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#### **4.4.1.3. *Dermal***

In a dermal study (Exxon, 1987), doses of 0.2 g/kg and 3.15 g/kg 2,2,4-trimethylpentane were applied to the abdominal area of New Zealand White (NZW) rabbits (four/group) for 24 hours with no mortality reported. At necropsy, in the low-dose group, one animal appeared to be normal, three had dark livers, and two had mottled livers. In the high-dose group, four animals had dark livers, two animals had mottled livers, and one had a pale kidney.

#### **4.4.1.4. *Ocular***

Exxon (1987) also conducted an eye irritation study in NZW rabbits. 2,2,4-Trimethylpentane (0.1 mL, or ~70 mg) was instilled into the conjunctival sac of one eye of six rabbits. The ocular reactions were graded at 1 and 4 hours, and at 1, 2, 3, 4, and 7 days after instillation. The results showed that 2,2,4-trimethylpentane was nonirritating to the eye.

### **4.4.2. Genotoxicity**

There are a few reports on testing of 2,2,4-trimethylpentane for genetic toxicity. There are no available reports of testing for mutagenic activity in bacterial cells (e.g., the Ames Salmonella test) or for chromosome breaking activity in vitro or in vivo.

#### **4.4.2.1. *Mutation and Chromosome Effects***

TK6 cells, a human lymphoblastoid cell line, were treated with a saturated (5% v/v) solution of 2,2,4-trimethylpentane in cell culture medium for 3 hours in the presence and absence of rat liver S9 fraction (Richardson et al; 1986). There were no detected increases in gene mutations at the thymidine kinase (TK) locus or in sister chromatid exchanges (SCE).

#### **4.4.2.2. *DNA Damage***

McLaren et al. (1994) investigated the induction of DNA double-strand breaks and poly-ADP-ribosylation in the renal cortex of male Wistar rats administered 12 mmol/kg (~1370 mg/kg) of 2,2,4-trimethylpentane via gavage for 5 consecutive days. Treatment failed to









**Table 4-1. Summary of renal effects specific to male rats reported in 2,2,4-trimethylpentane studies**

<b>Study (route, dose, duration)</b>	<b>Accumulation of <math>\alpha_{2u}</math>-globulin hyaline droplets</b>	<b>Cytotoxicity, necrosis of tubule epithelium</b>	<b>Sustained regenerative tubule cell proliferation</b>	<b>Intraluminal granular casts and papillary mineralization</b>	<b>Foci of tubule hyperplasia</b>
Short et al. (1989) (inhalation, 50 ppm [234 mg/m <sup>3</sup> ] 6 h/d, 5 d/w, 3–50 w)	X	X	X		
API (1983) (oral, 0.5 or 2.0 g/kg/d, 5 d/w, 4 w)	X	X		X	
Short et al. (1986) (oral, 50–500 mg/kg/d, 21 d)	X	X	X	X	X
Saito et al. (1992) (oral, 50 mg/kg/d, 14 d)	X				
Borghoff et al. (1992) (oral, 0.95–30 mg/kg/d, 10 d)	X		X		
Lock et al. (1987a) (oral, 1370 mg/kg/d, 10 d)	X				
Saito et al. (1996) (oral, 171 mg/kg/d, 7 d)	X				
Blumbach et al. (2000) (oral, 500 mg/kg/d, 5 d)	X				
Burnett et al. (1989) (oral, 50 mg/kg, 1 d)	X				
Lock et al. (1987b) (oral, 500 mg/kg, 1 d)	X				
Stonard et al. (1986) (oral, 34–2740 mg/kg, 1 d)	X				



















