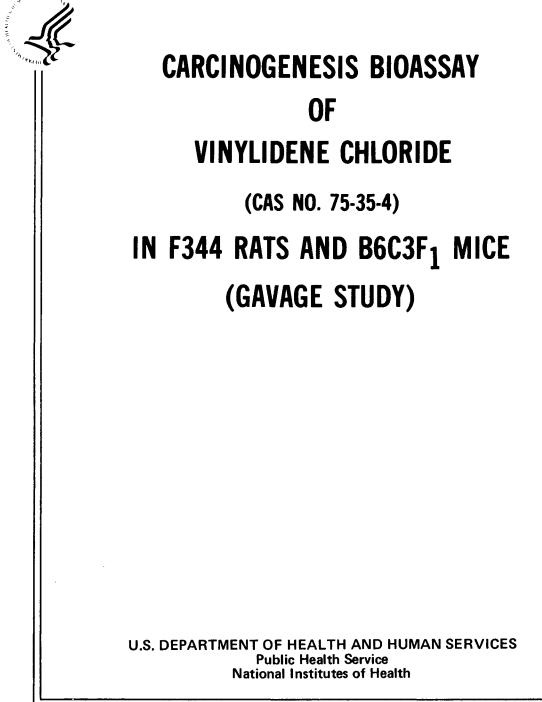
NATIONAL TOXICOLOGY PROGRAM Technical Report Series No. 228



NATIONAL TOXICOLOGY PROGRAM

The National Toxicology Program (NTP), established in 1978, develops and evaluates scientific information about potentially toxic and hazardous chemicals. This knowledge can be used for protecting the health of the American people and for the primary prevention of chemically induced disease. By bringing together the relevant programs, staff, and resources from the U.S. Public Health Service, DHHS, the National Toxicology Program has centralized and strengthened activities relating to toxicology research, testing and test development/validation efforts, and the dissemination of toxicological information to the public and scientific communities and to the research and regulatory agencies.

The NTP is comprised of four charter DHHS agencies: the National Cancer Institute, National Institutes of Health; the National Institute of Environmental Health Sciences, National Institutes of Health; the National Center for Toxicological Research, Food and Drug Administration; and the National Institute for Occupational Safety and Health, Centers for Disease Control. In July 1981, the Carcinogenesis Bioassay Testing Program, NCI, was transferred to the NIEHS.

NTP Technical Report

on the

CARCINOGENESIS BIOASSAY

of

VINYLIDENE CHLORIDE

(CAS No. 75-35-4)

IN F344/N RATS AND B6C3F₁/N MICE (GAVAGE STUDY)



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NOTE TO THE READER

This is one in a series of experiments designed to determine whether selected chemicals produce cancer in animals. Chemicals selected for testing in the NTP carcinogenesis bioassay program are chosen primarily on the bases of human exposure, level of production, and chemical structure. Selection per se is not an indicator of a chemical's carcinogenic potential. Negative results, in which the test animals do not have a greater incidence of cancer than control animals, do not necessarily mean that a test chemical is not a carcinogen, inasmuch as the experiments are conducted under a limited set of conditions. Positive results demonstrate that a test chemical is carcinogenic for animals under the conditions of the test and indicate that exposure to the chemical is a potential hazard to humans. The determination of the risk to humans from chemicals found to be carcinogenic in animals requires a wider analysis which extends beyond the purview of this study.

This study was initiated by the National Cancer Institute's Carcinogenesis Testing Program, now part of the National Institute of Environmental Health Sciences, National Toxicology Program.

Comments and questions about the National Toxicology Program Technical Reports on Carcinogenesis Bioassays should be directed to the National Toxicology Program, located at Room A-306, Landow Building, Bethesda, MD 20014 (301-496-1152) or at Research Triangle Park, North Carolina 27709 (919-541-3991).

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Single copies of this carcinogenesis bioassay technical report are available without charge (and while supplies last) from the NTP Public Information Office, National Toxicology Program, P.O. Box 12233, Research Triangle Park, NC 27709.

TABLE OF CONTENTS

.

		Page
Abstr	act	7
Contr	ibutors	8
Revie	wers	10
Peer	Review Panel and Comments	11
Ι.	Introduction	13
11.	Materials and Methods	17
	A. Chemical	17
	B. Dosage Preparation	17
	C. Animals	19
	D. Animal Maintenance	19
	E. Range Finding and Repeated-Dose Studies	20
	F. Subchronic Studies	24
	G. Chronic Studies	28
	H. Clinical Examinations and Pathology	28
	I. Data Recording and Statistical Analyses	30
III.	Results - Rats	33
	A. Body Weights and Clinical Signs (Rats)	33
	B. Survival (Rats)	33
	C. Pathology (Rats)	33
	D. Statistical Analyses of Results (Rats)	37
IV.	Results - Mice	55
	A Body Unished and Oligatical Stand (Miss)	55
	A. Body Weights and Clinical Signs (Mice)	55
	B. Survival (Mice)	55
	C. Pathology (Mice)	55
	D. Statistical Analyses of Results (Mice)	59
V.	Discussion	71
VI.	Conclusion	75
VII.	Bibliography	77
	TABLES	

TAB	LES

Table 1	Source and Description of Materials Used for Dosage	
	Preparation and Animal Maintenance	18

Table	2	Dosage and Survival of Rats and Mice Administered a Single Dose of Vinylidene Chloride in Corn Oil by Gavage	21
Table	3	Dosage, Survival, and Mean Body Weights of Rats Administered Vinylidene Chloride by Gavage for 14 Days	22
Table	4	Dosage, Survival, and Mean Body Weights of Mice Administered Vinylidene Chloride by Gavage for 14 Days	23
Table	5	Dosage, Survival, and Mean Body Weights of Rats Administered Vinylidene Chloride by Gavage for 13 Weeks	25
Table	6	Dosage, Survival, and Mean Body Weights of Mice Administered Vinylidene Chloride by Gavage for 13 Weeks	26
Table	7	Incidence of Liver Lesions in Rats and Mice Administered Vinylidene Chloride by Gavage for 13 Weeks	27
Table	8	Experimental Design of Chronic Vinylidene Chloride Gavage Studies in Rats and Mice	29
Table	9	Mean Body Weight Change (Relative to Controls) of Rats Administered Vinylidene Chloride by Gavage	35
Table	10	Analyses of the Incidence of Primary Tumors in Male Rats Administered Vinylidene Chloride by Gavage	41
Table	11	Analyses of the Incidence of Primary Tumors in Female Rats Administered Vinylidene Chloride by Gavage	47
Table	12	Results of Life Table Analysis on Those Primary Tumors Showing Significant ($P < 0.05$) Increases by "Unadjusted	
		Analyses" in the Two-Year Study of Vinylidene Chloride in Rats	53
Table	13	Mean Body Weight Change (Relative to Controls) of Mice Administered Vinylidene Chloride by Gavage	57
Table	14	Analyses of the Incidence of Primary Tumors in Male Mice Administered Vinylidene Chloride by Gavage	61
Table	15	Analyses of the Incidence of Primary Tumors in Female Mice Administered Vinylidene Chloride by Gavage	66
Table	16	Results of Life Table Analysis on Those Tumors Showing Significant ($P < 0.05$) Increases by "Unadjusted Analyses" in the Two-Year Study of Vinylidene	
		Chloride in Female Mice	70

4

Page

FIGURES

	Growth Curves for Rats Administered Vinylidene Chloride by Gavage	34
-	Survival Curves for Rats Administered Vinylidene Chloride by Gavage	36
-	Growth Curves for Mice Administered Vinylidene Chloride by Gavage	56
-	Survival Curves for Mice Administered Vinylidene Chloride by Gavage	58
-	Infrared Absorption Spectrum of Vinylidene Chloride (Lot No. UTLX83844)	168
	Nuclear Magnetic Resonance Spectrum of Vinylidene Chloride (Lot No. UTLX83844)	169
-	Infrared Absorption Spectrum of Vinylidene Chloride (Lot No. V83848)	175
	APPENDIXES	
Appendix A	Summary of the Incidence of Neoplasms in Rats Administered Vinylidene Chloride by Gavage	83
Table Al	Summary of the Incidence of Neoplasms in Male Rats Administered Vinylidene Chloride by Gavage	85
Table A2	Summary of the Incidence of Neoplasms in Female Rats Administered Vinylidene Chloride by Gavage	89
Table A3	Individual Animal Tumor Pathology of Male Rats in the 2-Year Study of Vinylidene Chloride	94
Table A4	Individual Animal Tumor Pathology of Female Rats in the 2-Year Study of Vinylidene Chloride	100
Appendix B	Summary of the Incidence of Neoplasms in Mice Administered Vinylidene Chloride by Gavage	107
Table Bl	Summary of the Incidence of Neoplasms in Male Mice Administered Vinylidene Chloride by Gavage	109
Table B2	Summary of the Incidence of Neoplasms in Female Mice Administered Vinylidene Chloride by Gavage	113

Table B3	Individual Animal Tumor Pathology of Male Mice in the 2-Year Study of Vinylidene Chloride	118
Table B4	Individual Animal Tumor Pathology of Female Mice in the 2-Year Study of Vinylidene Chloride	124
Appendix C	Summary of the Incidence of Nonneoplastic Lesions in Rats Administered Vinylidene Chloride by Gavage	131
Table Cl	Summary of the Incidence of Nonneoplastic Lesions in Male Rats Administered Vinylidene Chloride by Gavage	133
Table C2	Summary of the Incidence of Nonneoplastic Lesions in Female Rats Administered Vinylidene Chloride by Gavage	140
Appendix D	Summary of the Incidence of Nonneoplastic Lesions in Mice Administered Vinylidene Chloride by Gavage	147
Table Dl	Summary of the Incidence of Nonneoplastic Lesions in Male Mice Administered Vinylidene Chloride by Gavage	149
Table D2	Summary of the Incidence of Nonneoplastic Lesions in Female Mice Administered Vinylidene Chloride by Gavage	154
Appendix E	Analysis of Vinylidene Chloride (Lot No. UTLX83844)	159
Table El	Chromatographic Data	164
Table E2	Mass Fragmentation Data	165
Table E3	Literature Spectra of the Dichloroethylenes	166
Appendix F	Analysis of Vinylidene Chloride (Lot No. V83848)	171
Appendix G	Analysis of Vinylidene Chloride in Corn Oil for Stability	177
Appendix H	Analysis of Vinylidene Chloride in Corn Oil	181
Table Hl	Analyses of Corn Oil Mixtures	184

Page

ABSTRACT

A subchronic and a chronic carcinogenesis study of vinylidene chloride (99% pure), a widely used chemical intermediate and monomer, were conducted in F344/N rats and B6C3F1/N mice. In subchronic studies, groups of 10 rats and 10 mice of either sex were administered vinylidene chloride in corn oil by gavage five times per week at 0, 5, 15, 40, 100, or 250 mg/kg body weight for 13 weeks. At the end of this study, representative tissues from these animals were subjected to histopathological examination. The liver was identified as a target organ for vinylidene chloride toxicity.

In the 104-week chronic exposure study, conducted primarily to determine possible carcinogenic potential of vinylidene chloride by the oral route, 50 F344/N rats and 50 B6C3F1/N mice of either sex were gavaged with vinylidene chloride suspended in corn oil at dose levels of 1 or 5 mg/kg (rats) and 2 or 10 mg/kg (mice). Groups of 50 rats and 50 mice of either sex received corn oil alone and served as vehicle controls.

Throughout most of the study, mean body weights of the dosed rats of either sex and high-dose female mice were comparable with those of the corresponding controls; the mean body weights of dosed male and low-dose female mice were slightly lower than those of the controls. The absence of compound-related effects on survival or clinical signs suggests that the rats and mice of either sex could have tolerated higher doses. While no significant differences in survival were observed for any group of rats, 12 control and 10 low-dose males were killed accidentally during week 82; this may have compromised the sensitivity of the male rat study.

The results of histopathological examination indicated an increased incidence of necrosis of the liver in high-dose male and low-dose female mice and chronic renal inflammation in high-dose rats of either sex.

The only observed significant (P < 0.05) increase in tumor incidence occurred in low-dose female mice: lymphoma (2/48, 9/49, 6/50) and lymphoma or leukemia (7/48, 15/49, 7/50). These increases were not considered to be related to vinylidene chloride administration because similar effects were not found in the high-dose female mice or in male mice or rats.

Under the conditions of this bioassay, vinylidene chloride administered by gavage was not carcinogenic for F344/N rats or B6C3F1/N mice of either sex. However, since the use of a maximum tolerated dose in this study has not been clearly demonstrated and since previously reported studies have shown that carcinogenicity is associated with inhalation exposure to vinylidene chloride, this study should not be taken as proof that the chemical is not a carcinogen.

CONTRIBUTORS

The bioassay of vinylidene chloride was conducted at Gulf South Research Institute, New Iberia, Louisiana, under a subcontract to Tracor Jitco, Inc., the prime contractor for the NCI/NTP Bioassay Program. The prechronic study was started in June 1976 and completed in January 1977; the chronic study was begun in June 1977 and completed in June 1979.

The bioassay was conducted under the supervision of Mr. R. J. Wheeler (1), principal investigator. Doses of the test chemical were selected by Drs. J. Robens (2,3) and C. Cueto (4). Drs. R. J. Brown (1) and E. Bernal (1), pathologists, directed the necropsies and performed the histopathologic evaluations. The pathology report and selected slides were evaluated by the NCI Pathology Working Group as described in Ward et al. (1978). The diagnoses represent a consensus of contracting pathologists and the NCI Pathology Working Group, with final approval by the NCI Pathology Working Group in August 1980.

Animal pathology tables and survival tables were compiled at EG&G Mason Research Institute, Rockville, Maryland (5). The statistical analyses were performed by Dr. J. R. Joiner (2) and Mr. J. Warner (2), using methods selected for the bioassay program by Dr. J. J. Gart (6). Chemicals were analyzed at Midwest Research Institute (7). Chemical reanalysis and analyses of chemical-vehicle mixtures were performed by Mr. S. M. Billedeau (1) and Mr. E. S. Collard (1).

This report was prepared at Tracor Jitco (2). Those responsible for the report at Tracor Jitco were Dr. C. Cueto, Director of the Bioassay Program; Dr. S. S. Olin, Associate Director; Dr. M. A. Stedham, pathologist; Dr. J. E. Tomaszewski, chemist; Dr. W. D. Theriault, reports manager; Dr. A. C. Jacobs, bioscience writer; and Ms. C. E. Dean, Technical Assistant.

The following scientists at NCI/NTP (8) were responsible for evaluating the bioassay experiment, interpreting the results, and reporting the findings: Dr. Rajendra S. Chhabra (Chemical Manager), Dr. J. Fielding Douglas, Dr. Charles K. Grieshaber, Dr. Larry Hart, Dr. Joseph Haseman, Dr. James Huff, Dr. Mary R. Kornreich, Dr. Ernest E. McConnell, Dr. James McCoy, Dr. John A. Moore, Dr. Sherman F. Stinson, Dr. Raymond Tennant, and Dr. Jerrold M. Ward.

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On February 18, 1981, this carcinogenesis bioassay report on vinylidene chloride underwent peer review and was approved by the National Toxicology Program Board of Scientific Counselors, Technical Review Subcommittee and Associated Panel of Experts at an open meeting held in Building 31C, National Institutes of Health, Bethesda, Maryland. Members of the Subcommittee are: Drs. Margaret Hitchcock (Chairperson), Curtis Harper (principal reviewer) and Alice Whittemore. Members of the panel were: Drs. Norman Breslow, Joseph Highland, Frank Mirer, Sheldon Murphy, Svend Nielsen (principal reviewer), Bernard Schwetz, Roy Shore, James Swenberg and Gary Williams. (Drs. Norman Breslow and Alice Whittemore were not able to attend this meeting.)

Dr. Harper, a principal reviewer, agreed that the compound was not carcinogenic in either rats or mice under the conditions of this bioassay. He felt, however, that the conclusion was too simply stated. Based on a review of the data from this study and previous positive findings for carcinogenicity of vinylidene chloride by other routes of exposure, he thought that both the abstract and conclusion statement should be revised to more accurately represent the risk that is potentially posed by this He said there were a number of neoplasms which occurred at compound. increased incidences which were not mentioned in the abstract, presumably because they did not meet the Bonferroni inequality criterion for overall Included were pheochromocytomas, pancreatic islet-cell significance. carcinomas, interstitial-cell tumors of the testes, and subcutaneous fibromas in male rats, and pituitary adenomas in female rats. Also noted were lymphomas or leukemia in low-dose female mice.

The other principal reviewer, Dr. Nielsen, agreed that under the conditions of the bioassay vinylidene chloride was not carcinogenic for rats and apparently not for mice, although the dose levels in female mice were less than optimal. He considered the data on weight gains in the 13-week study of female mice to be too variable to allow a reasonable determination of dose levels in the chronic study. He noted that low-dose female mice had a higher incidence of hepatic necrosis, a lower weight gain, and a lower survival rate than control or high-dose female mice.

Dr. Haseman (NTP) stated that the increased incidences of a number of tumors referred to by Dr. Harper were disregarded in the abstract not so much because of the Bonferroni criterion but because life table analyses indicated that the effects were not statistically significant. Also, this type of analysis aided in minimizing the impact of early accidental deaths of control and low-dose male rats. Drs. Shore and Harper requested that life table analyses be included in tabular form for those tumors where increased incidences were statistically significant by the Fisher exact test or by the Cochran-Armitage linear trend test but were not significant when life table analyses were used. Dr. Harper moved that the report on the bioassay of vinylidene chloride be accepted contingent upon inclusion of a clarification of the data to explain how the maximal tolerated dose was chosen for the chronic mouse studies. Dr. Nielsen seconded the motion, and the bioassay report was approved unanimously (with one abstention) by the Peer Review Panel.

I. INTRODUCTION

$$CI > C = C < H$$

VINYLIDENE CHLORIDE

CAS NO. 75-35-4

VINYLIDENE CHLORIDE

Vinylidene chloride (1,1-dichloroethylene; VDC; 1,1-DCE) CAS No. 75-35-4) is a volatile liquid used primarily as a chemical intermediate in the production of 1,1,1-trichloroethane and as a monomer in the production of copolymers of high vinylidene content. The production of this chemical in 1976 was 120-150 million kilograms (IARC, 1979; <u>Chem. Eng. News</u>, 1977). Current production figures for vinylidene chloride are not available (USITC, 1979).

The U.S. Food and Drug Administration has approved the use of vinylidene chloride copolymers in various products intended for use in contact with food (CFR, 1977). Vinylidene chloride-vinyl chloride copolymers are used mainly for food packaging films and coatings (e.g., household and industrial food wraps; laminations for cap liners and luncheon meat; shrink films for meat; and paper coatings for packaged potato chips, pretzels, cereals, and for cake mixes) (IARC, 1979). The industrial and household Saran[®] films contain residues of vinylidene chloride monomer (Birkel et al., 1977).

Vinylidene chloride-vinyl chloride copolymers are also used as laminations for packaged cosmetics, as coatings for steel piles and structures and for the interiors of ship tanks and railway tank cars, and as binders and coatings for magnetic, audio, video, and computer tapes (IARC, 1979).

Vinylidene chloride is mutagenic in <u>Salmonella</u> typhimurium TA 1530 and TA 100 after activation either by the 9,000-g liver supernatant from

phenobarbital treated male OF-1 mice (Bartsch et al., 1975) or by liver microsomes from rats pretreated with Aroclor 1254 (Simmon et al., 1977). VDC is also mutagenic in Salmonella typhimurium TA 1535 after activation by kidney and liver post-mitochondrial supernatant (S-9 mix) (Jones and Hathway, 1978b). Vinylidene chloride induced reverse mutations in <u>Escherichia coli</u> K12 in the presence of liver microsomes from mice pretreated with phenobarbital (Greim et al., 1975). VDC vapors caused dose-related toxicity in V79 hamster cells but were not mutagenic with or without liver S-9 activation (Devron and Kuroki, 1979). VDC induced both point mutation and mitotic gene conversion in <u>Saccharomyces cerevisiae</u> in suspension with metabolic activation and in the intrasanguineous host-mediated assay (Bronzetti et al., 1981). Vinylidene chloride was negative in dominant lethal tests in CD rats and CD-1 mice (Short et al., 1977a; and Anderson et al., 1977).

In inhalation studies published while the present study was in progress, vinylideme chloride was reported to be carcinogenic for female Sprague-Dawley rats (producing mammary fibroadenomas or carcinomas) and for male Swiss mice (producing renal adenocarcinomas) (Maltoni et al. 1977; Norris, 1977). An increased incidence of lung, skin, and liver cell tumors in mice and the induction of hemangiosarcomas in both mice and rats were reported in another inhalation study (Lee et al., 1977). Vinylidene chloride was also found to be a skin tumor initiatior in Ha:ICR Swiss mice (Van Duuren et al., 1979). However, when vinylidene chloride was administered by gavage to male Swiss mice, to female BDIV rats, or to the progeny of female BDIV rats previously exposed in utero or when it was administered in drinking water to Sprague-Dawley rats, no carcinogenic effects were found (Maltoni et al. 1977; Norris, 1977; and Ponomarkov and Tomatis, 1980). Other studies have been conducted for which the final results have not yet been fully reported (Viola and Caputo, 1977; Rampy et al., 1978; Maltoni et al., 1977).

Vinylidene chloride was selected for testing by the Bioassay Program because of its widespread use and its structural relationship to vinyl chloride, a known human carcinogen (IARC, 1979). The objective of the present study was to determine the carcinogenic potential of vinylidene chloride in rats and mice by oral administration.

A. Chemical

Vinylidene chloride (99% pure) was obtained in two batches from Dow Chemical Company (Freeport, TX). Lot No. UTLX83844 was used for the subchronic studies, and Lot No. V83848 was used for the chronic studies.

The results of purity and identity analyses performed at Midwest Research Institute (Appendix E) and at Gulf South Research Institute (Appendix F) were consistent with the assigned structure. Three minor impurities were identified in Lot No. UTLX83844 by vapor-phase chromatography and mass spectrometry: trans-dichloroethylene (0.1%); cis-dichloroethylene (less than 0.1%); and a stabilizer, the monomethylether of hydroquinone (MEHQ), present at a concentration of 0.05%. 1,1-Dichloroethane, 1,2-dichloroethane, trichloroethylene, and vinyl chloride were not detected; if present, the concentrations were less than 0.1%, 0.04%, 0.1%, and 0.01%, respectively. Two impurities in Lot No. V83848 were identified by vapor-phase chromatography: transdichloroethylene (0.15%) and MEHQ (0.02%).

Vinylidene chloride was stored under nitrogen in an amber glass bottle at -20° C. Lot No. V83848 was analyzed monthly at Gulf South, as described in Appendix F, and did not change in composition over the course of the study.

B. Dosage Preparation

Appropriate amounts of vinylidene chloride were weighed and then mixed with sufficient corn oil (Table 1) to give the desired concentration. Rats received a dose volume of 5 ml/kg and mice received 10 ml/kg. The vinylidene chloride - corn oil solutions were stored at 4° C for no longer than 7 days.

The stability of vinylidene chloride in corn oil was determined at Midwest Research Institute by analyzing methanol extracts of vinylidene chloride - corn oil mixtures that had been stored at room temperature (under nitrogen and in the dark) from 1 to 7 days. Amounts of the test chemical

Item	Description	Source	
Animal Meal	Wayne. Lab Blox	Allied Mills (Chicago, IL)	
Cages	Polycarbonate	Lab Products, Inc. (Garfield, NJ)	
Corn Oil	Lou Ana [®]	Paul A. Doerle Wholesale Co.	
Filter Sheets	Disposable, nonwoven fiber	Lab Products, Inc. (Rochelle Park, NJ)	
Bedding	Absorb Dri hardwood chips	Lab Products, Inc. (Garfield, NJ)	
Watering System	Edstrom Automatic	Edstrom Industries (Waterford, WI)	

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present were determined by vapor-phase chromatography (Appendix G). Vinylidene chloride at 1% w/v in corn oil was found to be stable for 7 days at room temperature.

Every 2 or 3 months, randomly selected batches of vinylidene chloride - corn oil were analyzed as described in Appendix H. The mean concentration (+ standard deviation) of 12 samples, measured in duplicate and containing a theoretical level of 1 mg/ml, was 0.97 + 0.053 mg/ml.

C. Animals

Four-week-old F344/N rats and B6C3F1/N mice were each obtained in single shipments from the NCI Frederick Cancer Research Center (Frederick, MD), observed for 5 weeks for the presence of parasites or other diseases, and then assigned to control or dosed groups according to a table of random numbers.

D. Animal Maintenance

Rats and mice were housed five per cage in solid bottom polycarbonate cages covered with spun bonded fiberglass filter sheets and supplied with hardwood chip bedding (Table 1). Cages and bedding were changed twice per week. Diets of Wayne[®] Lab Blox and tap water via an Edstrom automatic watering system were provided <u>ad libitum</u>. Feed hoppers were changed once per week.

Animal rooms were maintained at $23^{\circ} \pm 2^{\circ}C$ and the relative humidity was 40%-70%. Incoming air was provided at a rate sufficient to give 10-12 changes of room air per hour. Fluorescent lighting was provided 12 hours per day.

All rats and mice were housed in the same room. No other chemicals were on test in that room.

E. Range-Finding and Repeated-Dose Studies

A single-dose range-finding study was conducted to determine the doses for the 14-day repeated-dose study (Table 2). Vinylidene chloride was diluted in corn oil and administered by gavage to groups of five males and five females of each species at each of the dose levels. The animals were observed for 14 days and then killed and necropsied on day 15.

One female rat receiving 500 mg/kg died. One male rat that received 10 mg/kg died after 7 days and two that received 1,000 mg/kg died within 48 hours.

All male mice receiving 500 or 1,000 mg/kg died. Among the female mice, 1/5 receiving 50 mg/kg, 3/5 receiving 500 mg/kg, and 5/5 receiving 1,000 mg/kg died.

Fourteen-day repeated-dose studies were conducted to determine the doses to be used in the 90-day studies. Groups of five males and five females of each species were administered vinylidene chloride in corn oil by gavage, daily for 14 days. Animals were weighed at 0, 7, and 14 days. On day 16, all survivors were killed and necropsied. Doses administered, survival, and mean body weights of the dosed and control groups are shown in Tables 3 and 4.

Four of 5 male rats receiving 1,000 mg/kg, 3/5 female rats receiving 500 mg/kg, and 3/5 female rats receiving 1,000 mg/kg died within 48 hours. All were hyporeactive. Weight gain of male rats receiving 500 mg/kg was depressed 28%; the only surviving male rat that received 1,000 mg/kg lost weight. A dose-related decrease in mean body weight gain was observed in female rats. Weight gain was depressed 62% and 129% in females receiving 500 or 1,000 mg/kg, respectively. Hemorrhagic necrosis of the liver was observed in all the rats that died.

All the mice receiving 500 mg/kg died. Before death, they exhibited hyporeactivity, a staggering gait, and rapid breathing. Hemorrhagic

	Dose	Survi	val (a)	
	(mg/kg)	Male	Female	
Rats				
	0	5/5	5/5	
	10	4/5	5/5	
	50	5/5	5/5	
	100	5/5	5/5	
	500	5/5	4/5	
	1,000	3/5	5/5	
Mice				
	0	5/5	5/5	
	10	5/5	5/5	
	50	5/5	4/5	
	100	5/5	5/5	
	500	0/5	2/5	
	1,000	0/5	0/5	

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Table 2. Dosage and Survival of Rats and Mice Administered a Single Dose of Vinylidene Chloride in Corn Oil by Gavage

a) Number surviving/number per group

Dose		Mean	Mean Body Weights (grams)		
(mg/kg)	Survival(a) Initial	Final	Change(b)	Controls (%)(c)
Male					
0	5/5	116.8 <u>+</u> 6.57	163.4 <u>+</u> 6.79	46.6 <u>+</u> 7.77	
10	5/5	110.6 <u>+</u> 4.83	165.4 <u>+</u> 9.24	54.8 <u>+</u> 4.72	+ 17.6
50	5/5	112.0 <u>+</u> 1.79	158.2 <u>+</u> 4.39	46.2 <u>+</u> 3.25	- 0.9
100	5/5	109.0 <u>+</u> 4.68	151.8 <u>+</u> 9.58	42.6 <u>+</u> 9.11	- 8.6
50Q	5/5	114.0 <u>+</u> 5.08	147.4 <u>+</u> 2.25	33.4 <u>+</u> 5.36	- 28.3
1,000	1/5	118.0 <u>+</u> 0.00	114.0 <u>+</u> 0.00	-4.0 ± 0.00	-108.6
Female	·				
0	5/5	94.6 <u>+</u> 4.46	120.6 + 8.62	26.0 <u>+</u> 5.06	
10	5/5	97.2 <u>+</u> 3.47	126.2 <u>+</u> 1.56	29.0 <u>+</u> 2.39	+ 11.5
50	5/5	97.0 <u>+</u> 3.16	121.6 <u>+</u> 3.33	24.6 <u>+</u> 4.02	- 5.4
100	5/5	97.4 <u>+</u> 2.48	120.4 <u>+</u> 3.14	23.0 <u>+</u> 1.79	- 11.5
500	2/5	102.0 <u>+</u> 6.00	112.0 <u>+</u> 11.00	10.0 <u>+</u> 5.00	- 61.5
1,000	2/5	100.5 <u>+</u> 0.50	93.0 <u>+</u> 7.00	-7.5 <u>+</u> 6.50	-128.8

Table 3. Dosage, Survival, and Mean Body Weights of Rats Administered Vinylidene Chloride by Gavage for 14 Days

- (a) Number surviving/number initially in the group. All calculations are based on those animals surviving to the end of the study.
- (b) Mean weight change of the survivors of the group + standard error of the mean.
- (c) Weight change of the dosed survivors relative to the survivors of the controls =

Weight Change (Dosed Group) - Weight Change (Control Group) x 100 Weight Change (Control Group)

					X
_					Weight Change
Dose			Body Weights (
(mg/kg)	Survival(a)	Initial	Final	Change(b)	Controls (%)(c)
Male					
0	5/5 22	2.2 <u>+</u> 0.37	24.8 <u>+</u> 0.37	2.6 <u>+</u> 0.40	
5	5/5 2:	2.0 <u>+</u> 0.32	23.4 <u>+</u> 0.40	1.4 ± 0.40	- 46.2
10	5/5 23	3.0 <u>+</u> 0.84	25.8 <u>+</u> 0.86	2.8 ± 0.66	+ 7.7
50	5/5 23	2.2 <u>+</u> 0.80	24.8 <u>+</u> 0.97	2.6 ± 0.51	0.0
100	5/5 2	2.8 <u>+</u> 0.37	24.0 <u>+</u> 0.32	1.2 <u>+</u> 0.20	- 53.8
500	0/5	(d)	(b)	(b)	
Female					
0	5/5 20	0.2 <u>+</u> 0.20	21.6 <u>+</u> 0.40	1.4 <u>+</u> 0.40	
5	5/5 20	0.6 <u>+</u> 0.40	21.2 <u>+</u> 0.20	0.6 <u>+</u> 0.40	- 57.1
10	5/5 20	0.4 <u>+</u> 0.40	21.0 <u>+</u> 0.63	0.6 <u>+</u> 0.60	- 57.1
50	5/5 20	0.4 <u>+</u> 0.24	21.0 ± 0.32	0.6 <u>+</u> 0.24	- 57.1
100	5/5 2	1.0 <u>+</u> 0.32	22.2 <u>+</u> 0.49	1.2 <u>+</u> 0.73	- 14.3
500	0/5	(d)	(b)	(b)	
			يون جيمير ويون ميرون		
					calculations are
			ing to the end vivors of the		ard error of the
mean	•				
-	ht change of rols =	the dosed s	survivors relat	tive to the s	survivors of the

Table 4. Dosage, Survival, and Mean Body Weights of Mice Administered Vinylidene Chloride by Gavage for 14 Days

•

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

Weight Change (Dosed Group) - Weight Change (Control Group) x 100 Weight Change (Control Group) necrosis of the liver was seen at necropsy. No compound-related histopathologic effects were observed in the mice.

F. Subchronic Studies

A 90-day subchronic study was conducted to determine the doses of vinylidene chloride to be used in the 2-year chronic study. Groups of 10 rats and 10 mice of either sex were administered vinylidene chloride in corn oil by gavage 5 times per week at 0, 5, 15, 40, 100, or 250 mg/kg body weight for 13 weeks. Vehicle control groups consisting of 10 males and 10 females of each species received corn oil alone. After 90 days, the rats and mice were killed using carbon dioxide and necropsied.

Representative tissues (see Section H) from rats and mice receiving 250 mg/kg, from mice receiving 100 mg/kg, and from control animals were examined microscopically. Livers from all other dosed groups were also examined. The doses administered, the survival of animals in each dosed group at the end of the study, and the mean body weights at week 13 are shown in Tables 5 and 6.

<u>Rats</u>: Three female rats receiving 250 mg/kg died during the first week. No other rats died. Weight gain was depressed 20% for male rats receiving 250 mg/kg compared with controls.

Severe centrilobular necrosis of the liver was observed in the 3 female rats that died. Minimal to moderate hepatocytomegaly was seen in the rest of the rats that received 250 mg/kg. Lesser degrees (minimal to mild) of hepatocytomegaly were seen in 6 of 10 male rats and 3 of 10 female rats that received 100 mg/kg. Various combinations of portal and subcapsular fibrosis, bile duct hyperplasia, pigmented macrophages, and hepatocellular atrophy were seen in all male rats (mild to severe in 9 of 10 and minimal in 1 of 10) and in 7 of 10 female rats (mild to moderate in 6 of 10 and minimal in 1 of 10) receiving 250 mg/kg. The rats receiving 100 mg/kg were affected to a much lesser degree, both in numbers and in severity. Foci of cytoplasmic change, primarily clear cell foci, (as defined under foci of cellular alteration of hepatocytes, Squire and Levitt, 1975) were seen in 3

of 10 males and 3 of 10 females receiving 250 mg/kg. Fatty metamorphosis or cytoplasmic vacuolization or both, usually in minimal or mild degrees of severity, occurred in the animals of most groups but had no distinct dose relationship (Table 7).

Original examination of the lesions in the rat livers placed more emphasis on the changes seen in the animals at the lower doses whereas a review interpreted these changes as being much less important. Thus, the doses of 1 and 5 mg/kg of body weight, which were selected for the chronic study and were originally based on hepatotoxic effects, were probably too low.

Dose		Mean Bo	dy Weights (grams)	Weight Change Relative to
(mg/kg)	Survival(a)	Initial	Final	Change	Controls (%)(b)
Male	naginalisining ang ang ang ang ang ang ang ang ang a		anders and a state of a		
0	10/10	118	316	+1 98	
5	10/10	115	307	+1 92	- 3
15	10/10	115	306	+191	- 4
40	10/10	119	302	+1 83	- 8
100	10/10	117	299	+182	- 8
250	10/10	117	276	+159	-20
Female					
0	10/10	95	200	+105	
5	10/10	93	193	+100	- 5
15	10/10	93	1 98	+105	0
40	10/10	97	194	+ 97	- 8
100	10/10	95	194	+ 99	- 6
250	7/10	9 7	190	+ 93	-11

Table 5.	Dosage, Survival, and Mean Body Weights of Rats Administered
	Vinylidene Chloride by Gavage for 13 Weeks

(a) Number surviving/number per group

(b) Weight Change Relative to Controls =

Weight Change (Dosed Group) - Weight Change (Control Group) x 100 Weight Change (Control Group)

Dose		Mean	Body Weights	Weight Change Relative to		
(mg/kg)	Survival(a)		Final	Change	Controls (%)(b)	
Male						
0	10/10	21	35	+14		
5	10/10	21	35	+14	0	
15	10/10	21	34	+13	- 7	
40	9/10	21	33	+12	-14	
100	8/10	21	30	+ 9	-36	
250	0/10	21				
Female						
0	10/10	18	24	+ 6		
5	9/10	19	23	+ 4	-33	
15	9/10	18	23	+ 5	-17	
40	10/10	18	23	+ 5	-17	
100	7/10	18	23	+ 5	-17	
250	1/10	20	26	+ 6	0	

Table 6.	Dosage, Survival	, and Mean Body	Weights of Mice	Administered
	Vinylidene Chlor	ide by Gavage f	or 13 Weeks	

(a) Number surviving/number per group(b) Weight Change Relative to Controls =

Weight Change (Dosed Group) - Weight Change (Control Group) x 100 Weight Change (Control Group)

Dose (mg/kg)	C	Controls		5		15		40		100	2	250	
Sex		M	F		F	M	F	M	FN	1 F	M	F	
Rats													
No. examined	9	10	10	10	10	10	10	10	10	10	10	10	
Centrilobular necrosis	0	0	0	0	0	0	0	0	0	0	0	3	
Fibrosis, pigmentation, bile duct hyperplasia, hepatocellular atrophy	0	0	0	0	0	0	0	0	3	4	10	7	
Fatty metamorphosis	4	0	7	5	7	7	8	3	2	2	0	1	
Hepatocytomegaly	0	0	0	0	0	0	1	0	6	3	10	7	
Foci of cytoplasmic change (cellular alteration)	0	0	0	0	<u>0</u>	0	0	0	0	0	3	3	
Mice													
No. examined	10	10	10	10	10	10	10	10	10	10	10	10	
Cellular necrosis	0	0	0	0	0	0	- 0	0	2	2	5	5	
Congestion	0	0	0	0	0	0	2	0	0	0	8	2	
Necrosis, NOS	0	0	0	0	0	0	0	0	0	0	2	0	
Cellular atypia	0	0	0	0	0	0	2	0	7	6	0	0	
Fatty metamorphosis	0	0	0	1	2	0	2	2	0	0	0	0	
Focal area of cellular alteration	0	0	1	0	0	0	0	0	0	0	0	0	

Table 7. Incidence of Liver Lesions in Rats and Mice Administered Vinylidene Chloride by Gavage for 13 Weeks

.

<u>Mice</u>: All males receiving 250 mg/kg died within 24 hours; 9/10 females receiving 250 mg/kg died within 48 hours. Deaths occurred in 1/10 females receiving 5 mg/kg; 1/10 females receiving 15 mg/kg; 1/10 males receiving 40 mg/kg; and 2/10 males and 3/10 females receiving 100 mg/kg. A dose-related decrease in mean body weight gain was observed for male mice.

Centrilobular necrosis, hemorrhage, and congestion of the liver were observed in the males and females that died in the 250 mg/kg dose groups. Cellular atypia of the liver (less severe than that seen in the rats) was observed in 7/10 males and 6/10 females receiving 100 mg/kg but not in animals receiving 250 mg/kg. At 40, 15, and 5 mg/kg levels, severity of hepatic lesions was dose related. The incidence of hepatic lesions in males was dose related and was higher than that in females. The most frequently encountered change in mice exposed to 40 mg/kg or less was slight, sometimes moderate, fatty metamorphosis. Patchy foci of one or a few smaller cells with sparse cytoplasm were encountered much less frequently in mice than in rats.

Hepatic effects were considered to be minimal at 5 mg/kg, and doses selected for the mice for the chronic study were 2 and 10 mg/kg body weight.

G. Chronic Studies

The number of animals in test groups, doses administered, and durations of the chronic studies are shown in Table 8.

H. Clinical Examinations and Pathology

Mortality and morbidity checks were made twice daily and animals were weighed every 2 weeks. Animals that were moribund and those that survived to the end of the study were killed using carbon dioxide and necropsied.

Gross and microscopic examinations were performed on major tissues, major organs, and all gross lesions from killed animals and from animals found dead unless precluded in whole or in part by autolysis or cannibalization. Thus,

	Initial		Weeks on Study			
Test	No. of	Dose (a)	Dosed	Not		
Group	Animals	(mg/kg)		Dosed		
Male Rats						
Vehicle-Control	50(Ъ)	0	0	104		
Low-Dose	50	1	104	0		
High-Dose	50	5	104	0		
Female Rats						
Vehicle-Control	50(Ъ)	0	0	104		
Low-Dose	50	1	104	0		
High-Dose	50	5	104	0		
Male Mice						
Vehicle-Control	50(Ъ)	0	0	104		
Low-Dose	50	2	104	0		
High-Dose	50	10	104	0		
Female Mice						
Vehicle-Control	50(Ъ)	0	0	104		
Low-Dose	50	2	104	0		
High-Dose	50	10	104	0		

Table 8. Experimental Design of Chronic Vinylidene Chloride Gavage Studies in Rats and Mice

(a) Doses were administered 5 times per week.

(b) Vehicle controls received corn oil alone.

The number of animals from which particular organs or tissues were examined microscopically varies and does not necessarily represent the number of animals that were placed on study in each group. Tissues were preserved in 10% neutral buffered formalin, embedded in paraffin, sectioned, and stained with hematoxylin and eosin.

The following were examined microscopically: skin, lungs and bronchi, trachea, bone and bone marrow, spleen, lymph nodes, heart, salivary gland, liver, pancreas, stomach, small intestine, large intestine, kidneys, urinary bladder, pituitary, adrenal, thyroid, parathyroid, mammary gland, prostate and seminal vesicles or uterus, testis or ovary, brain, thymus, larynx, and esophagus.

I. Data Recording and Statistical Analyses

Data on this experiment were recorded in the Carcinogenesis Bioassay Data System (Linhart et al., 1974). The data elements include descriptive information on the chemicals, animals, experimental design, clinical observations, survival, body weight, and individual pathologic results, as recommended by the International Union Against Cancer (Berenblum, 1969).

Probabilities of survival were estimated by the product-limit procedure of Kaplan and Meier (1958) and are presented in this report in the form of graphs. Animals were statistically censored as of the time they died of other than natural causes or were found to be missing; animals dying from natural causes were not statistically censored. Statistical analyses for a possible dose-related effect on survival used the method of Cox (1972) for testing two groups for equality and Tarone's (1975) extension of Cox's methods for testing for a dose-related trend. One-tailed P values have been reported for all tests except the departure from linearity test, which is reported only when its two-tailed P value is less than 0.05.

The incidence of neoplastic or nonneoplastic lesions has been given as the ratio of the number of animals bearing such lesions at a specific anatomic site (numerator) to the number of animals in which that site is

examined (denominator). In most instances, the denominators include only those animals for which that site was examined histologically. However, when macroscopic examination was required to detect lesions prior to histological sampling (e.g., skin or mammary tumors) or when lesions could have appeared at multiple sites (e.g., lymphomas), the denominators consist of the numbers of animals necropsied.

The purpose of the statistical analyses of tumor incidence is to determine whether animals receiving the test chemical developed a significantly higher proportion of tumors than did the control animals. As part of these analyses, the one-tailed Fisher exact test (Cox, 1970) was used to compare the tumor incidence of a control group with that of a group of dosed animals at each level. When results for two dosed groups were compared simultaneously with those for a control group, a correction to ensure an overall significance level of 0.05 is made. The Bonferroni inequality criterion (Miller, 1966) requires that the P value for any comparison be less than or equal to 0.025. When this correction was used, it is discussed in the narrative section. It is not presented in the tables, where the Fisher exact P values are shown.

.

The Cochran-Armitage test for linear trend in proportions, with continuity correction (Armitage, 1971), was also used. Under the assumption of a linear trend, this test determines if the slope of the dose-response curve is different from zero at the one-tailed 0.05 level of significance. Unless otherwise noted, the direction of the significant trend is a positive dose relationship. This method also provides a two-tailed test of departure from linear trend.

A time-adjusted analysis was used. Deaths that occurred before the first tumor was observed were excluded by basing the statistical tests on animals that survived at least 52 weeks, unless a tumor was found at an anatomic site of interest before week 52. When such an early tumor was found, comparisons were based exclusively on animals that survived at least as long as the animal in which the first tumor was found. Once this reduced set of data was obtained, the standard procedures for analyses of the

incidence of tumors (Fisher exact tests, Cochran-Armitage tests, etc.) were followed.

Life table methods were used to analyze the incidence of tumors. These analyses included data from animals killed at the end of the study. Curves of the proportions surviving without an observed tumor were computed as in Saffiotti et al. (1972). The week during which an animal died naturally or was killed was entered as the time point of examination for tumors. The methods of Cox and of Tarone were used for the statistical tests of the groups. The statistical tests were one-tailed.

III. RESULTS - RATS

A. Body Weights and Clinical Signs (Rats)

Mean body weights of dosed and control rats of either sex were comparable throughout the study (Figure 1 and Table 9). No compound-related clinical signs were observed.

B. Survival (Rats)

Estimates of the probabilities of survival of male and female rats administered vinylidene chloride by gavage at the doses of this bioassay, together with those of the control group, are shown by the Kaplan and Meier curves in Figure 2. While no significant differences in probability of survival were observed in any group of either sex of rats, 12 control and 10 low-dose males were accidentally killed during week 82 of the study as a result of a 5-hour temperature excursion to 37°C and 1 low-dose male was accidentally killed during the 42nd week. These animals were censored in the survival analysis but were examined histopathologically.

In male rats, 20/50 (40%) of the vehicle controls, 24/50 (48%) of the low-dose, and 37/50 (74%) of the high-dose group lived to the end of the study at 104 weeks. In female rats, 27/50 (54%) of the vehicle controls, 28/50 (56%) of the low-dose, and 29/50 (58%) of the high-dose group lived to the end of the study at 104 weeks.

The large number of accidental deaths in the control and low-dose male rats may have influenced the incidence of late appearing tumors in these groups.

C. Pathology (Rats)

Histopathologic findings on neoplasms in rats are summarized in Appendix A, Tables A1 and A2; Tables A3 and A4 give the survival and tumor status for each individual animal in the male and female rat studies, respectively.

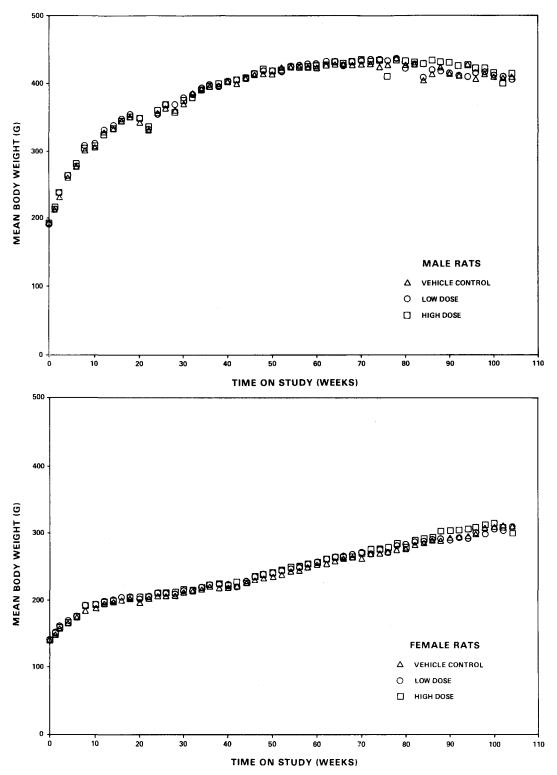


Figure 1. Growth Curves for Rats Administered Vinylidene Chloride by Gavage

		Mean	Body Weight (grams)	-	Weight Char to Controls	-
	Week No.	Control			Low Dose	
Male						
Rats	0	191(b)	190(b)	193(Ъ)		
	1	20	23	24	+15	+20
	20	150	160	157	+ 7	+ 5
	40	210	214	210	+ 2	0
	60	230	239	233	+ 4	+ 1
	80	2 36	232	240	- 2	+ 2
	100	218	222	223	+ 2	+ 2
Female		ير. 2014 وير. 2014 وير. 20 ¹⁴ وير. 2017 وير. 2016 وير. 2016 وير.	1997 - Barrier Barren (B. 1997) 1997 - Barrier Barrier (B. 1997) 1997 - Barrier (B. 1997)		an	• • • • • • • • • • • • • • • • • • • •
Rats	0	139(Ъ)	140(Ъ)	1 39(b)		
	1	10	12	12	+20	+20
	20	56	82	66	+46	+18
	40	79	84	83	+ 6	+ 5
	60	114	117	118	+ 3	+.4
	80	143	147	150	+ 3	+ 5
	100	170	166	176	- 2	+ 4

Table 9. Mean Body Weight Change (Relative to Controls) of Rats Administered Vinylidene Chloride by Gavage

(a) Weight Change Relative to Controls =

Weight Change (Dosed Group) - Weight Change (Control Group) x 100 Weight Change (Control Group)

(b) Initial weight

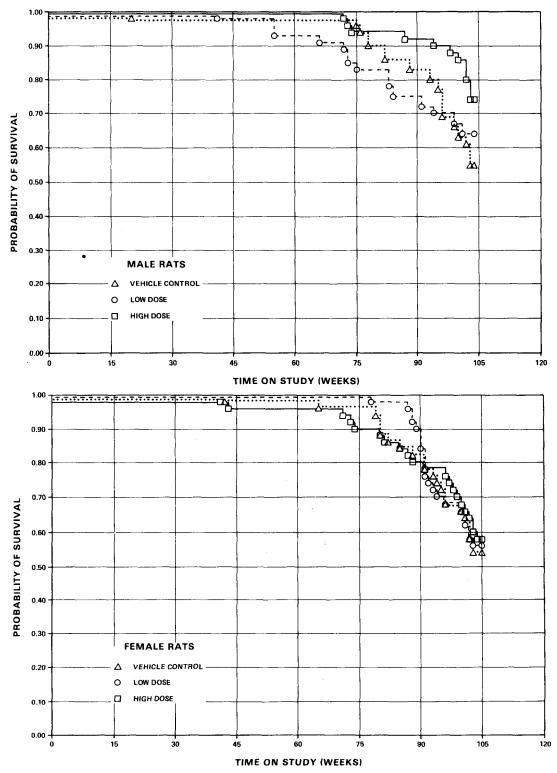


Figure 2. Survival Curves for Rats Administered Vinylidene Chloride by Gavage

Findings on nonneoplastic lesions are summarized in Appendix C, Tables Cl and C2.

The tumors encountered were those commonly found in aging rats of this strain. They occurred in comparable numbers in test animals and controls and were not considered to be related to administration of the test compound (Goodman et al., 1979).

Several nonneoplastic lesions of possible significance were observed. The incidence of chronic inflammation of the kidney in both male and female rats was higher in high-dose animals than in controls (males: controls = 26/50, 52%; low-dose = 24/48, 50%; and high-dose = 43/48, 90%; females: controls = 3/49, 6%; low dose = 6/49, 12%; and high-dose = 9/44, 20%). Although the occurrence of chronic nephritis appears to be dose related, this lesion is common in aging rats.

D. Statistical Analyses of Results (Rats)

Tables 10 and 11 contain the results of Fisher's exact tests and Cochran-Armitage trend tests for those primary tumors whose incidence was 5% or greater in at least one of the three groups. Because of the many early deaths in the control and low-dose male rat groups, life table analyses of primary tumor incidence were also carried out. These procedures adjust for intercurrent mortality and thus minimize the influence of animals dying before the onset of late-appearing tumors. The results of these analyses are summarized in Table 12 for those tumors showing a significant increase by the "unadjusted" analyses reported in Tables 10 and 11.

Pheochromocytomas of the adrenal in male rats were observed in increased incidence in the high-dose group compared with the control group (6/50, 12% in the controls; 5/48, 10% in the low-dose; and 13/47, 28% in the high-dose). The Cochran-Armitage test for linear trend was statistically significant in the positive direction (P=0.010). The Fisher exact test between the high-dose group and the control group indicated a value of P=0.045. Analyses of these data by life table methods produced no statistically significant

results. The historical incidence of this tumor at this laboratory in untreated male F344 rats is 32/400 (8%), while the incidence in vehicle control (corn oil) male rats across the bioassay program is 13/125, 10.4%. In female rats, this tumor was not observed in statistically significant proportions.

Islet-cell adenomas or carcinomas of the pancreatic islets in male rats were observed in increased incidence in the high-dose group (4/49, 8% in the controls; 1/47, 2% in the low-dose; and 8/48, 17% in the high-dose). The Cochran-Armitage test for linear trend was statistically significant in the positive direction (P=0.025), but the Fisher exact tests were not significant. Analyses of these data by life table methods revealed no statistically significant results. These tumors have been observed in 18/400 (4.5%) of the untreated male rats at this laboratory and in 6/125 (4.8%) of the male vehicle control (corn oil) rats in the Bioassay Program. In female rats, this tumor was not observed in statistically significant proportions.

Interstitial-cell tumors of the testis were observed in increased incidence in the high-dose group compared with the control group (43/50, 86% in the controls; 39/47, 83% in the low-dose; and 47/48, 98% in the high-dose). The Cochran-Armitage test for linear trend was statistically significant in the positive direction (P=0.013). The Fisher exact test between the highdose group and the control group indicated a value of P=0.034, but this high-dose effect is not statistically significant if age-adjusted analyses are used which eliminate those animals that died before 52 weeks (life table analyses are not appropriate for this tumor, since this lesion is not generally regarded as life-threatening). This tumor has been observed at incidences as high as 100% in untreated control groups at this laboratory.

Adenomas of the pituitary were observed in increased incidence in the high-dose female rats compared with the controls (16/48, 33%) in the controls; 20/49, 41\% in the low-dose; 24/43, 56\% in the high-dose). The Cochran-Armitage test for linear trend was significant (P=0.017) and the Fisher exact

test between the high-dose and control groups was significant (P=0.026). The analysis of these data by life table methods revealed no statistically significant results. No significant differences are observed in the incidence of female rats with either adenomas or carcinomas of the pituitary. These tumors were not observed in statistically significant proportions in male rats.

Fibromas of the subcutaneous tissue were observed in increased incidence in the dosed groups of male rats compared with controls (0/50, 0%) in the controls; 1/48, 2% in the low-dose; 4/48, 8% in the high-dose). The Cochran-Armitage test for linear trend was statistically significant in the positive direction (P=0.024), but the Fisher exact tests were not significant. Analyses of these data by life table methods revealed no statistically significant results. Fibromas of the skin have been observed in 58/2,230 (2.6%) of the untreated male F344 rats and in 5/125 (4%) of the male vehicle control F344 rats receiving corn oil by gavage in the bioassay program.

Leukemia (morphology unspecified) in female rats was observed in decreased incidence in the dosed groups compared with the controls (10/49, 20%)in the controls; 3/50, 6% in the low-dose; 4/45, 9% in the high-dose). The Fisher exact test between the low-dose and control groups was significant in the negative direction (P=0.033). The Cochran-Armitage test for linear trend was not significant, but there was a departure from linear trend (P=0.041) due to the reduced incidence in the low-dose group compared with the highdose and control group. Female rats with either lymphomas or leukemias of the hematopoietic system were observed in decreased proportions in the dosed groups compared with the controls (13/49, 27%) in the controls; 7/50, 14% in the low-dose; 5/45, 11% in the high-dose). The Fisher exact test between the high-dose and control groups is significant in the negative direction (P=0.050). The incidence in the low-dose group was not significant. These tumors were not observed in statistically significant proportions in male rats.

Neoplastic nodules of the liver in female rats were observed in decreased incidence in dosed groups (4/49, 8%) in the controls; 0/50, 0% in the lowdose; 0/45, 0% in the high-dose), but the Fisher exact tests were not significant. In male rats, liver tumors were not observed in statistically significant proportions.

All of the increased tumor incidences that were statistically significant by the Fisher exact test or by the Cochran-Armitage linear trend test were not significant when life table analyses were used. This difference occurs because life table analyses adjust for intercurrent mortality and thus they minimize the impact of animals dying before the onset of lateappearing tumors. This adjustment was particularly critical for the analyses of tumor incidences in male rats because 12 controls and 10 low-dose animals were accidentally killed during week 82 of the study.

		Low	•
Topography: Morphology		Dose	
Subcutaneous Tissue:			
Fibroma (b)	0/50(0)	1/48(2)	4/48(8)
P Values (c),(d)	P=0.024	N.S.	N.S.
Relative Risk (e)		Infinite	
Lower Limit		0.056	0.966 Infinite
Upper Limit		Infinite	Infinite
Weeks to First Observed Tumor		99	94
Lung: Alveolar/Bronchiolar			ander ander ander ander en
Adenoma or Carcinoma (b)	3/50(6)	2/47(4)	0/47(0)
P Values (c),(d)	N.S.	N.S.	N.S.
Relative Risk (e)		0.709	0.000
Lower Limit		0.061	0.000
Upper Limit		5.913	1.766
	82	73	
Hematopoietic System:			
Leukemia, NOS (b)	7/50(14)	4/48(8)	8/48(17)
P Values (c),(d)	N.S.	N.S.	N.S.
Relative Risk (e)		0.595	
Lower Limit		0.136	
Upper Limit		2.182	3.557
Weeks to First Observed Tumor	82	73	100

(continued)	ور هدرهی.مدارید اور هر اور مراجع می بود.		
Topography: Morphology		Low Dose	
Hematopoietic System: Leukemia (b)	8/50(16)		
P Values (c),(d)	N.S.	N.S.	N.S.
Relative Risk (e) Lower Limit Upper Limit		0.521 0.122 1.806	1.042 0.370 2.925
	82	73	100
Liver: Neoplastic Nodule or Hepatocellular Carcinoma (b)	1/49(2)		3/45(7)
P Values (c),(d)	N.S.	N.S.	N.S.
Relative Risk (e) Lower Limit Upper Limit		3.063 0.257 157.336	3.267 0.274 167.567
	103	104	104
Pituitary: Adenoma, NOS (b)		10/47(21)	10/44(23)
P Values (c),(d)	N.S.	N.S.	N.S.
Relative Risk (e) Lower Limit Upper Limit		1.489 0.560 4.225	1.591 0.599 4.490
Weeks to First Observed Tumor	75	66	102

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Topography: Morphology	Control		Dose
Pituitary: Adenoma, NOS or Carcinoma, NOS (b)		10/47(21)	
P Values (c),(d)	N.S.	N.S.	N.S.
Relative Risk (e) Lower Limit Upper Limit		1.489 0.560 4.225	0.681
	75	66	102
Adrenal: Pheochromocytoma (b)		5/48(10)	13/47(28)
P Values (c),(d)	P=0.010	N.S.	P=0.045
Relative Risk (e) Lower Limit Upper Limit		0.868 0.224 3.185	2.305 0.897 6.772
Weeks to First Observed Tumor		104	
Thyroid: C-Cell Adenoma (b)		1/46(2)	
P Values (c),(d)	N.S.	N.S.	N.S.
Relative Risk (e) Lower Limit Upper Limit			1.756 0.211 20.142
Weeks to First Observed Tumor	96	104	102

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(continued)			
Topography: Morphology	Vehicle Control	Low Dose	High Dose
Thyroid: C-Cell Carcinoma (b)	4/48(8)	2/46(4)	3/41(7)
P Values (c),(d)	N.S.	N.S.	N.S.
Relative Risk (e) Lower Limit Upper Limit		0.522 0.049 3.449	0.878 0.135 4.877
	104	104	
Thyroid: C-Cell Adenoma or Carcinoma (b)	6/48(13)		
P Values (c),(d)	N.S.	N.S.	N.S.
Relative Risk (e) Lower Limit Upper Limit		0.522 0.089 2.285	1.171 0.338 4.033
Weeks to First Observed Tumor		104	
Pancreatic Islets: Islet-Cell Carcinoma (b)	4/49(8)		
P Values (c),(d)	N.S.	N.S.	N.S.
Relative Risk (e) Lower Limit Upper Limit		0.261 0.005 2.507	1.531 0.388 6.946
Weeks to First Observed Tumor	96	104	104

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	Vehicle	Low	High
Fopography: Morphology	Control	Dose	Dose
Pancreatic Islets: Islet-Cell			
Adenoma or Carcinoma (b)	4/49(8)	1/47(2)	8/48(17)
? Values (c),(d)	P=0.025	N.S.	N.S.
Relative Risk (e)		0.261	2.042
Lower Limit		0.005	0.589
Upper Limit		2.507	8.659
Weeks to First Observed Tumor	96	104	
Preputial Gland: Carcinoma,			
NOS (b)	3/50(6)	3/48(6)	1/48(2)
P Values (c),(d)	N.S.	N.S.	N.S.
Relative Risk (e)		1.042	0.347
Lower Limit			0.007
Upper Limit		7.419	4.143
	76	72	104
Preputial Gland: Adenoma, NOS			a an ing ng n
or Carcinoma, NOS (b)	3/50(6)	4/48(8)	1/48(2)
P Values (c),(d)	N.S.	N.S.	N.S.
Relative Risk (e)		1.389	0.347
Lower Limit			0.007
Upper Limit		9.031	4.143
leeks to First Observed Tumor	76	72	104

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Table 10.	Analyses of the Incidence of Primary Tumors in Male Rats
	Administered Vinylidene Chloride by Gavage (a)

Topography: Morphology		Low Do se	High Dose
Testis: Interstitial-Cell Tumor (b)		39/47(83)	47/48(98)
P Values (c),(d)	P=0.013	N.S.	P=0.034
Relative Risk (e) Lower Limit Upper Limit		0.965 0.808 1.160	0.992
Weeks to First Observed Tumor	78	55	73
Prostate: Adenoma, NOS (b)		2/35(6)	2/32(6)
P Values (c),(d)	N.S.	N.S.	N.S.
Relative Risk (e) Lower Limit Upper Limit	·	0.629 0.049 8.199	0.688 0.054 8.931
Weeks to First Observed Tumor	104	104	104

(continued)

(a) Dosed groups received doses of 1 or 5 mg/kg by gavage.

(b) Number of tumor-bearing animals/number of animals examined at site (percent).

- (c) Beneath the incidence of tumors in the control group is the probability level for the Cochran-Armitage test when P is less than 0.05; otherwise, not significant (N.S.) is indicated. Beneath the incidence of tumors in a dosed group is the probability level for the Fisher exact test for the comparison of that dosed group with the vehicle-control group when P is less than 0.05; otherwise, not significant (N.S.) is indicated.
- (d) A negative trend (N) indicates a lower incidence in a dosed group than in a control group.
- (e) The 95 percent confidence interval of the relative risk between each dosed group and the control group.

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Topography: Morphology	Control	Low Dose	Dose
Lung: Alveolar/Bronchiolar Adenoma (b)		0/50(0)	
P Values (c),(d)	N.S.	N.S.	N.S.
Departure from Linear Trend (e)	P=0.038		
Relative Risk (f) Lower Limit Upper Limit		0.000 0.000 1.057	0.272 0.006 2.615
Weeks to First Observed Tumor			104
Lung: Alveolar/Bronchiolar Adenoma or Carcinoma (b)		1/50(2)	
P Values (c),(d)	N.S.	N.S.	N.S.
Relative Risk (f) Lower Limit Upper Limit		0.245 0.005 2.362	0.272 0.006 2.615
	95	104	104
Hematopoietic System: Leukemia, NOS (b)		3/50(6)	
P Values (c),(d)	N.S.		
Departure from Linear Trend (e)	P ≈0.041		
Relative Risk (f) Lower Limit Upper Limit		0.294 0.055 1.061	0.436 0.107 1.390
Weeks to First Observed Tumor	94	101	91

Topography: Morphology		Lo w Dose	High Dose
Hematopoietic System: All Leukemias (b)		6/50(12)	5/45(11)
	N.S.	N.S.	N.S.
P Values (c),(d)	N.J.	N.J.	N.5.
Relative Risk (f)		0.588	0.544
Lower Limit		0.190	0.157
Upper Limit		1.642	1.603
Weeks to First Observed Tumor	94	88	74
Hematopoietic System:			
All Lymphomas (b)	3/49(6)	1/50(2)	0/45(0)
P Values (c),(d)	N.S.	N.S.	N.S.
Relative Risk (f)		0.327	0.000
Lower Limit		0.006	0.000
Upper Limit		3.903	1.805
	82	102	
Hematopoietic System:			
All Lymphomas or Leukemias (b)	13/49(27)	7/50(14)	5/45(11)
P Values (c),(d)	N.S.	N.S.	P=0.050(N)
Relative Risk (f)		0.528	0.419
Lower Limit		0.195	0.127
Upper Limit		1.295	1.140
Weeks to First Observed Tumor	82	88	74

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Table 11.	Analyses of the Incidence of Primary Tumors in Female Rat	ts
	Administered Vinylidene Chloride by Gavage (a)	

(continued)			
	Vehicle	Low	High
Topography: Morphology	Control	Dose	Dose
Liver: Neoplastic Nodule (b)	4/49(8)	0/50(0)	0/45(0)
P Values (c),(d)	P=0.045(N)	N.S.	N.S.
Departure from Linear Trend (e)	P=0.030		
Relative Risk (f)		0.000	0.000
Lower Limit		0.000	0.000
Upper Limit		1.057	1.171
Weeks to First Observed Tumor	85		
Pituitary: Adenoma, NOS (b)	16/48(33)	20/49(41)	24/43(56)
P Values (c),(d)	P=0.017	N.S.	P=0.026
Relative Risk (f)		1.224	1.674
Lower Limit		0.692	0.998
Upper Limit		2.197	2.820
Weeks to First Observed Tumor	65	78	71
Pituitary: Carcinoma, NOS (b)	3/48(6)	1/49(2)	0/43(0)
P Values (c),(d)	N.S.	N.S.	N.S.
Relative Risk (f)		0.327	0.000
Lower Limit		0.006	0.000
Upper Limit		3.898	1.848
		104	

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Table 11.	Analyses of the Incidence of Primary Tumors in Female Ra	ts
	Administered Vinylidene Chloride by Gavage (a)	

Control	Dose	Dose
N.S.	N.S.	N.S.
	1.083 0.643 1.834	1.410 0.872 2.265
	78	71
		3/43(7)
N.S.	N.S.	N.S.
	0.290	0.673
	101	103
N.S.	N.S.	N.S.
	0.103	0.281
82	102	85
	Vehicle Control 19/48(40) N.S. 65 0/48(0) N.S. 1/48(2) N.S.	19/48(40) 21/49(43) N.S. N.S. 1.083 0.643 1.834 65 78 0/48(0) 2/49(4) N.S. N.S. Infinite 0.290 Infinite 101 1/48(2) 2/50(4) N.S. N.S. 1.920 0.103 110.993

Topography: Morphology	Vehicle Control	Low Dose	High Dose
Thyroid: C-Cell Carcinoma (b)	4/47(9)	1/47(2)	
P Values (c),(d)	N.S.	N.S.	N.S.
Relative Risk (f) Lower Limit Upper Limit		0.250 0.005 2.404	1.068 0.211 5.393
	104	104	104
Thyroid: C-Cell Adenoma or Carcinoma (b)	4/47(9)	2/47(4)	5/44(11)
P Values (c),(d)	N.S.	N.S.	N.S.
Relative Risk (f) Lower Limit Upper Limit		0.500 0.047 3.307	1.335 0.307 6.314
Weeks to First Observed Tumor	104	103	104
Thyroid: Follicular-Cell Adenoma or Carcinoma (b)	0/47(0)	1/47(2)	2/44(5)
P Values (c),(d)	N.S.	N.S.	N.S.
Relative Risk (f) Lower Limit Upper Limit		Infinite 0.054 Infinite	0.317
Weeks to First Observed Tumor		104	96

(continued)

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Table ll.	Analyses of the Incidence of Primary Tumors in Female Rat	S
	Administered Vinylidene Chloride by Gavage (a)	

Topography: Morphology	Control	Low Dose	•
Mammary Gland: Fibroadenoma (b)			9/45(20)
P Values (c),(d)	N.S.	N.S.	N.S.
Relative Risk (f) Lower Limit Upper Limit		1.143 0.549 2.424	
Weeks to First Observed Tumor	80	88	80
Uterus: Endometrial Stromal Polyp (b)		9/49(18)	
P Values (c),(d)	N.S.	N.S.	N.S.
Relative Risk (f) Lower Limit Upper Limit		0.735 0.302 1.719	0.354
Weeks to First Observed Tumor	82	91	85

(continued)

(a) Dosed groups received doses of 1 or 5 mg/kg by gavage.

(b) Number of tumor-bearing animals/number of animals examined at site (percent).

- (c) Beneath the incidence of tumors in the control group is the probability level for the Cochran-Armitage test when P is less than 0.05; otherwise, not significant (N.S.) is indicated. Beneath the incidence of tumors in a dosed group is the probability level for the Fisher exact test for the comparison of that dosed group with the vehicle-control group when P is less than 0.05; otherwise, not significant (N.S.) is indicated.
- (d) A negative trend (N) indicates a lower incidence in a dosed group than in a control group.

(e) The probability level for departure from linear trend is given when P is less than 0.05 for any comparison.

(f) The 95 percent confidence interval of the relative risk between each dosed group and the control group.

Primary Tumor	Dose-Response Trend	Low Dose versus Controls	High Dose versus Controls
Male:			
Adrenal			
Pheochromocytoma	6/50 (Ъ)	5/48 (Ъ)	13/47 (Ъ)
	(0.247) (c)	(0.396N) (d)	(0.422)
Pancreatic Islet-Cell	4/49	1/47	8/48
Carcinoma or Adenoma	(0.249)	(0.149N)	(0.588)
Subcutaneous	0/50	1/48	4/48
Fibroma	(0.114)	(0.508)	(0.162)
Female:			
Pituitary Adenoma	16/48	. 20/49	24/43
	(0.112)	(0.305)	(0.104)

Table 12. Results of Life Table Analysis on Those Primary Tumors Showing Significant (P < 0.05) Increases by "Unadjusted Analyses" (a) in the Two-Year Study of Vinylidene Chloride in Rats

(a) "Unadjusted" analyses refer to the Cochran-Armitage test and the Fisher exact test, which do not account for survival differences among groups.

(b) Number of animals with tumors/number of animals examined for that site. The tumor incidences are given for control, low-dose, and high-dose groups.

(c) Probability (P) value in parentheses.

(d) An N after a probability value indicates a lower incidence in dosed groups than in controls.

A. Body Weights and Clinical Signs (Mice)

Throughout most of the study, the mean body weights of dosed male mice were lower than those of the vehicle controls. Mean body weights of highdose and control female mice were comparable (Figure 3 and Table 13). Mean body weights of low-dose mice of either sex were lower than those of the high-dose or vehicle-control mice. No compound-related clinical signs were observed.

B. Survival (Mice)

Estimates of the probabilities of survival of male and female mice administered vinylidene chloride by gavage at the doses of this bioassay, together with those of the control group, are shown by the Kaplan and Meier curves in Figure 4. No significant differences in survival were observed between any group of male mice. A significant reduction in the survival of the low-dose group of female mice was observed when compared with the high-dose group.

In male mice, 33/50(66%) of the vehicle controls, 35/50(70%) of the low-dose, and 36/50(72%) of the high-dose group lived to the end of the study at 104 weeks. In female mice, 40/50(80%) of the vehicle controls, 32/50(64%) of the low-dose, and 42/50(84%) of the high-dose group lived to the end of the study at 104 weeks.

C. Pathology (Mice)

Histopathologic findings on neoplasms in mice are summarized in Appendix B, Tables Bl and B2; Tables B3 and B4 give the survival and tumor status for each individual animal in the male and female mouse studies, respectively. Findings on nonneoplastic lesions are summarized in Appendix D, Tables D1 and D2.

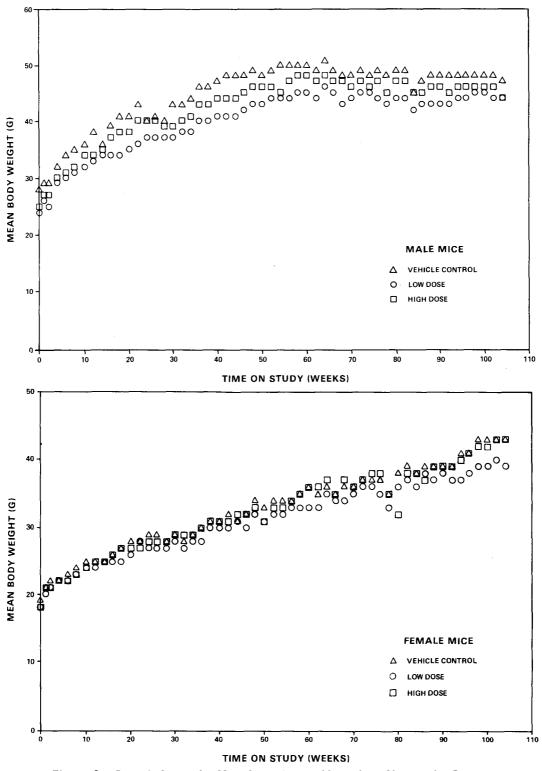


Figure 3. Growth Curves for Mice Administered Vinylidene Chloride by Gavage

		Mean	Body Weight (grams)	Change	Weight Cha to Controls	nge Relative (a)(percent)
	Week No.	Control	Low Dose	High Dose	Low Dose	High Dose
Male			4			
Mice	0	28(Ъ)	24(b)	25(Ъ)		
	ĩ	1	2	2	+100	+100
	20	13	11	13	- 15	0
	40	19	17	19	- 20	0
	60	22	21	23	- 5	+ 5
	80	21	20	22	- 5	+ 5
	100	20	21	21	+ 5	+ 5
Female						
Mice	0	19(Ъ)	18(b)	18(b)		
	1	2	2	3	0	+ 50
	20	9	8	9	- 11	0
	40	12	12	13	0	+ 8
	60	17	15	18	- 12	+ 6
	80	19	18	14	- 5	- 35
	100	24	21	24	- 13	0

Table 13.Mean Body Weight Change (Relative to Controls) of MiceAdministered Vinylidene Chloride by Gavage

(a) Weight Change Relative to Controls =

Weight Change (Dosed Group) - Weight Change (Control Group) x 100 Weight Change (Control Group)

(b) Initial weight

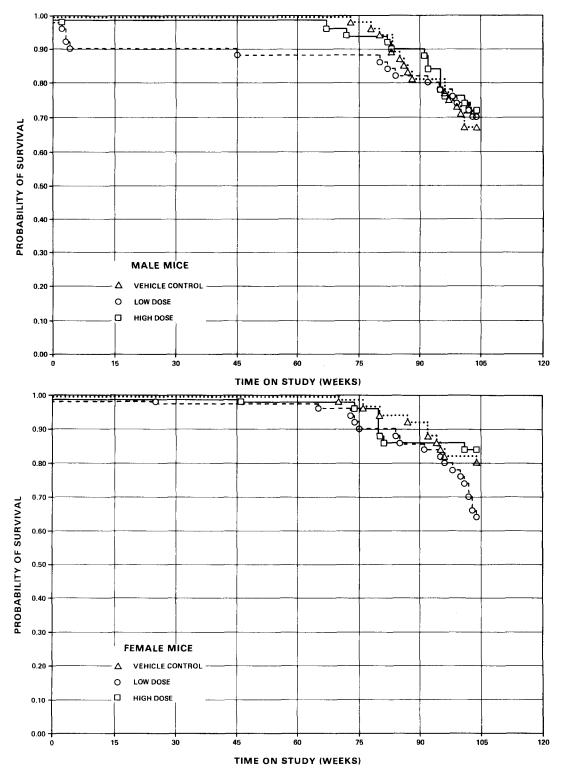


Figure 4. Survival Curves for Mice Administered Vinylidene Chloride by Gavage

Neoplastic lesions observed in the dosed mice were considered to be unrelated to administration of the test compound and within the usual incidence range seen in B6C3F1 control mice.

Necrosis of the liver (focal, multifocal, or diffuse) was observed more frequently in dosed mice than in controls (male controls, 1/46, 2%; low-dose 3/46, 7%; and high-dose, 7/49, 14%; female controls, 0/47, 0%; low-dose, 4/49, 8%; and high-dose, 1/49, 2%). The incidence of lung inflammation was slightly below that normally seen in 2-year-old B6C3F1 mice.

The results of the histopathologic examination indicated that, under the conditions of this bioassay, there was no evidence of carcinogenicity of vinylidene chloride in B6C3F1 mice.

D. Statistical Analyses of Results (Mice)

Tables 14 and 15 contain the statistical analyses of those primary tumors whose incidence was 5% or greater in at least one of the three groups.

Lymphomas of the hematopoietic system in female mice were observed in increased incidence in the low-dose group compared with the other two groups (2/48, 4% in the vehicle controls; 9/49, 18% in the low-dose; 6/50, 12% in the high dose). The Cochran-Armitage test for linear trend was not significant, but there was a departure from linear trend (P=0.033) due to the sharp increase of incidence in the low-dose group compared with the other two The Fisher exact test between the low-dose group and the vehicle groups. control group was significant (P=0.028). No significant incidence was observed in the high-dose group. When these data were analyzed by life table methods, the increased incidence of lymphomas in the low-dose group was statistically significant (P=0.012) but the incidence in the high-dose group and the dose-response trend were not significant. The incidence of lymphomas in female mice observed in this study (2/48, 4%) is less than the historical incidence for vehicle controls from all laboratories (31/315, 9.8%). Data are not yet available at this laboratory for other gavage

studies in which corn oil was used as the vehicle. In male mice, this tumor was not observed in statistically significant proportions.

Leukemia of the hematopoietic system in female mice was observed in decreased incidence in the high-dose group, compared with the controls (5/48, 10% in the controls; 7/49, 14% in the low-dose; and 1/50, 2% in the high-dose). The Cochran-Armitage test for linear trend was statistically significant in the negative direction (P=0.031), but the Fisher exact tests were not significant. In male mice, this tumor was not observed in statistically significant proportions.

Lymphomas or leukemia of the hematopoietic system in female mice were observed in increased incidence in the low-dose group compared with the vehicle controls (7/48, 15% in the controls; 15/49, 31% in the low-dose; 7/50, 14% in the high-dose). The Cochran-Armitage test for linear trend was not significant, but there was a departure from linear trend (P=0.029) due to the increase of incidence in the low-dose group. The Fisher exact test between the low-dose group and the vehicle controls was significant (P=0.05). No significant incidence was observed in the high-dose group. These tumors were not observed in statistically significant proportions in male mice.

Life table analyses (Table 16), using the death of an animal as the time point of examination for tumors, and time-adjusted tests, eliminating those animals that died before 52 weeks, did not materially affect the results reported in Tables 14 and 15.

Topography: Morphology	Vehicle Control	Low Dose	High Dose
Lung: Alveolar/Bronchiolar Adenoma (b)	3/46(7)	4/45(9)	4/46(9)
P Values (c),(d)	N.S.	N.S.	N.S.
Relative Risk (e) Lower Limit Upper Limit		1.363 0.244 8.829	1.333 0.239 8.645
	82	80	82
Lung: Alveolar/Bronchiolar Carcinoma (b)		1/45(2)	
P Values (c),(d)	N.S.	N.S.	N.S.
Relative Risk (e) Lower Limit Upper Limit		0.511 0.009 9.462	2.000 0.303 21.243
	97	104	
Lung: Alveolar/Bronchiolar Adenoma or Carcinoma (b)		5/45(11)	
P Values (c),(d)	N.S.	N.S.	N.S.
Relative Risk (e) Lower Limit Upper Limit		1.022 0.252 4.143	1.600 0.501 5.769
Weeks to First Observed Tumor	82	80	82

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Topography: Morphology		Low Dose	•
Hematopoietic System:			
Lymphoma, Malignant, NOS (b)	6/47(13)	3/47(6)	7/50(14)
P Values (c),(d)	N.S.	N.S.	N.S.
Relative Risk (e)		0.500	1.097
Lower Limit		0.085	0.341
Upper Limit		2.191	3.671
Weeks to First Observed Tumor	85	99	92
Hematopoietic System:			
All Malignant Lymphomas (b)	6/4/(13)	3/47(6)	8/50(16)
? Values (c),(d)	N.S.	N.S.	N.S.
Relative Risk (e)		0.500	1.253
Lower Limit			0.414
Upper Limit		2.191	4.065
Weeks to First Observed Tumor	85	99	92
Hematopoietic System:			
All Leukemias (b)	0/47(0)	3/47(6)	0/50(0)
Values (c),(d)	N.S.	N.S.	N.S.
Departure from Linear Trend (f)	P=0.018		
Relative Risk (e)		Infinite	
Lower Limit		0.603	
Upper Limit		Infinite	
leeks to First Observed Tumor		82	

(continued)

Topography: Morphology	Control	Low Dose	Dose
Hematopoietic System: All Lymphomas or Leukemias (b)			
P Values (c),(d)	N.S.	N.S.	N.S.
Relative Risk (e) Lower Limit Upper Limit		1.000 0.288 3.472	1.253 0.414 4.065
Weeks to First Observed Tumor	85	82	92
Circulatory System: Hemangioma (b)		3/47(6)	2/50(4)
P Values (c),(d)	N.S.	N.S.	N.S.
Relative Risk (e) Lower Limit Upper Limit		3.000 0.252 154.015	1.880 0.101 108.696
Weeks to First Observed Tumor	104	99	104
Circulatory System: Hemangioma or Hemangiosarcoma (b)	2/47(4)	3/47(6)	4/50(8)
P Values (c),(d)	N.S.	N.S.	N.S.
Relative Risk (e) Lower Limit Upper Limit			1.880 0.284 20.027
Weeks to First Observed Tumor	88	99	96

(continued)

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(continued)			
Topography: Morphology	Vehicle Control	Low Dose	High Dose
Liver: Hepatocellular Adenoma			(//0/10)
in the Absence of Carcinomas (b)	7/46(15)	4/46(9)	6/49(12)
P Values (c),(d)	N.S.	N.S.	N.S.
Relative Risk (e) Lower Limit Upper Limit		0.571 0.131 2.086	0.805 0.241 2.589
	104	104	95
Liver: Hepatocellular Carcinoma (b)	8/46(17)	5/46(11)	9/49(18)
P Values (c),(d)	N.S.	N.S.	N.S.
Relative Risk (Matched Control) (e) Lower Limit Upper Limit		0.625 0.173 1.997	1.056 0.397 2.880
Weeks to First Observed Tumor		80	83
Liver: Hepatocellular Adenoma or Carcinoma (b)	15/46(33)		
P Values (c),(d)	N.S.	N.S.	N.S.
Relative Risk (Matched Control) (e) Lower Limit Upper Limit		0.600 0.259 1.307	0.939 0.486 1.818
Weeks to First Observed Tumor	80	80	83
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Table 14. Analyses of the Incidence of Primary Tumors in Male Mice Administered Vinylidene Chloride by Gavage (a)

- (continued)
 (a) Dosed groups received doses of 2 or 10 mg/kg by gavage.
- (b) Number of tumor-bearing animals/number of animals examined at site (percent).
- (c) Beneath the incidence of tumors in the control group is the probability level for the Cochran-Armitage test when P is less than 0.05; otherwise, not significant (N.S.) is indicated. Beneath the incidence of tumors in a dosed group is the probability level for the Fisher exact test for the comparison of that dosed group with the vehicle-control group when P is less than 0.05; otherwise, not significant (N.S.) is indicated.
- (d) A negative trend (N) indicates a lower incidence in a dosed group than in a control group.
- (e) The 95 percent confidence interval of the relative risk between each dosed group and the control group.
- (f) The probability level for departure from linear trend is given when P is less than 0.05 for any comparison.

Topography: Morphology	Control	Low Dose	Dose
Lung: Alveolar/Bronchiolar Adenoma (b)	1/48(2)		
P Values (c),(d)	N.S.	N.S.	N.S.
Relative Risk (e) Lower Limit Upper Limit		1.067 0.014 81.900	4.000 0.416 192.630
		104	104
iematopoietic System: All Leukemias (b)		7/49(14)	
P Values (c),(d)	P=0.031(N)	N.S.	N.S.
Relative Risk (e) Lower Limit Upper Limit		1.371 0.403 5.119	0.192 0.004 1.630
Weeks to First Observed Tumor		91	74
Hematopoietic System: All Malignant Lymphomas (b)			
? Values (c),(d)	N.S.	P=0.028	N.S.
Departure from Linear Trend (f)	P=0.033		
Relative Risk (e) Lower Limit Upper Limit		4.408 0.977 40.199	2.880 0.547 28.073
Veeks to First Observed Tumor	104	100	104

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(continued)			
Topography: Morphology	•	Dose	
Hematopoietic System: All Lymphomas or Leukemias (b)		15/49(31)	
P Values (c),(d)	N.S.	P=0.050	
Departure from Linear Trend (f)	P=0.029		
Relative Risk (e) Lower Limit Upper Limit		2.099 0.891 5.531	
Weeks to First Observed Tumor			
Liver: Hepatocellular Adenoma: in the Absence of Carcinoma (b)			
P Values (c),(d)	N.S.	N.S.	N.S.
Relative Risk (e) Lower Limit Upper Limit		1.439 0.173 16.604	0.959 0.072 12.769
Weeks to First Observed Tumor		104	104
Liver: Hepatocellular Adenoma or Carcinoma (b)	4/47(4)		
P Values (c),(d)	N.S.	N.S.	N.S.
Relative Risk (e) Lower Limit Upper Limit		0.719 0.111 4.027	0.719 0.111 4.027
Weeks to First Observed Tumor ·	92	104	104

Table 15.	Analyses of the Incidence of Primary Tumors in Female Mice
	Administered Vinylidene Chloride by Gavage (a)

Topography: Morphology	Vehicle Control	Low Dose	High Dose
Pituitary: Adenoma, NOS (b)	5/31(16)	6/32(19)	3/42(7)
P Values (c),(d)	N.S.	N.S.	N.S.
Relative Risk (e) Lower Limit Upper Limit		1.163 0.330 4.329	
Weeks to First Observed Tumor		103	104
Pituitary: Adenoma, NOS or Carcinoma, NOS (b)		7/32(22)	3/42(7)
P Values (c),(d)	N.S.	N.S.	N.S.
Relative Risk (e) Lower Limit Upper Limit		1.356 0.417 4.852	0.443 0.074 2.107
Weeks to First Observed Tumor	104	103	104
Mammary Gland: Fibroadenoma (b)	1/48(2)	1/49(2)	3/50(6)
P Values (c),(d)	N.S.	N.S.	N.S.
Relative Risk (e) Lower Limit Upper Limit		0.980 0.013 75.342	2.880 0.241 148.076
Weeks to First Observed Tumor	87	85	104

(continued)

Topography: Morphology	Vehicle Control	Low Dose	High Dose
Uterus: Endometrial Stromal Polyp (b)	0/46(0)	3/45(7)	2/47(4)
P Values (c),(d)	N.S.	N.S.	N.S.
Relative Risk (e) Lower Limit Upper Limit		Infinite 0.617 Infinite	Infinite 0.290 Infinite
Weeks to First Observed Tumor		96	104

(continued)

(a) Dosed groups received doses of 2 or 10 mg/kg by gavage.

(b) Number of tumor-bearing animals/number of animals examined at site (percent).

(c) Beneath the incidence of tumors in the control group is the probability level for the Cochran-Armitage test when P is less than 0.05; otherwise, not significant (N.S.) is indicated. Beneath the incidence of tumors in a dosed group is the probability level for the Fisher exact test for the comparison of that dosed group with the vehicle-control group when P is less than 0.05; otherwise, not significant (N.S.) is indicated.

(d) A negative trend (N) indicates a lower incidence in a dosed group than in a control group.

(e) The probability level for departure from linear trend is given when P is less than 0.05 for any comparison.

(f) The 95 percent confidence interval of the relative risk between each dosed group and the control group.

Primary Tumor	Dose-Response Trend	Low Dose versus Controls	High Dose versus Controls
Lymphoma	2/48 (Ъ)	9/49 (Ъ)	6/50 (Ъ)
	(0.449) (c)	(0.012)	(0.150)
Lymphoma or Leukemia	7/48	15/49	7/50
	(0.231N) (d)	(0.037)	(0.581N)

Table 16. Results of Life Table Analysis on Those Primary Tumors Showing Significant (P < 0.05) Increases by "Unadjusted Analyses" (a) in the Two-Year Study of Vinylidene Chloride in Female Mice

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(a) "Unadjusted" analyses refer to the Cochran-Armitage test and the Fisher exact test, which do not account for survival differences among groups.

(b) Number of animals with tumors/number of animals examined for that site. The tumor incidences are given for control, low-dose, and high-dose groups.

(c) Probability (P) value in parentheses.

(d) An N after a probability value indicates a lower incidence in dosed groups than in controls.

Throughout most of the chronic study, mean body weights of dosed rats of either sex and of high-dose female mice were comparable with those of the corresponding controls; the mean body weights of dosed male and low-dose female mice were slightly lower than those of the controls. In the subchronic study, the liver was identified as the target organ for vinylidene chloride-induced toxicity in both species; these observations supported the route selected for administering the chemical and the doses used for the chronic study. However, review of subchronic toxicity data and the absence of compound-related effects on survival or clinical signs in the chronic study suggest that mice and rats of both sexes could have tolerated higher doses of the chemical.

In the chronic studies, an increased incidence of necrosis of the liver in high-dose male mice and chronic renal inflammation in high-dose rats of either sex may have been related to administration of vinylidene chloride. Hepatoxic and/or nephrotoxic effects in rats and mice have been reported by others (Jenkins and Andersen, 1978; Reitz et al., 1980; and Prendergast et al., 1967).

There seems to be a great variation in the oral LD_{50} reported for vinylidene chloride: 1,510 mg/kg in adult Holtzman rats (Jenkins et al., 1972) and 217 mg/kg in male Alderly Park rats (Jones and Hathway, 1978a). A number of studies suggest that the toxicity of vinylidene chloride may be due to a reactive intermediate metabolite, possibly an epoxide, formed during <u>in vivo</u> microsomal metabolism of vinylidene chloride. Epoxides are detoxified <u>in vivo</u> by reaction with glutathione or by enzymic hydration. The epoxide hydrating pathways appear to play a minimal role in the metabolism of the reactive metabolite of vinylidene chloride. Vinylidene chloride causes increased toxicity in glutathione depleted animals, suggesting that the detoxication of this intermediate metabolite. occurs mainly through conjugation with glutathione (Andersen and Jenkins, 1977, Andersen et al., 1978, 1979, 1980).

In the present study, there was little evidence that vinylidene chloride dosed groups had significantly increased tumor incidence relative to controls. The only observed significant (P < 0.05) increase in tumor incidence occurred in low-dose female mice: lymphoma (2/48, 9/49, 6/50) and lymphoma or leukemia (7/48, 15/49, 7/50). These increases were not considered to be related to vinylidene chloride administration because similar effects were not found in the high-dose female mice or for male mice or rats.

In previous studies, vinylidene chloride has been reported to be carcinogenic when administered by inhalation but not carcinogenic when administered orally. Renal adenocarcinomas were found in 24/150 male Swiss mice exposed to 25 ppm vinylidene chloride vapor for 4 hours per day for 52 weeks, compared with no such tumors in the controls; however, no carcinogenic effects were observed when vinylidene chloride (0.5 - 20 mg/kg) was administered by gavage for a similar period (Maltoni et al., 1977). An increased incidence of mammary fibroadenomas or carcinomas was found in female Sprague-Dawley rats exposed to 100 or 150 ppm vinylidene chloride in air for 4 hours daily for 52 weeks and then observed for an additional 41 weeks (Maltoni et al., 1977); but when male or female Sprague-Dawley rats were given drinking water containing 200 ppm vinylidene chloride for 2 years, no carcinogenic effects were found (Norris, 1977). In another study, an increased incidence of lung, skin, and liver cell tumors in mice and the induction of hemangiosarcomas in both mice and rats were reported (Lee at al., 1977). No carcinogenic effects were found when female BDIV rats were given 150 mg/kg vinylidene chloride in olive oil by gavage on day 17 of gestation and the offspring were given 50 mg/kg once per week for 100 weeks (Ponomarkov and Tomatis, 1980).

These studies and the present study indicate that the route of exposure may be one of the important factors influencing the expression of the carcinogenic potential of VDC in laboratory animals. The metabolism and pharmacokinetics of vinylidene chloride have been studied following inhalation exposue (McKenna et al. 1977, 1978a) or following oral administration (McKenna et al., 1978). Both routes of exposure show that vinylidene chloride is metabolized to an epoxide as an intermediate reactive metabolite.

Two major urinary metabolites were identified as N-acetyl-S-(2-hydroxyethyl) cysteine and thiodiglycolic acid, indicating a major pathway for detoxication of the reactive intermediate metabolites of vinylidene chloride is via conjugation with liver glutathione. Short et al. (1977b) have reported that mice are more susceptible to the toxic effects of vinylidene chloride than are rats. This could be because of increased ability for activation of vinylidene chloride to a reactive metabolite by mice compared to that observed in the rat (Reitz et al., 1980). The carcinogenic expression observed in inhalation studies and not by the oral route suggests that there may be qualitative and quantitative differences in the formation of reactive intermedite metabolite(s). Furthermore, these qualitative and quantitative differences in the formation of the reactive intermediate may be due to the differences in the bioavailability of the chemical to the target organ or macromolecule(s) between the oral and inhalation routes of exposure. Further metabolic and disposition studies should clarify the influence of route of exposure on vinylidene chloride's toxic and carcinogenic expression.

VI. CONCLUSION

Under the conditions of this bioassay, vinylidene chloride administered by gavage was not carcinogenic for F344/N rats or B6C3F1/N mice of either sex. However, since the use of a maximum tolerated dose in this study has not been clearly demonstrated and since previously reported studies have shown that carcinogenicity is associated with inhalation exposure to vinylidene chloride, this study should not be taken as proof that the chemical is not a carcinogen.

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Appendix A

Summary of the Incidence of Neoplasms in Rats Administered Vinylidene Chloride by Gavage

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TABLE A1.

	VEHICLE Control	LOW DOSE	HIGH DOSE
ANIMALS INITIALLY IN STUDY ANIMALS NECROPSIED ANIMALS EXAMINED HISTOPATHOLOGICALLY	50 50 50	50 48 48	50 48 48
INTEGUMENTARY SYSTEM			
*SKIN SQUAMOUS CELL CARCINOMA KERATOACANTHOMA	(50) 1 (2%)	(48) 1 (2%)	(48) 1 (2%)
*SUBCUT TISSUE FIBROMA LIPOMA	(50)	(48) 1 (2%)	(48) 4 (8%) 1 (2%)
RESPIRATORY SYSTEM			
#LUNG ALVEOLAR/BRONCHIOLAR ADENOMA ALVEOLAR/BRONCHIOLAR CARCINOMA OSTEOSARCOMA, METASTATIC	(50) 2 (4%) 1 (2%)	(47) 1 (2%) 1 (2%)	(47)
HEMATOPOIETIC SYSTEM			
*MULTIPLE ORGANS LEUKEMIA,NOS MONOCYTIC LEUKEMIA	(50) 6 (12%) 1 (2%)	(48) 4 (8%)	(48) 8 (17%)
#SPLEEN FIBROSARCOMA	(50)	(47) 1 (2%)	(48)
#ADRENAL LEUKEMIA,NOS	(50) 1 (2%)	(48)	(47)
CIRCULATORY SYSTEM			
#SPLEEN HEMANGIOSARCOMA	(50)	(47)	(48)

SUMMARY OF THE INCIDENCE OF NEOPLASMS IN MALE RATS ADMINISTERED VINYLIDENE CHLORIDE BY GAVAGE

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

	VEHICLE Control	LOW DOSE	HIGH DOSE
DIGESTIVE SYSTEM			
*ORAL CAVITY Squamous cell papilloma	(50) 1 (2%)	(48)	(48)
#SALIVARY GLAND Adenoma, Nos Adenocarcinoma, Nos	(46) 1 (2%)	(48) 1 (2%)	(46)
#LIVER NEOPLASTIC NODULE HEPATOCELLULAR CARCINOMA	(49) 1 (2%)	(48) 1 (2%) 2 (4%)	(45) 2 (4%) 1 (2%)
URINARY SYSTEM NONE			
ENDOCRINE SYSTEM			
#PITUITARY CARCINOMA,NOS Adenoma, NOS Chromophobe Adenoma Chromophobe Carcinoma		(47) 10 (21%)	(44) 1 (2%) 10 (23% 1 (2%) 1 (2%)
#ADRENAL PHEOCHROMOCYTOMA GANGLIONEUROMA	(50) 6 (12%) 1 (2%)	(48) 5 (10%)	(47) 13 (28%)
#THYROID Papillary Adenocarcinoma C-Cell Adenoma C-Cell Carcinoma	(48) 1 (2%) 2 (4%) 4 (8%)	(46) 1 (2%) 2 (4%)	(41) 1 (2%) 3 (7%) 3 (7%)
<pre>#PANCREATIC ISLETS ISLET-CELL ADENOMA ISLET-CELL CARCINOMA</pre>	(49)	(47) 1 (2%)	(48) 2 (4%) 6 (13%)
REPRODUCTIVE SYSTEM			
*MAMMARY GLAND Fibroma	(50)	(48)	(48) 1 (2%)

TABLE A1. MALE RATS: NEOPLASMS (CONTINUED)

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

	VEHICLE Control	LOW DOSE	HIGH DOSE
FIBROADENOMA	1 (2%)		1 (2%)
*PREPUTIAL GLAND Carcinoma,nos Adenoma, nos	(50) 3 (6%)	(48) 3 (6%) 1 (2%)	(48) 1 (2%)
#PROSTATE Adenoma, Nos	(22) 2 (9%)	(35) 2 (6%)	(32) 2 (6%)
#TESTIS INTERSTITIAL-CELL TUMOR	(50) 43 (86%)	(47) 39 (83%)	(48) 47 (98%)
NERVOUS SYSTEM			
#BRAIN GLIOMA, NOS Astrocytoma	(50) 1 (2%)	(48)	(47) 1 (2%)
SPECIAL SENSE ORGANS			
*EXTERNAL EAR SEBACEOUS ADENOCARCINOMA FIBROSARCOMA	(50)	(48) 1 (2%)	
MUSCULOSKELETAL SYSTEM			
NONE			
BODY CAVITIES			
*ABDOMINAL CAVITY Sarcoma, NOS Fibrosarcoma	(50)	(48) 1 (2%)	(48) 1 (2%)
*TUNICA VAGINALIS Mesothelioma, Nos	(50)	(48)	(48)

(48)

TABLE A1. MALE RATS: NEOPLASMS (CONTINUED)

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

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*MULTIPLE ORGANS MESOTHELIOMA, NOS

(50) 1 (2%)

(48)

	VEHICLE Control	LOW DOSE	HIGH DOSE
ANIMAL DISPOSITION SUMMARY			
ANIMALS INITIALLY IN STUDY NATURAL DEATHƏ MORIBUND SACRIFICE	50 5 13	50 5 10	50 5 8
SCHEDULED SACRIFICE ACCIDENTALLY KILLED TERMINAL SACRIFICE ANIMAL MISSING	12 20	11 24	37
a INCLUDES AUTOLYZED ANIMALS			
TUMOR SUMMARY			
TOTAL ANIMALS WITH PRIMARY TUMORS* TOTAL PRIMARY TUMORS	47 92	42 8 1	48 114
TOTAL ANIMALS WITH BENIGN TUMORS Total Benign Tumors	46 67	40 61	48 86
TOTAL ANIMALS WITH MALIGNANT TUMORS Total Malignant Tumors	19 23	15 18	19 25
TOTAL ANIMALS WITH SECONDARY TUMORS# TOTAL SECONDARY TUMORS	\$		1 1
TOTAL ANIMALS WITH TUMORS UNCERTAIN- Benign or malignant Total uncertain tumors	2 2	2 2	3 3
TOTAL ANIMALS WITH TUMORS UNCERTAIN- Primary or metastatic Total uncertain tumors			
<pre>* PRIMARY TUMORS: ALL TUMORS EXCEPT SE # SECONDARY TUMORS: METASTATIC TUMORS</pre>			DJACENT ORGA

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TABLE A1. MALE RATS: NEOPLASMS (CONTINUED)

TABLE A2.

		LOW DOSE	HIGH DOSE
	50 49	50 50 50	50 45 45
INTEGUMENTARY SYSTEM			
*SUBCUT TISSUE SEBACEOUS ADENOCARCINOMA LIPOMA NEURILEMOMA	(49) 1 (2%)	(50) 1 (2%) 1 (2%)	(45)
RESPIRATORY SYSTEM			
#LUNG CARCINOMA, NOS, METASTATIC ADENOCARCINOMA, NOS, METASTATIC	(49)	(50) 1 (2%)	(45)
ALVEOLAR/BRONCHIOLAR ADENOMA ALVEOLAR/BRONCHIOLAR CARCINOMA	4 (8%)	1 (2%)	1 (2%)
HEMATOPOIETIC SYSTEM			
*MULTIPLE DRGANS MALIGNANT LYMPHOMA, NOS MALIG.LYMPHONA, UNDIFFER-TYPE	(49) 1 (2%) 1 (2%)	(50) 1 (2%)	(45)
MALIG.LYMPHOMA, LYMPHOCYTIC TYPE LEUKEMIA,NOS UNDIFFERENTIATED LEUKEMIA MYELOMONOCYTIC LEUKEMIA	8 (16%)	3 (6%) 1 (2%) 1 (2%) 1 (2%)	4 (9%)
LYMPHOCYTIC LEUKEMIA Monocytic leukemia		1 (2/4)	1 (2%)
#LIVER LEUKEMIA,NOS	(49) 2 (4%)	(50)	(45)

SUMMARY OF THE INCIDENCE OF NEOPLASMS IN FEMALE RATS ADMINISTERED VINYLIDENE CHLORIDE BY GAVAGE

CIRCULATORY SYSTEM

NONE

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

	VEHICLE Control	LOW DOSE	HIGH DOSE
DIGESTIVE SYSTEM			
*ORAL CAVITY PAPILLOMA, NOS	(49)	(50)	(45) 1 (2%)
*TONGUE Squamous cell carcinoma	(49)	(50)	(45) 1 (2%)
#LIVER NEOPLASTIC NODULE	(49) 4 (8%)	(50)	(45)
#STOMACH Squamous cell carcinoma	(47) 1 (2%)	(48)	(42)
#PYLORUS Adenocarcinoma, nos	(47)	(48)	(42) 1 (2%)
#CECUM LIPOMA	(43)	(43) 1 (2%)	(42)
URINARY SYSTEM			
#KIDNEY Adenocarcinoma, Nos, Metastatic	(49)	(49)	(44) 1 (2%)
#URINARY BLADDER TRANSITIONAL-CELL CARCINOMA	(45)	(45) 1 (2%)	(41)
ENDOCRINE SYSTEM			
<pre>#PITUITARY CARCINOMA,NOS</pre>	(48) 3 (6%)	(49) 1 (2%)	(43)
ADENOMA, NOS Chromophobe Adenoma	16 (33%)	20 (41%) 2 (4%)	24 (56%) 3 (7%)
#ADRENAL Cortical Adenoma	(48) 1 (2%)	(50)	(43)
CORTICAL ADENDIA CORTICAL CARCINOMA PHEOCHROMOCYTOMA	1 (2%)	1 (2%) 2 (4%)	3 (7%)
#THYROID Follicular~cell Adenoma	(47)	(47)	(44) <u>2 (5%)</u>

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TABLE A2. FEMALE RATS: NEOPLASMS (CONTINUED)

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

	VEHICLE Control	LOW DOSE	HIGH DOSE
FOLLICULAR-CELL CARCINOMA C-CELL ADENOMA C-CELL CARCINOMA	4 (9%)	1 (2%) 1 (2%) 1 (2%)	1 (2%) 4 (9%)
#PANCREATIC ISLETS ISLET-CELL CARCINOMA	(48)	(50) 1 (2%)	(45) 1 (2%)
REPRODUCTIVE SYSTEM			
*MAMMARY GLAND Carcinoma,nos Adenoma, nos Adenocarcinoma, nos Fibroma Fibroma Fibroadenoma	(49) 1 (2%) 1 (2%) 12 (24%)	(50) 1 (2%) 1 (2%) 1 (2%) 1 (2%) 14 (28%)	(45) 1 (2%) 1 (2%) 9 (20%)
#UTERUS PAPILLARY CARCINOMA PAPILLARY ADENOMA SARCOMA, NOS ENDOMETRIAL STROMAL POLYP ENDOMETRIAL STROMAL SARCOMA	(48)	(49)	(42) 1 (2%) 1 (2%)
#OVARY PAPILLOMA, NOS	(47)	(49)	(44) 1 (2%)
NERVOUS SYSTEM			
#BRAIN CARCINOMA, NOS, INVASIVE Adenoma, NOS Glioma, NOS	(49) 1 (2%) 1 (2%)	(50) 1 (2%)	(45) 2 (4%)
#BRAIN STEM Astrocytoma	(49) 1 (2%)	(50)	(45)
#PONS Astrocytoma	(49) 1 (2%)	(50)	(45)
SPECIAL SENSE ORGANS None			
MUSCULOSKELETAL SYSTEM			

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TABLE A2. FEMALE RATS: NEOPLASMS (CONTINUED)

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

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TABLE A2. FEMALE RATS: NEOPLASMS (CONTINUED)

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	VEHICLE Control	LOW DOSE	HIGH DOSE
BODY CAVITIES			
*ABDOMINAL CAVITY Adenocarcinoma, Nos, metastatic	(49)	(50)	(45) 1 (2%)
*MESENTERY ENDOMETRIAL STROMAL SARCOMA, MET	(49)	(50)	(45) 1 (2%)
ALL OTHER SYSTEMS NONE ANIMAL DISPOSITION SUMMARY			
ANIMALS INITIALLY IN STUDY	50	50	50
NATURAL DEATHƏ Moribund sacrifice Scheduled sacrifice	4 19	7 15	13 8
ACCIDENTALLY KILLED Terminal sacrifice Animal missing	27	28	29

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

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TABLE A2. FEMALE RATS	: NEOPLASMS (CONTINUED)
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	VEHICLE Control	LOW DOSE	HIGH DOSE
TUMOR SUMMARY			~~~~~~~
TOTAL ANIMALS WITH PRIMARY TUMORS* TOTAL PRIMARY TUMORS	42 78	38 70	36 73
TOTAL ANIMALS WITH BENIGN TUMORS TOTAL BENIGN TUMORS	35 48	33 53	34 56
TOTAL ANIMALS WITH MALIGNANT TUMORS Total Malignant Tumors	23 26	. 17 . 17	15 17
TOTAL ANIMALS WITH SECONDARY TUMORS# Total secondary tumors	1	1	2 4
TOTAL ANIMALS WITH TUMORS UNCERTAIN- Benign or Malignant Total Uncertain Tumors	4		
TOTAL ANIMALS WITH TUMORS UNCERTAIN- Primary or metastatic Total Uncertain Tumors			
* PRIMARY TUMORS: ALL TUMORS EXCEPT SEC # SECONDARY TUMORS: METASTATIC TUMORS O			JACENT ORGAN

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TABLE A3.

INDIVIDUAL ANIMAL TUMOR PATHOLOGY OF MALE RATS IN THE 2-YEAR STUDY OF VINYLIDENE CHLORIDE

VEHICLE CONTROL

NUMBER WEEKS ON	0	2	0 -3 -0	04		6	7	8	9	ļ		2	-	4	뷞	\$	7	4	;	2	2	2	2 3	2
STUDY	8	8	8	8	Ö	8	-	7	ģ	4	2	į	ġ	2	8	2	ŝ	į	į	2	į	91	į	ġ
INTEGUMENTARY SYSTEM	1-0			لعت		-						- 11						- 11			- 11	- 21		
SKIN Keratdacanthoma	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	* x	+	+	+	+	+	+	+	+
RESPIRATORY SYSTEM																								
LUNGS AND BRONCHI Alveolar/Bronchiolar Adenoma Alveolar/Bronchiolar Carcinoma	•	+	+	+	•	•	+	+	٠	+	+	•	+	+	٠	+	+	+	+	+	٠	+	+	+
TRACHEA	•	+	+	+	+	+	+	+	-	+	+	-	+	+	+	+	+	-	+	+	+	+	+	+
REMATOPOIETIC SYSTEM	+																						-	
BONE MARROW	1.	•	•	+		•	•	•	•	+	•	÷	+	+	+	+	÷	+	+	+	+	÷	•	
SPLEEN	1.	+	+	+	+	•	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+
LYMPH NODES	Τ.		-	•				•	_	+	•	•	+	+	+	+			+	•	+	+	•	•
THYMUS	1-	-	-	-	-	Å		-	_	_	-	-	-	_	-	-	-	-	-	-	-	-	-	-
CIRCULATORY SYSTEM									_	_				_								_		
	1.			+																	÷	+	+	•
HEART	Ļ	•	•	•	<u> </u>		*	*	•	*	<u> </u>	*	<u> </u>	<u> </u>	*	<u> </u>	<u>.</u>	÷	•	<u> </u>	*	<u> </u>	<u> </u>	•
DIGESTIVE SYSTEM																								
ORAL CAVITY Squamous cell papilloma		N	H	N	N	N	N	N	• N	N	N	N	N	N	N	N	N	N	N	N	N	N 	N	N X
SALIVARY GLAND Adenocarcinoma, nos	L.	+	+	+	+	+	•	+	+	+	+	•	ż	+	+	•	-	+	+	+	+	•	+	+
LIVER NEOPLASTIC MODULE	-	+	•	+	+	+	•	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+
BILE DUCT	-	٠	+	+	+	+	÷	+	+	+	+	+	+	+	+	+	÷	+	+	٠	+	+	٠	+
GALLBLADDER & COMMON BILE DUCT	N	N	н	N	N	N	н	N	N	Ν.	.н	N	N	N	N	Ν.	N	N	N	N	H.	N	N	N
PANCREAS	1.	÷	+	+	+	+	÷	+	+	_	+	+	+	+	+	+	+	+	+	+	+	+	+	+
ESOPHAGUS	1.	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+
STOMACH	Γ.	+	+	+	+	+	+	+	+	+	-	+	+	+	+	+	_	+	+	+	+	+	+	+
SMALL INTESTINE	1-		+	•	+	+	+	+	+	+	-	+	+	+	+	+	+	+	+	+	+	+	+	+
LARGE INTESTINE	1-	+	+	+	+	+	+	+	+	+	-	+	+	-	-	+	+	+	+	4	-	+	+	+
JRINARY SYSTEM																				_			-	
KIDNEY	1.	+	+	•	+	+	+	•	+	÷	+	+	•	÷	+	•	•	;	+	÷	•	+	+	+
URINARY BLADDER	1.	•	•	_	+	+		+	•	•	-	+	+	+	+	+	+	+	+	+	+	-	+	+
ENDOCRINE SYSTEM																								
PITUITARY	1.								•	•	•				-	÷	•				•	÷		÷
ADENOMA, NOS Chromophobe Adenoma	Ĺ	•	•	•	·			×	•	•			·	<u> </u>	_	×		·					x	×
ADRENAL	+	÷	+	+	+	+	+	+	+	+	+	٠	+	÷	+	+	•	٠	+	÷	+	+	÷	÷
PHEOCHROMOCYTOMA Ganglioneuroma Leukemia, nos												x	x			x	x							
THYROID	1.	+	+	+	+	•	•	•	+	•	-	÷	+	÷	+	+	÷	+	+	+	+	-	+	÷
PAPILLARY ADENOCARCINOMA C-Cell Adenoma																	x			x				
C-CELL CARCINOMA	-						x		x	x														
PARATHYROID	+-	+	+	-	+	+	+	+	+	-	-	+	+	-	-	+	+	-	+	+	+	.=	+	+
PANCREATIC ISLETS Islet-Cell Carcinoma	+	+	+	+	٠	+	+	+	+	-	٠	*	+	+	÷	+	+	* x	+	*	+	+	+	٠
REPRODUCTIVE SYSTEM	4—																							
MAMMARY GLAND FIBROADENOMA	N	N	N	N	+	N	N	+	٠	N	N	N	+	+	N	+	+	+	N	٠	+	N	+	÷
TESTIS	1:	÷	÷	+	÷	+	t	+	÷.	ţ	+	t	÷	ţ	ţ	•	t	t	÷	ţ	ţ	ţ	ţ	ţ
INTERSTITIAL-CELL TUMOR PROSTATE	* +	× +	× +	+	× -	A	× +	-	× -	× -	-	× -	× -	× -	× +	+	× -	×	× -	× -	-	× -	× -	× +
ADENOMA, NOS Preputial/clitoral gland	T N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	<u>х</u> н	N	N	N	N	H	N
CARCINOMA, NOS															x									
IERVOUS SYSTEM	1																							_
BRAIN Glioma, Nos	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	•	+
LL OTHER SYSTEMS	+																	-						
MULTIPLE ORGANS NOS	I N	н	N	N	N	N	N	N	N	N	N.	N	н	N	N	N	N	N	N	N	N	N	н	N
MESOTHELIOMA, NOS Leukemia,nos			-		x										x							x		
MESOTHELIOMA, NOS	INED	MIC			ICA			ION		i	: C: A: M: B:	AU AU	TIS CROF	SI	E II , N S ISS	D H: TNG	IST	TIO OLO RME	GY	X UBM DUE	111	ED	010	•

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TABLE A3. MALE RATS: TUMOR PATHOLOGY (CONTINUED) VEHICLE CONTROL

AN IMAL NUMBER	0 2 6	2	2	2	3	3	3	3	34	3	3	3	3	3	4		2	š	4	4 5	4	4	0 4 8	4	5	TOTAL
WEEKS ON Study	ļ	9	ò	0	0	0	1	0 7	0 7	0	8	0	8	0	8	8	8	8	0		8	8	8	9	104	TISSUE TUMOR
INTEGUMENTARY SYSTEM	1 31	0	91	31	4	41	91		01	-01	21	<u>_9.</u>],	-21	41	<u>.21</u>	21	21	21	21	91	-21	21	21	21	-*	
SKIN Keratoacanthoma	•	٠	+	+	•	+	÷	+	+	+	+	+	+	+	+	+	+	+	+	•	+	+	+	+	+	50× 1
RESPIRATORY SYSTEM																										
LUNGS AND BRONCHI Alveolar/bronchiolar Adenoma Alveolar/bronchiolar carcinoma	•	+ x	+	+	+	+	+	+	+	+	+	+	+	.+	+	* ×	*	+	+	+	+	+	+	+	+	50 2 1
TRACHEA	+	+	+	+	+	+	-	+	+	+	+	+	+	+	+	+	+	+	+	÷	+	+	+	+	+	46
HEMATOPOIETIC SYSTEM									<u> </u>						• ••				_	-						
BONE MARROW	+	+	+	+	+	+	+	+	+.	+_	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	50
SPLEEN	+	+	+	+	+	+	+	+	+	+	+ '	+	+	+	+	÷	+	+	+	+	+	+	+	+	+	50
LYMPH NODES	•	+	+	+	+	+	+	+	+	+	.+	+	-	+	+	+	+	+	+	+	+	+	+	+	-	45
THYMUS	+	-	-	-	-	-	_	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	1
CIRCULATORY SYSTEM																							-		_	
HEART	1.	+	+	+	+	÷	+	+	+	+	+	+	+	+	+	÷	+	÷	+	+	+	+	+	+	+	50
DIGESTIVE SYSTEM				-								-													-+	
DRAL CAVITY Squamous cell papilloma	м	N	N	N	N	N	N	<u>,</u> N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	50×
SALIVARY GLAND Adenocarcinoma, nos	•	+	+	+	+	+	+	+	-	-	+	+	+	+	+	•	•	•	+	+	+	+	+	+	+	46 1
LIVER Neoplastic Nodule	ţ	+	+	+	+	+	+	+	+	+	٠	+	+	٠	+	+	٠	+	+	+	+	+	+	+	+	49
BILE DUCT	1.	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	•	•	•	•		
GALLBLADDER & COMMON BILE DUCT		N	N	N	Ň	N	N	N	N	N	N	N	Ņ	N .	N.	N	N	Ň	Ň	N	N	N	Ň	N	Ň	50×
PANCREAS	1.	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	49
ESOPHAGUS	1.	+	+	+	+	+	+	+	+	+	+	+	+	+	+	•	+	•	+	+	+	+	+	+		50
STOMACH	1	+	•	-	+	+	+	+	•	+	-	+	•	+	+	•	+	+	•	•	_	-		+		41
SMALL INTESTINE	1_	+	+	•	+	+	+		+	+	_	+	•	+	+	-	-	-	+	+	_	-		+	÷	38
LARGE INTESTINE	1.	+	+	+	+	+	+	-	+	+		+	<u> </u>	+	+	-	-	-	+	+		-		•	•	35
URINARY SYSTEM					·																				_	
KIDNEY	1.	+		+	+		•			•		•	•		÷	•	•	•	÷	÷		+		•	+	50
URINARY BLADDER	+	•	+	+	+	+	+	+	+	+	+	+	+	+	+	+		_	+	•	+	+		+	+	44
ENDOCRINE SYSTEM	<u> </u>																								-	
PITUITARY Adenoma, Nos	•	+	* x	٠	+	* ×	+	+	٠	* ×	٠	٠	÷	÷	٠	÷	٠	+	+	+	* x	÷	٠	٠	+	49 7
CHROMOPHOBE ADENOMA Adrenal Pheochromocytoma Ganglioneuroma Leukemia, Nos	+	+	* ×	+	+	+	+	+	+	+	+	+	+	•	+	+	+	+	+	* ×	+	+	+	+	+ × >	50
THYROID Papillary Adenocarcinoma C-Cell Adenoma	+	+	+ x	+	+	+	•	+	+	•	•	+	+	+	+	+	+	+	+	+	+	+	+	+	4	48 1 2
C-CELL CARCINOMA	1-	,					<u> </u>	 ,												 *		 *			4	
PARATHYROID Pancreatic islets Islet-cell carcinoma	+	* *	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	35 49
REPRODUCTIVE SYSTEM	-				_																					
MAMMARY GLAND FIBROADENOMA	н	* ×	+	+	+	٠	+	N	٠	N	N	+	N	÷	N	N	N	N	+	+	N	N	N	N	+	50×
TESTIS INTERSTITIAL-CELL TUMOR	*	* x	* ×	* x	* ×	* ×	* x	* ×	+	+	* x	* x	* x	* x	* x	* ×	* x	* ×	* x	* x	* ×	* x	* ×	* x	+ ×	50 43
PROSTATE Adenoma, nos	<u> -</u>		-	+	-	* *	-	-	-	+	+	-	+	+	•	•	-	+	-	+	+	+	+	-	-	22 2
PREPUTIAL/CLITORAL GLAND Carcinoma,Nos	N	H	N	N	N	N	N	N	N X	N	N	N	N	N	N	N	H	N	H	H X	N	N	N	N	H	50× 3
NERVOUS SYSTEM	1												-													
BRAIN Glidma, Nos	*	+	+	+	+	+	+	+	• +	+	+	+	+	+	+	+	+	+	+	+	•	+	+	+	+	50 1
ALL OTHER SYSTEMS MULTIPLE ORGANS NOS MESOTHELIDMA, NOS LEUKEMIA,NOS MONGCYTIC LEUKEMIA	N X	N	н	H X	N	N	N	N	N	N	H	N	N	N	N	N	N	N	N	N	N	N	N	H X X	N	50× 1 6

A ANIMALS HERROPSIED * ANIMALS HERROPSIED * TISSUE EXAMINED MICROSCOPICALLY - REQUIRED TISSUE NOT EXAMINED MICROSCOPICALLY - REQUIRED TISSUE NOT EXAMINED MICROSCOPIC EXAMINATION N: HECROPSY, NO AUTOLYSIS, HO MICROSCOPIC EXAMINATION N: HECROPSY, NO AUTOLYSIS, HO MICROSCOPIC EXAMINATION HECROPSY PERFORMED B: HO HECROPSY PERFORMED

TABLE A3.

INDIVIDUAL ANIMAL TUMOR PATHOLOGY OF MALE RATS IN THE 2-YEAR **STUDY OF VINYLIDENE CHLORIDE**

LOW DOSE

NUMBER WEEKS ON STUDY INTEGUMENTARY SYSTEM SKIN SQUMDUS CELL CARCINOMA	0 1 1 0 4	0 2 0 7	0 3 1	0	_5	0 6	91	0	0 1	11	1	-11	1]	11	11	11		11	11			2	21	21	2
STUDY INTEGUMENTARY SYSTEM SKIN				1	1		-7-	-8	8	-41	1	2	3	4	5	6	7	8	8	2	2	-1	3	4	5
SKIN		5	0 4	0	0	0	0	8	8	0	4	0	<u> </u>	9	0 4	7	8	8	8	81	0 4	0 4	91 41	0 4	0 4
SQUAMDUS CELL CARCINOMA	•	+	+	+	+								÷		+	÷	÷	+	÷	+	+	÷	+	÷	+
	1	+	+	•	*	*	N	<u> </u>	+	÷		+	·	*	<u> </u>	+	<u> </u>	•			<u> </u>		+		_
SUBCUTANEOUS TISSUE FIBROMA	+	+	+	+	+	+	N	÷	+	+	+	+	٠	+	+	+	+	+	+	+	+	+	+	+	+
RESPIRATORY SYSTEM	├																								
LUNGS AND BRONCHI Alveolar/bronchiolar adenoma	+	÷	ŧ	÷	÷	÷	+	÷	+	÷	+	+	٠	+	•	+	* x	٠	+	÷	÷	+	٠	+	÷
ALVEOLAR/BRONCHIOLAR CARCINOMA		+	+	••					+	+	+	<u> </u>	+				+	•	+	•	+	+	•	+	
TRACHEA HEMATOPOIETIC SYSTEM	ļ								·									•	<u> </u>		-		· · · ·	<u> </u>	_
BONE MARROW		÷																•				÷	•		
SPLEEN FIBROSARCOMA	+	+	+	+	+	+	+	-	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+
HEMANGIOSARCOMA	<u> </u>																								_
LYMPH NODES	+	+	+	+	.*	<u> </u>	+	•	+	+	+	+	+	+	•	+	+	+	+	+	+	+	+	+	+
THYMUS CIRCULATORY SYSTEM	<u> </u>		-	-	_	-	-	-	-	-	<u> </u>	-	-	-	_		_	_	_	-	-	_	_	-	_
HEART	+	+	+	+	+	+	+	+	+	+	+	+	÷	+	÷	+	÷	+	+	+	+	+	+	÷	+
DIGESTIVE SYSTEM	<u> </u>				•	·	•	•	•		•	÷	•	·	•		•	•	•			•	•		_
SALIVARY GLAND Adenoma, Nos	+	+	+	+	+	÷	+	+	+	+	+	+	+	+	+	÷	÷	+	÷	+	+	+	+	÷	* x
LIVER NEOPLASTIC NODULE Hepatocellular carcinoma	+	+	٠	+	+	+	+ ×	+	+	+ x	+	+	•	+	+	+	+	+	٠	+	+	+	+	٠	+
BILE DUCT	L+	+	+	_+	+	_+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+
GALLBLADDER & COMMON BILE DUCT	N	N	N	N	N	N	N	N	N	N	N	N	. N	N	N	Ν.	N	Ν.	N	N	N	N_	Ν.	N	. N
PANCREAS	+	+	+	+	+	+	÷	_	+	÷	+_	+	+	+	+	+	+	+	+	+	+	+	+	+	+
ESOPHAGUS	+	-	+	+	÷	ŧ.	÷	+	+	+	+	+	+	+	+	÷	+	+	+	÷	+	+	+	÷	+
STOMACH	+	t	+	+	+	.+	+	-	+	-	+	+	<u>+</u>	÷	+	+	+	+	+	-	+	+	+	+	+
SMALL INTESTINE	+	+	+	+	+_	+	+	-	-	+	-	+	<u>+</u>	+	+	-	+	-	+	-	+	+	+	+	+
LARGE INTESTINE	+	+	+	+	+	+	-	-	+	+	+	-	+	÷	+	+	+	-	+	-	+	+	+	-	+
URINARY SYSTEM																									
KIDNEY	+	t	+	_+	+	+	+	+	+	+_	+	+	+	+ .	+	+	ŧ	+	÷	+	ŧ	+	+	+	<u>+</u>
URINARY BLADDER	+	+	+	+	+	+	+	+	+	+	+	-	+	+	+	+	+	+	+	-	+	+	+	+	+
ENDOCRINE SYSTEM																									
PITUITARY ADENOMA, NOS	. * .	+	+	+	+	+	+	+	+	+	+	+	-	* x	+	+	+	+	+	+	* x	+	+	+	<u>+</u>
ADRENAL Pheochromocytoma	+	+	+	+	+	+	+	+	+	+	+	+	+	* x	+	+	+	+	+	+	* x	+	+	+	+
THYROID C-Cell Adenoma C-Cell Carcinoma	-	+	+	٠	+	+	+	٠	+	+	+	٠	+	+	-	•	+	٠	+	٠	+	+	+	٠	+
PARATHYROID	-	+	+	+	+	+	+	+	+	+	+	+	+	+		+	-	+	+	+	+	+	+	+	+
PANCREATIC ISLETS ISLET-CELL CARCINOMA	+	+	+	+	+	+	+	-	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+
REPRODUCTIVE SYSTEM						.																		-	
MAMMARY GLAND	+	N	N	+	+	+	+	N	N	+	N	+	+	+	+	+	<u>N</u>	N	N.	<u>N_</u>	+	+	<u>N</u>	+	+
TESTIS INTERSTITIAL-CELL TUMOR	×.	+	* x	* *	* x	*	* .	+	+	* *	+	<u>*</u>	*	* x	*	+	*	<u>*</u>	<u>*</u>	+	* x	*	*	<u>*</u>	<u>*</u>
PROSTATE Adenoma, nos	+	+	-	+	+	-	-	+	+	+	+	٠	-	+	+	+	+	+	+	-	+	-	-	+	+
PREPUTIAL/CLITORAL GLAND Carcinoma,Nos Adenoma, Nos	N	N	N	N	N X	N	N	N	N	N	N	N	N	N	N	N X	N	N	N	N	N	N	N X	N	N X
SPECIAL SENSE DRGANS															-										
EAR Sebaceous Adenocarcinoma	N	N	N	N	N	N	N	N	N	N	N	N	N X	N	N	H	N	н	N	N	N	н	N	H	N
BODY CAVITIES																						_			
PERITONEUM Sarcoma, NOS	н	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N
TUNICA VAGINALIS Mesothelioma, nos	+	+	+	+	+	+	+	+	+	+	+	٠	+	+	+	+	+	+	+	+	٠	+	+	+	+
ALL OTHER SYSTEMS																		<u> </u>							-
MULTIPLE ORGANS NOS	н	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N

+: TISSUE EXAMINED MICROSCOPICALLY -: REQUIRED TISSUE NOT EXAMINED MICROSCOPICALLY X: Tumor Incidence N: Necropsy, no Autolysis, no Microscopic examination

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: NO TISSUE INFORMATION SUBNITTED C: NECROPSY, NO HISTOLOGY DUE TO PROTOCOL A AUTOLYSIS M: ANIMAL MISSING B: NO NECROPSY PERFORMED

ANIMAL NUMBER	2	0 2 7	2	0 2 9	0 3 0	0 3	03	0 3 3	3	0 3 5	0 3 6	0 3 7	0 3 8	0 3 9	040	04	042	0 4 3	0	0 4 5	0 4 6	0 4 7	0 4 8	0 4 9	0 5	TOTAL
WEEKS ON Study	0	-	0	0	0	9	8	8	8	8	0	0	1	8		0		7	8	7	0 5	0	0	8	0	TISSUES
INTEGUMENTARY SYSTEM	- 51	41	41	41	-61	11	-21	31	21	21	41	41	41	21	91	41	<u>11</u>	31	31	31	5	41	4	_ 4	-4	
SKIN Squamous cell carcinoma	•	+	+	+	+	+	+	*	+	+	+	+	*	+	<u>+</u>	<u>+</u>	A	+.	+	+	+	+	+	+	+	48× 1
SUBCUTANEOUS TISSUE Fibroma	•	+	+	+	+	+	+	٠	+	+,	÷	+	+	+	* X	+	A	٠	+	+	+	٠	+	+	+	48× 1
RESPIRATORY SYSTEM	+																								-	····
LUNGS AND BRONCHI Alveolar/bronchiolar Adenoma Alveolar/bronchiolar carcinoma	•	+	+	+	+	-	+	+	+	+	•	+	+	+	+	+	•	+ x .	+	+	+	+	÷	+	۰	47
TRACHEA	A	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	A	+	+	+	+	+	+	+	+	47
EMATOPOIETIC SYSTEM																									-	
BONE MARROW		+	+	+	+	+	+	-	+	+	+	+	+	+	+	+	<u> </u>	+	+	+	+	+	+	+	+	47
SPLEEN Fibrosarcoma Hemangiosarcoma		٠	+	+	+	+	+	+	+	+	+	+	+	+	+	+	A	+	+	+	+	+	+	+	* ×	47
LYMPH NODES	A	+	+	+	+	+	+	+	_	+	+	+	+	+	+	+	A	÷	+	+	+	+	+	+	•	47
THYMUS	A	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	A	-	-	-	-	-	-	-	-	1
CIRCULATORY SYSTEM	+							-																		
HEART	A	÷	+	+	+	÷	+	+	٠	÷	+	÷	+	+	٠	•	A	+	+	+	+	+	÷	+	+	48
DIGESTIVE SYSTEM	+																			_						
SALIVARY GLAND Adenoma, nos		+	+	+	+	+	+	+	+	+	+	+	+	+	+	+		+	+	+	+	+	+	+	+	48 1
LIVER Neoplastic Nodule Hepatocellular carcindma	A	+	•	+	+	٠	+	+	+	+	•	+	+	+	•	+	A	+	+	+	+	•	+	•	×	48 1 2
BILE DUCT		+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	Α	+	+	• +	+	+	+	+	+	48
GALLBLADDER & COMMON BILE DUCT	A .	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	Α	N	N	N	<u>N</u> _	<u>N_</u>	N	N	N	<u>48×</u>
PANCREAS	A_	+	+	+	+	+	+	+	+	+	<u>+</u>	+	+	+	+	+	A	+	<u>+</u>	+	+	+	+	+	+	47_
ESOPHAGUS	.	+	+	+	+	+	+	+	.+	+	+	+	+	+	+	+	<u>A</u>	+	t	+	+	+	+	+	+	47
STOMACH	+-	.+	+	.+	+	+	-	+	-	+ .	+_	+	+	+	+	+	A	+ .	+.	+	+	+	+_		.+	43
SMALL INTESTINE	1	+	+	+	-	+	-	+		+	+	+	+	+	+	+	A	+	+	+	+	+	+	+	-	38_
LARGE INTESTINE	A	-	-	-	-	+	-	+	-	+	+	+	+	+	+	+	A	+	+	+	+	+	+	+	-	35
JRINARY SYSTEM	1.																									
KIDNEY Urinary bladder	f.		+	+	• •	• •	+	+	+	÷	÷	<u> </u>	+	+	+	-		+	<u> </u>	+	+	+	+	+		<u>48</u> 42
ENDOCRINE SYSTEM				<u> </u>	<u> </u>	<u> </u>			<u> </u>	•	-		· · ·		· · · ·		<u> </u>	•			•	•		· .	-	42
PITUITARY ADENOMA, NOS		+	+	+	* x	+	+	+	+	* ×	+	+	* ×	* ×	+	* ×	A	+	+	+	+	*	+	* X	+	47 10
ADRENAL	A	+	÷	+	٠	+	+	+	+	+	+	+	+	+	+	÷	A	÷	+	÷	+	t	+	÷	+	48_
PHEOCHROMOCYTOMA Thyroid	+	+	<u>, ×</u>	+		+	+	+		+	+	+	+	+	+	*	A .	+	+	-	-	<u> </u>				46
C-CELL ADENOMA C-CELL CARCINOMA			x	-	·	• 		• 						<u> </u>		×	^		·		<u> </u>		x		_	4 ⁶ 1 2
PARATHYROID	_	+	+	-	+	+	+	-	+	+	-	+	+	+	+	+	A	-	+	+	-	+	+	-	+	39
PANCREATIC ISLETS Islet-Cell Carcinoma	^	+	+	+	+	+	+	+	+	+	•	+	+	+	+	+	A	+	+	+	+	*	+	+	+	
REPRODUCTIVE SYSTEM Mammary Gland	A	+	+	÷	N	н	N	N	N	N_	+	+	+	N	+	÷	A	+_	N	N	N	+	N	N		48×
TESTIS INTERSTITIAL-CELL TUMOR		*	*	* ×	+	* *	-	* *	*.	* *	÷.	*	*	+ x	* ×	* ×	A	÷ x	* ×	+	* ×	*	*	* *	ţ	47 39
PROSTATE Adendma, Nos	-	-	+	÷	+	+	+	+	+	+	-	-	+	+	+	-	A	+	-	+	+	*	-	+	*	35 ₂
PREPUTIAL/CLITORAL GLAND Carcinoma,nos Adenoma, nos	^	N	H	N	N	N	N	N	N	N	N	N	н	N	N	N	A	N	N	N	N	N	N	N	м	48× 3 1
PECIAL SENSE ORGANS	+-																								+	
EAR Sebaceous Adenocarcinoma	A	N	м	N	N	N	Ν.	N	N	N	N	N	N	N	N	N	A	N	N	N	N	м	N	N	N	48× 1
DODY CAVITIES Peritoneum Sarcoma, Nos	A	н	N	N	Ņ	N	N	N	N	N	N	N	N	N	N	N	A	N	N	н	N	н	N	н	N	48×
TUNICA VAGINALIS Mesothelioma, Nos	A	+	+	+	+	+	N	+	+	+	+	+	+	+	*	+	A	+	+	+	+	+	+	+	+	48× 1
																						÷			-	
ALL OTHER SYSTEMS	1																									

TABLE A3. MALE RATS: TUMOR PATHOLOGY (CONTINUED) LOW DOSE

* ANIMALS HECROPSIED * ANIMALS HECROPSIED *: TISSUE EXAMINED MICROSCOPICALLY -: REQUIRED TISSUE NOT EXAMINED MICROSCOPICALLY C: NECOROPSY, NO HISTOLOGY DUE TO PROTOCOL X: TUMOR INCIDENCE N: HECROPSY, NO AUTOLYSIS, NO MICROSCOPIC EXAMINATION N: HECROPSY, NO AUTOLYSIS, NO MICROSCOPIC EXAMINATION N: NECROPSY PERFORMED

TABLE A3.

INDIVIDUAL ANIMAL TUMOR PATHOLOGY OF MALE RATS IN THE 2-YEAR STUDY OF VINYLIDENE CHLORIDE

HIGH DOSE

ANIMAL NUMBER	0	0	0	0	0 0 5	0	0	0 0 8	0	01	0 1 1	0 1 2	0 1 3	0 1 4	0 1 5	0 1 6	0 1 7	0 1 8	1	0 2 0	0 2 1	22	0 2 3	0 2 4	
WEEKS ON Study	1	1	1	1	0	0	0	0	0	1	0	1	0	-	9	0	0	0	0	1	0	-	1	2	
INTEGUMENTARY SYSTEM	- 41	21	4	41	41	41	4	4	4	41	- 41	41	41.	41	41	41	41	41	41	_31	4	4	4	31	_
SKIN Keratoacanthoma	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	* *	٠	+	+	+	+	
SUBCUTANEOUS TISSUE FIBROMA	+	+	+	+	+	+	+	+	÷	+	+	+	+	+	ţ	+	+	+	+	+	+	+	+	+	-
LIPONA															x										
ESPIRATORY SYSTEM																									
LUNGS AND BRONCHI Osteosarcoma, metastatic	Ļ	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	•	+	+	* x	+	
TRACHEA	+	-	+	+	-	+	+	-	+	+	+	+	+	+	+	+	ŧ	-	+	+	+	+	-	+	
EMATOPOIETIC SYSTEM	1																								
BONE MARROW	++	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	-	+	+	+	+	_
SPLEEN	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	•	+	+	+	+	_
LYMPH NODES	+	-	+	+	+	+	+	+	+	+	+		+	+	+	+	ŧ	+	+	+	+	+	+		
THYMUS	-	-	-	-	-	-	-	7	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	
IRCULATORY SYSTEM																									
HEART	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	_
IGESTIVE SYSTEM		· .																							
SALIVARY GLAND	+	. <u>+</u>	- <u>+</u>	_ <u>+</u>	+	<u>+</u>	<u>+</u>	+	+	<u>+</u>	<u>+</u>	-	<u>.</u>	+	<u>.</u>	<u>+</u>	<u>+</u>	•	<u>+</u>	<u>.</u>		<u>+</u>	<u>+</u>	<u>+</u>	
LIVER Neoplastic nodule Hepatocellular carcinoma	Ľ	+	+	+	+	+	+	-	•	+	+	+	+	-	+	+	+	+	+	+	•	•	•	+	
BILE DUCT	+	+	÷	+	+	+	+	-	+	+	+	٠	+	-	+	+	+	٠	+	+	+	+	+	+	
GALLBLADDER & COMMON BILE DUCT	N	N	N	N	N	N	N	N	N	N	N	N	N	N	Ν.	N	N	N	٠N	N	N	N	Ν.	N	
PANCREAS	+	+	+	+	+	+	÷	+	+.	+	+	+	+	+	÷	+	+	+	÷	+	+	+	+	+	
ESOPHAGUS	÷	+	+	+	÷	+	+	+	+	+	+	+	+	+	+	+	+	-	+	+	+	+	+	+	
STOMACH	+	+	.+	+	+	+	+	+.	.+	t	+	+	+	+	+	+	+	+	+	+	+	+	+	+	
SMALL INTESTINE	+	.+	.+	+	+	+	+	+	+	+	-	ŧ	+	+	+	t	+	+	+	+	+	+	+	-	
LARGE INTESTINE	+	+	+	-	+	٠	+	+	+	+	+	+	-	+	+	÷	+	+	-	÷	÷	+	+	-	
RINARY SYSTEM	+				-																				-
KIDNEY	+	+	+	+	+	+	+.	+.	+	+	+	+	.+	+	+	+	+	+	+	. t	.+_	+	+	+	_
URINARY BLADDER	+	+	+	+	+	+	+	+	+	٠	+	٠	+	+	+	÷	+	٠	+	+	+	+	÷	-	
NDOCRINE SYSTEM																								<u>.</u>	-
PITUITARY Carcinoma, Nos Adenoma, Nos Chromophobe Adenoma	+	-	+	+	+ ×	٠	+ x	+	+ x	•	-	•	+	+	+	+	+	+ x	+ x	•	+ x	+	•	٠	
CHROMOPHOBE CARCINOMA	ļ																					X			
ADRENAL Pheochromocytoma	+	-	+	+	+	+	+	*	*	+	+	+	+	*.	+	*	* x	+	*	+	*	+	+	*	
THYROID Papillary Adenocarcinoma C-Cell Adenoma C-Cell Carcinoma	+	-	٠	٠	-	*	٠	٠	٠	٠	•	٠	•	•	+	•	•	-	+	+	+	٠	•	•	
PARATHYROID		-	+	-	-	÷	+	+	+	+	-	+	-	+	+	+	+	-	+	+	+	÷	+	÷	
PANCREATIC ISLETS ISLET-CELL ADENOMA ISLET-CELL CARCINOMA	+	+	+	+	+	٠	÷	+	+	*	+	+	+	+	+	+	+	+	+	+	+	٠	٠	٠	
EPRODUCTIVE SYSTEM				x					x		×								×						
MAMMARY GLAND FIBROMA FIBROADENOMA	N	N	٠	N	к	٠	H	+	٠	٠	٠	٠	N	H	N	+	٠	+ x	÷	÷	N	٠	•	N	
TESTIS INTERSTITIAL-CELL TUMOR	ţ	* *	÷	* *	÷	÷	+ *	÷	+ ¥	+ ¥	÷	÷	÷	+ *	+ ×	+ ×	÷	÷	* *	+ ¥	+ ¥	+ X	+ ¥	+ ¥	
PROSTATE ADENOMA, NOS	-	+	-	+	+	+	+	-	+	+	+	+	+	+	-	+	+	+	+	+	+	+	+	-	-
PREPUTIAL/CLITORAL GLAND	N	N	N	N	N	N	N	N	N	H	N	N	N	N	N	N	N	N	N	N	H	N	N	N	-
CARCINOMA, NOS ERVOUS SYSTEM																									
BRAIN ASTROCYTOMA	1 t	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	٠	٠	
PECIAL SENSE ORGANS	Ļ																								
EAR FIBROSARCOMA	N	N	N	N	N	N	N	N	N	N	N	H	N	H	N	N	N	N	N	N	N	N	N	N	
ODY CAVITIES	+																								-
PERITONEUM Fibrosarcoma	N	N	N	H	N	H	H	H	N	N	N	N	N	H	N	N	N	N	N	N	N	н	N	N	
LE OTHER SYSTEMS															-										-
MULTIPLE ORGANS NOS Mesothelioma, Nos	N	N	N	N	N	н	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	

-: REQUIRED TISSUE NOT EXAMINED MICKUSCUFICALLT X: Tumor Incidence N: Necropsy, no Autolysis, no Microscopic Examination

A: AUTOLYSIS A: AUTOLYSIS M: ANIMAL MISSING B: NO NECROPSY PERFORMED

ANIMAL	2	2	2	2	3	3	3		3	3		3	3	3	4	0	4	4	4	4	4	4	0	4	5	to7
WEEKS ON STUDY		7	-8 -1 0	1	1	ᆥ	-	11-	 	5		7	8	<u>9</u> 1		1	2	3	4 1 0	5 0 9	1	7	8	2		TOTAL TISSUES TUMORS
STUDY INTEGUMENTARY SYSTEM	4	2	4	ő	4	4	<u> </u>	4	4	ź	4	4	3	4	žİ.	4	3	4L	4	8	Å	<u>ڈا</u>	اة	š	Å	IUNUKS
SKIN Keratoacanthoma	+	+	+	+	+	N	A	٠	+	A	+	+	•	+	N	÷	+	•	+	+	٠	٠	+	+	+	48×
SUBCUTANEGUS TISSUE Fibroma Lifoma	·	+	+	*	+ ×	N	A	+	+	A	*	+	+	+	N	+	+	*	+	+	+	•	+	+	•	48× 4 1
RESPIRATORY SYSTEM														_											-	
LUNGS AND BRONCHI Osteosarcoma, metastatic	ŀ	+	+	+	+	-		+	+		+	•	+	+	+	+	+	+	+	+	+	+	+	+	٠	47
TRACHEA	+	+	+	-	+	-	A	-	+	A	÷	+	-	+	÷	+	+	+	-	+	+	ŧ	+	+	+	38
HEMATOPOIETIC SYSTEM																										
BONE MARROW	++	<u>+</u>	+	<u>+</u>	<u>+</u>		<u> </u>		<u>+</u>	<u>A</u>		+	<u>+</u>	<u>+</u>	+	<u>+</u>	*	<u>+</u>	<u>+</u>	<u>+</u>	. <u>+</u>	<u>*</u>	_ <u>+</u>	+	-	46
SPLEEN	+	+	+	+	<u>+</u>	•	A.,		. <u>+</u>	<u>A</u>	<u>+</u>	+	<u>+</u>	<u>+</u>	. <u>+</u>	<u>+</u>	<u>+</u>	<u>+</u>	+	<u>+</u>	. <u>+</u>	<u>+</u>	<u>+</u>	<u>+</u>	-1	<u>48</u> 44
LYMPH NODES Thymus	f-	- <u>-</u> -	- <u>-</u>	-	<u> </u>	_	<u>A</u>	-	<u> </u>	A	-	-	-	-	-	-	-	-	-	-	-	-	- <u>`</u>	<u> </u>	-	
CIRCULATORY SYSTEM																<u>.</u>										
HEART	1.	+	+	+	+	-	A	+	+	A	+	+	•	+	•	•	+	+	÷	+	+	+	+	÷	+	47
DIGESTIVE SYSTEM	+																								-	
SALIVARY GLAND	+	+	+	+	+		A	+	+	A	+	+	+	+	+	<u>+</u>	+	+	+	+	+	+	+	+	-+	46
LIVER Neoplastic Nodule Hepatocellular Carcinoma		+	+	+	+	-	٨	+	•	•	+	+	+	+	+	+	+	*	*	•	+	+	+	+ _x	+	45 2 1
BILE DUCT	+	+	+	+	+	-	A	+	+	A	+	+	+	+	+	•	+	٠	÷	+	+	+	+	+	+	45
GALLBLADDER & COMMON BILE DUCT	<u>⊢</u> ∎_	<u>N</u>	N	<u>N</u>	N	N	Α	N	N	Α	N	N	<u>N_</u>	<u>N_</u>	N	N	N	N	N	N	N	N	N	N	M	48×
PANCREAS	+	+	+	+	+	+	<u>A</u>	+	+	A	.	+	+	+	+	+	+	+	+	+	+	+	+	+	╧┥	48
ESOPHAGUS	++	+	+	-	+		<u>A</u>	+	+	<u>A</u>	+	<u>+</u>	-	+		<u>+</u>	+	+	-	+	<u>+</u>	+	+	+	+	43
STOMACH	+	+	+	+	+		<u>.</u>	*	•	<u>A</u>	+	+	•	+		<u>+</u>	<u>+</u>	+	<u>+</u>	<u>+</u>	+	<u>+</u>	+	•	+	
SMALL INTESTINE Large intestine	+	*	+	+	+		<u>A</u> .		<u>+</u>	<u>A</u>		<u>+</u>	+	<u>+</u>	+	<u>+</u>	++	-	<u>*</u>	+	*	+ +	+	÷	╡	<u> </u>
URINARY SYSTEM	Ļ				<u> </u>		A		+	A	+	+	-	+	+	+	_			-	-		_		-	
KIDNEY	1.	+	÷	+	÷	•	A	÷	+	A	•	•	÷	•	•	+	÷	÷	+	+	÷	÷	+	÷	+	48
URINARY BLADDER	+	+	+	-	+	-	A	+	+		+	+	+	-	+	÷	+	-	+	+	+	+	+	+	•	43
ENDOCRINE SYSTEM	+																								-+	
PITUITARY Carcinoma,Nos Adenona,Nos Chromophobe Adenoma Chromophobe Carcinoma	+ ×	•	•	•	•	-	•	+ ×	+	•		*	-	+	* ×	•	* ×	•	+	+	+ X	+	•	•	+	44 10 1
ADRENAL Pheochromocytoma	+	+	+	+	+	+	A	+	+	٨	* x	+	+	+	+	+	+	+	+	+	* x	* x	+	+	*	47 13
THYROID Papillary Adenocarcihoma C-Cell Adenoma C-Cell Carcinoma	ŀ	* ×	+	-	+	-	A	•	+ x	A	+	+	-	+ x	+	+	+	+	-	•	+	+	+	+	ł	41 1 3
	+ <u>×</u>											<u>×</u> _			X										-	3
PARATHYROID Pancreatic islets Islet-cell adenoma	+++++++++++++++++++++++++++++++++++++++	+	- *	+	+	+	<u>A</u>	+	+	<u>A</u>	+	+	+	+	+	• •	+	+	+	+	+	+	+	+	•	32 48 2
ISLET-CELL CARCINOMA REPRODUCTIVE SYSTEM																								×	_	6
MAMMARY GLAND FIBROMA FIBROADENOMA	+ ×	+	+	N	٠	N	A	٠	N	A	+	+	N	N	+	÷	N	+	÷	N	N	+	+	+	•	48× 1
TESTIS	[<u>+</u>	÷	t	•	+	+	A	<u>+</u>	+	A	t	•	÷	÷	<u>.</u>	t	t	t	•	.	t	•	÷	÷	÷	48
INTERSTITIAL-CELL TUMOR PROSTATE Adenoma, Nos	× +	<u>×</u> +	•	-	× -	-	A	<u>×</u>	<u>×</u> +	A	* *	<u>×</u>	<u>×</u> +	*	<u>×</u> +	*	<u>×</u>	×	×	<u>×</u>	*	<u>×</u>	<u>×</u> +	* *	× -	47 32 2
PREPUTIAL/CLITORAL GLAND CARCIHOMA,NOS	N	N	N	N	N	N	٨	N	N	A	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	48× 1
NERVOUS SYSTEM																										
BRAIN ASTROCYTOMA Special sense organs	 *	+	+	•	+	-	A	+	•	A	+	+	+	+	•	+	+	•	+	•	•	+	+	•	+	47 1
EAR Fibrosarcoma	N	N	N	H	N	H	A	N	N	A	N	H	* ×	N	N	N	N	H	N	H	н	N	н	N	н	48× 1
BODY CAVITIES Peritoneum Fibrosarcoma	N	N	н	N	N	N	A	N	N	A	N	N ·	N	N	N	N	N	N	N	H	N	N	N	N	N	48× 1
ALL OTHER SYSTEMS	+																								_	
MULTIPLE ORGANS NOS Mesothelioma, Nos Leukemia,Nos	H	N X	N	N _X	N	N	A 	N 	N	A	N		н <u>х</u>		н х	N	N	н <u>х</u>	N	N	N	N	N	N	N	48× 1 8

TABLE A3. MALE RATS: TUMOR PATHOLOGY (CONTINUED) HIGH DOSE

* ANIMALS NECROPSIED * ANIMALS NECROPSIED -: TISSUE EXAMINED MICROSCOPICALLY -: REQUIRED TISSUE NOT EXAMINED MICROSCOPICALLY X: TUMOR INCIDENCE N: NECROPSY, NO AUTOLYSIS, NO MICROSCOPIC EXAMINATION

: NO TISSUE INFORMATION SUBMITTED C: Necropsy, no histology due to protocol A: Autolysis N: Animal Missing B: No Necropsy Performed

TABLE A4.

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IND!VIDUAL ANIMAL TUMOR PATHOLOGY OF FEMALE RATS IN THE 2-YEAR STUDY OF VINYLIDENE CHLORIDE

VEHICLE CONTROL

ANIMAL	T 01								 0T										<u></u>	01	11		-		
AN I MAL NUMBER	5	5	5	0 5 4	0 5 5	0 5	5	0 5 8	5	6	6	6	6	64	6	6	67	61	6	71	7	2	ž	7	7 5
WEEKS DN Study	1	1	0	1	1	0	<u>ģ</u>	1	0	1	8	0	8	1	1	1	1	1	8	1	0 8	0	Ĭ	1	Ť
INTEGUMENTARY SYSTEM	4	اۆ	6	4	4	_íl	ś	4	9	4	ŏi	ž	ŏ	4	4	.il	4	ž	5	4	ŏi	6	Å.	3	Š
	1.	+	+	+	+	+	÷	+	+	+	+	÷	+	+	+	+	+	+	÷	÷		+	•	+	+
SUBCUTANEOUS TISSUE Sebaceous Adenocarcinoma	<u> </u>												_												
RESPIRATORY SYSTEM																									
LUNGS AND BRONCHI Alveolar/bronchiolar Adenoma	L+	+	+	*	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	A	+	+	+	+
TRACHEA	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	-	+	A	+	+	+	+
HEMATOPOIETIC SYSTEM	+																								
BONE MARROW	+	+	+	+	+	+	+	+	÷	+	+	+	+	+	+	+	+	+	+	+	A	+	+	+	+
SPLEEN	L+	+	+	+	+	+	+	+	+	+	÷	+	+	÷	+	+	+	+	+	+	A	+	+	+	+
LYMPH NODES	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	-	-	A	+	+	+	-
THYMUS	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	A	-	-	-	-
CIRCULATORY SYSTEM	+																								
HEART	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	A	+	+	+	+
DIGESTIVE SYSTEM	┢									·															
SALIVARY GLAND	Ŀ	÷	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	A	+	+	+	+
LIVER Neoplastic Nodule Leukemia, Nos	+	+	+	+	+	+	+	+	+	+	+	+	+	* x	+	٠	+	+	* x	+	A	+	+	+	÷
BILE DUCT	L+	. +	+	+	+	+	+	+	+	÷	+	+	÷	+	+	÷	+	+	+	+	A	+	+	+	+
GALLBLADDER & COMMON BILE DUCT	N	N	N	N	N	N	N	N	N	н	N	H	N	N	N	N	N	N	N	N	A	N_	N	N	N
PANCREAS	I +	+	÷	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	A	+	+	+	+
ESOPHAGUS	+	+	+	+	+	+	+	+	÷	+	+	+	+	+	+	+	+	+	+	-	A	+	+	+	+
STOMACH Squamous cell carcinoma	•	+	+	+	+	÷	+	+	*	+	+	+	+	+	+	+	+	+	+	٠	A	+	+	+	+
SMALL INTESTINE	1+	+	+	+	+	ŧ	+	+	+	+	+	+	+	<u>+</u>	<u>+</u>	+	+	+	+	+	Α.	+	+	+	+
LARGE INTESTINE	+	+	+	+	+	+	+.	+	÷	+	+	+	+	÷	+	+	÷	+	+	÷	A	+	+	+	+
URINARY SYSTEM	+																								_
KIDNEY	<u>+</u>	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	A	+	+	+	
URINARY BLADDER	+	-	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	A	+	+	+	+
ENDOCRINE SYSTEM	+							•																	_
PITUITARY Carcinoma,nos Adenoma, nos	ŀ	+	+	÷	+	+ X	+ x	+ X	+ x	+	•	+	+	+ x	+	*	+ x	+	+	+		-	+	+ x	+
ADRENAL Cortical Adenoma Phedchromocytoma	+	+	+	+	+	+	+	+	+	+	٠	+ ¥	+	+	•	+	٠	+	+	+	A	+	+	+	+
THYROID C-CELL CARCINOMA	·	+	+	÷	+	+	+	+	+	+	+	+	+	+	÷	+	+	+	+	٠	A	•	+	+	+*
PARATHYROID	+	+	-	+	+	+	-	+	+	+	+	+	+	+	+	+	-	+	-	+	A	-	-	+	
REPRODUCTIVE SYSTEM	+					-																			
MAMMARY GLAND	+	+	+	+	+	+	+	+	÷	+	+	+	+	N	÷	+	+	+	+	÷	A	+	+	+	N
ADENOCARCINOMA, NOS Fibroma					x													x							
FIBROADENOMA	+×						X				<u>x</u>					<u>X</u>			X						
UTERUS Endometrial stromal polyp Endometrial stromal sarcoma	×	-	+	* ×	+	×	•	+	+	+	+	*	+	+	+	+	•	+	+	+	A	+	•	•	•
OVARY	+	-	+	+	+	+	+	+	+	-	+	+	+	+	+	+	٠	+	+	+	A	+	+	+	+
NERVOUS SYSTEM	\mathbf{t}																								
BRAIN Carcinoma, nos, invasive Adenoma, nos Astrocytoma	ŀ	+	+	+	+	+	+	+	+	+	+	+	+	+	•	* ×	+	+	+	+	A	+	+	+ ×	+
																				_					
ALL OTHER SYSTEMS	+																								
ALL OTHER SYSTEMS Multiple organs nos Malignant Lymphoma, nos Malig.Lymphoma, Unphocytic type Malig.Lymphoma, Lymphocytic type	N	N	N	N	N	N	н	N	N	N	N	N X	N	N	N	N	N	N	N	N	A	NX	N	N	N

+: TISSUE EXAMINED MICROSCOPICALLY : NO TISSUE INFORMATION SUBMITTED -: REQUIRED TISSUE NOT EXAMINED MICROSCOPICALLY C: NECROPSY, NO MISTOLOGY DUE TO PROTOCOL X: TUMOR INCIDENCE N: NECROPSY, NO AUTOLYSIS, NO MICROSCOPIC EXAMINATION M: NECROPSY, NO AUTOLYSIS, NO MICROSCOPIC EXAMINATION M: ANIMAL MISSING B: NO NECROPSY PEFFORMED

ANIMAL NUMBER	0	7	0 7 8	0 7 9	0 8 0	8	8	0 8 3	0 8 4	0 8 5	8	8	8	8	2	1	9	9	9	9	9	2	8	9	ò	TOTA
WEEKS ON Study	0	1	-8 1 0 4	1	1	1	1	1	1	9	0	0	2	0	0	0	0	0	0	0	0	6	0	2	- 8 8	TISSU
INTEGUMENTARY SYSTEM				<u>_</u>	- 1		- 1	-11.		<u> </u>		-11		<u></u>			. 1.1								1	
SUBCUTANEOUS TISSUE Sebaceous Adendcarcinoma	+	+	+	+	•	+	+	+	+	+	+	+	+	+	+	N	+	•	*	•	+	+	+	+	+	49
RESPIRATORY SYSTEM																										
LUNGS AND BRONCHI Alveolar/Bronchiolar Adenoma	<u> </u>	+	+	+	+	+	+	+	-	+	+	<u>×</u>	+	+	* ×	+	+	+	+	+	+	+	+	+	+	49
TRACHEA	+	+	+	+	+	+	+	+	+	+	+	+	+	+	-	-	+	+	+	+	+	+	+	+	÷+	46
HEMATOPOIETIC SYSTEM																									Т	
BONE MARROW	++-	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	┵	49
SPLEEN	<u>∔</u> +	+	+	+	+	+	+	+	+	+		+	+	+	+	+	+		+	+	+	+	•	+	4	- 49
LYMPH NODES	++	+	. +	+	+	+	+	+	+	<u>+</u>	+	+	+	+	+	+	+	+	+	+	+	+	+	+	4	46
THYMUS	-	-	-	-	-	-	-	-	-	+	-	-	-	+	-	- 1	-	-	-	-	-	-	-	-	-	2
CIRCULATORY SYSTEM																										
HEART	+	+	+	+	•+	+	+	+	+	+	+	+	+	+	+ '	+	•	+	+	+	+	+	+	+	+	49
DIGESTIVE SYSTEM	1																								1	
SALIVARY GLAND	<u> -</u> -	+	.+	+	+	+	<u>+</u>	+	+	+	+	+	+	+	+	+	+	<u>+</u>	+	+	+	+	÷	+	ᅪ	. 48
LIVER NEOPLASTIC NODULE	+	+	+	* ×	+	+	+	+	+	* x	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	49
LEUKEMIA, NOS	1									<u>^</u>					x	x									\downarrow	
BILE DUCT	+	+	+	ţ,	+	+	+	+	•	+	+	+	+	+	+	+	+	•	+	+	+	+	+	+	+	49
GALLBLADDER & COMMON BILE DUCT	<u> N</u>	N	N	N	N	N	N	N	N	N_	N	N	N	N	N	N	N	N.	N	N	Ν.	Ν	N	N.	N	
PANCREAS	+	+	+	+	+	٠	٠	+	٠	+	÷	÷	+	+	+	-	•	+	+	+	+	٠	+	+	+	48
ESOPHAGUS	1+	+	+	+	+	+	+	+	+	+	+	+	+				+	+	+	+	+	+	+	+	∔	
STOMACH Squamous Cell Carcinoma	↓ •	+	+	+	+	+	+	•	+	+	+	•	•	-	•	-	+	+	+	+	+	•	+	•	•	47
SMALL INTESTINE	<u>+</u> +	+	+	+	+	+	+	+	<u>+</u>	+	+	+	-	-	+	<u> </u>	+	+	+	+	+	+	+	+	+	46
LARGE INTESTINE	+	+	+	+	+	+	+	+	+	+	+	+	-	-	-	-	+	-	+	+	-	+	+	+	+	43
URINARY SYSTEM																										
KIDNEY	++	+	+	+	+	+	+	+	+	+	_+	+	<u>+</u>	+	+	+	+	+	+	+	+	+	+	+	4	. 49
URINARY BLADDER	+	+	-	+	+	+	+	+	+	+	+	+	-	+	+	+	+	-	+	+	+	+	+	+	+	45
ENDOCRINE SYSTEM														_												
PITUITARY Carcinoma,nos Adenoma, nos	×	+	•	+	*	•	+ x	+	•	+	+	×	+ x	+	+	+	+ x	+ x	+ x	•	+	+ 	* x_	*	x	48 1
ADRENAL Cortical Adenoma Pheochromocytoma	+	* x	+	+	+	÷	+	+	+	+	+	•	٠	-	+	+	•	•	+	+	+	+	+	+	٠	48
THYROID C-CELL CARCINOMA	•	+	+	+	+	+	*	*	+	+	+	+	+	+	-	-	+	+	+	+	+	+	+	+. X	+	47
PARATHYROID	+	+	-	+	-	+	 +	÷	+	-	÷	_		+	-	-	÷	+	-	+		+	+	+	+	33
REPRODUCTIVE SYSTEM	1.			•	-		·	•	•		•						·	•							4	
MAMMARY GLAND Adenocarcingma, Nos fibroma fibroma	+	+	+	+	+	+	+	+	+	H	+	+	÷	N	+	÷	+	+	•	÷	•	•	٠	•	+	49
	<u>† </u>			<u>×</u>	<u> </u>	<u>.</u>			<u>.</u>						<u>×</u> _				<u> </u>		<u>.</u>			Ă	-†	1
UTERUS Endometrial stromal polyp Endometrial stromal sarcoma	Ļ	+ _X_	+	+	+	÷	×	+	*	×	*	•	*	•	•	*	•	•	•	*	*	+	*	•	1	48
OVARY	+	+	٠	+	+	+	+	+	+	+	+	+	+ .	+	+	+	+	+	+	+	+	+	+	+	+	47
NERVOUS SYSTEM	1												-												+	
BRAIN Carcinoma, nos, invasive Adenoma, nos Astrocytoma	+ ×	٠	+	+	٠	+	٠	+	+	+	+	•	+	+	+	+	+	+	+	+ 1	+	٠	•	•	•	49
ALL OTHER SYSTEMS	+												·												╉	
MULTIPLE ORGANS NOS Malighant Lymphoma, nos Malig.lymphoma, Dudiffer-Type Malig.lymphoma, Lymphocytic Type	N	N	N	N X	N	N	N	N	N	N	N	N	н	N	H	N	N	H	N	H	N	N	H	N	N	49

TABLE A4. FEMALE RATS: TUMOR PATHOLOGY (CONTINUED) VEHICLE CONTROL

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* ANIMALS NECROPSIED * IISSUE EXAMINED MICROSCOPICALLY -: REQUIRED TISSUE NOT EXAMINED MICROSCOPICALLY X: TUMOR INCIDENCE N: NECROPSY, NO AUTOLYSIS, NO MICROSCOPIC EXAMINATION N: NECROPSY, NO AUTOLYSIS, NO MICROSCOPIC EXAMINATION N: NECROPSY PERFORMED B: NO NECROPSY PERFORMED

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TABLE A4.

INDIVIDUAL ANIMAL TUMOR PATHOLOGY OF FEMALE RATS IN THE 2-YEAR STUDY OF VINYLIDENE CHLORIDE

LOW DOSE

AN IMAL NUMBER	0	0	2	0	0	0	0	<u></u>	0	0	2	0	0	8	0	0	0	0	0	0	0	9	9	<u> </u>	
WEEKS ON	┼╬	2	5	-1	-5	-6	ž	8	-11	- 8	6	- 6	-3	+	귀	6	6 7 1	-	- 81		눼	-2	3	4	_ <u>5</u> 1
STUDY	9	0	0	0	0	0	8	1	0	7	0	9	9	9	0	9	4	0	8	0	0	0 _4	0	0	0
INTEGUMENTARY SYSTEM	T																								
SUBCUTANEOUS TISSUE Lipoma Neurilemoma		+	*	+	+	+	+	+	+	* ×	+	•	+	+	•	+	+	+	•	+	+	+	+	•	+
RESPIRATORY SYSTEM	+					-															·				
LUNGS AND BRONCHI Carcinoma, Nos, metastatic Alveolar/Bronchiolar Carcinoma		+	•	+	+	+	+	•	+	+	+	+	+	+	+	+	+	+ x	+	+	+	+	+	+	+
TRACHEA	+	+	+	-	+	+	+	+	+	+	+	+	÷	+	+	÷	+	+	+	÷	-	+	+	+	+
TEMATOPOIETIC SYSTEM	+													·											
BONE MARROW	1.	+	+	+	+	+	+	+	+	+	+		+	+	+	+	+	+	+	+	+	+	+	+	ŧ
SPLEEN	1.	+	+	+	+	+	+	+	+	+	+	+	.+	+	+	+	.+	+	.+	+	+	+	<u>+</u>	+	. +
LYMPH NODES	L±	+	+	+	+	+	+	+	+	-	+	+	+	+.	+	+	+	+	+	-	+	+	+	+	+
THYMUS	-	-	~	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
CIRCULATORY SYSTEM																									
HEART	1.	+	+	+	+	+	+	+	+	÷	+	+	÷	÷	+	÷	+	÷	+	÷	+	+	+	+	+
DIGESTIVE SYSTEM																						-			
SALIVARY GLAND	1.	+	+		+	+	+	÷	+	÷	+	+	+	÷	÷	+	+	•	+	•	•	•	÷	•	+
LIVER	†÷	<u>-</u>	+	• •	+	+	<u>+</u>	 +	 +	+	• •	<u> </u>	+	÷.		+	+	•	+	+	+	• •	- <u>*</u>	 +	+
	H.			<u>.</u>	<u>.</u>	<u> </u>										+			+						+
BILE DUCT	+-		.	· * · ·		*	*	<u>+</u>	. <u>+</u>	<u>+</u>	<u>*</u>	+	+	+	<u>+</u>		+	+	_	*	+	.+	<u>+</u>	+	
GALLBLADDER & COMMON BILE DUCT	+N-	<u>N</u>	<u>H</u>	<u> </u>	<u>N</u>	N	N	<u>N</u>	<u>N</u>	<u>N</u>	<u>. N</u>	<u>N</u>	<u>N</u>	N	<u>N</u>	<u>N</u>	<u>. M</u>	<u>. N</u>	<u>N</u>	N	N	N	<u>N</u>	N	<u>N</u>
PANCREAS	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+
ESOPHAGUS	++-	*	+	<u>.</u>	<u>+</u>	+.	.+	.+	+	<u>+</u>		t		.+	*	+	. <u>+</u>	+	- + -		+	+		_ <u>+</u>	+
STOMACH	+-	+	- <u>+</u>	+	<u> </u>	+	+	+	+		+			<u>+</u>		+	+	+	-	+	+	.	+	+	_+
SMALL INTESTINE	++-	+	.		+	+	+	+	+	+	+				<u>+</u>	+	+	+		_ <u>+</u>	t		_+	+	+
LARGE INTESTINE LIPOMA	-	+	+	+	+	+	+	+	+	+	+	+	+	+	+	* x	+	+		+	+	•	٠	+	+
IRINARY SYSTEM	1-																								
KIDNEY	+	+	+	+	+	+	+		+	+	+	+	+	+	+	+	+	+	+	+	+	+	ŧ	+	+
URINARY BLADDER TRANSITIONAL-CELL CARCINOMA	+	٠	+	+	٠	٠	+	+	+	+	٠	÷	+	+	+	+	+	+	-	٠	٠	٠	+	•	-
NDOCRINE SYSTEM							·																		
PITUITARY Carcinoma, nos Adenoma, nos	+ x	+ x	+	+	+	٠	+ x	+	+ x	+ x	+ x	+ x	+	+ x	+ x	+	+	+ x	+	+	* x	-	+ x	+	+ x
CHROMOPHOBE ADENOMA	+												X												-
ADRENAL Cortical Carcinoma Pheochromocytoma	L.	+	+	+	+	+	+	+	+	+	+	+	•	+	+ _x_	+	+	+	+	+	*	+ x	•	+	+
THYROID Follicular-cell carcinoma C-cell adenoma C-cell carcinoma	+	+	+	+	•	٠	+	+	+	+	+	+	+	+	+	+	*	+	+	•	-	•	+	+	+
PARATHYROID	1.	+	+	+			•	+	+	+	+	-	+	+	+			+		*		*	+	+	<u> </u>
	Ħ	÷	÷		+	 •			•	÷	÷	•	<u> </u>	- <u>*</u>	<u>`</u>	•	÷			- <u>*</u>		- <u>*</u>	- <u>*</u>	÷	<u>*</u>
PANCREATIC ISLETS ISLET-CELL CARCINOMA			Ŷ	•	·		·	·	-	,	·	•	·	•	•	•	,	,	ŕ	ŕ	ŕ			•	Ĩ
EPRODUCTIVE SYSTEM	1													÷											
MAMMARY GLAND Carcinoma,nos Adenoma, nos Adenocarcinoma, nos	N	•	+	* x	+	+	+	+	+	H	+	+	•	+	•	•	+	+	+	+	٠	٠	+	+	•
FIBROADENOMA												x	x	x		x		x				x			
UTERUS Sarcoma, nos Endometrial stromal polyp	Ŀ	•	+	+	+	+	+	+	+	•	+	+	+	*	+	+	•	+ 	-	•	•	•	•	+	•
OVARY	+	+	+	+	+	+	+	+	+	÷	+	+	+	÷	+	÷	٠	+	-	÷	+	÷	+	+	+
ERVOUS SYSTEM	<u>+</u>																								
BRAIN	+	+	+	+	+	+	+	+	٠	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+
ADENOMA, NOS																									
LL OTHER SYSTEMS	Γ																								_
MULTIPLE ORGANS NOS Malignant Lymphoma, nos Leukemia, nos Undifferentiated Leukemia Myelomonocytic Leukemia Lymphocytic Leukemia	N	N	N	N X	н	H	N	H	N	N	N	N	N X	N	N	N	N	N	N X	N	N	N	N	N	N

-: REQUIRED TISSUE NOT EXAMINED MICROSCOPICALLY X: TUMOR INCIDENCE N: NECROPSY, NO AUTOLYSIS, NO MICROSCOPIC EXAMINATION

C: NECROPSY, NO HISTOLOGY A: AUTOLYSIS M: Animal Missing B: No Necropsy Performed

ANIMAL NUMBER	0	0 7 7	0 71 81	0 7 9	8	0 8 1	0 8 2	0 8 3	41	0 8 5	0 8 6	8	0 8 8	01 8 9	0 9	0 9	0 9 2	0 9 3	0 9	0 9 5	0 9 6	0 91 71	9	91	0 0	TOTAL
WEEKS ON STUDY	11	1	0	1	1	0	2	0	0	5 0 9	01	1	11	8	8	3	0	1	0	1	1	9	01	91	0	TISSUES
INTEGUMENTARY SYSTEM	4	3	_11	2	41	3	0	41.	1	0	41	41	41	8	91	41	41	4	61	ना	41	11	4	4	4	
SUBCUTANEOUS TISSUE LIPOMA NEURILEMOMA	+	+	+	+	٠	+ X	•	+	+	+	+	+	+	+	+	+	÷	+	+	٠	٠	•	•	٠	+	50× 1 1
RESPIRATORY SYSTEM	1-															•		•								
LUNGS AND BRONCHI Carcingma, Nos, metastatic Alvedlar/bronchiolar carcingma	+	+	+	+	+	+	+	+	+	*	+	.+	+	+	+	+	+	+	+	•	+	+	+	+	-	50 1 1
TRACHEA	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	-	47
HEMATOPDIETIC SYSTEM														_												
BONE MARROW	++	+	+	+	<u>+</u>	+	+	+	+	<u>+</u>	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	50
SPLEEN	++	+	<u>+</u>	_+	+	<u>+</u>	+	<u>+</u>	+	+	+	+	+	ŧ.	+	+	+	+	+.	+	+	+	+	+	+	50
LYMPH NODES	++	+	. +.	+		+			+	+	+	<u>+</u>	+	+	+		+	+	+	+	+	+	+	+	-+	45
THYMUS		-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	<u> </u>	-	-	-	-	-	-	-	-	0
CIRCULATORY SYSTEM																										
HEART		+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	50
DIGESTIVE SYSTEM	T																			_						•
SALIVARY GLAND	++-	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	-+	50
LIVER	++	+	+	+	+	+	+	+	+	+	+	+	+	+	<u>+</u>	•	+	+	<u>+</u>	+	+	+	+	. +	+	50
BILE DUCT	++-	+	+	<u>+</u> _	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	-+	50
GALLBLADDER & COMMON BILE DUCT	-N	N	N	N	N	N	N	N	<u>N</u>	N	N	<u>N</u>	<u>N</u>	N	<u>N</u> _	N	N	<u>N</u> _	Ν.	N	.N.	<u>N</u>	Ν.	N	<u>_N</u>	50×
PANCREAS	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	•	+	+	+	+	+	+	+	+	50
ESOPHAGUS	+	+	+	+	+	+	+	+	+	+	+	+	+	+	-	+	+	+	+	+	•+	+.	+	+	-+	49
STOMACH	+	<u>+</u>	+	+	*	+.	+	+	+	*	+	+	+	+	+	+	+	+	-	+	+	+	+	+	+	48
SMALL INTESTINE	+	+	+	+	+	+	+	+	+	+	+	+	+	.+.	-	<u>+</u>	+	+		+	+	_+	*_	<u>+</u>	-+	- 46
LARGE INTESTINE Lipoma	+	+	+	+	+	+	+	+	+	+	+	+	+	+	-	+	-	+	-	+	+	-	+	-	+	43
URINARY SYSTEM																									-	
KIDNEY	1+	÷	+	+	+	+	+	+	+	+	÷	+	+	+	÷	+	+	+	÷	+	+	+	+_	+	+	49
URINARY BLADDER Transitional-Cell Carcindma	-	* x	+	+	+	+	+	+	+	+	+	+	+	+	-	+	+	+	-	+	+	٠	+	+	٠	45 1
ENDOCRINE SYSTEM			<u>.</u>		-														-							
PITUITARY Carcinoma, Nos Adenoma, Nos Chromophobe Adenoma	+	• ×	•	•	+ x	+	•	+	+ x	+ ×	+ x	+ _x	+	+	+	+	+	+	+	+	+	+ x	+ x	+ x	+	49 1 20 2
ADRENAL Cortical Carcinoma Pheochromocytoma	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	٠	+	+	* ×	+	50 1 2
THYROID Follicular-cell carcinoma C-cell Adenoma	+	+ x	+	+	+	+	+	٠	+	+	+	+	٠	+	•	٠	+	+	+	-	-	+	٠	+	+	47
C-CELL CARCINOMA Parathyroid	1.				 ^		,											<u> </u>							<u>^</u>	39
PARAINIRUID Pancreatic islets islet-cell carcinoma	t ×	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	50 50
REPRODUCTIVE SYSTEM																										
MAMMARY GLAND Carcinoma, Nos Adenoma, Nos Adenocarcinoma, Nos	N	+	+	+	+	+	+	N	•	H X	+	٠	•	•	٠	+	٠	+	٠	٠	+	N	+ x	N	+	50× 1 1
FIBROADENOMA	1.		Ĵ	×	,	Ĵ	Ĵ		, ,	,		,	,	×							,				+	14 69
UTERUS Sarcoma, nos Endometrial stromal Polyp	+	x	x	•	+	<u>×</u>	-	-	<u>x</u>	• 		<u>x</u>	• 		•	•	•	x	•	<u>x</u>	•	• 	-	<u>x</u>	_	49 1 9
OVARY	+	+	+	*	<u> </u>	+	<u>+</u>	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	49
NERVOUS SYSTEM														,							,					
BRAIN Adenoma, Nos All Other Systems	+	+	+	+	•	+	+	<u> </u>	+	+	+	•	•	+	•	+	+	•	+	+	+	×	+	+	+	50
ALL UINER SYSTEMS Multiple organs nos Malignant lymphoma, nos Leukemia,nos Undiferentiated leukemia	N	N	N	N X	N	N	N	N	N	N	N X	N	н	N	N	N	N	N	N	N	N	N	N	N	×	50× 1 3
MYELOMONOCYTIC LEUKEMIA																				x		x				

TABLE A4. FEMALE RATS: TUMOR PATHOLOGY (CONTINUED) LOW DOSE

.

* ANIMALS NECROPSIED +: TISSUE EXAMINED MICROSCOPICALLY -: REQUIRED TISSUE NOT EXAMINED MICROSCOPICALLY X: TUMOR INCIDENCE N: NECROPSY, NO AUTOLYSIS, NO MICROSCOPIC EXAMINATION

: NO TISSUE INFORMATION SUBMITTED C: NECROPSY, NO HISTOLOGY DUE TO PROTOCOL A: AUTOLYSIS M: ANIMAL MISSING B: NO NECROPSY PERFORMED

TABLE A4.

INDIVIDUAL ANIMAL TUMOR PATHOLOGY OF FEMALE RATS IN THE 2-YEAR **STUDY OF VINYLIDENE CHLORIDE**

HIGH DOSE

ANIMAL NUMBER	0	0 5 2	0 5 3	0 5 4	0 5 5	0 5 6	0 5 7	0 5 8	0 5 9	0 6 0	0 6	6	6	0 6 4	0 6 5	6	6	0 6 8	6	0 7 0	0 7	0 7 2	0 7 3	0 7 4	7
WEEKS ON Study		1	0	1	1	1	9 9	0	1	0	- 9	2	1	1	9	1	i	9	0 8		1	0	1	1	1
ESPIRATORY SYSTEM	Å.	Å	ź	Å	4	4	6	3	4	3	ģ	4	4	4	8	ž	3	4	ī	4	3	1	4	ě.	4
LUNGS AND BRONCHI Adenocarcinoma, Nos, Metastatic Alveolar/Bronchiolar Adenoma	+	+	٠	+	+	+	+	A	+	A	÷	+	٠	٠	+	A	•	٠	٠	+	* ×	+	+	٠	•
TRACHEA	+	-	÷	+	+	+	+	A	+	A	+	+	+	÷	+	A	+	+	-	+	+	-	+	÷	4
EMATOPOIETIC SYSTEM	–																			_					
BONE MARROW	+	÷	÷	+	+	÷	+_	A	+	_A_	÷	+	+	+	÷	A	+	÷	÷	+	+	÷	÷	+	
SPLEEN	+	+	+	+	+	+	+	A	÷		+	+	+	+.	+	Α.	+	+	÷	+	+	+	+	÷	
LYMPH NODES	+	+	+	+	.+	+	+	A	÷	A	+	÷	+	+	+	Α	+	+	+	+	+	+	+	+	
THYMUS	-			-		-	+	A	-	A	-	-	-	-	-	A	-	+		-	-	+	-	-	
IRCULATORY SYSTEM	<u> </u>																								
HEART	+	÷	+	+	÷	÷	+	A	÷	A	+	+	+	+	+		+	÷	÷	÷	+	+	+	+	
IGESTIVE SYSTEM	<u> </u>												-												-
ORAL CAVITY Papilloma, NOS Squamous cell carcinoma	N	N	N	N	N	N	м	A	N	A	N	N	N	N	N	•	N	N	N	N	N	N	N	N	'
SALIVARY GLAND	+	+	+	+	+	<u>+</u>	+	A	+	A	+	+	+	+	+	A	+	+	+	+	+	+	+	+	
LIVER	ŀ	+	+	_	_ <u>+</u> _	+	.+_	A	+	A	ŧ	+	+_	<u>+</u>	+	<u> </u>	+	+	÷	+	+	+	+	+	
BILE DUCT	+	+	+	+	+	+	+	A	+	A	+	+	+	+	+	<u> </u>	+	+	+	+	+	+	+	+	
GALLBLADDER & COMMON BILE DUCT	N	Ν.	N	N	N	N	<u>N</u> _	Α.	N	A	N	N	N	N	N	A	N	N	N	N	N	N	N	N	
PANCREAS	+	+	+	+	+	+	+	A	+	A	٠	+	+	+	+	<u>A</u>	+	+	+	+	+	+	+	+	
ESOPHAGUS	+	+	+	+	+	٠	+	A	+	A	+	+	+	+	٠	A	+	+	-	+	+	-	+	+	
STOMACH Adenocarcinoma, Nos	+	+	+	+	+	+	+	A	+	A	+	+	+	+	*		+	+	-	+	+	-	+	+	
SMALL INTESTINE	+	+	-	+	+	+	+	A	+	A	+	+	-	+	+	A	+	+	-	+	+		+	+	
LARGE INTESTINE	+	÷	+	+	+	+	+	A	+	A	+	+	-	+	+	A	+	+	÷	+	+	-	+	+	
RINARY SYSTEM	 																								_
KIDNEY Adenocarcinoma, Nos, Metastatic	•	+	+	+	+	+	+	A	+	A	+	+	٠	,+	+		+	+	+	+	* x	+	+	+	
URINARY BLADDER	+	٠	+	+	+	+	+	A	+	A	+	+	-	+	+	A	+	+	+	+	+	+	+	+	
NDOCRINE SYSTEM																									-
PITUITARY Adenoma, nos Chromophobe Adenoma	+	* ×	×	×	×	+ _x	+	A	*	A	*	+	+	*	*	A	+ x	+	×	+	+ x	+	+	-	
ADRENAL Pheochromocytoma	+	* x	+	•	+	+	+	A	+	A	+	+	+	+	+	A	+	+	+	+	+	+	+	+	
THYROID Follicular-cell Adenoma C-cell Adenoma C-cell Carcinoma	+	+	+	+ x	٠	+	* x	A	+	۸	٠	+	٠	+ X	•	A	+.	+	٠	٠	٠	-	+	+	
PARATHYROID	+	+	-	+	+	+	-	Α.	-	A.	+	-	+	+	+	A	+	+	+	+	+	-	+	+	_
PANCREATIC ISLETS	+	+	+	+	+	+	+	A	+	A	+	+	+	+	+	A	+	+	+	+	+	÷	+	+	
ISLET-CELL CARCINOMA																									
EPRODUCTIVE SYSTEM																									
MAMMARY GLAND Adenocarcinoma, Nos	*	н	+	+	+	N	N	A	+	۸	+	+	+	+	N	Α.	+	+	+	н	+	N	+	+	
FIBROMA FIBROADENOMA					<u>x</u>		Χ.	-	x								x								_
UTERUS	+	÷	+	+	+	+	+	A	+	A	+	+	+	+	+	A	٠	-	+	+	+	+	+	+	
PAPILLARY CARCINOMA Papillary Adenoma Endemetria Stroman Bolyb											v			x			, U							J	
ENDOMETRIAL STROMAL POLYP Endometrial stromal sarcoma											x						x							x	
OVARY Papilloma, Nos	+	+	+	+	+	+	+	A	+	A	+	+	+	+	+	A	+	+	+	+	+	+	+	+	
ERVOUS SYSTEM							_	_																	-
BRAIN Glioma, Nos	+	+	+	+	+	+	+	A	٠	A	* x	+	+	+	+	A	+	+	+	٠	+	+	+	+	
DDY CAVITIES																								••••	
PERITONEUM Adengcarcinoma, Nos, Metastatic	N		N			N		A					N								N				-
MESENTERY Endometrial stromal sarcoma, meta L other systems	N	N	H	N	N	N	N		N	A	N	н	N	N	N	A	N	N	N	H	N	H	N	N	1
LL UTHER STSTEMS Multiple organs nos Leukemia, nos Monocytic Leukemia	н	N	N	N	N	N	N	A	N	A	N	N	N	N	N	A	N	N	N	N.	H	H X	N	H	I

TISSUE EXAMINED MICROSCOPICALLY
 Required Tissue NOT Examined Microscopically
 Tumor incidence
 Necropsy, NO Autolysis, NO Microscopic Examination

: NO TISSUE INFORMATION SUBMITTED C: Necropsy, No Histology due to protocol A: Autolysis M: Anitmal Missing B: No Necropsy Performed

ANIMAL NUMBER	9 7 6	0 7 7	0 7 8	0 7 9	0 8 0	0 8 1	0 8 2	83	0 8 4	0 8 5	8 6	87	0 8 8	8 9	9	0 9	0 9 2	0 9 3	9	0 9 5	9	0 9 7	0 9 8	0 9 9	1 0 0	TOTAL
WEEKS ON Study	0	1	0	0	į	0	8	0	1	8	0	į	0	8	1	8	1	1	0	0	0	0	0	0	1	TISSUES
RESPIRATORY SYSTEM	41	_4_	_14	41	41	41	-01	41	.91	81	<u>4</u> 1	41	41	51	41	71	11	41	11	-41	4	41	01	41	4	
LUNGS AND BRONCHI Adenocarcinoma, Nos, metastatic Alveolar/bronchiolar Adenoma	+	+	A	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+ x_	+	+	+	+	+	+	^	45
TRACHEA	+	÷	A	+	+	+	+	+	+	÷	-	÷	+	+	٠	+	-	÷	÷	÷	+	ŧ	+	+		40
HEMATOPOIETIC SYSTEM																							-			
BONE MARROW	+	+		+	+	+	+	.+	+	+	+	ŧ	+	+	+	+	+	+	+	+	+	+	÷	+		45
SPLEEN	+	+	A	ŧ	+	+	+	+	<u>.</u>	+	+	+	+	+	+	+	+	+	+	+	+	+	. <u>+</u>	+	-	45
LYMPH NODES	+	+	Α.	+	+	+	+	+	+	-	+	-	+.	+	+	ŧ.	+	+	<u>+</u>	+	+	+	-	+		42
THYMUS	-	-	A	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	۸	3
CIRCULATORY SYSTEM																-										
HEART	•	+	A	+	+	+	+	+	+	+	+	+	٠	+	+	÷	+	+	+	+	+	+	+	+	A	45
DIGESTIVE SYSTEM												-														
ORAL CAVITY Papilloma, nos squamous cell carcinoma	N	N	•	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N X_	N	N	N	X	N	^	45× 1 1
SALIVARY GLAND	+	+		•	+	+	+	+	+	+	+	+	+	ŧ	÷	+	+	<u>+</u>	<u>+</u>	+	+	+	+	+		45
LIVER	+	+	Α.	÷	+	.+.	+	ŧ.	+	+	+	+	+	. <u>+</u>	+	<u>+</u>	+	+	+	<u>+</u>	+	+	+	+		45
BILE DUCT	+	+		+	+	+	+	+	+	+	+	+	+	٠	+	+	+	+	+	+	+	+	+	+	-	45
GALLBLADDER & COMMON BILE DUCT	N	<u>N</u>	_A_	N	N	N	N	N	N	N	N	N	N	N	N	N	N	<u>N</u>	N .	N	N	N	N	N		45×
PANCREAS	t	+	_A_	+	+	+	<u>+</u>	+	+	+	+	+	+	+	+ .	+	+	+	+ .	+	+	+	+	.+		45
ESOPHAGUS	+	÷	A	+	٠	+	+	+	+	+	+	٠	+	+	+ ,	-	+	+	+	+	+ .	+	+	+	. ^	42
STOMACH Adenocarcinoma, Nos	+	+	A	+	+	+	+	+	+	+	+	+	٠	+	+	+	-	+	+	+	+	+	+	+	۸	42 1
SMALL INTESTINE	+	+	A	+	+	+	+	+	+	+	+	+	+	+	+	+	-	+	+	+	÷	-	+	+	A	39
LARGE INTESTINE	+	+		+	+	+	+	+	+	+	+	+	+	+	+	+	-	+	÷	+	+	+	+	+		42
URINARY SYSTEM	—			_																					-+	
KIDNEY	+	+	A	+	+	-	+	+	+	÷	÷	÷	+	٠	+	÷	÷	÷	÷	+	+	÷	÷	+		44
ADENOCARCINOMA, NOS, METASTATIC																									-	1
URINARY BLADDER	+	+	A	-	+	+	+	+	+	+	+	+	+	+	+	+	-	+	-	+	+	+	+	+	A	41
ENDOCRINE SYSTEM																										
PITUITARY Adenoma, nos Chromophobe Adenoma	×	×	A	-	×	+	+	*	•	+	•	×	×	×	•	* 	×	* 	×	•	×	×	+	*	_	43 24 3
ADRENAL Pheochromocytoma	+	+	A	+	+	+	+	+	+	+	<u>*</u>	+	+	*	+	+	+	-	+	+	+	+	+	-	A	43
THYROID Follicular-cell Adenoma C-cell Adenoma	+	+	A	+	+	+	+	+	٠	+	+	٠	+	+	+	+	+	+	+	+	* X	+	+	+	^	44 2 1
C-CELL CARCINOMA	L.				_						<u>^</u>	<u> </u>						<u>^</u>	_							<u>•</u>
PARATHYROID . PANCREATIC ISLETS	t <u>†</u>	- <u>+</u>	_A		- <u>-</u> -	<u>,</u>		- <u>-</u>	- <u>*</u>	<u>-</u>	÷	* *	*		<u>*</u>	. <u>.</u>		*			- <u>-</u>	- <u>-</u> -	- <u>-</u>	- <u>-</u> -	A	45
ISLET-CELL CARCINOMA	ľ	7	4	*	*	•	٠	•	•	٣	•	x	*	•	•	•	•	ſ	•	•	Ŧ	•	Ŧ	•	1	45
REPRODUCTIVE SYSTEM	-												••••												\uparrow	
MAMMARY GLAND Adenocarcinoma, Nos Fibroma Etbroma	+	+	A	H	+	+	+	+	•	N	*	•	+	+	+	+	+	+	N	•	+	+	+	+	^	45× 1
FIBROADENOMA Uterus	<u> </u>	<u>^</u>			•		•	•				•			4								<u>×</u> _+	<u>×</u>		
DIERUS PAPILLARY CARCINOMA PAPILLARY ADENOMA ENDOMETRIAL STROMAL POLYP	x	+	A	* x	Ŧ	•	Ŧ	Ť	-	* X	Ŧ	Ŧ	* ×	* ×	•	•	•	*	-	Ŧ	•	* ×	•	•		42 1 9
ENDOMEIRIAL STROMAL SARCOMA	Î	•		-	÷	•	•	•	÷	•	•	•	•	•		•	×		•	÷		Ŷ	•	÷		44
PAPILLOMA, NOS						•		×		•				•				<i>.</i>	·			·				1
BRAIN		÷	,																					÷		6=
GLIOMA, NOS		•	A	*	Ŧ	•	Ŧ	•	Ŧ	Ŧ	•	Ŧ	•	•	•	•	Ŧ	x	٣	•	•	•	•	٠	^	45 2
BODY CAVITIES			-				-													_	_				-†	
PERITONEUM Adenocarcinoma, NOS, Metastatic			A .	N	N				_								N								-	45× 1
MESENTERY ENDOMETRIAL STROMAL SARCOMA, META	N	N	A	N	H	N	H	N	N	N	N	N	N	N	N	N 	N X	N	N	N	N	N	N	N	^	45× 1
ALL OTHER SYSTEMS Multiple organs nos Leukemia, nos Monocviic Leukemia	N	н	A	н Х	H X	N	N	н	N	N	N	N	N X	N	H	N	N	N	N	N	N	N	N	N	A	45× 4 1
ANTMALS NECTORESED		_	-																		-				_	

TABLE A4. FEMALE RATS: TUMOR PATHOLOGY (CONTINUED) **HIGH DOSE**

* ANIMALS RECROPSIED +: TISSUE EXAMINED MICROSCOPICALLY -: REQUIRED TISSUE NOT EXAMINED MICROSCOPICALLY : NO TISSUE INFORMATION SUBMITTED C: NECROPSY, NO HISTOLOGY DUE TO PROTOCOL A: AUTOLYSIS N: NECROPSY, NO AUTOLYSIS, NO MICROSCOPIC EXAMINATION N: NECROPSY, NO AUTOLYSIS, NO MICROSCOPIC EXAMINATION N: NECROPSY PERFORMED

106

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Appendix B

Summary of the Incidence of Neoplasms in Mice Administered Vinylidene Chloride by Gavage

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TABLE B1.

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SUMMARY OF THE INCIDENCE OF NEOPLASMS IN MALE MICE ADMINISTERED VINYLIDENE CHLORIDE BY GAVAGE

	VEHICLE Control	LOW DOSE	HIGH DOSE
ANIMALS INITIALLY IN STUDY ANIMALS NECROPSIED ANIMALS EXAMINED HISTOPATHOLOGICALLY	50 47 46	50 47 47	50 50 50 50
INTEGUMENTARY SYSTEM			
*SKIN Fibrosarcoma Neurofibrosarcoma	(47) 1 (2%) 1 (2%)	(47)	(50)
*SUBCUT TISSUE SARCOMA, NOS	(47)	(47)	(50) 1 (2%)
FIBROSARCOMA NEUROFIBROSARCOMA NEURILEMOMA	1 (2%) 1 (2%)	1 (2%)	((24)
RESPIRATORY SYSTEM			
#LUNG Hepatocellular carcinoma, metast	(46)	(45)	(46)
ALVEOLAR/BRONCHIOLAR CARCINOMA, METASA ALVEOLAR/BRONCHIOLAR CARCINOMA	3 (7%)	4 (9%) 1 (2%)	4 (9%) 4 (9%)
HEMATOPOIETIC SYSTEM			
*MULTIPLE ORGANS Malignant Lymphoma, Nos Monocytic Leukemia	(47) 5 (11%)	(47) 3 (6%) 1 (2%)	(50) 6 (12%)
#MESENTERIC L. NODE Malig.lymphoma, histiocytic type	(28)	(38)	(43) 1 (2%)
#LIVER MALIGNANT LYMPHOMA, NOS	(46)	(46)	(49)
LEUKEMIA, NOS	* 1647	2 (4%)	
#SMALL INTESTINE Malignant Lymphoma, NOS	(36)	(41)	(39)

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

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109

#SPLEEN HEMANGIOMA #LIVER HEMANGIOSARCOMA DIGESTIVE SYSTEM #LIVER HEPATOCELLULAR ADENOMA HEPATOCELLULAR CARCINOMA #STOMACH SQUAMOUS CELL CARCINOMA #JEJUNUM FIBROSARCOMA JRINARY SYSTEM #KIDNEY TUBULAR-CELL ADENOMA	VEHICLE Control	LOW DOSE	HIGH DOSE
CIRCULATORY SYSTEM			
	(45) 1 (2%)	(45) 2 (4%)	(48) 1 (2%)
	(46) 1 (2%)	(46) 1 (2%)	(49) 1 (2%) 2 (4%)
DIGESTIVE SYSTEM			
HEPATOCELLULAR ADENOMA	(46) 7 (15%) 8 (17%)	(46) 4 (9%) 5 (11%)	(49) 6 (12%) 9 (18%)
	(43)	(40)	(42) 1 (2%)
FIBROSARCOMA	(36)		(39) 1 (3%)
URINARY SYSTEM			
TUBULAR-CELL ADENOMA	(45)	(46)	1 (2%)
ENDOCRINE SYSTEM			
CARCINOMA, NOS	(35) 1 (3%)	(34) 1 (3%)	(36)
	(41)	(43)	(47) 1 (2%)
	1 (2%)		2 (4%)
	(41)	(45) 2 (4%)	(46)
	(44)	(46)	(48)

TABLE B1. MALE MICE: NEOPLASMS (CONTINUED)

NONE

	VEHICLE Control	LOW DOSE	HIGH DOSE
NERVOUS SYSTEM			
NONE			
SPECIAL SENSE ORGANS			
*EYE/LACRIMAL GLAND ADENOMA, NOS PAPILLARY ADENOMA	(47) 1 (2%) 1 (2%)	(47)	
MUSCULOSKELETAL SYSTEM			
NONE			
BODY CAVITIES			
NONE			
ALL OTHER SYSTEMS			
NONE			
ANIMAL DISPOSITION SUMMARY			
ANIMALS INITIALLY IN STUDY NATURAL DEATHD	50 11	50 9	50 9
MORIBUND SACRIFICE SCHEDULED SACRIFICE	5	6	5
ACCIDENTALLY KILLED TERMINAL SACRIFICE ANIMAL MISSING	1 33	35	36
a INCLUDES AUTOLYZED ANIMALS			

TABLE B1. MALE MICE: NEOPLASMS (CONTINUED)

	VEHICLE Control	LOW DOSE	HIGH DOSE
TUMOR SUMMARY			
TOTAL ANIMALS WITH PRIMARY TUMORS* Total primary tumors	30 37	22 27	33 42
TOTAL ANIMALS WITH BENIGN TUMORS Total benign tumors	14 17	12 13	15 16
TOTAL ANIMALS WITH MALIGNANT TUMORS TOTAL MALIGNANT TUMORS	17 20	13 14	25 26
TOTAL ANIMALS WITH SECONDARY TUMORS# Total secondary tumors	1 1		
TOTAL ANIMALS WITH TUMORS UNCERTAIN- Benign Dr Malignant Total Uncertain Tumors			
TOTAL ANIMALS WITH TUMORS UNCERTAIN- Primary or metastatic Total uncertain tumors			
* PRIMARY TUMORS: ALL TUMORS EXCEPT SE # SECONDARY TUMORS: METASTATIC TUMORS (JACENT DRGAN

TABLE B1. MALE MICE: NEOPLASMS (CONTINUED)

TABLE B2.

	VEHICLE Control	LOW DOSE	HIGH DOSE
ANIMALS INITIALLY IN STUDY ANIMALS NECROPSIED ANIMALS EXAMINED HISTOPATHOLOGICALLY	50 48 48	50 49 49	50 50 50
INTEGUMENTARY SYSTEM			
*SUBCUT TISSUE SARCOMA, NOS FIBROUS HISTIOCYTOMA, MALIGNANT	(48)	(49) 1 (2%) 1 (2%)	(50)
RESPIRATORY SYSTEM			
ALVEOLAR/BRONCHIOLAR ADENOMA	(48) 1 (2%)	(45) 1 (2%) 1 (2%)	(48) 4 (8%)
HEMATOPOIETIC SYSTEM			
*MULTIPLE ORGANS Malignant Lymphoma, Nos Malig.lymphoma, Lymphocytic Type Leukemia,Nos	(48)	(49) 5 (10%) 4 (8%)	(50) 2 (4%) 1 (2%)
NONOCYTIC LEUKEMIA	2 (4%)	2 (4%)	1 (2%)
#SPLEEN Malignant Lymphoma, Nos	(46)	(47) 1 (2%)	(46)
#MANDIBULAR L. NODE Malignant lymfhoma, Nos	(29) 1 (3%)	(36)	(42)
#LIVER MALIGNANT LYMPHOMA, NOS LEUKEMIA,NOS	(47)	(49) 1 (2%) 1 (2%)	(49)
#SMALL INTESTINE Malignant lymphoma, nos	(40)	(41)	(45) 1 (2%)
#JEJUNUM MALIGNANT_LYMPHOMA, NOS	(40)	(41)	(45)

SUMMARY OF THE INCIDENCE OF NEOPLASMS IN FEMALE MICE ADMINISTERED VINYLIDENE CHLORIDE BY GAVAGE

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

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	VEHICLE Control	LOW DOSE	HIGH DOSI
MALIGNANT LYMPHOMA, MIXED TYPE			1 (2%)
#ILEUM Malignant Lymphoma, Nos	(40)	(41) 1 (2%)	(45)
#KIDNEY Malignant Lymphoma, Nos	(46) 1 (2%)	(49)	(50) 1 (2%)
CIRCULATORY SYSTEM			
#SPLEEN HEMANGIOMA	(46)	(47) 2 (4%)	(46)
#LYMPH NODE Lymphangioma	(29)	(36)	(42) 1 (2%)
#LIVER HEMANGIOMA		(49)	(49) 1 (2%)
DIGESTIVE SYSTEM			
#LIVER HEPATOCELLULAR ADENOMA HEPATOCELLULAR CARCINOMA	(47) 2 (4%) 2 (4%)	(49) 3 (6%)	(49) 2 (4%) 1 (2%)
#STOMACH Squamous cell carcinoma Adenomatous Polyp, Nos	(43)	(43) 1 (2%) 1 (2%)	(42) 1 (2%) 1 (2%)
#DUODENUM ADENOMATOUS POLYP, NOS	(40) 1 (3%)	(41)	(45)
URINARY SYSTEM			
NONE			
ENDOCRINE SYSTEM			
#PITUITARY Carcinoma,nos Adenoma, nos	(31) 5 (16%)	(32) 1 (3%) 6 (19%)	(42)

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TABLE B2. FEMALE MICE: NEOPLASMS (CONTINUED)

	VEHICLE Control	LOW DOSE	HIGH DOSE
#ADRENAL Pheochromocytoma	(42) 2 (5%)	(44) 1 (2%)	(50) 1 (2%)
#THYROID Follicular-Cell Adenoma	(41) 2 (5%)		(43)
REPRODUCTIVE SYSTEM			
*MAMMARY GLAND FIBROADENOMA	(48) 1 (2%)	(49) 1 (2%)	(50) 3 (6%)
#UTERUS LEIOMYOMA ENDOMETRIAL STROMAL POLYP	(46) 1 (2%)	(45) 3 (7%)	(47) 2 (4%)
#OVARY ADENOMA, NOS Cystadenoma, Nos Tubular Adenoma	(41)	(44) 1 (2%) 1 (2%)	(45) 1 (2%)
NERVOUS SYSTEM			
NONE			
SPECIAL SENSE ORGANS			
*EYE/LACRIMAL GLAND ADENOMA, NOS	(48)	(49) 2 (4%)	(50) 2 (4%)

TABLE B2. FEMALE MICE: NEOPLASMS (CONTINUED)

TABLE B2. FEMALE MICE: NEOPLASMS (CONTINUED)

	VEHICLE Control	LOW DOSE	HIGH DOSE
MUSCULOSKELETAL SYSTEM			
*FEMUR OSTEOSARCOMA	(48)	(49) 1 (2%)	(50)
*SKELETAL MUSCLE Fibrosarcoma	(48)	(49) 1 (2%)	(50)
BODY CAVITIES			
NONE			
ALL OTHER SYSTEMS			
NONE			
ANIMAL DISPOSITION SUMMARY			
ANIMALS INITIALLY IN STUDY NATURAL DEATHƏ MORIBUND SACRIFICE SCHEDULED SACRIFICE	50 5 5	50 11 7	50 4 4
ACCIDENTALLY KILLED TERMINAL SACRIFICE ANIMAL MISSING	40	32	42
A INCLUDES AUTOLYZED ANIMALS			

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

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	VEHICLE Control	LOW DOSE	HIGH DOSE
UMOR SUMMARY			
TOTAL ANIMALS WITH PRIMARY TUMORS* Total primary tumors	23 24	33 45	21 30
TOTAL ANIMALS WITH BENIGN TUMORS TOTAL BENIGN TUMORS	15 15	22 23	15 21
TOTAL ANIMALS WITH MALIGNANT TUMORS Total Malignant Tumors	9 9	18 22	9 9
TOTAL ANIMALS WITH SECONDARY TUMORS# TOTAL SECONDARY TUMORS		1 1	
TOTAL ANIMALS WITH TUMORS UNCERTAIN- BENIGN OR MALIGNANT TOTAL UNCERTAIN TUMORS			
TOTAL ANIMALS WITH TUMORS UNCERTAIN- PRIMARY OR METASTATIC TOTAL UNCERTAIN TUMORS			
PRIMARY TUMORS: ALL TUMORS EXCEPT SE SECONDARY TUMORS: METASTATIC TUMORS			JACENT ORGAN

TABLE B2. FEMALE MICE: NEOPLASMS (CONTINUED)

TABLE B3.

INDIVIDUAL ANIMAL TUMOR PATHOLOGY OF MALE MICE IN THE 2-YEAR STUDY OF VINYLIDENE CHLORIDE

VEHICLE CONTROL

ANIMAL			01	01	61	61	<u></u>		<u></u>	01	01	01	1	TT.	T	01	01		10	01	1		01	<u></u>	T
NUMBER) 1	2	3	ġ	0	8	2	å	ġ	i	1	12	3	1	1	1	j.	i	į	Ž	2	2	23	2	ž
WEEKS ON Study	i	-1	3	8	1	1	9	1	8	9	1	2 0 9	9	8	1	1	1	1	1	8	8	200	1	1	╏
INTEGUMENTARY SYSTEM	41	41	61	2l	<u>ا ف</u>	<u>4</u>]	61	41	51	21	أف	7	6	أف	اف	<u>.</u>	4	41	اف	31	لغ	31	41	<u>.41</u>	4
SKIN Fibrosarcoma Neurofibrosarcoma	+	+	+	•	•	+	+	+	+	+	+	+	•	•	•	N	•	+	+	^	+ x	+	+	+	+
SUBCUTANEOUS TISSUE Neurofibrosarcoma Neurilemoma	+ X	+	+	٠	+	+	* ×	+	+	•	+	+	+	+	+	н	٠	+	٠	A	+	+	•	+	+
RESPIRATORY SYSTEM													····												+
LUNGS AND BRONCHI HEPATOCELLULAR CARCINOMA, METASTA Alveolar/Bronchiolar Adenoma Alveolar/Bronchiolar Carcinoma	٠	+ x_	+	* x	•	+	+	+	+	+	•	+ 	•	+	+	A .	•	+	+	A	+	+	+	•	•
TRACHEA	+	+	+	+	+	+	+	+	+	+	+	-	+	+	+	A	+	+	+	A	+	+	+	+	+
HEMATOPOIETIC SYSTEM										<u> </u>															-1
BONE MARROW	+	+	+	+	+	+	+_	+	+	+	+	_	+	+	+	<u> </u>	+	+	+	A	+	+	+	+	+
SPLEEN Hemangioma	*	+	+	+	+	+	+	+	+	+	+	+	+	+	+	A	+	+	+	A	+	٠	+	+	+
LYMPH NODES	-	+	+		+	+	+	+		+		+	+	-	-	<u>A</u>	+	-	+	A	+	.+			+
THYMU5	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-		-	-	-	A	-	-	-	-	-1
CIRCULATORY SYSTEM																									-
HEART	+	+	+	+	+	+	+	+	÷	+	+	+	+	+	+	A	+	+	+	A	+	+	+	+	+
DIGESTIVE SYSTEM									-																-
SALIVARY GLAND	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	A	+	+	•		+	.+	+	+	+
LIVER Hepatocellular Adenoma Hepatocellular carcinoma Hemangiosarcoma Malignant Lymphoma, nos	•	×	•	+	+	+	+	* ×	+	+	+	•	* ×	* ×	+	A	+	*	+	•	+ ×	+ X	*	*	+ X
BILE DUCT	+	+	+	+	+	÷	+	+	+	+	+	+	+	+	+	A	+	+	+	A	+	+	+	+	+
GALLBLADDER & COMMON BILE DUCT	+	<u>+</u>	<u>+</u>	+	<u>+</u>	<u>N</u>	+	<u>+</u>	<u>N</u>	N_	. <u>+</u>	<u>+</u>	<u>N</u>	Ν	+	<u>N.</u>	+	<u>+</u>	+		N	N	+	N	+
PANCREAS	+	+	+	ŧ	+	+.	+	+	+	+	ŧ.	+	-	+	+	A	+	+_	+	Α.	+	+	+	+.	+
ESOPHAGUS	-	+	+	+	+	+	+	+	+	+	.		<u>+</u>	+	+	A	+	+	+		+	+	+		<u>+</u>
STOMACH	+	+	+	+	<u>+</u>	.±	t	<u>+</u>	<u> </u>	<u>+</u>	+	. <u>+</u>	<u>+</u>		+	A	ŧ.		+	A	+	+	ŧ.	+	+
SMALL INTESTINE	+	+		+	+	+	+	+	-	+	+	-	+	-	+	Α	+	+	+	A	+	<u>-</u>	+	+	+
LARGE INTESTINE	+	+	-	+	+	+	+	-	-	+	+	-	+	-	-	A	÷	+	+	A	-	+	+	+	-
URINARY SYSTEM																									+
KIDNEY	+	+	+	+	+	+	+	+	+	+	+	1	+	+	+	A	+	+	+	A	+	+	+	+	•
URINARY BLADDER	+	-	٠	÷	-	+	÷	+	-	÷	٠	+	a i	-	-	A	÷	+	+	A	+	+	÷	٠	+
ENDOCRINE SYSTEM						•							-												+
PITUITARY Adenoma, nos	•	+	+	+	+	-	+	+	+	+	+	+	-	+	-	*	*	•	+	A	+	+	+	+	-
ADRENAL Pheochromocytoma	* .x	+	+	+	+	+	+	+	-	+	+	+	-	+	+	A	+	+	+	A	•	+	+	+	1
THYROID	+	+	+	+	+	+	+	+	+	+	+	-	+	•	+	Α	+	+	-	A	<u>.</u>	+	+	+	4
PARATHYROID		-	-	+	-	+	-	+	-	+	-		+	+	+	Α.	-	+	-	A _	-	-	-	-	-
PANCREATIC ISLETS ISLET-CELL ADENOMA	+	+	+	+	•	+	+	+	+	+	+	+	-	•	+	A	•	+	+	A	+	+	+	+	+
REPRODUCTIVE SYSTEM																					-				+
MAMMARY GLAND	N	+	N	N	+.	N	N	N	N	N.	Ν	N	N	N	N	N	+	N	N	<u>A</u>	N	N	N	<u>N</u>	М
TESTIS	+	+	-	+	+	t	+	+	+	+	•	+	+	+	+	A	<u>+</u>	+	+	A	+	+	+	+	-
PROSTATE		-	+	+		+	+.	+,	-	÷	-	÷	-	+	+.	A	+.	÷	+	A	÷	+,	+	-	+
SPECIAL SENSE ORGANS												•													+
LACRIMAL GLAND Adenoma, Nos Papillary Adenoma	N.	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N X	N	N X	A	N	N	N	N	М
ALL OTHER SYSTEMS																									7
MULTIPLE ORGANS NOS Malignant Lymphoma, Nos	H	N	N	N	N	н	N	N	NX	N	N	N	N	N	H	N	H	N	N	A	N	H	H	H	X

 +: TISSUE EXAMINED MICROSCOPICALLY
 : NO TISSUE INFORMATION SUBMITTED

 -: REQUIRED TISSUE NOT EXAMINED MICROSCOPICALLY
 : NO TISSUE INFORMATION SUBMITTED

 X: TUMOR INCLDENCE
 : AUTOLYSIS

 N: NECROPSY, NO AUTOLYSIS, NO MICROSCOPIC EXAMINATION
 AUTAL MISSING

 B: NGEROPSY, NO AUTOLYSIS, NO MICROSCOPIC EXAMINATION
 H: AUTAL MISSING

 B: NG NECROPSY
 H: AUTOLYSIS

TABLE B3. MALE MICE: TUMOR PATHOLOGY (CONTINUED) VEHICLE CONTROL

ANIMAL NUMBER	2	2	2	29	3	3	3	3	0 3 4	3	3	3	3	3	4	4	42	3	4	4 5	4	7	8	4	5	TOTAL
WEEKS ON STUDY	07	1	0	0	0	0	0	0	0	0	0	0	6	6	ö	ő	i	ò	0	0	ò	8	-	0	8	TUMORS
INTEGUMENTARY SYSTEM	8	4	4	4	41	41	.4	4]	. 11	91	91	- 91	- 41	91	41.	.91	91	. 91.	9	91	. 9]	_31_	- 91	. 91	4	
SKIN Fibrosarcoma Neurofibrosarcoma		•	•	+	+	+	+	+	A	+	+	+	*	•	+	+	+	+	+	+	+	•	+	•	٠	47× 1
SUBCUTANEOUS TISSUE Neurofibrosarcoma Neurilemoma	A	+	+	+	+	•	+	+	A	+	•	+	+	+	+	+	+	+	+	+	+	+	+	+	•	47× 1 1
RESPIRATORY SYSTEM	┢	•••																							╉	
LUNGS AND BRONCHI Hepatocelular carcinoma, metasta Alveolar/Bronchidlar Adenoma Alveolar/Bronchidlar carcinoma	A	+	+	+	+	+ X	•	+	•	+	*	•	•	•	+ x	•	+	+	+	+	•	•	•	•	•	46 1 3 2
TRACHEA	A	٠	+	+	+	+	+	+	A	÷	+	+	÷	-	+	+	-	+	+	+	-	÷	+	٠	+	42
HEMATOPOIETIC SYSTEM	<u> </u>							<u> </u>																	╉	
BONE MARROW		+	+	+	+	+	+	+	٨	+	+	+	+	+	+	+	+	+	-	+	+	+	+	+	÷.	- 44
SPLEEN	A	+	÷	+	+	+	+	+	A	+	+	+	+	+	+	+	+	+	+	+	+	-	+	+	+	45
HEMANGIOMA	<u> </u>			,			-																		╉	<u>l</u>
LYMPH NODES	<u>⊢</u> ^	-	-	•		+	-	+	<u> </u>	-	+	-	-	+	.+	-	-	+	-	+	.+	+	+		╀	28
THYMUS	<u> </u>	-	-	-	_	•.	-	7	A	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	0
CIRCULATORY SYSTEM																								•	Ţ	
HEART		+	+	+	+	+	+	+	A	+	+	+	*	+	+	+	+	+	+	+	<u>+</u>	+	+	+	1	46
DIGESTIVE SYSTEM																										
SALIVARY GLAND	1-	+	+	+	+	<u>+</u>	+	+	<u>A</u>	+	-+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	46
LIVER Hepatocellular adenoma Hepatocellular carcinoma Hemangidsarcoma Malignant Lymphoma, Nos		* *	•	•	•	•	+	+	•	+	* x	•	•	* x	•	* ×	•	*	•	+	+ x	•	+	* x	1	46 7 8 1
BILE DUCT		+	+	+	+	+	+			+	+	+	+	•	+	+	+	+	•	•	+	+	•	+		46
GALLBLADDER & COMMON BILE DUCT		+	+	+	+	+	+	+		+	+	+	N	N	+	+	N	+	+	+	+	N	+	N	Ň	47×
PANCREAS	,	•	•	•	•	•	•	•	A	•	+	•	+	*	•	•	•		•	•	•	-		•		44
ESOPHAGUS		+	•	+	+	+	-	+		•	+	+	-	-	•	*	-	•	+	•	-	+	•	•	Ì	39
STOMACH		+	+	+	+	+	+	+		+	+	+	+	•	+		+	+	•	•	+	-	+	+	•	43
SMALL INTESTINE		+	-	+	+	+	+	+	_ <u>_</u>	•	+	-	•	+	+	+	-	•	+	+	+	_	•		•	36
LARGE INTESTINE		+	+	<u>.</u>	+	+	*	+	A	+	+	_	<u>`-</u>	+	+	÷	+	+	+	+	÷	-	-	-	÷.	34
JRINARY SYSTEM	Ļ				· · · · · · · · · · · · · · · · · · ·																				4	
KIDNEY			+	•	•	+	÷	+		÷	•	+	-	+	•	•	+	+	•	•	+	•	•	•		45
URINARY BLADDER		+	-	+	+		+	+	A	+	+	+	_	+	+	+	+	+	+	+	*	-	+	+	÷.	38
ENDOCRINE SYSTEM	Ļ^									·						_		<u> </u>							4	
PITUITARY Adenoma, Nos	L^	-	-	+	+	-	-	+	A	-	+	+	•	-	+	+	-	+	•	+	•	+	+	•	٠	35
ADRENAL Pheochromocytoma	A	+	+	+	+	-	+	+	A	+	+	+	+	-	+	+	-	+	+	+	+	+	+	+	+	41 1
THYROID	1.	+	+	ŧ	+	+	+	+		+	+	+	+	-	+	+	-	+	+	+	-	. <u>+</u>	+	+	*	.41
PARATHYROID	LA.	+	+	-	-	-	-	•	A	-	-	-		-	-	-		-	-	+	-	-	-	+	╧	13
PANCREATIC ISLETS ISLET-CELL ADENOMA	A	+	+	+	+	+	+	+	٨	+	+	+	+	+	•	+	+	+	*	+	+	-	+	+	1	44 ₁
REPRODUCTIVE SYSTEM	<u> </u>												_													
MAMMARY GLAND	▲	N	N	٠	+	+	+	N		+	N	N	. N	N.	+	N	N	+	•	+	+	N	+	+	M	<u>47×</u>
TESTIS	1.	+	+	+	+	+	+	+	<u>A</u>	+	+	+	-	+	+	+	+	+	+	+	+	+	+	.+	+	43
PROSTATE	•	-	+	+	+	+	-	+	A	+	+	+	+	-	+	+	+	+	+.	+	+	+	+	+	÷ļ.	36
SPECIAL SENSE ORGANS Lacrimal gland Adenoma, nos Papillary adenoma	^	N	N	N	N	N	N	N	A	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	M	47× 1 1
ALL OTHER SYSTEMS	+	•			·									_			-								┥	
MULTIPLE ORGANS NOS Malignant Lymphoma, Nos	A	N	N	N	N	N	. N	N	A	N	N	N	N	N	N	N	N	N	N	N	H	N	N	N	N	47×

 # ANIMALS NECROPSIED
 : NO TISSUE INFORMATION SUBMITTED

 *: TISSUE EXAMINED MICROSCOPICALLY
 : NO TISSUE INFORMATION SUBMITTED

 -: REQUIRED TISSUE NOT EXAMINED MICROSCOPICALLY
 : NO TISSUE INFORMATION SUBMITTED

 X: TUMOR INCIDENCE
 AUTOLYSIS

 N: NECROPSY, NO AUTOLYSIS, NO MICROSCOPIC EXAMINATION
 M: ANIMAL MISSING

 B: NO NECROPSY PERFORMED
 B: NO NECROPSY PERFORMED

TABLE B3.

INDIVIDUAL ANIMAL TUMOR PATHOLOGY OF MALE MICE IN THE 2-YEAR STUDY OF VINYLIDENE CHLORIDE

LOW DOSE

ANIMAL NUMBER	0	0	0	0	0	0	0	0	0	1	0	0	1	1	1	0	2	0	<u> </u>	02	2	0 2 2	2	2	02
WEEKS ON STUDY		-1	1	1		1	ģ	8	0		8	1		1	8		1	-8	-21		1	-1		1	- <u>2</u> 1 0
INTEGUMENTARY SYSTEM	اه ا	4	4	ě.	ål	Ă.	ź	Å.	2	4	4	4	4	4	ś	أف	4	اف	4	4	4	4	4	4	3
SUBCUTANEOUS TISSUE Fibrosarcoma	•	+	+	+	+	٠	+	+	+	٠	+	+	٠	+	٠	+	+	N	+	+	+	+	٠	٠	+
RESPIRATORY SYSTEM	+																								
LUNGS AND BRONCHI Alveolar/Bronchiolar Adenoma Alveolar/Bronchiolar Carcinoma	ŀ	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	-	*	+	*	+	+	+	•
TRACHEA	+	+	+	+	+	+	+	-	+	+	+	+	+	+	÷	÷	+	+	+	+	+	÷	+	-	+
HEMATOPOIETIC SYSTEM										-															
BONE MARROW	L.	+	+	-	+	+	-	+	+	+	+	+	+	+	+	-	+	+	+	-	+	+	+	+	+
SPLEEN Hemangioma	ŀ	+	+	+	+	+	•	+	+	+	+	+	+	+	+	+	+	-	+	+	+	+	+	+	+
LYMPH NODES	<u>↓</u>	+	÷	+	+	+	+	-	+	+	. +	+	+	+	+	+	-		-	+	.+.	+	+	+	+
THYMUS	+	+	-	-	-	-	-	-	-	+	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
CIRCULATORY SYSTEM														_					_					-	
HEART	+	+	+	+	٠	+	+	+	+	٠	+	+	+	+	+	+	+	+	٠	+	+	+	+	+	ŧ
DIGESTIVE SYSTEM	1											-													-
SALIVARY GLAND	<u> </u> +	+	+	+	+	+	+	+	+	+	+	+	+	+	-	+	+	+	+	+	+	+	+	+	+
LIVER Hepatocellular adenoma	+	+	+	*	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	*	+	+	* x	+
HEPATOCELLULAR CARCINOMA Hemangioma Leukemia,nos									х.						×	× ×		x			Ô				x
BILE DUCT	+	+	+	+	÷	+	+	+	+	+	+	+	+	÷	+	÷	+	+	+	+	÷	+	÷	+	÷
GALLBLADDER & COMMON BILE DUCT	N	+	+	+	+	+	+	N.	Ν.	+	÷	N	+	+	÷	÷	N	+	+	÷	+	+	+	N	÷
PANCREAS	+	+	+	÷	+	+	+	+	+	+	+	+	÷	+	+	+	+	-	+	+	+	+	+	+	+
ESOPHAGUS	+	+_	+	+	+	+	+	+	-	+	-	+	-	+	+	+	-	+	+	+	+	+	+	-	+
STOMACH	+	+	-	+	+	+	+	+	+	+	-	+	+	+	-	+	+	+	+	+	+	+	+	+	_
SMALL INTESTINE	+	+	+	+	+	+	+	+	-	+	+	-	+	+	÷	+	+	+	+	+	÷	+	+	+	-
LARGE INTESTINE	+	-	-	+	+	+	+	+	-	+	-	-	+	+	+	+	+	-	+	-	÷	+	+	+	-
URINARY SYSTEM																								_	
KIDNEY	+	+	+	+	+	+	+	+	+	-	+	+	+	+	+	+	+	÷	+	+	+	ŧ	+	+	+
URINARY BLADDER	+	+	+	÷	-	÷	÷	+	+	÷	÷	-	÷	÷	÷	÷	-	÷	-	÷	+	÷	+	÷	+
ENDOCRINE SYSTEM	-												· · · ·												-
PITUITARY CARCINOMA,NOS	+	+	•	+	-	-	-	+	+	+	+	+	-	+	+	-	-	+	+	+	+ .	*	+	-	+
ADRENAL	+	+	+	+	+	+	+	+	+	+	-	+	+	+	+	+	<u>+</u>	-	+	+	+	+	+	-	+
THYROID Follicular-cell Adenoma	ŀ	+	•	+	+	+	•	•	•	+	+	+	+	+	+	+	+	+	•	*	•	+	•	-	+
PARATHYROID	-	-	-	-	-	-	-	-	-	+	-	-	-	+	-	-	-	-	-	-	+	-	-	-	-
REPRODUCTIVE SYSTEM					-																				-
MAMMARY GLAND	<u> M</u>	+ -	N	N	<u>N</u> .	н	Ν.	H	N	+	Ν	H.	N	N	N	N	N	м	н	N	N	+	N	<u>.</u>	+
TESTIS	+	+	+	+	-	+	+	+	+	+	+	-	+	+	+	+	+	-	+	+	. .	+	+	+	+
PROSTATE	+	+	+	-	+	+	-	+	-	~	+	-	-	+	+	+	+	+	+	+	+	+	+	+	+
ALL OTHER SYSTEMS Multiple organs nos Malignant Lymphoma, nos Monocytic Leukemia	н	N	N	N	N	N	H	N	N	N	N X	N	N	N	N	N	N X	NX	NX	N	N	N	н	N	H
+: TISSUE EXAMINED MICROSCOP -: Required Tissue not exami X: Tumor incidence N: Necropsy, no Autolysis, N	NED	MIC	2051 5C01	COP	ECAI EX/		IATI	ON		- 1	: C: A: M: B:	AU1 AN1	TIS CROP TOLY MAL NEC	SY SIS M	N (5 (55)) H] [Ng	ISTI	OLO	GY I	JBM: DUE	TO	ED PR	010	COL	

AN IMAL NUMBER	0	27	0 2 8	0 2 9	0 3 0	0 3	0 3 2	0 3 3	0 3 4	0 3 5	0 3 6	0 3 7	0 3 8	3	4	4	4	0 4 3	4	0 4 5	4	47	4	0 4 9	0 5 0	TOTAL
WEEKS ON Study	0	0	0	0	0	1	0	0	9	0	2	0	8	1	2	0	0	1 0 4	104	045	0	104	104	104	1	TISSUE
INTEGUMENTARY SYSTEM			_¥1					_ 11	91.				_ <u></u>						_	_~.						
SUBCUTANEGUS TISSUE Fibrosarcoma	A	٨	N	+		+	+	+	+	+	+	+	+	*	+	+	٠	+	+	+	+	•	+	•	+	47* 1
RESPIRATORY SYSTEM																										
LUNGS AND BRONCHI Alveolar/Bronchiolar Adenoma Alveolar/Bronchiolar Carcinoma		•	+	+	A	+ x	+	*	+	+	+	+	*	+	+	+	+	•	+	+	-	+	+	•	*	45
TRACHEA	A	A	+	+	A	+	+	+, :	+	+	+	+	-	+	+	+	÷	+	+	+	+	+	+	+	+	44
HEMATOPOIETIC SYSTEM	+																						-		-	
BONE MARROW		A .	+	-	A	+	+	+	+	+	+	+.	+	+	+	+	+	+	+	•	+	+	+	+	٠	.42
SPLEEN Hemangioma	A	A	+	-	A	+	*	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	* x	+	+	45
LYMPH NODES	A	A	+	-	A	-	+	+	÷	+	+	+	+	+	+	+	•	+	-	+	-	+	+	+	-	38
THYMUS	A	A	-	-	A	-	-	-	-	-	+	-	-	-	-	÷	-	-	-	-	-	-	-	-	-	4
CIRCULATORY SYSTEM	+			-	• • •																				-	
HEART		A	+	+	A	+	+	+	+	+	+	٠	+	+	+	+	+	+	+	+	+	+	+	+	+	47
DIGESTIVE SYSTEM	+																									
SALIVARY GLAND	LA.	Α.	+	÷	A	+	÷	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	46
LIVER Hepatocellular Adenoma Hepatocellular Carcinoma Hemangioma Leukemia, Nos	A	A	+	-	A	+	+	+	+	+	+	•	+ ×	•	+	×	•	•	* ×	•	+	•	+	•	+	46 4 5 1 2
BILE DUCT	A	A	+	-	A	+	٠	+	٠	+	+	٠	+	+	+	+	+	+	÷	+	+	÷	+	÷	+	46
GALLBLADDER & COMMON BILE DUCT		A	N	Ν		+	+	+	+	+	+	+	N	+	+	+	N_	+	+	N	+	+	+	+	+	47×
PANCREAS		A	+_	+	Α.	+	+	+	+	+	+	+	+	ŧ	+	+	+	+	+	+.	+	+	+	+	+	46
ESOPHAGUS		A	+	+	A	+	+	+	+	+	÷	+	+	-	+	-	+	+	+	+	+	÷	+	+	+	40
STOMACH	1A	A		+	<u> </u>	+	+	+	+	÷	+	+	-	+	+	+	+		+	+	+	+	+	+	+	.40
SMALL INTESTINE		A	-	+	Α.	+	÷	+	+	+.	+	+	-	+	+	+	+	+	÷	+	+	+	+	-	+	. 41
LARGE INTESTINE	A	٨	-	+	A	+	+	+	+	+	+	+	-	+	+	+	+	+	٠	+	+	+	+	÷	+	37
URINARY SYSTEM	+									_															-†	
KIDNEY		A	+	+	٨	+	+	+	+	+	+	ŧ	+	+	÷	+	+	+	+	+	+	+	+	+	ᅪ	46
URINARY BLADDER	A	A	+	+	A	+	+	+	+	+	+	+	+	-	+	+	+	+	+	+	+	+	+	+	+	42
PITUITARY		A	+	-	A	+	+	+	+	+	-	÷	+	-	+	•	-	÷	-	•	+	÷	÷	-	•	34
CARCINOMA, NDS	+																									<u>'</u>
ADRENAL	+ <u>A</u>	<u> </u>	+	. <u>*</u>	<u>A</u>	+	<u>*</u>	*	+	<u>+</u>	•	. <u>*</u>	<u>*</u>	•	*	<u>*</u>	<u>+</u>	• ·	+	•	+	•	•		+	43
THYROID Follicular-cell adenoma		A	+	+	A	+	+	+	+	+	+	+	•	+	•	+	+	+	+	+	+	+	+	<u>*</u>	-	45 2
PARATHYROID Reproductive system	^	A	+	+	A	-	-	+	-	+	-	-	-	+	-	-	+	+	+	-	+	+	-	-	-	13
MAMMARY GLAND		A	N	N	A	+	•	N	N	N	N	•	N	N	÷	N	N	N	N	N	N	•	•	N		47×
TESTIS	A	A	+	+	A	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	Ţ	44
PROSTATE	A	A	+	÷	A	+	+	+	+	+	+	+	+	+		+	+	+	+	-	+	+	+	+	+	40
ALL OTHER SYSTEMS																										
MULTIPLE ORGANS NOS Malignant Lymphoma, nos Monocytic Leukemia		A	N	н	A	N	N	N	N	N	H	N	H	H	N	N	N	н	N	N	N	N	N	N	H	47× 3
ANIMALS NECROPSIED +: TISSUE EXAMINED MICROSCC -: REQUIRED TISSUE NOT EXAM X: TUMOR INCIDENCE N: NECROPSY, NO AUTOLYSIS,								101	N		: C: A: M: 3:	A	O T ECRI UTO NIM O N	LYS AL I	IS Mis:	51N	G			SUB	MIT	TED O P	ROI	000)L	

TABLE B3. MALE MICE: TUMOR PATHOLOGY (CONTINUED) LOW DOSE

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TABLE B3.

INDIVIDUAL ANIMAL TUMOR PATHOLOGY OF MALE MICE IN THE 2-YEAR STUDY OF VINYLIDENE CHLORIDE

HIGH DOSE

ANIMAL		0	0	0	8	0	0	0	0	1	0	0	0	0	9	1	1		0	0	2	0	2	2	0
WEEKS ON Study		-2	3	4 0 7	5	-6 1 0	뀨	8 1 0	-1	0 1 0	1	2	3	8	5 1 0	6 0 9	7 0 9	8		0	븲	-2	3 0 0		1
INTEGUMENTARY SYSTEM	- 41	41	41	21	41	41	4	41	41	41	41	41	41	21	41	6	1	21	4	4	41	4	21	41	4
SUBCUTANEOUS TISSUE Sarcoma, nos	+	ŧ	÷	* x	٠	+	•	+	+	٠	+	+	+	٠	٠	+	+	٠	+ '	٠	+	+	٠	٠	+
RESPIRATORY SYSTEM			_										-												+
LUNGS AND BRONCHI Alveolar/bronchiolar Adenoma Alveolar/bronchiolar carcinoma	+	+	+	+	+	+	+ x	+	•	+	•	+	*	*	×	-	•	-	•	+	+	+ x	•	+	•
TRACHEA	+	+	+	-	+	+	+	+	÷	+	+	÷	+	÷	÷	+	÷	+	+	+	+	+	-	+	+
HEMATOPOIETIC SYSTEM									-												_				+
BONE MARROW	+	+	+		+_	+	+	+.	+	+	+	+	+	÷	+	+	+	+	+	+	+	+	+	+	4
SPLEEN Hemangioma	•	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	<u>*</u>	+	+	+	+	+	-
LYMPH NODES Malig.lymphoma, histiocytic type	-	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	-	•	+	+	+	+	-	+	4
THYMUS	+	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	•	-	-	-	-	-	-
CIRCULATORY SYSTEM																									Т
HEART	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+
DIGESTIVE SYSTEM																									Τ
SALIVARY GLAND	-	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	-	+	+	+	+	+	-	+	井
LIVER HEPATOCELLULAR ADENOMA HEPATOCELLULAR CARCINOMA HEMANGIOSARCOMA	+	+	•	+	+	* x	+	+	+ x	+ X	* x	+	•	+	+	* x	+ x	•	+	•	+	+ ×	+	* ×	+
BILE DUCT	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	7
GALLBLADDER & COMMON BILE DUCT	+	+	+	N	.+	÷	+	+	+	+	+	÷	+	N	÷	N	N	N	+	N	N	+	N	+	+
PANCREAS	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+		+	+	+	+	+	+	+	+	1
ESOPHAGUS	+	+	+	-	+	+	-	+	+	+	+	+	+	+	+		+		-	+	+	+		t_	+
STOMACH Squamous cell carcinoma	+	+	+	-	+	+	+	+	+	+	+	+	+	* x	+	-	•	+	-	+	+	+	-	+	+
SMALL INTESTINE Fibrosarcoma Malignant Lymphoma, Nos	+	+	+	-	+	•	-	+	+	+	ż	•	+	-	-	+	-	+	-	+	•	•	-	+	+
LARGE INTESTINE	+	+	÷	-	÷	+	+	+	÷	+	+	+	÷	-	+	+	-	+	+	+	+	+	-	+	+
URINARY SYSTEM																_									┥
KIDNEY Tubular-Cell Adenoma	+	+	•	+	+	+	-	+	+	+	+	+	+	+	•	-	+	+	+	+	•	+	+	+	•
URINARY BLADDER	+	+	+	-	-	+	+	+	+	+	+	+	+	+	+	+	-	+	+	+	+	+	-	+	+
ENDOCRINE SYSTEM																									T
PITUITARY	+	-	+	+	+	+	+	+	+	.+	+	-	.+	+	+	-	+ .		+	-	+	•	-		-+
ADRENAL Cortical Adenoma Pheochromocytoma	+	+	+	+	+	+	+	+	+	•	+	+	+	+	+	-	+	+	+	+	+	+	+	+	1
THYROID	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+		<u>+</u>	+	+	+	+	+	-	+	ᅪ
PARATHYROID	+	-	-	-	-	+	-	÷	-	-	+	-	-	-	-	-	-	-	÷	-	-	+	-	+	-
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ALL OTHER SYSTEMS															_										+
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 +: TISSUE EXAMINED MICROSCOPICALLY
 : NO TISSUE INFORMATION SUBMITTED

 -: REQUIRED TISSUE NOT EXAMINED MICROSCOPICALLY
 C: NECROPSY, NO HISTOLOGY DUE TO PROTOCOL

 X: TUMOR INCIDENCE
 AUTOLYSIS

 N: NECROPSY, NO AUTOLYSIS, NO MICROSCOPIC EXAMINATION
 M: ANIMAL MISSING

 B: NO NECROPSY PERFORMED
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TABLE B3. MALE MICE: TUMOR PATHOLOGY (CONTINUED) HIGH DOSE

TABLE B4.

INDIVIDUAL ANIMAL TUMOR PATHOLOGY OF FEMALE MICE IN THE 2-YEAR STUDY OF VINYLIDENE CHLORIDE

VEHICLE CONTROL

NUMBER 2 3 <th>ANIMAL</th> <th>1 01</th> <th>0</th> <th>0</th> <th>01</th> <th>01</th> <th>01</th> <th>01</th> <th>01</th> <th>01</th> <th></th> <th>01</th> <th></th> <th>01</th> <th><u></u></th> <th></th> <th></th> <th>01</th> <th>01</th> <th>01</th> <th></th> <th>01</th> <th>01</th> <th></th> <th>- 1</th> <th></th>	ANIMAL	1 01	0	0	01	01	01	01	01	01		01		01	<u></u>			01	01	01		01	01		- 1	
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HEART + + + + + + + + + + + + + + + + + + +	THYMUS	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	A	-	-	-	-	-	-	-	-
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+: TISSUE EXAMINED MICROSCOPICALLY -: REQUIRED TISSUE NOT EXAMINED MICROSCOPICALLY X: Tumor Incidence N: Necropsy, No Autolysis, No Microscopic Examination

: NO TISSUE INFORMATION SUBMITTED C: Necropsy, NO HISTOLOGY DUE TO PROTOCOL A: Autolysis M: Animal Missing B: No Necropsy Performed

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HEMATOPOIETIC SYSTEM	+				·																					
BONE MARROW	+		+	+	+	+_	+	+	+	+	+	+	+	-	+	÷	+	+	+	+	.+	+	+	+	.+	
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GALLBLADDER & COMMON BILE DUCT	+	A	+	+	N	+	+	+	+.	÷	+	÷	+	+	+	Ν	+	+ ·	Ν	N	Ν	+	+	+	+	48×
PANCREAS	1	A	+	÷	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	47
ESOPHAGUS	+	٨	+	÷	-	+	+	+	+	+	+	+_	+	+	+	+	+	+	-	+	+	+	+	+	+	. 40
STOMACH	+	A	+	÷	+	+	+	÷	+	÷	+	.+	+	.+	+	-	+	+	+.	÷	+.	+	+	+.	+	43
SMALL INTESTINE Adenomatous Polyp, Nos	+	A	+	+	+	-	+	+	+	+	+	+	+	•	+	-	•	+	+	+	+	+	+	+	٠	40 ₁
LARGE INTESTINE	+	A	+	+	+	+	+	+	+	+	+	+	-	+	-	-	+	+	+	+	+	+	+	+	+	39
URINARY SYSTEM																									-+	
KIDNEY Malignant Lymphoma, Nos	•	A	+	+	+	+	+	+	+	+	+	+	+	*	+	+	•	+	-	+	+	٠	+	+	·	46
URINARY BLADDER	+	A	-	٠	-	+	+	+	÷	+	-	+	+	+	+	+	+	+	+	+	+	+	+	+	+	40
ENDOCRINE SYSTEM		_							_				_		_										+	
PITUITARY Adenoma, Nos	-	A	+	+	+	-	+	* x	+	-	*	+	+	+	-	* x	+	+	+	-	-	+	+	+	-	31
ADRENAL Pheochromocytoma	ŀ		+	+	+	+	+	+	•	+	+	+	+	+	+	+	+	•	-	•	+	+	+	* ×	٠	42 2
THYROID Follicular-cell Adenoma	+	A	+	•	-	*	+	+	+	+	+	+	+	+	+	+	•	+	+	+	+	+	+	+	•	41 2
PARATHYROID	+	A	+	-	-	-	-	+	-	-	-	-	-	-	+	+	-	-	-	-	-	-	-	-	-	10
REPRODUCTIVE SYSTEM																									1	
MAMMARY GLAND Fibroadenoma	N	A	+	•	+	+	•	N	+	+	•	N	+	+	+	+	+	+	N	+	N	N	+	H	N	48× 1
UTERUS LEIOMYOMA	+	A	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	46
OVARY	+	A	+	٠	+	+	+	+	+	+	+	+	-	+	+	+	+	+	+	+	+	+	+	٠	+	41
ALL OTHER SYSTEMS Multiple organs nos Leukemia,nos Monocytic Leukemia	N	A	N	N	N	N	N	N	N	N	H	N	N	N	N	N	N	N	N	N	N	N	N	N	N	48× 3

TABLE B4. FEMALE MICE: TUMOR PATHOLOGY (CONTINUED) VEHICLE CONTROL

* ANIMALS NECROPSIED +: TISSUE EXAMINED MICROSCOPICALLY -: REQUIRED TISSUE NOT EXAMINED MICROSCOPICALLY C: NECROPSY, NO HISTOLOGY DUE TO PROTOCOL X: TUMOR INCIDENCE N: NECROPSY, NO AUTOLYSIS, NO MICROSCOPIC EXAMINATION N: NECROPSY PERFORMED

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TABLE B4.

INDIVIDUAL ANIMAL TUMOR PATHOLOGY OF FEMALE MICE IN THE 2-YEAR **STUDY OF VINYLIDENE CHLORIDE**

LOW DOSE

ANIMAL	T 61					- 1											- 77								
NUMBER	5	5	5	5	5	5	5	5	5	6	ŝ	62	6	6	6	6	6	6	6	Ž	ž	7	73	7	7
WEEKS ON STUDY	9	6	1	ò	?	9	1	0	0	1	1	1	1	8	0	3	0	0 8	8	1	9	6	0	0	8
INTEGUNENTARY SYSTEM	1-61	. 51	. 41	21	31		4	.4	4	41	_11	. 41	.41	4	4	. 41	.01	- 51	41	_21	8	4	4	_41	4
SUBCUTANEOUS TISSUE Sarcoma, nos Fibrous histiocytoma, malignant	•	+	+	•	٠	•	•	+	+	+	+	•	•	+	+	+	* x	+	+	+ x	N	+	+	+	N
RESPIRATORY SYSTEM	T																								
LUNGS AND BRONCHI Alveolar/Bronchiolar Adenoma Osteosarcoma, metastatic	ŀ	+	+	+	+	+	+	+	+	+	-	+	+	+	+	•	+	•	+	+	+ x	+	-	•	-
TRACHEA	-	+	+	+	-	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+
HEMATOPOIETIC SYSTEM	Γ																								
BONE MARROW	+	+	+	+	+	+		+		<u>+</u>	+	<u>+</u>	<u>+</u>	<u>+</u>	<u>+</u>	+	<u>+</u>	- <u>+</u> -	+		+		•	- <u>+</u>	*
SPLEEN Hemangioma Malignant Lymphoma, Nos	Ŀ	•	•	•	•	•	•	•	•	+	•	•	•	*	•	•	•	•	-	•	-	•	+ x	*	_
LYMPH NODES	<u> •</u>		+	+	-	+	+		+	+	+	+	+	+	+	+	+	-	-	-	+	+	+	+	-
THYMUS	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	•	-	-
CIRCULATORY SYSTEM																									Ţ
HEART	L*	+	+	+	+	+	+	+	+	+	+	*	•	+	+	+	+	+	+	+	*	+	<u>+</u>	<u> </u>	+
DIGESTIVE SYSTEM SALIVARY GLAND		•	•		+	-			•		+	÷		÷	÷	÷	+		÷	÷	÷	÷	+		
	†	+	+	*	•	•	<u>+</u>		- <u>*</u>	- <u>*</u> -	- <u></u>	- <u>-</u>	+	<u>+</u>	+	÷.	+	<u>+</u>	+	•	*	+	•	+	Ť
HEPATOCELLULAR ADENOMA Malignant lymphoma, nos Leukemia,nos	Ŀ		×		•		<u>x</u> .											• 							
BILE DUCT	+	+	٠	٠	+	+	٠	+	+	+	+	ŧ	÷	+	٠	+	+	+	+	÷	+	+	+	÷	+
GALLBLADDER & COMMON BILE DUCT	<u>L N</u>	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	N	H	+	+	+	+	+	÷
PANCREAS	≁	+	+	+	+		+	+	+	+	+	+	+	+	+	+	+	+	-	+	-	+	- t	+	
ESOPHAGUS	 -	+		+		+	+	+	+	+		+	+	+	+	+	+	+	<u>+</u>	+	+	+	+	+	+
STOMACH Squamous cell carcinoma Adenomatous Polyp, nos	Ļ	+	•	+	×	-	+	+	•	+	•	+	+	•	+	+	-	*	-	+ x	-	•	•	+	+
SMALL INTESTINE Malignant Lymphoma, Nos	ŀ	+	*	+	+	-	*	+	+	+	+	•	+	•	+	•	-	+	-	+	-	•	•	+	+
LARGE INTESTINE	-	+	+	+	+	-	+	+	+	+	+	+	+	+	+	+	-	+	-	+	-	+	+	+	+
URINARY SYSTEM	Ι.																								
KIDNEY URINARY BLADDER	Ħ	- <u>-</u> -	-	-	<u>.</u>	<u>-</u>	<u>,</u>	<u>.</u>	<u>.</u>	<u> </u>	÷	+	<u>.</u>	÷.	+	÷	-	<u>.</u>	<u>*</u>	Ť	-		<u>*</u>	+ +	+
ENDOCRINE SYSTEM	Ļ.																	·					·		-
PITUITARY Carcinoma, Nos Adenoma, Nos	-	-	٠	-	-	٠	• × .	+	•	+	-	*	-	+	·	+ X	+	+	+	+	-	-	+	+	-
ADRENAL Pheochromocytoma	ŀ	+	•	•	+	+	•	•	+	+	+	+	+	+	+	+	+	+	-	+	+	+	+	+	ł
THYROID Follicular-cell Adenoma	-	+	+	+	+	ţ	٠	+	٠	٠	٠	+	+	+	+	+	٠	+	+	+	-	÷	+	+	+
PARATHYROID	-	-	-	+	-	+	-	+	+	+	_	+	-	-	-	-	+	-	-	_	+	+	_	-	_
REPRODUCTIVE SYSTEM																									+
MAMMARY GLAND Fibroadenoma	ŀ	+	+	+	N	N	+	+	+	+	N	+	+	+	+	+	+	*	N	N	H	N	+	+	ł
UTERUS Endometrial stromal polyp	ļż	+	+	*	-	+	+	+	+	<u>,</u>	+	+	+	+	+	+	-	+	-	+	<u>*</u>	•	+	+	+
OVARY Adenoma, nos Tubular Adenoma	-	+	+	+	٠	+	+	+	+	+	•	+ x.	+	+	+	+	+	+	-	•	*	٠	+	+	+
SPECIAL SENSE ORGANS	<u>†</u>																								+
LACRIMAL GLAND Adenoma, nos	N	N	N	H	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N X	N	N X	N
MUSCULOSKELETAL SYSTEM																									Ţ
BONE OSTEOSARCOMA	H	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N .	N	N	N X	N	N	N	M
MUSCLE Fibrosarcona	N X	N	N	N	N	N	N	N	N	N	H	H	N	N	N	N	N	N	N	N	N	N	N	N	н
ALL OTHER SYSTEMS MULTIPLE ORGANS HOS Malignant Lymphoma, HDS Leukenia, HOS	H X	н	N	N	N	H X	N	H	N	NX	N	H	N	N	н	N	N X	N	н	N	N X	N	N	N	ж×
MONOCYTIC LEUKEMIA +: TISSUE EXAMINED MICROSCOP -: REQUIRED TISSUE NOT EXAMI X: TUNDE INCIDENCE	ICAL NED	LY MIC	ROS	COP	ICA						 c:	NO	TI	SSU	EI	NFOI O H	RMA IST	T I O OL O	N 51 GY 1	JBM		ED PR	010	COL	

TISSUE EXAMINED MICROSCOPICALLY
 Required Tissue not examined microscopically
 Tumor incidence
 Mecropsy, no autolysis, no microscopic examination

: NO TISSUE INFORMATION SUBMITTED C: NECROPSY, NO HISTOLOGY DUE TO PROTOCOL A: Autolysis M: Animal Missing B: No Necropsy Performed

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•	N	N N N N N N N N N	N N N N N N N N N N N N N N X : NO TISS	N N N N N N N N N N N N N N N N N N X : NO TISSUE IN C: NECROPSY, NO	N N N N N N N N N N N N N N N N N N N N	N X : NO TISSUE INFORMATIO C: NEORPEY, NO HISTOL	N N N N N N N N N N N N N N N N N N N N	N N N N N N N N N N N N N N N N N N N N	N N N N N N N N N N N N N N N N N N N	N N N N N N N N N N N N N N N N N N N	N N N N N N N N N N N N A N N N N N N N	N N N N N N N N N N N N N A N N N N N N

TABLE B4. FEMALE MICE: TUMOR PATHOLOGY (CONTINUED) LOW DOSE

TABLE B4.

INDIVIDUAL ANIMAL TUMOR PATHOLOGY OF FEMALE MICE IN THE 2-YEAR **STUDY OF VINYLIDENE CHLORIDE**

HIGH DOSE

ANIMAL NUMBER	0	0 5 2	0	0	0	0	0	0	9 5	0	0	0	0	0	0	0	0	8	0	9	9	9	07	?	0 7
WEEKS ON Study	1 0 8	2	-3	4	5	-0-1-0-1-0-1-0-1-0-1-0-1-0-1-0-1-0-1-0-	-7	8	9	0	1	2	3	4	5	6 0 8	1	8 0 8	9	0	1	2	3	1	5 1 0
RESPIRATORY SYSTEM	ŏl	41	4	4	4	4	4	61	4	4	4	_6	41	41	4	_01	4	_01	_41	4	41	41	41	41	-4
LUNGS AND BRONCHI Alveolar/bronchiolar Adenoma	+	٠	+	+	+	+	-	÷	+	+	+	+	+	•	+	+	+	+	+	+	+	+	+	+	+
TRACHEA	+	+	-	+	+	-	-	-	+	+	÷	+	+	+	+	+	ŧ	-	+	+	+	+	+	+	+
HEMATOPOIETIC SYSTEM	+							-																	-
BONE MARROW	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	•	+	+	+	+	+	+	+	+	.+
SPLEEN	+	+	÷	+	+	+	-	+	+	+	+	+	+	+	<u>+</u>	+	+	_+	-	+	+	+	+	•	+
LYMPH NODES Lymphangioma	-	+	+	-	+	+	-	-	+ -	•	+	+	+	+	+	•	+	-	+	+	+	+	+	•	+
THYMUS	-	-	-	-	-	+	-	-	-	+	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
CIRCULATORY SYSTEM	\top					_																			
HEART	+	+	+	+	+	+	-	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+
DIGESTIVE SYSTEM	Τ																								
SALIVARY GLAND	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	<u>+</u>	+	+	+	+	+
LIVER HEPATOCELLULAR ADENOMA HEPATOCELLULAR CARCINOMA HEMANGIOMA		+	+	+	+	+	•	•	+	+	+	+	+	•	+	+	+	+	+	+	+	•	+	+ ×	+
BILE DUCT	+	<u>+</u>	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	÷	÷	+	+
GALLBLADDER & COMMON BILE DUCT	+	+	+	+	N	+	+	+	+	+	N	+	N	+	+	+	+	N	N.	+	+	+	+	+	+
PANCREAS	++	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+
ESOPHAGUS	<u> </u>	+	-	+	+	+_	-		+	+	+	+	•	+	+	+	+	-	+	+	+	+_	+	-	+
STOMACH Squamous cell carcinoma Adenomatous Polyp, Nos	+	+	+	+	+	+	+	-	+	•	+	+	-	+	+	+	+	~	+	+	+	+	+	+	+
SMALL INTESTINE Malignant Lymphoma, Nos Malignant Lymphoma, Mixed Type	+	+	-	+	+	+	+	+	•	+	+	+	•	+	•	+	+	-	+	•	+	+ x	+	+	+
LARGE INTESTINE	+	+	÷	+	+	+	-	+	+	+	+	÷	+	÷	+	+	÷	-	+	+	+	+	+	+	+
URINARY SYSTEM	+									-						-									\neg
KIDNEY Malignant lymphoma, nos	+	+	+	+	+	+	+	+	+	+	+	+	+	+	* X	+	+	+	+	+	+	+	+	+	+
URINARY BLADDER	+	+	+	+	÷	+	+	+	+	+	÷	+	÷	+	+	+	÷	-	+	+	+	+	+	-	+
ENDOCRINE SYSTEM			-																			-			_
PITUITARY Adenoma, nos	+	-	+	+	+	+	+	+	+	-	+	•	+	*	+	+	+	+	+	+	+	-	+	+	-
ADRENAL Pheochromocytoma	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+
THYROID	++-	+	-	+	+	+	-	-	+	+	+	+	+	+	+	+	+	-	+	+	+	+	+	+	+
PARATHYROID	-	-	-	+	-	-	-	-	+	-	-	-	+	-	-	-	•	-	-	+	-	+	-	-	-
REPRODUCTIVE SYSTEM	\vdash							-		_									-			_	_		-
MAMMARY GLAND Fibrgadenoma	N	+	+	N X	+	+	+	+	+	+	+	+	+	+	+	N	+	N	+	+	+	+	+	+	+
UTERUS Endometrial stromal polyp	L.	* ×	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	<u>*</u>	+	-	+
OVARY Cystadenoma, Nos	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	٠	٠	+	+	+	+	+	+	+
SPECIAL SENSE ORGANS	+																								
LACRIMAL GLAND Adenoma, nos	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N
ALL OTHER SYSTEMS	+-			,																					
MULTIPLE DRGANS NOS Malignant Lymphoma, Nos Malig.lymphoma, Lymphocytic Type Monocytic Leuxemia	N	N	N	N X	N	H	N	H	н	H	н	н	н	N	N	N	N	N	N	N	H X	N	N	N	N

+: TISSUE EXAMINED MICROSCOPICALLY -: Required Tissue not examined microscopically X: Tumor Inclipence N: Necropsy, no Autolysis, no microscopic examination

: NO TISSUE INFORMATION SUBMITTED C: Necropsy, no histology due to protocol A: Autolysis M: Animal Missing B: No Necropsy Performed

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TABLE B4. FEMALE MICE: TUMOR PATHOLOGY (CONTINUED) HIGH DOSE

* ANIMALS NECROPSIED +: TISSUE EXAMINED MICROSCOPICALLY -: REQUIRED TISSUE NOT EXAMINED MICROSCOPICALLY X: TUMOR INCIDENCE N: NECROPSY, NO AUTOLYSIS, NO MICROSCOPIC EXAMINATION

: NO TISSUE INFORMATION SUBMITTED C: Necropsy, no histology due to protocol A: Autolysis M: Animal Missing B: No Necropsy Performed

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Appendix C

Summary of the Incidence of Nonneoplastic Lesions in Rats Administered Vinylidene Chloride by Gavage

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TABLE C1.

SUMMARY OF THE INCIDENCE OF NONNEOPLASTIC LESIONS IN MALE RATS ADMINISTERED VINYLIDENE CHLORIDE BY GAVAGE

	VEHICLE Control	LOW DOSE	HIGH DOSE
ANIMALS INITIALLY IN STUDY ANIMALS NECROPSIED ANIMALS EXAMINED HISTOPATHOLOGICALLY	50 50 50	50 48 48	50 48 48
INTEGUMENTARY SYSTEM			
*SKIN HYPERKERATOSIS ACANTHOSIS	(50)	1 (2%)	(48) 1 (2%)
RESPIRATORY SYSTEM			
#TRACHEAL CARTILAGE MINERALIZATION	(46)	(47) 1 (2%)	(38)
#LUNG EMPHYSEMA, ALVEOLAR EDEMA, NOS HEMORRHAGE	(50)	(47) 1 (2%) 1 (2%) 2 (4%)	(47) 1 (2%)
INFLAMMATION, FOCAL INFLAMMATION, CHRONIC INFLAMMATION, GRANNLOMATOUS Hyperplasia, Adenomatous Metaplasia, Squamous	1 (2%) 11 (22%) 1 (2%) 1 (2%)	1 (2%) 13 (28%) 1 (2%) 1 (2%)	21 (45%) 3 (6%) 1 (2%)
HEMATOPOIETIC SYSTEM			
*MAMMARY GLAND Hyperplasia, lymphoid	(50)	(48) 1 (2%)	(48)
#BONE MARROW Hyperplasia, nos Hyperplasia, reficulum cell	(50) 1 (2%)	(47)	(46) 1 (2%) 1 (2%)
#SPLEEN CYST, NOS CONGESTION, NOS	(50)	(47) 1 (2%)	(48)

	VEHICLE Control	LOW DOSE	HIGH DOSE
FIBROSIS Sclerosis Hemosiderosis	2 (4%)	1 (2%) 1 (2%)	2 (4%) 1 (2%) 1 (2%)
HYPERPLASIA, NOS Hyperplasia, mesothelial Hyperplasia, lymphoid Hematopoiesis	3 (6%)	1 (2%)	1 (2%) 1 (2%)
#LYMPH NODE Hyperplasia, Nos	(45)	(47)	(44) 1 (2%)
#MESENTERIC L. NODE PIGMENTATION, NOS	(45) 1 (2%)	(47)	(44)
#LIVER HEMATOPOIESIS	(49)	(48) 1 (2%)	(45)
#COLON Hyperplasia, lymphoid	(35) 1 (3%)	(35) 5 (14%)	(39) 4 (10%)
CIRCULATORY SYSTEM			
#LUNG PERIARTERITIS	(50)	(47) 1 (2%)	(47)
#HEART THROMBOSIS, NOS	(50) 1 (2%)	(48)	(47)
INFLAMMATION, NOS INFLAMMATION, CHRONIC FIBROSIS, FOCAL FIBROSIS, DIFFUSE	2 (4%) 4 (8%) 4 (8%)	8 (17%) 2 (4%)	1 (2%) 4 (9%) 7 (15%) 4 (9%) 1 (2%)
DEGENERATION, NOS Necrosis, Nos Necrosis, Focal	9 (18%) 4 (8%) 1 (2%)	6 (13%) 3 (6%)	4 (9%) 2 (4%)
#AURICULAR APPENDAGE THROMBOSIS, NOS	(50)	(48)	(47) 3 (6%)
#MYOCARDIUM Inflammation, acute/chronic	(50) 1 (2%)	(48)	(47)
#ENDOCARDIUM Inflammation, NOS	(50)	(48)	(47)

	VEHICLE Control	LOW DOSE	HIGH DOSE
*CORONARY ARTERY Inflammation, chronic Hypertrophy, nos	(50)	(48) 1 (2%)	(48) 1 (2%)
*PULMONARY ARTERY HYPERTROPHY, NOS	(50)	(48) 1 (2%)	(48)
#LIVER ANEURYSM THROMBOSIS, NOS	(49)	(48)	(45) 1 (2%) 1 (2%)
#PANCREAS PERIARTERITIS	(49) 1 (2%)	(47) 1 (2%)	(48)
#TESTIS ARTERIOSCLEROSIS, NOS	(50) 2 (4%)	(47)	(48)
DIGESTIVE SYSTEM			
*TONGUE Hyperplasia, focal	(50)	(48)	(48) 1 (2%)
#LIVER EDEMA, NOS HEMORRHAGE INFLAMMATION, NOS INFLAMMATION, MULTIFOCAL NECROSIS, DIFFUSE METAMORPHOSIS FATTY HYPERPLASIA, NODULAR HYPERPLASIA, FOCAL	(49) 6 (12%) 3 (6%) 5 (10%)	(48) 1 (2%) 12 (25%) 3 (6%) 3 (6%)	(45) 1 (2%) 1 (2%) 2 (4%) 1 (2%) 6 (13%) 1 (2%) 3 (7%)
#LIVER/CENTRILOBULAR NECROSIS, NOS	(49)	(48)	(45) 1 (2%)
#LIVER/PERIPORTAL INFLAMMATION, CHRONIC	(49) 1 (2%)	(48)	(45)
#LIVER/HEPATOCYTES CYTOPLASMIC VACUOLIZATION	(49) 2 (4%)	(48)	(45)
#BILE DUCT Hyperplasia, NOS	(49) 7 (14%)	(48) 9 (19%)	(45) 7 (16%)

	VEHICLE Control	LOW DOSE	HIGH DOSE
#PANCREAS INFLAMMATION, CHRONIC FIBROSIS PIGMENTATION, NOS ATROPHY, NOS	(49) 1 (2%) 1 (2%) 1 (2%)	(47) 1 (2%) 1 (2%) 1 (2%)	(48)
ATROPHY, FOCAL	1 (2%) 1 (2%)	8 (17%)	7 (15%)
#STOMACH INFLAMMATION, NOS ULCER, NOS ULCER, PERFORATED SCLEROSIS HYPERPLASIA, EPITHELIAL	(41) 1 (2%) 1 (2%)	(43) 1 (2%) 1 (2%) 1 (2%)	(47)
#DUODENUM INFLAMMATION, CHRONIC	(38)	(38)	(44) 1 (2%)
#JEJUNUM POLYP	(38)	(38) 1 (3%)	(44)
#COLON NEMATODIASIS POLYP	(35)	(35) 2 (6%) 1 (3%)	(39)
URINARY SYSTEM			
#KIDNEY MINERALIZATION CYST, HOS	(50)	(48) 1 (2%)	(48) 1 (2%)
GLOMERULONEPHRITIS, NOS Inflammation, Chronic Pigmentation, Nos	26 (52%) 1 (2%)	1 (2%) 24 (50%)	43 (90%)
#KIDNEY/TUBULE NECROSIS, FOCAL	(50)	(48)	(48) 1 (2%)
#URINARY BLADDER HEMORRHAGE	(44)	(42) 1 (2%)	(43)
ENDOCRINE SYSTEM			
#PITUITARY CYST, NOS	(49)	(47) 2 (4%)	(44)

	VEHICLE Control	LOW DOSE	HIGH DOSE
HEMORRHAGE HYPERPLASIA, FOCAL	1 (2%) 2 (4%)		~~~~~~~~~~
HYPERPLASIA, CYSTIC Angiectasis	6 (12%)	6 (13%)	1 (2%) 3 (7%)
#ADRENAL	(50)	(48)	(47)
NECROSIS, FOCAL Metamorphosis fatty	2 (4%)	1 (2%)	1 (2%) 4 (9%)
HYPERPLASIA, FOCAL Angiectasis	1 (2%) 2 (4%)	1 (2%)	3 (6%)
#ADRENAL CORTEX Hemorrhage Cytoplasmic vacuolization	(50)	(48) 1 (2%) 1 (2%)	(47)
HYPERPLASIA, NOS Hyperplasia, focal	1 (2%)		4 (9%)
#ADRENAL MEDULLA Hyperplasia, focal	(50)	(48)	(47) 1 (2%)
#THYROID Inflammation, Chronic Atrophy, Nos	(48)	(46) 1 (2%)	(41) 1 (2%)
#THYROID FOLLICLE Atrophy, Nos	(48) 1 (2%)	(46)	(41)
#PARATHYROID	(35)	(39)	(32)
CYST, NOS Hyperplasia, Nos		1 (3%)	1 (3%)
REPRODUCTIVE SYSTEM			
*MAMMARY GLAND	(50)	(48)	(48)
HYPERPLASIA, NOS Hyperplasia, cystic	1 (2%) 1 (2%)	2 (4%)	2 (4%) 3 (6%)
#PROSTATE INFLAMMATION, ACUTE INFLAMMATION, CHRONIC INFLAMMATION, GRANULOMATOUS Hyperplasia, Cystic	(22)	(35) 1 (3%)	(32) 2 (6%) 2 (6%) 1 (3%) 1 (3%)
*SEMINAL VESICLE INFLAMMATION, CHRONIC	(50)	(43)	(48)

	VEHICLE Control	LOW DOSE	HIGH DOSE
HYPERPLASIA, NOS HYPERPLASIA, PAPILLARY HYPERPLASIA, CYSTIC	1 (2%)	1 (2%)	1 (2%)
#TESTIS MINERALIZATION	(50)	(47)	(48)
EDEMA, NOS Atrophy, nos Hyperplasia, interstitial cell	1 (2%) 2 (4%)	2 (4%) 2 (4%)	1 (2%) 1 (2%)
NERVOUS SYSTEM			
#BRAIN/MENINGES Congestion, nos Hyperplasia, nos	(50)	(48) 1 (2%) 1 (2%)	(47)
#BRAIN Hemorrhage	(50)	(48) 2 (4%)	(47)
#CEREBELLUM Demyelinization	(50) 3 (6%)	(48)	(47)
#CEREBELLAR WHITE MAT EXTRACELLULAR VACUOLE ALTERATION	(50) 1 (2%)	(48)	(47)
SPECIAL SENSE ORGANS			
*EYE MINERALIZATION CATARACT	(50) 1 (2%)	(48) 1 (2%)	(48) 1 (2%) 2 (4%)
*EYE/CRYSTALLINE LENS MINERALIZATION	(50) 1 (2%)	(48)	
MUSCULOSKELETAL SYSTEM			
NONE			
BODY CAVITIES			
*ABDOMINAL CAVITY STEATITIS	(50) <u>1 (2%)</u>	(48)	(48)

	VEHICLE Control	LOW DOSE	HIGH DOSE
ALL OTHER SYSTEMS			
*MULTIPLE ORGANS INFLAMMATION, CHRONIC	(50)	(48) 1 (2%)	(48)
SPECIAL MORPHOLOGY SUMMARY			
NO LESION REPORTED	1	1	
AUTO/NECROPSY/HISTO PERF AUTOLYSIS/NO NECROPSY	I	2	2
# NUMBER OF ANIMALS WITH TISSUE EX	AMINED MICROSCOPI	CALLY	

* NUMBER OF ANIMALS NECROPSIED

TABLE C2.

SUMMARY OF THE INCIDENCE OF NONNEOPLASTIC LESIONS IN FEMALE RATS ADMINISTERED VINYLIDENE CHLORIDE BY GAVAGE

,	VEHICLE Control	LOW DOSE	HIGH DOSE
ANIMALS INITIALLY IN STUDY ANIMALS NECROPSIED ANIMALS EXAMINED HISTOPATHOLOGICALLY	50 49 49	50 50 50 50	50 45 45
INTEGUMENTARY SYSTEM			
*SKIN INFLAMMATION, ACUTE FOCAL	(49)	(50) 1 (2%)	(45)
RESPIRATORY SYSTEM			
#LUNG EMPHYSEMA, ALVEOLAR INFLAMMATION, NOS INFLAMMATION, FOCAL INFLAMMATION, ACUTE INFLAMMATION, CHRONIC INFLAMMATION, GRANULOMATOUS INFLAMMATION, FOCAL GRANULOMATOU PERIVASCULAR CUFFING HYPERPLASIA, ADENOMATOUS METAPLASIA, SQUAMOUS	(49) 18 (37%) 5 (10%) 1 (2%) 1 (2%) 1 (2%)	(50) 1 (2%) 1 (2%) 1 (2%) 1 (2%) 15 (30%) 3 (6%) 3 (6%) 1 (2%) 1 (2%)	(45) 16 (36%) 6 (13%) 2 (4%)
HEMATOPOIETIC SYSTEM			
#BONE MARROW HYPOPLASIA, NOS HYPERPLASIA, NOS MYELOFIBROSIS HYPERPLASIA, RETICULUM CELL	(49) 1 (2%)	(50) 1 (2%)	(45) 1 (2%) 1 (2%) 1 (2%)
#SPLEEN CONGESTION, NOS HEMOSIDEROSIS Lymphoid depletion	(49) 1 (2%) 1 (2%)	(50) 1 (2%)	(45) 1 (2%) 1 (2%)
HYPERPLASIA, NODULAR Hyperplasia, Nos	1 (2%)	1 (2%)	

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

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	VEHICLE Control	LOW DOSE	HIGH DOSE
HYPERPLASIA, RETICULUM CELL Hyperplasia. Lymphoid		1 (2%)	1 (2%) 2 (4%)
#LYMPH NODE Hyperplasia, lymphoid	(46) 1 (2%)	(45)	(42)
#MANDIBULAR L. NODE Hyperplasia, lymphoid	(46)	(45) 1 (2%)	(42)
#LIVER HEMATOPOIESIS	(49)	(50) 1 (2%)	(45) 1 (2%)
<pre>#PANCREAS HYPERPLASIA, LYMPHOID</pre>	(48)	(50)	(45) 1 (2%)
#COLON HYPERPLASIA, LYMPHOID	(43)	(43) 1 (2%)	(42) 1 (2%)
CIRCULATORY SYSTEM			
#HEART THROMBOSIS, NOS INFLAMMATION, CHRONIC FIBROSIS FIBROSIS, FOCAL DEGENERATION, NOS NECROSIS, NOS	(49) 1 (2%) 3 (6%) 5 (10%) 5 (10%) 3 (6%)	(50) 1 (2%) 2 (4%) 3 (6%) 2 (4%)	(45) 4 (9%) 3 (7%) 1 (2%) 2 (4%)
#AURICULAR APPENDAGE THROMBOSIS, NOS	(49)	(50) 1 (2%)	(45) 1 (2%)
#LEFT AURICULAR APPEN THROMBOSIS, NOS	(49)	(50) 1 (2%)	(45)
#LEFT VENTRICLE Thrombosis, Nos	(49) 1 (2%)	(50)	(45)
#MYOCARDIUM Inflammation, interstitial	(49)	(50) 1 (2%)	(45)
*AORTA Inflammation, Chronic	(49) 1 (2%)	(50)	(45)
#LIVER THROMBOSIS, NOS	(49)	(50)	(45)

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TABLE C2. FEMALE RATS: NONNEOPLASTIC LESIONS (CONTINUED)

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

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	VEHICLE Control	LOW DOSE	HIGH DOSE
#ADRENAL Thrombosis, Nos		(50)	(43) 1 (2%)
DIGESTIVE SYSTEM			
#SALIVARY GLAND Sclerusis Atrophy, focal	(48)	(50)	(45) 1 (2%) 1 (2%)
#LIVER Multiple cysts	(49)	(50) 1 (2%)	(45)
INFLAMMATION, CHRONIC FOCAL NECROSIS, FOCAL NECROSIS, DIFFUSE	3 (6%) 2 (4%) 1 (2%)	1 (2%) 8 (16%)	1 (2%) 2 (4%) 2 (4%) 2 (4%)
HYPERPLASIA, NOS HYPERPLASIA, FOCAL	1 (2%)	18 (36%)	
#LIVER/CENTRILOBULAR NECROSIS, COAGULATIVE	(49)	(50)	(45) 1 (2%)
#LIVER/PERIPORTAL Inflammation, Chronic	(49)	(50) 1 (2%)	(45)
#LIVER/HEPATOCYTES Cytologic Alteration, Nos	(49) 1 (2%)	(50)	(45)
#BILE DUCT Hyperplasia, Nos	(49) 2 (4%)	(50)	(45) 1 (2%)
<pre>#PANCREAS METAMORPHOSIS FATTY ATROPHY, FOCAL</pre>	(48) 1 (2%)	(50) 1 (2%)	(45) 1 (2%)
#ESOPHAGUS HYPERKERATOSIS	(45)	(49)	(42)
#STOMACH Ulcer, NOS Degeneration, Cystic	(47) 1 (2%)	(48)	(42)

	VEHICLE Control	LOW DOSE	HIGH DOSE
HYPERPLASIA, EPITHELIAL		1 (2%)	
#COLON NEMATODIASIS	(43) 1 (2%)	(43)	(42)
JRINARY SYSTEM			
#KIDNEY MINERALIZATION	(49)	(49) 1 (2%)	(44)
INFLAMMATION, NOS INFLAMMATION, CHRONIC CALCINOSIS, NOS	1 (2%) 3 (6%)	6 (12%) 1 (2%)	9 (20%)
#URINARY BLADDER HYPERPLASIA, EPITHELIAL	(45)	(45) 3 (7%)	(41) 1 (2%)
NDOCRINE SYSTEM			
#PITUITARY CYST, NOS	(48) 1 (2%)	(49)	(43) 2 (5%)
NULTIPLE CYSTS EDEMA, NOS	1 (2%)	1 (2%) 2 (4%) 2 (4%)	
EXTRACELLULAR VACUOLE ALTERATION ATROPHY, FOCAL	1 (2%) 1 (2%)		
HYPERPLÁSIA, NOS Angiectasis	15 (31%)	1 (2%) 14 (29%)	9 (21%)
#ADRENAL	(48)	(50)	(43)
NECROSIS, DIFFUSE METAMORPHOSIS FATTY ANGIECIASIS	1 (2%) 2 (4%) 1 (2%)	3 (6%) 2 (4%)	1 (2%) 3 (7%)
#ADRENAL CORTEX METAMORPHOSIS FATTY	(48) 1 (2%)	(50)	(43)
#ADRENAL MEDULLA MINERALIZATION	(48)	(50)	(43)
HYPERPLASIA, NOS HYPERPLASIA, FOCAL	1 (2%)		1 (2%)
#THYROID	(47)	(47)	(44)
INFLAMMATION, CHRONIC ATROPHY, NOS	1 (2%)		1 (2%)

TABLE C2. FEMALE RATS: NONNEOPLASTIC LESIONS (CONTINUED)

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

	VEHICLE Control	LOW DOSE	HIGH DOSE
GOITER HYPERPLASIA, C-CELL	1 (2%) 1 (2%)	1 (2%)	
#PARATHYROID Hyperplasia, Nos	(33)	(39)	(35) 1 (3%)
REPRODUCTIVE SYSTEM			
*MAMMARY GLAND DILATATION/DUCTS CYST, NOS Hyperplasia, NOS Hyperplasia, Cystic	(49) 1 (2%) 2 (4%) 1 (2%) 5 (10%)	(50) 5 (10%)	1 (2%) 2 (4%)
#UTERUS DILATATION, NOS ATROPHY, DIFFUSE HYPERPLASIA, STROMAL	(48)	(49) 1 (2%)	(42) 1 (2%) 2 (5%)
#CERVIX UTERI HYPERPLASIA, STROMAL	(48)	(49) 1 (2%)	(42)
#UTERUS/ENDOMETRIUM CYST, NOS HYPERPLASIA, NOS HYPERPLASIA, CYSTIC	(48) 3 (6%) 1 (2%)	(49) 2 (4%) 5 (10%)	(42) 1 (2%) 3 (7%) 2 (5%)
#OVARY CYST, NOS FOLLICULAR CYST, NOS MULTIPLE CYSTS POLYCYSTIC OVARY PAROVARIAN CYST HYPERTROPHY, NOS	(47) 1 (2%)	(49) 3 (6%) 1 (2%) 1 (2%) 1 (2%)	(44) 2 (5%) 1 (2%)
NERVOUS SYSTEM			
<pre>#BRAIN HYDROCEPHALUS, INTERNAL CONGESTION, NOS HEMORRHAGE</pre>	(49) 1 (2%) 1 (2%)	(50) 1 (2%) 1 (2%)	(45)
#CEREBELLUM DFMYELINIZATION	(49) 3 (6%)	(50) <u>1 (2%)</u>	(45)

TABLE C2. FEMALE RATS: NONNEOPLASTIC LESIONS (CONTINUED)

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

	VEHICLE Control	LOW DOSE	HIGH DOSE
#CEREBELLAR UHITE MAT EXTRACELLULAR VACUOLE ALTERATION	(49) 8 (16%)	(50) 1 (2%)	(45)
SPECIAL SENSE ORGANS			
XEYE Agenesis Cataract	(49) 1 (2%)	(50) 2 (4%)	
*EYE/RETINA ATROPHY, NOS	(49) 1 (2%)	(50)	(45)
MUSCULOSKELETAL SYSTEM			
¥BONE HEALED FRACTURE	(49)	(50)	(45) 1 (2%)
*COSIGCHONDRAL SYNCHO NECROSIS, ASEPTIC	(49)	(50) 1 (2%)	(45)
BODY CAVITIES			
*PERITONEUM INFLAMMATION, FOCAL	(49)	(50) 1 (2%)	(45)
ALL OTHER SYSTEMS			
NONE			
SPECIAL MORPHOLOGY SUMMARY			
NO LESION REPORTED Autolysis/no necropsy	1 1		1 5
# NUMBER OF ANIMALS WITH TISSUE EXAMIN * NUMBER OF ANIMALS NECROPSIED	IED MICROSCOPIC	CALLY	

TABLE C2. FEMALE RATS: NONNEOPLASTIC LESIONS (CONTINUED)

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Appendix D

Summary of the Incidence of Nonneoplastic Lesions in Mice Administered Vinylidene Chloride by Gavage

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TABLE D1.

	VEHICLE Control	LOW DOSE	HIGH DOSE
ANIMALS INITIALLY IN STUDY ANIMALS NECROPSIED ANIMALS EXAMINED HISTOPATHOLOGICALLY	50 47 46	50 47 47	50 50 50
INTEGUMENTARY SYSTEM			
*SKIN INFLAMMATION, NOS	(47)	(47) 1 (2%)	(50)
RESPIRATORY SYSTEM			
#LUNG HEMORRHAGE INFLAMMATION, NOS INFLAMMATION, FOCAL INFLAMMATION, DIFFUSE INFLAMMATION, INTERSTITIAL INFLAMMATION, FOCAL GRANULOMATOU HEMOSIDEROSIS HYPERPLASIA, ALVEOLAR EPITHELIUM	(46) 1 (2%) 1 (2%) 1 (2%) 1 (2%) 2 (4%)	(45) 1 (2%) 1 (2%) 1 (2%) 1 (2%)	(46) 2 (4%) 1 (2%) 1 (2%)
HEMATOPOIETIC SYSTEM			
#SPLEEN CONGESTION, NOS HYPERPLASIA, LYMPHOID	(45) 1 (2%)	(45)	(48) 1 (2%) 3 (6%)
#LYMPH NODE CONGESTION, NOS INFLAMMATION, NOS NECROSIS, NOS HYPERPLASIA, LYMPHOID	(28) 1 (4%) 1 (4%) 1 (4%)	(38) 1 (3%)	(43) 1 (2%)
#MESENTERIC L. NODE CONGESTION, NOS HEMORRHAGE INFLAMMATION, NOS	(28) 1 (4%) 2 (7%)	(38) 2 (5%) 1 (3%)	(43) 2 (5%) <u>1 (2%)</u>

SUMMARY OF THE INCIDENCE OF NONNEOPLASTIC LESIONS IN MALE MICE ADMINISTERED VINYLIDENE CHLORIDE BY GAVAGE

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

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	VEHICLE Control	LOW DOSE	HIGH DOSE
HYPERPLASIA, NODULAR Hyperplasia, lymphoid	1 (4%)	1 (3%)	1 (2%)
#RENAL LYMPH NODE Inflammation, Nos	(28)	(38)	(43) 1 (2%)
#LIVER HEMATOPOIESIS	(46) 1 (2%)	(46)	(49)
#KIDNEY Hyperplasia, lymphoid	(45) 1 (2%)	(46) 1 (2%)	(46)
CIRCULATORY SYSTEM			
#HEART FIBROSIS, FOCAL	(46) 1 (2%)	(47)	(49)
#MYOCARDIUM INFLAMMATION, FOCAL INFLAMMATION, INTERSTITIAL	(46)	(47)	(49) 1 (2%) 1 (2%)
	(46)	((2%)	(49)
DIGESTIVE SYSTEM			
#SALIVARY GLAND Inflammation, Focal	(46)	(46)	(46) 1 (2%)
#LIVER HEMDRRHAGE	(46)	(46)	(49)
	1 (2%)	2 (4%)	3 (6%)
INFLAMMATION, FOCAL GRANULOMATOU NECROSIS, NOS NECROSIS, FOCAL NECROSIS, DIFFUSE METAMORPHOSIS FATTY CLEAR-CELL CHANGE CYTOLOGIC ALTERATION, NOS	1 (2%) 1 (2%) 4 (9%) 2 (4%) 3 (7%)	1 (2%) 2 (4%) 4 (9%)	3 (6%) 3 (6%) 1 (2%) 5 (10%) 3 (6%)
#PANCREAS DILATATION/DUCTS	(44)	(46)	(48)

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

	VEHICLE Control	LOW DOSE	HIGH DOSE
DEGENERATION, CYSTIC NECROSIS, FOCAL		1 (2%)	1 (2%)
#PANCREATIC ACINUS NECROSIS, NOS Atrophy, Focal	(44) 1 (2%)	(46)	(48) 1 (2%)
#STOMACH INFLAMMATION, NOS PARASITISM METAPLASIA, SQUAMOUS	(43) 2 (5%)	(40)	(42) 1 (2%) 1 (2%)
#JEJUNUM PLASMA-CELL INFILTRATE	(36)	(41)	1 (34)
URINARY SYSTEM			
#KIDNEY INFLAMMATION, INTERSTITIAL PYELONEPHRITIS, ACUTE INFLANMATION, CHRONIC METAMORPHOSIS FATTY METAPLASIA, OSSEOUS	(45) 1 (2%)	(46) 1 (2%) 2 (4%)	(46) 1 (2%) 1 (2%)
#URINARY BLADDER	(38)	1 (7.1/)	(44)
ENDOCRINE SYSTEM			
#PITUITARY CYST, NOS	(35) 1 (3%)	(34)	(36) 1 (3%)
#ADRENAL Congestion, NOS	(41) 1 (2%)	(43)	(47)
#ADRENAL CORTEX Hyperplasia, Focal	(41)	(43) 1 (2%)	(47)
#ADRENAL MEDULLA Hyperplasia, Nos	(41)	(43) 1 (2%)	(47)
#THYROID ATROPHY, NOS	(41)	(45)	(46)

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

	VEHICLE Control	LOW DOSE	
#PANCREATIC ISLETS Hyperplasia, Nos Hyperplasia, Focal	(44) 1 (2%)	(46)	1 (27)
REPRODUCTIVE SYSTEM			
*PREPUTIAL GLAND Degeneration, cystic Metaplasia, squamous	(47) 1 (2%) 1 (2%)	(47)	(50)
#PROSTATE Inflammation, acute	(36) 1 (3%)	(40)	(40)
*SEMINAL VESICLE DILATATION, NOS	(47)	(47) 1 (2%)	(50) 1 (2%)
NERVOUS SYSTEM			
NONE			
SPECIAL SENSE ORGANS			
*EYE/LACRIMAL GLAND CYST, NOS	(47)	(47)	1 (2%)
MUSCULOSKELETAL SYSTEM			
*STERNUM EXOSTOSIS	1 (2%)	(47)	
BODY CAVITIES			
*ABDOMINAL CAVITY Necrosis, fat	(47)	(47)	(50) 1 (2%)
*EPICARDIUM Inflammation, focal Fibrosis, focal	(47) 1 (2%)	(47) 1 (2%)	(50)
ALL OTHER SYSTEMS			• • • • • • • • • • • •

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

	VEHICLE Control	LOW DOSE	HIGH DOSE
SPECIAL MORPHOLOGY SUMMARY			
NO LESION REPORTED	10	14	6
AUTO/NECROPSY/NO HISTO Autolysis/No necropsy	3	3	
# NUMBER OF ANIMALS WITH TISSUE EX * NUMBER OF ANIMALS NECROPSIED	XAMINED MICROSCOPI	CALLY	

TABLE D2.

	VEHICLE Control	LOW DOSE	HIGH DOSE
ANIMALS INITIALLY IN STUDY ANIMALS NECROPSIED ANIMALS EXAMINED HISTOPATHOLOGICALLY	50 48 48	50 49 49	50 50 50
INTEGUMENTARY SYSTEM			
*SKIN ULCER, NOS	(48)	(49) 1 (2%)	(50)
RESPIRATORY SYSTEM			
#LUNG/BRONCHUS INFLAMMATION, CHRONIC	(48) 1 (2%)	(45) 1 (2%)	(48)
#LUNG INFLAMMATION, FOCAL INFLAMMATION, CHRONIC	(48)	(45) 1 (2%) 1 (2%)	(48)
HEMATOPOIETIC SYSTEM			
*MULTIFLE CRGANS Hyperplasia, lymphoid	(48)	(49) 1 (2%)	(50)
#SPLEEN CONGESTION, NOS INFLAMMATION, NOS NECROSIS, DIFFUSE HYPERPLASIA, LYMPHOID	(46)	(47) 2 (4%) 5 (11%)	(46) 1 (2%) 1 (2%) 1 (2%) 2 (4%)
#MESENTERIC L. NODE INFLAMMATION, NOS	(29)	(36)	(42)
#LIVER HEMATOPOIESIS	(47)	(49)	(49) 1 (2%)
#KIDNEY HYPERPLASIA, LYMPHOID	(46)	(49)	(50)

SUMMARY OF THE INCIDENCE OF NONNEOPLASTIC LESIONS IN FEMALE MICE ADMINISTERED VINYLIDENE CHLORIDE BY GAVAGE

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

	VEHICLE Control	LOW DOSE	HIGH DOSE
#URINARY BLADDER Hyperplasia, lymphoid	(40) 1 (3%)	(45)	(45)
#THYMUS NECROSIS, NOS			(4) 1 (25%)
SIRCULATORY SYSTEM			
#LUNG Embolus, septic	(48)	(45) 1 (2%)	(48)
#MYOCARDIUM Infection, Bacterial	(48)	(48) 1 (2%)	(48)
#HEPATIC SINUSOID Congestion, Nos	(47) 1 (2%)	(49)	(49)
DIGESTIVE SYSTEM			
#LIVER HEMORRHAGE INFLAMMATION, NOS INFLAMMATION, FOCAL	(47) 1 (2%)	(49)	(49) 1 (2%) 1 (2%)
INFLAMMATION, MULTIFOCAL INFLAMMATION, GRANULOMATOUS INFLAMMATION, FOCAL GRANULOMATOU NECROSIS, FOCAL NECROSIS, DIFFUSE METAMORPHOSIS FATTY	1 (2%)	3 (6%) 1 (2%) 1 (2%) 2 (4%) 2 (4%) 2 (4%)	1 (2%) 3 (6%)
BASOPHILIC CYTO CHANGE	1 (2%)	2 (74)	5 (6%)
#BILE DUCT Inflammation, focal Inflammation, chronic	(47) 2 (4%)	(49)	(49) 1 (2%)
#PANCREAS DILATATION/DUCTS Atrophy, Nos	(47) 1 (2%)	(45) 1 (2%) 2 (4%)	(49) 2 (4%)
#PANCREATIC ACINUS Atrophy, nos	(47)	(45)	(49) 1 (2%)
#STOMACH HYPERKERATOSIS	(43)	(43)	(42)

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

	VEHICLE Control	LOW DOSE	HIGH DOSE
URINARY SYSTEM			
#KIDNEY Hydronephrosis Inflanmation, Chronic Metaplasia, Osseous	(46) 1 (2%) 1 (2%)	(49) 1 (2%)	(50) 1 (2%)
#KIDNEY/CORTEX Atrophy, focal	(46) 1 (2%)	(49)	(50)
#KIDNEY/GLOMERULUS AmyloIdosis	(46)	(49) 1 (2%)	(50)
#URINARY BLADDER INFLAMMATION, GRANULOMATOUS	(40)	(45) 1 (2%)	(45)
ENDOCRINE SYSTEM			
#PITUITARY Congestion, Nos Hyperplasia, Nos	(31)	(32)	(42) 1 (2%)
ANGIECTASIS	1 (3%)	1 (3%)	1 (2%)
#ADRENAL NECROSIS, NOS	(42)	(44) 1 (2%)	(50)
#THYROID Follicular cyst, Nos	(41)	(45)	(43) 1 (2%)
REPRODUCTIVE SYSTEM			
*MANMARY GLAND Hyperplasia, cystic	(48) 1 (2%)	(49) 2 (4%)	(50) 2 (4%)
#UTERUS HYDROMETRA	(46) 1 (2%)	(45) 4 (9%)	(47)
#UTERUS/ENDOMETRIUM HYPERPLASIA, NOS	(46)	(45)	(47)
HYPERPLASIA, CYSTIC	17 (37%)	16 (36%)	28 (60%)
HOVARY Cyst, Nos	(41) 2 (5%)	(44)	(45)

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

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	VEHICLE Control	LOW DOSE	HIGH DOSE
FOLLICULAR CYST, NOS		2 (5%)	
NERVOUS SYSTEM None			
SPECIAL SENSE ORGANS NONE			
MUSCULOSKELETAL SYSTEM			
*SKELETAL MUSCLE FIBROSIS, FOCAL ATROPHY, NOS	(48)	(49) 1 (2%) 1 (2%)	(50)
BODY CAVITIES			
*ABDOMINAL CAVITY NECROSIS, FAT	(48)	(49)	(50) 1 (2%)
ALL OTHER SYSTEMS			
ADIPOSE TISSUE INFLAMMATION, GRANULOMATOUS NECROSIS, NOS		1 1	
SPECIAL MORPHOLOGY SUMMARY			
NO LESION REPORTED Autolysis/no necropsy	6 2	4 1	6
# NUMBER OF ANIMALS WITH TISSUE EX * NUMBER OF ANIMALS NECROPSIED	AMINED MICROSCOPI	CALLY	

Appendix E

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Analysis of Vinylidene Chloride (Lot No. UTLX83844) Midwest Research Institute

Appendix E

Analysis of Vinylidene Chloride (Lot No. UTLX83844)

A. BOILING POINT

	Dollard Lount	
	Determined	Literature Values
	b.p.: 30.9 ⁰ C at 735.6mm	b.p.: 31.56 ⁰ C at 760.00 mm (Hildenbrand et al., 1959)
B.	DENSITY	
	Determined	Literature Values
	d_{26}^{27} : 1.2033	d ²⁰ : 1.21293 (Stecher, 1968) 4
		d ²⁷ : 1.189 (Gallant, 1966)
c.	REFRACTIVE INDEX	
	Determined	Literature Values
	n ²⁰ : 1.4248 D	n ²⁰ : 1.4249 (Stecher, 1968) D
D.	VAPOR-PHASE CHROMATOGRAPHY	
	1. IMPURITY DETECTION	
	(a) SYSTEM 1	
	Instrument: Tracor MT 220 Detection: Flame ionization Column: Chromosorb 102, 100/ Inlet temperature: 200°C Detector temperature: 275°C Oven temperature program: 10 10°C/min. Compound concentration: Neat	0 ⁰ C, 5 min.; 100 ⁰ -200 ⁰ C at liquid
	Results: Major peak and two	
	Retention (rel	tion Time ative to Area (relative to ne chloride) vinylidene chloride)

.

1	10.2	1.0	100
2	12.0	1.2	0.3
3	13.2	1.3	0.01

(a) <u>SYSTEM 2</u>
Instrument: Tracor MT 220
Detection: Flame ionization
Column: 10% Carbowax 20 M on 80/100 Chromosorb W AW
Inlet temperature: 200°C
Detector temperature: 275°C
Oven temperature program: 50°C, 10 min.; 50°-200°C at 10°C/min.
Compound concentration: Neat liquid
Results: Major peak and two impurities

Peak	Retention Time (min.)	Retention Time (relative to vinylidene chloride)	Area (relative to vinylidene chloride)
1	0.6	1.0	100
2	1.3	2.0	0.4
3	2.9	4.6	0.02

2. IDENTIFICATION AND QUANTIFICATION OF IMPURITIES

(a) SYSTEM 1 (vinyl chloride)

Instrument: Varian Aerograph 2400 Detection: Flame ionization Column: Chromosorb 102, 60/80, 1.8 m x 2 mm I.D., stainless steel Inlet temperature: 200°C Detector temperature: 265°C Oven temperature program: 70°C, isothermal Compound concentration: Neat liquid

A gas syringe was used to take standard amounts of vinyl chloride at a concentration of 0.015 μ g/ml from a vinyl chloride permeation tube flushed with nitrogen at a measured flow rate. Injections were made of 0.3, 0.4, and 0.5 ml aliquots from the permeation tube. Vinyl chloride had a retention time of 2.5±0.1 minutes and a response of 340±10 cm²/ μ g. A 5 μ l (4 mg) sample of vinylidene chloride was injected under the same conditions. This had a peak with a retention time of 2.3 minutes and an area of 5.1 cm².

Conclusion: The sample contains less than 0.01% vinyl chloride.

(b) <u>SYSTEM 2 (1,1-dichlorethane, 1,2-dichloroethane, and</u> trichloroethylene)

Instrument: Tracor MT 220 Detection: Flame ionization Inlet temperature: 200°C Detector temperature: 275°C Oven temperature program: 125°C, 15 min.; 125°-150°C at 10°C/min. Compound concentration: Neat liquid

Standards (1.6 μ l) were injected containing 1,1 dichloroethane (0.1% v/v in 2,2,4-trimethylpentane), 1,2-dichloroethane (0.04% v/v in pentane), and trichloroethylene (0.01% v/v in pentane). The sample of vinylidene chloride injected under the same conditions contained no peaks at comparable retention times.

Conclusion: The sample contained less than 0.1% of 1,1-dichloroethane, 0.04% of 1,2-dichloroethane, and 0.01% trichloroethylene.

(c) SYSTEM 3 (Trans-dichloroethylene)

Instrument: Tracor MT 220 Detection: Flame ionization Column: 10% Carbowax 20 M on 80/100 Chromosorb W AW Inlet temperature: 200°C Detector temperature: 265°C Oven temperature program: 50°C, isothermal Compound concentration: 10% v/v in <u>o</u>-dichlorobenzene Results: Major peak and one impurity

Peak	Retention Time (min.)	Retention Time (relative to vinylidene chloride)	Area (relative to vinylidene chloride)
1	0.6	1.0	100
2	1.5	2.3	0.1

Peak No. 2 was enhanced when a small amount of trans-dichloroethylene was added to the sample. This peak was quantitated against a standard solution of trans-dichloroethylene (0.01% v/v in pentane).

Conclusion: Concentration of trans-dichloroethylene in the sample: 0.1%.

(d) SYSTEM 4 (monomethylether of hydroquinone)

Instrument: Tracor MT 220 Detection: Flame ionization Column: 10% Carbowax 20 M on 80/100 Chromosorb W AW Inlet temperature: 200°C Detector temperature: 265°C Oven temperature program: 200°C, isothermal Compound concentration: 10% v/v in pentane Results: Major peak was under the solvent front. A minor peak was observed at 4.1 minutes, the same retention time as p-methoxyphenol (MEHQ, monomethylether of hydroquine). This peak was enhanced when spiked with MEHQ. The minor peak was quantitated against a p-methoxyphenol standard (0.007% in pentane).

Conclusion: Concentration of <u>p</u>-methoxyphenol (MEHQ) in the sample: 0.05%.

E. VAPOR-PHASE CHROMATOGRAPHY/MASS SPECTROMETRY

Instrument: Varian MAT CH4B mass spectrometer interfaced via a Watson-Biemann helium separator to a Tracor MT 2000 MF vapor-phase chromatograph. Data processed by a Varian 620/i computer.

1. SYSTEM 1: IDENTIFICATION OF SAMPLE IMPURITIES

TABLE E1. CHROMATOGRAPHIC DATA

Peak	Retention Time (min.)	Retention Time (Relative to Vinylidene Chloride)
1	6.0	1.0
2	11.2	1.9
	16.4	2.7

Peak	Mass	Percent of Base Peak	Percent of Base Peak (Normalized on Highest Peak)
2	61	100	100
	96	97	97
	98	73	73
	26	24	24
	63	52	52 、
	60	24	24
	25	6	6
	35	5	5
3	61	23	100
	96	13	56
	98	16	68
	26	4	18
	63	6	27
	60	6 3 5	14
	35	5	20
	25	< 1	< 4

<u>Conclusion</u>: Comparison with literature spectra (<u>Eight Peak Index</u>, 1970) indicated that the two impurity peaks had fragmentation peaks that matched in mass and intensity with those of the <u>cis</u> and <u>trans</u> isomers of dichloroethylene. Table E3 contains the literature spectra for these two compounds.

	Mass	Percent of Base Peak
trans-dichloroethylene	61	100
	96	62
	98	40
	26	36
	63	32
	60	27
	25	17
	35	12
is-dichloroethylene	61	100
	96	65
	98	41
	26	33
	63	32
	60	22
	35	20
	25	16

TABLE E3.LITERATURE SPECTRA OF THE DICHLOROETHYLENES(Eight Peak Index, 1970)

2. <u>SYSTEM 2: DETECTION OF 1,1- AND 1,2-DICHLOROETHANE AND</u> TRICHLOROETHYLENE IN THE VINYLIDENE CHLORIDE SAMPLE

The temperature program detailed in Section El was used. A standard was injected containing 0.1% v/v 1,1-dichloroethane, 0.04% v/v 1,2-dichloroethane, and 0.1% v/v trichloroethylene in pentane. Strong ion current monitor peaks were observed for each compound in the standard. The vinylidene sample injected under the same conditions contained no observable peaks at the same retention times. In addition, a computer search was conducted on the sample spectra for two ions characteristic of the mass spectra of each of the three possible impurities: 83, 85 for 1,1-dichloroethane; 62, 64 for 1,2-dichloroethane; and 130, 132 for trichloroethylene. No peaks in the sample spectra were observed with masses of 130, 132. Mass peaks of 62, 64, 83, and 85 with small intensities were observed only at a retention time of 6 minutes, which corresponds to vinylidene chloride. The retention times for the 1,1- and 1,2-dichloroethanes were 22 and 26.4 minutes, respectively.

Conclusion: The sample contains less than 0.1% 1,1-dichloroethane, less than 0.04% 1,2-dichloroethane, and less than 0.1% trichloroethylene.

F. SPECTRAL DATA

1. INFRARED	LITERATURE VALUES
Instrument: Beckman IR-12 Cell: 10 cm gas cell with sodium chloride windows Results: See Figure 5	Consistent with literature spectrum (<u>Sadtler Standard Spectra</u>)
2. ULTRAVIOLET/VISIBLE	
Instrument: Cary 118 $\frac{\lambda \text{ max (nm)}}{301} \frac{\epsilon}{301}$ 293.5 0.9 290 0.9 287.5(s) 0.9 284.5(s) 0.8	No literature values found
 Solvent: n-Hexane No absorbance between 350-800 nm at concentration of 10% v/v. 3. NUCLEAR MAGNETIC RESONANCE 	L
Instrument: Varian HA-100 Solvent: Neat with added tetra- methylsilane Assignments: (see Figure 6) (a) s, ð , 5.49 ppm Integration Ratios: (a) 2.00	Consistent with literature spectrum (<u>Sadtler Standard Spectra</u>)

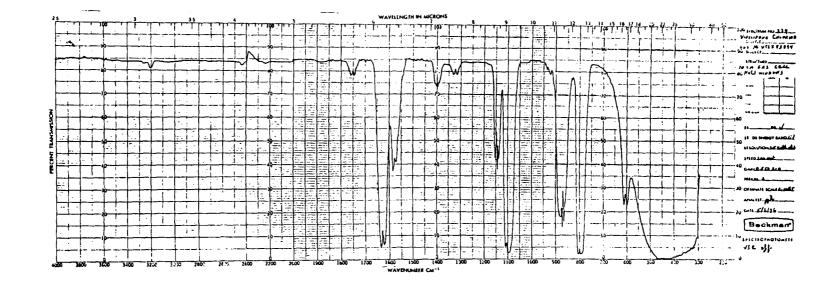


Figure 5. Infrared Absorption Spectrum of Vinylidene Chloride (Lot No. UTLX 83844)

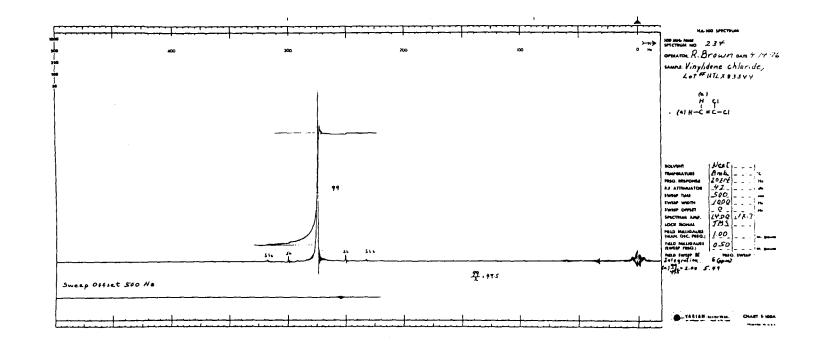


Figure 6. Nuclear Magnetic Resonance Spectrum of Vinylidene Chloride (Lot No. UTLX 83844)

Appendix F

Analysis of Vinylidene Chloride (Lot No. V83848) Gulf South Research Institute

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APPENDIX F

Analysis of Vinylidene Chloride (Lot No. V83848) Gulf South Research Institute

A. VAPOR-PHASE CHROMATOGRAPHY

 Analysis: Volatiles present in addition to vinylidene chloride Instrument: MT-220 Detector: Flame ionization Column: 10% Carbowax 20 M on 80/100 Chromosorb W AW Inlet temperature: 250°C Detector temperature: 250°C Oven temperature: 50°C Result: Major peak and one impurity

		Retention Time	
Peak	Retention Time (min.)	(relative to vinylidene chloride)	Area (relative to vinylidene chloride)
1	2.25	1.00	100
2	4.15	1.84	0.9

A standard injection of a benzene solution containing 11.5 $\mu g/\mu l$ transdichloroethylene gave a peak at a retention time of 4.19 minutes. Addition of trans-dichloroethylene to the sample enhanced the peak at retention time of 4.15 minutes. The peak in the vinylidene chloride was quantitated against the standard injection of trans-dichloroethylene.

Conclusions: <u>Trans</u>-dichloroethylene was present in the sample of vinylidene chloride in a concentration of 0.154% by weight.

- 2. Analysis: Monomethylether of Hydroquinone (MEHQ Stabilizer) Instrument: MT-220 Detector: Flame ionization Column: 10% Carbowax 20 M on 80/100 Chromosorb W AW, 9' x 1/4" o.d.: glass column Inlet temperature: 250°C Detector temperature: 250°C Oven temperature: 200°C isothermal Compound concentration: 3.57 μ g/ μ l in benzene
- Results: The MEHQ stabilizer under these conditions had a retention time of 16.63 minutes. Liquid injections of vinylidene chloride contained a peak at 16.58 minutes.
- Conclusions: The vinylidene chloride contained MEHQ in a concentration of 0.02% by weight.

B. SPECTRAL DATA

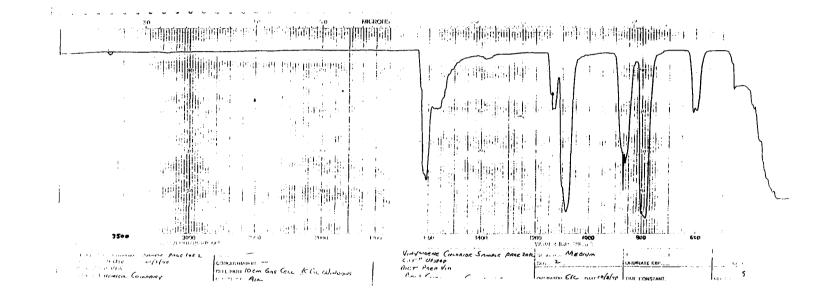
1. Infrared

Instrument . Cell: 10 cm gas cell KBr windows Results: see Figure 7

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Consistent with the previous lot.



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Figure 7. Infrared Absorption Spectrum of Vinylidene Chloride (Lot No. V83848)

Appendix G

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Analysis of Vinylidene Chloride in Corn Oil for Stability (Midwest Research Institute)

178

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APPENDIX G

Analysis of Vinylidene Chloride in Corn Oil for Stability

SEVEN-DAY ROOM TEMPERATURE STABILITY STUDY OF CORN OIL SOLUTION

A. SAMPLE PREPARATION

A 1% (w/v) solution of vinylidene chloride in corn oil was prepared, for each day of the study, as follows: 10 ml of corn oil was transferred into a 50 ml Hypo-Vial, the vial was sealed, and a weighted amount (approximately 95 mg) of vinylidene chloride was added (vial weighed before and after addition) via a 100 μ l syringe. The samples were shaken and then stored at room temperature (in the absence of light and under N₂) from 1 to 7 days.

B. EXTRACTION AND ANALYSIS

The samples were extracted in the vial with 20 ml of methanol, which was injected via a 10 ml syringe. Samples for analysis were taken directly from the top methanol layer with a syringe and analyzed by vapor-phase chromatography using the following system.

> Instrument: Bendix 2500 Column: Chromosorb 102, 100/120 mesh, glass, 1.8 x 4 mm I.D. Detection: Flame ionization Oven temperature: 150°C, isothermal Inlet temperature: 250°C Detector temperature: 295°C Retention time of test compound: 4.55 minutes

C. RESULTS

	Average %
End of Day	Compound (a)
1	0.99 <u>+</u> 0.05
2	1.00 ± 0.05
3	1.01 + 0.05
4	1.04 + 0.05
5	1.06 ± 0.05
6	1.04 + 0.05
7	1.02 ± 0.05

(a) Corrected for spiked recovery value of 72.0%.

D. CONCLUSION

Vinylidene chloride mixed in corn oil is stable for 7 days at room temperature in the dark under a nitrogen atmosphere.

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Appendix H

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Analysis of Vinylidene Chloride in Corn Oil (Gulf South Research Institute)

APPENDIX H

ANALYSIS OF VINYLIDENE CHLORIDE IN CORN OIL

A 1.0 μ l sample of corn oil containing vinylidene chloride was diluted with n-butanol to a final volume of 10 ml. After shaking thoroughly, 4.0 μ l aliquots for gas chromatography injections were used.

Reference standards were prepared by diluting pure vinylidene chloride (1.218 g/ml) by a factor of 1:2000 with n-butanol. This dilution yielded a concentration of 0.609 μ g/ μ l, which was injected in 4 μ l aliquots.

Instrument Parameters

Results: See Table H1.

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	Date Used	Concentration (b) of for target conc	•
Date Mixed (a)	(Week of)	1.0 mg/m1	0.2 mg/m1
6/21/77	6/22/77	1.02	0.188
7/13/77	7/13/77	0.96	
8/27/77	8/27/77	0.99	
1/03/78	1/03/78	0.92	
3/29/78	3/29/78	0.90	
5/11/78	5/11/78	0.91	
7/13/78	7/13/78	1.0	
8/17/78	8/17/78	0.97	
10/20/78	10/20/78	1.02	
3/22/79	3/22/79	1.06	
 Mean (mg/m1)		0.97	
Standard deviation		0.053	
Coefficient of va		5.6	
Range (mg/m1)		0.90-1.06	
Number of samples		10	

a) June 22, 1977 was the start date for mice and for rats.

The data presented are the average of duplicate analyses. b)

* U.S. GOVERNMENT PRINTING OFFICE: 1982-361-132:593

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