

TDMS No. 20116 - 04
Test Type: CHRONIC
Route: DOSED WATER
Species/Strain: MICE/B6C3F1/NCTR

P09: NON-NEOPLASTIC LESIONS BY INDIVIDUAL ANIMAL

Aloe vera whole leaf extract (native)

CAS Number: ALOEVLEAFEXT

Date Report Requested: 01/15/2010

Time Report Requested: 14:39:08

First Dose M/F: 04/19/05 / 04/19/05

Lab: NCTR

C Number: C20116B
Lock Date: 09/08/2009
Cage Range: ALL
Date Range: ALL
Reasons For Removal: ALL
Removal Date Range: ALL
Treatment Groups: Include ALL
Study Gender: Both
TDMSE Version: 2.2.0

		DAY ON TEST																				males (cont...)					
C57BL/6N XC3H/HEN MTV-NCTR MICE MALE	CONTROL WATER	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0		0	0			
		7	6	5	4	7	7	7	7	4	7	7	3	7	7	7	7	7	4	5	7		7	6	6	7	5
		3	9	8	2	3	3	3	3	5	3	3	4	3	3	3	3	9	7	3	3	8	4	3	3	4	8
		6	6	2	8	6	6	6	6	7	6	5	6	6	6	6	6	9	5	6	6	2	7	6	6	8	8
		ANIMAL ID																									
		0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
		0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
		0	0	0	0	0	0	0	0	2	2	2	2	2	2	2	2	3	3	3	3	3	3	3	3	3	3
		6	6	6	6	7	7	7	7	2	2	2	2	4	4	4	7	7	7	7	8	8	8	8	8	9	9
		1	2	3	4	1	2	3	4	1	2	3	4	1	2	3	4	1	2	3	4	1	2	3	4	1	2

ALIMENTARY SYSTEM

Esophagus	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+
Gallbladder	+	+	+	+	+	+	+	+	+	+	+	+	M	+	+	+	+	+	+	+	+	+	+	+	+	+	+
Intestine Large, Ascending Colon Goblet Cell, Hyperplasia	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+
Intestine Large, Cecum Hyperplasia, Lymphoid	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+
Intestine Large, Descending Colon	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+
Intestine Large, Rectum	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+
Intestine Large, Transverse Colon Goblet Cell, Hyperplasia	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+
Intestine Small, Duodenum	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+
Intestine Small, Ileum Hyperplasia, Lymphoid	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+
Intestine Small, Jejunum	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+
Liver	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+
Basophilic Focus	X												X		X							X					
Congestion																											
Cyst																											

* .. Total animals with tissue examined microscopically; Total animals with lesion and mean severity grade

+ .. Tissue examined microscopically

X .. Lesion present

I .. Insufficient tissue

M .. Missing tissue

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BLANK .. Not examined microscopically

1-4 .. Lesion qualified as:

1) Minimal 3) Moderate

2) Mild 4) Marked

DAY ON TEST	C57BL/6N XC3H/HEN MTV-NCTR MICE MALE CONTROL WATER																									males (cont...)
	0736	0652	0478	0773	0773	0776	0776	0477	0776	0776	0776	0733	0777	0777	0777	0777	0777	0777	0777	0777	0777	0777	0777	0777	0777	
ANIMAL ID	0006	0006	0006	0006	0006	0006	0006	0006	0006	0006	0006	0006	0006	0006	0006	0006	0006	0006	0006	0006	0006	0006	0006	0006	0006	0006
Deformity																										
Degeneration, Cystic																										
Eosinophilic Focus																										
Fatty Change																										
Infiltration Cellular, Lymphocyte										1																
Inflammation, Chronic Active												2														
Mixed Cell Focus										X																
Vacuolization Cytoplasmic									1																	
Pancreas	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+
Infiltration Cellular, Lymphocyte												3														
Vacuolization Cytoplasmic																										
Acinus, Degeneration							1								1		2									
Salivary Glands	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+
Infiltration Cellular, Lymphocyte	1	1		1	1	1	1	1		1	2		2	1	1	1	1			1	1	1	1	2	1	
Stomach, Forestomach Epithelium, Hyperplasia	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+
Stomach, Glandular Epithelium, Hyperplasia	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+
	1																									

CARDIOVASCULAR SYSTEM

Blood Vessel	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+
Heart	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+
Cardiomyopathy												1														
Inflammation, Chronic Active																										2

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C57BL/6N XC3H/HEN MTV-NCTR MICE MALE CONTROL WATER	DAY ON TEST																								ANIMAL ID	males (cont...)
	0 7 3 6	0 6 9 6	0 5 8 2	0 4 2 8	0 7 3 6	0 7 3 6	0 7 3 6	0 4 5 7	0 7 3 6	0 7 3 6	0 4 3 5	0 7 3 6	0 7 3 6	0 7 3 6	0 4 3 5	0 7 3 6	0 4 5 7	0 7 3 6	0 6 8 2	0 6 4 7	0 6 3 6	0 7 4 8	0 5 3 6	0 7 4 8		
	0 0 0 6 1	0 0 0 6 2	0 0 0 6 3	0 0 0 7 4	0 0 0 7 1	0 0 0 7 2	0 0 0 7 3	0 0 0 7 4	0 0 0 7 1	0 0 0 7 2	0 0 0 7 3	0 0 0 7 4	0 0 0 7 1	0 0 0 7 2	0 0 0 7 3	0 0 0 7 4	0 0 0 7 1	0 0 0 7 2	0 0 0 7 3	0 0 0 7 4	0 0 0 7 1	0 0 0 7 2	0 0 0 7 3	0 0 0 7 4	0 0 0 7 1	

ENDOCRINE SYSTEM

Adrenal Cortex	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+
Accessory Adrenal Cortical Nodule				X																	X				
Mineralization Subcapsular, Hyperplasia	1	2	1	1	1	1	2	2	1		2	1	2	1	1	2	2	1	1	2	1	2	1	1	1
Adrenal Medulla Hyperplasia	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+
Islets, Pancreatic Hyperplasia	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+
Parathyroid Gland Cyst	+	+	+	+	+	+	+	+	+	+	+	M	+	+	M	+	+	+	+	+	+	+	+	+	+
Pituitary Gland Pars Intermedia, Hyperplasia	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+
Thyroid Gland Ectopic Thymus Infiltration Cellular, Lymphocyte Follicle, Degeneration	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+

GENERAL BODY SYSTEM

Tissue NOS

GENITAL SYSTEM

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		0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
DAY ON TEST		7	6	5	4	7	7	7	7	4	7	7	3	7	7	7	7	4	5	7	7	6	6	7
C57BL/6N XC3H/HEN MTV-NCTR MICE MALE		3	9	8	2	3	3	3	3	5	3	3	4	3	3	3	3	9	7	3	3	8	4	3
		6	6	2	8	6	6	6	6	7	6	6	5	6	6	6	6	9	5	6	6	2	7	6
CONTROL WATER		0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
	ANIMAL ID	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
		0	0	0	0	0	0	0	0	2	2	2	2	2	2	2	3	3	3	3	3	3	3	3
		6	6	6	6	7	7	7	2	2	2	2	4	4	4	7	7	8	8	8	8	8	8	9

males
(cont...)

Coagulating Gland
Lumen, Dilatation

Epididymis	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+
Degeneration																							
Hypospermia																							

Preputial Gland	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+
Cyst																							
Degeneration																							
Infiltration Cellular, Lymphocyte																							
Inflammation, Suppurative																							
Inflammation, Chronic Active																							
Duct, Ectasia																							
Fat, Necrosis																							

Prostate	+	+	+	+	+	+	+	+	+	+	M	+	+	+	+	+	+	+	+	+	+	+	+
Infiltration Cellular, Lymphocyte																							

Seminal Vesicle	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+
Inflammation, Chronic Active																							
Lumen, Dilatation																							

Testes	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+
Seminiferous Tubule, Degeneration																							

HEMATOPOIETIC SYSTEM

Bone Marrow	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+
-------------	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---

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DAY ON TEST	C57BL/6N XC3H/HEN MTV-NCTR MICE MALE																								ANIMAL ID	males (cont...)		
	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0				
CONTROL WATER	7	6	5	4	7	7	7	7	4	7	7	3	7	7	7	7	4	5	7	7	6	6	7	5	0			
	3	9	8	2	3	3	3	3	5	3	3	4	3	3	3	3	9	7	3	3	8	4	3	4	0			
	6	6	2	8	6	6	6	6	7	6	6	5	6	6	6	9	5	6	6	2	7	6	8	0				
	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0				
	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0				
	0	0	0	0	0	0	0	0	2	2	2	2	2	2	2	3	3	3	3	3	3	3	3	0				
	6	6	6	6	7	7	7	7	2	2	2	2	4	4	4	7	7	7	7	8	8	8	8	0				
	1	2	3	4	1	2	3	4	1	2	2	3	2	1	2	3	4	1	2	3	4	1	2	0				
Hyperplasia	3	2									3							2					3					
Lymph Node	+							+										+				+						
Axillary, Hyperplasia, Lymphoid																						3						
Inguinal, Hyperplasia, Lymphoid	2																											
Mediastinal, Hyperplasia, Lymphoid								2										3										
Mediastinal, Infiltration Cellular, Plasma Cell																		3										
Renal, Hyperplasia, Lymphoid																												
Lymph Node, Mandibular	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+					
Hyperplasia, Lymphoid				2																			2					
Lymph Node, Mesenteric	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+					
Angiectasis																							2					
Hematopoietic Cell Proliferation											2																	
Hemorrhage								3		2	2				3								2					
Hyperplasia, Lymphoid		2			3	1	3		3	2					2			2		2	2	2	1					
Sinus, Dilatation							3	2							3						3							
Spleen	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+					
Angiectasis																	2											
Hematopoietic Cell Proliferation	2	4		4				3	3		4	4			4				4		4	3	4					
Hyperplasia, Lymphoid	2					2	2	4	2	2				1	2				2		2	2	2					
Thymus	M	M	+	+	+	+	+	M	+	+	+	+	+	+	+	+	+	+	M	+	+	M	+	+				
Atrophy				3								4	3					3		3	4		4	2	3	3		
Hyperplasia, Lymphoid																												

INTEGUMENTARY SYSTEM

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	0 7 3 6	0 6 9 6	0 5 8 2	0 4 3 8	0 7 3 6	0 7 3 6	0 7 3 6	0 4 5 7	0 7 3 6	0 7 3 6	0 4 3 5	0 7 3 6	0 7 3 6	0 7 3 6	0 4 3 6	0 7 3 6	0 4 5 9	0 7 3 6	0 6 8 2	0 6 4 7	0 6 3 6	0 7 3 6	0 5 4 8			
	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0 0 0 0 6 1		

Mammary Gland	M	M	M	M	M	M	M	M	M	M	M	M	M	M	M	M	M	M	M	M	M	M	M
Skin	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+
Inflammation, Suppurative																							
Inflammation, Chronic Active																							
Mineralization																							
Ulcer																							
Epithelium, Hyperplasia																							

MUSCULOSKELETAL SYSTEM

Bone, Femur	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+
Skeletal Muscle																							

NERVOUS SYSTEM

Brain, Brain Stem	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+
Brain, Cerebellum	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+
Brain, Cerebrum	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+
Mineralization	2	2	1		1		1	2					1		1	1	1		1	1	1		2

RESPIRATORY SYSTEM

Lung	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+
Infiltration Cellular, Histiocyte						1	3										4			1			
Inflammation, Chronic Active														1									

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	0736	0658	0542	0773	0773	0773	0773	0477	0773	0773	0373	0773	0773	0773	0773	0773	0475	0773	0766	0667			0754	0754
CONTROL WATER	0000	0000	0000	0000	0000	0000	0000	0000	0000	0000	0000	0000	0000	0000	0000	0000	0000	0000	0000	0000	0000	0000	0000	0000
Nose	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+
Hyaline Droplet						1			1						2	1	1							
Posterior To Upper Incisor, Dysplasia																								
Trachea	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+
SPECIAL SENSES SYSTEM																								
Eye	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+
Harderian Gland	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+
Infiltration Cellular, Lymphocyte																								
URINARY SYSTEM																								
Kidney	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+
Infiltration Cellular, Lymphocyte						1			2												1	2		
Metaplasia, Osseous																								
Nephropathy	1		1		1		1			1	3		1	1	1	1	1		1	2			1	
Urethra																								
Bulbourethral Gland, Dilatation																								
Bulbourethral Gland, Infiltration Cellular, Lymphocyte																								
Urinary Bladder	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+
Infiltration Cellular, Lymphocyte									1															1
Lumen, Dilatation					4																	3		

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	0736	0736	0736	0731	0736	0737	0737	0737	0737	0743	0733	0736	0737	0737	0737	0737	0737	0737	0737	0737	
ANIMAL ID	00392	00339	00334	00357	00355	00355	00355	00355	00355	00355	00356	00366	00366	00366	00388	00388	00388	00388	00388	00388	
	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
	7	7	7	7	7	7	7	7	7	4	3	6	7	7	7	7	7	7	7	7	
	3	3	3	1	3	8	1	3	3	0	7	4	3	3	3	2	3	3	3	3	
	6	6	6	1	6	7	1	6	6	2	2	8	6	6	6	5	6	6	6	6	

ALIMENTARY SYSTEM

Esophagus	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	48
Gallbladder	+	+	+	+	+	+	+	+	+	+	+	+	+	+	A	+	+	+	+	+	+	+	+	+	46
Intestine Large, Ascending Colon Goblet Cell, Hyperplasia	+	+	+	+	+	+	+	+	+	+	+	+	+	+	A	+	+	+	+	+	+	+	+	+	47 2 1.0
Intestine Large, Cecum Hyperplasia, Lymphoid	+	+	+	+	+	+	+	+	+	+	+	+	+	+	A	+	+	+	+	+	+	+	+	+	47 2 2.0
Intestine Large, Descending Colon	+	+	+	+	+	+	+	+	+	+	+	+	+	+	A	+	+	+	+	+	+	+	+	+	47
Intestine Large, Rectum	+	+	+	+	+	+	+	+	+	+	+	+	+	+	A	+	+	+	+	+	+	+	+	+	47
Intestine Large, Transverse Colon Goblet Cell, Hyperplasia	+	+	+	+	+	+	+	+	+	+	+	+	+	+	A	+	+	+	+	+	+	+	+	+	47 4 1.0
Intestine Small, Duodenum	+	+	+	+	+	+	+	+	+	+	+	+	+	+	A	+	+	+	+	+	+	+	+	+	47
Intestine Small, Ileum Hyperplasia, Lymphoid	+	+	+	+	+	+	+	+	+	+	+	+	+	+	A	+	+	+	+	+	+	+	+	+	47 1 2.0
Intestine Small, Jejunum	+	+	+	+	+	+	+	+	+	+	+	+	+	+	A	+	+	+	+	+	+	+	+	+	47
Liver Basophilic Focus Congestion Cyst	+	+	+	+	+	+	+	+	+	+	+	+	+	+	A	+	+	+	+	+	+	+	+	+	47 8 1 1.0 1 2.0

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 2) Mild 4) Marked

TDMS No. 20116 - 04
 Test Type: CHRONIC
 Route: DOSED WATER
 Species/Strain: MICE/B6C3F1/NCTR

P09: NON-NEOPLASTIC LESIONS BY INDIVIDUAL ANIMAL
 Aloe vera whole leaf extract (native)
 CAS Number: ALOEVLEAFEXT

Date Report Requested: 01/15/2010
 Time Report Requested: 14:39:08
 First Dose M/F: 04/19/05 / 04/19/05
 Lab: NCTR

C57BL/6N XC3H/HEN MTV-NCTR MICE MALE CONTROL WATER	DAY ON TEST																				ANIMAL ID	* TOTALS	
	0736	0736	0736	0731	0738	0737	0737	0737	0737	0737	0737	0737	0737	0737	0737	0737	0737	0737	0737	0737			0737
	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	00392	

Deformity					X																		1			
Degeneration, Cystic																								2	1 2.0	
Eosinophilic Focus				X																					1	
Fatty Change																									1 3.0	
Infiltration Cellular, Lymphocyte																									1 1.0	
Inflammation, Chronic Active																									1 2.0	
Mixed Cell Focus									X																3	
Vacuolization Cytoplasmic													1												1 3 1.0	
Pancreas	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	A	+	+	+	+	+	+			47	
Infiltration Cellular, Lymphocyte																									1	2 2.0
Vacuolization Cytoplasmic													1													1 1.0
Acinus, Degeneration																										3 1.3
Salivary Glands	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+			48	
Infiltration Cellular, Lymphocyte	1	1	2	1	2	1	1		1			1	2	1	2		1	2	1	1	2	2			39	1.3
Stomach, Forestomach Epithelium, Hyperplasia	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	A	+	+	+	+	+	+			47	1 2.0
Stomach, Glandular Epithelium, Hyperplasia	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	A	+	+	+	+	+	+			47	1 1.0

CARDIOVASCULAR SYSTEM

Blood Vessel	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+			48	
Heart	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+			48	
Cardiomyopathy									1																	2 1.0
Inflammation, Chronic Active																										1 2.0

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TDMS No. 20116 - 04
 Test Type: CHRONIC
 Route: DOSED WATER
 Species/Strain: MICE/B6C3F1/NCTR

P09: NON-NEOPLASTIC LESIONS BY INDIVIDUAL ANIMAL
 Aloe vera whole leaf extract (native)
 CAS Number: ALOEVLEAFEXT

Date Report Requested: 01/15/2010
 Time Report Requested: 14:39:08
 First Dose M/F: 04/19/05 / 04/19/05
 Lab: NCTR

C57BL/6N XC3H/HEN MTV-NCTR MICE MALE CONTROL WATER	DAY ON TEST																				* TOTALS
	0736	0736	0736	0731	0738	0737	0737	0737	0737	0734	0733	0736	0737	0737	0737	0737	0737	0737	0737	0737	
ANIMAL ID	00392	00393	00394	00395	00397	00398	00399	00400	00401	00402	00403	00404	00405	00406	00407	00408	00409	00410	00411	00412	00413

ENDOCRINE SYSTEM

Adrenal Cortex	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	48
Accessory Adrenal Cortical Nodule														X									3
Mineralization													2										1 2.0
Subcapsular, Hyperplasia	2	2		3	2		2	1	1		1	2	2	2		1	3	2	1	1	1	1	43 1.5
Adrenal Medulla	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	A	+	+	+	+	+	+	47
Hyperplasia	2	1																			2		4 1.8
Islets, Pancreatic	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	A	+	+	+	+	+	+	47
Hyperplasia		1			2		2							3				2					9 1.9
Parathyroid Gland	+	+	+	+	M	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	M	+	44
Cyst																							1 2.0
Pituitary Gland	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	48
Pars Intermedia, Hyperplasia																							1 2.0
Thyroid Gland	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	A	+	+	+	+	+	+	47
Ectopic Thymus						X																	1
Infiltration Cellular, Lymphocyte																							1 1.0
Follicle, Degeneration										2								2	2				6 1.8

GENERAL BODY SYSTEM

Tissue NOS																							1
------------	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	---

GENITAL SYSTEM

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TDMS No. 20116 - 04
 Test Type: CHRONIC
 Route: DOSED WATER
 Species/Strain: MICE/B6C3F1/NCTR

P09: NON-NEOPLASTIC LESIONS BY INDIVIDUAL ANIMAL
 Aloe vera whole leaf extract (native)
 CAS Number: ALOEVLEAFEXT

Date Report Requested: 01/15/2010
 Time Report Requested: 14:39:08
 First Dose M/F: 04/19/05 / 04/19/05
 Lab: NCTR

C57BL/6N XC3H/HEN MTV-NCTR MICE MALE CONTROL WATER	DAY ON TEST																				* TOTALS									
	0736	0736	0736	0731	0738	0771	0777	0777	0777	0743	0736	0767	0777	0777	0777	0777	0777	0777	0777	0777		0777								
ANIMAL ID	00392	00339	00334	00057	00055	00000	00000	00000	00000	00000	00000	00000	00000	00000	00000	00000	00000	00000	00000	00000	00000									
Coagulating Gland Lumen, Dilatation																						+	1	4	1 4.0					
Epididymis Degeneration Hypospermia	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	48	1 2.0	1 4.0				
Preputial Gland Cyst Degeneration Infiltration Cellular, Lymphocyte Inflammation, Suppurative Inflammation, Chronic Active Duct, Ectasia Fat, Necrosis	+	+	+	+	+	2	+	+	+	+	+	+	+	+	A	+	+	+	+	+	+	+	47	4 2.5	15 3.2	3 1.7	2 3.0	1 2.0	3 3.7	1 4.0
Prostate Infiltration Cellular, Lymphocyte	+	+	+	+	+	1	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	47	7 1.0						
Seminal Vesicle Inflammation, Chronic Active Lumen, Dilatation	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	48	1 2.0	5 3.2					
Testes Seminiferous Tubule, Degeneration	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	A	+	+	+	+	+	+	47	4 1.8						
HEMATOPOIETIC SYSTEM																														
Bone Marrow	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	A	+	+	+	+	+	+	47						

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TDMS No. 20116 - 04
 Test Type: CHRONIC
 Route: DOSED WATER
 Species/Strain: MICE/B6C3F1/NCTR

P09: NON-NEOPLASTIC LESIONS BY INDIVIDUAL ANIMAL
 Aloe vera whole leaf extract (native)
 CAS Number: ALOEVLEAFEXT

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 Lab: NCTR

C57BL/6N XC3H/HEN MTV-NCTR MICE MALE CONTROL WATER	DAY ON TEST																				* TOTALS	
	0736	0736	0736	0731	0738	0737	0737	0737	0737	0737	0737	0737	0737	0737	0737	0737	0737	0737	0737	0737		0737
ANIMAL ID	00392	00339	00334	00355	00355	00355	00355	00355	00355	00355	00355	00355	00355	00355	00355	00355	00355	00355	00355	00355	00355	
Hyperplasia	2		4						3													8 2.8
Lymph Node		+	+			+	+		+					+			+					11
Axillary, Hyperplasia, Lymphoid		2				2																3 2.3
Inguinal, Hyperplasia, Lymphoid		2																				2 2.0
Mediastinal, Hyperplasia, Lymphoid																						2 2.5
Mediastinal, Infiltration Cellular, Plasma Cell																						1 3.0
Renal, Hyperplasia, Lymphoid													3									1 3.0
Lymph Node, Mandibular	+	+	+	+	+	+	+	+	M	+	+	+	+	+	+	+	+	+	+	+	+	47
Hyperplasia, Lymphoid			1			2		1		2					1	1					1	9 1.4
Lymph Node, Mesenteric	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	48
Angiectasis	2		4											2							2	5 2.4
Hematopoietic Cell Proliferation																						1 2.0
Hemorrhage								2							2		1				3	2 10 2.2
Hyperplasia, Lymphoid	3	2			2	1	2	2		2	2			3		2		2	2		2	28 2.1
Sinus, Dilatation													2								3	6 2.7
Spleen	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	48
Angiectasis																						1 2.0
Hematopoietic Cell Proliferation	4			4		4	4			3	3	4								3		20 3.6
Hyperplasia, Lymphoid					2				3		2	2		2	2		2	2		3	2	24 2.2
Thymus	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	41
Atrophy	4		2	4	3		4	4					2	2		4				2	4	22 3.2
Hyperplasia, Lymphoid						2						2										2 2.0

INTEGUMENTARY SYSTEM

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TDMS No. 20116 - 04
 Test Type: CHRONIC
 Route: DOSED WATER
 Species/Strain: MICE/B6C3F1/NCTR

P09: NON-NEOPLASTIC LESIONS BY INDIVIDUAL ANIMAL
 Aloe vera whole leaf extract (native)
 CAS Number: ALOEVLEAFEXT

Date Report Requested: 01/15/2010
 Time Report Requested: 14:39:08
 First Dose M/F: 04/19/05 / 04/19/05
 Lab: NCTR

C57BL/6N XC3H/HEN MTV-NCTR MICE MALE CONTROL WATER	DAY ON TEST																				* TOTALS		
	0736	0736	0736	0736	0736	0736	0736	0736	0736	0736	0736	0736	0736	0736	0736	0736	0736	0736	0736	0736		0736	
ANIMAL ID	00392	00393	00394	00395	00396	00397	00398	00399	00400	00401	00402	00403	00404	00405	00406	00407	00408	00409	00410	00411	00412		
Mammary Gland	M	M	M	M	M	M	M	M	M	M	M	M	M	+	M	M	M	M	M	M	M	1	
Skin	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	48	
Inflammation, Suppurative																						1 3.0	
Inflammation, Chronic Active																						1 1.0	
Mineralization																						1 4.0	
Ulcer																						1 4.0	
Epithelium, Hyperplasia																						1 2.0	
MUSCULOSKELETAL SYSTEM																							
Bone, Femur	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	48	
Skeletal Muscle																						1	
NERVOUS SYSTEM																							
Brain, Brain Stem	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	A	+	+	+	+	+	47	
Brain, Cerebellum	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	A	+	+	+	+	+	47	
Brain, Cerebrum	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	A	+	+	+	+	+	47	
Mineralization	1	1		1	1	1					1			2	1		2	2	1		2	1	29 1.3
RESPIRATORY SYSTEM																							
Lung	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	48	
Infiltration Cellular, Histiocyte																					4	5 2.6	
Inflammation, Chronic Active																						1 1.0	

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TDMS No. 20116 - 04
 Test Type: CHRONIC
 Route: DOSED WATER
 Species/Strain: MICE/B6C3F1/NCTR

P09: NON-NEOPLASTIC LESIONS BY INDIVIDUAL ANIMAL

Aloe vera whole leaf extract (native)

CAS Number: ALOEVLEAFEXT

Date Report Requested: 01/15/2010

Time Report Requested: 14:39:08

First Dose M/F: 04/19/05 / 04/19/05

Lab: NCTR

DAY ON TEST	C57BL/6N XC3H/HEN MTV-NCTR MICE MALE																				* TOTALS	
	0736	0736	0736	0731	0738	0731	0736	0736	0736	0736	0736	0736	0736	0736	0736	0736	0736	0736	0736	0736		0736
ANIMAL ID	CONTROL WATER																				* TOTALS	
00392	00339	00334	00357	00355	00355	00355	00355	00355	00355	00355	00355	00355	00355	00355	00355	00355	00355	00355	00355	00355		00355
Nose	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	48
Hyaline Droplet	1																					6 1.2
Posterior To Upper Incisor, Dysplasia				4																		1 4.0
Trachea	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	48
SPECIAL SENSES SYSTEM																						
Eye	+	+	+	+	+	+	+	+	+	+	+	+	+	+	A	+	+	+	+	+	+	47
Harderian Gland	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	48
Infiltration Cellular, Lymphocyte													1									1 1.0
URINARY SYSTEM																						
Kidney	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	48
Infiltration Cellular, Lymphocyte				2	1		1		1	1										2		10 1.4
Metaplasia, Osseous														2							1	2 1.5
Nephropathy		1	1					1				2	1	1		1	2	1	2		2	26 1.3
Urethra																						1
Bulbourethral Gland, Dilatation											4											1 4.0
Bulbourethral Gland, Infiltration Cellular, Lymphocyte											2											1 2.0
Urinary Bladder	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	48
Infiltration Cellular, Lymphocyte														1								3 1.0
Lumen, Dilatation			3																			3 3.3

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DAY ON TEST	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0		
C57BL/6N XC3H/HEN MTV-NCTR	6	7	7	7	7	6	6	7	5	7	4	7	7	0	7	7	7	7	7	3	3	3	3	3	3	6	4	7	6
MICE MALE	8	3	3	3	3	4	5	3	3	3	0	3	3	3	3	3	3	3	3	3	3	0	9	0	5	5			
ALOEWOLLEAF 1.0	9	6	6	6	6	0	1	6	4	6	9	6	6	2	6	6	6	6	6	6	6	6	6	6	6	6	6	6	6
ANIMAL ID	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
	2	2	2	2	4	4	4	4	4	4	4	4	6	6	6	6	6	6	6	6	6	6	6	6	6	6	6	6	6
	6	6	6	6	5	5	5	5	6	6	6	6	2	2	2	4	4	4	4	5	5	5	5	5	5	5	5	5	5
	1	2	3	4	1	2	3	4	1	2	3	4	1	2	3	4	1	2	3	4	1	2	3	4	1	2	3	4	1

males (cont...)

ALIMENTARY SYSTEM

Esophagus	+	+	+	+	+	+	+	+	M	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+
Gallbladder	+	+	+	+	+	+	M	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+
Intestine Large, Ascending Colon	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+
Goblet Cell, Hyperplasia				2		1			1	1	2		1			1			1			1			1			
Intestine Large, Cecum	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+
Intestine Large, Descending Colon	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+
Goblet Cell, Hyperplasia				2					1	1	1					1			1			1			1			
Intestine Large, Rectum	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+
Intestine Large, Transverse Colon	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+
Goblet Cell, Hyperplasia				2					1	1	2		1			1			1			1			1			
Intestine Small, Duodenum	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+
Intestine Small, Ileum	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+
Intestine Small, Jejunum	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+
Liver	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+
Basophilic Focus					X															X								
Infiltration Cellular, Lymphocyte																												
Inflammation, Chronic Active																												
Necrosis																												

* .. Total animals with tissue examined microscopically; Total animals with lesion and mean severity grade

+ .. Tissue examined microscopically

X .. Lesion present

I .. Insufficient tissue

M .. Missing tissue

A .. Autolysis precludes evaluation

BLANK .. Not examined microscopically

1-4 .. Lesion qualified as:

1) Minimal 3) Moderate

2) Mild 4) Marked

TDMS No. 20116 - 04
 Test Type: CHRONIC
 Route: DOSED WATER
 Species/Strain: MICE/B6C3F1/NCTR

P09: NON-NEOPLASTIC LESIONS BY INDIVIDUAL ANIMAL
 Aloe vera whole leaf extract (native)
 CAS Number: ALOEVLEAFEXT

Date Report Requested: 01/15/2010
 Time Report Requested: 14:39:08
 First Dose M/F: 04/19/05 / 04/19/05
 Lab: NCTR

C57BL/6N XC3H/HEN MTV-NCTR MICE MALE ALOEWHOLLEAF 1.0	DAY ON TEST																								ANIMAL ID	males (cont...)
	0689	0736	0776	0776	0776	0666	0666	0776	0557	0774	0777	0000	0777	0773	0773	0773	0773	0773	0773	0773	0664	0777	0667	0667		
	0026	0022	0022	0022	0044	0044	0044	0044	0044	0044	0044	0066	0066	0066	0066	0066	0066	0066	0066	0066	0055	0055	0055	0066		

Tension Lipidosis					2								1		2									1
Thrombus					4																			
Vacuolization Cytoplasmic																								1
Mesentery																								+
Fat, Necrosis																								4
Pancreas	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	
Infiltration Cellular, Lymphocyte												1											1	
Vacuolization Cytoplasmic					1							1												
Acinus, Degeneration								2															2	
Salivary Glands	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	
Infiltration Cellular, Lymphocyte					2	1	1				1	1			1	1	2			1	2	2	1	1
Stomach, Forestomach	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	
Stomach, Glandular	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	
Epithelium, Hyperplasia																1								

CARDIOVASCULAR SYSTEM

Blood Vessel	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+
Heart	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+

ENDOCRINE SYSTEM

Adrenal Cortex	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+
Hypertrophy																							2

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 M .. Missing tissue
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 BLANK .. Not examined microscopically
 1-4 .. Lesion qualified as:
 1) Minimal 3) Moderate
 2) Mild 4) Marked

TDMS No. 20116 - 04
 Test Type: CHRONIC
 Route: DOSED WATER
 Species/Strain: MICE/B6C3F1/NCTR

P09: NON-NEOPLASTIC LESIONS BY INDIVIDUAL ANIMAL
 Aloe vera whole leaf extract (native)
 CAS Number: ALOEVLEAFEXT

Date Report Requested: 01/15/2010
 Time Report Requested: 14:39:08
 First Dose M/F: 04/19/05 / 04/19/05
 Lab: NCTR

DAY ON TEST	C57BL/6N XC3H/HEN MTV-NCTR MICE MALE ALOEWHOLLEAF 1.0																								males (cont...)		
	ANIMAL ID	0689	0736	0773	0773	0776	0776	0777	0775	0774	0777	0777	0770	0777	0773	0773	0773	0773	0773	0773	0773	0773	0773	0773			
Subcapsular, Hyperplasia		1	1	2	2	1	2		2	1		1	3			1	2	3	2		2	1	1	1	2	1	
Adrenal Medulla Hyperplasia		+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	
Islets, Pancreatic Hyperplasia		+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	
Parathyroid Gland		+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	M	+	+	
Pituitary Gland Pars Distalis, Cyst		+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	
Thyroid Gland Cyst		+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	
Infiltration Cellular, Lymphocyte Follicle, Degeneration						1																					
Follicular Cell, Hyperplasia					1		2												1							1	
GENERAL BODY SYSTEM																											
Tissue NOS																											+
GENITAL SYSTEM																											
Coagulating Gland																											+
Epididymis Hypospermia		+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+
Infiltration Cellular, Lymphocyte						2																					

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 + .. Tissue examined microscopically
 X .. Lesion present
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1-4 .. Lesion qualified as:
 1) Minimal 3) Moderate
 2) Mild 4) Marked

TDMS No. 20116 - 04
 Test Type: CHRONIC
 Route: DOSED WATER
 Species/Strain: MICE/B6C3F1/NCTR

P09: NON-NEOPLASTIC LESIONS BY INDIVIDUAL ANIMAL
 Aloe vera whole leaf extract (native)
 CAS Number: ALOEVLEAFEXT

Date Report Requested: 01/15/2010
 Time Report Requested: 14:39:08
 First Dose M/F: 04/19/05 / 04/19/05
 Lab: NCTR

DAY ON TEST	C57BL/6N XC3H/HEN MTV-NCTR MICE MALE																								ANIMAL ID	males (cont...)	
	0689	0736	0773	0773	0773	0660	0661	0753	0534	0746	0773	0773	0002	0773	0773	0773	0773	0773	0773	0660	0661	0490	0773	0660			0661
	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0022661	

Fibrosis																										
Inflammation, Suppurative																										
Inflammation, Chronic Active															1											1
Mineralization																										
Epithelium, Hyperplasia																										2

MUSCULOSKELETAL SYSTEM

Bone, Femur	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	
Skeletal Muscle																										+

NERVOUS SYSTEM

Brain, Brain Stem	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+
Brain, Cerebellum	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+
Brain, Cerebrum	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+
Mineralization				2		1						2	1	1	1		1			2	1	1	1		

RESPIRATORY SYSTEM

Lung	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	
Congestion																										
Thrombus				1																						
Alveolar Epithelium, Hyperplasia														4					3						2	
Nose	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	
Hyaline Droplet				1	2		2	2	2	2									1	1	1	1			1	2

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 2) Mild 4) Marked

TDMS No. 20116 - 04
 Test Type: CHRONIC
 Route: DOSED WATER
 Species/Strain: MICE/B6C3F1/NCTR

P09: NON-NEOPLASTIC LESIONS BY INDIVIDUAL ANIMAL
 Aloe vera whole leaf extract (native)
 CAS Number: ALOEVLEAFEXT

Date Report Requested: 01/15/2010
 Time Report Requested: 14:39:08
 First Dose M/F: 04/19/05 / 04/19/05
 Lab: NCTR

C57BL/6N XC3H/HEN MTV-NCTR MICE MALE ALOEWHOLLEAF 1.0	DAY ON TEST																								males (cont...)
	0689	0736	0776	0776	0776	0660	0661	0776	0534	0776	0439	0776	0776	0002	0776	0776	0776	0776	0776	0776	0666	0447	0776	0665	
ANIMAL ID	0026	0022	0022	0022	0044	0044	0044	0044	0044	0044	0044	0066	0066	0066	0066	0066	0066	0066	0066	0066	0066	0066	0066	0066	

Trachea + + + + + + + + + + + + + + + + + + + + + + + +

SPECIAL SENSES SYSTEM

Eye + + + + + + + + + + + + + + + + + + + + + + + +
 Cornea, Hyperplasia 2
 Cornea, Inflammation, Chronic Active 1

Harderian Gland + + + + + + + + + + + + + + + + + + + + + + + +
 Infiltration Cellular, Lymphocyte 2
 Acinus, Degeneration 3

URINARY SYSTEM

Kidney + + + + + + + + + + + + + + + + + + + + + + + +
 Cyst
 Infiltration Cellular, Lymphocyte 1 2 2 1 1 1 1 1 1 1
 Nephropathy 2
 Pelvis, Dilatation 2

Urinary Bladder + + + + + + + + + + + + + + + + + + + + + + + +
 Infiltration Cellular, Lymphocyte 1
 Lumen, Dilatation

* .. Total animals with tissue examined microscopically; Total animals with lesion and mean severity grade
 + .. Tissue examined microscopically M .. Missing tissue
 X .. Lesion present A .. Autolysis precludes evaluation
 I .. Insufficient tissue BLANK .. Not examined microscopically
 1-4 .. Lesion qualified as:
 1) Minimal 3) Moderate
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TDMS No. 20116 - 04
 Test Type: CHRONIC
 Route: DOSED WATER
 Species/Strain: MICE/B6C3F1/NCTR

P09: NON-NEOPLASTIC LESIONS BY INDIVIDUAL ANIMAL
 Aloe vera whole leaf extract (native)
 CAS Number: ALOEVLEAFEXT

Date Report Requested: 01/15/2010
 Time Report Requested: 14:39:08
 First Dose M/F: 04/19/05 / 04/19/05
 Lab: NCTR

C57BL/6N XC3H/HEN MTV-NCTR MICE MALE ALOEWHOLLEAF 1.0	DAY ON TEST																				* TOTALS	
	0736	0682	0743	0743	0743	0743	0743	0541	0695	0704	0706	0706	0706	0706	0706	0706	0706	0706	0706	0706		0706
ANIMAL ID	006663	006674	006671	006672	006673	006674	006678	006682	006683	006684	006689	006692	006693	006694	006699	006701	006702	006703	006704	006709	006712	
	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	

ALIMENTARY SYSTEM

Esophagus	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	46			
Gallbladder	+	+	+	+	+	+	+	+	+	+	+	+	+	+	M	A	A	+	+	+	+	43			
Intestine Large, Ascending Colon Goblet Cell, Hyperplasia	+	+	+	+	+	+	+	+	+	+	+	+	+	+	A	A	A	+	+	+	+	44	16	1.3	
Intestine Large, Cecum	+	+	+	+	+	+	+	+	+	+	+	+	+	+	A	A	A	+	+	+	+	44			
Intestine Large, Descending Colon Goblet Cell, Hyperplasia	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	A	A	A	+	+	+	+	44	7	1.3
Intestine Large, Rectum	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	A	A	A	+	+	+	+	44		
Intestine Large, Transverse Colon Goblet Cell, Hyperplasia	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	A	A	A	+	+	+	+	44	14	1.4
Intestine Small, Duodenum	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	A	A	A	+	+	+	+	44		
Intestine Small, Ileum	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	A	A	A	+	+	+	+	44		
Intestine Small, Jejunum	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	A	A	A	+	+	+	+	44		
Liver	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	A	+	+	+	+	46		
Basophilic Focus				X	X																X	X	6		
Infiltration Cellular, Lymphocyte																							1	1.0	
Inflammation, Chronic Active																					1		1	1.0	
Necrosis																						4	1	4.0	

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TDMS No. 20116 - 04
 Test Type: CHRONIC
 Route: DOSED WATER
 Species/Strain: MICE/B6C3F1/NCTR

P09: NON-NEOPLASTIC LESIONS BY INDIVIDUAL ANIMAL
 Aloe vera whole leaf extract (native)
 CAS Number: ALOEVLEAFEXT

Date Report Requested: 01/15/2010
 Time Report Requested: 14:39:08
 First Dose M/F: 04/19/05 / 04/19/05
 Lab: NCTR

C57BL/6N XC3H/HEN MTV-NCTR MICE MALE ALOEWHOLLEAF 1.0	DAY ON TEST																				* TOTALS			
	0736	0822	0443	0773	0773	0773	0773	0541	0695	0774	0776	0676	0776	0776	0676	0776	0776	0776	0776	0776		0776		
ANIMAL ID	006663	006674	006671	006672	006673	006674	006681	006682	006683	006684	006685	006686	006687	006688	006689	006690	006691	006692	006693	006694	006695			
Tension Lipidosis			2			1															1	7	1.4	
Thrombus																						1	1	4.0
Vacuolization Cytoplasmic			1																			2	2	1.0
Mesentery																							4	
Fat, Necrosis																							4	3.8
Pancreas																							46	
Infiltration Cellular, Lymphocyte																							3	1.0
Vacuolization Cytoplasmic																							2	1.0
Acinus, Degeneration																							2	2.0
Salivary Glands																							45	
Infiltration Cellular, Lymphocyte																							31	1.4
Stomach, Forestomach																							45	
Stomach, Glandular Epithelium, Hyperplasia																							44	1.5
CARDIOVASCULAR SYSTEM																								
Blood Vessel																							47	
Heart																							47	
ENDOCRINE SYSTEM																								
Adrenal Cortex Hypertrophy																							44	2.0

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TDMS No. 20116 - 04
 Test Type: CHRONIC
 Route: DOSED WATER
 Species/Strain: MICE/B6C3F1/NCTR

P09: NON-NEOPLASTIC LESIONS BY INDIVIDUAL ANIMAL
 Aloe vera whole leaf extract (native)
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 Lab: NCTR

C57BL/6N XC3H/HEN MTV-NCTR MICE MALE ALOEWHOLLEAF 1.0	DAY ON TEST																				* TOTALS					
	0736	0738	0744	0744	0744	0744	0744	0750	0756	0767	0767	0766	0777	0777	0776	0777	0777	0773	0773	0773		0773				
ANIMAL ID	006663	006674	006671	006672	006673	006674	006688	006688	006688	006689	006699	006699	006699	006699	006699	006699	006699	006699	006699	006699	006699					
Subcapsular, Hyperplasia	1	1		1	1	2		1	1	1	2	1			1			1	1	2		34	1.4			
Adrenal Medulla Hyperplasia	+	+	+	+	+	+	+	+	+	+	+	+	+	+	A	A	A	+	+	+	+	44	2	2.5		
Islets, Pancreatic Hyperplasia	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	A	+	+	+	+	46	3	1.7	
Parathyroid Gland	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	46				
Pituitary Gland Pars Distalis, Cyst	+	+	+	+	+	+	+	M	+	+	+	+	+	+	+	+	+	A	+	+	+	+	45	1	1.0	
Thyroid Gland Cyst	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	A	+	+	+	+	46	1	2.0	
Infiltration Cellular, Lymphocyte Follicle, Degeneration			1			1						1											3	6	1.0	1.3
Follicular Cell, Hyperplasia											2												1		2.0	
GENERAL BODY SYSTEM																										
Tissue NOS																							1			
GENITAL SYSTEM																										
Coagulating Gland																							1			
Epididymis Hypospermia	+	+	+	+	+	+	+	+	+	+	+	+	+	+	A	A	A	+	+	+	+	44	2	2.0		
Infiltration Cellular, Lymphocyte											2									2			2		2.0	

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TDMS No. 20116 - 04
 Test Type: CHRONIC
 Route: DOSED WATER
 Species/Strain: MICE/B6C3F1/NCTR

P09: NON-NEOPLASTIC LESIONS BY INDIVIDUAL ANIMAL
 Aloe vera whole leaf extract (native)
 CAS Number: ALOEVLEAFEXT

Date Report Requested: 01/15/2010
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 First Dose M/F: 04/19/05 / 04/19/05
 Lab: NCTR

DAY ON TEST	C57BL/6N XC3H/HEN MTV-NCTR MICE MALE																				* TOTALS
	0736	0822	0743	0744	0743	0743	0740	0541	0695	0704	0706	0666	0706	0706	0706	0673	0703	0703	0703	0703	
ALOEWHOLLEAF 1.0	ANIMAL ID																				* TOTALS
	006663	006671	006672	006673	006674	006678	006681	006682	006683	006684	006688	006688	006688	006688	006699	006699	006699	006699	006699	006699	
Spermatocele	2																				1 2.0
Penis																					1
Inflammation, Chronic Active																					1 3.0
Necrosis																					1 3.0
Ulcer																					1 2.0
Preputial Gland																					44
Cyst	4																				6 2.8
Degeneration	2																				11 2.6
Infiltration Cellular, Lymphocyte	2																				4 1.8
Inflammation, Suppurative	4 2																				6 2.3
Inflammation, Chronic Active	1																				4 2.3
Duct, Ectasia	4																				6 2.8
Prostate																					44
Infiltration Cellular, Lymphocyte	1																				7 1.0
Seminal Vesicle																					44
Infiltration Cellular, Lymphocyte																					1 1.0
Lumen, Dilatation	2																				4 2.3
Testes																					44
Interstitial Cell, Hyperplasia	2																				1 2.0
Seminiferous Tubule, Degeneration	3																				4 3.3
HEMATOPOIETIC SYSTEM																					
Bone Marrow																					45
Hyperplasia	3																				9 2.7

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TDMS No. 20116 - 04
 Test Type: CHRONIC
 Route: DOSED WATER
 Species/Strain: MICE/B6C3F1/NCTR

P09: NON-NEOPLASTIC LESIONS BY INDIVIDUAL ANIMAL

Aloe vera whole leaf extract (native)

CAS Number: ALOEVLEAFEXT

Date Report Requested: 01/15/2010

Time Report Requested: 14:39:08

First Dose M/F: 04/19/05 / 04/19/05

Lab: NCTR

DAY ON TEST	C57BL/6N XC3H/HEN MTV-NCTR MICE MALE																				ANIMAL ID	
	0736	0682	0743	0744	0744	0743	0740	0541	0695	0744	0766	0773	0773	0773	0773	0773	0773	0773	0773	0773		0773
	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	006636
	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	006636
	6	6	6	6	6	6	6	6	6	8	8	8	8	9	9	9	9	9	9	9	9	667733
	3	4	1	2	3	4	1	2	3	4	1	2	3	4	1	2	3	4	1	2	3	4
																					* TOTALS	

Lymph Node																					5
Inguinal, Infiltration Cellular, Plasma Cell																					1 2.0
Lumbar, Hyperplasia, Lymphoid																					1 1.0
Lymph Node, Mandibular																					44
Hyperplasia, Lymphoid																					5 2.0
Infiltration Cellular, Plasma Cell																					1 2.0
Pigmentation																					1 2.0
Lymph Node, Mesenteric																					45
Angiectasis																					1 2.0
Hemorrhage																					13 2.2
Hyperplasia, Lymphoid																					17 2.0
Infiltration Cellular, Polymorphonuclear																					1 3.0
Thrombus																					1 2.0
Sinus, Dilatation																					2 3.0
Spleen																					45
Hematopoietic Cell Proliferation																					15 3.7
Hyperplasia, Lymphoid																					21 2.1
Thymus																					39
Atrophy																					19 2.9
Hyperplasia, Lymphoid																					1 1.0

INTEGUMENTARY SYSTEM

Mammary Gland	M	M	M	M	M	M	M	M	M	M	M	M	M	M	M	M	M	M	M	M	M	0
Skin	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	47

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 + .. Tissue examined microscopically
 X .. Lesion present
 I .. Insufficient tissue
 M .. Missing tissue
 A .. Autolysis precludes evaluation
 BLANK .. Not examined microscopically
 1-4 .. Lesion qualified as:
 1) Minimal 3) Moderate
 2) Mild 4) Marked

TDMS No. 20116 - 04
 Test Type: CHRONIC
 Route: DOSED WATER
 Species/Strain: MICE/B6C3F1/NCTR

P09: NON-NEOPLASTIC LESIONS BY INDIVIDUAL ANIMAL

Aloe vera whole leaf extract (native)

CAS Number: ALOEVLEAFEXT

Date Report Requested: 01/15/2010

Time Report Requested: 14:39:08

First Dose M/F: 04/19/05 / 04/19/05

Lab: NCTR

C57BL/6N XC3H/HEN MTV-NCTR MICE MALE ALOEWHOLLEAF 1.0	DAY ON TEST																				* TOTALS
	0736	0842	0743	0743	0773	0773	0773	0564	0665	0774	0776	0666	0776	0776	0666	0776	0666	0776	0776	0776	
ANIMAL ID	006663	006674	006671	006672	006673	006674	006678	006682	006683	006684	006689	006692	006693	006694	006691	006692	006693	006694	006691	006692	

Fibrosis	3																				1	3.0	
Inflammation, Suppurative	1			1																		2	1.0
Inflammation, Chronic Active		1																				3	1.0
Mineralization					2																	1	2.0
Epithelium, Hyperplasia	2	2		2														1				6	1.8

MUSCULOSKELETAL SYSTEM

Bone, Femur	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	47
Skeletal Muscle																							1

NERVOUS SYSTEM

Brain, Brain Stem	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	A	+	+	+	+	46	
Brain, Cerebellum	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	A	+	+	+	+	46	
Brain, Cerebrum	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	A	+	+	+	+	46	
Mineralization	1		1	1	1		1		1	1	1	1		1				1		1	1	24	
																							1.1

RESPIRATORY SYSTEM

Lung	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	47	
Congestion				4																		1	
Thrombus																						1	
Alveolar Epithelium, Hyperplasia						2							2									5	
																							2.6
Nose	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	47	
Hyaline Droplet	2	3	3	3	3	2	1	2	1	1	2		2	2	2	2	2	2	2	2	1	1	
																							31
																							1.8

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 1) Minimal 3) Moderate
 2) Mild 4) Marked

TDMS No. 20116 - 04
 Test Type: CHRONIC
 Route: DOSED WATER
 Species/Strain: MICE/B6C3F1/NCTR

P09: NON-NEOPLASTIC LESIONS BY INDIVIDUAL ANIMAL

Aloe vera whole leaf extract (native)

CAS Number: ALOEVLEAFEXT

Date Report Requested: 01/15/2010

Time Report Requested: 14:39:08

First Dose M/F: 04/19/05 / 04/19/05

Lab: NCTR

C57BL/6N XC3H/HEN MTV-NCTR MICE MALE ALOEWHOLLEAF 1.0	DAY ON TEST																				* TOTALS		
	0736	082	074	073	073	073	073	051	065	074	076	077	076	076	076	076	076	076	076	076		076	
ANIMAL ID	0063	0064	0067	0068	0069	0070	0071	0072	0073	0074	0075	0076	0077	0078	0079	0080	0081	0082	0083	0084	0085		
Trachea	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	47	
SPECIAL SENSES SYSTEM																							
Eye	+	+	+	+	M	+	+	+	+	+	+	+	+	+	+	A	A	A	+	+	+	+	43
Cornea, Hyperplasia																							1 2.0
Cornea, Inflammation, Chronic Active																							1 1.0
Harderian Gland	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	A	A	A	+	+	+	+	44
Infiltration Cellular, Lymphocyte																							2 2.0
Acinus, Degeneration																							1 3.0
URINARY SYSTEM																							
Kidney	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	A	A	+	+	+	+	+	45
Cyst																							3 2.7
Infiltration Cellular, Lymphocyte																							8 1.4
Nephropathy																							18 1.2
Pelvis, Dilatation																							1 2.0
Urinary Bladder	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	A	A	+	+	+	+	45
Infiltration Cellular, Lymphocyte																							2 1.0
Lumen, Dilatation																							1 4.0

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TDMS No. 20116 - 04
 Test Type: CHRONIC
 Route: DOSED WATER
 Species/Strain: MICE/B6C3F1/NCTR

P09: NON-NEOPLASTIC LESIONS BY INDIVIDUAL ANIMAL
 Aloe vera whole leaf extract (native)
 CAS Number: ALOEVLEAFEXT

Date Report Requested: 01/15/2010
 Time Report Requested: 14:39:08
 First Dose M/F: 04/19/05 / 04/19/05
 Lab: NCTR

C57BL/6N XC3H/HEN MTV-NCTR MICE MALE ALOEWHOLLEAF 2.0	DAY ON TEST																									males (cont...)
	0736	0736	0736	0731	0733	0722	0723	0729	0716	0706	0706	0706	0706	0706	0706	0706	0706	0706	0706	0706	0706	0706	0706	0706	0706	
ANIMAL ID	00091	00092	00093	00094	00090	00092	00093	00094	00091	00092	00093	00094	00091	00092	00093	00094	00091	00092	00093	00094	00091	00092	00093	00094	00091	

ALIMENTARY SYSTEM

Esophagus	+	+	+	+	+	+	+	+	+	+	+	+	+	+	M	+	+	+	+	+	+	+	+	+	+
Gallbladder	+	+	+	+	+	+	+	M	+	+	+	+	+	A	+	+	+	+	+	+	+	+	+	+	+
Intestine Large, Ascending Colon Goblet Cell, Hyperplasia	+	+	+	+	+	+	+	A	+	+	+	+	+	A	+	+	+	+	+	+	+	+	+	+	+
Intestine Large, Cecum	+	+	+	+	+	+	+	A	+	+	+	+	+	A	+	+	+	+	+	+	+	+	+	+	A
Intestine Large, Descending Colon Goblet Cell, Hyperplasia	+	+	+	+	+	+	+	A	+	+	+	+	+	A	+	+	+	+	+	+	+	+	+	+	+
Intestine Large, Rectum	+	+	+	+	+	+	+	A	+	+	+	+	+	A	+	+	+	+	+	+	+	+	+	+	+
Intestine Large, Transverse Colon Goblet Cell, Hyperplasia	+	+	+	+	+	+	+	A	+	+	+	+	+	A	+	+	+	+	+	+	+	+	+	+	+
Intestine Small, Duodenum	+	+	+	+	+	+	+	A	+	+	+	+	+	A	+	+	+	+	+	+	+	+	+	+	A
Intestine Small, Ileum	+	+	+	+	+	+	+	A	+	+	+	+	+	A	+	+	+	+	+	+	+	+	+	+	+
Intestine Small, Jejunum Hyperplasia, Lymphoid	+	+	+	+	+	+	+	A	+	M	+	+	+	A	+	+	+	+	+	+	+	+	+	+	A
Liver Basophilic Focus Infiltration Cellular, Lymphocyte Inflammation, Chronic Active	+	+	+	+	+	+	+	+	+	+	+	+	+	A	+	+	+	+	+	+	+	+	+	+	+

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TDMS No. 20116 - 04
 Test Type: CHRONIC
 Route: DOSED WATER
 Species/Strain: MICE/B6C3F1/NCTR

P09: NON-NEOPLASTIC LESIONS BY INDIVIDUAL ANIMAL

Aloe vera whole leaf extract (native)

CAS Number: ALOEVLEAFEXT

Date Report Requested: 01/15/2010

Time Report Requested: 14:39:08

First Dose M/F: 04/19/05 / 04/19/05

Lab: NCTR

C57BL/6N XC3H/HEN MTV-NCTR MICE MALE ALOEWHOLLEAF 2.0	DAY ON TEST																									ANIMAL ID	males (cont...)
	0 7 3 6	0 7 3 6	0 7 3 6	0 7 1 6	0 7 3 6	0 7 2 0	0 5 6 2	0 6 3 6	0 6 9 8	0 6 1 5	0 6 6 6	0 4 3 2	0 5 1 0	0 7 7 8	0 5 6 4	0 7 3 6	0 7 3 6	0 6 0 7	0 7 4 6	0 6 3 6	0 7 3 6	0 6 9 7	0 7 3 6	0 5 9 2	0 5 3 8		
	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
	0	0	0	0	1	1	1	1	1	1	1	1	1	3	3	3	3	4	4	4	4	4	4	4	4	0	
	9	9	9	9	0	0	0	0	1	1	1	1	1	0	0	0	0	1	1	1	1	1	1	1	1	0	
	1	2	3	4	1	2	3	4	1	2	3	4	1	2	3	4	1	2	3	4	1	2	3	4	1	0	

Necrosis
 Tension Lipidosis
 Vacuolization Cytoplasmic

1 1 1

Mesentery
 Fat, Necrosis

Pancreas
 Infiltration Cellular, Lymphocyte
 Vacuolization Cytoplasmic
 Duct, Dilatation

+ + + + + + + + A + + + + + + + + + + + + +
 1
 4

Salivary Glands
 Infiltration Cellular, Lymphocyte

+ + + + + + + + A + + + + + A + + + + + + + + + +
 2 1 1 1 1 1 1 1 2 1 2 2 1 1

Stomach, Forestomach

+ + + + + + + + A + + + + + A + + + + + + + + + +

Stomach, Glandular
 Inflammation, Chronic Active
 Epithelium, Hyperplasia

+ + + + + + + + A + + + + + A + + + + + + + + + +
 1
 1 3

CARDIOVASCULAR SYSTEM

Blood Vessel

+ + + + + + + + + + + + + A + + + + + + + + + +

Heart
 Cardiomyopathy

+ + + + + + + + + + + + + A + + + + + + + + + +
 1
 1

ENDOCRINE SYSTEM

Adrenal Cortex

+ + + + + + + + A + + + + + A + + + + + + + + + +

* .. Total animals with tissue examined microscopically; Total animals with lesion and mean severity grade
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 X .. Lesion present A .. Autolysis precludes evaluation
 I .. Insufficient tissue BLANK .. Not examined microscopically

1-4 .. Lesion qualified as:
 1) Minimal 3) Moderate
 2) Mild 4) Marked

TDMS No. 20116 - 04
 Test Type: CHRONIC
 Route: DOSED WATER
 Species/Strain: MICE/B6C3F1/NCTR

P09: NON-NEOPLASTIC LESIONS BY INDIVIDUAL ANIMAL
 Aloe vera whole leaf extract (native)
 CAS Number: ALOEVLEAFEXT

Date Report Requested: 01/15/2010
 Time Report Requested: 14:39:08
 First Dose M/F: 04/19/05 / 04/19/05
 Lab: NCTR

| C57BL/6N XC3H/HEN MTV-NCTR
MICE MALE
ALOEWHOLLEAF 2.0 | DAY ON TEST | | | | | | | | | | | | | | | | | | | | | | | | males
(cont...) |
|-------------------------------------------------------------|-------------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|--------------------|
| | 0736 | 0736 | 0736 | 0731 | 0733 | 0732 | 0733 | 0739 | 0731 | 0736 | 0738 | 0735 | 0737 | 0737 | 0735 | 0737 | 0737 | 0736 | 0737 | 0736 | 0737 | 0736 | 0737 | 0735 | |
| ANIMAL ID | 00091 | 00092 | 00093 | 00094 | 00090 | 00091 | 00092 | 00093 | 00094 | 00091 | 00092 | 00093 | 00094 | 00090 | 00091 | 00092 | 00093 | 00094 | 00091 | 00092 | 00093 | 00094 | 00090 | 00091 | 00092 |

Hematopoietic Cell Proliferation
Subcapsular, Hyperplasia

1 1 1 1 1 1 1 1 1 1 2 1 2 1 2 2 2

Adrenal Medulla
Hyperplasia

+ + + + + + + A + + + + + A + + + + + + + +
2 1 4 2

Islets, Pancreatic
Hyperplasia

+ + + + + + + A + + + + + A + + + + + + + +

Parathyroid Gland
Infiltration Cellular, Lymphocyte

+ + + + + + + M + + + + M M + M + + + + + + +
1

Pituitary Gland
Pars Distalis, Cyst

+ + + + + + + M + + + + + + + + + + + + + M
2

Thyroid Gland
Infiltration Cellular, Lymphocyte
Inflammation, Chronic Active
Follicle, Degeneration

+ + + + + + + A + + + + + + + + + + + + + + +
2 2

GENERAL BODY SYSTEM

Tissue NOS
Cyst

+ + + + + + + + + + +

GENITAL SYSTEM

Epididymis
Atrophy
Fibrosis
Hypospermia

+ + + + + + + A + + + + + A + + + + + + + + +

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TDMS No. 20116 - 04
 Test Type: CHRONIC
 Route: DOSED WATER
 Species/Strain: MICE/B6C3F1/NCTR

P09: NON-NEOPLASTIC LESIONS BY INDIVIDUAL ANIMAL
 Aloe vera whole leaf extract (native)
 CAS Number: ALOEVLEAFEXT

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 First Dose M/F: 04/19/05 / 04/19/05
 Lab: NCTR

| C57BL/6N XC3H/HEN MTV-NCTR
MICE MALE
ALOEWHOLLEAF 2.0 | DAY ON TEST | | | | | | | | | | | | | | | | | | | | | | | | males
(cont...) | |
|-------------------------------------------------------------|-------------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|--------------------|-------|
| | 0736 | 0736 | 0736 | 0731 | 0733 | 0752 | 0766 | 0766 | 0766 | 0766 | 0766 | 0745 | 0755 | 0771 | 0771 | 0755 | 0773 | 0773 | 0766 | 0777 | 0766 | 0777 | 0766 | 0777 | | 0755 |
| ANIMAL ID | 00091 | 00092 | 00093 | 00094 | 00090 | 00092 | 00093 | 00094 | 00091 | 00092 | 00093 | 00094 | 00091 | 00092 | 00093 | 00094 | 00091 | 00092 | 00093 | 00094 | 00091 | 00092 | 00093 | 00094 | 00091 | 00092 |

Spermatocele

| | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|-----------------------------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| Preputial Gland Cyst | + | + | + | + | + | + | + | + | A | + | + | + | + | + | A | + | + | + | + | + | + | + | + | + | + | + | |
| Degeneration | | 2 | | | | | | | | | | | | 2 | | 3 | | | | | | | | | 4 | 4 | 3 |
| Infiltration Cellular, Lymphocyte | | | | | | | | | | 1 | | | | | | | | | | 3 | 3 | | | | | | |
| Inflammation, Suppurative | | | | | | | | | | | | | | | | | | | | | 3 | | | | | | |
| Inflammation, Chronic Active | | | | | | 3 | | | | | | | 2 | | | | | | | | | | | | | | |
| Bilateral, Cyst | | | | | | | | | 3 | | | | | | | | | | | | | | | | | | |
| Duct, Ectasia | | | | | | 3 | | | | | | | | | | | | | | | | | | | | | |
| Fat, Necrosis | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Prostate | + | + | + | + | + | + | + | + | A | + | + | + | + | + | A | + | + | + | + | + | + | + | + | + | + | + | |
| Infiltration Cellular, Lymphocyte | | | | | 1 | | | | | 1 | | | | | | | | | | 1 | 1 | | | | | | |
| Inflammation, Suppurative | | | | | | | | | | | | | | | | | | | | | | | | | | 2 | |
| Seminal Vesicle | + | + | + | + | + | + | + | + | A | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | |
| Atrophy | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Inflammation, Suppurative | | | | | | | | | | | | | | | | | | | | | | | | | | 4 | |
| Lumen, Dilatation | | | | | | | | | | | | | | | 4 | | | | | | 2 | 2 | | | | | |
| Testes | + | + | + | + | + | + | + | + | A | + | + | + | + | + | A | + | + | + | + | + | + | + | + | + | + | + | |
| Seminiferous Tubule, Degeneration | | | | | | 1 | | | | | | | | 1 | | | | | | 2 | | | | 1 | 4 | 1 | |

HEMATOPOIETIC SYSTEM

| | | | | | | | | | | | | | | | | | | | | | | | | | | |
|-------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| Bone Marrow | + | + | + | + | + | + | + | + | A | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |
| Hyperplasia | | | | | 2 | | | 2 | 4 | | | | | 2 | 3 | | 2 | | | | | | | | | 2 |
| Lymph Node | | | | | | | | | | + | | | | | | | | | | + | | | | + | + | |

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TDMS No. 20116 - 04
 Test Type: CHRONIC
 Route: DOSED WATER
 Species/Strain: MICE/B6C3F1/NCTR

P09: NON-NEOPLASTIC LESIONS BY INDIVIDUAL ANIMAL

Aloe vera whole leaf extract (native)

CAS Number: ALOEVLEAFEXT

Date Report Requested: 01/15/2010
 Time Report Requested: 14:39:08
 First Dose M/F: 04/19/05 / 04/19/05
 Lab: NCTR

| DAY ON TEST | C57BL/6N XC3H/HEN MTV-NCTR
MICE MALE | | | | | | | | | | | | | | | | | | | | | | | | ANIMAL ID | males
(cont...) | | | |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|-----------|--------------------|------|---|--|
| | 0736 | 0736 | 0736 | 0736 | 0736 | 0736 | 0736 | 0736 | 0736 | 0736 | 0736 | 0736 | 0736 | 0736 | 0736 | 0736 | 0736 | 0736 | 0736 | 0736 | 0736 | 0736 | 0736 | 0736 | | | 0736 | | |
| AXILARY, Hyperplasia, Lymphoid | | | | | | | | | | | | | | | | | | | | | | | | | | 3 | 2 | | |
| AXILARY, Infiltration Cellular, Plasma Cell | | | | | | | | | | | | | | | | | | | | | | | | | | | 2 | | |
| INGUINAL, Hyperplasia, Lymphoid | | | | | | | | | | | | | | | | | | | | | | | | | | | 3 | 2 | |
| INGUINAL, Infiltration Cellular, Plasma Cell | | | | | | | | | | | | | | | | | | | | | | | | | | | 3 | 2 | |
| RENAL, Hyperplasia, Lymphoid | | | | | | | | | | | | | | | | | | | | | | | | | | | 2 | | |
| RENAL, Infiltration Cellular, Plasma Cell | | | | | | | | | | | | | | | | | | | | | | | | | | | 2 | | |
| Lymph Node, Mandibular
Hyperplasia, Lymphoid
Infiltration Cellular, Plasma Cell | + | + | + | + | + | + | + | + | A | + | + | + | + | + | A | + | + | + | + | + | + | + | + | + | + | 1 | | A | |
| Lymph Node, Mesenteric
Angiectasis
Hemorrhage
Hyperplasia, Lymphoid
Infiltration Cellular, Histiocyte
Infiltration Cellular, Polymorphonuclear
Sinus, Dilatation | + | + | + | + | + | + | + | + | A | + | + | M | + | + | A | + | + | + | + | + | + | + | + | + | + | 2 | | | |
| Spleen
Angiectasis
Depletion Lymphoid
Hematopoietic Cell Proliferation
Hyperplasia, Lymphoid
Pigmentation | + | + | + | + | + | + | + | + | A | + | + | + | + | + | A | + | + | + | + | + | + | + | + | + | + | 2 | | 4 | |
| Thymus
Atrophy
Mineralization | + | + | + | + | + | + | + | + | M | M | + | + | + | + | M | + | + | + | + | + | + | + | + | + | + | 4 | 3 | M | |

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TDMS No. 20116 - 04
 Test Type: CHRONIC
 Route: DOSED WATER
 Species/Strain: MICE/B6C3F1/NCTR

P09: NON-NEOPLASTIC LESIONS BY INDIVIDUAL ANIMAL
 Aloe vera whole leaf extract (native)
 CAS Number: ALOEVLEAFEXT

Date Report Requested: 01/15/2010
 Time Report Requested: 14:39:08
 First Dose M/F: 04/19/05 / 04/19/05
 Lab: NCTR

| C57BL/6N XC3H/HEN MTV-NCTR
MICE MALE
ALOEWHOLLEAF 2.0 | DAY ON TEST | | | | | | | | | | | | | | | | | | | | | | | | | males
(cont...) |
|-------------------------------------------------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|--|--------------------|
| | 0
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5 | 0
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2 | 0
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1 | 0
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8 | 0
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6 | 0
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0 | 0
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6 | 0
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6 | 0
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6 | 0
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2 | 0
5
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8 | | | |
| ANIMAL ID | 0
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4 | | |

INTEGUMENTARY SYSTEM

| | | | | | | | | | | | | | | | | | | | | | | | | |
|------------------------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| Mammary Gland | M | M | M | M | M | M | M | M | M | M | M | M | M | M | M | M | M | M | M | M | M | M | M | M |
| Skin | + | + | + | + | + | + | + | + | A | + | + | + | + | + | A | + | + | + | + | + | + | + | + | + |
| Fibrosis | | | | | 4 | | | | | | | | | | | | | | | | | 4 | | |
| Hyperplasia, Basal Cell | | | | | | | | | | | | | | | | | | | | | | 4 | | |
| Inflammation, Suppurative | | | | 2 | | | | | | | | | | | | | | | | | | | | |
| Inflammation, Chronic | | | | | 2 | | | | | | | | | | | | | | | | | | | |
| Inflammation, Chronic Active | | | | | | | | 1 | | 2 | | | | | | | | | | | | 2 | | |
| Metaplasia, Osseous | | | | | | | | | | | | | | 2 | | | | | | | | | | |
| Mineralization | | | | | | | | | | | | | | | | | | | | | | | | |
| Ulcer | | | | | | | | | | | | 2 | | | | | | | | | | 2 | | |
| Epithelium, Hyperplasia | | | | | | | | 2 | | 2 | | | | 2 | | | | | | | | 2 | | |

MUSCULOSKELETAL SYSTEM

| | | | | | | | | | | | | | | | | | | | | | | | | |
|-----------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| Bone, Femur | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |
| Skeletal Muscle | | | | | | | | | | | | | | | | | | | | | | | | |

NERVOUS SYSTEM

| | | | | | | | | | | | | | | | | | | | | | | | | |
|-------------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| Brain, Brain Stem | + | + | + | + | + | + | + | + | A | + | + | + | + | + | A | + | + | + | + | + | + | + | + | + |
| Brain, Cerebellum | + | + | + | + | + | + | + | + | A | + | + | + | + | + | A | + | + | + | + | + | + | + | + | + |
| Brain, Cerebrum | + | + | + | + | + | + | + | + | A | + | + | + | + | + | A | + | + | + | + | + | + | + | + | + |
| Mineralization | 1 | | | | 1 | | 2 | 1 | | 1 | 1 | 1 | 1 | 1 | | | | | | | 1 | 1 | 1 | 1 |

* .. Total animals with tissue examined microscopically; Total animals with lesion and mean severity grade
 + .. Tissue examined microscopically
 X .. Lesion present
 I .. Insufficient tissue
 M .. Missing tissue
 A .. Autolysis precludes evaluation
 BLANK .. Not examined microscopically
 1-4 .. Lesion qualified as:
 1) Minimal 3) Moderate
 2) Mild 4) Marked

TDMS No. 20116 - 04

P09: NON-NEOPLASTIC LESIONS BY INDIVIDUAL ANIMAL

Date Report Requested: 01/15/2010

Test Type: CHRONIC

Aloe vera whole leaf extract (native)

Time Report Requested: 14:39:08

Route: DOSED WATER

CAS Number: ALOEVLEAFEXT

First Dose M/F: 04/19/05 / 04/19/05

Species/Strain: MICE/B6C3F1/NCTR

Lab: NCTR

| | DAY ON TEST | | | | | | | | | | | | | | | | | | | | | | | | males
(cont...) | |
|-----------------------------------|-------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|--------------------|---|
| C57BL/6N XC3H/HEN MTV-NCTR | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | | |
| MICE MALE | 7 | 7 | 7 | 7 | 7 | 5 | 6 | 6 | 6 | 6 | 4 | 5 | 7 | 7 | 5 | 7 | 7 | 7 | 6 | 7 | 7 | 6 | 7 | 6 | | 7 |
| ALOEWOLLEAF 2.0 | 3 | 3 | 3 | 1 | 3 | 2 | 3 | 9 | 1 | 6 | 1 | 3 | 1 | 1 | 6 | 3 | 3 | 0 | 4 | 3 | 3 | 9 | 3 | 9 | 3 | |
| ANIMAL ID | 6 | 6 | 6 | 6 | 6 | 0 | 2 | 6 | 8 | 5 | 6 | 2 | 0 | 8 | 4 | 6 | 6 | 7 | 0 | 6 | 6 | 7 | 6 | 7 | 6 | |
| | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | |
| | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | |
| | 0 | 0 | 0 | 0 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 3 | 3 | 3 | 3 | 4 | 4 | 4 | 4 | 4 | 4 | 4 | 4 | 4 | |
| | 9 | 9 | 9 | 9 | 0 | 0 | 0 | 0 | 1 | 1 | 1 | 1 | 0 | 0 | 0 | 0 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | |
| | 1 | 2 | 3 | 4 | 1 | 2 | 3 | 4 | 1 | 2 | 3 | 4 | 1 | 2 | 3 | 4 | 1 | 2 | 3 | 4 | 1 | 2 | 3 | 4 | 1 | |

RESPIRATORY SYSTEM

| | | | | | | | | | | | | | | | | | | | | | | | | |
|---------------------------------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| Lung | + | + | + | + | + | + | + | + | A | + | + | + | + | + | A | + | + | + | + | + | + | + | + | + |
| Infiltration Cellular, Histiocyte | | | | | | | | | | | | | 1 | | | | | | | | | | | 4 |
| Alveolar Epithelium, Hyperplasia | | | | | | | | 1 | | | | | | | | 2 | | | 2 | | | | | |
| Nose | + | + | + | + | + | + | + | + | A | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |
| Hyaline Droplet | 2 | 2 | 2 | 3 | 2 | 2 | 2 | 3 | | 1 | 3 | 1 | | 3 | 2 | 2 | 3 | 3 | 2 | 2 | | | 4 | |
| Posterior To Upper Incisor, Dysplasia | | | | | | | | | | | | | | | | | | | | | | | | |
| Trachea | + | + | + | + | + | + | + | + | A | + | + | + | + | + | A | + | + | + | + | + | + | + | + | + |

SPECIAL SENSES SYSTEM

| | | | | | | | | | | | | | | | | | | | | | | | | |
|-----------------------------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| Eye | + | + | + | + | + | + | + | + | A | + | + | + | + | + | A | + | + | + | + | + | + | + | + | A |
| Cataract | | | | | | | | | | | | | | | | | | 1 | | | | | | |
| Harderian Gland | + | + | + | + | + | + | + | + | A | + | + | + | + | + | A | + | + | + | + | + | + | + | + | + |
| Infiltration Cellular, Lymphocyte | | | | | | | | | | | | | | | | | 2 | | | | 1 | | | |
| Epithelium, Hyperplasia | | | | | | | | | | | | | | | | | | | | | | | | |

URINARY SYSTEM

| | | | | | | | | | | | | | | | | | | | | | | | | |
|-----------------------------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| Kidney | + | + | + | + | + | + | + | + | A | + | + | + | + | + | A | + | + | + | + | + | + | + | + | + |
| Cyst | 2 | | | | | | | | | | | | | | | | | | | | | | | |
| Fibrosis | | | | | | | | | | | | | | | | | | | | | | | | |
| Hyaline Droplet | | | | | | | | | | | | | | | | | | | | | | | | |
| Infiltration Cellular, Lymphocyte | 1 | 1 | | 1 | 1 | | | 1 | | | | | | | | | | | | | | | | |
| Metaplasia, Osseous | | | | | | | | | | | | | | | | 1 | | | | | | 1 | | |
| Nephropathy | | | | | | | | 1 | | | 2 | | 1 | 1 | | 1 | | 1 | 2 | 1 | 1 | 1 | | |

* .. Total animals with tissue examined microscopically; Total animals with lesion and mean severity grade
+ .. Tissue examined microscopically
X .. Lesion present
I .. Insufficient tissue
M .. Missing tissue
A .. Autolysis precludes evaluation
BLANK .. Not examined microscopically
1-4 .. Lesion qualified as:
1) Minimal 3) Moderate
2) Mild 4) Marked

TDMS No. 20116 - 04
 Test Type: CHRONIC
 Route: DOSED WATER
 Species/Strain: MICE/B6C3F1/NCTR

P09: NON-NEOPLASTIC LESIONS BY INDIVIDUAL ANIMAL
 Aloe vera whole leaf extract (native)
 CAS Number: ALOEVLEAFEXT

Date Report Requested: 01/15/2010
 Time Report Requested: 14:39:08
 First Dose M/F: 04/19/05 / 04/19/05
 Lab: NCTR

| C57BL/6N XC3H/HEN MTV-NCTR
MICE MALE
ALOEWHOLLEAF 2.0 | DAY ON TEST | | | | | | | | | | | | | | | | | | | | | | | | | ANIMAL ID | males
(cont...) |
|-------------------------------------------------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|----------------------------|-----------|--------------------|
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6 | 0
5
9
2 | 0
5
3
8 | | |
| | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0
0
0
0
9
1 | | |
| Pigmentation | | | | | | | | | | | | | | | | | | | | | | | | | | | 2 |
| Pelvis, Dilatation | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Urinary Bladder | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Infiltration Cellular, Lymphocyte | + | + | + | + | + | + | + | + | + | A | + | + | + | + | + | A | + | + | + | + | + | + | + | + | | | |
| Lumen, Dilatation | | | | | | | | | | | | | | | | | | | | | | | | | | | 3 |

* .. Total animals with tissue examined microscopically; Total animals with lesion and mean severity grade
 + .. Tissue examined microscopically
 X .. Lesion present
 I .. Insufficient tissue
 M .. Missing tissue
 A .. Autolysis precludes evaluation
 BLANK .. Not examined microscopically
 1-4 .. Lesion qualified as:
 1) Minimal 3) Moderate
 2) Mild 4) Marked

TDMS No. 20116 - 04
 Test Type: CHRONIC
 Route: DOSED WATER
 Species/Strain: MICE/B6C3F1/NCTR

P09: NON-NEOPLASTIC LESIONS BY INDIVIDUAL ANIMAL
 Aloe vera whole leaf extract (native)
 CAS Number: ALOEVLEAFEXT

Date Report Requested: 01/15/2010
 Time Report Requested: 14:39:08
 First Dose M/F: 04/19/05 / 04/19/05
 Lab: NCTR

| C57BL/6N XC3H/HEN MTV-NCTR
MICE MALE
ALOEWHOLLEAF 2.0 | DAY ON TEST | | | | | | | | | | | | | | | | | | | | * TOTALS | |
|-------------------------------------------------------------|-------------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|----------|------|
| | 0736 | 0736 | 0742 | 0773 | 0773 | 0777 | 0777 | 0777 | 0777 | 0777 | 0777 | 0777 | 0777 | 0777 | 0777 | 0777 | 0777 | 0777 | 0777 | 0777 | | 0777 |
| ANIMAL ID | 00492 | 00493 | 00494 | 00495 | 00495 | 00495 | 00495 | 00495 | 00495 | 00495 | 00495 | 00495 | 00495 | 00495 | 00495 | 00495 | 00495 | 00495 | 00495 | 00495 | 00495 | |

ALIMENTARY SYSTEM

| | | | | | | | | | | | | | | | | | | | | | | | | | |
|---------------------------------------------------------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|----|-----|-----|
| Esophagus | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 47 | | |
| Gallbladder | + | + | + | + | + | + | + | + | A | + | + | + | + | + | + | + | + | + | + | + | + | + | 45 | | |
| Intestine Large, Ascending Colon
Goblet Cell, Hyperplasia | + | + | + | + | + | + | + | + | A | + | + | + | + | + | + | + | + | + | + | + | + | + | 45 | 20 | 1.6 |
| Intestine Large, Cecum | + | + | + | + | + | + | + | + | A | + | + | + | + | + | + | + | + | + | + | + | + | + | 44 | | |
| Intestine Large, Descending Colon
Goblet Cell, Hyperplasia | + | + | + | + | + | + | + | + | A | + | + | + | + | + | + | + | + | + | + | + | + | + | 45 | 12 | 1.5 |
| Intestine Large, Rectum | + | + | + | + | + | + | + | + | A | + | + | + | + | + | + | + | + | + | + | + | + | + | 45 | | |
| Intestine Large, Transverse Colon
Goblet Cell, Hyperplasia | + | + | + | + | + | + | + | + | A | + | + | + | + | + | + | + | + | + | + | + | + | + | 45 | 21 | 1.7 |
| Intestine Small, Duodenum | + | + | + | + | + | + | + | + | A | + | + | + | + | + | + | + | + | + | + | + | + | + | 44 | | |
| Intestine Small, Ileum | + | + | + | + | + | + | + | + | A | + | + | + | + | + | + | + | + | + | + | + | + | + | 45 | | |
| Intestine Small, Jejunum
Hyperplasia, Lymphoid | + | + | + | + | + | + | + | + | A | + | + | + | + | + | + | + | + | + | + | + | + | + | 43 | 1 | 3.0 |
| Liver | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 47 | | |
| Basophilic Focus | | | X | | | | | | | | | | | | | | | | | | | X | 5 | | |
| Infiltration Cellular, Lymphocyte | | | | | | | | | | | | | | | | | | | | | 1 | | 2 | 1.0 | |
| Inflammation, Chronic Active | | | | | | | | | | | | | | | | | | | | | | 1 | 1 | 1.0 | |

* .. Total animals with tissue examined microscopically; Total animals with lesion and mean severity grade
 + .. Tissue examined microscopically
 X .. Lesion present
 I .. Insufficient tissue
 M .. Missing tissue
 A .. Autolysis precludes evaluation
 BLANK .. Not examined microscopically
 1-4 .. Lesion qualified as:
 1) Minimal 3) Moderate
 2) Mild 4) Marked

TDMS No. 20116 - 04
 Test Type: CHRONIC
 Route: DOSED WATER
 Species/Strain: MICE/B6C3F1/NCTR

P09: NON-NEOPLASTIC LESIONS BY INDIVIDUAL ANIMAL
 Aloe vera whole leaf extract (native)
 CAS Number: ALOEVLEAFEXT

Date Report Requested: 01/15/2010
 Time Report Requested: 14:39:08
 First Dose M/F: 04/19/05 / 04/19/05
 Lab: NCTR

| C57BL/6N XC3H/HEN MTV-NCTR
MICE MALE
ALOEWHOLLEAF 2.0 | DAY ON TEST | | | | | | | | | | | | | | | | | | | | * TOTALS | | | |
|-------------------------------------------------------------|-------------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|----------|------|-------|--------|
| | 0736 | 0736 | 0736 | 0736 | 0736 | 0736 | 0736 | 0736 | 0736 | 0736 | 0736 | 0736 | 0736 | 0736 | 0736 | 0736 | 0736 | 0736 | 0736 | 0736 | | 0736 | | |
| ANIMAL ID | 00492 | 00493 | 00494 | 00495 | 00496 | 00497 | 00498 | 00499 | 00500 | 00501 | 00502 | 00503 | 00504 | 00505 | 00506 | 00507 | 00508 | 00509 | 00510 | 00511 | 00512 | | | |
| Necrosis | | | | | | | | | | | | | | | | | | | | | | 2 | 1 2.0 | |
| Tension Lipidosis | | | | | | | | | | | | | | | | | | | | | | | 2 | 4 1.3 |
| Vacuolization Cytoplasmic | | | | | | | | | | | | | | | | | | | | | | | 2 | 2 2.0 |
| Mesentery | | | | | | | | | | | | | | | | | | | | | | | 2 | 2 2.5 |
| Fat, Necrosis | | | | | | | | | | | | | | | | | | | | | | | 2 | 3 |
| Pancreas | | | | | | | | | | | | | | | | | | | | | | | 47 | 1 1.0 |
| Infiltration Cellular, Lymphocyte | | | | | | | | | | | | | | | | | | | | | | | 1 | 2 |
| Vacuolization Cytoplasmic | | | | | | | | | | | | | | | | | | | | | | | 1 | 3 1.3 |
| Duct, Dilatation | | | | | | | | | | | | | | | | | | | | | | | 1 | 4.0 |
| Salivary Glands | | | | | | | | | | | | | | | | | | | | | | | 46 | 23 1.2 |
| Infiltration Cellular, Lymphocyte | | | | | | | | | | | | | | | | | | | | | | | 1 | 1 1 |
| Stomach, Forestomach | | | | | | | | | | | | | | | | | | | | | | | 45 | |
| Stomach, Glandular | | | | | | | | | | | | | | | | | | | | | | | 45 | 1 2.0 |
| Inflammation, Chronic Active | | | | | | | | | | | | | | | | | | | | | | | 3 | 1.7 |
| Epithelium, Hyperplasia | | | | | | | | | | | | | | | | | | | | | | | | |

CARDIOVASCULAR SYSTEM

| | | | | | | | | | | | | | | | | | | | | | | | | |
|----------------|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|----|-------|
| Blood Vessel | | | | | | | | | | | | | | | | | | | | | | | 47 | |
| Heart | | | | | | | | | | | | | | | | | | | | | | | 47 | 2 1.0 |
| Cardiomyopathy | | | | | | | | | | | | | | | | | | | | | | | | |

ENDOCRINE SYSTEM

| | | | | | | | | | | | | | | | | | | | | | | | | |
|----------------|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|----|--|
| Adrenal Cortex | | | | | | | | | | | | | | | | | | | | | | | 46 | |
|----------------|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|----|--|

* .. Total animals with tissue examined microscopically; Total animals with lesion and mean severity grade

+ .. Tissue examined microscopically

X .. Lesion present

I .. Insufficient tissue

M .. Missing tissue

A .. Autolysis precludes evaluation

BLANK .. Not examined microscopically

1-4 .. Lesion qualified as:

1) Minimal 3) Moderate

2) Mild 4) Marked

TDMS No. 20116 - 04
 Test Type: CHRONIC
 Route: DOSED WATER
 Species/Strain: MICE/B6C3F1/NCTR

P09: NON-NEOPLASTIC LESIONS BY INDIVIDUAL ANIMAL
 Aloe vera whole leaf extract (native)
 CAS Number: ALOEVLEAFEXT

Date Report Requested: 01/15/2010
 Time Report Requested: 14:39:08
 First Dose M/F: 04/19/05 / 04/19/05
 Lab: NCTR

| C57BL/6N XC3H/HEN MTV-NCTR
MICE MALE
ALOEWHOLLEAF 2.0 | DAY ON TEST | | | | | | | | | | | | | | | | | | | | * TOTALS | |
|--------------------------------------------------------------------------------------------------------------|-------------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|----------|-------------------------------|
| | 0736 | 0736 | 0742 | 0773 | 0773 | 0777 | 0777 | 0777 | 0777 | 0777 | 0777 | 0777 | 0777 | 0777 | 0777 | 0777 | 0777 | 0777 | 0777 | 0777 | | 0777 |
| ANIMAL ID | 00492 | 00493 | 00494 | 00495 | 00496 | 00497 | 00498 | 00499 | 00500 | 00501 | 00502 | 00503 | 00504 | 00505 | 00506 | 00507 | 00508 | 00509 | 00510 | 00511 | 00512 | |
| Hematopoietic Cell Proliferation
Subcapsular, Hyperplasia | | | 1 | | | | | | | | | | | | | | | | | | | 1 1.0
32 1.5 |
| Adrenal Medulla
Hyperplasia | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 46
5 2.0 |
| Islets, Pancreatic
Hyperplasia | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 46
1 2.0 |
| Parathyroid Gland
Infiltration Cellular, Lymphocyte | + | + | + | + | + | M | + | + | + | + | + | + | + | + | + | M | + | + | + | + | + | 42
1 1.0 |
| Pituitary Gland
Pars Distalis, Cyst | + | + | + | + | + | + | + | + | + | + | M | + | + | + | + | + | + | + | + | + | + | 45
4 2.5 |
| Thyroid Gland
Infiltration Cellular, Lymphocyte
Inflammation, Chronic Active
Follicle, Degeneration | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 47
1 2.0
2 1.0
3 1.3 |
| GENERAL BODY SYSTEM | | | | | | | | | | | | | | | | | | | | | | |
| Tissue NOS
Cyst | | | | | | | | | | | | | | | | | | | | | | 3
1 4.0 |
| GENITAL SYSTEM | | | | | | | | | | | | | | | | | | | | | | |
| Epididymis
Atrophy
Fibrosis
Hypospermia | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 46
1 2.0
1 2.0
2 2.5 |

* .. Total animals with tissue examined microscopically; Total animals with lesion and mean severity grade
 + .. Tissue examined microscopically
 X .. Lesion present
 I .. Insufficient tissue
 M .. Missing tissue
 A .. Autolysis precludes evaluation
 BLANK .. Not examined microscopically
 1-4 .. Lesion qualified as:
 1) Minimal 3) Moderate
 2) Mild 4) Marked

TDMS No. 20116 - 04
 Test Type: CHRONIC
 Route: DOSED WATER
 Species/Strain: MICE/B6C3F1/NCTR

P09: NON-NEOPLASTIC LESIONS BY INDIVIDUAL ANIMAL
 Aloe vera whole leaf extract (native)
 CAS Number: ALOEVLEAFEXT

Date Report Requested: 01/15/2010
 Time Report Requested: 14:39:08
 First Dose M/F: 04/19/05 / 04/19/05
 Lab: NCTR

| C57BL/6N XC3H/HEN MTV-NCTR
MICE MALE
ALOEWHOLLEAF 2.0 | DAY ON TEST | | | | | | | | | | | | | | | | | | | | * TOTALS | | |
|-------------------------------------------------------------|-------------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|----------|------|-------|
| | 0736 | 0736 | 0742 | 0773 | 0773 | 0777 | 0777 | 0777 | 0777 | 0777 | 0777 | 0777 | 0777 | 0777 | 0777 | 0777 | 0777 | 0777 | 0777 | 0777 | | 0777 | |
| ANIMAL ID | 00492 | 00493 | 00494 | 00495 | 00496 | 00497 | 00498 | 00499 | 00500 | 00501 | 00502 | 00503 | 00504 | 00505 | 00506 | 00507 | 00508 | 00509 | 00510 | 00511 | 00512 | | |
| Spermatocele | | | | | | | | | | | | | | | | | | | | | | 1 | 1 1.0 |
| Preputial Gland | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 46 | |
| Cyst | | | | | | | | | | | | | | | | | | | | | | 5 | 1.8 |
| Degeneration | | | | | | | | | | | | | | | | | | | | | | 10 | 3.0 |
| Infiltration Cellular, Lymphocyte | | | | | | | | | | | | | | | | | | | | | | 4 | 2.3 |
| Inflammation, Suppurative | 3 | | | | | | | | | | | | | | | | | | | | | 6 | 3.3 |
| Inflammation, Chronic Active | | | | | | | | | | | | | | | | | | | | | | 4 | 2.5 |
| Bilateral, Cyst | | | | | | | | | | | | | | | | | | | | | | 1 | 3.0 |
| Duct, Ectasia | | | | | | | | | | | | | | | | | | | | | | 3 | 3.7 |
| Fat, Necrosis | | | | | | | | | | | | | | | | | | | | | | 1 | 3.0 |
| Prostate | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 46 | |
| Infiltration Cellular, Lymphocyte | | | | | | | | | | | | | | | | | | | | | | 6 | 1.0 |
| Inflammation, Suppurative | | | | | | | | | | | | | | | | | | | | | | 1 | 2.0 |
| Seminal Vesicle | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 47 | |
| Atrophy | | | | | | | | | | | | | | | | | | | | | | 1 | 2.0 |
| Inflammation, Suppurative | | | | | | | | | | | | | | | | | | | | | | 1 | 4.0 |
| Lumen, Dilatation | | | | | | | | | | | | | | | | | | | | | | 4 | 2.8 |
| Testes | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 45 | |
| Seminiferous Tubule, Degeneration | | | | | | | | | | | | | | | | | | | | | | 11 | 2.0 |

HEMATOPOIETIC SYSTEM

| | | | | | | | | | | | | | | | | | | | | | | | |
|-------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|----|-----|
| Bone Marrow | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 47 | |
| Hyperplasia | | | | | | | | | | | | | | | | | | | | | | 13 | 2.3 |
| Lymph Node | | | | | | | | | | | | | | | | | | | | | | 9 | |

* .. Total animals with tissue examined microscopically; Total animals with lesion and mean severity grade
 + .. Tissue examined microscopically
 X .. Lesion present
 I .. Insufficient tissue
 M .. Missing tissue
 A .. Autolysis precludes evaluation
 BLANK .. Not examined microscopically

1-4 .. Lesion qualified as:
 1) Minimal 3) Moderate
 2) Mild 4) Marked

TDMS No. 20116 - 04
 Test Type: CHRONIC
 Route: DOSED WATER
 Species/Strain: MICE/B6C3F1/NCTR

P09: NON-NEOPLASTIC LESIONS BY INDIVIDUAL ANIMAL
 Aloe vera whole leaf extract (native)
 CAS Number: ALOEVLEAFEXT

Date Report Requested: 01/15/2010
 Time Report Requested: 14:39:08
 First Dose M/F: 04/19/05 / 04/19/05
 Lab: NCTR

| DAY ON TEST | C57BL/6N XC3H/HEN MTV-NCTR MICE MALE | | | | | | | | | | | | | | | | | | | | * TOTALS | | | |
|----------------------------------------------|--------------------------------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|----------|----|-----|-----|
| | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | | 0 | | |
| ANIMAL ID | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | | | |
| Axillary, Hyperplasia, Lymphoid | 7 | 7 | 4 | 7 | 3 | 7 | 7 | 7 | 7 | 6 | 6 | 6 | 7 | 7 | 7 | 5 | 7 | 4 | 6 | 7 | 7 | 2 | 2.5 | |
| Axillary, Infiltration Cellular, Plasma Cell | 3 | 3 | 7 | 3 | 6 | 1 | 1 | 3 | 3 | 6 | 9 | 6 | 3 | 3 | 0 | 2 | 5 | 4 | 9 | 3 | 3 | 1 | 2.0 | |
| Inguinal, Hyperplasia, Lymphoid | 6 | 6 | 2 | 6 | 5 | 1 | 1 | 6 | 6 | 6 | 3 | 6 | 6 | 6 | 0 | 7 | 7 | 9 | 6 | 6 | 6 | 3 | 2.7 | |
| Inguinal, Infiltration Cellular, Plasma Cell | | | | | | | | | | | | | | | | | | | | | | 2 | 2.5 | |
| Renal, Hyperplasia, Lymphoid | | | | | | | | | | | | | | | | | | | | | | 1 | 2.0 | |
| Renal, Infiltration Cellular, Plasma Cell | | | | | | | | | | | | | | | | | | | | | | 1 | 2.0 | |
| Lymph Node, Mandibular | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 45 | | |
| Hyperplasia, Lymphoid | | | | | | | | | | | | | | 1 | | | | | | 1 | | 4 | 1.0 | |
| Infiltration Cellular, Plasma Cell | | | | | | | | | | | | | | | 2 | | | | | | | 1 | 2.0 | |
| Lymph Node, Mesenteric | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 45 | | |
| Angiectasis | | | | | | | | | | | | | | | | | | | | | | 3 | 2 | 2.5 |
| Hemorrhage | | | | | | | | 2 | 3 | | | | | | 2 | | | | | | 2 | 10 | 2.4 | |
| Hyperplasia, Lymphoid | 2 | | | | | | | | 3 | | | | | 2 | 2 | 2 | 1 | | 3 | | 2 | 17 | 2.2 | |
| Infiltration Cellular, Histiocyte | | | | | | | | | | | | | | | | | | 2 | | | | 2 | 2.5 | |
| Infiltration Cellular, Polymorphonuclear | | | | | | | | 2 | | | | | | | | | | | | | | 2 | 2.0 | |
| Sinus, Dilatation | | | | | | | | 2 | | | | 3 | | | | | | | | | | 4 | 2.8 | |
| Spleen | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 46 | | |
| Angiectasis | | | | | | | | | | | | | | | | | | | | | | 1 | 2.0 | |
| Depletion Lymphoid | | | | | | | | | | | | | | | | | | | | | | 1 | 4.0 | |
| Hematopoietic Cell Proliferation | | | 4 | 4 | | 4 | | | | 4 | 4 | | | | 4 | 2 | | | | 4 | | 18 | 3.5 | |
| Hyperplasia, Lymphoid | 2 | | | | 3 | | | | | 3 | | | | 2 | 2 | | | 3 | 2 | | 2 | 20 | 2.3 | |
| Pigmentation | 2 | | | | | | | | | | | | | | | | | | | | | 1 | 2.0 | |
| Thymus | + | M | + | + | + | M | + | + | + | M | + | + | M | + | + | + | + | + | + | M | + | 37 | | |
| Atrophy | | | | | 4 | | | 4 | | 3 | | | | 2 | | | 3 | | 4 | 3 | | 17 | 3.1 | |
| Mineralization | | | | | | 1 | | | | | | | | | | | | | | | | 1 | 1.0 | |

* .. Total animals with tissue examined microscopically; Total animals with lesion and mean severity grade
 + .. Tissue examined microscopically
 X .. Lesion present
 I .. Insufficient tissue
 M .. Missing tissue
 A .. Autolysis precludes evaluation
 BLANK .. Not examined microscopically
 1-4 .. Lesion qualified as:
 1) Minimal 3) Moderate
 2) Mild 4) Marked

TDMS No. 20116 - 04
 Test Type: CHRONIC
 Route: DOSED WATER
 Species/Strain: MICE/B6C3F1/NCTR

P09: NON-NEOPLASTIC LESIONS BY INDIVIDUAL ANIMAL
 Aloe vera whole leaf extract (native)
 CAS Number: ALOEVLEAFEXT

Date Report Requested: 01/15/2010
 Time Report Requested: 14:39:08
 First Dose M/F: 04/19/05 / 04/19/05
 Lab: NCTR

| DAY ON TEST | C57BL/6N XC3H/HEN MTV-NCTR MICE MALE | | | | | | | | | | | | | | | | | | | | * TOTALS | |
|-------------|--------------------------------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|----------|---|
| | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | | 0 |
| 7 | 7 | 4 | 7 | 3 | 7 | 7 | 7 | 7 | 6 | 6 | 6 | 7 | 7 | 7 | 5 | 7 | 4 | 6 | 7 | 7 | 7 | |
| 3 | 3 | 7 | 3 | 6 | 1 | 1 | 3 | 3 | 6 | 9 | 6 | 3 | 3 | 0 | 2 | 5 | 4 | 9 | 3 | 3 | 3 | |
| 6 | 6 | 2 | 6 | 5 | 1 | 1 | 6 | 6 | 6 | 3 | 6 | 6 | 6 | 0 | 7 | 7 | 9 | 7 | 6 | 6 | 6 | |
| ANIMAL ID | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | |
| 4 | 4 | 4 | 5 | 5 | 5 | 5 | 5 | 5 | 5 | 5 | 7 | 7 | 7 | 7 | 9 | 9 | 9 | 9 | 9 | 9 | 9 | |
| 9 | 9 | 9 | 0 | 0 | 0 | 0 | 1 | 1 | 1 | 1 | 1 | 1 | 0 | 0 | 5 | 5 | 5 | 6 | 6 | 6 | 6 | |
| 2 | 3 | 4 | 1 | 2 | 3 | 4 | 1 | 2 | 3 | 4 | 1 | 2 | 3 | 4 | 1 | 2 | 3 | 4 | 1 | 2 | 3 | |

INTEGUMENTARY SYSTEM

| | | | | | | | | | | | | | | | | | | | | | | | |
|------------------------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|-------|
| Mammary Gland | M | M | M | M | M | M | M | M | M | M | M | M | M | M | M | M | M | M | M | M | M | M | 0 |
| Skin | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 46 |
| Fibrosis | | 4 | | 4 | | | | | | | | | | | | | | | | | | | 4 4.0 |
| Hyperplasia, Basal Cell | | | | | | | | | | | | | | | | | | | | | 1 | | 1 4.0 |
| Inflammation, Suppurative | | 3 | | | | | | | | | | | | | | | | | | | | | 3 2.0 |
| Inflammation, Chronic | | | | | | | | | | | | | | | | | | | | | | | 1 2.0 |
| Inflammation, Chronic Active | | | | 3 | | | | | | | | | | | | | | | | | | | 4 2.0 |
| Metaplasia, Osseous | | | | | | | | | | | | | | | | | | | | | | | 1 2.0 |
| Mineralization | | | | | | | | | | | | | | | | | | | 3 | | | | 1 3.0 |
| Ulcer | | 4 | | 4 | | | | | | | | | | | | | | | | | | | 4 3.0 |
| Epithelium, Hyperplasia | | | | | | | | | | | | | | | | | | | | | | | 4 2.0 |

MUSCULOSKELETAL SYSTEM

| | | | | | | | | | | | | | | | | | | | | | | | |
|-----------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|----|
| Bone, Femur | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 48 |
| Skeletal Muscle | | | | | | | | | | | | | | | | | | | | | | | 3 |

NERVOUS SYSTEM

| | | | | | | | | | | | | | | | | | | | | | | | |
|-------------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|--------|
| Brain, Brain Stem | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 46 |
| Brain, Cerebellum | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 46 |
| Brain, Cerebrum | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 46 |
| Mineralization | | 1 | | 1 | | | 2 | 1 | | | | | 1 | 1 | | | 1 | | | 1 | 1 | 1 | 24 1.1 |

* .. Total animals with tissue examined microscopically; Total animals with lesion and mean severity grade
 + .. Tissue examined microscopically
 X .. Lesion present
 I .. Insufficient tissue
 M .. Missing tissue
 A .. Autolysis precludes evaluation
 BLANK .. Not examined microscopically

1-4 .. Lesion qualified as:
 1) Minimal 3) Moderate
 2) Mild 4) Marked

TDMS No. 20116 - 04
 Test Type: CHRONIC
 Route: DOSED WATER
 Species/Strain: MICE/B6C3F1/NCTR

P09: NON-NEOPLASTIC LESIONS BY INDIVIDUAL ANIMAL
 Aloe vera whole leaf extract (native)
 CAS Number: ALOEVLEAFEXT

Date Report Requested: 01/15/2010
 Time Report Requested: 14:39:08
 First Dose M/F: 04/19/05 / 04/19/05
 Lab: NCTR

| C57BL/6N XC3H/HEN MTV-NCTR
MICE MALE
ALOEWHOLLEAF 2.0 | DAY ON TEST | | | | | | | | | | | | | | | | | | | | * TOTALS | |
|-------------------------------------------------------------|-------------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|----------|------|
| | 0736 | 0736 | 0742 | 0773 | 0773 | 0777 | 0777 | 0777 | 0777 | 0777 | 0777 | 0777 | 0777 | 0777 | 0777 | 0777 | 0777 | 0777 | 0777 | 0777 | | 0777 |
| ANIMAL ID | 00492 | 00493 | 00494 | 00495 | 00495 | 00495 | 00495 | 00495 | 00495 | 00495 | 00495 | 00495 | 00495 | 00495 | 00495 | 00495 | 00495 | 00495 | 00495 | 00495 | 00495 | |

RESPIRATORY SYSTEM

| | | | | | | | | | | | | | | | | | | | | | | | | |
|---------------------------------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|-------|--------|
| Lung | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 46 | |
| Infiltration Cellular, Histiocyte | | | | | | | | | | | | | | | | | | | | | | | 2 2.5 | |
| Alveolar Epithelium, Hyperplasia | | | | | | | | | | | | | 2 | | | | | | | | | | 4 1.8 | |
| Nose | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 47 | |
| Hyaline Droplet | 2 | 1 | 2 | 2 | 2 | 1 | | | | | | 2 | 1 | 1 | 2 | 2 | 2 | | | 2 | | 3 | 2 2 3 | 39 2.0 |
| Posterior To Upper Incisor, Dysplasia | | | | | | | | | | | | | | | | | | | | | | | 1 4.0 | |
| Trachea | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 46 | |

SPECIAL SENSES SYSTEM

| | | | | | | | | | | | | | | | | | | | | | | | | |
|-----------------------------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|-------|--|
| Eye | + | + | + | + | + | + | + | + | + | A | + | + | + | + | + | + | + | + | + | + | + | + | 44 | |
| Cataract | | | | | | | | | | | | | | | | | | | | | | | 1 1.0 | |
| Harderian Gland | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 46 | |
| Infiltration Cellular, Lymphocyte | | | | | | | | | | | | 2 | | | | | | | | | | | 3 1.7 | |
| Epithelium, Hyperplasia | | | | | | | | | | | | | | | | | | | | | 2 | | 1 2.0 | |

URINARY SYSTEM

| | | | | | | | | | | | | | | | | | | | | | | | | |
|-----------------------------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|--------|--|
| Kidney | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 46 | |
| Cyst | | | | | | | | | | | | | | | | | | | | | 1 | | 2 1.5 | |
| Fibrosis | | | | | | | | | | | | | | | | | | | | | | 3 | 1 3.0 | |
| Hyaline Droplet | | | | | | 4 | | | | 2 | | 4 | | | | | | | | | | | 3 3.3 | |
| Infiltration Cellular, Lymphocyte | 1 | | 2 | | | | | | | | | | | | | | | 1 | 2 | | | 2 | 10 1.3 | |
| Metaplasia, Osseous | | | | | | | | | | | | | | | | | | | | | | | 2 1.0 | |
| Nephropathy | | | | | | | 2 | 1 | 1 | | | | | 1 | 1 | | | | | 1 | 1 | | 17 1.2 | |

* .. Total animals with tissue examined microscopically; Total animals with lesion and mean severity grade
 + .. Tissue examined microscopically
 X .. Lesion present
 I .. Insufficient tissue
 M .. Missing tissue
 A .. Autolysis precludes evaluation
 BLANK .. Not examined microscopically
 1-4 .. Lesion qualified as:
 1) Minimal 3) Moderate
 2) Mild 4) Marked

TDMS No. 20116 - 04
 Test Type: CHRONIC
 Route: DOSED WATER
 Species/Strain: MICE/B6C3F1/NCTR

P09: NON-NEOPLASTIC LESIONS BY INDIVIDUAL ANIMAL
 Aloe vera whole leaf extract (native)
 CAS Number: ALOEVLEAFEXT

Date Report Requested: 01/15/2010
 Time Report Requested: 14:39:08
 First Dose M/F: 04/19/05 / 04/19/05
 Lab: NCTR

| DAY ON TEST | C57BL/6N XC3H/HEN MTV-NCTR MICE MALE | | | | | | | | | | | | | | | | | | | | * TOTALS | | | | | | |
|-----------------------------------|--------------------------------------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|----------|------|------|------|------|-------|-------|
| | 0736 | 0736 | 0476 | 0736 | 0365 | 0771 | 0771 | 0773 | 0776 | 0776 | 0663 | 0666 | 0666 | 0736 | 0736 | 0770 | 0577 | 0469 | 0673 | 0773 | | 0776 | | | | | |
| ANIMAL ID | ALOEWHOLLEAF 2.0 | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | 0042 | 0043 | 0044 | 0055 | 0055 | 0055 | 0055 | 0055 | 0055 | 0055 | 0055 | 0055 | 0055 | 0077 | 0077 | 0077 | 0099 | 0099 | 0099 | 0099 | 0099 | 0066 | 0066 | 0033 | 0044 | | |
| Pigmentation | | | | | | | | | | | | | | | | | | | | | | | | | | 1 2.0 | |
| Pelvis, Dilatation | | | | | | | | | | | | | | | | | | | | | | | | | | | 1 2.0 |
| Urinary Bladder | + | + | + | + | + | + | + | + | + | A | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 45 | |
| Infiltration Cellular, Lymphocyte | | | | | | | | | | 1 | | | | 1 | | | | | | | | | | | | 2 1.0 | |
| Lumen, Dilatation | | | | | | | | | | | | | | | | | | | | | | | | | | 1 3.0 | |

* .. Total animals with tissue examined microscopically; Total animals with lesion and mean severity grade
 + .. Tissue examined microscopically
 X .. Lesion present
 I .. Insufficient tissue
 M .. Missing tissue
 A .. Autolysis precludes evaluation
 BLANK .. Not examined microscopically

1-4 .. Lesion qualified as:
 1) Minimal 3) Moderate
 2) Mild 4) Marked

TDMS No. 20116 - 04
 Test Type: CHRONIC
 Route: DOSED WATER
 Species/Strain: MICE/B6C3F1/NCTR

P09: NON-NEOPLASTIC LESIONS BY INDIVIDUAL ANIMAL

Aloe vera whole leaf extract (native)

CAS Number: ALOEVLEAFEXT

Date Report Requested: 01/15/2010

Time Report Requested: 14:39:08

First Dose M/F: 04/19/05 / 04/19/05

Lab: NCTR

| DAY ON TEST | C57BL/6N XC3H/HEN MTV-NCTR MICE MALE ALOEWOLLEAF 3.0 | | | | | | | | | | | | | | | | | | | | | | | | ANIMAL ID | males
(cont...) |
|-------------|------------------------------------------------------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|-----------|--------------------|
| | 0431 | 0736 | 0526 | 0511 | 0654 | 0622 | 0717 | 0705 | 0833 | 0838 | 0914 | 0767 | 0631 | 0333 | 0535 | 0733 | 0733 | 0733 | 0733 | 0733 | 0336 | 0735 | 0503 | 0115 | | |
| | 0000 | 0000 | 0000 | 0000 | 0000 | 0000 | 0000 | 0000 | 0000 | 0000 | 0000 | 0000 | 0000 | 0000 | 0000 | 0000 | 0000 | 0000 | 0000 | 0000 | 0000 | 0000 | 0000 | 0000 | 0000 | |

ALIMENTARY SYSTEM

| | | | | | | | | | | | | | | | | | | | | | | | | | | |
|---------------------------------------------------------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| Esophagus | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | |
| Gallbladder | + | + | + | + | + | + | M | + | + | + | + | + | A | + | + | + | + | + | + | + | + | + | A | + | | |
| Intestine Large, Ascending Colon
Goblet Cell, Hyperplasia | + | + | + | + | + | + | + | A | + | + | + | + | + | A | + | + | + | + | + | M | + | + | + | + | A | + |
| Intestine Large, Cecum
Goblet Cell, Hyperplasia | + | + | + | + | + | + | + | + | + | + | + | + | A | + | M | + | + | + | + | + | + | + | + | A | + | |
| Intestine Large, Descending Colon
Goblet Cell, Hyperplasia | + | + | + | + | + | + | + | A | + | + | + | + | A | + | + | + | + | + | + | + | + | + | + | A | + | |
| Intestine Large, Rectum | + | + | + | + | + | + | + | A | + | + | + | + | A | + | + | + | + | + | + | + | + | + | + | A | + | |
| Intestine Large, Transverse Colon
Goblet Cell, Hyperplasia | + | + | + | + | + | + | + | A | + | + | + | + | A | + | + | + | + | + | + | + | + | + | A | + | | |
| Intestine Small, Duodenum | + | + | + | + | + | + | + | A | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | A | + | |
| Intestine Small, Ileum | + | + | + | + | + | + | + | A | + | + | + | + | M | + | + | + | + | + | + | + | + | + | A | + | | |
| Intestine Small, Jejunum
Hyperplasia, Lymphoid | + | + | + | + | + | + | + | A | + | + | + | + | A | + | + | + | + | + | + | + | + | + | A | + | | |
| Liver
Angiectasis
Basophilic Focus | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | A | + | | |

* .. Total animals with tissue examined microscopically; Total animals with lesion and mean severity grade
 + .. Tissue examined microscopically
 X .. Lesion present
 I .. Insufficient tissue

M .. Missing tissue
 A .. Autolysis precludes evaluation
 BLANK .. Not examined microscopically

1-4 .. Lesion qualified as:
 1) Minimal 3) Moderate
 2) Mild 4) Marked

TDMS No. 20116 - 04
 Test Type: CHRONIC
 Route: DOSED WATER
 Species/Strain: MICE/B6C3F1/NCTR

P09: NON-NEOPLASTIC LESIONS BY INDIVIDUAL ANIMAL
 Aloe vera whole leaf extract (native)
 CAS Number: ALOEVLEAFEXT

Date Report Requested: 01/15/2010
 Time Report Requested: 14:39:08
 First Dose M/F: 04/19/05 / 04/19/05
 Lab: NCTR

| | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|-----------------------------------|------------------|-------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|--------------------|---|
| | | DAY ON TEST | | | | | | | | | | | | | | | | | | | | | | | | | |
| C57BL/6N XC3H/HEN MTV-NCTR | MICE MALE | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | | | | |
| | | 4 | 7 | 5 | 5 | 6 | 5 | 6 | 1 | 7 | 7 | 6 | 7 | 6 | 7 | 5 | 7 | 7 | 7 | 7 | 7 | 3 | 7 | | 5 | 7 | |
| | | 3 | 3 | 2 | 1 | 5 | 6 | 1 | 7 | 3 | 3 | 8 | 1 | 3 | 3 | 5 | 3 | 3 | 3 | 3 | 3 | 6 | 6 | | 0 | 1 | 3 |
| ALOEWHOLLEAF 3.0 | ANIMAL ID | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | males
(cont...) | |
| | | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | | |
| | | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 1 | 1 | 1 | 1 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 5 | 5 | 5 | 5 | 5 | | 5 |
| | | 3 | 3 | 3 | 3 | 4 | 4 | 4 | 4 | 7 | 7 | 7 | 4 | 4 | 4 | 4 | 5 | 5 | 5 | 5 | 4 | 4 | 4 | 4 | 5 | | |
| | | 1 | 2 | 3 | 4 | 1 | 2 | 3 | 4 | 1 | 2 | 3 | 4 | 1 | 2 | 3 | 4 | 1 | 2 | 3 | 4 | 1 | 2 | 3 | 4 | 1 | |

Basophilic Focus, Multiple
 Cyst
 Infiltration Cellular, Lymphocyte
 Infiltration Cellular, Polymorphonuclear
 Inflammation, Chronic Active
 Karyomegaly
 Necrosis
 Tension Lipidosis
 Vacuolization Cytoplasmic

1 2 1 1

Mesentery
 Fat, Necrosis

+

Pancreas
 Infiltration Cellular, Lymphocyte
 Vacuolization Cytoplasmic

+ + + + + + + + + + + + + + + + + + + + A +
 2 2 1

Salivary Glands
 Infiltration Cellular, Lymphocyte

+ + + + + + + + + + + + + + + + + + + + A +
 1 1 1 2 1 1 1 1 1 1 1 1 1 1 1 1 1 1

Stomach, Forestomach

+ + + + + + + + + + + A + + + + + + + + + A +

Stomach, Glandular
 Inflammation, Chronic Active
 Epithelium, Hyperplasia

+ + + + + + + + + + + + + + + + + + + + A +
 2 4

CARDIOVASCULAR SYSTEM

Blood Vessel

+ + + + + + + + + + + + + + + + + + + + A +

* .. Total animals with tissue examined microscopically; Total animals with lesion and mean severity grade
 + .. Tissue examined microscopically
 X .. Lesion present
 I .. Insufficient tissue
 M .. Missing tissue
 A .. Autolysis precludes evaluation
 BLANK .. Not examined microscopically

1-4 .. Lesion qualified as:
 1) Minimal 3) Moderate
 2) Mild 4) Marked

TDMS No. 20116 - 04
 Test Type: CHRONIC
 Route: DOSED WATER
 Species/Strain: MICE/B6C3F1/NCTR

P09: NON-NEOPLASTIC LESIONS BY INDIVIDUAL ANIMAL
 Aloe vera whole leaf extract (native)
 CAS Number: ALOEVLEAFEXT

Date Report Requested: 01/15/2010
 Time Report Requested: 14:39:08
 First Dose M/F: 04/19/05 / 04/19/05
 Lab: NCTR

| C57BL/6N XC3H/HEN MTV-NCTR
MICE MALE
ALOEWHOLLEAF 3.0 | DAY ON TEST | | | | | | | | | | | | | | | | | | | | | | | | ANIMAL ID | males
(cont...) |
|-------------------------------------------------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|----------------------------|-----------|--------------------|
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9 | 0
7
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4 | 0
6
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7
3
6 | | | |
| | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0
0
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3
1 | | |

| | | | | | | | | | | | | | | | | | | | | | | | | | |
|-------------------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| Heart
Cardiomyopathy | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | A | + |
|-------------------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|

ENDOCRINE SYSTEM

| | | | | | | | | | | | | | | | | | | | | | | | | | | |
|-----------------------------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| Adrenal Cortex | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | A | + | |
| Accessory Adrenal Cortical Nodule | | | | | X | | | | | | | | | | | | | | | | | | | | | |
| Cyst | | | | | | | | | | | | | 2 | | | | | | | | | | | | | |
| Hypertrophy | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Subcapsular, Hyperplasia | 1 | 1 | | | 2 | 1 | 2 | | | | 1 | 1 | 1 | | 1 | | 1 | 1 | 2 | 1 | 2 | 1 | 1 | | | |
| Adrenal Medulla | + | + | + | + | + | + | + | + | + | + | + | + | A | + | + | + | + | + | + | + | + | + | + | A | + | |
| Hyperplasia | | | | | | 2 | 2 | | | | 3 | | | | | | | | | | | | | | | |
| Islets, Pancreatic | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | A | + | |
| Hyperplasia | | | | | | | | | | | | | | | | | | | 2 | 4 | | | | | | |
| Parathyroid Gland | + | + | + | + | + | + | + | M | + | + | + | + | + | M | M | + | + | + | M | + | + | + | + | A | M | |
| Pituitary Gland | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | M | + | + | + | A | + |
| Pars Distalis, Cyst | | | | | | | | | | | 1 | | | | | | | | | | | | | | | |
| Thyroid Gland | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | A | + | |
| Infiltration Cellular, Lymphocyte | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Follicle, Degeneration | | | | | | | 1 | | | | | | | | | | | | | | | | | | | |

GENERAL BODY SYSTEM

NONE

* .. Total animals with tissue examined microscopically; Total animals with lesion and mean severity grade
 + .. Tissue examined microscopically
 X .. Lesion present
 I .. Insufficient tissue
 M .. Missing tissue
 A .. Autolysis precludes evaluation
 BLANK .. Not examined microscopically
 1-4 .. Lesion qualified as:
 1) Minimal 3) Moderate
 2) Mild 4) Marked

TDMS No. 20116 - 04
 Test Type: CHRONIC
 Route: DOSED WATER
 Species/Strain: MICE/B6C3F1/NCTR

P09: NON-NEOPLASTIC LESIONS BY INDIVIDUAL ANIMAL
 Aloe vera whole leaf extract (native)
 CAS Number: ALOEVLEAFEXT

Date Report Requested: 01/15/2010
 Time Report Requested: 14:39:08
 First Dose M/F: 04/19/05 / 04/19/05
 Lab: NCTR

| C57BL/6N XC3H/HEN MTV-NCTR
MICE MALE
ALOEWHOLLEAF 3.0 | DAY ON TEST | | | | | | | | | | | | | | | | | | | | | | | | males
(cont...) |
|-------------------------------------------------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|
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| ANIMAL ID | 0
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GENITAL SYSTEM

| | | | | | | | | | | | | | | | | | | | | | | | | |
|----------------------------------------------------------------------------------------------------------------------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| Epididymis
Inflammation, Chronic Active
Serosa, Hyperplasia | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | A | + |
| Preputial Gland
Cyst
Degeneration
Infiltration Cellular, Lymphocyte
Inflammation, Suppurative
Fat, Necrosis | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | A | + |
| Prostate
Infiltration Cellular, Lymphocyte
Inflammation, Chronic Active | + | + | + | + | + | + | + | + | + | + | + | A | + | + | + | + | + | + | + | + | + | + | A | + |
| Seminal Vesicle
Lumen, Dilatation | + | + | + | + | + | + | + | + | + | + | + | A | + | + | + | + | + | + | + | + | + | + | A | + |
| Testes
Interstitial Cell, Hyperplasia
Seminiferous Tubule, Degeneration | + | + | + | + | + | + | + | + | + | + | + | A | + | + | + | + | + | + | + | + | + | + | A | + |

HEMATOPOIETIC SYSTEM

| | | | | | | | | | | | | | | | | | | | | | | | | |
|----------------------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| Bone Marrow
Hyperplasia | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | A | + |
| Lymph Node | | | | | + | + | | | | | | + | | | | | | | | | | | | + |

* .. Total animals with tissue examined microscopically; Total animals with lesion and mean severity grade
 + .. Tissue examined microscopically
 X .. Lesion present
 I .. Insufficient tissue
 M .. Missing tissue
 A .. Autolysis precludes evaluation
 BLANK .. Not examined microscopically
 1-4 .. Lesion qualified as:
 1) Minimal 3) Moderate
 2) Mild 4) Marked

TDMS No. 20116 - 04
 Test Type: CHRONIC
 Route: DOSED WATER
 Species/Strain: MICE/B6C3F1/NCTR

P09: NON-NEOPLASTIC LESIONS BY INDIVIDUAL ANIMAL

Aloe vera whole leaf extract (native)

CAS Number: ALOEVLEAFEXT

Date Report Requested: 01/15/2010

Time Report Requested: 14:39:08

First Dose M/F: 04/19/05 / 04/19/05

Lab: NCTR

| C57BL/6N XC3H/HEN MTV-NCTR
MICE MALE
ALOEWHOLLEAF 3.0 | DAY ON TEST | | | | | | | | | | | | | | | | | | | | | | | | males
(cont...) |
|-------------------------------------------------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|
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1 |

Axillary, Hyperplasia, Lymphoid
 Inguinal, Hyperplasia, Lymphoid
 Inguinal, Infiltration Cellular, Plasma Cell 2
 Lumbar, Erythrophagocytosis
 Lumbar, Hyperplasia, Lymphoid
 Lumbar, Infiltration Cellular, Plasma Cell 3
 Pancreatic, Erythrophagocytosis
 Pancreatic, Infiltration Cellular, Plasma Cell
 Renal, Erythrophagocytosis
 Renal, Infiltration Cellular, Plasma Cell 2

Lymph Node, Mandibular
 Hyperplasia, Lymphoid
 Infiltration Cellular, Plasma Cell

+ + + + + + + + + + + + + + + + + + + + + + A +
 2 2

Lymph Node, Mesenteric
 Angiectasis
 Hematopoietic Cell Proliferation
 Hemorrhage
 Hyperplasia, Lymphoid
 Infiltration Cellular, Histiocyte
 Infiltration Cellular, Plasma Cell
 Infiltration Cellular, Polymorphonuclear
 Thrombus
 Sinus, Dilatation

+ + + + + + A + + + + M + + + + + + + + + + A +
 2 2
 2 2 2
 2 2 2 4
 1 2 2 4 2 2 2 4
 2 2 3
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 2 2
 4

Spleen
 Hematopoietic Cell Proliferation
 Hyperplasia, Lymphoid

+ + + + + + A + + + + + + + + + + + + A +
 2 3
 2 2 2 3 4 3 3 2 3 4 2
 2 3 3 2 3 4 2

* .. Total animals with tissue examined microscopically; Total animals with lesion and mean severity grade
 + .. Tissue examined microscopically
 X .. Lesion present
 I .. Insufficient tissue
 M .. Missing tissue
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 BLANK .. Not examined microscopically
 1-4 .. Lesion qualified as:
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 2) Mild 4) Marked

TDMS No. 20116 - 04
 Test Type: CHRONIC
 Route: DOSED WATER
 Species/Strain: MICE/B6C3F1/NCTR

P09: NON-NEOPLASTIC LESIONS BY INDIVIDUAL ANIMAL
 Aloe vera whole leaf extract (native)
 CAS Number: ALOEVLEAFEXT

Date Report Requested: 01/15/2010
 Time Report Requested: 14:39:08
 First Dose M/F: 04/19/05 / 04/19/05
 Lab: NCTR

| C57BL/6N XC3H/HEN MTV-NCTR
MICE MALE
ALOEWHOLLEAF 3.0 | DAY ON TEST | | | | | | | | | | | | | | | | | | | | ANIMAL ID | males
(cont...) | | |
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2 | 0
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4 | 0
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4 | 0
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1 |

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|-----------------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| Thymus | + | + | + | M | + | + | + | A | + | + | + | + | + | + | + | + | + | + | + | + | + | + | M | A | + |
| Atrophy | | | | | | 3 | 2 | | | | 4 | 2 | 3 | 4 | 2 | 4 | 2 | 3 | | | 2 | 3 | | | |
| Hyperplasia, Lymphoid | | | | | | | | | 1 | | | | | | | | | | | | | | | | |

INTEGUMENTARY SYSTEM

| | | | | | | | | | | | | | | | | | | | | | | | | | |
|------------------------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| Mammary Gland | M | M | M | M | M | M | M | M | M | M | M | M | M | M | M | M | M | M | M | + | M | M | M | M | M |
| Skin | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |
| Hemorrhage | | | | | | | | | | | | | | | | | | | | | | | | | |
| Inflammation, Suppurative | | | | | | | | | | | | | | | | | | | | | | | | | |
| Inflammation, Chronic Active | | | | | | | | 3 | | | | | 3 | | | | | | | | | | | | |
| Necrosis | | | | | | | | | | | | | | | | | | | | | | | | | |
| Ulcer | | | | | | | | 1 | 2 | | | | 4 | | | | | | | | | | | | |
| Epithelium, Hyperplasia | | | | | | | | 2 | 2 | | | | | | | | | | | | | | | | |

MUSCULOSKELETAL SYSTEM

| | | | | | | | | | | | | | | | | | | | | | | | | | |
|-------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| Bone, Femur | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | A | + |
|-------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|

NERVOUS SYSTEM

| | | | | | | | | | | | | | | | | | | | | | | | | | |
|-------------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| Brain, Brain Stem | + | + | + | + | + | + | + | + | + | + | + | + | A | + | + | + | + | + | + | + | + | + | + | A | + |
| Brain, Cerebellum | + | + | + | + | + | + | + | + | + | + | + | + | A | + | + | + | + | + | + | + | + | + | + | A | + |
| Brain, Cerebrum | + | + | + | + | + | + | + | A | + | + | + | + | A | + | + | + | + | + | + | + | + | + | + | A | + |
| Mineralization | | 2 | 1 | | | | | | 1 | 2 | | | | 2 | 1 | 1 | 1 | 1 | 1 | | 1 | | 1 | | |

RESPIRATORY SYSTEM

* .. Total animals with tissue examined microscopically; Total animals with lesion and mean severity grade
 + .. Tissue examined microscopically
 X .. Lesion present
 I .. Insufficient tissue

M .. Missing tissue
 A .. Autolysis precludes evaluation
 BLANK .. Not examined microscopically

1-4 .. Lesion qualified as:
 1) Minimal 3) Moderate
 2) Mild 4) Marked

TDMS No. 20116 - 04
 Test Type: CHRONIC
 Route: DOSED WATER
 Species/Strain: MICE/B6C3F1/NCTR

P09: NON-NEOPLASTIC LESIONS BY INDIVIDUAL ANIMAL

Aloe vera whole leaf extract (native)

CAS Number: ALOEVLEAFEXT

Date Report Requested: 01/15/2010

Time Report Requested: 14:39:08

First Dose M/F: 04/19/05 / 04/19/05

Lab: NCTR

| C57BL/6N XC3H/HEN MTV-NCTR
MICE MALE
ALOEWHOLLEAF 3.0 | DAY ON TEST | | | | | | | | | | | | | | | | | | | | | | | | males
(cont...) |
|-------------------------------------------------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|
| | 0
4
3
1 | 0
7
3
6 | 0
5
2
6 | 0
5
1
1 | 0
6
5
4 | 0
5
6
2 | 0
6
1
7 | 0
7
3
5 | 0
7
3
6 | 0
7
3
6 | 0
6
8
9 | 0
7
1
4 | 0
6
3
7 | 0
7
3
6 | 0
5
3
5 | 0
7
3
6 | 0
7
3
6 | 0
7
3
6 | 0
7
3
6 | 0
7
3
6 | 0
3
6
5 | 0
7
0
3 | 0
5
1
5 | 0
7
3
6 | |
| ANIMAL ID | 0
0
0
3
1 | 0
0
0
3
2 | 0
0
0
3
3 | 0
0
0
3
4 | 0
0
0
4
1 | 0
0
0
4
2 | 0
0
0
4
3 | 0
0
0
7
4 | 0
0
0
7
1 | 0
0
0
7
2 | 0
0
0
7
3 | 0
0
0
7
4 | 0
0
0
7
1 | 0
0
0
3
4 | 0
0
0
3
4 | 0
0
0
4
4 | 0
0
0
4
1 | 0
0
0
5
2 | 0
0
0
5
3 | 0
0
0
5
4 | 0
0
0
5
1 | 0
0
0
5
2 | 0
0
0
5
3 | 0
0
0
5
4 | 0
0
0
5
4 |

| | | | | | | | | | | | | | | | | | | | | | | | | | |
|-------------------------------------------------------------------------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| Lung
Infiltration Cellular, Lymphocyte
Alveolar Epithelium, Hyperplasia | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | A | + |
| | | 2 | | | | | | | | | 2 | | | | | | | | | | | | 2 | | |
| Nose
Hyaline Droplet | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | A | + |
| | | 2 | | | | | | | | | 1 | | 2 | | 3 | 3 | | | | 1 | 1 | | | | |
| Trachea | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | A | + |

SPECIAL SENSES SYSTEM

| | | | | | | | | | | | | | | | | | | | | | | | | | |
|------------------------------------------------------------------------------------------------------------------------------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| Eye
Cataract | + | + | + | + | + | + | + | A | + | + | + | + | A | + | + | + | + | + | + | + | + | + | + | A | + |
| | | | | | | 1 | | | | | | | | | | | | | | | | | | | |
| Harderian Gland
Infiltration Cellular, Lymphocyte
Inflammation, Chronic Active
Acinus, Degeneration
Acinus, Dilatation | + | + | + | + | + | + | + | + | + | + | + | + | A | + | + | + | + | + | + | + | + | + | + | A | + |
| | | | | 2 | | | | | | | | | | | 1 | | | | | | | | | | |

URINARY SYSTEM

| | | | | | | | | | | | | | | | | | | | | | | | | | |
|-----------------------------------------------------------------------------------------------------------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| Kidney
Cyst Multilocular
Infiltration Cellular, Lymphocyte
Inflammation, Chronic Active
Nephropathy | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | A | + |
| | | | | | | | | | | | | 4 | | | | | | | | | | | | | |
| | | | | 2 | | 1 | 1 | | 1 | | 1 | | | 2 | 1 | | 1 | | | | | | | | |
| | | | | | | | | 2 | | | | | | | | | | | | | | | | | |
| | | | | | | | | | | 1 | | 2 | | | | | 1 | | 1 | 1 | 1 | 1 | 1 | 1 | 3 |
| Urethra | | | | | | | | + | | | | | | | | | | | | | | | | | |

* .. Total animals with tissue examined microscopically; Total animals with lesion and mean severity grade
 + .. Tissue examined microscopically
 X .. Lesion present
 I .. Insufficient tissue
 M .. Missing tissue
 A .. Autolysis precludes evaluation
 BLANK .. Not examined microscopically
 1-4 .. Lesion qualified as:
 1) Minimal 3) Moderate
 2) Mild 4) Marked

TDMS No. 20116 - 04
 Test Type: CHRONIC
 Route: DOSED WATER
 Species/Strain: MICE/B6C3F1/NCTR

P09: NON-NEOPLASTIC LESIONS BY INDIVIDUAL ANIMAL
 Aloe vera whole leaf extract (native)
 CAS Number: ALOEVLEAFEXT

Date Report Requested: 01/15/2010
 Time Report Requested: 14:39:08
 First Dose M/F: 04/19/05 / 04/19/05
 Lab: NCTR

| | | | | | | | | | | | | | | | | | | | | | | | | | |
|--------------------------------------------------------------------------------------|-------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|--|
| C57BL/6N XC3H/HEN MTV-NCTR
MICE MALE

ALOEWHOLLEAF 3.0 | DAY ON TEST | 04 | 07 | 05 | 05 | 06 | 05 | 06 | 01 | 07 | 07 | 06 | 07 | 06 | 07 | 05 | 07 | 07 | 07 | 07 | 03 | 07 | 05 | 07 | |
| | ANIMAL ID | 31 | 36 | 32 | 31 | 35 | 36 | 31 | 37 | 33 | 33 | 38 | 31 | 33 | 38 | 35 | 33 | 33 | 33 | 33 | 36 | 30 | 31 | 33 | |
| | ANIMAL ID | 00 | 00 | 00 | 00 | 00 | 00 | 00 | 00 | 00 | 00 | 00 | 00 | 00 | 00 | 00 | 00 | 00 | 00 | 00 | 00 | 00 | 00 | 00 | |
| | ANIMAL ID | 00 | 00 | 00 | 00 | 00 | 00 | 00 | 01 | 01 | 01 | 01 | 03 | 03 | 03 | 03 | 03 | 03 | 03 | 05 | 05 | 05 | 05 | 05 | |
| | ANIMAL ID | 31 | 32 | 33 | 34 | 31 | 32 | 34 | 37 | 34 | 31 | 32 | 34 | 31 | 34 | 34 | 31 | 32 | 34 | 31 | 32 | 34 | 33 | 31 | |
| | | Urinary Bladder + + + + + + + + + + + A + + + + + + + + + + A +
Infiltration Cellular, Lymphocyte Inflammation, Chronic Active Lumen, Dilatation 1 1 4 2 | | | | | | | | | | | | | | | | | | | | | | | |

males
(cont...)

* .. Total animals with tissue examined microscopically; Total animals with lesion and mean severity grade
 + .. Tissue examined microscopically
 X .. Lesion present
 I .. Insufficient tissue
 M .. Missing tissue
 A .. Autolysis precludes evaluation
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 Lab: NCTR

| C57BL/6N XC3H/HEN MTV-NCTR
MICE MALE
ALOEWHOLLEAF 3.0 | DAY ON TEST | | | | | | | | | | | | | | | | | | | | * TOTALS | | | |
|-------------------------------------------------------------|-------------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|----------|-------|-------|-------|
| | 0736 | 0736 | 0736 | 0736 | 0736 | 0768 | 0776 | 0777 | 0777 | 0777 | 0777 | 0777 | 0777 | 0777 | 0777 | 0777 | 0777 | 0777 | 0777 | 0777 | | 0777 | | |
| ANIMAL ID | 00552 | 00553 | 00554 | 00571 | 00572 | 00573 | 00574 | 00577 | 00578 | 00579 | 00581 | 00582 | 00583 | 00584 | 00585 | 00586 | 00587 | 00588 | 00589 | 00591 | 00592 | 00593 | 00594 | 00595 |

ALIMENTARY SYSTEM

| | | | | | | | | | | | | | | | | | | | | | | | | | | |
|---------------------------------------------------------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|------------------|----|
| Esophagus | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | M | + | + | + | + | + | + | 47 | |
| Gallbladder | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | A | + | A | + | + | + | + | 43 | |
| Intestine Large, Ascending Colon
Goblet Cell, Hyperplasia | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | A | + | A | + | + | + | + | 42
19 1.6 | |
| Intestine Large, Cecum
Goblet Cell, Hyperplasia | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | A | + | A | + | + | + | + | 43
1 1.0 | |
| Intestine Large, Descending Colon
Goblet Cell, Hyperplasia | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | A | + | A | + | + | + | + | 43
17 1.4 | |
| Intestine Large, Rectum | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | M | + | + | A | + | A | + | + | 42 |
| Intestine Large, Transverse Colon
Goblet Cell, Hyperplasia | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | A | + | A | + | + | + | 43
22 1.6 | |
| Intestine Small, Duodenum | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | A | + | A | + | + | + | 44 | |
| Intestine Small, Ileum | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | A | + | A | + | + | + | 43 | |
| Intestine Small, Jejunum
Hyperplasia, Lymphoid | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | A | + | A | + | + | + | 43
1 2.0 | |
| Liver
Angiectasis
Basophilic Focus | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | A | + | + | + | 46
1 2.0
5 | |

* .. Total animals with tissue examined microscopically; Total animals with lesion and mean severity grade
 + .. Tissue examined microscopically
 X .. Lesion present
 I .. Insufficient tissue
 M .. Missing tissue
 A .. Autolysis precludes evaluation
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MICE MALE
ALOEWHOLLEAF 3.0 | DAY ON TEST | | | | | | | | | | | | | | | | | | | | * TOTALS | | |
|-------------------------------------------------------------|-------------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|----------|------|-----|
| | 0736 | 0736 | 0736 | 0736 | 0736 | 0768 | 0768 | 0768 | 0768 | 0768 | 0768 | 0768 | 0768 | 0768 | 0768 | 0768 | 0768 | 0768 | 0768 | 0768 | | 0768 | |
| ANIMAL ID | 00552 | 00553 | 00554 | 00571 | 00572 | 00573 | 00574 | 00578 | 00579 | 00582 | 00583 | 00584 | 00588 | 00588 | 00588 | 00588 | 00588 | 00588 | 00588 | 00588 | 00588 | | |
| Basophilic Focus, Multiple Cyst | | | | | | | | | | | | | | | | | | | | | | 1 | |
| Infiltration Cellular, Lymphocyte | | | | | | | | | | | | | | | | | | | | | | 1 | 2.0 |
| Infiltration Cellular, Polymorphonuclear | | | | | | | | | | | | | | | | | | | | | | 4 | 1.3 |
| Inflammation, Chronic Active | | | | | | | | | | | | | | | | | | | | | | 1 | 2.0 |
| Karyomegaly | | | | | | | | | | | | | | | | | | | | | | 4 | 4.0 |
| Necrosis | | | | | | | | | | | | | | | | | | | | | | 3 | 3.0 |
| Tension Lipidosis | | | | | | | | | | | | | | | | | | | | | | 1 | 1.0 |
| Vacuolization Cytoplasmic | | | | | | | | | | | | | | | | | | | | | | 3 | 2.0 |
| Mesentery Fat, Necrosis | | | | | | | | | | | | | | | | | | | | | | 4 | 3.0 |
| Pancreas | | | | | | | | | | | | | | | | | | | | | | 45 | 1.5 |
| Infiltration Cellular, Lymphocyte | | | | | | | | | | | | | | | | | | | | | | 1 | 1.0 |
| Vacuolization Cytoplasmic | | | | | | | | | | | | | | | | | | | | | | 1 | 1.0 |
| Salivary Glands | | | | | | | | | | | | | | | | | | | | | | 45 | 1.2 |
| Infiltration Cellular, Lymphocyte | | | | | | | | | | | | | | | | | | | | | | 29 | 1.2 |
| Stomach, Forestomach | | | | | | | | | | | | | | | | | | | | | | 44 | |
| Stomach, Glandular | | | | | | | | | | | | | | | | | | | | | | 45 | |
| Inflammation, Chronic Active | | | | | | | | | | | | | | | | | | | | | | 1 | 2.0 |
| Epithelium, Hyperplasia | | | | | | | | | | | | | | | | | | | | | | 2 | 3.0 |
| CARDIOVASCULAR SYSTEM | | | | | | | | | | | | | | | | | | | | | | | |
| Blood Vessel | | | | | | | | | | | | | | | | | | | | | | 47 | |

* .. Total animals with tissue examined microscopically; Total animals with lesion and mean severity grade
 + .. Tissue examined microscopically
 X .. Lesion present
 I .. Insufficient tissue
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|-------------------------------------------------------------|-------------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|----------|------|
| | 0736 | 0736 | 0736 | 0736 | 0736 | 0768 | 0768 | 0768 | 0768 | 0768 | 0768 | 0768 | 0768 | 0768 | 0768 | 0768 | 0768 | 0768 | 0768 | 0768 | | 0768 |
| ANIMAL ID | 0052 | 0053 | 0054 | 0057 | 0057 | 0057 | 0057 | 0057 | 0057 | 0057 | 0057 | 0057 | 0057 | 0057 | 0057 | 0057 | 0057 | 0057 | 0057 | 0057 | 0057 | 0057 |
| | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| | 7 | 7 | 7 | 7 | 7 | 6 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 6 | 7 | 6 | 7 | 6 | 6 | 7 | 7 |
| | 3 | 3 | 3 | 3 | 3 | 6 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 8 | 2 | 1 | 0 | 1 | 5 | 3 | 3 |
| | 6 | 6 | 6 | 6 | 6 | 8 | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 9 | 9 | 9 | 9 | 9 | 9 | 6 | 6 |

| | | | | | | | | | | | | | | | | | | | | | | | |
|-------------------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|-------------|
| Heart
Cardiomyopathy | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 47
1 1.0 |
|-------------------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|-------------|

ENDOCRINE SYSTEM

| | | | | | | | | | | | | | | | | | | | | | | | |
|-----------------------------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|----------------------|
| Adrenal Cortex | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | A | + | A | + | + | + | 45
1
1 2.0 |
| Accessory Adrenal Cortical Nodule | | | | | | | | | | | | | | | | | | | | | | | 1 |
| Cyst | | | | | | | | | | | | | | | | | | | | | | | 1 2.0 |
| Hypertrophy | | | | | | | | | | 2 | | | | | | | | | | | | | 1 2.0 |
| Subcapsular, Hyperplasia | 4 | 2 | 2 | 1 | 1 | 2 | 2 | 1 | 3 | 2 | 1 | | | 2 | 1 | 2 | 1 | | 2 | | 2 | 1 | 35 1.5 |
| Adrenal Medulla | + | + | + | + | + | + | + | + | + | + | + | M | + | + | + | + | + | + | + | A | + | + | 44
4 2.3 |
| Hyperplasia | | | | | | | | | | | | 2 | | | | | | | | | | | 4 2.3 |
| Islets, Pancreatic | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | A | + | A | + | 45
2 3.0 |
| Hyperplasia | | | | | | | | | | | | | | | | | | | | | | | 2 3.0 |
| Parathyroid Gland | + | + | + | + | + | + | + | + | + | + | + | + | M | + | + | + | + | + | + | + | + | + | 41 |
| Pituitary Gland | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | A | + | 45
3 1.7 |
| Pars Distalis, Cyst | | | | | | | | | | | | | | | | | | | | | | | 3 1.7 |
| Thyroid Gland | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | A | + | A | + | 45
3 1.0
4 1.5 |
| Infiltration Cellular, Lymphocyte | | | | | | | | | | | | | | | | | | | | | | | 3 1.0 |
| Follicle, Degeneration | | | | | | | | | | 1 | | | | | | | | | | | | | 4 1.5 |

GENERAL BODY SYSTEM

| | | | | | | | | | | | | | | | | | | | | | | | |
|------|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|
| NONE | | | | | | | | | | | | | | | | | | | | | | | |
|------|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|

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MICE MALE
ALOEWHOLLEAF 3.0 | DAY ON TEST | | | | | | | | | | | | | | | | | | | | * TOTALS | |
|-------------------------------------------------------------|-------------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|----------|------|
| | 0736 | 0736 | 0736 | 0736 | 0736 | 0768 | 0776 | 0777 | 0777 | 0777 | 0777 | 0777 | 0777 | 0777 | 0777 | 0777 | 0777 | 0777 | 0777 | 0777 | | 0777 |
| ANIMAL ID | 00552 | 00553 | 00554 | 00571 | 00572 | 00573 | 00577 | 00578 | 00581 | 00582 | 00583 | 00584 | 00588 | 00588 | 00588 | 00588 | 00588 | 00588 | 00588 | 00588 | 00588 | |

GENITAL SYSTEM

| | | | | | | | | | | | | | | | | | | | | | | | | |
|-----------------------------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|----|-----|
| Epididymis | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | A | + | A | + | + | + | 45 | |
| Inflammation, Chronic Active | | | | | | | | | | | | | | | | 2 | | | | | | | 1 | 2.0 |
| Serosa, Hyperplasia | | | | | | | | | | | | | | | | | | | | | | | 1 | 2.0 |
| Preputial Gland | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | A | + | A | + | + | + | 45 | |
| Cyst | | | | | | 2 | | | | | | | | | | | | | | | | | 4 | 2.5 |
| Degeneration | 2 | 3 | 4 | | | | | 4 | 2 | | | | | | 3 | | | | | 3 | 4 | 2 | 17 | 2.8 |
| Infiltration Cellular, Lymphocyte | | | | | | | | | | | 2 | | | | | | 1 | | | | | | 5 | 1.8 |
| Inflammation, Suppurative | | | | | | | | | | | | | | | | | | | | | | | 1 | 2.0 |
| Fat, Necrosis | | 4 | | | | | | | | | | | | | | | | | | | | | 1 | 4.0 |
| Prostate | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | A | + | M | + | + | + | 44 | |
| Infiltration Cellular, Lymphocyte | | | | | | | | | | 1 | 1 | 1 | | | | | | | | | | 1 | 6 | 1.0 |
| Inflammation, Chronic Active | | | | | | | | | | | | | | | | | | | | | | | 1 | 1.0 |
| Seminal Vesicle | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | A | + | A | + | + | + | 44 | |
| Lumen, Dilatation | | 2 | | | 2 | | | | | | | | | | | | | | | | | | 5 | 2.2 |
| Testes | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | A | + | A | + | + | + | 44 | |
| Interstitial Cell, Hyperplasia | 1 | | | | | | | | | | | | | | | | | | | | | | 1 | 1.0 |
| Seminiferous Tubule, Degeneration | | | | | | | | | 2 | | | | | | 2 | | | | | | | | 3 | 2.0 |

HEMATOPOIETIC SYSTEM

| | | | | | | | | | | | | | | | | | | | | | | | | |
|-------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|----|-----|
| Bone Marrow | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | A | + | A | + | + | + | 45 | |
| Hyperplasia | | | | | | 4 | | | | | | | | | | | 3 | | | | | | 7 | 3.3 |
| Lymph Node | | | | | | | + | | | | | | | | + | | | | | | + | | 7 | |

* .. Total animals with tissue examined microscopically; Total animals with lesion and mean severity grade
 + .. Tissue examined microscopically
 X .. Lesion present
 I .. Insufficient tissue
 M .. Missing tissue
 A .. Autolysis precludes evaluation
 BLANK .. Not examined microscopically
 1-4 .. Lesion qualified as:
 1) Minimal 3) Moderate
 2) Mild 4) Marked

TDMS No. 20116 - 04
 Test Type: CHRONIC
 Route: DOSED WATER
 Species/Strain: MICE/B6C3F1/NCTR

P09: NON-NEOPLASTIC LESIONS BY INDIVIDUAL ANIMAL
 Aloe vera whole leaf extract (native)
 CAS Number: ALOEVLEAFEXT

Date Report Requested: 01/15/2010
 Time Report Requested: 14:39:08
 First Dose M/F: 04/19/05 / 04/19/05
 Lab: NCTR

| C57BL/6N XC3H/HEN MTV-NCTR
MICE MALE
ALOEWHOLLEAF 3.0 | DAY ON TEST | | | | | | | | | | | | | | | | | | | | * TOTALS | | | | | | | |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|----------|------|-------|-------|-----|-------|-------|---------------------------------------------------------------------------------|
| | 0736 | 0736 | 0736 | 0736 | 0736 | 0768 | 0776 | 0777 | 0777 | 0777 | 0777 | 0777 | 0777 | 0777 | 0777 | 0777 | 0777 | 0777 | 0777 | 0777 | | 0777 | | | | | | |
| ANIMAL ID | 00552 | 00553 | 00554 | 00571 | 00572 | 00573 | 00574 | 00577 | 00578 | 00588 | 00588 | 00588 | 00588 | 00588 | 00588 | 00588 | 00588 | 00588 | 00588 | 00588 | 00588 | | | | | | | |
| Axillary, Hyperplasia, Lymphoid | | | | | | | | | | | | | | | | | | | | | | 3 | 1 3.0 | | | | | |
| Inguinal, Hyperplasia, Lymphoid | | | | | | | | | | | | | | | | | | | | | | | 3 | 1 3.0 | | | | |
| Inguinal, Infiltration Cellular, Plasma Cell | | | | | | | | | | | | | | | | | | | | | | | | 1 | 2.0 | | | |
| Lumbar, Erythrophagocytosis | | | | | | | | | | | | | | | | | | | | | | | | | 4 | 1 4.0 | | |
| Lumbar, Hyperplasia, Lymphoid | | | | | | | | | | | | | | | | | | | | | | | | | 3 | 1 3.0 | | |
| Lumbar, Infiltration Cellular, Plasma Cell | | | | | | | | | | | | | | | | | | | | | | | | | | 1 | 3.0 | |
| Pancreatic, Erythrophagocytosis | | | | | | | | | | | | | | | | | | | | | | | | | | 3 | 1 3.0 | |
| Pancreatic, Infiltration Cellular, Plasma Cell | | | | | | | | | | | | | | | | | | | | | | | | | | 3 | 1 3.0 | |
| Renal, Erythrophagocytosis | | | | | | | | | | | | | | | | | | | | | | | | | | 4 | 1 4.0 | |
| Renal, Infiltration Cellular, Plasma Cell | | | | | | | | | | | | | | | | | | | | | | | | | | 1 | 2.0 | |
| Lymph Node, Mandibular
Hyperplasia, Lymphoid
Infiltration Cellular, Plasma Cell | | | | | | | | | | | | | | | | | | | | | | | | | | | 44 | 2 2.0
1 2.0 |
| Lymph Node, Mesenteric
Angiectasis
Hematopoietic Cell Proliferation
Hemorrhage
Hyperplasia, Lymphoid
Infiltration Cellular, Histiocyte
Infiltration Cellular, Plasma Cell
Infiltration Cellular, Polymorphonuclear
Thrombus
Sinus, Dilatation | | | | | | | | | | | | | | | | | | | | | | | | | | | 43 | 1 2.0
1 2.0
11 2.2
23 2.3
4 2.8
2 4.0
1 3.0
1 4.0
2 2.0 |
| Spleen
Hematopoietic Cell Proliferation
Hyperplasia, Lymphoid | | | | | | | | | | | | | | | | | | | | | | | | | | | 44 | 14 3.4
22 2.5 |

* .. Total animals with tissue examined microscopically; Total animals with lesion and mean severity grade
 + .. Tissue examined microscopically
 X .. Lesion present
 I .. Insufficient tissue
 M .. Missing tissue
 A .. Autolysis precludes evaluation
 BLANK .. Not examined microscopically
 1-4 .. Lesion qualified as:
 1) Minimal 3) Moderate
 2) Mild 4) Marked

TDMS No. 20116 - 04
 Test Type: CHRONIC
 Route: DOSED WATER
 Species/Strain: MICE/B6C3F1/NCTR

P09: NON-NEOPLASTIC LESIONS BY INDIVIDUAL ANIMAL
 Aloe vera whole leaf extract (native)
 CAS Number: ALOEVLEAFEXT

Date Report Requested: 01/15/2010
 Time Report Requested: 14:39:08
 First Dose M/F: 04/19/05 / 04/19/05
 Lab: NCTR

| C57BL/6N XC3H/HEN MTV-NCTR
MICE MALE
ALOEWHOLLEAF 3.0 | DAY ON TEST | | | | | | | | | | | | | | | | | | | | * TOTALS |
|-------------------------------------------------------------|-------------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|----------|
| | 0736 | 0736 | 0736 | 0736 | 0736 | 0768 | 0776 | 0777 | 0777 | 0777 | 0777 | 0777 | 0777 | 0777 | 0777 | 0777 | 0777 | 0777 | 0777 | 0777 | |
| ANIMAL ID | 0052 | 0053 | 0054 | 0057 | 0057 | 0057 | 0057 | 0057 | 0057 | 0057 | 0057 | 0057 | 0057 | 0057 | 0057 | 0057 | 0057 | 0057 | 0057 | 0057 | 0057 |

| | | | | | | | | | | | | | | | | | | | | | | | | |
|--------------------------------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|-----------------|
| Thymus Atrophy Hyperplasia, Lymphoid | + | + | + | + | + | + | + | + | + | + | + | M | + | + | + | M | + | M | + | M | + | + | + | 40 |
| | | | 2 | | 2 | 2 | 2 | 4 | | 1 | | | | 2 | 4 | | 4 | | | 4 | 2 | | | 23 2.7
1 1.0 |

INTEGUMENTARY SYSTEM

| | | | | | | | | | | | | | | | | | | | | | | | | |
|---------------------------------------------------------------------------------------------------------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|----------------------------------------------------|
| Mammary Gland | M | M | M | M | M | M | M | M | M | M | M | M | M | M | M | M | M | M | M | M | M | M | M | 1 |
| Skin Hemorrhage Inflammation, Suppurative Inflammation, Chronic Active Necrosis Ulcer Epithelium, Hyperplasia | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 48 |
| | | | | | | | | | | | | | | | | | | | 4 | | | | | 1 4.0
1 2.0
2 3.0
1 2.0
3 2.3
4 2.0 |

MUSCULOSKELETAL SYSTEM

| | | | | | | | | | | | | | | | | | | | | | | | | |
|-------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|----|
| Bone, Femur | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | A | + | + | + | + | + | 46 |
|-------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|----|

NERVOUS SYSTEM

| | | | | | | | | | | | | | | | | | | | | | | | | |
|--------------------------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|--------|
| Brain, Brain Stem | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | A | + | A | + | + | + | 44 |
| Brain, Cerebellum | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | A | + | A | + | + | + | 44 |
| Brain, Cerebrum Mineralization | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | A | + | A | + | + | + | 43 |
| | 1 | 1 | | | 1 | 1 | | | 1 | 2 | 1 | 1 | | 2 | 1 | | | | | | | 1 | 1 | 24 1.2 |

RESPIRATORY SYSTEM

* .. Total animals with tissue examined microscopically; Total animals with lesion and mean severity grade
 + .. Tissue examined microscopically
 X .. Lesion present
 I .. Insufficient tissue
 M .. Missing tissue
 A .. Autolysis precludes evaluation
 BLANK .. Not examined microscopically
 1-4 .. Lesion qualified as:
 1) Minimal 3) Moderate
 2) Mild 4) Marked

TDMS No. 20116 - 04
 Test Type: CHRONIC
 Route: DOSED WATER
 Species/Strain: MICE/B6C3F1/NCTR

P09: NON-NEOPLASTIC LESIONS BY INDIVIDUAL ANIMAL

Aloe vera whole leaf extract (native)

CAS Number: ALOEVLEAFEXT

Date Report Requested: 01/15/2010

Time Report Requested: 14:39:08

First Dose M/F: 04/19/05 / 04/19/05

Lab: NCTR

| C57BL/6N XC3H/HEN MTV-NCTR
MICE MALE
ALOEWHOLLEAF 3.0 | DAY ON TEST | | | | | | | | | | | | | | | | | | | | * TOTALS | |
|------------------------------------------------------------------------------------------------------------------------------------|-------------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|----------|--------|
| | 0736 | 0736 | 0736 | 0736 | 0736 | 0768 | 0768 | 0768 | 0768 | 0768 | 0768 | 0768 | 0768 | 0768 | 0768 | 0768 | 0768 | 0768 | 0768 | 0768 | | 0768 |
| ANIMAL ID | 00552 | 00553 | 00554 | 00557 | 00557 | 00557 | 00557 | 00557 | 00557 | 00557 | 00557 | 00557 | 00557 | 00557 | 00557 | 00557 | 00557 | 00557 | 00557 | 00557 | 00557 | |
| Lung
Infiltration Cellular, Lymphocyte
Alveolar Epithelium, Hyperplasia | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 47 |
| | | | | | | | | | | | | | | | | | | | | | | 1 2.0 |
| | | | | | | | | | | | | | | | | | | | | | | 2 2.0 |
| Nose
Hyaline Droplet | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 47 |
| | | 1 | 2 | | | | 1 | | | | | | | | | 3 | 2 | 2 | | | | 13 1.8 |
| Trachea | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | A | + | A | + | + | 45 |
| SPECIAL SENSES SYSTEM | | | | | | | | | | | | | | | | | | | | | | |
| Eye
Cataract | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | A | + | A | + | + | 43 |
| | | | | | | | | | | | | | | | | | | | | | | 1 1.0 |
| Harderian Gland
Infiltration Cellular, Lymphocyte
Inflammation, Chronic Active
Acinus, Degeneration
Acinus, Dilatation | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | A | + | A | + | + | 44 |
| | | | | | | | | | | | | | | | | | | | | | | 2 1.5 |
| | | | | | | | | | | | | | | | | | | | | | | 1 1.0 |
| | | | | | | | | | | | | | | | | | | | | | | 1 2.0 |
| | | | | | | 2 | | | | | | | | | | | | | | | | 1 2.0 |
| | | | | | | | 2 | | | | | | | | | | | | | | | 1 2.0 |
| URINARY SYSTEM | | | | | | | | | | | | | | | | | | | | | | |
| Kidney
Cyst Multilocular
Infiltration Cellular, Lymphocyte
Inflammation, Chronic Active
Nephropathy | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | A | + | A | + | + | 45 |
| | | | | | | | | | | | | | | | | | | | | | | 1 4.0 |
| | | | | | | | | | | | | | 1 | | 1 | 2 | | | | | | 12 1.3 |
| | | | | | | | | | | | | | | | | | | | | | | 1 2.0 |
| | | | | | | | | | | | | | | | | | | | | | | 20 1.3 |
| | | | | | | | | | | | | | | | | | | | | | | 1 1.0 |
| Urethra | | | | | | | | | | | | | | | | | | | | | | 1 |

* .. Total animals with tissue examined microscopically; Total animals with lesion and mean severity grade
 + .. Tissue examined microscopically
 X .. Lesion present
 I .. Insufficient tissue
 M .. Missing tissue
 A .. Autolysis precludes evaluation
 BLANK .. Not examined microscopically

1-4 .. Lesion qualified as:
 1) Minimal 3) Moderate
 2) Mild 4) Marked

TDMS No. 20116 - 04
 Test Type: CHRONIC
 Route: DOSED WATER
 Species/Strain: MICE/B6C3F1/NCTR

P09: NON-NEOPLASTIC LESIONS BY INDIVIDUAL ANIMAL
 Aloe vera whole leaf extract (native)
 CAS Number: ALOEVLEAFEXT

Date Report Requested: 01/15/2010
 Time Report Requested: 14:39:08
 First Dose M/F: 04/19/05 / 04/19/05
 Lab: NCTR

| DAY ON TEST | C57BL/6N XC3H/HEN MTV-NCTR MICE MALE | | | | | | | | | | | | | | | | | | | | * TOTALS | | | | |
|-----------------------------------|--------------------------------------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|----------|------|---|----|-----|
| | 0736 | 0736 | 0736 | 0736 | 0736 | 0768 | 0768 | 0768 | 0768 | 0768 | 0768 | 0768 | 0768 | 0768 | 0768 | 0768 | 0768 | 0768 | 0768 | 0768 | | 0768 | | | |
| ANIMAL ID | ALOEWHOLLEAF 3.0 | | | | | | | | | | | | | | | | | | | | * TOTALS | | | | |
| | 0052 | 0053 | 0054 | 0057 | 0057 | 0057 | 0057 | 0057 | 0057 | 0057 | 0057 | 0057 | 0057 | 0057 | 0057 | 0057 | 0057 | 0057 | 0057 | 0057 | | 0057 | | | |
| Urinary Bladder | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | A | + | A | + | + | + | 44 | |
| Infiltration Cellular, Lymphocyte | | | | | | | | | | | | | | | | | | | | | | | | 2 | 1.0 |
| Inflammation, Chronic Active | | | | | | | | | | | | | | | | | | | | | | | | 1 | 4.0 |
| Lumen, Dilatation | | | | | | | | | | | | | | | | | | | | | | | | 1 | 2.0 |

*** END OF MALE DATA ***

* .. Total animals with tissue examined microscopically; Total animals with lesion and mean severity grade
 + .. Tissue examined microscopically
 X .. Lesion present
 I .. Insufficient tissue
 M .. Missing tissue
 A .. Autolysis precludes evaluation
 BLANK .. Not examined microscopically

1-4 .. Lesion qualified as:
 1) Minimal 3) Moderate
 2) Mild 4) Marked

| | | | | | | | | | | | | | | | | | | | | | | | |
|------------------------------------------------------------|-----------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|----------------------|---|
| DAY ON TEST | | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| | | 7 | 7 | 7 | 7 | 7 | 6 | 7 | 7 | 7 | 6 | 7 | 7 | 7 | 7 | 6 | 7 | 7 | 6 | 7 | 7 | 6 | 7 |
| C57BL/6N XC3H/HEN MTV-NCTR
MICE FEMALE
CONTROL WATER | ANIMAL ID | 1 | 3 | 3 | 3 | 3 | 7 | 3 | 3 | 3 | 9 | 3 | 1 | 3 | 3 | 5 | 3 | 3 | 3 | 9 | 3 | 3 | 3 |
| | | 6 | 6 | 6 | 6 | 6 | 4 | 6 | 6 | 6 | 3 | 6 | 4 | 6 | 6 | 4 | 6 | 6 | 0 | 6 | 6 | 6 | 6 |
| | | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| | | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| | | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 4 | 4 | 4 | 4 | 5 | 5 |
| | | 5 | 5 | 5 | 5 | 8 | 8 | 8 | 8 | 1 | 1 | 1 | 1 | 3 | 3 | 3 | 3 | 0 | 0 | 0 | 9 | 9 | 9 |
| | | 1 | 2 | 3 | 4 | 1 | 2 | 3 | 4 | 1 | 2 | 3 | 4 | 1 | 2 | 3 | 4 | 1 | 2 | 3 | 4 | 1 | 2 |
| | | | | | | | | | | | | | | | | | | | | | | females
(cont...) | |

ALIMENTARY SYSTEM

| | | | | | | | | | | | | | | | | | | | | | | |
|-----------------------------------------------------------------------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| Esophagus | + | + | + | + | + | + | + | + | + | A | + | + | + | + | + | + | + | + | + | + | + | + |
| Gallbladder | A | + | + | + | + | + | + | + | + | A | + | + | + | + | + | + | + | + | + | + | + | + |
| Intestine Large, Ascending Colon
Goblet Cell, Hyperplasia | + | + | + | + | + | + | + | + | + | A | + | + | + | + | + | + | + | + | + | + | + | + |
| | | | | | | | | | | | | | | | | | | | | | 1 | |
| Intestine Large, Cecum
Hyperplasia, Lymphoid
Goblet Cell, Hyperplasia | A | + | + | + | + | + | + | + | + | A | + | + | + | + | + | + | + | + | + | + | + | + |
| | | | | | | | | | | | | | | | | | | | | | 1 | |
| Intestine Large, Descending Colon | + | + | + | + | + | + | + | + | + | A | + | + | + | + | + | + | + | + | + | + | + | + |
| Intestine Large, Rectum | + | + | + | + | + | + | + | + | + | A | + | + | + | + | + | + | + | + | + | + | + | + |
| Intestine Large, Transverse Colon
Goblet Cell, Hyperplasia | A | + | + | + | + | + | + | + | + | A | + | + | + | + | + | + | + | + | + | + | + | + |
| | | | | | | | | | | | | | | | | | | | | | 1 | 1 |
| Intestine Small, Duodenum | + | + | + | + | + | + | + | + | + | A | + | + | + | + | + | + | + | + | + | + | + | + |
| Intestine Small, Ileum | A | + | + | + | + | + | + | + | + | A | + | + | + | + | + | + | + | + | + | + | + | + |
| Intestine Small, Jejunum | A | + | + | + | + | + | + | + | + | A | + | + | + | + | + | + | + | + | + | + | + | + |
| Liver | + | + | + | + | + | + | + | + | + | A | + | + | + | + | + | + | + | + | + | + | + | + |
| Basophilic Focus | | | | | | | | | | | | | | | | | | | | | | |
| Eosinophilic Focus | | | | | | | | | | | | | | | | | | | | | | |
| Hematopoietic Cell Proliferation | | | | | | | | | | | | | | | | | | | | | | |
| | | | | | | | | | | | | | | | | | | | | | | 3 |

* .. Total animals with tissue examined microscopically; Total animals with lesion and mean severity grade
 + .. Tissue examined microscopically
 X .. Lesion present
 I .. Insufficient tissue
 M .. Missing tissue
 A .. Autolysis precludes evaluation
 BLANK .. Not examined microscopically

1-4 .. Lesion qualified as:
 1) Minimal 3) Moderate
 2) Mild 4) Marked

TDMS No. 20116 - 04
 Test Type: CHRONIC
 Route: DOSED WATER
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 Aloe vera whole leaf extract (native)
 CAS Number: ALOEVLEAFEXT

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 Lab: NCTR

| | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|---------------------------------------------------|-------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|----------------------|-----------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| C57BL/6N XC3H/HEN MTV-NCTR
MICE FEMALE | DAY ON TEST | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | CONTROL WATER | ANIMAL ID | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | | | | |
| | | 7 | 7 | 7 | 7 | 7 | 6 | 7 | 7 | 7 | 6 | 7 | 7 | 7 | 7 | 6 | 7 | 7 | 7 | 6 | 7 | 7 | 7 | 7 | | 7 | | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | | | | | | |
| | | 1 | 3 | 3 | 3 | 3 | 7 | 3 | 3 | 3 | 9 | 3 | 1 | 3 | 3 | 5 | 3 | 3 | 3 | 9 | 3 | 3 | 3 | 3 | | 3 | | 5 | 5 | 5 | 5 | 8 | 8 | 8 | 8 | 8 | 1 | 1 | 1 | 3 | 3 | 3 | 3 | 0 | 0 | 4 | 4 | 4 | 5 | 5 | 5 | 5 | 7 |

females
(cont...)

| | | | | | | | | | | | | | | | | | | | | | | | | | |
|-----------------------------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| Infiltration Cellular, Lymphocyte | | | | | | | | | | 2 | | | | | | | | 2 | 2 | 2 | 1 | | 1 | 2 | |
| Inflammation, Chronic Active | | | | | 2 | | | | | | | 1 | 1 | | | | | | | | | | | 3 | |
| Mixed Cell Focus | | | | | | | | | | | | | | | | | X | | | | | | | | |
| Necrosis | | | | | | | | | | | | | | | | | | | 2 | | | | | | |
| Pigmentation | | | | | | | | | | | | | | | | | | | | | | | | 2 | |
| Tension Lipidosis | | | | 2 | | | | | 1 | | | 2 | | | 2 | | | | | | | | | | |
| Vacuolization Cytoplasmic | | | | 3 | 1 | | | | | | | | 2 | 2 | | 1 | | | | | | 1 | 1 | | 3 |
| Oval Cell, Hyperplasia | | | | | | | | | | | | | | | | | | | 3 | | | | | | |
| Mesentery | | | | | | | | | | + | | | | | | | | | | | | + | + | + | |
| Fat, Hemorrhage | | | | | | | | | | | | | | | | | | | | | | | 4 | | |
| Fat, Necrosis | | | | | | | | | 2 | | | | | | | | | | | | | 2 | 3 | 4 | |
| Oral Mucosa | | | | | | | | | | | | | | | | | | | | | | | | | |
| Pancreas | + | + | + | + | + | + | + | + | M | A | + | + | + | + | + | + | + | + | + | + | + | + | + | + | |
| Infiltration Cellular, Lymphocyte | | | | | 2 | | | | 1 | | 2 | | 2 | | | | | | | | 1 | 1 | | | |
| Vacuolization Cytoplasmic | | | | | | | | | | | | | | | | | | | | | | | | | |
| Acinus, Degeneration | | | | | | | | | | | | | | | | | | | | | | | | 4 | |
| Salivary Glands | A | + | + | + | + | + | + | + | + | M | + | + | + | + | + | + | + | + | + | + | + | + | + | + | |
| Infiltration Cellular, Lymphocyte | | 1 | 1 | 1 | 1 | | | 2 | | 2 | | | | | 1 | 1 | 1 | 2 | 2 | | | 2 | | 2 | |
| Stomach, Forestomach | + | + | + | + | + | + | + | + | + | A | + | + | + | + | + | + | + | + | + | + | + | + | + | + | |
| Keratin Cyst | | | | | | | | | | | | | | | | | | | | | | | | | |
| Stomach, Glandular | + | + | + | + | + | + | + | + | + | A | + | + | + | + | + | + | + | + | + | + | + | + | + | + | |
| Cyst | | | | | | | | | 2 | | | | | | | | | | | | | | | | |

CARDIOVASCULAR SYSTEM

* .. Total animals with tissue examined microscopically; Total animals with lesion and mean severity grade
 + .. Tissue examined microscopically
 X .. Lesion present
 I .. Insufficient tissue
 M .. Missing tissue
 A .. Autolysis precludes evaluation
 BLANK .. Not examined microscopically
 1-4 .. Lesion qualified as:
 1) Minimal 3) Moderate
 2) Mild 4) Marked

TDMS No. 20116 - 04
 Test Type: CHRONIC
 Route: DOSED WATER
 Species/Strain: MICE/B6C3F1/NCTR

P09: NON-NEOPLASTIC LESIONS BY INDIVIDUAL ANIMAL
 Aloe vera whole leaf extract (native)
 CAS Number: ALOEVLEAFEXT

Date Report Requested: 01/15/2010
 Time Report Requested: 14:39:08
 First Dose M/F: 04/19/05 / 04/19/05
 Lab: NCTR

| C57BL/6N XC3H/HEN MTV-NCTR
MICE FEMALE
CONTROL WATER | | DAY ON TEST | | | | | | | | | | | | | | | | | | | | females
(cont...) | | | | | |
|------------------------------------------------------------|--|-------------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|----------------------|-------|-------|-------|-------|--|
| | | 0716 | 0716 | 0716 | 0716 | 0716 | 0716 | 0716 | 0716 | 0716 | 0716 | 0716 | 0716 | 0716 | 0716 | 0716 | 0716 | 0716 | 0716 | 0716 | 0716 | | 0716 | 0716 | | | |
| ANIMAL ID | | 00051 | 00052 | 00053 | 00054 | 00055 | 00058 | 00058 | 00084 | 00084 | 00088 | 00088 | 00091 | 00091 | 00091 | 00091 | 00093 | 00093 | 00093 | 00093 | 00099 | 00099 | 00099 | 00099 | 00103 | 00103 | |
| Blood Vessel | | + | + | + | + | + | + | + | + | + | + | A | + | + | + | + | + | + | + | + | + | + | + | + | + | + | |
| Heart | | + | + | + | + | + | + | + | + | + | + | A | + | + | + | + | + | + | + | + | + | + | + | + | + | + | |
| Cardiomyopathy | | | | | | | | | | | | | | | | | | | | | | | 2 | | | | |
| Mineralization | | | | | | | | | | | | | | | | | | | | | | | | | 1 | 1 | |
| ENDOCRINE SYSTEM | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Adrenal Cortex | | + | + | + | + | + | + | + | + | + | + | A | + | + | + | + | + | + | + | + | + | + | + | + | + | + | |
| Vacuolization Cytoplasmic Subcapsular, Hyperplasia | | | 2 | 2 | 2 | 2 | 2 | 2 | 3 | 1 | | | 1 | 2 | 2 | 2 | 2 | 2 | 3 | 1 | 2 | 2 | 2 | 2 | 2 | 2 | |
| Adrenal Medulla | | + | + | + | + | + | + | + | + | + | + | A | + | + | + | + | + | + | + | + | + | + | + | + | + | + | |
| Hyperplasia | | | | | | | | | | | | | | | | | | | | | | | | | | 3 | |
| Islets, Pancreatic | | + | + | + | + | + | + | + | + | M | A | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | |
| Hyperplasia | | | | | | | | | | | | | | | | | | | | | | | | | | 1 | |
| Parathyroid Gland | | + | + | + | + | + | + | + | + | + | + | A | M | + | + | + | + | + | + | + | + | + | + | + | + | + | |
| Pituitary Gland | | + | + | + | + | + | + | + | + | M | + | A | + | + | + | + | + | + | + | + | + | + | + | + | + | + | |
| Pars Distalis, Hyperplasia | | 2 | | | | | | | | | | | | | | | | | | 1 | | | | 1 | | | |
| Thyroid Gland | | + | + | + | + | + | + | + | + | + | + | A | + | + | + | + | + | + | + | + | + | + | + | + | + | + | |
| Ectopic Thymus | | | | | | | | | | X | | | | | | | | | | | | | | | | | |
| Infiltration Cellular, Lymphocyte Follicle, Degeneration | | | | | | 1 | | | | | | | | | 2 | | | | | | | | | | | | |
| Follicular Cell, Hyperplasia | | | | 2 | | | | 1 | | | | | | | | | | 2 | | | | 1 | | | 2 | | |
| Follicular Cell, Hypertrophy | | | | | | | | | | 4 | | | | | | | | | | | | | | | | 3 | |
| Follicular Cell, Hypertrophy | | | | | | | | | | 3 | | | | | | | | | | | | | | | | | |

* .. Total animals with tissue examined microscopically; Total animals with lesion and mean severity grade
 + .. Tissue examined microscopically
 X .. Lesion present
 I .. Insufficient tissue
 M .. Missing tissue
 A .. Autolysis precludes evaluation
 BLANK .. Not examined microscopically

1-4 .. Lesion qualified as:
 1) Minimal 3) Moderate
 2) Mild 4) Marked

TDMS No. 20116 - 04
Test Type: CHRONIC
Route: DOSED WATER
Species/Strain: MICE/B6C3F1/NCTR

P09: NON-NEOPLASTIC LESIONS BY INDIVIDUAL ANIMAL
Aloe vera whole leaf extract (native)
CAS Number: ALOEVLEAFEXT

Date Report Requested: 01/15/2010
Time Report Requested: 14:39:08
First Dose M/F: 04/19/05 / 04/19/05
Lab: NCTR

| C57BL/6N XC3H/HEN MTV-NCTR
MICE FEMALE
CONTROL WATER | DAY ON TEST | | | | | | | | | | | | | | | | | | | | ANIMAL ID | females
(cont...) |
|------------------------------------------------------------|-------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|-----------|----------------------|
| | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | | |
| | 7 | 7 | 7 | 7 | 7 | 6 | 7 | 7 | 7 | 6 | 7 | 7 | 7 | 7 | 6 | 7 | 7 | 7 | 6 | 7 | 7 | 7 |
| | 1 | 3 | 3 | 3 | 3 | 7 | 3 | 3 | 3 | 9 | 3 | 1 | 3 | 3 | 5 | 3 | 3 | 3 | 9 | 3 | 3 | 3 |
| | 6 | 6 | 6 | 6 | 6 | 4 | 6 | 6 | 6 | 3 | 6 | 4 | 6 | 6 | 4 | 6 | 6 | 6 | 0 | 6 | 6 | 6 |
| | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 4 | 4 | 4 | 4 | 5 |
| | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 4 | 4 | 4 | 4 | 5 | 5 |
| | 5 | 5 | 5 | 5 | 8 | 8 | 8 | 8 | 1 | 1 | 1 | 1 | 3 | 3 | 3 | 3 | 0 | 0 | 0 | 9 | 9 | 9 |
| | 1 | 2 | 3 | 4 | 1 | 2 | 3 | 4 | 1 | 2 | 3 | 4 | 1 | 2 | 3 | 4 | 1 | 2 | 3 | 4 | 1 | 2 |

GENERAL BODY SYSTEM

NONE

GENITAL SYSTEM

| | | | | | | | | | | | | | | | | | | | | | | | |
|----------------------------------------------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| Clitoral Gland Degeneration | + | + | + | + | + | + | + | + | + | A | + | + | + | + | + | + | + | + | + | + | + | + | + |
| | 4 | 4 | 3 | 3 | 4 | | 4 | 3 | 4 | | 4 | 4 | 4 | 3 | 4 | 4 | 4 | 4 | 4 | 4 | 4 | 4 | 3 |
| Ovary Atrophy | + | + | + | + | + | + | + | + | + | A | + | + | + | + | + | + | + | + | + | + | + | + | + |
| | 4 | 4 | 4 | 3 | 3 | | 4 | 4 | 4 | | 3 | 4 | 4 | 4 | 3 | 4 | 4 | 4 | 4 | 4 | 4 | 4 | 3 |
| Cyst | | | | 2 | | 3 | 4 | | | | | | | | 3 | | | | 2 | 2 | | | |
| Cyst, Multiple | | 4 | | | | | | | | | | | | | | | | | | | | | |
| Uterus Autolysis | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |
| Edema | | | | | | | | | | | | | | | | | | | | | | | |
| Endometrium, Hyperplasia, Cystic Lumen, Dilatation | 3 | 3 | 3 | 2 | 3 | 2 | | 2 | 2 | | 2 | 3 | 2 | 3 | 3 | 4 | 4 | 4 | 3 | 3 | 2 | 4 | 3 |
| | | | | | | | 4 | | | | | | | | | | | | | | | | |

HEMATOPOIETIC SYSTEM

| | | | | | | | | | | | | | | | | | | | | | | | |
|--------------------------------------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| Bone Marrow Fibrosis | + | + | + | + | + | + | + | + | + | A | + | + | + | + | + | + | + | + | + | + | + | + | + |
| | | | | | | | | | | | | | | | | | | | | | 2 | | |
| Hyperplasia | 3 | | | | | | | | | | | 4 | | | | | | | 2 | 2 | | | |
| Lymph Node Lumbar, Hyperplasia, Lymphoid | + | | | | | + | | + | | A | + | + | | | + | + | | | | | + | | + |
| | | | | | | | | | | | | 3 | | | | | | | | | 2 | | |
| Lumbar, Infiltration Cellular, Plasma Cell | | | | | | | | | | | | | | | 3 | | | | | | | | |

* .. Total animals with tissue examined microscopically; Total animals with lesion and mean severity grade
+ .. Tissue examined microscopically
X .. Lesion present
I .. Insufficient tissue
M .. Missing tissue
A .. Autolysis precludes evaluation
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1-4 .. Lesion qualified as:
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TDMS No. 20116 - 04
 Test Type: CHRONIC
 Route: DOSED WATER
 Species/Strain: MICE/B6C3F1/NCTR

P09: NON-NEOPLASTIC LESIONS BY INDIVIDUAL ANIMAL
 Aloe vera whole leaf extract (native)
 CAS Number: ALOEVLEAFEXT

Date Report Requested: 01/15/2010
 Time Report Requested: 14:39:08
 First Dose M/F: 04/19/05 / 04/19/05
 Lab: NCTR

| C57BL/6N XC3H/HEN MTV-NCTR
MICE FEMALE
CONTROL WATER | DAY ON TEST | | | | | | | | | | | | | | | | | | | | | | | | females
(cont...) |
|------------------------------------------------------------|-------------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|----------------------|
| | 0716 | 0736 | 0776 | 0777 | 0777 | 0777 | 0777 | 0777 | 0777 | 0777 | 0777 | 0777 | 0777 | 0777 | 0777 | 0777 | 0777 | 0777 | 0777 | 0777 | 0777 | 0777 | 0777 | 0777 | |
| ANIMAL ID | 00051 | 00052 | 00053 | 00054 | 00055 | 00058 | 00058 | 00058 | 00058 | 00058 | 00058 | 00058 | 00058 | 00058 | 00058 | 00058 | 00058 | 00058 | 00058 | 00058 | 00058 | 00058 | 00058 | 00058 | |
| Lumbar, Infiltration Cellular, Polymorphonuclear | | | | | | | | | | | | | | | | | | | | | | | | | 3 |
| Renal, Hyperplasia, Lymphoid | | | | | | | | | | | | | | | | | | | | | | | | | 2 |
| Renal, Infiltration Cellular, Polymorphonuclear | | | | | | | | | | | | | | | | | | | | | | | | | 2 |
| Lymph Node, Mandibular Hyperplasia, Lymphoid | + | + | + | + | + | + | + | + | + | M | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |
| Infiltration Cellular, Plasma Cell | | | | | | | | | | | | | | | | | | | | | | | | | 2 |
| Infiltration Cellular, Polymorphonuclear | | | | | | | | | | | | | | | | | | | | | | | | | 2 |
| Lymph Node, Mesenteric Angiectasis | + | + | + | + | + | + | + | + | + | A | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |
| Hyperplasia, Lymphoid | | | | | | | | | | | | | | | | | | | | | | | | | 2 |
| Infiltration Cellular, Plasma Cell | | | | | | | | | | | | | | | | | | | | | | | | | 2 |
| Spleen Fibrosis, Stromal | + | + | + | + | + | + | + | + | + | A | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |
| Hematopoietic Cell Proliferation | | | | | | | | | | | | | | | | | | | | | | | | | 4 |
| Hyperplasia, Lymphoid | | | | | | | | | | | | | | | | | | | | | | | | | 2 |
| Pigmentation | | | | | | | | | | | | | | | | | | | | | | | | | 2 |
| Thrombus | | | | | | | | | | | | | | | | | | | | | | | | | 4 |
| Thymus Atrophy | + | + | + | + | + | + | + | + | + | A | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |
| Hyperplasia, Lymphoid | | | | | | | | | | | | | | | | | | | | | | | | | 2 |
| Necrosis | | | | | | | | | | | | | | | | | | | | | | | | | 2 |

INTEGUMENTARY SYSTEM

| | | | | | | | | | | | | | | | | | | | | | | | | | |
|---------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| Mammary Gland | + | + | + | + | + | + | + | + | + | A | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |
|---------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|

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TDMS No. 20116 - 04
 Test Type: CHRONIC
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P09: NON-NEOPLASTIC LESIONS BY INDIVIDUAL ANIMAL
 Aloe vera whole leaf extract (native)
 CAS Number: ALOEVLEAFEXT

Date Report Requested: 01/15/2010
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 First Dose M/F: 04/19/05 / 04/19/05
 Lab: NCTR

| DAY ON TEST | ANIMAL ID | | | | | | | | | | | | | | | | | | | | females
(cont...) | | |
|-----------------------------------------------|-----------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|----------------------|-------|------|
| | 0716 | 0736 | 0736 | 0736 | 0736 | 0764 | 0776 | 0776 | 0776 | 0766 | 0776 | 0776 | 0776 | 0776 | 0766 | 0776 | 0776 | 0766 | 0776 | 0776 | | 0776 | 0776 |
| C57BL/6N XC3H/HEN MTV-NCTR MICE FEMALE | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | |
| CONTROL WATER | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | |
| | 00051 | 00052 | 00053 | 00054 | 00058 | 00081 | 00082 | 00083 | 00084 | 00088 | 00091 | 00092 | 00093 | 00094 | 00098 | 00099 | 00101 | 00102 | 00103 | 00104 | 00109 | 00112 | |
| Galactocele | | | | | | | | | | | | | | | | | | | | | | | |
| Lactation | | | | | | | | | | | | | | | | | | | | | | | 3 |
| Alveolus, Hyperplasia | | | | 2 | | | | | | | | | | | | | | | | | | | 4 |
| Skin | + | + | + | + | + | + | + | + | + | A | + | + | + | + | + | + | + | + | + | + | + | + | |
| MUSCULOSKELETAL SYSTEM | | | | | | | | | | | | | | | | | | | | | | | |
| Bone, Femur | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | |
| Fibro-Osseous Lesion | | 2 | | | | | | | | | | | | | | | | | | | | | |
| NERVOUS SYSTEM | | | | | | | | | | | | | | | | | | | | | | | |
| Brain, Brain Stem | + | + | + | + | + | + | + | + | + | A | + | + | + | + | + | + | + | + | + | + | + | + | |
| Compression | | | | | | | | | | | | | | | | | | | | 2 | | | 2 |
| Brain, Cerebellum | + | + | + | + | + | + | + | + | + | A | + | + | + | + | + | + | + | + | + | + | + | + | |
| Brain, Cerebrum | + | + | + | + | + | + | + | + | + | A | + | + | + | + | + | + | + | + | + | + | + | + | |
| Mineralization | 1 | 2 | 2 | | | | 1 | 1 | 2 | | | | | 1 | 1 | | | | | 1 | 1 | | |
| RESPIRATORY SYSTEM | | | | | | | | | | | | | | | | | | | | | | | |
| Lung | + | + | + | + | + | + | + | + | + | A | + | + | + | + | + | + | + | + | + | + | + | + | |
| Autolysis | | | | | | | | | | | | | | | | | | | | | | | |
| Hemorrhage | | 4 | | | | | | | | | | 2 | | | | | | | | | | | |
| Infiltration Cellular, Histiocyte | | | | | | | | | | | 2 | | | 2 | | | | | | 3 | | 3 | |
| Infiltration Cellular, Lymphocyte | | | | | | | | | 2 | | | | | | | | | | | 2 | | | |
| Inflammation, Chronic Active | | | | | | | | | | | | | | | | | | | 3 | | | 2 | |
| Nose | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | |

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| C57BL/6N XC3H/HEN MTV-NCTR
MICE FEMALE
CONTROL WATER | DAY ON TEST | | | | | | | | | | | | | | | | | | | | | | | | ANIMAL ID | females
(cont...) | | |
|------------------------------------------------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|-----------|----------------------|------------------|------------------|
| | 0
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6 | | | 0
7
3
6 | 0
7
3
6 |
| Hyaline Droplet
Inflammation, Chronic Active | | | 2 | | 1 | 1 | | 1 | 1 | 1 | 2 | 1 | 1 | | | | | | | | | | | | | | | 1 |
| Trachea | + | + | + | + | + | + | + | + | + | A | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | |
| SPECIAL SENSES SYSTEM | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Eye | + | + | + | + | + | + | + | + | + | A | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | |
| Cataract | | 1 | | | | | | | | | 1 | | | | | | | | | | | | | | | | | |
| Cornea, Inflammation, Chronic Active | | 2 | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Cornea, Ulcer | | 4 | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Harderian Gland | + | + | + | + | + | + | + | + | + | A | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | |
| Infiltration Cellular, Lymphocyte | | | | | | 1 | | | | 2 | | | | | | | | | | | | | | | | | 1 | |
| Lacrimal Gland | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Infiltration Cellular, Lymphocyte | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| URINARY SYSTEM | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Kidney | + | + | + | + | + | + | + | + | + | A | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | |
| Amyloid Deposition | | | | | | | | | | | | | | | | | | | | | | | | | | | 4 | |
| Autolysis | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Hyaline Droplet | 3 | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Infiltration Cellular, Histiocyte | | | | | | | | | | | | 1 | | | | | | | | | | | | | | | | |
| Infiltration Cellular, Lymphocyte | | 1 | | | 1 | | 1 | | | | 1 | | | | | | 1 | 2 | | | 2 | | | | 1 | | 1 | |
| Nephropathy | | | | 1 | | | | | | 1 | | | | | | | | | 4 | | | | 1 | | | | | |
| Urinary Bladder | + | + | + | + | + | + | + | + | + | A | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | |
| Infiltration Cellular, Lymphocyte | | 2 | | | 1 | | 1 | 1 | 1 | | | | | | | | 1 | | | | 1 | 2 | 1 | | | | 1 | |

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 Lab: NCTR

| C57BL/6N XC3H/HEN MTV-NCTR
MICE FEMALE
CONTROL WATER | DAY ON TEST | | | | | | | | | | | | | | | | | | | | * TOTALS | | |
|------------------------------------------------------------|-------------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|----------|-------|-------|
| | 0736 | 0736 | 0736 | 0736 | 0736 | 0750 | 0753 | 0756 | 0756 | 0756 | 0756 | 0756 | 0756 | 0756 | 0756 | 0756 | 0756 | 0756 | 0756 | 0756 | | 0756 | |
| ANIMAL ID | 00732 | 00733 | 00734 | 00741 | 00742 | 00743 | 00744 | 00751 | 00752 | 00753 | 00754 | 00751 | 00752 | 00753 | 00754 | 00751 | 00752 | 00753 | 00754 | 00751 | 00752 | 00753 | 00754 |

ALIMENTARY SYSTEM

| | | | | | | | | | | | | | | | | | | | | | | | | | | |
|-----------------------------------------------------------------------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|----|---|-----|
| Esophagus | + | + | + | + | + | + | + | + | + | + | + | + | + | + | A | + | + | + | + | + | + | + | + | 45 | | |
| Gallbladder | + | + | + | + | + | + | A | + | + | + | A | + | + | + | + | A | + | + | + | + | + | + | + | 42 | | |
| Intestine Large, Ascending Colon
Goblet Cell, Hyperplasia | + | + | + | + | + | + | A | + | + | + | A | + | + | + | + | A | + | + | + | + | + | + | + | 43 | 1 | 1.0 |
| Intestine Large, Cecum
Hyperplasia, Lymphoid
Goblet Cell, Hyperplasia | + | + | + | + | + | + | A | + | + | + | A | + | + | + | + | A | + | + | + | + | + | + | + | 42 | 1 | 1.0 |
| | | | | | | | | | | 1 | | | | | | | | | | | | | | | 1 | 1.0 |
| Intestine Large, Descending Colon | + | + | + | + | + | + | A | + | + | + | A | + | + | + | + | A | + | + | + | + | + | + | + | 43 | | |
| Intestine Large, Rectum | + | + | + | + | + | + | A | + | + | + | A | + | + | + | + | A | + | + | + | + | + | + | + | 43 | | |
| Intestine Large, Transverse Colon
Goblet Cell, Hyperplasia | + | + | + | + | + | + | A | + | + | + | A | + | + | + | + | A | + | + | + | + | + | + | + | 42 | 2 | 1.0 |
| Intestine Small, Duodenum | + | + | + | + | + | + | A | + | + | + | A | + | + | + | + | A | + | + | + | + | + | + | + | 43 | | |
| Intestine Small, Ileum | + | + | + | + | + | + | A | + | + | + | A | + | + | + | + | A | + | + | + | + | + | + | + | 42 | | |
| Intestine Small, Jejunum | + | + | + | + | + | + | A | + | + | + | A | + | + | + | + | A | + | + | + | + | + | + | + | 42 | | |
| Liver | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 45 | | |
| Basophilic Focus | | | | | | | | | | | | | | | | | | | | | | | | | 1 | |
| Eosinophilic Focus | | | | | | | | | | | | | | | | | | | | | | | | | 1 | |
| Hematopoietic Cell Proliferation | | | | | | | | | | | | | | | | | | | | | | | | | 1 | 3.0 |

* .. Total animals with tissue examined microscopically; Total animals with lesion and mean severity grade
 + .. Tissue examined microscopically
 X .. Lesion present
 I .. Insufficient tissue
 M .. Missing tissue
 A .. Autolysis precludes evaluation
 BLANK .. Not examined microscopically
 1-4 .. Lesion qualified as:
 1) Minimal 3) Moderate
 2) Mild 4) Marked

TDMS No. 20116 - 04
 Test Type: CHRONIC
 Route: DOSED WATER
 Species/Strain: MICE/B6C3F1/NCTR

P09: NON-NEOPLASTIC LESIONS BY INDIVIDUAL ANIMAL
 Aloe vera whole leaf extract (native)
 CAS Number: ALOEVLEAFEXT

Date Report Requested: 01/15/2010
 Time Report Requested: 14:39:08
 First Dose M/F: 04/19/05 / 04/19/05
 Lab: NCTR

| C57BL/6N XC3H/HEN MTV-NCTR
MICE FEMALE
CONTROL WATER | DAY ON TEST | | | | | | | | | | | | | | | | | | | | ANIMAL ID | * TOTALS | | |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|-----------|----------|----------------------------------------|-----------------------------------------------|
| | 0
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6 | 0
5
3
4 | 0
7
3
6 | | | 0
7
3
6 | |
| Infiltration Cellular, Lymphocyte
Inflammation, Chronic Active
Mixed Cell Focus
Necrosis
Pigmentation
Tension Lipidosis
Vacuolization Cytoplasmic
Oval Cell, Hyperplasia | | | | | | | | | | | | | | | | | | | | | | | 10
6
1
3
1
7
12
1 | 1.8
1.7
2.3
2.0
1.6
1.5
3.0 |
| Mesentery
Fat, Hemorrhage
Fat, Necrosis | | | | | | | | | | | | | | | | | | | | | | | 6
1
6 | 4.0
2.8 |
| Oral Mucosa | | | | | | | | | | | | | | | | | | | | | | | 1 | |
| Pancreas
Infiltration Cellular, Lymphocyte
Vacuolization Cytoplasmic
Acinus, Degeneration | | | | | | | | | | | | | | | | | | | | | | | 42
11
1
1 | 1.5
1.0
4.0 |
| Salivary Glands
Infiltration Cellular, Lymphocyte | | | | | | | | | | | | | | | | | | | | | | | 43
29 | 1.6 |
| Stomach, Forestomach
Keratin Cyst | | | | | | | | | | | | | | | | | | | | | | | 43
1 | |
| Stomach, Glandular
Cyst | | | | | | | | | | | | | | | | | | | | | | | 43
1 | 2.0 |

CARDIOVASCULAR SYSTEM

* .. Total animals with tissue examined microscopically; Total animals with lesion and mean severity grade
 + .. Tissue examined microscopically
 X .. Lesion present
 I .. Insufficient tissue
 M .. Missing tissue
 A .. Autolysis precludes evaluation
 BLANK .. Not examined microscopically

1-4 .. Lesion qualified as:
 1) Minimal 3) Moderate
 2) Mild 4) Marked

TDMS No. 20116 - 04
 Test Type: CHRONIC
 Route: DOSED WATER
 Species/Strain: MICE/B6C3F1/NCTR

P09: NON-NEOPLASTIC LESIONS BY INDIVIDUAL ANIMAL
 Aloe vera whole leaf extract (native)
 CAS Number: ALOEVLEAFEXT

Date Report Requested: 01/15/2010
 Time Report Requested: 14:39:08
 First Dose M/F: 04/19/05 / 04/19/05
 Lab: NCTR

| C57BL/6N XC3H/HEN MTV-NCTR
MICE FEMALE
CONTROL WATER | DAY ON TEST | | | | | | | | | | | | | | | | | | | | * TOTALS | | | | |
|------------------------------------------------------------|-------------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|----------|-------|-------|----|-----|
| | 0736 | 0736 | 0736 | 0736 | 0736 | 0750 | 0773 | 0773 | 0773 | 0773 | 0773 | 0773 | 0773 | 0773 | 0773 | 0773 | 0773 | 0773 | 0773 | 0773 | | 0773 | | | |
| ANIMAL ID | 00732 | 00733 | 00734 | 00741 | 00742 | 00743 | 00744 | 00751 | 00752 | 00753 | 00754 | 00761 | 00762 | 00763 | 00764 | 00771 | 00772 | 00773 | 00774 | 00781 | 00782 | 00783 | 00784 | | |
| Blood Vessel | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | A | + | + | + | + | + | + | + | 45 | |
| Heart | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | A | + | + | + | + | + | + | 45 | |
| Cardiomyopathy | | | | | | 1 | | | | | | | | | | | | | | | | | | 4 | 1.3 |
| Mineralization | | | | | | | | | | | | | | | 1 | | | | | | | | | 1 | 1.0 |
| ENDOCRINE SYSTEM | | | | | | | | | | | | | | | | | | | | | | | | | |
| Adrenal Cortex | + | + | + | + | + | + | A | + | + | + | + | + | + | + | + | A | + | + | + | + | + | + | + | 44 | |
| Vacuolization Cytoplasmic | | | | | 2 | 4 | | | | | | | | | | | | | | | 2 | | | 4 | 2.5 |
| Subcapsular, Hyperplasia | 2 | 2 | 2 | 1 | 2 | 2 | | 2 | 2 | 2 | 2 | 2 | 2 | 2 | | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 43 | 2.0 |
| Adrenal Medulla | + | + | + | + | + | + | A | + | + | + | + | + | + | + | + | A | + | + | + | + | + | + | + | 44 | |
| Hyperplasia | | | | | | | | | | | | | | | | | | | | | | | | 1 | 3.0 |
| Islets, Pancreatic | + | + | + | + | + | + | A | + | + | + | A | + | + | + | + | A | + | + | + | + | + | + | + | 42 | |
| Hyperplasia | | | | | | | | | | | | | | | | | | | | | | | | 1 | 1.0 |
| Parathyroid Gland | + | + | + | + | + | + | M | + | + | + | + | + | + | + | + | A | + | + | M | + | + | + | + | 42 | |
| Pituitary Gland | + | + | + | + | + | + | A | + | + | + | + | + | + | + | + | A | + | + | + | + | + | + | + | 43 | |
| Pars Distalis, Hyperplasia | | | | | | 2 | | | | | | | | 1 | 3 | | | | | | | | 1 | 7 | 1.6 |
| Thyroid Gland | + | + | + | + | + | + | A | + | + | + | A | + | + | + | + | A | + | + | + | + | + | + | + | 43 | |
| Ectopic Thymus | | | | | | X | | | | | | | | | | | | | | | | | | 2 | |
| Infiltration Cellular, Lymphocyte | | | | | | | | | | | | | | | | 1 | | | | | | | | 3 | 1.3 |
| Follicle, Degeneration | | | | | | | | | | | | | | | | | | | | | | 1 | | 6 | 1.5 |
| Follicular Cell, Hyperplasia | | | | | | 2 | | | | | | | | | | | | | | | | | | 3 | 3.0 |
| Follicular Cell, Hypertrophy | | | | | | | | | | | | | | | | | | | | | | | | 1 | 3.0 |

* .. Total animals with tissue examined microscopically; Total animals with lesion and mean severity grade
 + .. Tissue examined microscopically
 X .. Lesion present
 I .. Insufficient tissue
 M .. Missing tissue
 A .. Autolysis precludes evaluation
 BLANK .. Not examined microscopically

1-4 .. Lesion qualified as:
 1) Minimal 3) Moderate
 2) Mild 4) Marked

TDMS No. 20116 - 04
 Test Type: CHRONIC
 Route: DOSED WATER
 Species/Strain: MICE/B6C3F1/NCTR

P09: NON-NEOPLASTIC LESIONS BY INDIVIDUAL ANIMAL
 Aloe vera whole leaf extract (native)
 CAS Number: ALOEVLEAFEXT

Date Report Requested: 01/15/2010
 Time Report Requested: 14:39:08
 First Dose M/F: 04/19/05 / 04/19/05
 Lab: NCTR

| C57BL/6N XC3H/HEN MTV-NCTR
MICE FEMALE
CONTROL WATER | DAY ON TEST | | | | | | | | | | | | | | | | | | | | * TOTALS | |
|------------------------------------------------------------|-------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|----------|---|
| | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | | 0 |
| ANIMAL ID | 7 | 7 | 7 | 7 | 7 | 7 | 5 | 7 | 7 | 7 | 6 | 7 | 7 | 7 | 7 | 6 | 7 | 6 | 7 | 5 | 7 | |
| | 3 | 3 | 3 | 3 | 3 | 3 | 5 | 3 | 3 | 3 | 1 | 3 | 3 | 3 | 3 | 7 | 3 | 2 | 3 | 5 | 3 | |
| | 6 | 6 | 6 | 6 | 6 | 6 | 0 | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 4 | 4 | 6 | 6 | 6 | 4 | 6 | |
| | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | |
| | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | |
| | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 8 | 8 | 8 | 8 | 8 | 8 | |
| | 3 | 3 | 3 | 4 | 4 | 4 | 4 | 5 | 5 | 5 | 5 | 6 | 6 | 6 | 1 | 1 | 1 | 1 | 2 | 2 | 2 | |
| | 2 | 3 | 4 | 1 | 2 | 3 | 4 | 1 | 2 | 3 | 4 | 1 | 2 | 3 | 4 | 1 | 2 | 3 | 4 | 1 | 2 | |

GENERAL BODY SYSTEM

NONE

GENITAL SYSTEM

| | | | | | | | | | | | | | | | | | | | | | | | | | |
|----------------------------------------------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|----|----|-----|
| Clitoral Gland Degeneration | + | + | + | + | + | + | A | + | + | + | + | + | + | + | + | A | + | + | + | + | + | + | 44 | | |
| | 4 | 4 | 4 | 4 | 4 | 4 | | 4 | 4 | 4 | 4 | 4 | 4 | 4 | 4 | | 4 | 4 | 4 | 4 | 4 | 4 | | 43 | 3.9 |
| Ovary Atrophy | + | + | + | + | + | + | A | + | + | + | + | + | + | + | + | A | + | + | + | + | + | + | 44 | | |
| | 4 | 4 | 4 | 4 | 4 | 4 | | 4 | 4 | 4 | | 4 | 4 | 4 | 4 | | 4 | 4 | 4 | | | 4 | | 40 | 3.9 |
| Cyst | | | | 2 | | | | | | 4 | 3 | 3 | 4 | | | | | | 3 | 4 | 4 | | | 14 | 3.1 |
| Cyst, Multiple | | | | | | | | | | | | | | | | | | | | | | | | 1 | 4.0 |
| Uterus Autolysis | + | + | + | + | + | + | A | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 46 | | |
| | | | | | | | | | | | | | | | | 4 | | | | | | | | 1 | 4.0 |
| Edema | | | | | | | | | | | | 4 | | | | | | | | | | | | 1 | 4.0 |
| Endometrium, Hyperplasia, Cystic Lumen, Dilatation | 2 | 2 | 3 | 4 | 3 | 4 | | 4 | 2 | 3 | 3 | 4 | 2 | 2 | 2 | | 4 | 3 | 3 | 4 | 3 | 4 | | 43 | 3.0 |
| | | | | | | | | | | | | | | | | | | | | | | | | 1 | 4.0 |

HEMATOPOIETIC SYSTEM

| | | | | | | | | | | | | | | | | | | | | | | | | | |
|--------------------------------------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|----|---|-----|
| Bone Marrow Fibrosis | + | + | + | + | + | + | A | + | + | + | A | + | + | + | + | A | + | + | + | + | + | + | 43 | | |
| | | | | | | | | | | | | | | | | | | | | | | | | 1 | 2.0 |
| Hyperplasia | | | | 2 | | | | | | | | 3 | | | | | | | 2 | | | | | 7 | 2.6 |
| Lymph Node Lumbar, Hyperplasia, Lymphoid | | | | | | | | | | | | | + | + | | + | | | | | | | 14 | | |
| | | | | | | | | | | | | | 2 | | | | | | | | | | | 3 | 2.3 |
| Lumbar, Infiltration Cellular, Plasma Cell | | | | | | | | | | | | | | | | | | | | | | | | 1 | 3.0 |

* .. Total animals with tissue examined microscopically; Total animals with lesion and mean severity grade
 + .. Tissue examined microscopically
 X .. Lesion present
 I .. Insufficient tissue
 M .. Missing tissue
 A .. Autolysis precludes evaluation
 BLANK .. Not examined microscopically

1-4 .. Lesion qualified as:
 1) Minimal 3) Moderate
 2) Mild 4) Marked

TDMS No. 20116 - 04
 Test Type: CHRONIC
 Route: DOSED WATER
 Species/Strain: MICE/B6C3F1/NCTR

P09: NON-NEOPLASTIC LESIONS BY INDIVIDUAL ANIMAL
 Aloe vera whole leaf extract (native)
 CAS Number: ALOEVLEAFEXT

Date Report Requested: 01/15/2010
 Time Report Requested: 14:39:08
 First Dose M/F: 04/19/05 / 04/19/05
 Lab: NCTR

| C57BL/6N XC3H/HEN MTV-NCTR
MICE FEMALE
CONTROL WATER | DAY ON TEST | | | | | | | | | | | | | | | | | | | | * TOTALS | |
|------------------------------------------------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|----------|-----------|
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| ANIMAL ID | 0
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2 | | |
| Lumbar, Infiltration Cellular, Polymorphonuclear | | | | | | | | | | | | | | | | | | | | | 2 | 2 2.5 |
| Renal, Hyperplasia, Lymphoid | | | | | | | | | | | | | | | | | | | | | 3 | 2 2.5 |
| Renal, Infiltration Cellular, Polymorphonuclear | | | | | | | | | | | | | | | | | | | | | | 2 2.0 |
| Lymph Node, Mandibular Hyperplasia, Lymphoid | M | + | + | + | + | + | A | + | + | + | + | + | + | + | A | + | + | + | + | + | 43 | 11 1.8 |
| Infiltration Cellular, Plasma Cell | | | | | | | | | | | | | | | | | | | | | 2 | 1 2.0 |
| Infiltration Cellular, Polymorphonuclear | | | | | | | | | | | | | | | | | | | | | 1 | 2 2.0 |
| Lymph Node, Mesenteric Angiectasis | | | | | | | | | | | | | | | | | | | | | | 43 1 4.0 |
| Hyperplasia, Lymphoid | | | | | | | | | | | | | | | | | | | | | 2 | 1 10 2.0 |
| Infiltration Cellular, Plasma Cell | | | | | | | | | | | | | | | | | | | | | 1 | 1 2.0 |
| Spleen Fibrosis, Stromal | | | | | | | | | | | | | | | | | | | | | | 44 1 4.0 |
| Hematopoietic Cell Proliferation | | | | | | | | | | | | | | | | | | | | | 3 | 3 16 3.1 |
| Hyperplasia, Lymphoid | | | | | | | | | | | | | | | | | | | | | 4 | 2 20 2.7 |
| Pigmentation | | | | | | | | | | | | | | | | | | | | | | 3 2.0 |
| Thrombus | | | | | | | | | | | | | | | | | | | | | | 1 4.0 |
| Thymus Atrophy | | | | | | | | | | | | | | | | | | | | | | 41 10 3.1 |
| Hyperplasia, Lymphoid | | | | | | | | | | | | | | | | | | | | | 2 | 3 8 2.3 |
| Necrosis | | | | | | | | | | | | | | | | | | | | | | 1 2.0 |

INTEGUMENTARY SYSTEM

| | | | | | | | | | | | | | | | | | | | | | |
|---------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|----|
| Mammary Gland | + | + | + | + | + | + | A | + | + | + | + | + | + | + | + | + | + | + | + | + | 44 |
|---------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|----|

* .. Total animals with tissue examined microscopically; Total animals with lesion and mean severity grade
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 X .. Lesion present
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 M .. Missing tissue
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 1) Minimal 3) Moderate
 2) Mild 4) Marked

TDMS No. 20116 - 04
 Test Type: CHRONIC
 Route: DOSED WATER
 Species/Strain: MICE/B6C3F1/NCTR

P09: NON-NEOPLASTIC LESIONS BY INDIVIDUAL ANIMAL
 Aloe vera whole leaf extract (native)
 CAS Number: ALOEVLEAFEXT

Date Report Requested: 01/15/2010
 Time Report Requested: 14:39:08
 First Dose M/F: 04/19/05 / 04/19/05
 Lab: NCTR

| DAY ON TEST | C57BL/6N XC3H/HEN MTV-NCTR MICE FEMALE | | | | | | | | | | | | | | | | | | | | ANIMAL ID | * TOTALS | | | | |
|-----------------------------------|----------------------------------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|-----------|-----------------|---|---|-----------|-----------|
| | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | | | 0 | | | |
| CONTROL WATER | 7 | 7 | 7 | 7 | 7 | 7 | 5 | 7 | 7 | 7 | 6 | 7 | 7 | 7 | 7 | 6 | 7 | 6 | 7 | 5 | 7 | 7 | 7 | 7 | | |
| | 3 | 3 | 3 | 3 | 3 | 3 | 5 | 3 | 3 | 3 | 1 | 3 | 3 | 3 | 3 | 7 | 3 | 2 | 3 | 5 | 3 | 3 | 3 | 3 | | |
| | 6 | 6 | 6 | 6 | 6 | 6 | 0 | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 4 | 4 | 6 | 6 | 6 | 4 | 6 | 6 | 6 | 6 | | |
| | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | | |
| | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | | |
| | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 8 | 8 | 8 | 8 | 8 | 8 | 8 | 8 | 8 | | |
| | 3 | 3 | 3 | 4 | 4 | 4 | 4 | 4 | 5 | 5 | 5 | 5 | 6 | 6 | 6 | 1 | 1 | 1 | 1 | 2 | 2 | 2 | 2 | 2 | | |
| | 2 | 3 | 4 | 1 | 2 | 3 | 4 | 4 | 1 | 2 | 3 | 4 | 1 | 2 | 3 | 4 | 1 | 2 | 3 | 4 | 1 | 2 | 3 | 4 | | |
| | | | | | | | | | | | | | | | | | | | | | | * TOTALS | | | | |
| Galactoceles | 2 | | | | | | | | | | | | | | | | | | | | | 1 2.0 | | | | |
| Lactation | | | | | | | | | | | | | | | | | | | | | | 2 2.0 | | | | |
| Alveolus, Hyperplasia | | | | | | | | | | | | | | | | | | | | | | 4 2.3 | | | | |
| Skin | + | + | + | + | + | + | A | + | + | + | + | + | + | + | + | A | + | + | + | + | + | + | + | | 44 | |
| MUSCULOSKELETAL SYSTEM | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Bone, Femur | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | | 47 |
| Fibro-Osseous Lesion | | | | | | | | | | | | | | | | | | | | | | 1 2.0 | | | | |
| NERVOUS SYSTEM | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Brain, Brain Stem | + | + | + | + | + | + | A | + | + | + | A | + | + | + | + | A | + | + | + | + | + | + | + | + | | 43 |
| Compression | | | | | | | | | | | | | | | | | | | | | | 2 2.0 | | | | |
| Brain, Cerebellum | + | + | + | + | + | + | A | + | + | + | A | + | + | + | + | A | + | + | + | + | + | + | + | + | | 43 |
| Brain, Cerebrum | + | + | + | + | + | + | A | + | + | + | A | + | + | + | + | A | + | + | + | + | + | + | + | + | | 43 |
| Mineralization | | | | | | | | | | | | | | | | | | | | | | 24 1.2 | | | | |
| RESPIRATORY SYSTEM | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Lung | + | + | + | + | + | + | + | + | + | + | A | + | + | + | + | + | + | + | + | + | + | + | + | + | | 45 |
| Autolysis | | | | | | | | | | | | | | | | | | | | | | 1 4.0 | | | | |
| Hemorrhage | | | | | | | | | | | | | | | | | | | | | | 2 3.0 | | | | |
| Infiltration Cellular, Histiocyte | | | | | | | | | | | | | | | | | | | | | | 5 2.4 | | | | |
| Infiltration Cellular, Lymphocyte | | | | | | | | | | | | | | | | | | | | | | 4 1.8 | | | | |
| Inflammation, Chronic Active | | | | | | | | | | | | | | | | | | | | | | 2 2.5 | | | | |
| Nose | + | + | + | + | + | + | A | + | + | + | + | + | + | + | + | A | + | + | + | + | + | + | + | + | | 45 |

* .. Total animals with tissue examined microscopically; Total animals with lesion and mean severity grade
 + .. Tissue examined microscopically
 X .. Lesion present
 I .. Insufficient tissue
 M .. Missing tissue
 A .. Autolysis precludes evaluation
 BLANK .. Not examined microscopically
 1-4 .. Lesion qualified as:
 1) Minimal 3) Moderate
 2) Mild 4) Marked

TDMS No. 20116 - 04
 Test Type: CHRONIC
 Route: DOSED WATER
 Species/Strain: MICE/B6C3F1/NCTR

P09: NON-NEOPLASTIC LESIONS BY INDIVIDUAL ANIMAL
 Aloe vera whole leaf extract (native)
 CAS Number: ALOEVLEAFEXT

Date Report Requested: 01/15/2010
 Time Report Requested: 14:39:08
 First Dose M/F: 04/19/05 / 04/19/05
 Lab: NCTR

| DAY ON TEST | | | | | | | | | | | | | | | | | | | | | | |
|---------------------------------------------------|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|--------------------------|-------------------------------|-----------------|
| | 07 | 07 | 07 | 07 | 07 | 07 | 05 | 07 | 07 | 07 | 06 | 07 | 07 | 07 | 06 | 07 | 06 | 07 | 05 | 07 | | |
| C57BL/6N XC3H/HEN MTV-NCTR
MICE FEMALE | 36 | 36 | 36 | 36 | 36 | 36 | 50 | 36 | 36 | 36 | 36 | 36 | 36 | 36 | 36 | 44 | 44 | 66 | 66 | 46 | | |
| CONTROL WATER | 07 | 07 | 07 | 07 | 07 | 07 | 07 | 07 | 07 | 07 | 07 | 07 | 07 | 07 | 07 | 08 | 08 | 08 | 08 | 08 | 08 | |
| | 32 | 33 | 34 | 41 | 42 | 43 | 44 | 45 | 52 | 53 | 54 | 61 | 62 | 63 | 64 | 61 | 62 | 63 | 64 | 63 | 64 | * TOTALS |
| Hyaline Droplet
Inflammation, Chronic Active | | | | | | | | | | | | | | | | | | | | 2 1 | 12 1.3
1 2.0 | |
| Trachea | + | + | + | + | + | + | A | + | + | + | + | + | + | + | + | A | + | + | + | + | + | 44 |
| SPECIAL SENSES SYSTEM | | | | | | | | | | | | | | | | | | | | | | |
| Eye | + | + | M | + | + | + | A | + | + | + | A | + | + | + | + | A | + | + | + | + | + | 42 |
| Cataract | | | | | | | | | | | | | | | | | | | | | 2 1.0 | |
| Cornea, Inflammation, Chronic Active | | | | | | | | | | | | | | | | | | | | | 1 2.0 | |
| Cornea, Ulcer | | | | | | | | | | | | | | | | | | | | | 1 4.0 | |
| Harderian Gland | + | + | + | + | + | + | A | + | + | + | A | + | + | + | + | A | + | + | + | + | + | 43 |
| Infiltration Cellular, Lymphocyte | | | | | | | | | | | | | | | | | | | | 1 1
1 | 6 1.2 | |
| Lacrimal Gland | | | | | | | | | | | | | | | | | | | | | 1 | |
| Infiltration Cellular, Lymphocyte | | | | | | | | | | | | | | | | | | | | | 1 2.0 | |
| URINARY SYSTEM | | | | | | | | | | | | | | | | | | | | | | |
| Kidney | + | + | + | + | + | + | + | + | + | + | A | + | + | + | + | A | + | + | + | + | + | 44 |
| Amyloid Deposition | | | | | | | | | | | | | | | | | | | | | 1 4.0 | |
| Autolysis | | | | | | | | | | | | | | | | | | | | 4 | 1 4.0 | |
| Hyaline Droplet | | | | | | | | | | | | | | | | | | | | 3 | 3 3.0 | |
| Infiltration Cellular, Histiocyte | | | | | | | | | | | | | | | | | | | | | 1 1.0 | |
| Infiltration Cellular, Lymphocyte | 1 | 1 | 2 | | 2 | | | 1 | 2 | | 2 | | 2 | 2 | | | 1 | | 2 | 3 | 1 | 22 1.5 |
| Nephropathy | | | | | | | | | | | | | | | | | | | | | 5 1.6 | |
| Urinary Bladder | + | + | + | + | + | + | A | + | + | + | A | + | + | + | + | A | + | + | + | + | + | 43 |
| Infiltration Cellular, Lymphocyte | | | | | | | | | | | | | | | | | | | | 1 1
1 1
2 1
2 1 | 22 1.2 | |

* .. Total animals with tissue examined microscopically; Total animals with lesion and mean severity grade
 + .. Tissue examined microscopically
 X .. Lesion present
 I .. Insufficient tissue
 M .. Missing tissue
 A .. Autolysis precludes evaluation
 BLANK .. Not examined microscopically

1-4 .. Lesion qualified as:
 1) Minimal 3) Moderate
 2) Mild 4) Marked

TDMS No. 20116 - 04
 Test Type: CHRONIC
 Route: DOSED WATER
 Species/Strain: MICE/B6C3F1/NCTR

P09: NON-NEOPLASTIC LESIONS BY INDIVIDUAL ANIMAL

Aloe vera whole leaf extract (native)

CAS Number: ALOEVLEAFEXT

Date Report Requested: 01/15/2010
 Time Report Requested: 14:39:08
 First Dose M/F: 04/19/05 / 04/19/05
 Lab: NCTR

| | | DAY ON TEST | | | | | | | | | | | | | | | | | | | | | | | |
|-----------------------------------|--------------------|-------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|------------------------------|
| C57BL/6N XC3H/HEN MTV-NCTR | MICE FEMALE | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | | 0 | 0 | |
| | | 7 | 7 | 5 | 7 | 6 | 7 | 7 | 7 | 7 | 5 | 7 | 7 | 6 | 7 | 7 | 7 | 7 | 6 | 7 | 7 | 7 | 5 | 7 | |
| | | 3 | 3 | 4 | 3 | 5 | 3 | 3 | 3 | 2 | 6 | 3 | 3 | 8 | 3 | 3 | 3 | 3 | 8 | 3 | 3 | 3 | 0 | 4 | |
| ALOEWOLLEAF 1.0 | ANIMAL ID | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | females
(cont...) |
| | | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | |
| | | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 2 | |
| | | 3 | 3 | 3 | 3 | 4 | 4 | 4 | 5 | 5 | 5 | 5 | 6 | 6 | 6 | 5 | 5 | 5 | 5 | 7 | 7 | 7 | 8 | 1 | |

ALIMENTARY SYSTEM

| | | | | | | | | | | | | | | | | | | | | | | | | |
|-----------------------------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| Esophagus | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |
| Gallbladder | + | + | + | + | + | + | + | A | + | + | + | + | + | + | + | + | + | A | + | + | + | A | + | + |
| Intestine Large, Ascending Colon | + | + | + | + | + | + | + | A | + | + | + | + | + | + | + | + | + | A | + | + | + | A | + | + |
| Goblet Cell, Hyperplasia | | | 2 | 1 | | 1 | | | | 1 | | | | 1 | 2 | | | | 2 | | | 1 | 1 | |
| Intestine Large, Cecum | + | + | + | + | + | + | + | A | + | + | + | + | + | + | + | + | + | A | + | + | + | A | + | + |
| Intestine Large, Descending Colon | + | + | + | + | + | + | + | A | + | + | + | + | + | + | + | + | + | A | + | + | + | A | + | + |
| Goblet Cell, Hyperplasia | | | | | | | | | | | | | 1 | 2 | | | | | | | | 1 | | |
| Intestine Large, Rectum | + | + | + | + | + | + | + | A | + | + | + | + | + | + | + | + | + | A | + | + | + | A | + | + |
| Intestine Large, Transverse Colon | + | + | + | + | + | + | + | A | + | + | + | + | + | + | + | + | + | A | + | + | + | A | + | + |
| Goblet Cell, Hyperplasia | | 1 | | 1 | | 1 | | 1 | | 1 | | | 1 | 2 | | | 1 | 2 | | | | 1 | 1 | |
| Intestine Small, Duodenum | + | + | + | + | + | + | + | A | + | + | + | + | + | + | + | + | + | A | + | + | + | A | + | + |
| Intestine Small, Ileum | + | + | + | + | + | + | + | A | + | + | + | + | + | + | + | + | + | A | + | + | + | A | + | + |
| Intestine Small, Jejunum | + | + | + | + | + | + | + | A | + | + | + | + | + | + | + | + | + | A | + | + | + | A | + | + |
| Liver | + | + | + | + | + | + | + | A | + | + | + | + | + | + | + | + | + | A | + | + | + | + | + | + |
| Clear Cell Focus | | | | | | | | | | | | | | | | | | | | | | | | |
| Cytomegaly | | | | | | | 2 | | | | | | | | | | | | | | | | | |
| Hematopoietic Cell Proliferation | | | | | | | | | | | | | | | | | | | | | | | 1 | |
| Infiltration Cellular, Lymphocyte | | | | | | | | | | | | | | 1 | | | | | 1 | | | | | |

* .. Total animals with tissue examined microscopically; Total animals with lesion and mean severity grade
 + .. Tissue examined microscopically
 X .. Lesion present
 I .. Insufficient tissue
 M .. Missing tissue
 A .. Autolysis precludes evaluation
 BLANK .. Not examined microscopically
 1-4 .. Lesion qualified as:
 1) Minimal 3) Moderate
 2) Mild 4) Marked

TDMS No. 20116 - 04
 Test Type: CHRONIC
 Route: DOSED WATER
 Species/Strain: MICE/B6C3F1/NCTR

P09: NON-NEOPLASTIC LESIONS BY INDIVIDUAL ANIMAL
 Aloe vera whole leaf extract (native)
 CAS Number: ALOEVLEAFEXT

Date Report Requested: 01/15/2010
 Time Report Requested: 14:39:08
 First Dose M/F: 04/19/05 / 04/19/05
 Lab: NCTR

| C57BL/6N XC3H/HEN MTV-NCTR
MICE FEMALE
ALOEWHOLLEAF 1.0 | DAY ON TEST | | | | | | | | | | | | | | | | | | | | females
(cont...) | | | | |
|----------------------------------------------------------------------------------------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|---|---|
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4 | 0
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1 | | |
| Inflammation, Chronic Active
Necrosis | 1 | | | | | | | | | | | | | | | | | | | | | | 1 | | |
| Tension Lipidosis | | | | 1 | 1 | | | | | | | | | | | | | | 2 | | | | | | |
| Vacuolization Cytoplasmic
Bile Duct, Hyperplasia | | | | | | 3 | | | | 2 | 2 | 2 | 1 | 1 | | | | | | | | | 1 | | |
| Mesentery
Fat, Necrosis | | | | | | | + | | | + | + | | | | | | | | | | | | + | | |
| Pancreas
Infiltration Cellular, Lymphocyte
Vacuolization Cytoplasmic
Acinus, Degeneration | + | + | + | + | + | + | + | + | A | + | + | + | + | + | + | + | + | A | + | + | + | A | + | + | |
| Salivary Glands
Infiltration Cellular, Lymphocyte | 2 | 1 | | | | 2 | 1 | 2 | | | 2 | 1 | 1 | 2 | 1 | 1 | 1 | 1 | A | 1 | | 1 | | 2 | 1 |
| Stomach, Forestomach
Keratin Cyst
Epithelium, Hyperplasia | + | + | + | + | + | + | + | + | A | + | + | + | + | + | + | + | + | + | A | + | + | + | + | + | |
| Stomach, Glandular
Inflammation, Chronic Active
Epithelium, Hyperplasia | + | + | + | + | + | + | + | + | A | + | + | + | + | + | + | + | + | + | A | + | + | + | + | + | |
| CARDIOVASCULAR SYSTEM | | | | | | | | | | | | | | | | | | | | | | | | | |
| Blood Vessel | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | |
| Heart | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | A | + | + |

* .. Total animals with tissue examined microscopically; Total animals with lesion and mean severity grade
 + .. Tissue examined microscopically
 X .. Lesion present
 I .. Insufficient tissue
 M .. Missing tissue
 A .. Autolysis precludes evaluation
 BLANK .. Not examined microscopically
 1-4 .. Lesion qualified as:
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 2) Mild 4) Marked

TDMS No. 20116 - 04
 Test Type: CHRONIC
 Route: DOSED WATER
 Species/Strain: MICE/B6C3F1/NCTR

P09: NON-NEOPLASTIC LESIONS BY INDIVIDUAL ANIMAL

Aloe vera whole leaf extract (native)

CAS Number: ALOEVLEAFEXT

Date Report Requested: 01/15/2010

Time Report Requested: 14:39:08

First Dose M/F: 04/19/05 / 04/19/05

Lab: NCTR

| DAY ON TEST | 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 | | | | | | | | | | | | | | | | | | | | | | | | ANIMAL ID | |
|-------------|---------------------------------------------------------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|-----------|---|
| | C57BL/6N XC3H/HEN MTV-NCTR
MICE FEMALE
ALOEWHOLLEAF 1.0 | 7 | 7 | 5 | 7 | 6 | 7 | 7 | 7 | 7 | 5 | 7 | 7 | 6 | 7 | 7 | 7 | 6 | 7 | 6 | 7 | 7 | 5 | 7 | | 7 |

females
(cont...)

GENITAL SYSTEM

| | | | | | | | | | | | | | | | | | | | | | | | | | |
|-----------------------------------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| Clitoral Gland Degeneration | + | + | + | + | + | + | + | + | + | M | + | + | + | + | + | + | + | + | + | + | + | A | + | + | |
| | 4 | 3 | 3 | 4 | 4 | 2 | 4 | 4 | 4 | | 4 | 4 | 4 | 4 | 4 | 3 | 4 | 2 | 4 | 4 | 4 | 4 | 4 | 2 | |
| Ovary Atrophy | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | A | + | + | |
| Ovary Autolysis | 4 | 4 | | 4 | 4 | 4 | 4 | 4 | 4 | | 4 | 4 | 4 | 4 | 4 | 4 | 4 | 4 | 4 | 4 | 4 | | | 4 | |
| Ovary Cyst | 3 | | 4 | | 2 | | 4 | | | 4 | | | | 2 | | | | 2 | 3 | 2 | 4 | 4 | | | |
| Uterus Hydrometra | + | + | + | + | + | + | + | + | A | + | + | + | + | + | + | + | + | A | + | + | + | + | + | + | |
| Uterus Thrombus | | | | | | | | | | | | | | 2 | | | | | | | | | | | |
| Uterus Endometrium, Hyperplasia, Cystic | 2 | 2 | 3 | 3 | 3 | 3 | 3 | 4 | | 2 | 3 | 3 | 4 | 3 | 3 | 3 | 4 | 3 | | 3 | 3 | 2 | 2 | 2 | 3 |

HEMATOPOIETIC SYSTEM

| | | | | | | | | | | | | | | | | | | | | | | | | | |
|---------------------------------------------------------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| Bone Marrow Hyperplasia | + | + | + | + | + | + | + | + | A | + | + | + | + | + | + | + | + | A | + | + | + | A | + | + | |
| | | | | 3 | | | | | | | | | 4 | | | | | 2 | | | | | | 3 | |
| Lymph Node Axillary, Infiltration Cellular, Polymorphonuclear | | | | | + | | | | | + | | | M | | | + | | | | | | + | + | | |
| Lymph Node Lumbar, Infiltration Cellular, Polymorphonuclear | | | | | | | | | | | | | | | | | | | | | | | | 3 | 3 |
| Lymph Node, Mandibular Amyloid Deposition | + | + | + | + | + | + | + | + | A | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | |
| Lymph Node Hyperplasia, Lymphoid | 1 | | | | | | | | | | | | 1 | 2 | | | 2 | | | 1 | | 2 | | 1 | |
| Lymph Node Infiltration Cellular, Lymphocyte | | | | 1 | | | | | | | | | | | | | | | | | | | | | |
| Lymph Node Infiltration Cellular, Plasma Cell | | | | | | | | | | | | | | | | | | | | | | | | 2 | |

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 + .. Tissue examined microscopically
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TDMS No. 20116 - 04
 Test Type: CHRONIC
 Route: DOSED WATER
 Species/Strain: MICE/B6C3F1/NCTR

P09: NON-NEOPLASTIC LESIONS BY INDIVIDUAL ANIMAL
 Aloe vera whole leaf extract (native)
 CAS Number: ALOEVLEAFEXT

Date Report Requested: 01/15/2010
 Time Report Requested: 14:39:08
 First Dose M/F: 04/19/05 / 04/19/05
 Lab: NCTR

| C57BL/6N XC3H/HEN MTV-NCTR
MICE FEMALE
ALOEWHOLLEAF 1.0 | DAY ON TEST | | | | | | | | | | | | | | | | | | | | ANIMAL ID | females
(cont...) | | |
|---------------------------------------------------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|-----------|----------------------|------------------|------------------|
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| | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 001131 | |
| | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 001132 | |
| | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 001133 | |
| | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 001134 | |
| | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 001135 | |
| | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 001136 | |
| | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 001137 | |
| | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 001138 | |
| | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 001139 | |
| | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 001140 | |
| | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 001141 | |
| | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 001142 | |
| | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 001143 | |
| | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 001144 | |
| | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 001145 | |
| | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 001146 | |
| | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 001147 | |
| | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 001148 | |
| | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 001149 | |
| | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 001150 | |
| | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 001151 | |
| | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 001152 | |
| | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 001153 | |
| | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 001154 | |
| | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 001155 | |
| | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 001156 | |
| | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 001157 | |
| | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 001158 | |
| | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 001159 | |
| | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 001160 | |

| | | | | | | | | | | | | | | | | | | | | | | | |
|---------------------------------------------------------------------------------------------------------------------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| Lymph Node, Mesenteric
Amyloid Deposition
Hemorrhage
Hyperplasia, Lymphoid
Infiltration Cellular, Plasma Cell | + | + | + | + | + | + | + | + | A | + | + | + | + | + | + | + | + | A | + | + | + | + | + |
| Spleen
Amyloid Deposition
Hematopoietic Cell Proliferation
Hyperplasia, Lymphoid
Pigmentation | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |
| Thymus
Amyloid Deposition
Atrophy
Hyperplasia, Lymphoid | + | + | + | + | + | + | + | + | A | + | + | + | + | + | M | + | + | + | + | + | + | A | + |

INTEGUMENTARY SYSTEM

| | | | | | | | | | | | | | | | | | | | | | | | |
|----------------------------------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| Mammary Gland
Alveolus, Hyperplasia | + | + | M | + | + | + | + | + | + | + | + | + | + | + | + | + | + | A | + | + | + | A | + |
| Skin | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | A | + |

MUSCULOSKELETAL SYSTEM

| | | | | | | | | | | | | | | | | | | | | | | | |
|-------------------------------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| Bone, Femur
Fibro-Osseous Lesion | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | A | + | + | + | + | + |
| Skeletal Muscle | | | | + | | | | | | | | | | | | | | | | | | | |

* .. Total animals with tissue examined microscopically; Total animals with lesion and mean severity grade
 + .. Tissue examined microscopically
 X .. Lesion present
 I .. Insufficient tissue
 M .. Missing tissue
 A .. Autolysis precludes evaluation
 BLANK .. Not examined microscopically
 1-4 .. Lesion qualified as:
 1) Minimal 3) Moderate
 2) Mild 4) Marked

TDMS No. 20116 - 04
Test Type: CHRONIC
Route: DOSED WATER
Species/Strain: MICE/B6C3F1/NCTR

P09: NON-NEOPLASTIC LESIONS BY INDIVIDUAL ANIMAL

Aloe vera whole leaf extract (native)

CAS Number: ALOEVLEAFEXT

Date Report Requested: 01/15/2010

Time Report Requested: 14:39:08

First Dose M/F: 04/19/05 / 04/19/05

Lab: NCTR

| DAY ON TEST | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
|-----------------------------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| C57BL/6N XC3H/HEN MTV-NCTR | 7 | 7 | 5 | 7 | 6 | 7 | 7 | 7 | 7 | 5 | 7 | 7 | 6 | 7 | 7 | 7 | 6 | 7 | 7 | 6 | 7 | 7 | 7 | 5 | 7 |
| MICE FEMALE | 3 | 3 | 4 | 3 | 5 | 3 | 3 | 3 | 2 | 6 | 3 | 3 | 8 | 3 | 3 | 3 | 3 | 8 | 3 | 3 | 3 | 0 | 4 | 3 | |
| ALOEWOLLEAF 1.0 | 6 | 6 | 6 | 6 | 0 | 6 | 6 | 6 | 2 | 9 | 6 | 6 | 9 | 6 | 6 | 6 | 6 | 8 | 6 | 6 | 6 | 7 | 3 | 6 | |
| ANIMAL ID | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 2 | 2 | 2 | 2 | 2 |
| | 3 | 3 | 3 | 3 | 4 | 4 | 4 | 4 | 5 | 5 | 5 | 6 | 6 | 6 | 6 | 5 | 5 | 5 | 5 | 7 | 7 | 7 | 7 | 8 | |
| | 1 | 2 | 3 | 4 | 1 | 2 | 3 | 4 | 1 | 2 | 3 | 4 | 1 | 2 | 3 | 4 | 1 | 2 | 3 | 4 | 1 | 2 | 3 | 4 | |

females
(cont...)

NERVOUS SYSTEM

| | | | | | | | | | | | | | | | | | | | | | | | | | | |
|-----------------------------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| Brain, Brain Stem
Compression | + | + | + | + | + | + | + | + | A | + | + | + | + | + | + | + | + | + | A | + | + | + | + | + | + | 1 |
| Brain, Cerebellum | + | + | + | + | + | + | + | + | A | + | + | + | + | + | + | + | + | + | A | + | + | + | + | + | + | |
| Brain, Cerebrum
Mineralization | + | | | | | | | | A | + | | | | | | | | | A | + | | | | | | |
| | | | | 2 | 1 | 2 | 1 | 1 | | | 1 | 1 | 1 | | 1 | 1 | 1 | 1 | | | 1 | 1 | 1 | 1 | 1 | |
| Peripheral Nerve | | | + | | | | | | | | | | | | | | | | | | | | | | | |
| Spinal Cord | | | + | | | | | | | | | | | | | | | | | | | | | | | |

RESPIRATORY SYSTEM

| | | | | | | | | | | | | | | | | | | | | | | | | | | |
|-----------------------------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|--|
| Lung
Hemorrhage | + | + | + | + | + | + | + | + | A | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | |
| Infiltration Cellular, Histiocyte | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Infiltration Cellular, Lymphocyte | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Inflammation, Chronic | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Inflammation, Chronic Active | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Metaplasia, Osseous | | | | | | | | | | 2 | | | | | | | | | | | | | | | | |
| Nose
Hyaline Droplet | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | A | + | + | + | A | + | + | |
| | | | | | | | | | | | 1 | | | | | | | | | 1 | 1 | 1 | | 1 | | |
| Trachea | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | A | + | + | + | A | + | + | |

SPECIAL SENSES SYSTEM

* .. Total animals with tissue examined microscopically; Total animals with lesion and mean severity grade
 + .. Tissue examined microscopically
 X .. Lesion present
 I .. Insufficient tissue
 M .. Missing tissue
 A .. Autolysis precludes evaluation
 BLANK .. Not examined microscopically
 1-4 .. Lesion qualified as:
 1) Minimal 3) Moderate
 2) Mild 4) Marked

TDMS No. 20116 - 04
 Test Type: CHRONIC
 Route: DOSED WATER
 Species/Strain: MICE/B6C3F1/NCTR

P09: NON-NEOPLASTIC LESIONS BY INDIVIDUAL ANIMAL
 Aloe vera whole leaf extract (native)
 CAS Number: ALOEVLEAFEXT

Date Report Requested: 01/15/2010
 Time Report Requested: 14:39:08
 First Dose M/F: 04/19/05 / 04/19/05
 Lab: NCTR

| C57BL/6N XC3H/HEN MTV-NCTR
MICE FEMALE
ALOEWHOLLEAF 1.0 | DAY ON TEST | | | | | | | | | | | | | | | | | | | | | | | | ANIMAL ID | females
(cont...) | |
|---------------------------------------------------------------|-------------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|-----------|----------------------|----------------------|
| | 0736 | 0736 | 0746 | 0776 | 0776 | 0776 | 0776 | 0776 | 0776 | 0776 | 0776 | 0776 | 0776 | 0776 | 0776 | 0776 | 0776 | 0776 | 0776 | 0776 | 0776 | 0776 | 0776 | 0776 | | | 0776 |
| | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0011331 | females
(cont...) |

Eye
Phthisis Bulbi

+ + + + + + + + A + + + + + + + + + + A + + + A + +

Harderian Gland
Infiltration Cellular, Lymphocyte
Epithelium, Hyperplasia

+ + + + + + + + A + + + + + + + + + + A + + + A + +
 1 1 2 1

URINARY SYSTEM

Kidney
Amyloid Deposition
Cyst, Multiple
Hyaline Droplet
Infiltration Cellular, Lymphocyte
Nephropathy
Pelvis, Dilatation
Pelvis, Mineralization
Transitional Epithelium, Hyperplasia

+ + + + + + + + A + + + + + + + + + + A + + + A + +
 4 4
 1 1 1 1 1 1 1 1 1
 1 1
 4 3
 2 2

Urinary Bladder
Infiltration Cellular, Lymphocyte

+ + + + + + + + A + + + + + + A + + + A + +
 1 1 2 1 1 1 1 1 1 1 1 1 1 1 1 1 1

* .. Total animals with tissue examined microscopically; Total animals with lesion and mean severity grade
 + .. Tissue examined microscopically M .. Missing tissue
 X .. Lesion present A .. Autolysis precludes evaluation
 I .. Insufficient tissue BLANK .. Not examined microscopically
 1-4 .. Lesion qualified as:
 1) Minimal 3) Moderate
 2) Mild 4) Marked

TDMS No. 20116 - 04
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 Route: DOSED WATER
 Species/Strain: MICE/B6C3F1/NCTR

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 CAS Number: ALOEVLEAFEXT

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 First Dose M/F: 04/19/05 / 04/19/05
 Lab: NCTR

| C57BL/6N XC3H/HEN MTV-NCTR
MICE FEMALE
ALOEWHOLLEAF 1.0 | DAY ON TEST | | | | | | | | | | | | | | | | | | | | * TOTALS | | |
|---------------------------------------------------------------|-------------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|----------|-------|-------|
| | 0601 | 0728 | 0738 | 0645 | 0736 | 0577 | 0776 | 0676 | 0655 | 0676 | 0773 | 0773 | 0776 | 0776 | 0776 | 0473 | 0733 | 0736 | 0776 | 0668 | | 0736 | 0736 |
| ANIMAL ID | 00282 | 00283 | 00284 | 00281 | 00284 | 00284 | 00284 | 00284 | 00281 | 00288 | 00288 | 00288 | 00281 | 00281 | 00281 | 00283 | 00283 | 00283 | 00284 | 00281 | 00282 | 00283 | 00284 |
| | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| | 2 | 2 | 2 | 4 | 4 | 4 | 4 | 4 | 4 | 4 | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 9 | 9 | 9 | 9 |
| | 8 | 8 | 8 | 7 | 7 | 7 | 7 | 8 | 8 | 8 | 8 | 8 | 1 | 1 | 1 | 3 | 3 | 3 | 3 | 1 | 1 | 1 | 1 |
| | 2 | 3 | 4 | 1 | 2 | 3 | 4 | 1 | 2 | 3 | 4 | 1 | 2 | 3 | 4 | 1 | 2 | 3 | 4 | 1 | 2 | 3 | 4 |

ALIMENTARY SYSTEM

| | | | | | | | | | | | | | | | | | | | | | | | | | | |
|---------------------------------------------------------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|----|-----|-----|
| Esophagus | A | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | A | + | + | + | + | 46 | | |
| Gallbladder | M | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | A | + | + | + | + | 43 | | |
| Intestine Large, Ascending Colon
Goblet Cell, Hyperplasia | A | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | A | + | + | + | + | 43 | 15 | 1.2 |
| Intestine Large, Cecum | A | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | A | + | + | + | + | 43 | | |
| Intestine Large, Descending Colon
Goblet Cell, Hyperplasia | A | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | A | + | + | + | + | 43 | 4 | 1.3 |
| Intestine Large, Rectum | A | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | A | + | + | + | + | 43 | | |
| Intestine Large, Transverse Colon
Goblet Cell, Hyperplasia | A | M | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | A | + | + | + | + | 42 | 18 | 1.2 |
| Intestine Small, Duodenum | A | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | A | + | + | + | + | 43 | | |
| Intestine Small, Ileum | A | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | A | + | + | + | + | 43 | | |
| Intestine Small, Jejunum | A | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | A | + | + | + | + | 43 | | |
| Liver | A | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | A | + | + | + | + | 44 | | |
| Clear Cell Focus | | | | | | | | | | | | | | | | | | | | | | | | 1 | | |
| Cytomegaly | | | | | | | | | | | | | | | | | | | | | | | | 1 | 2.0 | |
| Hematopoietic Cell Proliferation | | | | | | | | | | | | | | | | | | | | | | | | 1 | 1.0 | |
| Infiltration Cellular, Lymphocyte | | | | 1 | | | | | | | | | | | 1 | | 1 | | 2 | | | | | 6 | 1.2 | |

* .. Total animals with tissue examined microscopically; Total animals with lesion and mean severity grade
 + .. Tissue examined microscopically
 X .. Lesion present
 I .. Insufficient tissue
 M .. Missing tissue
 A .. Autolysis precludes evaluation
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TDMS No. 20116 - 04
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| C57BL/6N XC3H/HEN MTV-NCTR
MICE FEMALE
ALOEWHOLLEAF 1.0 | DAY ON TEST | | | | | | | | | | | | | | | | | | | | * TOTALS |
|---------------------------------------------------------------|-------------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|----------|
| | 0601 | 0728 | 0736 | 0645 | 0737 | 0756 | 0776 | 0665 | 0766 | 0776 | 0776 | 0776 | 0776 | 0776 | 0776 | 0474 | 0776 | 0776 | 0776 | 0668 | |
| ANIMAL ID | 00282 | 00283 | 00284 | 00281 | 00287 | 00284 | 00284 | 00284 | 00284 | 00284 | 00284 | 00284 | 00284 | 00284 | 00284 | 00284 | 00284 | 00284 | 00284 | 00284 | 00284 |
| Inflammation, Chronic Active | | | | | | | | | | | | | | | | | | | | | |
| Necrosis | | | | | | | | | | | | | | | | | | | | | |
| Tension Lipidosis | | | | | | | | | | | | | | | | | | | | | |
| Vacuolization Cytoplasmic | | | | | | | | | | | | | | | | | | | | | |
| Bile Duct, Hyperplasia | | | | | | | | | | | | | | | | | | | | | |
| Mesentery | | | | | | | | | | | | | | | | | | | | | |
| Fat, Necrosis | | | | | | | | | | | | | | | | | | | | | |
| Pancreas | A | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | A | + | + | + |
| Infiltration Cellular, Lymphocyte | | | | | | | | | | | | | | | | | | | | | |
| Vacuolization Cytoplasmic | | | | | | | | | | | | | | | | | | | | | |
| Acinus, Degeneration | | | | | | | | | | | | | | | | | | | | | |
| Salivary Glands | A | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | A | + | + | + |
| Infiltration Cellular, Lymphocyte | | | | | | | | | | | | | | | | | | | | | |
| Stomach, Forestomach | A | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | A | + | + | + |
| Keratin Cyst | | | | | | | | | | | | | | | | | | | | | |
| Epithelium, Hyperplasia | | | | | | | | | | | | | | | | | | | | | |
| Stomach, Glandular | A | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | A | + | + | + |
| Inflammation, Chronic Active | | | | | | | | | | | | | | | | | | | | | |
| Epithelium, Hyperplasia | | | | | | | | | | | | | | | | | | | | | |
| CARDIOVASCULAR SYSTEM | | | | | | | | | | | | | | | | | | | | | |
| Blood Vessel | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | A | + | + | + |
| Heart | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | A | + | + | + |

* .. Total animals with tissue examined microscopically; Total animals with lesion and mean severity grade
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 X .. Lesion present
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| C57BL/6N XC3H/HEN MTV-NCTR
MICE FEMALE
ALOEWHOLLEAF 1.0 | DAY ON TEST | | | | | | | | | | | | | | | | | | | | * TOTALS |
|---------------------------------------------------------------|----------------|----------------|----------------|----------------|----------------|----------------|----------------|----------------|----------------|----------------|----------------|----------------|----------------|----------------|----------------|----------------|----------------|----------------|----------------|----------------|----------|
| | 06
00
01 | 07
02
08 | 07
03
06 | 06
04
05 | 07
03
06 | 05
07
06 | 07
03
06 | 07
06
06 | 06
04
05 | 07
03
06 | 07
07
03 | 07
07
06 | 07
07
06 | 07
07
06 | 07
07
06 | 04
03
00 | 07
03
06 | 07
03
06 | 07
03
06 | 06
07
06 | |
| ANIMAL ID | 00282 | 00283 | 00284 | 00281 | 00287 | 00284 | 00288 | 00281 | 00282 | 00283 | 00284 | 00286 | 00286 | 00286 | 00284 | 00281 | 00283 | 00283 | 00284 | 00281 | 00282 |

Cardiomyopathy

2 1.0

ENDOCRINE SYSTEM

| | | | | | | | | | | | | | | | | | | | | | | | | | |
|-------------------------------------------------------------------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|----|----|-----|
| Adrenal Cortex
Vacuolization Cytoplasmic
Subcapsular, Hyperplasia | A | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | A | + | + | + | + | 43 | 4 | 2.3 |
| | | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 1 | 3 | 2 | 2 | 2 | 2 | 2 | | 2 | 2 | 1 | 3 | | 43 | 1.9 |
| Adrenal Medulla | A | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | A | + | + | + | + | 42 | | |
| Islets, Pancreatic
Hyperplasia | A | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | A | + | + | + | + | 43 | 5 | 1.8 |
| Parathyroid Gland
Cyst | A | + | + | + | + | + | + | + | + | M | + | + | + | + | + | + | + | A | M | + | + | + | 37 | 1 | 1.0 |
| Pituitary Gland
Pars Distalis, Hyperplasia | A | M | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | A | M | + | + | + | 38 | 8 | 1.4 |
| Thyroid Gland
Cyst | A | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | A | + | + | + | + | 43 | 1 | 2.0 |
| Ectopic Thymus | | | | | | | | | | | | | | | | | | | | | | | | 1 | |
| Infiltration Cellular, Lymphocyte | | | 1 | | | | | | | | | | | | | | | | | | | | | 1 | 1.0 |
| Follicle, Degeneration | | | | | | 1 | | | | | 2 | 1 | | | | | | | | | | | | 10 | 1.3 |
| Follicular Cell, Hyperplasia | | | | | | | | | | | | | | | | | 2 | | | | | | | 1 | 2.0 |

GENERAL BODY SYSTEM

NONE

* .. Total animals with tissue examined microscopically; Total animals with lesion and mean severity grade
 + .. Tissue examined microscopically
 X .. Lesion present
 I .. Insufficient tissue
 M .. Missing tissue
 A .. Autolysis precludes evaluation
 BLANK .. Not examined microscopically

1-4 .. Lesion qualified as:
 1) Minimal 3) Moderate
 2) Mild 4) Marked

TDMS No. 20116 - 04
 Test Type: CHRONIC
 Route: DOSED WATER
 Species/Strain: MICE/B6C3F1/NCTR

P09: NON-NEOPLASTIC LESIONS BY INDIVIDUAL ANIMAL
 Aloe vera whole leaf extract (native)
 CAS Number: ALOEVLEAFEXT

Date Report Requested: 01/15/2010
 Time Report Requested: 14:39:08
 First Dose M/F: 04/19/05 / 04/19/05
 Lab: NCTR

| C57BL/6N XC3H/HEN MTV-NCTR
MICE FEMALE
ALOEWHOLLEAF 1.0 | DAY ON TEST | | | | | | | | | | | | | | | | | | | | * TOTALS | | | | | | |
|---------------------------------------------------------------|-------------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|----------|-------|-------|-------|-------|-------|-------|
| | 0601 | 0728 | 0736 | 0744 | 0753 | 0773 | 0776 | 0776 | 0765 | 0776 | 0777 | 0777 | 0777 | 0777 | 0777 | 0747 | 0773 | 0773 | 0777 | 0777 | | 0668 | 0773 | 0776 | 0776 | 0766 | 0773 |
| ANIMAL ID | 00282 | 00228 | 00228 | 00444 | 00444 | 00444 | 00444 | 00444 | 00444 | 00444 | 00444 | 00444 | 00444 | 00444 | 00444 | 00444 | 00444 | 00444 | 00444 | 00444 | 00444 | 00444 | 00444 | 00444 | 00444 | 00444 | 00444 |
| | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| | 2 | 2 | 2 | 4 | 4 | 4 | 4 | 4 | 4 | 4 | 4 | 4 | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 9 | 9 | 9 | 9 | 9 | |
| | 8 | 8 | 8 | 7 | 7 | 7 | 8 | 8 | 8 | 8 | 8 | 1 | 1 | 1 | 1 | 3 | 3 | 3 | 3 | 3 | 4 | 1 | 1 | 1 | 1 | 1 | |
| | 2 | 3 | 4 | 1 | 2 | 3 | 4 | 1 | 2 | 3 | 4 | 1 | 2 | 3 | 4 | 1 | 2 | 3 | 4 | 1 | 2 | 3 | 4 | 1 | 2 | 3 | |

GENITAL SYSTEM

| | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|-----------------------------------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|----|-----|-----|-----|
| Clitoral Gland Degeneration | A | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | A | + | + | + | + | 44 | 44 | 3.8 |
| Ovary Atrophy | A | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 46 | 39 | 3.9 | |
| Ovary Autolysis | | 4 | 4 | 3 | 4 | 3 | 4 | 4 | 4 | 4 | 4 | 4 | 4 | 4 | 4 | 4 | 4 | 4 | 4 | 4 | 4 | 4 | 4 | 1 | 4.0 | | |
| Ovary Cyst | | | | | | 2 | | 2 | | | | 4 | 2 | 4 | | | | | | 4 | | | 3 | 18 | 3.1 | | |
| Uterus Hydrometra | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | A | + | + | + | + | 45 | 1 | 4.0 |
| Uterus Thrombus | 4 | | | | | | | | | | | | | | | | | | | | | | | 1 | 2.0 | | |
| Uterus Endometrium, Hyperplasia, Cystic | | 3 | 3 | 1 | 2 | 3 | 4 | 3 | 4 | 3 | 2 | 2 | 3 | 3 | 3 | 2 | 3 | 3 | | 3 | 1 | 2 | 2 | 44 | 2.8 | | |

HEMATOPOIETIC SYSTEM

| | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|---------------------------------------------------------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|----|-----|-----|-----|
| Bone Marrow Hyperplasia | A | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | A | + | + | + | + | 43 | 5 | 2.8 |
| Lymph Node Axillary, Infiltration Cellular, Polymorphonuclear | + | + | + | | | | | | + | | + | + | | | | | | | | + | + | | | 15 | 1 | 3.0 | |
| Lymph Node Lumbar, Infiltration Cellular, Polymorphonuclear | | | | | | | | | | | | | | | | | | | | | | | | 1 | 3.0 | | |
| Lymph Node, Mandibular Amyloid Deposition | A | + | + | + | + | + | + | + | + | + | + | + | + | + | M | + | + | + | A | + | + | + | + | 44 | 1 | 2.0 | |
| Lymph Node Hyperplasia, Lymphoid | | | | | | 2 | | | | 1 | 1 | | | | | | | 1 | 2 | | | | 2 | 13 | 1.5 | | |
| Lymph Node Infiltration Cellular, Lymphocyte | | | | | | | | | | | | | | | | | | | | | | | | 1 | 1.0 | | |
| Lymph Node Infiltration Cellular, Plasma Cell | | | | | | 3 | | | | | | | | | | | | | | | | | | 2 | 2.5 | | |

* .. Total animals with tissue examined microscopically; Total animals with lesion and mean severity grade
 + .. Tissue examined microscopically
 X .. Lesion present
 I .. Insufficient tissue
 M .. Missing tissue
 A .. Autolysis precludes evaluation
 BLANK .. Not examined microscopically

1-4 .. Lesion qualified as:
 1) Minimal 3) Moderate
 2) Mild 4) Marked

TDMS No. 20116 - 04
 Test Type: CHRONIC
 Route: DOSED WATER
 Species/Strain: MICE/B6C3F1/NCTR

P09: NON-NEOPLASTIC LESIONS BY INDIVIDUAL ANIMAL
 Aloe vera whole leaf extract (native)
 CAS Number: ALOEVLEAFEXT

Date Report Requested: 01/15/2010
 Time Report Requested: 14:39:08
 First Dose M/F: 04/19/05 / 04/19/05
 Lab: NCTR

| C57BL/6N XC3H/HEN MTV-NCTR
MICE FEMALE
ALOEWHOLLEAF 1.0 | DAY ON TEST | | | | | | | | | | | | | | | | | | | | * TOTALS | |
|---------------------------------------------------------------|-------------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|----------|------|
| | 0601 | 0728 | 0736 | 0745 | 0757 | 0773 | 0773 | 0766 | 0775 | 0777 | 0777 | 0777 | 0777 | 0777 | 0777 | 0777 | 0777 | 0777 | 0777 | 0777 | | 0777 |
| ANIMAL ID | 00282 | 00288 | 00284 | 00244 | 00244 | 00244 | 00244 | 00244 | 00244 | 00244 | 00244 | 00244 | 00244 | 00244 | 00244 | 00244 | 00244 | 00244 | 00244 | 00244 | 00244 | |
| | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 45 |

| | | | | | | | | | | | | | | | | | | | | | | | |
|-------------------------------------------------------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|----|--------|
| Lymph Node, Mesenteric
Amyloid Deposition | + | + | + | + | + | + | + | + | + | + | + | + | + | M | + | + | + | + | + | + | + | 45 | 1 2.0 |
| Hemorrhage | | | | | | | | | | | | | | | | | | | | | 2 | | 1 2.0 |
| Hyperplasia, Lymphoid
Infiltration Cellular, Plasma Cell | | | | | | | | | | | | 2 | | | 2 | | | | | 2 | 2 | | 12 1.8 |
| | | | | | | 3 | | | | | | | | | | | | | | | | | 2 2.5 |

| | | | | | | | | | | | | | | | | | | | | | | | | | |
|----------------------------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|--------|-------|
| Spleen
Amyloid Deposition | A | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | A | + | + | + | + | 46 | 1 3.0 |
| Hematopoietic Cell Proliferation | | | | 1 | 2 | | | | 3 | 2 | | | | | | | 2 | 3 | | | 4 | 3 | | 13 2.8 | |
| Hyperplasia, Lymphoid | | | 2 | 2 | 2 | 1 | | | | | | 3 | 4 | 3 | | 3 | 3 | | 2 | | 3 | 2 | | 23 2.5 | |
| Pigmentation | | | | | 2 | | | | | | | | | | | | 2 | | | | | | | 4 2.0 | |

| | | | | | | | | | | | | | | | | | | | | | | | | |
|------------------------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|----|--------|
| Thymus
Amyloid Deposition | + | M | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 44 | 1 2.0 |
| Atrophy | | | | | | | | 3 | | | | | | | 1 | | 3 | | 2 | | | | | 14 2.4 |
| Hyperplasia, Lymphoid | | | | | 1 | | | | | | | 2 | 2 | | | | | | | | | | | 7 1.9 |

INTEGUMENTARY SYSTEM

| | | | | | | | | | | | | | | | | | | | | | | | | | |
|----------------------------------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|----|-------|
| Mammary Gland
Alveolus, Hyperplasia | A | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | A | + | + | + | + | 43 | 3 1.7 |
|----------------------------------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|----|-------|

| | | | | | | | | | | | | | | | | | | | | | | | | | |
|------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|----|--|
| Skin | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | A | + | + | + | + | 46 | |
|------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|----|--|

MUSCULOSKELETAL SYSTEM

| | | | | | | | | | | | | | | | | | | | | | | | | | |
|-------------------------------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|----|-------|
| Bone, Femur
Fibro-Osseous Lesion | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | A | + | + | + | + | 46 | 1 3.0 |
|-------------------------------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|----|-------|

| | | | | | | | | | | | | | | | | | | | | | | | | | |
|-----------------|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|---|--|
| Skeletal Muscle | | | | | | | | | | | | | | | | | | | | | | | | 2 | |
|-----------------|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|---|--|

* .. Total animals with tissue examined microscopically; Total animals with lesion and mean severity grade
 + .. Tissue examined microscopically
 X .. Lesion present
 I .. Insufficient tissue
 M .. Missing tissue
 A .. Autolysis precludes evaluation
 BLANK .. Not examined microscopically
 1-4 .. Lesion qualified as:
 1) Minimal 3) Moderate
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TDMS No. 20116 - 04
 Test Type: CHRONIC
 Route: DOSED WATER
 Species/Strain: MICE/B6C3F1/NCTR

P09: NON-NEOPLASTIC LESIONS BY INDIVIDUAL ANIMAL
 Aloe vera whole leaf extract (native)
 CAS Number: ALOEVLEAFEXT

Date Report Requested: 01/15/2010
 Time Report Requested: 14:39:08
 First Dose M/F: 04/19/05 / 04/19/05
 Lab: NCTR

| DAY ON TEST | C57BL/6N XC3H/HEN MTV-NCTR MICE FEMALE | | | | | | | | | | | | | | | | | | | | * TOTALS | |
|-------------|----------------------------------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|----------|---|
| | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | | 0 |
| 0 | 6 | 7 | 7 | 6 | 7 | 5 | 7 | 7 | 6 | 7 | 7 | 7 | 7 | 7 | 7 | 4 | 7 | 7 | 7 | 6 | 7 | 7 |
| 0 | 2 | 3 | 4 | 3 | 7 | 3 | 3 | 4 | 3 | 0 | 0 | 3 | 3 | 3 | 0 | 3 | 3 | 2 | 3 | 6 | 3 | 3 |
| 1 | 8 | 6 | 5 | 6 | 7 | 6 | 6 | 5 | 6 | 3 | 3 | 6 | 6 | 6 | 0 | 6 | 6 | 7 | 6 | 8 | 6 | 6 |
| ANIMAL ID | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| 2 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| 2 | 2 | 2 | 2 | 4 | 4 | 4 | 4 | 4 | 4 | 4 | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 9 | 9 | 9 | 9 | 9 |
| 8 | 8 | 8 | 7 | 7 | 7 | 8 | 8 | 8 | 8 | 1 | 1 | 1 | 1 | 1 | 3 | 3 | 3 | 3 | 1 | 1 | 1 | 1 |
| 2 | 3 | 4 | 1 | 2 | 3 | 4 | 1 | 2 | 3 | 4 | 1 | 2 | 3 | 4 | 1 | 2 | 3 | 4 | 1 | 2 | 3 | 4 |

NERVOUS SYSTEM

| | | | | | | | | | | | | | | | | | | | | | | | | | |
|-----------------------------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|----|----|-----|
| Brain, Brain Stem
Compression | A | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | A | + | + | + | + | 44 | 1 | 1.0 |
| Brain, Cerebellum | A | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | A | + | + | + | + | 44 | | |
| Brain, Cerebrum
Mineralization | A | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | A | + | + | + | + | 44 | 30 | 1.1 |
| Peripheral Nerve | | | | | | | | | | | | | | | | | | | | | | | 1 | | |
| Spinal Cord | | | | | | | | | | | | | | | | | | | | | | | 1 | | |

RESPIRATORY SYSTEM

| | | | | | | | | | | | | | | | | | | | | | | | | | |
|-----------------------------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|----|-----|-----|
| Lung
Hemorrhage | A | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | A | + | + | + | + | 45 | 1 | 4.0 |
| Infiltration Cellular, Histiocyte | | | | 2 | | 2 | | | | | | | | | | | | 3 | | | | | 4 | 2.0 | |
| Infiltration Cellular, Lymphocyte | | | | | 1 | | | | | | | | | | | | | | | | | | 2 | 1.5 | |
| Inflammation, Chronic | | | | | | | | | | | | | | 1 | | | | | | | | | 1 | 1.0 | |
| Inflammation, Chronic Active | | | | | | | | | | | | | | | | | | | | | | | 1 | 2.0 | |
| Metaplasia, Osseous | | | | | | | | | | | | | | 1 | | | | | | | | | 1 | 1.0 | |
| Nose
Hyaline Droplet | A | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | A | + | + | + | + | 44 | 12 | 1.2 |
| Trachea | A | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | A | + | + | + | + | 44 | | |

SPECIAL SENSES SYSTEM

* .. Total animals with tissue examined microscopically; Total animals with lesion and mean severity grade
 + .. Tissue examined microscopically
 X .. Lesion present
 I .. Insufficient tissue
 M .. Missing tissue
 A .. Autolysis precludes evaluation
 BLANK .. Not examined microscopically
 1-4 .. Lesion qualified as:
 1) Minimal 3) Moderate
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TDMS No. 20116 - 04
 Test Type: CHRONIC
 Route: DOSED WATER
 Species/Strain: MICE/B6C3F1/NCTR

P09: NON-NEOPLASTIC LESIONS BY INDIVIDUAL ANIMAL
 Aloe vera whole leaf extract (native)
 CAS Number: ALOEVLEAFEXT

Date Report Requested: 01/15/2010
 Time Report Requested: 14:39:08
 First Dose M/F: 04/19/05 / 04/19/05
 Lab: NCTR

| C57BL/6N XC3H/HEN MTV-NCTR
MICE FEMALE
ALOEWHOLLEAF 1.0 | DAY ON TEST | | | | | | | | | | | | | | | | | | | | * TOTALS | | | | | | |
|---------------------------------------------------------------------------------|-------------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|----------|------|---|----|----------------|-------|--|
| | 0601 | 0728 | 0738 | 0745 | 0757 | 0776 | 0776 | 0766 | 0775 | 0776 | 0777 | 0777 | 0777 | 0777 | 0777 | 0777 | 0777 | 0777 | 0777 | 0777 | | 0777 | | | | | |
| ANIMAL ID | 00282 | 00022 | 00022 | 00044 | 00044 | 00044 | 00044 | 00044 | 00044 | 00044 | 00044 | 00044 | 00044 | 00044 | 00044 | 00044 | 00044 | 00044 | 00044 | 00044 | 00044 | | | | | | |
| Eye
Phthisis Bulbi | A | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | A | + | + | + | + | 43 | 1 4.0 | |
| Harderian Gland
Infiltration Cellular, Lymphocyte
Epithelium, Hyperplasia | + | + | + | + | + | + | + | + | + | + | + | + | + | M | + | + | + | + | A | + | + | + | + | 43 | 5 1.0
2 1.5 | | |
| URINARY SYSTEM | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Kidney | A | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | A | + | + | + | + | 43 | 1 4.0 | | |
| Amyloid Deposition | | | | | | | | | | | | | | | | | | | | | | | | | 1 | 4.0 | |
| Cyst, Multiple | | | | | | | | | | | | | | | | | | | | | | | | | 1 | 4.0 | |
| Hyaline Droplet | | | | | | | | | | | | | 3 | | | | | | | | | | | | 1 | 3.0 | |
| Infiltration Cellular, Lymphocyte | | | 1 | | | 1 | | 1 | 1 | | | | | 1 | | | 2 | 1 | | 2 | | | 1 | 1 | 23 | 1.1 | |
| Nephropathy | | | | | 1 | | | | | | | | | 1 | | 1 | | | | | | | 2 | | 6 | 1.7 | |
| Pelvis, Dilatation | | | | | | | | | | | | | | | | | | | | | | | | | 1 | 3.0 | |
| Pelvis, Mineralization | | | | | | | | | | | | | | | | | | | | | | | | | 1 | 2.0 | |
| Transitional Epithelium, Hyperplasia | | | | | | | | | | | | | | | | | | | | | | | | | 1 | 2.0 | |
| Urinary Bladder | A | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | A | + | + | + | + | 43 | 22 1.0 | | |
| Infiltration Cellular, Lymphocyte | | 1 | 1 | 1 | | 1 | | | | | 1 | | | | | | | 1 | 1 | | | 1 | 1 | | 22 | 1.0 | |

* .. Total animals with tissue examined microscopically; Total animals with lesion and mean severity grade
 + .. Tissue examined microscopically
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 I .. Insufficient tissue
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TDMS No. 20116 - 04
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 Aloe vera whole leaf extract (native)
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| C57BL/6N XC3H/HEN MTV-NCTR
MICE FEMALE
ALOEWHOLLEAF 2.0 | DAY ON TEST | | | | | | | | | | | | | | | | | | | | ANIMAL ID | females
(cont...) | | |
|---------------------------------------------------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|-----------|----------------------|-----------------------|------------------|
| | 0
7
3
6 | 0
7
3
6 | 0
7
3
6 | 0
7
3
6 | 0
7
3
6 | 0
7
3
6 | 0
6
4
7 | 0
7
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6 | 0
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6 | 0
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6 | 0
7
3
6 | 0
7
3
6 | 0
7
3
6 | 0
6
5
1 | 0
7
3
5 | 0
6
7
6 | 0
7
3
6 | | | 0
7
3
6 | 0
7
3
6 |
| | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0
0
1
2
1 | |

ALIMENTARY SYSTEM

| | | | | | | | | | | | | | | | | | | | | | | | | |
|----------------------------------------------------------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| Esophagus | + | + | + | + | + | + | + | + | + | A | + | + | + | A | + | + | + | + | + | + | + | + | + | + |
| Gallbladder | + | + | + | + | + | + | + | + | + | A | + | + | + | A | + | + | + | + | + | + | + | + | + | + |
| Intestine Large, Ascending Colon
Goblet Cell, Hyperplasia | + | + | + | + | + | + | + | + | + | A | + | + | + | A | + | + | + | + | + | + | + | + | + | + |
| | | | | | 1 | | | | | 2 | 1 | | | | | | 2 | | | 1 | 1 | | 2 | |
| Intestine Large, Cecum
Goblet Cell, Hyperplasia | + | + | + | + | + | + | + | + | + | A | + | + | + | A | + | + | + | + | + | + | + | + | + | + |
| | | | | | | | | | | | | | | | | | | | | | | 1 | | |
| Intestine Large, Descending Colon
Goblet Cell, Hyperplasia | + | + | + | + | + | + | + | + | + | A | + | + | + | A | + | + | + | + | + | + | + | + | + | + |
| | | | | | | | | | | 1 | | | | | | | 2 | | | | | | | |
| Intestine Large, Rectum | + | + | + | + | + | + | + | + | + | A | + | + | + | M | + | + | + | + | + | + | + | + | + | + |
| Intestine Large, Transverse Colon
Goblet Cell, Hyperplasia | + | + | + | + | + | + | + | + | + | A | + | + | + | A | + | + | + | + | + | + | + | + | + | + |
| | | | 1 | | 1 | | | | | 2 | 2 | | 1 | | | 2 | 1 | 1 | 1 | 1 | | 2 | | |
| Intestine Small, Duodenum | + | + | + | + | + | + | + | + | + | A | + | + | + | M | + | + | + | + | + | + | + | + | + | + |
| Intestine Small, Ileum
Hyperplasia, Lymphoid | + | + | + | + | + | + | + | + | + | A | + | + | + | A | + | + | + | + | + | + | + | + | + | + |
| | | | | | | | | | | | | | | | | | | | | | | 3 | | |
| Intestine Small, Jejunum | + | + | + | + | + | + | + | + | + | A | + | + | + | A | + | + | + | + | + | + | + | + | + | + |
| Liver
Basophilic Focus
Infiltration Cellular, Lymphocyte | + | + | + | + | + | + | + | + | + | A | + | + | + | A | + | + | + | + | + | + | + | + | + | + |
| | | | | | | | | | | | | | | | | | | | | | | | | |
| | | | | | | | | | | | | | | | | | 1 | | | | | 1 | 2 | 2 |

* .. Total animals with tissue examined microscopically; Total animals with lesion and mean severity grade
 + .. Tissue examined microscopically
 X .. Lesion present
 I .. Insufficient tissue
 M .. Missing tissue
 A .. Autolysis precludes evaluation
 BLANK .. Not examined microscopically
 1-4 .. Lesion qualified as:
 1) Minimal 3) Moderate
 2) Mild 4) Marked

TDMS No. 20116 - 04
 Test Type: CHRONIC
 Route: DOSED WATER
 Species/Strain: MICE/B6C3F1/NCTR

P09: NON-NEOPLASTIC LESIONS BY INDIVIDUAL ANIMAL

Aloe vera whole leaf extract (native)

CAS Number: ALOEVLEAFEXT

Date Report Requested: 01/15/2010

Time Report Requested: 14:39:08

First Dose M/F: 04/19/05 / 04/19/05

Lab: NCTR

| C57BL/6N XC3H/HEN MTV-NCTR
MICE FEMALE
ALOEWHOLLEAF 2.0 | DAY ON TEST | | | | | | | | | | | | | | | | | | | | | | | | females
(cont...) | |
|---------------------------------------------------------------|-------------|----------|----------|----------|----------|----------|----------|----------|----------|----------|----------|----------|----------|----------|----------|----------|----------|----------|----------|----------|----------|----------|----------|----------|----------------------|----------|
| | 07
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36 | 07
36 | 07
36 | 07
36 | 07
36 | 06
47 | 07
36 | 07
36 | 07
36 | 07
36 | 07
36 | 07
36 | 07
36 | 07
36 | 07
36 | 07
36 | 07
36 | 07
36 | 07
36 | 07
36 | 07
36 | 07
36 | 07
36 | | 07
36 |
| ANIMAL ID | 001121 | 001122 | 001123 | 001124 | 001125 | 001126 | 001127 | 001128 | 001129 | 001130 | 001131 | 001132 | 001133 | 001134 | 001135 | 001136 | 001137 | 001138 | 001139 | 001140 | 001141 | 001142 | 001143 | 001144 | 001145 | 001146 |
| Inflammation, Chronic Active Mixed Cell Focus | 1 | | | | | | | | | | | | | | | | | | | | 1 | | | | | 2 |
| Necrosis | | | | | | | | | | | | | | | | | | | | | X | | | | | |
| Pigmentation | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Tension Lipidosis | | | | | | | 1 | | | | | | | | | | | | | | | | | | | |
| Vacuolization Cytoplasmic Parenchyma, Degeneration | 1 | | | | | | | | 2 | 1 | | | 2 | | | 1 | | | | | | | | | | 1 |
| Mesentery | | + | + | | + | + | | | | | | | | + | + | | | | | | + | | | | | + |
| Angiectasis | | | | | | | | | | | | | | | | | | | | | | | | | | 3 |
| Infiltration Cellular, Lymphocyte | | 3 | | | | | | | | | | | | | | | | | | | | | | | | |
| Inflammation, Chronic Active | | | | | | | | | | | | | | | | | | | | | | | | | | 4 |
| Fat, Necrosis | | 4 | 2 | | | 2 | 4 | | | | | | | 4 | 4 | | | | | | 2 | | | | | 3 |
| Pancreas | + | + | + | + | + | + | + | + | + | A | + | + | + | A | + | + | + | + | + | + | + | + | + | + | + | + |
| Infiltration Cellular, Lymphocyte | | | | 2 | | 1 | | | | | 1 | | | | | | | | | 1 | 1 | | | | | 1 |
| Acinus, Degeneration | | | | | | | | | | | | | | | | | | | | | | | | | | 1 |
| Duct, Dilatation | | | | | | | | | | | | | | | | | | | | | | | | | | 1 |
| Salivary Glands | + | + | + | + | + | + | + | + | + | A | + | + | + | A | + | + | + | + | + | + | + | + | + | + | + | + |
| Infiltration Cellular, Lymphocyte | | | 2 | 1 | | | 1 | 1 | 1 | 1 | | | | | 1 | 1 | | | | | | 1 | 1 | | | 1 |
| Stomach, Forestomach | + | + | + | + | + | + | + | + | + | A | + | + | + | A | + | + | + | + | + | + | + | + | + | + | + | + |
| Epithelium, Hyperplasia | | | | | | | | | | | | | | | | | | | | | | | | | | 2 |
| Stomach, Glandular | + | + | + | + | + | + | + | + | + | A | + | + | + | A | + | + | + | + | + | + | + | + | + | + | + | + |
| Epithelium, Hyperplasia | | | | | | | | | | | | | | | | | | | | | | | | | | 2 |

CARDIOVASCULAR SYSTEM

* .. Total animals with tissue examined microscopically; Total animals with lesion and mean severity grade
 + .. Tissue examined microscopically
 X .. Lesion present
 I .. Insufficient tissue
 M .. Missing tissue
 A .. Autolysis precludes evaluation
 BLANK .. Not examined microscopically

1-4 .. Lesion qualified as:
 1) Minimal 3) Moderate
 2) Mild 4) Marked

TDMS No. 20116 - 04
 Test Type: CHRONIC
 Route: DOSED WATER
 Species/Strain: MICE/B6C3F1/NCTR

P09: NON-NEOPLASTIC LESIONS BY INDIVIDUAL ANIMAL
 Aloe vera whole leaf extract (native)
 CAS Number: ALOEVLEAFEXT

Date Report Requested: 01/15/2010
 Time Report Requested: 14:39:08
 First Dose M/F: 04/19/05 / 04/19/05
 Lab: NCTR

| C57BL/6N XC3H/HEN MTV-NCTR
MICE FEMALE
ALOEWHOLLEAF 2.0 | DAY ON TEST | | | | | | | | | | | | | | | | | | | | ANIMAL ID | females
(cont...) | | | |
|---------------------------------------------------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|-----------|----------------------|------------------|------------------|------------------|
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6 |
| Blood Vessel | + | + | + | + | + | + | + | + | + | A | + | + | + | A | + | + | + | + | + | + | + | + | + | + | + |
| Heart | + | + | + | + | + | + | + | + | + | A | + | + | + | A | + | + | + | + | + | + | + | + | + | + | + |
| Cardiomyopathy | | | | | | | | | | | | | | | | | | | | | | | 1 | | |
| Inflammation, Chronic Active | | | | | | | | | | | | | | | | | | | | | | | | | 1 |
| ENDOCRINE SYSTEM | | | | | | | | | | | | | | | | | | | | | | | | | |
| Adrenal Cortex | + | + | + | + | + | + | + | + | + | A | + | + | + | A | + | + | + | + | + | + | + | + | + | + | + |
| Vacuolization Cytoplasmic Subcapsular, Hyperplasia | 2 | 2 | 2 | 2 | 1 | 2 | 2 | 2 | 1 | | 2 | 2 | 2 | | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 1 | 2 | 2 |
| Adrenal Medulla | + | + | + | + | + | + | + | + | + | A | + | + | + | A | + | + | + | + | + | + | + | + | + | + | + |
| Hyperplasia | | | | | | | | | | | | | | | | | | | | | | | | | |
| Islets, Pancreatic | + | + | + | + | + | + | + | + | + | A | + | + | + | A | + | + | + | + | + | + | + | + | + | + | + |
| Hyperplasia | | | | | | | | | | | | | | | | | | | | | | | | | |
| Parathyroid Gland | + | + | + | + | + | + | + | + | + | A | + | + | + | M | + | + | + | + | + | + | + | + | + | + | + |
| Cyst | | | | | | | | | | | | | | | | | | | | | | | | | |
| Pituitary Gland | + | + | + | + | + | + | + | + | + | A | + | + | + | A | + | + | M | + | + | + | + | + | + | + | + |
| Thrombus | | | | | | | | | | | | | | | | | | | | | | | | | |
| Pars Distalis, Angiectasis | | | | | | | | | | | | | | | | | | | | | | | | | |
| Pars Distalis, Cyst | | | | | | | | | | | | | | | | | | | | | | | | | |
| Pars Distalis, Hyperplasia | 2 | | | | | | | | 1 | | | | | | | | | | | | 2 | | 2 | 3 | |
| Pars Intermedia, Angiectasis | | | | | | | | | | | | | | | | | | | | | | | | | 1 |
| Thyroid Gland | + | + | + | + | + | + | + | + | + | A | + | + | + | A | + | + | + | + | + | + | + | + | + | + | + |
| Cyst | | | | | | | | | | | | | | | | | | | | | | | | | 2 |

* .. Total animals with tissue examined microscopically; Total animals with lesion and mean severity grade
 + .. Tissue examined microscopically
 X .. Lesion present
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 M .. Missing tissue
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 BLANK .. Not examined microscopically

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 2) Mild 4) Marked

TDMS No. 20116 - 04
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P09: NON-NEOPLASTIC LESIONS BY INDIVIDUAL ANIMAL
 Aloe vera whole leaf extract (native)
 CAS Number: ALOEVLEAFEXT

Date Report Requested: 01/15/2010
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 Lab: NCTR

| C57BL/6N XC3H/HEN MTV-NCTR
MICE FEMALE
ALOEWHOLLEAF 2.0 | DAY ON TEST | | | | | | | | | | | | | | | | | | | | | | | | ANIMAL ID | females
(cont...) |
|---------------------------------------------------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|----------------------|----------------------|----------------------|----------------------|
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| | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 00112233445566778899 | females
(cont...) | |
| | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 00112233445566778899 | | | |
| | 1 | 1 | 1 | 1 | 2 | 2 | 2 | 2 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 4 | 4 | 4 | 4 | 4 | 4 | 4 | 112233445566778899 | | | |
| | 2 | 2 | 2 | 2 | 9 | 9 | 9 | 9 | 1 | 1 | 1 | 1 | 2 | 2 | 2 | 3 | 3 | 3 | 3 | 4 | 4 | 4 | 2233445566778899 | | | |

Infiltration Cellular, Lymphocyte
 Inflammation, Chronic Active
 Follicle, Degeneration
 Follicular Cell, Hyperplasia

1 1 1 1 1 1 3

GENERAL BODY SYSTEM

NONE

GENITAL SYSTEM

| | | | | | | | | | | | | | | | | | | | | | | | | | |
|-----------------------------------------------------------------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| Clitoral Gland
Degeneration | + | + | + | + | + | + | + | + | + | A | + | + | + | A | + | + | + | + | + | + | + | + | + | + | + |
| | 4 | 4 | 3 | 4 | 4 | 4 | 4 | 4 | 3 | | 4 | 4 | 4 | | 4 | 4 | 4 | 4 | 3 | 4 | 4 | 4 | 4 | 4 | 4 |
| Ovary
Atrophy
Cyst
Cyst, Multiple
Hemorrhage | + | + | + | + | + | + | + | + | + | A | + | + | + | A | + | + | + | + | + | + | + | + | + | + | + |
| | 4 | 4 | 4 | 4 | 4 | 4 | 3 | 4 | 4 | | 4 | 4 | 4 | | 4 | 4 | | 4 | 3 | 4 | 4 | 4 | 4 | 4 | 4 |
| | | | | | | | | | | 2 | | | | | | | | | | | | | | | |
| Uterus
Angiectasis
Thrombus
Endometrium, Hyperplasia, Cystic | + | + | + | + | + | + | + | + | + | A | + | + | + | A | + | + | + | + | + | + | + | + | + | + | + |
| | 4 | 3 | 4 | 3 | 3 | 4 | 3 | 4 | 2 | | 2 | 2 | 3 | | 4 | 3 | 3 | 3 | 2 | 4 | 2 | | 4 | 3 | 2 |

HEMATOPOIETIC SYSTEM

| | | | | | | | | | | | | | | | | | | | | | | | | | |
|----------------------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| Bone Marrow
Hyperplasia | + | + | + | + | + | + | + | + | + | A | + | + | + | A | + | + | + | + | + | + | + | + | + | + | + |
| | | | | | | | | | | | | | | | | | | | | | | | | | 3 |
| Lymph Node | | | | | | | | | | | + | A | + | + | A | | | | | | | | | | + |

* .. Total animals with tissue examined microscopically; Total animals with lesion and mean severity grade
 + .. Tissue examined microscopically
 X .. Lesion present
 I .. Insufficient tissue
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TDMS No. 20116 - 04
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 Lab: NCTR

| C57BL/6N XC3H/HEN MTV-NCTR
MICE FEMALE
ALOEWHOLLEAF 2.0 | DAY ON TEST | | | | | | | | | | | | | | | | | | | | | | | | ANIMAL ID | females
(cont...) |
|---------------------------------------------------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|-----------------------|-----------|----------------------|
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Fat, Necrosis 3

MUSCULOSKELETAL SYSTEM

| | | | | | | | | | | | | | | | | | | | | | | | |
|-----------------------------------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| Bone, Femur | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |
| Fibro-Osseous Lesion | | | | 1 | | | | | | | | | | 2 | | | | | | | | | |
| Skeletal Muscle | | | | | | | | | + | | | | | | | | | | | | | | + |
| Diaphragm, Inflammation, Chronic Active | | | | | | | | | 4 | | | | | | | | | | | | | | |

NERVOUS SYSTEM

| | | | | | | | | | | | | | | | | | | | | | | | |
|-------------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| Brain, Brain Stem | + | + | + | + | + | + | + | + | + | A | + | + | + | A | + | + | + | + | + | + | + | + | + |
| Compression | | | | | | | | | | 2 | | | | | | | | | | | | | |
| Brain, Cerebellum | + | + | + | + | + | + | + | + | + | A | + | + | + | A | + | + | + | + | + | + | + | + | + |
| Brain, Cerebrum | + | + | + | + | + | + | + | + | + | A | + | + | + | A | + | + | + | + | + | + | + | + | + |
| Mineralization | 1 | | | 1 | | 1 | | | | | 1 | | | | 2 | | 1 | 1 | 2 | | | 1 | 1 |

RESPIRATORY SYSTEM

| | | | | | | | | | | | | | | | | | | | | | | | |
|-----------------------------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| Lung | + | + | + | + | + | + | + | + | + | A | + | + | + | + | + | + | + | + | + | + | + | + | + |
| Autolysis | | | | | | | | | | | | | | | | | | | | | | | 4 |
| Infiltration Cellular, Histiocyte | 1 | | | | 3 | | | | | | | | | | | | | | | | | | 1 |
| Infiltration Cellular, Lymphocyte | | | | | | | | | | | | | | | | | | | | | | | |
| Mineralization | | | | | | | | | | | | | | | | | | | | | | | |
| Alveolar Epithelium, Hyperplasia | | | | | | | | | | | | | | | | | | | | | | | 2 |
| Nose | + | + | + | + | + | + | + | + | + | A | + | + | + | A | + | + | + | + | + | + | + | + | + |

* .. Total animals with tissue examined microscopically; Total animals with lesion and mean severity grade
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 Aloe vera whole leaf extract (native)
 CAS Number: ALOEVLEAFEXT

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 Lab: NCTR

| C57BL/6N XC3H/HEN MTV-NCTR
MICE FEMALE
ALOEWHOLLEAF 2.0 | DAY ON TEST | | | | | | | | | | | | | | | | | | | | | | | | females
(cont...) | | |
|---------------------------------------------------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|---|--|
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| Hyaline Droplet | 1 | 1 | 1 | | | 1 | | | | | | | | | | | | 1 | 1 | | 1 | 1 | | | 1 | | |
| Trachea | + | + | + | + | + | + | + | + | + | A | + | + | + | A | + | + | + | + | + | + | + | + | + | + | + | + | |
| SPECIAL SENSES SYSTEM | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Eye | + | + | + | + | + | + | + | + | + | A | + | + | + | A | + | + | + | + | + | + | + | + | + | + | + | + | |
| Cataract | | | | | | | | | | | | | | | | | | | | | | | | | 1 | | |
| Harderian Gland | + | + | + | + | + | + | + | + | + | A | + | + | + | A | + | + | + | + | + | + | + | + | + | + | + | + | |
| Infiltration Cellular, Lymphocyte | | | | | | | | | | | 1 | | | | | | | | | | | | | | | | |
| URINARY SYSTEM | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Kidney | + | + | + | + | + | + | + | + | + | A | + | + | + | A | + | + | + | + | + | + | + | + | + | + | + | + | |
| Hyaline Droplet | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Infiltration Cellular, Lymphocyte | | | 1 | 2 | | | 1 | 1 | 1 | | | | 1 | | | | | 1 | | 1 | 1 | 1 | | 1 | | 2 | |
| Metaplasia, Osseous | | | | 1 | | | | | | | | | | | | | | | | | | | | | | | |
| Nephropathy | | | | | | | | | | | | | | | | | | | 1 | | | | | | | 1 | |
| Pelvis, Dilatation | 4 | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Urinary Bladder | + | + | + | + | + | + | + | + | + | A | + | + | + | A | + | + | + | + | + | + | + | + | + | + | + | + | |
| Infiltration Cellular, Lymphocyte | | | 1 | 2 | | | 1 | | | | | | | | | | 1 | | 1 | 1 | | 1 | | 2 | 2 | 1 | |
| Lumen, Dilatation | | | | | | | | | | | | | | | | | | | | | | | | | | | |

* .. Total animals with tissue examined microscopically; Total animals with lesion and mean severity grade
 + .. Tissue examined microscopically
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 I .. Insufficient tissue
 M .. Missing tissue
 A .. Autolysis precludes evaluation
 BLANK .. Not examined microscopically
 1-4 .. Lesion qualified as:
 1) Minimal 3) Moderate
 2) Mild 4) Marked

TDMS No. 20116 - 04
 Test Type: CHRONIC
 Route: DOSED WATER
 Species/Strain: MICE/B6C3F1/NCTR

P09: NON-NEOPLASTIC LESIONS BY INDIVIDUAL ANIMAL
 Aloe vera whole leaf extract (native)
 CAS Number: ALOEVLEAFEXT

Date Report Requested: 01/15/2010
 Time Report Requested: 14:39:08
 First Dose M/F: 04/19/05 / 04/19/05
 Lab: NCTR

| C57BL/6N XC3H/HEN MTV-NCTR
MICE FEMALE
ALOEWHOLLEAF 2.0 | DAY ON TEST | | | | | | | | | | | | | | | | | | | | * TOTALS | |
|---------------------------------------------------------------|-------------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|----------|------|
| | 0736 | 0736 | 0736 | 0668 | 0668 | 0777 | 0777 | 0777 | 0777 | 0567 | 0677 | 0677 | 0576 | 0777 | 0777 | 0668 | 0776 | 0677 | 0668 | 0777 | | 0777 |
| ANIMAL ID | 00522 | 00523 | 00524 | 00661 | 00662 | 00667 | 00668 | 00669 | 00670 | 00671 | 00672 | 00673 | 00674 | 00675 | 00676 | 00677 | 00678 | 00679 | 00680 | 00681 | 00682 | |
| | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 45 |
| | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 44 |
| | 5 | 5 | 5 | 6 | 6 | 6 | 6 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 9 | 9 | 9 | 9 | 9 | 9 | 9 | 44 |
| | 2 | 2 | 2 | 9 | 9 | 9 | 9 | 1 | 1 | 1 | 1 | 1 | 1 | 2 | 2 | 2 | 2 | 3 | 3 | 3 | 3 | 20 |
| | 2 | 3 | 4 | 1 | 2 | 3 | 4 | 1 | 2 | 3 | 4 | 1 | 2 | 3 | 4 | 1 | 2 | 3 | 3 | 4 | 4 | 1.3 |

ALIMENTARY SYSTEM

| | | | | | | | | | | | | | | | | | | | | | | | |
|-----------------------------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|-----|
| Esophagus | + | + | + | + | A | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 45 |
| Gallbladder | + | + | + | + | A | + | + | + | + | + | A | + | + | + | + | + | + | + | + | + | + | + | 44 |
| Intestine Large, Ascending Colon | + | + | + | + | A | + | + | + | + | + | A | + | + | + | + | + | + | + | + | + | + | + | 44 |
| Goblet Cell, Hyperplasia | | | | 1 | | 1 | 2 | 2 | 1 | | | | 1 | 1 | 1 | | 1 | 2 | | 1 | | 1 | 20 |
| Intestine Large, Cecum | + | + | + | + | A | + | + | + | + | + | A | + | + | + | + | + | + | + | + | + | + | + | 44 |
| Goblet Cell, Hyperplasia | | | | | | | | | | | | | | 2 | | | | | | | | | 2 |
| Intestine Large, Descending Colon | + | + | + | + | A | + | + | + | + | + | A | + | + | + | + | + | + | + | + | + | + | + | 44 |
| Goblet Cell, Hyperplasia | | | | | | 1 | 1 | 2 | 1 | | | | | | | | 2 | | | | | | 7 |
| Intestine Large, Rectum | + | + | + | + | A | + | + | + | + | + | A | + | + | + | + | + | + | + | + | + | + | + | 44 |
| Intestine Large, Transverse Colon | + | + | + | + | A | + | + | + | + | + | A | + | + | + | + | + | + | + | + | + | + | + | 44 |
| Goblet Cell, Hyperplasia | | | | 1 | | 1 | 2 | 2 | 1 | | | | | 2 | 1 | | 1 | 2 | | 1 | | 1 | 23 |
| Intestine Small, Duodenum | + | + | + | + | A | + | + | + | + | + | A | + | + | + | + | + | + | + | + | + | + | + | 44 |
| Intestine Small, Ileum | + | + | + | + | A | + | + | + | + | + | A | + | + | + | + | + | + | + | + | + | + | + | 44 |
| Hyperplasia, Lymphoid | | | | | | | | | | | | | | | | | | | | | | | 1 |
| Intestine Small, Jejunum | + | + | + | + | A | + | + | + | + | + | A | + | + | + | + | + | + | + | + | + | + | + | 44 |
| Liver | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 46 |
| Basophilic Focus | | | | | | | | | | | | | X | | | | | | | | | | 1 |
| Infiltration Cellular, Lymphocyte | | | | | | | | | | | | | | | | | | 2 | | | | | 6 |
| | | | | | | | | | | | | | | | | | | | | | | | 1.7 |

* .. Total animals with tissue examined microscopically; Total animals with lesion and mean severity grade
 + .. Tissue examined microscopically
 X .. Lesion present
 I .. Insufficient tissue
 M .. Missing tissue
 A .. Autolysis precludes evaluation
 BLANK .. Not examined microscopically
 1-4 .. Lesion qualified as:
 1) Minimal 3) Moderate
 2) Mild 4) Marked

TDMS No. 20116 - 04
 Test Type: CHRONIC
 Route: DOSED WATER
 Species/Strain: MICE/B6C3F1/NCTR

P09: NON-NEOPLASTIC LESIONS BY INDIVIDUAL ANIMAL
 Aloe vera whole leaf extract (native)
 CAS Number: ALOEVLEAFEXT

Date Report Requested: 01/15/2010
 Time Report Requested: 14:39:08
 First Dose M/F: 04/19/05 / 04/19/05
 Lab: NCTR

| C57BL/6N XC3H/HEN MTV-NCTR
MICE FEMALE
ALOEWHOLLEAF 2.0 | DAY ON TEST | | | | | | | | | | | | | | | | | | | | * TOTALS | | | |
|---------------------------------------------------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-------|--------|
| | 0
7
3
6 | 0
7
3
6 | 0
7
3
6 | 0
6
1
8 | 0
6
3
6 | 0
7
3
6 | 0
7
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6 | 0
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6 | 0
7
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6 | 0
5
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8 | 0
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7 | 0
7
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6 | 0
6
3
8 | 0
7
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5 | 0
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3
6 | 0
7
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6 | 0
7
3
6 | | | | |
| ANIMAL ID | 0
0
5
2
2 | 0
0
5
2
3 | 0
0
5
2
4 | 0
0
6
9
1 | 0
0
6
9
2 | 0
0
6
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3 | 0
0
6
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4 | 0
0
7
9
1 | 0
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7
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1 | 0
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7
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2 | 0
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7
1
3 | 0
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7
1
4 | 0
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2 | 0
0
7
2
2 | 0
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7
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2 | 0
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7
2
3 | 0
0
7
2
4 | 0
0
9
3
1 | 0
0
9
3
3 | 0
0
9
4
4 | 0
0
9
4
2 | 0
0
9
4
3 | | |
| Inflammation, Chronic Active
Mixed Cell Focus | | | | | | | | | | | | | | | | | | | | | | 1 | 4 1.3 | |
| Necrosis | | | | | | | | | | 2 | | | | 4 | | | | | | | | | | 2 3.0 |
| Pigmentation | | | | | | | | | | | | | | | | | | | | | 2 | | | 1 2.0 |
| Tension Lipidosis | | | | | | | | | | | | | | | | | | | | 1 | | | | 2 1.0 |
| Vacuolization Cytoplasmic
Parenchyma, Degeneration | | | | | | | 1 | | | | | | | | 2 | 1 | | | | | 2 | 1 | 2 | 12 1.4 |
| | | | | | | | | | | | | | | | | | | | | | | | | 1 4.0 |
| Mesentery | | | | | | | | | | | | | | | | | | | | | | | | 9 |
| Angiectasis | | | | | | | | | | | | | | | | | | | | | | | | 1 3.0 |
| Infiltration Cellular, Lymphocyte | | | | | | | | | | | | | | | | | | | | | | | | 1 3.0 |
| Inflammation, Chronic Active | | | | | | | | | | | | | | | | | | | | | | | | 1 4.0 |
| Fat, Necrosis | | | | | | | | | | | | | | | | | | | | | | | | 8 3.1 |
| Pancreas | | | | | | | | | | | | | | | | | | | | | | | | 44 |
| Infiltration Cellular, Lymphocyte | | | | | | | | | | | | | | | | | | | | | | | | 13 1.2 |
| Acinus, Degeneration | | | | | | | | | | | | | | | | | | | | | | | | 1 2.0 |
| Duct, Dilatation | | | | | | | | | | | | | | | | | | | | | | | | 1 4.0 |
| Salivary Glands | | | | | | | | | | | | | | | | | | | | | | | | 44 |
| Infiltration Cellular, Lymphocyte | | | | | | | | | | | | | | | | | | | | | | | | 31 1.4 |
| Stomach, Forestomach | | | | | | | | | | | | | | | | | | | | | | | | 45 |
| Epithelium, Hyperplasia | | | | | | | | | | | | | | | | | | | | | | | | 1 2.0 |
| Stomach, Glandular | | | | | | | | | | | | | | | | | | | | | | | | 45 |
| Epithelium, Hyperplasia | | | | | | | | | | | | | | | | | | | | | | | | 3 2.3 |

CARDIOVASCULAR SYSTEM

* .. Total animals with tissue examined microscopically; Total animals with lesion and mean severity grade
 + .. Tissue examined microscopically
 X .. Lesion present
 I .. Insufficient tissue
 M .. Missing tissue
 A .. Autolysis precludes evaluation
 BLANK .. Not examined microscopically

1-4 .. Lesion qualified as:
 1) Minimal 3) Moderate
 2) Mild 4) Marked

TDMS No. 20116 - 04
 Test Type: CHRONIC
 Route: DOSED WATER
 Species/Strain: MICE/B6C3F1/NCTR

P09: NON-NEOPLASTIC LESIONS BY INDIVIDUAL ANIMAL
 Aloe vera whole leaf extract (native)
 CAS Number: ALOEVLEAFEXT

Date Report Requested: 01/15/2010
 Time Report Requested: 14:39:08
 First Dose M/F: 04/19/05 / 04/19/05
 Lab: NCTR

| C57BL/6N XC3H/HEN MTV-NCTR
MICE FEMALE
ALOEWHOLLEAF 2.0 | DAY ON TEST | | | | | | | | | | | | | | | | | | | | * TOTALS | |
|---------------------------------------------------------------|-------------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|----------|----------|
| | 0736 | 0736 | 0736 | 0661 | 0668 | 0776 | 0777 | 0777 | 0777 | 0777 | 0566 | 0677 | 0677 | 0566 | 0777 | 0777 | 0666 | 0777 | 0666 | 0777 | | 0777 |
| ANIMAL ID | 00522 | 00523 | 00524 | 00061 | 00062 | 00066 | 00067 | 00067 | 00071 | 00071 | 00077 | 00077 | 00077 | 00077 | 00077 | 00099 | 00099 | 00099 | 00099 | 00099 | 00099 | |
| Blood Vessel | + | + | + | + | A | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 45 |
| Heart | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 46 |
| Cardiomyopathy | | | | | | | | | | | | | | | | | | | | | 1 | 3 1.0 |
| Inflammation, Chronic Active | | | | | | | | | | | | | | | | | | | | | | 1 1.0 |
| ENDOCRINE SYSTEM | | | | | | | | | | | | | | | | | | | | | | |
| Adrenal Cortex | + | + | + | + | A | + | + | + | + | + | A | + | + | + | + | + | + | + | + | + | + | 44 |
| Vacuolization Cytoplasmic Subcapsular, Hyperplasia | | | | | | | | | | | | | | | | | | | | | | 1 4.0 |
| | 2 | 3 | 2 | 2 | | 2 | 2 | 2 | 2 | | | 2 | 2 | 2 | 3 | 2 | 3 | 2 | 2 | 2 | 2 | 43 2.0 |
| Adrenal Medulla | + | + | + | + | A | + | + | + | + | + | A | + | + | + | + | + | + | + | + | + | + | 44 |
| Hyperplasia | | | | | | | | | | | | | | | | | | | | | 1 | 1 1.0 |
| Islets, Pancreatic | + | + | + | + | A | + | + | + | + | + | A | + | + | + | + | + | + | + | + | + | + | 44 |
| Hyperplasia | | | | 2 | | | | | | | | | | | | | | | | | | 1 2.0 |
| Parathyroid Gland | + | + | + | + | A | M | M | + | + | M | + | + | + | + | + | + | + | + | + | + | + | 42 |
| Cyst | | | | | | | | | | | | | | | | | | | | | 1 | 1 1.0 |
| Pituitary Gland | + | + | + | + | A | + | + | + | + | + | A | + | + | + | + | + | + | M | M | + | + | 41 |
| Thrombus | | | | | | | | | | | | | | 3 | | | | | | | | 1 3.0 |
| Pars Distalis, Angiectasis | | | | | | | | | | | | | | | | | | | 2 | | | 1 2.0 |
| Pars Distalis, Cyst | | | | | | | | | | | | | | | | | | | | | | 1 2.0 |
| Pars Distalis, Hyperplasia | | | | | | | | | | | | | | 4 | 1 | | | | | | 4 | 2 10 2.2 |
| Pars Intermedia, Angiectasis | | | | | | | | | | | | | | | | | | | | | | 3 1 3.0 |
| Thyroid Gland | + | + | + | + | A | + | + | + | + | + | A | + | + | + | + | + | + | + | + | + | + | 44 |
| Cyst | | | | | | | | | | | | | | | | | | | | | | 1 2.0 |

* .. Total animals with tissue examined microscopically; Total animals with lesion and mean severity grade
 + .. Tissue examined microscopically
 X .. Lesion present
 I .. Insufficient tissue
 M .. Missing tissue
 A .. Autolysis precludes evaluation
 BLANK .. Not examined microscopically

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 2) Mild 4) Marked

TDMS No. 20116 - 04
 Test Type: CHRONIC
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P09: NON-NEOPLASTIC LESIONS BY INDIVIDUAL ANIMAL
 Aloe vera whole leaf extract (native)
 CAS Number: ALOEVLEAFEXT

Date Report Requested: 01/15/2010
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 Lab: NCTR

| C57BL/6N XC3H/HEN MTV-NCTR
MICE FEMALE
ALOEWHOLLEAF 2.0 | DAY ON TEST | | | | | | | | | | | | | | | | | | | | * TOTALS |
|---------------------------------------------------------------|-------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|----------|
| | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | |
| ANIMAL ID | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| | 7 | 7 | 7 | 6 | 6 | 7 | 7 | 7 | 7 | 5 | 6 | 7 | 7 | 5 | 7 | 7 | 6 | 7 | 6 | 7 | 7 |
| | 3 | 3 | 3 | 1 | 3 | 3 | 3 | 3 | 3 | 7 | 7 | 3 | 3 | 6 | 3 | 3 | 6 | 3 | 5 | 3 | 3 |
| | 6 | 6 | 6 | 1 | 8 | 6 | 6 | 6 | 6 | 8 | 0 | 6 | 6 | 7 | 6 | 6 | 8 | 6 | 5 | 6 | 6 |
| | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| | 5 | 5 | 5 | 6 | 6 | 6 | 6 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 9 | 9 | 9 | 9 | 9 | 9 | 9 |
| | 2 | 2 | 2 | 9 | 9 | 9 | 9 | 1 | 1 | 1 | 1 | 1 | 2 | 2 | 2 | 3 | 3 | 3 | 4 | 4 | 4 |
| | 2 | 3 | 4 | 1 | 2 | 3 | 4 | 1 | 2 | 3 | 4 | 1 | 2 | 2 | 3 | 4 | 1 | 2 | 3 | 4 | 4 |

| | | | | |
|-----------------------------------|---|---|---|-----|
| Infiltration Cellular, Lymphocyte | 1 | 1 | 2 | 1.0 |
| Inflammation, Chronic Active | | | 1 | 1.0 |
| Follicle, Degeneration | | 1 | 2 | 1.3 |
| Follicular Cell, Hyperplasia | 2 | | 1 | 2.0 |

GENERAL BODY SYSTEM

NONE

GENITAL SYSTEM

| | | | | | | | | | | | | | | | | | | | | | | | |
|----------------------------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|----|-----|
| Clitoral Gland | + | + | M | + | A | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 44 | |
| Degeneration | 4 | 4 | | 4 | | 3 | 4 | 4 | 4 | 4 | 4 | 4 | | 4 | 4 | 4 | 4 | 4 | 4 | 4 | 4 | 43 | 3.9 |
| Ovary | + | + | + | + | A | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 45 | |
| Atrophy | 4 | 4 | 4 | 3 | | 4 | 4 | 4 | 4 | | 4 | 4 | 4 | | 4 | 4 | 4 | 4 | 4 | 4 | 4 | 40 | 3.9 |
| Cyst | 4 | 4 | | | | | 1 | 4 | 4 | | | | | | 3 | 2 | | 3 | | 1 | 4 | 12 | 3.0 |
| Cyst, Multiple | | | | | | | | | | | 2 | | | | | | | | | | | 2 | 2.0 |
| Hemorrhage | | | | | | | | | | | | | | | | | 2 | | | | | 1 | 2.0 |
| Uterus | + | + | + | + | A | + | + | + | + | + | A | + | + | + | + | + | + | + | + | + | + | 44 | |
| Angiectasis | | | | | | | | | | | | | | | | | | | | | | 1 | 3.0 |
| Thrombus | | | | | | | | | | | | | | | | | | | | | | 1 | 2.0 |
| Endometrium, Hyperplasia, Cystic | 3 | 2 | 3 | 4 | | 2 | 4 | 2 | 4 | 4 | | 2 | 4 | 4 | 3 | 3 | 3 | 4 | 3 | 4 | 3 | 43 | 3.1 |

HEMATOPOIETIC SYSTEM

| | | | | | | | | | | | | | | | | | | | | | | | |
|-------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|----|-----|
| Bone Marrow | + | + | + | + | A | + | + | + | + | + | A | + | + | + | + | + | + | + | + | + | + | 44 | |
| Hyperplasia | | | | | | | | | | | 3 | | | | | 2 | | 2 | 2 | | | 5 | 2.4 |
| Lymph Node | | | + | | + | | | | + | + | + | | | | | | | + | + | | | 12 | |

* .. Total animals with tissue examined microscopically; Total animals with lesion and mean severity grade
 + .. Tissue examined microscopically
 X .. Lesion present
 I .. Insufficient tissue
 M .. Missing tissue
 A .. Autolysis precludes evaluation
 BLANK .. Not examined microscopically
 1-4 .. Lesion qualified as:
 1) Minimal 3) Moderate
 2) Mild 4) Marked

TDMS No. 20116 - 04
 Test Type: CHRONIC
 Route: DOSED WATER
 Species/Strain: MICE/B6C3F1/NCTR

P09: NON-NEOPLASTIC LESIONS BY INDIVIDUAL ANIMAL

Aloe vera whole leaf extract (native)

CAS Number: ALOEVLEAFEXT

Date Report Requested: 01/15/2010

Time Report Requested: 14:39:08

First Dose M/F: 04/19/05 / 04/19/05

Lab: NCTR

| C57BL/6N XC3H/HEN MTV-NCTR
MICE FEMALE
ALOEWHOLLEAF 2.0 | DAY ON TEST | | | | | | | | | | | | | | | | | | | | * TOTALS |
|---------------------------------------------------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|
| | 0
7
3
6 | 0
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6 | 0
6
1
8 | 0
6
3
6 | 0
7
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6 | 0
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8 | 0
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7 | 0
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3
6 | 0
6
3
8 | 0
7
3
6 | 0
6
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5 | 0
7
3
6 | 0
7
3
6 | |
| ANIMAL ID | 0
0
5
2
2 | 0
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2
3 | 0
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4 | 0
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1 | 0
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2 | 0
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4 | 0
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7
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1 | 0
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4 | 0
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3 | 0
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4 | 0
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9
3
3 | 0
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4 | 0
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4
2 |

| | | | | | | | | | | | | | | | | | | | | | | |
|--------------------------------------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|-----|--------|
| Lumbar, Hyperplasia, Lymphoid | | | | | | | | | | | | | | | | | | | | | 2 | 1 2.0 |
| Lumbar, Infiltration Cellular, Plasma Cell | | | | | | | | | | | | | | | | | | | | | | 1 3.0 |
| Lymph Node, Mandibular | + | + | + | + | A | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 45 | |
| Hyperplasia, Lymphoid | | | | | | | | | | | | | | | | | | | | | 2 2 | 12 1.9 |
| Infiltration Cellular, Polymorphonuclear | | | | | | | | | | | | | | | | | | | | | | 1 2.0 |
| Lymph Node, Mesenteric | + | + | + | M | A | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 43 | |
| Angiectasis | | | | | | | | | | | | | | | | | | | | | | 1 2.0 |
| Hyperplasia, Lymphoid | | | | | | | | | | | | | | | | | | | | | 1 2 | 14 1.8 |
| Spleen | + | + | + | + | A | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 45 | |
| Hematopoietic Cell Proliferation | | | | | | | | | | | | | | | | | | | | | | 9 3.3 |
| Hyperplasia, Lymphoid | | | | | | | | | | | | | | | | | | | | | 3 3 | 21 2.9 |
| Necrosis | | | | | | | | | | | | | | | | | | | | | 4 | 1 4.0 |
| Pigmentation | | | | | | | | | | | | | | | | | | | | | 4 | 4 2.3 |
| Thymus | + | + | + | + | + | + | + | + | + | A | + | + | M | + | + | + | + | + | + | + | 43 | |
| Atrophy | | | | | | | | | | | | | | | | | | | | | 4 3 | 17 2.4 |
| Hyperplasia, Lymphoid | | | | | | | | | | | | | | | | | | | | | 2 2 | 8 1.9 |

INTEGUMENTARY SYSTEM

| | | | | | | | | | | | | | | | | | | | | | | |
|-----------------------------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|----|-------|
| Mammary Gland | + | + | + | + | A | + | + | + | + | + | A | + | + | + | + | + | + | + | + | + | 44 | |
| Galactocele | | | | | | | | | | | | | | | | | | | | | | 1 2.0 |
| Infiltration Cellular, Lymphocyte | | | | | | | | | | | | | | | | | | | | | 2 | 1 2.0 |
| Lactation | | | | | | | | | | | | | | | | | | | | | 2 | 2 2.0 |
| Alveolus, Hyperplasia | | | | | | | | | | | | | | | | | | | | | 1 | 3 1.7 |
| Skin | + | + | + | + | A | + | + | + | + | + | A | + | + | + | + | + | + | + | + | + | 45 | |

* .. Total animals with tissue examined microscopically; Total animals with lesion and mean severity grade
 + .. Tissue examined microscopically
 X .. Lesion present
 I .. Insufficient tissue
 M .. Missing tissue
 A .. Autolysis precludes evaluation
 BLANK .. Not examined microscopically
 1-4 .. Lesion qualified as:
 1) Minimal 3) Moderate
 2) Mild 4) Marked

TDMS No. 20116 - 04
 Test Type: CHRONIC
 Route: DOSED WATER
 Species/Strain: MICE/B6C3F1/NCTR

P09: NON-NEOPLASTIC LESIONS BY INDIVIDUAL ANIMAL

Aloe vera whole leaf extract (native)

CAS Number: ALOEVLEAFEXT

Date Report Requested: 01/15/2010

Time Report Requested: 14:39:08

First Dose M/F: 04/19/05 / 04/19/05

Lab: NCTR

| DAY ON TEST | C57BL/6N XC3H/HEN MTV-NCTR MICE FEMALE | | | | | | | | | | | | | | | | | | | | * TOTALS | |
|-------------|----------------------------------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|----------|---|
| | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | | 0 |
| 7 | 7 | 7 | 6 | 6 | 7 | 7 | 7 | 7 | 5 | 6 | 7 | 7 | 5 | 7 | 7 | 6 | 7 | 6 | 7 | 7 | 7 | |
| 3 | 3 | 3 | 1 | 3 | 3 | 3 | 3 | 3 | 7 | 7 | 3 | 3 | 6 | 3 | 3 | 6 | 3 | 5 | 3 | 3 | 3 | |
| 6 | 6 | 6 | 6 | 1 | 8 | 6 | 6 | 6 | 6 | 8 | 0 | 6 | 6 | 7 | 6 | 6 | 8 | 6 | 5 | 6 | 6 | |
| ANIMAL ID | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | |
| 5 | 5 | 5 | 6 | 6 | 6 | 6 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 9 | 9 | 9 | 9 | 9 | 9 | 9 | 9 | |
| 2 | 2 | 2 | 9 | 9 | 9 | 9 | 1 | 1 | 1 | 1 | 1 | 2 | 2 | 2 | 3 | 3 | 3 | 3 | 4 | 4 | 4 | |
| 2 | 3 | 4 | 1 | 2 | 3 | 4 | 1 | 2 | 3 | 4 | 1 | 2 | 3 | 4 | 1 | 2 | 3 | 4 | 1 | 2 | 3 | |

Fat, Necrosis 1 3.0

MUSCULOSKELETAL SYSTEM

| | | | | | | | | | | | | | | | | | | | | | | |
|-----------------------------------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|-------|
| Bone, Femur | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 48 |
| Fibro-Osseous Lesion | | | | | | | | | | | | | | | | | | | | | | 2 1.5 |
| Skeletal Muscle | | | | | | | | | | | | | | | | | | | | | | 2 |
| Diaphragm, Inflammation, Chronic Active | | | | | | | | | | | | | | | | | | | | | | 1 4.0 |

NERVOUS SYSTEM

| | | | | | | | | | | | | | | | | | | | | | | |
|-------------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|--------|
| Brain, Brain Stem | + | + | + | + | A | + | + | + | + | + | A | + | + | + | + | + | + | + | + | + | + | 44 |
| Compression | | | | | | | | | 3 | | | | | | | | | | | | | 2 2.5 |
| Brain, Cerebellum | + | + | + | + | A | + | + | + | + | + | A | + | + | + | + | + | + | + | + | + | + | 44 |
| Brain, Cerebrum | + | + | + | + | A | + | + | + | + | + | A | + | + | + | + | + | + | + | + | + | + | 44 |
| Mineralization | | 2 | | | | 1 | 1 | 1 | | | | 2 | | 1 | 1 | 1 | | 1 | 1 | 1 | 2 | 24 1.2 |

RESPIRATORY SYSTEM

| | | | | | | | | | | | | | | | | | | | | | | |
|-----------------------------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|-------|
| Lung | + | + | + | + | + | + | + | + | + | + | A | + | + | + | + | + | + | + | + | + | + | 46 |
| Autolysis | | | | | | | | | | | | | | | | | | | | | | 1 4.0 |
| Infiltration Cellular, Histiocyte | | | | | | | | | | | | | | | | | | | | | | 3 1.7 |
| Infiltration Cellular, Lymphocyte | | | | | | | | | | | | | | | | 2 | | 2 | | | | 2 2.0 |
| Mineralization | | | | | | | | | | | | | | | | | | 1 | | | | 1 1.0 |
| Alveolar Epithelium, Hyperplasia | | | | | | | | | | | | | | | | | | | | 4 | | 2 3.0 |
| Nose | + | + | + | + | A | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 45 |

* .. Total animals with tissue examined microscopically; Total animals with lesion and mean severity grade

+ .. Tissue examined microscopically

X .. Lesion present

I .. Insufficient tissue

M .. Missing tissue

A .. Autolysis precludes evaluation

BLANK .. Not examined microscopically

1-4 .. Lesion qualified as:

1) Minimal 3) Moderate

2) Mild 4) Marked

TDMS No. 20116 - 04
 Test Type: CHRONIC
 Route: DOSED WATER
 Species/Strain: MICE/B6C3F1/NCTR

P09: NON-NEOPLASTIC LESIONS BY INDIVIDUAL ANIMAL

Aloe vera whole leaf extract (native)

CAS Number: ALOEVLEAFEXT

Date Report Requested: 01/15/2010

Time Report Requested: 14:39:08

First Dose M/F: 04/19/05 / 04/19/05

Lab: NCTR

| C57BL/6N XC3H/HEN MTV-NCTR
MICE FEMALE
ALOEWHOLLEAF 2.0 | DAY ON TEST | | | | | | | | | | | | | | | | | | | | * TOTALS | | |
|---------------------------------------------------------------|-------------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|----------|---------|--------|
| | 0736 | 0736 | 0736 | 0661 | 0668 | 0676 | 0677 | 0677 | 0677 | 0677 | 0575 | 0676 | 0677 | 0677 | 0576 | 0676 | 0676 | 0676 | 0676 | 0676 | | 0676 | 0676 |
| ANIMAL ID | 005222 | 005233 | 005244 | 006611 | 006622 | 006633 | 006644 | 006655 | 006666 | 006677 | 006688 | 006699 | 006600 | 006611 | 006622 | 006633 | 006644 | 006655 | 006666 | 006677 | 006688 | 006699 | |
| Hyaline Droplet | 1 | 1 | 1 | | | | | | | | | | | 2 | 2 | 1 | | | | | 1 | 1 | 17 1.1 |
| Trachea | + | + | + | + | A | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 45 |
| SPECIAL SENSES SYSTEM | | | | | | | | | | | | | | | | | | | | | | | |
| Eye | + | + | + | + | A | + | + | + | + | + | A | + | + | + | + | + | + | + | + | + | + | + | 44 |
| Cataract | | | | | | | | | | | | | | 1 | | | | | | | | | 2 1.0 |
| Harderian Gland | + | + | + | + | A | + | + | + | + | + | A | + | + | + | + | + | + | + | + | + | + | + | 44 |
| Infiltration Cellular, Lymphocyte | | | | | | | | | 1 | | | | | 1 | | | 1 | | | | 1 | | 5 1.0 |
| URINARY SYSTEM | | | | | | | | | | | | | | | | | | | | | | | |
| Kidney | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 46 |
| Hyaline Droplet | | | | | | | | | | | | | | | | | | | | | 3 | | 1 3.0 |
| Infiltration Cellular, Lymphocyte | | | | | | | | | | 2 | 1 | | | 1 | | | 1 | 1 | | 2 | | 1 1 1 1 | 22 1.2 |
| Metaplasia, Osseous | 2 | 2 | | | | | | | | | | | | | | | | | | | | | 3 1.7 |
| Nephropathy | 1 | 2 | | 1 | | | 1 | | | | | | | | | | | | | 1 | | | 7 1.1 |
| Pelvis, Dilatation | | | | | | | | | | | | | | | | 3 | | | | | | | 2 3.5 |
| Urinary Bladder | + | + | + | + | A | + | + | + | + | + | A | + | + | + | + | + | + | + | + | + | + | + | 44 |
| Infiltration Cellular, Lymphocyte | 2 | | 1 | 1 | | 2 | 1 | | 2 | | | | | | | | | | | 1 | 2 | 1 1 1 1 | 22 1.3 |
| Lumen, Dilatation | | | | | | | | | | | | | | | | | | | | | 3 | | 1 3.0 |

* .. Total animals with tissue examined microscopically; Total animals with lesion and mean severity grade
 + .. Tissue examined microscopically
 X .. Lesion present
 I .. Insufficient tissue
 M .. Missing tissue
 A .. Autolysis precludes evaluation
 BLANK .. Not examined microscopically
 1-4 .. Lesion qualified as:
 1) Minimal 3) Moderate
 2) Mild 4) Marked

TDMS No. 20116 - 04
 Test Type: CHRONIC
 Route: DOSED WATER
 Species/Strain: MICE/B6C3F1/NCTR

P09: NON-NEOPLASTIC LESIONS BY INDIVIDUAL ANIMAL
 Aloe vera whole leaf extract (native)
 CAS Number: ALOEVLEAFEXT

Date Report Requested: 01/15/2010
 Time Report Requested: 14:39:08
 First Dose M/F: 04/19/05 / 04/19/05
 Lab: NCTR

| DAY ON TEST | 0 | | | | | | | | | | | | | | | | | | | | ANIMAL ID | |
|---------------------------------------------------------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|-----------|--|
| | 7 | 7 | 6 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 6 | 7 | 5 | 3 | 7 | 5 | 7 | 7 | 7 | 7 | | |
| C57BL/6N XC3H/HEN MTV-NCTR
MICE FEMALE
ALOEWHOLLEAF 3.0 | 3 | 3 | 0 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 1 | 3 | 6 | 8 | 3 | 7 | 3 | 3 | 3 | | |
| | 6 | 6 | 1 | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 7 | 6 | 2 | 5 | 6 | 5 | 6 | 6 | 6 | | |
| | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | |
| | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 2 | 2 | 2 | | |
| | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 0 | 0 | 0 | | |
| | 1 | 1 | 1 | 1 | 2 | 2 | 2 | 2 | 8 | 8 | 8 | 8 | 9 | 9 | 9 | 9 | 0 | 0 | 0 | 0 | | |
| | 1 | 2 | 3 | 4 | 1 | 2 | 3 | 4 | 1 | 2 | 3 | 4 | 1 | 2 | 3 | 4 | 1 | 2 | 3 | 4 | | |

females (cont...)

Cyst, Multiple
 Eosinophilic Focus
 Hematopoietic Cell Proliferation
 Infiltration Cellular, Lymphocyte
 Inflammation, Chronic Active
 Mixed Cell Focus
 Necrosis
 Tension Lipidosis
 Vacuolization Cytoplasmic

4
 X
 1 1 1 1
 1
 4 4
 2 1
 1 2 2 2

Mesentery
 Fat, Hemorrhage
 Fat, Infiltration Cellular, Histiocyte
 Fat, Necrosis

+
 4
 4

Pancreas
 Cyst
 Hemorrhage
 Infiltration Cellular, Lymphocyte
 Duct, Dilatation

+ + + + + + + + + + + + + A + + + + + + + + +
 2
 1 2 2 1 1 2 3
 4
 4

Salivary Glands
 Infiltration Cellular, Lymphocyte

+ + + + + + + + + + + + + A + + + + + + + + +
 2 2 1 2 1 2 2 1 1 1 2 2 2 2 2 2 2

Stomach, Forestomach
 Epithelium, Hyperplasia

+ + + + + + + + + + + + + A + + + + + + + + +
 2

Stomach, Glandular
 Erosion
 Epithelium, Hyperplasia

+ + + + + + + + + + + + + A + + + + + + + + +
 2 1 2 2

* .. Total animals with tissue examined microscopically; Total animals with lesion and mean severity grade
 + .. Tissue examined microscopically
 X .. Lesion present
 I .. Insufficient tissue
 M .. Missing tissue
 A .. Autolysis precludes evaluation
 BLANK .. Not examined microscopically
 1-4 .. Lesion qualified as:
 1) Minimal 3) Moderate
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TDMS No. 20116 - 04
 Test Type: CHRONIC
 Route: DOSED WATER
 Species/Strain: MICE/B6C3F1/NCTR

P09: NON-NEOPLASTIC LESIONS BY INDIVIDUAL ANIMAL
 Aloe vera whole leaf extract (native)
 CAS Number: ALOEVLEAFEXT

Date Report Requested: 01/15/2010
 Time Report Requested: 14:39:08
 First Dose M/F: 04/19/05 / 04/19/05
 Lab: NCTR

| DAY ON TEST | C57BL/6N XC3H/HEN MTV-NCTR MICE FEMALE | | | | | | | | | | | | | | | | | | | | ANIMAL ID | females (cont...) | | |
|-------------|----------------------------------------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|-----------|-------------------|--------------|----------------------------------|
| | 0736 | 0736 | 0601 | 0736 | 0736 | 0736 | 0736 | 0736 | 0736 | 0736 | 0736 | 0671 | 0536 | 0375 | 0736 | 0573 | 0736 | 0736 | 0736 | 0736 | | | 0478 | 0736 |
| | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 000011122234 | 11111111111111111111111111111111 |

CARDIOVASCULAR SYSTEM

| | | | | | | | | | | | | | | | | | | | | | | | |
|--------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| Blood Vessel | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |
| Heart | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |

ENDOCRINE SYSTEM

| | | | | | | | | | | | | | | | | | | | | | | | | |
|-----------------------------------------------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| Adrenal Cortex | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | |
| Vacuolization Cytoplasmic Subcapsular, Hyperplasia | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 3 | 2 | 2 | 2 | 1 | 1 | 3 | 2 | 2 | 2 | 2 | 3 | 1 | 1 | 2 | 1 |
| Adrenal Medulla Pigmentation | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | |
| Islets, Pancreatic Hyperplasia | + | + | + | + | + | + | + | + | + | + | + | + | + | + | A | + | + | + | + | + | + | + | + | |
| Parathyroid Gland Infiltration Cellular, Lymphocyte | + | + | M | + | M | + | + | + | + | + | + | + | + | + | A | + | M | + | + | + | + | M | + | + |
| Pituitary Gland Pars Distalis, Angiectasis | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |
| Pars Distalis, Cyst | | | | | | | | | | | | | | | | | | | | | | | | 1 |
| Pars Distalis, Hyperplasia | | | | | | | | | | 2 | | | | | 2 | | | | | 2 | | | 2 | |
| Thyroid Gland Infiltration Cellular, Lymphocyte | + | + | + | + | + | + | + | + | + | + | + | + | + | + | A | + | + | + | + | + | + | + | + | + |
| Inflammation, Suppurative Follicle, Degeneration | | | | | 1 | 1 | | | | | | | | | | | 1 | | | | 2 | | | |

* .. Total animals with tissue examined microscopically; Total animals with lesion and mean severity grade
 + .. Tissue examined microscopically
 X .. Lesion present
 I .. Insufficient tissue
 M .. Missing tissue
 A .. Autolysis precludes evaluation
 BLANK .. Not examined microscopically
 1-4 .. Lesion qualified as:
 1) Minimal 3) Moderate
 2) Mild 4) Marked

| | | DAY ON TEST | | | | | | | | | | | | | | | | | | | | females
(cont...) | |
|-----------------------------------|--------------------|-------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|----------------------|---|
| C57BL/6N XC3H/HEN MTV-NCTR | MICE FEMALE | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | | 0 |
| | | 7 | 7 | 6 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 6 | 7 | 5 | 3 | 7 | 5 | 7 | 7 | 7 | 7 | | 7 |
| ALOEWHOLLEAF 3.0 | ANIMAL ID | 3 | 3 | 0 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 1 | 3 | 6 | 8 | 3 | 7 | 3 | 3 | 3 | 3 | 8 | 3 |
| | | 6 | 6 | 1 | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 7 | 6 | 2 | 5 | 6 | 5 | 6 | 6 | 6 | 6 | 6 | 2 |
| | | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| | | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| | | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 1 | 1 | 1 | 1 | 1 | 1 | 2 | 2 | 2 | 2 | 3 | 3 | 3 | 3 |
| | | 1 | 1 | 1 | 1 | 2 | 2 | 2 | 2 | 8 | 8 | 8 | 8 | 9 | 9 | 9 | 0 | 0 | 0 | 3 | 3 | 3 | 3 |
| | | 1 | 2 | 3 | 4 | 1 | 2 | 3 | 4 | 1 | 2 | 3 | 4 | 1 | 2 | 3 | 4 | 1 | 2 | 3 | 4 | 1 | 2 |

GENERAL BODY SYSTEM

NONE

GENITAL SYSTEM

| | | | | | | | | | | | | | | | | | | | | | | | |
|----------------------------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| Clitoral Gland Degeneration | + | + | M | + | + | + | + | + | + | + | + | + | + | A | + | + | + | + | + | + | + | + | + |
| | 4 | | | 4 | 4 | 3 | 4 | 4 | 4 | 4 | 3 | 4 | 3 | | 4 | | 3 | 2 | 4 | 4 | 4 | 4 | 4 |
| Ovary Atrophy | + | + | M | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |
| | 3 | 4 | | 4 | 4 | 4 | 4 | 4 | 4 | 4 | 2 | 4 | 2 | | 4 | | 4 | 4 | 4 | 4 | 4 | 4 | 4 |
| Cyst | 3 | | | | 2 | | 2 | | | | | | 2 | | | | | | | 4 | | | |
| Cyst, Multiple | | | | | | | | | | 4 | | | | | | | | | | | | | |
| Uterus Autolysis | + | + | + | + | + | + | + | + | + | + | + | + | + | + | A | + | + | + | + | + | + | + | + |
| Hydrometra | | | | | | | | | | | | | | | | | | | | | 4 | | |
| Thrombus | | | | | | | | | | | | | | | | | | | | | | | |
| Endometrium, Hyperplasia, Cystic | 3 | 3 | 3 | 3 | 4 | 3 | 3 | 3 | 3 | 3 | 4 | 3 | 3 | 3 | | 3 | 2 | 3 | 2 | | 2 | 3 | 3 |
| | | | | | | | | | | | | | | | | | | | | | | 2 | 3 |

HEMATOPOIETIC SYSTEM

| | | | | | | | | | | | | | | | | | | | | | | | |
|-------------------------------------------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| Bone Marrow Hyperplasia | + | + | + | + | + | + | + | + | + | + | + | + | + | A | + | + | + | + | + | + | + | + | + |
| | | | | | | | | | | | | | | 2 | | | | | | | | 2 | |
| Lymph Node Iliac, Hyperplasia, Lymphoid | | | | | + | + | | | | | + | + | | + | | | | | | + | + | | + |
| | | | | | | | | | | | | | | | | | | | | | | | |
| Iliac, Infiltration Cellular, Plasma Cell | | | | | | | | | | | | | | 2 | | | | | | | | | |
| Iliac, Infiltration Cellular, Polymorphonuclear | | | | | | | | | | | | | | 2 | | | | | | | | | |
| Lumbar, Hemorrhage | | | | | | | | | | | | | | 2 | | | | | | | | | |

* .. Total animals with tissue examined microscopically; Total animals with lesion and mean severity grade

+ .. Tissue examined microscopically

X .. Lesion present

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M .. Missing tissue

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BLANK .. Not examined microscopically

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1) Minimal 3) Moderate

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TDMS No. 20116 - 04
Test Type: CHRONIC
Route: DOSED WATER
Species/Strain: MICE/B6C3F1/NCTR

P09: NON-NEOPLASTIC LESIONS BY INDIVIDUAL ANIMAL

Aloe vera whole leaf extract (native)

CAS Number: ALOEVLEAFEXT

Date Report Requested: 01/15/2010

Time Report Requested: 14:39:08

First Dose M/F: 04/19/05 / 04/19/05

Lab: NCTR

| C57BL/6N XC3H/HEN MTV-NCTR
MICE FEMALE
ALOEWHOLLEAF 3.0 | DAY ON TEST | | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | females
(cont...) |
|-----------------------------------------------------------------------------------------------------------|-------------|--|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|----------------------|
| | ANIMAL ID | | 7 | 7 | 6 | 7 | 7 | 7 | 7 | 7 | 7 | 6 | 7 | 5 | 3 | 7 | 5 | 7 | 7 | 7 | 7 | 7 | 4 | 7 | |
| | ANIMAL ID | | 3 | 3 | 0 | 3 | 3 | 3 | 3 | 3 | 3 | 1 | 3 | 6 | 8 | 3 | 7 | 3 | 3 | 3 | 3 | 3 | 8 | 3 | |
| Lumbar, Hyperplasia, Lymphoid | | | 2 | | | | | | | | 2 | | 1 | | | | | | | | 2 | | | | |
| Lumbar, Sinus, Dilatation | | | | | | | | | | | 2 | | | | | | | | | | | | | | |
| Renal, Hemorrhage | | | | | | | | | | | | | | | | | | | | | | | | | |
| Renal, Hyperplasia, Lymphoid | | | | | | | | | | | | | | | | | | | | | | | | | |
| Lymph Node, Mandibular
Hyperplasia, Lymphoid | | | + | + | + | + | + | + | + | + | + | + | + | + | + | A | + | + | + | + | + | + | + | + | |
| | | | | | | 2 | | | | 2 | | 4 | | 3 | | | | | | | 1 | | 3 | 2 | |
| Lymph Node, Mesenteric
Hemorrhage
Hyperplasia, Lymphoid
Sinus, Dilatation | | | + | + | M | + | + | + | + | + | + | + | + | + | + | A | + | + | + | + | + | + | + | + | |
| | | | | | | | 1 | | | | | 2 | | | | 1 | | 2 | | | | | | 1 | |
| Spleen
Depletion Lymphoid
Hematopoietic Cell Proliferation
Hyperplasia, Lymphoid
Pigmentation | | | + | + | + | + | + | + | + | + | + | + | + | + | + | A | + | + | + | + | + | + | + | + | |
| | | | | | 3 | | | | | | | | | | | | | | | | | | | | |
| | | | | | | 3 | | 3 | | | 2 | | 4 | 3 | | | 2 | | | | | 4 | | 2 | |
| | | | | | 3 | | 2 | 4 | | 2 | 3 | 3 | 3 | | 4 | | 3 | 2 | 3 | 2 | | | | 4 | |
| | | | | | 3 | | | | | | | | | | | | | 2 | 2 | | | | | | |
| Thymus
Atrophy
Cyst
Hyperplasia, Lymphoid
Epithelial Cell, Hyperplasia | | | + | + | + | + | + | + | + | + | + | + | + | + | + | A | + | + | + | + | + | + | + | + | |
| | | | | | | 4 | | | | 2 | | 1 | | 1 | | | 2 | | 3 | | 2 | | 3 | | |
| | | | | | | | | | | | | | | | | | | 2 | | | | | | | |
| | | | | | | | 1 | 2 | | 1 | 2 | | 2 | | 1 | | | | | | 2 | | | 2 | |
| | | | | | | | | | | | | | | | | | 3 | | | | | | | | |

INTEGUMENTARY SYSTEM

| | | | | | | | | | | | | | | | | | | | | | | | | |
|-----------------------------------------------------------------------------|--|--|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| Mammary Gland
Infiltration Cellular, Lymphocyte
Alveolus, Hyperplasia | | | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |
| | | | | | | | | | | | 2 | | | | | | | | | | | | | |
| | | | | | | | | | | | | | | | 2 | | | | | | | | | |

* .. Total animals with tissue examined microscopically; Total animals with lesion and mean severity grade
+ .. Tissue examined microscopically
X .. Lesion present
I .. Insufficient tissue
M .. Missing tissue
A .. Autolysis precludes evaluation
BLANK .. Not examined microscopically
1-4 .. Lesion qualified as:
1) Minimal 3) Moderate
2) Mild 4) Marked

TDMS No. 20116 - 04
 Test Type: CHRONIC
 Route: DOSED WATER
 Species/Strain: MICE/B6C3F1/NCTR

P09: NON-NEOPLASTIC LESIONS BY INDIVIDUAL ANIMAL

Aloe vera whole leaf extract (native)

CAS Number: ALOEVLEAFEXT

Date Report Requested: 01/15/2010

Time Report Requested: 14:39:08

First Dose M/F: 04/19/05 / 04/19/05

Lab: NCTR

| C57BL/6N XC3H/HEN MTV-NCTR
MICE FEMALE
ALOEWHOLLEAF 3.0 | DAY ON TEST | | | | | | | | | | | | | | | | | | | | | | | | | ANIMAL ID | females
(cont...) |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|-----------|----------------------|
| | 0
7
3
6 | 0
7
3
6 | 0
6
0
1 | 0
7
3
6 | 0
7
3
6 | 0
7
3
6 | 0
7
3
6 | 0
7
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6 | 0
7
3
6 | 0
7
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6 | 0
7
3
6 | 0
7
3
6 | 0
7
3
6 | 0
6
1
3 | 0
7
3
6 | 0
5
8
5 | 0
3
7
6 | 0
5
7
5 | 0
7
3
6 | 0
7
3
6 | 0
7
3
6 | 0
7
3
6 | 0
7
3
6 | 0
4
8
2 | 0
7
3
6 | | |
| Skin | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | |
| MUSCULOSKELETAL SYSTEM | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Bone, Femur
Fibro-Osseous Lesion | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |
| NERVOUS SYSTEM | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Brain, Brain Stem
Compression | + | + | + | + | + | + | + | + | + | + | + | + | + | + | A | + | + | + | + | + | + | + | + | + | + | + | + |
| Brain, Cerebellum
Infiltration Cellular, Lymphocyte | + | + | + | + | + | + | + | + | + | + | + | + | + | + | A | + | + | + | + | + | + | + | + | + | + | + | + |
| Brain, Cerebrum
Infiltration Cellular, Lymphocyte
Mineralization | + | + | + | + | + | + | + | + | + | + | + | + | + | + | A | + | + | + | + | + | + | + | + | + | + | + | + |
| | | | 1 | 1 | | 1 | 1 | | 1 | | 1 | | 1 | | 1 | 1 | 1 | 1 | | 1 | 1 | 1 | | 1 | 1 | 1 | 1 |
| RESPIRATORY SYSTEM | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Lung
Congestion
Infiltration Cellular, Histiocyte
Infiltration Cellular, Lymphocyte
Inflammation, Chronic Active
Alveolar Epithelium, Hyperplasia | + | + | + | + | + | + | + | + | + | + | + | + | + | + | A | + | + | + | + | + | + | + | + | + | + | + | + |
| | | | | | | | | | | | | | | | 4 | | | | | | | | | | | | |
| | | | 1 | | | | | | 1 | | 2 | | | | | | | | | 2 | | | | | | | |
| | | | | | | | | | | | | | | | | | | | | | | | | | | 2 | |
| Nose
Hyaline Droplet | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |
| | 1 | 2 | 2 | 2 | | | | | 2 | | | | | | 2 | | 1 | | | | | | | | | | |

* .. Total animals with tissue examined microscopically; Total animals with lesion and mean severity grade
 + .. Tissue examined microscopically
 X .. Lesion present
 I .. Insufficient tissue
 M .. Missing tissue
 A .. Autolysis precludes evaluation
 BLANK .. Not examined microscopically
 1-4 .. Lesion qualified as:
 1) Minimal 3) Moderate
 2) Mild 4) Marked

TDMS No. 20116 - 04
 Test Type: CHRONIC
 Route: DOSED WATER
 Species/Strain: MICE/B6C3F1/NCTR

P09: NON-NEOPLASTIC LESIONS BY INDIVIDUAL ANIMAL
 Aloe vera whole leaf extract (native)
 CAS Number: ALOEVLEAFEXT

Date Report Requested: 01/15/2010
 Time Report Requested: 14:39:08
 First Dose M/F: 04/19/05 / 04/19/05
 Lab: NCTR

| C57BL/6N XC3H/HEN MTV-NCTR
MICE FEMALE
ALOEWHOLLEAF 3.0 | DAY ON TEST | | | | | | | | | | | | | | | | | | | | * TOTALS |
|---------------------------------------------------------------|-------------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|----------|
| | 0736 | 0736 | 0736 | 0736 | 0736 | 0736 | 0736 | 0736 | 0736 | 0736 | 0736 | 0736 | 0736 | 0736 | 0736 | 0736 | 0736 | 0736 | 0736 | 0736 | |
| ANIMAL ID | 0036 | 0036 | 0036 | 0036 | 0036 | 0036 | 0036 | 0036 | 0036 | 0036 | 0036 | 0036 | 0036 | 0036 | 0036 | 0036 | 0036 | 0036 | 0036 | 0036 | 0036 |
| | 2 | 3 | 4 | 1 | 2 | 3 | 4 | 1 | 2 | 3 | 4 | 1 | 2 | 3 | 4 | 1 | 2 | 3 | 4 | 1 | 2 |

ALIMENTARY SYSTEM

| | | | | | | | | | | | | | | | | | | | | | | | | | | |
|---------------------------------------------------------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|----|----|----|-----|
| Esophagus | + | + | A | + | + | + | + | M | + | + | + | + | + | + | + | + | + | + | + | A | + | + | 44 | | | |
| Gallbladder | + | + | A | + | A | + | + | A | A | + | + | + | + | + | + | + | + | + | + | + | A | + | + | 41 | | |
| Intestine Large, Ascending Colon
Goblet Cell, Hyperplasia | + | + | A | + | + | + | + | A | A | + | + | + | + | + | + | + | + | + | + | + | A | + | + | 43 | 25 | 1.7 |
| Intestine Large, Cecum
Goblet Cell, Hyperplasia | + | + | A | + | A | + | + | A | A | + | + | + | + | + | + | + | + | + | + | + | A | + | + | 42 | 2 | 1.5 |
| Intestine Large, Descending Colon
Goblet Cell, Hyperplasia | + | + | A | + | + | + | + | A | A | + | + | + | + | + | + | + | + | + | + | + | A | + | + | 43 | 17 | 1.6 |
| Intestine Large, Rectum | + | M | A | + | + | + | + | A | A | + | + | + | + | + | + | + | + | + | + | + | A | + | + | 42 | | |
| Intestine Large, Transverse Colon
Goblet Cell, Hyperplasia | + | + | A | + | + | + | + | A | A | + | + | + | + | + | + | + | + | + | + | + | A | + | + | 43 | 26 | 1.7 |
| Intestine Small, Duodenum | + | + | A | + | A | + | + | A | A | + | + | + | + | + | + | + | + | + | + | + | A | + | + | 42 | | |
| Intestine Small, Ileum
Hyperplasia, Lymphoid | + | + | A | + | A | + | + | A | A | + | + | + | + | + | + | + | + | + | + | + | A | + | + | 42 | 1 | 3.0 |
| Intestine Small, Jejunum | + | + | A | + | A | + | + | A | A | + | + | + | + | + | + | + | + | + | + | + | A | + | + | 42 | | |
| Liver
Autolysis
Basophilic Focus | + | + | A | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | A | + | + | 46 | 1 | 4.0 |
| | | | X | | | | | 4 | | | | | | | | | | | | | X | | | | 4 | |

* .. Total animals with tissue examined microscopically; Total animals with lesion and mean severity grade
 + .. Tissue examined microscopically
 X .. Lesion present
 I .. Insufficient tissue
 M .. Missing tissue
 A .. Autolysis precludes evaluation
 BLANK .. Not examined microscopically
 1-4 .. Lesion qualified as:
 1) Minimal 3) Moderate
 2) Mild 4) Marked

TDMS No. 20116 - 04
 Test Type: CHRONIC
 Route: DOSED WATER
 Species/Strain: MICE/B6C3F1/NCTR

P09: NON-NEOPLASTIC LESIONS BY INDIVIDUAL ANIMAL
 Aloe vera whole leaf extract (native)
 CAS Number: ALOEVLEAFEXT

Date Report Requested: 01/15/2010
 Time Report Requested: 14:39:08
 First Dose M/F: 04/19/05 / 04/19/05
 Lab: NCTR

| C57BL/6N XC3H/HEN MTV-NCTR
MICE FEMALE
ALOEWHOLLEAF 3.0 | DAY ON TEST | | | | | | | | | | | | | | | | | | | | * TOTALS | | | |
|---------------------------------------------------------------|-------------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|----------|------|-----|-----|
| | 0736 | 0736 | 0736 | 0736 | 0736 | 0736 | 0736 | 0736 | 0736 | 0736 | 0736 | 0736 | 0736 | 0736 | 0736 | 0736 | 0736 | 0736 | 0736 | 0736 | | 0736 | | |
| ANIMAL ID | 00362 | 00363 | 00364 | 00365 | 00366 | 00367 | 00368 | 00369 | 00370 | 00371 | 00372 | 00373 | 00374 | 00375 | 00376 | 00377 | 00378 | 00379 | 00380 | 00381 | 00382 | | | |
| Cyst, Multiple | | | | | | | | | | | | | | | | | | | | | 1 | 4.0 | | |
| Eosinophilic Focus | | | | | | | | | | | | | | | | | | | | | | 1 | | |
| Hematopoietic Cell Proliferation | | | | | | | | 1 | | | | | | | | | | | | 1 | | 2 | 1.0 | |
| Infiltration Cellular, Lymphocyte | | | | | | | | | | | | | | | 2 | | 1 | | | | | 2 | 1.4 | |
| Inflammation, Chronic Active | | | | | | | 1 | | | | | | | 1 | | | | | | 1 | | | 1.2 | |
| Mixed Cell Focus | | | | | | | | | | | | | | | | | | | | | X | | 1 | |
| Necrosis | | | | | | | | | | | | | | | | | | | | | 2 | | 3.3 | |
| Tension Lipidosis | | | | | | | | | | | | | | 1 | 1 | 1 | | | | | | | 1.2 | |
| Vacuolization Cytoplasmic | 2 | 2 | | | | | | | | | | 1 | | | 2 | | 2 | 1 | 2 | 2 | 1 | 1 | 2 | 1.7 |
| Mesentery | | | | | | | | | + | | | | | | | | | | | | + | | 3 | |
| Fat, Hemorrhage | | | | | | | | | | | | | | | | | | | | | | | 4.0 | |
| Fat, Infiltration Cellular, Histiocyte | | | | | | | | | | | | | | | | | | | | | | | 4.0 | |
| Fat, Necrosis | | | | | | | | 4 | | | | | | | | | | | | 3 | | | 3.5 | |
| Pancreas | + | + | A | + | + | + | + | A | A | + | + | + | + | + | + | + | + | + | + | A | + | + | 43 | |
| Cyst | | | | | | | | | | | | | | | | | | | | | | | 2.0 | |
| Hemorrhage | | | | | | | | | | | | | | | | | | | | | | | 4.0 | |
| Infiltration Cellular, Lymphocyte | 2 | 1 | | | | | 1 | | | | | | 2 | | 2 | | | | 1 | | 1 | | 1.5 | |
| Duct, Dilatation | | | | | | | | | | | | | | | | | | | | | | | 4.0 | |
| Salivary Glands | + | + | A | + | + | + | + | A | A | + | + | + | + | + | + | + | + | + | + | A | + | + | 43 | |
| Infiltration Cellular, Lymphocyte | 1 | 1 | | | | | 2 | | | | | 1 | 2 | 1 | 1 | | 1 | 1 | | 2 | 2 | 2 | 1.5 | |
| Stomach, Forestomach | + | + | A | + | A | + | + | A | A | + | + | + | + | + | + | + | + | + | + | A | + | + | 42 | |
| Epithelium, Hyperplasia | | | | | | | | | | | | | | | | | | | | | | | 2.0 | |
| Stomach, Glandular | + | + | A | + | A | + | + | A | A | + | + | + | + | + | + | + | + | + | + | A | + | + | 42 | |
| Erosion | | | | | | | | | | | | | | | | | | | | | | | 2.0 | |
| Epithelium, Hyperplasia | | | | | | | | | | | 2 | | | | | | | | | | | | 1.8 | |

* .. Total animals with tissue examined microscopically; Total animals with lesion and mean severity grade
 + .. Tissue examined microscopically
 X .. Lesion present
 I .. Insufficient tissue
 M .. Missing tissue
 A .. Autolysis precludes evaluation
 BLANK .. Not examined microscopically
 1-4 .. Lesion qualified as:
 1) Minimal 3) Moderate
 2) Mild 4) Marked

TDMS No. 20116 - 04
 Test Type: CHRONIC
 Route: DOSED WATER
 Species/Strain: MICE/B6C3F1/NCTR

P09: NON-NEOPLASTIC LESIONS BY INDIVIDUAL ANIMAL
 Aloe vera whole leaf extract (native)
 CAS Number: ALOEVLEAFEXT

Date Report Requested: 01/15/2010
 Time Report Requested: 14:39:08
 First Dose M/F: 04/19/05 / 04/19/05
 Lab: NCTR

| DAY ON TEST | C57BL/6N XC3H/HEN MTV-NCTR MICE FEMALE | | | | | | | | | | | | | | | | | | | | * TOTALS |
|-------------|----------------------------------------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|----------|
| | 0736 | 0736 | 0736 | 0736 | 0736 | 0736 | 0736 | 0736 | 0736 | 0736 | 0736 | 0736 | 0736 | 0736 | 0736 | 0736 | 0736 | 0736 | 0736 | 0736 | |
| ANIMAL ID | 0036 | 0036 | 0036 | 0036 | 0036 | 0036 | 0036 | 0036 | 0036 | 0036 | 0036 | 0036 | 0036 | 0036 | 0036 | 0036 | 0036 | 0036 | 0036 | 0036 | 0036 |

CARDIOVASCULAR SYSTEM

| | | | | | | | | | | | | | | | | | | | | | | | | | |
|--------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|-----------|-----------|
| Blood Vessel | + | + | A | + | + | + | + | A | A | + | + | + | + | + | + | + | + | + | + | + | A | + | + | 44 | |
| Heart | + | + | A | + | + | + | + | A | A | + | + | + | + | + | + | + | + | + | + | + | + | A | + | + | 44 |

ENDOCRINE SYSTEM

| | | | | | | | | | | | | | | | | | | | | | | | | | | |
|-----------------------------------------------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---------------|-------------------------------|--------------|
| Adrenal Cortex | + | + | A | + | + | + | + | A | A | + | + | + | + | + | + | + | + | + | + | + | A | + | + | 44 | | |
| Vacuolization Cytoplasmic Subcapsular, Hyperplasia | 2 | 2 | | 2 | 2 | 3 | 2 | | | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 2 | | 2 | 1 | 44 | 1 2.0
44 2.0 | |
| Adrenal Medulla Pigmentation | + | + | A | + | + | + | + | A | A | + | + | + | + | + | + | + | + | + | + | + | + | A | + | + | 44 | 1 2.0 |
| Islets, Pancreatic Hyperplasia | + | + | A | + | + | + | + | A | A | + | + | + | + | + | + | + | + | + | + | + | + | A | + | + | 43 | 2 2.0 |
| Parathyroid Gland Infiltration Cellular, Lymphocyte | + | + | A | + | + | + | + | M | + | + | + | + | + | + | + | + | + | + | + | + | + | A | + | + | 40 | 1 2.0 |
| Pituitary Gland Pars Distalis, Angiectasis | + | + | A | + | + | + | + | A | A | + | + | + | + | + | + | + | + | + | + | + | + | A | + | + | 44 | 1 2.0 |
| Pars Distalis, Cyst | | | | | | | | | | | | | | | | | | | | | | | 3 | 2 2.0 | | |
| Pars Distalis, Hyperplasia | | 2 | | | 1 | | | | | 2 | 2 | | 1 | | | | | 2 | 2 | | | | | 11 1.8 | | |
| Thyroid Gland Infiltration Cellular, Lymphocyte | + | + | A | + | + | + | + | M | A | + | + | + | + | + | + | + | + | + | + | + | + | A | + | + | 43 | 6 1.2 |
| Inflammation, Suppurative | | | | | | | | | | | | | | | | | | | | | | | 1 | 1 1.0 | | |
| Follicle, Degeneration | | | | | | | | | | | 1 | 1 | | | | | | | 1 | 1 | | 2 | | 6 1.3 | | |

* .. Total animals with tissue examined microscopically; Total animals with lesion and mean severity grade
 + .. Tissue examined microscopically
 X .. Lesion present
 I .. Insufficient tissue
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TDMS No. 20116 - 04
 Test Type: CHRONIC
 Route: DOSED WATER
 Species/Strain: MICE/B6C3F1/NCTR

P09: NON-NEOPLASTIC LESIONS BY INDIVIDUAL ANIMAL
 Aloe vera whole leaf extract (native)
 CAS Number: ALOEVLEAFEXT

Date Report Requested: 01/15/2010
 Time Report Requested: 14:39:08
 First Dose M/F: 04/19/05 / 04/19/05
 Lab: NCTR

| C57BL/6N XC3H/HEN MTV-NCTR
MICE FEMALE
ALOEWHOLLEAF 3.0 | DAY ON TEST | | | | | | | | | | | | | | | | | | | | * TOTALS |
|---------------------------------------------------------------|-------------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|----------|
| | 0736 | 0736 | 0702 | 0652 | 0575 | 0756 | 0568 | 0771 | 0771 | 0777 | 0777 | 0777 | 0777 | 0777 | 0777 | 0777 | 0777 | 0777 | 0777 | 0777 | |
| ANIMAL ID | 0036 | 0033 | 0033 | 0055 | 0055 | 0055 | 0055 | 0055 | 0055 | 0055 | 0077 | 0077 | 0077 | 0077 | 0088 | 0088 | 0088 | 0088 | 0088 | 0088 | |
| | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | |
| | 6 | 6 | 2 | 2 | 5 | 6 | 5 | 1 | 1 | 6 | 6 | 6 | 5 | 6 | 6 | 6 | 6 | 6 | 6 | 6 | |
| | 2 | 3 | 4 | 1 | 2 | 3 | 3 | 4 | 1 | 2 | 3 | 4 | 1 | 2 | 3 | 4 | 1 | 2 | 3 | 4 | |

GENERAL BODY SYSTEM

NONE

GENITAL SYSTEM

| | | | | | | | | | | | | | | | | | | | | | | | | | | |
|----------------------------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|----|-----|-----|--|
| Clitoral Gland | + | + | A | + | + | + | + | A | A | + | + | + | + | + | + | + | + | + | + | A | + | + | 42 | | | |
| Degeneration | 4 | 4 | | 4 | 3 | 4 | 2 | | | 4 | 4 | 4 | 4 | 4 | 4 | 4 | 4 | 4 | 4 | | 4 | 4 | 40 | 3.8 | | |
| Ovary | + | + | A | + | + | + | + | A | + | + | + | + | + | + | + | + | + | + | + | A | + | + | 44 | | | |
| Atrophy | 4 | 4 | | 4 | 2 | 4 | 2 | | | 4 | 4 | | 4 | 4 | 4 | 4 | 4 | 4 | 4 | | 4 | 4 | 39 | 3.8 | | |
| Cyst | 2 | 4 | | | | | | | | | | | 3 | | | | | | 2 | | | | 9 | 2.7 | | |
| Cyst, Multiple | | | | | | | | | | | | | | | 4 | | | | | | | | 2 | 4.0 | | |
| Uterus | + | + | A | + | + | + | + | A | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 45 | | | |
| Autolysis | | | | | | | | | | | | | | | | | | | | | 4 | | 1 | 4.0 | | |
| Hydrometra | | | | | | | | | | | | | | | | | | | | | | | 1 | 4.0 | | |
| Thrombus | | | | | | | | | | | | | | | | | | | | | 4 | | 1 | 4.0 | | |
| Endometrium, Hyperplasia, Cystic | 4 | 2 | | 3 | 3 | 4 | 2 | | | 3 | 2 | 4 | 2 | 2 | 3 | 2 | 2 | 4 | 4 | 2 | 4 | 3 | 2 | 43 | 2.9 | |

HEMATOPOIETIC SYSTEM

| | | | | | | | | | | | | | | | | | | | | | | | | | | |
|-------------------------------------------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|----|----|-----|--|
| Bone Marrow | + | + | A | + | + | + | + | A | A | + | + | + | + | + | + | + | + | + | + | + | A | + | + | 43 | | |
| Hyperplasia | | | | | | | | | | | | | 2 | | | | | | | | | | | 3 | 2.0 | |
| Lymph Node | | | | + | | + | | + | | | | | | | + | | | | | | | + | 13 | | | |
| Iliac, Hyperplasia, Lymphoid | | | | | | | | | | | | | | | | | | | | | | | | 1 | 2.0 | |
| Iliac, Infiltration Cellular, Plasma Cell | | | | | | | | | | | | | | | | | | | | | | | | 1 | 2.0 | |
| Iliac, Infiltration Cellular, Polymorphonuclear | | | | | | | | | | | | | | | | | | | | | | | | 1 | 2.0 | |
| Lumbar, Hemorrhage | | | | | | | 2 | | | | | | | | | | | | | | | | | 2 | 2.0 | |

* .. Total animals with tissue examined microscopically; Total animals with lesion and mean severity grade
 + .. Tissue examined microscopically
 X .. Lesion present
 I .. Insufficient tissue
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TDMS No. 20116 - 04
 Test Type: CHRONIC
 Route: DOSED WATER
 Species/Strain: MICE/B6C3F1/NCTR

P09: NON-NEOPLASTIC LESIONS BY INDIVIDUAL ANIMAL

Aloe vera whole leaf extract (native)

CAS Number: ALOEVLEAFEXT

Date Report Requested: 01/15/2010

Time Report Requested: 14:39:08

First Dose M/F: 04/19/05 / 04/19/05

Lab: NCTR

| C57BL/6N XC3H/HEN MTV-NCTR
MICE FEMALE
ALOEWHOLLEAF 3.0 | DAY ON TEST | | | | | | | | | | | | | | | | | | | | * TOTALS | | | | |
|---------------------------------------------------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|--------|--------|
| | 0
7
3
6 | 0
7
3
6 | 0
0
3
6 | 0
6
8
2 | 0
5
5
5 | 0
7
3
6 | 0
5
8
5 | 0
6
8
1 | 0
7
3
1 | 0
7
3
6 | 0
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| ANIMAL ID | 0
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2 | 0
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1 | 0
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3 | 0
0
8
7
4 | | |
| Lumbar, Hyperplasia, Lymphoid | | | | | | | | | | | | | | | | | | | | | 2 | 5 1.8 | | | |
| Lumbar, Sinus, Dilatation | | | | | | | | | | | | | | | | | | | | | 1 | 2.0 | | | |
| Renal, Hemorrhage | | | | | | | | | | | | | | | | | | | | | 4 | 1 4.0 | | | |
| Renal, Hyperplasia, Lymphoid | | | | | | | | | | | | | | | | | | | | | 3 | 1 3.0 | | | |
| Lymph Node, Mandibular
Hyperplasia, Lymphoid | + | + | A | + | + | + | + | A | A | + | + | + | + | + | + | + | + | + | + | A | + | + | 43 | 14 2.1 | |
| Lymph Node, Mesenteric
Hemorrhage | + | + | A | + | + | + | + | A | A | + | + | + | + | + | + | + | + | + | + | + | A | + | + | 42 | 2 3.0 |
| Hyperplasia, Lymphoid | 1 | 2 | | 2 | | | | | | | | 1 | 1 | 3 | 1 | 1 | 2 | | 1 | 2 | | | 16 | 1.5 | |
| Sinus, Dilatation | | | | | | | | | | | | | | | | | | | | | | | 1 | 2.0 | |
| Spleen | + | + | A | + | + | + | + | A | + | + | + | + | + | + | + | + | + | + | + | + | A | + | + | 44 | 1 3.0 |
| Depletion Lymphoid | | | | | | | | | | | | | | | | | | | | | | | 12 | 2.7 | |
| Hematopoietic Cell Proliferation | 2 | | | | | | | | | | | 4 | 2 | | | | | 2 | | | 2 | | 24 | 3.1 | |
| Hyperplasia, Lymphoid | 3 | 4 | | | | | | | | 4 | 3 | | 4 | 3 | 2 | | 3 | 4 | 3 | | 3 | | 5 | 2.2 | |
| Pigmentation | | | | | 2 | | | | | | | | 2 | | | | | | | | | | | | |
| Thymus | + | + | A | + | + | + | + | M | A | + | + | + | M | M | + | + | + | + | + | + | A | + | + | 41 | 10 2.5 |
| Atrophy | | | | 4 | | | 3 | | | | | | | | | | | | | | | | 1 | 2.0 | |
| Cyst | | | | | | | | | | | | | | | | | | | | | | | 12 | 1.8 | |
| Hyperplasia, Lymphoid | 2 | 2 | | | | | | | | | | | | 2 | 2 | | | | | | | | 1 | 3.0 | |
| Epithelial Cell, Hyperplasia | | | | | | | | | | | | | | | | | | | | | | | | | |

INTEGUMENTARY SYSTEM

| | | | | | | | | | | | | | | | | | | | | | | | | | |
|-----------------------------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|-----|--|
| Mammary Gland | + | + | A | + | + | + | + | A | M | + | + | + | + | + | + | + | + | + | + | + | A | + | + | 44 | |
| Infiltration Cellular, Lymphocyte | | | | | | | | | | | | | | | | | | | | | | | 1 | 2.0 | |
| Alveolus, Hyperplasia | | | | 3 | | | | | | | | | | | | | | | | | | | 3 | 2.3 | |

* .. Total animals with tissue examined microscopically; Total animals with lesion and mean severity grade
 + .. Tissue examined microscopically
 X .. Lesion present
 I .. Insufficient tissue
 M .. Missing tissue
 A .. Autolysis precludes evaluation
 BLANK .. Not examined microscopically
 1-4 .. Lesion qualified as:
 1) Minimal 3) Moderate
 2) Mild 4) Marked

TDMS No. 20116 - 04
 Test Type: CHRONIC
 Route: DOSED WATER
 Species/Strain: MICE/B6C3F1/NCTR

P09: NON-NEOPLASTIC LESIONS BY INDIVIDUAL ANIMAL

Aloe vera whole leaf extract (native)

CAS Number: ALOEVLEAFEXT

Date Report Requested: 01/15/2010

Time Report Requested: 14:39:08

First Dose M/F: 04/19/05 / 04/19/05

Lab: NCTR

| C57BL/6N XC3H/HEN MTV-NCTR
MICE FEMALE
ALOEWHOLLEAF 3.0 | DAY ON TEST | | | | | | | | | | | | | | | | | | | | * TOTALS | | |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|----------|---|-------------------------------------------------|
| | 0736 | 0736 | 0702 | 0662 | 0552 | 0756 | 0565 | 0681 | 0771 | 0777 | 0777 | 0777 | 0777 | 0777 | 0777 | 0777 | 0777 | 0777 | 0777 | 0777 | | | |
| ANIMAL ID | 0036 | 0033 | 0033 | 0005 | 0005 | 0005 | 0005 | 0005 | 0005 | 0005 | 0005 | 0005 | 0005 | 0005 | 0005 | 0005 | 0005 | 0005 | 0005 | 0005 | | | |
| Skin | + | + | A | + | + | + | + | A | A | + | + | + | + | + | + | + | + | + | + | A | + | + | 44 |
| MUSCULOSKELETAL SYSTEM | | | | | | | | | | | | | | | | | | | | | | | |
| Bone, Femur
Fibro-Osseous Lesion | + | + | + | + | + | + | + | A | + | + | + | + | + | + | + | + | + | + | + | A | + | + | 46
1 4.0 |
| NERVOUS SYSTEM | | | | | | | | | | | | | | | | | | | | | | | |
| Brain, Brain Stem
Compression | + | + | A | + | + | + | + | A | A | + | + | + | + | + | + | + | + | + | + | A | + | + | 43
1 2.0 |
| Brain, Cerebellum
Infiltration Cellular, Lymphocyte | + | + | A | + | + | + | + | A | A | + | + | + | + | + | + | + | + | + | + | A | + | + | 43
1 1.0 |
| Brain, Cerebrum
Infiltration Cellular, Lymphocyte
Mineralization | + | + | A | + | + | + | + | A | A | + | + | + | + | + | + | + | + | + | + | A | + | + | 43
1 1.0
27 1.0 |
| RESPIRATORY SYSTEM | | | | | | | | | | | | | | | | | | | | | | | |
| Lung
Congestion
Infiltration Cellular, Histiocyte
Infiltration Cellular, Lymphocyte
Inflammation, Chronic Active
Alveolar Epithelium, Hyperplasia | + | + | A | + | + | + | + | A | + | + | + | + | + | + | + | + | + | + | + | A | + | + | 44
1 4.0
1 1.0
3 1.7
1 2.0
1 1.0 |
| Nose
Hyaline Droplet | + | + | A | + | + | + | + | A | + | + | + | + | + | + | + | + | + | + | + | A | + | + | 45
9 1.6 |

* .. Total animals with tissue examined microscopically; Total animals with lesion and mean severity grade
 + .. Tissue examined microscopically
 X .. Lesion present
 I .. Insufficient tissue
 M .. Missing tissue
 A .. Autolysis precludes evaluation
 BLANK .. Not examined microscopically
 1-4 .. Lesion qualified as:
 1) Minimal 3) Moderate
 2) Mild 4) Marked

TDMS No. 20116 - 04
 Test Type: CHRONIC
 Route: DOSED WATER
 Species/Strain: MICE/B6C3F1/NCTR

P09: NON-NEOPLASTIC LESIONS BY INDIVIDUAL ANIMAL
 Aloe vera whole leaf extract (native)
 CAS Number: ALOEVLEAFEXT

Date Report Requested: 01/15/2010
 Time Report Requested: 14:39:08
 First Dose M/F: 04/19/05 / 04/19/05
 Lab: NCTR

| C57BL/6N XC3H/HEN MTV-NCTR
MICE FEMALE
ALOEWHOLLEAF 3.0 | DAY ON TEST | | | | | | | | | | | | | | | | | | | | * TOTALS | | | |
|---------------------------------------------------------------|-------------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|----------|------|-------|--------|
| | 0736 | 0736 | 0736 | 0736 | 0736 | 0736 | 0736 | 0736 | 0736 | 0736 | 0736 | 0736 | 0736 | 0736 | 0736 | 0736 | 0736 | 0736 | 0736 | 0736 | | 0736 | | |
| ANIMAL ID | 0036 | 0036 | 0036 | 0036 | 0036 | 0036 | 0036 | 0036 | 0036 | 0036 | 0036 | 0036 | 0036 | 0036 | 0036 | 0036 | 0036 | 0036 | 0036 | 0036 | 0036 | | | |
| Trachea | + | + | A | + | + | + | + | M | A | + | + | + | + | + | + | + | + | + | + | A | + | + | 43 | |
| SPECIAL SENSES SYSTEM | | | | | | | | | | | | | | | | | | | | | | | | |
| Eye | + | + | A | + | A | + | + | A | A | + | + | + | + | + | + | + | + | + | + | A | + | + | 42 | |
| Harderian Gland | + | + | A | + | + | + | + | A | A | + | + | + | + | + | + | + | + | + | + | A | + | + | 43 | |
| Hyperplasia | 2 | | | | | | | | | | | | | | | | | | | | | | 1 2.0 | |
| Infiltration Cellular, Lymphocyte | | | | | | | 1 | | | 1 | | | | | | | | | | | | | 5 1.2 | |
| URINARY SYSTEM | | | | | | | | | | | | | | | | | | | | | | | | |
| Kidney | + | + | A | + | + | + | + | A | + | + | + | + | + | + | + | + | + | + | + | A | + | + | 44 | |
| Amyloid Deposition | | | | | | | | | | | | | | | | | | | | | | | 2 3.5 | |
| Autolysis | | | | | | | | | | | | 4 | | | | | | | | | | | 1 4.0 | |
| Hyaline Droplet | | | | | | | | | | | | 3 | | | | | | | | | | | 1 3.0 | |
| Infiltration Cellular, Lymphocyte | | 1 | | | | 1 | 2 | | | | | | | 2 | 2 | | 1 | 1 | 1 | | 2 | 1 | 2 2 | 27 1.5 |
| Metaplasia, Osseous | | | | | | | | | | | | | | | | | | | | | | | 2 1.5 | |
| Nephropathy | | | | | | | | | | | | | 1 | | | | | | | | | | 6 1.7 | |
| Polyarteritis | | | | | | | | | | | | | | | 1 | | | | | | | | 1 2.0 | |
| Urinary Bladder | + | + | A | + | + | + | + | A | A | M | + | + | + | + | + | + | + | + | + | A | + | + | 42 | |
| Infiltration Cellular, Lymphocyte | 1 | 1 | | | | | 1 | | | | | | | | | 1 | | 2 | 1 | 2 | | 1 | 1 | 25 1.3 |

*** END OF REPORT ***

* .. Total animals with tissue examined microscopically; Total animals with lesion and mean severity grade
 + .. Tissue examined microscopically
 X .. Lesion present
 I .. Insufficient tissue
 M .. Missing tissue
 A .. Autolysis precludes evaluation
 BLANK .. Not examined microscopically

1-4 .. Lesion qualified as:
 1) Minimal 3) Moderate
 2) Mild 4) Marked