



**UNIVERSITÀ DEGLI STUDI DI MILANO**  
**FACOLTÀ DI MEDICINA E CHIRURGIA**

**Philadelphia, August 24th, 2016**

**Establishing toxicological end-points for  
human risk assessment: challenges and  
opportunities**

**Angelo Moretto**

**Dipartimento di Scienza Biomediche e Cliniche, Università degli Studi di Milano**  
**Centro Internazionale per gli Antiparassitari e la Prevenzione Sanitaria (ICPS)**  
**Ospedale Luigi Sacco, ASST Fatebenefratelli Sacco, Milano**  
**[angelo.moretto@unimi.it](mailto:angelo.moretto@unimi.it)**



# Outline

- The current situation: the system is not efficient
- We need a change of paradigm (the RISK21 example)
- Some thoughts on future direction



# Current situation

- Do all the toxicology
- Derive critical point-of-departure (e.g. NOAEL)
- Set exposure/intake limits
- Perform risk assessment

*Anything less is second best or even unacceptable*



# Do all the toxicology

## TOXICOKINETIC

Absorption  
Distribution  
Metabolism  
Excretion

## ACUTE TOXICITY

LD<sub>50</sub> oral  
LD<sub>50</sub> dermal  
LC<sub>50</sub> inhalation  
Skin irritation  
Eye irritation  
(Skin sensitization)/LLNA

## GENOTOXICITY

Mutagenesis  
Clastogenesis  
Aneuploidy

## DEVELOPMENTAL TOXICITY

Teratogenicity tests (Rat-Rabbit)

## REPRODUCTIVE TOXICITY

Two generation reproductive toxicity

## SPECIAL STUDIES

Acute/repeated neurotoxicity  
Developmental neurotoxicity  
Immunotoxicity  
Others

## SHORT-TERM TOXICITY

Mouse	90 day toxicity
Rat	90 day toxicity
Dog	90 day toxicity
(Dog	1 year toxicity)

## LONG-TERM TOXICITY and/or CARCINOGENICITY

(Mouse 18 months)  
Rat 104 weeks

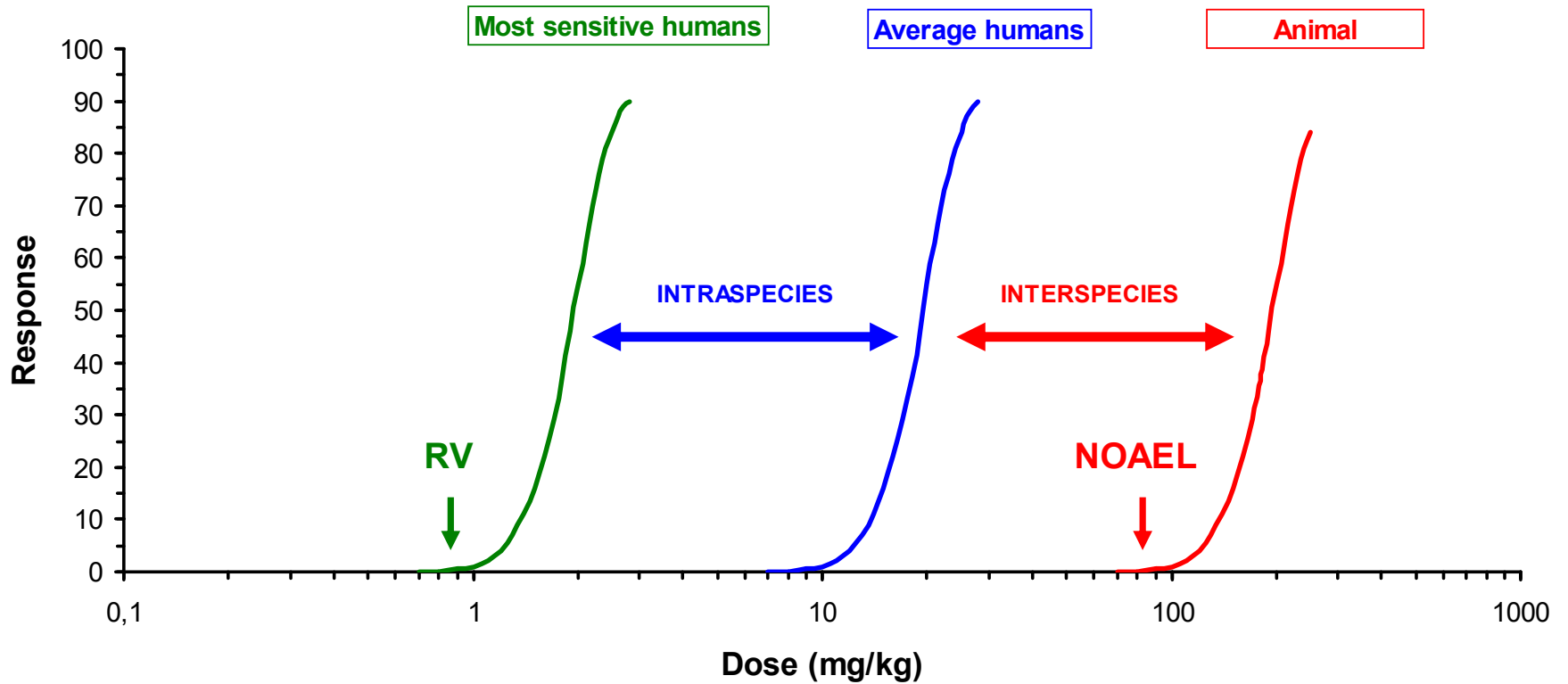


# Current situation

- Do all the toxicology
  - **Derive critical point-of-departure (e.g. NOAEL)**
  - **Set exposure/intake limits**
  - Perform risk assessment
- Anything less is second best or even unacceptable*

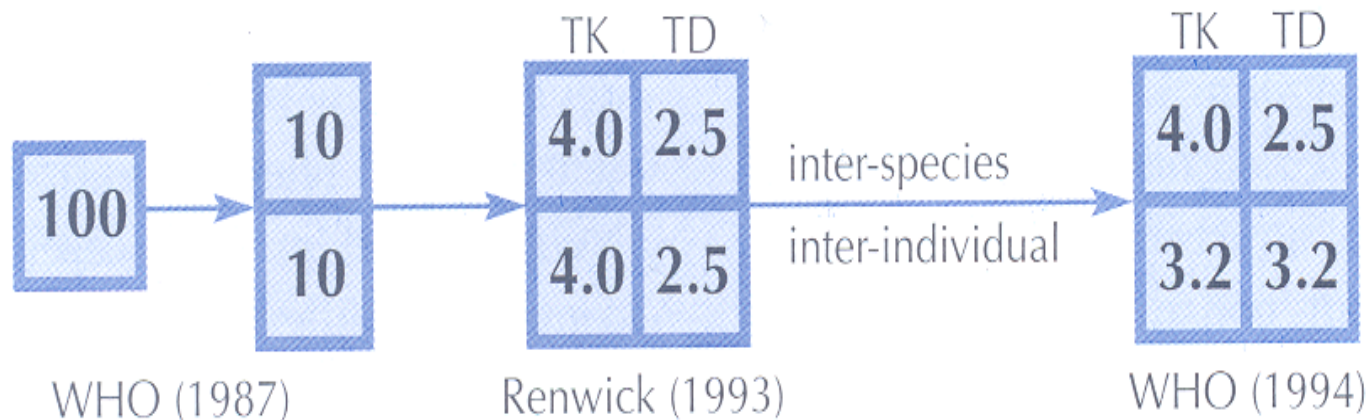


## Dose-response curve: from animal to human





# Suddivision of the safety factor



**TK – toxicokinetics (fate of the chemical in the body)**

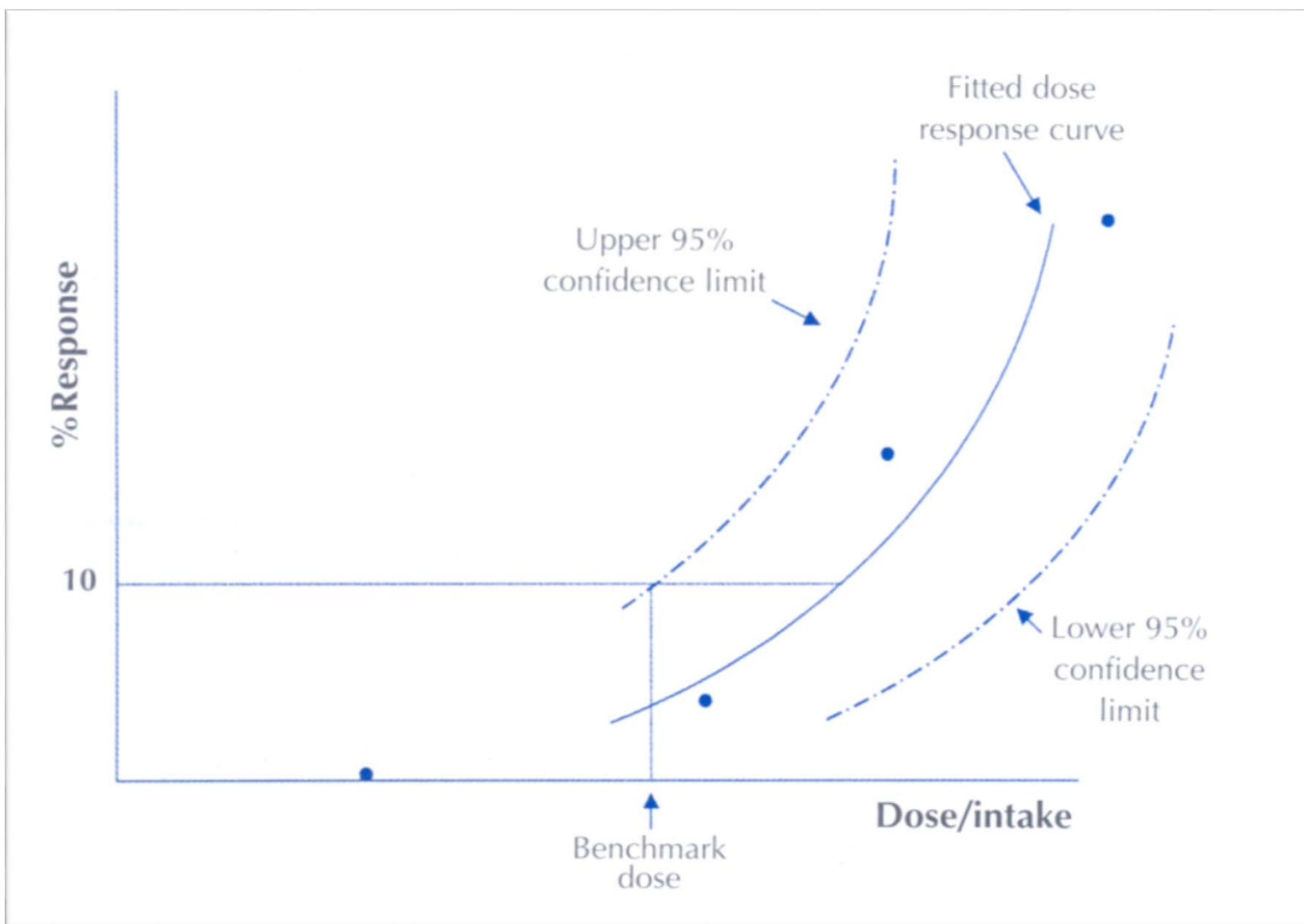
**TD – toxicodynamics (effets of the chemical on the body)**

**(from Renwick and Lazarus, 1998)**





# The Benchmark dose



# Current situation

- Do all the toxicology
  - Derive critical point-of-departure (e.g. NOAEL)
  - Set exposure/intake limits
  - **Perform risk assessment**
- Anything less is second best or even unacceptable*



# Outcome of the risk assessment of 84 a.i. performed by FAO/WHO JMPR (2013-2015)

International Estimated Daily Intake (IEDI)					
	% ADI				
	0-1	2-5	6-10	11-20	>20
<b>% a.i.</b>	<b>35</b>	<b>29</b>	<b>19</b>	<b>4</b>	<b>13</b>



# International Estimated Daily Intake (IEDI)

- Food balance sheets
- All crops treated with the compound
- No processing factors

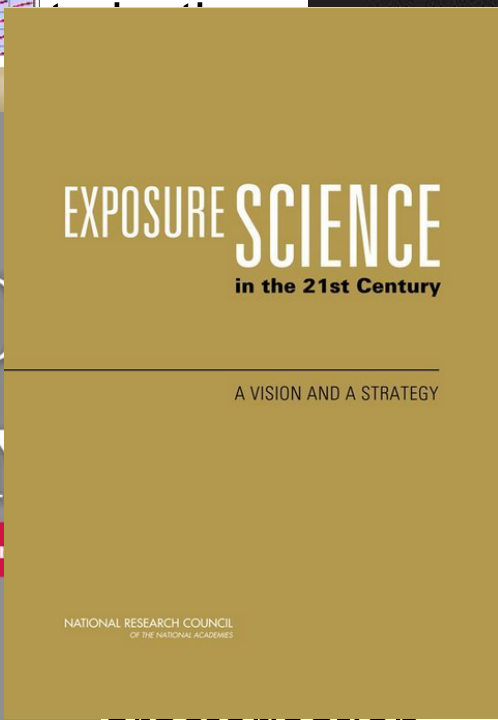
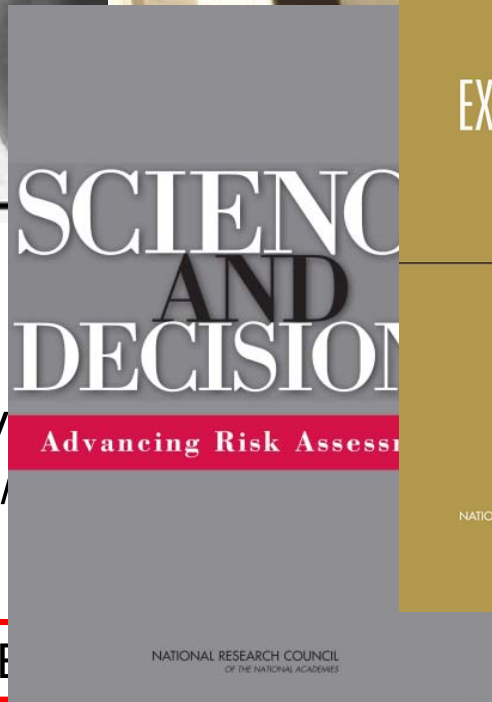
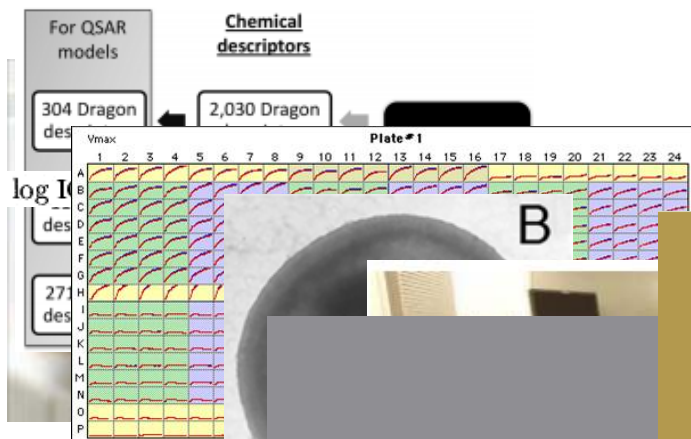


# Outline

- The system is not efficient
- **We need a change of paradigm (the RISK21 example)**
- Some thoughts on future direction



# Need to improve the system



Reference v  
[RV] = POD/

$$MOE = POD/E$$

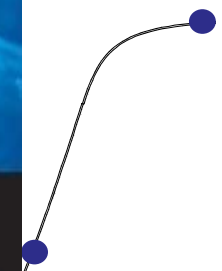
characterisation



UNIVERSITÀ DEGLI STUDI DI MILANO  
FACOLTÀ DI MEDICINA E CHIRURGIA



International Centre for Pesticides and  
Health Risk Prevention



# A change in philosophy

- From
  - Do all the toxicology then think about the risk assessment, anything less is second best or even unacceptable
- To
  - **Think** about the problem that needs to be addressed, then **select** sources of information which will have the most value





# Problem Formulation: The Starting Point



[www.hesiglobal.org](http://www.hesiglobal.org)

- **Sets out:**
  - Objectives
  - Scope
  - Hypotheses
  
- **Asks:**
  - what do you know?
  - what do you need to know?
  - How do you know when you're done?

**Enough precision to make a decision**



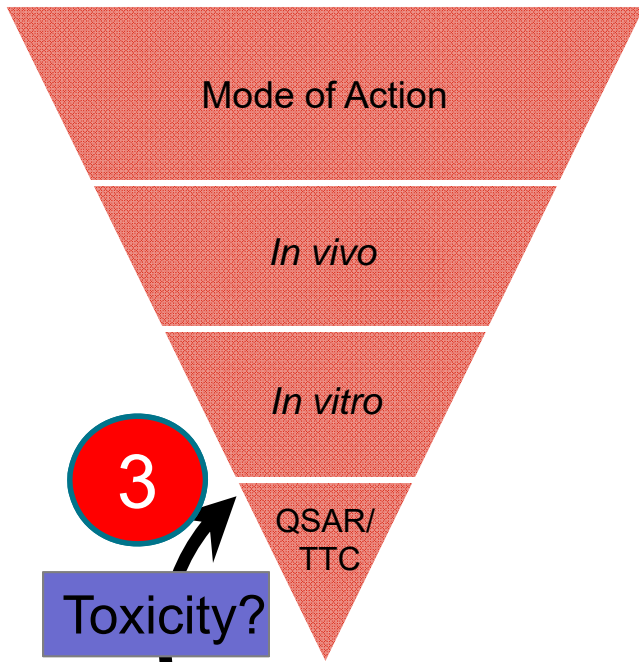
UNIVERSITÀ DEGLI STUDI DI MILANO  
FACOLTÀ DI MEDICINA E CHIRURGIA



International Centre for Pesticides and  
Health Risk Prevention

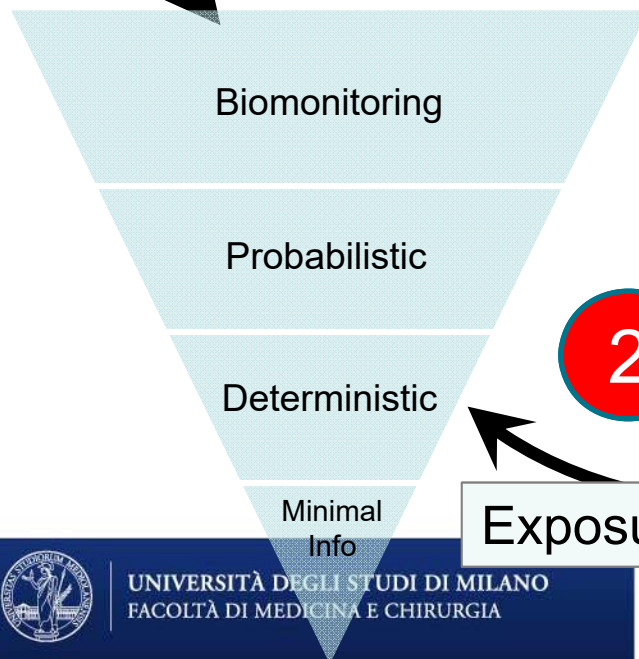
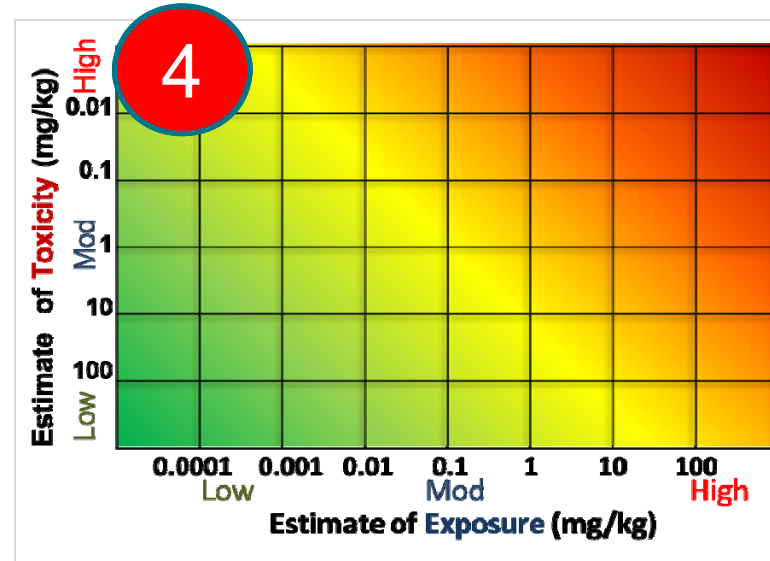


www.RISK21.org



Risk? Safety?

3  
Toxicity?

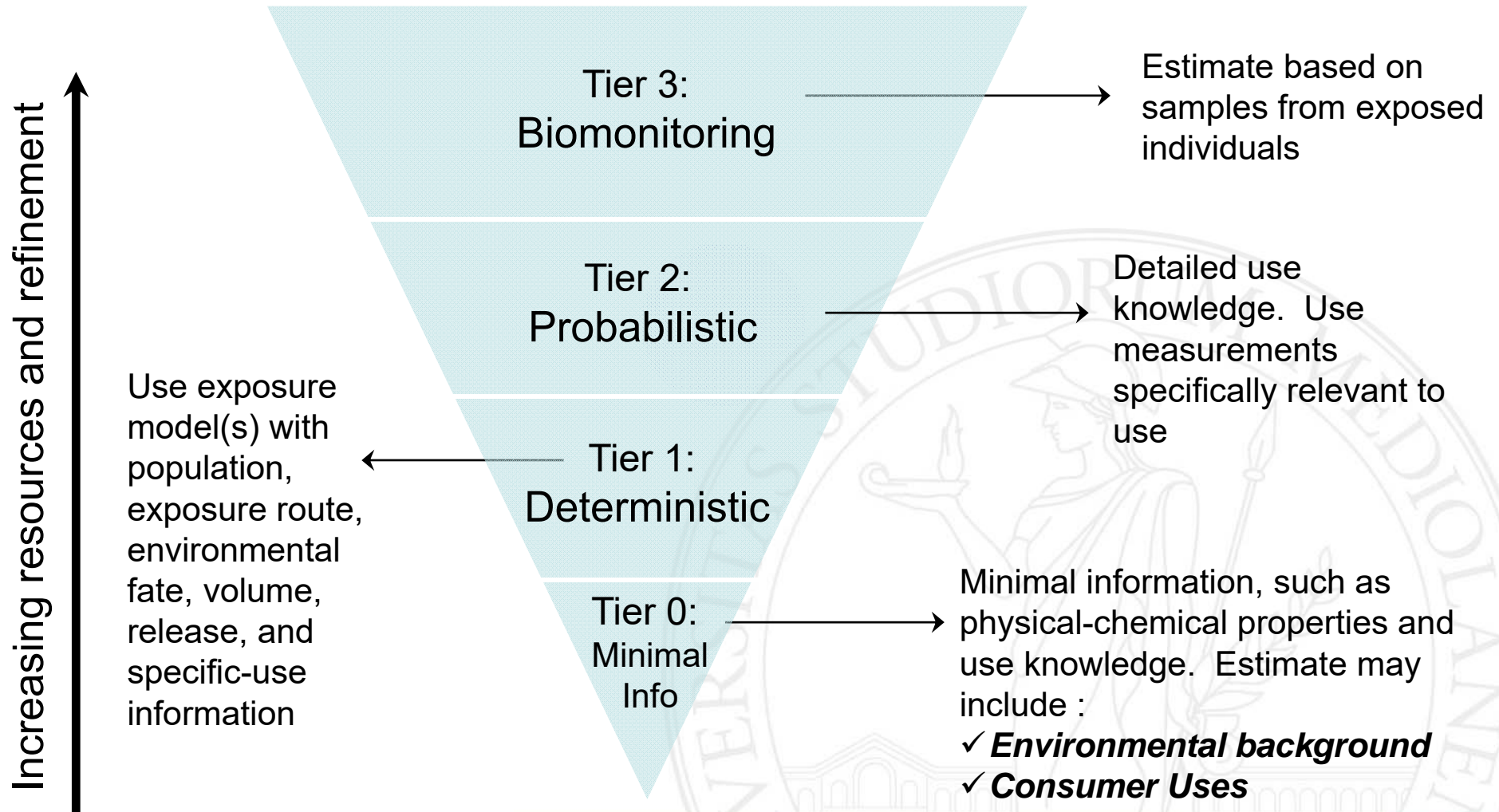


2  
Exposure?

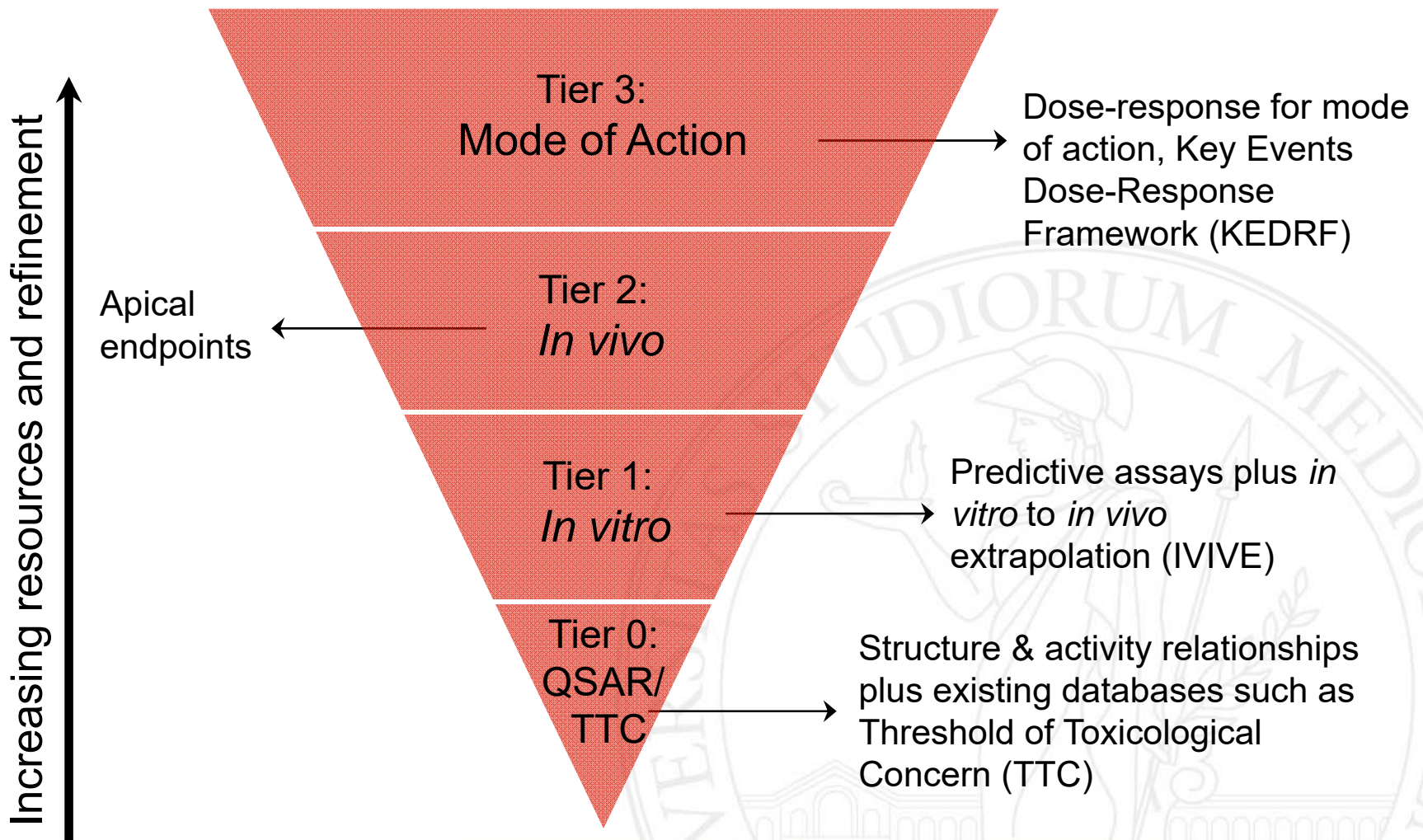
1  
Problem Formulation

Conclude

# Enough Precision for Exposure Estimate



# Enough Precision for Toxicity Estimate







## Problem Formulation

- Can “Pseudomethrin” be used on bed nets to protect against mosquito bites?
- 11<sup>th</sup> pyrethroid
- Determine reasonable certainty of no harm for...
  - Bed-net dipping
  - Sleeping under treated net
- Use no more than 50 animals



# Tier 0 Exposure



- Phys/Chem: Low volatility; therefore, inhalation negligible.
- Sub-chronic to chronic duration

Use	Age	Dermal contact (mg/kg/d)	Hand to mouth (mg/kg/d)	Net mouthing (mg/kg/d)	Total / aggregate (mg/kg/d)
Net dipping (single exposure)	Adult	0.03 – 0.7	N/A	N/A	0.03 – 0.7
	Child	0.05 – 1.0	N/A	N/A	0.05 – 1.0
	Infant	N/A	N/A	N/A	N/A
Sleeping under net (chronic exposure)	Adult	0.0002 – 0.16	N/A	N/A	0.0002 – 0.16
	Child	0.0001 – 0.08	2e-6 – 0.006	N/A	0.0001 – 0.086
	Infant	0.0005 – 0.4	7e-6 – 0.003	0.01 – 0.04	<b>0.0106 – 0.443</b>

*WHO (2004): A generic risk assessment model for insecticide treatment and subsequent use of mosquito nets”*

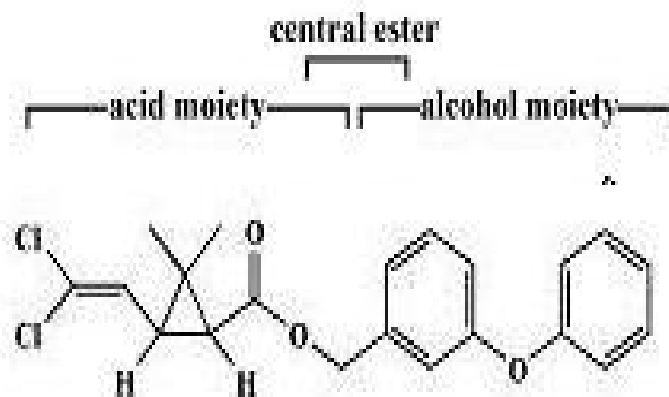


# Pyrethroid Neurotoxicity

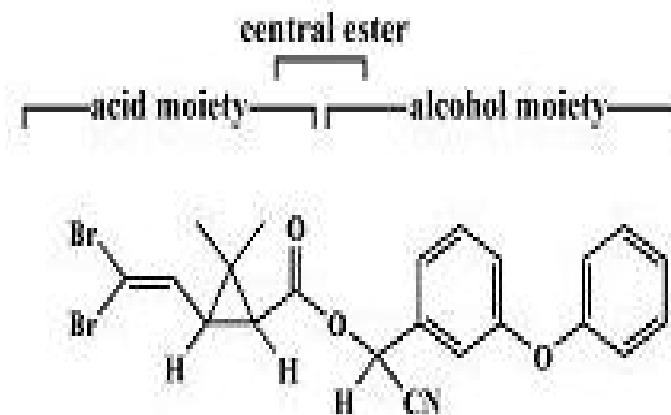


Administration to test animals and insects has identified two distinct poisoning syndromes:

- Type I: Aggressive sparring, increased sensitivity to external stimuli, fine tremors progressing to whole body tremors
- Type II: Pawing and burrowing, profuse salivation, coarse tremors progressing to seizures
- Mixed: some pyrethroids cause signs of both syndromes



Permethrin (1)



Deltamethrin (9)



# Toxicity Values for Pyrethroids



Type I non-cyano

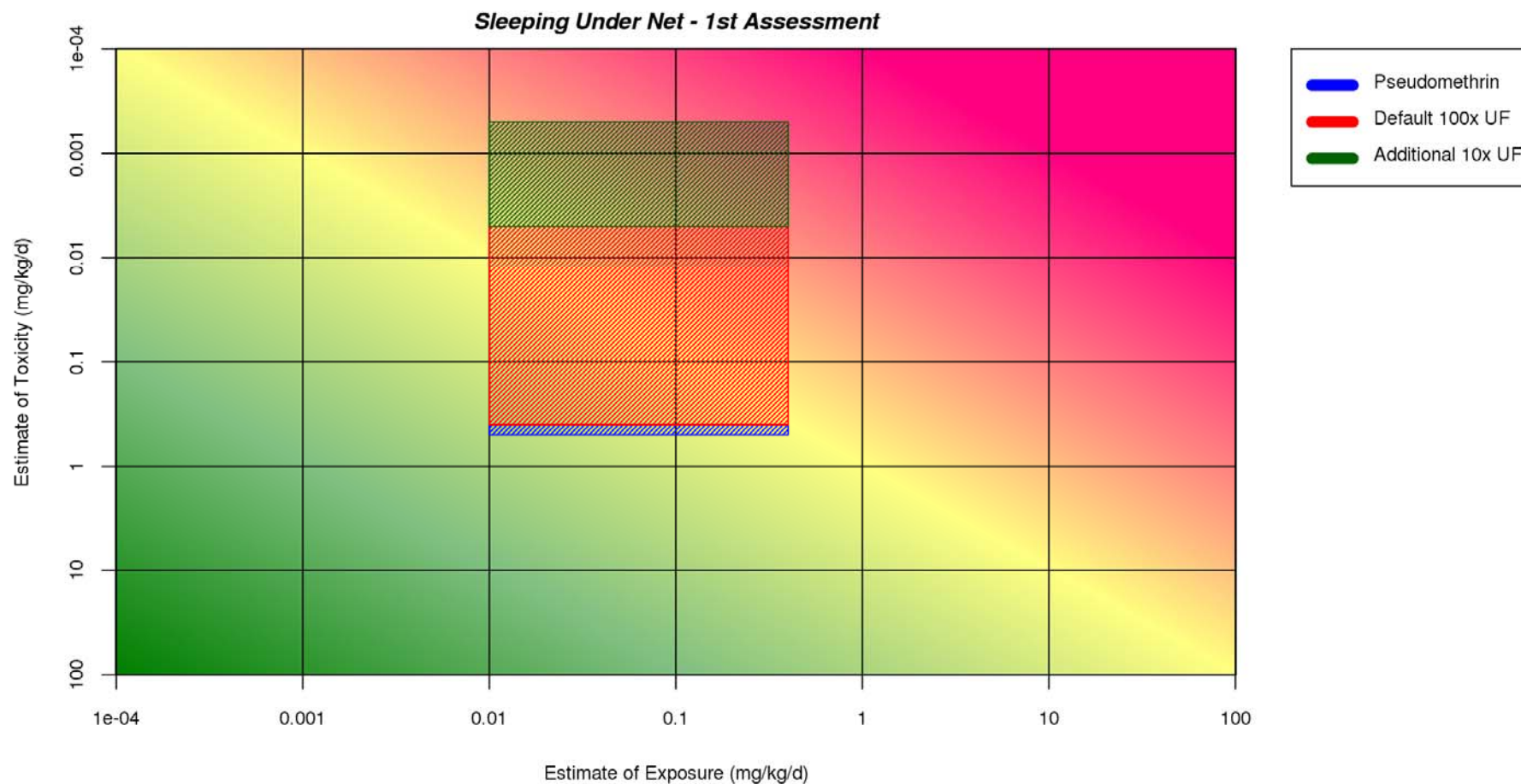
Type II alpha-cyano

		<i>Permethrin</i>	<i>Bifenthrin</i>	<i>Resmethrin</i>	<i>S-Bioallethrin</i>	<i>Cyfluthrin</i>	<i>Cypermethrin</i>	<i>Pseudomethrin</i>	<i>Esfenvalerate</i>	<i>Fenpropathrin</i>	<i>lambda-Cyhalothrin</i>
Short-term/ Acute	BMD20 (Single Dose)	156	14.3	<b>291</b>	135	12.6	76	14.5	40.5	35	<b>8.9</b>
Intermed.	Ref 90d NOEL	5	2.5	<b>80</b>	20	1.3	12.5	1	7.5	7	<b>0.5</b>
Long-Term/ Chronic	Ref Chron NOEL	5	1.5	3	<b>14</b>	6.2	7.5	1	2	3	<b>0.5</b>

Highest and lowest values for each row are **bolded**



# Sleeping under net: Tier 0

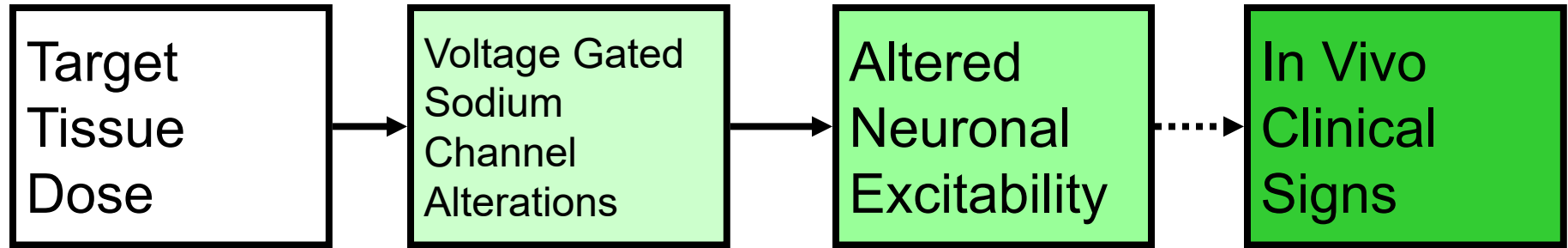


Exposure range: 0.1 – 0.443 mg/kg/d (infant, aggregate, sleeping)

Toxicity value: most potent chronic NOAEL (lambda-cyhalothrin): 0.5 + UFs



# Common Mechanism of Toxicity



All Pyrethroids modify the kinetics of VGSC activation and inactivation in mammalian neurons

Changes in VGSC kinetics produce alterations in neuronal excitability.

Changes in neuronal excitability underlie the clinical signs of pyrethroid toxicity



# Toxicity Values for Pyrethroids



Type I non-cyano

Type II alpha-cyano

	<i>Permethrin</i>	<i>Bifenthrin</i>	<i>Resmethrin</i>	<i>S-Bioallethrin</i>	<i>Cyfluthrin</i>	<i>Cypermethrin</i>	<i>Pseudomethrin</i>	<i>Esfenvalerate</i>	<i>Fenpropathrin</i>	<i>lambda-Cyhalothrin</i>
BMD20	156	14.3	291	135	12.6	76	14.5	40.5	35	<b>8.9</b>
Ref 90d NOEL	5	2.5	80	20	1.3	12.5	1	7.5	7	<b>0.5</b>
Ref Chron NOEL	5	1.5	3	14	6.2	7.5	1	2	3	<b>0.5</b>
MEA IC50	719	439	1685	1525	305	181	<b>175</b>	809	1518	<b>25</b>

5-fold difference in potency between pseudomethrin and most-potent

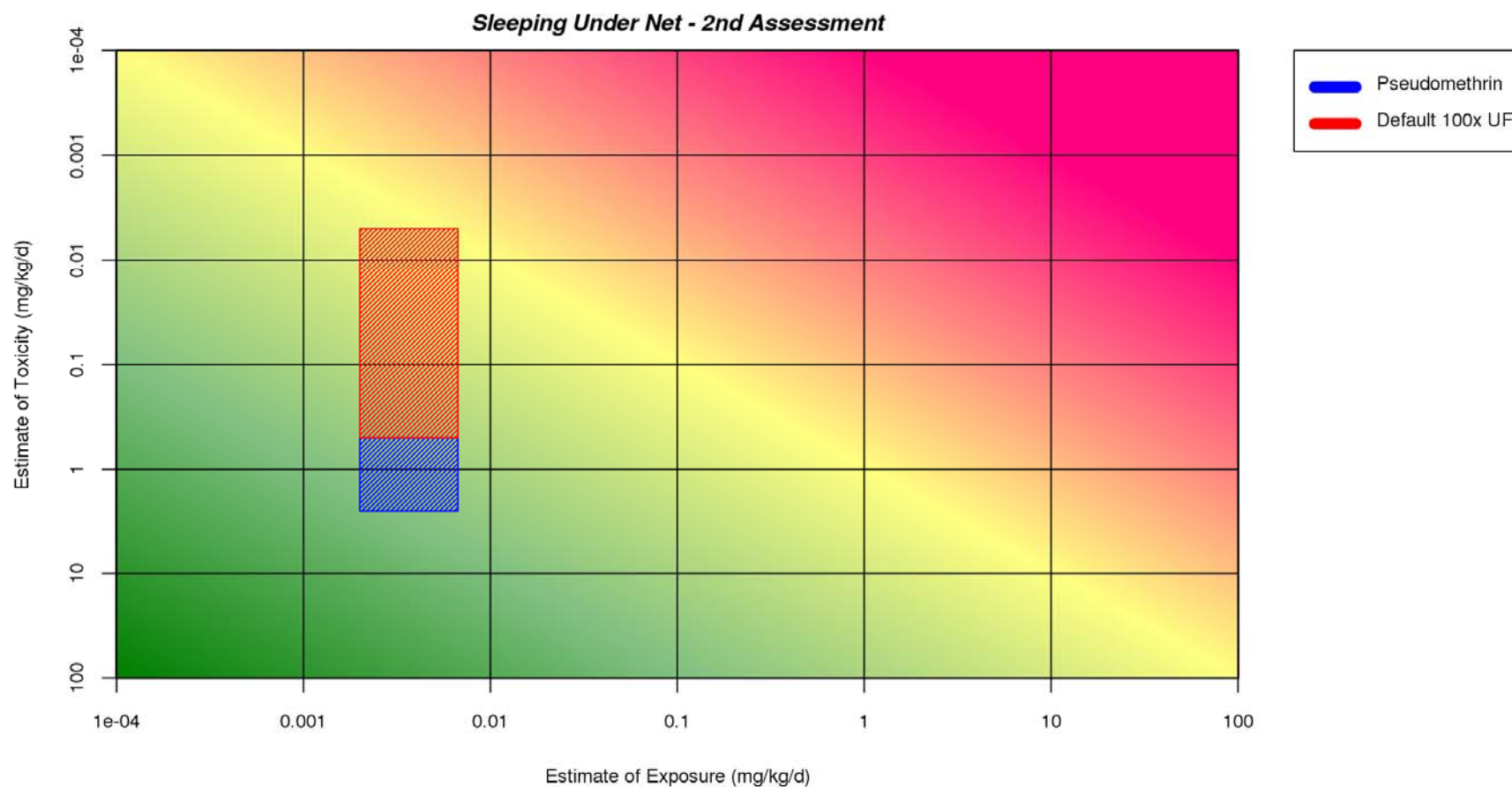
nd



UN  
FA

Health Risk Prevention

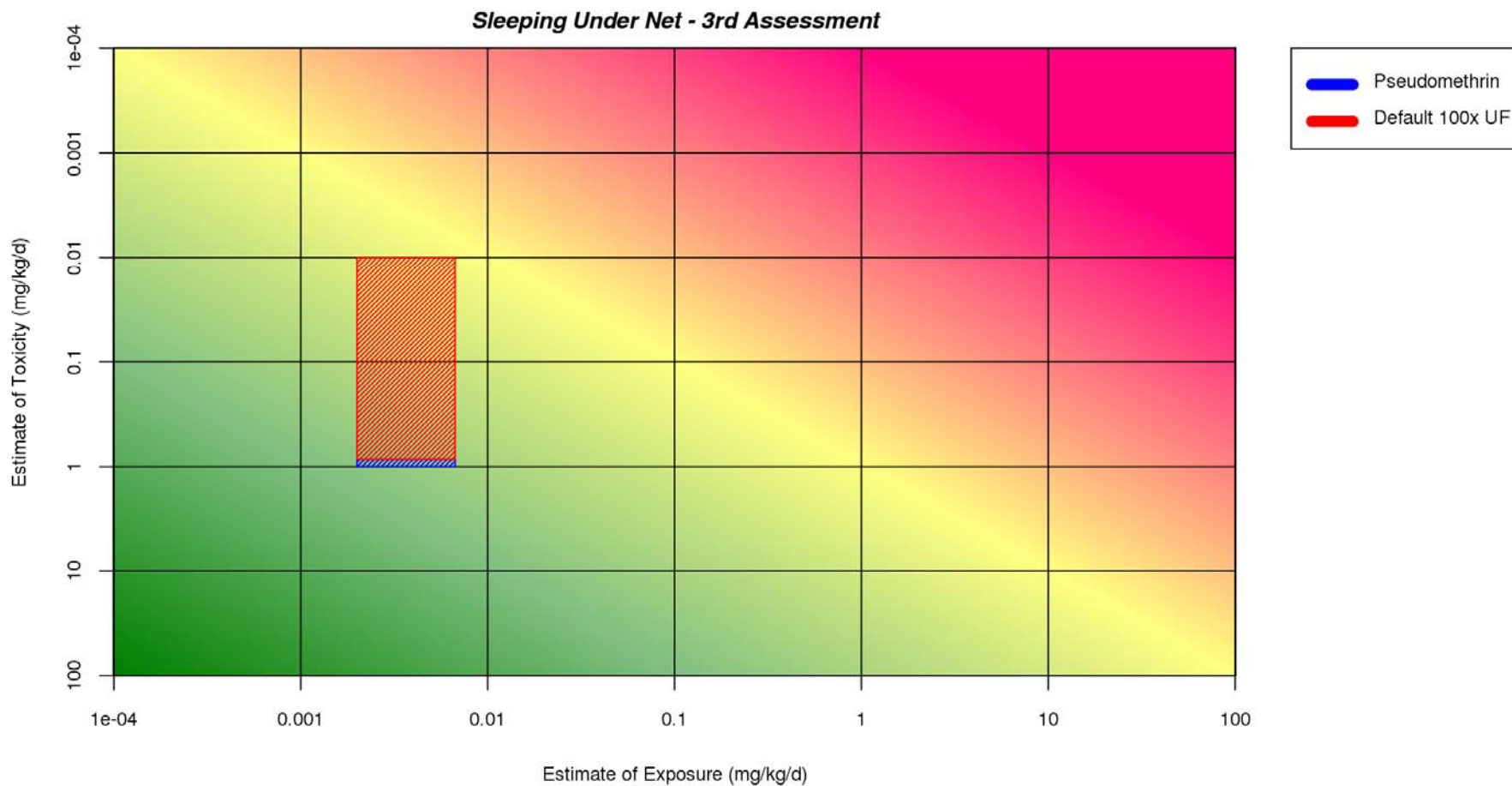
# Sleeping under net: 2<sup>nd</sup> Assessment



Exposure range: 0.002 – 0.0067 (infant, aggregate, sleeping) –dermal absorption estimates  
Toxicity range: 0.5 – 2.5 [derived from most potent chronic NOAEL (lambda-cyhalothrin) and 5-fold lower potency of pseudomethrin based on MEA IC50] + UFs



# Sleeping under net: 3<sup>rd</sup> Assessment



Exposure range: same as previous

Toxicity range: 5-day dog study (neurological NOAEL of 1 mg/kg/d) with UF and in vitro screens





# Outline

- The system is not efficient
- We need a change of paradigm (the RISK21 example)
- **Some thoughts on future direction**



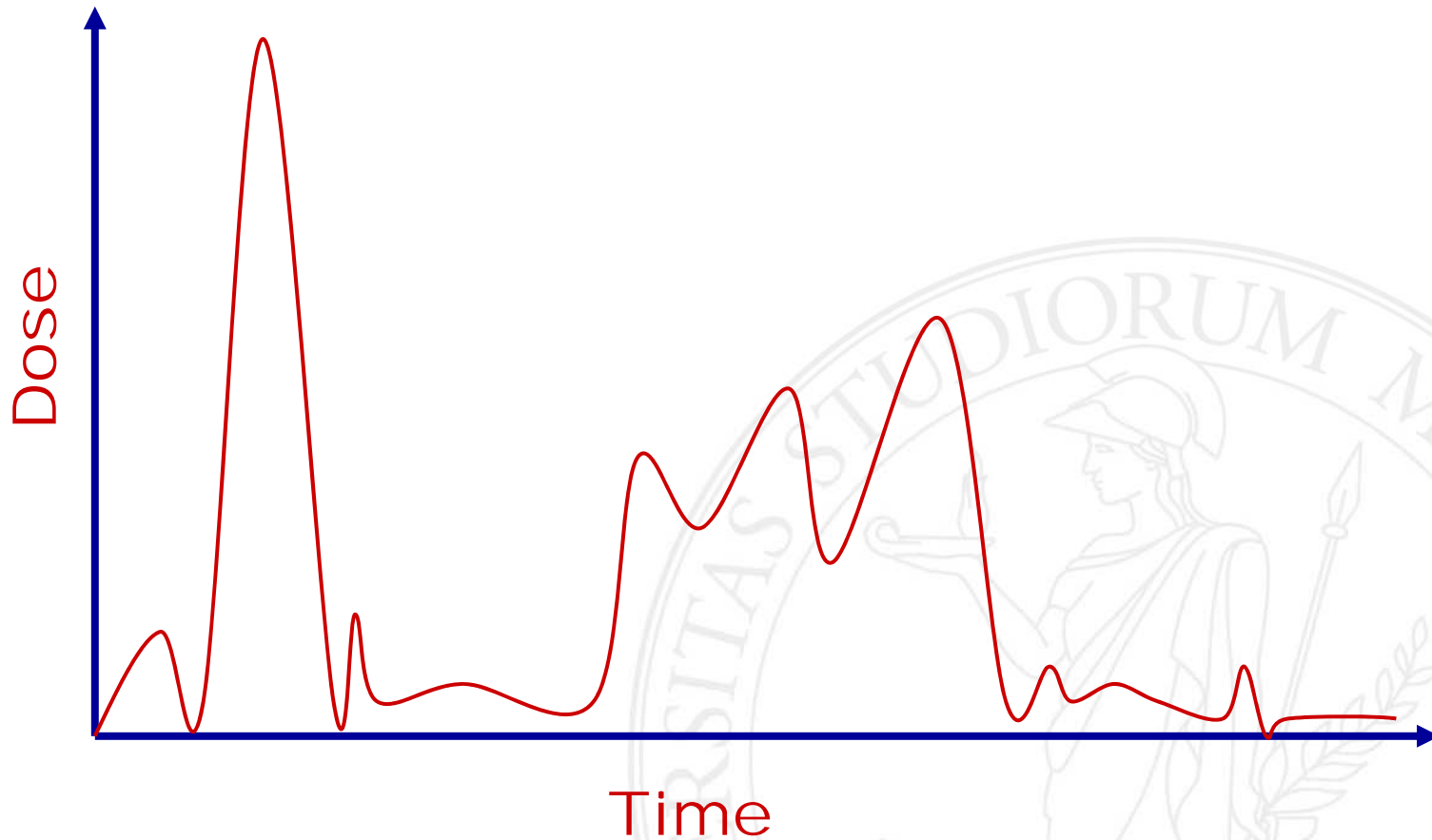


# Some thoughts on future direction(s)

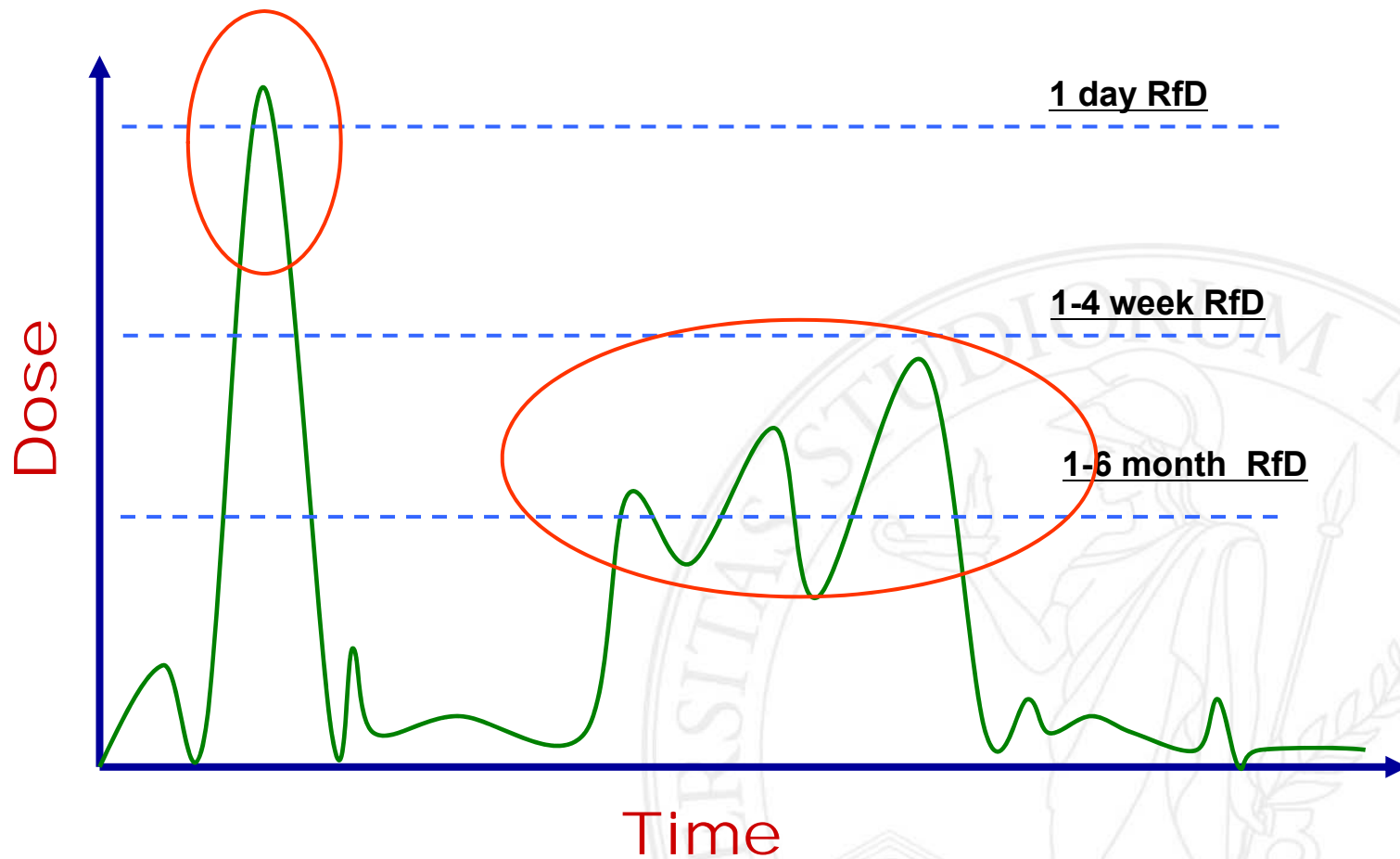
- **We need to improve our exposure assessment**
- We need to understand the meaning and how to use the new (and old) *in silico* and *in vitro* tools



# How do we deal with varying or intermittent exposures?



# How do we deal with varying or intermittent exposures?



# Some thoughts on future direction

- We need to improve our exposure assessment
- **We need to understand the meaning and how to use the new (and old) *in silico* and *in vitro* tools**



# *in vitro* tools

- “omics”
- High-throughputs
- Receptor assays
- .....

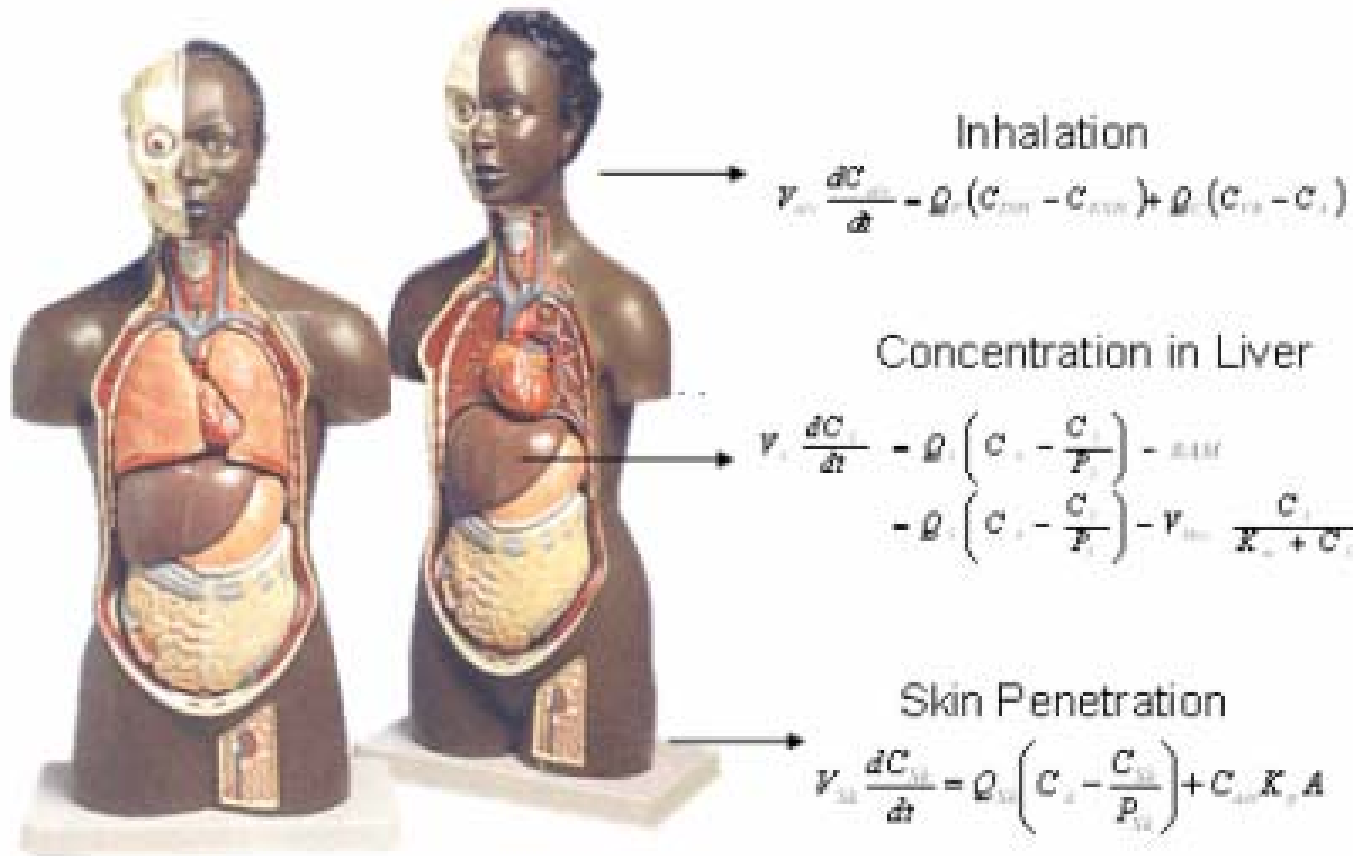


# *In silico* tools

- (Q)SAR
- Receptor/protein docking
- TTC
- Read-across
- PBPK-PD
- ....



# PB-PK modeling internal dose



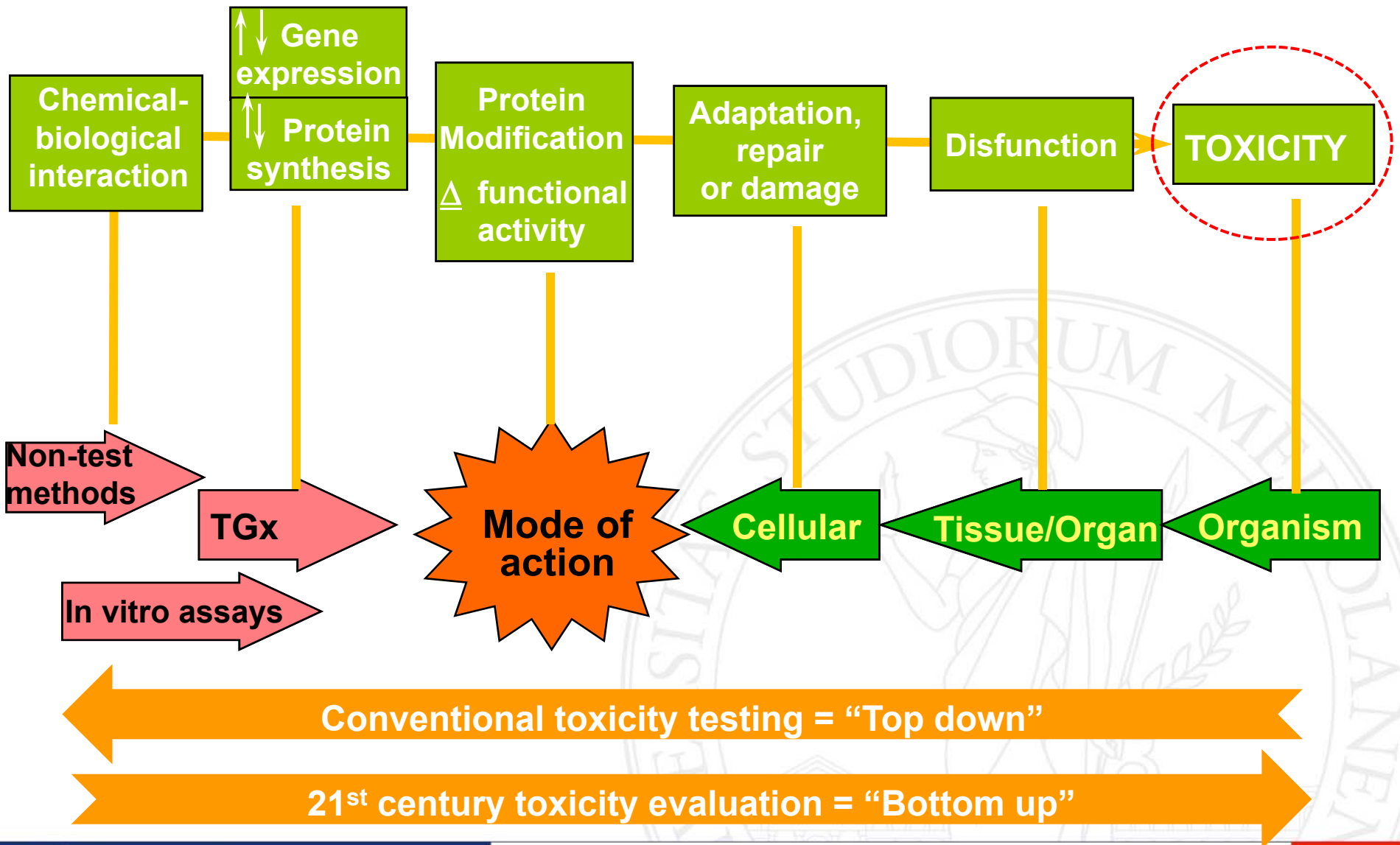


We need to understand the meaning and how to use the new (and old) *in silico* and *in vitro* tools **because.....**

**we need a shift in the approach to toxicology**



# Use of the MoA (AOP) concept



Thank you  
for your attention  
and patience



UNIVERSITÀ DEGLI STUDI DI MILANO  
FACOLTÀ DI MEDICINA E CHIRURGIA



International Centre for Pesticides and  
Health Risk Prevention