Introduction to Toxicology:

A Presentation to the Sludge Management Advisory Committee

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The Role of Toxicology in Risk Assessment



What is Toxicology?

• The study of the adverse effects of natural and man-made materials on biological systems.

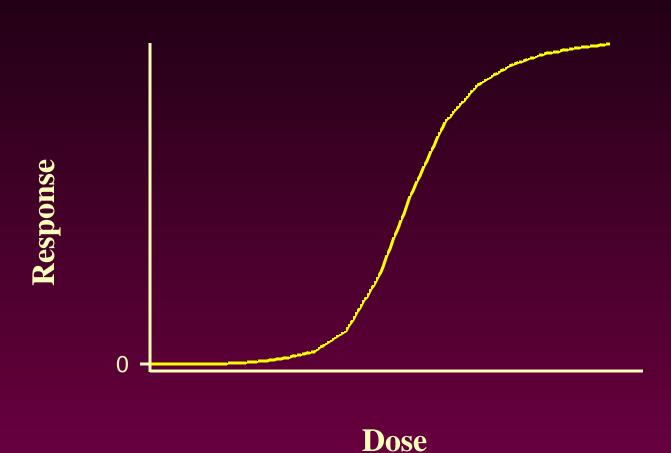
• Toxicology investigates exposure vs. disease.

The Dose-Response Relationship

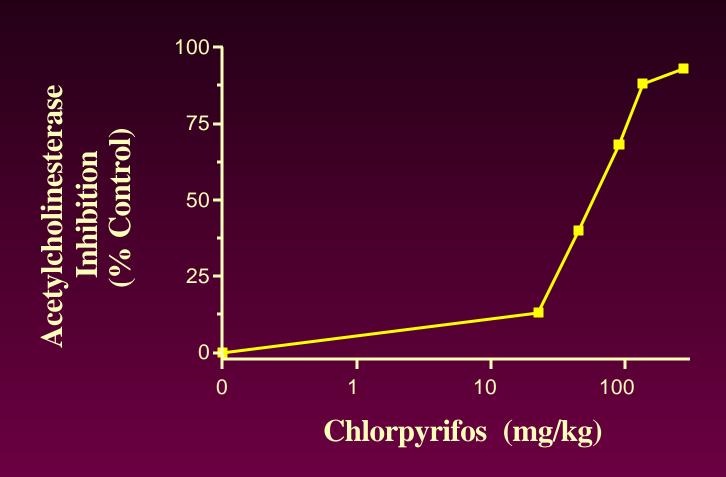
• A fundamental concept in toxicology which describes the quantitative relationship between the amount of exposure (dose) to a toxicant and the incidence of adverse effects (response).

- Sources of Information:
 - Animal studies
 - Human epidemiology studies

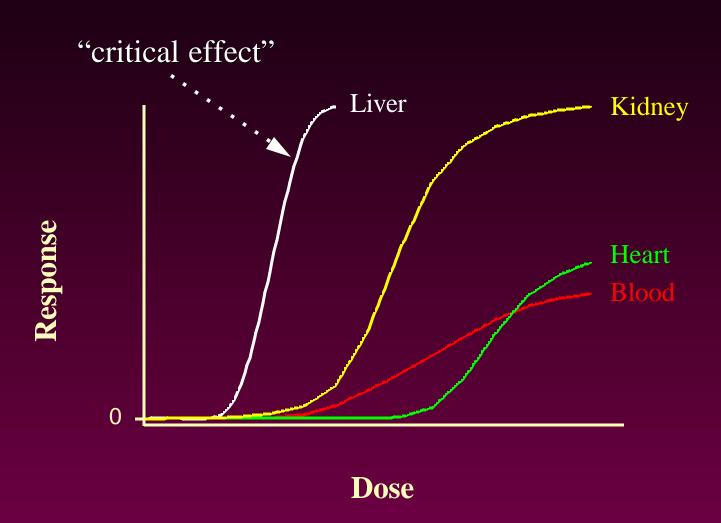
Typical Dose-Response Curve Non-Cancer Endpoints



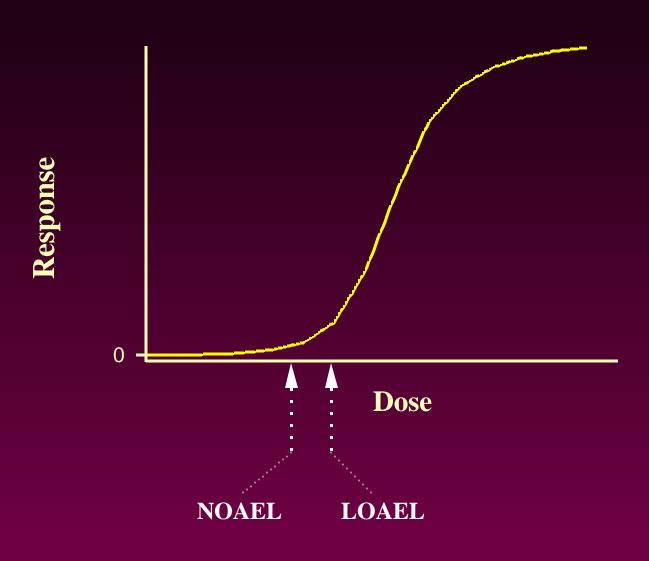
Acetylcholinesterase Inhibition by the Organophosphate Insecticide Chlorpyrifos



Multiple Target Organs



DR Curve & Regulatory Toxicology



Reference Dose (RfD)

• An estimate of a daily exposure to the human population (including sensitive subgroups) that is likely to be without an appreciable risk of deleterious effects during a lifetime.

Reference Dose (RfD)

- Established by EPA
 - available in IRIS
- Based on the most sensitive endpoint
- Chronic or subchronic exposure studies
- $RfD = NOAEL / (UF \times MF)$

Standard Uncertainty Factors

10-fold factors that account for:

- intraspecies sensitivity in humans (10H)
- interspecies sensitivity (10A)
- less than chronic NOAEL values (10S)
- use of LOAEL rather than NOAEL (10L)

Modifying Factor

• Additional UF greater than 0 and less than or equal to 10.

• Allows professional assessment of additional uncertainties not accounted for by the UF.

• Default is 1.

Example of RfD Calculation

- Experimental Design:
 - 60-day oral exposure in mice
 - 4 exposure levels: 0, 1, 5, 25 mg/kg/day
 - 25 animals / exposure level
- Results
 - NOAEL = 5 mg/kg/day

Example of RfD Calculation

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UF = 10H \times 10A \times 10S = 1000
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MF = 2.0 (low number of animals)

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RfD = NOAEL / (UF x MF)
= 5 mg/kg/day / (1000 x 2.0)
= 0.0025 mg/kg/day
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Additional Considerations

- Route of Exposure
 - Influences occurrence and type of toxicity
 - Toxicokinetic differences
 - Oral "first pass" effect

Additional Considerations

- Toxicokinetics
 - Absorption entry into body
 - Distribution delivery to various tissues
 - Biotransformation metabolic conversion
 - Excretion elimination from body
- External vs. "Effective" Dose

Additional Considerations

- Mechanism(s) of Action (MOA)
 - biochemical interactions of toxicant and "target" tissue
 - ex: Chlorpyrifos
 - inhibits acetylcholinesterase
 - allows accumulation of neurotransmitter
 - overstimulation of nervous system

Carcinogens vs. Non-Carcinogens

• Toxicokinetic processes are similar.

- Mechanisms of toxicity are different.
 - ex: Benzo(a)pyrene
 - "One-hit" model of carcinogenesis

• Thresholds assumed not to exist in carcinogen DR relationships.

Carcinogen DR Relationships

- Carcinogen DR curves indicate probability or risk of tumor formation.
- Risk from low-dose exposures cannot be directly measured.
- Mathematical models are used to extrapolate low-dose risk from high-dose exposures.

Average Number Animals Needed to Detect an Increase in Tumor Incidence

1:10 46

1:100 4600

1:1000 460,000

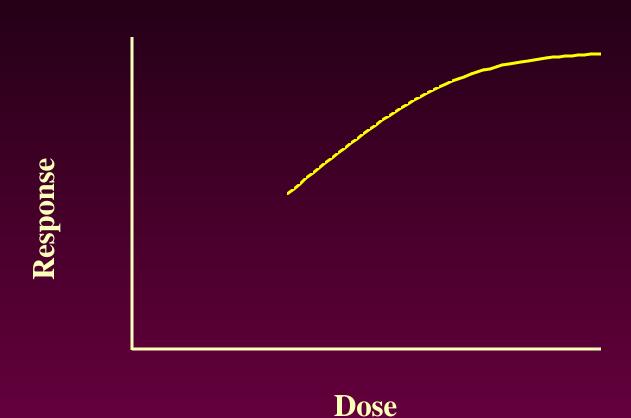
1:10,000 46,000,000

* Based on 0% Background Incidence

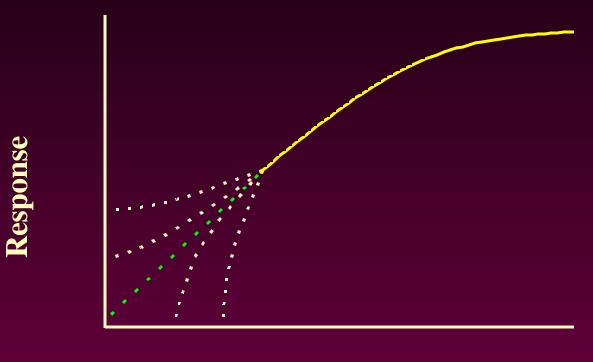
Toxicity Testing for Carcinogenesis

- Choose appropriate animal model
- Determine appropriate route of administration
- Expose animal for majority of lifetime (2 yrs)
- Look for increase in incidence of tumors

Hypothetical Carcinogen Dose-Response Curve

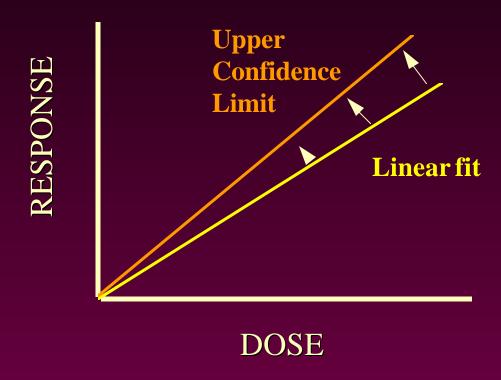


Hypothetical Carcinogen Dose-Response Curve

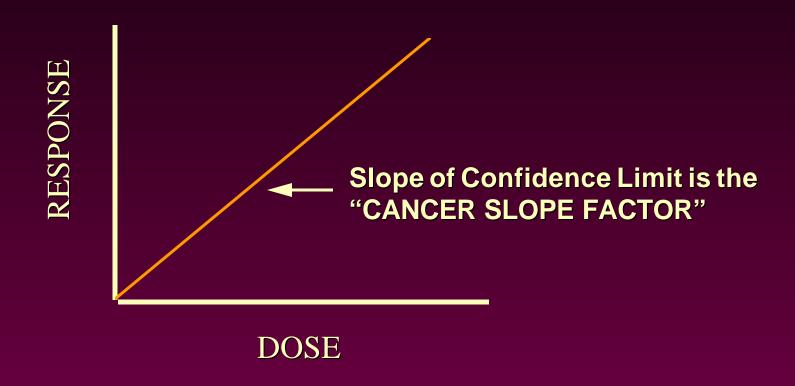


Dose

Low-Dose Risk Extrapolation



Cancer Slope Factor



How These Toxicology Values are Applied in Risk Assessment

• Exposure is divided by RfD to determine hazard.

• Exposure is multiplied by CSF to estimate cancer risk.

Summary of "Safety" Factors in Regulatory Exposure Limits

- Reference Doses (RfDs)
 - Uncertainty factors
 - Modifying factors
- Cancer Slope Factors (CSFs)
 - Linearized Model
 - Upper Confidence Limit

Conclusions

- RfDs & CSFs are based on studies with animal and available human epidemiology data.
- Safety factors and methods provide values that are conservative, even for sensitive subgroups.
- Allow the risk of harm from exposures to be assessed.

