

Strategic Adverse Outcome Pathway Analysis to Inform Human Health Risk Assessment: An Example with Inorganic Arsenic

Christy Powers, U.S. EPA



Disclaimer: The views expressed are those of the authors and do not necessarily represent the views or policies of the U.S. EPA

Context: Inorganic arsenic (iAs)



- Ubiquity of arsenic
 - Multiple organizations, agencies

- Potential exposures

- Water, food, juice
- Susceptible populations



- Health effects*

Cancer

- Lung[†]
- Skin[†]
- Bladder[†]
- Prostate
- Pancreatic
- Renal
- Liver

Noncancer

- Ischemic heart disease
- Skin lesions
- Diabetes
- Nonmalignant respiratory disease
- Pregnancy outcomes
- Neurodevelopmental toxicity
- Immune effects
- Renal disease
- Hypertension
- Stroke



Context: Risk Assessment & Management of iAs

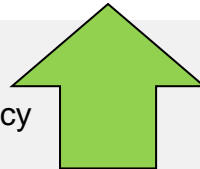
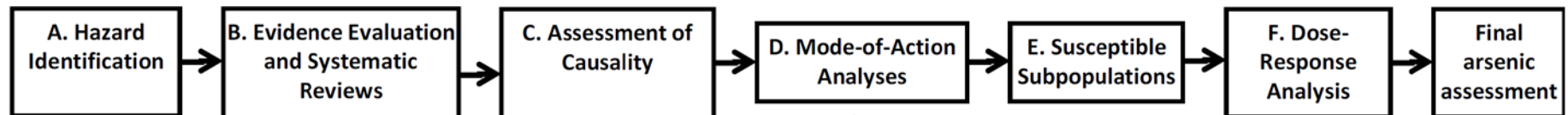
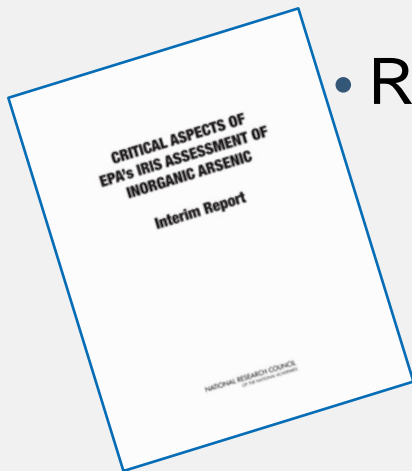
- Risk management

- Guidance, restrict, label food products
- Drinking water limits



- Risk assessment

- FDA draft: Apple juice
- EPA: Integrated Risk Information System
 - Hazard identification and dose-response
 - Stakeholder and partner recommendations
 - National Research Council recommendations



1

- Provide problem formulation statement (Develop Populations, Exposures, Comparators, Outcomes [PECO] statement for AOP analysis)

2

- Tabulate adverse outcome data (supporting & conflicting)

3

- Provide pharmacokinetic data for each adverse outcome & its precursors (exposure & temporal ranges)

4

- List modes of action for each adverse outcome (link pharmacokinetic & pharmacodynamic data to adverse outcome in exposure & temporal manner)

5

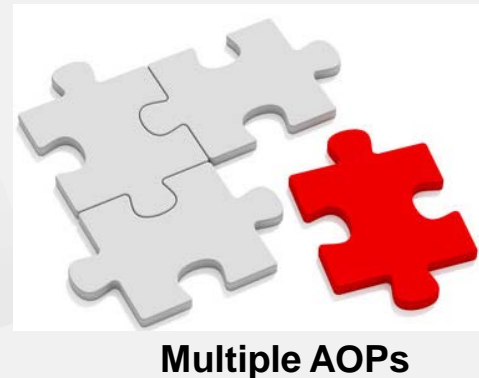
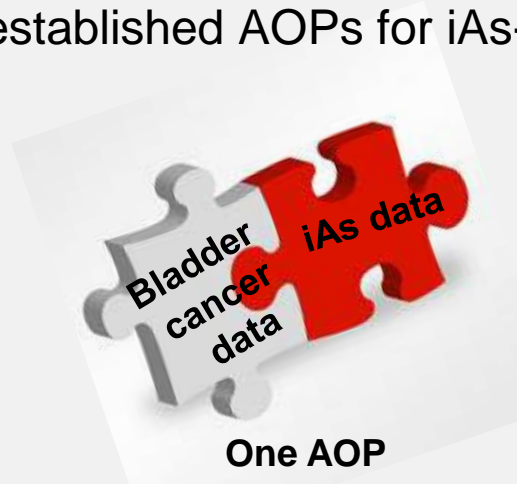
- Construct concordance table (strengths, weakness of each MOA by species, population, subpopulation)

NRC, 2013

*“The **mode-of-action framework** (Boobis et al. 2006, 2008; Carmichael et al. 2011) **in conjunction with the human-relevance framework** (Meek et al. 2003) provides a transparent method of organizing information for hazard identification and risk assessment that includes exposure information, dose–response information, a clear conclusion, identified data gaps, and potentially susceptible populations.”*

Approach: AOP analysis in iAs IRIS Assessment

- **Ideal world:** established AOPs for iAs-associated health effects



- **Reality:** many hypothesized mechanisms of action for iAs-associated health effects



- **Solutions:**

- systematic review of mechanistic data per NRC guidance (short-term)
- scientific community (research & regulatory) → develop & validate AOPs (long-term)

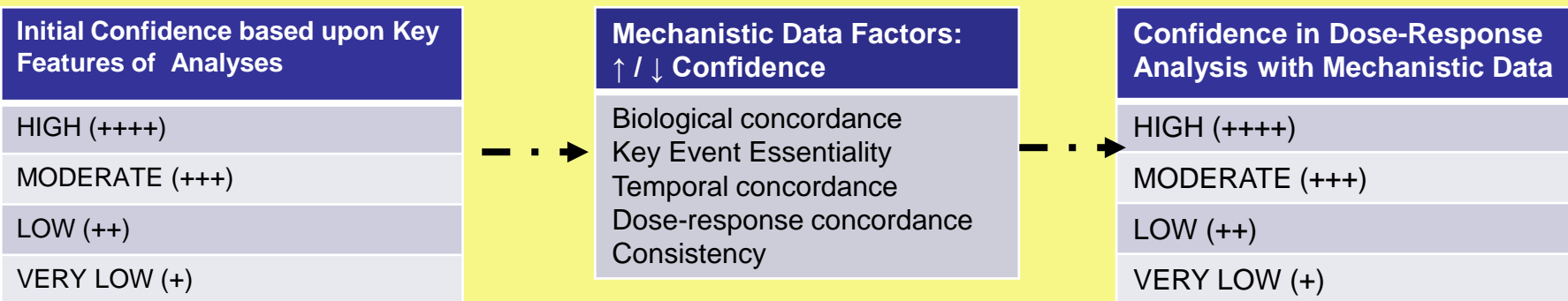
Adverse Outcome Pathway analysis: PECO statement development

Goal: Clearly define what AOP analysis can inform & how data would influence assessment

AOP Analysis Key Question: For dose-response analysis of an iAs health effect in humans (including susceptible populations), do mechanistic data **increase or decrease confidence** in the: 1) response metric selection, 2) dose-metric selection, or 3) model selection (e.g., linear low-dose, high-dose plateau), or 4) human variability?

Draft Dose-Response Confidence Evaluation:

Confidence in Dose-Response Analysis

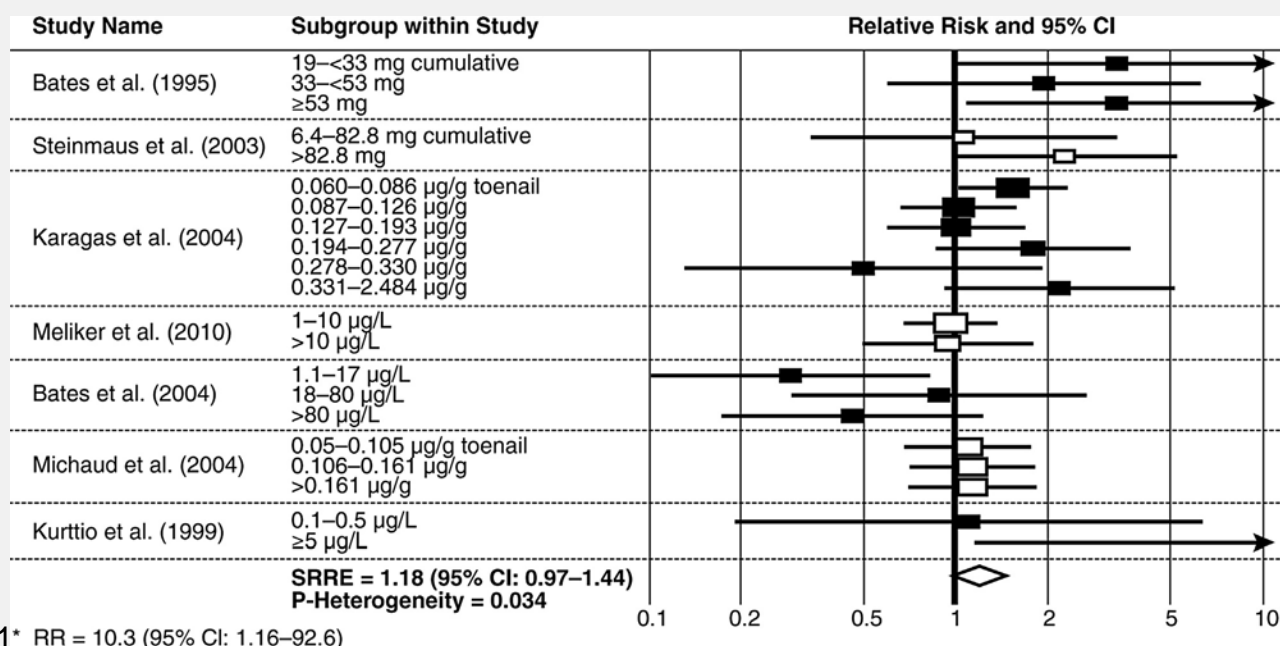


Adverse Outcome Pathway analysis: PECO statement development

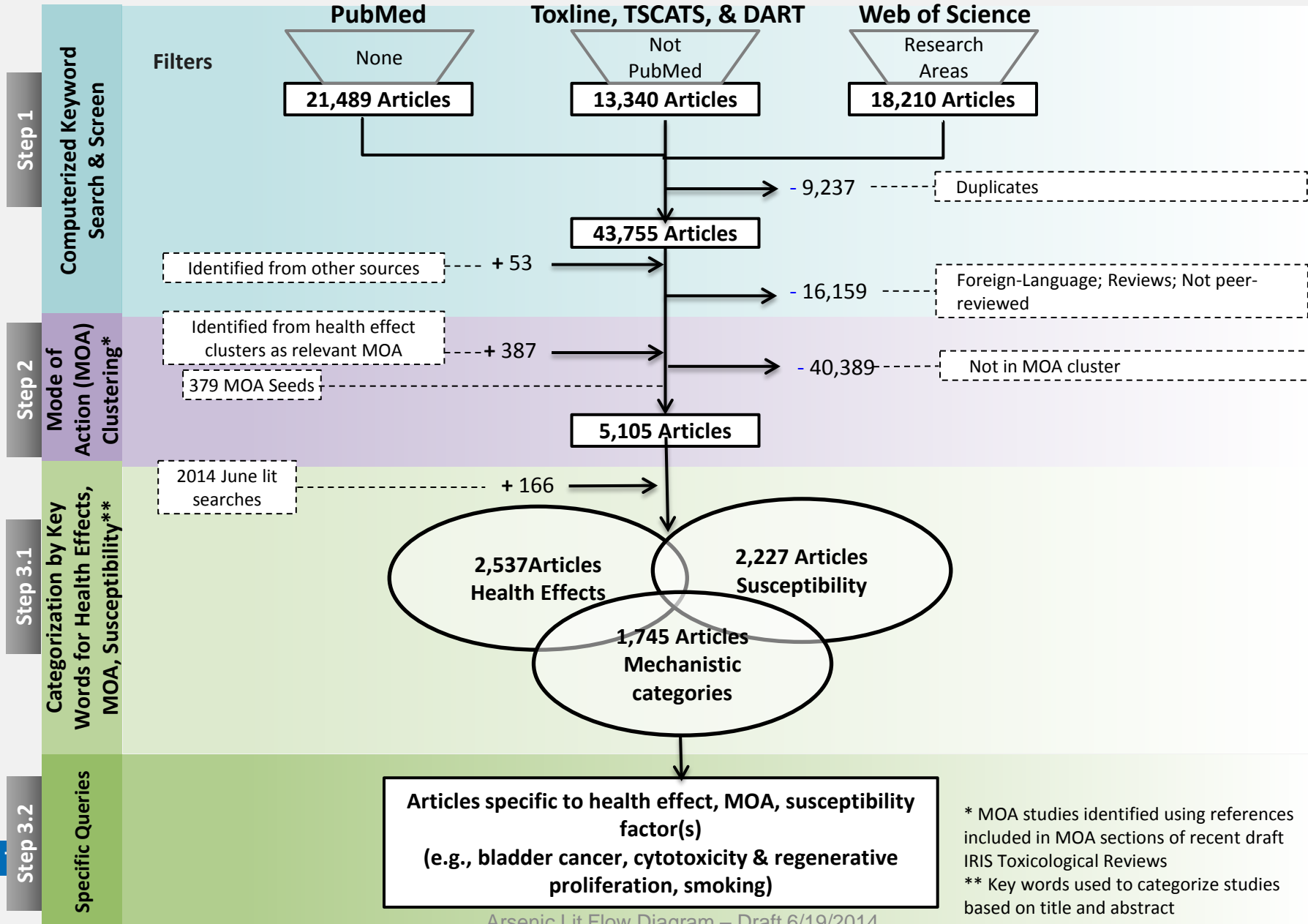
*i*As-induced bladder cancer example

- Example PECO Question: Studies in human populations show mixed results when examining the relationship between low level (<10 ug/L) iAs exposures and bladder cancer in smokers. Do mechanistic data ↑/↓ confidence that iAs interacts with other causes of bladder cancer (e.g., smoking) in different populations (e.g., selection of additive vs. relative risk models)?

Example analysis of iAs bladder cancer risk in ever smokers:

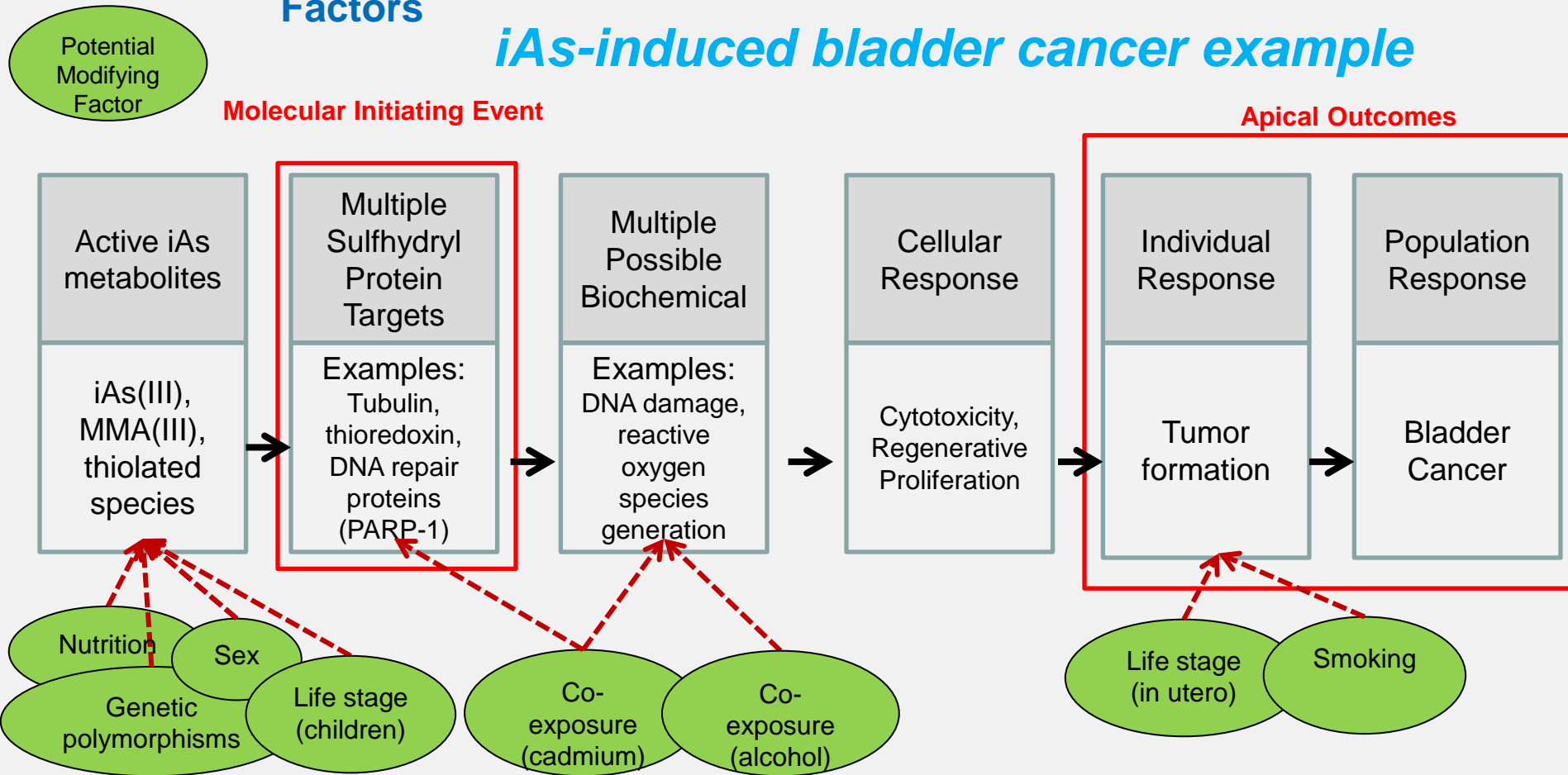


AOP Analysis: PECO statement development (Literature Review)



Adverse Outcome Pathway analysis: Data visualization— Hypothesized Key Events & Modifying Factors

iAs-induced bladder cancer example

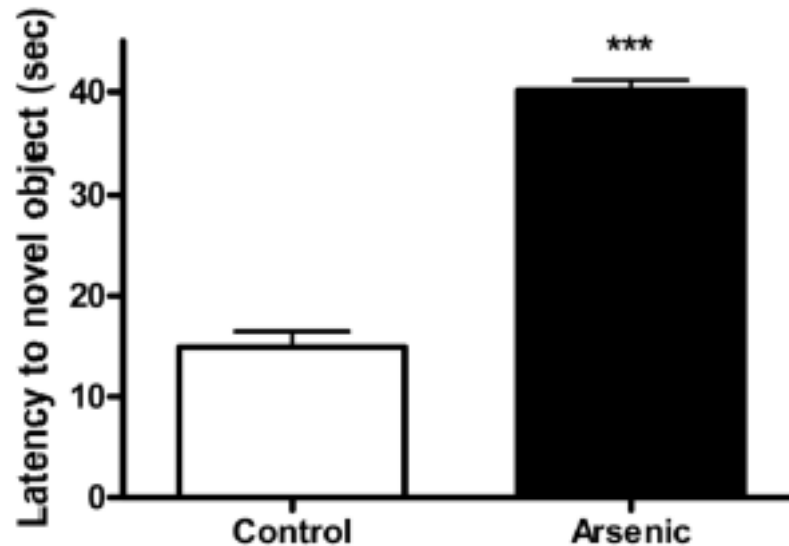


- One of several hypothesized AOPs
- Not necessarily simple progression of Key Events
 - How to consider confidence in modifying factors at relevant exposure levels?
 - How to consider confidence in interactions (or lack thereof) between modifying factors?

Adverse Outcome Pathway analysis: PECO statement development

iAs-induced developmental neurotoxicity example

- Example PECO Question: Human and animal data suggest that early life exposures to iAs may result in developmental neurotoxicity, yet measures of exposure and response are not consistent between animal and human studies. Do mechanistic data \uparrow/\downarrow confidence in selection of IQ measures as a response metric for developmental neurotoxicity (i.e., response metric selection)?



Adverse Outcome Pathway analysis in iAs IRIS Assessment: Challenges for Discussion

- Developing an AOP vs. querying an AOP for relevance to assessment of a particular chemical
 - Pursuit of data for scientific vs. assessment interests
 - Confidence in data to “validate” an AOP vs. inform an assessment
 - Methods to determine confidence in key events, modifying factors, AOP, chemical-specific data relevant to KE, MFs, AOP
 - Communication tools: process and outcomes of confidence determination
- Systematic review of mechanistic literature
 - Generally larger body of studies compared to health effects
 - Terminology varies in literature
 - Lack of methods for study quality review
 - Internal validity, external validity, risk of bias

Acknowledgements

- EPA
 - John Cowden
 - Janice Lee
 - Annie Jarabek
 - Lauren Joca
 - Ryan Jones
 - Connie Meacham
 - Reeder Sams
- ICF International
 - Bill Mendez
 - Audrey Turley

References

- Antonelli et al. AS3MT, GSTO, and PNP polymorphisms: impact on arsenic methylation and implications for disease susceptibility. *Environ Res* (2014): 132:156-167.
- Cohen et al. Evaluation of the carcinogenicity of inorganic arsenic. *Crit Rev Toxicol* (2013) 43: 711-752.
- Fek-Tounsi et al. Cadmium in blood of Tunisian men and risk of bladder cancer: interactions with arsenic exposure and smoking. *Env Sci Pollution Res* (2013) 10.1007/s11356-013-1716-8
- Gamble et al. Folate and arsenic metabolism: a double-blind, placebo-controlled folic acid-supplementation trial in Bangladesh. *Am J Clin Nutr* (2006) 84: 1093-101.
- Gardner et al. Arsenic methylation efficiency increases during first trimester of pregnancy independent of folate status. *Repro Tox* (2011) 31:210-218.
- Lindberg et al. Gender and age differences in the metabolism of inorganic arsenic in highly exposed population in Bangladesh. *Env Res* (2008) 106: 110-120.
- Martinez-Finley et al. Learning deficits in C57BL/6 mice following perinatal arsenic exposure: Consequence of lower corticosterone receptor levels? *Pharmacol Biochem Behav.* 2009 December ; 94(2): 271–277. doi:10.1016/j.pbb.2009.09.006.
- Meek et al. Mode of action human relevance (species concordance framework: Evolution of Bradford Hill considerations and comparative analysis of weight of evidence. *J Appl Toxicol.* 2014;

References (continued)

- Rooney et al. Systematic review and evidence integration for literature-based environmental health assessment. EHP, 2014: 122: 711-718,
- Simon et al. The use of mode of action information in risk assessment: Quantitative key events/ dose-response framework for modeling the dose-response for key events. Crit Rev Toxicol, 2014: 44(53): 17-43.
- Tseng. A review on environmental factors regulating arsenic methylation in humans. Tox Appl Pharm (2009) 235: 338-350.
- Tsuji et al 2014. Arsenic exposure and bladder cancer: Quantitative assessment of studies in human populations to detect risks at low doses. Toxicology (2014) 31: 17-30.
- Tokar et al., Carcinogenic effects of “whole-life” exposure to inorganic arsenic in CD1 mice. Toxicol Sci (2011) 1: 73083.
- Wang et al. A significantly joint effect between arsenic and occupational exposures and risk genotypes/diplotypes of CYP2E1, GSTO1 and GSTO2 on risk of urothelial carcinoma. Toxicol Appl Pharm (2009) 1: 111-118.

Other relevant references:

Anderson et al. Dose-response approaches for nuclear receptor-mediated modes of action for liver carcinogenicity: Results of a workshop. Crit Rev Toxicol, 2014: 44(1):50-63..

Corton et al. Mode of action framework analysis for receptor-mediated toxicity: The peroxisome proliferator-activated receptor alpha (PPAR α) as a case study. Crit Rev Toxicol. 2014: 44(1): 1-49

Meek et al. New developments in the evolution and application of the WHO/IPCS framework on mode of action / species concordance analysis. J Appl Toxicol. 2014; 34: 1-18.