppm	4,000 ppm
Liver: Hepatocellular Adenoma			<u>, , , , , , , , , , , , , , , , , , , </u>
Overall Rates (a)	2/50 (4%)	6/48 (13%)	22/48 (46%)
Adjusted Rates (b)	6.5%	21.3%	83.0%
Terminal Rates (c)	1/25 (4%)	4/25 (16%)	5/8 (63%)
Week of First Observation	84	96	68
Life Table Tests (d)	P<0.001	P = 0.151	P<0.001
Incidental Tumor Tests (d)	P<0.001	P = 0.155	P<0.001
Cochran-Armitage Trend Test (d)	P<0.001		-
Fisher Exact Test (d)		P = 0.121	P<0.001
iver: Hepatocellular Carcinoma			
Overall Rates (a)	1/50 (2%)	11/48 (23%)	32/48 (67%)
Adjusted Rates (b)	4.0%	34.0%	96.5%
Terminal Rates (c)	1/25(4%)	6/25 (24%)	7/8 (88%)
Week of First Observation	104	83	68
Life Table Tests (d)	P<0.001	P = 0.005	P<0.001
		P = 0.005 P = 0.004	P<0.001 P<0.001
Incidental Tumor Tests (d)	P<0.001	r = 0.004	r < 0.001
Cochran-Armitage Trend Test (d) Fisher Exact Test (d)	P<0.001	P=0.001	P<0.001
liver: Hepatocellular Adenoma or Carcinon			
Overall Rates (a)	na 3/50 (6%)	16/48 (33%)	10/18 (0901)
		- • • •	40/48 (83%)
Adjusted Rates (b)	10.4%	48.0%	100.0%
Terminal Rates (c)	2/25 (8%)	9/25 (36%)	8/8 (100%)
Week of First Observation	84	83	68
Life Table Tests (d)	P<0.001	P = 0.002	P<0.001
Incidental Tumor Tests (d)	P<0.001	P = 0.002	P<0.001
Cochran-Armitage Trend Test (d)	P<0.001		
Fisher Exact Test (d)		P<0.001	P<0.001
Pituitary Gland: Adenoma			
Overall Rates (a)	4/46 (9%)	2/44 (5%)	1/44 (2%)
Adjusted Rates (b)	15.9%	8.3%	2.4%
Terminal Rates (c)	3/24 (13%)	2/24 (8%)	0/8 (0%)
Week of First Observation	99	104	77
Life Table Tests (d)	P = 0.321N	P = 0.333 N	P=0.469N
Incidental Tumor Tests (d)	P = 0.214N	P = 0.300N	P = 0.287N
Cochran-Armitage Trend Test (d)	P = 0.128N		
Fisher Exact Test (d)	1 -0.12010	P = 0.360 N	P=0.195N
Shyroid Gland: Follicular Cell Adenoma			
Overall Rates (a)	1/48 (2%)	1/47 (2%)	4/46 (9%)
Adjusted Rates (b)	4.2%	4.0%	35.0%
Terminal Rates (c)	4.2% 1/24 (4%)	1/25 (4%)	2/8 (25%)
Week of First Observation			2/8 (23%) 77
Life Table Tests (d)	104 P-0.012	104 P=0.754N	P = 0.022
Incidental Tumor Tests (d)	P = 0.012	P = 0.754N P = 0.754N	P = 0.022 P = 0.069
	P = 0.040	r = 0.7041	r=0.009
Cochran-Armitage Trend Test (d) Fisher Exact Test (d)	P=0.093	P=0.747	P = 0.168
			·
Mammary Gland: Adenocarcinoma		A / A A / T T \	
Overall Rates (a)	2/50 (4%)	3/49 (6%)	0/49 (0%)
Adjusted Rates (b)	8.0%	9.5%	0.0%
Terminal Rates (c)	2/25 (8%)	1/25 (4%)	0/8 (0%)
Week of First Observation	104	88	
		D-0 500	P=0.510N
Life Table Tests (d)	P = 0.390N	P = 0.530	P = 0.510 M
Life Table Tests (d)	P=0.390N P=0.266N	P = 0.530 P = 0.530	P = 0.510N P = 0.510N

# TABLE E4. ANALYSIS OF PRIMARY TUMORS IN FEMALE MICE IN THE TWO-YEAR INHALATION STUDY OF DICHLOROMETHANE (Continued)

### TABLE E4. ANALYSIS OF PRIMARY TUMORS IN FEMALE MICE IN THE TWO-YEAR INHALATION STUDY OF DICHLOROMETHANE (Continued)

(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).

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

<sup>(</sup>b) Kaplan-Meier estimated tumor incidences at the end of the study after adjusting for intercurrent mortality

<sup>(</sup>c) Observed tumor incidence at terminal kill

### **APPENDIX F**

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

Study	Incidence of Leukemia in Controls	
Historical Incidence at Battelle Paci	fic Northwest Laboratories	
Propylene oxide Propylene	20/50 16/50	
TOTAL	36/100 (36.0%)	
Overall Historical Incidence		
TOTAL SD (b)	458/1,727 (26.5%) 8.83%	
Range (c) High Low	23/50 5/50	

#### TABLE F1. HISTORICAL INCIDENCE OF HEMATOPOIETIC SYSTEM TUMORS IN MALE F344/N **RATS RECEIVING NO TREATMENT (a)**

(a) Data as of August 3, 1984, for studies of at least 104 weeks

(b) Standard deviation

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

#### TABLE F2. HISTORICAL INCIDENCE OF PITUITARY GLAND TUMORS IN MALE F344/N RATS **RECEIVING NO TREATMENT (a)**

Incidence in Controls					
Study	Adenoma	Carcinoma	Adenoma or Carcinoma		
Historical Incidence	at Battelle Pacific Northw	est Laboratories			
Propylene oxide	21/47	0/47	21/47		
Propylene	12/46	0/46	12/46		
TOTAL	33/93 (35.5%)	0/93 (0.0%)	33/93 (35.5%)		
Overall Historical In	cidence				
TOTAL	325/1,614 (20.1%)	38/1,614 (2.4%)	363/1,614 (22.5%)		
SD (b)	11.14%	3.04%	10.98%		
Range (c)					
High	24/46	5/45	25/46		
Low	2/39	0/50	2/39		

(a) Data as of August 3, 1984, for studies of at least 104 weeks. Data includes all diagnoses of tumors designated NOS, (a) Data in the second of the secon

Incidence in Controls						
Study	Pheochromocytoma	Malignant Pheochromocytoma	Pheochromocytoma or Malignant Pheochromocytoma			
Historical Incid	lence at Battelle Pacific	Northwest Laboratories				
Propylene oxide	3/48	0/48	3/48			
Propylene	3/50	2/50	5/50			
TOTAL	6/98 (6.1%)	2/98 (2.0%)	8/98 (8.2%)			
Overall Historic	cal Incidence					
TOTAL	338/1,702 (19.9%)	20/1,702 (1.2%)	358/1,702 (21.0%)			
SD (b)	9.87%	1.49%	9.63%			
Range (c)						
High	20/49	3/48	21/49			
Low	2/50	0/50	3/50			

# TABLE F3. HISTORICAL INCIDENCE OF ADRENAL GLAND TUMORS IN MALE F344/N RATS RECEIVING NO TREATMENT (a)

(a) Data as of August 3, 1984, for studies of at least 104 weeks (b) Standard deviation

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

#### TABLE F4. HISTORICAL INCIDENCE OF MAMMARY GLAND TUMORS IN MALE F344/N RATS **RECEIVING NO TREATMENT (a)**

Incidence in Controls					
Study	Fibroadenoma	Adenocarcinoma	Fibroadenoma or Adenocarcinoma		
Historical Inciden	ce at Battelle Pacific Nor	thwest Laboratories			
Propylene oxide	0/50	0/50	0/50		
Propylene	0/50	1/50	1/50		
TOTAL	0/100 (0.0%)	1/100 (1.0%)	1/100 (1.0%)		
Overall Historical	Incidence				
TOTAL	(b) 51/1,727 (3.0%)	(c) 3/1,727 (0.2%)	54/1,727 (3.1%)		
SD(d)	2.98%	0.58%	3.02%		
Range (e)					
High	6/49	1/50	6/49		
Low	0/50	0/90	0/50		

(a) Data as of August 3, 1984, for studies of at least 104 weeks (b) Includes three diagnoses of adenoma, NOS

(c) Includes one diagnosis of carcinoma, NOS

(d) Standard deviation

#### TABLE F5. HISTORICAL INCIDENCE OF INTEGUMENTARY SYSTEM FIBROMAS OR FIBROSARCOMAS IN MALE F344/N RATS RECEIVING NO TREATMENT (a)

	Incidence in Controls		
Study	Fibroma	Fibrosarcoma	Fibroma or Fibrosarcoma
Historical Incidenc	e at Battelle Pacific Northy	vest Laboratories	
Propylene oxide Propylene	3/50 3/50	0/50 0/50	3/50 3/50
TOTAL	6/100 (6.0%)	0/100 (0.0%)	6/100 (6.0%)
Overall Historical I	ncidence		
TOTAL SD (e)	(b) 91/1,727 (5.3%) 3.18%	(c) 20/1,727 (1.2%) 1.40%	(d) 110/1,727 (6.4%) 3.32%
Range (f) High Low	6/50 0/50	2/50 0/50	6/50 0/49

(a) Data as of August 3, 1984, for studies of at least 104 weeks.

(b) Includes two fibroadenomas of the mammary gland and three integumentary system neurofibromas

(c) Includes two neurofibrosarcomas

(d) Eight sarcomas, NOS, were also observed. The inclusion of these tumors would increase the high range to 7/50. (e) Standard deviation

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

#### TABLE F6. HISTORICAL INCIDENCE OF INTEGUMENTARY SYSTEM PAPILLOMAS OR CARCINOMAS IN MALE F344/N RATS RECEIVING NO TREATMENT (a)

		Incidence in Controls	
Study	Papilloma	Carcinoma	Papilloma or Carcinoma
Historical Incidence	e at Battelle Pacific North	west Laboratories	······
Propylene oxide Propylene	0/50 0/50	0/50 0/50	0/50 0/50
TOTAL	0/100 (0.0%)	0/100 (0.0%)	0/100 (0.0%)
Overall Historical In	ncidence		
TOTAL SD (b)	29/1,727 (1.7%) 1.63%	15/1,727 (0.9%) 1.23%	44/1,727 (2.5%) 1.82%
Range (c)			
High Low	2/40 0/50	2/50 0/90	3/50 0/50

(a) Data as of August 3, 1984, for studies of at least 104 weeks

(b) Standard deviation

TABLE F7.	HISTORICAL INCIDENCE OF TESTICULAR TUMORS IN MALE F344/N RATS	
	<b>RECEIVING NO TREATMENT(a)</b>	

Study	Incidence of Interstitial Cell Tumors in Controls	
Historical Incidence at Battelle Paci	ific Northwest Laboratories	···
Propylene oxide Propylene	29/49 37/50	
TOTAL	66/99 (66.7%)	
<b>Overall Historical Incidence</b>		
TOTAL SD (c)	(b) 1,511/1,703 (88.7%) 7.79%	
Range (d) High Low	49/50 34/50	

(a) Data as of August 3, 1984, for studies of at least 104 weeks
(b) Total includes one interstitial cell tumor, malignant.
(c) Standard deviation

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

## TABLE F8. HISTORICAL INCIDENCE OF MESOTHELIOMAS IN MALE F344/N RATS RECEIVING NO<br/>TREATMENT (a)

Study	Incidence of Mesotheliomas in Controls	
Historical Incidence at Battelle Pacifi	c Northwest Laboratories	
Propylene oxide Propylene	1/50 3/50	
TOTAL	(b) <b>4/100 (4.0%)</b>	
<b>Overall Historical Incidence</b>		
TOTAL SD (d)	(c) <b>44/1,727 (2.5%)</b> 2.35%	
Range (e) High Low	5/50 0/50	

(a) Data as of August 3, 1984, for studies of at least 104 weeks (b) All designated NOS

(c) Includes 2 benign, 14 malignant, and 28 NOS

(d) Standard deviation

Study	Incidence of Leukemia in Controls	
Historical Incidence at Battelle P	acific Northwest Laboratories	
Propylene oxide Propylene	14/50 13/49	
TOTAL	27/99 (27.3%)	
<b>Overall Historical Incidence</b>		
TOTAL SD (b)	<b>307/1,772</b> (17.3%) <b>6.00%</b>	
Range (c) High Low	19/50 3/50	

## TABLE F9. HISTORICAL INCIDENCE OF HEMATOPOIETIC SYSTEM TUMORS IN FEMALE F344/NRATS RECEIVING NO TREATMENT (a)

(a) Data as of August 3, 1984, for studies of at least 104 weeks

(b) Standard deviation

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

## TABLE F10. HISTORICAL INCIDENCE OF LIVER TUMORS IN FEMALE F344/N RATS RECEIVING NO TREATMENT (a)

		Incidence in Control	8
Study	Neoplastic Nodule	Hepatocellular Carcinoma	Neoplastic Nodule or Hepatocellular Carcinoma
listorical Incidence	at Battelle Pacific Northwest	Laboratories	
Propylene oxide Propylene	1/50 0/48	0/50 0/48	1/50 0/48
TOTAL	1/98 (1.0%)	0/98 (0.0%)	1/98 (1.0%)
Overall Historical Inc	cidence		
TOTAL SD (b)	46/1,766 (2.6%) 2.77%	3/1,766 (0.2%) 0.75%	48/1,766 (2.7%) 2.99%
Range (c)	4/50	0/50	5 (5 )
High Low	4/50 0/50	2/50 0/88	5/50 0/50

(a) Data as of August 3, 1984, for studies of at least 104 weeks

(b) Standard deviation

#### TABLE F11. HISTORICAL INCIDENCE OF MAMMARY GLAND TUMORS IN FEMALE F344/N RATS RECEIVING NO TREATMENT (a)

	Incidence in Controls		
Study	Fibroadenoma	Adenocarcinoma	Fibroadenoma or Adenocarcinoma
Historical Incidence	at Battelle Pacific Northwes	st Laboratories	
Propylene oxide Propylene	7/50 9/49	1/50 0/49	8/50 9/49
TOTAL	16/99 (16.2%)	1/99 (1.0%)	17/99 (17.2%)
Overall Historical In	ncidence		
TOTAL SD (d)	(b) <b>492/1,772</b> (27.8%) 9.61%	(c) 45/1,772 (2.5%) 2.45%	520/1,772 (29.3%) 9.29%
Range (e)	04440		24/42
High Low	24/49 5/50	<b>4/49</b> 0/50	24/49 6/50

(a) Data as of August 3, 1984, for studies of at least 104 weeks

(b) Includes 470 fibroadenomas. The remaining tumors include adenomas, NOS, cystadenomas, papillary cystadenomas, and cystfibroadenomas of the mammary gland and integumentary system fibroadenomas.

(c) Inlcudes one squamous cell carcinoma

(d) Standard deviation

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

## TABLE F12. HISTORICAL INCIDENCE OF PITUITARY GLAND TUMORS IN FEMALE F344/N RATS RECEIVING NO TREATMENT (a)

	Incidence in Controls		
Study	Adenoma	Carcinoma	Adenoma or Carcinoma
Historical Incidence	at Battelle Pacific Northwes	t Laboratories	an 1997 - Marine Santan Analas - Marine - Angeria -
Propylene oxide Propylene	25/48 18/44	0/48 1/44	25/48 19/44
TOTAL	43/92 (46.7%)	1/92 (1.1%)	44/92 (47.8%)
Overall Historical In	cidence		
TOTAL SD (b)	743/1,704 (43.6%) 11.71%	62/1,704 (3.6%) 4.24%	805/1,704 (47.2%) 11.01%
Range (c)			
High Low	33/47 7/39	8/49 0/50	33/47 9/39

(a) Data as of August 3, 1984, for studies of at least 104 weeks. Data includes all diagnoses of tumors designated NOS, chromophobe, acidophil, or basophil; adenocarcinomas are grouped with carcinomas.

(b) Standard deviation

## TABLE F13. HISTORICAL INCIDENCE OF THYROID GLAND C-CELL TUMORS IN FEMALE F344/N RATS<br/>RECEIVING NO TREATMENT (a)

A 1		
Adenoma	Carcinoma	Adenoma or Carcinoma
Battelle Pacific Northwe	st Laboratories	, , , , , , , , , , , , , , , , , , ,
1/45 5/39	1/45 1/39	2/45 6/39
6/84 (7.1%)	2/84 (2.4%)	8/84 (9.5%)
dence		
<b>79/1,704 (4.6%)</b> <b>4.08%</b>	61/1,704 (3.6%) 2.73%	137/1,704 (8.0%) 4.52%
6/49 0/86	5/50 0/50	9/50 0/50
	1/45 5/39 6/84 (7.1%) lence 79/1,704 (4.6%) 4.08% 6/49	5/39 1/39 6/84 (7.1%) 2/84 (2.4%) lence 79/1,704 (4.6%) 61/1,704 (3.6%) 4.08% 2.73% 6/49 5/50

(a) Data as of August 3, 1984, for studies of at least 104 weeks

(b) Standard deviation

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

## TABLE F14. HISTORICAL INCIDENCE OF ALVEOLAR/BRONCHIOLAR TUMORS IN MALE B6C3F1 MICERECEIVING NO TREATMENT (a)

		Incidence in Control	s
Study	Adenoma	Carcinoma	Adenoma or Carcinoma
Historical Incidence	at Battelle Pacific Northw	vest Laboratories	
Propylene oxide	14/50	2/50	15/50
Propylene	7/50	9/50	16/50
TOTAL	21/100 (21.0%)	11/100 (11.0%)	31/100 (31.0%)
<b>Overall</b> Historical In	cidence		
TOTAL	215/1,780 (12.1%)	87/1,780 (4.9%)	296/1,780 (16.6%)
SD (b)	6.80%	4.06%	8.22%
Range (c)			
High	14/50	8/48	17/50
Low	1/50	0/50	1/49

(a) Data as of August 3, 1984, for studies of at least 104 weeks

(b) Standard deviation

#### TABLE F15. HISTORICAL INCIDENCE OF CIRCULATORY SYSTEM TUMORS IN MALE B6C3F1 MICE **RECEIVING NO TREATMENT (a)**

	Incidence in Controls		
Study	Hemangiosarcoma	Hemangiosarcoma	Hemangioma or Hemangiosarcoma
istorical Incidence a	t Battelle Pacific Northwest	t Laboratories	
Propylene oxide Propylene	0/50 0/50	2/50 0/50	2/50 0/50
TOTAL	0/100 (0.0%)	2/100 (2.0%)	2/100 (2.0%)
verall Historical Inci	idence		
TOTAL SD (c)	23/1,791 (1.3%) 2.68%	(b) 56/1,791 (3.1%) 2.53%	78/1,791 (4.4%) 4.06%
Range (d)		540	(0.10/F0)
High Low	(e) 7/50 0/50	5/49 0/50	(f) 10/50 0/50

(a) Data as of August 3, 1984, for studies of at least 104 weeks

(b) Includes angiosarcoma

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

(e) Second highest incidence: 3/49

(f) Second highest incidence: 7/49

## TABLE F16. HISTORICAL INCIDENCE OF HEPATOCELLULAR TUMORS IN MALE B6C3F1 MICERECEIVING NO TREATMENT (a)

		Incidence in Controls	
Study	Adenoma	Carcinoma	Adenoma or Carcinoma
listorical Incidence	at Battelle Pacific Northwe	est Laboratories	
Propylene oxide Propylene	8/50 5/50	6/50 9/50	1 <b>4/50</b> 1 <b>4/50</b>
TOTAL	13/100 (13.0%)	15/100 (15.0%)	28/100 (28.0%)
Overall Historical In	cidence		
ТОТАL SD (b)	179/1,784 (10.0%) 7.36%	377/1,784 (21.1%) 6.54%	540/1,784 (30.3%) 8.04%
Range (c) High	(d) 22/50	16/50	(e) 29/50
Low	0/49	4/50	7/50

(a) Data as of August 3, 1984, for studies of at least 104 weeks

(b) Standard deviation

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

(d) Second highest incidence: 9/50 (e) Second highest incidence: 20/50

#### TABLE F17. HISTORICAL INCIDENCE OF TESTICULAR TUMORS IN MALE B6C3F1 MICE RECEIVING NO TREATMENT (a)

	Incidence of Interstitial Cell Tumors in Controls	
Historical Incidence at Battelle P	acific Northwest Laboratories	
Propylene oxide	0/48	
Propylene	2/50	
TOTAL	2/98 (2.0%)	
<b>Overall Historical Incidence</b>		
TOTAL	(b) 5/1,768 (0.3%)	
SD(c)	0.71%	
Range (d)		
High	1/48	
Low	0/50	

(a) Data as of August 3, 1984, for studies of at least 104 weeks
(b) No malignant interstitial cell tumors were observed.

(c) Standard deviation

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

# TABLE F18. HISTORICAL INCIDENCE OF ALVEOLAR/BRONCHIOLAR TUMORS IN FEMALE B6C3F1MICE RECEIVING NO TREATMENT (a)

Incidence in Controls			
Study	Adenoma	Carcinoma	Adenoma or Carcinoma
Historical Incide	nce at Battelle Pacific	Northwest Laboratories	
Propylene oxide	4/50	0/50	4/50
Propylene	6/50	0/50	6/50
TOTAL	10/100 (10.0%)	0/100 (0.0%)	10/100 (10.0%)
Overall Historica	l Incidence		
TOTAL	87/1,777 (4.9%)	36/1,777 (2.0%)	122/1,777 (6.9%)
SD (b)	3.86%	1.98%	4.44%
Range (c)			
High	7/50	3/50	8/50
Low	0/50	0/50	0/50

(a) Data as of August 3, 1984, for studies of at least 104 weeks

(b) Standard deviation

# TABLE F19. HISTORICAL INCIDENCE OF HEPATOCELLULAR TUMORS IN FEMALE B6C3F1 MICE RECEIVING NO TREATMENT (a)

Adenoma	Incidence in Controls Carcinoma	Adenoma or Carcinoma	
Bettelle Decifie N			
t Dattene Pacific r	lorthwest Laboratories		
1/50	2/50	3/50	
0/50	2/50	2/50	
1/100 (1.0%)	4/100 (4.0%)	5/100 (5.0%)	
dence			
8/1,781 (3.8%)	(b) 82/1,781 (4.6%)	147/1,781 (8.3%)	
4.14%	3.08%	4.76%	
9/49	7/48	10/49	
0/50	0/50	0/50	
	0/50 1/100 (1.0%) dence 88/1,781 (3.8%) 4.14% 9/49	0/50 2/50 1/100 (1.0%) 4/100 (4.0%) dence 8/1,781 (3.8%) (b) 82/1,781 (4.6%) 4.14% 3.08% 9/49 7/48	0/50     2/50     2/50       1/100 (1.0%)     4/100 (4.0%)     5/100 (5.0%)       dence     5/100 (5.0%)     147/1,781 (8.3%)       8/1,781 (3.8%)     (b) 82/1,781 (4.6%)     147/1,781 (8.3%)       4.14%     3.08%     4.76%       9/49     7/48     10/49

(a) Data as of August 3, 1984, for studies of at least 104 weeks

(b) One hepatoblastoma also was observed.

(c) Standard deviation

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

## TABLE F20. HISTORICAL INCIDENCE OF THYROID GLAND FOLLICULAR CELL TUMORS IN FEMALE $B6C3F_1$ MICE RECEIVING NO TREATMENT(a)

		Incidence in Controls		
Study	Adenoma	Carcinoma	Adenoma or Carcinoma	
Historical Incide	nce at Battelle Pacific N	orthwest Laboratories		
Propylene oxide	1/45	0/45	1/45	
Propylene	4/45	0/45	4/45	
TOTAL	5/90 (5.6%)	0/90 (0.0%)	5/90 (5.6%)	
Overall Historica	l Incidence			
TOTAL	(b) <b>36/1,661</b> (2.2%)	7/1,661 (0.4%)	43/1,661 (2.6%)	
SD (c)	2.40%	1.21%	3.15%	
Range (d)				
High	4/48	3/48	7/48	
Low	0/50	0/50	0/50	

(a) Data as of August 3, 1984, for studies of at least 104 weeks

(b) Includes 34 follicular cell adenomas, one adenoma, NOS, and one papillary cystadenoma of the thyroid and two cystadenomas of the thyroid follicle.

(c) Standard deviation

### APPENDIX G

### **CHEMICAL CHARACTERIZATION OF**

### DICHLOROMETHANE

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

- A. Lot No. 766062
  - **1. Physical Properties**

a. Boiling Point:	Determined 39°C (Dupont 900 DTA) 39.7°±0.1°C (at 736 mm, capillary)	<u>Literature Values</u> 39.75° C (Dreisbach, 1959)
b. Appearance:	Clear, colorless liquid	
2. Spectral Data		
a. Infrared	Determined	<u>Literature Values</u>
Instrument:	Beckman IR-12	
Cell:	0.05 mm liquid cell, sodium chloride windows	
Results:	See Figure 5	Consistent with literature spectrum (Dreisbach, 1959)
b. Ultraviolet/Visible	Determined	<u>Literature Values</u>
Instrument:	Cary 118	
Solvent:	Neat liquid	
Results:	No absorbance between 350 and 800 nm. No maxima between 350 and 200 nm but a gradual increase in absorbance between 220 nm and the cutoff at 200 nm.	No literature reference found.







### c. Nuclear Magnetic Resonance

	Determined		Literature Values
(1) Instrument:	Varian HA-100		
(2) Solvent:	Neat, tetramethyl silane added	-	
(3) Assignments:	See Figure 6		Consistent with literature spectrum (Sadtler Standard Spectra)
(4) Chemical Shift (8):	a s, 5.27 ppm		
(5) Integration Ratios:	a 2.00		
3. Water Analysis (Karl Fischer):	0.008% ± 0.002(8)	%	
4. Elemental Analysis			
Element	С	н	Cl

Element	<u>C</u>	Н	Cl
Theory	14.14	2.37	83.48
Determined	14.17	2.35	83.36
	14.19	2.40	83.40



FIGURE 6. NUCLEAR MAGNETIC RESONANCE SPECTRUM OF DICHLOROMETHANE (LOT NO. 766062)

### 5. Chromatographic Analysis: Gas Chromatography

**Instrument:** Tracor MT-220 **Detector:** Flame ionization **Inlet temperature:** 225° C **Detector temperature:** 300° C

### a. Identification of Impurities

System 1

**Column:** Chromosorb 102, 100/120, 1.8 m × 4 mm ID, glass **Oven temperature program:** 50° to 200° C at 10° C/minute

### Results: Major peak only

<u>Peak No.</u>	Retention <u>Time (min)</u>	Retention Time Relative to <u>Major Peak</u>	Area (percent of <u>major peak)</u>
1	11.33	1.00	100

### System 2

Column: 10% Carbowax 20 M-TPA on 80/100 Chromosorb W(AW), 1.8 m  $\times$  4 mm ID, glass

Oven temperature program: 10 minutes at 50° C, then 50° to 200° C at 10° C/minute

**Results:** Major peak and one impurity.

<u>Peak No.</u>	Retention <u>Time (min)</u>	Retention Time Relative to <u>Major Peak</u>	Area (percent of <u>major peak)</u>
1	0.78	0.40	0.094
2	1.95	1.00	100

The sample was spiked with a small amount of vinylidene chloride, and peak no. 1 was enhanced.

### b. Quantitation of Impurities

#### System 1

**Column:** 10% Carbowax 20 M-TPA on 80/100 Chromosorb W(AW),  $(1.8 \text{ m} \times 4 \text{mm ID})$ **Oven temperature:** 50° C, isothermal

The first impurity peak was quantitated against a standard solution of vinylidene chloride, 0.05% (v/v) in *n*-butanol.

**Concentration of vinylidene chloride in the sample**:  $0.044\% \pm 0.005(\delta)\%$ 

During the analysis, another small impurity peak was observed just before the major peak (not detected in system 2 above because the injection volume was kept low to prevent detector overload). This impurity peak was enhanced when an aliquot of the dichloromethane sample was spiked with trans-1,2-dichloroethylene. It was quantitated by comparison with trans-dichloroethylene standard, 0.005% (v/v) in *n*-butanol.

**Concentration of** *trans*-1,2-dichloroethylene in the sample:  $0.0016\% \pm 0.0002(\delta)\%$ 

### System 2

**Column:** Chromosorb 102, 100/120, 1.8 m  $\times$  4 mm, ID, glass **Oven temperature:** 150°C, isothermal

A standard was injected containing 0.005% (v/v) carbon tetrachloride, 0.005% (v/v) 1,2-dichloroethane, and 0.015% (v/v) chloroform in pentane. These compounds had retention times of 9.4, 8.3, and 7.3 minutes, respectively. One microliter of the dichloromethane sample was injected under the same conditions.

The sample contained < 0.005% carbon tetrachloride, < 0.005% 1,2-dichloroethane, and < 0.015% chloroform.

**6.** Conclusions: The results of elemental analysis agreed with theoretical values. Karl Fischer analysis indicated 0.008% water. Gas chromatography on Chromosorb 102 indicated only the major peak. Carbowax 20M-TPA showed one impurity in addition to the major peak; on overloading the major peak, another small impurity was found. The two impurities were identified as vinylidene chloride, 0.04%, and *trans*-1,2-dichloroethylene, 0.002%. The infrared, ultraviolet/visible, and nuclear magnetic resonance spectra were consistent with those expected for the structure of dichloromethane.

### 1. Physical Properties

······		
a. Boiling Point:	Determined 40.9° C at 734 torr (visual, microboiling point); 41.5°-41.8° C (Dupont 900 DTA)	<u>Literature Values</u> 39.75°C (Dreisbach, 1959)
b. Index of Refraction:	Determined	Literature Values
	$n_{\rm D}^{20}$ : 1.424 ± 0.002(δ)	n <sup>20</sup> : 1.4244 (Merck Index, 1976)
c. Density:	<b>Determined</b>	Literature Values
	$d_{22}^{24}$ : 1.3201 ± 0.0005( $\delta$ ) g/ml	$d_4^{20}$ : 1.3255 g/ml
d. Appearance:	Clear, colorless liquid	(Merck Index, 1976)
2. Spectral Data		
a. Infrared	<b>Determined</b>	Literature Values
Instrument:	Beckman IR-12	
Cell:	0.016 mm liquid cell, sodium chloride windows	
Results:	See Figure 7	Consistent with literature spectrum (Sadtler Standard Spectra)
b. Ultraviolet/Visible	Determined	Literature Values
Instrument:	Cary 118	
Solvent:	Methanol	
Concentration:	1%	
Results:	No absorbance between 350 and 800 nm. No maximum between 210 and 350 nm but a gradual increase in absorbance toward the solvent cutoff at 210 nm.	No literature reference found



### **APPENDIX G. CHEMICAL CHARACTERIZATION**

### c. Nuclear Magnetic Resonance

	Determined	<u>Literature Values</u>
(1) Instrument:	Varian HA-100	
(2) Solvent:	Neat, tetramethyl- silane added	
(3) Assignments:	See Figure 8	Consistent with literature spectrum (Sadtler Standard Spectra)
(4) Chemical Shift (δ):	a s, 5.23 ppm	
(5) Integration Ratios:	a 2.00	
	$0.01007 \pm 0.000(8)07$	

### 3. Water Analysis (Karl Fischer): $0.018\% \pm 0.002(\delta)\%$

### 4. Elemental Analysis

Element	С	Н	Cl
Theory	14.14	2.37	83.48
Determined	13.98 14.23	2.30 2.23	83.45 83.65

### 5. Titration for Acidic Components

<1 ppm acidity (assumed to be hydrochloric acid)



### FIGURE 8. NUCLEAR MAGNETIC RESONANCE SPECTRUM OF DICHLOROMETHANE (LOT NO. 767132)

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### 6. Chromatographic Analysis: Gas Chromatography

Instrument: Tracor MT 220 Detector: Flame ionization Inlet temperature: 200° C Detector temperature: 215° C Carrier gas: Nitrogen Carrier flow rate: 70 ml/minute

a. Detection of Impurities

### System 1

**Column:** 20% SP2100/0.1% Carbowax 1500 on 80/100 Supelcoport, 1.8 m  $\times$  4 mm ID, glass **Oven temperature program:** 50° C for 5 minutes, then 50°-170° C at 10° C/minute **Sample injected:** 5 µl neat liquid, diluted to 1% and 0.5% in *o*-dichlorobenzene to quantitate the major peak and check for overloading

**Results:** Major peak and 12 impurities. The areas of the impurities total 0.1% or less of the area of the major peak.

<u>Peak No.</u>	Retention <u>Time (min)</u>	Retention Time Relative to <u>Major Peak</u>	Area (percent of <u>major peak)</u>
1	0.3	0.2	< 0.001
2	0.5	0.4	< 0.001
3	0.6	0.5	< 0.001
4	0.6	0.5	< 0.001
5	0.7	0.5	< 0.001
6	0.8	0.6	< 0.001
7	0.9	0.7	< 0.001
8	1.0	0.8	< 0.001
9	1.1	0.8	shoulder 0.004-0.02
10	1.3	1.0	100
11	1.7	1.3	shoulder 0.03-0.1
12	2.4	1.8	0.004
13	2.9	2.2	<0.001

#### System 2

**Column:** 10% Carbowax 20M-TPA on 80/100 Chromosorb W(AW), 1.8 m  $\times$  4 mm ID, glass **Oven temperature program:** 50° C for 5 minutes, then 50°-200° C at 10° C/minute **Sample injected:** 7 µl neat liquid diluted to 1% and 0.5% in *o*-dichlorobenzene to quantitate the major peak and check for overloading

**Results:** Major peak and six impurities. The areas of the impurities total approximately 0.1% of the area of the major peak.
<u>Peak No.</u>	Retention <u>Time (min)</u>	Retention Time Relative to <u>Major Peak</u>	Area (percent of <u>major peak)</u>
1	0.3	0.2	< 0.001
2	0.4	0.2	0.07
3	0.7	0.3	0.03
4	1.0	0.5	< 0.001
5	1.3	0.7	0.01
6	1.9	1.0	100
7	3.7	1.9	< 0.001

### b. Quantitation of Vinylidene Chloride

**Column:** OPN/Porasil C, 80/100 mesh,  $1.4 \text{ m} \times 4 \text{ mm}$  ID, glass **Oven temperature:** 50° C, isothermal **Sample injected:** 6 µl neat dichloromethane and 6 µl 0.025% (v/v) vinylidene chloride in methanol

**Results:** The OPN/Porasil C system appeared to give a homogeneous peak for vinylidene chloride with a retention time of 3.2 minutes; the major peak began eluting at 3.3 minutes. The area of the peak at 3.2 minutes was compared with the area of similar-sized injections of 0.025% vinylidene chloride in methanol.

The sample contains  $0.026\% \pm 0.005(\delta)\%$  (v/v) vinylidene chloride.

7. Conclusions: The results of elemental analysis agreed with the theoretical values. Gas chromatography indicated 12 impurities with one system and 6 impurities with a second system. With either system, the areas of the impurities totaled 0.1% or less of the major peak. Titration for acidic components indicated <1 ppm acidity (assumed to be hydrochloric acid). Gas chromatography was also used to determine that the concentration of vinylidene chloride in the sample was  $0.026\% \pm 0.005(\delta)\%$  (v/v). The infrared and nuclear magnetic resonance spectra were consistent with those expected for the structure.

### C. Lot No. 77-26-22

1. Spectral Data

a. Infrared	Determined	Literature Values
Instrument:	Perkin-Elmer Model 137 Infracord	
Cell:	Thin film between silver chloride plates	
Results:	See Figure 9	Consistent with literature spectrum (Sadtler Standard Spectra)
b. Ultraviolet/Visible	Determined	<u>Literature Values</u>
Instrument:	Cary 118	
Solvent:	Methanol	
Concentration:	1%	
Results:	No absorbance between 350 and 800 nm. No maximum between 212 and 350 nm, but a gradual increase in absorbance toward the solvent cutoff at 212 nm.	No literature reference found.
c. Nuclear Magnetic Resonance	ce	
	Determined	<u>Literature Values</u>
Instrument:	Varian HA-100	
Solvent:	Neat, tetramethylsilane added	

**Assignments:** 

Chemical Shift ( $\delta$ ):

**Integration Ratios:** 

See Figure 10

a s, 5.24 ppm

a 2.00

Consistent with

Spectra)

literature spectrum (Sadtler Standard



FIGURE 9. INFRARED ABSORPTION SPECTRUM OF DICHLOROMETHANE (LOT NO. 77-26-22)





### 2. Water Analysis (Karl Fischer): $0.012\% \pm 0.001(\delta)\%$

### 3. Elemental Analysis

Element	C	Н	Cl
Theory	14.14	2.37	83.48
Determined	14.27 14.11	2.39 2.23	83.31 83.52

### 4. Titration for Acidic Components: Titration with sodium hydroxide

 $1.75 \pm 0.24(\delta)$  ppm acidity (assumed to be hydrochloric acid)

### 5. Chromatographic Analysis: Gas Chromatography

Instrument: Tracor MT 220 Detector: Flame ionization Carrier gas: Nitrogen Carrier flow rate: 70 ml/minute

### a. Detection of Impurities

System 1

Inlet temperature: 220° C Detector temperature: 270° C Column: 20% SP2100/0.1% Carbowax 1500 on 100/120 Supelcoport, 1.8 m  $\times$  4 mm ID, glass Oven temperature program: 50° C for 5 minutes, then 50°-170° C at 10° C/minute Sample injected: 4 µl neat liquid, diluted to 1.0% and 0.5% in o-dichlorobenzene to quantitate the major peak and check for overloading

**Results:** Major peak and one impurity. The area of the impurity was 0.02% of the area of the major peak.

<u>Peak No.</u>	Retention <u>Time (min)</u>	Retention Time Relative to <u>major peak</u>	Area (percent of <u>major peak)</u>
1 2	1.7 2.3	1.0 1.4	100 0.02

### System 2

Inlet temperature: 200° C Detector temperature: 215° C Column: 10% Carbowax 20M-TPA on 80/100 Chromosorb W (AW), 1.8 m × 4 mm ID Oven temperature program: 50° C for 5 minutes, then 50°-200° C at 10° C/minute Sample injected: 4 µl neat liquid in o-dichlorobenzene to quantitate the major peak and check for overloading

**Results:** Major peak and three impurities. The areas of the impurities totaled 0.18% of the area of the major peak.

<u>Peak No.</u>	Retention <u>Time (min)</u>	Retention Time Relative to <u>Major Peak</u>	Area (percent of <u>major peak)</u>
1	0.55	0.20	0.10
2	0.80	0.29	0.05
3	1.46	0.53	0.03
4	2.77	1.00	100

### b. Quantitation of Vinylidene Chloride

Inlet temperature: 200° C Detector temperature: 215° C Column: OPN/Porasil C, 80/100 mesh, 1.4 m × 4 mm ID, glass Oven temperature: 50 ° C, isothermal

**Results:** Standards (6  $\mu$ l) containing 0.05% (v/v) vinylidene chloride in methanol were injected. Vinylidene chloride had a retention time of 2.8 minutes. The dichloromethane sample had an impurity peak with a retention time of 2.8 minutes, appearing in front of the major peak, which began eluting at 3.0 minutes. Addition of vinylidene chloride to the neat sample enhanced the peak at 2.8 minutes. Vinylidene chloride in the sample was quantitated against similar sized injections of vinylidene chloride in methanol.

The sample contained  $0.023\% \pm 0.003(\delta)\%$  vinylidene chloride.

6. Conclusions: The results of elemental analysis agreed with the theoretical values. Titration for acidic components indicated 2 ppm acidity (assumed to be hydrochloric acid). Gas chromatography with one system showed one impurity with an area 0.02% of the major peak. A second system indicated three impurities with total areas 0.18% of the area of the major peak. Gas chromatography also determined the concentration of vinylidene chloride in the sample to be  $0.023\% \pm 0.003(\delta)\%$ . The infrared and nuclear magnetic resonance spectra were consistent with those expected for the structure. D. Lot No. 775007 **Colorless liquid 1.** Appearance: 2. Spectral Data a. Infrared **Determined Literature Values** Instrument: Beckman IR-12 Cell: Silver chloride, 25-micron path length See Figure 11 **Results:** Identical to literature spectrum (Sadtler Standard Spectra) b. Ultraviolet/Visible Determined Literature Values **Cary 118** Instrument: Solvent: Methanol **Results:** A 10% (v/v) solution No literature reference exhibited no absorbance found. Spectrum between 800 and 350 nm. consistent with the A 1% (v/v) solution structure. showed no absorbance maximum. However, a rapid increase in absorbance was noted below 230 nm. c. Nuclear Magnetic Resonance Determined **Literature Values** (1) Instrument: Varian EM-360-A (2) Solvent: Neat, tetramethylsilane internal standard (3) Assignments: See Figure 12 Identical to literature spectrum (Sadtler Standard Spectra) (4) Chemical Shift (8): s, 5.30 ppm a (5) Integration Ratios: a 2.00





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## **APPENDIX G. CHEMICAL CHARACTERIZATION**

#### 3. Water Analysis (Karl Fischer): $0.008\% \pm 0.001\%$

### 4. Elemental Analysis

Element	С	Н	Cl
Theory	14.14	2.37	83.48
Determined	13.95 14.17	2.19 2.28	83.60 83.54

### 5. Titration: Free acid (as hydrochloric acid) < 3 ppm

### 6. Chromatographic Analysis: Gas Chromatography

Instrument: Perkin Elmer 3920 Detector: Flame ionization Carrier gas: Nitrogen

### a. System 1:

Column: Carbopack C/0.1% SP2100, 1.8 m × 4 mm ID, glass Inlet temperature: 210° C Detector temperature: 240° C Carrier flow rate: 35 ml/min Oven temperature program: 50° C for 4 minutes, then 50° to 250° C at 16° C/minute Samples injected: 6 µl of the neat compound to detect and quantitate impurities and 5 µl of a 1.0% and 0.5% (v/v) solution in 1,2-dichloroethane to establish detector response linearity.

**Results:** A major peak followed by five impurity peaks.

Peak No.	Retention <u>Time (min)</u>	Retention Time Relative to <u>Major Peak</u>	Area (percent of <u>major peak)</u>
1	2.8	1.00	100
2	4.9	1.75	0.05
3	5.1	1.82	0.05
4	6.9	2.46	0.05
5	8.0	2.96	0.01
6	9.2	3.29	0.13

### b. System 2

Column: 10% Carbowax 20M-TPA on 80/100 Chromosorb W(AW), 1.8 m × 4 mm ID, glass Inlet temperature: 110° C Detector temperature: 270° C Carrier flow rate: 50 ml/minute Oven temperature program: 30° C for 4 minutes, then 30° to 200° C at 16° C/minute Samples injected: 0.5 µl, neat, to detect and quantitate impurities; 3.2 µl and 1.7 µl of a 1%

(v/v) solution in 1,2-dichloroethane to establish linearity of detector response.

**Results:** A major peak preceded by three impurity peaks.

Peak No.	Retention <u>Time (min)</u>	Retention Time Relative to <u>Major Peak</u>	Area (percent of <u>major peak)</u>
1	0.5	0.17	0.11
2	0.7	0.23	0.06
3	1.3	0.43	0.04
4	3.0	1.00	100

7. Conclusions: The results of elemental analysis for carbon, hydrogen, and chlorine agreed, within experimental limits, with theoretical values. The water content was  $0.008\% \pm 0.001\%$  by Karl Fischer titration. The free acid concentration (as hydrochloric acid) by titration was less than 3 ppm. Gas chromatography detected a major peak followed by five impurity peaks with a combined relative area of 0.24% in one system and a major peak preceded by three impurities with a combined relative area of 0.21% in a second system. Infrared and nuclear magnetic resonance spectra were identical to the literature spectra. The ultraviolet/visible spectra were consistent with the structure.

E. Lot No. D112480		
1. Appearance:	Clear, colorless liquid	
2. Spectral Data		
a. Infrared	Determined	<u>Literature Values</u>
Instrument:	Perkin-Elmer 283	
Cell:	Thin film between silver chloride plates	
Results:	See Figure 13	Consistent with literature spectrum (Sadtler Standard Spectra)
b. Ultraviolet/Visible	Determined	<u>Literature Values</u>
Instrument:	Cary 118	
Solvent:	Methanol	
Results:	No absorbance from 800 to 350 nm at a concentration of 10% (v/v). No maximum from 350 to 209 nm but a gradual increase in absorbance toward 209 nm was observed at a concentration of 1% (v/v).	No literature reference found. Spectrum consistent with structure.
c. Nuclear Magnetic Resonanc	e	
	<u>Determined</u>	<u>Literature Values</u>
(1) Instrument:	Varian EM-360-A	
(2) Solvent:	Neat, internal standard tetramethylsilane	
(3) Assignments:	See Figure 14	Consistent with literature spectrum (Sadtler Standard Spectra)
(4) Chemical Shift (δ):	a s, 5.32 ppm	
(5) Integration Ratios:	a 2.00	



FIGURE 13. INFRARED ABSORPTION SPECTRUM OF DICHLOROMETHANE (LOT NO. D112480)







### **3. Water Analysis (Karl Fischer):** $0.0092\% \pm 0.0004(\delta)\%$

### 4. Elemental Analysis

Element	С	Н	Cl
Theory	14.14	2.37	83.49
Determined	14.13 14.15	2.35 2.24	83.19 83.21

**5. Titration for Acidic Components:** Titration was done in isopropanol with 0.01 N sodium hydroxide titrant using phenolphthalein indicator.

### $0.26 \pm 0.09(\delta)$ ppm (as hydrochloric acid)

### 6. Chromatographic Analysis: Gas Chromatography

Instrument: Varian 3700 Detector: Flame ionization Inlet temperature: 200° C Detector temperature: 250° C Carrier gas: Nitrogen Carrier flow rate: 70 ml/minute

### a. System 1

**Column:** 80/100 Carbopack C/0.1% SP2100, 1.8 m  $\times$  4 mm ID, glass **Oven temperature program:** 50° C for five minutes, then 50° C to 220° C at 10° C/minute **Samples injected:** Neat liquid (3 µl) and solutions of 1% and 0.5% dichloromethane in *o*-dichlorobenzene to quantitate the major peak and check for detector overload

**Results:** Major peak and one impurity after the major peak with an area of 0.09% relative to the major peak area.

Peak No.	Retention <u>Time (min)</u>	Retention Time Relative to <u>Major Peak</u>	Area (percent of <u>major peak)</u>
1 2	1.5 8.4	1.0 5.6	1.00 0.09
2	0.4	0.0	0.09

### b. System 2

Column: 10% Carbowax 20M-TPA on 100/120 Supelcoport, 1.8 m  $\times$  4 mm ID, glass Oven temperature program: 60° C for 6 minutes, then 60° C to 200° C at 10° C/minute Samples injected: Neat liquid (3 µl) and solutions of 1% and 0.5% dichloromethane in o-dichlorobenzene to quantitate the major peak and check for detector overload

**Results:** Major peak and two impurity peaks before the major peak with a combined area of 0.20% relative to the major peak area.

<u>Peak No.</u>	Retention <u>Time (min)</u>	Retention Time Relative to <u>Major Peak</u>	Area (percent of <u>major peak)</u>
1	0.7	0.37	0.18
2	1.2	0.63	0.02
3	1.9	1.00	100

**6.** Conclusions: The results of elemental analysis for carbon, hydrogen, and chlorine agreed with the theoretical values. Karl Fischer analysis indicated  $0.0092\% \pm 0.004(\delta)\%$  water. The free acid content (as hydrochloric acid) was  $0.26 \pm 0.09(\delta)$  ppm. Gas chromatography with an 80/100 Carbopack C/0.1% SP2100 column indicated a major peak and one impurity eluting after the major peak with an area of 0.09% relative to the major peak area. A second gas chromatographic system with a 10% Carbowax 20M-TPA column indicated a major peak and two impurities eluting before the major peak with a combined area totaling 0.20% of the major peak area. The infrared, ultraviolet/visible, and nuclear magnetic resonance spectra were consistent with those expected for the structure of dichloromethane.

## II. Test Chemical Stability Study of Lot No. 766062 Performed by the Analytical Chemistry Laboratory

A. Sample Storage: Samples of dichloromethane were stored in tightly screw-capped vials for two weeks at  $-20^{\circ}$ ,  $5^{\circ}$ ,  $25^{\circ}$ , or  $35^{\circ}$  C. They were then analyzed by gas chromatography.

### **B.** Analytical Method: Gas Chromatography

- 1. Instrument: Bendix 2500 with Hewlett-Packard 3380A Automatic Integrator
- 2. Detector: Flame ionization
- 3. Column: Chromosorb 102, 100/120 mesh, glass,  $1.8 \text{ m} \times 4 \text{ mm}$
- 4. Inlet temperature: 200° C
- 5. Detector temperature: 250°C
- 6. Oven temperature program: 150°C, isothermal
- 7. Retention time: 6.3 minutes

### C. Results

-

Storage Temperature	Average Percent Compound Recovered
– 20° C	$99.5 \pm 2.6$
5° C	$101.3 \pm 2.6$
25° C	$99.1 \pm 2.6$
35° C	99.9 ± 2.6

D. Conclusion: Dichloromethane is stable when stored for 2 weeks at temperatures up to 35°C.

### **APPENDIX G. CHEMICAL CHARACTERIZATION**

- III. Test Chemical Stability Study of Dichloromethane Lot No. D112480 Performed by the Testing Laboratory
  - A. Storage Conditions: Bulk chemical--Room temperature in steel drums
  - **B.** Analytical Methods
    - 1. Gas Chromatography

a. Instrument: HP5840A or HP5830 gas chromatograph
b. Column: 20% SP2100/0.1% Carbowax 1500 on 100/120 Supelcoport, 1.7 m × 4 mm ID, glass
c. Detector: Flame ionization
d. Detector temperature: 275°C

- e. Injector temperature: 200° C
- f. Oven temperature: 30° C, isothermal
- g. Carrier gas: Helium
- h. Concentration: Neat

2. Infrared Spectroscopy: Beckman Acculab 6 or Beckman Acculab 8; run as liquid in a cell with sodium chloride windows.

#### C. Results

1. Gas Chromatography

Date	Percent Purity of <u>Bulk Chemical</u> (a)
12/19/80	99.69
03/05/81	99.65
04/22/81	99.70
07/23/81	99.72
11/16/81	99.70
03/18/82	99.94
07/13/82	99.94
11/08/82	99.73
03/21/83	99.67
05/03/83	99.71

(a) Values are the average of three determinations

2. Infrared Spectroscopy: Spectra were consistent with the reference spectra and with the spectra provided by the analytical chemistry laboratory.

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

### **APPENDIX H**

# GENERATION AND MEASUREMENT OF CHAMBER CONCENTRATIONS AT BATTELLE PACIFIC NORTHWEST LABORATORIES

### I. Vapor Generation System

The liquid to be vaporized was contained in a 5.6-liter stainless steel reservoir that was housed in a vapor hood within the exposure room. The liquid was pumped from this reservoir to a stainless steel cylinder covered with a glass fiber wick from which the liquid was vaporized (Decker et al., 1982). An 80-watt heater and a temperature-sensing element were incorporated within the cylinder. The heater maintained the vaporizer at  $40^{\circ} \pm 2^{\circ}$  C. The surface temperature of the vaporizer was slightly less than this temperature. Each cylindrical vaporizer was positioned in the fresh air duct leading directly into the exposure chamber to minimize material loss due to condensation on duct walls (Figure 15).

### **II. Vapor Concentration Monitoring**

A Hewlett Packard Model 5840 gas chromatograph equipped with a flame ionization detector, a Porapak 80/100 packed column, and an automatic sampling valve was used to monitor the concentration of dichloromethane in the chambers. All chambers and the room air were sampled approximately twice during each exposure hour. Starting on the 231st exposure day, hexane in nitrogen was added to the sampling sequence to establish instrumental performance. The calibration of the monitoring gas chromatograph was confirmed and corrected as necessary by periodic assay of grab samples from the chambers analyzed on a second gas chromatograph.

Weekly concentrations are graphically presented in Figures 16-18.

### **III. Vapor Concentration Uniformity in Chamber**

Uniformity of vapor concentration in each exposure chamber was measured periodically throughout the study with a portable photoionization detector (Model PI201, HNU Systems, Inc., Newton, MA). The standard deviations of the normalized average concentrations did not exceed  $\pm$  3.



### FIGURE 15. DICHLOROMETHANE VAPOR GENERATION SYSTEM



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FIGURE 17. WEEKLY MEAN CONCENTRATION AND STANDARD DEVIATION IN 2,000-PPM RAT AND MOUSE EXPOSURE CHAMBER IN THE TWO-YEAR INHALATION STUDIES OF DICHLOROMETHANE

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FIGURE 18. WEEKLY MEAN CONCENTRATION AND STANDARD DEVIATION IN 4,000-PPM RAT AND MOUSE EXPOSURE CHAMBER IN THE TWO-YEAR INHALATION STUDIES OF DICHLOROMETHANE

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## **APPENDIX I**

## **RESULTS OF**

## SEROLOGIC ANALYSES

### I. Methods

Blood was drawn as described below:

<b>Species</b>	Male/Female	Dates Drawn	Status of Animals
Rat	8/8	01/08/82	Chronic (tested for Sendai only)
Rat	6/4	12/07-12/16/82	Chronic/moribund kill
Mouse	1/9	01/14-04/01/83	Chronic/moribund kill
Rat	5/5	04/25/83 & 04/27/83	Chronic/terminal kill
Mouse	5/5	04/26/83 & 04/27/83	Chronic/terminal kill

The blood from each animal was collected and clotted, and the serum was separated The serum was cooled on ice and shipped to Microbiological Associates' Comprehensive Animal Diagnostic Service for determination of the antibody titers. The following tests were performed:

	Hemagglutination Inhibition	Complement <u>Fixation</u>	<u>ELISA</u>
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)
Rats	PVM Sendai KRV (Kilham rat virus) H-1 (Toolan's H-1 virus)	RCV (rat coronavirus)	M. pul. (Mycoplasma pulmonis)

### **II.** Results

Results are presented in Table I1.

	Interval (months)	Number of Animals	Positive Serologic Reaction for
RATS			
	8	4/6	Sendai
	19	10/10 5/10 3/10	PVM Sendai RCV
	24	10/10 4/10 4/10 5/10 10/10	PVM Sendai KRV RCV M. pul.
MICE			
	23	1/7 2/10	PVM MHV
	24	4/10 1/10	PVM MHV

## **TABLE I1. MURINE VIRUS ANTIBODY DETERMINATIONS FOR RATS AND MICE IN THE TWO-YEAR**INHALATION STUDIES OF DICHLOROMETHANE

## APPENDIX J

## DATA AUDIT SUMMARY

The experimental data and tables of the NTP Technical Report on the toxicology and carcinogenesis inhalation studies of dichloromethane in F344/N rats and B6C3F<sub>1</sub> mice were examined for completeness, consistency, and accuracy and for procedures consistent with Good Laboratory Practice requirements from October 29 to November 2, 1984, at Battelle Pacific Northwest Laboratories, Richland, Washington, and during the week of January 21, 1985, at the NTP Archives, Research Triangle Park, North Carolina. The audit was conducted by Argus Research Laboratories, Inc. The following people were involved in the audit: J. Goeke, Ph.D.; J. Hills,, B.A.; A. Hoberman, Ph.D.; V. Everline, V.S.; G. Knutsen, D.V.M., M.S.; C. Veigle, H.T. The 2-year studies in rats and mice were conducted between April 1981 and April 1983 at Battelle Pacific Northwest Laboratories.

The full report of the audit is on file at the NTP, NIEHS. 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 records for test article administration, 10% of the daily gas chromatograph printouts, and 100% of all other chemistry data. All Individual Animal Data Records (IADR's) were examined for correspondence between necropsy observations and histologic findings. A 10% audit of randomly selected wet tissue bags was conducted for verification of unique animal identification and to examine residual tissues for untrimmed lesions. A complete slide/block match for each sex of both species in the high dose and control groups was performed.

The examination of wet tissues indicated one animal with a missing ear tag and two others with discrepancies between ear tag and IADR number. These discrepancies were resolved during the course of the audit. The IADR's contained some minor clerical errors. With few exceptions, gross observations were followed by microscopic diagnoses. There were a few incidences of lack of correlation between gross and microscopic diagnoses, some of which were resolved by examination of the slides. These discrepancies (eight in male rats, three in female mice, none in female rats or male mice) were distributed over dose groups and tissue sites. A slide/block match performed at the NTP Archives identified a few broken slides, missing slides and blocks, or blocks not cut full face or sealed properly. Untrimmed lesions were found in the wet tissues, primarily in the livers of four rats (one mid dose and two high dose males, one high dose female). These lesions were not rediagnosed because they would not have significantly affected the conclusions for that target site.

The audit revealed no major problems with the conduct of the studies or with collection and documentation of the experimental data. No discrepancies that influenced the final interpretations of the results of these studies were found. The data examined during this audit are considered adequate to support the conclusions presented in the Technical Report.

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