NATIONAL TOXICOLOGY PRÓGRAM Technical Report Series No. 243



CARCINOGENESIS STUDIES OF

TRICHLOROETHYLENE

(WITHOUT EPICHLOROHYDRIN)

(CAS NO. 79-01-6)

IN F344/N RATS AND B6C3F₁ MICE

(GAVAGE STUDIES)

U.S. DEPARTMENT OF HEALTH AND HUMAN SERVICES Public Health Service National Institutes of Health

NATIONAL TOXICOLOGY PROGRAM

The National Toxicology Program (NTP), established in 1978, develops and evaluates scientific information about potentially toxic and hazardous chemicals. This knowledge can be used for protecting the health of the American people and for the primary prevention of chemically induced disease. By bringing together the relevant programs, staff, and resources from the U.S. Public Health Service, DHHS, the National Toxicology Program has centralized and strengthened activities relating to toxicology research, testing and test development/validation efforts, and the dissemination of toxicological information to the public and scientific communities and to the research and regulatory agencies.

The NTP is comprised of four charter DHHS agencies: the National Cancer Institute, National Institutes of Health; the National Institute of Environmental Health Sciences, National Institutes of Health; the National Center for Toxicological Research, Food and Drug Administration; and the National Institute for Occupational Safety and Health, Centers for Disease Control. In July 1981, the Carcinogenesis Bioassay Testing Program, NCI, was transferred to the NIEHS.

Special note: This Technical Report was peer reviewed in public session and approved by the NTP Board of Scientific Counselors' Technical Reports Review Subcommittee on June 16 and September 22, 1982 [see pages 11-12]. Thereafter, the NTP adopted the policy that the experimental data and laboratory records from all NTP Toxicology and Carcinogenesis Studies not yet printed and distributed would be audited. [A summary of the data audit is presented in Appendix L.] Consequently, printing and distribution of this Technical Report have been delayed, and the format differs from that of Technical Reports peer reviewed more recently. The categories of evidence of carcinogenicity adopted by the NTP in June 1983 were not used to evaluate these data. This final Technical Report supersedes all previous drafts of this report that have been distributed.

NTP TECHNICAL REPORT

ON THE

CARCINOGENESIS STUDIES OF

TRICHLOROETHYLENE

(WITHOUT EPICHLOROHYDRIN)

(CAS NO. 79-01-6)

IN F344/N RATS AND B6C3F1 MICE

(GAVAGE STUDIES)

NATIONAL TOXICOLOGY PROGRAM P.O. Box 12233 Research Triangle Park, NC 27709

May 1990

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U.S. DEPARTMENT OF HEALTH AND HUMAN SERVICES Public Health Service National Institutes of Health

NOTE TO THE READER

This is one in a series of experiments designed to determine whether selected chemicals produce cancer in animals. Chemicals selected for testing in the NTP carcinogenesis program are chosen primarily on the bases of human exposure, level of production, and chemical structure. Selection per se is not an indicator of a chemical's carcinogenic potential. Negative results, in which the test animals do not have a greater incidence of cancer than control animals, do not necessarily mean that a test chemical is not a carcinogen, inasmuch as the experiments are conducted under a limited set of conditions. Positive results demonstrate that a test chemical is carcinogenic for animals under the conditions of the test and indicate that exposure to the chemical has the potential for hazard to humans. The determination of the risk to humans from chemicals found to be carcinogenic in animals requires a wider analysis which extends beyond the purview of this study.

This study was initiated by the National Cancer Institute's Carcinogenesis Testing Program, now part of the National Institute of Environmental Health Sciences, National Toxicology Program.

Comments and questions about the National Toxicology Program Technical Reports on Carcinogenesis Studies should be directed to the National Toxicology Program, located at Research Triangle Park, NC 27709 (919-541-3991) or at Room 835B, Westwood Towers, 5401 Westbard Ave., Bethesda, MD 20205 (301-496-1152).

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TABLE OF CONTENTS

- -

		0
	tract	7
	tributors	9
		10
Sum	mary of Peer Review Comments	11
I.	Introduction	15
II.	Materials and Methods	19
	Chemical Analyses	20
	Dose Preparation	20
	Thirteen-Week Studies	21
	Two-Year Studies	21
	Study Design	21
		21
		22
		22
		22
III.		27
		28
		28
		29
		29
		29
		29 29
		29 32
		32 40
		40 40
		42
		42
		42
		42
		45
IV.	Discussion and Conclusions	53
V.	References	57

TABLES

Table 1	Experimental Design and Materials and Methods	24
Table 2	Survival and Mean Body Weights of F344/N Rats Administered Trichloroethylene in Corn Oil by Gavage for 13 Weeks	28
Table 3	Mean Body Weights (Relative to Controls) of Rats Administered Trichloroethylene in Corn Oil by Gavage for Two Years	32
Table 4	Analysis of Primary Tumors in Male Rats	34
Table 5	Analysis of Primary Tumors in Female Rats	38
Table 6	Survival, Mean Body Weights, and Mean Liver Weights of Mice Administered Trichloroethylene in Corn Oil by Gavage for 13 Weeks	41
Table 7	Mean Body Weights (Relative to Controls) of Mice Administered Trichloroethylene in Corn Oil by Gavage for Two Years	42
Table 8	Analysis of Primary Tumors in Male Mice	46
Table 9	Analysis of Primary Tumors in Female Mice	49

Trichloroethylene

FIGURES

Figure 1	Growth Curves for Rats Administered Trichloroethylene in Corn Oil by Gavage	30
Figure 2	Survival Curves for Rats Administered Trichloroethylene in Corn Oil by Gavage	31
Figure 3	Growth Curves for Mice Administered Trichloroethylene in Corn Oil by Gavage	43
Figure 4	Survival Curves for Mice Administered Trichloroethylene in Corn Oil by Gavage	44
Figure 5	Infrared Absorption Spectrum of Trichloroethylene (Lot No. TB 05-206AA)	152
Figure 6	Infrared Absorption Spectrum of Trichloroethylene (Lot No. TB 08-039AA)	153
Figure 7	Nuclear Magnetic Resonance Spectrum of Trichloroethylene (Lot No. TB 05-206AA)	154
Figure 8	Nuclear Magnetic Resonance Spectrum of Trichloroethylene (Lot No. TB 08-039AA)	155
Figure 9	Infrared Absorption Spectrum of Precipitate Found in Trichloroethylene (Lot No. TB 05-206AA)	162

APPENDIXES

Appendix A	Summary of the Incidence of Neoplasms in Rats Administered Trichloroethylene in Corn Oil by Gavage	61
Table A1	Summary of the Incidence of Neoplasms in Male Rats Administered Trichloroethylene in Corn Oil by Gavage	62
Table A2	Summary of the Incidence of Neoplasms in Female Rats Administered Trichloroethylene in Corn Oil by Gavage	67
Table A3	Individual Animal Tumor Pathology of Male Rats in the 2-Year Study of Trichloroethylene	72
Table A4	Individual Animal Tumor Pathology of Female Rats in the 2-Year Study of Trichloroethylene	80
Appendix B	Summary of the Incidence of Neoplasms in Mice Administered Trichloroethylene in Corn Oil by Gavage	89
Table B1	Summary of the Incidence of Neoplasms in Male Mice Administered Trichloroethylene in Corn Oil by Gavage	90
Table B2	Summary of the Incidence of Neoplasms in Female Mice Administered Trichloroethylene in Corn Oil by Gavage	93
Table B3	Individual Animal Tumor Pathology of Male Mice in the 2-Year Study of Trichloroethylene	96
Table B4	Individual Animal Tumor Pathology of Female Mice in the 2-Year Study of Trichloroethylene	100
Appendix C	Summary of the Incidence of Nonneoplastic Lesions in Rats Administered Trichloroethylene in Corn Oil by Gavage	105
Table C1	Summary of the Incidence of Nonneoplastic Lesions in Male Rats Administered Trichloroethylene in Corn Oil by Gavage	106
Table C2	Summary of the Incidence of Nonneoplastic Lesions in Female Rats Administered Trichloroethylene in Corn Oil by Gavage	115

Appendix D	Summary of the Incidence of Nonneoplastic Lesions in Mice Administered Trichloroethylene in Corn Oil by Gavage	123
Table D1	Summary of the Incidence of Nonneoplastic Lesions in Male Mice Administered Trichloroethylene in Corn Oil by Gavage	124
Table D2	Summary of the Incidence of Nonneoplastic Lesions in Female Mice Administered Trichloroethylene in Corn Oil by Gavage	131
Appendix E	Historical Incidences of Tumors in F344/N Rats and B6C3F ₁ Mice Receiving Corn Oil by Gavage for Two Years	137
Table El	Historical Incidence of Renal Tubular-Cell Adenomas, Carcinomas, or Adenocarcinomas in Male F344/N Rats Receiving Corn Oil by Gavage	
Table E2	Historical Incidence of Mesotheliomas in Male F344/N Rats Receiving Corn Oil by Gavage	138
Table E3	Historical Incidence of Pituitary Tumors in Male F344/N Rats Receiving Corn Oil by Gavage	139
Table E4	Historical Incidence of Pituitary Tumors in Female F344/N Rats Receiving Corn Oil by Gavage	139
Table E5	Historical Incidence of Uterine Tumors in Female F344/N Rats Receiving Corn Oil by Gavage	140
Table E6	Historical Incidence of Hematopoietic Tumors in Female F344/N Rats Receiving Corn Oil by Gavage	140
Table E7	Historical Incidence of Liver Tumors in Male B6C3F ₁ Mice Receiving Corn Oil by Gavage	141
Table E8	Historical Incidence of Liver Tumors in Female B6C3F ₁ Mice Receiving Corn Oil by Gavage	141
Table E9	Historical Incidence of Hematopoietic Tumors in Female B6C3F ₁ Mice Receiving Corn Oil by Gavage	
Table E10	Historical Incidence of Harderian Gland Tumors in B6C3F ₁ Mice Receiving Corn Oil by Gavage	
Appendix F	Sentinel Animal Serology Data for the Trichloroethylene Studies	143
Table F1	Murine Virus Antibody Determinations for Rats in the 2-Year Study of Trichloroethylene	145
Table F2	Murine Virus Antibody Determinations for Mice in the 2-Year Study of Trichloroethylene	
Appendix G	Analysis of Trichloroethylene (Lot Numbers TB 05-206AA and TB 08-039AA)—Midwest Research Institute	147
Appendix H	Identification of Foreign Material Found in Trichloroethylene (Lot No. TB 05-206AA)	159
Appendix I	Analysis of Trichloroethylene in Corn Oil for Stability of Trichloroethylene at Room Temperature—Midwest Research Institute	165
Appendix J	Analysis of Trichloroethylene in Corn Oil for Stability of Trichloro- ethylene at 4°C—Papanicolaou Cancer Research Institute	
Appendix K	Analysis of Trichloroethylene in Corn Oil for Concentration of Trichloro- ethylene—Papanicolaou Cancer Research Institute	
Table K1	Analysis of Trichloroethylene/Corn Oil Mixtures	
Appendix L	Audit Summary	173

CARCINOGENESIS STUDIES OF TRICHLOROETHYLENE



TRICHLOROETHYLENE

CAS NO. 79-01-6 C₂HCl₃ Mol. Wt. 131.40

ABSTRACT

Carcinogenesis studies of epichlorohydrin-free trichloroethylene (TCE) were conducted by administering the test chemical in corn oil by gavage to groups of 50 male and 50 female F344/N rats and $B6C3F_1$ mice. Dosage levels were 500 and 1,000 mg/kg for rats and 1,000 mg/kg for mice. Trichloroethylene was administered five times per week for 103 weeks, and surviving animals were killed between weeks 103 and 107. Groups of 50 rats and 50 mice of each sex received corn oil by gavage on the same schedule and served as vehicle controls. Groups of 50 male and 50 female rats were used as untreated controls.

The dosage levels selected for the 2-year study were based on the results of the 13-week studies. Groups of 10 male and 10 female rats received TCE by gavage at doses of 125 to 2,000 mg/kg (males) and 62.5 to 1,000 mg/kg (females) for 13 weeks. Groups of 10 male and 10 female mice received gavage doses of 375 to 6,000 mg/kg of TCE for 13 weeks. Survival, body weight gains, and previous experience with TCE were used to select doses for the 2-year study. All rats survived the 13-week study, but males receiving 2,000 mg/kg exhibited a 24% difference in final body weight. At the 1,000 mg/kg dose, final body weights for males (-3%) and for females (-2%) were similar to those of controls. The doses selected for the 2-year study in rats were 500 and 1,000 mg/kg for both sexes. A total of 8/10 male mice and 10/10 female mice receiving doses of TCE as high as 1,500 mg/kg survived the 13-week experimental period. The single dosage level selected for the 2-year study in mice was 1,000 mg/kg for both sexes. This dose was less than the high dose used in the earlier bioassay in B6C3F₁ mice (2,339 mg/kg for males and 1,739 for females) and was similar to the previous low doses (1,169 mg/kg for males and 869 for females).

In the 2-year study, the survival of both low and high dose male rats and dosed male mice was less ($P \le 0.005$) than that of the vehicle controls. Mean body weights of dosed rats of each sex were lower than those of the vehicle controls, and after week 65, the decrements in body weight gains were dose related. The mean body weight of dosed male mice was lower than that of the vehicle controls throughout the study, while those of dosed and vehicle control female mice were comparable.

Cytomegaly (toxic nephrosis) of the kidney was observed in 96/98 male and in 97/97 female rats given TCE, with none being found in male or female vehicle control rats. This lesion was more severe in males, particularly in the high dose group. Cytomegaly was observed in 45/50 male mice and in 48/49 female mice administered TCE, and in none of the vehicle controls. Renal tubular cell adenocarcinomas were found in three high dose male rats; these neoplasms were observed in those male rats killed at the end of the study (0/33, 0/20, and 3/16, 19%). The incidence in the high dose male rats at the end of the study was greater (P<0.05) than that in the controls. Renal tubular cell adenocarcinomas are considered uncommon occurrences in F344/N rats, with 3/748 (0.4%) being observed in historical vehicle gavage controls. Additional renal tumors in dosed male rats included one transitional cell carcinoma of the renal pelvis and two tubular cell adenomas in low dose animals and one carcinoma of the renal pelvis in a high dose animal. No renal neoplasms were found in vehicle control rats; one untreated control male rat had a transitional cell papilloma of the renal pelvis. In female rats, one tubular cell adenocarcinoma was found in the high dose group.

An increased incidence (P<0.05, life table) of peritoneal mesotheliomas was detected in low dose male rats (control, 1/50; low dose, 5/50; high dose, 1/49). Mesotheliomas have been diagnosed in 16/752 (2.1%) historical vehicle control male F344/N rats, and the increased incidence in the present study may have been related to the administration of TCE.

The results in male F344/N rats were considered equivocal for detecting a carcinogenic response because both groups receiving TCE showed significantly reduced survival compared to vehicle controls (35/50, 70%; 20/50, 40%; 16/50, 32%) and because 20% of the animals in the high dose group were killed accidently by gavage error.

Negative trends were observed for chromophobe adenomas of the pituitary gland and for endometrial stromal polyps in female rats. These decreases were not considered to be related to the administration of TCE.

The administration of TCE to mice caused increased incidences of hepatocellular carcinoma in males (control, 8/48; dosed, 31/50; P<0.001) and in females (control, 2/48; dosed, 13/49; P<0.005). Hepatocellular carcinomas metastasized to the lungs in five dosed male mice and one control male mouse, and none was observed in females. The incidence of hepatocellular adenomas was increased in male mice (control, 7/48; dosed 14/50) and in female mice (control, 4/48; dosed, 16/49; P<0.05).

Under the conditions of these studies, epichlorohydrin-free trichloroethylene caused renal tubularcell neoplasms in male F344/N rats, produced toxic nephrosis in both sexes, and shortened the survival time of males. This experiment in male F344/N rats was considered to be inadequate to evaluate the presence or absence of a carcinogenic response to trichloroethylene. For female F344/N rats receiving trichloroethylene, containing no epichlorohydrin, there was no evidence of carcinogenicity. Trichloroethylene (without epichlorohydrin) was carcinogenic for $B6C3F_1$ mice, causing increased incidences of hepatocellular carcinomas in males and females and of hepatocellular adenomas in females.

CONTRIBUTORS

The carcinogenesis studies of trichloroethylene were conducted at Papanicolaou Cancer Research Institute under a subcontract to Tracor Jitco, Inc., the prime contractor for the Carcinogenesis Testing Program. The chronic study was begun in June 1978 and completed in June 1980.

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The pathology report and selected slides were evaluated on 1 June 1981 by the NTP Pathology Working Group.

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SUMMARY OF PEER REVIEW COMMENTS ON THE CARCINOGENESIS STUDIES OF TRICHLOROETHYLENE (WITHOUT EPICHLOROHYDRIN)

On 16 June and on 22 September 1982 this technical report underwent peer review by the National Toxicology Program Board of Scientific Counselors' Technical Reports Review Subcommittee and associated Panel of Experts. The public review meetings began at 9:00 a.m. in the Conference Center, Building 101, South Campus, National Institute of Environmental Health Sciences. Research Triangle Park, North Carolina. The following precis represents the critiques made by the principal reviewers, as well as comments from and discussion by the Peer Review Panel, NTP staff, and attendees.

Peer Review Meeting of 16 June 1982

Dr. Swenberg, a principal reviewer for the report on the carcinogenesis studies of trichloroethylene (TCE) without epichlorohydrin, said the conclusion should be restricted to the renal adenocarcinomas in male rats since there was no evidence for progression of the renal adenomas. The adenomas occurred only in low dose animals and were not present at terminal sacrifice, whereas the adenocarcinomas occurred only in the high dose group and were present only at terminal sacrifice. He opined that the high dose was toxic for male and female rats and male mice, and said this indicates the MTD was exceeded, especially since the rats did not die from renal tumors. He objected to the combining of benign and malignant tumors in the text and in certain tables. Dr. Swenberg requested more explanation for the accidental deaths in high dose male rats and on poor tissue accountability. He concluded that the report should be rewritten and at present, he considered the report unacceptable.

As a second principal reviewer, Dr. Harper said the increased incidence of renal tubular adenomas and carcinomas in male rats may have been confounded because the MTD was exceeded. He noted that since only 3/748 (0.4%) historical controls have had renal tubular adenomas, carcinomas, or adenocarcinomas, and carcinoma of the renal pelvis has never been reported in F344/N rats, the findings in the studies should not be minimized by overstating the effects of exceeding the MTD. He commented that caution should be used in statements speculating on the nongenetic mechanism of carcinogenicity; a misunderstanding of the mechanism could lead to an underestimation of the risk associated with human exposure.

As a third principal reviewer, Dr. Elashoff said that based on the 13-week study, the doses chosen for the chronic study were reasonable but the results from the earlier NCI carcinogenesis studies should have suggested the high dose would have been toxic. He agreed with the conclusions for mice; in male mice, the time to death with hepatocellular adenomas was shorter in the high dose than for vehicle controls; yet, the incidence rate was not increased. With regard to male rats, the high dose induced lethal nontumorigenic toxicity with the evidence based upon the small P-value comparing survivorship curves between each dose group and vehicle controls. One result of this lethality in male rats would be to reduce the number of animals at risk for developing tumors leading to unadjusted incidence analysis of low power. Life table or incidental tumor analyses leads to the conclusions that TCE is carcinogenic, and this becomes also a biological conclusion if the predominant nontumorigenic toxicity, cytomegaly, is not associated with the carcinogenic process. On the other hand, if there is an ambiguous relationship between toxicity and carcinogenicity, no clear statement can be made regarding carcinogenicity, and the validity of the studies for male rats becomes questionable.

Dr. Highland stressed that the high mortality from exceeding the MTD as well as from gavage error in high dose male rats could have led to an underestimation of the carcinogenic effect. Dr. Breslow questioned whether the randomization process might have been faulty. He suggested that the abstract should call attention to the fact that five of the hepatocellular carcinomas in dosed male mice versus only one in controls were metastatic as support for the carcinogenic effect. Drs. Schwetz and Elashoff said the report should indicate whether or not the results from the earlier NCI study were considered in dose setting. Dr. Mirer stated that the findings in mice (a high percentage of males with hepatocellular carcinomas at sacrifice) should be emphasized. He cautioned against drawing a conclusion that the renal tumors in male rats were secondary to the toxic nephrosis, and further that these toxic effects should be explored for significance to human industrial exposure. Several panel members called for more balance and perhaps less speculation in the discussion of genetic and nongenetic effects and mechanisms. Dr. J. Mennear, NTP, responded that the 13-week studies and previous experience were used to select the doses for the 2-year study and the tendency to overestimate the MTD appeared to be a common difficulty with halogenated hydrocarbons, and further discussion would be included. Regarding serology data, Dr. Mennear said serologies were done and would be included in the report. (See pages 29 and 42.)

In discussion from the floor, Mr. L. Schlossberg, Detrex Chemical Industries, read a letter and reports from three scientists who contended that poor survival and renal tumors in male rats, when the MTD was exceeded, may be due to a combination of nongenetic factors such as kidney damage and immune system depression. Others focused on the potential confounding effects of toxicity in male rats, emphasizing that the renal nephrosis was in the same organ as the tumors.

Dr. Scala suggested there were two issues: acceptability of the assay and acceptability of the report. He opined that the assay was marginally acceptable but the report needed to be rewritten to reflect the many comments and the question of balance. Dr. Swenberg proposed the panel defer acceptance until it had a chance to review a revised report, and said the results should be reported whether or not they are adequate or acceptable. He was concerned that there were untreated controls which were not discussed. Dr. J. Huff, NTP, said existence of these controls had been discovered only recently, but should have been brought to the attention of the panel at the outset, and would be described in the revised report.

Dr. Highland moved that the studies on TCE be considered acceptable for reporting. Dr. Harper seconded the motion and this was approved by nine affirmative votes with one abstention (Dr. Schwetz). Dr. Swenberg moved that the technical report be deferred for rewriting. Dr. Harper seconded, and the motion was approved by nine affirmative votes with one abstention (Dr. Schwetz).

Subsequent discussion dealt with what should be covered in a rewrite of the report. Dr. Highland said the untreated controls should be included and discussed; there should be a more balanced discussion of how MTD could have led to either over- or underestimating effects; and there should be a statement about the missing tissues. Dr. Swenberg said the potential complicating factors must be clearly stated, while Dr. Holland asked that nonneoplastic chronic effects not be addressed as confounding factors and that instead, the readers be allowed to draw their own conclusions. Dr. Elashoff said the untreated control data should be included, but a formal statistical analysis of the data should not be done, since the concurrent vehicle controls were the relevant controls for comparison. Dr. Moore concluded that NTP would rewrite the report to be more balanced and agreeable to the viewpoints expressed by the panel members.

Peer Review Meeting of 22 September 1982

Dr. Swenberg, a principal reviewer for the report on the carcinogenesis studies of trichloroethylene (TCE) without epichlorohydrin, agreed with the conclusions as sent to the panel members. Dr. Swenberg questioned whether or not some further comment on the inadequacy of the rat study needed to be added to stress the use of toxic doses and the poor tissue accountability for the pathology.

As a second principal reviewer, Dr. Elashoff agreed with the modified conclusions and mentioned certain issues relating to statistical methodology. As a third principal reviewer, Dr. Harper agreed with the conclusions, yet he questioned whether the decreased survival of male rats could be attributed to exceeding the MTD. He was also concerned about the excessive number of apparent gavage errors.

In discussion from the floor, Dr. Z. Bell, PPG Industries, maintained that the current draft report was not adequate for assessing biological significance. He submitted copies of a critique which he asked be made part of the meeting record, and requested that the draft report be returned for further revision and review at the next meeting. Mr. L. Schlossberg, Detrex Chemical Industries, read from reviews commissioned by him which he interpreted as indicating the bioassay was inadequate in rats for establishing the carcinogenicity of TCE. Further, in his opinion, the available epidemiologic and animal evidence indicate TCE is not a carcinogen. Mr. Schlossberg requested that the review of the report be deferred until the data from other ongoing carcinogenesis studies of TCE in different strains of rats are ready for review.

Dr. Swenberg stated that the presentations made by the speakers from the floor related to the male rat findings and were in agreement with the NTP conclusions that the male rat study was considered inadequate. Both Drs. Swenberg and Holland emphasized that the purpose of the peer review panel members was to evaluate the technical report, not the total evidence on the toxicology of the chemical, and to make recommendations as to the acceptability of the report as a reflection of the experimental data. Dr. Mirer requested the mouse findings should be placed first in the summary, since the results are clear and unequivocal. (In these technical reports, by convention, rats are listed first.) He stated the opinion that the large number of early deaths in the rat study actually increased the difficulty of detecting carcinogenic effects. He questioned how one interprets an excess of tumors in the presence of organ damage; that is, are the tumors secondary to the organ damage or do they result from a separate process? In support of the latter idea, he noted that although kidney damage was observed in female rats and mice of both sexes there was no concomitant increased incidence of renal tumors.

Dr. Swenberg moved that the technical report on the carcinogenesis studies of trichloroethylene be accepted with the minor revisions discussed. Dr. Harper seconded the motion and the technical report on trichloroethylene without epichlorohydrin was approved by nine affirmative votes, with one opposed (Dr. Mirer).

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I. INTRODUCTION

Trichloroethylene



TRICHLOROETHYLENE

CAS NO. 79-01-6 C₂HCl₃ Mol. Wt. 131.40

Trichloroethylene (TCE) is an industrial solvent used for vapor degreasing and cold cleaning of fabricated metal parts. TCE has also been used as a carrier solvent for the active ingredients of insecticides and fungicides, as a solvent for waxes, fats, resins, and oils, as an anesthetic for medical and dental use, and as an extractant for spice oleoresins and for caffeine from coffee. Trichloroethylene may be found in printing inks, varnishes, adhesives, paints, lacquers, spot removers, rug cleaners, disinfectants, and cosmetic cleansing fluids. TCE may also be used as a chain terminator in polyvinyl chloride production and as an intermediate in the production of pentachloroethane (Kirk-Othmer, 1963 and 1979; IARC, 1979; Defalque, 1961; Wetterhahn, 1972; U.S. CFR, 1976; Valle-Riestra, 1974; Waters et al., 1977). Trichloroethylene is no longer used with food, drugs, or cosmetics (IARC, 1979; Food Chemical News, 1978). Before 1976, tolerances for TCE in decaffeinated ground coffee were set at 25 ppm (U.S. CFR, 1976).

An estimated 3.5 million workers are exposed to TCE (Page, 1979). The threshold limit value for TCE is 100 ppm (Federal Register, 1975). In 1979 production of TCE was 319,432,000 pounds (USITC, 1980).

Trichloroethylene has been found in various foodstuffs in England at the following concentrations: packet tea, 60 ppm; pig's liver, 22 ppm; butter, 10 ppm; and fresh bread, 7 ppm (McConnell et al., 1975). Trichloroethylene has also been found in commercial deionized charcoal-filtered water (Dowty et al., 1975) and in drinking water in various cities (Kavlock et al., 1979).

The oral LD_{50} is reported to be 5,200 mg/kg in rats (National Clearinghouse for Poison Control Centers, 1967). The intraperitoneal LD_{50}

for mice is 3,200 mg/kg (Klaassen and Plaa, 1966). Trichloroethylene is a central nervous system depressant (Clayton and Clayton, 1981).

The results of mutagenicity testing of TCE are difficult to interpret because few authors provide analytical data regarding the purity of their test materials. The sensitivities of most of these tests are such that the presence of trace levels of potent genotoxic contaminants, such as epichlorohydrin, could affect the results generated. Differences in purity could explain the diversity of results reported from various laboratories. For example, "pure" TCE has been reported to be weakly mutagenic, equivocally mutagenic, or nonmutagenic for S. typhimurium TA100 (Baden et al., 1979; Bartsch et al., 1979; Simmon et al., 1977; Waskell, 1978). TCE did not cause mutations in Salmonella typhimurium TA98, TA100, TA1535, or TA1537, with or without metabolic activation; using Chinese hamster ovary (CHO) cells, TCE did not induce chromosome aberrations and the results for sister chromatid exchanges were considered equivocal (NTP unpublished results).

The results and conclusions of other workers employing a variety of test methods are similarly inconsistent. Cerna and Kypenova (1977) reported that TCE was mutagenic (without metabolic activation) in *in vitro* tests with S. *typhimurium* TA1535 and 1538 and in hostmediated assays with TA1950, 1951, and 1952. Greim et al. (1975) reported that microsomally activated TCE was slightly mutagenic for *Escherichia coli* K 12, but Loprieno et al. (1979) found no mutagenic activity in a series of short-term tests. Slacik-Erben (1980) studied TCE (99.5% pure) in a dominant lethal test in male Han/ BGA NMRI mice and found no mutagenic activity.

Evidence for a carcinogenic effect of TCE was presented by the National Cancer Institute (NCI, 1976) after the completion of a 78-week bioassay of industrial grade (>99% pure) TCE in B6C3F1 mice and Osborne-Mendel rats; without additional TCE administration, rats were observed for another 32 weeks and mice for 12 more weeks. In mice, time-weighted-average gavage doses of 1,169 and 2,339 mg/kg in males and 869 and 1,739 mg/kg in females were associated with significant increases in the incidence of hepatocellular carcinoma. In Osborne-Mendel rats, time-weighted-average gavage doses of 549 and 1,097 mg/kg (both sexes) did not increase the incidence of primary tumors. However, as in several earlier bioassays of chlorinated ethanes and ethylenes (hexachloroethane, NCI, 1978a; 1,1,2,2-tetrachloroethane, NCI, 1978b; 1,1,2-trichloroethane, NCI, 1978c; tetrachloroethylene, NCI, 1977; and pentachloroethane, NTP, 1982), the survival of the rats was compromised by the dosage regimen. The results of most of these earlier carcinogenicity studies have been summarized (Weisburger, 1977) and reviewed (IARC, 1979). The International Agency for Research on Cancer considered the TCE bioassay in Osborne-Mendel rats to be inadequate for evaluation and the bioassay in $B6C3F_1$ mice to provide limited evidence of carcinogenicity; that is, carcinogenic in one species (IARC, 1979). IARC evaluated TCE as being "carcinogenic to mice after its oral administration, producing liver and lung neoplasms" (IARC, 1982).

The interpretation of the earlier TCE study (NCI, 1976) was complicated by the presence of certain contaminants, particularly epichlorohydrin (0.09%) in the test material. Epichlorohydrin had been previously shown to induce local sarcomas in mice following subcutaneous injection (Van Duuren et al., 1974) and has subsequently been reported to cause nasal carcinomas in rats after inhalation exposure (Laskin et al., 1980). Further, epichlorohydrin is a potent mutagen for S. typhimurium TA100 (Simmon, 1977). Therefore, although the carcinogenicity of industrial-grade TCE in B6C3F1 mice was firmly established, unequivocal statements regarding its carcinogenicity in rats and the carcinogenicity of pure TCE in mice could not be made.

Results of long-term inhalation studies with purified TCE (less than 0.000025% of each of 5 chlorinated hydrocarbon impurities by gc/ms; stabilized with 0.0015% triethanolamine) have been reported (Henschler et al., 1980). In these studies, male and female Wistar rats, NMRI mice, and Syrian hamsters were exposed to air containing up to 500 ppm of TCE for 18 months (6 hours per day, 5 days per week). This regimen failed to produce compound-related increases in primary tumors in these species. The investigators did report an increase in the incidence of malignant lymphomas in female mice, but the relationship of this lesion to TCE exposure was considered questionable because of the high incidence of lymphomas in control mice.

The evidence for the carcinogenicity of TCE, like that of the chlorinated ethanes and ethylenes tested earlier (hexachloroethane, tetrachloroethane, trichloroethane, tetrachloroethylene, and pentachloroethane) comes mainly from data obtained in experiments conducted in mice. For the most part, the carcinogenic classification of these materials is based upon dose-related increases in the incidences of hepatocellular carcinoma in $B6C3F_1$ mice. Because this is a relatively common tumor in males of this strain of mouse (seen in approximately 18% of control males and 3% of control females), the significance of the lesion is frequently questioned. Also, the reason for the apparent insensitivity of Osborne-Mendel rats to members of this chemical class remains unknown. It may be related to the reduced survival times of dosed animals. Therefore, the failure of the doses to increase tumor incidences in rats could have been due to the animals not surviving long enough to develop the lesions. However, in most of the earlier studies the survival times of both rats and mice were shortened by compound administration. In light of this observation, it is possible that Osborne-Mendel rats are not susceptible to the carcinogenicity of these chemicals. Inter- or intra-species differences in susceptibility to TCE could be mediated through inherited pharmacokinetic factors. Stott et al. (1982) reported that B6C3F1 mice can metabolize more TCE (on a mg/kg basis) than can Osborne-Mendel rats. A similar quantitative difference in TCE metabolism between $B6C3F_1$ mice and Sprague-Dawley rats has recently been reported (Parchman and Magee, 1982). If a carcinogenic effect of TCE requires biotransformation of the parent molecule to a reactive metabolite, the $B6C3F_1$ mouse might be expected to be more sensitive than the Osborne-Mendel rat. Trichloroethylene epoxide has been suggested as an electrophilic metabolite of TCE (Van Duuren,

1975), but Miller and Guengerich (1982) have reported the results of *in vitro* experiments which suggest that the epoxide may not be an intermediate of TCE metabolism.

The possibility of a strain difference in susceptibility to TCE prompted the National Cancer Institute to initiate a series of chronic carcinogenicity studies of a variety of chlorohydrocarbons, including TCE, in several strains of rats. Most of these studies are still in progress; the NTP is preparing draft reports from completed carcinogenesis studies on four strains of rats (Marshall, ACI, Osborne-Mendel, and August) using the oral route, and Dr. C. Maltoni (Institute of Oncology, Bologna, Italy) is currently (August 1983) examining the histopathology portion of TCE inhalation experiments using Sprague-Dawley rats and Swiss and B6C3F₁ mice. The comparative testing of epichloro-hydrin-free trichloroethylene administered by gavage to B6C3F₁ mice and F344/N rats has been completed. This report describes the results of that study.

II. MATERIALS AND METHODS

CHEMICAL ANALYSES

DOSE PREPARATION

THIRTEEN-WEEK STUDY

TWO-YEAR STUDIES

Study Design Source and Specifications of Test Animals Animal Maintenance Clinical Examinations and Pathology Data Recording and Statistical Methods

CHEMICAL ANALYSES

High purity "Hi-Tri" trichloroethylene was obtained in two lots. Lot No. TB 05-206AA was obtained from Dow Chemical Co. (Richmond, VA) and was used for the 13-week study and for the first 19 months of the 2-year study. Lot No. TB 08-039AA was obtained from Missouri Solvents (Kansas City, MO) and was used for the final 5 months of the 2-year study.

Purity and identity analyses were conducted at Midwest Research Institute. The results of elemental analyses for both lots were consistent with the theoretical values. Twelve impurities with areas totalling less than 0.04% of the area of the major peak were detected in Lot No. TB 05-206AA by gas-liquid chromatography in one system (Appendix G). Eight impurities having areas less than 0.02% that of the major peak were detected in a second system. One impurity with an area of 0.02% that of the major peak was detected in Lot No. TB 08-039AA. The area of all other impurities in this lot totaled less than 0.01% that of the major peak. These impurities were not identified. The infrared and nuclear magnetic resonance spectra of both lots were consistent with the literature spectra. "Hi-Tri" trichloroethylene contains 8 ppm of an amine

stabilizer (diiosopropylamine) and, if present, no more than 0.001% epichlorohydrin stabilizers as determined by gas chromatography/mass spectrometry.

Throughout the course of this study, the trichloroethylene was stored at 4°C. Papanicolaou periodically analyzed the chemical versus a standard, maintained at -20° C, by gas-liquid chromatography using a 10% OV-101 glass column at 70°C. The chemical showed no decrease in purity over the course of the study, even though a white flocculent material was noticed in the July 1979 reanalysis. A 5-gallon can of this material was returned to Midwest Research Institute for attempted purification. The flocculent material was present at a level of 25-30 ppm (Appendix H). Results of infrared and mass spectroscopy indicated that the precipitate was a mixture of long chain alkene or alkanes and inorganic carbonate. Midwest Research Institute shipped the filtered trichloroethylene back to Papanicolaou in October 1979.

The new lot (TB 08-039AA) was received at Papanicolaou in December 1979 and was used immediately. Both lots were considered to be greater than 99.9% pure.

DOSE PREPARATION

Doses were administered at a constant volume. Mice received 0.5 ml per dose and rats received 1.0 ml per dose. A stock solution of trichloroethylene in corn oil was prepared and appropriately diluted (Table 1). Trichloroethylene in corn oil (1% w/v) was found to be stable for 7 days at room temperature (Appendix I). Later, stock solutions of trichloroethylene in

corn oil were found to be stable at $4^{\circ}C$ for 4 weeks (Appendix J). Stock solutions were prepared once per week for the first 16 weeks of the study and once per month for the remainder of the study. Stock solutions were analyzed by gas chromatography and found to be within 10% of the target concentrations (Appendix K).

THIRTEEN-WEEK STUDIES

Neither single-dose nor 14-day studies were conducted. Dosage levels for the 13-week study were based on earlier experiences with TCE in rats and mice (NCI, 1976).

Five-week-old male and female F344/N rats and 3-week-old $B6C3F_1$ mice were obtained from Frederick Cancer Research Center. Rats were observed for 2 weeks and mice for 4 weeks. Animals were assigned to cages according to a table of random numbers. Cages were then assigned to dosed and control groups according to another table of random numbers.

Rats and mice were housed five per cage in polycarbonate cages (Table 1). Cages and bedding were changed twice per week. Purina® Lab Chow and water (via an automatic watering system) were available *ad libitum*.

Groups of 10 male rats were administered 0, 125, 250, 500, 1,000, or 2,000 mg/kg trichloroethylene in corn oil by gavage, 5 days per week for 13 weeks. Groups of 10 female rats were administered 0, 62.5, 125, 250, 500, or 1,000 mg/kg, and groups of 10 mice of each sex received 0, 375, 750, 1,500, 3,000, or 6,000 mg/kg on the same schedule. Doses of trichloroethylene were calculated on the basis of mean body weights from the previous weighing period. Animals were checked for mortality and signs of morbidity twice daily. Each animal was given a clinical examination weekly.

At the end of the 13-week study, survivors were killed with carbon dioxide. Necropsies were performed on animals, unless precluded in whole or in part by autolysis or cannibalization. Thus the number of animals from which organs or tissues were examined microscopically varies and does not necessarily represent the number of animals that were placed on study in each group. Liver weights from animals of all dosed mouse groups were measured. The following were examined for the control and high dose rats and for the control and the two highest dosed groups of mice: gross lesions, tissue masses, abnormal lymph nodes, skin, mandibular lymph nodes, mammary gland, salivary gland, thigh muscle, sciatic nerve, bone marrow, costochondral junction (rib), thymus, larynx, trachea, lungs and bronchi, heart, thyroid, parathyroid, esophagus, stomach, duodenum, jejunum, ileum, colon, mesenteric lymph nodes, liver, gallbladder (mice), pancreas, spleen, kidneys, adrenals, urinary bladder, seminal vesicles/prostate/testes or ovaries/uterus, nasal cavity, brain, pituitary, and spinal cord. Tissues were preserved in 10% neutral buffered formalin, embedded in paraffin, sectioned, and stained with hematoxylin and eosin.

TWO-YEAR STUDIES

Study Design

Groups of 50 rats of each sex were administered 500 or 1,000 mg/kg trichloroethylene in corn oil for up to 103 weeks. Groups of 50 mice of each sex were administered 1,000 mg/kg for up to 103 weeks. Doses of trichloroethylene administered were calculated on the basis of mean body weights from the previous weighing period. Groups of 50 rats and mice of each sex received corn oil only and served as vehicle controls (Table 1). In addition, groups of 50 rats of each sex were used as untreated controls. Tumor incidence data from these groups were not used for routine statistical analyses, but the incidences are shown in Appendix A.

Source and Specifications of Test Animals

Five and one-half-week-old male and female F344/N rats and $B6C3F_1$ mice were obtained from Harlan Industries (Indianapolis, IN), observed for 2.5 weeks, and assigned to individual cages according to a table of random numbers. The cages were then assigned to control and dosed groups according to another table of random numbers. Animals that died during the first 1.5 weeks of the study as a result of gavage error were replaced.

Animal Maintenance

Rats were housed five per cage in polycarbonate cages. Mice were housed 10 per cage for the first 8 months and then transferred to smaller cages housing five animals each. Cages and bedding were changed twice per week. Tap water, via an automatic watering system, and diet were available *ad libitum* (Table 1).

The temperature in the animal rooms was 22°-24°C and the humidity was 40%-60%. Ten to fifteen changes of room air per hour were provided. Fluorescent lighting provided illumination 12 hours per day.

Clinical Examinations and Pathology

All animals were observed twice daily for signs of morbidity or mortality. Clinical signs were recorded monthly. Body weights, by cage, were recorded weekly for the first 12 weeks and then every fourth week thereafter. The mean body weight of each group was calculated by dividing the total weight of animals in the group by the number of animals in the group. Moribund animals and animals that survived to the end of the bioassay were killed with carbon dioxide and necropsied.

Examinations for grossly visible lesions were performed on major tissues or organs. Tissues were preserved in 10% neutral buffered formalin, embedded in paraffin, sectioned, and stained with hematoxylin and eosin. The following were examined microscopically: tissue masses, abnormal lymph nodes, skin, mammary gland, salivary gland, thymus, larynx, trachea, lungs and bronchi, heart, thyroid, parathyroid, esophagus, stomach, duodenum, ileum, colon, mesenteric lymph nodes, liver, gallbladder (mice), pancreas, spleen, kidneys, adrenals, urinary bladder, seminal vesicles/prostate/testes or ovaries/uterus, brain, pituitary, and spinal cord.

Necropsies were performed on all animals not excessively autolyzed or cannibalized. The number of animals from which particular organs or tissues were examined microscopically varies and is not necessarily equal to the number of animals that were placed on study in each group.

Neoplastic nodules were classified according to the recommendations of Squire and Levitt (1975) and the National Academy of Sciences (1980). When the pathology examination was completed, the slides, individual animal data records, and summary tables were sent to an independent quality assurance laboratory. Individual animal records and tables were compared for accuracy, slides and tissue counts were verified, and histotechniques were evaluated. All tumor diagnoses, all target tissues, and all tissues from a randomly selected 10 percent of the animals were evaluated by an experienced rodent pathologist. Slides of all target tissues and those on which the original and quality assurance pathologists disagreed were submitted to the Chairperson of the Pathology Working Group (PWG) for the evaluation. Representative slides selected by the PWG Chairperson were reviewed blindly by the PWG's experienced rodent pathologists, who reached a consensus and compared their findings with the original diagnoses. When conflicts were found, the PWG sent the appropriate slides and their comments to the original pathologist for review. (This procedure is described, in part, by Maronpot and Boorman, in press.) The final diagnosis represents a consensus of contractor pathologists and the NTP Pathology Working Group.

Data Recording and Statistical Methods

Data on this experiment were recorded in the Carcinogenesis Bioassay Data System (Linhart et al., 1974). The data elements include descriptive information on the chemicals, animals, experimental design, clinical observations, survival, body weight, and individual pathologic results, as recommended by the International Union Against Cancer (Berenblum, 1969).

Probabilities of survival were estimated by the product-limit procedure of Kaplan and Meier (1958) and are presented in this report in the form of graphs. Animals were statistically censored as of the time that they died of other than natural causes or were found to be missing. Animals dying from natural causes were not statistically censored. Statistical analyses for a possible dose-related effect on survival used the method of Cox (1972) for testing two groups for equality and Tarone's (1975) extensions of Cox's methods for testing for a dose-related trend.

The incidence of neoplastic or nonneoplastic lesions has been given as the ratio of the number of animals bearing such lesions at a specific anatomic site to the number of animals in which that site was examined. In most instances, the denominators included only those animals for which that site was examined histologically. However, when macroscopic examination was required to detect lesions (e.g., skin or mammary tumors) prior to histologic sampling, or when lesions could have appeared at multiple sites (e.g., lymphomas), the denominators consist of the number of animals necropsied.

For the statistical analysis of tumor incidence data, two different methods of adjusting for intercurrent mortality were employed. Each used the classical methods for combining contingency tables developed by Mantel and Haenszel (1959). Tests of significance included pairwise comparisons of high and low dose groups with controls and tests for overall dose-response trends.

The first method of analysis assumed that all tumors of a given type observed in animals dying before the end of the study were "fatal:" i.e., they either directly or indirectly caused the death of the animal. According to this approach, the proportions of tumor-bearing animals in the dosed and control groups were compared at each point in time at which an animal died with a tumor of interest. The denominators of these proportions were the total number of animals at risk in each group. These results, including the data from animals killed at the end of the study, were then combined by the Mantel-Haenszel method to obtain an overall P value. This method of adjusting for intercurrent mortality is the life table method of Cox (1972) and of Tarone (1975).

The second method of analysis assumed that all tumors of a given type observed in animals

dving before the end of the study were "incidental"; i.e., they were merely observed at autopsy in animals dying of an unrelated cause. According to this approach, the proportions of animals found to have tumors in dosed and control groups were compared in each of five time intervals: 0-52 weeks, 53-78 weeks, 79-92 weeks, week 93 to the week before the terminal kill period, and the terminal kill period. The denominators of these proportions were the number of animals actually autopsied during the time interval. The individual time interval comparisons were then combined by the previously described methods to obtain a single overall result. (See Peto et al., 1980, for the computational details of both methods.)

In addition to these tests, one other set of statistical analyses was carried out and reported in the tables analyzing primary tumors: the Fisher's exact test for pairwise comparisons and the Cochran-Armitage linear trend test for doseresponse trends (Armitage, 1971; Gart et al., 1979). These tests were based on the overall proportion of tumor-bearing animals. All reported P values are one-sided.

For studies in which there is little effect of compound administration on survival, the results of the three alternative analyses will generally be similar. When differing results are obtained by the three methods, the final interpretation of the data will depend on the extent to which the tumor under consideration is regarded as being the cause of death.

TABLE 1. EXPERIMENTAL DESIGN AND MATERIALS AND METHODS

	13-Week Studies				
Experimental Design					
Size of Test Groups	10 males and 10 females of each species				
Doses	Male rats: 0, 125, 250, 500, 1,000, or 2,000 mg/kg body weight in corn oil by gavage				
	Female rats: 0, 62.5, 125, 250, 500, or 1,000 mg/kg body weight in corn oil by gavage				
	Mice: 0, 375, 750, 1,500, 3,000, or 6,000 mg/kg body weight in corn oil by gavage				
Duration of Dosing	Five days per week for 13 weeks				
Type and Frequency of Observation	Observed twice daily for morbidity and mortality				
Necropsy and Histologic Examination	All animals necropsied. All control and high dose rats and the control and the two highest dosed groups of mice were examined histologically				
Animals and Animal Maintenance					
Species	F344/N rats; B6C3F ₁ mice				
Animal Source	Frederick Cancer Research Center (Frederick, MD)				
Time Held before Start of Test	Rats: 2 weeks Mice: 4 weeks				
Age When Placed on Study	Rats: 7 weeks Mice: 7 weeks				
Age When Killed	Rats: 20 weeks Mice: 20 weeks				
Method of Animal Distribution	Assigned to cages according to a table of random numbers and then to groups according to another table of random numbers				
Feed	Purina® Rodent Chow 5001 ad libitum (Distributed by O.K. Feed Store, Miami, FL)				
Bedding	Sani Chip® hardwood, Pinewood Products Co. (Distributed by O.K. Feed Store, Miami, FL)				
Water	Tap water via Edstrom Automatic Watering System (Waterford, WI)				
Cages	Polycarbonate, Lab Products (Rochelle Park, NJ); cages changed and sanitized twice weekly; racks sanitized every 2 weeks				
Animals per Cage	5				
Cage Filters	Cerex spun nylon, Florida Filters (Miami, FL); filters changed every 2 weeks				
Animal Room Environment	22°-24°C; 40%-60% relative humidity; 12 hours fluorescent light per day; room air changed 18-20 times per hour				
Other Chemicals on Test in Same Room	None				
Chemical/Vehicle Mixture					
Preparation	Trichloroethylene was dissolved in Mazola® corn oil so as to allow the proper dose to be contained in 1 ml (rats) or 0.5 ml (mice)				
Maximum Storage Time	One week				
Storage Conditions	2°-5°C				

13-Week Studies

TABLE 1. EXPERIMENTAL DESIGN AND MATERIALS AND METHODS (Continued)

Experimental Design					
Size of Test Groups	50 males and 50 females of each species				
Doses	Rats: 0, 500, or 1,000 mg/kg body weight in corn oil by gavage; 1.0 m per dose				
	Mice: 0 or 1,000 mg/kg body weight in corn oil by gavage; 0.5 ml pe dose				
Duration of Dosing	Five days per week for 103 weeks				
Type and Fr equency of Observation	Observed twice daily for morbidity and mortality				
Necropsy and Histologic Examination	All animals necropsied and examined histologically				
Animals and Animal Maintenance					
Species	F344/N rats; $B6C3F_1$ mice				
Animal Source	Harlan Industries (Indianapolis, IN)				
Time Held before Start of Test	2.5 weeks				
Age When Placed on Study	Rats: 8 weeks Mice: 8 weeks				
Age When Killed	Rats: 111-115 weeks Mice: 112-115 weeks				
Method of Animal Distribution	Assigned to cages according to a table of random numbers an then to groups according to another table of random number				
Feed	Purina® Rodent Chow 5001 ad libitum (Distributed by O.K. Fee Store, Miami, FL)				
Bedding	Sani Chip® hardwood, Pinewood Products Co. (Distributed b O.K. Feed Store, Miami, FL)				
Water	Tap water via Edstrom Automatic Watering System (Waterford, W				
Cages	Polycarbonate, Lab Products (Rochelle Park, NJ); cages change and sanitized twice weekly; racks sanitized every 2 weeks				
Animals per Cage	5 rats per cage; 10 mice per cage for the first 8 months and then 5 per cage				
Cage Filters	Cerex spun nylon, Florida Filters (Miami, FL); filters change every 2 weeks				
Animal Room Environment	22°-24°C; 40%-60% relative humidity; 12 hours fluorescent ligh per day; room air changed 10-15 per hour				
Other Chemicals on Test in Same Room	None				
Chemical/Vehicle Mixture					
Preparation	Trichloroethylene was dissolved in Mazola® corn oil so as to allo the proper dose to be contained in 1 ml (rats) or 0.5 ml (mice)				
Maximum Storage Time	One week for the first 16 weeks and one month thereafter				
Storage Conditions	Refrigerated at 2°-5°C in glass bottles sealed with Teflon® septa an aluminum caps				

2-Year Studies

III. RESULTS

RATS

THIRTEEN-WEEK STUDIES

TWO-YEAR STUDIES

Body Weights and Clinical Signs Survival Pathology and Statistical Analyses of Results

MICE

THIRTEEN-WEEK STUDIES

TWO-YEAR STUDIES

Body Weights and Clinical Signs Survival Pathology and Statistical Analyses of Results

III. RESULTS: RATS—THIRTEEN-WEEK STUDIES

THIRTEEN-WEEK STUDIES

All animals survived to the end of the study and only male rats dosed with 2,000 mg/kg/day of TCE exhibited >10% decrements in body weight (Table 2). The body final weight gains for both males and females dosed with 1,000 mg/kg/day or less were considered to be normal.

Histopathological examination of the tissues from animals receiving the highest doses of TCE revealed pulmonary vasculitis, usually involving small veins, in 6/10 males and 6/10 females. This change was also seen in 1/10 male and 1/10female control animals. Most of these animals also had mild interstitial pneumonitis. Minimal or mild cytomegaly and karyomegaly of the renal tubular epithelial cells in the inner cortex was seen in 8/9 males receiving 2,000 mg/kg/day and the same effect, graded as equivocal or minimal, was seen in 5/10 females that had received the 1,000 mg/kg/day dose. These renal effects were so minimal that they were diagnosed only during a reevaluation of the tissues. The reevaluation was prompted by the production of definite renal toxicity in the 2-year study.

The results of this 13-week study in F344/N rats are essentially similar to those of an earlier 8-week study conducted in Osborne-Mendel rats (NCI, 1976). In that earlier study, only doses in excess of 5,000 mg/kg/day were lethal to rats. Doses of 1,000 mg/kg/day had no effect on body weight gains in males, but depressed weight gains in females by approximately 15%.

In view of the survival of all rats, the minimal effects on weight gain, and the relatively minor nature of the histological changes, dosage levels for the 2-year study were set at 500 and 1,000 mg/kg/day for both sexes.

Dose	Survival	Mea	Final Body Weigh Relative to – Controls (b)		
(mg/kg)	(a)	Initial	Final	Change	(Percent)
MALES		<u></u>			
0	10/10	87	312	+225	
125	10/10	88	292	+204	- 6
250	10/10	92	301	+209	- 4
500	10/10	95	313	+218	0
1,000	10/10	101	303	+202	- 3
2,000	10/10	83	238	+155	-24
FEMALES					
0	10/10	81	181	+100	
62.5	10/10	72	168	+ 96	- 7
125	10/10	74	179	+105	- 1
250	10/10	75	177	+102	- 2
500	10/10	73	176	+103	- 3
1,000	10/10	76	177	+101	- 2

TABLE 2. SURVIVAL AND MEAN BODY WEIGHTS OF F344/N RATS ADMINISTEREDTRICHLOROETHYLENE IN CORN OIL BY GAVAGE FOR 13 WEEKS

(a) Number surviving/number per group

(b) Weight Relative to Controls

Weight (Dosed Group) - Weight (Control Group) × 100

Weight (Control Group)

TWO-YEAR STUDIES

Body Weights and Clinical Signs

The growth curves for rats administered 500 or 1,000 mg/kg doses of TCE for 103 weeks are shown in Figure 1, and body weights are summarized in Table 3. The 1,000 mg/kg dose reduced weight gain in male rats, with an 11% decrement relative to controls being observed after 20 weeks. This effect was maintained throughout the experimental period, with high dose males exhibiting a 13% decrement after 99 weeks on study. Although mean body weight for the male rats administered the 500 mg/kg dose appears to be lower than that of the controls (Figure 1), the initial weights were lower than those of the controls (141 g versus 161 g) and therefore the differences in body weight in the 500 mg/kg male rats was not considered compound related. Both dosage levels of TCE reduced body weight gains in female rats, and after these animals were on study for approximately 60 weeks, the decreases in weight gain were dose related.

Gross observations of the appearance and behavior of the rats did not reveal any compound-related clinical signs.

Antibody Titers

Viral antibody titers are shown in Appendix F. At the end of 6 months, positive titers were identified for pneumonia (PVM) and Sendai viruses. Titer values for these viruses diminished over the course of the study and were negative at the 24-month test. Rat corona virus had a significant titer at 24 months.

Survival

Two female rats (one high dose and one vehicle control) were replaced, due to gavage error, during the initial 1.5 weeks of the study. Estimates of the probabilities of survival of male and female rats administered trichloroethylene and those of the vehicle controls are shown by the Kaplan and Meier curves in Figure 2. (The following animals died as a result of gavage error: 1 male vehicle control, 3 low dose males, 10 high dose males, 2 female vehicle controls, 5 low dose females, and 5 high dose females. These animals were censored from the Kaplan and Meier curves at the date of death.) The survival of the dosed male rats was significantly reduced when compared with that of the vehicle controls (low dose, P=0.005; high dose, P=0.001). No significant differences were observed between the dosed males or between any groups of females.

Among male rats, 35/50(70%) of the controls, 20/50(40%) of the low dose group, and 16/50(32%) of the high dose group lived to the end of the study. Among female rats, 37/50(74%) of the controls, 33/50(66%) of the low dose group, and 26/50(52%) of the high dose group lived to the end of the study. The survival data indicated above include one high dose male, two control males, and three control females that died during the termination period of the study (weeks 103-107). For the statistical evaluations of tumor incidences, these animals are considered to have been killed at termination.

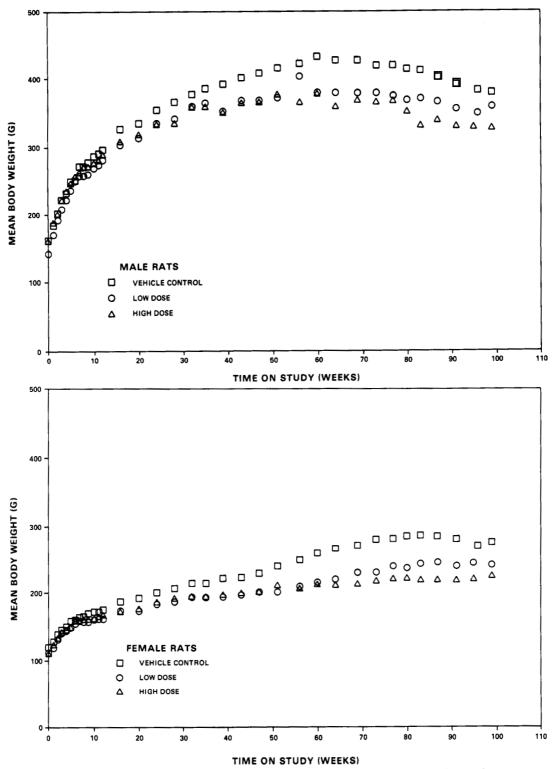


Figure 1. Growth Curves for Rats Administered Trichloroethylene in Corn Oil by Gavage

Trichloroethylene

30

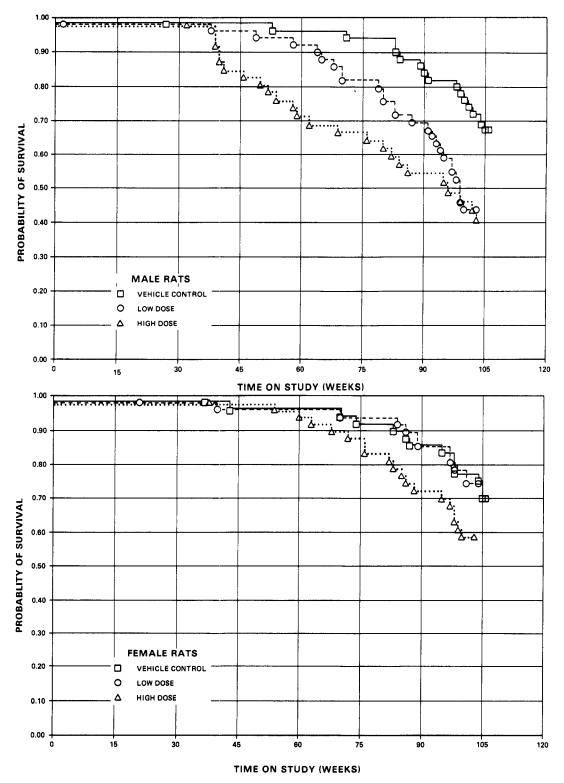


Figure 2. Survival Curves for Rats Administered Trichloroethylene in Corn Oil by Gavage

		Mean Body Weight (grams)			Body Weight Relative to Controls (a) (Percent)		
	Week No.	Control	Low Dose	High Dose	Low Dose	High Dose	
Males							
	0	161	141	160	-12	- 1	
	1	184	169	187	- 8	+ 2	
	20	335	314	318	- 6	- 5	
	39	392	353	350	-10	-11	
	60	433	379	377	-12	-13	
	80	414	367	352	-11	-15	
	99	378	358	327	- 0	-13	
Females							
	0	120	112	111	- 7	- 8	
	1	128	119	123	- 7	- 4	
	20	191	173	176	- 9	- 8	
	39	221	193	197	-13	-11	
	60	259	215	212	-17	-18	
	80	285	236	221	-17	-22	
	99	276	242	225	-12	-18	

TABLE 3. MEAN BODY WEIGHTS (RELATIVE TO CONTROLS) OF RATS ADMINISTERED TRICHLOROETHYLENE IN CORN OIL BY GAVAGE FOR TWO YEARS

(a) Weight Relative to Controls =

Weight (Dosed Group) - Weight (Control Group) × 100

Weight (Control Group)

Pathology and Statistical Analyses of Results

Histopathologic findings on neoplasms in rats are summarized in Appendix A, Tables Al and A2. Tables A3 and A4 give the survival and tumor status for each individual animal in the male and female rat studies, respectively. Findings on nonneoplastic lesions are summarized in Appendix C, Tables C1 and C2. Tables 4 and 5 contain the statistical analyses of those primary tumors that occurred with an incidence of at least 5% in one of the three groups. Because of the reduced survival in dosed male rats, the statistical procedures that adjust for intercurrent mortality (life table and incidental tumor tests) were regarded as more meaningful than the "unadjusted" analysis in the evaluation of tumor incidence data in these groups. Many of the lymph nodes, thymuses, tracheae, pituitaries, thyroids, parathyroids, and ovaries were not examined microscopically. These omissions appear to be the result of faulty histological technique.

Kidney: Renal tubular adenocarcinoma occurred with a significant positive trend in male rats that survived to the end of the study (P=0.009), and the pairwise comparison between the control and high dose groups was significant (terminal incidences: control, 0/33; low dose, 0/20; high dose, 3/16; P=0.028). These tumors were not found in animals that died before the termination of the study. Additional tumors found in the kidneys of male rats included a transitional cell papilloma of the renal pelvis in an untreated control, a transitional-cell carcinoma of the renal pelvis and two tubular cell adenomas in low dose animals and one carcinoma (NOS) of the renal pelvis in a high dose animal. Among female rats, one high dose animal had a renal tubular adenocarcinoma.

Small renal tubular cell adenomas consisted of solid collections of renal tubular epithelial cells filling several contiguous tubules. The tumor cells were enlarged and had abundant cytoplasm, large nuclei, and prominent nucleoli. In larger tumors, there was an increasing degree of cellular atypia. There was no sharp demarcation between the larger adenomas and the tubular cell adenocarcinomas. The adenocarcinomas contained solid sheets of cells and focal areas of necrosis, and the cells were often quite atypical, with large irregular nuclei and prominent nucleoli. Local invasion was a common feature of these tumors.

Toxic nephrosis, designated "cytomegaly," was present in 98% of the dosed male rats and in 100% of the dosed females, but was not found in any of the vehicle control rats of either sex. The lesion was first noticed in dosed rats that died early in the test and was shown microscopically as frank enlargement of the nucleus and cytoplasm of scattered individual tubular cells that had brush borders and that were located near the cortico-medullary junction.

Progression of the lesion became evident in kidneys taken from rats that died early or were killed during the test. As exposure time increased, affected tubular cells continued to enlarge and additional tubules and tubular cells were affected. Occasionally, some tubules were enlarged or dilated to the extent that they were difficult to identify as tubules. In animals that survived longer, there was a decrease in the numbers of the enlarged cells, the corresponding tubules were dilated, and portions of the basement membrane had a stripped appearance. Special stains (Periodic Acid Schiff) were not useful in attempts to determine if the apparently stripped basement membrane was in fact naked or covered by a thin cytoplasmic membrane extending from the one or more remaining cytomegalic tubular cells. In the most advanced stage, the lesion extended to the subcapsular cortex, where enlarged tubular cells were readily found. Development of cytomegaly did not completely overshadow development of the spontaneous rat nephropathy which also was present but was recognized in a lower percentage of dosed animals than controls.

The cytomegaly was graded in each instance by subjective microscopic evaluation; the designations used as measures of the degree of severity were: slight (1), moderate (2), well marked (3), and severe (4). In this context, slight (1) indicates a subtle change that is often detected only at high microscopic magnifications, involves a limited part of the organ, and probably would not affect the function of the organ. Severe (4) indicates an obvious lesion that is readily visible at low microscopic magnifications, involves a substantial part of the organ, would significantly affect the function of the organ, and might be life threatening. Moderate (2) and well marked (3) are intermediate grades between the two extremes.

The average numerical grade of the lesion in each group of rats was: 0.0 for male and female controls; 2.8 for low dose males; 1.9 for low dose females; 3.1 for high dose males; and 2.7 for high dose females. Cytomegaly was more severe in males than in females, and the high dose males were most severely affected.

Peritoneum: Malignant mesotheliomas were observed in increased incidence in the low dose males compared with the controls (P=0.042, life table test; control, 1/50, 2%; low dose, 5/50, 10%; high dose, 0/49, 0%). This tumor was not observed among female rats.

Hematopoietic System: Leukemia occurred in reduced (P<0.05) incidence in the low dose female group compared with the controls. Both leukemia and leukemia or lymphoma (combined) occurred in reduced but not statistically significant proportions in the high dose male and high dose female groups. The following incidences of leukemia were observed: males, control, 5/50 (10%); low dose, 5/50 (10%); high dose, 1/49 (2%); females, control, 14/50 (28%); low dose, 4/50 (8%); high dose, 9/50 (18%). A malignant lymphoma was found in one control male rat.

Pituitary: Chromophobe adenomas were observed in decreased incidence in both male and female dosed rats (males: control, 7/42, 17%; low dose, 2/35, 6%; high dose, 1/26; 4%; females: control, 13/37, 35%; low dose, 6/34, 18%; high dose, 6/41, 15%). The pairwise comparison between the high dose and control groups was statistically significant (P=0.040, incidental tumor test) for female rats.

Uterus: Endometrial stromal polyps were observed among female rats in a statistically significant negative trend (P=0.035, incidental tumor test; control, 15/48, 31%; low dose, 8/48, 17%; high dose, 6/46, 13%).

Testis: Interstitial cell tumors occurred in male rats with a decreased incidence in the high dose group relative to controls (control, 47/49, 96%; low dose, 47/49, 96%; high dose, 32/46, 70%). However, this effect was not statistically significant when survival differences were taken into account (incidental tumor tests).

TABLE 4. ANALYSIS OF PRIMARY TUMORS IN MALE RATS (a)

	Untreated Control	Vehicle Control	Low Dose	High Dose
Subcutaneous Tissue: Fibroma				
Tumor Rates				
Overall (b)	3/50 (6%)	4/50 (8%)	1/50 (2%)	0/49 (0%)
Adjusted (c)		10.2%	5.0%	0.0%
Terminal (d)		2/35 (6%)	1/20 (5%)	0/16 (0%)
Statistical Tests (e)				
Life Table		P=0.108N	P=0.356N	P=0.208N
Incidental Tumor Test		P=0.064N	P=0.216N	P=0.141N
Cochran-Armitage Trend Test		P=0.027N		
Fisher Exact Test			P=0.181N	P=0.061N
Skin or Subcutaneous Tissue: Fibron	18			
Tumor Rates				
Overall (b)	3/50 (6%)	4/50 (8%)	1/50 (2%)	1/49 (2%)
Adjusted (c)		10.2%	5.0%	6.3%
Terminal (d)		2/35 (6%)	1/20 (5%)	1/16 (6%)
Statistical Tests (e)				
Life Table		P=0.318N	P=0.356N	P=0.475N
Incidental Tumor Test		P=0.238N	P=0.216N	P=0.373N
Cochran-Armitage Trend Test		P=0.104N		
Fisher Exact Test			P=0.181N	P=0.187N
Lung: Alveolar/Bronchiolar Carcinor	na			
Tumor Rates Overall (b)	1/49 (2%)	3/50 (6%)	2/50 (4%)	2/49 (4%)
Adjusted (c)	1/49 (2%)	7.6%	9.5%	10.9%
Terminal (d)		2/35 (6%)	1/20 (5%)	1/16 (6%)
Statistical Tests (e)		2/33 (0%)	1/20 (570)	1/10 (070)
Life Table		P=0.461	P=0.656	P=0.568
Incidental Tumor Test		P=0.583N	P=0.494N	P=0.639N
Cochran-Armitage Trend Test		P=0.415N	1 0.19410	1 0.00774
Fisher Exact Test		1-0.4151	P=0.500N	P=0.510N
Lung: Alveolar/Bronchiolar Adenom	a or Carcinoma			
Tumor Rates				
Overall (b)	1/49 (2%)	4/50 (8%)	2/50 (4%)	2/49 (4%)
Adjusted (c)		10.4%	9.5%	10.9%
Terminal (d)		3/35 (9%)	1/20 (5%)	1/16 (6%)
Statistical Tests (e)				
Life Table		P=0.584N	P=0.570N	P=0.669
Incidental Tumor Test		P=0.439N	P=0.368N	P=0.516N
Cochran-Armitage Trend Test		P=0.259N		
Fisher Exact Test			P=0.339N	P=0.349
Hematopoietic System: Leukemia				
Tumor Rates Overall (b)	11/50 (22%)	5/50 (1007)	5/50 (10%)	1/49 (2%)
	11/30 (22%)	5/50 (10%) 13.6%	17.9%	5.9%
Adjusted (c) Terminal (d)		4/35 (11%)	2/20 (10%)	0/16 (0%)
Statistical Tests (e)		<i>¬₁ 55 (1170)</i>	2/20 (10/0)	€/ IC (070)
Life Table		P=0.394N	P=0.336	P=0.368N
Incidental Tumor Test		P=0.255N	P=0.548	P=0.309N
Cochran-Armitage Trend Test		P=0.094N	1 0.010	_ 0.00011
Fisher Exact Test			P=0.630	P=0.107N
LIGHT LAUT LOT			- 0.000	- 0.10711

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	Untreated Control	Vehicle Control	Low Dose	High Dose
Hematopoietic System: Leukemia or Z Tumor Rates	Lymphoma	<u>,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,</u>	<u></u>	
Overall (b)	12/50 (24%)	6/50 (12%)	5/50 (10%)	1/49 (2%)
Adjusted (c)		15.4%	17.9%	5.9%
Terminal (d)		4/35 (11%)	2/20 (10%)	0/16 (0%)
Statistical Tests (e)				, (, , , ,
Life Table		P=0.287N	P=0.455	P=0.270N
Incidental Tumor Test		P=0.121N	P=0.512N	P=0.126N
Cochran-Armitage Trend Test		P=0.051N		
Fisher Exact Test			P=0.500N	P=0.059N
Kidney: Tubular-Cell Adenocarcinom	a			
Fumor Rates	0/40 (007)	0/48 (00%)	0/49 (0%)	3/49 (6%)
Overall (b)	0/49 (0%)	0/48 (0%) 0.0%	0.0%	18.8%
Adjusted (c)			0/20 (0%)	3/16 (19%)
Terminal (d) Statistical Tests (e)		0/33 (0%)	0/20 (0%)	5/10 (1970)
Life Table		P=0.009	(f)	P=0.028
Incidental Tumor Test		P=0.009	(f)	P=0.028
Cochran-Armitage Trend Test		P=0.038	07	1 01020
Fisher Exact Test		1-0.050	(f)	P=0.125
Kidney: Tubular-Cell Adenoma or Ad	lenocarcinoma		•	
Fumor Rates				
Overall (b)	0/49 (0%)	0/48 (0%)	2/49 (4%)	3/49 (6%)
Adjusted (c)		0.0%	5.6%	18.8%
Terminal (d)		0/33 (0%)	0/20 (0%)	3/16 (19%)
Statistical Tests (e)				
Life Table		P=0.019	P=0.194	P=0.028
Incidental Tumor Test		P=0.030	P=0.327	P=0.028
Cochran-Armitage Trend Test		P=0.084		
Fisher Exact Test			P=0.253	P=0.125
Pituitary: Chromophobe Adenoma				
Fumor Rates	A (20 (1007) (-)	7(43(1707) 7-)	2125 (607) (3)	1/26 (10%)
Overall (b)	4/39 (10%) (g)	7/42 (17%) (h)	2/35 (6%) (i)	1/26 (4%)
Adjusted (c)	•	21.2%	8.2% 1/18 (6%)	7.7% 1/13 (8%)
Terminal (d) Statistical Tests (e)		7/33 (21%)	1/18 (0%)	1/13 (8%)
Life Table		P=0.147N	P=0.285N	P=0.258N
Incidental Tumor Test		P=0.125N	P=0.250N	P=0.258N
Cochran-Armitage Trend Test		P=0.150N	1 0.25010	
Fisher Exact Test			P=0.128N	P=0.111N
Adrenal: All Pheochromocytomas				
Fumor Rates				
Overall (b)	8/45 (18%)	4/45 (9%)	3/42 (7%)	1/44 (2%)
Adjusted (c)		13.3%	15.8%	3.2%
Terminal (d)		4/30 (13%)	3/19 (16%)	0/16 (0%)
Statistical Tests (e)				
Life Table		P=0.348N	P=0.571	P=0.393N
Incidental Tumor Test		P=0.270N	P=0.571	P=0.254N
Cochran-Armitage Trend Test		P=0.140N		
Fisher Exact Test			P=0.539N	P=0.187N

TABLE 4. ANALYSIS OF PRIMARY TUMORS IN MALE RATS (a) (Continued)

	Untreated Control	Vehicle Control	Low Dose	High Dose
Thyroid: C-Cell Carcinoma	<u>/****</u> /********//********			
Tumor Rates				
Overall (b)	0/44 (0%)	2/44 (5%)	3/43 (7%)	0/39 (0%)
Adjusted (c)		6.5%	15.9%	0.0%
Terminal (d)		2/31 (6%)	2/15 (13%)	0/14 (0%)
Statistical Tests (e)				
Life Table		P=0.470N	P=0.231	P=0.425N
Incidental Tumor Test		P=0.429N	P=0.281	P=0.425N
Cochran-Armitage Trend Test		P=0.232N	D 0 100	D-0 0701
Fisher Exact Test			P=0.489	P=0.278N
Thyroid: C-Cell Adenoma or Carcino	ma			
Tumor Rates				
Overall (b)	5/44 (11%)	4/44 (9%)	3/43 (7%)	0/39 (0%)
Adjusted (c)		12.9%	15.9%	0.0%
Terminal (d)		4/31 (13%)	2/15 (13%)	0/14 (0%)
Statistical Tests (e)		D 0 00 101	D 0 464	D-0 0001
Life Table		P=0.224N	P=0.464	P=0.202N
Incidental Tumor Test		P=0.197N	P=0.519	P=0.202N
Cochran-Armitage Trend Test		P=0.061N	D-0 512N	D-0.074N
Fisher Exact Test			P=0.513N	P=0.074N
Preputial Gland: Adenoma				
Fumor Rates			0.150.(00)	
Overall (b)	4/50 (8%)	4/50 (8%)	0/50 (0%)	1/49 (2%)
Adjusted (c)		11.4%	0.0%	6.2%
Terminal (d)		4/35 (11%)	0/20 (0%)	1/16 (6%)
Statistical Tests (e)		P=0.253N	P=0.154N	P=0.473N
Life Table		P=0.253N P=0.253N	P=0.154N	P=0.473N
Incidental Tumor Test		P=0.253N P=0.084N	1-0.15414	1-0.47511
Cochran-Armitage Trend Test Fisher Exact Test		r-0.064N	P=0.059N	P=0.187N
			1-0.00010	1 0.10714
Preputial Gland: Adenoma or Adeno Fumor Rates	carcinoma			
Overall (b)	4/50 (8%)	5/50 (10%)	1/50 (2%)	3/49 (6%)
Adjusted (c)	((((()))	13.5%	5.0%	13.4%
Terminal (d)		4/35 (11%)	1/20 (5%)	1/16 (6%)
Statistical Tests (e)				
Life Table		P=0.553	P=0.254	P=0.536
Incidental Tumor Test		P=0.457N	P=0.211N	P=0.541N
Cochran-Armitage Trend Test		P=0.272N		
Fisher Exact Test			P=0.102N	P=0.369N
Cestis: Interstitial-Cell Tumor				
Tumor Rates				
Overall (b)	44/47 (94%)	47/49 (96%)	47/49 (96%)	32/46 (709
Adjusted (c)		100.0%	100.0%	96.8%
Terminal (d)		35/35 (100%)	20/20 (100%)	14/15 (939
Statistical Tests (e)				
Life Table		P=0.004	P<0.001	P=0.008
Incidental Tumor Test		P=0.252N	P=0.190	P=0.594N
Cochran-Armitage Trend Test	P<0.001N		D -0 (01	
Fisher Exact Test			P=0.691	P=0.001N

TABLE 4. ANALYSIS OF PRIMARY TUMORS IN MALE RATS (a) (Continued)

•	Untreated Control	Vehicle Control	Low Dose	High Dose
Peritoneum: Malignant Mesotheliom	a			
Tumor Rates				
Overall (b)	1/50 (2%)	1/50 (2%)	5/50 (10%)	0/49 (0%)
Adjusted (c)		2.9%	16.1%	0.0%
Terminal (d)		1/35 (3%)	0/20 (0%)	0/16 (0%)
Statistical Tests (e)				
Life Table		P=0.518	P=0.042	P=0.656N
Incidental Tumor Test		P=0.348N	P=0.274	P=0.656N
Cochran-Armitage Trend Test		P=0.407N		
Fisher Exact Test			P=0.102	P=0.505N
Peritoneum: All Mesotheliomas				
Tumor Rates				
Overall (b)	1/50 (2%)	1/50 (2%)	5/50 (10%)	1/49 (2%)
Adjusted (c)		2.9%	15.6%	6.3%
Terminal (d)		1/35 (3%)	0/20 (0%)	1/16 (6%)
Statistical Tests (e)			, , , , , , , , , , , , , , , , , , , ,	, . ,
Life Table		P=0.286	P=0.042	P=0.578
Incidental Tumor Test		P=0.583	P=0.274	P=0.578
Cochran-Armitage Trend Test		P=0.585		
Fisher Exact Test			P=0.102	P=0.747

TABLE 4. ANALYSIS OF PRIMARY TUMORS IN MALE RATS (a) (Continued)

(a) Dosed groups received doses of 500 or 1,000 mg/kg of trichloroethylene by gavage.

(b) Number of tumor bearing animals/number of animals examined at the site.

(c) Kaplan-Meier estimated lifetime tumor incidence after adjusting for intercurrent mortality.

(d) Observed tumor incidence at terminal kill.

2

(e) Beneath the control incidence are the P values associated with the trend test. Beneath each dosed group incidence is the P value corresponding to the pairwise comparison between that dosed group and the controls. The life table analysis regards tumors in animals dying prior to terminal kill as being (directly or indirectly) the cause of death. The incidental tumor test regards these lesions as non-fatal. The Cochran-Armitage and Fisher's exact test compare directly the overall incidence rates. A negative trend or lower incidence is indicated by (N).

- (f) Not significant; no tumors were observed in dosed or control groups.
- (g) Two chromophobe carcinomas, one adenoma, NOS, and one carcinoma, NOS, were also observed.
- (h) One chromophobe carcinoma was also observed.

(i) One adenoma, NOS, was also observed.

	Untreated Control	Vehicle Control	Low Dose	High Dose
Lung: Alveolar/Bronchiolar Adend	oma or Carcinoma			
Tumor Rates				
Overall (b)	0/49 (0%)	1/50 (2%)	1/49 (2%)	3/50 (6%)
Adjusted (c)		2.7%	3.0%	7.5%
Terminal (d)		1/37 (3%)	1/33 (3%)	0/26 (0%)
Statistical Tests (e)		D 0 1 4 4	D 4 844	D 0 0 4 4
Life Table		P=0.151	P=0.736	P=0.246
Incidental Tumor Test		P=0.326	P=0.736	P=0.541
Cochran-Armitage Trend Test Fisher Exact Test		P=0.202	P=0.747	P=0.309
Iematopoietic System: Leukemia				
Tumor Rates				
Overall (b)	10/ 49 (20%) <i>(f</i>)	14/50 (28%)	4/50 (8%)	9/50 (18%)
Adjusted (c)		33.8%	10.7%	29.1%
Terminal (d)		10/37 (27%)	2/33 (6%)	6/26 (23%)
Statistical Tests (e)				, , ,
Life Table		P=0.316N	P=0.019N	P=0.446N
Incidental Tumor Test		P=0.110N	P=0.004N	P=0.182N
Cochran-Armitage Trend Test		P=0.121N		
Fisher Exact Test			P=0.009N	P=0.171N
Pituitary: Chromophobe Adenoma				
Fumor Rates			() A (10 CT)	() A1 (1800)
Overall (b)	18/43 (42%)	13/37 (35%)	6/34 (18%)	6/41 (15%)
Adjusted (c)		37.5%	24.0%	22.0%
Terminal (d)		9/29 (31%)	5/23 (22%)	3/22 (14%)
Statistical Tests <i>(e)</i> Life Table		D-0 121N	P=0.135N	P=0.191N
Incidental Tumor Test		P=0.131N P=0.036N	P=0.075N	P=0.040N
Cochran-Armitage Trend Test		P=0.022N	1-0.07514	1-0.04014
Fisher Exact Test		1-0.02211	P=0.081N	P=0.032N
Pituitary: All Adenomas or Carcin	omas			
Tumor Rates				
Overall (b)	19/43 (44%)	13/37 (35%)	8/34 (24%)	6/41 (15%)
Adjusted (c)		37.5%	30.3%	22.0%
Terminal (d)		9/29 (31%)	6/23 (26%)	3/22 (14%)
Statistical Tests (e)				
Life Table		P=0.151N	P=0.297N	P=0.191N
Incidental Tumor Test		P=0.038N	P=0.188N	P=0.040N
Cochran-Armitage Trend Test Fisher Exact Test		P=0.024N	P=0.209N	P=0.032N
Adrenal: Cortical Adenoma			1-0.20910	1-0.0521
Sumor Rates				
Overall (b)	2/45 (4%)	1/46 (2%)	2/48 (4%)	3/47 (6%)
Adjusted (c)	-/ -0 (. /0)	3.0%	6.1%	12.0%
Terminal (d)		1/33 (3%)	2/33 (6%)	3/25 (12%)
Statistical Tests (e)		.,	-, (-,0)	-, (, 0,
Life Table		P=0.142	P=0.500	P=0.210
Incidental Tumor Test		P=0.142	P=0.500	P=0.210
Cochran-Armitage Trend Test	P=0.227			
Fisher Exact Test		P=0.516	P=0.317	

TABLE 5. ANALYSIS OF PRIMARY TUMORS IN FEMALE RATS (a)

	Untreated Control	Vehicle Control	Low Dose	High Dose
Thyroid: C-Cell Adenoma			····	
Tumor Rates				
Overall (b)	2/36 (6%) (g)	4/41 (10%)	1/45 (2%)	1/44 (2%)
Adjusted (c)		10.9%	3.3%	4.2%
Terminal (d)		3/34 (9%)	1/30 (3%)	1/24 (4%)
Statistical Tests (e)				
Life Table		P=0.168N	P=0.214N	P=0.290N
Incidental Tumor Test		P=0.127N	P=0.168N	P=0.210N
Cochran-Armitage Trend Test		P=0.086N		
Fisher Exact Test			P=0.152N	P=0.159N
Mammary Gland: Fibroadenoma				
Tumor Rates Overall (b)	10/40 (2007)	0/50 (1907)	12 (50 (240)	A (50 (901)
	10/49 (20%)	9/50 (18%) 22.9%	12/50 (24%) 32.6%	4/50 (8%) 14.5%
Adjusted (c) Terminal (d)		7/37 (19%)	9/33 (27%)	3/26 (12%)
Statistical Tests (e)		// 3/ (19%)	9/33 (21%)	5/20 (12%)
Life Table		P=0.307N	P=0.240	P=0.285N
Incidental Tumor Test		P=0.169N	P=0.353	P=0.177N
Cochran-Armitage Trend Test		P=0.114N	r #0.335	1-0.1771
Fisher Exact Test		1-0.1141	P=0.312	P=0.117N
Uterus: Endometrial Stromal Polyp				
Tumor Rates				
Overall (b)	10/45 (22%)	15/48(31%)	8/48 (17%)	6/46 (13%)
Adjusted (c)		40.1%	23.1%	21.0%
Terminal (d)		13/35(37%)	7/33 (21%)	4/25 (16%)
Statistical Tests (e)		, , , , , , , , , , , , , , , , , , , ,	, , , , , , , , , , , , , , , , , , , ,	
Life Table		P=0.074N	P=0.098N	P=0.120N
Incidental Tumor Test		P=0.035N	P=0.069N	P=0.056N
Cochran-Armitage Trend Test		P=0.019N		
Fisher Exact Test			P=0.075N	P=0.030N
Uterus: Endometrial Stromal Polyp o	or Sarcoma			
Tumor Rates				
Overall (b)	10/45 (22%)	15/48 (31%)	8/48 (17%)	7/46(15%)
Adjusted (c)		40.1%	23.1%	23.5%
Terminal (d)		13/35 (37%)	7/33 (21%)	4/25(16%)
Statistical Tests (e)		D 4 45777	D 0 00000	n
Life Table		P=0.127N	P=0.098N	P=0.193N
Incidental Tumor Test		P=0.060N	P=0.069N	P=0.086N
Cochran-Armitage Trend Test		P=0.037N	D. 0.05555	-
Fisher Exact Test			P=0.075N	P=0.055N

TABLE 5. ANALYSIS OF PRIMARY TUMORS IN FEMALE RATS (a) (Continued)

(a) Dosed groups received doses of 500 or 1,000 mg/kg of trichloroethylene by gavage.

(b) Number of tumor bearing animals/number of animals examined at the site.

(c) Kaplan-Meier estimated lifetime tumor incidence after adjusting for intercurrent mortality.

(d) Observed tumor incidence at terminal kill.

(e) Beneath the control incidence are the P values associated with the trend test. Beneath each dosed group incidence is the P value corresponding to the pairwise comparison between that dosed group and the controls. The life table analysis regards tumors in animals dying prior to terminal kill as being (directly or indirectly) the cause of death. The incidental tumor test regards these lesions as non-fatal. The Cochran-Armitage and Fisher's exact test compare directly the overall incidence rates. A negative trend or lower incidence is indicated by (N).

(f) One malignant lymphoma, histiocytic type, was also observed.

(g) One C-cell carcinoma was also observed.

THIRTEEN-WEEK STUDIES

The survival, body weight gains, and relative liver weights for mice receiving TCE for 13 weeks are summarized in Table 6. Deaths occurred in all males and 9/10 females receiving 6,000 mg/kg, 7/10 males and 1/10 females receiving 3,000 mg/kg, and 2/10 males and 1/10females receiving 1,500 mg/kg. Mean body weights of male mice receiving 750, 1,500, or 3,000 mg/kg doses were depressed 11%, 19%, and 17%, respectively, relative to controls. Mean body weights of control and dosed groups of female mice were similar.

Liver weights (both absolute and as a percent of body weight) increased with dose. Liver weights were increased by more than 10% relative to controls for males receiving 750 mg/kg or more and for females receiving 1,500 mg/kg or more.

The most prominent hepatic lesion detected in the mice was centrilobular necrosis, observed in 6/10 males and 1/10 females administered 6,000mg/kg. Although centrilobular necrosis was not seen in either males or females administered 3,000 mg/kg, 2/10 males had multifocal areas of calcification scattered throughout their livers. These areas of calcification are considered to be evidence of earlier hepatocellular necrosis. Multifocal calcification was also seen in the liver of a single female mouse that survived the 6,000mg/kg dosage regimen. One female mouse administered 3,000 mg/kg also had an hepatocellular adenoma, an extremely rare lesion in female mice of this age (20 weeks).

As in the rat study, reevaluation of the kidney tissues revealed the presence of mild to moderate cytomegaly and karyomegaly of the renal tubular epithelial cells of the inner cortex. These lesions appear to be a response to repeated doses of TCE, since they were found in only 1 of the 13 males and 10 females that died after receiving doses of 3,000 or 6,000 mg/kg for up to 6 weeks. All four of the male mice that died after receiving the 3,000 mg/kg dose for 7-13 weeks had the lesions, as did all animals that survived the 6,000 mg/kg (1/10 females) and the 3,000 mg/kg doses (3/10 males and 9/10 females). Tissues from mice receiving lower doses of TCE were not examined.

The single dose chosen for the 2-year study in $B6C3F_1$ mice (1,000 mg/kg) was selected on the basis of results of the present 13-week study and the earlier 2-year study (NCI, 1976). While the relatively low incidence of major histopathological lesions among animals administered 3,000 mg/kg and the lack of clinical signs among animals administered 1,500 mg/kg suggested that 1,500 mg/kg might be an acceptable dose level for the 2-year study, the two deaths in males and one death in females at this level indicated toxicity. (The single death in females at 750 mg/kg occurred during week 2 and may not have been due to a toxic effect of trichloroethylene.) Mean liver weights and liver weight/body weight ratios also were increased at 1,500 mg/ kg in both malesand females, compared to controls. Doses in the range of 1,500 mg/kg were associated with significantly shorter survival times among female mice in the earlier 2-year study. Consequently, the 1,000 mg/kg dose was selected in an attempt to achieve improved survival in the new study.

40

Dose Survival		vival Mean Body Weights (grams)		Final Body Weights Relative to Controls <i>(b)</i>	Mean Liver Weights	Relative Liver Weight (Percent	
(ppm)	<i>(a)</i>	Initial	Final	Change	(Percent)	(Grams)	of Body Weight
MALES							
0	10/10	21	36	+15	_	2.10	5.8
375	10/10	20	35	+15	- 3	1.74	5.0
750	10/10	21	32	+11	-11	2.14	6.8
1,500	8/10 (c)	19	29	+10	-19	2.27	7.6
3,000	3/10 (d)	20	30	+10	-17	2.78	8.5
6,000	0/10 <i>(e)</i>	22	—	—		—	—
FEMALE	S						
0	10/10	18	26	+ 8		1.40	5.5
375	10/10	17	26	+ 9	0	1.31	5.0
750	9/10 <i>(f</i>)	17	26	+ 9	0	1.55	5.8
1,500	9/10 (g)	17	26	+ 9	0	1.80	6.5
3,000	9/10 (g)	15	26	+11	0	2.06	7.8
6,000	1/10(h)	15	27	+12	+ 4	2.67	9.5

TABLE 6. SURVIVAL, MEAN BODY WEIGHTS, AND MEAN LIVER WEIGHTS OF MICEADMINISTERED TRICHLOROETHYLENE IN CORN OIL BY GAVAGE FOR 13 WEEKS

(a) Number surviving/number per group

(b) Weight Relative to Controls =

Weight (Dosed Group) – Weight (Control Group) × 100

Weight (Control Group)

(c) Week of death: 2, 7

(d) Week of death: 1, 6, 6, 7, 9, 10, 13

(e) All mice died during the first week

(f) One mouse died during the second week

(g) One mouse died during the fifth week

(h) Eight mice died during the first week; one mouse died during the third week

Trichloroethylene

 $\sim 10^{-1}$

TWO-YEAR STUDIES

Body Weights and Clinical Signs

Mean body weights of dosed male mice were lower than those of controls throughout the study (Table 7 and Figure 3). Mean body weights of dosed and control female mice were comparable. No compound-related clinical signs were reported.

TABLE 7. MEAN BODY WEIGHTS (RELATIVE TO CONTROLS) OF MICE ADMINISTEREDTRICHLOROETHYLENE IN CORN OIL BY GAVAGE FOR TWO YEARS

		Mean Boo (gra	ly Weight ms)	Body Weight Relative to Controls (a) (Percent)
	Week No.	Control	Dosed	Dosed
Males	<u></u>			
	0	27	27	0
	1	28	29	+ 4
	20	36	34	- 6
	39	46	39	-15
	60	46	41	-11
	80	46	40	-13
	99	41	37	-10
emales				
	0	21	22	+ 5
	1	22	23	+ 5
	20	28	28	0
	39	35	32	- 9
	60	39	36	- 8
	80	38	39	+ 3
	99	35	33	- 6

(a) Weight of the dosed group relative to that of the controls =

Weight (Dosed Group) - Weight (Control Group)

Weight (Control Group)

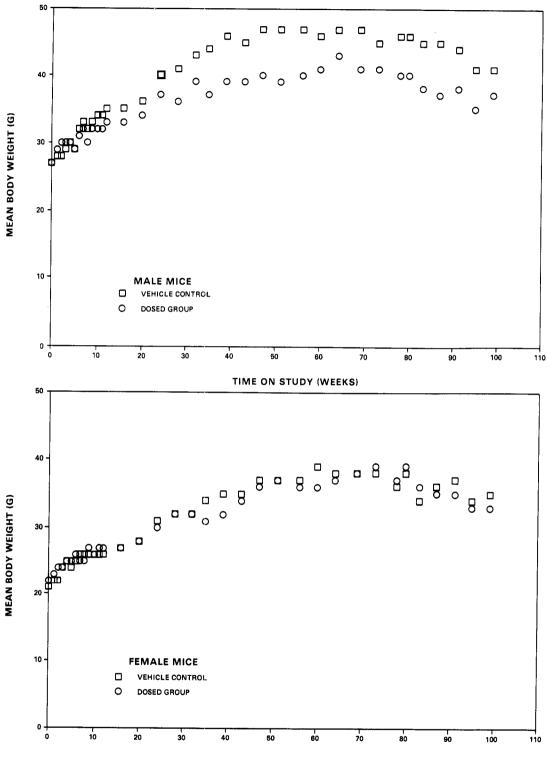
Antibody Titers

Viral antibody titers are shown in Appendix F. Sendai virus titers were positive at the 6-, 12-, and 18-month tests. At the 24-month test, all titers were negative.

Survival

Ten males (4 vehicle control and 6 dosed) and 11 females (6 vehicle control and 5 dosed) were replaced, due to gavage error, during the initial 1.5 weeks of the study. Estimates of the probabilities of survival of male and female mice administered trichloroethylene at the concentrations used in this bioassay and the estimates for the control groups are shown by the Kaplan and Meier curves in Figure 4. Two male vehicle controls, three dosed males, one female vehicle control, and three dosed females died as a result of gavage error. These animals were censored from the Kaplan and Meier curves at the date of death. The survival of the male dosed group was significantly reduced (P=0.004) when compared with that of the controls. No significant difference was observed between the female control and dosed groups.

100



TIME ON STUDY (WEEKS)

Figure 3. Growth Curves for Mice Administered Trichloroethylene in Corn Oil by Gavage

Trichloroethylene

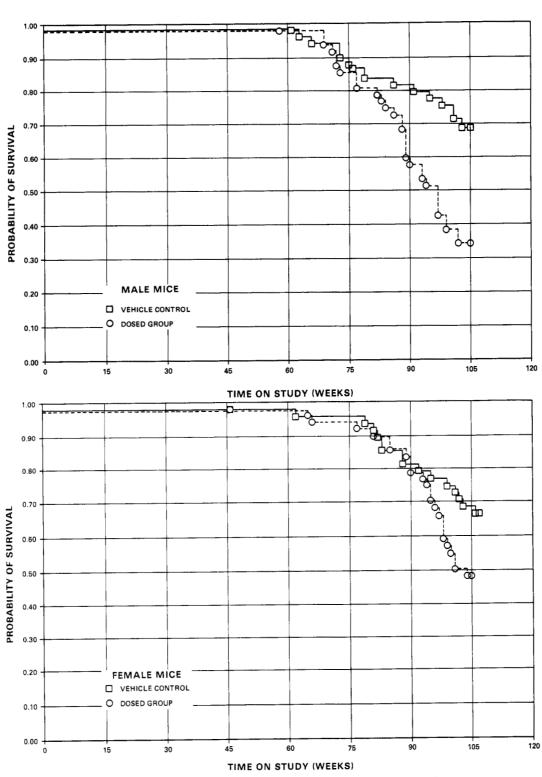


Figure 4. Survival Curves for Mice Administered Trichloroethylene in Corn Oil by Gavage

Trichloroethylene

44

In male mice, 33/50 (66%) of the controls and 16/50 (32%) of the dosed group lived to the end of the study. In female mice, 32/50 (64%) of the controls and 23/50 (46%) of the dosed group lived to the end of the study. The survival data include four control males, one control female, and one dosed female that died during the termination period of the study (weeks 104-107). For the statistical evaluation of tumor incidences, these animals are considered to have been killed at termination.

Pathology and Statistical Analyses of Results

Histopathologic findings on neoplasms occurring in mice are summarized in Appendix B, Tables B1 and B2. Tables B3 and B4 give the survival and tumor status for each individual animal in the male and female mouse studies, respectively. Findings on nonneoplastic lesions are summarized in Appendix D, Tables D1 and D2. Tables 8 and 9 contain the statistical analyses of those primary tumors that occurred with an incidence of at least 5% in either group. Many of the lymph nodes, thymuses, tracheae, pituitaries, thyroids, parathyroids, and ovaries were not examined microscopically. These omissions appear to be the result of faulty histological technique.

Liver: The incidence of hepatocellular carcinoma was significantly increased in dosed male and female mice (males: control, 8/48; dosed, 31/50; P<0.001; females: control, 2/48; dosed, 13/49; P≤0.002). In five dosed males and one control male, these tumors metastasized to the lung. The incidence of hepatocellular adenomas was increased in dosed mice (males: control, 7/48; dosed, 14/50; females: control, 4/48; dosed, 16/49; P<0.05).

Microscopically, the hepatocellular adenomas were circumscribed areas of distinctive hepatic parenchymal cells with a perimeter of normal appearing parenchyma in which there were areas that appeared to be undergoing compression from expansion of the tumor. Mitotic figures were sparse or absent, but the tumors lacked typical lobular organization.

The hepatocellular carcinomas had markedly abnormal cytology and architecture. Abnormalities in cytology included increased cell size, decreased cell size, cytoplasmic eosinophilia, cytoplasmic basophilia, cytoplasmic vacuolization, cytoplasmic hyaline bodies and variations in nuclear appearance. In many instances, several or all of the abnormalities were present in different areas of the tumor. There also were variations in architecture. Some of the hepatocellular carcinomas had areas of trabecular organization. The general microscopic appearance was that of a diffusely infiltrating hepatocellular tumor that was replacing the normal architectural pattern of the liver. Often the boundary between recognizable tumor and nonneoplastic liver was vague. In some areas, subtle infiltration of tumor cells among persistent remnants of portal areas created a confusion of microscopic details that were difficult to interpret. Mitosis was variable in amount and location.

Lung: Alveolar/bronchiolar adenomas occurred at an increased incidence in dosed female mice (life table, P=0.040; control, 0/48; dosed, 4/48). However, the incidence of alveolar/bronchiolar adenoma or carcinoma (combined) was not significantly elevated in dosed female mice.

Hematopoietic System: Lymphoma (all malignant) and lymphoma or leukemia occurred at increased incidences in dosed female mice (P < 0.05, life table test; lymphoma, control, 7/48, 15%; dosed, 13/49, 27%; lymphoma or leukemia, control, 7/48, 15%; dosed 14/49, 29%). In male mice, these tumors did not occur in statistically significant proportions.

Stomach: Squamous-cell papillomas were found in two dosed female mice, and a squamous cell carcinoma was found in a third dosed female mouse. A squamous cell carcinoma was also found in a male vehicle control.

Kidney: A compound related toxic nephrosis, designated as "cytomegaly," was present in 90% of the dosed male and 98% of the dosed female mice but not in the controls. The pathologic development was basically similar to the comparable cytomegaly found in dosed rats, but it was relatively less severe and did not develop to a stage in which there was extensive loss of cytomegalic epithelial cells and tubular dilation. The cytomegaly in mice was generally graded as slight (1) or moderate (2); in only one instance was a grade of well marked (3)assigned (average numerical grade, 0.0 for control males and females, 1.5 for dosed males, and 1.8 for dosed females). One control male had a renal tubular celladenoma, and one dosed male had a renal tubular cell adenocarcinoma.

Harderian Gland: Harderian gland adenomas were detected in 4 dosed male and 3 dosed female mice. None were observed in male or female vehicle control mice. Only Harderian glands considered abnormal at necropsy were examined microscopically.

TABLE 8. ANALYSIS OF F	PRIMARY T	UMORS IN MA	ALE MICE (a)
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	Vehicle Control	Dosed
Lung- Alveolar/Bronchiolar Adenoma		
Tumor Rates		
Overall (b)	4/49 (8%)	5/50 (10%)
Adjusted (c)	10.5%	27.1%
Terminal (d)	2/33 (6%)	4/16 (25%)
Statistical Tests (e)		
Life Table		P=0.197
Incidental Tumor Test		P=0.375
Fisher Exact Test		P=0.513
Lung: Alveolar/Bronchiolar Carcinoma		
Tumor Rates		
Overall (b)	3/49 (6%)	1/50 (2%)
Adjusted (c)	9.1%	4.0%
Terminal (d)	3/33 (9%)	0/16 (0%)
Statistical Tests (e)		
Life Table		P=0.553N
Incidental Tumor Test		P=0.407N
Fisher Exact Test		P=0.301N
Lung: Alveolar/Bronchiolar Adenoma or (Carcinoma	
Tumor Rates		
Overall (b)	7/49 (14%)	6/50 (12%
Adjusted (c)	19.2%	30.0%
Terminal (d)	5/33 (15%)	4/16 (25%
Statistical Tests (e)		
Life Table		P=0.310
Incidental Tumor Test		P=0.575
Fisher Exact Test		P=0.484N
Hematopoietic System: Malignant Lympho	oma, Undifferentiated Type	
Tumor Rates		E 1 EQ. (1007)
Overall (b)	3/50 (6%)	5/50 (10%
Adjusted (c)	6.7%	17.4%
Terminal (d)	0/33 (0%)	1/16 (6%)
Statistical Tests (e)		D-0.259
Life Table		P=0.258
Incidental Tumor Test		P=0.590
Fisher Exact Test		P=0.357
Hematopoietic System: Malignant Lympho	oma, Mixed Type	
Tumor Rates		
Overall (b)	3/50 (6%)	3/50 (6%)
Adjusted (c)	8.8%	14.6%
Terminal (d)	2/33 (6%)	1/16 (6%)
Statistical Tests (e)		D _0.440
Life Table		P=0.348
Incidental Tumor Test		P=0.663N
Fisher Exact Test		P=0.661

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	Vehicle Control	Dosed
Hematopoietic System: Lymphoma, All	Malignant	
Tumor Rates Overall(b) Adjusted (c) Terminal (d) Statistical Tests (e)	11/50 (22%) 25.2% 3/33 (9%)	13/50 (26%) 45.7% 3/16 (19%)
Life Table Incidental Tumor Test Fisher Exact Test		P=0.116 P=0.398N P=0.408
Liver: Adenoma Tumor Rates		
Overall(b) Adjusted (c) Terminal (d)	7/48 (15%) 20.6% 6/33 (18%)	14/50 (28%) 53.1% 6/16 (37%)
Statistical Tests (e) Life Table Incidental Tumor Test Fisher Exact Test		P=0.002 P=0.048 P=0.084
Liver: Carcinoma Tumor Rates		
Overall(b) Adjusted (c) Terminal (d)	8/48 (17%) 22.1% 6/33 (18%)	31/50 (62%) 92.9% 14/16 (88%)
Statistical Tests (e) Life Table Incidental Tumor Test Fisher Exact Test		P<0.001 P<0.001 P<0.001
Liver: Adenoma or Carcinoma		
Tumor Rates Overall(b) Adjusted (c) Terminal (d)	14/48 (29%) 38.4% 11/33 (33%)	39/50 (78%) 100% 16/16 (100%)
Statistical Tests (e) Life Table Incidental Tumor Test Fisher Exact Test		P<0.001 P<0.001 P<0.001
Harderian Gland: All Adenomas		
Tumor Rates Overall(b) Adjusted (c) Terminal (d)	0/50 (0%) 0.0% 0/33 (0%)	4/50 (8%) 12.0% 0/16 (0%)
Statistical Tests (e) Life Table Incidental Tumor Test Fisher Exact Test		P=0.044 P=0.216 P=0.059

TABLE 8. ANALYSIS OF PRIMARY TUMORS IN MALE MICE (a) (Continued)

Trichloroethylene

TABLE 8. ANALYSIS OF PRIMARY TUMORS IN MALE MICE (a) (Continued)

- (a) The dosed group received doses of 1,000 mg/kg of trichloroethylene by gavage.
- (b) Number of tumor bearing animals/number of animals examined at the site.
- (c) Kaplan-Meier estimated lifetime tumor incidence after adjusting for intercurrent mortality.
- (d) Observed tumor incidence at terminal kill.
- (e) Beneath the dosed group incidence is the P value corresponding to the pairwise comparison between the dosed group and the controls. The life table analysis regards tumors in animals dying prior to terminal kill as being (directly or indirectly) the cause of death. The incidental tumor test regards these lesions as non-fatal. The Fisher exact test compares directly the overall incidence rates. A negative trend or lower incidence is indicated by N.

18 2

	Vehicle Control	Dosed
Lung: Alveolar/Bronchiolar Adenoma		
Tumor Rates		
Overall (b)	0/48 (0%)	4/48 (8%)
Adjusted (c)	0.0%	14.3%
Terminal (d)	0/32 (0%)	2/22 (9%)
Statistical Tests (e)		
Life Table		P=0.040
Incidental Tumor Test		P=0.064
Fisher Exact Test		P=0.059
Lung: Alveolar/Bronchiolar Adenoma or C	arcinoma	
Tumor Rates		
Overall (b)	1/48 (2%)	4/48 (8%)
Adjusted (c)	2.5%	14.3%
Terminal (d)	0/32 (0%)	2/22 (9%)
Statistical Tests (e)		
Life Table		P=0.132
Incidental Tumor Test		P=0.184
Fisher Exact Test		P=0.181
Hematopoietic System: Malignant Lympho	ma. Undifferentiated Type	
Tumor Rates		
Overall (b)	1/48 (2%)	3/49 (6%)
Adjusted (c)	2.2%	10.1%
Terminal (d)	0/32 (0%)	0/23 (0%)
Statistical Tests (e)		
Life Table		P=0.252
Incidental Tumor Test		P=0.476
Fisher Exact Test		P=0.316
	The second strength	
Hematopoietic System: Malignant Lympho Tumor Rates	ma, Lympnocytic Type	
Overall (b)	0/48 (0%)	3/49 (6%)
Adjusted (c)	0.0%	9.6%
Terminal (d)	0/32 (0%)	0/23 (0%)
Statistical Tests (e)		
Life Table		P=0.096
Incidental Tumor Test		P=0.324
Fisher Exact Test		P=0.125
Hematopoietic System: Malignant Lympho	ma. Histiocytic Type	
Tumor Rates		
Overall (b)	1/48 (2%)	3/49 (6%)
Adjusted (c)	2.8%	10.9%
Terminal (d)	0/32 (0%)	2/23 (9%)
Statistical Tests (e)		
Life Table		P=0.228
Incidental Tumor Test		P=0.323
************ * WITEAT * ABF		P=0.316

TABLE 9. ANALYSIS OF PRIMARY TUMORS IN FEMALE MICE (a)

		Vehicle Control	Dosed
	Malignant Lymphoma, N	Aixed Type	
Tumor Rates Overall(b) Adjusted (c) Terminal (d) Statistical Tests (e)		3/48 (6%) 9.1% 2/32 (6%)	2/49 (4%) 7.5% 1/23 (4%)
Life Table Incidental Tumor Test Fisher Exact Test			P=0.636N P=0.424N P=0.490N
Hematopoietic System: Tumor Rates	Lymphoma, All Maligna	ant	
Overall(b) Adjusted (c) Terminal (d)		7/48 (15%) 18.8% 3/32 (9%)	13/49 (27%) 38.0% 3/23 (13%)
Statistical Tests (e) Life Table Incidental Tumor Test Fisher Exact Test			P=0.047 P=0.331 P=0.114
Hematopoietic System: Tumor Rates	Lymphoma or Leukemia		
Overall(b) Adjusted (c) Terminal (d)		7/48 (15%) 18.8% 3/32 (9%)	14/49 (29%) 39.3% 3/23 (13%)
Statistical Tests (e) Life Table Incidental Tumor Test Fisher Exact Test			P=0.032 P=0.287 P=0.076
Liver: Adenoma Tumor Rates			
Overall(b) Adjusted (c) Terminal (d)		4/48 (8%) 12.5% 4/32 (13%)	16/49 (33%) 55.6% 11/23 (48%)
Statistical Tests (e) Life Table Incidental Tumor Test Fisher Exact Test			P<0.001 P=0.001 P=0.003
Liver: Carcinoma			
Tumor Rates Overall(b) Adjusted (c) Terminal (d)		2/48 (4%) 6.2% 2/32 (6%)	13/49 (27%) 43.9% 8/23 (35%)
Statistical Tests (e) Life Table Incidental Tumor Test Fisher Exact Test			P<0.001 P=0.002 P=0.002

TABLE 9. ANALYSIS OF PRIMARY TUMORS IN FEMALE MICE (a) (Continued)

Trichloroethylene

	Vehicle Control	Dosed
Liver: Adenoma or Carcinoma		
Tumor Rates Overall(b) Adjusted (c) Terminal (d)	6/48 (13%) 18.7% 6/32 (19%)	22/49 (45%) 69.7% 4/23 (61%)
Statistical Tests (e) Life Table Incidental Tumor Test Fisher Exact Test		P<0.001 P<0.001 P<0.001
Stomach: Squamous Cell Papilloma or Car	cinoma	
Tumor Rates Overall(b) Adjusted (c) Terminal (d)	0/47 (0%) 0.0% 0/32 (0%)	3/47 (6%) 8.1% 0/22 (0%)
Statistical Tests (e) Life Table Incidental Tumor Test Fisher Exact Test		P=0.112 P=0.261 P=0.121
Pituitary: Chromophobe Adenoma		
Tumor Rates Overall(b) Adjusted (c) Terminal (d)	3/27 (11%) 13.1% 2/19 (11%)	0/28 (0%) 0.0% 0/14 (0%)
Statistical Tests (e) Life Table Incidental Tumor Test Físher Exact Test		P=0.183N P=0.081N P=0.111N
Harderian Gland: Adenoma		
Tumor Rates Overall(b) Adjusted (c) Terminal (d)	0/48 (0%) 0.0% 0/32 (0%)	3/49 (6%) 8.3% 0/23 (0%)
Statistical Tests (e) Life Table Incidental Tumor Test Fisher Exact Test		P=0.114 P=0.171 P=0.125

TABLE 9. ANALYSIS OF PRIMARY TUMORS IN FEMALE MICE (a) (Continued)

(a) The dosed groups received doses of 1,000 mg/kg of trichloroethylene by gavage.

(b) Number of tumor-bearing animals/number of animals examined at the site.

(c) Kaplan-Meier estimated lifetime tumor incidence after adjusting for intercurrent mortality.

(d) Observed tumor incidence at terminal kill.

(e) Beneath the control incidence is the P value associated with the trend test. Beneath the dosed group incidence is the P value corresponding to the pairwise comparison between the dosed group and the controls. The life table analysis regards tumors in animals dying prior to terminal kill as being (directly or indirectly) the cause of death. The incidental tumor test regards these lesions as non-fatal. The Fisher exact test compares directly the overall incidence rates. A negative trend or lower incidence is indicated by N.

Trichloroethylene

IV. DISCUSSION AND CONCLUSIONS

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Carcinogenesis studies of epichlorohydrinfree trichloroethylene were conducted by administering the test chemical in corn oil by gavage to groups of 50 male and 50 female F344/N rats and B6C3F₁ mice. Trichloroethylene was administered five times per week for 103 weeks, and surviving animals were killed between weeks 103 and 107. Groups of 50 rats and 50 mice of each sex received corn oil by gavage on the same schedule and served as vehicle controls. Groups of 50 male and 50 female rats were used as untreated controls.

Groups of 10 male and 10 female rats received TCE by gavage at doses of 125 to 2,000 mg/kg (males) and 62.5 to 1,000 mg/kg (females) for 13weeks. Groups of 10 male and 10 female mice received gavage doses of 375 to 6,000 mg/kg of TCE for 13 weeks. Survival, body weight gains, and previous experience with TCE were used to select doses for the 2-year studies. All rats survived the 13-week studies; males receiving 2,000 mg/kg exhibited a 24% difference in final body weight compared to controls. The doses selected for the 2-year study in rats were 500 and 1,000 mg/kg for both sexes. These dose levels were lower than the initial doses used in the earlier bioassay in Osborne-Mendel rats (650 and 1,300 mg/kg for both sexes). Two dose levels were used in the rat portion of the study because TCE had not been tested in a bioassay with F344/N rats, and in the earlier bioassay in Osborne-Mendel rats the chemical was not shown to be carcinogenic.

All male mice receiving 750 mg/kg, 8/10 males given 1,500 mg/kg, and 9/10 female mice administered 750 or 1,500 mg/kg survived the 13-week experimental period. The single dosage level selected for the 2-year study in mice was 1,000 mg/kg for both sexes. This dose was less than the high doses used in the earlier bioassay in B6C3F₁ mice (2,339 mg/kg for males and 1,739 for females). A single dose level was used in the mouse study because TCE containing epichlorohydrin had been shown to be carcinogenic in B6C3F₁ mice in the earlier bioassay (NCI, 1976). The mice in the present study served as "positive" controls.

The earlier bioassay of TCE (NCI, 1976) established the kidneys of both Osborne-Mendel rats and $B6C3F_1$ mice as target organs for nonneoplastic lesions (toxic nephrosis) induced by long-term administration of TCE. The results of the present study confirmed the effect in $B6C3F_1$ mice, and the data indicate that the kidney is a target organ in F344/N rats as well.

Toxic nephropathy was present in 98% of the dosed male rats, in 100% of the dosed female rats, in 90% of the dosed male mice, and in 98%of the dosed female mice; and was not present in any of the vehicle control rats or mice of either sex. First noticed in rats that died early, the lesions were diagnosed as frank enlargement of the nucleus and cytoplasm of scattered individual tubular cells with brush borders and located near the cortico-medullary junction. Progression of the lesion was evident. As exposure time increased, affected tubular cells continued to enlarge and additional tubules and tubular cells were affected. Occasionally, some tubules were enlarged or dilated to the extent that they were difficult to identify as tubules. Eventually, there was loss of some enlarged cells. Corresponding tubules became dilated and portions of the basement membrane had a stripped appearance. In the most advanced stage, the lesion had progressed to the subcapsular cortex, with enlarged tubular cells. Development of toxic nephropathy did not completely overshadow development of the "spontaneous" rat nephropathy which was recognized in a smaller number of dosed animals than of controls. The toxic nephropathy was graded as slight (1), moderate (2), well marked (3), and severe (4). The numerical value calculated for each group of rats was 0.0 for male and female controls, 2.8 for low dose males, 1.9 for low dose females, 3.1 for high dose males, and 2.7 for high dose females. In mice, the pathologic development was basically similar to the comparable cytomegaly found in dosed rats, but it was relatively less severe and did not develop to a stage in which there was extensive loss of cytomegalic epithelial cells and tubular dilation. The cytomegaly in mice was generally graded as slight (1) or moderate (2); in only one instance was a grade of well marked (3) assigned (average numerical grade, 0.0 for control males and females, 1.5 for dosed males, and 1.8 for dosed females).

In addition to the nonneoplastic renal lesions, the present study has established the kidney of the male F344/N rat as a target organ for neoplastic changes induced by long term administration of TCE. In male rats, the high dose of TCE was associated with a significant (P < 0.05) increase in the incidence of renal tubular cell adenocarcinoma in rats killed at the end of the experiment (control, 0/33; low dose, 0/20; high dose, 3/16). In addition, two low dose male rats had tubular cell adenoma. Other types of neoplasms found in the kidneys of male rats included a transitional cell carcinoma of the kidney pelvis in a low dose animal and a carcinoma (NOS) of the renal pelvis in a high dose animal. One high dose female also had a renal adenocarcinoma. No renal neoplasms were found in vehicle control animals, but one untreated control male had a transitional cell papilloma of the renal pelvis.

The primary criterion used to differentiate small tubular cell adenocarcinomas from tubular cell adenomas in this study was evidence of basement membrane invasion. Marked cellular atypia, aggressive growth, and increased mitotic activity characterized the adenocarcinoma. Because of their morphologic similarities, there is little doubt that tubular cell adenomas have the potential to progress to renal adenocarcinomas. For this reason, there is validity in combining renal tubular cell adenomas and adenocarcinomas for determining the carcinogenicity of TCE. The number of renal tubular cell neoplasms in male rats is control, 0/48; low dose, 2/49; and high dose, 3/49.

Renal tumors are rare among F344/N male rats, with 3/748 (0.4%) corn oil control rats in the Bioassay Program having had adenocarcinoma, adenoma, or carcinoma of the renal pelvis (Appendix E, Table E1). All three of these tumors were adenocarcinomas, and all three occurred in animals killed at the end of their respective studies. The incidence of renal tumors among the dosed male rats in this study exceeds both historical and concurrent control rates.

The renal tumors observed in dosed male rats were probably produced by TCE administration; these tumors may have been secondary to the nephrotoxicity. However, TCE produced the same nephrotoxicity in female rats and in both sexes of mice without inducing these tumors; thus, nephrotoxicity did not lead to carcinogenicity in three of four experiments.

Both dose levels of TCE used in this study were toxic for male F344/N rats; the mechanism or causes of the early deaths among rats in this study have not been established. This decreased survival might have reduced the sensitivity of the bioassay to detect a higher incidence of adenocarcinomas or other neoplasms. Ten (20%) high dose male rats were killed accidentally by gavage error (these deaths were not considered to have been due to chemical toxicity and even with these excluded, the decrease in survival of high dose males was significant, P=0.001). There appears to be a dose-response relationship in the incidence of animals accidentally killed by gavage error (males: 1 vehicle control, 3 low dose, 10 high dose; females: 2 vehicle controls, 5 low dose, 5 high dose).

The incidence of mesotheliomas of the peritoneum among low dose male rats was increased (control, 1/50; low dose, 5/50; high dose, 1/49; P < 0.05). The first mesothelioma to be diagnosed was in a low dose animal during week 64 (the others were at weeks 70, 97, 99, and 100), and 29/50 of the high dose males survived longer than 64 weeks. The mesothelioma found among high dose males was detected at 103 weeks, whereas the one in controls was observed at week 106. The incidence of this tumor in the low dose males exceeds the historical incidence (16/752, 2.1%, Appendix E, Table E2). This increase in mesotheliomas may have been related to the administration of TCE.

The results of the present study with epichlorohydrin-free TCE in mice are similar to those with epichlorohydrin-containing TCE (NCI, 1976). In both studies, TCE administration produced significant increases in the incidence of male and female B6C3F₁ mice with hepatocellular carcinoma. In the present study, a higher percentage of dosed male mice dying before the end of the study (16/34, 47%) had hepatocellular carcinoma compared with control males dying early (2/15, 13%). The earliest hepatocellular carcinoma found among dosed males was at week 57, and the earliest diagnosis among control males was at week 75. The incidence of dosed male mice having this tumor detected at the end of the study was 14/16 (88%) versus 6/33 (18%) in the control groups. The incidence of dosed male mice with hepatocellular carcinoma exceeded the rates in either concurrent or historical control groups (31/50, 62%, versus 8/48, 17%, or 120/656, 18%; Appendix E, Pulmonary metastasis of the Table E7). hepatocellular carcinomas was found in 5/31 (16%) dosed males and 1/8(13%) control males.

The incidence of dosed female mice with hepatocellular carcinoma (13/49, 27%) was seven to nine times greater than that in either concurrent (2/48, 4%) or historical (22/751, 2.9%) control groups. Five of the 13 (31%) dosed females with this tumor died before the end of the study, while both of the control females with hepatocellular carcinoma survived to the scheduled termination. No metastases were found among female mice. Likewise, hepatocellular adenomas were increased in both sexes (males: control, 3/48; dosed, 8/50; females: control, 2/48; dosed, 8/49).

Harderian gland adenomas were detected in 4/50 (8%) dosed male and 3/49 (6%) dosed female mice, all of which died prior to the end of the study. No Harderian gland tumors were found in control mice. Among males, the incidence was significant by life table analysis (P < 0.05), but not by the incidental tumor test. The incidental tumor test is the most appropriate method of analysis because this type of tumor is not life threatening. The incidental tumor test also adjusts for the survival differences between dosed and control groups. Historically, Harderian gland tumors occur in 2.4% of male and 0.8%of female $B6C3F_1$ mice (Appendix E, Table E10). Harderian glands were examined microscopically only when found to be grossly abnormal at necropsy; those animals not having visible lesions were not examined similarly.

The increased incidence of dosed female mice with malignant lymphoma (P < 0.05) and lymphoma or leukemia (P < 0.05) are not considered to be related to the administration of TCE. The incidence in the concurrent control group was somewhat lower than that in the historical controls, and the incidences in dosed females were within the ranges of historical incidences (Appendix E, Table E9).

Although the incidence of alveolar/bronchiolar adenomas was significantly increased in dosed female mice (P < 0.05, life table analysis). the significance was lost when adenomas were combined with carcinomas. While this increase in adenomas cannot be ignored, to distinguish between some alveolar/bronchiolar adenomas and carcinomas is sometimes difficult or arbitrary. Therefore, the most meaningful measure of these tumors is considered to be their combined incidence. Because of this, the increased incidence of alveolar/bronchiolar adenomas in dosed female mice is not considered to be due to TCE administration. Using the data available from the previous study (NCI, 1976), IARC considered the increased incidences of lung tumors as being caused by TCE (IARC, 1979; 1982).

Three tumors of the nonglandular stomach were found among dosed female mice, but their incidence was not significantly increased when compared with that of the controls. One animal (dead at week 65) had a squamous cell carcinoma, and two others (dead at week 89 and week 99) had squamous cell papillomas. Squamous cell papillomas have been detected previously in 3/656 (0.5%) gavage control females, while squamous cell carcinomas have never been reported in gavage control females in the Bioassay Program. One vehicle control male in the present study (dead at week 63) had a squamous cell carcinoma. While these stomach lesions in dosed female mice may have been due to the 2-year gavage administration of TCE, their appearance is not considered to be an indication of carcinogenicity per se. The earlier bioassay of TCE (NCI, 1976) did not reveal evidence of chemically-related stomach neoplasms.

In both the rat and mouse portions of this study, many of the lymph nodes, thymuses, tracheae, pituitaries, thyroids, parathyroids, and ovaries were not examined microscopically. These omissions appear to be the result of faulty histological techniques. Because none of these tissues are likely target organs for TCE, these losses are of lesser significance with respect to this study. The results in male F344/N rats were considered equivocal for detecting a carcinogenic response because both groups receiving TCE showed significantly reduced survival compared to vehicle controls (35/50, 70%; 20/50,40%; 16/50, 32%) and because 20% of the animals in the high dose group were killed accidently by gavage error.

As of August 1983, Dr. C. Maltoni (Institute of Oncology, Bologna, Italy) was examining the histopathological portion of several long term carcinogenesis studies of TCE administered by inhalation at 0, 10, 100, 300, and 600 ppm and for different periods of time up to two years to male and female Sprague-Dawley rats and to male and female Swiss and B6C3F₁ mice, and by gavage (0, 50, and 250 mg/kg body weight in olive oil) to male and female Sprague-Dawley rats. Animals were kept until natural death. The studies included 3,500 to 4,000 animals, most of which were treated by inhalation.

Conclusions: Under the conditions of these studies, epichlorohvdrin-free trichloroethvlene caused renal tubular-cell neoplasms in male F344/N rats, produced toxic nephrosis in both sexes, and shortened the survival time of males. This experiment in male F344/N rats was considered to be inadequate to evaluate the presence or absence of a carcinogenic response to trichloroethylene. For female F344/N rats receiving trichloroethylene, containing no epichlorohydrin, there was no evidence of carcinogenicity. Trichloroethylene (without epichlorohydrin) was carcinogenic for $B6C3F_1$ mice, causing increased incidences of hepatocellular carcinomas in males and females and of hepatocellular adenomas in females.

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APPENDIX A

SUMMARY OF THE INCIDENCE OF NEOPLASMS IN RATS ADMINISTERED TRICHLOROETHYLENE IN CORN OIL BY GAVAGE

TABLE A1.	
SUMMARY OF THE INCIDENCE OF NEOPLASMS IN MALE RATS ADMINISTERED TRICHLOROETHYLENE IN CORN OIL BY GAVAGE	

	UNTREATED Control	CONTROL	LOW DOSE	HIGH DOSE
	50 50	50	50 50 50	50 49 49
INTEGUMENTARY SYSTEM				
*ABDOMINAL CAVITY Fibrous Histiocytoma	(50)	(50) 1 (2%)	(50)	(49)
*SKIN FIBROMA	(50)	(50)	(50)	(49) 1 (2%)
*SUBCUT TISSUE Fibroma	(50) 3 (6%)	(50) 4 (8%)	(50) 1 (2%)	(49)
RESPIRATORY SYSTEM				
<pre>#LUNG CARCINOMA, NOS, METASTATIC</pre>	(49)	(50)	(50)	(49) 1 (2%)
ALVEOLAR/BRONCHIOLAR ADENOMA Alveolar/bronchiolar carcinoma	1 (2%)	1 (2%) 3 (6%)	2 (4%)	
EMATOPOIETIC SYSTEM				
*MULTIPLE ORGANS Malignant Lymphoma, Nos	(50)	(50)	(50)	(49)
LEUKEMIA,NOS Monocytic Leukemia	10 (20X) 1 (2X)	5 (10%)	5 (10%)	1 (2%)
<pre>#SPLEEN Sarcoma, Nos Malig.lymphoma, Undiffer-type</pre>	(45) 1 (2%) 1 (2%)	(45)	(49)	(44)

NONE

TABLE A1. MALE RATS: NEOPLASMS (CONTINUED)

	UNTREATED Control	VEHICLE Control	LOW DOSE	HIGH DOSE
DIGESTIVE SYSTEM				
#SALIVARY GLAND Squamous cell carcinoma	(45)	(45)	(43) 1 (2X)	(36)
#LIVER Neoplastic Nodule	(49) 1 (2%)	(49)	(49)	(49) 1 (2%)
#JEJUNUM FIBROSARCOMA	(45)	(48)	(47)	(44) 1 (2%)
#LARGE INTESTINE Fibrosarcoma	(41)	(42) 1 (2%)	(45)	(39)
URINARY SYSTEM				
#KIDNEY Tubular-cell Adenoma Tubular-cell Adenocarcinoma	(49)	(48)	(49) 2 (4%)	(49) 3 (6%)
#PERIRENAL TISSUE Paraganglidma, Nos	(49)	(48) 1 (2%)	(49)	(49)
<pre>#KIDNEY/PELVIS CARCINOMA,NOS TRANSITIONAL-CELL PAPILLOMA TRANSITIONAL-CELL CARCINOMA</pre>	(49) 1 (2%)	(48)	(49)	(49) 1 (2%)
ENDOCRINE SYSTEM				
#PITUITARY Carcinoma,Nos Adenoma, Nos Chromophobe Adenoma	(39) 1 (3%) 1 (3%) 4 (10%)	(42) 7 (17%)	(35) 1 (3%) 2 (6%)	(26) 1 (4%)
CHROMOPHOBE CARCINOMA #Adrenal	2 (5%) (45)	1 (2%) (45)	(42)	(44)
CORTICAL ADENOMA Pheochromocytoma Pheochromocytoma, malignant	2 (4%) 8 (18%)	1 (2%) 3 (7%) 1 (2%)	2 (5%) 1 (2%)	1 (2%)
#THYROID CARCINOMA,NOS	(44)	(44)	(43)	(39)

TABLE A1. MALE RATS: NEOPLASMS (CONTINUED)

	UNTREATED Control	CONTROL	LOW DOSE	
FOLLICULAR-CELL ADENOMA C-CELL ADENOMA C-CELL CARCINOMA	2 (5%)	2 (5%)	3 (7%)	*****
<pre>#PARATHYROID Adenoma, Nos</pre>	(25)	(22)	(26)	(24) 1 (4%)
#PANCREATIC ISLETS Islet-cell Adenoma	(46) 1 (2%)	(47) 2 (4%)	(44) 1 (2%)	(40) 1 (3%)
REPRODUCTIVE SYSTEM				
*MAMMARY GLAND Fibroadenoma	(50)	(50) 1 (2%)	(50) 1 (2%)	(49) 2 (4%)
*PREPUTIAL GLAND Adenoma, nos Adenocarcinoma, nos	(50) 4 (8%)	(50) 4 (8%) 1 (2%)	(50) 1 (2X)	(49) 1 (2%) 2 (4%)
<pre>#TESTIS INTERSTITIAL-CELL TUMOR</pre>	(47) 43 (91%)		(49) 47 (96%)	
#RIGHT TESTIS Interstitial-cell tumor	(47) 1 (2%)	(49) 1 (2%)	(49)	
NERVOUS SYSTEM				
#BRAIN/MENINGES GRANULAR-CELL TUMOR, NOS	(49) 1 (2%)	(50)	(49)	(48)
#BRAIN GLIOMA, NOS	(49)		(49) 1 (2%)	(48) 1 (2%)
SPECIAL SENSE ORGANS None				
MUSCULOSKELETAL SYSTEM				

TABLE A1. MALE RATS: NEOPLASMS (CONTINUED)

	UNTREATED Control	VEHICLE Control	LOW DOSE	HIGH DOSE
BODY CAVITIES				
*THORAX FIBROMA	(50)	(50) 1 (2%)	(50)	(49)
*PERITONEUM	(50)	(50)	(50)	(49)
MESOTHELIOMA, NOS MESOTHELIOMA, MALIGNANT	1 (2%)	1 (2%)	5 (10%)	1 (2%)
LL OTHER SYSTEMS				
*MULTIPLE ORGANS Sarcoma, Nos, unc prim or meta	(50)	(50)	(50) 1 (2%)	(49)
LEG Synovial Sarcoma			1	
NIMAL DISPOSITION SUMMARY				
ANIMALS INITIALLY IN STUDY Natural Deathg	50	50	50	50
MORIBUND SACRIFICE	12 7	8	20 7	22 3
SCHEDULED SACRIFICE TERMINAL SACRIFICE	31	33	20	15
DOSING ACCIDENT ACCIDENTALLY KILLED, NDA ACCIDENTALLY KILLED, NOS ANIMAL MISSING ANIMAL MISSEXED OTHER CASES		1	3	10
INCLUDES AUTOLYZED ANIMALS				

NUMBER OF ANIMALS WITH TISSUE EXAMINED MICROSCOPICALLY
* NUMBER OF ANIMALS NECROPSIED

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	UNTREATED Control	VEHICLE Control	LOW DOSE	HIGH DOSE
UMOR SUMMARY				
TOTAL ANIMALS WITH PRIMARY TUMORS* Total primary tumors	48 96	48 92	48 79	34 53
TOTAL ANIMALS WITH BENIGN TUMORS Total Benign Tumors	47 76	47 74	47 57	32 40
TOTAL ANIMALS WITH MALIGNANT TUMORS Total malignant tumors	17 17	14 17	18 21	11 11
TOTAL ANIMALS WITH SECONDARY TUMORS Total Secondary Tumors	ł			1
TOTAL ANIMALS WITH TUMORS UNCERTAIN- Benign or Malignant Total Uncertain Tumors	2 2	1		22
TOTAL ANIMALS WITH TUMORS UNCERTAIN- Primary or metastatic Total uncertain tumors	1 1		1	
PRIMARY TUMORS: ALL TUMORS EXCEPT SE Secondary Tumors: Metastatic tumors	CONDARY TUMOR Or tumors inv	S ASIVE INTO AN A	ADJACENT DRGAN	

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TABLE A1. MALE RATS: NEOPLASMS (CONTINUED)

TABLE A2.

SUMMARY OF THE INCIDENCE OF NEOPLASMS IN FEMALE RATS ADMINISTERED TRICHLOROETHYLENE IN CORN OIL BY GAVAGE

	UNTREATED Control	VEHICLE Control	LOW DOSE	HIGH DOSE
ANIMALS INITIALLY IN STUDY Animals necropsied Animals examined histopathologically	50 49	50 50 50	50 50 50	50 50 50
INTEGUMENTARY SYSTEM				
×SKIN Keratoacanthoma	(49)	(50) 1 (2%)	(50)	(50)
*SUBCUT TISSUE Squamous cell carcinoma Fibroma	(49)	(50) 1 (2%)	(50) 1 (2%)	(50)
FIBROSARCOMA	1 (2%)			
RESPIRATORY SYSTEM				
<pre>#LUNG ADENOCARCINOMA, NOS, METASTATIC ALVEOLAR/BRONCHIOLAR ADENOMA ALVEOLAR/BRONCHIOLAR CARCINOMA</pre>		(50) 1 (2%)	1 (2%)	(50) 1 (2%) 2 (4%) 1 (2%)
HEMATOPOIETIC SYSTEM				
MULTIPLE ORGANS Malig.lymphoma, histiocytic type	(49)	(50)	(50)	(50)
LEUKEMIA, NOS	10 (20%)	14 (28%)	4 (8%)	9 (18%
CIRCULATORY SYSTEM				
#HEART Adenocarcinoma, Nos, Metastatic	(49)	(50)	(49)	(50) 1 (2%)
DIGESTIVE SYSTEM				
MINTESTINAL TRACT ADENOCA IN ADENOMATOUS POLYP	(49)	(50)	(50)	(50)

TABLE A2. FEMALE RATS: NEOPLASMS (CONTINUED)

	UNTREATED Control	VEHICLE Control	LOW DOSE	HIGH DOSE
#LIVER Neoplastic Nodule	(49) 1 (2%)	(50)	(48) 1 (2%)	(48) 1 (2%)
#STOMACH Squamous cell papilloma	(46)	(50)	(48)	(43) 1 (2%)
#ILEUM Fibrosarcoma	(44) 1 (2%)	(47)	(45)	(45)
URINARY SYSTEM				
#KIDNEY Tubular-Cell Adenocarcinoma			(49)	1 (2%)
ENDOCRINE SYSTEM				
#PITUITARY CARCINOMA,NOS Chromophobe Adenoma Chromophobe Carcinoma Acidophil Carcinoma		(37) 13 (35%)	(34) 1 (3%) 6 (18%) 1 (3%)	(41) 6 (15%)
#ADRENAL Cortical Adenoma Pheochromocytoma	(45) 2 (4%) 1 (2%)	(46) 1 (2%) 1 (2%)	(48) 2 (4%)	(47) 3 (6%) 2 (4%)
<pre>#THYROID Follicular-cell Adenoma C-cell Adenoma C-cell Carcinoma</pre>	(36) 2 (6%) 1 (3%)	(41) 4 (10%)	(45) 1 (2%) 1 (2%)	(44) 1 (2%) 1 (2%)
REPRODUCTIVE SYSTEM				
*MAMMARY GLAND Adenoma, Nos Adenocarcinoma, Nos	(49)	(50)	(50) 1 (2%)	(50) 1 (2%) 1 (2%)
SARCOMA, HOS Fibroadenoma	10 (20%)	9 (18%)	12 (24%)	4 (8%)
*CLITORAL GLAND Adenoma, Nos	(49)	(50)	(50)	(50)

	UNTREATED Control	VEHICLE Control	LOW DOSE	HIGH DOSE
ADENOCARCINOMA, NOS	1 (2%)			
#UTERUS Adenoma, Nos Adenocarcinoma, Nos	(45)	(48)	(48) 1 (2%) 1 (2%)	(46)
SARCOMA, NOS Endometrial stromal polyp Endometrial stromal sarcoma	10 (22%)	1 (2%) 15 (31%) 1 (2%)	8 (17%)	6 (13%) 1 (2%)
#UTERUS/ENDOMETRIUM	(45)	(48)	(48)	(46)
ADENOMA, NOS Adenocarcinoma, nos Adenoca in Adenomatous Polyp	1 (2%)		1 (2%) 1 (2%)	
#OVARY	(44)	(46) 1 (2%)	(47)	(44)
THECOMA Granulosa-Cell Tumor			1 (2%)	
NERVOUS SYSTEM				
<pre>#BRAIN/MENINGES squamous cell carcinoma, metasta</pre>	(48)	(50)	(50) 1 (2%)	(49)
#BRAIN Chromophobe carcinoma, invasive	(48)	(50)	(50)	(49)
ASTROCYTOMA	1 (64)			1 (2%)

TABLE A2. FEMALE RATS: NEOPLASMS (CONTINUED)

TABLE A2. FEMALE RATS: NEOPLASMS (CONTINUED)

	UNTREATED Control	VEHICLE Control	LOW DOSE	HIGH DOSE
SPECIAL SENSE ORGANS				
NONE				
1USCULOSKELETAL SYSTEM				
NONE				
BODY CAVITIES				
*ABDOMINAL CAVITY Sarcoma, Nos	(49)	(50)	(50) 1 (2%)	(50)
ALL OTHER SYSTEMS				
NONE				

TABLE A2. FEMALE RATS: NEOPLASMS (CONTINUED)

	UNTREATED Control	VEHICLE Control	LOW DOSE	HIGH DOSE
NIMAL DISPOSITION SUMMARY				
ANIMALS INITIALLY IN STUDY	50	50	50	50
NATURAL DEATHƏ Moribund sacrifice	18 7	7	7 5	14
SCHEDULED SACRIFICE	/	7	5	5
TERMINAL SACRIFICE	25	34	33	26
DOSING ACCIDENT Accidentally killed, nda				
ACCIDENTALLY KILLED, NOS		2	5	5
ANIMAL MISSING Animal missexed				
OTHER CASES				
INCLUDES AUTOLYZED ANIMALS				
UMOR SUMMARY				
TOTAL ANIMALS WITH PRIMARY TUMORS*	40	38	31	30
TOTAL PRIMARY TUMORS	62	65	47	42
TOTAL ANIMALS WITH BENIGN TUMORS	31	33	24	22
TOTAL BENIGN TUMORS	44	48	33	27
TOTAL ANIMALS WITH MALIGNANT TUMORS	17	16	12	14
TOTAL MALIGNANT TUMORS	17	17	12	14
TOTAL ANIMALS WITH SECONDARY TUMORS	† 1		1	1
TOTAL SECONDARY TUMORS	1		1	2
TOTAL ANIMALS WITH TUMORS UNCERTAIN-				
BENIGN OR MÅLIGNANT	1		2	1
TOTAL UNCERTAIN TUMORS	1		2	1
TOTAL ANIMALS WITH TUMORS UNCERTAIN-	•			
PRIMARY OR METASTATIC				
TOTAL UNCERTAIN TUMORS				

TABLE A3.

INDIVIDUAL ANIMAL TUMOR PATHOLOGY OF MALE RATS IN THE 2-YEAR STUDY OF TRICHLOROETHYLENE

UNTREATED CONTROL

ANIMAL	6	645	652	6 5 5	6 5	6 5 9	6 6 0	6	6	6	672	6	674	675	6 8 6	7	7 0 7	7	7	7 2 0	7 2 7	734	7 3 6	7 4 3	744
WEEKS ON Study	1	1	1	0	1	1	1	1	7	1	1	9	0	1	1	7	8	1	1	1	1	0 8	1	1	1
INTEGUMENTARY SYSTEM	6	6	6	61	6	6	6	61	11	لف	61	0	91	61	6	1	0	0 [6	6	61	9	6	31	2
SUBCUTANEOUS TISSUE FIBROMA	+	+	+	N	÷	+	+	+	÷	÷	÷	N	÷	÷	+	+	* ×	+	+	٠	٠	+	٠	N X	÷
RESPIRATORY SYSTEM					_																				
LUNGS AND BRONCHI Alveolar/bronchiolar Adenoma Sarcoma, Nos, unc prim or meta	+	+	+	+	+	+	+	+	+	٠	+	+	+	+	+	+	+	+	+	•	+	+	٠	+	+
TRACHEA	+	+	+	+	+	+	-	+	-	-	+	+	+	2	+	+	_	+	+	+	+	+	+	+	+
HEMATOPOIETIC SYSTEM																									
BONE MARROW	+	+	+	+	+	+	+	+	+	+	+	+	+	÷	+	-	÷	+	+	+	+	+	+	+	+
SPLEEN Sarcoma, Nos Malig.lymphoma, undiffer-type	+	+	+	+	+	+	+	-	+	+	+	+	+	+	+	-	+	+	+	-	+	+	+	+	+
LYMPH NODES	+	+	-	-	+	+	-	-	+	+	-	+	-	-	-	+	÷	+	+	+	-	+	+		-
THYMUS	+	+	-	-	-	-	+	-	+	+	-	-	-	+	+	+	-	-	+	+	-	-	+	-	-
CIRCULATORY SYSTEM	<u> </u>	_																							
HEART	+							+			+	+	+	•	÷	+	÷	+	+	+	+	+	+	+	+
	<u> </u>			•			,		·		<u> </u>	·									<i>.</i>				
DIGESTIVE SYSTEM			_		4											÷	-			*	*		1	-	4
SALIVARY GLAND	+	 +	+	+	+. +	+	+	<u>+</u> +	+	+ +	+		<u> </u>	+	+ +	+		+	+	+	+	+	+		<u>-</u>
LIVER NEOPLASTIC NODULE	+	+	<u> </u>	+	+	+	+	+	<u> </u>	<u>+</u> .	+	<u> </u>		•	•	-	<u> </u>		_	_	_	_		<u> </u>	_
BILE DUCT	+	<u>.</u> t	+	+	+	+	+	+	+	+	+	+	+	+	ŧ	+	+	ŧ	+_	+	+	+	+	+	+
GALLBLADDER & COMMON BILE DUCT	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N
PANCREAS	++	+	+	+	+	+	+	+	+	<u>+</u>	+	-	+	ŧ	+	+	+	+	+	-	+	+	÷	+	. +
ESOPHAGUS	++	•	+	+	+	<u>+</u>	+	+	+	.+	÷	+	<u>+</u>	+	+	<u>+</u>	+	+		+	+	+	+	+	.+
STOMACH	+	+	٠	+	+	+		+	+	+	+	+	+	+	+	ŧ	*	+	+	÷	+	+	+	+	+
SMALL INTESTINE	+	•	. †	+	+	+	+	+	+	+	+	•	+	÷	-	+	+_	+	+	+	÷	+	٠	<u>+</u>	-
LARGE INTESTINE	+	•	+	+	+	-	+	٠	٠	+	+	+	-	•	٠	+	٠	٠	+	+	+	+	+	+	-
JRINARY SYSTEM													_												-
KIDNEY		*		*	*	. +	•		+	*			+	ŧ	+	+		+	÷	•		٠	٠		÷
KIDNEY/PELVIS TRANSITIONAL-CELL PAPILLOMA	+	+	+	+	٠	+	+	*	٠	*	*	+	+	*	+	+	*	+	+	+	+	+	+	*	+
URINARY BLADDER	+	+	+	+	+	*	+	*	*	*	*	+	*		+	+	+	*	*	+	+	+	+	+	
ENDOCRINE BYSTEM	_			_		-		_	-	_				-						_				_	_
PITUITARY Carcingma, Nos Adendha, Nos Chromophobe Carcinoma Chromophobe Carcinoma	*	+ ×	*		+	-	+	+	•	+	٠	*	2	•	* X	٠	•	•	•	*	*	*	+ X	•	•
CHROMOPHOBE CARCINOMA	+	-				-	<u>×</u> .									_				-					
ADRENAL Cortical Adenoma Pheochromocytoma	+	*	* 	*	*	* 	*	*	+	* _×	*	*	<u> </u>	* ×	*	+	*	+	+	+	+	*	* X	*	-
THYROID Follicular-cell Adenoma C-Cell Adenoma	+ x	* X	+	+	*	+	-	*	*	*	* ×	*	*	*	*	*	-	+	*	+ X	* X	+	•	•	*
PARATHYROID	-		+	*		+		+		-	+		-		+	+	-	+	+	+	+	+		-	
	Ţ.	•	+	+	+	+	+	+	+	+	+	-	+	+	+	÷	+	•	•	-	+	•	+	•	•
PANCREATIC ISLETS ISLET-CELL ADENOMA																									
REPRODUCTIVE SYSTEM																						-			
MAMMARY GLAND	+	+	N	N	+	+	+	+	Ν.	+	+	<u>N</u>	N	N	+	+	N	N	· +	+	+	+.	+	N	
TESTIS Interstitial-cell tumor	+ ×	* ×	* ×	+	* x	*	* ×	* ×	*	* x	÷	÷	*	÷	* *	+	*	*	. * .	÷	*	÷	*	*	-
PROSTATE	+÷	÷		+	,	÷	<u></u>	+	~~	+	+	+	<u>^</u>	+	+	+	+	~	•	+	+	+	+	+	-
PREPUTIAL/CLITORAL GLAND	N N	<u>T</u>	N	N	N	<u>-</u> N	N	N	N	N	N	N	N	N	Ņ	N	N	N	N	N	N	N	N	N	N
ADENOMA, NOS	1	п	R	n	a	п	n	N	G	в	п		a	n	п	×	n	.,		.,				"	
VERVOUS SYSTEM	-								_											_					-
BRAIN	+	+	+	+	٠	+	+	+	+	+	+	+	+	+	+	٠	+	+	+	+	+	+	+	+	+
GRANULAR-CELL TUMOR, NOS	- i																								_
BO DY CA' ITIES							,	ы	Ŀ,	÷1	v	v	v	N	L.	м	ų	μ	ц	ы	μ	Ч	μ	۰µ	L.
PERITONEUM Desothelioma, malignant	N	N	H	N	N	N	N	H	N	N	N	Ν	н	N	N	N	N	N	м	n	M	N	N	×	N
ALL OTHER SYSTEMS																									
MULTIPLE DRGANS NOS LEUKEMIA,NOS MONOCYTIC LEUKEMIA	N	N	N	N	N X	×	N	N	N	N	N	н 	N X	N	N	××	N	×	N X	N	м	×	N	N	NX
+: TISSUE EXAMINED MICROSCO	PICAL	LY				-					:	NO	TI	ssu	EI	NFO	RM	TIC	N S	UBN	111	ED			
-: REQUIRED TISSUE NOT EXAM X: TUMOR INCIDENCE N: NECROPSY, NO AUTOLYSIS,	INED	MI	CROS	5C0F	PIC/	1 L L 1	(N A T				C: A: M:	N E	CRO ITOL IIMA	PSY YSI	ś, h	10 H	1151	roui	GY	DUE	5 10	99	ROTO	COL	,

X: TUMOR INCIDENCE N: NECROPSY, NO AUTOLYSIS, NO MICROSCOPIC EXAMINATION A: AUTOLYSIS M: ANIMAL MISSING B: NG NECROPSY PERFORMED

Trichloroethylene

ANIMAL NUMBER	4	4	5	7 5 7	7 5 9	7 6 1	6	6	77	7	8	8	7 8 5	8	9	8 0 0	8 0 3	8 0 5	8 0 6	8 1	8	8 1 9	82	8 2 5	8 3 8	TOTAL
WEEKS ON Study	0	1	0	0	0	0	0	1	0	0	0	0	0	ļ	1	9	1	0	0	0	0	0	1	1	65	TISSUE TUMOR
INTEGUMENTARY SYSTEM	61		_6	6	_61	_6	61	6	_61	6	_61	11	_11	61	21	<u>. 61</u>	21.	11	01	_0	61	-01	61	- 01	-2	
SUBCUTANEOUS TISSUE FIBROMA	+	+	+	+	+	N	+	N	+	+	+	+	+	.+	+	+	+	+	+	+	N	* ×	+	N	N	50× 3
RESPIRATORY SYSTEM			_																							
LUNGS AND BRONCHI Alveolar/Bronchiolar Adenoma Sarcoma, nos, unc prim or meta	+	+	+	+	+	+	+	+	+	+	+	A	+	+	+	+	+	*	+	×	+	+	+	+	+ ×	49 1
TRACHEA	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	÷	+	+	+	+	+	+	+	+	45
HEMATOPOIETIC SYSTEM																										
BONE MARROW	+	+	+	t.	+	+	+	+	+	+	+	+	_+	+_	+	+	+	+	+	+	+	+	+	+	+	. 49
SPLEEN Sarcoma, Nos Malig.lymphoma, undiffer-type	+	* x	+	+	+	+	+	+	+	+ x	-	A	+	+	+	٠	+	•	+	+	+	+	+	+	+	45
	1_					-			+				+	-	_	+	_	+	<u> </u>	+	+	+	_	+		28
LYMPH NODES	+-		<u>,</u>	- <u>-</u> -	+	- <u>-</u> -	<u> </u>	<u></u>	 +	+		~		+	+	- <u>·</u>	-		- <u>-</u> +	<u>_</u>	- <u></u> +	+	+	+		22
THYMUS	_ <u> </u>	•		-	+					*		A			*							*		<u> </u>	-	
CIRCULATORY SYSTEM	+		+	+	+		1	÷	+	+	+		+	÷	+	÷	+	÷	+	+	+	÷	+	÷	+	49
HEART	$+^{+}$	+		+	*	+	*		+	-	*	A	*	*	7	т ———	*	·	*	7	*	*	·			47
DIGESTIVE SYSTEM							د.		.ر	-	,		÷		4		±		+				+			45.
SALIVARY GLAND	++	+	. <u>+</u>	+	*		+	<u>*</u>	+		<u>_</u> *	A	<u> </u>	+	- <u>+</u>	<u>.</u>	- <u>+</u>	÷	+	+	* *	+	+ +	. <u>*</u>	+	
LIVER NEOPLASTIC NODULE	+	*	+	+	+	*	+	-	+	*	+	A	+	<u> </u>	+	+	+	ž.	÷	-		-	*	Ľ.	*	49
BILE DUCT	++	+	+	+	+	+	+	÷	÷	+	+	Α_	+	+	+	+	+	+	+	+	+	+	+	+	_+	49
GALLBLADDER & COMMON BILE DUCT	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	50
PANCREAS	ŢŦ	+	٠	+	÷	+	+	+	+	+	+		+	+	+	+	ŧ	+	+	ŧ	+	+	+	+	-	46
ESOPHAGUS	++	+	+	+	+	+	+	+	+	+	+	<u> </u>	+	÷	+	+	+	+	÷	+	+	+	+	+		48
STOMACH	++	+	+	÷	+	<u>+</u>	÷	+	+	<u>+</u>	+	<u>.</u>	+	+	<u>+</u>	+	+	+	+	+	÷	+	٠	+		48
SMALL INTESTINE	++	+	+	+	-	+	+	+	+	+	ł	A	+	+	+	+	+	+	+	+	•	÷	•	ŧ.	_	43
LARGE INTESTINE	+	٠	٠	٠	+	+	+	٠	+	+	+	A	+	+	٠	+	٠	+	٠	+	-	+	+	-	-	41
JRINARY SYSTEM																										
KIDNEY	+++	*	÷	*	+		+	+	+	+	- t		.*	+	<u>*</u>		+		*	_t	•	<u>*</u>	<u>+</u>	+	╧┥	
KIDNEY/PELVIS TRANSITIONAL-CELL PAPILLOMA	+	٠	٠	+	*	٠	+	٠	+	+	÷	٨	+	*	+	*	ŧ	+	ŧ	+	+	+	+	٠	+	49
URINARY BLADDER	1.	*	*	*	*	*	+	*	*	=	*	٨	*	*	*	*	*	+	*	*	+	+	-	+		44
ENDOCRINE BYSTEM			_											and in a second						-				_	-	
PITUITARY Carcingma, Nob Adengma, Nob Chromophobe Adengma Chromophobe Carcingma	+	*	*	*	=	+	•	*	*	* X	+	*	*	+	2	•	* ×		+	+	*X	*	=	*	-	31
CHROMOPHOBE CARGINOMA Adrenal Gortical Adenoma Pheogradmocytoma	+	-	*	*	*	*	*	*	+	*	*	A	*	+	+	*	*	*	+	+	+	+	+	ŧ	-	45
PHEOGHROMOGYTOMA Thyroid Folligular-cell Adenoma	+	ŧ	_¥	*	-	<u>*</u>	+	+	+	*	+	*	+	+	+	+	=	*	*	<u>×</u> +	*	*	+	+		
FOLLICULAR=CELL ADENOMA C=CELL ADENOMA	-	-	_	_		X			_		-							in 63 in				_			_	
PARATHYROID	+-	-	÷	ŧ			+	*	*	•		A	+		•	-	•	<u>ŧ</u>	-	ŧ	*	٠	•	+	-	25
PANCREATIC ISLETS ISLET-CELL ADENOMA	×	+	٠	٠	+	+	+	+	٠	+	٠	۸	٠	+	+	+	•	+	•	•	٠	٠	+	+	-	** 1
MAMMARY GLAND	+	+		+	+	ы	+		•					N		4	+		•	+			+		<u>_</u>	5.0*
MAMMARY GLAND Testis	1	- <u>+</u> -	<u>+</u>		_	<u>N</u>		_ <u>H</u>			<u>+</u>			+	<u> </u>	÷	+	<u>+</u>	+	+	<u>-N</u>	+	÷	<u>.</u>		<u>9.0 4</u>
INTERSTITIAL-CELL TUMOR	×	x		×	Ý.	x	*	x	×	x	. X		ž	×.	<u>×</u>	ž_	T	×	×			ž	×	ž	_	
PROSTATE	Ŧ	+	+	+	+	+	+	+	+	+	+	A	+	+	+	-	+	+	+	+	+	+	+	+	-	46
PREPUTIAL/CLITORAL GLAND ADENOMA, NOS	N	N	N	N	N	H	N	N X	N	N	N X	N	N	N	N	N	N	ĸ	N	N	N	N	N	N	н	50
ERVOUS SYSTEM																								-		
BRAIN GRANULAR-CELL TUMOR, NOS	+	+	+	+	+	+	•	+	+	+	+	+	+	+	+	+	*	+	+	+	+	+	+	+	-	49
BONY CAVITIES																										
P RITONEUM MESOTHELIOMA, MALIGNANT	н	N	N	N	N	н	N	N	н	н	N	N	N	N	N	N	н	N	N	H	N	N	N	N	N	50?
ALL OTHER SYSTEMS Multiple organs nos Leukemia, nos Monocytic leukemia	н	N	И	N	N	N X	N	н	н	N	N	н	N	N	N	N	N	н	н	H X	N	N	N	н	н	50

TABLE A3. MALE RATS: TUMOR PATHOLOGY (CONTINUED) UNTREATED CONTROL

ALS NECROPSIED +: TISSUE EXAMINED MICROSCOPICALLY -: Required Tissue not examined Microscopically X: Tumor Incidence H: Necropsy, No Autolysis, No Microscopic Examination

: NO TISSUE INFORMATION SUBMITTED C: NECROPSY, NO HISTOLOGY DUE TO PROTOCOL A Autolysis M: Animal Missing B: No Necropsy Performed

TABLE A3.

INDIVIDUAL ANIMAL TUMOR PATHOLOGY OF MALE RATS IN THE 2-YEAR STUDY OF TRICHLOROETHYLENE

VEHICLE CONTROL

ANIMAL NUMBER	644	6 4 6	647	648	6 5 4	6 6 9	6 7 6	6 8 0	6 8 1	685	6 8 9	6 9 3	6 9 5	6 9 8	7 0 4	7 0 8	7	7	7	7	7 2	22	7 2 3	7 2 4	
WEEKS DN STUDY	0	0	0 9	1 0	1	0	1	1	1	1	1	1	1	-1	1	0	0	0 9	1	1	0	1	1	1	
INTEGUMENTARY SYSTEM	- 6	6	{ 1]	6	2	لسف	6	21	6	_5	6	6	6	_61	6	_01	3	8	6]	6	_6	6	_6	_6	
SUBCUTANEDUS TISSUE Fibroma	+	+	+	+	+	+	+	+	+	* ×	N	+	+	+	+	+	+	N	+	+	+	+	* X	+	,
RESPIRATORY SYSTEM																									-
LUNGS AND BRONCHI Alveolar/bronchiolar Adenoma Alveolar/bronchiolar carcinoma	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+ X	+	+	+	+	+	+	+	+	+	•
TRACHEA	+	+	+	+	+	+	-	_	÷	+	-	+	+	+	+	+	+	-	+	+	÷	+	-	+	
HEMATOPOIETIC SYSTEM	_																								-
BONE MARROW	+	+	+	+	+	+	+	+	+	+	+	+	+	_+	+	+	÷	+	+	+	+_	+	+	+	
SPLEEN	+	-	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+		_	+	+	+	+	
LYMPH NODES	+	-	+	-	+	+	-	-	+	+	-	-	-		-	+	+	-	+	+	-	_	-	-	
THYMUS	+	-	-	+	-	+	_	-	+	-	+	+	-	-	+	-	+	-	+	-	-	-	-	-	
CIRCULATORY SYSTEM																									
HEART	+	+	+	+	+	÷	+	+	+	÷	+	÷	+	+	+	+	+	+	÷	÷	+	+	+	+	4
DIGESTIVE SYSTEM	+																								
SALIVARY GLAND	+	+	+		+	+	+	-	+	+	+	+	+	+	+	-	+	+	+	+	+	+	+	+	
LIVER	+	+	+	+	+	+	+	+	+	+.	+	+	+	+	+	+	+	+	+	+	+	+	+	+	
BILE DUCT	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+
GALLBLADDER & COMMON BILE DUCT	н	N	N	н	N	N	N	N	<u>N</u> _	N	N	N.	N	<u>N</u>	N	N	N	N	N	N	N	N	N	N	1
PANCREAS	+	_	+	+	+	+	+	+	+	+	+	+	t	+	+	+	+	+	+	+	+	+	+	+	
ESOPHAGUS	+	+	+	+	+	+	+	+	+	+	+	÷	+	+	+	+	+	+	+	+	+	+	÷	+	1
STOMACH	+	+	+	+	+	+	t	+	+	+	+	+	+	+	+	+	+	+	+	+	-	+	+	÷	4
SMALL INTESTINE	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	
LARGE INTESTINE	+	-	+	+	+	-	+	+	+	-	+	+	+	+	+	+	+	+	+	+	-	+	+	+	
FIBROSARCOMA														_											_
URINARY SYSTEM																									
KIDNEY Paraganglioma, nos	+	-	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	1
URINARY BLADDER	+	+	+	ŧ	+	+	-	+	+	+	+		-	+	+	-	+	+	+	÷	-	+	+	+	4
ENDOCRINE SYSTEM	—																								
PITUITARY	1.	+	-	+	_	+	+	+	+	+	+	+	+	+	+	-	+	+	+	+	-	+	+	+	4
CHROMOPHOBE ADENOMA Chromophobe Carcinoma										x				×									x		
ADRENAL	+		+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+
CORTICAL ADENOMA Pheochromocytoma Pheochromocytoma, malignant	Ĺ						×		×		×													-	
THYROID	+	÷	+	+	+	+	-	-	÷	+	-	+	÷	+	+	+	+	+	+	+	÷	+	-	÷	4
CARCINOMA,NOS C-CELL ADENOMA C-CELL CARCINOMA	-																								
PARATHYROID	++	+		+	+	+	-	-	-	+		+	+		<u>+</u>	+	+	-		-	-	+	-	-	_
PANCREATIC ISLETS ISLET-CELL ADENOMA	+ ×	-	+	+	+	+	+	+	+	+	+	+	+	+	* ×	+	+	+	÷	+	+	+	+	+	1
REPRODUCTIVE SYSTEM	+																								
MAMMARY GLAND FIBROADENOMA	N	+	+	+	+	+	+	N	N	•	N	+	N	N	+	+	N X	N	+	N	N	н	+	+	٢
TESTIS Interstitial-cell tumor	÷	÷	÷	+ y	+ ¥	÷ ¥	÷ ¥	+ ×	+ ¥	+ ¥	+ ¥	+ ¥	* x	* ×	÷ x	-	* ×	* x	* ×	* x	* x	* X	* x	* ×	;
PROSTATE	†	+	<u>^</u> +	+	+	<u>^</u>	+	+	+	- <u>م</u> - +	+	+	+	+	+	-	+	+	+	ــــــنــــ +	+	+	+	+	
PREPUTIAL/CLITORAL GLAND	N	T N	N	т N	N	т N	т N	N	N	N	ň	, N	N	Ň	: N	N	N	N	N	N	N	Ň	Ň	N	N
ADENOMA, HOS ADENOCARCINOMA, NOS		.,	x	.,	.,	X	.,			×	.,														
NERVOUS SYSTEM															,			,		,	,	,	,		
3RAIN	+	+	+	*	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	1
BO Y CAVITIES																		**	N			N	N		
P_EURA FIBROMA	N	N	N	N	н	N	N	N	N	N 	м	N	N	N	N	N	M	M	N	N	N	N	N	Ν	1
PERITONEUM Fibrous Histiocytoma Mesothelioma, Malignant	N	N	N	м	N	N	N	N	N	N	N	N	N	N	N	н	н	N	N	N X	N	N	N	N	1
ALL OTHER SYSTEMS										·															
MULTIPLE ORGANS NOS Malignant Lymphoma, Nos	н	N	N	N	N	N	N	N	N	н	N	N	N	N	N	N	N	N	N	H	N	N	N	N	١

+: TISSUE EXAMINED MICROSCOPICALLY -: REQUIRED TISSUE NOT EXAMINED MICROSCOPICALLY ': TUMOR INCIDENCE N: NECROPSY, NO AUTOLYSIS, NO MICROSCOPIC EXAMINATION

: NO TISSUE INFORMATION SUBMITTED C: NECROPSY, NO HISTOLOGY DUE TO PROTOCOL A: AUTOLYSIS M: ANIMAL MISSING B: NO NECROPSY FERFORMED

ANIMAL NUMBER	4	7 4 2	7 4 8	5	7 5 1	5	6	8	6	7	7	777	8	8	7 9 1	93	8 0 1	80	8 1 7	8 1 8	826	827	930	9.5	8 4 0	TOTAL
WEEKS ON Study	8	1	1	0	100	9	0	5	8 9	2	2	0	į	0	?	2	9		2	į	0	0	2	8	1	TISSUE
INTEGUMENTARY SYSTEM	╧	<u> </u>		_01	01	91	41	- 21	21	- 11	01		<u> </u>	01		61	01	- 19	-قا	-01				_3		
SUBCUTANEOUS TISSUE FIBROMA	+	+	N	+	N	*	+	N	* X	+	N ·	+	+	+	+	+	+	+	+	+	+	+	+	+	+	50)
RESPIRATORY SYSTEM																	_		_							
LUNGS AND BRONCHI Alvedlar/Bronchiolar Adenoma Alvedlar/Bronchiolar Carcinoma	<u> </u> +	+	+	+	+ _X_	+	+	+ x_	+	+	+	+	+	+	+	•	+	+	+	×	+	+	•	+	+	50
TRACHEA	+	+	÷	+	÷	+	÷	٠	+	÷	+	÷	-	+	÷	÷	+	+	÷	+	+	+	+	+	+	44
TEMATOPOIETIC SYSTEM	+																								-	
BONE MARROW	+	t	+	+	÷	+	+	÷	+	-	+	+	+	ŧ	-	+	+	+	÷	+	+	+	+	÷	+	48
SPLEEN	+	÷	÷	-	+	+	-	÷	+	+	+	+	+	+	+	+	+	+	÷	+	+	+	+	+	+	45
LYMPH NODES	++	-	-	+	-	-	-	-		+	-	-	-	-	+	+	+	+	-	-	-	ŧ	-	'-		18
THYMUS	-	-	-	+	ŧ	-	-	-	-	+	+	-	-	-	-	+	-	-	+	-	+	+	+	-	+	19
CIRCULATORY SYSTEM																										
HEART	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	50
DIGESTIVE SYSTEM																										
SALIVARY GLAND	+	+	+	-	+	+	+	+	+	+	+	+	+	+	-	ŧ	+	+	+	+	.	+	+	+	+	45
LIVER	+	+	+	+	+	+	-	+	+	+	+	+	+	+	+	+	+	+	+	ŧ	+	+	+	+	*	
BILE DUCT	+	+	+	+	+	<u>+</u>	-	+	+	+	+	+	+	+	+	+	+ .	+	+	+	*	+	+	+	┿	49
GALLBLADDER & COMMON BILE DUCT	₩	. N	N	N	N	N	N	<u>N</u>	<u>N</u>	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	-14	<u>50×</u>
PANCREAS .	+	+	+	+	+	+	-	+	+	-	<u>+</u>	+	+		+	+	+	+	<u>+</u>	+	+	+	+	+	+	
ESOPHAGUS) +	+	+	+	+	-	-	-	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	47
STOMACH	+	+	+	+	+	+	-	+	+	+	<u>+</u>	<u>+</u>	+	*	+	+	+	+	+	+ ,	+	+	+	-	╧┥	47
SMALL INTESTINE	+	+	+	+	+	+	-			+				+	+	+	+	+	+	+	+	+	+	+	+	.48
LARGE INTESTINE Fibrosarcoma	+	-	+	+	+	+	+	+	* ×	+	+	+	+	-	+	+	+	+	+	+	+	+	-	+	-	42
RINARY SYSTEM			•							·····									•						+	
KIDNEY	+	÷	+	+	+	÷	-	+	+	+	+	t	÷	÷	+	+	+	+	+	+	+	÷	÷	÷	+	48
PARAGANGLIOMA, NOS URINARY BLADDER	+	_	+	+	+	+	-	+	+	+	+	* +	+	+	+	+	+	_	+	+	-	+	+	+		
NDOCRINE SYSTEM				•		·	-		•	•	• •	·		T	-	• •		-						<u> </u>	-	40
PITUITARY Chromophobe Adenoma Chromophobe Carcinoma	÷	+	+	* ×	+	-	+	-	+	-	+			+ X	+	+	+	-	+	+	* ×	+	+	+	٠	42 7
ADRENAL Cortical Adenoma	+	-	+	+	÷	+	-	+	+	+	+	+	-	+	+	+	+	-	+	+	+	+	+	+	7	45
PHEOCHROMOCYTOMA Pheochromocytoma, malignant					X											×									-	3
THYROID Carcinoma, nos C-Cell Adenoma C-Cell Carcinoma	+	+	+	+	+	+	+	- '	+	+	+	+	-	+ ·	+	+ ×	x	+ X		+ X	•	•	+ x	+	*	44 1 2 2
PARATHYROID	-	-		-	-	+	-		+		+	+	_	+		+		_	+	-	-	-	+	-	+	22
PANCREATIC ISLETS	+	+	+	+	+	+	-	+	+		+	+	+	+	+ -	+	+ ·	+	+	+	+	+	+	+	+	47
ISLET-CELL ADENOMA																										2
EPRODUCTIVE SYSTEM Mammary Gland Fibroadenoma	+	н	н	N	N	+	N	N	N	N I	N ·	÷	+	+ 1	н -	•	•	•	+	N	+	÷	÷	н	+	50×
TESTIS INTERSTITIAL-CELL TUMOR	* ×	* ×	* ×	* ×	÷ ×	+ ×	* x	+	+ ×	+	ŧ ×	+ ×	+ X	+ x	+ x;	* :	+ ×;	t i	+ x	* x	+ x	* x	* x	* x	ţ	49 47
PROSTATE	+	+	ŧ	+	+	+	-	+	+	+	+ .	+	+	+ -	+ -	+ -	• •		+	+	+	+	+	÷	+	47
PREPUTIAL/CLITORAL GLAND Adenoma, Nos Adenocarcinoma, Nos	N	N	N	N	N	N	N	N	N	NI	N	N	N	N 1	н 1	N I X	ч 1	1 K	N	N	N	N	N	N	H	50× 4 1
TVOUS SYSTEM																									+	
'RAIN	+	+	+	+	+	+	+	+	+	+ ·	+	+	+	+ •	+ •	•	• •	•	+	+	+	+	+	+	+	50
DD/ CAVITIES																							N	N		50×
PLEURA FIBROMA PERITONEUM	N N	N N		N N				N N			X			н I н I		4 I 					N N			N	N	50× 50×
FIBROUS HISTIOCYTOMA MESOTHELIOMA, MALIGNANT																								x		1
LL OTHER SYSTEMS			N								N 1					4 1		_		N						50×

TABLE A3. MALE RATS: TUMOR PATHOLOGY (CONTINUED) VEHICLE CONTROL

* ANIMALS NECROPSIED

+: TISSUE EXAMINED MICROSCOPICALLY -: REQUIRED TISSUE NOT EXAMINED MICROSCOPICALLY X: TUMOR INCIDENCE H: NECROPSY, NO AUTOLYSIS, NO MICROSCOPIC EXAMINATION

: NO TISSUE INFORMATION SUBMITTED C: NECROPSY, NO HISTOLOGY DUE TO PROTOCOL A: Autolysis M: Animal Missing B: No Necropsy Performed

Trichloroethylene

TABLE A3.

INDIVIDUAL ANIMAL TUMOR PATHOLOGY OF MALE RATS IN THE 2-YEAR STUDY OF TRICHLOROETHYLENE

LOW DOSE

ANIMAL	6	6	6	6	6	6	6	6		6	6		6	6 9	6	6 9	6	6	7	7	7	?	7	7 2	7 2
WEEKS ON	+	3	0	-8	1	2	- 6	8	8	-7	-8	9	4	+	-1	4	7	9	- 9	3	-5	2	4	-8	-9
STUDY	3	9	6 8	9	5 8	8	3	0 3	91 7	3	8 3	3	9 5	0 3	3	8	3	8	3	3	9	3	3	0	0 3
INTEGUMENTARY SYSTEM SUBCUTANEOUS TISSUE FIBROMA	+	+	N	N	N	+	н	÷	+	÷	+	÷	+	+	N	N	N	÷	+	÷	÷	+	+	÷	÷
RESPIRATORY SYSTEM	+																								_
LUNGS AND BRONCHI Alveolar/bronchiolar carcinoma	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	* x	+	+	+	* x	+
TRACHEA	+	+	+	-	+	+	+	+	+	+	-	-	+	-	+	+	+	+	ŧ	+	+	+	+	+	+
HEMATOPOIETIC SYSTEM																									
BONE MARROW	+-+-	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	-	+	+	+	+
SPLEEN	+	+	<u>+</u>	_+_	÷	+	+	+	+	<u> </u>	+	+	-	+	.+	+	+	+.	+	+	+	+	+	+	+
LYMPH NODES	++	-	+	+	-	+_	+	-	+		+	+	-	-	-	+	+	-	-	•	+	-	+	-	-
THYMUS	-	-	+	-	+	+	+	-	+	-	-	-	-	-	-	+	+	-	-	-	-	+	-	-	-
CIRCULATORY SYSTEM																									
HEART	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+
DIGESTIVE SYSTEM																									
SALIVARY GLAND Squamgus cell carcinoma	+	+	+	+	-	-	+	+	+	+	+	+	+	+	+	* X	+	-	+	+	+	+	+	+	+
LIVER	I.	+	+	+	+	+	+	+	·+	+	+	+	_	+	+	+	+	+	+	+	+	+	+	÷	+
BILE DUCT	+	+	_+_	+	+	+	+	+	+_	+	÷	+		+	+	+	+	÷	+	÷	+	+	+	+	+
GALLBLADDER & COMMON BILE DUCT	LN.	<u>N</u>	N	N	N	N	N	N	N	_N_	N	N	N	N	Ν.	N	N	N	<u>N</u>	<u>N</u>	N	N	N	N	N
PANCREAS	+	+	-	-	+	-	+	+	+	+	+	÷	-	+	+	+	+	+	+	t	t_	÷	+_	+	+
ESOPH GUS	+	+	+	+	+	+	+	+	+	+	÷	+	+	+	+	+	٠	+	+	+	+	+	+	+_	+
STOMACH	1.t	+	+	+	+	+	+	+	+	+	+	+		+	+	+	+	t	+	.+.	+	+	+	+	+
SMALL INTESTINE	+	+	ŧ	+	+	+	+	+	+	+	+	+	-	+	+	+	+	+	+	+	<u>+</u>	+	+	+	+
LARGE INTESTINE	+	+	+	+	+	+	+	-	+	-	+	+	+	+	+	+	-	+	÷	٠	+	+	-	+	+
JRINARY SYSTEM															-									-	
KIDNEY Tubular~cell adenoma	+	+	+	+	+	+	+	+	+	+	+	+	-	+	•	* x	+	+	+	+	+	+	+	+	+
KIDNEY/PELVIS TRANSITIONAL-CELL CARCINOMA	+	+	+	+	+	+	+	+	+	+	+	+	-	+	+	+	+	+	+	+	+	+	+	+	+
URINARY BLADDER	+	+	+	+	+		+	+	+		+	+	+	+	+	+	+	+	+	+	+	+	+	+	+
PITUITARY Ademoma, Nos Chromophobe Adenoma	+	+	+	+	-	+	+	+ X	+	+	+	+	+	+	-	+	+	+	* ×	+	-	-	•	+	+
ADRENAL Pheochromocytoma Pheochromocytoma, malignant	+	+	+	+	+	+	+	+	+	×	-	*	-	+	+	-	+	+	-	+	+	+	+ x	+	+
THYROID C-CELL CARCINOMA	+	+	+	+	+	+	+	+	+	+	+	-	+	-	*	+	+	+	-	-	+	+	+	+	+
PARATHYROID	+	+	-	+		+	+	-	+	_+	+_		+	-	+	+	-	+	-	-		+	+	+	
PANCREATIC ISLETS ISLET-CELL ADENOMA	+	+	-	-	+	-	+	+	+	+	+	+	-	+	٠	+	+	+	+	+	+	+	+	+	+
REPRODUCTIVE SYSTEM																									
MAMMARY GLAND FIBROADENGMA	+	N	N	+	N	+	N	N	+	+	•	+	N	N	*	N	N	+	N	+	+	+	+	+	+
TESTIS Interstitial-cell tumor	1 ±	* X	*	ż.	* ×	*	*	* ×	<u>*</u>	<u>_</u> *	*.	<u>*</u>	-	* ×	<u>*</u>	<u>*</u>	* *	* *	<u>*</u>	<u>×</u>	* *	<u>*</u>	<u>*</u>	* *	* ×
PROSTATE	+	+	+		+	+	<u>+</u>	+		_ <u>+</u>	+	+		÷.	+	+	+	+	+ N	<u>*</u>		* N	+ N	+	+
PREPUTIAL/CLITORAL GLAND ADENOCARCINOMA, NOS	N	N	N	N 	N	N	N	N	н 	N	н	N	N	N	ĥ	N	N	N	n	M	м 	н 		n	-
VERVOUS SYSTEM	÷	+						+	+	+	+	+	+	÷				1			÷	÷	•	÷	+
BRAIN Gliomá, nos	1	4	۴	ŕ	۲	*	*	•	*	*	*			•	•	•	•	ŕ	•			•	•		Ì
BO Y CAVITIES																									
P RITONEUM .Mesothelioma, malignant	N	N	N	N	н	N	N	N	N	N	N	N	N	N	H	N	N	N	N	N	X	N	N	N X	н
ALL OTHER SYSTEMS	1																								
MULTIPLE ORGANS NOS Sarcoma, nos, uno prim or meta Leukemia,nos	N X	N	N	H	N	N 	N	N	H	N	N	N	N X	N	N	N	N	N	N	N	N	N	N X	N	Я
LEG NOS																									

+ - X X

TISSUE EXAMINED MICROSCOPICALLY : NO TISSUE INFORMATION SUBMITTED Reguired Tissue not Examined Microscopically C: Necropsy for Histology due to Protocol Tumor Nicidence Hecropsy, no Autolysis, no Microscopic Examination B: No Hecropsy Performed B: No Necropsy Performed

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ANIMAL Number	730	731	732	739	4	7 5 8	7 7 6		91	01	7 9 5	7 9 7	8 8		8 2 0	8 2 1	8 2 3	8 2 4	828	8 2 9	8 3 1	8 3 3	8 3 5	8 3 9	TOTAL
WEEKS ON Study	07	0	0	8	9	0	0	0	0	0 5			0 0 9 7		1	0	9	1	0	6	1	9	9	9	TISSUES
INTEGUMENTARY SYSTEM	- 0	8	21	8	6 [31	3	31	31	81	3	71_	710	14	3	9 [21	3	9	51	31	3	9	_1	
SUBCUTANEOUS TISSUE FIBROMA	+	+	٠	+	+	+	+	N X	+	N	+	N	+ +	+	+	+	+	+	N	+	+	+	+	+	50× 1
RESPIRATORY SYSTEM	-				-	·																			
LUNGS AND BRONCHI Alveolar/bronchidlar carcinoma	+	+	+	+	+	+	+	+	+	+	+	+	+ +	+	+	+	+	÷	+	+	+	+	+	+	50
TRACHEA	+	+	-	+	+	+	+	+	+	+	-	+	+ +	+	+	•	+	+	•	-	+	 +	•	+	43
HEMATOPOIETIC SYSTEM	<u> </u>							-								-					· ·	-		_	
BONE MARROW	1.	+	-	+	÷	+	+	+	+	+	+	÷	- +	+	+	+	+	÷	÷	÷	÷	÷	+	+	47
SPLEEN	+	+	+	+	+	+	+	+	÷			÷		+	+	+	+	+	+	+	+	+	+	+	49
LYMPH NODES	-	+	+	+	+	-	+	-	+	+	-	+	+ -	+	-	+	+	÷		-	ŧ	÷	+	+	29
THYMUS	-	+	-	-	-	-	-	-	+	+	-	+		-	-	-	-	-		-	-	-	+	-	13
CIRCULATORY SYSTEM	_																							-	
HEART	+	+	-	+	+	÷	+	+	+	+	+	+	+ +	+	+	+	+	÷	+	+	+	+	+	+	49
DIGESTIVE SYSTEM																									
SALIVARY GLAND SQUAMOUS CELL CARCINOMA	+	÷	+	+	÷	+	+	-	+	+	+	+	+ +	+	÷	÷	+	÷	-	+	+	-	-	+	43
LIVER	+	+	+	÷	+	+	+	+	+	+	+	ŧ	++	+	+	+	+	+	+	+	+	+	+	+	49
BILE DUCT	L t	+	+	+	+	+	+	+	t	+	+	+	++	+	+	+	+	+	+	+	+	+	+	+	49
GALLBLADDER & COMMON BILE DUCT	N	N	N	N	N	N	N	N	N	N	N	N	N . N	N	N	N	N	N	N	N	N	N	N	N	50×
'ANCR LAS	+	+	+	+	÷.	+	+	+	÷			+	- +	+	+	+	+	ŧ	+	+	+	+	+	-	44
SOPHAGUS	+	+	+	+	+	÷	+	+	+	÷	+	+	+ +	+	÷	÷	+	+	+	+	÷	+	+	+	50
STOMACH	+	÷	-	+	+	÷	+	+ -	÷	÷	+	+	+ +	+	+	+	+	+	+	+	+	+	+	_+	48
SMALL INTESTINE	+	+	-	+	+	+	+	+	÷	+	<u>+</u>	+	+ -	+	+	+	+	ŧ	+	+	+	+	+	+	47
LARGE INTESTINE	+	+	-	+	+	+	+	+	+	+	•	+	+ +	+	+	+	+	+	÷	+	+	÷	+	+	45
URINARY SYSTEM	+																							-+	
KIDNEY TUBULAR-CELL ADENDMA	+	+	+	+	+	+	+	+	+	+	+ •	+	+ +	+	+	+	*.	+	+	+	+	+	+	+	49 2
KIDNEY/PELVIS TRANSITIONAL-CELL CARCINOMA	+	. +	+	+	+	+	+	+ ·	+ ·	+	+ ·	ł	+ +	+	+	* X_	+	+	+	٠	+	+	+	+	49 1
URINARY BLADDER	-	-	-	+	÷	+	+	+ •	•	+ ·	+ •	+	- +	+	+	-	+	+	+	+	+	+	+	-	42
ENDOCRINE SYSTEM	-												· .												
PITUITARY Adenoma, Nos Chromophobe Adenoma	+	-	-	+	-	+	-	+ •	+ •		+ •	+ · <	- +	-	+	+	-	+	-	+	+	+	-	-	35 1 2
ADRENAL Pheochromocytoma Pheochromocytoma, malignant	+	+	-	+	+	+	+	+ ·	+ ·	+	• •	•	+ +	+	+	-	+	+	-	-	+	•	+	+	42 2 1
THYROID C-CELL CARCINOMA	+	+	-	* X	+	+	+ X	• •	+ •	+ •		•	+ +	+	+.	+	+	+	+	-	+	+	+	+	43 3
PARATHYROID	-	-	-	-	+	+	-			+ •		<u>ب</u>	+_+	. +	-	+	+	-	-	_	÷		+	-	26
PANCREATIC ISLETS ISLET-CELL ADENOMA	+	+	÷	+	+	+	+	+ •	+ •	+ •	+ •	•	- +	+	+	+	÷	+	+	+	+	+	*	-	44 1
REPRODUCTIVE SYSTEM	+										-													+	
MAMMARY GLAND FIBROADENOMA	N	N	N	+	+	+	+	N +	+ }	н і	N H	• •	+ N	N	٠	N	+	+	N	N	+	+	+	+	50×
TESTIS INTERSTITIAL-CELL TUMOR	+ x	+	+	*	+ x	+ ×	* X	+ + x		+ ·	+ + × >	, i	+ + × ×	* x	* ×	* ×	* ×	*	* ×	*	*	* ×	* ×	ţ	49 47
PROSTATE	+	-	-	+	+	+	+	+ +	+ +	+ •	<u>~ /</u>	·		^ +	-^- +			+	+	+	÷	<u>^</u>	+	-	45
PREPUTIAL/CLITORAL GLAND ADENOCARCINOMA, NOS	N	N			N	н	N	N 1					ч н										N	N	50×
NERVOUS SYSTEM	+																							-+	
BRAIN Gliima, Nos	* ×	+	-	+	+	+	•	+ +	• •	+ •	+ +	•	+ +	+	+	+	+	+	+	+	+	٠	٠	+	49 1
PERITONEUM	N	N	N	N	н	н	N	N 1	• •	н 1	N 1	()	й й	ж	н	N	N	N	N	н	N	N	N	N	50¥
MESOTHELIOMA, MALIGNANT												;	X X	x											5
ALL OTHER SYSTEMS MULTIPLE ORGANS NOS SARCOMA, NOS, UNC PRIM OR META LEUKEMIÁ,NOS	N	н	N	N	N	N	н	N N	4 9	N 1	4 4	{	N N	N	N	N X	N	N	N	N	N	N	N	N X	50× 1 5
LEG NDS	\top																								
SYNOVIAL SARCOMA																								ľ	1

TABLE A3. MALE RATS: TUMOR PATHOLOGY (CONTINUED) LOW DOSE

SYNOVIAL SARCOMA * ANIMALS NECROPSIED

+: TISSUE EXAMINED MICROSCOPICALLY -: Reguired Tissue not examined microscopically X: Tumor Incidence N: Necropsy, no Autolysis, no Microscopic examination

: NO TISSUE INFORMATION SUBMITTED C: NECROPSY, NO HISTOLOGY DUE TO PROTOCOL A: AUTOLYSIS M: ANIMAL MISSING B: NO NECROPSY PERFORMED

TABLE A3.

INDIVIDUAL ANIMAL TUMOR PATHOLOGY OF MALE RATS IN THE 2-YEAR STUDY OF TRICHLOROETHYLENE

HIGH DOSE

ANIMAL NUMBER	6	6 5	6 5 3	6 5 7	6 6 7	67	6 8 2	6 8 3	6 8 7	6 8 8	69	696	7	7 0 6	7	7	7	725	2	7 3 3	7 3 7	738	74	747	752
WEEKS ON STUDY	8	0	0	4	0	0	5	1	0 3	0 3	9	0 7	8	0	5	9	8	9	0	0	04	03	0	041	3
INTEGUMENTARY SYSTEM	-41	01	_2	1	3	3	21	3	91	<u>-6</u> 1	51	_61	_21	31	.91	61	.61	91		91	91	91	31	2)	
SKIN	+	+	+	N	* ×	÷	÷	N	A	N	+	N	+	+	N	÷	N	+	+	H	H	N	+	N	+
FIBROMA RESPIRATORY SYSTEM	+				<u> </u>																				_
LUNGS AND BRONCHI	+	+	+	÷	÷	+	+	+	A	÷	÷	+	÷	+	+	÷	+	+	+	÷	+	+	÷	+	÷
CARCINOMA, NOS, METASTATIC Alveolar/bronchiolar carcinoma	<u> </u>										<u>_X</u>														_
TRACHEA	-	+	-	-	+	-	+	+	A	+	+	+	+	+	+	+	+	-	+	+	+	+	+	÷	+
EMATOPOIETIC SYSTEM	+		_																						
BONE MARROW	++-			+	+	+	+	+	<u> </u>	+	+	+	+	+		_ *	<u>+</u>	_ <u>+</u>	<u>+</u>	*			<u>+</u>	-	
SPLEEN	++	+			+	+			_ <u>A</u>		+	<u>+</u>	÷	<u>+</u>	+	*	_*	<u>*</u>	<u>+</u>	-	<u></u>	<u>+</u>	<u>+</u>	<u>+</u>	_*
LYMPH NODES Thymus	+	- <u>-</u> -			<u> </u>	-	- <u>+</u>	<u>.</u>	 A		<u>.</u>		+		+	<u> </u>	+	-	+	+	_	-	_	+	
CIRCULATORY SYSTEM	<u> </u>	· ·											<u> </u>												
HEART	+	+	+	+	÷	+	÷	+	A	+	+	÷	+	+	÷	+	-	+	+	+	+	+	÷	+	÷
DIGESTIVE SYSTEM	-}																								
SALIVARY GLAND	L+	_	-	-	+	+	+		_ <u>A</u> _		+	+	+	+	+	+	+	-	-	+	-	-	+	-	+
LIVER	+	+	+	+	+	+	÷	÷	A	÷	÷	÷	+	÷	+	÷	+	÷	+	+	+	+	+	+	4
NEOPLASTIC NODULE Bile duct	+	+	+	+	+	+	+	+	A	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	_+
GALLBLADDER & COMMON BILE DUCT	L.N.	N.	N	N	N.	N	. N		_A	N	н	N.	N	N	N	_ N	N	N.	N	N	N	N	N	N	
PANCREAS	+	+	+	-	+	+	-	+	A	-	+	+	-	+	÷	+	+	+	٠	-	-	-	÷	+	÷
ESDPHAGUS	+-+-	+	+	•	t	+_	+	+	.	-	+	+		+	+		+	.t.	+	+	+	+	+	+	_
STOMACH	++-	.+	<u>+</u>	-	+	+	+	+		+.	+	+	<u>+</u>	*-	+	+	+	+	<u>+</u>	+	+	+	+	+	
SMALL INTESTINE FIBROSARCOMA	÷.	+	+	-	+	+	+	+	A	-	+	+	+	٠	+	+	+	+	+	+	+	+	+	+	+
LARGE INTESTINE	+	-	+	-	+	+	•	+	A		+	+	+	+	÷	٠	٠	÷	٠	+	•	+	+	÷	-
RINARY SYSTEM													-			-		~~~	_				-		
KIDNEY Tubular-cell Adenogarcinoma	+	*	+	*	+	<u>*</u>	+	+	*	+	+	+	+	*	+	+	*	+	+	+	+	+	•	+	+
KIDNEY/PELVIS CARCINOMA, NOS	+	*	*	+	*	+	+	*	A	*	+	+	+	*	*	+	+	*	+	+	+	+	*	+	+
URINARY BLADDER		+	+	+	+	+	-	+	A	+	*	+		+	=	+	*	*	ŧ	+	+	*	ŧ	ŧ	\$
NDOCRINE BYSTEM									_			- 18-2			-						-				-
PITUITANY Chromophobe Adenoma	*	×	*	*	+	ŧ	*	=	A	=	*	-	*	*	-	*	*	+	*	=	-	-	*	z	_
ADRENAL Pheochromocytoma	+	+	¥	ŧ	¥	ŧ	=	*	A	*	ŧ	+	*	+	*	+	=	+	*	*	+	=	*	*	1
THYRDID		*			ŧ.	-	. *	ŧ.		*	<u>+</u> _		*	.*		_ŧ_	ŧ	-	*	*	*	ŧ	*	*	
PARATHYRDID	+	+	1	=	-	=		=	A	=	=	=	ŧ	=	ŧ	ŧ	=	=	ŧ	ŧ	*	ŧ	Ŧ	3	
ADENOMA, NOS	+														*	*	*		****			-	*	*	4
PANCREATIC ISLETS ISLET-CELL ADENOMA	•	•	_	-	•	*	-	•	9	_	Ť			*	Ť	•		,	·		_	_			
EPRODUCTIVE SYSTEM												LI.					+	N	N	N	N	N	•	N	۲
MAMMARY GLAND Fibroadenoma	+	N	+	N	<u> </u>	*	N	N	A	N		N	•	_	N	-	_	n				-	<u> </u>		-
TESTIS Interstitial-cell tumor	1 \$	÷	÷	+	÷	*	•	*	A	٠	÷	*	*	*	*	*	*	*	*	+	+	+	*	*	4
PROSTATE	T,	+	+	+	+	•	-	+	A	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	
PREPUTIAL/CLITORAL GLAND Adenoma, Nos Adenocarcinoma, Nos	N	N	н	H	N	н	N	N	A	N	N	N	N	N	N X	N	N X	N	N	N	N	N	N X	N	ł
ERVOUS SYSTEM																									-
BRAIN Glicma, Nos	+	÷	+	+	٠	+	+	٠	A	+	+	+	+	+	+	٠	+	+	+	+	+	+	* ×	+	4
ODY CAVITIES	+							_		_															
PERITONEUM Mesothelioma, nos	N	N	N	N	N	N	N	N	A	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	1
LL OTHER SYSTEMS							-							_											
MULTIPLE ORGANS NOS LEUKEMIA,NOS	N	N	N X	N	N	н	N	H	A	N	N	N	N	N	N	N	N	N	N	N	N	H	н	N	+
+: TISSUE EXAMINED MICROSCO -: REQUIRED TISSUE NOT EXAM X: TUMOR INCIDENCE N: NECROPSY, NO AUTOLYSIS, S: ANIMAL MIS-SEXED	1INED	MIC	CROS	SCOF DPIC	ICA	LLY (AM)	(NAT	101	ι		C: A: B: B:	NE AL AN	TI CRO ITOL ITOL IMA	PSY YSI	',	IN D	15T 3	010	DN S GY ED	DUE	171	ED	070	COL	

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.

ANIMAL NUMBER	7 5 3	7 5 6	7 6 2	7 6 3	7 6 7	7 6 8	7 7 3	7 7 5	7 8 1	8	83	8 7	7 9 4	9	9 8	9	8 0 4	8 0 7	8 0 9	1	8 1 3	8 1 5	8 3 2	834	8 3 7	TOTAL
WEEKS ON Study	0	0 8 1	03	0	0	7	8	5	0	3	1	8	0	ļ	6	5	052	2	0	2	0	0	5	0	0	TISSUES
INTEGUMENTARY SYSTEM		_2	91	- 2	3	01	01	<u> </u>		لک	-21		<u>,</u>	3	6	01	61	71	31	21	21	21	- 41	_31		
SKIN FIBROMA	+	N	N	+	N	+	+	N	+	N	+	+	+	N	+	N	•	+	+	+	+	+	+	+	+	49× 1
RESPIRATORY SYSTEM																							-			
LUNGS AND BRONCHI Carcinoma, NOS, Metastatic	+	+	÷	٠	+	÷	÷	+	+	+	+	+	+	ţ	+	÷	+	+	+	+	+	+	+	+	+	49
ALVEOLAR/BRONCHIOLAR CARCINOMA														<u> </u>					X						_	2
TRACHEA	-	-	+	+	+	+	-	+	+	+	+	+	+	+	+	+	-	+	+	+	-	-	+	+	+	38
HEMATOPOIETIC SYSTEM																										
BONE MARROW		+		+	+	+	+	+	+	+	+	+	+	+	+	+	-	-	+	-	+	+	+	+	+	39
SPLEEN	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	-	+	+	+	+	+	+	-	+	
LYMPH NODES	+	+	+	+	-	-	-	-		-	-	+	+	+	-	-		<u>+</u>		-	+	+	+	+	-	24
THYMUS	+	-		+	+	+	+	-	-	-	-	-	+	+	-	-	~	+	+	+	_	_	_		+	22
CIRCULATORY SYSTEM			+	÷	+	1	÷	T	•	+	÷	+	+	+	+	÷	÷	+		+	÷	+	+	+	+	48
HEART DIGESTIVE SYSTEM	Ļ	+	7	*	7	+				*	-	-	*						•		•	· ·	<u> </u>	,	-1	70
SALIVARY GLAND	+	+	+	+	+	-	+	+	•	+.	+	-	+	+	-	+	+	+	+	+	+	+	+	+	+	36
LIVER	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	49
NEOPLASTIC NODULE					X																				-+	1
WILE DUCT	++	+	+	•	+	+	+	+	•	+	+.	+	+	+	+	+	+	+	+	+	+		+	+	+	. 49_
G-LLBLADDER & COMMON BILE DUCT	<u>+</u> N	<u>N</u>	<u>N</u>	<u>N</u>	<u>N</u>	<u>N</u> _	<u>N</u>	<u>N</u>	<u>N</u>	<u>N</u>	<u>N</u>	_ <u>N</u>	<u>N.</u>	<u>. N</u>	<u>N</u>	<u>N</u>	<u>.N</u>	<u>N</u>	<u>N</u>	<u>N_</u>	N	<u>N</u>	<u>N</u>	N	N	<u>49×</u>
PANCREAS	-	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	•	•	+	+	•	•		*	40
ESCPHAGUS	+	+	+	+	+		+	.			<u>+</u>	+	+	+ .	+	•		<u>*</u>	<u>+</u>	-	+	<u>+</u>	<u>.</u>		+	45
STOMACH	+-+-		+	<u>+</u>		+ <u>+</u> .	. *	<u>.</u>	<u>+</u>	<u>+</u>	+		<u>.</u>	<u>+</u>	•	÷	*	<u>*</u>	+	+	+		+	44
SMALL INTESTINE FIBROSARCOMA	Ŀ	+	-	+	+	+	+	•	+	+	+	+	+	+	+	-	+	-	-	+		-	<u> </u>	_	•	
LARGE INTESTINE	-	+	-	+	+	÷	٠	+	+	٠	+	+	+	+	+	+	+	÷	+	+	-	٠	÷	-	+	39
URINARY SYSTEM		-																				-				
KIDNEY	+	+	+	+	+	+	+	+	+	÷	+	+	+	+	+	+	+	+	+	+	+	+	+	+	*	49
TUBULAR-CELL ADENGCARCINOMA	+																							<u>×</u>	X	3
KIDNEY/PEUVIS Carcinoma,nos	+	+	+	+	+	+	+	+	+	+	+	+	+	<u>*</u>	+	+	*	+	*	+	+	+	+	+	+	49
URINARY BLADDER	+	٠	-	+	÷	+	÷	+	+	÷	÷	٠	÷	+	÷	+	+	-	-	-	٠	÷	٠	-	+	41
ENDOCRINE SYSTEM																									-+	
PITUITARY Chromophobe Adenoma	-	+	-	+ ×	+	+	+	-	+	-	-	-	+	+	-	-	-	-	+	-	-	+	•	+	+	26
ADRENAL	1.	+	+	+	+	+	÷	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	-	+	+	44
PHEOCHROMOCYTOMA							-																		+	1
THYROID	++		t	+	+	+	+	+	+	+		+	t	+	+	+	-	+	+	t	+	-	+	+	+	39
PARATHYROID Adenoma, Nos	-	-	+	+	-	-	* ×	+	+	+	-	-	+	+	+	+	-	-	+	-	+	-	+	+	+	24
PANCREATIC ISLETS	-	+	+	+	+	+	+	+	÷	+	+	+	+	+	+	+	+	+	+	+	+	+	+	-	+	40 1
ISLET-CELL ADENOMA REPRODUCTIVE SYSTEM	_								x																_	
MAMMARY GLAND	н	H	N	÷	N	н	N	N	+	N	÷	÷	+	N	N	N	N	N	÷	+	+	÷	N	+	÷	49×
FIBROADENOMA TESTIS	+	+	-	÷	+	+	+	+	+	+	+	+	+	+	+	+	+	+	÷	+	+	÷	+	-	÷	46
ÎNTÊRSTITIAL-CELL TUMOR	+	<u> </u>		<u> </u>	<u> </u>	<u> </u>	.×		_ <u>×</u>	<u>x</u>	<u>×</u>	<u>×</u>	<u> </u>			<u>×</u> +	*		<u>x</u>		<u>×</u> +	*	+	-	Ť	45
PROSTATE	+	+	-	+	*	+	+	+	+	+	+	+	+	+	+			•		Ť						
PREPUTIAL/CLITORAL GLAND Adenoma, nos Adenocarcinoma, nos	И	N	N	N	N	N	N	Ν	N	N	N	N	N	N	N	N	N	N	н	N	N	N	N	N	н	49× 1 2
NERVOUS SYSTEM	+						• • •										-	•							+	
BRAIN Glioma, nos	+	+	+	+	+	+	+	+	+	+	+	-	+	+	+	+	+	+	÷	+	+	+	+	+	+	48 1
BODY CAVITIES																									-+	
PERITONEUM Mesothelioma, nos	И	N	N	N	N	N	N	N	н	N	N	N	H X	N	N	N	N	N	N	N	N	N	N	N	н	49× 1
ALL OTHER SYSTEMS	+																								+	,
	1								N																	49×

TABLE A3. MALE RATS: TUMOR PATHOLOGY (CONTINUED) HIGH DOSE

* ANIMALS NECROPSIED

.+: TISSUE EXAMINED MICROSCOPICALLY -: REQUIRED TISSUE NOT EXAMINED MICROSCOPICALLY X: TUMOR INCIDENCE N: NECROPSY, NO AUTOLYSIS, NO MICROSCOPIC EXAMINATION

: NO TISSUE INFORMATION SUBMITTED C: NECRDPSY, NO HISTOLOGY DUE TO PROTOCOL A: AUTOLYSIS M: ANIMAL MISSING B: NO NECROPSY PERFORMED

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TABLE A4.

INDIVIDUAL ANIMAL TUMOR PATHOLOGY OF FEMALE RATS IN THE 2-YEAR STUDY OF TRICHLOROETHYLENE

ANIMAL	0	0	0	<u> </u>	0	01	01	01	<u>।</u>	٥Ţ	01	- 0	8	8	8	8	8	8	8	87	8	8		8	89
NUMBER	0	4	5	6	윗	ò	2	2	2	32	3	6	8 5 2	5	7	\$	6	ź	8 7 5	é	8	83	8	8	÷
WEEKS ON Study	9	9	2	8	ġ		8	0	0	2	0	ò	1	0	0	ģ	ģ	9	ç	9	0	7	è	9	ģ
INTEGUMENTARY SYSTEM		<u> </u>	_01	<u>-</u>	_/1		-11			_01		<u>_</u> 91	<u></u>	91.			<u>.</u>				¥ L		•1	<u>.</u>	~
SUBCUTANEOUS TISSUE Fibrosarcoma	N	N	+	+	+	+	*	+	+	+	+	N	+	+	+	N	+	+	+	+	N	+	+	+	+
RESPIRATORY SYSTEM		-												-											
LUNGS AND BRONCHI	+-	+_	+	<u>+</u> _	+	+	<u>+</u>	+	+	+	+	+	<u>_</u> +	+	+	+	+	+	+	+	+	+	+	+	÷
TRACHEA	+	-	+	-	+	-	+	+	-	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+
HEMATOPOIETIC SYSTEM																									
BONE MARROW	+	+	+	+	+	+	<u>+</u>	+	+	+	+_	+	+	+	+	+	.*	+	- <u>+</u>	+	•	+	<u>*</u>	+	*
SPLEEN .	- <u>+</u> -	+_	+	+	+	+	+	+	+	+	+	+	+	+		+	+	+	<u>+</u>	+	+	+	+	+	+
LYMPH NODES	<u> </u>			+			+	-	-	*	-			<u> </u>		<u>*</u>	-	<u>+</u>	<u>_</u> *	<u> </u>		- <u>T</u>	+	+	<u> </u>
THYMUS	Ē	-	+	_	+	-		<u> </u>	_	+	+	_		-	<u>,</u>	<u> </u>	•		-		_	-		•	_
CIRCULATORY SYSTEM	+		L	4	L				4		÷	÷	÷	+	+	+	÷	÷	+	÷	+	÷	÷	+	+
	ļ.		•				-									·						-			
DIGESTIVE SYSTEM SALIVARY-GLAND	•	-	+	÷	+	÷	+	+	+	÷	+	+	÷	÷	-	+	+	+	÷	÷	+	+	÷	÷	÷
LIVER	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	÷	÷	+	+	+	+	÷	+	+
NEOPLASTIC NODULE	<u> </u>										-														
BILE DUCT	+-	+	+	+	+	+	+	+_	+	+	+	+	+	+	+	+	+	+	+	+-	+	+	+	+	+
GILLBLADDER & COMMON BILE DUCT	N	N	N	N	<u>N</u>	N	<u>N</u>	<u>N</u>	N	N	N	N	<u>N</u>	N	<u>N</u> _	<u>N</u>	N	N	<u>N</u>	<u>N</u> _	<u>N</u>	N	<u>N</u>	N	<u>.</u> N
PANCREAS .	+	+	+	+	+	+	+	<u>+</u>	+	+	+	+	+	+	-	+	+	+	+	+	+	+	+	+	+
ESOPHAGUS	<u> </u>	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+
STOMACH .	++	t	+	+	+	+	+	+	+	+	+	<u>+</u> .	+	+	-	+	+	+	<u>+</u>	+	+	+	+	+	+
SMALL INTESTINE Fibrosarcoma	+	-	+	+	+	+	+	+	+	+	+	+	+	+	-	+	+	+	+	+	+	<u>*</u>	+	+	+
LARGE INTESTINE	+	-	+	+	+	-	+	+	÷	+	+	+	+	+	-	-	+	+	+	+	-	+	+	+	÷
URINARY SYSTEM	┣──																								
KIDNEY	+	+	+	+	+.	+	*	+	+	+	+	+	+	+	+	+	+	+	+_	+	+	+	+	+_	+
URINARY BLADDER	+	-	÷	+	+	+	+	÷	÷	-	٠	+	+	÷	-	+	+	+	+	+	+	+	-	+	+
ENDOCRINE SYSTEM												_							· · · ·						_
PITUITARY Chromophobe Adenoma Chromophobe Carcinoma	+	+	+	+	+	* ×	+	*	×	*	+	×	+	* ×	+	×	×	×	+	+	+	+	×	+	×
ADRENAL Cortical Adenoma Pheochromocytoma	+	+	÷	+	+	+	+	+	+ X	+	+	*	+	+	-	+	* X	+	+	+	+	+	+	+	+
THYROID	1.	+	+	+	+	-	+	+	-	+	+	+	+	-	-	+	+	-	+	+	+	-	+	-	+
C-CELL ADENOMA C-CELL CARCINOMA	x																				×				
PARATHYROID	-	-	+	+	-	_	+	+	-	+	-	-	+	-	-	+	+	-	+	+	÷	-	÷	-	-
REPRODUCTIVE SYSTEM	┾																								
MAMMARY GLAND	+	+	÷	÷	÷	+	÷	÷	t	+	÷	ţ	+	÷	N	N	+	+	ţ	٠	N	+	+	+	÷
FIBROADENOMA Preputial/clitoral gland	<u> </u>			<u> </u>				_ <u>Å_</u>	<u>_</u>	N	N	. <u>.</u> N	N	N	N	N	N	N	N	N	N	N	N	N	N
ADENGCARCINOMA, NOS	↓ N	N	N	N	N	N	N	N																	
UTERUS	+	-	+	+	+	+	+	+	+	÷	+	+	ŧ	+	-	+	+	+	+	+	+	+	+	+	+
ADENOMA, NOS ADENOCARCINOMA, NOS ENDOMETRIAL STROMAL POLYP					x		x			_	x							_			x	x_	x		_
OVARY	+	-	+	+	+	+	+	+	+	+	+	+	+	+	-	+	+	+	+	÷	÷	÷	+	÷	+
NERVOUS SYSTEM	+																	<u></u>				-			-
BRAIN Chromophobe carcinoma, invasive	+	+	+	+	+	+	٠	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+
ALL OTHER SYSTEMS	-								_					_											_
MULTIPLE ORGANS NOS Malig.lymphoma, histiocytic type Leukemia.nos	N	N X	н	N	N	N	N	N _X	N	N _X	N X	N	N	н .X.	N X	N _X	N	N	N	N	N	N	N	N	N
+: TISSUE EXAMINED MICROSCOP -: REQUIRED TISSUE NOT EXAMI X: TUMOR INCIDENCE N: NECROPSY, NO AUTOLYSIS, N	NED	MIC						101	ł		C: A: B:	AL AL	TI CRO ITOL IMA NE	PS) YS] L N	(,) (5 1155	IN C	1151	.010	GY	DUE		ED PR	010	COL	

UNTREATED CONTROL

	895	898	89	9 0 0	9 0 3	1	9	9	9	924	931	938	9	945	94	9 5 0	9 5 8	9	968	9	9 8 2	9 8 4	9	9 9 7	9 8	TOTAL
WEEKS ON Study	9	0	ò	0	į	4	0	2	8	9	7	8	0	1	07	9	7	0	9	2	0	095	į	6	1	TISSUE
INTEGUMENTARY SYSTEM	+-4			_/_	01		- 01	_/_	_11	- 41	_/	<u> </u>	1	<u>.e</u> t	0	_/1	-21	-11	0	01	- 01	-21	01	01	-4	
SUBCUTANEOUS TISSUE Fibrosarcoma	+	+	N	+	+	N	+	+	+	N	A	+	+	٠	٠	+	+	+	+	+	+	+	+	÷	N	49× 1
RESPIRATORY SYSTEM	+									-			.													
LUNGS AND BRONCHI	++	+	+	+	+	+	+	÷	+	+	A	+	+	+	+	+	+	+	÷	+	+	+	+	+	+	49
TRACHEA	+	+	+	+	+	+	+	+	+	-	A	+	+	-	٠	-	÷	+	-	+	+	+	+	-	+	40
HEMATOPOIETIC SYSTEM														-							-				-	
BONE MARROW	++-	+	+	+	+	+	+	+	+	+	Α_	+	+	-	+	.+	+	+	-	+	+	+	+	+	+	47
SPLEEN	++	-	+	+	+	+	+	+	+	+	_A_	+	+	+	+	+	÷	+	+	+	+	+	+	+	+	47
LYMPH NODES	++	-	-			-	-	+	+	+	A	+	-		+		+	+	-	-	+		+	-	+	23
THYMUS	+	-	-	+	+	-	-	+	-	-	A	+	+	-	+	-	-	-	-	+	-	+	+	-	-	23
CIRCULATORY SYSTEM	1																								-	
HEART	+	+	+	+	÷	+	+	+	+	+	A	+	+	+	+	÷	+	+	+	+	+	+	+	+	+	49
DIGESTIVE SYSTEM	+																			_				_	-	
SALIVARY GLAND	++	+	+	+	+	+	+	+	+	+	. A	+	+	+	+	+	+	+	-	+	+	+	+	+	+	46
NEOFLASTIC NODULE	+	+	* ×	+	+	+	+	+	+	+	A	+	+	+	+	+	+	+	+	+	+	+	+	+	+	49
B'LE DUCT	<u>+</u> +	+	+	+	<u>+</u>	+	+	+	+	÷	A	+	+	+	. +	+	+	.+	+	+	+.	+	+	+	+	49
GALLBLADDER & COMMON BILE DUCT	LN_	N	<u>N</u> .	N	N	N	<u>N</u>	н	<u>N</u>	N	. A	N	N	N	N	<u>N</u> .	N	N	N	<u>N</u> _	N	N	N	N	. н	49×
PANCREAS	+	-	+	+	+	+	+	+	+	+	Α.	+	+	+	+	+	÷	+	÷	+	+	-	+	+	+	46
ESOPHAGUS	+	+	÷	+	+	+	+	+	+	+	A	+	+	+	+	+	+	+	+	+	+	+	+	+	+	49
STOMACH	+	-	+	+	+	+	÷	+	+	+	Α.,	+	+	÷	+	+	÷	+	+	+	+	-	+	+	+	56
SMALL INTESTINE FIBROSARCOMA	+	-	+	+	+	+	-	+	+	+	A	+	+	+	+	+	+	+	+	+	+	-	÷	+	+	44
LARGE INTESTINE	+	-	+	-	÷	+	-	+	+	÷	A	÷	+	+	÷	+	÷	÷	+	÷	-	-	÷	+	+	39
JRINARY SYSTEM	+																								-+	
KIDNEY	+		+	÷	+	+	+	+	+	÷	Α	+	+	+	+	+	+	+	+	+	+	+	+	<u>.</u>	+	48
URINARY BLADDER	+	-	+	+	+	+	+	+	+	+	A	-	+	+	÷	+	-	+	÷	+	+	-	+	+	+	41
ENDOCRINE SYSTEM	+																									
PITUITARY Chromophobe adenoma Chromophobe carcinoma	-	-	+	+	+	-	*	* ×	+	+	A	* ×	* ×	-	+	*	+	+	+	+ X	* ×	+	* ×	-	-	43 18 1
ADRENAL Cortical Adenoma Pheochromocytoma	+	-	÷	+	+	+	+	-	÷	+	A	+	÷	+	+	+	+	÷	+	+	+	+	÷	+	-	45 2
THYROID C-CELL ADENOMA C-CELL CARCINOMA	-	÷	+	+	+	+	*	+	+	-	A	+	+	+	+	-	+	+	-	+	+	+	-	-	+	36
PARATHYROID	—	+		+	+	+	+	_		-	A	_	+	+	+	_	+	+	-		-	_	-		_	22
REPRODUCTIVE SYSTEM											-														-	
MAMMARY GLAND	+	+	÷	÷	÷	N	÷	+	+	+	A	+	+	÷	N	+	+	+	н	÷	+	+	N	+	н	49×
FIBROADENOMA	<u> </u>		X		<u>x</u>				X				X				<u>x</u>									
PREPUTIAL/CLITORAL GLAND ADENOCARCINOMA, NOS	N	N	N	N	N	N	N	N	N	N X	A	N	N	N	N	N	N	N	N	N	N	N	N	N	N	49× 1
UTERUS ADENOMA, NOS ADENOCARCINOMA, NOS ENDOMETRIAL STROMAL POLYP	+	-	+ ~	+	÷	+	+	+ x	+ X	+ x	A	+	+	+	÷	÷	+	* x	+ X	+	+	-	+	+	+	45
OVARY	+	-	+	+		+	+				A	-		+			<u>.</u>	4			·	_		_		<u>10</u> 44
LERVOUS SYSTEM	Ļ		Ŧ	T	т 	*	7	т		т 	*				-	_		*	•		+	-			-	44
BRAIN	1	+	+	Ŧ		_	÷		+	÷	A	Ŧ			Ŧ	L		Ł	+	+	7	۔	+	+	+	
CHROMOPHOBE CARCINOMA, INVASIVE		r		,	•	-				•	~	Ŧ	*	,	т	Ŧ	Ŧ	*	Ŧ	x	Ŧ	т	Ŧ	•	Ť	48 1
LL OTHER SYSTEMS	1								_				_												-+	· · · · ·
MULTIPLE ORGANS NOS MALIG.LYMPHOMA, HISTIOCYTIC TYPE LEUKEMIA,NOS	н Х	N X	н	N	N	N	N	N	H	N	A	N	N	N	н х	N	N	N	N	N	н	N	N	N X	N	49× 1 10
ANIMALS NECROPSIED +: TISSUE EXAMINED MICROSCOP -: Required Tissue not exami x: Tumor incidence N: Necropsy, no Autolysis, n							ITA	(ON		i	: C: M: B:	AU AU	TIS CROP TOLY IMAU NEC	°51 (51	, NC 3 (551) H1 (NG	STO	0100	3Y 1	JBM: DUE	1 T T I T O	PRO	0100	COL		

TABLE A4. FEMALE RATS: TUMOR PATHOLOGY (CONTINUED) UNTREATED CONTROL _____

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TABLE A4.

INDIVIDUAL ANIMAL TUMOR PATHOLOGY OF FEMALE RATS IN THE 2-YEAR STUDY OF TRICHLOROETHYLENE

VEHICLE CONTROL

AN IMAL NUMBER	0	0	0	0 2 1	024	27	0 3 0	0 3 8	040	0 4 1	843	844	845	8 4 7	849	853	85	8 6 0	8 6 7	8 7 0	873	8 7 7	9 0	902	
WEEKS ON STUDY	1	1	1	0	1	1		1	0 8	1	1	1	1	9	1	1	1	0 3	1	0	1	1	0 4	1	
INTEGUMENTARY SYSTEM	6	6	6	ž	6	6	6	ě	6	ő	6	Ğ	6	5	6	<u>ě</u>	6	ž	6	3	Ğ	Ğ	3	ě	L
SKIN Keratgacanthoma	+	+	÷	÷	÷	+	+	+	+	÷	÷	+	+	+	+	+	٠	N	+	+	+	N	N	+	•
SUBCUTANEOUS TISSUE FIBROMA	+	+	+	+	+	+	+	+	+	+	+	÷	+	+	+	÷	+	H	+	+	+	N	N X	+	4
RESPIRATORY SYSTEM																									
LUNGS AND BRONCHI Alveolar/Bronchiolar Adenoma	+	÷	+	+	+	+	+	÷	÷	* x	+	+	+	+	٠	+	+	+	+	+	+	+	+	÷	•
TRACHEA	-	+	+	-	+	+	+	+	+	+	+	+	+	+	+	+	+	-	+	+	-	÷	+	+	+
HEMATOPOIETIC SYSTEM																									
BONE MARROW	+	÷	÷	-	÷	+	÷	÷	+	+	+	+	+	÷	+	÷	+	-	+	-	÷	+	-	÷	4
SPLEEN							÷	•	+		+	+	+	+	+	•			+	•	•	+	+		_
	-	+		÷			<u> </u>	<u>.</u>	+	+	+		+		<u>.</u>	+	-	+	<u> </u>	+	-	+	-		
LYMPH NODES Thymus	+	+	-		-	· ·		-	- <u></u>		<u>-</u>		- <u>-</u>	+	+	 +				<u>T</u>		+	+	+	_
	+	•	-	+	+	-						_		•	*			+	+		_				_
C)RCULATORY SYSTEM																									
	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+
DIJASTIVE SYSTEM																									
SALIVARY GLAND	++	+	+	+.	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	-+
LIVER	++-	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	.+ .	+	+	+	+
BILE DUCT	++-	- +	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	t	+	+	+	+	+	
GALLBLADDER & COMMON BILE DUCT	<u> </u>	<u>N</u>	<u>N</u>	_N	N.	N	N	N	N	N	N	N	N.	N	N	N	Ν.	N	<u>N</u>	N	N	N	N	N	•
PANCREAS	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	-	÷	+
ESOPHAGUS	+	÷	+	-	+	+.	+	+	+	+	+	+	+	+	+	+	+	+	+	+	÷	+	+	ŧ	4
STOMACH	++	+	+	<u>+</u>	+	+	+	+	+	+	+	÷	+	+	+	+	+	+	+	+	+	+	+	+	4
SMALL INTESTINE	++	+	÷	÷	+	+	+	÷	+	+	÷	÷	+	+	+	+	+	+	+	+	+	+	+	+	+
LARGE INTESTINE	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	÷	+	-	+	+	÷	4
URINARY SYSTEM	+-																								-
KIDNEY	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	. t	+	+
URINARY BLADDER	+	÷	÷	-	+	+	-	-	+	+	+	+	+	+	-	÷	÷	+	+	+	-	÷	+	÷	-
ENDOCRINE SYSTEM	+																								
PITUITARY Chromophobe Adenoma	+	•	-	-	+	+	+	+	-	÷	+	* ×	-	+	-	+	+	-	-	*	+	* ×	-	* ×	-
ADRENAL Cortical Adenoma Pheochromocytoma	+	+	+	+	+	+	÷	+	+	-	+	+	+	+	+	+	+	+	٠	+	+	٠	٠	+ X	+
THYROID C-CELL ADENOMA	-	÷	+	-	+	÷	+	+	+ ×	-	* X	+	+	+	+	+	÷	-	÷	+	-	÷	+	+	+
PARATHYROID	-	+	+	-	+	-	+	+	-	-	÷	+		-	-	+	+	-	-	+	-	+	÷	+	÷
REPRODUCTIVE SYSTEM	+																								
MAMMARY GLAND	+	N	+	+	•	+	+	+	+	+	+	+	+	+	+	÷	+	N	+	+	N	+	N	+	+
SARCOMA, NOS FIBROADENOMA	Lx.	.,			x			x										.,				x		x	
PREPUTIAL/CLITORAL GLAND ADENOMA, NOS	N	н	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N
UTERUS SARCOMA, NOS Endometrial Stromal Polyp Endometrial Stromal Sarcoma	+	+ ×	+	+	+	+	+ x	+ x	+ x	+	+	+	+ ×	+	+ x	+ X	+ ×	+	+	+	+	+	+	+	•
OVARY THECOMA	+	÷	٠	-	+	+	+	+	+	+	+	+	+	٠	+	+	+	+	+	+	÷	+	+	+	+
ERVOUS SYSTEM	1												_												
BRAIN	+	+	+	+	+	÷	÷	+	+	+	÷	÷	÷	÷	+	+	+	+	÷	+	+	÷	+	÷	+
LL OTHER SYSTEMS	+										-														
	1	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	}

: NO TISSUE INFORMATION SUBMITTED C: NECROPSY, NO HISTOLOGY DUE TO PROTOCOL A: AUTOLYSIS M: ANIMAL MISSING B: NO NECROPSY PERFORMED

+: TISSUE EXAMINED MICROSCOPICALLY -: REQUIRED TISSUE NOT EXAMINED MICROSCOPICALLY X: TUMOR INCIDENCE N: NECROPSY, NO AUTOLYSIS, NO MICROSCOPIC EXAMINATION

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ANIMAL NUMBER	9	9	9	9	9 2 3	2	9 2 7	928	929	930	932	9	9 3 4	9	9	947	9 4 9	9 5	9 5 2	9 5 4	962	9 7 5	9	9 8 1	9 9 4	TOTAL
WEEKS ON Study			ļŕ	8	10	6			0		1	- 3 1 0	- 1	1	9		1	1	1	1	1	1	6 1 0	1 0 9	1	
INTEGUMENTARY SYSTEM	6	6	14	8	1 ž	Ó	Ğ	6	Lž	Ŀš	1_6	4	6	5.1	źÌ	6	ĞÌ	6	61	6	6	6	6	ź	Ğ	TONOR
SKIN	+	+	+	+	÷	+	+	+	+	÷	+	+	÷	+	+	N	+	+	÷	+	÷	+	÷	+	+	50×
KERATOACANTHOMA	+																									
SUBCUTANEOUS TISSUE FIBROMA	+	+	+	+	+	+	+	+	+	+	+	+	•	+	+	N	+	+	+	+	+	+	+	+	+	50¥ 1
RESPIRATORY SYSTEM																										
LUNGS AND BRONCHI Alveolar/bronchiolar Adenoma	+	+	÷	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	50 1
TRACHEA	+	+	+	+	+	÷	+	+	+	+	+	÷	+	+	+	+	+	+	+	+	+	+	+	+	+	46
HEMATOPOIETIC SYSTEM																									-	
BONE MARROW	+	÷	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	46
SPLEEN	+	÷	+	+	+	+	+	+	+	+	+	+	+	+	+	÷	+	+	+	+	+	+	+	+	+	50
LYMPH NODES	+	~	+	+	+	+	+	-	+	+	-	-	+	_	+	-	-	+	-	-	+	-	_	+	+	26
THYMUS		-		-	+	-	+	+	+	+	+		+	-	-	-	+	+		-	+	+	_	_	-	25
CINCULA FORY SYSTEM									-		-														_	
HEART	+	÷	÷	÷	+	+	÷	+	+	÷	÷	+	+	+	÷	÷	÷	+	+	+	÷	+	+	+	+	50
DIGESTIVE SYSTEM	- <u> </u>				•																				•	
SALIVARY GLAND	+	+	+	÷	÷	+	÷	4	+	÷	÷	÷	÷	+	+	÷	÷	÷	+	+	+	÷	÷	-	_	48
LIVER	+	+	 +	+	+	+	 +			•	+	+	+	+	+	+	• •	+	+	 +	 +	i +		+		50
BILE DUCT	T.	+	+	+	+						+	+	+	+	+	+	+	+	+	<u>,</u>		+			Ì	50
GALLBLADDER & COMMON BILE DUCT	T N	N	N	N		<u>-</u>			 N	Ņ	N	N		N		, N	 N	N	N	N	, ,	N	Ň	, N	,	50×
PANCREAS	1	+	+		 +	<u> </u>		 	 	13 +	+	+	+	+	+	<u>n</u>	+	+	<u>.</u>	4 4	<u>_n</u> _	+		0 +	+	48
ESOPHAGUS				-	Ï		Ì		Ţ	Ţ	Ţ	Ţ	Ţ	•	Ţ	Ţ	Ţ		Ţ	Ţ	-	Ţ	Ţ	Ţ		48
STOMACH			<u>*</u>	<u>-</u>		-	- <u>+</u>	- T	-			• •	+	+		+	- -	<u> </u>	, ,	•	• •		-	-		50
	+	+	+	+	+	+	+		+	-	+	+	+	+	+	+	+	+	+	+	+	+	+	+	•	
SMALL INTESTINE	+	+	+	+					<u>+</u> -		- <u>†</u>		÷	-	+	<u>.</u>	<u>+</u>	+	÷	<u>,</u>	. <u>+</u>	- <u>+</u>	-	- <u>+</u>	-	47
LARGE INTESTINE	+	+	+	+	+	+	-	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	-	+	+	47
JRINARY SYSTEM																										
KIDNEY	++	- <u>+</u>	- <u>+</u> -	+	+	+		+	+	+	+	++	+	+	+	+	+	<u>+</u>	<u>+</u>	<u>+</u>	+	+	+	<u>+</u>	+	
URINARY BLADDER	+	+	+	+	+	+	+	+	+	+	_	+	+	_		+	+	+	+	+	+	+	+	+	+	41
NDOCRINE SYSTEM																										
PITUITARY Chromophobe Adenoma	+	+	+	x	<u>×</u>	+	×	•	-	<u>×</u>	<u>×</u>	-	+	*	+	+	+	<u>×</u>	+	+	+	<u> </u>	+	<u>*</u>	_	37 13
ADRENAL Cortical Adenoma Pheochromocytoma	+	+	+	+	+	+	+	* ×	+	+	-	+	+	+	+	+	-	+	+	-	+	+	+	+	+	46 1
THYROID C-Cell Adenoma	+	+	-	-	+	-	+	+	+	+	+	+	+	+	-	÷ ×	+	+	+	+ X	÷	+	÷	÷	+	41 4
PARATHYROID	+	-	-	-	-	-	+	+	+	+	+	-				+	÷	+	+	+	÷	+	-	+	+	29
EPRODUCTIVE SYSTEM																									-+	
MAMMARY GLAND Sarcoma, Nos Fibroadenoma	+	÷	N	+ ¥	+ ¥	+	N	N	+	+ x	+	N	+	+	+	+	N	+	* ×	+	+	+ ×	÷	÷	+	50× 1
PIERUADERUMA PREPUTIAL/CLITORAL GLAND ADENOMA, NOS	N	N	N	N	N	N	ж Х	N	N	N	N	N	N	N	N	N	н	N	N	N	N	N	N	N	N	9 50× 1
UTERUS SARCOMA, NOS ENDOMETRIAL STROMAL POLYP ENDOMETRIAL STROMAL SARCOMA	+	+	×	+	+	+	+	+	+	+ x	-	÷	+	-	+	+		+ X	+ ×	+	+ X	+ ×	+	+ X	+	48 1 15 1
OVARY THECOMA	+	÷	÷	-	+	+	+	+	+	+	-	* ×	+	-	+	+	+	+	+	+	+	+	+	+	+	⁴⁶ 1_
ERVOUS SYSTEM			-																						-†	
BRAIN	+	÷	+	+	÷	+	+	+	+	+	+	+	+	+	+	+	+	ŧ	+	+	+	+	+	+	+	50
PRATH.																									- I	
LL OTHER SYSTEMS	+																									

TABLE A4. FEMALE RATS: TUMOR PATHOLOGY (CONTINUED) VEHICLE CONTROL

* ANIMALS NECROPSIED

+: TISSUE EXAMINED MICROSCOPICALLY
 -: REQUIRED TISSUE NOT EXAMINED MICROSCOPICALLY
 X: TUMOR INCIDENCE
 N: NECROPSY, NO AUTOLYSIS, NO MICROSCOPIC EXAMINATION

: NO TISSUE INFORMATION SUBMITTED C: Necropsy, no histology due to protocol A: Autolysis M: Animal Missing B: No Necropsy Performed

TABLE A4.

INDIVIDUAL ANIMAL TUMOR PATHOLOGY OF FEMALE RATS IN THE 2-YEAR STUDY OF TRICHLOROETHYLENE

LOW DOSE

ANIMAL NUMBER	0 1 4	0 2 5	0 2 6	0 2 9	0 3	0 3 7	8	842	8 5 0	8 5	8 5 6	8		8 6 5	869	8 7	8 7 9	8 8 0	8 8 1	882	886	8 9 0	8 9	8 9 2	-
WEEKS ON Study	1	0 9	1	1	0	1	0	0	3	1	2	0	0	1	1	0	1	0	0	0	1	0	ò	8	
NTEGUMENTARY SYSTEM	4	_7	4	4	4]	41	4	4	41	11	_11	4	4	4	4	41	41	4	4	.4.	01	41	41	21	
SUBCUTANEDUS TISSUE Squamous cell carcinoma	÷	+	+	+	N	+	+	+	+	+	+	+	N	+	+	+	÷	+	+	+	+	+	H	+	
ESPIRATORY SYSTEM		<u> </u>											_												
LUNGS AND BRONCHI Alveolar/bronchiolar adenoma	+	+	+	+	+	+	+	+	+	÷	+	+	+	+	÷	+	÷	+	+	+	-	+	+	+	
TRACHEA	+	+	+	+	+	+	+	+	+	+	+	+	+	-	_	+	+	+	+	+	+	+	+	+	
EMATOPOIETIC SYSTEM	·					· · · ·				<u> </u>							_						-		
BONE MARROW	+	+	+	+	÷	+	+	+	+	÷	+	+	÷	+	+	+	÷	+	+	+	+	+	+	+	
SPLEEN	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	÷	+	_	+	+	+	
LYMPH NODES	+	+	-	+	-	+	-	-	+	-	-	-		+	-	+	_	+	-	-	-	+	÷	+	
THYMUS	+	-	÷	÷	-	+	+	-	-	+	+	-	-	-	-	-	-	-	÷	÷	-	ŧ	-	+	
I CULATORY SYSTEM																							-		-
HEAR"	+	+	+	+	+	÷	+	+	+	+	+	+	+	÷	+	+	+	+	÷	+	-	+	+	٠	
IG STIVE SYSTEM	<u> </u>								_											_					-
SALIVARY GLAND	+		+	+	+	+		+	_+	-	+	+	+	+	+	+	+	+	t_	+	+ .	+	+	+	_
LIVER NEOPLASTIC NODULE	+	+	+	+	+	÷	+	+	٠	•	÷	+	+	+	٠	٠	÷	+	+	+	-	+	+	+	
	1							•	+	+	+	+	•	+	+	•				+			•		
BILE DUCT		<u>₹_</u>	 N	, N			N.	N	N	- <u>'</u>		N	N	N	Ň	N	N	N	N	N	N	N	N	N	
PANCREAS		<u> </u>			•	-8-	_0	<u>a</u> .	*			+	*		*	+	+	+	*	+		+	+	*	
ESOPHAGUS			-			<u> </u>	•	<u>.</u>	•			•	+		+	+	•	+	•	+		+	-	+	
STOMACH		÷	÷	÷		Ì	÷	÷		÷	÷	÷	÷	÷	÷	÷	÷	•	•	+	-	•	+	÷	
SMALL INTESTINE	÷.		+	÷	+	+	÷	+	÷	+	÷	+		+	+	+	+	+	+	-	-	+	+	+	-
LARGE INTESTINE	+	+	÷	+	+	+	+	+	+	+	+		+	+	-	+	+	+	+	+	-	+	+	+	
RINARY SYSTEM													_						_						-
KIDNEY .	+	+	+	+	+	+	+	+	+	+	+	÷	+	+	÷	+.	+	+	4	+	-	+	+	+	
URINARY BLADDER	+	+	+	÷	÷	+	-	+	+	+	+	+	+	+	÷	+	+	+	+	-	-	+	+	+	
NDOCRINE SYSTEM	-								_																-
PITUITARY Carcinoma, nos Chromophobe Adenoma Acidophil Carcinoma	+	٠	+	÷	-	+ X	+	-	+ X	+ X	-	+	٠	٠	+	*	+	+	•	+	-	+	-	-	
ADRENAL CORTICAL ADENOMA	+	÷	+	+	*	+	+	÷	+	+	+	+	*	+	+	+	+	÷	+	+	-	+	+	+	
THYROID Follicular-cell Adenoma C-cell Adenoma	+	+	+	+	÷	+	+	+	+	+	+	+	+	-	+	+	-	+	+	+	+	+	+	÷	
PARATHYROID	-	+	÷	-	-	+	-	+	-	-	+	-	+	-	-	-	-	-	+	+	-	+	-	-	
EPRODUCTIVE SYSTEM			_																						
MAMMARY GLAND Adenoma, Nos Fibroadengma	+ ×	٠	+	+ X	N X	+ X	+	* ×	+	+	+	+ X	+	+	N	+	+ ×	+	+	+	н	+	N	+	
UTERUS ADENOMA, NOS ADENOCARCINOMA, NOS ADENOCA, IN, ADENOMATOUS, POLYP	+	+	+	+	+	+	+	÷	+	+	+	+	+	* x	+	+	+	÷	+ X	+	-	+	+	+	
ENDOMETRIAL STROMAL POLYP							X	x	_				_x			x	<u>x</u>						<u>_X</u>		-
OVARY GRANULDSA-CELL TUMOR	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	×	+	+	-	+	+	+	
ERVOUS SYSTEM																									
BRAIN SQUAMOUS CELL CARCINOMA, METASTAT ODY CAVITIES	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	•	+	+	+	+	
PERITONEUM SARCOMA, NOS	N	н	N	N	N	N	N	H	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	H	
LL OTHER SYSTEMS	N	Ň	N	N	N	N	N	N	N	N	N	N	N	N	N	н	N	N	N	N	N	N	N	Ņ	
LEUKEMIA,NOS INTESTINAL TRACT ADENDCA IN ADENOMATOUS POLYP		_ <u>×</u> _							<u>^</u>			x												<u> </u>	-
+: TISSUE EXAMINED MICROSCOPI -: REQUIRED TISSUE NGT EXAMIN X: TUMOR INCIDENCE N: NECROPSY, NO AUTOLYSIS, NO	٩ED	MIC						ION			: A: M: B:	NO NE AU	TIS CROP TOLY IMAL	°5Y (SI . M	, N 5 155	D H ING	IST	TIO OLO RME	GY	JBM		ED PRI	010	:0L	•

ANIMAL	19	9	9	9	9	9	9	9	91	91	9	9		91	9	91	9	9	9	9	9		91	9	9	
NUMBER	6	0 8	2	2	37	3	4	2	6	5	_7	6	4	6	2	9	2	7 8	2	ŝ	8	2	9	9 . 5	_2	TOTAL
WEEKS ON Study	0	0	ò	ġ	1	3	0	7	0	ļ	5	084	8	0	09	0	040	0	9	ò	ò	8	8	80	104	TISSUES
INTEGUMENTARY SYSTEM	4	4	I L	_ 9 1	- 41		- 4 1		41	41	-91	41	_31	41	01	.91		4		-21	- 41	_ 91	0.1	- 91	- 4	
SUBCUTANEOUS TISSUE Squamous cell carcinoma	+	+	+	+	+	N	N X	+	+	.*	٠	+	+	*	+	+	N	+	÷	+	+	+	+	+	+	50× 1
RESPIRATORY SYSTEM	1																									
LUNGS AND BRONCHI Alveolar/bronchiolar Adenoma	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	÷	+	+	+	49
TRACHEA	1	+	+	+	•	_	+	÷	+	+	+	+	+	•	+	+	+	÷	-	÷	+	+	+	+	+	46
HEMATOPOIETIC SYSTEM	+								_																_	
BONE MARROW	+	÷	+	+	+	+	÷	+	÷	+	+	+	+	+	+	÷	-	÷	+	÷	÷	+	+	-	+	48
SPLEEN	1+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	49
LYMPH NODES	-	+	-	-	-	+	_	+	+	÷	-	+	+	-	+	-	-	+	+.	-	+	+	+	+	-	25
FHYMUS	+	-	_	+	+	+	-	-	+	+	-	÷	+	-	-	+	+	+	-	+	+	-	+	-	-	26
CINCULATORY SYSTEM	+																.		-							
H_ART	+	+	+	+	+	+	+	+	+	÷	+	+	+	+	÷	÷	+	+	÷	÷	÷	+	+	+	+	49
DIGESTIVE SYSTEM	+																								-	
SALIVARY GLAND	<u> -</u>	+	+	+	+	+	+	-	+	-	+	+	+	+		-	-	÷	+	+	+	+	+	÷	+	.42
LIVER Neoplastic Nodule	ŀ	+	+	÷	+	+	+	+	+	+	+	+	+	+	+	+	÷	+	+	+	+	+	+	-	+	48 1
BILE DUCT	+	+	+	+	+	+	ŧ	+	+	+.	+	+	+	÷	+	+	+	+	+	+.	+_	+	+	-	+	48
GALLBLADDER & COMMON BILE DUCT	N.	N	N	N	N	N	N	N	Ν.	Ν.	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	50×
PANCREAS	+	+	+	+	+	+	+	+	+	+	+	+	+	÷	+	+	-	+	+_	+	÷	+	+	÷	+	47
ESOPHAGUS	+	+	+	÷	+	+ `	+	-	+	+	+	+	+	÷	+	+	÷	÷	+	÷	÷	+	÷	+	+	47
STOMACH	<u> </u>	÷	-	+	÷	+	+.	+	+	÷	+	+	+	÷	+	+	+	+	+	+	÷	+	+	+	÷	48
SMALL INTESTINE	L.	+	+	+	+	÷	+	+	+	+	+	+	+	+	÷	+	+	+	÷	-	+	+	+	+	÷	45
LARGE INTESTINE	+	+	-	+	+	+	+	+	+	÷	÷	+	+	+	÷	÷	÷	+	÷	+	+	+	+	-	+	45
URINARY SYSTEM	+	-																							+	
KIDNEY	+	÷	+	_+	+	+	+	+	+	+	+	+	+	+	+	+	÷	+	+	+	+	+	÷	+	+	49
URINARY BLADDER	+	+	-	+	+	+	÷	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	46
ENDOCRINE SYSTEM	+																								-†	
PITUITARY	+	-	+	+	+	-	-	÷	+	-	+	+	-	+	+	÷	-	-	÷	-	+	÷	÷	+	+	34
CARCINOMA,NOS Chromophobe, Adenoma				x	x									x												6
ACIDOPHIL CARCINOMA	+		_ <u>×</u> _						 ,										+	+		+	+	+	+	· · · ·
ADRENAL Cortical Adenoma	Ļ	+	+		+	+	•	+	+	•		-	+	+	+	+	+	+	-	-	+		-	-	+	482
THYROID Follicular-cell Adenoma C-cell Adenoma	Ľ	+	+	+	+	+	+ 	•	×	+	+	•	•	+	*	+	+	-	-	+	+	•	+	+	+	45
PARATHYROID	+	-	-	÷	+	+	-	-	-	-	-	-	÷	+	÷	+	÷	-	-	-	+	+	-	-	-	20
REPRODUCTIVE SYSTEM	+			_																					-+	
MAMMARY GLAND Adenoma, nos Fibroadenoma	+	+ ×	+	N	+	N	+	+	+	+ x	+	+ x	+	+ x	+ x	N	N	N	÷	N	N	+ x	+	N	M	50× 1 12
UTERUS	+	+	-	+	+	+	+	+	+	+	+	+	+	+	+	÷	+	+	+	+	+	+	+	+	+	48
ADENOMA, NOS Adenocarcinoma, Nos Adenoca in Adenomatous Polyp		x													x											2
ENDOMETRIAL STROMAL POLYP	<u> </u>				×								~ <u></u>									<u> </u>				
GRANULOSA-CELL TUMOR	+	+	-	-	+	+	+	+	+	+	•	+	•	•	*	+	+	*	*	+	+	+	•	+	+	47
NERVOUS SYSTEM																										
BRAIN Squamous cell carcinoma, metastat	+	+	+	+	+	+	*	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	50,
BODY CAVITIES	[
PERITONEUM Sarcoma, Nos	н	N	N	N	N	N	N	N	н	N	N	N	N	N	N	N	N	N	N	N	N	N	ĸ	N	N	50× 1
ALL OTHER SYSTEMS																										
MULTIPLE ORGANS NOS LEUKEMIA,NOS	N	N	N	N X	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N .	N	N	N	N	N	N	50× 4
INTESTINAL TRACT ADENOCA IN ADENOMATOUS POLYP													_									_				1

TABLE A4. FEMALE RATS: TUMOR PATHOLOGY (CONTINUED) LOW DOSE

* ANIMALS NECROPSIED

 +:
 TISSUE EXAMINED MICROSCOPICALLY
 :
 NO TISSUE INFORMATION SUBMITTED

 -:
 REQUIRED TISSUE NOT EXAMINED MICROSCOPICALLY
 C:
 NECROPSY, NO HISTOLOGY DUE TO PROTOCOL

 X:
 TUMOR INCIDENCE
 A:
 AUTOLYSIS

 N:
 NECROPSY, NO AUTOLYSIS, NO MICROSCOPIC EXAMINATION
 M:
 ANIMAL MISSING

 B:
 NO NECROPSY PERFORMED

TABLE A4.

INDIVIDUAL ANIMAL TUMOR PATHOLOGY OF FEMALE RATS IN THE 2-YEAR **STUDY OF TRICHLOROETHYLENE**

HIGH DOSE

ANTMAL	1 01	01	01		01			01	01		01	0	01	01	81	8	8	8	81	8	81	8	8	8	8
ANIMAL NUMBER	0 1	2	0 8		1	1	1	1	2	2 8	3	3	3	4	6	8	8 5 5	5	6	8	8 7 4	8	8	8	9
WEEKS ON Study	0	1	6	0	0	1	1	8	0	0	0	0	9	6	1	1	1	07	1	1	05	8	84	8	0
RESPIRATORY SYSTEM			91		31	_21		<u> </u>	01		_3	21				- 21	-41	_61							1
LUNGS AND BRONCHI ADENGCARCINOMA, NOS, METASTATIC Alveolar/Bronchiolar Adengma Alveolar/Bronchiolar Carcinoma	+	+	+	+	+	+	+	+ 	+	+	+	+	+	+	+	+	+	* ×	+	+	+	+ X	*	+	+
TRACHEA	+	+	+	+	+	+	+	÷	+	+	+	÷	+	+	٠	-	+	+	+	+	+	+	+	+	+
HEMATOPOIETIC SYSTEM	+								_																-
BONE MARROW	+	+	+	+	+	+	+	+	+	<u>+</u>	+	+	+	+	÷	t_	+	+	+	+	-	+	+	+	+
SPLEEN	+	t_	+	<u>+</u>	+	+	-	+	+	+	+	+	+	+	+	+_	+	+	+	+	+	+	+	-	+
LYMPH NODES	1-			+	-	+	_	+	+			-	+	+	-	-	+	+	+	+	t.	+_	+	+	+
THYMUS	-	+	-	+	-	-	-	-	-	+	-	-	+	÷	-	-	+	-	-	+	+	-	~	+	+
CI. CULL FORY SYSTEM	+					••••																			-1
HTART VDENOCARCINOMA, NOS, METASTATIC	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	×	+	٠
DIGESTIVE SYSTEM	T																					_			1
SALIVARY GLAND	++	+	+	+	+	+	+	+	+	-	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+
LIVER Neoplastic Nodule	+	* ×	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+
BILE DUCT	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	<u>+</u>	+	+
GALLBLADDER & COMMON BILE DUCT	N	N	N	N	N	N	N	N	N.	N	Ν.	N	N	N_	N	N_	N.	_N_	N.	N	N	N_	N	N	N
PANCREAS	+	+	+	÷	+	+	+	+	+	+	+	+ .	+	+	+	+	+	.+	+	+	+	+_	+	_	t
ESOPHAGUS	+	+_	+	+	+	+	+	+	+	+	+	+	+	+	+	+	÷	+	+_	+	<u>+</u>	+	+	+	+
STDMACH SQUAMOUS CELL PAPILLOMA	+	+	+	+	-	+	-	+	+	٠	+	+	+	+	+	+	* ×	+	+	÷	+	+	+	-	+
SMALL INTESTINE	+	+	+	+	-	+	+	*	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+		+
LARGE INTESTINE	+	+	÷	+	+	-	+	+	+	-	+	+	+	+	+	+	+	+	-	+	+	+	+	-	-]
URINARY SYSTEM	+																								
KIDNEY Tubular-cell adenocarcinoma	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+		+	+
URINARY BLADDER	+	+	+	+	+	+	+	+	+	+	+	+	+	+	-	+	+	+	+	+	+	-	+		+
ENDOCRINE SYSTEM																	-								
PITUITARY Chromophobe Adenoma	1×	×	+	+	+	+	-	-	+	+	<u>_x</u>	+	<u>*</u>	+	+	+	+	• •	+	+	-	+	+	+	+
ADRENAL Cortical Adenoma Pheochromocytoma	+	+	+	× ×	+	+	+	+	+	+	*	+	+	+	*	+									-
THYROID Follicular-cell Adenoma C-cell Adenoma	+	+	+	+	+	+	* ×	+	+	+ x.	+	+	+	+	+	+	+	-	+	+	+	+	+	+	+
PARATHYRDID	+	+	+	+	-	+	-		+	-	-	-	+	+	÷	+	-	-	+	+	+	÷	+	+	-
REPRODUCTIVE SYSTEM	+																								
MAMMARY GLAHD Adenoma, Nos Adenocarcinoma, Nos Firradenoma	+	÷	+	+	+ ×.	٠	N	N	+	N	+	+	÷	+	N	N	N	+	N	+	+	+	+ ×	+	+
UTERUS ENDOMETRIAL STROMAL POLYP ENDOMETRIAL STROMAL SARCOMA	+ X	+	+	+	+	+	*	+	+	+	+	+	×	+	×	+	+	+	+	+	+	+	+	-	+
OVARY	+	+	٠	+	÷	+	+	+	+	+	+	+	+	÷	-	+	+	+	+	+	+	+	+	-	+
NERVOUS SYSTEM	+																		_						-
BRAIN Astrocytoma	+	+	+	+	+	÷	+	+	+	+	•	+	+	+	+	+	+	+	+	+	+	+	+	+	+
ALL OTHER SYSTEMS	1												_												
MULTIPLE ORGANS NOS Leukemia, Nos	N	N	N X	N	N	N	N X	N	N X	N	N X	N	N	N	N	N	н	N	N X	N	н	N	N	N	N

+: TISSUE EXAMINED MICROSCOPICALLY -: REQUIRED TISSUE NOT EXAMINED MICROSCOPICALLY X: TUMOR INCIDENCE H: NECROPSY, NO AUTOLYSIS, NO MICROSCOPIC EXAMINATION

: NO TISSUE INFORMATION SUBMITTED C: NECROPSY, NO HISTOLOGY DUE TO PROTOCOL A: AUTOLYSIS ATTALA MISSING B: NO NECROPSY PERFORMED

ANIMAL NUMBER	89	9	9	2	1	1	2	2	3	94	5	5	6	6	7	7	2	2	8	8	8	9 8 7	8	9 9	9	TOTAL
WEEKS ON Study	04	9	1	1 0 3	1 0 3	0 5 2	0 9	0 8 3	103		8	1 0 3	10	1 0 3	0	0	0	8	0 3 8	0 9 8	0	0	8 0 7 6	04	0 6 8	TISSUE
RESPIRATORY SYSTEM																			-							
LUNGS AND BRONCHI Adenocarcinoma, nos, metastatic Alveolar/Bronchiolar Adenoma Alveolar/Bronchiolar Carcinoma	+	+	+	+	+	•	+	+	+	•	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	50 1 2 1
TRACHEA	+	+	÷	+	+	+	+	+	+	+	+	÷	·+	+	-	-	+	+	-	+	+	+	+	÷	-	45
HEMATOPOIETIC SYSTEM	1		_					_											-					_		
BONE MARROW	+	+	+	+	+	+	÷	+	_t	+	+	+	+	+	+	+	+	+	-	+	+	+	A	-	+	46
SPLEEN	+-+	+	+_	_+	+	+	÷	+	+	+	+	+	-	+	+	+	ŧ	-	-	÷	+	+	A	+	+	44
LYMPH NODES	<u> -</u>	+		-	÷	-	-	+	+	-	+	-	+	-	+	+	-	+	-	-	-	+	A		+	26
"HYMUS	+	-	+	-	÷	+	÷	-	-	-	+	-	-	÷	-	+	+	-	-	-	-	+	A	+	+	22
CTROULATORY SYSTEM	1							_					_													
HEART Adenocarcinoma, nos, metastatic	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	÷	+	+	+	+	+	+	+	+	⁵⁰ ,
DIGESTIVE SYSTEM	1																									
SALIVARY GLAND	++	+	+	+	+	-	+	+	+	÷	+	+	+	+	+	+	+	+	-	÷	ŧ	÷	Α.	+	÷	46
LIVER Neoplastic Nodule	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	-	+	+	.+	A	+	+	48 1
BILE DUCT	<u> </u>	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	-	+	+	÷	A	<u>+</u>	-+	48
GALLBLADDER & COMMON BILE DUCT	<u> </u>	<u>N</u>	<u>N</u>	N	<u>N</u>	N	Ν.	N	N	<u>N</u>	N	N	Ν	N	N	N	N	N.,	<u>N_</u>	N	N	N	N	N	<u>– H</u>	<u>50×</u>
PANCREAS	+ +	+	+	+	+	+	-	+	-	+	ŧ	+	+	+	+	+	+	-	-	+	+	+	Α.		_+	44
ESOPHAGUS	+-+-	+	+	+	+	+	ŧ	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	50
STOMACH Squamous cell Papilioma	+	+	+	+	+	+	+	+	+	-	+	+	+	+	+	+	+	-	-	+`	+	+	٨	+	+	43
SMALL INTESTINE	++-	+	+	+	+	+	+	+	+	+	+	.+	+	+	+	+	+	-	.=	+	+	+	٨	+	-+	45
LARGE INTESTINE	+	+	+	+	+	+	+	÷	+	-	+	+	+	+	+	+	+	+	-	-	+	-	A	+	+	40
URINARY SYSTEM														÷												
KIDNEY TUBULAR-CELL ADENOCARCINOMA	+	+	+	+	+	+	* x	+	+	+	+	+	+	+	+	+	+	+	-	+	+	+	A	+	+	48 1
URINARY BLADDER	+	+	+	+	+	+	+	+	+	+	+	÷	+	+	+	+	+	-	-	+	+	+	A	+	+	44
ENDOCRINE SYSTEM																		_								
PITUITARY Chromophobe adenoma	+	+	+	+	-	-	+	+	-	+	+	-	+	+	*	+	+	+	-	+	+	*	A	+	+	41 6_
ADRENAL Cortical Adenoma Pheochromocytoma	+	+	+	+	+	+	+	+	+	+	+	+	+	-	•	+ x	*	+	-	+	+	+	A	+	+	47 3 2
THYROID FollIcular-Cell Adenoma C-Cell Adenoma	+	+	-	+	+	+	+	+	+	+	+	+	+	+	-	-	+	+	-	+	+	+	+	+	-	44 1
PARATHYROID	-	+	-	_	+	_	•	+	+	+	+	-		_	_	_	+	+		-	_	+	A	_	_	26
REPRODUCTIVE SYSTEM	<u> </u>						•																			
MAMMARY GLAND Adenoma, Nos Adenocarcinoma, Nos	н	+	+	N	* ×	N	+	+	+	+	+	+	H	H	+	+	÷	+	Ħ	÷	÷	H	H	H	+	50× 1
FIBROADENOMA							X		Χ.			х	_												-	4
UTERUS ENDOMETRIAL STROMAL POLYP ENDOMETRIAL STROMAL SARCOMA	+	+	+	+	+	+	+	+	-	+	+	+	+	*	÷	*	+	*	-	+	•	+	A	+	+	46
ÖVARY	+	+	+	+	÷	+	+	+	-	+	+	÷	+	+	+	-	+	+	-	÷	÷	+	A	+	+	44
ERVOUS SYSTEM													_												-+	
BRAIN Astrocytoma	+	* ×	÷	+	+	+	+	+	+	+	+	+	+	+	+	+	÷	+	+	+	+	+	A	÷	+	49
	+																								-	· · · ·
ALL OTHER SYSTEMS																										

TABLE A4. FEMALE RATS: TUMOR PATHOLOGY (CONTINUED) HIGH DOSE

* ANIMALS NECROPSIED

 ALS RECOUSTED
 : NO TISSUE INFORMATION SUBMITTED

 +: TISSUE EXAMINED MICROSCOPICALLY
 : NO TISSUE INFORMATION SUBMITTED

 -: REQUIRED TISSUE NOT EXAMINED MICROSCOPICALLY
 C: NECROPSY, NO HISTOLOGY DUE TO PROTOCOL

 X: TUMOR INCIDENCE
 AUTOLYSIS

 N: NECROPSY, NO AUTOLYSIS, NO MICROSCOPIC EXAMINATION
 M: ANIMAL MISSING

 B: NO NECROPSY PERFORMED
 B: NO NECROPSY PERFORMED

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Trichloroethylene

APPENDIX B

SUMMARY OF THE INCIDENCE OF NEOPLASMS IN MICE ADMINISTERED TRICHLOROETHYLENE IN CORN OIL BY GAVAGE

TABLE B1.

SUMMARY OF THE INCIDENCE OF NEOPLASMS IN MALE MICE ADMINISTERED TRICHLOROETHYLENE IN CORN OIL BY GAVAGE

	VEHICLE Control	DOSED GROUP
NIMALS INITIALLY IN STUDY NIMALS NECROPSIED NIMALS EXAMINED HISTOPATHOLOGICALLY	50 50 49	50 50 50
INTEGUMENTARY SYSTEM		
NONE		
RESPIRATORY SYSTEM		
<pre>#LUNG HEPATOCELLULAR CARCINOMA, METAST ALVEOLAR/BRONCHIOLAR ADENOMA ALVEOLAR/BRONCHIOLAR CARCINOMA</pre>	(49) 1 (2%) 4 (8%) 3 (6%)	(50) 5 (10%) 5 (10%) 1 (2%)
EMATOPOIETIC SYSTEM		
<pre>#BRAIN/MENINGES Malignant reticulosis</pre>	(48) 1 (2%)	(49)
*CRANIAL NERVE Malignant reticulosis	(50) 1 (2%)	(50)
<pre>*MULTIPLE ORGANS MALIGNANT LYMPHOMA, NOS MALIG.IYMPHOMA, UNDIFFER-TYPE MALIG.LYMPHOMA, LYMPHOCYTIC TYPE MALIG.IYMPHOMA, HISTIOCYTIC TYPE MALIGNANT LYMPHOMA, MIXED TYPE PLASMA-CELL TUMOR</pre>	(50) 1 (2%) 3 (6%) 2 (4%) 2 (4%) 2 (4%) 1 (2%)	(50) 3 (6%) 5 (10%) 2 (4%) 3 (6%)
#SPLEEN Malignant Lymphoma, mixed type	(48) 1 (2%)	(42)
CIRCULATORY SYSTEM		
#LIVER HEMANGIOSARCOMA	(48)	(50)

NUMBER OF ANIMALS WITH TISSUE EXAMINED MICROSCOPICALLY * NUMBER OF ANIMALS NECROPSIED

TABLE B1. MALE MICE: NEOPLASMS (CONTINUED)

·	VEHICLE Control	DOSED GROUP	
DIGESTIVE SYSTEM			
#LIVER Hepatocellular adenoma Hepatocellular carcinoma	(48) 7(15%) 8(17%)	(50) 14 (28%) 31 (62%)	
#STOMACH Squamous cell carcinoma	(48) 1 (2%)	(47)	
URINARY SYSTEM			
#KIDNEY TUBULAR-CELL ADENOMA TUBULAR-CELL ADENOCARCINOMA	(49) 1 (2%)	(50) 1 (2%)	
ENDOCRINE SYSTEM			
#ADRENAL Cortical Adenoma Pheochromocytoma	(32) 1 (3%) 1 (3%)	(36)	
REPRODUCTIVE SYSTEM None			
NERVOUS SYSTEM			
#BRAIN/MENINGES Sarcoma, Nos	(48) 1 (2%)	(49)	
#BRAIN NEOPLASM, NOS, MALIGNANT	(48)	(49) 1 (2%)	
SPECIAL SENSE ORGANS			
*HARDERIAN GLAND ADENOMA, NOS Papillary Adenoma Acinar-Cell Adenoma	(50)	(50) 2 (4%) 1 (2%) 1 (2%)	
MUSCULOSKELETAL SYSTEM			
NONE			

NONE

NUMBER OF ANIMALS WITH TISSUE EXAMINED MICROSCOPICALLY * NUMBER OF ANIMALS NECROPSIED

TABLE B1. MALE MICE: NEOPLASMS (CONTINUED)

	VEHICLE Control	DOSED GROUP	
BODY CAVITIES			
NONE			
ALL OTHER SYSTEMS			
<pre>*MULTIPLE ORGANS CARCINOMA,NOS</pre>	(50)	(50) 1 (2%)	
ANIMAL DISPOSITION SUMMARY			
ANIMALS INITIALLY IN STUDY Natural Deatha Moribund Sacrifice	50 14 5	50 28 3	
SCHEDULED SACRIFICE ACCIDENTALLY KILLED TERMINAL SACRIFICE ANIMAL MISSING	2 29	3 16	
a INCLUDES AUTOLYZED ANIMALS			
TUMOR SUMMARY			
TOTAL ANIMALS WITH PRIMARY TUMORS* . TOTAL PRIMARY TUMORS	33 42	45 71	
TOTAL ANIMALS WITH BENIGN TUMORS Total Benign Tumors	13 14	22 23	
TOTAL ANIMALS WITH MALIGNANT TUMORS TOTAL MALIGNANT TUMORS	25 27	39 48	
TOTAL ANIMALS WITH SECONDARY TUMORS# Total secondary tumors	1 1	5 5	
TOTAL ANIMALS WITH TUMORS UNCERTAIN- Benign or Malignant Total Uncertain Tumors	1 1		
TOTAL ANIMALS WITH TUMORS UNCERTAIN- Primary or metastatic Total Uncertain Tumors			
<pre> PRIMARY TUMORS: ALL TUMORS EXCEPT SE SECONDARY TUMORS: METASTATIC TUMORS </pre>	CONDARY TUMO OR TUMORS IN	RS IVASIVE INTO AN ADJACENT OR	GAN

TABLE B2.

SUMMARY OF THE INCIDENCE OF NEOPLASMS IN FEMALE MICE ADMINISTERED TRICHLOROETHYLENE IN CORN OIL BY GAVAGE

ANIMALS INITIALLY IN STUDY 50 50 ANIMALS INSTRUCTORY STEP ANIMALS EXAMINED HISTOPATHOLOGICALLY 50 49 ANIMALS EXAMINED HISTOPATHOLOGICALLY 58 49 INTEGUMENTARY SYSTEM NONE RESPIRATORY SYSTEM 4LUNG 4LVEOLAR/BRONCHIOLAR ADENOMA 1 (2%) (48) ALVEOLAR/BRONCHIOLAR ADENOMA 1 (2%) 48 ALVEOLAR/BRONCHIOLAR CARCINOMA 1 (2%) 48 HEMATOPOIETIC SYSTEM 4BRAIN/MENINOES (48) (48) MALIGNANT RETICULOSIS 1 (2%) (48) MALIGNANT RETICULOSIS (48) (49) MALIGNANT RETICULOSIS 1 (2%) 2 (4%) MALIGNANT RETICULOSIS (48) (49) MALIGNANT KUMPHOMA, NOS (48) (49) MALIGNANT LYMPHOMA, NOS (48) (49) MALIGNANT LYMPHOMA, NOS (48) (49) MALIGNANT LYMPHOMA, NOS (48) (49) MALIGNANT LYMPHOMA, NOS (102X) 2 (4X) MALIGNANT LYMPHOMA, NOS (102X) 2 (4X) MALIGNANT LYMPHOMA, NOS (102X) 2 (4X) MALIGNANT LYMPHOMA, NOS (102X) (48) HEMANGIOMA (48) (49) HEMANGIOMA (47) (47) SULATORY SYSTEM ADJOELLULAR ADENOMA (47) (47) SULATORY SYSTEM ALIGNANT CHAR CARCINOMA (47) (47) SULATORY SYSTEM ADJOELLULAR ADENOMA (47) (47) SULATORY SYSTEM ADJOELLULAR ADENOMA (47) (47) SULATORY SYSTEM ALIGNANT CELL PAFILLOMA (47) (47) SULATORY SYSTEM ADJOELLULAR ADENOMA (47) (47) (47) SULATORY SYSTEM SITOPACH SULATORY SCILL CARCINOMA (47) (47) SULATORY SCILL PAFILLOMA (47) (47) SULATORY SCILL PAFILLOM		VEHICLE Control	DOSED Group	
NONE RESPIRATORY SYSTEM #LUNG ALUEOLAR/BRONCHIOLAR ADENOMA ALUEOLAR/BRONCHIOLAR CARCINOMA ALUEOLAR/BRONCHIOLAR CARCINOMA ALUEOLAR/BRONCHIOLAR CARCINOMA ALUEOLAR/BRONCHIOLAR CARCINOMA MALIGNART RETICULOSIS (48) (48) (48) (48) (48) (48) (48) (48) (48) (48) (49) MALIGNART RETICULOSIS (48) (49) MALIGNART LYMPHOMA, NOS (48) (49) MALIGLYMPHOMA, UNDIFFER-TYPE (48) (49) MALIGLYMPHOMA, HISTIOCYTIC TYPE (48) (49) MALIGLYMPHOMA, HISTIOCYTIC TYPE (48) (41) (42) HSPOLEN MALIGNART LYMPHOMA, NOS (48) (42) (48) (49) (48) (48) (49) (48) (49) (48) (49) (48) (49) (48) (49) (48) (49) (48) (49) (48) (49) (48) (49) (48) (49) (48) (49) (48) (49) (48) (49) (48) (49) (48) (49) (48) (49) (49) (48) (49) (49) (48) (49) (49) (48) (49) (49) (48) (49) (48) (49) (49) (48) (49) (49) (48) (49) (49) (48) (49) (49) (49) (49) (49) (48) (49) (49) (49) (49) (49) (49) (49) (49) (49) (48) (49)	ANIMALS MISSING ANIMALS NECROPSIED	2 48	1 49	
#UUNG (48) (48) ALVEDLAR/BRONCHIDLAR CARCINOMA 1 (2%) HEMATOPOIETIC SYSTEM #BRAIN/MENINGES (48) MALIGNANT RETICULOSIS 1 (2%) *KCRANIAL NERVE (48) MALIGNANT RETICULOSIS 1 (2%) *MULTIPLE ORGANS (48) MALIGNANT LYMPHOMA, NOS 1 (2%) MALIGLYMPHOMA, UNDIFFER-TYPE 1 (2%) MALIGLYMPHOMA, HISTIOCYTIC TYPE 3 (6%) MALIGLYMPHOMA, HISTIOCYTIC TYPE 3 (6%) MALIGLYMPHOMA, MIXED TYPE 3 (6%) MALIGLYMPHOMA, HISTIOCYTIC TYPE 1 (2%) #STORMONCYTIC LUCKEMIA 1 (2%) #LIVER (48) MALIGLUMPHOMA, HISTIOCYTIC TYPE 1 (2%) MALIGLYMPHOMA, HISTIOCYTIC TYPE 1 (2%) MALIGLYMPHOMA, HISTIOCYTIC TYPE 1 (2%) MALIGLYMPHOMA, HISTIOCYTIC TYPE 1 (2%) <				
ALVEDLAR/BRONCHIDLAR ADENOMA 4 (8%) ALVEDLAR/BRONCHIDLAR CARCINOMA 1 (2%) HEMATOPOIETIC SYSTEM #BRAIN/MENINGES (48) MALIGNANT RETICULOSIS 1 (2%) *CRANIAL NERVE (48) MALIGNANT RETICULOSIS 1 (2%) *MULTIPLE ORGANS (48) MALIGNANT RETICULOSIS 1 (2%) *MULTIPLE ORGANS (48) MALIG. LYMPHOMA, UNDIFFER-TYPE 1 (2%) MALIG. LYMPHOMA, HISTOCYTIC TYPE 3 (6%) MALIG.LYMPHOMA, HISTOCYTIC TYPE 3 (6%) MALIGLAWNT LYMPHOMA, MIXED TYPE 3 (6%) MALIGNANT LYMPHOMA, NOS 1 (2%) #SPLEEN (48) MALIGLYMPHOMA, HISTIOCYTIC TYPE 1 (2%) #LIGELYMPHOMA, HISTIOCYTIC TYPE 1 (2%) *BRAIGLAT SYSTEM (48) *ALUGLATORY SYSTEM (48) *ADIPOSE TISSUE (48) HEFATOCELLULAR ADENOMA 4 (8%) HEFATOCELLULAR CARCINOMA 2 (4%) *BROMACH 2 (4%) *SQUAMOUS CELL PAPILLOMA (47)	RESPIRATORY SYSTEM			
#BRAIN/MENINGES (48) (48) MALIGNANT RETICULOSIS 1 (2%) *CRANIAL NERVE (48) (49) MALIGNANT RETICULOSIS 1 (2%) *MULTIPLE ORGANS (48) (49) MALIGNANT RETICULOSIS 1 (2%) *MULTIPLE ORGANS (48) (49) MALIG.LYMPHOMA, NDS 1 (2%) 2 (4%) MALIG.LYMPHOMA, LYMPHOMA, MINEDCYTIC TYPE 1 (2%) 2 (4%) MALIG.LYMPHOMA, HISTIOCYTIC TYPE 3 (6%) 2 (4%) MALIGNANT LYMPHOMA, MIXED TYPE 3 (6%) 2 (4%) MALIGNANT LYMPHOMA, MIXED TYPE 3 (6%) 2 (4%) MALIGNANT LYMPHOMA, MIXED TYPE 3 (6%) 1 (2%) #SPLEEN (47) (48) 1 (2%) #LIVER (48) (49) 1 (2%) MALIG.LYMPHOMA, HISTIOCYTIC TYPE 1 (2%) 1 (2%) 1 (2%) CIRCULATORY SYSTEM (48) (49) 1 (2%) MALIGNANA 1 (2%) 1 (2%) 1 (2%) DIGESTIVE SYSTEM (48) (49) 1 (2%) #LIVER (48) (46) 16 (33%)	ALVEOLAR/BRONCHIOLAR ADENOMA			
MALIGNANT RETICULOSIS 1 (2%) XCRANIAL NERVE (48) (49) MALIGNANT RETICULOSIS 1 (2%) XMULTIPLE ORGANS (48) (49) MALIGNANT LYMPHOMA, NOS 1 (2%) 2 (4%) MALIG.LYMPHOMA, UNDIFFER-TYPE 1 (2%) 2 (4%) MALIG.LYMPHOMA, LYMPHOYIC TYPE 1 (2%) 2 (4%) MALIG.LYMPHOMA, HISTIOCYTIC TYPE 3 (6%) 2 (4%) MALIGNANT LYMPHOMA, HISTIOCYTIC TYPE 3 (6%) 2 (4%) MALIGNANT LYMPHOMA, NOS 1 (2%) 2 (4%) MALIGNANT LYMPHOMA, NOS 1 (2%) 2 (4%) #SPLEEN (47) (48) (49) MALIG.LYMPHOMA, HISTIOCYTIC TYPE 1 (2%) (48) (49) MALIG.LYMPHOMA, HISTIOCYTIC TYPE 1 (2%) (48) (49) MALIG.LYMPHOMA, HISTIOCYTIC TYPE 1 (2%) (49) (49) MALIGNANT LYMPHOMA, HISTIOCYTIC TYPE 1 (2%) (49) (49) MALIGL.LYMPHOMA, HISTIOCYTIC TYPE 1 (2%) (49) (49) MALIGL.LYMPHOMA, HISTIOCYTIC TYPE 1 (2%) (49) (49) MEDATOCELLULAR ADENOMA 2 (4%) <td>HEMATOPOIETIC SYSTEM</td> <td></td> <td></td> <td></td>	HEMATOPOIETIC SYSTEM			
MALIGNANT RETICULOSIS 1 (2%) *MULTIPLE ORGANS 1 (2%) MALIGNANT LYMPHOMA, NOS 1 (2%) MALIG.LYMPHOMA, UNDIFFER-TYPE 1 (2%) MALIG.LYMPHOMA, LYMPHOCYTIC TYPE 1 (2%) MALIG.LYMPHOMA, LYMPHOCYTIC TYPE 1 (2%) MALIGNANT LYMPHOMA, HISTIOCYTIC TYPE 1 (2%) MALIGNANT LYMPHOMA, MIXED TYPE 3 (6%) MALIGNANT LYMPHOMA, NOS 1 (2%) *SPLEEN (47) MALIGNANT LYMPHOMA, NOS 1 (2%) *SPLEEN (47) MALIGNANT LYMPHOMA, HISTIOCYTIC TYPE 1 (2%) *SPLEEN (47) MALIGNANT LYMPHOMA, HISTIOCYTIC TYPE 1 (2%) *IVER (48) MALIGLYMPHOMA, HISTIOCYTIC TYPE 1 (2%) CIRCULATORY SYSTEM (48) *ADIPOSE TISSUE (48) HEMANGIOMA 1 (2%) DIGESTIVE SYSTEM (48) *LIVER (48) HEPATOCELLULAR ADENOMA 4 (8%) HEPATOCELLULAR CARCINOMA 2 (4%) *STOMACH (47) SQUAMOUS CELL PAPILLOMA 2 (4%)			(48)	
MALIGNANT LYMPHOMA, NOS 1 (2%) 2 (4%) MALIG.LYMPHOMA, UNDIFFER-TYPE 1 (2%) 3 (6%) MALIG.LYMPHOMA, HISTIOCYTIC TYPE 1 (2%) 2 (4%) MALIGNANT LYMPHOMA, HISTIOCYTIC TYPE 1 (2%) 2 (4%) MALIGNANT LYMPHOMA, MIXED TYPE 3 (6%) 2 (4%) MALIGNANT LYMPHOMA, MIXED TYPE 3 (6%) 2 (4%) MALIGNANT LYMPHOMA, MIXED TYPE 3 (6%) 2 (4%) MALIGNANT LYMPHOMA, MOS 1 (2%) (48) #SPLEEN (47) (48) MALIG.LYMPHOMA, HISTIOCYTIC TYPE 1 (2%) #LIVER (48) (49) MALIG.LYMPHOMA, HISTIOCYTIC TYPE 1 (2%) CIRCULATORY SYSTEM (48) (49) #ADIPOSE TISSUE (48) (49) HEMANGIOMA 1 (2%) (49) HEMANGIOMA 1 (2%) (49) HEPATOCELLULAR ADENOMA 4 (8%) 16 (33%) HEPATOCELLULAR CARCINOMA 2 (4%) 13 (27%) #STOMACH (47) (47) SQUAMOUS CELL PAPILLOMA 2 (4%) 2 (4%) <td></td> <td></td> <td>(49)</td> <td></td>			(49)	
MALIGNANT LYMPHOMA, NOS 1 (2%) #LIVER (48) (49) MALIG.LYMPHOMA, HISTIOCYTIC TYPE 1 (2%) CIRCULATORY SYSTEM (48) (49) *ADIPOSE TISSUE (48) (49) HEMANGIOMA 1 (2%) (49) VIGESTIVE SYSTEM (48) (49) *LIVER (48) (49) HEPATOCELLULAR ADENOMA 4 (8%) 16 (33%) HEPATOCELLULAR CARCINOMA 2 (4%) 13 (27%) #STOMACH (47) (47) SQUAMOUS CELL PAPILLOMA (47) (47)	MALIGNANT LYMPHOMA, NOS MALIG.LYMPHOMA, UNDIFFER-TYPE MALIG.LYMPHOMA, LYMPHOCYTIC TYPE MALIG.LYMPHOMA, HISTIOCYTIC TYPE MALIGNANT LYMPHOMA, MIXED TYPE	1 (2%) 1 (2%) 1 (2%)	2 (4%) 3 (6%) 3 (6%) 2 (4%) 2 (4%)	
MALIG.LYMPHOMA, HISTIOCYTIC TYPE 1 (2%) CIRCULATORY SYSTEM (48) (49) HEMANGIOMA 1 (2%) VIGESTIVE SYSTEM *LIVER (48) (49) HEPATOCELLULAR ADENOMA 4 (8%) 16 (33%) HEPATOCELLULAR CARCINOMA 2 (4%) 13 (27%) *STOMACH (47) (47) SQUAMDUS CELL PAPILLOMA 2 (4%) 2 (4%)			(48)	
<pre>*ADIPOSE TISSUE HEMANGIOMA (48) (49) 1 (2%) IGESTIVE SYSTEM #LIVER (48) (49) HEPATOCELLULAR ADENOMA (48) (49) HEPATOCELLULAR ADENOMA (48%) 16 (33%) HEPATOCELLULAR CARCINOMA 2 (4%) 13 (27%) #STOMACH (47) (47) SQUAMOUS CELL PAPILLOMA (47) (47)</pre>		(48)		
HEMANGIOMA 1 (2%) DIGESTIVE SYSTEM #LIVER (48) (49) HEPATOCELLULAR ADENOMA 4 (8%) 16 (33%) HEPATOCELLULAR CARCINOMA 2 (4%) 13 (27%) #STOMACH (47) (47) SQUAMOUS CELL PAPILLOMA 2 (4%)	IRCULATORY SYSTEM			
#LIVER (48) (49) HEPATOCELLULAR ADENOMA 4 (8%) 16 (33%) HEPATOCELLULAR CARCINOMA 2 (4%) 13 (27%) #STOMACH (47) (47) (47) SQUAMDUS CELL PAPILLOMA 2 (4%) 2 (4%)			(49)	
HEPATOCELLULAR ADENOMA 4 (8%) 16 (33%) HEPATOCELLULAR CARCINOMA 2 (4%) 13 (27%) #STOMACH (47) (47) SQUAMOUS CELL PAPILLOMA 2 (4%) 2 (4%)	IGESTIVE SYSTEM			
SQUAMOUS CELL PAPILLOMA 2 (4%)	HEPATOCELLULAR ADENOMA	(48) 4 (8%) 2 (4%)	(49) 16 (33%) 13 (27%)	
	SQUAMOUS CELL PAPILLOMA	(47)	2 (4%)	
	NONE			

NUMBER OF ANIMALS WITH TISSUE EXAMINED MICROSCOPICALLY
4 NUMBER OF ANIMALS NECROPSIED

TABLE B2. FEMALE MICE: NEOPLASMS (CONTINUED)

	VEHICLE Control	DOSED GROUP
ENDOCRINE SYSTEM		-
#PITUITARY Chromophobe Adenoma	(27) 3 (11%)	(28)
#ADRENAL Cortical Adenoma Pheochromocytoma	(36) 1 (3%) 2 (6%)	(37)
#ADRENAL/CAPSULE Sarcoma, nos	(36)	(37) 1 (3%)
#THYROID Follicular-cell adenoma	(33)	(31) 1 (3%)
REPRODUCTIVE SYSTEM		
*MAMMARY GLAND FIBROSARCOMA	(48) 1 (2%)	(49)
#UTERUS SARCOMA, NOS LEIOMYOMA ENDOMETRIAL STROMAL POLYP NEURILEMOMA, MALIGNANT	(47) 1 (2%)	(49) 1 (2%) 1 (2%) 2 (4%)
#OVARY Adenocarcinoma, nos Papillary adenoma	(27) 1 (4%)	(31) 1 (3%)
NERVOUS SYSTEM		
#BRAIN/MENINGES MENINGIOMA	(48)	(48) 1 (2%)
SPECIAL SENSE ORGANS		
*HARDERIAN GLAND Adenoma, Nos	(48)	(49) 3 (6%)
MUSCULOSKELETAL SYSTEM		·
NONE		
BODY CAVITIES		
NONE		
ALL OTHER SYSTEMS		
*MULTIPLE ORGANS Squamous cell carcinoma, metasta	(48)	(49) 1 (2%)
SITE UNKNOWN NEOPLASM, NOS	1	
ANIMAL DISPOSITION SUMMARY		
ANIMALS INITIALLY IN STUDY **NATURAL DEATH@ **MORIBUND SACRIFICE SCHEDULED SACRIFICE ACCIDENTALLY KILLED TERMINAL SACRIFICE ANIMAL MISSING	50 12 4 2 1 29 2	50 16 8 22 1
@ INCLUDES AUTOLYZED ANIMALS		

NUMBER OF ANIMALS WITH TISSUE EXAMINED MICROSCOPICALLY • NUMBER OF ANIMALS NECROPSIED •* INCLUDES ANIMALS THAT DIED BEFORE OR AFTER THE BEGINNING OF THE TERMINATION PERIOD

TABLE B2. FEMALE MICE: NEOPLASMS (CONTINUED)

	VEHICLE Control	DOSED GROUP	
TUMOR SUMMARY			
TOTAL ANIMALS WITH PRIMARY TUMORS* Total primary tumors	21 27	38 61	
TOTAL ANIMALS WITH BENIGN TUMORS Total Benign Tumors	9 11	23 50	
TOTAL ANIMALS WITH MALIGNANT TUMORS Total Malignant tumors	13 15	30 31	
TOTAL ANIMALS WITH SECONDARY TUMORS# Total secondary tumors		1 1	
TOTAL ANIMALS WITH TUMORS UNCERTAIN- Benign or malignant Total uncertain tumors	1		
TOTAL ANIMALS WITH TUMORS UNCERTAIN- PRIMARY OR METASTATIC TOTAL UNCERTAIN TUMORS		•	
* PRIMARY TUMORS: ALL TUMORS EXCEPT SE # Secondary Tumors: Metastatic Tumors (AN

TABLE B3.

INDIVIDUAL ANIMAL TUMOR PATHOLOGY OF MALE MICE IN THE 2-YEAR STUDY OF TRICHLOROETHYLENE

VEHICLE CONTROL

NUMBER WEEKS ON STUDY RESPIRATORY SYSTEM LUNGS AND BRONCHI HEPATOCELLULAR CARCINOMA, METAST, ALVEOLAR/BRONCHIOLAR ADENOMA ALVEOLAR/BRONCHIOLAR CARCINOMA	4 1 0 7 +		<u>۲</u>	4	4 5 0 7	6	8	9	5	5	5	5	5 7 0	5	5 9	6	6	8	6	370	3 7 1	37	378	3	8	8
STUDY	7			ġ.	7				0 ł	0	$\overline{\mathbf{n}}$		0	11	11	0 I	11	-11-	1	1	1	11	1	1	1	1
LUNCE AND BRONCHT	+			1	5	2	0 6 3		0 9 8	7	07	0 7 6	6	ç 7	9	0 0 7 3	ġ	1 0 7	9	6	0	9	0	2	0 3	0 7
LUNGS AND BRONCHI Hepatocellular carcinoma, metast. Alvedlar/bronchiolar adenoma Alvedlar/bronchiolar carcinoma	4 +																									
	1×	•	۲ 	+	+	+	+	+ x_	+	+	+	+	+	* ×	+	+	*	+	+	+	+	+	+	+	+	+
TRACHEA	+	-	•	-	-	-	+	-	-	-	+	+	+	-	-	+	+	-	+	+	+	+	-	+	-	+
HEMATOPOIETIC SYSTEM	+																~									
BONE MARROW	1±	. 1	ŀ	+	+ .	+	+	+	+	+	+	+	+	+	<u>+</u>	+	<u>+</u>	+	+	+	+	+	+	+	+	+
SPLEEN Malijnant Lymphoma, mixed type	+		•	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+
YMPH NODES	+		-	-	-	-	+	-	+	+	+	+	+	+	-	+	+	-	-	+	+	-	+	+	+	+
THYMUS	+		-	+	-	-	-	-	-	-	-	-	-	÷	+	-	-	+	+	-	-	+	-	+	-	-
CIRCULATORY SYSTEM	+																									-
HEART	+		۲	÷	+	+	+	÷	+	+	+	+	+	+	+	+	÷	÷	+	+	+	+	+	÷	+	+
DIGESTIVE SYSTEM	+																									-
SALIVARY GLAND	<u> </u>		<u>.</u>	+	+	.+	+	+	-	+	+	+		+	+	÷	+	-	+	+	<u>.</u> +	+	+	+	+	+
LIVER HEPATOCELLULAR ADENOMA HEPATOCELLULAR CARCINOMA HEMANGIOSARCOMA	+	-	•	+	+ X	+	+	×	×	+	* * ×	+	+	+ X	×	+	+ ×	+	+	+	×	+	+	+	×	+ ×
BILE DUCT	1+		۲.,	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+
GALLBLADDER & COMMON BILE DUCT	N	1	٩	+	Ν_	+	N	+	Ν.	N	+	+	+	+	+	+	<u>+</u>	÷	+	+	N	+	N	+	+	N
PANCREAS	+		+	+	+	.+	÷	+	+	+_	-	+	+	+	+	+	+	+	+	<u>+</u>	+	+	+	+	+	+
ESOPHAGUS	+	4	+	+	+	÷	÷	+	÷	÷	÷	+	+	+	+	+	+	-	+	+	+	+	+	+	+	+
STOMACH Squamous cell carcinoma	+		+	+	+	+	* ×	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+
SMALL INTESTINE	L+		<u>+</u>	+	+	+	+	+	+	+	÷	+	+	-	+	+	+	+	+	-	+	+	+	+.	+	+
LARGE INTESTINE	-		+	+	-	÷	+	+	+	+	÷	+	+	÷	÷	+	-	+	+	-	-	+	-	+	+	-
URINARY SYSTEM	+		_																							
KIDNEY Tubular-cell Adenoma	L+		+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	•	+	+
URINARY BLADDER	+		+	+	+	+	+	+	+	-	+	÷	+	+	+	÷	+	÷	+	+	+	+	+	+	+	+
ENDOCRINE SYSTEM	+																									
PITUITARY	++		+	+	-	-	-		-	-		+	+	-	-		+	+		+	-	+	-		+	
ADRENAL Cortical Adenoma Pheochromocytoma	-	•	-	+	+	* ×	+	-	+	-	-	+	+	-	-	+	-	+	+	+	+	-	+	+	+	-
THYROID	—		+	+	-	-	-	-	-	+	-	+	+	-	+	+	+	÷	+	+	+	+	-	+	+	+
PARATHYROID	1.		-	+	-	-	-	-	-	+	-	+	+	-	+	-	+	-	+	-	+	-	-	+	+	-
REPRODUCTIVE SYSTEM	- <u> </u>																									
MAMMARY GLAND	н	1	N	N	N	+	N	N	N	÷	N	N	<u>N</u>	+	N	N	N	N	N	+	N	N	N	N	N	N
TESTIS	L.		+	+	+	+	+	+	+	+	t	+	+	+	+	+	+	+	+	+	+	+	+	+	+.	+
PROSTATE	+		+	+	+	+	+	+	+	+	+	+	+	+	-	+	+	-	+	+	÷	+	+	+	+	+
NERVOUS SYSTEM	+																			-~-						
NERVES MALIGNANT RETICULOSIS	N	1	N	N	н	N	+	н	+	+	N	+	N	N	N	+	N	N	N	N	N	N	н	N	н	N
BRAIN Sarcoma, nos Malignant reticulosis	+		+	* ×	+	+	+	-	+	+	+	÷	+	+	+	+	+	+	+	+	+	+	+	+	+	+
ALL OTHER SYSTEMS	+-																								-	
MULTIPLE ORGANS NOS MALIGMANT LYMPHOMA, NOS MALIG.LYMPHOMA, UNDIFFER-TYPE MALIG.LYMPHOMA, LYMPHOCYTIC TYPE MALIG.LYMPHOMA, HISTIOCYTIC TYPE MALIGMANT LYMPHOMA, MIXED TYPE PLASMA-CELL TUMOR	N		N	N	z	N	N	N	N X	×	н	N X	R X	N	н	н Х	н	N	N	N	н	N	N	N	× ×	N

: NO TISSUE INFORMATION SUBMITTED C: NECROPSY, NO HISTOLOGY DUE TO PROTOCOL A: AUTOLYSIS M ANIMAL MISSING B: NO NECROPSY PERFORMED

+: TISSUE EXAMINED MICROSCOPICALLY -: REGUIRED TISSUE NOT EXAMINED MICROSCOPICALLY X: TUNOR INCIDENCE -: NECROPSY, NO AUTOLYSIS, NO MICROSCOPIC EXAMINATION

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ANIMAL NUMBER	8	8	3 9	3 9	3	3 9	4	4	4	4	4	4	4	4	4	4 2 5	4	4 3	4	4	439	5	5 5 7	5	5	
WEEKS ON Study	0	-7 1 0	2 0 9	-1	4	9	1 0 9	3 1 0	5 01 8	1	3 1 0	4	5	8	3 1 0	5 1 0	9	1	6 0 7	8 1 0	9 1 0	6 1 0	7	0	0	TOTAL TISSUE TUMOR
RESPIRATORY SYSTEM	6	7	5	71	71	11	1	7	61	-71	_71	_7.1	7	5	7	zĹ	zĹ	2	9	6	1	ź	il	ž	3	
LUNGS AND BRONCHI HEPATOCELLULAR CARCINOMA, METASTA Alveolar/Bronchiolar Adenoma Alveolar/Bronchiolar carcinoma	+	+	+	+	+	٠	+ ×	+ X	+	+	+	+	+	+ _ <u>x</u>	+	+	+	+	+	+	A	+	٠	+	+ ×	49 1 4 3
TRACHEA	+	-	+	-	-	-	-	-	-	-	-	÷	-	-	+	+	+	-	+	+	A	-	÷	-	+	23
HEMATOPOIETIC SYSTEM	+												••										-			
BONE MARROW	<u>_</u> +_	+	+	+	+	<u>+</u>	<u>+</u>	<u>+</u>	<u>+</u>	+	+	+		÷	+	+	+	+	÷	+	<u>A</u>	+	+	+	+	49
PLEEN Malignant Lymphoma, Mixed Type	+	+	+	+	+	+	+	+	+	+	+	* x	+	+	+	+	+	+	-	+	A	+	+	+	+	48 1
LIMPH NODES	+	+	+	+	÷	+	+	+	+	-		-		-	+	+	-	+	-	-	Α	+	+	-	+	31
THYMUS	-	-	-	-	-	-	-	+	+	-	-	+	+	-	+	-	-	+	-	-	A	-	+	+	-	16
CIRCULATORY SYSTEM																									-	
HEART	+	+	+	+	+	+	+	+	+	÷	+	+	+	+	+	÷	+	+	+	÷	A	+	÷	+	+	49
DIGESTIVE SYSTEM	+																								\neg	
SALIVARY GLAND	+	÷	-	-	+	+	÷	÷	+	+	÷	+	+	-	-	+	-	-	-	+	<u>A</u>	+	+	-	+	
LIVER HEPATOCELLULAR ADENOMA HEPATOCELLULAR CARCINOMA HEMANGIOSARCOMA	+	+ x	+ ×	+ X	+	+	+	+	+ X	+	+	+	+	+	+	+	+	+	+	+	A	٠	+	* ×	-	48 7 8
BILE DUCT	+	+	+	+	÷	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	A	+	+	+	-	48
GALLBLADDER & COMMON BILE DUCT	+	+	н	+	+	N	N	+	N	+	+	+	+	+	+	+	N	+	+	N	N	.t	+	+	н	50×
PANCREAS	+	+.	+	+	÷	+	+	+	+	+	+	-	+	+	+	+	+	+	÷	+	A	+	+	+	+	47
ESOPHAGUS	+	+	+	+	+	+	÷	+	+	+	+	+	+	+	+	+	+	+	+	+	A	+	÷	4	+	48
STOMACH Squamdus cell carcinoma	+	+	+	+	+	+	+	+	+	+	+	+	+	+	-	+	+	+	+	+	A	+	+	+	+	48 1
SMALL INTESTINE	<u> +</u>		+	+	+	+	+	+	+	+	-	+	+	-	+	÷	+	+	+	-	A	+	+	+	+	43
LARGE INTESTINE	+	+	+	-	+	+	+	+	+	+	-	-	+	-	+	-	÷	÷	+	-	A	÷	÷	+	+	36
URINARY SYSTEM																									-+	
KIDNEY TUBULAR-CELL ADENOMA	+	+	+	+	+	+	* ×	+	+	+	+	+	+	+	+	+	+	+	+	+	A	+	+	+	+	49 1
URINARY BLADDER	+	+	+	+	+	+	+	+	+	+	+	+	+	÷	+	+	+	+	+	÷	A	+	+	-	+	47
ENDOCRINE SYSTEM																									+	
PITUITARY	ļ. <u>-</u> _	-			-	-	-		+	-	+	-	-	+	÷	-	-		+	-	A	+	+	-		18
ADRENAL Cortical Adenoma Pheochromocytoma	+	+	+	+	-	+	+	+	+	+	-	+	+	+ x	-	+	-	+	+	+	A	+	-	-	-	32
THYROID	+	-	+	-	+	-	+	-	-	-	-	+	+		+	÷	+	-	-	÷	4	+	+	+	-	31
PARATHYROID	+		+	-	-	-	-		-		.		-		-	+	+	-	_	+	A	_	+	-	_	18
REPRODUCTIVE SYSTEM	-																			-					-	
MAMMARY GLAND	N	N	N	N	N	N	N	N	N	N	+	N	N	N	N	N	N_	N.	N	N	н	N	N	N	н	50×
TESTIS	+	+	+	+	+	+	+	+	+	+	+	+				+			+	+	A	+	+	+	+	49
PROSTATE	+	+		+	+		+	+	+	+	+	+	+			+	+	+	+	-	A	+	+	+	+	44
NERVOUS SYSTEM	<u> </u>																								+	
NERVES MALIGNANT RETICULOSIS	+	N	N	N	N	+ ×	+	N	N	N	N	н	н	N	н	N	N	N	+	N	N	N	N	N	N	50×
BRAIN Sarcoma, nos Malignant reticulosis	+	+	+	+	+	+ x	+	+	+	+	+	+	+	+	+	+	+	+	+	+	A	+	+	+	+	48 1
ALL OTHER SYSTEMS																	···								-+	
MULTIPLE ORGANS NOS MALIGNANT LYMPHOMA, NOS MALIG.LYMPHOMA, UNDIFFER-TYPE MALIG.LYMPHOMA, LYMPHOCYTIC TYPE MALIG.LYMPHOMA, MISTIGCYTIC TYPE MALIGNANT LYMPHOMA, MIXED TYPE PLASMA-CELL TUMOR	××	N	н	н	N	N	N		н Х	н	N	N	н		н Х	N	N	м		N X	N	N	N	N	N X	50× 1 3 2 2 2

TABLE B3. MALE MICE: TUMOR PATHOLOGY (CONTINUED) VEHICLE CONTROL

* ANIMALS NECROPSIED

+: TISSUE EXAMINED MICROSCOPICALLY -: Required Tissue not Examined Microscopically X: Tumor Incidence M: Necropsy, no Autolysis, no Microscopic Examination

: NO TISSUE INFORMATION SUBMITTED C: Necropsy, no histology due to protocol A: Autolysis M: Animal Missing B: No Necropsy Performed...

TABLE B3.

INDIVIDUAL ANIMAL TUMOR PATHOLOGY OF MALE MICE IN THE 2-YEAR STUDY OF TRICHLOROETHYLENE

DOSED GROUP

ANIMAL NUMBER	34	3 4 7	3 5 2	3 5 5	3	3 6	3 6 2	3 6	3 6 5	3	3	3	3 7 6	3	8	3	384	3 8 8	38	3	391	3 9 5	398	4 0	402
WEEKS ON STUDY	1	0 7	1	8	1	0	7	0	0 8 9	6	1	9	0	5	9	1	9	9	- 0	0	8	1	8	9	1 0
RESPIRATORY SYSTEM	1-21	/_	51	- 41	51	- 21		11	_ 91	91	_21	/1	<u></u>	<u>0</u>]	41	- 21	-21-	_/1	31	لك	81	_21	31	<u></u>	~
LUNGS AND BRONCHI HEPATDCELLULAR CARCINOMA, METASTA Alveolar/Bronchiolar Adenoma Alveolar/Bronchiolar Carcinoma	+	+	+	+ X	+ ×	+	+	+	+	+	+	×	+	+	+ 	+ X	+	+	×	+	+	+	+	+	+
TRACHEA	-	-	+	-	+	~	+	+	+	+	-	+	+	+	-	-	-	+	-	+	+	-	+	-	+
HEMATOPOIETIC SYSTEM	<u>†</u>		<u> </u>																			-			-
ONE MARROW	+	+	+	+	+	t	+	+	+	+	+	+	+	+	+	+	-	+_	+	+	+	+	+	+	+
SILEN	+	+	+	+	+	+	A	A	+	+	+	÷	_	+	+	_	+	+	+	+	+	+	+	+	+
LYMPH NODES	<u> </u>	+	+	+	. +	+	<u>A</u>	A	+.	-	-		+	_	+	-	+	÷	+	+	+	+	-	-	_
THYMUS	-	-	÷	-	-	+	A	A	-	-	+	-	+	-	-	+	-	+	-	-	-	+	+	-	-
CIRCULATORY SYSTEM	┢──		-														~								-
HEART	+	+	+	+	+	+	+	÷	÷	+	+	+	+	÷	÷	+	+	+	+	+	+	+	÷	+	+
DIGESTIVE SYSTEM	1																		-						
SALIVARY GLAND	+	+	<u>+</u>	_ <u>+</u>	-	+	+	+	+	+	+	-	+	+	÷	+	+	+	+	+	+	+	<u> </u>	+	-
LIVER Hepatocellular adenoma Hepatocellular carcinoma	+ x	+	+ × ×	+ >	+ X	×	ŀ	+	+ X	+ X	+ X.	+ X	+	+ X	+ x	+ X	*	* ×	+ X_	+	+ X	* ×	+ x	+ ×	+ x x
BILE DUCT	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+
GALLBLADDER & COMMON BILE DUCT	+	N	Ν.	н	+	+	N	N	+	N	+	+	+	_N	+	+	+	+	N	N_	N	+	+	N.	+
PANCREAS	+	+	+.	+	+	+	+	A	+	+	+	+	+		+	+_	+	+	+	+	+	+	+	+	+
ESOPHAGUS	+	+	. +.	+	+	+	+	+	+	+		+	+	+	+	+	+	+	+	+	+	-	+	+	+
STOMACH	T +	+	+	+	+	+	+	+	+	+	+	+	+		÷	+	+	+	+	+	+	+	+	+	+
SMALL INTESTINE	+	+	+	+	+	+	+	+	+	+	+	+	+	-	+	+	+	+	+	+	+	+	+	+	+
LARGE INTESTINE	+	+	+	+	+	+	+	+	+	+	+	+	+	-	+	+	+	+	+	+	+	+	+	+	4
URINARY SYSTEM	<u> </u>																								
KIDNEY TUBULAR-CELL ADENGCARCINDMA	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	* ×	+	•
URINARY BLADDER	+	+	+	+	+	+	+	A	+	+	+	+	+	-	+	+	+	+	+	+	+	+	+	+	+
ENDOCRINE SYSTEM	┼─		_																-	-					
PITUITARY	L+	+		-	-	+	A	A	+			-	+	-	+	+	+		-	÷	-	+	+	+	_
ADRENAL	L+	÷	+	+	+	+	t	A	+	+.		+_	+		÷	-	<u> </u>	÷	+	+	+	-	.+	-	+
THYRDID			-	~	+		Α.	_A_	-	+	+	+	+	_+	+	-	-	_=	-	+	+	-	+	+	<u>+</u>
PARATHYROID	-	-	-	-	+	-	A	A	-	-	-	-	+	-	-	-	-	-	-	-	-	-	+	+	-
REPRODUCTIVE SYSTEM	+																								
MAMMARY GLAND	<u>N</u>	N	N	N	+_	N	N	N	Ν_	N	Ŋ	N	N	<u>N</u>	N	N	N.	N	N	N_	N	N	N	<u>N</u>	ħ
TESTIS	+	+	+	+	+	+	+_	+	+	+.	+	+	+	+	+	+	+	+	+	+	+	<u>+</u>	. .	+	+
PROSTATE	-	+	+	-	+	+	A	+	+	+	+	-	+	-	+	+	+	+	+	+	+	+	+	+	ŧ
NERVOUS SYSTEM	+																		~~						
BRAIN NEOPLASM, NOS, MALIGNANT	+	+	+	٠	+	+	٠	+	٠	+	.+	+	+	+	+	+	+	* ×	+	+	+	÷	٠	+	+
SPECIAL SENSE ORGANS	1		_																						
HARDERIAN GLAND Adenoma, nos Papillary Adenoma /cinar-cell Adenoma	N	ĸ	N	N X	N	Ν	N	N	ĸX	ĸ	N	н	н	н	н	N	н	N	N	N	N	N	N	N	•
AL . OTHER SYSTEMS	1											-					-					_			-
HULTTPLE ORGANS NOS Harcinoma,nos Halignant Lymphoma, nos	N	N	N Y	N	N	N	N	N	N	N	N	N	м	N	N	N	N	Η	N	N	H	N	××	N	•
ALL OTHER SYSTEMS (CONT) MALIG.LYNPHOMA, UNDIFFER-TYPE MALIG.LYMPHOMA, LYNPHOCYTIC TYPE MALIGNANT LYMPHOMA, MIXED TYPE		×			×	×							_							×					×

+ - x z

TISSUE EXAMINED MICROSCOPICALLY : NO TISSUE INFORMATION SUBMITTED REQUIRED TISSUE NOT EXAMINED MICROSCOPICALLY C: NCCROPSY, NO HISTOLOGY DUE TO PROTOCOL TUMOR INCIDENCE NECROPSY, NO AUTOLYSIS, NO MICROSCOPIC EXAMINATION B: NO NECROPSY PERFORMED

ANIMAL Number	4	4 0 7	4 0 8	4	4	4	4 1 9	4 2 0	2	424	4 2 6	4 2 7	430	3 2	4 3 3	4 3 4	31	3	4	4	5	5 4 8	4	5	5	TOTAL
WEEKS ON Study	0	1	0	0 7	0 8	0	0 5 7	0 7	9	0	1	1	6	1	3 3 0 8	8	1	7	9	9	1	1	0	9	1	TISSUE
RESPIRATORY SYSTEM	8	-21	91	21	91	21		-61	_/_	21	51	51	<u> </u>	_21	71	0]	21	-21	71		21.	21	51	•1		
LUNGS AND BRONCHI HEPATOCELLULAR CARCINOMA, METASTA ALVEOLAR/BRONCHIDLAR ADENOMA ALVEOLAR/BRONCHIDLAR CARCINOMA	+	+	+	+	* ×	+ ×	+	+	+	. +	* ×	+	+	+	+	+	+	٠	+	+	+	* x	+	* ×	+	50 5 5 1
TRACHEA	+	-	+	-	-	-	-	+	-	+	-	+	+	+	-	÷	+	-	-	+	+	+	-	-	+	27
HELATOPOIETIC SYSTEM																										
B WE MARROW	+	+	t	+	+	+	+	+	+	+	+	+	+	+	+	+	÷	+	+	+	+	+	+	+	+	49
SPLEEN	+	t	+	-	+	+	+_	-	+	+	+	÷	-	+	. †	+	+	-	+	+	+	+	+	+	+	42
LYMPH NODES	+	+	-	_		+	÷	-	+		+	+	-		+	+	+	+	+	+	+	-	+	÷	+	30
THYMUS	-	+	-	-	-	+	-	•	-	-	÷	-	-	-	-	-	÷	-	+	-	+	+	-	-	-	15
CIRCULATORY SYSTEM	+																	-								
HEART	+	+	+	+	+	+	+	+	+	+	+	+	÷	+	+	+	÷	-	+	+	+	+	÷	+	+	49
DIGESTIVE SYSTEM	+																		-						-+	
SALIVARY GLAND	L+		+	+	+	-	+	+	+	+	+	÷	-	÷	+	+	+	<u> </u>	+	+	+	-	+	+	-	40
LIVER HEPATOCELLULAR ADENOMA HEPATOCELLULAR CARCINOMA	×	+	×	* ×	+ ×	+ X	+ x	+ X	+	+ X	+ X	+ ×	+	* ×	+	×	ь Х	+	·	×	×	۰ ×	×××	+ ×	+	14 31
BILE DUCT	†÷	+	+	+	+	+	+		•		+	+	- ··	÷	+	+	+	+ -	+	+	+	+	+	+	+	50
	†			+		<u>r</u>	. <u>ث</u> ر ــــــــــــــــــــــــــــــــــــ				 N	+		•	, N	М	+	<u>.</u>	+	N	N	+	+	+	Ţ	50×
GALLBLADDER & COMMON BILE DUCT	+	<u> </u>		· ·	+			<u>_n</u> _			 +		<u> </u>	+	+	+	+		<u>.</u>				- <u>'</u>	 +	÷	46
PANCREAS	+	+	+	+	+	+	+		+	+		÷				+		<u>+</u>	+	+	T	<u> </u>	<u> </u>		- <u>+</u>	
ESOPHAGUS	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	-	+	+	÷	+.	-	+		+		44
STOMACH	+ 	+	+	+	+	+	+	-	+	+	+	+	-	+	+	+	+	+	+	+	+	+	+	+	+	47
SMALL INTESTINE	+	+	+	+	+	+	+	+	+	+	+	<u>+</u>	-	-	+	+	<u>+</u>	+	+	+	+	+	+	+	+	47
LARGE INTESTINE	+	+	+	+	-	+	+	+	+	+	+	+	-	-	+	+	+	+	+	+	+	+	+ .	+	-	45
URINARY SYSTEM	1					-																				
KIDNEY TUBULAR-CELL ADENOCARCINOMA	+	+	+	+	+	+	+	+	+	+	+	+	+	+			+	+		+	+	+	+	+	+	50
URINARY BLADDER	+	+	+	+	+	+	+	-	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	47
ENDOCRINE SYSTEM																										
PITUITARY .	<u>t</u>	+	-	+	-	-	-		-	-	-	-	-	+	+	+	-	+	+	+	-	-	-	<u> </u>	+	22
ADRENAL .	-	+	+	+	+	-	+	+	+	+	+	-	+	-		+	÷	-	+	+	+	-	+ .	+	-+	36
THYROID		-	-	+	+	+	+	+	+	-	-	+	-	+	+	+	+	-	+	+	+	+	-	+	+	29
PARATHYROID	-	-	-	-	-	-	-	-	-	-	-	-	-	+	-	-	-	-	-	-	+	+	-	-	-	7
REPRODUCTIVE SYSTEM																									-	
MAMMARY GLAND	N	N	N	N	N	N	_N	N	N	N	Ν	N	N	N	N	N	N	N	N	Ν.	N	N	N	N	N	50×
TESTIS	+	+	+	+	÷	+	+	-	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	49
PROSTATE	+	+	+	+	+	+	+	-	+	+	+	+	+	+	+	+	+	+	+	+	+	+	÷	+	+	44
NERVOUS SYSTEM																									-+	
BRAIN NEOPLASM, NOS, MALIGNANT	+	+	+	÷	+	+	+	÷	+	+	+	+	-	+	+	+	+	+	+	+	+	+	+	+	+	49 1
PECIAL SENSE DRGANS																										
HARDERIAN GLAND Adenoma, Nos PAPIILARY Adenoma Acimar-cell Adenoma	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	H	N X	N	N	N	N	N	50× 2 1 1
AL. DTHER SYSTEMS																									1	
MULTIPLE ORGANS NOS Carcinoma,nos Malignant Lymphoma, nos	N X	N	н	N	N	N	N	N	N	н	N	N	N	N	N X	N	N	N	N	N	N	н	N	N	N	50× 1 3
ALL OTHER SYSTEMS (CONT) Malig.lymphoma, undiffer-type Malig.lymphoma, lymphocytic type Malignant lymphoma, mixed type									~										×	×					x	523

TABLE B3. MALE MICE: TUMOR PATHOLOGY (CONTINUED) DOSED GROUP

* ANIMALS NECROPSIED +: TISSUE EXAMINED MICROSCOPICALLY -: REQUIRED TISSUE NOT EXAMINED MICROSCOPICALLY X: TUMOR INCODENCE N: NECROPSY, NO AUTOLYSIS, NO MICROSCOPIC EXAMINATION

: NO TISSUE INFORMATION SUBMITTED C: Hecropsy, no histology due to protocol A: Autolysis M: Animal Missing B: No Necropsy Performed

TABLE B4.

INDIVIDUAL ANIMAL TUMOR PATHOLOGY OF FEMALE MICE IN THE 2-YEAR STUDY OF TRICHLOROETHYLENE

VEHICLE CONTROL

AN I MA L						41	41	4					41	41		41		41	41	4	4		41	41	4
NUMBER	4	4	4	45	4	4	4	5	5	5	5	5	5	5	6	6	6	6	ż		7	7	7	8	8
WEEKS ON STUDY	1	0	1	1	7	0	9	0	0	6	1	0	0	9	8	0 4	0	1	0	0	0	0	0	8	1
RESPIRATORY SYSTEM	1-71	8	_71	7	9	6	91	2	7	41	7	21	71	21	7	1	71	7	71	.71	_71	_71	.71	31	_7
LUNGS AND BRONCHI Alveolar/Bronchiolar carcinoma	+	+	+	+	+	+	+	+	÷	м	+	÷	+	٠	+	м	+	÷	÷	٠	+	+	÷	+	+
TRACHEA	+	-	+	-	+	+	+	-	-	M	-		-	+	•	м	-	-	+	+			-	+	-
HELATOPOIETIC SYSTEM	<u> </u>	_			*	•	-	_				_	_	-									_		_
B WE MARROW	+	+	•	+	÷		÷	÷	+	м	÷	+	÷	÷	÷	м	+	+	+	÷	+	+	+	÷	+
SPLEEN	+	+	+	+	+	+	+	+	+	м	+	+	+	+	+	M	+	+	+	÷	+	÷	+	+	+
MALIGNANT LYMPHOMA, NOS			<u> </u>																						
LYMPH NODES	++		-	-	.+	-	-	-	-	<u>M</u>	+	+		-	+	M	+	-	-	+		-	+	+	+
THYMUS	+	-	-	+	+	-	-	+	-	M	+	+	-	-	+	M	-	+	+	+	_	+	+	-	_
CIRCULATORY SYSTEM	+	÷	÷	+	÷			+	•		÷	+		÷	÷	м	+	÷	+	÷	•	+	÷	÷	+
HEART	•	•		+	+	-	•	•	•	M	_		+	•	•	M	<u> </u>	-				<u> </u>		<u> </u>	_
DIGESTIVE SYSTEM SALIVARY GLAND					_	1	Ŧ	1	-	м	÷		_	1		м	-		÷	÷			÷		-
LIVER	1	+	<u> </u>				+	<u>+</u>	+	M	+		+	+	+	 M	+	+	+	+	÷	+	+	+	Ē
HEPATDCELLULAR ADENOMA HEPATDCELLULAR CARCINOMA	Ľ					· ·	·			ri	x				•	11	·	x					-		_
BILE DUCT	+	+	+	÷	+	+	+	+	+	M	+	+	*	+	+	M	÷	+	+	+	+	+	+	+	+
GALLBLADDER & COMMON BILE DUCT	+	+	+	+	+	+	N	+	+.	M	+	+	+	+	+	Μ	+	+	+	+	+	•	+	<u>+</u>	+
PANCREAS	÷	+	+	+	+	-	+	+	+	M	+	+	+	+	+	Μ	+	+	+	+	+	+	+	+	+
ESUPHAGUS	+	+	+	+	+	+	. +	+	+	M	+	+	+	+	+	M	+		+	+	+	-	+	+	+
STOMACH	+	-	+	+	+	+	+	+	+	М	+	+	+	+	+	M	+	+	+	+	+	+	+	+	+
SMALL INTESTINE	+	+	+	+	+	+	+	+	+	<u>M</u>	+	+	+	.+	+	_ <u>M</u>	+	+	.	+	+	+		+	+
LARGE INTESTINE	+	+	+	-	+	+	+	+	+	М	+	+	-	+	÷	Μ	-	+	+	+	+	+	+	+	+
URINARY SYSTEM	+										+	•	•	•	+		+			÷	+	+	÷	÷	
KIDNEY URINARY BLADDER	+	+	+	<u>+</u>	+	<u>+</u>	. <u>+</u>	+ +	+	M M	+	+		+		M	+	+	+	+	-	+		+	<u> </u>
ENDOCRINE SYSTEM	- T		· ·	-	· ·		•	· ·	т —					Ŧ	·		·	·	<u>'</u>	<u> </u>				·	
PITUITARY	+	_	+	-	-	-	-	+	+	м	-	+	-	÷	÷	м	-	+	-	÷	÷	÷	÷	÷	+
CHROMOPHOBE ADENOMA	ļ											×								X	_				_
ADRENAL Cortical Adenoma Pheochromocytoma	-	+	+	+	+	+	+	+	٠	M	+	+	-	+	+	м	×	-	+	+	+	+	+	+	-
THYROID	+	-	+	-	+	+	+	+	-	M	+	_	_	+	+	M	+	-	+	<u>+</u>	-	-	+	+	_
PARATHYROID	-	-	-	-	-	+	+	-	-	м	-	-	-	-	-	м	+	-	-	-	-	-	-	-	-
REPRODUCTIVE SYSTEM																			_						
MAMMARY GLAND Fibrosarcoma	* ×	N	+	N	+	+	+	N	+	M	+	+	+	•	+	м	+	N	+	+	+	+	+	+	+
UTERUS Neurilemoma, Malignant	+	+	+	+	+	+	+	+	•	M	+	+	+	•	•	M	+	+	+	+	+	+	ż	÷	•
OVARY Adenocarcinoma, nos	+	-	+	-	-	* ×	-	•	٠	M	+	+	•	٠	+	Μ	•	٠	٠	-	-	-	+	+	-
NERVOUS SYSTEM	-	_																							_
HERVES Maltgnant Reticulosis	н	•	N	N	N	+	N	•	N	M	N	N	N	•	+	м	N	N	N	N	N	N	N	+	N
JRAIN Malignant Réticulosis	+	٠	٠	+	+	+	+	٠	+	М	٠	٠	+	+	+	Μ	+	٠	•	+	+	+	+	+	+
ALL OTHER SYSTEMS	[
MULTIPLE ORGANS NOS	N	N	N	м	N X	N	N	N	N	Μ	N	N	N	N	N	M	N	N	H	N	N	N	N	N	H
MULTIPLE DRGAMS NOS Malignant Lymphoma, NOS Maliglymphoma, Undiffer Type Maliglymphoma, mixidlypi Malignant Lymphoma, mixed Type							×														X				_
MALIG.LYMPHOMA, UNDIFFER-TYPE Malig.lymphoma, Histiocytic Type Malignant Lymphoma, Mixed Type Sife Unknown Neoplasm, Nos					· · ·		×			M					-	M					_×				

+ - X X

TISSUE EXAMINED MICROSCOPICALLY Reguired Tissue not Examined Microscopically Tumor Incide.::5 Necropsy, NG quidlysis, NG Microscopic Examination

: NO TISSUE INFORMATION SUBMITTED C: NECROPSY, NO HISTOLOGY DUE TO PROTOCOL A: AUTOLYSIS M: ANIMAL MISSING B: NO NECROPSY PERFORMED

ANIMAL	41	6	61		61	 F [= = -	 5	 5]		 ET		5				 E I		 5	 5 J	5			51	5	
NUMBER	87	9	9	9	9	0	0	0	0	1	1	1	1	1	1 8	2 8	2	3	3	4	5	5	5	5	5	TOTAL
WEEKS ON Study	1	1	1	1	0 8	1	0	0 8	0 8	6	1	1	1	1	1	1	1	1	9	1	1	1	1	1	1	TISSUES TUMORS
RESPIRATORY SYSTEM	1-21	7	_51	7	8	71	7	3	1	21	71	7	6	.71	7	3	71	1	5	21	71	5	7	7	_6	
LUNGS AND BRONCHI Alveclar/bronchiolar carcinoma	+	+	+	+	+ x	+	+	+	+	+.	+	+	+	+	+	+	+	+	+	+	÷	+	+	+	+	48
RACHEA	+	+	-	-	+	+	+	+	+	+	+	+	+	-	-	-	-	÷	÷	+	+	-	-	÷	+	28
HEM TOPOIETIC SYSTEM	+																									
BONE MARROW	+	+	+	÷	+	+	+	+	+	+	+	÷	+	+	+	+	.+	+	÷	+ .	+	+	+	+	+	48
SPLEEN Malignant Lymphoma, nos	+	+	+	+	+	+	+	+	+	+	+	+	-	+	+	+	+	+	+	+	+	+	+	+	+	47 1
LYMPH NODES	++-			+		~	-	A	+	-	+	+	~	-	-	+	-	+	+	+	+	+	-	-	+	22
THYMUS	+	-	+	+	-	+	+	A	-	-	-	+	-	÷	+	+	-	+	-	-	+	+	-	+	-	25
CIRCULATORY SYSTEM	+																								-	
HEART	+	+	+	÷	+	+	+	+	+	+	+	+	+	+	-	+	+	+	+	+	+	+	+	+	+	47
DIGESTIVE SYSTEM	1																									
SALIVARY GLAND		+	+	+	<u></u> +	-	+	+	+	+	+	+	+	+	+	+	+	-	+	<u>+</u>	÷	+	+	_ <u>+</u>	-+	39
LIVER Hepatocellular adenoma Hepatocellular carcinoma	+	* ×	+	+	٠	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	* X	÷	+ X	+ x	4 N 4 2
BILE DUCT	Γ,	+	+	+	+	+	+	÷	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	48
GALLBLADDER & COMMON BILE DUCT	+	+	+	+	N	+	+	N	+	N	+	+	+	+	+	÷	+	N	+	+	N	N	+	N	н	48×
PANCREAS	T +	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	47
ESOPHAGUS	+	÷	+	+	+	+	+	+	+	+	+	+	-	+	+	+	+	+	+	+	+	+	+	+	+	45
STOMACH	+	+	+	+	+	+	+	+	+	÷	+	+	+	+	+	+	+	+	+	+	÷	+	+	+	+	47
SMALL INTESTINE	<u> </u>	+	_	+	+	+	+	+	+	+	+	+	+	+	÷	÷	+	÷	+	+	+	+	+	+	+	45
LARGE INTESTINE	+	+	+	+	+	+	+	÷	+	+	-	+	-	+	+	+	-	+	+	+	-	+	÷	+	+	41
URINARY SYSTEM	-																									
KIDNEY	+	+	+	+	+	+	+	+	+	÷	÷	+	+	+_	+	+	÷	+	+	+	+	+	+	+	+	48
URINARY BLADDER	+	+	+	+	+	+	+	A	-	+	-	+	+	+	+	-	+	+	ŧ	+	+	+	+	+	+	4 1
ENDOCRINE SYSTEM	1																									
PITUITARY Chromophobe Adenoma	-	+	-	~	+	+	+	+	-	-	+	+	-	+	-	+	+	*	-	-	-	+	+	-	-	27 3
ADRENAL Cortical Adenoma Pheochromocytoma	+	-	-	+	+	-	+	A	+ X	+	-	-	-	+	+	+	-	+ ×	+	+	+	•	+	+	+	36 1 2
THYROID	+	÷	-	-	+	+	+	A	+	+	+	+	+	+	+	-	-	+	+	÷	+	_	+	+	+	33
PARATHYROID	+	-	-	-	+	-	-	A	-	-	+	+	+	-	+	-	-	-	_	+	+	-	-	-	-	11
REPRODUCTIVE SYSTEM	+																								-+	
MAMMARY GLAND FIBRDSARCOMA	+	+	N	+	+	+	+	N	+	+	+	н	+	+	N	+	+	+	•	+	+	+	+	+	+	48×
UTERUS NEURILEMOMA, MALIGNANT	+	+	+	+	+	+	+	A	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	47
OVARY Adenocarcinoma, Nos	+	-	٠	-	+	-	٠	A	-	+	-	+	•	-	-	-	+	-	+	-	+	+	+	+	+	27,
NE WOUS SYSTEM																										
MARIGNANT RETICULOSIS	м	N	N	N	+	N	N	N	+	*	N	N	N	N	N	N	N	N	+	N	N	н	N	N	N	48× 1
BRAIN Malignant Reticulosis	+	+	+	+	+	+	+	+	+	*	+	•	+	+	+	+	+	+	+	+	+	+	+	•	+	48.
ALL OTHER SYSTEMS															••											
MULTIPLE ORGANS NOS Malignant Lymphoma, NOS Malig.Lymphoma, Undiffer-Type Malig.Lymphoma, Histaucytic Type Malignant Lymphoma, Mixed Type	N	н	N	н	N	N	N	N	N	N	א	N	н	H	н	H X	н	ZX	н	H	N	H	н	N	N X	48× 1 1 3
SITE UNKNOWN Neoplasm, nos									<u>x</u>																	1
ADIPOSE TISSUE HEMANGIOMA																										1

TABLE B4. FEMALE MICE: TUMOR PATHOLOGY (CONTINUED) VEHICLE CONTROL

* ANIMALS NECROPSIED +* TISSUE EXAMINED MICROSCOPICALLY -* REQUIRED TISSUE NOT EXAMINED MICROSCOPICALLY X* TUMOR INCIDENCE N* NECROPSY, NO AUTOLYSIS, NO MICROSCOPIC EXAMINATION

: NO TISSUE INFORMATION SUBMITTED C: NECROPSY, NO HISTOLOGY DUE TO PROTOCOL A: Autolysis M: Animal Missing B: No Necropsy Performed

TABLE B4.

INDIVIDUAL ANIMAL TUMOR PATHOLOGY OF FEMALE MICE IN THE 2-YEAR STUDY OF TRICHLOROETHYLENE

DOSED GROUP

AN IMAL NUMBER	4	4 4 7	4 5 2	4 5 6	4 6 1	4 6 2	4 6 3	4	4 6 7	4 7 2	4	4 7 5	4	4	4 8	4 8 3	4	4	4 8	4 8 9	4	4 9	4	4	4
WEEKS ON	2	0	1	6 0 7	11	1	1	-6	61	1	3	0	- 1	-7	-2	1	4	8	- <u>°</u> -1	_9 0 9	_0 1	1	5	6	7
STUDY RESPIRATORY SYSTEM	9	9 7	0 4	7	0	0	0 5	0	9	0 4	0	6	0	8	0 5	0	8	8	0	9 3	0 5	0 5	8	8	0 5
UNGS AND BRONCHI Alveolar/brohchiolar adehoma	+ ×	+	* X	+	+	+	+	+	+	-	* x	+	+	+	+	+	+	+	+	+	+	+	+	+	+
TACHEA	+	+	-	+	+	-	-	-	+	-	+	+	-	+	+	+	+	+	-	-	÷	-	+	+	-
HEMATOPOIETIC SYSTEM	+																								
BONE MARROW	<u>↓</u> +	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	t
SPLEEN	+	÷	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+
LYMPH NODES	+	+	-	+	.	+	+	+	+	-	-	+	_+	+	+	+	-	+	+	+	-	.+.	-	+	+
THYMUS	-	-	-	+	-	-	+	-	-	-	-	-	+	-	+	-	-	-	-	-	-	+	+	-	+
CIRCULATORY SYSTEM	+																								_
HEART	+	+	+	+	+	+	+	÷	+	-	+	+	+	+	+	+	٠	٠	+	+	+	+	+	+	+
DIGESTIVE SYSTEM	-					_																			-
SALIVARY GLAND		-	_	÷	+	+	+		-	-	+	<u>+</u>	+	-	-	<u>+</u>	-	+	-		+	<u>+</u> .	+	. * .	
LIVER HEPATOCELLULAR ADENOMA HEPATOCELLULAR CARCINOMA MALIG.LYMPHOMA, HISTIOCYTIC TYPE	+	* X	+	+	+	* ×	+ X	* X	+	+ × ×	××	+	+	٠	+ × ×	٠	•	ŀ	×	+ X	٠	×××	ł		××
BILE DUCT	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+
GALLBLADDER & COMMON BILE DUCT	+	N	+	+	N	÷	+	N	+	. н	N	N	+	+	+	+	+	N	+	N	+	+	+	N	+
PANCREAS	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+
ESOPHAGUS	+	+	+	+	+	+	+	+	+		+	+	+	+	+	+	÷	+	+	+	+	+	+	+	+
STOMACH Squamous cell papilluma Squamous cell carcinuma	+	+	+	+	+	+	+	+	+	+	+	+ ×	+	+	+	+	+	+	+	+	+	+	+	+	+
SMALL INTESTINE	+	+	+	+	+	+	+	-	+	+	-	÷	+	+	+	+	+	÷	-	÷	+	+	+	+	÷
LARGE INTESTINE	+	+	+	+	+	+	+	+	+	+	+	+	+	+	-	+	+	+	+	+	+	+	+	+	-
JRINARY SYSTEM	├																								
KIDNEY	+	+	+	+	+	+	+	+	÷	+	+	+	+	+	+	+	+	+	<u>+</u>	+	+	+	+	+	+
URINARY BLADDER	+	+	+	÷	+	+	+	+	+	+	+	-	÷	+	+	+	+	-	÷	+	+	+	+	÷	+
ENDOCRINE SYSTEM							-																		
PITUITARY	-	-	_	+	+	÷	+	+	_	-	÷	-	÷	-	+	÷	_	-	+	+	+	-	+	-	-
ADRENAL Sarcoma, NOS	+	-	-	-	+	-	+	+	+	-	+	-	* X	+	+	-	+	+	+	+	-	+	+	+	+
THYROID Follicular-Cell Adenoma	+	~	+	-	+	-	+	-	+	-	+	+	+	+	+	+	+	-	+	-	+	-	+	+	+
PARATHYROID	-	-	-	-	-	-	-	-	-	-	+	-	+	+	÷	-	+	-	+	-	-	-	+	+	-
REPRODUCTIVE SYSTEM																									_
MAMMARY GLAND	+-+	+	+	+	+	N	+	<u>N</u>	<u>N</u>	Ν.	+	+	+	+	N	+	+	+	+	N	N	N	+	+	N
UTERUS SARCOMA, NOS Leidnyoma Endometrial stromal polyp	+	+	+	+	+	+	+	+	+	+ _X_	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+
DVARY Papi'lary adenoma	+	+	-	+	-	* ×	+	+	+	+	+	-	+	+	-	-	÷	-	-	+	+	-	+	-	+
E-VOUS SYSTEM	\vdash															_									-
B AIN Meningioma	+	+	+	+	+	+	+	+	+	-	+	+	+	+	+	+	* ×	+	+	+	٠	+	+	+	+
PECIAL SENSE ORGANS	<u> </u>																			_					
HARDERIAN GLAND Adenoma, NOS	N	NX	N	N	N	N	N	N	N	н	н	N	N	N	н	N	N	N	N	N	H	н	N	N	N
LL OTHER SYSTEMS	[
MULTIPLE ORGANS NOS SQUAMOUS CELL CARCING:1A, METASTAT MALIGNANT LYMPHOMA, NOS MALIG.LYMPHOMA, UNDI/FER-TYPE MALIG.LYMPHOMA, HISTIOCYTIC TYPE MALIG.LYMPHOMA, HISTIOCYTIC TYPE MALIGNANT LYMPHOMA, MIXED TYPE MYELDMONDCYTIC LEUKEMIA	N	N	N X	N	N X	М	N	N	N X	N	н	N X	N	N		N X	н	N X	N	N	N	н	N	N	N
MALIGNANT LYMPHOMA, MIXED TYPE MYELDMONOCYTIC LEUKEMIA	×		Ŷ					×										^							

+: TISSUE EXAMINED MICROSCOPICALLY -: REQUIRED TISSUE NOT EXAMINED MICROSCOPICALLY X: TUMOR INCIDENCE N: NECROPSY, NO AUTOLYSIS, NO MICROSCOPIC EXAMINATION MICROSCOPICALLY MICROSCOPICALLY

ANIMAL NUMBER	5	5	5	5	5	5	5	5	5	5	5 2 0	5 2 1	5	5	527	53	5	5	537	5 4 0	542	545	5 4 7	5	552	
WEEKS ON	0	2	4	7	8 0 9	9	0	6	7	9	1	1 0 9	4	- 6	0	-1		9	1	1	1	11	ò	0	0	TOTAL TISSUES
STUDY	0	0	9	7	9	9 4	5	6	0 5	0 5	0 5	9	9 5	8	9	5	0 5	8	5	0	0	0 4	4	9	85	TUMORS
L'INCS AND BRONCHI	+	+	+	м	+	÷	÷	+	+	+	+	+	÷	+	+	÷	+	÷	+	+	+	+	L.			
LVEOLAR/BRONCHIOLAR ADENOMA	<u> </u>	•		11				·	<u> </u>	•	-	_	-				<u> </u>	-	•	•	•	<u> </u>	-	•	. ż	484
TRACHEA	-	+	+	M	+	-	-	+	-	•+	-	+	+	+	+	+	-	+	-	-	-	-	-	-	+	27
HEMATOPOIETIC SYSTEM	Τ																									
BONE MARROW	++	+-	+-		+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	_ <u>+</u> _	+	+	+	+	+	49
SPLEEN	++	+	+	M	+	+	+	+	+	+	+	+	.	+	+	. +	+	+	+	+	+	-	+	+	+	48
LYMPH NODES	++			<u>. M</u>	+	+	+		+	+	-	+	-	+	-	-	-	+	+	+	-	+	+	+	+	36
THYMUS	-	+	-	M	-	-	-	-	+	+	+	-	-	-	-	-	+	-	+	+	-	+	-	+	+	17
CIRCULATORY SYSTEM																										
	+	+	+	м	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	48
DIGESTIVE SYSTEM																										
SALIVARY GLAND	++		+	M	- <u>+</u> -	<u>t</u>	+	+	+	+	+	+	+	+	+	+	+	+	-	+		+	+	. +	+	35
LIVER Hepatocellular Adenoma Hepatocellular carcinoma Malig.lymphoma, histiocytic type	ľ	+ ×	+	M	+	+	+	+	* X	+	+	+	+ x	+	+ ×	+ x	+ ×	* ×	* X	* X	* ×	+	+	+ × ×	+ × ×	19 16
BILE DUCT		+	+	M	+	+	+	+	+	+	÷	+	+	+	+	+	+	+	+	+	+	. +	+	+	+	49
GALLBLADDER & COMMON BILE DUCT	N	+	+	M	+	+	+	N	+	÷	N	N	+	+	. N	+	+	N	+	N	+	+	+	+	+	49×
PANCREAS	I +	+	+	M	+	+	÷	÷	÷	+	+	+	+	+	+	+	+	+	+	+	+	+	÷	+	+	49
ESOPHAGUS		-	+	м	+	+	-	÷	÷	+	÷	+	+	+	+	+	+	+	-	+	+	-	+	÷	+	43
STOMACH Squamdus cell papilloma Squamdus cell carcinoma	+	-	+	Μ	+	+	+	+	+	+	+	+	+	* ×	* ×	+	+	+	+	•	+	+	+	-	+	47 2 1
SMALL INTESTINE	+	-	÷	м	+	÷	÷	+	+	+	÷	+	÷	+	+	+	-	+	÷	+	+	+	+	+	+	44
LARGE INTESTINE	-	+	+	м	+	+	-	+	+	+	+	+	+	+	+	+		+	+	+	+	+	+	+	+	44
URINARY SYSTEM																									-+	
KIDNEY	+	+	+	M	+	+	+	÷	+	•	+	+	+	+	+	÷	÷	+	+	÷	÷	+	÷	+	+	49
URINARY BLADDER	+	+	÷	м	+	+	÷	-	+	+	+	+	+	+	+	+	+	+	+	-	-	-	÷	+	+	43
ENDOCRINE SYSTEM																									+	
PITUITARY	+	+	-	M	-	+		+	-	-	-	+	+	+	+	+	+	-	-	+	-	+	÷	+	+	.28
ADRENAL Sarcoma, nos	+	+	+	Μ	-	+	+	-	+	+	+	+	+	+	+	•	+	+	-	+	-	+	+	+	+	37
THYROID Follicular-cell Adenoma	-	+	+	Μ	-	+	*	+	-	+	-	+				+	-	+	-		-	-	+	-	+	31
PARATHYROID	-	+	-	M	-	-	-	-	-	+	-	-	+	-	+	-	-	-	-	-	-	-	-	-	+	13
REPRODUCTIVE SYSTEM																										
MAMMARY GLAND	+-+-	<u>N</u>	+	<u>M</u>	+	+	Ν.	+	<u>N</u>	+	+	N		<u> </u>			•		+		N	+	+	+	+	49×
UTERUS Sarcoma, nos Leiomyoma Endometrial stromal polyp	+	+	+	M	+	+	+	+	+	+	+	+	+	+	* X	+	+	+	+	+ X	+	+	+	+ x	+	49 1 2
PAP_LLARY ADENOMA	+	-	+	Μ	+	+	-	-	÷	-	+	+	+	-	-	+	-	-	+	-	÷	+	+	+	+	31 1
ZR OUS SYSTEM																									+	
BRAIN Meningioma	+	+	+	M	+	+	+	+	+	+	•	+	+	+	+	+	+	+	+	+	+	+	÷	+	+	48 ₁
SPECIAL SENSE ORGANS																										
HARDERIAN GLAND Adenoma, Nos	N	N	N	M	N X	N	N	N	N	н	N	¥ X	N	N	N	N	N	N	N	N	H	N	N	N	N	49× 3
LL OTHER SYSTEMS																									T	
MULTIPLE ORGANS NOS SQUAMOUS CELL CARCINGMA, METASTAT MALIGNANT LYMPHOMA, NOS MALIG.LYMPHOMA, UNDIFFER-TYPE MALIG.LYMPHOMA, LYMPHOGYTIC TYPE MALIG.LYMPHOMA, HISTIOCYTIC TYPE MALIGNANT LYMPHOMA, MIXED TYPE MYELOMONOCYTIC LEUKEMIA	N	N	н х	м	N X	N	N	N	N	N		N X	N	4	N I	N 1	4 P	K I	N		N X	N	H	N	N	49× 1 2 3 2 2

TABLE B4. FEMALE MICE: TUMOR PATHOLOGY (CONTINUED) DOSED GROUP

* ANIMALS NECROPSIED +: TISSUE EXAMINED MICROSCOPICALLY -: REQUIRED TISSUE NOT EXAMINED MICROSCOPICALLY X! TUMOR INCODENCE N: NECROPSY, NO AUTOLYSIS, NO MICROSCOPIC EXAMINATION

* NO TISSUE INFORMATION SUBMITTED C* Necropsy, no Histology due to Protocol A* Autolysis M* Animal Missino B* No Necropsy Performed

APPENDIX C

SUMMARY OF THE INCIDENCE OF NONNEOPLASTIC LESIONS IN RATS ADMINISTERED TRICHLOROETHYLENE IN CORN OIL BY GAVAGE

TABLE C1.

SUMMARY OF THE INCIDENCE OF NONNEOPLASTIC LESIONS IN MALE RATS ADMINISTERED TRICHLOROETHYLENE IN CORN OIL BY GAVAGE

	UNTREATED Control	VEHICLE Control	LOW DOSE	HIGH DOSE
ANIMALS INITIALLY IN STUDY Animals Necropsied Animals examined Histopathologically	50 50 50	50 50 50	50 50 50	50 49 49
INTEGUMENTARY SYSTEM				
NONE	*			
RESPIRATORY SYSTEM				
*NASAL CAVITY Inflammation, suppurative Inflammation, acute	(50)	(50)	(50) 2 (4%)	(49) 1 (2%)
<pre>#TRACHEA LACERATED WOUND PENETRATING WOUND Foreign Material, Nos</pre>	(45)	(44) 2 (5%)	(43) 3 (7%) 1 (2%)	(38) 1 (3%) 3 (8%)
#LUNG/BRONCHIOLE HYPERPLASIA, EPITHELIAL	(49)	(50)	(50) 1 (2%)	(49)
#LUNG EMPHYSEMA, ALVEOLAR COLLAPSE Congestion, Nos Congestion, Passive Edema, Nos Hemorrhage Inflammation, Nos	(49) 3 (6%) 4 (8%) 1 (2%) 3 (6%) 4 (8%)	(50) 3 (6%) 3 (6%) 1 (2%) 6 (12%)	(50) 2 (4%) 9 (18%) 3 (6%) 12 (24%) 1 (2%)	(49) 2 (4%) 1 (2%) 24 (49%) 1 (2%) 6 (12%) 12 (24%)
BRONCHOPNEUMÓNIA, FOCAL Inflammation, focal Inflammation, diffuse Inflammation, interstitial Pneumonia, aspiration	2 (4%) 3 (6%)	1 (2%) 1 (2%) 2 (4%)	1 (2%)	1 (2%) 1 (2%) 1 (2%)
INFLAMMATION, CHRONIC Inflammation, Chronic Focal Inflammation, Focal Granulomatou	1 (2%) 8 (16%)	1 (2%) 20 (40%) 1 (2%)	3 (6%)	5 (10X 1 (2%)

NUMBER OF ANIMALS WITH TISSUE EXAMINED MICROSCOPICALLY * NUMBER OF ANIMALS NECROPSIED

•

	UNTREATED Control	VEHICLE Control	LOW DOSE	HIGH DOSE
CALCIFICATION, FOCAL Foreign Material, Nos Hemoglobin Pigment Hemosiderosis	1 (27)	1 (2%)	4 (8%)	1 (2%) 3 (6%)
HEMOSIDEROSIS		A /////	1 (2%)	
ALVEOLAR MACROPHAGES HYPERPLASIA, ADENOMATOUS	2 (4%)	2 (4%) 1 (2%)	1 (2%)	1 (2%)
HYPERPLASIA, ALVEOLAR EPITHELIUM	1 (2%)			
EMATOPOIETIC SYSTEM				
ISPLEEN Congestion, nos Congestion, chronic passive	(45) 2 (4%) 1 (2%) 1 (2%)	(45) 2 (4%)	(49) 1 (2%)	(44) 4 (9%)
FIBROSIS Fibrosis, focal Necrosis, focal Infarct, nos	1 (2%)	1 (2%)		1 (2%)
HEMOSIDEROSIS Hyperplasia, nodular		2 (4%)		3 (7%) 1 (2%)
HYPERPLASIA, RETICULUM CELL Hyperplasia, lymphoid Hematopoiesis Erythropoiesis	1 (2%) 1 (2%) 4 (9%) 1 (2%)	1 (2%) 2 (4%)	6 (12%)	3 (7%)
LYMPH NODE Hemorrhage	(28)	(18)	(29)	(24)
HYPERPLASIA, NOS	1 (4%)			1 (4%)
MANDIBULAR L. NODE Hemorrhage	(28)	(18)	(29) 2 (7%)	(24) 1 (4%)
MESENTERIC L. NODE Lymphedema	(28)	(18)	(29)	(24) 1 (4%)
HEMORRHAGE	2 (7%)	2 (11%)	1 (3%)	1 (4%)
LUNG Leukemoid reaction	(49) 1 (2%)	(50)	(50)	(49)
LIVER LEUKEMOID REACTION	(49)	(49) 1 (2%)	(49)	(49)
THYMUS HEMORRHAGE	(22)	(19)	(13) 1 (8%)	(22)

	UNTREATED Control	CONTROL	LOW DOSE	HIGH DOSE
INVOLUTION, NOS			1 (8%)	
CIRCULATORY SYSTEM				
*ABDOMINAL CAVITY Periarteritis	(50) 1 (2%)	(50)	(50)	(49)
#SPLEEN Thrombus, organized	(45) 1 (2%)	(45)	(49)	(44)
#LUNG Perivasculitis	(49) 2 (4%)	(50) 1 (2%)	(50)	(49)
#HEART THROMBOSIS, NOS THROMBUS, MURAL INFLAMMATION, FOCAL INFLAMMATION, ACUTE FOCAL INFLAMMATION, CHRONIC FOCAL FIBROSIS, FOCAL FIBROSIS, FOCAL FIBROSIS, CONDENSATION PERIARTERITIS NECROSIS, FOCAL NECROSIS, DIFFUSE CALCIFICATION, METASTATIC	(49) 1 (2%) 23 (47%) 14 (29%) 1 (2%) 1 (2%) 1 (2%) 1 (2%) 1 (2%)	(50) 1 (2%) 15 (30%) 20 (40%)	(49) 1 (2%) 1 (2%) 2 (4%) 6 (12%) 14 (29%)	(48) 3 (6%) 1 (2%) 6 (13%) 10 (21%) 2 (4%)
#MYOCARDIUM Inflammation, focal fibrosis	(49)	(50)	(49) 2 (4%)	(48) 1 (2%)
*PANCREATIC ARTERY Arteriosclerosis, Nos	(50) 1 (2%)	(50)	(50)	(49)
#LIVER Thrombosis, Nos Thrombus, organized	(49)	(49)	(49)	(49) 1 (2%) 2 (4%)
*MESENTERY PERIARTERITIS	(50) 1 (2X)	(50)	(50)	(49)
XGENITAL SYSTEM PERIARTERITIS	(50) 1 (2%)	(50)	(50)	(49)

	UNTREATED Control	VEHICLE Control	LOW DOSE	HIGH DOSE
DIGESTIVE SYSTEM				
<pre>\$SALIVARY GLAND Hemorrhage Inflammation, NOS Inflammation, Focal Inflammation acute and chronic</pre>	(45)	(45)	(43) 1 (2%) 1 (2%) 1 (2%)	(36) 1 (3%) 1 (3%)
INFLAMMATION, CHRONIC FOCAL Atrophy, Hos Atrophy, Focal	1 (2%) 1 (2%)	1 (2%)		1 (3%) 1 (3%)
#LIVER Congestion, Nos Congestion, Passive	(49) 1 (2%)	(49) 2 (4%) 2 (4%)	(49) 2 (4%)	(49) 7 (14%
CONGESTION, ACUTE PASSIVE Congestion, Chronic Passive Inflammation, Nos Inflammation, Focal	1 (2%) 1 (2%) 1 (2%)	1 (2%)	1 (2%) 1 (2%)	1 (2%)
INFLAMMATION, CHRONIC Abscess, Chronic Cholangiofibrosis Parasitism	1 (2%) 1 (2%)	1 (2%)	1 (2%)	1 (2%)
NECROSIS, FOCAL Necrosis, Central Metamorphosis fatty Pigmentation, Nos	5 (10%) 1 (2%) 3 (6%) 1 (2%)	1 (2%) 2 (4%) 5 (10%)	1 (2%) 2 (4%)	1 (2%) 1 (2%) 1 (2%)
KARYOPYKNOSIS Cytoplasmic Vacuolization Basophilic Cyto Change Clear-Cell Change	1 (2%) 14 (29%) 1 (2%)	3 (6%) 3 (6%) 2 (4%)	1 (2%) 3 (6%) 3 (6%)	1 (2%) 4 (8%)
ATROPHY, FOCAL Hyperplasia, secondary				1 (2%) 1 (2%)
<pre>#INTRAHEPATIC BILE DU Hyperplasia, focal</pre>	(49)	(49)	(49) 1 (2%)	(49)
<pre>#PANCREAS Inflammation acute and chronic fibrosis, focal Necrosis, hemorrhagic</pre>	(46) 1 (2%) 1 (2%)	(47) 1 (2%)	(44)	(40)
ATROPHY, NOS Atrophy, Focal	1 (2%) 1 (2%) 2 (4%)	2 (4%) 5 (11%)	1 (2%) 5 (11%)	2 (5%)
#ESOPHAGUS LACERATED_WOUND	(48)	(47)	(50)	(45)

NUMBER OF ANIMALS WITH TISSUE EXAMINED MICROSCOPICALLY * Number of Animals necropsied

	UNTREATED Control	VEHICLE Control	LOW DOSE	HIGH DOSE
PENETRATING WOUND Impaction, nos	1 (2%)			2 (4%)
<pre>#STOMACH CYST, NOS INFLAMMATION, CHRONIC FOCAL Calcification, metastatic</pre>	(48)	(47)	(48) 1 (2%)	(46) 1 (2%)
#GASTRIC MUCOSA ULCER, NOS Fibrosis	(48) 1 (2%) 1 (2%)	(47)	(48)	(46)
<pre>#PYLORUS Atrophy, Nos</pre>	(48) 1 (2%)	(47)	(48)	(46)
#DUODENUM Ectopia	(45)	(48) 1 (2%)	(47)	(44)
#ILEUM PARASITISM	(45) 1 (2%)	(48)	(47)	(44)
#COLON ULCER, ACUTE Parasitism	(41) 1 (2%) 5 (12%)	(42) 9 (21%)	(45) 9 (20%)	(39) 4 (10%
#COLONIC MUCOSA Fibrosis	(41) 1 (2%)	(42)	(45)	(39)
*RECTUM Inflammation, acute Parasitism	(50) 1 (2%)	(50) 2 (4%)	(50)	(49) 2 (4%)
RINARY SYSTEM				
CONGENITAL HYPOPLASIA Cyst, Nos Congestion, Nos Hemorrhage	(49) 1 (2%) 1 (2%)	(48) 1 (2%) 1 (2%) 1 (2%)	(49) 1 (2%)	(49) 1 (2%)
GLOMERULONEPHRITIS, MEMBRANOUS Inflammation, acute focal Glomerulonephritis, subacute Nephropathy Degeneration, granular	1 (2%) 43 (88%)	1 (2%) 41 (85%) 1 (2%)	29 (59%)	18 (37%

	UNTREATED Control	VEHICLE Control	LOW DOSE	HIGH DOSE
METAMORPHOSIS FATTY CALCIFICATION, FOCAL CALCIFICATION, METASTATIC PIGMENTATION, NOS Hemosiderosis Cytomegaly	1 (2%) 2 (4%) 2 (4%)	1 (2%) 2 (4%) 1 (2%)	5 (10%) 48 (98%)	48 (98%)
HYPERPLASIA, TUBULAR CELL				1 (2%)
RIGHT KIDNEY Nephropathy	(49)	(48)	(49) 1 (2%)	(49)
#LEFT KIDNEY Hypoplasia, Nos	(49)	(48)	(49) 1 (2%)	(49)
#KIDNEY/CORTEX Hemorrhage	(49)	(48)	(49)	(49) 1 (2%)
ENDOCRINE SYSTEM				
<pre>#PITUITARY CYST, NOS Hyperplasia, Focal</pre>	(39) 1 (3%) 1 (3%)	(42) 1 (2%)	(35)	(26)
HYPERPLASIA, CHROMOPHOBE-CELL	1 (3%)	1 (2%)	1 (3%)	
#ADRENAL Agenesis Hemorrhage	(45) 1 (2%)	(45)	(42) 1 (2%)	(44)
CALCIFICATION, FOCAL Angiectasis	5 (11%)	4 (9%)	1 (2%)	1 (2X) 2 (5%)
#ADRENAL CORTEX Hemorrhage	(45)	(45) 1 (2X)	(42)	(44) 1 (2%)
NECROSIS, FOCAL Metamorphosis fatty Hyperplasia, focal	2 (4%) 1 (2%)	1 (2%) 1 (2%)	1 (2%) 1 (2%)	1 (2%) 1 (2%)
#ADRENAL MEDULLA Hyperplasia, focal	(45) 1 (2%)	(45) 2 (4%)	(42)	(44)
#THYROID	(44)	(44)	(43)	(39)
CYST, NOS Hyperplasia, C-Cell	9 (20%)	8 (18%)	1 (2%)	
#PARATHYROID Hyperplasia, focal	(25)	(22)	(26)	(24)

	UNTREATED Control	VEHICLE Control	LOW DOSE	HIGH DOSE
REPRODUCTIVE SYSTEM				
¥MAMMARY GLAND Cyst, NOS Lactation	(50) 4 (8%)	(50) 1 (2%) 1 (2%)	(50) 1 (2%)	(49)
*PREPUTIAL GLAND Inflammation, Calc granulomatous	(50)	(50)	(50) 1 (2%)	(49)
*PROSTATE EDEMA, NOS INFLAMMATION, NOS INFLAMMATION, FOCAL INFLAMMATION, DIFFUSE INFLAMMATION ACUTE AND CHRONIC INFLAMMATION, CHRONIC FOCAL CORPORA AMYLACEA HYPERPLASIA, FOCAL	(46) 5 (11%) 18 (39%) 1 (2%) 1 (2%) 1 (2%) 1 (2%) 31 (67%) 2 (4%)	(47) 3 (6%) 21 (45%) 20 (43%) 2 (43%)	(45) 1 (2%) 2 (4%) 7 (16%) 25 (56%) 4 (9%)	(45) 1 (2%) 5 (11%) 17 (38% 4 (9%)
*SEMINAL VESICLE	(50) 1 (2%)	(50) 1 (2X)	(50)	(49) 1 (2X) 1 (2X)
CRYPTORCHISM CALCIFICATION, FOCAL ATROPHY, NOS Atrophy, Focal Aspermatogenesis Hypospermatogenesis	(47) 3 (6%) 2 (4%)	(49) 1 (2%) 1 (2%)	(49) 1 (2%) 2 (4%) 1 (2%)	(46) 1 (2x) 1 (2x) 1 (2x) 2 (4x) 1 (2x) 3 (7x)
#LEFT TESTIS Atrophy, Nos Hyperplasia, interstitial cell	(47) 1 (2%)	(49) 1 (2%)	(49)	(46)
NERVOUS SYSTEM				
#BRAIN Necrosis, Focal	(49)	(50)	(49)	(48)

NUMBER OF ANIMALS WITH TISSUE EXAMINED MICROSCOPICALLY * NUMBER OF ANIMALS NECROPSIED

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	UNTREATED Control	VEHICLE Control	LOW DOSE	HIGH DOSE
SPECIAL SENSE ORGANS				
*EYE Lacerated wound	(50)	(50) 1 (2%)	(50)	(49)
*TARSAL GLAND Cyst, Nos	(50)	(50)	(50) 1 (2%)	(49)
*HARDERIAN GLAND Inflammation, Focal	(50)	(50)	(50) 2 (4%)	(49)
INFLAMMATION ACUTE AND CHRONIC Inflammation, chronic focal	1 (2%) 2 (4%)	3 (6X)	5 (10%)	13 (27%
*EUSTACHIAN TUBE Inflammation, suppurative	(50)	(50) 1 (2%)	(50)	(49)
1USCULOSKELETAL SYSTEM	- ,			
*MUSCLE HIP/THIGH Necrosis, Nos Necrosis, Focal	(50) 1 (2%)	(50) 1 (2%)	(50) 1 (2X)	(49)
ODY CAVITIES				
*ABDOMINAL CAVITY Necrosis, fat Infarct, nos	(50)	(50) 1 (2%)	(50)	(49) 1 (2%)
<pre>#PERITONEUM Inflammation, Chronic Infarct, Nos</pre>	(50)	(50)	(50)	(49) 1 (2%) 1 (2%)
*PERITONEAL CAVITY Hemorrhage, Chronic Hemoperitoneum Foreign Material, Nos	(50)	(50)	(50) 1 (2%) 1 (2%)	(49) 1 (2%)
*PLEURAL CAVITY Foreign Material, Nos	(50)	(50)	(50)	(49) 1 (2X)
MESENTERY INFARCT, NOS	(50)	(50) 4 (8%)	(50) 6 (12%)	(49)

TABLE C1. MALE RATS: NONNEOPLASTIC LESIONS (CONTINUED	TABLE C1.	MALE RATS:	NONNEOPLASTIC LESIONS	(CONTINUED
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	UNTREATED Control	VEHICLE Control	LOW DOSE	HIGH DOSE
INFARCT, HEALED	1 (2%)	1 (2%)		
LL OTHER SYSTEMS				
XMULTIPLE ORGANS Jaundice, Nos	(50) 1 (2%)	(50) 1 (2%)	(50)	(49)
ADIPOSE TISSUE Hemorrhage Inflammation, focal Infarct, hos	1	3	1 1 3	5
OMENTUM Infarct, nos				1
PECIAL MORPHOLOGY SUMMARY		x		
AUTO/NECROPSY/HISTO PERF Autolysis/No necropsy	1			1
NUMBER OF ANIMALS WITH TISSUE EX Number of Animals Necropsied	AMINED MICROSCOPI	CALLY		

TABLE C2.

SUMMARY OF THE INCIDENCE OF NONNEOPLASTIC LESIONS IN FEMALE RATS ADMINISTERED TRICHLOROETHYLENE IN CORN OIL BY GAVAGE

	UNTREATED Control	CONTROL	LOW DOSE	HIGH DOSE
ANIMALS INITIALLY IN STUDY Animals Necropsied Animals Examined Histopathologically		50 50 50	50 50 50	50 50 50
INTEGUMENTARY SYSTEM				
¥SUBCUT TISSUE Abscess, Nos Granuloma, Foreign Body	(49)	(50) 1 (2%)	(50) 1 (2X)	(50)
RESPIRATORY SYSTEM				•
*NASAL CAVITY Inflammation, suppurative Inflammation, chronic	(49) 1 (2X)	(50) 1 (2X)	(50) 1 (2%)	(50) 1 (2X)
#TRACHEALacerated woundForeign material, Nos	(40)	(46)	(46) 2 (4X) 1 (2X)	(45) 1 (2%)
<pre>#LUNG/BRONCHUS INFLAMMATION, NOS</pre>	(49)	(50) 1 (2%)	(49)	(50)
FOREIGN BODY, NOS Emphysema, alveniad.	(49) 1 (2%) 2 (4%) 8 (16%) 7 (14%) 2 (4%) 1 (2%)	(50) 1 (2x) 1 (2x) 5 (10x) 2 (4x) 6 (12x)	(49) 1 (2%) 1 (2%) 6 (12%) 3 (6%) 13 (27%)	(50) 13 (26%) 5 (10%) 12 (24%) 1 (2%)
INFLAMMATION, FOCAL Inflammation, interstitial Inflammation, acute focal		3 (6%) 23 (46%)	1 (2X) 1 (2X) 1 (2X)	2 (4%)
INFLAMMATION, CHRONIC FOCAL Inflammation, focal granulomatou Foreign material, nos	10 (20%)	23 (46%) <u>1 (2%)</u>	11 (22%) 1 (2%)	7 (14%) <u>4 (8%)</u>

	UNTREATED Control	VEHICLE Control	LOW DOSE	HIGH DOSE
ALVEOLAR MACROPHAGES Hyperplasia, Adenomatous	2 (4X)	1 (2%)	1 (2X)	
HEMATOPOIETIC SYSTEM				
BONE MARROW_	(47)	(46) 1 (2%)	(48)	(46)
HEMORRHAGE Hyperplasia, Erythroid Hyperplasia, granulocytic Hypoplasia, hematopoietic	1 (2X)		1 (2%)	1 (2%)
SPLEEN	(47) 2 (4%)	(50)	(49) 1 (2X) 1 (2X)	(44)
INFLAMMATION ACUTE AND CHRONIC Inflammation, focal granulomatou Fibrosis, diffuse	1 (2%)			1 (2%)
INFARCT, NOS Hemosiderosis Lymphoid Depletion	1 (2%) 6 (13%)	4 (8X)	3, (6%)	5 (11X 1 (2X)
HYPERPLASIA, FOCAL Hematopoiesis Erythropoiesis	1 (2%) 3 (6%) 1 (2%)	1 (2%)	3 (6%)	5 (11%
SLYMPH NODE INFLAMMATION, FOCAL	(23)	(26)	(23)	(26) 1 (4X)
#MANDIBULAR L. NODE Plasmacytosis	(23)	(26) 1 (4%)	(25)	(26)
#MESENTERIC L. NODE EDEMA, NOS	(23)	(26)	(25)	(26)
HEMORHAGE Plasmacytosis	1 (4%) 1 (4%)			
#LIVER ERYTHROPOIESIS	(49)	(50)	(48) . 1 (2X)	(48)
#ADRENAL Hematopoiesis	(45) 1 (2X)	(46)	(48)	(47)
THYMUS HEMORRHAGE	(23)	(25)	(26) 1 (4X)	(22)
INVOLUTION, NOS		1 (4%)		

	UNTREATED Control	VEHICLE Control	LOW DOSE	HIGH DOSE
CIRCULATORY SYSTEM				
#LUNG PERIVASCULITIS	(49) 2 (4%)	(50)	(49)	(50)
INFLAMMATION, FOCAL Inflammation, multifocal	(49) 2 (4%) 1 (2%) 1 (2%)	(50)	(49)	(50) 1 (2%)
INFLAMMATION, CHRONIC FOCAL Fibrosis Fibrosis, focal Scar Necrosis, focal	1 (2%) 14 (29%) 5 (10%)	3 (6%) 3 (6%) 1 (2%)	1 (2%) 8 (16%) 1 (2%)	1 (2%) 1 (2%) 4 (8%)
#MYOCARDIUM Fibrosis Calcification, focal	(49) 1 (2%)	(50) 1 (2%)	(49)	(50)
*AORTA Periarteritis	(49)	(50) 1 (2%)	(50)	(50)
#ADRENAL Thrombosis, Nos	(45) 1 (2X)	(46)	(48)	(47)
DIGESTIVE SYSTEM				
<pre>\$SALIVARY GLAND INFLAMMATION, NOS</pre>	(46)	(48) 1 (2%)	(42)	(46)
#LIVER CYST, NOS Congestion, Nos Congestion, Passive	(49) 1 (2%) 1 (2%)	(50) 1 (2%)	(48)	(48) 1 (2%)
HEMORRHAGE Inflammation, focal Inflammation, multifocal Inflammation, chronic focal Inflammation, focal granulomatou	1 (2%) 8 (16%) 1 (2%) 1 (2%)	12 (24%)	8 (17%) 1 (2%) 1 (2%)	7 (15%)
CHOLANGIOFIBROSIS Necrosis, focal Necrosis, central	1 (2X) 2 (4X)	1 (2X) 3 (6X)	4 (8%)	
METAMORPHOSIS FATTY Pigmentation, Nos	5 (10%) 1 (2%)	6 (12X) 2 (4X)	3 (6%) 2 (4%)	2 (4%)

	UNTREATED Control	VEHICLE Control	LOW DOSE	HIGH DOSE
CYTOPLASMIC CHANGE, NOS Cytoplasmic vacuolization Basophilic cyto change Eosinophilic cyto change Clear-Cell change Depletion, glycogen Hyperplasia, Nodular	27 (55%) 1 (2%) 1 (2%)	27 (54X) 1 (2X) 1 (2X)	9 (19%) 3 (6%) 1 (2%) 6 (13%)	1 (2X) 2 (4X) 2 (4X) 1 (2X) 7 (15X
<pre>#INTRAHEPATIC BILE DU Hyperplasia, Nos</pre>	(49) 1 (2X)	(50)	(48)	(48)
<pre>#PANCREAS DILATATION/DUCTS Inflammation, focal Atrophy, Nos Atrophy, focal</pre>	(46)	(48) 1 (2X) 1 (2X) 2 (4X)	(47) 1 (2X)	(44) 1 (2X)
<pre>#ESOPHAGUS LACERATED WOUND PENETRATING WOUND PERFORATING WOUND IMPACTION, NOS</pre>	(49)	(48) 1 (2X) 2 (4X)	(47) 1 (2X)	(50) 1 (2%) 1 (2%)
#STOMACH Ulcer, Nos Inflammation, acute focal	(46) 1 (2X)	(50) 1 (2%) 1 (2%)	(48)	(43)
#GASTRIC MUCOSA Ulcer, acute	(46)	(50) 1 (2X)	(48)	(43)
#DUQDENUM Adhesion, Nos	(44) 1 (2%)	(47)	(45)	(45)
#COLON Parasitism	(39) 6 (15%)	(47) 4 (9%)	(45) 6 (13X)	(40) 2 (5%)
*RECTUM PARASITISM	(49) 2 (4%)	(50)	(50) 1 (2X)	(50) 1 (2x)
RINARY SYSTEM				
*URINARY TRACT Dilatation, Nos	(49) 1 (2%)	(50)	(50)	(58)
#KIDNEY Congenital Hydronephrosis	(48)	(50)	(49)	(48)

	UNTREATED Control	VEHICLE Control	LOW DOSE	HIGH DOSE
HYDRONEPHROSIS	2 (4%)			
CYST, NOS			1 (2%)	
HEMATOMA, NOS Inflammation, interstitial		1 (2%)	1 (2%)	
GLOMERULONEPHRITIS, MEMBRANOUS	1 (2%)	(23)		
PYELONEPHRITIS, ACUTE				1 (2%)
FIBROSIS, DIFFUSE		1 (2%)		
NEPHROPATHY Nephrosis, nos	24 (50%) 1 (2%)	9 (18%) 2 (4%)	4 (8%)	2 (4X)
INFARCT, NOS	1 (24)	2 (4%)		
CALCIFICATION, FOCAL	8 (17%)	9 (18%)	9 (18%)	2 (4%)
PIGMENTATION, NOS		1 (2%)	1 (2%)	
HEMOSIDEROSIS Cytomegaly	1 (2%)		49 (100X)	48 (100%)
CTTOREGALT			49 (1002)	48 (1002)
<pre>\$KIDNEY/CORTEX NECROSIS, HEMORRHAGIC</pre>	(48)	(50)	(49) 1 (2%)	(48)
#URINARY BLADDER EDEMA, NOS	(41) 1 (2%)	(41)	(46)	(44)
<pre>#PITUITARY CYST, NOS</pre>	(43) 1 (2%)	(37) 4 (11%)	(34)	(41) 3 (7%)
CYST, NOS Multiple cysts	1 (2%)			3 (7X)
HEMORRHAGE	2 (5%)	1 (3%) 1 (3%)		1 (2X)
HEMORRHAGIC CYST			1 (3%)	
HEMOSIDEROSIS Hyperplasia, chromophobe-cell		1 (3%)		
ANGIECTASIS	1 (2%)		1 (3%)	
#ADRENAL	(45)	(46)	(48)	(47)
NECROSIS, CORTICAL		1 (2%)		1 (2%)
METAMORPHOSIS FATTY Hyperplasia, focal			1 (2%)	1 (2%)
ANGIECTASIS	7 (16%)	7 (15%)	11 (23X)	8 (17%)
#ADRENAL CORTEX Hemorrhage	(45) 1 (2%)	(46) 2 (4%)	(48) 1 (2X)	(47)
METAMORPHOSIS FATTY	3 (7%)	2 (4%)	((2 %)	1 (2%)
HYPERTROPHY, FOCAL				1 (2%)
HYPERPLASIA, FOCAL	2 (4%)		1 (2%)	5 (112)
#ADRENAL MEDULLA	(45)	(46)	(48)	(47)
HYPERPLASIA, FOCAL		2 (4%)		

* NUMBER OF ANIMALS WITH TISSUE EXAMINED MICROSCOPICALLY

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	UNTREATED Control	VEHICLE Control	LOW DOSE	HIGH DOSE
<pre>#THYROID Hyperplasia, C-Cell</pre>	(36) 15 (42%)	(41) 8 (20%)	(45) 7 (16%)	(44) 3 (7X)
REPRODUCTIVE SYSTEM				
*MAMMARY GLAND Retention of content Galactocele Inflammation, Mos Cystic Disease Lactation	(49) 2 (4%) 1 (2%) 1 (2%) 3 (6%)	(50) 1 (2%)	(50) 1 (2x) 2 (4x) 1 (2x)	(50) 2 (4%) 1 (2%)
#UTERUS PROLAPSE HYDROMETRA CYST, NOS MULTIPLE CYSTS CONGESTION, NOS HEMORRHAGE HEMATOMETRA INFLAMMATION, CHRONIC	(45) (45) 1 (2%) 1 (2%) 1 (2%)	(48) 2 (4%) 1 (2%)	(48) 1 (2%) 1 (2%) 1 (2%)	(46) 1 (2X) 3 (7X)
#UTERUS/ENDOMETRIUM Cyst, Nos Multiple Cysts Fibrosis Hyperplasia, Cystic	(45) 2 (4%)	(48) 1 (2%)	(48) 1 (2%) 1 (2%)	(46) 1 (2X) 2 (4X)
#OVARY CYST, NOS Follicular Cyst, Nos Fibrosis, Diffuse	(44) 1 (2%)	(46) 5 (11%) 1 (2%)	(47) 2 (4%) 1 (2%)	(44) 2 (5X)
NERVOUS SYSTEM				
<pre>#BRAIN/MENINGES</pre>	(48)	(50)	(50) 1 (2%)	(49)
#BRAIN Glidsis Necrosis, Hemorrhagic Calcification, Focal	(48) 1 (2%)	(50)	(50)	(49) 1 (2%)

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TABLE C2. FEMALE RATS: NONNEOPLASTIC LESIONS (CONTINUED)

(49)	(50) 1 (2%)	(50)	(50)
(49) 1 (2X)	(50)	(50)	(50) 1 (2%)
	(50) 1 (2X)	(50)	(50)
5 (10%)		7 (14%)	19 (38%)
(49)	(50)	(50)	(50) 1 (2x)
(49)	(50)	(50)	(50) 1 (2X)
(49) 2 (4%)	(50) 1 (2%)	(50)	(50)
(49)	(50)	(50) 1 (2%)	(50)
(49)	(50)	(50)	(50) 1 (2X) 3 (6X)
	1 (2%)		
(49)	(50)	(50)	(50)
	CONTROL (49) (49) 1 (2X) (49) 1 (2X) 5 (10X) (49) (49) (49) (49) (49) (49) (49) (49) (49) (49) (49) (49)	CONTROL CONTROL (49) (50) (49) (50) (49) (50) (49) (50) (49) (50) (49) (50) (49) (50) (49) (50) (49) (50) (49) (50) (49) (50) (49) (50) (49) (50) (49) (50) (49) (50) (49) (50) (49) (50) (49) (50) (49) (50) (1 (2x)) 1 (2x)	CONTROL CONTROL LOW DOSE (49) (50) (50) (49) (50) (50) (49) (50) (50) (49) (50) (50) (49) (50) (50) 1 (2x) (50) (50) (49) (50) (50) (49) (50) (50) (49) (50) (50) (49) (50) (50) (49) (50) (50) (49) (50) (50) (49) (50) (50) (49) (50) (50) (49) (50) (50) (49) (50) (50) (49) (50) (50) (49) (50) (50) (49) (50) (50) (49) (50) (50) (49) (50) (50)

	UNTREATED Control	VEHICLE Control	LOW DOSE	HIGH DOS
ADIPOSE TISSUE				
INFARCT, NOS Infarct, focal Infarct, acute Infarct, healed	2	3	1	1
OMENTUM Infarct, Nos			1	
INFARCT, NOS			1	
ECIAL MORPHOLOGY SUMMARY				
AUTO/NECROPSY/HISTO PERF Autolysis/no necropsy	1			1
NUMBER OF ANIMALS WITH TISSUE EX/ Number of Animals Necropsied	MINED MICROSCOPI	CALLY		

APPENDIX D

SUMMARY OF THE INCIDENCE OF NONNEOPLASTIC LESIONS IN MICE ADMINISTERED TRICHLOROETHYLENE IN CORN OIL BY GAVAGE

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SUMMARY OF THE INCIDENCE OF NONNEOPLASTIC LESIONS IN MALE MICE ADMINISTERED TRICHLOROETHYLENE IN CORN OIL BY GAVAGE

	VEHICLE Control	DOSED GROUP
ANIMALS INITIALLY IN STUDY ANIMALS NECROPSIED ANIMALS EXAMINED HISTOPATHOLOGICALLY	50 50 49	50 50 50
INTEGUMENTARY SYSTEM		
*SKIN EPIDERMAL INCLUSION CYST ULCER, NOS ACARIASIS	(50) 1 (2%)	(50) 1 (2%) 1 (2%) 8 (16%)
*SUBCUT TISSUE Abscess, Chronic	(50) 1 (2%)	(50)
RESPIRATORY SYSTEM		
*NASAL CAVITY Inflammation, suppurative	(50)	(50) 3 (6%)
*LARYNX Ulcer, acute	(50)	(50) 1 (2%)
#TRACHEA Penetrating wound Hemorrhage	(23)	(27) 1 (4%) 1 (4%)
#LUNG/BRONCHIOLE Hyperplasia, focal	(49)	(50) 1 (2%)
#LUNG CONGESTION, NOS EDEMA, NOS HEMORRHAGE BRONCHOPNEUMONIA, FOCAL PNEUMONIA, ASPIRATION BRONCHOPNEUMONIA, CHRONIC INFLAMMATION, CHRONIC FOCAL FOREIGN MATERIAL, NOS	(49) 3 (6%) 6 (12%) 9 (18%) 1 (2%) 3 (6%) 4 (8%)	(50) 12 (24%) 2 (4%) 7 (14%) 6 (12%) 1 (2%) 3 (6%) 1 (2%)

TABLE D1.	MALE MICE:	NONNEOPLASTIC	LESIONS (CONTINUED)
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	VEHICLE Control	DOSED GROUP
PIGMENTATION, NOS Alveolar MacRophages Hyperplasia, Adenomatous	1 (2%) 2 (4%)	1 (2%)
HYPERPLASIA, ALVEOLAR EPITHELIUM	2 (4%)	
NATOPOIETIC SYSTEM		
ONE MARROW Hyperplasia, granulocytic	(49) 3 (6%)	(49) 2 (4%)
PLEEN Atrophy, Nos	(48)	(42) 1 (2%)
HYPERPLÁSIA, NOS Hyperplasia, focal Hyperplasia, lymphoid Hematopoiesis Erythropoiesis	1 (2%) 1 (2%) 3 (6%)	1 (2%) 3 (7%) 1 (2%)
YMPH NODE Abscess, nos Plasmacytosis	(31) 1 (3%) 1 (3%)	(30)
PANCREATIC L.NODE Hemorrhage	(31)	(30) 1 (3%)
ESENTERIC L. NODE Hemorrhage	(31) 9 (29%)	(30) 7 (23%)
INFLAMMATION, ACUTE Hyperplasia, lymphoid	1 (3%)	1 (3%)
IVER Hematopoiesis	(48) 1 (2%)	(50) 1 (2%)
'EYER'S PATCH Hyperplasia, Lymphoid	(43)	(47) 1 (2%)
HYMUS Involution, NOS	(16)	(15) 1 (7%)
CULATORY SYSTEM		
ARYNGEAL MUSCLE PERIARTERITIS	(50)	(50)

	VEHICLE CONTROL	DOSED GROUP	
<pre>#HEART FIBROSIS, FOCAL PERIARTERITIS NECROSIS, HEMORRHAGIC INFARCT, ACUTE CALCIFICATION, FOCAL MELANIN #LIVER</pre>	(49) 1 (2%) 1 (2%) 1 (2%) 2 (4%) (48)	(49) 1 (2X) 2 (4X) (50)	
THROMBOSIS, NOS THROMBUS, ORGANIZED #PANCREAS PERIARTERITIS	(47)	1 (2%) 1 (2%) (46) 1 (2%)	
DIGESTIVE SYSTEM #Salivary gland Inflammation, chronic focal	(37) 1 (3%)	(40) 1 (3%)	
#LIVER INFLAMMATION, FOCAL NECROSIS, NOS NECROSIS, FOCAL INFARCT, NOS INFARCT, FOCAL METAMORPHOSIS FATTY PIGMENTATION, NOS CYTOPLASMIC VACUOLIZATION CYTOPLASMIC VACUOLIZATION HYPERPLASIA, FOCAL	(48) 2 (4%) 1 (2%) 1 (2%) 2 (4%) 1 (2%) 1 (2%) 1 (2%) 1 (2%)	(50) 1 (2%) 4 (8%) 1 (2%) 1 (2%) 1 (2%) 1 (2%) 1 (2%) 1 (2%)	
*GALLBLADDER Necrosis, Nos	(50)	(50) 1 (2%)	
#PANCREAS CYST, NOS Inflammation, Chronic Inflammation, Chronic Focal Atrophy, Nos	(47) 1 (2%) 1 (2%) 1 (2%) 1 (2%)	(46) 1 (2%) 2 (4%)	
#ESOPHAGUS Lacerated Wound	(48)	(44)	

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TABLE D1. MALE MICE: NONNEOPLASTIC LESIONS (CONTINUED)

	VEHICLE Control	DOSED GROUP	
HEMORRHAGE Inflammation, NOS Inflammation, Focal	1 (2%)	1 (2%) 1 (2%) 1 (2%) 1 (2%)	
#STOMACH Inflammation, Nos Inflammation, focal Inflammation, pseudomembranous Ulcer, acute Hyperkeratosis	(48) 1 (2%) 1 (2%)	(47) 2 (4%) 2 (4%) 2 (4%) 2 (4%)	
#GASTRIC MUCOSA Inflammation, nos Inflammation, focal	(48) 1 (2%) 6 (13%)	(47) 1 (2%)	
URINARY SYSTEM			
PYELONEPHRITIS, ACUTE	(49) 1 (2%) 1 (2%) 1 (2%) 2 (4%) 19 (39%) 1 (2%) 1 (2%)	(50) 1 (2%) 2 (4%) 2 (4%) 1 (2%) 1 (2%) 1 (2%) 3 (6%) 45 (90%)	
<pre>#KIDNEY/CORTEX CYTOMEGALY</pre>	(49)	(50) 1 (2%)	
<pre>#PERIRENAL TISSUE INFARCT, FOCAL</pre>	(49) 1 (2%)	(50)	
#URINARY BLADDER Inflammation, chronic focal	(47) 1 (2%)	(47)	
ENDOCRINE SYSTEM			
#ADRENAL Inflammation, acute	(32)	(36)	

	VEHICLE Control	DOSED GROUP
#ADRENAL CORTEX Hemorrhage Hyperplasia, focal	(32)	(36) 1 (3%)
#THYROID CYSTIC FOLLICLES	(31)	(29) 1 (3%)
REPRODUCTIVE SYSTEM		
<pre>#PROSTATE INFLAMMATION, ACUTE INFLAMMATION, ACUTE SUPPURATIVE HYPERPLASIA, NOS</pre>	(44) 1 (2%) 1 (2%)	(44) 1 (2%)
*SEMINAL VESICLE Inflammation, suppurative	(50) 1 (2%)	(50)
#TESTIS Hemorrhage Calcification, focal	(49)	(49) 1 (2%) 1 (2%)
*EPIDIDYMIS SPERMATOCELE Inflammation, suppurative Granuloma, spermatic	(50)	(50) 1 (2%) 1 (2%)
NERVOUS SYSTEM		
#BRAIN NECROSIS, ISCHEMIC Calcification, focal	(48) <u>6 (13%)</u>	(49) 1 (2%) 5 (10%)
SPECIAL SENSE ORGANS		
*NASOLACRIMAL DUCT Inflammation, suppurative	(50)	(50) 1 (2X)
MHARDERIAN GLAND Hyperplasia, focal	(50)	(50) 1 (2X)
MIDDLE EAR Inflammation, Chronic	(50)	(50)

	VEHICLE Control	DOSED GROUP
INFLAMMATION, CHRONIC SUPPURATIV METAPLASIA, SQUAMOUS	1 (2%)	1 (2%)
MUSCULOSKELETAL SYSTEM		
*VERTEBRAL COLUMN Abscess, chronic	(50) 1 (2%)	(50)
*THORACIC VERTEBRA Fracture, NOS	(50)	(50) 1 (2%)
BODY CAVITIES		
*THORAX HEMOPNEUMOTHORAX	(50)	(50) 1 (2%)
*THORACIC CAVITY Hemothorax	(50)	(50) 1 (2%)
*MEDIASTINUM Abscess, chronic	(50) 1 (2%)	(50)
*ABDOMINAL CAVITY Hemoperitoneum	(50)	(50) 1 (2%)
*PERITONEUM Inflammation, nos Inflammation, chronic	(50)	(50) 1 (2%) 1 (2%)
*PERICARDIUM Inflammation, Nos	(50) 1 (2%)	(50)
*MESENTERY Inflammation, acute	(50)	(50) 1 (2%)
ALL OTHER SYSTEMS		
NECK Abscess, Nos		1
ADIPOSE TISSUE Infarct, nos		

	VEHICLE Control	DOSED GROUP	
PLEURAL CAVITY Hemothorax		1	
SPECIAL MORPHOLOGY SUMMARY			
AUTO/NECROPSY/HISTO PERF Auto/Necropsy/no histo	1	2	
<pre># NUMBER OF ANIMALS WITH TISSUE EX/ * NUMBER OF ANIMALS NECROPSIED</pre>	MINED MICROSCOP	ICALLY	

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TABLE D2.

SUMMARY OF THE INCIDENCE OF NONNEOPLASTIC LESIONS IN FEMALE MICE ADMINISTERED TRICHLOROETHYLENE IN CORN OIL BY GAVAGE

	VEHICLE Control	DOSED GROUP
ANIMALS INITIALLY IN STUDY Animals missing Animals necropsied Animals examined histopathologically	50 2 48	50 · 1 4 9 4 9
INTEGUMENTARY SYSTEM		
*SKIN ACARIASIS	(48) 10 (21%)	(49)
RESPIRATORY SYSTEM		
*NASAL CAVITY Inflammation, suppurative Inflammation, chronic Inflammation, chronic suppurativ	(48) 1 (2%)	(49) 3 (6%) 1 (2%) 1 (2%)
INFLAMMATION, ACUTE FOCAL Bronchopneumonia, chronic Inflammation, chronic focal	(48) 4 (8%) 2 (4%) 14 (29%) 1 (2%) 3 (6%)	(48) 7 (15%) 6 (13%) 5 (10%) 2 (4%) 1 (2%)
HEMOSIDEROSIS Alveolar macrophages	1 (2%)	4 (8%) 1 (2%)
EMATOPOIETIC SYSTEM		
<pre>*MULTIPLE ORGANS HYPERPLASIA, LYMPHOID</pre>	(48) 1 (2%)	(49)
#BONE MARROW Hyperplasia, granulocytic	(48) 2 (4%)	(49) 5 (10%)
#SPLEEN Inflammation with fibrosis Hemosiderosis	(47)	(48) 1 (2%) 1 (2%)

	VEHICLE Control	DOSED Group
HYPERPLASIA, RETICULUM CELL Hyperplasia, lymphoid Hematopoiesis Erythropoiesis	1 (2%) 4 (9%) 3 (6%)	2 (4%) 1 (2%) 2 (4%)
#MESENTERIC L. NODE Hemorrhage Hyperplasia, reticulum cell	(22) 3 (14%) 1 (5%)	(36) 7 (19%)
*VERTEBRAL COLUMN Myelofibrosis	(48) 28 (58%)	(49) 10 (20%)
#LIVER HEMATOPOIESIS	(48) 2 (4%)	(49)
<pre>#THYMUS Involution, Nos</pre>	(25)	(17) 1 (6%)
CIRCULATORY SYSTEM		
<pre>#BRAIN/MENINGES PERIARTERITIS</pre>	(48)	(48) 1 (2%)
*MULTIPLE ORGANS PERIARTERITIS	(48) 1 (2%)	(49)
#LUNG PERIVASCULITIS	(48) 2 (4%)	(48) 1 (2%)
#HEART CALCIFICATION, FOCAL	(47)	(48) 2 (4%)
#LIVER Thrombosis, nos	(48)	(49) 1 (2%)
DIGESTIVE SYSTEM		
#SALIVARY GLAND Inflammation, acute Inflammation, chronic focal	(39) 10 (26%)	(35) 1 (3%) 4 (11%)
#LIVER INFLAMMATION, NOS	(48)	(49)

132

TABLE D2. FEMALE MICE: NONNEOPLASTIC LESIONS (CONTINUED)

Trichloroethylene

	VEHICLE Control	DOSED GROUP
INFLAMMATION, FOCAL Necrosis, focal Necrosis, central Infarct, nos Cytoplasmic vacuolization Clear-cell change	9 (19%) 1 (2%) 1 (2%) 1 (2%)	14 (29%) 1 (2%) 1 (2%) 1 (2%) 1 (2%) 1 (2%)
<pre>#PANCREAS DILATATION/DUCTS HEMORRHAGE ABSCESS, NOS INFLAMMATION, CHRONIC FOCAL INFLAMMATION WITH FIBROSIS ATROPHY, NOS ATROPHY, FATTY</pre>	(47) 3 (6%) 2 (4%)	(49) 1 (2%) 1 (2%) 2 (4%) 1 (2%) 1 (2%)
#ESOPHAGUS DILATATION, NOS	(45)	(43) 1 (2%)
#STOMACH Inflammation, nos Inflammation, focal Inflammation, acute	(47) 1 (2%)	(47) 1 (2%) 1 (2%)
#GASTRIC MUCOSA INFLAMMATION, NOS ULCER, NOS INFLAMMATION, FOCAL INFLAMMATION, CHRONIC	(47) 3 (6%) 2 (4%)	(47) 8 (17%) 1 (2%) 1 (2%)
<pre>#PEYER'S PATCH HYPERPLASIA, NOS</pre>	(45)	(44) 1 (2%)
#DUODENUM Ulcer, Nos Ulcer, Acute	(45)	(44) 1 (2%) 1 (2%)
*RECTUM Inflammation, nos Inflammation, acute	(48) 1 (2%)	(49) 1 (2%)
RINARY SYSTEM		
#KIDNEY CAST, NOS	(48)	(49)

	VEHICLE Control	DOSED Group	
CONGESTION, NOS GLOMERULONEPHRITIS, NOS PYELONEPHRITIS, FOCAL INFLAMMATION, ACUTE FOCAL GLOMERULONEPHRITIS, SUBACUTE	1 (2%) 1 (2%) 1 (2%)	1 (2%) 1 (2%) 1 (2%) 1 (2%)	
DEGENERATION, NOS Calcification, focal	1 (2%) 1 (2%) 1 (2%)	1 (2%)	
PIGMENTATION, NOS Cytomegaly	1 (24)	48 (98%)	
#URINARY BLADDER Edema, NOS Inflammation, Chronic	(41) 2 (5%)	(43) 3 (7%)	
NDOCRINE SYSTEM			
#PITUITARY Hemorrhage Hyperplasia, Chromophobe-Cell	(27) 1 (4%)	(28) 1 (4%)	
#ADRENAL CYST, NOS Congestion, NOS Hemorrhage Amyloid, NOS	(36) 1 (3%)	(37) 1 (3%) 1 (3%) 1 (3%)	
#ADRENAL CORTEX Hyperplasia, focal	(36)	(37) 1 (3%)	
#THYROID CYSTIC FOLLICLES	(33)	(31) 3 (10%)	
EPRODUCTIVE SYSTEM			
*MAMMARY GLAND Galactocele	(48)	(49) 1 (2%)	
#UTERUS HYDROMETRA HEMORRHAGE	(47) 2 (4%) 1 (2%)	(49)	

NUMBER OF ANIMALS WITH TISSUE EXAMINED MICROSCOPICALLY * NUMBER OF ANIMALS NECROPSIED

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	VEHICLE Control	DOSED GROUP
PYOMETRA Inflammation, Chronic	1 (2%) 1 (2%)	2 (4%)
#CERVIX UTERI Inflammation, chronic Hyperplasia, focal	(47)	(49) 1 (2X) 1 (2X)
#UTERUS/ENDOMETRIUM EDEMA, NOS INFLAMMATION, ACUTE HYPERPLASIA, NOS HYPERPLASIA, CYSTIC	(47) 1 (2%) 1 (2%) 2 (4%) 31 (66%)	(49) 28 (57%)
#OVARY CYST, NOS FOLLICULAR CYST, NOS LUTEINIZED FOLLIC CYST Corpus Hemorrhagicum Cyst Parovarian Cyst Hemorrhagic CYST	(27) 9 (33%) 1 (4%)	(31) 3 (10%) 1 (3%) 2 (6%) 1 (3%) 1 (3%)
IERVOUS SYSTEM		
*BRAIN/MENINGES Inflammation with fibrosis	(48)	(48) 1 (2%)
<pre>#BRAIN INFLAMMATION, FOCAL INFLAMMATION, ACUTE FOCAL CALCIFICATION, FOCAL</pre>	(48) 13 (27%)	(48) 1 (2%) 1 (2%) 5 (10%)
*SPINAL CORD CYST, NOS	(48)	(49) 1 (2%)
*SCIATIC NERVE Degeneration, myelin	(48)	(49) 1 (2%)
PECIAL SENSE ORGANS		
*EYE/CORNEA ULCER, PERFORATED	(48) 1 (2%)	(49)
*EYE APPENDAGE Inflammation, acute	(48)	(49) 1 (2%)

	VEHICLE Control	DOSED GROUP
×HARDERIAN GLAND Inflammation, chronic focal	(48) 1 (2%)	(49) 2 (4%)
*MIDDLE EAR Inflammation, suppurative	(48)	(49) 1 (2%)
MUSCULOSKELETAL SYSTEM		
*BONE FIBROUS OSTEODYSTROPHY	(48)	(49) 1 (2%)
*SKULL Inflammation with fibrosis	(48)	(49) 1 (2%)
BODY CAVITIES		
*MEDIASTINUM Inflammation, suppurative	(48)	(49) 1 (2%)
*ABDOMINAL VISCERA Necrosis, fat	(48) 1 (2%)	(49)
*PLEURA Inflammation, suppurative	(48)	(49) 1 (2%)
*MESENTERY Necrosis, nos	(48) 1 (2%)	(49)
ALL OTHER SYSTEMS		
*MULTIPLE DRGANS Pigmentation, nos	(48) 1 (2%)	(49)
NECK Penetrating wound	1	
ADIPOSE TISSUE Inflammation acute and chronic	1	
OMENTUM Infarct, NDS		1

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TABLE D2. FEMALE MICE: NONNEOPLASTIC LESIONS (CONTINUED)

* NUMBER OF ANIMALS WITH TISSUE EXAMINED MICROSCOPICALLY * NUMBER OF ANIMALS NECROPSIED

Trichloroethylene

136

APPENDIX E

HISTORICAL INCIDENCES OF TUMORS IN F344/N RATS AND B6C3F₁ MICE RECEIVING CORN OIL BY GAVAGE FOR TWO YEARS

TABLE E1. HISTORICAL INCIDENCE OF RENAL TUBULAR-CELL ADENOMAS, CARCINOMAS,
OR ADENOCARCINOMAS IN MALE F344/N RATS RECEIVING CORN OIL BY
GAVAGE (a)

Laboratory	Total	Diagnosis		
Frederick	0/52			
Gulf South	1/244	Adenocarcinoma (1/50)		
Hazleton	0/50	_		
Litton	1/130	Adenocarcinoma (1/50)		
Mason	0/25	_		
Papanicolaou	0/48 <i>(b)</i>			
Southern	1/199	Adenocarcinoma (1/50)		
Total	3/748 (0.40%)	<u></u>		

(a) Data as of June 15, 1981 for studies of at least 104 weeks.

(b) This study.

TABLE E2. HISTORICAL INCIDENCE OF MESOTHELIOMAS IN MALE F344/N RATS RECEIVING CORN OIL BY GAVAGE (a)

Laboratory	Total	Site	Designation	
Frederick	1/52	Tunica vaginalis	NOS	
Gulf South	4/245	Hepatic capsule Testis (b) Peritoneum (b) Multiple organs	NOS NOS NOS NOS	
Hazleton	0/50		_	
Litton	1/130	Testis	Malignant	
Mason	2/25	Body cavities, NOS (b) Body cavities, NOS (b)	NOS Malignant	
Papanicolaou	1/50 (c)	Peritoneum	Malignant	
Southern	7/200	Multiple organs (b) Heart (b) Peritoneum (b) Pleura (b) Mesentery (b) Tunica vaginalis (2) (b)	Malignant Malignant Malignant Malignant Malignant NOS	
Total Range:	16/752 (2.1%) High, 3/50; Lo	w, 0/50	,	

(a) Data as of June 15, 1981, for studies of at least 104 weeks. The range is presented for groups of 35 or more animals.

(b) Indicates multiple tumors within a group. Range: High, 3/50; Low, 0/50

(c) This study.

Trichloroethylene

Laboratory	Carcinoma NOS		Adenoma NOS		Chromophobe Adenoma		Chromophobe Carcinoma	
Frederick	4/52	(7.7%)	12/52	(23.1%)	0/52	(0.0%)	0/52	(0.0%)
Gulf South	0/224	(0.0%)	42/224	(18.8%)	21/224	(9.4%)	0/224	(0.0%)
Hazleton	0/43	(0.0%)	0/43	(0.0%)	4/43	(9.3%)	0/43	(0.0%)
Litton	0/121	(0.0%)	2/121	(1.7%)	9/121	(7.4%)	1/121	(0.8%)
Mason	0/22	(0.0%)	0/22	(0.0%)	2/22	(9.1%)	0/22	(0.0%)
Papanicolaou	0/42	(0.0%) <i>(b)</i>	0/42	(0.0%) <i>(b)</i>	7/42	(16.7%) <i>(b)</i>	1/42	(2.4%)(b)
Southern	1/194	(0.5%)	36/194	(18.6%)	0/1 94	(0.0%)	0/194	(0.0%)
Total	5/698	(0.7%)	92/698	(13.2%)	43/698	(6.2%)	2/698	(0.3%)
Overall Historical Range					<u> </u>			
High	4/52		14/44		20/48		1/42	
Low	0/50		0/43		0/52		0/52	

TABLE E3. HISTORICAL INCIDENCE OF PITUITARY TUMORS IN MALE F344/N RATS RECEIVING CORN OIL BY GAVAGE (a)

(a) Data as of June 15, 1981, for studies of at least 104 weeks. The range is presented for groups of 35 or more animals.

(b) This study.

Laboratory		noma OS		noma OS		nophobe noma		inoma
Frederick	7/49	(14.3%)	18/49	(36.7%)	0/49	(0.0%)	0/49	(0.0%)
Gulf South	5/228	(2.2%)	74/228	(32.5%)	23/228	(10.1%)	0/228	(0.0%)
Hazleton	0/50	(0.0%)	0/50	(0.0%)	14/50	(28.0%)	0/50	(0.0%)
Litton	0/126	(0.0%)	1/126	(0.8%)	49/126	(38.9%)	3/126	(2.3%)
Mason	0/23	(0.0%)	0/23	(0.0%)	7/23	(30.4%)	0/23	(0.0%)
Papanicolaou	0/37	(0.0%) <i>(b)</i>	0/37	(0.0%) <i>(b)</i>	13/37	(35 .1%)(b)	0/37	(0.0%) <i>(b)</i>
Southern	3/194	(1.5%)	56/194	(28.9%)	0/194	(0`.0%)	0/194	(0.0%)
Total	15/707	(2.1%)	149/707	(21.1%)	106/707	(15.0%)	3/707	(0.42%)
Overall Historical Range					·····			· · · · · · · · · · · · · · · · · · ·
High	7/49		25/49		25/50		2/50	
Low	0/50		0/50		0/49		0/49	

TABLE E4. HISTORICAL INCIDENCE OF PITUITARY TUMORS IN FEMALE F344/N RATS RECEIVING CORN OIL BY GAVAGE (a)

(a) Data as of June 15, 1981, for studies of at least 104 weeks. The range is presented for groups of 35 or more animals.

(b) This study.

Laboratory		metrial 11 Polyp	Endometrial Stromal Sarcoma		
Frederick	17/51	(33.3%)	2/51	(3.9%)	
Gulf South	35/224	(15.6%)	3/224	(1.3%)	
Hazleton	16/48	(33.3%)	1/48	(2.1%)	
Litton	21/127	(16.5%)	1/127	(0.8%)	
Mason	4/24	(16.7%)	0/24	(0.0%)	
Papanicolaou	15/48	(31.3%)(b)	1/48	(2.1%)(b)	
Southern	45/200	(22.5%)	7/200	(3.5%)	
Total	153/722	(21.2%)	15/722	(2.1%)	
Overall Historical Range					
High	17/51		3/50		
Low	3/45		0/45		

TABLE E5. HISTORICAL INCIDENCE OF UTERINE TUMORS IN FEMALE F344/N RATS RECEIVING CORN OIL BY GAVAGE (a)

(a) Data as of June 15, 1981, for studies of at least 104 weeks. The range is presented for groups of 35 or more animals.

(b) This study.

TABLE E6., HISTORICAL INCIDENCE OF HEMATOPOIETIC TUMORS IN FEMALE F344/N RATS RECEIVING CORN OIL BY GAVAGE (a)

Laboratory	Leukemia		Lymphoma		Lymphoma or Leukemia		
Frederick	13/52	(25.0%)	0/52	(0.0%)	13/52	(25.0%)	
Gulf South	23/245	(9.4%)	6/245	(2.4%)	29/245	(11.8%)	
Hazleton	2/50	(4.0%)	1/50	(2.0%)	3/50	(6.0%)	
Litton	28/130	(21.5%)	2/130	(1.5%)	30/130	(23.1%)	
Mason	0/24	(0.0%)	0/24	(0.0%)	0/24	(0.0%)	
Papanicolaou	14/50	(28.0%) <i>(b)</i>	0/50	(0.0%) <i>(b)</i>	14/50	(28.0%) <i>(b</i>	
Southern	21/200	(10.5%)	2/200	(1.0%)	23/200	(11.5%)	
Total	101/751	(13.4%)	11/751	(1.5%)	112/751	(14.9%)	
Overall Historical Range							
High	21/50		3/49		22/50		
Low	1/49		0/52		2/50		

(a) Data as of June 15, 1981, for studies of at least 104 weeks. The range is presented for groups of 35 or more animals.

(b) This study.

Trichloroethylene

Laboratory	Adenoma		Carcinoma		Adenoma or Carcinoma	
Frederick	0/50	(0.0%)	4/50	(8.0%)	4/50	(8.0%)
Gulf South	27/190	(14.2%)	32/190	(16.8%)	59/190	(31.1%)
Litton	6/119	(5.0%)	18/119	(15.1%)	24/119	(20.2%)
Mason	8/50	(16.0%)	5/50	(10.0%)	13/50	(26.0%)
Papanicolaou	3/48	(6.3%) <i>(b)</i>	8/48	(16.7%)(b)	11/48	(22.9%)(b)
Southern	18/199	(9.0%)	5 3/199	(26.6%)	67/199	(33.7%)
Total	62/656	(9.5%)	120/656	(18.3%)	178/656	(27.1%)
Overall Historical Range						
High	10/48		18/50		22/50	
Low	0/50		4/ 50		4/50	

TABLE E7. HISTORICAL INCIDENCE OF LIVER TUMORS IN MALE B6C3F1 MICE RECEIVING CORN OIL BY GAVAGE (a)

(a) Data as of June 15, 1981, for studies of at least 104 weeks. The range is presented for groups of 35 or more animals.

(b) This study.

TABLE E8. HISTORICAL INCIDENCE OF LIVER TUMORS IN FEMALE B6C3F1 MICE RECEIVING CORN OIL BY GAVAGE (a)

Laboratory	Adenoma		Carcinoma		Adenoma or Carcinoma	
Frederick	0/50	(0.0%)	2/50	(4.0%)	2/50	(4.0%)
Gulf South	13/285	(4.6%)	8/285	(2.8%)	21/285	(7.4%)
Litton	2/118	(1.7%)	3/118	(2.5%)	5/118	(4.2%)
Mason	5/50	(10.0%)	2/50	(4.0%)	7/50	(14.0%)
Papanicolaou	2/48	(4.2%) <i>(b)</i>	2/48	(4.2%) <i>(b)</i>	4/48	(8.3%)(b
Southern	6/200	(3.0%)	5/200	(2.5%)	11/200	(5.5%)
Total	28/751	(3.7%)	22/751	(2.9%)	50/751	(6.7%)
Overall Historical Range						
High	5/50		4/48		7/50	
Low	0/50		0/50		1/50	

(a) Data as of June 15, 1981, for studies of at least 104 weeks. The range is presented for groups of 35 or more animals.

(b) This study.

Laboratory	Leul	Leukemia		Lymphoma		Lymphoma or Leukemia	
Frederick	2/50	(4.0%)	4/50	(8.0%)	6/50	(12.0%)	
Gulf South	16/ 292	(5.5%)	44/292	(15.1%)	60/292	(20.5%)	
Litton	5/119	(4.2%)	30/119	(25.2%)	34/119	(28.6%)	
Mason	0/50	(0.0%)	15/50	(30.0%)	15/50	(30.0%)	
Papanicolaou	0/48	(0.0%) <i>(b)</i>	7/48	(14.6%)(b)	7/48	(14.6%)(b)	
Southern	1/200	(0.5%)	26/200	(13.0%)	27/200	(13.5%)	
Total	24/759	(3.2%)	126/759	(16.6%)	149/759	(19.6%)	
Overall Historical Range							
High	9/49		16/50		20/49		
Low	0/50		2/48		5/50		

TABLE E9. HISTORICAL INCIDENCE OF HEMATOPOIETIC TUMORS IN FEMALE B6C3F1 MICE RECEIVING CORN OIL BY GAVAGE (a)

(a) Data as of June 15, 1981, for studies of at least 104 weeks. The range is presented for groups of 35 or more animals.

(b) This study.

TABLE E10. INCIDENCE OF HARDERIAN GLAND TUMORS IN B6C3F1 MICE RECEIVING CORN OIL BY GAVAGE (a)

Laboratory	Males		Fen	ales
Frederick	0/50	(0.0%)	0/50	(0.0%)
Gulf South	0/191	(0.0%)	0/292	(0.0%)
Litton	2/120	(1.7%)	3/119	(2.5%)
Mason	3/50	(6.0%)	0/50	(0.0%)
Papanicolaou	0/50	(0.0%) <i>(b)</i>	0/48	(0.0%)(b)
Southern	11/200	(5.5%)	3/200	(1.5%)
Total	16/661	(2.4%)	6/759	(0.8%)
Overall Historical Range				
High	4/50		2/50	
Low	0/50		0/50	

(a) Data as of June 15, 1981, for studies of at least 104 weeks. The range is presented for groups of 35 or more animals.

(b) This study.

APPENDIX F

SENTINEL ANIMAL SEROLOGY DATA FOR THE TRICHLOROETHYLENE STUDIES

Trichloroethylene

A. METHODS

Rodents used in the carcinogenesis studies of the National Toxicology Program are produced in optimally clean facilities to eliminate potential pathogens that may affect test results. The Sentinel Animal Program is part of the monitoring of animal health that occurs during the toxicologic evaluation of chemical compounds. Under this program the disease state of the rodents in the carcinogenesis studies is monitored via viral serology on serum from extra (sentinel) animals in the test rooms. These animals are untreated, and both these animals and the test animals are subject to the identical environmental conditions. The sentinel animals come from the same production source and weanling groups as the animals used for the studies of chemical compounds.

Fifteen B6C3F₁ mice of both sexes and 15 F344/N rats of both sexes are selected at the time of randomization and allocation of the animals to the various study groups. Five animals of each designated sentinel group are killed at 6, 12, and 18 months on study. Data from animals surviving 24 months are collected from 5/50 randomly selected control animals of each sex and species. The blood from each animal is collected and clotted and the serum is separated. The serum is cooled on ice and shipped to Microbiological Associates' Comprehensive Animal Diagnostic Service for determination of the viral titers. The following tests are performed:

	Hemagglutination Inhibition	Complement Fixation	Elisa*
Mice	PVM (Pneumonia virus of mice) Reo 3 (Reovirus 3)	M. Ad. (Mouse adenovirus) LCM (Lymphocytic	MHV (Mouse hepati- tis virus)
	GDVII (Theilor's encephalo- myelitis virus) Poly (Polyoma virus) Sendai (Sendai virus) MVM (Minute virus of mice) Ectro (Ectromelia virus)	choriomeningitis virus)	
Rats	PVM (Pneumonia virus of mice) Sendai (Sendai virus) KRV (Kilham rat virus) H-1 (Toolan's H-1 virus)	RCV (Rat corona virus)	
* Elisa :	= Enzyme-linked immunosorbent as	ssay	

B. RESULTS

See Tables F1 and F2.

		1	Hemagglutinatio Inhibition	n		olement ation
Sample No.	Sex	PVM	KRV	H-1	RCV	Sendai
IX MONTHS						
834	F	80	·			_
835	F	80	_	_		1280
836	F	160		_		80
837	F	320				640
838	M	320				80
839	M	160		_		160
840	M	320		—		40
				_		
841	М	320				80
842	М	320		40		160
843	F	160	20	80		160
WELVE MONTH	s					
158	М	20		_		20
159	М	40		—	_	20
160	М	80		—	_	20
161	Μ	20			·	40
162	М	10		_		20
163	F				_	80
164	F	80				10
165	F			_	_	10
165						
166	F F	80 80				10
		80		_	_	20
IGHTEEN MONT	`HS					
289	М	80			_	20
290	M	80		_	_	
291	M	80			_	10
292	M	80	_			20
292	M	80 80				
		80		_	_	10
294	F			<u> </u>		10
295	F	80			—	40
296	F	80		—	—	20
297	F	80	_			40
WENTY-FOUR M 164	M				40	
164		—	_		40	
	M		_		20	_
166	M	—	_		80	_
167	М	—	_		80	_
168	М	—	—		40	—
169	F	_		—	40	
170	F	_			80	_
171	F	_	_	<u> </u>	80	
172	F	_		-	80	_
173	F	—	—		80	
gnificant Titer		20	20			10

TABLE F1. MURINE VIRUS ANTIBODY DETERMINATIONS FOR RATS IN THE 2-YEAR STUDY OF TRICHLOROETHYLENE

145

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~ ·			Hemagglutination Inhibition					Complement Fixation			on
Sample Number	Sex	PVM	Reo 3	GDVII	Poly	MVM	Ectro	Sendai	M. Ad	MHV	LCM
SIX MON	THS										
824	F			—	—			80		—	
825	F		—	_			-	40	(a)	80	—
826	F		_				-	160		20	
827	F				_			40	_	20	-
828	F		_	_	—	_		80	_	10	-
829	Μ		_	_		—	-	80		20	
830	Μ			_				20	—	20	
831	Μ	_	—	_			—	80	_	20	
832	Μ				·			80	(a)	20	(a)
833	Μ							80	—	20	
WELVE	MONT	THS									
168	М			_	_		<u> </u>	20			
169	Μ		_	_		—	<u> </u>	10			
170	М		—					20	—	_	—
171	М		_	_		_	_	20	—		—
172	Μ			_		_	_	40			
173	F	10	_						_	—	—
174	F	20	_	_				20			
175	F	20	_					10	_	_	
176	F	20	_					10		_	
170	F	20	_				_	40	_	_	_
IGHTEE											
298	M	10							_	—	—
299	Μ		_					10			—
300	M		_			_	_	10		_	_
301	M								_	—	_
302	M							10	_	_	_
303	F		_	(b)			_	40			
304	F	10	_	(b)		_		80		_	(c)
304	F	40								_	_
	г F	20						10			
306 307	r F	20 80	_	_				40			
			_		-						
WENTY-		MONT	15								
174	M			_		_	_			_	
175	M			_		_	_			_	_
176	M		_				_	-		_	_
177	M					_				_	
178	M						_				_
179	F		—								
180	F		—			_				_	_
181	F		—	_		—					_
182	F			—			—		—		_
183	F	-	—			—					
	Titer	20	20	20	20	20	20	10	10	10	10

TABLE F2. MURINE VIRUS ANTIBODY DETERMINATIONS FOR MICE IN THE 2-YEAR STUDY OF TRICHLOROETHYLENE

(a) Anticomplimentary serum

(b) Serum agglutinates RBCs

(c) Serum reacts with control antigen

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APPENDIX G

ANALYSIS OF TRICHLOROETHYLENE (LOT NUMBERS TB 05-206AA AND TB 08-039AA) MIDWEST RESEARCH INSTITUTE

A. ELEMENTAL ANALYSIS

Element	C	Н	C1
Theory	18.28	0.77	80.95
Lot No. TB05-206AA			
Determined	18.31	0.78	80.69
	18.45	0.80	80.85
Lot No. TB08-039AA			
Determined	18.29	0.80	80.78
	18.15	0.81	80.95

B. WATER ANALYSIS

(Karl Fischer)	
Lot No. TB05-206AA	$0.0097 \pm 0.0020(\delta)\%$
Lot No. TB08-039AA	< 0.003%

C. BOILING POINT

Lot No. TB05-206AALiterature ValueDeterminedLiterature Valueb.p.: $86.0^{\circ} \pm 0.8 (\delta)^{\circ}$ C at 737 mm
(visual, micro boiling point);
 $84.5^{\circ}-87^{\circ}$ C (DuPont 900 DTA)b.p. 86.7° C at 760 mm
(Gallant, 1966)

D. INDEX OF REFRACTION

Lot No. TB05-206AA Determined $n_D^{20} 1.4766 \pm 0.0002 (\delta)$

Literature Value n_D^{20} 1.4766 (Backman et al., 1950)

E. DENSITY

Lot no. TB05-206AA

Determined

 d_{23}^{22} 1.46315 ± 0.00002 (δ)

Literature Value

d²³ 1.458 read from graph (Gallant, 1966)

F. GAS CHROMATOGRAPHY

1. Lot No. TB05-206AA Instrument: Tracor MT 220 Detector: Flame ionization Inlet temperature: 200°C Detector temperature: 255°C a. System 1
Column: 10% Carbowax 20M-TPA on 80/100 Chromosorb W(AW), 1.8 m x 4 mm
I.D., glass
Oven temperature program: 50°C, 5 min; 50°-200°C at
10°C/min
Results: Major peak and 12 impurities. The total area of the impurities was less than 0.04% of the major peak.

Peak	Retention Time (min)	Retention Time (Relative to Trichloroethylene)	Area (Percent of Trichloroethylene)
1	0.3	0.10	trace, < 0.001
2	1.2	0.40	trace, < 0.001
3	1.4	0.47	0.002
4	2.0	0.67	0.001
5	2.1	0.70	trace, < 0.001
6	2.4	0.80	0.001
7	3.0	1.00	100
8	7.4	2.47	0.001
9	7.9	2.63	0.02
10	9.8	3.27	trace, < 0.001
11	10.3	3.43	0.003
12	11.8	3.93	trace, < 0.001
13	12.4	4.13	0.003

b. System 2

Column: 20% SP 2100/0.1% Carbowax 1500 on 80/100 Supelcoport, 1.8m x 4 mm I.D., glass

Oven temperature program: 50°C, 5 min; 50°-170°C at 10°C/min

Results: Major peak and eight impurities. All impurities have areas less than 0.01% of the area of the major peak. The total area of the impurities was less than 0.02 of the major peak.

Peak	Retention Time (min)	Retention Time (Relative to Trichloroethylene)	Area (Percent of Trichloroethylene)
1	2.6	0.50	0.0005
2	3.8	0.73	0.0004
3	5.2	1.00	100
4	7.4	1.42	0.002
5	7.7	1.48	0.002
6	8.8	1.69	0.004
7	9.4	1.81	0.0005
8	10.2	1.96	0.0005
9	13.9	2.67	0.002

2. Lot No. TB08-039AA Instrument: Varian 3700 Detector: Flame ionization Inlet temperature: 200°C Carrier Gas: Nitrogen Carrier Flow Rate: 70 cc/min a. System 1 Detector Temperature: 250°C Column: 10% Carbowax 20M-TPA on 80/100 Chromosorb W(AW); 1.8 m x 4 mm I.D., glass Oven Temperature Program: 50°C for 5 min; then 50°C to 200°C/min at 10°C/min Samples Injected: Neat liquid (3.5 μ l) and solutions of 1.0 and 0.5% (v/v) trichloroethylene in o-dichlorobenzene to quantitate the major peak and check for detector overload. Results: Major peak and one impurity after the major peak with an area 0.02% of the major peak.

Peak	Retention Time (min)	Retention Time (Relative to Major Peak)	Area (Percent of Major Peak)
1	3.9	1.00	1.00
2	11.2	2.87	0.02

b. System 2

Detector Temperature: 240°C

Column: 20% SP-2100/0.1% Carbowax 1500 on 100/120 Supelcoport, 1.8 m x 4 mm I.D., glass

Oven Temperature Program: 50°C, for 5 min, then 50°C to 170°C at $10^{\circ}C/min$

Samples Injected: Neat liquid (3 μ l) and solutions of 1.0% and 0.5% trichloroethylene in o-dichlorobenzene to quantitate the major peak and check for detector overload.

Results: Major peak and one impurity after the major peak with an area 0.02% of the of the major peak.

Peak	Retention Time (min)	Retention Time (Relative to Major Peak)	Area (Percent of Major Peak)
1	6.3	1.00	100
2	8.3	1.32	0.01

G. SPECTRAL DATA

- 1. Infrared
- a. Lot No. TB05-206AA Instrument: Beckman IR-12 Cell: 0.015 mm liquid cell, sodium chloride windows Results: See Figure 5
- b. Lot No. TB08-039AA

Instrument: Beckman IR-12 Cell: Thin film between silver chloride plates Results: See Figure 6

2. Ultraviolet/Visible

a. Lot No. TB05-206AA

Instrument: Cary 118.

No absorbance between 800 and 350 nm (visible range). No maximum between 208 and 350 nm (ultraviolet range), but a gradual increase in absorbance toward the solvent cutoff at 208 nm.

Concentration: 1 mg/ml

Solvent: Methanol

b. Lot No. TB08-039AA

Instrument: Cary 118.

No absorbance between 800 and 350 nm (visible region) at a concentration of 1% (v/v). No absorbance maximum between 350 and 215 nm (ultraviolet region) but a gradual increase in absorbance toward 215 nm at a concentration of 0.0004% (v/v).

- 3. Nuclear Magnetic Resonance
 - a. Lot Nos. TB05-206AA and TB08-039AA

Instrument: Varian HA-100 Solvent: Neat, tetramethylsilane added. Consistent with literature spectrum (Sadtler Standard Spectra)

Assignments: (see Figures 7 and 8)

b. Lot No. TB05-206AA:

(a) s, δ 6.34 ppm Integration Ratio:

(a) 1.00

Spectrum consistent with literature spectrum (Sadtler Standard Spectra)

Spectrum consistent with literature spectrum (Sadtler Standard Spectra)

No maximum observed in the in the near ultraviolet range. (Lacher et al., 1950)

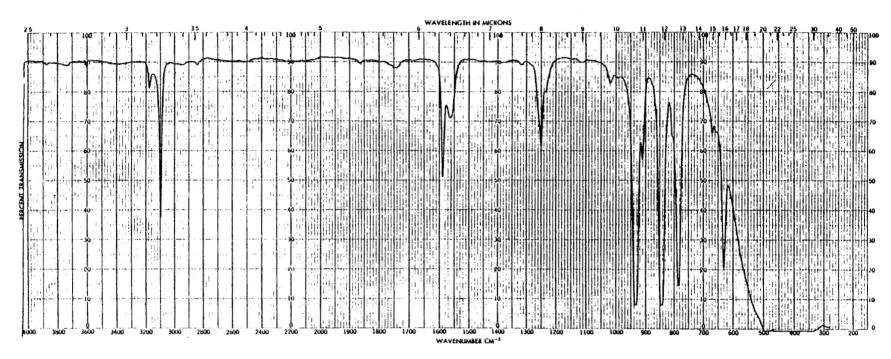


Figure 5. Infrared Absorption Spectrum of Trichloroethylene (Lot No. TB05-206AA)

152

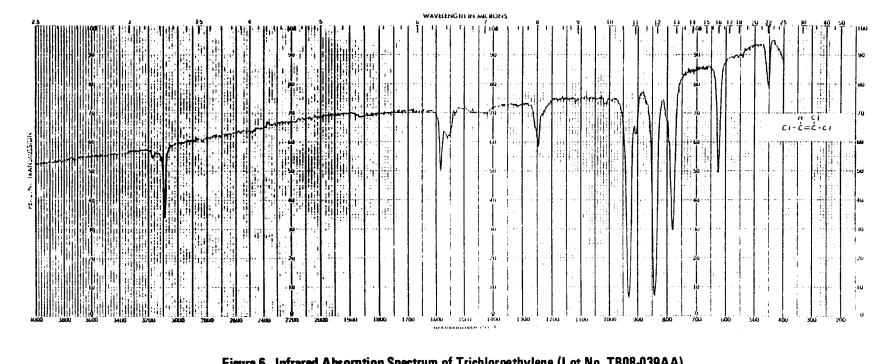


Figure 6. Infrared Absorption Spectrum of Trichloroethylene (Lot No. TB08-039AA)



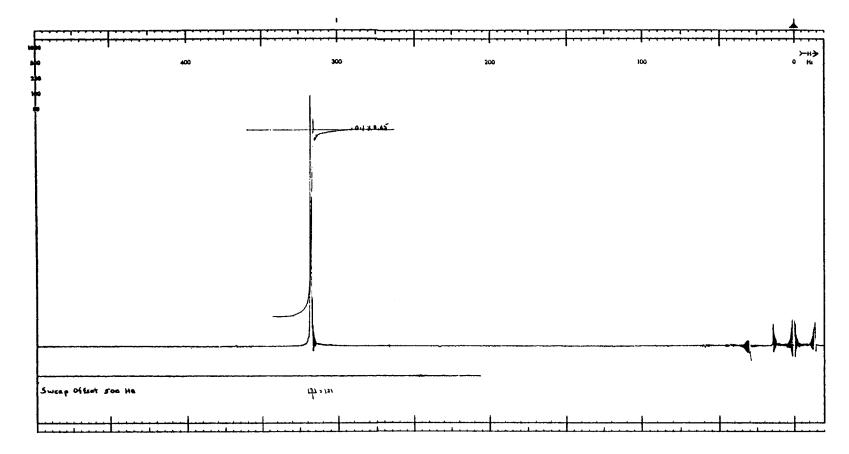


Figure 7. Nuclear Magnetic Resonance Spectrum of Trichloroethylene (Lot No. TB05-206AA)

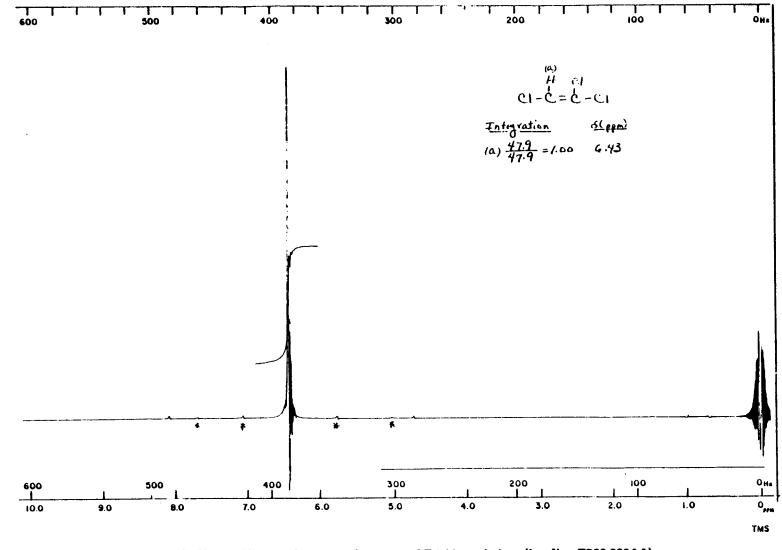


Figure 8. Nuclear Magnetic Resonance Spectrum of Trichloroethylene (Lot No. TB08-039AA)

155

Trichloroethylene

- c. Lot No. TB08-039AA:
 - (a) s, δ 6.43 ppm

H. QUANTITATION OF THE AMOUNT OF EPICHLOROHYDRIN PRESENT IN LOT NO. TB05-206AA

Analysis by Gas Chromatography

1. System

Instrument: Varian 3700 Detector: Flame ionization Inlet Temperature: 200°C Detector Temperature: 250°C Carrier Gas: Nitrogen; 70 cc/min Column: 80/100 Carbopack C/0.1% SP 1000; 1.8 m x 4 mm I.D.; glass Oven Temperature Program: 50°C, isothermal

2. Results

Trichloroethylene, when injected as a neat liquid on the above system, had a retention time of 16.0 min and contained a peak at a retention time of 7.2 min with a shoulder at 7.6 min. The shoulder was enhanced by addition of authentic epichlorohydrin to the sample (0.001%, v/v), relative to trichloroethylene).

3. Conclusions

Calculation of the amount of epichlorohydrin present in the unspiked sample by the standard addition method shows that if epichlorohydrin is present in trichloroethylene, it is present at a level less than or equal to 0.001% (v/v).

I. IDENTIFICATION OF THE IMPURITY IN LOT NO. TB05-206AA (H-2)

Analysis by Gas Chromatography/Mass Spectrometry

1. System

Instrument: Varian 311-A Mass Spectrometer interfaced via a singlestage glass jet separator to a Varian 2700 Gas Chromatograph. Data handled by an Incos 2300 Data System. Column: 80/100 Carbopack C/0.1% SP-1000; 1.8 m x 2 mm I.D., glass. Column Oven Temperature: Ambient Heated Zone Temperatures: Inlet: 170°C Transfer line: 300°C; Helium separator: 275°C Carrier: Helium, 30 cc/min. Scan Range: 5 - 350 amu Scan Times (sec): up:2.50; top:0.00 down:0.00; bottom:0.50 Accelerator Voltage: 3000 Electron Multiplier Voltage: -2000 Resolution: 801 Sample Injected: 5 μ l of neat trichloroethylene

2. Results

The impurity corresponding to the peak reported in H-2 (with a retention time of 7.2 minutes) eluted in 9.65 min on this system. The spectrum obtained from this peak and a literature spectrum of n-pentane are given below.

Sp	ectrum of Impurity	Literature Spectrum of N-Pentane (Eight peak index of mass spectra)			
m/e	Relative Abundance (% of m/e 43)	m/e	Relative Abundance Index, 1970) (% of m/e 43)		
43	100	43	100		
41	62	42	59		
42	61	41	41		
39	26	27	34		
27	25	29	25		
29	17	39	14		
57	11	57	13		
72	7	72	9		

3. Conclusions

The impurity with the retention time of 7.2 min., reported in the trichloroethylene special report (H-2), was identified on the basis of its mass spectrum as n-pentane.

APPENDIX H

IDENTIFICATION OF FOREIGN MATERIAL FOUND IN TRICHLOROETHYLENE (LOT NO. TB05-206AA)

PURPOSE

To identify foreign material found in a sample of trichloroethylene.

ANALYSIS

A. UNDISSOLVED SOLIDS

The original sample of this lot of trichloroethylene was received in a 55-gallon drum and then transferred to 5-gallon drums. The contents of two of these drums were filtered through ashless filter paper. The material was air dried and then weighed. Ten gallons (85 kg) of trichloroethylene were found to contain 260 mg of undissolved solid material. This represents undissolved solids at a level of 3 ppm. The empty drums were then cut open and visually inspected. None of the solids had remained in the drums. The drums were found to be uncoated on the inside, and patches of light corrosion were found, probably due to the action of HCl.

B. DISSOLVED SOLIDS

The amount of dissolved solids was determined by evaporating 100-ml aliquots of filtered trichloroethylene to dryness and then weighing the residue. The trichloroethylene was found to contain dissolved solids at a level of 25.6 ± 1.7 (δ) ppm.

C. MELTING-POINT DETERMINATION

A Buchi Model 510 melting point apparatus was used to determine the melting characteristics of the foreign material. No melting was observed. At 110°C, the sample began to darken and continued to darken until complete decomposition was evident at 290°C.

D. ELEMENTAL ANALYSIS

1. C, H, N, and Cl (a)

Element	Percent Found in Foreign Material
С	41.29
Н	4.21
N	< 0.05
Cl	0.95

(a) Analysis performed by Galbraith Laboratories, Inc., 2323 Sycamore Drive, Knoxville, Tennessee 37921.

E. SPARK-SOURCE MASS SPECTROMETRY (a)

Uranium	<1.2	Terbium	< 0.24	Ruthenium	< 0.49	Vanadium	0.96
Thorium	<2.4	Gadolinium	<1.0	Molybdenum	0.61	Titanium	58
Bismuth	2.5	Europium	<0.47	Niobium	< 0.24	Scandium	<0.47
Lead	31	Samarium	<1.2	Zirconium	0.71	Calcium	>1%
Thallium	<3.0	Neodymium	<1.8	Yttrium	6.2	Potassium	>0.5%
Mercury	NR	Praseodymium	0.90	Strontium	39	Chlorine	≃ 1,800
Gold	< 0.30	Cerium	2.0	Rubidium	0.95	Sulfur	≈1,600
Platinum	<0.87	Lanthanum	1.6	Bromine	17	Phosphorus	≃4,000
Iridium	<0.46	Barium	3.4	Selenium	<0.47	Silicon	>0.5%
Osmium	<0.70	Cesium		Arsenic	<1.2	Aluminum	600
Rhenium	Internal	Iodine	2.9	Germanium	<0.14	Magnesium	>1%
	Standard	Tellurium		Gallium	0.37	Sodium	>1%
Tungsten	<1.2	Antimony	<0.52	Zinc	380	Fluorine	300
Tantalum	<0.45	Tin	3.1	Copper	990	Oxygen	NR
Hafnium	<2.8	Indium	Internal	Nickel	1.4	Nitrogen	NR
Lutetium	<0.43		Standard	Cobalt	1.3	Carbon	NR
Ytterbium	<0.99	Cadmium	0.18	Iron	≃3,100	Boron	10
Thulium	<0.72	Silver	0.78	Manganese	360	Beryllium	<0.24
Erbium	<1.8	Palladium	<0.58	Chromium	38	Lithium	8.6
Holmium	< 0.26	Rhodium	< 0.15				
Dysprosium	<0.27						

Concentrations are in ppm wt. in Foreign Material

NOTE: All elements for which values are not entered <0.1 ppm wt. NR - Not reported.

(a) Analysis performed by Camp Dresser and McKee, Inc., 11455 W. 48th Avenue, Wheat Ridge, Colorado, 80033.

F. FREE ACID TITRATION

Titration of aliquots of trichloroethylene with 0.01N sodium hydroxide indicated the presence of 6.14 ± 0.25 (δ) ppm free acid (as HCl).

G. INFRARED SPECTROSCOPY

Instrument: Beckman IR-12

Cell: Thin film on silver chloride plates

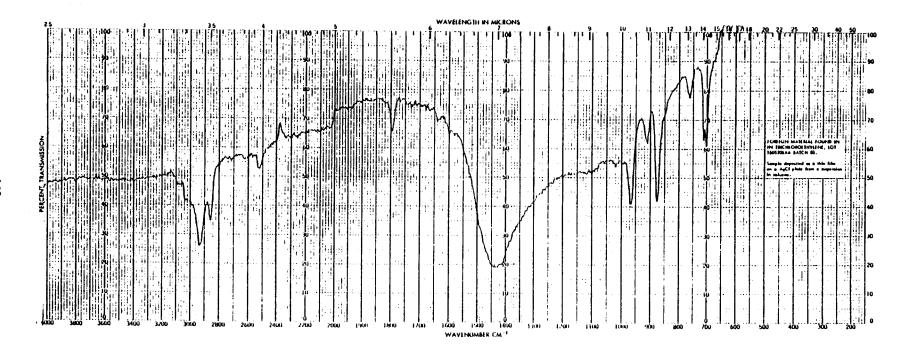
Sample Preparation: Toluene suspension of precipitated material

Results: The absorbance at 2530, 1795, 1440, and 700 cm⁻¹ are characteristic of calcium carbonate. The other absorbances at 2930, 2860, 976, and 912 cm⁻¹ are compatible with an unsaturated hydrocarbon. (See Figure 9.)

H. DIRECT INLET MASS SPECTROMETRY

The 70 eV mass spectrum given below was obtained from the foreign material. The spectrum indicates that the material was a mixture. Alkane and alkene fragmentation series were clearly evident. However, it was felt that the spectrum obtained may not be representative of the compound because of the nonvolatile and thermally unstable nature of the material (see Section C). Spectra obtained from low density polyethylene, silicon rubber, and Teflon[®] did not correspond to the spectrum of the foreign material.







	Relative Abundance		Relative Abundance
I/E	(% of M/E 69)	<u>M/E</u>	(% of M/E 69)
69	100	237	20
55	94	185	19
98	92	137	18
83	75	121	18
57	60	99	18
97	60	59	17
81	56	54	17
129	55	87	17
73	52	125	17
95	51	108	16
43	50	151	15
41	49	80	15
67	48	93	15
44	41	42	14
71	38	79	14
60	36	124	14
85	36	39	14
84	35	239	13
311	35	94	13
96	35	107	13
135	34	138	13
70	32	152	12
111	32	171	12
109	30	53	12
56	30	126	11
112	26	101	11
313	26	29	11
236	24	143	11
123	22	72	11
339	21	61	10
110	21	89	10
116	21	91	10
		113	10
		149	10
		157	10
		165	10
		115	10

SUMMARY OF ANALYTICAL DATA

The precipitated material was present in the trichloroethylene at a level of 3 ppm. Non-volatile and non-filterable residue was present at a level of 25.6 ± 1.7 (δ) ppm.

Elemental analysis indicated the precipitate contained 41.29% carbon, 4.21% hydrogen, 0.95% chlorine, and no detectable nitrogen. Spark-source mass spectrometry indicated the presence of calcium, magnesium, and sodium at levels greater than 1% and of potassium at levels greater than 0.5%.

The dried precipitate was a fibrous type material which decomposed on heating. Decomposition began at 110° C and was completed at 290°C.

The infrared spectroscopy (Figure 9) indicated that the material was a mixture of calcium carbonate and probably an unsaturated hydrocarbon. Mass spectroscopy also indicated that the material was a mixture probably containing alkane and alkene materials.

Trichloroethylene

164

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APPENDIX I

ANALYSIS OF TRICHLOROETHYLENE IN CORN OIL FOR STABILITY OF TRICHLOROETHYLENE AT ROOM TEMPERATURE

MIDWEST RESEARCH INSTITUTE

A. SAMPLE PREPARATION

A 1% (w/v) sample solution of trichloroethylene in corn oil was prepared for each day of the study as follows: 10 ml of corn oil was transferred into a 50-ml Hypo-vial, the vial was sealed, and then approximately 95 mg of trichloroethylene (exactly measured for each sample) was added via a 100 μ l syringe. The samples were shaken and stored at room temperature from 1 to 7 days.

B. EXTRACTION AND ANALYSIS

Each sample was extracted with 20 ml of methanol, which was injected into the sample vial via a 10-ml syringe. Samples for analysis were withdrawn directly from the top methanol layer in the vial and analyzed by vapor-phase chromatography, using the following system:

Instrument: Tracor MT 220 Column: Chromosorb 102, 60/80 mesh, 1.8 x 2 mm I.D., glass Detection: Flame ionization Oven Temperature: 160°C, isothermal Detector Temperature: 260°C Inlet Temperature: 200°C Retention Time of Compound: 4.15 min

C. RESULTS

End of Day	Average Percent in Chemical/Vehicle Mixture (a)
1	1.00 ± 0.05
2	0.96 ± 0.05
3	0.99 ± 0.05
4	0.98 ± 0.05
5	1.00 ± 0.05
6	0.98 ± 0.05
7	0.99 ± 0.05

(a) Corrected for an average spiked recovery yield of $61.7\% \pm 0.9\%$. Theoretical percent in chemical/vehicle mixture, 1.00.

D. CONCLUSION

Trichloroethylene mixed with corn oil is stable for 7 days at room temperature.

APPENDIX J

ANALYSIS OF TRICHLOROETHYLENE IN CORN OIL FOR STABILITY OF TRICHLOROETHYLENE AT 4 °C

PAPANICOLAOU CANCER RESEARCH INSTITUTE

A. STABILITY OF CHEMICAL

The stability of a stock solution at 4°C was determined. The method of analysis was that described in Appendix G.

B. RESULTS

	μ g of TCE per μ l of Sample Injected for Target Concentrations of:	
o. Weeks after Mixing	59.5	235.5
1	60.4	240
2	59.2	236.9
3	56.9	236.9
4	58.4	236.9
5	56.9	235.3
6	57.3	235.3
7	55.4	227.6
8	55.8	239.9

APPENDIX K

ANALYSIS OF TRICHLOROETHYLENE IN CORN OIL FOR CONCENTRATION OF TRICHLOROETHYLENE

PAPANICOLAOU CANCER RESEARCH INSTITUTE

Analysis of dosage mixtures was performed using gas chromatography. The specifications are as follows:

Gas Chromatograph:	Varian 3700 with CDS III Integrator
Detector:	FID
Detector Temp.:	200° C
Injector Temp.:	130°C
Oven Temp.:	70°C (isothermal)
Attenuator:	512×10^{-10}
Column:	10% OV-101 on 100/120 Supelcoport
Column Material:	10 ft. x $1/8$ in. stainless steel until $4/28/80$;
	After 4/28/80, 15 ft. x 1/4 in. glass column

The method of analysis was changed on March 16, 1979 to use an internal standard. Previously, the concentration of TCE in dosage mixtures was calculated from the percent recovery after the TCE-corn oil mixture was extracted into methanol. This recovery usually ran about 65% and was abandoned for a more reliable method, the internal standard method, which was performed as follows: an aliquot (2 ml) of a TCE-corn oil mixture was diluted to 25 ml with internal standard solution containing 0.5 mg/ml octane in chloroform. A $3 - \mu l$ aliquot of this mixture was injected into the gas chromatograph. If the sample was too concentrated (i.e., if the peak went off-scale), the solution was re-diluted as stated above (2 ml to 25 ml internal standard solution).

Results of analyses are presented in Table K1.

	Concentration of Trichloroethylene in Corn Oil (a)	
Date mixed	Target Conc. (mg/ml)	Actual Conc. (mg/ml)
5/18/78	55	50.8
5/10//0	55	52
	113	105.4
	50	49.2
	50	48.1
5/26/78	51.8	47.7
5/20/18	141.5	127.1
	54	52.3
6/01/78	166.5	175.3
6/08/78	57.4	54.6
0/00/70	193.8	189.2
6116179	202	213.8
6/15/78	60	60
6/01/79	30.2	27.7
6/21/78	60.8	60.8
6/22/78	220.6	226.1
(100 150	59.4	62.3
6/29/78		238.4
	235.7	253
7/06/78	248	58.8
	58.5	261.5
7/13/78	257.5	60
	62.4	270.7
7/20/78	265	61.5
	63	264.5
8/03/78	271.2	61.9
	64.2	285.3
8/10/78	276.5	63.1
	64.5	
8/17/78	281	286.1
	64.5	63.1
8/24/78	65.5	63.1
	289	293.8
8/31/78	288.8	299.9
	65.5	64.6
9/20/78	308.5	309.9
	66	66.9
10/19/78	318	316.8
· ·	318	334.5
11/16/78	333.5	322.1
12/08/78	164.3	164.4
12/14/78	72.5	66.6
	170.0	175.4

TABLE K1. ANALYSIS OF TRICHLOROETHYLENE/CORN OIL MIXTURES

	Concentration of Trichloroethylene in Corn Oil (a)		
Date mixed	Target Conc. (mg/ml)	Actual Conc. (mg/ml)	
12/28/78	200.0	210.6	
1/11/79	78.5	77.2	
	356.6	354.8	
	225.4	214.7	
2/07/79	357.5	364.1	
	74.9	69.0	
	242.2	251.2	
	182.8	175.4	
3/07/79	156	168.4	
, ,	728.4		
4/04/79	(758.4) <i>(b)</i>	765.1	
	156.9	165.8	
	68.0	69.8	
	544.2	570.6	
	519.8	545.9	
5/01/79	729.8	736.9	
	161.9	175.8	
	561.6	601.4	
	524.5	562.0	
5/30/79	751.6	756.1	
-,,	573.0	602.1	
	535.2	547.1	
	156.5	164.5	
6/27/79	161.2	166.6	
0, 2, , , , ,	730.2	731.0	
	561.2	584.5	
	548.2	567.8	
7/25/79	755.0	778.1	
.,,	164.4	164.6	
8/21/79	85.4	84.7	
0,21,72	716.2	680.5	
	732.8	662.0	
9/19/79	164.8	161.5	
10/15/79	325.3	319.1	
10/17/79	164.8	157.1	
	730.0	664.0	
12/10/79	546.0	506.8	
12/14/79	533.3	512.6	
	663.6	625.7	
1/09/80	577.2	566.7	
2/06/80	70.6	70.6	
	74.4	76.8	
3/05/80	75.8	74.3	
-,,	330.4	358.9	
4/02/80	69.7	72.2	
4/30/80	327.3	330.2	

TABLE K1. ANALYSIS OF TRICHLOROETHYLENE/CORN OIL MIXTURES (Continued)

(a) The data presented are the average of the results of duplicate analyses.

(b) Analysis by Midwest Research Institute.

APPENDIX L

AUDIT SUMMARY

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APPENDIX L AUDIT SUMMARY

The pathology specimens, experimental data, study documents, and draft (August 1983) of NTP Technical Report No. 243 for the 2-year studies of trichloroethylene in rats and mice were audited at the NTP Archives. The audits included review of:

- 1. records concerning animal receipt, quarantine, randomization, and disposition prior to the start of dosing;
- 2. in-life records including protocol, correspondence, animal identification, animal husbandry, environmental conditions, dosing, external masses, mortality, and scrology;
- 3. body weight and clinical observation data for a random 10% sample of animals in each study group;
- 4. test chemical records;
- 5. postmortem records for individual animals concerning date of death, disposition code, condition code, tissue accountability, correlation of masses or clinical signs recorded at or near the last in-life observation with gross observations and microscopic diagnoses, consistency of data entry on necropsy record forms, and correlation between gross observations and microscopic diagnoses;
- 6. inventory for wet tissue bags from all animals, and residual wet tissues from a random 10% sample of animals in each study group, plus other relevant cases, to evaluate the integrity of individual animal identity and the thoroughness of necropsy and trimming procedure performance;
- 7. blocks and slides of tissues from all animals in the high-dose and vehicle-control groups to examine for proper inventory, labeling, matching of tissue sections, and preservation;
- 8. microscopic diagnoses for a random 10% sample of animals, plus 100% of the changes in diagnoses made to preliminary pathology tables, to verify their incorporation into the final pathology tables; and
- 9. the extent of correlation between the data, factual information, and procedures for the two-year studies as presented in the draft Technical Report and the study records available at the NTP Archives.

These studies were conducted before Good Laboratory Practice standards for documentation were adopted. Not surprisingly, the archival records were found to be incomplete and sometimes inconsistent with respect to specific details; however, they did contain sufficient documentation to generally support the data, results, and statements of fact presented in the Technical Report. For example, study protocols, animal breeding records, and animal room environment records were incomplete or absent, but the partial study records, site-visit reports, and laboratory reports for the studies indicate that the procedures specified in the contract for the work were followed. Also, although raw data to support the results reported from analysis of dosage mixtures were not present, complete records for the independent analysis of samples sent to a referee laboratory were; the combined records demonstrate that dosage mixtures were prepared and analyzed properly.

Following audit of the pathology specimens, a thorough review of preserved livers for all mice was performed, additional diagnoses were made, and results were incorporated into the Technical Report. All of the findings from audit of the draft Technical Report were evaluated by NTP staff and appropriate changes were incorporated into the final report.

This summary describes general audit findings and the extent to which the data, factual information, and results presented in the Technical Report are supported by records at the NTP Archives. Full details are presented in audit reports that are on file at the NIEHS.