

Transgenerational Inheritance of Health Effects: A State-of-the-Science Evaluation

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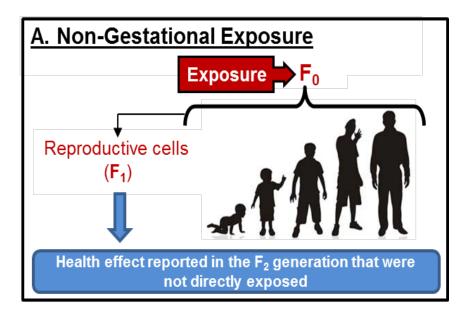


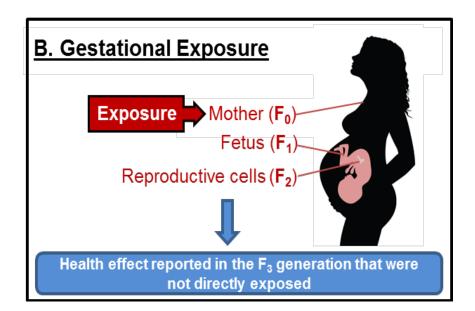


- Definition of transgenerational effects
- Objectives and methods for systematic review
- Results
- Summary



- Exposure of the F₀ generation
 - Exposure stops not continuous, not across generations
- Health effect is evaluated in generation(s) not directly exposed







Complex topic and challenging literature base

- "Transgenerational" has not been defined consistently in literature
- Transgenerational effects are reported
 - Are they transgenerational under this definition?
 - Strength and consistency of the findings?
 - Controversial topic (no evidence or clear evidence?)
 - NIEHS is actively funding research in this area
- What is the nature and extent of the evidence for transgenerational inheritance of health effects?



Objectives and **Systematic Review Methods**





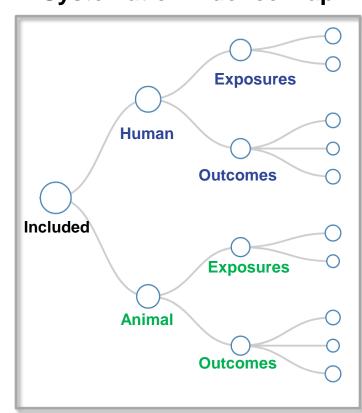
• Objective

- Systematically collect and map transgenerational studies by evidence stream, health effects, and exposures
- Assess the risk of bias (study quality and reporting) for subset of studies to identify potential issues to consider when evaluating this literature and in designing future transgenerational studies



Goals of the Evaluation

- Identify literature utilizing a transgenerational study design
- Identify and map exposures and health outcomes evaluated
- Extract and share data for reported exposures and outcomes
- Synthesize, summarize and critically assess the evidence for exposures evaluating similar outcomes
 - Areas of consistency and uncertainty
 - Key factors of risk of bias for transgenerational study design



Systematic Evidence Map



Search Strategy

- Transgenerational studies are not indexed
- We used a text word concept based approach
 - Transgenerational
 - Multigenerational or intergeneration
 - Grandparent, grandmother, grandfather, grandchild
 - Successive generations and offspring
- Limited the search to PubMed database only





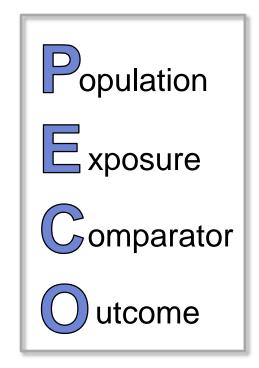
Based on PECO statement developed inclusion/exclusion criteria

Inclusion criteria

- Transgenerational design
- Human or whole animal model system
- An exposure or stressor
- A health outcome
- Must contain original data

Exclusion criteria

- Plants
- Cell and organ cultures
- Studies with continuous exposure
- Selective breeding studies
- Foreign language



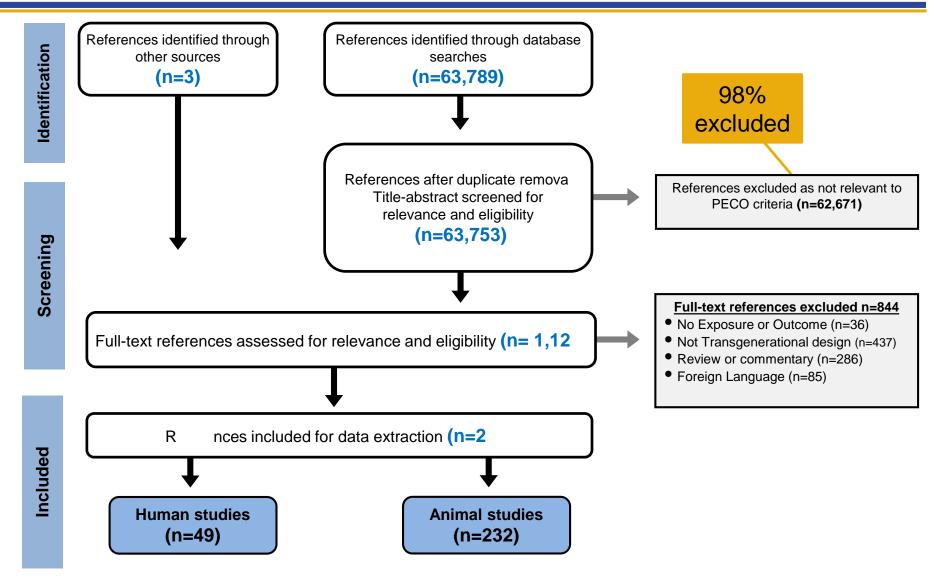


Results





Literature Search and Study Selection





Data Extraction into HAWC

Data Extraction Files are Publicly Available

HAWC Link: <u>hawcproject.org/study/assessment/73/</u>

Experimental protocol and dose regimen



F3 males

Name	F3 males	
Species	Mouse	ер
Strain	C57BL/6	
Sex	Male	En
Source	Harlan Sprague-Dawley Laboratories	Indianapol Endp
Lifestage exposed	no exposure	Syste
Lifestage assessed	adult	Effect
Generation	F3	Effect
Parents	F2 generation	Diagn
		Obse

Dosing regimen

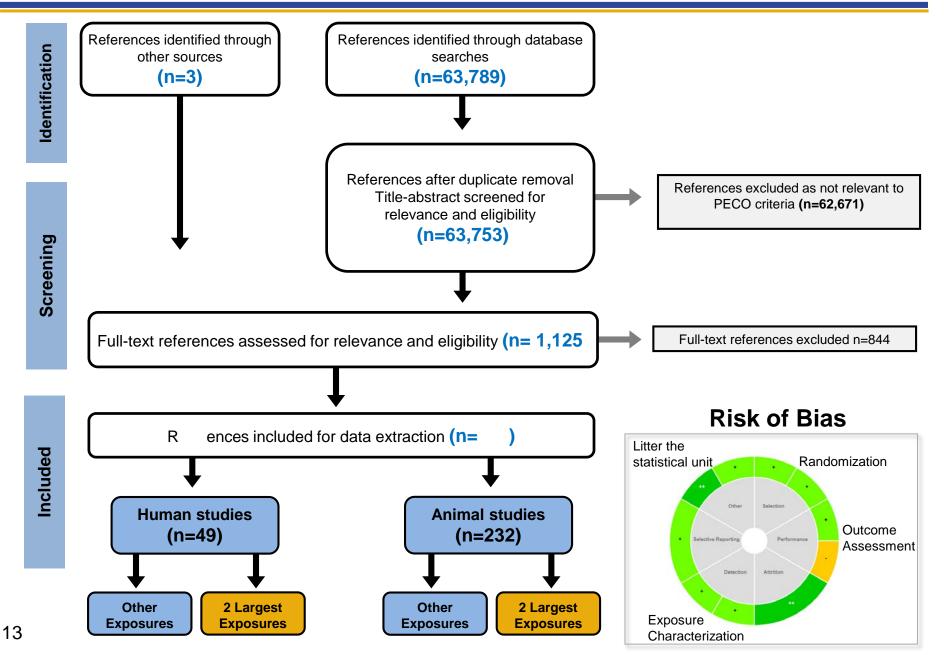
Dosed animals	P0 females
Route of exposure	Oral gavage
Number of dose-groups	2
Positive control	Unknown
Negative control	Not-reported
Doses	ug/kg
	0
	10

Endpoint Summary

pididymal sperm counts Actions -Plot ndpoint Details epididymal sperm count point name epididymal sperm counts Coses in Dudy tem male reproductive system an testis ct sperm count ct subtype non-mutagenic chemical gnostic description phase contrast microscopy bservation time 180 PND Data reported? Data extracted? V Values estimated? Location in literature Figure 1B LOEL 100 mg/kg-day Monotonicity N/A, single dose level study Statistical test two-way ANOVA description Dose (mp.kp-da) QL O I ↔ Trend result not reported Results notes Sperm numbers were reduced minimally, 20%, and sperm forward motility was reduced about 25 to 35% for vinclozolin generation animals. General Animals were sacrificed and cauda epididymal sperm motility was determined using cauda epididymal sperm. Briefly, the notes/methodology

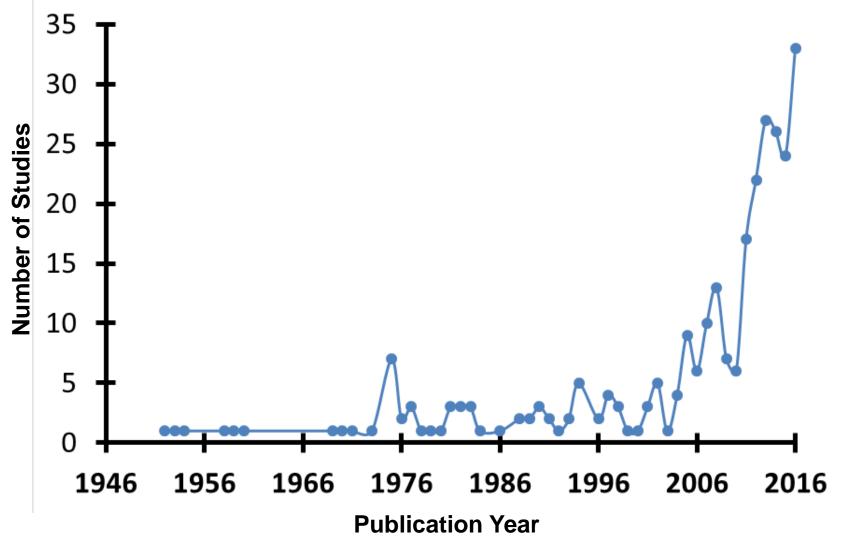


Study Selection and Risk of Bias



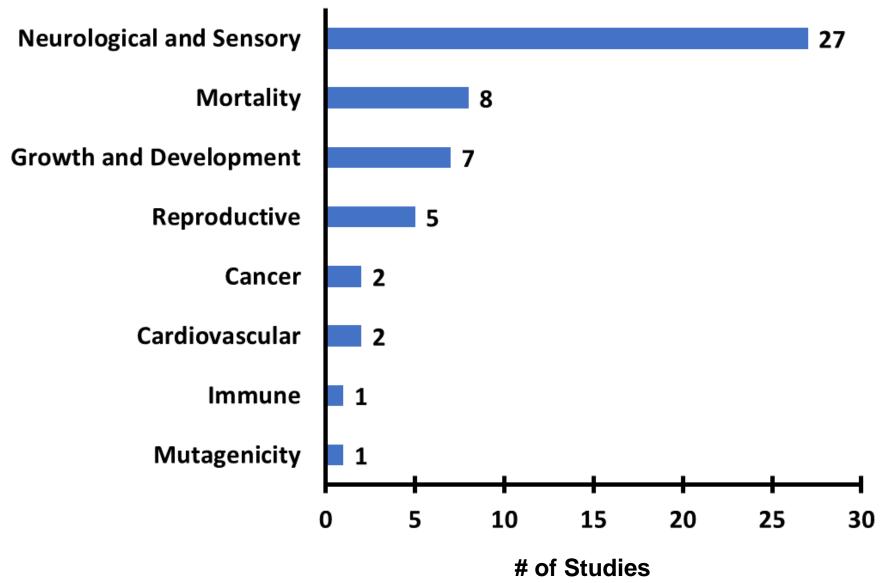


Emerging Research Focus



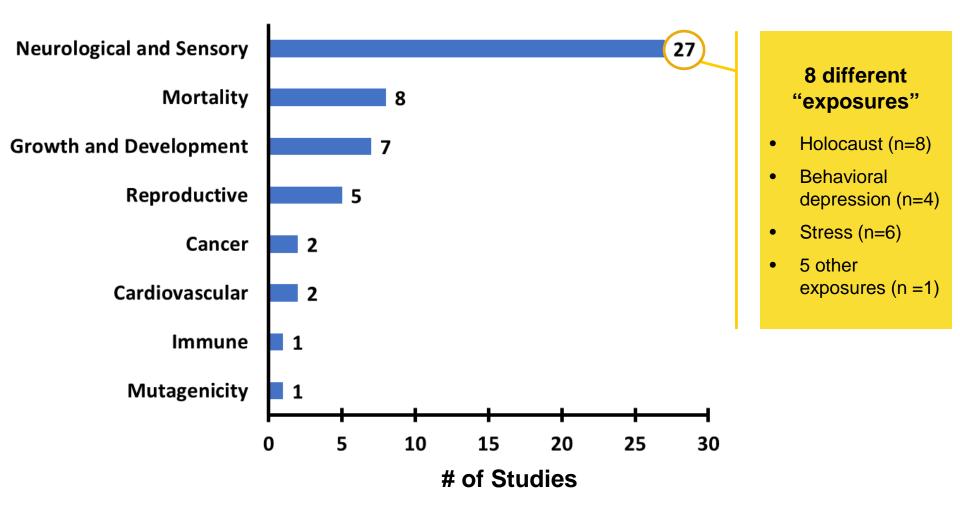


Human Studies: Outcomes





Few Studies of Same Exposure – Outcome Pair





Few Studies of Same Exposure – Outcome Pair

<u>Reproductive</u> outcomes following <u>radiation</u> exposure (5 studies)

- Single cohort of women treated with lowdose radiation therapy for menstrual dysfunction
- Few outcomes tracked, evidence limited to observational findings and reported in a series of publications



Few Studies of Same Exposure – Outcome Pair

<u>Mortality risk</u> in grandchildren following food availability (3 studies)

- 3 studies from the same population in Sweden
- Reported sex-specific effects on mortality in grandchildren following low food supply of grandparent(s)



Human Evidence

Few Studies of Same Exposure – Outcome Pair

<u>Neurological and sensory</u> outcomes in grandchildren whose grandparents experienced <u>behavioral depression</u> (4 studies)

- Impact of grandparent's mental health on grandchild's behavior
- Could be considered hereditary





Human Evidence

Few Studies of Same Exposure – Outcome Pair

<u>Neurological and sensory</u> outcomes in grandchildren whose grandparents experienced the <u>Holocaust</u> (8 studies)

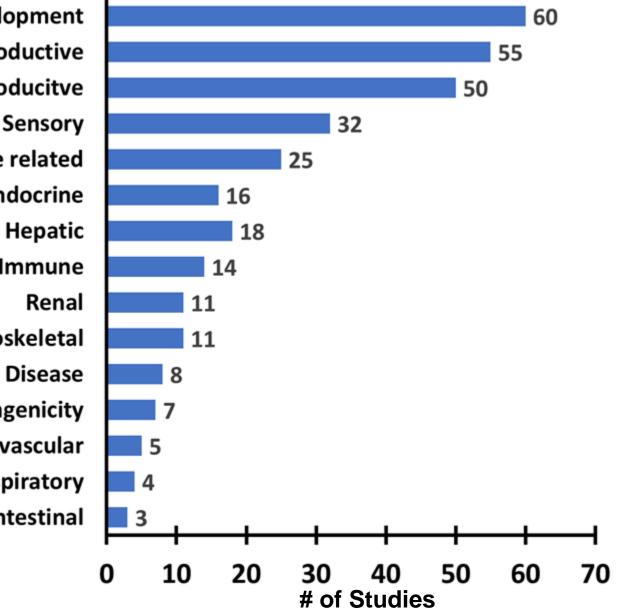
- Evaluated behavioral effects in 2nd and 3rd generation Holocaust survivors
- Meta analysis reports no evidence for behavioral indicators of trauma in an analysis that combined behavioral outcomes



Bottom line- Very few epidemiological studies

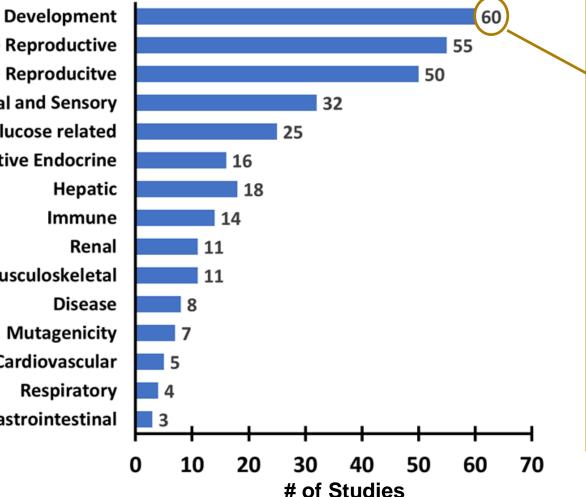


Growth and Development Female Reproductive Male Reproducitve Neurological and Sensory Metabolic or glucose related Non-Reproductive Endocrine Hepatic Immune Renal Musculoskeletal Disease Mutagenicity Cardiovascular Respiratory Gastrointestinal 3



Few Studies With the Same Exposure and Similar Health Outcome

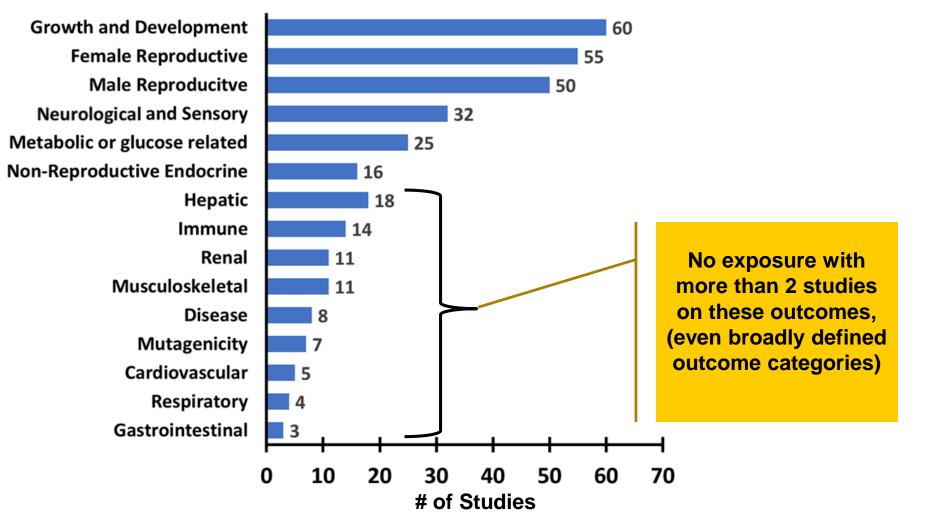
Growth and Development Female Reproductive Male Reproducitve Neurological and Sensory Metabolic or glucose related Non-Reproductive Endocrine Hepatic Immune Renal Musculoskeletal Disease 8 Mutagenicity Cardiovascular 5 Respiratory 4 Gastrointestinal 3 10 0



42 different "exposures"

- High fat diet (n=7) •
- Radiation (n=5) •
- Vinclozolin (n=3) •
- Dioxin (n=3)•
- Methoxychlor (n=2) •
- JP-8 (n=2) •
- NMU (n=2)•
- **DEET + permethrin** . (n=2)
- Cyclophosphamide • (n=2)
- 33 other exposures • (n = 1)

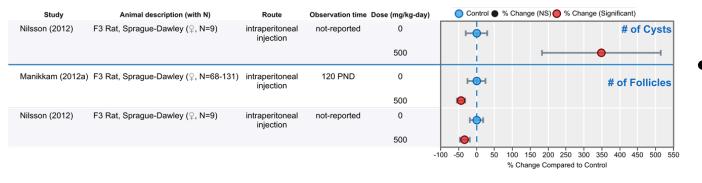
Few Studies With the Same Exposure and Similar Health Outcome



Example Endpoint Reported Across Multiple Exposures

Reduction in Primordial Follicles and Increase in Ovarian Cysts

Jet Propellant 8



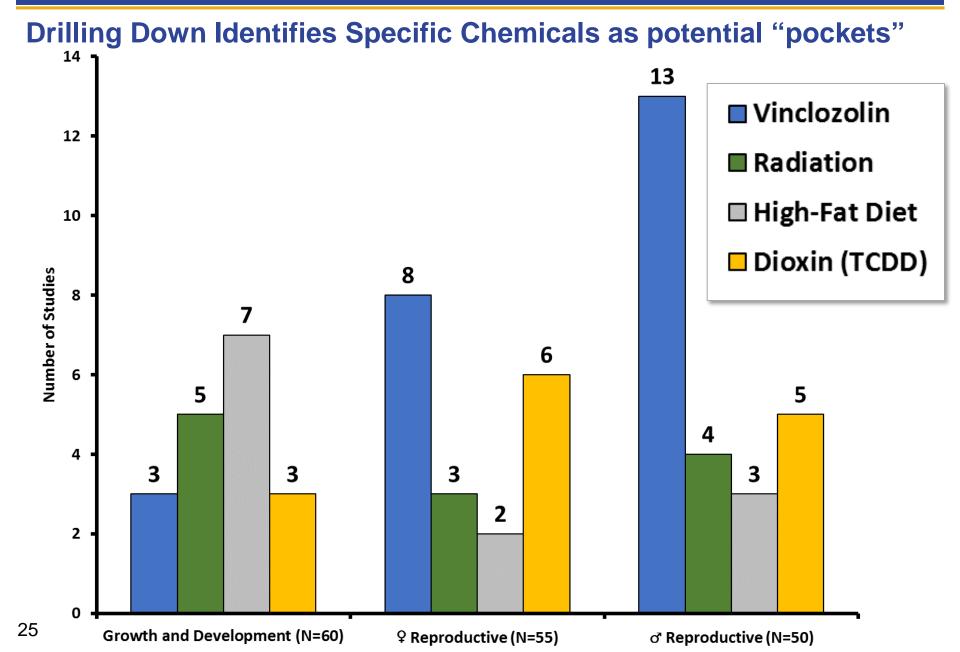
- Few studies– same group of researchers
- Same effects reported across different classes of environmental chemicals

Dioxin

Study	Animal description (with N)	Route	Observation time	Dose (ng/kg-day)	Control ● % Change (NS) ● % Change (Significant)
Nilsson (2012)	F3 Rat, Sprague-Dawley (♀, N=9)	intraperitoneal injection	not-reported	0	+ → + of Cysts
				100	
Manikkam (2012b)	F3 Rat, Sprague-Dawley (♀, N=84-131)	intraperitoneal injection	120 PND	0	# of Follicles
				100	I I I I I I I I I I I I I I I I I I I
Nilsson (2012)	F3 Rat, Sprague-Dawley ($\stackrel{\bigcirc}{_+}$, N=9)	intraperitoneal injection	not-reported	0	i 🔶 i
				100	IOI I
					-100 -50 0 50 100 150 200 250 300 350 400 450 500 550
					% Change Compared to Control

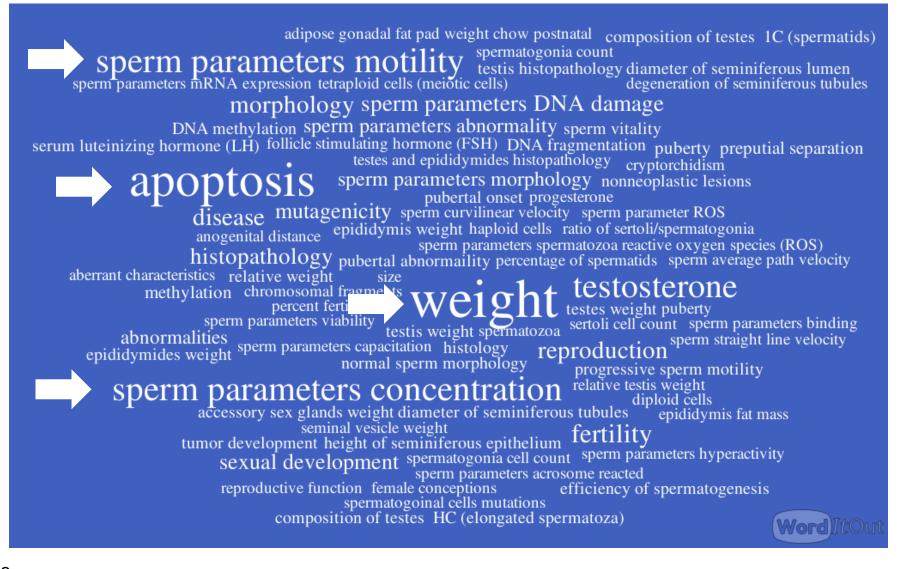


Animal Studies: Exposure x Outcome Pairs



Example: Individual Outcomes within Broad Category

Few Outcomes Evaluated in More than One Study





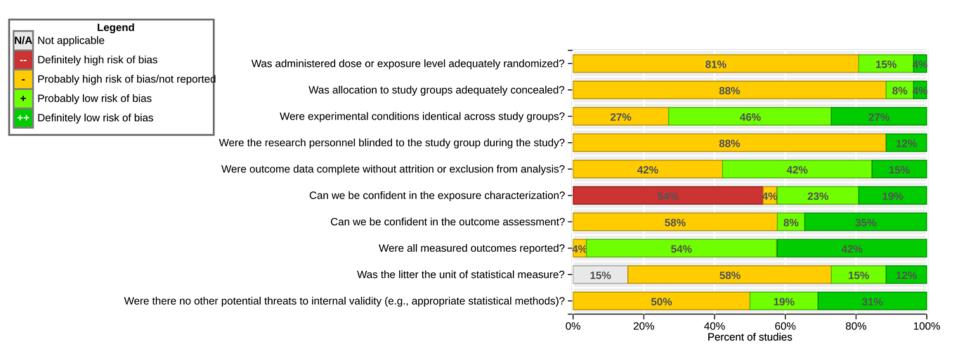
Apoptosis of Germ Cells in the Testis

Study	Animal description (with N)	Route	Observation time	Dose (mg/kg-day)	Ocontrol . ● % Change (NS) ● % Change (Significant)
Guerrero-Bosagna (2012)	F3 Mouse, 129 (ਨੈ, N=NR)	intraperitoneal injection	PND 60-90	0	
				100	•
	F3 Mouse, CD-1 (ੋ, N=12-16)	intraperitoneal	60-90 PND	0	H H
		injection		100	•••••
				200	⊢ ●−1
			>1 year	0	H H
				100	
				200	Mouse
Anway (2006b)	F3 Rat, Fischer (CDF) (3, N=11-13)	intraperitoneal injection	PND 60	0	Rat
				100	
Anway (2005)	F3 Rat, Sprague-Dawley (♂, N=19-26)	intraperitoneal injection	180 PND	0	⊢
				100	► • • • • • • • • • • • • • • • • • • •
Anway (2008)	F3 Rat, Sprague-Dawley (♂, N=6-7)	intraperitoneal injection	150 PND	0	
				100	⊢ −−
Schneider 2008	F3 Rat, Wistar-Hannover (ै, N=48-49)	oral gavage	134 PND	0	Her
				4	He-H
				100	I O I
Schneider (2013)	F3 Rat, Wistar-Hannover (Å, N=48-50)	intraperitoneal injection	134 PND	0	P
		njoonon		4	•
				100	•
Anway (2005)	F4 Rat, Sprague-Dawley (J, N=15-21)	intraperitoneal injection	180 PND	0	
				100	H −−−− 1
Schneider (2013)	F4 Rat, Wistar-Hannover (ೆ, N=48-50) ir	intraperitoneal injection	134 PND	0	•
				4	•
				100	•
				-1	00 -50 0 50 100 150 200

- 6 studies from 2 groups of researchers
- Effects reported in both the mouse and rat
- 95% CI overlap with null



Subset of Transgenerational Studies Identify Concerns with Study Conduct and Reporting





Majority Of Studies Result in *Probably High Risk* of Bias for Key Factors in Study Design And Reporting

Randomization	81%					15% 4%	
Was allocation to study groups adequately concealed? -			88%			8% 4%	
Were experimental conditions identical across study groups? -	27%	46%			27%		
Outcome Assessment			88%			12%	
me data complete without attrition or exclusion from analysis? -	42	!%		42%		15%	
Exposure Characterization		54%		<mark>4%</mark>	23%	19%	
Can we be confident in the outcome assessment? -		58%		8%	3	596	
Were all measured outcomes reported? -4%		54%			42%		
Litter as statistical unit	5%		58%		159	6 12%	
eats to internal validity (e.g., appropriate statistical methods)? -		50%		19%		31%	
0%	20	%	40% Percent of s	60% tudies	80%	5 100%	



Summary





"Pockets" of Transgenerational Evidence

Male reproductive

- Main exposures: vinclozolin (13), dioxin (5) radiation (4)
- Main outcomes: sperm parameters, organ weights, germ cell apoptosis

Female reproductive

- **Main exposures**: vinclozolin (8), dioxin (6)
- Main outcomes: ↑ ovarian cysts,
 ↓ follicle counts

Neurological



- Main exposures: stress (5), vinclozolin (4)
- Main outcomes: Social investigation, locomotor activity, anxiety-like behavior, olfactory recognition

Metabolic or Glucoserelated



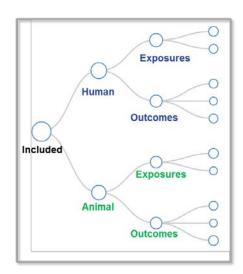
- **Main exposures**: high-fat diet (8), protein-restricted diet (4)
- Main outcomes: glucose tolerance, adiposity



How Deep are the "Pockets" of Evidence?

 A broad range of exposures and outcomes report transgenerational inheritance of health effects

- Evidence mapping illustrates that there are serious limitations in the available bodies of evidence to support a systematic review for reaching hazard conclusions
 - Very few human studies of sufficient generations
 - Few studies of same exposure and outcome pair
 - Problems in study design, conduct, and reporting (ROB)





What Data Would Strengthen a Critical Evaluation?

 For a given exposure, consistent assessment of the same or closely related health effects in multiple studies (and ideally across multiple labs)

- Minimize bias to produce robust data on potential transgenerational effects
 - Best practices in study design, conduct and reporting
 - Randomization of treatment
 - Blinding of outcome assessors to study group
 - Control for litter effects litter as statistical unit of analysis
 - Consistent age/timing of outcome assessment within a study



What is the Nature and Extent of Transgenerational Literature?

• SR methods to map literature by exposures and health effects

- Evaluation website (protocol, etc.;<u>https://ntp.niehs.nih.gov/go/38159</u>)
- Identify studies (included study list)
- Extract data (publicly available; <u>https://hawcproject.org/assessment/73/</u>)

Evidence map

- Extent of evidence by evidence stream
- Exposures
- Health effects

Critical analysis

Strengths or challenges of bodies of evidence to support reaching a hazard conclusion on transgenerational inheritance of health effects





Evaluation Design Team

- Division of National Toxicology Program
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 - Katherine Pelch
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 - Lisa Chadwick

- Division of Intramural Research
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- EPA/NCEA/IRIS
 - Kris Thayer
- ICF International
 - Pamela Hartman
 - Susan Goldhaber
 - Cara Henning
 - Robyn Blain



- Please comment on NTP's overall approach for this stateof-the-science or scoping review. Did it yield a trackable product for addressing this public health question?
- What value do you envision by NTP providing the output from this (and other) reviews in HAWC for public access? What strategies might NTP use to facilitate use and awareness about this resource?