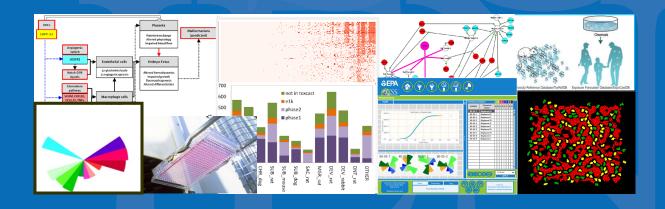


Derivation of new Threshold of Toxicological Concern (TTC) for exposure via inhalation for environmentally relevant chemicals



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United States Environmental Protection Agency Outline

- Threshold for Toxicological Concern (TTC)
 - Background to TTC
 - Proposed TTCs for inhalation
 - Next steps



FEPA United States Environmental Protection Agency TTC - Threshold of Toxicological Concern

- TTC is a principle that refers to the establishment of a human exposure threshold value for (groups of) chemicals below which there would be no appreciable risk to human health
- · Relies on past accumulated knowledge regarding the distribution of potencies of relevant classes of chemicals for which good toxicity data do exist
- · Useful substitute for substance-specific hazard information in situations where there is exposure information which indicates that human exposure is very low and there is limited or no information on the toxicity of the chemical

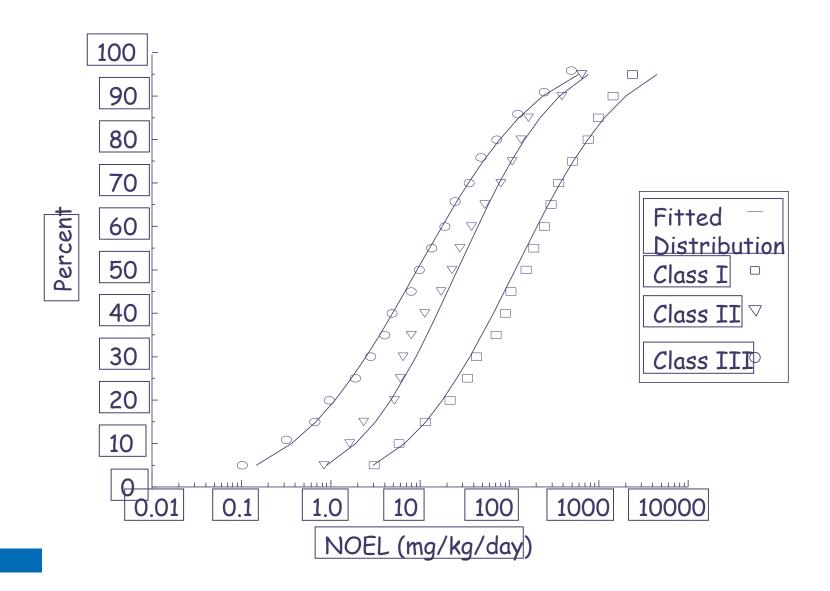


TTC - Threshold of Toxicological Concern

- Two types of TTCs:
- · 'General' TTC is based on a predicted tumour risk of 1 in a million, derived through an analysis of cancer data
- Structural based TTCs are based on frequency distributions (5th percentile) of NO(A)ELs of non-cancer endpoints
 - Structural based TTCs proposed by Munro et al (1996) by assigning substances into one of 3 Cramer structural classes
 - · Underlying dataset comprised 2941 NOELs for 613 substances



Cumulative Distributions of Structural Class NOELs

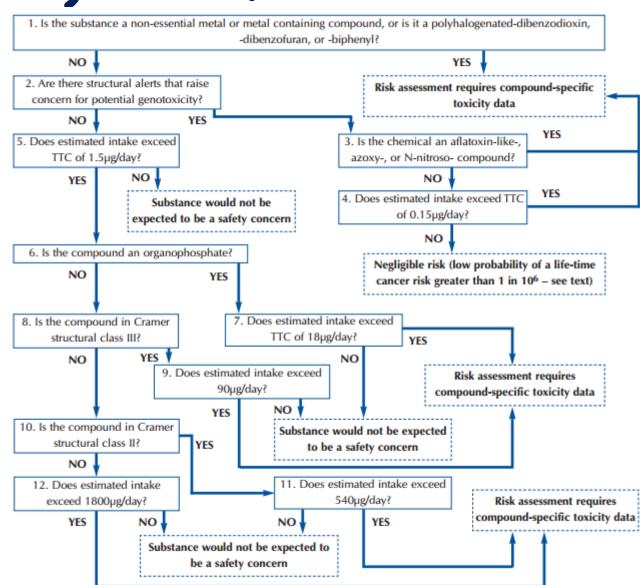


- Took min NOEL
- Fitted Log normal distribution
- Calculated 5th
 percentile of the
 fitted CDF
- Converted to TTC by dividing by a SF of 100



Kroes et al (2004) workflow

- · Applying the TTC in practice
- Relies on more than the Cramer classes used by Munro et al (1996)
- Case by case basis one chemical at a time





Oral TTC values

Type of substance	μg/person/day (μg/kg-day for 60 kg adult)
Alerts for potential genotoxic carcinogenicity	Kroes: 0.15 (0.0025 µg/kg-day) ICH: 1.5 (0.025 µg/kg-day)
Acetylcholinesterase inhibitors (AChEI) Organophosphate/carbamate	18 (0.3 μg/kg-day)
Cramer Class III	90 (1.5 μg/kg-day)
Cramer Class II	540 (9.0 µg/kg-day)
Cramer Class I	1800 (30 μg/kg-day)

TTC assumes a lifetime exposure (every day for ~70 years)
TTC values that are established are for the ORAL route of entry

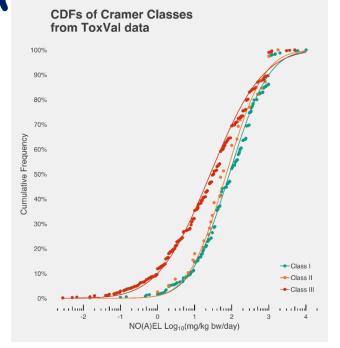
SEPA Investigate relevance of existing oral TTC values

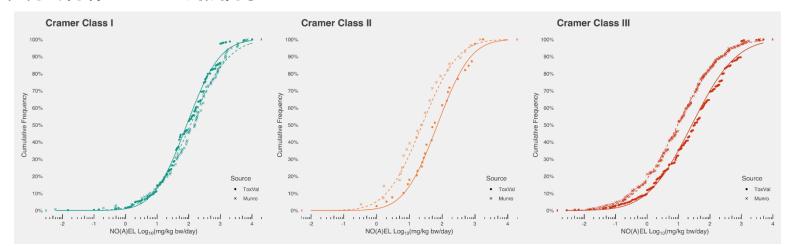
for substances of interest to EPA

Motivated to explore the utility of TTC for risk based prioritisation of large numbers of chemicals but were the TTC values relevant for substances of interest to EPA

Use Kroes et al (2004) workflow to assign substances present in ToxVal to their respective Cramer classes and use the associated repeat dose toxicity data to derive new TTC values

Evaluate whether the TTC values from ToxVal and Munro are statistically equivalent & derive confidence intervals for the new TTC values



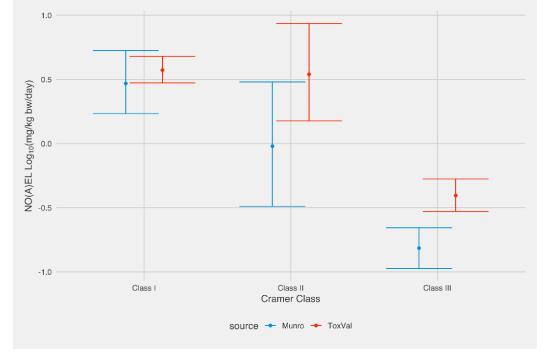


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Bootstrap sampling used to quantify the uncertainty around the 5th percentiles values for both ToxVal and Munro data sets

• Differences were observed for substances assigned as Cramer Class

III



- Presence of OP/carbamates in the Munro Cramer class III largely explained the difference in 5^{th} percentile values
- Derived new modules for OPs



Risk-Based prioritisation: inhalation route of entry

- Whilst TTC values for oral route of exposure are well established and in routine use, the same is not true for TTC values for inhalation
- To that end, we investigated the feasibility of deriving new TTC values using the ToxValDB to facilitate risk-based prioritisation of large numbers of chemicals where inhalation was the relevant route of exposure



Approach taken to derive TTCs for inhalation

- 1) Gather the chemicals and data from ToxValDB
- 2) Identify the chemical structures for all the chemicals in ToxValDB
- 3) Process the chemicals through the Kroes et al (2004) workflow but using the adhoc profilers from Patlewicz et al (2018) and Nelms et al (2019)
- 4) For substances that were assigned as belonging to the 3 Cramer classes, filter ToxValDB to identify relevant studies that met the same criteria as used by Munro et al (1996) but where the route of exposure was inhalation
- 5) Remove statistical outliers and taking the minimum NOAEL/NOAEC for each chemical as the representative value (in either mg/m3 or ppm units), and deriving the 5th percentile values
- 6) Compare the 5th percentile derived from the experimental data and their associated TTC values to those published by Carthew et al (2009) and Escher et al (2010).
- 7) Explore other means if appropriate to categorise the substances beyond Cramer designations and propose new TTC values.



Step 1: Gather relevant data from ToxValDB

- Identified study records that were tagged as subacute, subchronic, chronic, reproductive, developmental, or multigenerational study type.
- Created a study length field to help designate chronic, subchronic and reproductive studies on the basis of reported study duration and study type information.
- A short-term/repeat dose study was considered to as chronic if the "study_type" column stated it was a chronic study or if the study duration was over 100 days (or week/month equivalent).
- Similarly, a study was considered to be subchronic if the "study_type" column stated it was a subchronic study or if the study duration was >=35 days and < 100 days (or week/month equivalent). On the otherhand, a short-term/repeat dose study was only considered to be a reproductive study if the "study_type" column stated as such.
- As the dose measurements for each study was provided in either ppmor mg/m3-related units, toxicity values was converted into common units.



Steps 2-3: Profile ToxValDB chemicals to assign TTC category

 The 4,703 chemicals within ToxValDB, for which QSAR-ready SMILES were available, were profiled through Toxtree (v3.1.0) (IdeaConsult, Ltd) in order to assign them into the appropriate TTC category.

TTC Category	Number of chemicals
Not processed	2
High Potency carcinogens	18
Organophosphates	70
Carbamates	17
Steroids	0
Substances presenting a genetox structural alerts	1077
Substances not appropriate for TTC	130
Cramer Structural I	1498
Cramer Structural II	165
Cramer Structural III	1726



Step 4: Filtering ToxVal for relevant studies

- The dataset was filtered to select
- a) study length as subacute, subchronic, repeat dose, chronic, reproductive, developmental and multigenerational;
- b) exposure route as inhalation,
- c) toxval type as NO(A)EL or NO(A)EC point of departure; and
- d) species as rats, mice and rabbits
- Finally, the dataset was filtered based on the DTXSID identifier designating presence in one of the 3 Cramer structural classes.

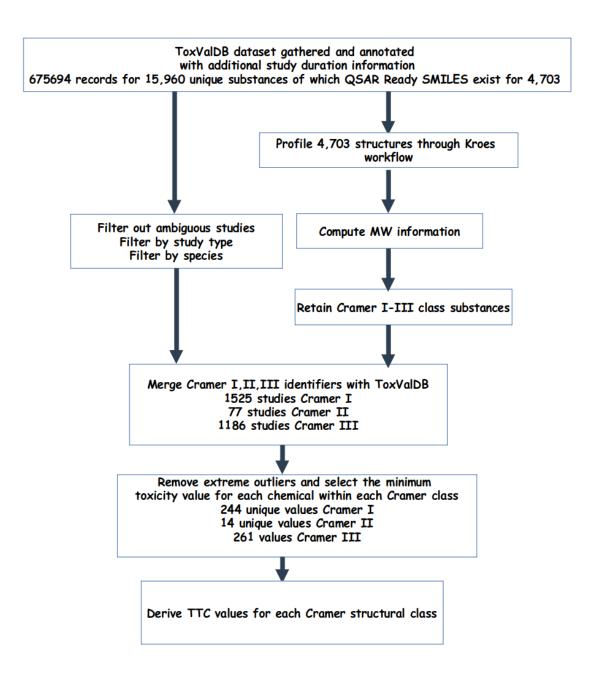


Step 5: Deriving representative values

- ToxVaIDB data for the 3 Cramer structural classes were processed as follows:
- 1) for substances with only 1 study, this was retained; 2) for substances with more than 1 study, extreme outliers, i.e. statistical outliers that exceeded the interquartile range were removed and the minimum value was returned.
- This was carried out for both units, mg/m3 and ppm.

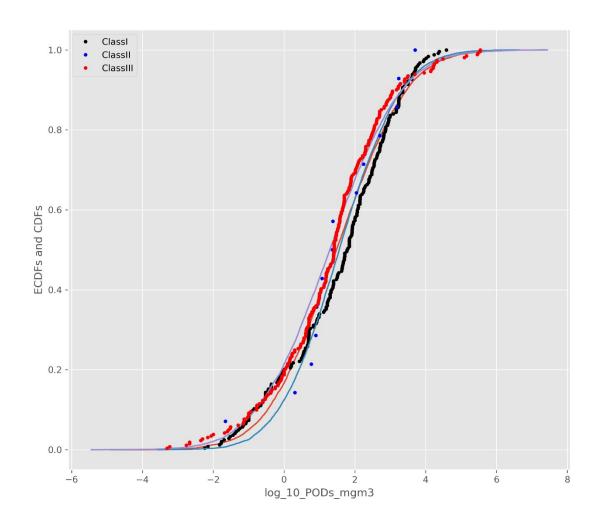


Workflow summarising creation of datasets





Step 5: cont...



- NOAEL/NOAEC converted to their Log10 equivalents
- Plotted ECDFs
- Not normally distributed (unlike oral NOAELs) (Based on visual inspection of ECDFs and CDFs and by using Shapiro-Wilks test)
- No separation between the Cramer I and III classes
- Insufficient chemicals in Cramer II

Step 6: Deriving TTC values & comparing them to published values

Source	Number of chemicals	Source	TTC mg/m3	TTC ug/person/d ay
ToxVal	244	Cramer I	4.14E-03	8.27
	14	Cramer II	2.975E-03	59.5
	261	Cramer III	2.14E-04	4.28
Escher et al (2010)	58	Cramer I	3.6E-03	71
	7	Cramer II	4.8E-04	10
	138	Cramer III	1.8E-04	4
Carthew et al (2009)	38	Cramer I	0.049	980
	50	Cramer III	8.5E-03	170

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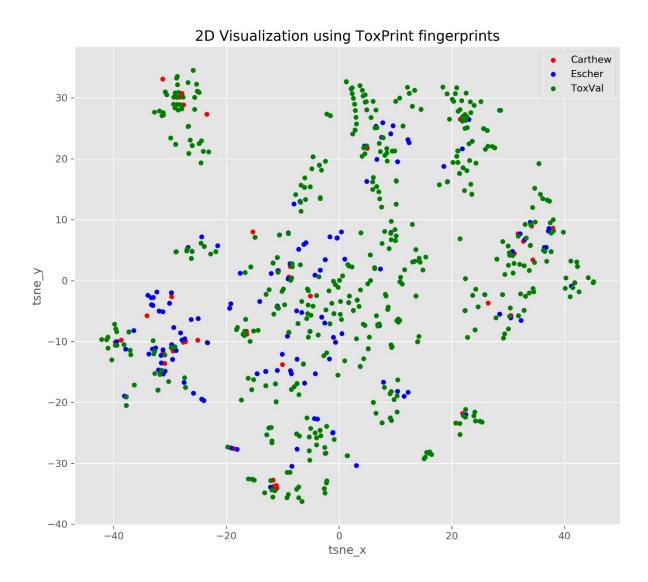
Step 6: Reproducing published values: Escher et al (2010)

Structural category	# chemicals in Escher	TTC		#reproduced values		TTC ug/person /d
Cramer I	58	3.6E-03	71		4.57E- 03	91.44
Cramer III	138	1.8E-04	4		2.78E- 04	5.56



Step 6: Reasons why TTC values were so different

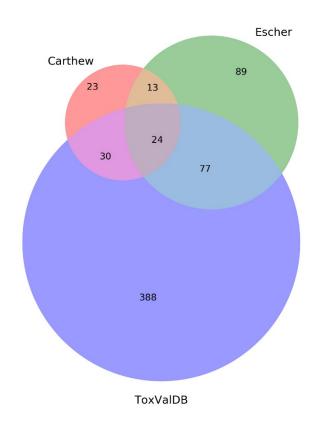
• Differences between chemistry coverage?





Step 6: Reasons why TTC values were so different

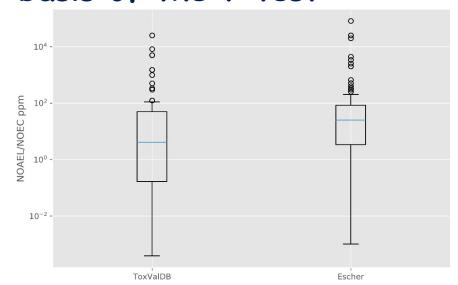
 Differences in the underlying toxicity data?

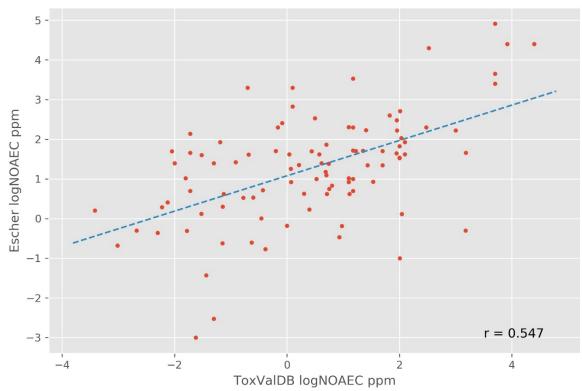




Step 6: Reasons why TTC values were so different

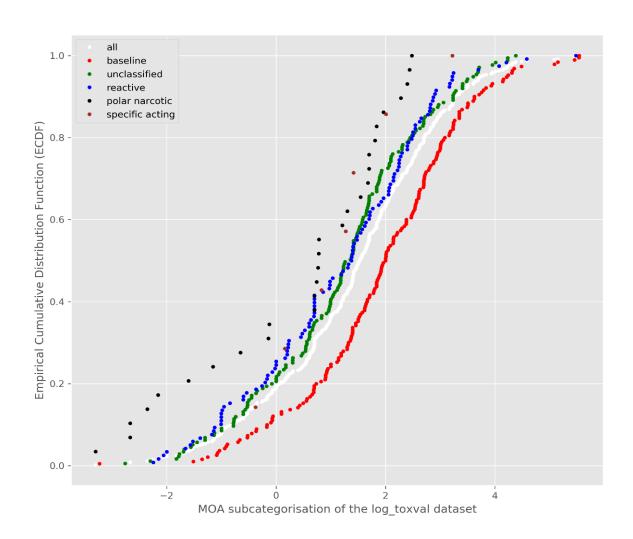
- Explored the overlapping chemicals
 - Low correlation between the 2 datasets - can not reject the null hypothesis that the means are the same on the basis of the t-test







Step 7: Re-categorising substances



- Profiled substances by Aquatic MOA profilers based on work by Veith et al (2009) who explored a relationship between acute inhalation and acute fish toxicity
- Better separation between the baseline and reactive MOA classes to facilitate derivation of new TTC values



Step 7: Deriving TTC values

MOA class	#Chemicals	5 th percentile median bootstrapped	TTC mg/m3	TTC ug/person/d
Baseline	190	0.1567	1.11E-03	22.39
Reactive	118	0.0299	2.14E-04	4.286

See Nelms and Patlewicz, 2020 https://www.frontiersin.org/research-topics/13793/advances-and-refinements-in-the-development-and-application-of-threshold-of-toxicological-concern-tt



Summary remarks - Next steps

- Using Cramer structural classes did not appear to discriminate the chemicals and data identified within the ToxVaIDB
- Further QC of the underlying data is still merited and ongoing to resolve the differences between existing datasets and ToxVaIDB
 - · Merits an evaluation of the variability of the underlying data itself
- Use of predefined alert schemes to subcategorise e.g. Verhaar type schemes were promising but machine learning approaches to subset and group substances is worth exploring further in the context of a read-across type approach
- Combining and enhancing the underlying dataset
- Local vs systemic effects had explored use of alert schemes to identify respiratory sensitisers, irritants/corrosives as well as physicochemical properties such as Vapour Pressure, pKa (inconclusive findings)