

Risk assessment of genotoxic carcinogens in the low dose range

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In spite of manifold approaches to substitute carcinogens, there are **many** carcinogens present in the environment, in food and at workplaces:

- Combustion products
- Carcinogenic metal compounds
- Carcinogenic chemicals
- Natural bioactive food ingredients
- Substances generated during storage and preparation of food (mycotoxins, acrylamide, nitrosamines, heterocyclic aromatic amines, benzo[a]pyrene....)

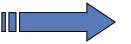


Important question:

- Is there a carcinogenic potential relevant under realistic exposure conditions?
- What are the **underlying mechanisms** involved?
- Is it possible to define threshold values which protect from carcinogenicity?



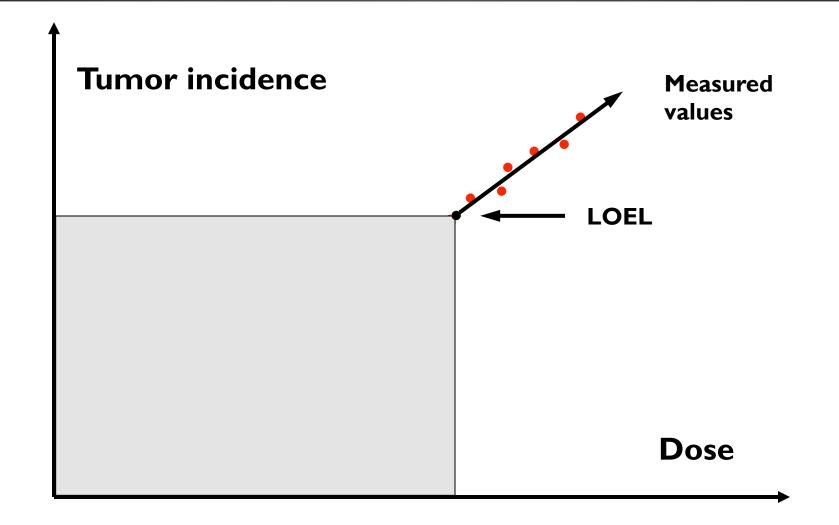
Hazard identification vs. risk estimation



Health based exposure limits for carcinogens at workplaces also required by the german legislation ("Gefahrstoffverordnung")

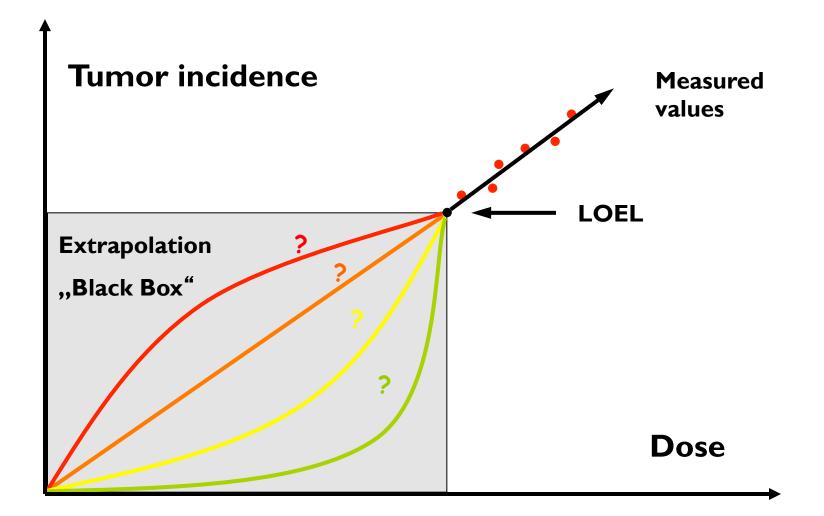
The problem of dose-response-relationships in case of carcinogenic compounds...





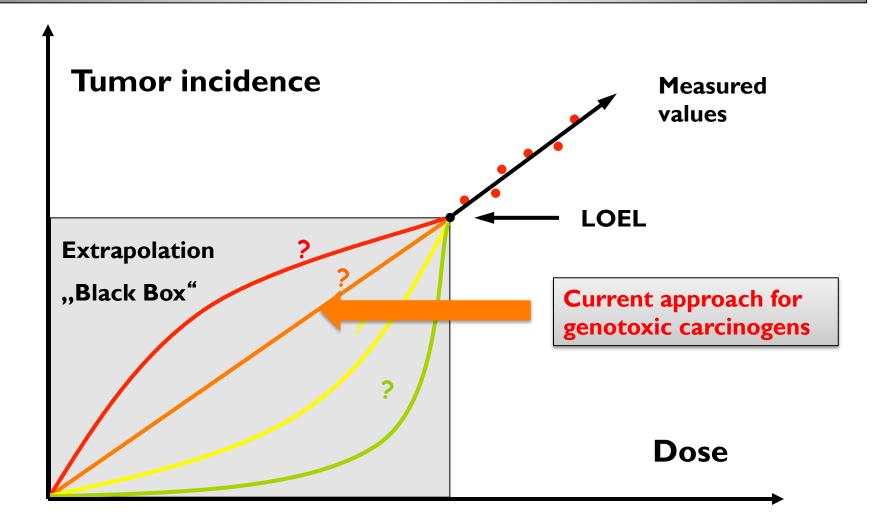
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The problem of dose-response-relationships in case of carcinogenic compounds...







Threshold of Toxicological Concern (TTC)

- Originally established for chemicals present in food, but also applied for food contact materials, food flavouring, impurities in pharmaceuticals
- Pragmatic approach for compounds of unknown toxicity
- For compounds with structural alerts for genotoxicity:TTC of 0.15 µg/ person/day
- Based on rodent carcinogenicity data, for most genotoxic chemicals in food estimated risk below 1 in 1 million
- Exclusion of aflatoxin-like, azoxy or N-nitroso-compounds (higher risk at this concentration) as well as metals and some other classes of compounds



ALARA ("As Low As Reasonably Achievable")

- Intends to keep the exposure to carcinogenic substances at the lowest achievable level according to technological or economical considerations
- Based on hazard identification

However, this approach does not take into account

- Carcinogenic potency
- Mode of action
- Exposure levels



Not useful for risk comparison

Not useful for priority setting



Margin of Exposure (MOE)

- Ratio between the dose leading to tumor formation in humans or experimantal animals and the measured or estimated human exposure (,,point of departure":T₂₅ or BMDL₁₀ from animal studies)
- MOE of 10.000 and above based on BMDL₁₀ would indicate low concern and thus low priority for risk management

Pragmatic approach for priority setting

Does not take into account "mode of action"



MOE of several food carcinogens are well below 10,000 (e.g., acrylamaide, Aflatoxin B1)



TRK-Values (technical guidance concentration)



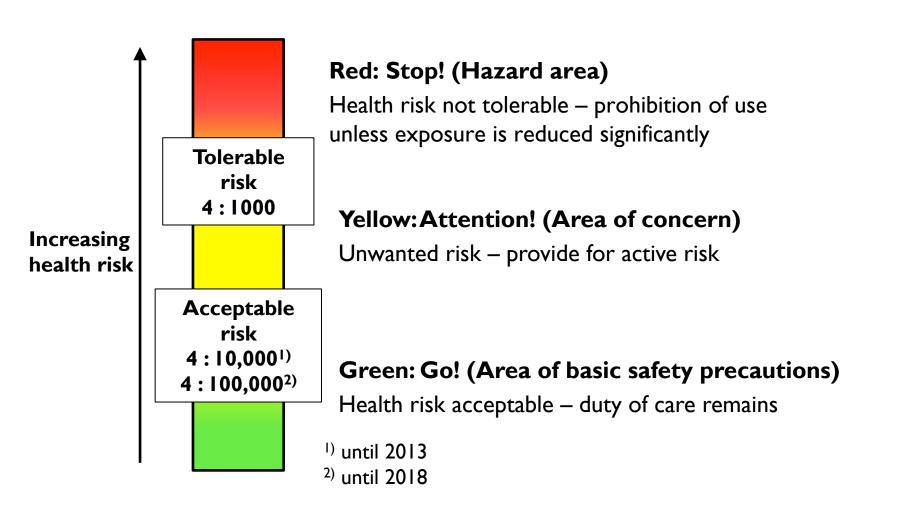
- Strictly based on technological considerations; valid until 2005
- Since 2005: Requirement for setting health-based exposure limits also for carcinogens

In Germany two different approaches:

- **Exposure-Risk-Relationships** (Expositions-Risiko-Beziehungen; ERB) established by Ausschuss für Gefahrstoffe (AGS):
- Tolerated or accepted risks:
 - 4:1,000 (tolerated risk); 4:10,000 (accepted risk 2013); 4:100,000; accepted risk 2018 at the latest)
- MAK categories 4 and 5

(since 1998; similar approach by SCOEL since 2008)

The risk-based concept for carcinogenic substances applied by the Ausschuss für Gefahrstoffe (AGS)



BAuA (2013) The risk-based concept for carcinogenic substances developed by the Committee for Hazardous Substances, From limit-value orientation to an action-oriented approach



I. Substances that cause cancer in humans and can be assumed to contribute to cancer risk (adaquate epidemiological evidence or limited epidemiological evidence and mode of action relevant to humans)

No MAK or BAT value established

2. Substances that are **considered to be carcinogenic in humans** based on **sufficient data from long-term animal studies** or limited evidence from animal studies, substantiated by evidence from epidemiological studies and/or **supported by mode of action** (in vitro tests, short-term animal studies)





- 3. Substances that cause **concern** that they could be carcinogenic to humans but **cannot be assessed conclusively because of lack of data.** The classification in Category 3 is provisional.
- a. Substances for which the criteria for classification in category 4 or 5 are fulfilled but for which the database is insufficient for the establishment of a MAK or BAT value.
- b. Substances for which in vitro or animal studies have yielded evidence of carcinogenic effects, but not sufficient for classification of the substance in one of the other categories (further studies are required). A MAK or BAT value can be established in the absence of genotoxicity.



4. Substances with carcinogenic potential for which a non-genotoxic mode of action is of prime importance; no contribution to human cancer risk is expected at exposure observing MAK and BAT values (mode of action well understood, related for example to increases in cellular proliferation, inhibition of apoptosis or disturbances in cellular differentiation)

Example:

- **Granular biopersistant dust** (GBD or GBS) (inert dust without additional specific toxicity)
- Induces chronic inflammation in the lung on conditions of overload and diminished clearance

Carcinogenic at high concentrations; MAK value protects from chronic inflammation



5. Substances with carcinogenic and genotoxic effects, which are considered to contribute very slightly to cancer risk, provided the MAK and BAT values are observed (must be supported by information on the mode of action, dose-dependence and toxicokinetic data pertinent to species comparison)

Up to now only five substances listed:

- Acetaldehyde
- Ethanol
- Isoprene
- Styrene
- Dichoro methane



Working group on "Genotoxic carcinogens" (MAK/SKLM)

Aim:

 development of concepts for integrating the manifold mechanisms of carcinogenicity including current knowledge of cell biology into risk assessment and classification of carcinogens

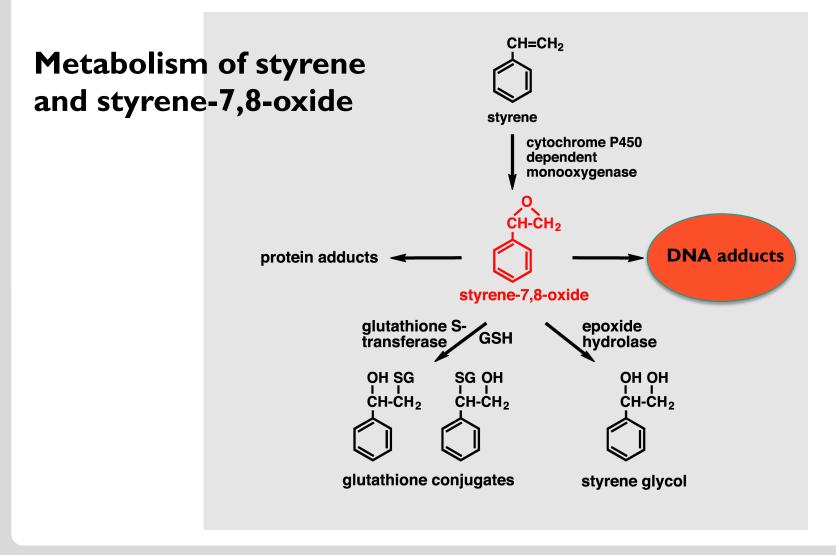


Science-based threshold values also for genotoxic carcinogens?

- Must be evaluated on a case-by-case basis
- **Required information:**
 - All types of DNA lesions induced
 - **Dose-response-relationship in the low dose range** for DNA lesions
 - **Cellular consequences** of respective DNA lesions
 - Endogenous "background" frequency of the same or similar genotoxic compound or metabolite and/or DNA lesions
 - Toxicokinetic data/ Modelling

Example Styrene (MAK Category 5)



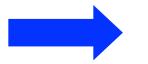


Metabolism of styrene and styrene-7,8-oxide



- Critical metabolite formed by mouse, rat and man
- Extent assessed by biochemical marker Hb-adducts: Mouse I → Rat I/2 - I/3 → Man I/20 - I/50
- Carcinogenic risk calculation for systemic styrene exposure
- Based on the positive oral studies in mice (lung tumors) and oral study with styrene oxide in rats (maximal statistic tumor incidence of 3 %)
- Exposure at the workplace (40 years, 8 hrs per day, 5 days per week, 48 weeks per year) at

20 ppm results in an estimated risk of about 1 : 20 000, which is well below the risk of endogeneous epoxides (for example, ethylene oxide)



Category 5, MAK 20 ppm

Significance of DNA adducts for mutagenicity and carcinogenicity?



- New analytical methods enable measurement of some DNA adducts also as background frequencies and in the low dose range
- Frequently linear increase of DNA adducts with dose within the low dose range
- However, in some cases increase in mutation frequencies nonlinear dose-response curve

Significance of DNA adducts for mutagenicity and carcinogenicity?

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Factors important for further fate of DNA adducts with respect to mutagenicity and carcinogenicity:

- DNA repair?
- Mutagenic potential of the respective lesions?
- Other additional effects required, like elevated cell division, to convert premutagenic DNA lesions in mutations?



- More science-based threshold values desirable for (genotoxic) carcinogens
- Establishment of mode of action for genotoxic carcinogens, considering:
 - Identification of DNA adducts
 - Dose-response relationships
 - DNA repair
 - Mutagenic potential
- **Establishment of more sensitive mutagenicity assays, especially** also

for in vivo mutagenicity assessment (PigA)?

- Inclusion of toxicogenomic data for assessment of mode of action in the low dose range
- Establishment of suitable **biomarkers** for exposed humans



Thank you very much for your attention!