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DEVELOPMENT OF A RELATIVE POTENCY FACTOR (RPF) APPROACH FOR POLYCYCLIC AROMATIC HYDROCARBON (PAH) MIXTURES

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U.S. Environmental Protection Agency
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EXECUTIVE SUMMARY

The U.S. Environmental Protection Agency's (U.S. EPA's) Integrated Risk Information System (IRIS) Program is releasing for scientific review a relative potency factor (RPF) approach for polycyclic aromatic hydrocarbon (PAH) mixtures as one approach to assessing cancer risk from exposure to PAH mixtures. The RPF approach is not a reassessment of individual PAH carcinogenicity, but rather provides a cancer risk estimate for PAH mixtures by summing doses of component PAHs after scaling the doses (with RPFs) relative to the potency of an index PAH (i.e., benzo[a]pyrene). The cancer risk is then estimated using the dose-response curve for the index PAH. RPFs for seven individual PAHs were developed in the U.S. EPA (1993) *Provisional Guidance for Quantitative Risk Assessment of PAHs (Provisional Guidance)* and are utilized extensively within U.S. EPA program offices and other regulatory agencies. The *Provisional Guidance*, however, does not reflect the most recent research, nor does it consider additional PAHs with carcinogenic potential (such as fjord-region PAHs).

The Supplemental Guidance for Conducting Health Risk Assessment of Chemical Mixtures (U.S. EPA, 2000) highlights that approaches based on whole mixtures are preferred to component approaches, such as the RPF approach. Risk assessment approaches based on toxicity evaluations of whole mixtures inherently address specific interactions among PAHs and account for the toxicity of unidentified components of PAH mixtures. They also do not require assumptions regarding the toxicity of individual components (e.g., dose additivity or response additivity). While whole mixture assessment is preferred, there are challenges associated with using these approaches. There are very few toxicity data available for whole PAH mixtures and, in most cases, chemical analyses of the composition of mixtures are limited. In addition, PAH-containing mixtures tend to be very complex; the composition of these mixtures appears to vary across sources releasing these mixtures to the environment and in various environmental media in which they occur. For these reasons, a whole mixtures approach may not always be practicable for risk assessment purposes.

This report provides recommendations for development of the RPF approach for PAH mixtures health risk assessment and includes:

- (1) A rationale for recommending an RPF approach (Section 2);
- (2) A summary of previous approaches for developing the RPF approach for PAHs (Section 3);
- (3) An evaluation of the carcinogenic potential of individual PAHs (Section 4);

- (4) Methods for dose response assessment and individual study RPF calculation (Section 5);
- (5) Selection of PAHs for inclusion in the RPF approach (Section 6);
- (6) Derivation of RPFs for selected PAHs (Section 7); and
- (7) Characterization of strengths, weaknesses, and uncertainties associated with the RPF approach to PAH cancer risk assessment (Section 8).

The RPF approach involves two key assumptions: (1) similar toxicological action of PAH components in the mixture; and (2) interactions among PAH mixture components do not occur at low levels of exposure typically encountered in the environment (that is, additivity is assumed). Mechanistic studies indicate that the mutagenic and tumor-initiating activity of carcinogenic PAHs requires metabolic activation to reactive intermediates (e.g., dihydrodiol epoxides, quinones, radical cations), which covalently modify DNA targets resulting in mutation, and that tumor promotion and progression phases may involve parent compound binding to the Ah receptor (AhR) and subsequent alterations of gene expression or a cell proliferation response to metabolite cytotoxicity (see Section 2.4, Similarities in Carcinogenic Mode of Action for PAHs, and Figure 2-3, Overview of the Proposed Key Events in the Mode of Action for PAH Carcinogenicity). As such, there is evidence that an assumption of similar toxicological action is reasonable; however, the carcinogenic process for PAHs is likely to be related to some unique combination of multiple molecular events resulting from formation of several reactive species. The second assumption of no interactions at low levels of exposure is reasonable, but evidence of toxicological interactions among PAHs at higher dose levels has been observed (see Section 2.7, Additivity of PAHs in Combined Exposures).

Several approaches have been used previously for the determination of RPFs for PAHs (see Section 3). In the published literature, RPF values were proposed in at least one analysis for a total of 27 PAHs (see Table 3-1). Because these approaches generally relied on similar bioassay data and modeling methods, the resulting RPF values are generally comparable for most PAHs across studies. The RPF approach provided in the current report makes use of more recent data on genotoxicity and tumorigenicity of PAHs.

There is a large PAH database on carcinogenicity in animal bioassays, genotoxicity in various test systems, and bioactivation to tumorigenic and/or genotoxic metabolic intermediates. The RPF analysis presented here includes only unsubstituted PAHs with three or more fused aromatic rings containing only carbon and hydrogen atoms, because these are the most widely studied members of the PAH chemical class. The study types that were considered most useful for RPF derivation were rodent carcinogenicity bioassays (all routes) in which one or more PAHs was tested at the same time as benzo[a]pyrene. In addition, in vivo and in vitro data for

cancer-related endpoints in which one or more PAHs and benzo[a]pyrene were tested simultaneously were obtained, including studies on the formation of DNA adducts, mutagenicity, chromosomal aberrations, sister chromatid exchange frequency, aneuploidy, DNA damage/repair/recombination, unscheduled DNA synthesis, and cell transformation. Although it would be possible to calculate RPFs from studies where a PAH and benzo[a]pyrene were tested by the same laboratory using the same test system but at different times, this approach was not considered because it could introduce differences in the dose-response information that are unrelated to the chemical (e.g., variability associated with laboratory environment conditions, animal handling, food supply, etc.). Thus, studies in which benzo[a]pyrene was not tested simultaneously with another PAH were not considered in the RPF calculations.

Studies of AhR binding/activation were not considered for use in deriving RPFs because there is evidence indicating that highly mutagenic fjord-region PAHs are potent carcinogens despite exhibiting lower AhR affinity (reviewed by Bostrom et al., 2002). Likewise, some PAHs that strongly activate the AhR, such as benzo[k]fluoranthene (Machala et al., 2001), are only weakly carcinogenic. In addition, some studies have demonstrated the formation of DNA adducts in the liver of AhR knock-out mice following intraperitoneal or oral exposure to benzo[a]pyrene (Sagredo et al., 2006; Uno et al., 2006; Kondraganti et al., 2003), indicating that Ah responsiveness is not a prerequisite to genotoxicity. These findings suggest that there may be alternative (i.e., non-AhR mediated) mechanisms of benzo[a]pyrene activation in the mouse liver, and that AhR affinity would not be a good predictor of carcinogenic potency.

Several study types were excluded from the database because they did not provide carcinogenicity or cancer-related endpoint information for individual PAHs. These include biomarker studies measuring DNA adducts in humans, studies of PAH metabolism, and studies of PAH mixtures. Although these studies contain important information on human exposure to PAH mixtures and the mode of action for PAH toxicity, they generally do not contain dose-response information that would be useful for calculation of RPF estimates.

A database of primary literature relevant to the RPF approach for PAHs was developed by performing a comprehensive review of the scientific literature dating from the 1950s through 2009 on the carcinogenicity and genotoxicity of PAHs. The search identified over 900 individual publications for a target list of 74 PAHs (see Table 2-1) that have been identified in environmental media or for which toxicological data are available. Review of these publications resulted in the identification of more than 600 papers that included carcinogenicity or cancer-related endpoint data on at least one PAH and benzo[a]pyrene tested at the same time.

References in the PAH database were sorted into the following major categories: cancer bioassays, in vivo studies of cancer-related endpoints, and in vitro studies of cancer-related endpoints. These categories were further sorted by route (for bioassays) or by endpoint (for

cancer-related endpoints). Each study was reviewed, and critical study details were extracted into tables for each individual endpoint (see Section 4). The tables also include an initial determination of whether the data from each study meet selection criteria for use in the RPF analysis. Studies with data on selected PAHs and benzo[a]pyrene were considered for RPF determination, even if a particular PAH has not been classified by U.S. EPA or International Agency for Research on Cancer (IARC) as a carcinogen. Studies were included in the analysis if the following selection criteria were met:

- Benzo[a]pyrene was tested simultaneously with another PAH;
- A statistically increased incidence of tumors was observed with benzo[a]pyrene administration, compared with control incidence;
- Benzo[a]pyrene produced a statistically significant change in a cancer-related endpoint finding;
- Quantitative results were presented;
- The carcinogenic response observed in either the benzo[a]pyrene- or other PAH-treated animals at the lowest dose level was not saturated (i.e., tumor incidence at the lowest dose was <90%), with the exception of tumor multiplicity findings; and
- There were no study quality concerns or potential confounding factors that precluded use (e.g., no concurrent control, different vehicles, strains, etc. were used for the tested PAH and benzo[a]pyrene; use of cocarcinogenic vehicle; PAHs of questionable purity; unexplained mortality in treated or control animals).

If the above criteria were met, studies were selected for use in the analysis regardless of whether positive or negative results were reported. Studies with positive findings were used for calculation of RPFs. Studies with negative findings were used in a weight of evidence evaluation of potential carcinogenicity (discussed in Section 6.1).

Dose-response data were extracted from studies with positive findings that met selection criteria. For studies that reported results graphically, individual data points were extracted using digitizing software. In all, over 300 data sets were extracted, reflecting dose-response data from at least one study for 50 of the 74 PAHs included in the analysis. All of the extracted data are presented in Appendix C of this report.

Statistical analyses were performed on tumor bioassay data to determine whether the tumor incidence or multiplicity observed at a particular dose represented a statistically significant increase over controls. If statistical analyses were not described in the original report, incidence data were analyzed using Fisher's Exact test and the Cochran-Armitage trend test. Positive

findings were indicated by a significant ($p < 0.05$) difference for at least one dose group by comparison to control (in Fisher's Exact or an equivalent test) or a significant dose-response trend (Cochran-Armitage or equivalent) for multi-dose studies. For tumor bioassay data reported as tumor count, a t-test was conducted (when variance data were available) to determine whether the count was significantly different from control ($p < 0.05$). The results of the statistical analyses are shown with the dose-response data in Appendix C. Statistical analyses of the cancer-related endpoint data were not conducted; the study author's conclusions as to response (positive or negative) was used.

Section 5 describes both the methods used for dose-response assessment and RPF calculation in detail. The general equation for estimating an RPF was the ratio of the slope of the dose-response curve for the subject PAH to the slope of the dose-response curve for benzo[a]pyrene. For bioassay data, tumor incidences were modeled using the multistage model within the U.S. EPA Benchmark Dose (BMD) Software (Version 1.3.2). For cancer-related endpoint data in quantal form, this model was also used; for continuous data (either tumor multiplicity or cancer-related endpoint data), the simplest continuous model (linear) within the software was applied. Whenever the data allowed, benchmark response (BMR) values of 10% for quantal data and 1 standard deviation from the control value for continuous data were used to calculate the slope by linear extrapolation to the origin for consistency across data sets. Alternative BMR values were used in select instances, as described in Section 5.3. For data sets that included only a single dose, or those for which no model fit was achieved with the selected models, a point estimate RPF was calculated.

The RPFs calculated from individual studies for each PAH were used in a weight of evidence evaluation to assess the potential carcinogenicity of each compound (see Section 6) and in the derivation of a final RPF for each compound (Section 7). The selection of PAHs to be included in the RPF approach began with an evaluation of whether the available data were adequate to assess the potential carcinogenicity of each compound. At least one RPF value was calculated for each of 50 PAHs. For 16 of these compounds, only a single RPF value derived from an in vitro cancer-related endpoint (primarily mutagenicity assays) was available (see Table 6-1). Due to the limited data available for these 16 compounds, no further evaluation of these PAHs was conducted, and they were not selected for inclusion in the RPF approach.

For the remaining 34 PAHs, a weight of evidence evaluation (see Figure 6-1) was conducted to assess the evidence that each PAH could induce a carcinogenic response. This evaluation did not constitute a formal weight of evidence evaluation of carcinogenic potential; rather, an expedited approach was developed using the data collected to determine whether the available information for each PAH was adequate to draw a conclusion regarding carcinogenic potential. When the data were considered adequate for a given PAH, it was selected for

inclusion in the RPF approach; if the data were not considered adequate to assess potential carcinogenicity, the PAH was excluded. In vivo tumor bioassays that included benzo[a]pyrene were given the greatest weight in assessing the potential carcinogenicity of a given PAH; data from other bioassays and cancer-related endpoint studies were used to supplement the weight of evidence when the bioassay data that included benzo[a]pyrene were conflicting or negative. Structural alerts for PAH carcinogenicity or mutagenicity (as defined in Section 2.5 as the presence of a classic bay region or fjord region in a PAH containing at least four benzene rings) were noted in the evaluation for each PAH, but were not used explicitly in the weight of evidence evaluation.

The weight of evidence evaluation (Section 6) indicated that the available data were adequate to determine that 23 of the 34 PAHs were potentially carcinogenic, that three PAHs (anthracene, phenanthrene, and pyrene) exhibited little or no carcinogenic potential, and that data were inadequate to evaluate the carcinogenic potential for eight PAHs. The eight PAHs with inadequate data were excluded from the RPF approach. For the three PAHs for which there were sufficient data to conclude that the PAH had minimal carcinogenic potential (i.e., robust negative tumor bioassay data and cancer-related endpoint data), a final RPF of 0 was recommended. While there is little quantitative difference between selecting a final RPF of 0 for a given PAH and excluding that PAH from the RPF approach, this is an important distinction for uncertainty analysis. There is substantial uncertainty in the risk associated with PAHs that are excluded from the RPF approach due to inadequate data; these compounds could be of low or high potency. However, for PAHs with an RPF of 0, there is evidence to suggest that these compounds are of little or no carcinogenic potential, and the uncertainty associated with the cancer risk for these compounds is markedly reduced.

For each of the remaining 23 compounds, a final nonzero RPF was derived. A number of options were considered for deriving an RPF from among the numerous values calculated for each individual PAH. These options included: prioritizing bioassay RPFs from different exposure routes based on relevance to environmentally-relevant routes; prioritizing bioassay RPFs based on target organs considered relevant to human susceptibility to PAH carcinogenesis; prioritizing RPFs based on quality of the underlying study; prioritizing cancer-related endpoints by their correlation with bioassay potency (i.e., ability to predict bioassay potency); and aggregating RPFs across all bioassays, all cancer-related endpoints, or across all endpoints. In the end, it was concluded that the available data did not provide a clear scientific basis for prioritizing RPFs except for a preference for bioassay data over cancer-related endpoints. As a consequence, final RPFs were derived from bioassay data for any PAH that had at least one RPF based on a bioassay.

For each potentially carcinogenic PAH with bioassay data, the average RPF was calculated from bioassays with positive results. For those PAHs that did not have any estimated RPF based on a bioassay, but for which the weight of evidence evaluation indicated a potential for carcinogenic response (e.g., dibenz[a,c]anthracene), the final RPF was calculated from all cancer-related endpoint studies with positive results. In both cases, nonpositive results were not included in the calculation. The final RPF for each PAH was reported to one significant figure. The range of RPF values was also reported. Presenting the RPFs in this manner provides an average and maximum estimate for each PAH that has data from multiple studies.

All tumor bioassay RPFs (across all exposure routes, species, sexes, and including both tumor incidence and tumor multiplicity RPFs) were combined to estimate the mean and range, except as follows. In some cases, two separate RPFs were calculated in the same group of animals. There were two situations in which this occurred: RPFs for different target organs in the same animals, and RPFs based on incidence of tumors and tumor count in the same animals. In these instances, the higher value of the two RPFs was included in the average and range, and the lower value was dropped from the combined data.

Several options were considered for the determination of a final RPFs (e.g., arithmetic mean, geometric mean, weighted average, maximum, or order of magnitude estimates). The arithmetic mean and range were chosen as a simple approach to describing the calculated RPF values available for each PAH. Other statistical measures (i.e., geometric mean, weighted average) were not considered appropriate due to the limited number of RPF values calculated for most PAHs and the variability in the RPF estimates. Most PAHs (19/26, 73%) had ≤ 3 calculated RPF values and the range of RPF values was greater than an order of magnitude for several compounds (6/26 PAHs). The variability in RPF estimates is likely due to differences in study design parameters (e.g., route, species/strain, exposure duration, exposure during sensitive time periods, initiation vs. promotion and complete carcinogenesis protocols, tumor incidence vs. multiplicity reporting) and dose-response methods (modeled vs. point estimates). Calculation of a weighted average was not possible because there is no clear biological rationale for choosing among study types or tumor data outcomes. Providing order of magnitude estimates, as has been previously done for estimating RPFs for PAHs, was not considered to be superior to calculating simple means. Including the range in the estimated RPFs was considered to be informative to the user for characterizing uncertainty.

Once a final RPF was derived for a given PAH, the resulting value was assigned a relative confidence rating of *high*, *medium*, or *low confidence*. The relative confidence rating characterized the nature of the database upon which the final RPF was based. Confidence rankings were based on the robustness of the database. For final RPFs based on tumor bioassay data, confidence ratings considered both the available tumor bioassays and the size and

consistency of the cancer-related endpoint database. The most important factors that were considered included the availability of in vivo data and whether multiple exposure routes were represented. Other database characteristics that were considered important included the strength of evidence of genotoxicity data and SAR information, the availability of more than one in vivo study, and whether effects were evident in more than one sex or species. *Very low relative confidence* was reserved for final RPFs based on cancer-related endpoint data only (e.g., dibenz[a,c]anthracene). An RPF of zero was only applied if the data implied *high* or *medium relative confidence*.

Table 1 shows the average RPFs based on tumor bioassay data with their associated range and relative confidence ratings, and an overview of the tumor bioassay database (total number of studies, exposure routes tested, species tested, sexes tested) for each PAH. Table 2 shows the average RPF for dibenz[a,c]anthracene, the only RPF based on cancer-related endpoint data, with its associated range, relative confidence rating, and an overview of the database for this compound.

Table 1. PAHs with final RPFs based on tumor bioassay data

PAH	Average RPF	Range of RPFs	Relative confidence	Number of datasets	Exposure routes tested	Species tested	Sexes tested
Anthanthrene	0.4	0.2–0.5	Medium	2	Dermal, lung implantation	Mouse, rat	F
Anthracene	0	0	Medium	1 (Negative)	Dermal	Mouse	F
Benz[a]anthracene	0.2	0.02–0.4	Medium	3	Dermal, intraperitoneal	Mouse	F, M
Benz[b,c]aceanthrylene, 11H-	0.05	0.05	Low	1	Dermal	Mouse	F
Benzo[b]fluoranthene	0.5	0.1–2	High	5	Dermal, intraperitoneal, lung implantation	Mouse, rat	F, M
Benz[e]aceanthrylene	0.9	0.5–1	Low	2	Dermal	Mouse	F, M
Benzo[g,h,i]perylene	0.009	0.009	Low	1	Lung implantation	Rat	F
Benz[j]aceanthrylene	60	60	Low	1	Intraperitoneal	Mouse	F
Benzo[j]fluoranthene	0.3	0.01–1	High	5	Dermal, intraperitoneal, lung implantation	Mouse, rat	F, M
Benzo[k]fluoranthene	0.03	0.03–0.03	Medium	2	Dermal, lung implantation	Mouse, rat	F
Benz[l]aceanthrylene	5	4–7	Low	2	Dermal	Mouse	F, M
Chrysene	0.1	0.04–0.2	High	7	Dermal, intraperitoneal, lung implantation	Mouse, rat	F, M
Cyclopenta[c,d]pyrene	0.4	0.07–1	Medium	5	Dermal, intraperitoneal	Mouse	F, M
Cyclopenta[d,e,f]chrysene, 4H-	0.3	0.2–0.5	Low	2	Dermal	Mouse	F
Dibenzo[a,e]fluoranthene	0.9	0.7–1	Low	2	Dermal	Mouse	F
Dibenzo[a,e]pyrene	0.4	0.3–0.4	Low	2	Dermal	Mouse	F
Dibenz[a,h]anthracene	6	1–10	High	3	Dermal, intraperitoneal, lung implantation	Mouse, rat	F, M
Dibenzo[a,h]pyrene	0.9	0.9	Low	1	Dermal	Mouse	F
Dibenzo[a,i]pyrene	0.6	0.5–0.7	Low	2	Dermal	Mouse	F
Dibenzo[a,l]pyrene	30	10–40	Medium	3	Dermal, intraperitoneal	Mouse	F, M
Fluoranthene	0.08	0.009–0.2	Low	6	Intraperitoneal	Mouse	F, M
Indeno[1,2,3-c,d]pyrene	0.07	0.07	Low	1	Lung implantation	Rat	F
Naphtho[2,3-e]pyrene	0.3	0.3	Low	1	Dermal	Mouse	F
Phenanthrene	0	0	High	3 (Negative)	Dermal, intraperitoneal, lung implantation	Mouse, rat	F, M
Pyrene	0	0	High	7 (Negative)	Dermal, intraperitoneal	Mouse	F, M

NA = not applicable; M = male; F = female

Table 2. PAHs with final RPFs based on cancer-related endpoint data (no tumor bioassay data available)

PAH	Average RPF	Range of RPFs	Relative confidence	Types of studies	Multiple dose studies
Dibenz[a,c]anthracene	4	0.04–50	Very low	Total = 14 studies One in vivo DNA adduct Six in vitro bacterial mutagenicity One in vitro mammalian mutagenicity One in vitro morphological/malignant transformation Three in vitro DNA damage Two in vitro DNA adducts	Total = 6 studies Four in vitro bacterial mutagenicity One in vitro DNA damage One in vitro DNA adduct

According to the *Supplemental Guidance for Assessing Susceptibility from Early-Life Exposure to Carcinogens* (U.S. EPA, 2005b), benzo[a]pyrene is carcinogenic by a mutagenic mode of action. The PAH compounds for which a RPF value was derived are also considered to be carcinogenic by a mutagenic mode of action (see Section 2.4 for discussion of similarities in mode of action for PAHs). When assessing PAH cancer risks for life-stages under 16 years of age, or for lifetime exposures that include early-life exposures, the RPF values should be applied with specific exposure information to the benzo[a]pyrene cancer risk estimates including adjustment for early-life susceptibility, through the application of age-dependent adjustment factors (ADAFs).

A description of uncertainties and limitations is crucial to interpretation of the RPF approach for PAH mixtures risk assessment (see Section 8). Many of the general uncertainties related to chemical-specific risk assessment are also applicable to the proposed RPF approach for PAHs (e.g., appropriateness of animal models, low-dose and interspecies extrapolation, variability within the human population). Use of a component-based approach for mixtures risk assessment leads to additional uncertainties related to adequate characterization of the mixture and the potential interactions that may occur between individual components within the mixture (i.e., PAHs and other chemicals). The RPF approach is limited by the small number of PAHs for which there are analytical chemistry and toxicology data, and thus may result in underestimation of actual cancer risks from complex PAH mixtures. There are uncertainties and limitations related to the size and nature of the PAH database, the human relevance of animal data, assumptions regarding mode of action and dose additivity, and cross-route extrapolation. Specific uncertainties that are related to dose-response assessment (i.e., calculation of RPFs) and the selection of single RPF values for each PAH are also discussed in Section 8.

In summary, the current analysis represents a significant improvement upon the previous component-based approaches for PAH mixtures risk assessment. One of the most important

improvements is the consideration of data from a comprehensive review of the scientific literature dating from the 1950s through 2009 on the carcinogenicity and genotoxicity of PAHs. The search identified over 900 individual publications for a target list of 74 PAHs that have been identified in environmental media and for which toxicological data are available. Review of these publications resulted in the identification of more than 600 papers that included carcinogenicity or cancer-related endpoint data on at least one PAH and benzo[a]pyrene tested at the same time. Dose-response data were extracted, and RPFs from individual studies were calculated from over 300 data sets representing 50 individual PAHs. A weight of evidence evaluation was conducted to evaluate the evidence for potential carcinogenicity of 34 of these PAHs; data were inadequate to conduct such an evaluation for the remaining 16 compounds. A final RPF was derived for each PAH based on tumor bioassay data (if available) or cancer-related endpoint data (if no tumor bioassay RPFs were available). Final RPFs were derived for 26 PAHs, significantly increasing the number of PAHs that can be addressed through this approach. Each RPF was assigned a relative confidence rating reflecting the nature of the tumor bioassay or cancer-related endpoint database that was used to derive the final RPF for that PAH.

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1
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3
4

LIST OF ABBREVIATIONS AND ACRONYMS*

1		
2		
3		
4	AEL	acceptable exposure level
5	Ah	aryl hydrocarbon
6	AhR	Ah receptor
7	AhRE_{DNA}	Ah-responsive elements of DNA
8	ARNT	Ah-receptor nuclear translocator
9	ATSDR	Agency for Toxic Substances and Disease Registry
10	AUC	area under the curve
11	BMD	benchmark dose
12	BMR	benchmark response
13	CASRN	Chemical Abstract Service Registry Number
14	CHO	Chinese hamster ovary
15	CYP	cytochrome P450
16	dG	deoxyguanosine
17	EAL	environmental assessment level
18	EOPP	estimated order of potential potency
19	EROD	ethoxyresorufin O-deethylase
20	HPRT	hypoxanthine-guanine phosphoribosyl transferase gene
21	Hsp90	heat shock protein 90
22	IARC	International Agency for Research on Cancer
23	IRIS	Integrated Risk Information System
24	LED	lowest effective dose
25	MGP	manufactured gas plant
26	MVK	Moolgavkar-Venson-Knudsen two-stage model
27	OEHHA	Office of Environmental Health Hazard Assessment, California EPA
28	PAC	polycyclic aromatic compound
29	PAH	polycyclic aromatic hydrocarbon
30	PCR	polymerase chain reaction
31	PEF	potency equivalency factor
32	RTECS	Registry of Toxic Effects of Chemical Substances
33	RPF	relative potency factor
34	RTD	relative tumor dose
35	SMART	somatic mutation and recombination test
36	TK	thymidine kinase locus
37	TIDAL	time-integrated DNA adduct level
38	TEF	toxicity equivalency factor
39	TPA	12-O-tetra-decanoylphorbol-13-acetate
40	U.S. EPA	U.S. Environmental Protection Agency
41	WHO	World Health Organization
42		

* Abbreviations for PAH chemical names are provided in Table 2-1.

44

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1 (7) Characterization of strengths, weaknesses, and uncertainties associated with the
2 recommended approaches.
3
4

5 **2. RATIONALE FOR RECOMMENDING AN RPF APPROACH**

6
7
8 PAHs are a concern as human health hazards, because many PAHs are demonstrated
9 tumorigenic agents in animal bioassays and are active in in vivo or in vitro tests for genotoxicity
10 or DNA damage. PAHs do not occur in the environment as isolated entities; they primarily
11 occur in complex mixtures generated from the combustion or pyrolysis of substances containing
12 carbon and hydrogen. Several complex mixtures of PAHs have been classified as possibly
13 carcinogenic, probably carcinogenic, or carcinogenic to humans (Straif et al., 2005; U.S. EPA,
14 2002; Bostrom et al., 2002; WHO, 1998; ATSDR, 1995; IARC, 1985, 1984a, b, 1983).

15 In concordance with U.S. EPA (2000, 1986) guidance for health risk assessment of
16 chemical mixtures, assessment of the cancer risk from long-term human exposure to a particular
17 PAH mixture would best be conducted with quantitative information on the dose-response
18 relationship for cancer from chronic exposure to the mixture of concern. When data for the
19 mixture of concern are not available, U.S. EPA (2000, 1986) guidance recommends using
20 toxicity data on a “sufficiently similar” mixture. However, quantitative cancer dose-response
21 information exists only for a few complex mixtures generated from the combustion or pyrolysis
22 of organic matter; for example, tobacco smoke, coke oven emissions, and emissions from roofing
23 tar pots (see Bostrom et al., 2002; Albert et al., 1983). U.S. EPA’s IRIS database currently
24 includes assessments for only three PAH-containing mixtures: coke oven emissions, creosote,
25 and diesel emissions. The availability of oral carcinogenicity bioassays of manufactured gas
26 plant (MGP) residue (Weyand et al., 1995) and coal tar preparations (Culp et al., 1998; Gaylor et
27 al., 1998) has expanded the PAH mixture cancer database.

28 Component-based approaches, involving an analysis of the toxicity of components of the
29 mixture, are recommended when appropriate toxicity data on a complex mixture of concern, or
30 on a “sufficiently similar” mixture, are unavailable (U.S. EPA, 2000, 1986). Component-based
31 approaches involving dose addition (such as the RPF approach) are recommended when
32 components in the mixture are judged to act in a toxicologically similar manner. In the RPF
33 approach, doses of component chemicals that act in a toxicologically similar manner are added
34 together, after scaling the doses relative to the potency of an index chemical (U.S. EPA, 2000,
35 1986). Then, using the dose-response curve of the index chemical, the response to the total
36 equivalent dose in the mixture is estimated. The index compound is typically the best-studied
37 member of the class with the largest body of available data describing exposure and health
38 effects. The index chemical should have a quantitative dose-response assessment of acceptable

1 scientific quality and must have (or be expected to have) similar toxic effects to the rest of the
2 members of the class.

3 For chemicals that act independently (e.g., by different modes of action), U.S. EPA
4 guidance (2000, 1986) recommends a component-based approach involving response addition.
5 In this approach, response is defined as the percentage or fraction of exposed individuals that
6 show the effect of concern (i.e., the risk of having the effect). To apply a response-addition
7 approach to a complex mixture, information on the dose-response relationships for the effect of
8 concern from exposure to individual components must be available. Based on an analysis of the
9 amount of each component in the mixture and its dose-response relationship, risks from exposure
10 to the individual components are calculated and added together to estimate the risk for the effect
11 from exposure to the complex mixture.

12 Component-based approaches, either involving dose addition or response addition,
13 include a general assumption that interaction effects at low dose levels either do not occur or are
14 small enough to be neglected (U.S. EPA, 2000, 1986). However, when information on
15 interactions among the components is available, U.S. EPA guidance recommends incorporating
16 this information into the risk assessment, either as a part of a quantitative approach or as a
17 qualitative evaluation.

18 The assessment of cancer risk from chronic oral or inhalation exposure to complex PAH
19 mixtures using component-based approaches is restricted by the limited availability of cancer
20 dose-response data for individual PAHs. Benzo[a]pyrene is the only PAH that has dose-response
21 data for cancer from chronic oral, inhalation or dermal exposure (WHO, 1998; ATSDR, 1995).
22 The IRIS Program developed cancer assessments for 15 PAHs in the early 1990s, but a
23 quantitative cancer assessment was only developed for benzo[a]pyrene. Six other PAHs were
24 qualitatively assessed as B2, probable human carcinogens, but the available data were
25 characterized as inadequate to develop oral or inhalation risk estimates. Thus, data are
26 insufficient to use a component-based approach involving response addition for assessing cancer
27 risks from PAH mixtures. Although a response addition approach does not require an
28 assumption of similar toxicological action, it does require dose-response data for individual
29 components.

30 For exposure situations in which dose-response data for the PAH mixture or a sufficiently
31 similar mixture are not available (e.g., the source of the PAH contamination may be mixed or
32 unknown), there are at least three practical advantages of an RPF approach that uses
33 benzo[a]pyrene as the index PAH:

- 34
- 35 (1) Benzo[a]pyrene is routinely assayed and detected in environmental media contaminated
36 with PAH mixtures;
 - 37
 - 38 (2) Benzo[a]pyrene is the only PAH for which cancer dose-response data involving chronic
39 exposures are available; and

1
2 (3) There is a large database of studies in which the potency of benzo[a]pyrene is compared
3 with the potency of other PAHs in various assays.
4

5 The database includes animal tumorigenicity¹ assays involving dermal or parenteral
6 administration, and in vivo and in vitro assays of cancer-related endpoints (e.g., various
7 genotoxic endpoints). Thus, RPFs for a number of PAHs can be derived.

8 The RPF approach involves two key assumptions: (1) the assumption of similar
9 toxicological action as required by dose addition; and (2) the assumption that interactions among
10 PAH mixture components do not occur at low levels of exposure typically encountered in the
11 environment.

12 Mechanistic studies indicate that the mutagenic and tumor-initiating activity of most
13 carcinogenic PAHs requires metabolic activation to reactive intermediates (e.g., stereospecific
14 dihydrodiol epoxides). For several PAHs, (e.g., benzo[a]pyrene, dibenz[a,h]anthracene,
15 dibenzo[a,l]pyrene) there is evidence that DNA damage associated with metabolism can lead to
16 mutations in cancer-related genes. Tumor promotion and progression by PAHs may involve
17 parent compound binding to the aryl hydrocarbon (Ah) receptor and subsequent alterations of
18 gene expression, as well as by cell proliferation in response to cytotoxic effects from metabolites
19 (see Section 2.4, Similarities in Carcinogenic Mode of Action for PAHs). Thus, there is some
20 evidence that an assumption of similar toxicological action is reasonable, but some aspects of the
21 diversity of biological activities among PAHs are unexplained. The second assumption of no
22 interactions at low levels of exposure may be reasonable, but some evidence of toxicological
23 interactions among PAHs and among PAHs and other chemicals is available (see Section 2.8,
24 Additivity of PAHs in Combined Exposures).

25 Other key limitations to the RPF approach, relative to whole mixture approaches, are:
26 (1) RPFs have been derived for a limited number of PAHs; and (2) cancer risks from non-PAH
27 components, unidentified PAHs, and heterocyclic and substituted PAHs in PAH mixtures are not
28 estimated. The first of these limitations is being addressed, to the degree allowable by available
29 data, by the derivation of RPFs for numerous PAHs as discussed in Sections 4 and 5 of this
30 report. If non-PAH carcinogenic components are identified and quantified in the complex
31 mixture of concern and appropriate dose-response data are available, the second limitation can be
32 addressed by using a response addition approach (i.e., adding the cancer risk from PAH
33 components estimated by the RPF approach to cancer risks estimated for the non-PAH
34 carcinogenic components of the mixture). Previous efforts to validate the RPF approach using
35 data for PAH mixtures are discussed in Section 6.7. These validation efforts compared the
36 cancer risk of a PAH mixture measured experimentally with the cancer risk that was predicted
37 using the RPF method but were limited by the small number of compounds for which RPFs and

¹Throughout this report, the term “tumorigenicity” is used to describe the production of either benign or malignant tumors.

1 analytical data were available (Muller et al., 1997; McClure, 1996; Goldstein et al., 1994;
2 Clement Associates, 1990, 1988; Krewski et al., 1989). Validation of the updated approach
3 presented here would be of value, either using previous data on PAH mixtures (human and
4 animal) or using new data collected with the main purpose of evaluating the validity of the
5 approach.

7 **2.1. PAHs AS A CHEMICAL CLASS**

8 The PAH chemical class has been variously defined to include organic compounds
9 containing either two or more, or three or more, fused rings made up of carbon and hydrogen
10 atoms (i.e., unsubstituted parent PAHs and their alkyl-substituted derivatives) (WHO, 1998).
11 Most PAHs are high-melting, high-boiling point, lipophilic compounds, predominately generated
12 from the combustion or pyrolysis of organic matter. The PAH chemical class includes alkylated
13 PAHs (e.g., 1,4-dimethylphenanthrene and 5-methylchrysene), but not heterocyclic compounds
14 containing N, S, or O or PAHs substituted with N-, S-, or O-containing groups; these are
15 included in a larger chemical class, often referred to as polycyclic aromatic compounds (PACs)
16 (WHO, 1998). The number of chemicals that comprise the PAHs class is unknown; however,
17 there are thought to be hundreds of individual PAHs present as components of complex mixtures
18 (WHO, 1998). The analysis presented here is limited in focus to include only unsubstituted
19 PAHs with three or more fused aromatic rings containing only carbon and hydrogen atoms,
20 because these are the most widely studied members of the PAH chemical class. Naphthalene is a
21 widely studied 2-ring PAH compound; however, a separate toxicological review and
22 carcinogenicity assessment is being developed by the IRIS Program for this compound and it is
23 not included in this RPF approach. The list of PAH compounds that were considered for
24 inclusion in this analysis is presented in Table 2-1 along with the Chemical Abstracts Service
25 Registry Numbers (CASRN) and the abbreviations that are utilized in tables throughout the
26 report.

Table 2-1. PAHs evaluated in the RPF analysis

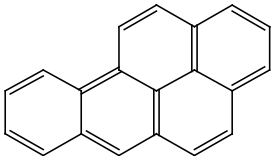
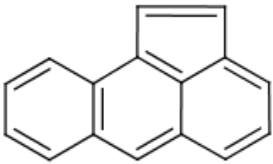
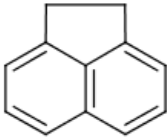
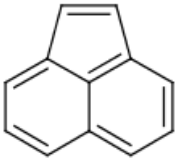
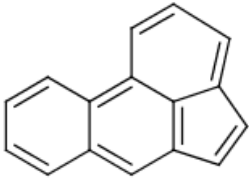
PAH (common synonyms)	CASRN	Abbreviation	Structure	Molecular weight (g/mol)
Benzo[a]pyrene	50-32-8	BaP		252.31
Aceanthrylene	202-03-09	ACEA		202.26
Acenaphthene	83-32-9	AN		154.21
Acenaphthylene	208-96-8	ANL		152.20
Acephenanthrylene	201-06-9	APA		202.26

Table 2-1. PAHs evaluated in the RPF analysis

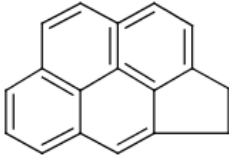
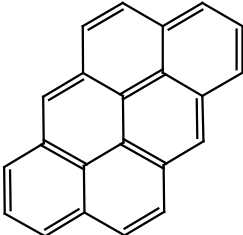
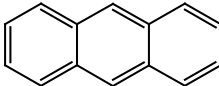
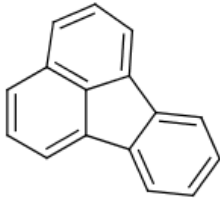
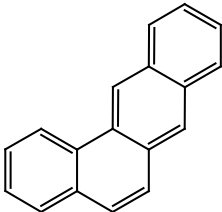
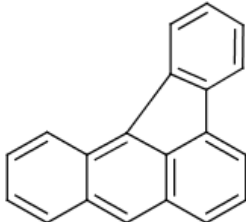
PAH (common synonyms)	CASRN	Abbreviation	Structure	Molecular weight (g/mol)
Acepyrene, 2,3-	25732-74-5	ACEP		228.29
Anthanthrene	191-26-4	AA		276.34
Anthracene	120-12-7	AC		178.23
Benzacenaphthylene	76774-50-0	BAN		202.26
Benz[a]anthracene	56-55-3	BaA		228.29
Benzo[a]fluoranthene	203-33-8	BaF		252.32

Table 2-1. PAHs evaluated in the RPF analysis

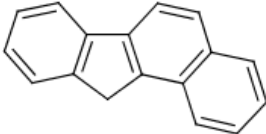
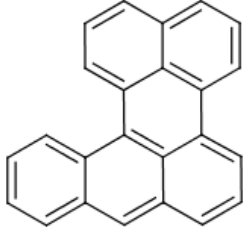
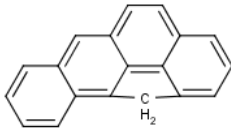
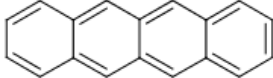
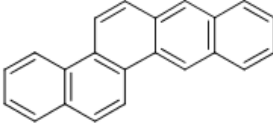
PAH (common synonyms)	CASRN	Abbreviation	Structure	Molecular weight (g/mol)
Benzo[a]fluorene	238-84-6	BaFE		216.28
Benzo[a]perylene	191-85-5	BaPery		302.38
Benz[b]aceanthrylene, 11H-	202-94-8	BbcAC		240.30
Benz[b]anthracene (Naphthacene)	92-24-0	BbA		228.29
Benzo[b]chrysene	214-17-5	BbC		278.35

Table 2-1. PAHs evaluated in the RPF analysis

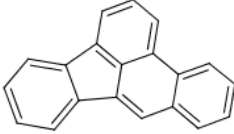
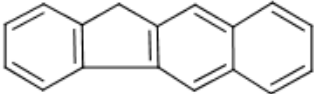
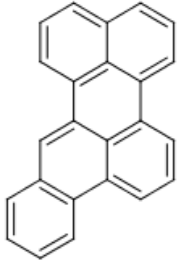
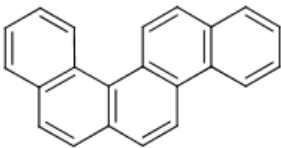
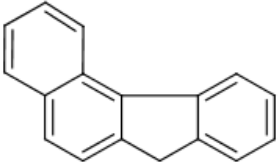
PAH (common synonyms)	CASRN	Abbreviation	Structure	Molecular weight (g/mol)
Benzo[b]fluoranthene	205-99-2	BbF		252.32
Benzo[b]fluorene, 11H	243-17-4	BbFE		216.28
Benzo[b]perylene	197-70-6	BbPery		302.38
Benzo[c]chrysene	194-69-4	BcC		278.35
Benzo[c]fluorene	205-12-9	BcFE		216.28

Table 2-1. PAHs evaluated in the RPF analysis

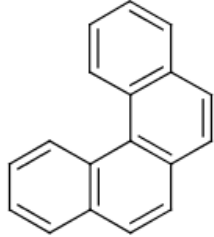
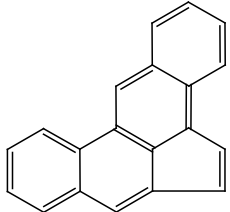
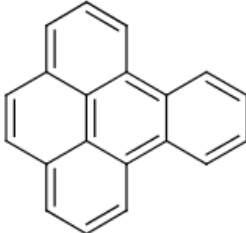
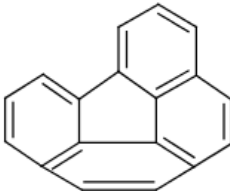
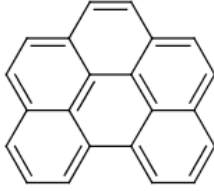
PAH (common synonyms)	CASRN	Abbreviation	Structure	Molecular weight (g/mol)
Benzo[c]phenanthrene	195-19-7	BcPH		228.29
Benz[e]aceanthrylene	199-54-2	BeAC		252.32
Benzo[e]pyrene	192-97-2	BeP		252.32
Benzo[g,h,i]fluoranthene	203-12-3	BghiF		226.28
Benzo[g,h,i]perylene	191-24-2	BghiP		276.34

Table 2-1. PAHs evaluated in the RPF analysis

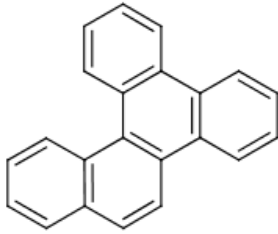
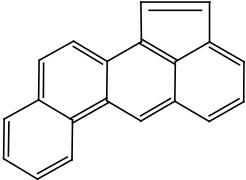
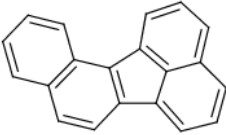
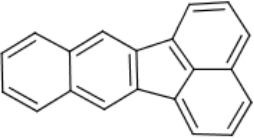
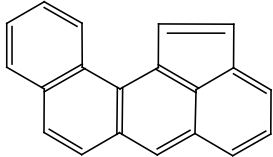
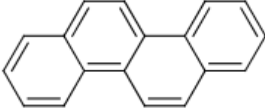
PAH (common synonyms)	CASRN	Abbreviation	Structure	Molecular weight (g/mol)
Benzo[g]chrysene	196-78-1	BgC		278.35
Benzo[j]aceanthrylene	202-33-5	BjAC		252.32
Benzo[j]fluoranthene	205-82-3	BjF		252.32
Benzo[k]fluoranthene	207-08-9	BkF		252.32
Benzo[l]aceanthrylene	211-91-6	BIAC		252.32
Benzophenanthrene	65777-08-4	BPH		228.29

Table 2-1. PAHs evaluated in the RPF analysis

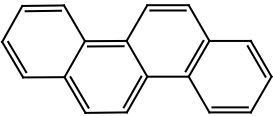
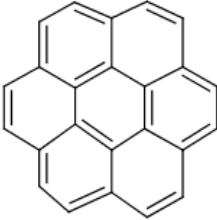
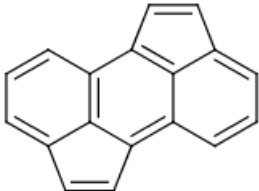
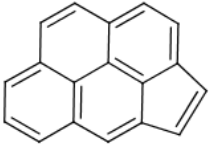
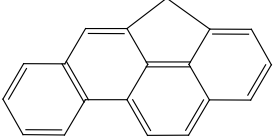
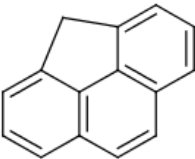
PAH (common synonyms)	CASRN	Abbreviation	Structure	Molecular weight (g/mol)
Chrysene	218-01-9	CH		228.29
Coronene	191-07-1	CO		300.36
Cyclopent[h,i]aceanthrylene	131581-33-4	CPhiACEA		226.28
Cyclopenta[c,d]pyrene	27208-37-3	CPcdP		226.28
Cyclopenta[d,e,f]chrysene, 4H-	202-98-2	CPdefC		240.30
Cyclopenta[d,e,f]phenanthrene	203-64-5	CPdefPH		190.24

Table 2-1. PAHs evaluated in the RPF analysis

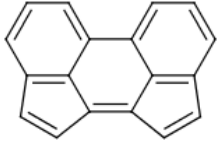
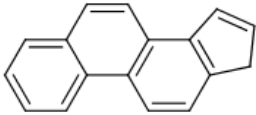
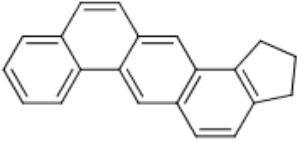
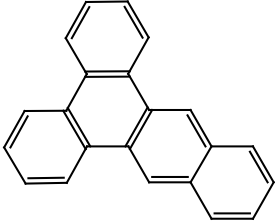
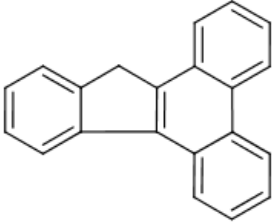
PAH (common synonyms)	CASRN	Abbreviation	Structure	Molecular weight (g/mol)
Cyclopenta[h,i]acephenanthrylene	114959-37-4	CPhiAPA		226.28
Cyclopentaphenanthrene	219-08-9	CPPH		216.28
Cyclopenteno-1,2-benzanthracene, 5,6-	7099-43-6	CPBA		268.36
Dibenz[a,c]anthracene (Benzotriphenylene)	215-58-7	DBacA		278.35
Dibenzo[a,c]fluorene, 13H-	201-65-0	DBacFE		266.34

Table 2-1. PAHs evaluated in the RPF analysis

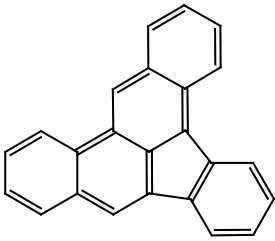
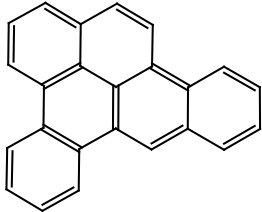
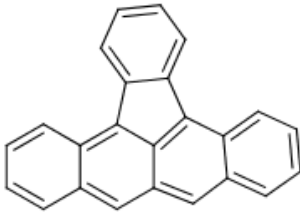
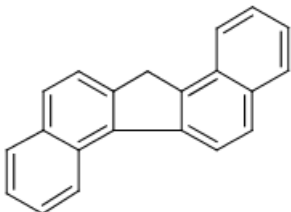
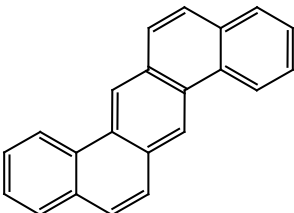
PAH (common synonyms)	CASRN	Abbreviation	Structure	Molecular weight (g/mol)
Dibenzo[a,e]fluoranthene	5385-75-1	DBaeF		302.38
Dibenzo[a,e]pyrene	192-65-4	DBaeP		302.38
Dibenzo[a,f]fluoranthene (Indeno[1,2,3-fg]naphthacene)	203-11-2	DBafF		302.38
Dibenzo[a,g]fluorene, 13H-	207-83-0	DBagFE		266.34
Dibenz[a,h]anthracene	53-70-3	DBahA		278.35

Table 2-1. PAHs evaluated in the RPF analysis

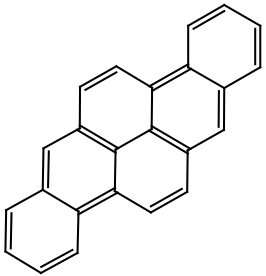
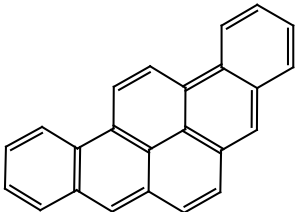
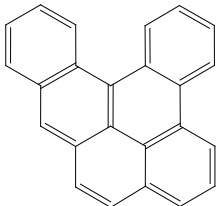
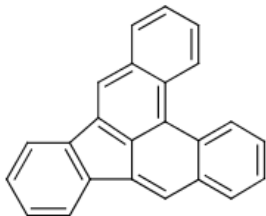
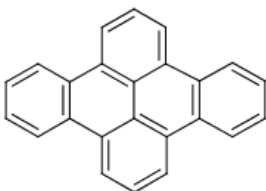
PAH (common synonyms)	CASRN	Abbreviation	Structure	Molecular weight (g/mol)
Dibenzo[a,h]pyrene	189-64-0	DBahP		302.38
Dibenzo[a,i]pyrene	189-55-9	DBaiP		302.38
Dibenzo[a,l]pyrene	191-30-0	DBalP		302.38
Dibenzo[b,e]fluoranthene	2997-45-7	DBbeF		302.38
Dibenzo[e,l]pyrene (Dibenzo[fg,op]naphthacene)	192-51-8	DBelP		302.38

Table 2-1. PAHs evaluated in the RPF analysis

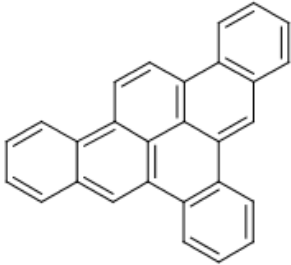
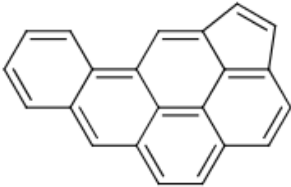
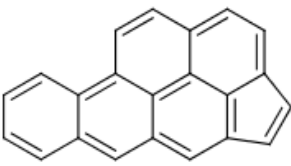
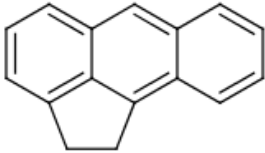
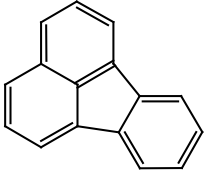
PAH (common synonyms)	CASRN	Abbreviation	Structure	Molecular weight (g/mol)
Dibenzo[h,rst]pentaphene	192-47-2	DBhrstPent		352.43
Dibenz[j,mno]acephenanthrylene	153043-82-4	DBjmnoAPH		276.34
Dibenz[k,mno]acephenanthrylene	153043-81-3	DBkmnoAPH		276.34
Dihydroaceanthrylene, 1,2-	641-48-5	DACEA		204.27
Fluoranthene	206-44-0	FA		202.26

Table 2-1. PAHs evaluated in the RPF analysis

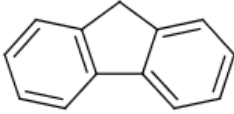
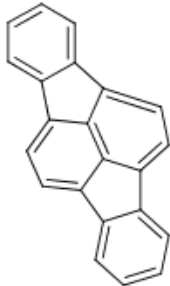
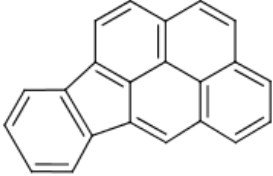
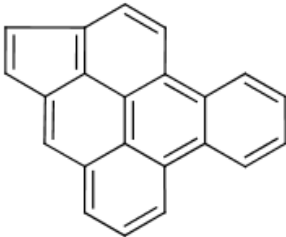
PAH (common synonyms)	CASRN	Abbreviation	Structure	Molecular weight (g/mol)
Fluorene	86-73-7	FE		166.22
Indeno [1,2,3-c,d] fluoranthene	193-43-1	IF		276.34
Indeno[1,2,3-c,d]pyrene	193-39-5	IP		276.34
Naphth[1,2,3-mno]acephenanthrylene	113779-16-1	N123mnoAPH		276.34

Table 2-1. PAHs evaluated in the RPF analysis

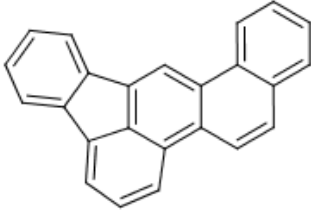
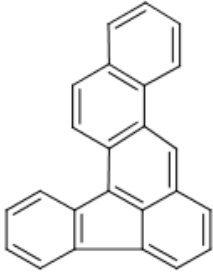
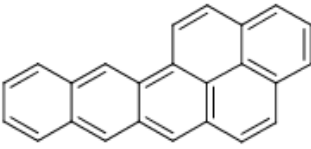
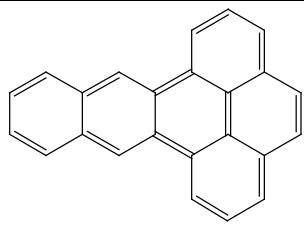
PAH (common synonyms)	CASRN	Abbreviation	Structure	Molecular weight (g/mol)
Naphtho[1,2-b]fluoranthene	111189-32-3	N12bF		302.38
Naphtho[2,1-a]fluoranthene	203-20-3	N21aF		302.38
Naphtho[2,3-a]pyrene (Naphtho[2,1,8-qr]naphthacene)	196-42-9	N23aP		302.38
Naphtho[2,3-e]pyrene (Dibenzo[de,qr]naphthacene)	193-09-9	N23eP		302.38

Table 2-1. PAHs evaluated in the RPF analysis

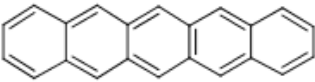
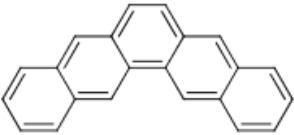
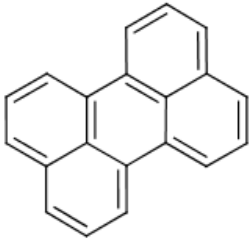
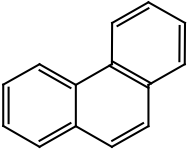
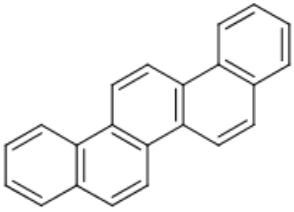
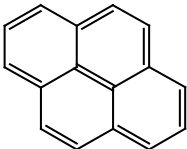
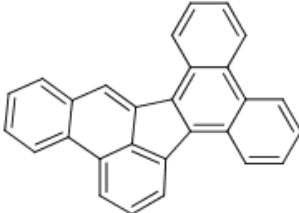
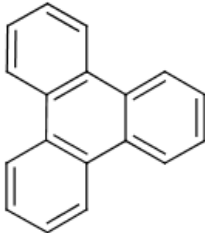
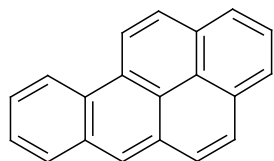
PAH (common synonyms)	CASRN	Abbreviation	Structure	Molecular weight (g/mol)
Pentacene	135-48-8	PCE		278.35
Pentaphene (Dibenzphenanthrene, 2,3:6,7-)	222-93-5	Pent		278.35
Perylene	198-55-0	Pery		252.32
Phenanthrene	85-01-8	PH		178.23
Picene	213-46-7	Pic		278.35

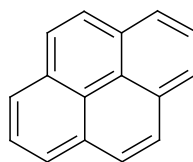
Table 2-1. PAHs evaluated in the RPF analysis

PAH (common synonyms)	CASRN	Abbreviation	Structure	Molecular weight (g/mol)
Pyrene	129-00-0	Pyr		202.26
Tribenzofluoranthene 3,4-10, 11-12,13-	13579-05-0	TBF		352.43
Triphenylene	217-59-4	Tphen		228.29

1
2 Unsubstituted PAHs have been further classified into alternant and nonalternant
3 compounds. Alternant PAHs are those compounds composed solely of fused benzene rings,
4 while nonalternant PAHs contain both benzene and five carbon rings. Among alternant PAHs,
5 important structural features related to enhanced mutagenicity and carcinogenicity include the
6 presence of at least four rings (Bostrom et al., 2002). Common structural features of PAH
7 compounds are illustrated in Figure 2-1.

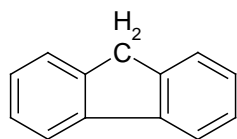


Benzo[a]pyrene

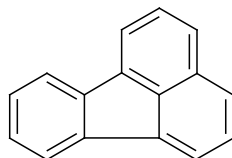


Pyrene

Examples of Alternant PAHs

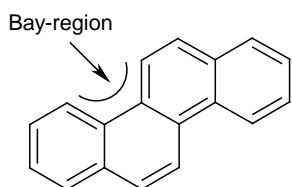


Fluorene

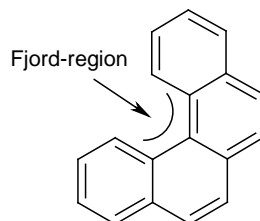


Fluoranthene

Examples of Nonalternant PAHs



Chrysene



Benzo[c]phenanthrene

Bay-region and Fjord-regions of PAHs

1
2 **Figure 2-1. Structural features of PAHs.**
3

4 **2.2. THE TOXICOLOGICAL DATABASE FOR PAHs**

5 Over the last 30- to 50-years, a large PAH database has been generated including studies
6 of carcinogenicity in animal bioassays, genotoxicity in various test systems, and metabolism
7 (bioactivation) to tumorigenic and/or genotoxic intermediates. Carcinogenicity and genotoxicity
8 data are sufficient to classify a number of individual PAHs as possibly carcinogenic to humans
9 (WHO, 1998; U.S. EPA, 1993; IARC, 1989, 1986, 1985, 1984a, b, 1983). Other PAHs have
10 been tested for tumorigenicity and/or genotoxicity, but either negative or equivocal results were
11 obtained; for many positive results were only observed in genotoxicity assays (e.g., pyrene).
12 Many studies have been performed to provide further understanding about the carcinogenic
13 mode of action of PAHs (see Bostrom et al., 2002; WHO, 1998; ATSDR, 1995). Therefore, the
14 PAH database contains studies that evaluate:
15

- 1 • Metabolism to reactive intermediates;
- 2
- 3 • Characterization of PAH-DNA adducts;
- 4
- 5 • Mutagenicity of PAHs in bacterial and mammalian cells;
- 6
- 7 • Mutation spectra in identified oncogene and tumor suppressor genes;
- 8
- 9 • Clastogenic effects;
- 10
- 11 • Cell transformation; and
- 12
- 13 • Initiation and promotion of carcinogenicity.
- 14

15 A significant limitation to the database is the lack of data from long-term oral or
16 inhalation cancer studies for most individual PAH compounds. In addition, benzo[a]pyrene is
17 the only chemical for which long-term animal studies have been conducted by multiple exposure
18 routes (Kroese et al., 2001; Culp et al., 1998, 1996a, b; Thyssen et al., 1981, 1980; Rigdon et al.,
19 1969; Rigdon and Neal, 1969, 1966; Neal and Rigdon, 1967). Furthermore, most of the
20 toxicological data available for PAHs relate to cancer or genotoxicity. Available information on
21 the systemic, noncarcinogenic effects of PAHs is limited although immunological, neurotoxic,
22 and developmental effects have been noted in animal studies (for earlier reviews see WHO,
23 1998; ATSDR, 1995). As a result, the relative potency methodology described here is applied
24 only to cancer risk assessment for PAHs.

26 **2.3. BENZO[A]PYRENE AS AN INDEX CHEMICAL**

27 Because long-term animal studies are not available for many individual PAHs, it is
28 necessary to choose an appropriate index chemical for comparison of relative carcinogenic
29 potency. The index compound is typically the best-studied member of the class, with the largest
30 body of available data describing exposure and health effects. The index chemical should have a
31 quantitative dose-response assessment of acceptable scientific quality and must have (or be
32 expected to have) similar toxic effects to the rest of the members of the class.

33 Although the PAH composition of complex mixtures varies, benzo[a]pyrene is
34 considered to be present in significant amounts in certain occupational environments and urban
35 settings (WHO, 1998; Petry et al., 1996; ATSDR, 1995). Benzo[a]pyrene is one of the most
36 potent of the carcinogenic PAHs and has, therefore, been proposed to contribute significantly to
37 the carcinogenicity of a PAH mixture, even when present in low concentrations (Petry, 1996).
38 Benzo[a]pyrene is also the best-studied PAH compound, with carcinogenicity bioassay data

1 available for several routes of exposure and a considerable number of studies on carcinogenic
2 mode of action.

3 The laboratory animal database for benzo[a]pyrene is robust. Benzo[a]pyrene has been
4 shown to induce tumors at the site of administration and at distal sites in numerous studies.
5 Dose-response data for tumors are available for the oral, inhalation, and dermal routes of
6 administration in multiple species. There are methodological limitations associated with the
7 inhalation data (Thyssen et al., 1981), although positive findings in intratracheal instillation
8 studies support the observed positive response. Limited dermal exposure studies with several
9 strains of mice also provide data on dose-related tumor incidences (Albert et al., 1991;
10 Warshawsky and Barkley, 1987; Habs et al., 1984, 1980; Nesnow et al., 1983; Wynder et al.,
11 1957).

12 The animal carcinogenicity database for benzo[a]pyrene includes several well-conducted
13 oral cancer bioassays. Kroese et al. (2001) conducted a well-designed gavage study of
14 benzo[a]pyrene carcinogenicity and found that benzo[a]pyrene induced tumors at multiple sites
15 in rats of both sexes, specifically in the liver, forestomach, auditory canal, and oral cavity. In
16 another well-conducted study, using Ah-responsive B6C3F₁ female mice exposed in the diet
17 (Beland and Culp, 1998; Culp et al., 1998), only portal-of-entry tumors were found, including
18 papillomas and/or carcinomas of the forestomach, esophagus, tongue, and larynx. Earlier, Neal
19 and Rigdon conducted a number of related studies evaluating the carcinogenicity of
20 benzo[a]pyrene in feed in Ah-responsive white Swiss mice (Rigdon and Neal, 1969, 1966; Neal
21 and Rigdon, 1967). These latter studies were not conducted using standard, modern
22 toxicological methods and have limitations, including: inconsistent dosing protocols; varying
23 ages of the animals; use of benzene as a solvent; small numbers of animals; and evaluation of
24 only a limited number of tissues. However, the Neal and Rigdon studies provide useful dose-
25 response information on benzo[a]pyrene carcinogenicity. Following oral administration via
26 feeding of benzo[a]pyrene, site-of-contact tumors, both papillomas and carcinomas, were
27 induced in the forestomach, esophagus, and larynx of mice (Culp et al., 1998; Neal and Rigdon,
28 1967) and rats (Brune et al., 1981). The results following inhalation, dermal, or oral exposure
29 are further supported by numerous mechanistic studies or assays using infant mice, susceptible
30 transgenic strains, or Ah-receptor knockout mice.

31 Benzo[a]pyrene is a complete carcinogen and likely acts by initiating tumors through
32 direct DNA damage as well as by promoting tumor growth. Benzo[a]pyrene has been shown to
33 be mutagenic in multiple assay systems. Several modes of carcinogenic action are possible.
34 These include:

- 35
36 (1) Alteration of pathways regulating cell proliferation and survival (Tannheimer et al.,
37 1998);
38

- 1 (2) Inhibition of intracellular communication (Sharovskaia et al., 2003; Blaha et al., 2002;
2 Rummel et al., 1999);
- 3
- 4 (3) Altered intracellular Ca²⁺ signaling (Tannheimer et al., 1998);
- 5
- 6 (4) Modulation of cell survival, cell proliferation, and altered growth via generation of
7 oxidative stress and activation of oxidant stress signaling (Burdick et al., 2003; Miller
8 and Ramos, 2001);
- 9
- 10 (5) Altered apoptosis processes (Chen et al., 2003);
- 11
- 12 (6) Dysregulation of normal circulating hormone levels or activity affecting tumorigenesis in
13 reproductive tissues (Safe and Wormke, 2003; Archibong et al., 2002) or the central
14 nervous system (Dasgupta and Lahiri, 1992);
- 15
- 16 (7) Disruption of cell cycle kinetics in breast cancer cells (Jeffy et al., 2002, 2000); and
- 17
- 18 (8) Disruption of DNA repair through alteration of RNA polymerase activity (Shah and
19 Bhattacharya, 1989).
- 20

21 Oral (dietary) carcinogenicity bioassays are available that compare manufactured gas
22 plant (MGP) residue (Weyand et al., 1995) or coal tar preparations (Culp et al., 1998; Gaylor et
23 al., 1998) with benzo[a]pyrene. In both cases, there were significant differences in target organ
24 distribution of tumors between benzo[a]pyrene and complex mixtures of PAHs. Following
25 dietary administration, benzo[a]pyrene-induced tumors were observed primarily at the point of
26 contact (i.e., the forestomach), while MGP residue and coal tar produced tumors in the lung,
27 liver, forestomach, skin, and other organs. Tissue-specific differences in metabolic activation
28 and DNA binding of PAHs may contribute to the observed differences in target organ sensitivity
29 (Weyand and Wu, 1995; Culp and Beland, 1994). A recent gavage study in rats (Kroese et al.,
30 2001) demonstrated that oral exposure to benzo[a]pyrene could induce tumors at distal sites (i.e.,
31 liver, auditory canal); however, no lung tumors were observed. The lung appears to be a
32 sensitive target organ for complex mixture carcinogenicity, but is insensitive to benzo[a]pyrene-
33 induced tumorigenicity via oral and dermal exposures. The existing data limitations for other
34 PAHs, however, necessitate the use of benzo[a]pyrene as the only appropriate index chemical for
35 PAHs.

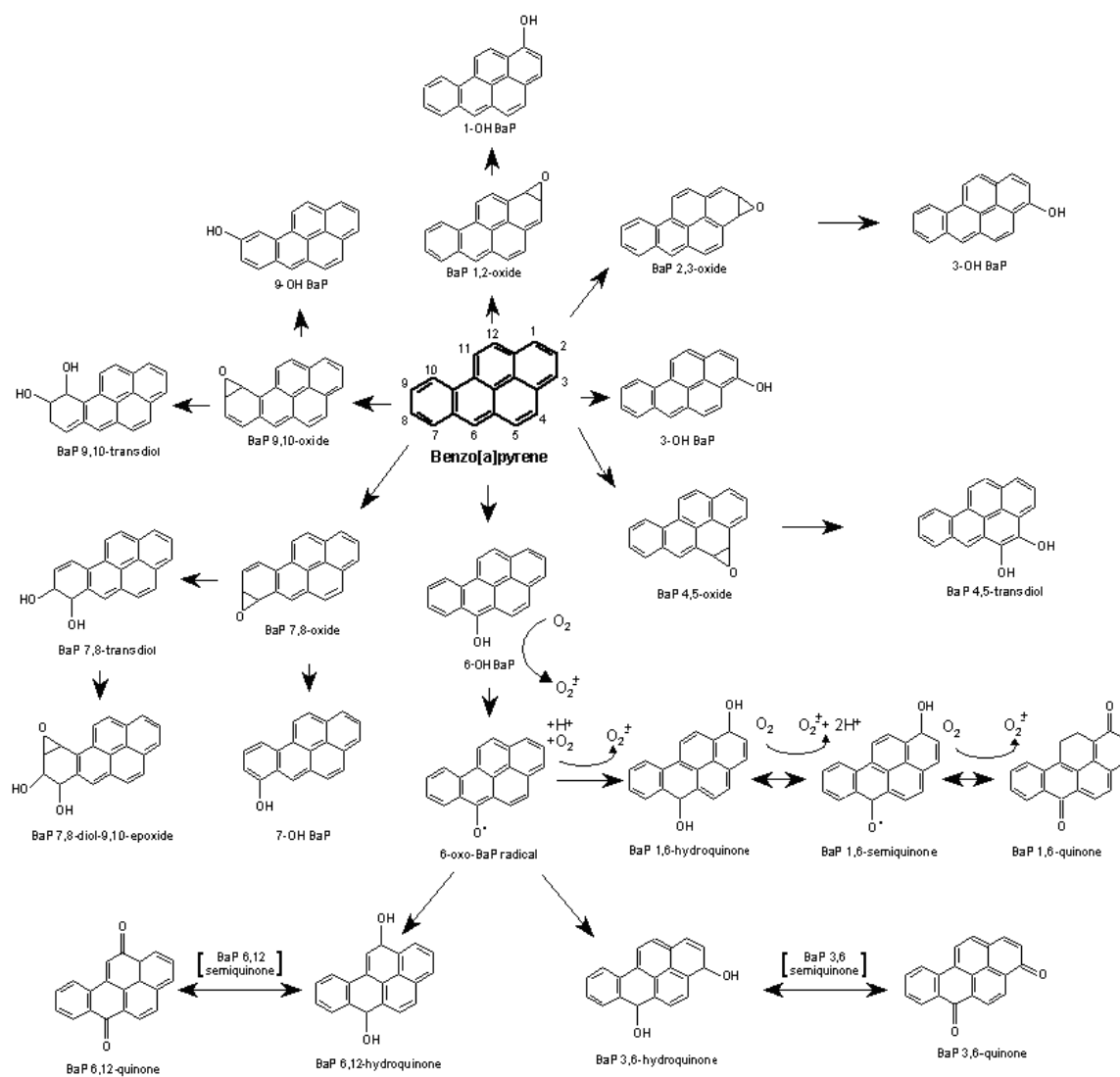
36 In summary, benzo[a]pyrene is the most appropriate compound to use as an index
37 chemical for carcinogenic PAHs. It is well-studied, with a robust database of both bioassay data
38 and mode of action information. Benzo[a]pyrene is a complete carcinogen with both initiating
39 and promoting properties, is among the most potent PAH carcinogens, and is prevalent in many
40 complex environmental mixtures. No alternative index chemical was identified from the list of
41 target PAHs.

1 **2.4. SIMILARITIES IN MODE OF CARCINOGENIC ACTION FOR PAHs**

2 A common mode of action for chemicals is the basis for the assumption of dose additivity
3 that underlies the RPF approach (U.S. EPA, 1990). The carcinogenic mode of action for PAHs
4 has been extensively reviewed (Ramesh, 2004; CCME, 2003; Bostrom et al., 2002; Larsen and
5 Larsen, 1998; WHO, 1998; Muller et al., 1997; Sjogren et al., 1996; ATSDR, 1995; Malcolm
6 and Dobson, 1994; U.S. EPA, 1990). The major key events that have been associated with PAH
7 carcinogenicity include:

- 8
- 9 • Oxidative metabolism to reactive intermediates that covalently bind to DNA, RNA, and
10 proteins (benzo[a]pyrene metabolism is illustrated in Figure 2-2);
 - 11
 - 12 • Formation of DNA adducts;
 - 13
 - 14 • Tumor initiation due to mutations in cancer-related genes (e.g., tumor suppressor genes
15 or oncogenes); and
 - 16
 - 17 • Tumor promotion related to cytotoxicity and formation of reactive oxygen species, and
18 Ah receptor (AhR) affinity and upregulation of genes related to biotransformation,
19 growth, and differentiation.
 - 20

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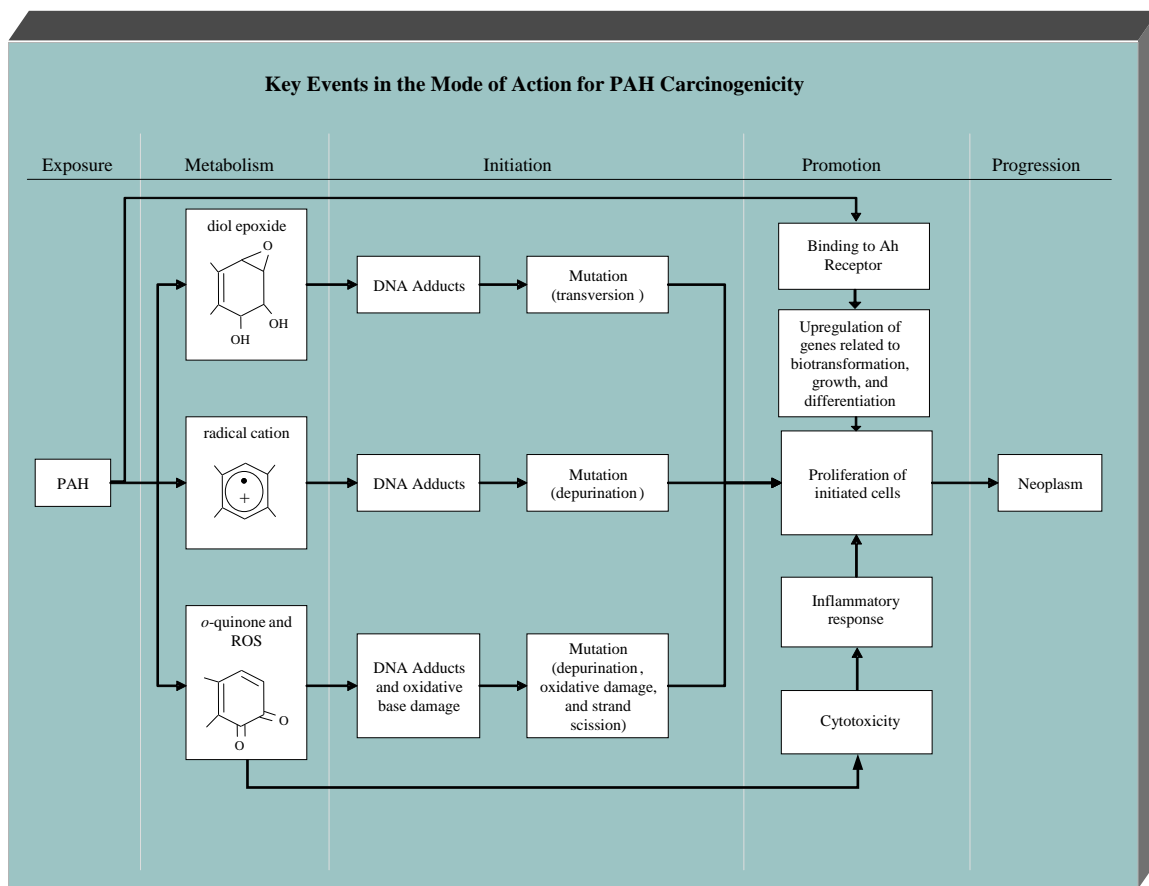
Source: Miller and Ramos (2001).

Figure 2-2. Metabolic pathways for benzo[a]pyrene.

1 *Formation of reactive intermediates and DNA adducts*

2 Each of the key events identified above is affected by the chemical structure of the
3 individual PAH. At least three distinct molecular mechanisms have been proposed to explain the
4 tumor initiation process of PAHs (Xu et al., 2009; Jiang et al., 2007, 2005; Xue and
5 Warshawsky, 2005; Bolton et al., 2000; Penning et al., 1999; Harvey, 1996; Cavalieri and
6 Rogan, 1995). These modes of action include the formation of diol epoxides, radical cations,
7 and o-quinones (Figure 2-3). Diol epoxide formation leads to stable and unstable DNA adducts,
8 mainly at guanine and adenine, which can lead to mutations in proto-oncogenes and tumor-
9 suppressor genes. Radical cation formation may lead to the generation of unstable adducts at
10 guanine and adenine, leading to apurinic sites and mutation in *HRAS*. Orthoquinone formation
11 could lead to stable and unstable DNA adducts and generation of reactive oxygen species,
12 inducing mutations in P53. The evidence supporting the role of these reactive metabolites in
13 tumor initiation includes a characterization of the specific DNA adducts arising from PAH
14 metabolism and observations of mutagenesis resulting from direct exposure. Figure 2-3
15 illustrates the proposed key steps in the mode of action for PAH carcinogenesis. These include
16 the interaction of reactive metabolites with DNA to form adducts, induction of depurination,
17 transversion mutations (e.g., GC→TA or AT→TA), and oxidative damage to DNA, and tumor
18 promotion mediated by AhR-mediated effects on gene regulation.

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Figure 2-3. Overview of the proposed key events in the mode of action for PAH carcinogenicity.

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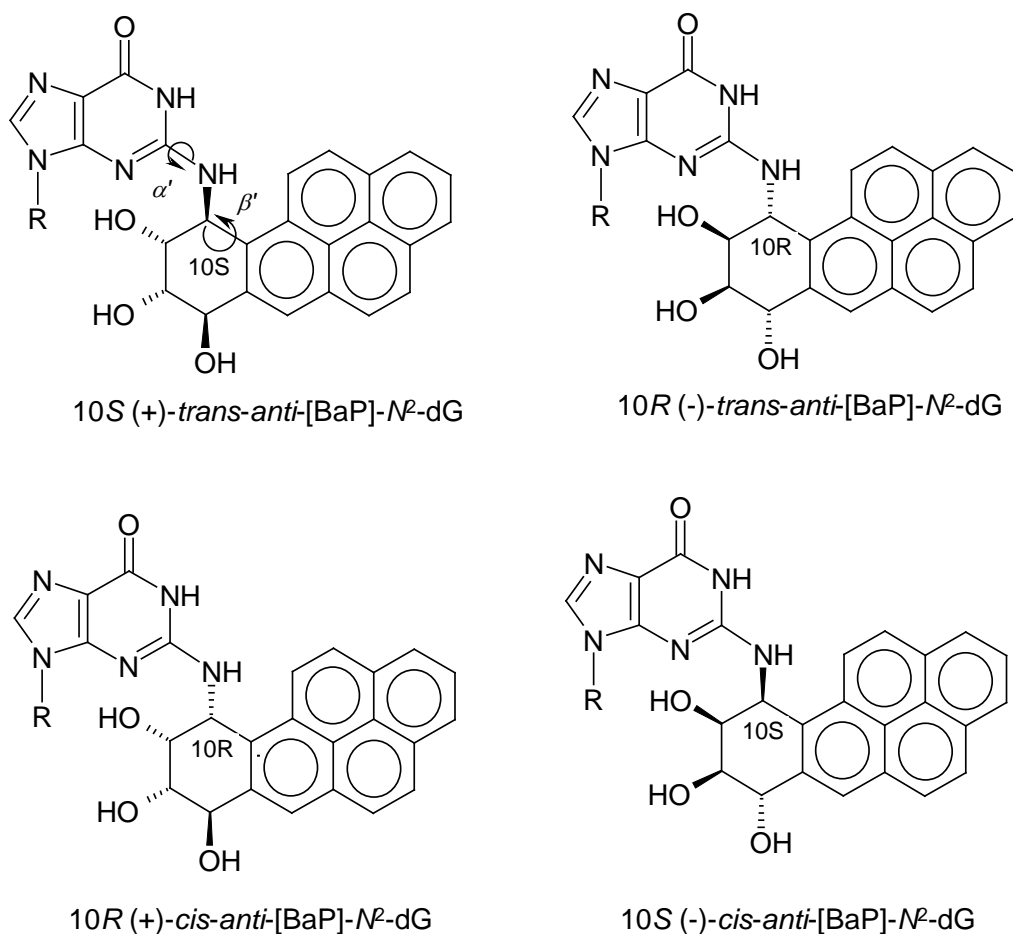
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21

The formation of diol epoxides is a proposed key step in the most established mode of action for PAH-induced carcinogenicity. Extensive studies of the metabolism of carcinogenic PAHs suggest that bay-region and fjord-region diol epoxides are some of the ultimate reactive metabolites of PAHs (Jerina et al., 1978; Jerina and Lehr, 1977). These metabolites are generally formed through cytochrome P450 (CYP) oxidation to form epoxides and epoxide hydrolase cleavage resulting in diol formation. CYP1A1 appears to be the primary isozyme involved in diol epoxide formation; however, other isozymes may also contribute to PAH metabolism (i.e., CYP1A2, CYP1B1, CYP3A4) (Bostrom et al., 2002; ATSDR, 1995). Non-alternant PAHs, composed of fused benzenoid and five-membered rings, may be metabolized through other pathways resulting in the formation of reactive intermediates that bind to DNA. Classic bay- and fjord-region diol epoxides may be formed from these compounds; however, epoxide formation at cyclopenta-ring structures has also been demonstrated to result in DNA adduct formation (Bostrom et al., 2002).

Many studies have been performed to evaluate the formation of DNA adducts following in vivo or in vitro exposure to PAHs. Diol epoxide metabolites interact preferentially with the

1 exocyclic amino groups of deoxyguanine and deoxyadenine (Geacintov et al., 1997; Jerina et al.,
2 1991). Adducts may give rise to mutations, unless these adducts are removed by DNA repair
3 processes prior to replication. The stereochemical nature of the diol epoxide metabolite (i.e.,
4 anti- versus syn-diol epoxides) affects the number and type of adducts and mutation that occurs.
5 Figure 2-4 presents the structures of four stereoisomeric adducts arising from the interaction of
6 benzo[a]pyrene diol epoxide metabolites with the deoxyguanosine (dG) residues in DNA
7 (Geacintov et al., 1997). Transversion mutations (e.g., GC→TA or AT→TA) are the most
8 common type of mutation found in mammalian cells following diol epoxide exposure (Bostrom
9 et al., 2002).



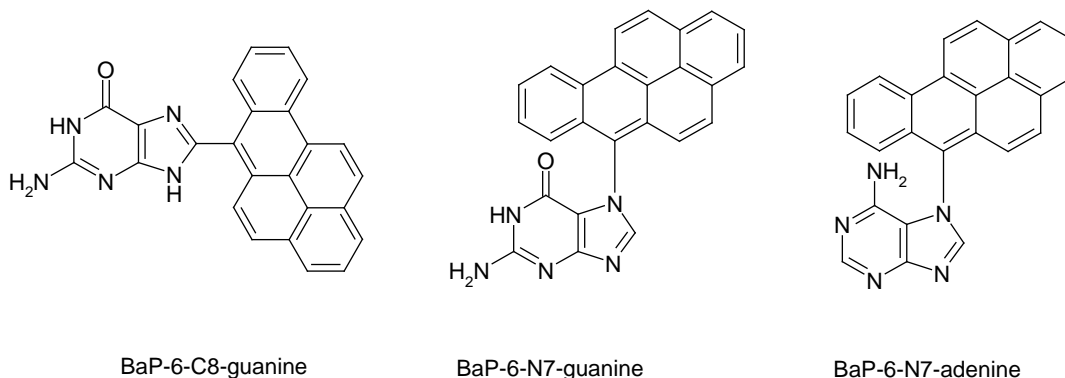
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11 Source: Geacintov et al. (1997).

12
13 **Figure 2-4. Structures of the four stereoisomeric adduct moieties,**
14 ***anti*-[BaP]-N²-dG, derived from the *trans*- or *cis*-covalent binding of**
15 **(+)-*anti*-BaP diol epoxide or (-)-*anti*-BaP diol epoxide to dG residues in DNA.**
16

17 Radical cation formation involves a one-electron oxidation that produces electrophilic
18 radical cation intermediates (Cavalieri and Rogan, 1995, 1992). Oxidation of this type can occur
19 by CYP or peroxidase enzymes (i.e., horseradish peroxidase, prostaglandin H synthetase).

1 Radical cations can be further metabolized to phenols and quinones (Cavalieri et al., 1988a), or
2 they can form unstable adducts with DNA that ultimately result in depurination (Cavalieri et al.,
3 2005, 1993; Rogan et al., 1993). Radical cations have been shown to play a major role in
4 formation of DNA adducts for several carcinogenic PAHs (e.g., 7,12-dimethylbenzanthracene,
5 benzo[a]pyrene, dibenzo[a,l]pyrene). The predominant depurinating adducts occur at the N-3
6 and N-7 positions of adenine and the C-8 and N-7 positions of guanine (Cavalieri and Rogan,
7 1995; Li et al., 1995). Figure 2-5 illustrates three depurinating adducts of benzo[a]pyrene
8 formed by one-electron oxidation. Abasic sites resulting from base depurination undergo error-
9 prone excision repair to induce mutations. In the case of DBaP-treated mouse skin, repair error
10 from abasic sites resulted in H-ras oncogene mutations that underwent rapid clonal expansion
11 and regression (Chakravarti et al., 2000). H-ras mutations in mouse skin papillomas also
12 corresponded to adenine and guanine depurinating adducts resulting from exposure to DBaP,
13 7,12-dimethyl-benz[a]anthracene, benzo[a]pyrene, and benzo[a]pyrene-7,8-dihydrodiol
14 (Chakravarti et al., 2008).

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17 Source. Cavalieri and Rogan (1995).

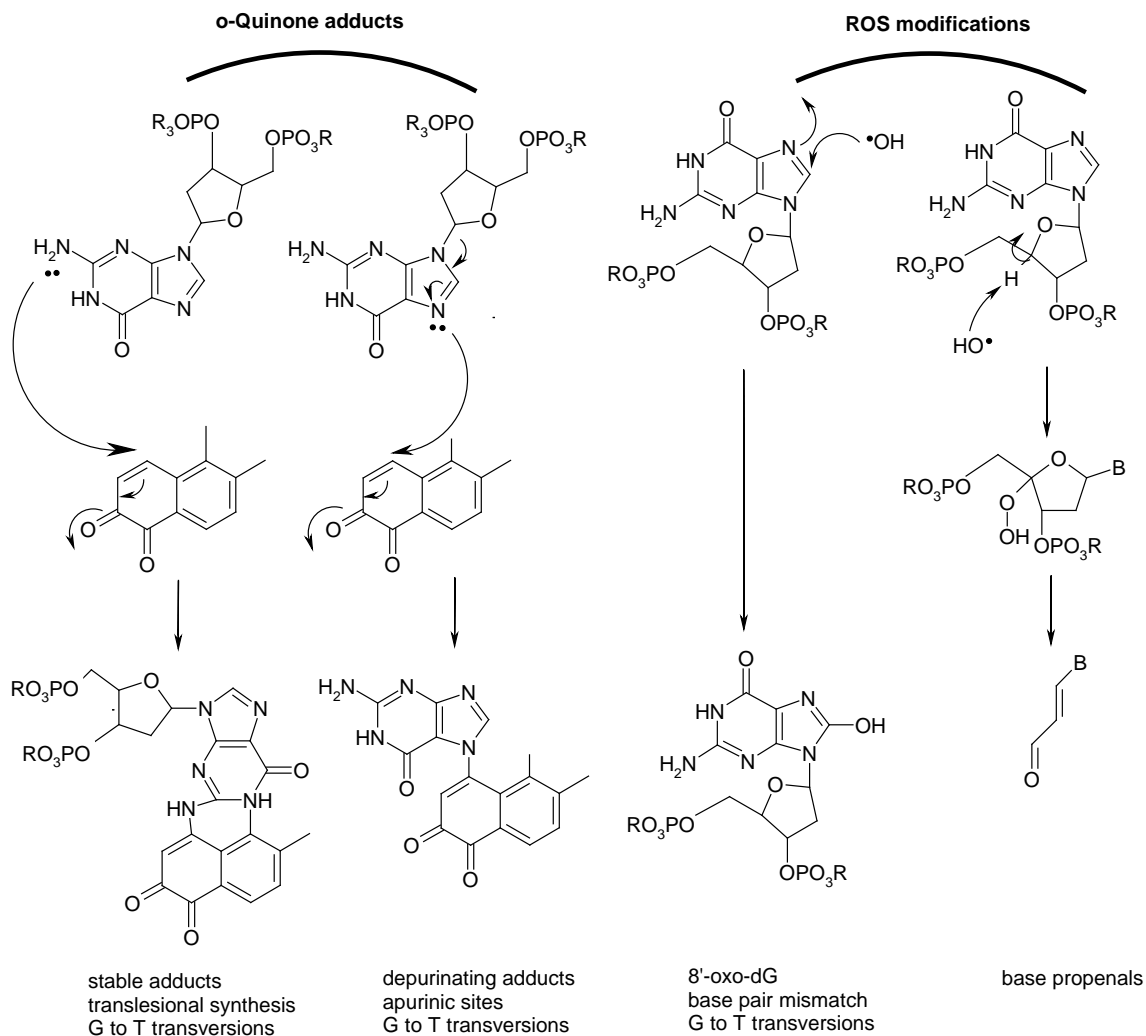
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19 **Figure 2-5. Depurinating adducts of benzo[a]pyrene formed by one-electron**
20 **oxidation.**

21

22 o-Quinone metabolites of PAHs are formed by enzymatic dehydrogenation of
23 dihydrodiols (Bolton et al., 2000; Penning et al., 1999; Harvey, 1996; ATSDR, 1995).
24 Dihydrodiol dehydrogenase enzymes are members of the α -keto reductase gene superfamily.
25 o-Quinone metabolites are potent cytotoxins, are weakly mutagenic, and are capable of
26 producing a broad spectrum of DNA damage. These metabolites can interact directly with DNA
27 and also result in production of reactive oxygen species (i.e., hydroxyl and superoxide radicals)
28 that may produce further cytotoxicity and DNA damage. The DNA damage caused by
29 o-quinones may include the formation of stable adducts (Balu et al., 2006), N-7 depurinating
30 adducts (McCoull et al., 1999), oxidative base damage (i.e., 8-oxo-2'-dG or 8-oxo-dG) (Park et

1 al., 2006, 2005), and strand scission (Flowers-Geary et al., 1997). The reactive oxygen species
 2 generated by the o-quinone of benzo[a]pyrene and other PAH o-quinones have been shown to
 3 induce mutation in the p53 tumor suppressor gene (Park et al., 2008; Shen et al., 2006; Yu et al.,
 4 2002). Figure 2-6 illustrates the spectrum of DNA adducts associated with PAH o-quinones.
 5



6
 7 Source: Bolton et al. (2000).
 8

9 **Figure 2-6. Spectrum of DNA adducts anticipated with PAH o-quinones.**
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11 The cytotoxicity of o-quinone metabolites may also contribute to tumor promotion via
 12 inflammatory responses leading to cell proliferation (Burdick et al., 2003).
 13

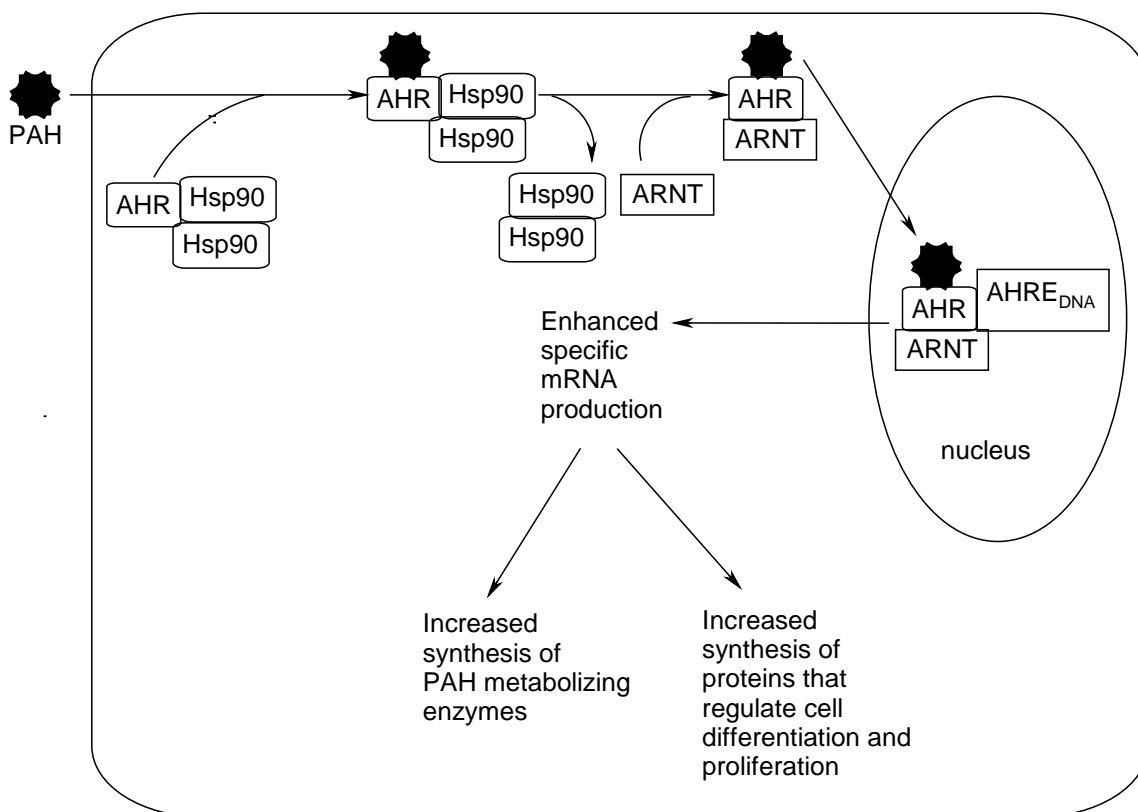
14 *Genotoxicity and mutagenicity*

15 The genotoxicity and mutagenicity of PAHs have been demonstrated in various bacterial
 16 and mammalian assays (see Section 4.3.2 below) (reviewed in WHO, 1998; ATSDR, 1995).
 17 Mutagenesis of PAHs in the Ames assay (*Salmonella typhimurium*) as well as other bacterial

1 assays requires the presence of a mammalian metabolic enzyme system. In most cases, this is
2 supplied by postmitochondrial supernatant (S9) from the liver of rodents treated with an enzyme
3 inducer. Mammalian cell mutagenesis in Chinese hamster V79 cells and mouse lymphoma
4 L5178Y cells also requires metabolic activation in the form of a rodent S9 mix or co-cultivation
5 with metabolically active rodent cells (i.e., cell-mediated assay). Several studies have noted a
6 correlation between mutagenic potency and tumor initiation potency in the 2-stage dermal
7 carcinogenicity assay for multiple PAH compounds (LaVoie et al., 1985, 1979; Raveh et al.,
8 1982).

9 10 *Tumor promotion and the AhR*

11 The ability of certain PAHs to act as tumor promoters as well as initiators may increase
12 their carcinogenic potency (Andrews et al., 1978). The promotional effects of PAHs appear to
13 be related to AhR affinity and the upregulation of genes related to biotransformation (i.e.,
14 induction of CYP1A1), growth, and differentiation (Bostrom et al., 2002). Figure 2-7 illustrates
15 the function of the AhR and depicts the genes regulated by this receptor as belonging to two
16 major functional groups (i.e., induction of metabolism or regulation cell differentiation and
17 proliferation). PAHs bind to the cytosolic AhR in complex with heat shock protein 90 (Hsp90).
18 The ligand-bound receptor is then transported to nucleus in complex with the AhR nuclear
19 translocator protein (ARNT). The AhR complex interacts with the Ah responsive elements of
20 the DNA (AhRE_{DNA}) to increase the transcription of proteins associated with induction of
21 metabolism and regulation of cell differentiation and proliferation.



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AhRAhRSource: Okey et al. (1994).

Figure 2-7. Interaction of PAHs with the Ah receptor – regulation of genes related to induction of metabolism and cell differentiation and proliferation.

In general, it has been demonstrated that fjord-region PAHs are strong mutagens and carcinogens, but have a low binding affinity to the AhR. Conversely bay-region PAHs possess a greater affinity for AhR binding, and are better tumor promoters in carcinogenicity bioassays (Bostrom et al., 2002). CYP1A1 induction by PAHs is considered to contribute to tumorigenesis by increasing the production of DNA-reactive metabolites (Ayrton et al., 1990). However, several recent studies indicate that CYP1A1 induction potency does not correlate well with carcinogenic potency. These studies compared CYP1A1 induction potency for several PAHs using assays to measure ethoxyresorufin O-deethylase (EROD) activity, CYP1A1 protein, and mRNA levels, or chemical-activated luciferase reporter gene expression (Bosveld et al., 2002; Machala et al., 2001; Bols et al., 1999; Till et al., 1999; Willett et al., 1997).

Tumor promotion and cytotoxicity

PAHs are metabolized to o-quinones, which are cytotoxic and can generate reactive oxygen species (Bolton et al., 2000; Penning, 1999). PAH o-quinones reduce the viability and survival of rat and human hepatoma cells (Flowers-Geary et al., 1996, 1993). Inflammatory

1 responses to cytotoxicity may contribute to the tumor promotion process. For example,
2 benzo[a]pyrene quinones (1,6-, 3,6-, and 6,12-benzo[a]pyrene-quinone) generated reactive
3 oxygen species and increased cell proliferation by enhancing the epidermal growth factor
4 receptor pathway in cultured breast epithelial cells (Burdick et al., 2003). Dermal exposure of
5 mice to DBalP and dimethyl-benz[a]anthracene resulted in an inflammatory response that was
6 correlated with epidermal hyperplasia and skin tumor promotion (Casale et al., 2000, 1997). The
7 extent of epidermal hyperplasia was correlated with the cytokine mRNA response in lymph
8 nodes and skin of treated mice (Casale et al., 2000).

9 10 *Genetic targets and tumor formation*

11 DNA adducts and oncogenes/tumor suppressor gene mutations have been demonstrated
12 in tumor tissue from humans and laboratory animals. DeMarini et al. (2001) demonstrated
13 mutations in the p53 tumor suppressor gene and the K-ras oncogene in the lung tumors of
14 nonsmokers, whose tumors were associated with exposure to smoky coal. Lung tumors were
15 obtained from 24 nonsmoking women from China (age 30–63, mean age 48.5 + 8.8 years) who
16 used smoky coal in their homes without chimneys. Bronchioloalveolar adenocarcinoma and
17 acinar adenocarcinoma were observed in 54 and 46% of the women studied, respectively. The
18 observed mutations in lung tumors were primarily G→T transversions at either K-ras or p53.
19 Mutation hotspots in the lung tumors examined corresponded with hot spots for PAH adducts
20 (codon 154), cigarette smoke associated mutations (codon 249), and both of these events
21 together (codon 273). The mutation spectrum was described as unique and consistent with
22 exposure to PAHs in the absence of cigarette smoke.

23 Mutations in the K-ras, H-ras, and p53 genes were assessed in forestomach tumors
24 (n = 31) of mice fed benzo[a]pyrene in the diet (0, 5, 25, or 100 ppm) for 2 years (Culp et al.,
25 2000). Forestomach tumors had K-ras mutations (68% of tumors), which were G→T or
26 C transversions in codon 12 or 13. H-ras (codon 13) and p53 mutations characterized as G→T
27 or C transversions were also each found in 10% of forestomach tumors. [³²P]-postlabeling of
28 forestomach DNA of benzo[a]pyrene-treated mice revealed one major adduct characterized as
29 dG-N²-BPDE. There was a linear relationship between the amount of benzo[a]pyrene consumed
30 and the concentration of dG-N²-BPDE in the forestomach of mice. For benzo[a]pyrene,
31 forestomach tumor incidence increased sharply with adduct concentrations between 50 and
32 140 fmol/mg DNA and in coal-tar fed mice. Tumor incidence increased sharply with
33 dG-N²-BPDE adduct levels between 20 and 60 fmol/mg DNA. The same levels of adduct were
34 present in lung and liver of benzo[a]pyrene-treated mice, although only the forestomach
35 exhibited benzo[a]pyrene-induced tumors (Goldstein et al., 1998). The presence of adducts in
36 tumor-free tissue suggests that DNA adduct levels alone are not necessarily predictors of tumor
37 outcome.

1 A series of experiments designed to evaluate the mechanistic relationship between PAH
2 DNA adducts, oncogene mutations, and lung tumorigenesis were performed in the A/J mouse
3 lung model (Nesnow et al., 1998a, 1996, 1995; Mass et al., 1993). Tumorigenic potency in the
4 lung of A/J mice varied over 2 orders of magnitude following a single intraperitoneal injection of
5 seven PAHs of varying structure (benzo[a]pyrene, benzo[b]fluoranthene, benz[j]aceanthrylene,
6 dibenz[a,h]anthracene, dibenzo[a,l]pyrene, cyclopenta[c,d]pyrene, and 5-methylchrysene).
7 When considering the non-alkylated PAHs, the number of lung adenomas per mouse was highest
8 for benz[j]aceanthrylene and cyclopenta[c,d]pyrene, each of which contain a pentacyclic ring
9 feature. The major DNA adducts identified in the mouse lung included:

- 11 (1) Bay region diol epoxide adducts for benzo[a]pyrene, dibenz[a,h]anthracene, and
12 5-methylcholanthrene;
- 14 (2) Phenolic diol epoxide adducts for benzo[b]fluoranthene;
- 16 (3) Cyclopenta-ring adducts for cyclopenta[c,d]pyrene and benz[j]aceanthrylene;
- 18 (4) Bisdihydrodiol epoxide adducts for dibenz[a,h]anthracene; and
- 20 (5) Fjord-region diol epoxide adducts for dibenzo[a,l]pyrene (Nesnow et al., 1998a, 1996,
21 1995; Mass et al., 1993).

23 Guanine adducts were most common for all PAHs; however, adenine adducts were also
24 demonstrated for dibenzo[a,l]pyrene and benz[j]aceanthrylene. Quantitative analysis of DNA
25 adducts by [³²P]-postlabeling illustrates the importance of measuring DNA adduct levels over
26 time. A time-integrated DNA adduct level (TIDAL) was linearly related to the dose of a
27 particular PAH. The relationship of TIDAL level to tumor formation was similar for PAHs that
28 produce different types of adducts and different mutations in the Ki-ras oncogene. This suggests
29 that the probability of tumor formation for these PAHs may be related to the extent of overall
30 DNA damage and repair rather than the formation of specific adduct at specific sites.

31 The DNA sequence analysis of Ki-ras mutations in lung adenomas at codons 12 and 61
32 was generally consistent with the DNA adduct data in that PAHs that produced guanine adducts
33 also produced Ki-ras guanine mutations (Nesnow et al., 1998a, 1996, 1995; Mass et al., 1993).
34 Cyclopenta[c,d]pyrene, benz[j]aceanthrylene, and 5-methylchrysene produced large numbers of
35 adenomas per mouse (>90) and also produced a large proportion of tumors with CGT mutations
36 at Ki-ras codon 12. Cyclopenta-ring adduct formation by cyclopenta[c,d]pyrene and
37 benz[j]aceanthrylene was correlated with the formation of GGT→CGT mutations at Ki-ras
38 codon 12. The primary mutation type for benzo[a]pyrene, benzo[b]fluoranthene, and
39 dibenzo[a,l]pyrene was the GGT→TGT mutation, which is associated with the formation of diol
40 epoxide guanine adducts. Dibenz[a,h]anthracene did not induce mutations in Ki-ras codons 12

1 or 61; however, diol epoxide guanine adducts and lung adenomas in A/J mice were observed.
2 This suggests that a different genetic target may be involved in carcinogenicity of this
3 compound.

4 H-ras mutations were studied in skin papillomas of SENCAR mice resulting from dermal
5 initiation by benzo[a]pyrene or benzo[a]pyrene-7,8-dihydrodiol (400 nmol) followed by 12-O-
6 tetra-decanoylphorbol-acetate (TPA) promotion (Chakravarti et al., 2008). PCR amplification of
7 the H-ras gene and sequencing revealed that codon 13 (GGC to GTC) and codon 61 (CAA to
8 CTA) mutations in papillomas corresponded to the relative levels of depurinating adducts of
9 guanine and adenine, despite the formation of significant amounts of stable DNA adducts.

10 Other studies also suggest that multiple genetic targets may be involved in PAH
11 mutagenicity and carcinogenicity (Conney et al., 2001; Smith et al., 2000). Smith et al. (2000)
12 indicated that diol epoxide adducts and mutations were observed in the p53 tumor suppressor
13 gene following in vitro exposure of cultured human bronchial epithelial cells to metabolites of
14 benzo[a]pyrene, chrysene, benzo[c]phenanthrene, and benzo[g]chrysene. PAH adducts and
15 corresponding mutations preferentially formed at lung mutational hot spots (codons 154, 157,
16 158, 245, 248, and 273), suggesting that PAHs may contribute to the mutation spectrum
17 observed in human lung cancer. Conney et al. (2001) provided evidence that dose-dependent
18 differences may exist for the mutation spectra seen in PAH-induced tumors. Skin papillomas
19 induced by benzo[a]pyrene in female mice were examined for mutations in the c-Ha-ras proto-
20 oncogene. The major difference between high- and low-dose groups was mutations at exon 2 of
21 the c-Ha-ras gene, with the proportion of AT base pair mutations higher in the low-dose group.
22 Dose-dependent changes in mutation profile were also evident in Chinese hamster V79 cells
23 exposed to the diol epoxides of benzo[a]pyrene and benzo[c]phenanthrene (i.e., the proportion of
24 AT mutations decreased with increasing concentration).

25 In conclusion, the available data indicate that there may be multiple mechanisms of
26 PAH-induced carcinogenicity. However, a common mode of action involving oxidative
27 metabolism to reactive intermediates, DNA adduct formation, and subsequent mutagenic events
28 is considered to be the primary mode of carcinogenic action. For these reasons, the use of a RPF
29 approach to estimate cancer risk associated with PAH exposure is considered appropriate. The
30 uncertainties and limitations related to the mode of action assumption for PAH-induced cancer
31 are further discussed in Section 8.5.

32 33 **2.5. STRUCTURAL ALERTS FOR PAH CARCINOGENESIS**

34 The carcinogenic activity of PAH compounds is influenced by specific structural
35 features. For example, alternant PAHs having four or more benzene rings exhibit greater
36 carcinogenic potency than PAHs with two or three benzene rings (Bostrom et al., 2002). The
37 carcinogenic activity of PAHs is also related to the specific arrangement of the benzene rings.
38 As described in Section 2.4, PAHs that form bay- and fjord-region diol or dihydrodiol epoxides

1 are more potent carcinogens compared with linear PAHs that lack this structural feature
2 (Bostrum et al., 2002). These metabolites are resistant to detoxification due to stereochemical
3 effects and, consequently, are more likely to be mutagenic and cause cancer (Flesher et al., 1976;
4 Buterin et al., 2000; Chang et al., 1981; Buening et al., 1979; MacLeod et al., 1979).
5 Dihydrodiol epoxides formed at other positions on the PAH molecule (i.e., not the bay or fjord-
6 regions) are more accessible to glutathione transferase detoxification and are less potent
7 mutagens and carcinogens (Flesher et al., 1976; MacLeod et al., 1979). Nonalternant PAHs
8 containing fused benzenoid and five-membered rings, can also be metabolized to bay- and fjord-
9 region diol epoxides (Bostrum et al., 2002); however, epoxide formation at the cyclopenta-ring
10 structure may also contribute to carcinogenicity (Bostrum et al., 2002; Nyholm et al., 1996).

11 PAHs with at least four rings and a classic bay- or fjord-region (formed entirely by
12 benzene rings; see Figure 2-1) may be characterized as containing structural alerts for
13 carcinogenesis. However, this structural characterization is likely to be overly simplistic and
14 other features may be important to carcinogenesis. Recent studies have applied quantitative
15 structure activity relationship (QSAR) methods to evaluate the relationship between specific
16 PAH structural features and mechanistic events related to carcinogenesis (Bruce et al., 2008;
17 Vijayalakshmi et al., 2008).

19 **2.6. SIMILARITIES IN RELATIVE POTENCY ACROSS ENDPOINTS**

20 Studies that have evaluated the association between cancer-related endpoints and
21 tumorigenicity of PAHs are briefly summarized below.

22 Several studies have been performed that compare the bacterial or mammalian cell
23 mutagenicity of various PAHs with tumor initiating activity or complete carcinogenesis (LaVoie
24 et al., 1985, 1981, 1979; Raveh et al., 1982; Andrews et al., 1978). In general, mutagenicity
25 appears to correlate best with tumor initiation. Complete carcinogenicity is not well-predicted by
26 positive findings in short-term mutagenicity assays. Andrews et al. (1978) tested 24 PAHs for
27 bacterial mutagenicity in the Ames test and compared these findings to evidence of
28 carcinogenicity (parent and metabolites) from previously published studies. Positive findings of
29 both mutagenicity and carcinogenicity were only reported for 14 of the 24 PAHs evaluated.
30 Eight of the 10 remaining PAHs were found to be mutagenic in the Ames assay, but were not
31 carcinogenic in animal studies. LaVoie et al. (1979) compared the mutagenicity, tumor-initiating
32 activity, and complete carcinogenicity of several series of structurally related PAHs. Tumor-
33 initiating activity was found to correspond with complete carcinogenicity. Quantitation of
34 mutagenicity in the Ames assay for structurally related PAHs failed to provide a reliable
35 indication of tumor-initiating activity or complete carcinogenicity. In addition, mutagenicity
36 results could not be used to predict which PAHs would be noncarcinogenic. Many PAHs were
37 active mutagens, but were not shown to be carcinogenic. Studies using methylated derivatives of
38 anthracene demonstrated a correlation between mutagenicity of specific metabolites and tumor

1 initiating activity in mouse skin (LaVoie et al., 1985). Raveh et al. (1982) reported that the
2 mutagenic response to PAHs in Chinese hamster V79 cells was similar to the skin tumor
3 initiating activity observed in SENCAR mice. Benzo[a]pyrene was demonstrated to be a more
4 potent mutagen and skin tumor initiator than cyclopenta[c,d]pyrene.

5 Sjogren et al. (1996) performed a multivariate analysis to evaluate the relevance of
6 different biological assays to the tumor initiating and promoting properties of PAHs. This
7 analysis considered carcinogenicity (strength of evidence), bacterial mutagenicity, inhibition or
8 enhancement of bacterial mutagenicity, AhR affinity, and enzyme induction. A principle
9 components analysis indicated that bacterial mutagenicity data were poorly correlated with
10 cancer bioassay data (regression coefficients ranged from -0.1 to 0.15). Variables describing
11 AhR affinity showed the highest correlation with cancer data. A partial least squares regression
12 analysis showed that all of the AhR affinity variables analyzed in the report were statistically
13 relevant to describe cancer potency (regression coefficients ranged from 0.1 to 0.25). The
14 structural requirements for AhR affinity are the same as those required for enzyme induction and
15 bioactivation of PAHs. This analysis suggests that different chemical species (i.e., parent
16 compounds or metabolites) may be responsible for the initiating and promoting properties of
17 PAHs. Sjogren et al. (1996) proposed that mutagenicity reflects the cancer initiation potency,
18 which may be more relevant at lower environmental exposure levels, and AhR affinity reflects
19 the promoting effect of some PAHs that occur primarily at high doses in animal bioassays.
20 Bostrom et al. (2002) suggested that the ability for a PAH to act as a promoter strongly increases
21 its carcinogenic potency in animal studies. However, highly mutagenic fjord-region PAHs are
22 potent carcinogens, despite a lower AhR affinity (Bostrom et al., 2002; Jerina et al., 1991).

23 CYP1A1 induction by PAHs is considered to contribute to tumorigenesis by increasing
24 the production of DNA-reactive metabolites (Ayrton et al., 1990). However, CYP1A1 induction
25 potency alone does not appear to correlate well with carcinogenic potency of PAHs. EROD
26 activity was evaluated as a measure of CYP1A1 induction in rat hepatocytes (Bosveld et al.,
27 2002; Till et al., 1999; Willett et al., 1997) and trout liver cells (Bols et al., 1999). Till et al.
28 (1999) additionally measured levels of CYP1A1 protein and mRNA. Machala et al. (2001)
29 measured PAH activation of the AhR using a chemical-activated luciferase reporter gene assay.
30 Comparable results were observed across studies and benzo[k]fluoranthene was consistently
31 demonstrated to be the most potent inducer of CYP1A1. Chrysene, benzo[b]fluoranthene,
32 dibenz[a,h]anthracene, and indeno[1,2,3-c,d]pyrene were also demonstrated to be more potent
33 inducers of CYP1A1 than benzo[a]pyrene. However, most of these PAH compounds (except
34 dibenz[a,h]anthracene) are considerably less potent as carcinogens in animal bioassays.

35 Ross et al. (1995) evaluated the relationship between TIDAL values for DNA adduct
36 formation and lung adenoma formation in A/J mice. The TIDAL value vs. tumor relationship
37 was similar for five different PAHs, suggesting a correlation between adduct levels and tumor
38 formation (regression analysis was not performed). As described above, the relationship of

1 TIDAL level to tumor formation was similar for PAHs that produce different types of adducts
2 and different mutations in the Ki-ras oncogene, suggesting that the probability of tumor
3 formation may be related to the extent of overall DNA damage and repair (Nesnow et al., 1998a,
4 1996, 1995; Mass et al., 1993).

5 To summarize, various cancer-related endpoints have been associated with PAH
6 carcinogenicity. Tumor initiation ability and AhR affinity were shown to correspond well with
7 complete carcinogenicity, while bacterial mutagenesis was not highly correlated with tumor
8 formation (Sjogren et al., 1996; Lavoie et al., 1979). DNA adduct formation corresponded with
9 lung adenoma formation in A/J mice for several PAHs (Sjogren et al., 1996; Ross et al., 1995;
10 LaVoie et al., 1979). The development of RPFs in this analysis considered both tumorigenicity
11 and cancer-related endpoints (e.g., mutagenicity, clastogenicity, morphological transformation).

13 **2.7. SIMILARITIES IN RELATIVE POTENCY ESTIMATES ACROSS SPECIES AND** 14 **EXPOSURE ROUTES**

15 Available studies suggest that the potency of individual PAHs is generally consistent
16 across species and study protocols. The consistency of potency estimates based on in vivo
17 tumorigenicity studies conducted using different study protocols and exposure routes in varying
18 species/strains of test animals is summarized below.

19 Nisbet and LaGoy (1992) and Clement Associates (1988) reported that RPFs for PAHs
20 are reasonably consistent across different study protocols using varying species/strains of
21 laboratory animals. RPF estimates were calculated in multiple test systems including mouse skin
22 complete carcinogenesis studies, mouse skin tumor initiation studies, studies in rat lung
23 (implantation), other rat studies (intrapulmonary injection, subcutaneous injection), and newborn
24 mouse (intraperitoneal injection). The RPF estimates for specific PAHs calculated from
25 different assay systems varied by less than an order of magnitude. The relative potency of
26 individual PAHs to benzo[a]pyrene was also shown to be very similar when based on data in
27 different strains of mice using different mouse tumor initiation models (Slaga and Fisher, 1983).
28 Muller et al. (1997) compared the relative potency of benzo[a]pyrene and 3-methylcholanthrene
29 from data generated in three species (rat, mouse, and hamster). Similar RPF values (i.e., within a
30 factor of 2) were derived for oral exposures in mice, rats, and hamsters. In their comparison
31 across different exposure routes (oral, respiratory, and dermal), Muller et al. (1997) reported
32 similar relative potencies for benzo[a]pyrene and 3-methylcholanthrene (within a factor of 2) for
33 data from rats exposed via oral and respiratory routes, and for mice exposed via oral and dermal
34 routes. The relative potency for respiratory exposure in mice was an order of magnitude lower
35 than relative potencies for the other two exposure routes.

36 Schneider et al. (2002) performed a more recent evaluation of the impact of exposure
37 route on the determination of RPFs. Potency ratios were calculated for several carcinogenicity
38 bioassays by dividing the carcinogenic potency of a PAH mixture by the carcinogenic potency of

1 benzo[a]pyrene as a single substance. The potency ratios were observed to vary by exposure
2 route and target organ. For example, potency ratios associated with forestomach tumors from
3 oral exposure ranged from 0.7 to 1.2 (i.e., the potencies of the PAH mixtures and benzo[a]pyrene
4 to induce forestomach tumors were approximately equal). This suggested that these tumors may
5 be attributable to the benzo[a]pyrene content of the mixture. Potency ratios for skin tumor
6 production from dermal exposure ranged from 2 to 11, whereas RPFs calculated for lung tumors
7 from oral exposure, pulmonary implantation, or inhalation were greater than 20. These results
8 suggested that the benzo[a]pyrene content of PAH mixtures may be only slightly responsible for
9 lung and dermal carcinogenicity. Schneider et al. (2002) suggested that RPF estimates should be
10 derived separately for oral, dermal, and inhalation exposure using studies with the relevant
11 exposure pathway.

12 To summarize, there is some consistency within the in vivo carcinogenicity database for
13 relative potency estimates derived from different species and strains exposed by various routes,
14 although this is an area for which further research is needed. However, Schneider et al. (2002)
15 have cautioned that potency ratios appear to cluster by exposure route and target organ and have
16 suggested that route-specific RPFs be developed. There is also some concern regarding the use
17 of benzo[a]pyrene as an index chemical to estimate lung cancer from PAH mixtures, considering
18 that the lung is relatively insensitive to benzo[a]pyrene-induced tumorigenicity following oral
19 exposure (Gaylor et al., 1998). Section 8.6 provides a comparison of RPF values calculated in
20 this report, using bioassay data from different exposure routes and study designs. RPF values
21 were comparable across most exposure routes, with the exception of the newborn mouse
22 intraperitoneal injection studies.

23 24 **2.8. DOSE ADDITIVITY OF PAHs IN COMBINED EXPOSURES**

25 Use of the RPF approach assumes that doses of component chemicals that act in a similar
26 manner can be added together, after scaling the potencies relative to the index chemical, and that
27 interaction effects do not occur (U.S. EPA, 2000, 1986). The level of confidence in the RPF
28 approach is increased if additivity can be demonstrated experimentally, even with simple
29 mixtures. For PAHs, the assumption of additivity cannot be confirmed or refuted based on the
30 available experimental data. It appears that risks may be generally additive for complex
31 mixtures, while binary mixtures can exhibit antagonism, synergism, or additivity as discussed
32 below.

33 The complexity of potential interactions for tumorigenesis of binary mixtures of PAHs is
34 illustrated in Table 2-2. The nature of the interaction varies with the PAHs evaluated and the
35 study conditions (e.g., vehicle used, dose selection, study method). Many studies were designed
36 to evaluate the combined administration of a known carcinogen with either a weak carcinogen or
37 a noncarcinogenic PAH. The true nature of the interaction (i.e., additive, synergistic, or
38 antagonistic) can be difficult to determine in studies wherein the tumorigenic response is not

1 measured for both PAHs given alone and in combination. These studies can distinguish between
 2 an enhanced or cocarcinogenic response and an inhibitory response, but a further classification
 3 cannot be made. The interactions described as cocarcinogenic in Table 2-2 may be either
 4 additive or synergistic in nature.
 5

Table 2-2. Studies of binary mixtures of PAHs and tumorigenicity

Reference	Endpoint	Findings	Net effect
Cavalieri et al., 1983	Mouse skin carcinogenicity	BaP and CPcdP given together resulted in synergistic effect at low and intermediate doses; three- to sevenfold increase in relative risk at intermediate dose of both BaP and CPcdP as compared to the sum of the relative risk for the same dose of each PAH given alone.	S
DiGiovanni et al., 1982	Skin tumor initiation in mice	BeP increased BaP tumor initiation (30% ↑), inhibited tumor initiation by DMBA (84% ↓) and DBahA (48% ↓) and produced no change in combination with 3-MC; DBacA inhibited tumor initiation by DMBA (92% ↓), DBahA (39% ↓), and 3-MC (61% ↓) and produced no change in combination with BaP.	Co, I
Falk et al., 1964	Sarcoma induction in mice by subcutaneous injection	PH inhibited tumor response of DBahA in ethyl laurate vehicle (approximately 30% ↓, estimated from graph); tumor response was enhanced in triethylene glycol vehicle (approximately 50% ↑ to 100% tumor-bearing animals, estimated from graph).	Co, I
Lavik et al., 1942	Mouse skin tumors	3-MC and BaP, DBahA, or BaA essentially additive.	A
Pfeiffer, 1973	Sarcoma induction in mice by subcutaneous injection	BaP and DBahA less than additive; tumor response for combined treatment was within 10% of DBahA response.	I
Slaga et al., 1979	Skin tumor initiation in mice	BeP, Pyr, or FA increased skin tumor initiation by BaP (30, 35, and 23% ↑, respectively); BeP, Pyr, or FA decreased skin tumor initiation by DMBA (84, 50, and 34% ↓, respectively).	Co, I
Steiner, 1955; Steiner and Falk, 1951	Sarcoma induction in mice by subcutaneous injection	DBahA and 3-MC in combination roughly additive; BaA and CH in combination resulted in synergistic effect (9% ↑ above additive response); BaA and DBahA in combination resulted in inhibition (48% ↓ below additive response).	A, S, and I
Van Duuren and Goldschmidt, 1976; Goldschmidt et al., 1973	Mouse skin carcinogenicity	BeP, BghiP, Pyr, or FA and BaP increased tumors over BaP alone (>50% increase in incidence, also ↑ multiplicity); no tumors were observed for PAHs without BaP.	S
Van Duuren et al., 1973	Mouse skin carcinogenicity	BaP and BghiP had cocarcinogenic effect (23% ↑ over BaP response alone).	Co
Warshawsky et al., 1993	Mouse skin carcinogenicity	Nontumorigenic dose of BaP increased tumor incidence produced by CH (16% ↑), anthracene (8% ↑), and FA (8% ↑).	S

3-MC = 3-methylchloanthrene; A = additive; Co = cocarcinogenic (enhanced tumorigenicity, study design does not allow for determination of A or S); DMBA = 7,12-dimethyl-benz[a]anthracene; I = inhibitory; S = synergistic

1
2 Slooff et al. (1989) reviewed the available data addressing the carcinogenicity of
3 individual PAHs and in combination. It was concluded that a generally additive effect was
4 observed following administration of more than two different PAHs in weight ratios similar to
5 those occurring in ambient air or in various emissions. Combinations of only two PAHs
6 produced either additive, synergistic, or inhibitory effects. The complexity of the interaction
7 among single PAH compounds is thought to be related to effects on metabolic enzyme systems
8 including induction processes and competitive inhibition. The generally additive response noted
9 for a more complex mixture may reflect the balance between inhibitory and synergistic
10 processes.

11 Additivity has been observed in carcinogenicity studies of complex mixtures of PAHs.
12 Schmähl et al. (1977) evaluated the production of skin tumors following combined dermal
13 treatment with 11 PAHs found as constituents of automobile exhaust. Tumor findings were
14 presented separately for two groups of PAHs. High potency carcinogens (Group 1) included
15 benzo[a]pyrene, dibenz[a,h]anthracene, benz[a]anthracene, and benzo[b]fluoranthene. Lower
16 potency PAHs (Group 2) included anthracene, benzo[e]pyrene, benzo[g,h,i]perylene, chrysene,
17 fluoranthene, phenanthrene, and pyrene. Chronic dermal exposure to PAHs in both groups
18 resulted in an additive response when compared to the tumor response for each group alone.

19 Nesnow et al. (1998b) evaluated lung tumor formation in A/J mice following combined
20 administration of five carcinogenic PAH compounds (benzo[a]pyrene, benzo[b]fluoranthene,
21 dibenz[a,h]anthracene, 5-methylchrysene, and cyclopenta[c,d]pyrene). High and low doses were
22 selected for each PAH in this study based on toxicity, survival, range of response, and predicted
23 tumor yield. The ratio of PAH doses was designed to simulate PAH ratios found in
24 environmental air and emissions samples. PAHs were administered to mice in a 2⁵ factorial
25 study design yielding 32 dose groups (combination of five PAHs at high and low doses). The
26 formation of lung adenomas was evaluated 8 months following intraperitoneal injection of PAH
27 mixtures. A response surface model was used to evaluate specific interactions among PAHs.
28 The results of the study indicated that greater-than-additive effects were seen at low doses, while
29 less-than-additive effects were observed at high doses. However, the magnitude of the
30 interactions was relatively small (twofold), suggesting that potential interactions are limited in
31 extent.

32 Dermal application of binary mixtures of PAHs has also been shown to produce additive,
33 synergistic, and inhibitory effects on DNA binding in mouse skin (Hughes and Phillips, 1993,
34 1990). Hermann (1981) demonstrated that many PAHs could both enhance and inhibit the
35 bacterial mutagenicity of benzo[a]pyrene depending on the relative concentrations in the binary
36 mixture. Binary mixtures of benzo[a]pyrene and benzo[e]pyrene produced a synergistic
37 response in the TA98 strain of *S. typhimurium* (which detects frameshift mutations), and
38 antagonistic and additive effects in strain TA100 (which detects a broad spectrum of mutations)

1 depending on the concentration (Hass et al., 1981). Binary mixtures of PAHs have also been
2 shown to produce antagonistic or less than additive effects in the Ames assay of bacterial
3 mutagenicity (Barrai et al., 1992; Salamone et al., 1979a). Vaca et al. (1992) demonstrated an
4 additive effect for sister chromatid exchange induction by combined administration of
5 benzo[a]pyrene and fluoranthene in human peripheral lymphocytes cocultured with
6 PCB-induced rodent liver cells.

7 The effects of binary PAH mixtures on gene expression, DNA adduct formation,
8 apoptosis, and cell cycle are additive compared to the effects of the individual compounds in
9 human hepatoma cells (HepG2) (Staal et al., 2007). Equimolar and equitoxic mixtures of
10 benzo[a]pyrene with either dibenzo[a,l]pyrene, dibenz[a,h]anthracene, benzo[b]fluoranthene,
11 fluoranthene, or 1-methylphenanthrene were studied. PAH mixtures showed an additive effect
12 on apoptosis and on cell cycle blockage. The effects of binary mixtures of PAHs on gene
13 expression were generally additive or slightly antagonistic.

14 Additivity has also been observed for the mutagenicity of PAHs administered as a
15 complex mixture (Bostrom et al., 1998; Kaden et al., 1979). Kaden et al. (1979) evaluated the
16 bacterial mutagenicity of the PAH fraction of kerosene soot using resistance to 8-azaguanine as a
17 genetic marker for forward mutation in *S. typhimurium*. Approximately half of the PAHs tested
18 (34 of 70) produced a significant increase in the mutant fraction in this assay system. The
19 mutagenicity of the complex soot mixture was demonstrated to be approximately equal to the
20 additive mutagenicity of the individual components. Bostrom et al. (1998) reported additivity in
21 the Ames test of bacterial mutagenesis (i.e., reversion to histidine independence) for a mixture of
22 four PAHs (benzo[a]pyrene, benz[a]anthracene, fluorene, and pyrene) using four different strains
23 of *S. typhimurium*.

24 Mechanistic studies have suggested that the outcome of the interaction between two
25 PAHs in a binary mixture is dependent on changes in metabolism. PAHs can act as both
26 inducers and competitive inhibitors of the CYP enzymes that are responsible for generation of
27 reactive metabolites. Benzo[e]pyrene has been shown to alter the oxidative metabolism of
28 benzo[a]pyrene, which may be related to the cocarcinogenic effect seen in skin tumor initiation
29 studies (Baird et al., 1984). Alterations in the types and amounts of benzo[a]pyrene metabolites
30 suggest that benzo[e]pyrene-induced changes may be isozyme specific (Smolarek and Baird,
31 1984). An increase in the formation of benzo[a]pyrene DNA adducts has also been
32 demonstrated for coadministration of benzo[e]pyrene in Sencar mouse skin (Smolarek et al.,
33 1987). Fluoranthene and pyrene have been shown to increase the formation of benzo[a]pyrene-
34 DNA adducts in mouse skin following a combined treatment (Rice et al., 1988, 1984).
35 Enhancement of the metabolism of benzo[a]pyrene to diol epoxide metabolites and subsequent
36 DNA binding may explain the increased carcinogenic effect in this case. Phenanthrene did not
37 increase the formation of benzo[a]pyrene-DNA adducts and was not shown to be cocarcinogenic
38 following combined administration with benzo[a]pyrene in this study. Chergn et al. (2001)

1 demonstrated that benzo[g,h,i]perylene increased the formation of benzo[a]pyrene adducts in
2 hepatoma cells (HepG2) by enhancing benzo[a]pyrene induction of CYP1A1. Benzo[g,h,i]
3 perylene increased the nuclear accumulation of the AHR and/or the activation of the AhR to a
4 DNA-binding form (Cherng et al., 2001). Benzo[k]fluoranthene altered the metabolic profile of
5 benz[a]anthracene by increasing the activity of CYP1A1 (Schmoltdt et al., 1981). The bacterial
6 mutagenicity of benz[a]anthracene was enhanced by use of a rodent liver S9 that was obtained
7 from animals previously exposed to other PAHs (Norpoth et al., 1984). Coadministration of
8 benzo[a]pyrene and benz[a]anthracene to hamster embryo cell cultures resulted in a decrease in
9 the metabolism of benzo[a]pyrene, a decrease in the level of DNA binding, and a decrease in
10 mutation frequency in hamster V79 cells (Smolarek et al., 1986).

11 In summary, combined administration of binary mixtures of PAHs can result in several
12 types of joint action (i.e., additive, synergistic, or antagonistic). The nature of the joint action
13 appears to be dependent on the characteristics of the individual PAHs, related changes in
14 metabolism and possibly the test species/strain. PAHs can act as both inducers and competitive
15 inhibitors of the CYP enzymes that are responsible for generation of reactive metabolites.
16 Additivity has been observed for some complex mixtures of PAHs, suggesting a balance in the
17 relative metabolism of individual PAHs. For the purposes of this analysis, an assumption is
18 made that the combination of individual PAHs results in additive effects. Additional research is
19 needed to characterize the validity of this assumption.

20
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22 **3. DISCUSSION OF PREVIOUSLY PUBLISHED RPF APPROACHES**

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There are multiple analyses available for the derivation of relative potency estimates for individual PAHs. All of these analyses utilize benzo[a]pyrene as the index chemical. Table 3-1 compares relative cancer potency values for PAHs presented by several authors. A review of the derivation of these relative potency values follows.

Table 3-1. Comparison among various relative potency estimates for PAHs from the published literature and regulatory agencies (1984–2004)

PAH	Abbr	U.S. EPA (1993)	Chu and Chen (1984)	Clement (1988)	Clement (1990)	Rugen et al. (1989)	Slooff et al. (1989)	Kroese et al. (2001)	Nisbet and LaGoy (1992)	Malcolm and Dobson (1994)	Meek et al. (1994)	Muller et al. (1997)	Larsen and Larsen (1998)	Collins et al. (1998)	California EPA (2004)
Acenaphthene	AN								0.001	0.001					
Acenaphthylene	ANL								0.001	0.001					
Anthanthrene	AA			0.32	0.316							0.28	0.3		
Anthracene	AC						0	0	0.01	0.01			0.0005		
Benzo[a]pyrene	BaP	1	1	1	1	1	1	1	1	1	1	1	1	1	
Benz[a]anthracene	BaA	0.1	0.013	0.145		0.004–0.006	0–0.04	<0.1	0.1	0.1		0.014	0.005	0.1	
Benzo[b]fluoranthene	BbF	0.1	0.08	0.14	0.1228	0.0235			0.1	0.1	0.06	0.11	0.1	0.1	0.62
Benzo[c]phenanthrene	BcPH											0.023	0.023		
Benzo[e]pyrene	BeP			0.004	0.007					0.01		0	0.002		
Benzo[g,h,i]perylene	BghiP			0.022	0.0212		0.01–0.03	0.03	0.01	0.01		0.012	0.02		
Benzo[j]fluoranthene	BjF			0.061	0.0523	0.0763				0.1	0.05	0.045	0.05	0.1	0.52
Benzo[k]fluoranthene	BkF	0.01	0.004	0.066	0.0523		0.03–0.09	<0.1	0.1	0.1	0.04	0.037	0.05	0.1	
Chrysene	CH	0.001	0.001	0.0044			0.05–0.89	0.1–0.03	0.01	0.01		0.026	0.03	0.01	0.17
Coronene	CO									0.001					
Cyclopenta[c,d]pyrene	CPcdP			0.023						0.1		0.012	0.02		
Dibenzo[a,h]anthracene	DBahA	1	0.69	1.11		0.599			5	1		0.89	1.1		
Dibenz[a,c]anthracene	DBacA									0.1					
Dibenzo[a,e]pyrene	DBaeP												0.2	1	
Dibenzo[a,h]pyrene	DBahP											1.2	1	10	11
Dibenzo[a,i]pyrene	DBaiP											1.1	0.1	10	12
Dibenzo[a,l]pyrene	DBalP												1	10	
Fluoranthene	FA						0–0.06	0.01	0.001	0.001			0.05		
Fluorene	FE								0.001	0.001					
Indeno[1,2,3-c,d]pyrene	IP	0.1	0.017	0.232	0.278	0.00599	0–0.08	0.1	0.1	0.1	0.12	0.067	0.1	0.1	
Perylene	Pery									0.001					

Table 3-1. Comparison among various relative potency estimates for PAHs from the published literature and regulatory agencies (1984–2004)

PAH	Abbr	U.S. EPA (1993)	Chu and Chen (1984)	Clement (1988)	Clement (1990)	Rugen et al. (1989)	Slooff et al. (1989)	Kroese et al. (2001)	Nisbet and LaGoy (1992)	Malcolm and Dobson (1994)	Meek et al. (1994)	Muller et al. (1997)	Larsen and Larsen (1998)	Collins et al. (1998)	California EPA (2004)
Phenanthrene	PH						0.01	<0.01	0.001	0.001		0.00064	0.0005		
Pyrene	Pyr			0.081					0.001	0.001		0	0.001		

Abbr = abbreviation

1 U.S. EPA (1993) presented RPFs (termed EOPPs) for seven PAHs (benzo[a]pyrene,
2 benz[a]anthracene, benzo[b]fluoranthene, benzo[k]fluoranthene, chrysene,
3 dibenz[a,h]anthracene, indeno[1,2,3-c,d]pyrene) as *Provisional Guidance* for the risk evaluation
4 of PAHs at hazardous waste sites. On IRIS (U.S. EPA, 2009), all seven of these compounds
5 were assigned a cancer weight of evidence classification of Group B2 (probable human
6 carcinogen, based on sufficient evidence of carcinogenicity in animals) under the U.S. EPA
7 (1986) *Guidelines for Carcinogen Risk Assessment*. U.S. EPA (1993) indicated that the data for
8 PAHs did not meet the criteria for the development of toxicity equivalency factors (TEFs). In
9 particular, the existing database was limited primarily to studies of metabolism, genotoxicity,
10 and cancer, and the assumption of additivity was not proven or refuted. The EOPP terminology
11 was used because this approach was limited to skin painting data and was based on
12 benzo[a]pyrene exposure from a single (oral) pathway (for the derivation of the slope factor).
13 This analysis considered only a small subset of PAHs routinely measured in PAH mixtures at
14 hazardous waste sites. The EOPP values were based on previous evaluations conducted by Chu
15 and Chen (1984) and Clement Associates (1988) and were calculated for various test systems
16 (i.e., mouse skin carcinogenesis, subcutaneous injection in mice, intrapulmonary administration
17 to rats, tumor initiation on mouse skin, and intraperitoneal injection in newborn mice) (Clement
18 Associates, 1988). Various statistical methods for combining data sets were considered;
19 however, final EOPP values were based on a single test system (skin painting) and were rounded
20 to the closest order of magnitude. The EOPPs were recommended for the oral exposure route
21 only, because the quantitative dose-response assessment for benzo[a]pyrene was from an oral
22 carcinogenicity bioassay (i.e., an oral cancer slope factor). This recommendation was, however,
23 complicated by the fact that the EOPPs were derived from comparisons based on dermal
24 exposure.

25 Chu and Chen (1984) presented RPF values for the seven PAH compounds described in
26 the *Provisional Guidance* described above (U.S. EPA, 1993) (see Table 3-1). These values were
27 calculated using mouse skin painting data only. Tumor incidence data were modeled using the
28 linearized multistage model and the resulting ED₁₀ and q1* (upper confidence limit of the linear
29 slope) were presented for target PAHs and benzo[a]pyrene. The RPFs listed in Table 3-1
30 represent the ratio of the q1* value for a PAH compound to the q1* value for benzo[a]pyrene
31 (i.e., $q1^*_{\text{PAH}} \div q1^*_{\text{BaP}}$).

32 Clement Associates (1988) identified 11 published studies that concurrently compared
33 the carcinogenicity of benzo[a]pyrene with one or more other PAHs, and used the data to derive
34 relative cancer potencies for 13 PAHs, including benzo[a]pyrene. Test protocols used in this
35 analysis included mouse skin complete carcinogenesis, initiation-promotion on mouse skin,
36 subcutaneous injection into mice, lung implantation in rats, and intraperitoneal injection into
37 newborn mice. Tumor incidence data were fit to a simplified version of the Moolgavkar-
38 Venson-Knudsen (MVK) two-stage model and to the linearized multistage model to obtain low-

1 dose cancer potency values (transition rates and low-dose slope factors, respectively). Most of
2 the estimates were derived using data for multiple exposure levels and controls, but some were
3 based on a single exposure level and a control. RPFs were calculated as the ratio of the
4 estimated transition rate or slope factor for a particular PAH to the corresponding values for
5 benzo[a]pyrene from the same study. Clement Associates (1988) selected representative RPFs
6 for each of the studied PAHs based on evaluations of the quality of the studies from which the
7 estimates were obtained.

8 Clement Associates (1990) also derived relative cancer potencies for eight PAHs based
9 on tumor incidence data from rat lung implantation data only (Deutsch-Wenzel, 1983). The data
10 were restricted to a single group of studies using a defined experimental protocol in order to
11 address issues of questionable data quality associated with other studies. Data quality concerns
12 cited for other studies include variation in survival, saturation of the carcinogenic effect,
13 outmoded pathological classification, and inadequate controls. The RPF values based on rat lung
14 implantation data were comparable to those originally derived by Clement Associates (1988)
15 (see Table 3-1).

16 Rugen et al. (1989) proposed a relative potency approach to establish acceptable
17 exposure levels (AELs) for six carcinogenic PAHs in drinking water (listed in Table 3-1). These
18 authors reviewed mouse skin painting studies in which the cancer potency of benzo[a]pyrene
19 was compared with those of other PAHs (Bingham and Falk, 1969; Wynder and Hoffmann,
20 1961, 1959a, b). The following relationship was used to calculate conversion factors (“relative
21 tumor dose” = RTD) to derive AELs for these PAHs from the AEL for benzo[a]pyrene: $RTD = (d_1/n_1)/(d_2/n_2)$; where d_1 and n_1 represented a dosage level and associated tumor incidence after a
22 given exposure duration to a certain PAH, PAH₁, and d_2 and n_2 represented similar quantities for
23 exposure to the index PAH, benzo[a]pyrene, for the same exposure duration. The AEL for a
24 particular PAH was then derived with the following relationship: $AEL_{(PAHi)} = AEL_{(benzo[a]pyrene)} \times$
25 $RTD_{(PAHi)}$. In this approach, RTDs for PAHs more potent than benzo[a]pyrene were less
26 than 1 and RTDs for PAHs less potent than benzo[a]pyrene were greater than 1. The reciprocal
27 of the RTDs derived by Rugen et al. (1989) were comparable to the RPFs presented by other
28 authors and are presented as such in Table 3-1.

29 The Netherlands (RIVM) proposed RPF values for 10 PAHs (naphthalene, anthracene,
30 phenanthrene, fluoranthene, chrysene, benz[a]anthracene, benzo[k]fluoranthene, benzo[a]pyrene,
31 benzo[g,h,i]perylene, and indeno[1,2,3-c,d]pyrene) (Slooff et al., 1989). RPFs were calculated
32 as a ratio of ED₅₀ values that were calculated using a simple linear model. For dermal studies in
33 which the latency period was determined, the tumor incidence was divided by latency and
34 concentration, and the values were averaged for the different concentrations. Kroese et al.
35 (2001) provided an update of the RPF values calculated by Slooff et al. (1989) by incorporating
36 more recent evaluations conducted by other authors (Larsen and Larsen, 1998; Nesnow et al.,
37

1 1998b; Muller, 1997; Nisbet and LaGoy, 1992). The RPF values for chrysene and fluoranthene
2 were decreased, while other values remained similar to those originally proposed (see Table 3-1).

3 Nisbet and LaGoy (1992) proposed toxicity equivalence factors for 17 PAHs commonly
4 found at hazardous waste sites. These authors reviewed published studies in which the
5 tumorigenic potencies of one or more PAHs were compared with benzo[a]pyrene (essentially the
6 same as those reviewed by Clement Associates, 1988) and rounded, to an order of magnitude, the
7 estimates presented by Clement Associates (1988) for seven carcinogenic PAHs
8 (dibenz[a,h]anthracene, benz[a]anthracene, benzo[b]fluoranthene, benzo[k]fluoranthene,
9 indeno[1,2,3-c,d]pyrene, benzo[g,h,i]perylene, and chrysene) (see Table 3-1). Nisbet and LaGoy
10 (1992) argued that the rounded estimates more accurately reflected the uncertainty in the
11 estimates than the values presented by Clement Associates (1988). Nisbet and LaGoy (1992)
12 stated that Clement Associates (1988) proposed a TEF of 0.32 for anthracene (CASRN
13 120-12-7), but examination of the original report shows that Clement Associates (1988)
14 proposed this value for anthanthrene (CASRN 191-26-4) and did not propose a value for
15 anthracene. Nisbet and LaGoy (1992) assigned a value of 0.01 to anthracene. In addition,
16 Nisbet and LaGoy (1992) arbitrarily assigned TEFs of 0.001 to eight other PAHs for which
17 adequate evidence of carcinogenicity in animals was not available (acenaphthene,
18 acenaphthylene, fluoranthene, fluorene, 2-methylnaphthalene, naphthalene, phenanthrene, and
19 pyrene). In defense of this assignment, the argument was made that some of these PAHs have
20 been shown to have some, albeit limited, evidence for carcinogenic or genotoxic activity in some
21 studies (e.g., phenanthrene and naphthalene²). The RPF value proposed for
22 dibenz[a,h]anthracene was substantially higher than that proposed by Clement Associates (1988).
23 Nisbet and LaGoy (1992) indicate that their analysis of the dose-response data suggests that an
24 RPF value of 5 is more appropriate for environmental exposures where the chemically-related
25 tumor incidence rate would be approximately <25%.

26 Malcolm and Dobson (1994) used RPFs for 23 PAHs to calculate environmental
27 assessment levels (EALs) for atmospheric PAHs (sponsored by the Great Britain Department of
28 the Environment). The RPFs were derived from previously reported review papers (Nisbet and
29 LaGoy, 1992; Rugen et al., 1989; Clement Associates, 1988; Chu and Chen, 1984), as well as the
30 primary literature describing pulmonary implant, skin painting, subcutaneous injection, and
31 mouse skin DNA binding studies. No information was provided regarding the methodology used
32 to derive RPFs from specific experimental studies. The proposed RPF values for individual
33 PAHs were the highest values reported in the literature. Many of the RPF values are similar to
34 those reported by Nisbet and LaGoy (1992). RPFs were additionally reported for
35 benzo[e]pyrene, coronene, cyclopenta[c,d]pyrene, dibenz[a,c]anthracene, and perylene. The
36 benzo[e]pyrene and cyclopenta[c,d]pyrene RPFs were apparently calculated directly from mouse

²It should be noted that a recent bioassay for naphthalene has shown increased incidence of nasal tumors in exposed rats (NTP, 2000).

1 skin painting studies (Habs et al., 1980; Hoffmann and Wynder, 1966; Wynder and Hoffmann,
2 1959a, b). Coronene and perylene were arbitrarily assigned RPF values of 0.001 given the
3 International Agency for Research on Cancer (IARC) and U.S. EPA designation as “not
4 classifiable as to human carcinogenicity” (similar approach to Nisbet and LaGoy, 1992).
5 Dibenz[a,c]anthracene was assigned an RPF value of 0.1 based on the IARC designation of
6 “possibly carcinogenic to humans.”

7 Health Canada (Meek et al., 1994) proposed RPFs for five PAHs (benzo[a]pyrene,
8 benzo[b]fluoranthene, benzo[k]fluoranthene, benzo[j]fluoranthene, and indeno[1,2,3-cd]pyrene)
9 based on the results of multistage modeling of incidence data in Osborne-Mendel rats treated by
10 lung implantation (Deutsch-Wenzel et al., 1983). Values were based on a comparison of the
11 doses that caused a 5% increase in tumor incidence (ED₀₅). RPFs were calculated as the ratio of
12 the ED₀₅ for benzo[a]pyrene to the ED₀₅ for a specific PAH compound.

13 The Ontario Ministry of Environment and Energy (Muller et al., 1997) proposed RPF
14 values for 209 PAHs using data from dermal studies in mouse skin or rat lung bioassays. Most
15 of these PAHs were alkylated PAHs, PAH metabolites, or heterocyclic PAH compounds. The
16 17 unsubstituted PAHs that were evaluated in this analysis are listed in Table 3-1. Muller et al.
17 (1997) derived a standard time of observation in order to account for varying study duration
18 across experiments. Several dose-response models were considered for the evaluation of tumor
19 incidence and multiplicity, and linear regression was selected as the preferable method.
20 Tumorigenic potency (i.e., the slope of incidence/mg) was determined separately for each data
21 set based on the following order of preference regarding study type: tumor initiation in
22 CD-1 mice, tumor initiation in SENCAR mice, rat lung implantation, and complete
23 carcinogenicity in C57BL mice. RPFs were determined as the ratio of PAH potency to the
24 potency of benzo[a]pyrene. RPF values derived by Muller et al. (1997) were comparable to
25 values estimated by other authors.

26 Larsen and Larsen (1998) estimated RPFs for 23 PAHs based on a compilation of
27 available carcinogenicity data in animals using oral, pulmonary, and skin application of PAHs.
28 The authors indicated that these values represent an entirely subjective estimate of relative
29 potency; however, further detail regarding the derivation of RPF estimates was not provided.

30 Collins et al. (1998) developed RPFs (termed potency equivalency factors [PEFs]) for
31 21 PAHs, 10 of these were either methyl- or nitro-substituted or heterocyclic PAHs. A hierarchy
32 of data types was utilized to provide an order of preference for data utilization in calculating
33 RPFs. Because the analysis focused on PAHs as air contaminants, tumor data from inhalation
34 studies were preferred (although none were found), followed by intratracheal or intrapulmonary
35 instillation, oral administration, skin-painting, and subcutaneous or intraperitoneal injection.
36 Genotoxicity and structure activity data were considered the least-preferred data type for
37 calculation of RPFs. Collins et al. (1998) noted that a wide range of PEFs were observed for
38 individual chemicals using different types of data (e.g., mutagenicity versus tumor data). The

1 basis for the derivation of individual RPF values was presented in a California EPA (2002)
2 technical support document. RPF values for benz[a]anthracene, benzo[b]fluoranthene,
3 benzo[j]fluoranthene, benzo[k]fluoranthene, indeno[1,2,3-c,d]pyrene, and chrysene were similar
4 to those described by Clement Associates (1988). Additional RPFs for dibenzo[a,e]pyrene,
5 dibenzo[a,h]pyrene, dibenzo[a,i]pyrene, and dibenzo[a,l]pyrene were calculated using mouse
6 skin and rat mammary gland data (Cavalieri et al., 1991, 1989). A cancer slope factor was
7 directly calculated for dibenz[a,h]anthracene using the tumor incidence data from a drinking
8 water study (Snell and Stewart, 1962). The relative potency of dibenz[a,h]anthracene was
9 estimated to be 0.1, when compared to the oral potency for benzo[a]pyrene.

10 Revised California EPA RPFs were recently developed for benzo[b]fluoranthene,
11 benzo[j]fluoranthene, chrysene, dibenzo[a,h]pyrene, and dibenzo[a,i]pyrene (California EPA,
12 2004). Cancer potency estimates were derived from lung adenoma data in newborn mice treated
13 by intraperitoneal injection. Potency estimates represented the upper 95th percent confidence
14 limit on the linear term of the multistage model fit for the newborn mouse dose-response data.
15 Because benzo[a]pyrene was demonstrated to be 75 times more toxic in newborn mouse
16 intraperitoneal assays than in adult oral studies, oral equivalent potencies for individual PAHs
17 were derived by adjusting the cancer potency downward by a factor of 75. The RPFs listed in
18 Table 3-1 were calculated as the ratio of the oral equivalent potency for a PAH to the oral
19 potency estimate for benzo[a]pyrene. This methodology resulted in a significant increase in RPF
20 values for benzo[b]fluoranthene, benzo[j]fluoranthene, and chrysene when compared with other
21 approaches.

22 In summary, several approaches are available for the determination of RPFs for PAHs.
23 RPF values are proposed in at least one study for a total of 27 PAHs (see Table 3-1). Because
24 these approaches generally rely on similar bioassay data and modeling methods, the resulting
25 RPF values are fairly comparable for most PAHs across studies. Reports by Larsen and Larsen
26 (1998) and Malcolm and Dobbs (1994) did not provide sufficient information on the
27 methodology used to calculate RPF estimates and are therefore more uncertain. Variable RPF
28 estimates were reported for benz[a]anthracene, chrysene, and indeno[1,2,3-c,d]pyrene. RPF
29 values were also highly variable for dibenzo[a,e]pyrene, dibenzo[a,h]pyrene, dibenzo[a,i]pyrene,
30 and dibenzo[a,l]pyrene; however, these were only presented in a few recent studies. As
31 indicated above, the recent California EPA (2004) approach to estimating RPFs provides
32 considerably higher RPF values for benzo[b]fluoranthene, benzo[j]fluoranthene, and chrysene,
33 compared with other approaches.

34 U.S. EPA is reevaluating the RPF approach for PAHs in this analysis due to the evolution
35 of the state of the science and increased understanding of PAH toxicology. A great deal of
36 scientific research on PAHs has been conducted since the 1993 *Provisional Guidance* was
37 developed. Toxicological data are available for a larger number of PAHs and cancer-related
38 endpoints. However, the database for PAHs still does not meet the criteria for the derivation of

1 TEFs. U.S. EPA (2000) defines TEFs as special types of RPFs that are derived when there are
2 abundant data supporting a specific mode of action that is pertinent to all health endpoints. RPFs
3 may be derived when the mode of action is less certain or is known for only a subset of all health
4 endpoints. The major differences in the use of TEFs and RPFs is that TEFs are applied to all
5 health endpoints, exposure routes, and exposure durations (U.S. EPA, 2000), while RPFs may be
6 limited to specific endpoints, routes, or durations. In the case of PAHs, there are inadequate data
7 to identify a specific mode of action that is applicable across all health endpoints. Most of the
8 available toxicological data are limited to cancer endpoints and there are few data on the
9 potential mode(s) of action for other effects. As a result, the more generalized RPF approach is
10 considered appropriate for PAHs.

11 12 **3.1. PREVIOUS EFFORTS TO VALIDATE RPF APPROACH**

13 Several studies have attempted to validate the RPF approach by comparing the cancer
14 risk of a PAH mixture measured experimentally with the cancer risk that was predicted using the
15 RPF method (Muller et al., 1997; McClure, 1996; Goldstein et al., 1994; Clement Associates,
16 1990, 1988; Krewski et al., 1989). These studies provide semi-quantitative information on the
17 overall uncertainty in using a component-based approach. Consistent findings were not reported
18 across these studies. Some studies suggested that the RPF approach would closely predict the
19 cancer risks associated with PAH mixtures while others indicated that cancer risks might be
20 over- or underestimated.

21 Clement Associates (1988) evaluated the usefulness of selected RPFs to predict the tumor
22 incidence observed in a mouse skin painting assay. Schmähl et al. (1977) exposed groups of
23 mice to multiple doses of benzo[a]pyrene alone or to one of two defined mixtures of PAHs. The
24 first of these mixtures was comprised of benzo[a]pyrene, dibenz[a,h]anthracene,
25 benz[a]anthracene, and benzo[b]fluoranthene. The second mixture contained seven PAHs:
26 phenanthrene, anthracene, fluoranthene, pyrene, chrysene, benzo[e]pyrene, and
27 benzo[g,h,i]perylene. The predicted tumor incidences for the animals treated with the mixtures
28 were calculated from benzo[a]pyrene equivalents of the mixture and dose response modeling of
29 the Schmähl et al. (1977) data for benzo[a]pyrene alone. Predicted tumor incidences for the first
30 mixture were comparable to observed tumor incidences, while predicted values were greater than
31 the observed values for the second mixture.

32 Clement Associates (1990) examined the utility of a relative potency approach, in which
33 relative cancer potency estimates of eight PAHs were used, to predict the cancer potencies of
34 each of four complex mixtures containing many PAHs and other substances: gasoline engine
35 exhaust condensate, flue-gas condensate from coal-fired residential furnaces, diesel engine
36 exhaust condensate, and sidestream smoke condensate of cigarettes. Relative cancer potencies
37 (compared to benzo[a]pyrene) for each of the four complex mixtures were calculated using a
38 simplified version of the MVK two-stage model and tumor incidence data from a series of

1 published rat lung implantation studies that examined the carcinogenicity of each complex
2 mixture, various sub-fractions of the mixtures, and benzo[a]pyrene (Grimmer et al., 1988,
3 1987a, b, 1984). Lung implantation data (Deutsch-Wenzel, 1983) were used to calculate RPFs
4 for benzo[b]fluoranthene, benzo[e]pyrene, benzo[j]fluoranthene, benzo[k]fluoranthene,
5 indeno[1,2,3-c,d]pyrene, anthanthrene, benzo[g,h,i]perylene, and benzo[a]pyrene. The sum of
6 the benzo[a]pyrene exposure equivalents for the eight PAHs (i.e., the sum of the products of the
7 relative cancer potencies of the eight PAHs multiplied by their concentrations in the respective
8 complex mixtures) accounted for only minor fractions of the total carcinogenicity of each of the
9 four complex mixtures. When the assumption was made that each of the eight PAHs was as
10 potent as benzo[a]pyrene, the sum of the benzo[a]pyrene equivalents still accounted for only
11 minor fractions of the carcinogenicity of each mixture. Clement Associates (1990) concluded
12 that the cancer risk associated with a complex PAH mixture could not be estimated reliably from
13 measurements of a few indicator components, and further speculated that the underestimation
14 occurred because complex mixtures that occur in the environment contain many PAHs that have
15 not been studied in cancer tests, but which may be carcinogenic. In addition, complex PAH
16 mixtures found in the environment contain other potential carcinogens including substituted and
17 heterocyclic PAHs and non-PAH components.

18 Krewski et al. (1989) compared the observed tumor response rate for two PAH mixtures
19 in mice with the tumor response predicted using the RPFs for 13 individual PAHs; chemical
20 characterization of the mixture was not provided. With the exception of the highest dose, the
21 predicted tumor response for mixture 1 was similar to the observed response. For mixture 2, the
22 predicted tumor response value was higher than the observed response.

23 Goldstein et al. (1994) compared the experimental carcinogenicity of a MGP residue to
24 the predicted cancer risk using the Nisbet and LaGoy (1992) RPF scheme. The RPF method
25 underestimated the potential carcinogenicity of the mixture. The lack of correspondence was
26 suggested to be related to the presence of unidentified carcinogens in the mixture or possible
27 synergistic interactions between PAHs.

28 McClure et al. (1996) compared the tumor response predicted using U.S. EPA's 1993
29 provisional values (i.e., EOPPs) to the observed response reported in studies of mice exposed to
30 synthetic and complex mixtures of PAHs. The results of this analysis were mixed. EOPP values
31 closely predicted the mouse tumor response to subcutaneous or dermal application of synthetic
32 mixtures containing relatively potent carcinogens, while overestimating the response to synthetic
33 mixtures containing only relatively weak carcinogens (similar to findings of Clement Associates,
34 1988). Mouse skin tumor initiation with several coal liquids was closely predicted by the EOPP
35 approach; however, this method underestimated the tumor response from lung implantation of
36 coal furnace emission condensate and its PAH-containing neutral fraction.

37 The validation analyses that were performed by Muller et al. (1997) consisted of
38 component versus whole mixture risk comparisons using data for smoky coal and coke oven

1 emissions. The human lung cancer risks that were estimated using the RPF approach were
2 compared to the whole mixture cancer risk derived from epidemiology studies. The relative
3 content of PAHs (compared to benzo[a]pyrene) in the mixture was determined analytically (for
4 smoky coal and coke oven emissions) or was estimated as a standard mixture assumed to
5 represent an average PAH profile. The RPF method produced PAH cancer risk estimates that
6 were significantly lower than the risk estimates derived from epidemiology studies.

7 8 9 **4. EVALUATION OF THE CARCINOGENICITY OF INDIVIDUAL PAHs**

10 11 12 **4.1. DATABASE OF STUDIES ON PAH CARCINOGENICITY AND CANCER- 13 RELATED ENDPOINTS**

14 A database of primary literature relevant to the RPF approach for PAHs was developed.
15 This was accomplished through the following means:

- 16
17 • Definition of the study types that were considered relevant to relative potency
18 development;
- 19
20 • Review of reference lists from review articles and other secondary sources;
- 21
22 • Identification of selected PAHs to be included in search of open literature;
- 23
24 • Performance of targeted searches of open literature on selected PAHs; and
- 25
26 • Population of the database with references and meaningful keywords.
- 27

28 The study types that were considered most useful for RPF derivation were rodent
29 carcinogenicity bioassays (all routes) in which one or more PAHs was tested at the same time as
30 benzo[a]pyrene. In addition, in vivo and in vitro data for cancer-related endpoints (in which one
31 or more PAHs and benzo[a]pyrene were tested simultaneously) were obtained, including studies
32 on the formation of DNA adducts, mutagenicity, chromosomal aberrations, aneuploidy, DNA
33 damage/repair/recombination, unscheduled DNA synthesis, and cell transformation. Although it
34 would be possible to calculate RPFs from studies where a PAH and benzo[a]pyrene were tested
35 by the same laboratory using the same test system but at different times, this approach was not
36 considered because it could introduce differences in the dose-response information that are
37 unrelated to the chemical (e.g., variability associated with laboratory environment conditions,
38 animal handling, food supply). Thus, studies in which benzo[a]pyrene was not tested
39 simultaneously with another PAH were not considered in this analysis.

40 Studies of AhR binding/activation were not considered for use in deriving RPFs because
41 there is evidence indicating that highly mutagenic fjord-region PAHs are potent carcinogens,

1 despite a lower AhR affinity (reviewed by Bostrom et al., 2002). Likewise, some PAHs that
2 strongly activate the AhR, such as benzo[k]fluoranthene (Machala et al., 2001), are only weakly
3 carcinogenic. In addition, some studies have demonstrated the formation of DNA adducts in the
4 liver of AhR knockout mice following intraperitoneal or oral exposure to benzo[a]pyrene
5 (Sagredo et al., 2006; Uno et al., 2006; Kondraganti et al., 2003). These findings suggest that
6 there may be alternative (i.e., non-AhR mediated) mechanisms of benzo[a]pyrene activation in
7 the mouse liver, and the AhR affinity would not be a good predictor of carcinogenic potency.

8 Several study types were initially excluded from the database because they did not
9 provide carcinogenicity or cancer-related endpoint information for individual PAHs. These
10 include biomarker studies measuring DNA adducts in humans, studies of PAH metabolism, and
11 studies of PAH mixtures. Although these studies contain important information on human
12 exposure to PAH mixtures and the mode of action for PAH toxicity, they generally do not
13 contain dose-response information that would be useful for calculation of RPF estimates. In
14 addition to the primary bioassay and cancer-related endpoint studies described above, the RPF
15 database also includes information on PAH mode of carcinogenic action, interactions among
16 PAHs in mixtures, and the influence of exposure route on carcinogenic action of PAHs.

17 Primary studies were identified through review of available secondary sources and
18 review articles, supplemented by a targeted literature search. A complete list of the secondary
19 sources that were reviewed is contained in Appendix A. A literature search strategy was
20 developed by first constructing a list of the individual PAHs to be included. The list of PAHs
21 was restricted to unsubstituted PAHs with three or more fused aromatic rings containing only
22 carbon and hydrogen atoms, because these are the most widely studied members of the PAH
23 chemical class. Heterocyclic PACs or PAHs with substituted groups (e.g., alkyl, hydroxyl,
24 sulfhydryl, amino, or nitro groups) were not included. An initial search yielded a list of PAHs
25 for which toxicological data are available. Individual PAHs were then chosen for the literature
26 search because they were known to have toxicological information relevant to cancer, and in
27 most cases, their presence in environmental sources of PAH exposure was known. Using these
28 criteria and excluding benzo[a]pyrene, 74 PAHs were identified from primary and secondary
29 sources (see Table 2-1 in Section 2).

30 A search of the open literature was conducted in the Medline (PUBMED) database for
31 the PAHs identified. This database encompasses many of the studies that would also be found in
32 TOXLINE and Cancer Lit (the latter is no longer available as a separate database). Medline
33 (PUBMED) was searched by CASRN in conjunction with cancer and cancer-related endpoint
34 keywords. The search was not limited by publication date to ensure that all relevant studies were
35 identified. A few compounds did not show any result when searched by CASRN. For these
36 PAHs, an additional search by name was conducted. Search results, including Medline
37 keywords, were downloaded directly into the working RPF database.

1 In addition to Medline, computer searches of the following databases and websites were
2 conducted: IARC, World Health Organization (WHO), Agency for Toxic Substances and
3 Disease Registry (ATSDR), Health Canada, NTP, California EPA's Office of Environmental
4 Health Hazard Assessment (OEHHA), the Substance Registry System, CCRIS, TSCATS, and
5 DSSTOX.

6 Primary and secondary studies were entered in the RPF database and relevant keywords
7 (identifying study type, whether benzo[a]pyrene was included, route of administration, target
8 organ, etc.) were identified for each study. The list of keywords was developed in order to
9 facilitate database searching for references on a specific topic. Quality assurance procedures
10 were employed to ensure that database references were properly keyword-coded for retrieval.

11 12 **4.2. STUDIES IN HUMANS**

13 Numerous studies have evaluated cancer outcomes in PAH-exposed individuals
14 (reviewed in Bostrom et al., 2002; WHO, 1998; ATSDR, 1995; IARC, 1987, 1983, 1973).
15 However, since these exposures were to complex mixtures containing multiple PAH
16 carcinogens, they did not provide adequate data to evaluate the human carcinogenicity of
17 individual PAH compounds. Epidemiology studies have focused on occupational exposure to
18 PAH mixtures. Emissions from coke production, coal gasification, aluminum production, iron
19 and steel founding, coal tars, coal tar pitches, and soot have produced lung cancer in humans
20 (Bostrom et al., 2002). Skin and scrotal cancers have resulted from exposure to coal tar, coal tar
21 pitches, nonrefined mineral oils, shale oils, and soot (Larsen and Larsen, 1998; WHO, 1998;
22 ATSDR, 1995). Occupational studies clearly demonstrate exposure-response relationships for
23 PAH mixtures; however, quantitative estimates of risk are limited primarily to lung cancer in
24 coke oven workers (Bostrom et al., 2002; Larsen and Larsen, 1998; ATSDR, 1995).

25 Biomonitoring of exposure to PAHs includes measurement of DNA and protein adducts
26 and measurement of urinary metabolites of PAHs, studies on genetic polymorphisms of CYP450
27 and other enzymes, and changes in PAH metabolism (Bostrom et al., 2002; Larsen and Larsen,
28 1998; ATSDR, 1995). While these studies demonstrate the degree of exposure to PAHs from
29 various settings, quantitative dose-response data for humans exposed to individual PAHs are not
30 available. Cancer-related endpoint studies that were performed using human cell lines are
31 presented with similar assays in other mammalian species in Section 4.3.

32 33 **4.3. STUDIES IN ANIMALS**

34 The database of studies investigating cancer or cancer-related endpoints in animals
35 exposed to PAHs is extensive. For the purpose of developing relative potency estimates, only
36 those studies that included at least one selected PAH and benzo[a]pyrene as a reference
37 compound were reviewed. Studies were excluded if PAH potency comparisons were not
38 conducted in the same laboratory in concurrent experiments. Studies without benzo[a]pyrene are

1 listed in two separate bibliographies in Appendix B. Table B-1 of the appendix shows PAHs that
2 were assayed with or without benzo[a]pyrene. Table B-1 shows that 32 of the 74 PAHs were
3 assayed with benzo[a]pyrene; an additional 14 PAHs were not tested in the same study as
4 benzo[a]pyrene. The remaining 28 PAHs either have only cancer-related endpoint data, or have
5 neither bioassays nor cancer-related endpoint data. Bioassays without benzo[a]pyrene were
6 considered in the weight of evidence evaluation for individual PAHs (Section 6.1). Studies that
7 provided only information on PAH mixtures or PAH metabolites were not reviewed or
8 summarized for this analysis.

9 References in the database were sorted by keyword into the following major categories:
10 cancer bioassays, in vivo studies of cancer-related endpoints, and in vitro studies of cancer-
11 related endpoints. These categories were further divided by route (for bioassays) or by endpoint
12 (for cancer-related endpoints). Each study was reviewed, and critical study details were
13 extracted into tables (Tables 4-1 through 4-14) for each individual endpoint. Studies with data
14 on selected PAHs and benzo[a]pyrene were used, even if a particular PAH has not been
15 evaluated by U.S. EPA or IARC for carcinogenicity. Studies were included in the analysis if the
16 following selection criteria were met:

- 17 • Benzo[a]pyrene was tested simultaneously with another PAH;
- 18 • A statistically increased incidence of tumors was observed with benzo[a]pyrene
19 administration;
- 20 • Benzo[a]pyrene produced a statistically significant change in a cancer-related endpoint
21 finding;
- 22 • Benzo[a]pyrene produced a statistically significant change in a cancer-related endpoint
23 finding;
- 24 • Quantitative results were presented;
- 25 • The carcinogenic response observed in either the benzo[a]pyrene- or other PAH-treated
26 animals at the lowest dose level was not saturated (i.e., tumor incidence at the lowest
27 dose was <90%); and
- 28 • There were no study quality concerns or potential confounding factors that precluded use
29 (e.g., no concurrent control, different vehicles, strains, etc. were used for the tested PAH
30 and benzo[a]pyrene; use of cocarcinogenic vehicle; PAHs of questionable purity;
31 unexplained mortality in treated or control animals).
- 32 • There were no study quality concerns or potential confounding factors that precluded use
33 (e.g., no concurrent control, different vehicles, strains, etc. were used for the tested PAH
34 and benzo[a]pyrene; use of cocarcinogenic vehicle; PAHs of questionable purity;
35 unexplained mortality in treated or control animals).
- 36

Table 4-1. Study summaries: dermal bioassays of benzo[a]pyrene and at least one other PAH

Record number	Reference	Mouse ^a strain	Exposure	Follow up	Vehicle	Promoter	Tumor type	Positive result	Negative result	Meets selection criteria?	Comments
<i>Complete carcinogenicity studies</i>											
480	Bingham and Falk, 1969	CH3/He	3 times/wk	50 wk	Toluene or n-dodecane	None	Malignant and benign	BaA		No	BaP administered in different vehicle. n-Dodecane cocarcinogenic with BaA. No concurrent untreated, toluene or n-dodecane control.
600	Habs et al., 1980	NMRI	2 times/wk (4 times for CO) for life	until moribund or dead	Acetone (DMSO for CO)	None	Papilloma, carcinoma, sarcoma	BbF	BkF, BjF, CPcdP, CO, IP	Yes	
22390	Wynder and Hoffmann, 1959a	Swiss	3 times/wk	6–14 mo	cyclohexane	None	Papilloma, carcinoma	BbF, BjF	BghiF, BkF	No	Deaths prior to first tumor appearance. No concurrent control.
19320	LaVoie et al., 1979	HA/ICR Swiss albino	3 times/wk	Unspecified	Acetone	None	Unspecified	CH, BbF, BjF, DBaeP, DBahP, DBaiP	AC, Pyr, BghiF, BkF, AA, BeP, DBelP, IP, BghiP, N23eP	No	Reiterates data published elsewhere.
22400	Wynder and Hoffmann, 1959b	Swiss	3 times/wk	10–22 mo	Acetone	None	Papilloma, carcinoma	CH, DBahA, DBaiP	AC, BeP, Pyr, FA	No	Deaths prior to first tumor appearance. Not clear if BaP administered simultaneously. No concurrent control.
13640	Cavalieri et al., 1983	Swiss	2 times/wk for 48 wk	Until 2 cm tumor or 61 wk	Acetone	None	Papilloma, adenoma, carcinoma	CPcdP		Yes	Reports both incidence and multiplicity.
13650	Cavalieri et al., 1981b	Swiss	2 times/wk for 30 wk	Until 2 cm tumor, moribund or 57 wk	Acetone	None	Primarily squamous cell carcinoma	CPcdP	ACEP	Yes	Tumor incidence not useable because BaP tumor incidence was 100%. Tumor multiplicity data available for dose-response assessment.
620	Hoffmann and Wynder, 1966	Ha/ICR/Mil Swiss	3 times/wk for 12 mo	Up to 15 mo	Dioxane	None	Papillomas	DBaeP, DBahP, DBaiP, DBaeF		Yes	Paper in German. Paper reports compound as DBalP; LaCassagne et al. (1968) state that it is actually DBaeF. DBahP incidence ≥ 90% at lowest dose.
17660	Cavalieri et al., 1977	Swiss	2 times/wk for 30 wk	Until moribund, dead, or after 70 wk	Acetone	None	Papilloma, keratoacanthoma, carcinoma	DBahP, AA	BaA	Yes	DBahP incidence ≥ 90% at lowest dose.
610	Higginbotham et al., 1993	Swiss	2 times/wk	40 wk	Acetone	None	Papilloma, carcinoma	DBalP		No	No tumors with BaP.
19760	Masuda and Kagawa, 1972	Ha/ICR/Mil Swiss	3 times/wk for 60 applications	7 months	Dioxane	None	Unspecified	DBalP		No	No concurrent untreated or vehicle control; lowest dose DBalP gave 100% incidence.
18570	Hecht et al., 1974	Ha/ICR/Mil Swiss	3 times/wk for 17 mo	72 wk	Acetone	None	Unspecified	CH		No	BaP dose not reported.

Table 4-1. Study summaries: dermal bioassays of benzo[a]pyrene and at least one other PAH

Record number	Reference	Mouse ^a strain	Exposure	Follow up	Vehicle	Promoter	Tumor type	Positive result	Negative result	Meets selection criteria?	Comments
21310	Shubik et al., 1960	Syrian golden hamster	2 times/wk for 10 wk	75 wk	Mineral oil	None	None		DBaH _A , BaA	No	Small number of animals (5/sex/dose).
23310	Pfeiffer and Allen, 1948	Rhesus monkey	various	Various	Sesame oil	None	Various	Multiple		No	Sequential exposure to multiple compounds; no concurrent untreated control.
23840	Barry et al., 1935	Un-specified	2 times/wk	1–2+ yr	Benzene	None	Epithelioma, papilloma	Multiple		No	Test compounds from various sources gave differing results; purity may be suspect; use of benzene vehicle confounds tumorigenicity results; no benzene or untreated control.
<i>Initiation studies</i>											
24800	Nesnow et al., 1984	SENCAR	Single	31 wk	Acetone	12-O-tetradecanoyl-phorbol-13-acetate (TPA) 2 µg 2 times/wk for 30 wk	Papilloma	BeAC, BIAC		Yes	Reports both incidence and multiplicity.
21410	Slaga et al., 1978	CD-1	Single	27 wk	Acetone	TPA 10 µg 2 times/wk for 26 wk	Papilloma	BaA		Yes	Tumor incidence data not useable because BaP gave 93% tumor incidence. Tumor multiplicity data available for dose-response assessment.
630	LaVoie et al., 1982	CrI:CD-1[ICR]BR	10 subdoses every other d	Unspecified	Acetone	TPA 3 times/wk 20 wk	Primarily squamous cell papilloma	BbF, BjF, BkF		Yes	Reports both incidence and multiplicity.
16310	Weyand et al., 1992	CrI:CD-1	5 or 10 applications given every other d	Until promotion complete	Acetone	TPA 2.5 µg 3 times/wk for 20 wk	Unspecified	BjF		Yes	Tumor incidence data not useable because BaP gave 100% tumor incidence. Tumor multiplicity data available for dose-response assessment. DNA adducts, mutagenicity also evaluated.
10200	El-Bayoumy et al., 1982	CrI:CD-1[ICR]BR	10 subdoses every other d	Unspecified	Acetone	TPA 2.5 µg 3 times/wk for 25 wk	Primarily squamous cell papilloma	CH	Pery, Pyr	Yes	Tumor incidence data not useable because single dose CH gave 100% tumor incidence; BaP gave 90% tumor incidence. Tumor multiplicity data available for dose-response assessment.
18570	Hecht et al., 1974	Ha/ICR/Mil Swiss	10 subdoses every other d	Until promotion complete	Acetone	TPA 2.5 µg 3 times/wk for 20 wk	Unspecified	CH		Yes	Reports both incidence and multiplicity.

Table 4-1. Study summaries: dermal bioassays of benzo[a]pyrene and at least one other PAH

Record number	Reference	Mouse ^a strain	Exposure	Follow up	Vehicle	Promoter	Tumor type	Positive result	Negative result	Meets selection criteria?	Comments
22500	Van Duuren et al., 1966	ICR/HA	Single	63 wk	Acetone	Croton resin, 25 µg 3 times/wk	Papilloma, carcinoma	CH, BbF	BghiF	No	BaP gave 100% tumor incidence. Corollary data with acetone only as promotion agent not included.
24300	Rice et al., 1985	CD-1	10 subdoses every other d	Until promotion complete	Acetone	TPA 0.0025% 3 times/wk for 20 wk	Unspecified	CH, CPdefC		Yes	Tumor incidence data not useable because all compounds gave >90% tumor incidence. Tumor multiplicity data available for dose-response assessment.
19320	LaVoie et al., 1979	HA/ICR Swiss albino	10 subdoses every other d	Until promotion complete	Acetone or dioxane	TPA 2.5 µg 3 times/wk for 20 wk or croton oil 2.5% 3 times/wk	Unspecified	CH, DBaeP, DBahP, DBaiP, N23eP	FA, AA, DBelP, BghiP, IP	No	Reiterates data published elsewhere.
21420	Slaga, et al., 1980	Sencar	Single	15 wk	Acetone	TPA 2 µg 2 times/wk	Papilloma	CH, DBahA,	BeP, DBacA	Yes	Not clear if BaP done simultaneously but protocol, vehicle, follow up same. Reports both incidence and multiplicity.
15640	Ravch et al., 1982	Sencar	Single	25 wk	Un-specified	TPA 2 µg 2 times/wk for 25 wk	Papilloma	CPcdP		Yes	Reports both incidence and multiplicity.
620	Hoffmann and Wynder, 1966	Ha/ICR/Mil Swiss	Single	6 mo	Dioxane	Croton oil	Papillomas	DBaeF, DBaeP, DBahP, DBaiP, N23eP	IP, AA, BghiP, DBelP	Yes	Paper reports compound as DBaP; LaCassagne et al. (1968) state that it is actually DBaeF.
610	Higginbotham et al., 1993	Sencar	Single	27 wk	Acetone	TPA 2.6 nmol, 2 times/wk	Papillomas, few carcinomas	DBaP		No	No tumors with BaP.
13660	Cavalieri et al., 1991	Sencar	Single	16 wk and 27 wk (two experiments)	Acetone	TPA 3.24 nmol 2 times/wk for 11 wk	Primarily papilloma	DBaP		Yes	Tumor incidence data not useable because lowest dose DBaP gave >90% tumor incidence. Tumor multiplicity data from both experiments available for dose-response assessment.
19360	LaVoie et al., 1985	CrI:CD/1 (ICR)BR	10 subdoses every other d	Unspecified	Acetone	TPA 2.5 µg 3 times/wk for 20 wk	Unspecified		AC	Yes	
13650	Cavalieri et al., 1981b	CD-1	10 subdoses every other d	57 wk	Acetone	TPA 0.017 µmol 2 times/wk for 40 wk	Papilloma	CPcdP	ACEP	Yes	Reports both incidence and multiplicity.

Table 4-1. Study summaries: dermal bioassays of benzo[a]pyrene and at least one other PAH

Record number	Reference	Mouse ^a strain	Exposure	Follow up	Vehicle	Promoter	Tumor type	Positive result	Negative result	Meets selection criteria?	Comments
20830	Roe, 1962	Albino	Single	Until promotion complete	Acetone	Croton oil once/wk for 20 wk	Papilloma		PH	No	BaP not simultaneous.
16440	Wood et al., 1980	CD-1	Single	27 wk	Acetone	TPA 16 nmol 2 times/wk for 26 weeks	Unspecified		Pyr, CPcdP	Yes	
17450	Brune et al., 1978	NMRI	Unspecified	Unspecified	Un-specified	TPA	Unspecified		AC	No	Study design not reported. Results reported qualitatively.
18680	Hoffmann et al., 1972	Ha/ICR/Mil Swiss	10 subdoses every other d	Until promotion complete	Acetone	Croton oil 2.5% for 20 wk	Unspecified		FA	Yes	
19420	LaVoie et al., 1981	HA/ICR Swiss albino	10 subdoses every other d	Unspecified	Acetone	TPA 2.5 µg 3 times/wk for 20 wk	Unspecified		PH	Yes	
13660	Cavalieri et al., 1991	SENCAR	Single	27 wk	Acetone	None	Primarily papilloma	DBaP		Yes	Initiating dose only; no promoter. Tumor incidence data not useable because lowest dose DBaP gave >90% tumor incidence. Tumor multiplicity data available for dose-response assessment.
15700	Rice et al., 1988	CD-1	10 subdoses every other d	24 wk	Acetone	TPA 2.5 µg 3 times/wk for 20 wk	Unspecified	CH, BbcAC, CPdefC		Yes	Not clear if BaP done simultaneously for all PAHs.
<i>Cocarcinogenicity studies</i>											
18700	Horton and Christian, 1974	C3H	2 times/wk for 80 wk	82 wk	n-Do-decane/ decalin mixture	None	Carcinoma, papilloma	DBacA, Pyr	CH, FA, Tphen, Pery,	No	Not clear if BaP done simultaneously. Experiments with decalin (noncarcinogen) and 50/50 decalin/ dodecane mix (cocarcinogenic). No data for BaP in 50/50 mix. No vehicle control in decalin.
21430	Slaga et al., 1979	CD-1	Single	30 wk	Acetone	TPA 10 µg 2 times/wk for 30 wk	Papilloma	BeP		No	No concurrent control. Study aimed at exploring interactions; not clear if BaP done simultaneously.
21840	Van Duuren and Goldschmidt, 1976	ICR/Ha Swiss	3 times/wk	368 or 440 d	Acetone	None	Papilloma		Pyr, BghiP, BeP, FA	Yes	
21850	Van Duuren et al., 1973	ICR/HA	3 times/wk for 52 wk	52 wk	Acetone	None	None		Pyr, BghiP, BeP	No	Qualitative results reported.
21920	Warshawsky et al., 1993	C3H/HEJ	2 times/wk	Until lesion developed or 104 wk	Toluene or n-do-decane	None	Unspecified		AC, CH, Pyr, FA, PH	No	No tumors with BaP.

^aExcept where noted, all studies were conducted in mice.

Table 4-2. Study summaries: intraperitoneal bioassays of benzo[a]pyrene and at least one other PAH

Record number	Reference	Mouse strain ^a	Exposure	Follow up	Vehicle	Target organ(s)	Tumor type(s)	Positive result	Negative result	Meets selection criteria?	Comments
<i>Newborn mouse studies</i>											
13610	Busby et al., 1984	Swiss-Webster BLU:Ha (ICR)	1st, 8th, 15th d	26 wk	DMSO	Lung	Adenoma, adenocarcinoma	FA		Yes	Tumor incidence data not useable because lowest dose BaP gave >90% tumor incidence. Tumor multiplicity data available for dose-response assessment.
17560	Busby et al., 1989	Swiss-Webster BLU:Ha (ICR)	1st, 8th, 15th d	26 wk	DMSO	Lung	Adenoma, adenocarcinoma	FA	Pyr, CH	Yes	Reports both incidence and multiplicity.
640	LaVoie et al., 1987	CD-1	1st, 8th, 15th d	52 wk	DMSO	Lung, liver	Adenoma, hepatoma	BbF, BjF	BkF, IP	Yes	
7510	LaVoie et al., 1994	CD-1	1st, 8th, 15th d	12 mo	DMSO	Lung, liver	Foci, adenoma, carcinoma	FA		Yes	Reports both incidence and multiplicity.
22040	Weyand and LaVoie, 1988	CD-1	1st, 8th, 15th d	Not reported	DMSO	Lung, liver	Unspecified	Not reported		No	Abstract only; dose-response information not included.
22510	Wislocki et al., 1986	CD-1	1st, 8th, 15th d	12 mo	DMSO	Lung, liver, lymphatic system	Adenoma, carcinoma, lymphoma	CH, BaA	Pyr	Yes	Reports both incidence and multiplicity.
<i>Studies in adult A/J mice</i>											
11190	Mass et al., 1993	A/J	Single	8 mo	Tri-caprylin	Lung	Adenoma, carcinoma	BjAC		No	Reiterates data reported elsewhere (Record 24590).
23960 and 23450	Nesnow et al., 1998a, 1995	A/J	Single	8 mo	Tri-caprylin	Lung	Adenoma	BbF, DBahA, CPcdP		No	Reiterates data reported elsewhere (Record 24590).
22670	Nesnow et al., 1996	A/J	Single	8 mo	Tri-caprylin	Lung	Adenoma	BbF, DBahA, CPcdP		No	(Reiterates data reported elsewhere (Record 24590).)
24590	Nesnow et al., 1998b	A/J	Single	8 mo	Tri-caprylin	Lung	Adenoma	CPcdP, BbF, DBahA, BjAC, DBalP		Yes	Raw data obtained courtesy of S. Nesnow. Tumor incidence for BaP was 100% at lowest dose with significant increase over control; tumor multiplicity data available.
20920	Ross et al., 1995	A/J	Single	240 d	Tri-caprylin	Lung	Adenoma	BbF, DBahA, CPcdP	Pyr	No	Reiterates data reported elsewhere (Record 24590).

^aAll studies were conducted in mice.

Table 4-3. Study summaries: subcutaneous bioassays of benzo[a]pyrene and at least one other PAH

Record number	Reference	Species	Strain	Exposure site	Exposure	Follow up	Vehicle	Target organ(s)	Tumor type(s)	Positive result	Negative result	Meets selection criteria?	Comments
23840	Barry et al., 1935	Mouse	Unspecified	Unspecified	Single	1–2+ yr	Lard	Injection site	Sarcoma	Multiple		No	Test compounds from various sources gave differing results; purity may be suspect; no untreated control.
220	Bryan and Shimkin, 1943	Mouse	C3H	Right axilla	Single	until 20 mm tumor	Tricaprylin	Injection site	Unspecified	DBahA		No	No concurrent untreated control.
18350	Grant and Roe, 1963	Mouse	Albino	Neck	1st d after birth	52–62 wk	Aqueous gelatin	Lung	Adenoma		PH	Yes	
23200	Homburger et al., 1972	Hamster	Various	Groin	Single	52 wk	Tricaprylin	Injection site; lung	Various	BaA		No	Study aimed at evaluating strain specificity of tumorigenicity. BaA results equivocal. Not clear if BaP treatment simultaneous. "Aged" mice used as controls; aged mice allowed to live 16 weeks longer.
660	Pfeiffer, 1977	Mouse	NMRI	Neck	Single	114 wk	Tricaprylin	Injection site	Sarcoma	DBahA		No	Less than 10% of 100 control mice alive at 114 wk; control data not provided.
23310	Pfeiffer and Allen, 1948	Monkey	Rhesus	Various	Various	variable	Sesame oil	Various	Various	Multiple		No	Sequential exposure to multiple compounds; no concurrent untreated control.
24290	Rask-Nielson, 1950	Mouse	Street	Thymus, lung, mammary area	Single	30 mo	Paraffin	Various	Various	DBahA		No	Number of control and exposed varies by tumor type reported; BaP nontumorigenic; DBahA results equivocal; results unclear.
24310	Roe and Waters, 1967	Mouse	Swiss albino	Not specified	1st d after birth	50–60 wk	Aqueous gelatin	Liver	Hepatoma	PH		No	Study methodology and results not detailed; PH results equivocal.
21560	Steiner, 1955	Mouse	C57BL	Interscapular	Single	22–28 mo	Tricaprylin	Injection site	Sarcoma	DBahA, BaA, CH	AC, PH	No	No concurrent untreated control; study aimed at evaluating interactions.

1

Table 4-4. Study summaries: oral bioassays of benzo[a]pyrene and at least one other PAH

Record number	Reference	Species	Strain	Exposure route	Exposure	Follow up	Target organ(s)	Tumor type(s)	Positive result	Negative result	Meets selection criteria?	Comments
17280	Biancifiiori and Caschera, 1962	Mouse	BALB/c	Gavage	2 times/wk, 15 wk	Variable; 50–60 wk	Mammary gland	Carcinomas and sarcomas	DBahA		No	Tumors observed after DBahA only in pseudopregnant mice, not virgin mice.
23880	Huggins and Yang, 1962	Rat	Sprague-Dawley	Gavage	Single	Not reported	Mammary gland	Unspecified		BaA, PH	No	Untreated control information not included.

2

3

Table 4-5. Study summaries: other route bioassays of benzo[a]pyrene and at least one other PAH

Record number	Reference	Species	Strain	Exposure route	Exposure	Follow up	Vehicle	Target organ(s)	Tumor type(s)	Positive result	Negative result	Meets selection criteria?	Comments
21750	Topping et al., 1981	Rat	F344	Implantation in transplanted tracheas	Release from pellet	28 mo	Beeswax pellet	Tracheal epithelium	Carcinoma, sarcoma		BeP	No	Interaction information included.
17620	Cavalieri et al., 1988b	Rat	Sprague-Dawley	Intramamillary	Single	20 wk	None	Mammary	Adeno-carcinoma, adenofibroma, fibrosarcoma		DBahA, BaA	No	Control data from untreated mammary glands of same rats.
13660	Cavalieri et al., 1991	Rat	Sprague-Dawley	Intramamillary	Single	Until 2 cm tumor or 24 wk	Trioctanoin	Mammary, other	Adeno-carcinoma, adenofibroma, fibrosarcoma, squamous cell carcinoma	DBaP		No	DBaP produced tumors in all animals at the lowest dose.
21620	Sugiyama, 1973	Rat	Long Evans	Intramuscular	Single	9 mo	Sesame oil	Injection site	Sarcoma		BaA	No	BaP gave 100% tumor incidence.
20280	Pataki and Huggins, 1969	Rat	Sprague-Dawley	Intravenous	3 doses 3 d apart	98 d	Lipid emulsion	Mammary	Unspecified		BaA	No	No control group.
17940	Deutsch-Wenzel et al., 1983	Rat	Osborne-Mendel	Lung implantation	Release from pellet	Until moribund or dead	Beeswax/ trioctanoin	Lung	Carcinoma, sarcoma	BbF, BjF, BkF, IP, AA, BghiP	BeP	Yes	
22000	Wenzel-Hartung et al., 1990	Rat	Osborne-Mendel	Lung implantation	Release from pellet	Until moribund or dead	Beeswax/ trioctanoin	Lung	Carcinoma	CH, DBahA	PH	Yes	
21500	Solt et al., 1987	Hamster	Syrian golden	Painting buccal pouch	2 times/wk for 20 wk	Up to 44 wk	Paraffin oil	Buccal pouch	Carcinoma		BaA	No	Fewer than 20 animals per group; negative result.
23910	Nikonova, 1977	Mouse	A	Subcutaneous (F0) and transplacental (F1)	GD 18 or 19	1 yr	Sunflower oil	Lung, mammary, liver, injection site	Adenoma		Pyr	No	Transplacental exposure not quantified.

Table 4-6. Study summaries: in vivo DNA adducts with benzo[a]pyrene and at least one other PAH

Record number	Reference	Route of administration	Exposure frequency	Hours between dosing and sacrifice	Tissue analyzed	Method of analysis	PAHs evaluated ^a	Meets selection criteria?	Comments
6210	Arif et al., 1997	Intramamillary	Single dose	48	Mammary epithelium, lung	[³² P] postlabeling	DBaP	Yes	
17420	Brookes and Lawley, 1964	Dermal	Single dose	various to ~12 d	Skin	[³ H]- prelabeling	DBaC, DBaH	No	Data on individual compounds not reported.
17630	Cavalieri et al., 1981a	Dermal	Single dose	4, 24	Skin	[³ H] or [¹⁴ C] prelabeling	CPcdP, ACEP	Yes	
18810	Hughes and Phillips, 1990	Dermal	Single dose	0.5, 1, 2, 4, 7, 21, 84 d	Skin, lung	[³² P] postlabeling	DBaP, DBaeP, DBaH, DBaI	Yes	24-hr experiment with DBaeP and DBaP; 84-d experiment with all.
18790	Hughes and Phillips, 1991	Dermal	Single dose	24	Skin	[³² P] postlabeling	DBaeP	No	No quantitative information; abstract only.
10900	Koganti et al., 2000	Oral-diet	14 d	not stated	Lung	[³² P] postlabeling	BcFE, BaFE, BbFE	No	Not quantified.
13200	Li et al., 2002	Oral-gavage or oral-diet	1 time/d for 1–4 d; diet 14 d		Mammary gland and liver; lung	[³² P] postlabeling	BcFE	No	Not quantified; BaP administered by gavage, BcFE admin in diet.
11190	Mass et al., 1993	Intraperitoneal	Single dose	24, 48, 72	Lung	[³² P] postlabeling	BjAC	Yes	
8010	Nesnow et al., 1993b	Intraperitoneal	Single dose	1, 3, 7, 14, 28, 56 d	Lung, liver, peripheral blood lymphocytes	[³² P] postlabeling	BbF	Yes	Peaks differ temporally; study also correlates number of adducts in organs.
22670	Nesnow et al., 1996	Intraperitoneal	Single dose	7 d	Lung	[³² P] postlabeling	BbF, DBaH, CPcdP	No	Not quantified.
23960	Nesnow et al., 1995	Intraperitoneal	Single dose	7 d	Lung	[³² P] postlabeling	BbF, DBaH, CPcdP	No	Not quantified.
24590	Nesnow et al., 1998a	Intraperitoneal	Single dose	various to 21 d	Lung	[³² P] postlabeling	BbF, CPcdP, DBaH, DBaP	Yes	Used data from Ross et al., 1995 (ref 20920) to calculate slope.
22810	Phillips et al., 1979	Dermal	Single dose	19, 24, 48, 72, 96, 120, 144	Skin	[³ H]-Prelabeling	BaA, DBaC, DBaH	Yes	
20650	Reddy et al., 1984	Dermal	4 doses (0, 6, 30, 54 hr)	24	Skin	[³² P] postlabeling	AC, BaA, BghiP, BeP, CH, DBaC, DBaH, Pery, Pyr	No	Semiquantitative data only.
20920	Ross et al., 1995	Intraperitoneal	Single dose	0, 1, 3, 5, 7, 14, 21 d	Lung	[³² P] postlabeling	BbF, CPcdP, DBaH	No	Reiterates data published elsewhere (see 24590)
16310	Weyand et al., 1992	Dermal	Single dose	24	Skin	[³² P] postlabeling	BjF	No	Not quantified.
22040	Weyand and LaVoie, 1988	Intraperitoneal	Postnatal d 1, 8, 15	24	Lung, liver	[³² P] postlabeling	BbF, BjF, BkF	No	No quantitative data; abstract only.

Table 4-6. Study summaries: in vivo DNA adducts with benzo[a]pyrene and at least one other PAH

Record number	Reference	Route of administration	Exposure frequency	Hours between dosing and sacrifice	Tissue analyzed	Method of analysis	PAHs evaluated ^a	Meets selection criteria?	Comments
24790	Kligerman et al., 2002	Intraperitoneal and oral	Single dose	7 d	Peripheral blood lymphocytes	[³² P] postlabeling	BaA, BbF, CH	Yes	Data in both rats and mice.

^aPositive findings were reported for all PAHs evaluated.

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Table 4-7. Study summaries: in vivo clastogenicity or sister chromatid exchange with benzo[a]pyrene and at least one other PAH

Record number	Reference	Species	Strain	Route of administration	Vehicle	Exposure	Hours between dosing and sacrifice	Tissue analyzed	Clastogenic endpoint	Positive results	Negative results	Meets selection criteria?	Comments
24740	Allen et al., 1999	Mice	A/J or p53 +/+, +/-, and -/-	Intraperitoneal	Tricaprylin	Single	48 or 72 hr	Bone marrow or peripheral blood	Micro-nuclei	DBaP		Yes	
14270	He and Baker, 1991	Mice	HRA/Skh hairless	Dermal	Acetone	Single	24 hr	Keratinocytes	Micro-nuclei	CH	Pyr	Yes	
17190	Bayer, 1978	Hamsters	Chinese	Intraperitoneal	Tricaprylin	Single	24 hr for aberrations; 30 hr for micronuclei	Bone marrow	Gaps, breaks, micro-nuclei, SCEs	PH (high dose only)		Yes	
19030	Katz et al., 1981	Mice	B6C3F ₁ /BR	Intraperitoneal	DMSO	At 0 and 24 hr	various; 24, 30, 48, 72 hr after last dose	Bone marrow	micro-nuclei		DBaP, AC, BghiP, Pyr	No	No quantitative data.
24720	Kligerman et al., 1986	Mice	C57BL6	Gavage	Corn oil	Single	23.5–25 hr	Peripheral blood	SCEs	BIAC		Yes	
24790	Kligerman et al., 2002	Mice and rats	CD-1 Swiss mice; CD rats	Oral and intraperitoneal	Sunflower seed oil	Single	7 d	Whole blood or mono-nuclear leukocytes	SCE, micro-nuclei	BaA, BbF, CH		Yes	All positive for SCE via intraperitoneal administration; mixed results for oral administration.
20200	Oshiro et al., 1992	Mice	CD-1	Peroral	PEG	1 time/d, 4 d	24 hr after 2nd and 4th treatment	Peripheral blood	Micro-nuclei		Pyr, AC	No	No quantitative data; published as abstract.
20230	Paika et al., 1981	Mice	CBA/J	Intraperitoneal	DMSO	single	16–20 hr	Bone marrow	SCEs		Pyr	No	No quantitative data.
20950	Roszinsky-Kocher et al., 1979	Hamsters	Chinese	Intraperitoneal	Tricapryline	2 doses 24 hr apart	24 hr after 2nd treatment	Bone marrow	SCEs, aberrations	PH, CH, DBaH, BaA, BbF, BeP	AC	Yes	Positive results for SCEs, not aberrations.
21050	Salamone et al., 1981	Mice	B6C3F ₁	Intraperitoneal	Not specified	2 doses 24 hr apart	24, 48, 72 hr after 2nd treatment	Bone marrow	Micro-nuclei		AC, Pyr	Yes	
21770	Tsushima and Matter, 1981	Mice	CD-1	Intraperitoneal	DMSO	2 doses 24 hr apart	6 hr after 2nd treatment	Bone marrow	Micro-nuclei		Pyr	Yes	
21390	Sirianni and Huang, 1978	Mice	C3H/St	V79 cells in diffusion chamber implanted in peritoneal cavity of mice				Chinese hamster V79 cells	SCEs		AC, Pyr, Pery	Yes	
21620	Sugiyama, 1973	Rats	Long-Evans	Intravenous	Lipid emulsion	Single	12, 24 hr	Bone marrow	Gaps, breaks		BaA	Yes	

Table 4-8. Study summaries: in vivo mutagenicity with benzo[a]pyrene and at least one other PAH

Record number	Reference	Species/strain	Route of administration	Exposure frequency/follow up	Mutagenic endpoint	Positive result	Negative result	Meets selection criteria?	Comments
18130	Fahmy and Fahmy, 1980	<i>Drosophila melanogaster</i>	Suspension in media	48–72 hr	Somatic mutation; eye color mosaicism		BaA	Yes	
13980	Frolich and Wurgler, 1990	<i>D. melanogaster</i>	Suspension in media	48–72 hr	Somatic mutation and recombination test (SMART); wing spots		BaA	No	Inconsistent results for BaA; significant effects only seen with cross-breeding of strains selected for enhanced metabolic activity (not standard strains).
11190	Mass et al., 1993	A/J mice	Intraperitoneal	3 d/8 mo	Mutations in codon 12 of the Ki-ras oncogene; polymerase chain reaction (PCR) and DNA sequencing of lung tumor DNA	BjAC		No	Quantitative dose-response data were not available. Different mutation sequences observed; GGT→TGT for BaP and GGT→CGT for BjAC; mutation sequence for BjAC may correlate with cyclopenta-adduct formation.
23960	Nesnow et al., 1995	A/J mice	Intraperitoneal	Single injection/8 mo	Mutations in codon 12 of the Ki-ras oncogene; PCR and DNA sequencing of lung tumor DNA	BbF, DBahA, CPcdP		No	Quantitative dose-response data were not available. GGT→TGT mutations for BaP and BbF; GGT→CGT for CPcdP; no mutations seen for DBahA.
22670	Nesnow et al., 1996	A/J mice	Intraperitoneal	Single injection/8 mo	Mutations in codon 12 of the Ki-ras oncogene; PCR and DNA sequencing of lung tumor DNA	BbF, DBahA, CPcdP		No	Quantitative dose response data were not available. GGT→TGT mutations for BaP and BbF; GGT→CGT for CPcdP; no mutations seen for DBahA.
24590	Nesnow et al., 1998b	A/J mice	Intraperitoneal	Single injection/8 mo	Mutations in codons 12 and 61 of the Ki-ras oncogene; PCR and DNA sequencing of lung tumor DNA	BbF, DBahA, CPcdP, BjAC, DBalP		No	Quantitative dose-response data were not available. Mutations in codon 12, GGT→TGT for BaP, BbF, and DBalP; GGT→CGT for CPcdP and BjAC; no mutations seen for DBahA; GTT mutations seen for all other PAHs. Only DBalP caused mutations in codon 61.
21370	Simmon et al., 1979	Swiss Webster mice	PAHs intramuscular or peroral; microorganisms intraperitoneal	Single injection/4 hr	Intraperitoneal host mediated assay; mutagenicity in <i>S. typhimurium</i> and <i>S. cerevisiae</i> of recovered microorganisms		AC, BaA, BeP, CH, PH	No	Assay was not considered sensitive enough for detecting carcinogens.
21830	Valencia and Houtchens, 1981	<i>D. melanogaster</i>	Filter feeding	48–72 hr	Sex-linked recessive lethal test		Pyr	No	Results were negative for BaP.
22450	Zijlstra and Vogel, 1984	<i>D. melanogaster</i>	Abdominal injection	Not applicable	Sex-linked recessive lethal test; 2–3 translocation and ring-X loss		BaA	No	Results were negative for BaP.

Table 4-9. Study summaries: in vitro bacterial mutagenicity with benzo[a]pyrene and at least one other PAH

Record number	Reference	Salmonella strain(s)	Activation system	Positive result	Negative result	Meets selection criteria?	Comments
17030	Andrews et al., 1978	TA100, TA1527, TA1538	Ar S9 and others	AA, DBahA, DBaJA, DBaCA, BghiP, BeP		Yes	TA100 results include BaP.
23830	Baker et al., 1980	TA100	Guinea pig MC S9 and others	DBaiP, BaA, DBaCA, DBahA		Yes	
23660	Bartsch et al., 1980	TA100, TA1535, TA98	Rat MC S9	BaA		Yes	
17380	Bos et al., 1988	TA98, TA100	Rat Ar S9	PH, Pyr		Yes	Qualitative data for other PAHs (no BaP); quantitative data with BaP comparison for PH and Pyr in TA100.
9560	Carver et al., 1985	TA98, TA100	S9	Pery		No	The response varied at different concentrations of S9; BaP was more potent at low S9 while Pery was more potent at high S9.
17590	Carver et al., 1986	TA100	Ar rat and Ar hamster S9	BaA, BghiF, Pery		Yes	Qualitative data also presented for other PAHs. S9 concentration varied; 400 µL/plate optimal.
17630	Cavaliere et al., 1981a	TM677	Ar S9	CPcdP, ACEP, Pyr		Yes	BaP data from previous publication used. Dose-response data not provided for Pyr.
9620	Chang et al., 2002	TA100	Rat Ar S9	BghiF, BcPH		Yes	
24030	De Flora et al., 1984	TA1535, TA1537, TA1538, TA98, TA100	Rat AR S9	BaA, Pery, BeP	AC	Yes	
13860	Devanesan et al., 1990	TA100, TA98	Rat Ar S9	DBaeP, DBalP		No	No concurrent control.
18030	Dunkel et al., 1984	TA1535, TA1537, TA1538, TA98, TA100	Rat, mouse, hamster Ar S9	BaA, BeP, PH, Pyr	AC	No	Dose-response data not provided.
18050	Eisenstadt and Gold, 1978	TA1537, TA100	Rat Ar S9	CPcdP		Yes	
18180	Florin et al., 1980	TA98, TA100	Rat Ar and MC S9	BaA, CH, Pery, CO		Yes	
24080	Gibson et al., 1978	TA1535, TA1537, TA1538, TA98	Nonenzymatic (gamma radiation)	BaA, BghiP, CH, FE, Pyr	DBahA, AC, Pic, Tphen	Yes	AN, PH also tested; toxicity interfered with mutagenicity testing.
14080	Gold and Eisenstadt, 1980	TA100	Rat MC S9	CPcdP		Yes	BaP and CPcdP maximal responses occurred at different S9 levels.
14170	Guthrie et al., 1982	TA98, TA100	Rat Ar S9 compare to PGS from ram seminal vesicles	BaA, CH		No	BaP tested in TA98, BaA and CH tested in TA100.
14260	Hass et al., 1981	TA98, TA100	Rat Ar S9		BeP	Yes	

Table 4-9. Study summaries: in vitro bacterial mutagenicity with benzo[a]pyrene and at least one other PAH

Record number	Reference	Salmonella strain(s)	Activation system	Positive result	Negative result	Meets selection criteria?	Comments
18650	Hermann, 1981	TA98	Rat Ar S9	BbA, BaA, CH, FA, Tphen, BeP, DBacA, DBahA, BbF, Pery, DBalP, DBaiP, AA, CO	AC, PH, FE, Pyr, BbFE	Yes	
10670	Johnsen et al., 1997	TA98	Rat control or PB S9	BjAC, BIAC		Yes	
19000	Kaden et al., 1979	TM677	Rat Ar or PB S9	AN, ANL, Pyr, BbFE, CPcdP, BaA, CH, Tphen, FA, BeP, Pery, BghiP, AA, DBacA, DBahA, DBbeF	FE, AC, PH, Pic, CO	Yes	Mutagenic activity relative to BaP reported.
24680	Lafleur et al., 1993	TM677	Ar PMS	CPcdP, APA, ACEA, CPhiAPA, CPhiACEA		Yes	
19320	LaVoie et al., 1979	TA98, TA100	Rat Ar S9	BeP, Pery		Yes	Several other PAHs were evaluated, but not concurrent with BaP.
19360	LaVoie et al., 1985	TA98, TA100	Rat Ar S9		AC	Yes	
23650	McCann et al., 1975	TA1535, TA1537, TA98, TA100	Rat Ar S9	DBaiP, BeP, DBacA, DBahA, CH, BaA	Pyr, AC, PH, FE	Yes	
15170	Norpoth et al., 1984	TA100	Rat and mouse S9; induction by Clophen A50 and 18 PAHs	BaA		No	S9 composition was different for BaA and BaP; result cannot be compared.
20220	Pahlman and Pelkonen, 1987	TA100	S9 from control, MC, or TCDD treated rats and mice	BaA, CH, Tphen, DBacA, DBahA	AN, AC, PH, FE, Pyr, BeP, Pery, PCE	Yes	
20530	Penman et al., 1980	TM677	Rat Ar or PB S9	Pery, CPcdP, DBacA		No	No concurrent control values were reported.
20450	Phillipson and Ioannides, 1989	TA100	S9 isolated from mouse, hamster, rat, pig, and human	BaA, DBaiP, DBahA		Yes	
20490	Poncelet et al., 1978	TA1530, TA1535, TA1537, TA1538, TA98, TA100	S9 (origin unknown)	CO, Tphen, FA, BghiP	BbF	No	Qualitative data reported in published abstract.
20560	Probst et al., 1981	TA1530, TA1535, TA1537, TA1538, TA98, TA100	Rat Ar S9	BbA, DBacA	AC, DBahA, PH, Pyr, DBaiP	No	Data reported as minimum mutagenic concentration (nmol/mL).
20880	Rosenkranz and Poirier, 1979	TA1530, TA1535	Uninduced rat S9		AC, BaA, BeP, CH, PH	Yes	
21000	Sakai et al., 1985	TA97, TA98, TA100	Rat Ar S9	FE (equiv.), AC, PH, FA, CH, Pyr, BeP, Pery, BghiP, CO		Yes	
21040	Salamone et al., 1979a	TA1535, TA1537, TA1538, TA98, TA100	Rat Ar S9	BaA, BeP (equiv), BghiP, DBaiP, BPH, CH, CO, DBacA, PCE	AC, BaFE, BbFE, FA, Pery, Pyr	No	Increase in spontaneous mutation rate was indicated, but dose data were not provided.

Table 4-9. Study summaries: in vitro bacterial mutagenicity with benzo[a]pyrene and at least one other PAH

Record number	Reference	Salmonella strain(s)	Activation system	Positive result	Negative result	Meets selection criteria?	Comments
13260	Salamone et al., 1979b	TA98, TA100	Rat Ar S9	DBaiP		No	Dose-response data were not completely reported; maximal response information (dose and number of revertants) was presented in text; BaP max response at different S9 than DBaiP.
11860	Sangaiah et al., 1983	TA1535, TA1537, TA1538, TA98, TA100	Rat Ar S9	BjAC		Yes	Dose-response data for BaP was presented for TA98 only.
21360	Simmon, 1979a	TA1535, TA1536, TA1537, TA1538, TA98, TA100	Rat Ar S9	BaA, BeP	AC, CH, PH	Yes	
21640	Teranishi et al., 1975	TA1535, TA1536, TA1537, TA1538	S9 from rats treated with PB and MC or DBahA	DBaiP, DBaeP	DBahA, BaA, BeP	Yes	
16180	Utesch et al., 1987	TA100	Intact or homogenized hepatocytes from Ar treated rats	BaA		Yes	
16440	Wood et al., 1980	TA98, TA100	Rat Ar S9 and purified MFO enzymes system	CPcdP		Yes	

Ar = Arochlor 1254-treated; MC = 3-methylcholanthrene-treated; PB = phenobarbital-treated; PMS = postmitochondrial supernatant

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Table 4-10. Study summaries: in vitro mammalian mutagenicity assays with benzo[a]pyrene and at least one other PAH

Record number	Reference	Cell type	Metabolic activation	Mutagenesis assay	Positive result	Negative result	Meets selection criteria?	Comments
16900	Allen-Hoffmann and Rheinwald, 1984	Human epidermal keratinocyte	None	6-Thioguanine resistance (HPRT)		BaA	Yes	
16920	Amacher and Paillet, 1982	Mouse lymphoma cells (L5178Y)	Syrian golden hamster S9 mix or cocultivated hamster hepatocytes	Trifluorothymidine resistance (thymidine kinase locus [TK])	BaA		Yes	
16930	Amacher and Paillet, 1983	Mouse lymphoma cells (L5178Y)	Cocultivated rat hepatocytes	Trifluorothymidine resistance (TK)		BaA	Yes	
16940	Amacher and Turner, 1980	Mouse lymphoma cells (L5178Y)	S9 from eight rodent species or strain; one rat strain induced by Ar	Trifluorothymidine resistance (TK)	AC, BaA		Yes	AC data not useable; BaP not simultaneous
16910	Amacher et al., 1980	Mouse lymphoma cells (L5178Y)	Rat Ar and noninduced S9	Trifluorothymidine resistance (TK)	BaA	AC, Pyr	Yes	
13440	Baird et al., 1984	V79 Chinese hamster cells	Hamster embryo cells	6-Thioguanine resistance (HPRT)		BeP	Yes	
17140	Barfknecht et al., 1982	TK6 human lymphoblast cells	Rat Ar S9	Trifluorothymidine resistance (TK)	FA, BaA, CH, Tphen, CPcdP	PH, AC, ACEP	Yes	
24670	Durant et al., 1999	H1A1v2 human lymphoblastoid cells	Transfected with cyp1a1 cDNA	Trifluorothymidine resistance (TK)	BaPery, BbPery, DBaeF, DBaff, DBahP, DBaiP, DBelP, N23aP, N23eP	DBjIF, N12bF	Yes	
18260	Gehly et al., 1982	C3H/10T1/2 clone 8 mouse fibroblast cells	None	Ouabain resistance (HPRT)		BeP	Yes	
14250	Hass et al., 1982	V79 Chinese hamster cells	Hamster embryo cells	Ouabain and 6-thioguanine resistance (HPRT)	DBaiP, DBahP		Yes	
18750	Huberman, 1975	V79 Chinese hamster cells	Hamster cells	8-Azaguanine resistance (HPRT)		BaA, Pyr	Yes	
18740	Huberman and Sachs, 1976	V79 Chinese hamster cells	Hamster embryo cells	Ouabain and 8-azaguanine resistance (HPRT)	DBacA, DBahA (both weak)	Pyr, PH, CH, BaA	Yes	
24120	Huberman and Sachs, 1974	V79 Chinese hamster cells	Hamster embryo cells	8-Azaguanine resistance (HPRT)		BaA	Yes	
18990	Jotz and Mitchell, 1981	Mouse lymphoma cells (L5178Y)	Rat Ar S9	Trifluorothymidine resistance (TK)	Pyr		Yes	
24720	Kligerman et al., 1986	Mouse lymphoma cells (L5178Y)	Rat Ar S9	Trifluorothymidine resistance (TK)	BIAC		Yes	

Table 4-10. Study summaries: in vitro mammalian mutagenicity assays with benzo[a]pyrene and at least one other PAH

Record number	Reference	Cell type	Metabolic activation	Mutagenesis assay	Positive result	Negative result	Meets selection criteria?	Comments
19180	Krahn and Heidelberger, 1977	V79 Chinese hamster cells	Rat MC S9	6-Thioguanine resistance (HPRT)	BaA, DBaA, DBaH		Yes	DBaA and DBaH data not useable; treatment different than BaP.
24680	Lafleur et al., 1993	MCL-3 human lymphoblastoid cells	Transfected with cyp1a2 and cyp2a6 cDNA	Trifluorothymidine resistance (TK)	CPcdP, ACEA, CPhiACEA	APA, CPhiAPA, BghiF	Yes	
24170	Langenbach et al., 1983	V79 Chinese hamster cells	Cocultivation with primary rodent cells from liver, lung, kidney, and bladder	Ouabain resistance (HPRT)		AC	Yes	
7550	Li and Lin, 1996	HS1 HeLa cells (human epithelial cells)	None	6-Thioguanine resistance (HPRT)	BaA		Yes	
19870	Mishra et al., 1978	Fischer rat embryo cells infected with Rauscher leukemia virus	Rat Ar S9	Ouabain resistance (HPRT)		AC, PH, Pyr, BeP	Yes	
20040	Myhr and Caspary, 1988	Mouse lymphoma cells (L5178Y)	Rat Ar and noninduced S9	Trifluorothymidine resistance (TK)	AC, BaA, BeP		No	Results reported as ranges.
11450	Nesnow et al., 1984	V79 Chinese hamster cells	Rat Ar S9	6-Thioguanine resistance (HPRT)	BlAC, BeAC, BjAC		Yes	
15630	Raveh and Huberman, 1983	V79 Chinese hamster cells	Hamster embryo fibroblasts	6-Thioguanine resistance(HPRT); phorbol myristate acetate used to enhance recovery	CPcdP	BaA	Yes	
15640	Raveh et al., 1982	V79 Chinese hamster cells	Hamster embryo fibroblasts	Ouabain and 6-thioguanine resistance (HPRT)	CPcdP		Yes	Mutagenicity correlated with skin tumor initiation.
21410	Slaga et al., 1978	V79 Chinese hamster cells	Hamster embryo cells	Ouabain resistance (HPRT)	BaA (weak)		Yes	
21720	Tong et al., 1983	Rat liver epithelial cells (ARL-18)		6-Thioguanine resistance (HPRT)		BaA, BeP, Pyr	No	Repeats data from 21730 Tong et al., 1981b
21730	Tong et al., 1981b	Rat liver epithelial cells (ARL-18)	None	6-Thioguanine resistance (HPRT)		BeP, Pyr, BaA	Yes	

Table 4-10. Study summaries: in vitro mammalian mutagenicity assays with benzo[a]pyrene and at least one other PAH

Record number	Reference	Cell type	Metabolic activation	Mutagenesis assay	Positive result	Negative result	Meets selection criteria?	Comments
16190	Vaca et al., 1992	UV-sensitive Chinese hamster ovary (CHO) cells	Rat Ar S9	6-Thioguanine resistance (HPRT)	FA		Yes	
21900	Wangenheim and Bolcsfoldi, 1988	Mouse lymphoma cells (L5178Y)	Rat Ar S9	Trifluorothymidine resistance (TK)	Pyr, FE		Yes	

HPRT = hypoxanthine-guanine phosphoribosyl transferase mutagenicity assay (resistance to 6-thioguanine, 8-azaguanine, or ouabain); TK = thymidine kinase mutagenicity assay (resistance to trifluorothymidine)

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Table 4-11. Study summaries: in vitro morphological/malignant cell transformation with benzo[a]pyrene and at least one other PAH

Record number	Reference	Cell type	Metabolic activation system	Positive result	Negative result	Meets selection criteria?	Comments
13390	Atchison et al., 1985	BALB/3T3 mouse embryo fibroblasts	None		FA, Pyr	Yes	
17610	Casto, 1979	Syrian golden hamster embryo cells	None	DBahA	Pyr	Yes	
17730	Chen and Heidelberger, 1969	Adult C3H mouse ventral prostate cells	Cocultivated irradiated C3H mouse embryonic fibroblasts	DBahA	DBacA, Pyr	No	Control data not provided.
24750	Davis, 1999	C3H10T1/2 cells	None	DBalP, DBaeP, BcC, BgC, BcPH		No	Control data not provided.
17970	DiPaolo et al., 1969	Syrian golden hamster embryo cells	Cocultivated irradiated Sprague-Dawley rat fetal cells	DBahA, BaA, BeP, DBacA	Pyr, PH	Yes	
17990	DiPaolo et al., 1972	BALB/3T3	None		AC, Pyr	Yes	
23630	DiPaolo et al., 1973	Syrian golden hamster embryo cells	In vivo (transplacental) exposure		AC, PH, Pyr	No	No quantitative information.
18020	Dunkel et al., 1981	Balb/3T3, Syrian golden hamster embryo, and Rauscher murine leukemia virus-infected F344 rat embryo cells	None	BaA	BeP, PH, AC	Yes	Qualitative data only for R-MuLV-RE cells. BaA positive in SHEM, equivocal in Balb/3T3.
18080	Emura et al., 1980	Syrian golden hamster fetal lung cells	None	BbF, BaA, IP	BkF, BeP	Yes	
23640	Evans and DiPaolo, 1975	Strain 2 guinea pig fetal cells	None		AC, Pyr, PH	No	No quantitative information.
18260	Gehly et al., 1982	C3H10T1/2CL8 mouse embryo fibroblasts	None		BeP	Yes	
14130	Greb et al., 1980	BHK 21/CL 13	Rat Ar S9	CH, BaA, BbF, DBahA, BeP	PH, AC	Yes	
23890	Kakunaga, 1973	BALB/3T3 subclone A31-714	None		PH, Pyr	No	Not clear if BaP admin simultaneously.
14640	Krolewski et al., 1986	C3H10T1/2CL8 mouse embryo fibroblasts	None	CPcdP		Yes	
14700	Laaksonen et al., 1983	Newborn NMRI nu/nu nude mouse skin fibroblasts	None	BaA	AC	Yes	
14850	Lubet et al., 1983	C3H10T1/2CL8 mouse embryo fibroblasts	None	BeP	AC, DBahA, PH	Yes	
19870	Mishra et al., 1978	Rauscher leukemia virus-infected Fischer rat embryo	None		AC, PH, Pyr, BeP	No	No quantitative information.
24710	Mohapatra et al., 1987	C3H10T1/2CL8 mouse embryo fibroblasts	None	BeAC, BjAC, BIAC	BkAC	Yes	
24700	Nesnow et al., 1990	Human neonatal foreskin fibroblasts	None	BIAC		Yes	
7980	Nesnow et al., 1997	C3H10T1/2CL8 mouse embryo fibroblasts	None	DBalP		Yes	
7990	Nesnow et al., 1994	C3H10T1/2CL8 mouse embryo fibroblasts	None	DBahA		Yes	
8000	Nesnow et al., 1993a	C3H10T1/2CL8 mouse embryo fibroblasts	None	DBkmnoAPH	DBjmnnoAPH, N123mnoAPH	Yes	
20120	Nesnow et al., 1991	C3H10T1/2CL8 mouse embryo fibroblasts	None		ACEA	Yes	

Table 4-11. Study summaries: in vitro morphological/malignant cell transformation with benzo[a]pyrene and at least one other PAH

Record number	Reference	Cell type	Metabolic activation system	Positive result	Negative result	Meets selection criteria?	Comments
23720	Pienta et al., 1977	Syrian golden hamster embryo	Cocultivated X-irradiated cells of same type	BaA, DBaA	CH, BeP, Pyr, AC, DBaA, PH	Yes	
8490	Sheu et al., 1994	BALB/3T3 A31-1-1	None		Pyr, BaA, CH	Yes	

1

Table 4-12. Study summaries: in vitro DNA adducts with benzo[a]pyrene and at least one other PAH

Record number	Reference	Cell type or DNA source	Incubation time	Activation system	Method of analysis	PAHs evaluated ^a	Meets selection criteria?	Comments
16890	Allen and Coombs, 1980	Mouse embryo cells from TO mice	24 hr	None	[³ H] prelabeling	BaA	Yes	
6300	Binkova et al., 2000	Human diploid lung fibroblast cells	Various up to 24 hr	None	[³² P] postlabeling	DBalP	Yes	
9510	Bryla and Weyand, 1992	Calf thymus DNA	1 hr	None	[³² P] postlabeling	BaA, DBaC, PH	Yes	PH did not form measurable DNA adducts. Adduct formation enhanced when reacted under white light.
6570	Cherng et al., 2001	Human hepatoma HepG2 cells	24 hr	None	[³² P] postlabeling	BghiP	Yes	BghiP did not form measurable DNA adducts.
13780	Cooper et al., 1982	Fibroblasts and epithelial cells from Wistar rat mammary tissue	24 hr	None	[³ H] prelabeling	BaA	Yes	BaA formed little or no measurable DNA adducts.
22800	Grover and Sims, 1968	Salmon testes DNA	Not specified	Rat liver microsomes	[³ H] prelabeling	DBaH, DBaC, BaA, Pyr, PH	Yes	
10660	Johnsen et al., 1998	Human lymphocytes and human promyelocytic HL-60 cells	24 hr	None	[³² P] postlabeling	BjAC, BIAC	Yes	
10670	Johnsen et al., 1997	Rat lung Clara cells, Type 2 cells, and macrophages	2 hr	PCB pretreatment of whole animals	[³² P] postlabeling	BjAC, BIAC	Yes	
13200	Li et al., 2002	MCF-7 cells or rat lung DNA	7–24 hr	Human mammary microsomes with rat lung DNA	[³² P] postlabeling	DBalP, BcPH, DBaH	No	No quantitative results.
7870	Melendez-Colon et al., 2000	Human mammary carcinoma MCF-7 cells and leukemia HL-60 cells	4 or 24 hr	None	[³² P] postlabeling	DBalP	Yes	No adducts formed in HL-60 cells that lack significant P450 activity.
7990	Nesnow et al., 1994	C3H10T1/2CL8 fibroblasts	24 hr	None	[³² P] postlabeling	DBaH	No	No quantitative results.
20120	Nesnow et al., 1991	C3H10T1/2 cells	24 hr	None	[³² P] postlabeling	ACEA	No	Measures repair of adducts only, not synthesis.
21200	Segerback and Vodicka, 1993	Calf thymus DNA	3 hr	Rat Ar S9	[³² P] postlabeling, [³ H]-binding	CH, BaA, BbF, DBaH, FA, BghiP, Pyr	Yes	
24810	Baird et al., 2002	MCF-7 cells	24 hr	Morpholinos inhibition (antisense oligomer that blocks protein synthesis of CYP1A1)	[³² P] postlabeling	DBalP	No	Confounded by CYP1A1 inhibition by morpholinos.

^aExcept where noted, positive findings were reported for all PAHs evaluated.

Table 4-13. Study summaries: in vitro DNA damage, repair, or synthesis with benzo[a]pyrene and at least one other PAH

Record number	Reference	Cell type	Metabolic activation	Endpoint	Assay	Positive result	Negative result	Meets selection criteria?	Comments
16840	Agrelo and Amos, 1981	Human fibroblasts	Rat Ar S9	Unscheduled DNA synthesis	[³ H] Thymidine uptake	Pyr		Yes	
17610	Casto, 1979	Syrian golden hamster embryo	Intrinsic	Unscheduled DNA synthesis	[³ H] Thymidine uptake		DBahA, Pyr, PH	Yes	
24030	De Flora et al., 1984	<i>Escherichia coli</i> WP2, WP67, and CM871	Rat Ar S9	DNA damage	Differential killing repair-deficient strains	AC, BaA	Pery, BeP	No	Semiquantitative data.
18030	Dunkel et al., 1984	<i>E. coli</i> WP-2 <i>uvrA</i>	Rat, mouse, hamster Ar S9	DNA damage	Differential killing repair-deficient strains	BaA, BeP, PH, Pyr	AC	No	Dose-response data not provided.
23790	Ichinotsubo et al., 1977	<i>E. coli</i> Rec BC	S9 (origin unknown)	DNA damage		DBaiP, DBahA		Yes	
10670	Johnsen et al., 1997	Rat lung Clara cells, Type 2 cells, and macrophages	PCB pretreatment of whole animals	DNA damage	Alkaline elution		BjAC, BIAC	No	No untreated control.
10660	Johnsen et al., 1998	Human lymphocytes and human promyelocytic HL-60 cells	Rat or human liver microsomes	DNA damage	Alkaline elution	BjAC, BIAC		Yes	
19270	Lake et al., 1978	Human foreskin epithelial cells	None	Unscheduled DNA synthesis	[³ H] Thymidine uptake	DBahA	AC, BeP, PH, Pyr	No	Doses reported as ranges.
19680	Mamber et al., 1983	<i>E. coli</i> WP2 and WP100	Rat Ar S9	DNA damage	Growth inhibition of repair deficient strains		AC, FE, Pyr	Yes	
19690	Mane et al., 1990	Human and rat mammary epithelial cells	None	Inhibition of DNA synthesis	[³ H] Thymidine uptake	BaA (in human MEC only)	BeP	No	Positive response for BaA not observed consistently.
19730	Martin and McDermid, 1981	HeLa S3 cells	PB-induced rat liver postmitochondrial supernatant	Unscheduled DNA synthesis	[³ H] Thymidine uptake	Pyr (authors: "dubious" result)	AC	No	No quantitative information.
19740	Martin et al., 1978	HeLa S3 cells	3-MC induced rat liver postmitochondrial supernatant	Unscheduled DNA synthesis	[³ H] Thymidine uptake	BeP, BaA, DBacA, DBahA	Pyr, AC	Yes	
23800	McCarroll et al., 1981	<i>E. coli</i> WP2, WP2 <i>uvrA</i> , WP67, CM611, WP100, W3110 <i>polA</i> +, and p3478 <i>polA</i> -	Rat Ar S9	DNA damage	Differential killing repair-deficient strains		AC, PH	Yes	

Table 4-13. Study summaries: in vitro DNA damage, repair, or synthesis with benzo[a]pyrene and at least one other PAH

Record number	Reference	Cell type	Metabolic activation	Endpoint	Assay	Positive result	Negative result	Meets selection criteria?	Comments
19830	Mersch-Sundermann et al., 1992	<i>E. coli</i> PQ37	Rat Ar S9	Induction of SOS system	SOS chromotest	AA, BaA, BbF, BghiF, BjF, BbFE, BghiP, BeP, CH, DBacA, DBahA, DBalP, DBahP, DBaiP, FA, IP, PH, Tphen	AC, BaFE, CO, FE, Pery, Pyr	Yes	
19850	Milo et al., 1978	Human skin fibroblast NF and Detroit 550 cells	None	DNA damage	Alkaline elution		AC, Pyr, PH, BeP	Yes	
20050	Nagabhushan et al., 1990	Hamster buccal pouch epithelial cells and tissue fragments	Not specified	Inhibition of DNA synthesis	[³ H] Thymidine uptake		BaA	No	Abstract only. BaA inhibited synthesis 4%.
20560	Probst et al., 1981	Rat hepatocyte primary culture	None	Unscheduled DNA synthesis	[³ H] Thymidine uptake	BbA, DBacA	AC, DBahA, PH, Pyr, DBaiP, FE, BeP	No	Artifact of counting method resulted in control responses reported as negative values.
20810	Robinson and Mitchell, 1981	Human fibroblasts WI-38 cells	Rat Ar S9	Unscheduled DNA synthesis	[³ H] Thymidine uptake	Pyr (with activation)		Yes	
23900	Rosenkranz and Leifer, 1980	<i>E. coli</i> pol A1-	Rat liver S9	DNA damage	Differential killing repair-deficient strains		AC, BaA, BeP, CH, PH	Yes	
20880	Rosenkranz and Poirier, 1979	<i>E. coli</i> pol A1-	Uninduced rat S9	DNA damage	Differential killing repair-deficient strains		AC, BaA, BeP, CH, PH	Yes	
20940	Rossmann et al., 1991	<i>E. coli</i> WP2s(λ)	Rat liver S9	DNA damage	Λ prophage induction	AC, DBacA, DBahA, PH	BeP, FA, Pyr	Yes	
21380	Simmon, 1979b	<i>Saccharomyces cerevisiae</i> D3	Rat Ar S9	induced recombination	Colony pigmentation on adenine medium		AC, BaA, BeP, CH, PH	Yes	
21720	Tong et al., 1983	Rat hepatocyte primary culture	None	Unscheduled DNA synthesis	[³ H] Thymidine uptake	BaA	BeP, AC, CH, Pyr	No	Repeats data from 21730 Tong et al., 1981b.
21730	Tong et al., 1981b	Rat hepatocyte primary culture	None	Unscheduled DNA synthesis	[³ H] Thymidine uptake	BaA	BeP, AC, CH, Pyr	Yes	
21790	Tweats, 1981	<i>E. coli</i> WP2, WP67(uvrA polA), CM871 (uvrA lexA recA)	Rat Ar S9	DNA damage	Differential killing repair-deficient strains		Pyr, AC	No	No quantitative information.
16190	Vaca et al., 1992	CHO cells	Rat Ar S9	DNA damage	Alkaline elution	FA		No	No untreated or vehicle control.
22260	Williams et al., 1982	Rat hepatocyte primary culture	None	Unscheduled DNA synthesis	[³ H] Thymidine uptake		Pyr, BeP	No	No quantitative information.

Table 4-14. Study summaries: in vitro clastogenicity or sister chromatid exchange with benzo[a]pyrene and at least one other PAH

Record number	Reference	Cell type	Metabolic activation	Clastogenic endpoint(s)	Positive results	Negative results	Meets selection criteria?	Comments
16740	Abe and Sasaki, 1977	Pseudodiploid Chinese Hamster D-6	None	Aberrations and SCEs		AC, Pyr	Yes	
17890	Dean, 1981	Near-diploid epithelial-type rat liver RL ₁	None	Various aberrations		AC, Pyr	No	Semiquantitative results.
17930	DeSalvia et al., 1988	Male Chinese hamster liver epithelial cells (CHEL)	None	SCEs		Pyr, FA	Yes	
18120	Evans and Mitchell, 1981	CHO	Rat Ar S9	SCEs	Pyr (with activation)		No	No untreated or vehicle control.
23640	Evans, and DiPaolo, 1975	Diploid strain 2 guinea pig fetal cells	None	Aneuploidy		AC	No	No quantitative data. Pyr, PH also evaluated using different protocol without BaP reference.
18260	Gehly et al., 1982	CH3/10T1/2 Clone 8 mouse fibroblasts	None	SCEs		BeP	Yes	
14620	Kochhar, 1982	Chinese hamster V79	None	Aberrations including gaps, rings, breaks, fragments, exchanges	BaA		Yes	Dose-dependent increase in % cells with aberrations.
14640	Krolewski et al., 1986	CH3/10T1/2 Clone 8 mouse embryo cells	None	SCEs	CPcdP		Yes	CPcdP appears to increase SCEs in dose-dependent fashion (two doses).
19690	Mane et al., 1990	Chinese hamster V79 cells	With and without rat mammary epithelial cell coculture	SCEs	BaA	BeP	Yes	
19770	Matsuoka et al., 1979	Male Chinese hamster lung (CHL)	Rat Ar S9	Aberrations and SCEs		PH	No	Not clear if BaP administered simultaneously. No untreated control.
20020	Murison, 1988	P3 clonal isolate from human epithelial teratocarcinoma	BJ-015 human breast epithelial cell coculture	SCEs	CPcdP	BeP	No	Not clear if BaP administered simultaneously; no concurrent control.
20340	Perry and Thomson, 1981	CHO cells	Rat Ar S9	SCEs	Pyr	AC	No	No untreated control.

Table 4-14. Study summaries: in vitro clastogenicity or sister chromatid exchange with benzo[a]pyrene and at least one other PAH

Record number	Reference	Cell type	Metabolic activation	Clastogenic endpoint(s)	Positive results	Negative results	Meets selection criteria?	Comments
20500	Popescu et al., 1977	Chinese hamster V79-4 cells	With or without irradiated Syrian golden hamster secondary embryo feeder cells	Aberrations and SCEs	Pery, Pyr	PH	No	BaP increased SCEs but Pyr and Pery increased aberrations. Pery increased aberrations w/o activation. 60% of Pyr treated cells (activated) polyploid. Increased aberrations in polyploid cells.
21710	Tong et al., 1981a	Adult rat liver epithelial (ARL 18) cells	None	SCEs	BaA	BeP, Pyr, AC	Yes	
21720	Tong et al., 1983	Adult rat liver epithelial (ARL 18) cells	None	SCEs	BaA	BeP, Pyr, AC	No	Repeats data from 21710 Tong et al., 1981a
8780	Vienneau et al., 1995	UDP-Glucuronosyl-transferases-deficient rat (RHA- <i>J/J</i>) skin fibroblasts	None	Micronuclei		BeP	Yes	
8850	Warshawsky et al., 1995	Human lymphocytes	None	Micronuclei and SCEs		BaA	Yes	
21980	Weinstein et al., 1977	Human diploid fibroblasts (WI-38)	With or without rat Ar s9	Chromosomal damage, mitotic index, abnormal metaphases		Pyr	Yes	

1 If the above criteria were met, studies were selected for use in the analysis regardless of
2 whether positive or negative results were reported. Studies with positive findings were used for
3 calculation of RPFs. Studies with negative findings were used in a weight of evidence
4 evaluation of potential carcinogenicity (discussed later in Section 6.1). To be considered
5 adequate for use in the analysis, nonpositive bioassays were selected only if two additional
6 conditions were met: (1) at least 20 animals were used per dose group, and (2) animals were
7 observed for at least 6 months. More strict criteria were applied to nonpositive studies due to the
8 difficulty in demonstrating the absence of an effect. For example, if a positive tumor response
9 (i.e., statistically significant increase in incidence) was observed after 3 months of treatment with
10 a given PAH, the positive finding is clear; however, if no response (or a nonsignificant response)
11 was observed after 3 months, the absence of response might reflect a lack of carcinogenic action,
12 but might also have resulted from inadequate follow-up time. The use of these additional criteria
13 for nonpositive studies served to ensure that PAHs would not be treated as noncarcinogenic
14 based on inadequate nonpositive bioassays.

15 Study design details, findings, limitations, and a determination of whether the study met
16 selection criteria are presented in Tables 4-1 through 4-14 for each study reviewed in each
17 category. Positive and negative findings as reported in the table are based on the author's
18 determination except where noted. When statistical analysis of tumor bioassay data was not
19 included in the pertinent publication, statistical analysis was conducted to determine whether the
20 response differed from control. In the sections that follow, overviews of the data available in
21 each category are presented. The overviews address the nature of the studies available, concise
22 information on general study methods, general findings for the tested compounds, and key
23 strengths and limitations of the available data for relative potency development.

24 25 **4.3.1. In Vivo Cancer Bioassays in Animals**

26 The PAH database contained a large number of cancer bioassay studies in which one or
27 more PAHs was evaluated along with benzo[a]pyrene. The vast majority of the tumor bioassay
28 studies were mouse skin painting studies (n = 43). In addition, there were 11 intraperitoneal
29 studies, 9 subcutaneous exposure studies, 2 oral studies, and 9 studies using miscellaneous
30 exposure routes.

31 32 **4.3.1.1. Dermal Exposure**

33 A summary of the 43 dermal bioassays is provided in Table 4-1. These studies were all
34 conducted in mice. Fifteen studies tested the complete carcinogenicity of PAHs, while
35 23 studies tested PAHs as initiators in initiation-promotion protocols. In some cases, both
36 complete and initiation-promotion studies were reported in the same reference. For these
37 references, two entries are included in the table.

1 Complete carcinogenicity studies were conducted in mice using either dropper or
2 paintbrush application. Swiss mice were typically preferred for these studies. PAHs, usually in
3 acetone, were applied to the shaved interscapular skin 2 or 3 times/week. The duration of
4 exposure varied from 10 weeks up to about 70 weeks; most studies continued exposure for at
5 least 30 weeks. Skin tumor counts were recorded on a weekly basis, and animals were sacrificed
6 when tumors reached a minimum size (e.g., 2 cm) or when the animals were moribund. These
7 studies generally focused exclusively on skin papillomas and carcinomas. Skin tumor data were
8 reported as incidence (i.e., number of animals with tumors) and/or tumor count (mean number of
9 tumors per animal) (indicated in Table 4-1).

10 Several PAHs consistently (in two or more studies) proved to be complete carcinogens in
11 mouse skin painting assays, including benzo[b]fluoranthene, benzo[j]fluoranthene,
12 cyclopenta[c,d]pyrene, dibenzo[a,e]pyrene, dibenzo[a,h]pyrene, dibenzo[a,i]pyrene, and
13 dibenzo[a,l]pyrene. Chrysene gave positive results in two complete carcinogenicity studies
14 (LaVoie et al., 1979; Wynder and Hoffmann, 1959) and equivocal results in a third (Hecht et al.,
15 1974). Anthanthrene, dibenzo[a,e]fluoranthene, and dibenz[a,h]anthracene each gave positive
16 tumorigenicity results in a single assay (Cavalieri et al., 1977; Hoffmann and Wynder, 1966; and
17 Wynder and Hoffmann, 1959; respectively). Negative or equivocal results were reported for
18 benzo[k]fluoranthene, benzo[g,h,i]fluoranthene, dibenzo[e,l]pyrene, indeno[1,2,3-c,d]pyrene,
19 benzo[g,h,i]perylene, naphtho[2,3-e]pyrene, anthracene, pyrene, fluoranthene, 2,3-acepyrene,
20 benz[a]anthracene, coronene, and benzo[e]pyrene (see Table 4-1).

21 According to LaCassagne et al. (1968), in studies conducted prior to 1966, the compound
22 reported as dibenzo[a,l]pyrene was actually dibenzo[a,e]fluoranthene. In the text and tables of
23 this report, data from Hoffmann and Wynder (1966) are reported as dibenzo[a,e]fluoranthene in
24 Table 4-1.

25 The initiation studies in Table 4-1 were performed under a generally consistent protocol,
26 as follows. During the early part of the second telogen phase of the hair cycle (at about 7–8
27 weeks of age), PAHs in acetone were applied to the shaved interscapular skin of mice. In
28 general, female Swiss, CD-1, or SENCAR mice were used. Some studies used dropper
29 administration, but the majority employed a painting method using a camel's hair brush. About
30 half of the initiation studies used a single initiation dose, while the other half administered the
31 initiating compound in 10 subdoses given every other day. One to 2 weeks after the final
32 initiating dose, promotion was begun with twice or thrice weekly applications of a promoting
33 agent, usually TPA (12-0-tetra-decanoylphorbol-13-acetate) or croton oil. The dose of the
34 promoting agent varied by study. Promotion usually continued for about 20 weeks (with a range
35 across studies from 11 to 26 weeks). The incidence of skin papillomas was recorded on a weekly
36 basis until the promotion period was ended. Papillomas were removed at random for histological
37 verification. Some studies reported the number of tumors per animal; some reported only the
38 incidence.

1 The initiation studies in Table 4-1 consistently showed positive tumorigenicity across two
2 or more studies for the following compounds: benzo[j]fluoranthene, benzo[b]fluoranthene,
3 chrysene, dibenzo[a,e]pyrene, dibenzo[a,h]pyrene, dibenzo[a,i]pyrene, dibenzo[a,l]pyrene, and
4 cyclopenta[d,e,f]chrysene. In at least one study, benzo[k]fluoranthene, benz[l]aceanthrylene,
5 benz[e]aceanthrylene, naphtho[2,3-e]pyrene, dibenz[a,h]anthracene, dibenz[a,c]anthracene, and
6 benz[b,c]aceanthrylene showed positive initiating activity. Negative results were reported for
7 pyrene, perylene, benzo[g,h,i]fluoranthene, fluoranthene, anthanthrene, dibenzo[e,l]pyrene,
8 benzo[g,h,i]perylene, indeno[1,2,3-c,d]pyrene, benzo[e]pyrene, anthracene, 2,3-acepyrene, and
9 phenanthrene. Cyclopenta[c,d]pyrene gave negative results in one study—Wood et al. (1980)—
10 and positive results in two—Cavalieri et al. (1981b) and Raveh et al. (1982) (see Table 4-1).

11 The vast majority of the initiation and complete carcinogenicity studies were conducted
12 in female mice, so data on gender differences in skin tumor susceptibility are not available.

13 A few studies using dermal application (Warshawsky et al., 1993; Slaga et al., 1979; Van
14 Duuren and Goldschmidt, 1976; Horton and Christian, 1974; Van Duuren et al., 1973) were
15 designed to evaluate the cocarcinogenicity of two or more PAHs, or of a single PAH with
16 dodecane as a vehicle. These were primarily complete carcinogenicity studies, wherein PAHs
17 were administered together over a chronic time period, although Slaga et al. (1979) used an
18 initiation-promotion design. Study design was similar to other complete carcinogenicity
19 experiments. In these studies, the carcinogenicity of single PAHs was evaluated for comparison
20 with the results obtained when the PAHs were administered with a cocarcinogen. Data on single
21 PAHs (without a cocarcinogen) were generally limited to single dose levels. In the
22 cocarcinogenesis studies, only dibenz[a,c]anthracene, benzo[e]pyrene, and pyrene gave positive
23 results when administered without a cocarcinogen; results for pyrene were judged to be
24 equivocal in the absence of statistical confirmation. The PAHs chosen for cocarcinogenesis
25 studies were often those traditionally understood to be nontumorigenic or weakly tumorigenic
26 when administered alone (e.g., perylene, pyrene, benzo[e]pyrene, benzo[g,h,i]perylene,
27 phenanthrene, fluoranthene).

28 Several issues relating to the potential use of the dermal bioassay data for relative
29 potency development were identified during study review. Several studies did not include a
30 concurrent untreated or vehicle-treated control group (Masuda and Kagawa, 1972; Bingham and
31 Falk, 1969; Wynder and Hoffmann, 1959a, b). In a number of reports, it appears that bioassays
32 were done in batches and reported in a single publication. In these cases, it appears that
33 benzo[a]pyrene treatment may not have been undertaken concurrently with all of the compounds
34 in the report. For some of these studies (Horton and Christian, 1974; Bingham and Falk, 1969),
35 there are differences in the choice of vehicle or promoter, or other issues that argue against using
36 the benzo[a]pyrene data for direct comparison. In several others studies, however (Rice et al.,
37 1988; Slaga et al., 1980; Van Duuren and Goldschmidt, 1976; Wynder and Hoffmann, 1959), the
38 protocols (including vehicle and promoting agent) appear to have been the same.

1 Among the dermal tumor bioassay studies in Table 4-1, 24 studies met the selection
2 criteria for use in this analysis.

3 4 **4.3.1.2. Intraperitoneal Exposure**

5 Eleven cancer bioassays in the literature used intraperitoneal injection. Six of these
6 studies were carried out in newborn mice, while the other five used adult A/J mice. All of the
7 studies focused on lung and liver tumorigenicity after PAH exposure. Study summaries for all of
8 these references are reported in Table 4-2. Tumor data were reported as incidence (i.e., number
9 of animals with tumors) and/or tumor count (mean number of tumors per animal) (indicated in
10 Table 4-2).

11 *Newborn mouse studies.* Six cancer bioassays in newborn mice were identified (LaVoie
12 et al., 1994, 1987; Busby et al., 1989, 1984; Weyand and LaVoie, 1988; Wislocki et al., 1986).
13 In general, PAHs were administered intraperitoneally to newborn mice (usually of the Swiss or
14 CD-1 strains). The dosing schedule called for 1/7th, 2/7^{ths}, and 4/7^{ths} of the total dose to be
15 administered on the 1st, 8th, and 15th days of life. Typically, the mice were sacrificed at either 6
16 months or 1 year, and lung and/or liver tumors were identified and classified.

17 The studies in newborn mice showed a distinct gender difference in liver tumorigenicity.
18 Male mice appear to be substantially more susceptible to liver tumor induction than females. In
19 contrast, both male and female mice developed lung tumors after exposure. Three studies
20 (LaVoie et al., 1994; Busby et al., 1989, 1984) reported that fluoranthene induced lung tumors in
21 both male and female mice, while one study reported that fluoranthene induced liver tumors in
22 male mice only (LaVoie et al., 1994). LaVoie et al. (1987) reported that benzo[b]fluoranthene
23 and benzo[j]fluoranthene induced lung adenomas in both male and female mice, but induced
24 liver tumors only in males. Wislocki et al. (1986) reported that treatment with benz[a]anthracene
25 resulted in a significant increase in liver tumors in male mice. In this study, benz[a]anthracene
26 treatment resulted in an increased incidence of lung tumors in both males and females, although
27 the tumor incidence was significantly increased only for females. The same authors (Wislocki et
28 al., 1986) reported a significant increase in liver tumors in male mice treated with chrysene, but
29 no increase in lung tumorigenicity. The lack of lung tumorigenicity in mice treated with
30 chrysene was also reported by Busby et al. (1989).

31 Negative tumorigenicity results in newborn mouse assays were reported for pyrene,
32 chrysene, benzo[k]fluoranthene, and indeno[1,2,3-c,d]pyrene (Busby et al., 1989; LaVoie et al.,
33 1987).

34 Most of the data from the newborn mouse assays met the criteria for relative potency
35 development, although Weyand and LaVoie (1988) is an abstract and does not provide dose-
36 response information. LaVoie et al. (1994) noted that liver tumorigenicity in newborn mice
37 exposed to weak tumorigenic agents may not be fully realized for 12 months; thus, the failure to

1 observe liver tumors in studies of shorter duration (Busby et al., 1989, 1984) may result from the
2 longer latency and should be taken into consideration in using these data.

3 *Lung adenoma A/J mouse studies.* Five studies (Nesnow et al., 1998a, b, 1996, 1995;
4 Ross et al., 1995; Mass et al., 1993) were carried out in 6- to 8-week-old A/J mice by the same
5 laboratory using a standard protocol (Table 4-2). Mice were given a single intraperitoneal
6 injection of PAH in tricapylin and followed for 8 months. Upon sacrifice, the lungs were
7 removed and adenomas were counted. Tumor multiplicity was reported, while tumor incidence
8 was not. Several of these studies include estimates of relative potency based on statistical
9 analysis of the tumor multiplicity data.

10 These studies report positive tumor findings (reported as an increase in the number of
11 tumors per animal) for all of the PAHs tested (benz[j]aceanthrylene, benzo[b]fluoranthene,
12 dibenz[a,h]anthracene, cyclopenta[c,d]pyrene, and dibenzo[a,l]pyrene).

13 Among the intraperitoneal tumor bioassay studies in Table 4-2, eight studies met the
14 selection criteria for use in this analysis.

15 16 **4.3.1.3. Subcutaneous Injection Exposure**

17 Nine studies employing a subcutaneous exposure design were identified. All of the
18 subcutaneous exposure studies are more than 25 years old; the most recent is Pfeiffer (1977).
19 Study descriptions are presented in Table 4-3.

20 Two studies utilized newborn mice (Roe and Waters, 1967; Grant and Roe, 1963). In
21 these studies, phenanthrene was administered subcutaneously to newborn albino mice on the first
22 day of life. Ten mice of each group were sacrificed after 52 weeks, and the remaining animals
23 were sacrificed at 62 weeks. Grant and Roe (1963) reported lung tumorigenicity, while Roe and
24 Waters (1967) reported liver tumors in the same group of mice. Roe and Waters (1967) reported
25 an elevated incidence of liver tumors in male mice exposed subcutaneously to phenanthrene;
26 however, it is not clear whether the difference was significant. Roe and Waters (1967) is a brief
27 communication with limited details of the study design and results.

28 In most of the remaining studies, single subcutaneous doses of one or more PAHs and
29 benzo[a]pyrene were administered to mice, followed 1–2.5 years later by an evaluation of
30 injection site and other tumors. Tumors at the injection site were most commonly reported;
31 however, in some studies, investigators also examined other organs for tumors (Homburger et
32 al., 1972; Roe and Waters, 1967; Grant and Roe, 1963; Rask-Nielsen, 1950; Pfeiffer and Allen,
33 1948).

34 Most of the subcutaneous bioassays suffer from critical shortcomings in design or
35 reporting. One study used “aged” mice for controls, allowing these animals to live 16 weeks
36 longer than the treated group (Homburger et al., 1972). Three studies gave apparently positive
37 results for dibenz[a,h]anthracene (i.e., substantial tumor induction; Pfeiffer, 1977; Steiner, 1955;
38 Bryan and Shimkin, 1943). However, neither Bryan and Shimkin (1943) nor Steiner (1955)

1 included untreated control groups. Pfeiffer (1977) included an untreated control group in which
2 there was 90% mortality prior to sacrifice of the treated animals; data on tumor incidence in
3 controls were not reported. Several other studies (Pfeiffer and Allen, 1948; Barry et al., 1935)
4 also did not include a concurrent untreated or vehicle-treated control group. These studies were
5 not used for dose-response assessment due to the lack of appropriate controls.

6 Fundamental flaws were observed in two older studies. Pfeiffer and Allen (1948)
7 examined the effects of PAHs in Rhesus monkeys. Individual animals were exposed
8 sequentially to several PAHs via multiple exposure routes; thus, the effect of any individual PAH
9 or benzo[a]pyrene cannot be discerned. Barry et al. (1935) treated mice with PAHs from varying
10 sources and of varying purity. Given the age of the study and the attendant issues with
11 nomenclature, purity, and analysis of the treatment compounds, data from this study are excluded
12 from use in relative potency development.

13 Among the subcutaneous tumor bioassay studies in Table 4-3, only a single study met
14 selection criteria for use in this analysis.

15 16 **4.3.1.4. Oral Exposure**

17 The literature search identified two oral bioassays that included benzo[a]pyrene and at
18 least one other PAH. Critical aspects of the study design for these studies are reported in
19 Table 4-4.

20 Biancifiori and Caschera (1962) compared the induction of mammary tumors in virgin
21 and pseudopregnant mice (female mice mated with vasectomized males) after gavage exposure
22 to dibenz[a,h]anthracene or benzo[a]pyrene. Tumor incidence was increased in pseudopregnant
23 mice given 1 mg/week of either compound for 15 weeks, but not in virgin mice given the same
24 dose. The relevance of the positive findings in pseudopregnant mice is uncertain given that an
25 increased incidence of tumors was not observed in virgin mice treated at the same dose. One
26 possible explanation for the disparate findings is that circulating hormones in pseudopregnant
27 mice differed from those in virgin mice and interacted with the PAH to enhance tumor
28 formation. Huggins and Yang (1962) also evaluated mammary tumor incidence after a single
29 oral PAH exposure. Sprague-Dawley rats were given gavage doses of benzo[a]pyrene,
30 benz[a]anthracene, or phenanthrene. This study did not include an untreated or vehicle-treated
31 control group. No tumors were observed in the rats treated with either benz[a]anthracene or
32 phenanthrene, while mammary tumors were observed in eight of the nine benzo[a]pyrene-treated
33 animals.

34 Among the oral tumor bioassay studies in Table 4-4, none met the selection criteria for
35 use in this analysis.

36

1 **4.3.1.5. Other Routes**

2 Nine bioassays were available that did not fit into other exposure route categories (i.e.,
3 dermal, intraperitoneal, subcutaneous, or oral) (see Table 4-5). Among these were studies using
4 intramamillary, intramuscular, and intravenous injection as well as lung implantation, tracheal
5 implantation, and transplacental exposure after subcutaneous injection. Seven studies were in
6 rats, with one each in mice and hamsters.

7 Deutsch-Wenzel et al. (1983) and Wenzel-Hartung et al. (1990) implanted
8 PAH-containing pellets (consisting of beeswax and trioctanoin) into the lungs of inbred female
9 Osborne-Mendel rats. Lung tumor incidence was reported for a total of 10 PAHs and
10 benzo[a]pyrene. The authors reported relative potency estimates based on the lung tumor data.
11 Lung tumors were induced by benzo[b]fluoranthene, benzo[j]fluoranthene,
12 benzo[k]fluoranthene, benzo[g,h,i]perylene, indeno[1,2,3-c,d]pyrene, anthanthrene, chrysene,
13 and dibenz[a,h]anthracene. Negative findings were reported for benzo[e]pyrene and
14 phenanthrene.

15 Cavalieri et al. (1991) treated Sprague-Dawley rats with single intramamillary
16 injections of dibenzo[a,l]pyrene into the left mammary glands and followed them for up to 24
17 weeks. Tumors of the mammary gland, mesenchymal tissue, or skin were recorded.
18 Dibenzo[a,l]pyrene produced tumors in all animals at both doses.

19 In six studies, tumors were not induced after exposure to any target PAH.
20 Intramamillary injection of dibenz[a,h]anthracene and benz[a]anthracene did not induce
21 mammary tumors in rats (Cavalieri et al., 1988b). Pregnant mice receiving subcutaneous
22 injection of pyrene did not develop tumors, nor did their offspring (Nikonova, 1977). Rats
23 treated either intravenously or intramuscularly with benz[a]anthracene did not develop either
24 mammary or injection site tumors (Pataki and Huggins, 1969). Similarly, benz[a]anthracene was
25 not tumorigenic after intramuscular injection in rats (Sugiyama, 1973) or buccal pouch painting
26 in hamsters (Solt et al., 1987). Finally, benzo[e]pyrene was not tumorigenic when it was
27 implanted into tracheas transplanted subcutaneously into isogenic rats (Topping et al., 1981).

28 Among the tumor bioassays that used alternative exposure routes in Table 4-5, four
29 studies met the selection criteria for use in this analysis.

31 **4.3.2. In Vivo Studies of Cancer-Related Endpoints**

32 The database of cancer-related endpoints measured after in vivo exposure to PAHs is
33 much smaller than the in vitro database. Endpoints examined after in vivo exposure include
34 mutagenicity, DNA adducts, and clastogenicity or sister chromatid exchange. As with the in
35 vitro database, only studies of selected PAHs that included benzo[a]pyrene as a reference
36 compound were reviewed. Each study that was reviewed for consideration in relative potency
37 development is presented in tabular format in subsequent sections. The tables summarize study-
38 specific information and indicate whether a particular study is considered useful for dose-

1 response assessment. The text provides an overall description of the available studies, including
2 a general description of the methodology used for each study type, the results, and the
3 weaknesses or problems associated with specific studies or study types.

4 5 **4.3.2.1. DNA Adducts**

6 Eighteen studies evaluating DNA adduct formation for PAHs and benzo[a]pyrene were
7 identified in the database (Table 4-6). Nine studies presented quantitative data for DNA adduct
8 formation and are discussed below. Among studies with data potentially useful for RPF
9 derivation, the route of exposure was intramammillary injection in one study (Arif et al., 1997),
10 intraperitoneal injection in five studies (Kligerman et al., 2002; Nesnow et al., 1998a, 1996,
11 1995; Ross et al., 1995; Mass et al., 1993), dermal in three studies (Hughes and Phillips, 1990;
12 Cavalieri et al., 1981b; Phillips et al., 1979), and oral in one study (Kligerman et al., 2002).
13 Adducts were identified by [³²P]-postlabeling in all of the studies except for two by Phillips et al.
14 (1979) and Cavalieri et al. (1981b), which utilized [³H]- or [¹⁴C]-radiolabeled PAHs. Two
15 papers described experiments with a single time point(s) at 24 or 48 hours (Arif et al., 1997,
16 Hughes and Phillips, 1990), whereas the rest had multiple time points. The duration of exposure
17 was as short as 4 hours (Cavalieri et al., 1981b), although 24 hours was usually the first time
18 point(s) in time course studies. The longest duration for a time course study was 84 days
19 (Hughes and Phillips, 1990), but most were 3 weeks or less. The tissues evaluated included
20 mammary epithelium (Arif et al., 1997), skin (Hughes and Phillips, 1990; Cavalieri et al., 1981b;
21 Phillips et al., 1979), liver and peripheral blood lymphocytes (Kligerman et al., 2002; Nesnow et
22 al., 1993b), and lung (Nesnow et al., 1998a, 1993b; Arif et al., 1997; Ross et al., 1995; Mass et
23 al., 1993; Hughes and Phillips, 1990).

24 Dermal-exposure studies typically involved application of the chemical in solution to the
25 shaved dorsal skin of mice (Hughes and Phillips, 1990; Cavalieri et al., 1981b; Phillips et al.,
26 1979). After the scheduled sacrifice, the treated skin was excised and frozen; a scalpel was used
27 to scrape away the dermis from the epidermis that was subsequently powdered in liquid nitrogen.
28 In one study, the lung was also excised and frozen in liquid nitrogen (Hughes and Phillips,
29 1990). DNA was isolated from the frozen epidermis or lung. Liquid scintillation counting was
30 used to quantify DNA adducts to PAH labeled with [³H] or [¹⁴C] (Cavalieri et al., 1981b; Phillips
31 et al., 1979). For [³²P]-postlabeling, DNA was treated to selectively dephosphorylated
32 nonadducted nucleotides; after postlabeling, adducts were resolved by sequential anion-exchange
33 thin layer chromatography on PEI-cellulose plates in several directions using three solvents
34 (Hughes and Phillips, 1990). Adduct spots on chromatograms were located by autoradiography,
35 after which the spots were excised and radioactivity levels were determined by Cerenkov
36 counting.

1 Compounds administered by intraperitoneal or intramammillary injection were also
2 delivered in solution. As in dermal-exposure studies, DNA was isolated from frozen tissues and
3 adducts were identified by [³²P]-postlabeling and quantified via autoradiography.

4 Most studies reported the mean number of adducts formed within a tissue per unit of
5 DNA, with time-course data displayed graphically. Peak values were sometimes called out
6 specifically in the text or tables. As the shapes of dose-response curves differ among different
7 PAHs, the peak value is an imprecise measure for comparing the relative adduct-forming
8 potency of the different compounds. The TIDAL has also been used for reporting results for a
9 time-course study (Ross et al., 1995). The TIDAL value is the area under the curve (AUC) for
10 adduct persistence (based on the rate of adduct formation and repair) for the duration of the
11 study. The TIDAL value expresses the total DNA adduct burden experienced by the tissue from
12 the time of treatment to the end of the study. The TIDAL versus administered dose curve
13 provides a convenient way to compare adduct-forming potency for different PAHs in time-
14 course experiments. An important limitation of the TIDAL approach is the inherent assumption
15 that the ratios of specific adducts are relatively constant across dose and time course. Ross et al.
16 (1995) demonstrated that this assumption was valid for several different PAHs; however, it was
17 also noted that two adducts of benzo[a]pyrene in rat liver did not conform to this general pattern.

18 Ross et al. (1995) presented data for lung adenoma incidence (measured at 8 months) in
19 several ways: as a function of administered dose, as a function of adduct levels per dose
20 measured 24 hours after dosing (results for 3 days postdosing were mentioned but not shown), as
21 a function of TIDAL values measured over 21 days (during which period adduct levels were
22 specifically quantified), and as a function of TIDAL values extrapolated to 8 months. The
23 relative tumor induction potencies of the studied PAHs were similar for each assay for a single
24 PAH when described as functions of administered dose, the adduct levels per dose at 3 days, the
25 TIDAL values over 21 days, or the TIDAL values extrapolated to 8 months. The relative
26 potencies for tumor incidence as a function of adduct levels at 24 hours were not similar to those
27 associated with the other measures of exposure. Ross et al. (1995) suggested that
28 pharmacokinetic differences in adduct formation among the PAHs were responsible for the
29 discrepancy, but suggested that peak levels could be used to compare the potencies of different
30 PAHs if adduct formation for those PAHs followed similar kinetics.

31 DNA adduct experiments were carried out in replicate and were usually analyzed
32 statistically. It should be noted that, based on the work of Ross et al. (1995), relative potencies
33 determined from studies that administered a single dose level and measured adducts at a single
34 time point will be less reliable unless the shapes of the adduct formation curves are similar.
35 However, the single dose and single measurement studies were also used for dose-response
36 assessment.

37 Among the in vivo DNA adduct studies shown in Table 4-6, nine studies met the
38 selection criteria for use in this analysis.

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4.3.2.2. *Clastogenicity or Sister Chromatid Exchange Frequency*

The database included 13 studies in which clastogenic effects or frequency of sister chromatid exchanges of benzo[a]pyrene and at least one other PAH were tested in whole animal systems. Table 4-7 lists the studies along with important study design details. The clastogenic endpoints measured in these studies were micronuclei, chromosome gaps and breaks, and nonspecific aberrations; sister chromatid exchanges were also measured. These studies were all conducted in rodents, including mice, rats, and hamsters.

Eight of the studies evaluated micronuclei, sister chromatid exchanges, or chromosome gaps or breaks in bone marrow from treated mice or hamsters (Allen et al., 1999; Katz et al., 1981; Paika et al., 1981; Salamone et al., 1981; Tsuchimoto and Matter, 1981; Roszinsky-Kocher et al., 1979; Bayer, 1978; Sugiyama, 1973). In these studies, one or two doses of PAH were injected intraperitoneally into the animals, and sacrifice occurred at various time points thereafter (typically 24 hours after). Bone marrow smears were examined microscopically and scored for micronuclei, sister chromatid exchanges, gaps, or breaks.

He and Baker (1991) applied multiple dose levels of chrysene or phenanthrene to the skin of hairless mice and harvested keratinocytes upon sacrifice 24 hours later. The keratinocytes were incubated for 2 days and treated with cytochalasin B to identify binucleated cells. After 4 days in vitro, cells were mounted on slides and examined microscopically for micronuclei. Results were reported as the percent of binucleated cells with one or more micronuclei among the total number of binucleated cells scored. Chrysene treatment resulted in a dose-related increase in micronuclei, while pyrene did not.

Kligerman et al. (2002, 1986) measured sister chromatid exchanges and/or micronuclei in the blood of mice or rats given a single dose of PAH either orally or intraperitoneally. The study by Oshiro et al. (1992) involved two or four oral doses of pyrene or anthracene in mice. Blood obtained from the tail 24 hours after the last treatment was examined microscopically and micronuclei were scored in polychromatic erythrocytes. In an unusual study design, Sirianni and Huang (1978) measured sister chromatid exchanges in V79 cells placed in a diffusion chamber implanted in the peritoneal cavity of mice.

Thirteen individual PAHs were evaluated in these studies. Only chrysene gave positive results for more than one endpoint (for sister chromatid exchange and micronucleus frequency; He and Baker, 1991; Roszinsky-Kocher et al., 1979). Five other PAHs (phenanthrene, dibenz[a,h]anthracene, benz[a]anthracene, benzo[b]fluoranthene, and benzo[e]pyrene) increased the frequency of sister chromatid exchange in hamster bone marrow after intraperitoneal administration (Roszinsky-Kocher et al., 1979). Bayer (1978) also reported an increase in sister chromatid exchange frequency in hamster bone marrow after phenanthrene administration (high dose only). Anthracene and pyrene consistently gave negative results in several studies (Oshiro et al., 1992; He and Baker, 1991; Katz et al., 1981; Paika et al., 1981; Salamone et al., 1981;

1 Tsuchimoto and Matter, 1981; Roszinsky-Kocher et al., 1979; Sirianni and Huang, 1978).
2 Dibenzo[a,i]pyrene and benzo[g,h,i]perylene each gave negative results in an assay for bone
3 marrow micronuclei (Katz et al., 1981).

4 Among studies with positive results, only He and Baker (1991), Kligerman et al. (1986),
5 and Bayer (1978) administered PAHs at multiple dose levels. Bayer (1978) observed a positive
6 response only with the highest dose of phenanthrene. Of the single dose studies, only
7 Roszinsky-Kocher et al. (1979) reported responses clearly differing from controls.

8 Among the in vivo clastogenicity or sister chromatid exchange studies shown in
9 Table 4-7, 10 studies met the selection criteria for use in this analysis.

11 **4.3.2.3. In Vivo Mutagenicity**

12 The PAH database contains several studies that evaluate specific mutagenic end points
13 following in vivo exposure to PAHs (see Table 4-8). These studies include mutagenicity
14 experiments in *Drosophila melanogaster*, an intraperitoneal host-mediated assay using
15 *Salmonella* strains or yeast, and DNA sequence analysis of specific codons in the Ki-ras
16 oncogene in mouse lung tumors.

17 Most *Drosophila* studies administered PAH compounds to either the suspension media or
18 to the diet for 48–72 hours prior to cross-mating and analysis of mutations (Frolich and Wurgler,
19 1990; Valencia and Houtchens, 1981; Fahmy and Fahmy, 1980). One study used abdominal
20 injection as an exposure pathway (Zijlstra and Vogel, 1984). The mutagenic endpoints evaluated
21 included somatic mutations (i.e., eye color mosaicism, wing spots) (Frolich and Wurgler, 1990;
22 Fahmy and Fahmy, 1980) or sex-linked recessive lethal mutations (Zijlstra and Vogel, 1984;
23 Valencia and Houtchens, 1981). Only two PAHs were evaluated in the *Drosophila* studies in
24 addition to benzo[a]pyrene (benz[a]anthracene and pyrene), and the results were either negative
25 or inconsistent in all studies (Frolich and Wurgler, 1990; Zijlstra and Vogel, 1984; Valencia and
26 Houtchens, 1981; Fahmy and Fahmy, 1980). A significant effect was seen for benz[a]anthracene
27 only with cross-breeding of strains selected for enhanced metabolic activity (Frolich and
28 Wurgler, 1990). No effect was observed using the standard strains.

29 An intraperitoneal host-mediated assay was described by Simmon et al. (1979). Five
30 PAHs (anthracene, benz[a]anthracene, benzo[e]pyrene, chrysene, and phenanthrene) were
31 administered to Swiss Webster mice by gavage or intramuscular injection (single dose only).
32 Microorganisms (*S. typhimurium* and *Saccharomyces cerevisiae*) were injected intraperitoneally
33 into exposed mice and were recovered 4 hours later for mutation analysis. Negative results were
34 observed and the host-mediated assay system was considered insensitive for detecting
35 carcinogenic PAHs.

36 A series of studies have investigated the mutation sequence in codons 12 and 61 of the
37 Ki-ras oncogene from PAH-induced lung adenomas in A/J mice (Nesnow et al., 1998a, 1996,
38 1995; Mass et al., 1993). As discussed in Section 2.4 (Similarities in Mode of Action for PAHs),

1 the purpose of these studies was to correlate the tumorigenic potency of specific PAHs with the
2 formation of DNA adducts and the mutation of specific codons in the Ki-ras oncogene. Six non-
3 alkylated PAHs were utilized in these studies (benzo[a]pyrene, benz[j]aceanthrylene,
4 benzo[b]fluoranthene, dibenz[a,h]anthracene, cyclopenta[c,d]pyrene, and dibenzo[a,l]pyrene).
5 Mutation analysis of the Ki-ras oncogene at codons 12 and 61 was carried out in PAH-induced
6 lung adenomas using polymerase chain reaction (PCR) amplification and dideoxy nucleotide
7 sequencing methods. The primary mutation type for benzo[a]pyrene, benzo[b]fluoranthene, and
8 dibenzo[a,l]pyrene was the GGT→TGT mutation. This guanine mutation was correlated with
9 the formation of diol epoxide guanine adducts. The GGT→CGT mutation was the primary
10 mutation type for benz[j]aceanthrylene and cyclopenta[c,d]pyrene. The CGT mutation was
11 associated with the formation of cyclopenta-guanine adducts and increased tumorigenic potency
12 (i.e., >90 adenomas per mouse) in A/J mice. Dibenz[a,h]anthracene was the only PAH evaluated
13 that did not induce mutations in Ki-ras codons 12 or 61. This compound produced diol epoxide
14 guanine adducts and lung adenomas in A/J mice, suggesting a possible interaction at a different
15 genetic target. The Ki-ras mutation analysis data were presented as percent of tumors with a
16 specific mutation at either codon 12 or 61. No dose-response data were provided.

17 Among the in vivo mutagenicity studies shown in Table 4-8, only one study met the
18 selection criteria for use in this analysis.

19 20 **4.3.3. In Vitro Studies of Cancer-Related Endpoints**

21 Many in vitro studies of cancer-related endpoints are present in the PAH database. As
22 previously discussed, only those studies that included at least one selected PAH and
23 benzo[a]pyrene as a reference compound were reviewed. Each study that was reviewed for the
24 purpose of RPF development is included in Tables 4-9 through 4-14. The tables summarize
25 study-specific information and indicate whether a particular study is considered useful for dose-
26 response assessment. The text provides an overall description of the available studies, including
27 a general description of the methodology used for each study type, the results, and the
28 weaknesses or problems associated with specific studies or study types.

29 30 **4.3.3.1. Bacterial Mutagenicity**

31 The bacterial mutagenicity of many PAHs has been extensively studied (39 studies with
32 benzo[a]pyrene; see Table 4-9). All of the studies used the Ames assay in *S. typhimurium*. A
33 total of 38 PAHs have been evaluated for their ability to induce mutations in bacterial systems.

34 The Ames Salmonella assay is a bacterial reverse mutation assay, which measures the
35 frequency at which histidine-independent bacteria arise from histidine-requiring bacterial strains
36 in the presence of a chemical mutagen. The results are generally expressed as either the number
37 of revertant colonies per plate or the number of revertants/nmol of the test compound (calculated
38 from the linear portion of the dose-response curve). Several strains of *S. typhimurium* have been

1 used to evaluate specific PAH mutation types; for example TA98, TA1537, and TA1538 detect
2 various frameshift mutations, TA1535 responds to base-pair substitution and TA100 responds to
3 a broad spectrum of mutations. Metabolism to reactive intermediates is required for PAH
4 mutagenicity in Salmonella and many metabolic activation systems have been employed. Rat
5 liver postmitochondrial supernatant (known as S9) from Aroclor-induced rats is most often used,
6 although other rodent species and enzyme inducers are sometimes employed. Isolated rat
7 hepatocytes or purified mixed-function oxidase enzymes were occasionally utilized for metabolic
8 activation of PAHs.

9 Of the PAHs tested for bacterial mutagenicity, most were considered positive in at least
10 one study under optimal study conditions. Compounds that produced negative results in multiple
11 studies include anthracene, fluorene, phenanthrene, and pyrene. The primary weakness of the
12 bacterial mutagenicity database for PAHs is the limited amount of multiple-dose data for many
13 PAHs. Many studies report findings at a single dose level for several PAHs.

14 Among the in vitro bacterial mutagenicity studies shown in Table 4-9, 29 studies met the
15 selection criteria for use in this analysis.

16 17 **4.3.3.2. Mammalian Mutagenicity**

18 Studies that evaluate the mutagenicity of target PAHs in mammalian cells are described
19 in Table 4-10 (29 studies). The most common cell types used in these studies were the
20 V79 Chinese hamster cells and the L5178Y mouse lymphoma cells. Other cell types include
21 human epidermal keratinocytes, TK6 human lymphoblasts, human epithelial cells (HS1 HeLa),
22 human foreskin fibroblasts (D-550), mouse fibroblasts, rat embryo cells, rat liver epithelial cells
23 (ARL-18), and Chinese hamster ovary (CHO) cells. A total of 14 PAHs have been evaluated for
24 their ability to induce mutations in mammalian cell systems.

25 Each of the mammalian cell assays detects forward mutations that confer resistance to a
26 toxic chemical. Mutations in the hypoxanthine-guanine phosphoribosyl transferase gene (HPRT)
27 result in resistance to purine analogs such as 6-thioguanine, 8-azaguanine, and ouabain. HPRT
28 mutations induced by PAHs were most often measured in V79 Chinese hamster cells, but have
29 also been detected in human, rat, and mouse cell lines. Forward mutation at the thymidine
30 kinase locus (TK) is measured as colony growth in the presence of thymidine analogs (e.g.,
31 trifluorothymidine or 5-bromo-2'-deoxyuridine). PAH-induced TK mutations were measured in
32 mouse lymphoma cells (L5178Y) and human lymphoblasts. Forward mutation assays are
33 considered to respond to a variety of mutation types (including frameshift, base-pair substitution,
34 deletions and rearrangements or complex mutations). Exogenous metabolic activation is
35 required for PAH mutagenicity in most mammalian cell assays. This was accomplished using a
36 rat liver S9 mix or cocultivation with other rodent cells able to metabolize PAHs to reactive
37 intermediates (i.e., hamster embryo cells, fibroblasts, or hepatocytes; rat hepatocytes). The

1 results of forward mutation assays in mammalian cell lines are generally expressed as mutant
2 frequency/10^x survivors.

3 Of the 26 PAHs tested for mammalian cell mutagenicity, all were considered positive in
4 at least one study under optimal study conditions. Compounds that produced negative results in
5 some studies include anthracene, benzo[e]pyrene, phenanthrene, and pyrene. Benzo[a]-
6 anthracene produced positive findings in seven studies and negative findings in four studies. The
7 mammalian mutagenicity studies generally provide more multi-dose data than the bacterial
8 mutagenicity studies.

9 Among the in vitro mammalian mutagenicity studies shown in Table 4-10, 27 studies met
10 the selection criteria for use in this analysis.

11 12 **4.3.3.3. Morphological/Malignant Cell Transformation**

13 Twenty-five studies examined the capacity of benzo[a]pyrene and other PAHs to
14 transform cells in culture (Table 4-11). All of these studies were conducted using mammalian
15 cells, most commonly mouse or hamster embryo cells. A few studies added feeder cells or rat
16 liver homogenate to enhance metabolic activation in the test system; however, the majority relied
17 on the intrinsic metabolic capacity of the cells. The general test protocol involved seeding the
18 cultured cells in Petri dishes followed by exposure to a solution of the test compound, usually for
19 a period of 24 hours. The cells were then cultured for about 6 weeks before being fixed and
20 stained. Transformed colonies (foci) were scored based on characteristics such as cell piling,
21 criss-crossing, basophilic staining, and/or invasion of surrounding (nontransformed) cell
22 monolayer. In studies conducted by some laboratories, foci were classified as Type II or
23 Type III; the latter category included those with invasion of the surrounding monolayer, highly
24 criss-crossed arrays, and deep staining. Data were generally reported as the number of foci
25 (colony of transformed cells) per dish or per surviving cells and/or the percent of dishes with
26 foci.

27 In a few cases (e.g., Greb et al., 1980), transformation was assessed by growth of treated
28 cells in soft agar. Transformed cell colonies growing in semi-solid agar are capable of
29 anchorage-independent growth.

30 Three studies (Evans and DiPaolo, 1975; Kakunaga, 1973; DiPaolo et al., 1972)
31 confirmed the identification of malignant cells by injecting the transformed cells into rodents and
32 following tumor induction in the animals. In all three cases, cells identified as transformed gave
33 rise to tumors, while the cells without these characteristics did not.

34 Cell transformation assays were identified that included 22 individual PAHs other than
35 benzo[a]pyrene. Dibenz[a,h]anthracene consistently gave rise to transformed cells in all but one
36 of the seven studies in which it was tested. Cyclopenta[c,d]pyrene, indeno[1,2,3-c,d]pyrene,
37 benzo[j]aceanthralene, benz[e]aceanthrylene, and dibenz[k,mno]acephenanthrylene were each
38 tested in a single study and gave positive results. Benz[a]anthracene, pyrene, phenanthrene,

1 benzo[e]pyrene, and anthracene each gave negative results in a number of studies, while
2 fluoranthene, benzo[k]fluoranthene, dibenz[j,mno]acephenanthrylene, naphth[1,2,3-mno]ace-
3 phenanthrylene, and aceanthrylene were each tested in a single study and gave negative results.
4 Only a single dose of the target PAH was applied in 8 of the 26 studies of in vitro morphological/
5 malignant cell transformation.

6 Among the in vitro morphological/malignant transformation studies shown in Table 4-11,
7 19 studies met the selection criteria for use in this analysis.

9 **4.3.3.4. DNA Adducts**

10 Several studies (14) were identified in which DNA adducts were measured after either
11 whole cells or extracted DNA were incubated with benzo[a]pyrene and at least one other PAH.
12 Table 4-12 shows general study details for these studies. Most of the studies involved
13 measurement of DNA adducts in whole mammalian cells, while some measured adducts formed
14 when PAHs were incubated with extracted DNA. Whole cells were usually incubated with
15 PAHs for about 24 hours, while extracted DNA was exposed to PAH solutions for a shorter time
16 period (1–3 hours). Some of the studies added metabolic activation (usually rat liver
17 microsomes) to the incubation solution. Melendez-Colon et al. (2000) evaluated DNA adduct
18 formation after dibenzo[a,l]pyrene exposure in two cell types: one having significant CYP450
19 activity (MCF-7 cells) and one lacking significant CYP450 activity (HL-60). The authors
20 reported that adducts were formed in the cells having CYP450 activity, but no adducts were
21 formed in the cells lacking such activity.

22 Identification and quantification of adducts was generally done using a [³²P]-postlabeling
23 assay as follows. After exposure, DNA was isolated and digested to mononucleotides.
24 Mononucleotides were radiolabeled with [³²P]-ATP, separated with thin layer chromatography,
25 and visualized by autoradiography. Relative adduct labeling was measured using a scintillation
26 counter. A few early studies used [³H]-labeled PAHs to identify and quantify adducts. In some
27 cases, adducts were identified by high-performance liquid chromatography and GC-MS.

28 The 14 studies reviewed examined 15 PAHs other than benzo[a]pyrene. Apart from
29 phenanthrene, which did not result in measurable DNA adducts when incubated with calf thymus
30 DNA under various conditions (Bryla and Weyand, 1992), each of the PAHs produced
31 measurable DNA adducts in at least one study.

32 Major limitations associated with some of the in vitro DNA adduct data for relative
33 potency development include the lack of data at multiple PAH exposure levels, the use of
34 extracted DNA rather than whole cell assays, and the inconsistent use of extrinsic metabolic
35 activation sources. Only three studies with positive adduct findings reported adduct
36 measurements at multiple doses (concentrations) of PAH (Binkova et al., 2000; Melendez-Colon,
37 2000; Bryla and Weyand, 1992). Three studies used extracted DNA rather than whole cells to
38 measure DNA binding (Segerback and Vodicka, 1993; Bryla and Weyand, 1992; Grover and

1 Sims, 1968). Finally, the available studies on DNA adduct formation use cell types with varying
2 degrees of PAH metabolic capacity, with and without added metabolic activation sources. Both
3 the types and the quantities of DNA adducts formed are likely to depend on the level of
4 metabolic activation for most PAHs.

5 Among the in vitro DNA adduct studies shown in Table 4-12, 10 studies met the
6 selection criteria for use in this analysis.

7 8 **4.3.3.5. DNA Damage/Repair**

9 Twenty-four reports in the database evaluated the effects of one or more PAHs on DNA
10 damage, repair, or synthesis. Table 4-13 summarizes the study design information and results of
11 these studies. Studies included measures of unscheduled DNA synthesis and DNA damage.
12 Unscheduled DNA synthesis was generally measured by increased radiolabeled (³H) thymidine
13 uptake in treated cells versus untreated cells. DNA damage was measured either using the
14 alkaline elution assay for DNA strand breakage in mammalian cells, or using the differential
15 killing of DNA repair-deficient bacterial strains. Metabolic activation of PAHs was most often
16 accomplished using a rat liver S9 mix.

17 Twenty-eight different PAHs have been tested for effects on DNA in one or more assays.
18 In general, pyrene, anthracene, phenanthrene, perylene, fluorene, and benzo[e]pyrene gave
19 negative results in multiple studies. Chrysene gave negative results in four assays and positive
20 results in one assay (Mersch-Sundermann et al., 1992). More positive than negative results were
21 reported for benz[a]anthracene, dibenz[a,h]anthracene, and dibenz[a,c]anthracene. Other PAHs
22 were tested only once, or gave roughly an equal frequency of positive and negative responses in
23 these assays.

24 Although a large number of PAHs have been tested for DNA damage/repair, the database
25 includes both bacterial and mammalian cells and several different genotoxic endpoints. In
26 addition, the use of external metabolic activation, or cell types with intrinsic metabolic capacity,
27 was inconsistent across these studies. These limitations make it difficult to compare studies
28 using the same target PAHs.

29 Among the in vitro DNA damage/repair studies shown in Table 4-13, 15 studies met the
30 selection criteria for use in this analysis.

31 32 **4.3.3.6. Clastogenicity or Sister Chromatid Exchange Frequency**

33 The database contains 18 studies in which clastogenicity or sister chromatid exchange
34 frequency was measured in cultured cells after exposure to benzo[a]pyrene and at least one other
35 PAH (Table 4-14). A wide variety of cell types was used in these assays, including hamster
36 liver, lung, CHO and V79 cells; rat liver epithelial cells; human teratocarcinoma epithelial cells;
37 rat and human mammary epithelial cells; mouse, rat, and human fibroblasts; human
38 lymphocytes; and guinea pig fetal cells. A number of the studies used a metabolic activation

1 system, typically either rat liver S9 or coculture with a cell type able to metabolize PAHs. While
2 laboratory methods varied widely, the general approach involved treating the cultured cells with
3 a solution of the test compound, either with or without metabolic activation. Usually,
4 bromodeoxyuridine was added to the growth medium to provide a means of staining metaphase
5 chromosomes, and colcemid was used to arrest mitotic cells. Chromosomes were examined
6 microscopically and aberrations or exchanges were scored visually. In most cases, the endpoint
7 examined was frequency of sister chromatid exchanges. Other endpoints included frequency of
8 micronuclei and scoring of chromosomal aberrations such as breaks, gaps, deletions, etc.

9 Only eight PAHs (anthracene, benz[a]anthracene, benzo[e]pyrene, cyclopenta-
10 [c,d]pyrene, fluoranthene, perylene, phenanthrene, and pyrene) have been tested for clastogenic
11 effects in vitro. In many cases, the available studies were aimed at evaluating the validity of a
12 given test system to predict carcinogenicity. In these studies, a range of compounds of known or
13 believed carcinogenicity were used. Often, benzo[a]pyrene was included as a known carcinogen,
14 and other PAHs were chosen because they were known or believed to be noncarcinogenic or
15 weakly carcinogenic.

16 Among the tested compounds, four gave positive results in at least one study. With few
17 exceptions, PAHs administered without metabolic activation gave negative responses in these
18 assays. Cyclopenta[c,d]pyrene was reported to increase the frequency of sister chromatid
19 exchanges in two assays, one with and one without metabolic activation (Murison, 1988;
20 Krolewski et al., 1986). Benz[a]anthracene gave positive results in three studies of sister
21 chromatid exchange induction (Mane et al., 1990; Tong et al., 1983; 1981a) and negative results
22 in a fourth (Warshawsky et al., 1995). Kochhar (1982) reported a dose-dependent increase in
23 chromosomal aberrations in V79 cells treated with benz[a]anthracene in the absence of metabolic
24 activation. Perylene increased aberrations in one system (Popescu et al., 1977), but did not
25 increase sister chromatid exchanges in another (Sirianni and Huang, 1978). Likewise, pyrene
26 gave positive results in a number of studies that included metabolic activation (Evans and
27 Mitchell, 1981; Perry and Thomson, 1981; Popescu et al., 1977) and negative results in several
28 that did not include activation (DeSalvia et al., 1988; Tong et al., 1983, 1981a; Dean, 1981; Abe
29 and Sasaki, 1977).

30 The clastogenicity and sister chromatid exchange data for PAHs are variable with respect
31 to cell type and use of extrinsic metabolic activation. Some cells have intrinsic metabolic
32 activity, while others require activation from an external source. The degree to which metabolic
33 activation is required for PAHs to exert a clastogenic effect in cell cultures is not well
34 established. Another limitation of these data stems from the fact that a small number of PAHs,
35 many traditionally believed to be noncarcinogenic or weakly carcinogenic, have been tested for
36 clastogenic effects in vitro.

37 Among the in vitro clastogenicity/sister chromatid exchange studies shown in Table 4-14,
38 10 studies met the selection criteria for use in this analysis.

1
2 **4.4. SUMMARY OF INFORMATION AVAILABLE TO DEVELOP RPFs FOR**
3 **INDIVIDUAL PAHs**

4 The PAH database contains several different types of data that may be used to estimate
5 relative potencies of individual PAHs. The data were summarized in Section 4.3 and include in
6 vivo tumor bioassays using various routes of exposure and data for cancer-related endpoints
7 from both in vivo and in vitro studies. As discussed above, the concurrent testing of
8 benzo[a]pyrene as a reference compound was considered essential to allow for RPF calculation.
9 The introduction to Section 4.3 lists criteria for selecting studies or data sets for use in the
10 analysis. Studies that met these criteria were used in the development of the RPF approach.
11 Section 5 discusses methods used for dose response assessment and RPF calculation from each
12 study or dataset, and Section 6 discusses the selection of PAHs to be included in the RPF
13 approach using a weight of evidence evaluation of the available data. Section 7 describes the
14 derivation of final RPFs for each PAH included in the analysis.
15
16

17 **5. METHODS FOR DOSE-RESPONSE ASSESSMENT AND RPF CALCULATION**
18
19

20 A discussion of the available data on PAH carcinogenicity and cancer-related endpoints
21 and criteria for selection of studies was presented in Section 4. This section describes the
22 selection of dose-response data and methods for dose-response assessment and RPF calculation
23 from the selected datasets. The dose-response data extracted from each study with positive
24 results and the results of the statistical analyses are shown in Appendix C. Appendix C also
25 contains information regarding the source of the dose-response data (i.e., the figure or table
26 number from the study and the particular data points that were used in the dose-response
27 assessment) and additional comments on the use of the data for dose-response assessment and
28 RPF calculation. The results of the RPF calculations are shown in tables in Appendix E. These
29 tables provide summary information for each study, including the PAHs that were tested, the
30 data used to estimate the slopes (point estimate or BMD model result), the calculated RPF value,
31 and any specific comments related to the data analysis.
32

33 **5.1. CHOICE OF DOSE-RESPONSE DATA**

34 For each of the endpoints evaluated in Section 4 (dermal, intraperitoneal, subcutaneous,
35 and other route bioassays; in vivo DNA adducts; in vivo clastogenicity or sister chromatid
36 exchange frequency; in vitro bacterial and mammalian mutagenicity; in vitro morphological/
37 malignant transformation; in vitro clastogenicity or sister chromatid exchange frequency; and
38 other in vitro endpoints [DNA adducts, unscheduled DNA synthesis, DNA damage, etc.]) there

1 was at least one study that met selection criteria. For those studies with positive findings, dose-
2 response data were extracted for dose-response assessment and calculation of RPFs. Data that
3 were reported in graphical format in published studies were digitized (Grab It!TM Graph
4 Digitizer, Datatrend Software) to identify the dose-response data points.

5 As discussed in Section 4.3, statistics were used for tumor bioassay data to determine
6 whether the tumor incidence or multiplicity observed at a particular dose represented a
7 statistically significant increase over controls. If statistical analyses were not described in the
8 original report, incidence data were analyzed using Fisher's Exact test and the Cochran-Armitage
9 trend test. Positive findings were indicated by a significant ($p < 0.05$) difference for at least one
10 dose group by comparison to control (in Fisher's Exact or an equivalent test) or a significant
11 dose-response trend (Cochran-Armitage or equivalent) for multi-dose studies. For tumor
12 bioassay data reported as tumor count, a t-test was conducted (when variance data were
13 available) to determine whether the count was significantly different from control ($p < 0.05$).
14 The results of the statistical analyses are shown with the dose-response data in Appendix C.

15 The tumor bioassays that reported both incidence and tumor count were unique in
16 offering two different datasets for the same study. For each dose of each PAH in the tumor
17 bioassays, the decision to calculate an RPF, and in some instances, the selection of the point of
18 departure, was based on whether the tumor incidence or count was statistically significantly
19 increased over the control; if there was a significant increase, an RPF was calculated. There
20 were a few instances where the statistical tests for tumor incidence and tumor number were
21 inconsistent (i.e., the incidence of tumors was statistically significantly increased, but the tumor
22 count was not, or vice versa). Sometimes, this circumstance existed only at a low dose, with
23 consistent findings at higher doses, so the conclusion as to whether there was treatment-related
24 tumorigenicity (and whether an RPF should be calculated) was clear. In one case, however, the
25 conclusion as to whether there was treatment-related tumorigenicity was not clear. In female
26 mice exposed at the high dose of fluoranthene in the study reported by Busby et al. (1984), the
27 lung tumor count was significantly increased (albeit borderline, $p = 0.0343$) while the incidence
28 was not, and neither was statistically significantly increased at the lower dose. For the purpose
29 of this analysis, the multiplicity data were treated as an independent measure of carcinogenic
30 potency, and an RPF was calculated for the statistically increased tumor count irrespective of the
31 analysis of incidence. It should be noted that average tumor count can be skewed by an unusual
32 response in a single animal, and no information was available to determine whether such
33 response represented an anomaly unrelated to exposure or an unusual susceptibility to the
34 exposure. Thus, reliance on statistical analysis of mean tumor count alone as a measure of
35 carcinogenic response may be subject to additional uncertainty.

36 For cancer-related endpoint data, each study authors' conclusions regarding a positive or
37 negative response for each PAH were accepted, and RPFs were calculated when positive results
38 were reported.

1 In a few cases, the only data in a given publication were given as relative potency
2 (relative to benzo[a]pyrene). For these publications, which included only in vitro cancer-related
3 endpoint data (primarily mutagenicity), the relative potency estimates calculated by the authors
4 were used without modification (except for dose adjustment where appropriate; see Section 5.5).

5.2. OVERALL FORM OF RPF ESTIMATE

7 The overall goal of the dose-response analysis was to calculate ratios representing the
8 relative potency of a given PAH compared with benzo[a]pyrene (i.e., RPFs). For all datasets, the
9 RPF was defined as the ratio (PAH_i:BaP) of the slopes of the dose-response curves in the low-
10 dose region, following the equation (eq 5-1) below:

$$11 \quad \text{RPF} = \text{slope PAH}_i \div \text{slope BaP} \quad (5-1)$$

13
14 Data available for calculation of RPFs consisted of both quantal and continuous
15 endpoints. Quantal endpoints included tumor incidence or incidence of cancer-related endpoints
16 (including frequency of mutations). Continuous endpoint datasets included tumor counts
17 (number of tumors per animal) or cancer-related endpoints of a continuous-variable nature (e.g.,
18 number of sister chromatid exchanges, number of morphologically transformed colonies). Dose-
19 response assessment methods were specific to each type of endpoint (quantal or continuous) and
20 differed depending on whether there were multiple dose groups or a single dose group in the
21 dataset. Methods for multidose and single dose quantal and continuous data are described below.

5.3. RPF CALCULATION FOR MULTIDOSE DATASETS

23
24 Dose-response modeling using U.S. EPA's Benchmark Dose (BMD) Software (Version
25 1.3.2) was conducted on multiple-dose data sets to estimate potency for both the target PAHs and
26 benzo[a]pyrene. Modeled estimates consider information about the shape of the dose-response
27 curve and are thus preferred over using a single dose group as the point of departure.

28 *Dose-response modeling.* For multidose quantal data, the multistage model was used and
29 the degree of the polynomial was assumed to equal the number of dose groups minus 2 (extra
30 risk with background subtracted). The multistage model was selected because it is the preferred
31 model for cancer risk assessment of animal bioassay data, and it provided a consistent model
32 form for all of the datasets. For multidose continuous data, the linear model was selected for all
33 datasets, as it is the simplest model form for continuous data. For both quantal and continuous
34 datasets, the goodness-of-fit criteria were used to evaluate model fit. If the model did not
35 provide adequate fit to the data, high-dose groups were sequentially eliminated in an effort to
36 achieve adequate fit. The focus of the modeling effort is on the low dose and response region, so
37 doses and responses much higher than the benchmark response (BMR) are not as informative
38 and can be eliminated to improve model fit. If dose-group elimination did not improve the

1 model fit, a point-estimate ratio approach was used (see Section 5.4). The BMD modeling
2 output for all datasets that were successfully modeled are shown in Appendix D.

3 *Selection of BMR: Multidose data for both PAH and benzo[a]pyrene.* For tumor
4 incidence data, the BMR used in estimating the point of departure was a 10% increase in tumor
5 incidence over controls (extra risk form). For cancer-related endpoints such as frequency of
6 mutations, endpoint-specific points of departure were selected based on the background/control
7 frequency of the endpoint and the detection limit of the assay. For example, a 1% frequency was
8 selected for a control mutation frequency of 1/10,000 and a detection limit of two- to threefold
9 above background.

10 For multidose continuous data, the BMR used in estimating the point of departure was a
11 change of 1 standard-deviation (1 SD) from the control mean. In the event that multiple-dose
12 continuous data were reported in the absence of SD values, a point estimate ratio approach was
13 employed to calculate the slope (see Section 5.4).

14 *Selection of BMR: Multidose data for PAH, single dose benzo[a]pyrene.* Some studies
15 included only one dose of benzo[a]pyrene as a positive control, while providing multiple-dose
16 data for a selected PAH. In these cases, dose-response modeling was performed for the selected
17 PAH and the BMR used for modeling was the observed response for benzo[a]pyrene adjusted for
18 background response. For tumor incidence data, for example, if the benzo[a]pyrene dose was
19 associated with a 60% extra risk for tumors, the BMR chosen for modeling the data for the PAH
20 was 60% extra risk. RPFs were then calculated using a ratio of the slope factors calculated with
21 equivalent points of departure (e.g., ED₆₀). The goal of this approach was to compare PAH
22 potencies at similar response locations on the dose-response curve. There is uncertainty
23 associated with relative potency estimates calculated at the high end of the dose-response curves
24 and using the resultant RPF for low-exposure scenarios, because the relative potency relationship
25 between any two PAHs may be different at the low end, compared with the high end, of the
26 dose-response curves. The uncertainties and limitations associated with the use of high-dose
27 data to estimate relative potency are further discussed in Section 7. Data sets for which tumor
28 incidence was $\geq 90\%$ in the lowest dose group were not used to calculate potency estimates and
29 RPFs, because the response is near plateau and such data provide insufficient information on the
30 slope of the dose-response relationship.

31 For continuous data, when a point estimate was used to estimate the slope for
32 benzo[a]pyrene and modeling was used to estimate the slope for a given PAH, the BMR used for
33 BMD modeling was a point value set at the response (e.g., mean number of tumors per animal
34 for tumor multiplicity data) observed in the benzo[a]pyrene group, adjusted for response in the
35 control group. This approach is consistent with the BMR used for quantal data when only a
36 single benzo[a]pyrene dose group was available. Provided that a linear model is fit to continuous
37 data, the choice of a higher BMR would not appreciably change the RPF.

1 *Selection of point of departure.* The point of departure selected for slope estimation was
2 the BMD estimate rather than the lower confidence limit on the benchmark dose (BMDL). The
3 BMD, as the central or “best” estimate of the dose associated with the selected BMR, was
4 considered a more stable basis for comparison between the potency of the selected PAH and
5 benzo[a]pyrene, and thus for calculation of relative potency, than the lower confidence limit.

6 *Extrapolation from point of departure.* The slopes of the dose-response curves in the
7 low-dose regions were calculated by linear extrapolation to the origin from the model-predicted
8 points of departure. Equation 5-2 below shows the calculation of slope from multidose quantal
9 data.

$$11 \quad \text{Slope} = [0.1/ED_{10}] \quad (5-2)$$

12
13 Equation 5-3 below shows the calculation of slope from multidose continuous data.

$$15 \quad \text{Slope} = [1SD_{\text{change}}]/[ED_{1SD}] \quad (5-3)$$

17 **5.4. RPF CALCULATION FOR SINGLE DOSE DATASETS**

18 A number of studies reported data for only single doses of benzo[a]pyrene and other
19 PAHs; for these studies, a point estimate approach was used to calculate the RPF. A point
20 estimate approach was also used to calculate RPFs for multidose datasets when model fit was not
21 achieved, when variance data were not available for continuous data, or when problems with
22 model implementation were encountered.

23 *Selection of point of departure.* When only one dose of each compound was used, there
24 was only one choice for the point of departure. However, when multidose data were available,
25 but a point estimate approach was used, the point of departure was chosen as follows. For tumor
26 bioassay data, the lowest dose associated with a statistically significant increase in tumor
27 incidence or multiplicity over control values was selected as the point of departure. Variance
28 was not reported for tumor multiplicity data in any of the dermal studies and for some of the
29 intraperitoneal studies, so the corresponding incidence data were used to determine the dose at
30 which a significant difference from control was observed.

31 The benzo[a]pyrene dose chosen in most instances was the lowest dose associated with a
32 significant increase in tumor count or incidence. For tumor multiplicity data, the PAH dose
33 chosen for the point estimate RPF calculation was the lowest dose associated with a tumor count
34 similar to that observed at the selected benzo[a]pyrene dose (similar to selecting a BMR similar
35 to the benzo[a]pyrene incidence). In the case of two dermal initiation studies conducted by
36 Cavalieri et al. (1991), however, the tumor count at the lowest dose of DBaLP was much higher
37 than the tumor count at the lowest benzo[a]pyrene dose associated with statistical significance.
38 In order to compare the doses associated with similar tumor counts (i.e., at a similar place on the

dose-response curve), a higher benzo[a]pyrene dose was chosen for the RPF calculation. A comparison of the RPFs calculated using this approach with RPFs calculated using the lowest dose associated with a statistically significant increase over controls for both dibenzo[a,l]pyrene and benzo[a]pyrene showed only small differences in the RPF values (9 vs. 10 in the 16-week study and 39 vs. 42 in the 27-week study). A similar approach was used to calculate the RPF for BjAC using the intraperitoneal multiplicity data from Mass et al. (1993).

For cancer-related endpoint data, statistical analysis was not always available for each dose group. For these data, the lowest dose that produced a near maximal change in the assay of concern was selected as the point of departure. That is, the highest dose in the linear portion of the dose-response curve (identified by visual display of the data) was selected in these cases.

Extrapolation from point of departure. As with multiple dose slope estimations, point estimate slope calculations also used the extra risk form. Thus, for single dose quantal data, the slope was calculated by linear extrapolation to the origin after an extra risk adjustment of the observed response (eq 5-4):

$$\text{Slope} = [(\text{Response at dose} - \text{Control Response}) \div (1 - \text{Control Response})] / \text{Dose} \quad (5-4)$$

For single dose continuous data, the slope was calculated by linear extrapolation to the origin after adjustment of the observed response in the PAH-treated animals for the control response (eq 5-5).

$$\text{Slope} = [(\text{Value of variable at dose}) - (\text{Value of variable})_{\text{control}}] / \text{Dose} \quad (5-5)$$

5.5. DOSE CONVERSION FOR RPF CALCULATION

Some of the studies used to calculate RPFs reported doses or test concentrations on a molar basis (e.g., μmol per mouse, $\mu\text{mol/L}$), rather than a mass basis (mg or μg). The molar ratio differs from the mass ratio for any PAH with a molecular weight that differs from that of benzo[a]pyrene; thus, for these compounds, an RPF expressed on a mass basis will differ from that expressed on a molar basis. Table 5-1 below shows a hypothetical example for fluoranthene, a PAH with a molecular weight that differs from benzo[a]pyrene by 20%. As the table shows, the RPF differs depending on which dose units are used.

Table 5-1 Comparison between molar and mass-based RPF

	Response	Dose in mol	Molecular weight (g/mol)	Dose in g	Molar RPF	Mass RPF
FA	0.1	5	202.26	1,011	0.20	0.25
BaP	0.1	1	252.32	252	1	1

33

1 In order to ensure that comparisons across endpoints used consistent units, the doses used
2 to calculate RPFs were converted to mass-based units using the molecular weight of the relevant
3 PAH prior to estimating the RPF. The mass-based RPF was selected to be consistent with dose
4 metrics used to calculate cancer risk; RPFs are used with oral slope factors and inhalation unit
5 risks reported on a mass basis (e.g., $[\text{mg}/\text{kg}\text{-day}]^{-1}$; $[\mu\text{g}/\text{m}^3]^{-1}$).

6 7 **5.6. SPECIAL CONSIDERATIONS FOR RPF CALCULATION USING TUMOR** 8 **BIOASSAY DATA**

9 Several dermal bioassays reported significant mortality prior to the appearance of the first
10 skin tumor. For these data sets, an assumption was made that the number of animals at risk for
11 tumor development was equal to the total number of animals alive at the time of the appearance
12 of the first tumor. Benign and malignant tumor types within the same target organ were
13 combined for calculation of the RPF. The total incidence of animals with either a benign or
14 malignant lesion was directly reported in each study (i.e., the number of animals with adenoma
15 or carcinoma).

16 Tumor incidence data reported for different target organs within the same group of
17 animals were analyzed separately unless the joint incidence (incidence of either tumor type in
18 each dose group) was reported in the publication. Liver and lung tumors were reported in
19 newborn mice exposed to PAHs by intraperitoneal injection (LaVoie et al., 1994, 1987; Busby et
20 al., 1989, 1984; Weyand and LaVoie, 1988; Wislocki et al., 1986). In most studies, tumor
21 incidence was reported separately for the different target organs and could not be combined as
22 the joint incidence was unknown. A gender difference was observed in the newborn mouse
23 studies, with liver tumors observed in male mice only, and lung tumors reported for both male
24 and female mice. The tumor incidence data were, therefore, evaluated separately for male and
25 female mice. RPF values were calculated separately for male and female mice and for lung
26 tumor incidence and liver tumor incidence in these studies.

27 28 **5.7. SPECIAL CONSIDERATIONS FOR RPF CALCULATION USING CANCER-** 29 **RELATED ENDPOINT DATA**

30 The in vitro studies of cancer-related endpoints included measurements of bacterial
31 mutagenicity, mammalian mutagenicity, morphological/malignant cell transformation, DNA
32 adduct formation, DNA damage or repair, and clastogenicity or sister chromatid exchange
33 frequency. Many of the studies describing in vitro cancer-related endpoints provide dose-
34 response data under varying study conditions. For example, bacterial mutagenesis studies used
35 multiple strains, different metabolic activation processes, and/or varying assay systems. In order
36 to limit the number of datasets used for dose-response analysis of in vitro mutagenicity studies,
37 and to provide a consistent basis for comparing RPFs for different PAHs, data associated with
38 the conditions that maximized the benzo[a]pyrene response within a particular study were used

1 for the dose-response assessment of PAHs. It should be noted that in several studies, test
2 conditions that were optimal for benzo[a]pyrene were not necessarily optimal for the selected
3 PAH (see Appendix C for specific studies). The uncertainties and limitations associated with
4 this approach are discussed further in Section 8.

5 For time-course studies of DNA adducts, results were reported as either AUC or peak
6 formation of adducts. AUC was considered preferable for dose-response assessment, because
7 this measure considers both adduct formation and repair. Adducts measured in more than one
8 organ were summed to derive a total measure of adduct formation (standardized per unit amount
9 of DNA).

10 The data for bacterial and mammalian cell mutagenicity and malignant cell
11 transformation were sometimes expressed as a mutation or transformation frequency (i.e.,
12 mutants/total cell count or transformed cells/total cells). For multiple-dose studies, these quantal
13 variables were evaluated using the multistage model as described above. Problems were
14 sometimes encountered when using the multistage model for incidence data of this type. In some
15 cases, modifying the initial parameters in the multistage algorithm facilitated convergence. In a
16 select few cases, the quantal linear model was used when the multistage model would not
17 converge. If neither the multistage nor quantal linear models provided adequate fit, a point
18 estimate approach was used. If possible, the point estimates for both benzo[a]pyrene and the
19 target PAH were chosen at a comparable response level (e.g., the doses of benzo[a]pyrene and
20 the target PAH that both gave two mutants in 10^5 cells). However, in many cases, a comparable
21 response rate was not available. In these instances, the RPF was derived from slopes calculated
22 by linear extrapolation from the peak response.

23 As noted earlier, for studies that included only one dose of benzo[a]pyrene and multiple
24 dose data for a selected PAH, the BMR selected for dose-response modeling for the selected
25 PAH was the benzo[a]pyrene response with the background or control response subtracted. In
26 some instances, when the benzo[a]pyrene response level greatly exceeded the response at the
27 highest dose of the selected PAH, the software would fail to calculate the ED at the
28 benzo[a]pyrene response level. In these instances, a point estimate approach using the peak
29 response for the selected PAH was used.

30 The individual study RPFs calculated for each PAH were used in a weight of evidence
31 evaluation to assess the potential carcinogenicity of each compound (see Section 6) and in the
32 derivation of a final RPF for each compound (Section 7).

33 34 35 **6. SELECTION OF PAHS FOR INCLUSION IN RELATIVE POTENCY APPROACH**

1 The selection of PAHs to be included in the RPF approach began with an evaluation of
 2 whether the available data were adequate to assess the potential carcinogenicity of each
 3 compound. At least one RPF value was calculated for each of 50 PAHs. For 16 of these
 4 compounds, only a single RPF value derived from an in vitro cancer-related endpoint (primarily
 5 mutagenicity assays) was available. These PAHs are shown in Table 6-1. Due to the limited
 6 data available for these 16 compounds, no further evaluation of these PAHs was conducted, and
 7 they were not selected for inclusion in the RPF approach.

8
Table 6-1. PAHs with only one RPF from in vitro cancer-related endpoint study and excluded from RPF approach

PAH	CASRN	Abbreviation
Aceanthrylene	202-03-09	ACEA
Acenaphthene	83-32-9	AN
Acenaphthylene	208-96-8	ANL
Acephenanthrylene	201-06-9	APA
Benzo[a]perylene	191-85-5	BaPery
Benz[b]anthracene	92-24-9	BbA
Benzo[b]perylene	197-70-6	BbPery
Benzo[c]phenanthrene	195-19-7	BcPH
Cyclopent[h,i]aceanthrylene	131581-33-4	CPhiACEA
Cyclopent[h,i]acephenanthrylene	114959-37-4	CPhiAPA
Dibenzo[a,f]fluoranthene	203-11-2	DBaFf
Dibenz[a,j]anthracene	224-41-9	DBajA
Dibenzo[b,e]fluoranthene	2997-45-7	DBbeF
Dibenzo[e,l]pyrene	192-51-8	DBelP
Dibenz[k,mno]acephenanthrylene	153043-81-3	DBkmnoAPH
Naphtho[2,3-a]pyrene	196-42-9	N23aP

9
 10 The remaining 34 PAHs had RPF values calculated from at least one in vivo dataset or at
 11 least two in vitro cancer-related endpoint datasets. For these compounds, a weight of evidence
 12 approach was used to determine whether the available data (including the calculated RPFs as
 13 well as negative studies that met selection criteria) were adequate to assess the carcinogenic
 14 potential. Using the calculated RPFs in the weight of evidence evaluation allowed consideration
 15 of the magnitude of calculated RPFs in assessing potential carcinogenicity. When data were not
 16 considered adequate, the PAH was excluded from the RPF approach. When data were
 17 considered adequate for a given PAH, it was selected for inclusion.

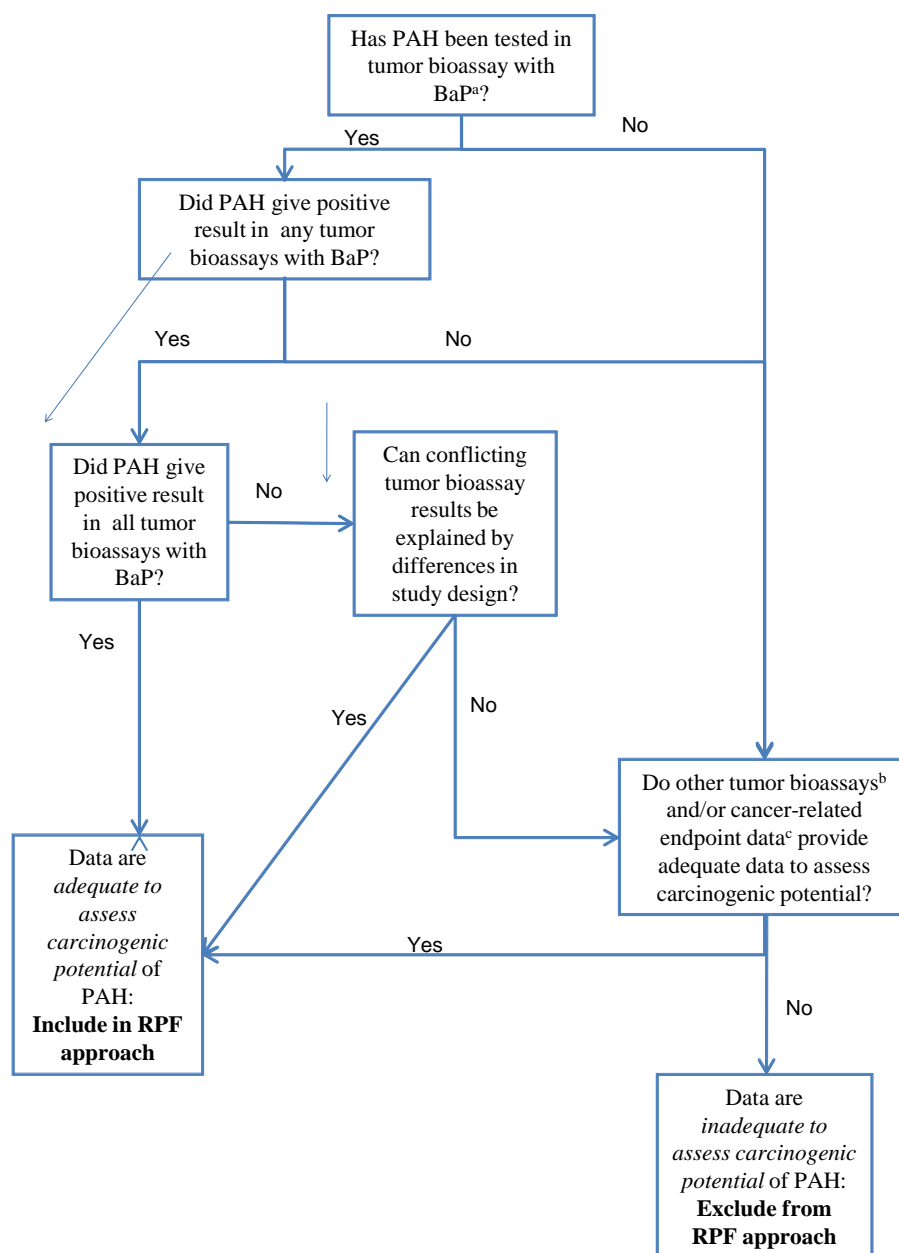
18 *A PAH with adequate evidence to suggest that it has little or no carcinogenic potential*
 19 *was selected for inclusion in the RPF approach and assigned an RPF of 0. While there is little*
 20 *quantitative difference between selecting a final RPF of zero for a given PAH and excluding that*
 21 *PAH from the RPF approach, this is an important distinction for uncertainty analysis. There is*

1 substantial uncertainty in the risk associated with a PAH that is excluded from the RPF approach
2 due to inadequate data; this compound could be of low or high potency. However, for a PAH
3 with an RPF of 0, there is evidence to suggest that this compound exhibits little or no
4 carcinogenic potential, and the uncertainty associated with the cancer risk for this compounds is
5 markedly reduced. For anthracene, phenanthrene, and pyrene, it has been determined that the
6 available data support a practical RPF of zero. It is possible that the studies available may not
7 provide sufficient sensitivity to compare the potency of the PAHs of interest to benzo[a]pyrene,
8 and thus, the RPF of zero should not be considered a characterization of the inherent
9 carcinogenicity of anthracene, phenanthrene, or pyrene. The weight of evidence analysis is
10 outlined in Section 6.1 and the results are described in narratives for each of the 34 individual
11 PAHs (Section 6.2). Section 7 describes how the RPFs from multiple datasets were used to
12 derive final RPFs for those PAHs selected for inclusion in the approach, and reports the final
13 RPF information for each PAH.

14 15 **6.1. METHOD FOR SELECTING PAHS FOR INCLUSION IN RELATIVE POTENCY** 16 **APPROACH**

17 For each of the 34 PAHs, a weight of evidence evaluation was conducted to assess the
18 evidence that each PAH could induce a carcinogenic response. This evaluation did not constitute
19 a formal weight of evidence evaluation of carcinogenic potential; rather, an approach was
20 developed using the data collected for this analysis to determine whether the available
21 information for each PAH was adequate to draw a conclusion regarding carcinogenic potential.
22 When the data were considered adequate for a given PAH, it was selected for inclusion in the
23 RPF approach. Figure 6-1 shows the decision tree that was used to evaluate the data for each
24 PAH and to determine whether it should be included in the RPF approach. The weight of
25 evidence evaluation concluded with one of two possible outcomes:

- 26
27 1. The data reviewed are adequate to evaluate potential carcinogenicity and the PAH should
28 be included in the RPF analysis, or
 - 29
30 2. The data reviewed are inadequate to assess carcinogenic potential and the PAH should be
31 excluded from the RPF analysis.
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^aBioassays with benzo[a]pyrene that met study quality criteria (includes studies with negative results).
^bOther bioassays include those that did not test benzo[a]pyrene and/or those that were not suitable for RPF derivation (e.g., incidence at lowest dose exceeded 90%).
^cCancer-related endpoint data examined in this process included studies of DNA adducts, clastogenicity or sister chromatid exchange, mutagenicity, morphological transformation, DNA damage, unscheduled DNA synthesis, etc. that included the selected PAH and benzo[a]pyrene.

Figure 6-1. Weight of evidence analysis of potential carcinogenicity.

In vivo tumor bioassays that included benzo[a]pyrene were given the greatest weight in assessing the potential carcinogenicity of a given PAH; data from other bioassays and cancer-

1 related endpoint studies were used to supplement the weight of evidence when the bioassay data
2 that included benzo[a]pyrene were conflicting or negative. Structural alerts for PAH
3 carcinogenicity or mutagenicity (specifically, at least four aromatic rings, or the presence of a
4 classic bay region or fjord region formed entirely by aromatic rings) were noted in the evaluation
5 for each PAH, but were not used explicitly in the weight of evidence evaluation.

6 When there were bioassays including benzo[a]pyrene with positive findings, and none
7 with negative findings for a given PAH, that compound was selected for inclusion in the RPF
8 approach, and no further evaluation of cancer-related endpoint data was conducted. However,
9 the cancer-related endpoint findings for these compounds were noted in the individual PAH
10 narratives (Section 6.2). Among the PAHs included in this analysis, there were none with
11 positive bioassay data and robust negative cancer-related endpoint data. Were this instance to
12 arise, it would require special consideration, as it might imply a different mode of carcinogenic
13 action than the PAHs addressed herein.

14 Bioassays that met selection criteria (see Section 4.3) were included in the weight of
15 evidence analysis, regardless of whether positive or nonpositive (i.e., negative) results were
16 found. However, the weight of evidence evaluation assumed that a given compound may be
17 active in one system (e.g., newborn mouse), and inactive or weakly active in another (e.g.,
18 dermal initiation). Thus, when conflicting results were observed in different test systems,
19 different species, or different genders, the PAH was assumed to be potentially carcinogenic
20 based on the positive findings and was included in the RPF approach.

21 In order to compare the results of bioassays with positive and nonpositive results in the
22 same test system, an “RPF detection limit” was conceptualized as a means of approximating the
23 minimum RPF that could be determined under the conditions of the study. The “RPF detection
24 limit” was defined as the ratio of the dose-response slopes³, using the lowest statistically
25 significant response that could be calculated for the subject PAH and the actual benzo[a]pyrene
26 response, as points of departure for the slope calculation. The lowest statistically significant
27 response was calculated using the incidence of tumors in the control group, number of animals in
28 the group treated with the subject PAH, and Fisher’s exact test⁴ (employing a one-sided
29 p -value ≤ 0.05). Appendix F shows an example calculation of an “RPF detection limit.” The
30 utility of this concept is in weighing positive and nonpositive bioassay results. If all of the
31 nonpositive studies had “RPF detection limits” in excess of what is observed in the positive
32 studies, then it is plausible that the nonpositive studies may not have been sufficiently sensitive
33 to estimate the low RPF appropriate to the subject PAH. In this event, the PAH was considered
34 potentially carcinogenic and included in the RPF approach.

³The standard RPF equation is $RPF = \text{slope PAH}_i \div \text{slope BaP} = [\text{response/dose}]_{\text{PAH}_i} \div [\text{response/dose}]_{\text{BaP}}$.

⁴This calculation was implemented using trial and error within the Fisher’s exact test in the online statistical calculator GraphPad[®].

1 If there were no bioassays with benzo[a]pyrene for a given compound, all of the selected
2 bioassays gave nonpositive results, or inconsistent results could not be explained by test system
3 or “RPF detection limit”, then the results of other bioassays (those without benzo[a]pyrene, or
4 those rejected from dose-response assessment exclusively because of concerns associated with
5 benzo[a]pyrene) and cancer-related endpoint data were evaluated. The weight of evidence
6 analysis then considered all of the following information: bioassays with benzo[a]pyrene, other
7 bioassays, and cancer-related endpoint data. If these data were determined to be inadequate to
8 assess the carcinogenic potential for a given PAH, then that compound was excluded from the
9 RPF approach. If the data were considered adequate to assess the carcinogenic potential, the
10 compound was retained and a final RPF was derived. Section 6.2 below describes the weight of
11 evidence evaluation for each of the 34 PAHs. Section 7.1 describes how final RPFs were
12 derived for the 26 PAHs selected for inclusion in the RPF approach.

13 14 **6.2. WEIGHT OF EVIDENCE EVALUATION FOR 34 INDIVIDUAL PAHS**

15 For each PAH, the structure is shown along with a brief reference to any structural alerts
16 for potential carcinogenicity (specifically, more than three aromatic rings and/or bay or fjord
17 region in alternant PAH). Next, a brief narrative describing the weight of evidence evaluation is
18 given, with a graphical representation of the data that were available for RPF calculation
19 (Figures 6-2 to 6-35). The graph for each compound provides a visual representation of the
20 database of studies that included both the subject PAH and benzo[a]pyrene. The solid bars show
21 the values of the RPFs calculated from all studies with positive findings. The x-axis label shows
22 the reference for the pertinent study. The RPFs are color-coded to distinguish among in vivo
23 tumor bioassays based on incidence data, in vivo tumor bioassays based on multiplicity data, in
24 vivo cancer-related endpoint studies, and in vitro cancer-related endpoint studies. Within these
25 categories, the RPFs are ordered (left to right in the graph) from highest to lowest, with positive
26 results shown before nonpositive results.

27 For each nonpositive bioassay, an empty, dotted bar shows what is termed the “RPF
28 detection limit” (see Section 6.1 for description). Missing bars designate cancer-related studies
29 that resulted in nonpositive findings. An RPF detection limit for nonpositive cancer-related
30 studies was not included, because comparisons between nonpositive and positive studies were
31 complicated by the wide variety of study conditions (e.g., test species and strains, metabolic
32 activation sources, assay systems).

33 Each narrative concludes with a statement as to whether the subject PAH was selected for
34 inclusion in the PAH RPF approach. The weight of evidence evaluation for the 34 PAHs with at
35 least one in vivo RPF or at least 2 in vitro cancer-related endpoint RPFs resulted in the selection
36 of 26 PAHs for inclusion in the RPF approach and the exclusion of 8 PAHs from the approach
37 (see Table 6-2).

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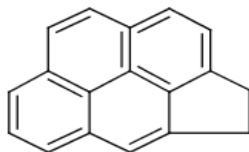
Table 6-2. Results of weight of evidence evaluation of 34 PAHs					
Adequate data: selected for inclusion in RPF approach					
PAH	CASRN	Abbreviation	PAH	CASRN	Abbreviation
Benzo[a]pyrene	50-32-8	BaP	Cyclopenta[d,e,f]chrysene, 4H-	202-98-2	CPdefC
Anthanthrene	191-26-4	AA	Dibenz[a,c]anthracene	215-58-7	DBacA
Anthracene	120-12-7	AC	Dibenzo[a,e]fluoranthene	5385-75-1	DBaeF
Benz[a]anthracene	56-55-3	BaA	Dibenzo[a,e]pyrene	192-65-4	DBaeP
Benz[b,c]aceanthrylene, 11H-	202-94-8	BbcAC	Dibenz[a,h]anthracene	53-70-3	DBahA
Benzo[b]fluoranthene	205-99-2	BbF	Dibenzo[a,h]pyrene	189-64-0	DBahP
Benz[e]aceanthrylene	199-54-2	BeAC	Dibenzo[a,i]pyrene	189-55-9	DBaiP
Benzo[g,h,i]perylene	191-24-2	BghiP	Dibenzo[a,l]pyrene	191-30-0	DBalP
Benz[j]aceanthrylene	202-33-5	BjAC	Fluoranthene	206-44-0	FA
Benzo[j]fluoranthene	205-82-3	BjF	Indeno[1,2,3-c,d]pyrene	193-39-5	IP
Benzo[k]fluoranthene	207-08-9	BkF	Naphtho[2,3-e]pyrene	193-09-9	N23eP
Benz[l]aceanthrylene	211-91-6	BlAC	Phenanthrene	85-01-8	PH
Chrysene	218-01-9	CH	Pyrene	129-00-0	Pyr
Cyclopenta[c,d]pyrene	27208-37-3	CPcdP			
Inadequate data					
PAH	CASRN	Abbreviation	PAH	CASRN	Abbreviation
Acepyrene, 2,3-	25732-74-5	ACEP	Coronene	191-07-1	CO
Benzo[b]fluorene, 11H-	243-17-4	BbFE	Fluorene	86-73-7	FE
Benzo[e]pyrene	192-97-2	BeP	Perylene	198-55-0	Pery
Benzo[g,h,i]fluoranthene	203-12-3	BghiF	Triphenylene	217-59-4	Tphen

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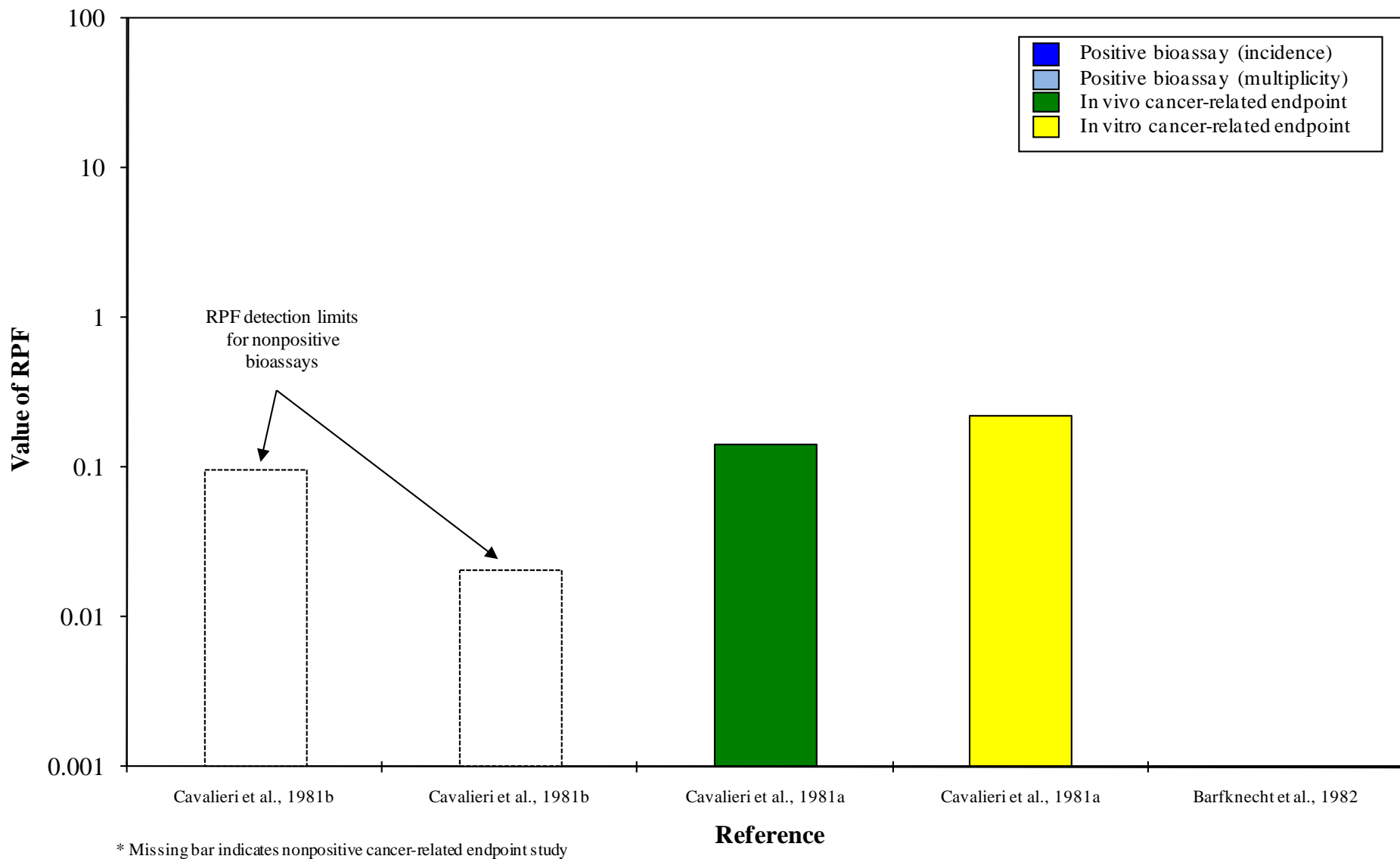
2,3-Acepyrene (ACEP)



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2,3-Acepyrene (CASRN 25732-74-5) is a nonalternant PAH comprised of four aromatic rings and one five-membered ring. 2,3-Acepyrene does not contain a classic bay or fjord region in its structure.

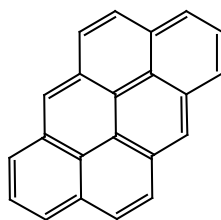
Five datasets for 2,3-acepyrene met selection criteria and included benzo[a]pyrene (shown in Figure 6-2). Dermal initiation and complete carcinogenicity bioassays in mice both resulted in nonpositive findings (both published by Cavalieri et al., 1981b). RPF detection limits for these studies were 0.09 and 0.02, respectively. The limited cancer-related data are mixed, with one positive dataset for in vivo DNA adduct formation, one positive bacterial mutagenicity dataset (both published by Cavalieri et al., 1981a), and one negative mammalian mutagenicity dataset (Barfknecht et al., 1982). There are no bioassays of 2,3-acepyrene without benzo[a]pyrene. Overall, the database for 2,3-acepyrene is both limited and inconsistent. The database for 2,3-acepyrene does not provide adequate information with which to assess potential carcinogenicity; this PAH was not selected for inclusion in the RPF approach.



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Figure 6-2. 2,3-Acepyrene (ACEP) RPFs*.

1 *Anthanthrene (AA)*

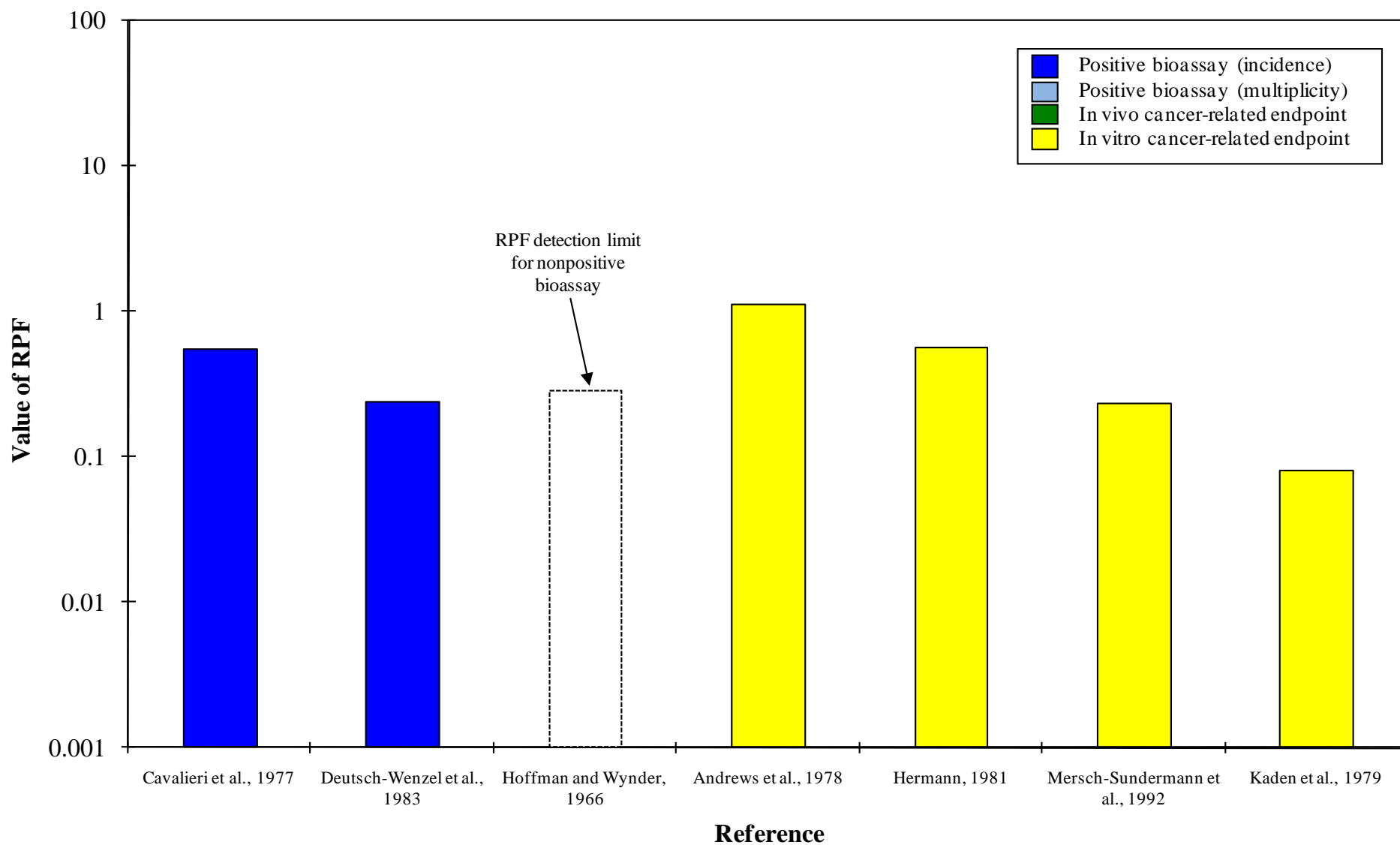


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5 Anthanthrene (CASRN 191-26-4) is an alternant PAH comprised of six fused aromatic
6 rings. Anthanthrene does not have a bay or fjord region in its structure.

7 There are seven datasets for anthanthrene that met selection criteria and included
8 benzo[a]pyrene (Figure 6-3). The database includes three in vivo tumor bioassays, three
9 bacterial mutagenicity datasets, and one in vitro DNA damage dataset. Statistically increased
10 tumor incidences were reported in both a rat lung implantation bioassay (Deutsch-Wenzel et al.,
11 1983) and a dermal complete carcinogenicity bioassay in mice (Cavalieri et al., 1977). No
12 increase over control tumor incidence was reported in a dermal initiation study (Hoffmann and
13 Wynder, 1966), but the RPF detection limit for this study was 0.3. All of the cancer-related
14 endpoint studies gave positive results. Because conflicting bioassay data can be explained by
15 differences in study design (initiation versus complete dermal carcinogenicity), anthanthrene was
16 considered potentially carcinogenic and selected for inclusion in the RPF approach.

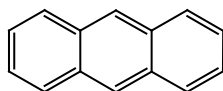
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Figure 6-3. Anthanthrene (AA) RPFs.

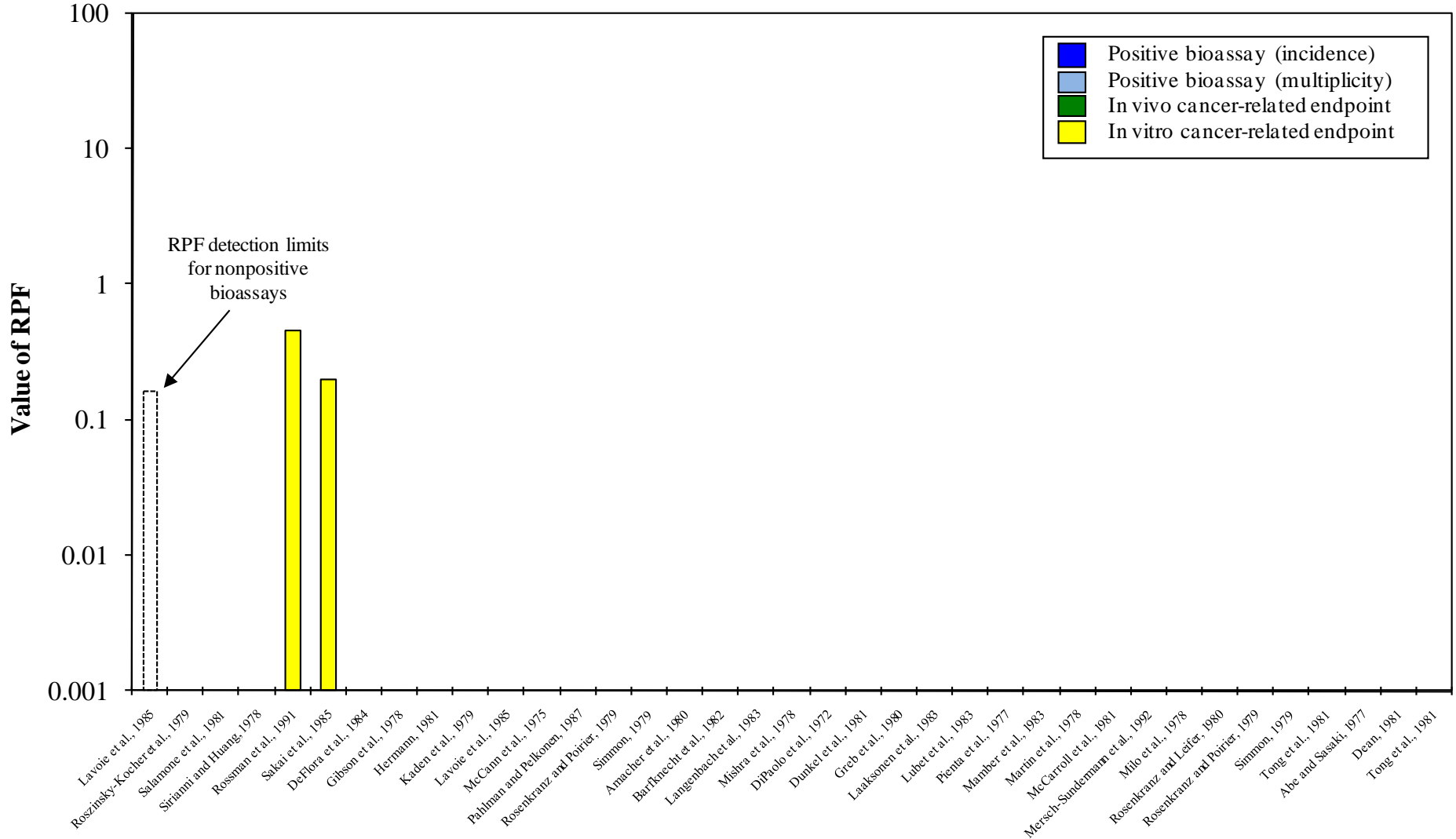
Anthracene (AC)



Anthracene (CASRN 120-12-7) is an alternant PAH comprised of three fused aromatic rings. Anthracene does not have a bay or fjord region in its structure, and contains less than four aromatic rings.

Thirty-seven datasets for anthracene met selection criteria and included benzo[a]pyrene, including 1 dermal initiation tumor bioassay, 3 in vivo clastogenicity or sister chromatid exchange datasets, 10 bacterial mutagenicity datasets, 4 mammalian mutagenicity datasets, 6 morphological/malignant cell transformation datasets, and 13 in vitro DNA adduct, DNA damage or clastogenicity datasets (Figure 6-4). The single dermal initiation bioassay gave a nonpositive result, with a RPF detection limit of 0.2 (LaVoie et al., 1985). Only two datasets gave positive results: an in vitro bacterial mutagenicity assay and an in vitro study of DNA damage. The remaining 35 datasets reported nonpositive findings. To confirm the negative findings in the one tumor bioassay that included benzo[a]pyrene, other bioassays and cancer-related endpoint data for anthracene were considered in the weight of evidence evaluation. In bioassays without benzo[a]pyrene, anthracene did not induce a statistically significant increase in tumor incidence in two dermal initiation studies (LaVoie et al., 1983; Salaman and Roe, 1956) and a lung implantation bioassay (Stanton, 1972). Scribner (1973) reported a weak tumorigenic response in a dermal initiation study in mice (4/28 mice developed papillomas by week 35 after dermal treatment with 10 μ mol anthracene in benzene followed by twice weekly treatment with TPA, as compared with 0/30 control mice, $p = 0.048$).

In vitro assays of mutagenicity (both bacterial and mammalian) are nearly all negative for anthracene (13/14 studies). Studies of morphological/malignant cell transformation were all negative. Finally, in numerous in vitro studies of DNA damage or clastogenicity, anthracene has given nonpositive results (12/13). Sakai et al. (1985) reported a mutagenic response in bacteria treated with anthracene, and Rossman et al. (1991) observed evidence of unscheduled DNA synthesis in *E. coli* treated with anthracene. Overall, the weight of evidence suggests that anthracene is not carcinogenic or is of very low carcinogenic potential. In addition, anthracene lacks all three known structural alerts (at least four rings, bay region or fjord region) for PAH carcinogenicity and/or mutagenicity. Because the weight of evidence evaluation suggests that the data are adequate to assess the carcinogenic potential of anthracene, this compound was selected for inclusion in the RPF approach and assigned a RPF of 0.



* Missing bar indicates nonpositive cancer-related endpoint study

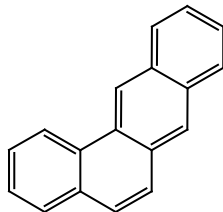
Reference

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Figure 6-4. Anthracene (AC) RPFs*.

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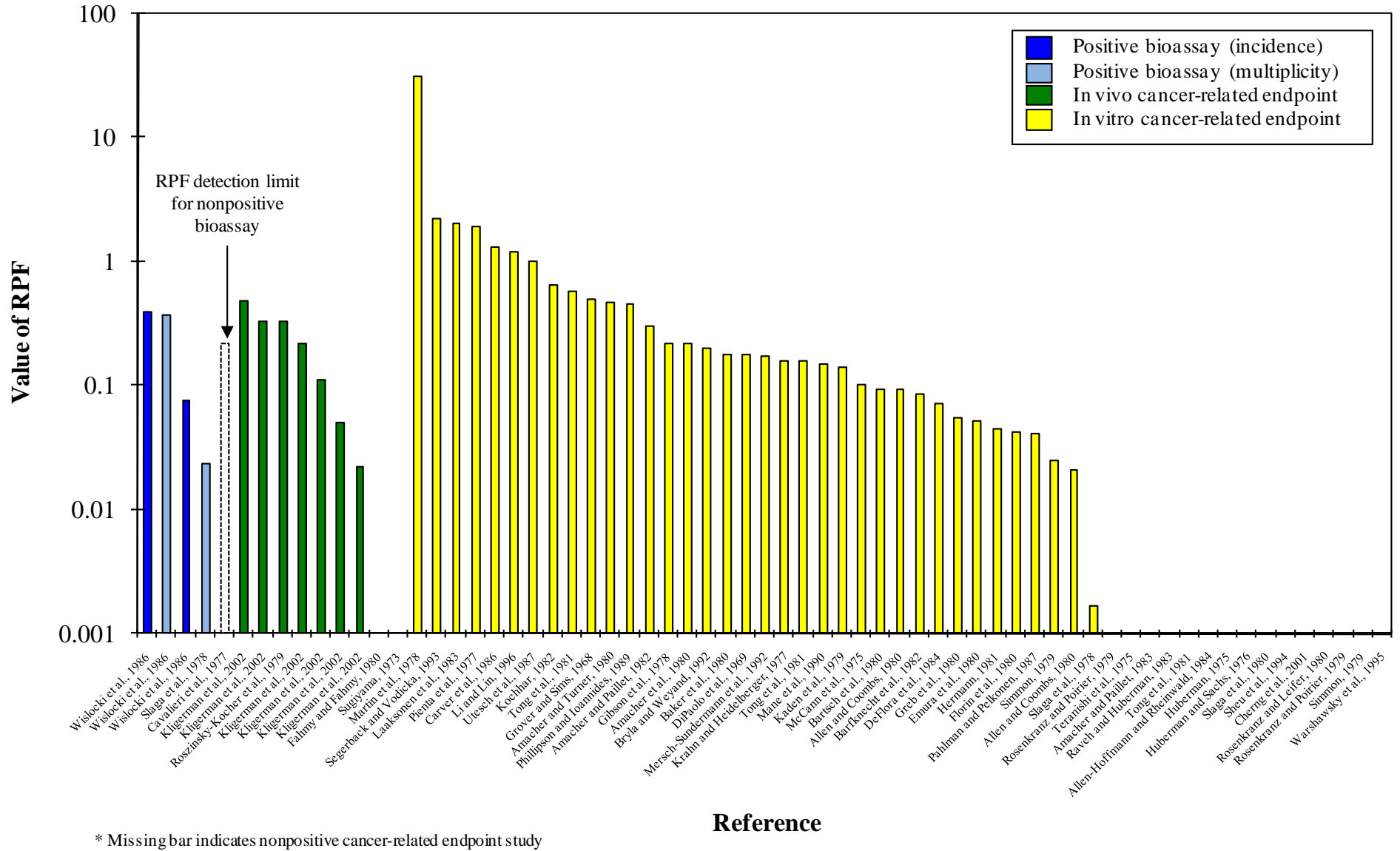
Benz[a]anthracene (BaA)



Benz[a]anthracene (CASRN 56-55-3) is an alternant PAH comprised of four fused aromatic rings. Benz[a]anthracene contains a bay region but no fjord region in its structure.

There are 65 datasets for benz[a]anthracene that met selection criteria and included benzo[a]pyrene (Figure 6-5). Included in the database are tumor bioassays (5), in vivo DNA adduct studies (4), in vivo clastogenicity studies (4), an in vivo mutagenicity study (1), bacterial mutagenicity (15), mammalian mutagenicity (14), morphological/malignant cell transformation assays (6), and in vitro studies of DNA damage, adducts, or clastogenicity (16). There are five tumor bioassay datasets of benz[a]anthracene that included benzo[a]pyrene; four gave positive results, and one gave a nonpositive result. The positive findings were in different genders tested in a newborn mouse study using intraperitoneal injection (Wislocki et al., 1986); the datasets included both tumor incidence and multiplicity data for both sexes. Positive results were also reported in a dermal initiation study (Slaga et al., 1978). The one nonpositive bioassay (Cavalieri et al., 1977) was a dermal complete carcinogenicity study with an RPF detection limit of 0.2. Benz[a]anthracene was shown to form DNA adducts when administered in vivo in both rats and mice via injection and gavage (Kligerman et al., 2002). Mutagenicity and morphological/malignant cell transformation assays of benz[a]anthracene were predominantly positive, as were studies of other cancer-related endpoints.

Given that the differing bioassay results can be attributed to different test systems and study design, benz[a]anthracene was considered potentially carcinogenic and was selected for inclusion in the RPF approach.

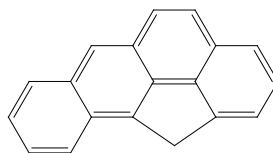


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Figure 6-5. Benz[a]anthracene (BaA) RPFs*.

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11H-Benz[b,c]aceanthrylene (BbcAC)



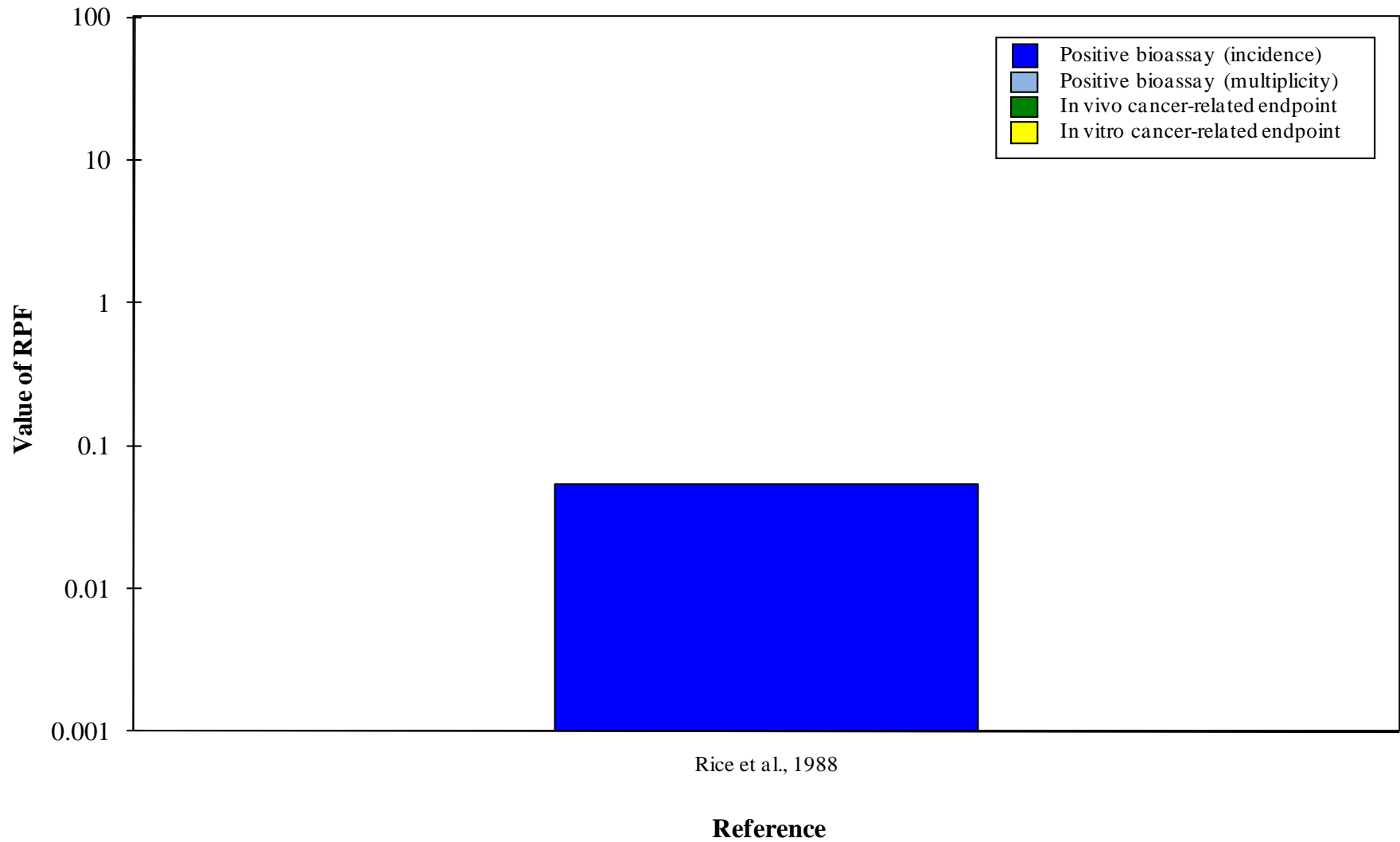
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4 11H-Benz[b,c]aceanthrylene (CASRN 202-94-8) is a nonalternant PAH comprised of
5 four aromatic rings and one five-membered ring. 11H-Benz[b,c]aceanthrylene does not contain a
6 classic bay or fjord region in its structure.

7 There was only one dataset for benz[b,c]aceanthrylene that met selection criteria and
8 included benzo[a]pyrene (Figure 6-6). This multi-dose dermal initiation study resulted in an
9 RPF estimate of 0.05 (Rice et al., 1988). Benz[b,c]aceanthrylene has not been tested in any
10 bioassay without benzo[a]pyrene. There are no cancer-related endpoint data for
11 benz[b,c]aceanthrylene. As the only available bioassay of this PAH was positive,
12 benz[b,c]aceanthrylene was considered potentially carcinogenic and was selected for inclusion in
13 the RPF approach.

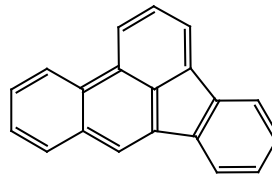
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2 **Figure 6-6. 11H-Benz[b,c]aceanthrylene (BbcAC) RPFs.**

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Benzo[b]fluoranthene (BbF)



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Benzo[b]fluoranthene (CASRN 205-99-2) is a nonalternant PAH comprised of four aromatic rings and one five-membered ring. Benzo[b]fluoranthene contains one classic bay region but no fjord region in its structure.

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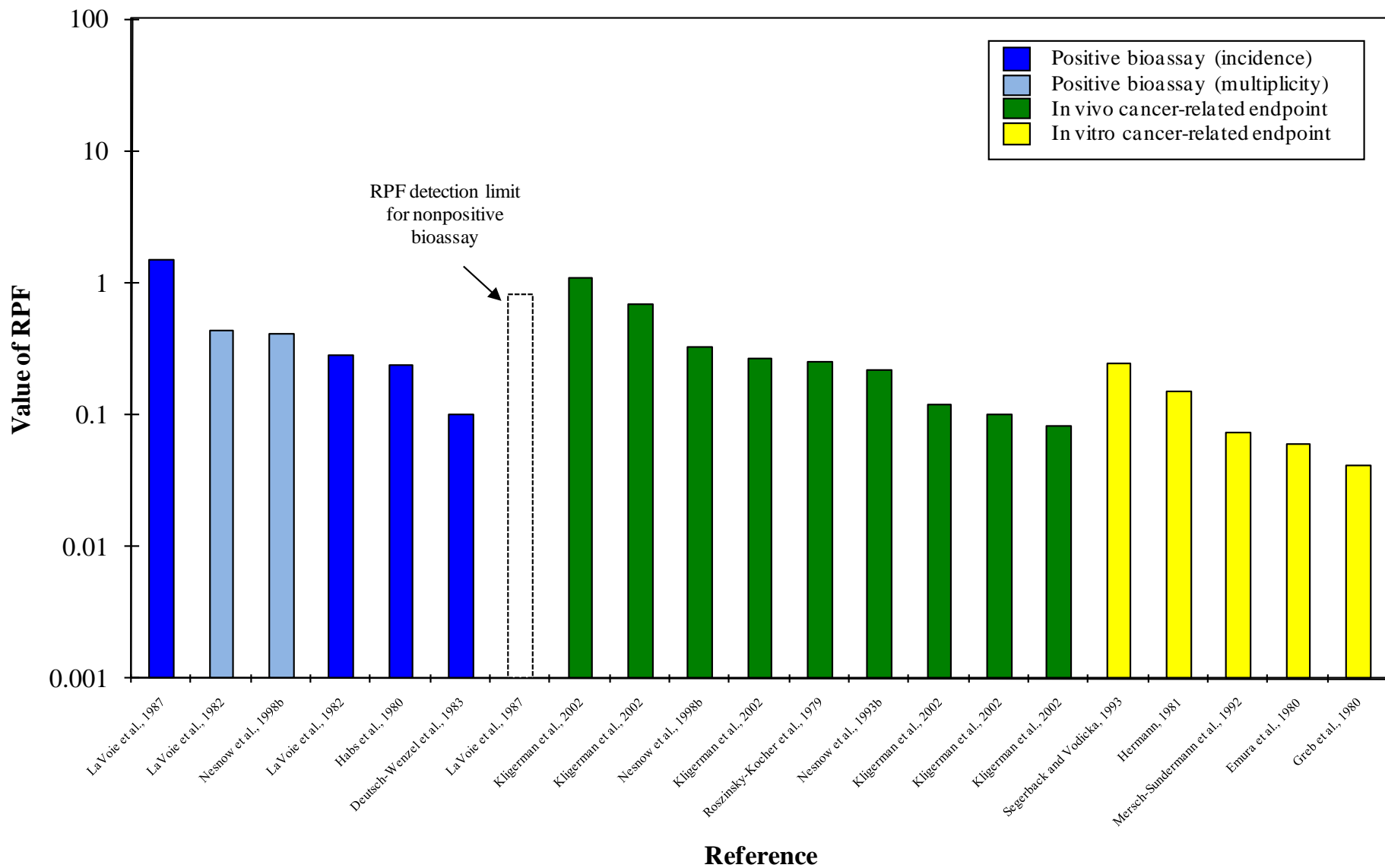
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There were 21 datasets of benzo[b]fluoranthene that met selection criteria and included benzo[a]pyrene (Figure 6-7). Included in the database are in vivo tumor bioassay datasets (7), in vivo DNA adduct datasets (7), in vivo clastogenicity datasets (3), mutagenicity and morphological/malignant cell transformation datasets (3), and an in vitro DNA damage dataset (1). Statistically significant increases in tumor incidence and/or multiplicity were reported in male mice tested in two newborn mouse bioassays using intraperitoneal injection (Nesnow et al., 1998b; LaVoie et al., 1987), in dermal initiation (LaVoie et al., 1982) and dermal complete carcinogenicity (Habs et al., 1980) bioassays, and in a rat lung implantation bioassay (Deutsch-Wenzel et al., 1983). The one nonpositive result was in female mice tested in the newborn mouse bioassay; the RPF detection limit was 0.8 (LaVoie et al., 1987). A number of studies showed that benzo[b]fluoranthene forms DNA adducts when administered in vivo to rats or mice via injection or gavage (Kligerman et al., 2002; Nesnow et al., 1998b, 1993b). One mutagenicity assay and two morphological/malignant cell transformation assays of benzo[b]fluoranthene were positive, as were studies of other cancer-related endpoints; there were no negative studies of cancer-related endpoints. Given that the differing bioassay results can be attributed to different gender, benz[a]anthracene was considered potentially carcinogenic and was selected for inclusion in the RPF approach.

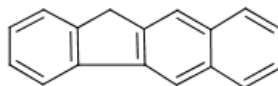


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Figure 6-7. Benzo[b]fluoranthene (BbF) RPFs.

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11H-Benzo[b]fluorene (BbFE)

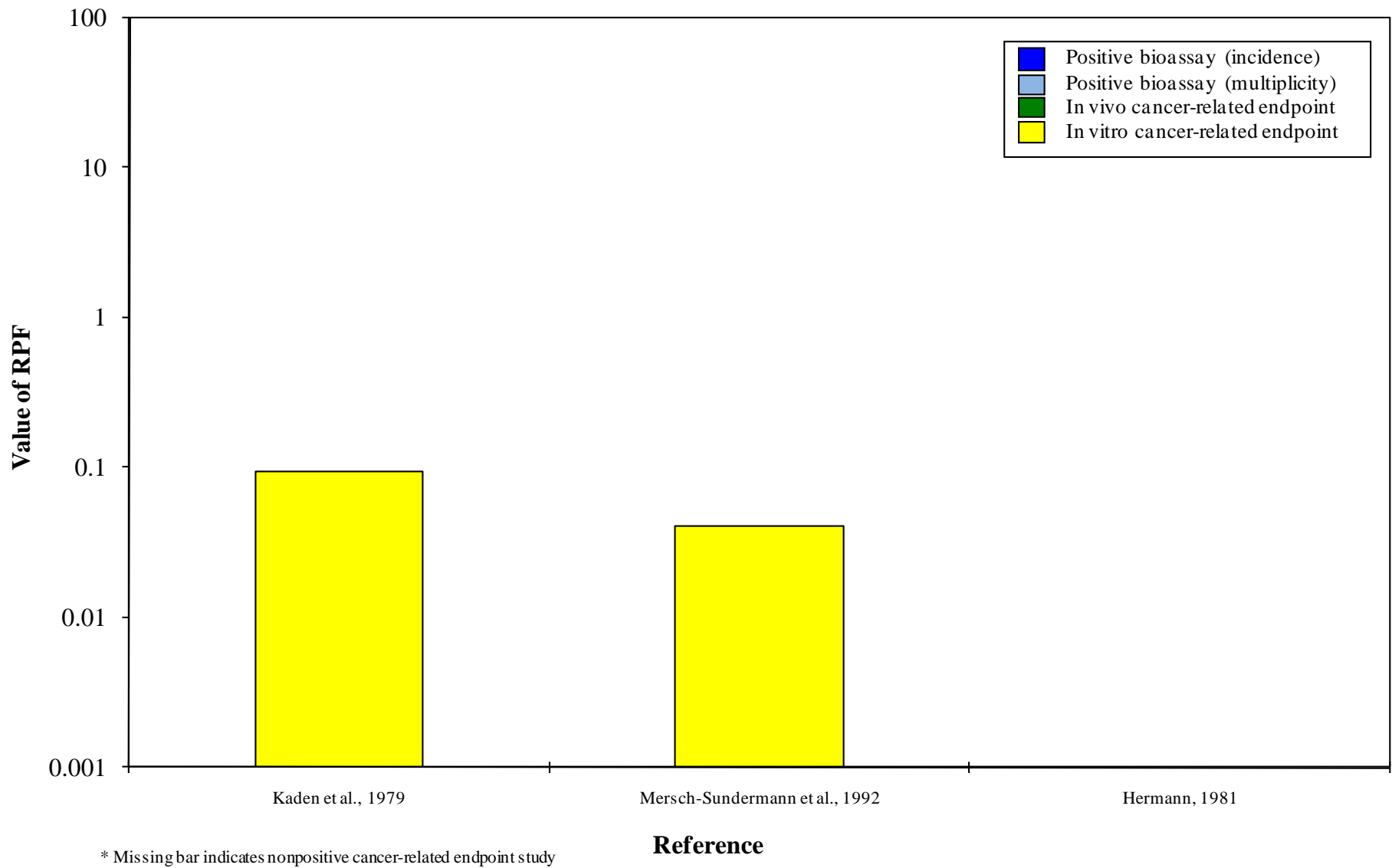


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3 11H-Benzo[b]fluorene (CASRN 243-17-4) is a nonalternant PAH comprised of three
4 aromatic rings and one five-membered ring. 11H-Benzo[b]fluorene does not contain a classic
5 bay or fjord region in its structure.

6 There were three datasets for 11H-benzo[b]fluorene that met selection criteria and
7 included benzo[a]pyrene (Figure 6-8): two mutagenicity datasets and an in vitro DNA damage
8 dataset. There are no bioassays of 11H-benzo[b]fluorene that included benzo[a]pyrene, so
9 bioassays without benzo[a]pyrene and cancer-related endpoint data were considered. LaVoie et
10 al. (1981) conducted a study of skin tumor initiation in mice treated with 1.0 mg 11H-benzo[b]
11 fluorene followed by 20 weeks of treatment with TPA. The incidence of tumor-bearing animals
12 (4/20) was not significantly increased over controls (1/20) (LaVoie et al., 1981). The limited
13 cancer-related endpoint data were mixed, with one positive mutagenicity study (Kaden et al.,
14 1979), one negative mutagenicity study (Hermann, 1981), and one positive in vitro study of
15 DNA damage (Mersch-Sundermann et al., 1992). Overall, the database for 11H-benzo[b]
16 fluorene is both limited and inconsistent. Because the database for 11H-benzo[b]fluorene does
17 not provide adequate information with which to assess potential carcinogenicity, this PAH was
18 not selected for inclusion in the RPF approach.

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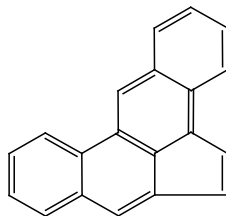


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Figure 6-8. 11H-Benzo[b]fluorene (BbFE) RPFs*.

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Benz[e]aceanthrylene (BeAC).

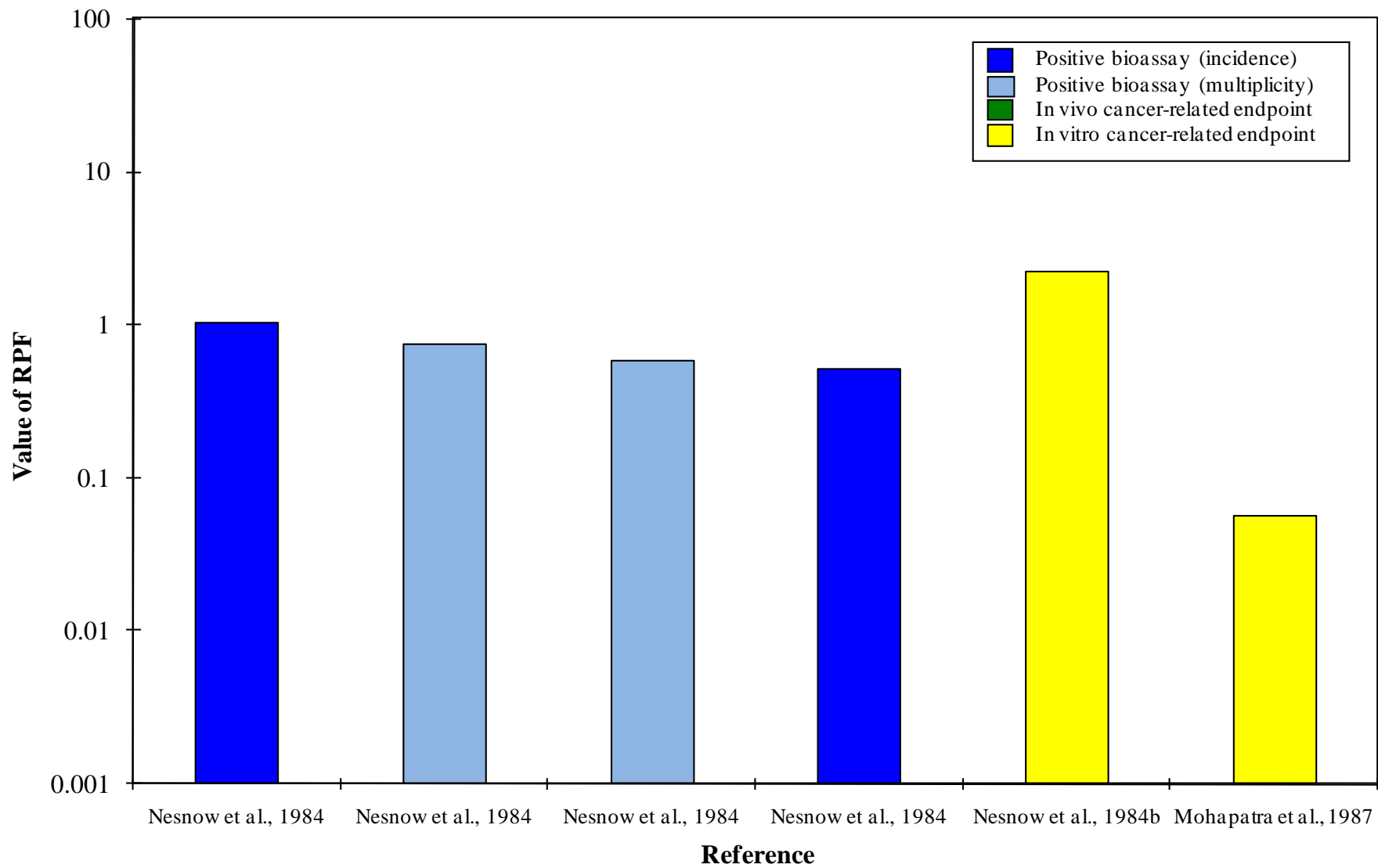


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3 Benz[e]aceanthrylene (CASRN 199-54-2) is a nonalternant PAH comprised of four
4 aromatic rings and one five-membered ring. Benz[e]aceanthrylene contains a classic bay region
5 but no fjord region in its structure.

6 There were six datasets for benz[e]aceanthrylene that met selection criteria and included
7 benzo[a]pyrene (Figure 6-9); all gave positive results. The database includes an in vivo tumor
8 bioassay in two sexes (each reporting both incidence and multiplicity), a mammalian
9 mutagenicity study, and a morphological/malignant cell transformation study. Significantly
10 increased tumor incidence and tumor multiplicity were reported for both male and female mice
11 in a dermal initiation bioassay in mice (Nesnow et al., 1984). As the available bioassay that
12 included benzo[a]pyrene was positive, benz[e]aceanthrylene was considered potentially
13 carcinogenic and was selected for inclusion in the RPF approach.

14

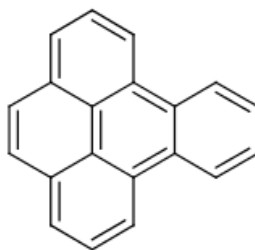


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Figure 6-9. Benz[e]aceanthrylene (BeAC) RPFs.

1

Benzo[e]pyrene (BeP)



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4 Benzo[e]pyrene (192-97-2) is an alternant PAH comprised of five fused aromatic rings.
5 Benzo[e]pyrene contains two bay regions and no fjord region in its structure.

6 Thirty-seven datasets for benzo[e]pyrene met selection criteria and included
7 benzo[a]pyrene: 2 tumor bioassays, 1 in vivo clastogenicity dataset, 12 bacterial mutagenicity
8 datasets, 4 mammalian mutagenicity datasets, 7 morphological/malignant cell transformation
9 datasets, and 11 in vitro DNA damage or clastogenicity datasets (Figure 6-10). No increase in
10 tumor incidence was observed when benzo[e]pyrene was tested alone as part of a dermal
11 cocarcinogenicity bioassay (Van Duuren and Goldschmidt, 1976). When tested in a lung
12 implantation bioassay in rats, benzo[e]pyrene exposure did not result in a significant increase in
13 tumor incidence (Deutsch-Wenzel et al., 1983). The RPF detection limits of these studies were
14 approximately 0.01 and 0.1. To confirm the negative findings in the available tumor bioassays
15 that included benzo[a]pyrene, other bioassays and cancer-related endpoint data were considered.
16 In bioassays without benzo[a]pyrene, benzo[e]pyrene gave negative results in a dermal initiation
17 bioassay (1 mg/mouse; Van Duuren et al., 1968) and a newborn mouse bioassay (0.7 μmol ;
18 Chang et al., 1981). A significant increase in tumor incidence was reported in a single-
19 concentration dermal initiation study in mice; 11/13 surviving mice (20 were treated) had
20 papillomas by week 35 after dermal treatment with 10 μmol benzo[e]pyrene in benzene
21 ($p < 0.0001$), followed by twice weekly treatment with TPA; no control mice had papillomas
22 (Scribner, 1973).

23 In vitro assays of mutagenicity (both bacterial and mammalian) and morphological/
24 malignant cell transformation give inconsistent results for benzo[e]pyrene; 11/23 studies were
25 positive and the rest were negative. Positive studies include a mix of bacterial mutagenicity and
26 morphological/malignant cell transformation assays; four mammalian mutagenicity assays were
27 negative. One study of in vivo clastogenicity and two studies of in vitro DNA damage were
28 positive, while nine studies of in vitro DNA damage or clastogenicity were negative.

29 While the database for benzo[e]pyrene is quite large, the results are inconsistent; as a
30 result, no conclusion can be drawn as to potential carcinogenicity. This PAH was not selected
31 for inclusion in the RPF approach.

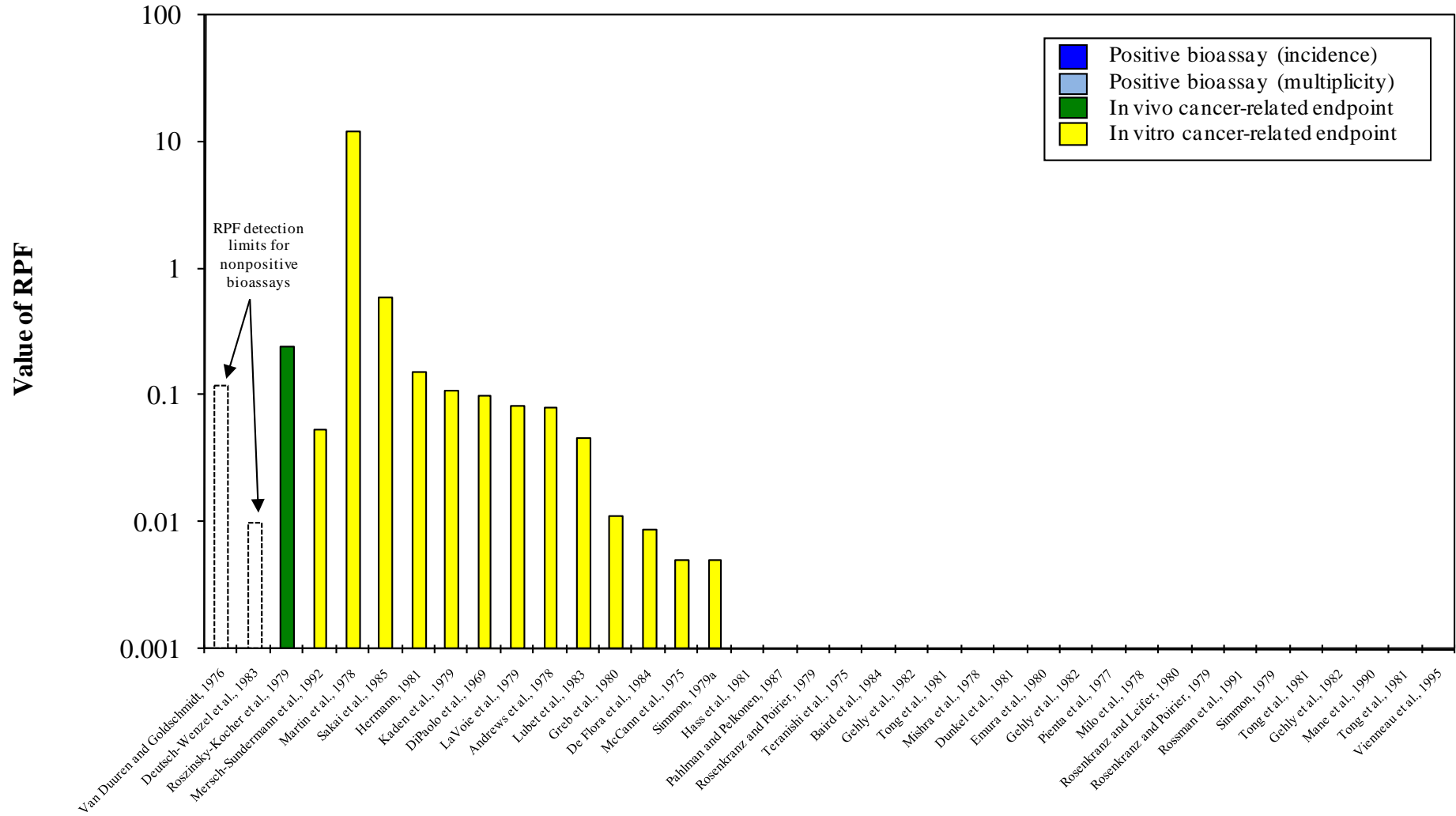
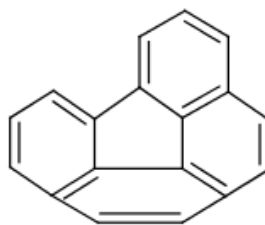


Figure 6-10. Benzo[e]pyrene (BeP) RPFs*.

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Benzo[g,h,i]fluoranthene (BghiF)



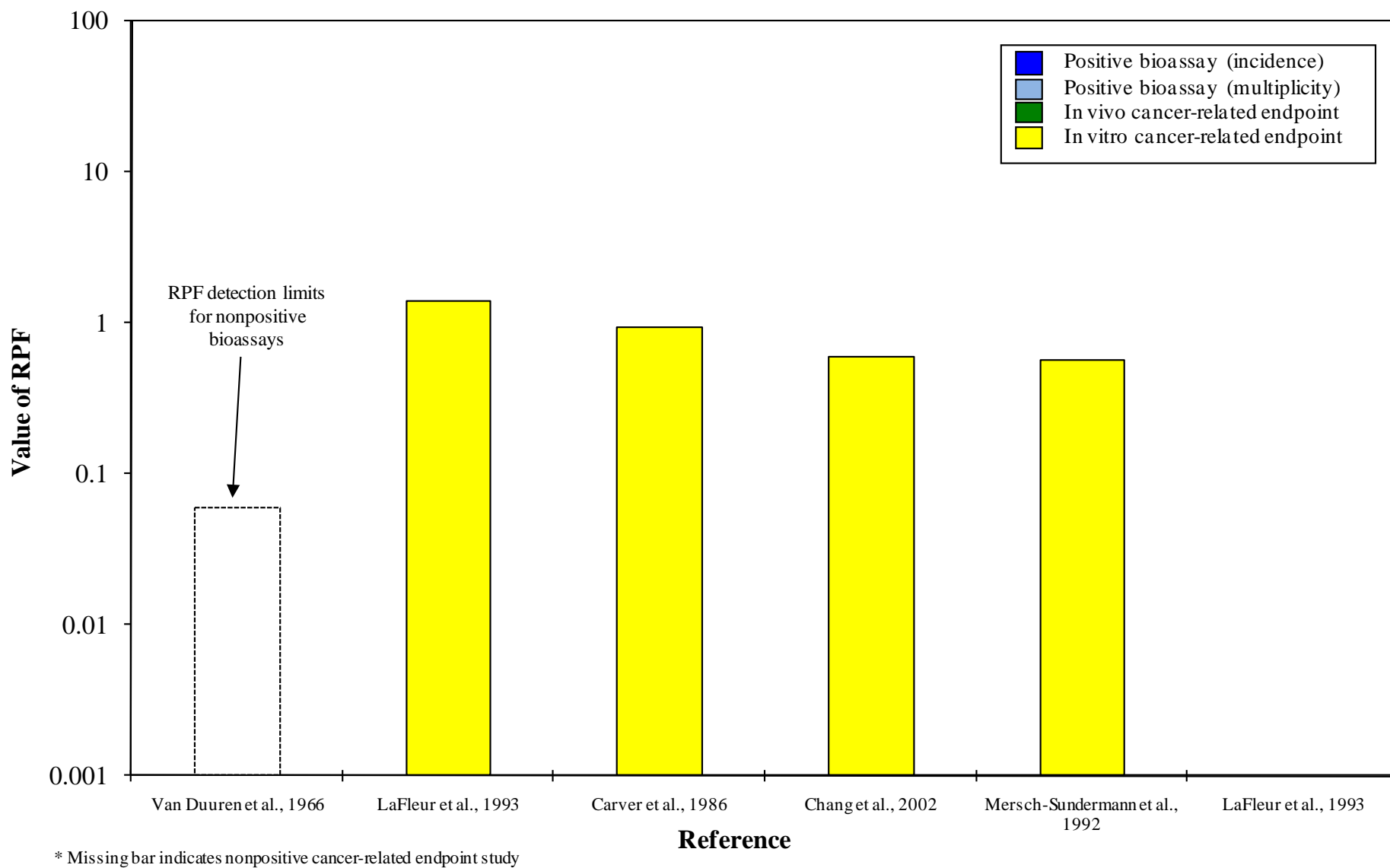
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4 Benzo[g,h,i]fluoranthene (CASRN 203-12-3) is a nonalternant PAH comprised of four
5 aromatic rings and one five-membered ring. Benzo[g,h,i]fluoranthene does not contain a classic
6 bay or fjord region in its structure.

7 There were six datasets for benzo[g,h,i]fluoranthene that met selection criteria and
8 included benzo[a]pyrene (Figure 6-11). A dermal initiation bioassay in mice (Van Duuren et al.,
9 1966) did not result in a statistically significant increase in tumor incidence; the RPF detection
10 limit was 0.06. There were no other bioassays that met selection criteria. There were three
11 positive bacterial mutagenicity studies (Chang et al., 2002; Lafleur et al., 1993; Carver et al.,
12 1986), one positive study of in vitro DNA damage (Mersch-Sundermann et al., 1992), and a
13 mammalian mutagenicity study with negative results (Lafleur et al., 1993). The RPF values for
14 the positive cancer-related endpoint datasets ranged from 0.6 to 1. Overall, the database for
15 benzo[g,h,i]fluoroanthene is both limited and inconsistent. Because the database for
16 benzo[g,h,i]fluoranthene does not provide adequate information with which to assess potential
17 carcinogenicity, this PAH was not selected for inclusion in the RPF approach.

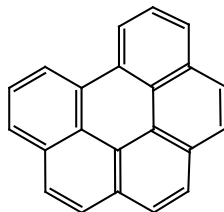
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1
2 **Figure 6-11. Benzo[g,h,i]fluoranthene (BghiF) RPFs*.**

1

Benzo[g,h,i]perylene (BghiP)

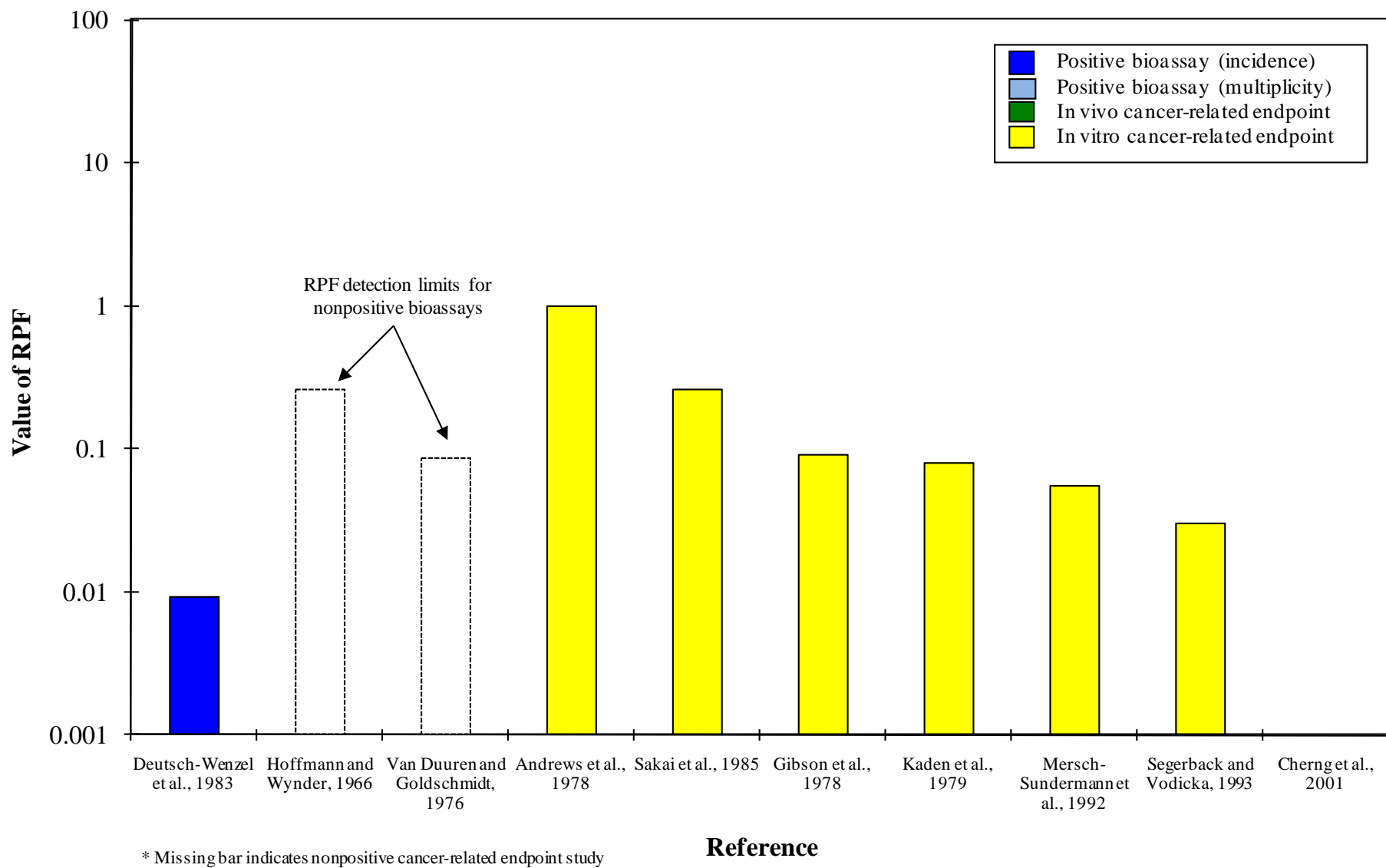


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4 Benzo[g,h,i]perylene (CASRN 191-24-2) is an alternant PAH comprised of six fused
5 aromatic rings. Benzo[g,h,i]perylene contains a bay region but no fjord region in its structure.

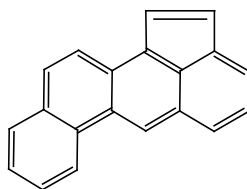
6 There were 10 datasets for benzo[g,h,i]perylene that met selection criteria and included
7 benzo[a]pyrene (Figure 6-12). The database includes three in vivo tumor bioassays, four
8 bacterial mutagenicity datasets, an in vitro DNA damage dataset, and two in vitro DNA adduct
9 datasets. Of the three bioassays, positive findings were only reported in one: a rat lung
10 implantation bioassay (Deutsch-Wenzel et al., 1983) that resulted in a RPF estimate of 0.009. In
11 a dermal initiation bioassay (Hoffmann and Wynder, 1966) and a dermal cocarcinogenicity
12 bioassay (Van Duuren and Goldschmidt, 1976), there was no statistically significant increase in
13 tumor incidence, but these studies had relatively insensitive RPF detection limits (around 0.1)
14 compared with the positive study. There were four positive mutagenicity studies; all were
15 conducted in bacterial systems. Studies of in vitro DNA adducts and DNA damage were
16 positive. Because the inconsistent bioassay results can be attributed to different test systems
17 (different species and route), benzo[g,h,i]perylene was considered potentially carcinogenic and
18 was selected for inclusion in the RPF approach.



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Figure 6-12. Benzo[g,h,i]perylene (BghiP) RPFs*.

1 *Benz[j]aceanthrylene (BjAC)*

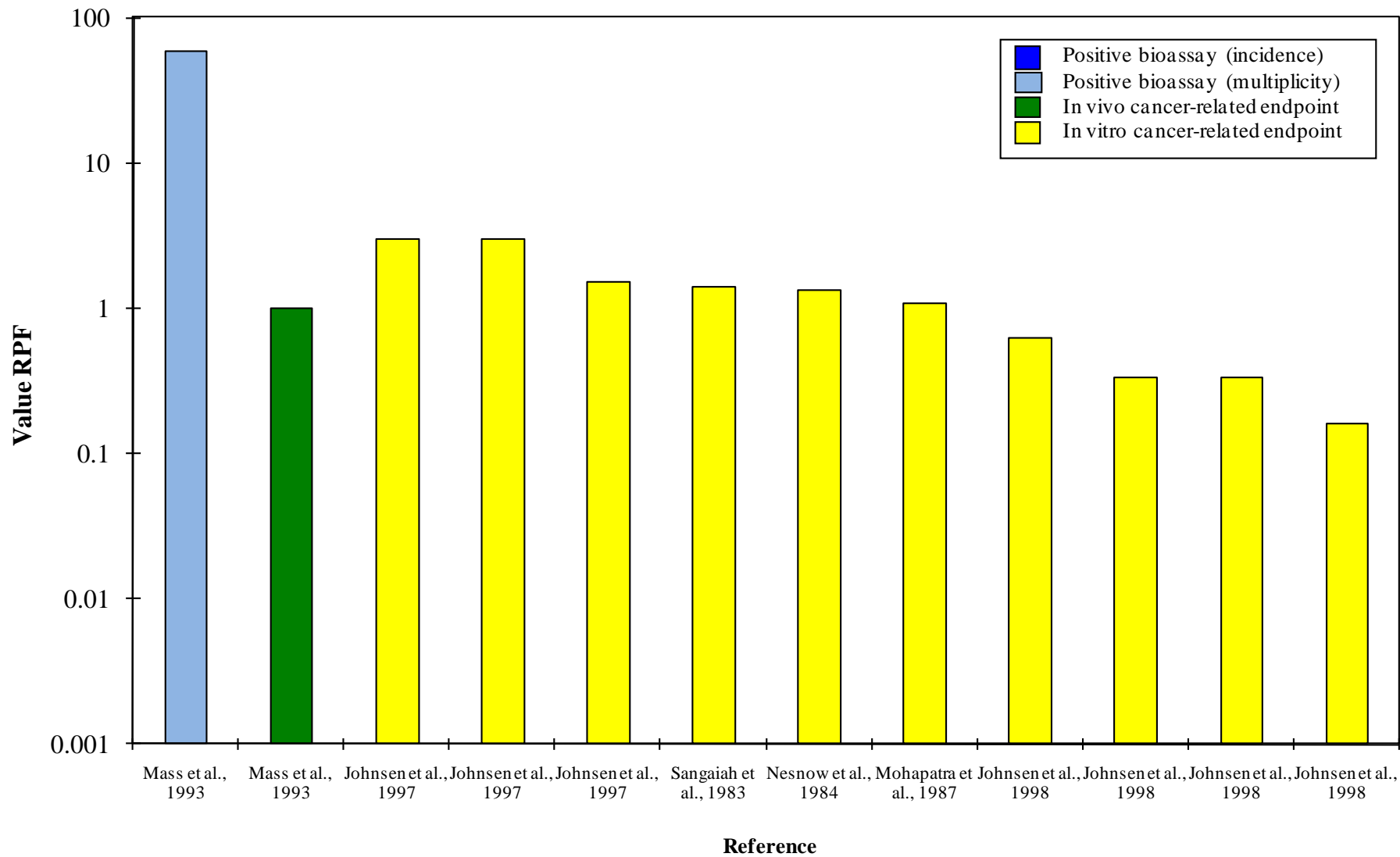


4

5 Benz[j]aceanthrylene (CASRN 202-33-5) is a nonalternant PAH comprised of four
6 aromatic rings and one five-membered ring. Benz[j]aceanthrylene contains a classic bay region
7 but no fjord region in its structure.

8 There were 12 datasets for benz[j]aceanthrylene that met selection criteria and included
9 benzo[a]pyrene (Figure 6-13); all of the studies gave positive results. The database includes one
10 in vivo tumor bioassay dataset, one in vivo DNA adduct dataset, four mutagenicity or
11 morphological/malignant cell transformation datasets, and six in vitro DNA damage or DNA
12 adduct datasets. In a bioassay of benz[j]aceanthrylene that used intraperitoneal injection in an
13 A/J mouse system (Mass et al., 1993), all mice treated with benz[j]aceanthrylene developed
14 tumors (incidence of 100% at doses of 20–100 mg/kg; incidence for benzo[a]pyrene was 63–
15 100% across the same dose range), precluding the derivation of an RPF using incidence data.
16 However, tumor multiplicity (average number of tumors per animal) data were available for
17 dose-response modeling and resulted in an RPF estimate of 60. Benz[j]aceanthrylene treatment
18 resulted in a pronounced increase in the average number of tumors per animal (59.45 tumors per
19 animal at 20 mg/kg), much higher than benzo[a]pyrene treatment (5.05 tumors per animal at
20 100 mg/kg), indicating that this compound is very potent in this test system. In a dermal
21 initiation bioassay that did not include benzo[a]pyrene, benz[j]aceanthrylene induced papillomas
22 in 90% of mice treated with an initiating dose of 40 µg (compared with 5% incidence in
23 controls). As the available bioassay that included benzo[a]pyrene was positive and suggested
24 that this compound is very potent, benz[j]aceanthrylene was considered potentially carcinogenic
25 and was selected for inclusion in the RPF approach.

26

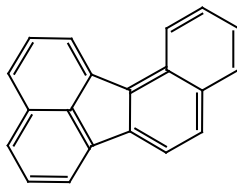


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Figure 6-13. Benz[j]aceanthrylene (BjAC) RPFs.

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Benzo[j]fluoranthene (BjF)

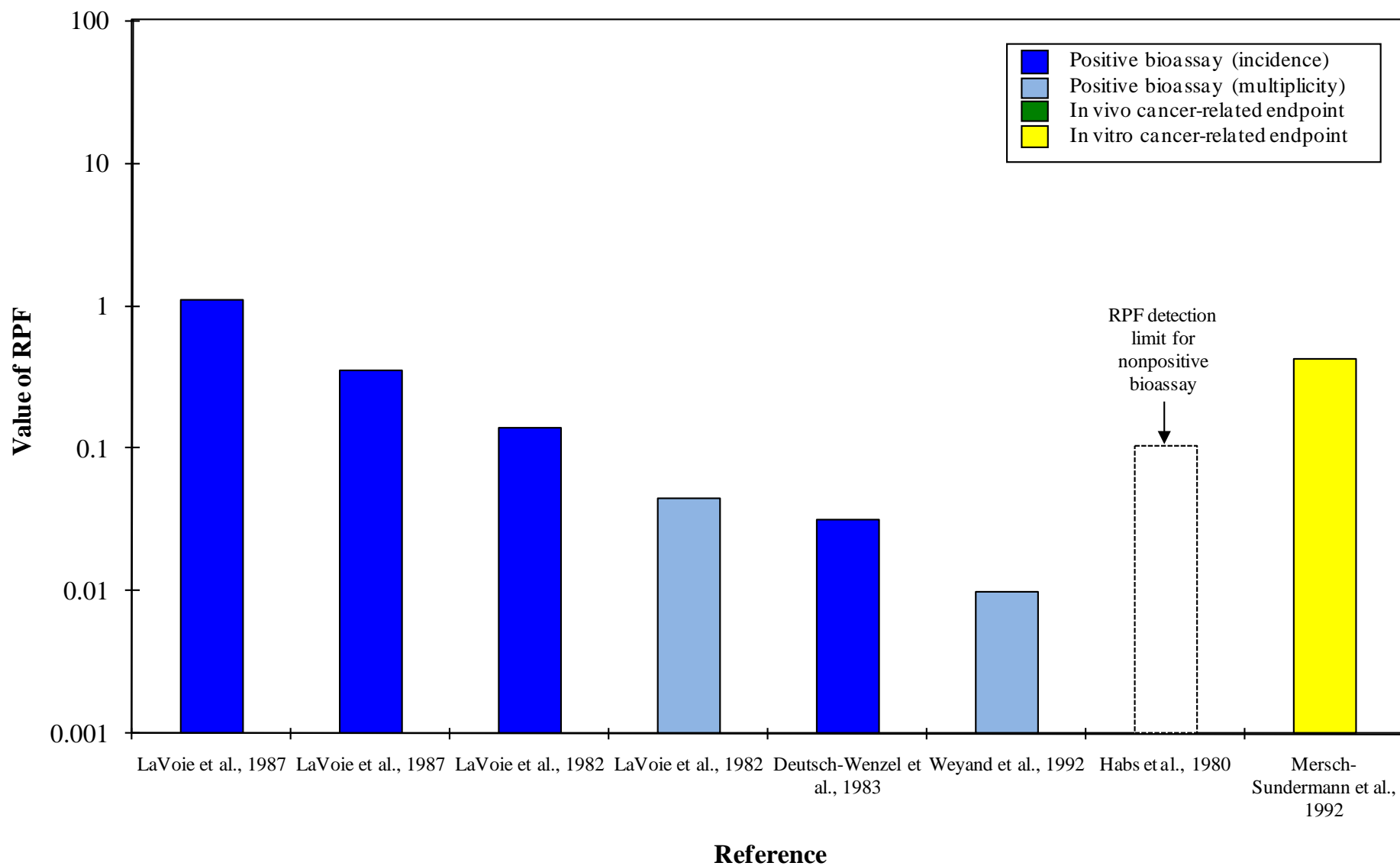


2

3 Benzo[j]fluoranthene (CASRN 205-82-3) is a nonalternant PAH comprised of four
4 aromatic rings and one five-membered ring. Benzo[j]fluoranthene does not contain a classic bay
5 or fjord region in its structure.

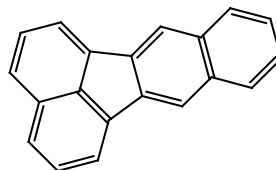
6 There were eight datasets for benzo[j]fluoranthene that met selection criteria and
7 included benzo[a]pyrene (Figure 6-14): seven in vivo tumor bioassay datasets and one in vitro
8 study of DNA damage. Of the seven bioassay datasets, significant increases in tumor incidence
9 or count were observed in all but one. Significant increases in tumor incidence were reported in
10 both male and female mice tested in a newborn mouse bioassay using intraperitoneal injection of
11 single doses (LaVoie et al., 1987), a mouse dermal initiation study (LaVoie et al., 1982), and a
12 rat lung implantation bioassay (Deutsch-Wenzel et al., 1983). Significant increases in tumor
13 multiplicity were reported in two mouse dermal initiation studies (Weyand et al., 1992; LaVoie
14 et al., 1982). The one nonpositive bioassay was a mouse dermal complete carcinogenicity
15 bioassay with an RPF detection limit of 0.1 (Habs et al., 1980). The in vitro study of DNA
16 damage gave positive results (Mersch-Sundermann et al., 1992). Because the inconsistent
17 bioassay results can be attributed to different test systems or study design, benzo[j]fluoroanthene
18 was considered potentially carcinogenic and was selected for inclusion in the RPF approach.

19



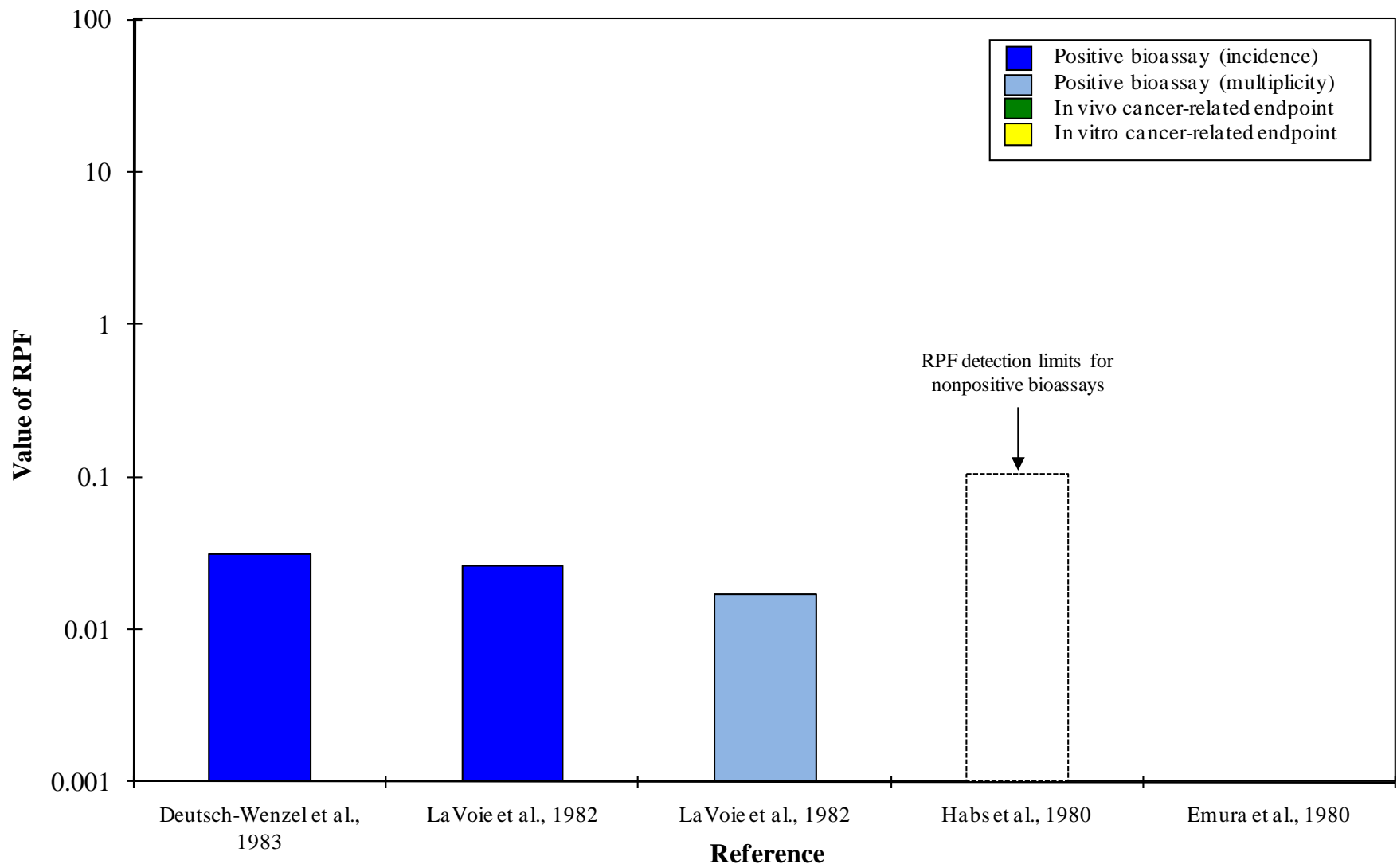
1
2 **Figure 6-14. Benzo[j]fluoranthene (BjF) RPFs.**

1 *Benzo[k]fluoranthene (BkF)*
2



5 Benzo[k]fluoranthene (CASRN 207-08-9) is a nonalternant PAH comprised of four
6 aromatic rings and one five-membered ring. Benzo[j]fluoranthene does not contain a classic bay
7 or fjord region in its structure.

8 There were five datasets for benzo[k]fluoranthene that met selection criteria and included
9 benzo[a]pyrene (Figure 6-15). The database includes four in vivo tumor bioassay datasets and
10 one morphological/malignant cell transformation dataset. Statistically significant increases in
11 tumor incidence and tumor count were reported in a mouse dermal initiation study (LaVoie et al.,
12 1982) and increased tumor incidence was reported in a rat lung implantation bioassay (Deutsch-
13 Wenzel et al., 1983). No significant increase in tumor incidence was observed in a dermal
14 complete carcinogenicity study with an RPF detection limit of 0.1 (Habs et al., 1980). The
15 morphological/malignant cell transformation study (Emura et al., 1980) was negative. Because
16 the inconsistent bioassay results can be attributed to different test systems or study design
17 (dermal initiation vs. dermal complete carcinogenicity), benzo[k]fluoroanthene was considered
18 potentially carcinogenic and was selected for inclusion in the RPF approach.
19



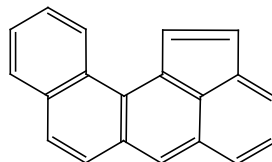
* Missing bar indicates nonpositive cancer-related endpoint study

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Figure 6-15. Benzo[k]fluoranthene (BkF) RPFs*.

1

Benz[l]aceanthrylene (BLAC)

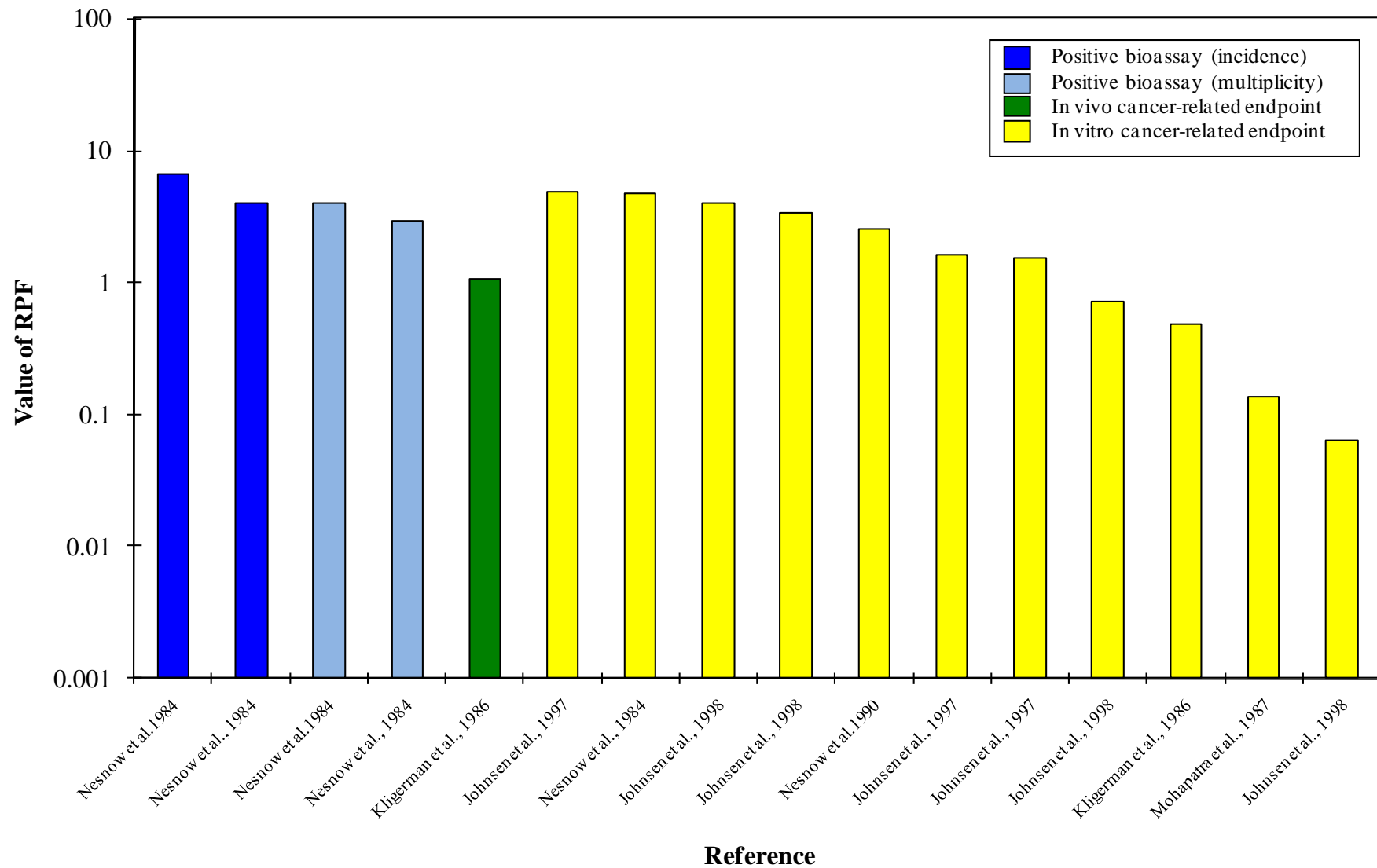


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4 Benz[l]aceanthrylene (CASRN 211-91-6) is a nonalternant PAH comprised of four
5 aromatic rings and one five-membered ring. Benz[l]aceanthrylene does not contain a classic bay
6 or fjord region in its structure.

7 There were 16 datasets for benz[l]aceanthrylene that met selection criteria and included
8 benzo[a]pyrene (Figure 6-16); all of the studies gave positive results. The database includes four
9 in vivo tumor bioassay datasets, five mutagenicity or morphological/malignant cell
10 transformation datasets, one in vivo clastogenicity dataset, and six in vitro DNA adduct or DNA
11 damage datasets. Significant increases in tumor count and multiplicity were reported in both
12 male and female mice in a dermal initiation bioassay (Nesnow et al., 1984). All of the cancer-
13 related endpoint studies were positive as well. Relative potency estimates for most of the
14 available datasets were ≥ 1.0 , suggesting equivalent or greater potency than benzo[a]pyrene. As
15 the available bioassays that included benzo[a]pyrene were positive, benz[l]aceanthrylene was
16 considered potentially carcinogenic and was selected for inclusion in the RPF approach.

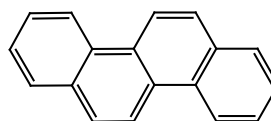


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Figure 6-16. Benz[1]aceanthrylene (B1AC) RPFs.

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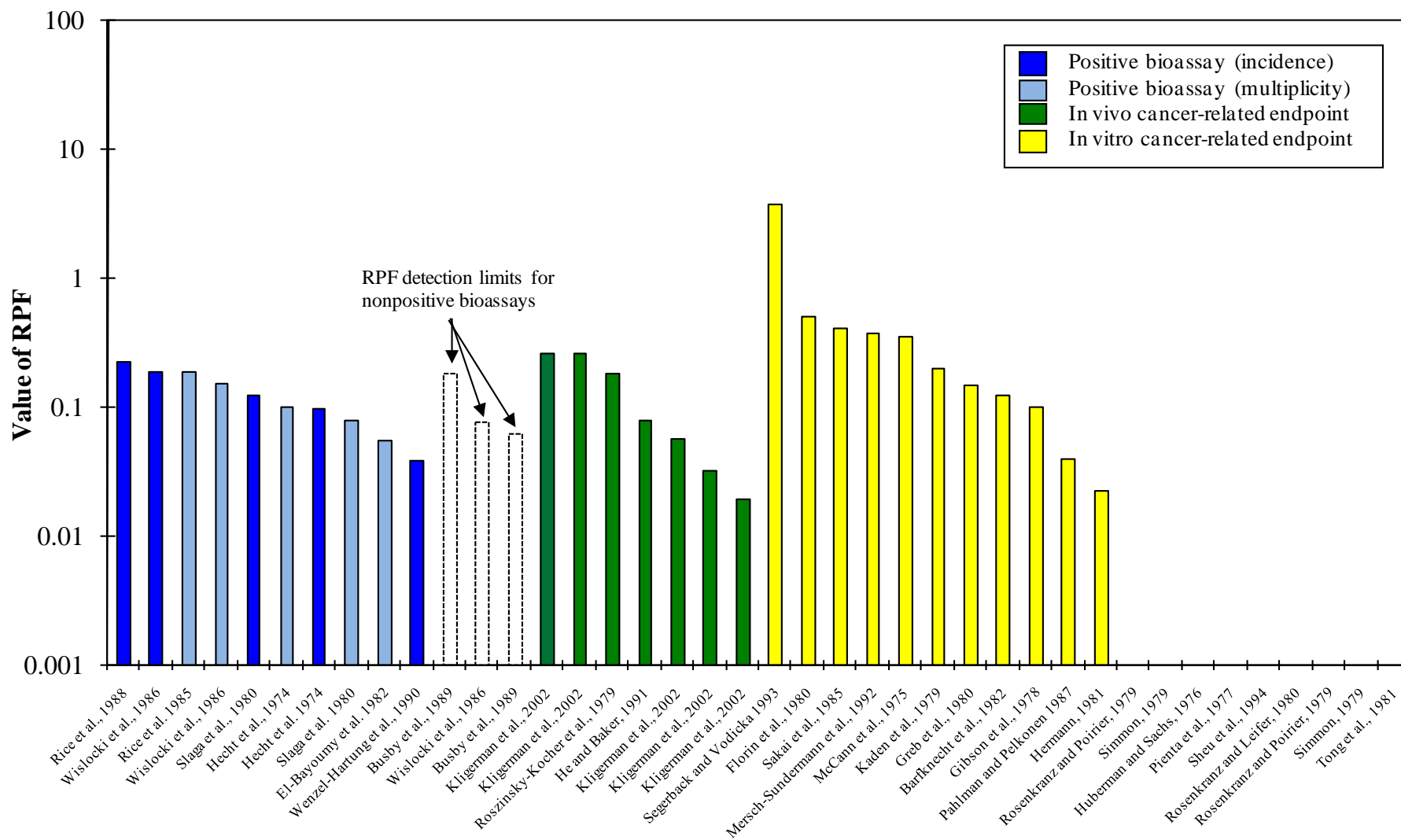
Chrysene (CH)



Chrysene (CASRN 218-01-9) is an alternant PAH comprised of four fused aromatic rings. Chrysene contains two bay regions but no fjord region in its structure.

There were 40 datasets for chrysene that met selection criteria and included benzo[a]pyrene (Figure 6-17). Included in the database are 13 in vivo tumor bioassay datasets, 4 in vivo DNA adduct datasets, 3 in vivo clastogenicity datasets, 11 mutagenicity datasets, 3 morphological/malignant cell transformation datasets, and 6 in vitro studies of DNA damage, adducts, or clastogenicity. Among the bioassays that included benzo[a]pyrene, 11 reported significant increases in tumor incidence or tumor multiplicity, and 3 did not. Significant increases in tumor incidence and/or multiplicity were reported in three dermal initiation studies in mice (Rice et al., 1988; Slaga et al., 1980; Hecht et al., 1974), a newborn mouse study in males (Wislocki et al., 1986), and a rat lung implantation bioassay (Wenzel-Hartung et al., 1990). Female mice tested in the newborn mouse assay published by Wislocki et al. (1986) did not have a significant increase in tumor incidence, resulting in one of the three nonpositive studies. The other two nonpositive findings were in males and females tested in another newborn mouse bioassay (Busby et al., 1989). The bioassays with nonpositive findings had RPF detection limits between 0.06 and 0.2. Conflicting results in male mice were reported in the two newborn mouse bioassays (Busby et al., 1989; Wislocki et al., 1986). The major difference between the two studies is the duration of follow-up; Busby et al. (1989) sacrificed the mice at 26 weeks, while Wislocki et al. (1986) followed the mice for a full year. LaVoie et al. (1994) observed that liver tumor induction in the newborn mouse bioassay is not fully realized until the mice have reached 1 year of age, and the positive findings by Wislocki et al. (1986) indeed reflect liver tumors in the male mice. Chrysene was shown to form DNA adducts when administered in vivo in both rats and mice via injection and gavage (Kligerman et al., 2002). Bacterial and mammalian mutagenicity and morphological/malignant cell transformation assays of chrysene were all positive, as were studies of clastogenicity tested in vivo. In contrast, results from in vitro studies of DNA adducts, DNA damage, and clastogenicity were not consistent.

Because the inconsistent bioassay results can be attributed to different study designs (gender, follow-up time), chrysene was considered potentially carcinogenic and was selected for inclusion in the RPF approach.



* Missing bar indicates nonpositive cancer-related endpoint study

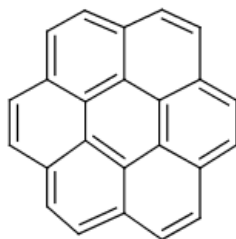
Reference

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Figure 6-17. Chrysene (CH) RPFs*.

1

Coronene (CO)



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Coronene (CASRN 191-07-1) is an alternant PAH comprised of seven fused aromatic rings. Coronene contains no bay or fjord regions in its structure.

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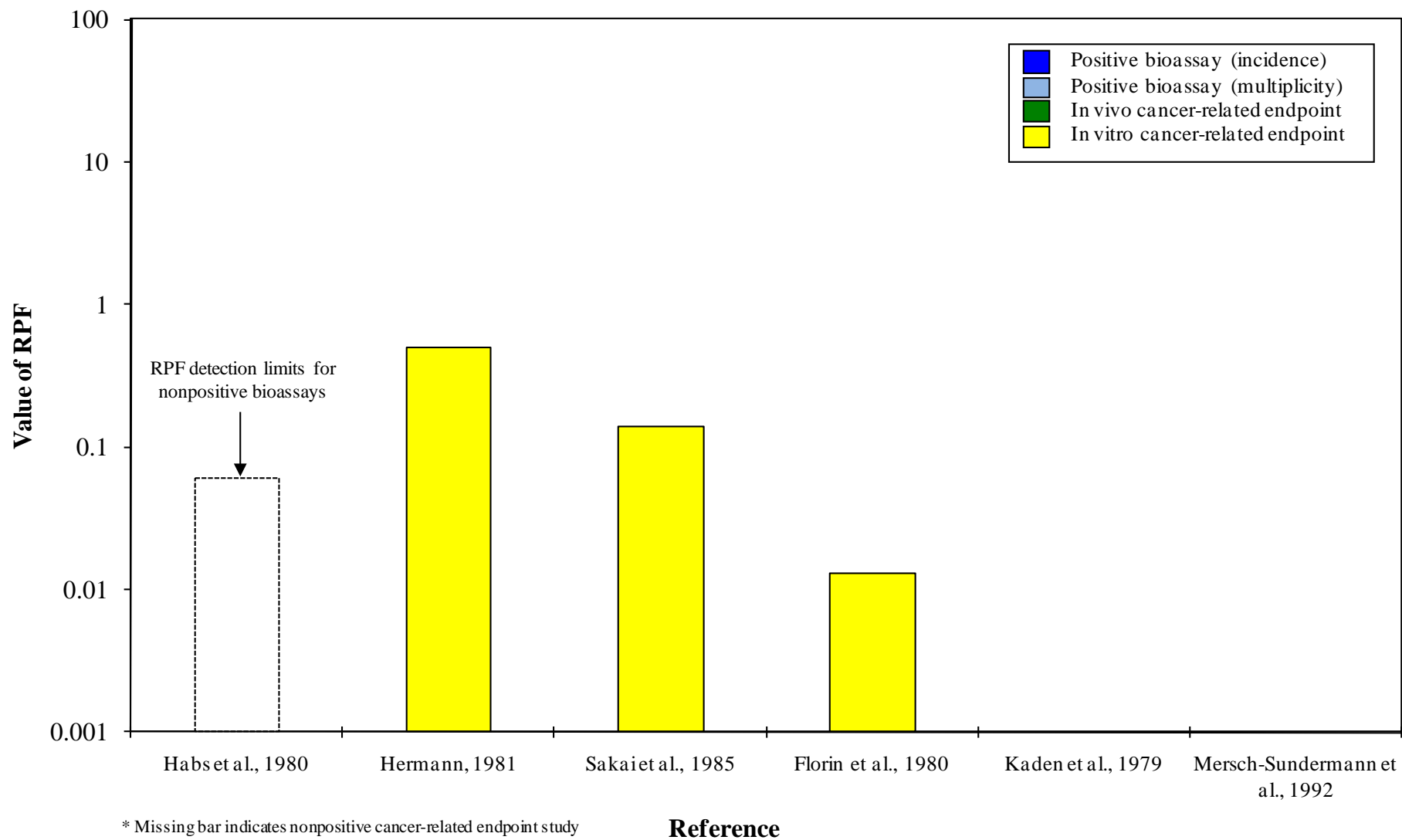
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There were six datasets for coronene that met selection criteria and included benzo[a]pyrene (Figure 6-18). A dermal complete carcinogenicity bioassay in mice did not result in a statistically significant increase in tumor incidence (Habs et al., 1980); the RPF detection limit was 0.06. To confirm the nonpositive findings in the one tumor bioassay that included benzo[a]pyrene, other bioassays and cancer-related endpoint data were considered. There was one bioassay of coronene that did not include benzo[a]pyrene. Van Duuren et al. (1968) conducted a dermal initiation bioassay of coronene using groups of 20 mice (0.5 mg coronene in 0.5 mL benzene, followed by croton resin treatment until death). Although the authors characterized coronene as a weak tumor initiator, the incidence of tumors was not significantly increased over concurrent controls. The limited cancer-related endpoint data were mixed, with three positive bacterial mutagenicity studies (with RPFs ranging from 0.01 to 0.5), one negative bacterial mutagenicity study, and a negative in vitro DNA damage study.

Overall, the database for coronene is both limited and inconsistent. Because the database for coronene does not provide adequate information with which to assess potential carcinogenicity, this PAH was not selected for inclusion in the RPF approach.

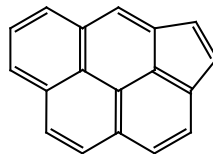


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Figure 6-18. Coronene (CO) RPFs*.

1

Cyclopenta[c,d]pyrene (CPcdP)

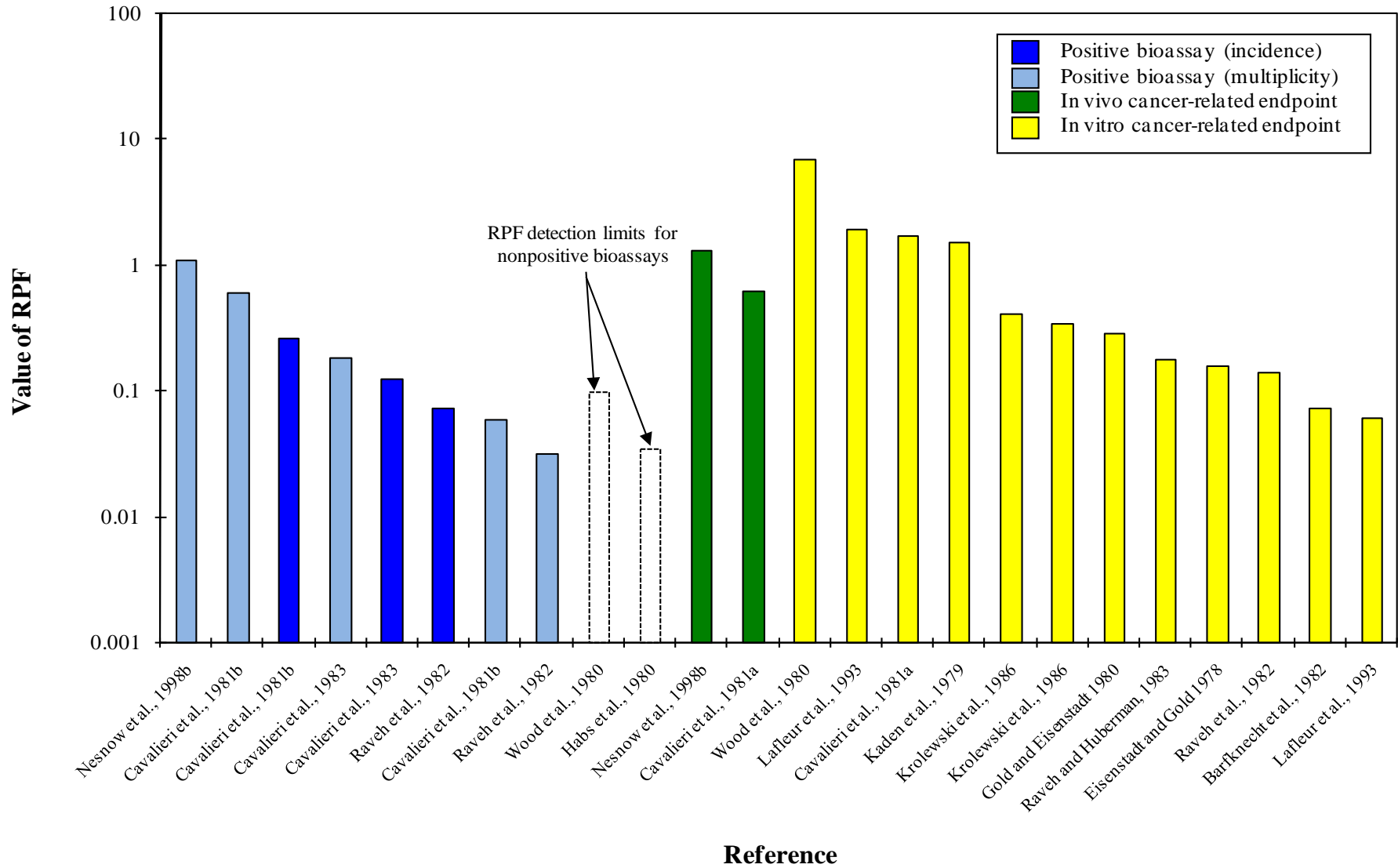


2

3 Cyclopenta[c,d]pyrene (CASRN 27208-37-3) is a nonalternant PAH comprised of four
4 aromatic rings and one five-membered ring. Cyclopenta[c,d]pyrene does not contain a classic
5 bay or fjord region in its structure.

6 There were 24 datasets for cyclopenta[c,d]pyrene that met selection criteria and included
7 benzo[a]pyrene (Figure 6-19). The database includes 10 in vivo tumor bioassay datasets, 2 in
8 vivo DNA adduct datasets, 11 studies of mutagenicity or morphological/malignant cell
9 transformation, and a single study of in vitro clastogenicity. Eight of the 10 tumor bioassay
10 datasets and all of the cancer-related endpoint studies gave positive results. Statistically
11 significant increases in tumor incidence and/or multiplicity were reported in two dermal
12 complete carcinogenicity bioassay (Cavalieri et al., 1983, 1981b), two dermal initiation
13 bioassays (Raveh et al., 1982; Cavalieri et al., 1981b), and an intraperitoneal study using adult
14 A/J mice (Nesnow et al., 1998b). Bioassays in which no significant increase in tumorigenicity
15 was observed included a dermal initiation (Wood et al., 1980) and complete carcinogenicity
16 study (Habs et al., 1980); these studies had RPF detection limits of 0.1 and 0.03, respectively.
17 After obtaining nonpositive results for low initiating doses of cyclopenta[c,d]pyrene, Wood et al.
18 (1980) repeated their experiment with higher doses and observed statistically significant
19 increases in tumor incidence. In the latter experiment, benzo[a]pyrene was not included, so an
20 RPF could not be calculated from these data. The study design of the nonpositive complete
21 carcinogenicity bioassay was quite similar to that of the two positive studies of this type, with the
22 exception of the mouse strain used; Habs et al. (1980) used NMRI mice, while Cavalieri et al.
23 (1983, 1981b) used Swiss mice. Although the differing results in dermal complete
24 carcinogenicity studies may be explained by slight differences in strain susceptibility, these two
25 strains are of common origin, which argues against this explanation.

26 The available cancer-related endpoint data indicate that cyclopenta[c,d]pyrene is
27 mutagenic and capable of morphological/malignant cell transformation in vitro; a single study of
28 in vitro clastogenicity was also positive. Overall, the data supporting a finding of potential
29 carcinogenicity for cyclopenta[c,d]pyrene are very consistent, and this compound was selected
30 for inclusion in the RPF approach.

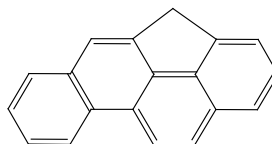


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Figure 6-19. Cyclopenta[c,d]pyrene (CPcdP) RPFs.

1

4H-Cyclopenta[d,e,f]chrysene (CPdefC)



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4 4H-Cyclopenta[d,e,f]chrysene (CASRN 202-98-2) is a nonalternant PAH comprised of
5 four aromatic rings and one five-membered ring. 4H-Cyclopenta[d,e,f]chrysene contains a
6 classic bay region but no fjord region in its structure.

7 There were two datasets for 4H-cyclopenta[d,e,f]chrysene that met selection criteria and

8 included benzo[a]pyrene (Figure 6-20): both were multi-dose dermal initiation datasets (Rice et

9 al., 1988, 1985). Rice et al. (1988) reported a statistically significant increase in tumor incidence

10 in a multi-dose dermal initiation study. In the second study, the incidence of tumors after

11 treatment with cyclopenta[d,e,f]chrysene exceeded 90%, precluding RPF derivation from

12 incidence data, but tumor multiplicity data were available for RPF calculation (Rice et al., 1985).

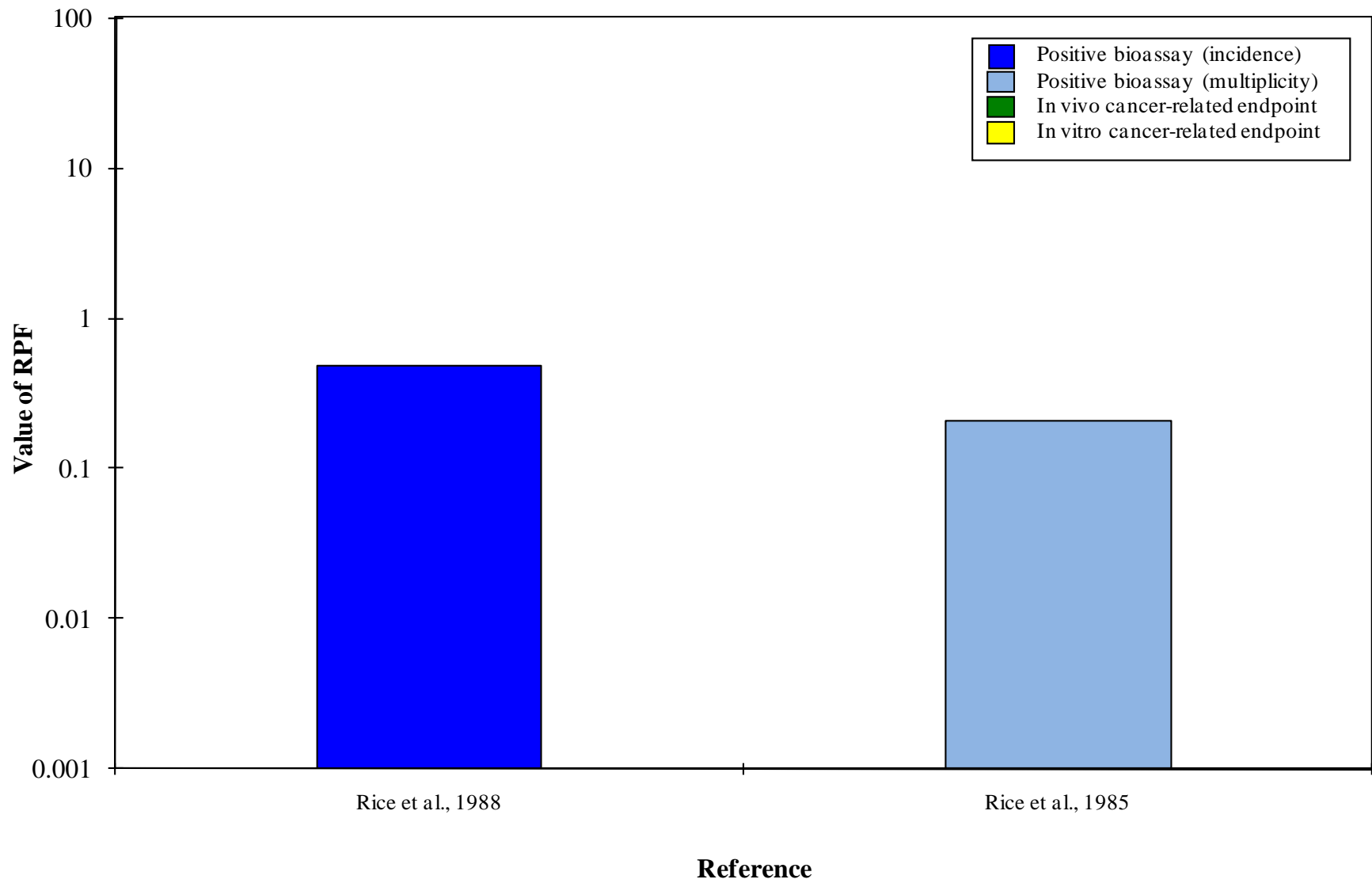
13 Cyclopenta[d,e,f]chrysene has not been tested in a bioassay without benzo[a]pyrene; however,

14 sterically hindered diol epoxides of this compound have given positive results in a newborn

15 mouse assay (Amin et al., 1995). Because the bioassay of cyclopenta[d,e,f]chrysene was

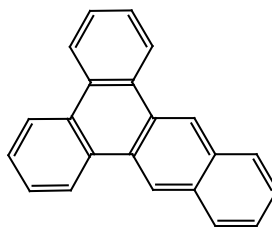
16 positive, this PAH was considered potentially carcinogenic and was selected for inclusion in the

17 RPF approach.



1
2 **Figure 6-20. Cyclopenta[d,e,f]chrysene (CPdefC) RPFs.**

1 *Dibenz[a,c]anthracene (DBaCA)*

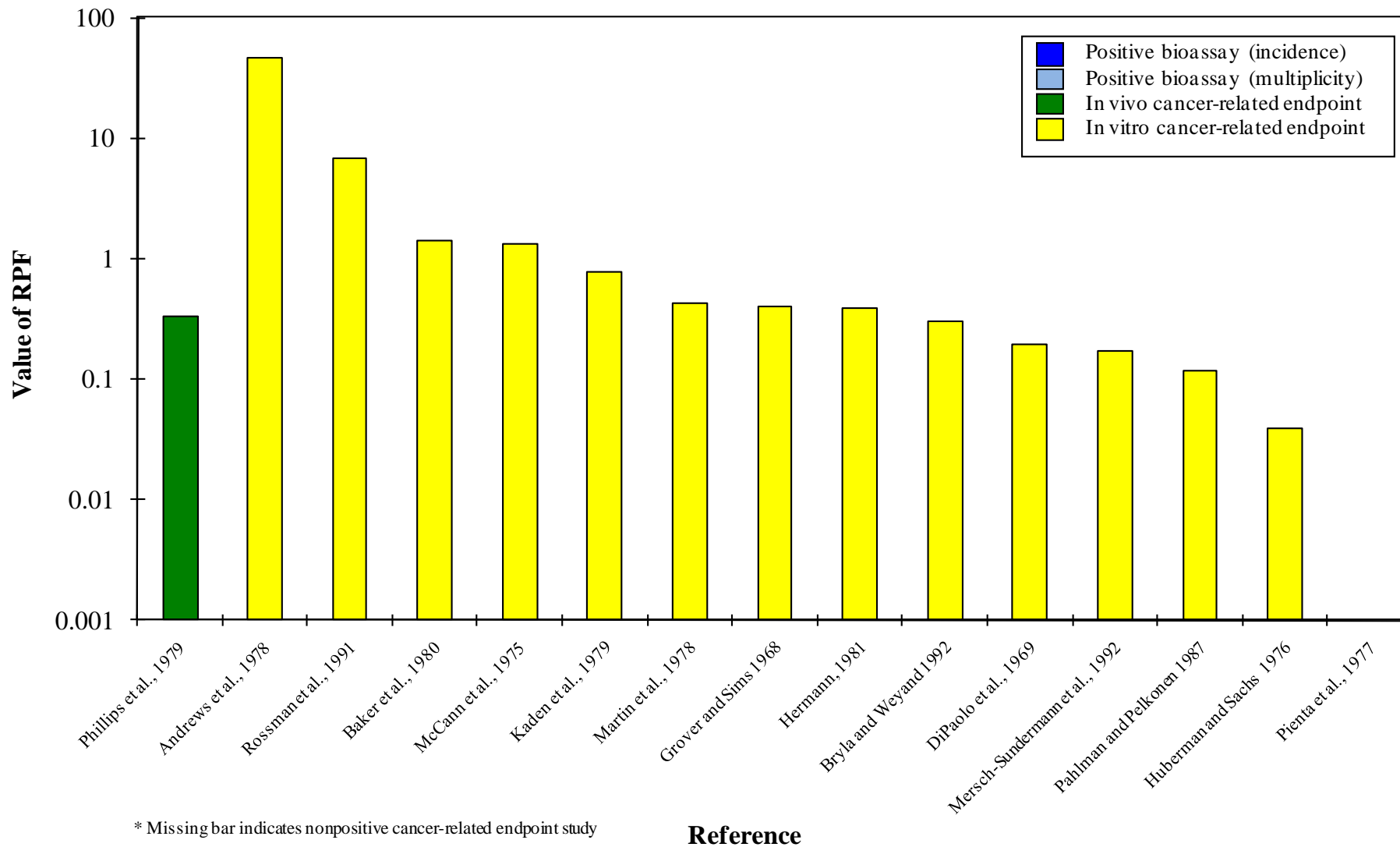


4 Dibenz[a,c]anthracene (CASRN 215-58-7) is an alternant PAH comprised of five fused
5 aromatic rings. Dibenz[a,c]anthracene contains three bay regions but no fjord region in its
6 structure.

7 There were 15 datasets for dibenz[a,c]anthracene that met selection criteria and included
8 benzo[a]pyrene (Figure 6-21). The database includes a single in vivo study of DNA adducts,
9 nine mutagenicity or morphological/malignant cell transformation studies, and five studies of in
10 vitro DNA damage or adducts. One morphological/malignant cell transformation assay gave
11 nonpositive results, while the remaining studies were positive. In the absence of positive
12 bioassays with benzo[a]pyrene, other bioassays and cancer-related data were considered to
13 evaluate the potential carcinogenicity of dibenz[a,c]anthracene.

14 Conflicting results were reported in three dermal initiation bioassays of
15 dibenz[a,c]anthracene in which benzo[a]pyrene was not included. Van Duuren et al. (1970)
16 observed a tumor incidence of 95% (19/20, compared to 1/20 controls) when mice were treated
17 with an initiating dose of 1 mg dibenz[a,c]anthracene in benzene followed by thrice weekly
18 treatment with phorbol myristate acetate. In contrast, there was no significant increase in tumor
19 formation when the same initiating dose was followed by thrice weekly application of croton
20 resin (Van Duuren et al., 1968); however, the latency to first tumor was substantially reduced
21 (65 vs. 150 days in controls). Latency was also substantially reduced in the study by Van
22 Duuren et al. (1970), in which the first tumor appeared after 74 days, compared with 338 days in
23 controls.

24 Cancer-related endpoint data for dibenz[a,c]anthracene are predominantly positive
25 (8/9 mutagenicity or morphological/malignant cell transformation studies and 5/5 studies of in
26 vitro DNA adducts or DNA damage). Although the conflicting bioassay data are not easily
27 explained, the high incidence of tumors (19/20) in the study by Van Duuren et al. (1970), and the
28 reduced latency to tumor formation in both studies, coupled with predominantly positive cancer-
29 related endpoint data, suggest that dibenz[a,c]anthracene is potentially carcinogenic.
30 Contributing to this conclusion is the observation that dibenz[a,c]anthracene is an alternant PAH
31 with known structural alerts for carcinogenicity (more than three rings, and three bay regions).
32 Thus, dibenz[a,c]anthracene was selected for inclusion in the RPF approach.

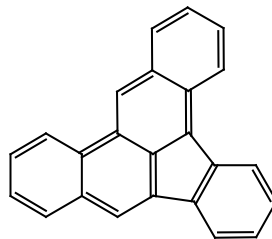


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Figure 6-21. Dibenz[a,c]anthracene (DBaC) RPFs*.

1

Dibenzo[a,e]fluoranthene (DBaeF)

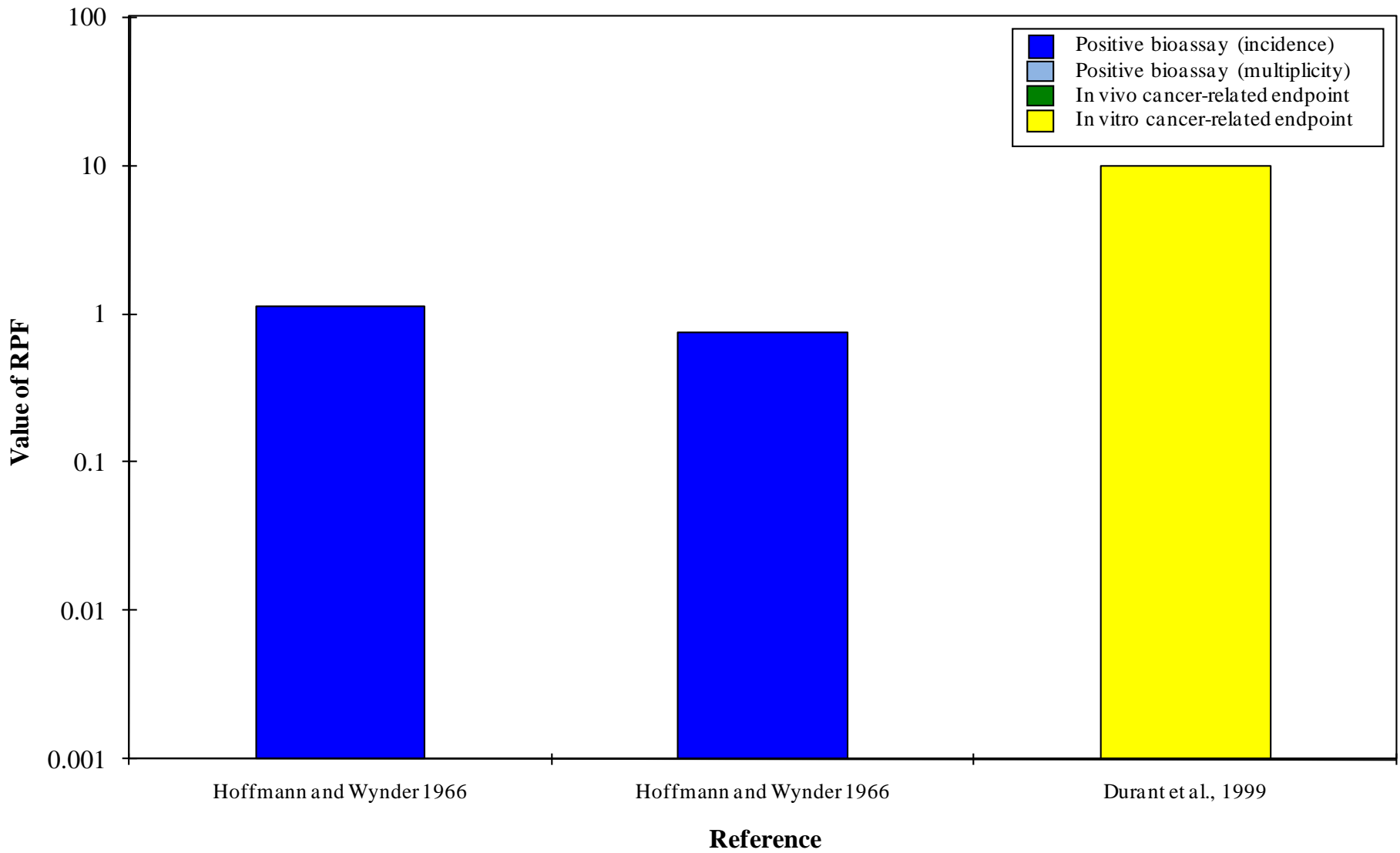


2

3 Dibenzo[a,e]fluoranthene (CASRN 5385-75-1) is a nonalternant PAH comprised of five
4 aromatic rings and one five-membered ring. Dibenzo[a,e]fluoranthene contains a classic bay
5 region but no fjord region in its structure.

6 There were three datasets for dibenzo[a,e]fluoranthene that met selection criteria and
7 included benzo[a]pyrene (Figure 6-22); all gave positive results. The database includes two in
8 vivo tumor bioassays and one mammalian mutagenicity study. Statistically significant increases
9 in tumor incidence were reported in dermal initiation and complete carcinogenicity bioassays in
10 mice (both reported by Hoffmann and Wynder, 1966). As the available bioassays for
11 dibenzo[a,e]fluoranthene were positive, this compound was considered potentially carcinogenic
12 and was selected for inclusion in the RPF approach.

13



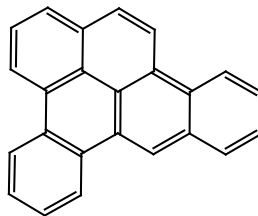
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Figure 6-22. Dibenzo[a,e]fluoranthene (DBaEF) RPFs.

1

Dibenzo[a,e]pyrene (DBaP)



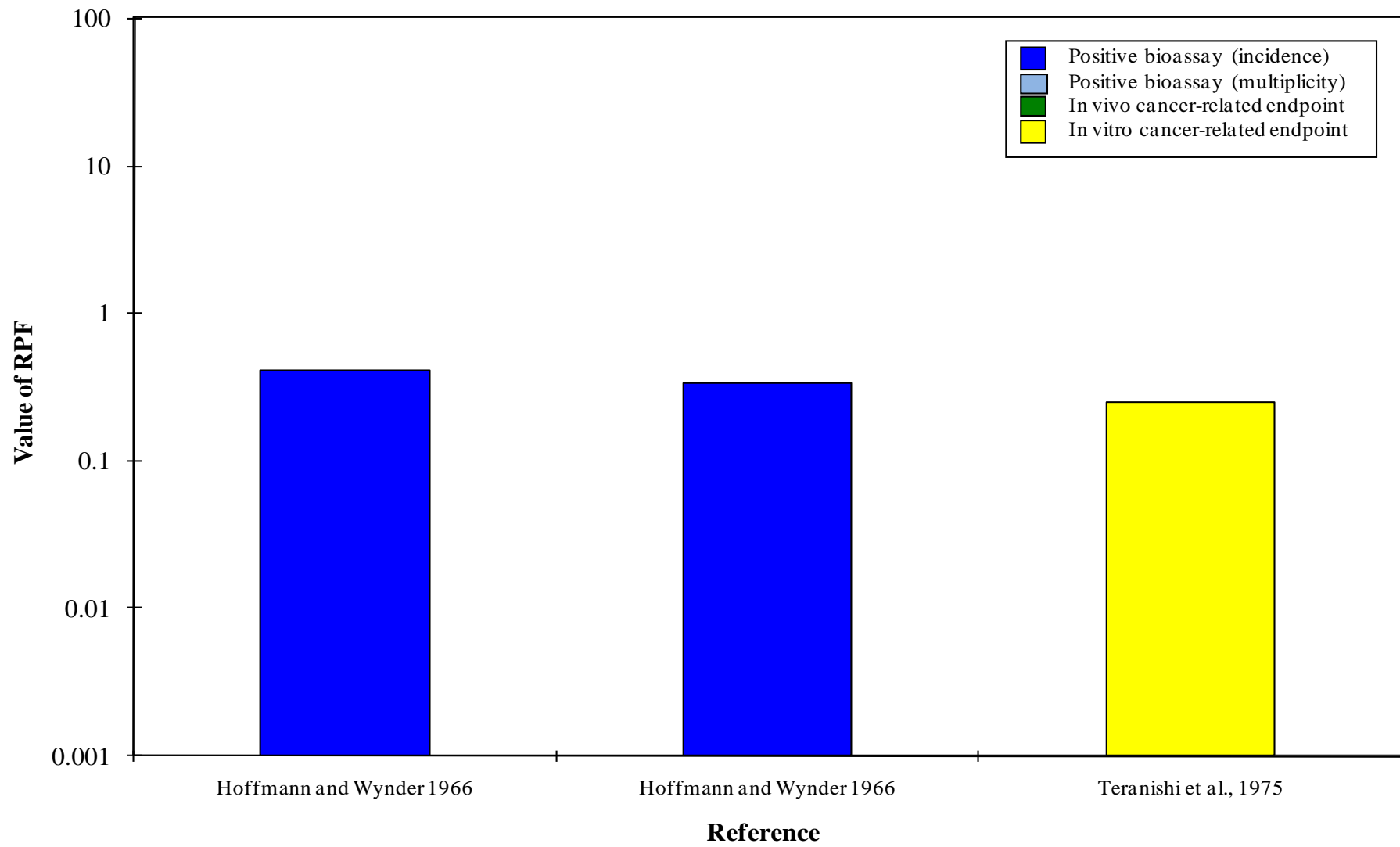
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3

4 Dibenzo[a,e]pyrene (CASRN 192-65-4) is an alternant PAH comprised of six fused
5 aromatic rings. Dibenzo[a,e]pyrene contains three bay regions but no fjord region in its
6 structure.

7 There were three datasets for dibenzo[a,e]pyrene that met selection criteria and included
8 benzo[a]pyrene (Figure 6-23). The database includes two in vivo tumor bioassay datasets and
9 one in vitro bacterial mutagenicity dataset, all of which gave positive results. Statistically
10 significant increases in tumor incidence were reported in dermal initiation and complete
11 carcinogenicity bioassays in mice (Hoffmann and Wynder, 1966). The complete carcinogenicity
12 bioassay was confounded by significant toxicity-related mortality unrelated to tumors (Hoffmann
13 and Wynder, 1966). The one bacterial mutagenicity study reported positive results. Because the
14 available bioassays with benzo[a]pyrene were both positive, dibenzo[a,e]pyrene was considered
15 potentially carcinogenic and was selected for inclusion in the RPF approach.

16

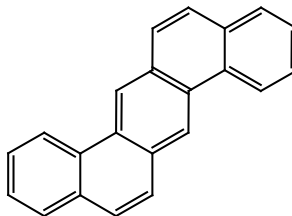


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Figure 6-23. Dibenzo[a,e]pyrene (DBaEP) RPFs.

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Dibenz[a,h]anthracene (DBahA)



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Dibenz[a,h]anthracene (CASRN 53-70-3) is an alternant PAH comprised of five fused aromatic rings. Dibenz[a,h]anthracene contains two bay regions and no fjord region in its structure.

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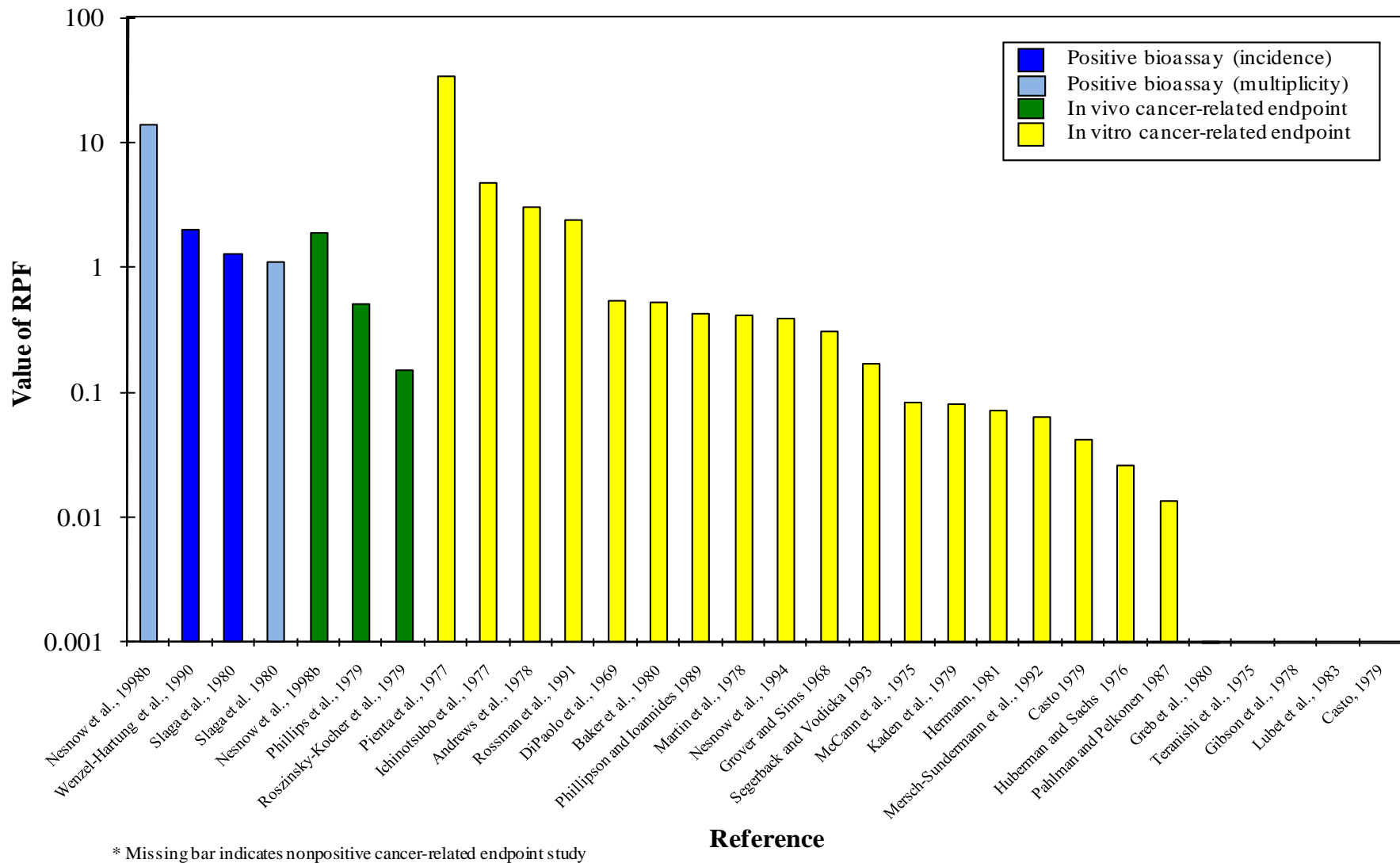
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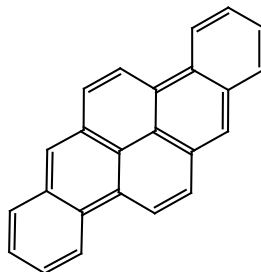
There were 30 datasets for dibenz[a,h]anthracene that met selection criteria and included benzo[a]pyrene (Figure 6-24). Included in the database are in vivo tumor bioassay datasets (4), in vivo DNA adduct datasets (2), an in vivo clastogenicity dataset, mutagenicity datasets (10) morphological/malignant cell transformation datasets (6), and in vitro DNA damage, adducts, or clastogenicity datasets (7). There were three tumor bioassays for dibenz[a,h]anthracene that included benzo[a]pyrene, and all resulted in statistically significant increases in tumor incidence and/or multiplicity. The bioassays were in three different test systems: a rat lung implantation study (Wenzel-Hartung et al., 1990), a mouse dermal initiation study reporting both incidence and multiplicity (Slaga et al., 1980), and an intraperitoneal study in A/J mice (Nesnow et al., 1998b). Dibenz[a,h]anthracene was shown to form DNA adducts when administered in vivo to mice via intraperitoneal injection (Nesnow et al., 1998b) and dermal application (Phillips et al., 1979). Mutagenicity and morphological/malignant cell transformation assays of dibenz[a,h]anthracene were predominantly positive (13/16), as were studies of other cancer-related endpoints. Because the available bioassays with benzo[a]pyrene were positive, dibenz[a,h]anthracene was considered potentially carcinogenic and was selected for inclusion in the RPF approach.



1
2 **Figure 6-24. Dibenz[a,h]anthracene (DBahA) RPFs*.**

1

Dibenzo[a,h]pyrene (DBahP)

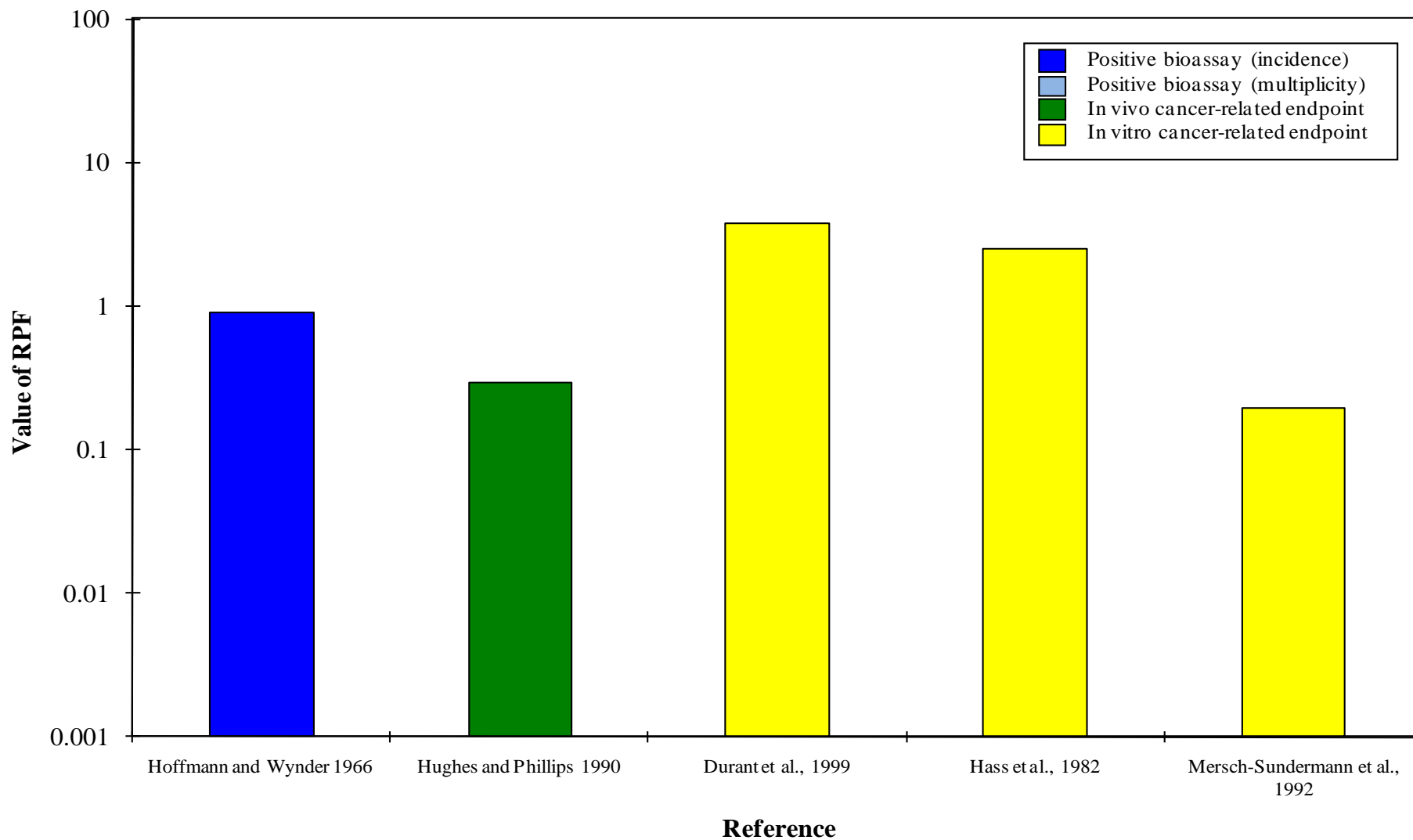


2

3 Dibenzo[a,h]pyrene (CASRN 189-64-0) is an alternant PAH comprised of six fused
4 aromatic rings. Dibenzo[a,h]pyrene contains two bay regions and no fjord region in its structure.

5 There were five datasets for dibenzo[a,h]pyrene that met selection criteria and included
6 benzo[a]pyrene (Figure 6-25); all gave positive results. The database includes one in vivo
7 bioassay dataset, one in vivo DNA adduct dataset, two in vitro mammalian mutagenicity
8 datasets, and one in vitro DNA damage dataset. A statistically significant increase in tumor
9 incidence was reported in a dermal initiation bioassay in mice (Hoffmann and Wynder, 1966).
10 In addition, two dermal studies of complete carcinogenicity that included benzo[a]pyrene gave
11 positive results, but no RPF could be calculated because the incidence of tumors in the mice
12 exposed to dibenzo[a,h]pyrene was $\geq 90\%$ at the lowest dose tested (Cavalieri et al., 1977;
13 Hoffmann and Wynder, 1966) and tumor multiplicity was not reported. As all of the available
14 bioassays that included benzo[a]pyrene showed exposure-related tumorigenic responses,
15 dibenzo[a,h]pyrene was considered potentially carcinogenic and was selected for inclusion in the
16 RPF approach.

17

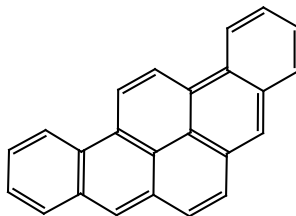


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Figure 6-25. Dibenzo[a,h]pyrene (DBahP) RPFs.

1

Dibenzo[a,i]pyrene (DBaIP)

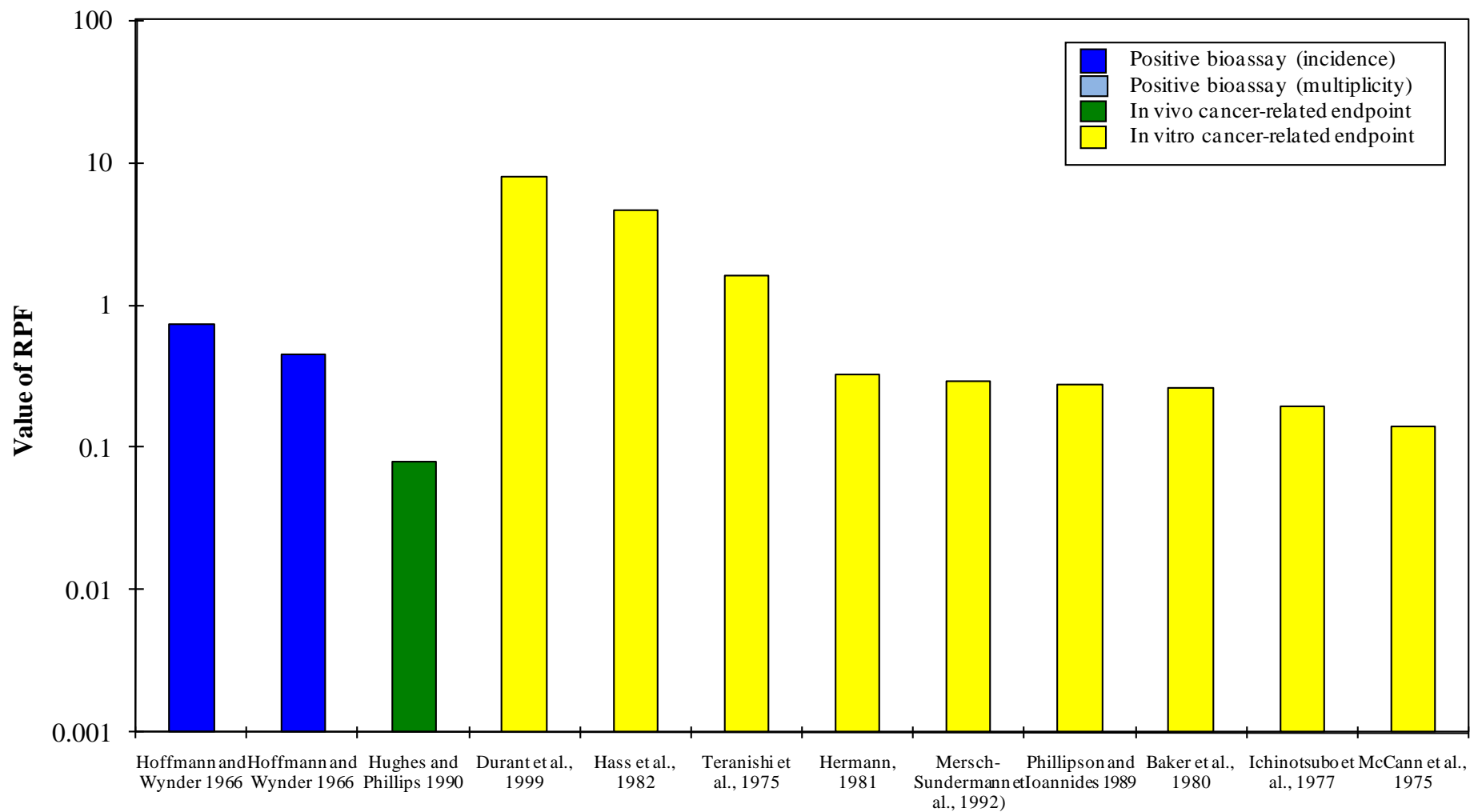


2

3 Dibenzo[a,i]pyrene (CASRN 189-55-9) is an alternant PAH comprised of six fused
4 aromatic rings. Dibenzo[a,i]pyrene contains two bay regions and no fjord region in its structure.

5 There were 12 datasets for dibenzo[a,i]pyrene that met selection criteria and included
6 benzo[a]pyrene (Figure 6-26); all gave positive results. The database includes two in vivo
7 bioassay datasets, one in vivo DNA adduct dataset, seven in vitro mutagenicity datasets, and two
8 in vitro DNA damage datasets. Statistically significant increases in tumor incidence were
9 reported in dermal initiation and complete carcinogenicity bioassays in mice, both published by
10 Hoffmann and Wynder (1966). The cancer-related endpoint studies were all positive. As the
11 available bioassays that included benzo[a]pyrene were both positive, dibenzo[a,i]pyrene was
12 considered potentially carcinogenic and was selected for inclusion in the RPF approach.

13



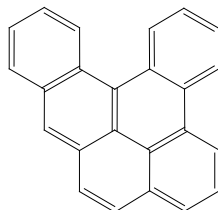
* Missing bar indicates nonpositive genotoxicity study

Reference

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Figure 6-26. Dibenzo[a,i]pyrene (DbaiP) RPFs*.

1 *Dibenzo[a,l]pyrene (DBaP).*



2
3 Dibenzo[a,l]pyrene (CASRN 191-30-0) is an alternant PAH comprised of six fused
4 aromatic rings. Dibenzo[a,l]pyrene contains both a bay region and a fjord region in its structure.

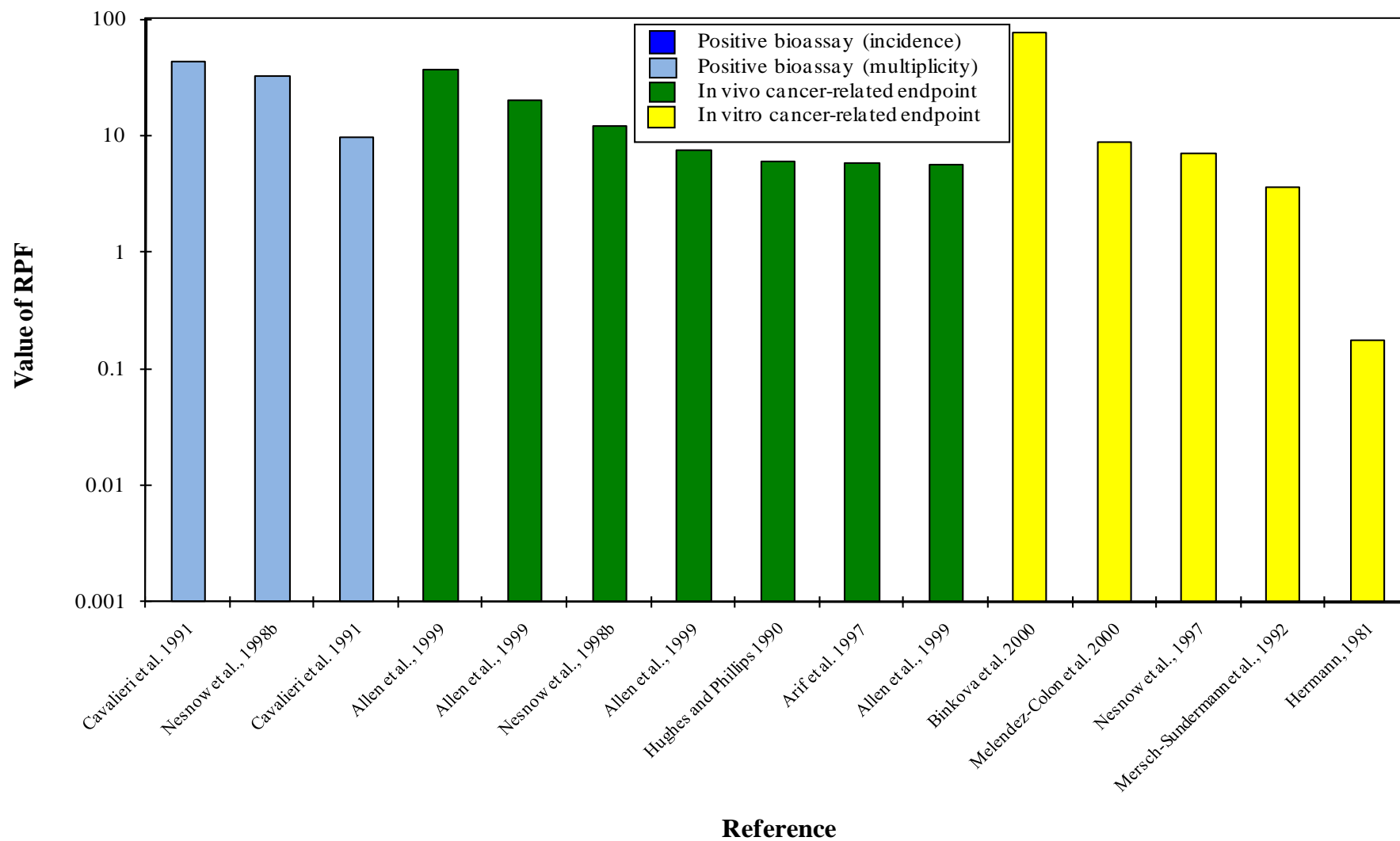
5 There were 15 datasets for dibenzo[a,l]pyrene that met selection criteria and included
6 benzo[a]pyrene (Figure 6-27); all of the studies gave positive results. The database includes
7 three in vivo tumor bioassay datasets, three in vivo DNA adduct datasets, one bacterial
8 mutagenicity dataset, one morphological/malignant cell transformation dataset, four in vivo
9 clastogenicity datasets, and three in vitro DNA adduct or DNA damage datasets.

10 In three bioassays of dibenzo[a,l]pyrene included benzo[a]pyrene, RPFs could not be
11 calculated using incidence data, because the incidence of tumors associated with the lowest dose
12 of dibenzo[a,l]pyrene exceeded 90% (two dermal initiation experiments in mice and an
13 intramammary injection study in rats, both reported by Cavalieri et al., 1991); however, tumor
14 multiplicity data were reported for the dermal initiation experiments and were used to calculate
15 RPFs of 10 and 40. Nesnow et al. (1998b) reported tumor multiplicity, but not tumor incidence
16 in A/J mice exposed intraperitoneally; an RPF of 30 was calculated. Because the available
17 studies indicated that dibenzo[a,l]pyrene may be much more potent benzo[a]pyrene, other studies
18 were also examined to confirm the potency of this compound.

19 Dibenzo[a,l]pyrene treatment resulted in significant increases in tumor incidence in seven
20 bioassays that did not include benzo[a]pyrene, including two dermal initiation studies (Gill et al.,
21 1994; Cavalieri et al., 1989), a dermal complete carcinogenicity study (Nakatsuru et al., 2004),
22 an intramammary injection study in rats (Cavalieri et al., 1989), a newborn mouse bioassay
23 (Platt et al., 2004), an intraperitoneal bioassay using A/J mice (Prahalad et al., 1997), and a
24 gavage bioassay comparing the responses of cyp1B1 wild-type and null mice (Buters et al.,
25 2002). In several of these studies, there was significant toxicity associated with
26 dibenzo[a,l]pyrene treatment. Tumor incidences were very high in most of the studies, including
27 the gavage study (Buters et al., 2002), which reported an overall tumor incidence of 100% in
28 cyp1B1 wild-type mice treated with a single dose of dibenzo[a,l]pyrene. A recent study
29 examining in utero and/or lactational exposure to dibenzo[a,l]pyrene showed that mouse pups
30 exposed during late gestation develop T-cell lymphomas between 3 and 6 months of age, as well
31 multiple lung and liver tumors (Castro et al., 2008). All of the cancer-related data for
32 dibenzo[a,l]pyrene were positive and resulted in high RPF estimates, including in vivo and in
33 vitro studies of DNA adducts, in vivo clastogenicity studies, morphological/malignant cell
34 transformation, bacterial mutagenicity, and in vitro DNA damage or DNA adduct studies.

1 The weight of evidence supporting a finding of potential carcinogenicity for
2 dibenzo[a,l]pyrene is strong and suggests that this compound is very potent; thus, it was selected
3 for inclusion in the RPF approach.

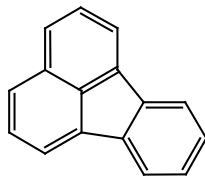
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Figure 6-27. Dibenzo[a,l]pyrene (DBaP) RPFs.

1 *Fluoranthene (FA)*

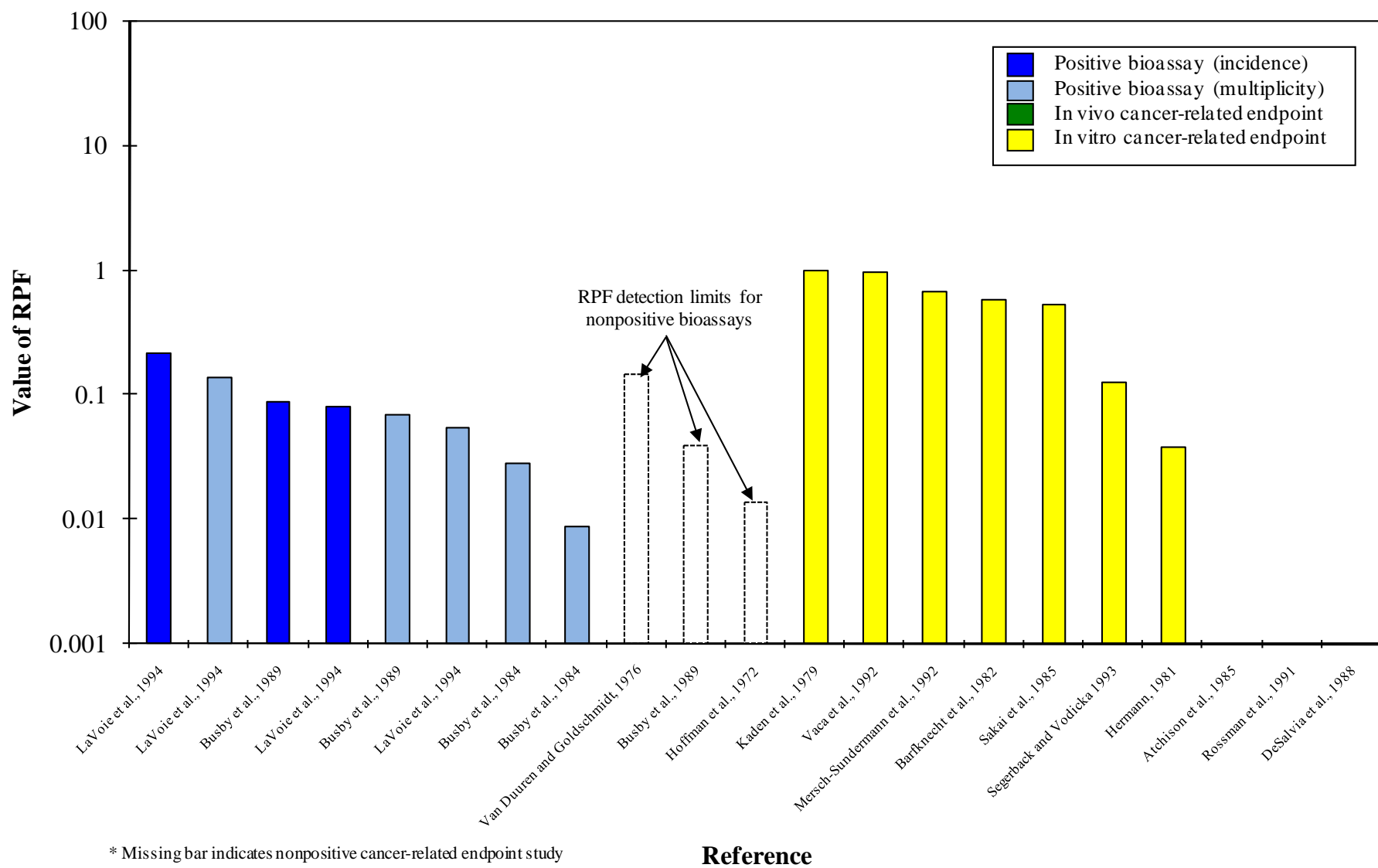


3 Fluoranthene (CASRN 206-44-0) is a nonalternant PAH comprised of three aromatic
4 rings and one five-membered ring. Fluoranthene does not contain a classic bay or fjord region in
5 its structure.

6 There were 21 datasets for fluoranthene that met selection criteria and included
7 benzo[a]pyrene (Figure 6-28). Included in the database are in vivo tumor bioassay datasets (11),
8 bacterial and mammalian mutagenicity datasets (5), a morphological/malignant cell
9 transformation assay, and in vitro studies of DNA damage, DNA adducts, or clastogenicity (4).
10 Of the bioassay datasets that included benzo[a]pyrene, nine gave positive results and two gave
11 nonpositive results. Statistically significant increases in tumor incidence and tumor multiplicity
12 were reported in newborn mouse bioassays (in male and female mice [LaVoie et al., 1994] and in
13 female mice [Busby et al., 1989]). The tumor incidence was not significantly increased by
14 fluoranthene in a mouse dermal initiation study with an RPF detection limit of 0.01 (Hoffman et
15 al., 1972) and when fluoranthene was tested alone in a dermal cocarcinogenicity bioassay with
16 an RPF detection limit of 0.1 (Van Duuren and Goldschmidt, 1976). In another newborn mouse
17 bioassay (Busby et al., 1984) that reported both incidence and multiplicity, the lowest dose of
18 benzo[a]pyrene resulted in a tumor incidence of >90%, precluding RPF calculation from the
19 incidence data; however, multiplicity data were available. Statistical analysis of the data for
20 fluoranthene demonstrated positive findings for both incidence and multiplicity in male mice, but
21 the results for the two endpoints were inconsistent in females. In female mice exposed at the
22 high dose of fluoranthene in a newborn mouse bioassay reported by Busby et al. (1984), the lung
23 tumor count was significantly increased (albeit borderline, $p = 0.0343$) while the incidence was
24 not ($p > 0.05$), and neither was statistically significantly increased at the lower dose. For the
25 purpose of this analysis, the multiplicity data were treated as an independent measure of
26 carcinogenic potency, and an RPF was calculated for the statistically increased tumor count in
27 female mice.

28 The mutagenicity studies of fluoranthene were all positive, but in vitro studies of DNA
29 damage, DNA adducts, and clastogenicity gave inconsistent results. Because the inconsistent
30 bioassay results can be attributed to different test systems (different exposure route and/or
31 gender) or study design, fluoranthene was considered potentially carcinogenic and was selected
32 for inclusion in the RPF approach.

33

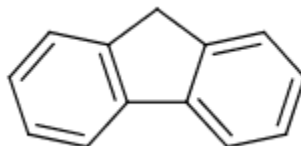


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Figure 6-28. Fluoranthene (FA) RPFs*.

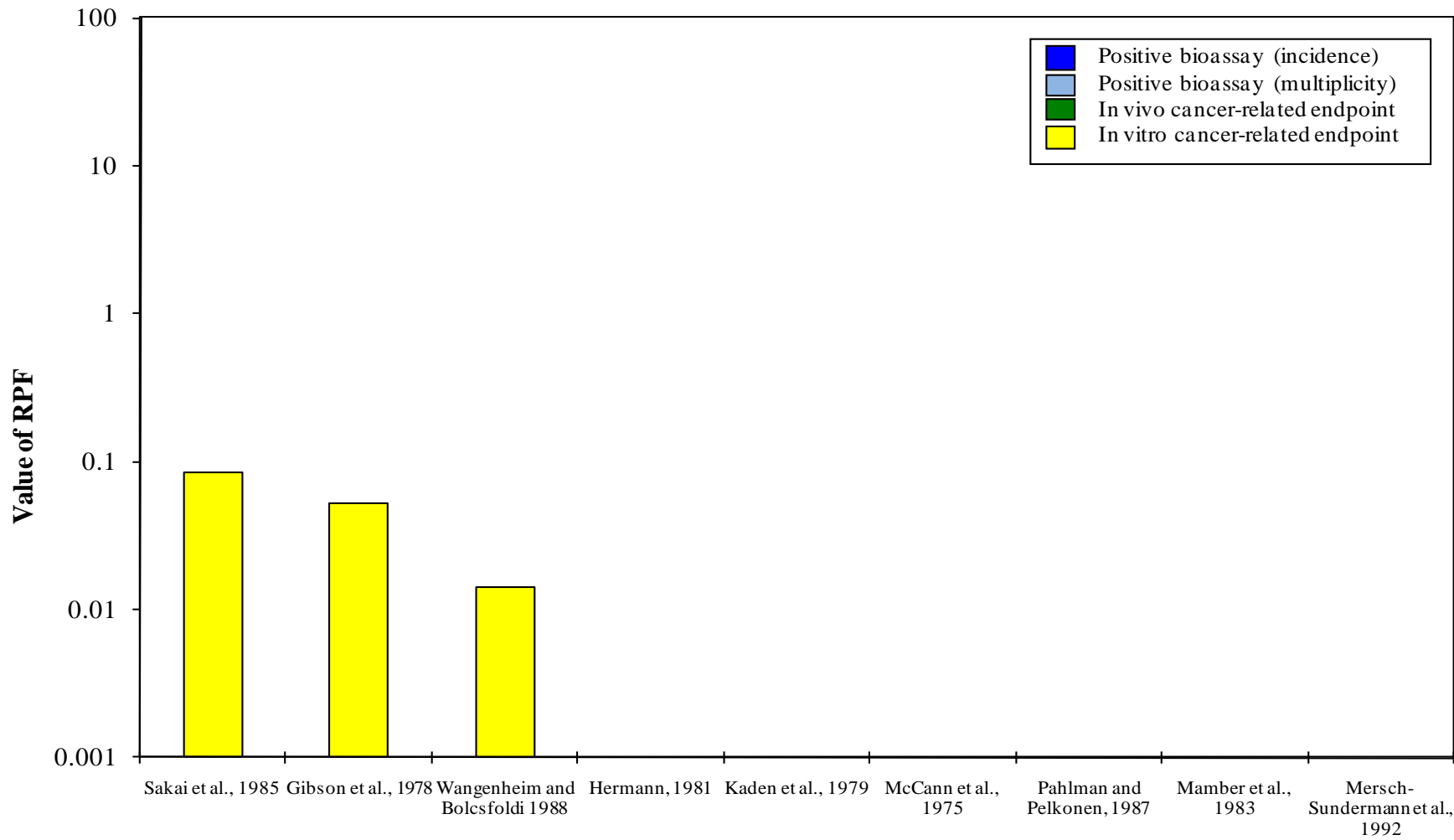
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Fluorene (FE)



Fluorene (CASRN 86-73-7) is a nonalternant PAH comprised of two aromatic rings and one five-membered ring. Fluorene does not contain a classic bay or fjord region in its structure.

There were nine datasets for fluorene that met selection criteria and included benzo[a]pyrene (Figure 6-29). There were no tumor bioassays of fluorene that included benzo[a]pyrene, so other bioassays and cancer-related endpoint data were considered. LaVoie et al. (1980) conducted a study of skin tumor initiation in mice treated with 1.0 mg fluorene followed by 20 weeks of treatment with TPA; the study did not include benzo[a]pyrene. The incidence of tumor-bearing animals (5%) was not significantly increased over controls (0%) (LaVoie et al.,1980). The limited cancer-related endpoint data were mixed, with three positive and four negative mutagenicity datasets, and two negative in vitro DNA damage datasets. Overall, the database for fluorene is both limited and inconsistent. Because the database for fluorene does not provide adequate information with which to assess potential carcinogenicity, this PAH was not selected for inclusion in the RPF approach.



* Missing bar indicates nonpositive cancer-related endpoint study

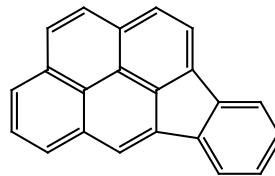
Reference

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Figure 6-29. Fluorene (FE) RPFs*.

1

Indeno[1,2,3-c,d]pyrene (IP)

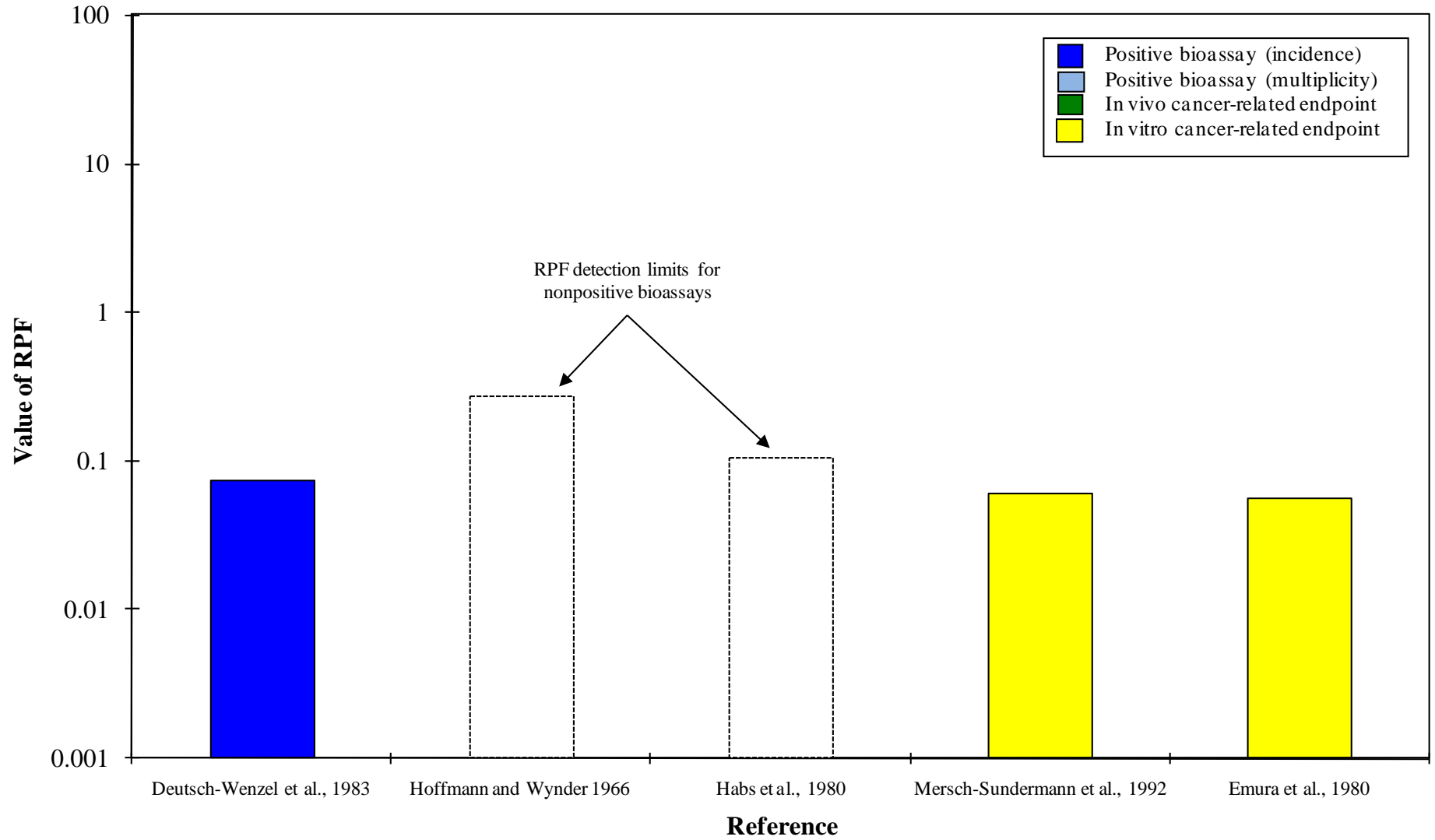


2

3 Indeno[1,2,3-c,d]pyrene (CASRN 193-39-5) is a nonalternant PAH comprised of five
4 aromatic rings and one five-membered ring. Indeno[1,2,3-c,d]pyrene does not contain a classic
5 bay or fjord region in its structure.

6 There were five datasets for indeno[1,2,3-c,d]pyrene that met selection criteria and
7 included benzo[a]pyrene (Figure 6-30). There are three tumor bioassays, one in vitro study of
8 morphological/malignant cell transformation (Emura et al., 1980), and one in vitro study of DNA
9 damage (Mersch-Sundermann et al., 1992). Of the three tumor bioassays, only one, a rat lung
10 implantation study (Deutsch-Wenzel et al., 1983), reported a statistically significant increase in
11 tumor incidence or multiplicity; the RPF was 0.07. Nonpositive findings were reported in mouse
12 dermal initiation (Hoffmann and Wyner, 1966) and complete carcinogenicity (Habs et al., 1980)
13 studies with RPF detection limits in the range of 0.1–0.3. Because the inconsistent bioassay
14 results can be attributed to different test systems (different species and route), and the
15 nonpositive studies may not have been sufficiently sensitive to detect an effect, indeno[1,2,3-c,d]
16 pyrene was considered potentially carcinogenic and was selected for inclusion in the RPF
17 approach.

18

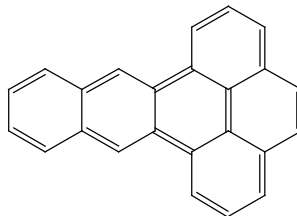


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Figure 6-30. Indeno[1,2,3-c,d]pyrene (IP) RPFs.

1

Naphtho[2,3-e]pyrene (N23eP)

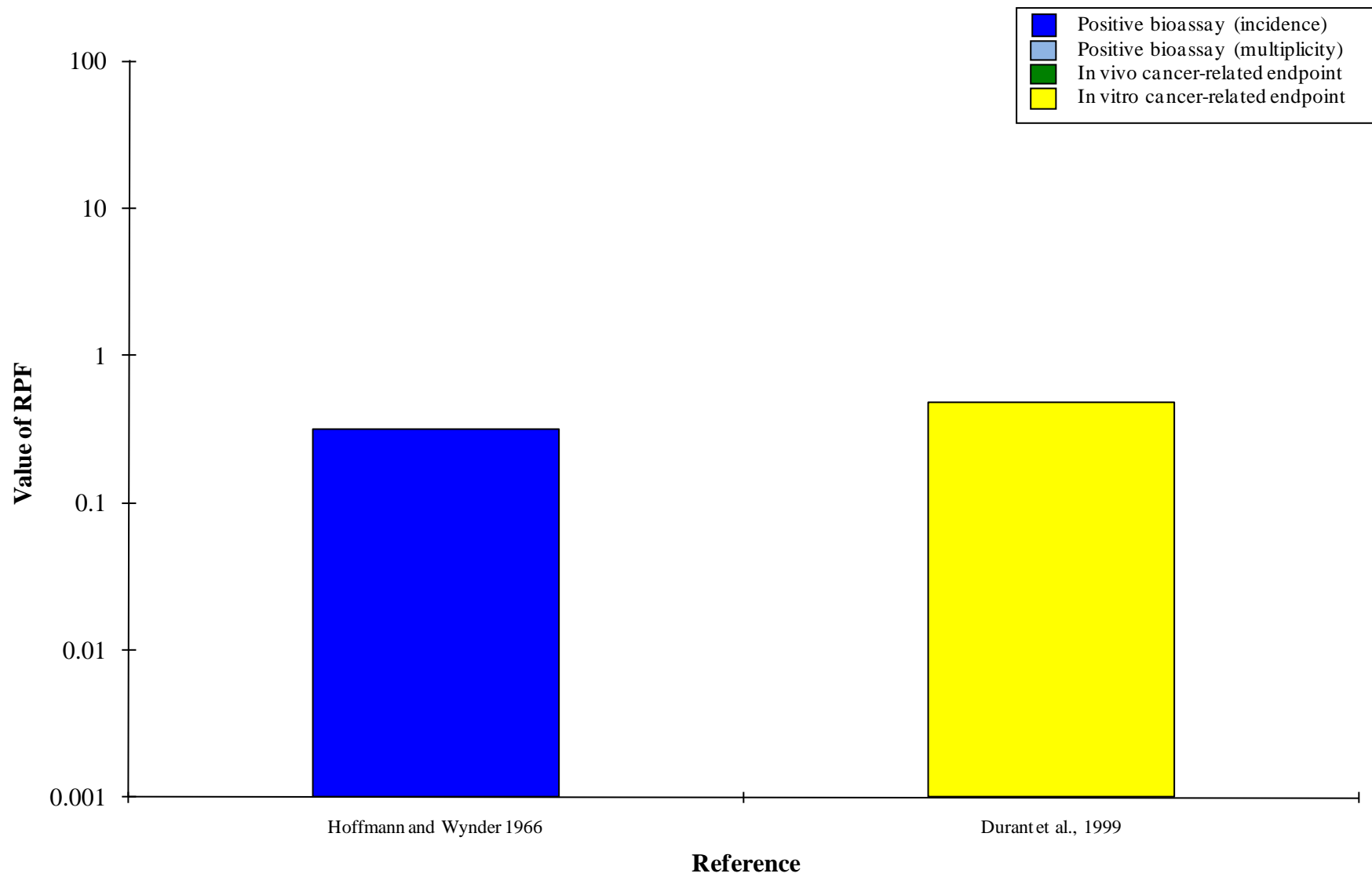


2

3 Naphtho[2,3-e]pyrene (CASRN 193-09-9) is an alternant PAH comprised of six fused
4 aromatic rings. Naphtho[2,3-e]contains two bay regions and no fjord region in its structure.

5 There were two datasets for naphtho[2,3-e]pyrene that met selection criteria and included
6 benzo[a]pyrene (Figure 6-31): a tumor bioassay dataset and an in vitro mammalian mutagenicity
7 dataset (both were positive). The tumor bioassay was a single dose dermal initiation bioassay
8 (Hoffmann and Wynder, 1966). As the available bioassay reported a statistically significant
9 increase in tumor incidence, naphtho[2,3-e]pyrene was considered potentially carcinogenic, and
10 was selected for inclusion in the RPF approach.

11

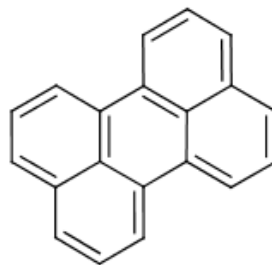


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Figure 6-31. Naphtho[2,3-e]pyrene (N23eP) RPFs.

1

Perylene (Pery)



2

3 Perylene (CASRN 198-55-0) is an alternant PAH comprised of five fused aromatic rings.
4 Perylene contains two bay regions and no fjord region in its structure.

5 There were 11 datasets for perylene that met selection criteria and included
6 benzo[a]pyrene (Figure 6-32). The database includes an in vivo tumor bioassay dataset, an in
7 vivo clastogenicity dataset, eight bacterial mutagenicity datasets, and an in vitro DNA damage
8 dataset. The single tumor bioassay, a dermal initiation study, gave nonpositive results for
9 perylene (El-Bayoumy et al., 1982); the RPF detection limit was 0.01. To confirm the
10 nonpositive bioassay findings, other bioassays and cancer-related endpoint data were considered.
11 In a study that did not include benzo[a]pyrene, Van Duuren et al. (1970) did not observe an
12 increase in tumor incidence over controls when mice were treated by dermal application with an
13 initiating dose of 0.8 mg perylene in benzene followed by thrice weekly treatment with phorbol
14 myristate acetate for 58 weeks. However, seven of the eight bacterial mutagenicity studies gave
15 positive results, while perylene tested negative in one bacterial mutagenicity study, the
16 clastogenicity study, and the DNA damage study. Overall, the database for perylene is both
17 limited and inconsistent. Because the database for perylene does not provide adequate
18 information with which to assess potential carcinogenicity, this PAH was not selected for
19 inclusion in the RPF approach.

20

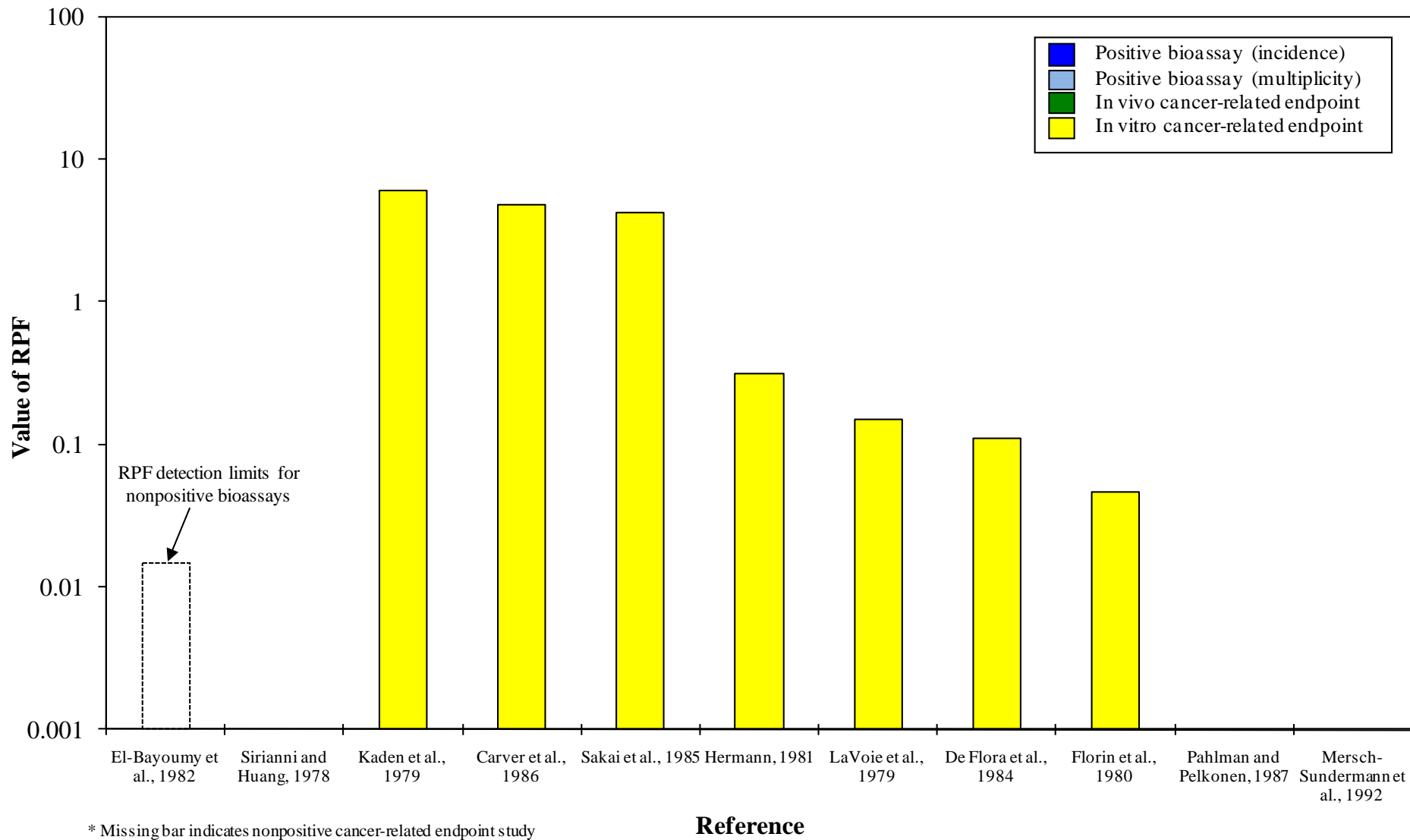
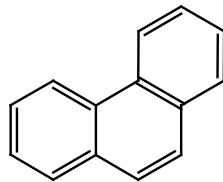


Figure 6-32. Perylene (Pery) RPFs*.

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1 *Phenanthrene (PH)*

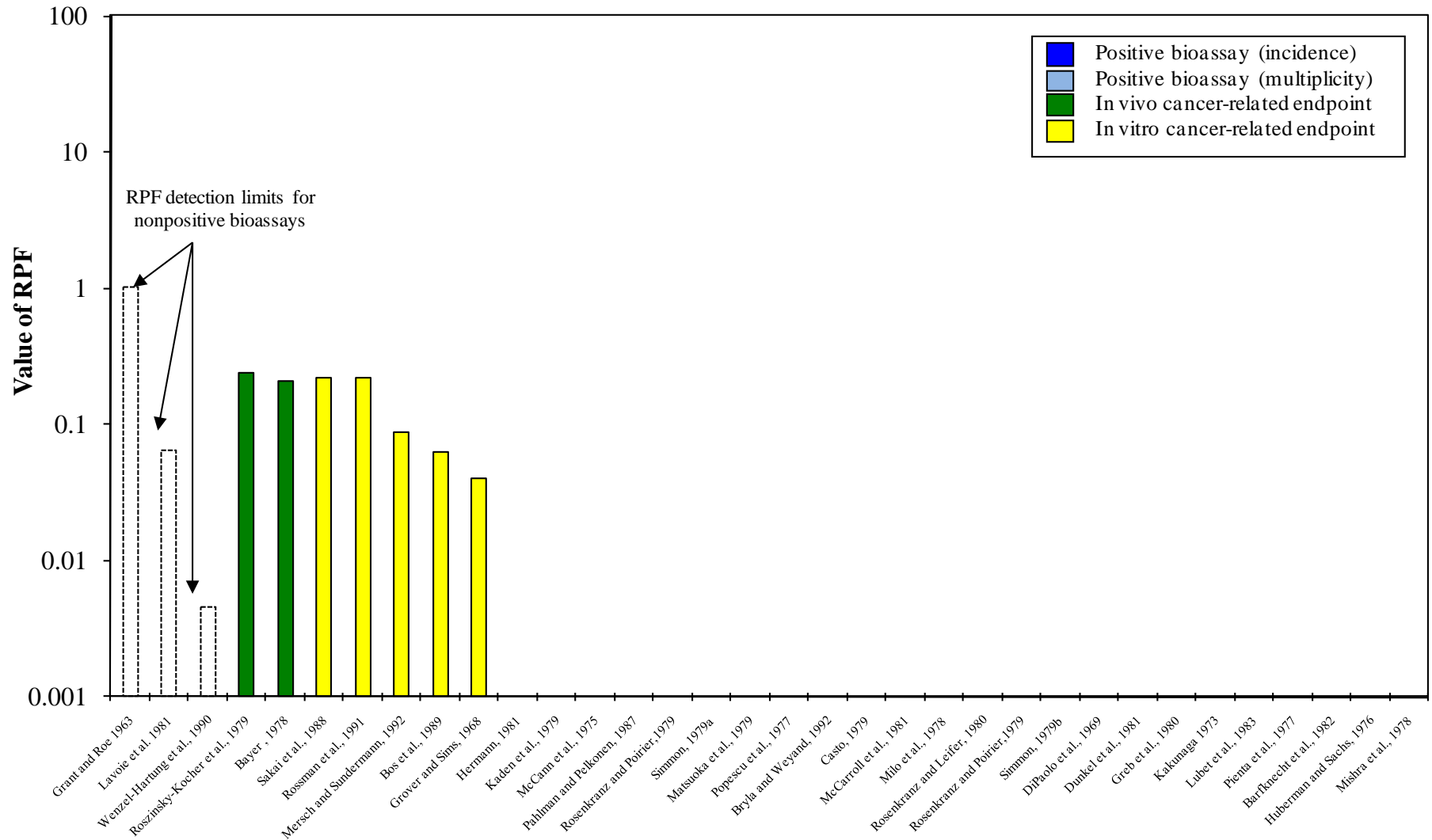


3 Phenanthrene (CASRN 85-01-8) is an alternant PAH comprised of three fused aromatic
4 rings. Phenanthrene contains a bay region in its structure, but has less than four aromatic rings.

5 There were 34 datasets for phenanthrene that met selection criteria and included
6 benzo[a]pyrene, including 3 in vivo tumor bioassay datasets, 2 in vivo clastogenicity datasets,
7 11 mutagenicity datasets, 6 morphological/malignant cell transformation datasets, and 12 in vitro
8 studies of DNA adducts, DNA damage, or clastogenicity (Figure 6-33). Only seven studies
9 reported positive results; the remaining 27 studies reported nonpositive findings, including all
10 three bioassays. Nonpositive findings were reported in the three bioassays that included
11 benzo[a]pyrene, including a lung implantation study in rats (Wenzel-Hartung et al., 1990), a
12 dermal initiation study in mice (LaVoie et al., 1981), and a subcutaneous study in mice (Grant
13 and Roe, 1963). To confirm the nonpositive findings, other bioassays and cancer-related
14 endpoint data were considered. In bioassays without benzo[a]pyrene, phenanthrene did not
15 induce significant increases in tumors in a newborn mouse assay using a total dose of 1.4 μmol
16 (Buening et al., 1979) or in two dermal initiation assays (Wood et al., 1979; Salaman and Roe,
17 1956) using doses of 10 μmol and 540 mg, respectively. However, 12/30 mice developed
18 papillomas by week 35 after dermal treatment with 10 μmol phenanthrene (in benzene) followed
19 by twice weekly treatment with TPA; no control mice had papillomas (Scribner, 1973). The
20 response was statistically significantly increased over controls ($p < 0.01$).

21 In vitro assays of mutagenicity and morphological/malignant cell transformation were
22 predominantly negative for phenanthrene. One of the two positive studies (Sakai et al., 1988)
23 reported a poor dose-response relationship for phenanthrene. Two studies found evidence of
24 clastogenicity after in vivo administration of phenanthrene (Roszinsky-Kocher et al., 1979;
25 Bayer, 1978). However, in the study by Bayer (1978), only the high dose gave a significant
26 response, and there was not a significant dose-response trend. When phenanthrene was tested in
27 in vitro studies of DNA adducts, DNA damage, and clastogenicity, the results were
28 predominantly negative (9/12 studies). Overall, the database for phenanthrene is substantial, and
29 the weight of evidence suggests that this PAH is not carcinogenic or is of very low carcinogenic
30 potential. Based on the large number of negative bioassays and the abundant evidence that
31 phenanthrene lacks genotoxic action, this compound was selected for inclusion in the RPF
32 approach and assigned an RPF of 0.

33



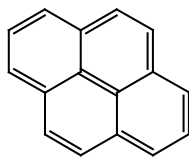
* Missing bar indicates nonpositive cancer-related endpoint study

Reference

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Figure 6-33. Phenanthrene (PH) RPFs*.

1 *Pyrene (Pyr)*

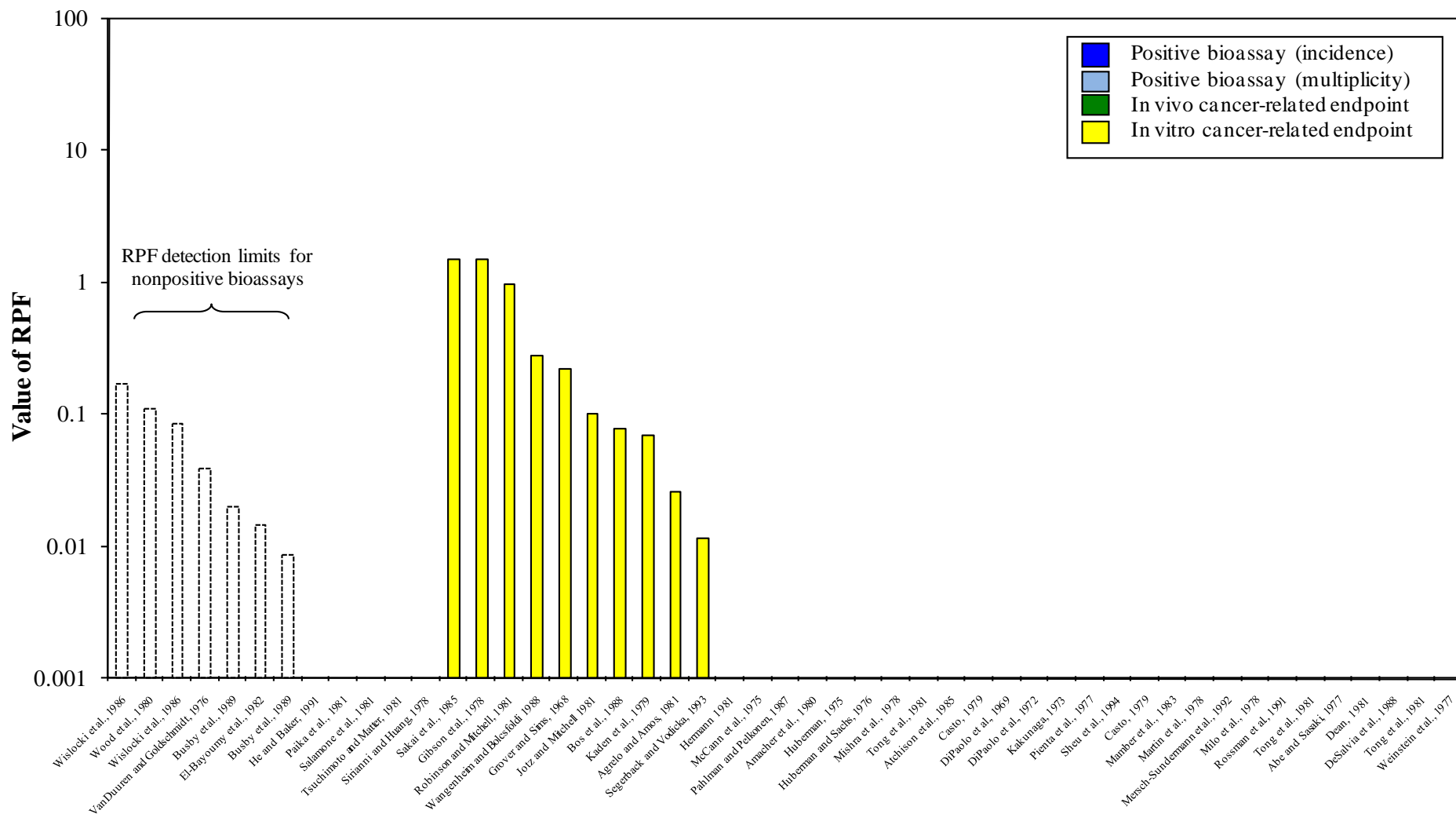


4 Pyrene (CASRN 129-00-0) is an alternant PAH comprised of four fused aromatic rings.
5 Pyrene does not contain a bay or fjord region in its structure.

6 There were 49 datasets for pyrene that met study quality criteria and included
7 benzo[a]pyrene (Figure 6-34). Included in the database are in vivo tumor bioassay datasets (7),
8 in vivo clastogenicity datasets (5), bacterial and mammalian mutagenicity datasets (14),
9 morphological/malignant cell transformation datasets (7), and in vitro DNA damage, DNA
10 adducts, or clastogenicity datasets (16). There were seven bioassays of pyrene that included
11 benzo[a]pyrene; all gave nonpositive results. Nonpositive results were reported in two newborn
12 mouse bioassays in which both males and females were tested (Busby et al., 1989; Wislocki et
13 al., 1986), two studies of dermal initiation (El-Bayoumy et al., 1982; Wood et al., 1980), and a
14 dermal cocarcinogenesis bioassay (Van Duuren and Goldschmidt, 1976). RPF detection limits in
15 these studies ranged from about 0.01 to 0.1 (see Figure 6-34). In an intraperitoneal bioassay
16 using A/J mice that included benzo[a]pyrene, the authors reported that pyrene treatment did not
17 induce lung adenomas (Ross et al., 1995); data were not reported, so an RPF detection limit
18 could not be estimated. In bioassays without benzo[a]pyrene, pyrene did not induce a significant
19 increase in tumors in a dermal initiation bioassay (Salaman and Roe, 1956). Scribner (1973)
20 reported a weak tumorigenic response in a dermal initiation study in mice (5/29 mice developed
21 papillomas 35 weeks after dermal treatment with 10 μ mol pyrene in benzene followed by twice
22 weekly treatment with TPA as compared with 0/30 control mice, $p = 0.02$).

23 In vitro assays of bacterial and mammalian mutagenicity and morphological/malignant
24 cell transformation were predominantly negative for pyrene. In five studies of clastogenicity in
25 animals exposed in vivo to pyrene, no evidence of clastogenic effects was reported. Further, in
26 vitro studies of DNA adducts, DNA damage, and clastogenicity using pyrene also largely
27 reported negative results. Overall, the database for pyrene is substantial, and the weight of
28 evidence suggests that this PAH is not carcinogenic or is of very low carcinogenic potential.
29 Based on the large number of negative bioassays and the abundant evidence that pyrene lacks
30 genotoxic action, this compound was selected for inclusion in the RPF approach and assigned an
31 RPF of 0.

32



* Missing bar indicates nonpositive cancer-related endpoint study

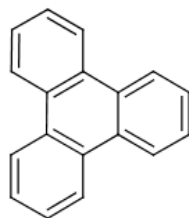
Reference

1
2

Figure 6-34. Pyrene (Pyr) RPFs*.

1

Triphenylene (TPhen)



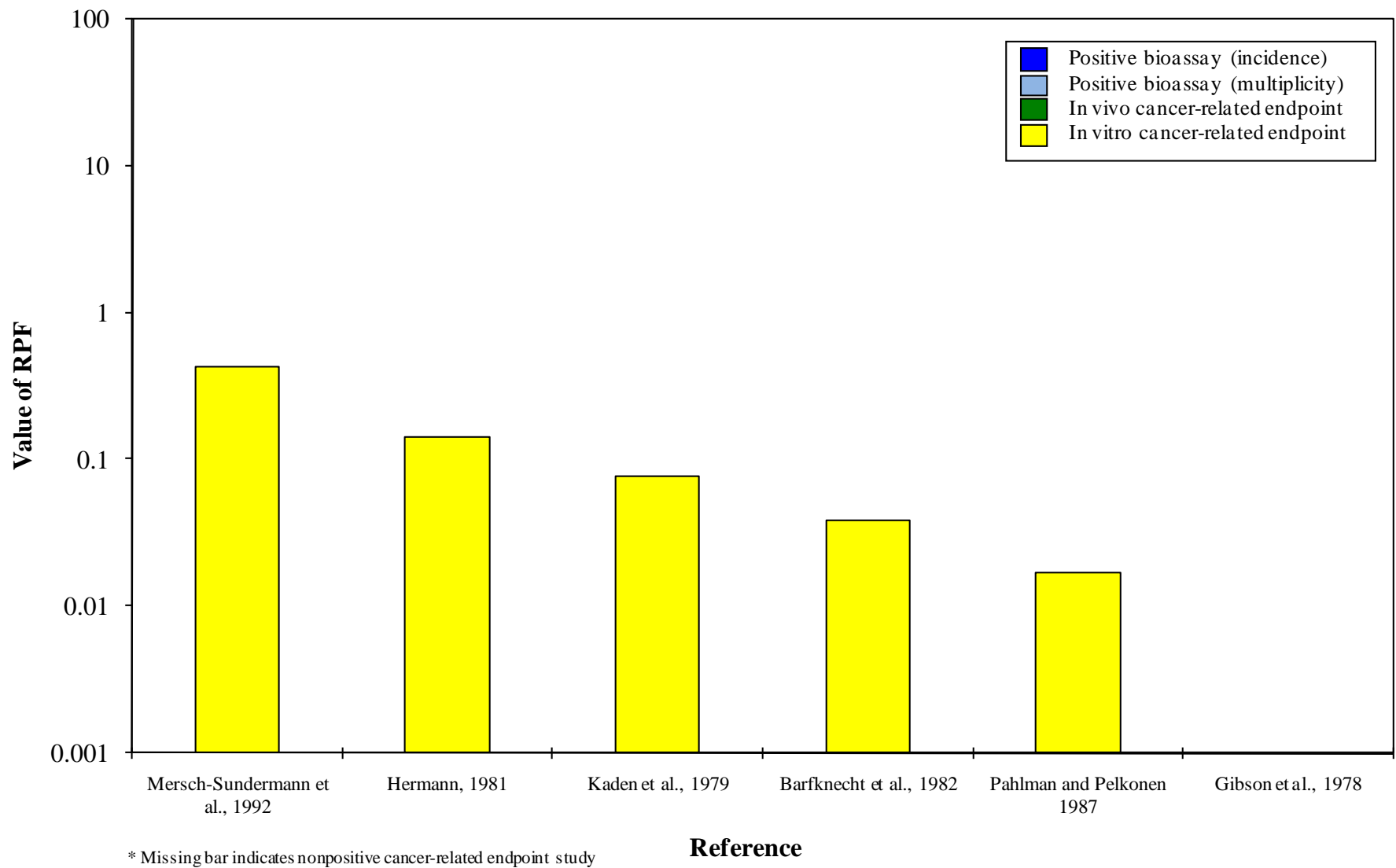
2

3 Triphenylene (CASRN 217-59-4) is an alternant PAH comprised of four fused aromatic
4 rings. Triphenylene contains several bay regions and no fjord region in its structure.

5 There were six datasets for triphenylene that met selection criteria and included
6 benzo[a]pyrene (Figure 6-35); all but one of the studies gave positive results. The database
7 includes five mutagenicity studies (four positive and one negative) and a study of in vitro DNA
8 damage. There were no bioassays of triphenylene that met selection criteria, and no bioassays
9 without benzo[a]pyrene. Although all of the available cancer-related endpoint studies for
10 triphenylene gave positive results, the database is very limited, consisting of only a few in vitro
11 mutagenicity and DNA damage studies. The RPFs for cancer-related endpoints ranged from
12 0.02 to 0.4. Because the database for triphenylene does not provide adequate information with
13 which to assess potential carcinogenicity, this PAH was not selected for inclusion in the RPF
14 approach.

15

16



1
2

Figure 6-35. Triphenylene (Tphen) RPFs*.

7. DERIVATION OF FINAL RPFs FOR SELECTED PAHs

The weight of evidence evaluation (Section 6) indicates that the available data are adequate to suggest that 23 of the 26 PAHs are potentially carcinogenic, three PAHs (anthracene, phenanthrene, and pyrene) exhibited little or no carcinogenic potential, and data are inadequate to evaluate the carcinogenic potential for eight PAHs. The eight PAHs with inadequate data are excluded from the RPF analysis.

For the three PAHs for which there were sufficient data to conclude that the PAH had minimal carcinogenic potential (i.e., robust negative tumor bioassay data and cancer-related endpoint data), a final RPF of 0 was recommended. While there is little quantitative difference between selecting a final RPF of 0 for a given PAH and excluding that PAH from the RPF approach, this is an important distinction for uncertainty analysis. There is substantial uncertainty in the risk associated with PAHs that are excluded from the RPF analysis due to inadequate data, as these compounds could be of low or high potency. However, for PAHs with an RPF of 0, there is evidence to suggest that these compounds are of little or no carcinogenic potential, and the uncertainty associated with the cancer risk for these compounds is markedly reduced.

For each of the remaining 23 compounds, a final nonzero RPF was derived. A number of options were considered for deriving a final RPF from among the numerous values calculated for each individual PAH. These options included: prioritizing bioassay RPFs from different exposure routes based on relevance to environmentally-relevant routes; prioritizing bioassay RPFs based on target organs considered relevant to human susceptibility to PAH carcinogenesis; prioritizing RPFs based on quality of the underlying study; prioritizing cancer-related endpoints by their correlation with bioassay potency (i.e., ability to predict bioassay potency); and combining RPFs across all bioassays, all cancer-related endpoints, or across all endpoints. Appendix G details analyses that were undertaken to assess various options for ranking or prioritizing RPFs. It was concluded that the available data did not provide a basis for prioritizing RPFs except for a preference for bioassay data over cancer-related endpoints. As a consequence, final RPFs were derived from bioassay data for any PAH that had at least one RPF based on a bioassay. For potentially carcinogenic PAHs without bioassay data, final RPFs were calculated from all cancer-related endpoint datasets with positive results (see next section).

7.1. METHODS FOR DERIVING FINAL RPFs

For each potentially carcinogenic PAH with bioassay data, the average RPF was calculated from bioassay datasets with positive results (nonpositive bioassay results were not included in the calculation). For those PAHs that did not have any RPF based on a bioassay, but for which the weight of evidence evaluation indicated a potential for carcinogenic response (e.g.,

1 dibenz[a,c]anthracene), the average RPF was calculated from all cancer-related endpoint datasets
2 with positive results (again, nonpositive results were not included in the calculation). The range
3 of RPF values was also reported. Presenting the average and the range provides an average and
4 maximum estimate for each PAH that has data from multiple studies.

5 Several options were considered for the estimation of a final RPF (e.g., arithmetic mean,
6 geometric mean, weighted average, maximum, or order of magnitude estimates). The arithmetic
7 mean and range were chosen as a simple approach to describing the calculated RPF values
8 available for each PAH. Other statistical measures (i.e., geometric mean, weighted average)
9 were not considered due to the limited number of RPF values calculated for most PAHs and the
10 variability in the RPF estimates. There were usually not enough data (3 or fewer RPFs for 17/23
11 PAHs with nonzero RPFs) to assess the shape of the RPF distribution for any given PAH, so a
12 geometric mean was not considered. Further, the range of RPF values from tumor bioassays was
13 greater than an order of magnitude for several compounds (6/23 PAHs). The variability in RPF
14 estimates is likely due to differences in study design parameters (e.g., route, species/strain,
15 exposure duration, exposure during sensitive time periods, initiation vs. complete carcinogenesis
16 protocol, tumor incidence vs. tumor multiplicity reporting) and dose response methods (modeled
17 vs. point estimates). Calculation of a weighted average was considered, but without a rationale
18 for assigning weights among study types or tumor data outcomes, using a weighting approach
19 might increase uncertainty. Several previous approaches for generating RPF values for PAHs
20 have used order of magnitude estimates (Collins et al., 1998; Malcolm and Dobson, 1994; U.S.
21 EPA, 1993; Nisbet and LaGoy, 1992, see Section 3). Providing order of magnitude estimates
22 was not considered to be superior to calculating simple means. The presentation of the
23 arithmetic mean and range of RPFs for each PAH was considered to be more transparent and
24 more reflective of the available data than an order-of-magnitude approach. Including the range
25 in the estimated RPFs was considered to be informative to the user for characterizing
26 uncertainty.

27 The range was reported as a measure of variability instead of a confidence interval on the
28 average RPF. The input data for the average RPF (bioassay RPFs of different route, species, sex,
29 and target organ, or cancer-related endpoint data across a wide variety of assays and test
30 conditions) are likely to be correlated in unquantifiable and variable ways. There may be a high
31 degree of correlation between RPFs calculated for a given PAH from dermal initiation and
32 complete carcinogenicity studies, or between RPFs calculated from incidence and multiplicity
33 data reported for the same study, but lower correlation between RPFs from dermal initiation and
34 intraperitoneal injection. In addition, there are differences between male and female target
35 organs after exposure to PAHs in newborn mouse tumor bioassays; RPFs from these datasets
36 may have little or no correlation. As a result, a confidence interval on the average RPF was not
37 calculated, but rather the range of calculated values was used as a means of expressing
38 variability.

1 All tumor bioassay RPFs (across all exposure routes, species, sexes, and including both
2 tumor incidence and tumor multiplicity RPFs) were combined to estimate the mean and range,
3 except as follows. When separate RPFs were calculated for different endpoints in the same
4 group of animals, the higher value of the two RPFs was included in the average and range, and
5 the lower value was dropped from the combined data. There were two situations in which this
6 occurred: RPFs for different target organs in the same animals, and RPFs based on incidence of
7 tumors and tumor count in the same animals. Different RPFs were calculated for liver and lung
8 tumors in male mice (females did not develop liver tumors) in newborn mouse studies that
9 reported incidences or tumor counts separately. This occurrence applied only to
10 benz[a]anthracene, chrysene, and fluoranthene tested in studies reported by LaVoie et al. (1994)
11 and Wislocki et al. (1986). Likewise, when both incidence and multiplicity RPFs were
12 calculated from the same experiment, the higher of the two values was included in the combined
13 data, and the lower value was excluded. A comparison between RPFs calculated from incidence
14 and tumor multiplicity data from the same experiment showed these values to be highly
15 correlated ($r^2 = 0.8$; see further discussion in Section 8), so RPFs from the two endpoints could
16 not be treated as independent measures of relative potency.

17

18 **7.2. CONFIDENCE RATINGS FOR FINAL RPFs**

19 Once a final RPF was derived for a given PAH, the resulting value was assigned a
20 relative confidence rating of *high*, *medium*, *low*, or *very low confidence*. The relative confidence
21 rating characterized the nature of the database upon which the final RPF was based. Confidence
22 rankings were based on the robustness of the database. For final RPFs based on tumor bioassay
23 data, confidence ratings considered both the available tumor bioassays and the size and
24 consistency of the cancer-related endpoint database. The most important factors that were
25 considered included the availability of in vivo data and whether multiple exposure routes were
26 represented. Other database characteristics that were considered important included the strength
27 of evidence of genotoxicity data and SAR information, the availability of more than one in vivo
28 study, and whether effects were evident in more than one sex or species. *Very low relative*
29 *confidence* was used to describe final RPFs based on cancer-related endpoint data only (e.g.,
30 dibenz[a,c]anthracene).

31 For RPFs of zero, the confidence rating considered both the available tumor bioassays
32 and the size and consistency of the cancer-related endpoint database. An RPF of zero was only
33 applied if the data implied *high* or *medium relative confidence*. For anthracene, phenanthrene,
34 and pyrene, it has been determined that the available data supports a practical RPF of zero. It is
35 possible that the studies available may not provide sufficient sensitivity to compare the potency
36 of the PAHs of interest to benzo[a]pyrene, and thus, the RPF of zero should not be considered a
37 characterization of the inherent carcinogenicity of anthracene, phenanthrene, or pyrene.

1 Table 7-1 shows the average RPFs based on tumor bioassay data with their associated
2 range and relative confidence ratings, and an overview of the tumor bioassay database (total
3 number of studies, exposure routes tested, species tested, sexes tested, and number of RPFs
4 derived from BMD modeling) for each PAH. Table 7-2 shows the average RPF for
5 dibenz[a,c]anthracene, the only RPF based on cancer-related endpoint data, with its associated
6 range, relative confidence rating, and an overview of the database for this compound.

7
8

Table 7-1. Final RPFs based on tumor bioassay data

PAH	Average RPF	Range of RPFs	Relative confidence	No. datasets	Exposure routes tested	Species tested	Sexes tested	RPFs based on BMD modeling
Anthanthrene	0.4	0.2–0.5	Medium	2	Dermal, lung implantation	Mouse, rat	F	1
Anthracene	0	0	Medium	1 (Negative)	Dermal	Mouse	F	NA
Benz[a]anthracene	0.2	0.02–0.4	Medium	3	Dermal, intraperitoneal	Mouse	F, M	0
Benz[b,c]aceanthrylene, 11H-	0.05	0.05	Low	1	Dermal	Mouse	F	0
Benzo[b]fluoranthene	0.5	0.1–2	High	5	Dermal, intraperitoneal, lung implantation	Mouse, rat	F, M	3
Benz[e]aceanthrylene	0.9	0.5–1	Low	2	Dermal	Mouse	F, M	2
Benzo[g,h,i]perylene	0.009	0.009	Low	1	Lung implantation	Rat	F	1
Benz[j]aceanthrylene	60	60	Low	1	Intraperitoneal	Mouse	F	0
Benzo[j]fluoranthene	0.3	0.01–1	High	5	Dermal, intraperitoneal, lung implantation	Mouse, rat	F, M	2
Benzo[k]fluoranthene	0.03	0.03–0.03	Medium	2	Dermal, lung implantation	Mouse, rat	F	2
Benz[l]aceanthrylene	5	4–7	Low	2	Dermal	Mouse	F, M	2
Chrysene	0.1	0.04–0.2	High	7	Dermal, intraperitoneal, lung implantation	Mouse, rat	F, M	3
Cyclopenta[c,d]pyrene	0.4	0.07–1	Medium	5	Dermal, intraperitoneal	Mouse	F, M	2
Cyclopenta[d,e,f]chrysene, 4H-	0.3	0.2–0.5	Low	2	Dermal	Mouse	F	1
Dibenzo[a,e]fluoranthene	0.9	0.7–1	Low	2	Dermal	Mouse	F	1
Dibenzo[a,e]pyrene	0.4	0.3–0.4	Low	2	Dermal	Mouse	F	1
Dibenz[a,h]anthracene	6	1–10	High	3	Dermal, intraperitoneal, lung implantation	Mouse, rat	F, M	1
Dibenzo[a,h]pyrene	0.9	0.9	Low	1	Dermal	Mouse	F	0
Dibenzo[a,i]pyrene	0.6	0.5–0.7	Low	2	Dermal	Mouse	F	1
Dibenzo[a,l]pyrene	30	10–40	Medium	3	Dermal, intraperitoneal	Mouse	F, M	0
Fluoranthene	0.08	0.009–0.2	Low	6	Intraperitoneal	Mouse	F, M	5
Indeno[1,2,3-c,d]pyrene	0.07	0.07	Low	1	Lung implantation	Rat	F	1
Naphtho[2,3-e]pyrene	0.3	0.3	Low	1	Dermal	Mouse	F	0
Phenanthrene	0	0	High	3 (Negative)	Dermal, intraperitoneal, lung implantation	Mouse, rat	F, M	NA
Pyrene	0	0	High	7 (Negative)	Dermal, intraperitoneal	Mouse	F, M	NA

NA = not applicable, M = male, F = female

**Table 7-2. Final RPFs based on cancer-related endpoint data
(no tumor bioassay data available)**

PAH	Average RPF	Range of RPFs	Relative confidence	Types of studies	Multiple dose studies
Dibenz[a,c]anthracene	4	0.04–50	Very low	Total = 14 studies One in vivo DNA adduct Six in vitro bacterial mutagenicity One in vitro mammalian mutagenicity One in vitro morphological/malignant transformation Three in vitro DNA damage Two in vitro DNA adducts	Total = 6 studies Four in vitro bacterial mutagenicity One in vitro DNA damage One in vitro DNA adduct

1
2

7.3. SUSCEPTIBILITY FROM EARLY LIFE EXPOSURE TO CARCINOGENS

According to the *Supplemental Guidance for Assessing Susceptibility from Early Life Exposure to Carcinogens* (U.S. EPA, 2005b), benzo[a]pyrene is carcinogenic by a mutagenic mode of action. For example, an acute dosing study using benzo[a]pyrene suggests that early-lifestage exposure would lead to an increased incidence of tumors compared with adult exposures of a similar dose and duration (EPA 2005b). Mice that were treated with benzo[a]pyrene (75 or 150 µg/g body weight intraperitoneal) within 24 hours of birth or at 15 days of age developed hepatomas at a higher incidence than similarly treated animals at 42 days of age (Vesselinovitch et al., 1975, as cited in EPA 2005b).

The *Supplemental Guidance for Assessing Susceptibility from Early-Life Exposure to Carcinogens* establishes ADAFs for three specific age groups. The current ADAFs and their age groupings are 10 for <2 years, 3 for 2 to <16 years, and 1 for 16 years and above (U.S. EPA, 2005b). The 10-fold and 3-fold adjustments in slope factor are to be combined with age specific exposure estimates when estimating cancer risks from early life (<16 years age) exposure to PAHs.

Because a mutagenic mode of action for benzo[a]pyrene carcinogenicity is sufficiently supported in laboratory animals and relevant to humans, and in the absence of chemical-specific data to evaluate differences in susceptibility, increased early-life susceptibility is assumed and the age-dependent adjustment factors (ADAFs) should be applied, as appropriate.

The 23 PAH compounds for which a RPF value was determined (see Table 7-2) are also considered to be carcinogenic by a mutagenic mode of action (see Section 2.4 for discussion of similarities in mode of action for PAHs). In the absence of chemical-specific data to evaluate differences in susceptibility, increased early-life susceptibility to the 23 PAHs (for which RPFs were derived) in this analysis is assumed and the age-dependent adjustment factors (ADAFs) should be applied, along with exposure information, as appropriate. When assessing PAH cancer risks, the RPF values should be applied to the benzo[a]pyrene risk estimates with adjustment for early life susceptibility (See Table 7-3 for example).

Table 7-3. Sample calculation of estimated cancer risk for benz[a]anthracene (BaA) with the application of ADAFs

age group	ADAF	B[a]P oral slope factor (per mg/kg-day)	adjusted B[a]P cancer risk estimate	RPF	BaA estimated cancer risk (per mg/kg-day)
0 < 2	10	7.3	73	0.2	15
2<16	3	7.3	24	0.2	4.8
16+	1	7.3	7.3	0.2	1.5

29

1
2 **8. UNCERTAINTIES ASSOCIATED WITH RPF APPROACHES**
3
4

5 A description of uncertainties and limitations is an important component of the RPF
6 approach for PAH mixtures risk assessment. Many of the general uncertainties related to
7 chemical-specific risk assessment are also applicable to the proposed RPF approach for PAHs.
8 These include issues related to selection of an appropriate animal model, low-dose and
9 interspecies extrapolation, and variability within the human population. Use of a component-
10 based approach to mixtures risk assessment leads to additional uncertainties, e.g., the lack of
11 experimental data on potential interactions among individual components within the mixture
12 (i.e., among PAHs and with other chemicals).

13 The feasibility of conducting a robust component-based approach for PAH mixtures
14 (RPF approach) was evaluated by a PAH mixtures peer consultation workshop (U.S. EPA,
15 2002). Included in the discussion was a general evaluation of U.S. EPA's *Provisional Guidance*
16 (U.S. EPA, 1993). Workshop participants highlighted the following limitations of the 1993
17 guidance:
18

- 19 (1) The approach only considered a small subset of PAHs (that is unsubstituted PAHs only,
20 no heterocyclic compounds or nitro- or alkyl-substituted PAHs);
21
22 (2) There are no human toxicity data for any individual PAH;
23
24 (3) The assumption of additivity may not be valid, and there may be interactions among
25 PAHs or between PAHs and other components of a mixture (e.g., metals);
26
27 (4) PAHs may generally have a common mode of action (i.e., mutagenicity), but multiple
28 modes of action for carcinogenesis are possible; and
29
30 (5) The estimated order of potency (EOPP) approach was limited to the oral exposure route
31 (i.e., a recommendation was made not to apply the factors to dermal and inhalation
32 exposures).
33

34 The current analysis represents a significant improvement upon the previous component-
35 based approach to PAH mixtures risk assessment. One of the most important improvements is a
36 comprehensive review of the scientific literature dating from the 1950s through 2009 on the
37 carcinogenicity and genotoxicity of PAHs. The search identified over 900 individual
38 publications for a target list of 74 PAHs that had been identified in environmental media or for
39 which toxicological data were available. Review of these publications resulted in the
40 identification of more than 600 papers that included carcinogenicity or cancer-related endpoint
41 data on at least one PAH and benzo[a]pyrene tested at the same time. Dose-response data were
42 extracted, and individual RPFs were calculated from over 300 data sets representing 50

1 individual PAHs. A weight of evidence evaluation was conducted to evaluate the evidence for
2 potential carcinogenicity of 34 of these PAHs; data were inadequate to conduct such an
3 evaluation for the remaining 16 compounds. A final RPF was derived for each PAH based on
4 tumor bioassay data (if available) or cancer-related endpoint data if no tumor bioassay RPFs
5 were available. Final RPFs were derived for 26 PAHs (see Table 7-2 in Section 7), significantly
6 increasing the number of PAHs that can be addressed through this approach. Each RPF was
7 assigned a relative confidence rating reflecting the size and diversity of the tumor bioassay or
8 cancer-related endpoint database that was used to derive the final RPF for that PAH.

9 Despite these improvements, many of the uncertainties highlighted during the 2002 peer
10 consultation workshop (U.S. EPA, 2002) also apply to the current analysis. The following
11 sections describe some specific uncertainties and limitations associated with the development
12 and use of RPFs for PAHs. The uncertainties that are specific to the approach presented herein
13 are discussed below in Sections 8.1 and 8.2. The remaining sections (8.3–8.6) discuss the
14 general uncertainties associated with a component-based approach to PAH mixtures risk
15 assessment. These include the number of PAHs included in the approach, human relevance of
16 animal data, assumptions regarding mode of action and dose additivity, and cross-route
17 extrapolation.

18 19 **8.1. UNCERTAINTY IN DOSE-RESPONSE FOR INDIVIDUAL PAHS**

20 Several uncertainties and limitations are specifically associated with the dose-response
21 assessment methodology used in this analysis to derive RPFs for PAHs. Uncertainties are
22 associated with the following decisions:

- 23 • Use of a single dose-response model for quantal or continuous data;
- 24 • Use of varying BMR levels;
- 25 • Use of tumor incidence data at the upper end of the dose-response curve (e.g., greater than
26 75% incidence) to calculate some RPFs;
- 27 • Use of tumor multiplicity data to calculate some RPFs;
- 28 • Use of single-dose point estimates to calculate some RPFs;
- 29 • Reliance on data from cancer-related endpoint studies in the absence of bioassays; and
- 30 • Use of cancer-related data from assay conditions that maximize the benzo[a]pyrene
31 response, even though these conditions were not necessarily optimal for other PAHs.
- 32
- 33
- 34
- 35
- 36
- 37
- 38
- 39

40 The decision was made to employ a single dose-response model for either quantal or
41 continuous data due to the large number of data sets that needed be analyzed from the PAH

1 database. The multistage model for incidence data and the linear model for continuous data were
2 considered to be broadly applicable to different types of data as simple curve-fitting models. In
3 some cases, the goodness-of-fit criteria indicated that the selected model did not fit the data. In
4 these cases, high-dose groups were sequentially eliminated until an adequate fit was achieved,
5 but other model structures (e.g., gamma, probit, logistic, etc.) were not considered.

6 Tumor bioassay data were modeled at a BMR of 10% (extra risk above control) in order
7 to target the low end of the dose-response curve as the point of departure for slope estimation.
8 When this was not feasible, usually because only a single dose was used for benzo[a]pyrene, an
9 attempt was made to match individual target PAH response levels to the benzo[a]pyrene
10 response chosen for the point estimate. This assumes that the shape of the dose-response curve
11 is similar for the target PAH and benzo[a]pyrene (also a necessary assumption of dose additivity)
12 and that the slope is constant across the dose-response curve. These assumptions may not hold,
13 especially in studies of tumor incidence where the point estimate benzo[a]pyrene response was
14 very high or near maximal. In many cases, the dose of benzo[a]pyrene selected as the positive
15 control produced near maximal tumor incidence in exposed animals (i.e., >75%). There is
16 uncertainty associated with comparing potency estimates at the high end of the dose-response
17 curves and using the resultant RPF to estimate risks associated with low environmental
18 exposures. The relative potency relationship between any two PAHs may be different at the low
19 end, compared with the high end, of the dose-response curves.

20 It is not clear whether relative potency values estimated at the high end of the dose-
21 response curve are reasonably predictive of relative potency at low environmental exposure
22 levels. For this reason, additional uncertainty is involved in using RPFs that are not based on a
23 BMR of 10% (especially those RPFs that are based on responses exceeding 75%) to estimate
24 risks associated with low exposures.

25 If model fit was not achieved, then a point-estimate ratio approach was used. Point
26 estimate ratios were also used for several other reasons:

- 27
- 28 (1) Only a single dose group was tested;
 - 29
 - 30 (2) When the standard deviation or number of replicates were not reported for continuous
31 data sets; or
 - 32
 - 33 (3) High-dose groups from multiple dose data sets were not usable due to a saturated tumor
34 response (>90% incidence in the lowest exposure group).
 - 35

36 The point estimate approach is most reliable when the chosen point is in the linear
37 portion of the dose-response curve. In many cases, however, especially for single-dose data, it
38 was not possible to determine whether the chosen point was in a linear or nonlinear portion of
39 the dose-response curve. The dose-response relationship observed in many studies of cancer-

1 related endpoints was nonlinear at high doses. Whenever possible, the point estimate was chosen
2 from the linear portion of the dose-response curve (i.e., before the response plateau that occurs at
3 high doses). Of 50 individual RPFs calculated from tumor incidence data, 19 were calculated
4 using a point of departure incidence $\leq 25\%$, 21 were calculated using a point of departure
5 incidence between 25 and 75%, and the remaining 10 were calculated using a point of departure
6 incidence between 75 and 90%. Thus, only 20% of the individual RPFs for tumor incidence data
7 were calculated from a point high (>75 and $<90\%$ incidence) on the dose-response curve.

8 For a few PAHs tested in older dermal bioassays, the authors reported mortality prior to
9 the appearance of the first tumor. For these data sets, an assumption was made that the number
10 of animals at risk for tumor development was equal to the total number of animals alive at the
11 time of the appearance of the first tumor. This approach ensures that the incidence is not
12 underestimated by including animals that did not survive long enough to develop tumors. As this
13 assumption applied to a small number of RPFs (specifically, individual RPFs for chrysene,
14 dibenzo[a,e]pyrene, dibenzo[a,e]fluoranthene, and dibenzo[a,h]pyrene calculated from data
15 reported by Hecht et al. [1974] and Hoffmann and Wynder [1966]), it had little impact on the
16 overall analysis. However, as the final RPFs for dibenzo[a,e]pyrene, dibenzo[a,e]fluoranthene,
17 and dibenzo[a,h]pyrene are based exclusively on the data reported by Hoffmann and Wynder
18 (1966), there is additional uncertainty in these values stemming from the occurrence of early
19 mortality.

20 RPFs were calculated for many cancer-related endpoints. Many of the studies describing
21 in vitro cancer-related endpoints provided dose-response data under varying study conditions.
22 For example, bacterial mutagenesis studies utilized multiple strains, different metabolic
23 activation processes, and varying assay systems. In order to minimize the amount of data used
24 for dose-response analysis of in vitro mutagenicity studies, and to provide a consistent basis for
25 comparing RPFs for different PAHs, the data from conditions that maximize the
26 benzo[a]pyrene response within a particular study were used for the dose-response assessment.
27 In several studies, the conditions that were optimal for benzo[a]pyrene were not necessarily
28 optimal for the target PAH. For example, the concentration of S9 mix that produced the highest
29 mutation rate for benzo[a]pyrene did not produce a maximal response for perylene or
30 cyclopenta[c,d]pyrene (Carver et al., 1986; Eisenstadt and Gold, 1978). In vitro data were only
31 used in the derivation of a single final RPF (for dibenz[a,c]anthracene; see Table 7-2); thus, the
32 uncertainties associated with the use of cancer-related endpoint data are important for
33 dibenz[a,c]anthracene but have minimal impact on the proposed RPFs for the other 25 PAHs.

34 35 **8.2. UNCERTAINTY IN SELECTING PAHs FOR INCLUSION IN RPF APPROACH**

36 One of the uncertainties highlighted by the peer consultation workshop (U.S. EPA, 2002)
37 stemmed from the fact that U.S. EPA's 1993 provisional EOPP approach only considered a small
38 subset of PAHs (i.e., unsubstituted PAHs only, no heterocyclic compounds or nitro- or alkyl-

1 substituted PAHs), and EOPPs were available for only seven PAHs. Although the present report
2 considered a larger number of PAHs than previous analyses (the toxicological literature was
3 searched for data on 74 individual PAHs identified in environmental media or for which there
4 were toxicological data), the focus of this analysis remains limited to unsubstituted PAHs with
5 three or more fused aromatic rings containing only carbon and hydrogen atoms. Thus, the RPF
6 analysis presented here does not account for the possible carcinogenicity of substituted or
7 heterocyclic PAHs that may be present in complex mixtures. This may result in an
8 underestimation of PAH mixture cancer risk.

9 Of the 74 unsubstituted PAHs with three or more aromatic rings, there were studies
10 including benzo[a]pyrene that were suitable for RPF calculation for 50 compounds. The
11 methodology for selecting PAHs for inclusion in the RPF approach from among these 50 PAHs
12 is described in Section 6. At the outset, 16 PAHs were excluded because only one or two in vitro
13 cancer-related endpoint RPFs were available. The remaining 34 were evaluated using a weight
14 of evidence approach. The primary uncertainties associated with the selection process relate to:
15

- 16 (1) The use of a weight of evidence approach that focused on tumor bioassays including
17 benzo[a]pyrene as opposed to a comprehensive cancer assessment to select PAHs for
18 inclusion in the approach; and
19
- 20 (2) The exclusion of PAHs with limited or inconclusive data.
21

22 The weight of evidence approach was used due to the large number of compounds that
23 were under consideration. The approach was structured as a decision tree that focused primarily
24 on cancer bioassays that included benzo[a]pyrene, and only considered other data (e.g., bioassays
25 that did not include benzo[a]pyrene, or cancer-related data) when cancer bioassays with
26 benzo[a]pyrene were unavailable, nonpositive, or inconsistent (see Figure 6-1). The data
27 collection for this analysis was centered on studies that included benzo[a]pyrene, as these studies
28 would be most useful for RPF calculation. Consequently, information from bioassays that
29 included benzo[a]pyrene were readily available for use in the weight of evidence determinations.
30 Bioassays that did not include benzo[a]pyrene and cancer-related endpoint data were considered
31 only when there were conflicting or negative results in the studies that did include
32 benzo[a]pyrene. There is uncertainty in drawing conclusions as to potential carcinogenicity
33 based on a narrow subset of the available database. Other elements of a more comprehensive
34 weight of evidence determination that were not considered include: cancer-related endpoint data
35 from studies that did not include benzo[a]pyrene; information on tumorigenicity of metabolites;
36 information on formation of reactive metabolites; other mechanistic data (e.g., Ah reactivity,
37 inhibition of gap junction intercellular communication, etc.); and quantitative structure-activity
38 assessment.

1 A number of PAHs (24 of 50 PAHs that had at least one RPF value) were excluded from
2 the relative potency approach because the available data were inadequate to draw a conclusion as
3 to potential carcinogenicity (see Tables 6-1 and 6-2). All of these PAHs had at least one RPF,
4 indicating that the compounds were active in at least one cancer-related endpoint assay.
5 Excluding these PAHs from the approach increases the uncertainty in assessing risks from a
6 mixture that includes them, particularly if the excluded PAHs constitute a large fraction of the
7 mixture.

8 In final, RPFs were proposed for only 26 of the 74 PAHs initially considered, because the
9 remaining 48 compounds did not have adequate data. Thus, even among the subset of PAHs
10 upon which this analysis was focused, RPFs were only recommended for only about one-third of
11 the compounds. Because only a fraction of any given PAH mixture can be evaluated using the
12 RPF approach, it will be important to provide an evaluation of the proportion of the total mixture
13 (i.e., mass fraction) that is comprised of compounds that are not considered in the component-
14 based approach as part of the uncertainty evaluation of a risk assessment using these RPFs.
15

16 **8.3. UNCERTAINTY IN DERIVING A FINAL RPF FOR EACH PAH**

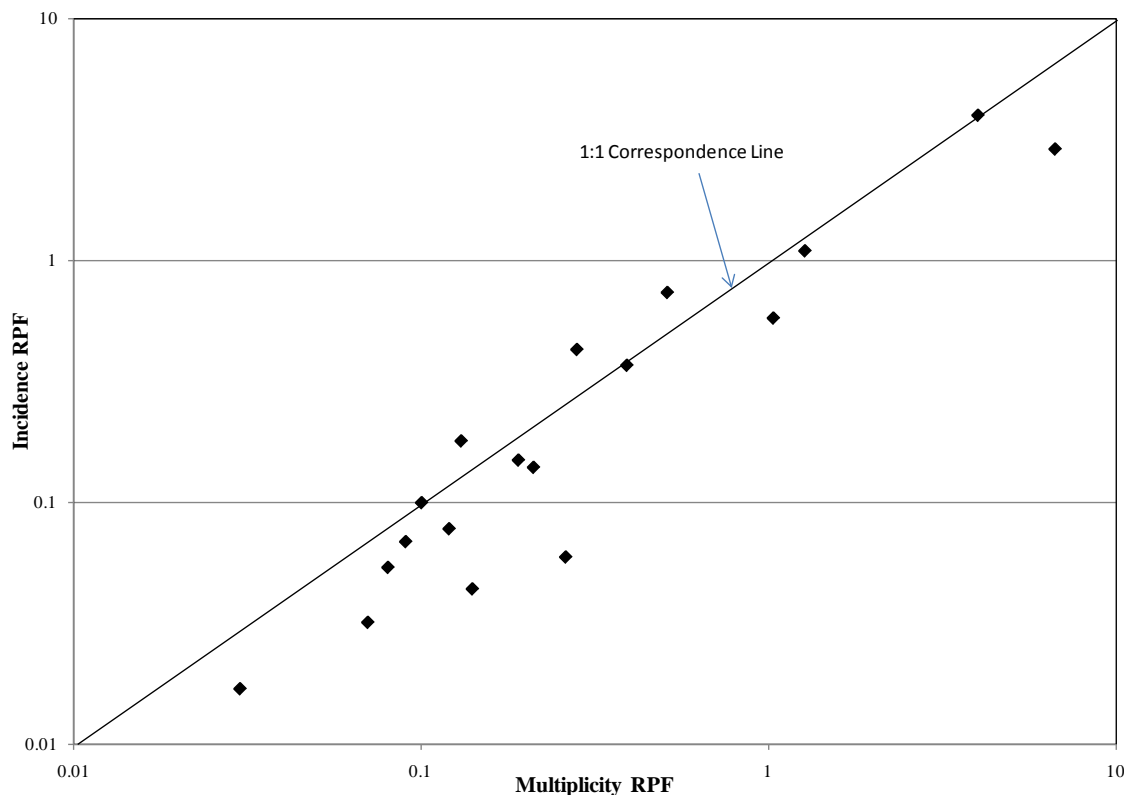
17 The methodology for deriving a final RPF value and assigning a relative confidence
18 rating is described in Section 6.1. The primary uncertainties associated with RPF derivation
19 relate to:

- 20
21 (1) Combining RPFs across multiple exposure routes, species, sexes, tumor types, and
22 studies;
- 23
24 (2) Inclusion of RPFs based on tumor multiplicity data in the combined data;
- 25
26 (3) Use of an arithmetic mean to derive final RPFs; and
- 27
28 (4) Use of cancer-related endpoint data to derive final RPFs for compounds without tumor
29 bioassay RPFs.
30

31 A variety of options were considered for prioritizing and/or combining RPFs. Appendix
32 G describes analyses that were undertaken to assess options for prioritizing RPFs. As the
33 appendix indicates, the current state of knowledge does not suggest a clear biological basis for
34 prioritizing RPFs. As a result, RPFs were combined across exposure routes, species, sexes,
35 tumor types, dose-response methods, and studies.

36 In addition to tumor incidence data, tumor multiplicity data were used to calculate RPFs.
37 In some instances, tumor incidence data could not be used for RPF derivation (e.g., the incidence
38 at the lowest dose was in the plateau region of the dose-response curve; $\geq 90\%$ incidence), while
39 tumor multiplicity data were available. The relationship between tumor incidence RPFs and
40 tumor multiplicity RPFs is not known; however, this analysis resulted in the calculation of both

1 incidence and multiplicity RPFs for a number of studies. These data were plotted, and a linear
2 regression analysis was performed to assess the correlation between these two relative potency
3 estimates. Figure 8-1 shows the results.



5
6
7 **Figure 8-1. Correlation between incidence and multiplicity RPFs.**

8
9 As shown in Figure 8-1, there is a high degree of correlation between incidence and
10 multiplicity RPFs calculated from results in the same animals. The regression analysis indicated
11 an r^2 of 0.80 for the correlation. The figure also shows that multiplicity RPFs exhibit a slight
12 tendency to underestimate the RPF from incidence data (more points are to the right of the
13 1:1 correspondence line). Nevertheless, the correlation plot and regression results provide
14 support for the use of RPFs from tumor multiplicity data when incidence data were not available
15 or not useable.

16 As the incidence and multiplicity RPFs from the same study were highly correlated, only
17 one of the two metrics was included in the combined RPFs. Specifically, the higher of the
18 incidence or multiplicity RPF from the same study was included in the average and range.
19 Consistent with the figure, the higher value was usually calculated from incidence data.

20 Final RPFs were calculated as the arithmetic mean and range of RPFs from tumor
21 bioassay data when such data were available. Presenting the average and the range provides both
22 an average and a maximum estimate for each PAH that has data from multiple studies. Other

1 options for deriving a central tendency RPF include geometric mean, median, weighted average,
 2 and order of magnitude estimates. The arithmetic mean represents a simple approach to
 3 describing the calculated RPF values available for each PAH. There were usually not enough
 4 data (≤ 3 RPFs for 17/23 PAHs with nonzero RPFs) to assess the shape of the RPF distribution
 5 for any given PAH, so a geometric mean was not considered. Calculation of a weighted average
 6 was considered, but without a clear biological rationale for assigning weights among study types
 7 or tumor data outcomes, using a weighting approach might increase uncertainty. Finally,
 8 providing order of magnitude estimates, as has been previously done for estimating RPFs for
 9 PAHs, was not considered to be superior to calculating simple means. Including the range in the
 10 estimated RPFs was considered to be informative to the user for characterizing uncertainty.

11 Cancer-related endpoint data were relied upon for the derivation of a RPF for only one
 12 PAH (dibenz[a,c]anthracene). For this compound, there were no tumor bioassay data suitable for
 13 the determination of an RPF. However, cancer-related endpoint data provided qualitative
 14 support for the finding of potential carcinogenicity for this compound (see individual narrative
 15 for this compound in Section 6.2). Although the mode of action for PAHs suggests that, in
 16 general, these endpoints may be relevant to PAH carcinogenicity, the predictive value of a
 17 positive response in these tests has not been conclusively demonstrated. Thus, there is
 18 considerable uncertainty in an RPF based on cancer-related endpoint data. Appendix G includes
 19 analysis of the correlation between average RPFs calculated from cancer-related endpoint data
 20 and tumor bioassay data. As shown in Table 8-1, and further discussed in Appendix G, cancer-
 21 related endpoint RPFs are reasonably predictive of tumor bioassay RPFs; however, the
 22 relationship between these RPFs and the relative potency of a given PAH in humans exposed via
 23 environmentally-relevant routes is unknown.

24

Table 8-1. Results of simple linear regression of log-transformed average genotoxicity RPF vs. log average tumor bioassay RPF

Genotoxicity endpoint	R ²	Slope	p-Value	n
All in vivo DNA adducts	0.64	1.24	<0.01	9
All in vivo non-bioassays	0.54	1.05	0.016	10
All non-bioassay endpoints (in vitro and in vivo)	0.43	1.03	<0.01	19
All in vitro non-bioassays	0.39	0.91	<0.01	19
All in vivo micronuclei and sister chromatid exchanges	0.58	0.83	>0.05 (NS)	6
All in vitro mutagenicity	0.047	0.39	>0.05 (NS)	17

25

26 For three PAHs (anthracene, phenanthrene, and pyrene), a final RPF of 0 was
 27 recommended. As noted earlier in Section 6, there is little quantitative difference between
 28 selecting a final RPF of 0 for a given PAH and excluding that PAH from the RPF approach.
 29 However, excluding PAHs from the RPF approach implies substantial uncertainty (these
 30 compounds could be of low or high potency), while assigning an RPF of 0 suggests lower

1 uncertainty because there is evidence to suggest that these compounds are of little or no
 2 carcinogenic potential. Nevertheless, there remains uncertainty in the RPFs for these three
 3 compounds, as all of them included one or more studies suggesting activity in cancer-related
 4 endpoint assays.

5 In the present analysis, RPFs for individual PAHs were based on data of varying quality
 6 and reproducibility, so there is additional uncertainty in risks estimated for mixtures containing
 7 differing concentrations of individual PAHs. Confidence ratings were assigned to each RPF to
 8 qualitatively characterize the uncertainty in each individual RPF. Table 8-2 shows the
 9 distribution of PAHs with RPFs of each confidence rating. As the table indicates, there are
 10 6 PAHs with RPFs of high confidence, 6 PAHs with RPFs of medium confidence, 14 PAHs with
 11 RPFs of low confidence, and 1 PAH with an RPF of very low confidence. The confidence
 12 ratings assigned to the RPFs may be used to qualitatively assess the uncertainty in a mixtures
 13 risk assessment that utilizes the RPFs. For example, if a high proportion of the total cancer risk
 14 predicted for a given mixture is attributable to benzo[a]pyrene and other PAHs with RPFs of
 15 high or medium confidence, then the confidence in the overall cancer risk assessment will be
 16 relatively high. If, in contrast, benzo[a]pyrene contributes a relatively small fraction of the
 17 overall risk, and/or the mixture consists primarily of PAHs with RPFs of low confidence, then
 18 the confidence in the overall cancer risk assessment will be correspondingly lower. Thus, it will
 19 be important to consider the relative contribution of benzo[a]pyrene to the total risk, as well as
 20 the relative confidence ratings of the RPF values for component PAHs, in the uncertainty
 21 evaluation for cancer risk assessments that employ these RPFs.

Table 8-2. PAHs with RPFs of varying confidence

High confidence RPF	Medium confidence RPF	Low confidence RPF	Very low confidence RPF
Benzo[b]fluoranthene	Anthanthrene	Benz[b,c]aceanthrylene, 11H-	Dibenz[a,c]anthracene
Benzo[j]fluoranthene	Anthracene	Benz[e]aceanthrylene	
Chrysene	Benz[a]anthracene	Benzo[g,h,i]perylene	
Dibenz[a,h]anthracene	Benzo[k]fluoranthene	Benz[j]aceanthrylene	
Phenanthrene	Cyclopenta[c,d]pyrene	Benz[l]aceanthrylene	
Pyrene	Dibenzo[a,l]pyrene	Cyclopenta[d,e,f]chrysene, 4H-	
		Dibenzo[a,e]fluoranthene	
		Dibenzo[a,e]pyrene	
		Dibenzo[a,h]pyrene	
		Dibenzo[a,i]pyrene	
		Fluoranthene	
		Indeno[1,2,3-c,d]pyrene	
		Naphtho[2,3-e]pyrene	

23

8.4. UNCERTAINTY IN USE OF ANIMAL DATA TO PREDICT HUMAN CANCER RISK

Section 4.2 briefly summarizes the epidemiology and human biomarker data related to exposure to PAH mixtures and carcinogenicity. Exposure to certain PAH mixtures is clearly associated with cancer in humans. Epidemiology studies evaluating emissions from coke production, coal gasification, aluminum production, iron and steel founding, coal tars, coal tar pitches, and soot have demonstrated associations between exposure and increased risk of lung cancer in humans (see review of Bostrom et al., 2002). Skin and scrotal cancers have been associated with exposure to coal tar, coal tar pitches, non-refined mineral oils, shale oils, and soot (Larsen and Larsen, 1998; WHO, 1998; ATSDR, 1995). While human epidemiology data may be sufficient for the purpose of quantifying the cancer risks associated with exposure to a few PAH mixtures, there are no data for many mixtures; hence the need for other approaches including surrogate-mixture and component-based approaches. As noted by the peer consultation workshop (U.S. EPA, 2002), there are no human data on cancer response to individual PAHs that could be used as the basis for, or as a supplement to, a component-based approach. As a result, the RPF approach relies on animal bioassay data to predict human cancer risk associated with individual PAHs.

The use of animal bioassays in predicting relative carcinogenic potency in humans represents a source of uncertainty in this approach. As there are no human data on cancer response to individual PAHs, including benzo[a]pyrene, there can be no quantitative evaluation of uncertainty in extrapolating from RPFs based on animal bioassay data to relative potency in humans. Possible species differences in toxicokinetics, toxicodynamics, and mode of action contribute to the uncertainty. Cancer-related endpoint data are available using human cells (e.g., epidermal keratinocytes, lymphoblasts, human epithelial cells) for the evaluation of mutagenicity, DNA adducts, unscheduled DNA synthesis, DNA damage, and clastogenicity or sister chromatid exchange frequency (see Section 4.3). Findings in human cells were generally consistent with those in other mammalian cells; however, whether this finding of consistency extends to effects in vivo, and specifically to formation of tumors, is not known.

In addition, animal bioassays use various routes of administration (e.g., intraperitoneal and subcutaneous injection), which may not be directly relevant to expected routes of exposure for humans. It is difficult to determine whether the relative potency based on animal bioassays using injection routes of exposure is predictive of relative potency that would be observed in humans exposed through environmentally relevant exposure routes (see further discussion of exposure-route uncertainties in Section 6.6). An additional source of uncertainty in the use of animal bioassay data stems from differences in the doses used in animal bioassays as compared with low doses received by humans exposed in the environment. Further discussion of this issue as it relates to dose-response modeling is provided in Section 6.1.

1 Mechanistic data, primarily obtained using benzo[a]pyrene, provide support for the
2 human relevance of PAH tumorigenicity in animals. There is evidence linking three pathways
3 activating benzo[a]pyrene to DNA-reactive agents [(+)-anti-BPDE, radical cations,
4 benzo[a]pyrene-7,8-dione, and reactive oxygen species] with key mutational events in genes
5 (p53 tumor suppressor gene and H-ras or K-ras oncogenes) that can lead to tumor initiation.
6 Results in support of mutagenic modes of action via the diol epoxide and radical cation pathways
7 include in vivo results in animals. All of these activation pathways occur in human tissues, and
8 associations have been made between spectra of mutations in the p53 tumor suppressor gene or
9 ras oncogenes induced by benzo[a]pyrene metabolites with spectra of mutations in these genes in
10 tumor tissue from benzo[a]pyrene-exposed animals or tumor tissue in humans.

11 Support for the association between the diol epoxide pathway and tumor initiation
12 includes observation that: (+)-anti-BPDE activated the H-ras-1 proto-oncogene to transform
13 NIH/3T3 cells via G→T point mutations in the 12th codon (Marshall et al., 1984); (+)-anti-
14 BPDE reacts with the p53 tumor suppressor gene at several hotspots mutated in lung cancer
15 patients (Denissenko et al., 1996; Puisieux et al., 1991); the spectra of p53 and K-ras mutations
16 in lung tumors of nonsmoking patients, chronically exposed to smoky coal emissions, was
17 consistent with (+)-anti-BPDE mutations in these genes (DeMarini et al., 2001); elevated BPDE-
18 DNA adducts have been observed in coke oven workers and chimney sweepers (Pavanello et al.,
19 1999); and the spectra of mutation in the K-ras, H-ras, and p53 genes in forestomach tumors of
20 mice fed benzo[a]pyrene in the diet for 2 years were consistent with (+)-anti-BPDE DNA
21 reactions (Culp et al., 2000).

22 Support for the radical cation pathway includes observations that depurinated adducts,
23 (expected products from reactions of benzo[a]pyrene radical cations with DNA) accounted for
24 74% of identified DNA adducts in mouse skin exposed to benzo[a]pyrene (Rogan et al., 1993)
25 and 9/13 examined tumors from mice exposed to dermal applications of benzo[a]pyrene had H-
26 ras oncogene mutations attributed to depurinated DNA adducts from benzo[a]pyrene radical
27 cations (Chakravarti et al., 1995).

28 Support for the AKR pathway includes in vitro demonstration that several types of DNA
29 damage can occur from o-quinones and reactive oxygen species (Park et al., 2006; Balu et al.,
30 2004; McCoull et al., 1999; Flowers-Geary et al., 1997, 1996), benzo[a]pyrene-7,8-dione can
31 induce mutations in the p53 tumor suppressor gene using an in vitro yeast reporter gene assay
32 (Park et al., 2008; Shen et al., 2006; Yu et al., 2002), and dominant p53 mutations induced by
33 benzo[a]pyrene,7,8-dione in this system corresponded with p53 mutation hotspots observed in
34 human lung cancer tissue (Park, 2008).

35 All three activation pathways are expected to occur in human tissues (Jiang et al., 2007),
36 and associations have been made between spectra of mutations in the p53 tumor suppressor gene
37 or ras oncogenes induced by benzo[a]pyrene metabolites with spectra of mutations in these genes
38 in tumor tissue from benzo[a]pyrene-exposed animals or humans. In particular, DeMarini et al.

1 (2001) demonstrated mutations in the p53 tumor suppressor gene and the K-ras oncogene in the
2 lung tumors of nonsmokers, whose tumors were associated with exposure to smoky coal.

3 The available information supporting these actions for benzo[a]pyrene is consistent with
4 what is known about the mode of action for other PAHs demonstrated to induce cancer in
5 animals, including cyclopenta[cd]pyrene, dibenz[a,h]anthracene, and dibenzo[a,l]pyrene
6 (Cogliano et al., 2008; Straif et al., 2005). All PAHs that have been studied require metabolic
7 activation to produce carcinogenic responses in animals and there is evidence for activation to
8 DNA reactive intermediates via several pathways (Straif et al., 2005; Xue and Warshawsky,
9 2005; WHO, 1998; Cavalieri and Rogan, 1995). For example, incubation of rat liver
10 microsomes with dibenzo[a,l]pyrene, a PAH that is more tumorigenically potent than
11 benzo[a]pyrene in mouse skin and rat mammary tissue, formed depurinated DNA adducts from
12 the radical cation pathway, as well as DNA adducts from the diol epoxide pathway (Cavalieri
13 and Rogan, 1995).

14 In summary, the relevance of animal bioassay data to the prediction of human
15 carcinogenic potency remains a significant area of uncertainty in the use of this and other
16 approaches to PAH cancer risk assessment. However, mechanistic data on benzo[a]pyrene and
17 other PAHs provide evidence that the molecular events leading to PAH-induced tumor formation
18 in animals are relevant to humans.

19 20 **8.5. UNCERTAINTY IN THE ASSUMPTIONS OF COMMON MODE OF ACTION** 21 **AND DOSE ADDITIVITY**

22 A discussion of the potential modes of action for PAH carcinogenicity is presented in
23 Section 2.4. Individual carcinogenic PAHs are linked by a common effect (i.e., tumorigenicity),
24 which may occur through multiple mechanisms. Reactive metabolites produced during
25 metabolic transformations of PAHs include diol epoxides, reactive oxygen species, radical
26 cations, and o-quinones. The formation of these metabolites is not mutually exclusive, and the
27 carcinogenic process for PAHs is likely to be related to some combination of molecular events
28 resulting from formation of several reactive species. Reactive metabolites of PAHs interact with
29 DNA to form adducts and produce DNA damage resulting in mutations in cancer-related genes
30 such as tumor suppressor genes or oncogenes. These events appear to reflect the initiation
31 potency of an individual PAH (e.g., strong mutagens are generally potent initiators) (Sjogren et
32 al., 1996). Certain PAHs exhibit promotional effects that may be related to cytotoxicity and the
33 formation of reactive oxygen species, AHR affinity and the upregulation of genes related to
34 biotransformation (i.e., induction of CYP1A1), growth, and differentiation (Bostrom et al.,
35 2002). The inhibition of gap junctional intracellular communication is also related to tumor
36 promotion by PAHs (Bostrom et al., 2002). The ability of certain PAHs to act as tumor
37 promoters as well as initiators may increase their carcinogenic potency in animal bioassays
38 conducted at high doses. Initiation potency may be more relevant to low level environmental

1 exposure in humans (Bostrum et al., 2002; Sjogren et al., 1996); however, the proposed RPF
2 approach is not unduly affected by this as it relies largely on high dose animal bioassay data for
3 selecting RPF values. This represents an uncertainty in the use of the RPF approach in
4 estimating human cancer risks from PAHs.

5 Conceptually, the uncertainty related to relative potency for initiation versus promotion
6 could be reduced by using separate RPF schemes for each part of the carcinogenic process. This
7 would require selection of indicator compounds that best represent the initiation and promotion
8 processes, and use of mechanistic data to determine relative potency for each process (i.e.,
9 mutagenicity for initiation, AhR binding or enzyme induction for promotion). There are several
10 problems with this approach, including the lack of data to support the selection of indicator
11 compounds and the complete carcinogenic nature of many PAHs (i.e., they act as both initiators
12 and promoters). The initiation and promotion potency of an individual PAH is determined by its
13 chemical structure. Some PAHs are strong mutagens, but have low affinity for the AHR (e.g.,
14 fjord region PAHs) (Bostrum et al., 2002; Sjogren et al., 1996). Other PAHs are complete
15 carcinogens, with initiating properties (i.e., mutagenesis) and AhR affinity leading to tumor
16 promotion (e.g., benzo[a]pyrene, dibenz[a,h]anthracene) (Bostrum et al., 2002; Sjogren et al.,
17 1996). Benzo[a]pyrene is considered a good indicator compound for similar PAHs with
18 complete carcinogenic activity. However, the relative potency of other PAHs, especially those
19 that act primarily via either initiation or promotion, may be over- or underestimated.

20 The absence of a clearly-defined common mode of action increases the level of
21 uncertainty associated with the use of an RPF approach. It is not possible to determine whether
22 cancer risks would be under- or overestimated by using a PAH RPF approach that assumes a
23 common mode of action. The assumption of dose additivity inherent in the RPF approach may
24 not be valid for a class of chemicals for which varying mechanisms of action occur to produce a
25 common effect. A response addition methodology would be used to assess the combined risks
26 from compounds with distinct mechanisms of action. For subgroups of PAHs with a common
27 mechanism of action, an integrated RPF with a response addition approach may be applicable
28 (U.S. EPA, 2000).

29 The assumption of additivity cannot be confirmed or refuted based on evidence available
30 in the peer-reviewed literature. The experimental data relating to dose additivity for PAH
31 carcinogenicity are discussed in Section 2.7. Based on the available data, it appears that risks
32 may be generally additive for complex mixtures, while binary mixtures can exhibit antagonism,
33 synergism, or additivity. The level of confidence in the RPF approach would be increased if
34 additivity could be demonstrated experimentally, even with simple mixtures. This remains a
35 significant uncertainty in the proposed RPF approach.

36 37 **8.6. UNCERTAINTY IN EXTRAPOLATING RPFs ACROSS EXPOSURE ROUTES**

1 The peer consultation workshop (U.S. EPA, 2002) also identified uncertainty in
2 extrapolation of RPFs across exposure routes. As with the 1993 *Provisional Guidance*, RPFs
3 proposed in this analysis are also based on in vivo bioassay data collected using various routes of
4 administration (e.g., dermal, intraperitoneal, subcutaneous, intramammillary, intramuscular, or
5 intravenous injection, as well as lung implantation, tracheal implantation, and transplacental
6 exposure after subcutaneous injection). The proposed RPF approach considers each bioassay
7 type equivalent for the purpose of determining relative potency to benzo[a]pyrene.

8 Table 8-3 compares the average RPFs (calculated from raw numbers and rounded to one
9 significant digit) based on tumor bioassay data for each PAH across exposure routes. Dermal
10 studies are shown collectively as well as separated by study type (complete or initiation).

11

Table 8-3. Comparisons among average tumor bioassay RPF values by exposure route and target organ

PAH	Dermal		Dermal complete		Dermal initiation		Intra-peritoneal		Intra-peritoneal, target organ = lung		Intra-peritoneal, target organ = liver		Lung implantation	
	N	Average	N	Average	N	Average	N	Average	N	Average	N	Average	N	Average
AA	1	0.5	1	0.5	–	–	–	–	–	–	–	–	1	0.2
AC	–	–	–	–	–	–	–	–	–	–	–	–	–	–
BaA	1	0.02	–	–	1	0.02	3	0.3 ^a	1	0.08	2	0.4	–	–
BbcAC (1,12-MBA)	1	0.05	–	–	1	0.05	–	–	–	–	–	–	–	–
BbF	3	0.3	1	0.2	2	0.4	3 ^b	1 ^c	1	0.4	1	2	1	0.1
BeAC	4	0.7	–	–	4	0.7	–	–	–	–	–	–	–	–
BghiP	–	–	–	–	–	–	–	–	–	–	–	–	1	0.009
BjAC	–	–	–	–	–	–	1	60 ^d	1	60	–	–	–	–
BjF	3	0.06	–	–	3	0.06	5 ^b	0.6 ^a	2	0.5	1	0.7	1	0.03
BkF	2	0.02	–	–	2	0.02	–	–	–	–	–	–	1	0.03
BIAC	4	4	–	–	4	4	–	–	–	–	–	–	–	–
CH	7	0.1	–	–	7	0.1	3	0.1 ^a	1	0.1	2	0.2	1	0.04
CPcdP	7	0.2	3	0.3	4	0.1	1	1 ^d	1	1	–	–	–	–
CPdefC	2	0.3	–	–	2	0.3	–	–	–	–	–	–	–	–
DBacA	–	–	–	–	–	–	–	–	–	–	–	–	–	–
DBaeF	2	0.9	1	1	1	0.7	–	–	–	–	–	–	–	–
DBaeP	2	0.4	1	0.3	1	0.4	–	–	–	–	–	–	–	–
DBahA	2	1	–	–	2	1	1	10 ^d	1	10	–	–	1	2
DBahP	1	0.9	–	–	1	0.9	–	–	–	–	–	–	–	–
DBaiP	2	0.6	1	0.7	1	0.5	–	–	–	–	–	–	–	–
DBalP	2	30	–	–	2	30	1	30 ^d	1	30	–	–	–	–
FA	–	–	–	–	–	–	10	0.08 ^a	8	0.05	2	0.2	–	–
IP	–	–	–	–	–	–	–	–	–	–	–	–	1	0.07
N23eP	1	0.3	–	–	1	0.3	–	–	–	–	–	–	–	–
PH	–	–	–	–	–	–	–	–	–	–	–	–	–	–
Pyr	–	–	–	–	–	–	–	–	–	–	–	–	–	–

^aNewborn mouse model.

^bNumber of intraperitoneal RPFs includes those calculated for combined lung and liver incidence; these are not included in numbers of RPFs with lung or liver tumors.

^cIncludes both newborn mouse and adult A/J mouse models.

^dAdult A/J mouse model.

1
2 Likewise, intraperitoneal studies are shown grouped as well as separated by target organ
3 (lung and liver). In general, the table shows that RPFs calculated from lung implantation and
4 dermal studies are similar, while RPFs calculated from intraperitoneal studies tend to be higher
5 for most compounds. However, intraperitoneal RPFs for chrysene (CH) and dibenz[a,l]pyrene
6 (DBalP) are similar to dermal RPFs for these compounds.

1 One possible explanation for the higher intraperitoneal RPFs calculated from newborn
2 mouse assays (footnoted “a” in the table) might be that the newborn mouse is more sensitive to
3 the carcinogenic action of PAHs than an adolescent or adult mouse. Likewise, the adult
4 A/J mouse is considered to be particularly sensitive to PAH lung tumorigenicity (Nesnow et al.,
5 1995), which may result in higher RPFs with this model (in Table 8-3, the intraperitoneal RPFs
6 based on the A/J mouse model are footnoted “d”). There is little information to evaluate whether
7 the newborn mouse is more or less sensitive than the adult A/J mouse model. Only one
8 compound, benzo[b]fluoranthene (BbF), had RPFs calculated from both newborn mouse and
9 adult A/J mouse models; the newborn mouse RPF was 2, while the A/J mouse RPF was 0.4. In
10 summary, it is not clear whether the intraperitoneal RPFs are higher than dermal or lung
11 implantation RPFs due to route-specific differences or animal model differences in susceptibility.

12 Cross-route extrapolation of relative potency estimates is a necessary, though uncertain,
13 aspect of the RPF approach. It is difficult to determine which of the available study types (e.g.,
14 dermal, intraperitoneal, intratracheal) is most predictive of potential risks from oral and
15 inhalation exposure in humans. In order to prioritize bioassays by exposure route, data are
16 needed on relative potencies through environmentally relevant exposure routes (oral, inhalation,
17 dermal) with relative potencies based on experimental exposure routes.

18 The inhalation RPF scheme used by the California EPA (2004) employed a hierarchy of
19 bioassay data based on exposure route (inhalation studies were preferred followed by
20 intratracheal or intrapulmonary instillation, oral administration, skin-painting, and subcutaneous
21 or intraperitoneal injection). Apart from the obvious preference for exposure routes that targeted
22 the respiratory tract (inhalation, intratracheal, intrapulmonary), the basis for prioritizing the other
23 exposure routes is not evident. Pufulete et al. (2004), who were also focused on PAHs as air
24 contaminants, suggested that the clearance of PAHs after intratracheal instillation may be similar
25 to clearance after inhalation exposure. The authors acknowledged that the high concentrations of
26 PAHs used in intratracheal and intrapulmonary instillation studies may lead to major differences
27 in pharmacokinetics, compared with inhalation exposure (Pufulete et al., 2004). Nevertheless,
28 the authors suggested that intratracheal instillation of low doses of PAHs might be an appropriate
29 surrogate exposure model for assessing relative potency of inhalation exposure. It is important
30 to note that no intratracheal instillation studies were identified in the search for studies from
31 which to calculate RPFs; thus, the information provided by Pufulete et al. (2004) is not directly
32 useful for suggesting route-specific RPFs. Pufulete et al. (2004) did not provide any specific
33 information on the relevance of intrapulmonary administration (a route used in several of the
34 bioassays used to calculate RPFs) to inhalation exposure.

35 As noted by U.S. EPA (2004), cross-route extrapolation would be contraindicated if there
36 were convincing toxicokinetic evidence that absorption of PAHs does not occur by one or more
37 exposure routes. However, available data on the absorption of PAHs indicates that, in general,
38 PAHs are readily absorbed via ingestion, inhalation, and dermal exposure routes; however, the

1 rate of uptake varies with route and other factors (e.g., matrix, intake of fats and oils) (ATSDR,
2 1995). Evidence for absorption of PAHs through these routes includes measurement of PAH-
3 DNA adducts at sites distal from the route of entry, measurement of urinary metabolites, and
4 radiotracer studies in animals (ATSDR, 1995). U.S. EPA (2004) indicated that demonstration of
5 any degree of uptake for each of the routes of interest is sufficient to allow the qualitative
6 judgment to apply the route-to-route extrapolation; thus, cross-route extrapolation is supported
7 by current data on the bioavailability of PAHs across several exposure routes.

8 U.S. EPA (1994, 2004) also noted that point-of-entry toxicity may be considered contrary
9 evidence for cross-route extrapolation. With respect to PAHs, available information on this issue
10 is both limited and mixed. The one inhalation bioassay of benzo[a]pyrene, which suffered from
11 several methodological limitations, identified the upper respiratory tract as the site of tumor
12 formation, suggesting a point-of-entry effect (Thyssen et al., 1981). Dermal bioassays of
13 benzo[a]pyrene have generally evaluated only skin tumors, precluding their use in determining
14 whether distal tumors are induced. A number of early oral cancer bioassays of benzo[a]pyrene
15 suggested that tumor formation was limited to point-of-entry sites (Rigdon and Neal, 1969, 1966;
16 Neal and Rigdon, 1967). More recent oral carcinogenicity bioassays comparing MGP residue
17 (Weyand et al., 1995) or coal tar preparations (Culp et al., 1998; Gaylor et al., 1998) with
18 benzo[a]pyrene showed significant differences in target organ distribution of tumors between
19 benzo[a]pyrene and complex mixtures of PAHs. Benzo[a]pyrene-induced tumors were observed
20 primarily at the point of contact (i.e., the forestomach), while MGP residue and coal tar produced
21 tumors in the lung, liver, forestomach, skin, and other organs. Other PAHs (e.g.,
22 benzo[c]fluorene) are proposed to be responsible for tumors at distal sites such as the lung
23 (Koganti et al., 2000; Culp et al., 1998). However, a recent gavage study in rats (Kroese et al.,
24 2001) demonstrated that oral exposure to benzo[a]pyrene could induce tumors at distal sites,
25 including the liver and auditory canal. Tissue-specific differences in metabolic activation and
26 DNA binding of PAHs may contribute to the observed differences in target organ sensitivity
27 (Weyand and Wu, 1995; Culp and Beland, 1994).

28 In summary, available information provides some support for cross-route extrapolation.
29 Absorption of PAHs across oral, inhalation, and dermal routes is evident and, while many of the
30 cancer bioassays of benzo[a]pyrene suggested tumor formation limited to the point-of-entry, at
31 least one recent study (Kroese et al., 2001) suggests that tumors may also be induced at distal
32 sites. Furthermore, there is evidence that other PAHs (e.g., benzo[c]fluorene) may induce
33 tumors at distal sites after oral exposure to coal tar preparations (Koganti et al., 2000; Culp et al.,
34 1998). However, cross-route extrapolation of RPFs is a significant source of uncertainty in this
35 approach.

36 Another approach to the issue of route-to-route extrapolation would be to prefer RPFs
37 derived from particular target tissues deemed relevant to the exposure route of interest. For
38 example, RPFs based on lung tumor data might be preferred for use in inhalation risk

1 assessment. To examine whether lung tumor RPFs were consistent across routes, RPFs
2 calculated from lung tumor potency in intraperitoneal studies (both newborn mouse and adult
3 A/J mouse models) were compared with RPFs from lung implantation studies in Table 8-3.
4 RPFs for both intraperitoneal-lung and lung implantation studies were available for only four
5 compounds (BbF, BjF, CH, and DBahA); for each of these, the intraperitoneal lung tumor RPF
6 exceeded the lung implantation RPF. No information assessing the concordance between lung
7 tumor potency after intraperitoneal administration and inhalation cancer potency was identified
8 in the literature. The use of the final RPFs derived in this analysis across all routes of exposure is
9 recommended given the information outlined above and in the absence of data to indicate
10 otherwise.

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1 **APPENDIX B. BIBLIOGRAPHY OF STUDIES WITHOUT BENZO[A]PYRENE AS A**
2 **REFERENCE COMPOUND**
3
4
5
6

Table B-1. Bioassays with and without benzo[a]pyrene by PAH

PAH	CASRN	Bioassays with benzo[a]pyrene						Bioassays without benzo[a]pyrene						
		Dermal		Intra-peritoneal	Sub-cutaneous	Oral	Other	Dermal		Intra-peritoneal	Sub-cutaneous	Oral	Other	
		Initiation	Complete					Initiation	Complete					
Acenanthrylene	202-03-09													
Acenaphthene	83-32-9													
Acenaphthylene	208-96-8													
Acephenanthrylene	201-06-9													
Acetyrene, 2,3-	25732-74-5	x	x											
Anthanthrene	191-26-4	x	x										x	
Anthracene	120-12-7	x	x		x									
Benz[a]anthracene	56-55-3	x	x	x	x	x	x							
Benz[b]anthracene	92-24-9													
Benz[b,c]aceanthrylene, 11H-	202-94-8	x												
Benz[e]aceanthrylene	199-54-2													
Benz[j]aceanthrylene	202-33-5			x										
Benz[l]aceanthrylene	211-91-6	x												
Benzacenaphthylene	76774-50-0													
Benzo[a]fluoranthene	203-33-8													
Benzo[a]fluorene	238-84-6 or 30777-18-5													
Benzo[a]perylene	191-85-5													
Benzo[b]chrysene	214-17-5													
Benzo[b]fluoranthene	205-99-2	x	x	x										x
11H-Benzo[b]fluorene	243-17-4 or 30777-19-6													
Benzo[b]perylene	197-70-6													
Benzo[c]chrysene	194-69-4													
Benzo[c]fluorene	205-12-9 or 30777-20-9													
Benzo[c]phenanthrene	195-19-7													
Benzo[e]pyrene	192-97-2	x	x											x
Benzo[g]chrysene	196-78-1													
Benzo[g,h,i]fluoranthene	203-12-3	x	x											
Benzo[g,h,i]perylene	191-24-2	x	x											x
Benzo[j]fluoranthene	205-82-3	x	x	x										x
Benzo[k]fluoranthene	207-08-9	x	x	x										x
Benzophenanthrene	65777-08-4													
Chrysene	218-01-9	x	x	x	x									x
Coronene	191-07-1		x											
Cyclopenta[c,d]pyrene	27208-37-3	x	x	x										
Cyclopenta[d,e,f]chrysene, 4H-	202-98-2	x												
Cyclopenta[d,e,f]phenanthrene, 4H-	203-64-5													
Cyclopenta[h,i]acephenanthrylene	114959-37-4													

Table B-1. Bioassays with and without benzo[a]pyrene by PAH

PAH	CASRN	Bioassays with benzo[a]pyrene						Bioassays without benzo[a]pyrene						
		Dermal		Intra-peritoneal	Sub-cutaneous	Oral	Other	Dermal		Intra-peritoneal	Sub-cutaneous	Oral	Other	
		Initiation	Complete					Initiation	Complete					
Cyclopenta[h,i]aceanthrylene	131581-33-4													
Cyclopentaphenanthrene	219-08-9													
Cyclopenteno-1,2-benzanthracene, 5,6-	7099-43-6													
Dibenz[a,c]anthracene	215-58-7	x	x					x	x	x	x			
Dibenzo[a,e]fluoranthene	5385-75-1	x	x											
Dibenz[a,j]anthracene	224-41-9													
Dibenzo[b,e]fluoranthene	2997-45-7													
Dibenzo[a,c]fluorene, 13H-	201-65-0													
Dibenzo[a,e]pyrene	192-65-4	x	x					x						
Dibenzo[a,f]fluoranthene	203-11-2	x	x					x	x					
Dibenzo[a,g]fluorene, 13H-	207-83-0								x					
Dibenz[a,h]anthracene	53-70-3	x	x	x	x	x	x	x	x	x	x	x	x	x
Dibenzo[a,h]pyrene	189-64-0	x	x					x		x				
Dibenzo[a,i]pyrene	189-55-9	x	x					x	x	x	x			x
Dibenzo[a,l]pyrene	191-30-0	x	x	x				x	x	x	x	x		
Dibenzo[e,l]pyrene	192-51-8	x	x											
Dibenzo[h,rst]pentaphene	192-47-2													
Dibenz[k,mno]acephenanthrylene	153043-81-3													
Dibenzo[j,mno]acephenanthrylene	153043-82-4													
Dihydroaceanthrylene, 1,2-	641-48-5													
Fluoranthene	206-44-0	x	x	x						x				x
Fluorene	86-73-7													
Indeno[1,2,3-c,d]fluoranthene	193-43-1													
Indeno[1,2,3-c,d]pyrene	193-39-5	x	x	x										x
Naphtho[1,2-b]fluoranthene	111189-32-3													
Naphtho[1,2,3,-mno]acephenanthrylene	113779-16-1													
Naphtho[2,1-a]fluoranthene	203-20-3													
Naphtho[2,3-a]pyrene	196-42-9													
Naphtho[2,3-e]pyrene	193-09-9	x	x											
Pentacene	135-48-8													
Pentaphene	222-93-5													
Perylene	198-55-0	x	x											
Phenanthrene	85-01-8	x	x	x	x	x	x							x
Picene	213-46-7													
Pyrene	129-00-0	x	x	x										x
Tribenzofluoranthene 3,4-10,11-12,13-	13579-05-0													
Triphenylene	217-59-4		x											

PAHs in bold have at least one bioassay without BaP and no bioassays with BaP.

B.1. BIBLIOGRAPHY OF BIOASSAYS WITHOUT BENZO[A]PYRENE

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B.2. BIBLIOGRAPHY OF STUDIES ON CANCER-RELATED ENDPOINTS WITHOUT BENZO[A]PYRENE

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APPENDIX C. DOSE-RESPONSE DATA FOR POTENCY CALCULATIONS

Table C-1. Dermal bioassays: dose response information for incidence data

Record number	Reference	Study type	Species	Tumor type	PAH	Sex	Dose of PAH	Dose units	Number of animals with tumors	Number of animals in group	% tumor-bearing animals	Results of authors' statistical analysis (<i>p</i> -value)	Fisher's exact <i>p</i> -value	Cochran-Armitage trend test <i>p</i> -value	Comments
<i>Complete carcinogenicity studies</i>															
600	Habs et al., 1980	Complete	Mice	Sum of Papilloma, carcinoma, sarcoma	Acetone	F	0	pg/animal	0	35	0%				
					DMSO	F	0	pg/animal	0	36	0%				
					BaP	F	1.7	pg/animal	8	34	24%		1.92×10^{-3}		
					BaP	F	2.8	pg/animal	24	35	69%		1.67×10^{-11}		
					BaP	F	4.6	pg/animal	22	36	61%		2.1×10^{-9}	2.15×10^{-9}	
					BbF	F	3.4	pg/animal	2	38	5%		2.6×10^{-1}		
					BbF	F	5.6	pg/animal	5	34	15%		2.3×10^{-2}		
					BbF	F	9.2	pg/animal	20	37	54%		3.7×10^{-8}	1.33×10^{-9}	
					BjF	F	3.4	pg/animal	1	38	3%		5.1×10^{-1}		
					BjF	F	5.6	pg/animal	1	35	3%		4.9×10^{-1}		
					BjF	F	9.2	pg/animal	2	38	5%		2.6×10^{-1}	1.77×10^{-1}	
					BkF	F	3.4	pg/animal	1	39	3%		5.2×10^{-1}		
					BkF	F	5.6	pg/animal	0	38	0%				
					BkF	F	9.2	pg/animal	0	38	0%				
					CPcdP	F	1.7	pg/animal	0	34	0%				
					CPcdP	F	6.5	pg/animal	0	35	0%				
					CPcdP	F	27.2	pg/animal	3	38	8%		1.3×10^{-1}	6.36×10^{-2}	
					IP	F	3.4	pg/animal	1	36	3%		5×10^{-1}		
					IP	F	5.6	pg/animal	0	37	0%				
					IP	F	9.2	pg/animal	0	37	0%				
					CO	F	5.6	pg/animal	1	39	3%		0.52		
					CO	F	15	pg/animal	2	40	5%		0.27	1.83×10^{-1}	
13640	Cavalieri et al., 1983	Complete	Mice	Papilloma, adenoma, carcinoma	Acetone	F	0	nmol	0	29	0%				
					BaP	F	2.2	nmol	2	30	7%		0.25		
					BaP	F	6.6	nmol	2	28	7%		0.24		

Table C-1. Dermal bioassays: dose response information for incidence data

Record number	Reference	Study type	Species	Tumor type	PAH	Sex	Dose of PAH	Dose units	Number of animals with tumors	Number of animals in group	% tumor-bearing animals	Results of authors' statistical analysis (p-value)	Fisher's exact p-value	Cochran-Armitage trend test p-value	Comments
					BaP	F	20	nmol	17	30	57%		4.32×10^{-7}	2.96×10^{-1}	
					CPcdP	F	22.2	nmol	2	29	7%		0.25		
					CPcdP	F	66.6	nmol	2	29	7%		0.25		
					CPcdP	F	200	nmol	24	29	83%		9.25×10^{-12}	1.39×10^{-16}	
620	Hoffmann and Wynder 1966	Complete	Mice	Papillomas	Dioxane	F	0	%	0	20	0%				
					BaP	F	0.05	%	17	20	85%		1.28×10^{-8}		
					BaP	F	0.1	%	19	20	95%		1.5×10^{-10}	8.7×10^{-10}	
					DBaeP	F	0.05	%	16	30	53%		3.31×10^{-5}		
					DBaeP	F	0.1	%	9	17	53%		1.95×10^{-4}	5.69×10^{-4}	
					DBahP	F	0.05	%	16	17	94%		1.32×10^{-9}		
					DBahP	F	0.1	%	15	18	83%		5.27×10^{-8}	1.29×10^{-7}	
					DBaiP	F	0.05	%	16	19	84%		2.58×10^{-9}		
					DBaiP	F	0.1	%	16	19	84%		2.58×10^{-9}	9.81×10^{-8}	
					DBaeF	F	0.05	%	17	19	89%		3.35×10^{-9}		
					DBaeF	F	0.1	%	18	19	95%		3.05×10^{-10}	1.13×10^{-9}	
17660	Cavalieri et al., 1977	Complete	Mice	Papilloma, kerato-acanthoma, carcinoma	Acetone	F	0	μmol/ap- plication	0	29	0%				
					BaP	F	0.396	μmol/ap- plication	30	38	79%		4.9×10^{-12}		
					DBahP	F	0.396	μmol/ap- plication	35	39	90%		2.98×10^{-15}		
					AA	F	0.396	μmol/ap- plication	18	38	47%		3.59×10^{-6}		
					BaA	F	0.396	μmol/ap- plication	1	39	3%		0.66		

Table C-1. Dermal bioassays: dose response information for incidence data

Record number	Reference	Study type	Species	Tumor type	PAH	Sex	Dose of PAH	Dose units	Number of animals with tumors	Number of animals in group	% tumor-bearing animals	Results of authors' statistical analysis (p-value)	Fisher's exact p-value	Cochran-Armitage trend test p-value	Comments
<i>Initiation studies</i>															
630	LaVoie et al., 1982	Initiation	Mice	Primarily squamous cell Papilloma	Acetone/TP A	F	0	µg/mouse	0	20	0%				
					BaP	F	30	µg/mouse	17	20	85%		1.28×10^{-8}		
					BbF	F	10	µg/mouse	9	20	45%		6.14×10^{-4}		
					BbF	F	30	µg/mouse	12	20	60%		2.25×10^{-5}		
					BbF	F	100	µg/mouse	16	20	80%		7.7×10^{-8}	1.46×10^{-5}	
					BjF	F	30	µg/mouse	6	20	30%		0.01		
					BjF	F	100	µg/mouse	11	20	55%		7.27×10^{-5}		
					BjF	F	1,000	µg/mouse	19	20	95%		1.52×10^{-10}	4.67×10^{-8}	
					BkF	F	30	µg/mouse	1	20	5%		0.01		
					BkF	F	100	µg/mouse	5	20	25%		0.02		
					BkF	F	1,000	µg/mouse	15	20	75%		3.85×10^{-7}	4.51×10^{-9}	
18570	Hecht et al., 1974	Initiation	Mice	Unspecified	Acetone	F	0	mg/	0	20	0%				No. surviving not reported for controls; initial group size used here
					BaP	F	0.05	mg/	6	20	30%		0.01		
					CH	F	1	mg/	11	19	58%		4.51×10^{-5}		
24800	Nesnow et al., 1984	Initiation	Mice	Papilloma	Acetone	M	0	nmol	0	20	0%				Data at 30 wks
					Acetone	F	0	nmol	1	19	5%				
					BaP	M	200	nmol	13	18	67%	<0.005			
					BaP	F	200	nmol	10	19	53%	<0.005			
					BIAC	M	50	nmol	12	20	60%	<0.005			
					BIAC	M	100	nmol	16	17	94%	<0.005			
					BIAC	M	250	nmol	21	21	100%	<0.005			
					BIAC	M	500	nmol	16	16	100%	<0.005			
					BIAC	M	1,000	nmol	19	20	95%	<0.005			

Table C-1. Dermal bioassays: dose response information for incidence data

Record number	Reference	Study type	Species	Tumor type	PAH	Sex	Dose of PAH	Dose units	Number of animals with tumors	Number of animals in group	% tumor-bearing animals	Results of authors' statistical analysis (p-value)	Fisher's exact p-value	Cochran-Armitage trend test p-value	Comments
					BIAC	F	50	nmol	13	20	65%	<0.005			
					BIAC	F	100	nmol	18	19	95%	<0.005			
					BIAC	F	250	nmol	19	21	91%	<0.005			
					BIAC	F	500	nmol	20	21	95%	<0.005			
					BIAC	F	1,000	nmol	20	20	100%	<0.005			
					BeAC	M	50	nmol	4	20	20%				
					BeAC	M	100	nmol	4	20	20%				
					BeAC	M	250	nmol	12	20	60%	<0.005			
					BeAC	M	500	nmol	15	20	75%	<0.005			
					BeAC	M	1,000	nmol	16	18	89%	<0.005			
					BeAC	F	50	nmol	4	20	20%				
					BeAC	F	100	nmol	7	19	37%	<0.005			
					BeAC	F	250	nmol	10	19	53%	<0.005			
					BeAC	F	500	nmol	8	18	44%	<0.005			
					BeAC	F	1,000	nmol	18	20	90%	<0.005			
21420	Slaga et al., 1980	Initiation	Mouse	Papilloma	Control	F	0	nmoles	2	30	6%				Different controls used for each chemical except DBacA and BeP
					Control	F	0	µmoles	3	30	10%				
					Control	F	0	µmoles	3	30	10%				
					Control	F	0	nmoles	2	29	6%				
					Control POOLED	F	0	nmoles	10	119	8%				
					BaP	F	200	nmoles	20	30	67%		1.41×10^{-6}		
					BeP	F	2,000	nmoles	5	29	17%		0.33		
					CH	F	2,000	nmoles	21	29	73%		8.38×10^{-7}		
					DBacA	F	2,000	nmoles	8	28	27%		0.07		
					DBahA	F	100	nmoles	15	29	50%		3.52×10^{-6}		

Table C-1. Dermal bioassays: dose response information for incidence data

Record number	Reference	Study type	Species	Tumor type	PAH	Sex	Dose of PAH	Dose units	Number of animals with tumors	Number of animals in group	% tumor-bearing animals	Results of authors' statistical analysis (p-value)	Fisher's exact p-value	Cochran-Armitage trend test p-value	Comments
15640	Raveh et al., 1982	Initiation	Mice	Papilloma	Control	F	0	µg	3	29	10%				
					BaP	F	10	µg	17	29	58%		1.11×10^{-4}		
					BaP	F	25	µg	21	28	76%		5.96×10^{-7}		
					BaP	F	50	µg	24	28	87%		5.43×10^{-9}		
					BaP	F	100	µg	27	27	100%		5.50×10^{-13}		
					BaP	F	200	µg	26	26	100%		1.03×10^{-12}	2.78×10^{-10}	
					CPcdP	F	10	µg	3	30	11%		0.65		
					CPcdP	F	100	µg	11	29	39%		0.01		
					CPcdP	F	200	µg	16	28	57%		1.90×10^{-4}	2.75×10^{-6}	
620	Hoffmann and Wynder 1966	Initiation	Mice	Papillomas	Croton oil control	F	0	mg/mouse	2	30	7%				
					BaP	F	0.25	mg/mouse	24	30	80%		3.80×10^{-9}		
					DBaeF	F	0.25	mg/mouse	18	30	60%		9.40×10^{-6}		
					DBaeP	F	0.25	mg/mouse	10	27	37%		0.006		
					DBelP	F	0.25	mg/mouse	0	29	0%		0.25		
					DBahP	F	0.25	mg/mouse	21	29	72%		1.30×10^{-7}		
					DBaiP	F	0.25	mg/mouse	12	30	40%		0.002		
					AA	F	0.25	mg/mouse	2	29	7%		0.68		
					BghiP	F	0.25	mg/mouse	2	27	7%		0.65		
					N23eP	F	0.25	mg/mouse	9	30	30%		0.02		
					IP	F	0.25	mg/mouse	5	30	17%		0.21		
13650	Cavalieri et al., 1981b	Initiation	Mice	Papilloma	Acetone/TPA	F	0	µmol	3	29	10%				
					BaP	F	0.2	µmol	12	30	40%		0.009		
					CPcdP	F	0.2	µmol	1	30	3%		0.29		
					CPcdP	F	0.6	µmol	9	29	31%		0.05		
					CPcdP	F	1.8	µmol	6	29	21%		0.24	0.14	
					ACEP	F	0.2	µmol	0	30	0%		0.11		
					ACEP	F	0.6	µmol	1	30	3%		0.29		

Table C-1. Dermal bioassays: dose response information for incidence data

Record number	Reference	Study type	Species	Tumor type	PAH	Sex	Dose of PAH	Dose units	Number of animals with tumors	Number of animals in group	% tumor-bearing animals	Results of authors' statistical analysis (<i>p</i> -value)	Fisher's exact <i>p</i> -value	Cochran-Armitage trend test <i>p</i> -value	Comments
					ACEP	F	1.8	μmol	4	30	13%		0.52	0.18	
15700	Rice et al., 1988	Initiation	Mice	Unspecified	Acetone	F	0	μmol	1	20	5%				
					BaP	F	0.1	μmol	17	19	89%	<0.005			
					CH	F	0.15	μmol	5	20	25%	<0.05			
					CH	F	0.5	μmol	18	20	90%	<0.005			
					CH	F	1.5	μmol	19	20	95%	<0.005		6.39 × 10 ⁻⁹	
					CPdefC (4,5-MC)	F	0.15	μmol	13	20	65%	<0.005			
					CPdefC (4,5-MC)	F	0.5	μmol	19	19	100%	<0.005			
					CPdefC (4,5-MC)	F	1.5	μmol	19	19	100%	<0.005		1.90 × 10 ⁻⁷	
					BbcAC (1,12-MBA)	F	0.5	μmol	15	20	75%	<0.005			
					BbcAC (1,12-MBA)	F	2	μmol	18	20	90%	<0.005			
					BbcAC (1,12-MBA)	F	4	μmol	18	20	90%	<0.005		3.03 × 10 ⁻⁶	

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Table C-2. Dermal bioassays: dose-response information for tumor multiplicity

Record number	Reference	Study type	Species	Tumor type	PAH	Sex	Dose of PAH	Dose units	Number of animals with tumors	Number of animals in group	% Tumor-bearing animals	Results of authors' statistical analysis (p-value)	Results of SRC statistical analysis Fisher's exact p-value	Mean number tumors/animal	Comments
<i>Complete carcinogenicity</i>															
13640	Cavalieri et al., 1983	Complete	Mice	Papilloma, adenoma, carcinoma	Acetone	F	0	nmol	0	29	0%			0	Number tumors per animal at risk calculated
					BaP	F	2.2	nmol	2	30	7%		>0.05	0.07	
					BaP	F	6.6	nmol	2	28	7%		>0.05	0.07	
					BaP	F	20	nmol	17	30	57%		<0.001	1.5	
					CPcdP	F	22.2	nmol	2	29	7%		>0.05	0.07	
					CPcdP	F	66.6	nmol	2	29	7%		>0.05	0.07	
					CPcdP	F	200	nmol	24	29	83%		<0.001	2.45	
13650	Cavalieri et al., 1981b	Complete	Mice	Primarily squamous cell carcinoma	Acetone	US	0	µmol/application	0	30	0%			0	Number tumors per animal at risk calculated
					BaP	US	0.2	µmol/application	30	30	100%		<0.001	1.5	
					CPcdP	US	0.2	µmol/application	17	30	57%		<0.001	0.8	
					CPcdP	US	0.6	µmol/application	11	30	37%		<0.001	0.5	
					CPcdP	US	1.8	µmol/application	7	30	23%		0.0053	0.4	
					ACEP	US	0.2	µmol/application	0	30	0%		>0.05	0	
					ACEP	US	0.6	µmol/application	1	30	3%		>0.05	0.03	
					ACEP	US	1.8	µmol/application	1	30	3%		>0.05	0.03	
<i>Initiation</i>															
630	LaVoie et al., 1982	Initiation	Mice	Primarily squamous cell papilloma	Acetone/TPA	F	0	µg/mouse	0	20	0%			0	
					BaP	F	30	µg/mouse	17	20	85%		<0.001	4.9	
					BbF	F	10	µg/mouse	9	20	45%		<0.001	0.9	
					BbF	F	30	µg/mouse	12	20	60%		<0.001	2.3	

Table C-2. Dermal bioassays: dose-response information for tumor multiplicity

Record number	Reference	Study type	Species	Tumor type	PAH	Sex	Dose of PAH	Dose units	Number of animals with tumors	Number of animals in group	% Tumor-bearing animals	Results of authors' statistical analysis (<i>p</i> -value)	Results of SRC statistical analysis Fisher's exact <i>p</i> -value	Mean number tumors/animal	Comments
					BbF	F	100	µg/mouse	16	20	80%		<0.001	7.1	
					BjF	F	30	µg/mouse	6	20	30%		0.01	0.6	
					BjF	F	100	µg/mouse	11	20	55%		<0.001	1.9	
					BjF	F	1,000	µg/mouse	19	20	95%		<0.001	7.2	
					BkF	F	30	µg/mouse	1	20	5%		>0.05	0.1	
					BkF	F	100	µg/mouse	5	20	25%		0.02	0.4	
					BkF	F	1,000	µg/mouse	15	20	75%		<0.001	2.8	
18570	Hecht et al., 1974	Initiation	Mice	Unspecified	Acetone	F	0	mg/animal	0	20	0%			0	Number surviving not reported for controls; initial group size used here. Number tumors per animal at risk calculated
					BaP	F	0.05	mg/animal	6	20	30%		0.01	0.5	
					CH	F	1	mg/animal	11	19	61%		<0.001	1	
21420	Slaga et al., 1980	Initiation	Mouse	Papilloma	Control	F	0	nmol	2	29	6%			0.1	Different controls used for each chemical except DBacA and BeP
					Control	F	0	nmol	3	30	10%			0.2	
					Control	F	0	nmol	3	30	10%			0.1	
					Control	F	0	nmol	2	29	6%			0.1	
					Control POOLE D	F	0	nmol	10	119	8%			0.13	
					BaP	F	200	nmol	20	30	67%		<0.001	2.2	
					BeP	F	2,000	nmol	5	29	17%		>0.05	0.2	
					CH	F	2,000	nmol	21	29	73%		<0.001	1.6	
					DBacA	F	2,000	nmol	8	28	27%		>0.05	0.5	
					DBahA	F	100	nmol	15	29	50%		<0.001	1.4	
15640	Raveh et al., 1982	Initiation	Mice	Papilloma	Control	F	0	µg	3	29	10%			0.2	
					BaP	F	10	µg	17	29	58%		<0.001	1.3	
					BaP	F	25	µg	21	28	76%		<0.001	3.8	
					BaP	F	50	µg	24	28	87%		<0.001	6.2	
					BaP	F	100	µg	27	27	100%		<0.001	8.8	

Table C-2. Dermal bioassays: dose-response information for tumor multiplicity

Record number	Reference	Study type	Species	Tumor type	PAH	Sex	Dose of PAH	Dose units	Number of animals with tumors	Number of animals in group	% Tumor-bearing animals	Results of authors' statistical analysis (<i>p</i> -value)	Results of SRC statistical analysis Fisher's exact <i>p</i> -value	Mean number tumors/ animal	Comments
					BaP	F	200	µg	26	26	100%		<0.001	9	
					CPcdP	F	10	µg	3	30	11%		>0.05	0.1	
					CPcdP	F	100	µg	11	29	39%		0.01	0.4	
					CPcdP	F	200	µg	16	28	57%		<0.001	0.9	
13650	Cavalieri et al., 1981	Initiation	Mice	Papilloma	Acetone/TPA	F	0	µmol	3	29	10%			0.14	
					BaP	F	0.2	µmol	12	30	40%		0.009	1.2	
					CPcdP	F	0.2	µmol	1	30	3%		>0.05	0.03	
					CPcdP	F	0.6	µmol	9	29	31%		0.05	0.31	
					CPcdP	F	1.8	µmol	6	29	21%		>0.05	0.31	
					ACEP	F	0.2	µmol	0	30	0%		>0.05	0	
					ACEP	F	0.6	µmol	1	30	3%		>0.05	0.03	
					ACEP	F	1.8	µmol	4	30	13%		>0.05	0.13	
21410	Slaga et al., 1978	Initiation	Mice	Papillomas	Acetone/TPA	F	0	µmol	2	29	6%			0.1	
					BaP	F	0.2	µmol	27	29	92%		<0.001	5.3	
					BaA	F	2	µmol	17	30	57%		<0.001	1.2	
16310	Weyand et al., 1992	Initiation	Mice	Unspecified	Acetone	US	0	µmol	1	21	5%			0.05	
					BaP	US	0.01	µmol	24	24	100%	<0.01		4.08	
					BjF	US	0.3	µmol	11	20	55%	<0.01		1.75	
					BjF	US	1	µmol	21	24	88%	<0.01		4.08	
					BjF	US	2	µmol	24	24	100%	<0.01		7.17	
10200	El-Bayoumy et al., 1982	Initiation	Mice	Primarily squamous cell papilloma	Acetone	F	0	mg/mouse	1	20	5%			0.1	
					BaP	F	0.05	mg/mouse	18	20	90%	<0.01		7.1	
					CH	F	1	mg/mouse	20	20	100%	<0.01		7.7	
					Pery	F	1	mg/mouse	1	20	5%			0.1	
					Pyr	F	1	mg/mouse	4	20	20%			0.2	
24300	Rice et al., 1985	Initiation	Mice	Unspecified	Acetone	F	0	mg/mouse	2	25	8%			0.12	Mean number of tumors/ animal digitally estimated from Figure 2 and rounded to even number tumors
					BaP	F	0.3	mg/mouse	24	25	96%		<0.001	8.04	

Table C-2. Dermal bioassays: dose-response information for tumor multiplicity

Record number	Reference	Study type	Species	Tumor type	PAH	Sex	Dose of PAH	Dose units	Number of animals with tumors	Number of animals in group	% Tumor-bearing animals	Results of authors' statistical analysis (<i>p</i> -value)	Results of SRC statistical analysis Fisher's exact <i>p</i> -value	Mean number tumors/animal	Comments
					CH	F	1	mg/mouse	23	25	92%		<0.001	5	
					CPdefC	F	1	mg/mouse	24	24	100%		<0.001	5.63	Number reported in text
13660	Cavalieri et al., 1991	Initiation	Mice	Primarily papilloma	Acetone	F	0	nmol	0	24	0%			0	16 Wk experiment
					BaP	F	33.3	nmol	10	23	43%		<0.001	0.65	
					BaP	F	100	nmol	17	24	71%		<0.001	2.75	
					BaP	F	300	nmol	21	23	91%		<0.001	5.22	
					DBaP	F	33.3	nmol	23	24	96%		<0.001	6.75	
					DBaP	F	100	nmol	22	24	92%		<0.001	7.92	
					DBaP	F	300	nmol	24	24	100%		<0.001	8.5	
13660	Cavalieri et al., 1991	Initiation	Mice	Primarily papilloma	Acetone	F	0	nmol	0	24	0%			0	27 Wk experiment
					BaP	F	4	nmol	1	24	4%		>0.05	0.04	
					BaP	F	20	nmol	10	24	42%		<0.001	0.75	
					BaP	F	100	nmol	22	24	92%		<0.001	3.42	
					DBaP	F	4	nmol	22	24	92%		<0.001	6.96	
					DBaP	F	20	nmol	20	24	83%		<0.001	5.29	
					DBaP	F	100	nmol	20	24	83%		<0.001	3.29	
16440	Wood et al., 1980	Initiation	Mice	Papillomas	Acetone	F	0	µmol	3	30	10%			0.1	Number tumors per animal at risk calculated
					BaP	F	0.1	µmol	20	30	68%	<0.05		2	
					BaP	F	0.4	µmol	22	30	73%	<0.05		4.6	
					Pyr	F	0.1	µmol	4	30	14%	>0.05		0.14	
					Pyr	F	0.4	µmol	3	30	10%	>0.05		0.1	
					CPcdP	F	0.1	µmol	3	30	10%	>0.05		0.1	
					CPcdP	F	0.4	µmol	6	30	21%	>0.05		0.29	
18680	Hoffmann et al., 1972	Initiation	Mice	Papillomas	Acetone	F	0	mg	1	30	3%			0.03	
					BaP	F	0.05	mg	19	29	66%		<0.001	2.3	
					FA	F	1	mg	1	29	3%		>0.05	0.03	
24800	Nesnow et al., 1984	Initiation	Mice	Papillomas	Acetone	M	0	nmol	0	20	0%			0	
					Acetone	F	0	nmol	1	19	5%			0.05	
					BaP	M	200	nmol	12	18	67%		<0.001	1.4	
					BaP	F	200	nmol	10	19	53%		0.0015	1.5	
					BeAC	M	50	nmol	4	20	20%		>0.05	0.25	

Table C-2. Dermal bioassays: dose-response information for tumor multiplicity

Record number	Reference	Study type	Species	Tumor type	PAH	Sex	Dose of PAH	Dose units	Number of animals with tumors	Number of animals in group	% Tumor-bearing animals	Results of authors' statistical analysis (<i>p</i> -value)	Results of SRC statistical analysis Fisher's exact <i>p</i> -value	Mean number tumors/animal	Comments
					BeAC	F	50	nmol	4	20	20%		>0.05	0.25	
					BeAC	M	100	nmol	4	20	20%		>0.05	0.4	
					BeAC	F	100	nmol	7	19	37%		0.02	0.53	
					BeAC	M	250	nmol	12	20	60%		<0.001	1.3	
					BeAC	F	250	nmol	10	19	53%		<0.001	1.1	
					BeAC	M	500	nmol	15	20	75%		<0.001	1.9	
					BeAC	F	500	nmol	8	18	44%		0.007	1.2	
					BeAC	M	1,000	nmol	16	18	89%		<0.001	3.1	
					BeAC	F	1,000	nmol	18	20	90%		<0.001	2.2	
					BIAC	M	50	nmol	12	20	60%		<0.001	1.4	
					BIAC	F	50	nmol	13	20	65%		<0.001	1.1	
					BIAC	M	100	nmol	16	17	94%		<0.001	2.3	
					BIAC	F	100	nmol	18	19	95%		<0.001	3.1	
					BIAC	M	250	nmol	21	21	100%		<0.001	8.4	
					BIAC	F	250	nmol	19	21	91%		<0.001	4.7	
					BIAC	M	500	nmol	16	16	100%		<0.001	10.8	
					BIAC	F	500	nmol	20	21	95%		<0.001	6.6	
					BIAC	M	1,000	nmol	19	20	95%		<0.001	8.7	
					BIAC	F	1,000	nmol	20	20	100%		<0.001	10.8	

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2

Table C-3. Intraperitoneal bioassays: dose response information for incidence data

Record number	Reference	Species	Exposure route	Target organ	Tumor type	PAH	Sex	Dose	Dose units	No. of animals with tumors	No. of animals in group	% Tumor bearing animals	Results of authors' statistical analysis (p-value)	SRC Statistical Analysis		Comments
														Fisher's Exact p-value	Cochran-Armitage trend test p-value	
17560	Busby et al., 1989	Mice	Intra-peritoneal	Lung	Adenoma + adenocarcinoma	DMSO	M	0	µg (total)	13	91	0.14				Stats reported for combined M and F only for each dose and treatment compared to control not individual sexes.
				Lung	Adenoma + adenocarcinoma	DMSO	F	0	µg (total)	7	101	0.07				
				Lung	Adenoma + adenocarcinoma	BaP	M	59.5	µg (total)	13	28	0.46		7.2×10^{-4}		
				Lung	Adenoma + adenocarcinoma	BaP	F	59.5	µg (total)	19	27	0.70		3.96×10^{-11}		
				Lung	Adenoma + adenocarcinoma	Pyr	M	86.1	µg (total)	4	23	0.17		4.60×10^{-1}		
				Lung	Adenoma + adenocarcinoma	Pyr	F	86.1	µg (total)	1	28	0.04		4.50×10^{-1}		
				Lung	Adenoma + adenocarcinoma	Pyr	M	1,750	µg (total)	2	27	0.07		2.80×10^{-1}	3.13×10^{-1}	
				Lung	Adenoma + adenocarcinoma	Pyr	F	1,750	µg (total)	3	26	0.12		3.30×10^{-1}	3.50×10^{-1}	
				Lung	Adenoma + adenocarcinoma	FA	M	257.6	µg (total)	5	23	0.22		2.80×10^{-4}		
				Lung	Adenoma + adenocarcinoma	FA	F	257.6	µg (total)	9	29	0.31		1.65×10^{-3}		

Table C-3. Intraperitoneal bioassays: dose response information for incidence data

Record number	Reference	Species	Exposure route	Target organ	Tumor type	PAH	Sex	Dose	Dose units	No. of animals with tumors	No. of animals in group	% Tumor bearing animals	Results of authors' statistical analysis (<i>p</i> -value)	SRC Statistical Analysis		Comments
														Fisher's Exact <i>p</i> -value	Cochran-Armitage trend test <i>p</i> -value	
				Lung	Adenoma + adenocarcinoma	CH	M	6.3	µg (total)	2	27	0.07		2.80×10^{-1}		
				Lung	Adenoma + adenocarcinoma	CH	F	6.3	µg (total)	3	29	0.10		3.90×10^{-1}		
				Lung	Adenoma + adenocarcinoma	CH	M	210	µg (total)	3	20	0.15		5.85×10^{-1}	8.03×10^{-1}	
				Lung	Adenoma + adenocarcinoma	CH	F	210	µg (total)	0	29	0.00		1.60×10^{-1}	1.28×10^{-1}	
640	LaVoie et al., 1987	Mice	Intra-peritoneal	Lung	Adenoma	DMSO	M	0	µmol/mouse	0	17	0				
				Lung	Adenoma	DMSO	F	0	µmol/mouse	0	18	0				
				Lung	Adenoma	BaP	M	1.1	µmol/mouse	14	17	0.82	<0.005			
				Lung	Adenoma	BaP	F	1.1	µmol/mouse	9	14	0.64				
				Lung	Adenoma	BbF	M	0.5	µmol/mouse	2	15	0.13	>0.05			
				Lung	Adenoma	BbF	F	0.5	µmol/mouse	3	17	0.18	>0.05			
				Lung	Adenoma	BjF	M	1.1	µmol/mouse	11	21	0.52	<0.005			
				Lung	Adenoma	BjF	F	1.1	µmol/mouse	4	18	0.22	<0.05			
				Lung	Adenoma	BkF	M	2.1	µmol/mouse	1	16	0.06	>0.05			
				Lung	Adenoma	BkF	F	2.1	µmol/mouse	3	18	0.17	>0.05			

Table C-3. Intraperitoneal bioassays: dose response information for incidence data

Record number	Reference	Species	Exposure route	Target organ	Tumor type	PAH	Sex	Dose	Dose units	No. of animals with tumors	No. of animals in group	% Tumor bearing animals	Results of authors' statistical analysis (<i>p</i> -value)	SRC Statistical Analysis		Comments
														Fisher's Exact <i>p</i> -value	Cochran-Armitage trend test <i>p</i> -value	
				Lung	Adenoma	IP	M	2.1	μmol/mouse	1	11	0.09				
				Lung	Adenoma	IP	F	2.1	μmol/mouse	0	9	0				
				Liver	Adenoma + hepatoma	DMSO	M	0	μmol/mouse	1	17	0.06				Adenoma and hepatoma also reported separately. None of animals surviving 35 wks
				Liver	Adenoma + hepatoma	DMSO	F	0	μmol/mouse	0	18	0				
				Liver	Adenoma + hepatoma	BaP	M	1.1	μmol/mouse	13	17	0.76	<0.005			
				Liver	Adenoma + hepatoma	BaP	F	1.1	μmol/mouse	0	14	0				
				Liver	Adenoma + hepatoma	BbF	M	0.5	μmol/mouse	8	15	0.53	<0.005			
				Liver	Adenoma + hepatoma	BbF	F	0.5	μmol/mouse	0	17	0				
				Liver	Adenoma + hepatoma	BjF	M	1.1	μmol/mouse	11	21	0.52	<0.005			
				Liver	Adenoma + hepatoma	BjF	F	1.1	μmol/mouse	0	18	0				
				Liver	Adenoma + hepatoma	BkF	M	2.1	μmol/mouse	3	16	0.19	>0.05			
				Liver	Adenoma + hepatoma	BkF	F	2.1	μmol/mouse	0	18	0				
				Liver	Adenoma + hepatoma	IP	M	2.1	μmol/mouse	0	11	0				
				Liver	Adenoma + hepatoma	IP	F	2.1	μmol/mouse	0	9	0				
				Liver or lung	Adenoma + hepatoma	DMSO	M	0	μmol/mouse	1	17	0.06				

Table C-3. Intraperitoneal bioassays: dose response information for incidence data

Record number	Reference	Species	Exposure route	Target organ	Tumor type	PAH	Sex	Dose	Dose units	No. of animals with tumors	No. of animals in group	% Tumor bearing animals	Results of authors' statistical analysis (<i>p</i> -value)	SRC Statistical Analysis		Comments
														Fisher's Exact <i>p</i> -value	Cochran-Armitage trend test <i>p</i> -value	
				Liver or lung	Adenoma + hepatoma	DMSO	F	0	μmol/mouse	0	18	0				
				Liver or lung	Adenoma + hepatoma	BaP	M	1.1	μmol/mouse	13	17	0.76				
				Liver or lung	Adenoma + hepatoma	BaP	F	1.1	μmol/mouse	9	14	0.64				
				Liver or lung	Adenoma + hepatoma	BbF	M	0.5	μmol/mouse	8	15	0.53				
				Liver or lung	Adenoma + hepatoma	BbF	F	0.5	μmol/mouse	3	17	0.18				
				Liver or lung	Adenoma + hepatoma	BjF	M	1.1	μmol/mouse	17	21	0.81				
				Liver or lung	Adenoma + hepatoma	BjF	F	1.1	μmol/mouse	4	18	0.22				
				Liver or lung	Adenoma + hepatoma	BkF	M	2.1	μmol/mouse	3	16	0.19				
				Liver or lung	Adenoma + hepatoma	BkF	F	2.1	μmol/mouse	3	18	0.17				
				Liver or lung	Adenoma + hepatoma	IP	M	2.1	μmol/mouse	1	11	0.09				
				Liver or lung	Adenoma + hepatoma	IP	F	2.1	μmol/mouse	0	9	0				
7510	LaVoie et al., 1994	mice	intraperitoneal	Lung	Total	DMSO	M	0	μmol/mouse	5	29	0.17				Surv to 1 yr
				Lung	Total	DMSO	F	0	μmol/mouse	4	34	0.12				
				Lung	Total	BaP	M	1.1	μmol/mouse	24	32	0.75	<0.001			
				Lung	Total	BaP	F	1.1	μmol/mouse	17	20	0.85	<0.001			
				Lung	Total	FA	M	3.46	μmol/mouse	12	28	0.43	<0.05			

Table C-3. Intraperitoneal bioassays: dose response information for incidence data

Record number	Reference	Species	Exposure route	Target organ	Tumor type	PAH	Sex	Dose	Dose units	No. of animals with tumors	No. of animals in group	% Tumor bearing animals	Results of authors' statistical analysis (<i>p</i> -value)	SRC Statistical Analysis		Comments
														Fisher's Exact <i>p</i> -value	Cochran-Armitage trend test <i>p</i> -value	
				Lung	Total	FA	F	3.46	μmol/mouse	11	31	0.35	<0.05			
				Lung	Total	FA	M	17.3	μmol/mouse	11	17	0.65	<0.005		2.84×10^{-3}	
				Lung	Total	FA	F	17.3	μmol/mouse	25	29	0.86	<0.001		2.18×10^{-9}	
				Liver	Foci + adenoma + carcinoma	DMSO	M	0	μmol/mouse	5	29	0.17				Foci, adenomas, carcinomas also reported separately
				Liver	Foci + adenoma + carcinoma	DMSO	F	0	μmol/mouse	2	34	0.06				
				Liver	Foci + adenoma + carcinoma	BaP	M	1.1	μmol/mouse	27	32	0.84	<0.001			
				Liver	Foci + adenoma + carcinoma	BaP	F	1.1	μmol/mouse	2	20	0.10	>0.05			
				Liver	Foci + adenoma + carcinoma	FA	M	3.46	μmol/mouse	18	28	0.64	<0.001			
				Liver	Foci + adenoma + carcinoma	FA	F	3.46	μmol/mouse	0	31	0				
				Liver	Foci + adenoma + carcinoma	FA	M	17.3	μmol/mouse	17	17	1.00	<0.001		5.10×10^{-7}	
				Liver	Foci + adenoma + carcinoma	FA	F	17.3	μmol/mouse	2	29	0.07			5.47×10^{-1}	
22510	Wislocki et al., 1986	Mice	Intra-peritoneal	Liver	Adenoma + carcinoma	DMSO	M	0	nmol	2	28	0.07				Animals surviving thru weaning

Table C-3. Intraperitoneal bioassays: dose response information for incidence data

Record number	Reference	Species	Exposure route	Target organ	Tumor type	PAH	Sex	Dose	Dose units	No. of animals with tumors	No. of animals in group	% Tumor bearing animals	Results of authors' statistical analysis (<i>p</i> -value)	SRC Statistical Analysis		Comments
														Fisher's Exact <i>p</i> -value	Cochran-Armitage trend test <i>p</i> -value	
				Liver	Adenoma + carcinoma	DMSO	F	0	nmol	0	31	0				0
				Liver	Adenoma + carcinoma	DMSO	M	0	nmol	5	45	0.11				This group started 10 wks after other groups
				Liver	Adenoma + carcinoma	DMSO	F	0	nmol	0	34	0				This group started 10 wks after other groups
				Liver	Adenoma + carcinoma	DMSO POOL-ED	M	0	nmol	7	73	0.09				
				Liver	Adenoma + carcinoma	DMSO POOL-ED	F	0	nmol	0	65	0				
				Liver	Adenoma + carcinoma	BaP	M	560	nmol	18	37	0.49	<0.05			
				Liver	Adenoma + carcinoma	BaP	F	560	nmol	0	27	0				
				Liver	Adenoma + carcinoma	CH	M	700	nmol	10	35	0.29	<0.05			This group started 10 wks after other groups
				Liver	Adenoma + carcinoma	CH	F	700	nmol	0	33	0				This group started 10 wks after other groups
				Liver	Adenoma + carcinoma	CH	M	2,800	nmol	14	34	0.41	<0.05		6×10^{-3}	
				Liver	Adenoma + carcinoma	CH	F	2,800	nmol	0	24	0			1	
				Liver	Adenoma + carcinoma	BaA	M	2,800	nmol	31	39	0.79	<0.05			
				Liver	Adenoma + carcinoma	BaA	F	2,800	nmol	0	32	0				

Table C-3. Intraperitoneal bioassays: dose response information for incidence data

Record number	Reference	Species	Exposure route	Target organ	Tumor type	PAH	Sex	Dose	Dose units	No. of animals with tumors	No. of animals in group	% Tumor bearing animals	Results of authors' statistical analysis (<i>p</i> -value)	SRC Statistical Analysis		Comments
														Fisher's Exact <i>p</i> -value	Cochran-Armitage trend test <i>p</i> -value	
				Lung	Adenoma + carcinoma	DMSO	M	0	nmol	1	28	0.04				
				Lung	Adenoma + carcinoma	DMSO	F	0	nmol	0	31	0				
				Lung	Adenoma + carcinoma	DMSO	M	0	nmol	4	45	0.09				This group started 10 wks after other groups
				Lung	Adenoma + carcinoma	DMSO	F	0	nmol	2	34	0.06				This group started 10 wks after other groups
				Lung	Adenoma + carcinoma	DMSO pooled	M	0	nmol	5	73	0.07				
				Lung	Adenoma + carcinoma	DMSO pooled	F	0	nmol	2	65	0.03				
				Lung	Adenoma + carcinoma	BaP	M	560	nmol	13	37	0.35	<0.05			
				Lung	Adenoma + carcinoma	BaP	F	560	nmol	13	27	0.48	<0.05			
				Lung	Adenoma + carcinoma	CH	M	700	nmol	6	35	0.17				This group started 10 wks after other groups
				Lung	Adenoma + carcinoma	CH	F	700	nmol	2	33	0.06				This group started 10 wks after other groups
				Lung	Adenoma + carcinoma	CH	M	2,800	nmol	7	34	0.21	<0.05		1.1×10^{-1}	
				Lung	Adenoma + carcinoma	CH	F	2,800	nmol	1	24	0.04			5.6×10^{-1}	
				Lung	Adenoma + carcinoma	BaA	M	2,800	nmol	6	39	0.15				
				Lung	Adenoma + carcinoma	BaA	F	2,800	nmol	6	32	0.19	<0.05			

Table C-3. Intraperitoneal bioassays: dose response information for incidence data

Record number	Reference	Species	Exposure route	Target organ	Tumor type	PAH	Sex	Dose	Dose units	No. of animals with tumors	No. of animals in group	% Tumor bearing animals	Results of authors' statistical analysis (<i>p</i> -value)	SRC Statistical Analysis		Comments
														Fisher's Exact <i>p</i> -value	Cochran-Armitage trend test <i>p</i> -value	
				Lymphatic system	Lymphoma	DMSO	M	0	nmol	1	28	0.04				
				Lymphatic system	Lymphoma	DMSO	F	0	nmol	1	31	0.03				
				Lymphatic system	Lymphoma	DMSO	M	0	nmol	0	45	0				This group started 10 wks after other groups
				Lymphatic system	Lymphoma	DMSO	F	0	nmol	0	34	0				This group started 10 wks after other groups
				Lymphatic system	Lymphoma	BaP	M	560	nmol	2	37	0.05				
				Lymphatic system	Lymphoma	BaP	F	560	nmol	4	27	0.15				
				Lymphatic system	Lymphoma	CH	M	700	nmol	3	35	0.09	<0.05			This group started 10 wks after other groups
				Lymphatic system	Lymphoma	CH	F	700	nmol	1	33	0.03				This group started 10 wks after other groups
				Lymphatic system	Lymphoma	CH	M	2,800	nmol	0	34	0			2.2×10^{-1}	
				Lymphatic system	Lymphoma	CH	F	2,800	nmol	0	24	0			3.9×10^{-1}	
				Lymphatic system	Adenoma + carcinoma	BaA	M	2,800	nmol	1	39	0.03				

Table C-3. Intraperitoneal bioassays: dose response information for incidence data

Record number	Reference	Species	Exposure route	Target organ	Tumor type	PAH	Sex	Dose	Dose units	No. of animals with tumors	No. of animals in group	% Tumor bearing animals	Results of authors' statistical analysis (<i>p</i> -value)	SRC Statistical Analysis		Comments
														Fisher's Exact <i>p</i> -value	Cochran-Armitage trend test <i>p</i> -value	
				Lymphatic system	Adenoma + carcinoma	BaA	F	2,800	nmol	3	32	0.09				

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Table C-4. Intraperitoneal bioassays: dose-response information for tumor multiplicity

Record number	Reference	Species	Exposure route	Target organ	Tumor type	PAH	Sex	Dose	Dose units	Number of animals with tumors	Number of animals in group	% Tumor-bearing animals	Results of authors' statistical analysis (p-value)	Results of SRC statistical analysis (Fisher's exact p-value)	Mean number tumors/animal	Std deviation of mean	Results of SRC statistical analysis (t-test p-value)	Comments
17560	Busby et al., 1989	Mice	Intra-peritoneal	Lung	Adenoma+adenocarcinoma	DMSO	M	0	µg (total)	13	91	0.14			0.15	0.38		Stats reported for combined M and F
				Lung	Adenoma+adenocarcinoma	DMSO	F	0	µg (total)	7	101	0.07			0.08	0.30		
				Lung	Adenoma+adenocarcinoma	BaP	M	59.5	µg (total)	13	28	0.46		<0.001	0.71	1.01	<0.001	
				Lung	Adenoma+adenocarcinoma	BaP	F	59.5	µg (total)	19	27	0.70		<0.001	1.19	1.09	<0.001	
				Lung	Adenoma+adenocarcinoma	Pyr	M	86.1	µg (total)	4	23	0.17		>0.05	0.17	0.38	>0.05	
				Lung	Adenoma+adenocarcinoma	Pyr	F	86.1	µg (total)	1	28	0.04		>0.05	0.04	0.21	>0.05	
				Lung	Adenoma+adenocarcinoma	Pyr	M	1,750	µg (total)	2	27	0.07		>0.05	0.07	0.26	>0.05	
				Lung	Adenoma+adenocarcinoma	Pyr	F	1,750	µg (total)	3	26	0.12		>0.05	0.12	0.31	>0.05	
				Lung	Adenoma+adenocarcinoma	FA	M	257.6	µg (total)	5	23	0.22		>0.05	0.22	0.43	>0.05	
				Lung	Adenoma+adenocarcinoma	FA	F	257.6	µg (total)	9	29	0.31		0.00165	0.41	0.70	<0.0001	
				Lung	Adenoma+adenocarcinoma	CH	M	6.3	µg (total)	2	27	0.07		>0.05	0.07	0.26	>0.05	
				Lung	Adenoma+adenocarcinoma	CH	F	6.3	µg (total)	3	29	0.10		>0.05	0.1	0.32	>0.05	
				Lung	Adenoma+adenocarcinoma	CH	M	210	µg (total)	3	20	0.15		>0.05	0.15	0.36	>0.05	
				Lung	Adenoma+adenocarcinoma	CH	F	210	µg (total)	0	29	0.00		>0.05	0	0.00	>0.05	
7510	LaVoie et al., 1994	Mice	intra-peritoneal	Lung	Total	DMSO	M	0	µmol/mouse	5	29	0.17			0.17			Survived to 1 yr
				Lung	Total	DMSO	F	0	µmol/mouse	4	34	0.12			0.15			
				Lung	Total	BaP	M	1.1	µmol/mouse	24	32	0.75	<0.001		4.3			
				Lung	Total	BaP	F	1.1	µmol/mouse	17	20	0.85	<0.001		3.55			
				Lung	Total	FA	M	3.46	µmol/mouse	12	28	0.43	<0.05		0.64			

Table C-4. Intraperitoneal bioassays: dose-response information for tumor multiplicity

Record number	Reference	Species	Exposure route	Target organ	Tumor type	PAH	Sex	Dose	Dose units	Number of animals with tumors	Number of animals in group	% Tumor-bearing animals	Results of authors' statistical analysis (p-value)	Results of SRC statistical analysis (Fisher's exact p-value)	Mean number tumors/animal	Std deviation of mean	Results of SRC statistical analysis (t-test p-value)	Comments
				Lung	Total	FA	F	3.46	µmol/mouse	11	31	0.35	<0.05		0.35			
				Lung	Total	FA	M	17.3	µmol/mouse	11	17	0.65	<0.005		1.12			
				Lung	Total	FA	F	17.3	µmol/mouse	25	29	0.86	<0.001		2.45			
				Liver	Foci + adenoma + carcinoma	DMSO	M	0	µmol/mouse	5	29	0.17			0.41			
				Liver	Foci + adenoma + carcinoma	DMSO	F	0	µmol/mouse	2	34	0.06			0.06			Tumor count appears to be error in publication
				Liver	Foci + adenoma + carcinoma	BaP	M	1.1	µmol/mouse	27	32	0.84	<0.001		4.53			
				Liver	Foci + adenoma + carcinoma	BaP	F	1.1	µmol/mouse	2	20	0.10	>0.05		0.3			
				Liver	Foci + adenoma + carcinoma	FA	M	3.46	µmol/mouse	18	28	0.64	<0.001		1.86			
				Liver	Foci + adenoma + carcinoma	FA	F	3.46	µmol/mouse	0	31	0			0			
				Liver	Foci + adenoma + carcinoma	FA	M	17.3	µmol/mouse	17	17	1.00	<0.001		7.53			
				Liver	Foci + adenoma + carcinoma	FA	F	17.3	µmol/mouse	2	29	0.07			0.07			
22510	Wislocki et al., 1986	Mice	intra-peritoneal	Liver	Adenoma + carcinoma	DMSO	M	0	nmol	2	28	0.07			0.07			Animals surviving thru weaning
				Liver	Adenoma + carcinoma	DMSO	F	0	nmol	0	31	0			0			
				Liver	Adenoma + carcinoma	DMSO	M	0	nmol	5	45	0.11			0.11			This group started 10 wks after other groups
				Liver	Adenoma + carcinoma	DMSO	F	0	nmol	0	34	0			0			This group started 10 wks after other groups
				Liver	Adenoma + carcinoma	DMSO POOLE D	M	0	nmol	7	73	0.09			0.096			
				Liver	Adenoma + carcinoma	DMSO POOLE D	F	0	nmol	0	65	0			0			

Table C-4. Intraperitoneal bioassays: dose-response information for tumor multiplicity

Record number	Reference	Species	Exposure route	Target organ	Tumor type	PAH	Sex	Dose	Dose units	Number of animals with tumors	Number of animals in group	% Tumor-bearing animals	Results of authors' statistical analysis (p-value)	Results of SRC statistical analysis (Fisher's exact p-value)	Mean number tumors/animal	Std deviation of mean	Results of SRC statistical analysis (t-test p-value)	Comments
				Liver	Adenoma + carcinoma	BaP	M	560	nmol	18	37	0.49	<0.05		1.46			
				Liver	Adenoma + carcinoma	BaP	F	560	nmol	0	27	0	>0.05		0			
				Liver	Adenoma + carcinoma	Pyr	M	200	nmol	0	29	0	>0.05		0			
				Liver	Adenoma + carcinoma	Pyr	F	200	nmol	0	31	0	>0.05		0			
				Liver	Adenoma + carcinoma	Pyr	M	700	nmol	3	25	0.12	>0.05		0.12			This group started 10 wks after other groups
				Liver	Adenoma + carcinoma	Pyr	F	700	nmol	0	49	0	>0.05		0			This group started 10 wks after other groups
				Liver	Adenoma + carcinoma	Pyr	M	2,800	nmol	3	14	0.21	>0.05		0.21			
				Liver	Adenoma + carcinoma	Pyr	F	2,800	nmol	0	18	0	>0.05		0			
				Liver	Adenoma + carcinoma	CH	M	700	nmol	10	35	0.29	<0.05		0.86			This group started 10 wks after other groups
				Liver	Adenoma + carcinoma	CH	F	700	nmol	0	33	0	>0.05		0			This group started 10 wks after other groups
				Liver	Adenoma + carcinoma	CH	M	2,800	nmol	14	34	0.41	<0.05		1.03			
				Liver	Adenoma + carcinoma	CH	F	2,800	nmol	0	24	0	>0.05		0			
				Liver	Adenoma + carcinoma	BaA	M	2,800	nmol	31	39	0.79	<0.05		2.38			
				Liver	Adenoma + carcinoma	BaA	F	2,800	nmol	0	32	0	>0.05		0			
13610	Busby et al., 1984	mice	intra-peritoneal	Lung	Adenoma + carcinoma	DMSO	M	0	mg (total)	1	27	0.04			0.04	0.21		
				Lung	Adenoma + carcinoma	DMSO	F	0	mg (total)	4	28	0.14			0.14	0.37		
				Lung	Adenoma + carcinoma	BaP	M	0.28	mg (total)	24	25	0.96		<0.001	4.32	3.5	<0.001	
				Lung	Adenoma + carcinoma	BaP	F	0.28	mg (total)	25	27	0.93		<0.001	3.7	3.10	<0.001	
				Lung	Adenoma + carcinoma	BaP	M	1.4	mg (total)	16	20	0.80		<0.001	10.15	13.0	<0.001	No model fit
				Lung	Adenoma + carcinoma	BaP	F	1.4	mg (total)	21	24	0.88		<0.001	4.25	4.70	<0.001	No model fit
				Lung	Adenoma + carcinoma	FA	M	0.7	mg (total)	7	31	0.23		0.0412	0.29	0.84	>0.05	

Table C-4. Intraperitoneal bioassays: dose-response information for tumor multiplicity

Record number	Reference	Species	Exposure route	Target organ	Tumor type	PAH	Sex	Dose	Dose units	Number of animals with tumors	Number of animals in group	% Tumor-bearing animals	Results of authors' statistical analysis (p-value)	Results of SRC statistical analysis (Fisher's exact p-value)	Mean number tumors/animal	Std deviation of mean	Results of SRC statistical analysis (t-test p-value)	Comments
				Lung	Adenoma + carcinoma	FA	F	0.7	mg (total)	3	20	0.15		>0.05	0.15	0.49	>0.05	
				Lung	Adenoma + carcinoma	FA	M	3.5	mg (total)	20	27	0.74		<0.001	1.52	1.66	<0.001	Nonconstant variance
				Lung	Adenoma + carcinoma	FA	F	3.5	mg (total)	8	21	0.38		>0.05	0.52	0.82	0.0343	NS incidence; nonconstant variance
24590	Nesnow et al., 1998b	mice	intra-peritoneal	Lung	NS	Control	M	0	mg/kg	6	20	0.30			0.53	0.72		Pooled controls from data provided by Nesnow.
				Lung	NS	BaP	M	5	mg/kg	6	20	0.30		>0.05	0.45	0.80	>0.05	
				Lung	NS	BaP	M	10	mg/kg	7	17	0.41		>0.05	0.53	0.78	>0.05	
				Lung	NS	BaP	M	50	mg/kg	19	19	1.00		<0.001	4.37	2.74	<0.001	
				Lung	NS	BaP	M	100	mg/kg	16	16	1.00		0.0018	12.75	4.28	<0.001	
				Lung	NS	BaP	M	200	mg/kg	24	24	1.00		<0.001	32.96	10.23	<0.001	
				Lung	NS	BbF	M	10	mg/kg	9	18	0.50		>0.05	0.67	0.75	>0.05	
				Lung	NS	BbF	M	50	mg/kg	16	20	0.80		>0.05	2.00	1.82	0.0022	NS incidence
				Lung	NS	BbF	M	100	mg/kg	20	20	1.00		<0.001	5.30	3.21	<0.001	
				Lung	NS	BbF	M	200	mg/kg	19	19	1.00		<0.001	6.95	3.52	<0.001	
				Lung	NS	CPcdP	M	10	mg/kg	8	20	0.40		>0.05	0.55	0.80	>0.05	
				Lung	NS	CPcdP	M	50	mg/kg	20	20	1.00		<0.001	4.75	2.12	<0.001	
				Lung	NS	CPcdP	M	100	mg/kg	19	19	1.00		<0.001	32.21	15.15	<0.001	
				Lung	NS	CPcdP	M	200	mg/kg	19	19	1.00		<0.001	97.68	28.68	<0.001	
				Lung	NS	DBahA	M	1.25	mg/kg	12	18	0.67		>0.05	1.44	1.46	0.0229	NS incidence
				Lung	NS	DBahA	M	2.5	mg/kg	18	19	0.95		0.0053	3.05	1.90	<0.001	
				Lung	NS	DBahA	M	5	mg/kg	20	20	1.00		<0.001	13.05	5.99	<0.001	
				Lung	NS	DBahA	M	10	mg/kg	19	19	1.00		<0.001	32.16	10.78	<0.001	
24590	Nesnow et al., 1998b	mice	intra-peritoneal	Lung	NS	Control	M	0	mg/kg	15	30	0.50			0.67	0.80		
				Lung	NS	DBaP	M	0.3	mg/kg	13	33	0.39		>0.05	0.42	0.56	>0.05	
				Lung	NS	DBaP	M	1.5	mg/kg	33	34	0.97		<0.001	4.32	2.86	<0.001	
				Lung	NS	DBaP	M	3	mg/kg	35	35	1.00		<0.001	7.49	3.79	<0.001	
				Lung	NS	DBaP	M	6	mg/kg	30	30	1.00		<0.001	16.10	7.26	<0.001	
11190	Mass et al., 1993	mice	intra-peritoneal	Lung	NS	Control	US	0	mg/kg	19	34	0.56			0.85	0.9		
					NS	BaP	US	20	mg/kg	10	16	0.63		>0.05	1	1	>0.05	
					NS	BaP	US	50	mg/kg	15	16	0.94		0.0065	3.9	2.9	<0.001	
					NS	BaP	US	100	mg/kg	14	14	1.00		0.0017	5.9	3.3	<0.001	
					NS	BjAC	US	20	mg/kg	12	12	1.00		0.0036	60.3	14.6	<0.001	
					NS	BjAC	US	50	mg/kg	13	13	1.00		0.0025	140.6	21.5	<0.001	
					NS	BjAC	US	100	mg/kg	14	14	1.00		0.0017	97.6	28.2	<0.001	

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Table C-5. Lung implantation bioassays: dose response information for incidence data

Record number	Reference	Species	Target organ	Tumor type	PAH	Dose	Dose units	Number of animals with tumors	Number of animals in group	% Tumor-bearing animals	SRC statistical analysis		Comments
											Fisher's exact <i>p</i> -value	Cochran-Armitage trend test <i>p</i> -value	
17940	Deutsch-Wenzel et al., 1983	Rat	Lung	Epidermoid carcinoma	Untreated control	0	mg	0	35	0.00			
					Vehicle control	0	mg	0	35	0.00			
					BaP	0.1	mg	4	35	0.11	5.70×10^{-2}		
					BaP	0.3	mg	21	35	0.60	6.02×10^{-9}		
					BaP	1	mg	33	35	0.94	5.93×10^{-18}	1.57×10^{-17}	
					BbF	0.1	mg	0	35	0.00			
					BbF	0.3	mg	1	35	0.03	5×10^{-1}		
					BbF	1	mg	9	35	0.26	1×10^{-3}	5.12×10^{-7}	
					BeP	0.2	mg	0	35	0.00			
					BeP	1	mg	0	30	0.00			
					BeP	5	mg	1	35	0.03	5×10^{-1}	9.49×10^{-2}	
					BjF	0.2	mg	1	35	0.03	5×10^{-1}		
					BjF	1	mg	3	35	0.09	1.2×10^{-1}		
					BjF	5	mg	18	35	0.51	1.96×10^{-7}	1.28×10^{-11}	
					BkF	0.16	mg	0	35	0.00			
					BkF	0.83	mg	3	31	0.10	1×10^{-1}		
					BkF	4.15	mg	12	27	0.44	8.05×10^{-6}	1.03×10^{-9}	
					IP	0.16	mg	3	35	0.09	1.20×10^{-1}		
					IP	0.83	mg	8	35	0.23	2×10^{-3}		
					IP	4.15	mg	21	35	0.60	6.02×10^{-9}	2.09×10^{-10}	
					AA	0.16	mg	1	35	0.03	5×10^{-1}		
					AA	0.83	mg	19	35	0.54	6.4×10^{-8}	1.13×10^{-10}	
					BghiP	0.16	mg	0	35	0.00			
					BghiP	0.83	mg	1	35	0.03	1.2×10^{-1}		
					BghiP	4.15	mg	4	34	0.12	5.4×10^{-2}	2.47×10^{-3}	
			Lung	Pleomorphic sarcoma	Untreated control	0	mg	0	35	0.00			
					Vehicle control	0	mg	0	35	0.00			

Table C-5. Lung implantation bioassays: dose response information for incidence data

Record number	Reference	Species	Target organ	Tumor type	PAH	Dose	Dose units	Number of animals with tumors	Number of animals in group	% Tumor-bearing animals	SRC statistical analysis		Comments
											Fisher's exact <i>p</i> -value	Cochran-Armitage trend test <i>p</i> -value	
					BaP	0.1	mg	6	35	0.17	1.2×10^{-2}		
					BaP	0.3	mg	2	35	0.06	2.5×10^{-1}		
					BaP	1	mg	0	35	0.00		1.36×10^{-1}	
					BbF	0.1	mg	1	35	0.03	1.2×10^{-1}		
					BbF	0.3	mg	2	35	0.06	2.5×10^{-1}		
					BbF	1	mg	4	35	0.11	$6. \times 10^{-2}$	7.55×10^{-3}	
					BeP	0.2	mg	0	35	0.00			
					BeP	1	mg	1	30	0.03			
					BeP	5	mg	0	35	0.00			
					BjF	0.2	mg	0	35	0.00			
					BjF	1	mg	0	35	0.00			
					BjF	5	mg	0	35	0.00			
					BkF	0.16	mg	0	35	0.00			
					BkF	0.83	mg	0	31	0.00			
					BkF	4.15	mg	0	27	0.00			
					IP	0.16	mg	1	35	0.03	1.2×10^{-1}		
					IP	0.83	mg	0	35	0.00			
					IP	4.15	mg	0	35	0.00			
					AA	0.16	mg	0	35	0.00			
					AA	0.83	mg	0	35	0.00			
					BghiP	0.16	mg	0	35	0.00			
					BghiP	0.83	mg	0	35	0.00			
					BghiP	4.15	mg	0	34	0.00			
			Lung	Carcinoma+sarcoma	Untreated control	0	mg	0	35	0.00			
					Vehicle control	0	mg	0	35	0.00			
					BaP	0.1	mg	10	35	0.29	4.63×10^{-4}		
					BaP	0.3	mg	23	35	0.66	4.7×10^{-10}		
					BaP	1	mg	33	35	0.94	5.9×10^{-19}	3.66×10^{-9}	

Table C-5. Lung implantation bioassays: dose response information for incidence data

Record number	Reference	Species	Target organ	Tumor type	PAH	Dose	Dose units	Number of animals with tumors	Number of animals in group	% Tumor-bearing animals	SRC statistical analysis		Comments
											Fisher's exact <i>p</i> -value	Cochran-Armitage trend test <i>p</i> -value	
					BbF	0.1	mg	1	35	0.03	1.2×10^{-1}		
					BbF	0.3	mg	3	35	0.09	1.2×10^{-1}		
					BbF	1	mg	13	35	0.37	3.1×10^{-5}	9.63×10^{-8}	
					BeP	0.2	mg	0	35	0.00			
					BeP	1	mg	1	30	0.03			
					BeP	5	mg	1	35	0.03	1.2×10^{-1}	3.23×10^{-1}	
					BjF	0.2	mg	1	35	0.03	1.2×10^{-1}		
					BjF	1	mg	3	35	0.09	1.20×10^{-1}		
					BjF	5	mg	18	35	0.51	1.96×10^{-7}	1.28×10^{-11}	
					BkF	0.16	mg	0	35	0.00			
					BkF	0.83	mg	3	31	0.10	1×10^{-1}		
					BkF	4.15	mg	12	27	0.44	8.05×10^{-4}	1.03×10^{-9}	
					IP	0.16	mg	4	35	0.11	6×10^{-2}		
					IP	0.83	mg	8	35	0.23	2×10^{-3}		
					IP	4.15	mg	21	35	0.60	6.02×10^{-9}	7.56×10^{-10}	
					AA	0.16	mg	1	35	0.03			
					AA	0.83	mg	19	35	0.54	6.4×10^{-8}	1.13×10^{-10}	
					BghiP	0.16	mg	0	35	0.00			
					BghiP	0.83	mg	1	35	0.03			
					BghiP	4.15	mg	4	34	0.12	5.4×10^{-2}	2.47×10^{-3}	
22000	Wenzel-Hartung et al., 1990	Rat	Lung	Carcinoma	Untreated control	0	mg/animal	0	35	0.00			ED10, relative potencies reported
					Vehicle control	0	mg/animal	0	35	0.00			
					BaP	0.03	mg/animal	3	35	0.09	1.2×10^{-1}		
					BaP	0.1	mg/animal	11	35	0.31	1.93×10^{-4}		
					BaP	0.3	mg/animal	27	35	0.77	$1.29E \times 10^{-12}$	8.85×10^{-15}	

Table C-5. Lung implantation bioassays: dose response information for incidence data

Record number	Reference	Species	Target organ	Tumor type	PAH	Dose	Dose units	Number of animals with tumors	Number of animals in group	% Tumor-bearing animals	SRC statistical analysis		Comments
											Fisher's exact <i>p</i> -value	Cochran-Armitage trend test <i>p</i> -value	
					PH	1	mg/animal	0	35	0.00			
					PH	3	mg/animal	0	35	0.00			
					PH	10	mg/animal	1	35	0.03	5×10^{-1}	1	
					CH	1	mg/animal	5	35	0.14	2.7×10^{-2}		
					CH	3	mg/animal	10	35	0.29	4.63×10^{-4}	7.96×10^{-4}	
					DBahA	0.1	mg/animal	20	35	0.57	2.01×10^{-8}		

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Table C-6. In vitro bacterial mutagenicity: data use

Record number	Reference	Data source	Data points	Basis for RPF approach	Comments
17030	Andrews et al., 1978	Figure 1	Dose (μg) and # of revertant colonies for DBacA, DBajA, DBahA, AA, BghiP, BeP, BaP	Point estimate	TA100 with Ar S9
23830	Baker et al., 1980	Table 2	Use data for guinea pig-MC S9 only (column D); dose in $\mu\text{g}/\text{plate}$ and # of revertant colonies; BaP, DBaiP, BaA, DBacA, DBahA	Point estimate Table 2	TA100 with guinea pig-MC S9; Table 1 data not used, different S9 mix used for each of three experiments
23660	Bartsch et al., 1980	Appendix table	Use data for BaA and BaP; dose in $\mu\text{mol}/\text{plate}$ and mutagenic activity in revertants/ μmol .	Point estimate.	TA100 rat MC S9
17380	Bos et al., 1988	Table 1	Use TA100 strain only; dose ($\mu\text{g}/\text{plate}$) and # of revertant colonies/plate for PH, Pyr, BaP	Derive point estimate for BaP (use PH control as background); continuous model PH and Pyr using the BaP response as the BMR	TA100 with rat Ar S9
17590	Carver et al., 1986	Figure 1	Use curves for BaP, BaA, BghiF, and Pery; use 400 μL S9 per plate (last data point on x-axis); each curve is different dose in $\mu\text{g}/\text{plate}$, use hamster data; revertants per plate is y-axis	Point estimate; use highest dose in hamster, except for perylene (use 10 $\mu\text{g}/\text{plate}$); this is maximal response in hamsters	TA100 with hamster Ar S9; multi-dose data but not SD was reported
17630	Cavalieri et al., 1981a	Figure 1	DR curves for BaP, CPcdP (CPEP in fig.), and ACEP (CPAP in fig.); dose as μM , response as mutant fraction $\times 10^5$	Model as quantal data (mutant fraction reported)	TM677 with Ar S9
9620	Chang et al., 2002	Figure 7	DR curves for BghiF, BcPH, and BaP; dose ($\mu\text{g}/\text{plate}$) and revertants/plate	Point estimate; use 5 $\mu\text{g}/\text{plate}$ dose for BghiF and BaP; use 10 $\mu\text{g}/\text{plate}$ for BcPH	TA100 with rat Ar S9; SD not available from graph (reported for some data points, but not all)
24030	De Flora et al., 1984	Table 2	Table provides potency estimates as revertants/nmol for BaA, Pery, BaP and BeP	Calculate the RPF ratio using the potency estimates provided	Determine strain used to calculate potencies; rat Ar S9
18050	Eisenstadt and Gold, 1978	Figure 2B	Use TA100 data for BaP and CPcdP (open circles); dose is 1 μg for CPcdP and 2 μg for BaP (legend); use the same S9 concentration (20 $\mu\text{L}/\text{plate}$)	Point estimate; single point data (20 μL S9/plate)	TA100 with rat Ar S9; μL S9 that maximizes the BaP response does not produce maximal response for CPcdP
18180	Florin et al., 1980	Table III	Use TA100 data for BaA, CH, and BaP, use TA98 data for Pery, CO, and BaP; dose is indicated as optimal dose ($\mu\text{moles}/\text{plate}$) and # revertants/plate	Point estimate; please note that reported response includes subtraction of spontaneous revertants (control); need to use formula for added risk; make sure to flag in comments	Note that data for both TA100 and TA98 strains were used; BaP results were provided for each; rat MC S9

Table C-6. In vitro bacterial mutagenicity: data use

Record number	Reference	Data source	Data points	Basis for RPF approach	Comments
24080	Gibson et al., 1978	Table 1 (BaP) Table 3 (PAHs)	Use data for TA98; in Table 1 use Expt. No.1 for BaP; in Table 3 use data for DBahA, Tphen, BaA, BghiP, CH, FE, Pyr; dose as µg/plate, response as increase in revertants	Point estimate; use the dose associated with the maximum response (if reported as a range, do not use); controls were reported as negative (no mutagenic or toxic response)	TA98 with non-enzymatic induction (gamma irradiation); multi-dose data but not SD was reported
14080	Gold and Eisenstadt, 1980	Table 2	Use data for 3-MC induction at 50 µL S9/plate; dose is 4 nmol for BaP and CPcdP, results as revertants/plate	Point estimate	TA100 using 50 µL of rat MC S9; important to note that maximal response for CPcdP occurred at much lower dose of S9 (5 µL/plate)
18650	Hermann, 1981	Table 1	Table provides potency estimates as revertants/nmol for BbA, BaA, CH, FA, Tphen, BeP, DBacA, DBahA, BbF, Pery, DBalP, DBaiP, AA, CO; potency of BaP in legend as 100 revertants/nmol	Calculate the RPF ratio using the potency estimates provided	TA98 with rat Ar S9; potency estimates were calculated from the linear portion of the DR curve
10670	Johnsen et al., 1997	Figure 2	Use data for PCB microsomes for BaP, BjAC, BIAC; dose as µg/plate, response as revertants	Model to derive EDsd1; need to extract SDs from graph; control response is 113 ± 9 revertants per plate (see legend); add control response to each response for modeling (it was subtracted prior to graphing)	TA98 with PCB microsomes
19000	Kaden et al., 1979	Table 1	RPFs calculated for AN, ANL, Pyr, BbFE, CPcdP, BaA, CH, Tphen, FA, BeP, Pery, BghiP, AA, DBacA, DBahA, DBbeF	NA	TM677 with Ar S9 and PB S9
24680	Lafleur et al., 1993	Figures 3 and 4	Use DR curves for BaP, BghiF, CPcdP, CPhiACEA (CPAA), ACEA (AA), CPhiAPA (CPAP), APA (AP); dose as µg/mL, response as mutant fraction ($\times 10^5$)	Model as quantal data (mutant fraction reported)	Forward mutation to 8-azaguanine resistance in TM677 with rat AR S9
19320	LaVoie et al., 1979	Table VI	Use data for TA98 for BaP, BeP, and Pery; 10 µg dose and response as revertants/plate	Point estimate; use 20 µg for BaP; 10 µg for BeP; and 20 µg for Pery	TA98 with rat Ar S9; for BeP and Pery the maximal response was in TA100
23650	McCann et al., 1975	Table 1	Table provides potency estimates as revertants/nmol for DBaiP, BaP, BeP, DBacA, DBahA, CH, BaA	Calculate the RPF ratio using the potency estimates provided	Multiple strains, rat Ar S9

Table C-6. In vitro bacterial mutagenicity: data use

Record number	Reference	Data source	Data points	Basis for RPF approach	Comments
20220	Pahlman and Pelkonen, 1987	Table 1	Use data for rat-MC induced (last column); potency estimates are provided as revertants/nmol for BaA, CH, Tphen, DBacA, DBahA	Calculate the RPF ratio using the potency estimates provided	TA100 with rat MC S9
20450	Phillipson and Ioannides, 1989	Figures 2 and 3	Use the curve for hamster S9 (open triangles); data for BaP, DBaiP, BaA, and DBahA, dose as µg/plate, revertants/plate	Point estimate; use 10 µg/plate for BaP, DBahA; 20 µg/plate BaA, DBaiP	TA100 with hamster S9; multi-dose data but not SD was reported
21000	Sakai et al., 1985	Table 3	Use data for TA97 +S9 for FE, AC, PH, FA, Ch, Pyr, BaP, BeP, Pery, BghiP, CO; dose µg, response as revertants per plate	Point estimate; use 10 µg for AC, PH, FA, BaP, BeP; use 5 µg for FE; use 20 µg for CH, Pyr, BghiP; use 4 µg for Pery; use 100 µg for CO	TA97 with rat Ar S9; multi-dose data but not SD was reported
11860	Sangaiah et al., 1983	Figure 2	Use data for BjAC and BaP; dose as µg/plate, response as revertants/plate	Point estimate; use 10 µg/plate for BjAC; use 6 µg/plate for BaP	TA98 with rat Ar S9; multi-dose data but not SD was reported
21360	Simmon, 1979a	Table 1	Use data for TA100 for BaA, BaP, BeP; dose as µg, response as revertants/plate after subtracting background	Point estimate	TA100 with rat Ar S9
21640	Teranishi et al., 1975	Table I and Figure 3	Use data for TA1538 for DBaiP and BaP; use data in Figure 3 for TA 1538, PB and DBahA-induced S9 (open circles) for DBaeP	Point estimate	TA1538 with rat PB S9 for DBaiP; TA1538 with PB and DBahA S9 for DBaeP
16180	Utesch et al., 1987	Figures 2 and 3	Use data for homogenized hepatocytes (open circles) for BaA and BaP; dose as µg/plate, response as revertants/plates	Point estimate; use 12.5 µg/plate for BaP; use 25 µg/plate for BaA	TA100 with homogenized hepatocytes from Ar treated rats; multi-dose data but not SD was reported
16440	Wood et al., 1980	Chart 3A	Use DR curves for BaP and CPcdP; dose as nmol, response as revertants/plate	Point estimate; use 15 nmol for BaP and CPcdP	TA98 with purified microsomal P450; multi-dose data but not SD was reported

Table C-7. In vitro bacterial mutagenicity: dose response data

Record number	Reference	Cell type		PAH	Dose	Dose units	Response	Response units	n	Units	% response	Std dev	Std error	Comments
17030	Andrews et al., 1978	TA100	ArS9	Control	0	µg	150	Revertant colonies						
				BaP	250	µg	1,681	Revertant colonies						
				DBacA	10	µg	2,957	Revertant colonies						
				DBajA	10	µg	843	Revertant colonies						
				DBahA	25	µg	617	Revertant colonies						
				AA	250	µg	1,796	Revertant colonies						
				BghiP	100	µg	793	Revertant colonies						
				BeP	1,000	µg	643	Revertant colonies						
23830	Baker et al., 1980	TA100	Guinea pig-MC	Control	0	µg/plate	134	Revertant colonies				18		
				BaP	2.5	µg/plate	1,278	Revertant colonies	10			97		
				DBaiP	5	µg/plate	737	Revertant colonies	10			73		
				BaA	10	µg/plate	947	Revertant colonies	10			47		
				DBacA	2.5	µg/plate	1,738	Revertant colonies	10			88		
				DBahA	5	µg/plate	1,331	Revertant colonies	10			98		
23660	Bartsch et al., 1980	TA100	Rat MC S9	BaP	0.027	µmol/plate	29,000	Revertants/plate						Control response subtracted.
				BaA	0.067	µmol/plate	6,000	Revertants/plate						Control response subtracted.
17380	Bos et al., 1988	TA100	Rat ArS9	BaP	7.5	µg/plate	824	Revertants/plate	3	Replicates		21	12	
				Control	0	µg/plate	85	Revertants/plate	3	Replicates		12	7	

Table C-7. In vitro bacterial mutagenicity: dose response data

Record number	Reference	Cell type		PAH	Dose	Dose units	Response	Response units	n	Units	% response	Std dev	Std error	Comments
				PH	1	µg/plate	108	Revertants/plate	3	Replicates		10	6	
				PH	5	µg/plate	167	Revertants/plate	3	Replicates		5	3	
				PH	25	µg/plate	240	Revertants/plate	3	Replicates		10	6	
				Control	0	µg/plate	86	Revertants/plate	3	Replicates		7	4	
				Pyr	1	µg/plate	93	Revertants/plate	3	Replicates		9	5	
				Pyr	5	µg/plate	164	Revertants/plate	3	Replicates		23	13	
				Pyr	25	µg/plate	279	Revertants/plate	3	Replicates		10	6	
17590	Carver et al., 1986	TA100	Hamster ArS9	Control	0	µg/plate	140	Revertants/plate						Control curves difficult to digitize; control value estimated from BaP graph and used for all.
				BaP	1	µg/plate	141	Revertants/plate						Continuous data, no SD
				BaP	10	µg/plate	482	Revertants/plate						
				BaP	50	µg/plate	1,035	Revertants/plate						
				BaA	15	µg/plate	346	Revertants/plate						
				BaA	40	µg/plate	892	Revertants/plate						
				BaA	50	µg/plate	1,263	Revertants/plate						
				BghiF	10	µg/plate	333	Revertants/plate						
				BghiF	25	µg/plate	727	Revertants/plate						

Table C-7. In vitro bacterial mutagenicity: dose response data

Record number	Reference	Cell type		PAH	Dose	Dose units	Response	Response units	n	Units	% response	Std dev	Std error	Comments
				BghiF	50	µg/plate	985	Revertants/plate						
				Perylene	5	µg/plate	195	Revertants/plate						
				Perylene	10	µg/plate	993	Revertants/plate						
				Perylene	15	µg/plate	922	Revertants/plate						
17630	Cavalieri et al., 1981a	TM677	Ar S9	Control	0	µM	5	Mutants	1 × 10 ⁵	Survivors	0.000050			Control value estimated
				BaP	10	µM	15	Mutants	1 × 10 ⁵	Survivors	0.000150			
				BaP	20	µM	26	Mutants	1 × 10 ⁵	Survivors	0.000256			
				BaP	40	µM	84	Mutants	1 × 10 ⁵	Survivors	0.000839			
				BaP	60	µM	131	Mutants	1 × 10 ⁵	Survivors	0.001308			
				CPcdP	20	µM	34	Mutants	1 × 10 ⁵	Survivors	0.000337			
				CPcdP	40	µM	133	Mutants	1 × 10 ⁵	Survivors	0.001330			
				ACEP	10	µM	11	Mutants	1 × 10 ⁵	Survivors	0.000110			
				ACEP	40	µM	25	Mutants	1 × 10 ⁵	Survivors	0.000248			
				ACEP	120	µM	55	Mutants	1 × 10 ⁵	Survivors	0.000551			
9620	Chang et al., 2002	TA100	Rat ArS9	Control	0	µg/plate	326	Revertants/plate						SD not consistently plotted; extracted only point estimate data
				BaP	5	µg/plate	2,543	Revertants/plate						
				BghiF	5	µg/plate	1,630	Revertants/plate						

Table C-7. In vitro bacterial mutagenicity: dose response data

Record number	Reference	Cell type		PAH	Dose	Dose units	Response	Response units	n	Units	% response	Std dev	Std error	Comments
				BcPH	10	µg/plate	1,043	Revertants/plate						
24030	De Flora et al., 1984	Rat AR S9		BaP			185	Revertants/nmol (potency)						
				BaA			12	Revertants/nmol (potency)						
				Pery			21	Revertants/nmol (potency)						
				BeP			1.6	Revertants/nmol (potency)						
18050	Eisenstadt and Gold, 1978	TA100	Rat ArS9	BaP	2	µg	1,705	Revertants/plate						Background subtracted from data reported
				CPcdP	1	µg	134	Revertants/plate						
18180	Florin et al., 1980	TA100	Rat MC S9	BaP	0.0030	µmol/plate	255	Revertants/plate						Background subtracted from data reported
		TA100		BaA	0.10	µmol/plate	326	Revertants/plate						Only peak response reported
		TA100		CH	0.0050	µmol/plate	196	Revertants/plate						
		TA98		BaP	0.0030	µmol/plate	235	Revertants/plate						
		TA98		Pery	0.025	µmol/plate	91	Revertants/plate						
		TA98		CO	0.070	µmol/plate	82	Revertants/plate						
24080	Gibson et al., 1978	TA98	⁶⁰ Co gamma radiation, for 7 d (2.5x10 ⁷ rad)	Control	0	µg/plate	0	Increase in revertants						Continuous data, no SD

Table C-7. In vitro bacterial mutagenicity: dose response data

Record number	Reference	Cell type		PAH	Dose	Dose units	Response	Response units	n	Units	% response	Std dev	Std error	Comments
				BaP	10	µg/plate	1.5	Increase in revertants						
				BaP	20	µg/plate	3	Increase in revertants						
				BaP	50	µg/plate	10	Increase in revertants						
				BaP	100	µg/plate	15	Increase in revertants						
				BaP	200	µg/plate	21	Increase in revertants						
				BaP	300	µg/plate	35	Increase in revertants						
				BaA	150	µg/plate	1.8	Increase in revertants						
				BaA	250	µg/plate	6.4	Increase in revertants						
				BghiP	400	µg/plate	4.2	Increase in revertants						
				CH	500	µg/plate	6.1	Increase in revertants						
				CH	1,000	µg/plate	6.7	Increase in revertants						
				FE	200	µg/plate	1.1	Increase in revertants						
				FE	360	µg/plate	2.2	Increase in revertants						
				Pyr	160	µg/plate	28	Increase in revertants						
14080	Gold and Eisenstadt, 1980	TA100	50ul rat MC S9	BaP	4	nmol	1,103	Revertants/plate						Background subtracted from data reported
				CPcdP	4	nmol	281	Revertants/plate						
18650	Hermann, 1981	TA98	Rat Ar S9	BaP			100	Revertants/nmol (potency)						

Table C-7. In vitro bacterial mutagenicity: dose response data

Record number	Reference	Cell type	PAH	Dose	Dose units	Response	Response units	n	Units	% response	Std dev	Std error	Comments
			BbA			8	Revertants/nmol (potency)						
			BaA			4	Revertants/nmol (potency)						
			CH			2	Revertants/nmol (potency)						
			FA			3	Revertants/nmol (potency)						
			Tphen			13	Revertants/nmol (potency)						
			BeP			15	Revertants/nmol (potency)						
			DBaCA			42	Revertants/nmol (potency)						
			DBaHA			8	Revertants/nmol (potency)						
			BbF			15	Revertants/nmol (potency)						
			Pery			31	Revertants/nmol (potency)						
			DBaIP			21	Revertants/nmol (potency)						
			DBaIP			38	Revertants/nmol (potency)						
			AA			62	Revertants/nmol (potency)						

Table C-7. In vitro bacterial mutagenicity: dose response data

Record number	Reference	Cell type		PAH	Dose	Dose units	Response	Response units	n	Units	% response	Std dev	Std error	Comments
				CO			60	Revertants/nmol (potency)						
10670	Johansen et al., 1997	TA98	PCB micro-somes	Control	0	µg/plate	113	Revertants/plate	3			8.54		Control response added back to each response for modeling
				BaP	10	µg/plate	128	Revertants/plate	3			3.66		
				BaP	20	µg/plate	123	Revertants/plate	3			13.41		
				BjAC	10	µg/plate	192	Revertants/plate	3			10.98		
				BjAC	20	µg/plate	213	Revertants/plate	3			9.76		
				BIAC	10	µg/plate	204	Revertants/plate	3			13.41		
				BIAC	20	µg/plate	207	Revertants/plate	3			43.90		
19000	Kaden et al., 1979	TM677	ArS9 and PB S9	BaP			1	RPF						Mutagenic activity relative to that of the 80 µmol BaP-positive control performed simultaneously with test compound.
				AN	NA		0.010	RPF						
				ANL	NA		0.070	RPF						
				Pyr	NA		0.070	RPF						
				BbFE	NA		0.080	RPF						
				CPcdP	NA		1.5	RPF						
				BaA	NA		0.14	RPF						
				CH	NA		0.20	RPF						
				Tphen	NA		0.070	RPF						
				FA	NA		1.0	RPF						
				BeP	NA		0.11	RPF						

Table C-7. In vitro bacterial mutagenicity: dose response data

Record number	Reference	Cell type		PAH	Dose	Dose units	Response	Response units	n	Units	% response	Std dev	Std error	Comments
				Pery	NA		6	RPF						
				BghiP	NA		0.080	RPF						
				AA	NA		0.080	RPF						
				DBacA	NA		0.77	RPF						
				DBahA	NA		0.080	RPF						
				DBbeF	NA		0.88	RPF						
24680	Lafleur et al., 1993	TM677	Rat AR S9	BaP	0	µg/mL	7	Mutants	100,000	Survivors	0.000070			
				BaP	0.5	µg/mL	8	Mutants	100,000	Survivors	0.000080			
				BaP	1	µg/mL	10	Mutants	100,000	Survivors	0.000101			
				BaP	2	µg/mL	18	Mutants	100,000	Survivors	0.000175			
				BaP	4	µg/mL	22	Mutants	100,000	Survivors	0.000220			
				BaP	8	µg/mL	33	Mutants	100,000	Survivors	0.000327			
				BghiF	0	µg/mL	11	Mutants	100,000	Survivors	0.00011			
				BghiF	1	µg/mL	10	Mutants	100,000	Survivors	0.00010			
				BghiF	3	µg/mL	14	Mutants	100,000	Survivors	0.00014			
				BghiF	10	µg/mL	55	Mutants	100,000	Survivors	0.00055			
				CPcdP	0	µg/mL	12	Mutants	100,000	Survivors	0.000120			
				CPcdP	0.5	µg/mL	15	Mutants	100,000	Survivors	0.000146			
				CPcdP	1	µg/mL	13	Mutants	100,000	Survivors	0.000130			
				CPcdP	2	µg/mL	17	Mutants	100,000	Survivors	0.000172			
				CPcdP	4	µg/mL	27	Mutants	100,000	Survivors	0.000274			

Table C-7. In vitro bacterial mutagenicity: dose response data

Record number	Reference	Cell type		PAH	Dose	Dose units	Response	Response units	n	Units	% response	Std dev	Std error	Comments
				CPcdP	8	µg/mL	60	Mutants	100,000	Survivors	0.000597			
				CPhiACE A	0	µg/mL	8	Mutants	100,000	Survivors	0.000084			
				CPhiACE A	0.5	µg/mL	10	Mutants	100,000	Survivors	0.000103			
				CPhiACE A	1	µg/mL	16	Mutants	100,000	Survivors	0.000157			
				CPhiACE A	2	µg/mL	29	Mutants	100,000	Survivors	0.000286			
				CPhiACE A	4	µg/mL	67	Mutants	100,000	Survivors	0.000670			
				CPhiAPA	0	µg/mL	9	Mutants	100,000	Survivors	0.000090			
				CPhiAPA	10	µg/mL	12	Mutants	100,000	Survivors	0.000117			
				CPhiAPA	30	µg/mL	21	Mutants	100,000	Survivors	0.000210			
				CPhiAPA	100	µg/mL	26	Mutants	100,000	Survivors	0.000263			
				ACEA	0	µg/mL	9	Mutants	100,000	Survivors	0.000092			
				ACEA	10	µg/mL	21	Mutants	100,000	Survivors	0.000214			
				ACEA	35	µg/mL	69	Mutants	100,000	Survivors	0.000686			
				APA	0	µg/mL	16	Mutants	100,000	Survivors	0.000160			
				APA	10	µg/mL	37	Mutants	100,000	Survivors	0.000375			
				APA	30	µg/mL	42	Mutants	100,000	Survivors	0.000416			
				APA	100	µg/mL	22	Mutants	100,000	Survivors	0.000220			
19320	LaVoie et al., 1979	TA98	Rat Ar S9	BaP	10	µg	450	Revertants/ plate						Background subtracted from data reported

Table C-7. In vitro bacterial mutagenicity: dose response data

Record number	Reference	Cell type		PAH	Dose	Dose units	Response	Response units	n	Units	% response	Std dev	Std error	Comments
				BaP	20	µg	480	Revertants/plate						
				BeP	10	µg	20	Revertants/plate						
				BeP	20	µg	20	Revertants/plate						
				Pery	20	µg	70	Revertants/plate						
23650	McCann et al., 1975	Multiple strains	Rat Ar S9	BaP	NA		121	Revertants/nmol (potency)						Paper states that comparison of potency estimates should be done with caution (non-linear dose-response) see table footnotes
				DBaiP	NA		20	Revertants/nmol (potency)						
				BeP	NA		0.6	Revertants/nmol (potency)						
				DBacA	NA		175	Revertants/nmol (potency)						
				DBahA	NA		11	Revertants/nmol (potency)						
				CH	NA		38	Revertants/nmol (potency)						
				BaA	NA		11	Revertants/nmol (potency)						
20220	Pahlman and Pelkonen, 1987	TA100	Rat MC S9	BaP	NA		272	Revertants/nmol (potency)						

Table C-7. In vitro bacterial mutagenicity: dose response data

Record number	Reference	Cell type		PAH	Dose	Dose units	Response	Response units	n	Units	% response	Std dev	Std error	Comments
				BaA	NA		10.4	Revertants/nmol (potency)						
				CH	NA		9.7	Revertants/nmol (potency)						
				Tphen	NA		4	Revertants/nmol (potency)						
				DBacA	NA		35	Revertants/nmol (potency)						
				DBahA	NA		4.4	Revertants/nmol (potency)						
20450	Phillipson and Ioannides, 1989	TA100	Hamster S9	BaP	0	µg/plate	0.000	Revertants/plate						
				BaP	5	µg/plate	68.833	Revertants/plate						
				BaP	10	µg/plate	118.948	Revertants/plate						
				BaP	15	µg/plate	99.744	Revertants/plate						
				BaP	20	µg/plate	96.101	Revertants/plate						
				BaA	0	µg/plate	0.000	Revertants/plate						
				BaA	20	µg/plate	109.877	Revertants/plate						
				BaA	40	µg/plate	115.248	Revertants/plate						
				BaA	60	µg/plate	114.430	Revertants/plate						
				BaA	100	µg/plate	98.846	Revertants/plate						
				DBaiP	0	µg/plate	0.000	Revertants/plate						

Table C-7. In vitro bacterial mutagenicity: dose response data

Record number	Reference	Cell type		PAH	Dose	Dose units	Response	Response units	n	Units	% response	Std dev	Std error	Comments
				DBaiP	20	µg/plate	64.638	Revertants/plate						
				DBaiP	40	µg/plate	75.747	Revertants/plate						
				DBaiP	60	µg/plate	80.394	Revertants/plate						
				DBaiP	100	µg/plate	63.880	Revertants/plate						
				DBahA	0	µg/plate	0.000	Revertants/plate						
				DBahA	10	µg/plate	50.899	Revertants/plate						
				DBahA	20	µg/plate	56.886	Revertants/plate						
				DBahA	30	µg/plate	52.419	Revertants/plate						
				DBahA	50	µg/plate	34.980	Revertants/plate						
21000	Sakai et al., 1985	TA97	Rat Ar S9	Control	0	µg	177	Revertants/plate						
				BaP	1	µg	1,208	Revertants/plate						
				BaP	5	µg	1,432	Revertants/plate						
				BaP	10	µg	1,742	Revertants/plate						
				Control	0	µg	189	Revertants/plate						
				FE	5	µg	254	Revertants/plate						
				FE	10	µg	240	Revertants/plate						
				FE	50	µg	240	Revertants/plate						
				FE	250	µg	232	Revertants/plate						

Table C-7. In vitro bacterial mutagenicity: dose response data

Record number	Reference	Cell type		PAH	Dose	Dose units	Response	Response units	n	Units	% response	Std dev	Std error	Comments
				Control	0	µg	189	Revertants/plate						
				AC	5	µg	360	Revertants/plate						
				AC	10	µg	509	Revertants/plate						
				AC	50	µg	293	Revertants/plate						
				AC	250	µg	279	Revertants/plate						
				Control	0	µg	189	Revertants/plate						
				PH	5	µg	454	Revertants/plate						
				PH	10	µg	534	Revertants/plate						
				PH	50	µg	321	Revertants/plate						
				PH	250	µg	T	Revertants/plate						
				Control	0	µg	177	Revertants/plate						
				FA	5	µg	652	Revertants/plate						
				FA	10	µg	1,012	Revertants/plate						
				FA	50	µg	1,042	Revertants/plate						
				FA	250	µg	518	Revertants/plate						
				Control	0	µg	177	Revertants/plate						
				CH	5	µg	640	Revertants/plate						
				CH	10	µg	815	Revertants/plate						

Table C-7. In vitro bacterial mutagenicity: dose response data

Record number	Reference	Cell type		PAH	Dose	Dose units	Response	Response units	n	Units	% response	Std dev	Std error	Comments
				CH	20	µg	888	Revertants/plate						
				CH	50	µg	723	Revertants/plate						
				Control	0	µg	177	Revertants/plate						
				Pyr	2	µg	929	Revertants/plate						
				Pyr	4	µg	1,582	Revertants/plate						
				Pyr	6	µg	2,057	Revertants/plate						
				Pyr	10	µg	2,577	Revertants/plate						
				Pyr	20	µg	2,832	Revertants/plate						
				Pyr	50	µg	2,296	Revertants/plate						
				Control	0	µg	177	Revertants/plate						
				BeP	5	µg	944	Revertants/plate						
				BeP	10	µg	1,100	Revertants/plate						
				BeP	50	µg	606	Revertants/plate						
				BeP	250	µg	640	Revertants/plate						
				Control	0	µg	177	Revertants/plate						
				Pery	1	µg	1,516	Revertants/plate						
				Pery	2	µg	2,236	Revertants/plate						
				Pery	4	µg	2,784	Revertants/plate						

Table C-7. In vitro bacterial mutagenicity: dose response data

Record number	Reference	Cell type		PAH	Dose	Dose units	Response	Response units	n	Units	% response	Std dev	Std error	Comments
				Pery	10	µg	2,550	Revertants/plate						
				Pery	50	µg	1,808	Revertants/plate						
				Control	0	µg	177	Revertants/plate						
				BghiP	10	µg	896	Revertants/plate						
				BghiP	20	µg	991	Revertants/plate						
				BghiP	50	µg	896	Revertants/plate						
				BghiP	250	µg	612	Revertants/plate						
				Control	0	µg	177	Revertants/plate						
				CO	5	µg	362	Revertants/plate						
				CO	10	µg	400	Revertants/plate						
				CO	50	µg	405	Revertants/plate						
				CO	100	µg	490	Revertants/plate						
				CO	200	µg	479	Revertants/plate						
11860	Sangaiah et al., 1983	TA98	Rat Ar S9	Control	0	µg/plate	35.43	Revertants/plate						
				BaP	2	µg/plate	177.37	Revertants/plate						
				BaP	3	µg/plate	266.02	Revertants/plate						
				BaP	6	µg/plate	419.68	Revertants/plate						
				BaP	10	µg/plate	312.76	Revertants/plate						

Table C-7. In vitro bacterial mutagenicity: dose response data

Record number	Reference	Cell type		PAH	Dose	Dose units	Response	Response units	n	Units	% response	Std dev	Std error	Comments
				BaP	30	µg/plate	358.41	Revertants/plate						
				BaP	50	µg/plate	350.92	Revertants/plate						
				BaP	100	µg/plate	323.12	Revertants/plate						
				Control	0	µg/plate	53.15	Revertants/plate						
				BjAC	2	µg/plate	124.15	Revertants/plate						
				BjAC	3	µg/plate	331.10	Revertants/plate						
				BjAC	6	µg/plate	674.11	Revertants/plate						
				BjAC	10	µg/plate	993.21	Revertants/plate						
				BjAC	30	µg/plate	1,027.06	Revertants/plate						
				BjAC	50	µg/plate	883.45	Revertants/plate						
				BjAC	100	µg/plate	1,021.36	Revertants/plate						
21360	Simmon, 1979a	TA100	Rat Ar S9	BaP	5	µg	1,141	Revertants/plate						Background subtracted from data reported
				BaA	50	µg	280	Revertants/plate						
				BeP	50	µg	57	Revertants/plate						
21640	Teranishi et al., 1975	TA1538	Rat PB S9	Control	0	µg/plate	38	Revertant colonies/plate						
				BaP	50	µg/plate	77	Revertant colonies/plate						

Table C-7. In vitro bacterial mutagenicity: dose response data

Record number	Reference	Cell type		PAH	Dose	Dose units	Response	Response units	n	Units	% response	Std dev	Std error	Comments
				DBaiP	50	µg/plate	102	Revertant colonies/plate						
		TA1538	Rat PB and DBahA S9	Control	0	µg/plate	25	Revertant colonies/plate						
				BaP	50	µg/plate	279	Revertant colonies/plate						
				DBaEP	50	µg/plate	88	Revertant colonies/plate						
16180	Utesch et al., 1987	TA100	With homogenized hepatocytes from Ar treated rats	Control	0	µg/plate	159	Revertants/plates						
				BaP	6.3	µg/plate	998	Revertants/plate						
				BaP	12.5	µg/plate	1,079	Revertants/plate						
				BaP	25	µg/plate	1,178	Revertants/plate						
				BaP	50	µg/plate	1,141	Revertants/plate						
				BaP	100	µg/plate	1,114	Revertants/plate						
				Control	0	µg/plate	199	Revertants/plate						
				BaA	6.3	µg/plate	861	Revertants/plate						
				BaA	12.5	µg/plate	2,583	Revertants/plate						
				BaA	25	µg/plate	3,546	Revertants/plate						
				BaA	50	µg/plate	3,786	Revertants/plate						

Table C-7. In vitro bacterial mutagenicity: dose response data

Record number	Reference	Cell type		PAH	Dose	Dose units	Response	Response units	n	Units	% response	Std dev	Std error	Comments
				BaA	100	µg/plate	3,406	Revertants/plate						
16440	Wood et al., 1980	TA98	Purified microsomal P450	Control	0	nmol	0	Revertants/plate						Background subtracted from data reported
				BaP	3.75	nmol	45	Revertants/plate						
				BaP	7.5	nmol	63	Revertants/plate						
				BaP	15	nmol	99	Revertants/plate						
				BaP	30	nmol	103	Revertants/plate						
				Control	0	nmol	0	Revertants/plate						
				CPcdP	3.75	nmol	303	Revertants/plate						
				CPcdP	7.5	nmol	491	Revertants/plate						
				CPcdP	15	nmol	685	Revertants/plate						
				CPcdP	30	nmol	776	Revertants/plate						

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Table C-8. In vitro mammalian mutagenicity: data use

Record number	Reference	Data source	Data points	Basis for RPF approach	Comments
16920	Amacher and Paillet, 1982	Figure 1	Use lines for BaP (open circles) and BaA (closed triangles); dose is $\mu\text{g/mL}$ and response is mutation frequency (MF)/ 10^6 survivors	Model; quantal data	Thymidine kinase assay (resistance to trifluorothymidine) in mouse lymphoma cells (L5178Y) with Syrian golden hamster S9 mix or cocultivated hamster hepatocytes
16940	Amacher and Turner, 1980	Figure 3	Use bars for SM2 S9 activation for BaP and BaA; dose is 1.25×10^{-5} M for BaP and 3.22×10^{-5} M for BaA; response is IMF/ 10^4 survivors	Point estimate	Thymidine kinase assay (resistance to trifluorothymidine) in mouse lymphoma cells (L5178Y) with mouse S9 mix
16910	Amacher et al., 1980	Table 3	Use DR data for BaA and BaP; dose as concentration (M), response as mutants per 10^4 survivors	Model; quantal data	Thymidine kinase assay (resistance to trifluorothymidine) in mouse lymphoma cells (L5178Y) with mouse S9 mix
17140	Barfknecht et al., 1982	Figure 2 (BaP, FA); Figure 4 (BaA, CH, Tphen); Figure 6 (CPcdP)	Dose is μM and mutant fraction $\times 10^6$	Model; quantal data	Thymidine kinase assay (resistance to trifluorothymidine) in human lymphoblast cells with rat Ar S9 mix
14250	Hass et al., 1982	Table 1	DR data for DBaiP, DBaHP, and BaP; dose is $\mu\text{g/mL}$; use response data for TG mutants only (mutants/ 10^6 cells); control value is 4 ± 1 mutants/ 10^6 cells	Model; quantal data	Hypoxanthine-guanine phosphoribosyl transferase assay (resistance to 6-thioguanine) in V79 Chinese hamster cells with rat MC S9
18740	Huberman and Sachs, 1976	Table 2	Use data for BaP, DBaA, DBaHA; 8-azaguanine resistance only; use $1\mu\text{g/mL}$ dose for all (*), response as mutants per 10^5 survivors	Point estimate	Hypoxanthine-guanine phosphoribosyl transferase assay (resistance to 8-azaguanine) in V79 Chinese hamster cells with hamster embryo cells
18990	Jotz and Mitchell, 1981	Table 2	Use data for BaP and Pyr with metabolic activation; subtract negative control, dose as $\mu\text{g/mL}$, response as MF $\times 10^{-6}$	Point estimate	Thymidine kinase assay (resistance to trifluorothymidine) in mouse lymphoma cells (L5178Y) with rat Ar S9
24720	Kligerman et al., 1986	Figure 1	Use DR data for BaP and BIAC; dose as $\mu\text{g/mL}$, response as mutant frequency/ 10^6 survivors; average data from two experiments	Model; quantal data	Thymidine kinase assay (resistance to trifluorothymidine) in mouse lymphoma cells (L5178Y) with rat Ar S9
19180	Krahn and Heidelberger, 1977	Table II	Use data for BaP, DBaA, DBaHA, and BaA; cell survival @40% control (column 3), controls are 100% survival group (column 1); use 3-MC S9 data only; dose as nmol/mL, response as 6-TG/ 10^5 cells	Point estimate	Hypoxanthine-guanine phosphoribosyl transferase assay (resistance to 6-thioguanine) in V79 Chinese hamster cells with hamster embryo cells

Table C-8. In vitro mammalian mutagenicity: data use

Record number	Reference	Data source	Data points	Basis for RPF approach	Comments
24680	Lafleur et al., 1993	Figures 5 and 6	Use DR curves for BaP, CPcdP (CPP), CPhiACEA (CPAA), ACEA (AA); dose as $\mu\text{g/mL}$, response as mutant fraction (ppm)	Model as quantal data (mutant fraction reported)	Thymidine kinase assay (resistance to trifluorothymidine) in MCL-3 cells (human B-lymphoblastoid cells)
7550	Li and Lin, 1996	Text	Mutant frequency of controls 2×10^{-5} ; 10 ng/mL BaP = 5×10^{-5} ; BaA = 5.6×10^{-5}	Point estimate	Hypoxanthine-guanine phosphoribosyl transferase assay (resistance to 6-thioguanine) in HS1 HeLa cells (human epithelial cells)
11450	Nesnow et al., 1984	Chart 9	Use data for BaP, BIAC, BeAC, and BjAC; dose as $\mu\text{g/mL}$, response as 6TG-resistant mutants/ 10^6 survivors	Model; quantal data	Hypoxanthine-guanine phosphoribosyl transferase assay (resistance to 6-thioguanine) in V79 Chinese hamster cells with rat AR S9
15630	Raveh and Huberman, 1983	Table 1	Use data for CPcdP and BaP, with PMA only; dose in $\mu\text{g/mL}$, response in mutants/ 10^5 cells	Model; quantal data	Hypoxanthine-guanine phosphoribosyl transferase assay (resistance to 6-thioguanine) in V79 Chinese hamster cells with hamster embryo cells
15640	Raveh et al., 1982	Figure 4	Use DR data for CPcdP and BaP (ouabain resistance only); dose in $\mu\text{g/mL}$, response in mutants/ 10^6 cells	Model; quantal data	Hypoxanthine-guanine phosphoribosyl transferase assay (resistance to ouabain) in V79 Chinese hamster cells with hamster embryo cells
21410	Slaga et al., 1978	Table 3	Use DR data for BaA and BaP; dose as μM , response as ouabain resistant mutants/ 10^4 survivors	Model; quantal data	Hypoxanthine-guanine phosphoribosyl transferase assay (resistance to ouabain) in V79 Chinese hamster cells with hamster embryo cells
16190	Vaca et al., 1992	Figure 5	DR data for FA and BaP; dose as μM , response as 6-Tg resistant cells/100,000	Model; quantal data	Hypoxanthine-guanine phosphoribosyl transferase assay (resistance to 6-thioguanine) in UV-sensitive CHO cells with rat Ar S9
21900	Wangenheim and Bolcsfoldi, 1988	Table 1	Use +S9 DR data for Pyr, BaP, and FE; dose as mol/L, response as mutation frequency	Model; quantal data	Thymidine kinase assay (resistance to trifluorothymidine) in mouse lymphoma cells (L5178Y) with rat Ar S9
24670	Durant et al., 1999	Table 1	Use DR data for BaPery, BbPery, DBaeF, DBafF, DBahP, DBaiP, DBelP, N23aP, N23eP; positive control is reported as 1,000 ng/mL BaP (reported separately for each PAH)	Model; quantal data	Thymidine kinase assay (resistance to trifluorothymidine) in human h1Alv2 cells

Table C-9. In vitro mammalian mutagenicity: dose response data

Record number	Reference	PAH	Dose	Dose units	Mutants	In number	Units	% response	Comments
16920	Amacher and Paillet, 1982	Control	0	µg/mL	39	1 × 10 ⁶	Survivors	0.000039	
		BaP	2.5	µg/mL	119	1 × 10 ⁶	Survivors	0.00012	
		BaP	5	µg/mL	170	1 × 10 ⁶	Survivors	0.00017	
		BaP	7.5	µg/mL	196	1 × 10 ⁶	Survivors	0.00020	
		BaP	10	µg/mL	267	1 × 10 ⁶	Survivors	0.00027	
		Control	0	µg/mL	20	1 × 10 ⁶	Survivors	0.000020	
		BaA	2.5	µg/mL	65	1 × 10 ⁶	Survivors	0.000065	
		BaA	5	µg/mL	62	1 × 10 ⁶	Survivors	0.000062	
		BaA	10	µg/mL	88	1 × 10 ⁶	Survivors	0.000088	
		BaA	15	µg/mL	89	1 × 10 ⁶	Survivors	0.000089	
16940	Amacher and Turner, 1980	Control	0	M	0.4	1 × 10 ⁴	Survivors	0.000040	Control w/o S9 treatment
		BaP	1.25 × 10 ⁻⁵	M	2.85	1 × 10 ⁴	Survivors	0.000285	
		BaA	3.22 × 10 ⁻⁵	M	3.12	1 × 10 ⁴	Survivors	0.000312	
16910	Amacher et al., 1980	Control	0	M	0.680	1 × 10 ⁴	Survivors	0.000068	
		BaP	5.30 × 10 ⁻⁶	M	1.360	1 × 10 ⁴	Survivors	0.000136	
		BaP	7.00 × 10 ⁻⁶	M	1.790	1 × 10 ⁴	Survivors	0.000179	
		BaP	9.40 × 10 ⁻⁶	M	1.470	1 × 10 ⁴	Survivors	0.000147	
		BaP	1.25 × 10 ⁻⁵	M	1.870	1 × 10 ⁴	Survivors	0.000187	
		BaP	1.67 × 10 ⁻⁵	M	2.600	1 × 10 ⁴	Survivors	0.000260	
		BaP	2.23 × 10 ⁻⁵	M	2.490	1 × 10 ⁴	Survivors	0.000249	
		BaP	2.97 × 10 ⁻⁵	M	2.650	1 × 10 ⁴	Survivors	0.000265	
		BaP	3.96 × 10 ⁻⁵	M	3.970	1 × 10 ⁴	Survivors	0.000397	
		Control	0	M	0.770	1 × 10 ⁴	Survivors	0.000077	
		BaA	1.36 × 10 ⁻⁵	M	0.810	1 × 10 ⁴	Survivors	0.000081	
		BaA	1.81 × 10 ⁻⁵	M	0.840	1 × 10 ⁴	Survivors	0.000084	
		BaA	2.42 × 10 ⁻⁵	M	1.000	1 × 10 ⁴	Survivors	0.000100	
		BaA	3.22 × 10 ⁻⁵	M	1.230	1 × 10 ⁴	Survivors	0.000123	
		BaA	4.30 × 10 ⁻⁵	M	1.470	1 × 10 ⁴	Survivors	0.000147	
		BaA	5.47 × 10 ⁻⁵	M	NS	1 × 10 ⁴	Survivors		NS = no survivors
		BaA	7.65 × 10 ⁻⁵	M	NS	1 × 10 ⁴	Survivors		

Table C-9. In vitro mammalian mutagenicity: dose response data

Record number	Reference	PAH	Dose	Dose units	Mutants	In number	Units	% response	Comments
		BaA	1.02×10^{-4}	M	NS	1×10^4	Survivors		
17140	Barfknecht et al., 1982	Control	0	μM	0	1×10^6	Survivors	0.000000	
		BaP	10	μM	51	1×10^6	Survivors	0.000051	
		BaP	20	μM	120	1×10^6	Survivors	0.000120	
		BaP	30	μM	155	1×10^6	Survivors	0.000155	
		Control	0	μM	0	1×10^6	Survivors	0.000000	
		FA	10	μM	27	1×10^6	Survivors	0.000027	
		FA	20	μM	50	1×10^6	Survivors	0.000050	
		FA	40	μM	62	1×10^6	Survivors	0.000062	
		Control	0	μM	0	1×10^6	Survivors	0.000000	
		BaA	20	μM	12	1×10^6	Survivors	0.000012	
		BaA	50	μM	29	1×10^6	Survivors	0.000029	
		BaA	100	μM	34	1×10^6	Survivors	0.000034	
		BaA	150	μM	64	1×10^6	Survivors	0.000064	
		Control	0	μM	0	1×10^6	Survivors	0.000000	
		CH	20	μM	17	1×10^6	Survivors	0.000017	
		CH	50	μM	26	1×10^6	Survivors	0.000026	
		CH	100	μM	30	1×10^6	Survivors	0.000030	
		Control	0	μM	0	1×10^6	Survivors	0.000000	
		Tphen	50	μM	10	1×10^6	Survivors	0.000010	
		Tphen	100	μM	20	1×10^6	Survivors	0.000020	
		Tphen	200	μM	35	1×10^6	Survivors	0.000035	
		Control	0	μM	3	1×10^6	Survivors	0.000003	
		CPcdP	23	μM	11	1×10^6	Survivors	0.000011	
		CPcdP	47	μM	24	1×10^6	Survivors	0.000024	
		CPcdP	88	μM	27	1×10^6	Survivors	0.000027	
24670	Durant et al., 1999	BaP	1,000	ng/mL	170	1×10^6	Survivors	0.00017	
		BaP	1,000	ng/mL	170	1×10^6	Survivors	0.00017	
		BaP	1,000	ng/mL	200	1×10^6	Survivors	0.00020	
		BaP	1,000	ng/mL	200	1×10^6	Survivors	0.00020	
		BaP	1,000	ng/mL	160	1×10^6	Survivors	0.00016	

Table C-9. In vitro mammalian mutagenicity: dose response data

Record number	Reference	PAH	Dose	Dose units	Mutants	In number	Units	% response	Comments
		BaP	1,000	ng/mL	170	1×10^6	Survivors	0.00017	
		BaP	1,000	ng/mL	190	1×10^6	Survivors	0.00019	
		BaP	1,000	ng/mL	200	1×10^6	Survivors	0.00020	
		BaP	1,000	ng/mL	210	1×10^6	Survivors	0.00021	
		Averaged BaP	1,000	ng/mL	186	1×10^6	Survivors	0.00019	
		Averaged controls	0	ng/mL	20	1×10^6	Survivors	0.00002	
		Control	0	ng/mL	18	1×10^6	Survivors	0.000018	
		BaPery	0.1	ng/mL	21	1×10^6	Survivors	0.000021	
		BaPery	0.3	ng/mL	23	1×10^6	Survivors	0.000023	
		BaPery	1	ng/mL	28	1×10^6	Survivors	0.000028	
		BaPery	3	ng/mL	50	1×10^6	Survivors	0.000050	
		BaPery	10	ng/mL	82	1×10^6	Survivors	0.000082	
		BaPery	100	ng/mL	200	1×10^6	Survivors	0.00020	
		Control	0	ng/mL	18	1×10^6	Survivors	0.000018	
		BbPery	1	ng/mL	19	1×10^6	Survivors	0.000019	
		BbPery	3	ng/mL	22	1×10^6	Survivors	0.000022	
		BbPery	10	ng/mL	32	1×10^6	Survivors	0.000032	
		BbPery	100	ng/mL	54	1×10^6	Survivors	0.000054	
		Control	0	ng/mL	21	1×10^6	Survivors	0.000021	
		DBaef	1	ng/mL	29	1×10^6	Survivors	0.000029	
		DBaef	10	ng/mL	72	1×10^6	Survivors	0.000072	
		DBaef	100	ng/mL	190	1×10^6	Survivors	0.00019	
		DBaef	1,000	ng/mL	np	1×10^6	Survivors		Not plated due to excessive toxicity
		Control	0	ng/mL	21	1×10^6	Survivors	0.000021	
		DBaef	1	ng/mL	21	1×10^6	Survivors	0.000021	
		DBaef	10	ng/mL	37	1×10^6	Survivors	0.000037	
		DBaef	100	ng/mL	81	1×10^6	Survivors	0.000081	
		DBaef	1,000	ng/mL	190	1×10^6	Survivors	0.00019	
		Control	0	ng/mL	19	1×10^6	Survivors	0.000019	
		DBahP	0.1	ng/mL	24	1×10^6	Survivors	0.000024	

Table C-9. In vitro mammalian mutagenicity: dose response data

Record number	Reference	PAH	Dose	Dose units	Mutants	In number	Units	% response	Comments
		DBahP	1	ng/mL	24	1×10^6	Survivors	0.000024	
		DBahP	10	ng/mL	46	1×10^6	Survivors	0.000046	
		DBahP	100	ng/mL	80	1×10^6	Survivors	0.000080	
		Control	0	ng/mL	20	1×10^6	Survivors	0.000020	
		DBaiP	0.3	ng/mL	20	1×10^6	Survivors	0.000020	
		DBaiP	1	ng/mL	35	1×10^6	Survivors	0.000035	
		DBaiP	10	ng/mL	88	1×10^6	Survivors	0.000088	
		DBaiP	100	ng/mL	150	1×10^6	Survivors	0.00015	
		Control	0	ng/mL	21	1×10^6	Survivors	0.000021	
		DBelP	10	ng/mL	28	1×10^6	Survivors	0.000028	
		DBelP	100	ng/mL	34	1×10^6	Survivors	0.000034	
		DBelP	1,000	ng/mL	55	1×10^6	Survivors	0.000055	
		Control	0	ng/mL	21	1×10^6	Survivors	0.000021	
		N23aP	0.1	ng/mL	23	1×10^6	Survivors	0.000023	
		N23aP	1	ng/mL	44	1×10^6	Survivors	0.000044	
		N23aP	10	ng/mL	84	1×10^6	Survivors	0.000084	
		N23aP	100	ng/mL	94	1×10^6	Survivors	0.000094	
		N23aP	1,000	ng/mL	73	1×10^6	Survivors	0.000073	
		Control	0	ng/mL	19	1×10^6	Survivors	0.000019	
		N23eP	1	ng/mL	20	1×10^6	Survivors	0.000020	
		N23eP	10	ng/mL	41	1×10^6	Survivors	0.000041	
		N23eP	100	ng/mL	74	1×10^6	Survivors	0.000074	
		N23eP	1,000	ng/mL	98	1×10^6	Survivors	0.00010	
14250	Hass et al., 1982	Control	0	$\mu\text{g/mL}$	4	1×10^6	CFC	0.0000040	
		BaP	0.30	$\mu\text{g/mL}$	267	1×10^6	CFC	0.00027	
		BaP	1.00	$\mu\text{g/mL}$	293	1×10^6	CFC	0.00029	
		DBaiP	0.03	$\mu\text{g/mL}$	124	1×10^6	CFC	0.00012	
		DBaiP	0.10	$\mu\text{g/mL}$	289	1×10^6	CFC	0.00029	
		DBaiP	0.30	$\mu\text{g/mL}$	1211	1×10^6	CFC	0.00121	
		DBahP	0.03	$\mu\text{g/mL}$	110	1×10^6	CFC	0.00011	
		DBahP	0.10	$\mu\text{g/mL}$	264	1×10^6	CFC	0.00026	
		DBahP	0.30	$\mu\text{g/mL}$	668	1×10^6	CFC	0.00067	

Table C-9. In vitro mammalian mutagenicity: dose response data

Record number	Reference	PAH	Dose	Dose units	Mutants	In number	Units	% response	Comments
18740	Huberman and Sachs, 1976	Control	0	µg/mL	6	1 × 10 ⁵	Survivors	0.000060	
		BaP	1	µg/mL	425	1 × 10 ⁵	Survivors	0.00425	
		DBacA	1	µg/mL	22	1 × 10 ⁵	Survivors	0.00022	
		DBahA	1	µg/mL	17	1 × 10 ⁵	Survivors	0.00017	
18990	Jotz and Mitchell, 1981	Control	0	µg/mL	80	1 × 10 ⁶	Survivors	0.000080	
		BaP	4.5	µg/mL	224	1 × 10 ⁶	Survivors	0.00022	With metabolic activation
		Control	0	µg/mL	116	1 × 10 ⁶	Survivors	0.00012	
		Pyr	10.6	µg/mL	150	1 × 10 ⁶	Survivors	0.00015	With metabolic activation
24720	Kligerman et al., 1986	Control	0	nmol/mL	92	1 × 10 ⁶	Survivors	0.00009	Avg. of 2 experiments
		BaP	2.0	nmol/mL	258	1 × 10 ⁶	Survivors	0.00026	
		BaP	3.0	nmol/mL	417	1 × 10 ⁶	Survivors	0.00042	
		BaP	4.0	nmol/mL	557	1 × 10 ⁶	Survivors	0.00056	
		Control	0	nmol/mL	90	1 × 10 ⁶	Survivors	0.00009	
		BIAC	0.5	nmol/mL	93	1 × 10 ⁶	Survivors	0.00009	
		BIAC	2.5	nmol/mL	197	1 × 10 ⁶	Survivors	0.00020	
		BIAC	5.0	nmol/mL	374	1 × 10 ⁶	Survivors	0.00037	
19180	Krahn and Heidelberger, 1977	Control	0	nmol/mL	1.7	1 × 10 ⁵	Survivors	0.000017	
		BaP	15.9	nmol/mL	14	1 × 10 ⁵	Survivors	0.000136	3-MC S9; 40% survival
		Control	0	nmol/mL	1.5	1 × 10 ⁵	Survivors	0.000015	
		BaA	46.5	nmol/mL	6.5	1 × 10 ⁵	Survivors	0.000065	3-MC S9; 40% survival
24680	Lafleur et al., 1993	Control	0	µg/mL	1.2	1 × 10 ⁶	Survivors	0.0000012	
		BaP	0.02	µg/mL	4.8	1 × 10 ⁶	Survivors	0.0000048	
		BaP	0.06	µg/mL	24	1 × 10 ⁶	Survivors	0.000024	
		BaP	0.2	µg/mL	25	1 × 10 ⁶	Survivors	0.000025	
		BaP	1	µg/mL	39	1 × 10 ⁶	Survivors	0.000039	
		BaP	5	µg/mL	56	1 × 10 ⁶	Survivors	0.000056	
		Control	0	µg/mL	1.8	1 × 10 ⁶	Survivors	0.0000018	
		ACEA	1	µg/mL	6.0	1 × 10 ⁶	Survivors	0.0000060	

Table C-9. In vitro mammalian mutagenicity: dose response data

Record number	Reference	PAH	Dose	Dose units	Mutants	In number	Units	% response	Comments
		ACEA	3	µg/mL	15	1 × 10 ⁶	Survivors	0.000015	
		ACEA	8	µg/mL	21	1 × 10 ⁶	Survivors	0.000021	
		Control	0	µg/mL	2.5	1 × 10 ⁶	Survivors	0.0000025	
		CPcdP	0.03	µg/mL	4.2	1 × 10 ⁶	Survivors	0.0000042	
		CPcdP	0.06	µg/mL	4.9	1 × 10 ⁶	Survivors	0.0000049	
		CPcdP	0.2	µg/mL	5.9	1 × 10 ⁶	Survivors	0.0000059	
		CPcdP	0.6	µg/mL	10	1 × 10 ⁶	Survivors	0.000010	
		CPcdP	2	µg/mL	17	1 × 10 ⁶	Survivors	0.000017	
		Control	0	µg/mL	2.8	1 × 10 ⁶	Survivors	0.0000028	
		CPhiACEA	0.1	µg/mL	12	1 × 10 ⁶	Survivors	0.000012	
		CPhiACEA	0.3	µg/mL	25	1 × 10 ⁶	Survivors	0.000025	
		CPhiACEA	0.8	µg/mL	31	1 × 10 ⁶	Survivors	0.000031	
7550	Li and Lin, 1996	Control	0	ng/mL	2	1 × 10 ⁵	Survivors	0.000020	
		BaP	10	ng/mL	5	1 × 10 ⁵	Survivors	0.000050	
		BaA	10	ng/mL	5.6	1 × 10 ⁵	Survivors	0.000056	
11450	Nesnow et al., 1984	Control	0	µg/mL	16	1 × 10 ⁶	Survivors	0.000016	
		BaP	0.5	µg/mL	10	1 × 10 ⁶	Survivors	0.000010	
		BaP	1.0	µg/mL	46	1 × 10 ⁶	Survivors	0.000046	
		BaP	2.5	µg/mL	72	1 × 10 ⁶	Survivors	0.000072	
		BaP	5.0	µg/mL	206	1 × 10 ⁶	Survivors	0.000206	
		BaP	10.0	µg/mL	215	1 × 10 ⁶	Survivors	0.000215	
		BaP	20.0	µg/mL	293	1 × 10 ⁶	Survivors	0.000293	
		BeAC	1.0	µg/mL	17	1 × 10 ⁶	Survivors	0.000017	
		BeAC	2.5	µg/mL	53	1 × 10 ⁶	Survivors	0.000053	
		BeAC	5.0	µg/mL	435	1 × 10 ⁶	Survivors	0.000435	
		BeAC	10.0	µg/mL	235	1 × 10 ⁶	Survivors	0.000235	
		BeAC	20.0	µg/mL	349	1 × 10 ⁶	Survivors	0.000349	
		BjAC	1.0	µg/mL	24	1 × 10 ⁶	Survivors	0.000024	
		BjAC	2.5	µg/mL	94	1 × 10 ⁶	Survivors	0.000094	
		BjAC	5.0	µg/mL	268	1 × 10 ⁶	Survivors	0.000268	
		BjAC	10.0	µg/mL	225	1 × 10 ⁶	Survivors	0.000225	
		BjAC	20.0	µg/mL	215	1 × 10 ⁶	Survivors	0.000215	

Table C-9. In vitro mammalian mutagenicity: dose response data

Record number	Reference	PAH	Dose	Dose units	Mutants	In number	Units	% response	Comments
		BIAC	1.0	µg/mL	31	1 × 10 ⁶	Survivors	0.000031	
		BIAC	2.5	µg/mL	454	1 × 10 ⁶	Survivors	0.000454	
		BIAC	5.0	µg/mL	320	1 × 10 ⁶	Survivors	0.000320	
		BIAC	10.0	µg/mL	704	1 × 10 ⁶	Survivors	0.000704	
		BIAC	20.0	µg/mL	769	1 × 10 ⁶	Survivors	0.000769	
15630	Raveh and Huberman, 1983	Control	0	µg/mL	3	1 × 10 ⁵	Survivors	0.000030	
		BaP	0.3	µg/mL	25	1 × 10 ⁵	Survivors	0.00025	
		BaP	1	µg/mL	103	1 × 10 ⁵	Survivors	0.0010	
		CPcdP	0.3	µg/mL	9	1 × 10 ⁵	Survivors	0.000090	
		CPcdP	1	µg/mL	20	1 × 10 ⁵	Survivors	0.00020	
15640	Raveh et al., 1982	BaP	0	µg/mL	7	1 × 10 ⁶	CFC	0.0000070	
		BaP	0.3	µg/mL	20	1 × 10 ⁶	CFC	0.000020	
		BaP	1	µg/mL	74	1 × 10 ⁶	CFC	0.000074	
		BaP	3	µg/mL	74	1 × 10 ⁶	CFC	0.000074	
		CPcdP	0	µg/mL	1	1 × 10 ⁶	CFC	0.0000010	
		CPcdP	0.3	µg/mL	5	1 × 10 ⁶	CFC	0.0000047	
		CPcdP	1	µg/mL	10	1 × 10 ⁶	CFC	0.000010	
		CPcdP	3	µg/mL	28	1 × 10 ⁶	CFC	0.000028	
21410	Slaga et al., 1978	Control	0	µM	0.7	1 × 10 ⁴	Survivors	0.000070	
		BaA	4.4	µM	0.9	1 × 10 ⁴	Survivors	0.000090	
		BaA	44.0	µM	2.1	1 × 10 ⁴	Survivors	0.00021	
		BaP	0.4	µM	11.0	1 × 10 ⁴	Survivors	0.0011	
		BaP	1.3	µM	25.0	1 × 10 ⁴	Survivors	0.0025	
		BaP	4.0	µM	99.0	1 × 10 ⁴	Survivors	0.0099	
16190	Vaca et al., 1992	BaP	0	µM	3	1 × 10 ⁵	Survivors	0.000032	
		BaP	2	µM	10	1 × 10 ⁵	Survivors	0.000102	
		BaP	4	µM	23	1 × 10 ⁵	Survivors	0.000229	
		BaP	10	µM	31	1 × 10 ⁵	Survivors	0.000306	
		FA	0	µM	10	1 × 10 ⁵	Survivors	0.000105	
		FA	5	µM	20	1 × 10 ⁵	Survivors	0.000203	
		FA	7.5	µM	27	1 × 10 ⁵	Survivors	0.000274	

Table C-9. In vitro mammalian mutagenicity: dose response data

Record number	Reference	PAH	Dose	Dose units	Mutants	In number	Units	% response	Comments
			10	μM	32	1 × 10 ⁵	Survivors	0.000318	
21900	Wangenheim and Bolcsfoldi, 1988	Control	0	mol/L	61	1 × 10 ⁶	Survivors	0.000061	
		Control	0	mol/L	62	1 × 10 ⁶	Survivors	0.000062	Used average of controls
		Average	0	mol/L	62	1 × 10 ⁶	Survivors	0.000062	
		BaP	0.000001	mol/L	65	1 × 10 ⁶	Survivors	0.000065	
		BaP	0.000005	mol/L	243	1 × 10 ⁶	Survivors	0.000243	
		BaP	0.000010	mol/L	858	1 × 10 ⁶	Survivors	0.00086	
		Control	0	mol/L	68	1 × 10 ⁶	Survivors	0.00007	
		FE	0.0000195	mol/L	92	1 × 10 ⁶	Survivors	0.00009	
		FE	0.0000389	mol/L	91	1 × 10 ⁶	Survivors	0.00009	
		FE	0.0000681	mol/L	114	1 × 10 ⁶	Survivors	0.00011	
		FE	0.000122	mol/L	154	1 × 10 ⁶	Survivors	0.00015	
		FE	0.000170	mol/L	147	1 × 10 ⁶	Survivors	0.00015	
		Control	0	mol/L	125	1 × 10 ⁶	Survivors	0.00013	
		Control	0	mol/L	106	1 × 10 ⁶	Survivors	0.00011	
		Average	0	mol/L	116	1 × 10 ⁶	Survivors	0.00012	
		Pyr	0.0000101	mol/L	162	1 × 10 ⁶	Survivors	0.00016	
		Pyr	0.0000151	mol/L	228	1 × 10 ⁶	Survivors	0.00023	
		Pyr	0.0000202	mol/L	345	1 × 10 ⁶	Survivors	0.00035	
		Pyr	0.0000252	mol/L	418	1 × 10 ⁶	Survivors	0.00042	
		Pyr	0.0000302	mol/L	650	1 × 10 ⁶	Survivors	0.00065	

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Table C-10. In vitro malignant/morphological cell transformation: data use

Record number	Reference	Page	Table number	Figure number	PAHs	Data to be extracted	Basis for RPF	Comment	Notes:
17610	Casto, 1979	54	I and IV		BaP, DBaH _A	TF in number foci per 10 ⁵ surviving cells and dose (µg/mL)	Ratio of slopes	Data on enhancement of viral transformation not used; no straightforward way to model dose-response	Model as incidence data using multistage
17970	DiPaolo et al., 1969	871	3		BaP, DBaH _A , BaA, BeP, DBaC _A	Total transformants, total no. colonies, and dose (µg/mL)	Point estimate		Do not use % transformants; appears to be error for DBaH _A
18020	Dunkel et al., 1981					Use data as reported in 23720 Pienta 1977; report under that record			
18080	Emura et al., 1980	153, 154	I and II		BaP, BbF, BaA, IP	T, number of transformed colonies/1,000 survivals in 10 dishes and dose (µg/mL)	Ratio of slopes		Model as incidence data using multistage
14130	Greb et al., 1980	147	1		BaP, CH, BaA, BbF, DBaH _A , BeP	Relative transformation rate (potency) in %/mmol	Ratio of slopes		Relative transformation potency at LC50. Slope already calculated.
14640	Krolewski et al., 1986	1,648	1		BaP, CPcdP	Transformation frequency per viable cell × 10 ⁻³ ; single dose (5 µM)	Point estimate		Use only BaP and CPcdP alone (not with IVA/AIA)
14700	Laaksonen et al., 1983	62	4		BaP, BaA	Transformation frequency (no. foci/10 ⁵ surviving cells) and dose (µM)	Ratio of slopes		Inverse dose response relationship poss. due to cytotoxicity. Use peak.
14850	Lubet et al., 1983	992	1		BaP, BeP	DwT-III/td (dishes with Type III foci/total dishes) and dose (µg/mL)	Ratio of slopes		Control data in caption (no transformants). Model as incidence data.
24710	Mohapatra et al., 1987	327	1		BaP, BeAC, BjAC, BIAC	Number of dishes scored and percent of dishes with Type II or Type III foci and dose (µg/mL)	Ratio of slope to BaP point estimate	Use BaP incidence as BMR	Convert percent into number of dishes and model as incidence data.
24700	Nesnow et al., 1990	224	1		BaP, BIAC	Anchorage independent colonies/50,000 cells and dose (µg/mL)	Ratio of slopes		Continuous data, no SD for controls; use peak.
7980	Nesnow et al., 1997	1,975	I		BaP, DBaP	Type II and III foci/dish (mean and SD) and dose (µM)	Ratio of slopes		Model as continuous data
7990	Nesnow et al., 1994	2,227	I		BaP, DBaH _A	Type II and III Foci/dish and dose. Use 1 µg/mL dose for DBaH _A and mean foci/dish (in parentheses). Single dose for BaP	Point estimate		

Table C-10. In vitro malignant/morphological cell transformation: data use

Record number	Reference	Page	Table number	Figure number	PAHs	Data to be extracted	Basis for RPF	Comment	Notes:
8000	Nesnow et al., 1993a	28	I		DBkmnoAPH	Peak of Type II and III foci/dish. Use 5 µg/mL dose for DBkmnoAPH and 3 µg/mL dose for BaP. Average number foci/dish across the two experiments	Point estimate		Peak transformation for each compound. DBkmnoAPH reported in paper as CP(3,4)B[a]P
23720	Pienta et al., 1977	648	IV		BaP, BaA, DBahA	Transformed colonies/surviving colonies and dose (µg/mL, in row across)	Ratio of slopes		Model as incidence data using multistage

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Table C-11. In vitro malignant/morphological cell transformation: dose response data

Record number	Reference	PAH	Dose	Dose units	Transformation measure				n	units	% Response	Notes
					Mean	Standard deviation	Standard error	Units				
17610	Casto, 1979	Control	0	µg/mL	0			Foci	100,000	Surviving cells	0	
		BaP	0.62	µg/mL	8			Foci	100,000	Surviving cells	0.00008	
		BaP	1.25	µg/mL	10			Foci	100,000	Surviving cells	0.0001	
		DBahA	1.2	µg/mL	0.5			Foci	100,000	Surviving cells	0.000005	
		DBahA	2.5	µg/mL	1			Foci	100,000	Surviving cells	0.00001	
17970	DiPaolo et al., 1969	Control	0	µg/mL	0			Transformants	354	No. surviving	0	
		BaP	10	µg/mL	8			Transformants	138	No. surviving	0.058	
		DBahA	10	µg/mL	11			Transformants	354	No. surviving	0.031	
		BaA	10	µg/mL	2			Transformants	190	No. surviving	0.011	
		BeP	10	µg/mL	1			Transformants	172	No. surviving	0.0058	
		DBacA	10	µg/mL	2			Transformants	181	No. surviving	0.011	
18080	Emura et al., 1980	Control	0	µg/mL	0			Transformed colonies	1,000	Survivals	0	
	Expt 1	BaP	0.01	µg/mL	0			Transformed colonies	1,000	Survivals	0	
		BaP	0.05	µg/mL	1.1			Transformed colonies	1,000	Survivals	0.0011	
		BaP	0.1	µg/mL	2.9			Transformed colonies	1,000	Survivals	0.0029	
		BaP	0.25	µg/mL	5.3			Transformed colonies	1,000	Survivals	0.0053	
		BaP	0.5	µg/mL	6.8			Transformed colonies	1,000	Survivals	0.0068	
		BbF	0.025	µg/mL	0			Transformed colonies	1,000	Survivals	0	
		BbF	0.1	µg/mL	0.4			Transformed colonies	1,000	Survivals	0.00040	
		BbF	0.25	µg/mL	0.3			Transformed colonies	1,000	Survivals	0.00030	
		BbF	0.5	µg/mL	0.6			Transformed colonies	1,000	Survivals	0.00060	
		BbF	1	µg/mL	1.2			Transformed colonies	1,000	Survivals	0.0012	

Table C-11. In vitro malignant/morphological cell transformation: dose response data

Record number	Reference	PAH	Dose	Dose units	Transformation measure				n	units	% Response	Notes
					Mean	Standard deviation	Standard error	Units				
		BaA	0.025	µg/mL	0			Transformed colonies	1,000	Survivals	0	
		BaA	0.1	µg/mL	0.3			Transformed colonies	1,000	Survivals	0.00030	
		BaA	0.25	µg/mL	0.3			Transformed colonies	1,000	Survivals	0.00030	
		BaA	0.5	µg/mL	0.6			Transformed colonies	1,000	Survivals	0.00060	
		BaA	1	µg/mL	1			Transformed colonies	1,000	Survivals	0.0010	
	Expt 2	Control	0	µg/mL	0			Transformed colonies	1,000	Survivals	0	
		BaP	0.01	µg/mL	0.4			Transformed colonies	1,000	Survivals	0.00040	
		BaP	0.05	µg/mL	1			Transformed colonies	1,000	Survivals	0.0010	
		BaP	0.1	µg/mL	2.9			Transformed colonies	1,000	Survivals	0.0029	
		BaP	0.25	µg/mL	4.6			Transformed colonies	1,000	Survivals	0.0046	
		BaP	0.5	µg/mL	7.8			Transformed colonies	1,000	Survivals	0.0078	
		IP	0.025	µg/mL	0			Transformed colonies	1,000	Survivals	0	
		IP	0.1	µg/mL	0.3			Transformed colonies	1,000	Survivals	0.00030	
		IP	0.25	µg/mL	0.3			Transformed colonies	1,000	Survivals	0.00030	
		IP	0.5	µg/mL	0.7			Transformed colonies	1,000	Survivals	0.00070	
		IP	1	µg/mL	1			Transformed colonies	1,000	Survivals	0.0010	
14130	Greb et al., 1980	BaP	NA		277			%/mmol				
		CH	NA		37			%/mmol				
		BaA	NA		13.9			%/mmol				

Table C-11. In vitro malignant/morphological cell transformation: dose response data

Record number	Reference	PAH	Dose	Dose units	Transformation measure				n	units	% Response	Notes
					Mean	Standard deviation	Standard error	Units				
		BbF	NA		11.5			%/mmol				
		DBahA	NA		0.3			%/mmol				
		BeP	NA		3.1			%/mmol				
14640	Krolewski et al., 1986	Control	0	µM	0			Transformation frequency	1,000	Viable cells	0	
		BaP	5	µM	5.5	0.7		Transformation frequency	1,000	Viable cells	0.0055	
		CPcdP	5	µM	1.7	0.3		Transformation frequency	1,000	Viable cells	0.0017	
14700	Laaksonen et al., 1983	Control	0	µM	0			Foci	1 × 10 ⁵	Surviving cells	0	
		BaP	5	µM	0.8			Foci	1 × 10 ⁵	Surviving cells	0.0000080	Inverse dose response relationship poss. due to cytotoxicity. Use peak.
		BaP	10	µM	0.9			Foci	1 × 10 ⁵	Surviving cells	0.0000090	
		BaP	20	µM	0.3			Foci	1 × 10 ⁵	Surviving cells	0.0000030	
		BaP	40	µM	0.4			Foci	1 × 10 ⁵	Surviving cells	0.0000040	
		Control	0		0			Foci	1 × 10 ⁵	Surviving cells	0	
		BaA	11	µM	1.8			Foci	1 × 10 ⁵	Surviving cells	0.000018	Inverse dose response relationship poss. due to cytotoxicity. Use peak.
		BaA	22	µM	1.5			Foci	1 × 10 ⁵	Surviving cells	0.000015	
		BaA	44	µM	1.1			Foci	1 × 10 ⁵	Surviving cells	0.000011	
		BaA	88	µM	0.8			Foci	1 × 10 ⁵	Surviving cells	0.0000080	
14850	Lubet et al., 1983	Control	0	µg/mL	0			Dishes with Type III foci		Total dishes	0	
		BaP	1	µg/mL	1			Dishes with Type III foci	15	Total dishes	0.067	
		BaP	3	µg/mL	4			Dishes with Type III foci	15	Total dishes	0.267	
		BaP	10	µg/mL	5			Dishes with Type III foci	15	Total dishes	0.333	
		BeP	10	µg/mL	0			Dishes with Type III foci	15	Total dishes	0	

Table C-11. In vitro malignant/morphological cell transformation: dose response data

Record number	Reference	PAH	Dose	Dose units	Transformation measure				n	units	% Response	Notes
					Mean	Standard deviation	Standard error	Units				
		BeP	30	µg/mL	1			Dishes with Type III foci	15	Total dishes	0.067	
		BeP	100	µg/mL	7			Dishes with Type III foci	15	Total dishes	0.467	
24710	Mohapatra et al., 1987	Control	0	µg/mL	0			Dishes with Type II or III foci	48	Dishes scored	0	
		BaP	1	µg/mL	44			Dishes with Type II or III foci	48	Dishes scored	0.92	
		BjAC	0.01	µg/mL	2			Dishes with Type II or III foci	48	Dishes scored	0.04	
		BjAC	0.05	µg/mL	5			Dishes with Type II or III foci	48	Dishes scored	0.1	
		BjAC	0.5	µg/mL	34			Dishes with Type II or III foci	48	Dishes scored	0.71	
		BjAC	1	µg/mL	45			Dishes with Type II or III foci	48	Dishes scored	0.94	
		BjAC	2	µg/mL	48			Dishes with Type II or III foci	48	Dishes scored	1	
		Control	0	µg/mL	0			Dishes with Type II or III foci	60	Dishes scored	0	
		BaP	1	µg/mL	50			Dishes with Type II or III foci	60	Dishes scored	0.83	
		BIAC	0.5	µg/mL	8			Dishes with Type II or III foci	60	Dishes scored	0.13	
		BIAC	1	µg/mL	14			Dishes with Type II or III foci	60	Dishes scored	0.26	
		BIAC	2.5	µg/mL	31			Dishes with Type II or III foci	60	Dishes scored	0.52	
		BIAC	5	µg/mL	42			Dishes with Type II or III foci	60	Dishes scored	0.7	
		BIAC	10	µg/mL	51			Dishes with Type II or III foci	60	Dishes scored	0.85	
		Control	0	µg/mL	0			Dishes with Type II or III foci	36	Dishes scored	0	
		BaP	1	µg/mL	31			Dishes with Type II or III foci	36	Dishes scored	0.86	

Table C-11. In vitro malignant/morphological cell transformation: dose response data

Record number	Reference	PAH	Dose	Dose units	Transformation measure			Units	n	units	% Response	Notes
					Mean	Standard deviation	Standard error					
		BeAC	0.5	µg/mL	4			Dishes with Type II or III foci	36	Dishes scored	0.11	
		BeAC	1	µg/mL	6			Dishes with Type II or III foci	36	Dishes scored	0.17	
		BeAC	2.5	µg/mL	13			Dishes with Type II or III foci	36	Dishes scored	0.36	
		BeAC	5	µg/mL	15			Dishes with Type II or III foci	36	Dishes scored	0.42	
		BeAC	10	µg/mL	21			Dishes with Type II or III foci	36	Dishes scored	0.58	
24700	Nesnow et al., 1990	Acetone	0	µg/mL	25			Anchorage independent colonies/50,000 cells				
		BaP	0.1	µg/mL	43	14.7		Anchorage independent colonies/50,000 cells				
		BaP	0.5	µg/mL	42	20.7		Anchorage independent colonies/50,000 cells				
		BaP	2.5	µg/mL	39	19.5		Anchorage independent colonies/50,000 cells				
		BaP	10	µg/mL	72	23.1		Anchorage independent colonies/50,000 cells				
		Acetone	0	µg/mL	30			Anchorage independent colonies/50,000 cells				
		BIAC	0.1	µg/mL	74	5.2		Anchorage independent colonies/50,000 cells				

Table C-11. In vitro malignant/morphological cell transformation: dose response data

Record number	Reference	PAH	Dose	Dose units	Transformation measure			Units	n	units	% Response	Notes
					Mean	Standard deviation	Standard error					
		BIAC	0.5	µg/mL	68	14.4		Anchorage independent colonies/50,000 cells				
		BIAC	2.5	µg/mL	123	15.6		Anchorage independent colonies/50,000 cells				
		BIAC	10	µg/mL	150	16.8		Anchorage independent colonies/50,000 cells				
7980	Nesnow et al., 1997	Control	0	µM	0	0		Type II and III foci/dish				
		BaP	0.4	µM	0.44	0.24		Type II and III foci/dish				
		BaP	1.2	µM	1.25	0.15		Type II and III foci/dish				
		BaP	4	µM	2.54	0.56		Type II and III foci/dish				
		DBaP	0.0033	µM	0.14	0.35		Type II and III foci/dish				
		DBaP	0.1	µM	1	0.24		Type II and III foci/dish				
		DBaP	0.33	µM	1.74	0.78		Type II and III foci/dish				
7990	Nesnow et al., 1994	Control	0	µg/mL	0.06	0.10		Type II and III foci/dish				
		BaP	1	µg/mL	1	0.43		Type II and III foci/dish				
		DBaH	0.25	µg/mL	0.23	0.21		Type II and III foci/dish				
		DBaH	0.5	µg/mL	0.25	0.33		Type II and III foci/dish				
		DBaH	1	µg/mL	0.43	0.11		Type II and III foci/dish				

Table C-11. In vitro malignant/morphological cell transformation: dose response data

Record number	Reference	PAH	Dose	Dose units	Transformation measure				n	units	% Response	Notes
					Mean	Standard deviation	Standard error	Units				
		DBahA	2.5	µg/mL	0.29	0.085		Type II and III foci/dish				
8000	Nesnow et al., 1993a	Control	0	µg/mL	0			Type II and III foci/dish				
		BaP	0.3	µg/mL	0.48			Type II and III foci/dish				
		BaP	1	µg/mL	0.665			Type II and III foci/dish				
		BaP	3	µg/mL	1.4			Type II and III foci/dish				
		Control	0	µg/mL	0			Type II and III foci/dish				
		DBkmnoA PH	0.5	µg/mL	0.23			Type II and III foci/dish				
		DBkmnoA PH	1	µg/mL	0.52			Type II and III foci/dish				
		DBkmnoA PH	2.5	µg/mL	0.605			Type II and III foci/dish				
		DBkmnoA PH	5	µg/mL	1.085			Type II and III foci/dish				
23720	Pienta et al., 1977	Control	0	µg/mL	0			Transformed colonies	504	Surviving colonies	0	BaP and BaA data also reported in 18020 Dunkel 1981
		BaP	1	µg/mL	1			Transformed colonies	393	Surviving colonies	0.0025	
		BaP	5	µg/mL	2			Transformed colonies	406	Surviving colonies	0.0049	
		BaP	10	µg/mL	3			Transformed colonies	434	Surviving colonies	0.0069	
		BaP	20	µg/mL	5			Transformed colonies	410	Surviving colonies	0.0122	
		BaP	40	µg/mL	4			Transformed colonies	427	Surviving colonies	0.0094	
		Control	0	µg/mL	0			Transformed colonies	229	Surviving colonies	0	

Table C-11. In vitro malignant/morphological cell transformation: dose response data

Record number	Reference	PAH	Dose	Dose units	Transformation measure				n	units	% Response	Notes
					Mean	Standard deviation	Standard error	Units				
		BaA	0.1	µg/mL	1			Transformed colonies	225	Surviving colonies	0.0044	
		BaA	0.5	µg/mL	2			Transformed colonies	252	Surviving colonies	0.0079	
		BaA	1	µg/mL	2			Transformed colonies	193	Surviving colonies	0.0104	
		BaA	5	µg/mL	1			Transformed colonies	312	Surviving colonies	0.0032	
		BaA	10	µg/mL	7			Transformed colonies	250	Surviving colonies	0.028	
		Control	0	µg/mL	0			Transformed colonies	229	Surviving colonies	0	
		DBahA	0.1	µg/mL	0			Transformed colonies	219	Surviving colonies	0	
		DBahA	0.5	µg/mL	4			Transformed colonies	233	Surviving colonies	0.0172	
		DBahA	1	µg/mL	4			Transformed colonies	217	Surviving colonies	0.0184	
		DBahA	5	µg/mL	5			Transformed colonies	270	Surviving colonies	0.0185	
		DBahA	10	µg/mL	0			Transformed colonies	232	Surviving colonies	0	

Table C-12. In vitro DNA adducts: data use

Record number	Reference	Page	Table number	Figure number	PAHs	Data to be extracted	Basis for RPF	Comment	Notes:
16890	Allen and Coombs, 1980	245	1		BaP, BaA	μmol compound/mol DNA P ₁	Point estimate	Adducts in nuclear and mitochondrial DNA	Calculate separate RPFs for nuclear and mitochondrial DNA
6300	Binkova et al., 2000	62		3	BaP, DBaP	Adducts at each dose level	Ratio of slopes	Slope of adduct vs. dose curve	May need to drop high dose data for adequate fit
9510	Bryla and Weyand, 1992	39	1		BaP, BaA, DBaC	Adducts at each dose level	Ratio of slopes	Slope of adduct vs. dose curve under light conditions (max response for all compounds)	
22800	Grover and Sims, 1968	160	1		BaP, DBaA, DBaC, BaA, Pyr, PH	Reaction with DNA	Point estimate		
10660	Johnsen et al., 1998	80		2	BjAC, BIAC, BaP	Total adduct levels in human lymphocytes and HL-60 cells	Point estimate	Total adducts formed in human lymphocytes or HL-60 cells	Calc RPFs separately by cell type
10670	Johnsen et al., 1997	196	II		BjAC, BIAC, BaP	DNA adduct levels in PCB-treated rat lung cells	Point estimate	Adducts in PCB-treated rat lung Clara and Type 2 cells	Calc RPFs separately by cell type
7870	Melendez-Colon et al., 2000	13		2	BaP, DBaP	Stable DNA adducts at each dose level	Ratio of slopes	Slope of adduct vs. dose curve at two doses	
21200	Segerback and Vodicka, 1993	2,465		3	Pyr, BghiP, FA, DBaA, BbF, BaP, BaA, CH	Total adduct levels	Point estimate	Total adduct level in optimized nuclease P1 adduct enrichment procedure	

Table C-13. In vitro DNA adducts: dose response data

Record number	Reference	PAH	Dose	Dose units	DNA Adducts			n	Units	Notes
					Mean	Standard deviation	Adduct units			
16890	Allen and Coombs, 1980	BaP	0.235	µg/mL	7.5	1.9	µmol/mol DNA P			Nuclear DNA
		BaA	0.644	µg/mL	0.44	0.11	µmol/mol DNA P			Nuclear DNA
		BaP	0.235	µg/mL	413	164	µmol/mol DNA P			Mitochondrial DNA
		BaA	0.644	µg/mL	104	40.2	µmol/mol DNA P			Mitochondrial DNA
6300	Binkova et al., 2000	BaP	0.010	µM	1.8	1.16	Adducts	1 × 10 ⁸	Nucleotides	
			0.10	µM	18	7.18	Adducts	1 × 10 ⁸	Nucleotides	
			0.40	µM	95	39.4	Adducts	1 × 10 ⁸	Nucleotides	
			1.0	µM	258	115	Adducts	1 × 10 ⁸	Nucleotides	
			4.0	µM	205	81.9	Adducts	1 × 10 ⁸	Nucleotides	
			10	µM	69	21.9	Adducts	1 × 10 ⁸	Nucleotides	
			40	µM	37	10.8	Adducts	1 × 10 ⁸	Nucleotides	
		DBaP	0.010	µM	179	55.3	Adducts	1 × 10 ⁸	Nucleotides	
			0.020	µM	534	52.6	Adducts	1 × 10 ⁸	Nucleotides	
			0.040	µM	1,304	375	Adducts	1 × 10 ⁸	Nucleotides	
			0.080	µM	1,696	644	Adducts	1 × 10 ⁸	Nucleotides	
			0.10	µM	2,317	774	Adducts	1 × 10 ⁸	Nucleotides	
			0.40	µM	1,971	729	Adducts	1 × 10 ⁸	Nucleotides	
			1.0	µM	632	170	Adducts	1 × 10 ⁸	Nucleotides	
9510	Bryla and Weyand, 1992	BaP	0.12	nmol	0.17		Adducts	1 × 10 ⁷	Nucleotides	Light conditions; max for BaP and others
		BaP	12	nmol	1.37		Adducts	1 × 10 ⁷	Nucleotides	
		BaP	120	nmol	2.21		Adducts	1 × 10 ⁷	Nucleotides	
		BaP	600	nmol	5.45		Adducts	1 × 10 ⁷	Nucleotides	
		BaA	0.12	nmol	0.15		Adducts	1 × 10 ⁷	Nucleotides	
		BaA	12	nmol	0.09		Adducts	1 × 10 ⁷	Nucleotides	
		BaA	120	nmol	0.8		Adducts	1 × 10 ⁷	Nucleotides	

Table C-13. In vitro DNA adducts: dose response data

Record number	Reference	PAH	Dose	Dose units	DNA Adducts			n	Units	Notes
					Mean	Standard deviation	Adduct units			
		BaA	600	nmol	0.95		Adducts	1×10^7	Nucleotides	
		DBacA	0.12	nmol	0		Adducts	1×10^7	Nucleotides	
		DBacA	12	nmol	0.06		Adducts	1×10^7	Nucleotides	
		DBacA	120	nmol	0.57		Adducts	1×10^7	Nucleotides	
		DBacA	600	nmol	1.76		Adducts	1×10^7	Nucleotides	
22800	Grover and Sims, 1968	BaP	5	µg	1.41		µmol/g-atom of DNA P			
		DBahA	5	µg	0.44		µmol/g-atom of DNA P			
		DBacA	5	µg	0.56		µmol/g-atom of DNA P			
		BaA	5	µg	0.7		µmol/g-atom of DNA P			
		Pyr	5	µg	0.31		µmol/g-atom of DNA P			
		PH	5	µg	0.05		µmol/g-atom of DNA P			
10670	Johnsen et al., 1997	BaP	30	µg/mL	0.05		fmol adducts/µg DNA			Clara cells
		BjAC	30	µg/mL	0.15		fmol adducts/µg DNA			Clara cells
		BIAC	30	µg/mL	0.24		fmol adducts/µg DNA			Clara cells
		BaP	30	µg/mL	0.02		fmol adducts/µg DNA			Type 2 cells
		BjAC	30	µg/mL	0.06		fmol adducts/µg DNA			Type 2 cells
		BIAC	30	µg/mL	0.03		fmol adducts/µg DNA			Type 2 cells
10660	Johnsen et al., 1998	BaP	30	µg/mL	0.333	0.093	fmol adducts/µg DNA	3		Human lymphocytes
		BjAC	30	µg/mL	0.110	0.026	fmol adducts/µg DNA	3		Human lymphocytes
		BIAC	30	µg/mL	1.089	0.595	fmol adducts/µg DNA	3		Human Lymphocytes

Table C-13. In vitro DNA adducts: dose response data

Record number	Reference	PAH	Dose	Dose units	DNA Adducts			n	Units	Notes
					Mean	Standard deviation	Adduct units			
		BaP	30	µg/mL	0.239	0.172	fmol adducts/µg DNA	3		HL-60 Cells
		BjAC	30	µg/mL	0.149	0.146	fmol adducts/µg DNA	3		HL-60 Cells
		BIAC	30	µg/mL	0.942	0.344	fmol adducts/µg DNA	3		HL-60 Cells
7870	Melendez-Colon et al., 2000	BaP	1	µm	18	8.07	Stable adducts	1 × 10 ⁶	Nucleotides	
		BaP	2	µm	34	6.46	Stable adducts	1 × 10 ⁶	Nucleotides	
		DBaP	1	µm	254	4.30	Stable adducts	1 × 10 ⁶	Nucleotides	
		DBaP	2	µm	348	17.20	Stable adducts	1 × 10 ⁶	Nucleotides	
21200	Segeberback and Vodicka, 1993	BaP	100	mM	15		µmol adducts per mol dNp			
		Pyr	100	mM	0.14		µmol adducts per mol dNp			
		BghiP	100	mM	0.50		µmol adducts per mol dNp			
		FA	100	mM	1.5		µmol adducts per mol dNp			
		DBahA	100	mM	2.8		µmol adducts per mol dNp			
		BbF	100	mM	3.7		µmol adducts per mol dNp			
		BaA	100	mM	30		µmol adducts per mol dNp			
		CH	100	mM	50		µmol adducts per mol dNp			

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Table C-14. In vitro DNA damage: data use

Record number	Reference	Page	Table number	Figure number	PAHs	Data to be extracted	Basis for RPF	Comment	Notes:
16840	Agrelo and Amos, 1981	531	2		BaP, Pyr	Hydroxyurea inhibited ³ H Thymidine incorporation into cells (dpm) and dose (µg/mL). Use 10 µg/mL dose for BaP and 100 µg/mL dose for pyrene.	Point estimate		
23790	Ichinotsubo et al., 1977	56	Table II		BaP, DBaiP, DBahA	Use column designated JC5519 +S9 for BaP, DBaiP, and DBahA; dose as µg/well and response as diameter of zone of inhibition (mm). The control is wild type strain AB1157	Point estimate	<i>E. coli</i> Rec BC, S9 identification unknown	
10660	Johnsen et al., 1998	82		4	BaP, BjaC, BIAC	DNA damage (NAAC, 10 ⁻³ h ⁻¹), std dev and dose (µg/mL) for both human lymphocytes and HL-60 cells. Use 24 h + 1 h AraC/HU data (crosshatched bars)	Ratio of slopes (human lymphocytes); point estimates (HL-60 cells)		Model as continuous data.
19740	Martin et al., 1978	2,624	1		BaP, BeP, BaA, DBaC, DBahA	Maximum dpm/µg DNA above background and dose (M). Dose is in column marked "M".	Point estimate	Background already subtracted	
19830	Mersch-Sundermann et al., 1992	3-6	2		BaP, AA, BaA, BbF, BghiF, BjF, BbFE, BghiP, BeP, CH, DBaC, DBahA, DBaP, DBahP, DBaiP, FA, IP, PH, Tphen	SOS induction potential (SOSIP) for assay (+S9) for each compound (already incorporates dose)	Ratio of SOSIPs	SOSIP reported in text as slope of steepest portion of the induction factor (IF) dose-response curve.	No modeling necessary; slopes reported in text.
20810	Robinson and Mitchell, 1981	520	1		BaP, Pyr	Maximum ³ H-TDR incorporation and dose (test concentration in µg/mL in parentheses after maximum) for rows with metabolic activation (+). Use compound-specific background ³ H -TDR incorporation in same row.	Point estimate		
20940	Rossmann et al., 1991	354	2		BaP, AC, DBaC, DBahA, PH	Max enhancement of prophage induction over background and dose (amount at max, in µg/well) for those rows with S9 (+ rows).	Point estimate	Background already addressed	
21730	Tong et al., 1981b	480	I		BaP, BaA	DNA repair grains/nucleus, std dev, and dose (M). Four doses BaA, three doses BaP and DMSO control.	Ratio of slopes		Model as continuous data.

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Table C-15. In vitro DNA damage: dose response data

Record number	Reference	PAH	Dose	Dose units	Endpoint	DNA Damage			n	Notes
						Mean	SD	Units		
16840	Agrelo and Amos, 1981	Control	0	µg/mL	Unscheduled DNA synthesis	177		dpm		HU inhibited
		BaP	0.001	µg/mL	Unscheduled DNA synthesis	195		dpm		HU inhibited
		BaP	0.01	µg/mL	Unscheduled DNA synthesis	126		dpm		HU inhibited
		BaP	0.1	µg/mL	Unscheduled DNA synthesis	262		dpm		HU inhibited
		BaP	1	µg/mL	Unscheduled DNA synthesis	818		dpm		HU inhibited
		BaP	10	µg/mL	Unscheduled DNA synthesis	2,270		dpm		HU inhibited
		BaP	100	µg/mL	Unscheduled DNA synthesis	819		dpm		HU inhibited
		BaP	1,000	µg/mL	Unscheduled DNA synthesis	373		dpm		HU inhibited
		Control	0	µg/mL	Unscheduled DNA synthesis	1,168		dpm		HU inhibited
		Pyr	0.032	µg/mL	Unscheduled DNA synthesis	1,293		dpm		HU inhibited
		Pyr	0.16	µg/mL	Unscheduled DNA synthesis	1,192		dpm		HU inhibited
		Pyr	0.8	µg/mL	Unscheduled DNA synthesis	1,367		dpm		HU inhibited
		Pyr	4	µg/mL	Unscheduled DNA synthesis	1,510		dpm		HU inhibited
		Pyr	20	µg/mL	Unscheduled DNA synthesis	1,694		dpm		HU inhibited
		Pyr	100	µg/mL	Unscheduled DNA synthesis	1,716		dpm		HU inhibited
23790	Ichinotsubo et al., 1977	Control	0		DNA damage	0		Diameter of zone of inhibition mm		
		BaP	70	µg/well	DNA damage	6		Diameter of zone of inhibition mm		
		Control	0		DNA damage	0		Diameter of zone of inhibition mm		
		DBaiP	600	µg/well	DNA damage	10		Diameter of zone of inhibition mm		
		Control	0		DNA damage	0		Diameter of zone of inhibition mm		
		DBahA	25	µg/well	DNA damage	10		Diameter of zone of inhibition mm		
10660	Johnsen et al., 1998	DMSO	0	µg/mL	DNA damage	4.4	1.3	NAAC, 10 ⁻³ h ⁻¹	3	Human lymphocytes with AraC/HU

Table C-15. In vitro DNA damage: dose response data

Record number	Reference	PAH	Dose	Dose units	Endpoint	DNA Damage			n	Notes
						Mean	SD	Units		
		BaP	3	µg/mL	DNA damage	12	3.2	NAAC, 10 ⁻³ h ⁻⁶	3	Human lymphocytes with AraC/HU. No continuous linear model fit
			30	µg/mL	DNA damage	15	2.7	NAAC, 10 ⁻³ h ⁻⁷	3	Human lymphocytes with AraC/HU
		BjAC	3	µg/mL	DNA damage	6.0	2.1	NAAC, 10 ⁻³ h ⁻²	3	Human lymphocytes with AraC/HU
			30	µg/mL	DNA damage	9.4	3.4	NAAC, 10 ⁻³ h ⁻³	3	Human lymphocytes with AraC/HU
		BIAC	3	µg/mL	DNA damage	8.2	3.2	NAAC, 10 ⁻³ h ⁻⁴	3	Human lymphocytes with AraC/HU. No continuous linear model fit
			30	µg/mL	DNA damage	9.3	2.1	NAAC, 10 ⁻³ h ⁻⁵	3	Human lymphocytes with AraC/HU
		DMSO	0	µg/mL	DNA damage	7.8	3.1	NAAC, 10 ⁻³ h ⁻⁵	3	HL-60 cells with AraC/HU
		BaP	30	µg/mL	DNA damage	13.2	9.5	NAAC, 10 ⁻³ h ⁻⁵	3	HL-60 cells with AraC/HU
		BjAC	30	µg/mL	DNA damage	9.6	3.0	NAAC, 10 ⁻³ h ⁻⁵	3	HL-60 cells with AraC/HU
		BIAC	30	µg/mL	DNA damage	11.6	5.5	NAAC, 10 ⁻³ h ⁻⁵	3	HL-60 cells with AraC/HU
19740	Martin et al., 1978	BaP	1 × 10 ⁻⁵	M	Unscheduled DNA synthesis	210		Max dpm/µg DNA		Increase above background
		BeP	1 × 10 ⁻⁶	M	Unscheduled DNA synthesis	256		Max dpm/µg DNA		Increase above background
		BaA	1 × 10 ⁻⁷	M	Unscheduled DNA synthesis	59		Max dpm/µg DNA		Increase above background
		DBacA	1 × 10 ⁻⁵	M	Unscheduled DNA synthesis	97		Max dpm/µg DNA		Increase above background
		DBahA	1 × 10 ⁻⁵	M	Unscheduled DNA synthesis	96		Max dpm/µg DNA		Increase above background
19830	Mersch-Sundermann et al., 1992	BaP	NA		SOS induction potential	0.605	NA			Steepest slope of induction factor dose-response curve; + S9
		AA	NA		SOS induction potential	0.142	NA			Steepest slope of induction factor dose-response curve; + S9

Table C-15. In vitro DNA damage: dose response data

Record number	Reference	PAH	Dose	Dose units	Endpoint	DNA Damage			n	Notes
						Mean	SD	Units		
		BaA	NA		SOS induction potential	0.1	NA			Steepest slope of induction factor dose-response curve; + S9
		BbF	NA		SOS induction potential	0.045	NA			Steepest slope of induction factor dose-response curve; + S9
		BghiF	NA		SOS induction potential	0.34	NA			Steepest slope of induction factor dose-response curve; + S9
		BjF	NA		SOS induction potential	0.254	NA			Steepest slope of induction factor dose-response curve; + S9
		BbFE	NA		SOS induction potential	0.024	NA			Steepest slope of induction factor dose-response curve; + S9
		BghiP	NA		SOS induction potential	0.033	NA			Steepest slope of induction factor dose-response curve; + S9
		BeP	NA		SOS induction potential	0.032	NA			Steepest slope of induction factor dose-response curve; + S9
		CH	NA		SOS induction potential	0.221	NA			Steepest slope of induction factor dose-response curve; + S9
		DBaC	NA		SOS induction potential	0.104	NA			Steepest slope of induction factor dose-response curve; + S9
		DBaH	NA		SOS induction potential	0.039	NA			Steepest slope of induction factor dose-response curve; + S9
		DBaI	NA		SOS induction potential	2.1	NA			Steepest slope of induction factor dose-response curve; + S9
		DBaP	NA		SOS induction potential	0.117	NA			Steepest slope of induction factor dose-response curve; + S9
		DBaI	NA		SOS induction potential	0.174	NA			Steepest slope of induction factor dose-response curve; + S9
		FA	NA		SOS induction potential	0.412	NA			Steepest slope of induction factor dose-response curve; + S9
		IP	NA		SOS induction potential	0.036	NA			Steepest slope of induction factor dose-response curve; + S9
		PH	NA		SOS induction potential	0.053	NA			Steepest slope of induction factor dose-response curve; + S9

Table C-15. In vitro DNA damage: dose response data

Record number	Reference	PAH	Dose	Dose units	Endpoint	DNA Damage			n	Notes
						Mean	SD	Units		
		Tphen	NA		SOS induction potential	0.26	NA			Steepest slope of induction factor dose-response curve; + S9
20810	Robinson and Mitchell, 1981	Control	0	µg/mL	Unscheduled DNA synthesis	53	4	³ H-TdR incorporation		Max 3H-TdR incorporation
		BaP	10	µg/mL	Unscheduled DNA synthesis	142	7	³ H-TdR incorporation		Max 3H-TdR incorporation
		Control	0	µg/mL	Unscheduled DNA synthesis	52	2	³ H-TdR incorporation		Max 3H-TdR incorporation
		Pyr	7.2	µg/mL	Unscheduled DNA synthesis	115	9	³ H-TdR incorporation		Max 3H-TdR incorporation
20940	Rossmann et al., 1991	BaP	12.5	µg/mL	DNA damage	10.4		Lambda pro-phage induction		Max enhancement over background
		AC	12.5	µg/mL	DNA damage	4.8		Lambda pro-phage induction		Max enhancement over background
		DBacA	1.44	µg/mL	DNA damage	8		Lambda pro-phage induction		Max enhancement over background
		DBahA	2	µg/mL	DNA damage	4		Lambda pro-phage induction		Max enhancement over background
		PH	25	µg/mL	DNA damage	4.5		Lambda pro-phage induction		Max enhancement over background
21730	Tong et al., 1981b	Control	0	M	Unscheduled DNA synthesis	0.1	0.1	Grains/nucleus		
		BaP	1 × 10 ⁻⁴	M	Unscheduled DNA synthesis	45.1	3.7	Grains/nucleus		
		BaP	5 × 10 ⁻⁴	M	Unscheduled DNA synthesis	47.7	3.7	Grains/nucleus		
		BaP	1 × 10 ⁻³	M	Unscheduled DNA synthesis	65.6	17.8	Grains/nucleus		
		BaA	5 × 10 ⁻⁵	M	Unscheduled DNA synthesis	0.6		Grains/nucleus		
		BaA	1 × 10 ⁻⁴	M	Unscheduled DNA synthesis	14.8	2.6	Grains/nucleus		
		BaA	5 × 10 ⁻⁴	M	Unscheduled DNA synthesis	17.2	6	Grains/nucleus		
		BaA	1 × 10 ⁻³	M	Unscheduled DNA synthesis	Toxic		Grains/nucleus		

Table C-16. In vitro clastogenicity: data use

Record number	Reference	Page	Table number	PAHs	Data to be used	Basis for RPF	Comment
14620	Kochhar, 1982	846	Not numbered	BaP, BaA	% cells with aberrations and dose ($\mu\text{g/mL}$)	Ratio of slopes	Model as incidence data.
14640	Krolewski et al., 1986	1,648	II	BaP, CPcdP	Mean no. SCE/chromosome, std dev, and dose (μM)	Ratio of slopes	Use first column of data; not data with AIA or IVA. Model as continuous data.
19690	Mane et al., 1990	81	III	BaP, BaA	SCE frequencies/for V79 cell + rat MEC and dose	Point estimates	Use SCE data for V79 + rat MEC only.
21710	Tong et al., 1981a	469	1	BaP, BaA	SCE/cell, std dev, and dose	Point estimates	Continuous data, no n provided in study.

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Table C-17. In vitro clastogenicity: dose response data

Record number	Reference	PAH	Dose	Dose units	n	Clastogenicity			Notes
						Mean	Standard deviation	Units	
14620	Kochhar, 1982	Control	0	µg/mL	100	0.06		Fraction cells with aberrations	
		BaP	0.6	µg/mL	100	0.23		Fraction cells with aberrations	
		BaP	1.25	µg/mL	100	0.32		Fraction cells with aberrations	
		BaP	2.5	µg/mL	100	0.45		Fraction cells with aberrations	
		BaP	5	µg/mL	100	0.56		Fraction cells with aberrations	
		BaA	0.6	µg/mL	100	0.17		Fraction cells with aberrations	
		BaA	1.25	µg/mL	100	0.23		Fraction cells with aberrations	
		BaA	2.5	µg/mL	100	0.3		Fraction cells with aberrations	
		BaA	5	µg/mL	100	0.38		Fraction cells with aberrations	
14640	Krolewski et al., 1986	Control	0	µM	30	0.147	0.059	SCE/	
		BaP	1	µM	30	0.874	0.275	SCE/	
		BaP	5	µM	30	0.932	0.266	SCE/	
		CPcdP	1	µM	30	0.348	0.119	SCE/	
		CPcdP	5	µM	30	0.432	0.15	SCE/	
19690	Mane et al., 1990	Control	0	µg/mL		0.3	1	SCE frequency/	For V79 cell + rat MEC
		BaP	1	µg/mL		3	1	SCE frequency/	For V79 cell + rat MEC
		BaA	1	µg/mL		0.7	0.5	SCE frequency/	For V79 cell + rat MEC
21710	Tong et al., 1981a	Control	0	M		11.15	3.81	SCE/cell	
		BaP	1 × 10 ⁻⁶	M		16.15	3.83	SCE/cell	
		BaP	1 × 10 ⁻⁵	M		59.75	16.96	SCE/cell	
		BaP	1 × 10 ⁻⁴	M		103.3	22.75	SCE/cell	
		Control	0	M		15.75	5.18	SCE/cell	
		BaA	1 × 10 ⁻⁵	M		21.2	9.59	SCE/cell	
		BaA	1 × 10 ⁻⁴	M		29.15	9.93	SCE/cell	
		BaA	1 × 10 ⁻³	M		26.2	6.96	SCE/cell	

Table C-18. In vivo DNA adducts: data use

Record number	Reference	Page	Table number	Figure number	PAHs	Data to be extracted	Basis for RPF	Comment	Notes
6210	Arif et al., 1997	36		4	DBaP and BaP	Mean adduct levels for heart, pancreas, bladder, liver	Point estimate	Mean adduct levels summed across mammary epithelial, lung, heart, pancreas, bladder, liver	
17630	Cavalieri et al., 1981a	491	3		CPcdP, ACEP (reported in paper as CPAP), BaP	Done	Point estimate	DNA-bound PAH in mouse skin after 4 hr or 24 hr treatment	Calculate separate RPFs for 4 hr and 24 hr treatment
18810	Hughes and Phillips, 1990	1,614		3	DBaP, DBaeP, DBahP, DBaiP, BaP	AUC for skin and lung through 84 d	Point estimate	Sum of AUCs for skin and lung 0–84 d	
11190	Mass et al., 1993	188	1		BjAC, BaP	Done	Ratio of Slopes	AUC (adduct-time curve) vs. dose for lung adducts 24–72 hr	
8010	Nesnow et al., 1993b	39		1 and 2	BbF, BaP	AUC for lung, liver, and PBL through 56 d	Point estimate	Sum of AUCs for lung, liver, and lymphocytes 0–56 d	
24590/20920	Nesnow et al., 1998b; Ross et al., 1995	402	2		BaP, BbF, DBahA, CPcdP, DBaP	Done	Ratio of Slopes	Slope of TIDAL/dose (slope reported in 24590 based on data from 20920). DBaP data reported in separate study w/o BaP concurrent	
22810	Phillips et al., 1979	205	I		DBahA, DBacA, BaP	Done	Point estimate	Peak binding in mouse skin. BaA dropped; not clear if reported level is peak.	
24790	Kligerman et al., 2002	846	1		BaA, BaP, BbF, CH	Done	Point estimate	Adducts in mouse or rat PBLs at single time point after either intraperitoneal or gavage administration	Calculate separate RPFs for intraperitoneal and gavage, rat and mouse

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Table C-19. In vivo DNA adducts: dose response data

Record number	Reference	PAH	Species	Dose	Dose units	Organ	Time	DNA adducts				Slope of AUC vs. dose	Comments
								Mean	Standard deviation	Standard error	Adduct units		
6210	Arif et al., 1997	Control	Rat	0	μmol/mammary gland	Liver		0			Adducts/10 ⁹ nucleotides		
		BaP	Rat	0.25	μmol/mammary gland	Mammary gland		300	45		Adducts/10 ⁹ nucleotides		
		BaP	Rat	0.25	μmol/mammary gland	Lung		11	1.3		Adducts/10 ⁹ nucleotides		
		BaP	Rat	0.25	μmol/mammary gland	Heart		9.5			Adducts/10 ⁹ nucleotides		
		BaP	Rat	0.25	μmol/mammary gland	Pancreas		0			Adducts/10 ⁹ nucleotides		
		BaP	Rat	0.25	μmol/mammary gland	Bladder		0			Adducts/10 ⁹ nucleotides		
		BaP	Rat	0.25	μmol/mammary gland	Liver		4.5			Adducts/10 ⁹ nucleotides		
						Sum		324.74					
		DBaP	Rat	0.25	μmol/mammary gland	Mammary gland		1,878	378		Adducts/10 ⁹ nucleotides		
		DBaP	Rat	0.25	μmol/mammary gland	Lung		85	24		Adducts/10 ⁹ nucleotides		
		DBaP	Rat	0.25	μmol/mammary gland	Heart		64			Adducts/10 ⁹ nucleotides		
		DBaP	Rat	0.25	μmol/mammary gland	Pancreas		32			Adducts/10 ⁹ nucleotides		
		DBaP	Rat	0.25	μmol/mammary gland	Bladder		69			Adducts/10 ⁹ nucleotides		
		DBaP	Rat	0.25	μmol/mammary gland	Liver		116			Adducts/10 ⁹ nucleotides		
						Sum		2,244.63					
17630	Cavalieri et al., 1981a	BaP		0.2	μmol/mouse	Skin	4 hr	16.3		1	μmol adduct/mol DNA		
		CPcdP		0.2	μmol/mouse	Skin	4 hr	2.3		0.2	μmol adduct/mol DNA		
		ACEP		0.2	μmol/mouse	Skin	4 hr	2.2		0.1	μmol adduct/mol DNA		

Table C-19. In vivo DNA adducts: dose response data

Record number	Reference	PAH	Species	Dose	Dose units	Organ	Time	DNA adducts				Slope of AUC vs. dose	Comments
								Mean	Standard deviation	Standard error	Adduct units		
		BaP		0.2	μmol/mouse	Skin	24 hr	6.7		1.6	μmol adduct/mol DNA		
		CPcdP		0.2	μmol/mouse	Skin	24 hr	8.8		1	μmol adduct/mol DNA		
		ACEP		0.2	μmol/mouse	Skin	24 hr	0.30		0.1	μmol adduct/mol DNA		
18810	Hughes and Phillips, 1990	BaP		1	μmol	Skin	1 d	7.8			fmol adducts/μg DNA		Only peak extracted; interrupted scale precluded digitizing
		BaP		1	μmol	Lung	2 d	1.2			fmol adducts/μg DNA		
		BaP		1	μmol	Sum skin and lung		9.0			fmol adducts/μg DNA		
		DBaeP		1	μmol	Skin	2 d	0.50			fmol adducts/μg DNA		
		DBaeP		1	μmol	Lung	7 d	Cannot determine			fmol adducts/μg DNA		
		DBaeP		1	μmol	Sum skin and lung		Cannot determine			fmol adducts/μg DNA		
		DBahP		1	μmol	Skin	2 d	3.1			fmol adducts/μg DNA		
		DBahP		1	μmol	Lung	2 d	0.14			fmol adducts/μg DNA		
		DBahP		1	μmol	Sum skin and lung		3.2			fmol adducts/μg DNA		
		DBaiP		1	μmol	Skin	2 d	0.75			fmol adducts/μg DNA		
		DBaiP		1	μmol	Lung	2 d	0.10			fmol adducts/μg DNA		
		DBaiP		1	μmol	Sum skin and lung		0.85			fmol adducts/μg DNA		
		DBalP		1	μmol	Skin	1 d	62			fmol adducts/μg DNA		
		DBalP		1	μmol	Lung	2 d	2.3			fmol adducts/μg DNA		

Table C-19. In vivo DNA adducts: dose response data

Record number	Reference	PAH	Species	Dose	Dose units	Organ	Time	DNA adducts				Slope of AUC vs. dose	Comments
								Mean	Standard deviation	Standard error	Adduct units		
		DBaP		1	μmol	Sum skin and lung		65			fmol adducts/μg DNA		
11190	Mass et al., 1993	BaP		20	mg/kg bw	Lung	24 hr	116	53		amol adducts/μg DNA		AUC calculated using trapezoid rule
		BaP		20	mg/kg bw	Lung	48 hr	122	25		amol adducts/μg DNA		
		BaP		20	mg/kg bw	Lung	72 hr	181	101		amol adducts/μg DNA		
		BaP		50	mg/kg bw	Lung	24 hr	120	20		amol adducts/μg DNA		
		BaP		50	mg/kg bw	Lung	48 hr	201	170		amol adducts/μg DNA		
		BaP		50	mg/kg bw	Lung	72 hr	432	274		amol adducts/μg DNA		
		BaP		100	mg/kg bw	Lung	24 hr	427	140		amol adducts/μg DNA		
		BaP		100	mg/kg bw	Lung	48 hr	407	197		amol adducts/μg DNA		
		BaP		100	mg/kg bw	Lung	72 hr	2,004	314		amol adducts/μg DNA		
		BaP		20	mg/kg bw	Lung	AUC	7,884				469.73	
		BaP		50	mg/kg bw	Lung	AUC	12,888					
		BaP		100	mg/kg bw	Lung	AUC	44,064					
		BjAC		20	mg/kg bw	Lung	24 hr	63	34		amol adducts/μg DNA		AUC calculated using trapezoid rule
		BjAC		20	mg/kg bw	Lung	48 hr	97	101		amol adducts/μg DNA		
		BjAC		20	mg/kg bw	Lung	72 hr	255	392		amol adducts/μg DNA		
		BjAC		50	mg/kg bw	Lung	24 hr	116	121		amol adducts/μg DNA		
		BjAC		50	mg/kg bw	Lung	48 hr	402	237		amol adducts/μg DNA		
		BjAC		50	mg/kg bw	Lung	72 hr	1,954	1,921		amol adducts/μg DNA		

Table C-19. In vivo DNA adducts: dose response data

Record number	Reference	PAH	Species	Dose	Dose units	Organ	Time	DNA adducts				Slope of AUC vs. dose	Comments
								Mean	Standard deviation	Standard error	Adduct units		
		BjAC		100	mg/kg bw	Lung	24 hr	180	133		amol adducts/μg DNA		
		BjAC		100	mg/kg bw	Lung	48 hr	532	559		amol adducts/μg DNA		
		BjAC		100	mg/kg bw	Lung	72 hr	2,439	2,242		amol adducts/μg DNA		
		BjAC		20	mg/kg bw	Lung	AUC	6,900				464.25	
		BjAC		50	mg/kg bw	Lung	AUC	35,880					
		BjAC		100	mg/kg bw	Lung	AUC	46,356					
8010	Nesnow et al., 1993b	BaP		100	mg/kg	Lung	d 1	453					AUC calculated using trapezoid rule
		BaP		100	mg/kg	Lung	d 3	1,001					
		BaP		100	mg/kg	Lung	d 7	574					
		BaP		100	mg/kg	Lung	d 14	386					
		BaP		100	mg/kg	Lung	d 28	381					
		BaP		100	mg/kg	Lung	d 56	143					
		BaP		100	mg/kg	Lung	AUC	20,892					
		BaP		100	mg/kg	Liver	d 1	398					
		BaP		100	mg/kg	Liver	d 3	1,317					
		BaP		100	mg/kg	Liver	d 7	931					
		BaP		100	mg/kg	Liver	d 14	537					
		BaP		100	mg/kg	Liver	d 28	394					
		BaP		100	mg/kg	Liver	d 56	116					
		BaP		100	mg/kg	Liver	AUC	25,207					
		BaP		100	mg/kg	PBL	d 1	158					
		BaP		100	mg/kg	PBL	d 3	273					
		BaP		100	mg/kg	PBL	d 7	162					
		BaP		100	mg/kg	PBL	d 14	187					
		BaP		100	mg/kg	PBL	d 28	72					
		BaP		100	mg/kg	PBL	d 56	41					
		BaP		100	mg/kg	PBL	AUC	5,985					

Table C-19. In vivo DNA adducts: dose response data

Record number	Reference	PAH	Species	Dose	Dose units	Organ	Time	DNA adducts				Slope of AUC vs. dose	Comments
								Mean	Standard deviation	Standard error	Adduct units		
		BaP		100	mg/kg	Sum of AUCs		52,084					
		BbF		100	mg/kg	Lung	d 1	21					AUC calculated using trapezoid rule
		BbF		100	mg/kg	Lung	d 3	184					
		BbF		100	mg/kg	Lung	d 5	233					
		BbF		100	mg/kg	Lung	d 7	211					
		BbF		100	mg/kg	Lung	d 14	229					
		BbF		100	mg/kg	Lung	d 28	145					
		BbF		100	mg/kg	Lung	d 56	106					
		BbF		100	mg/kg	Lung	AUC	8,763					
		BbF		100	mg/kg	Liver	d 1	12					
		BbF		100	mg/kg	Liver	d 3	35					
		BbF		100	mg/kg	Liver	d 5	51					
		BbF		100	mg/kg	Liver	d 7	61					
		BbF		100	mg/kg	Liver	d 14	21					
		BbF		100	mg/kg	Liver	d 28	15					
		BbF		100	mg/kg	Liver	d 56	12					
		BbF		100	mg/kg	Liver	AUC	1,173					
		BbF		100	mg/kg	PBL	d 1	12					
		BbF		100	mg/kg	PBL	d 3	29					
		BbF		100	mg/kg	PBL	d 5	59					
		BbF		100	mg/kg	PBL	d 7	57					
		BbF		100	mg/kg	PBL	d 14	40					
		BbF		100	mg/kg	PBL	d 28	15					
		BbF		100	mg/kg	PBL	d 56	13					
		BbF		100	mg/kg	PBL	AUC	1,378					
		BbF		100	mg/kg	Sum of AUCs		11,314					
24590/20920	Nesnow et al., 1998b; Ross, 1995	BaP		NA		Lung	>21 d			3.9		113	Slope of dose vs. TIDAL value (in fmol-d/ μ g DNA)

Table C-19. In vivo DNA adducts: dose response data

Record number	Reference	PAH	Species	Dose	Dose units	Organ	Time	DNA adducts				Slope of AUC vs. dose	Comments
								Mean	Standard deviation	Standard error	Adduct units		
		BbF		NA		Lung	>21 d			5		37.5	Slope of dose vs. TIDAL value (in fmol-d/ μ g DNA)
		CPcdP		NA		Lung	>21 d			3.69		148	Slope of dose vs. TIDAL value (in fmol-d/ μ g DNA)
		DBahA		NA		Lung	>21 d			19.1		219	Slope of dose vs. TIDAL value (in fmol-d/ μ g DNA)
		DBaP		NA		Lung	>21 d			267		1,390	Slope of dose vs. TIDAL value (in fmol-d/ μ g DNA)
22810	Phillips et al., 1979	BaP		1	μ mol/mouse	Skin	19 hr	27			pmol adducts/mg DNA		peak
		DBacA		1	μ mol/mouse	Skin	24 hr	10			pmol adducts/mg DNA		peak
		DBahA		1	μ mol/mouse	Skin	72 hr	15			pmol adducts/mg DNA		peak
24790	Kligerman et al., 2002	BaP	Mice	100	mg/kg	PBL	d 7	4,186	273		amol adducts/ μ g DNA		Intraperitoneal
		BaA	Mice	100	mg/kg	PBL	d 7	93	8		amol adducts/ μ g DNA		Intraperitoneal
		BbF	Mice	100	mg/kg	PBL	d 7	516	7		amol adducts/ μ g DNA		Intraperitoneal
		CH	Mice	100	mg/kg	PBL	d 7	81	11		amol adducts/ μ g DNA		Intraperitoneal
		Control	Mice	0	mg/kg	PBL	d 7	0			amol adducts/ μ g DNA		Intraperitoneal
		BaP	Mice	100	mg/kg	PBL	d 7	143	17		amol adducts/ μ g DNA		Gavage
		BaA	Mice	100	mg/kg	PBL	d 7	32	2		amol adducts/ μ g DNA		Gavage
		BbF	Mice	100	mg/kg	PBL	d 7	39	4		amol adducts/ μ g DNA		Gavage
		CH	Mice	100	mg/kg	PBL	d 7	37	1		amol adducts/ μ g DNA		Gavage

Table C-19. In vivo DNA adducts: dose response data

Record number	Reference	PAH	Species	Dose	Dose units	Organ	Time	DNA adducts				Slope of AUC vs. dose	Comments
								Mean	Standard deviation	Standard error	Adduct units		
		Control	Mice	0	mg/kg	PBL	d 7	0			amol adducts/μg DNA		Gavage
		BaP	Rat	100	mg/kg	PBL	d 7	755	56		amol adducts/μg DNA		Intraperitoneal
		BaA	Rat	100	mg/kg	PBL	d 7	38	3		amol adducts/μg DNA		Intraperitoneal
		BbF	Rat	100	mg/kg	PBL	d 7	63	1		amol adducts/μg DNA		Intraperitoneal
		CH	Rat	100	mg/kg	PBL	d 7	24	2		amol adducts/μg DNA		Intraperitoneal
		Control	Rat	0	mg/kg	PBL	d 7	0			amol adducts/μg DNA		Intraperitoneal
		BaP	Rat	100	mg/kg	PBL	d 7	177	30		amol adducts/μg DNA		Gavage
		BaA	Rat	100	mg/kg	PBL	d 7	20	2		amol adducts/μg DNA		Gavage
		BbF	Rat	100	mg/kg	PBL	d 7	17	1		amol adducts/μg DNA		Gavage
		CH	Rat	100	mg/kg	PBL	d 7	10	4		amol adducts/μg DNA		Gavage
		Control	Rat	0	mg/kg	PBL	d 7	0			amol adducts/μg DNA		Gavage

Table C-20. In vivo clastogenicity: data use

Record number	Reference	Page	Table number	Figure number	PAHs	Data to be extracted	Basis for RPF	Comment
24740	Allen et al., 1999		I and III		BaP, DBaP	Total micronucleated polychromatic erythrocytes (MN-PCE)/PCEs and dose (mg/kg). Extract data for bone marrow and peripheral blood for both A/J mice (Table 1) and p53 ^{+/+} (wild type) mice (Table III)	Point estimate	Incidence data. Single dose BaP.
14270	He and Baker, 1991	166	1		BaP, CH	MN cells/1,000 binucleated and dose (µg/mouse)	Ratio of slopes	Incidence data
17190	Bayer, 1978	426	3		BaP, PH	SCE/cells and dose (mg/kg)	Point estimate	Continuous data. Only one dose PH significant. BaP given as 3,4-BaP.
20950	Roszinsky-Kocher et al., 1979	66	1		BaP, DBaP, A, CH, PH, BeP, BbF, BaA	SCEs/metaphase and dose (mg/kg)	Point estimate	
24720	Kligerman et al., 1986	129	3		BaP, BIAC	SCEs/metaphase and dose (mg/kg)	Point estimate	Continuous data, no SD for control; use lowest dose approaching peak
24790	Kligerman et al., 2002	846	1		BaP, BaA, BbF, CH	SCEs/metaphase, intraperitoneal, for BaP, BaA, BbF, and CH. SCEs/, gavage, for BaP and BaA (use 17.91 value for BaP). Also use MNbn/1,000 bn, gavage, for BaP and BbF. Dose in mg/kg.	Point estimates	Separate RPFs for SCEs and micronuclei, oral and intraperitoneal

Table C-21. In vivo clastogenicity: dose response data

Record number	Reference	PAH	Route of administration	Clastogenicity								p < 0.05	Notes
				Dose	Dose units	Mean	Standard deviation	Units	n	% Response	Units		
24740	Allen et al., 1999	Tri-caprylin	Intra-peritoneal	0	mg/kg	2.6		MN-PCEs	1,000	0.0026	PCEs		A/J mice, bone marrow
		BaP	Intra-peritoneal	200	mg/kg	11.2		MN-PCEs	1,000	0.0112	PCEs	x	
		DBaP	Intra-peritoneal	0.3	mg/kg	2		MN-PCEs	1,000	0.0020	PCEs		
		DBaP	Intra-peritoneal	1.5	mg/kg	3.9		MN-PCEs	1,000	0.0039	PCEs	x	
		DBaP	Intra-peritoneal	3	mg/kg	3.4		MN-PCEs	1,000	0.0034	PCEs		
		DBaP	Intra-peritoneal	6	mg/kg	3.8		MN-PCEs	1,000	0.0038	PCEs		
		Tri-caprylin	Intra-peritoneal	0	mg/kg	2.8		MN-PCEs	1,000	0.0028	PCEs		A/J mice, peripheral blood
		BaP	Intra-peritoneal	200	mg/kg	9.5		MN-PCEs	1,000	0.0095	PCEs	x	
		DBaP	Intra-peritoneal	0.3	mg/kg	2.8		MN-PCEs	1,000	0.0028	PCEs		
		DBaP	Intra-peritoneal	1.5	mg/kg	2.9		MN-PCEs	1,000	0.0029	PCEs		
		DBaP	Intra-peritoneal	3	mg/kg	4		MN-PCEs	1,000	0.0040	PCEs		
		DBaP	Intra-peritoneal	6	mg/kg	4.3		MN-PCEs	1,000	0.0043	PCEs	x	
		Tri-caprylin	Intra-peritoneal	0	mg/kg	3.2		MN-PCEs	1,000	0.0032	PCEs		p53 +/- wt mice, bone marrow
		BaP	Intra-peritoneal	200	mg/kg	5.1		MN-PCEs	1,000	0.0051	PCEs	x	
		DBaP	Intra-peritoneal	9	mg/kg	4.3		MN-PCEs	1,000	0.0043	PCEs		
		DBaP	Intra-peritoneal	12	mg/kg	7.4		MN-PCEs	1,000	0.0074	PCEs	x	
		DBaP	Intra-peritoneal	18	mg/kg	6.1		MN-PCEs	1,000	0.0061	PCEs	x	

Table C-21. In vivo clastogenicity: dose response data

Record number	Reference	PAH	Route of administration	Clastogenicity								p < 0.05	Notes
				Dose	Dose units	Mean	Standard deviation	Units	n	% Response	Units		
		Tri-caprylin	Intra-peritoneal	0	mg/kg	3.5		MN-PCEs	1,000	0.0035	PCEs		p53 +/- wt mice, peripheral blood
		BaP	Intra-peritoneal	200	mg/kg	5.7		MN-PCEs	1,000	0.0057	PCEs	x	
		DBaP	Intra-peritoneal	9	mg/kg	3.1		MN-PCEs	1,000	0.0031	PCEs		
		DBaP	Intra-peritoneal	12	mg/kg	3.1		MN-PCEs	1,000	0.0031	PCEs		
		DBaP	Intra-peritoneal	18	mg/kg	4.6		MN-PCEs	1,000	0.0046	PCEs		
14270	He and Baker, 1991	Control	Dermal	0	µg/mouse	13.3	2.8	MN cells	1,000	0.013	Binucleated		
		BaP	Dermal	0.5	µg/mouse	50.5	11.5	MN cells	1,000	0.051	Binucleated	x	
		BaP	Dermal	5	µg/mouse	66.8	4.1	MN cells	1,000	0.067	Binucleated	x	
		BaP	Dermal	50	µg/mouse	76	2.8	MN cells	1,000	0.076	Binucleated	x	
		BaP	Dermal	100	µg/mouse	64.3	5.4	MN cells	1,000	0.064	Binucleated	x	
		BaP	Dermal	500	µg/mouse	55.8	13	MN cells	1,000	0.056	Binucleated	x	
		Control	Dermal	0	µg/mouse	12.8	2.2	MN cells	1,000	0.013	Binucleated		
		CH	Dermal	50	µg/mouse	43.3	2.2	MN cells	1,000	0.043	Binucleated	x	
		CH	Dermal	100	µg/mouse	56	4.9	MN cells	1,000	0.056	Binucleated	x	
		CH	Dermal	500	µg/mouse	62	8.6	MN cells	1,000	0.062	Binucleated	x	
		CH	Dermal	1,000	µg/mouse	47.3	3.8	MN cells	1,000	0.047	Binucleated	x	
17190	Bayer, 1978	pooled controls	Intra-peritoneal	0	mg/kg	3.2	0.07	SCE/cells					
		BaP	Intra-peritoneal	2.5	mg/kg	3.4	0.8	SCE/cells					
		BaP	Intra-peritoneal	25	mg/kg	3.5	0.2	SCE/cells					
		BaP	Intra-peritoneal	40	mg/kg	3.9	0.2	SCE/cells				x	
		BaP	Intra-peritoneal	50	mg/kg	6.4	0.2	SCE/cells				x	
		BaP	Intra-peritoneal	75	mg/kg	6.4	0.3	SCE/cells				x	

Table C-21. In vivo clastogenicity: dose response data

Record number	Reference	PAH	Route of administration	Clastogenicity							p < 0.05	Notes	
				Dose	Dose units	Mean	Standard deviation	Units	n	% Response			Units
		BaP	Intra-peritoneal	100	mg/kg	7.4	0.2	SCE/cells				x	
		PH	Intra-peritoneal	25	mg/kg	3.5	0.2	SCE/cells					Only one dose significant
		PH	Intra-peritoneal	50	mg/kg	3.4	0.2	SCE/cells					
		PH	Intra-peritoneal	75	mg/kg	3.5	0.2	SCE/cells					
		PH	Intra-peritoneal	100	mg/kg	4.1	0.2	SCE/cells				x	
20950	Roszinsky-Kocher et al., 1979	Control	Intra-peritoneal	0	mg/kg	3.9	0.9	SCEs/metap hase					
		BaP	Intra-peritoneal	900	mg/kg	10.6	1.6	SCEs/metap hase				x	
		DBahA	Intra-peritoneal	900	mg/kg	4.9	0.7	SCEs/				x	
		CH	Intra-peritoneal	900	mg/kg	5.1	1	SCEs/				x	
		PH	Intra-peritoneal	900	mg/kg	5.5	0.7	SCEs/				x	
		BeP	Intra-peritoneal	900	mg/kg	5.5	0.7	SCEs/				x	
		BbF	Intra-peritoneal	900	mg/kg	5.6	0.5	SCEs/				x	
		BaA	Intra-peritoneal	900	mg/kg	6.1	0.4	SCEs/				x	
24720	Kligerman et al., 1986	Control	Gavage	0	mg/kg	11.9		SCEs/metap hase					
		BaP	Gavage	63	mg/kg	19.4	0.0	SCEs/metap hase					
		BaP	Gavage	252	mg/kg	21.5	1.4	SCEs/metap hase					
		BaP	Gavage	504	mg/kg	21.7	1.4	SCEs/metap hase					

Table C-21. In vivo clastogenicity: dose response data

Record number	Reference	PAH	Route of administration	Clastogenicity							p < 0.05	Notes	
				Dose	Dose units	Mean	Standard deviation	Units	n	% Response			Units
		Control	Gavage	0	mg/kg	11.0		SCEs/metaphase					
		BIAC	Gavage	32	mg/kg	16.5	3.6	SCEs/metaphase					
		BIAC	Gavage	63	mg/kg	20.5	1.6	SCEs/metaphase					
		BIAC	Gavage	126	mg/kg	27.8	2.6	SCEs/metaphase					
24790	Kligerman et al., 2002	Control	Intra-peritoneal	0	mg/kg	8.79	1.26	SCEs/					
		BaP	Intra-peritoneal	100	mg/kg	21.21	2.93	SCEs/				x	
		BaA	Intra-peritoneal	100	mg/kg	14.8	3.16	SCEs/				x	
		BbF	Intra-peritoneal	100	mg/kg	22.25	1.45	SCEs/				x	
		CH	Intra-peritoneal	100	mg/kg	11.96	1.8	SCEs/				x	
		Control	Gavage	0	mg/kg	11.12	1.5	SCEs/					
		BaP	Gavage	100	mg/kg	17.91	1.49	SCEs/				x	
		BaA	Gavage	100	mg/kg	13.38	1.53	SCEs/				x	
		Control	Gavage	0	mg/kg	6.6	0.9	MN bn	1,000	0.007	Binucleated		
		BaP	Gavage	100	mg/kg	9.1	1.8	MN bn	1,000	0.009	Binucleated	x	
		BbF	Gavage	100	mg/kg	8.3	0.9	MN bn	1,000	0.008	Binucleated	x	

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Parameter Estimates

Variable	Estimate	Std. Err.
Background	0	NA
Beta(1)	0.0126577	0.0460858
Beta(2)	0.00134916	0.00245743

NA - Indicates that this parameter has hit a bound implied by some inequality constraint and thus has no standard error.

Analysis of Deviance Table

Model	Log(likelihood)	Deviance	Test DF	P-value
Full model	-35.0798			
Fitted model	-36.0272	1.89478	2	0.3878
Reduced model	-55.062	39.9644	3	<.0001

AIC: 76.0543

Goodness of Fit

Dose	Est._Prob.	Expected	Observed	Size	Chi^2 Res.
i: 1	0.0000	0.000	0	29	0.000
i: 2	2.2000	1.014	2	30	1.007
i: 3	6.6000	3.714	2	28	-0.532
i: 4	20.0000	16.423	17	30	0.078

Chi-square = 1.95 DF = 2 P-value = 0.3772

Benchmark Dose Computation

Specified effect = 0.1
 Risk Type = Extra risk
 Confidence level = 0.95
 BMD = 5.31398
 BMDL = 2.86439

```

1 CAVALIERI1983BAP.OUT.txt
2 =====
3           Multistage Model. $Revision: 2.1 $ $Date: 2000/08/21 03:38:21 $
4           Input Data File: C:\PAH\BMD ANALYSIS\BIOASSAY\DERMAL
5 STUDIES\SETS\CAVALIERI1983BAP.(d)
6           Gnuplot Plotting File: C:\PAH\BMD ANALYSIS\BIOASSAY\DERMAL
7 STUDIES\SETS\CAVALIERI1983BAP.plt
8
9           Thu Jun 02 11:12:07 2005
10 =====
11 BMDS MODEL RUN
12 ~~~~~
13
14 The form of the probability function is:
15
16 
$$P[\text{response}] = \text{background} + (1-\text{background}) * [1 - \text{EXP}(-\text{beta1} * \text{dose}^1 - \text{beta2} * \text{dose}^2)]$$

17
18 The parameter betas are restricted to be positive
19
20
21
22 Dependent variable = incidenceBaP
23 Independent variable = doseBaP
24
25 Total number of observations = 4
26 Total number of records with missing values = 0
27 Total number of parameters in model = 3
28 Total number of specified parameters = 0
29 Degree of polynomial = 2
30
31
32 Maximum number of iterations = 250
33 Relative Function Convergence has been set to: 1e-008
34 Parameter Convergence has been set to: 1e-008
35
36
37
38           Default Initial Parameter Values
39           Background = 0.062817
40           Beta(1) = 0.0817095
41           Beta(2) = 0
42
43
44           Asymptotic Correlation Matrix of Parameter Estimates
45
46           ( *** The model parameter(s) -Background -Beta(2)
47             have been estimated at a boundary point, or have been
48 specified by the user,
49             and do not appear in the correlation matrix )
50
51           Beta(1)
52
53           Beta(1) 1
54
55
56
57           Parameter Estimates
58
59           Variable Estimate Std. Err.
60           Background 0 NA

```

1 Beta(1) 0.0898383 0.0186734
 2 Beta(2) 0 NA
 3
 4 NA - Indicates that this parameter has hit a bound
 5 implied by some inequality constraint and thus
 6 has no standard error.
 7
 8
 9

10 Analysis of Deviance Table

Model	Log(likelihood)	Deviance	Test DF	P-value
Full model	-41.1202			
Fitted model	-44.3027	6.36496	3	0.09514
Reduced model	-76.9419	71.6434	3	<.0001
AIC:	90.6054			

19 Goodness of Fit

Dose	Est._Prob.	Expected	Observed	Size	Chi^2 Res.
i: 1	0.0000	0.000	0	29	0.000
i: 2	2.2000	5.380	2	30	-0.766
i: 3	6.6000	12.524	17	28	0.647
i: 4	20.0000	25.025	24	30	-0.247
Chi-square =	5.73	DF = 3		P-value =	0.1253

36 Benchmark Dose Computation

37
 38 Specified effect = 0.1
 39
 40 Risk Type = Extra risk
 41
 42 Confidence level = 0.95
 43
 44 BMD = 1.17278
 45
 46 BMDL = 0.902296
 47


```

1 CAVALIERI1983CPcdP.OUT.txt
2 =====
3           Multistage Model. $Revision: 2.1 $ $Date: 2000/08/21 03:38:21 $
4           Input Data File: C:\PAH\BMD ANALYSIS\BIOASSAY\DERMAL
5 STUDIES\SETS\CAVALIERI1983BAP.(d)
6           Gnuplot Plotting File: C:\PAH\BMD ANALYSIS\BIOASSAY\DERMAL
7 STUDIES\SETS\CAVALIERI1983BAP.plt
8
9           Thu Jun 02 11:16:02 2005
10 =====
11 BMDS MODEL RUN
12 ~~~~~
13
14 The form of the probability function is:
15
16 
$$P[\text{response}] = \text{background} + (1-\text{background}) * [1 - \text{EXP}(-\text{beta1} * \text{dose}^1 - \text{beta2} * \text{dose}^2)]$$

17
18 The parameter betas are restricted to be positive
19
20
21
22 Dependent variable = incidenceCPcdP
23 Independent variable = doseCPcdP
24
25 Total number of observations = 4
26 Total number of records with missing values = 0
27 Total number of parameters in model = 3
28 Total number of specified parameters = 0
29 Degree of polynomial = 2
30
31
32 Maximum number of iterations = 250
33 Relative Function Convergence has been set to: 1e-008
34 Parameter Convergence has been set to: 1e-008
35
36
37
38           Default Initial Parameter Values
39           Background = 0
40           Beta(1) = 0
41           Beta(2) = 4.42193e-005
42
43
44           Asymptotic Correlation Matrix of Parameter Estimates
45
46           ( *** The model parameter(s) -Background
47             have been estimated at a boundary point, or have been
48 specified by the user,
49             and do not appear in the correlation matrix )
50
51           Beta(1)      Beta(2)
52
53           Beta(1)      1      -0.93
54
55           Beta(2)     -0.93      1
56
57
58
59           Parameter Estimates
60

```

Variable	Estimate	Std. Err.
Background	0	NA
Beta(1)	0.000525849	0.00477908
Beta(2)	3.60995e-005	2.68444e-005

NA - Indicates that this parameter has hit a bound implied by some inequality constraint and thus has no standard error.

Analysis of Deviance Table

Model	Log(likelihood)	Deviance	Test DF	P-value
Full model	-27.8865			
Fitted model	-30.0799	4.38685	2	0.1115
Reduced model	-64.1091	72.4452	3	<.0001
AIC:	64.1598			

Goodness of Fit

Dose	Est._Prob.	Expected	Observed	Size	Chi^2 Res.
i: 1					
0.0000	0.0000	0.000	0	29	0.000
i: 2					
22.2000	0.0290	0.842	2	29	1.416
i: 3					
66.6000	0.1773	5.141	2	29	-0.743
i: 4					
200.0000	0.7876	22.840	24	29	0.239
Chi-square =	4.25	DF = 2		P-value =	0.1194

Benchmark Dose Computation

Specified effect =	0.1
Risk Type =	Extra risk
Confidence level =	0.95
BMD =	47.2296
BMDL =	30.0553

```

1 HABS1980BAP.OUT.txt
2 =====
3           Multistage Model. $Revision: 2.1 $ $Date: 2000/08/21 03:38:21 $
4           Input Data File: C:\PAH\BMD ANALYSIS\BIOASSAY\DERMAL
5 STUDIES\SETS\HABS1980BAP.(d)
6           Gnuplot Plotting File: C:\PAH\BMD ANALYSIS\BIOASSAY\DERMAL
7 STUDIES\SETS\HABS1980BAP.plt
8
9           Thu May 26 14:32:01 2005
10 =====
11 BMDS MODEL RUN
12 ~~~~~
13
14 The form of the probability function is:
15
16  $P[\text{response}] = \text{background} + (1 - \text{background}) * [1 - \text{EXP}(-\text{beta1} * \text{dose}^1 - \text{beta2} * \text{dose}^2)]$ 
17
18 The parameter betas are restricted to be positive
19
20
21
22 Dependent variable = incidenceBaP
23 Independent variable = doseBaP
24
25 Total number of observations = 4
26 Total number of records with missing values = 1
27 Total number of parameters in model = 3
28 Total number of specified parameters = 0
29 Degree of polynomial = 2
30
31
32 Maximum number of iterations = 250
33 Relative Function Convergence has been set to: 1e-008
34 Parameter Convergence has been set to: 1e-008
35
36
37
38           Default Initial Parameter Values
39           Background = 0
40           Beta(1) = 0
41           Beta(2) = 0.151094
42
43
44           Asymptotic Correlation Matrix of Parameter Estimates
45
46           ( *** The model parameter(s) -Background -Beta(1)
47             have been estimated at a boundary point, or have been
48 specified by the user,
49             and do not appear in the correlation matrix )
50
51           Beta(2)
52
53           Beta(2) 1
54
55
56
57           Parameter Estimates
58
59           Variable Estimate Std. Err.
60           Background 0 NA

```



```

1 HABS1980BBF.OUT.txt
2 =====
3 Multistage Model. $Revision: 2.1 $ $Date: 2000/08/21 03:38:21 $
4 Input Data File: C:\PAH\BMD ANALYSIS\BIOASSAY\DERMAL
5 STUDIES\HABS1980BBF.(d)
6 Gnuplot Plotting File: C:\PAH\BMD ANALYSIS\BIOASSAY\DERMAL
7 STUDIES\HABS1980BBF.plt
8
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11
12
13
14 The form of the probability function is:
15
16 
$$P[\text{response}] = \text{background} + (1 - \text{background}) * [1 - \text{EXP}(-\text{beta1} * \text{dose}^1 - \text{beta2} * \text{dose}^2)]$$

17
18
19 The parameter betas are restricted to be positive
20
21
22 Dependent variable = incidenceBbF
23 Independent variable = doseBbF
24
25 Total number of observations = 4
26 Total number of records with missing values = 0
27 Total number of parameters in model = 3
28 Total number of specified parameters = 0
29 Degree of polynomial = 2
30
31
32 Maximum number of iterations = 250
33 Relative Function Convergence has been set to: 1e-008
34 Parameter Convergence has been set to: 1e-008
35
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```

Default Initial Parameter Values

```

Background = 0
Beta(1) = 0
Beta(2) = 0.00945627

```

Asymptotic Correlation Matrix of Parameter Estimates

```

( *** The model parameter(s) -Background -Beta(1)
have been estimated at a boundary point, or have been
specified by the user,
and do not appear in the correlation matrix )

```

```

Beta(2)
Beta(2) 1

```

Parameter Estimates

Variable	Estimate	Std. Err.
Background	0	NA

1 Beta(1) 0 NA
 2 Beta(2) 0.00748156 0.00233324
 3
 4 NA - Indicates that this parameter has hit a bound
 5 implied by some inequality constraint and thus
 6 has no standard error.
 7
 8
 9

10 Analysis of Deviance Table

11 Model	12 Log(likelihood)	13 Deviance	14 Test DF	15 P-value
13 Full model	-47.5575			
14 Fitted model	-48.6255	2.13602	3	0.5447
15 Reduced model	-69.4912	43.8674	3	<.0001
17 AIC:	99.251			

19 Goodness of Fit

21	22 Dose	23 Est._Prob.	24 Expected	25 Observed	26 Size	27 Chi^2 Res.
24	i: 1	0.0000	0.000	0	35	0.000
26	i: 2	3.4000	3.148	2	38	-0.398
28	i: 3	5.6000	7.110	5	34	-0.375
30	i: 4	9.2000	17.358	20	37	0.287
33	Chi-square =	2.01	DF = 3	P-value =	0.5711	

36 Benchmark Dose Computation

37
 38 Specified effect = 0.1
 39
 40 Risk Type = Extra risk
 41
 42 Confidence level = 0.95
 43
 44 BMD = 3.75269
 45
 46 BMDL = 2.91511
 47
 48

```

1 hoff 1966 dermal bap for dbaep.txt
2 =====
3           Multistage Model. $Revision: 2.1 $ $Date: 2000/08/21 03:38:21 $
4           Input Data File: C:\DOCUMENTS AND SETTINGS\HCLYNCH\MY DOCUMENTS\PAH
5 RPS\MODELING\UNSAVED1.(d)
6           Gnuplot Plotting File: C:\DOCUMENTS AND SETTINGS\HCLYNCH\MY
7 DOCUMENTS\PAH RPS\MODELING\UNSAVED1.plt
8
9           Tue Jul 05 10:20:14 2005
10 =====
11 BMDS MODEL RUN
12 ~~~~~
13
14 The form of the probability function is:
15
16  $P[\text{response}] = \text{background} + (1 - \text{background}) * [1 - \text{EXP}(-\text{beta}1 * \text{dose}^1)]$ 
17
18 The parameter betas are restricted to be positive
19
20
21
22 Dependent variable = COLUMN2
23 Independent variable = COLUMN1
24
25 Total number of observations = 3
26 Total number of records with missing values = 0
27 Total number of parameters in model = 2
28 Total number of specified parameters = 0
29 Degree of polynomial = 1
30
31
32 Maximum number of iterations = 250
33 Relative Function Convergence has been set to: 1e-008
34 Parameter Convergence has been set to: 1e-008
35
36
37
38           Default Initial Parameter Values
39           Background = 0.124609
40           Beta(1) = 29.9573
41
42
43           Asymptotic Correlation Matrix of Parameter Estimates
44
45           ( *** The model parameter(s) -Background
46             have been estimated at a boundary point, or have been
47 specified by the user,
48             and do not appear in the correlation matrix )
49
50           Beta(1)
51
52           Beta(1) 1
53
54
55
56           Parameter Estimates
57
58           Variable      Estimate      Std. Err.
59           Background      0           NA
60           Beta(1)      34.3074     7.98663

```

1
 2 NA - Indicates that this parameter has hit a bound
 3 implied by some inequality constraint and thus
 4 has no standard error.
 5
 6
 7

8 Analysis of Deviance Table

9

10 Model	Log(likelihood)	Deviance	Test DF	P-value
11 Full model	-12.4245			
12 Fitted model	-12.5735	0.297928	2	0.8616
13 Reduced model	-40.3807	55.9124	2	<.0001
14				
15 AIC:	27.1469			

16
 17
 18 Goodness of Fit

19

20 Dose	Est._Prob.	Expected	Observed	Size	Chi^2 Res.
21 -----					
22 i: 1					
23 0.0000	0.0000	0.000	0	20	-1.000
24 i: 2					
25 0.0500	0.8201	16.402	17	20	0.203
26 i: 3					
27 0.1000	0.9676	19.353	19	20	-0.563
28					
29 Chi-square =	0.32	DF = 1		P-value =	0.5717

30
 31
 32 Benchmark Dose Computation

33 Specified effect = 0.73
 34
 35 Risk Type = Extra risk
 36
 37 Confidence level = 0.95
 38
 39 BMD = 0.0381647
 40
 41 BMDL = 0.026721
 42
 43


```

1 HOFFMANWYNDER966DBAIP.OUT.txt
2 =====
3 Multistage Model. $Revision: 2.1 $ $Date: 2000/08/21 03:38:21 $
4 Input Data File: C:\PAH\BMD ANALYSIS\BIOASSAY\DERMAL
5 STUDIES\HOFFMANWYNDER966DBAIP.(d)
6 Gnuplot Plotting File: C:\PAH\BMD ANALYSIS\BIOASSAY\DERMAL
7 STUDIES\HOFFMANWYNDER966DBAIP.plt
8
9
10
11 BMD5 MODEL RUN
12 ~~~~~
13
14 The form of the probability function is:
15
16  $P[\text{response}] = \text{background} + (1-\text{background}) * [1 - \text{EXP}(-\text{beta}1 * \text{dose}^1)]$ 
17
18
19 The parameter betas are restricted to be positive
20
21
22 Dependent variable = incidenceDBaiP
23 Independent variable = doseDBaiP
24
25 Total number of observations = 3
26 Total number of records with missing values = 0
27 Total number of parameters in model = 2
28 Total number of specified parameters = 0
29 Degree of polynomial = 1
30
31
32 Maximum number of iterations = 250
33 Relative Function Convergence has been set to: 1e-008
34 Parameter Convergence has been set to: 1e-008
35
36
37
38 Default Initial Parameter Values
39 Background = 0.264818
40 Beta(1) = 18.4583
41
42
43 Asymptotic Correlation Matrix of Parameter Estimates
44
45 ( *** The model parameter(s) -Background
46 have been estimated at a boundary point, or have been
47 specified by the user,
48 and do not appear in the correlation matrix )
49
50 Beta(1)
51
52 Beta(1) 1
53
54
55
56 Parameter Estimates
57
58 Variable Estimate Std. Err.
59 Background 0 NA
60 Beta(1) 25.3832 5.83589

```

1
 2 NA - Indicates that this parameter has hit a bound
 3 implied by some inequality constraint and thus
 4 has no standard error.
 5
 6
 7

8 Analysis of Deviance Table

9

10 Model	Log(likelihood)	Deviance	Test DF	P-value
11 Full model	-16.5742			
12 Fitted model	-18.019	2.88957	2	0.2358
13 Reduced model	-39.8916	46.6349	2	<.0001
14				
15 AIC:	38.0379			

16
 17
 18 Goodness of Fit

19

20 Dose	Est._Prob.	Expected	Observed	Size	Chi^2 Res.
21 -----					
22 i: 1					
23 0.0000	0.0000	0.000	0	20	0.000
24 i: 2					
25 0.0500	0.7189	13.660	16	19	0.610
26 i: 3					
27 0.1000	0.9210	17.499	16	19	-1.084
28					
29 Chi-square =	3.05	DF = 2		P-value =	0.2174

30
 31
 32 Benchmark Dose Computation

33 Specified effect = 0.1
 34
 35 Risk Type = Extra risk
 36
 37 Confidence level = 0.95
 38
 39 BMD = 0.00415079
 40
 41 BMDL = 0.00298234
 42
 43

```

1  HOFFMANWYNDER1966BAP.OUT.txt
2  =====
3      Multistage Model. $Revision: 2.1 $ $Date: 2000/08/21 03:38:21 $
4      Input Data File: C:\PAH\BMD ANALYSIS\BIOASSAY\DERMAL
5  STUDIES\HOFFMANWYNDER1966BAP.(d)
6      Gnuplot Plotting File: C:\PAH\BMD ANALYSIS\BIOASSAY\DERMAL
7  STUDIES\HOFFMANWYNDER1966BAP.plt
8
9      Wed May 25 15:13:08 2005
10  =====
11  BMDS MODEL RUN
12  ~~~~~
13
14  The form of the probability function is:
15
16  P[response] = background + (1-background)*[1-EXP(
17  -beta1*dose^1)]
18
19  The parameter betas are restricted to be positive
20
21
22  Dependent variable = incidenceBaP
23  Independent variable = doseBaP
24
25  Total number of observations = 3
26  Total number of records with missing values = 0
27  Total number of parameters in model = 2
28  Total number of specified parameters = 0
29  Degree of polynomial = 1
30
31
32  Maximum number of iterations = 250
33  Relative Function Convergence has been set to: 1e-008
34  Parameter Convergence has been set to: 1e-008
35
36
37
38  Default Initial Parameter Values
39  Background = 0.124609
40  Beta(1) = 29.9573
41
42
43  Asymptotic Correlation Matrix of Parameter Estimates
44
45  ( *** The model parameter(s) -Background
46  have been estimated at a boundary point, or have been
47  specified by the user,
48  and do not appear in the correlation matrix )
49
50  Beta(1)
51
52  Beta(1) 1
53
54
55
56  Parameter Estimates
57
58  Variable Estimate Std. Err.
59  Background 0 NA
60  Beta(1) 34.3074 7.98663

```

1
 2 NA - Indicates that this parameter has hit a bound
 3 implied by some inequality constraint and thus
 4 has no standard error.
 5
 6
 7

8 Analysis of Deviance Table

9

10 Model	Log(likelihood)	Deviance	Test DF	P-value
11 Full model	-12.4245			
12 Fitted model	-12.5735	0.297928	2	0.8616
13 Reduced model	-40.3807	55.9124	2	<.0001

14
 15 AIC: 27.1469
 16
 17

18 Goodness of Fit

19

20 Dose	Est._Prob.	Expected	Observed	Size	Chi^2 Res.
21 -----					
22 i: 1	0.0000	0.0000	0	20	-1.000
24 i: 2	0.0500	16.402	17	20	0.203
26 i: 3	0.1000	19.353	19	20	-0.563
29 Chi-square =	0.32	DF = 1	P-value = 0.5717		

30
 31

32 Benchmark Dose Computation

33 Specified effect = 0.1
 35 Risk Type = Extra risk
 37 Confidence level = 0.95
 39 BMD = 0.00307107
 41 BMDL = 0.00215021
 42
 43

```

1  HOFFMANWYNDER1966DBAEF.OUT.txt
2  =====
3      Multistage Model. $Revision: 2.1 $ $Date: 2000/08/21 03:38:21 $
4      Input Data File: C:\PAH\BMD ANALYSIS\BIOASSAY\DERMAL
5  STUDIES\SETS\HOFFMANWYNDER1966DBAEF.(d)
6      Gnuplot Plotting File: C:\PAH\BMD ANALYSIS\BIOASSAY\DERMAL
7  STUDIES\SETS\HOFFMANWYNDER1966DBAEF.plt
8
9      Thu Jun 02 11:25:43 2005
10  =====
11  BMDS MODEL RUN
12  ~~~~~
13
14  The form of the probability function is:
15
16  P[response] = background + (1-background)*[1-EXP(
17  -beta1*dose^1)]
18
19  The parameter betas are restricted to be positive
20
21
22  Dependent variable = incidenceDBaeF
23  Independent variable = doseDBaeF
24
25  Total number of observations = 3
26  Total number of records with missing values = 0
27  Total number of parameters in model = 2
28  Total number of specified parameters = 0
29  Degree of polynomial = 1
30
31
32  Maximum number of iterations = 250
33  Relative Function Convergence has been set to: 1e-008
34  Parameter Convergence has been set to: 1e-008
35
36
37
38  Default Initial Parameter Values
39      Background =      0.22871
40      Beta(1) =      29.4444
41
42
43  Asymptotic Correlation Matrix of Parameter Estimates
44
45  ( *** The model parameter(s) -Background
46  have been estimated at a boundary point, or have been
47  specified by the user,
48  and do not appear in the correlation matrix )
49
50      Beta(1)
51
52  Beta(1)      1
53
54
55
56  Parameter Estimates
57
58  Variable      Estimate      Std. Err.
59  Background      0      NA
60  Beta(1)      37.3037      9.04943

```

1
 2 NA - Indicates that this parameter has hit a bound
 3 implied by some inequality constraint and thus
 4 has no standard error.
 5
 6
 7

8 Analysis of Deviance Table

9

10 Model	Log(likelihood)	Deviance	Test DF	P-value
11 Full model	-10.3111			
12 Fitted model	-10.7582	0.894194	2	0.6395
13 Reduced model	-38.9521	57.2822	2	<.0001

14
 15 AIC: 23.5163
 16

17 Goodness of Fit

18
 19

20 Dose	Est._Prob.	Expected	Observed	Size	Chi^2 Res.
21 -----					
22 i: 1					
23 0.0000	0.0000	0.000	0	20	0.000
24 i: 2					
25 0.0500	0.8451	16.058	17	19	0.379
26 i: 3					
27 0.1000	0.9760	18.544	18	19	-1.224
28					
29 Chi-square =	1.02	DF = 2		P-value =	0.5995

30
 31 Benchmark Dose Computation

32
 33 Specified effect = 0.1
 34
 35 Risk Type = Extra risk
 36
 37 Confidence level = 0.95
 38
 39 BMD = 0.0028244
 40
 41 BMDL = 0.00193834
 42
 43

```

1  HOFFMANWYNDER1996DBAEP.OUT.txt
2  =====
3      Multistage Model. $Revision: 2.1 $ $Date: 2000/08/21 03:38:21 $
4      Input Data File: C:\BMDS\HOFF_WYND_DBAEP_COMPLETE.(d)
5      Gnuplot Plotting File: C:\BMDS\HOFF_WYND_DBAEP_COMPLETE.plt
6                               Wed Jul 27 16:17:30 2005
7  =====
8
9  BMDS MODEL RUN
10 ~~~~~
11
12  The form of the probability function is:
13
14  P[response] = background + (1-background)*[1-EXP(
15  -beta1*dose^1)]
16
17  The parameter betas are restricted to be positive
18
19
20  Dependent variable = COLUMN2
21  Independent variable = COLUMN1
22
23  Total number of observations = 3
24  Total number of records with missing values = 0
25  Total number of parameters in model = 2
26  Total number of specified parameters = 0
27  Degree of polynomial = 1
28
29
30  Maximum number of iterations = 250
31  Relative Function Convergence has been set to: 1e-008
32  Parameter Convergence has been set to: 1e-008
33
34
35
36          Default Initial Parameter Values
37          Background =      0.120514
38          Beta(1) =      7.53772
39
40
41          Asymptotic Correlation Matrix of Parameter Estimates
42
43          ( *** The model parameter(s) -Background
44            have been estimated at a boundary point, or have been
45  specified by the user,
46            and do not appear in the correlation matrix )
47
48          Beta(1)
49
50  Beta(1)          1
51
52
53
54          Parameter Estimates
55
56          Variable          Estimate          Std. Err.
57  Background          0          NA
58  Beta(1)          11.2084          3.21468
59
60  NA - Indicates that this parameter has hit a bound

```

1 implied by some inequality constraint and thus
2 has no standard error.
3
4
5

6 Analysis of Deviance Table

7 Model	Log(likelihood)	Deviance	Test DF	P-value
8 Full model	-32.4818			
9 Fitted model	-33.903	2.84251	2	0.2414
10 Reduced model	-44.2604	23.5572	2	<.0001
11				
12				
13 AIC:	69.8061			

14
15
16 Goodness of Fit

17	Dose	Est._Prob.	Expected	Observed	Size	Chi^2 Res.
18	-----					
19						
20 i: 1						
21 0.0000	0.0000	0.000	0	20	0.000	
22 i: 2						
23 0.0500	0.4290	12.871	16	30	0.426	
24 i: 3						
25 0.1000	0.6740	11.458	9	17	-0.658	
26						
27 Chi-square =	2.95	DF = 2		P-value = 0.2288		

28
29
30 Benchmark Dose Computation

31 Specified effect = 0.1
32
33 Risk Type = Extra risk
34
35 Confidence level = 0.95
36
37
38 BMD = 0.00940018
39
40 BMDL = 0.00681373
41


```

1 LAVOIE1982BbF.OUT.txt
2 =====
3           Multistage Model. $Revision: 2.1 $ $Date: 2000/08/21 03:38:21 $
4           Input Data File: C:\PAH\BMD ANALYSIS\BIOASSAY\DERMAL
5 STUDIES\LAVOIE1982.(d)
6           Gnuplot Plotting File: C:\PAH\BMD ANALYSIS\BIOASSAY\DERMAL
7 STUDIES\LAVOIE1982.plt
8
9           Wed May 25 16:18:48 2005
10 =====
11 BMDS MODEL RUN
12 ~~~~~
13
14 The form of the probability function is:
15
16 
$$P[\text{response}] = \text{background} + (1 - \text{background}) * [1 - \text{EXP}(-\text{beta1} * \text{dose}^1 - \text{beta2} * \text{dose}^2)]$$

17
18 The parameter betas are restricted to be positive
19
20
21
22 Dependent variable = incidenceBbF
23 Independent variable = doseBbF
24
25 Total number of observations = 4
26 Total number of records with missing values = 0
27 Total number of parameters in model = 3
28 Total number of specified parameters = 0
29 Degree of polynomial = 2
30
31
32 Maximum number of iterations = 250
33 Relative Function Convergence has been set to: 1e-008
34 Parameter Convergence has been set to: 1e-008
35
36
37
38           Default Initial Parameter Values
39           Background = 0.253748
40           Beta(1) = 0.0139485
41           Beta(2) = 0
42
43
44           Asymptotic Correlation Matrix of Parameter Estimates
45
46           ( *** The model parameter(s) -Background -Beta(2)
47             have been estimated at a boundary point, or have been
48 specified by the user,
49             and do not appear in the correlation matrix )
50
51           Beta(1)
52
53           Beta(1) 1
54
55
56
57           Parameter Estimates
58
59           Variable Estimate Std. Err.
60           Background 0 NA

```

1 Beta(1) 0.0256902 0.00624424
 2 Beta(2) 0 NA
 3
 4 NA - Indicates that this parameter has hit a bound
 5 implied by some inequality constraint and thus
 6 has no standard error.
 7
 8
 9

10 Analysis of Deviance Table

Model	Log(likelihood)	Deviance	Test DF	P-value
Full model	-37.2311			
Fitted model	-41.3599	8.25761	3	0.04098
Reduced model	-55.2266	35.991	3	<.0001
AIC:	84.7197			

19 Goodness of Fit

Dose	Est._Prob.	Expected	Observed	Size	Chi^2 Res.
i: 1	0.0000	0.000	0	20	0.000
i: 2	10.0000	4.531	9	20	1.275
i: 3	30.0000	10.746	12	20	0.252
i: 4	100.0000	18.468	16	20	-1.744
Chi-square =	10.32	DF = 3		P-value =	0.0160

36 Benchmark Dose Computation

37
 38 Specified effect = 0.85
 39
 40 Risk Type = Extra risk
 41
 42 Confidence level = 0.95
 43
 44 BMD = 73.8461
 45
 46 BMDL = 55.1641
 47

```

1 LAVOIE1982BjF.OUT.txt
2 =====
3           Multistage Model. $Revision: 2.1 $ $Date: 2000/08/21 03:38:21 $
4           Input Data File: C:\PAH\BMD ANALYSIS\BIOASSAY\DERMAL
5 STUDIES\SETS\LAVOIE1982.(d)
6           Gnuplot Plotting File: C:\PAH\BMD ANALYSIS\BIOASSAY\DERMAL
7 STUDIES\SETS\LAVOIE1982.plt
8
9           Thu May 26 15:18:06 2005
10 =====
11 BMDS MODEL RUN
12 ~~~~~
13
14 The form of the probability function is:
15
16 
$$P[\text{response}] = \text{background} + (1-\text{background}) * [1 - \text{EXP}(-\text{beta}1 * \text{dose}^1)]$$

17
18 The parameter betas are restricted to be positive
19
20
21
22 Dependent variable = incidenceBjF
23 Independent variable = doseBjF
24
25 Total number of observations = 3
26 Total number of records with missing values = 0
27 Total number of parameters in model = 2
28 Total number of specified parameters = 0
29 Degree of polynomial = 1
30
31
32 Maximum number of iterations = 250
33 Relative Function Convergence has been set to: 1e-008
34 Parameter Convergence has been set to: 1e-008
35
36
37
38           Default Initial Parameter Values
39           Background = 0.0505665
40           Beta(1) = 0.00768856
41
42
43           Asymptotic Correlation Matrix of Parameter Estimates
44
45           ( *** The model parameter(s) -Background
46             have been estimated at a boundary point, or have been
47 specified by the user,
48             and do not appear in the correlation matrix )
49
50           Beta(1)
51
52           Beta(1)          1
53
54
55
56           Parameter Estimates
57
58           Variable          Estimate          Std. Err.
59           Background          0              NA
60           Beta(1)          0.00907208      0.00330195

```

1
 2 NA - Indicates that this parameter has hit a bound
 3 implied by some inequality constraint and thus
 4 has no standard error.
 5
 6
 7

8 Analysis of Deviance Table

9 Model	Log(likelihood)	Deviance	Test DF	P-value
10 Full model	-25.9801			
11 Fitted model	-26.2675	0.574796	2	0.7502
12 Reduced model	-35.7644	19.5688	2	<.0001
13 AIC:	54.5349			

14
 15
 16
 17
 18 Goodness of Fit

19 Dose	Est._Prob.	Expected	Observed	Size	Chi^2 Res.
20 -----					
21 i: 1					
22 0.0000	0.0000	0.000	0	20	0.000
23 i: 2					
24 30.0000	0.2383	4.765	6	20	0.340
25 i: 3					
26 100.0000	0.5964	11.927	11	20	-0.193
27 Chi-square =	0.60	DF = 2	P-value =	0.7414	

28
 29
 30
 31 Benchmark Dose Computation

32 Specified effect =	0.85
33 Risk Type =	Extra risk
34 Confidence level =	0.95
35 BMD =	209.116
36 BMDL =	142.347

```

1 LAVOIE1982BkF.OUT.txt
2 =====
3           Multistage Model. $Revision: 2.1 $ $Date: 2000/08/21 03:38:21 $
4           Input Data File: C:\PAH\BMD ANALYSIS\BIOASSAY\DERMAL
5 STUDIES\LAVOIE1982.(d)
6           Gnuplot Plotting File: C:\PAH\BMD ANALYSIS\BIOASSAY\DERMAL
7 STUDIES\LAVOIE1982.plt
8
9           Wed May 25 16:21:19 2005
10 =====
11 BMDS MODEL RUN
12 ~~~~~
13
14 The form of the probability function is:
15
16 
$$P[\text{response}] = \text{background} + (1-\text{background}) * [1 - \text{EXP}(-\text{beta1} * \text{dose}^1 - \text{beta2} * \text{dose}^2)]$$

17
18 The parameter betas are restricted to be positive
19
20
21
22 Dependent variable = incidenceBkF
23 Independent variable = doseBkF
24
25 Total number of observations = 4
26 Total number of records with missing values = 0
27 Total number of parameters in model = 3
28 Total number of specified parameters = 0
29 Degree of polynomial = 2
30
31
32 Maximum number of iterations = 250
33 Relative Function Convergence has been set to: 1e-008
34 Parameter Convergence has been set to: 1e-008
35
36
37
38           Default Initial Parameter Values
39           Background = 0.0504814
40           Beta(1) = 0.00134342
41           Beta(2) = 0
42
43
44           Asymptotic Correlation Matrix of Parameter Estimates
45
46           ( *** The model parameter(s) -Background -Beta(2)
47             have been estimated at a boundary point, or have been
48 specified by the user,
49             and do not appear in the correlation matrix )
50
51           Beta(1)
52
53           Beta(1) 1
54
55
56
57           Parameter Estimates
58
59           Variable Estimate Std. Err.
60           Background 0 NA

```

1 Beta(1) 0.00163117 0.000503161
 2 Beta(2) 0 NA
 3
 4 NA - Indicates that this parameter has hit a bound
 5 implied by some inequality constraint and thus
 6 has no standard error.
 7
 8
 9

10 Analysis of Deviance Table

Model	Log(likelihood)	Deviance	Test DF	P-value
Full model	-26.4637			
Fitted model	-27.3094	1.69146	3	0.6388
Reduced model	-46.0525	39.1775	3	<.0001
AIC:	56.6189			

19 Goodness of Fit

Dose	Est._Prob.	Expected	Observed	Size	Chi^2 Res.
i: 1	0.0000	0.000	0	20	0.000
i: 2	30.0000	0.0478	1	20	0.049
i: 3	100.0000	0.1505	5	20	0.778
i: 4	1000.0000	0.8043	15	20	-0.345
Chi-square =	1.93	DF = 3		P-value =	0.5881

36 Benchmark Dose Computation

37
 38 Specified effect = 0.85
 39
 40 Risk Type = Extra risk
 41
 42 Confidence level = 0.95
 43
 44 BMD = 1163.04
 45
 46 BMDL = 802.998
 47
 48

```

1 RAVEH1982CPCDP.OUT.txt
2 =====
3           Multistage Model. $Revision: 2.1 $ $Date: 2000/08/21 03:38:21 $
4           Input Data File: C:\PAH\BMD ANALYSIS\BIOASSAY\DERMAL
5 STUDIES\RAVEH1982CPCDP.(d)
6           Gnuplot Plotting File: C:\PAH\BMD ANALYSIS\BIOASSAY\DERMAL
7 STUDIES\RAVEH1982CPCDP.plt
8
9           Wed May 25 16:10:56 2005
10 =====

```

11 BMDS MODEL RUN

12 ~~~~~

14 The form of the probability function is:

16 $P[\text{response}] = \text{background} + (1-\text{background}) * [1 - \text{EXP}(-\text{beta1} * \text{dose}^1 - \text{beta2} * \text{dose}^2)]$

19 The parameter betas are restricted to be positive

22 Dependent variable = incidenceBaP
23 Independent variable = doseBaP

25 Total number of observations = 4
26 Total number of records with missing values = 0
27 Total number of parameters in model = 3
28 Total number of specified parameters = 0
29 Degree of polynomial = 2

32 Maximum number of iterations = 250
33 Relative Function Convergence has been set to: 1e-008
34 Parameter Convergence has been set to: 1e-008

38 Default Initial Parameter Values

39 Background = 0.086614
40 Beta(1) = 0.00379482
41 Beta(2) = 0

44 Asymptotic Correlation Matrix of Parameter Estimates

	Background	Beta(1)	Beta(2)
Background	1	-0.51	0.37
Beta(1)	-0.51	1	-0.96
Beta(2)	0.37	-0.96	1

56 Parameter Estimates

Variable	Estimate	Std. Err.
Background	0.0898028	0.134663
Beta(1)	0.0034393	0.00547992

1 Beta(2) 1.91358e-006 2.86516e-005
2
3
4

5 Analysis of Deviance Table

7 Model	Log(likelihood)	Deviance	Test DF	P-value
8 Full model	-57.7672			
9 Fitted model	-57.8738	0.213129	1	0.6443
10 Reduced model	-69.2679	23.0015	3	<.0001

11
12 AIC: 121.748
13
14

15 Goodness of Fit

17 Dose	Est._Prob.	Expected	Observed	Size	Chi^2 Res.
18 -----					
19 i: 1					
20 0.0000	0.0898	2.604	3	29	0.167
21 i: 2					
22 10.0000	0.1207	3.622	3	30	-0.195
23 i: 3					
24 100.0000	0.3669	10.641	11	29	0.053
25 i: 4					
26 200.0000	0.5762	16.134	16	28	-0.020

27
28 Chi-square = 0.21 DF = 1 P-value = 0.6472
29
30

31 Benchmark Dose Computation

32
33 Specified effect = 0.1
34
35 Risk Type = Extra risk
36
37 Confidence level = 0.95
38
39 BMD = 30.1292
40
41 BMDL = 19.4197
42


```

1  RAVEH_1982BaP.OUT.txt
2  =====
3      Multistage Model. $Revision: 2.1 $ $Date: 2000/08/21 03:38:21 $
4      Input Data File: C:\PAH\BMD ANALYSIS\BIOASSAY\DERMAL
5  STUDIES\RAVEH_1982.(d)
6      Gnuplot Plotting File: C:\PAH\BMD ANALYSIS\BIOASSAY\DERMAL
7  STUDIES\RAVEH_1982.plt
8
9      Wed May 25 16:06:59 2005
10  =====
11  BMDS MODEL RUN
12  ~~~~~
13
14  The form of the probability function is:
15
16  P[response] = background + (1-background)*[1-EXP(
17  -beta1*dose^1-beta2*dose^2-beta3*dose^3-beta4*dose^4)]
18
19  The parameter betas are restricted to be positive
20
21
22  Dependent variable = incidenceBaP
23  Independent variable = doseBaP
24
25  Total number of observations = 6
26  Total number of records with missing values = 0
27  Total number of parameters in model = 5
28  Total number of specified parameters = 0
29  Degree of polynomial = 4
30
31
32  Maximum number of iterations = 250
33  Relative Function Convergence has been set to: 1e-008
34  Parameter Convergence has been set to: 1e-008
35
36
37
38  Default Initial Parameter Values
39  Background = 0
40  Beta(1) = 6.01899e+017
41  Beta(2) = 0
42  Beta(3) = 0
43  Beta(4) = 0
44
45
46  Asymptotic Correlation Matrix of Parameter Estimates
47
48  ( *** The model parameter(s) -Beta(2) -Beta(3)
49  have been estimated at a boundary point, or have been
50  specified by the user,
51  and do not appear in the correlation matrix )
52
53  Background      Beta(1)      Beta(4)
54
55  Background      1          -0.66      0.27
56
57  Beta(1)         -0.66      1          -0.52
58
59  Beta(4)         0.27      -0.52      1
60

```

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Parameter Estimates

Variable	Estimate	Std. Err.
Background	0.132052	0.168781
Beta(1)	0.0479561	0.0133452
Beta(2)	0	NA
Beta(3)	0	NA
Beta(4)	4.58924e-009	3.25141e-008

NA - Indicates that this parameter has hit a bound implied by some inequality constraint and thus has no standard error.

Analysis of Deviance Table

Model	Log(likelihood)	Deviance	Test DF	P-value
Full model	-56.5419			
Fitted model	-58.376	3.66814	3	0.2996
Reduced model	-101.065	89.0461	5	<.0001
AIC:	122.752			

Goodness of Fit

Dose	Est._Prob.	Expected	Observed	Size	Chi^2 Res.

i: 1					
0.0000	0.1321	3.830	3	29	-0.250
i: 2					
10.0000	0.4627	13.419	17	29	0.497
i: 3					
25.0000	0.7388	20.685	21	28	0.058
i: 4					
50.0000	0.9233	25.853	24	28	-0.935
i: 5					
100.0000	0.9955	26.878	27	27	1.005
i: 6					
200.0000	1.0000	26.000	26	26	1.000
Chi-square =	3.86	DF = 3	P-value =	0.2771	

Benchmark Dose Computation

Specified effect =	0.1
Risk Type =	Extra risk
Confidence level =	0.95
BMD =	2.19702
BMDL =	1.66278

```

1 RICE1988INITIATIONBbcAC.OUT.txt
2 =====
3     Multistage Model. $Revision: 2.1 $ $Date: 2000/08/21 03:38:21 $
4     Input Data File: C:\PAH\BMD ANALYSIS\BIOASSAY\DERMAL
5 STUDIES\RICE1988INITIATION.(d)
6     Gnuplot Plotting File: C:\PAH\BMD ANALYSIS\BIOASSAY\DERMAL
7 STUDIES\RICE1988INITIATION.plt
8
9     Thu May 26 12:50:09 2005
10 =====
11 BMDS MODEL RUN
12 ~~~~~
13
14     The form of the probability function is:
15
16     P[response] = background + (1-background)*[1-EXP(
17 -beta1*dose^1-beta2*dose^2)]
18
19     The parameter betas are restricted to be positive
20
21
22     Dependent variable = incidenceBbcAC
23     Independent variable = doseBbcAC
24
25     Total number of observations = 4
26     Total number of records with missing values = 0
27     Total number of parameters in model = 3
28     Total number of specified parameters = 0
29     Degree of polynomial = 2
30
31
32     Maximum number of iterations = 250
33     Relative Function Convergence has been set to: 1e-008
34     Parameter Convergence has been set to: 1e-008
35
36
37
38             Default Initial Parameter Values
39             Background =      0.515248
40             Beta(1) =      0.484044
41             Beta(2) =      0
42
43
44             Asymptotic Correlation Matrix of Parameter Estimates
45
46             ( *** The model parameter(s) -Beta(2)
47             have been estimated at a boundary point, or have been
48 specified by the user,
49             and do not appear in the correlation matrix )
50
51             Background      Beta(1)
52
53 Background      1      -0.68
54
55 Beta(1)      -0.68      1
56
57
58
59             Parameter Estimates
60

```

Variable	Estimate	Std. Err.
Background	0.110219	0.243438
Beta(1)	1.01652	0.319132
Beta(2)	0	NA

NA - Indicates that this parameter has hit a bound implied by some inequality constraint and thus has no standard error.

Analysis of Deviance Table

Model	Log(likelihood)	Deviance	Test DF	P-value
Full model	-28.2203			
Fitted model	-34.2145	11.9884	2	0.002493
Reduced model	-51.7957	47.1508	3	<.0001
AIC:	72.4291			

Goodness of Fit

Dose	Est._Prob.	Expected	Observed	Size	Chi^2 Res.
i: 1	0.0000	2.204	1	20	-0.614
i: 2	0.5000	9.295	15	20	1.147
i: 3	2.0000	17.670	18	20	0.160
i: 4	4.0000	19.695	18	20	-5.641
Chi-square =	16.90	DF = 2	P-value = 0.0002		

Benchmark Dose Computation

Specified effect =	0.89
Risk Type =	Extra risk
Confidence level =	0.95
BMD =	2.1714
BMDL =	1.54343

```

1 Rice 1988CH.OUT.txt
2 =====
3           Multistage Model. $Revision: 2.1 $ $Date: 2000/08/21 03:38:21 $
4           Input Data File: C:\BMDS\UNSAVED1.(d)
5           Gnuplot Plotting File: C:\BMDS\UNSAVED1.plt
6                               Thu May 26 12:43:53 2005
7           =====
8
9 BMDS MODEL RUN
10 ~~~~~
11
12 The form of the probability function is:
13
14  $P[\text{response}] = \text{background} + (1-\text{background}) * [1 - \text{EXP}(-\beta_1 * \text{dose} - \beta_2 * \text{dose}^2)]$ 
15
16 The parameter betas are restricted to be positive
17
18 Dependent variable = incidenceCH
19 Independent variable = doseCH
20
21 Total number of observations = 4
22 Total number of records with missing values = 0
23 Total number of parameters in model = 3
24 Total number of specified parameters = 0
25 Degree of polynomial = 2
26
27
28
29
30 Maximum number of iterations = 250
31 Relative Function Convergence has been set to: 1e-008
32 Parameter Convergence has been set to: 1e-008
33
34
35
36           Default Initial Parameter Values
37           Background = 0.305186
38           Beta(1) = 1.94458
39           Beta(2) = 0
40
41
42           Asymptotic Correlation Matrix of Parameter Estimates
43
44           ( *** The model parameter(s) -Beta(2)
45             have been estimated at a boundary point, or have been
46 specified by the user,
47             and do not appear in the correlation matrix )
48
49           Background      Beta(1)
50
51 Background      1      -0.51
52
53 Beta(1)      -0.51      1
54
55
56
57           Parameter Estimates
58
59           Variable      Estimate      Std. Err.
60 Background      0.0435025      0.182669

```

1 Beta(1) 2.7068 0.74964
 2 Beta(2) 0 NA
 3
 4 NA - Indicates that this parameter has hit a bound
 5 implied by some inequality constraint and thus
 6 has no standard error.
 7
 8
 9

10 Analysis of Deviance Table

Model	Log(likelihood)	Deviance	Test DF	P-value
Full model	-25.689			
Fitted model	-28.1343	4.89062	2	0.0867
Reduced model	-55.2266	59.0752	3	<.0001
AIC:	60.2686			

19 Goodness of Fit

Dose	Est._Prob.	Expected	Observed	Size	Chi^2 Res.	
i: 1	0.0000	0.0435	0.870	1	20	0.156
i: 2	0.1500	0.3627	7.254	5	20	-0.488
i: 3	0.5000	0.7529	15.058	18	20	0.791
i: 4	1.5000	0.9835	19.670	19	20	-2.065
Chi-square =	4.83	DF = 2		P-value =	0.0894	

36 Benchmark Dose Computation

37 Specified effect = 0.89
 38
 39 Risk Type = Extra risk
 40
 41 Confidence level = 0.95
 42
 43 BMD = 0.815455
 44
 45 BMDL = 0.584044
 46
 47

```

1 RICE_CPDEFC.OUT.txt
2 =====
3     Multistage Model. $Revision: 2.1 $ $Date: 2000/08/21 03:38:21 $
4     Input Data File: C:\DOCUMENTS AND SETTINGS\HCLYNCH\MY DOCUMENTS\PAH
5 RPS\MODELING\RICE_DERMAL_CPDEFC.(d)
6     Gnuplot Plotting File: C:\DOCUMENTS AND SETTINGS\HCLYNCH\MY
7 DOCUMENTS\PAH RPS\MODELING\RICE_DERMAL_CPDEFC.plt
8                               Thu Jun 30 20:30:27 2005
9     =====
10
11 BMDS MODEL RUN
12 ~~~~~
13
14     The form of the probability function is:
15
16     P[response] = background + (1-background)*[1-EXP(
17 -beta1*dose^1-beta2*dose^2)]
18
19     The parameter betas are restricted to be positive
20
21
22     Dependent variable = COLUMN2
23     Independent variable = COLUMN1
24
25     Total number of observations = 4
26     Total number of records with missing values = 0
27     Total number of parameters in model = 3
28     Total number of specified parameters = 0
29     Degree of polynomial = 2
30
31
32     Maximum number of iterations = 250
33     Relative Function Convergence has been set to: 1e-008
34     Parameter Convergence has been set to: 1e-008
35
36
37
38             Default Initial Parameter Values
39             Background =           1
40             Beta(1) = 6.76726e+019
41             Beta(2) =           0
42
43
44             Asymptotic Correlation Matrix of Parameter Estimates
45
46             ( *** The model parameter(s) -Beta(1)
47             have been estimated at a boundary point, or have been
48 specified by the user,
49             and do not appear in the correlation matrix )
50
51             Background      Beta(2)
52
53 Background      1      -0.52
54
55 Beta(2)      -0.52      1
56
57
58
59             Parameter Estimates
60

```

Variable	Estimate	Std. Err.
Background	0.0499932	0.217763
Beta(1)	0	NA
Beta(2)	44.3918	19.5918

NA - Indicates that this parameter has hit a bound implied by some inequality constraint and thus has no standard error.

Analysis of Deviance Table

Model	Log(likelihood)	Deviance	Test DF	P-value
Full model	-16.9192			
Fitted model	-16.9195	0.000547543	2	0.9997
Reduced model	-49.6481	65.4577	3	<.0001
AIC:	37.839			

Goodness of Fit

Dose	Est._Prob.	Expected	Observed	Size	Chi^2 Res.
i: 1					
0.0000	0.0500	1.000	1	20	0.000
i: 2					
0.1500	0.6501	13.002	13	20	-0.000
i: 3					
0.5000	1.0000	19.000	19	19	1.000
i: 4					
1.5000	1.0000	19.000	19	19	0.000
Chi-square =	0.00	DF = 2	P-value =	0.9999	

Benchmark Dose Computation

Specified effect =	0.88
Risk Type =	Extra risk
Confidence level =	0.95
BMD =	0.218546
BMDL =	0.172781


```

1  NESNOW_1984_DERMAL_BLAC_MALE.txt
2  =====
3      Multistage Model. $Revision: 2.1 $ $Date: 2000/08/21 03:38:21 $
4      Input Data File: C:\DOCUMENTS AND SETTINGS\HCLYNCH\MY DOCUMENTS\_PAH
5  RPS\MODELING\NESNOW_1984_DERMAL_BLAC_MALE.(d)
6      Gnuplot Plotting File: C:\DOCUMENTS AND SETTINGS\HCLYNCH\MY
7  DOCUMENTS\_PAH RPS\MODELING\NESNOW_1984_DERMAL_BLAC_MALE.plt
8                                  Thu Feb 08 09:10:48 2007
9  =====
10
11  BMDS MODEL RUN
12  ~~~~~
13
14  The form of the probability function is:
15
16  P[response] = background + (1-background)*[1-EXP(
17  -beta1*dose^1)]
18
19  The parameter betas are restricted to be positive
20
21
22  Dependent variable = COLUMN2
23  Independent variable = COLUMN1
24
25  Total number of observations = 3
26  Total number of records with missing values = 0
27  Total number of parameters in model = 2
28  Total number of specified parameters = 0
29  Degree of polynomial = 1
30
31
32  Maximum number of iterations = 250
33  Relative Function Convergence has been set to: 1e-008
34  Parameter Convergence has been set to: 1e-008
35
36
37
38          Default Initial Parameter Values
39          Background =          0
40          Beta(1) =      0.0283321
41
42
43          Asymptotic Correlation Matrix of Parameter Estimates
44
45          ( *** The model parameter(s) -Background
46            have been estimated at a boundary point, or have been
47  specified by the user,
48            and do not appear in the correlation matrix )
49
50          Beta(1)
51
52  Beta(1)          1
53
54
55
56          Parameter Estimates
57
58          Variable          Estimate          Std. Err.
59  Background          0          NA
60  Beta(1)          0.0219722          0.00534523

```

1
 2 NA - Indicates that this parameter has hit a bound
 3 implied by some inequality constraint and thus
 4 has no standard error.
 5
 6
 7

8 Analysis of Deviance Table

9

10 Model	Log(likelihood)	Deviance	Test DF	P-value
11 Full model	-17.2634			
12 Fitted model	-17.7362	0.945584	2	0.6233
13 Reduced model	-39.5006	44.4744	2	<.0001

14
 15 AIC: 37.4725
 16
 17

18 Goodness of Fit

19

20 Dose	Est._Prob.	Expected	Observed	Size	Chi^2 Res.

22 i: 1					
23 0.0000	0.0000	0.000	0	20	0.000
24 i: 2					
25 50.0000	0.6667	13.333	12	20	-0.300
26 i: 3					
27 100.0000	0.8889	15.111	16	17	0.529
28					
29 Chi-square =	0.87	DF = 2		P-value =	0.6471

30
 31

32 Benchmark Dose Computation

33
 34 Specified effect = 0.67
 35
 36 Risk Type = Extra risk
 37
 38 Confidence level = 0.95
 39
 40 BMD = 50.4574
 41
 42 BMDL = 35.8134
 43
 44

```

1 NESNOW_1984_DERMAL_BLAC_FEMALE.txt
2 =====
3 Multistage Model. $Revision: 2.1 $ $Date: 2000/08/21 03:38:21 $
4 Input Data File: C:\DOCUMENTS AND SETTINGS\HCLYNCH\MY DOCUMENTS\_PAH
5 RPS\MODELING\NESNOW_1984_DERMAL_BLAC_FEMALE.(d)
6 Gnuplot Plotting File: C:\DOCUMENTS AND SETTINGS\HCLYNCH\MY
7 DOCUMENTS\_PAH RPS\MODELING\NESNOW_1984_DERMAL_BLAC_FEMALE.plt
8 Thu Feb 08 09:13:51 2007
9 =====
10
11 BMDS MODEL RUN
12 ~~~~~
13
14 The form of the probability function is:
15
16 
$$P[\text{response}] = \text{background} + (1-\text{background}) * [1 - \text{EXP}(-\text{beta}1 * \text{dose}^1)]$$

17
18 The parameter betas are restricted to be positive
19
20
21
22 Dependent variable = COLUMN2
23 Independent variable = COLUMN1
24
25 Total number of observations = 3
26 Total number of records with missing values = 0
27 Total number of parameters in model = 2
28 Total number of specified parameters = 0
29 Degree of polynomial = 1
30
31
32 Maximum number of iterations = 250
33 Relative Function Convergence has been set to: 1e-008
34 Parameter Convergence has been set to: 1e-008
35
36
37
38 Default Initial Parameter Values
39 Background = 0
40 Beta(1) = 0.0289037
41
42
43 Asymptotic Correlation Matrix of Parameter Estimates
44
45 Background Beta(1)
46
47 Background 1 -0.49
48
49 Beta(1) -0.49 1
50
51
52
53 Parameter Estimates
54
55 Variable Estimate Std. Err.
56 Background 0.05051 0.21268
57 Beta(1) 0.0234714 0.00648098
58
59
60

```

Analysis of Deviance Table

Model	Log(likelihood)	Deviance	Test DF	P-value
Full model	-20.7842			
Fitted model	-21.1281	0.687832	1	0.4069
Reduced model	-39.8916	38.2148	2	<.0001

AIC: 46.2563

Goodness of Fit

Dose	Est._Prob.	Expected	Observed	Size	Chi^2 Res.	
i: 1	0.0000	0.0505	0.960	1	19	0.044
i: 2	50.0000	0.7064	14.127	13	20	-0.272
i: 3	100.0000	0.9092	17.275	18	19	0.462

Chi-square = 0.64 DF = 1 P-value = 0.4224

Benchmark Dose Computation

Specified effect = 0.51
 Risk Type = Extra risk
 Confidence level = 0.95
 BMD = 30.3924
 BMDL = 21.4681

```

1 NESNOW_1984_DERMAL_BEAC_MALE.txt
2 =====
3 Multistage Model. $Revision: 2.1 $ $Date: 2000/08/21 03:38:21 $
4 Input Data File: C:\DOCUMENTS AND SETTINGS\HCLYNCH\MY DOCUMENTS\_PAH
5 RPS\MODELING\NESNOW_1984_DERMAL_BEAC_MALE.(d)
6 Gnuplot Plotting File: C:\DOCUMENTS AND SETTINGS\HCLYNCH\MY
7 DOCUMENTS\_PAH RPS\MODELING\NESNOW_1984_DERMAL_BEAC_MALE.plt
8 Fri Feb 09 10:09:40 2007
9 =====
10
11 BMDS MODEL RUN
12 ~~~~~
13
14 The form of the probability function is:
15
16 
$$P[\text{response}] = \text{background} + (1 - \text{background}) * [1 - \text{EXP}(-\beta_1 * \text{dose}^1 - \beta_2 * \text{dose}^2 - \beta_3 * \text{dose}^3 - \beta_4 * \text{dose}^4)]$$

17
18 The parameter betas are restricted to be positive
19
20
21
22 Dependent variable = COLUMN2
23 Independent variable = COLUMN1
24
25 Total number of observations = 6
26 Total number of records with missing values = 0
27 Total number of parameters in model = 5
28 Total number of specified parameters = 0
29 Degree of polynomial = 4
30
31
32 Maximum number of iterations = 250
33 Relative Function Convergence has been set to: 1e-008
34 Parameter Convergence has been set to: 1e-008
35
36
37
38 Default Initial Parameter Values
39 Background = 0.121669
40 Beta(1) = 0.00219353
41 Beta(2) = 0
42 Beta(3) = 0
43 Beta(4) = 0
44
45
46 Asymptotic Correlation Matrix of Parameter Estimates
47
48 ( *** The model parameter(s) -Background -Beta(2) -Beta(3)
49 -Beta(4)
50 have been estimated at a boundary point, or have been
51 specified by the user,
52 and do not appear in the correlation matrix )
53
54 Beta(1)
55
56 Beta(1) 1
57
58
59
60 Parameter Estimates

```

Variable	Estimate	Std. Err.
Background	0	NA
Beta(1)	0.00282301	0.00056435
Beta(2)	0	NA
Beta(3)	0	NA
Beta(4)	0	NA

NA - Indicates that this parameter has hit a bound implied by some inequality constraint and thus has no standard error.

Analysis of Deviance Table

Model	Log(likelihood)	Deviance	Test DF	P-value
Full model	-51.002			
Fitted model	-52.1858	2.36767	5	0.7963
Reduced model	-80.7033	59.4025	5	<.0001
AIC:	106.372			

Goodness of Fit

Dose	Est._Prob.	Expected	Observed	Size	Chi^2 Res.
i: 1	0.0000	0.000	0	20	0.000
i: 2	50.0000	2.633	4	20	0.598
i: 3	100.0000	4.919	4	20	-0.248
i: 4	250.0000	10.125	12	20	0.375
i: 5	500.0000	15.124	15	20	-0.034
i: 6	1000.0000	16.930	16	18	-0.925

Chi-square = 2.61 DF = 5 P-value = 0.7594

Benchmark Dose Computation

Specified effect =	0.67
Risk Type =	Extra risk
Confidence level =	0.95
BMD =	392.724
BMDL =	305.587

```

1  NESNOW_1984_DERMAL_BEAC_FEMALE.txt
2  =====
3      Multistage Model. $Revision: 2.1 $ $Date: 2000/08/21 03:38:21 $
4      Input Data File: C:\DOCUMENTS AND SETTINGS\HCLYNCH\MY DOCUMENTS\_PAH
5  RPS\MODELING\NESNOW_1984_DERMAL_BEAC_FEMALE.(d)
6      Gnuplot Plotting File: C:\DOCUMENTS AND SETTINGS\HCLYNCH\MY
7  DOCUMENTS\_PAH RPS\MODELING\NESNOW_1984_DERMAL_BEAC_FEMALE.plt
8                                  Fri Feb 09 10:12:31 2007
9  =====
10
11  BMDS MODEL RUN
12  ~~~~~
13
14  The form of the probability function is:
15
16  P[response] = background + (1-background)*[1-EXP(
17  -beta1*dose^1-beta2*dose^2)]
18
19  The parameter betas are restricted to be positive
20
21
22  Dependent variable = COLUMN2
23  Independent variable = COLUMN1
24
25  Total number of observations = 4
26  Total number of records with missing values = 0
27  Total number of parameters in model = 3
28  Total number of specified parameters = 0
29  Degree of polynomial = 2
30
31
32  Maximum number of iterations = 250
33  Relative Function Convergence has been set to: 1e-008
34  Parameter Convergence has been set to: 1e-008
35
36
37
38          Default Initial Parameter Values
39          Background =      0.0667811
40          Beta(1) =      0.00288357
41          Beta(2) =              0
42
43
44          Asymptotic Correlation Matrix of Parameter Estimates
45
46          ( *** The model parameter(s) -Background      -Beta(2)
47            have been estimated at a boundary point, or have been
48  specified by the user,
49            and do not appear in the correlation matrix )
50
51          Beta(1)
52
53  Beta(1)          1
54
55
56
57          Parameter Estimates
58
59          Variable          Estimate          Std. Err.
60  Background              0              NA

```

1 Beta(1) 0.00366005 0.00126417
 2 Beta(2) 0 NA
 3
 4 NA - Indicates that this parameter has hit a bound
 5 implied by some inequality constraint and thus
 6 has no standard error.
 7
 8
 9

10 Analysis of Deviance Table

Model	Log(likelihood)	Deviance	Test DF	P-value
Full model	-35.6556			
Fitted model	-36.1032	0.895174	3	0.8266
Reduced model	-45.1184	18.9255	3	0.0002833
AIC:	74.2064			

19 Goodness of Fit

Dose	Est._Prob.	Expected	Observed	Size	Chi^2 Res.
i: 1	0.0000	0.000	0	19	0.000
i: 2	50.0000	3.345	4	20	0.235
i: 3	100.0000	5.824	7	19	0.291
i: 4	250.0000	11.390	10	19	-0.305
Chi-square =	0.92	DF = 3		P-value =	0.8205

36 Benchmark Dose Computation

37
 38 Specified effect = 0.51
 39
 40 Risk Type = Extra risk
 41
 42 Confidence level = 0.95
 43
 44 BMD = 194.902
 45
 46 BMDL = 137.872
 47

1 **D.2. INTRAPERITONEAL BIOASSAYS**

2 lavoie 1994 female lung FA.txt

```

3 =====
4     Multistage Model. $Revision: 2.1 $ $Date: 2000/08/21 03:38:21 $
5     Input Data File: C:\BMDS\UNSAVED1.(d)
6     Gnuplot Plotting File: C:\BMDS\UNSAVED1.plt
7                               Thu Jun 30 15:55:31 2005
8     =====

```

9
10 BMDS MODEL RUN

11 ~~~~~
12
13 The form of the probability function is:

14
15 $P[\text{response}] = \text{background} + (1 - \text{background}) * [1 - \text{EXP}(-\text{beta}1 * \text{dose}^1)]$
16

17
18 The parameter betas are restricted to be positive

19
20
21 Dependent variable = COLUMN2
22 Independent variable = COLUMN1

23
24 Total number of observations = 3
25 Total number of records with missing values = 0
26 Total number of parameters in model = 2
27 Total number of specified parameters = 0
28 Degree of polynomial = 1

29
30
31 Maximum number of iterations = 250
32 Relative Function Convergence has been set to: 1e-008
33 Parameter Convergence has been set to: 1e-008

34
35
36
37 Default Initial Parameter Values
38 Background = 0.0929049
39 Beta(1) = 0.108473

40
41
42 Asymptotic Correlation Matrix of Parameter Estimates

43

	Background	Beta(1)
Background	1	-0.48
Beta(1)	-0.48	1

44
45
46
47
48
49

50
51
52 Parameter Estimates

53

Variable	Estimate	Std. Err.
Background	0.112497	0.137421
Beta(1)	0.103015	0.0291539

54
55
56
57
58
59

Analysis of Deviance Table

Model	Log(likelihood)	Deviance	Test DF	P-value
Full model	-44.1118			
Fitted model	-44.1689	0.114322	1	0.7353
Reduced model	-64.1094	39.9952	2	<.0001

AIC: 92.3379

Goodness of Fit

Dose	Est._Prob.	Expected	Observed	Size	Chi^2 Res.
i: 1					
0.0000	0.1125	3.825	4	34	0.052
i: 2					
3.4600	0.3786	11.737	11	31	-0.101
i: 3					
17.3000	0.8507	24.669	25	29	0.090

Chi-square = 0.11 DF = 1 P-value = 0.7366

Benchmark Dose Computation

Specified effect = 0.83
 Risk Type = Extra risk
 Confidence level = 0.95
 BMD = 17.201
 BMDL = 12.2186

```

1 LAVOIEETAL1994LIVERmale.OUT.txt
2 =====
3           Multistage Model. $Revision: 2.1 $ $Date: 2000/08/21 03:38:21 $
4           Input Data File: C:\PAH\BMD
5 ANALYSIS\BIOASSAY\INTRAPERITONEAL\SETS\LAVOIEETAL1994LIVER.(d)
6           Gnuplot Plotting File: C:\PAH\BMD
7 ANALYSIS\BIOASSAY\INTRAPERITONEAL\SETS\LAVOIEETAL1994LIVER.plt
8                               Wed Jun 01 09:15:04 2005
9 =====
10
11 BMD5 MODEL RUN
12 ~~~~~
13
14 The form of the probability function is:
15
16  $P[\text{response}] = \text{background} + (1-\text{background}) * [1 - \text{EXP}(-\text{beta}1 * \text{dose}^1)]$ 
17
18 The parameter betas are restricted to be positive
19
20
21
22 Dependent variable = response
23 Independent variable = dose
24
25 Total number of observations = 3
26 Total number of records with missing values = 0
27 Total number of parameters in model = 2
28 Total number of specified parameters = 0
29 Degree of polynomial = 1
30
31
32 Maximum number of iterations = 250
33 Relative Function Convergence has been set to: 1e-008
34 Parameter Convergence has been set to: 1e-008
35
36
37
38           Default Initial Parameter Values
39           Background = 0
40           Beta(1) = 6.19323e+018
41
42
43           Asymptotic Correlation Matrix of Parameter Estimates
44
45           Background      Beta(1)
46
47 Background      1      -0.47
48
49 Beta(1)      -0.47      1
50
51
52
53           Parameter Estimates
54
55           Variable      Estimate      Std. Err.
56 Background      0.168707      0.160946
57 Beta(1)      0.259821      0.0902001
58
59
60

```

Analysis of Deviance Table

Model	Log(likelihood)	Deviance	Test DF	P-value
Full model	-31.5803			
Fitted model	-31.7622	0.363803	1	0.5464
Reduced model	-51.0494	38.9382	2	<.0001
AIC:	67.5244			

Goodness of Fit

Dose	Est._Prob.	Expected	Observed	Size	Chi^2 Res.
i: 1					
0.0000	0.1687	4.892	5	29	0.026
i: 2					
3.4600	0.6617	18.527	18	28	-0.084
i: 3					
17.3000	0.9907	16.842	17	17	1.009
Chi-square =	0.21	DF = 1		P-value =	0.6496

Benchmark Dose Computation

Specified effect =	0.81
Risk Type =	Extra risk
Confidence level =	0.95
BMD =	6.39183
BMDL =	4.18834

```

1 LAVOIEETAL1994LUNGmale.OUT.txt
2 =====
3           Multistage Model. $Revision: 2.1 $ $Date: 2000/08/21 03:38:21 $
4           Input Data File: C:\PAH\BMD
5 ANALYSIS\BIOASSAY\INTRAPERITONEAL\SETS\LAVOIEETAL1994LUNG.(d)
6           Gnuplot Plotting File: C:\PAH\BMD
7 ANALYSIS\BIOASSAY\INTRAPERITONEAL\SETS\LAVOIEETAL1994LUNG.plt
8                                     Wed Jun 01 09:49:11 2005
9 =====
10
11 BMDS MODEL RUN
12 ~~~~~
13
14 The form of the probability function is:
15
16  $P[\text{response}] = \text{background} + (1-\text{background}) * [1 - \text{EXP}(-\text{beta}1 * \text{dose}^1)]$ 
17
18 The parameter betas are restricted to be positive
19
20
21
22 Dependent variable = responsemale
23 Independent variable = dosemale
24
25 Total number of observations = 3
26 Total number of records with missing values = 0
27 Total number of parameters in model = 2
28 Total number of specified parameters = 0
29 Degree of polynomial = 1
30
31
32 Maximum number of iterations = 250
33 Relative Function Convergence has been set to: 1e-008
34 Parameter Convergence has been set to: 1e-008
35
36
37
38           Default Initial Parameter Values
39           Background = 0.24757
40           Beta(1) = 0.0451334
41
42
43           Asymptotic Correlation Matrix of Parameter Estimates
44
45           Background      Beta(1)
46
47 Background              1      -0.57
48
49 Beta(1)                 -0.57     1
50
51
52
53           Parameter Estimates
54
55 Variable      Estimate      Std. Err.
56 Background    0.209483    0.142769
57 Beta(1)       0.0559823   0.0297979
58
59
60

```

Analysis of Deviance Table

Model	Log(likelihood)	Deviance	Test DF	P-value
Full model	-43.4897			
Fitted model	-44.1071	1.23476	1	0.2665
Reduced model	-49.0816	11.1837	2	0.003728

AIC: 92.2143

Goodness of Fit

Dose	Est._Prob.	Expected	Observed	Size	Chi^2 Res.
i: 1					
0.0000	0.2095	6.075	5	29	-0.224
i: 2					
3.4600	0.3487	9.763	12	28	0.352
i: 3					
17.3000	0.6999	11.898	11	17	-0.251

Chi-square = 1.25 DF = 1 P-value = 0.2629

Benchmark Dose Computation

Specified effect = 0.7
 Risk Type = Extra risk
 Confidence level = 0.95
 BMD = 21.5063
 BMDL = 12.5156

```

1 WISLOCKI_CHRYSENE_MALE_LIVER.OUT.txt
2 =====
3           Multistage Model. $Revision: 2.1 $ $Date: 2000/08/21 03:38:21 $
4           Input Data File: C:\BMDS\WISLOCKI_CHRYSENE_MALE_LIVER.(d)
5           Gnuplot Plotting File: C:\BMDS\WISLOCKI_CHRYSENE_MALE_LIVER.plt
6                               Wed Jun 15 13:20:42 2005
7 =====
8
9 BMDS MODEL RUN
10 ~~~~~
11
12 The form of the probability function is:
13
14  $P[\text{response}] = \text{background} + (1-\text{background}) * [1 - \text{EXP}(-\text{beta}1 * \text{dose}^1)]$ 
15
16 The parameter betas are restricted to be positive
17
18
19
20 Dependent variable = COLUMN2
21 Independent variable = COLUMN1
22
23 Total number of observations = 3
24 Total number of records with missing values = 0
25 Total number of parameters in model = 2
26 Total number of specified parameters = 0
27 Degree of polynomial = 1
28
29
30 Maximum number of iterations = 250
31 Relative Function Convergence has been set to: 1e-008
32 Parameter Convergence has been set to: 1e-008
33
34
35
36           Default Initial Parameter Values
37           Background = 0.147839
38           Beta(1) = 0.000139419
39
40
41           Asymptotic Correlation Matrix of Parameter Estimates
42
43           Background      Beta(1)
44
45 Background      1      -0.57
46
47 Beta(1)      -0.57      1
48
49
50
51           Parameter Estimates
52
53           Variable      Estimate      Std. Err.
54 Background      0.109703      0.10278
55 Beta(1)      0.000173669      9.88799e-005
56
57
58
59           Analysis of Deviance Table
60

```

```

1      Model      Log(likelihood)  Deviance  Test DF      P-value
2      Full model      -67.0392
3      Fitted model      -67.7628      1.44719      1      0.229
4      Reduced model      -74.516      14.9536      2      0.0005661
5
6      AIC:      139.526
7
8
9      Goodness of Fit
10
11     Dose      Est._Prob.      Expected      Observed      Size      Chi^2 Res.
12     -----
13     i: 1
14     0.0000      0.1097      8.008      7      73      -0.141
15     i: 2
16     700.0000      0.2116      7.407      10      35      0.444
17     i: 3
18     2800.0000      0.4525      15.387      14      34      -0.165
19
20     Chi-square =      1.52      DF = 1      P-value = 0.2172
21
22
23     Benchmark Dose Computation
24
25     Specified effect =      0.44
26
27     Risk Type      =      Extra risk
28
29     Confidence level =      0.95
30
31     BMD =      3338.63
32
33     BMDL =      2098.51
34

```



```

1 WISLOCKI_CHRYSENE_MALE_LUNG.OUT.txt
2 =====
3           Multistage Model. $Revision: 2.1 $ $Date: 2000/08/21 03:38:21 $
4           Input Data File: C:\BMDS\WISLOCKI_CHRYSENE_MALE_LUNG.(d)
5           Gnuplot Plotting File: C:\BMDS\WISLOCKI_CHRYSENE_MALE_LUNG.plt
6                               Wed Jun 15 13:21:42 2005
7 =====
8
9 BMDS MODEL RUN
10 ~~~~~
11
12 The form of the probability function is:
13
14  $P[\text{response}] = \text{background} + (1-\text{background}) * [1 - \text{EXP}(-\text{beta}1 * \text{dose}^1)]$ 
15
16 The parameter betas are restricted to be positive
17
18
19
20 Dependent variable = COLUMN2
21 Independent variable = COLUMN1
22
23 Total number of observations = 3
24 Total number of records with missing values = 0
25 Total number of parameters in model = 2
26 Total number of specified parameters = 0
27 Degree of polynomial = 1
28
29
30 Maximum number of iterations = 250
31 Relative Function Convergence has been set to: 1e-008
32 Parameter Convergence has been set to: 1e-008
33
34
35
36           Default Initial Parameter Values
37           Background = 0.101102
38           Beta(1) = 4.85056e-005
39
40
41           Asymptotic Correlation Matrix of Parameter Estimates
42
43           Background      Beta(1)
44
45 Background      1      -0.6
46
47 Beta(1)      -0.6      1
48
49
50
51           Parameter Estimates
52
53           Variable      Estimate      Std. Err.
54 Background      0.0806675      0.103469
55 Beta(1)      6.36834e-005      8.767e-005
56
57
58
59           Analysis of Deviance Table
60

```

```

1      Model      Log(likelihood)  Deviance  Test DF      P-value
2      Full model      -51.5522
3      Fitted model      -52.0709      1.03747      1      0.3084
4      Reduced model      -53.9858      4.86735      2      0.08771
5
6      AIC:      108.142
7
8
9      Goodness of Fit
10
11     Dose      Est._Prob.      Expected      Observed      Size      Chi^2 Res.
12     -----
13     i: 1
14     0.0000      0.0807      5.889      5      73      -0.164
15     i: 2
16     700.0000      0.1207      4.226      6      35      0.477
17     i: 3
18     2800.0000      0.2308      7.848      7      34      -0.140
19
20     Chi-square =      1.11      DF = 1      P-value = 0.2917
21
22
23     Benchmark Dose Computation
24
25     Specified effect =      0.3
26
27     Risk Type      =      Extra risk
28
29     Confidence level =      0.95
30
31     BMD =      5600.76
32
33     BMDL =      2691.64
34

```

```

1 Busby 1984 i.p. multiplicity
2 FA male
3 Linear
4 Nonconstant variance
5 BMR = lowest statistically significant response in BaP treated animals (after
6 control subtracted)
7
8 =====
9 Polynomial Model. (Version: 2.12; Date: 02/20/2007)
10 Input Data File: C:\BMDS\UNSAVED1.(d)
11 Gnuplot Plotting File: C:\BMDS\UNSAVED1.plt
12 Mon May 11 21:08:40 2009
13 =====
14
15 BMDS MODEL RUN
16 ~~~~~
17
18 The form of the response function is:
19
20  $Y[\text{dose}] = \text{beta}_0 + \text{beta}_1 \cdot \text{dose} + \text{beta}_2 \cdot \text{dose}^2 + \dots$ 
21
22
23 Dependent variable = MEAN
24 Independent variable = COLUMN1
25 The polynomial coefficients are restricted to be positive
26 The variance is to be modeled as  $\text{Var}(i) = \exp(\text{lalpha} + \log(\text{mean}(i))) * \text{rho}$ 
27
28 Total number of dose groups = 3
29 Total number of records with missing values = 0
30 Maximum number of iterations = 250
31 Relative Function Convergence has been set to: 1e-008
32 Parameter Convergence has been set to: 1e-008
33
34
35
36 Default Initial Parameter Values
37 lalpha = 0.136152
38 rho = 0
39 beta_0 = 0.0180952
40 beta_1 = 0.427551
41
42
43 Asymptotic Correlation Matrix of Parameter Estimates
44
45 lalpha rho beta_0 beta_1
46 lalpha 1 0.65 0.015 0.00041
47 rho 0.65 1 0.22 -0.061
48 beta_0 0.015 0.22 1 -0.24
49 beta_1 0.00041 -0.061 -0.24 1
50
51
52
53
54
55
56
57 Parameter Estimates
58
59 95.0% Wald
60 Confidence Interval

```

Variable	Estimate	Std. Err.	Lower Conf. Limit
Upper Conf. Limit			
lalpha	0.634298	0.204652	0.233188
1.03541			
rho	0.923372	0.0876305	0.751619
1.09512			
beta_0	0.0170376	0.0434041	-0.0680328
0.102108			
beta_1	0.426604	0.0861283	0.257796
0.595413			

Table of Data and Estimated Values of Interest

Dose	N	Obs Mean	Est Mean	Obs Std Dev	Est Std Dev	Scaled Res.
0	27	0.04	0.017	0.21	0.21	0.57
0.7	31	0.29	0.316	0.84	0.806	-0.177
3.5	27	1.52	1.51	1.66	1.66	0.0308

Model Descriptions for likelihoods calculated

Model A1: $Y_{ij} = \mu(i) + e(ij)$
 $\text{Var}\{e(ij)\} = \sigma^2$

Model A2: $Y_{ij} = \mu(i) + e(ij)$
 $\text{Var}\{e(ij)\} = \sigma(i)^2$

Model A3: $Y_{ij} = \mu(i) + e(ij)$
 $\text{Var}\{e(ij)\} = \exp(\text{lalpha} + \rho \cdot \ln(\mu(i)))$
 Model A3 uses any fixed variance parameters that were specified by the user

Model R: $Y_i = \mu + e(i)$
 $\text{Var}\{e(i)\} = \sigma^2$

Likelihoods of Interest

Model	Log(likelihood)	# Param's	AIC
A1	-46.759351	4	101.518703
A2	-7.114400	6	26.228800
A3	-7.317284	5	24.634569
fitted	-7.329046	4	22.658093
R	-59.984569	2	123.969139

Explanation of Tests

- Test 1: Do responses and/or variances differ among Dose levels? (A2 vs. R)
- Test 2: Are Variances Homogeneous? (A1 vs A2)
- Test 3: Are variances adequately modeled? (A2 vs. A3)

1 Test 4: Does the Model for the Mean Fit? (A3 vs. fitted)
2 (Note: When rho=0 the results of Test 3 and Test 2 will be the same.)
3

4 Tests of Interest

5 Test	-2*log(Likelihood Ratio)	Test df	p-value
6 Test 1	105.74	4	<.0001
7 Test 2	79.2899	2	<.0001
8 Test 3	0.405769	1	0.5241
9 Test 4	0.0235238	1	0.8781

10
11
12
13 The p-value for Test 1 is less than .05. There appears to be a
14 difference between response and/or variances among the dose levels
15 It seems appropriate to model the data

16
17 The p-value for Test 2 is less than .1. A non-homogeneous variance
18 model appears to be appropriate

19
20 The p-value for Test 3 is greater than .1. The modeled variance appears
21 to be appropriate here

22
23 The p-value for Test 4 is greater than .1. The model chosen seems
24 to adequately describe the data

25
26
27 Benchmark Dose Computation

28
29 Specified effect = 4.28
30
31 Risk Type = Point risk
32
33 Confidence level = 0.95
34
35 BMD = 9.99278
36
37
38 BMDL = 7.55762
39

```

1 Busby 1984 i.p. multiplicity
2 FA female
3 Linear
4 Nonconstant variance
5 BMR = lowest statistically significant response in BaP treated animals (after
6 control subtracted)
7
8 =====
9 Polynomial Model. (Version: 2.12; Date: 02/20/2007)
10 Input Data File: C:\BMDS\UNSAVED1.(d)
11 Gnuplot Plotting File: C:\BMDS\UNSAVED1.plt
12 Mon May 11 21:14:08 2009
13 =====
14
15 BMDS MODEL RUN
16 ~~~~~
17
18 The form of the response function is:
19
20  $Y[\text{dose}] = \text{beta}_0 + \text{beta}_1 \cdot \text{dose} + \text{beta}_2 \cdot \text{dose}^2 + \dots$ 
21
22
23 Dependent variable = MEAN
24 Independent variable = COLUMN1
25 The polynomial coefficients are restricted to be positive
26 The variance is to be modeled as  $\text{Var}(i) = \exp(\text{lalpha} + \log(\text{mean}(i))) * \text{rho}$ 
27
28 Total number of dose groups = 3
29 Total number of records with missing values = 0
30 Maximum number of iterations = 250
31 Relative Function Convergence has been set to: 1e-008
32 Parameter Convergence has been set to: 1e-008
33
34
35
36 Default Initial Parameter Values
37 lalpha = -1.11206
38 rho = 0
39 beta_0 = 0.108571
40 beta_1 = 0.115306
41
42
43 Asymptotic Correlation Matrix of Parameter Estimates
44
45 lalpha rho beta_0 beta_1
46 lalpha 1 0.94 0.036 -0.047
47 rho 0.94 1 0.04 -0.052
48 beta_0 0.036 0.04 1 -0.46
49 beta_1 -0.047 -0.052 -0.46 1
50
51
52
53
54
55
56
57 Parameter Estimates
58
59 95.0% Wald
60 Confidence Interval

```

Variable	Estimate	Std. Err.	Lower Conf. Limit
Upper Conf. Limit			
lalpha	0.353344	0.480274	-0.587974
1.29466			
rho	1.1315	0.292904	0.557421
1.70558			
beta_0	0.123135	0.0618608	0.00189039
0.24438			
beta_1	0.106469	0.0535364	0.00153987
0.211399			

Table of Data and Estimated Values of Interest

Dose	N	Obs Mean	Est Mean	Obs Std Dev	Est Std Dev	Scaled Res.
0	28	0.14	0.123	0.37	0.365	0.245
0.7	20	0.15	0.198	0.49	0.477	-0.447
3.5	21	0.52	0.496	0.82	0.802	0.138

Model Descriptions for likelihoods calculated

Model A1: $Y_{ij} = \mu(i) + e(ij)$
 $\text{Var}\{e(ij)\} = \sigma^2$

Model A2: $Y_{ij} = \mu(i) + e(ij)$
 $\text{Var}\{e(ij)\} = \sigma(i)^2$

Model A3: $Y_{ij} = \mu(i) + e(ij)$
 $\text{Var}\{e(ij)\} = \exp(\text{lalpha} + \text{rho} * \ln(\mu(i)))$
 Model A3 uses any fixed variance parameters that were specified by the user

Model R: $Y_i = \mu + e(i)$
 $\text{Var}\{e(i)\} = \sigma^2$

Likelihoods of Interest

Model	Log(likelihood)	# Param's	AIC
A1	5.399546	4	-2.799091
A2	13.307908	6	-14.615816
A3	13.189903	5	-16.379806
fitted	13.167852	4	-18.335705
R	2.264796	2	-0.529591

Explanation of Tests

- Test 1: Do responses and/or variances differ among Dose levels? (A2 vs. R)
- Test 2: Are Variances Homogeneous? (A1 vs A2)
- Test 3: Are variances adequately modeled? (A2 vs. A3)

1 Test 4: Does the Model for the Mean Fit? (A3 vs. fitted)
2 (Note: When rho=0 the results of Test 3 and Test 2 will be the same.)
3

4 Tests of Interest

5 Test	-2*log(Likelihood Ratio)	Test df	p-value
6 Test 1	22.0862	4	0.0001927
7 Test 2	15.8167	2	0.0003677
8 Test 3	0.23601	1	0.6271
9 Test 4	0.0441012	1	0.8337

10 The p-value for Test 1 is less than .05. There appears to be a
11 difference between response and/or variances among the dose levels
12 It seems appropriate to model the data

13 The p-value for Test 2 is less than .1. A non-homogeneous variance
14 model appears to be appropriate

15 The p-value for Test 3 is greater than .1. The modeled variance appears
16 to be appropriate here

17 The p-value for Test 4 is greater than .1. The model chosen seems
18 to adequately describe the data

19 Benchmark Dose Computation

20 Specified effect = 3.56
21 Risk Type = Point risk
22 Confidence level = 0.95
23 BMD = 32.2804
24 BMDL = 18.094
25
26
27
28
29
30
31
32
33
34
35
36
37
38
39


```

1 Nesnow 1998b i.p. multiplicity
2 BbF
3 Drop 2 high doses
4 Linear
5 Nonconstant variance
6 BMR = lowest statistically significant response in BaP treated animals (after
7 control subtracted)
8
9 =====
10 Polynomial Model. (Version: 2.12; Date: 02/20/2007)
11 Input Data File: C:\BMDS\UNSAVED1.(d)
12 Gnuplot Plotting File: C:\BMDS\UNSAVED1.plt
13                               Mon May 11 20:47:24 2009
14 =====
15
16 BMDS MODEL RUN
17 ~~~~~
18
19 The form of the response function is:
20
21 Y[dose] = beta_0 + beta_1*dose + beta_2*dose^2 + ...
22
23
24 Dependent variable = MEAN
25 Independent variable = COLUMN1
26 The polynomial coefficients are restricted to be positive
27 The variance is to be modeled as Var(i) = exp(lalpha + log(mean(i)) * rho)
28
29 Total number of dose groups = 3
30 Total number of records with missing values = 0
31 Maximum number of iterations = 250
32 Relative Function Convergence has been set to: 1e-008
33 Parameter Convergence has been set to: 1e-008
34
35
36
37           Default Initial Parameter Values
38           lalpha =      0.21205
39           rho =      0
40           beta_0 =      0.453571
41           beta_1 =      0.0305714
42
43
44           Asymptotic Correlation Matrix of Parameter Estimates
45
46           lalpha      rho      beta_0      beta_1
47
48 lalpha      1      0.38      0.032      -0.058
49
50 rho      0.38      1      -0.032      -0.017
51
52 beta_0      0.032      -0.032      1      -0.39
53
54 beta_1      -0.058      -0.017      -0.39      1
55
56
57
58           Parameter Estimates
59

```

95.0% Wald

Variable	Estimate	Std. Err.	Lower Conf. Limit
lalpha	0.158349	0.173664	-0.182027
rho	1.42233	0.285984	0.861815
beta_0	0.516257	0.101994	0.316353
beta_1	0.0272062	0.00781084	0.0118972

Table of Data and Estimated Values of Interest

Dose	N	Obs Mean	Est Mean	Obs Std Dev	Est Std Dev	Scaled Res.
0	40	0.525	0.516	0.72	0.676	0.0818
10	18	0.67	0.788	0.75	0.914	-0.549
50	20	2	1.88	1.82	1.69	0.326

Model Descriptions for likelihoods calculated

Model A1: $Y_{ij} = \mu(i) + e(ij)$
 $\text{Var}\{e(ij)\} = \sigma^2$

Model A2: $Y_{ij} = \mu(i) + e(ij)$
 $\text{Var}\{e(ij)\} = \sigma(i)^2$

Model A3: $Y_{ij} = \mu(i) + e(ij)$
 $\text{Var}\{e(ij)\} = \exp(\text{lalpha} + \text{rho} \cdot \ln(\mu(i)))$
 Model A3 uses any fixed variance parameters that were specified by the user

Model R: $Y_i = \mu + e(i)$
 $\text{Var}\{e(i)\} = \sigma^2$

Likelihoods of Interest

Model	Log(likelihood)	# Param's	AIC
A1	-45.740331	4	99.480662
A2	-31.124575	6	74.249150
A3	-31.233847	5	72.467694
fitted	-32.276084	4	72.552168
R	-56.886387	2	117.772774

Explanation of Tests

Test 1: Do responses and/or variances differ among Dose levels?
 (A2 vs. R)

1 Test 2: Are Variances Homogeneous? (A1 vs A2)
 2 Test 3: Are variances adequately modeled? (A2 vs. A3)
 3 Test 4: Does the Model for the Mean Fit? (A3 vs. fitted)
 4 (Note: When rho=0 the results of Test 3 and Test 2 will be the same.)
 5

6 Tests of Interest

7 Test	-2*log(Likelihood Ratio)	Test df	p-value
10 Test 1	51.5236	4	<.0001
11 Test 2	29.2315	2	<.0001
12 Test 3	0.218544	1	0.6402
13 Test 4	2.08447	1	0.1488

14
 15 The p-value for Test 1 is less than .05. There appears to be a
 16 difference between response and/or variances among the dose levels
 17 It seems appropriate to model the data
 18

19 The p-value for Test 2 is less than .1. A non-homogeneous variance
 20 model appears to be appropriate
 21

22 The p-value for Test 3 is greater than .1. The modeled variance appears
 23 to be appropriate here
 24

25 The p-value for Test 4 is greater than .1. The model chosen seems
 26 to adequately describe the data
 27

28
 29 Benchmark Dose Computation

30
 31 Specified effect = 3.85
 32
 33 Risk Type = Point risk
 34
 35 Confidence level = 0.95
 36
 37 BMD = 122.536
 38
 39
 40 BMDL = 84.4572
 41

```

1 Nesnow 1998b i.p. multiplicity
2 DBahA
3 Drop 2 high doses
4 Linear
5 Nonconstant variance
6 BMR = lowest statistically significant response in BaP treated animals (after
7 control subtracted)
8
9 =====
10 Polynomial Model. (Version: 2.12; Date: 02/20/2007)
11 Input Data File: C:\BMDS\UNSAVED1.(d)
12 Gnuplot Plotting File: C:\BMDS\UNSAVED1.plt
13                                     Mon May 11 20:55:01 2009
14 =====
15
16 BMDS MODEL RUN
17 ~~~~~
18
19 The form of the response function is:
20
21  $Y[\text{dose}] = \text{beta}_0 + \text{beta}_1 \cdot \text{dose} + \text{beta}_2 \cdot \text{dose}^2 + \dots$ 
22
23
24 Dependent variable = MEAN
25 Independent variable = COLUMN1
26 The polynomial coefficients are restricted to be positive
27 The variance is to be modeled as  $\text{Var}(i) = \exp(\text{lalpha} + \log(\text{mean}(i))) * \text{rho}$ 
28
29 Total number of dose groups = 3
30 Total number of records with missing values = 0
31 Maximum number of iterations = 250
32 Relative Function Convergence has been set to: 1e-008
33 Parameter Convergence has been set to: 1e-008
34
35
36
37 Default Initial Parameter Values
38         lalpha =    0.495312
39         rho =      0
40         beta_0 =    0.409167
41         beta_1 =    1.01
42
43
44 Asymptotic Correlation Matrix of Parameter Estimates
45
46         lalpha      rho      beta_0      beta_1
47 lalpha           1      -0.039      -0.0077      0.0076
48 rho             -0.039      1          0.042      -0.057
49 beta_0          -0.0077      0.042      1          -0.37
50 beta_1          0.0076      -0.057     -0.37      1
51
52
53
54
55
56
57
58 Parameter Estimates
59

```

95.0% Wald

Variable	Estimate	Std. Err.	Lower Conf. Limit
lalpha	0.090155	0.16129	-0.225967
rho	1.13256	0.215446	0.710291
beta_0	0.509019	0.111758	0.289977
beta_1	0.936099	0.156639	0.629093

Table of Data and Estimated Values of Interest

Dose	N	Obs Mean	Est Mean	Obs Std Dev	Est Std Dev	Scaled Res.
0	40	0.525	0.509	0.72	0.714	0.142
1.25	18	1.44	1.68	1.46	1.4	-0.723
2.5	19	3.05	2.85	1.9	1.89	0.462

Model Descriptions for likelihoods calculated

Model A1: $Y_{ij} = \mu(i) + e(ij)$
 $\text{Var}\{e(ij)\} = \sigma^2$

Model A2: $Y_{ij} = \mu(i) + e(ij)$
 $\text{Var}\{e(ij)\} = \sigma(i)^2$

Model A3: $Y_{ij} = \mu(i) + e(ij)$
 $\text{Var}\{e(ij)\} = \exp(\text{lalpha} + \text{rho} \cdot \ln(\mu(i)))$
 Model A3 uses any fixed variance parameters that were specified by the user

Model R: $Y_i = \mu + e(i)$
 $\text{Var}\{e(i)\} = \sigma^2$

Likelihoods of Interest

Model	Log(likelihood)	# Param's	AIC
A1	-56.039525	4	120.079049
A2	-42.832497	6	97.664993
A3	-43.013192	5	96.026383
fitted	-43.223844	4	94.447689
R	-75.955323	2	155.910645

Explanation of Tests

Test 1: Do responses and/or variances differ among Dose levels?
 (A2 vs. R)

1 Test 2: Are Variances Homogeneous? (A1 vs A2)
 2 Test 3: Are variances adequately modeled? (A2 vs. A3)
 3 Test 4: Does the Model for the Mean Fit? (A3 vs. fitted)
 4 (Note: When rho=0 the results of Test 3 and Test 2 will be the same.)
 5

6 Tests of Interest

7 Test	-2*log(Likelihood Ratio)	Test df	p-value
10 Test 1	66.2457	4	<.0001
11 Test 2	26.4141	2	<.0001
12 Test 3	0.36139	1	0.5477
13 Test 4	0.421305	1	0.5163

14
 15 The p-value for Test 1 is less than .05. There appears to be a
 16 difference between response and/or variances among the dose levels
 17 It seems appropriate to model the data
 18

19 The p-value for Test 2 is less than .1. A non-homogeneous variance
 20 model appears to be appropriate
 21

22 The p-value for Test 3 is greater than .1. The modeled variance appears
 23 to be appropriate here
 24

25 The p-value for Test 4 is greater than .1. The model chosen seems
 26 to adequately describe the data
 27

28
 29 Benchmark Dose Computation

30
 31 Specified effect = 3.85
 32
 33 Risk Type = Point risk
 34
 35 Confidence level = 0.95
 36
 37 BMD = 3.56905
 38
 39
 40 BMDL = 2.82758
 41
 42
 43

1 **D.3. LUNG IMPLANTATION BIOASSAYS**

2 DEUTSCH-WENZEL1983AA.OUT.txt

3 =====
4 Multistage Model. \$Revision: 2.1 \$ \$Date: 2000/08/21 03:38:21 \$
5 Input Data File: C:\PAH\BMD ANALYSIS\BIOASSAY\OTHER ROUTE\DEUTSCH-
6 WENZEL1983.(d)
7 Gnuplot Plotting File: C:\PAH\BMD ANALYSIS\BIOASSAY\OTHER
8 ROUTE\DEUTSCH-WENZEL1983.plt

9 Fri May 27 10:51:53 2005

10 =====

11 BMDS MODEL RUN

12 ~~~~~

13
14 The form of the probability function is:

15
16
$$P[\text{response}] = \text{background} + (1-\text{background}) * [1 - \text{EXP}(-\text{beta}1 * \text{dose}^1)]$$

17
18
19 The parameter betas are restricted to be positive

20
21
22
23 Dependent variable = incidenceAA

24 Independent variable = doseAA

25
26 Total number of observations = 3
27 Total number of records with missing values = 0
28 Total number of parameters in model = 2
29 Total number of specified parameters = 0
30 Degree of polynomial = 1

31
32
33 Maximum number of iterations = 250
34 Relative Function Convergence has been set to: 1e-008
35 Parameter Convergence has been set to: 1e-008

36
37
38
39 Default Initial Parameter Values

40 Background = 0
41 Beta(1) = 0.996523

42
43
44 Asymptotic Correlation Matrix of Parameter Estimates

45
46 (*** The model parameter(s) -Background
47 have been estimated at a boundary point, or have been
48 specified by the user,
49 and do not appear in the correlation matrix)

50
51 Beta(1)
52
53 Beta(1) 1

54
55
56
57 Parameter Estimates

58
59 Variable Estimate Std. Err.

1 Background 0 NA
 2 Beta(1) 0.773841 0.260605
 3
 4 NA - Indicates that this parameter has hit a bound
 5 implied by some inequality constraint and thus
 6 has no standard error.
 7
 8
 9

10 Analysis of Deviance Table

Model	Log(likelihood)	Deviance	Test DF	P-value
Full model	-28.6723			
Fitted model	-30.8245	4.30422	2	0.1162
Reduced model	-51.1258	44.907	2	<.0001
AIC:	63.6489			

19 Goodness of Fit

Dose	Est._Prob.	Expected	Observed	Size	Chi^2 Res.

i: 1	0.0000	0.0000	0	35	0.000
i: 2	0.1600	0.1165	1	35	-0.854
i: 3	0.8300	0.4739	19	35	0.277
Chi-square =	3.29	DF = 2	P-value = 0.1926		

34 Benchmark Dose Computation

35 Specified effect = 0.1
 36 Risk Type = Extra risk
 37 Confidence level = 0.95
 38 BMD = 0.136153
 39 BMDL = 0.0956191
 40
 41
 42
 43
 44
 45


```

1 DEUTSCH-WENZEL1983BaP.OUT.txt
2 =====
3     Multistage Model. $Revision: 2.1 $ $Date: 2000/08/21 03:38:21 $
4     Input Data File: C:\PAH\BMD ANALYSIS\BIOASSAY\OTHER ROUTE\DEUTSCH-
5 WENZEL1983.(d)
6     Gnuplot Plotting File: C:\PAH\BMD ANALYSIS\BIOASSAY\OTHER
7 ROUTE\DEUTSCH-WENZEL1983.plt
8
9     Fri May 27 10:42:10 2005
10 =====
11 BMDS MODEL RUN
12 ~~~~~
13
14     The form of the probability function is:
15
16     P[response] = background + (1-background)*[1-EXP(
17 -beta1*dose^1-beta2*dose^2)]
18
19     The parameter betas are restricted to be positive
20
21
22     Dependent variable = incidenceBaP
23     Independent variable = doseBaP
24
25     Total number of observations = 4
26     Total number of records with missing values = 0
27     Total number of parameters in model = 3
28     Total number of specified parameters = 0
29     Degree of polynomial = 2
30
31
32     Maximum number of iterations = 250
33     Relative Function Convergence has been set to: 1e-008
34     Parameter Convergence has been set to: 1e-008
35
36
37
38     Default Initial Parameter Values
39     Background = 0.0757681
40     Beta(1) = 2.82425
41     Beta(2) = 0
42
43
44     Asymptotic Correlation Matrix of Parameter Estimates
45
46     ( *** The model parameter(s) -Background -Beta(2)
47     have been estimated at a boundary point, or have been
48 specified by the user,
49     and do not appear in the correlation matrix )
50
51     Beta(1)
52
53     Beta(1) 1
54
55
56
57     Parameter Estimates
58
59     Variable Estimate Std. Err.
60     Background 0 NA

```

1 Beta(1) 3.25323 0.593548
 2 Beta(2) 0 NA
 3
 4 NA - Indicates that this parameter has hit a bound
 5 implied by some inequality constraint and thus
 6 has no standard error.
 7
 8
 9

10 Analysis of Deviance Table

Model	Log(likelihood)	Deviance	Test DF	P-value
Full model	-51.1075			
Fitted model	-51.3412	0.467435	3	0.926
Reduced model	-96.8119	91.4088	3	<.0001
AIC:	104.682			

19 Goodness of Fit

Dose	Est._Prob.	Expected	Observed	Size	Chi^2 Res.
i: 1	0.0000	0.0000	0	35	0.000
i: 2	0.1000	0.2777	10	35	0.040
i: 3	0.3000	0.6232	23	35	0.145
i: 4	1.0000	0.9614	33	35	-0.498
Chi-square =	0.51	DF = 3		P-value =	0.9177

36 Benchmark Dose Computation

37
 38 Specified effect = 0.1
 39
 40 Risk Type = Extra risk
 41
 42 Confidence level = 0.95
 43
 44 BMD = 0.0323864
 45
 46 BMDL = 0.0255063
 47

```

1 DEUTSCH-WENZEL1983BbF.OUT.txt
2 =====
3     Multistage Model. $Revision: 2.1 $ $Date: 2000/08/21 03:38:21 $
4     Input Data File: C:\PAH\BMD ANALYSIS\BIOASSAY\OTHER ROUTE\DEUTSCH-
5 WENZEL1983.(d)
6     Gnuplot Plotting File: C:\PAH\BMD ANALYSIS\BIOASSAY\OTHER
7 ROUTE\DEUTSCH-WENZEL1983.plt
8
9     Fri May 27 10:46:47 2005
10 =====
11 BMDS MODEL RUN
12 ~~~~~
13
14     The form of the probability function is:
15
16     P[response] = background + (1-background)*[1-EXP(
17 -beta1*dose^1-beta2*dose^2)]
18
19     The parameter betas are restricted to be positive
20
21
22     Dependent variable = incidenceBbF
23     Independent variable = doseBbF
24
25     Total number of observations = 4
26     Total number of records with missing values = 0
27     Total number of parameters in model = 3
28     Total number of specified parameters = 0
29     Degree of polynomial = 2
30
31
32     Maximum number of iterations = 250
33     Relative Function Convergence has been set to: 1e-008
34     Parameter Convergence has been set to: 1e-008
35
36
37
38     Default Initial Parameter Values
39     Background = 0.00149382
40     Beta(1) = 0.226374
41     Beta(2) = 0.236366
42
43
44     Asymptotic Correlation Matrix of Parameter Estimates
45
46     ( *** The model parameter(s) -Background
47     have been estimated at a boundary point, or have been
48 specified by the user,
49     and do not appear in the correlation matrix )
50
51     Beta(1)      Beta(2)
52
53     Beta(1)      1      -0.97
54
55     Beta(2)     -0.97      1
56
57
58
59     Parameter Estimates
60

```

Variable	Estimate	Std. Err.
Background	0	NA
Beta(1)	0.24518	0.781411
Beta(2)	0.217701	0.830304

NA - Indicates that this parameter has hit a bound implied by some inequality constraint and thus has no standard error.

Analysis of Deviance Table

Model	Log(likelihood)	Deviance	Test DF	P-value
Full model	-37.8686			
Fitted model	-37.8743	0.0112712	2	0.9944
Reduced model	-51.7666	27.796	3	<.0001
AIC:	79.7485			

Goodness of Fit

Dose	Est._Prob.	Expected	Observed	Size	Chi^2 Res.
i: 1	0.0000	0.000	0	35	0.000
i: 2	0.1000	0.922	1	35	0.087
i: 3	0.3000	3.113	3	35	-0.040
i: 4	1.0000	12.969	13	35	0.004
Chi-square =	0.01	DF = 2	P-value =	0.9943	

Benchmark Dose Computation

Specified effect =	0.1
Risk Type =	Extra risk
Confidence level =	0.95
BMD =	0.33191
BMDL =	0.184961

```

1 DEUTSCH-WENZEL1983BghiP.OUT.txt
2 =====
3     Multistage Model. $Revision: 2.1 $ $Date: 2000/08/21 03:38:21 $
4     Input Data File: C:\PAH\BMD ANALYSIS\BIOASSAY\OTHER ROUTE\DEUTSCH-
5 WENZEL1983.(d)
6     Gnuplot Plotting File: C:\PAH\BMD ANALYSIS\BIOASSAY\OTHER
7 ROUTE\DEUTSCH-WENZEL1983.plt
8
9     Fri May 27 10:49:54 2005
10 =====
11 BMDS MODEL RUN
12 ~~~~~
13
14     The form of the probability function is:
15
16     P[response] = background + (1-background)*[1-EXP(
17 -beta1*dose^1-beta2*dose^2)]
18
19     The parameter betas are restricted to be positive
20
21
22     Dependent variable = incidenceBghiP
23     Independent variable = doseBghiP
24
25     Total number of observations = 4
26     Total number of records with missing values = 0
27     Total number of parameters in model = 3
28     Total number of specified parameters = 0
29     Degree of polynomial = 2
30
31
32     Maximum number of iterations = 250
33     Relative Function Convergence has been set to: 1e-008
34     Parameter Convergence has been set to: 1e-008
35
36
37
38     Default Initial Parameter Values
39     Background = 0
40     Beta(1) = 0.0304801
41     Beta(2) = 0
42
43
44     Asymptotic Correlation Matrix of Parameter Estimates
45
46     ( *** The model parameter(s) -Background
47     have been estimated at a boundary point, or have been
48 specified by the user,
49     and do not appear in the correlation matrix )
50
51     Beta(1)      Beta(2)
52
53     Beta(1)      1      -0.98
54
55     Beta(2)     -0.98      1
56
57
58
59     Parameter Estimates
60

```

Variable	Estimate	Std. Err.
Background	0	NA
Beta(1)	0.0277423	0.232348
Beta(2)	0.000645059	0.0574865

NA - Indicates that this parameter has hit a bound implied by some inequality constraint and thus has no standard error.

Analysis of Deviance Table

Model	Log(likelihood)	Deviance	Test DF	P-value
Full model	-16.8561			
Fitted model	-17.033	0.353756	2	0.8379
Reduced model	-21.5342	9.35614	3	0.02491
AIC:	38.0659			

Goodness of Fit

Dose	Est._Prob.	Expected	Observed	Size	Chi^2 Res.
i: 1	0.0000	0.000	0	35	0.000
i: 2	0.1600	0.156	0	35	-1.004
i: 3	0.8300	0.812	1	35	0.237
i: 4	4.1500	4.032	4	34	-0.009
Chi-square =	0.20	DF = 2		P-value =	0.9043

Benchmark Dose Computation

Specified effect =	0.1
Risk Type =	Extra risk
Confidence level =	0.95
BMD =	3.51117
BMDL =	1.82558

```

1 DEUTSCH-WENZEL1983BjF.OUT.txt
2 =====
3     Multistage Model. $Revision: 2.1 $ $Date: 2000/08/21 03:38:21 $
4     Input Data File: C:\PAH\BMD ANALYSIS\BIOASSAY\OTHER ROUTE\DEUTSCH-
5 WENZEL1983.(d)
6     Gnuplot Plotting File: C:\PAH\BMD ANALYSIS\BIOASSAY\OTHER
7 ROUTE\DEUTSCH-WENZEL1983.plt
8
9     Fri May 27 10:47:32 2005
10 =====
11 BMDS MODEL RUN
12 ~~~~~
13
14     The form of the probability function is:
15
16     P[response] = background + (1-background)*[1-EXP(
17 -beta1*dose^1-beta2*dose^2)]
18
19     The parameter betas are restricted to be positive
20
21
22     Dependent variable = incidenceBjF
23     Independent variable = doseBjF
24
25     Total number of observations = 4
26     Total number of records with missing values = 0
27     Total number of parameters in model = 3
28     Total number of specified parameters = 0
29     Degree of polynomial = 2
30
31
32     Maximum number of iterations = 250
33     Relative Function Convergence has been set to: 1e-008
34     Parameter Convergence has been set to: 1e-008
35
36
37
38     Default Initial Parameter Values
39     Background = 0.00616121
40     Beta(1) = 0.0709095
41     Beta(2) = 0.0144537
42
43
44     Asymptotic Correlation Matrix of Parameter Estimates
45
46     ( *** The model parameter(s) -Background
47     have been estimated at a boundary point, or have been
48 specified by the user,
49     and do not appear in the correlation matrix )
50
51     Beta(1)      Beta(2)
52
53     Beta(1)      1      -0.98
54
55     Beta(2)     -0.98      1
56
57
58
59     Parameter Estimates
60

```

Variable	Estimate	Std. Err.
Background	0	NA
Beta(1)	0.0929144	0.226076
Beta(2)	0.0101278	0.0466964

NA - Indicates that this parameter has hit a bound implied by some inequality constraint and thus has no standard error.

Analysis of Deviance Table

Model	Log(likelihood)	Deviance	Test DF	P-value
Full model	-39.0246			
Fitted model	-39.1336	0.218103	2	0.8967
Reduced model	-60.8862	43.7233	3	<.0001
AIC:	82.2673			

Goodness of Fit

Dose	Est._Prob.	Expected	Observed	Size	Chi^2 Res.
i: 1	0.0000	0.000	0	35	0.000
i: 2	0.2000	0.658	1	35	0.529
i: 3	1.0000	3.427	3	35	-0.138
i: 4	5.0000	17.926	18	35	0.009
Chi-square =	0.24	DF = 2	P-value =	0.8868	

Benchmark Dose Computation

Specified effect =	0.1
Risk Type =	Extra risk
Confidence level =	0.95
BMD =	1.02045
BMDL =	0.580958


```

1 DEUTSCH-WENZEL1983BkF.OUT.txt
2 =====
3 Multistage Model. $Revision: 2.1 $ $Date: 2000/08/21 03:38:21 $
4 Input Data File: C:\PAH\BMD ANALYSIS\BIOASSAY\OTHER ROUTE\DEUTSCH-
5 WENZEL1983.(d)
6 Gnuplot Plotting File: C:\PAH\BMD ANALYSIS\BIOASSAY\OTHER
7 ROUTE\DEUTSCH-WENZEL1983.plt
8
9
10
11
12
13
14 The form of the probability function is:
15
16 
$$P[\text{response}] = \text{background} + (1 - \text{background}) * [1 - \text{EXP}(-\text{beta1} * \text{dose}^1 - \text{beta2} * \text{dose}^2)]$$

17
18
19 The parameter betas are restricted to be positive
20
21
22 Dependent variable = incidenceBkF
23 Independent variable = doseBkF
24
25 Total number of observations = 4
26 Total number of records with missing values = 0
27 Total number of parameters in model = 3
28 Total number of specified parameters = 0
29 Degree of polynomial = 2
30
31
32 Maximum number of iterations = 250
33 Relative Function Convergence has been set to: 1e-008
34 Parameter Convergence has been set to: 1e-008
35
36
37
38
39
40
41
42
43
44
45
46
47
48
49
50
51
52
53
54
55
56
57
58
59
60

```

```

Default Initial Parameter Values
Background = 0
Beta(1) = 0.126747
Beta(2) = 0.00410997

```

```

Asymptotic Correlation Matrix of Parameter Estimates
( *** The model parameter(s) -Background
have been estimated at a boundary point, or have been
specified by the user,
and do not appear in the correlation matrix )

```

	Beta(1)	Beta(2)
Beta(1)	1	-0.97
Beta(2)	-0.97	1

Parameter Estimates

Variable	Estimate	Std. Err.
Background	0	NA
Beta(1)	0.0842968	0.251118
Beta(2)	0.0142917	0.0632842

NA - Indicates that this parameter has hit a bound implied by some inequality constraint and thus has no standard error.

Analysis of Deviance Table

Model	Log(likelihood)	Deviance	Test DF	P-value
Full model	-28.404			
Fitted model	-28.9719	1.1357	2	0.5667
Reduced model	-46.2443	35.6806	3	<.0001
AIC:	61.9437			

Goodness of Fit

Dose	Est._Prob.	Expected	Observed	Size	Chi^2 Res.
i: 1	0.0000	0.000	0	35	0.000
i: 2	0.1600	0.482	0	35	-1.014
i: 3	0.8300	2.378	3	31	0.283
i: 4	4.1500	12.122	12	27	-0.018
Chi-square =	0.67	DF = 2		P-value =	0.7165

Benchmark Dose Computation

Specified effect =	0.1
Risk Type =	Extra risk
Confidence level =	0.95
BMD =	1.05954
BMDL =	0.557079

```

1  DEUTSCH-WENZEL1983IP.OUT.txt
2  =====
3      Multistage Model. $Revision: 2.1 $ $Date: 2000/08/21 03:38:21 $
4      Input Data File: C:\PAH\BMD ANALYSIS\BIOASSAY\OTHER ROUTE\DEUTSCH-
5  WENZEL1983.(d)
6      Gnuplot Plotting File: C:\PAH\BMD ANALYSIS\BIOASSAY\OTHER
7  ROUTE\DEUTSCH-WENZEL1983.plt
8
9      Fri May 27 10:49:04 2005
10  =====
11  BMDS MODEL RUN
12  ~~~~~
13
14  The form of the probability function is:
15
16  P[response] = background + (1-background)*[1-EXP(
17  -beta1*dose^1-beta2*dose^2)]
18
19  The parameter betas are restricted to be positive
20
21
22  Dependent variable = incidenceIP
23  Independent variable = doseIP
24
25  Total number of observations = 4
26  Total number of records with missing values = 0
27  Total number of parameters in model = 3
28  Total number of specified parameters = 0
29  Degree of polynomial = 2
30
31
32  Maximum number of iterations = 250
33  Relative Function Convergence has been set to: 1e-008
34  Parameter Convergence has been set to: 1e-008
35
36
37
38  Default Initial Parameter Values
39  Background = 0.0539703
40  Beta(1) = 0.20919
41  Beta(2) = 0
42
43
44  Asymptotic Correlation Matrix of Parameter Estimates
45
46  ( *** The model parameter(s) -Beta(2)
47  have been estimated at a boundary point, or have been
48  specified by the user,
49  and do not appear in the correlation matrix )
50
51  Background      Beta(1)
52
53  Background      1      -0.55
54
55  Beta(1)      -0.55      1
56
57
58
59  Parameter Estimates
60

```

Variable	Estimate	Std. Err.
Background	0.0224449	0.113638
Beta(1)	0.241452	0.0797033
Beta(2)	0	NA

NA - Indicates that this parameter has hit a bound implied by some inequality constraint and thus has no standard error.

Analysis of Deviance Table

Model	Log(likelihood)	Deviance	Test DF	P-value
Full model	-54.8079			
Fitted model	-56.5662	3.5166	2	0.1723
Reduced model	-76.4525	43.2893	3	<.0001
AIC:	117.132			

Goodness of Fit

Dose	Est._Prob.	Expected	Observed	Size	Chi^2 Res.	
i: 1	0.0000	0.0224	0.786	0	35	-1.023
i: 2	0.1600	0.0595	2.082	4	35	0.979
i: 3	0.8300	0.2000	6.999	8	35	0.179
i: 4	4.1500	0.6411	22.439	21	35	-0.179
Chi-square =	3.12	DF = 2		P-value =	0.2104	

Benchmark Dose Computation

Specified effect =	0.1
Risk Type =	Extra risk
Confidence level =	0.95
BMD =	0.436361
BMDL =	0.309504

```

1 WENZEL-HARTUNG1990BaP.OUT.txt
2 =====
3 Multistage Model. $Revision: 2.1 $ $Date: 2000/08/21 03:38:21 $
4 Input Data File: C:\PAH\BMD ANALYSIS\BIOASSAY\OTHER ROUTE\WENZEL-
5 HARTUNG1990.(d)
6 Gnuplot Plotting File: C:\PAH\BMD ANALYSIS\BIOASSAY\OTHER
7 ROUTE\WENZEL-HARTUNG1990.plt
8
9 Fri May 27 10:58:05 2005
10 =====
11 BMDS MODEL RUN
12 ~~~~~
13
14 The form of the probability function is:
15
16 
$$P[\text{response}] = \text{background} + (1 - \text{background}) * [1 - \text{EXP}(-\text{beta1} * \text{dose}^1 - \text{beta2} * \text{dose}^2)]$$

17
18 The parameter betas are restricted to be positive
19
20
21
22 Dependent variable = responseBaP
23 Independent variable = doseBaP
24
25 Total number of observations = 4
26 Total number of records with missing values = 0
27 Total number of parameters in model = 3
28 Total number of specified parameters = 0
29 Degree of polynomial = 2
30
31
32 Maximum number of iterations = 250
33 Relative Function Convergence has been set to: 1e-008
34 Parameter Convergence has been set to: 1e-008
35
36
37
38 Default Initial Parameter Values
39 Background = 0
40 Beta(1) = 3.21631
41 Beta(2) = 5.7325
42
43
44 Asymptotic Correlation Matrix of Parameter Estimates
45
46 ( *** The model parameter(s) -Background
47 have been estimated at a boundary point, or have been
48 specified by the user,
49 and do not appear in the correlation matrix )
50
51 Beta(1) Beta(2)
52
53 Beta(1) 1 -0.93
54
55 Beta(2) -0.93 1
56
57
58
59 Parameter Estimates
60

```

Variable	Estimate	Std. Err.
Background	0	NA
Beta(1)	3.01149	2.79594
Beta(2)	6.44644	10.7674

NA - Indicates that this parameter has hit a bound implied by some inequality constraint and thus has no standard error.

Analysis of Deviance Table

Model	Log(likelihood)	Deviance	Test DF	P-value
Full model	-50.8389			
Fitted model	-50.8521	0.0264626	2	0.9869
Reduced model	-84.6566	67.6355	3	<.0001
AIC:	105.704			

Goodness of Fit

Dose	Est._Prob.	Expected	Observed	Size	Chi^2 Res.
i: 1	0.0000	0.000	0	35	0.000
i: 2	0.0300	3.208	3	35	-0.072
i: 3	0.1000	10.718	11	35	0.038
i: 4	0.3000	27.062	27	35	-0.010
Chi-square =	0.03	DF = 2		P-value =	0.9870

Benchmark Dose Computation

Specified effect =	0.1
Risk Type =	Extra risk
Confidence level =	0.95
BMD =	0.0326976
BMDL =	0.0198862

```

1  WENZEL-HARTUNG1990BaPforDBahA.OUT.txt
2  =====
3      Multistage Model. $Revision: 2.1 $ $Date: 2000/08/21 03:38:21 $
4      Input Data File: C:\PAH\BMD ANALYSIS\BIOASSAY\OTHER
5  ROUTE\SETS\WENZEL-HARTUNG1990.(d)
6      Gnuplot Plotting File: C:\PAH\BMD ANALYSIS\BIOASSAY\OTHER
7  ROUTE\SETS\WENZEL-HARTUNG1990.plt
8
9      Thu Jun 02 09:02:58 2005
10  =====
11  BMDS MODEL RUN
12  ~~~~~
13
14  The form of the probability function is:
15
16  P[response] = background + (1-background)*[1-EXP(
17  -beta1*dose^1-beta2*dose^2)]
18
19  The parameter betas are restricted to be positive
20
21
22  Dependent variable = responseBaP
23  Independent variable = doseBaP
24
25  Total number of observations = 4
26  Total number of records with missing values = 0
27  Total number of parameters in model = 3
28  Total number of specified parameters = 0
29  Degree of polynomial = 2
30
31
32  Maximum number of iterations = 250
33  Relative Function Convergence has been set to: 1e-008
34  Parameter Convergence has been set to: 1e-008
35
36
37
38  Default Initial Parameter Values
39  Background = 0
40  Beta(1) = 3.21631
41  Beta(2) = 5.7325
42
43
44  Asymptotic Correlation Matrix of Parameter Estimates
45
46  ( *** The model parameter(s) -Background
47  have been estimated at a boundary point, or have been
48  specified by the user,
49  and do not appear in the correlation matrix )
50
51  Beta(1)      Beta(2)
52
53  Beta(1)      1      -0.93
54
55  Beta(2)     -0.93      1
56
57
58
59  Parameter Estimates
60

```

Variable	Estimate	Std. Err.
Background	0	NA
Beta(1)	3.01149	2.79594
Beta(2)	6.44644	10.7674

NA - Indicates that this parameter has hit a bound implied by some inequality constraint and thus has no standard error.

Analysis of Deviance Table

Model	Log(likelihood)	Deviance	Test DF	P-value
Full model	-50.8389			
Fitted model	-50.8521	0.0264626	2	0.9869
Reduced model	-84.6566	67.6355	3	<.0001
AIC:	105.704			

Goodness of Fit

Dose	Est._Prob.	Expected	Observed	Size	Chi^2 Res.
i: 1	0.0000	0.0000	0	35	0.000
i: 2	0.0300	0.0917	3	35	-0.072
i: 3	0.1000	0.3062	11	35	0.038
i: 4	0.3000	0.7732	27	35	-0.010
Chi-square =	0.03	DF = 2		P-value =	0.9870

Benchmark Dose Computation

Specified effect =	0.57
Risk Type =	Extra risk
Confidence level =	0.95
BMD =	0.197095
BMDL =	0.157781


```

1 WENZEL-HARTUNG1990CH.OUT.txt
2 =====
3           Multistage Model. $Revision: 2.1 $ $Date: 2000/08/21 03:38:21 $
4           Input Data File: C:\PAH\BMD ANALYSIS\BIOASSAY\OTHER ROUTE\WENZEL-
5 HARTUNG1990.(d)
6           Gnuplot Plotting File: C:\PAH\BMD ANALYSIS\BIOASSAY\OTHER
7 ROUTE\WENZEL-HARTUNG1990.plt
8
9           Fri May 27 10:58:53 2005
10 =====

```

11 BMDS MODEL RUN

12 ~~~~~

13
14 The form of the probability function is:

15
16 $P[\text{response}] = \text{background} + (1-\text{background}) * [1 - \text{EXP}(-\text{beta}1 * \text{dose}^1)]$

17
18 The parameter betas are restricted to be positive

19
20
21
22 Dependent variable = responseCH

23 Independent variable = doseCH

24
25 Total number of observations = 3
26 Total number of records with missing values = 0
27 Total number of parameters in model = 2
28 Total number of specified parameters = 0
29 Degree of polynomial = 1

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31
32 Maximum number of iterations = 250
33 Relative Function Convergence has been set to: 1e-008
34 Parameter Convergence has been set to: 1e-008

35
36
37
38 Default Initial Parameter Values

39 Background = 0.0178361
40 Beta(1) = 0.109158

41
42
43 Asymptotic Correlation Matrix of Parameter Estimates

44
45 (*** The model parameter(s) -Background
46 have been estimated at a boundary point, or have been
47 specified by the user,
48 and do not appear in the correlation matrix)

49
50 Beta(1)
51
52 Beta(1) 1

53
54
55
56 Parameter Estimates

57 Variable	58 Estimate	59 Std. Err.
59 Background	0	NA
60 Beta(1)	0.123432	0.0647008

1
 2 NA - Indicates that this parameter has hit a bound
 3 implied by some inequality constraint and thus
 4 has no standard error.
 5
 6
 7

8 Analysis of Deviance Table

9

10 Model	Log(likelihood)	Deviance	Test DF	P-value
11 Full model	-35.2935			
12 Fitted model	-35.455	0.323044	2	0.8508
13 Reduced model	-43.0622	15.5374	2	0.0004228

14

15 AIC:	72.9101
---------	---------

16

17 Goodness of Fit

18

19 Dose	Est._Prob.	Expected	Observed	Size	Chi^2 Res.
20 -----					
21 i: 1					
22 0.0000	0.0000	0.000	0	35	0.000
23 i: 2					
24 1.0000	0.1161	4.064	5	35	0.261
25 i: 3					
26 3.0000	0.3095	10.831	10	35	-0.111
27					
28					
29 Chi-square =	0.34	DF = 2		P-value =	0.8453
30					
31					

32 Benchmark Dose Computation

33 Specified effect = 0.1
 34 Risk Type = Extra risk
 35 Confidence level = 0.95
 36 BMD = 0.853595
 37 BMDL = 0.57298
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1 **D.4. BACTERIAL MUTAGENICITY**

2 Hass 1981 bact mut bap.out.txt

```

3 =====
4     Polynomial Model. Revision: 2.2   Date: 9/12/2002
5     Input Data File: C:\BMDS\UNSAVED1.(d)
6     Gnuplot Plotting File: C:\BMDS\UNSAVED1.plt
7                                     Wed Jul 06 11:29:07 2005
8     =====

```

10 BMDS MODEL RUN

13 The form of the response function is:

14
15 $Y[\text{dose}] = \text{beta}_0 + \text{beta}_1 \cdot \text{dose} + \text{beta}_2 \cdot \text{dose}^2 + \dots$

17
18 Dependent variable = MEAN
19 Independent variable = COLUMN1
20 rho is set to 0
21 Signs of the polynomial coefficients are not restricted
22 A constant variance model is fit
23
24 Total number of dose groups = 4
25 Total number of records with missing values = 0
26 Maximum number of iterations = 250
27 Relative Function Convergence has been set to: 1e-008
28 Parameter Convergence has been set to: 1e-008

31
32 Default Initial Parameter Values
33 alpha = 194.5
34 rho = 0 Specified
35 beta_0 = 121.8
36 beta_1 = 297.029

40 Parameter Estimates

41
42 95.0% Wald

43 Confidence Interval	44 Variable	45 Estimate	46 Std. Err.	47 Lower Conf. Limit	48 Upper Conf. Limit
49 238.897	alpha	132.71	54.1784	26.5217	314.656
50 131.898	beta_0	121.8	5.15188	111.702	
51 314.656	beta_1	297.029	8.99387	279.401	

54 Asymptotic Correlation Matrix of Parameter Estimates

55

56	alpha	beta_0	beta_1
57 alpha	1	-1.4e-009	-1.1e-008
58 beta_0	-1.4e-009	1	-0.76
59 beta_1	-1.1e-008	-0.76	1

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Table of Data and Estimated Values of Interest

Dose Res.	N	Obs Mean	Obs Std Dev	Est Mean	Est Std Dev	Chi ²
0	3	124	8	122	11.5	0.331
0.25	3	194	16	196	11.5	-0.309
0.5	3	269	13	270	11.5	-0.198
1	3	420	17	419	11.5	0.176

Model Descriptions for likelihoods calculated

Model A1: $Y_{ij} = \mu(i) + e(ij)$
 $\text{Var}\{e(ij)\} = \sigma^2$

Model A2: $Y_{ij} = \mu(i) + e(ij)$
 $\text{Var}\{e(ij)\} = \sigma(i)^2$

Model R: $Y_i = \mu + e(i)$
 $\text{Var}\{e(i)\} = \sigma^2$

Likelihoods of Interest

Model	Log(likelihood)	DF	AIC
A1	-35.189802	5	80.379605
A2	-34.317788	8	84.635576
fitted	-35.328976	2	74.657952
R	-62.974684	2	129.949369

Test 1: Does response and/or variances differ among dose levels

(A2 vs. R)

Test 2: Are Variances Homogeneous (A1 vs A2)

Test 3: Does the Model for the Mean Fit (A1 vs. fitted)

Tests of Interest

Test	-2*log(Likelihood Ratio)	Test df	p-value
Test 1	57.3138	6	<.0001
Test 2	1.74403	3	0.6272
Test 3	0.278348	2	0.8701

The p-value for Test 1 is less than .05. There appears to be a difference between response and/or variances among the dose levels.

It seems appropriate to model the data

The p-value for Test 2 is greater than .05. A homogeneous variance model appears to be appropriate here

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The p-value for Test 3 is greater than .05. The model chosen appears to adequately describe the data

Benchmark Dose Computation

Specified effect = 1

Risk Type = Estimated standard deviations from the control mean

Confidence level = 0.95

BMD = 0.038784

BMDL = 0.0286028

```

1 HASS_1981_BACT_MUT_BEP.OUT.txt
2 =====
3 Polynomial Model. Revision: 2.2 Date: 9/12/2002
4 Input Data File: C:\DOCUMENTS AND SETTINGS\HCLYNCH\MY DOCUMENTS\PAH
5 RPS\MODELING\HASS_1981_BACT_MUT_BEP.(d)
6 Gnuplot Plotting File: C:\DOCUMENTS AND SETTINGS\HCLYNCH\MY
7 DOCUMENTS\PAH RPS\MODELING\HASS_1981_BACT_MUT_BEP.plt
8 Wed Jul 06 13:42:38 2005
9 =====

```

```

10
11 BMDS MODEL RUN
12 ~~~~~

```

```

13
14 The form of the response function is:
15
16  $Y[\text{dose}] = \text{beta}_0 + \text{beta}_1 \cdot \text{dose} + \text{beta}_2 \cdot \text{dose}^2 + \dots$ 
17
18
19 Dependent variable = MEAN
20 Independent variable = COLUMN1
21 rho is set to 0
22 Signs of the polynomial coefficients are not restricted
23 A constant variance model is fit
24
25 Total number of dose groups = 4
26 Total number of records with missing values = 0
27 Maximum number of iterations = 250
28 Relative Function Convergence has been set to: 1e-008
29 Parameter Convergence has been set to: 1e-008

```

```

30
31
32
33 Default Initial Parameter Values
34 alpha = 117.5
35 rho = 0 Specified
36 beta_0 = 120.75
37 beta_1 = 77.5

```

```

38
39
40
41 Parameter Estimates
42
43 95.0% Wald
44 Confidence Interval
45 Variable Estimate Std. Err. Lower Conf. Limit
46 Upper Conf. Limit
47 alpha 98.6458 40.272 19.7142
48 177.577
49 beta_0 120.75 4.19706 112.524
50 128.976
51 beta_1 77.5 7.66275 62.4813
52 92.5187

```

```

53
54
55 Asymptotic Correlation Matrix of Parameter Estimates
56
57 alpha beta_0 beta_1
58 alpha 1 -8e-012 1.1e-011
59 beta_0 -8e-012 1 -0.73
60 beta_1 1.1e-011 -0.73 1

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Table of Data and Estimated Values of Interest

Dose	N	Obs Mean	Obs Std Dev	Est Mean	Est Std Dev	Chi ²
0	3	124	8	121	9.93	0.567
0.2	3	129	6	136	9.93	-1.26
0.4	3	156	9	152	9.93	0.741
1	3	198	17	198	9.93	-0.0436

Model Descriptions for likelihoods calculated

- Model A1: $Y_{ij} = \mu(i) + e(ij)$
 $Var\{e(ij)\} = \sigma^2$
- Model A2: $Y_{ij} = \mu(i) + e(ij)$
 $Var\{e(ij)\} = \sigma(i)^2$
- Model R: $Y_i = \mu + e(i)$
 $Var\{e(i)\} = \sigma^2$

Likelihoods of Interest

Model	Log(likelihood)	DF	AIC
A1	-32.165839	5	74.331679
A2	-30.272126	8	76.544252
fitted	-33.549216	2	71.098432
R	-47.594288	2	99.188576

- Test 1: Does response and/or variances differ among dose levels (A2 vs. R)
- Test 2: Are Variances Homogeneous (A1 vs A2)
- Test 3: Does the Model for the Mean Fit (A1 vs. fitted)

Tests of Interest

Test	-2*log(Likelihood Ratio)	Test df	p-value
Test 1	34.6443	6	<.0001
Test 2	3.78743	3	0.2854
Test 3	2.76675	2	0.2507

The p-value for Test 1 is less than .05. There appears to be a difference between response and/or variances among the dose levels. It seems appropriate to model the data

The p-value for Test 2 is greater than .05. A homogeneous variance model appears to be appropriate here

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The p-value for Test 3 is greater than .05. The model chosen appears to adequately describe the data

Benchmark Dose Computation

Specified effect = 1

Risk Type = Estimated standard deviations from the control mean

Confidence level = 0.95

BMD = 0.128156

BMDL = 0.0923937


```

1  JOHNSEN_1997_BAC_MUT_BAP.OUT.txt
2  =====
3      Polynomial Model. Revision: 2.2  Date: 9/12/2002
4      Input Data File: C:\DOCUMENTS AND SETTINGS\HCLYNCH\MY DOCUMENTS\PAH
5  RPS\MODELING\JOHNSEN_1997_BAC_MUT_BAP.(d)
6      Gnuplot Plotting File:  C:\DOCUMENTS AND SETTINGS\HCLYNCH\MY
7  DOCUMENTS\PAH RPS\MODELING\JOHNSEN_1997_BAC_MUT_BAP.plt
8                                  Fri Jul 08 09:02:29 2005
9  =====

```

```

10
11  BMDS MODEL RUN
12  ~~~~~

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13
14  The form of the response function is:
15
16  Y[dose] = beta_0 + beta_1*dose + beta_2*dose^2 + ...
17
18
19  Dependent variable = MEAN
20  Independent variable = COLUMN1
21  rho is set to 0
22  Signs of the polynomial coefficients are not restricted
23  A constant variance model is fit
24
25  Total number of dose groups = 3
26  Total number of records with missing values = 0
27  Maximum number of iterations = 250
28  Relative Function Convergence has been set to: 1e-008
29  Parameter Convergence has been set to: 1e-008

```

```

30
31
32
33      Default Initial Parameter Values
34      alpha =          70.2768
35      rho =              0   Specified
36      beta_0 =          115.5
37      beta_1 =           0.65

```

```

38
39
40
41      Parameter Estimates
42
43
44      Confidence Interval
45      Variable          Estimate      Std. Err.      Lower Conf. Limit
46  Upper Conf. Limit
47      alpha             59.3512       27.9784        4.51449
48  114.188
49      beta_0            115.5         4.06035       107.542
50  123.458
51      beta_1             0.65         0.314513      0.0335651
52  1.26643

```

```

53
54
55      Asymptotic Correlation Matrix of Parameter Estimates
56
57      alpha          beta_0          beta_1
58  alpha             1          -7.9e-010    -3.4e-012
59  beta_0          -7.9e-010           1          -0.77
60  beta_1          -3.4e-012        -0.77           1

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Table of Data and Estimated Values of Interest

Dose Res.	N	Obs Mean	Obs Std Dev	Est Mean	Est Std Dev	Chi^2
0	3	113	9.68	115	7.7	-0.562
10	3	127	4.84	122	7.7	1.12
20	3	126	9.68	128	7.7	-0.562

Model Descriptions for likelihoods calculated

Model A1: $Y_{ij} = \mu(i) + e(ij)$
 $Var\{e(ij)\} = \sigma^2$

Model A2: $Y_{ij} = \mu(i) + e(ij)$
 $Var\{e(ij)\} = \sigma(i)^2$

Model R: $Y_i = \mu + e(i)$
 $Var\{e(i)\} = \sigma^2$

Likelihoods of Interest

Model	Log(likelihood)	DF	AIC
A1	-21.811395	4	51.622790
A2	-21.026523	6	54.053045
fitted	-22.875626	2	49.751251
R	-24.653317	2	53.306634

Test 1: Does response and/or variances differ among dose levels

(A2 vs. R)

Test 2: Are Variances Homogeneous (A1 vs A2)

Test 3: Does the Model for the Mean Fit (A1 vs. fitted)

Tests of Interest

Test	-2*log(Likelihood Ratio)	Test df	p-value
Test 1	7.25359	4	0.0266
Test 2	1.56974	2	0.4562
Test 3	2.12846	1	0.1446

The p-value for Test 1 is less than .05. There appears to be a difference between response and/or variances among the dose levels.

It seems appropriate to model the data

The p-value for Test 2 is greater than .05. A homogeneous variance model appears to be appropriate here

1
2 The p-value for Test 3 is greater than .05. The model
3 chosen appears
4 to adequately describe the data
5
6
7
8 Benchmark Dose Computation
9 Specified effect = 1
10
11 Risk Type = Estimated standard deviations from the control mean
12
13
14 Confidence level = 0.95
15
16 BMD = 11.8523
17
18
19 BMDL = 6.27094
20
21
22
23

1 **D.5. MAMMALIAN MUTAGENICITY**

2 BARF_MUT_BAA.OUT.txt

3 =====
4 Multistage Model. \$Revision: 2.1 \$ \$Date: 2000/08/21 03:38:21 \$
5 Input Data File: C:\DOCUMENTS AND SETTINGS\HCLYNCH\MY DOCUMENTS\PAH
6 RPS\MODELING\BARF_MUT_BAA.(d)
7 Gnuplot Plotting File: C:\DOCUMENTS AND SETTINGS\HCLYNCH\MY
8 DOCUMENTS\PAH RPS\MODELING\BARF_MUT_BAA.plt
9 Thu Jun 30 12:46:38 2005
10 =====

11
12 BMDS MODEL RUN
13 ~~~~~

14
15 The form of the probability function is:

16
17
$$P[\text{response}] = \text{background} + (1-\text{background}) * [1 - \text{EXP}(-\text{beta1} * \text{dose}^1 - \text{beta2} * \text{dose}^2 - \text{beta3} * \text{dose}^3)]$$

18

19
20 The parameter betas are restricted to be positive

21
22
23 Dependent variable = COLUMN2
24 Independent variable = COLUMN1

25
26 Total number of observations = 5
27 Total number of records with missing values = 0
28 Total number of parameters in model = 4
29 Total number of specified parameters = 0
30 Degree of polynomial = 3

31
32
33 Maximum number of iterations = 250
34 Relative Function Convergence has been set to: 1e-008
35 Parameter Convergence has been set to: 1e-008

36
37
38
39 Default Initial Parameter Values

40 Background = 3.89426e-006
41 Beta(1) = 3.46216e-007
42 Beta(2) = 0
43 Beta(3) = 1.93939e-012

44 **** WARNING: Completion code = -2. Optimum not found. Trying new starting
45 pont****

46
47
48
49 Asymptotic Correlation Matrix of Parameter Estimates

50
51 (*** The model parameter(s) -Background -Beta(2) -Beta(3)
52 have been estimated at a boundary point, or have been
53 specified by the user,
54 and do not appear in the correlation matrix)

55
56 Beta(1)
57
58 Beta(1) 1
59

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Parameter Estimates

Variable	Estimate	Std. Err.
Background	0	NA
Beta(1)	4.34385e-007	5.43792e-006
Beta(2)	0	NA
Beta(3)	0	NA

NA - Indicates that this parameter has hit a bound implied by some inequality constraint and thus has no standard error.

Analysis of Deviance Table

Model	Log(likelihood)	Deviance	Test DF	P-value
Full model	-1545.82			
Fitted model	-1548.6	5.57201	4	0.2335
Reduced model	-1597.17	102.713	4	<.0001

AIC: 3099.21

Goodness of Fit

Dose	Est._Prob.	Expected	Observed	Size	Chi^2 Res.
i: 1	0.0000	0.000	0	1000000	0.000
i: 2	20.0000	8.688	12	1000000	0.381
i: 3	50.0000	21.719	29	1000000	0.335
i: 4	100.0000	43.438	34	1000000	-0.217
i: 5	150.0000	65.156	64	1000000	-0.018

Chi-square = 5.77 DF = 4 P-value = 0.2166

Benchmark Dose Computation

Specified effect = 1e-005
Risk Type = Extra risk
Confidence level = 0.95
BMD = 23.0212

**** WARNING: Completion code = -2. Optimum not found. Trying new starting point****

**** WARNING 0: Completion code = -2 trying new start****

**** WARNING 1: Completion code = -2 trying new start****

1
2 **** WARNING 2: Completion code = -2 trying new start****
3
4 **** WARNING 3: Completion code = -2 trying new start****
5
6 **** WARNING 4: Completion code = -2 trying new start****
7
8 **** WARNING 5: Completion code = -2 trying new start****
9
10 **** WARNING 6: Completion code = -2 trying new start****
11
12 **** WARNING 7: Completion code = -2 trying new start****
13
14 **** WARNING 8: Completion code = -2 trying new start****
15
16 **** WARNING 9: Completion code = -2 trying new start****
17
18 **** WARNING: Completion code = -2. Optimum not found. Trying new starting
19 point****
20
21 **** WARNING 0: Completion code = -2 trying new start****
22
23 **** WARNING 1: Completion code = -3 trying new start****
24
25 **** WARNING 2: Completion code = -3 trying new start****
26
27 **** WARNING 3: Completion code = -3 trying new start****
28
29 **** WARNING 4: Completion code = -3 trying new start****
30
31 **** WARNING 5: Completion code = -3 trying new start****
32
33 **** WARNING 6: Completion code = -2 trying new start****
34
35 **** WARNING 7: Completion code = -3 trying new start****
36
37 **** WARNING 8: Completion code = -3 trying new start****
38
39 **** WARNING 9: Completion code = -3 trying new start****
40
41
42 Warning: completion code still negative
43 BMDL did not converge for BMR = 0.000010
44
45 Program execution is stopped
46

```

1  BARF_MUT_BAP.OUT.txt
2  =====
3      Multistage Model. $Revision: 2.1 $ $Date: 2000/08/21 03:38:21 $
4      Input Data File: C:\DOCUMENTS AND SETTINGS\HCLYNCH\MY DOCUMENTS\PAH
5  RPS\MODELING\BARF_MUT_BAP.(d)
6      Gnuplot Plotting File: C:\DOCUMENTS AND SETTINGS\HCLYNCH\MY
7  DOCUMENTS\PAH RPS\MODELING\BARF_MUT_BAP.plt
8                                  Thu Jun 30 12:40:17 2005
9  =====
10
11  BMDS MODEL RUN
12  ~~~~~
13
14  The form of the probability function is:
15
16  P[response] = background + (1-background)*[1-EXP(
17  -beta1*dose^1-beta2*dose^2)]
18
19  The parameter betas are restricted to be positive
20
21
22  Dependent variable = COLUMN2
23  Independent variable = COLUMN1
24
25  Total number of observations = 4
26  Total number of records with missing values = 0
27  Total number of parameters in model = 3
28  Total number of specified parameters = 0
29  Degree of polynomial = 2
30
31
32  Maximum number of iterations = 250
33  Relative Function Convergence has been set to: 1e-008
34  Parameter Convergence has been set to: 1e-008
35
36
37
38          Default Initial Parameter Values
39          Background = 1.39884e-006
40          Beta(1) = 5.34042e-006
41          Beta(2) = 0
42
43
44          Asymptotic Correlation Matrix of Parameter Estimates
45
46          ( *** The model parameter(s) -Background -Beta(2)
47          have been estimated at a boundary point, or have been
48  specified by the user,
49          and do not appear in the correlation matrix )
50
51          Beta(1)
52
53  Beta(1)          1
54
55
56
57          Parameter Estimates
58
59          Variable          Estimate          Std. Err.
60  Background          0          NA

```

1 Beta(1) 5.43367e-006 2.68102e-005
 2 Beta(2) 0 NA
 3
 4 NA - Indicates that this parameter has hit a bound
 5 implied by some inequality constraint and thus
 6 has no standard error.
 7
 8
 9

10 Analysis of Deviance Table

Model	Log(likelihood)	Deviance	Test DF	P-value
Full model	-3273.08			
Fitted model	-3273.96	1.75092	3	0.6257
Reduced model	-3395.25	244.327	3	<.0001
AIC:	6549.92			

19 Goodness of Fit

Dose	Est._Prob.	Expected	Observed	Size	Chi^2 Res.
i: 1	0.0000	0.000	0	1000000	0.000
i: 2	10.0000	54.335	51	1000000	-0.061
i: 3	20.0000	108.668	120	1000000	0.104
i: 4	30.0000	162.997	155	1000000	-0.049
Chi-square =	1.78	DF = 3		P-value = 0.6195	

36 Benchmark Dose Computation

37 Specified effect = 1e-005
 38 Risk Type = Extra risk
 39 Confidence level = 0.95
 40 BMD = 1.84039

46 **** WARNING: Completion code = -3. Optimum not found. Trying new starting
 47 point****
 48
 49 **** WARNING 0: Completion code = -3 trying new start****
 50
 51 **** WARNING 1: Completion code = -3 trying new start****
 52
 53 **** WARNING 2: Completion code = -3 trying new start****
 54
 55 **** WARNING 3: Completion code = -3 trying new start****
 56
 57 **** WARNING 4: Completion code = -3 trying new start****
 58
 59 **** WARNING 5: Completion code = -3 trying new start****
 60


```
1 **** WARNING 6: Completion code = -3 trying new start****
2
3 **** WARNING 7: Completion code = -3 trying new start****
4
5 **** WARNING 8: Completion code = -3 trying new start****
6
7 **** WARNING 9: Completion code = -3 trying new start****
8
9 **** WARNING: Completion code = -3. Optimum not found. Trying new starting
10 point****
11
12 **** WARNING 0: Completion code = -1 trying new start****
13
14 **** WARNING 1: Completion code = -1 trying new start****
15
16 **** WARNING 2: Completion code = -1 trying new start****
17
18             BMDL =             1.68248
19
```

```

1  BARF_MUT_CH.OUT.txt
2  =====
3      Multistage Model. $Revision: 2.1 $ $Date: 2000/08/21 03:38:21 $
4      Input Data File: C:\DOCUMENTS AND SETTINGS\HCLYNCH\MY DOCUMENTS\PAH
5  RPS\MODELING\BARF_MUT_CH.(d)
6      Gnuplot Plotting File: C:\DOCUMENTS AND SETTINGS\HCLYNCH\MY
7  DOCUMENTS\PAH RPS\MODELING\BARF_MUT_CH.plt
8
9  =====
10
11  BMDS MODEL RUN
12  ~~~~~
13
14  The form of the probability function is:
15
16  P[response] = background + (1-background)*[1-EXP(
17  -beta1*dose^1)]
18
19  The parameter betas are restricted to be positive
20
21
22  Dependent variable = COLUMN2
23  Independent variable = COLUMN1
24
25  Total number of observations = 3
26  Total number of records with missing values = 0
27  Total number of parameters in model = 2
28  Total number of specified parameters = 0
29  Degree of polynomial = 1
30
31
32  Maximum number of iterations = 250
33  Relative Function Convergence has been set to: 1e-008
34  Parameter Convergence has been set to: 1e-008
35
36
37
38          Default Initial Parameter Values
39          Background = 2.60526e-006
40          Beta(1) = 5.02638e-007
41
42
43          Asymptotic Correlation Matrix of Parameter Estimates
44
45          ( *** The model parameter(s) -Background
46            have been estimated at a boundary point, or have been
47  specified by the user,
48            and do not appear in the correlation matrix )
49
50          Beta(1)
51
52  Beta(1)          1
53
54
55
56          Parameter Estimates
57
58          Variable          Estimate          Std. Err.
59  Background          0          NA
60  Beta(1)          6.14293e-007          1.93539e-005

```

1
 2 NA - Indicates that this parameter has hit a bound
 3 implied by some inequality constraint and thus
 4 has no standard error.
 5
 6
 7

8 Analysis of Deviance Table

9

10 Model	Log(likelihood)	Deviance	Test DF	P-value
11 Full model	-504.191			
12 Fitted model	-505.38	2.37752	2	0.3046
13 Reduced model	-522.575	36.7681	2	<.0001

14
 15 AIC: 1012.76
 16
 17

18 Goodness of Fit

19

20 Dose	Est._Prob.	Expected	Observed	Size	Chi^2 Res.
21 -----					
22 i: 1					
23 0.0000	0.0000	0.000	0	1000000	0.000
24 i: 2					
25 20.0000	0.0000	12.286	17	1000000	0.384
26 i: 3					
27 50.0000	0.0000	30.714	26	1000000	-0.153
28					
29 Chi-square =	2.53	DF = 2		P-value = 0.2819	

30
 31

32 Benchmark Dose Computation

33
 34 Specified effect = 1e-005
 35
 36 Risk Type = Extra risk
 37
 38 Confidence level = 0.95
 39
 40 BMD = 16.279
 41

42 **** WARNING: Completion code = -1. Optimum not found. Trying new starting
 43 point****

44
 45 **** WARNING 0: Completion code = -1 trying new start****

46
 47 **** WARNING 1: Completion code = -1 trying new start****

48
 49 **** WARNING 2: Completion code = -1 trying new start****

50
 51 **** WARNING 3: Completion code = -1 trying new start****

52
 53 **** WARNING 4: Completion code = -1 trying new start****

54
 55 **** WARNING 5: Completion code = -1 trying new start****

56
 57 **** WARNING 6: Completion code = -1 trying new start****

58
 59 **** WARNING 7: Completion code = -1 trying new start****
 60

```
1 **** WARNING 8: Completion code = -1 trying new start****
2
3 **** WARNING 9: Completion code = -1 trying new start****
4
5 **** WARNING: Completion code = -1. Optimum not found. Trying new starting
6 point****
7
8 **** WARNING 0: Completion code = -3 trying new start****
9
10 **** WARNING 1: Completion code = -3 trying new start****
11
12 **** WARNING 2: Completion code = -3 trying new start****
13
14 **** WARNING 3: Completion code = -3 trying new start****
15
16 **** WARNING 4: Completion code = -3 trying new start****
17
18 **** WARNING 5: Completion code = -3 trying new start****
19
20 **** WARNING 6: Completion code = -3 trying new start****
21
22 **** WARNING 7: Completion code = -3 trying new start****
23
24 **** WARNING 8: Completion code = -3 trying new start****
25
26 **** WARNING 9: Completion code = -3 trying new start****
27
28
29 Warning: completion code still negative
30 BMDL did not converge for BMR = 0.000010
31
32 Program execution is stopped
33
```

```

1  BARF_MUT_FA.OUT.txt
2  =====
3      Multistage Model. $Revision: 2.1 $ $Date: 2000/08/21 03:38:21 $
4      Input Data File: C:\DOCUMENTS AND SETTINGS\HCLYNCH\MY DOCUMENTS\PAH
5  RPS\MODELING\BARF_MUT_FA.(d)
6      Gnuplot Plotting File: C:\DOCUMENTS AND SETTINGS\HCLYNCH\MY
7  DOCUMENTS\PAH RPS\MODELING\BARF_MUT_FA.plt
8
9  =====
10
11  BMDS MODEL RUN
12  ~~~~~
13
14  The form of the probability function is:
15
16  P[response] = background + (1-background)*[1-EXP(
17  -beta1*dose^1)]
18
19  The parameter betas are restricted to be positive
20
21
22  Dependent variable = COLUMN2
23  Independent variable = COLUMN1
24
25  Total number of observations = 3
26  Total number of records with missing values = 0
27  Total number of parameters in model = 2
28  Total number of specified parameters = 0
29  Degree of polynomial = 1
30
31
32  Maximum number of iterations = 250
33  Relative Function Convergence has been set to: 1e-008
34  Parameter Convergence has been set to: 1e-008
35
36
37
38          Default Initial Parameter Values
39          Background = 6.6658e-007
40          Beta(1) = 2.50006e-006
41
42
43          Asymptotic Correlation Matrix of Parameter Estimates
44
45          ( *** The model parameter(s) -Background
46            have been estimated at a boundary point, or have been
47  specified by the user,
48            and do not appear in the correlation matrix )
49
50          Beta(1)
51
52  Beta(1)          1
53
54
55
56          Parameter Estimates
57
58          Variable          Estimate          Std. Err.
59  Background          0          NA
60  Beta(1)          2.56672e-006          4.49565e-005

```

1
 2 NA - Indicates that this parameter has hit a bound
 3 implied by some inequality constraint and thus
 4 has no standard error.

5
 6
 7
 8 Analysis of Deviance Table

9

Model	Log(likelihood)	Deviance	Test DF	P-value
Full model	-856.204			
Fitted model	-856.255	0.103	2	0.9498
Reduced model	-890.913	69.419	2	<.0001

15 AIC: 1714.51

16
 17
 18 Goodness of Fit

19

Dose	Est._Prob.	Expected	Observed	Size	Chi^2 Res.

i: 1	0.0000	0.0000	0	1000000	0.000
i: 2	10.0000	0.0000	25.667	1000000	0.052
i: 3	20.0000	0.0001	51.333	1000000	-0.026

29 Chi-square = 0.10 DF = 2 P-value = 0.9494

30
 31
 32 Benchmark Dose Computation

33 Specified effect = 1e-005
 34
 35 Risk Type = Extra risk
 36
 37 Confidence level = 0.95
 38
 39 BMD = 3.89604
 40

41
 42 **** WARNING: Completion code = -1. Optimum not found. Trying new starting
 43 point****

44
 45 **** WARNING 0: Completion code = -1 trying new start****

46
 47 **** WARNING 1: Completion code = -5 trying new start****

48
 49 BMDL = 0
 50
 51

```

1  BARF_MUT_TPHEN.OUT.txt
2  =====
3      Multistage Model. $Revision: 2.1 $ $Date: 2000/08/21 03:38:21 $
4      Input Data File: C:\DOCUMENTS AND SETTINGS\HCLYNCH\MY DOCUMENTS\PAH
5  RPS\MODELING\BARF_MUT_TPHEN.(d)
6      Gnuplot Plotting File: C:\DOCUMENTS AND SETTINGS\HCLYNCH\MY
7  DOCUMENTS\PAH RPS\MODELING\BARF_MUT_TPHEN.plt
8                                  Thu Jun 30 12:52:56 2005
9  =====
10
11  BMDS MODEL RUN
12  ~~~~~
13
14  The form of the probability function is:
15
16  P[response] = background + (1-background)*[1-EXP(
17  -beta1*dose^1-beta2*dose^2)]
18
19  The parameter betas are restricted to be positive
20
21
22  Dependent variable = COLUMN2
23  Independent variable = COLUMN1
24
25  Total number of observations = 4
26  Total number of records with missing values = 0
27  Total number of parameters in model = 3
28  Total number of specified parameters = 0
29  Degree of polynomial = 2
30
31
32  Maximum number of iterations = 250
33  Relative Function Convergence has been set to: 1e-008
34  Parameter Convergence has been set to: 1e-008
35
36
37
38          Default Initial Parameter Values
39          Background = 9.99937e-007
40          Beta(1) = 1.74289e-007
41          Beta(2) = 0
42
43
44          Asymptotic Correlation Matrix of Parameter Estimates
45
46          ( *** The model parameter(s) -Background -Beta(2)
47          have been estimated at a boundary point, or have been
48  specified by the user,
49          and do not appear in the correlation matrix )
50
51          Beta(1)
52
53  Beta(1)          1
54
55
56
57          Parameter Estimates
58
59          Variable          Estimate          Std. Err.
60  Background          0          NA

```

1 Beta(1) 1.85717e-007 4.42148e-006
 2 Beta(2) 0 NA
 3

4 NA - Indicates that this parameter has hit a bound
 5 implied by some inequality constraint and thus
 6 has no standard error.
 7
 8
 9

10 Analysis of Deviance Table

Model	Log(likelihood)	Deviance	Test DF	P-value
Full model	-755.63			
Fitted model	-755.773	0.2868	3	0.9625
Reduced model	-781.782	52.3039	3	<.0001
AIC:	1513.55			

19 Goodness of Fit

Dose	Est._Prob.	Expected	Observed	Size	Chi^2 Res.
i: 1	0.0000	0.000	0	1000000	0.000
i: 2	50.0000	9.286	10	1000000	0.077
i: 3	100.0000	18.572	20	1000000	0.077
i: 4	200.0000	37.143	35	1000000	-0.058
Chi-square =	0.29	DF = 3	P-value =	0.9622	

36 Benchmark Dose Computation

37 Specified effect = 1e-005
 39 Risk Type = Extra risk
 41 Confidence level = 0.95
 43 BMD = 53.8457

46 **** WARNING: Completion code = -2. Optimum not found. Trying new starting
 47 point****
 48
 49 **** WARNING 0: Completion code = -2 trying new start****
 50
 51 **** WARNING 1: Completion code = -2 trying new start****
 52
 53 **** WARNING 2: Completion code = -2 trying new start****
 54
 55 **** WARNING 3: Completion code = -2 trying new start****
 56
 57 **** WARNING 4: Completion code = -2 trying new start****
 58
 59 **** WARNING 5: Completion code = -2 trying new start****
 60

1 **** WARNING 6: Completion code = -2 trying new start****
2
3 **** WARNING 7: Completion code = -2 trying new start****
4
5 **** WARNING 8: Completion code = -2 trying new start****
6
7 **** WARNING 9: Completion code = -2 trying new start****
8
9 **** WARNING: Completion code = -2. Optimum not found. Trying new starting
10 point****
11
12 **** WARNING 0: Completion code = -2 trying new start****
13
14 **** WARNING 1: Completion code = -5 trying new start****
15
16 **** WARNING 2: Completion code = -2 trying new start****
17
18 **** WARNING 3: Completion code = -2 trying new start****
19
20 **** WARNING 4: Completion code = -2 trying new start****
21
22 **** WARNING 5: Completion code = -2 trying new start****
23
24 **** WARNING 6: Completion code = -2 trying new start****
25
26 **** WARNING 7: Completion code = -5 trying new start****
27
28 **** WARNING 8: Completion code = -2 trying new start****
29
30 **** WARNING 9: Completion code = -5 trying new start****
31
32
33 Warning: completion code still negative
34 BMDL did not converge for BMR = 0.000010
35
36 Program execution is stopped
37

```

1  RAVEH_HUB_MUT_BAP.OUT.txt
2  =====
3      Multistage Model. $Revision: 2.1 $ $Date: 2000/08/21 03:38:21 $
4      Input Data File: C:\DOCUMENTS AND SETTINGS\HCLYNCH\MY DOCUMENTS\PAH
5  RPS\MODELING\RAVEH_HUB_MUT_BAP.(d)
6      Gnuplot Plotting File: C:\DOCUMENTS AND SETTINGS\HCLYNCH\MY
7  DOCUMENTS\PAH RPS\MODELING\RAVEH_HUB_MUT_BAP.plt
8                                  Wed Jun 29 12:15:41 2005
9  =====
10
11  BMDS MODEL RUN
12  ~~~~~
13
14  The form of the probability function is:
15
16  P[response] = background + (1-background)*[1-EXP(
17  -beta1*dose^1)]
18
19  The parameter betas are restricted to be positive
20
21
22  Dependent variable = COLUMN2
23  Independent variable = COLUMN1
24
25  Total number of observations = 3
26  Total number of records with missing values = 0
27  Total number of parameters in model = 2
28  Total number of specified parameters = 0
29  Degree of polynomial = 1
30
31
32  Maximum number of iterations = 250
33  Relative Function Convergence has been set to: 1e-008
34  Parameter Convergence has been set to: 1e-008
35
36
37
38          Default Initial Parameter Values
39          Background =          0
40          Beta(1) =    0.00102082
41  **** WARNING: Completion code = -2. Optimum not found. Trying new starting
42  pont****
43
44  **** WARNING 0: Completion code = -2 trying new start****
45
46  **** WARNING 1: Completion code = -2 trying new start****
47
48  **** WARNING 2: Completion code = -2 trying new start****
49
50  **** WARNING 3: Completion code = -2 trying new start****
51
52  **** WARNING 4: Completion code = -2 trying new start****
53
54  **** WARNING 5: Completion code = -2 trying new start****
55
56  **** WARNING 6: Completion code = -2 trying new start****
57
58  **** WARNING 7: Completion code = -2 trying new start****
59
60  **** WARNING 8: Completion code = -2 trying new start****

```

1
 2 **** WARNING 9: Completion code = -2 trying new start****
 3
 4 **** WARNING: Completion code = -2. Optimum not found. Trying new starting
 5 point****
 6
 7 **** WARNING 0: Completion code = -2 trying new start****
 8
 9 **** WARNING 1: Completion code = -2 trying new start****
 10
 11 **** WARNING 2: Completion code = -2 trying new start****
 12
 13 **** WARNING 3: Completion code = -2 trying new start****
 14
 15
 16

17 Asymptotic Correlation Matrix of Parameter Estimates

	Background	Beta(1)
Background	1	-0.71
Beta(1)	-0.71	1

26 Parameter Estimates

Variable	Estimate	Std. Err.
Background	2.6399e-005	0.00257721
Beta(1)	0.000947187	0.00419869

34 Analysis of Deviance Table

Model	Log(likelihood)	Deviance	Test DF	P-value
Full model	-1077.99			
Fitted model	-1078.81	1.63811	1	0.2006
Reduced model	-1144.43	132.88	2	<.0001

42 AIC: 2161.62

44 Goodness of Fit

Dose	Est._Prob.	Expected	Observed	Size	Chi^2 Res.

i: 1					
0.0000	0.0000	2.640	3	100000	0.136
i: 2					
0.3000	0.0003	31.051	25	100000	-0.195
i: 3					
1.0000	0.0010	97.311	103	100000	0.059
Chi-square =	1.56	DF = 1	P-value =	0.2115	

59 Benchmark Dose Computation

1 Specified effect = 0.0001
2
3 Risk Type = Extra risk
4
5 Confidence level = 0.95
6
7 BMD = 0.105581
8
9 BMDL = 0.0908465
10

```

1  RAVEH_HUB_MUT_cpdp.OUT.txt
2  =====
3      Quantal Linear Model $Revision: 2.2 $ $Date: 2000/03/17 22:27:16 $
4      Input Data File: C:\DOCUMENTS AND SETTINGS\HCLYNCH\MY DOCUMENTS\PAH
5  RPS\MODELING\RAVEH_HUB_MUT_BAP.(d)
6      Gnuplot Plotting File: C:\DOCUMENTS AND SETTINGS\HCLYNCH\MY
7  DOCUMENTS\PAH RPS\MODELING\RAVEH_HUB_MUT_BAP.plt
8
9  =====
10
11  BMDS MODEL RUN
12  ~~~~~
13
14  The form of the probability function is:
15
16  P[response] = background + (1-background)*[1-EXP(-slope*dose)]
17
18
19  Dependent variable = COLUMN2
20  Independent variable = COLUMN1
21
22  Total number of observations = 3
23  Total number of records with missing values = 0
24  Maximum number of iterations = 250
25  Relative Function Convergence has been set to: 1e-008
26  Parameter Convergence has been set to: 1e-008
27
28
29
30          Default Initial (and Specified) Parameter Values
31          Background = 3.49997e-005
32          Slope = 0.000170019
33          Power = 1 Specified
34
35
36  Asymptotic Correlation Matrix of Parameter Estimates
37
38  ( *** The model parameter(s) -Power
39  have been estimated at a boundary point, or have been
40  specified by the user,
41  and do not appear in the correlation matrix )
42
43          Background      Slope
44
45  Background      1      -0.51
46
47  Slope      -0.51      1
48
49
50
51          Parameter Estimates
52
53          Variable      Estimate      Std. Err.
54  Background      3.16959e-005      1.69176e-005
55  Slope      0.000173022      4.78826e-005
56
57
58
59          Analysis of Deviance Table
60

```

```

1      Model      Log(likelihood)  Deviance  Test DF      P-value
2      Full model      -317.426
3      Fitted model      -317.46      0.0679084      1      0.7944
4      Reduced model      -324.664      14.4766      2      0.0007185
5
6      AIC:      638.919
7
8
9      Goodness of Fit
10
11
12      Dose      Est._Prob.      Expected      Observed      Size      Scaled
13      -----
14      0.0000      0.0000      3.170      3      100000      -0.09526
15      0.3000      0.0001      8.360      9      100000      0.2214
16      1.0000      0.0002      20.470      20      100000      -0.1038
17
18      Chi-square =      0.07      DF = 1      P-value = 0.7930
19
20
21      Benchmark Dose Computation
22
23      Specified effect =      0.0001
24
25      Risk Type      =      Extra risk
26
27      Confidence level =      0.95
28
29      BMD =      0.577991
30
31      BMDL =      0.390507
32
33

```

```

1  RAVEH_MUT_bap.OUT.txt
2  =====
3      Quantal Linear Model $Revision: 2.2 $ $Date: 2000/03/17 22:27:16 $
4      Input Data File: C:\DOCUMENTS AND SETTINGS\HCLYNCH\MY DOCUMENTS\PAH
5  RPS\MODELING\RAVEH_MUT_CPCDP.(d)
6      Gnuplot Plotting File: C:\DOCUMENTS AND SETTINGS\HCLYNCH\MY
7  DOCUMENTS\PAH RPS\MODELING\RAVEH_MUT_CPCDP.plt
8
9  =====
10
11  BMDS MODEL RUN
12  ~~~~~
13
14  The form of the probability function is:
15
16  P[response] = background + (1-background)*[1-EXP(-slope*dose)]
17
18
19  Dependent variable = COLUMN2
20  Independent variable = COLUMN1
21
22  Total number of observations = 3
23  Total number of records with missing values = 0
24  Maximum number of iterations = 250
25  Relative Function Convergence has been set to: 1e-008
26  Parameter Convergence has been set to: 1e-008
27
28
29
30          Default Initial (and Specified) Parameter Values
31          Background = 7.49999e-006
32          Slope = 6.70027e-005
33          Power = 1 Specified
34
35
36  Asymptotic Correlation Matrix of Parameter Estimates
37
38  ( *** The model parameter(s) -Power
39  have been estimated at a boundary point, or have been
40  specified by the user,
41  and do not appear in the correlation matrix )
42
43          Background      Slope
44
45  Background      1      -0.38
46
47  Slope      -0.38      1
48
49
50
51          Parameter Estimates
52
53          Variable      Estimate      Std. Err.
54  Background      6.11766e-006      2.23574e-006
55  Slope      6.35766e-005      8.04156e-006
56
57
58
59          Analysis of Deviance Table
60

```

```

1      Model      Log(likelihood)  Deviance  Test DF      P-value
2      Full model      -1104.33
3      Fitted model      -1105.09      1.53413      1      0.2155
4      Reduced model      -1141.2      73.7415      2      <.0001
5
6      AIC:      2214.19
7
8
9      Goodness of Fit
10
11
12      Dose      Est._Prob.      Expected      Observed      Size      Scaled
13      -----
14      0.0000      0.0000      6.118      7      1000000      0.3567
15      0.3000      0.0000      25.190      20      1000000      -1.034
16      1.0000      0.0001      69.692      74      1000000      0.5161
17
18      Chi-square =      1.46      DF = 1      P-value = 0.2264
19
20
21      Benchmark Dose Computation
22
23      Specified effect =      1e-005
24
25      Risk Type      =      Extra risk
26
27      Confidence level =      0.95
28
29      BMD =      0.157291
30
31      BMDL =      0.12931
32
33

```



```

1  RAVEH_MUT_CPCDP.OUT.txt
2  =====
3      Quantal Linear Model $Revision: 2.2 $ $Date: 2000/03/17 22:27:16 $
4      Input Data File: C:\DOCUMENTS AND SETTINGS\HCLYNCH\MY DOCUMENTS\PAH
5  RPS\MODELING\RAVEH_MUT_CPCDP.(d)
6      Gnuplot Plotting File: C:\DOCUMENTS AND SETTINGS\HCLYNCH\MY
7  DOCUMENTS\PAH RPS\MODELING\RAVEH_MUT_CPCDP.plt
8                                  Wed Jun 29 12:31:46 2005
9  =====
10
11  BMDS MODEL RUN
12  ~~~~~
13
14  The form of the probability function is:
15
16  P[response] = background + (1-background)*[1-EXP(-slope*dose)]
17
18
19  Dependent variable = COLUMN2
20  Independent variable = COLUMN1
21
22  Total number of observations = 4
23  Total number of records with missing values = 0
24  Maximum number of iterations = 250
25  Relative Function Convergence has been set to: 1e-008
26  Parameter Convergence has been set to: 1e-008
27
28
29
30          Default Initial (and Specified) Parameter Values
31          Background =      1.5e-006
32          Slope = 9.00013e-006
33          Power =          1   Specified
34
35
36  Asymptotic Correlation Matrix of Parameter Estimates
37
38  ( *** The model parameter(s) -Power
39  have been estimated at a boundary point, or have been
40  specified by the user,
41  and do not appear in the correlation matrix )
42
43          Background      Slope
44
45  Background          1      -0.43
46
47  Slope          -0.43          1
48
49
50
51          Parameter Estimates
52
53          Variable          Estimate          Std. Err.
54  Background          1.26496e-006          1.07098e-006
55  Slope          9.05599e-006          1.68076e-006
56
57
58
59          Analysis of Deviance Table
60

```

```

1      Model      Log(likelihood)  Deviance  Test DF      P-value
2      Full model      -527.507
3      Fitted model      -527.666      0.317201      2      0.8533
4      Reduced model      -546.375      37.7352      3      <.0001
5
6      AIC:      1059.33
7
8
9      Goodness of Fit
10
11
12      Dose      Est._Prob.      Expected      Observed      Size      Scaled
13      -----
14      0.0000      0.0000      1.265      1      1000000      -0.2356
15      0.3000      0.0000      3.982      5      1000000      0.5103
16      1.0000      0.0000      10.321      10      1000000      -0.09989
17      3.0000      0.0000      28.433      28      1000000      -0.08112
18
19      Chi-square =      0.33      DF = 2      P-value = 0.8469
20
21
22      Benchmark Dose Computation
23
24      Specified effect =      1e-005
25
26      Risk Type      =      Extra risk
27
28      Confidence level =      0.95
29
30      BMD =      1.10425
31
32      BMDL =      0.835597
33
34

```

```

1  SLAGA_MUT_BAA.OUT.txt
2  =====
3      Multistage Model. $Revision: 2.1 $ $Date: 2000/08/21 03:38:21 $
4      Input Data File: C:\DOCUMENTS AND SETTINGS\HCLYNCH\MY DOCUMENTS\PAH
5  RPS\MODELING\SLAGA_MUT_BAA.(d)
6      Gnuplot Plotting File: C:\DOCUMENTS AND SETTINGS\HCLYNCH\MY
7  DOCUMENTS\PAH RPS\MODELING\SLAGA_MUT_BAA.plt
8
9  =====
10
11  BMDS MODEL RUN
12  ~~~~~
13
14  The form of the probability function is:
15
16  P[response] = background + (1-background)*[1-EXP(
17  -beta1*dose^1)]
18
19  The parameter betas are restricted to be positive
20
21
22  Dependent variable = COLUMN2
23  Independent variable = COLUMN1
24
25  Total number of observations = 3
26  Total number of records with missing values = 0
27  Total number of parameters in model = 2
28  Total number of specified parameters = 0
29  Degree of polynomial = 1
30
31
32  Maximum number of iterations = 250
33  Relative Function Convergence has been set to: 1e-008
34  Parameter Convergence has been set to: 1e-008
35
36
37
38          Default Initial Parameter Values
39          Background = 7.29666e-005
40          Beta(1) = 3.12233e-006
41  **** WARNING: Completion code = 7. Optimum not found. Trying new starting
42  pont****
43
44  **** WARNING 0: Completion code = 7 trying new start****
45
46  **** WARNING 1: Completion code = -2 trying new start****
47
48  **** WARNING 2: Completion code = -2 trying new start****
49
50  **** WARNING 3: Completion code = -2 trying new start****
51
52  **** WARNING 4: Completion code = 7 trying new start****
53
54  **** WARNING 5: Completion code = -2 trying new start****
55
56  **** WARNING 6: Completion code = -2 trying new start****
57
58  **** WARNING 7: Completion code = -2 trying new start****
59
60  **** WARNING 8: Completion code = -2 trying new start****

```

1
 2 **** WARNING 9: Completion code = 7 trying new start****
 3
 4 **** WARNING: Completion code = -2. Optimum not found. Trying new starting
 5 point****
 6
 7 **** WARNING 0: Completion code = -2 trying new start****
 8
 9

10
 11 Asymptotic Correlation Matrix of Parameter Estimates

	Background	Beta(1)
Background	1	-0.63
Beta(1)	-0.63	1

12
 13
 14
 15
 16
 17
 18
 19
 20
 21 Parameter Estimates

Variable	Estimate	Std. Err.
Background	7.26607e-005	0.0023585
Beta(1)	3.14129e-006	9.25599e-005

22
 23
 24
 25
 26
 27
 28
 29 Analysis of Deviance Table

Model	Log(likelihood)	Deviance	Test DF	P-value
Full model	-365.644			
Fitted model	-365.656	0.0243422	1	0.876
Reduced model	-370.021	8.75326	2	0.01257
AIC:	735.312			

30
 31
 32
 33
 34
 35
 36
 37
 38
 39 Goodness of Fit

Dose	Est._Prob.	Expected	Observed	Size	Chi^2 Res.
i: 1	0.0000	7.266	7	100000	-0.037
i: 2	4.4000	8.648	9	100000	0.041
i: 3	44.0000	21.086	21	100000	-0.004
Chi-square =	0.02	DF = 1		P-value = 0.8758	

40
 41
 42
 43
 44
 45
 46
 47
 48
 49
 50
 51
 52
 53 Benchmark Dose Computation

54 Specified effect = 0.0001
 55
 56 Risk Type = Extra risk
 57
 58 Confidence level = 0.95
 59
 60

1 BMD = 31.8356
2
3 BMDL = 19.0163
4

```

1  SLAGA_MUT_BAP.OUT.txt
2  =====
3      Multistage Model. $Revision: 2.1 $ $Date: 2000/08/21 03:38:21 $
4      Input Data File: C:\DOCUMENTS AND SETTINGS\HCLYNCH\MY DOCUMENTS\PAH
5  RPS\MODELING\SLAGA_MUT_BAP.(d)
6      Gnuplot Plotting File: C:\DOCUMENTS AND SETTINGS\HCLYNCH\MY
7  DOCUMENTS\PAH RPS\MODELING\SLAGA_MUT_BAP.plt
8                                  Wed Jun 29 13:01:31 2005
9  =====
10
11  BMDS MODEL RUN
12  ~~~~~
13
14  The form of the probability function is:
15
16  P[response] = background + (1-background)*[1-EXP(
17  -beta1*dose^1-beta2*dose^2)]
18
19  The parameter betas are restricted to be positive
20
21
22  Dependent variable = COLUMN2
23  Independent variable = COLUMN1
24
25  Total number of observations = 4
26  Total number of records with missing values = 0
27  Total number of parameters in model = 3
28  Total number of specified parameters = 0
29  Degree of polynomial = 2
30
31
32  Maximum number of iterations = 250
33  Relative Function Convergence has been set to: 1e-008
34  Parameter Convergence has been set to: 1e-008
35
36
37
38          Default Initial Parameter Values
39          Background = 0.000214668
40          Beta(1) = 0.00154564
41          Beta(2) = 0.00022152
42
43
44          Asymptotic Correlation Matrix of Parameter Estimates
45
46          ( *** The model parameter(s) -Background
47          have been estimated at a boundary point, or have been
48  specified by the user,
49          and do not appear in the correlation matrix )
50
51          Beta(1)      Beta(2)
52
53  Beta(1)              1      -0.98
54
55  Beta(2)            -0.98      1
56
57
58
59          Parameter Estimates
60

```

Variable	Estimate	Std. Err.
Background	0	NA
Beta(1)	0.00207246	0.0109511
Beta(2)	9.74689e-005	0.00286413

NA - Indicates that this parameter has hit a bound implied by some inequality constraint and thus has no standard error.

Warning: Likelihood for the fitted model larger than the Likelihood for the full model.
Error in computing chi-square; returning 2

Analysis of Deviance Table

Model	Log(likelihood)	Deviance	Test DF	P-value
Full model	-823.498			
Fitted model	-816.691	-13.6145	2	2
Reduced model	-907.084	167.172	3	<.0001

AIC: 1637.38

Goodness of Fit

Dose	Est._Prob.	Expected	Observed	Size	Chi^2 Res.
i: 1	0.0000	0.0000	1	1000070000000.000	
i: 2	0.4000	0.0008	8.442	10000	0.303
i: 3	1.3000	0.0029	28.548	10000	-0.125
i: 4	4.0000	0.0098	98.010	10000	0.010

Chi-square = 1.23 DF = 2 P-value = 0.5412

Benchmark Dose Computation

Specified effect = 0.0001
 Risk Type = Extra risk
 Confidence level = 0.95
 BMD = 0.0481451
 BMDL = 0.0370516

1 **D.6. MALIGNANT TRANSFORMATION**

2 CASTO_MT_BAP.OUT.txt

3 =====
4 Multistage Model. \$Revision: 2.1 \$ \$Date: 2000/08/21 03:38:21 \$
5 Input Data File: C:\DOCUMENTS AND SETTINGS\HCLYNCH\MY DOCUMENTS\PAH
6 RPS\MODELING\CASTO_MT_BAP.(d)
7 Gnuplot Plotting File: C:\DOCUMENTS AND SETTINGS\HCLYNCH\MY
8 DOCUMENTS\PAH RPS\MODELING\CASTO_MT_BAP.plt
9 Thu Jun 23 13:30:59 2005
10 =====

11 BMD5 MODEL RUN
12 ~~~~~

13
14 The form of the probability function is:

15
16
$$P[\text{response}] = \text{background} + (1-\text{background}) * [1 - \text{EXP}(-\text{beta}1 * \text{dose}^1)]$$

17
18

19
20 The parameter betas are restricted to be positive
21

22
23 Dependent variable = COLUMN2
24 Independent variable = COLUMN1
25

26 Total number of observations = 3
27 Total number of records with missing values = 0
28 Total number of parameters in model = 2
29 Total number of specified parameters = 0
30 Degree of polynomial = 1
31

32
33 Maximum number of iterations = 250
34 Relative Function Convergence has been set to: 1e-008
35 Parameter Convergence has been set to: 1e-008
36
37
38

39 Default Initial Parameter Values
40 Background = 1.02144e-005
41 Beta(1) = 7.98743e-005
42
43

44 Asymptotic Correlation Matrix of Parameter Estimates

45
46 (*** The model parameter(s) -Background
47 have been estimated at a boundary point, or have been
48 specified by the user,
49 and do not appear in the correlation matrix)
50

51 Beta(1)
52
53 Beta(1) 1
54
55

56
57 Parameter Estimates

58
59 Variable Estimate Std. Err.

1 Background 0 NA
 2 Beta(1) 9.62612e-005 0.00234809
 3
 4 NA - Indicates that this parameter has hit a bound
 5 implied by some inequality constraint and thus
 6 has no standard error.
 7
 8
 9

10 Analysis of Deviance Table

Model	Log(likelihood)	Deviance	Test DF	P-value
Full model	-185.57			
Fitted model	-186.065	0.988828	2	0.6099
Reduced model	-192.98	14.82	2	0.0006052
AIC:	374.13			

19 Goodness of Fit

Dose	Est._Prob.	Expected	Observed	Size	Chi^2 Res.
i: 1	0.0000	0.000	0	100000	0.000
i: 2	0.6200	5.968	8	100000	0.340
i: 3	1.2500	12.032	10	100000	-0.169
Chi-square =	1.04	DF = 2	P-value =	0.5960	

34 Benchmark Dose Computation

35 Specified effect = 1e-005
 36 Risk Type = Extra risk
 37 Confidence level = 0.95
 38 BMD = 0.103885

44 **** WARNING: Completion code = -5. Optimum not found. Trying new starting
 45 point****
 46
 47 **** WARNING 0: Completion code = -5 trying new start****
 48
 49 **** WARNING 1: Completion code = -5 trying new start****
 50
 51 **** WARNING 2: Completion code = -5 trying new start****
 52
 53 **** WARNING 3: Completion code = -5 trying new start****
 54
 55 **** WARNING 4: Completion code = -5 trying new start****
 56
 57 **** WARNING 5: Completion code = -5 trying new start****
 58
 59 **** WARNING 6: Completion code = -5 trying new start****
 60

```
1 **** WARNING 7: Completion code = -5 trying new start****
2
3 **** WARNING 8: Completion code = -5 trying new start****
4
5 **** WARNING 9: Completion code = -5 trying new start****
6
7 **** WARNING: Completion code = -5. Optimum not found. Trying new starting
8 point****
9
10          BMDL =          0.0721753
11
```

```

1  CASTO_MT_DBAHA.OUT.txt
2  =====
3      Multistage Model. $Revision: 2.1 $ $Date: 2000/08/21 03:38:21 $
4      Input Data File: C:\DOCUMENTS AND SETTINGS\HCLYNCH\MY DOCUMENTS\PAH
5  RPS\MODELING\CASTO_MT_DBAHA.(d)
6      Gnuplot Plotting File: C:\DOCUMENTS AND SETTINGS\HCLYNCH\MY
7  DOCUMENTS\PAH RPS\MODELING\CASTO_MT_DBAHA.plt
8                                  Thu Jun 23 13:32:00 2005
9  =====
10
11  BMDS MODEL RUN
12  ~~~~~
13
14  The form of the probability function is:
15
16  P[response] = background + (1-background)*[1-EXP(
17  -beta1*dose^1)]
18
19  The parameter betas are restricted to be positive
20
21
22  Dependent variable = COLUMN2
23  Independent variable = COLUMN1
24
25  Total number of observations = 3
26  Total number of records with missing values = 0
27  Total number of parameters in model = 2
28  Total number of specified parameters = 0
29  Degree of polynomial = 1
30
31
32  Maximum number of iterations = 250
33  Relative Function Convergence has been set to: 1e-008
34  Parameter Convergence has been set to: 1e-008
35
36
37
38          Default Initial Parameter Values
39          Background = 6.92924e-008
40          Beta(1) = 3.99789e-006
41  **** WARNING: Completion code = -2. Optimum not found. Trying new starting
42  pont****
43
44  **** WARNING 0: Completion code = -2 trying new start****
45
46  **** WARNING 1: Completion code = -2 trying new start****
47
48  **** WARNING 2: Completion code = -2 trying new start****
49
50  **** WARNING 3: Completion code = -2 trying new start****
51
52  **** WARNING 4: Completion code = -2 trying new start****
53
54  **** WARNING 5: Completion code = -2 trying new start****
55
56  **** WARNING 6: Completion code = -2 trying new start****
57
58  **** WARNING 7: Completion code = -2 trying new start****
59
60  **** WARNING 8: Completion code = -2 trying new start****

```

1
 2 **** WARNING 9: Completion code = -2 trying new start****
 3
 4 **** WARNING: Completion code = -2. Optimum not found. Trying new starting
 5 point****
 6
 7
 8

9 Asymptotic Correlation Matrix of Parameter Estimates

10
 11 (*** The model parameter(s) -Background
 12 have been estimated at a boundary point, or have been
 13 specified by the user,
 14 and do not appear in the correlation matrix)
 15

16 Beta(1)
 17
 18 Beta(1) 1
 19

20
 21
 22 Parameter Estimates

Variable	Estimate	Std. Err.
Background	0	NA
Beta(1)	4.05407e-006	0.000361631

23
 24
 25
 26
 27
 28 NA - Indicates that this parameter has hit a bound
 29 implied by some inequality constraint and thus
 30 has no standard error.
 31

32
 33
 34 Analysis of Deviance Table

Model	Log(likelihood)	Deviance	Test DF	P-value
Full model	-191.16			
Fitted model	-191.162	0.00552866	2	0.9972
Reduced model	-198.091	13.863	2	0.0009765

35
 36
 37
 38
 39
 40
 41 AIC: 384.325
 42

43
 44 Goodness of Fit

Dose	Est._Prob.	Expected	Observed	Size	Chi^2 Res.

i: 1	0.0000	0.0000	0	1000000	0.000
i: 2	1.2000	4.865	5	1000000	0.028
i: 3	2.5000	10.135	10	1000000	-0.013
Chi-square =	0.01	DF = 2	P-value = 0.9972		

45
 46
 47
 48
 49
 50
 51
 52
 53
 54
 55
 56
 57
 58 Benchmark Dose Computation

59 Specified effect = 1e-005
 60

```
1
2 Risk Type          =      Extra risk
3
4 Confidence level =      0.95
5
6           BMD =      2.46667
7
8 **** WARNING:  Completion code = -5.  Optimum not found. Trying new starting
9 point****
10
11 **** WARNING 0:  Completion code = -1 trying new start****
12
13 **** WARNING 1:  Completion code = -1 trying new start****
14
15 **** WARNING 2:  Completion code = -1 trying new start****
16
17 **** WARNING 3:  Completion code = -1 trying new start****
18
19 **** WARNING 4:  Completion code = -1 trying new start****
20
21 **** WARNING 5:  Completion code = -1 trying new start****
22
23 **** WARNING 6:  Completion code = -1 trying new start****
24
25 **** WARNING 7:  Completion code = -1 trying new start****
26
27 **** WARNING 8:  Completion code = -1 trying new start****
28
29 **** WARNING 9:  Completion code = -1 trying new start****
30
31 **** WARNING:  Completion code = -1.  Optimum not found. Trying new starting
32 point****
33
34           BMDL =      1.65901
35
```

```

1  EMURA_MT_Baa.OUT.txt
2  =====
3      Multistage Model. $Revision: 2.1 $ $Date: 2000/08/21 03:38:21 $
4      Input Data File: C:\DOCUMENTS AND SETTINGS\HCLYNCH\MY DOCUMENTS\PAH
5  RPS\MODELING\EMURA_MT_BBF.(d)
6      Gnuplot Plotting File: C:\DOCUMENTS AND SETTINGS\HCLYNCH\MY
7  DOCUMENTS\PAH RPS\MODELING\EMURA_MT_BBF.plt
8                                  Thu Jun 23 15:46:49 2005
9  =====
10
11  BMDS MODEL RUN
12  ~~~~~
13
14  The form of the probability function is:
15
16  P[response] = background + (1-background)*[1-EXP(
17  -beta1*dose^1-beta2*dose^2-beta3*dose^3-beta4*dose^4)]
18
19  The parameter betas are restricted to be positive
20
21
22  Dependent variable = COLUMN2
23  Independent variable = COLUMN1
24
25  Total number of observations = 6
26  Total number of records with missing values = 0
27  Total number of parameters in model = 5
28  Total number of specified parameters = 0
29  Degree of polynomial = 4
30
31
32  Maximum number of iterations = 250
33  Relative Function Convergence has been set to: 1e-008
34  Parameter Convergence has been set to: 1e-008
35
36
37
38          Default Initial Parameter Values
39          Background = 6.24839e-005
40          Beta(1) = 0.000973789
41          Beta(2) = 0
42          Beta(3) = 0
43          Beta(4) = 0
44
45
46          Asymptotic Correlation Matrix of Parameter Estimates
47
48          ( *** The model parameter(s) -Background -Beta(2) -Beta(3)
49  -Beta(4)
50          have been estimated at a boundary point, or have been
51  specified by the user,
52          and do not appear in the correlation matrix )
53
54          Beta(1)
55
56  Beta(1)          1
57
58
59
60          Parameter Estimates

```

Variable	Estimate	Std. Err.
Background	0	NA
Beta(1)	0.00117377	0.0091424
Beta(2)	0	NA
Beta(3)	0	NA
Beta(4)	0	NA

NA - Indicates that this parameter has hit a bound implied by some inequality constraint and thus has no standard error.

Analysis of Deviance Table

Model	Log(likelihood)	Deviance	Test DF	P-value
Full model	-184.252			
Fitted model	-185.671	2.83903	5	0.7248
Reduced model	-196.039	23.575	5	0.000262
AIC:	373.342			

Goodness of Fit

Dose	Est._Prob.	Expected	Observed	Size	Chi^2 Res.
i: 1	0.0000	0.0000	0	10000	0.000
i: 2	0.0250	0.0000	0	10000	-1.000
i: 3	0.1000	0.0001	3	10000	1.556
i: 4	0.2500	0.0003	3	10000	0.023
i: 5	0.5000	0.0006	6	10000	0.023
i: 6	1.0000	0.0012	10	10000	-0.148

Chi-square = 3.40 DF = 5 P-value = 0.6392

Benchmark Dose Computation

Specified effect = 0.001
 Risk Type = Extra risk
 Confidence level = 0.95
 BMD = 0.85238
 BMDL = 0.611981
 EMURA_MT_BBF.OUT.txt

=====
 Multistage Model. \$Revision: 2.1 \$ \$Date: 2000/08/21 03:38:21 \$
 Input Data File: C:\DOCUMENTS AND SETTINGS\HCLYNCH\MY DOCUMENTS\PAH
 RPS\MODELING\EMURA_MT_BBF.(d)

1 Gnuplot Plotting File: C:\DOCUMENTS AND SETTINGS\HCLYNCH\MY
2 DOCUMENTS\PAH RPS\MODELING\EMURA_MT_BBF.plt
3 Thu Jun 23 15:37:20 2005

4 =====

5
6 BMDS MODEL RUN

7 ~~~~~

8
9 The form of the probability function is:

10
11 $P[\text{response}] = \text{background} + (1 - \text{background}) * [1 - \text{EXP}(\text{-beta1} * \text{dose}^1 - \text{beta2} * \text{dose}^2 - \text{beta3} * \text{dose}^3 - \text{beta4} * \text{dose}^4)]$

12
13
14 The parameter betas are restricted to be positive

15
16
17 Dependent variable = COLUMN2
18 Independent variable = COLUMN1

19
20 Total number of observations = 6
21 Total number of records with missing values = 0
22 Total number of parameters in model = 5
23 Total number of specified parameters = 0
24 Degree of polynomial = 4

25
26
27 Maximum number of iterations = 250
28 Relative Function Convergence has been set to: 1e-008
29 Parameter Convergence has been set to: 1e-008

30
31
32
33 Default Initial Parameter Values

34 Background = 6.48647e-005
35 Beta(1) = 0.00111706
36 Beta(2) = 0
37 Beta(3) = 1.51794e-005
38 Beta(4) = 0

39
40
41 Asymptotic Correlation Matrix of Parameter Estimates

42
43 (*** The model parameter(s) -Background -Beta(2) -Beta(3)
44 -Beta(4)
45 have been estimated at a boundary point, or have been
46 specified by the user,
47 and do not appear in the correlation matrix)

48
49 Beta(1)
50
51 Beta(1) 1

52
53
54
55 Parameter Estimates

56 Variable	57 Estimate	58 Std. Err.
58 Background	0	NA
59 Beta(1)	0.00133391	0.00909075
60 Beta(2)	0	NA


```

1  EMURA_MT_I_BAP.OUT.txt
2  =====
3      Multistage Model. $Revision: 2.1 $ $Date: 2000/08/21 03:38:21 $
4      Input Data File: C:\DOCUMENTS AND SETTINGS\HCLYNCH\MY DOCUMENTS\PAH
5  RPS\MODELING\EMURA_MT_I_BAP.(d)
6      Gnuplot Plotting File: C:\DOCUMENTS AND SETTINGS\HCLYNCH\MY
7  DOCUMENTS\PAH RPS\MODELING\EMURA_MT_I_BAP.plt
8                                  Thu Jun 23 15:28:17 2005
9  =====
10
11  BMDS MODEL RUN
12  ~~~~~
13
14  The form of the probability function is:
15
16  P[response] = background + (1-background)*[1-EXP(
17  -beta1*dose^1-beta2*dose^2-beta3*dose^3)]
18
19  The parameter betas are restricted to be positive
20
21
22  Dependent variable = COLUMN2
23  Independent variable = COLUMN1
24
25  Total number of observations = 5
26  Total number of records with missing values = 0
27  Total number of parameters in model = 4
28  Total number of specified parameters = 0
29  Degree of polynomial = 3
30
31
32  Maximum number of iterations = 250
33  Relative Function Convergence has been set to: 1e-008
34  Parameter Convergence has been set to: 1e-008
35
36
37
38          Default Initial Parameter Values
39          Background = 6.51885e-005
40          Beta(1) = 0.021934
41          Beta(2) = 0
42          Beta(3) = 0
43
44
45          Asymptotic Correlation Matrix of Parameter Estimates
46
47          ( *** The model parameter(s) -Background -Beta(2) -Beta(3)
48          have been estimated at a boundary point, or have been
49  specified by the user,
50          and do not appear in the correlation matrix )
51
52          Beta(1)
53
54  Beta(1)          1
55
56
57
58          Parameter Estimates
59
60  Variable          Estimate          Std. Err.

```

1 Background 0 NA
 2 Beta(1) 0.0227293 0.0369378
 3 Beta(2) 0 NA
 4 Beta(3) 0 NA

5
 6 NA - Indicates that this parameter has hit a bound
 7 implied by some inequality constraint and thus
 8 has no standard error.
 9

10
 11
 12 Analysis of Deviance Table

Model	Log(likelihood)	Deviance	Test DF	P-value
Full model	-614.919			
Fitted model	-618.123	6.40862	4	0.1706
Reduced model	-677.621	125.404	4	<.0001
AIC:	1238.25			

20
 21
 22 Goodness of Fit

Dose	Est._Prob.	Expected	Observed	Size	Chi^2 Res.
i: 1	0.0000	0.000	0	10000	0.000
i: 2	0.0100	2.273	0	10000	-1.000
i: 3	0.0500	11.358	11	10000	-0.032
i: 4	0.1000	22.703	29	10000	0.278
i: 5	0.2500	56.662	53	10000	-0.065
Chi-square =	4.27	DF = 4	P-value =	0.3703	

36
 37
 38
 39
 40 Benchmark Dose Computation

41
 42 Specified effect = 0.001
 43
 44 Risk Type = Extra risk
 45
 46 Confidence level = 0.95
 47
 48 BMD = 0.0440182
 49
 50 BMDL = 0.037291
 51

```

1  EMURA_MT_II_BAP.OUT.txt
2  =====
3      Multistage Model. $Revision: 2.1 $ $Date: 2000/08/21 03:38:21 $
4      Input Data File: C:\DOCUMENTS AND SETTINGS\HCLYNCH\MY DOCUMENTS\PAH
5  RPS\MODELING\EMURA_MT_II_BAP.(d)
6      Gnuplot Plotting File: C:\DOCUMENTS AND SETTINGS\HCLYNCH\MY
7  DOCUMENTS\PAH RPS\MODELING\EMURA_MT_II_BAP.plt
8                                  Thu Jun 23 15:54:16 2005
9  =====
10
11  BMDS MODEL RUN
12  ~~~~~
13
14  The form of the probability function is:
15
16  P[response] = background + (1-background)*[1-EXP(
17  -beta1*dose^1-beta2*dose^2-beta3*dose^3)]
18
19  The parameter betas are restricted to be positive
20
21
22  Dependent variable = COLUMN2
23  Independent variable = COLUMN1
24
25  Total number of observations = 5
26  Total number of records with missing values = 0
27  Total number of parameters in model = 4
28  Total number of specified parameters = 0
29  Degree of polynomial = 3
30
31
32  Maximum number of iterations = 250
33  Relative Function Convergence has been set to: 1e-008
34  Parameter Convergence has been set to: 1e-008
35
36
37
38          Default Initial Parameter Values
39          Background =      0.0002687
40          Beta(1) =      0.0184676
41          Beta(2) =      0
42          Beta(3) =      0
43
44
45          Asymptotic Correlation Matrix of Parameter Estimates
46
47          ( *** The model parameter(s) -Background      -Beta(2)      -Beta(3)
48          have been estimated at a boundary point, or have been
49  specified by the user,
50          and do not appear in the correlation matrix )
51
52          Beta(1)
53
54  Beta(1)          1
55
56
57
58          Parameter Estimates
59
60  Variable          Estimate          Std. Err.

```

```

1      Background          0          NA
2      Beta(1)             0.021747  0.0381969
3      Beta(2)             0          NA
4      Beta(3)             0          NA

```

```

5
6  NA - Indicates that this parameter has hit a bound
7      implied by some inequality constraint and thus
8      has no standard error.
9

```

```

10
11
12      Analysis of Deviance Table

```

Model	Log(likelihood)	Deviance	Test DF	P-value
Full model	-606.226			
Fitted model	-608.64	4.82649	4	0.3056
Reduced model	-652.392	92.3321	4	<.0001
AIC:	1219.28			

```

21
22      Goodness of Fit

```

Dose	Est._Prob.	Expected	Observed	Size	Chi^2 Res.
i: 1	0.0000	0.000	0	10000	0.000
i: 2	0.0100	2.174	4	10000	0.840
i: 3	0.0500	10.868	10	10000	-0.080
i: 4	0.1000	21.723	29	10000	0.336
i: 5	0.2500	54.220	46	10000	-0.152
Chi-square =	5.30	DF = 4	P-value =	0.2581	

```

39
40      Benchmark Dose Computation

```

```

41
42  Specified effect =          0.001
43
44  Risk Type       =          Extra risk
45
46  Confidence level =          0.95
47
48      BMD =          0.0460064
49
50      BMDL =          0.0388361
51

```

```

1  EMURA_MT_IP.OUT.txt
2  =====
3      Multistage Model. $Revision: 2.1 $ $Date: 2000/08/21 03:38:21 $
4      Input Data File: C:\DOCUMENTS AND SETTINGS\HCLYNCH\MY DOCUMENTS\PAH
5  RPS\MODELING\EMURA_MT_IP.(d)
6      Gnuplot Plotting File: C:\DOCUMENTS AND SETTINGS\HCLYNCH\MY
7  DOCUMENTS\PAH RPS\MODELING\EMURA_MT_IP.plt
8
9  =====
10
11  BMDS MODEL RUN
12  ~~~~~
13
14  The form of the probability function is:
15
16  P[response] = background + (1-background)*[1-EXP(
17  -beta1*dose^1-beta2*dose^2-beta3*dose^3-beta4*dose^4)]
18
19  The parameter betas are restricted to be positive
20
21
22  Dependent variable = COLUMN2
23  Independent variable = COLUMN1
24
25  Total number of observations = 6
26  Total number of records with missing values = 0
27  Total number of parameters in model = 5
28  Total number of specified parameters = 0
29  Degree of polynomial = 4
30
31
32  Maximum number of iterations = 250
33  Relative Function Convergence has been set to: 1e-008
34  Parameter Convergence has been set to: 1e-008
35
36
37
38          Default Initial Parameter Values
39          Background = 7.12074e-005
40          Beta(1) = 0.00099924
41          Beta(2) = 0
42          Beta(3) = 0
43          Beta(4) = 0
44
45
46          Asymptotic Correlation Matrix of Parameter Estimates
47
48          ( *** The model parameter(s) -Background -Beta(2) -Beta(3)
49  -Beta(4)
50          have been estimated at a boundary point, or have been
51  specified by the user,
52          and do not appear in the correlation matrix )
53
54          Beta(1)
55
56  Beta(1)          1
57
58
59
60          Parameter Estimates

```

Variable	Estimate	Std. Err.
Background	0	NA
Beta(1)	0.00122714	0.00918598
Beta(2)	0	NA
Beta(3)	0	NA
Beta(4)	0	NA

NA - Indicates that this parameter has hit a bound implied by some inequality constraint and thus has no standard error.

Analysis of Deviance Table

Model	Log(likelihood)	Deviance	Test DF	P-value
Full model	-191.591			
Fitted model	-193.089	2.99724	5	0.7004
Reduced model	-203.928	24.6739	5	0.0001611
AIC:	388.178			

Goodness of Fit

Dose	Est._Prob.	Expected	Observed	Size	Chi^2 Res.
i: 1	0.0000	0.0000	0	10000	0.000
i: 2	0.0250	0.307	0	10000	-1.000
i: 3	0.1000	1.227	3	10000	1.445
i: 4	0.2500	3.067	3	10000	-0.022
i: 5	0.5000	6.134	7	10000	0.141
i: 6	1.0000	12.264	10	10000	-0.185

Chi-square = 3.41 DF = 5 P-value = 0.6369

Benchmark Dose Computation

Specified effect =	0.001
Risk Type =	Extra risk
Confidence level =	0.95
BMD =	0.815309
BMDL =	0.589412

```

1 LUBET_MT_BAP.OUT.txt
2 =====
3     Multistage Model. $Revision: 2.1 $ $Date: 2000/08/21 03:38:21 $
4     Input Data File: C:\DOCUMENTS AND SETTINGS\HCLYNCH\MY DOCUMENTS\PAH
5 RPS\MODELING\LUBET_MT_BAP.(d)
6     Gnuplot Plotting File: C:\DOCUMENTS AND SETTINGS\HCLYNCH\MY
7 DOCUMENTS\PAH RPS\MODELING\LUBET_MT_BAP.plt
8                               Thu Jun 23 16:11:06 2005
9     =====
10
11 BMDS MODEL RUN
12 ~~~~~
13
14     The form of the probability function is:
15
16     P[response] = background + (1-background)*[1-EXP(
17 -beta1*dose^1-beta2*dose^2)]
18
19     The parameter betas are restricted to be positive
20
21
22     Dependent variable = COLUMN2
23     Independent variable = COLUMN1
24
25     Total number of observations = 4
26     Total number of records with missing values = 0
27     Total number of parameters in model = 3
28     Total number of specified parameters = 0
29     Degree of polynomial = 2
30
31
32     Maximum number of iterations = 250
33     Relative Function Convergence has been set to: 1e-008
34     Parameter Convergence has been set to: 1e-008
35
36
37
38             Default Initial Parameter Values
39             Background =      0.0617408
40             Beta(1) =      0.0378355
41             Beta(2) =      0
42
43
44             Asymptotic Correlation Matrix of Parameter Estimates
45
46             ( *** The model parameter(s) -Background -Beta(2)
47             have been estimated at a boundary point, or have been
48 specified by the user,
49             and do not appear in the correlation matrix )
50
51             Beta(1)
52
53     Beta(1)           1
54
55
56
57             Parameter Estimates
58
59     Variable           Estimate           Std. Err.
60     Background           0                NA

```


1 Beta(1) 0.056828 0.0340172
 2 Beta(2) 0 NA
 3
 4 NA - Indicates that this parameter has hit a bound
 5 implied by some inequality constraint and thus
 6 has no standard error.
 7
 8
 9

10 Analysis of Deviance Table

Model	Log(likelihood)	Deviance	Test DF	P-value
Full model	-21.9204			
Fitted model	-22.8416	1.84243	3	0.6057
Reduced model	-27.0337	10.2266	3	0.01674
AIC:	47.6832			

19 Goodness of Fit

Dose	Est._Prob.	Expected	Observed	Size	Chi^2 Res.
i: 1	0.0000	0.000	0	15	0.000
i: 2	1.0000	0.0552	1	15	0.219
i: 3	3.0000	0.1567	4	15	0.832
i: 4	10.0000	0.4335	5	15	-0.408
Chi-square =	2.02	DF = 3		P-value =	0.5679

36 Benchmark Dose Computation

37
 38 Specified effect = 0.1
 39
 40 Risk Type = Extra risk
 41
 42 Confidence level = 0.95
 43
 44 BMD = 1.85403
 45
 46 BMDL = 1.14367
 47

```

1 LUBET_MT_BeP.OUT.txt
2 =====
3     Multistage Model. $Revision: 2.1 $ $Date: 2000/08/21 03:38:21 $
4     Input Data File: C:\DOCUMENTS AND SETTINGS\HCLYNCH\MY DOCUMENTS\PAH
5 RPS\MODELING\LUBET_MT_BAP.(d)
6     Gnuplot Plotting File: C:\DOCUMENTS AND SETTINGS\HCLYNCH\MY
7 DOCUMENTS\PAH RPS\MODELING\LUBET_MT_BAP.plt
8                               Thu Jun 23 16:14:09 2005
9     =====
10
11 BMDS MODEL RUN
12 ~~~~~
13
14     The form of the probability function is:
15
16     P[response] = background + (1-background)*[1-EXP(
17 -beta1*dose^1-beta2*dose^2)]
18
19     The parameter betas are restricted to be positive
20
21
22     Dependent variable = COLUMN2
23     Independent variable = COLUMN1
24
25     Total number of observations = 4
26     Total number of records with missing values = 0
27     Total number of parameters in model = 3
28     Total number of specified parameters = 0
29     Degree of polynomial = 2
30
31
32     Maximum number of iterations = 250
33     Relative Function Convergence has been set to: 1e-008
34     Parameter Convergence has been set to: 1e-008
35
36
37
38             Default Initial Parameter Values
39             Background =           0
40             Beta(1) =  0.000632445
41             Beta(2) =  5.70088e-005
42
43
44             Asymptotic Correlation Matrix of Parameter Estimates
45
46             ( *** The model parameter(s) -Background    -Beta(1)
47             have been estimated at a boundary point, or have been
48 specified by the user,
49             and do not appear in the correlation matrix )
50
51             Beta(2)
52
53     Beta(2)           1
54
55
56
57             Parameter Estimates
58
59             Variable           Estimate           Std. Err.
60     Background           0                   NA

```

1 Beta(1) 0 NA
 2 Beta(2) 6.35618e-005 3.53139e-005
 3
 4 NA - Indicates that this parameter has hit a bound
 5 implied by some inequality constraint and thus
 6 has no standard error.
 7
 8
 9

10 Analysis of Deviance Table

Model	Log(likelihood)	Deviance	Test DF	P-value
Full model	-14.0378			
Fitted model	-14.1501	0.224517	3	0.9735
Reduced model	-23.5605	19.0453	3	0.0002676
AIC:	30.3001			

19 Goodness of Fit

Dose	Est._Prob.	Expected	Observed	Size	Chi^2 Res.

i: 1	0.0000	0.0000	0	15	0.000
i: 2	10.0000	0.0063	0	15	-1.006
i: 3	30.0000	0.0556	1	15	0.211
i: 4	100.0000	0.4704	7	15	-0.015
Chi-square =	0.13	DF = 3	P-value = 0.9878		

36 Benchmark Dose Computation

37
 38 Specified effect = 0.1
 39
 40 Risk Type = Extra risk
 41
 42 Confidence level = 0.95
 43
 44 BMD = 40.7137
 45
 46 BMDL = 18.2541
 47

```

1 MOHAPATRA_MT_BJAC.txt
2 =====
3     Multistage Model. $Revision: 2.1 $ $Date: 2000/08/21 03:38:21 $
4     Input Data File: C:\DOCUMENTS AND SETTINGS\HCLYNCH\MY DOCUMENTS\_PAH
5 RPS\MODELING\MOHAPATRA_MT_BJAC.(d)
6     Gnuplot Plotting File: C:\DOCUMENTS AND SETTINGS\HCLYNCH\MY
7 DOCUMENTS\_PAH RPS\MODELING\MOHAPATRA_MT_BJAC.plt
8                               Thu Feb 08 10:11:06 2007
9     =====
10
11 BMDS MODEL RUN
12 ~~~~~
13
14     The form of the probability function is:
15
16     P[response] = background + (1-background)*[1-EXP(
17 -beta1*dose^1-beta2*dose^2-beta3*dose^3-beta4*dose^4)]
18
19     The parameter betas are restricted to be positive
20
21
22     Dependent variable = COLUMN2
23     Independent variable = COLUMN1
24
25     Total number of observations = 6
26     Total number of records with missing values = 0
27     Total number of parameters in model = 5
28     Total number of specified parameters = 0
29     Degree of polynomial = 4
30
31
32     Maximum number of iterations = 250
33     Relative Function Convergence has been set to: 1e-008
34     Parameter Convergence has been set to: 1e-008
35
36
37
38             Default Initial Parameter Values
39             Background =           0
40             Beta(1) =             0
41             Beta(2) =             0
42             Beta(3) =             0
43             Beta(4) = 6.31048e+018
44
45
46             Asymptotic Correlation Matrix of Parameter Estimates
47
48             ( *** The model parameter(s) -Background -Beta(2) -Beta(3)
49             have been estimated at a boundary point, or have been
50 specified by the user,
51             and do not appear in the correlation matrix )
52
53             Beta(1)      Beta(4)
54
55     Beta(1)             1      -0.73
56
57     Beta(4)            -0.73      1
58
59
60

```

1 Parameter Estimates

2

3 Variable	4 Estimate	5 Std. Err.
6 Background	0	NA
7 Beta(1)	2.44509	0.568863
8 Beta(2)	0	NA
9 Beta(3)	0	NA
10 Beta(4)	0.332129	0.778407

11 NA - Indicates that this parameter has hit a bound
 12 implied by some inequality constraint and thus
 13 has no standard error.

14

15

16 Analysis of Deviance Table

17 Model	18 Log(likelihood)	19 Deviance	20 Test DF	21 P-value
22 Full model	-64.5493			
23 Fitted model	-64.8387	0.578751	4	0.9654
24 Reduced model	-198.931	268.764	5	<.0001

25 AIC: 133.677

26 Goodness of Fit

27 Dose	28 Est._Prob.	29 Expected	30 Observed	31 Size	32 Chi^2 Res.
33 i: 1	0.0000	0.0000	0	48	0.000
34 i: 2	0.0100	1.159	2	48	0.743
35 i: 3	0.0500	5.524	5	48	-0.107
36 i: 4	0.5000	34.155	34	48	-0.016
37 i: 5	1.0000	45.014	45	48	-0.005
38 i: 6	2.0000	47.998	48	48	1.000

39 Chi-square = 0.68 DF = 4 P-value = 0.9532

40

41 Benchmark Dose Computation

42

43 Specified effect = 0.92

44

45 Risk Type = Extra risk

46

47 Confidence level = 0.95

48

49 BMD = 0.930952

50

51 BMDL = 0.766826

52

53

54

55

56

57

```

1 MOHAPATRA_MT_BLAC.txt
2 =====
3 Multistage Model. $Revision: 2.1 $ $Date: 2000/08/21 03:38:21 $
4 Input Data File: C:\DOCUMENTS AND SETTINGS\HCLYNCH\MY DOCUMENTS\_PAH
5 RPS\MODELING\MOHAPATRA_MT_BLAC.(d)
6 Gnuplot Plotting File: C:\DOCUMENTS AND SETTINGS\HCLYNCH\MY
7 DOCUMENTS\_PAH RPS\MODELING\MOHAPATRA_MT_BLAC.plt
8 Thu Feb 08 10:13:14 2007
9 =====
10
11 BMDS MODEL RUN
12 ~~~~~
13
14 The form of the probability function is:
15
16 
$$P[\text{response}] = \text{background} + (1-\text{background}) * [1 - \text{EXP}(-\text{beta1} * \text{dose}^1 - \text{beta2} * \text{dose}^2 - \text{beta3} * \text{dose}^3 - \text{beta4} * \text{dose}^4)]$$

17
18 The parameter betas are restricted to be positive
19
20
21
22 Dependent variable = COLUMN2
23 Independent variable = COLUMN1
24
25 Total number of observations = 6
26 Total number of records with missing values = 0
27 Total number of parameters in model = 5
28 Total number of specified parameters = 0
29 Degree of polynomial = 4
30
31
32 Maximum number of iterations = 250
33 Relative Function Convergence has been set to: 1e-008
34 Parameter Convergence has been set to: 1e-008
35
36
37
38 Default Initial Parameter Values
39 Background = 0.0997842
40 Beta(1) = 0.189801
41 Beta(2) = 0
42 Beta(3) = 0
43 Beta(4) = 0
44
45
46 Asymptotic Correlation Matrix of Parameter Estimates
47
48 ( *** The model parameter(s) -Background -Beta(2) -Beta(3)
49 -Beta(4)
50 have been estimated at a boundary point, or have been
51 specified by the user,
52 and do not appear in the correlation matrix )
53
54 Beta(1)
55
56 Beta(1) 1
57
58
59
60 Parameter Estimates

```

Variable	Estimate	Std. Err.
Background	0	NA
Beta(1)	0.237265	0.0278061
Beta(2)	0	NA
Beta(3)	0	NA
Beta(4)	0	NA

NA - Indicates that this parameter has hit a bound implied by some inequality constraint and thus has no standard error.

Analysis of Deviance Table

Model	Log(likelihood)	Deviance	Test DF	P-value
Full model	-159.727			
Fitted model	-161.509	3.56545	5	0.6135
Reduced model	-243.072	166.691	5	<.0001
AIC:	325.019			

Goodness of Fit

Dose	Est._Prob.	Expected	Observed	Size	Chi^2 Res.
i: 1	0.0000	0.0000	0	60	0.000
i: 2	0.5000	0.1119	6.712	60	0.216
i: 3	1.0000	0.2112	12.673	60	0.133
i: 4	2.5000	0.4474	26.845	60	0.280
i: 5	5.0000	0.6947	41.679	60	0.025
i: 6	10.0000	0.9068	54.406	60	-0.671

Chi-square = 3.91 DF = 5 P-value = 0.5620

Benchmark Dose Computation

Specified effect =	0.83
Risk Type =	Extra risk
Confidence level =	0.95
BMD =	7.46828
BMDL =	6.45083

```

1 MOHAPATRA_MT_BEAC.txt
2 =====
3 Multistage Model. $Revision: 2.1 $ $Date: 2000/08/21 03:38:21 $
4 Input Data File: C:\DOCUMENTS AND SETTINGS\HCLYNCH\MY DOCUMENTS\_PAH
5 RPS\MODELING\MOHAPATRA_MT_BEAC.(d)
6 Gnuplot Plotting File: C:\DOCUMENTS AND SETTINGS\HCLYNCH\MY
7 DOCUMENTS\_PAH RPS\MODELING\MOHAPATRA_MT_BEAC.plt
8 Fri Feb 09 10:49:12 2007
9 =====
10
11 BMDS MODEL RUN
12 ~~~~~
13
14 The form of the probability function is:
15
16 
$$P[\text{response}] = \text{background} + (1-\text{background}) * [1 - \text{EXP}(-\beta_1 * \text{dose}^1 - \beta_2 * \text{dose}^2 - \beta_3 * \text{dose}^3 - \beta_4 * \text{dose}^4)]$$

17
18 The parameter betas are restricted to be positive
19
20
21
22 Dependent variable = COLUMN2
23 Independent variable = COLUMN1
24
25 Total number of observations = 6
26 Total number of records with missing values = 0
27 Total number of parameters in model = 5
28 Total number of specified parameters = 0
29 Degree of polynomial = 4
30
31
32 Maximum number of iterations = 250
33 Relative Function Convergence has been set to: 1e-008
34 Parameter Convergence has been set to: 1e-008
35
36
37
38 Default Initial Parameter Values
39 Background = 0.0946116
40 Beta(1) = 0.082434
41 Beta(2) = 0
42 Beta(3) = 0
43 Beta(4) = 0
44
45
46 Asymptotic Correlation Matrix of Parameter Estimates
47
48 ( *** The model parameter(s) -Beta(2) -Beta(3) -Beta(4)
49 have been estimated at a boundary point, or have been
50 specified by the user,
51 and do not appear in the correlation matrix )
52
53 Background Beta(1)
54
55 Background 1 -0.68
56
57 Beta(1) -0.68 1
58
59
60

```


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Parameter Estimates

Variable	Estimate	Std. Err.
Background	0.0246825	0.106613
Beta(1)	0.109348	0.0321778
Beta(2)	0	NA
Beta(3)	0	NA
Beta(4)	0	NA

NA - Indicates that this parameter has hit a bound implied by some inequality constraint and thus has no standard error.

Analysis of Deviance Table

Model	Log(likelihood)	Deviance	Test DF	P-value
Full model	-101.226			
Fitted model	-104.24	6.02698	4	0.1971
Reduced model	-126.655	50.8576	5	<.0001

AIC: 212.479

Goodness of Fit

Dose	Est._Prob.	Expected	Observed	Size	Chi^2 Res.	
i: 1	0.0000	0.0247	0.889	0	36	-1.025
i: 2	0.5000	0.0766	2.757	4	36	0.488
i: 3	1.0000	0.1257	4.525	6	36	0.373
i: 4	2.5000	0.2580	9.287	13	36	0.539
i: 5	5.0000	0.4355	15.676	15	36	-0.076
i: 6	10.0000	0.6732	24.236	21	36	-0.409

Chi-square = 5.44 DF = 4 P-value = 0.2448

Benchmark Dose Computation

Specified effect =	0.86
Risk Type =	Extra risk
Confidence level =	0.95
BMD =	17.9803
BMDL =	12.7064

```

1  PIENTA_MT_BAA.OUT.txt
2  =====
3      Multistage Model. $Revision: 2.1 $ $Date: 2000/08/21 03:38:21 $
4      Input Data File: C:\DOCUMENTS AND SETTINGS\HCLYNCH\MY DOCUMENTS\PAH
5  RPS\MODELING\PIENTA_MT_BAA.(d)
6      Gnuplot Plotting File: C:\DOCUMENTS AND SETTINGS\HCLYNCH\MY
7  DOCUMENTS\PAH RPS\MODELING\PIENTA_MT_BAA.plt
8
9  =====
10
11  BMDS MODEL RUN
12  ~~~~~
13
14  The form of the probability function is:
15
16  P[response] = background + (1-background)*[1-EXP(
17  -beta1*dose^1-beta2*dose^2-beta3*dose^3-beta4*dose^4)]
18
19  The parameter betas are restricted to be positive
20
21
22  Dependent variable = COLUMN2
23  Independent variable = COLUMN1
24
25  Total number of observations = 6
26  Total number of records with missing values = 0
27  Total number of parameters in model = 5
28  Total number of specified parameters = 0
29  Degree of polynomial = 4
30
31
32  Maximum number of iterations = 250
33  Relative Function Convergence has been set to: 1e-008
34  Parameter Convergence has been set to: 1e-008
35
36
37
38          Default Initial Parameter Values
39          Background = 0.00472474
40          Beta(1) = 0
41          Beta(2) = 0
42          Beta(3) = 2.31177e-005
43          Beta(4) = 0
44
45
46          Asymptotic Correlation Matrix of Parameter Estimates
47
48          ( *** The model parameter(s) -Beta(1) -Beta(2) -Beta(3)
49          have been estimated at a boundary point, or have been
50  specified by the user,
51          and do not appear in the correlation matrix )
52
53          Background      Beta(4)
54
55  Background      1      -0.43
56
57  Beta(4)      -0.43      1
58
59
60

```

1 Parameter Estimates

2

3 Variable	Estimate	Std. Err.
4 Background	0.00480466	0.0290234
5 Beta(1)	0	NA
6 Beta(2)	0	NA
7 Beta(3)	0	NA
8 Beta(4)	2.25394e-006	6.9765e-006

9

10 NA - Indicates that this parameter has hit a bound
 11 implied by some inequality constraint and thus
 12 has no standard error.

13

14

15

16 Analysis of Deviance Table

17 Model	Log(likelihood)	Deviance	Test DF	P-value
18 Full model	-67.8785			
19 Fitted model	-69.9491	4.14115	4	0.3872
20 Reduced model	-74.327	12.8971	5	0.02436

21

22

23 AIC: 143.898

24

25

26 Goodness of Fit

27 Dose	Est._Prob.	Expected	Observed	Size	Chi^2 Res.
28 -----					
29 i: 1					
30 0.0000	0.0048	1.100	0	229	-1.005
31 i: 2					
32 0.1000	0.0048	1.081	1	225	-0.075
33 i: 3					
34 0.5000	0.0048	1.211	2	252	0.655
35 i: 4					
36 1.0000	0.0048	0.928	2	193	1.161
37 i: 5					
38 5.0000	0.0062	1.936	1	312	-0.487
39 i: 6					
40 10.0000	0.0270	6.746	7	250	0.039
41					
42					
43 Chi-square = 3.34		DF = 4		P-value = 0.5028	

44

45

46 Benchmark Dose Computation

47

48 Specified effect = 0.01

49

50 Risk Type = Extra risk

51

52 Confidence level = 0.95

53

54 BMD = 8.17165

55

56 **** WARNING: Completion code = -2. Optimum not found. Trying new starting
 57 point****

58

59 BMDL = 4.47767

60

```

1  PIENTA_MT_BAP.OUT.txt
2  =====
3      Multistage Model. $Revision: 2.1 $ $Date: 2000/08/21 03:38:21 $
4      Input Data File: C:\DOCUMENTS AND SETTINGS\HCLYNCH\MY DOCUMENTS\PAH
5  RPS\MODELING\PIENTA_MT_BAP.(d)
6      Gnuplot Plotting File: C:\DOCUMENTS AND SETTINGS\HCLYNCH\MY
7  DOCUMENTS\PAH RPS\MODELING\PIENTA_MT_BAP.plt
8                                  Mon Jun 27 16:28:28 2005
9  =====
10
11  BMDS MODEL RUN
12  ~~~~~
13
14  The form of the probability function is:
15
16  P[response] = background + (1-background)*[1-EXP(
17  -beta1*dose^1-beta2*dose^2-beta3*dose^3-beta4*dose^4)]
18
19  The parameter betas are restricted to be positive
20
21
22  Dependent variable = COLUMN2
23  Independent variable = COLUMN1
24
25  Total number of observations = 5
26  Total number of records with missing values = 0
27  Total number of parameters in model = 5
28  Total number of specified parameters = 0
29  Degree of polynomial = 4
30
31
32  Maximum number of iterations = 250
33  Relative Function Convergence has been set to: 1e-008
34  Parameter Convergence has been set to: 1e-008
35
36
37
38          Default Initial Parameter Values
39          Background = 0.00129459
40          Beta(1) = 0.00056154
41          Beta(2) = 0
42          Beta(3) = 0
43          Beta(4) = 0
44
45
46          Asymptotic Correlation Matrix of Parameter Estimates
47
48          ( *** The model parameter(s) -Beta(2) -Beta(3) -Beta(4)
49          have been estimated at a boundary point, or have been
50  specified by the user,
51          and do not appear in the correlation matrix )
52
53          Background      Beta(1)
54
55  Background      1      -0.72
56
57  Beta(1)      -0.72      1
58
59
60

```

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59

Parameter Estimates

Variable	Estimate	Std. Err.
Background	0.000529694	0.0310484
Beta(1)	0.000662444	0.00321227
Beta(2)	0	NA
Beta(3)	0	NA
Beta(4)	0	NA

NA - Indicates that this parameter has hit a bound implied by some inequality constraint and thus has no standard error.

Analysis of Deviance Table

Model	Log(likelihood)	Deviance	Test DF	P-value
Full model	-64.5099			
Fitted model	-65.0987	1.17762	3	0.7584
Reduced model	-68.985	8.95024	4	0.06236

AIC: 134.197

Goodness of Fit

Dose	Est._Prob.	Expected	Observed	Size	Chi^2 Res.	
i: 1	0.0000	0.0005	0.267	0	504	-1.001
i: 2	1.0000	0.0012	0.468	1	393	1.137
i: 3	5.0000	0.0038	1.557	2	406	0.286
i: 4	10.0000	0.0071	3.094	3	434	-0.031
i: 5	20.0000	0.0137	5.611	5	410	-0.110

Chi-square = 1.07 DF = 3 P-value = 0.7847

Benchmark Dose Computation

Specified effect = 0.01
Risk Type = Extra risk
Confidence level = 0.95
BMD = 15.1716
BMDL = 8.76437

PIENTA_MT_DBAHA.OUT.txt

=====
Multistage Model. \$Revision: 2.1 \$ \$Date: 2000/08/21 03:38:21 \$
Input Data File: C:\DOCUMENTS AND SETTINGS\HCLYNCH\MY DOCUMENTS\PAH
RPS\MODELING\PIENTA_MT_DBAHA.(d)

1 Gnuplot Plotting File: C:\DOCUMENTS AND SETTINGS\HCLYNCH\MY
2 DOCUMENTS\PAH RPS\MODELING\PIENTA_MT_DBAHA.plt
3 Mon Jun 27 16:35:08 2005

4 =====

5
6 BMDS MODEL RUN

7 ~~~~~

8
9 The form of the probability function is:

10
11 $P[\text{response}] = \text{background} + (1 - \text{background}) * [1 - \text{EXP}(-\text{beta1} * \text{dose}^1 - \text{beta2} * \text{dose}^2)]$

12
13
14 The parameter betas are restricted to be positive

15
16
17 Dependent variable = COLUMN2
18 Independent variable = COLUMN1

19
20 Total number of observations = 4
21 Total number of records with missing values = 0
22 Total number of parameters in model = 3
23 Total number of specified parameters = 0
24 Degree of polynomial = 2

25
26
27 Maximum number of iterations = 250
28 Relative Function Convergence has been set to: 1e-008
29 Parameter Convergence has been set to: 1e-008

30
31
32
33 Default Initial Parameter Values

34 Background = 0.000660992
35 Beta(1) = 0.020798
36 Beta(2) = 0

37
38
39 Asymptotic Correlation Matrix of Parameter Estimates

40
41 (*** The model parameter(s) -Background -Beta(2)
42 have been estimated at a boundary point, or have been
43 specified by the user,
44 and do not appear in the correlation matrix)

45
46 Beta(1)
47
48 Beta(1) 1

49
50
51
52 Parameter Estimates

Variable	Estimate	Std. Err.
Background	0	NA
Beta(1)	0.0227021	0.0618036
Beta(2)	0	NA

53
54
55
56
57
58
59 NA - Indicates that this parameter has hit a bound
60 implied by some inequality constraint and thus

1 has no standard error.
2
3
4

5 Analysis of Deviance Table

6 Model	Log(likelihood)	Deviance	Test DF	P-value
7 Full model	-40.1618			
8 Fitted model	-41.0551	1.78665	3	0.6178
9 Reduced model	-45.7301	11.1367	3	0.01101

11
12 AIC: 84.1102
13
14

15 Goodness of Fit

16 Dose	Est._Prob.	Expected	Observed	Size	Chi^2 Res.
17 -----					
18 i: 1					
19 0.0000	0.0000	0.000	0	229	0.000
20 i: 2					
21 0.1000	0.0023	0.497	0	219	-1.002
22 i: 3					
23 0.5000	0.0113	2.630	4	233	0.527
24 i: 4					
25 1.0000	0.0224	4.871	4	217	-0.183
26					
27					
28 Chi-square =	1.38	DF = 3		P-value =	0.7105
29					

30
31 Benchmark Dose Computation

32 Specified effect = 0.01
33
34 Risk Type = Extra risk
35
36 Confidence level = 0.95
37
38 BMD = 0.442705
39
40 BMDL = 0.260515
41
42
43
44

1 **D.7. IN VITRO DNA DAMAGE**

2 JOHNSEN_DNA_DAM_BJAC.OUT.txt

3 =====
4 Polynomial Model. Revision: 2.2 Date: 9/12/2002
5 Input Data File: C:\DOCUMENTS AND SETTINGS\HCLYNCH\MY DOCUMENTS\PAH
6 RPS\MODELING\JOHNSEN_DNA_DAM_BAP.(d)
7 Gnuplot Plotting File: C:\DOCUMENTS AND SETTINGS\HCLYNCH\MY
8 DOCUMENTS\PAH RPS\MODELING\JOHNSEN_DNA_DAM_BAP.plt
9 Mon Jul 04 21:51:27 2005
10 =====

11
12 BMDS MODEL RUN
13 ~~~~~

14
15 The form of the response function is:

16 $Y[\text{dose}] = \text{beta}_0 + \text{beta}_1 \cdot \text{dose} + \text{beta}_2 \cdot \text{dose}^2 + \dots$

17
18
19
20 Dependent variable = MEAN
21 Independent variable = COLUMN1
22 rho is set to 0
23 Signs of the polynomial coefficients are not restricted
24 A constant variance model is fit

25
26 Total number of dose groups = 3
27 Total number of records with missing values = 0
28 Maximum number of iterations = 250
29 Relative Function Convergence has been set to: 1e-008
30 Parameter Convergence has been set to: 1e-008

31
32
33
34 Default Initial Parameter Values
35 alpha = 5.88667
36 rho = 0 Specified
37 beta_0 = 4.94396
38 beta_1 = 0.150549
39

40
41
42 Parameter Estimates
43
44 95.0% Wald
45 Confidence Interval
46 Variable Estimate Std. Err. Lower Conf. Limit
47 Upper Conf. Limit
48 alpha 4.14606 1.95447 0.315366
49 7.97675
50 beta_0 4.94396 0.875754 3.22751
51 6.6604
52 beta_1 0.150549 0.0503107 0.0519422
53 0.249157
54

55
56 Asymptotic Correlation Matrix of Parameter Estimates

57
58 alpha beta_0 beta_1
59 alpha 1 7.6e-015 1.7e-015


```

1      beta_0      7.6e-015      1      -0.63
2      beta_1      1.7e-015      -0.63      1
3
4

```

5 Table of Data and Estimated Values of Interest

```

6
7      Dose      N      Obs Mean      Obs Std Dev      Est Mean      Est Std Dev      Chi^2
8      Res.
9      -----      ---      -----      -----      -----      -----      -----
10     -
11
12      0      3      4.4      1.3      4.94      2.04      -0.463
13      3      3      6      2.1      5.4      2.04      0.514
14      30      3      9.4      3.4      9.46      2.04      -0.0514
15
16

```

17 Model Descriptions for likelihoods calculated

```

18
19
20
21 Model A1:      Yij = Mu(i) + e(ij)
22               Var{e(ij)} = Sigma^2
23

```

```

24 Model A2:      Yij = Mu(i) + e(ij)
25               Var{e(ij)} = Sigma(i)^2
26

```

```

27 Model R:      Yi = Mu + e(i)
28               Var{e(i)} = Sigma^2
29

```

30 Likelihoods of Interest

```

31
32
33      Model      Log(likelihood)      DF      AIC
34      A1      -10.652512      4      29.305023
35      A2      -9.359638      6      30.719276
36      fitted      -10.899709      2      25.799418
37      R      -14.037484      2      32.074967
38

```

```

39 Test 1: Does response and/or variances differ among dose
40 levels
41 (A2 vs. R)
42 Test 2: Are Variances Homogeneous (A1 vs A2)
43 Test 3: Does the Model for the Mean Fit (A1 vs. fitted)
44

```

45 Tests of Interest

```

46
47      Test      -2*log(Likelihood Ratio)      Test df      p-value
48
49      Test 1      9.35569      4      0.009299
50      Test 2      2.58575      2      0.2745
51      Test 3      0.494395      1      0.482
52

```

```

53 The p-value for Test 1 is less than .05. There appears
54 to be a
55 difference between response and/or variances among the
56 dose levels.
57 It seems appropriate to model the data
58

```

```

59 The p-value for Test 2 is greater than .05. A
60 homogeneous variance

```

1 model appears to be appropriate here
2
3
4 The p-value for Test 3 is greater than .05. The model
5 chosen appears
6 to adequately describe the data
7

8
9
10 Benchmark Dose Computation
11 Specified effect = 7.6
12
13 Risk Type = Point risk
14
15 Confidence level = 0.95
16
17 BMD = 17.6423
18
19
20 BMDL = 9.58925
21

1
2
3

APPENDIX E. CALCULATION OF RPFs

Table E-1. Dermal bioassays: RPF calculations for incidence data

Record no.	Reference	Tumor type(s)	Sex	PAH	Relative potency calculation								
					BMR	BMD	Point estimate extra risk response	Point estimate dose	Dose units	Converted dose	Converted dose units	RPF	Comments
<i>Complete carcinogenicity studies</i>													
600	Habs et al., 1980	Sum of Papilloma, carcinoma, sarcoma	F	BaP	0.1	0.91			pg/animal			1	High dose dropped
			F	BbF	0.1	3.8			pg/animal			0.24	
13640	Cavalieri et al., 1983	Papilloma, adenoma, carcinoma	F	BaP	0.1	5.3			nmol	0.001	mg	1	
			F	CPcdP	0.1	47			nmol	0.011	mg	0.13	
620	Hoffmann and Wynder, 1966	Papillomas	F	BaP	0.1	0.0031			%			1	
			F	DBaeP	0.1	0.0094			%			0.33	Toxicity resulted in significant mortality unrelated to tumor induction.
			F	DBaiP	0.1	0.0042			%			0.74	
			F	DBaeF	0.1	0.0028			%			1.1	
17660	Cavalieri et al., 1977	Papilloma, kerato-acanthoma, carcinoma	F	BaP			0.79	0.396				1	
			F	AA			0.47	0.396	µmol/application	0.109	mg/application	0.55	
<i>Initiation studies</i>													
630	LaVoie et al., 1982	Primarily squamous cell papilloma	F	BaP			0.85	30	µg/animal			1	
			F	BbF			0.8	100	µg/animal			0.28	No model fit. Point estimate using incidence/dose point closest to BaP incidence.
			F	BjF	0.85	209			µg/animal			0.14	High dose dropped
			F	BkF	0.85	1,163			µg/animal			0.03	
18570	Hecht et al., 1974	Unspecified	F	BaP			0.3	0.05	mg/animal			1	

Table E-1. Dermal bioassays: RPF calculations for incidence data

Record no.	Reference	Tumor type(s)	Sex	PAH	Relative potency calculation								
					BMR	BMD	Point estimate extra risk response	Point estimate dose	Dose units	Converted dose	Converted dose units	RPF	Comments
			F	CH			0.58	1	mg/animal			0.10	
21420	Slaga et al., 1980	Papilloma	F	BaP			0.64	200	nmol	0.050	mg	1	
			F	CH			0.71	2,000	nmol	0.457	mg	0.12	Not clear if BaP administered simultaneously. Control groups pooled for analysis.
			F	DBahA			0.45	100	nmol	0.028	mg	1.27	
15640	Raveh et al., 1982	Papilloma	F	BaP	0.1	2.2			µg			1	
			F	CPcdP	0.1	30			µg			0.07	
620	Hoffmann and Wynder, 1966	Papillomas	F	BaP			0.79	0.25	mg/animal			1	
			F	DBaeF			0.57	0.25	mg/animal			0.73	
			F	DBaeP			0.33	0.25	mg/animal			0.41	
			F	DBahP			0.7	0.25	mg/animal			0.90	
			F	DBaiP			0.36	0.25	mg/animal			0.45	
			F	N23eP			0.25	0.25	mg/animal			0.32	
13650	Cavalieri et al., 1981b	Papillomas	F	BaP			0.33	0.2	µmol	0.050	mg	1	
			F	CPcdP			0.23	0.6	µmol	0.136	mg	0.26	Mid dose borderline significant, high dose not, trend not; no model fit; RPF uses mid dose for point estimate.
15700	Rice et al., 1988	Unspecified	F	BaP			0.89	0.1	µmol	0.025	mg	1	
			F	CH			0.89	0.5	µmol	0.114	mg	0.22	No model fit. Point estimate using point closest to BaP incidence.
			F	CPdefC	0.88	0.22			µmol	0.053	mg	0.48	
			F	BbcAC			0.89	2	µmol	0.481	mg	0.05	No model fit. Point estimate using point closest to BaP incidence.
24800	Nesnow et al., 1984	Papilloma	M	BaP			0.67	200	nmol	0.050	mg	1	

Table E-1. Dermal bioassays: RPF calculations for incidence data

Record no.	Reference	Tumor type(s)	Sex	PAH	Relative potency calculation								
					BMR	BMD	Point estimate extra risk response	Point estimate dose	Dose units	Converted dose	Converted dose units	RPF	Comments
			M	BeAC	0.67	393			nmol	0.099	mg	0.51	Three high doses dropped due to plateau
			M	BIAC	0.67	50			nmol	0.013	mg	4.00	Three high doses dropped due to plateau
			F	BaP			0.51	200	nmol	0.050	mg	1	
			F	BeAC	0.51	195			nmol	0.049	mg	1.03	Two high doses dropped to achieve model fit
			F	BIAC	0.51	30			nmol	0.008	mg	6.67	

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Table E-2. Dermal bioassays: RPF calculations for multiplicity data

Record no.	Reference	Tumor type(s)	Sex	PAH	Relative potency calculation						Comments
					Point estimate extra risk response	Point estimate dose	Dose units	Converted dose	Converted dose units	RPF	
<i>Complete carcinogenicity studies</i>											
13640	Cavalieri et al., 1983	Papilloma, adenoma, carcinoma	F	BaP	1.5	20	nmol	0.0050	mg	1	Variance not reported
			F	CPcdP	2.5	200	nmol	0.045	mg	0.18	Variance not reported
13650	Cavalieri et al., 1981b	Primarily squamous cell carcinoma	US	BaP	1.5	0.2	µmol	0.050	mg	1	
			US	CPcdP	0.80	0.2	µmol	0.045	mg	0.59	Variance not reported
<i>Initiation studies</i>											
630	LaVoie et al., 1982	Primarily squamous cell papilloma	F	BaP	4.9	30	µg			1	
			F	BbF	7.1	100	µg			0.43	Variance not reported
			F	BjF	7.2	1,000	µg			0.044	Variance not reported
			F	BkF	2.8	1,000	µg			0.017	Variance not reported
18570	Hecht et al., 1974	Unspecified	F	BaP	0.5	0.05	mg			1	
			F	CH	1.0	1	mg			0.10	
21420	Slaga et al., 1980	Papilloma	F	BaP	2.1	200	nmol	0.050	mg	1	
			F	CH	1.5	2,000	nmol	0.46	mg	0.078	
			F	DBahA	1.3	100	nmol	0.028	mg	1.1	
15640	Raveh et al., 1982	Papilloma	F	BaP	1.1	10	µg			1	Variance not reported
			F	CPcdP	0.7	200	µg			0.032	Variance not reported
13650	Cavalieri et al., 1981	Papillomas	F	BaP	1.1	0.2	µmol	0.050	mg	1	
			F	CPcdP	0.17	0.6	µmol	0.14	mg	0.060	Variance not reported
21410	Slaga et al., 1978	Papillomas	F	BaP	5.2	0.2	µmol	0.050	mg	1	
			F	BaA	1.1	2	µmol	0.46	mg	0.023	
16310	Weyand et al., 1992	Unspecified	US	BaP	4.0	0.01	µmol	0.0025	mg	1	
			US	BjF	4.0	1	µmol	0.252	mg	0.010	Variance not reported
10200	El-Bayoumy et al., 1982	Primarily squamous cell papilloma	F	BaP	7.0	0.05	mg			1	

Table E-2. Dermal bioassays: RPF calculations for multiplicity data

Record no.	Reference	Tumor type(s)	Sex	PAH	Relative potency calculation						Comments
					Point estimate extra risk response	Point estimate dose	Dose units	Converted dose	Converted dose units	RPF	
			F	CH	7.6	1	mg			0.054	
24300	Rice et al., 1985	Unspecified	F	BaP	7.9	0.3	mg			1	
			F	CH	4.9	1	mg			0.18	
			F	CPdefC	5.5	1	mg			0.21	
13660	Cavalieri et al., 1991	Primarily papilloma	F	BaP Expt I	5.2	300	nmol	0.0757	mg	1	16 Wk experiment; variance not reported
			F	DBaP Expt I	6.8	33.3	nmol	0.010	mg	9.7	
13660	Cavalieri et al., 1991	Primarily papilloma	F	BaP Expt II	3.4	100	nmol	0.0252	mg	1	27 Wk experiment; variance not reported
			F	DBaP Expt II	7.0	4	nmol	0.0012	mg	42	
24800	Nesnow et al., 1984	Papillomas	M	BaP	1.4	200	nmol	0.050	mg	1	Variance not reported
			M	BeAC	1.3	250	nmol	0.063	mg	0.74	Variance not reported
			M	BlAC	1.4	50	nmol	0.013	mg	4.0	Variance not reported
			F	BaP	1.5	200	nmol	0.050	mg	1	Variance not reported
			F	BeAC	1.1	250	nmol	0.063	mg	0.58	Variance not reported
			F	BlAC	1.1	50	nmol	0.013	mg	2.9	Variance not reported

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Table E-3. Intraperitoneal bioassays: RPF calculations for incidence data

Record no.	Reference	Target organ	Tumor type(s)	Sex	PAH	Relative potency calculation								
						BMR	BMD	Point estimate extra risk response	Point estimate dose	Dose units	Converted dose	Converted dose units	RPF	Comments
17560	Busby et al., 1989	Lung	Adenoma, adenocarcinoma	F	BaP			0.68	59.5	µg			1	
					FA			0.26	257.6	µg			0.09	
640	LaVoie et al., 1987	Lung	Adenoma	M	BaP			0.82	1.1	µmol/mouse	0.28	mg/mouse	1	
					BjF			0.52	1.1	µmol/mouse	0.28	mg/mouse	0.64	Do not use: use liver or lung RPF below
				F	BaP			0.64	1.1	µmol/mouse	0.28	mg/mouse	1	
					BjF			0.22	1.1	µmol/mouse	0.28	mg/mouse	0.35	Do not use: use liver or lung RPF below
		Liver	Adenoma, hepatoma	M	BaP			0.75	1.1	µmol/mouse	0.28	mg/mouse	1	
					BbF			0.5	0.5	µmol/mouse	0.13	mg/mouse	1.50	Do not use: use liver or lung RPF below
					BjF			0.49	1.1	µmol/mouse	0.28	mg/mouse	0.66	Do not use: use liver or lung RPF below
		Liver or lung	Adenoma, hepatoma	M	BaP			0.75	1.1	µmol/mouse	0.28	mg/mouse	1	
					BbF			0.51	0.5	µmol/mouse	0.13	mg/mouse	1.50	
					BjF			0.8	1.1	µmol/mouse	0.28	mg/mouse	1.10	
				F	BaP			0.64	1.1	µmol/mouse	0.28	mg/mouse	1	
					BjF			0.22	1.1	µmol/mouse	0.28	mg/mouse	0.35	
7510	LaVoie et al., 1994	Lung	Total	M	BaP			0.7	1.1	µmol/mouse	0.28	mg/mouse	1	
					FA	0.7	22			µmol/mouse	4.45	mg/mouse	0.06	Do not use: male liver RPF is higher

Table E-3. Intraperitoneal bioassays: RPF calculations for incidence data

Record no.	Reference	Target organ	Tumor type(s)	Sex	PAH	Relative potency calculation								
						BMR	BMD	Point estimate extra risk response	Point estimate dose	Dose units	Converted dose	Converted dose units	RPF	Comments
				F	BaP			0.83	1.1	µmol/mouse	0.28	mg/mouse	1	
					FA	0.83	17			µmol/mouse	3.44	mg/mouse	0.08	
		Liver	Foci, adenoma, carcinoma	M	BaP			0.81	1.1	µmol	0.28	mg/mouse	1	
					FA	0.81	6.4			µmol	1.29	mg/mouse	0.21	
22510	Wislocki et al., 1986	Liver	Adenoma, carcinoma	M	BaP			0.44	560	nmol	0.14	mg	1	
					CH	0.44	3,339			nmol	0.76	mg	0.19	Using pooled controls
					BaA			0.77	2,800	nmol	0.64	mg	0.39	
		Lung	Unspecified	M	BaP			0.3	560	nmol	0.14	mg	1	
					CH	0.3	5,601			nmol	1.28	mg	0.11	Do not use: male liver RPF is higher. Using pooled controls
				F	BaP			0.46	560	nmol	0.14	mg	1	
					BaA			0.16	2,800	nmol	0.64	mg	0.08	

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Table E-4. Intraperitoneal bioassays: RPF calculations for multiplicity data

Record no.	Reference	Target organ(s)	Tumor type(s)	Sex	PAH	RPF Calculation								
						BMR	BMD	Point estimate extra risk response	Point estimate dose	Dose units	Converted dose	Converted dose units	RPF	Comments
17560	Busby et al., 1989	Lung	Adenoma, adenocarcinoma	F	BaP			1.11	59.5	µg			1	
					FA			0.33	257.6	µg			0.069	
7510	LaVoie et al., 1994	Lung	Total	M	BaP			4.13	1.1	µmol	0.28	mg	1	
					FA			0.95	17.30	µmol	3.50	mg	0.018	Do not use: male liver RPF is higher
				F	BaP			3.40	1.1	µmol	0.28	mg	1	
					FA			2.30	17.30	µmol	3.50	mg	0.054	
		Liver	Foci, adenoma, carcinoma	M	BaP			4.12	1.1	µmol	0.28	mg	1	
					FA			1.45	3.46	µmol	0.700	mg	0.14	
22510	Wislocki et al., 1986	Liver	Adenoma, carcinoma	M	BaP			1.36	560	nmol	0.141	mg	1	
					CH			0.93	2,800	nmol	0.639	mg	0.15	Using pooled controls
					BaA			2.28	2,800	nmol	0.639	mg	0.37	
13610	Busby et al., 1984	Lung	Adenoma, carcinoma	M	BaP			4.28	0.28	mg			1	No model fit
					FA	4.28	9.99			mg			0.028	
				F	BaP			3.56	0.28	mg			1	No model fit
					FA	3.56	32.28			mg			0.0086	
24590	Nesnow et al., 1998b	Lung	NS	M	BaP			3.85	50	mg/kg			1	No model fit
					BbF	3.85	123			mg/kg			0.41	BMR = BaP response
					CPcdP			4.15	50	mg/kg			1.1	No model fit
					DBahA	3.85	3.57			mg/kg			14	BMR = BaP response
					DBalP			3.66	1.5	mg/kg			32	No model fit
11190	Mass et al., 1993	Lung	NS	US	BaP			5.05	100	mg/kg			1	No model fit
					BjAC			59.45	20	mg/kg			59	No model fit

Table E-5. Lung implantation bioassays: RPF calculations (incidence data)

Record no.	Reference	Target organ(s)	Tumor type(s)	PAH	Relative potency calculation						
					BMR	BMD	Point estimate response	Point estimate dose	Dose units	RPF	Comments
17940	Deutsch-Wenzel et al., 1983	Lung	Sum carcinoma + sarcoma	BaP	0.1	0.032			mg	1	
				AA	0.1	0.14			mg	0.24	
				BbF	0.1	0.33			mg	0.10	
				BghiP	0.1	3.5			mg	0.0092	
				BjF	0.1	1.0			mg	0.032	
				BkF	0.1	1.1			mg	0.031	
				IP	0.1	0.44			mg	0.074	
22000	Wenzel-Hartung et al., 1990	Lung	Carcinoma	BaP	0.1	0.033			mg/ animal	1	
				CH	0.1	0.85			mg/ animal	0.038	
				BaP	0.57	0.20			mg/ animal	1	
				DBahA			0.57	0.1	mg/ animal	2.0	Single dose

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Table E-6. In vivo DNA adducts: RPF calculations

Record no.	Reference	Target organ(s)/route	PAH	Relative potency calculation								
				AUC	AUC vs. dose	Point estimate extra risk response	Point estimate dose	Dose units	Converted dose	Converted dose units	RPF	Comments
6210	Arif et al., 1997	Sum of adducts in mammary gland, lung, heart, pancreas, bladder, liver	BaP			325	0.25	µmol/mammary gland	0.063	mg/mammary gland	1	
			DBaP			2,245	0.25	µmol/mammary gland	0.076	mg/mammary gland	5.8	
17630	Cavalieri et al., 1981a	Skin 4-hr	BaP			16	0.2	µmol/animal	0.050	mg/animal	1	Higher of 2 values measured at 4 hrs
			ACEP			2.2	0.2	µmol/animal	0.046	mg/animal	0.15	Higher of 2 values measured at 4 hrs
			CPcdP			8.8	0.2	µmol/animal	0.045	mg/animal	0.61	Higher of 2 values measured at 24 hrs
18810	Hughes and Phillips, 1990	Sum of skin and lung	BaP			9	1	µmol	0.25	mg	1	RPFs based on peaks; digitizing not possible. Peaks reached at different times postdosing.
			DBaeP			cannot determine	1	µmol			NA	
			DBahP			3.2	1	µmol	0.30	mg	0.30	
			DBaiP			0.85	1	µmol	0.30	mg	0.079	
			DBalP			65	1	µmol	0.30	mg	6.0	
11190	Mass et al., 1993	Lung	BaP		470			mg/kg			1	
			BjAC		464			mg/kg			0.99	Ratio of slopes of AUC vs. dose. BjAC plot shows curvature
8010	Nesnow et al., 1993b	Total of lung, liver, and peripheral blood lymphocytes	BaP	52,084			100	mg/kg			1	
			BbF	11,314			100	mg/kg			0.22	Ratio of (sum of AUCs)/dose

Table E-6. In vivo DNA adducts: RPF calculations

Record no.	Reference	Target organ(s)/route	PAH	Relative potency calculation								
				AUC	AUC vs. dose	Point estimate extra risk response	Point estimate dose	Dose units	Converted dose	Converted dose units	RPF	Comments
24590	Nesnow et al., 1998b	Lung	BaP		113			mg/kg			1	Ratio of slopes of AUC vs. dose as reported by authors
			BbF		38			mg/kg			0.33	
			CPcdP		148			mg/kg			1.3	
			DBahA		219			mg/kg			1.9	
			DBaP		1,390			mg/kg			12	
22810	Phillips et al., 1979	Skin	BaP			27	1		0.25	mg/animal	1	Ratio of peak levels. Peaks reached at different times
			DBacA			10	1	µmol/animal	0.28	mg/animal	0.34	
			DBahA			15	1	µmol/animal	0.28	mg/animal	0.50	
24790	Kligerman et al., 2002	Mouse peripheral blood lymphocytes/ intraperitoneal	BaP			4,186	100	mg/kg			1	Ratio of single measure on d 7 postdosing
			BaA			93	100	mg/kg			0.022	
			BbF			516	100	mg/kg			0.12	
			CH			81	100	mg/kg			0.019	
		Mouse peripheral blood lymphocytes/ gavage	BaP			143	100	mg/kg			1	
			BaA			32	100	mg/kg			0.22	
			BbF			39	100	mg/kg			0.27	
			CH			37	100	mg/kg			0.26	
		Rat peripheral blood lymphocytes/ intraperitoneal	BaP			755	100	mg/kg			1	
			BaA			38	100	mg/kg			0.05	
			BbF			63	100	mg/kg			0.083	
			CH			24	100	mg/kg			0.032	
		Rat peripheral blood lymphocytes/ gavage	BaP			177	100	mg/kg			1	
			BaA			20	100	mg/kg			0.11	
			BbF			17	100	mg/kg			0.1	
			CH			10	100	mg/kg			0.056	

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Table E-7. In vivo clastogenicity or sister chromatid exchange: RPF calculation

Record no.	Reference	Route	Endpoint	Data type: quantal or continuous	PAH	Relative potency calculation						Comments
						BMR	BMD	Point estimate extra risk response	Point estimate dose	Dose units	RPF	
24740	Allen et al., 1999	Intraperitoneal	Micronucleated polychromatic erythrocytes in bone marrow (A/J mouse)	Q	BaP			0.0086	200	mg/kg	1	
					DBaP			0.0013	1.5	mg/kg	20	Model won't predict BaP BMR. RPF based on peak
		Intraperitoneal	Micronucleated polychromatic erythrocytes in peripheral blood (A/J mouse)	Q	BaP			0.0067	200	mg/kg	1	
					DBaP			0.0015	6	mg/kg	7.5	Model won't predict BaP BMR. RPF based on peak
		Intraperitoneal	Micronucleated polychromatic erythrocytes in bone marrow (p53 wt mouse)	Q	BaP			0.0019	200	mg/kg	1	
					DBaP			0.0042	12	mg/kg	37	Model won't predict BaP BMR. RPF based on peak
		Intraperitoneal	Micronucleated polychromatic erythrocytes in peripheral blood (p53 wt mouse)	Q	BaP			0.0022	200	mg/kg	1	
					DBaP			0.0011	18	mg/kg	5.6	BMD doesn't reflect selected BMR. RPF based on peak.
14270	He and Baker, 1991	Dermal	micronuclei	Q	BaP			0.064	50	µg/animal	1	No model fit. RPF based on peak.
					CH			0.05	500	µg/animal	0.078	No model fit. RPF based on peak.

Table E-7. In vivo clastogenicity or sister chromatid exchange: RPF calculation

Record no.	Reference	Route	Endpoint	Data type: quantal or continuous	PAH	Relative potency calculation						Comments
						BMR	BMD	Point estimate extra risk response	Point estimate dose	Dose units	RPF	
17190	Bayer, 1978	Intraperitoneal	Sister chromatid exchanges	C	BaP			4.2	100	mg/kg	1	No model fit. RPF based on peak.
					PH			0.9	100	mg/kg	0.21	No model fit. RPF based on peak.
20950	Roszinsky-Kocher et al., 1979	Intraperitoneal	Sister chromatid exchanges	C	BaP			6.7	900	mg/kg	1	
					DBahA			1	900	mg/kg	0.15	
					CH			1.2	900	mg/kg	0.18	
					PH			1.6	900	mg/kg	0.24	
					BeP			1.6	900	mg/kg	0.24	
					BbF			1.7	900	mg/kg	0.25	
					BaA			2.2	900	mg/kg	0.33	
24720	Kligerman et al., 1986	Gavage	Sister chromatid exchanges	C	BaP			8	63	mg/kg	1	No SD for control
					BlAC			16	126	mg/kg	1.1	No SD for control; RPF based on lowest dose approaching peak
24790	Kligerman et al., 2002	Intraperitoneal	Sister chromatid exchanges	C	BaP			12.42	100	mg/kg	1	
					BaA			6.01	100	mg/kg	0.48	
					BbF			13.46	100	mg/kg	1.1	
					CH			3.17	100	mg/kg	0.26	
		Gavage	Sister chromatid exchanges	C	BaP			6.79	100	mg/kg	1	
					BaA			2.26	100	mg/kg	0.33	
		Gavage	Micronuclei	Q	BaP			0.0025	100	mg/kg	1	
					BbF			0.0017	100	mg/kg	0.68	

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Table E-8. In vitro bacterial mutagenicity: RPF calculations

Record no.	Reference	PAH	Data type: quantal or continuous	Relative potency calculation									
				BMR	BMD	Slope	Point estimate extra risk response	Point estimate dose	Dose units	Converted dose	Converted dose units	RPF	Comments
17030	Andrews et al., 1978	BaP	C				1,531	250	µg			1	
		DBacA	C				2,807	10	µg			46	
		DBajA	C				693	10	µg			11	
		DBahA	C				467	25	µg			3	
		AA	C				1,645	250	µg			1.1	
		BghiP	C				642	100	µg			1	
		BeP	C				492	1,000	µg			0.08	
23830	Baker et al., 1980	BaP	C				1,144	2.5	µg/plate			1	
		DBaiP	C				603	5	µg/plate			0.26	
		BaA	C				813	10	µg/plate			0.18	
		DBacA	C				1,604	2.5	µg/plate			1.4	
		DBahA	C				1,197	5	µg/plate			0.52	
23660	Bartsch et al., 1980	BaP	C				29,000	0.027	µmol/plate	0.007	mg/plate	1	
		BaA	C				6,000	0.067	µmol/plate	0.015	mg/plate	0.092	
17380	Bos et al., 1988	BaP	C				739	7.5	µg/plate			1	RPF based on peak response. BaP response well above range for other data sets; model fit required dropping high doses but not appropriate given BMR target.
		PH	C				155	25	µg/plate			0.063	
		Pyr	C				193	25	µg/plate			0.078	
17590	Carver et al., 1986	BaP	C				895	50	µg/plate			1	Continuous data, no SD; RPF based on peak or lowest dose approaching peak
		BaA	C				1,123	50	µg/plate			1.3	
		BghiF	C				845	50	µg/plate			0.94	
		Pery	C				853	10	µg/plate			4.8	
17630	Cavalieri et al., 1981a	BaP	Q				0.00126	60	µM	15.1	mg/L	1	RPF based on peak; no model fit
		CPcdP	Q				0.0013	40	µM	9.1	mg/L	1.7	RPF based on peak; no model fit

Table E-8. In vitro bacterial mutagenicity: RPF calculations

Record no.	Reference	PAH	Data type: quantal or continuous	Relative potency calculation									Comments
				BMR	BMD	Slope	Point estimate extra risk response	Point estimate dose	Dose units	Converted dose	Converted dose units	RPF	
		ACEP	Q				0.0005	120	µM	27.4	mg/L	0.22	RPF based on peak; BMD doesn't coincide with selected BMR.
9620	Chang et al., 2002	BaP	C				2,217	5	µg/plate			1	Continuous data, no SD; RPF based on peak or lowest dose approaching peak
		BghiF	C				1,304	5	µg/plate			0.59	
		BcPH	C				717	10	µg/plate			0.16	
24030	De Flora et al., 1984	BaP	NA			185			revertants/nmol	733,196	revertants/mg	1	RPFs based on potency estimates as reported by authors
		BaA	NA			12			revertants/nmol	52,565	revertants/mg	0.072	
		BeP				1.6			revertants/nmol	6,341	revertants/mg	0.009	
		Pery	NA			21			revertants/nmol	83,229	revertants/mg	0.11	
18050	Eisenstadt and Gold, 1978	BaP	C				1,705	2	µg			1	Uses S9 level with max BaP response; CPcdP max at much lower S9
		CPcdP	C				134	1	µg			0.16	
18180	Florin et al., 1980	BaP	C				255	0.003	µmol/plate	0.001	mg/plate	1	TA100
		BaA	C				326	0.1	µmol/plate	0.023	mg/plate	0.042	
		CH	C				196	0.005	µmol/plate	0.001	mg/plate	0.51	
		BaP	C				235	0.003	µmol/plate	0.001	mg/plate	1	TA 98
		CO	C				82	0.07	µmol/plate	0.021	mg/plate	0.013	
		Pery	C				91	0.025	µmol/plate	0.006	mg/plate	0.046	
24080	Gibson et al., 1978	BaP	C				35	300	µg/plate			1	Continuous data, no SD; RPF based on peak or lowest dose approaching peak. Metabolic activation by gamma radiation.
		BaA	C				6.4	250	µg/plate			0.22	
		BghiP	C				4.2	400	µg/plate			0.090	
		CH	C				6.1	500	µg/plate			0.1	Lowest dose approaching peak
		FE	C				2.2	360	µg/plate			0.052	

Table E-8. In vitro bacterial mutagenicity: RPF calculations

Record no.	Reference	PAH	Data type: quantal or continuous	Relative potency calculation									RPF	Comments
				BMR	BMD	Slope	Point estimate extra risk response	Point estimate dose	Dose units	Converted dose	Converted dose units			
		Pyr	C				28	160	µg/plate			1.5		
14080	Gold and Eisenstadt, 1980	BaP	C				1,103	4	nmol	0.001	mg	1		
		CPcdP	C				281	4	nmol	0.001	mg	0.28		
18650	Hermann, 1981	BaP	NA			100			revertants/nmol	396,322	revertants/mg	1	RPFs based on potency estimates as reported by authors	
		AA	NA			62			revertants/nmol	224,394	revertants/mg	0.57		
		BaA	NA			4			revertants/nmol	17,522	revertants/mg	0.044		
		BbA	NA			8			revertants/nmol	35,043	revertants/mg	0.088		
		BbF	NA			15			revertants/nmol	59,448	revertants/mg	0.15		
		BeP	NA			15			revertants/nmol	59,449	revertants/mg	0.15		
		CH	NA			2			revertants/nmol	8,761	revertants/mg	0.022		
		CO	NA			60			revertants/nmol	199,761	revertants/mg	0.50		
		DBacA	NA			42			revertants/nmol	150,888	revertants/mg	0.38		
		DBahA	NA			8			revertants/nmol	28,743	revertants/mg	0.073		
		DBaiP	NA			38			revertants/nmol	125,661	revertants/mg	0.32		
		DBalP	NA			21			revertants/nmol	69,451	revertants/mg	0.18		
		FA	NA			3			revertants/nmol	14,832	revertants/mg	0.037		
		Pery	NA			31			revertants/nmol	122,862	revertants/mg	0.31		
		Tphen	NA			13			revertants/nmol	56,944	revertants/mg	0.14		
10670	Johnsen et al., 1997	BaP	C				128	10	µg/plate			1		
		BjAC	C				192	10	µg/plate			1.5	RPF based on peak; no model fit	
		BIAC	C				204	10	µg/plate			1.6	RPF based on peak; no model fit	
19000	Kaden et al., 1979	BaP	NA									1	RPFs as reported by authors	
		AA	NA									0.08		
		AN	NA									0.01		
		ANL	NA									0.07		
		BaA	NA									0.14		
		BbFE	NA									0.08		
		BeP	NA									0.11		
		BghiP	NA									0.08		
		CH	NA									0.2		

Table E-8. In vitro bacterial mutagenicity: RPF calculations

Record no.	Reference	PAH	Data type: quantal or continuous	Relative potency calculation									RPF	Comments
				BMR	BMD	Slope	Point estimate extra risk response	Point estimate dose	Dose units	Converted dose	Converted dose units			
		CPcdP	NA										1.5	
		DBacA	NA										0.77	
		DBahA	NA										0.08	
		DBbeF	NA										0.88	
		FA	NA										1	
		Pery	NA										6	
		Pyr	NA										0.07	
		Tphen	NA										0.07	
24680	Lafleur et al., 1993	BaP	Q				0.00026	8	µg/mL				1	RPF based on peak; BMD doesn't coincide with selected BMR.
		BghiF	Q				0.00044	10	µg/mL				1.4	
		CPcdP	Q				0.00048	8	µg/mL				1.9	
		CPhiACEA	Q				0.00059	4	µg/mL				4.6	
		CPhiAPA	Q				0.00017	100	µg/mL				0.05	
		ACEA	Q				0.00059	35	µg/mL				0.53	
		APA	Q				0.00026	30	µg/mL				0.27	
19320	LaVoie et al., 1979	BaP	C				480	20	µg				1	Continuous data, no SD; RPF based on peak or lowest dose approaching peak
		BeP	C				20	10	µg				0.08	
		Pery	C				70	20	µg				0.15	
23650	McCann et al., 1975	BaP	NA			121			revertants/nmol	479,550	revertants/mg		1	RPFs based on potency estimates as reported by authors; authors caution that dose-response nonlinear
		BaA	NA			11			revertants/nmol	48,184	revertants/mg		0.10	
		BeP	NA			0.6			revertants/nmol	2,378	revertants/mg		0.005	
		CH	NA			38			revertants/nmol	166,455	revertants/mg		0.35	
		DBacA	NA			175			revertants/nmol	628,698	revertants/mg		1.3	
		DBahA	NA			11			revertants/nmol	39,521	revertants/mg		0.082	
		DBaiP	NA			20			revertants/nmol	66,138	revertants/mg		0.14	
20220	Pahlman and Pelkonen, 1987	BaP	NA			272			revertants/mg	1,077,996	revertants/mg		1	RPFs based on potency estimates as reported by authors
		BaA	NA			10			revertants/mg	43,804	revertants/mg		0.041	

Table E-8. In vitro bacterial mutagenicity: RPF calculations

Record no.	Reference	PAH	Data type: quantal or continuous	Relative potency calculation									Comments
				BMR	BMD	Slope	Point estimate extra risk response	Point estimate dose	Dose units	Converted dose	Converted dose units	RPF	
		CH	NA			9.7			revertants/mg	42,490	revertants/mg	0.039	
		DBaCA	NA			35			revertants/mg	125,740	revertants/mg	0.12	
		DBaHA	NA			4			revertants/mg	14,371	revertants/mg	0.013	
		Tphen	NA			4			revertants/mg	17,521	revertants/mg	0.016	
20450	Phillipson and Ioannides, 1989	BaP	C				119	10	µg/plate			1	No SD; RPFs based on peak or lowest dose approaching peak
		BaA	C				110	20	µg/plate			0.46	
		DBaIP	C				65	20	µg/plate			0.27	
		DBaHA	C				51	10	µg/plate			0.43	
21000	Sakai et al., 1985	BaP	C				1,565	10	µg			1	No SD; RPFs based on peak or lowest dose approaching peak
		FE	C				65	5	µg			0.083	
		AC	C				320	10	µg			0.2	
		PH	C				345	10	µg			0.22	
		FA	C				835	10	µg			0.53	
		CH	C				638	10	µg			0.41	
		Pyr	C				2,400	10	µg			1.5	
		BeP	C				923	10	µg			0.59	
		Pery	C				2,607	4	µg			4.2	
		BghiP	C				814	20	µg			0.26	
		CO	C				223	10	µg			0.14	
11860	Sangaiah et al., 1983	BaP	C				384	6	µg/plate			1	No SD; RPFs based on peak or lowest dose approaching peak
		BjAC	C				940	10	µg/plate			1.4	
21360	Simmon, 1979a	BaP	C				1,141	5	µg			1	
		BaA	C				280	50	µg			0.025	
		BeP	C				57	50	µg			0.005	
21640	Teranishi et al., 1975	BaP	C				39	50	µg/plate			1	
		DBaIP	C				64	50	µg/plate			1.6	
		BaP	C				254	50	µg/plate			1	
		DBaEP	C				63	50	µg/plate			0.25	

Table E-8. In vitro bacterial mutagenicity: RPF calculations

Record no.	Reference	PAH	Data type: quantal or continuous	Relative potency calculation									Comments
				BMR	BMD	Slope	Point estimate extra risk response	Point estimate dose	Dose units	Converted dose	Converted dose units	RPF	
16180	Utesch et al., 1987	BaP	C				839	6	µg/plate			1	No SD; RPF based on peak or lowest dose approaching peak
		BaA	C				3,347	25	µg/plate			1	
16440	Wood et al., 1980	BaP	C				99	15	µg/plate			1	No SD; RPF based on peak or lowest dose approaching peak
		CPcdP	C				685	15	µg/plate			6.9	

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Table E-9. In vitro mammalian mutagenicity: RPF calculations

Record no.	Reference	PAH	Relative potency calculation								
			BMR	BMD	Point estimate extra risk response	Point estimate dose	Dose units	Converted dose	Converted dose units	RPF	Comments
16920	Amacher and Paillet, 1982	BaP			0.00023	10	µg/mL			1	No model fit. RPF based on peak
		BaA			0.000068	10	µg/mL			0.3	No model fit. RPF based on peak
16940	Amacher and Turner, 1980	BaP			0.00025	1.25×10^{-5}	M	3.15	mg/L	1	Control w/o S9 treatment
		BaA			0.00027	3.22×10^{-5}	M	7.35	mg/L	0.46	
16910	Amacher et al., 1980	BaP			0.00033	3.96×10^{-5}	M	9.99	mg/L	1	No model fit. RPF based on peak
		BaA			0.00007	4.3×10^{-5}	M	9.82	mg/L	0.22	BMD doesn't coincide with selected BMR; RPF based on peak
17140	Barfknecht et al., 1982	BaP	0.00001	1.8			µM	0.45	mg/L	1	
		BaA	0.00001	23			µM	5.25	mg/L	0.09	
		CH	0.00001	16			µM	3.65	mg/L	0.12	
		CPcdP			0.0000083	23	µM	5.20	mg/L	0.07	BMD doesn't coincide with selected BMR; RPF based on response closest to BMR of 0.00001
		FA	0.00001	3.9			µM	0.79	mg/L	0.58	
		Tphen	0.00001	54			µM	12.33	mg/L	0.04	
24670	Durant et al., 1999	BaP			0.00017	1,000	ng/mL			1	RPF based on peak response. Single dose BaP response at upper end or above data range for most other data sets; model fit required dropping high doses but not appropriate given BMR target at BaP response level
		BaPery			0.00018	100	ng/mL			11	
		BbPery			0.000036	100	ng/mL			2.2	
		DBaeF			0.00017	100	ng/mL			10	
		DBaFF			0.00017	1,000	ng/mL			1	
		DBahP			0.000061	100	ng/mL			3.7	

Table E-9. In vitro mammalian mutagenicity: RPF calculations

Record no.	Reference	PAH	Relative potency calculation								
			BMR	BMD	Point estimate extra risk response	Point estimate dose	Dose units	Converted dose	Converted dose units	RPF	Comments
		DBaiP			0.00013	100	ng/mL			7.8	
		DBelP			0.000034	1,000	ng/mL			0.21	
		N23aP			0.000073	100	ng/mL			4.4	
		N23eP			0.000079	1,000	ng/mL			0.48	
14250	Hass et al., 1982	BaP			0.00026	0.3	µg/mL			1	No model fit. Response at low dose (approaching peak)
		DBaiP			0.0012	0.3	µg/mL			4.6	No model fit. RPF based on peak
		DBahP			0.00066	0.3	µg/mL			2.5	No model fit. RPF based on peak
18740	Huberman and Sachs, 1976	BaP			0.0042	1	µg/mL			1	
		DBacA			0.00016	1	µg/mL			0.04	
		DBahA			0.00011	1	µg/mL			0.03	
18990	Jotz and Mitchell, 1981	BaP			0.00014	4.5	µg/mL			1	With metabolic activation
		Pyr			0.000034	11	µg/mL			0.1	With metabolic activation
24720	Kligerman et al., 1986	BaP			0.00047	4	nmol/mL	0.001	mg/mL	1	No model fit. RPF based on peak
		BIAC			0.00028	5	nmol/mL	0.0013	mg/mL	0.48	No model fit. RPF based on peak
19180	Krahn and Heidelberger, 1977	BaP			0.00012	15.9	nmol/mL	0.004	mg/mL	1	3-MC S9; 40% survival
		BaA			0.00005	46.5	nmol/mL	0.011	mg/mL	0.16	3-MC S9; 40% survival
24680	Lafleur et al., 1993	BaP			0.000024	0.2	µg/mL			1	No model fit.
		ACEA			0.000013	3	µg/mL			0.037	No model fit.
		CPcdP			0.000015	2	µg/mL			0.061	No model fit.
		CPhiACEA			0.000022	0.3	µg/mL			0.62	No model fit.
7550	Li and Lin, 1996	BaP			0.00003	10	ng/mL			1	
		BaA			0.000036	10	ng/mL			1.2	
11450	Nesnow et al., 1984	BaP			0.00019	5	µg/mL			1	

Table E-9. In vitro mammalian mutagenicity: RPF calculations

Record no.	Reference	PAH	Relative potency calculation								
			BMR	BMD	Point estimate extra risk response	Point estimate dose	Dose units	Converted dose	Converted dose units	RPF	Comments
		BeAC			0.00042	5	µg/mL			2.2	No model fit; RPF based on lowest dose approaching peak
		BjAC			0.00025	5	µg/mL			1.3	No model fit; RPF based on lowest dose approaching peak
		BIAC			0.00044	2.5	µg/mL			4.6	No model fit; RPF based on lowest dose approaching peak
15630	Raveh and Huberman, 1983	BaP	0.0001	0.11			µg/mL			1	
		CPcdP	0.0001	0.58			µg/mL			0.18	Uses QL; MS didn't converge
15640	Raveh et al., 1982	BaP	0.00001	0.16			µg/mL			1	Uses QL, hi dose dropped; MS didn't fit
		CPcdP	0.00001	1.1			µg/mL			0.14	Uses QL; MS didn't converge
21410	Slaga et al., 1978	BaP	0.0001	0.048			µM	0.012	mg/L	1	
		BaA	0.0001	32			µM	7.3	mg/L	0.001658	
16190	Vaca et al., 1992	BaP			0.00027	10	µM	2.5	mg/L	1	BMD doesn't coincide with selected BMR; RPF based on peak
		FA			0.00021	10	µM	2.02	mg/L	0.97	BMD doesn't coincide with selected BMR; RPF based on peak
21900	Wangenheim and Bolcsfoldi, 1988	BaP			0.0008	0.00001	mol/L	2.5	mg/L	1	BMD doesn't coincide with selected BMR; RPF based on peak
		FE			0.000086	0.00012	mol/L	19.9	mg/L	0.014	BMD doesn't coincide with selected BMR; RPF based on peak
		Pyr			0.00053	0.00003	mol/L	6.1	mg/L	0.28	BMD doesn't coincide with selected BMR; RPF based on peak

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Table E-10. In vitro morphological/malignant transformation: RPF calculation

Record no.	Reference	PAH	Data type: quantal or continuous	Relative potency calculation										
				BMR	BMD	Point estimate extra risk response	Point estimate dose	Slope of dose response curve	Dose units	Converted dose	Converted dose units	RPF	Comments	
17610	Casto, 1979	BaP	Q	0.00001	0.1					µg/mL			1	
		DBahA	Q	0.00001	2.5					µg/mL			0.042	
17970	DiPaolo et al., 1969	BaP	Q			0.058	10			µg/mL			1	
		DBahA	Q			0.031	10			µg/mL			0.54	
		BaA	Q			0.011	10			µg/mL			0.18	
		BeP	Q			0.0058	10			µg/mL			0.1	
		DBacA	Q			0.011	10			µg/mL			0.19	
18080	Emura et al., 1980	BaP Expt I	Q	0.001	0.044					µg/mL			1	
		BbF	Q	0.001	0.75					µg/mL			0.059	
		BaA	Q	0.001	0.85					µg/mL			0.052	
		BaP Expt II	Q	0.001	0.046					µg/mL			1	
		IP	Q	0.001	0.82					µg/mL			0.056	
14130	Greb et al., 1980	BaP	NA					277		%/mmol	1.10	%/mg	1	Relative transformation potencies reported. RPFs are ratio of potencies.
		BaA	NA					13.9		%/mmol	0.061	%/mg	0.055	
		BbF	NA					11.5		%/mmol	0.046	%/mg	0.042	
		BeP	NA					3.1		%/mmol	0.012	%/mg	0.011	
		CH	NA					37		%/mmol	0.16	%/mg	0.15	
		DBahA	NA					0.3		%/mmol	0.001	%/mg	0.000982	
14640	Krolewski et al., 1986	BaP	Q			0.0055	5			µM	1.3	mg/L	1	
		CPcdP	Q			0.0017	5			µM	1.1	mg/L	0.34	
14700	Laaksonen et al., 1983	BaP	Q			0.000009	10			µM	2.5	mg/L	1	RPF based on peak. Inverse dose-response relationship possibly due to cytotoxicity.

Table E-10. In vitro morphological/malignant transformation: RPF calculation

Record no.	Reference	PAH	Data type: quantal or continuous	Relative potency calculation									
				BMR	BMD	Point estimate extra risk response	Point estimate dose	Slope of dose response curve	Dose units	Converted dose	Converted dose units	RPF	Comments
		BaA	Q			0.000018	11		μM	2.5	mg/L	2.0	RPF based on peak. Inverse dose-response relationship possibly due to cytotoxicity.
14850	Lubet et al., 1983	BaP	Q	0.1	1.9				μg/mL			1	
		BeP	Q	0.1	41				μg/mL			0.046	
24710	Mohapatra et al., 1987	BaP				0.92	1		μg/mL			1	
		BjAC	Q	0.92	0.93				μg/mL			1.1	
		BaP				0.83	1		μg/mL			1	
		BIAC	Q	0.83	7.5				μg/mL			0.13	
		BaP				0.86	1		μg/mL			1	
		BeAC	Q	0.86	18				μg/mL			0.056	
24700	Nesnow et al., 1990	BaP	C			47	10		μg/mL			1	
		BIAC	C			120	10		μg/mL			2.5	Based on peak response; no SD for control
7980	Nesnow et al., 1997	BaP	C			2.5	4		μM	1.01	mg/L	1	
		DBaP	C			1.7	0.33		μM	0.10	mg/L	6.9	Based on peak response; no SD for control
7990	Nesnow et al., 1994	BaP	C			0.94	1		μg/mL			1	
		DBaH	C			0.37	1		μg/mL			0.39	Based on peak response; no continuous linear model fit
8000	Nesnow et al., 1993a	BaP	C			1.4	3		μg/mL			1	
		DBkmnoAPH	C			1.1	5		μg/mL			0.47	Based on peak response; no SD for control
23720	Pienta et al., 1977	BaP	Q	0.01	15				μg/mL			1	High dose dropped

Table E-10. In vitro morphological/malignant transformation: RPF calculation

Record no.	Reference	PAH	Data type: quantal or continuous	Relative potency calculation									
				BMR	BMD	Point estimate extra risk response	Point estimate dose	Slope of dose response curve	Dose units	Converted dose	Converted dose units	RPF	Comments
		BaA	Q	0.01	8.2				µg/mL			1.9	Caution: changing slope in region of BMR
		DBahA	Q	0.01	0.4				µg/mL			34	Two highest doses dropped

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Table E-11. In vitro DNA adducts: RPF calculations^a

Record no.	Reference	PAH	Relative potency calculation						
			Point estimate extra risk response	Point estimate dose	Dose units	Converted dose	Converted dose units	RPF	Comments
16890	Allen and Coombs, 1980	BaP	7.5	0.24	µg/mL			1	Nuclear DNA
		BaA	0.44	0.64	µg/mL			0.021	
		BaP	413	0.24	µg/mL			1	Mitochondrial DNA
		BaA	104	0.64	µg/mL			0.092	
6300	Binkova et al., 2000	BaP	258	1	µM	0.25	mg/L	1	
		DBalP	2,317	0.1	µM	0.03	mg/L	75	
9510	Bryla and Weyand, 1992	BaP	5.5	600	nmol	0.15	mg	1	Light conditions
		BaA	1	600	nmol	0.14	mg	0.20	
		DBacA	1.8	600	nmol	0.17	mg	0.30	
22800	Grover and Sims, 1968	BaP	1.4	5	µg			1	
		DBahA	0.44	5	µg			0.31	
		DBacA	0.56	5	µg			0.40	
		BaA	0.7	5	µg			0.50	
		Pyr	0.31	5	µg			0.22	
		PH	0.05	5	µg			0.040	
10670	Johnsen et al., 1997	BaP	0.05	30	µg/mL			1	Clara cells
		BjAC	0.15	30	µg/mL			3	
		BlAC	0.24	30	µg/mL			4.8	
		BaP	0.02	30	µg/mL			1	Type 2 cells
		BjAC	0.06	30	µg/mL			3	
		BlAC	0.03	30	µg/mL			1.5	
10660	Johnsen et al., 1998	BaP	0.33	30	µg/mL			1	Human lymphocytes
		BjAC	0.11	30	µg/mL			0.33	
		BlAC	1.1	30	µg/mL			3.3	
		BaP	0.24	30	µg/mL			1	HL-60 cells
		BjAC	0.15	30	µg/mL			0.62	
		BlAC	0.94	30	µg/mL			3.9	
7870	Melendez-Colon et al., 2000	BaP	34	2	µM	0.50	mg/L	1	
		DBalP	348	2	µM	0.60	mg/L	8.5	
21200	Segeberback and Vodicka, 1993	BaP	15	100	mM	25,232	mg/L	1	
		BaA	30	100	mM	22,829	mg/L	2.2	
		BbF	3.7	100	mM	25,232	mg/L	0.25	
		BghiP	0.5	100	mM	27,634	mg/L	0.03	
		CH	50	100	mM	22,829	mg/L	3.7	
		DBahA	2.8	100	mM	27,833	mg/L	0.17	

Table E-11. In vitro DNA adducts: RPF calculations^a

Record no.	Reference	PAH	Relative potency calculation						
			Point estimate extra risk response	Point estimate dose	Dose units	Converted dose	Converted dose units	RPF	Comments
		FA	1.5	100	mM	20,226	mg/L	0.12	
		Pyr	0.14	100	mM	20,226	mg/L	0.012	

^aAll RPFs are point estimates based on peak response as adequate model fit was not achieved for any multi-dose dataset.

No control data were available for any of these studies.

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Table E-12. In vitro DNA damage: RPF calculations

Record no.	Reference	PAH	Relative potency calculation									
			BMR	BMD	Point estimate extra risk response	Point estimate dose	Slope of dose response curve	Dose units	Converted dose	Converted dose units	RPF	Comments
16840	Agrelo and Amos, 1981	BaP			2,093	10		µg/mL			1	Control responses for BaP and Pyr differ by 10x.
		Pyr			548	100		µg/mL			0.026	RPF based on peak; continuous data without SD
23790	Ichinotsubo et al., 1977	BaP			6	70		µg/well			1	
		DBaiP			10	600		µg/well			0.19	
		DBahA			10	25		µg/well			4.7	
10660	Johnsen et al., 1998	BaP			7.9	3		µg/mL			1	Human lymphocytes. No model fit. Lowest response point estimate
		BjAC	7.6	18				µg/mL			0.16	Human lymphocytes. BMR is BaP point estimate response
		BIAC			4.9	30		µg/mL			0.062	Human lymphocytes. No model fit. Response point estimate closest to BaP response.
		BaP			5.4	30		µg/mL			1	HL-60 cells
		BjAC			1.8	30		µg/mL			0.33	HL-60 cells
		BIAC			3.8	30		µg/mL			0.7	HL-60 cells
19740	Martin et al., 1978	BaP			210	1×10^{-5}		M	2.5	mg/L	1	Increase over background
		BaA			59	1×10^{-7}		M	0.023	mg/L	31	
		BeP			256	1×10^{-6}		M	0.25	mg/L	12	
		DBacA			97	1×10^{-5}		M	2.8	mg/L	0.42	
		DBahA			96	1×10^{-5}		M	2.8	mg/L	0.41	
19830	Mersch-Sunderman et al., 1992	BaP					0.61	µg/assay			1	SOSIP - slope of SOS induction dose-response curve as reported
		AA					0.14	µg/assay			0.23	
		BaA					0.1	µg/assay			0.17	
		BbF					0.045	µg/assay			0.074	
		BghiF					0.34	µg/assay			0.56	
		BjF					0.25	µg/assay			0.42	
		BbFE					0.024	µg/assay			0.04	
		BghiP					0.033	µg/assay			0.055	
		BeP					0.032	µg/assay			0.053	
		CH					0.22	µg/assay			0.37	
DBacA					0.10	µg/assay			0.17			

Table E-12. In vitro DNA damage: RPF calculations

Record no.	Reference	PAH	Relative potency calculation									
			BMR	BMD	Point estimate extra risk response	Point estimate dose	Slope of dose response curve	Dose units	Converted dose	Converted dose units	RPF	Comments
		DBahA					0.039	µg/assay			0.064	
		DBaIP					2.1	µg/assay			3.5	
		DBahP					0.12	µg/assay			0.19	
		DBaIP					0.17	µg/assay			0.29	
		FA					0.41	µg/assay			0.68	
		IP					0.036	µg/assay			0.06	
		PH					0.053	µg/assay			0.088	
		Tphen					0.26	µg/assay			0.43	
20810	Robinson and Mitchell, 1981	BaP			89	10		µg/mL			1	
		Pyr			63	7.2		µg/mL			0.98	
20940	Rossmann et al., 1991	BaP			10.4	12.5		µg/mL			1	Enhancement over background
		AC			4.8	12.5		µg/mL			0.46	
		DBacA			8	1.44		µg/mL			6.7	
		DBahA			4	2		µg/mL			2.4	
		PH			4.5	25		µg/mL			0.22	
21730	Tong et al., 1981b	BaP			65.5	0.001		M	252	mg/L	1	
		BaA			17.1	0.0005		M	114	mg/L	0.58	Based on peak response; no model fit

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Table E-13. In vitro clastogenicity or sister chromatid exchange: RPF calculations

Record no.	Reference	PAH	Endpoint	Data type: quantal or continuous	BMR	BMD	Point estimate extra risk response	Point estimate dose	Dose units	Converted dose	Converted dose units	RPF	Comments
14620	Kochhar, 1982	BaP	Aberrations	Q			0.53	5	µg/mL			1	BMD doesn't reflect selected BMR. RPF based on peak.
		BaA					0.34	5	µg/mL			0.64	BMD doesn't reflect selected BMR. RPF based on peak.
14640	Krolewski et al., 1986	BaP	Sister chromatid exchanges	C			0.79	5	µM	1.3	mg/L	1	
		CPcdP					0.29	5	µM	1.1	mg/L	0.41	No model fit. RPF based on peak response
19690	Mane et al., 1990	BaP	Sister chromatid exchanges	C			2.7	1	µg/mL			1	
		BaA					0.4	1	µg/mL			0.15	
21710	Tong et al., 1981a	BaP	Sister chromatid exchanges	C			92	1×10^{-4}	M	25.2	mg/L	1	
		BaA					13	1×10^{-4}	M	22.8	mg/L	0.16	No n provided. RPF based on peak response

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1 **APPENDIX F. EXAMPLE CALCULATION OF RPF DETECTION LIMIT**

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3 **Table F-1. Example data for calculation of RPF detection limit**

Group	Dose	Number with tumors	Number in group	Incidence	Extra risk response ^a
<i>Actual responses</i>					
Control	0	2	30	0.067	NA
Anthanthrene	0.25	2	29	0.069	NA
Benzo[a]pyrene	0.25	24	30	0.800	0.786
<i>Theoretical statistically significant response^b</i>					
Anthanthrene	0.25	8	29	0.276	0.224

^aCalculated as described below in Step 1.

^bCalculated as described below in Step 2.

Source: Hoffmann and Wynder (1966).

4
5 *Step 1.* Estimate the number of tumor-bearing animals that would represent a statistically-
6 significant response (one-sided $p \leq 0.05$ using Fisher's exact test) in the number of animals
7 exposed to anthanthrene (29) given the observed control response (2/30). In this case,
8 8/29 tumor-bearing animals (incidence of 0.276) would represent a statistically significant
9 response to anthanthrene.

10
11 *Step 2.* Calculate the extra risk response associated with the theoretical statistically significant
12 incidence for anthanthrene and the observed benzo[a]pyrene incidence as follows:

$$\text{Extra risk response} = \frac{P(d) - P(0)}{[1 - P(0)]}$$

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16
17 For the theoretical statistically significant response to anthanthrene,

$$\text{Extra risk response} = (0.276 - 0.067)/(1 - 0.067) = 0.224$$

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19
20
21 *Step 3.* Calculate the RPF detection limit as the ratio of the slopes associated with extra risk
22 response and the actual doses of anthanthrene and benzo[a]pyrene as follows:

$$\text{RPF Detection Limit} = \frac{(\text{Theoretical anthanthrene extra risk response/dose anthanthrene})}{(\text{benzo[a]pyrene extra risk response/dose benzo[a]pyrene})}$$

$$\text{RPF Detection Limit} = (0.224/0.25)/(0.786/0.25) = 0.28$$

APPENDIX G: EVALUATION OF ALTERNATIVES FOR RANKING RPFs

For many of the PAHs evaluated in this report, a number of datasets were available for use in calculating RPFs. The resulting RPFs are derived from tumor bioassays using different exposure routes, species, sexes, or tumor endpoints (incidence or multiplicity) and/or from a variety of different cancer-related endpoint assays. In addition to using different types of data, the various RPFs reflect studies of varying quality (different numbers of animals, follow-up time, single or multiple dose groups, response levels low or high on the dose-response curve, etc.). In order to derive a single final RPF for each individual PAH, the various results from different datasets must either be ranked/prioritized and/or combined. This appendix details the options that were considered for ranking RPFs.

A series of options were considered for prioritizing RPFs for the purpose of selecting a single RPF for each PAH or exposure route. An a priori decision was made to consider tumor bioassay data to be preferable to cancer-related endpoint data because the tumor bioassay data are in whole animals and address the endpoint of interest for RPFs (tumorigenicity). Thus, options for ordering or combining tumor bioassays and for cancer-related endpoint data were considered separately; Section G.1 below discusses options considered for use of tumor bioassay RPFs and Section G.2 discusses options considered for use of cancer-related endpoint RPFs.

G.1. OPTIONS FOR RANKING TUMOR BIOASSAY RPFs

Approaches considered for ordering tumor bioassay were: (1) ranking by exposure route, (2) ranking by target organ, and (3) preference for modeled data over point estimates.

Ranking by exposure route. One option for ranking RPFs derived from tumor bioassay data would be to order the datasets by exposure routes that are considered most relevant to environmental exposure routes (oral, dermal, and inhalation). RPFs for many PAHs were calculated from dermal tumor bioassays. While dermal exposure to PAHs in the environment does occur, there is currently no dermal slope factor for benzo[a]pyrene on the IRIS database. If a dermal slope factor is derived for benzo[a]pyrene, then the RPFs derived from dermal tumor bioassays would be more suitable than those from other exposure routes for use in calculating cancer risk from dermal exposure to other PAHs. The available database for PAHs did not include any oral or inhalation studies that were suitable for RPF calculation; thus, route-to-route extrapolation is necessary to derive RPFs applicable to oral or inhalation exposures.

Some earlier RPF approaches, primarily in the course of assessing risks from inhalation exposure to PAHs, have proposed hierarchies of bioassay types based on route of administration. Collins et al. (1998) proposed a hierarchy for PAH cancer potencies or PEFs for use in assessing air contaminants. The hierarchy for inhalation potencies or PEFs proposed by Collins et al. (1998) ordered the exposure routes as follows: intratracheal or intrapulmonary administration>oral administration>skin-painting studies> subcutaneous or intraperitoneal

1 administration. However, Collins et al. (1998) did not provide any empirical data supporting the
2 ordering of these exposure routes, other than the intuitive preference for intratracheal or
3 intrapulmonary administration as a surrogate for inhalation. In another review of data available
4 for relative potency assessment for PAHs as air contaminants, Pufulete et al. (2004) suggested
5 that intratracheal instillation of low doses of PAHs might be an appropriate surrogate exposure
6 model for assessing relative potency of inhalation exposure. The basis for this suggestion was
7 the authors' observation that clearance of PAHs administered in solution via intratracheal
8 instillation exhibited a biphasic pattern similar to that observed after inhalation exposure to
9 benzo[a]pyrene bound to particulates. However, the authors acknowledged that the high
10 concentrations of PAHs used in intratracheal and intrapulmonary instillation studies may lead to
11 major differences in pharmacokinetics compared with inhalation exposure (Pufulete et al., 2004).
12 Further, the authors expressed this suggestion as a path for future research, rather than as a
13 means of examining available data on PAHs; no intratracheal instillation studies were identified
14 in the search for studies from which to calculate RPFs for PAHs. Pufulete et al. (2004) did not
15 provide any specific information on the relevance of intrapulmonary administration (a route used
16 in several of the bioassays used to calculate RPFs) to inhalation exposure.

17 To assess exposure-route differences in RPFs calculated in this review, a table comparing
18 the average RPF for each PAH across exposure routes was prepared (Table G-1). The average
19 values include RPFs calculated with both incidence and multiplicity data; each RPF is treated as
20 an independent measure of relative potency in calculating the averages. Dermal studies are
21 shown collectively as well as separated by study type (complete carcinogenesis or initiation
22 only). Likewise, intraperitoneal studies are shown grouped as well as separated by target organ
23 (lung and liver). In general, the table shows that RPFs calculated from lung implantation and
24 dermal studies are similar, while RPFs calculated from intraperitoneal studies tend to be higher
25 for most compounds. Among PAHs with RPFs derived from intraperitoneal and dermal data,
26 5/7 showed higher RPF values from intraperitoneal data, compared with dermal data
27 (benz[a]anthracene, benzo[b]fluoranthene, benzo[j]fluoranthene, cyclopenta[c,d]pyrene,
28 dibenz[a,h]anthracene; Table G-1). However, intraperitoneal RPFs for chrysene (CH) and
29 dibenzo[a,l]pyrene (DBaIP) are similar to dermal RPFs for these compounds.

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Table G-1. Average RPF value by exposure route

PAH	Dermal		Dermal complete		Dermal initiation		Intra-peritoneal		Intra-peritoneal, target organ = lung		Intra-peritoneal, target organ = liver		Lung implantation	
	N	Average	N	Average	N	Average	N	Average	N	Average	N	Average	N	Average
AA	1	0.5	1	0.5	–	–	–	–	–	–	–	–	1	0.2
AC	–	–	–	–	–	–	–	–	–	–	–	–	–	–
BaA	1	0.02	–	–	1	0.02	3	0.3 ^a	1	0.08	2	0.4	–	–
BbcAC (1,12-MBA)	1	0.05	–	–	1	0.05	–	–	–	–	–	–	–	–
BbF	3	0.3	1	0.2	2	0.4	3 ^b	1 ^c	1	0.4	1	2	1	0.1
BeAC	4	0.7	–	–	4	0.7	–	–	–	–	–	–	–	–
BghiP	–	–	–	–	–	–	–	–	–	–	–	–	1	0.009
BjAC	–	–	–	–	–	–	1	60 ^d	1	60	–	–	–	–
BjF	3	0.06	–	–	3	0.06	5 ^b	0.6 ^a	2	0.5	1	0.7	1	0.03
BkF	2	0.02	–	–	2	0.02	–	–	–	–	–	–	1	0.03
BIAC	4	4	–	–	4	4	–	–	–	–	–	–	–	–
CH	7	0.1	–	–	7	0.1	3	0.1 ^a	1	0.1	2	0.2	1	0.04
CPcdP	7	0.2	3	0.3	4	0.1	1	1 ^d	1	1	–	–	–	–
CPdefC	2	0.3	–	–	2	0.3	–	–	–	–	–	–	–	–
DBacA	–	–	–	–	–	–	–	–	–	–	–	–	–	–
DBaeF	2	0.9	1	1	1	0.7	–	–	–	–	–	–	–	–
DBaeP	2	0.4	1	0.3	1	0.4	–	–	–	–	–	–	–	–
DBahA	2	1	–	–	2	1	1	10 ^d	1	10	–	–	1	2
DBahP	1	0.9	–	–	1	0.9	–	–	–	–	–	–	–	–
DBaiP	2	0.6	1	0.7	1	0.5	–	–	–	–	–	–	–	–
DBalP	2	30	–	–	2	30	1	30 ^d	1	30	–	–	–	–
FA	–	–	–	–	–	–	10	0.08 ^a	8	0.05	2	0.2	–	–
IP	–	–	–	–	–	–	–	–	–	–	–	–	1	0.07
N23eP	1	0.3	–	–	1	0.3	–	–	–	–	–	–	–	–
PH	–	–	–	–	–	–	–	–	–	–	–	–	–	–
Pyr	–	–	–	–	–	–	–	–	–	–	–	–	–	–

^aNewborn mouse model.

^bNumber of intraperitoneal RPFs includes those calculated for combined lung and liver incidence; these are not included in number of RPFs with lung or liver tumors.

^cIncludes both newborn mouse and adult A/J mouse models.

^dAdult A/J mouse model.

2

3 One possible explanation for the higher intraperitoneal RPFs calculated from newborn
4 mouse assays (footnoted “a” in the table) might be that the newborn mouse is more sensitive to
5 the carcinogenic action of PAHs than an adolescent or adult mouse. Likewise, the adult A/J
6 mouse is considered to be particularly sensitive to PAH lung tumorigenicity (Nesnow et al.,

1 1995), which may result in higher RPFs with this model (in Table G-1, the intraperitoneal RPFs
2 based on the A/J mouse model are footnoted “d”). There is little information to evaluate whether
3 the newborn mouse is more or less sensitive than the adult A/J mouse model. Only one
4 compound, benzo[b]fluoranthene (BbF), had RPFs calculated from both newborn mouse and
5 adult A/J mouse models; the newborn mouse RPF was 2, while the A/J mouse RPF was 0.4. In
6 summary, it is not clear whether the intraperitoneal RPFs are higher than dermal or lung
7 implantation RPFs due to route-specific differences or animal model differences in susceptibility.

8 *Ranking by target tissue.* An alternative approach to ranking tumor bioassay RPFs would
9 be to prefer target tissue-specific RPFs (for example, to prefer RPFs derived from lung tumor
10 data for inhalation RPFs). An analysis was conducted to assess whether RPFs calculated from
11 lung tumor potency in intraperitoneal studies (both newborn mouse and adult A/J mouse models)
12 were consistent with RPFs from lung implantation studies. Table G-1 shows RPFs calculated for
13 lung tumors (separate from liver tumors also observed in some intraperitoneal studies) after
14 intraperitoneal administration. Only four compounds (BbF, Bjf, CH, and DBahA) had RPFs for
15 both intraperitoneal and lung implantation studies; for each of these, the intraperitoneal lung
16 tumor RPF exceeded the lung implantation RPF. No information assessing the concordance
17 between lung tumor potency after intraperitoneal administration and inhalation cancer potency
18 was identified in the literature.

19 *Ranking by use of BMD.* A third approach considered for ranking of tumor bioassay data
20 was to prefer data amenable to BMD modeling (of either quantal or continuous data, depending
21 on whether incidence or multiplicity was modeled) over an analysis of data based on point
22 estimates. Table G-2 compares the average of RPFs for all bioassays with RPFs calculated using
23 BMD modeling, and RPFs calculated using a point estimate approach.

24

Table G-2. Comparisons among average tumor bioassay-based RPF values by data availability or calculation method

	All bioassays		Multidose bioassays		BMD model		Point estimate	
	N	Average RPF	N	Average RPF	N	Average RPF	N	Average RPF
AA	2	0.4	1	0.2	1	0.2	1	0.5
AC	–	–	–	–	–	–	–	–
BaA	4	0.2	–	–	–	–	4	0.2
BbcAC	1	0.05	1	0.05	–	–	1	0.05
BbF	7	0.6	5	0.3	3	0.2	4	0.9
BeAC	4	0.7	4	0.7	2	0.8	2	0.7
BghiP	1	0.009	1	0.009	1	0.009	–	–
BjAC	1	60	1	60	–	–	1	60
BjF	9	0.4	4	0.06	2	0.09	7	0.5
BkF	3	0.02	3	0.02	2	0.03	1	0.02
BIAC	4	4	4	4	2	5	2	3
CH	11	0.1	5	0.1	3	0.1	8	0.1
CPcdP	8	0.3	8	0.3	2	0.1	6	0.4
CPdefC	2	0.3	–	–	1	0.5	1	0.2
DBacA	–	–	–	–	–	–	–	–
DBaeF	2	0.9	1	1.1	1	1	1	0.7
DBaeP	2	0.4	1	0.3	1	0.3	1	0.4
DBahA	4	4	1	10	1	10	3	1
DBahP	1	0.9	–	–	–	–	1	0.9
DBaiP	2	0.6	1	0.7	1	0.7	1	0.5
DBalP	3	30	3	30	–	–	3	30
FA	10	0.08	8	0.08	5	0.08	5	0.07
IP	1	0.07	1	0.07	1	0.07	–	–
N23eP	1	0.3	–	–	–	–	1	0.3
PH	–	–	–	–	–	–	–	–
Pyr	–	–	–	–	–	–	–	–

1
2 While this ranking could be justified based on a general preference for multidose data and
3 modeling to identify a point of departure, there are important limitations to this approach. First,
4 RPFs based on BMD modeling may still use a point of departure high on the dose-response
5 curve, if a single benzo[a]pyrene dose with an elevated response level (BMR)⁵ was used to
6 calculate the RPF. In some cases, an RPF based on a point estimate approach from a point of
7 departure lower on the dose-response curve may be a better predictor of relative potency at
8 environmental exposure levels. Second, unless RPFs based on BMD modeling are available for
9 all of the relevant exposure routes (dermal initiation and complete carcinogenicity, lung
10 implantation, and intraperitoneal), there may be differences between the RPFs calculated from
11 BMD modeling and those calculated using a point estimate approach that are unrelated to study
12 quality (i.e., route, species, sex differences). Thus, ranking RPFs based on a preference for
13 modeled data over point estimate data would neglect other sources of variability in the estimates
14 (exposure route, species, sex, target organ, dosing intervals, etc.)

⁵The BMR selected for multidose PAH data for studies with a single BaP dose was the response level observed in the BaP dose group.

1 In summary, the analysis of options for ranking bioassay RPFs did not suggest a clear
2 basis for selecting among the available data types. As a consequence, none of the available data
3 types was considered preferable to any other; all bioassay RPFs were considered equally
4 relevant.

5 6 **G.2. RANKING NON-BIOASSAY DATA**

7 Two approaches to ranking non-bioassay study types were evaluated: a theoretical
8 approach and an empirical approach.

9 *Theoretical ranking of cancer-related endpoint data.* To identify whether a theoretical
10 basis for ranking was available, a limited literature search was conducted in PubMed to identify
11 publications that addressed the relationship between various genotoxicity endpoints and
12 carcinogenicity. The search was intended to identify recent papers that described a quantitative
13 correlation between particular cancer-related endpoints and cancer potency. Several papers (e.g.,
14 Matthews et al., 2006a, b) analyzed the concordance between genotoxicity tests and
15 carcinogenicity (i.e., whether positive genotoxicity findings predicted positive carcinogenicity
16 findings) but did not assess whether potency measured in genotoxicity studies correlated with
17 cancer potency. Three publications (Sanner and Dybing, 2005; Ross et al., 1995; Travis et al.,
18 1990) provided quantitative associations between cancer potency and genotoxic potency. There
19 were no publications that related relative cancer potency to relative genotoxic potency for any
20 classes of compounds; this would be the most relevant comparison for use in ranking.

21 Ross et al. (1995) provided evidence that DNA adduct formation expressed as TIDAL
22 values was correlated with the numbers of lung adenomas in adult A/J mice treated with PAHs
23 by intraperitoneal injection (TIDAL values were also strongly correlated with dose). The
24 correlations were demonstrated for five PAHs: benzo[a]pyrene, benzo[b]fluoranthene,
25 dibenz[a,h]anthracene, 5-methylcholanthrene, and CPP. This paper demonstrates a quantitative
26 relationship between TIDAL values and tumorigenicity in the compound class of interest
27 (PAHs).

28 Examining data from 42 substances, Sanner and Dybing (2005) showed a linear
29 relationship (slope = 1.05 ± 0.12 , $r^2 = 0.67$) between the lowest effective dose (LED) producing
30 genotoxicity in vivo after oral or inhalation exposure and the chronic daily dose estimated to
31 result in a 25% increase (over controls) in tumor formation (TD₂₅). Genotoxicity endpoints
32 included in the analysis were micronuclei, sister chromatid exchanges, chromosomal aberrations,
33 DNA adducts, DNA strand breaks, and the comet assay for DNA breaks. The chemical
34 compounds included in the analysis included a large variety of compounds (VOCs, chlorinated
35 compounds, dioxin, etc.); only one PAH (naphthalene) was included in the database. Analyzing
36 specific endpoints separately, the authors reported the correlations shown in Table G-3.

37

Table G-3. Correlation between LED and TD₂₅ by endpoint

Endpoint	Number of observations (compounds)	Slope	Correlation coefficient (r ²)
Chromosomal aberrations	4	1.29 ± 0.25 ^a	0.93
DNA breaks	9	1.02 ± 0.17 ^a	0.84
DNA adduct	11	1.44 ± 0.36 ^a	0.64
Micronucleus	8	0.63 ± 0.21 ^a	0.61
Sister chromatid exchange	2	0.98	–

^aSlope significantly different from zero.

Source: Sanner and Dybing (2005).

1
2 The slopes and correlation coefficients shown in Table G-3 suggest that LEDs for
3 chromosomal aberrations and DNA breaks are reasonably good predictors of cancer TD₂₅, and
4 that DNA adducts and micronuclei are also correlated with potency.

5 Travis et al. (1990) examined correlations between cancer potency estimates and
6 mutagenicity or toxicity data from the Registry of Toxic Effects of Chemical Substances
7 (RTECS). Using data from 146 compounds, the authors demonstrated correlations between
8 tumor potency and mutagenicity or toxic potency. Correlations between toxicity and
9 carcinogenicity were not considered here, as they are not pertinent to the ranking of genotoxicity
10 data for RPF selection. Correlations between mutagenicity and cancer potency are shown in
11 Table G-4.
12

Table G-4. Correlation between tumor potency (log 1/TD₅₀) and mutagenic potency

Endpoint	Number of observations (compounds)	Correlation coefficient (r ²)	Standard error
Ames test	82	0.37	0.93
All mutation tests	112	0.69	0.90
All mutation tests: lung carcinogens ^a	17	0.61	0.74
All mutation tests: liver carcinogens ^a	40	0.43	0.94

^aDue to the magnitude of the tumor potency for tetrachlorodibenzo-p-dioxin (TCDD), it had a strong influence on the correlation; the authors conducted analyses without dioxin, and these are the results shown here.

Source: Travis et al. (1990).

13
14 The available published studies did not suggest a clear basis for ordering RPFs calculated
15 from data on different cancer-related endpoints. Based on the information provided in the three
16 published analyses relating cancer potency with genotoxic potency, one may conclude that
17 TIDAL values, in vivo measures of clastogenicity, DNA adducts, and DNA damage, and in vitro

1 measures of mutagenicity are correlated with some measure of cancer potency. While it could be
2 argued that a stronger basis for the correlation exists for TIDAL values (based on Ross et al.,
3 1995), since the data for this endpoint were collected for the compound class of interest (PAHs),
4 there is no information to determine whether TIDAL values are better predictors of cancer
5 potency in PAHs than the other available endpoints, because other endpoints were not examined
6 for PAHs as a class. In addition, the measures of cancer and genotoxicity potency used in the
7 three papers were different, making comparisons among the three difficult. Based only on the
8 analysis conducted by Sanner and Dybing (2005), one might use the slopes and/or correlations
9 (Table 3) to rank in vivo genotoxicity endpoints, but it is not clear where TIDAL values would
10 fit, as these were not analyzed separately. TIDAL values could be categorized with other DNA
11 adduct measures assessed by Sanner and Dybing (2005); however, Ross et al. (1995)
12 demonstrated that adduct levels measured at a single time point were uncertain predictors of
13 potency compared with TIDAL values.

14 *Empirical ranking of cancer-related endpoint data.* In view of the fact that no published
15 studies comparing relative genotoxic potency to relative cancer potency were available, and that
16 the present work created a large database of RPFs for multiple endpoints, an empirical approach
17 to assigning ranks was also explored. The database of PAH RPFs was analyzed to determine
18 whether any individual cancer-related endpoint was more closely correlated with RPFs based on
19 tumor bioassay data. The premise behind this analysis is that RPFs based on bioassay data
20 represent the best available information, and that the genotoxicity endpoints that best predict
21 bioassay RPFs should be preferred over those that show little relationship to tumor bioassay
22 RPFs. The semiquantitative analysis was, of necessity, restricted to those PAHs for which at
23 least one RPF based on bioassay data was available.

24 For each of the 22 PAHs with nonzero RPFs based on bioassay data, the average bioassay
25 RPF was compared with the average RPF for several endpoints that the literature review
26 suggested could be correlated with cancer potency (in vivo DNA adducts, in vivo micronuclei
27 and sister chromatid exchanges together, and in vitro mutagenicity). TIDAL values were not
28 analyzed separately from other measures of DNA adducts because there were only four PAHs
29 with both TIDAL and bioassay RPFs; similarly, micronuclei and sister chromatid exchange
30 endpoints were grouped to increase the number of observations in the regression. In addition to
31 analyzing these endpoints, an analysis of several endpoints grouped across class (e.g., all in vivo
32 non-bioassay endpoints, all in vitro endpoints, and all non-bioassay endpoints) was performed.
33 Linear regression was performed on the log-transformed average RPF values to assess the
34 predictive power of each endpoint or grouping, and to assess whether there was a quantitative
35 basis for ordering them.

36 Table G-5 shows the results of regression analyses assessing how well the average RPFs
37 for several endpoints correlated with average bioassay RPFs. The table shows that neither in
38 vivo clastogenicity RPFs (micronuclei and sister chromatid exchanges) nor in vitro mutagenicity

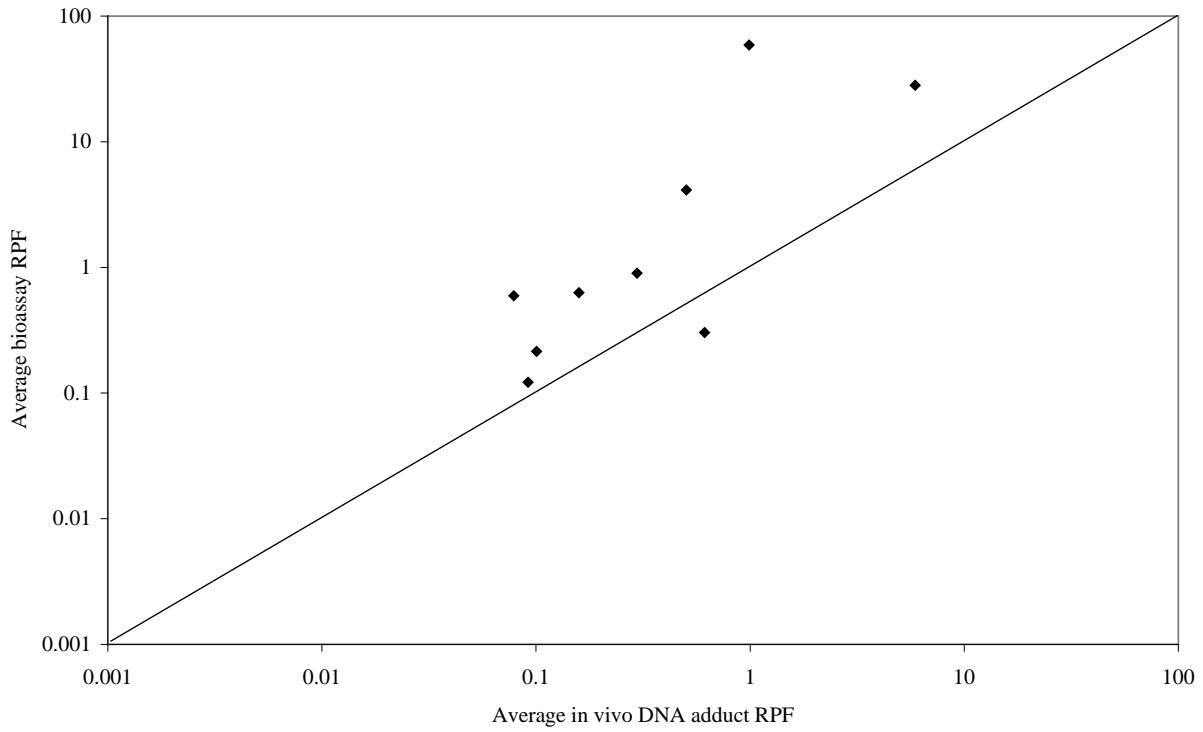
1 RPFs were significantly correlated with bioassay RPFs for the dataset examined here. Among
 2 those showing a significant ($p < 0.05$) linear relationship, in vivo DNA adducts provided the best
 3 correlation ($r^2 = 0.64$), followed by all in vivo non-bioassay endpoints ($r^2 = 0.54$), all non-
 4 bioassay endpoints ($r^2 = 0.43$), and all in vitro non-bioassay endpoints ($r^2 = 0.39$). Although in
 5 vivo DNA adducts provided the strongest correlation, the slope for this regression was 1.25,
 6 indicating that RPFs for in vivo DNA adducts systematically underpredicted bioassay RPFs.
 7 Figure G-1 demonstrates this underprediction; as the figure shows, most of the average RPF
 8 values are to the left of the 1:1 correspondence line. The slopes for both in vivo non-bioassays
 9 and all non-bioassays are much closer to 1.0. Plots showing the average RPF comparisons for all
 10 in vivo non-bioassays, all non-bioassays, and all in vitro non-bioassays are shown in Figures G-2
 11 through G-4. These plots suggest that in vivo non-bioassay RPFs tend to underpredict bioassay
 12 RPFs, while all in vitro non-bioassays tend toward overprediction.

13

Table G-5. Results of simple linear regression of log-transformed average genotoxicity RPF vs. log average tumor bioassay RPF

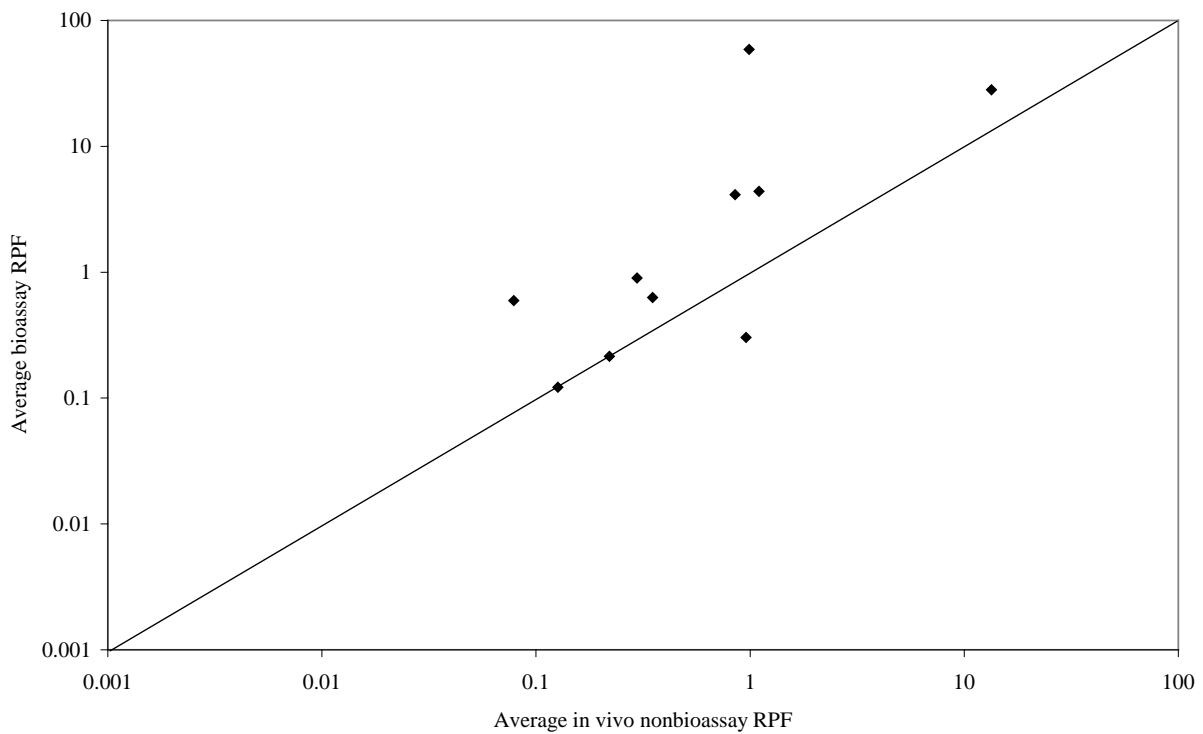
Genotoxicity endpoint	R ²	Slope	p-Value	n
All in vivo DNA adducts	0.64	1.24	<0.01	9
All in vivo non-bioassays	0.54	1.05	0.016	10
All non-bioassay endpoints (in vitro and in vivo)	0.43	1.03	<0.01	19
All in vitro non-bioassays	0.39	0.91	<0.01	19
All in vivo micronuclei and sister chromatid exchanges	0.58	0.83	>0.05 (NS)	6
All in vitro mutagenicity	0.047	0.39	>0.05 (NS)	17

14



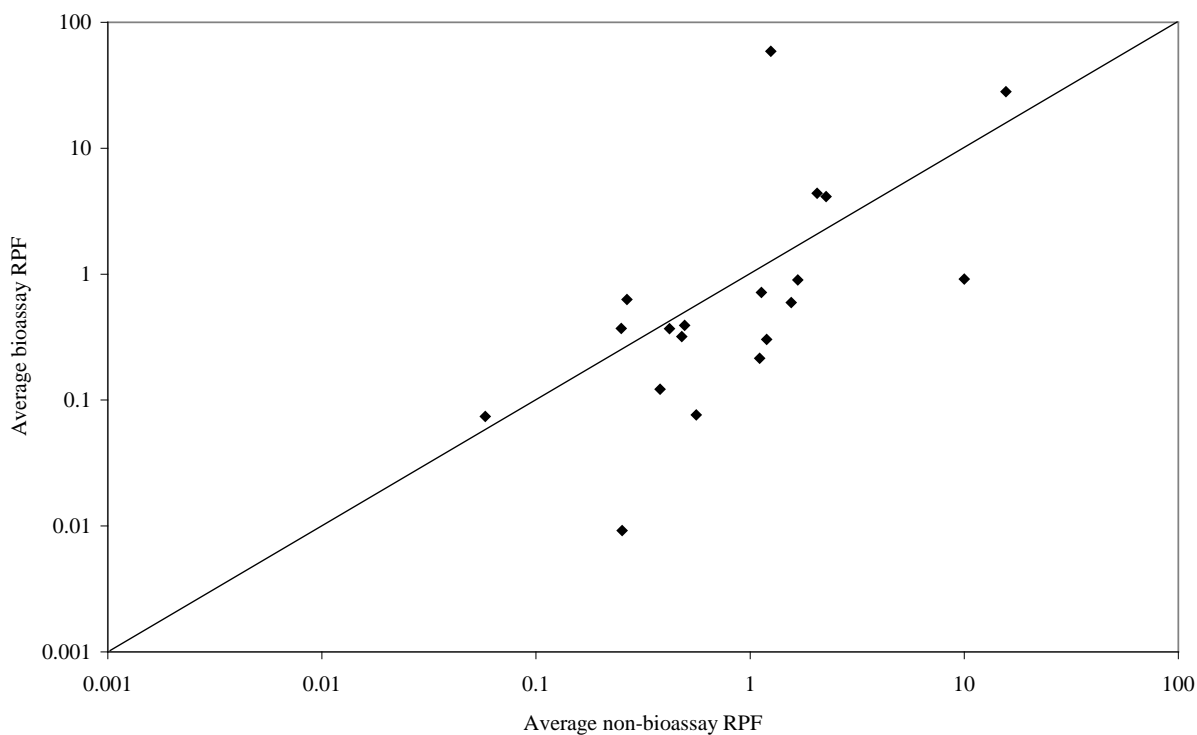
1
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Figure G-1. Average bioassay RPF vs. average in vivo DNA adduct RPF.



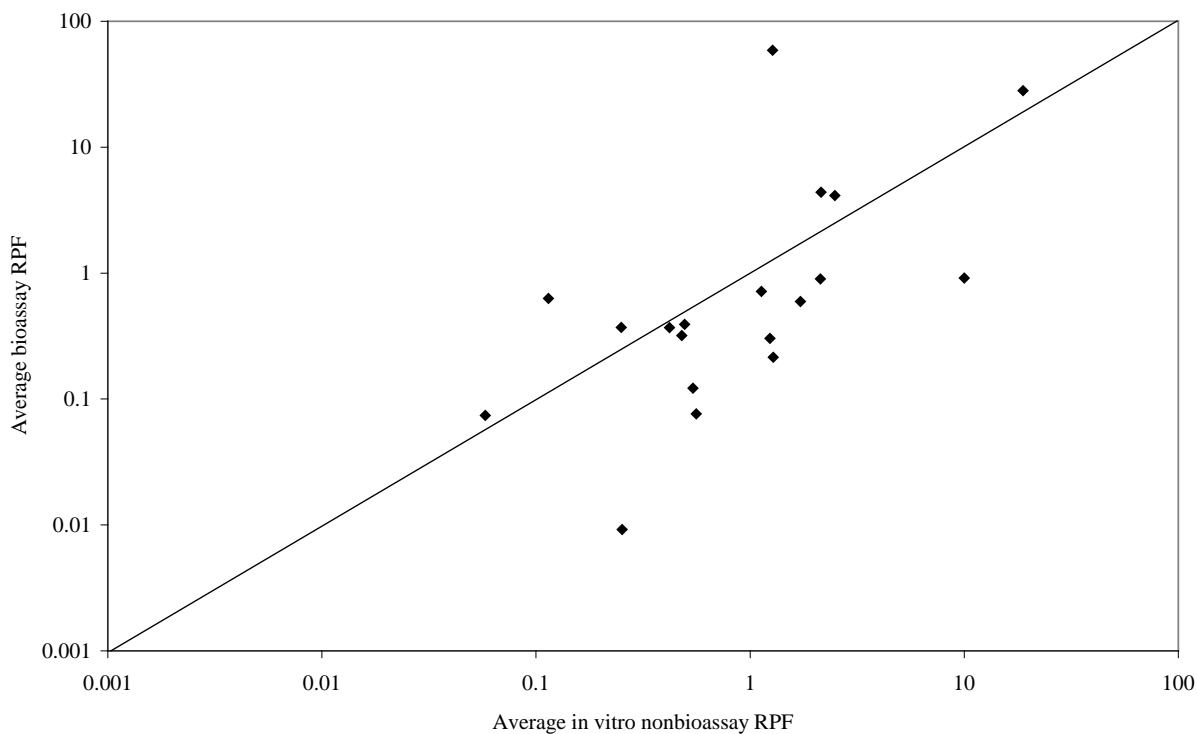
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Figure G-2. Average bioassay RPF vs. average in vivo nonbioassay RPF.



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Figure G-3. Average bioassay RPF vs. average nonbioassay RPF.



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4
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Figure G-4. Average bioassay RPF vs. average in vitro non-bioassay RPF.

6 Based on the results of the linear regression analyses comparing PAH RPFs calculated
7 for genotoxicity endpoints and RPFs calculated for bioassays (Table G-5), an argument could be

1 made for the following ranking: (1) bioassays, (2) in vivo non-bioassays, and (3) in vitro non-
2 bioassays. However, the improvement in correlation that is achieved with subdividing all non-
3 bioassays into in vivo and in vitro endpoints is small (r^2 improves from 0.43 for all nonbioassays
4 to 0.54 for in vivo non-bioassays), and the plot for in vivo nonbioassay shows that this grouping
5 exhibits a slight tendency to underpredict bioassay RPFs.

6 In summary, as with the findings for tumor bioassay data, the analysis of options for
7 ranking cancer-related endpoint RPFs did not suggest any clear theoretical or empirical basis for
8 prioritizing the available data for the purpose of selecting RPFs. Thus, for PAHs without any
9 tumor bioassay RPFs but with adequate information to suggest potential carcinogenicity, the
10 cancer-related endpoint data were combined to calculate a final RPF as described in Section 7.

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