

# High Throughput Toxicokinetics Enables Risk-based Prioritization

John Wambaugh

*Center for Computational Toxicology and Exposure*

*Office of Research and Development*

*U.S. Environmental Protection Agency*

**Society of Toxicology Annual Meeting  
Virtual Event**

**March, 2021**

The views expressed in this presentation are those of the author  
and do not necessarily reflect the views or policies of the U.S. EPA

# US EPA Office of Research and Development

- The Office of Research and Development (ORD) is the scientific research arm of EPA
  - 543 peer-reviewed journal articles in 2019
- Research is conducted by ORD's four national centers, and three offices organized to address:
  - Public health and env. assessment; comp. tox. and exposure; env. measurement and modeling; and env. solutions and emergency response.
- 13 facilities across the United States
- Research conducted by a combination of Federal scientists (including uniformed members of the **Public Health Service**); contract researchers; and postdoctoral, graduate student, and post-baccalaureate trainees



ORD Facility in  
Research Triangle Park,  
NC

# US EPA's ExpoCast Project:

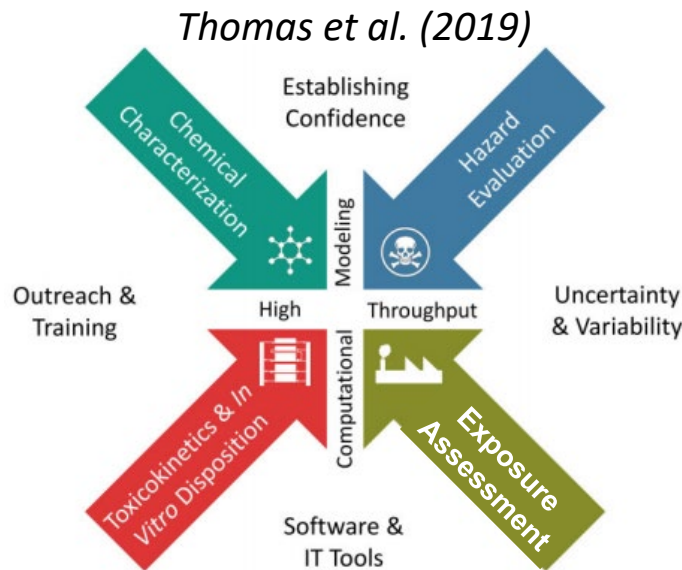
## New Approach Methodologies for Exposure Forecasting

*"Investment in 21st century exposure science is now required to fully realize the potential of the NRC vision for toxicity testing."*

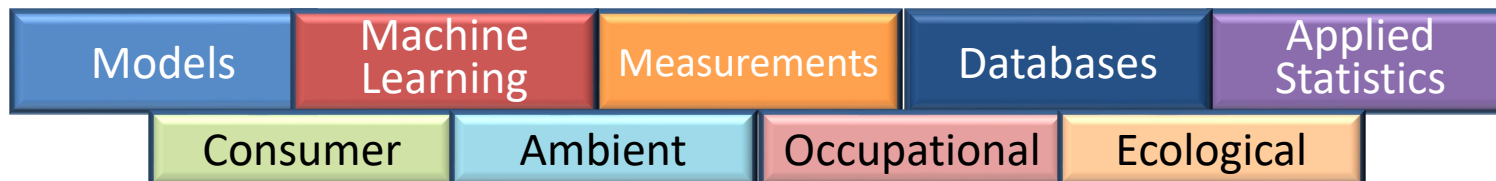
*Cohen Hubal (2009)*

"Obama's FY10 Budget Includes Increased Toxicology":

- Funding allows for complementary exposure predictions from ExpoCast, which is slated to be **launched in FY10**
- Predict the impact of chemicals on the human body using data from ToxCast

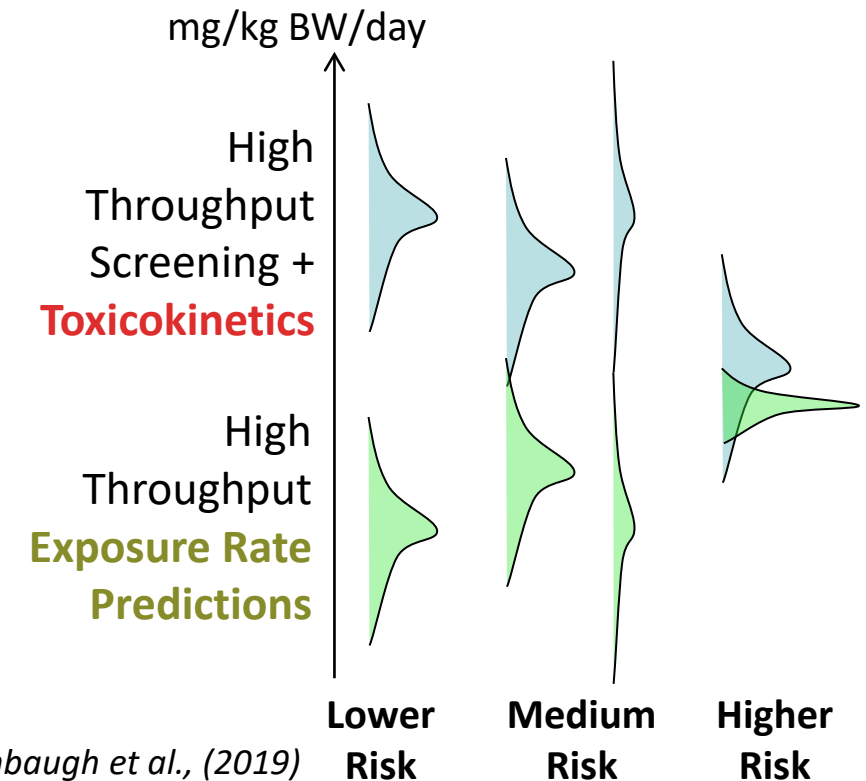


**ExpoCast is**



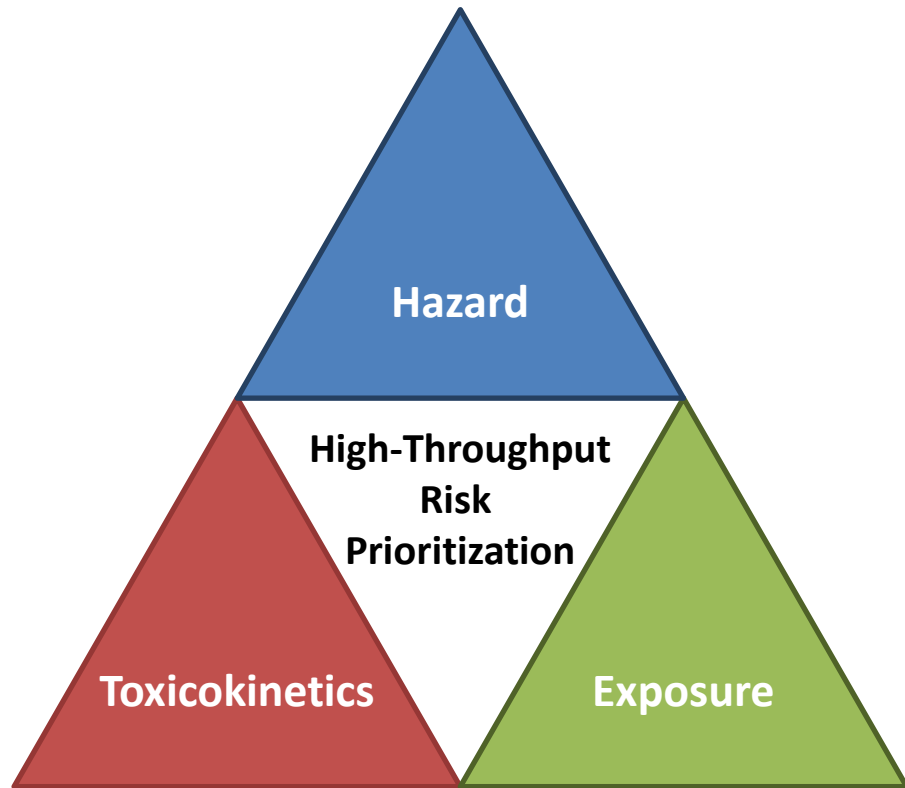
Since 2010:

- 45 peer-reviewed publications
- 5 STAR grants awarded
- 3 Federal research contracts (SWRI and Battelle)



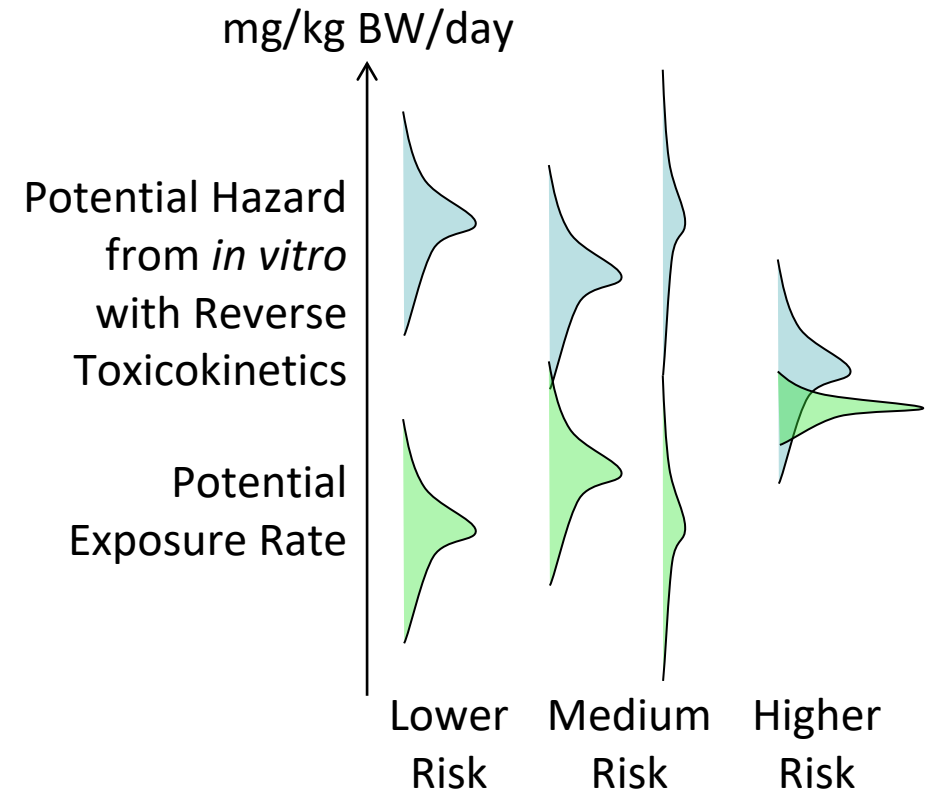
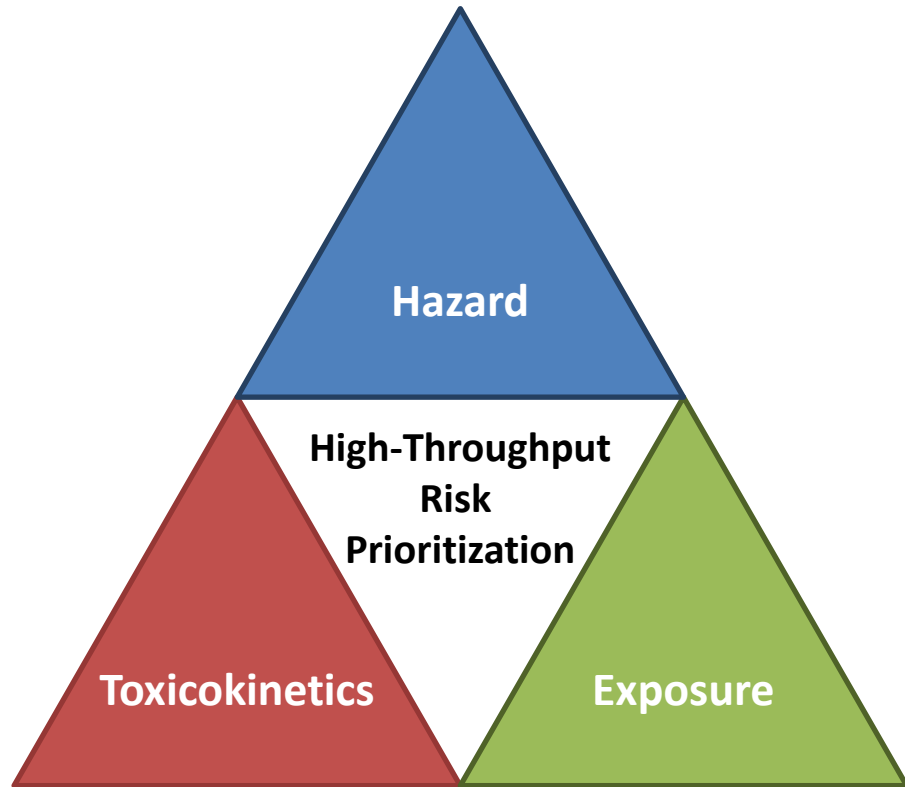
# Calculating Chemical Risk

- High throughput risk prioritization based upon *in vitro* screening requires comparison to exposure (for example, NRC, 1983)
- Information must be relevant to the scenario, for example, consumer, ambient, or occupational exposure.
- Data obtained *in vitro* must be placed in an *in vivo* context: *in vitro-in vivo* extrapolation (IVIVE)



# Calculating Chemical Risk

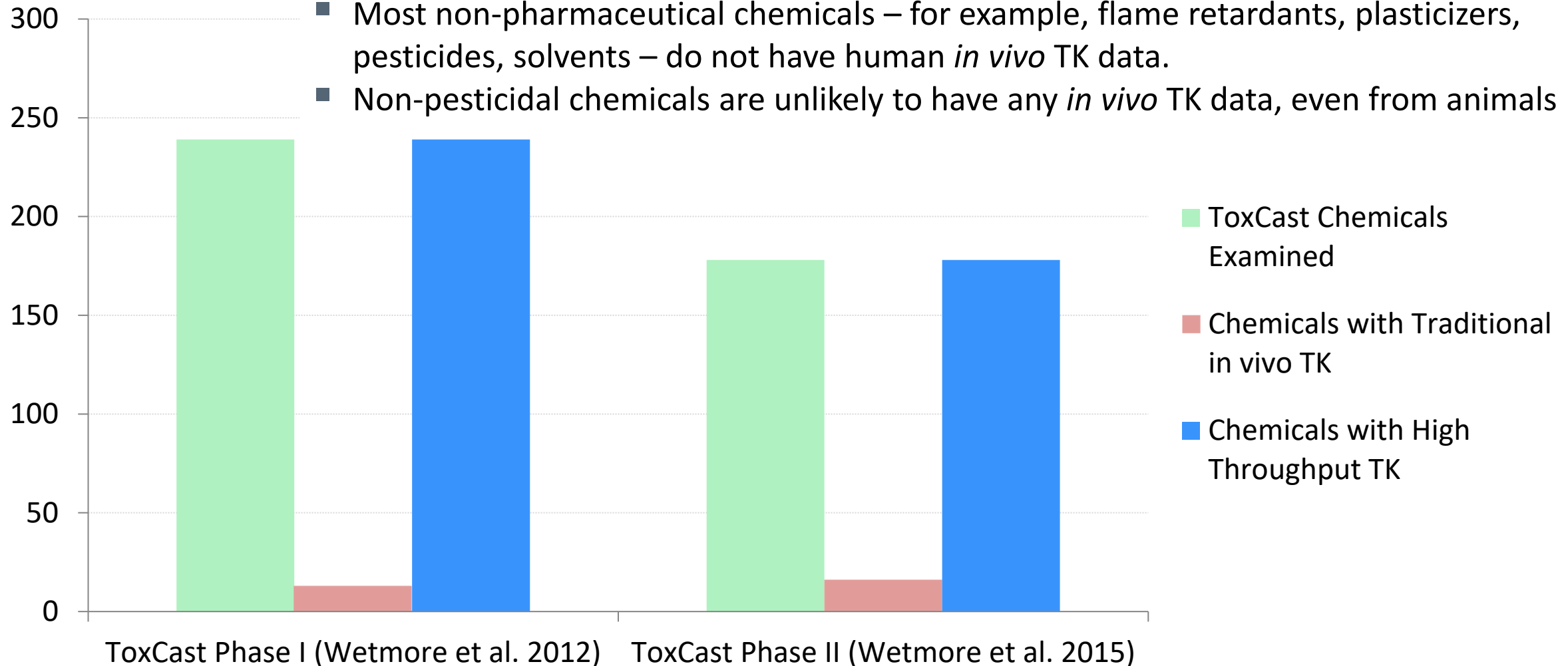
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# Most Chemicals lack Toxicokinetic Data

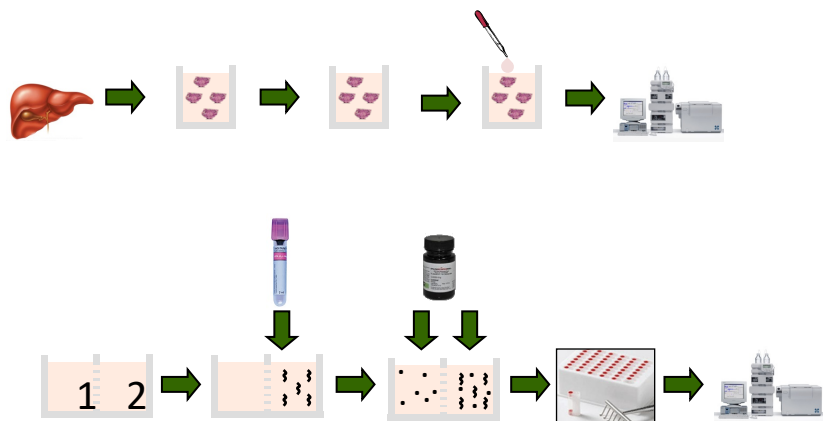
- Toxicokinetics (TK) describes adsorption, distribution, metabolism, and excretion (ADME) by the body
- Most non-pharmaceutical chemicals – for example, flame retardants, plasticizers, pesticides, solvents – do not have human *in vivo* TK data.
- Non-pesticidal chemicals are unlikely to have any *in vivo* TK data, even from animals



# HTTK: A NAM for Exposure

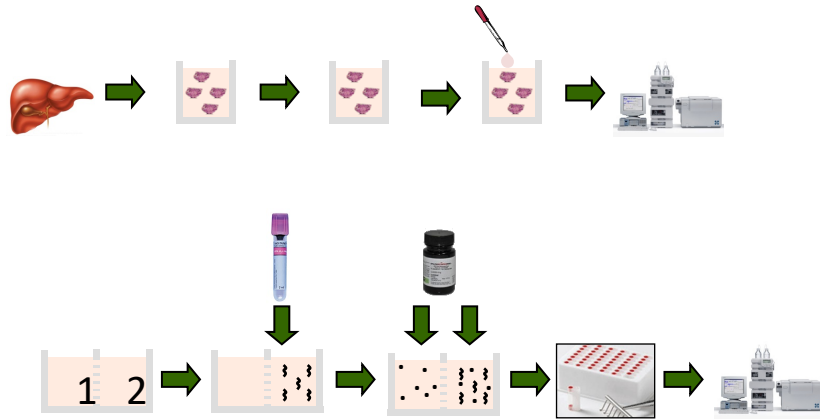
- To provide toxicokinetic data for larger numbers of chemicals collect *in vitro*, high throughput toxicokinetic (HTTK) data (for example, Rotroff et al., 2010, Wetmore et al., 2012, 2015)
- HTTK methods have been used by the pharmaceutical industry to determine range of efficacious doses and to prospectively evaluate success of planned clinical trials (Jamei, *et al.*, 2009; Wang, 2010)
- The **primary goal** of HTTK is to provide a human dose context for bioactive *in vitro* concentrations from HTS (that is, *in vitro-in vivo* extrapolation, or **IVIVE**) (for example, Wetmore et al., 2015)
- A **secondary goal** is to provide **open source data and models** for evaluation and use by the broader scientific community (Pearce et al, 2017a)

## *In vitro* toxicokinetic data





## *In vitro* toxicokinetic data



Rotroff et al. (2010)

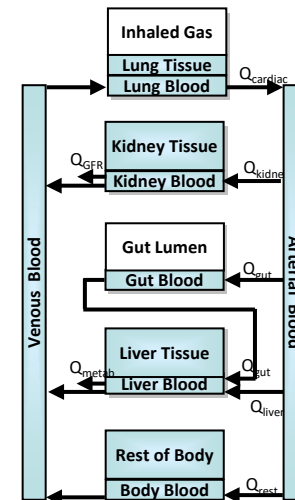
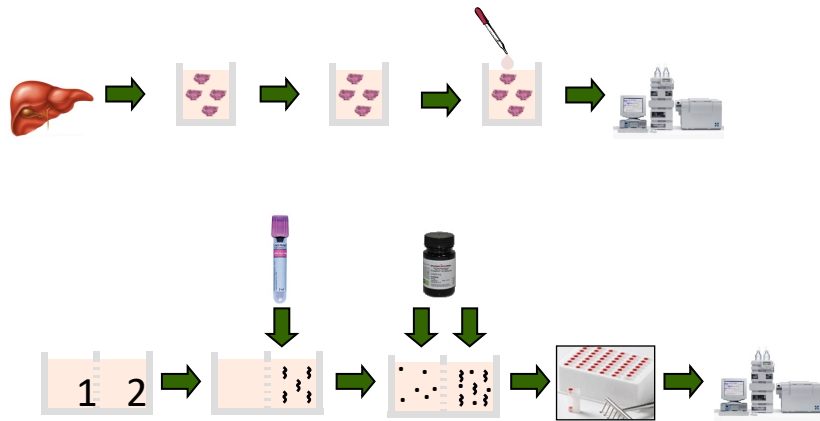
Wetmore et al. (2012)

Wetmore et al. (2015)

Wambaugh et al. (2019)

# High Throughput Toxicokinetics (HTTK)

## *In vitro* toxicokinetic data + generic toxicokinetic model



Rotroff et al. (2010)

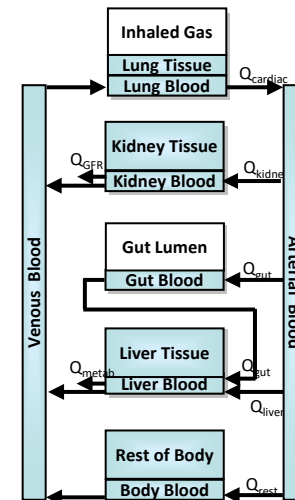
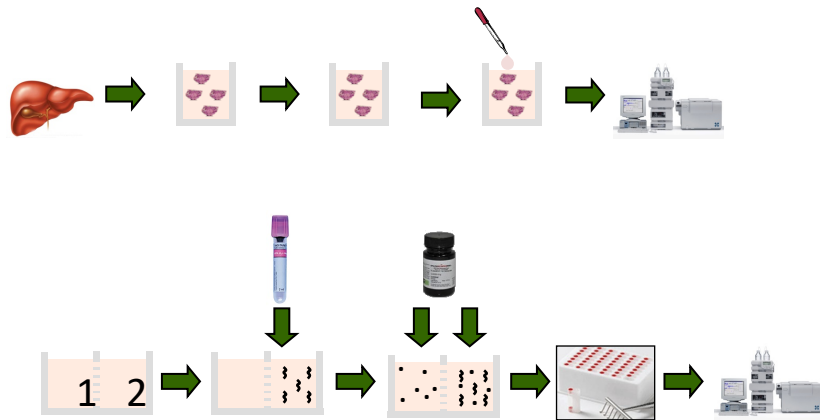
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# High Throughput Toxicokinetics (HTTK)

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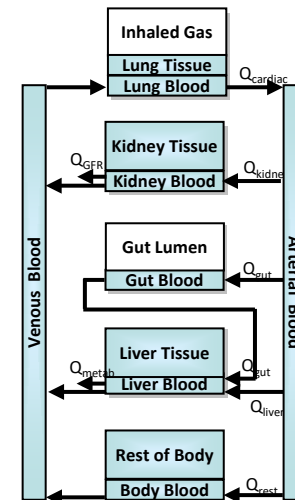
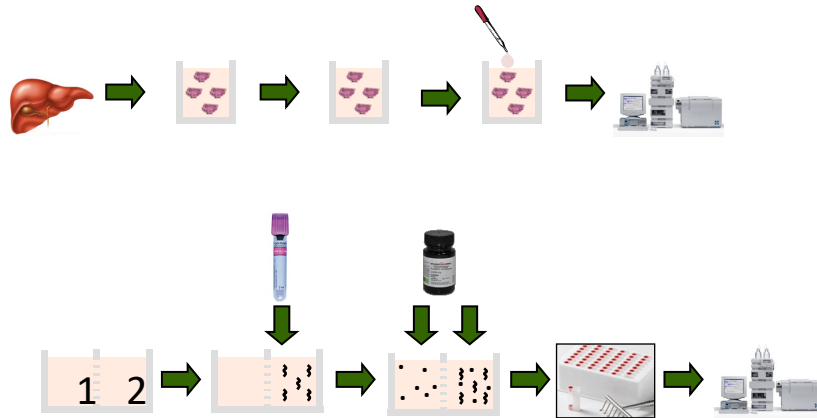


Rotroff et al. (2010)  
Wetmore et al. (2012)  
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Wambaugh et al. (2015)  
Pearce et al. (2017)  
Ring et al. (2017)  
Linakis et al. (2020)

# High Throughput Toxicokinetics (HTTK)

***In vitro* toxicokinetic data + generic toxicokinetic model  
= high(er) throughput toxicokinetics**



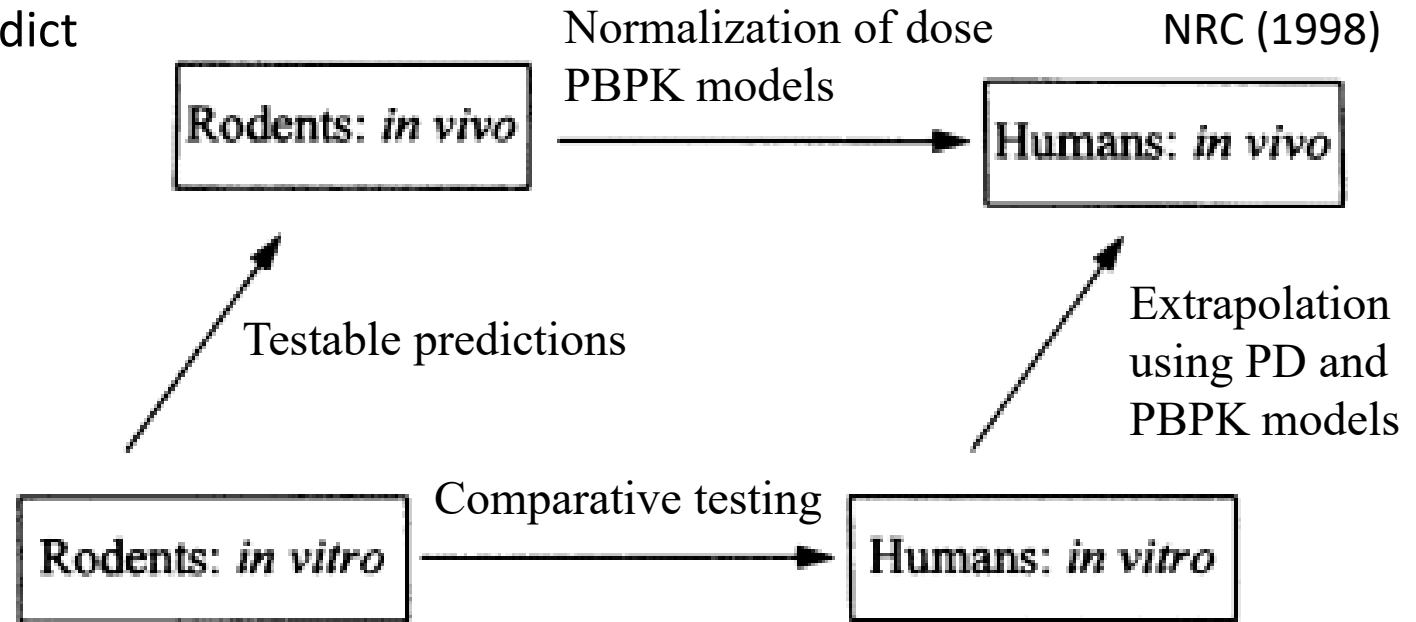
**= *httk***

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# *In Vitro* - *In Vivo* Extrapolation (IVIVE)

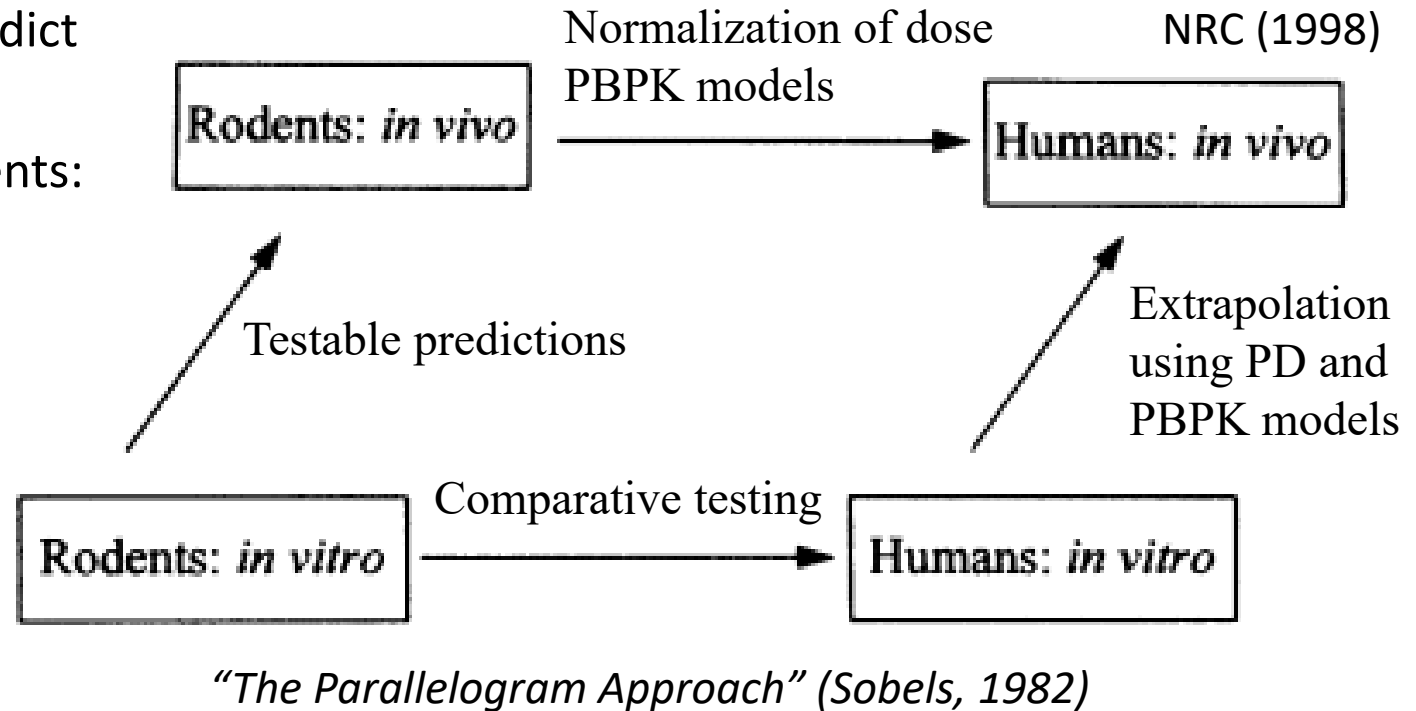
- HTTK allows *in vitro-in vivo* extrapolation (IVIVE)
  - the use of *in vitro* experimental data to predict phenomena *in vivo*.



*"The Parallelogram Approach" (Sobels, 1982)*

# *In Vitro* - *In Vivo* Extrapolation (IVIVE)

- HTTK allows *in vitro-in vivo* extrapolation (IVIVE)
  - the use of *in vitro* experimental data to predict phenomena *in vivo*.
- IVIVE can be broken down into two components:
  - IVIVE-PK/TK  
(**Pharmacokinetics/Toxicokinetics**):
    - Fate of molecules/chemicals in body
    - Considers absorption, distribution, metabolism, excretion (ADME)
    - Can use empirical PK or physiologically-based (PBPK)





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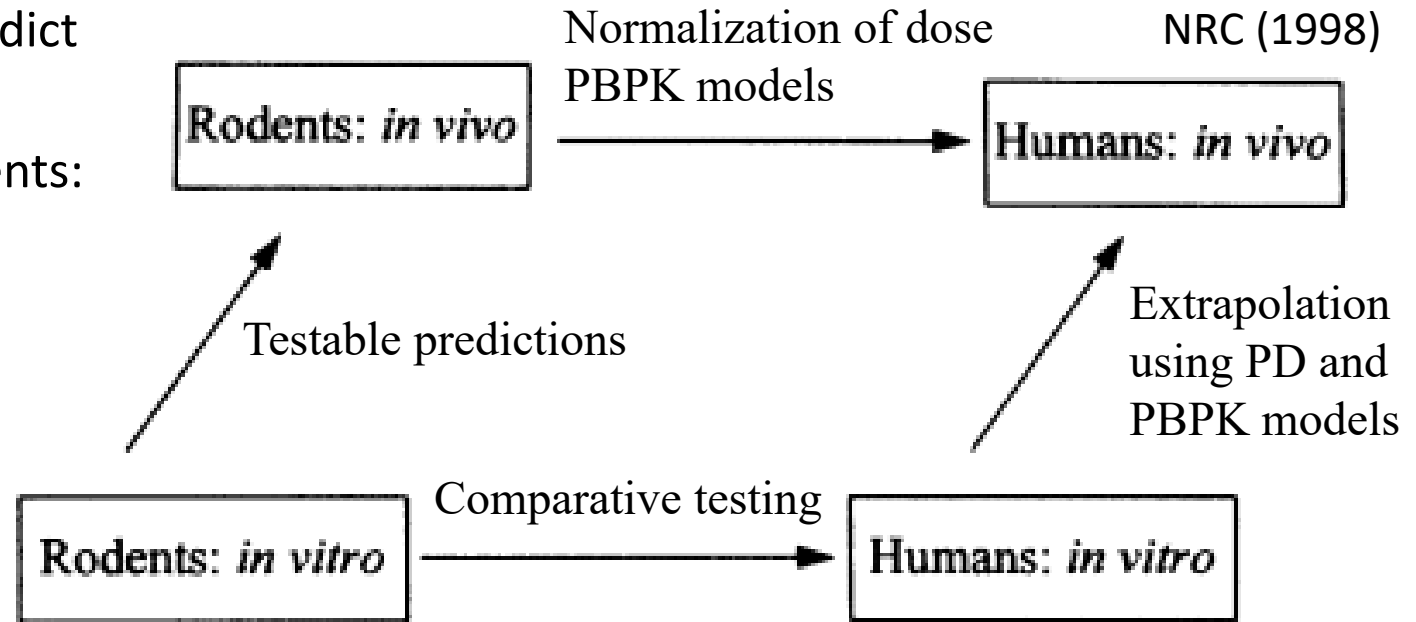
- IVIVE-PK/TK

- (Pharmacokinetics/Toxicokinetics):

- Fate of molecules/chemicals in body
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      - Can use empirical PK or physiologically-based (PBPK)

- IVIVE-PD/TD (Pharmacodynamics/Toxicodynamics):

- Effect of molecules/chemicals at biological target *in vivo*
    - Perturbation as adverse/therapeutic effect, reversible/ irreversible effects



*"The Parallelogram Approach" (Sobels, 1982)*

# In Vitro - In Vivo Extrapolation (IVIVE)

- HTTK allows *in vitro-in vivo* extrapolation (IVIVE)  
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- IVIVE can be broken down into two components:

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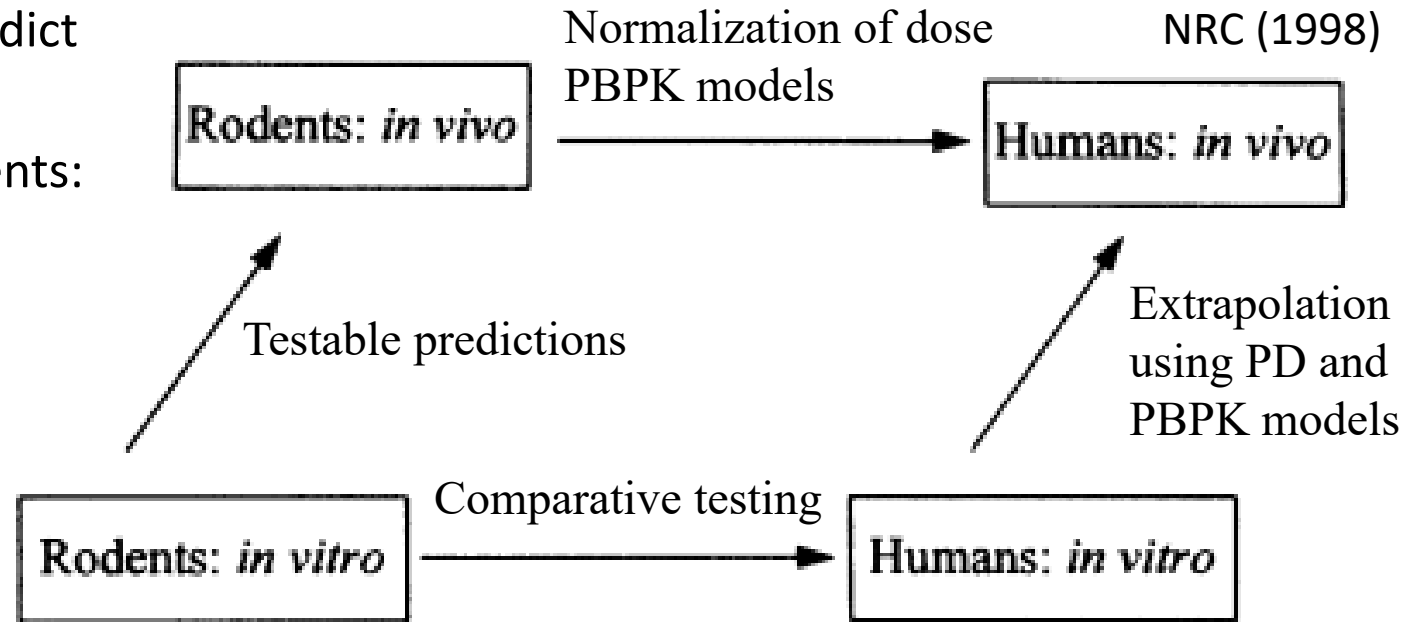
## (Pharmacokinetics/Toxicokinetics):

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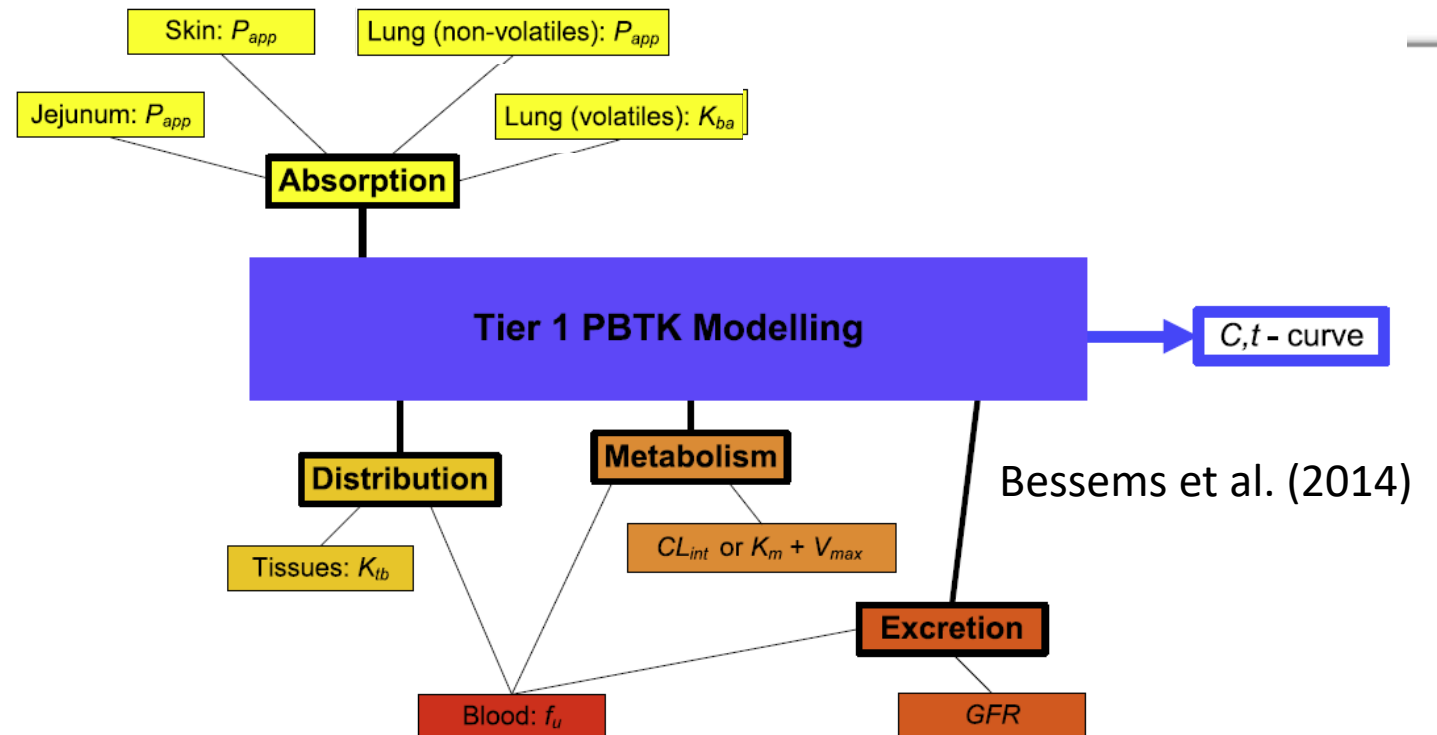
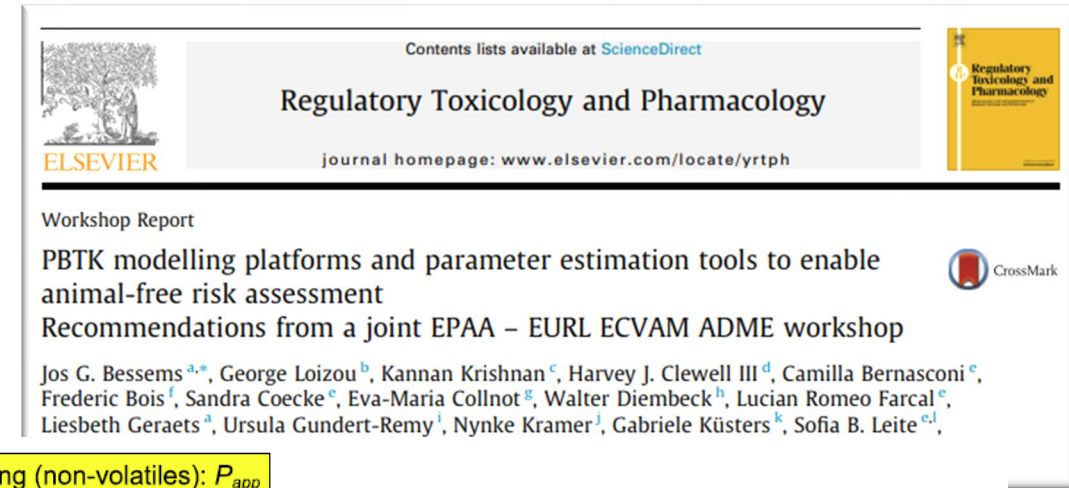
**HTTK only covers toxicokinetic extrapolation**



“The Parallelogram Approach” (Sobels, 1982)

- Make the complexity of the model and the number of physiological processes appropriate to decision context
- Bessems et al. (2014): We need “a first, relatively quick (‘Tier 1’), estimate” of concentration vs. time in blood, plasma, or cell
- They suggested that we neglect active metabolism – thanks to *in vitro* measurements we can now do better
- We still neglect transport and other protein-specific phenomena

# Fit for Purpose IVIVE



# IVIVE by Scaling Factor

- We make various assumptions that allow simple conversion of an *in vitro* concentration  $[X]$  ( $\mu\text{M}$ ) into an **administered equivalent dose** (AED) with units of mg/kg body weight/day:

$$\text{AED} = F_{IVIVE} \times [X]$$

- **AED** is the **external dose rate** that would be needed to **cause a given steady-state plasma concentration**
- $F_{IVIVE}$  is a scaling factor that varies by chemical

# IVIVE by Scaling Factor

- For a given chemical,  $F_{IVIVE} = 1 / C_{ss,95}$
- $C_{ss,95}$  is the steady-state plasma concentration as the result of a 1 mg/kg/day exposure

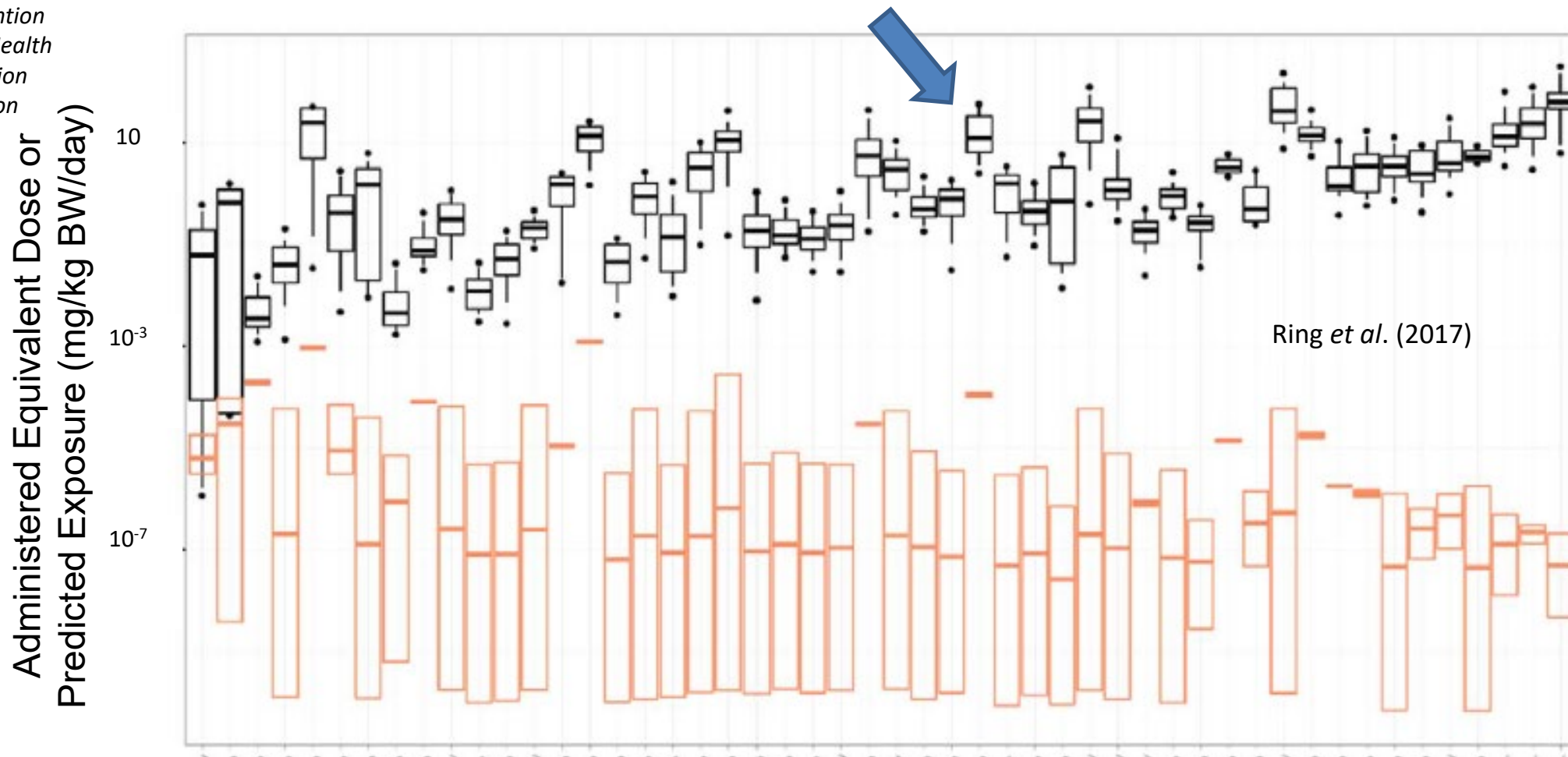
$$AED_{95} = \frac{[X]}{C_{ss,95}}$$

- The “95” refers to the upper 95<sup>th</sup> percentile – due to human variability and measurement uncertainty there are a range of possible  $C_{ss}$  values
- All of this assumes that the individuals have enough time to come to “steady-state” with respect to their daily exposures

# IVIVE Allows Chemical Prioritization

CDC NHANES:  
U.S. Centers for  
Disease Control  
and Prevention  
National Health  
and Nutrition  
Examination  
Survey

*In Vitro* Screening + IVIVE can estimate doses needed to cause bioactivity (Wetmore et al., 2015)

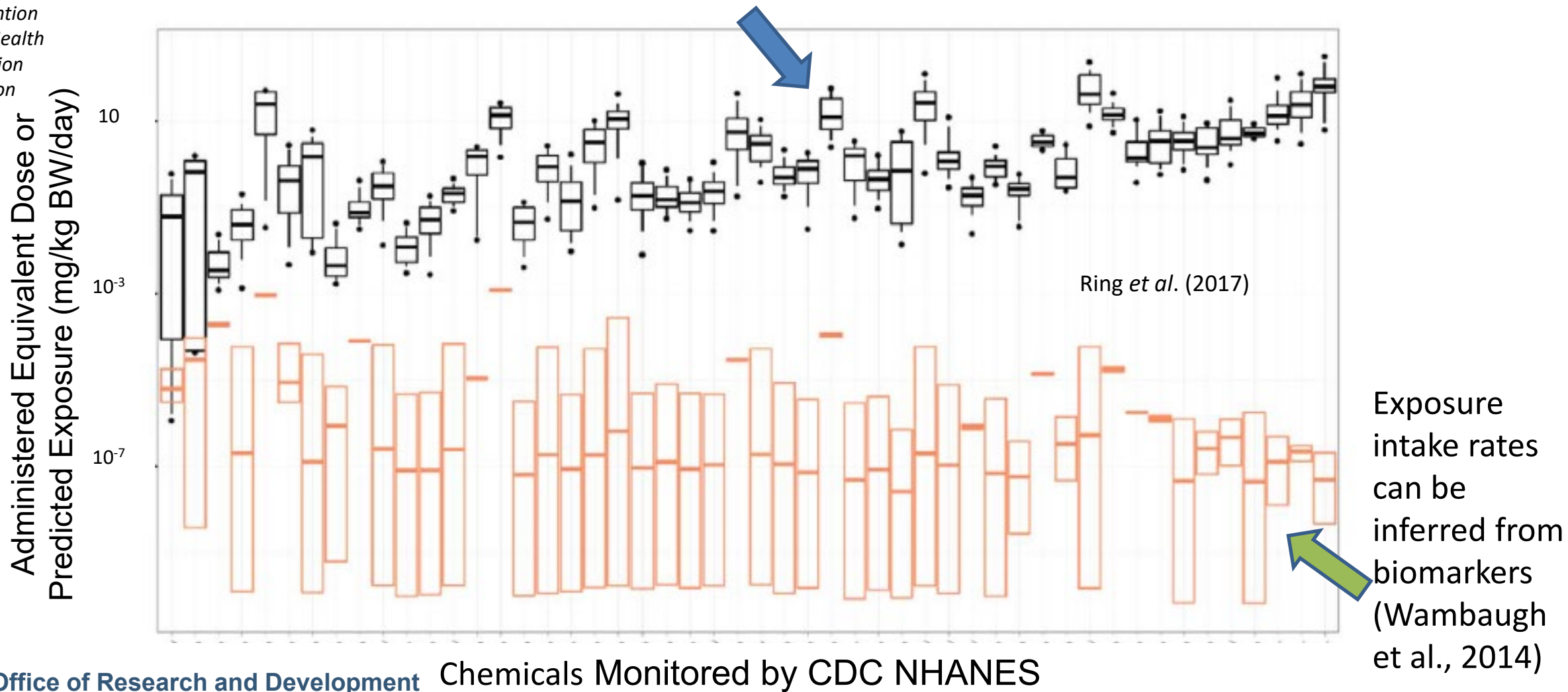




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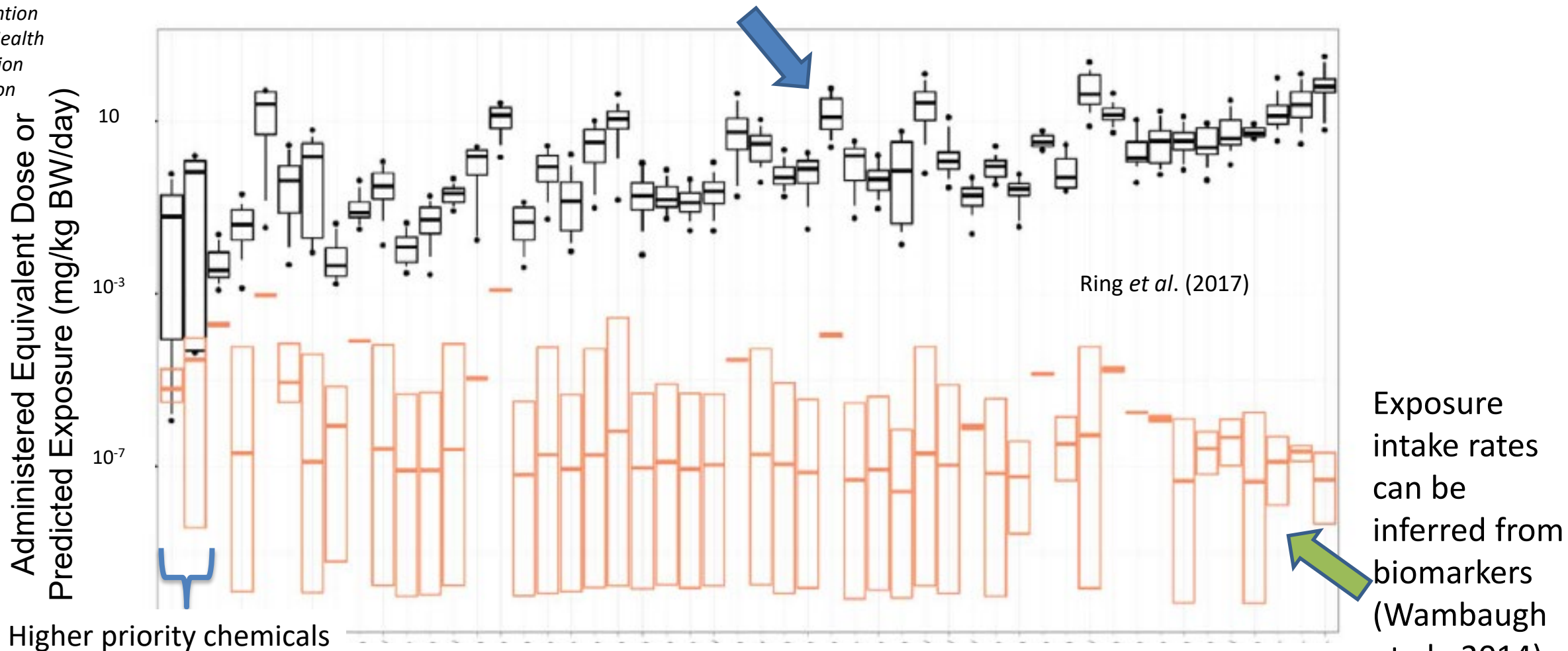
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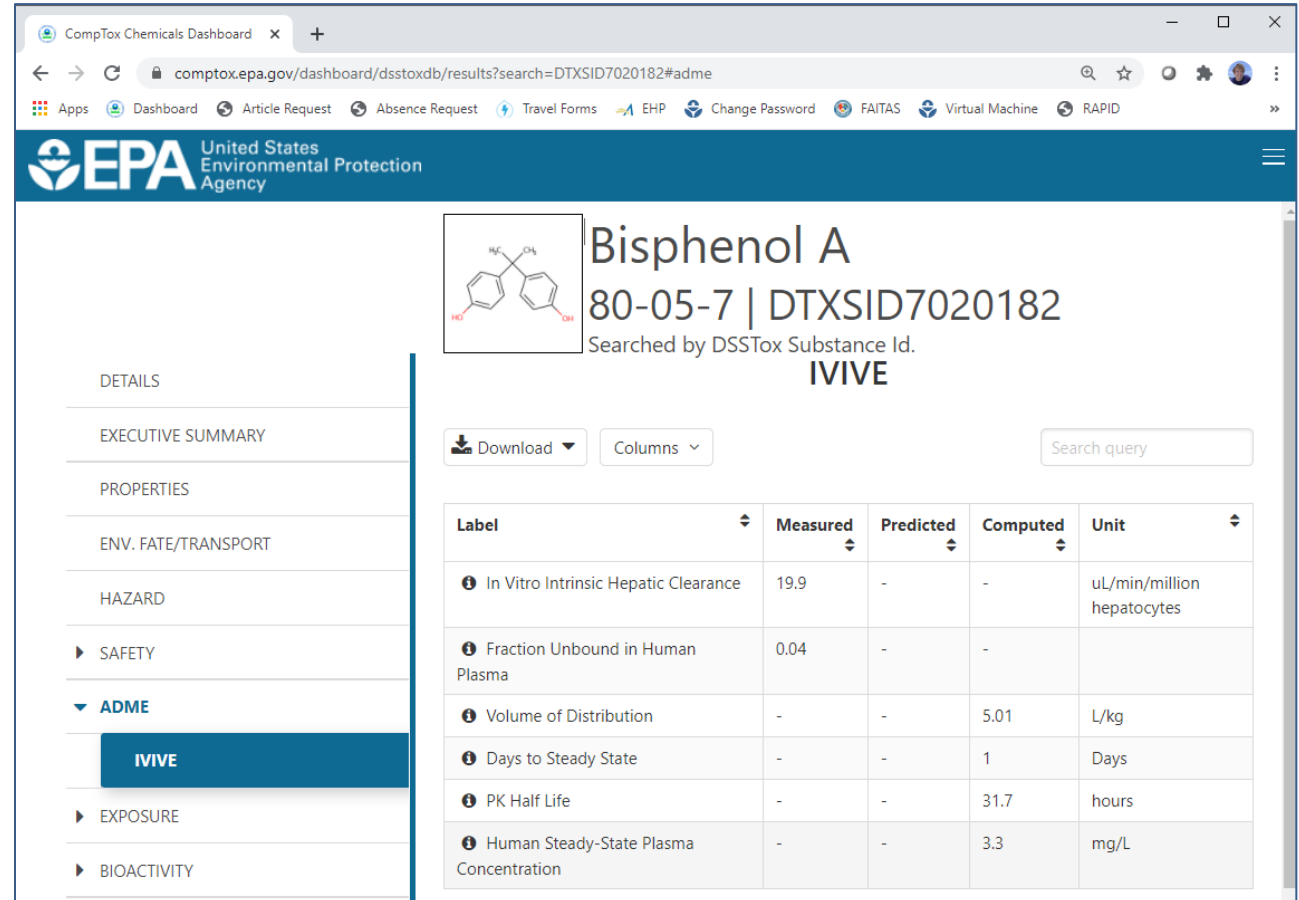


# HTTK on the CompTox Chemicals Dashboard

- The CompTox Chemicals Dashboard provides  $C_{ss,95}$  values for >1000 chemicals

<https://comptox.epa.gov/dashboard/>

- We use EPA's R package "httk" to provide IVIVE predictions
- The value reported is calculated assuming a 1 mg/kg/day dose rate
- We give the upper 95<sup>th</sup> percentile of the calculated values based on a Monte Carlo simulation of human variability and uncertainty

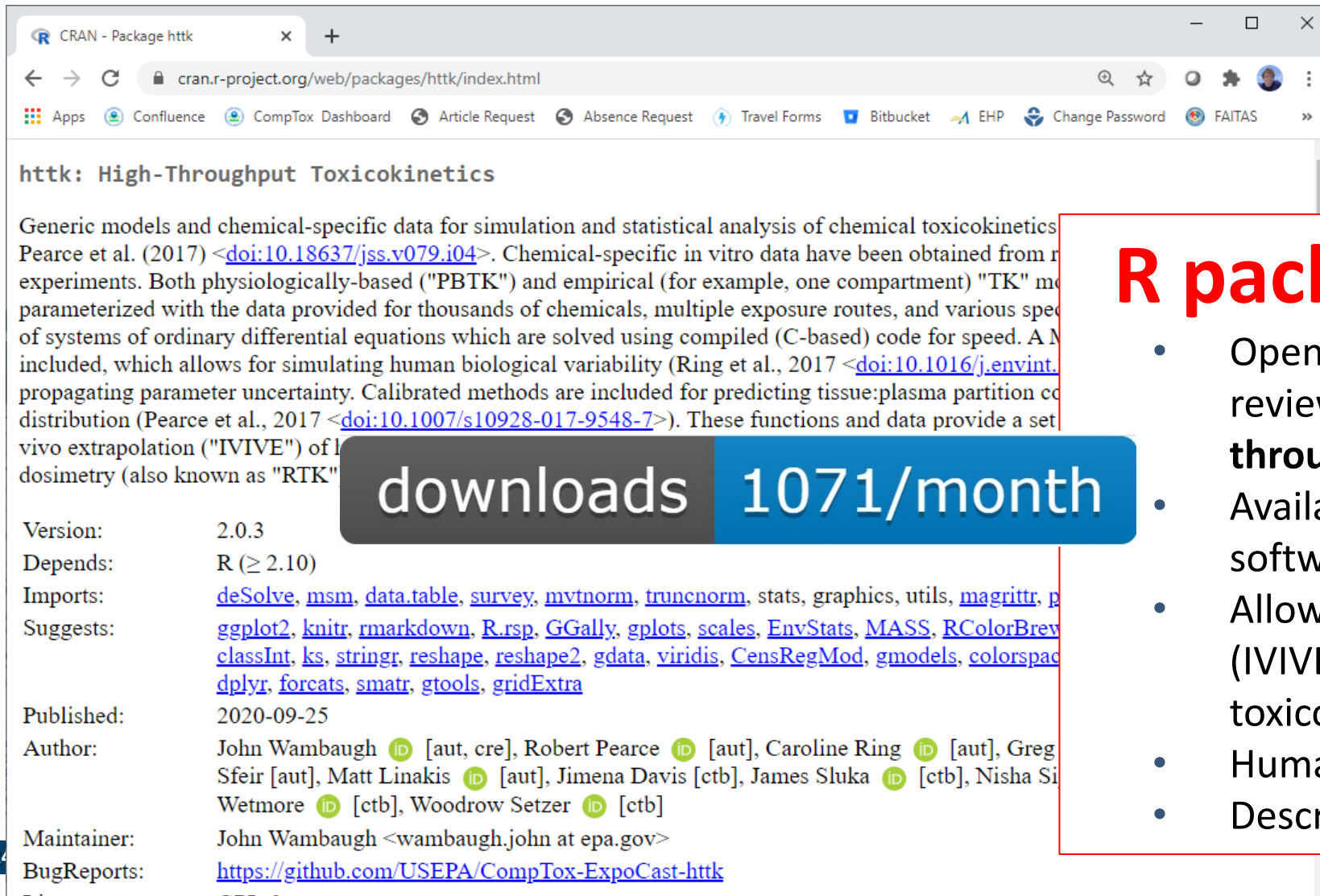


The screenshot displays the CompTox Chemicals Dashboard interface. The top navigation bar includes the EPA logo and various utility links. The main content area shows the chemical Bisphenol A (DTXSID7020182) with its chemical structure. A sidebar on the left contains a menu with options like DETAILS, EXECUTIVE SUMMARY, PROPERTIES, ENV. FATE/TRANSPORT, HAZARD, SAFETY, ADME (selected), EXPOSURE, and BIOACTIVITY. The ADME section is expanded, showing the IVIVE tab. The main panel displays the IVIVE results for Bisphenol A, including a table of pharmacokinetic parameters.

Label	Measured	Predicted	Computed	Unit
In Vitro Intrinsic Hepatic Clearance	19.9	-	-	uL/min/million hepatocytes
Fraction Unbound in Human Plasma	0.04	-	-	
Volume of Distribution	-	-	5.01	L/kg
Days to Steady State	-	-	1	Days
PK Half Life	-	-	31.7	hours
Human Steady-State Plasma Concentration	-	-	3.3	mg/L

# Open Source Tools and Data for HTTK

<https://CRAN.R-project.org/package=httk>



The screenshot shows the CRAN package page for 'httk'. The browser address bar displays 'cran.r-project.org/web/packages/httk/index.html'. The page title is 'httk: High-Throughput Toxicokinetics'. The description states: 'Generic models and chemical-specific data for simulation and statistical analysis of chemical toxicokinetics (Pearce et al. (2017) <doi:10.18637/jss.v079.i04>). Chemical-specific in vitro data have been obtained from experiments. Both physiologically-based ("PBTK") and empirical (for example, one compartment) "TK" models are parameterized with the data provided for thousands of chemicals, multiple exposure routes, and various species of systems of ordinary differential equations which are solved using compiled (C-based) code for speed. A Monte Carlo simulation is included, which allows for simulating human biological variability (Ring et al., 2017 <doi:10.1016/j.envint.2017.05.012>), propagating parameter uncertainty. Calibrated methods are included for predicting tissue:plasma partition coefficients and distribution (Pearce et al., 2017 <doi:10.1007/s10928-017-9548-7>). These functions and data provide a set of tools for in vivo extrapolation ("IVIVE") of low-dose toxicokinetics (also known as "RTK").'

Version: 2.0.3  
Depends: R (≥ 2.10)  
Imports: deSolve, msm, data.table, survey, mvtnorm, truncnorm, stats, graphics, utils, magrittr, plotly, ggplot2, knitr, rmarkdown, R.rsp, GGally, gplots, scales, EnvStats, MASS, RColorBrewer, classInt, ks, stringr, reshape, reshape2, gdata, viridis, CensRegMod, gmodels, colorspace, dplyr, forcats, smatr, gtools, gridExtra  
Published: 2020-09-25  
Author: John Wambaugh [aut, cre], Robert Pearce [aut], Caroline Ring [aut], Greg Sfeir [aut], Matt Linakis [aut], Jimena Davis [ctb], James Sluka [ctb], Nisha Siwetmore [ctb], Woodrow Setzer [ctb]  
Maintainer: John Wambaugh <wambaugh.john at epa.gov>  
BugReports: <https://github.com/USEPA/CompTox-ExpoCast-httk>

downloads 1071/month

## R package "httk"

- Open source, transparent, and peer-reviewed tools and data for **high throughput toxicokinetics (httk)**
- Available publicly for free statistical software R
- Allows *in vitro-in vivo* extrapolation (IVIVE) and physiologically-based toxicokinetics (PBTK)
- Human-specific data for 987 chemicals
- Described in Pearce et al. (2017a)



# Generic PBTK Models

The idea of generic PBTK has been out there for a while...

FUNDAMENTAL AND APPLIED TOXICOLOGY  
ARTICLE NO. 0072

Incorporating  
Pharmacokinetic  
Laboratory

RUSSELL S. THOMAS, W  
Cen

[Clinical Pharmacokinetics](#)

October 2006, Volume 4

Development  
Based Pharm

Authors

Andrea N. Edginton , Walter Schmitt, Stefan Willmann

*Int. J. Mol. Sci.* **2011**, *12*, 7469-7480; doi:10.3390/ijms12117469

OPEN ACCESS

International Journal of  
**Molecular Sciences**  
ISSN 1422-0067  
www.mdpi.com/journal/ijms

Review

## Development of a Human Physiologically Based Pharmacokinetic (PBPK) Toolkit for Environmental Pollutants

Patricia Ruiz <sup>1,\*</sup>, Meredith Ray <sup>2</sup>, Jeffrey Fisher <sup>3</sup> and Moiz Mumtaz <sup>1</sup>

<sup>1</sup> Computational Toxicology and Methods Development Laboratory, Division of Toxicology and Environmental Medicine, Agency for Toxic Substances and Disease Registry, Atlanta, GA 30333, USA; E-Mail: mgm4@cdc.gov

<sup>2</sup> Department of Epidemiology and Biostatistics, Arnold School of Public Health, University of South Carolina, Columbia, SC 29208, USA; E-Mail: mere2110@yahoo.com

<sup>3</sup> USFDA, National Center for Toxicological Research, Jefferson, AR 72079, USA; E-Mail: jeffrey.fisher@fda.hhs.gov

\* Author to whom correspondence should be addressed; E-Mail: pruib@cdc.gov; Tel.: +1-770-488-3348; Fax: +1-770-488-3470.

Received: 20 September 2011; in revised form: 13 October 2011 / Accepted: 24 October 2011 / Published: 31 October 2011

Authors and affiliations

phthalate and di(2-ethylhexyl)phthalate as metabolites. Tissue distribution, environmental exposure properties, reaction

Received 8 April 2005, Revised 25 May 2005

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*Ann. Occup. Hyg.*, Vol. 55, No. 8, pp. 841-864, 2011  
© The Author 2011. Published by Oxford University Press  
on behalf of the British Occupational Hygiene Society  
doi:10.1093/annhyg/mer075

## A Generic, Cross-Chemical Predictive PBTK Model with Multiple Entry Routes Running as Application

Technology Evaluation

### Expert Opinion

1. Introduction
2. The programming language
3. The platform structure
4. Applications of the simulator
5. Discussion
6. Expert opinion

### The Simcyp<sup>®</sup> Population-based ADME Simulator

Masoud Jamei<sup>†</sup>, Steve Marciniak, Kairui Feng, Adrian Barnett, Geoffrey Tucker & Amin Rostami-Hodjegan

<sup>†</sup>Modelling & Simulation Group, Simcyp Limited, Blades Enterprise Centre, John Street, Sheffield, S2 4SU, UK

The Simcyp<sup>®</sup> population-based absorption, distribution, metabolism and excretion simulator is a platform and database for 'bottom-up' mechanistic modelling and simulation of the processes of oral absorption, tissue distribution, metabolism and excretion of drugs and drug candidates in healthy and disease populations. It combines experimental data generated routinely during preclinical drug discovery and development from *in vitro* enzyme and cellular systems and relevant physicochemical attributes of compound and dosage form with demographic, physiological and genetic information on different patient populations. The mechanistic approach implemented in the Simcyp Simulator allows simulation of complex absorption, distribution, metabolism and excretion outcomes, particularly those involving multiple drug interactions, parent drug and metabolite profiles and time- and dose-dependent phenomena such as auto-induction and auto-inhibition.

# Why Build Another Generic PBTK Tool?

	SimCYP	ADMET Predictor / GastroPlus	PK-Sim	IndusChemFate	httk
Maker	SimCYP Consortium / Certara	Simulations Plus	Open Systems Pharmacology	Cefic LRI	US EPA
Reference	Jamei et al. (2009)	Lukacova et al., (2009)	Eissing et al., (2011)	Jongeneelen et al., (2013)	Pearce et al. (2017a)
Availability	License, but inexpensive for research	License, but inexpensive for research	Free: <a href="http://www.open-systems-pharmacology.org/">http://www.open-systems-pharmacology.org/</a>	Free: <a href="http://cefic-lri.org/lri_toolbox/induschemfate/">http://cefic-lri.org/lri_toolbox/induschemfate/</a>	Free: <a href="https://CRAN.R-project.org/package=httk">https://CRAN.R-project.org/package=httk</a>
Open Source	No	No	GitHub	No	CRAN and GitHub
Default PBPK Structure	Yes	Yes	Yes	Yes	Yes
Population Variability	Yes	Yes	Yes	No	Yes
Batch Mode	Yes	Yes	Yes	No	Yes
Graphical User Interface	Yes	Yes	Yes	Excel	No*
Built-in Chemical-Specific Library	Many Clinical Drugs	No	Many pharmaceutical-specific models available	15 Environmental Compounds	980 Pharmaceutical and ToxCast Compounds
Ionizable Compounds	Yes	Yes	Yes	No	Yes
Export Function	No	No	Matlab and R	No	SBML and Jarnac
R Integration	No	No	Yes (2017)	No	Yes
Easy Reverse Dosimetry	Yes	Yes	Yes	No	Yes

\*Both **PLETHEM** (Pendse et al., 2020) and **Web-ICE** (Bell et al., 2020) provide GUI's to HTTK and other models

Pre-computed HTTK results are also available at <https://comptox.epa.gov/dashboard>



# Obstacles to Regulatory Acceptance

TOXICOLOGICAL SCIENCES **126**(1), 5–15 (2012)  
doi:10.1093/toxsci/kfr295  
Advance Access publication November 1, 2011

## Physiologically Based Pharmacokinetic Model Use in Risk Assessment—Why Being Published Is Not Enough

Eva D. McLanahan,<sup>\*,1</sup> Hisham A. El-Masri,<sup>†</sup> Lisa M. Sweeney,<sup>‡</sup> Leonid Y. Kopylev,<sup>||</sup> Harvey J. Clewell,<sup>§</sup> John F. Wambaugh,<sup>¶</sup> and P. M. Schlosser<sup>||</sup>

“Although publication of a PBPK model in a peer-reviewed journal is a mark of good science, subsequent evaluation of published models and the supporting computer code is necessary for their consideration for use in [Human Health Risk Assessments]”

### The White House

Office of the Press Secretary

For Immediate Release

May 09, 2013

## Executive Order -- Making Open and Machine Readable the New Default for Government Information

EXECUTIVE ORDER

-----

### MAKING OPEN AND MACHINE READABLE THE NEW DEFAULT FOR GOVERNMENT INFORMATION

By the authority vested in me as President by the Constitution and the laws of the United States of America, it is hereby ordered as follows:

Section 1. General Principles. Openness in government strengthens our democracy, promotes the delivery of efficient and effective services to the public, and contributes to economic growth. As one vital benefit of open government, making information resources easy to find, accessible, and usable

“...the default state of new and modernized Government information resources shall be open and machine readable.”

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Maker	SimCYP Consortium / Certara	Simulations Plus	Open Systems Pharmacology	Cefic LRI	US EPA
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Availability	License, but inexpensive for research	License, but inexpensive for research	Free: <a href="http://www.open-systems-pharmacology.org/">http://www.open-systems-pharmacology.org/</a>	Free: <a href="http://cefic-lri.org/lri_toolbox/induschemfate/">http://cefic-lri.org/lri_toolbox/induschemfate/</a>	Free: <a href="https://CRAN.R-project.org/package=httk">https://CRAN.R-project.org/package=httk</a>
Open Source	No	No	GitHub	No	CRAN and GitHub
Default PBPK Structure	Yes	Yes	Yes	Yes	Yes
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Built-in Chemical-Specific Library	Many Clinical Drugs	No	Many pharmaceutical-specific models available	15 Environmental Compounds	980 Pharmaceutical and ToxCast Compounds
Ionizable Compounds	Yes	Yes	Yes	No	Yes
Export Function	No	No	Matlab and R	No	SBML and Jarnac
R Integration	No	No	Yes (2017)	No	Yes
Easy Reverse Dosimetry	Yes	Yes	Yes	No	Yes

\*Both **PLETHEM** (Pendse et al., 2020) and **Web-ICE** (Bell et al., 2020) provide GUI's to HTTK and other models

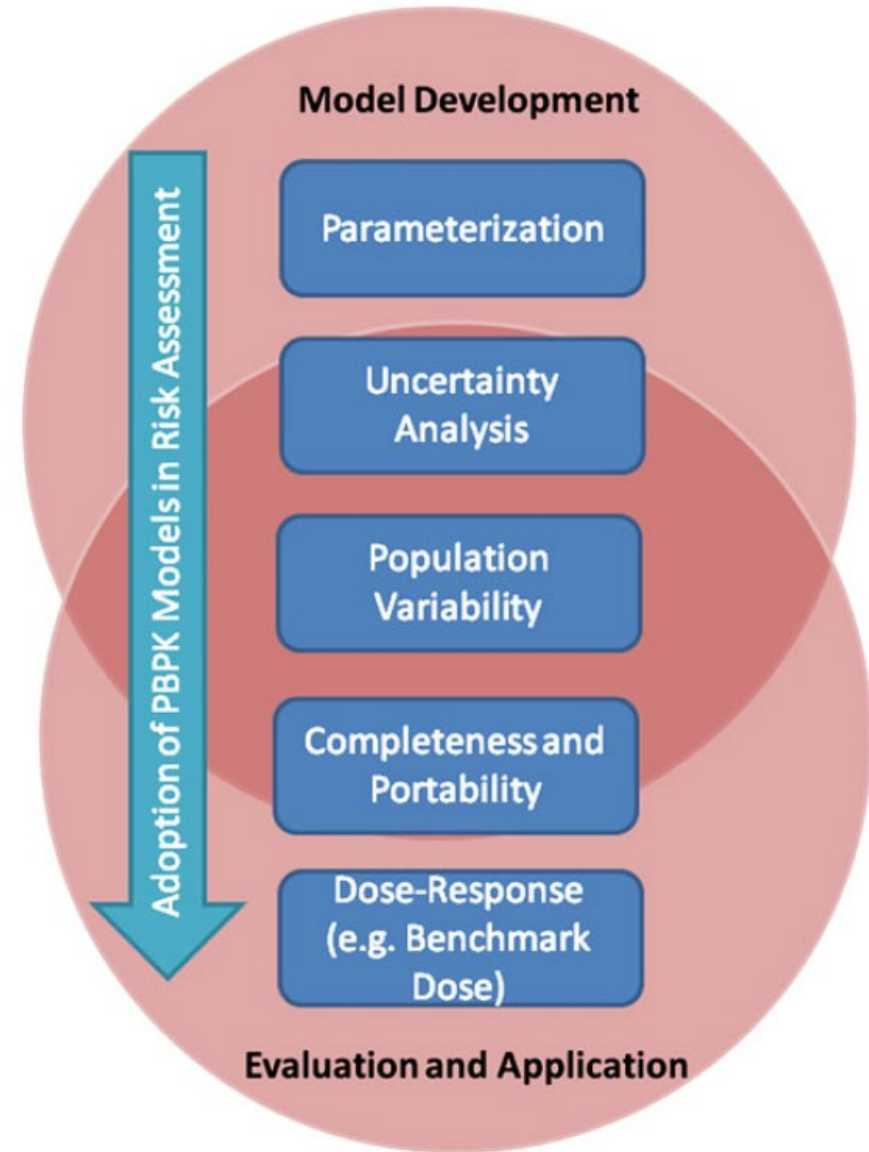
Pre-computed HTTK results are also available at <https://comptox.epa.gov/dashboard>

# Verifying PBTK Models

## Process for the Evaluation of PBPK Models

1. Assessment of Model Purpose
2. Assessment of Model Structure and Biological Characterizations
3. Assessment of Mathematical Descriptions
4. Assessment of Computer Implementation
5. Parameter Analysis and Assessment of Model Fitness
6. Assessment of any Specialized Analyses

Clark et al. (2004)

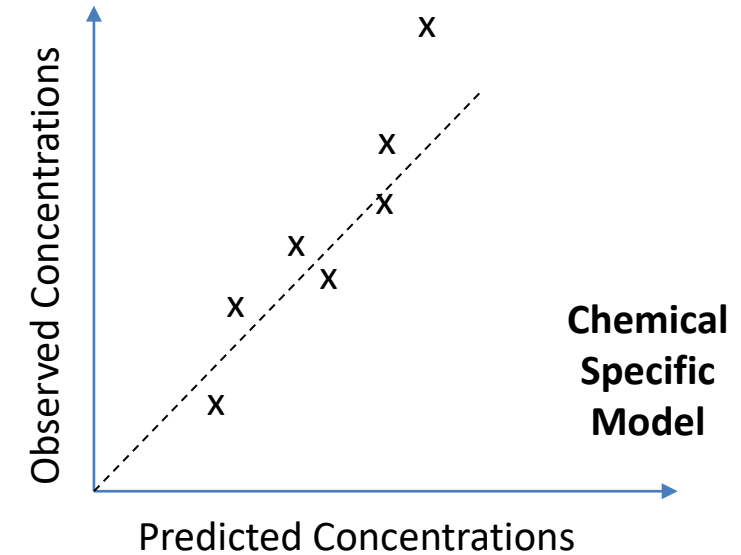


**FIG. 1.** This figure shows examples of key considerations during model development, evaluation, and application that are necessary before a PBPK model may be adopted for use in a HHRA.

McLanahan et al. (2012)

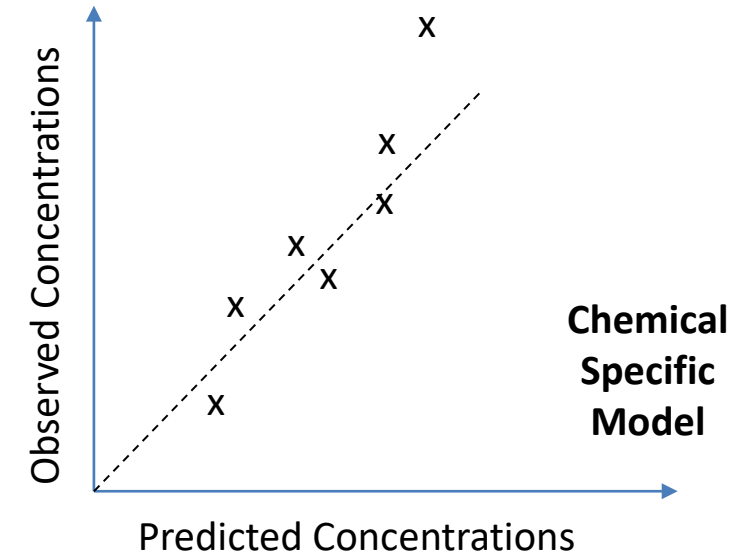
# Building Confidence in TK Models

- To evaluate a **chemical-specific TK model** for “chemical x” you can compare the predictions to *in vivo* measured data
  - Can estimate bias
  - Can estimate uncertainty
  - Can consider using model to extrapolate to other situations (dose, route, physiology) where you have no data



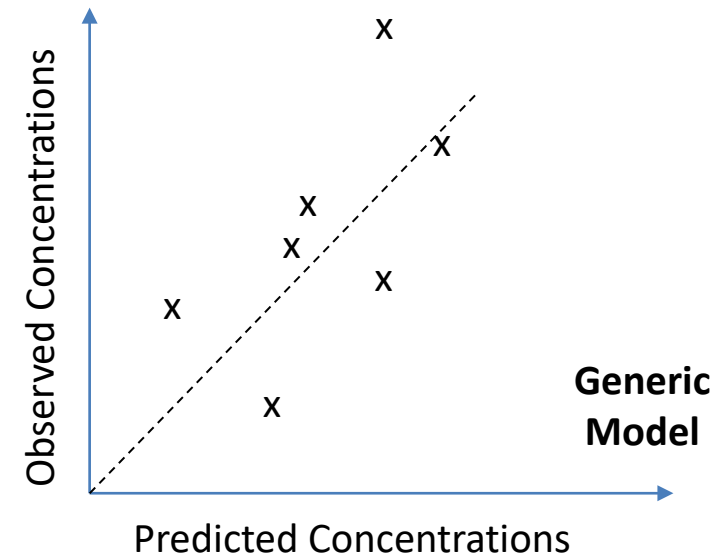
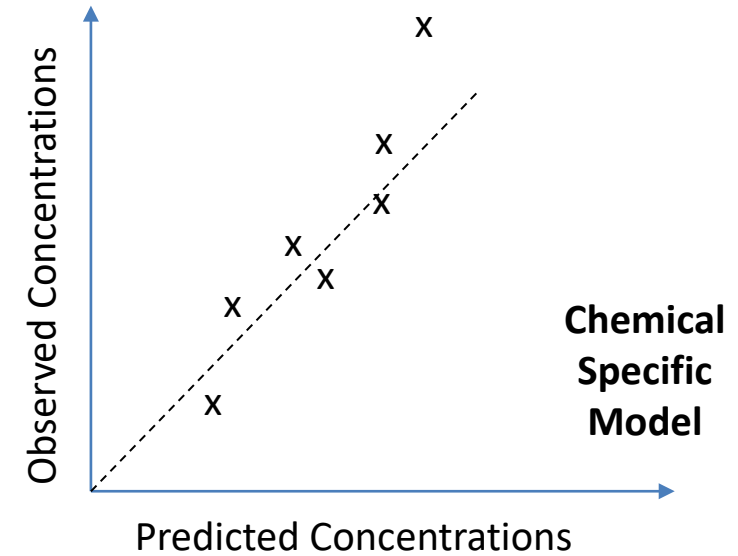
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- However, we do not typically have TK data



# Building Confidence in TK Models

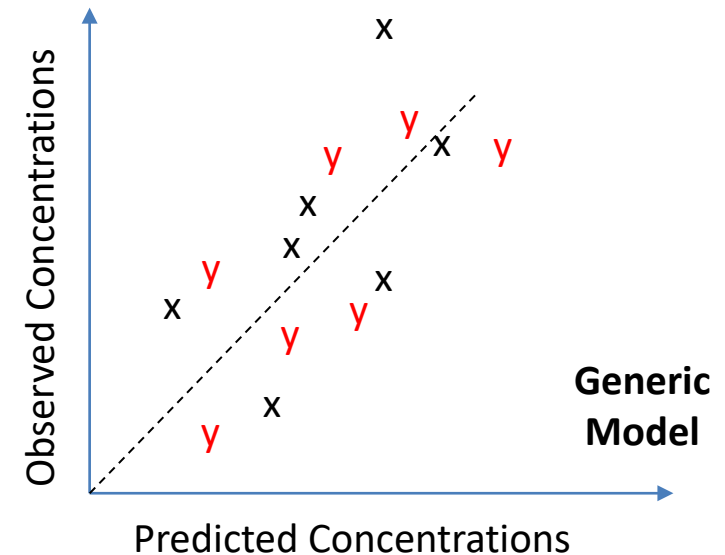
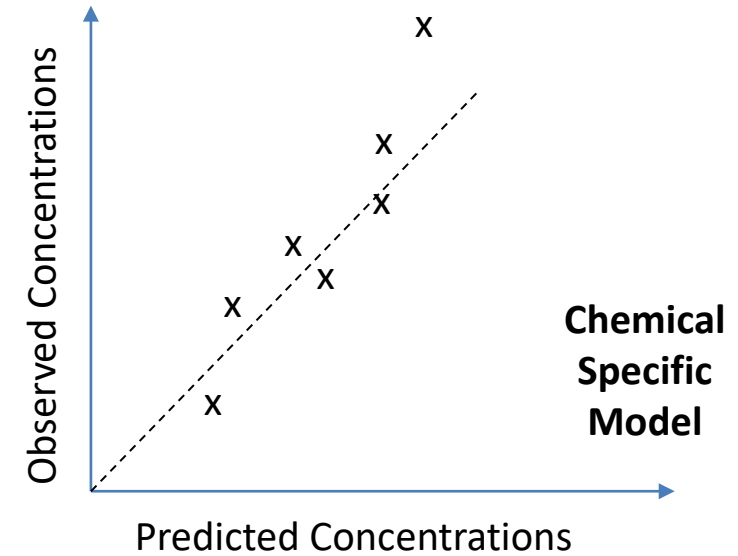
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  - Can estimate bias
  - Can estimate uncertainty
  - Can consider using model to extrapolate to other situations (dose, route, physiology) where you have no data
- However, we do not typically have TK data
- We can parameterize a **generic TK model**, and evaluate that model for as many chemicals as we do have data
  - We do expect larger uncertainty, but also greater confidence in model implementation
  - Estimate bias and uncertainty, and try to correlate with chemical-specific properties





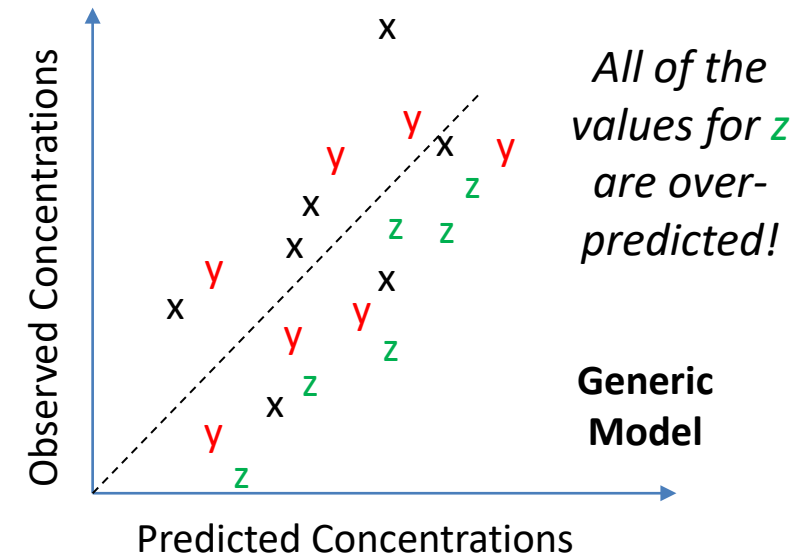
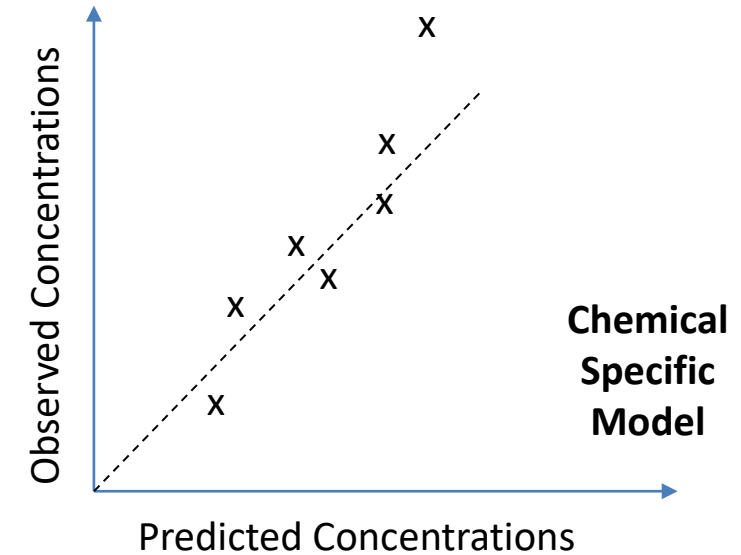
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# Building Confidence in TK Models

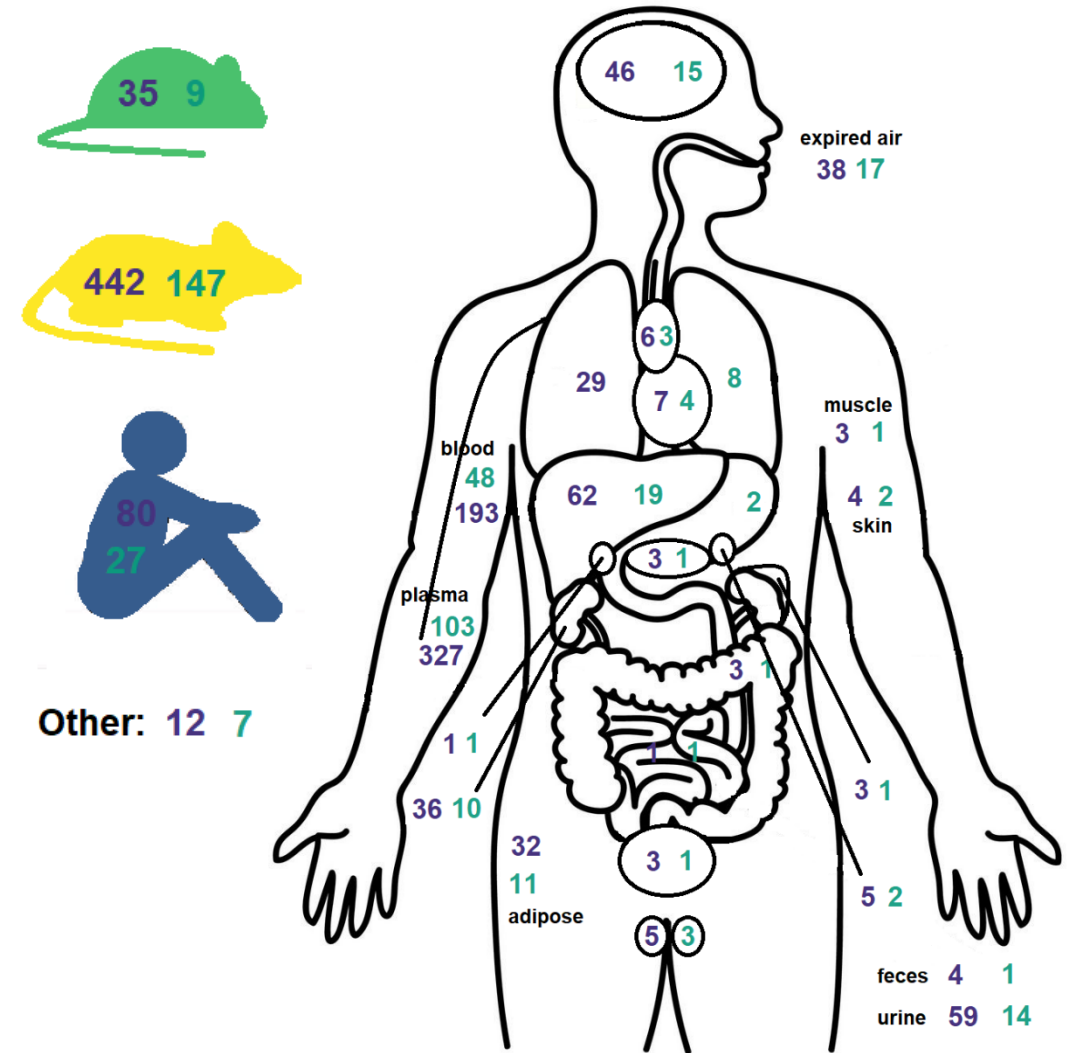
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# In Vivo TK Database

<https://github.com/USEPA/CompTox-PK-CvTdb>

- EPA has developed a **public database of concentration vs. time data** for building, calibrating, and evaluating TK models
- Curation and development is ongoing, but to date includes:
  - 198 analytes (EPA, National Toxicology Program, literature)
  - Routes: Intravenous, dermal, oral, sub-cutaneous, and inhalation exposure
- Standardized, open-source curve fitting software **invivoPKfit** used to calibrate models to all data:  
<https://github.com/USEPA/CompTox-ExpoCast-invivoPKfit>

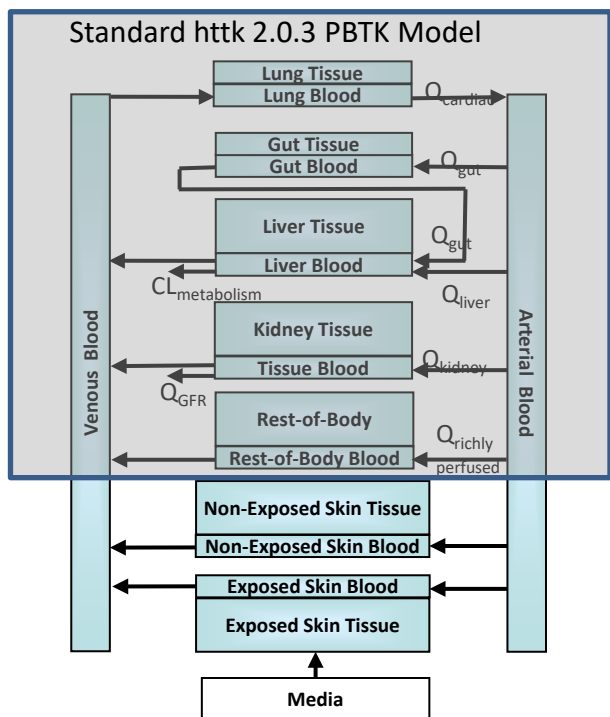


Sayre et al. (2020)

# Modules within R Package “httk”

Feature	Description	Reference
Chemical Specific <i>In Vitro</i> Measurements	Metabolism and protein binding for ~1000 chemicals in human and ~200 in rat	Wetmore et al. (2012, 2013, 2015), plus others
Chemical-Specific <i>In Silico</i> Predictions	Metabolism and protein binding for ~8000 Tox21 chemicals	Sipes et al. (2017)
Generic toxicokinetic models	One compartment, three compartment, physiologically-based oral, intravenous, and inhalation (PBTK)	Pearce et al. (2017a), Linakis et al. (2020)
Tissue partition coefficient predictors	Modified Schmitt (2008) method	Pearce et al. (2017b)
Variability Simulator	Based on NHANES biometrics	Ring et al. (2017)
<i>In Vitro</i> Disposition	Armitage et al. (2014) model	Honda et al. (2019)
Uncertainty Propagation	Model parameters can be described by distributions reflecting uncertainty	Wambaugh et al. (2019)

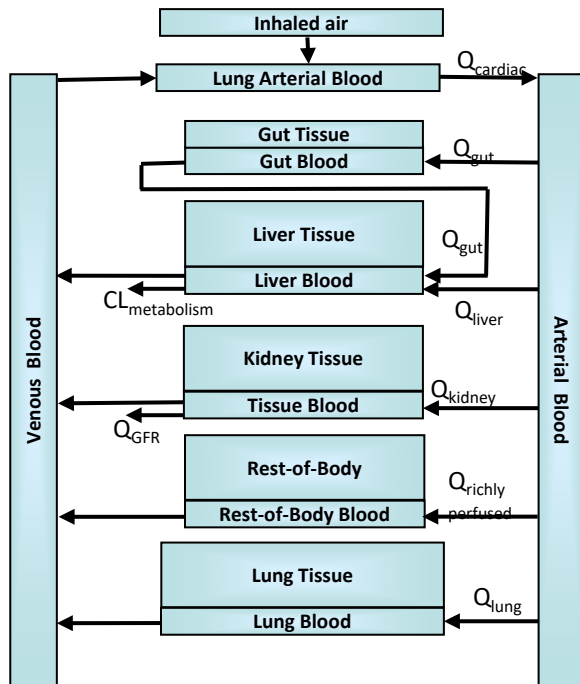
## Gas Inhalation Exposure Route Linakis et al. (2020)



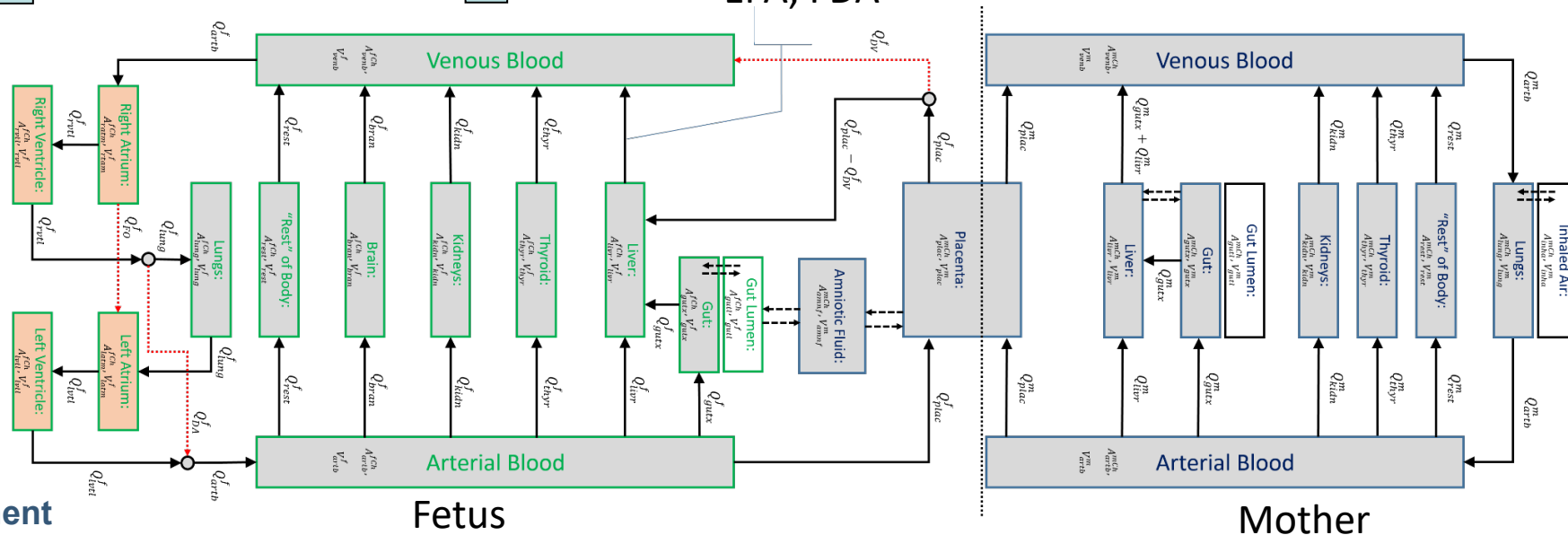
## Dermal Exposure Route EPA, Unilever

# New HT-PBTK Models

## Aerosol Inhalation Exposure Route (including APEX model) EPA, USAF



## Human Gestational Model EPA, FDA

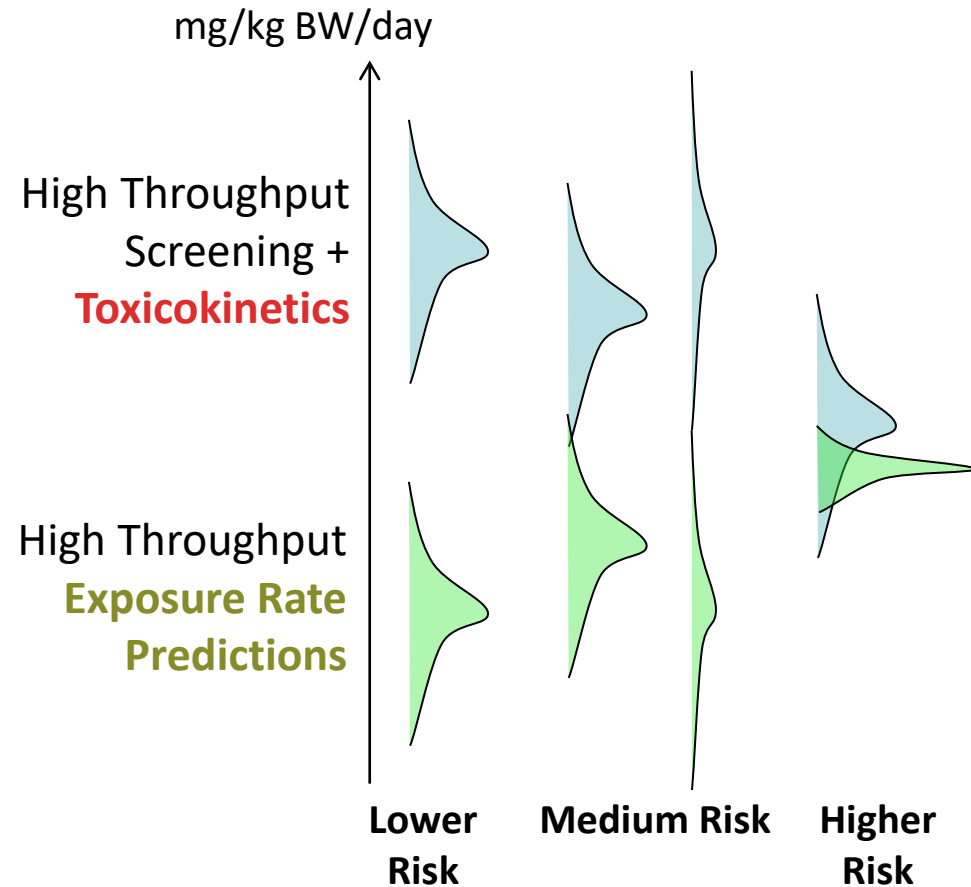


# HTTK Limitations: “Domain of Applicability”

- Oral absorption
  - 100% assumed, but may be very different
  - *In silico* models not necessarily appropriate for environmental chemicals
  - Honda et al. (in preparation) developing QSAR using new *in vitro* data for ToxCast Chemicals
- Hepatic Clearance ( $CL_{int}$ )
  - Not isozyme-specific (Isozyme-specific metabolism assays not HT)
  - Ten donor pool in suspension for 2-4 h misses variability and low turnover compounds
  - Isozyme abundances and activity: varies with age, ethnicity (at least) (Yasuda et al. 2008, Howgate et al. 2006, Johnson et al. 2006)
  - Parent chemical depletion only
  - *In silico* predictions of isozyme-specific metabolism? Not easy!
    - Though ADMET Predictor can do this for some isozymes, training data is mostly for pharmaceuticals
- Plasma binding assay ( $F_{up}$ )
  - Plasma protein concentration variability (Johnson et al. 2006, Israili et al. 2001)
  - Albumin or AAG binding? (Routledge 1986)
- Analytical chemistry
  - Must be able to develop method for each compound
  - Working to develop QSARs for other compounds

- HTTK allows dosimetric adjustment of high-throughput screening (HTS) data
  - Thousands of chemicals
  - Open source, free, and evaluated software
- Generic PBTK models allow for verification of model implementation
- Comparing model predictions for chemicals with *in vivo* data allows estimation of model bias and uncertainty
- Establishes the confidence in predictions for chemicals without *in vivo* data

## Conclusions



The views expressed in this presentation are those of the author and do not necessarily reflect the views or policies of the U.S. EPA



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Annie Lumen (FDA)



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Chris Strock



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Evgenia Korol-Bexell

Lucas Albrecht  
**Barbara Wetmore**

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(Simulations Plus)  
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Cory Strope  
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Risa Sayre  
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Kodavanti  
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## Human Variability

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Katherine Coutros  
Ann Richard  
Tony Williams



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