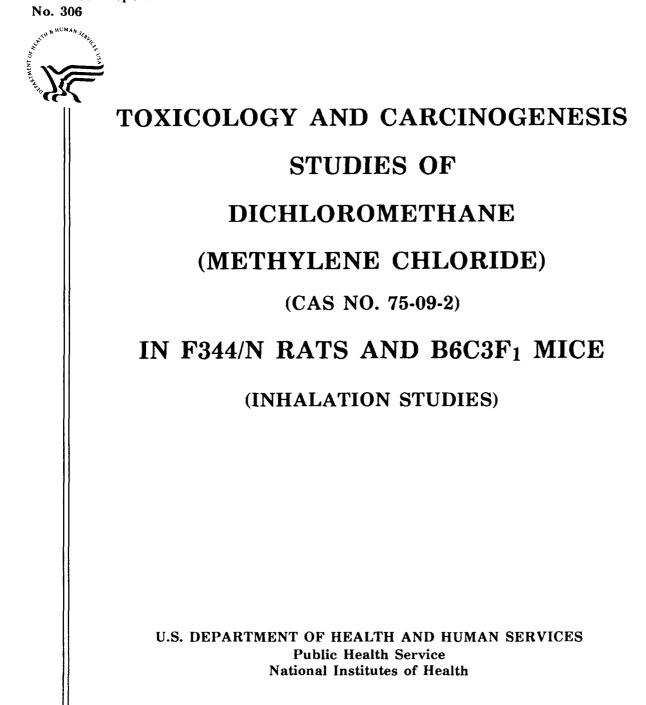
NATIONAL TOXICOLOGY PROGRAM Technical Report Series No. 306



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

NTP TECHNICAL REPORT ON THE

TOXICOLOGY AND CARCINOGENESIS

STUDIES OF

DICHLOROMETHANE

(METHYLENE CHLORIDE)

(CAS NO. 75-09-2)

IN F344/N RATS AND B6C3F1 MICE

(INHALATION STUDIES)



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

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NOTE TO THE READER

These studies are designed and conducted to characterize and evaluate the toxicologic potential, including carcinogenic activity, of selected chemicals in laboratory animals (usually two species, rats and mice). 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.

Five categories of interpretative conclusions were adopted for use in June 1983 in the Technical Reports series to specifically emphasize consistency and the concept of actual evidence of carcinogenicity. For each definitive study result (male rats, female rats, male mice, female mice), one of the following quintet will be selected to describe the findings. These categories refer to the strength of the experimental evidence and not to either potency or mechanism.

- Clear Evidence of Carcinogenicity is demonstrated by studies that are interpreted as showing a chemically related increased incidence of malignant neoplasms, studies that exhibit a substantially increased incidence of benign neoplasms, or studies that exhibit an increased incidence of a combination of malignant and benign neoplasms where each increases with dose.
- Some Evidence of Carcinogenicity is demonstrated by studies that are interpreted as showing a chemically related increased incidence of benign neoplasms, studies that exhibit marginal increases in neoplasms of several organs/tissues, or studies that exhibit a slight increase in uncommon malignant or benign neoplasms.
- Equivocal Evidence of Carcinogenicity is demonstrated by studies that are interpreted as showing a chemically related marginal increase of neoplasms.
- No Evidence of Carcinogenicity is demonstrated by studies that are interpreted as showing no chemically related increases in malignant or benign neoplasms.
- Inadequate Study of Carcinogenicity demonstrates that because of major qualitative or quantitative limitations, the studies cannot be interpreted as valid for showing either the presence or absence of a carcinogenic effect.

Additionally, the following concepts (as patterned from the International Agency for Research on Cancer Monographs) have been adopted by the NTP to give further clarification of these issues:

The term *chemical carcinogenesis* generally means the induction by chemicals of neoplasms not usually observed, the earlier induction by chemicals of neoplasms that are commonly observed, or the induction by chemicals of more neoplasms than are generally found. Different mechanisms may be involved in these situations. Etymologically, the term *carcinogenesis* means induction of cancer, that is, of malignant neoplasms; however, the commonly accepted meaning is the induction of various types of neoplasms or of a combination of malignant and benign neoplasms. In the Technical Reports, the words *tumor* and *neoplasm* are used interchangeably.

This study was initiated by the National Cancer Institute's Carcinogenesis Bioassay Program, now part of the National Institute of Environmental Health Sciences, National Toxicology Program. The studies described in this Technical Report have been conducted in compliance with NTP chemical health and safety requirements and must meet or exceed all applicable Federal, state, and local health and safety regulations. All NTP toxicology and carcinogenesis studies are subjected to a data audit before being presented for peer review.

Although every effort is made to prepare the Technical Reports as accurately as possible, mistakes may occur. Readers are requested to identify any mistakes so that corrective action may be taken. Further, anyone who is aware of related ongoing or published studies not mentioned in this report is encouraged to make this information known to the NTP. Comments and guestions about the National Toxicology Program Technical Reports on Toxicology and Carcinogenesis Studies should be directed to Dr. J.E. Huff, National Toxicology Program, P.O. Box 12233, Research Triangle Park, NC 27709 (919-541-3780).

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DICHLOROMETHANE

(Methylene Chloride)

(CAS No. 75-09-2

CH₂Cl₂ Molecular weight 84.94

ABSTRACT

Toxicology and carcinogenesis studies of dichloromethane (DCM, methylene chloride; 99% pure) were conducted by inhalation exposure of groups of 50 male and 50 female F344/N rats and B6C3F₁ mice 6 hours per day, 5 days per week, for 102 weeks. The exposure concentrations used (0, 1,000, 2,000, or 4,000 ppm for rats and 0, 2,000, or 4,000 ppm for mice) were selected on the basis of results from 13week inhalation studies in which groups of 10 rats and 10 mice of each sex were exposed to dichloromethane at concentrations of 525-8,400 ppm 6 hours per day, 5 days per week.

During the 2-year studies in rats, body weight gains for exposed males and females were comparable to those of the chamber controls. The survival of exposed male rats was comparable to that of the chamber controls; however, the survival of all groups of males at the termination of the study was low (control, 16/50; low dose, 16/50; mid dose, 17/50; high dose, 9/50). Most of the early deaths among male rats occurred during the final weeks of the study; the survival of male rats through week 86 of the study was 36/50, 39/50, 37/50, and 33/50. This decreased survival is believed to be related to the high incidence of leukemia (34/50; 26/50; 32/50; 35/50). Survival of female rats exposed at 4,000 ppm was reduced relative to that of the chamber controls (30/50; 22/50; 15/50); leukemia occurred frequently in all female rat groups. Final mean body weights of high dose male mice and low and high dose female mice were 10%-17% lower than those of the chamber controls; these reductions occurred during the last 16 weeks of the study. The survival of dosed male mice and high dose female mice was reduced relative to that of the chamber controls (male: control, 39/50; low dose, 24/50; high dose, 11/50; female: 25/50; 25/50; 8/50). This reduced survival may have been due to the chemically induced development of liver and lung neoplasia in male and female mice.

Increased incidences of benign mammary gland lesions (adenomas and fibroadenomas) occurred in male and female rats exposed to dichloromethane (male: 0/50; 0/50; 2/50; 5/50; female: 5/50; 11/50; 13/50; 23/50). The incidence of malignant mammary gland neoplasms was not increased in female rats (2/50; 2/50; 2/50; 0/50); none was observed in male rats. In addition, integumentary system tumors in the area of the mammary chain occurred with a positive trend in male rats (subcutaneous tissue fibroma or sarcoma: 1/50; 1/50; 2/50; 5/50); the combined incidence of all tumors in the mammary area in male rats was 1/50, 1/50, 4/50, and 9/50.

Exposure to dichloromethane was associated with increased incidences of hepatic hemosiderosis, cytomegaly, cytoplasmic vacuolization, necrosis, granulomatous inflammation, and bile duct fibrosis

in both male and female rats. There was a positive but marginal trend in the incidence of hepatocellular neoplastic nodules or hepatocellular carcinomas (combined) in female rats (2/50; 1/50; 4/50; 5/50). The incidence of squamous metaplasia of the nasal cavity was increased in female rats exposed at 4,000 ppm (1/50; 2/50; 3/50; 9/50) but not in males (4/50; 5/50; 3/50; 3/50). No nasal cavity tumors were observed in rats. The increased incidences of mononuclear cell leukemia in mid dose and high dose female rats (17/50; 17/50; 23/50; 23/50) were statistically significant by age-adjusted analyses. In male rats, mesotheliomas (arising primarily from the tunica vaginalis) occurred at increased incidences (0/50; 2/50; 5/50; 4/50).

Lung tumors occurred at increased incidences in male and female mice exposed to dichloromethane (alveolar/bronchiolar adenomas: male--3/50; 19/50; 24/50; female--2/50; 23/48; 28/48; alveolar/bronchiolar carcinomas: male--2/50; 10/50; 28/50; female--1/50; 13/48; 29/48). Cytologic degeneration of the liver was observed at increased incidences in high dose male and dosed female mice (male: 0/50; 0/49; 22/49; female: 0/50; 23/48; 21/48). Incidences of hepatocellular adenomas or hepatocellular carcinomas (combined) were increased in high dose male and dosed female mice (male: 22/50; 24/49; 33/49; female: 3/50; 16/48; 40/48). There were also dose-related increases in the numbers of mice bearing multiple lung or liver neoplasms. Dose-related increases were observed in the incidences of testicular atrophy in male mice and uterine and ovarian atrophy in female mice; these effects are considered to be secondary responses to neoplasia.

An audit of the experimental data was conducted for the 2-year studies of dichloromethane. No data discrepancies were found that influenced the final interpretations.

Under the conditions of these inhalation studies, there was some evidence of carcinogenicity^{*} of dichloromethane for male F344/N rats as shown by an increased incidence of benign neoplasms of the mammary gland. There was clear evidence of carcinogenicity of dichloromethane for female F344/N rats as shown by increased incidences of benign neoplasms of the mammary gland. There was clear evidence of carcinogenicity of dichloromethane for male and female B6C3F₁ mice, as shown by increased incidences of alveolar/bronchiolar neoplasms and of hepatocellular neoplasms.

^{*}Categories of evidence of carcinogenicity are defined in the Note to the Reader on page 2.

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The NTP Technical Report on the Toxicology and Carcinogenesis Studies of Dichloromethane is based on the 13-week studies that began in March 1980 and ended in June 1980 and on the 2-year studies that began in April 1981 and ended in April 1983 at Battelle Pacific Northwest Laboratories.

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PEER REVIEW PANEL

The members of the Peer Review Panel who evaluated the draft Technical Report on dichloromethane on March 29, 1985, are listed below. Panel members serve as independent scientists, not as representatives of any institution, company, or governmental agency. In this capacity, Panel members have five major responsibilities: (a) to ascertain that all relevant literature data have been adequately cited and interpreted, (b) to determine if the design and conditions of the NTP studies were appropriate, (c) to ensure that the Technical Report presents the experimental results and conclusions fully and clearly, (d) to judge the significance of the experimental results by scientific criteria, and (e) to assess the evaluation of the evidence of carcinogenicity and other observed toxic responses.

National Toxicology Program Board of Scientific Counselors Technical Reports Review Subcommittee

Jerry B. Hook, Ph.D. (Chair) Vice President, Preclinical Research and Development Smith Kline & French Laboratories Philadelphia, Pennsylvania

Curtis Harper, Ph.D. Associate Professor of Pharmacology School of Medicine University of North Carolina Chapel Hill, North Carolina James Swenberg, D.V.M., Ph.D. (Principal Reviewer) Chief of Pathology Chemical Industry Institute of Toxicology Research Triangle Park, North Carolina

Ad Hoc Subcommittee Panel of Experts

John J. Crowley, Ph.D. Division of Public Health Science The Fred Hutchinson Cancer Research Center Seattle, Washington

Kim Hooper, Ph.D. (Principal Reviewer) Chief, Hazard Evaluation System and Information Department of Health Services State of California Berkeley, California

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David Kotelchuck, Ph.D. Environmental Health Science Program Hunter School of Health Sciences New York, New York

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Bruce W. Turnbull, Ph.D. (Principal Reviewer) Professor and Associate Director College of Engineering Cornell University Ithaca, New York

SUMMARY OF PEER REVIEW COMMENTS ON THE TOXICOLOGY AND CARCINOGENESIS STUDIES OF DICHLOROMETHANE

On March 29, 1985, the draft Technical Report on the toxicology and carcinogenesis studies of dichloromethane received peer review by the National Toxicology Program Board of Scientific Counselors' Technical Reports Review Subcommittee and associated Panel of Experts. The review meeting began at 9:00 a.m. in the Conference Center, Building 101, National Institute of Environmental Health Sciences, Research Triangle Park, North Carolina.

Dr. Swenberg, a principal reviewer, agreed with the conclusions for three of the four studies. He did not agree with the proposed conclusion for female rats (clear evidence of carcinogenicity) because the increase in neoplasia was for benign mammary gland fibroadenomas. He said the significant and dose-related increases in these tumors and the induction of this same type of tumor in two other studies supported a conclusion of some evidence of carcinogenicity for female rats. Dr. Swenberg said statements on causal relationships between leukemia and survival in female rats and between liver and lung tumors and survival in mice should be better supported. Dr. Hooper also asked for clarification as to whether the high incidence of leukemia in rats may have caused increased mortality. Dr. J. Mennear, NTP, presented data that supported causal relationships. For example, 22 of 35 (63%) high dose female rats dying before the termination of the study had leukemia versus 9 of 20 (45%) controls.

As a second principal reviewer, Dr. Hooper agreed with the conclusions. He asked whether the NTP had looked for a dose-related increase in multiplicity of mammary fibroadenomas in rats. Such an examination might influence the strength of the evidence for carcinogenicity, especially in male rats. He suggested inclusion of a table summarizing the experimental conditions and tumor findings for the various reported long-term dichloromethane studies [see Table 26, p. 59]. Dr. Hooper asked whether the testicular atrophy in male mice and the ovarian/uterine atrophy in female mice could be attributed to direct or indirect effects of the chemical. Dr. E. McConnell, NTP, replied that these effects were believed to be secondary to neoplasia.

As a third principal reviewer, Dr. Turnbull agreed with the conclusions as written. He asked that a statement in the Technical Report clarify whether the histopathology slides were identified during diagnoses. [The original pathologist and quality assessment laboratory use fully labeled slides; the NTP Pathology Working Group evaluates slides in a blind fashion.]

The discussion focused primarily on whether the appropriate descriptor for the conclusions in female rats was clear evidence of carcinogenicity, as written, or some evidence of carcinogenicity. The key issues centered on: (1) the relative weight given to concurrent control data versus historical (laboratory and Program) control data; (2) the interpretation of "a substantially increased incidence of benign neoplasms"; and (3) the issue of whether a conclusion of clear evidence of carcinogenicity based on benign neoplasms was appropriate. With regard to (1) and (2), Dr. Kociba, Dr. Purchase, and Dr. Swenberg argued that historical rates should be emphasized, since the concurrent rate (10%) was lower than the mean Program-wide rates (28%). Thus, Dr. Swenberg maintained that the rate in the high dose group for fibroadenomas (22/50; 44%) was less than double the historical average and not a "substantial" increase. Dr. J. Haseman, NIEHS, said the historical data base came primarily from feed studies and there was no good data base of chamber controls from inhalation studies. Dr. J. Huff, NIEHS, stated that the concurrent control data are given more weight by the NTP, whereas historical control data are for comparison. He noted that the rates for fibroadenomas for two previous inhalation studies at Battelle Northwest Laboratories were 14% and 18%. With regard to (3), Dr. Hook and Dr. Kotelchuck commented that the definitions of the categories for strength of evidence have been used by the Panel since June 1983. Dr. Kociba spoke for being able to factor in qualitative

considerations such as tumor types and their commonality and absence of malignancy. Dr. McConnell said that the NTP's stance mirrored that of the International Agency for Research on Cancer, i.e., "If a substance is found to induce only benign tumors in experimental animals, it should nevertheless be suspected of being a carcinogen..." Dr. Huff summarized the NTP's reasoning for the conclusion: With concurrent controls, there was a significant positive trend, a dose-related effect in which the incidence in the high dose animals was significantly greater than that in the controls; the effects were observed in both sexes; and these findings were supported by studies in the literature.

Dr. Kotelchuck moved that the conclusion of clear evidence of carcinogenicity in female rats be accepted with the addition of the word "benign" in front of "neoplasms." Dr. Perera seconded the motion, and it was approved with six affirmative votes; there were two negative votes (Dr. Crowley and Dr. Swenberg) and two abstentions by reason of company affiliation (Dr. Kociba and Dr. Purchase). Dr. Hooper then moved that the conclusion of some evidence of carcinogenicity in male rats be accepted also with inclusion of the "benign" in front of "neoplasms." Dr. Perera seconded the motion, and it was approved by seven affirmative votes; there were one negative vote (Dr. Crowley) and two abstentions (Dr. Kociba and Dr. Purchase). Dr. Swenberg moved that the conclusions of clear evidence of carcinogenicity in male and female mice be accepted as written. Dr. Hooper seconded the motion, and it was approved by eight affirmative votes; there were two abstentions (Dr. Kociba and Dr. Purchase).

I. INTRODUCTION



DICHLOROMETHANE

(Methylene Chloride)

(CAS No. 75-09-2

CH₂Cl₂ Molecular weight 84.94

Dichloromethane (DCM, methylene chloride) is widely used in industrial processes, food preparation, and agriculture. In industry, dichloromethane is used as a solvent in paint removers, degreasing agents, aerosol propellants, and triacetate solutions; as a blowing agent in flexible urethane foams; and as a process solvent in the manufacture of steroids, antibiotics, vitamins, and tablet coatings (Merck Index, 1976; Kirk-Othmer, 1964, 1966, 1967, 1979a,b, 1980; Simmons and Levitt, 1979). The use of dichloromethane as an extraction solvent for spice oleoresins, hops, and caffeine from coffee has been approved by the U.S. Food and Drug Administration (USCFR, 1974). Dichloromethane has been used as an inhalation anesthetic and as a fumigant for grain and strawberries (Valle-Riestra, 1974; Farm Chemicals Handbook, 1977; Merck Index, 1976). The International Program on Chemical Safety has recently published an environmental health criteria document on dichloromethane (WHO, 1984).

In 1980, 564 million pounds of dichloromethane was produced in the United States (USITC, 1981). Dichloromethane has been identified in drinking water, bottled artesian water, and water from the Mississippi River (Dowty et al., 1975).

Humans and laboratory animals readily absorb dichloromethane by inhalation and ingestion. Dermal absorption of dichloromethane has been observed in rats (Schutz, 1958) and humans (Stewart and Dodd, 1964). In humans, absorption of dichloromethane following dermal exposure occurs more slowly than absorption occurring after ingestion or inhalation.

Dichloromethane is distributed throughout the body after being inhaled or ingested by humans or laboratory animals. Dichloromethane has been detected in the urine of dogs and humans (MacEwen et al., 1972; DiVincenzo et al., 1972) and in human milk (Vozovaya et al., 1974). The solvent has been detected in the kidney (Moskowitz and Shapiro, 1952), liver, and brain (Bonventre et al., 1977) of humans accidentally poisoned by the chemical. Anesthesia and central nervous system depression have accompanied accidental dichloromethane poisoning, indicating that the chemical crosses the blood/brain barrier (Moskowitz and Shapiro, 1952; Hughes, 1954). Dichloromethane also crosses the placental barrier, but teratogenic effects were not observed when dichloromethane was administered by inhalation to Swiss-Webster mice and to Long Evans and Sprague-Dawley rats (Leong et al., 1975; Schwetz et al., 1975; Hardin and Manson, 1980).

Elimination of dichloromethane from the body occurs primarily through pulmonary excretion; approximately 85% is excreted unchanged. Small amounts of dichloromethane are eliminated via the kidney. The plasma half-life of inhaled dichloromethane in humans is estimated to be 40 minutes (DiVincenzo et al., 1972). Elimination of dichloromethane from human muscle and adipose tissue has been estimated to occur in 60-80 minutes and 240 minutes, respectively (Stewart et al., 1972a,b). Carbon monoxide and carbon dioxide are known metabolites of dichloromethane in humans and laboratory animals (Stewart et al., 1972a,b; Kubic and Anders, 1975; Ahmed and Anders, 1976). Carboxyhemoglobin is formed when dichloromethane is metabolized to carbon monoxide (Stewart et al., 1972a,b). The biotransformation of dichloromethane to carbon monoxide has been postulated to occur through the process of microsomal oxidative dechlorination (Kubic and Anders, 1975); it takes place primarily in the liver, but microsomes in the lung and kidney can carry out this metabolic reaction. Dichloromethane is metabolized in the liver cytosol via a glutathione-dependent enzyme to formaldehyde (Ahmed and Anders, 1976). Formaldehyde can be oxidized to carbon dioxide. The detection of formic acid in the urine of workers exposed to dichloromethane has led investigators to suggest that dichloromethane is first metabolized to formaldehyde and then to formic acid (Kuzelova and Vlask, 1966).

Various in vivo toxicity experiments have established the liver as the primary target organ for dichloromethane and central nervous system depression as the major grossly observable effect. In cases of accidental poisoning in humans, the prominent effects include central nervous system depression, behavioral changes, irritation of the mucous membranes, cardiovascular effects, pulmonary irritation and edema, and carboxyhemoglobinemia.

In single-dose experiments in mice, the subcutaneous and intraperitoneal LD_{50} values for dichloromethane were found to be 6,452 and 1,987 mg/kg, respectively (Kutob and Plaa, 1962; Klaassen and Plaa, 1966).

When dogs, rabbits, guinea pigs, and rats were exposed to air containing 5,000 ppm dichloromethane (7 hours per day, 5 days per week) for up to 6 months, only the guinea pigs were affected (Heppel et al., 1944). Decreased growth in the guinea pigs was the only observable effect; no compound-related lesions were seen. Exposure to dichloromethane at a concentration of 10,000 ppm (4 hours per day, 5 days per week) for up to 8 weeks produced fatty metamorphosis of the liver in guinea pigs and dogs, but no compound-related lesions were seen in rats and rabbits.

Exposure of male and female Syrian hamsters to air containing 0, 500, 1,500, or 3,500 ppm dichloromethane (6 hours per day, 5 days per week) for 2 years did not adversely affect survival or produce compound-related lesions (Burek et al., 1980). When male and female Sprague-Dawley rats were exposed under the same conditions, reduced survival was seen in the group of females exposed at the highest concentration. Dose-related increases were observed in the total number of fibromas or fibroadenomas in the mammary gland of females. The increase in fibromas reflected an increase in the number of tumors found in individual animals, since the number of females with mammary tumors did not increase. Increased incidences of mammary tumors were also found in male rats exposed at 1,500 or 3,500 ppm dichloromethane, although the increases were not as pronounced as those seen in females.

The male rats exposed to dichloromethane at 1,500 or 3,500 ppm had increased incidences of sarcomas of the salivary gland (Burek et al., 1980). This effect might have been related to a viral salivary gland infection (sialodacryo-adenitis) in these animals, although these tumors were not detected among similarly infected females.

In a subsequent inhalation study, male and female Sprague-Dawley rats were exposed to dichloromethane at concentrations of 0, 50, 200, or 500 ppm (Nitschke et al., 1982). The compound at the 500-ppm concentration produced mammary fibroma/fibroadenomas in males and females, but salivary gland tumors were not observed. Exposure to dichloromethane at concentrations of 200 ppm or less was not associated with tumor production.

In 2-year studies sponsored by the National Coffee Association (1982, 1983), F344 rats were administered 0, 5, 50, 125, or 250 mg/kg per day of dichloromethane in drinking water and B6C3F₁ mice were administered 0, 60, 125, 185, or 250 mg/kg per day in drinking water. There was no evidence of chemically induced carcinogenesis; however, it is probable that the test animals could have tolerated higher doses of dichloro-methane.

Although Theiss et al. (1977) reported a slight, but not statistically significant, increase in the incidence of lung adenomas in strain A mice, IARC found the study to be inadequate because of poor survival of the test animals.

When mortality in a group of 751 workers exposed to dichloromethane at 30-1,200 ppm for up to 30 years was compared with that in a group of workers not exposed to dichloromethane, no increase in cancer-related deaths was noted in the exposed group (Friedlander et al., 1978); these data were considered inadequate to assess the carcinogenicity of dichloromethane in humans (IARC, 1982).

Dichloromethane is mutagenic in Salmonella typhimurium in the presence and absence of S9 when the cells are exposed to dichloromethane vapor in a desiccator. The International Agency for Research on Cancer (IARC) has concluded that dichloromethane is mutagenic in S. typhimurium TA98 and TA100. The vapor is also mutagenic in the plant Tradescantia and causes mitotic recombination and gene conversion in yeast. Dichloromethane has given mixed results in the sex-linked recessive lethal assay in Drosophila and in cell transformation studies in vitro. Most in vivo or in vitro studies in mammalian systems have given negative results. Dichloromethane, however, did induce chromosomal aberrations in Chinese hamster ovary (CHO) cells (Table 1).

Investigation of the role of bacterial metabolism in the mutagenicity of dichloromethane revealed that S. typhimurium strain TA100 metabolized this compound to water-soluble metabolites and to both carbon monoxide and carbon dioxide. The detection of these gases suggests that metabolism by the bacteria occurs by pathways similar to those known in the rat. Brunner et al. (1980) have shown dichloromethane to be a C-1 substrate for bacterial strain DM-1, the metabolic pathways again being very similar to those in mammalian systems. The finding of a large number of water-soluble metabolites in the metabolism of dichloromethane by TA100 is consistent with the use of the compound as a C-1 substrate by these bacteria also.

Deactivation of the mutagenic metabolites occurs mainly by rapid chemical decomposition and is relatively independent of the site of formation or the distribution of deactivating enzymes (Green, 1983). Consequently, the lack of mutagenicity in mammalian systems (see Table 1) may be due to the inability of the target cells to metabolize dichloromethane or to the instability of mutagenic metabolities (if formed by the S9) preventing transport into the cell and interaction with the DNA.

Study Rationale: Dichloromethane was selected for study because of its widespread use and potential for human exposure and because other halogenated hydrocarbons have shown evidence of carcinogenic activity. These studies complement other studies (Burek et al., 1980, 1984; Nitschke et al., 1982; National Coffee Association, 1982, 1983) whose results were incomplete at the time these studies were initiated.

Short-Term Test	Result	Reference
Salmonella typhimurium	<u>.,</u>	
TA1535	+	McGregor, 1979
(+/-S9)	-	Nestmann et al., 1980
	+	Nestmann et al., 1981
TA98	+	Jongen et al., 1978
	+	Nestmann et al., 1981
	+	Gocke et al., 1981
TA100	+	Jongen et al., 1978
	+	Kanada and Uyeta, 1978
	+	Simmon, 1978
	-	Nestmann et al., 1980
	+	Nestmann et al., 1981
	+	Gocke et al., 1981
	+	Jongen et al., 1982
	+	Green (1983)
Bacillus subtilis		
Rec assay	-	Kanada and Uyeta, 1978
fradescantia (plant)	+	Schairer and Sautkulis, 1982
Yeast D7		
Mitotic recombination	+	Callen et al.,1980
Mitotic gene conversion	+	Callen et al., 1980
Yeast D3		
Mitotic recombination	-	Simmon et al., 1977
Drosophil a		·
SLRL	+	Gocke et al., 1981
	-	Abrahamson and Valencia, 1980
CHO/HGPRT and V79/HGPRT	_	Jongen et al., 1981
79 and human fibroblasts		····B······
UDS	-	Jongen et al., 1981
DNA-synthesis inhibition	_	Jongen et al., 1981
/79		
Sister-chromatid exchange	_	Jongen et al., 1981
CHO		
Sister-chromatid exchange	_	Thilager and Kumaroo, 1983
Rat		,,,,,,,,,
Chromosome aberration in vivo		Johnston et al., 1980
СНО		
Chromosome aberration in vitro	+	Thilager and Kumaroo, 1983
Mouse		
Micronucleus		Gocke et al., 1981
ischer rat		5500 57 dig 1991
Cell transformation in vitro	+	Price et al., 1978
Mice B/C 3T3	•	
Cell transformation in vitro	_	Sivak, 1978
Syrian hamster embryo cells	—	
SA7 viral enhanced transformation	+	Hatch et al., 1983
Jeen the at containood of angles ind WON	•	••••••••••••••••••••••••••••••••••••••

TABLE 1. SUMMARY OF RESULTS FROM GENETIC TOXICOLOGY TESTING OF DICHLOROMETHANE

Dichloromethane, NTP TR 306

II. MATERIALS AND METHODS

PROCUREMENT AND CHARACTERIZATION OF DICHLOROMETHANE GENERATION AND MEASUREMENT OF CHAMBER CONCENTRATIONS IN THE TWO-YEAR STUDIES SINGLE-EXPOSURE STUDIES NINETEEN-DAY STUDIES THIRTEEN-WEEK STUDIES TWO-YEAR STUDIES Study Design Source and Specifications of Animals Animal Maintenance Clinical Examinations and Pathology

Statistical Methods

PROCUREMENT AND CHARACTERIZATION OF DICHLOROMETHANE

Dichloromethane was obtained from Fisher Scientific Company or Dow Chemical USA in five different lots (Table 2). Purity and identity analyses were conducted at Midwest Research Institute (Kansas City, Missouri). The identities of all lots were confirmed by spectroscopic analyses (Appendix G). The infrared and nuclear magnetic resonance spectra were consistent with the literature spectra. The ultraviolet spectrum was consistent with that expected for the structure. The cumulative data from elemental analysis and gas chromatography indicated that the purity of each of the five lots was greater than 99%.

A stability test demonstrated that dichloromethane was found to be stable for 2 weeks at temperatures up to 35° C (Appendix G). The testing laboratory performing the 2-year studies stored the chemical at room temperature in steel drums and periodically reanalyzed it by infrared spectroscopy and gas chromatography. These analyses indicated that no degradation of the stored chemical occurred during the course of the 2-year studies.

GENERATION AND MEASUREMENT OF CHAMBER CONCENTRATIONS IN THE TWO-YEAR STUDIES

Dichloromethane was vaporized at 38°-42° C, diluted with air, and introduced into the chambers (Table 3; Appendix H). Concentrations in each exposure chamber were monitored 8-12 times per exposure period with a Hewlett-Packard 5840A Gas Chromatograph. Average weekly exposure concentrations are presented in Appendix H, Figures 16, 17, and 18. The weekly mean vapor concentrations were within 10% of the target concentrations at all positions sampled within the chamber. A summary of the chamber concentrations for the 2-year studies is presented in Tables 4 and 5.

	Single-Exposure	Nineteen-Day	Thirteen-Week	Two-Year
	Studies	Studies	Studies	Studies
Lot Numbers	766062	767132,77-26-22, 775007	775007	D112480
Date of Initial Use of Each Lot	6/9/77	10/7/77; 10/23/77; 10/24/77	NA	4/29/81
Supplier	Fisher Scientific Co.	Fisher Scientific Co.	Fisher Scientific Co.	Dow Chemical USA
	(St. Louis, MO)	(St. Louis, MO)	(St. Louis, MO)	(Midland, MI)

TABLE 2. IDENTITY AND SOURCE OF LOTS IN THE INHALATION STUDIES OF
DICHLOROMETHANE

TABLE 3. GENERATION OF CHAMBER CONCENTRATIONS IN THE INHALATION STUDIES OF DICHLOROMETHANE

Single-Exposure	Nineteen-Day	Thirteen-Week	Two-Year
Studies	Studies	Studies	Studies
Clean, dry air (-40°C dewpoint) was introduced into the exposure chamber through all-glass impingers containing the test material. Concentrations were achieved by varying the amount of air that passed through the test material.	Same as single- exposure studies	Dichloromethane liquid was metered onto a heated wick vaporizer located in the chamber fresh air duct.	Same as 13-wk studies

TABLE 4. SUMMARY OF CHAMBER CONCENTRATIONS OF DICHLOROMETHANE DURING THETWO-YEAR INHALATION STUDIES

Target Concentration (ppm)	Total Number of Readings	Mean Concentration (a) (ppm)	Maximum Concentration Observed (b)
1,000	5,238	$1,004 \pm 51$	1,559
2,000	5,188	$2,009 \pm 13$	2,411
4,000	5,199	$3,982 \pm 213$	5,293

(a) Mean \pm standard deviation

(b) Single observation, not daily mean

TABLE 5. DISTRIBUTION OF MEAN DAILY CONCENTRATIONS OF DICHLOROMETHANE DURING
THE TWO-YEAR INHALATION STUDIES

Range of	Nu	mber of Days Mean within F	lange
Concentration percent of target)	1,000 ppm	2,000 ppm	4,000 ppm
>110	0	0	0
100-110	291	312	239
90-100	194	172	245
80-90	7	7	7
70-80	0	1	1
<70	0	0	0

SINGLE-EXPOSURE STUDIES

Two shipments of male and female F344/N rats and $B6C3F_1$ mice were obtained from Frederick Cancer Research Center and observed for 7 days before being placed on study. The studies were conducted at Industrial Biotest Laboratories.

Groups of five rats and mice of each sex were exposed for 4 hours to air containing 15,500, 16,500, 16,800, 17,250, 18,500, or 19,000 ppm dichloromethane (three groups at 19,000 ppm). Controls were not used. Animals were observed daily and were weighed on days 0 and 15. A necropsy was performed on all animals. Details of animal maintenance are presented in Table 6.

NINETEEN-DAY STUDIES

Male and female F344/N rats and $B6C3F_1$ mice were obtained from Harlan Industries and observed for 16 days before being placed on study. The studies were conducted at Industrial Biotest Laboratories.

Groups of five rats and mice of each sex were exposed to air containing dichloromethane at target concentrations of 0, 1,625, 3,250, 6,500, 13,000, or 16,000 ppm for 6 hours per day, 5 days per week for 19 days (11 exposures). Rats and mice were observed daily and were weighed on days 0, 5, 10, 15, and 19. A necropsy was performed on all animals. Details of animal maintenance are presented in Table 6.

THIRTEEN-WEEK STUDIES

Thirteen-week studies were conducted to evaluate the cumulative toxic effects of repeated exposure to dichloromethane and to determine the concentrations to be used in the 2-year studies. The 13-week studies were conducted at Battelle Pacific Northwest Laboratories

Male and female F344/N rats and $B6C3F_1$ mice were obtained from Charles River Breeding Laboratories, observed for 21 days, and assigned to test groups according to a table of random numbers. Feed was available ad libitum during nonexposure periods; water was available at all times. Groups of 10 rats and 10 mice of each sex were exposed to air containing dichloromethane at target concentrations of 0, 525, 1,050, 2,100, 4,200, or 8,400 ppm, 6 hours per day, 5 days per week for 13 weeks (63 exposures). Further experimental details are summarized in Table 6.

Animals were observed two times per day; moribund animals were killed. Individual animal weights were recorded weekly. At the end of the 13-week studies, survivors were killed. A necropsy was performed on all animals except those excessively autolyzed or cannibalized. Liver fat:liver weight ratios were determined for all survivors. Tissues and groups examined are listed in Table 6.

TWO-YEAR STUDIES

Study Design

Two-year studies were conducted at Battelle Pacific Northwest Laboratories. Groups of 50 rats of each sex were exposed to air containing dichloromethane at target concentrations of 0 (chamber controls), 1,000, 2,000, or 4,000 ppm, 6 hours per day, 5 days per week for 102 weeks. Groups of 50 mice of each sex were exposed to dichloromethane at concentrations of 0, 2,000, or 4,000 ppm on the same schedule. Actual concentrations are summarized in Table 4 and Appendix H, Figures 16, 17, and 18. During week 3 of the studies, the 1,000-ppm rats (both sexes) were exposed at 2,000 ppm and the 2,000-ppm rats and mice (both sexes) were exposed at 1,000 ppm.

Source and Specifications of Animals

The male and female F344/N rats and B6C3F₁ (C57BL/6N, female, \times C3H/HeN MTV⁻, male) mice used in this study were produced under strict barrier conditions at Charles River Breeding Laboratories under a contract to the Carcinogenesis Program. Breeding stock for the foundation colonies at the production facility originated at the National Institutes of Health Repository. Animals shipped for testing were progeny of defined microflora-associated parents that were transferred from isolators to barriermaintained rooms. Animals were shipped to the

	Single-Exposure Studies	Nineteen-Day Studies	Thirteen-Week Studies	Two-Year Studies
EXPERIMENTA	L DESIGN	an a	- Alger - Lipt - Alge - Agen - Alge - Alge	
Testing Laboratory	Industrial Biotest Laboratories (Northbrook, IL)	Industrial Biotest Laboratories (Northbrook, IL)	Battelle Pacific Northwest Laboratories (Richland, WA)	Battelle Pacific Northwest Laboratories (Richland, WA)
Size of Test Groups	5 males and 5 females of each species	Same as single- exposure studies	10 males and 10 females of each species	50 males and 50 females of each species
Doses	Target: 15,500, 16,500, 16,800, 17,250, 18,500, or 19,000 ppm dichloromethane by inhalation	Target: 0, 1,625, 3,250, 6,500, 13,000, or 16,000 ppm dichloro- methane by inhala- tion	Target: 0, 525, 1,050, 2,100, 4,200, or 8,400 ppm dichloromethane by inhalation	Rats0, 1,000, 2,000, or 4,000 ppm dichloro- methane by inhala- tion; mice0, 2,000 or 4,000 ppm
Date of First Dose	6/9/77-6/23/77	10/7/77	3/19/80	4/29/81
Date of Last Dose	N/A	10/24/77	6/17/80	4/15/83
Duration of Dosing	Single 4-h exposure	6-h/d, 5 d/wk on 11 d over a 19-d period	6 h/d, 5 d/wk for 13 wk	6 h/d, 5 d/wk for 102 wk
Type and Frequency of Observation	All animals were observed throughout exposure period and for 14 d thereafter; weighed before exposure and on d 15	All animals were ob- served 1 × d during exposure period; weighed on d 0, 5, 10, 15, and 19	Animals were weighed just before exposure and 1 × wk thereafter	Observed $2 \times d$; clinically examined $1 \times wk$ for 3.5 mo , then $2 \times mo$ until mo 8; after mo 8, palpated and clinically examined $1 \times mo$; weighed $1 \times wk$ for 12 wk , then $1 \times mo$
Necropsy and Histologic Examination	Complete necropsy performed on all animals; tissues were not examined histologically	Complete necropsy performed on all animals; tissues were not examined histologically	Complete necropsy performed on all animals; complete histologic exam performed on high dose and controls; lower dose groups examined to determine no-effect level	Necropsy performed on all animals; the following tissues were examined histo- logically: gross lesions and tissue masses, regional lymph nodes, tracheobronchial lymph nodes, mandibular lymph nodes, salivary glands, sternebrae including marrow, thyroid gland, parathyroids, larynx, small intestine, colon, duodenum, liver, heart, trachea, prostate/testes or ovaries/uterus, lungs and mainstem bronchi, skin, trachea gallbladder (mice), kidneys, spleen, stomach, brain, thymus, colon, adrenal glands, urinary bladder, pituitary gland, nasal cavity/turbinates, mammary glands, pre- putial gland (female rats), clitoral gland (female rats)

TABLE 6. EXPERIMENTAL DESIGN AND MATERIALS AND METHODS IN THE INHALATIONSTUDIES OF DICHLOROMETHANE

	Single-Exposure Studies	Nineteen-Day Studies	Thirteen-Week Studies	Two-Year Studies
ANIMALS AND	ANIMAL MAINTENAN	NCE		
Strain and Species	F344/N rats; B6C3F ₁ mice	F344/N rats; B6C3F ₁ mice	F344/N rats; B6C3F ₁ mice	F344/N rats; B6C3F ₁ mice
Animal Source	Frederick Cancer Research Center (Frederick, MD)	Harlan Industries (Cumberland, IN)	Charles River Breeding Laboratories (Portage, MI)	Same as 13-wk studies
Time Held BeforeTest	7 d	16 d	21-22 d	21 d
Age When Placed on Study			7-9 wk	Rats7-8 wk; mice8-9 wk
Age When Killed			20-22 wk	Rats111-112 wk; mice112-113 wk
Necropsy Dates	14 d after exposure	10/25/77		4/25/83-4/29/83
Method of Animal Distribution	Assigned to groups according to compu- ter-generated tables of random numbers	Same as single- exposure studies	Same as single- exposure studies	Same as single- exposure studies
Animal Identification	Ear notch number	Same as single- exposure studies	Ear tag	Ear tag
Feed	Wayne Lab-Blox [•] (Allied Mills, Chicago, IL); ad libitum but feed removed during exposure	Same as single- exposure studies	NIH 07 Rat and Mouse Ration (Zeigler Bros., Gardners, PA); available ad libitum except during exposure	
Bedding				San-i-cell: ground corn- cob bedding (Paxton Processing, Paxton, IL); during quarantine only
Water	Ad libitum	Ad libitum	Automatic watering system (Edstrom Industries, Water- ford, WI)	Automatic watering system (quarantine Systems Engineering, Napa, CA; study Edstrom Industries, Waterford, WI)
Cages	Stainless steel mesh (Unifab Corp., Kalamazoo, MI)	Same as single- exposure studies	Stainless steel wire (Hazleton Systems, Aberdeen, MD)	Quarantine: solid bottom polycarbonate and wire bottom (Lab Products, Inc., Rochelle Park, NJ); chamber cages: stainless steel mesh (Hazleton Systems, Aberdeen, MD)
Chambers				Hazleton-200 (Hazleton Systems, Aberdeen, MD)

TABLE 6. EXPERIMENTAL DESIGN AND MATERIALS AND METHODS IN THE INHALATION STUDIES OF DICHLOROMETHANE (Continued)

	Single-Exposure Studies	Nineteen-Day Studies	Thirteen-Week Studies	Two-Year Studies
Animals per Cage	1	Rats 1, mice3 during quarantine, 1 during exposure	1	5 (rats), 10 (mice) for 2 wk during quarantine, 1 animal per cage thereafter
Other Chemicals on Test in Same Room		Tetrachloroethylene		Tetrachloroethylene
Animal Room Environment	Temp humidity fluorescent light 12 h/d	Temp humidity	Chamber72° 79° F, 43% 70% humidity, room 72° 76° F, 40% 60% humidity, fluorescent light 12 h/d	Chamber 77°± 2°F(a), 58%± 6% humidity, room- 23° 25°C, 45% 65% humidity, fluorescent light 12 h/d, 20 room air changes/h

TABLE 6. EXPERIMENTAL DESIGN AND MATERIALS AND METHODS IN THE INHALATION STUDIES OF DICHLOROMETHANE (Continued)

(a) Excursions to 69° F and 83° F

testing laboratory at 4-6 weeks of age The animals were quarantined at the testing facility for 3 weeks Thereafter, a complete necropsy was performed on five animals of each sex and species to assess their health status The rats were placed on study at 7-8 weeks of age and mice at 8-9 weeks of age

A quality control skin grafting program has been in effect since early 1978 to monitor the genetic integrity of the inbred mice used to produce the hybrid $B6C3F_1$ test animal In mid-1981, data were obtained that showed incompatibility between the NIH C3H reference colony and the C3H colony from a Program supplier In August 1981, inbred parental lines of mice were further tested for genetic integrity via isozyme and protein electrophoretograms that demonstrate phenotype expressions of known genetic loci

The C57BL/6 mice were homogeneous at all loci tested Eighty-five percent of the C3H mice monitored were variant at one to three loci, indicating some heterogeneity in the C3H line from this supplier Nevertheless, the genome of this line is more homogeneous than that of randomly bred stocks Male mice from the C3H colony and female mice from the C57BL/6 colony were used as parents for the hybrid $B6C3F_1$ mice used in these studies The influence of the potential genetic nonuniformity in the hybrid mice on these results is not known, but results of the studies are not affected because concurrent controls were included in each study.

Animal Maintenance

All animals were housed individually Feed and water were available ad libitum except during exposure periods, during exposure periods, water but not feed was available Details of animal maintenance are given in Table 6. Serologic analyses were performed as described in Appendix I

Clinical Examinations and Pathology

All animals were observed two times per day, and clinical signs were recorded once per week Body weights by cage were recorded once per week for the first 12 weeks of the study and once per month thereafter. Mean body weights were calculated for each group Moribund animals were killed, as were animals that survived to the end of the study. A necropsy was performed on all animals, including those found dead unless they were excessively autolyzed or cannibalized. Thus, 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.

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. Tissues examined microscopically are listed in Table 6.

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 histotechnique was evaluated. All tumor diagnoses, all target tissues, and all tissues from a randomly selected 10% of the animals were evaluated by a quality assurance pathologist. Slides of all target tissues and those about which the original and quality assurance pathologists disagreed were submitted to the Chairperson of the Pathology Working Group (PWG) for evaluation. Representative coded slides selected by the Chairperson were reviewed by PWG pathologists, who reached a consensus and compared their findings with the original and quality assurance diagnoses. When diagnostic differences were found, the PWG sent the appropriate slides and comments to the original pathologist for review. This procedure has been described, in part, by Maronpot and Boorman (1982) and Boorman et al. (1985). The final diagnoses represent a consensus of contractor pathologists and the NTP Pathology Working Group. For subsequent evaluations, the diagnosed lesions for each tissue type are combined according to the guidelines of McConnell et al. (1986).

Nonneoplastic lesions are not examined routinely by the quality assurance pathologist or PWG. Certain nonneoplastic findings are reviewed by the quality assurance pathologist and PWG if they are considered part of the toxic response to a chemical or if they are deemed of special interest.

Statistical Methods

Data Recording: 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, survival, body weight, and individual pathologic results, as recommended by the International Union Against Cancer (Berenblum, 1969).

Survival Analyses: The probability of survival was estimated by the product-limit procedure of Kaplan and Meier (1958) and is presented in the form of graphs. Animals were censored from the survival analyses at the time they were found dead of other than natural causes or were found to be missing; animals dying from natural causes were not 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) life table test for a dose-related trend. All reported P values for the survival analysis are two-sided.

Calculation of Incidence: The incidence of neoplastic or nonneoplastic lesions is 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 include only those animals for which the 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 on which a necropsy was performed.

Analysis of Tumor Incidence: Three statistical methods are used to analyze tumor incidence data. The two that adjust for intercurrent mortality employ the classical method for combining contingency tables developed by Mantel and Haenszel (1959). Tests of significance included pairwise comparisons of high dose and low dose groups with controls and tests for overall doseresponse trends. For studies in which compound administration has little effect 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. All reported P values for tumor analyses are one-sided.

Life Table Analyses--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 underlying variable considered by this analysis is time to death due to tumor. If the tumor is rapidly lethal, then time to death due to tumor closely approximates time to tumor onset. In this case, the life table test also provides a comparison of the time-specific tumor incidences.

Incidental Tumor Analyses--The second method of analysis assumed that all tumors of a given type observed in animals that died before the end of the study were "incidental"; i.e., they were merely observed at necropsy in animals dying of an unrelated cause. According to this approach, the proportions of tumor-bearing animals in dosed and control groups were compared in each of five time intervals: weeks 0-52, weeks 53-78, weeks 79-92, 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 on which a necropsy was actually performed during the time interval. The individual time interval comparisons were then combined by the previously described method to obtain a single overall result. (See Haseman, 1984, for the computational details of both methods.)

Unadjusted Analyses--Primarily, survival-adjusted methods are used to evaluate tumor incidence. In addition, the results of the Fisher exact test for pairwise comparisons and the Cochran-Armitage linear trend test (Armitage, 1971; Gart et al., 1979) are given in the appendix containing the analyses of primary tumor incidence. These two tests are based on the overall proportion of tumor-bearing animals and do not adjust for survival differences.

Historical Control Data: Although the concurrent control group is always the first and most appropriate control group used for decisionmaking, there are certain instances in which historical control data can be helpful in the overall evaluation of tumor incidence. Consequently, control tumor incidences from the NTP historical control data base (Haseman et al., 1984) are included for those tumors in these studies appearing to show compound-related effects.

III. RESULTS

RATS

,

SINGLE-EXPOSURE STUDIES

NINETEEN-DAY STUDIES

THIRTEEN-WEEK STUDIES

TWO-YEAR STUDIES

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

MICE

SINGLE-EXPOSURE STUDIES

NINETEEN-DAY STUDIES

THIRTEEN-WEEK STUDIES

TWO-YEAR STUDIES

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

SINGLE-EXPOSURE STUDIES

The incidence of deaths in the various groups is given in Table 7. No compound-related effects were observed at necropsy.

NINETEEN-DAY STUDIES

Four of five males and 5/5 females that were exposed to dichloromethane at 16,000 ppm and 1/5 males and 1/5 females exposed at 13,000 ppm died before the end of the studies (Table 8). The final mean body weight of male rats that were exposed at 13,000 ppm and that lived to the end of the study was 17% lower than that of the controls. The final mean body weights of females exposed at 6,500 and 13,000 ppm were 5% and 8% lower than that of the controls. Intermittent scratching, ataxia, and hyperactivity were observed in all but the two lowest dose groups. Dyspnea and anesthesia were observed in the two highest dosed groups.

TABLE 7. SURVIVAL A	ND MEAN BODY WEIGHTS	OF RATS IN THE SINGLE-EXPOSURE
	INHALATION STUDIES OF	F DICHLOROMETHANE

Target		Mean Body Weights (grams)		
Concentration (ppm)	Survival (a)	Initial (b)	Final	Change (c)
ALE				, , , , , , , , , , , , , , , , , , ,
15,500	4/5	105 ± 3	168 ± 6	+ 62 ± 3
16,500	5/5	105 ± 2	169 ± 4	+ 64 ± 2
16,800	4/5	119 ± 1	186 ± 1	+ 68 ± 1
17,250	3/5	106 ± 2	170 ± 2	+ 61 ± 2
18,500	3/5	84 ± 5	147 ± 5	$+ 61 \pm 3$
19,000	2/5	99 ± 13	175 ± 1	$+60 \pm 7$
19,000	5/5	118 ± 4	178 ± 4	$+60 \pm 1$
19,000	2/5	112 ± 3	188 ± 2	+ 73 ± 6
EMALE				
15,500	5/5	89 ± 2	124 ± 2	$+35 \pm 0.2$
16,500	5/5	94 ± 3	126 ± 4	$+32 \pm 1$
16,800	5/5	96 ± 3	124 ± 3	+ 28 ± 1
17,250	5/5	87±3	118 ± 3	$+31 \pm 2$
18,500	4/5	74 ± 3	112 ± 2	+ 37 ± 3
19,000	3/5	90±3	123 ± 1	$+32 \pm 1$
19,000	5/5	95±3	126 ± 3	$+ 31 \pm 1$
19,000	4/5	102 ± 1	130 ± 2	$+29 \pm 0.3$

(a) Number surviving/number initially in group

(b) Initial group mean body weight \pm standard error of the mean. Subsequent calculations are based on those animals surviving to the end of the study.

(c) Mean body weight change of the survivors of the group \pm standard error of the mean

Target		Mean	Body Weights	(grams)	Final Weight Relative
Concentration (ppm)	Survival (a)	Initial (b)	Final	Change (c)	to Controls (percent)
MALE		<u> </u>		<u></u>	
0	5/5	140 ± 5	201 ± 7	$+ 61 \pm 3$	
1,625	5/5	142 ± 4	213 ± 5	$+71 \pm 5$	106
3,250	5/5	141 ± 4	197 ± 5	$+ 56 \pm 2$	98
6,500	5/5	142 ± 4	197 ± 5	+ 55 ± 4	98
13,000	4/5	140 ± 5	167 ± 4	$+ 24 \pm 5$	83
16,000	1/5	135 ± 2	149	+ 21	74
FEMALE					
0	5/5	109 ± 3	136 ± 3	$+ 27 \pm 1$	
1,625	5/5	109 ± 3	138 ± 5	$+ 29 \pm 2$	101
3,250	5/5	111 ± 4	139 ± 5	$+28 \pm 2$	102
6,500	5/5	107 ± 3	129 ± 5	$+ 22 \pm 2$	95
13,000	4/5	110 ± 4	125 ± 4	$+ 13 \pm 2$	92
16,000	0/5	103 ± 2	(d)	(d)	

TABLE 8. SURVIVAL AND MEAN BODY WEIGHTS OF RATS IN THE NINETEEN-DAY INHALATION STUDIES OF DICHLOROMETHANE

(a) Number surviving/number in group

(b) Initial group mean body weight \pm standard error of the mean. Subsequent calculations are based on those animals surviving to the end of the study.

(c) Mean body weight change of the survivors \pm standard error of the mean

(d) No data are reported due to the 100% mortality in this group.

THIRTEEN-WEEK STUDIES

One of 10 males and 1/10 females exposed to dichloromethane at 8,400 ppm died before the end of the studies (Table 9). The final mean body weights of males and females exposed at 8,400 ppm were 23% and 11% lower than those of the controls. Foreign body pneumonia (focal accumulation of mononuclear and multinucleated inflammatory cells) was present in 4/10 males and 6/10 females exposed at 8,400 and in 1/10 females exposed at 4,011 ppm. The liver lipid:liver weight ratios for male and female rats exposed at 8,400 ppm and females exposed at 4,200 ppm were significantly (P < 0.05) lower than those of the controls by Dunnett's test (Table 10).

Dose Selection Rationale: A maximum exposure concentration of 4,000 ppm was selected for the 2-year studies because of the minimal severity of the histopathologic changes as noted after exposure at 4,000 ppm for 13 weeks. The second exposure concentration selected was 2,000 ppm for both species, and a third, lower, concentration (1,000 ppm) was added for rats because, in an earlier inhalation study (Burek et al., 1980, 1984), exposure at 3,500 ppm had reduced the survival of male and female Sprague-Dawley rats.

Target		Mean	Body Weights	(grams)	Final Weight Relative
Concentra (ppm)	tion Survival(a)	Initial (b)	Final (c)	Change (d)	to Controls (percent)
MALE					
0	10/10	142 ± 5	306 ± 8	$+ 164 \pm 8$	
525	10/10	161 ± 3	315 ± 7	$+ 154 \pm 5$	103
1,050	10/10	154 ± 4	317 ± 3	$+ 163 \pm 4$	104
2,100	10/10	155 ± 4	322 ± 5	$+ 167 \pm 4$	105
4,200	10/10	153 ± 3	318 ± 5	$+ 165 \pm 3$	104
8,400	(e) 10/10	157 ± 3	237 ± 5	$+ 80 \pm 4$	77
FEMALE					
0	10/10	105 ± 2	175 ± 5	$+ 70 \pm 6$	
525	10/10	117 ± 3	184 ± 5	$+ 67 \pm 3$	105
1,050	10/10	114 ± 3	187 ± 4	+ 73±3	107
2,100	10/10	112 ± 2	188 ± 4	$+ 76 \pm 2$	107
4,200	10/10	110 ± 3	181 ± 3	$+ 71 \pm 3$	103
8,400	(f) 9/10	111 ± 2	156 ± 4	$+ 46 \pm 2$	89

TABLE 9. SURVIVAL AND MEAN BODY WEIGHTS OF RATS IN THE THIRTEEN-WEEK INHALATION STUDIES OF DICHLOROMETHANE

(a) Number surviving/number in group

(b) Initial group mean body weight \pm standard error of the mean. Subsequent calculations are based on those animals that survived through the final weighing.

(c) Final body weights taken after 12 weeks of exposure

(d) Mean body weight change of the survivors ± standard error of the mean (e) One animal died during week 12 after the final body weights were taken.

(f) Week of death: 10

TABLE 10. RATIO OF LIVER LIPID WEIGHT TO LIVER WEIGHT IN RATS EXPOSED TO DICHLOROMETHANE IN THE THIRTEEN-WEEK INHALATION STUDIES

Target Concentration	Milligrams Lipid/Gram Liver (a)		
(ppm)	Male	Female	
0		30 ± 8	- <u></u>
525	31 ± 6	25 ± 5	
1,050	28 ± 3	26 ± 5	
2,100	34 ± 6	24 ± 4	
4,200	32 ± 7	(b) 24 ± 3	
8,400	(c) 25 ± 7	(c) 22 ± 4	

(a) Mean \pm standard deviation

(b) P < 0.05 vs the controls by Dunnett's test

(c) P<0.01 vs the controls by Dunnett's test

TWO-YEAR STUDIES

Body Weights and Clinical Signs

Mean body weights of dosed and control rats of each sex were comparable throughout the studies (Table 11 and Figure 1). Rats exposed at 4,000 ppm were restless and pawed at the eyes and muzzle during the exposure period.

TABLE 11. MEAN BODY WEIGHTS AND SURVIVAL OF RATS IN THE TWO-YEAR INHALATION STUDIES OF DICHLOROMETHANE

Weeks	Cont Av Wt	rol		1.000 ppm Wt (percent			2,000 ppm			4,000 ppm Wt (percent	
on Study	Av Wt (grams)	No. of Survi- vors	Av Wt (grams)	Wt (percent of controls)	No. of Survi- vors	Av Wt (grams)	2,000 ppm Wt. (percent of controls)	No. of Survi- vors	Av Wt (grams)	Wt (percent of controls)	No. of Survivors
ALE	·			···						<u> </u>	
0	166	50	162	98	50	163	98	50	166	100	50
1	166 202 226	50	205	101	50	163 202	100	50 50	198 223	98 99 98	50 50
2 3 4	226	50 50	232	103 101	50 50	229	101 99	50 50	223	99	50 50
4	246 269	50	232 248 272	101	50	229 244 271	101	50	242 265	99	50 50
5 6 7 8 9	280 291	50 50	285 296 312	102 102	50	280 289 311 323 327 336	100	50	278	99	50 50
ř	304	50	312	103	50 50	311	99 102	50 50	289 312	99 103	50
8	318	50 50 50	324	102	50	323	102	50	314	-99 98	50
10	318 327 344 350	50	324 332 342 351	102 99	50 50	327	100 98	50 50	322 331	98 96	50 50
11	350	50 50	351	99 100	50	348 357 377 390 408	99	50	347	99	50 50
12	355	50	358 382 392 413	101	50	357	101	50	353	99	50
21	376 395 414	50 50 50	382	102 99	50 50	390	100 99 99	50 50	377 390	100	50 50
25	414	ŠÕ	413	99 100	50 50	408	99	50 50	390 406	99 98	50 50
29	421 432	50 50	426	101	50	418	99 98	50	417 432	99	50
38	441	50	426 434 446 458	101 100 101	50 50	425 440 451	100	50 50	432	100 100	50 50 50
42	455	50	458	101	50 50	451	99	50 50	440 451	100 99	5 0
46 51	462 461 469 475 478	50	460	101 102	50	454	98 100	50 50 50	460	100 100	50 50 50 50
55	469	50 50 49 49	473	101	50 50 50	467	100	50	467	100 99	50
60 64	475	49	479	101 101	50	469	100 99 100	50	470	99	50
68	476	47	489	103	48 46	454 459 467 469 476 478 479	101	50 50	460 462 467 470 480 482	100 101	48 48
73	476 480 484	45 42	490	102	44 43	485	101	48	484	101	48
81	484 475	42 41	480	100	43	484	100 99	44	476	98 100	46
8ê	475 471	36	489	104	43 39	475	101	41 37	484 476 477 479	102	33
12 16 21 25 29 34 38 42 55 560 64 55 60 64 73 77 86 99 5	467 475	34 26	465 469 473 485 489 490 485 472 489 481 476	103	35 28	485 484 471 475 473 467	101	34 28	482 471	103	40 33 28 19
99 99	475	26 21	476	99 104 103 100 100	28 23	467 462	98 99	28 21	471 456	99 98	19
EMALE											
0	127	50 50	127	100	50	126	99	50	127	100	50 50
1	127 142 152	50	146	103	50	145	102	50	142	100	50
23		50 50	146 155 160	102	50 50	161	102 100	50 50	152	100	50 50 50
4 5	173	50 50	170	99 98	50	174	101	50	173	100	50
5	173 177 181 189	50 50	170 178 185 191	101	50 50	145 155 161 174 180 186 190 197 201 201	102 103	50 50	127 142 152 159 173 178 183 190	101 101	50 50
6 7 8 9	189	50 50 50	191	102 101	50	190	101	50	190	101	50
8	193 198 201	50 50	196 200 203	102 101	50 50	197	102 102	50 50	194 195 200 207	101	50 50
10	201	50	203	101	50 50	204	101	50 50	200	98 100	50 50
11	203	50	208	102	50	200	103	50	207	102	50
16	208 216 224 233	50 50	210 219	101 101	50 50	210 216 223 231 237 241	101 100	50 50	209 217	100 100 99	50 50
21	224	50	224 234	100	50 50	223	100	50	222	99	50
25	233	50 50	234	100 101	50	231	99 99	50 50	232	100	50 50
34	246	50	242 245 253 261	100	50 50 50	241	98	50	243	-99 99	50
38	252	50	253	100	50		100	50 50	248	98 99	50
42 46	240 246 252 260 269 279 289 300 304 312	50 50 49	261 267	100	50 50	259 265 277 290 302	100 99	50 50	238 243 257 265 277 284 295	90 73	50 50
5ĭ	279	49	267 280	99 100	ŠŎ	277	99	50 50	277	99 99 98	50 50
55	289	49 49 49	288 299 305	100	50 50 50 50 49	290	100 101	50	284	98 98	50
64	304	49	305	100 100 101	49	309	102	50 48 46	304	100	48
10 11 12 21 229 348 342 461 555 664 683 77	312	49	314	101	49	315	101	46	304 312	100 100	49 48 48 45
73	318	49 47	322	101 10 2	49 45	323	102 101	44 42	323 328	102 102	45 44
81	317	45 42	326	103	44	309 315 323 325 320	101	42	322	102	41
86 90	322 324	42 40	305 314 322 330 326 336 336 337	104	41	324	101	33	322	100	38
95 99	318 322 317 322 324 335 335 332	36	34(104 104 104	39 33	324 337 342 337	104 102	42 33 30 27	322 322 327 335	101 100	38 32 27
~~	332	31	345	104	26	227	102	26	334	101	21

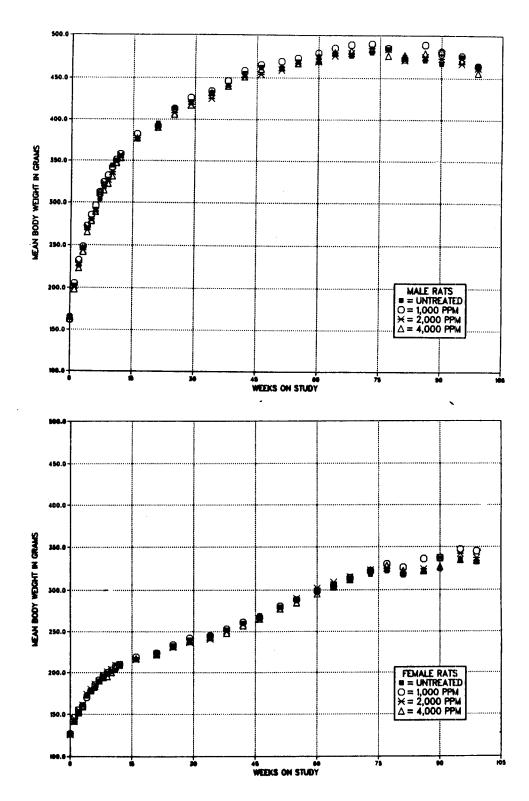


FIGURE 1. GROWTH CURVES FOR RATS EXPOSED TO DICHLOROMETHANE BY INHALATION FOR TWO YEARS

Survival

Estimates of the probabilities of the survival of male and female rats exposed to dichloromethane at the concentrations used in these studies and those of the controls are shown in the Kaplan and Meier curves in Figure 2. The survival of the high dose group of female rats was significantly lower than that of the controls (Table 12) after week 100. No other significant differences in survival were observed between any groups of either sex. Survival of all groups of males was low (18%-34%). Most of the early deaths among males occurred during the final 16 weeks of the study.

Pathology and Statistical Analyses of Results

This section describes the significant or note-

worthy changes in the incidences of rats with neoplastic or nonneoplastic lesions of the mammary gland, integumentary system, liver, multiple organs, tunica vaginalis, hematopoietic system, nasal cavity, kidney, spleen, prostate, parathyroid, adrenal gland, testis, and pituitary gland. Histopathologic findings on neoplasms in rats are summarized in Appendix A (Tables A1 and A2); Appendix A (Tables A3 and A4) also gives the survival and tumor status for individual male and female rats. Findings on nonneoplastic lesions are summarized in Appendix C (Tables C1 and C2). Appendix E (Tables E1 and E2) contains the statistical analyses of those primary tumors that occurred with an incidence of at least 5% in one of the four groups. The statistical analyses used are discussed in Chapter II (Statistical Methods) and Appendix E (footnotes). Historical incidences of tumors in control animals are listed in Appendix F.

	Control	1, 00 0 ppm	2,000 ppm	4,000 ppm
MALE (a)	.			
Animals initially in study	50	50	50	50
Nonaccidental deaths before termination (b)	34	34	33	41
Killed at termination	16	16	17	9
Survival P values (c)	0.116	0.945	0.935	0.163
FEMALE (a)				
Animals initially in study	50	50	50	50
Nonaccidental deaths before termination (b)	20	28	28	35
Killed at termination	30	22	22	15
Survival P values (c)	0.006	0.223	0.118	0.006

TABLE 12. SURVIVAL OF RATS IN THE TWO-YEAR INHALATION STUDIES OF DICHLOROMETHANE

(a) Terminal kill period: week 104

(b) Includes animals killed in a moribund condition

(c) The result of the life table trend test is in the control column, and the results of the life table pairwise comparisons with the controls are in the dosed columns.

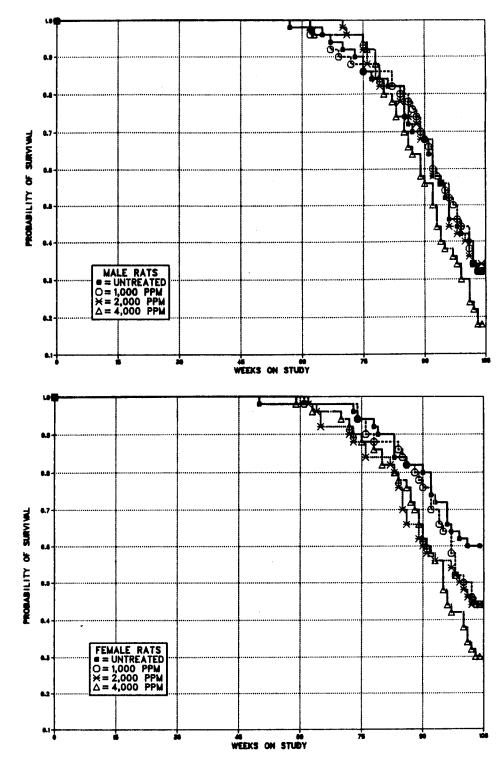


FIGURE 2. KAPLAN-MEIER SURVIVAL CURVES FOR RATS EXPOSED TO DICHLOROMETHANE BY INHALATION FOR TWO YEARS

Mammary Gland: Fibroadenomas and adenomas or fibroadenomas (combined) in male and female rats occurred with significant positive trends, and the incidences in high dose males and dosed females were significantly greater than those in the controls (Table 13). Subcutaneous fibromas and fibromas or sarcomas (combined) located in the mammary area in male rats occurred with significant positive trends; the incidences in the dosed groups were not significantly greater than those in the controls. These subcutaneous tumors all occurred in the area of the mammary chain and may have been derived from nonglandular mammary tissue. Therefore, the subcutaneous tumors and the mammary gland tumors were combined for comparative purposes. When combined, the tumors occurred in male rats with a significant positive trend and the incidence in the high dose group was significantly greater than that in the controls (Table 13).

Except for a single adenoma in a high dose female rat, all mammary tumors were visible at necropsy. The neoplasms ranged from 1 to 8 cm in diameter and were primarily located in the axillary and inguinal areas. Grossly, they appeared to be cystic and rubbery or firm and many contained a milky fluid.

The diagnosis of fibroadenoma was based on the presence of a prominent fibrous stroma made up of mature collagenous fibrous tissue and proliferating mammary epithelium forming acini and solid masses of columnar, cuboidal, or round epithelial cells with abundant, often foamy cytoplasm. The mitotic rate was low. The amount of these two components in tumors diagnosed as fibroadenomas varied from masses of mature collagen with small islands of proliferating mammary epithelium to masses made up largely of proliferating mammary epithelium but with a mature fibrous stroma.

A diagnosis of carcinoma of the mammary gland in a low dose female was based on the presence of solid sheets and nests of proliferating epithelial cells that were basophilic and had a high nuclear-to-cytoplasmic ratio and a high rate of mitosis. The diagnosis of a malignant mixed tumor in one control female rat was based on the presence of a dominant bone-forming sarcomatous component, accompanied by a small squamous epithelial component.

			×
0/50 (0%)	0/50 (0%)	2/50 (4%)	4/50 (8%)
0.0%	0.0%	11.8%	34.0%
0/16(0%)	0/16(0%)	2/17 (12%)	2/9(22%)
		104	101
P<0.001	(c)	P = 0.250	P = 0.020
P = 0.003	(c)	P = 0.250	P = 0.040
0/50(0%)	0/50 (0%)	0/50 (0%)	1/50 (2%)
denoma			
	0/50 (0%)	2/50 (4%)	5/50(10%)
			36.6%
			2/9 (22%)
0/10(0/0)	0/10(0/0)		93
P<0.001	(c)		P = 0.010
			P = 0.010 P = 0.023
8	P < 0.001 P = 0.001 P = 0.003	$\begin{array}{cccc} 0.0\% & 0.0\% & 0.0\% & 0.0\% & 0/16 & 0\% & 0/16 & 0\% & 0/16 & 0\% & 0/16 & 0\% & 0/16 & 0\% & 0/50 & 0.0\% & 0.050 & (0\%) & 0.0\% & 0.0\% & 0.0\% & 0.0\% & 0.0\% & 0.0\% & 0.0\% & 0/16 & (0\%) & 0/16 & ($	$\begin{array}{cccccccccccccccccccccccccccccccccccc$

TABLE 13. ANALYSIS OF MAMMARY GLAND OR SUBCUTANEOUS TISSUE LESIONS IN RATS IN
THE TWO-YEAR INHALATION STUDIES OF DICHLOROMETHANE (a)

MALE (Continued)				
Subcutaneous Tissue: Fibroma (d)				
Overall Rates	1/50 (2%)	1/50 (2%)	2/50 (4%)	4/50 (8%)
Adjusted Rates	6.3%	6.3%	9.2%	19.5%
Terminal Rates	1/16 (6%)	1/16 (6%)	1/17 (6%)	0/9 (0%)
Week of First Observation	104	104	96	89
Life Table Tests	P = 0.024	P = 0.764	P = 0.523	P = 0.095
Incidental Tumor Tests	P = 0.024 P = 0.064	P = 0.764	P = 0.525 P = 0.505	P = 0.093 P = 0.204
Incidental Lumor Lests	P=0.064	P = 0.764	P=0.505	r=0.204
Subcutaneous Tissue: Sarcoma				
Overall Rates	0/50 (0%)	0/50 (0%)	0/50 (0%)	1/50 (2%)
Subcutaneous Tissue: Fibroma or Sarco	oma			
Overall Rates	1/50 (2%)	1/50 (2%)	2/50 (4%)	5/50 (10%)
Adjusted Rates	6.3%	6.3%	9.2%	22.7%
Terminal Rates	1/16 (6%)	1/16 (6%)	1/17 (6%)	0/9 (0%)
Week of First Observation	104	104	96	89
Life Table Tests	P = 0.008	P = 0.764	P = 0.523	P = 0.050
Incidental Tumor Tests	P = 0.026	P = 0.764	P = 0.505	P = 0.125
Mammary Gland or Subcutaneous Tissue				0/P0 /100
Overall Rates	1/50 (2%)	1/50 (2%)	4/50 (8%)	9/50 (18%)
Adjusted Rates	6.3%	6.3%	20.6%	49.0%
Terminal Rates	1/16 (6%)	1/16 (6%)	3/17 (18%)	2/9 (22%)
Week of First Observation	104	104	96	8 9
Life Table Tests	P<0.001	P = 0.764	P = 0.196	P=0.002
Incidental Tumor Tests	P=0.001	P = 0.764	P = 0.186	P = 0.008
FEMALE				
Mammary Gland: Epithelial Hyperplasia	1			
Overall Rates	0/50 (0%)	0/50 (0%)	1/50 (2%)	1/50 (2%)
Mammary Gland: Fibroadenoma (e)				00/00/11/07
Overall Rates	5/50 (10%)	11/50 (22%)	13/50 (26%)	22/50 (44%)
Adjusted Rates	15.7%	41.2%	43.6%	79.4%
Terminal Rates	4/30 (13%)	8/22 (36%)	7/22 (32%)	10/15 (67%)
Week of First Observation	96	74	65	73
Life Table Tests	P<0.001	P = 0.028	P = 0.009	P<0.001
Incidental Tumor Tests	P<0.001	P=0.049	P = 0.025	P<0.001
Mammary Gland: Adenoma				
Overall Rates	0/50 (0%)	0/50 (0%)	0/50 (0%)	1/50 (2%)
Mammary Gland: Adenoma or Fibroade	noma			
Overall Rates	5/50 (10%)	11/50 (22%)	13/50 (26%)	23/50 (46%)
Adjusted Rates	15.7%	41.2%	43.6%	83.5%
Terminal Rates	4/30 (13%)	8/22 (36%)	7/22 (32%)	11/15 (73%)
Week of First Observation	96	74	65	73
Life Table Tests	P<0.001	P = 0.028	P = 0.009	P<0.001
Incidental Tumor Tests	P<0.001 P<0.001	P = 0.028 P = 0.049	P = 0.009 P = 0.025	P<0.001
Mammary Gland: Adenocarcinoma or C		0/00/100	0.00 (1-4)	0.00
Overall Rates	1/50 (2%)	2/50 (4%)	2/50 (4%)	0/50 (0%)
Mammary Gland: Mixed Tumors, Maligr	nant			
Overall Rates	1/50 (2%)	0/50 (0%)	0/50 (0%)	0/50 (0%)

TABLE 13. ANALYSIS OF MAMMARY GLAND OR SUBCUTANEOUS TISSUE LESIONS IN RATS IN THE TWO-YEAR INHALATION STUDIES OF DICHLOROMETHANE (Continued)

(a) The statistical analyses used are discussed in Chapter II (Statistical Methods) and Appendix E (footnotes).
(b) Historical incidence at testing laboratory: 0/100; historical incidence in NTP studies (mean ± SD): 51/1,727 (3% ± 3%)
(c) No P value is reported because no tumors were observed in the 1,000-ppm and control groups.
(d) Historical incidence at testing laboratory: 6/100 (6%); historical incidence in NTP studies (mean ± SD): 91/1,727

 $(5\% \pm 3\%)$ (e) Historical incidence at testing laboratory: 16/99 (16%); historical incidence in NTP studies (mean \pm SD): 492/1,772

(28% ± 10%)

-

Liver: Hemosiderosis, hepatocytomegaly, cytoplasmic vacuolization, and necrosis were observed at increased incidences in dosed male and female rats (Appendix C, Tables C1 and C2). Bile duct fibrosis was observed at increased incidences in dosed male rats and mid dose female rats. Neoplastic nodules and neoplastic nodules or hepatocellular carcinomas (combined) in female rats occurred with significant positive trends by the life table test; the incidences in the high dose group were not significantly greater than those in the controls (Table 14).

TABLE 14. ANALYSIS OF LIVER TUMORS IN FEMALE RATS IN THE TWO-YEAR INHALATIONSTUDY OF DICHLOROMETHANE

	Control	1 ,000 ppm	2,000 ppm	4,000 ppm
Neoplastic Nodule	·····			
Overall Rates	2/50 (4%)	1/50 (2%)	3/50 (6%)	5/50 (10%)
Adjusted Rates	6.7%	2.0%	10.2%	19.6%
Terminal Rates	2/30 (7%)	0/22 (0%)	1/22 (5%)	1/15 (7%)
Week of First Observation	104	61	85	73
Life Table Tests	P = 0.030	P = 0.569N	P = 0.382	P = 0.080
Incidental Tumor Tests	P = 0.097	P = 0.494N	P = 0.482	P = 0.229
Hepatocellular Carcinoma				
Overall Rates	0/50 (0%)	0/50 (0%)	1/50 (2%)	0/50 (0%)
Neoplastic Nodule or Hepatocellu	lar Carcinoma (a)			
Overall Rates	2/50 (4%)	1/50 (2%)	4/50 (8%)	5/50 (10%)
Adjusted Rates	6.7%	2.0%	14.4%	19.6%
Terminal Rates	2/30 (7%)	0/22(0%)	2/22 (9 %)	1/15 (7%)
Week of First Observation	104	61	85	73
Life Table Tests	P = 0.027	P = 0.569N	P = 0.223	P = 0.080
Incidental Tumor Tests	P = 0.086	P = 0.494N	P = 0.297	P = 0.229

(a) Historical incidence at testing laboratory: 1/98 (1%); historical incidence in NTP studies (mean \pm SD): 48/1,766 (3% \pm 3%)

III. RESULTS: RATS

Multiple Organs: Mesotheliomas of the tunica vaginalis or multiple organs in male rats occurred with significant positive trends, and the incidences in the mid dose and high dose groups were significantly greater than that in the controls (Table 15).

Hematopoietic System: Mononuclear cell leukemia in male and female rats occurred with significant positive trends by the life table test; the incidences in the mid dose and high dose female rats were significantly greater than those in the controls by the life table test (Table 16). The incidence in low dose male rats was significantly lower than that in the controls.

TABLE 15. ANALYSIS OF MESOTHELIOMAS IN MALE RATS IN THE TWO-YEAR INHALATION STUDY OF DICHLOROMETHANE

	Control	1,000 ppm	2,000 ppm	4,000 ppm
Funica Vaginalis: All Types	· · · · · · · · · · · · · · · · · · ·			
Overall Rates	0/50(0%)	1/50 (2%)	4/50 (8%)	4/50 (8%)
Adjusted Rates	0.0%	2.2%	19.2%	24.4%
Terminal Rates	0/16(0%)	0/16 (0%)	2/17 (12%)	0/9(0%)
Week of First Observation		69	96	92
Life Table Tests	P = 0.009	P = 0.496	P = 0.070	P = 0.031
Incidental Tumor Tests	P = 0.030	P = 0.473	P = 0.062	P=0.097
All Sites: All Types (a)				
Overall Rates	0/50(0%)	2/50 (4%)	5/50(10%)	4/50 (8%)
Adjusted Rates	0.0%	4.4%	22.8%	24.4%
Terminal Rates	0/16(0%)	0/16 (0%)	2/17 (12%)	0/9(0%)
Week of First Observation		69	96	92
Life Table Tests	P = 0.020	P = 0.243	P = 0.038	P = 0.031
Incidental Tumor Tests	P = 0.063	P = 0.225	P = 0.030	P = 0.097

(a) Historical incidence at testing laboratory: 4/100(4%); historical incidence in NTP studies (mean ± SD): $44/1,727(3\% \pm 2\%)$

TABLE 16. ANALYSIS OF HEMATOPOIETIC SYSTEM TUMORS IN RATS IN THE TWO-YEAR INHALATION STUDIES OF DICHLOROMETHANE

	Control	1,000 ppm	2,000 ppm	4,000 ppm
MALE				
Mononuclear Cell Leukemia(a)				
Overall Rates	34/50 (68%)	26/50 (52%)	32/50 (64%)	35/50 (70%)
Adjusted Rates	80.3%	77.0%	80.2%	89.4%
Terminal Rates	8/16 (50%)	9/16 (56%)	10/17 (59%)	6/9 (67%)
Week of First Observation	57	82	71	75
Life Table Tests	P = 0.045	P = 0.147N	P = 0.400N	P = 0.134
Incidental Tumor Tests	P=0.399	P = 0.049 N	P = 0.434N	P = 0.487 N
FEMALE				
Mononuclear Cell Leukemia(b)				
Overall Rates	17/50 (34%)	17/50 (34%)	23/50 (46%)	23/50 (46%)
Adjusted Rates	41.1%	44.4%	63.6%	58.1%
Terminal Rates	8/30 (27%)	4/22 (18%)	10/22 (45%)	1/15(7%)
Week of First Observation	73	76	73	63
Life Table Tests	P = 0.009	P = 0.402	P = 0.049	P = 0.028
Incidental Tumor Tests	P = 0.273	P = 0.425N	P = 0.189	P = 0.579

(a) Historical incidence at testing laboratory: 36/100 (36%); historical incidence in NTP studies (mean \pm SD): 458/1,727 (27% \pm 9%)

(b) Historical incidence at testing laboratory: 27/99 (27%); historical incidence in NTP studies (mean \pm SD): 307/1,772 (17% \pm 6%)

Nasal Cavity: Squamous metaplasia was observed at an increased incidence in high dose female rats (male: control, 4/50, 8%; low dose, 5/50, 10%; mid dose, 3/50, 6%; high dose, 3/50, 6%; female: control, 1/50, 2%; low dose, 2/50, 4%; mid dose, 3/50, 6%; high dose, 9/50, 18%).

Kidney: Degeneration of the kidney tubule was observed at an increased incidence in mid dose male rats and high dose female rats (male: control, 11/50, 22%; low dose, 13/50, 26%; mid dose, 23/50, 46%; high dose, 10/50, 20%; female: control, 14/50, 28%; low dose, 20/50, 40%; mid dose, 22/50, 44%; high dose, 25/49, 51%).

Spleen: Fibrosis was observed at increased incidences in dosed male and female rats (male: control, 2/50, 4%; low dose, 6/49, 12%; mid dose, 11/50, 22%; high dose, 8/50, 16%; female: control, 0/50; low dose, 2/50, 4%; mid dose, 4/50, 8%; high dose, 4/49, 8%).

Prostate: Suppurative inflammation was observed at increased incidences in dosed male rats

(control, 1/44, 2%; low dose, 4/42, 10%; mid dose, 10/46, 22%; high dose, 5/45, 11%).

Parathyroid: Hyperplasia was observed at increased incidences in dosed male rats (male: control, 0/29; low dose, 6/35, 17%; mid dose, 2/30, 7%; high dose, 4/32, 13%; female: control, 2/26, 18%; low dose, 0/19; mid dose, 1/26, 4%; high dose, 0/26).

Other Increased Tumor Incidences: Other tumors occurred at marginally significant increased incidences in the dosed groups relative to the controls. These increases were characterized by a significant trend but no significant pairwise effect, a pairwise difference that was significant only by life table analysis, or a significant effect at the low dose but no significant trend or effect at the high dose. These tumors included adrenal gland pheochromocytomas and interstitial cell tumors of the testis in males and pituitary gland adenomas or carcinomas (combined) in males and females (Appendix E, Tables E1 and E2).

SINGLE-EXPOSURE STUDIES

The incidence of deaths in the various groups is given in Table 17. The LC_{50} value for male mice was calculated on the basis of time-weighted average concentrations of 15,975, 16,356, 16,948, 17,175, 18,035, 18,670, 19,271, and 20,398 by probit analysis (Finney, 1971) to be 17,703 ppm (95% confidence limit range, 16,163-18,505 ppm). No meaningful LC_{50} value could be determined for the female mice. No compound-related effects were observed at necropsy.

NINETEEN-DAY STUDIES

All mice exposed to dichloromethane at 16,000 ppm and 3/5 males and 4/5 females exposed at 13,000 ppm died before the end of the studies (Table 18). The female mouse in the 13,000-ppm group that survived to the end of the study lost weight. Final mean body weights of other groups of dosed and control male and female mice were comparable. Hyperactivity was considered to be compound related. No compound-related effects were observed at necropsy.

TABLE 17.	SURVIVAL A	ND MEAN BODY	Y WEIGHTS OF	MICE IN THE	SINGLE-EXPOSURE
	IN	NHALATION STU	DIES OF DICHI	LOROMETHAN	E

Target		Mea	n Body Weights (g	(rams)
Concentration (ppm)	Survival (a)	Initial (b)	Final	Change (c)
LE		<u></u>		
15,500	5/5	20.4 ± 0.7	25.8 ± 0.6	$+ 5.4 \pm 0.2$
16,500	5/5	21.0 ± 0.7	25.2 ± 0.7	$+ 4.2 \pm 0.2$
16,800	5/5	20.2 ± 2.1	27.4 ± 0.2	$+ 7.2 \pm 2.2$
17,250	1/5	19.8 ± 0.6	24.0	+ 5.0
18,500	3/5	18.6 ± 0.5	24.3 ± 0.3	$+ 6.3 \pm 0.7$
19,000	1/5	20.8 ± 0.2	26.0	+ 5.0
19,000	1/5	22.0 ± 0.9	24.0	+ 1.0
19,000	0/5	22.0 ± 0.4	(d)	(d)
MALE				
15,500	5/5	17.2 ± 0.4	20.8 ± 0.2	$+ 3.6 \pm 0.2$
16,500	5/5	16.6 ± 0.6	20.0 ± 0.7	$+ 3.4 \pm 0.2$
16,800	5/5	19.4 ± 0.2	21.2 ± 0.4	$+ 1.8 \pm 0.5$
17,250	2/5	18.6 ± 0.7	20.0 ± 0.0	$+ 2.0 \pm 0.0$
18,500	2/5	16.4 ± 0.4	22.5 ± 0.5	$+ 5.5 \pm 0.5$
19,000	4/5	18.8 ± 0.4	21.3 ± 0.3	$+ 2.3 \pm 0.5$
19,000	4/5	19.2 ± 0.6	20.3 ± 0.5	$+ 1.3 \pm 0.5$
19,000	2/5	18.2 ± 0.7	20.5 ± 0.5	$+ 2.0 \pm 1.0$

(a) Number surviving/number initially in group

(b) Initial group mean body weight \pm standard error of the mean. Subsequent calculations are based on those animals surviving to the end of the study.

(c) Mean body weight change of the survivors of the group \pm standard error of the mean

(d) No data are reported due to the 100% mortality in this group.

Target		Mea	n Body Weights	Final Weight Relative	
Concentration (ppm)	Survival (a)	Initial (b)	Final	Change (c)	to Controls (percent)
MALE		<u></u>			
0	5/5	24.8 ± 0.6	26.8 ± 0.6	$+2.0 \pm 0.0$	
1,625	4/5	24.6 ± 0.4	27.8 ± 0.3	$+2.8 \pm 0.3$	103.7
3,250	5/5	24.6 ± 0.2	26.8 ± 1.0	$+2.2 \pm 1.0$	100.0
6,500	5/5	24.4 ± 0.2	28.0 ± 0.3	$+3.6 \pm 0.4$	104.5
13,000	2/5	25.4 ± 0.5	26.5 ± 0.5	$+ 1.0 \pm 0.0$	98.9
16,000	0/5	25.0 ± 0.4	(d)	(d)	
FEMALE					
0	5/5	19.2 ± 0.4	22.6 ± 0.5	$+3.4 \pm 0.4$	
1,625	5/5	19.4 ± 0.7	23.0 ± 0.5	$+3.6 \pm 0.2$	101.8
3,250	5/5	19.8 ± 0.5	24.8 ± 0.6	$+5.0 \pm 0.3$	109.7
6,500	5/5	19.4 ± 0.2	24.8 ± 0.6	$+5.4 \pm 0.6$	109.7
13,000	1/5	19.2 ± 0.5	17.0	- 2.0	75.2
16,000	0/5	19.0 ± 0.3	(d)	(d)	

TABLE 18. SURVIVAL AND MEAN BODY WEIGHTS OF MICE IN THE NINETEEN-DAY INHALATION STUDIES OF DICHLOROMETHANE

(a) Number surviving/number initially in the group

(b) Initial group mean body weight \pm standard error of the mean. Subsequent calculations are based on those animals surviving to the end of the study.

(c) Mean body weight change of the survivors of the group \pm standard error of the mean

(d) No data are reported due to the 100% mortality in this group.

THIRTEEN-WEEK STUDIES

The deaths of 4/10 males and 2/10 females exposed to dichloromethane at 8,400 ppm were considered to be compound related (Table 19). The final mean body weight of females exposed at 8,400 ppm was 8% lower than that of the controls. Centrilobular hydropic degeneration (pale perinuclear cytoplasm of centrilobular hepatocytes) of minimal-to-mild severity was observed in 3/10 males and 8/10 females exposed at 8,400 ppm and in 9/10 females exposed at 4,200 ppm. This lesion was considered to be due to

differences in glycogen storage and a consequence of the sequence in which the animals were killed. The liver lipid:liver weight ratio for female mice that were exposed at 8,400 ppm was significantly lower than that of the controls (P < 0.05, Dunnett's test) (Table 20).

Dose Selection Rationale: Based on deaths observed at 8,400 ppm and the severity of histologic changes noted in mice exposed at 4,000 ppm for 13 weeks, concentrations selected for mice for the 2-year inhalation studies of dichloromethane were 2,000 and 4,000 ppm.

Target		Mear	Final Weight Relative		
Concentration (ppm)	Survival (a)	Initial (b)	Final (c)	Change (d)	to Controls (percent)
MALE					
0	(e)9/10	27.3 ± 0.4	33.0 ± 0.8	$+5.7 \pm 0.8$	
525	10/10	25.5 ± 0.7	32.1 ± 0.6	$+ 6.6 \pm 0.8$	97.3
1,050	(f) 9/10	27.2 ± 0.6	33.7 ± 0.8	$+ 6.4 \pm 0.4$	102.1
2,100	10/10	26.9 ± 0.7	34.4 ± 0.6	$+7.5 \pm 0.6$	104.2
4,200	10/10	26.1 ± 0.5	32.9 ± 0.7	$+6.8 \pm 0.5$	99.7
8,400	(g) 6/10	25.4 ± 0.7	34.0 ± 1.0	$+7.7 \pm 1.0$	103.0
FEMALE					
0	(h)7/10	20.9 ± 0.6	27.7 ± 0.6	$+6.3 \pm 0.4$	
525	10/10	21.0 ± 0.5	28.1 ± 0.8	$+7.1 \pm 0.9$	101.4
1,050	10/10	21.0 ± 0.4	28.9 ± 0.5	+ 7.9 ± 0.7	104.3
2,100	10/10	21.3 ± 0.6	29.2 ± 0.8	$+7.9 \pm 0.4$	105.4
4,200	10/10	20.6 ± 0.4	28.7 ± 0.5	$+8.1\pm0.5$	103.6
8,400	(i) 7/10	19.6 ± 0.4	25.4 ± 0.6	$+5.6 \pm 0.5$	91.7

TABLE 19. SURVIVAL AND MEAN BODY WEIGHTS OF MICE IN THE THIRTEEN-WEEK INHALATION STUDIES OF DICHLOROMETHANE

(a) Number surviving/number initially in group
(b) Initial group body weight ± standard error of the mean. Subsequent calculations are based on those animals that survived through the final weighing. (c) Final body weights taken after 12 weeks of exposure

(d) Mean body weight change of the survivors \pm standard error of the mean

(e) Week of death: 8

(f) Week of death: 5

(g) Week of death: 2, 9, 12, 12

(h) Week of death: 8

(i) Week of death: 12; one death was accidental.

TABLE 20. RATIO OF LIVER LIPID WEIGHT TO LIVER WEIGHT IN MICE EXPOSED TO DICHLOROMETHANE IN THE THIRTEEN-WEEK INHALATION STUDIES

Target Concentration	<u>Milligrams L</u>	ipid/Gram Liver (a)	
(ppm)	Male	Female	<u></u>
0	36 ± 4	41 ± 9	
525	45 ± 12	44 ± 7	
1,050	36 ± 4	36 ± 5	
2,100	43 ± 19	42 ± 9	
4,200	32 ± 4	40 ± 7	
8,400	34 ± 6	(b) 30 ± 4	

(a) Mean \pm standard deviation

(b) P<0.01 vs controls by Dunnett's test

TWO-YEAR STUDIES

Body Weights and Clinical Signs

The initial weight of the high dose male mice was 15% lower than that of the controls (Table 21 and Figure 3). The mean body weight of the high dose group was generally comparable to that of the controls until week 90, after which they were 8%-11% lower than those of the controls. The initial mean body weight of the high dose female mice was 7% greater than that of the controls and remained greater until week 51. From week 51 to week 95, mean body weights of the high dose female mice were 0%-9% lower than those of the controls; at week 99, the mean body weight of the high dose female group was 17% lower than that of the controls. During exposure periods, high dose female mice (and to a lesser extent, high dose male mice and low dose female mice) were hyperactive. During the second year of the study, high dose female mice were lethargic.

TABLE 21. MEAN BODY WEIGHTS AND SURVIVAL OF MICE IN THE TWO-YEAR INHALATION STUDIES OF DICHLOROMETHANE

Weeks on Study	Co	ntrol		2,000 ppm Wt. (percent			4,000 ppn Wt. (percent	1
on Study	Av. Wt. (grams)	No. of Survivors	Av. WL (grams)	Wt. (percent of controls)	No. of Survivors	Av. WL (grams)	WL (percent of controls)	No. of Survivors
MALE	<u></u>							
0 1 2 3 4 5 6 7 8 9 10 11 12 6 21 29 3 8 8 29 3 8 8 29 38 29 38 29 38 29 50 66 8 8 90 50 8 90 50 8 90 50 8 90 50 8 90 11 2 5 8 90 11 2 5 8 90 11 2 5 8 90 11 2 5 8 90 11 2 5 8 90 11 2 5 8 90 11 12 5 8 90 11 12 5 8 90 11 12 5 8 90 11 12 5 8 90 11 12 5 8 90 11 12 5 8 90 11 12 5 8 9 10 11 12 5 5 8 9 10 11 12 5 5 8 9 10 11 12 5 5 9 10 11 12 5 5 8 9 10 11 12 5 5 9 10 11 12 5 5 9 10 11 12 5 5 9 10 11 12 5 5 9 10 11 12 5 5 9 10 11 12 5 5 9 10 11 12 5 5 10 11 12 5 5 9 10 11 12 5 5 9 10 11 12 5 5 9 10 11 12 5 5 9 10 11 12 12 12 12 12 12 12 12 12 12 12 12	$\begin{array}{c} 24.7\\ 24.3\\ 26.6\\ 28.1\\ 28.0\\ 24.7\\ 27.6\\ 28.8\\ 30.6\\ 30.3\\ 29.9\\ 30.0\\ 32.1\\ 33.5\\ 33.2\\ 39.9\\ 30.0\\ 32.1\\ 33.5\\ 33.4\\ 6\\ 33.5\\ 33.4\\ 33.5\\ 33$	50 50 50 50 50 50 50 50 50 50 50 50 50 5	$\begin{array}{c} 24.3\\ 26.6\\ 29.0\\ 29.0\\ 30.3\\ 31.9\\ 32.2\\ 31.6\\ 31.2\\ 31.6\\ 31.2\\ 34.5\\ 35.6\\ 4\\ 31.7\\ 35.6\\ 31.9\\ 34.5\\ 35.4\\ 31.9\\ 38.4\\ 39.1\\ 38.6\\ 41.0\\ 39.7\\ 38.8\\ 41.0\\ 39.7\\ 38.8\\ 9.3\\ 39.6\\ 41.0\\ 39.7\\ 38.8\\ 9.3\\ 39.6\\ 41.0\\ 39.7\\ 38.8\\ 9.3\\ 39.6\\ 39.3\\ 39.6\\ 39.3\\ 39.6\\ 39.3\\ 39.6\\ 39.3\\ 39.6\\ 39.3\\ 39.5\\ 39.3\\ 39.5\\ 39.3\\ 39.5\\ 39.3\\ 39.5\\ 39.3\\ 39.5\\ 39.3\\ 39.5\\ 39.3\\ 39.5\\ 39.3\\ 39.5\\ 39.3\\ 39.5\\$	98 108 104 105 103 104 123 116 104 106 106 106 106 106 105 106 106 106 106 106 106 106 106 106 106	50 50 50 50 50 50 50 50 50 50 50 50 50 5	$\begin{array}{c} 21.0\\ 257.4\\ 27.6\\ 28.9\\ 29.9\\ 29.9\\ 30.6\\ 31.4\\ 31.4\\ 31.4\\ 32.5\\ 35.6\\ 37.9\\ 36.1\\ 36.1\\ 36.1\\ 36.6\\ 36.7\\ 36.6\\ 36.7\\ 36.6$	85 106 107 105 100 103 121 108 103 106 103 106 107 103 106 107 103 106 107 103 106 107 103 106 107 103 106 107 103 106 107 103 106 107 109 98 99 97 97 92 94 89	50 49 49 49 49 49 49 49 49 49 49 49 48 48 47 77 53 44 42 65 330 25
	36.1 36.6 35.7 35.3	42 41 39	38.8 37.9 39.3	106 106 111	37 32 30 28	35.0 33.5 33.5 31.3	92 94 89	30 25 21
EMALE								
0 12 3 4 5 6 7 8 9 10 11 22 5 9 4 8 9 10 11 22 5 9 4 8 22 9 4 8 22 9 4 8 22 9 4 8 22 9 4 8 22 9 4 8 22 9 10 11 22 5 6 7 8 9 10 11 22 5 6 7 8 9 10 11 22 5 6 7 8 9 10 11 22 5 6 7 8 9 10 11 22 5 6 7 8 9 10 11 22 5 6 7 8 9 10 11 22 5 8 9 10 11 22 5 8 9 10 11 22 5 8 9 10 11 22 5 8 9 10 11 22 5 8 9 10 11 22 5 8 9 10 11 22 5 9 10 11 22 5 9 10 11 22 5 9 10 11 22 5 9 10 11 22 5 9 10 11 22 5 9 10 11 22 5 9 10 11 22 5 9 10 11 22 5 9 10 11 22 5 9 10 11 22 5 9 10 11 22 5 9 10 11 22 5 9 10 11 22 5 9 10 11 22 5 9 10 11 22 5 9 10 11 22 5 9 10 11 22 5 9 10 11 22 5 9 4 8 22 8 12 15 15 15 15 15 15 15 10 11 22 5 9 4 8 22 15 15 15 10 10 11 22 5 9 4 8 22 15 15 15 15 15 10 10 11 22 5 10 11 22 5 10 11 22 5 11 22 5 11 2 11 2	$\begin{array}{c} 16.8\\ 21.6\\ 22.4.5\\ 24.5\\ 24.5\\ 24.5\\ 24.5\\ 24.5\\ 24.5\\ 24.5\\ 25.6\\ 26.5\\ 27.9\\ 30.9\\ 31.5\\ 31.9\\ 33.3\\ 34.4\\ 7\\ 33.3\\ 34.4\\ 33.2\\ 34.6\\ 33.3\\ 34.6\\ 33.3\\ 34.6\\ 33.3\\ 34.6\\ 33.2\\ 34.6\\ $	50099999999999999999999999999999999999	$\begin{array}{c} 17.6\\ 223.3\\ 21.7\\ 225.3\\ 25.8\\ 27.6\\ 28.8\\ 27.6\\ 28.8\\ 29.2\\ 30.6\\ 31.6\\ 32.6\\ 33.4\\ 35.6\\ 33.4.9\\ 35.6\\ 34.9\\ 35.6\\ 34.9\\ 35.6\\ 34.9\\ 35.6\\ 34.9\\ 35.6\\ 34.9\\ 35.7\\ 5\\ 35.6\\ 34.9\\ 35.7\\ 35.6\\ 34.9\\ 35.7\\ 35.6\\ 34.9\\ 35.7\\ 35.6\\ 34.9\\ 35.7\\ 35.6\\ 34.9\\ 35.7\\ 35.6\\ 34.9\\ 35.7\\ 35.6\\ 34.9\\ 35.7\\ 35.6\\ 34.9\\ 35.7\\ 35.6\\ 34.9\\ 35.7\\ 35.6\\ 34.9\\ 35.7\\ 35.6\\ 34.9\\ 35.7\\ 35.6\\ 34.9\\ 35.7\\ 35.6\\ 34.9\\ 35.7\\ 35.6$	105 101 108 95 102 103 106 107 105 103 110 101 101 101 105 100 105 99 99 99 99 99 99 99 99 99 99 99 99 99	50 5477777777447 44744777777777777777777	$18.0\\222.9\\24.8\\26.0\\27.5\\28.6\\28.7\\28.6\\28.7\\28.6\\28.9\\28.9\\31.2\\28.9\\31.2\\32.0\\32.1\\31.2\\32.2\\32.2\\32.2\\32.2\\33.2\\32.9\\32.2\\33.2\\32.9\\32.2\\33.2\\32.9\\32.5\\32.6\\32.6\\32.6\\32.6\\32.6\\32.6\\32.6\\32.6$	$\begin{array}{c} 107\\ 101\\ 106\\ 109\\ 102\\ 106\\ 113\\ 106\\ 108\\ 102\\ 113\\ 106\\ 102\\ 113\\ 106\\ 113\\ 104\\ 103\\ 104\\ 103\\ 104\\ 103\\ 102\\ 101\\ 101\\ 101\\ 101\\ 97\\ 100\\ 97\\ 95\\ 93\\ 97\\ 95\\ 92\\ 91\\ 91\\ 100\\ 83\\ \end{array}$	50999988877766666666666666666666663333333333

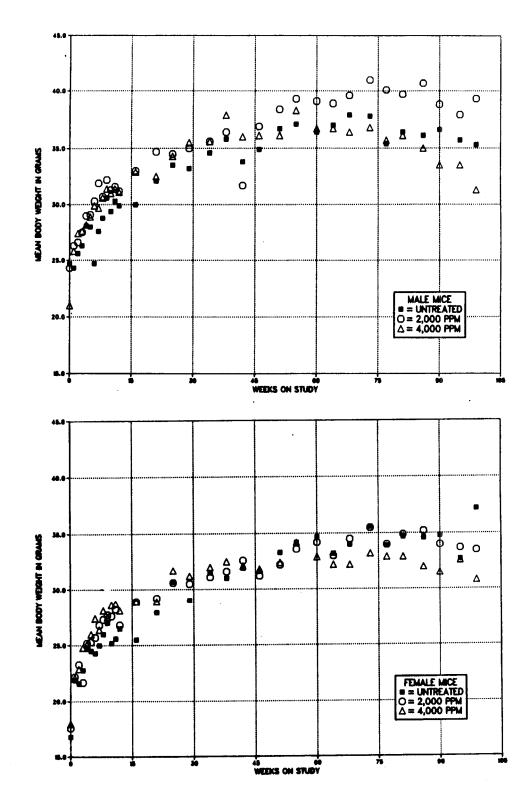


FIGURE 3. GROWTH CURVES FOR MICE EXPOSED TO DICHLOROMETHANE BY INHALATION FOR TWO YEARS

Survival

Estimates of the probabilities of survival of male and female mice exposed to dichloromethane at the concentrations used in these studies and those of the controls are shown in the Kaplan and Meier curves in Figure 4. The survival of both dosed groups of male mice (low dose after week 101, high dose after week 89) was significantly lower than that of the controls, and the survival of the high dose group was significantly lower than that of the low dose group (P=0.016) (Table 22). The survival of the high dose group of female mice was significantly lower than that of both the controls (after week 98) and the low dose group (P<0.01).

Pathology and Statistical Analyses of Results

This section describes the significant or noteworthy changes in the incidences of mice with neoplastic or nonneoplastic lesions of the lung, liver, circulatory system, testis, ovary, uterus, kidney, stomach, and spleen. Histopathologic findings on neoplasms in mice are summarized in Appendix B (Tables B1 and B2); Appendix B (Tables B3 and B4) also gives the survival and tumor status for individual male and female mice. Findings on nonneoplastic lesions are summarized in Appendix D (Tables D1 and D2). Appendix E (Tables E3 and E4) contains the statistical analyses of those primary tumors that occurred with an incidence of at least 5% in one of the three groups. The statistical analyses used are discussed in Chapter II (Statistical Methods) and Appendix E (footnotes). Historical incidences of tumors in control animals are listed in Appendix F.

	Control	2,000 ppm	4,000 ppm
MALE (a)			
Animals initially in study	50	50	50
Nonaccidental deaths before termination (b)	11	24	38
Accidentally killed	0	2	1
Killed at termination	39	24	9
Died during termination period	0	0	2
Survival P values (c)	< 0.001	0.010	< 0.001
FEMALE (a)			
Animals initially in study	50	50	50
Nonaccidental deaths before termination (b)	24	22	40
Accidentally killed	1	2	1
Animals missing	0	1	1
Cilled at termination	25	25	8
Survival P values (c)	0.002	0.678	0.004

TABLE 22. SURVIVAL OF MICE IN THE TWO-YEAR INHALATION STUDIES OF DICHLOROMETHANE

(a) Terminal kill period: week 104

(b) Includes animals killed in a moribund condition

(c) The result of the life table trend test is in the control column, and the results of the life table pairwise comparisons with the controls are in the dosed columns.

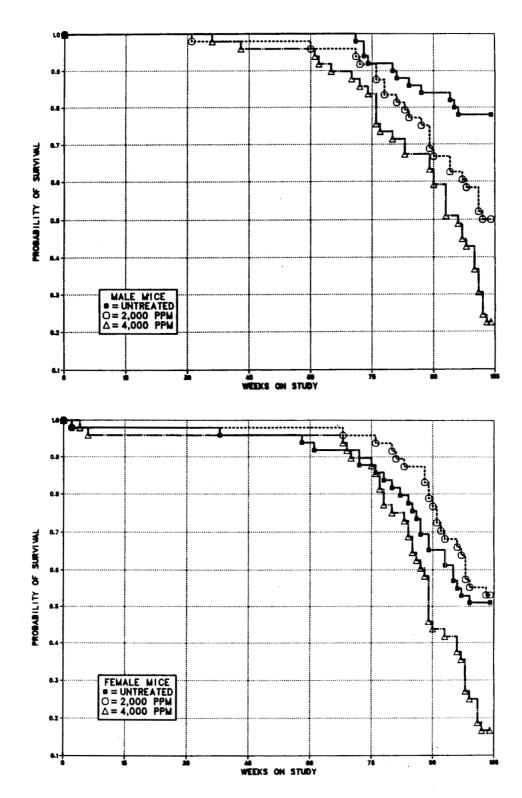


FIGURE 4. KAPLAN-MEIER SURVIVAL CURVES FOR MICE EXPOSED TO DICHLOROMETHANE BY INHALATION FOR TWO YEARS

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Lung: Alveolar/bronchiolar adenomas, alveolar bronchiolar carcinomas, and alveolar/bronchiolar adenomas or carcinomas (combined) in male and female mice occurred with significant positive trends, and the incidences in the dosed groups were significantly greater than those in the controls (Table 23).

TABLE 23.	ANALYSIS OF LUNG LI	ESIONS IN MICE IN THE TWO-YEAR INHALATION STUDIES OF				
DICHLORÔMETHANE (a)						

	Control	2,000 ppm	4,000 ppm
TALE		<u></u>	·
pithelial Hyperplasia			
Overall Rates	0/50 (0%)	0/50 (0%)	1/50 (2%)
lveolar/Bronchiolar Adenoma			
Overall Rates	3/50 (6%)	19/50 (38%)	24/50 (48%)
Adjusted Rates	7.7%	55.6%	78.5%
Terminal Rates	3/39 (8%)	10/24 (42%)	6/11 (55%)
Week of First Observation	104	71	70
Life Table Tests	P<0.001	P<0.001	P<0.001
Incidental Tumor Tests	P<0.001	P<0.001	P<0.001
lveolar/Bronchiolar Carcinoma			
Overall Rates	2/50 (4%)	10/50 (20%)	28/50 (56%)
Adjusted Rates	4.9%	34.0%	92.9%
Terminal Rates	4.3 % 1/39 (3%)	6/24 (25%)	9/11 (82%)
Week of First Observation	94	78	72
Life Table Tests	P<0.001	P = 0.002	P<0.001
Incidental Tumor Tests	P<0.001	P = 0.016	P<0.001
lveolar/Bronchiolar Adenoma or Carci	noma (b)		
Overall Rates	5/50 (10%)	27/50 (54%)	40/50 (80%)
Adjusted Rates	12.4%	74.2%	100.0%
Terminal Rates	4/39 (10%)	15/24 (63%)	11/11 (100%)
Week of First Observation	94	71	70
Life Table Tests	P<0.001	P<0.001	P<0.001
Incidental Tumor Tests	P<0.001	P<0.001	P<0.001
incidental l'unor l'ests	r < 0.001	r<0.001	F < 0.001
EMALE			
pithelial Hyperplasia			
Overall Rates	0/50 (0%)	1/48 (2%)	0/48 (0%)
lveolar/Bronchiolar Adenoma			
Overall Rates	2/50 (4%)	23/48 (48%)	28/48 (58%)
Adjusted Rates	6.7%	66.5%	91.1%
Terminal Rates	1/25 (4%)	14/25 (56%)	6/8 (75%)
Week of First Observation	87	83	68
Life Table Tests	P<0.001	P<0.001	P<0.001
Incidental Tumor Tests	P<0.001	P<0.001	P<0.001
lveolar/Bronchiolar Carcinoma			
Overall Rates	1/50 (2%)	13/48 (27%)	29/48 (60%)
Adjusted Rates	4.0%	45.9%	92.2%
Terminal Rates	1/25 (4%)	10/25 (40%)	6/8 (75%)
Week of First Observation	104	89	68
Life Table Tests	P<0.001	P<0.001	P<0.001
Incidental Tumor Tests	P<0.001	P<0.001	P<0.001
lveolar/Bronchiolar Adenoma or Carci Overall Rates	noma (c) 3/50 (6%)	30/48 (63%)	41/48 (85%)
	10.6%	82.9%	100.0%
Adjusted Rates		19/25 (76%)	8/8 (100%)
Adjusted Rates Terminal Rates	2/25 (8%)	19/25 (76%) 83	8/8 (100%) 68
Adjusted Rates		19/25 (76%) 83 P<0.001	8/8 (100%) 68 P<0.001

(a) The statistical methods used are discussed in Chapter II (Statistical Methods) and Appendix E (footnotes). (b) Historical incidence at testing laboratory: 31/100 (31%); historical incidence in NTP studies (mean \pm SD): 296/1,780 (17% \pm 8%)

(c) Historical incidence at testing laboratory: 10/100 (10%); historical incidence in NTP studies (mean \pm SD): 122/1,777 (7% \pm 4%)

Liver: Cytologic degeneration was observed at increased incidences in high dose male mice and dosed female mice (male: control, 0/50; low dose, 0/49; high dose, 22/49, 45%; female: control, 0/50; low dose, 23/48, 48%; high dose, 21/48, 44%). Hepatocellular adenomas, hepatocellular carcinomas, and hepatocellular adenomas or carcinomas (combined) in male and female mice occurred with significant positive trends. The

incidences of hepatocellular adenomas in high dose male and high dose female mice, hepatocellular carcinomas in high dose male and dosed female mice, hepatocellular adenomas and hepatocellular adenomas or carcinomas (combined) in dosed male mice, and hepatocellular adenomas or carcinomas (combined) in dosed female mice were significantly greater than those in the controls (Table 24).

TABLE 24.	ANALYSIS OF LIVER TUMORS IN MICE IN THE TWO-YEAR INHALATION STUDIES OF
	DICHLOROMETHANE

	Control	2,000 ppm	4,000 ppm
MALE		<u> </u>	
Hepatocellular Adenoma			
Overall Rates	10/50 (20%)	14/49 (29%)	14/49 (29%)
Adjusted Rates	23.0%	46.9%	68.3%
Terminal Rates	7/39 (18%)	9/24 (38%)	6/11 (55%)
Week of First Observation	73	71	80
Life Table Tests	P<0.001	P = 0.041	P = 0.001
Incidental Tumor Tests	P = 0.075	P = 0.161	P = 0.095
Hepatocellular Carcinoma			
Overall Rates	13/50 (26%)	15/49 (31%)	26/49 (53%)
Adjusted Rates	29.7%	43.7%	76.4%
Terminal Rates	9/39 (23%)	7/24 (29%)	5/11 (45%)
Week of First Observation	73	72	61
Life Table Tests	P<0.001	P = 0.111	P<0.001
Incidental Tumor Tests	P = 0.016	P = 0.422	P = 0.042
Hepatocellular Adenoma or Carcinoma (a			00404080
Overall Rates	22/50 (44%)	24/49 (49%)	33/49 (67%)
Adjusted Rates	48.3%	66.8%	93.0%
Terminal Rates	16/39 (41%)	13/24 (54%)	9/11 (82%)
Week of First Observation	73	71	61 D < 0.001
Life Table Tests	P<0.001	P = 0.048	P<0.001
Incidental Tumor Tests	P=0.010	P = 0.305	P = 0.020
FEMALE			
Hepatocellular Adenoma			
Overall Rates	2/50 (4%)	6/48 (13%)	22/48 (46%)
Adjusted Rates	6.5%	21.3%	83.0%
Terminal Rates	1/25 (4%)	4/25 (16%)	5/8 (63%)
Week of First Observation	84	96	68
Life Table Tests	P<0.001	P = 0.151	P<0.001
Incidental Tumor Tests	P<0.001	P = 0.155	P<0.001
Hepatocellular Carcinoma			00/10 (ARM)
Overall Rates	1/50 (2%)	11/48 (23%)	32/48 (67%)
Adjusted Rates	4.0%	34.0%	96.5%
Terminal Rates Week of First Observation	1/25 (4%) 104	6/25 (24%) 83	7/8 (88%) 68
Life Table Tests	P<0.001	P = 0.005	P<0.001
Incidental Tumor Tests	P<0.001 P<0.001	P = 0.003 P = 0.004	P<0.001 P<0.001
Hepatocellular Adenoma or Carcinoma (b)			
Overall Rates	, 3/50 (6%)	16/48 (33%)	40/48 (83%)
Adjusted Rates	10.4%	48.0%	100.0%
Terminal Rates	2/25 (8%)	9/25 (36%)	8/8 (100%)
Week of First Observation	84	83	68
Life Table Tests	P<0.001	P = 0.002	P<0.001
Incidental Tumor Tests	P<0.001	P = 0.002	P<0.001

(a) Historical incidence at testing laboratory: 28/100 (28%); historical incidence in NTP studies (mean \pm SD): $540/1,784 (30\% \pm 8\%)$

(b) Historical incidence at testing laboratory: 5/100 (5%); historical incidence in NTP studies (mean \pm SD): 147/1,781 (8% \pm 5%)

Circulatory System: Hemangiosarcomas in male mice occurred with a significant positive trend by the life table test; the incidence in the 4,000ppm group was significantly greater than that in the controls in life table pairwise comparisons (Table 25). The following incidences of hemangioma or hemangiosarcoma (combined) were observed in female mice: control, 0/50; low dose, 2/49 (4%); high dose, 2/49 (4%).

Testis: Testicular atrophy was observed at increased incidences in dosed male mice (control, 0/50; low dose, 4/50, 8%; high dose, 31/50, 62%).

Ovary and Uterus: Ovarian atrophy was observed at increased incidences in dosed female mice (control, 6/50, 12%; low dose, 28/47, 60%; high dose, 32/43, 74%). Uterine atrophy was observed at increased incidence in high dose female mice (control, 0/50; low dose, 1/48, 2%; high dose, 8/47, 17%).

Kidney: The incidence of kidney/tubule casts was increased in high dose male mice (male: control, 6/50, 12%; low dose, 11/49, 22%; high dose, 20/50, 40%; female: control, 8/49, 16%; low dose, 23/48, 48%; high dose, 23/47, 49%).

Stomach: Dilatation of the stomach was observed at an increased incidence in high dose male and female mice (male: control, 3/49, 6%; low dose, 7/47, 15%; high dose, 9/49, 18%; female: control, 1/49, 2%; low dose, 2/47, 4%; high dose, 10/48, 21%).

Spleen: Atrophy of the splenic follicles was observed at increased incidence in high dose male mice (male: control, 0/49; low dose, 3/49, 6%; high dose, 7/48, 15%; female: control, 0/49; low dose, 0/48; high dose, 1/47, 2%).

	Control	2,000 ppm	4,000 ppm
Hemangioma			
Overall Rates	1/50 (2%)	0/50 (0%)	1/50 (2%)
Hemangiosarcoma			
Overall Rates	1/50 (2%)	2/50 (4%)	5/50 (10%)
Adjusted Rates	2.6%	7.6%	21.4%
Terminal Rates	1/39 (3%)	1/24 (4%)	1/11 (9%)
Week of First Observation	104	101	70
Life Table Tests	P = 0.007	P=0.352	P = 0.017
Incidental Tumor Tests	P=0.083	P=0.495	P = 0.142
Hemangioma or Hemangiosarcoma (a)			
Overall Rates	2/50 (4%)	2/50 (4%)	6/50 (12%)
Adjusted Rates	4.8%	7.6%	25.8%
Terminal Rates	1/39 (3%)	1/24 (4%)	1/11 (9%)
Week of First Observation	87	101	70
Life Table Tests	P = 0.010	P = 0.558	P = 0.022
Incidental Tumor Tests	P = 0.170	P = 0.643N	P = 0.301

TABLE 25. ANALYSIS OF CIRCULATORY SYSTEM TUMORS IN MALE MICE IN THE TWO-YEARINHALATION STUDY OF DICHLOROMETHANE

(a) Historical incidence at testing laboratory: 2/100 (2%); historical incidence in NTP studies (mean \pm SD): 78/1,791 (4% \pm 4%)

IV. DISCUSSION AND CONCLUSIONS

Toxicology and carcinogenesis studies were conducted by exposing rodents to dichloromethane (99% pure) by inhalation. For the 2-year studies, groups of 50 male and 50 female F344/N rats and B6C3F₁ mice were exposed for 6 hours per day, 5 days per week. The exposure concentrations used in these studies (0 [chamber controls], 1,000, 2,000, or 4,000 ppm in rats and 0, 2,000, or 4,000 ppm in mice) were selected on the basis of the results of 13-week inhalation studies in which groups of rats and mice of each sex were exposed to dichloromethane at concentrations ranging from 500 to 8,400 ppm for 6 hours per day, 5 days per week.

Thirteen-Week Studies

In the 13-week studies in rats, exposure at 8,200 ppm decreased body weight gain in both sexes; one male rat died before the end of the study. Body weight gains by dosed mice were comparable to those of chamber controls; four males in the 8,400-ppm group and two females in the 8,200-ppm and chamber control groups died before the end of the studies. The 8,200-ppm and 4,000-ppm concentrations produced mild to minimal lung changes in rats and hydropic changes in the livers of mice.

A maximum exposure concentration of 4,000 ppm was selected for the 2-year studies because of the minimal severity of the histopathologic changes noted in both rats and mice after exposure at 4,000 ppm for 13 weeks. The second exposure concentration selected was 2,000 ppm for both species, and a third, lower concentration (1,000 ppm) was added for rats because, in an earlier inhalation study (Burek et al., 1980, 1984), exposure at 3,500 ppm had reduced the survival of female Sprague-Dawley rats.

Two-Year Studies

The results of the present studies as well as of other available long-term studies conducted on dichloromethane are summarized for ease of comparison in Table 26. In male rats, exposure at 1,000, 2,000, or 4,000 ppm dichloromethane had no effect on survival compared with the chamber controls; however, the survival of all groups of male rats was unusually low relative

to historical data (chamber control, 16/50; low dose, 16/50; mid dose, 17/50; high dose, 9/50). Most of these early deaths occurred during the last 16 weeks of the study: the survival at week 86 was considered average (control, 36/50; low dose, 39/50; mid dose, 37/50; high dose, 33/50). There was an unusually high incidence of advanced mononuclear cell leukemia in all groups of male rats (control, 34/50; low dose, 26/50; mid dose, 32/50; high dose, 35/50). The leukemia may have contributed to the early deaths. The survival of female rats exposed at 4,000 ppm was reduced (control, 30/50; low dose, 22/50; mid dose, 22/50; high dose, 15/50), and there was an increase in the incidence of leukemia in the 2,000-ppm and 4,000-ppm groups (control, 17/50; low dose, 17/50; mid dose, 23/50; high dose, The advanced leukemia, which may 23/50). have reduced survival of high dose females, may have been due to administration of dichloromethane. In light of the unusually high incidence of leukemia in all groups of males, it is not possible to make an unequivocal conclusion concerning the relationship between dichloromethane exposure and the marginally increased incidence of the disease in the mid dose and high dose female rats. Body weights for dosed male and female rats were comparable to those of chamber controls.

In mice, the survival of dosed males and high dose females was reduced relative to that of the chamber controls (see Table 22 and Figure 4). This reduced survival may have been because of the high incidences of liver and lung neoplasia in dosed animals. Total deaths increased in a dose-related manner during the final 16 weeks (male: control, 4/43, 9%; low dose, 9/37, 24%; high dose, 12/33, 36%; female: control, 10/36, 28%; low dose, 15/41, 37%; high dose, 19/31, 61%). Final mean body weights of high dose male mice and dosed female mice were 10%-17% lower than those of the chamber controls. These differences in body weight occurred during the last 16 weeks of the studies.

Mammary Gland Effects in Rats

The administration of dichloromethane produced increased incidences of mammary gland neoplasms in both male and female rats (male:

Reference	Route	Species	Strain	Concentration	Tumor Site
Burek et al. (1980, 1984)	Inhalation	Rat	Sprague-Dawley	0, 500, 1,500, 3500 ppm	Mammary gland (both sexes)
	Inhalation	Hamster	Syrian	0, 500, 1,500, 3,500 ppm	No reported effect
Nitschke et al. (1982)	Inhalation	Rat	Sprague-Dawley	0, 50, 200, 500 ppm	Mammary gland (females)
National Coffee Association (1982)	Drinking water	Rat	F344	0, 5, 50, 125, 250 mg/kg	No reported effects
National Coffee Association (1983)	Drinking water	Mouse	B6C3F ₁	0, 60, 125, 185, 250 mg/kg	No reported effects
Current studies	Inhalation	Rat	F344/N	0, 1,000, 2,000, 4,000 ppm	Mammary gland (both sexes)
	Inhalation	Mouse	B6C3F1	0, 2,000, 4,000 ppm	Liver and lung (both sexes)

TABLE 26. SUMMARY OF RESULTS OF TWO-YEAR STUDIES ON DICHLOROMETHANE

control, 0/50; low dose, 0/50; mid dose, 2/50; high dose, 5/50; female: control, 7/50; low dose, 13/50; mid dose, 14/50; high dose, 23/50). In addition, there was a marginal increase in the incidence of subcutaneous tissue fibromas in the region of the mammary chain in male rats (control, 1/50; low dose, 1/50; mid dose, 2/50; high dose, 4/50). Since these fibromas were all found in the axillary and inguinal areas, they probably arose from mammary tissue. The incidences of the combined mammary tumors were: control, 1/50; low dose, 1/50; mid dose, 4/50; high dose, 9/50. The historical incidences of mammary gland tumors in chamber control rats at the same laboratory are 1/100 in males and 17/99 in females. Throughout the Program, the historical incidences for animals receiving no treatment are 54/1,727 (3%) in males and 520/1,772 (29%) in females (Tables F4 and F11).

Burek et al. (1980, 1984) exposed Sprague-Dawley rats to dichloromethane at concentrations of 0, 500, 1,500, or 3,500 ppm for 6 hours per day, 5 days per week for 2 years (see Table 26). The Sprague-Dawley rat strain has control incidences of mammary gland tumors of 10% in males and 80% in females (Burek et al., 1984). This high background incidence in females makes it difficult to detect significant increases in the number of tumor-bearing animals in 2year studies. Burek et al. (1980, 1984) reported that the number of animals with mammary gland tumors was not increased by exposure to dichloromethane (male: control, 7/92; low dose, 3/95: mid dose, 7/95: high dose, 14/97; female: control, 79/96; low dose, 81/95; mid dose, 80/96; high dose, 83/97) but that all exposure concentrations increased the number of mammary gland tumors per mammary gland-tumor-bearing female (mean number of tumors per tumorbearing female: control, 2.1; low dose, 2.7; mid dose, 3.1; high dose, 3.5). The same effect, although less pronounced, was produced in male rats exposed at 1.500 or 3.500 ppm. Burek et al. (1984) reported no evidence of carcinogenicity of dichloromethane in Syrian golden hamsters (exposures up to 3,500 ppm for 2 years).

In a followup study, Nitschke et al. (1982) exposed Sprague-Dawley rats at 0, 50, 200, or 500 ppm for 6 hours per day, 5 days per week for 2 years (see Table 26). An increase in the number of mammary gland tumors per mammary gland-tumor-bearing female was observed at 500 ppm (control, 2.0; 50 ppm, 2.3; 200 ppm, 2.2; 500 ppm, 2.7). In male rats, no effects on the mammary gland were reported.

In 2-year drinking water studies (National Coffee Association, 1982, 1983), dichloromethane was made available to F344 rats (5-250 mg/kg per day) and B6C3F₁ mice (60-250 mg/kg per day) (see Table 26). This dosing regimen was not reported to be associated with neoplasia in either species; however, it is probable that the animals could have tolerated higher doses.

The increased incidences of mammary gland tumors in female rats in the present study are consistent with the findings of Burek et al. (1980, 1984) and of Nitschke et al. (1982). These observations in females lend support to the dichloromethane-associated increased incidences of mammary gland tumors and subcutaneous fibromas in male rats. The weight of the evidence for the mammary gland effect in male rats is considered to be less than that for female rats.

Hepatic Effects in Rats

Burek et al. (1984) reported that inhalation of dichloromethane at 500-3,500 ppm by Sprague-Dawley rats produced minimal, nonproliferative changes in the liver. The reported changes included hemosiderosis, focal necrosis of hepatocytes, basophilic change (females only), and cytoplasmic vacuolization. These changes were also noted in the present inhalation studies and were accompanied by hepatocytomegaly in males and females, bile duct fibrosis in males, and granulomatous inflammation in females. In addition, dichloromethane exposure produced a positive trend in the incidence of hepatocellular neoplastic nodules or carcinomas (combined) in female rats (control, 2/50; low dose, 1/50; mid dose, 4/50; high dose, 5/50). The liver neoplasia may have been due to dichloromethane exposure.

Other Effects in Rats

The incidence of mesotheliomas (originating primarily in the tunica vaginalis) was increased in male rats (control, 0/50; low dose, 1/50; mid dose, 4/50; high dose, 4/50). This increase is not considered to be related to the administration of dichloromethane because the concurrent control incidence was low relative to earlier inhalation studies conducted at this laboratory (4/100, 4%).

Dose-related increases in the incidences of squamous metaplasia of the nasal mucosal epithelium in female rats and suppurative inflammation of the nasal cavity in male rats were noted. The metaplasia and inflammation may have been due to irritant properties of dichloromethane. No nasal cavity neoplasms were observed.

Other neoplasms that occurred with marginally increased incidences in dosed groups of rats included adrenal gland pheochromocytomas and interstitial cell tumors of the testis in males (Table E1) and pituitary gland adenomas/carcinomas in both sexes (Tables E1 and E2). The increases in pituitary gland, adrenal gland, and testicular tumors were significant only by life table analyses, which are inappropriate for these generally nonlethal tumors. An exception occurred in low dose male rats, where the increase in pituitary gland adenomas was significant by both life table and incidental tumor tests, and the incidence was substantially above concurrent and historical controls. Similar increases, however, were not observed in mid dose and high dose male rats, and diagnostic differences between pituitary gland hyperplasia (reduced in low dose males) and adenomas can be slight. Therefore, none of these marginally increased incidences was considered compound related.

Pulmonary Effects in Mice

Exposure to dichloromethane increased the incidences of alveolar/bronchiolar adenomas in both male and female mice (male: control, 3/50; low dose, 19/50; high dose, 24/50; female: control, 2/50; low dose, 23/48; high dose, 28/48) and carcinomas (male: control, 2/50; low dose, 10/50; high dose, 28/50; female: control, 1/50; low dose, 13/48; high dose, 29/48). The observed incidences of alveolar/bronchiolar neoplasia in the chamber control groups were lower than those reported for other chamber control groups at this laboratory and for untreated controls throughout the Program (Tables F14 and F18).

In addition to dose-related increases in the number of male and female mice with lung tumors, there were dose-related increases in the incidences of dosed animals bearing multiple lung tumors (Table 27). No chamber control animal had more than one lung tumor, whereas 38% of all dosed male mice and 42% of all dosed female mice had multiple lung tumors; in those mice with lung tumors, 38/67 (57%) dosed males and 40/71 (56%) dosed females had multiple lung tumors. Lung tumor multiplicity included both alveolar/bronchiolar adenomas and carcinomas (see Table 27). In cases of lung tumor multiplicity, it was not possible to differentiate definitively between multiple primary carcinomas and primary carcinomas with multiple intrapulmonary metastatic lesions. However, the presence of numerous cases of multiple adenomas (15/100 dosed males and 16/96 dosed females) suggests that some of the carcinomas were multiple primary lesions rather than metastatic lesions.

	Exposure Groups (ppm)				
Diagnoses	0	2,000	4,000		
MALE		······································			
One adenoma					
and one carcinoma	0/50	1/50	3/50		
Multiple adenomas	0/50	5/50	4/50		
Multiple carcinomas	0/50	3/50	12/50		
Multiple adenomas					
and multiple carcinomas	0/50	0/50	3/50		
One adenoma					
and multiple carcinomas	0/50	1/50	3/50		
Multiple adenomas					
and one carcinoma	0/50	0/50	3/50		
Incidence of mice with multiple tumors	0/50 (0%)	10/50 (20%)	28/50 (56%)		
No. of mice with multiple tumors/					
no. of mice with pulmonary tumors	0/5 (0%)	10/27 (37%)	28/40 (70%)		
FEMALE					
One adenoma					
and one carcinoma	0/50	2/48	4/48		
Multiple adenomas	0/50	4/48	5/48		
Multiple carcinomas	0/50	1/48	8/48		
Multiple adenomas					
and multiple carcinomas	0/50	0/48	2/48		
One adenoma					
and multiple carcinomas	0/50	2/48	7/48		
Multiple adenomas					
and one carcinoma	0/50	2/48	3/48		
Incidence of mice with multiple tumors	0/50 (0%)	11/48 (23%)	29/48 (60%)		
No. of mice with multiple tumors/					
no. of mice with pulmonary tumors	0/3 (0%)	11/30 (37%)	29/41 (71%)		

TABLE 27. MULTIPLICITY OF PULMONARY TUMORS IN MICE EXPOSED TO
DICHLOROMETHANE

Hepatic Effects in Mice

Dichloromethane produced cytologic degeneration of the liver in both male and female mice; this change was not observed in chamber control animals (Tables D1 and D2). Exposure to dichloromethane increased the incidence of hepatocellular carcinomas and of adenomas or carcinomas (combined) in male mice exposed to dichloromethane at 4,000 ppm (see Table 24). In female mice, dichloromethane produced doserelated increases in the incidences of both hepatocellular adenomas and hepatocellular carcinomas (see Table 24). The incidences of these tumors in the chamber control group were consistent with historical control incidences at this laboratory and in the overall Program (Table F19).

As was the case for lung tumors in mice, multiplicity of hepatocellular tumors in dichloromethane-exposed male and female mice was common (Table 28). The incidence of animals with multiple hepatocellular tumors was increased in both males and females in a doserelated manner (male: control, 2/50; low dose, 11/49; high dose, 16/49; female: control, 0/50; low dose, 3/48; high dose, 28/48). Hepatocellular tumor multiplicity was found in 4% of the male chamber control mice and in none of the female chamber controls, whereas 28% of all exposed males and 32% of all exposed females had multiple liver tumors. In the chamber control groups, 2/22 (9%) hepatocellular tumor-bearing males and 0/3 (0%) hepatocellular tumorbearing females had multiple liver tumors. In contrast, 27/57 (47%) liver tumor-bearing

TABLE 28. MULTIPLICITY OF LIVER TUMORS IN MICE EXPOSED TO DICHLOROMETHANE

Diagnoses	Exposure Groups (ppm)		
	0	2,000	4,000
IALE			
One adenoma			
and one carcinoma	1/50	2/49	3/49
Multiple adenomas	0/50	3/49	3/49
Multiple carcinomas	1/50	3/49	6/49
Multiple adenomas			
and multiple carcinomas	0/50	0/49	1/49
One adenoma			
and multiple carcinomas	0/50	0/49	2/49
Multiple adenomas			
and one carcinoma	0/50	3/49	1/49
ncidence of mice with multiple tumors	2/50 (4%)	11/49 (22%)	16/49 (33%)
No. of mice with multiple tumors/			
no. of mice with liver tumors	2/22 (9%)	11/24 (46%)	16/33 (48%)
EMALE			
Dne adenoma			
and one carcinoma	0/50	1/48	6/48
Multiple adenomas	0/50	0/48	4/48
Multiple carcinomas	0/50	2/48	10/48
Multiple adenomas			
and multiple carcinomas	0/50	0/48	3/48
)ne adenoma			
and multiple carcinomas	0/50	0/48	1/48
Iultiple adenomas			
and one carcinoma	0/50	0/48	4/48
ncidence mice with multiple tumors	0/50 (0%)	3/48 (6%)	28/48 (58%)
lo. of mice with multiple tumors/			
no. of mice with liver tumors	0/3 (0%)	3/16 (19%)	28/40 (70%)

dichloromethane-exposed males and 31/56 (55%) liver tumor-bearing exposed females had hepatocellular tumor multiplicity.

In earlier studies, the National Coffee Association (1983) found no association between dichloromethane administration and liver tumors in mice (see Table 26). In the studies conducted by Burek et al. (1984) and by Nitschke et al. (1982), mice were not used as experimental animals.

Other Effects in Mice

Increased incidences of testicular atrophy in males and ovarian and uterine atrophy in females were detected in dichloromethaneexposed mice. These changes may be secondary to the extensive lung and liver neoplasia produced by the inhalation exposures.

An increase in the incidence of hemangiomas or hemangiosarcomas (combined) was detected in high dose male mice (control, 2/50; low dose, 2/50; high dose, 6/50). Five of the six tumors in the high dose group were hemangiosarcomas of the liver. The apparent increase in hemangiosarcomas was not considered to be clearly compound related.

Salivary Glands

Burek et al. (1984) reported an increased incidence of sarcomas in the ventral neck region (in or around the salivary glands) in male rats exposed to dichloromethane at 1,500 or 3,500 ppm. These authors speculated that exposure to dichloromethane in combination with an early infection of sialodacryoadenitis may have caused these lesions. In the present studies, there was no evidence of dichloromethane-related anomalies of the salivary glands in either sex of either species.

Conclusions: Under the conditions of these inhalation studies, there was some evidence of carcinogenicity^{*} of dichloromethane for male F344/N rats as shown by an increased incidence of benign neoplasms of the mammary gland. There was clear evidence of carcinogenicity of dichloromethane for female F344/N rats as shown by increased incidences of benign neoplasms of the mammary gland. There was clear evidence of carcinogenicity of dichloromethane for male and female B6C3F₁ mice, as shown by increased incidences of alveolar/bronchiolar neoplasms and of hepatocellular neoplasms.

^{*}Categories of evidence of carcinogenicity are defined in the Note to the Reader on page 2.

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V. REFERENCES

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APPENDIX A

SUMMARY OF THE INCIDENCE OF NEOPLASMS IN RATS IN THE TWO-YEAR INHALATION STUDIES OF DICHLOROMETHANE

TABLE A1. SUMMARY OF THE INCIDENCE OF NEOPLASMS IN MALE RATS IN THE TWO-YEAR INHALATION STUDY OF DICHLOROMETHANE

С	ONTRO	L (CHAMB)	LO	W DOSE	MI	D DOSE	HIG	H DOSE
ANIMALS INITIALLY IN STUDY	50	<u></u>	50	<u></u>	50		50	
ANIMALS NECROPSIED	50		50		50		50	
ANIMALS EXAMINED HISTOPATHOLO	G 50		50		50		50	
NTEGUMENTARY SYSTEM								
*Skin	(50)		(50)		(50)		(50)	
Papilloma, NOS	4	(8%)				(2%)		
Basal cell carcinoma				(2%)		(2%)		
Trichoepithelioma		(2%)	2	(4%)	1	(2%)		
Sebaceous adenocarcinoma		(2%)		(40) +				(00)
Keratoacanthoma	(50)	(4%)		(4%)‡	(50)			(6%)
*Subcut tissue Sarcoma, NOS	(00)		(50)		(00)		(50)	(2%)
Fibroma	1	(2%)	1	(2%)	2	(4%)		(2%)
Neurilemoma, malignant	•	(2 %)	•	(2,2)	-	(4.0)		(2%)
Men Menoma, manghano				<u> </u>		<u></u>		
RESPIRATORY SYSTEM								
#Lung	(50)	(90)	(49)		(50)	(00)	(50)	
Alveolar/bronchiolar adenoma	1	(2%)		(00)		(2%)		(00)
Alveolar/bronchiolar carcinoma Pheochromocytoma, metastatic			1	(2%)		(2%) (2%)	I	(2%)
Osteosarcoma, metastatic			1	(2%)	1	(270)		
HEMATOPOIETIC SYSTEM								
*Multiple organs	(50)		(50)		(50)		(50)	
Leukemia, mononuclear cell		(68%)		(52%)		(64%)		(70%)
#Spleen	(50)		(49)		(50)		(50)	
Sarcoma, NOS			1	(2%)				
Mesothelioma, invasive				(0.2)			1	(2%)
Malignant lymphoma, NOS			1	(2%)				
CIRCULATORY SYSTEM None								
DIGESTIVE SYSTEM								
#Liver	(50)		(49)		(50)		(50)	
Neoplastic nodule				(4%)		(4%)		
Hepatocellular carcinoma		(4%)		(2%)		(4%)		(2%)
*Rectum	(50)		(50)		(50)	(0.0)	(50)	
Carcinoma, NOS						(2%)		
Neurofibrosarcoma					1	(2%)		
JRINARY SYSTEM								
#Urinary bladder	(50)		(47)		(50)		(48)	
Mesothelioma, invasive							1	(2%)
ENDOCRINE SYSTEM								
#Anterior pituitary	(50)		(47)		(49)		(49)	
Carcinoma, NOS				(2%)				
Adenoma, NOS		(40%)		(66%)		(55%)		(49%)
#Adrenal	(50)		(50)		(50)		(50)	
Neoplasm, NOS				(2%)			. – -	
#Adrenal medulla	(50)		(50)		(50)	(00~)	(50)	100
Pheochromocytoma	5	(10%)	11	(22%)		(20%)	10	(20%)
Pheochromocytoma, malignant					1	(2%)		
Ganglioneuroma							~	(4%)

	CONTRO	L (CHAMB)	LO	W DOSE	MI	D DOSE	HIG	H DOSE
ENDOCRINE SYSTEM (Continued)	<u> </u>							
#Thyroid	(49)		(48)		(49)		(50)	
Neoplasm, NOS			1	(2%)				
Follicular cell adenoma							1	(2%)
Follicular cell carcinoma			1	(2%)	2	(4%)		
C-cell adenoma	1	(2%)	3	(6%)	6	(12%)	2	(4%)
C-cell carcinoma	1	(2%)	1	(2%)	1	(2%)		
#Pancreatic islets	(48)		(46)		(48)		(48)	
Islet cell adenoma	3	(6%)	6	(13%)	2	(4%)	2	(4%)
Islet cell carcinoma			1	(2%)				
REPRODUCTIVE SYSTEM								
*Mammary gland	(50)		(50)		(50)		(50)	
Adenoma, NOS	(00)		(30)		(00)		(/	(2%)
Fibroadenoma					9	(4%)		(8%)
*Preputial gland	(50)		(50)		(50)	(= /0)	(50)	(0 ~)
Carcinoma, NOS	()	(6%)		(2%)		(6%)		(4%)
Adenoma, NOS	Ŭ	(0,0)	-	(2,0)	Ŭ	(0,2)		(4%)
#Testis	(50)		(49)		(50)		(50)	(4,0)
Interstitial cell tumor		(78%)	,	(76%)	(/	(82%)	(+-/	(86%)
NERVOUS SYSTEM #Brain Carcinoma, NOS, invasive	(50)		(50) 1	(2%)	(50)		(49)	
SPECIAL SENSE ORGANS								
*External ear	(50)		(50)		(50)		(50)	
Papilloma, NOS	(00)			(2%)	(007		(00)	
*Ear canal	(50)		(50)	(270)	(50)		(50)	
Carcinoma, NOS	(50)		(30)			(2%)	(00)	
*Zymbal gland	(50)		(50)		(50)	(2,0)	(50)	
Carcinoma, NOS		(2%)		(4%)		(2%)		(4%)
					•	(2 %)		
MUSCULOSKELETAL SYSTEM								
*Femur	(50)		(50)	(6.4)	(50)		(50)	
Osteosarcoma			1	(2%)				
BODY CAVITIES								
*Peritoneal cavity	(50)		(50)		(50)		(50)	
Fibrosarcoma			1	(2%)				
Liposarcoma	1	(2%)		-				
*Tunica vaginalis	(50)		(50)		(50)		(50)	
Mesothelioma, NOS					4	(8%)	1	(2%)
Mesothelioma, malignant			1	(2%)			3	(6%)

TABLE A1. SUMMARY OF THE INCIDENCE OF NEOPLASMS IN MALE RATS IN THE TWO-YEAR INHALATION STUDY OF DICHLOROMETHANE (Continued)

	CONTROL (CHAMB)	LOW DOSE	MID DOSE	HIGH DOSE
ALL OTHER SYSTEMS		<u> </u>		
*Multiple organs	(50)	(50)	(50)	(50)
Mesothelioma, NOS			1 (2%)	
Mesothelioma, malignant		1 (2%)		
Mesothelioma, invasive		1 (2%)		1 (2%)
Lower leg				
Osteosarcoma			1	
Osteosarcoma, invasive		1		
Omentum				
Mesothelioma, invasive				1
ANIMAL DISPOSITION SUMMARY				
Animals initially in study	50	50	50	50
Natural death	4	7	2	10
Moribund sacrifice	30	27	31	31
Terminal sacrifice	16	16	17	9
TUMOR SUMMARY				
Total animals with primary tumors**	50	50	50	49
Total primary tumors	120	141	148	145
Total animals with benign tumors	47	46	49	47
Total benign tumors	77	95	93	98
Total animals with malignant tumors	39	33	40	40
Total malignant tumors	43	42	48	46
Total animals with secondary tumors#	#	3	1	3
Total secondary tumors		4	Ĩ	4
Total animals with tumors uncertain				-
benign or malignant		4	7	1
Total uncertain tumors		4	7	1

TABLE A1. SUMMARY OF THE INCIDENCE OF NEOPLASMS IN MALE RATS IN THE TWO-YEAR INHALATION STUDY OF DICHLOROMETHANE (Continued)

Number of animals necropsied
Primary tumors: all tumors except secondary tumors
Number of animals with tissue examined microscopically
Secondary tumors: metastatic tumors or tumors invasive into an adjacent organ
Multiple occurrence of morphology in the same organ; tissue is counted once only.

TABLE A2.	SUMMARY OF THE INCIDENCE OF NEOPLASMS IN FEMALE RATS IN THE TWO-Y	'EAR
	INHALATION STUDY OF DICHLOROMETHANE	

CO	NTRO	L (CHAMB)	LO	W DOSE	MI	D DOSE	HIC	H DOSE
ANIMALS INITIALLY IN STUDY			50		50			·····.
ANIMALS NECROPSIED	50		50		50		50	
ANIMALS EXAMINED HISTOPATHOLOG			50		50		50	
NTEGUMENTARY SYSTEM	*							
*Skin	(50)		(50)		(50)		(50)	
Papilloma, NOS	1	(2%)			1	(2%)		
Keratoacanthoma							1	(2%)
*Subcut tissue	(50)		(50)		(50)		(50)	
Sarcoma, NOS							1	(2%)
Fibroma					2	(4%)		
Lipoma	_						1	(2%)
RESPIRATORY SYSTEM								
*Larynx	(50)		(50)		(50)		(50)	
C-cell carcinoma, invasive	/=							(2%)
#Trachea	(50)		(48)		(49)		(46)	(0.01)
C-cell carcinoma, invasive	(50)		(FA)		(50)			(2%)
#Lung	(50)	(90)	(50)		(50)		(50)	
Alveolar/bronchiolar adenoma	T	(2%)	1	(90)				
Alveolar/bronchiolar carcinoma				(2%)				
Follicular cell carcinoma, metas C-cell carcinoma, metastatic			I	(2%)			1	(2%)
Pheochromocytoma, metastatic			1	(2%)			1	(270)
Endometrial stromal sarcoma, metas			1	(2,0)			1	(2%)
Osteosarcoma, metastatic								(2%)
HEMATOPOIETIC SYSTEM	(50)		(50)		(50)		(50)	
*Multiple organs	(50)		(50)		(50)		(50)	(2%)
Malignant lymphoma, NOS	17	(210)	17	(34%)	99	(46%)		(46%)
Leukemia, mononuclear cell #Bronchial lymph node	(49)	(34%)	(49)	(3470)	(50)	(40%)	(50)	(4070)
Endometrial stromal sarcoma, metas	(43)		(47)		(00)			(2%)
#Thymus	(31)		(39)		(34)		(31)	(270)
Thymoma, benign	- ·	(3%)	(00)		(04)		(01)	
inymonia, beingn		(0.0)		··				
CIRCULATORY SYSTEM	(50)		(50)		(50)		(20)	
*Subcut tissue Hemangiosarcoma	(50)		(50)		(50)		(50)	(2%)
#Heart	(50)		(50)		(48)		(50)	(4.10)
Adenocarcinoma, NOS, metastatic	(00)			(2%)	(40)		(00)	
*Vagina	(50)		(50)		(50)		(50)	
Hemangioma		(2%)			/		,	
DIGESTIVE SYSTEM								
#Liver	(50)		(50)		(50)		(50)	
Neoplastic nodule		(4%)		(2%)		(6%)		(10%)
Hepatocellular carcinoma					1	(2%)		-
JRINARY SYSTEM								
#Kidney	(50)		(50) 1		(50)		(49)	
Mixed tumor, benign								

	CONTRO	L (CHAMB)	LO	W DOSE	MI	D DOSE	HIG	H DOSE
ENDOCRINE SYSTEM								
#Pituitary	(49)		(49)		(49)		(49)	
Neoplasm, NOS	(10)			(2%)	(10)		(,	
Craniopharyngioma	1	(2%)		(,				
#Anterior pituitary	(49)		(49)		(49)		(49)	
Carcinoma, NOS	,	(2%)				(4%)		
Adenoma, NOS		(49%)	30	(61%)		(51%)	25	(51%)
#Adrenal	(50)		(50)		(49)		(49)	
Cortical adenoma					1	(2%)		
Cortical carcinoma			1	(2%)				
#Adrenal medulla	(50)		(50)		(49)		(49)	
Pheochromocytoma	2	(4%)	1	(2%)	4	(8%)	1	(2%)
Pheochromocytoma, malignant			2	(4%)		. ,		
#Thyroid	(47)		(46)		(48)		(42)	
Follicular cell adenoma	(()			(2%)	()	
Follicular cell carcinoma			1	(2%)		(2%)		
C-cell adenoma	2	(4%)	-	,		(8%)	2	(5%)
C-cell carcinoma		(6%)				(4%)		(5%)
#Pancreatic islets	(50)	()	(48)		(50)		(46)	,
Islet cell adenoma		(6%)	((()	
REPRODUCTIVE SYSTEM							<u> </u>	
*Mammary gland	(50)		(50)		(50)		(50)	
Carcinoma, NOS			(,			(2%)		
Adenoma, NOS					-	(2.13)	1	(2%)
Adenocarcinoma, NOS	1	(2%)	2	(4%)	1	(2%)	-	<u> </u>
Mixed tumor, malignant		(2%)	-		-			
Fibroadenoma		(10%)	11	(22%)	13	(26%)	22	(44%)
*Clitoral gland	(50)		(50)		(50)	(= 0.00)	(50)	/ / / /
Carcinoma, NOS		(2%)		(4%)		(4%)	• •	(4%)
Cystadenoma, NOS	•		-	,	4	((2%)
#Uterus	(50)		(49)		(50)		(47)	
Endometrial stromal polyp		(14%)	• •	(18%)		(14%)		(13%)
Endometrial stromal sarcoma	•			(6%)		(2%)		(4%)
#Ovary	(49)		(50)	,	(50)		(48)	/
Granulosa cell tumor		(4%)	(30)		(00)		,	
Sarcoma, NOS	-	()	1	(2%)				
VERVOUS SYSTEM								
#Cerebrum	(50)		(50)		(50)		(50)	
Carcinoma, NOS, invasive		(2%)	(00)			(2%)	(00)	
Oligodendroglioma	-	(= 10)				(2%)		
PECIAL SENSE ORGANS		····=				······		
*Eye	(50)		(50)		(50)		(50)	
Neurofibroma						(2%)		
USCULOSKELETAL SYSTEM								_
*Skull	(50)		(50)		(50)		(50)	
Osteosarcoma				(2%)			, í	
*Sternum	(50)		(50)		(50)		(50)	
Osteosarcoma, invasive			1					(2%)
*Rib	(50)		(50)		(50)		(50)	
Osteosarcoma								(2%)
*Skeletal muscle	(50)		(50)		(50)		(50)	
Neurofibroma					1	(2%)		

TABLE A2. SUMMARY OF THE INCIDENCE OF NEOPLASMS IN FEMALE RATS IN THE TWO-YEARINHALATION STUDY OF DICHLOROMETHANE (Continued)

С	ONTROL (CHAMB)	LOW DOSE	MID DOSE	HIGH DOSE
BODY CAVITIES				
*Peritoneum	(50)	(50)	(50)	(50)
Mesothelioma, malignant				1 (2%)
ALL OTHER SYSTEMS				
*Multiple organs	(50)	(50)	(50)	(50)
Sarcoma, NOS, metastatic		1 (2%)		
Endometrial stromal sarcoma, invasi	ve		1 (2%)	1 (2%)
Mesothelioma, metastatic				1 (2%)
ANIMAL DISPOSITION SUMMARY				
Animals initially in study	50	50	50	50
Natural death	5	6	5	11
Moribund sacrifice	15	22	23	24
Terminal sacrifice	30	22	22	15
TUMOR SUMMARY				
Total animals with primary tumors**	41	46	48	48
Total primary tumors	76	85	98	99
Total animals with benign tumors	33	39	40	34
Total benign tumors	47	52	60	60
Total animals with malignant tumors	21	29	29	32
Total malignant tumors	24	31	35	34
Total animals with secondary tumors##	1	4	2	4
Total secondary tumors	1	4	2	9
Total animals with tumors uncertain				
benign or malignant	5	1	3	5
Total uncertain tumors	5	2	3	5

TABLE A2. SUMMARY OF THE INCIDENCE OF NEOPLASMS IN FEMALE RATS IN THE TWO-YEAR INHALATION STUDY OF DICHLOROMETHANE (Continued)

* Number of animals necropsied
** Primary tumors: all tumors except secondary tumors
Number of animals with tissue examined microscopically
Secondary tumors: metastatic tumors or tumors invasive into an adjacent organ

ANIMAL NUMBER	0 2 6	0	0	0	0	0	0	0	0	0	0	0	04	0	0	0	0	0	0	0	0	0 2	0	009	0
		4	8	5	4	9	6	0	8	1	3	2	4	7	7	3	1	9	5	8	1	9	4	9 9	2
WEEKS ON STUDY	0 5 7	0 6 5	6 7	0 7 0	7	0 7 5	0 7 5	07 7	8 1	0 8 5	0 8 5	0 8 5	0 8 5	086	87	0.00	9 1	9 1	5 3 2	9 2	0.2	994	095	995	0 9 6
INTEGUMENTARY SYSTEM	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	-
Papilloma, NOS Trichoepithelioma Sebaceous adenocarcinoma Keratoacanthoma Subcutaneous tissue Fibroma	+	+	+	+	+	+	+	+	+	+	+	+	+	+	x +	+	+	+	+	+	+	+	+	+	+
RESPIRATORY SYSTEM Lungs and bronchi Alveolar/bronchiolar adenoma Trachea	++	++	++	+++	+++	++	+++	+++	++	++	+++	++	+++	+++	++	++	++	+ +	+	+++	++	++	+++	+++	+ +
HEMATOPOIETIC SYSTEM Bone marrow Spieen Lymph nodes Thymus	+++-	+++-	++++	+++ -	++++	++++	++++	+++-	++++	+++++	+++-	+++++	++++	++++	++++	+++-	++++	+++ -	++++	++++	+++ -	++++	++++-	++++	++++
CIRCULATORY SYSTEM Heart	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+
DIGESTIVE SYSTEM Salivary gland Liver Hepatocellular carcinoma Bile duct Gallbladder & common bile duct Pancreas Esophagus Stomach Small intestine	++ +Z++++	++ +z++++	++ +Z++++	++ +Z++++	++ +2++++	++ +2 +++ 1	++ +Z +++	++ +2++++	++ +Z++++	++ +z++++	++ +z++++	++ +Z++++	++ +Z+ +++	++×+N++++	++ +z++++	++x+z++++	1+ +z++++	++ +Z++++	++ +2++++	++ +z++++	++ +z++++	++ +2++++	++ +Z+1++	++ +z++++	++ +z++++
Large intestine URINARY SYSTEM Kidney Urinary bladder	+	++++	+	+ + + +	+ ++	+ ++	+ + + +	+ + +	+ + +	+ ++	+ + +	+ + +	+	+ + +	+ ++	+ + + +	+ + +	+ ++	+ ++	+ ++	+ ++	- ++	+ ++ ++	+ + +	+ + + +
ENDOCRINE SYSTEM Pituitary Adenoma, NOS Adrenai Pheochromocytoma Thyroid C-cell adenoma C-cell accinoma Parathyroid	+++++	++++	+ + + +	+x+++	++++	+x+x+ +	++++++	++++	+ + + + × -	+x+++	++++	** ** +	+ + -	+x+++	++++	+x++++	++++++	+x+ + -	+++++	+++++	+++++	+x+++	+ + + +	+ + +	 + + + +
Pancreatic islets Islet cell adenoma	÷	÷	÷	+	+	-	-	+	+	÷	Ŧ	÷	÷	÷	÷	÷	÷	÷	÷	÷	÷	÷	4	÷	÷
REPRODUCTIVE SYSTEM Mammary gland Testis Interstitial cell tumor Prostate Preputia/clitoral gland Carcinoma, NOS	++ +x	+ + X + N	++ +N	N + + N	N + X + N	N + + N		* *	+	* *	*	+ x +	+ × +	N + - N	N + X + N	++ +N	++ +NX	+++	N + X + N	+	+ + X + N	N + + N	++X+N	N + X - N	- + + x + N
NERVOUS SYSTEM Brain	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	-
SPECIAL SENSE ORGANS Zymbal gland Careiname, NOS	N		N			_										_	N	N			N	N	N	N	n N
BODY CAVITIES Peritoneum Liposarcoma	N	N X	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	- N
ALL OTHER SYSTEMS Multiple organs NOS Loukemia, monomucloar coll	N X	N	N X	N	N K	N	N	N	N X	N X	N X	N X	N X	N X	N X	N	N	N	N X	N X	N X	N	N X	N X	- N X

TABLE A3. INDIVIDUAL ANIMAL TUMOR PATHOLOGY OF MALE RATS IN THE TWO-YEAR INHALATION STUDY OF DICHLOROMETHANE: UNTREATED CONTROL

+ :

Tissue Examined Microscopically Required Tissue Net Examined Microscopically Tumer Incidence Necropay, No Autolysis, No Microscopic Examination Animal Missexed Multiple Occurrence of Morphology

XN S

No Tissue Information Submitted Norrepay, No Histology Due To Pretocol Autolysia Animal Missing No Necropey Performed C : A : M : B :

:

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ANIMAL NUMBER	0 1 5	0 4 7	0 3 1	017	0 2 1	024	025	036	040	002	003	006	008	010	0	020	022	0 2 3	0 2 8	030	032	0 3 7	0 4 3	04	0 4 9	
WEEKS ON Study	0 9 6	0 9 6	098	099	1 0 1	1 0 2	102	102	103	104	104	104	104	104	104	104	104	104	104	104	104	104	104	104		TOTAL: TISSUES TUMORS
INTEGUMENTARY SYSTEM	+	+	+	+	+	+	+	+	+	N	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	*50
Papilloma, NOS Trichoepithelioma Sebaceous adenocarcinoma			x	х		x			X										X							4
Keratoscanthoma Subcutaneous tissue Fibroma	+	+	+	+	+	+	+	+	+	N	+	+	+	+	+	+	+	+	X +	+	*	+	+	+	X +	*50 1
RESPIRATORY SYSTEM Lungs and bronchi Alveolar/bronchiolar adenoma Traches	+	++	++	++	+++	++	+++	+++	++	++	+++	++	+ +	++	++	+++	++	++	+++	+++	++	* *	++	++	 + +	50 1 50
HEMATOPOIETIC SYSTEM Bone marrow	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	50
Spleen Lymph nodes Thymus	++	++	++	++-	++-	++++	++++	++-	+++	++++	++++	+++	+++	+++	++++	++++	++-	++-	+++	++++	+ + +	++++	++-	++++	++++	50 50 31
CIRCULATORY SYSTEM Heart	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	50
DIGESTIVE SYSTEM Selivary gland Liver	+	+++	+++	+	+++	+++	+++	+++	+++	+++	+++	+++	+++	+++	+++	+++	+++	+++	+++	+++	+++	++	+++	+++	++++	49 50
Hepatocellular carcinoma Bile duct 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	2 50 *50 48 43 50 49
Pancreas Esophagus Stomach	++++	++++	+ - +	++++	++++	+ -+	+++	++++	++++	++++	++++	++++	++++	+ - +	++++	++++	+++++	+++	+-+	++++	++++	++++	++++	+++	+ -+	48 43 50
Small intestine Large intestine	++	++	+++	++	+ +	+ +	+++	÷ +	+++	+++	÷ +	÷ +	+ +	+ +	÷ +	+ +	÷ +	+ +	+ +	+++	+++	+ +	+ +	+++	+ +	49 49
URINARY SYSTEM Kidney Urinary bladder	+	+	++	++	++	+	++	++	++	++	++	+	++	++	+++	++	++	++	+++	++	++	+	++	+++	++	50 50
ENDOCRINE SYSTEM Pituitary	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+		50
Adenoma, NOS Adrenal	X +	+	+	+	+	X +	x + x	+	X +	+	+	X +	X +	+	+	+	X +	+	X +	¥ +	¥ +	X +	X +	+	*	20 50 5
Pheochromocytoma Thyroid C-cell adenoma	+	+	+	+	+	+	+	+	Х +	+	+	+	+	Х +	+	+	+	+	+	+	+	+	+	+	÷	49
C-cell carcinoma Parathyroid Pancrestic ialets Islet cell adenoma	+ +	X + +	÷	++	++	++	+ +	+ +	+ +	+ +	+++	Ŧ	+	+ +	+ +	- +	÷ x	+ +	+ +	- *	++	- +	÷	-+	+ +	1 29 48 3
REPRODUCTIVE SYSTEM Mammary gland Testis	 +	+	+	+	+	+	N		N +	N	+	+	N	N	++	N +	+++	++	++	++	N	++++	N +	N +	 +	*50
Interstitial cell tumor Prostate	× +	* *	+	+	+	+	+	+	x -	+	+	+	+	* *	X +	X +	x _	X +	x_	x_	+	+	X +	X +	×	39 44
Preputial/clitoral gland Carcinoma, NOS	N	N	N	N	N	N	N	N	N	N	N	N X	N	N X	N	N	N	N	N	N	N	N	N	N	N	*50 3
NERVOUS SYSTEM Brain	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	50
SPECIAL SENSE ORGANS Zymhel gland Carcinome, NOS	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 1
BODY CAVITIES Peritoneum Liposarcoma	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 1
ALL. OTHER SYSTEMS Multiple organs NOS Leukemis, mononuclear cell	N X	N X	N X	N X	N X	N X	N X	N X	N X	N	N X	N	N X	N	N X	N	N X	N	N X	N X	N	N	N	N X	N X	*50 34

 TABLE A3. INDIVIDUAL ANIMAL TUMOR PATHOLOGY OF MALE RATS: UNTREATED CONTROL (Continued)

* Animals Necropoind

ANIMAL NUMBER	0 2 2	0 4 9	0 0 8	0 3 2	0 3 7	0 2 8	0 0 1	0 4 1	0 4 5	006	0 4 8	0 2 5	0	0 3 3	0 5 0	026	0 3 5	0 1 3	0 2 1	0 2 7	0 3 1	0 2 0	030	009	0 1 1
WEEKS ON STUDY	0 6 2	0 6 2	0 6 7	0 6 7	0 6 9	0 7 2	0 7 5	0 8 2	0 8 2	084	0 8 6	0 8 7	88	0 8 9	089	0 9 0	0 9 1	0 9 2	0 9 2	0 9 2	0 9 3	0 9 4	095	0 9 6	0 9 7
INTEGUMENTARY SYSTEM Skin Basal cell carcinoma Trichoepithelioma	+	×	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+ _x	+	+	+	N
Keratoacanthoma Subcutaneous tissue Fibroma	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	0 +	+	+	+	N
RESPIRATORY SYSTEM Lungs and bronchi Alveolar/bronchiolar carcinoma Osteosarcoma, metastatic Traches	+ X	+	+	-	+++	+	+	+	+	+	+	+	+	+	++	+	+	++	+++	+	+	+	+	+	++
HEMATOPOIETIC SYSTEM Bone marrow Spleen Sarcoma, NOS	+	++	++	+	+	+ + * X	+++	++	++	+++	+++	+++	+++	+++	++	+++	+++	+++	+++	++	+++	+++	+++	++++	 ++ +
Malignant lymphoma, NOS Lymph nodes Thymus	+	-	+ -	x -	+ -	+ +	+ -	+ 	++	+ +	+ +	+ +	++	+ +	+ +	++	+	+ +	+ +	++	+++	+ +	++	+ +	+ +
CIRCULATORY SYSTEM Heart	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+
DIGESTIVE SYSTEM Salivary gland Liver Neoplastic nodule	+	- +	+++	+	+++	- +	+++	+++	+++	++	+++	+++	+ + *	++	+++	+++	+++	+ +	+++	++	++	+++	+++	+	+
Hepatocellular carcinoma Bile duct Gallbladder & common bile duct Pancreas Esophagus	+ N +	+ N + +	+ N + +	N N	+n -	+ 2 + +	+ 1 2+	+ N + +	+ N -	+ Z + +	+ z +	+ N + +	+ + x + +	+ N + +	+ N + +	+ x +	+ z + +	+ 2 + +	+ 7 + +	+ N + +	+ N + +	+ z +	+ X +	+ 7 + +	+ 2 + +
Esophagus Stomach Small intestine Large intestine	+++++++++++++++++++++++++++++++++++++++	++++	++++		+	++++	++++	++++	-+	++++	++++	++++	++++	++++	++++	++++	++++	++++	++++	++++	++++	++++	+ + + +	++++	++++
URINARY SYSTEM Kidney Urinary bladder	+++++++++++++++++++++++++++++++++++++++	+++	+++	+ -	+	+++	+ +	+ +	+	+++	+++	++	++	++	+++	+	++	++	+++	+++	+++	++	+++	++	+
ENDOCRINE SYSTEM Pituitary Carcinoma, NOS Adenoma, NOS	+	* x	+ x	-	+	+ x	+	+	-	+ x	+ x	+ x	+	+ x	+	+ ×	-	+	+		+ x		+ x		+ x
Adrenai Neoplasm, NOS Pheochromocytoma Thyroid Neoplasm, NOS	+	++	++	+ + X	* *	+	++	+	+	++	++	++	++	+	+ X +	++	++	+ X +	+ +	++	+ X +	+ +	+	+ +	++
Follicular cell carcinoma C-cell adenoma C-cell carcinoma Parathyroid Pancreatic islets	-	-	+	-	-	ī	+	+	_	-	-	-	+	-+	+	+	+	X	+	+	+	+	+	+	+
Islet cell adenoma Islet cell carcinoma	-	т	Ŧ	-	-	Ŧ	-	Ŧ	-	Ŧ	Ŧ	Ŧ	++ x	Ŧ	Ŧ	Ŧ	T			T	T	•	Ť	•	т
REPRODUCTIVE SYSTEM Mammary gland Testia Interstitial cell tumor	N +	N +	++	+	N + X	+ +	N +	*	+	+	+++	+	++X	+ + * X	+ + * X	*	*	N + X	+ + * X	+ + X	+++	N +	*	* x	N +
Prostate Preputial/clitoral gland Carcinoma, NOS	+ N	n N	n N	Ñ	Ñ	ň	Ñ	+ N	Ñ	ň	ň	+ N	n N	Ň	ň	n N	* N	* N	+ N X	ň	Ň	Ň	* N	+ N	Ň
NERVOUS SYSTEM Brain Carcinoma, NOS, invasive	+	*	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+
SPECIAL SENSE ONGANS Ear Papilloma, NOS																							N		
Zymbel gland Carcinoma, NOS MUSCULOSKELETAL SYSTEM	N	N	N		N				N	x	N	N						<u>п</u>	x	N	N		N		
Bone Osteosarcoma	N X	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N
BODY CAVITIES Peritoneum Fibrosarcoma Tunica vaginalis Mesothelioma, malignant	N +	N +	N +	N N	N + X	N +	N X +	N +	N +	N +	N +	N +	N +	N +	N +	N +	N +	N +	N +	N +	N +	N +	N +	N +	N +
ALL OTHER SYSTEMS Multiple organs NOS Mesothelioms, malignant Mesothelioms, invasive	N	N	N		N X	N		X			N												N	N	
Leukemia, mononuclear cell Lower leg NOS Osteosarcoma, invasive	x							λ.	x	<u>к</u>			x		x	λ		X		X		X			X

TABLE A3. INDIVIDUAL ANIMAL TUMOR PATHOLOGY OF MALE RATS IN THE
TWO-YEAR INHALATION STUDY OF DICHLOROMETHANE: LOW DOSE

TABLE A3.	INDIVIDUAL ANIMAL	TUMOR PATHOLOGY	OF MALE RATS:	LOW DOSE
		(Continued)		

ANIMAL	0	0	q	o	9	0	Q	0	ŋ	0	Ő	Q	0	0	0	9	0	9	q	o	9	0	0	oj	0	·
NUMBER	2 9	4	34	1 9	42	4	2 3	2 4	1 6	3	4	0 5	9	1	12	4	1	1	1 84	36	8	3	4	43	4	TOTAL.
WEEKS ON STUDY	0 9 8	0 9 8	0 9 9	1 0 1	101	1 0 1	1 0 2	1 0 2	1 0 3	1 0 4	104	104	104	104	104	104	104	104	104	104	1 0 4	1 0 4	104	1 0 4	1 0 4	TISSUES
INTEGUMENTARY SYSTEM	 	+	+	+	+	+	+	+	+	+	+	+	N	+	+	+	+	+	+	+	+	+	+	+		+50
Basal cell carcinoma Trichoepithelioma	x																									1 2 2 2
Keratoacanthoma Subcutaneous tissue Fibroma	+	+	+	+	+	+	+	+	+	+	+	+	N	+	X +	+	+	+	+	*	+	+	+	+	+	•50 1
RESPIRATORY SYSTEM	+	+	+	+	+	+	+	+	*	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	49 1
Alveolar/bronchiolar carcinoma Osteosarcoma, metastatic Trachea	+	+	+	+	+	+	+	+		+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	48
HEMATOPOIETIC SYSTEM Bone marrow	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	49
Spieen Sarcoma, NOS Malignant lymphoma, NOS	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	49 1
Lymph nodes Thymus	+	+++	++	+	+ +	++	+	+++	+++	++	+ +	+++	+ +	+ +	<u>+</u>	+++	+++	++	+ +	+	+ +	+++	+++	+++	++++	48 39
CIRCULATORY SYSTEM Heart	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	50
DIGESTIVE SYSTEM Salivary gland	+	+	+	+	+	+	+	+	+	+	_	+	+	+	+	+	+	+	+	+	+	+	+	+	+	47
Liver Neoplastic nodule Hepatocellular carcinoma	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+xx	+	+	49 2 1
Bile duct Gailbladder & common bile duct Pancreas	N +	+ N +	+ N +	* *	+ N +	* *	+ N +	* N +	+ N +	+ N +	+ N +	* *	* *	Ň +	+ N +	+ N +	+ N +	+ N +	* *	Ň +	* *	+ N +	+ N +	+ N +	N +	49 •50 46 43 49 47
Esophagus Stomach	+++++	++	+++	++	Ŧ	+ +	+++	++	+++	+++	++	Ŧ	Ŧ	+++	+++	+++	+++	++	+++	+++	++	++	++	+++	Ŧ	43 49
Small intestine Large intestine	‡	++	++	++	+++	++	++	++	+++	+++	+++	++	++	++	+++	++	+++	++	+++	++	++	++	++	++	++	47
URINARY SYSTEM Kidney Urinary biadder	‡	++	+++	+++	++	+++	+++	+++	+++	++++	+++	++++	++++	+++	+++	++++	++++	+++	+ +	+++	+++	+++	+++	+++	÷	50 47
ENDOCRINE SYSTEM Pituitary	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	47
Carcinoma, NOS Adenoma, NOS Adrenal		x	X	x	X	-	x	-	X	X	¥	¥	X +	X	X +	x	¥		-	X	X	X		X	-	1 31 50
Neoplaam, NOS Pheochromocytoma		•	ſ	ſ	ŕ	x	x	x	ŕ		x	ſ	'			x	•	x	'	ŕ	'	'	•	'	•	11
Thyroid Neoplaam, NOS Follicular cell carcinoma	+	+	+	+	+	+	+	+	+	+	+ x	+	+	+	+	+	+	+	+	+	+	+	+	+	+	48 1 1
C cell adenoma C cell carcinoma				x								X									x					
Parathyroid Pancreatic islets Islet cell adenoma	+ + X	++	+++	++	+ + v	Ŧ	+ + v	Ŧ	++	++	- + v	Ŧ	+ +	+++	++	+++	++	+ + X	++	++	++	++	++	+++	++	35 46 6
lsiet celi carcinoma	_				^		•				<u>л</u>								X							ĭ
REPRODUCTIVE SYSTEM Mammary gland Testia		Ņ	+	+	+	Ņ	N	+	N	N	N	N	N	N	N			N	++	N	+++		Ņ	N +	+	*50
Interstitial cell tumor Prostate	x +	Ť.	* *		+	+	+	+	* *	+	+	+	-	+	-	+ x +	+	+	¥ -	+	X +	+	+	X	×	49 37 42
Preputial/clitoral gland Carcinoma, NOS	N		Ń		Ň	N	Ň	Ń	Ň	Ŋ	N	Ń	N	N	N	Ń	N	Ń	N	Ń	N	Ń	N	N	N	*50 1
NERVOUS SYSTEM Brain Carcinoma, NOS, invesive	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	50 1
SPECIAL SENSE ORGANS Ear	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
Papilloma, NOS Zymbal giand Carcinoma, NOS	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	х +	N	N	*60 2
MUSCULOSKELETAL SYSTEM Bone Osteosurcoma	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 1
BODY CAVITIES Peritoneum	N	N	N	N	N	N	N	N	N	N	N	N	N		N	N	N	N	N	N	N	N	N	N		+50
Fibrosarcoma Tunica vaginalis Mesothelioma, malignant	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	1 •50 1
ALL OTHER SYSTEMS Multiple organs NOS Mesothelioma, malignant	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 1
Mesothelioma, invasive Leukema, mononuclear cell Lower leg NOS	x		x	x		x	x	x	x		x				x	x			x	x	x	x	x	x		i 26
Osteosarcoma, invasive																									_	1
		_		_																						

* Animais Necropsied

IWO-IEAR INHALAII		0.	I U			JF	Ľ		/11			0						1.41			~	514			
ANIMAL NUMBER	0 0 5	0 0 7	0 0 2	0 1 6	0 0 1	030	0 1 8	0 4 2	0 4 0	0 3 2	0 4 6	0 0 3	044	0 1 2	004	026	0 1 9	028	0 2 9	035	4	0 4 3	0 1 7	0 2 2	0 2 3
WEEKS ON STUDY	0 7 0	0 7 1	0 7 5	0 7 5	076	0 7 6	0 7 8	0 7 8	0 7 9	0 8 4	0 8 4	0 8 6	0 8 6	0 8 8	0 8 9	0 8 9	0 9 2	092	0 9 2	092	0 9 2	0 9 4	096	0 9 6	0 9 6
INTEGUMENTARY SYSTEM Skin Papilloma, NOS	+	+ x	+	N	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+
Basal cell carcinoma Trichoepithelioma Subcutaneous tissue	+	+	+	N	+	+	+	+	+	+	+	+	+	х +	+	+	+	+	+	+	+	+	<u>+</u>	+	+
Fibroma RESPIRATORY SYSTEM																			<u> </u>				х 		_
Lungs and bronchi Alveolar/bronchiolar adenoma Alveolar/bronchiolar carcinoma Pheochromocytoma, metastatic	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+ X X	+	+	+	+	+	+	+
Trachea HEMATOPOIETIC SYSTEM	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+
Bone marrow Spleen Lymph nodes Thymus	++++	+++-	++++	++++	++++	++++	+++-	++++	+++-	++++	++++	++++	++++	++++	++++	-+++	+++-	++++	+++-	++++	++++	+++	++++	+++-	++++
CIRCULATORY SYSTEM Heart	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+
DIGESTIVE SYSTEM Salıvary gland Lıver	++++	+++	+++	-	++	+++	+++	++	-+	+++	+++	++	-+	+++	+++	+++	+++	++	++	+++	++	+++	+	+	+
Neoplastic nodule Hepatocellular carcinoma Bile duct	+	<u>.</u>	<u>.</u>	<u>+</u>	+	<u>+</u>	<u>+</u>	<u>+</u>	<u>+</u>	<u>.</u>	+	<u>+</u>	<u>+</u>	+	÷	<u>+</u>	+	÷	<u>+</u>	<u>+</u>	<u>.</u>	<u>+</u>	<u>+</u>	+	÷
Gailbladder & common bile duct Pancreas Esophagus	N + +	N + +	N + +	N + +	N + +	N + +	N + +	N +	N + +	N + +	N + +	N++	N + +	N + +	N + +	N + +	N + +	N + +	N +	N + +	N + +	N + +	N + +	+++	N + +
Stomach Small intestine Large intestine	+ + +	++++	++++	+ -+	+++	+++	++++	++++	++++	++++	++++	+++	++++	++++	+++	++++	+++	++++	++++	++++	+++	++++	++++	++++	++++++
Rectum Carcinoma, NOS Neurofibrosarcoma	Ň	Ń	Ň	Ň	Ň	Ň	Ń	Ń	Ń	+	÷ x	+	÷	÷	+	+	+	÷	+	÷	÷	÷	+	÷	+
URINARY SYSTEM Kidney Urinary bladder	+	++	++++	+++	+++	++	++	+++	++++	++	+++	++	++	++	++	+++	+++	++	++++	+++	+++	++	+++	+++	- + +
ENDOCRINE SYSTEM Pitutary Adenoma, NOS	+ x	*	+	+	*	+	+	+	+	*	*	*	+	+	+	+	+	+		*	*	*	*	+	- + X
Adrenai Pheochromocytoma Pheochromocytoma, malignant Thyroid	+	+	+	+ +	++	+ +	+ +	+. +	+	+	+ -	+	+	+	+	* *	+ +	+ X +	++	+	+ ;	+	+	+	++++
Follicular ceil carcinoma C-ceil adenoma C-ceil carcinoma														x							x	X		x	
Parathyroid Pancreatic islets Islet cell adenoma	++	++	+++	++	+++	Ŧ	Ŧ	+ -	++	+++	Ŧ	Ŧ	-+	++	Ŧ	Ŧ	Ŧ	+++	-	÷	Ŧ	+++	Ŧ	++	+
REPRODUCTIVE SYSTEM Mammary gland Fibroadenoma	+	+		N	N	N	+	N	+	+	+	N	+	N	+	+	+	N	+	N	N	N	N	N	+
Testis Interstitual cell tumor Prostate	+	++		+ X +	++	* *		++		* *	+x +	++	* *	+ X +		* *	* *	+ x +	+++	+ X +	++	* *	* *		*
Preputtal/clitoral gland Carcinoma, NOS		Ń			Ń			Ń			Ń X			Ń		Ń		Ń			Ń				N
NERVOUS SYSTEM Brain	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+
SPECIAL SENSE ORGANS	N	N	+	N	÷	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	- N
Carcinoma, NOS Zymbal gland Carcinoma, NOS	N	N	* x	N	*	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N
BODY CAVITIES Tunica vaginalis Mesothelioma, NOS	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+
ALL OTHER SYSTEMS Multiple organs NOS Mesothelioma, NOS	N	N	N	N	N	N	N	N	N	N														N	- 1
Leukemia, mononuclear cell Lower leg NOS Osteosarcoma		X		x			x	x	x	x		x	X		X	x	x	x	x	X	x	x	x	X	x
		_													_	_									

TABLE A3. INDIVIDUAL ANIMAL TUMOR PATHOLOGY OF MALE RATS IN THE
TWO-YEAR INHALATION STUDY OF DICHLOROMETHANE: MID DOSE

TABLE A3.	INDIVIDUAL ANIMAL	TUMOR	PATHOLOGY	OF M	IALE	RATS:	MID	DOSE
		(Co	ontinued)					

ANIMAL NUMBER	024	031	047	040	014	0 2 1	0 5 0	045	006	0	009	0	0	0 1 3	0 1 5	020	025	027	033	034	036	0 3 7	038	0 3 9	0 4 8	1
WEEKS ON Study	09	096	096	9	100	1 0 1	101	102	104	104	104	104	104	104	104	104	104	104	104	104	104	104	1	104	1 0 4	TOTAL: TISSUES TUMORS
INTEGUMENTARY SYSTEM	+	+	+	+	+	+	+	+	+	N	+	+	N	+	+	+	+	N	+	+	+	+	N	+	+	*50
Papilloma, NOS Basal cali carcinoma Trichoepithelioma Subcutaneous tissue Fibroma	+	+	+	+	+	X +	+	+	+	N	+	+	N	+	+	*	+	N	+	+	+	+	N	+	+	1 1 •50 2
RESPIRATORY SYSTEM Lungs and bronchi Alveolar/bronchiolar adenoma Alveolar/bronchiolar carcinoma Pheochromocytoma, metastatic Trachea	+	++	+	+	+	+	+	+	* *	+	+	+	+	+	+	+	+	+	+	+	++	+	+	+	+	50 1 1 50
HEMATOPOIETIC SYSTEM Bone marrow Spieen Lymph nodes Thymus	++++	+++-	++++	+++-	+++-	+++	+++-	++++	++++	++++	++++	++++	++++	++++	++++	++++	++++	++++	++++	++++	+++-	++++	++++	++++	+++1	49 50 50 35
CIRCULATORY SYSTEM Heart	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	50
DIGESTIVE SYSTEM Salivary gland Liver Neoplastic nodule Hepatocellular carcinoma Bile duct Galibladder & common bile duct Pancreas Esophagus Stomach Small intestine Large intestine Ractum Carcinoma, NOS Neurofibrosarcoma	++ +z++++++	++ x+z++++++	++ +Z++++++	++ +N++++++	++x +Z+ 1++++	++ +Z+++++ X	++ +Z+ +++++	++ +Z++++++	++ +Z++++++	++ +Z+++++	++ +Z++++++	++ +2++++++	++ +2++++++	++ +2++++++	++ +Z++++++	++ +2++++++	++ +2++++++	++ +Z++++++	++ +Z++++++	++ +Z++++++	++x +z++++++	++ +Z++++++	++ +Z++++++	++ +Z++++++	++ x+z++++++	47 50 2 2 50 *50 48 48 50 49 50 *50 *50 *50 1
CRINARY SYSTEM Kidney Urinary bladder	+	+	++	++	++		++	+	++	+	+	+	+	+	+	+	++	++	++	+	+	++	+	++	 ‡	50 50
ENDOCRINE SYSTEM Pituitary Adenoma, NOS Adrenal Pheochromocytoma, malignant	++	+ + x	+ x +	- +	++	+ x + x	+x+x	++	+x+	+x+	+ + X	+ + + +	+ *	**	***	****	**	* *	* * *	+ * +	+ + X	+ x +	++	+ x +	++	49 27 50 10 1
Thyroid Follicular cell carcinoma C-cell carcinoma C-cell carcinoma Parathyroid	+	+	+	+	+	+	+	* *	+	+	+	+	+	+	+ X	+	+	+	+	+	+	+ X	+ x	+ X	+	49 2 6 1 30
Pancreatic islets Islet cell adenoma	Ŧ	Ŧ	Ŧ	Ŧ	Ŧ	÷	Ŧ	Ŧ	Ŧ	Ŧ	Ŧ	Ŧ	Ŧ	÷ x	Ŧ	÷	Ŧ	+	Ŧ	÷	Ŧ	÷ X	Ŧ	+	÷	48 2
REPRODUCTIVE SYSTEM Mammary gland Fibroadenoma Testis Interstitial cell tumor Prostate Prestate Prestial/clitoral gland	* *	+x+	+	N + X + N	+ x +	N + X + N	+ X +	N + X + N	+ + X + N	X + X +	N + X + N	+x +	N + X + N	+ + + N	+ X +		+ x +	X + X +	+x -	-	+x+	++	+	+ + + x + N	N +x+N	*50 2 50 41 46 *50
NERVOUS SYSTEM Brain	* +	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	× +	+		3 50
SPECIAL SENSE ORGANS Ear	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N				-	+50
Carcinoma, NOS Zymbał giand Carcinoma, NOS																					N					•50 1
BODY CAVITIES Tunica vaginalia Mesothelioma, NOS	+	*	+	۶	+	+	ż	+	+	+	+	+	+	*	+	+	+	+	*	+	+	+	+	+	+	*50 4
ALL OTHER SYSTEMS Multiple organs NOS Mesothesiona, NOS Leukemia, mononuclear cell Lower leg NOS Osteosarcoma	N	N X	N	N X	N X	N	N X		N	N	N	N X			N X					N X	N X	N		N X		*50 1 32 1

*Animals Necropsied

ANIMAL	1 0	1 0	0	- AI	- 14	<u>_</u> 01	0	0	-01	0	0	0	0	701	- 01	700	0	0	-01	0	0	0	0	- Of	-0
NUMBER	5	25	4	1	I	32	36	48	0	1	4	19	37	04	0 9	Ŭ	47	1	1 7	3 5	3	27	16	3 1	4 3
WEEKSON STUDY	0 6 2	0 6 3	0 7 5	0 7 6	078	0 7 8	0 7 9	079	080	0 8 0	0 8 2	0 8 3	0 8 3	0 8 5	0 8 5	086	0 8 6	087	0 8 9	0 8 9	0 8 9	0 9 0	0 9 2	0 9 2	0 9 2
INTEGUMENTARY SYSTEM					 -	_		N	+	N	+	+	+	-	+					-	-	-		+	
Keratoacanthoma Subcutaneous tissue Sarcoma, NOS Fibroma Neurilemoma, malignant		- 4	• •	• +	+	+	+	N	+	N	+	+	+	+	+	+	+	+	+ x	+	+	+	+	+	+
RESPIRATORY SYSTEM Lungs and bronchi Alveolar/bronchiolar carcinoma Trachea	4	- + - +	• •	· +	+++	++	++	++	+	++	+++	++	++	++	+++	++	+++	++	++	+++	++	++	+++	+++	- + +
HEMATOPOIETIC SYSTEM Bone marrow Spieen Mesothelioma, invesive Lymph nodes	4	• •	+++++++++++++++++++++++++++++++++++++++	++	+++	+++++++++++++++++++++++++++++++++++++++	++	+++++++++++++++++++++++++++++++++++++++	+ +	++++	+++++++++++++++++++++++++++++++++++++++	+++	+++++++++++++++++++++++++++++++++++++++	+++++++++++++++++++++++++++++++++++++++	+++++++++++++++++++++++++++++++++++++++	++++	+++++++++++++++++++++++++++++++++++++++	++++	+++++++++++++++++++++++++++++++++++++++	+++++++++++++++++++++++++++++++++++++++	+++++	+++++++++++++++++++++++++++++++++++++++	+++++++++++++++++++++++++++++++++++++++	+++++	_ + + + +
Thymus	-	. +	+	÷	÷	÷	-	÷	-	-	÷	÷	-	÷	÷	÷	-	÷	÷	-	÷	÷	÷	÷	÷
CIRCULATORY SYSTEM Heart	+	• +	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+
DIGESTIVE SYSTEM Salivary gland Liver Hepatocellular carcinoma	+	: -	+	+ +	++	++	+ + x	+++	++	+++	++	+++	+	++++	+++	+++	++	++	+++	++++	+++	++++	+++	+++	+
Bile duct Galibladder & common bile duct Pancreas Esophagus	+ N + +	++	+ N + + + +	+z++.	+ N + + -	+N++-	+N++-	+ z + + -	+N++-	+ N + + -	+ N + + -	+N++.	+N++-	+N+	+N++-	+N++.	+ 2 + + -	+2++.	+2++.	+ z + + -	+2++.	+ 2 + + -	+N++-	+N++-	+ Z + + -
Stomach Mesothelioma, invasive Small intestine Large intestine	+ + -	· +	+ + +	+ + +	++-	+ + +	+ + +	+ + +	+ + +	+ + +	+ + +	+ + +	+ + +	+ + -	+ + +	+ + -	+ + +	+++	+ + +	+++	+ + +	+ + +	+ + +	+ + +	+ + +
URINARY SYSTEM Kidney Urinary bladder Wesothelioma, invasive	+	+	+	+++	+	+++	+++	+	+	+ -	++	+++	+++	+++	++	+++	++	+++	+++	++	+++	+++	++	++	+++
ENDOCRINE SYSTEM Pituitary Adenoma, NOS Adrenal Pheochromocytoma Ganglioneuroma	* *	+	+x +	+++	+ x +	++	** *	+ +	* *	+ x + x	++	++	** *	++	+ +	+++	* * *	+ x +	++	+x + x + x	+ +	+ x +	+ +	++	+ *××
Thyroid Foilicular cell adenoma C cell adenoma	+	+	+	+	*	+	+	+ X	+ X	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+
Parathyroid Pancreatic islets Islet cell adenoma	+	Ŧ	++	++	- + x	Ŧ	++	Ŧ	Ŧ	Ŧ	Ŧ	++	+++	++	+++	+	++	+++	Ŧ	Ŧ	Ŧ	++	+++	+	++
REPRODUCTIVE SYSTEM Vammary gland Adenoma, NOS Fibroadenoma	+	N	N	+	+	+	N	+	N	N	+	+	N	N	+	N	N	N	N	N	+	N	N	N	+
Productional Interstitual cell tumor Prostate Preputial/clitoral gland Carcinoma, NOS Adenoma, NOS	+ + N	+ + N	+	+x + n	+ + N	+ + N	+ x + N	+ X + N	+ X + N	+ x + n	+ X + N	+ X + N	+ X + N	+	+ X + N	+ + N	+ + N	+ X + N	+	+ X + N X	+ X + N	+	+ X + N	+ X + N	+
NERVOUS SYSTEM Brain	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	- +
SPECIAL SENSE ORGANS Zymbal gland Carcinoma, NOS	N	N	N	N	N	N		*	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N
BODY CAVITIES Tunica vaginalis Mesothelioma, NOS Mesothelioma, malignant	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	4	+	+	+ x
ALL OTHER SYSTEMS Multuple organs NOS Mesothelioma, nuvauve Leukema, mononuclear cell	N	N		N X														N X	N			N X			N X

TABLE A3. INDIVIDUAL ANIMAL TUMOR PATHOLOGY OF MALE RATS IN THE TWO-YEAR INHALATION STUDY OF DICHLOROMETHANE: HIGH DOSE

TABLE A3. INDIVIDUAL ANIMAL TUMOR PATHOLOGY OF MALE RATS: HIGH DOSE (Continued)

ANIMAL				- 71			- 21			A			a	- 81	-	-	-	~	- 81		- 41		- 41		_	
NUMBER	22	4	49	07	24	06	5	34	223	33	05	26	40	20	0	0 N 0	02	08	12	15	221	28	3	39	4	TOTAL
WEEKS ON STUDY	0 9 3	0 9 3	093	9	094	9 5	0 9 7	098	0 9 9	0 9 9	1 0 1	1 0 1	1 0 1	1 0 2	1 0 3	103	1 0 4	10 4	1 0 4	104	104	104	1 0 4	104	1 0 4	TISSUES
INTEGUMENTARY SYSTEM	F		_							+	+	+	+	+	+	+	+		-	-		_	_			*50
Skin Keratoacanthoma Subcutaneous tissue Sarcoma, NOS Fibrona Neurilemoma, malignant	+	+	+ X	+ X	+	+ X	+	+	+	+	× +	× +	+	+ X	+ X	× +	+	+	+	+	+	+	+	+	+	3 *50 1 4
RESPIRATORY SYSTEM Lungs and bronchu Alveolarforonchuolar carcinoma Trachea	+	+	++	++	+	+++	++	+	++	++	* *	++	++	++	+++	+ +	+	++	+++	++	++	++	++	++	+++	50 1 47
HEMATOPOIETIC SYSTEM Bone marrow Spisen	+	++	++	++	++	+++	++	++	++	++	+++	++	+++	+++	++	;	++	++	+	+++	++	+	++	+	+	49 50
Mesothelioma, invasive Lymph nodes Thymus	+	+ -	+ -	+	+ -	+ -	+-	<u>+</u>	++	+	+ -	+ -	+ -	X + +	+	‡	+ -	+ +	+ +	+ +	+	+	+ +	++	+ +	1 50 28
CIRCULATORY SYSTEM Heart	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	50
DIGESTIVE SYSTEM Salivary gland Liver	‡	+++	+++	+++	+++	+++	+++	++++	+++	+++	+++	+++	+++	++++	+++	++++	+++++	+++	+++	++++	++++	+++	+++	+++	- +	49 50
Hepatocellular carcinoma Bile duct Galibladder & common bile duct Pancreas Esophagus	+ N + +	+ N + -	+ N + +	+1 2+	+ N + -	+ N + +	+ x +	+ N + +	+ N + +	+ N + +	+ N + +	+ N + +	+ N + +	+ 2 +	+ 2 + +	+ N + +	+ N + +	+ N + +	+ N + +	+ N + +	+ N + +	+ N + +	+ N + +	+ N + +	+ n + +	1 50 *50 48
Stomach Mesothelioma, invasive Small intestine Large intestine	+	+++	+++++++++++++++++++++++++++++++++++++++	+++++++++++++++++++++++++++++++++++++++	+++	+ +	+++	++++	+++++++++++++++++++++++++++++++++++++++	+++	++++	+++++++++++++++++++++++++++++++++++++++	+ +	+++++++++++++++++++++++++++++++++++++++	+++++++++++++++++++++++++++++++++++++++	+ X + -	+++++++++++++++++++++++++++++++++++++++	++++	++++	++++	+++	+++	+ +	+++++++++++++++++++++++++++++++++++++++	+ ++	46 50 1 50 46
URINARY SYSTEM Kidney	<u> </u>	-						<u> </u>					-				+ -	-		-		<u>-</u>	-	-	_	50
Urinary bladder Mesothelioma, invasive	Ŧ	Ŧ	÷	+	Ŧ	+	Ŧ	÷	÷	÷	+	Ŧ	+	÷ x	Ŧ	Ŧ	÷	Ŧ	÷	÷	÷	÷	Ŧ	Ŧ	+	48 1
ENDOCRINE SYSTEM Pitutary Adenoma, NOS Adrenal	+	+ x	* *	+	+	+ x +	+ *	+	+	* *	+	+ x +	+	*	+		+ x +	+	*	+	+	* *	+ x +	* *	+++	49 24 50
Pheochromocytoma Ganglioneuroma Thyroid Folicular cell adenoma	+	+	+	+	+	•	× +	× +	•	+	× +	× +	+	X +	+		× +	+	+	+	× +	+	+	х +	+	10 2 50 1
C-cell adenoma Parcratiyroid Pancratic islets (slet cell adenoma	- +	- +	++	+~	- +	+++	++	+++	++	++	+ +	+ +	+ + + X	+-	+++	- +	- +	+ +	+++	+ +	++	-+	+++	-+	+ + !	2 32 48 2
REPRODUCTIVE SYSTEM Mammary gland Adenoma, NOS	* x	+	N	+	+	+	+	+	+	+	+	+	+	N	+	+	+	+	+	+	N	N	N		N	*50 1
Fibroadenoma Testus Interstitual cell tumor Prostate Preputial/clitoral gland Carcinoma, NOS		+x - N			+ X + N			+x -N			+	A + X + N	+ X + N	-	+	X +	+ +		N	+	+	+ X + N	+	X + X + N	4	4 50 43 45 *50 2
Adenoma, NOS NERVOUS SYSTEM																	X	X		<u> </u>					-	2
Brain	+	+	+	+	+	+	+	+	+	+	-	+	+	+	+	+	+	+	+	+	+	+	+	+	+	49
SPECIAL SENSE ORGANS Zymbal gland Carcinoma, NOS	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 2
BODY CAVITIES Tunica vaginalis Mesothelioma, NOS Mesothelioma, malignant	+	+	+	+	+	+	+	+	*	+	+	+	+	+ x	+	+ x	+	+	+	+	+	+	+	+	+	*50 1 3
ALL OTHER SYSTEMS Multiple organs NOS Mesothelioma, invasive			N			N		N							N											*50 1
Leukemia, mononuclear cell	X	x		X	x			x	X	X	x	x	x	x			x		x	X	X		X		X	35

*Animals Necropsied

ANIMAL NUMBER	0 3 0	0 0 4	0 3 3	0 2 4	0 2 0	0 1 1	0 4 7	0 5 0	0 3 5	023	014	0 1 6	038	008	02	0 1 5	0 3 1	0 4 3	0 2 5	000	0	003	005	006	0 0 7
WEEKS ON STUDY	0 5 0	0 7 3	074	0 7 8	0 7 9	0 8 3	0 8 3	0 8 3	0 8 6	090	0 9 2	0 9 2	0 9 2	0 9 3	096	096	0 9 6	0 9 7	0 9 9	1 0 1	1 0 4	104	104	1 0 4	104
INTEGUMENTARY SYSTEM Skin Papilloma, NOS	+	+	+	+	+	N	+	+	+	+	+	+	+	*	+	+	+	+	+	+	+	+	+	+	+
RESPIRATORY SYSTEM Lungs and bronchi Alveolar/bronchiolar adenoma Trachea	+	++	++	+++	+++	++	++	++	++	+++	++	++	++	+ +	++	++	++	++	++	+++	++	++	++	+++	 **
HEMATOPOIETIC SYSTEM Bone marrow Spisen Lymph nodes Thymus Thymus Thymoma, benign	+ + + -	++++	++++	+++-	++++	+++ -	++++	+++-	+++-	++++	++++	++++	++++	++++	+++-	+++-	+++-	++++	+++ =	+++-	++++	++++	+++++	++++	+++++
CIRCULATORY SYSTEM Heart	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+
DIGESTIVE SYSTEM Salivary gland Liver Neoplastic nodule	++	÷	+++	+++	+++	++++	‡ +	+++	+++	+++	+++	+++	+++	++	+++	+++	++++	+++	++	++	+	++	+ +	+++	++++
Bile duct Gallbladder & common bile duct Pancreas Esophagus Stomach Small intestine Large intestine	+ 2 + + + + +	+z++++	+z++++	+2++++	+ 2 + + + + + + + + + + + + + + + + + +	+2+++++	+2+ ++++	+z+++1	+2+++++	+2+++++	+2+++++	+z++++	+ 2 + + + + +	+2+++++	+2+++11	+2+++++	+2+++++	+2+++++	+z++++	+Z++++	+2+++++	+z++++	+z++++	+2+++++	+ 2 + + + + +
URINARY SYSTEM Kidney Urinary bladder	+	++++	+	+++	++	++	+++	+	+++	+++	++	+++	+++	+	+	+++	++	+	++	+	++	++	++	++	++
ENDOCRINE SYSTEM Pituitary Carcinoma, NOS Adenoma, NOS Craniopharyngioma	+	+ x	+ X	+	+	+	+ x	+	+	+	+ x	+	+ X	+	-	+ X	+	+	+ X	+ x	+	+ X	*	+ x	+
Adrenal Pheochromocytoma Thyroid C-cell adenoma	++	+ +	+ +	+ +	+ +	+ +	+ +	+ +	+ +	+ +	+ +	+ +	+ +	* *	+ +	+ +	+ + +	+ +	+ +	+ +	+ +	+ +	+ +	+ +	++++
C-cell acercinoma Parathyroid Pancreatic islets Islet cell adenoma	+ +	- +	++	+ +	+ +	++	-+	 +	++	Ŧ	-	- +	- +	- +	+ +	+++	• + +	+++	-+	++	++	++	~ ++ +	+ +	-+
REPRODUCTIVE SYSTEM Mammary gland Adenocarcinoma, NOS Mixed tumor, malignant	+	+	N	N	+	+	N	+	+	+	+	+ x	*	+	N	+	+	+	+	+	+	+	+	+	+
Fibroadenoma Preputial/clitoral gland Carcinoma, NOS Vagina	N N		N N		N N	N N			N N		X		N N		N N					N N	N N	N N		N N	N N
Hemangioma Uterus Endometrial stromal polyp Ovary Granulosa cell tumor	+	* *	+ +	++	++	++	+ X +	+	+++	++	+	++	++	+ +	+	+	+ x +	++	++	++	+	+ +	++	++	+++
NERVOUS SYSTEM Brain Carcinoma, NOS, invasive	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	*	+	- +
ALL OTHER SYSTEMS Multiple organs NOS	N	N	N	N	NX	N	NX	N	N X	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	 N

TABLE A4. INDIVIDUAL ANIMAL TUMOR PATHOLOGY OF FEMALE RATS IN THE TWO-YEAR INHALATION STUDY OF DICHLOROMETHANE: UNTREATED CONTROL

+ . Frasue Examined Microscopically - : Required Tissue Not Examined Microscopically X : Tumor Incidence N : Necropsy, No Autolysis, No Microscopic Examination S : Animal Missezed

No Tissue Information Submitted
C : Necropsy, No Histology Due To Protocol
A : Autolysis
M : Animal Missing
B : No Necropsy Performed

ANIMAL	1 01	0	Ø	0	0	Ø	a	0	a	0	Ø	a	0	0	0	0	ज	a	Ø	a	or	স	or	a	0	T
NUMBER	1	1 2	1 3	17	1	1 9	2 1	2	2 6	27	28	2 9	3 2	3	3 6	3 7	3	40	4	42	4	45	46	4	4 9	TOTAL:
WEEKS ON Study	104	1 0 4	1 0 4	1 0 4	1 0 4	1 0 4	1 0 4	104	1 0 4	1 0 4	104	1 0 4	104	1 0 4	104	1 0 4	1 0 4	1 0 4	1 0 4	1 0 4	104	104	104	104	1 0 4	TISSUES
INTEGUMENTARY SYSTEM Skin Papilloma, NOS	+	+	+	+	+	+	+	+	N	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	*50 1
RESPIRATORY SYSTEM Lungs and bronchi Alveolar/bronchuolar adenoma Trachea	++	++	++	++	++	+++	+++	++	++	++	++	++	++	++	++	++	++	++	++	++	+++	++	+ +	++	+ + +	50 1 50
HEMATOPOIETIC SYSTEM Bone marrow Spieen Lymph nodes Thymus Thymoma, benign	+++++++++++++++++++++++++++++++++++++++	+++-	++++	++++	++++	++++	++++	++++	++++-	++++X	++++-	++++	+++-	+++++	+++ 1	+++-	+++++	+++ -	++++	++++	++++	+++-	+++-	++++	++++	50 50 49 31 1
CIRCULATORY SYSTEM Heart	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	50
DICESTIVE SYSTEM Salivary gland Liver Neoplastic nodule Bile duct Galibladder & common bile duct Pancreas Esophagus Stomach Stomach Stall intestine Large intestine	++ +z+++++	++ +Z+++++	++ +2+++++	++ +Z+++++	++ +Z+++++	++ +2+++++	++ +Z+++++	++ +Z+++++	++ +Z+++++	++ +z+++++	++ +Z+++++	++ +Z+++++	++ +Z+++++	++ +Z+++++	++ +Z+++++	++X+X+++++	++ +z+++++	++ +z+++++	++ +Z+++++	++ +z+++++	++X+X++++++	++ +Z+++++	++ +Z+++++	++ +2+++++	++ +z+++++	49 50 2 50 *50 50 49 50 47 47
URINARY SYSTEM Kidney Urinary bladder	‡	+++	+++	+	+++	++	+++	++	+++	+++	+++	+++	++	+++	+++	++	+++	+++	+++	+++	++	+++	+	+++	++	50 47
ENDOCRINE SYSTEM Pitutary Carcinoma, NOS Adenoma, NOS Craniopharyngioma Adrenai Pheochromocytoma Thyroid C-cell adenoma C-cell adenoma C-cell adenoma Parathyroid Pancreatic ialeta Islet cell adenoma	+ X + + +	+ x + + =	+ + + +	+ + + x++	+ x + + x -	+ + + +	+ x + + + + + + + + + + + + + + + + + +	+ x + + = +	+ + * * + + + + + + + + + + + + + + + +	+ x +	+ + + - +	+ + + - + x	+ x + + - +	+ x + + + + + + + x	+ + + ++	+ x + + + + + + + + + + + + + + + + + +	+ x + + + + + + + + + + + + + + + + + +	+ + + ++	+ x +	+ x + + x =	+ + + - +	+ x + + -+	+ + +	+ X+ + ++	+ x + + ++x	49 1 24 1 50 2 47 2 47 2 3 26 50 3
REPRODUCTIVE SYSTEM Mammary gland Adenocarcinoma, NOS Mixed tumor, malignant Fibroadenoma	+	+	+	+	N	+	+	+	+	+	+	+	Ċ	N	+	+	+	+	+	+	+ v	+	+	+	+	*50 1 1 5
r ioroadenoma PreputakCitoral gland Carcinoma, NOS Vagina Hemangioma	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 1 *50 1
Uterus Endometriai stromai polyp Ovary Granulosa cell tumor	+ X +	+ +	+ +	+ +	+ +	+ +	+ +	+ +	+ +	+ *	+ +	+ x +	+ +	+ +	+ +	+ +	+	+ +	+ +	+ + X	+ +	+ +	+ +	+ +	+	50 7 49 2
NERVOUS SYSTEM Brain Carcinoma, NOS, invasive	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	50 1
ALL OTHER SYSTEMS Multiple organs NOS Leukemia, mononuclear cell	N X	N X	N	N	N X	N	N	N	N X	N	N	N	N	N	N	N	N X	N	N	N	N X	N	N	N	N X	*50 17

TABLE A4. INDIVIDUAL ANIMAL TUMOR PATHOLOGY OF FEMALE RATS: UNTREATED CONTROL (Continued)

* Animals Necropsied

ANIMAL NUMBER	0 2 1	0 1 4	0 1 5	0 1 0	0 2 0	0 2 5	0 4 1	0 4 3	0 4 5	0 3 2	0 1 6	0 3 4	0 3 6	0 4 7	0 5 0	0 3 8	0 4 4	0 2 9	0 1 3	040	0 4 6	0 2 3	0 2 4	0 3 7	0 2 6
WEEKS ON STUDY	0 6 1	0 7 4	074	0 7 6	0 7 6	0 7 8	0 8 4	0 8 5	0 8 6	0 8 8	0 8 9	0 9 0	0 9 2	0 9 2	0 9 2	0 9 4	0 9 4	0 9 5	0 9 7	0 9 7	0 9 7	0 9 8	0 9	0 9 8	1 0 0
RESPIRATORY SYSTEM Lungs and bronch: Alveolar/bronchiolar carcinoma Follicular cell carcinoma, meta Pheochromocytoma, metastatic Trachea	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+ ×
HEMATOPOIETIC SYSTEM Bone marrow Spleen Lymph nodes Thymus	++++	+++ -	++++	+++-	++++	+++-	+++++	++++	++++	++++	++++	++++	++++	++++	++++	++++	+++-	++++	++++	+++ -	++++	++++	++++	++++	++++
CIRCULATORY SYSTEM Heart Adenocarcinoma, NOS, metastatic	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	*	+	+
DIGESTIVE SYSTEM Salivary gland Liver Neoplastic nodule	+ + x	+++	+++	+++	++++	Ŧ	+++	+++	++	++	++	++++	++++	+++	+++	++	++	++	+++	++	+++	++	+ +	+++	++++
Galibladder & common bile duct Galibladder & common bile duct Pancreas Esophagus Stomach Small intestine Large intestine	(+Z ++]	+z++++	+N++++	+z+++	+ 2 + + + + + + +	+ z + + + + +	+z++++	+z++++	+z++++	+2 + +	+2+1+++	+ 2 + + + + + +	+z++++	+ N + + + + + +	+ z + + + + +	+z+++1	+z++++	+ z + + + + +	+z++++	+ z + I + + +	+Z+++++	+ 2 + + + + + + +	+2+++++	+2+++++	+ 2 + + + + + + + + + + + + + + + + + +
URINARY SYSTEM Kidney Mixed tumor, benign Urinary bladder	+ +	+	+	+ -	++	+ +	+++	+++	+++	++	++	+++	+++	++	++	++	+++	++	++	+++	++	+ +	++	+	 + +
ENDOCRINE SYSTEM Pitutary Neoplasm, NOS Adenoma, NOS Adrenal Cortical carcinoma Pheochromocytoma Pheochromocytoma, malignant	* *	+	+ x +	+ x +	++	++	+ +	+ x +	+ x +	+	+ x + x	++	+	+ X +	+ x +	+ x + x	+ x +	- +	+	++	+ +	+ x +	++	+ x +	+ + x
Thyroid Follicular ceil carcinoma Parathyroid	-	+	+	+	+	+	+	+	+	-	+	+	+	+	+	+	+	+	-	+	+	+	+	+	+
REPRODUCTIVE SYSTEM Mammary gland Adenocarcinoma, NOS Fibroadenoma Preputial/citoral gland	+ N	+ X N	* x N	+ N		N N	+ N	+ N	+ N		N N	+ N	x	N N	+ N	+ N	+ N	+ N	+ N	+ N	+ X N	+ N	* x N	+ N	+ N
Carcinoma, NOS Uterus Endometrial stromal polyp Endometrial stromal sarcoma Ovary Sarcoma, NOS	+	+ X +	* *	+ X +	+ +	* *	+ +	+ +	+	+	+	++	+ +	+ +	++	+ +	+	* * +	+ +	+ + x	+	+ X +	+	+	* +
NERVOUS SYSTEM Brain	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	- +
WUSCULOSKELETAL SYSTEM Bone Osteosarcoma	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
ALL OTHER SYSTEMS Multiple organs NOS Sarcoma, NOS, metastatic Leukemia, mononuclear cell	N	N	N		N X	N	N		N X		N	N X		N X			N X			х	N X	N	N X		- N

TABLE A4. INDIVIDUAL ANIMAL TUMOR PATHOLOGY OF FEMALE RATS IN THE
TWO-YEAR INHALATION STUDY OF DICHLOROMETHANE. LOW DOSE

TABLE A4.	INDIVIDUAL ANIMAL	TUMOR	PATHOLOGY	OF	FEMALE	RATS:	LOW	DOSE
		(C	ontinued)					

ANIMAL	0	9	Ŋ	9	0	Ø	0	0	Q	0	oj	0	0	0	0	0	0	9	q	0	g	<u>o</u> j	9	0	0	T
NUMBER	0	9	3 5	0	0 2	0 3	0 4	0 6	2	0 8	9	1	$\frac{1}{2}$	17	8	2 2	2 7	2 8	3 0	3 1	3 3	3 9	42	4 8	4 9	TOTAL
WEEKS ON STUDY	1 0 2	1 0 2	1 0 3	1 0 4	104	1 0 4	1 0 4	1 0 4	104	1 0 4	1 0 4	1 0 4	104	1 0 4	TOTAL. TISSUES TUMORS											
RESPIRATORY SYSTEM Lungs and bronchi Alveolar/bronchiolar carcinoma Follicular ceil carcinoma, meta Pheochromocytoma, metastatic	+	+	+ x	+	+	+	+	+	+	+	+	+	+	+	*	+	+	+	+	+	+	+	+	+	+	50 1 1
Trachea	+	+	+	+	-	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	۲	48
HEMATOPOIETIC SYSTEM Bone marrow	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+		50
Spleen Lymph nodes	+++++++++++++++++++++++++++++++++++++++	÷	++++	÷	++++	++++	++++	++++	++++	+++	+++	+	+++	++++	+++	++	+++	+++	+++	++	+++	+	+++	+++	+	50 49
Thymus	÷	÷	-	÷	<u> </u>	-	÷	-	÷	÷	÷	÷	÷	÷	÷	÷	÷		+	÷	÷	-	÷	÷	÷	39
CIRCULATORY SYSTEM Heart Adenocarcinoma, NOS, metastatic	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	50 1
DICESTIVE SYSTEM Salivary gland Liver	+++	++	++	+++	+++	++	+++	+++	+	+++	+++	+++	+++	+	+++	+++	+++	++	+++	+++	+++	+++	+++	++	+ + +	49 50
Neoplastic nodule 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	1 50
Galibladder & common bile duct Pancreas	+	++	N + +	3 + +	+	N + + +	+	r + +	+	× + _	N + +	×++	r ++	+	+	+++	N + + +	N + +	+	2 + _	3 + +	+	× + + +	++	+++++++++++++++++++++++++++++++++++++++	*50 48 43 50 47
Esophagus Stomach Smell interture	+++++	Ŧ	+++	+++	++++	+++	Ŧ	÷	+++	-+++	+ + +	+++	+++	++++	+++	+++	÷	+++	+	+++	Ŧ	++++	+ + +	+++	++++	50
Small intestine Large intestine	+	÷	Ŧ	Ŧ	÷	÷	Ŧ	÷	Ŧ	+	+	÷	÷	Ŧ	Ŧ	÷	÷	÷	Ŧ	Ŧ	÷	÷	Ŧ	+	÷	47
URINARY SYSTEM Kidney																				+					+	50
Mixed tumor, benign Urinary bladder		Ţ	Ť	Ţ	Ţ	Ţ	Ţ	ž	Ţ	Ţ	Ī	Ţ	Ţ	Ţ	Ţ	Ī	Ţ	Ţ	Ţ	Ţ	Ţ	Ţ	Ţ	Ţ	Ť	45
ENDOCRINE SYSTEM			-			-		_							_			-	-	-			_		-	
Pituitary Neoplasm, NOS	+	+	+	+	÷	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	49
Adenoma, NOS Adrenai	X	X	X +	X +	X	X	X	X	X	ъ	X		X	X	X	т	X	_	-	*	X	X	X +	X +	X +	30 50
Aurenai Cortical carcinoma Pheochromocytoma	Ŧ	*	Ŧ	Ŧ	-	+	*	Ŧ	Ŧ	Ŧ	Ŧ	Ŧ	Ŧ	-	Ŧ	T	T	T	Ŧ	Τ.	T	*	T	Τ	T	
Pheochromocytoma, malignant Thyroid									4																	2 46
Folicular cell carcinoma Parathyroid	-	+	x	Ŧ	Ŧ	Ŧ	*	7	Ţ	-	*	Ţ	-	Ţ	Ţ	-	-	Ī	7	Ŧ	-	Ţ	Ţ	-	Ţ	1 19
REPRODUCTIVE SYSTEM		_		_		_		_	-	_					_	_	_				_	-	-	_	-	
Mammary gland Adenocarcinoma, NOS	+	+	+	+	÷	+	+	+	+	÷	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	*50
Fibroadenoma Preputial/ciitoral gland	N	N	N	N	X	Ň	X	X	N	N	N	N	N	N	N	N	X	N	N	X	X	X N	N	N	X	11
Carcinoma, NOS Uterus	.,			х	+									 _		-	-	 		1	1	-	1	X.	+	*50 2 49
Endometrial stromal polyp	Ŧ	Ť	Ŧ	*	x	Ŧ	Ŧ	Ŧ	Ŧ	Ŧ	7	x	*	Ŧ	x	Ŧ	т	x	-	т		F	Ŧ	T		49 9 3
Endometrial stromal sarcoma Ovary Sarcoma, NOS	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	50 1
VERVOUS SYSTEM Brain	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	50
MUSCULOSKELETAL SYSTEM Bone Osteosarcoma	N X	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 1
ALL OTHER SYSTEMS Multiple organs NOS Sarcoma, NOS, metastatic	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 1
Leukemia, mononuclear cell		x			<u>x</u>						_												х —	х —	x	17

* Animals Necropsied

WEEKS ON STUDY O	0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	39
Skin * * * * * * * * * * * * * * * * * * *	0 0 0 9 9 9 1 3 7	0 9 8
Papilloma, NOS Subcitances usagePhyman PhymanPrivrona Phyman ProbabilityUngasadi broachi TrachesUngasadi broachi TrachesPrestMATOPOIETIC SYSTEM Bone marrow Splean Lymph nodesDirty System HeartChrouronto System HeartDCRESTIVE SYSTEM Salvary gland Liver Andeona nodeDCRESTIVE SYSTEM Selestic nodule 		
Lungs and bronch + + + + + + + + + + + + + + + + + + +	+ N + + N +	• +
Bone marrow + + + + + + + + + + + + + + + + + + +	+ + + + + +	· +
Heart+ + + + + + + + + + + + + + + + + + +	+ + + + + + + + + + + + +	· + · + · +
Salvary gland Liver Neoplastic nodule Hepatocellular carcinoma Bie duct Gallbladder & common bil duct Pancreas Somach Somach Somal intestine Large intestine URINARY SYSTEM Kidney Urinary bladder Physical adenoma Politicular cell adenoma Proterioma NOS X X N N N N N N N N N N N N N N N N N N N	+ + +	• +
Bile duct Gallbiadder & common bile ductPancreas Esophagus StomachStomach Small intestineLarge intestinePlutiaryCarcinoma, NOSAdenocarcinoma, NOSProbloultoral glandCarcinoma, NOS, invasiveOligodendrogliomaPPerchalphoreN N N N N N N N N N N N N N N N N N N	+ + + + + + X	; ;
Eaophagus Stomach Stomach+ + + + + + + + + + + + + + + + + + +	+ + + N N N	
URINARY SYSTEMKidney+ + + + + + + + + + + + + + + + + + +	+ + + + + + + + + + - +	· + · + · +
Kidney+ + + + + + + + + + + + + + + + + + +	+ - +	+
Ptutary Carcinoma, NOS Adrenal Cortical adenoma Pheochromocytoma Thyroid Follicular cell adenoma Follicular cell carcinoma C cell adenoma C cell carcinoma NOS C cell adenoma C cell adenoma C cell adenoma C cell carcinoma NOS C cell adenoma C cell adenoma C cell adenoma C cell carcinoma NOS C cell adenoma C cell carcinoma N N N N N N N N N N N N N N N N N N N	+ + + + + +	• + • +
Aderoma, NOS AdrenalXX X X XX X X XAdrenalCortical adenoma PheochromocytomaPheochromocytoma Phyroid+ + + + + + + + + + + + + + + + + + +	+ + +	• +
Thyroid Follicular cell adenoma Follicular cell carcinoma C cell adenoma C cell adenoma C cell acrinoma Nervofibroma+ + + + + + + + + + + + + + + + + + +	X + + +	• +
C-cell carcinoma Parathyroid P	+ + +	+
Mammary gland Carcinoma, NOS Adenocarinoma, NOS Fibroadenoma Preputaik/Litoral gland Carcinoma, NOS Uterus Endometrial stromal polyp Endometrial stromal sarcoma Dvary+ + + + N N + + + N N + + + + + + + + +	- + +	-
K X Preputial/clitoral gland Carcinoma, NOS Uterus Endometrial stromal polyp Endometrial stromal sarcoma OvaryX X N N N N N N N N N N N N N N N N N N N	+ N +	+
Uterus + + + + + + + + + + + + + + + + + + +	N N N	N I
Ovary + + + + + + + + + + + + + + + + + + +	+ + + +	*
Brain + + + + + + + + + + + + + + + + + + +	+ + +	+
Zye N N N N + + N N N N N N N N N N N N N N	+ + + X	+ 2
Muscle NNNNNNNNNNNNNNNNNNNNNNNNNNNN	<u>N N N</u>	N
	NNN	N
Lukupie organs NOS Endometrial stromal sarcoma, savansve Leukemia, mononucienz cell Leukemia, mononucienz cell	N N N X X	

TABLE A4. INDIVIDUAL ANIMAL TUMOR PATHOLOGY OF FEMALE RATS IN THE TWO-YEAR INHALATION STUDY OF DICHLOROMETHANE: MID DOSE

TABLE A4.	INDIVIDUAL ANIMAL	TUMOR PATHOLOGY	OF FEMALE	RATS: MID DOSE
		(Continued)		

ANIMAL		- 77	-74	N	-74	- 77	~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~	~	-74	~~~	N	~~~	~	70	-76-	~	a	70	م	7	- 74	70	7	-70	~	7
NUMBER	1	47	0	03	04	0	1	17	1	19	20	22	224	25	28	5205	3	36	3	42	43	44	45	4	5 0	TOTAL.
WEEKS ON STUDY	100	1 0 1	1 0 2	1 0 4	1 0 4	104	1 0 4	1 0 4	104	1 0 4	1 0 4	104	104	1 0 4	104	1 0 4	1 0 4	104	104	1 0 4	1 0 4	1 0 4	104	1 0 4	1 0 4	TISSUES
INTEGUMENTARY SYSTEM	N	+		+	+	+	-	+	N	-	-	+	+	+	+	+	+	+	+	N	N	+	+	+	+	+50
Papilloma, NOS Subcutaneoua tissue Fibroma	N X	+	+	+	+	+	+	+	N X	+	+	+	× +	+	+	+	+	+	+	N	N	+	+	+	+	1 •50 2
RESPIRATORY SYSTEM Lungs and bronchi Traches	+	++	+++	+++	+++	++	++	++	+++	+++	+++	++	+++	+++	+++	+++	+++	+++	++	+++	++	+++	+++	+	+	50 49
HEMATOPOIETIC SYSTEM Bone marrow Spleen Lymph nodes Thymus	++++	+++ -	+++ -	+++ -	++++	+++ -	++++	++++	++++	+++ -	++++	+++-	++++	+++ -	+++-	++++	++++	+++-	++++	++++	++++	++++	-+++	++++	++++	48 50 50 34
CIRCULATORY SYSTEM Heart	+	+	+	-	+	+	+	+	+	+	+	-	+	+	+	+	+	+	+	+	+	+	+	+	+	48
DIGESTIVE SYSTEM Salıvary gland Lıver Veoplastıc nodule Hepatocellular carcınoma	++	+++	++	++	+++	+++	+++	+++	+ + * X	+++	++	+++	++	++++	+++	+ + x	+++	++	+++	++	+++	+++	++	++	+	50 50 3
Bile duct Galibladder & common bile duct Pancreas Esophagus Stomach Small intestine	+2++++	+z++++	+ Z + + + + + -	+2+1++-	+z+++-	+2++++	+2++++	+N++++	+N++++	+N+++++	+×++×++	+2+1+++	+N+++++	+N++++	+z+++.	~+ Z + + + + + •	+z+++z+	+2++++	+N+ I+ + +	+N+++++	+Z++++	+ Z + + + + +	+2+1+++	+Z++++	+Z++++	50 *50 50 45 50 49 49
Large intestine URINARY SYSTEM Kudney	+	+	+	+	+++	+ + +	+++++++++++++++++++++++++++++++++++++++	+ +	+ +	+ +	+ +	+ +	+	+	+ +	+ +	+ +	+	+ +	+	+		+	+	+ + +	50
Urinary bladder ENDOCRINE SYSTEM		_	_	-	_		_	_		<u>+</u>	<u> </u>	_		<u> </u>	-	<u> </u>	_	_	-	-		_	_	_		46
Pritutary Carcinoma, NOS Adenoma, NOS Adrenal Cortical adenoma	+	+ X +	+ X +	+ X +	+ X +	+ x -	+ X +	+ X +	+ X +	+ X +	+ +	- +	+ x +	+ X +	+ X +	+ X +	+ +	+ +	++	+ X +	+ X +	+ X +	++	+ X +	+ + X	49 2 25 49 1
Pheochromocytoma Thyroid Folicular cell adenoma Folicular cell carcinoma	+	-	+	+	+	+	+	+	+	+	+	÷	¥ +	* x	+	X + X	¥ +	+	+	+	+	+	+	X +	+	4 48 1 1
C-cell adenoma C cell carcinoma Parathyroid	-	-	-	-	х +	+	+	+	X +	-	X ~	X +	+	÷	+	-	+	+		х +	+	-	+	+	+	2 26
REPRODUCTIVE SYSTEM Varmary gland Carcinoma, NOS Adenocarcinoma, NOS	+	+	+	+	+	+	+	+	N	+	+	+	+	+	+	*	N	+	+	+	+	+	+	+	+	*50 1 1
Fibroadenoma Preputial/clitoral gland Carcinoma, NOS	N	N X	X N	N	X N	X N	N	X N	N	N	N	N	N			X N	N	N X	N	N	N	X N	X N	X N	N	13 •50 2 50
Uterus Endometriai stromal polyp Endometriai stromal sarcoma Ovary	+	+	+	+	+	+	+	× +	+	+	+	+	++		* *	+	+	+	+	+	+	+	+	+	+	50 7 1 50
NERVOUS SYSTEM Brain Carcinoma, NOS, invasive Oligodendroglioma	+	+	+	+	+	+	+	+	÷	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	50 1 1
SPECIAL SENSE ORGANS Eye Neurofibroma	N	N	N	N	+	+	N	N	N	N	N	+	N	N	N	N		÷ x	N	N	N	N	N	N	 N	*50 1
MUSCULOSKELETAL SYSTEM Muscle Neurofibroma	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N X	N	N	N	N	N	N	N	*50 1
ALL OTHER SYSTEMS Multiple organs NOS Endometrial strongal acrosses, invasive Leukemia, mononuclear cell	N X	N	N	N	N	N X	N		N X	N		N X	N				N X			N X			N X	N	N	*50 1 23

*Animais Necropsied

ANIMAL Number	6	15	19	1	37	34	20	9	12	333	3	36	08	30	47	0	43	05	1	217	42	22	1	24	
WEEKSON STUDY	0 5 9	0 6 3	0 7 0	0 7 2	0 7 3	0 7 5	0 7 8	0 8 0	0 8 0	0 8 3	0 8 4	0 8 6	0 8 7	0 8 7	088	0 8 9	0 8 9	0 9 0	090	0 9 1	0 9 2	0 9 3	0 9 5	0 9 5	1
INTEGUMENTARY SYSTEM		• +	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	 +	_
Keratoacanthoma Subcutaneous tasue Sarcoma, NOS Lapoma Hemangiosarcoma	•	• •	+	+	+	+	+	+	+	+	× +	+	+	+	+	+	+	+	+	+	+	+	+	+	
RESPIRATORY SYSTEM Lungs and bronchi C-cell carcinoma, metastatic Endometrial stromal sarosma, metastat	+ x	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	*	+	+	+	+	+	+	
Osteosarcoma, metastatic Trachea C-cell carcinoma, invasive	+	+	-	+	+	+	-	+	+	+	+	+	+	+	-	+	+	+ X	+	* *	+	+	+	+	
Larynx C cell carcinoma, invasive		+	N	+	+	+	N	+	+	+	+	+	+	+	N	*	+	x	+	+	+	+	+	N	
HEMATOPOIETIC SYSTEM Bone marrow Spleen	+	-	-	+++	+	+++	+++	++	++	++	+++	++	++	+++	Ŧ	++	+++	+++	+++	++	++	+++	++	++	-
Lymph nodes Endometriai stromal sarcema, metastat Thymus	x -	+	+	+++	+	+	++	+	+ -	++	++	++	+ +	+ +	+ -	++	++	++	++	++	++	++	+	+	
CIRCULATORY SYSTEM	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	
DIGESTIVE SYSTEM	+	++	+++	+	++	+++	+	++	++	+	++	‡	+++	+++	Ŧ	++	+	+	++	+	++	++	+	++	
Neoplastic nodule Sile duct Gallbiadder & common bile duct Jancreas	+ N N	+ N +	+ N	+ N +	X + N +	+ N +	+ N	+ N +	+ N +	+ N +	+ N +	+ × +	+ N +	+ N +	+ N	X + N +	+ N +	+ N +	+ N +	+ N +	X + N +	+ N +	+ N +	+ N +	
Soophagus Soomach Smail intestine		+++	+	++++	·+++	++++	-+++ +++	++++	++++	++++	+ + +	+++-	++++	++++++	+	++++	++++	++++	++++	++++	++++	++++	++++	++++	
Large intestine	+	+	-	+	_	+	_	+	+	+	+	+	+	+	_	+	+	+	+	+	+	+	+	+	
URINARY SYSTEM Kidney Urinary bladder	‡	+ +	+ -	+ +	+	<u>+</u>	+ +	+ +	-	+ +	+ +	+ +	+ +	+ +	+ +	+ +	+ +	+ +							
ENDOCRINE SYSTEM Pituitary Adenoma, NOS	+	+	+	+	+	*	+	+ x	* x	+	 *	* *	+ x	+ x	-	*	* *	+	+	+	+	+	+	+	
Adrenal Pheochromocytoma Chyroid	+	+	+	+	+	+	+	+	÷	+	+	+	+	+	-	+	+	+	+	+	+	+	+	+	
C cell adenoma C cell carcinoma Parathyroid	+	+	_	+	-	+	_	-	-	+	+	-	+	+	_	+	+	×	+	× -	_	+	+	+	
REPRODUCTIVE SYSTEM	+	+	N	N	+	+	+	N	+	+	+	N	+	+	+	+	+	+	+	+	+	+	+	+	-
Adenoma, NOS Fibroadenoma Preputial/cittoral gland Carcinoma, NOS	N	N	N	N	X N	X N	N	N	X N	N	N	N	N	X N	N	N	N	N	N	X N	N	N	X N	N	1
Cystadenoma, NOS Jterus Endometriai stromai polyp	+	-	÷	÷	+	+	+	X +	+	+	+	+	+	+	-	+	+ X	+	+	+	+	+	+	+	
Endometrial stromal sarcoma Ivary	X +	+	-	+	+	÷	+	+	+	+	+	+	+	+	-	+	+	+	¥ +	+	+	+	+	+	
VERVOUS SYSTEM Brain	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	
USCULOSKELETAL SYSTEM One Osteosarcoma Osteosarcoma, invasive	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N X X	N	N	N	N	1
ODY CAVITIES eritoneum Meethelioma, malignant	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	1
LL. OTHER SYSTEMS Aultiple organs NOS Endometrial stromal asresma, urvasive Mesothelioma, metastatic	N X	N	N	N X	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	1
Meiocheuoma, metartane Malignant lymphoma, NOS Leukemia, mononuclear cell		x			x		x	x		X	x			x	x	x	x		x	x	x	x		x	

TABLE A4. INDIVIDUAL ANIMAL TUMOR PATHOLOGY OF FEMALE RATS IN THE TWO-YEAR INHALATION STUDY OF DICHLOROMETHANE: HIGH DOSE

TABLE A4.	INDIVIDUAL A	NIMAL T	TUMOR	PATHOLOGY	OF	FEMALE	RATS:	HIGH D	OSE
			(C	ontinued)					

ANIMAL NUMBER	0 3 5	0 4 0	0 4 5	0 4 1	0 3 9	049	0 0 4	0 3 8	0 2 9	0 2 5	0 0 2	0 0 3	0 0 6	0 0 7	0 1 1	0	0 1 7	0 1 8	0 2 1	0 2 3	028	0 3 2	044	0 4 8	0 5 0	TOTAL
WEEKS ON STUDY	0 9 5	0 9 6	096	097	1 0	100	1 0 1	1 0 1	1 0 2	1 0 3	104	1 0 4	104	1 0 4	104	104	104	104	1 0 4	104	1 0 4	1 0 4	104	104	0	TOTAL: TISSUES TUMORS
INTECUMENTARY SYSTEM Skurvas Keratoscanthoma Subcutaneous tasus	N N	++	N	+	++	++	N N	+++	+++	+++	+++	+++	+	+++	+++	++	+++	++	+++	+++	+++	+++	+++	+++	 + +	50 50
Sarcoma, NOS Lupoma Hemanguosarcoma															X				X							
RESPIRATORY SYSTEM Lungs and bronchi C-ceil carenoma, metastatic Endometriai stromal sarcoma, metas	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	50
Osteosarcoma, metastatic Trachea C-cell carcinoma, invasive Larynz C-cell carcinoma, invasive	+++	+ +	+ +	+ +	+ +	- +	+ +	+ +	+ N	+ +	+ +	+ +	+ +	+ +	+ +	+ +	+ +	+ +	+ +	+ +	++	+ +	+ +	+ +	+ +	46 50
HEMATOPOIETIC SYSTEM Bone marrow Spleen Lymph nodes	+++++++++++++++++++++++++++++++++++++++	+++	+++	+++	++++	+++++	+++	+++	+++	+++	++++	+++	+++	+++	++++	+++	++++	++++	+++	-++	++++	++++	+++	+++	+++	46 49 50
Endometrial stromal sarcoma, metas Thymus	-	-	-	+	+	-	-	-	+	+	+	+	+	+	-	+	+	-	+	+	+	+	+	+	+	31
CIRCULATORY SYSTEM Heart	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	50
DIGESTIVE SYSTEM Salivary gland Liver Neoplastic nodule Bile duct	+++++++++++++++++++++++++++++++++++++++	+++	+++	+++++++++++++++++++++++++++++++++++++++	++++	+++	++++	+++	+++++++++++++++++++++++++++++++++++++++	+ + X +	+ + +	++++	++++	+++++++++++++++++++++++++++++++++++++++	* * *	++x+	++	+++++++++++++++++++++++++++++++++++++++	++++	+++++++++++++++++++++++++++++++++++++++	+++++++++++++++++++++++++++++++++++++++	+++++++++++++++++++++++++++++++++++++++	++++	+++++++++++++++++++++++++++++++++++++++	+++++++++++++++++++++++++++++++++++++++	49 50 5 50
Galibladder & common bile duct Pancreas Esophagus Stomach	N + + +	·N+++	N+++	N+++	+ I + Z-	N + +	·N+++	·N+++	N+++	·N+++		·N+++	·N+++	·N+++			· X + + X	N+++	·N+++	N+++	·N+++	N + + +	·N+++	-N+ ++	·N + +	*50 46 47 48
Small intestine Large intestine	+++	++++	+++	+++	+++	+++	+++	+++	+++	++	++++	+++	+++	+++	+++	+++	+++	++++	+ +	++++	+++	++++	++	+++	+++	47 46
URINARY SYSTEM Kidney Urinary bladder	+ +	+ +	++	+ +	++++	+++	+++	+++	+++	+ +	+++	++	+++	+++	++	+ +	+ +	+++	+++	+ +	+ +	+ +	+++	+ +	+++	49 47
ENDOCRINE SYSTEM Pituitary Adenoma, NOS Adrenal	+	+x+	++	++	++	+ x +	+	* *	+	+ x +	+ x +	+ x +	++	+ x +	++	+ x +	+ x +	++	+	+ x +	+ X +	+ x +	+ x +	+	+ x +	49 25 49
Pheochromocytoma Thyroid C-cell adenoma C-cell carcinoma	+	+	+	+	*	+	+	+	+	-	+	+ x	+	+	+	+	-	+	<u>x</u>	+	+	+	+	-	-	1 42 2 2
Parathyroid REPRODUCTIVE SYSTEM	+	+			+		_	_	-		+	+	+	_	_	-	_	-		+	+	+	+		_	26
Mammary gland Adenoma, NOS Fibroadenoma Preputial/citoral gland	+ N	+ X N	+ N	+ X N	+ N	+ X N	+ N	+ X N	+ X N V	+ X N	+ X N	+ X N	+ X N	+ X N	+ N	+ X N	+ X N	+ X N	+ N	+ N	* X N	+ X N	+ X N	+ N	+ X N	*50 1 22 *50 2
Carcinoma, NOS Cystadenoma, NOS Uterus Endometrial stromal polyp Endometrial stromal sarcoma	+	+	+	+	-	+	+	+	+	*	+	+	+ x	+	+	4	÷	+	*	+	+	+	* x	÷	* x	1 47 6 2
Ovary NERVOUS SYSTEM	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	48
Brainvas MUSCULOSKELETAL SYSTEM	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	50
Bone Osteosarcoma Osteosarcoma, invasive	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 1 1
BODY CAVITIES Peritoneum Mesothelioms, malignant	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 1
ALL OTHER SYSTEMS Multiple organs NOS Endometrial stromal sarcoma, invesive Mesothelioma, metastatic Malignant lymphoma, NOS		N						-			N	N	N	N	N	N	N	N	N			N	N	N	N	*50 1 1 1
Leukemia, mononuclear cell	x		X	<u>х</u>	х —	X	x	X		X						<u></u>					x				_	23

*Animals Necropsied

APPENDIX B

SUMMARY OF THE INCIDENCE OF NEOPLASMS IN MICE IN THE TWO-YEAR INHALATION STUDIES OF DICHLOROMETHANE

TABLE B1. SUMMARY OF THE INCIDENCE OF NEOPLASMS IN MALE MICE IN THE TWO-YEAR INHALATION STUDY OF DICHLOROMETHANE

	CONTR	OL (CHAMB)	LOW	DOSE	HIG	h dose
ANIMALS INITIALLY IN STUDY	50		50		50	-
ANIMALS NECROPSIED	50		50		50	
ANIMALS EXAMINED HISTOPATHOLOGICALLY			50		50	
INTEGUMENTARY SYSTEM None				<u></u>	un <u></u>	
RESPIRATORY SYSTEM						
*Nasal cavity	(50)		(50)		(50)	
Undifferentiated carcinoma						(2%)
#Lung	(50)		(50)		(50)	(0.0)
Undiff. carcinoma, metastatic						(2%)
Adenocarcinoma, NOS, metastatic		(0.7)	•	(00)		(2%)
Hepatocellular carcinoma, metastatic		(2%)		(6%)		(8%)
Alveolar/bronchiolar adenoma		(6%)		(38%)		(48%)
Alveolar/bronchiolar carcinoma	2	(4%)	10	(20%)		(56%)
HEMATOPOIETIC SYSTEM						
*Multiple organs	(50)		(50)		(50)	
Malignant lymphoma, NOS		(4%)	1	(2%)		(2%)
Malig. lymphoma, lymphocytic type	1	(2%)			1	(2%)
Malignant lymphoma, mixed type				(2%)	(10)	
#Spleen	(49)	(a ~)	(49)		(48)	
Malignant lymphoma, mixed type		(2%)	(48)		(40)	
#Mesenteric l. node Malignant lymphoma, mixed type	(42) 1	(2%)	(45) 1	(2%)	(40)	
		·		·		
CIRCULATORY SYSTEM	(70)		(50)		(50)	
*Multiple organs	(50)		(50)		(50)	(0~)
Hemangiosarcoma	(20)		(50)			(2%)
#Heart	(50)		(50)	(90)	(50)	
Alveolar/bronchiolar carcinoma, metas Hemangiosarcoma	1	(2%)	1	(2%)		
#Liver	(50)	(270)	(49)		(49)	
Hemangioma		(2%)	(47)		· - ·	(2%)
Hemangiosarcoma	1	(# N)	1	(2%)		(8%)
#Prostate	(50)		(50)		(47)	
Hemangiosarcoma	(00)		• •	(2%)	(**)	
DIGESTIVE SYSTEM					<u></u>	· · · · · · · · · · · · · · · · · · ·
#Liver	(50)		(49)		(49)	
Hepatocellular adenoma		(20%)		(29%)		(29%)
Hepatocellular carcinoma		(26%)		(31%)		(53%)
Alveolar/bronchiolar carcinoma, metas	10	~~~		(2%)		(2%)
JRINARY SYSTEM						
#Kidney	(50)		(49)		(50)	
Alveolar/bronchiolar carcinoma, metas	/					(2%)
Tubular cell adenoma						(2%)
Papillary cystadenoma, NOS			1	(2%)	-	•

	CONTROL (CHAMB)	LOW DOSE	HIGH DOSE
ENDOCRINE SYSTEM			
#Adrenal	(50)	(46)	(50)
Hepatocellular carcinoma, metastatic			2 (4%)
Alveolar/bronchiolar carcinoma, metas			1 (2%)
#Adrenal/capsule	(50)	(46)	(50)
Adenoma, NOS	1 (2%)		
REPRODUCTIVE SYSTEM			
#Testis	(50)	(50)	(50)
Interstitial cell tumor	3 (6%)		
NERVOUS SYSTEM			
None			
SPECIAL SENSE ORGANS			
None			
MUSCULOSKELETAL SYSTEM	, , , , , , , , , , , , , , , , , , ,		
*Vertebral column	(50)	(50)	(50)
Alveolar/bronchiolar carcinoma, metas		,	1 (2%)
*Rib	(50)	(50)	(50)
Alveolar/bronchiolar carcinoma, metas		1 (2%)	
BODY CAVITIES			
*Mediastinum	(50)	(50)	(50)
Alveolar/bronchiolar carcinoma, metas			1 (2%)
ALL OTHER SYSTEMS None			
ANIMAL DISPOSITION SUMMARY	· · · · · · · · · · · · · · · · · · ·	······································	
Animals initially in study	50	50	50
Natural death	5	12	16
Moribund sacrifice	6	12	24
Terminal sacrifice	39	24	9
Accidentally killed, nda		1	
Accidentally killed, NOS		1	1
TUMOR SUMMARY			
Total animals with primary tumors**	34	37	46
Total primary tumors	39	64	102
Total animals with benign tumors	18	24	30
Total benign tumors	18 21	34 26	40 43
Total animals with malignant tumors Total malignant tumors	21 21	30	43 62
Total animals with secondary tumors##	1	5	9
Total secondary tumors	ī	6	13

TABLE B1. SUMMARY OF THE INCIDENCE OF NEOPLASMS IN MALE MICE IN THE TWO-YEAR INHALATION STUDY OF DICHLOROMETHANE (Continued)

* Number of animals necropsied ** Primary tumors: all tumors except secondary tumors

Number of animals with tissue examined microscopically
 ## Secondary tumors: metastatic tumors or tumors invasive into an adjacent organ

TABLE B2. SUMMARY OF THE INCIDENCE OF NEOPLASMS IN FEMALE MICE IN THE TWO-YEARINHALATION STUDY OF DICHLOROMETHANE

	CONTR	OL (CHAMB)	LOW	DOSE	HIG	h dose
ANIMALS INITIALLY IN STUDY	50		50		50	
ANIMALS MISSING			1		1	
ANIMALS NECROPSIED	50		49		49	
ANIMALS EXAMINED HISTOPATHOLOGICALL	Y 50		48		49	
INTEGUMENTARY SYSTEM						
*Subcut tissue	(50)		(49)		(49)	
Fibrosarcoma			2	(4%)	1	(2%)
RESPIRATORY SYSTEM						
#Lung	(50)		(48)		(48)	
Adenocarcinoma, NOS, metastatic	((2%)		
Hepatocellular carcinoma, metastatic				(8%)	3	(6%)
Alveolar/bronchiolar adenoma		(4%)		(48%)		(58%)
Alveolar/bronchiolar carcinoma		(2%)		(27%)	29	(60%)
Osteosarcoma, metastatic	1	(2%)	1	(2%)		
IEMATOPOIETIC SYSTEM	-				_	
*Multiple organs	(50)		(49)		(49)	
Malignant lymphoma, NOS		(4%)			1	(2%)
Malig. lymphoma, lymphocytic type	2	(4%)				
Malig. lymphoma, histiocytic type				(2%)	3	(6%)
Malignant lymphoma, mixed type				(8%)		
#Spleen	(49)		(48)		(47)	
Malig. lymphoma, histiocytic type		(2%)	(477)			(2%)
#Bronchial lymph node	(49)		(47)		(43)	(901)
Alveolar/bronchiolar carcinoma, metas #Mediastinal I, node	(49)		(47)		(43)	(2%)
Alveolar/bronchiolar carcinoma, metas	(40)		(47)			(2%)
#Mesenteric l. node	(49)		(47)		(43)	(4,20)
Malignant lymphoma, NOS		(2%)	(/		(,	
*Pleural cavity	(50)		(49)		(49)	
Malignant lymphoma, NOS			1	(2%)		
#Liver	(50)		(48)		(48)	
Malignant lymphoma, NOS	1	(2%)			1	(2%)
#Kidney	(49)		(48)		(47)	
Malignant lymphoma, mixed type						(2%)
#Uterus	(50)		(48)	(0~)	(47)	
Malig. lymphoma, histiocytic type	<u> </u>		1	(2%)		
CIRCULATORY SYSTEM						
#Spleen	(49)		(48)		(47)	(00)
Hemangiosarcoma #Heart	(49)		(48)		1 (49)	(2%)
Alveolar/bronchiolar carcinoma, metas	(47)		(40)			(4%)
#Liver	(50)		(48)		(48)	(** /v)
Hemangiosarcoma	(00)			(4%)		(2%)
Hemangiosarcoma, metastatic			~	\		(2%)
#Thymus	(30)		(20)		(9)	
Hemangiosarcoma, metastatic						(11%)
DIGESTIVE SYSTEM			<u></u>	a transforma tare takana	····	
#Liver	(50)		(48)		(48)	
Hepatocellular adenoma		(4%)		(13%)		(46%)
Hepatocellular carcinoma		(2%)		(23%)		(67%)
Alveolar/bronchiolar carcinoma, metas						(2%)
Hepatoblastoma					1	(2%)

	CONTR	OL (CHAMB)	LOW	DOSE	HIG	H DOSE
DIGESTIVE SYSTEM (Continued)						
#Duodenum	(46)		(47)		(47)	
Adenocarcinoma in adenomatous polyp	1	(2%)				
URINARY SYSTEM						
#Kidney	(49)		(48)		(47)	
Papillary cystadenoma, NOS			1	(2%)		
ENDOCRINE SYSTEM						
#Pituitary	(46)		(44)		(44)	
Adenoma, NOS			2	(5%)	1	(2%)
#Anterior pituitary	(46)		(44)		(44)	
Adenoma, NOS	4	(9%)				
#Adrenal	(50)		(48)		(48)	
Cortical adenoma	,		. ,			(2%)
#Thyroid	(48)		(47)		(46)	
Follicular cell adenoma		(2%)		(2%)		(9%)
REPRODUCTIVE SYSTEM						
*Mammary gland	(50)		(49)		(49)	
Adenocarcinoma, NOS		(4%)		(6%)	(
#Uterus	(50)	· - · · · /	(48)		(47)	
Adenocarcinoma, NOS		(2%)			()	
Leiomyosarcoma	-				1	(2%)
Endometrial stromal polyp	1	(2%)	1	(2%)	-	、 <i>/</i>
#Ovary	(50)		(47)		(43)	
Cystadenoma, NOS	(2.9)			(2%)	(
Papillary cystadenoma, NOS	1	(2%)	-			
Teratoma, NOS	•				1	(2%)
NERVOUS SYSTEM None						
SPECIAL SENSE ORGANS						
*Harderian gland	(50)		(49)		(49)	
Adenocarcinoma, NOS		(2%)	•		,	
MUSCULOSKELETAL SYSTEM	····					
*Rib	(50)		(49)		(49)	
Osteosarcoma			1	(2%)		
BODY CAVITIES						
*Pelvis	(50)		(49)		(49)	
Osteosarcoma		(2%)	/		,	
ALL OTHER SYSTEMS						
*Multiple organs	(50)		(49)		(49)	
Alveolar/bronchiolar carcinoma, metas	(23)					(2%)
					-	,
Adipose tissue						

TABLE B2. SUMMARY OF THE INCIDENCE OF NEOPLASMS IN FEMALE MICE IN THE TWO-YEAR INHALATION STUDY OF DICHLOROMETHANE (Continued)

TABLE B2. SUMMARY OF THE INCIDENCE OF NEOPLASMS IN FEMALE MICE IN THE TWO-YEAR INHALATION STUDY OF DICHLOROMETHANE (Continued)

	CONTROL (CHAMB)	LOW DOSE	HIGH DOSE
ANIMAL DISPOSITION SUMMARY			
Animals initially in study	50	50	50
Natural death	16	8	9
Moribund sacrifice	8	14	31
Terminal sacrifice	25	25	8
Accidentally killed, nda	1	1	1
Accidentally killed, NOS		1	
Animal missing		1	1
Total animals with primary tumors** Total primary tumors Total animals with benign tumors Total benign tumors Total animals with malignant tumors Total malignant tumors Total animals with secondary tumors##	18 26 9 11 13 15 1	41 74 26 35 30 39 6	47 130 39 56 46 73 9
Total secondary tumors Total animals with tumors uncertain	1	7	11
benign or malignant			1
Total uncertain tumors			1

* Number of animals necropsied
** Primary tumors: all tumors except secondary tumors
Number of animals with tissue examined microscopically
Secondary tumors: metastatic tumors or tumors invasive into an adjacent organ

ANIMAL NUMBER	023	0 3 9	0 4 0	0 2 2	044	0 2 8	0 0 2	0 1 3	0 3 6	004	0 3 1	0 0 1	0 0 3	005	006	0 0 7	0 0 8	009	0 1 0	0 1 1	0 1 2	0 1 4	0 1 5	0 1 6	0 1 7
WEEKS ON Study	0 7 1	0 7 3	0 7 3	0 7 4	0 8 0	0 8 1	0 8 4	0 8 7	0 9 4	0 9 5	0 9 6	1 0 4	1 0 4	1 0 4	1 0 4	104	1 0 4	1 0 4							
RESPIRATORY SYSTEM Lungs and bronchi Hepatocellular carcinoma, metastatic Alveolar/bronchiolar adenoma Alveolar/bronchiolar carcinoma Trachea	+	+	+	+	++	+	+	+	+ x +	+	+	+	+	+	+	+ x+	+ x +	+	++	+	+ X +	+	++	+	 + +
HEMATOPOIETIC SYSTEM Bone marrow Spleen Malignant lymphoma, mixed type Lymph nodes Malignant lymphoma, mixed type Thymus	+++++++++++++++++++++++++++++++++++++++	+++++	+++	++ + +	++++-	+++-	++ - +	++	+ + + -	++++-	++ + -	++ + -	++	+++-	++++++	++++++	++ + +	++	++++-	++++++	++ + +	++ -+	++ - +	++++++	- - + + -
CIRCULATORY SYSTEM Heart Hemanguosarcoma	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+
DICESTIVE SYSTEM Salivary gland Liver Hepatocellular adenoma Hepatocellular carcinoma Hemangioma Bile duct Gallbladder & common bile duct	++	++x +n	++ + X ++	++x ++	++XX ++	++ + x + N	++ ++	++ ++ x++	++ + + N	++ x ++	++ ++	++X ++	++ + + N	++ ++	++ + + N	++ ++	++ ++	++x +N	++x +x ++	+ + x + +	++ ++	++ ++	++ ++	-+ + ++	- ++ + x ++
Pancreas Esophagus Stomach Small intestine Large intestine	++++	++++ -	+++++	++++	++++	+++++	++++	+++++	++++	+	++++	++++	++++	++++	++++	++++	+-+++	+++++	++++	++++	++++	++++	++++	++++	+++++++++++++++++++++++++++++++++++++++
URINARY SYSTEM Kidney Urinary bladder	++	++	+++	+++	+++	+++	+	+++	++	++	+	++	+++	+++	++	+++	+++	++	++	+	++	++	+++	+ *	- +
ENDOCRINE SYSTEM Pitutary Adrenai Adenoma, NOS Thyroud Parathyroud	++++++	+++++	+++++	+++++	++ + +	++++-	++ ++	+++	+++	+++	++	++++	+++++	+++++	++++-	++++-	++	++	++++-	++ +-	++++-	++++-	++++	++++	+++++
REPRODUCTIVE SYSTEM Mammary gland Testus Interstitual cell tumor Prostate	N + +	N + +	N + +	N + +	N + +	N + +	N + +	N + +	N + +	N + +	N + +	N + +	N + +	N + +	N + X +	N + +	N + +	N + +	N + +	N + +	N + +	N + +	N + +	N + +	- z+ +
NERVOUS SYSTEM Brain	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	-
ALL OTHER SYSTEMS Multiple organs NOS Malignant lymphoms, NOS Malig. lymphoma, lymphocytic type	N X	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N X	N	N	N	N	N	N

TABLE B3. INDIVIDUAL ANIMAL TUMOR PATHOLOGY OF MALE MICE IN THE TWO-YEAR INHALATION STUDY OF DICHLOROMETHANE: UNTREATED CONTROL

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Tissue Examined Microscopically Required Tissue Not Examined Microscopically Tumor Incidence Necropsy, No Autolysis, No Microscopic Examination Animal Missexed - : X : N : S

No Tissue Information Submitted
 C : Necropsy, No Histology Due To Protocol
 A : Autolysis
 M : Animal Missing
 B : No Necropsy Performed

Dichloromethane, NTP TR 306

TABLE B3.	INDIVIDUAL ANIMAL	TUMOR PATHOLOGY	OF MALE MICE:	UNTREATED
		CONTROL (Continued))	

ANIMAL NUMBER	0	0	020	0 2 1	024	025	0 2 6	027	0 2 9	030	03	033	0 3 1	035	03	03	0	04	04	04	0	04	04	04	050	1
WEEKS ON STUDY	81 1 0 4	9 1 0 4	104	104	104	104	5 1 0 4	104	91 1 0 4	104	1	31 1 0 4	104	51 1 0 4	104	104	1 0 4	104	104	२ 1 0 4	104	104	8 104	9 1 0 4	0 1 0 4	TOTAL. TISSUES TUMORS
RESPIRATORY SYSTEM Lungs and bronch: Hepatocellular carcinoma, metastatic Aiveolar/bronchiolar adenoma Aiveolar/bronchiolar carcinoma Trachea	+ x +	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+ X +	+	+	+	+	+	+	 + +	50 1 3 2 47
HEMATOPOIETIC SYSTEM Bone marrow Spieen Malignant lymphoma, mixed type Lymph nodes Malignant lymphoma, mixed type Thymus	+++++	+ - + -	++x+ +	++ + + + +	++ ++ + +	++++++	+++++++++++++++++++++++++++++++++++++++	++++++	++ + +	++ + +	++ +x+	+++++	++++-	++ + -	++++-	++++-	++ + -	++ + +	++ + -	+++++++++++++++++++++++++++++++++++++++	+++++++++++++++++++++++++++++++++++++++	++	++++-	++ + +	 ++ + + +	49 49 1 42 1 26
CIRCULATORY SYSTEM Heart Hemangiosarcoma	+	+	+	+	+	*	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	50 1
DIGESTIVE SYSTEM Salivary gland Liver Hepatocellular adenoma Hepatocellular carcinoma Hemangioma	+ x	+ + x	++	++	+++	+++	+++	+ +	+ + + <u>y</u>	++++	+ + X	+++	+ + x	+ + x	+++	+ *	+ + x	++	+ + x	+++	+ + x	+++	+ + x	- +	++	48 50 10 13 1
Bile duct Galibladder & common bile duct Pancreas Esophagus Stomach Small intestine Large intestine	+ + + + + + +	+ 2 + + + + + +	+++++++	+++++++	+ 2 + + + + + + + + + + + + + + + + + +	+++++++	+++++++	+++++++	+++++++	+ 2 + + + + + +	+ + + + + + + + +	+++++++	+++-++	+ + + + + + + +	+ > + + + + =	+++++++	+++++++	+++++++	+++++++	+++++++	+++++++	+++++++	+++++++	+++++++	++++++	50 *50 50 47 49 49 49
URINARY SYSTEM Kidnev Urinary bladder	++	+++	+++	+++	++++	+++	++	+++	+++	+++	+++	+++	+++	++	+++	+ +	+++	+++	++	+++	+++	+++	++++	+++		50 50
ENDOCRINE SYSTEM Pituitary Adrenaí Adenoma, NOS Thvroid Parathyroid		+++++	+++++	++ +-	+ + + -	++ ++	++ ++	++ ++	++ ++	++++	+++++++++++++++++++++++++++++++++++++++	++++++	1+ +1	+++++	++	++ ++	++++-	+++++-	+++++	++	++ ++	+++++	++++++	++×++	++ ++ +	48 50 1 45 21
REPRODUCTIVE SYSTEM Mammary gland Testis Interstitial cell tumor Prostate	N + +	N + +	N + X +	N + +	N + +	N + +	N + +	N + +	N + +	N + +	N + +	N + +	N + X +	N + +	N + +	N + +	N + +	N + +	N + +	N + +	N + +	N + +	N + +	N + +	X+ +	*50 50 3 50
NERVOUS SYSTEM Brain	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	50
ALL OTHER SYSTEMS Multiple organs NOS Malignant lymphoma, NOS Malig lymphoma, lymphocytic type	N	N	N	N	N	N	N	N	N	N	N	N	N		N X	N	N	N	ы	N	N	N	N	N	N	*50 2 1

Animals Necropsied

ANIMAL NUMBER	0 1 0	0 3 6	0 4 2	0 1 6	0 1 8	0 3 5	0 1 5	0 2 6	0 3 8	0 4 8	0 2 9	0 3 2	0 0 5	0 3 3	0	0 1 9	0 3 4	030	0 0 2	0 0 9	0 3 1	0 2 0	0 2 4	0 3 7	0 4 4
WEEKS ON STUDY	0 3 1	0 3 1	0 3 1	0 6 0	0 7 1	0 7 2	0 7 6	0 7 6	0 7 8	0 7 8	0 8 1	0 8 3	0 8 4	0 8 7	0 8 9	0 8 9	0 8 9	0 9 0	0 9 4	0 9 4	0 9 7	0 9 8	1 0 1	1 0 1	1 0 1
RESPIRATORY SYSTEM Lungs and bronchi Hepatoceilular carcinoma, metastatic Alveolar/bronchiolar adenoma Alveolar/bronchiolar carcinoma Trachea	+	+	+	+	+ X +	+	+	+	+ x x +	+ X +	+	+	+	+ X +	* * +	+ X X +	+	+ X +	+ X +	+	+ X +	+ x x +	+ X +	++	+ x +
HEMATOPOIETIC SYSTEM Bone marrow Spieen Lymph nodes Malignant lymphoma, mixed type Thymus	+ + + -	+++	+++ -	+++ -	-++ ++	+++++++++++++++++++++++++++++++++++++++	+++ -	+++ -	+ -+ -	+++++++++++++++++++++++++++++++++++++++	++++	+++	++	+++++++++++++++++++++++++++++++++++++++	+++ +	+++ -	+++	++	+++++++++++++++++++++++++++++++++++++++	+++++++++++++++++++++++++++++++++++++++	++	+++	+++ -	+++ -	++++++++++++++++++++++++++++++++++++
CIRCULATORY SYSTEM Heart Alveolar/bronchiolar ca, metastatic	+	+	+	+	+	+	+	+	ż	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+
DIGESTIVE SYSTEM Salıvary gland Lıver Hepatocellular adenoma Hepatocellular carcınoma Alveolar/bronchiolar ca, metastatic U estatatic	++	++	++	+++	+ * X	+ + x	+++	++	-	+ + x	+++	+ + x	+ + x	+++	+ + x	++	+++	+ + X	+ + X	+++	++++	+ + X X	+ + X X	+++	+ + X
Hemangiosarcoma Bile duct Galibiadder & common bile duct Pancreas Esophagus Stomach Small intestine Large intestine	+ 7. + + + + + +	++++++	+++++++	+2,++111	+++++++	+++++++	+++++++	+++++++	121111	+++++++	+ + + + + + + +	++++++	+ 2	+ >, + + + + +	+++++++	+ + + + + + +	+++++++	+ >, + + + + + +	+ + + + + + +	+++++++	+++++++	+++++++	+ 7, + + + + + +	+ >, + + + + + +	++++++
CRINARY SYSTEM Kidney Papiilary cystadenoma, NOS Urinary bładder	+++	++	++	+++	++	+ -	+++	++	-+	++	+	+	+	+	+	+ +	+++	+	+++	+++	+++	+	+++	++	- + +
ENDOCRINE SYSTEM Pituitary Adrenal Thyroid Parathyroid	++++-	+++-	++	++++	+++-	+++-	++++	+++-	+ - + +	+ +	+++-	+ +	+	++++-	+++ -	+++-	+++-	++++	++++	+++ =	++-+	++++	++++	+++-	 ++ ++ -
REPRODUCTIVE SYSTEM Mammary gland Testis Prostate Hemangiosarcoma	N + +	N + +	N + +	N + +	N + + +	N + +	N + +	N + +	N + +	N + +	N + +	N + +	N + +	N + +	N + +	N + + + +	N + +	N + +	N + +	N + +	N + +	N + +	N + +	+++	- н ++х
NERVOUS SYSTEM Brain	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	-+
MUSCULOSKELETAL SYSTEM Bone Alveolar/bronchiolar ca, metastatic	N	N	N	N	N	N	N	N	N	N	И	N	N	N	N	N X	N	N	N	N	N	N	N	N	- К
ALL OTHER SYSTEMS Multiple organs NOS Malignant lymphoma, NOS Malignant lymphoma, mixed type	N	N	N	N	N	N	N X	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N

TABLE B3. INDIVIDUAL ANIMAL TUMOR PATHOLOGY OF MALE MICE IN THETWO-YEAR INHALATION STUDY OF DICHLOROMETHANE: LOW DOSE

TABLE B3.	INDIVIDUAL ANIMAL	TUMOR	PATHOLOGY	OF	MALE M	ICE:	LOW	DOSE
		(C	Continued)					

ANIMAL	0	न्त	0	গ	Ø	0	0	ज	o	0	0	0	0	0	0	0	न्ज	ग	न	0	গ	ল	Ø	0	0	T
NUMBER	2	0	0	0	0 6	0	8	1	1 2	1	171	2	2 2	2	2	28	3	성	4	43	45	4	4	4	5 0	
WEEKSON	<u>⊢_</u>	- ता	л П	π Π	1	<u>.</u>	π	π	H	<u>п</u>	π	<u>.</u>	<u>п</u>	11	-it	Ţ	π	1	π	-11	TT	π	-m	Π	T	TOTAL. TISSUES
STUDY	02	õ	õ	o	Ô	ò	õ	õ	ò	ò	ò	o	ò	0	õ	ò	04	Ö	ò	Õ	Ö	ò	0		õ	TUMORS
					-	*	*			۳۹ 						-		_			_		-			
RESPIRATORY SYSTEM	+	+	+	÷	÷	+	+	+	+	+	÷	+	+	÷	÷	+	÷	÷	+	+	+	+	÷	+	+	50
Hepatocellular carcinoma, metastatic Alveolar/bronchiolar adenoma			x			х		х		x	x	х	x			х	х						х			3
Alveolar/bronchiolar carcinoma Traches	x	X	-	1		X	-	1	X	 	1	-	-	-		-	-	X +	-	*	1	X	-	X	+	10
HEMATOPOIETIC SYSTEM		-		-	-	_		-		-				· ·				-				_	_			
Bone marrow	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	49
Spleen Lymph nodes	+ -	+++	+++	+++	++	+++	+++	+	++	+++	++++	+	++	+++	+++	++	+++	+++	+++	+++++++++++++++++++++++++++++++++++++++	++	++	++	++	++	49 45
Malignant lymphoma, mixed type																X +										1 23
Thymus		_	_	_	_		_	-	_		_	_	_	_	_	-	_	_	-		_					23
CIRCULATORY SYSTEM Heart	+	+	+	+	+	+	+	+	+	÷	÷	+	+	+	+	÷	+	+	÷	+	+	+	+	+	+	50
Alveolar/bronchiolar ca. metastatic																										1
DICESTIVE SYSTEM												····	···		·											49
Saiwary gland Liver	+	+	+	÷	÷	+	÷	÷	÷	+	+	÷	÷	÷	+	÷	+	÷	+	+	Ŧ	+	+	÷	÷	49
Hepatoceilular adenoma Hepatocellular carcinoma		X			X X		x		x	x	X		XX	XX	x	x						x	x	X		14
Alveolar/bronchiolar ca, metastatic	x																									1
Hemangiosarcoma Bile duct	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	X +	+	+	+	+	1
Galibiadder & common bile duct Pancreas	+	+	+	+	+	+	+	+	+	+	+	N	+	N	Ň	+	+	+	+	+	N 4	+	+	+	+	*50 48
Esophagus	+	÷	÷	÷	÷	÷	÷	÷	÷	Ŧ	÷	÷	+	Ŧ	÷	Ŧ	Ŧ	Ŧ	Ŧ	Ŧ	÷	Ŧ	Ŧ	Ŧ	÷	48
Stomach Small intestine	++	+++	+++	+++++++++++++++++++++++++++++++++++++++	++	++++	++	+++	+++	+++	+++	+++	+++	+++	+++	+++	++++	++	+++++++++++++++++++++++++++++++++++++++	+++++	+++	++	+++	+++	+	47 46
Large intestine	+	+	÷	÷	÷	+	÷	÷	+	÷	÷	+	+	+	+	÷	+	÷	+	÷	÷	÷	÷	÷	÷	46
CRINARY SYSTEM		<u> </u>									<u> </u>															49
Kidney Papillary cystadenoma, NOS	+	*	+	+	+	+	*	+	+	+	+	+	+	+	+	+	+	*	+	+	+	+	+	x.	+	1
Urinarv bladder	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	49
ENDOCRINE SYSTEM																						+				48
Adrenal	÷	÷	÷	÷	Ŧ	÷	÷	÷	Ŧ	÷	÷	÷	÷	Ŧ	÷	÷	÷	÷	÷	÷	÷	÷	÷	÷	÷	46
Thyroid Pirathyroid	+	+	+	+	+	+	+	+	+	+.	-+-	-+	+	+	+	+	+	+	+	+	+	+	+	+	+	47
		_	_								<i>T</i>								_		-		_	_		
REPRODUCTIVE SYSTEM	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
Testis Prostate	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	±	50 50
Hemangiosarcoma	Ŧ	Ŧ	Ŧ	Ŧ	-	+	Ŧ	Ŧ	-	Ŧ	*	*	٣	*	Ŧ	Ŧ	Ť	Ŧ	-	-	Ť	Ŧ	Ŧ	Ť	•	1
VERVOUS SYSTEM															_								-		-	
Brain	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	50
MUSCULOSKELETAL SYSTEM	N			ς	<u>.</u> .	N		N.	ς	N	N:	v	N	N	N	N	N	v	N	N	N	N	N	<u> </u>	~	*50
Alveolar/bronchiolar ca, metastatic	,	•	1	•	.,		`	. •	•		•	.,		.,				.,	•	`	.•			.•		1
ALL OTHER SYSTEMS											_														-	
Multiple organs NOS Malignant lymphoma, NOS	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 1
Malignant lymphoma, mixed type							Х																			i
										_				_				_		_					-	hg

* Animals Necropsied

			~~~~			- 41							-	- 41	- 41	-	~		- 21-		-	- 41			~
ANIMAL NUMBER	0 4 2	4	0 5 0	0 1 4	33	0 2 4	0 3 7	030	0 4 5	0 1 3	0 1 8	0 2 1	4 8	0	26	0	0 2 9	1	3	0 2 5	546	0	0 3 5	4	0 4 4
WEEKSON STUDY	0 0 0	0 3 6	0 4 3	0 6 1	062	0 6 5	0 7 0	0 7 2	0 7 4	0 7 6	0 7 6	0 7 6	0 7. 6	0 7 7	0 8 0	0 8 3	0 8 3	0 8 9	0 8 9	0 9 0	0 9	0 9 3	0 9 3	0 9 3	0 9 3
RESPIRATORY SYSTEM Lungs and bronchi Unduff. carcinoma, metastatic	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+
Adenocarcinoma, NOS, metastatic Hepatocellular carcinoma, metastatic Alveolar/bronchiolar adenoma Trachea Nasal cavity Undifferentiated carcinoma	+++	-N	++	x + +	++	++	x + +	X X + +	+++	x + +	x + +	x + +	x + +	++	X X + +	x + +	+++	X + +	x +	X + +	x ++	X + +	X + +	x + +	X X + +
HEMATOPOIETIC SYSTEM Bone marrow Spieen Lymph nodes Thymus	++		++++	++	++	++	++++	+++-	++++	+++-	++++	+++-	+++-	+++++	+++-	+++-	++++	+++-	+++-	+++-	+++-	+++-	++ 1 1	+ - + -	++++
CIRCULATORY SYSTEM Heart	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+
DIGESTIVE SYSTEM Salivary gland Liver Hepatocellular carcinoma Hepatocellular carcinoma Alveolar/bronchiolar ca, metastatic	++	-	+++	+ + x	+ + x	+++	+++	+++	+ + x	+++	+++	+ + x	+ * x	+ + x	+ + x x	‡ x	+++	+ + + X X	∓ x	+ + x	+ + x	+ + x	+ + X X	+ + x	++
Hemangtoma Hemangtosarcoma Bile duct Gallbladder & common bile duct Pancreas Esophagus Stomach Small intestine Large intestine	+7.+++1	121111	+ + + + + Z +	+ 7 + + + + + + +	+++++	+++++++	X+N+++++	++++++	+ 2 + + + + + + + + + + + + + + + + + +	++++++	X++++++	++ + + + + + +	++++++	+ 7, + + + + + +	+++++++	+++++++	+++++++	+++++++	+++++++	++++++	++++++	+ : + + + + + + + + + + + + + + + + + +	+++++++	+++++++	+++++++
CRINARY SYSTEM Kidney Alveolar/bronchiolar ca. metastatic Tubular cell adenoma Urinary bladder	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	++	+	++
ENDOCRINE SYSTEM Pituitary Adrenai Hepatocellular carcinoma, metastatic Alveolar/bronchiolar ca, metastatic	- +	- -	+++	+++	++++	+++	+++	- + + +	- + +	+++	+++	÷ +	++	+++	+++	+ *	+++	+++	++	+++	-+	++	++	+++	- + +
Thyroid Parathyroid	-	-	-	+-	+++	+++	+	+++	+ -	-	+++	+ +	+	+	++	+	+-	+++	+++	+	+++	-	+	-	-
REPRODUCTIVE SYSTEM Vammary gland Testis Prostate	N + -	N + -	N + +	N + +	N + +	N + +	N + + +	N + +	N + +	N + +	N + +	N + +	N + +	N + +	N + +	++++	N + +	N + +	N + +	N + -	N + +	N + +	N + + +	N + +	N + +
VERVOUS SYSTEM Brain	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	• +	+	+
MUSCULOSKELETAL SYSTEM Bone Alveolar/bronchiolar ca, metastatic	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
BODY CAVITIES Mediastinum Alveolar/bronchiolar ca, metastatic	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
ALL OTHER SYSTEMS Multiple organs NOS Hemangiosarcoma Maligant lymphoma, NOS Malig. lymphoma, lymphocytic type	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N X	N		X	N X	N	N	N	N

#### TABLE B3. INDIVIDUAL ANIMAL TUMOR PATHOLOGY OF MALE MICE IN THE TWO-YEAR INHALATION STUDY OF DICHLOROMETHANE: HIGH DOSE

TABLE B3.	INDIVIDUAL ANIMAL	TUMOR PATHOLOGY	OF MALE MICE:	HIGH DOSE
		(Continued)		

ANIMAL	T 71	0	- 01	0	<u>_</u> 0	<u>_</u> 01	01	0	0	0	0	<u>n</u>	01	0	ച	70	л П	0	0	a	0	01	0	٥.	0	T
NUMBER	3	1 6	28	12	20	3	3	9	3	49	0 4	1	34	0	0	02	0  7	1	1 7	1 9	2 2	2 3	2 7	43	<b>4</b> 7	TOTAL:
WEEKSON STUDY	0 9 6	0 9 7	0 9 7	0 9 8	1 0 0	1 0 0	1 0 0	1 0 1	1 0 1	1 0 1	1 0 2	1 0 2	1 0 2	1 0 3	1 0 4	1 0 4	1 0 4	1 0 4	1 0 4	1 0 4	104	1 0 4	1 0 4	1 0 4	1 0 4	TISSUES
RESPIRATORY SYSTEM Lungs and bronchi Undiff. carcinoma, metastatic Adenocarcinoma, NOS, metastatic	+	+	+	+	+	+	* X	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	50 1 1
Hepatocellular carcinoma, metastatic Alveolar/bronchiolar adenoma Alveolar/bronchiolar carcinoma Trachea	x +	X +	X +	x +	X X +	X +	X +	X X +	X X +	x +	x	X +	X X +	X X +	X X +	X X +	X +	X X +	X +	x +	X +	X X +	X X +	X X +	X +	4 24 28 48
Nasal cavity Undifferentiated carcinoma	+	+	+	+	+	+	*	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	*50 1
HEMATOPOIETIC SYSTEM Bone marrow Spieen Lymph nodes Thymus	++++++	++++-	+++ -	+++ -	+++-	++++	+++ =	+++-	++++-	+++ -	+++-	++	+++-	+++-	+++-	++++	+++-	++ -+	+++ =	++++	++ -+	+++	+++ -	++++-	++++	49 48 40 13
CIRCULATORY SYSTEM Heart	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	50
DIGESTIVE SYSTEM Salivary giand Luver Hepatocellular adenoma Hepatocellular carcinoma Alveolar/bronchiolar ca, metastatic	++++	+ * x	+ + x	+ * x	∓ x	++	+++	∓ x	÷ x	+ + X X	+ * x	+++	++	+ + X X	+ + X X	+ + x	+ + x	+++	+ + + X X X	+ * X	+ + x	+ * x	+ *	+ x	++	46 49 14 26 1
Hemangtoma Hemangtosarcoma Bile duct Galibiadder & common bile duct Pancreas Esophagus Stomach Small intestine	+++++	+++++	+ + + + 5 + + + +	+ + + + + +	+++++	+++++	+++++	+++++	X ++++++	+++++	+++++	++ ++ ++	X + Z + + + +	+++++	+++++	+++++	+++++	+++++	+ + + + + +	+ + + + + + + + + + - + + + + - + + + + + + + + + + + + + + + + + + + +	+++++	X + + + + + +	+++++	+++++	+++++	1 49 *50 47 49 49 49
Large intestine URINARY SYSTEM Kidney Aiveolar/bronchiolar ca, metastatic	+	+	+	+	+	++	+	+	+	+	+	+	+ + x	+	+	+	+	+	+	+	+	+	+	+	+	47 50 1
Tubular cell adenoma Urinary bladder	+	X +	+	+	+	+	+	+	+	<u>+</u> _	+_	+	+	+	+	+	+	+	+	-	+	+	+	+	+	1 47
ENDOCRINE SYSTEM Pituitary Adrenai Hepatocellular carcinoma, metastatic Alveolar/bronchiolar ca, metastatic	+ +	++	++	++	+++	+++	+++	++++	+++	+++	+ + x	++	+++	++	++	+++	+++	++	++	++	- +	++	Ŧ	+ * x	++	45 50 2
Thyroid Parathyroid	+	+ -	+ -	+ -	<u>+</u>	+ -	+ -	+ -	+ +	+ -	+++	+ +	+ -	+ +	<u>+</u>	+ +	+ +	+ -	+ -	+ +	+ -	+++	+ -	+ -	++	48 17
REPRODUCTIVE SYSTEM Mammary gland Testis Prostate	X + +	N + +	N + +	N + +	N + +	N + +	N + +	х + + Х		Ч + Ч +	N + 4	N + +	N + +	N + +	N + +	N + +	N + +	у + +	N + +	X + +	N + +	N + +	N + +	N + +	++2	*50 50 47
NERVOUS SYSTEM Brain	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+		50
MCSCULOSKELETAL SYSTEM Bone Alveolar/bronchiolar ca. metastatic	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N X	N	N	N	N	N	- N	*50 1
BODY CAVITIES Mediastinum Alveolar/bronchiolar ca, metastatic	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N X	N	N	N	N	N	- N	•50 1
ALL OTHER SYSTEMS Multiple organs NOS Hemangtosarcoma Malignant lymphoma, NOS Malig. lymphoma, lymphocytic type	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	- И	*50 i 1 1

*Animais Necropsied

ANIMAL NUMBER	0	02	0	2	9	0	4	0	0	0	0	0 ∡	0	0	0	0	0	0	0	0	0	2	2	0	0 3
NO NO LI	3	2 7	8	5	9	i	6	3 0	2	4	3	7	3 2	0 7	6	9	ĭ)	2	ĩ	õ	8	6	5	ŏ	5
WEEKS ON STUDY	0 0 2	0 1 9	038	0 5 8	0 ô 1	0 7 2	0 7 2	076	0 7 8	0 8 0	0 8 2	0 8 4	0 8 5	0 8 6	0 8 7	0 8 7	0 8 9	0 8 9	0 9 3	0 9 3	0 9 5	0 9 5	0 9 6	0 9 7	0 9 9
RESPIRATORY SYSTEM Lungs and bronchi Alveolar/bronchiolar adenoma Alveolar/bronchiolar carcinoma	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	*	+	+	+	+	+	+	+	+	+
Osteosarcoma, metastatic Trachea	+	+	+	+	+	+	-	+	+	+	-	X +	+	+	+	+	+	+	+	+	+	+		+	+
HEMATOPOIETIC SYSTEM Bone marrow	+	+	-	+	+	+	+	+	+	+	+	t	+	+	+	+	+	-	+	+	+	+	+	+	+
Spieen Malig lymphoma, histiocytic type Lymph nodes	+	+	+	-	+	+	+	+	+	+	+	+	+	+	+	+	÷	+	+	+	+	+	+	+	+
Malignant lymphoma, NOS Thymus	+	+	-	-	+	-	-	-	-	-	-	-	-	+	-	-	-	+	+	+	-	-	-	-	_
CIRCULATORY SYSTEM Heart	+	+	-	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+
DIGESTIVE SYSTEM Salivary gland Liver Hepatocellular adenoma Hepatocellular carcinoma	+++	++	++	++	++	+ +	++	+++	++	++	++	+ + x	++	++	++	++	+++	++	++	++	++	++	++	++	++
Malignant lymphoma, NOS Bile duct Gallbladder & common bile duct	+ N	+++	+ N	+ N	+ N	++++	+ N	+++	+++	+++	+++	+++	+++	+++	+++	+++	+++	+++	+ N	+++	+++	+++	+++	+ N	++
Pancreas Esophagus	+	+++	Ξ	Ŧ	+++	++	++	+	++	+++	++	++++	+	+++	++	+++	++	+++++++++++++++++++++++++++++++++++++++	+++++++++++++++++++++++++++++++++++++++	+++++++++++++++++++++++++++++++++++++++	+++++++++++++++++++++++++++++++++++++++	+++	+++	++++	++
Stomach Small intestine Adenoca in adenomatous polyp Large intestine	+ -	++++	+	-+	+	++++	++++	++++	++ +	++++	+ + +	+ + +	++++	++++	++ +	++++	++ +	++++	++++	++++	++++	+ + +	++ +	++++	+++++
URINARY SYSTEM Kidney Urinary bladder	++++	+++	+		+++	+++	+	+++	+++	+++	+++	++	+++	+++	++	+++	+++	+++	++	+++	+++	+++	+++	+++	 ++
ENDOCRINE SYSTEM Pitutary	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	-	+	+	+	-	+	+	-	+	
Adenoma, NOS Adrenal Thyroid	+++	+++	+ +	+++	+ -	+ +	+ +	+ -+-	-+	+ +	+ +	+ +	+ +	++	+++	+++	+++	+++	++	+++	++	+++	+ +	+++	X + +
Follicular cell adenoma Parathyroid	-	+	+	-	-	-	+	-	+	-	+	+	-	-	-	-	-	+	+	+	-	+	+	-	-
REPRODUCTIVE SYSTEM Mammary gland Adenocarcinoma, NOS	+	+	N	+	N	N	N	+	+	N	+	+	+	+	+	N	N	+	+	+	+	+	+	+	+
Uterus Adenocarcinoma, NOS Endometrial stromal polyp	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+ X	+	+	+	+
Ovary Papillary cystadenoma, NOS	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+
NERVOUS SYSTEM Brain	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+
SPECIAL SENSE ORGANS Harderian gland Adenocarcinoma, NOS	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	d
BODY CAVITIES Peritoneum Osteosarcoma	N	N	N	N	N	N	N	N	N	N	N	N X	N	N	N	N	N	N	N	N	N	N	N	N	N
ALL OTHER SYSTEMS Multiple organs NOS Malignant lymphoma, NOS Malig lymphoma, lymphocytic type	N	N	N	N	N	N	N	N X	N	N	N	N	N	N	N	N	N	N	N X	N	N	N	N	N	N

### TABLE B4. INDIVIDUAL ANIMAL TUMOR PATHOLOGY OF FEMALE MICE IN THE TWO-YEAR INHALATION STUDY OF DICHLOROMETHANE: UNTREATED CONTROL

+ - X N S

Tisaile Examined Microscopically Required Tissue Not Examined Microscopically Tumor Incidence Necropsy, No Autolysis, No Microscopic Examination Animal Missexed

No Tissue information Submitted Necropsy, No Histology Due To Protocol Autolysis Animal Missing No Necropsy Performed С

A M B

TABLE B4.	INDIVIDUAL	ANIMAL	TUMOR	PATHOLOGY	OF FEMALE	MICE:	UNTREATED
			CONTR	OL (Continued	)		

ANIMAL NUMBER	0	0	004	0 0 5	009	0 1 0	0 1  3	0	0 1 5	0 1 6	0  1  7	020	0 2 1	0( 2 2	023	0	028	029	0 3 3	0 3 4	0 3 6	0 3 7	0 4	0  4  3	0	T
WEEKS ON STUDY	1 0 4	1 0 4	104	1 0 4	1 0 4	1 0 4	1 0 4	104	1 0 4	104	104	104	104	1 0 4	104	104	1 0 4	1 0 4	1 0 4	104	104	104	104	1 0 4	104	TOTAL. TISSUES TUMORS
RESPIRATORY SYSTEM Lungs and bronchi Alveolar/bronchiolar adenoma Alveolar/bronchiolar carcinoma Osteosarcoma, metastatic	+	+	*	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+ x	+	+	+	+	+	50 2 1 1
Trachea	+	+	+	+	+	+	+	+	+	+	+	+	+	-	+	+	+	+	+	+	+	+	+	-	+	45
HEMATOPOIETIC SYSTEM Bone marrow Spleen	++	+	+	+	+	+	+	+	+	+	+	+	+	+	+	++	+++	+++	+	+++	++	++	+	+++	+	48 49
Malig. lymphoma, histiocytic type Lymph nodes	+	+	+	+	+	+	+	× +	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	1 49
Malignant lymphoma, NOS Thymus	+	+	-	+	+	+	+	+	+	+	+	+	+	+	+	+	+	-	+	+	+	+	+	+	+	30
CIRCULATORY SYSTEM Heart	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	49
DIGESTIVE SYSTEM Salivary gland Liver	+ +	++	+++	+++	++++	++++	+++	+++	+++	++++	+++	+++	++++	++++	++	+++	++++	+++	+++	+++	+++	+ +	+++	+ + X	 + +	50 50 2
Hepatocellular adenoma Hepatocellular carcinoma Valignant lymphoma, NOS Bile duct	+	+	+	+	+	+	+	+	+	X +	+	+	+	+	+	+	+	+	+	x +	+	+	+	•	+	1 1 50
Gallbladder & common bile duct Pancreas Esophagus	+++++	+++	+++	++++	N +	+++	++++	+++	+++	++++	++++	+++	+++	+ + +	+++	++++	+ + +	+ + +	+++	++++	+++	+++	+++	++++	++++	*50 48 49 49
Stomach Small intestine	+++	++++	++++	++++	+++++	++++	+ +	++++	+++	++++	+++++	+++++	++++	+++++++++++++++++++++++++++++++++++++++	++++	++++	+ + +	+++	+ + +	+ + +	++++	+++	+ + +	+++	+ + +	46
Adenoca in adenomatous polyp Large intestine	+	+	+	X +	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	-	+	+	+	+	-	1 45
CRINARY SYSTEM Kidnev Urinary bladder	++++	+++	++++	+++	+++	++++	+ +	++++	+++	+ +	+++	+++	+++	++	+++	++	+++	+++	+	++++	+++	+++	+++	+++	 + +	49 48
ENDOCRINE SYSTEM Pituitary Adenoma, NOS	+	+	-	+	+	*	+	+	+	+	+	+	+	, x	+	*	+	+	+	+	+	+	+	+	+	46 4
Adrenal Thyroid	+ +	+++	++	+ +	+ +	+ +	+ +	+ +	+ +	+ +	+ +	+ +	+ +	+ +	+ -	+ +	+ +	+ +	+ +	+ +	+ +	+ +	+ +	+ +	+ +	50 48
Follicular cell adenoma Parathyroid	+	-	х -	+	-	-	-	+	+	+	+	+	+	-	-	+	+	-	+	+	+	-	-	+	+	26
REPRODUCTIVE SYSTEM Mammary gland Adenocarcinoma, NOS	+	+	* x	N	N	*	+	+	+	+	+	+	+	+	N	+	+	+	+	+	+	+	+	+	+	*50
Uterus Adenocarcinoma, NOS	+	+	÷	+	+	÷	+	+	+	+	+	+	+	*	+	+	+	+	+	+	+	+	+	+	+	50 1
Endometrial stromal polyp Ovary Papillary cystadenoma, NOS	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	* X	+	<b>50</b> 1
NERVOUS SYSTEM Brain	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	50
SPECIAL SENSE ORGANS Harderian gland Adenocarcinoma, NOS	Ň	N	Ň	N	N X	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	*50 1
BODY CAVITIES Peritoneum Osteosarcoma	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 1
ALL OTHER SYSTEMS Multiple organs NOS Malignant lymphoma, NOS Malig. lymphoma, lymphocytic type	N	N	N	N	N X	N	N	N	N	N	N	N	N	N	N	N	N	N	N	И	N	N	N X	N	м	*50 2 2

* Animals Necropsied

ANIMAL Number	0 4 8	0 5 0	0 0 6	0 4 3	04	0 4 9	0 0 8	0 1 0	0  4  6	005	0 3 2	0 3 3	0 4 7	0 4 5	0 1 3	0 3 8	0 3 4	0 1 4	0 3 6	0 1 2	0 2 8	0 3 0	0 3 9	0 0 3	0 2 9
WEEKS ON STUDY	0 0 2	0 0 2	0 0 5	0 1 0	0 6 8	0 7 6	0 8 0	0 8 1	0 8 3	0 8 8	0  8  8	0 8 91	0 8 9	0 9 0	0 9 1	0 9 1	0 9 2	0 9 3	0) 9) 6)	0 9 7	0 9 8	0 9 8	0 9 8	0 9 9	1 0 3
INTEGUMENTARY SYSTEM Subcutaneous tissue Fibrosarcoma	+	N	м	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	* x	+	+	+	+ x
RESPIRATORY SYSTEM		4	<u></u>	<u> </u>	-	+	-		+		 							-	_	 	-				
Adenocarcinoma, NOS, metastatic Hepatocellular carcinoma, metastatic Alveolar/bronchiolar adenoma Alveolar/bronchiolar carcinoma Osteosarcoma, metastatic	Ť	A	.*1	Ţ	T	x	T	T	X X	Ŧ	*	x	x	x	X X	x	T	x	Ŧ	Ŧ	Ŧ	x	x	XX	x
Trachea	+	A	М	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	-	+	-	-	+	+	+
HEMATOPOIETIC SYSTEM Bone marrow Spieen Lymph nodes Thymus	++++++	A A A	M M M	-+-+	++++	+++-	+++ -	+++-	+++ -	+++-	+++-	++++	++++	++++	++++	++++	++++	+++ -	+++ -	+++-	+++ -	+++ -	+++-	+++-	++++
CIRCULATORY SYSTEM Heart	+	A	м	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+
DIGESTIVE SYSTEM Salivary gland Liver Hepatocellular adenoma Hepatocellular carcinoma Hemanguosarcoma	+ +	A	м м	+++	+++	++	+++	++	+ + x	+ + x	+++	++	++	+++	+ + x	++	+ * x	+	+ * X	+ + x	+++	++ x	+ + x	+++	+++
Bile duct Gallbladder & common bile duct Pancreas Esophagus Stomach Small intestine Large intestine	+ 7 + + + 1 1	A N A A A A A	N N N N N N N N N N N N N N N N N N N	++++++	+++++++	++++++	++++++	+7++++++	+ 7, + + + + + +	+++++++	+++++++	++++++	+++++++	++++++	+++++++	+++++	+++++++	+++++++	+++++++	:+++++++	+++++++	+++++++	+7.+++++	++++++	++++++
CRINARY SYSTEM Kidnev Papillary cystadenoma, NOS Urinary bladder	+	A A	м vi	+	++	+	+	++	+ +	+	+	++++	+	+	+++	+	+	++	++	+++	+++	+++	+	+++	 + +
ENDOCRINE SYSTEM Pituitary Adenoma, NOS Adrenai	 +	A A	M M	- +	-+	+	+	+	<del>-</del> +	+	+	+	+	+	+	+	+	+	+	+	++	++	++	+	 + +
Thyroid Foilicular cell adenoma Parathyroid	+	A A	M M	+	+	+ +	+ -	+	+ +	+	+++	+	- +	+ +	+ +	++	+	+	+ -	++++	+	+++	+++	+	++
REPRODUCTIVE SYSTEM Mammary gland Adenocarcinoma, NOS Uterus	+	N	M	+	+	+	+	N	N	N	* X	+	+	N	+	+	+	N	+	N	+		+	+	 +
Endometrial stromal polyp Malig lymphoma, histiocytic type Ovary Cystadenoma, NOS	+	A	M	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	-	x +	+	+	+	+
NERVOUS SYSTEM Brain	+	A	м	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	 +
MUSCULOSKELETAL SYSTEM Bone Osteosarcoma	N	N	м	N	N	*	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N
BODY CAVITIES Pleura Malignant lymphoma, NOS	N	N	м	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N X	 N
ALL OTHER SYSTEMS Multiple organs NOS Malig. lymphoma, histocytic type	N	N	М	N	N	N	N X	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N

### TABLE B4. INDIVIDUAL ANIMAL TUMOR PATHOLOGY OF FEMALE MICE IN THE TWO-YEAR INHALATION STUDY OF DICHLOROMETHANE: LOW DOSE

TABLE B4.	INDIVIDUAL ANIMAL	TUMOR PATHOLOGY	<b>OF FEMALE MICE:</b>	LOW DOSE
		(Continued)		

											• •															
ANIMAL NUMBER	0	0 0 2	004	0 0 7	0 9	0 1 1	0 1 5	0 1 6	0 1 7	018	0 1 9	0 2 0	0 2 1	0 2 2	0 2 3	0 2 4	0 2 5	026	0 2 7	0 3 1	0 3 5	0 3 7	0 4 0	0 4 2	0 4 4	TOTAL.
WEEKS ON STUDY	104	1 0 4	1 0 4	1 0 4	104	1 0 4	104	1 0 4	1 0 4	1 0	1 0 4	1 0 4	104	1 0 4	104	104	1 0 4	1 0 4	1 0 4	104	1 0 4	1 0 4	1 0 4	1 0 4	1 0 4	TISSUES TUMORS
INTEGU VENTARY SYSTEM Subcutaneous tissue Fibrosarcoma	N	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	*49 2
RESPIRATORY SYSTEM Lungs and bronchi Adenocarcinoma, NOS, metastatic Hepstoce/lular carcinoma, metastatic	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+ x	+	+	+	+	+	+	+	+	+	+ x	48 1 4
Alveolar/bronchiolar adenoma Alveolar/bronchiolar carcinoma Osteosarcoma, metastatic Trachea	X +	x +	х +	X +	X X -	x +	+	X +	+	х Х +	X X +	x +	х +	x +	-	X X +	+	х +	+	х +	х +	X X +	х +	x ≁	+	23 13 1 43
HEMATOPOIETIC SYSTEM Bone marrow Spleen Lymph nodes Thymus	+++++++++++++++++++++++++++++++++++++++	++++	++++	++++	+++++	+++	+++	++++	+++	++++	+++++	++++	++++	++++	+++++	++++	++++	++++	++++	++++	++++	++++	++++		+++++	47 48 47 20
CIRCULATORY SYSTEM	+	+	+	+	+	+	+			- +	+	+	+	+	+	+		+	+		+	 +	+	+	- +	48
DICESTIVE SYSTEM Salivary gland Liver	+	÷	++	++	++	+++	++	+++	+ + * x	+++	+++	+++	+	++++	-	++	++	+++	+++	+++	++	++++	+++	++	++	45 48
Hepatocellular adenoma Hepatocellular carcinoma Hemangiosarcoma Bile duct	+	+	+	+	x +	+	+	x +	x +	*x x +	+	+	+	+	x +	+	+	+	+	+	+	+	х +	X +	x +	6 11 2 48
Galibiadder & common bile duct Pancreas Esophagus Stomach	+++++++++++++++++++++++++++++++++++++++	++++	++++-	++++	++++	++++.	++++.	++++	++++	++++-	++++	++++	++++-	++++	++++	++++	++++	++++	++++	++++	++++	++++	++++	2++++	+++	*49 48 48 47
Small intestine Large intestine CRINARY SYSTEM		÷	+	++	÷	+	+	÷	÷	+	÷	÷	+	+	++	+	+	÷	++	+	+	+	++	+	++	47 46
Kidney Papillary cystadenoma, NOS Urinary bladder	+	+	+	++	+ +	+ +	+ +	+ +	+ +	+ x +	+ +	48 1 48														
ENDOCRINE SYSTEM Pituitary Adenoma, NOS Adrenai	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	-+	+	* *	* *	+	+	+	14 2 48
Thyroid Follicular cell adenoma Parathyroid	+++++++++++++++++++++++++++++++++++++++	+	+	+	+	+	+	+	+ -	++	+	÷ -	+	+	+	+	+	+	++	+ +	+ +	* -	++	+	+	47 1 25
REPRODUCTIVE SYSTEM Varmary gland Adenocarcinoma, NOS Uterus	+	+	++	+++	+	+++	+	+	+++	+	+	++	+++	+	+++	+++	+++	++	+++	+++	+++	* *	+++	N +	+++	*49 3 48
Endometrial stromal polyp Malig lymphoma, histiocytic type Ovary Cvstadenoma, NOS	+	+	+	+	+	+	+	÷	+	÷	+	÷	+	+	+	+	+	÷	÷	+	x * x	+	+	+	+	1 1 47 1
VERVOUS SYSTEM Brain	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	48
WCSCULOSKELETAL SYSTEM Bone Osteosarcoma	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	*49 1
BODY CAVITIES Pleura Malignant lymphoma, NOS	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	- И	*49 1
ALL OTHER SYSTEMS Multiple organs NOS Malig: lymphoma, hustocytic type Malignant lymphoma, mixed type Adipose tissue Hepstocellular carcinoma, metastatic	N	N	N	N	N X	N	N	N	N	N	N	N	N		N X	N	N	N	N		N X	N	N	N	N	*49 l 4 i
	L																								_	L

* Animals Necropsied

ANIMAL NUMBER	0 3 9	0 0 2	0 0 3	0 1 4	0 1 3	0 1 2	0 1 5	0	0 0 5	0 0 7	0  3  7	0 3 8	040	0 2 6	0 3 0	0 1 0	0 4 9	0 3 6	0 4 4	0 1 9	0 3 2	0 4 1	000	008	0 2 4
WEEKS ON STUDY	0 0 1	0 0 4	0 0 6	0 0 9	01 61 81	0 6 9	0  7  0	0 7 5	0 7 6	0 7 7	0  7  7	0 7 8	0 7 8	0 8 0	0 8 3	0  8  4	0 8 4	0 8 5	0 8 5	0 8 6	0 8 7	0 8 8	0  8  9	() 8 9	0 8 9
INTEGUMENTARY SYSTEM Subcutaneous tissue Fibrosarcoma	M	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+
RESPIRATORY SYSTEM Lungs and bronch: Hepatocellular carcinoma, metastatic Alveolar/bronchiolar adenoma Alveolar/bronchiolar carcinoma Trachea	M M	+	+	-	+ X X +	* *	+ X +	+	+ X X +	+ X +	+ X +	+	+ x +	+ X X +	+ x +	+ x +	+ X +	+ X +	+ X +	+ X X +	+ X +	+ X X +	+ X +	+ X X +	+ + +
HEMATOPOIETIC SYSTEM Bone marrow Spleen Hemangiosarcoma Malig. lymphoma, histiocytic type Lymph nodes Alveolar/bronchiolar ca, metastatic Thymus Hemangiosarcoma, metastatic	м м м м	+++++	- - + -	+	++ +x -	+++-	+ -	+++-	+++-	+++-	+++	++++-	++++-	++++-		++	++x + x + x	+++-	++ x+x+	++ + -	+ + -	+++-	++ + -	++++-	- ++ + - +
CIRCULATORY SYSTEM Heart Alveolar/bronchiolar ca, metastatic	м	+	+	+	+	+	+	+	+	+	+	+	+	*	+	+	+	+	*	+	+	+	+	+	-+
DIGESTIVE SYSTEM Salivary gland Liver Hepatocellular adenoma Hepatocellular carcinoma Alveolar/bronchiolar ca, metastatic Hepatoblastoma	M V	+++	+ -	+++	+ + X X	+ + x	+++	+ + X X	‡ x	+ * x	+ + x x	÷ x x	++++	+ * X	‡ x	+ + x	+ * X	++++	+ * X	+++	++++	+++	÷ x	+ + X X	- + + X
Hemangiosarcoma Hemangiosarcoma, metastatic Malignant lymphoma, NOS Bile duct Callbiadder & conimon bile duct Pancreas Esopharus Stomach Small intestine Large intestine	M M M M M	+ + + + + + +	1214111	+ - + +	++++++	++++++	+ + + + + + +	++++Z+	+++++	++++++	+ + + + + ;; + + + + ;; + + ;; + ; + ;	++++++	X+X++++++	+ + + + + + +	+ + + + + + +	+ + + + + + +	X +++++++	+ + + + + + +	++++++	X +++++++	++++++	+ + + + + + +	++++++	+ + + + + + +	+++++
CRINARY SYSTEM Kidney Malignant lymphoma, mixed type Urinary bladder	м м	+	-+	-	+++	+++	+	+++	+++	+++	+++	+	+++	+++	+++	+++	+	+++	+++	+++	++	+++	+++	+++	- + +
ENDOCRINE SYSTEM Pituitary Adenoma, NOS Adrenai Cortical adenoma Thyroid Follicular cell adenoma Purathyroid	M M M M	+ + + -	+ - -	- + -	+ + +	+ + +	+ + +	+ + + +	+ + + +	+++++	+x + +x -	+ + + + + + + +	+ + + +	+ + + +	+ + + +	+ + + +	++++-	- + +	+ + +	+ + + -	- + +	+ + +	- + +	+ + +	- + + + +
REPRODUCTIVE SYSTEM Mammary gland Uterus Leioinyosarcoma Ovary Terätoma, NOS	M M M	+++++	+ - + x	N - +	+++++	N + +	N + +	N + +	N + +	+ + + +	+++++	+ + +	N + +	N + -	+++++	+ + + +	N + +	N + +	+++++	N + +	++++	+ + +	+++++	+++++	+++++
NERVOUS SYSTEM Brain	м	+	-		+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	-   +   -
ALL OTHER SYSTEMS Multiple organs NOS Alveolar/bronchiolar ca, metastatic Malignant lymphoma, NOS Malig. lymphoma, his -vtic type	м	N	N	N	N	N	N X	N		N X	N	N	N	N	N	N	N	N	N		N X	N	N	N	И

TABLE B4. INDIVIDUAL ANIMAL TUMOR PATHOLOGY OF FEMALE MIC	E IN THE
TWO-YEAR INHALATION STUDY OF DICHLOROMETHANE: HIGH DO	)SE

### TABLE B4. INDIVIDUAL ANIMAL TUMOR PATHOLOGY OF FEMALE MICE: HIGH DOSE (Continued)

								กน	ine	ieu	,															
ANIMAL	T OF	0	0	ŏ	O	0	0	0	গ	0	0	0	0	0	0	0	0	Ю	0	0	O	0	Ø	or	0	T
NUMBER	2	4	45	2	4	3	4	4	1	2	2	2	1	1	3	3	5	0	0	1	2	28	2	3	4	i
	5	2	5	7	3	1	7	8	1	0	2	3	8	7	3	5	0	4	9	6	1	8	9	4	6	-
WEEKSON	or	01	- 01	N	a	- 71	- 07	a	01	a	al	a	0	11	11	11	11	11	11	11	-11	-11	-11	-17	-7	TOTAL. TISSUES
STUDY	8	8	8	ğ	9	ä	9	a	9	9	ä	9	9	0	ŏ.	ò	ò	0	ò	ò	0	ó	ö	ò	0	TUMORS
31001	8	ğ	9	ŏ	3	9 6	6	9 7	8	Ň.	9 8	8	9	ĭ	ĭ	ĭ	2	4	4	4	J.	4	4	4	4	10
		-,	1	- (	-1	-,	-1	.,	-,	-1	-1	~1	- •	-1	-1	-1	-,	-,	-1	-1	-1	-,	-1			
INTEGUMENTARY SYSTEM																										
Subcutaneous tissue	+ +	N	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	÷	+	+	*49
Fibrosarcoma																							Х			1
RESPIRATORY SYSTEM						_						_			_											
Lungs and bronchi	+	+	+	+	+	+	+	+	+	+	÷	+	+	+	+	+	+	÷	+	+	+	+	+	+	+	48
Hepatocellular carcinoma, metastatic	1			X												x	X									328
Aiveolar/bronchiolar adenoma	X	X	Х		X				х			X X	x	X X	X X		X	X			х	X	X X	X	х	28
Alveolar/bronchiolar carcinoma	Ι.	X			x		X			X	X	X		X.	X.	х +	X,	X	X.	X.		X	X	X		29 47
Trachea	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	-	+	+	+	+	41
HEMATOPOIETIC SYSTEM	<u> </u>	-								-																
Bone marrow	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	÷	+	+	+	+	+	+	45
Spleen	+	÷	÷	÷	÷	+	÷	÷	÷	+	+	+	+	÷	+	+	÷	÷	÷	+	+	÷	+	+	+	47
Hemangiosarcoma																										1
Malig lymphoma, histiocytic type	1																									1
Lymph nodes	+	+	+	+	+	-	+	+	+	+	+	÷	+	+	+	-	+	-	+	+	+	+	+	+	+	43
Alveolar/bronchiolar ca. metastatic																									,	29
Thymus Hemanglosarcuma metastatic	-	-	-	-	-	-	-	-	-	-	-	-	+	-	+	-	~	-	+	+	-	-	-	-	+	9
Hemangiosarcuma, metastatic																										1
CIRCULATORY SYSTEM																								_		<b></b>
Heart	+	+	+	÷	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	49
Alveolar/bronchiolar ca, metastatic																										2
OVCERTIFIC OVEREN				<i></i>				_																		<b></b>
DIGESTIVE SYSTEM Selivary giand													-								+				+	47
Liver	-	Ŧ	Ŧ	Ŧ	Ŧ	+	Ŧ	Ŧ	Ŧ	Ŧ	Ŧ	Ŧ	Ŧ	Ŧ	Ŧ	÷	÷	Ŧ	÷	Ŧ	÷	÷	Ŧ	÷	Ŧ	18
Hepatocellular adenoma		X				,	<b>*</b>	x.		Ť	Ý.	x.	+ x		· .	x :	+ X 1	x	x -	x.	x		·		x	48 22
Hepatocellular carcinoma	X	X	х	х	х	Х			х		X	X	х	х	X	X	X I	x	X		X	х	х	х	X	32
Alveolar/bronchiolar ca, metastatic										х																1
Hepatoblastoma																					х					1
Hemangiosarcoma																										1
Hemangiosarcuma metastatic																										
Malignant lymphoma NOS Bile duct	-		-	1	+		+	+		-		4	+		+	<b>.</b>			+	+			+		-	48
Gailbladder & common bile duct	Ň	÷	Ň	÷	Ň	Ň	Ŧ	+	÷	÷	Ŧ	÷	÷	÷	Ň.	Ň.	v.	÷	÷	÷	÷	Ň.	Ň	Ň	Ň	*49
Pancreas	+	+	÷	+	+	+	+	+	+	+	+	÷		÷			÷	+	÷	+	+	+	+	+	+	47
Esophagus	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	÷	+	+	49
Stoniach	+	÷	+	+	+	+	+	+	+	+	+	+							+	+	+	+	+	÷	+	48 47
Small intestine	+	+	+	+	+	+	+	+	+	+	+	+	+	+		+ -	+	+	+	+	+	+	٠	+	+	47
l'arge intestine	+	+	+	+	+	+	+	+	+	+_	.+_	+	+	+	+	+ ·	+	+	+	+	+	+	+	+	+	47
URINARY SYSTEM						-																				·
Kidney	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+ -	+	+	+	+	+	+	+	+	47
Malignant lymphoma, mixed type				X																					Ċ,	1
Urinary bladder	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+ ·	+	+	+	+	+	+	+	+	+	47
		_				_																			-	·
ENDOCRINE SYSTEM Pituitary	-	L.	*	÷	*			+	*	+	*		۰.			<u>ـ</u>	1	-		-	+	*	+	*	+	- 44
Adenoma, NOS	Ŧ	-	*	*	*	*	-	7	7	*	-	7	Ŧ	-	٣	÷ .	-	+	-	~	*	7	7	7	-	1
Adrenal	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+ -	+	+	+	+	+	+	+	+	+	48
Cortical adenoma				·						•				•			•	-	-		·	·			.	ĩ
Thyroid	+	+	+	+	+	+	+	+	+	+	+	+	-	+	+	+ •	+ -	+	+	+	÷	+	+	+	+	46
Follicular cell adenoma																2	۲.				х	х				4
Parathyroid	+	+	+	+	-	+	-	-	-	-	-	-	+	-	+	+ -		-	+	-	-	-	-	-	-	24
REPRODUCTIVE SYSTEM																				_					- !	
Mammary gland	N	N	+	+	÷	+	*	+	+	+	+	+	N			<b>.</b> .			+	+	+	N	+	+	+	*49
Lterus	+	4	÷	+	+	Ŧ	Ŧ	4	+	+	+	÷	-	÷	÷ .	÷ -	+	÷	+ +	+	Ŧ	÷	+	+	+	47
Leiomvosarcoma	•	,		ŕ	<i>′</i>				•	•	•	·			κ.				•	•	·	·	•	•	•	1
Ovary	+	+	+	-	+	+	+	-	-	+	+	+	+	+ '	÷ .		+ -	+	+	+	÷	+	-	+	+	43
Teratoma, NOS																									l	1
																									_	
VERVOUS SYSTEM																									. 1	47
Brain	+	+	+	+	*	+	+	+	+	+	+	+	+	+	* '	+ -	•	-	+	٣	+	÷	+	Ŧ	+	47
ALL OTHER SYSTEMS		_																							-	·····
11 1 100	M	N	N	N	N	N	N	N	N	N	N	N	N I	N 1	N 1	N 1	۲. P	м :	N I	N	N	N	N	N	N	*49
Multiple organs NOS	1.4																									
Alveolar/bronchiolar ca, metastatic	, <b>1</b> 4	•											v													1
Multiple organs NOS Alveolar/bronchiolar ca, metastatic Malignant lymphoma, NOS Malig lymphoma, histocytic type	.,	•											x		,	7										1 3

• Animals Necropsied

Dichloromethane, NTP TR 306

### **APPENDIX C**

### SUMMARY OF THE INCIDENCE OF NONNEOPLASTIC

### LESIONS IN RATS IN THE TWO-YEAR

### **INHALATION STUDIES**

**OF DICHLOROMETHANE** 

### TABLE C1. SUMMARY OF THE INCIDENCE OF NONNEOPLASTIC LESIONS IN MALE RATS IN THETWO-YEAR INHALATION STUDY OF DICHLOROMETHANE

CO	NTRO	L (CHAMB)	LO	W DOSE	MI	D DOSE	HIC	H DOSE
ANIMALS INITIALLY IN STUDY	50		50		50	·····	50	
ANIMALS NECROPSIED	50		50		50		50	
ANIMALS EXAMINED HISTOPATHOLOG	50		50		50		50	
NTEGUMENTARY SYSTEM	<u></u>						·····	
*Skin	(50)		(50)		(50)		(50)	
Epidermal inclusion cyst				(2%)				
Inflammation, suppurative	2	(4%)		(2%)				
Inflammation, chronic			2	(4%)				(0~)
Hyperkeratosis		(90)	•	(00)				(2%)
Acanthosis *Subcut tissue	(50)	(2%)		(6%)	(50)			(4%)
Inflammation, suppurative	(50)		(50)		(00)		(50)	(2%)
Inflammation granulomatous focal			1	(2%)			-	(2,10)
RESPIRATORY SYSTEM								
*Nasal cavity	(50)		(50)		(50)		(50)	
Foreign body, NOS	3	(6%)		(12%)				(4%)
Hemorrhage				(4%)				(2%)
Inflammation, suppurative		(16%)		(20%)	6	(12%)	14	(28%)
Inflammation, chronic focal	1	(2%)		(2%)				
Infection, bacterial				(2%)				
Hyperplasia, epithelial		( <b>a</b> )		(10%)		(6%)	3	(6%)
Metaplasia, squamous		(8%)	-	(10%)	-	(6%)	-	(6%)
*Larynx	(50)		(50)	(90)	(50)		(50)	(60)
Foreign body, NOS Hemorrhage			1	(2%)				(6%) (2%)
Inflammation, focal	1	(2%)					1	(270)
Inflammation, suppurative		(10%)	6	(12%)	3	(6%)	6	(12%)
Inflammation, chronic focal	•	(10,0)		(2%)	v	(0,0)	v	(12/0)
Infection, bacterial				(2%)				
Hyperplasia, epithelial			-	()			1	(2%)
#Trachea	(50)		(48)		(50)		(47)	
Foreign body, NOS							1	(2%)
Inflammation, suppurative	1	(2%)	1	(2%)			2	(4%)
Infection, bacterial				(2%)				
Hyperplasia, epithelial				(2%)				
Dysplasia, epithelial				(2%)			· • ·	
#Lung/bronchiole	(50)		(49)		(50)	(0~)	(50)	
Hyperplasia, epithelial #Lung	(50)		(49)		1 (50)	(2%)	(50)	
Foreign body, NOS		(2%)	(47)		(90)			(2%)
Congestion, NOS	1							(2%)
Edema, NOS	2	(4%)						(2%)
Bronchopneumonia, NOS	-	,						(2%)
Pneumonia, aspiration								(2%)
Inflammation, granulomatous focal	1	(2%)						
Proteinosis, alveolar								(2%)
Alveolar macrophages	11	(22%)		(24%)		(20%)		(8%)
Hyperplasia, alveolar epithelium	( <b>F</b> - 1			(10%)		(2%)		(4%)
#Lung/alveoli	(50)	(	(49)	(100)	(50)	(90)	(50)	(1.40)
Hemorrhage Inflammation, interstitial	Z	(4%)	Э	(10%)		(2%) (2%)		(14%) (2%)
Inflammation, Interstitian Inflammation, suppurative			9	(4%)		(2%) (6%)		(2%) (6%)
Fibrosis, focal	2	(4%)	4			(2%)		(2%)
Fibrosis, multifocal		(4%)	3	(6%)		(2%)		(2%)
Fibrosis, diffuse		(2%)	J			(2%)	-	
Necrosis, focal	-					(2%)	1	(2%)
Metaplasia, osseous			1	(2%)	-		-	-

	CONTRO	L (CHAMB)	LO	W DOSE	MI	D DOSE	HIGH DOS		
HEMATOPOIETIC SYSTEM			<u></u>			<u></u>			
#Bone marrow	(50)		(49)		(49)		(49)		
Atrophy, NOS		(2%)		(4%)		(2%)		(4%)	
#Spleen	(50)		(49)	(,	(50)	(,	(50)		
Hemorrhage		(2%)	(,		(00)		(00)		
Fibrosis, focal	- 1		5	(10%)	10	(20%)	7	(14%)	
Fibrosis, multifocal	•	(2,0)	v	(10,2)		(2%)	•	(11,0)	
Fibrosis, diffuse	1	(2%)	1	(2%)	-	(2,0)	1	(2%)	
Necrosis, focal	-	(4%)		(2%)	3	(6%)		(4%)	
Necrosis, diffuse		(2%)	-		v	(0,2)	-	(1,0)	
Hemosiderosis	•	(2.0)	1	(2%)					
	1	(90)	1	(470)					
Hyperplasia, lymphoid		(2%)	(40)		(20)		(50)		
#Splenic capsule	(50)		(49)	(0~)	(50)		(50)		
Cyst, NOS				(2%)					
#Mandibular I. node	(50)		(48)		(50)		(50)		
Inflammation, suppurative	1	(2%)							
Necrosis, focal	1	(2%)							
Hyperplasia, lymphoid							1	(2%)	
#Bronchial lymph node	(50)		(48)		(50)		(50)		
Hyperplasia, lymphoid		(2%)	,						
IRCULATORY SYSTEM									
*Multiple organs	(50)		(50)		(50)		(50)		
Periarteritis				(2%)					
*Mediastinum	(50)		(50)		(50)		(50)		
Periarteritis	(00)		(00)		(00)			(2%)	
#Heart	(50)		(50)		(50)		(50)	(2,0)	
Mineralization	(00)		(00)		(00)		• •	(90)	
	(50)		(50)		(50)			(2%)	
#Heart/atrium	(50)	( <b>1</b> m)	(50)		(50)		(50)		
Thrombosis, NOS	2	(4%)	1	(2%)		(4%)		(8%)	
Fibrosis, focal					1	(2%)	1	(2%)	
#Heart/ventricle	(50)		(50)		(50)		(50)		
Dilatation, NOS					1	(2%)			
#Myocardium	(50)		(50)		(50)		(50)		
Mineralization							1	(2%)	
Hemorrhage	1	(2%)							
Inflammation, chronic focal		(2%)	1	(2%)	1	(2%)			
Fibrosis, focal	•	<u></u>		(12%)		(6%)	1	(2%)	
Fibrosis, nultifocal				(2%)	-	(2%)	1		
	~	(1901)						(270) (24%)	
Fibrosis, diffuse	6	(12%)	4	(8%)	1	(2%)	14	(4470)	
Necrosis, focal	1	(2%)						(00)	
Calcification, focal			/ <b>m</b> = -					(2%)	
#Cardiac valve	(50)	(4.0-4)	(50)		(50)		(50)		
Metaplasia, cartilaginous	8	(16%)		(24%)		(20%)		(16%)	
*Aorta	(50)		(50)		(50)		(50)		
Mineralization		(2%)							
*Coronary artery	(50)		(50)		(50)		(50)		
Thrombosis, NOS	1	(2%)							
*Pulmonary artery	(50)		(50)		(50)		(50)		
Mineralization				(2%)		(2%)		(4%)	
Calcification, focal			-		-			(2%)	
*Sup. panc-duod. artery	(50)		(50)		(50)		(50)	(=)	
Inflammation, suppurative		(2%)	(00)		(00)		(00)		
		(270)	(		(		150		
#Liver	(50)	(07)	(49)		(50)		(50)		
Thrombosis, NOS		(2%)		(2%)					
#Pancreas	(48)		(46)		(48)		(48)		
Periarteritis		(2%)	2	(4%)					
#Testis	(50)		(49)		(50)		(50)		
Periarteritis				(6%)		(2%)		(2%)	

## TABLE C1. SUMMARY OF THE INCIDENCE OF NONNEOPLASTIC LESIONS IN MALE RATS IN THE TWO-YEAR INHALATION STUDY OF DICHLOROMETHANE (Continued)

### TABLE C1. SUMMARY OF THE INCIDENCE OF NONNEOPLASTIC LESIONS IN MALE RATS IN THE TWO-YEAR INHALATION STUDY OF DICHLOROMETHANE (Continued)

	CONTRO	L (CHAMB)	LO	W DOSE	MI	D DOSE	HIC	GH DOSE
GESTIVE SYSTEM								
*Hard palate	(50)		(50)		(50)		(50)	
Acanthosis							1	(2%)
*Soft palate	(50)		(50)		(50)		(50)	
Inflammation, suppurative					1	(2%)		
*Tooth	(50)		(50)		(50)		(50)	
Malocclusion								(2%)
#Salivary gland	(49)		(47)		(47)		(49)	
Inflammation, chronic							1	(2%)
Inflammation, chronic focal	1	(2%)			1	(2%)		
Inflammation, chronic diffuse			1	(2%)				
#Liver	(50)		(49)		(50)		(50)	
Hemorrhage							1	(2%)
Inflammation, granulomatous							3	(6%)
Inflammation granulomatous focal	1	(2%)	7	(14%)	2	(4%)	2	(4%)
Inflammation, pyogranulomatous			1	(2%)			1	(2%)
Pigmentation, NOS					2	(4%)		
Hemosiderosis	8	(16%)	29	(59%)	37	(74%)	42	(84%)
Hepatocytomegaly	2	(4%)	10	(20%)	6	(12%)	5	(10%)
Angiectasis	1	(2%)	5	(10%)	2	(4%)	1	(2%)
#Liver/hepatocytes	(50)		(49)		(50)		(50)	
Necrosis, focal	7	(14%)		(47%)	6	(12%)	16	(32%)
Cytoplasmic vacuolization	8	(16%)	26	(53%)	22	(44%)	25	(50%)
Basophilic cyto change	15	(30%)	22	(45%)	13	(26%)	6	(12%)
Eosinophilic cyto change	1	(2%)					1	(2%)
#Bile duct	(50)		(49)		(50)		(50)	
Inflammation, suppurative					1	(2%)		
Inflammation granulomatous focal					1	(2%)		
Fibrosis		(16%)	10	(20%)	17	(34%)	23	(46%)
Hyperplasia, NOS	42	(84%)	37	(76%)	41	(82%)	33	(66%)
#Pancreas	(48)		(46)		(48)		(48)	
Inflammation, suppurative					1	(2%)		
Inflammation, chronic focal			1	(2%)				
#Pancreatic acinus	(48)		(46)		(48)		(48)	
Basophilic cyto change							1	(2%)
Atrophy, focal	11	(23%)	15	(33%)	17	(35%)	10	(21%)
Atrophy, diffuse			1	(2%)	3	(6%)	1	(2%)
*Pharyngeal mucosa	(50)		(50)		(50)		(50)	
Acanthosis							1	(2%)
#Glandular stomach	(50)		(49)		(50)		(50)	
Mineralization	1	(2%)					2	(4%)
Inflammation, acute			1	(2%)				
#Forestomach	(50)		(49)	-	(50)		(50)	
Hernia, NOS	1	(2%)						
Ulcer, NOS				(6%)				
Inflammation, focal				(2%)				
Inflammation, acute	1	(2%)		(4%)	1	(2%)	2	(4%)
Hyperkeratosis			1	(2%)				
Acanthosis	2	(4%)				(4%)		(4%)
#Ileum	(49)		(47)		(49)		(50)	
Meckel's diverticulum	1	(2%)						
#Colon	(49)		(47)		(50)		(46)	
Parasitism		(18%)		(32%)		(22%)		(20%)
*Rectum	(50)		(50)		(50)		(50)	
Prolapse						(2%)		
Parasitism	2	(4%)			5	(10%)	1	(2%)

CON		L (CHAMB)	LO	W DOSE	MID DOSE		HIGH DOS		
URINARY SYSTEM				<u>.</u>					
#Kidney	(50)		(50)		(50)		(50)		
Nephropathy		(94%)		(94%)		(96%)		(90%)	
#Kidney/cortex	(50)		(50)		(50)		(50)		
Mineralization								(6%)	
Inflammation, suppurative			1	(2%)					
Infarct, focal			_	(,	1	(2%)			
#Kidney/tubule	(50)		(50)		(50)	(	(50)		
Degeneration, NOS		(22%)		(26%)		(46%)		(20%)	
#Kidney/pelvis	(50)	(==:;;	(50)	(=+,	(50)	(	(50)	(	
Mineralization	(00)			(2%)	(00)		(00)		
Inflammation, suppurative				(2%)					
Hyperplasia, epithelial				(2%)					
#Urinary bladder	(50)		(47)	(2,2)	(50)		(48)		
Calculus, unkn gross or micro	(00)		(*)			(2%)	(40)		
Hemorrhage						(2%)			
Inflammation, suppurative					1	(2%)			
Hyperplasia, epithelial			1	(2%)		(4%)	9	(4%)	
#U. bladder/submucosa	(50)		(47)		(50)	(=//)	(48)	(****)	
Hemorrhage		(2%)	()		(00)		(10)		
NDOCRINE SYSTEM	<u></u>			·····					
#Anterior pituitary	(50)		(47)		(49)		(49)		
Cyst, NOS		(8%)		(4%)		(4%)	(		
Hemorrhage		(2%)	1		2	(4%)			
Necrosis, focal	-	(2,2)	•	(2,0)	-	(1,0)	1	(2%)	
Hyperplasia, NOS	7	(14%)	2	(4%)	3	(6%)		(14%)	
#Adrenal	(50)	(14,0)	(50)	(1.0)	(50)	(0,0)	(50)	(11,0)	
Atrophy, NOS	(00)		(00)		(00)			(2%)	
#Adrenal cortex	(50)		(50)		(50)		(50)	(2,0)	
Cyst, NOS	(00)			(2%)	(007		(00)		
Cytoplasmic vacuolization	7	(14%)		(34%)	6	(12%)	11	(22%)	
Cytomegaly	•	(14,0)		(2%)	v	(12,0)			
Hyperplasia, focal				(2%)					
	(50)			(2%)	(50)		(50)		
#Adrenal medulla	(50)		(50)	(00)	(50)		(50)		
Cyst, NOS			1	(2%)		(00)			
Hemorrhage	•	(0.01)		(0~)	1			(00)	
Hyperplasia, NOS		(6%)		(2%)		(6%)		(2%)	
Hyperplasia, focal		(12%)		(32%)		(22%)		(18%)	
#Thyroid	(49)		(48)		(49)		(50)		
Ultimobranchial cyst				(97)				(2%)	
Cystic follicles		(100)		(2%)	•	(100)		(4%)	
Hyperplasia, C-cell		(10%)		(8%)		(16%)		(18%)	
#Parathyroid	(2 <b>9</b> )		(35)	(170)	(30)	(70)	(32)	(1901)	
Hyperplasia, NOS	(40)			(17%)		(7%)		(13%)	
#Pancreatic islets	(48)	(90)	(46)		(48)	(10)	(48)	(90)	
Hyperplasia, NOS	1	(2%)				(4%)		(2%)	
REPRODUCTIVE SYSTEM									
*Mammary gland	(50)		(50)		(50)	(00)	(50)		
Galactocele						(2%)			
*Preputial gland	(50)	(***	(50)		(50)	(	(50)		
Cyst, NOS		(2%)		(4%)		(2%)		(2%)	
Inflammation, suppurative		(12%)		(16%)	11	(22%)		(18%)	
Inflammation, chronic		(2%)	1	(2%)			1	(2%)	
Inflammation, chronic suppurative		(2%)							
Hyperplasia, epithelial		(4%)				(2%)	1	(2%)	
Hyperkeratosis	1	(2%)				(2%)			
Acanthosis					1	(2%)	1	(2%)	
Metaplasia, squamous		(2%)							

## TABLE C1. SUMMARY OF THE INCIDENCE OF NONNEOPLASTIC LESIONS IN MALE RATS IN THE TWO-YEAR INHALATION STUDY OF DICHLOROMETHANE (Continued)

### TABLE C1. SUMMARY OF THE INCIDENCE OF NONNEOPLASTIC LESIONS IN MALE RATS IN THETWO-YEAR INHALATION STUDY OF DICHLOROMETHANE (Continued)

	CONTRO	L (CHAMB)	LO	W DOSE	MI	D DOSE	HIG	H DOSE
REPRODUCTIVE SYSTEM (Continued)								
#Prostate	(44)		(42)		(46)		(45)	
Inflammation, suppurative	1	(2%)	, ,	(10%)		(22%)	• •	(11%)
Inflammation, chronic		(2%)	-	(		(,	•	()
Hyperplasia, epithelial	-	(2,0)	1	(2%)	1	(2%)	1	(2%)
*Seminal vesicle	(50)		(50)	(=,	(50)	(=)	(50)	•
Inflammation, suppurative		(42%)		(44%)	• •	(16%)		(40%)
Inflammation, chronic		(		(		(2%)		(10.0)
Hyperplasia, epithelial	2	(4%)	1	(2%)	-	(=)	1	(2%)
#Testis	(50)	(,	(49)	(_ / / /	(50)		(50)	()
Hemorrhage			,					(2%)
Necrosis, focal								(2%)
Atrophy, NOS	31	(62%)	31	(63%)	31	(62%)		(76%)
Hyperplasia, interstitial cell		(8%)		(6%)	2	(4%)		(4%)
*Epididymis	(50)	. =	(50)		(50)		(50)	
Inflammation, granulomatous focal			,	(2%)				
NERVOUS SYSTEM								
#Brain/meninges	(50)		(50)		(50)		(49)	
Fibrosis	(00)			(2%)	(00)		(40)	
#Cerebrum	(50)		(50)	(1,0)	(50)		(49)	
Hemorrhage		(2%)	(00)		(00)			(2%)
Malacia	1	(2,0)						(2%)
Atrophy, pressure								(2%)
#Brain	(50)		(50)		(50)		(49)	(2,0)
Hemorrhage		(10%)		(14%)		(6%)		(10%)
Atrophy, pressure	-	(4%)		(4%)		(4%)	v	(10,0)
#Medulla oblongata	(50)	(4/0)	(50)	(4,0)	(50)	(4,0)	(49)	
Hemorrhage		(2%)	(00)		(00)			(2%)
		(270)					1	(270)
SPECIAL SENSE ORGANS								
*Eye/anterior chamber	(50)		(50)		(50)		(50)	
Inflammation, suppurative		(2%)						
*Eye/cornea	(50)		(50)		(50)		(50)	
Inflammation, suppurative		(2%)						
*Eye/lacrimal gland	(50)		(50)		(50)		(50)	
Inflammation, chronic focal		(2%)		(2%)		(2%)		
*Nasolacrimal duct	(50)	(100)	(50)	(0~)	(50)	(100)	(50)	
Inflammation, suppurative	6	(12%)	3	(6%)		(16%)		(4%)
Acanthosis	. – .					(2%)	1	(2%)
*Zymbal gland	(50)		(50)	(0~)	(50)		(50)	
Metaplasia, squamous			1	(2%)				
MUSCULOSKELETAL SYSTEM								
*Bone	(50)		(50)		(50)		(50)	
Pathologic fracture								(2%)
Healed fracture								(2%)
*Skull	(50)		(50)		(50)		(50)	
Osteoporosis				(2%)				
*Maxilla	(50)		(50)		(50)		(50)	
Hyperplasia, focal								(2%)
*Sternum	(50)		(50)		(50)		(50)	
Hyperplasia, focal			1	(2%)				

### TABLE C1. SUMMARY OF THE INCIDENCE OF NONNEOPLASTIC LESIONS IN MALE RATS IN THE<br/>TWO-YEAR INHALATION STUDY OF DICHLOROMETHANE (Continued)

	CONTRO	L (CHAMB)	LO	W DOSE	MID DOSE	HIGH DOSE
BODY CAVITIES					7,4 ° <u>1999 - 7 ° 1997 - 7 ° 1997 - 7 ° 1997 - 7 ° 1997 - 7 ° 1997 - 7 ° 1997 - 7 ° 1997 - 7 ° 1997 - 7 ° 1997 - 7 ° 1997 - 7 ° 1997 - 7 ° 1997 - 7 ° 1997 - 7 ° 1997 - 7 ° 1997 - 7 ° 1997 - 7 ° 1997 - 7 ° 1997 - 7 ° 1997 - 7 ° 1997 - 7 ° 1997 - 7 ° 1997 - 7 ° 1997 - 7 ° 1997 - 7 ° 1997 - 7 ° 1997 - 7 ° 1997 - 7 ° 1997 - 7 ° 1997 - 7 ° 1997 - 7 ° 1997 - 7 ° 1997 - 7 ° 1997 - 7 ° 1997 - 7 ° 1997 - 7 ° 1997 - 7 ° 1997 - 7 ° 1997 - 7 ° 1997 - 7 ° 1997 - 7 ° 1997 - 7 ° 1997 - 7 ° 1997 - 7 ° 1997 - 7 ° 1997 - 7 ° 1997 - 7 ° 1997 - 7 ° 1997 - 7 ° 1997 - 7 ° 1997 - 7 ° 1997 - 7 ° 1997 - 7 ° 1997 - 7 ° 1997 - 7 ° 1997 - 7 ° 1997 - 7 ° 1997 - 7 ° 1997 - 7 ° 1997 - 7 ° 1997 - 7 ° 1997 - 7 ° 1997 - 7 ° 1997 - 7 ° 1997 - 7 ° 1997 - 7 ° 1997 - 7 ° 1997 - 7 ° 1997 - 7 ° 1997 - 7 ° 1997 - 7 ° 1997 - 7 ° 1997 - 7 ° 1997 - 7 ° 1997 - 7 ° 1997 - 7 ° 1997 - 7 ° 1997 - 7 ° 1997 - 7 ° 1997 - 7 ° 1997 - 7 ° 1997 - 7 ° 1997 - 7 ° 1997 - 7 ° 1997 - 7 ° 1997 - 7 ° 1997 - 7 ° 1997 - 7 ° 1997 - 7 ° 1997 - 7 ° 1997 - 7 ° 1997 - 7 ° 1997 - 7 ° 1997 - 7 ° 1997 - 7 ° 1997 - 7 ° 1997 - 7 ° 1997 - 7 ° 1997 - 7 ° 1997 - 7 ° 1997 - 7 ° 1997 - 7 ° 1997 - 7 ° 1997 - 7 ° 1997 - 7 ° 1997 - 7 ° 1997 - 7 ° 1997 - 7 ° 1997 - 7 ° 1997 - 7 ° 1997 - 7 ° 1997 - 7 ° 1997 - 7 ° 1997 - 7 ° 1997 - 7 ° 1997 - 7 ° 1997 - 7 ° 1997 - 7 ° 1997 - 7 ° 1997 - 7 ° 1997 - 7 ° 1997 - 7 ° 1997 - 7 ° 1997 - 7 ° 1997 - 7 ° 1997 - 7 ° 1997 - 7 ° 1997 - 7 ° 1997 - 7 ° 1997 - 7 ° 1997 - 7 ° 1997 - 7 ° 1997 - 7 ° 1997 - 7 ° 1997 - 7 ° 1997 - 7 ° 1997 - 7 ° 1997 - 7 ° 1997 - 7 ° 1997 - 7 ° 1997 - 7 ° 1997 - 7 ° 1997 - 7 ° 1997 - 7 ° 1997 - 7 ° 1997 - 7 ° 1997 - 7 ° 1997 - 7 ° 1997 - 7 ° 1997 - 7 ° 1997 - 7 ° 1997 - 7 ° 1997 - 7 ° 1997 - 7 ° 1997 - 7 ° 1997 - 7 ° 1997 - 7 ° 1997 - 7 ° 1997 - 7 ° 1997 - 7 ° 1997 - 7 ° 1997 - 7 ° 1997 - 7 ° 1997 - 7 ° 1997 - 7 ° 1997 - 7 ° 1997 - 7 ° 1997 - 7 ° 1997 - 7 ° 1997 - 7 ° 1997 - 7 ° 1997 - 7 ° 1997 - 7 ° 1997 - 7 ° 1997 - 7 ° 1997 - 7 ° 1997 - 7 ° 1997 - 7 ° 1997 - 7 ° 1997 - 7 ° 1997 - 7 ° 1997 - 7 ° 1997 - 7 ° 1997 - 7 ° 1997 - 7 ° 1997</u>	
*Peritoneum	(50)		(50)		(50)	(50)
Inflammation, chronic focal	1	(2%)				
Necrosis, fat	1	(2%)				
*Pleura	(50)		(50)		(50)	(50)
Fibrosis, multifocal					1 (2%)	
*Mesentery	(50)		(50)		(50)	(50)
Ectopia			1	(2%)		
Inflammation, chronic focal					1 (2%)	
*Tunica vaginalis	(50)		(50)		(50)	(50)
Hyperplasia, mesothelial			1	(2%)		
ALL OTHER SYSTEMS						
*Multiple organs	(50)		(50)		(50)	(50)
Mineralization			4	(8%)		
Inflammation, suppurative			3	(6%)		1 (2%)

SPECIAL MORPHOLOGY SUMMARY None

# Number of animals with tissue examined microscopically* Number of animals necropsied

### TABLE C2. SUMMARY OF THE INCIDENCE OF NONNEOPLASTIC LESIONS IN FEMALE RATS IN<br/>THE TWO-YEAR INHALATION STUDY OF DICHLOROMETHANE

C	ONTRO	L (CHAMB)	LO	W DOSE	MI	D DOSE	HIG	H DOSE
ANIMALS INITIALLY IN STUDY	50		50	·····				
ANIMALS NECROPSIED	50		50		50		50	
ANIMALS EXAMINED HISTOPATHOLO	G 50		50		50		50	
NTEGUMENTARY SYSTEM								
*Skin	(50)		(50)		(50)		(50)	
Hyperkeratosis		(2%)						(0~)
Acanthosis	1	(2%)					1	(2%)
ESPIRATORY SYSTEM								
*Nasal cavity	(50)		(50)		(50)		(50)	
Foreign body, NOS	3	(6%)	3	(6%)		(4%)	1	(2%)
Hemorrhage	-	(100)			1			(0
Inflammation, suppurative	5	(10%)	3	(6%)	11	(22%)		(8%) (4%)
Inflammation, chronic focal Hyperplasia, epithelial	1	(2%)	1	(2%)	2	(4%)	Z	(4%)
Hyperplasia, epithenal Hyperplasia, focal		(2%)	1	(470)	4			
Metaplasia, squamous		(2%)	2	(4%)	3	(6%)	9	(18%)
*Larynx	(50)	/	(50)		(50)	,	(50)	
Foreign body, NOS		(2%)			/			(8%)
Inflammation, suppurative	1	(2%)	4	(8%)	5	(10%)	7	(14%)
Inflammation, chronic focal	-	(4%)	4	(8%)	4	(8%)	1	(2%)
Hyperplasia, epithelial	1	(2%)						
Acanthosis					1	(2%)	1	(2%)
Metaplasia, squamous		(2%)						
#Trachea	(50)		(48)	(90)	(49)		(46)	
Inflammation, suppurative Inflammation, chronic				(2%) (2%)				
Hyperplasia, epithelial				(4%)				
#Lung/bronchiole	(50)		(50)	(4,20)	(50)		(50)	
Foreign body, NOS	(00)		(,			(2%)	()	
#Lung	(50)		(50)		(50)		(50)	
Foreign body, NOS					1	(2%)		
Hemorrhage	1	(2%)					1	(2%)
Bronchopneumonia, focal							1	<b>x</b> =,
Pneumonia, aspiration							1	(2%)
Inflammation, granulomatous		( <b>*</b> • • •			2	(4%)		
Granuloma, NOS	1							
Inflammation, granulomatous focal		(4%)						
Granuloma, foreign body Alveolar macrophages		(2%) (18%)	13	(26%)	10	(20%)	11	(22%)
Hyperplasia, alveolar epithelium		(13%)		(20%)		(20%)		(4%)
#Lung/alveoli	(50)	,	(50)	,	(50)	,	(50)	/
Mineralization	1	(2%)						
Congestion, NOS				(2%)				
Edema, NOS				(2%)				
Hemorrhage		(4%)		(12%)		(8%)	1	(2%)
Inflammation, interstitial	1	(2%)		(4%)	1	(2%)		(00)
Inflammation, suppurative		(901)	2	(4%)			1	(2%)
Granuloma, NOS Fibrosis, focal		(2%) (2%)	1	(2%)	1	(2%)	1	(2%)
Fibrosis, nultifocal		(2%) (2%)		(4%)		(6%)	I	(20)
Necrosis, focal		(2%)	2	(=/V)	0			
IEMATOPOIETIC SYSTEM								
#Bone marrow	(50)		(50)		(48)		(46)	
Fibrosis, multifocal			,		1	(2%)		(2%)
Fibrosis, diffuse	1	(2%)			1	(2%)		
Atrophy, NOS			~	(4%)				(2%)

	CONTRO	L (CHAMB)	LO	W DOSE	MI	D DOSE	HIC	GH DOSE
EMATOPOIETIC SYSTEM (Continued		<u> </u>	····					<u> </u>
#Spleen	., (50)		(50)		(50)		(49)	
Hemorrhage	(00)		(,		(00)			(2%)
Inflammation, granulomatous			1	(2%)			-	
Fibrosis, focal				(2%)	4	(8%)	4	. (8%)
Fibrosis, multifocal				(2%)		(2)>		()
Angiectasis					1	(2%)		
Hyperplasia, reticulum cell					1	(2%)		
Hyperplasia, lymphoid			1	(2%)				
Hematopoiesis	3	(6%)	2	(4%)	1	(2%)		
#Mandibular 1. node	(49)		(49)		(50)		(50)	
Cyst. NOS	()			(2%)			(	
#Bronchial lymph node	(49)		(49)	(=)	(50)		(50)	
Hemorrhage		(4%)		(2%)	(			(2%)
#Pancreatic l. node	(49)		(49)	(2.0)	(50)		(50)	•
Hemorrhage	(-•)					(2%)	(00)	
#Renal lymph node	(49)		(49)		(50)	()	(50)	
Fibrosis	(-•)			(2%)	()		(00)	
Pigmentation, NOS				(2%)				
#Liver	(50)		(50)	,	(50)		(50)	
Hematopoiesis	,	(4%)		(2%)	(00)		(00)	
#Thymus	(31)		(39)		(34)		(31)	
Cyst, NOS	(01)			(3%)	• •	(3%)	(01)	
								_ <u></u>
IRCULATORY SYSTEM	(50)		(20)		(50)		(50)	
*Multiple organs	(50)		(50)	(0~)	(50)		(50)	
Periarteritis	(7.0)			(2%)	(50)		(20)	
*Nasal cavity	(50)		(50)		(50)		(50)	
Thrombosis, NOS				(6%)				
#Heart/atrium	(50)		(50)		(48)		(50)	
Thrombosis, NOS	2	(4%)	1	(2%)		(6%)	5	(10%)
Hemorrhage					1	(2%)		
Inflammation, suppurative						(2%)		
#Myocardium	(50)		(50)		(48)		(50)	
Fibrosis, focal			2	(4%)	1	(2%)		
Fibrosis, multifocal					1	(2%)		
Fibrosis, diffuse	2	(4%)	1	(2%)	1	(2%)	2	(4%)
#Endocardium	(50)	• •	(50)		(48)		(50)	
Fibrosis, focal						(2%)		
#Cardiac valve	(50)		(50)		(48)	()	(50)	
Metaplasia, cartilaginous	< <i>i</i>	(32%)		(18%)		(17%)	• •	(18%)
*Pulmonary artery	(50)		(50)	,	(50)	()	(50)	/*/
Mineralization	()		()					(2%)
Hyperplasia, focal					1	(2%)	•	\ <u>-</u> /
#Liver	(50)		(50)		(50)		(50)	
Thrombosis, NOS	(00)		<b>x</b>	(6%)	(40)		,	
IGESTIVE SYSTEM	· <u>····</u>					· <u> </u>		
*Tongue	(50)		(50)		(50)		(50)	
Acanthosis	(00)		(00)			(2%)	(00)	
#Salivary gland	(49)		(49)			(470)	(49)	
		(90)		(97)	(50)	(99)	(49)	
Inflammation, chronic		(2%)		(2%)		(2%)	(FA)	
#Liver	(50)		(50)		(50)		(50)	(00)
Inflammation, chronic diffuse			~	(4.77)		(0~)		(2%)
Inflammation, granulomatous		100 %		(4%)		(2%)		(4%)
Inflammation, granulomatous focal		(28%)	30	(60%)	20	(40%)	22	(44%)
Inflammation, pyogranulomatous		(2%)	~~					(0.0.e.)
Hemosiderosis		(38%)		(58%)		(76%)		(90%)
			10	(1000/)	10	(900)	۲ (r	(100)
Hepatocytomegaly Angiectasis	3	(6%)		(20%) (2%)		(36%) (2%)	5	(10%)

## TABLE C2. SUMMARY OF THE INCIDENCE OF NONNEOPLASTIC LESIONS IN FEMALE RATS IN THE TWO-YEAR INHALATION STUDY OF DICHLOROMETHANE (Continued)

### TABLE C2. SUMMARY OF THE INCIDENCE OF NONNEOPLASTIC LESIONS IN FEMALE RATS IN THE TWO-YEAR INHALATION STUDY OF DICHLOROMETHANE (Continued)

	CONTRO	L (CHAMB)	LO	W DOSE	MI	D DOSE	HIG	H DOSI
DIGESTIVE SYSTEM (Continued)						<u></u>		
#Hepatic capsule	(50)		(50)		(50)		(50)	
Fibrosis, focal			2	(4%)	1	(2%)		
#Liver/hepatocytes	(50)		(50)		(50)		(50)	
Necrosis, NOS					1	(2%)		
Necrosis, focal	2	(4%)	32	(64%)	19	(38%)	9	(18%)
Cytoplasmic vacuolization	10	(20%)	43	(86%)	44	(88%)	43	(86%)
Basophilic cyto change	23	(46%)	33	(66%)	21	(42%)	16	(32%)
Clear cell change				(2%)				
#Bile duct	(50)		(50)		(50)		(50)	
Inflammation, suppurative							1	(2%)
Fibrosis	4	(8%)	3	(6%)	10	(20%)	3	(6%)
Hyperplasia, NOS	22	(44%)	21	(42%)	26	(52%)	21	(42%)
#Pancreatic acinus	(50)	•	(48)		(50)		(46)	• •
Atrophy, focal		(24%)		(21%)		(22%)		(11%)
#Esophagus	(49)	<b>(–</b> – • • <i>)</i>	(43)	()	(45)	(	(47)	<b>、</b> <i>···,</i>
Foreign body, NOS	(		()			(2%)	()	
Dilatation, NOS	1	(2%)			-			
#Glandular stomach	(50)	(2,0)	(50)		(50)		(48)	
Mineralization	(00)		(00)		1	(2%)	(40)	
Ulcer, NOS					i	(2%)	1	(2%)
Inflammation, suppurative			1	(2%)	•	(2,0)		(2%)
Hyperplasia, NOS				(2%)	1	(2%)	-	(4 10)
#Forestomach	(50)		(50)	(2,0)	(50)	(2,2)	(48)	
Ulcer, NOS	(00)		(00)		(00)			(2%)
Inflammation, acute	1	(2%)			2	(4%)	•	
Hyperkeratosis	•	(2,0)				(2%)		
Acanthosis						(2 %)	1	(2%)
#Small intestine/mucosa	(47)		(47)		(49)		(47)	(2 N)
Hyperplasia, diffuse	(**/)		(41)			(2%)	(*)	
#Duodenum	(47)		(47)		(49)	(270)	(47)	
	(47)		(47)			(901)	(47)	
Inflammation, suppurative Erosion					1	(2%) (2%)		
#Colon	(47)		(47)		-	(270)	(46)	
Cyst, NOS	(41)			(2%)	(47)		(40)	
Parasitism	8	(17%)		(26%)	9	(19%)	5	(11%)
#Cecum	( <b>4</b> 7)	(1770)	(47)	(20%)	(47)	(1970)	(46)	(1170)
Hemorrhage	(427)		(41)			(2%)	(40)	
*Rectum	(50)		(50)			(270)	(50)	
Parasitism		(40)	(00)		(50)	(100)		(0a)
		(4%)				(10%)		(2%)
RINARY SYSTEM								
#Kidney	(50)		(50)		(50)		(49)	
Inflammation, chronic	<i>,</i>			(2%)				
Nephropathy		(96%)		(90%)		(82%)		(84%)
#Kidney/capsule	(50)		(50)	(07)	(50)		(49)	
Hemorrhage								
Inflammation, suppurative #Kidney/medulla	/EA			(2%)	(20)		(40)	
Mineralization	(50)	(2%)	(50)	(40)	(50)		(49)	
#Kidney/tubule	(50)	(470)	(50) (50)	(4%)	(50)		(49)	
Mineralization		(2%)	(00)		(00)		(47)	
Degeneration, NOS		(270) (28%)	90	(40%)	99	(44%)	95	(51%)
#Kidney/pelvis	(50)	(20%)	(50)	(-20 70)	(50)	(-2-270)	( <b>4</b> 9)	(0170)
Mineralization		(12%)	(30)		(00)		(47)	
Dilatation, NOS	v	(1470)	1	(2%)				
Hyperplasia, epithelial								
	(47)			(2%)	(AC)		(47)	
	(4.()		(45)		(46)		(47)	
#Urinary bladder			1	(90)				
#Orinary bladder Dilatation, NOS Inflammation, suppurative			1	(2%)	1	(2%)		

	CONTRO	L (CHAMB)	LO	W DOSE	MI	D DOSE	HIGH DOSE	
URINARY SYSTEM (Continued)								<u> </u>
#U bladder/submucosa	(47)		(45)		(46)		(47)	
Edema, NOS	4	(9%)			1	(2%)	2	(4%)
Hemorrhage	1	(2%)			1	(2%)		
NDOCRINE SYSTEM								
#Pituitary	(49)		(49)		(49)		(49)	
Cyst, NOS	1	(2%)						
#Anterior pituitary	(49)		(49)		(49)		(49)	
Cyst, NOS	2	(4%)	4	(8%)	7	(14%)		(8%)
Hemorrhage				(07)			1	(2%)
Necrosis, NOS	c	(12%)		(2%) (4%)	0	(69)	F	(100)
Hyperplasıa, NOS #Adrenal cortex	(50)	(1270)	∡ (50)	(4170)	(49)	(6%)	(49)	(10%)
Cyst, NOS		(2%)	(00)		(43)		(43)	
Hemorrhage	1		1	(2%)			3	(6%)
Necrosis, NOS				(2%)				,
Necrosis, focal			•		1	(2%)		
Cytoplasmic vacuolization	16	(32%)	11	(22%)		(27%)	23	(47%)
Cytomegaly		(4%)						(2%)
#Adrenal medulla	(50)	-	(50)		(49)		(49)	
Hyperplasia, focal	1	(2%)	7	(14%)	8	(16%)	3	(6%)
#Thyroid	(47)		(46)		(48)		(42)	
Ultimobranchial cyst						(4%)		
Hyperplasia, C-cell		(13%)		(2%)		(19%)		(36%)
#Thyroid follicle	(47)	(0.21)	(46)		(48)		(42)	
Hyperplasia, cystic		(2%)	(10)		(00)		(00)	
#Parathyroid Hyperplasia, NOS	(26)	(8%)	(19)		(26) 1	(4%)	(26)	
		(0%)				(470)		
REPRODUCTIVE SYSTEM								
*Mammary gland	(50)		(50)		(50)		(50)	
Galactocele	1	(2%)	1	(2%)		(4%)		
Hyperplasia, epithelial						(2%)		(2%)
*Chtoral gland	(50)	(0.0)	(50)		(50)		(50)	
Mineralization	1	(2%)		(0.0)		(0~)		
Cyst, NOS			1	(2%)	1	(2%)	1	(901)
Ulcer, NOS Inflammation, suppurative	5	(10%)	Q	(16%)	5	(10%)		(2%) (2%)
Inflammation, suppurative		(10%)	0	(10%)	Ð	(1070)	1	(270)
Hyperplasia, epithelial		(2%)	1	(2%)	1	(2%)		
Metaplasia, squamous	-		-		-	·	1	(2%)
*Vagina	(50)		(50)		(50)		(50)	
Acanthosis						(2%)		
#Uterus	(50)		(49)		(50)		(47)	
Hemorrhage	1	(2%)				(2%)		
Inflammation, suppurative		(2%)						
#Uterus/endometrium	(50)		(49)		(50)		(47)	
Hyperplasia, NOS	7	(14%)	4	(8%)		(10%)		(6%)
Metaplasıa, squamous						(4%)		(2%)
#Ovary	(49)	(4~)	(50)	(1~)	(50)	(0.21)	(48)	(100)
Cyst, NOS		(4%)		(4%)		(2%)		(10%)
#Mesovarium Inflammation, chronic focal	(49)		(50)		(50) 1	(2%)	(48)	
				<u> </u>				
			(FA)		(70)		(FA)	
NERVOUS SYSTEM #Brain/meninges Inflammation, suppurative	(50)		(50)		(50)	(2%)	(50)	

### TABLE C2. SUMMARY OF THE INCIDENCE OF NONNEOPLASTIC LESIONS IN FEMALE RATS IN THE TWO-YEAR INHALATION STUDY OF DICHLOROMETHANE (Continued)

### TABLE C2. SUMMARY OF THE INCIDENCE OF NONNEOPLASTIC LESIONS IN FEMALE RATS IN THE TWO-YEAR INHALATION STUDY OF DICHLOROMETHANE (Continued)

	CONTRO	L (CHAMB)	LO	W DOSE	MI	D DOSE	HIG	H DOS
NERVOUS SYSTEM (Continued)		· · · · · · · · · · · · · · · · · · ·					<u> </u>	
#Cerebrum	(50)		(50)		(50)		(50)	
Hemorrhage	(,		(0-0)		(			(8%)
Inflammation, chronic focal								(2%)
#Brain	(50)		(50)		(50)		(50)	(=)
Hemorrhage		(2%)		(8%)		(4%)		(2%)
Atrophy, pressure	-	(=,0,		(2%)		(8%)		(2%)
#Medulla oblongata	(50)		(50)	(=,,,,,	(50)	(0.07)	(50)	(,
Hemorrhage		(2%)	(,		(,			(4%)
PECIAL SENSE ORGANS								
*Eye	(50)		(50)		(50)		(50)	
Atrophy, NOS			-				1	(2%)
*Eye/sclera	(50)		(50)		(50)		(50)	
Mineralization								(2%)
*Eye/crystalline lens	(50)		(50)		(50)		(50)	
Cataract	1	(2%)	-				3	(6%)
*Eye/lacrimal gland	(50)		(50)		(50)		(50)	
Inflammation, chronic					1	(2%)		
Inflammation, chronic focal	1	(2%)			1	(2%)		
*Nasolacrimal duct	(50)		(50)		(50)		(50)	
Inflammation, suppurative	2	(4%)	6	(12%)	3	(6%)	2	(4%)
Acanthosis					4	(8%)		
MUSCULOSKELETAL SYSTEM None								
BODY CAVITIES						-		
*Peritoneum	(50)		(50)		(50)		(50)	
Necrosis, fat			1	(2%)			1	(2%)
*Pleura	(50)		(50)		(50)		(50)	
Fibrosis, focal	1	(2%)						
*Mesentery	(50)		(50)		(50)		(50)	
Inflammation, necrotizing					1	(2%)		
ALL OTHER SYSTEMS								
*Multiple organs	(50)		(50)		(50)		(50)	
Hemorrhage					1	(2%)		
Inflammation, suppurative							2	(4%)
Hemosiderosis					1	(2%)		
Omentum								
Necrosis, focal	1							
Necrosis, fat							1	
Broad ligament Necrosis, fat	1				2		1	

None

# Number of animals with tissue examined microscopically* Number of animals necropsied

### **APPENDIX D**

# SUMMARY OF THE INCIDENCE OF NONNEOPLASTIC LESIONS IN MICE IN THE TWO-YEAR

### **INHALATION STUDIES**

**OF DICHLOROMETHANE** 

### TABLE D1. SUMMARY OF THE INCIDENCE OF NONNEOPLASTIC LESIONS IN MALE MICE IN THE TWO-YEAR INHALATION STUDY OF DICHLOROMETHANE

	CONTR	OL (CHAMB)	LOW	DOSE	HIG	H DOSE
ANIMALS INITIALLY IN STUDY	50		50		50	·
ANIMALS NECROPSIED	50		50		50	
ANIMALS EXAMINED HISTOPATHOLOGICALLY	Y 50		50		50	
NTEGUMENTARY SYSTEM						
*Skin	(50)		(50)		(50)	
Ulcer, NOS				(2%)		(0.41)
Inflammation, suppurative	(50)			(2%)		(2%)
*Subcut tissue	(50)	(99)	(50)		(50)	
Inflammation, suppurative Abscess, NOS		(2%) (2%)				
Inflammation, acute/chronic		(2%)				
RESPIRATORY SYSTEM						
*Nasal cavity	(50)		(50)		(50)	
Inflammation, serous	2	(4%)		(4%)		(6%)
Inflammation, suppurative			2	(4%)		(2%)
Inflammation, chronic						(2%)
Hyperplasia, focal						(2%)
*Laryngeal submucosa	(50)	(90)	(50)		(50)	
Inflammation, suppurative		(2%)	( <b>* ^</b> )		(50)	
#Lung Congestion, NOS	(50)	(90)	(50)		(50)	(001)
Hemorrhage		(2%) (4%)	1	(90)	1	(2%)
Lymphocytic inflammatory infiltrate		(6%)		(2%) (10%)	1	(2%)
Inflammation, interstitial	J	(070)		(2%)	-	(2%)
Inflammation, acute/chronic	1	(2%)	-	(2,0)		(2%)
Hyperplasia, epithelial	-					(2%)
Histiocytosis						(2%)
#Lung/alveoli Histiocytosis	(50)		(50)	(2%)	(50)	(2%)
				(2,0)		(2 %)
HEMATOPOIETIC SYSTEM			(50)		(50)	
*Multiple organs Hematopoiesis	(50)	(6%)	(50)		(50)	
#Bone marrow	(49)	(070)	(49)		(49)	
Inflammation, suppurative	(43)			(2%)	(43)	
Hyperplasia, hematopoietic			•	(2,0)	1	(2%)
Hyperplasia, granulocytic	5	(10%)	3	(6%)		(4%)
#Spleen	(49)		(49)		(48)	
Hemorrhage						(2%)
Atrophy, NOS		(0~)		(0.7)	1	(2%)
Hyperplasia, lymphoid Hematopoiesis	1	(2%)		(2%)	4	(8%)
#Splenic follicles	(49)		(49)	(4%)	(48)	(070)
Atrophy, NOS	(40)			(6%)		(15%)
#Lymph node	(42)		(45)	(0.0)	(40)	
Hyperplasia, lymphoid	( /			(9%)	()	
#Mandibular lymph. node	(42)		(45)		(40)	
Hyperplasia, reticulum cell					1	(3%)
Mastocytosis						(3%)
#Bronchial lymph node	(42)	( <b>a</b> )	(45)		(40)	
Atrophy, NOS	1	(2%)				(00)
Atrophy, cystic						(3%) (3%)
Hyperplasia, lymphoid #Mesenteric lymph node	(42)		(45)		(40)	(070)
Hyperplasia, lymphoid	(74)			(2%)	(40)	
#Renal lymph node	(42)		(45)		(40)	
				(2%)		
Hemosiderosis			+			

	CONTR	OL (CHAMB)	LOW	DOSE	HIG	H DOSE
EMATOPOIETIC SYSTEM (Continued)						<u></u>
#Axillary lymph node	(42)		(45)		(40)	
Hyperplasia, lymphoid	(,			(2%)	(	
#Liver	(50)		(49)	•	(49)	
Hematopoiesis			1	(2%)		
CIRCULATORY SYSTEM		,				
#Heart	(50)		(50)		(50)	
Mineralization				(2%)		
Inflammation, acute/chronic	1	(2%)	1	(2%)	1	(2%)
#Cardiac valve	(50)	(	(50)	,	(50)	
Inflammation, suppurative	(007)			(2%)	(	
Pigmentation, NOS				•	1	(2%)
#Hepatic sinusoid	(50)		(49)		(49)	<b>、</b>
Necrosis, NOS				(2%)	(	
DIGESTIVE SYSTEM						- <u></u>
*Tooth	(50)		(50)		(50)	
Congenital malformation, NOS		(8%)		(6%)	(00)	
Inflammation, suppurative	•	(= /• /		(2%)		
#Salivary gland	(48)		(49)	(2,0)	(46)	
Inflammation, acute/chronic	· /	(8%)		(2%)		(4%)
#Liver	(50)	(0,07	(49)	(2,0)	(49)	(*/*/
Mineralization	(00)		(,			(2%)
Torsion			3	(6%)	-	()
Congestion, NOS			Ŭ	(0,0)	1	(2%)
Inflammation, necrotizing	1	(2%)	2	(4%)		(2%)
Inflammation, acute/chronic		(4%)		(2%)		(4%)
Inflammation, chronic focal	-	(****		(2%)	-	(-,-,
Necrosis, NOS				(2%)	2	(4%)
Necrosis, focal			-	(= /0/		(6%)
Focal cellular change			1	(2%)		
Eosinophilic cyto change	2	(4%)			1	(2%)
Cytologic degeneration	-					(45%)
#Liver/hepatocytes	(50)		(49)		(49)	(
Necrosis, focal	(00)		(,			(4%)
*Gallbladder	(50)		(50)		(50)	(10)
Inflammation, acute/chronic	(00)			(2%)	(23)	
#Pancreas	(50)		(48)	<u></u>	(47)	
Amvloidosis	(00)					(2%)
#Pancreatic duct	(50)		(48)		(47)	
Inflammation, NOS	(				1	(2%)
#Pancreatic acinus	(50)		(48)		(47)	
Atrophy, NOS						(2%)
#Gastric mucosa	(49)		(47)		(49)	
Mineralization						(2%)
#Glandular stomach	(49)		(47)		(49)	
Dilatation, NOS		(6%)		(15%)		(18%)
#Duodenum	(49)		(46)		(47)	
Inflammation, acute/chronic	. – . ,					(2%)
#Ileum	(49)		(46)		(47)	~
Amyloidosis		(2%)				(2%)
*Rectum	(50)		(50)		(50)	
Inflammation, suppurative				(2%)		
*Anus	(50)		(50)		(50)	
Inflammation, suppurative		(2%)				

## TABLE D1. SUMMARY OF THE INCIDENCE OF NONNEOPLASTIC LESIONS IN MALE MICE IN THE<br/>TWO-YEAR INHALATION STUDY OF DICHLOROMETHANE (Continued)

	CONTR	OL (CHAMB)	LOW	DOSE	HIG	H DOSE
URINARY SYSTEM						
#Kidney	(50)		(49)		(50)	
Mineralization		(4%)		(2%)		(2%)
Hydronephrosis	1	(2%)				
Cyst, NOS			2	(4%)		
Inflammation, suppurative	1	(2%)			1	(2%)
Inflammation, necrotizing					1	(2%)
Pyelonephritis, acute	1	(2%)		(4%)	3	(6%)
Inflammation, acute/chronic	4	(8%)	2	(4%)	2	(4%)
Inflammation, chronic	1	(2%)			1	(2%)
Glomerulonephritis, chronic	3	(6%)	1	(2%)	1	(2%)
Inflammation, chronic focal			1	(2%)		
Fibrosis, focal					1	(2%)
Nephropathy			1	(2%)		
Infarct, NOS					1	(2%)
Calcinosis, NOS					1	(2%)
Metaplasia, osseous			2	(4%)	-	
#Kidney/tubule	(50)		(49)		(50)	
Cast, NOS		(12%)		(22%)		(40%)
Cyst, NOS		(4%)		(2%)		
Nephrosis, NOS		(4%)		<b>L</b> = 107		
Pigmentation, NOS		()	1	(2%)		
#Kidney/pelvis	(50)		(49)		(50)	
Hemorrhage	1	(2%)	• •			
Inflammation, suppurative		(2%)				
#Urinary bladder	(50)		(49)		(47)	
Calculus, unkn gross or micro					1	(2%)
Distention	1	(2%)	2	(4%)		
Inflammation, NOS					1	(2%)
Inflammation, suppurative	2	(4%)	4	(8%)		(6%)
Inflammation, acute/chronic		(2%)	-	(1)	-	(4%)
Inflammation, chronic		(2%)	1	(2%)		()
Hyperplasia, epithelial	-	(=)	-	(=,	3	(6%)
#Urinary bladder/submucosa	(50)		(49)		(47)	(0.07)
Angiectasis	(00)			(2%)	(	
*Urethra	(50)		(50)	(2.13)	(50)	
Mucocele	(00)			(2%)	(00)	
NDOCRINE SYSTEM		······				
#Pituitary	(48)		(48)		(45)	
Congestion, NOS	(40)			(2%)	(40)	
#Adrenal	(50)		(46)	(2,2)	(50)	
Inflammation, suppurative	(00)		(,		• •	(2%)
Necrosis, hemorrhagic	1	(2%)			•	(_ / / /
Hyperplasia, focal		(2%)				
#Adrenal/capsule	(50)	~~~/	(46)		(50)	
Hyperplasia, focal		(2%)	(20)		(00)	
#Adrenal cortex	(50)	~~~~	(46)		(50)	
Hyperplasia, NOS	(00)		( •••)			(2%)
Hyperplasia, focal			3	(7%)	•	(= )
#Adrenal medulla	(50)		(46)		(50)	
Hyperplasia, NOS	(00)			(4%)		(2%)
#Thyroid	(45)		(47)		(48)	, <i>,</i>
Inflammation, acute/chronic		(2%)		(2%)	(10)	
Hyperplasia, C-cell	•	·····		(2%)		
LIVDELDIASIA. U-CHII						
#Thyroid follicle	(45)		(47)		(48)	

## TABLE D1. SUMMARY OF THE INCIDENCE OF NONNEOPLASTIC LESIONS IN MALE MICE IN THE TWO-YEAR INHALATION STUDY OF DICHLOROMETHANE (Continued)

	CONTR	OL (CHAMB)	LOW	DOSE	HIG	h dose
REPRODUCTIVE SYSTEM						
*Penis	(50)		(50)		(50)	
Inflammation, suppurative	(00)			(2%)	(00)	
Inflammation, necrotizing	2	(4%)		(2%)		
*Prepuce	(50)		(50)	(2,0)	(50)	
Inflammation, necrotizing	(00)		(00)		()	(2%)
*Preputial gland	(50)		(50)		(50)	
Dilatation, NOS		(2%)	(00)		(00)	
Dilatation/ducts	1	(270)	1	(2%)	1	(2%)
Cyst, NOS				(2%)	•	(470)
Cystic ducts	1	(2%)		(2%)		
Inflammation, suppurative		(4%)		(4%)		
Inflammation, necrotizing	4			(4%)		
Abscess, NOS	1	(2%)		(4%)		
Inflammation, acute/chronic	1			(2%)		
Inflammation, chronic	1	(2%)	-	(2/0)		
Hyperkeratosis	1		9	(4%)		
#Prostate	(50)		(50)	(-=,0)	(47)	
		(6%)		(4%)		(6%)
Inflammation, suppurative *Seminal vesicle		(070)	(50)	(**70)	(50)	<b>x</b> - · · · <b>y</b>
	(50)	(90)	(00)		(00)	
Dilatation, NOS		(2%) (6%)	•	(60)		
Distention	•	(6%)	+	(6%)	(20)	
#Testis	(50)	(90)	(50)	(40)	(50)	(401)
Mineralization		(2%)	2	(4%)	2	(4%)
Granuloma, spermatic	1	(2%)		(90)		(000)
Atrophy, NOS			4	(8%)		(62%)
Hyperplasia, interstitial cell	(20)		(50)			(2%)
*Scrotum	(50)		(50)	(90)	(50)	
Inflammation, necrotizing		<u></u>	1	(2%)		
NERVOUS SYSTEM						
#Brain/meninges	(50)		(50)		(50)	
Lymphocytic inflammatory infiltrate	(20)			(2%)	(	
Inflammation, acute/chronic	1	(2%)	-			
#Brain	(50)	\	(50)		(50)	
Mineralization		(50%)		(48%)	(,	(32%)
Congestion, NOS	20			(2%)		
Hemorrhage				(2%)		
SPECIAL SENSE ORGANS None				<u></u>	, <u>, t</u> ,,, t,,,,,,,,,,,	
MUSCULOSKELETAL SYSTEM					· · · · · · · · · · · · · · · · · · ·	
*Bone	(50)		(50)		(50)	
Fibrous osteodystrophy	(					(2%)
BODY CAVITIES None						

### TABLE D1. SUMMARY OF THE INCIDENCE OF NONNEOPLASTIC LESIONS IN MALE MICE IN THE TWO-YEAR INHALATION STUDY OF DICHLOROMETHANE (Continued)

### TABLE D1. SUMMARY OF THE INCIDENCE OF NONNEOPLASTIC LESIONS IN MALE MICE IN THE TWO-YEAR INHALATION STUDY OF DICHLOROMETHANE (Continued)

(50)	(50)		(50)	
	1	(2%)		
3 (6%)	5	(10%)	1	(2%)
			1	
	1			
		1	1 (2%)	1 (2%)

# Number of animals with tissue examined microscopically* Number of animals necropsied

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TABLE D2.	SUMMARY OF THE INCIDENCE OF NONNEOPLASTIC LESIONS IN FEMALE MICE IN THE
	TWO-YEAR INHALATION STUDY OF DICHLOROMETHANE

	CONTR	OL (CHAMB)	LOW	DOSE	HIG	H DOSI
ANIMALS INITIALLY IN STUDY			50		50	
ANIMALS MISSING			1		1	
ANIMALS MESSING	50		49		49	
ANIMALS EXAMINED HISTOPATHOLOGICALL			48		49	
				<u></u>		
NTEGUMENTARY SYSTEM						
*Skin	(50)		(49)		(49)	
Epidermal inclusion cyst				(2%)		
Inflammation, suppurative			1	(2%)		
Inflammation, chronic focal	1	(2%)				
Hyperkeratosis			1	(2%)		
*Subcut tissue	(50)		(49)		(49)	
Inflammation, suppurative	1	(27)				
RESPIRATORY SYSTEM		·····				
	(EA)		(10)		(49)	
*Nasal cavity	(50)		(49)	(90)		(10)
Inflammation, serous		(16%)		(8%)	2	(4%)
Inflammation, suppurative	1	(2%)		(4%) (2%)	•	(10)
Hyperplasia, epithelial	(FA)			(2%)		(4%)
#Lung	(50)		(48)	(90)	(48)	
Congestion, NOS				(2%)		
Edema, NOS	-	(1.40)		(2%)	•	(60)
Lymphocytic inflammatory infiltrate	(	(14%)		(10%)	3	(6%)
Inflammation, interstitial				(2%)	0	(401)
Inflammation, suppurative			1	(2%)		(4%)
Inflammation, necrotizing				(0.21)		(4%)
Inflammation, acute/chronic			1	(2%)		(2%)
Hyperplasia, NOS				(0.0)	1	(2%)
Hyperplasia, epithelial				(2%)		
#Lung/alveoli	(50)		(48)		(48)	(0~)
Crystals, NOS Histiocytosis						(2%) (4%)
					<u></u>	
IEMATOPOIETIC SYSTEM	(50)		(10)		(40)	
*Multiple organs	(50)		(49)	(0~)	(49)	
Hyperplasia, lymphoid				(2%)		
Hematopoiesis		(2%)		(2%)		
#Bone marrow	(48)		(47)		(45)	
Atrophy, NOS						(2%)
Hyperplasia, hematopoietic		(0~)			1	(2%)
Hyperplasia, granulocytic		(8%)	(40)		(47)	
#Spleen	(49)		(48)	(07)	(47)	
Inflammation, necrotizing		(0/)	1	(2%)		
Amyloidosis	1	(2%)				(011)
Hemosiderosis Humomlasia humohaid	۲	(100)		(90)	1	(2%)
Hyperplasia, lymphoid		(10%)		(2%)	•	(60)
Hematopoiesis #Splenia fallialaa		(14%)		(6%)		(6%)
#Splenic follicles	(49)		(48)		(47)	(90)
Atrophy, NOS #Mandibular lumph node	(49)		(47)			(2%)
#Mandibular lymph node		(90)	(47)		(43)	
Hyperplasia, reticulum cell		(2%)		(90)		
Hyperplasia, lymphoid		(2%)		(2%)	(40)	
#Bronchial lymph node	(49)		(47)		(43)	(00)
Congestion, NOS				(0.00)	1	(2%)
Inflammation, serous		(0~)	1	(2%)		
Inflammation, suppurative		(2%)			-	(90)
Hyperplasia, lymphoid		(6%)				(2%)
#Mesenteric lymph node	(49)		(47)		(43)	
Hemorrhage		(2%)				

	CONTR	OL (CHAMB)	LOW	DOSE	HIG	H DOSE
HEMATOPOIETIC SYSTEM (Continued)		······	······································			
#Lung	(50)		(48)		(48)	
Leukocytosis, NOS	1	(2%)				
#Liver	(50)		(48)		(48)	
Leukocytosis, NOS		(2%)				
Leukemoid reaction		(2%)		(2%)		
Hematopoiesis		(2%)		(2%)		
#Adrenal	(50)		(48)		(48)	
Hematopoiesis						(2%)
#Thymus	(30)		(20)		(9)	
Atrophy, NOS	1	(3%)				
IRCULATORY SYSTEM						
*Multiple organs	(50)		(49)		(49)	
Periarteritis	(00)		()			(2%)
#Heart	(49)		(48)		(49)	
Mineralization	(-•)		、 <i>/</i>			(2%)
Inflammation, acute/chronic	1	(2%)			-	
Perivasculitis		(2%)				
#Cardiac valve	(49)	. ,	(48)		(49)	
Inflammation, NOS	,			(2%)	,	
*Aorta	(50)		(49)	. ,	(49)	
Inflammation, acute/chronic			1	(2%)		
DIGESTIVE SYSTEM	· · · · · · · · · · · · · · · · · · ·					
*Tooth	(50)		(49)		(49)	
Congenital malformation, NOS	(50)			(2%)	(43)	
*Pulp of tooth	(50)		(49)	(2,0)	(49)	
Abscess, NOS		(2%)	(40)			(2%)
#Salivary gland	(50)		(45)		(47)	
Inflammation, NOS		(2%)	(40)		(41)	
Inflammation, acute/chronic	-	(=,*)			2	(4%)
#Liver	(50)		(48)		(48)	()
Mineralization	(00)		(10)			(2%)
Torsion	1	(2%)			-	(4,0)
Congestion, chronic passive	•	(270)	1	(2%)		
Inflammation, suppurative	1	(2%)	1	(2,10)		
Inflammation, suppurative		(270)	1	(2%)	1	(2%)
Inflammation, acute/chronic				(2%)	1	(4.10)
Degeneration, cystic			Ĩ	(270)	1	(2%)
Necrosis, NOS						(4%)
Necrosis, focal	3	(6%)	1	(2%)		(4%)
Metamorphosis, fatty		(2%)	•	- 101		(2%)
Pigmentation, NOS		(2%)			-	\- <i>\</i> \/
Cytologic degeneration	•	~~/~/	23	(48%)	21	(44%)
#Pancreas	(48)		(48)		(47)	///
Inflammation, acute/chronic	(10)			(2%)	()	
#Pancreatic acinus	(48)		(48)	<u></u>	(47)	
Atrophy, NOS	(40)			(2%)	(=)	
#Stomach	(49)		(47)	,	(48)	
Ulcer, NOS		(2%)	(=+)		(40)	
Inflammation, suppurative	-	·	1	(2%)		
Hyperkeratosis	1	(2%)		(9%)	1	(2%)
#Glandular stomach	(49)	<u></u>	(47)	<u>, - , <del>-</del> ,</u>	(48)	,
Dilatation, NOS		(2%)		(4%)		(21%)
Inflammation, suppurative			-			(2%)
#Gastric submucosa	(49)		(47)		(48)	
Inflammation, suppurative	(10)			(2%)		
#Duodenum	(46)		(47)		(47)	
Inflammation, suppurative						(2%)

## TABLE D2. SUMMARY OF THE INCIDENCE OF NONNEOPLASTIC LESIONS IN FEMALE MICE IN THE TWO-YEAR INHALATION STUDY OF DICHLOROMETHANE (Continued)

	CONTR	OL (CHAMB)	LOW	DOSE	HIG	H DOSE
DIGESTIVE SYSTEM (Continued)		······				
#Jejunum	(46)		(47)		(47)	
Amyloidosis	(,			(2%)		(2%)
#Ileum	(46)		(47)		(47)	
Amyloidosis		(2%)		(2%)		
*Rectum	(50)		(49)		(49)	
Inflammation, necrotizing	1	(2%)				
JRINARY SYSTEM						
#Kidney	(49)		(48)		(47)	
Hydronephrosis					2	(4%)
Hemorrhage			1	(2%)		
Glomerulonephritis, NOS	2	(4%)			1	(2%)
Inflammation, suppurative	1	(2%)				
Pyelonephritis, acute	1	(2%)				
Inflammation, acute/chronic	4	(8%)	1	(2%)		
Glomerulonephritis, subacute		(2%)				
Inflammation, chronic		(2%)				
Glomerulonephritis, chronic	4	(8%)		(8%)		
Infarct, NOS				(2%)		(2%)
#Kidney/tubule	(49)		(48)		(47)	
Cast, NOS		(16%)	23	(48%)		(49%)
Multiple cysts	1	(2%)				(2%)
Necrosis, NOS					1	(2%)
#Urinary bladder	(48)		(48)		(47)	
Distention				(2%)		
Lymphocytic inflammatory infiltrate			1	(2%)		
NDOCRINE SYSTEM				·····		
#Pituitary	(46)		(44)		(44)	
Congestion, NOS		(4%)		(2%)	(44)	
Necrosis, focal	~		•	(2 ~)	1	(2%)
Hypertrophy, focal	1	(2%)			•	(2,0)
Hyperplasia, NOS		(4%)				
Hyperplasia, focal		(2%)	5	(11%)	1	(2%)
III DCI DIASIA, IUCAI		14/01		(11 %)		
	-		v			
Angiectasis					1	(2%)
Angiectasis #Adrenal	(50)		(48)		1 (48)	(2%)
Angiectasis #Adrenal Congestion, NOS			(48)	(2%)	1 (48)	
Angiectasis #Adrenal Congestion, NOS Inflammation, suppurative	(50)	(2%)	(48)	(2%)	1 (48)	(2%)
Angiectasis #Adrenal Congestion, NOS Inflammation, suppurative Inflammation, fibrinous	(50)	(2%)	(48)	(2%)	1 (48)	(2%)
Angiectasis #Adrenal Congestion, NOS Inflammation, suppurative Inflammation, fibrinous Amyloidosis	(50)	(2%) (2%)	(48)	(2%)	1 (48) 3	(2%) (6%)
Angiectasis #Adrenal Congestion, NOS Inflammation, suppurative Inflammation, fibrinous Amyloidosis Angiectasis	(50) 1 1		(48) 1	(2%)	1 (48) 3	(2%)
Angiectasis #Adrenal Congestion, NOS Inflammation, suppurative Inflammation, fibrinous Amyloidosis Angiectasis #Adrenal cortex	(50) 1 1 (50)	(2%)	(48)	(2%)	1 (48) 3	(2%) (6%)
Angiectasis #Adrenal Congestion, NOS Inflammation, suppurative Inflammation, fibrinous Amyloidosis Angiectasis	(50) 1 1 (50) 1		(48) 1	(2%)	1 (48) 3	(2%) (6%)
Angiectasis #Adrenal Congestion, NOS Inflammation, suppurative Inflammation, fibrinous Amyloidosis Angiectasis #Adrenal cortex Cyst, NOS #Adrenal medulla	(50) 1 (50) 1 (50)	(2%) (2%)	(48) 1 (48)	(2%)	1 (48) 3 (48)	(2%) (6%)
Angiectasis #Adrenal Congestion, NOS Inflammation, suppurative Inflammation, fibrinous Amyloidosis Angiectasis #Adrenal cortex Cyst, NOS #Adrenal medulla Hyperplasia, NOS	(50) 1 (50) 1 (50)	(2%)	(48) 1 (48) (48)	(2%)	1 (48) 3 (48)	(2%) (6%)
Angiectasis #Adrenal Congestion, NOS Inflammation, suppurative Inflammation, fibrinous Amyloidosis Angiectasis #Adrenal cortex Cyst, NOS #Adrenal medulla	(50) 1 (50) 1 (50) 1	(2%) (2%)	(48) 1 (48) (48)		1 (48) 3 (48)	(2%) (6%)
Angiectasis #Adrenal Congestion, NOS Inflammation, suppurative Inflammation, fibrinous Amyloidosis Angiectasis #Adrenal cortex Cyst, NOS #Adrenal medulla Hyperplasia, NOS Hyperplasia, focal	(50) 1 (50) 1 (50)	(2%) (2%)	(48) 1 (48) (48) 1		1 (48) 3 (48) (48) (46)	(2%) (6%)
Angiectasis #Adrenal Congestion, NOS Inflammation, suppurative Inflammation, fibrinous Amyloidosis Angiectasis #Adrenal cortex Cyst, NOS #Adrenal medulla Hyperplasia, NOS Hyperplasia, focal #Thyroid	(50) 1 (50) 1 (50) 1	(2%) (2%)	(48) 1 (48) (48) 1		1 (48) 3 (48) (48) (48) (46) 1	(2%) (6%) (2%)
Angiectasis #Adrenal Congestion, NOS Inflammation, suppurative Inflammation, fibrinous Amyloidosis Angiectasis #Adrenal cortex Cyst, NOS #Adrenal medulla Hyperplasia, NOS Hyperplasia, focal #Thyroid Inflammation, suppurative Inflammation, acute/chronic	(50) 1 (50) 1 (50) 1 (48)	(2%) (2%) (2%)	(48) 1 (48) (48) 1		1 (48) 3 (48) (48) (46) 1 1	(2%) (6%) (2%) (2%) (2%)
Angiectasis #Adrenal Congestion, NOS Inflammation, suppurative Inflammation, fibrinous Amyloidosis Angiectasis #Adrenal cortex Cyst, NOS #Adrenal medulla Hyperplasia, NOS Hyperplasia, focal #Thyroid Inflammation, suppurative	(50) 1 (50) 1 (50) 1 (48) 2	(2%) (2%)	(48) 1 (48) (48) 1 (47)		1 (48) 3 (48) (48) (48) (46) 1 1 2	(2%) (6%) (2%) (2%)
Angiectasis #Adrenal Congestion, NOS Inflammation, suppurative Inflammation, fibrinous Amyloidosis Angiectasis #Adrenal cortex Cyst, NOS #Adrenal medulla Hyperplasia, NOS Hyperplasia, focal #Thyroid Inflammation, suppurative Inflammation, acute/chronic Hyperplasia, follicular cell	(50) 1 (50) 1 (50) 1 (48)	(2%) (2%) (2%)	(48) 1 (48) (48) 1 (47) (47)		1 (48) 3 (48) (48) (46) 1 1	(2%) (6%) (2%) (2%) (2%)
Angiectasis #Adrenal Congestion, NOS Inflammation, suppurative Inflammation, fibrinous Amyloidosis Angiectasis #Adrenal cortex Cyst, NOS #Adrenal medulla Hyperplasia, NOS Hyperplasia, focal #Thyroid Inflammation, suppurative Inflammation, acute/chronic Hyperplasia, follicular cell #Thyroid follicle Hypertrophy, focal	(50) 1 (50) 1 (50) 1 (48) 2	(2%) (2%) (2%)	(48) 1 (48) (48) 1 (47) (47)	(2%)	1 (48) 3 (48) (48) (48) (46) 1 1 2	(2%) (6%) (2%) (2%) (2%)
Angiectasis #Adrenal Congestion, NOS Inflammation, suppurative Inflammation, fibrinous Amyloidosis Angiectasis #Adrenal cortex Cyst, NOS #Adrenal medulla Hyperplasia, NOS Hyperplasia, focal #Thyroid Inflammation, suppurative Inflammation, acute/chronic Hyperplasia, follicular cell #Thyroid follicle Hypertrophy, focal EEPRODUCTIVE SYSTEM	(50) 1 (50) 1 (50) 1 (48) 2 (48)	(2%) (2%) (2%)	(48) 1 (48) (48) 1 (47) (47) 1	(2%)	1 (48) 3 (48) (48) (48) (46) 1 1 2 (46)	(2%) (6%) (2%) (2%) (2%)
Angiectasis #Adrenal Congestion, NOS Inflammation, suppurative Inflammation, fibrinous Amyloidosis Angiectasis #Adrenal cortex Cyst, NOS #Adrenal medulla Hyperplasia, NOS Hyperplasia, focal #Thyroid Inflammation, suppurative Inflammation, acute/chronic Hyperplasia, follicular cell #Thyroid follicle Hypertrophy, focal	(50) 1 (50) 1 (50) 1 (48) 2 (48) 2 (48) (50)	(2%) (2%) (2%)	(48) 1 (48) (48) 1 (47) (47)	(2%)	1 (48) 3 (48) (48) (48) (46) 1 1 2	(2%) (6%) (2%) (2%) (2%)

#### TABLE D2. SUMMARY OF THE INCIDENCE OF NONNEOPLASTIC LESIONS IN FEMALE MICE IN THE TWO-YEAR INHALATION STUDY OF DICHLOROMETHANE (Continued)

	CONTR	OL (CHAMB)	LOW	DOSE	HIG	H DOSE
REPRODUCTIVE SYSTEM (Continued)	···		<u> </u>			·
#Uterus	(50)		(48)		(47)	
Mineralization						(2%)
Inflammation, suppurative	6	(12%)	2	(4%)		
Abscess, NOS	1	(2%)				
Inflammation, chronic				(2%)		
Atrophy, NOS			1	(2%)		(17%)
#Uterus/endometrium	(50)		(48)		(47)	
Hyperplasia, NOS		(30%)		(17%)		(9%)
#Ovary Mineralization	(50)		(47)		(43)	
Cyst, NOS		(6%)	•	(19%)		(2%) (14%)
Epidermal inclusion cyst	0	(16%)		(1976)	0	(1470)
Congestion, NOS	1	(2%)	1	(270)		
Hematoma, NOS	1	(270)	1	(2%)		
Hemorrhagic cyst	9	(4%)		(2%)	3	(7%)
Abscess, NOS		(18%)		(9%)	3	(170)
Inflammation, chronic	9			(3%)		
Inflammation, chronic Inflammation necro granulomatous	1	(2%)	1	(2,0)		
Atrophy, NOS		(12%)	28	(60%)	32	(74%)
······································		\ <b>^4</b> \ <b>V</b> /				
NERVOUS SYSTEM						
#Brain/meninges	(50)	(0.41)	(48)		(47)	
Lymphocytic inflammatory infiltrate		(2%)				
#Brain	(50)	(10~)	(48)	(4.8.4)	(47)	
Mineralization		(42%)		(19%)	12	(26%)
Lymphocytic inflammatory infiltrate	1	(2%)		(2%)		
Inflammation, hemorrhagic Corpora amylacea			1	(2%)	1	(2%)
SPECIAL SENSE ORGANS *Harderian gland Inflammation, suppurative	(50)		(49)	ā	(49)	(2%)
imiammation, supportative						(270)
NUSCULOSKELETAL SYSTEM	(20)		(10)		(10)	
*Maxilla	(50)	(00)	(49)		(49)	
Fibrous osteodystrophy		(8%)	(40)		(40)	
*Sternum Fibrous actoodystrophy	(50)	(90)	(49)	(60)	(49)	(100)
Fibrous osteodystrophy	1	(2%)	3	(6%) 		(10%)
BODY CAVITIES						
*Peritoneum	(50)		(49)		(49)	
Hematoma, NOS		(2%)				
Inflammation, suppurative		(2%)	1	(2%)		
Inflammation, acute/chronic	1	(2%)		(00)		
Inflammation, chronic			1	(2%)		
ALL OTHER SYSTEMS						
*Multiple organs	(50)		(49)		(49)	
Lymphocytic inflammatory infiltrate		(2%)				
Inflammation, suppurative		(6%)		(2%)		(2%)
Inflammation, acute/chronic	10	(20%)	6	(12%)	2	(4%)
Adipose tissue						
Inflammation, chronic			1			
Calcification, NOS	1					
Connective tissue						
Inflammation, chronic			1			

### TABLE D2. SUMMARY OF THE INCIDENCE OF NONNEOPLASTIC LESIONS IN FEMALE MICE IN THE TWO-YEAR INHALATION STUDY OF DICHLOROMETHANE (Continued)

### TABLE D2. SUMMARY OF THE INCIDENCE OF NONNEOPLASTIC LESIONS IN FEMALE MICE IN THE TWO-YEAR INHALATION STUDY OF DICHLOROMETHANE (Continued)

	CONTROL (CHAMB)	LOW DOSE	HIGH DOSE
SPECIAL MORPHOLOGY SUMMARY			······································
No lesion reported	1	2	2
Animal missing/no necropsy		1	1
Auto/necropsy/no histo		1	

# Number of animals with tissue examined microscopically* Number of animals necropsied

### **APPENDIX E**

## ANALYSES OF PRIMARY TUMORS IN RATS AND MICE IN THE TWO-YEAR INHALATION STUDIES OF DICHLOROMETHANE

	Control	1 <b>,000</b> ppm	<b>2,000</b> ppm	4,000 ppm
Skin: Papilloma				
Overall Rates (a)	4/50 (8%)	0/50 (0%)	1/50 (2%)	0/50 (0%)
Adjusted Rates (b)	20.0%	0.0%	2.0%	0.0%
Terminal Rates (c)	1/16 (6%)	0/16 (0%)	0/17 (0%)	0/9 (0%)
Week of First Observation	99		71	
Life Table Tests (d)	P = 0.058N	P = 0.067 N	P = 0.187N	P = 0.137N
Incidental Tumor Tests (d)	P=0.040N	P = 0.054N	P=0.190N	P = 0.057 N
Cochran-Armitage Trend Test (d)	P = 0.039N			
Fisher Exact Test (d)		P = 0.059N	P = 0.181N	P = 0.059 N
kin: Keratoacanthoma				
Overall Rates (a)	2/50 (4%)	2/50 (4%)	0/50 (0%)	3/50 (6%)
Adjusted Rates (b)	12.5%	9.1%	0.0%	21.2%
Terminal Rates (c)	2/16 (13%)	1/16 (6%)	0/17 (0%)	0/9 (0%)
Week of First Observation	104	92		101
Life Table Tests (d)	P=0.268	P=0.693N	P = 0.223N	P = 0.303
Incidental Tumor Tests (d)	P=0.395	P = 0.696	P = 0.223N	P = 0.453
Cochran-Armitage Trend Test (d)	P=0.423			
Fisher Exact Test (d)		P = 0.691	P = 0.247 N	P = 0.500
ibcutaneous Tissue: Fibroma				
Overall Rates (a)	1/50 (2%)	1/50 (2%)	2/50 (4%)	4/50 (8%)
Adjusted Rates (b)	6.3%	6.3%	9.2%	19.5%
Terminal Rates (c)	1/16(6%)	1/16 (6%)	1/17 (6%)	0/9 (0%)
Week of First Observation	104	104	96	89
Life Table Tests (d)	P = 0.024	P = 0.764	P = 0.523	P = 0.095
Incidental Tumor Tests (d)	P = 0.064	P = 0.764	P = 0.505	P = 0.204
Cochran-Armitage Trend Test (d)	P = 0.072			
Fisher Exact Test (d)		P = 0.753	P = 0.500	P = 0.181
bcutaneous Tissue: Fibroma or Sa				
Overall Rates (a)	1/50 (2%)	1/50 (2%)	2/50 (4%)	5/50 (10%)
Adjusted Rates (b)	6.3%	6.3%	9.2%	22.7%
Terminal Rates (c)	1/16(6%)	1/16 (6%)	1/17 (6%)	0/9 (0%)
Week of First Observation	104	104	96	89
Life Table Tests (d)	P = 0.008	P = 0.764	P = 0.523	P = 0.050
Incidental Tumor Tests (d)	P = 0.026	P = 0.764	P = 0.505	P = 0.125
Cochran-Armitage Trend Test (d) Fisher Exact Test (d)	P=0.029	P = 0.753	P = 0.500	P = 0.102
		r = 0.700	r = 0.000	r = 0.102
ematopoietic System: Mononuclear		96/60 (69/2)	20/E0 (C10)	DE IEN IRNA
Overall Rates (a) Adjusted Rates (b)	34/50 (68%) 80 3%	26/50 (52%) 77.0%	32/50 (64%)	35/50 (70%)
Terminal Rates (c)	80.3% 8/16 (50%)	9/16 (56%)	80.2% 10/17 (59%)	89.4% 6/9(67%)
				6/9 (67%) 75
Week of First Observation Life Table Tests (d)	57 P=0.045	82 P=0.147N	71 P = 0.400N	75 P=0.134
Incidental Tumor Tests (d)	P = 0.045 P = 0.399	P = 0.147N P = 0.049N	P = 0.434N	P = 0.134 P = 0.487N
Cochran-Armitage Trend Test (d)	P = 0.355 P = 0.251	1 -0.04011	1 -0.10111	1 - 0.40111
Fisher Exact Test (d)	0.201	P=0.076N	P=0.417N	P=0.500
ver: Neoplastic Nodule or Hepatoc	ellular Carcinoma			
Overall Rates (a)	2/50 (4%)	2/49 (4%)	4/50 (8%)	1/50 (2%)
Adjusted Rates (b)	5.5%	8.7%	19.0%	2.3%
Terminal Rates (c)	0/16(0%)	1/16 (6%)	2/17 (12%)	0/9 (0%)
I CI IIIIIAI IVALES (C)	86	88	96	79
Week of First Observation	00			
	P = 0.555N	P = 0.677N	P = 0.357	P = 0.523N
Week of First Observation			P = 0.357 P = 0.336	P = 0.523N P = 0.366N
Week of First Observation Life Table Tests (d)	P = 0.555N	P = 0.677N		

## TABLE E1. ANALYSIS OF PRIMARY TUMORS IN MALE RATS IN THE TWO-YEAR INHALATION STUDY OF DICHLOROMETHANE

	Control	1,000 ppm	<b>2,000</b> ppm	4,000 ppm
Pituitary: Adenoma				
Overall Rates (a)	20/50 (40%)	31/47 (66%)	27/49 (55%)	24/49 (49%)
Adjusted Rates (b)	67.2%	87.4%	81.9%	79.8%
Terminal Rates (c)	8/16 (50%)	12/16 (75%)	12/17 (71%)	5/9 (56%)
Week of First Observation	70	67	70	62
Life Table Tests (d)	P = 0.078	P = 0.057	P = 0.190	P = 0.063
Incidental Tumor Tests (d)	P = 0.363	P=0.013	P = 0.101	P=0.207
Cochran-Armitage Trend Test (d) Fisher Exact Test (d)	P=0.437	P=0.009	P=0.096	P=0.243
ituitary: Adenoma or Carcinoma				
Overall Rates (a)	20/50 (40%)	32/47 (68%)	97/40 (550)	94/40 (400)
	20/30 (40%) 67.2%		27/49 (55%)	24/49 (49%)
Adjusted Rates (b)		87.6%	81.9%	79.8%
Terminal Rates (c)	8/16 (50%)	12/16 (75%)	12/17 (71%)	5/9 (56%)
Week of First Observation	70	62	70	62
Life Table Tests (d)	P=0.089	P=0.043	P = 0.190	P = 0.063
Incidental Tumor Tests (d)	P = 0.383	P = 0.007	P = 0.101	P = 0.207
Cochran-Armitage Trend Test (d)	P = 0.466	D 0.007	<b>D</b>	<b>n</b>
Fisher Exact Test (d)		P = 0.005	P = 0.096	P=0.243
drenal: Pheochromocytoma	F # 0. /4 0.001	11/0 /00		
Overall Rates (a)	5/50 (10%)	11/50 (22%)	10/50 (20%)	10/50 (20%)
Adjusted Rates (b)	23.5%	46.4%	45.4%	52. <b>9%</b>
Terminal Rates (c)	2/16 (13%)	5/16 (31%)	6/17 (35%)	3/9 (33%)
Week of First Observation	75	89	89	80
Life Table Tests (d)	P=0.035	P=0.094	P = 0.149	P = 0.039
Incidental Tumor Tests (d)	P=0.131	P=0.093	P = 0.131	P = 0.108
Cochran-Armitage Trend Test (d)	P=0.192	<b>D</b>		
Fisher Exact Test (d)		P = 0.086	P=0.131	P = 0.131
drenal: Pheochromocytoma or Pheo				
Overall Rates (a)	5/50 (10%)	11/50 (22%)	11/50 (22%)	10/50 (20%)
Adjusted Rates (b)	23.5%	46.4%	47.0%	<b>52.9%</b>
Terminal Rates (c)	2/16(13%)	5/16 (31%)	6/17 (35%)	3/9 (33%)
Week of First Observation	75	89	89	80
Life Table Tests (d)	P = 0.034	P=0.094	P = 0.104	P = 0.039
Incidental Tumor Tests (d)	P=0.134	P = 0.093	P = 0.087	P = 0.108
Cochran-Armitage Trend Test (d)	P = 0.186			
Fisher Exact Test (d)	1 -0.100	P=0.086	P=0.086	P=0.131
hyroid: C-Cell Adenoma				
Overall Rates (a)	1/49 (2%)	3/48 (6%)	6/49 (12%)	2/50 (4%)
Adjusted Rates (b)	2.4%	16.5%	28.8%	4.6%
Terminal Rates (c)	0/16 (0%)	2/16 (13%)	4/17 (24%)	0/9 (0%)
Week of First Observation	81	101	94	79
Life Table Tests (d)	P = 0.253	P = 0.313	P = 0.067	P = 0.500
Incidental Tumor Tests (d)	P = 0.388	P = 0.306	P = 0.061	P = 0.661
Cochran-Armitage Trend Test (d)	P = 0.385	1 -0.300	r - 0.001	r - 0.001
Fisher Exact Test (d)	г V.400	P=0.301	P=0.056	P = 0.508
amaide () Call Adapama an Carainan				
yroid: C-Cell Adenoma or Carcinon		A/AQ (Q0L)	7/40 (1 40)	9/50 (401)
Overall Rates (a)	2/49 (4%)	4/48 (8%)	7/49 (14%)	2/50 (4%)
Adjusted Rates (b)	6.1%	19.0%	30.7%	4.6%
Terminal Rates (c)	0/16(0%)	2/16(13%)	4/17 (24%)	0/9 (0%)
Week of First Observation	81	92	88	79
Life Table Tests (d)	P = 0.413	P = 0.351	P = 0.098	P = 0.664
	D = 0 = 0	P = 0.337	P = 0.082	P = 0.546N
Incidental Tumor Tests (d)	P = 0.530N	r = 0.557	1 -0.002	1 0.04011
Incidental Tumor Tests (d) Cochran-Armitage Trend Test (d) Fisher Exact Test (d)	P = 0.530 N P = 0.537 N	P = 0.329	P = 0.082	P = 0.684N

### TABLE E1. ANALYSIS OF PRIMARY TUMORS IN MALE RATS IN THE TWO-YEAR INHALATION STUDY OF DICHLOROMETHANE (Continued)

## TABLE E1. ANALYSIS OF PRIMARY TUMORS IN MALE RATS IN THE TWO-YEAR INHALATION STUDY OF DICHLOROMETHANE (Continued)

	Control	1,000 ppm	<b>2,000 ppm</b>	<b>4,000</b> ppm
Pancreatic Islets: Islet Cell Adenom	a			
Overall Rates (a)	3/48 (6%)	6/46 (13%)	2/48 (4%)	2/48 (4%)
Adjusted Rates (b)	15.2%	26.0%	11.8%	8.7%
Terminal Rates (c)	2/16 (13%)	2/16 (13%)	2/17 (12%)	0/9 (0%)
Week of First Observation	92	88	104	78
Life Table Tests (d)	P = 0.398N	P = 0.258	P = 0.475N	P = 0.635N
Incidental Tumor Tests (d)	P = 0.287N	P = 0.247	P=0.485N	P = 0.561N
Cochran-Armitage Trend Test (d)	P = 0.228N		-	
Fisher Exact Test (d)		P = 0.222	P = 0.500N	P = 0.500N
ancreatic Islets: Islet Cell Adenom				
Overall Rates (a)	3/48 (6%)	7/46 (15%)	2/48 (4%)	2/48 (4%)
Adjusted Rates (b)	15.2%	31.3%	11.8%	8.7%
Terminal Rates (c)	2/16 (13%)	3/16 (19%)	2/17 (12%)	0/9 (0%)
Week of First Observation	92	88	104	78
Life Table Tests (d)	P=0.364N	P = 0.171	P = 0.475N	P = 0.635N
Incidental Tumor Tests (d)	P = 0.261 N	P = 0.162	P = 0.485N	P = 0.561N
Cochran-Armitage Trend Test (d)	P=0.194N			
Fisher Exact Test (d)		P = 0.141	P = 0.500N	P = 0.500 N
ammary Gland: Fibroadenoma				
Overall Rates (a)	0/50 (0%)	0/50 (0%)	2/50 (4%)	4/50 (8%)
Adjusted Rates (b)	0.0%	0.0%	11.8%	34.0%
Terminal Rates (c)	0/16 (0%)	0/16 (0%)	2/17 (12%)	2/9 (22%)
Week of First Observation	0/10(070)		104	101
Life Table Tests (d)	P<0.001	(e)	P = 0.250	P = 0.020
Incidental Tumor Tests (d)	P = 0.003	(e)	P = 0.250	P = 0.020
Cochran-Armitage Trend Test (d)	P = 0.009	(8)	1 -0.200	1 -0.040
Fisher Exact Test (d)	1 -0.009	(e)	P=0.247	P=0.059
fammary Gland: Adenoma or Fibro	adenoma			
Overall Rates (a)	0/50 (0%)	0/50 (0%)	2/50 (4%)	5/50 (10%)
	0.0%	0.0%	11.8%	36.6%
Adjusted Rates (b)			2/17 (12%)	2/9 (22%)
Terminal Rates (c)	0/16 (0%)	0/16 (0%)		
Week of First Observation	D .0.004		104	93
Life Table Tests (d)	P<0.001	(e)	P = 0.250	P = 0.010
Incidental Tumor Tests (d)	P<0.001	(e)	P = 0.250	P = 0.023
Cochran-Armitage Trend Test (d)	P = 0.003			
Fisher Exact Test (d)		(e)	P=0.247	P=0.028
lammary Gland or Subcutaneous Tis				
Overall Rates (a)	1/50 (2%)	1/50 (2%)	4/50 (8%)	9/50 (18%)
Adjusted Rates (b)	6.3%	6.3%	20.6%	49.0%
Terminal Rates (c)	1/16 (6%)	1/16 (6%)	3/17 (18%)	2/9 (22%)
Week of First Observation	104	104	96	89
Life Table Tests (d)	P<0.001	P = 0.764	P=0.196	P = 0.002
Incidental Tumor Tests (d)	P=0.003	P = 0.764	P=0.186	P = 0.008
Cochran-Armitage Trend Test (d)	P<0.001			
Fisher Exact Test (d)		P = 0.753N	P=0.181	P=0.008
reputial Gland: Carcinoma				
	3/50 (6%)	1/50 (2%)	3/50 (6%)	2/50 (4%)
			11.5%	13.9%
Overall Rates (a)	15 194	3.0%		
Overall Rates (a) Adjusted Rates (b)	15.1% 2/16 (13%)	3.0% 0/16 (0%)		
Overall Rates (a) Adjusted Rates (b) Terminal Rates (c)	2/16 (13%)	0/16 (0%)	1/17 (6%)	1/9 (11%)
Overall Rates (a) Adjusted Rates (b) Terminal Rates (c) Week of First Observation	2/16 (13%) 91	0/16 (0%) 92	1/17 (6%) 84	1/9 (11%) 89
Overall Rates (a) Adjusted Rates (b) Terminal Rates (c) Week of First Observation Life Table Tests (d)	2/16 (13%) 91 P=0.522	0/16 (0%) 92 P=0.304N	1/17 (6%) 84 P=0.641N	1/9 (11%) 89 P=0.678N
Overall Rates (a) Adjusted Rates (b) Terminal Rates (c) Week of First Observation	2/16 (13%) 91	0/16 (0%) 92	1/17 (6%) 84	1/9 (11%) 89

# TABLE E1. ANALYSIS OF PRIMARY TUMORS IN MALE RATS IN THE TWO-YEAR INHALATION STUDY OF DICHLOROMETHANE (Continued)

	Control	1,000 ppm	2,000 ppm	4,000 ppm
Preputial Gland: Adenoma or Carcin	oma			
Overall Rates (a)	3/50 (6%)	1/50 (2%)	3/50 (6%)	4/50 (8%)
Adjusted Rates (b)	15.1%	3.0%	11.5%	35.4%
Terminal Rates (c)	2/16 (13%)	0/16 (0%)	1/17 (6%)	3/9 (33%)
Week of First Observation	91	92	84	89
Life Table Tests (d)	P = 0.139	P = 0.304N	P = 0.641N	P = 0.262
	P = 0.139 P = 0.235	P = 0.304 N P = 0.305 N	P = 0.654N	P = 0.202 P = 0.334
Incidental Tumor Tests (d)	P = 0.235 P = 0.282	F = 0.305 N	P=0.0341	P=0.334
Cochran-Armitage Trend Test (d) Fisher Exact Test (d)	P=0.282	P=0.309N	P=0.661	P=0.500
estis: Interstitial Cell Tumor				
Overall Rates (a)	39/50 (78%)	37/49 (76%)	41/50 (82%)	43/50 (86%)
Adjusted Rates (b)	94.9%	97.3%	95.2%	97.7%
Terminal Rates (c)	14/16 (88%)	15/16 (94%)	15/17 (88%)	8/9 (89%)
Week of First Observation	65	69	75	75
Life Table Tests (d)	P=0.009	P = 0.420N	P = 0.512	P = 0.029
Incidental Tumor Tests (d)	P = 0.103 P = 0.114	P = 0.385N	P = 0.312 P = 0.387	P = 0.029 P = 0.258
Cochran-Armitage Trend Test (d)	P = 0.114 P = 0.129	L 0.90014	r - 0.001	F - 0.400
Fisher Exact Test (d)	r=v.129	P=0.478N	P=0.401	P=0.218
unica Vaginalis: Malignant Mesothe	lioma			
Overall Rates (a)	0/50 (0%)	1/50 (2%)	0/50 (0%)	3/50 (6%)
Adjusted Rates (b)	0.0%	2.2%	0.0%	19.6%
Terminal Rates (c)	0/16 (0%)	2.2% 0/16(0%)	0/17 (0%)	0/9(0%)
Week of First Observation	V/10 (U70)	69	UIII (U70)	92
Life Table Tests (d)	P=0.025	P = 0.496	(0)	P = 0.068
			(e)	
Incidental Tumor Tests (d)	P = 0.060	P = 0.473	(e)	P = 0.172
Cochran-Armitage Trend Test (d) Fisher Exact Test (d)	P=0.044	P = 0.500	(e)	P = 0.121
'unica Vaginalis: Mesothelioma (All I	'umos)			
Overall Rates (a)	0/50 (0%)	1/50 (2%)	4/50 (8%)	4/50 (8%)
Adjusted Rates (b)	0.0%	2.2%	19.2%	24.4%
Terminal Rates (c)	0/16 (0%)	0/16(0%)	2/17 (12%)	0/9 (0%)
Week of First Observation		69	96	92
Life Table Tests (d)	P = 0.009	P=0.496	P=0.070	P = 0.031
Incidental Tumor Tests (d)	P = 0.030	P = 0.473	P = 0.062	P = 0.097
Cochran-Armitage Trend Test (d)	P = 0.029			<b>_</b>
Fisher Exact Test (d)		P = 0.500	P = 0.059	P = 0.059
Il Sites: Malignant Mesothelioma	0/50 (07)	9/50 ( 401 )		DED (COL)
Overall Rates (a)	0/50 (0%)	2/50 (4%)	0/50 (0%)	3/50 (6%)
Adjusted Rates (b)	0.0%	4.4%	0.0%	19.6%
Terminal Rates (c)	0/16 (0%)	0/16(0%)	0/17 (0%)	0/9 (0%)
Week of First Observation	D 0 000	69	<i>.</i>	92
Life Table Tests (d)	P = 0.066	P=0.243	(e)	P = 0.068
Incidental Tumor Tests (d)	P = 0.136	P = 0.225	(e)	P = 0.172
Cochran-Armitage Trend Test (d) Fisher Exact Test (d)	P=0.097	P = 0.247	(e)	P=0.121
		1 - 0.241		r - V.141
ll Sites: Mesothelioma (All Types) Overall Rates (a)	0/50 (0%)	2/50 (4%)	5/50 (10%)	4/50 (8%)
Adjusted Rates (b)	0.0%	4.4%	22.8%	4/50 (8%) 24.4%
Terminal Rates (c)	0/16 (0%)	4.470 0/16(0%)	22.8 <del>%</del> 2/17 (12%)	24.470 0/9 (0%)
Week of First Observation	0/10(070)	69	2/17 (12%) 96	92
Life Table Tests (d)	P=0.020	P = 0.243	P = 0.038	P = 0.031
	P = 0.020 P = 0.063	P = 0.243 P = 0.225	P = 0.038 P = 0.030	P = 0.031 P = 0.097
Incidental Tumor Tests (d)	r - 0.003	F - U.440	F - 0.030	r - 0.09/
	D-0 050			
Cochran-Armitage Trend Test (d) Fisher Exact Test (d)	P = 0.052	P=0.247	P = 0.028	P=0.059

## TABLE E1. ANALYSIS OF PRIMARY TUMORS IN MALE RATS IN THE TWO-YEAR INHALATION STUDY OF DICHLOROMETHANE (Continued)

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

(e) No P value is reported because no tumors were observed in the dosed and control groups

⁽b) Kaplan-Meier estimated tumor incidences at the end of the study after adjusting for intercurrent mortality

⁽c) Observed tumor incidence at terminal kill

⁽d) Beneath the control incidence are the P values associated with the trend test. Beneath the dosed group incidence are the P values corresponding to pairwise comparisons 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 nonfatal. The Cochran-Armitage and Fisher exact test compare directly the overall incidence rates. A negative trend or lower incidence in a dosed group is indicated by (N).

# TABLE E2. ANALYSIS OF PRIMARY TUMORS IN FEMALE RATS IN THE TWO-YEAR INHALATION STUDY OF DICHLOROMETHANE

	Control	1,000 ppm	2,000 ppm	4,000 ppm
Iematopoietic System: Mononuclear	Cell Leukemia		<u></u>	<u></u>
Overall Rates (a)	17/50 (34%)	17/50 (34%)	23/50 (46%)	23/50 (46%)
Adjusted Rates (b)	41.1%	44.4%	63.6%	58.1%
Terminal Rates (c)	8/30 (27%)	4/22 (18%)	10/22 (45%)	1/15 (7%)
Week of First Observation	73	76	73	63
Life Table Tests (d)	P = 0.009	P = 0.402	P = 0.049	P = 0.028
Incidental Tumor Tests (d)	P = 0.273	P = 0.425N	P = 0.189	P = 0.579
Cochran-Armitage Trend Test (d)	P = 0.086	1 -0.42010	1 -0.105	1 -0.015
Fisher Exact Test (d)	1 -0.000	P = 0.584 N	P = 0.154	P = 0.154
iver: Neoplastic Nodule				
Overall Rates (a)	2/50 (4%)	1/50 (2%)	3/50 (6%)	5/50 (10%)
Adjusted Rates (b)	6.7%	2.0%	10.2%	19.6%
Terminal Rates (c)	2/30 (7%)	0/22 (0%)	1/22 (5%)	1/15 (7%)
Week of First Observation	104	61	85	73
Life Table Tests (d)	P=0.030	P = 0.569N	P = 0.382	P = 0.080
Incidental Tumor Tests (d)		P = 0.569 N P = 0.494 N		
	P = 0.097	r = 0.49411	P = 0.482	P = 0.229
Cochran-Armitage Trend Test (d) Fisher Exact Test (d)	P = 0.078	P = 0.500 N	P = 0.500	P=0.218
iver: Neoplastic Nodule or Hepatoc	ellular Carcinoma			
Overall Rates (a)	2/50 (4%)	1/50 (2%)	4/50 (8%)	5/50 (10%)
Adjusted Rates (b)	6.7%	2.0%	14.4%	19.6%
Terminal Rates (c)	2/30 (7%)	0/22 (0%)	2/22 (9%)	1/15 (7%)
Week of First Observation	104	61		• •
			85	73
Life Table Tests (d)	P = 0.027	P = 0.569N	P = 0.223	P = 0.080
Incidental Tumor Tests (d)	P = 0.086	P = 0.494N	P = 0.297	P = 0.229
Cochran-Armitage Trend Test (d) Fisher Exact Test (d)	P = 0.079	P = 0.500N	P=0.339	P=0.218
ituitary: Adenoma				
Overall Rates (a)	24/49 (49%)	30/49 (61%)	25/49 (51%)	25/49 (51%)
Adjusted Rates (b)	62.1%	82.2%	76.2%	83.5%
Terminal Rates (c)	16/30 (53%)	16/22 (73%)	14/21 (67%)	11/15 (73%)
Week of First Observation	73	74	72	75
Life Table Tests (d)	P = 0.027	P = 0.033	P = 0.104	P = 0.020
Incidental Tumor Tests (d)	P = 0.380	P = 0.138	P = 0.374	P = 0.288
Cochran-Armitage Trend Test (d)	P = 0.380 P = 0.461N	1 - 0.100	1-0.014	1 - 0.200
Fisher Exact Test (d)	1 -0.40111	P = 0.155	P = 0.500	P=0.500
		*		* *
ituitary: Adenoma or Carcinoma	95/40 (510)	20/40 (010)	97140 (550)	OF AD (FIC)
Overall Rates (a)	25/49 (51%)	30/49 (61%)	27/49 (55%)	25/49 (51%)
Adjusted Rates (b)	64.8%	82.2%	80.4%	83.5%
Terminal Rates (c)	17/30 (57%)	16/22 (73%)	15/21 (71%)	11/15(73%)
Week of First Observation	73	74	72	75
Life Table Tests (d)	P = 0.030	P = 0.045	P = 0.065	P = 0.026
Incidental Tumor Tests (d)	P = 0.416	P = 0.179	P = 0.277	P = 0.338
Cochran-Armitage Trend Test (d) Fisher Exact Test (d)	P = 0.414N	P = 0.208	P=0.420	P = 0.580
		- 0.000		1 - 0.000
drenal: Pheochromocytoma		a maa 100		
Overall Rates (a)	2/50 (4%)	1/50 (2%)	4/49 (8%)	1/49 (2%)
Adjusted Rates (b)	5.9%	2.9%	19.0%	6.7%
Terminal Rates (c)	1/30 (3%)	0/22 (0%)	4/21 (19%)	1/15 (7%)
Week of First Observation	93	94	104	104
Life Table Tests (d)	P = 0.465	P = 0.545N	P = 0.195	P = 0.683N
Incidental Tumor Tests (d)	P = 0.551	P = 0.393N	P = 0.210	P = 0.581N
Cochran-Armitage Trend Test (d)	P = 0.510N			

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	Control	1 <b>,000</b> ppm	2,000 ppm	4,000 ppm
Adrenal: Pheochromocytoma or Pheo	chromocytoma. N			
Overall Rates (a)	2/50 (4%)	3/50 (6%)	4/49 (8%)	1/49 (2%)
Adjusted Rates (b)	5.9%	8.9%	19.0%	6.7%
Terminal Rates (c)	1/30 (3%)	0/22 (0%)	4/21 (19%)	1/15 (7%)
Week of First Observation	93	89	104	104
Life Table Tests (d)			P = 0.195	P = 0.683N
	P = 0.578	P=0.447		
Incidental Tumor Tests (d)	P = 0.455N	P = 0.639	P = 0.210	P = 0.581 N
Cochran-Armitage Trend Test (d)	P = 0.381N			
Fisher Exact Test (d)		P = 0.500	P = 0.329	P=0.508N
yroid: C-Cell Adenoma				
Overall Rates (a)	2/47 (4%)	0/46 (0%)	4/48 (8%)	2/42 (5%)
Adjusted Rates (b)	6.4%	0.0%	18.2%	7.8%
Terminal Rates (c)	1/27 (4%)	0/21 (0%)	4/22 (18%)	0/11 (0%)
Week of First Observation	96		104	91
Life Table Tests (d)	P = 0.172	P = 0.281 N	P = 0.243	P=0.512
Incidental Tumor Tests (d)	P = 0.279	P=0.205N	P = 0.250	P=0.633N
Cochran-Armitage Trend Test (d)	P = 0.359			
Fisher Exact Test (d)		P=0.253N	P = 0.349	P=0.648
yroid: C-Cell Carcinoma				
Overall Rates (a)	3/47 (6%)	0/46 (0%)	2/48 (4%)	2/42 (5%)
Adjusted Rates (b)	11.1%	0.0%	7.3%	11.8%
Terminal Rates (c)	3/27 (11%)	0/21 (0%)	1/22 (5%)	1/11 (9%)
Week of First Observation	104	VINE (VIV)	86	90
Life Table Tests (d)	P = 0.393	P = 0.167N	P = 0.591N	P = 0.541
Incidental Tumor Tests (d)	P = 0.469	P = 0.167 N P = 0.167 N	P = 0.542N	P = 0.541 P = 0.598
Cochran-Armitage Trend Test (d)	P = 0.409 P = 0.590	1 -0.10/14	1 -0.02411	1 -0.090
Fisher Exact Test (d)	r - 0.070	P=0.125N	P=0.490N	P=0.554N
hyroid: C-Cell Adenoma or Carcinoi	<b>m</b> 9			
		0/46 (00)	6/49 (1901)	A/A9 (100)
Overall Rates (a)	5/47 (11%)	0/46 (0%)	6/48 (13%)	4/42 (10%)
Adjusted Rates (b)	17.2%	0.0%	24.9%	18.8%
Terminal Rates (c)	4/27 (15%)	0/21 (0%)	5/22 (23%)	1/11 (9%)
Week of First Observation	96		86	90
Life Table Tests (d)	P=0.138	P=0.056N	P=0.356	P=0.395
Incidental Tumor Tests (d)	P = 0.245	P=0.040N	P=0.395	P = 0.625
Cochran-Armitage Trend Test (d)	P = 0.384			
Fisher Exact Test (d)		P=0.030N	P=0.515	P=0.572N
ancreatic Islets: Islet Cell Adenoma				
Overall Rates (a)	3/50 (6%)	0/48 (0%)	0/50 (0%)	0/46 (0%)
Adjusted Rates (b)	10.0%	0.0%	0.0%	0.0%
Terminal Rates (c)	3/30 (10%)	0/22 (0%)	0/22 (0%)	0/15 (0%)
Week of First Observation	104			
Life Table Tests (d)	P=0.086N	P=0.180N	P=0.180N	P = 0.265N
Incidental Tumor Tests (d)	P = 0.086N	P = 0.180N	P = 0.180N	P = 0.265N
Cochran-Armitage Trend Test (d)	P = 0.050N	0.10011	0.10014	0.20011
Fisher Exact Test (d)	r - 0.00011	P=0.129N	P = 0.121N	P=0.137N
ammary Gland: Fibroadenoma				
	5/50 (10%)	11/50 (22%)	13/50 (26%)	22/50 (44%
Overall Rates (a)				
Adjusted Rates (b)	15.7%	41.2%	43.6%	79.4%
Terminal Rates (c)	4/30 (13%)	8/22 (36%)	7/22 (32%)	10/15 (67%
Week of First Observation	96 D - 0 001	74	65	73
Life Table Tests (d)	P<0.001	P = 0.028	P=0.009	P<0.001
			P = 0.025	P<0.001
Incidental Tumor Tests (d)	P<0.001	P = 0.049	F = 0.023	F < 0.001
Incidental Tumor Tests (d) Cochran-Armitage Trend Test (d) Fisher Exact Test (d)	P<0.001 P<0.001	P = 0.049 P = 0.086	P = 0.023 P = 0.033	P<0.001

# TABLE E2. ANALYSIS OF PRIMARY TUMORS IN FEMALE RATS IN THE TWO-YEAR INHALATION STUDY OF DICHLOROMETHANE (Continued)

# TABLE E2. ANALYSIS OF PRIMARY TUMORS IN FEMALE RATS IN THE TWO-YEAR INHALATION STUDY OF DICHLOROMETHANE (Continued)

	Control	1,000 ppm	<b>2,000</b> ppm	4,000 ppm
Mammary Gland: Adenoma or Fibroa	denoma			<u> </u>
Overall Rates (a)	5/50 (10%)	11/50 (22%)	13/50 (26%)	23/50 (46%)
Adjusted Rates (b)	15.7%	41.2%	43.6%	83.5%
Terminal Rates (c)	4/30 (13%)	8/22 (36%)	7/22 (32%)	11/15 (73%)
Week of First Observation	96	74	65	73
Life Table Tests (d)	P<0.001	P = 0.028	P = 0.009	P<0.001
Incidental Tumor Tests (d)	P<0.001 P<0.001	P = 0.028 P = 0.049	P = 0.009 P = 0.025	P<0.001 P<0.001
		P = 0.049	P = 0.025	F<0.001
Cochran-Armitage Trend Test (d) Fisher Exact Test (d)	P<0.001	P=0.086	P = 0.033	P<0.001
fammary Gland: Adenoma, Fibroade			1450 (000)	00 (50 (10 %)
Overall Rates (a)	6/50 (12%)	13/50 (26%)	14/50 (28%)	23/50 (46%)
Adjusted Rates (b)	17.8%	44.4%	44.9%	83.5%
Terminal Rates (c)	4/30 (13%)	8/22 (36%)	7/22 (32%)	11/15 (73%)
Week of First Observation	92	74	65	73
Life Table Tests (d)	P<0.001	P=0.023	P = 0.012	P<0.001
Incidental Tumor Tests (d)	P<0.001	P = 0.053	P=0.043	P<0.001
Cochran-Armitage Trend Test (d)	P<0.001			
Fisher Exact Test (d)		P = 0.062	P=0.039	P<0.001
ammary Gland: Adenoma, Fibroade	noma. Adanocar	vinoma, or Mived	Tumor Malignan	+
Overall Rates (a)	7/50 (14%)	13/50 (26%)	(e) $14/50(28\%)$	
				23/50 (46%)
Adjusted Rates (b)	20.0%	44.4%	44.9%	83.5%
Terminal Rates (c)	4/30 (13%)	8/22 (36%)	7/22 (32%)	11/15(73%)
Week of First Observation	92	74	65	73
Life Table Tests (d)	P<0.001	P = 0.045	P = 0.022	P<0.001
Incidental Tumor Tests (d)	P<0.001	P = 0.092	P = 0.083	P<0.001
Cochran-Armitage Trend Test (d)	P<0.001			
Fisher Exact Test (d)		P = 0.105	P = 0.070	P<0.001
litoral Gland: Cystadenoma or Carci	noma			
Overall Rates (a)	1/50 (2%)	2/50 (4%)	2/50 (4%)	3/50 (6%)
Adjusted Rates (b)	2.5%	9.1%	8.5%	14.2%
Terminal Rates (c)	0/30 (0%)			
		2/22 (9%)	1/22 (5%)	1/15 (7%)
Week of First Observation	92	104	101	80
Life Table Tests (d)	P = 0.101	P = 0.423	P = 0.399	P = 0.181
Incidental Tumor Tests (d)	P = 0.212	P=0.428	P=0.507	P = 0.383
Cochran-Armitage Trend Test (d)	P = 0.232			
Fisher Exact Test (d)		P = 0.500	P = 0.500	P=0.309
terus: Endometrial Stromal Polyp				
Overall Rates (a)	7/50 (14%)	9/49 (18%)	7/50 (14%)	6/47 (13%)
Adjusted Rates (b)	18.1%	32.0%	21.7%	33.2%
Terminal Rates (c)	2/30 (7%)	5/21 (24%)	2/22 (9%)	33.2% 4/15 (27%)
Week of First Observation	73	5/21 (24%) 74		
			76	89
Life Table Tests (d)	P = 0.413	P = 0.253	P = 0.455	P = 0.377
Incidental Tumor Tests (d)	P = 0.381N	P = 0.530	P = 0.519N	P = 0.513N
Cochran-Armitage Trend Test (d)	P=0.399N			
Fisher Exact Test (d)		P=0.376	P = 0.613	P = 0.548N
erus: Endometrial Stromal Sarcoma				
Overall Rates (a)	0/50 (0%)	3/49 (6%)	1/50 (2%)	2/47 (4%)
	0.0%	7.4%	2.0%	5.0%
			0/22 (0%)	0/15 (0%)
Adjusted Rates (b)		0/21 (0%)		
Adjusted Rates (b) Terminal Rates (c)	0/30 (0%)	0/21 (0%) 74		
Adjusted Rates (b) Terminal Rates (c) Week of First Observation	0/30 (0%)	74	62	59
Adjusted Rates (b) Terminal Rates (c) Week of First Observation Life Table Tests (d)	0/30 (0%) P=0.296	74 P=0.119	62 P = 0.504	59 P=0.218
Adjusted Rates (b) Terminal Rates (c) Week of First Observation Life Table Tests (d) Incidental Tumor Tests (d)	0/30 (0%) P=0.296 P=0.494	74	62	59
Adjusted Rates (b) Terminal Rates (c) Week of First Observation Life Table Tests (d)	0/30 (0%) P=0.296	74 P=0.119	62 P = 0.504	59 P=0.218

## TABLE E2. ANALYSIS OF PRIMARY TUMORS IN FEMALE RATS IN THE TWO-YEAR INHALATION STUDY OF DICHLOROMETHANE (Continued)

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

(c) Observed tumor incidence at terminal kill

(e) A carcinoma was also present in one of the animals that had a fibroadenoma.

⁽b) Kaplan-Meier estimated tumor incidences at the end of the study after adjusting for intercurrent mortality

⁽d) Beneath the control incidence are the P values associated with the trend test. Beneath the dosed group incidence are the P values corresponding to pairwise comparisons 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 nonfatal. The Cochran-Armitage and Fisher exact test compare directly the overall incidence rates. A negative trend or lower incidence in a dosed group is indicated by (N).

	Control	2,000 ppm	4,000 ppm
Lung: Alveolar/Bronchiolar Adenoma		<u></u>	<u></u>
Overall Rates (a)	3/50 (6%)	19/50 (38%)	24/50 (48%)
Adjusted Rates (b)	7.7%	55.6%	78.5%
Terminal Rates (c)	3/39 (8%)	10/24 (42%)	6/11 (55%)
Week of First Observation	104	71	70
		P<0.001	
Life Table Tests (d)	P<0.001		P<0.001
Incidental Tumor Tests (d)	P<0.001	P<0.001	P<0.001
Cochran-Armitage Trend Test (d)	P<0.001		5 . 6 6 6 4
Fisher Exact Test (d)		P<0.001	P<0.001
ung: Alveolar/Bronchiolar Carcinoma			
Overall Rates (a)	2/50 (4%)	10/50 (20%)	28/50 (56%)
Adjusted Rates (b)	4.9%	34.0%	92.9%
Terminal Rates (c)	1/39 (3%)	6/24 (25%)	9/11 (82%)
Week of First Observation	94	78	72
Life Table Tests (d)	P<0.001	P = 0.002	P<0.001
Incidental Tumor Tests (d)	P<0.001	P = 0.016	P<0.001
Cochran-Armitage Trend Test (d)	P<0.001		* ~~
Fisher Exact Test (d)	1 \0.001	P=0.014	P<0.001
ung: Alveolar/Bronchiolar Adenoma or ( Overall Rates (a)	arcinoma 5/50 (10%)	27/50 (54%)	40/50 (80%)
Adjusted Rates (b)	12.4%	74.2%	100.0%
Terminal Rates (c)	4/39 (10%)	15/24 (63%)	11/11 (100%)
Week of First Observation	94	71	70
Life Table Tests (d)		P<0.001	
	P<0.001	P<0.001 P<0.001	P<0.001 P<0.001
Incidental Tumor Tests (d)	P<0.001	P<0.001	P<0.001
Cochran-Armitage Trend Test (d) Fisher Exact Test (d)	P<0.001	P<0.001	P<0.001
lematopoietic System: Lymphoma, All M			
Overall Rates (a)	5/50 (10%)	3/50 (6%)	2/50 (4%)
Adjusted Rates (b)	12.1%	10.4%	6.5%
Terminal Rates (c)	4/39 (10%)	2/24 (8%)	0/11 (0%)
Week of First Observation	71	76	90
Life Table Tests (d)	P = 0.511N	P=0.573N	P=0.604N
Incidental Tumor Tests (d)	P = 0.301 N	P=0.482N	P=0.365N
Cochran-Armitage Trend Test (d)	P = 0.158N		
Fisher Exact Test (d)		P=0.358N	P=0.218N
irculatory System: Hemangiosarcoma			
Overall Rates (a)	1/50 (2%)	2/50 (4%)	5/50 (10%)
Adjusted Rates (b)	2.6%	7.6%	21.4%
Terminal Rates (c)	1/39 (3%)	1/24 (4%)	1/11 (9%)
Week of First Observation			
	104 R0.007	101 D=0.252	70 R=0.017
Life Table Tests (d)	P = 0.007	P = 0.352	P = 0.017
Incidental Tumor Tests (d)	P = 0.083	P=0.495	P = 0.142
Cochran-Armitage Trend Test (d)	P = 0.060		D 0 100
Fisher Exact Test (d)		P=0.500	P = 0.102
rculatory System: Hemangioma or Hem	•		
	2/50 (4%)	2/50 (4%)	6/50 (12%)
Overall Rates (a)		7.6%	25.8%
Overall Rates (a) Adjusted Rates (b)	4.8%		
	4.8% 1/39 (3%)	1/24 (4%)	1/11 (9%)
Adjusted Rates (b)		1/24 (4%) 101	1/11 (9%) 70
Adjusted Rates (b) Terminal Rates (c)	1/39 (3%) 87		70
Adjusted Rates (b) Terminal Rates (c) Week of First Observation Life Table Tests (d)	1/39 (3%) 87 P=0.010	101 P=0.558	70 P=0.022
Adjusted Rates (b) Terminal Rates (c) Week of First Observation	1/39 (3%) 87	101	70

## TABLE E3. ANALYSIS OF PRIMARY TUMORS IN MALE MICE IN THE TWO-YEAR INHALATION STUDY OF DICHLOROMETHANE

	Control	2,000 ppm	4,000 ppm
Liver: Hepatocellular Adenoma			
Overall Rates (a)	10/50 (20%)	14/49 (29%)	14/49 (29%)
Adjusted Rates (b)	23.0%	46.9%	68.3%
Terminal Rates (c)	7/39 (18%)	9/24 (38%)	6/11 (55%)
Week of First Observation	73	71	80
Life Table Tests (d)	P<0.001	P = 0.041	P=0.001
Incidental Tumor Tests (d)	P = 0.075	P = 0.161	P=0.095
Cochran-Armitage Trend Test (d)	P=0.194		
Fisher Exact Test (d)		P = 0.224	P = 0.224
liver: Hepatocellular Carcinoma			
Overall Rates (a)	13/50 (26%)	15/49 (31%)	26/49 (53%)
Adjusted Rates (b)	29.7%	43.7%	76.4%
Terminal Rates (c)	9/39 (23%)	7/24 (29%)	5/11 (45%)
Week of First Observation	73	72	61
Life Table Tests (d)	P<0.001	P=0.111	P<0.001
Incidental Tumor Tests (d)	P = 0.016	P = 0.422	P=0.042
Cochran-Armitage Trend Test (d)	P = 0.004		
Fisher Exact Test (d)		P=0.387	P = 0.005
Liver: Hepatocellular Adenoma or Carcir	noma		
Overall Rates (a)	22/50 (44%)	24/49 (49%)	33/49 (67%)
Adjusted Rates (b)	48.3%	66.8%	93.0%
Terminal Rates (c)	16/39 (41%)	13/24 (54%)	9/11 (82%)
Week of First Observation	73	71	61
Life Table Tests (d)	P<0.001	P = 0.048	P<0.001
Incidental Tumor Tests (d)	P=0.010	P = 0.305	P = 0.020
Cochran-Armitage Trend Test (d)	P=0.013		
Fisher Exact Test (d)		P=0.384	P=0.016
Festis: Interstitial Cell Tumor			
Overall Rates (a)	3/50 (6%)	0/50 (0%)	0/50 (0%)
Adjusted Rates (b)	7.7%	0.0%	0.0%
Terminal Rates (c)	3/39 (8%)	0/24 (0%)	0/11 (0%)
Week of First Observation	104		
Life Table Tests (d)	P=0.137N	P=0.219N	P=0.410N
Incidental Tumor Tests (d)	P = 0.137N	P=0.219N	P=0.410N
Cochran-Armitage Trend Test (d)	P = 0.037N		
Fisher Exact Test (d)		P = 0.121N	P = 0.121N

#### TABLE E3. ANALYSIS OF PRIMARY TUMORS IN MALE MICE IN THE TWO-YEAR INHALATION STUDY OF DICHLOROMETHANE (Continued)

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

(b) Kaplan-Meier estimated tumor incidences at the end of the study after adjusting for intercurrent mortality (c) Observed tumor incidence at terminal kill

(d) Beneath the control incidence are the P values associated with the trend test. Beneath the dosed group incidence are the P values corresponding to pairwise comparisons 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 nonfatal. The Cochran-Armitage and Fisher exact test compare directly the overall incidence rates. A negative trend or lower incidence in a dosed group is indicated by (N).

	Control	<b>2,000</b> ppm	<b>4,000 ppm</b>
Lung: Alveolar/Bronchiolar Adenoma	<u>,</u> ,		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
Overall Rates (a)	2/50 (4%)	23/48 (48%)	28/48 (58%)
Adjusted Rates (b)	6.7%	66.5%	91.1%
Terminal Rates (c)	1/25 (4%)	14/25 (56%)	6/8 (75%)
Week of First Observation	87	83	68
Life Table Tests (d)	P<0.001	P<0.001	P<0.001
Incidental Tumor Tests (d)	P<0.001	P<0.001	P<0.001
Cochran-Armitage Trend Test (d)	P<0.001	1 <0.001	1 <0.001
Fisher Exact Test (d)	P < 0.001	P<0.001	P<0.001
www.Alusalan/Duamahialan Causinama			
Lung: Alveolar/Bronchiolar Carcinoma	1/50 (90)	19/49 (9701)	90/49 (60%)
Overall Rates (a)	1/50 (2%)	13/48 (27%)	29/48 (60%)
Adjusted Rates (b)	4.0%	45.9%	92.2%
Terminal Rates (c)	1/25 (4%)	10/25 (40%)	6/8 (75%)
Week of First Observation	104	89	68
Life Table Tests (d)	P<0.001	P<0.001	P<0.001
Incidental Tumor Tests (d)	P<0.001	P<0.001	P<0.001
Cochran-Armitage Trend Test (d)	P<0.001		
Fisher Exact Test (d)		P<0.001	P<0.001
ung: Alveolar/Bronchiolar Adenoma or C	Carcinoma		
Overall Rates (a)	3/50 (6%)	30/48 (63%)	41/48 (85%)
Adjusted Rates (b)	10.6%	82.9%	100.0%
Terminal Rates (c)	2/25 (8%)	19/25 (76%)	8/8 (100%)
Week of First Observation	87	83	68
Life Table Tests (d)	P<0.001	P<0.001	P<0.001
Incidental Tumor Tests (d)	P<0.001	P<0.001	P<0.001
Cochran-Armitage Trend Test (d)	P<0.001	1 <0.001	1 <0.001
Fisher Exact Test (d)	P<0.001	P<0.001	P<0.001
Iematopoietic System: Lymphoma, Histioe	cytic		
Overall Rates (a)	1/50 (2%)	2/49 (4%)	4/49 (8%)
Adjusted Rates (b)	4.0%	5.5%	16.2%
Terminal Rates (c)	1/25 (4%)	0/25 (0%)	0/8 (0%)
Week of First Observation	104	80	77
Life Table Tests (d)	P=0.054	P = 0.525	P=0.078
Incidental Tumor Tests (d)	P = 0.224	P = 0.538	P = 0.243
Cochran-Armitage Trend Test (d)		r 0.000	r - V.440
Fisher Exact Test (d)	P=0.118	P=0.500	P=0.181
Iematopoietic System: Malignant Lympho		A (AD (DO))	1/40 (94)
Overall Rates (a)	0/50 (0%)	4/49 (8%)	1/49 (2%)
Adjusted Rates (b)	0.0%	13.9%	4.5%
Terminal Rates (c)	0/25 (0%)	2/25 (8%)	0/8 (0%)
Week of First Observation		90	90
Life Table Tests (d)	P = 0.160	P = 0.072	P = 0.425
Incidental Tumor Tests (d)	P = 0.388	P = 0.077	P = 0.615
Cochran-Armitage Trend Test (d)	P=0.390		
Fisher Exact Test (d)		P = 0.059	P = 0.500
lematopoietic System: Lymphoma, All Ma	lignant		
Overall Rates (a)	7/50 (14%)	7/49 (14%)	7/49 (14%)
Adjusted Rates (b)	22.9%	21.7%	28.0%
Terminal Rates (c)	4/25 (16%)	2/25 (8%)	0/8 (0%)
Week of First Observation	4/25 (10 <del>%</del> ) 76	80	77
Life Table Tests (d)	P = 0.201	P = 0.573N	P = 0.242
	r = 0.201		
Incidental Tumon Test (1)	D-0 410N		
Incidental Tumor Tests (d)	P = 0.416N	P = 0.607 N	P = 0.553N
Incidental Tumor Tests (d) Cochran-Armitage Trend Test (d) Fisher Exact Test (d)	P = 0.416N P = 0.557	P = 0.607N P = 0.613	P = 0.553N P = 0.613

# TABLE E4. ANALYSIS OF PRIMARY TUMORS IN FEMALE MICE IN THE TWO-YEAR INHALATION STUDY OF DICHLOROMETHANE

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	Control	2,000 ppm	4,000 ppm
Liver: Hepatocellular Adenoma			
Overall Rates (a)	2/50 (4%)	6/48 (13%)	22/48 (46%)
Adjusted Rates (b)	6.5%	21.3%	83.0%
Terminal Rates (c)	1/25 (4%)	4/25 (16%)	5/8 (63%)
Week of First Observation	84	96	68
Life Table Tests (d)	P<0.001	P = 0.151	P<0.001
Incidental Tumor Tests (d)	P<0.001	P = 0.155	P<0.001
Cochran-Armitage Trend Test (d)	P<0.001		
Fisher Exact Test (d)		P = 0.121	P<0.001
iver: Hepatocellular Carcinoma			
Overall Rates (a)	1/50 (2%)	11/48 (23%)	32/48 (67%)
Adjusted Rates (b)	4.0%	34.0%	96.5%
Terminal Rates (c)	1/25 (4%)	6/25 (24%)	7/8 (88%)
Week of First Observation	104	83	68
Life Table Tests (d)	P<0.001	P = 0.005	P<0.001
Incidental Tumor Tests (d)	P<0.001	P = 0.004	P<0.001
Cochran-Armitage Trend Test (d)	P<0.001		
Fisher Exact Test (d)		P = 0.001	P<0.001
iver: Hepatocellular Adenoma or Carcin			
Overall Rates (a)	3/50 (6%)	16/48 (33%)	40/48 (83%)
Adjusted Rates (b)	10.4%	48.0%	100.0%
Terminal Rates (c)	2/25 (8%)	9/25 (36%)	8/8 (100%)
Week of First Observation	84	83	68
Life Table Tests (d)	P<0.001	P = 0.002	P<0.001
Incidental Tumor Tests (d)	P<0.001	P = 0.002	P<0.001
Cochran-Armitage Trend Test (d) Fisher Exact Test (d)	P<0.001	P<0.001	P<0.001
Fisher Exact lest (u)		F<0.001	F<0.001
Pituitary Gland: Adenoma			
Overall Rates (a)	4/46 (9%)	2/44 (5%)	1/44 (2%)
Adjusted Rates (b)	15.9%	8.3%	2.4%
Terminal Rates (c)	3/24 (13%)	2/24 (8%)	0/8 (0%)
Week of First Observation	99	104	77
Life Table Tests (d)	P = 0.321 N	P = 0.333N	P = 0.469N
Incidental Tumor Tests (d)	P = 0.214N	P = 0.300N	P = 0.287N
Cochran-Armitage Trend Test (d)	P = 0.128N		
Fisher Exact Test (d)		P = 0.360 N	P = 0.195N
fhyroid Gland: Follicular Cell Adenoma			
Overall Rates (a)	1/48 (2%)	1/47 (2%)	4/46 (9%)
Adjusted Rates (b)	4.2%	4.0%	35.0%
Terminal Rates (c)	1/24 (4%)	1/25 (4%)	2/8 (25%)
Week of First Observation	104	104	77
Life Table Tests (d)	P = 0.012	P = 0.754N	P = 0.022
Incidental Tumor Tests (d)	P = 0.040	P = 0.754N	P=0.069
Cochran-Armitage Trend Test (d) Fisher Exact Test (d)	P=0.093	P = 0.747	P = 0.168
fammary Gland: Adenocarcinoma	0/50 / 101	0/40 (00)	0/40 (02)
Overall Rates (a)	2/50 (4%)	3/49 (6%)	0/49 (0%)
Adjusted Rates (b)	8.0%	9.5%	0.0%
Terminal Rates (c)	2/25 (8%)	1/25 (4%)	0/8 (0%)
Week of First Observation	104	88	_
Life Table Tests (d)	P = 0.390N	P = 0.530	P = 0.510N
Incidental Tumor Tests (d)	P = 0.266N	P = 0.530	P = 0.510N
Cochran-Armitage Trend Test (d) Fisher Exact Test (d)	P = 0.207 N	P=0.490	P = 0.253N

# TABLE E4. ANALYSIS OF PRIMARY TUMORS IN FEMALE MICE IN THE TWO-YEAR INHALATION STUDY OF DICHLOROMETHANE (Continued)

## TABLE E4. ANALYSIS OF PRIMARY TUMORS IN FEMALE MICE IN THE TWO-YEAR INHALATION STUDY OF DICHLOROMETHANE (Continued)

(d) Beneath the control incidence are the P values associated with the trend test. Beneath the dosed group incidence are the P values corresponding to pairwise comparisons 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 nonfatal. The Cochran-Armitage and Fisher exact test compare directly the overall incidence rates. A negative trend or lower incidence in a dosed group is indicated by (N).

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

⁽b) Kaplan-Meier estimated tumor incidences at the end of the study after adjusting for intercurrent mortality

⁽c) Observed tumor incidence at terminal kill

### **APPENDIX F**

# HISTORICAL INCIDENCES OF TUMORS IN F344/N RATS AND B6C3F1 MICE RECEIVING NO TREATMENT

Study	Incidence of Leukemia in Controls	
Historical Incidence at Battelle Pac	ific Northwest Laboratories	
Propylene oxide	20/50 16/50	
Propylene	10/50	
TOTAL	36/100 (36.0%)	
<b>Overall Historical Incidence</b>		
TOTAL	458/1,727 (26.5%)	
SD (b)	8.83%	
Range (c)		
High	23/50	
Low	5/50	

#### TABLE F1. HISTORICAL INCIDENCE OF HEMATOPOIETIC SYSTEM TUMORS IN MALE F344/N RATS RECEIVING NO TREATMENT (a)

(a) Data as of August 3, 1984, for studies of at least 104 weeks

(b) Standard deviation

(c) Range and SD are presented for groups of 35 or more animals.

#### TABLE F2. HISTORICAL INCIDENCE OF PITUITARY GLAND TUMORS IN MALE F344/N RATS **RECEIVING NO TREATMENT (a)**

Incidence in Controls					
Study	Adenoma	Carcinoma	Adenoma or Carcinoma		
listorical Incidence	at Battelle Pacific Northwe	est Laboratories			
Propylene oxide	21/47	0/47	21/47		
Propylene	12/46	0/46	12/46		
TOTAL	33/93 (35.5%)	0/93 (0.0%)	33/93 (35.5%)		
Overall Historical In	cidence				
TOTAL	325/1,614 (20.1%)	38/1,614 (2.4%)	363/1,614 (22.5%)		
SD (b)	11.14%	3.04%	10.98%		
Range (c)					
High	24/46	5/45	25/46		
Low	2/39	0/50	2/39		

(a) Data as of August 3, 1984, for studies of at least 104 weeks. Data includes all diagnoses of tumors designated NOS, (a) Data the first of the second se

Incidence in Controls						
Study	Pheochromocytoma	Malignant Pheochromocytoma	Pheochromocytoma or Malignant Pheochromocytoma			
Historical Incid	ence at Battelle Pacific	Northwest Laboratories				
Propylene oxide	3/48	0/48	3/48			
Propylene	3/50	2/50	5/50			
TOTAL	6/98 (6.1%)	2/98 (2.0%)	8/98 (8.2%)			
Overall Historic	cal Incidence					
TOTAL	338/1,702 (19.9%)	20/1,702 (1.2%)	358/1,702 (21.0%)			
SD (b)	9.87%	1.49%	9.63%			
Range (c)						
High	20/49	3/48	21/49			
Low	2/50	0/50	3/50			

## TABLE F3. HISTORICAL INCIDENCE OF ADRENAL GLAND TUMORS IN MALE F344/N RATS RECEIVING NO TREATMENT (a)

(a) Data as of August 3, 1984, for studies of at least 104 weeks

(b) Standard deviation

(c) Range and SD are presented for groups of 35 or more animals.

#### TABLE F4. HISTORICAL INCIDENCE OF MAMMARY GLAND TUMORS IN MALE F344/N RATS **RECEIVING NO TREATMENT (a)**

Incidence in Controls					
Study	Fibroadenoma	Adenocarcinoma	Fibroadenoma or Adenocarcinoma		
listorical Inciden	ce at Battelle Pacific Nor	thwest Laboratories			
Propylene oxide	0/50	0/50	0/50		
Propylene	0/50	1/50	1/50		
TOTAL	0/100 (0.0%)	1/100 (1.0%)	1/100 (1.0%)		
Overall Historical	Incidence				
TOTAL	(b) 51/1,727 (3.0%)	(c) 3/1,727 (0.2%)	54/1,727 (3.1%)		
SD(d)	2.98%	0.58%	3.02%		
Range (e)					
High	6/49	1/50	6/49		
Low	0/50	0/90	0/50		

(a) Data as of August 3, 1984, for studies of at least 104 weeks (b) Includes three diagnoses of adenoma, NOS

(c) Includes one diagnosis of carcinoma, NOS

(d) Standard deviation

#### TABLE F5. HISTORICAL INCIDENCE OF INTEGUMENTARY SYSTEM FIBROMAS OR FIBROSARCOMAS IN MALE F344/N RATS RECEIVING NO TREATMENT (a)

		Incidence in Controls	
Study	Fibroma	Fibrosarcoma	Fibroma or Fibrosarcoma
Historical Incidenc	e at Battelle Pacific Northy	vest Laboratories	- 1 1
Propylene oxide Propylene	3/50 3/50	0/50 0/50	3/50 3/50
TOTAL	6/100 (6.0%)	0/100 (0.0%)	6/100 (6.0%)
Overall Historical I	ncidence		
TOTAL SD (e)	(b) 91/1,727 (5.3%) 3.18%	(c) 20/1,727 (1.2%) 1.40%	(d) 110/1,727 (6.4%) 3.32%
Range (f)			
High Low	6/50 0/50	2/50 0/50	6/50 0/49

(a) Data as of August 3, 1984, for studies of at least 104 weeks.

(b) Includes two fibroadenomas of the mammary gland and three integumentary system neurofibromas

(c) Includes two neurofibrosarcomas

(d) Eight sarcomas, NOS, were also observed. The inclusion of these tumors would increase the high range to 7/50. (e) Standard deviation

(f) Range and SD are presented for groups of 35 or more animals.

#### TABLE F6. HISTORICAL INCIDENCE OF INTEGUMENTARY SYSTEM PAPILLOMAS OR CARCINOMAS IN MALE F344/N RATS RECEIVING NO TREATMENT (a)

		Incidence in Controls	
Study	Papilloma	Carcinoma	Papilloma or Carcinoma
Historical Incidence	at Battelle Pacific North	west Laboratories	·····
Propylene oxide Propylene	0/50 0/50	0/50 0/50	0/50 0/50
TOTAL	0/100 (0.0%)	0/100 (0.0%)	0/100 (0.0%)
Overall Historical Ir	ncidence		
TOTAL SD (b)	29/1,727 (1.7%) 1.63%	15/1,727 (0.9%) 1.23%	44/1,727 (2.5%) 1.82%
Range (c) High Low	2/ <b>40</b> 0/50	2/50 0/90	3/50 0/50

(a) Data as of August 3, 1984, for studies of at least 104 weeks

(b) Standard deviation

TABLE F7.	HISTORICAL INCID	ENCE OF TESTICUL	AR TUMORS IN	MALE F344/N RATS
		RECEIVING NO	TREATMENT (a)	

Study	Incidence of Interstitial Cell Tumors in Controls	
Historical Incidence at Battelle Paci	fic Northwest Laboratories	
Propylene oxide Propylene	29/49 37/50	
TOTAL	66/99 (66.7%)	
<b>Overall Historical Incidence</b>		
TOTAL SD (c)	(b) 1,511/1,703 (88.7%) 7.79%	
Range (d) High Low	49/50 34/50	

(a) Data as of August 3, 1984, for studies of at least 104 weeks

(b) Total includes one interstitial cell tumor, malignant.

(c) Standard deviation

(d) Range and SD are presented for groups of 35 or more animals.

#### TABLE F8. HISTORICAL INCIDENCE OF MESOTHELIOMAS IN MALE F344/N RATS RECEIVING NO TREATMENT (a)

Study	Incidence of Mesotheliomas in Controls	
Historical Incidence at Battelle Pacifi	c Northwest Laboratories	<u></u>
Propylene oxide Propylene	1/50 3/50	
TOTAL	(b) 4/100 (4.0%)	
<b>Overall Historical Incidence</b>		
TOTAL SD (d)	(c) <b>44/1,727 (2.5%)</b> 2.35%	
Range (e) High Low	5/50 0/50	

(a) Data as of August 3, 1984, for studies of at least 104 weeks (b) All designated NOS

(c) Includes 2 benign, 14 malignant, and 28 NOS

(d) Standard deviation

Study	Incidence of Leukemia in Controls	
Historical Incidence at Battelle P	acific Northwest Laboratories	
Propylene oxide Propylene	14/50 13/49	
TOTAL	27/99 (27.3%)	
Overall Historical Incidence		
TOTAL SD (b)	307/1,772 (17.3%) 6.00%	
Range (c) High Low	19/50 3/50	

## TABLE F9. HISTORICAL INCIDENCE OF HEMATOPOIETIC SYSTEM TUMORS IN FEMALE F344/N<br/>RATS RECEIVING NO TREATMENT (a)

(a) Data as of August 3, 1984, for studies of at least 104 weeks

(b) Standard deviation
(c) Range and SD are presented for groups of 35 or more animals.

#### TABLE F10. HISTORICAL INCIDENCE OF LIVER TUMORS IN FEMALE F344/N RATS RECEIVING NO TREATMENT (a)

		Incidence in Control	s
Study	Neoplastic Nodule	Hepatocellular Carcinoma	Neoplastic Nodule or Hepatocellular Carcinoma
Iistorical Incidence a	at Battelle Pacific Northwest	Laboratories	
Propylene oxide Propylene	1/50 0/48	0/50 0/48	1/50 0/48
TOTAL	1/98 (1.0%)	0/98 (0.0%)	1/98 (1.0%)
Overall Historical Inc	idence		
TOTAL SD (b)	46/1,766 (2.6%) 2.77%	3/1,766 (0.2%) 0.75%	48/1,766 (2.7%) 2.99%
Range (c)	4/50	2/50	5/50
High Low	4/50 0/50	2/50 0/88	5/50 0/50

(a) Data as of August 3, 1984, for studies of at least 104 weeks

(b) Standard deviation

#### TABLE F11. HISTORICAL INCIDENCE OF MAMMARY GLAND TUMORS IN FEMALE F344/N RATS RECEIVING NO TREATMENT (a)

		Incidence in Controls		
Study	Fibroadenoma	Adenocarcinoma	Fibroadenoma or Adenocarcinoma	
Historical Incidence	e at Battelle Pacific Northwe	st Laboratories	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
Propylene oxide Propylene	7/50 9/49	1/50 0/49	8/50 9/49	
TOTAL	16/99 (16.2%)	1/99 (1.0%)	17/99 (17.2%)	
Overall Historical I	ncidence			
TOTAL SD (d)	(b) 492/1,772 (27.8%) 9.61%	(c) <b>45/1,772 (2.5%)</b> 2. <b>45%</b>	520/1,772 (29.3%) 9.29%	
Range (e)				
High Low	24/49 5/50	4/49 0/50	24/49 6/50	

(a) Data as of August 3, 1984, for studies of at least 104 weeks

(b) Includes 470 fibroadenomas. The remaining tumors include adenomas, NOS, cystadenomas, papillary cystadenomas, and cystfibroadenomas of the mammary gland and integumentary system fibroadenomas.

(c) Inlcudes one squamous cell carcinoma

(d) Standard deviation

(e) Range and SD are presented for groups of 35 or more animals.

## TABLE F12. HISTORICAL INCIDENCE OF PITUITARY GLAND TUMORS IN FEMALE F344/N RATS RECEIVING NO TREATMENT (a)

		Incidence in Controls	
Study	Adenoma	Carcinoma	Adenoma or Carcinoma
Historical Incidence	at Battelle Pacific Northwes	it Laboratories	
Propylene oxide Propylene	25/48 18/44	0/48 1/44	25/48 19/44
TOTAL	43/92 (46.7%)	1/92 (1.1%)	44/92 (47.8%)
Overall Historical In	cidence		
TOTAL SD (b)	743/1,704 (43.6%) 11.71%	62/1,704 (3.6%) 4.24%	805/1,704 (47.2%) 11.01%
Range (c) High	33/47	8/49	33/47
Low	7/39	0/50	9/39

(a) Data as of August 3, 1984, for studies of at least 104 weeks. Data includes all diagnoses of tumors designated NOS, chromophobe, acidophil, or basophil; adenocarcinomas are grouped with carcinomas.

(b) Standard deviation

## TABLE F13. HISTORICAL INCIDENCE OF THYROID GLAND C-CELL TUMORS IN FEMALE F344/N RATS RECEIVING NO TREATMENT (a)

	Incidence in Controls		
Adenoma	Carcinoma	Adenoma or Carcinoma	
at Battelle Pacific Northwe	st Laboratories	<u> </u>	
1/45 5/39	1/45 1/39	2/45 6/39	
6/84 (7.1%)	2/84 (2.4%)	8/84 (9.5%)	
cidence			
79/1,704 (4.6%) 4.08%	61/1,704 (3.6%) 2.73%	137/1,704 (8.0%) 4.52%	
6/49 0/86	5/50 0/50	9/50 0/50	
	at Battelle Pacific Northwe 1/45 5/39 6/84 (7.1%) 2:idence 79/1,704 (4.6%) 4.08% 6/49	Adenoma         Carcinoma           at Battelle Pacific Northwest Laboratories         1/45           1/45         1/45           5/39         1/39           6/84 (7.1%)         2/84 (2.4%)           cidence         79/1,704 (4.6%)           61/1,704 (3.6%)         2.73%           6/49         5/50	Adenoma         Carcinoma         Adenoma or Carcinoma           at Battelle Pacific Northwest Laboratories         1/45         2/45           1/45         1/45         2/45           5/39         1/39         6/39           6/84 (7.1%)         2/84 (2.4%)         8/84 (9.5%)           cidence         79/1,704 (4.6%)         61/1,704 (3.6%)         137/1,704 (8.0%)           6/49         5/50         9/50

(a) Data as of August 3, 1984, for studies of at least 104 weeks

(b) Standard deviation(c) Range and SD are presented for groups of 35 or more animals.

# TABLE F14. HISTORICAL INCIDENCE OF ALVEOLAR/BRONCHIOLAR TUMORS IN MALE B6C3F1 MICERECEIVING NO TREATMENT (a)

		Incidence in Control	ls
Study	Adenoma	Carcinoma	Adenoma or Carcinoma
Historical Incidence	at Battelle Pacific Northw	vest Laboratories	
Propylene oxide	14/50	2/50	15/50
Propylene	7/50	9/50	16/50
TOTAL	21/100 (21.0%)	11/100 (11.0%)	31/100 (31.0%)
Overall Historical In	cidence		
TOTAL	215/1,780 (12.1%)	87/1,780 (4.9%)	296/1,780 (16.6%)
SD (b)	6.80%	4.06%	8.22%
Range (c)			
High	14/50	8/48	17/50
Low	1/50	0/50	1/49

(a) Data as of August 3, 1984, for studies of at least 104 weeks

(b) Standard deviation

#### TABLE F15. HISTORICAL INCIDENCE OF CIRCULATORY SYSTEM TUMORS IN MALE B6C3F1 MICE **RECEIVING NO TREATMENT (a)**

		Incidence in Controls	
Study	Hemangiosarcoma	Hemangiosarcoma	Hemangioma or Hemangiosarcoma
listorical Incidence a	t Battelle Pacific Northwest	t Laboratories	
Propylene oxide Propylene	0/50 0/50	2/50 0/50	2/50 0/50
TOTAL	0/100 (0.0%)	2/100 (2.0%)	2/100 (2.0%)
Overall Historical Inc	idence		
TOTAL SD (c)	23/1,791 (1.3%) 2.68%	(b) 56/1,791 (3.1%) 2.53%	78/1,791 (4.4%) 4.06%
Range (d) High	(e) 7/50	5/49	(f) 10/50
Low	0/50	0/50	0/50

(a) Data as of August 3, 1984, for studies of at least 104 weeks

(b) Includes angiosarcoma

(c) Standard deviation
(d) Range and SD are presented for groups of 35 or more animals.

(e) Second highest incidence: 3/49

(f) Second highest incidence: 7/49

## TABLE F16. HISTORICAL INCIDENCE OF HEPATOCELLULAR TUMORS IN MALE B6C3F1 MICERECEIVING NO TREATMENT (a)

		Incidence in Controls	
Study	Adenoma	Carcinoma	Adenoma or Carcinoma
Historical Incidence	at Battelle Pacific Northwe	est Laboratories	
Propylene oxide Propylene	8/50 5/50	6/50 9/50	14/50 14/50
TOTAL	13/100 (13.0%)	15/100 (15.0%)	28/100 (28.0%)
Overall Historical In	cidence		
TOTAL SD (b)	179/1,784 (10.0%) 7.36%	377/1,784 (21.1%) 6.54%	540/1,784 (30.3%) 8.04%
Range (c) High	(d) 22/50	16/50	(e) 29/50
Low	0/49	4/50	7/50

(a) Data as of August 3, 1984, for studies of at least 104 weeks

(b) Standard deviation

(c) Range and SD are presented for groups of 35 or more animals.

(d) Second highest incidence: 9/50 (e) Second highest incidence: 20/50

## TABLE F17. HISTORICAL INCIDENCE OF TESTICULAR TUMORS IN MALE B6C3F1 MICE RECEIVING NO TREATMENT (a)

	Incidence of Interstitial Cell Tumors in Controls	
Historical Incidence at Battelle P	acific Northwest Laboratories	
Propylene oxide Propylene	0/ <b>48</b> 2/50	
TOTAL	2/98 (2.0%)	
<b>Overall Historical Incidence</b>		
TOTAL SD (c)	(b) 5/1,768 (0.3%) 0.71%	
Range (d) High Low	1/48 0/50	

(a) Data as of August 3, 1984, for studies of at least 104 weeks
(b) No malignant interstitial cell tumors were observed.

(c) Standard deviation

(d) Range and SD are presented for groups of 35 or more animals.

# TABLE F18. HISTORICAL INCIDENCE OF ALVEOLAR/BRONCHIOLAR TUMORS IN FEMALE B6C3F1MICE RECEIVING NO TREATMENT (a)

Incidence in Controls			
Study	Adenoma	Carcinoma	Adenoma or Carcinoma
Historical Incider	nce at Battelle Pacific	Northwest Laboratories	
Propylene oxide	4/50	0/50	4/50
Propylene	6/50	0/50	6/50
TOTAL	10/100 (10.0%)	0/100 (0.0%)	10/100 (10.0%)
Overall Historical	l Incidence		
TOTAL	87/1,777 (4.9%)	36/1,777 (2.0%)	122/1,777 (6.9%)
SD(b)	3.86%	1.98%	4.44%
Range (c)			
High	7/50	3/50	8/50
Low	0/50	0/50	0/50

(a) Data as of August 3, 1984, for studies of at least 104 weeks

(b) Standard deviation

# TABLE F19. HISTORICAL INCIDENCE OF HEPATOCELLULAR TUMORS IN FEMALE B6C3F1 MICE RECEIVING NO TREATMENT (a)

	Incidence in Controls			
Study	Adenoma	Carcinoma	Adenoma or Carcinoma	
Historical Inciden	ce at Battelle Pacific N	Northwest Laboratories		
Propylene oxide	1/50	2/50	3/50	
Propylene	0/50	2/50	2/50	
TOTAL	1/100 (1.0%)	4/100 (4.0%)	5/100 (5.0%)	
<b>Overall Historical</b>	Incidence			
TOTAL	68/1,781 (3.8%)	(b) 82/1,781 (4.6%)	147/1,781 (8.3%)	
SD (c)	4.14%	3.08%	4.76%	
Range (d)				
High	9/49	7/48	10/49	
Low	0/50	0/50	0/50	

(a) Data as of August 3, 1984, for studies of at least 104 weeks

(b) One hepatoblastoma also was observed.(c) Standard deviation

(d) Range and SD are presented for groups of 35 or more animals.

## TABLE F20. HISTORICAL INCIDENCE OF THYROID GLAND FOLLICULAR CELL TUMORS IN<br/>FEMALE B6C3F1 MICE RECEIVING NO TREATMENT (a)

		Incidence in Con	trols
Study	Adenoma	Carcinoma	Adenoma or Carcinoma
Historical Incide	nce at Battelle Pacific N	orthwest Laboratories	
Propylene oxide	1/45	0/45	1/45
Propylene	4/45	0/45	4/45
TOTAL	5/90 (5.6%)	0/90 (0.0%)	5/90 (5.6%)
Overall Historica	l Incidence		
TOTAL	(b) <b>36/1,661</b> (2.2%)	7/1,661 (0.4%)	43/1,661 (2.6%)
SD (c)	2.40%	1.21%	3.15%
Range (d)			
High	4/48	3/48	7/48
Low	0/50	0/50	0/50

(a) Data as of August 3, 1984, for studies of at least 104 weeks

(b) Includes 34 follicular cell adenomas, one adenoma, NOS, and one papillary cystadenoma of the thyroid and two cystadenomas of the thyroid follicle.

(c) Standard deviation

### **APPENDIX G**

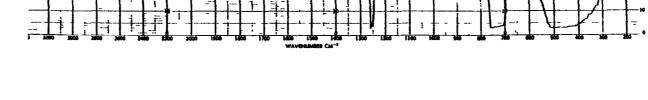
## CHEMICAL CHARACTERIZATION OF

### DICHLOROMETHANE

### I. Identity and Purity Determinations of Dichloromethane Performed by the Analytical Chemistry Laboratory

- A. Lot No. 766062
  - **1. Physical Properties**

a. Boiling Point:	Determined 39°C (Dupont 900 DTA) 39.7°± 0.1°C (at 736 mm, capillary)	<u>Literature Values</u> 39.75° C (Dreisbach, 1959)
b. Appearance:	Clear, colorless liquid	
2. Spectral Data		
a. Infrared	Determined	<u>Literature Values</u>
Instrument:	Beckman IR-12	
Cell:	0.05 mm liquid cell, sodium chloride windows	
Results:	See Figure 5	Consistent with literature spectrum (Dreisbach, 1959)
b. Ultraviolet/Visible	Determined	<u>Literature Values</u>
Instrument:	Cary 118	
Solvent:	Neat liquid	
Results:	No absorbance between 350 and 800 nm. No maxima between 350 and 200 nm but a gradual increase in absorbance between 220 nm and the cutoff at 200 nm.	No literature reference found.



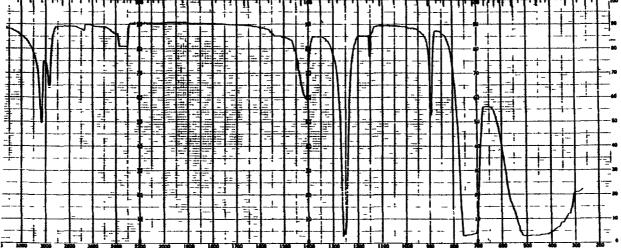
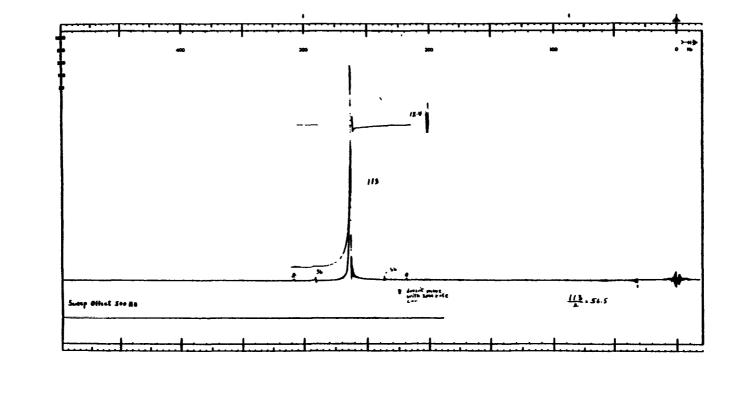


FIGURE 5. INFRARED ABSORPTION SPECTRUM OF DICHLOROMETHANE (LOT NO. 766062)

### c. Nuclear Magnetic Resonance

	Determined		Literature Values
(1) Instrument:	Varian HA-100		
(2) Solvent:	Neat, tetramethy silane added	<b>I</b> -	
(3) Assignments:	See Figure 6		Consistent with literature spectrum (Sadtler Standard Spectra)
(4) Chemical Shift (8):	a s, 5.27 ppm		
(5) Integration Ratios:	a 2.00		
3. Water Analysis (Karl Fischer):	0.008% ± 0.002(8	)%	
4. Elemental Analysis			
Floment	C	н	Cl

Element	<u>c</u>	H	Cl
Theory	14.14	2.37	83.48
Determined	14.17	2.35	83.36
	14.19	2.40	83.40



### FIGURE 6. NUCLEAR MAGNETIC RESONANCE SPECTRUM OF DICHLOROMETHANE (LOT NO. 766062)

### 5. Chromatographic Analysis: Gas Chromatography

**Instrument:** Tracor MT-220 **Detector:** Flame ionization **Inlet temperature:** 225° C **Detector temperature:** 300° C

#### a. Identification of Impurities

System 1

**Column:** Chromosorb 102, 100/120, 1.8 m × 4 mm ID, glass **Oven temperature program:** 50° to 200° C at 10° C/minute

#### Results: Major peak only

<u>Peak No.</u>	Retention <u>Time (min)</u>	Retention Time Relative to <u>Major Peak</u>	Area (percent of <u>major peak)</u>
1	11.33	1.00	100

### System 2

Column: 10% Carbowax 20 M-TPA on 80/100 Chromosorb W(AW), 1.8 m  $\times$  4 mm ID, glass

Oven temperature program: 10 minutes at 50° C, then 50° to 200° C at 10° C/minute

**Results:** Major peak and one impurity.

<u>Peak No.</u>	Retention <u>Time (min)</u>	Retention Time Relative to <u>Major Peak</u>	Area (percent of <u>major peak)</u>
1	0.78	0.40	0.094
2	1.95	1.00	100

The sample was spiked with a small amount of vinylidene chloride, and peak no. 1 was enhanced.

### b. Quantitation of Impurities

### System 1

**Column:** 10% Carbowax 20 M-TPA on 80/100 Chromosorb W(AW),  $(1.8 \text{ m} \times 4 \text{mm ID})$ **Oven temperature:** 50° C, isothermal

The first impurity peak was quantitated against a standard solution of vinylidene chloride, 0.05% (v/v) in *n*-butanol.

Concentration of vinylidene chloride in the sample:  $0.044\% \pm 0.005(\delta)\%$ 

During the analysis, another small impurity peak was observed just before the major peak (not detected in system 2 above because the injection volume was kept low to prevent detector overload). This impurity peak was enhanced when an aliquot of the dichloromethane sample was spiked with *trans*-1,2-dichloroethylene. It was quantitated by comparison with *trans*-dichloroethylene standard, 0.005% (v/v) in *n*-butanol.

**Concentration of** *trans*-1,2-dichloroethylene in the sample:  $0.0016\% \pm 0.0002(\delta)\%$ 

### System 2

**Column:** Chromosorb 102, 100/120, 1.8 m  $\times$  4 mm, ID, glass **Oven temperature:** 150°C, isothermal

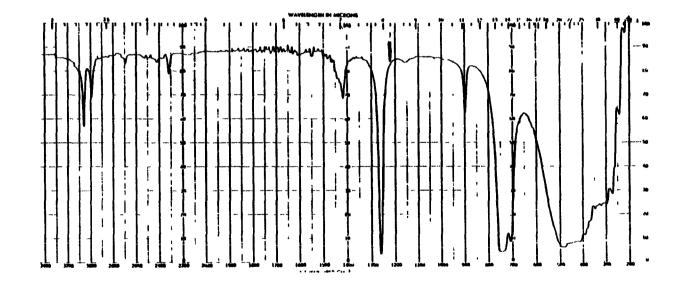
A standard was injected containing 0.005% (v/v) carbon tetrachloride, 0.005% (v/v) 1,2-dichloroethane, and 0.015% (v/v) chloroform in pentane. These compounds had retention times of 9.4, 8.3, and 7.3 minutes, respectively. One microliter of the dichloromethane sample was injected under the same conditions.

The sample contained < 0.005% carbon tetrachloride, < 0.005% 1,2-dichloroethane, and < 0.015% chloroform.

**6.** Conclusions: The results of elemental analysis agreed with theoretical values. Karl Fischer analysis indicated 0.008% water. Gas chromatography on Chromosorb 102 indicated only the major peak. Carbowax 20M-TPA showed one impurity in addition to the major peak; on overloading the major peak, another small impurity was found. The two impurities were identified as vinylidene chloride, 0.04%, and *trans*-1,2-dichloroethylene, 0.002%. The infrared, ultraviolet/visible, and nuclear magnetic resonance spectra were consistent with those expected for the structure of dichloromethane.

- B. Lot No. 767132
  - 1. Physical Properties

• •		
a. Boiling Point:	Determined 40.9° C at 734 torr (visual, microboiling point); 41.5°-41.8° C (Dupont 900 DTA)	<u>Literature Values</u> 39.75°C (Dreisbach, 1959)
b. Index of Refraction:	<u>Determined</u>	<u>Literature Values</u>
	$n_{\rm D}^{20}$ : 1.424 ± 0.002(8)	n ²⁰ : 1.4244 (Merck Index, 1976)
c. Density:	Determined	Literature Values
	$d_{22}^{24}$ : 1.3201 ± 0.0005( $\delta$ ) g/ml	d ₄ ²⁰ : 1.3255 g/ml (Merck Index, 1976)
d. Appearance:	Clear, colorless liquid	(Meter Index, 1970)
2. Spectral Data		
a. Infrared	Determined	Literature Values
Instrument:	Beckman IR-12	
Cell:	0.016 mm liquid cell, sodium chloride windows	
Results:	See Figure 7	Consistent with literature spectrum (Sadtler Standard Spectra)
b. Ultraviolet/Visible	<b>Determined</b>	Literature Values
Instrument:	Cary 118	
Solvent:	Methanol	
<b>Concentration:</b>	1%	
Results:	No absorbance between 350 and 800 nm. No maximum between 210 and 350 nm but a gradual increase in absorbance toward the solvent cutoff at 210 nm.	No literature reference found



### FIGURE 7. INFRARED ABSORPTION SPECTRUM OF DICHLOROMETHANE (LOT NO. 767132)

### **APPENDIX G. CHEMICAL CHARACTERIZATION**

### c. Nuclear Magnetic Resonance

	Determined	<u>Literature Values</u>
(1) Instrument:	Varian HA-100	
(2) Solvent:	Neat, tetramethyl- silane added	
(3) Assignments:	See Figure 8	Consistent with literature spectrum (Sadtler Standard Spectra)
(4) Chemical Shift (δ):	a s, 5.23 ppm	
(5) Integration Ratios:	a 2.00	
Waton Analysis (Kan) Fischer);	$0.019\% \pm 0.009(8)\%$	

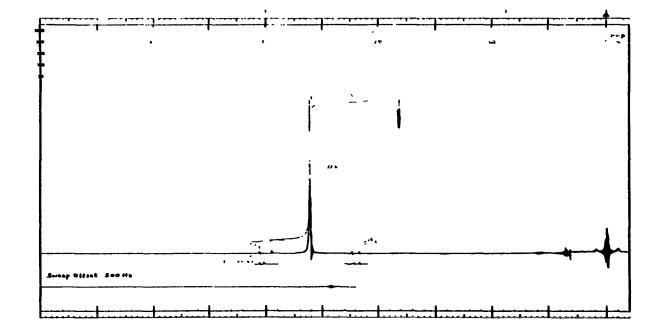
### 3. Water Analysis (Karl Fischer): $0.018\% \pm 0.002(\delta)\%$

### 4. Elemental Analysis

Element	c	Н	Cl
Theory	14.14	2.37	83.48
Determined	13.98 14.23	2.30 2.23	83.45 83.65

### 5. Titration for Acidic Components

<1 ppm acidity (assumed to be hydrochloric acid)



### FIGURE 8. NUCLEAR MAGNETIC RESONANCE SPECTRUM OF DICHLOROMETHANE (LOT NO. 767132)

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### 6. Chromatographic Analysis: Gas Chromatography

Instrument: Tracor MT 220 Detector: Flame ionization Inlet temperature: 200° C Detector temperature: 215° C Carrier gas: Nitrogen Carrier flow rate: 70 ml/minute

### a. Detection of Impurities

### System 1

**Column:** 20% SP2100/0.1% Carbowax 1500 on 80/100 Supelcoport, 1.8 m  $\times$  4 mm ID, glass **Oven temperature program:** 50° C for 5 minutes, then 50°-170° C at 10° C/minute **Sample injected:** 5 µl neat liquid, diluted to 1% and 0.5% in *o*-dichlorobenzene to quantitate the major peak and check for overloading

**Results:** Major peak and 12 impurities. The areas of the impurities total 0.1% or less of the area of the major peak.

<u>Peak No.</u>	Retention <u>Time (min)</u>	Retention Time Relative to <u>Major Peak</u>	Area (percent of <u>major peak)</u>
1	0.3	0.2	< 0.001
2	0.5	0.4	< 0.001
3	0.6	0.5	< 0.001
4	0.6	0.5	< 0.001
5	0.7	0.5	< 0.001
6	0.8	0.6	< 0.001
7	0.9	0.7	< 0.001
8	1.0	0.8	< 0.001
9	1.1	0.8	shoulder 0.004-0.02
10	1.3	1.0	100
11	1.7	1.3	shoulder 0.03-0.1
12	2.4	1.8	0.004
13	2.9	2.2	<0.001

#### System 2

**Column:** 10% Carbowax 20M-TPA on 80/100 Chromosorb W(AW), 1.8 m  $\times$  4 mm ID, glass **Oven temperature program:** 50° C for 5 minutes, then 50°-200° C at 10° C/minute **Sample injected:** 7 µl neat liquid diluted to 1% and 0.5% in *o*-dichlorobenzene to quantitate the major peak and check for overloading

**Results:** Major peak and six impurities. The areas of the impurities total approximately 0.1% of the area of the major peak.

<u>Peak No.</u>	Retention <u>Time (min)</u>	Retention Time Relative to <u>Major Peak</u>	Area (percent of <u>major peak)</u>
1	0.3	0.2	< 0.001
2	0.4	0.2	0.07
3	0.7	0.3	0.03
4	1.0	0.5	< 0.001
5	1.3	0.7	0.01
6	1.9	1.0	100
7	3.7	1.9	< 0.001
	-		

### b. Quantitation of Vinylidene Chloride

**Column:** OPN/Porasil C, 80/100 mesh, 1.4 m  $\times$  4 mm ID, glass **Oven temperature:** 50° C, isothermal **Sample injected:** 6 µl neat dichloromethane and 6 µl 0.025% (v/v) vinylidene chloride in methanol

**Results:** The OPN/Porasil C system appeared to give a homogeneous peak for vinylidene chloride with a retention time of 3.2 minutes; the major peak began eluting at 3.3 minutes. The area of the peak at 3.2 minutes was compared with the area of similar-sized injections of 0.025% vinylidene chloride in methanol.

The sample contains  $0.026\% \pm 0.005(\delta)\%$  (v/v) vinylidene chloride.

7. Conclusions: The results of elemental analysis agreed with the theoretical values. Gas chromatography indicated 12 impurities with one system and 6 impurities with a second system. With either system, the areas of the impurities totaled 0.1% or less of the major peak. Titration for acidic components indicated <1 ppm acidity (assumed to be hydrochloric acid). Gas chromatography was also used to determine that the concentration of vinylidene chloride in the sample was  $0.026\% \pm 0.005(\delta)\%$  (v/v). The infrared and nuclear magnetic resonance spectra were consistent with those expected for the structure.

### C. Lot No. 77-26-22

1. Spectral Data

a. Infrared	Determined	<u>Literature Values</u>
Instrument:	Perkin-Elmer Model 137 Infracord	
Cell:	Thin film between silver chloride plates	
Results:	See Figure 9	Consistent with literature spectrum (Sadtler Standard Spectra)
b. Ultraviolet/Visible	Determined	<u>Literature Values</u>
Instrument:	Cary 118	
Solvent:	Methanol	
Concentration:	1%	
Results:	No absorbance between 350 and 800 nm. No maximum between 212 and 350 nm, but a gradual increase in absorbance toward the solvent cutoff at 212 nm.	No literature reference found.
c. Nuclear Magnetic Resonand	ce	
	Determined	<u>Literature Values</u>
Instrument:	Varian HA-100	
Solvent:	Neat, tetramethylsilane added	

**Assignments:** 

Chemical Shift ( $\delta$ ):

**Integration Ratios:** 

See Figure 10

a s, 5.24 ppm

a 2.00

Consistent with

Spectra)

literature spectrum (Sadtler Standard

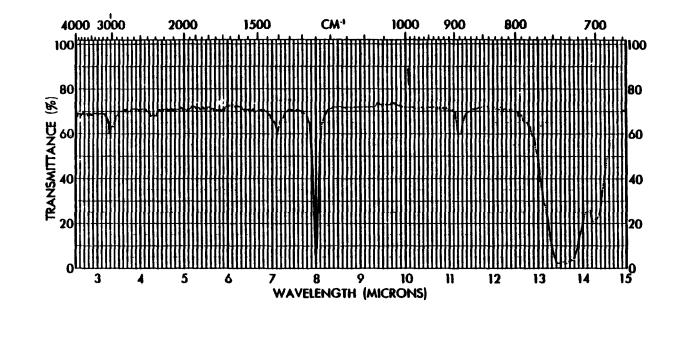


FIGURE 9. INFRARED ABSORPTION SPECTRUM OF DICHLOROMETHANE (LOT NO. 77-26-22)

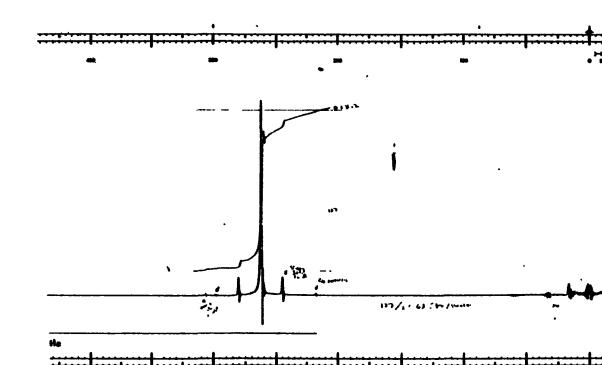


FIGURE 10. NUCLEAR MAGNETIC RESONANCE SPECTRUM OF DICHLOROMETHANE (LOT NO. 77-26-22)

### 2. Water Analysis (Karl Fischer): $0.012\% \pm 0.001(\delta)\%$

### 3. Elemental Analysis

Element	C	Н	Cl
Theory	14.14	2.37	83.48
Determined	14.27 14.11	2.39 2.23	83.31 83.52

### 4. Titration for Acidic Components: Titration with sodium hydroxide

 $1.75 \pm 0.24 (\delta)$  ppm acidity (assumed to be hydrochloric acid)

### 5. Chromatographic Analysis: Gas Chromatography

Instrument: Tracor MT 220 Detector: Flame ionization Carrier gas: Nitrogen Carrier flow rate: 70 ml/minute

### a. Detection of Impurities

System 1

Inlet temperature: 220° C Detector temperature: 270° C Column: 20% SP2100/0.1% Carbowax 1500 on 100/120 Supelcoport, 1.8 m × 4 mm ID, glass Oven temperature program: 50° C for 5 minutes, then 50°-170° C at 10° C/minute Sample injected: 4 µl neat liquid, diluted to 1.0% and 0.5% in o-dichlorobenzene to

quantitate the major peak and check for overloading

**Results:** Major peak and one impurity. The area of the impurity was 0.02% of the area of the major peak.

<u>Peak No.</u>	Retention <u>Time (min)</u>	Retention Time Relative to <u>major peak</u>	Area (percent of <u>major peak)</u>
1 2	1.7 2.3	1.0 1.4	100 0.02

### System 2

Inlet temperature: 200° C Detector temperature: 215° C Column: 10% Carbowax 20M-TPA on 80/100 Chromosorb W (AW), 1.8 m  $\times$  4 mm ID Oven temperature program: 50° C for 5 minutes, then 50°-200° C at 10° C/minute Sample injected: 4 µl neat liquid in *o*-dichlorobenzene to quantitate the major peak and check for overloading

**Results:** Major peak and three impurities. The areas of the impurities totaled 0.18% of the area of the major peak.

Peak No.	Retention <u>Time (min)</u>	Retention Time Relative to <u>Major Peak</u>	Area (percent of <u>major peak)</u>
1	0.55	0.20	0.10
2	0.80	0.29	0.05
3	1.46	0.53	0.03
4	2.77	1.00	100

### b. Quantitation of Vinylidene Chloride

Inlet temperature: 200° C Detector temperature: 215° C Column: OPN/Porasil C, 80/100 mesh, 1.4 m × 4 mm ID, glass Oven temperature: 50 ° C, isothermal

**Results:** Standards (6  $\mu$ l) containing 0.05% (v/v) vinylidene chloride in methanol were injected. Vinylidene chloride had a retention time of 2.8 minutes. The dichloromethane sample had an impurity peak with a retention time of 2.8 minutes, appearing in front of the major peak, which began eluting at 3.0 minutes. Addition of vinylidene chloride to the neat sample enhanced the peak at 2.8 minutes. Vinylidene chloride in the sample was quantitated against similar sized injections of vinylidene chloride in methanol.

The sample contained  $0.023\% \pm 0.003(\delta)\%$  vinylidene chloride.

**6.** Conclusions: The results of elemental analysis agreed with the theoretical values. Titration for acidic components indicated 2 ppm acidity (assumed to be hydrochloric acid). Gas chromatography with one system showed one impurity with an area 0.02% of the major peak. A second system indicated three impurities with total areas 0.18% of the area of the major peak. Gas chromatography also determined the concentration of vinylidene chloride in the sample to be  $0.023\% \pm 0.003(\delta)\%$ . The infrared and nuclear magnetic resonance spectra were consistent with those expected for the structure.

D. Lot No. 775007 **Colorless liquid 1.** Appearance: 2. Spectral Data a. Infrared Determined Literature Values Instrument: Beckman IR-12 Silver chloride, 25-micron Cell: path length See Figure 11 Identical to literature **Results:** spectrum (Sadtler Standard Spectra) b. Ultraviolet/Visible Determined Literature Values **Cary 118** Instrument: Solvent: Methanol **Results:** A 10% (v/v) solution No literature reference exhibited no absorbance found. Spectrum between 800 and 350 nm. consistent with the A 1% (v/v) solution structure. showed no absorbance maximum. However, a rapid increase in absorbance was noted below 230 nm. c. Nuclear Magnetic Resonance Determined **Literature Values** (1) Instrument: Varian EM-360-A (2) Solvent: Neat, tetramethylsilane internal standard (3) Assignments: See Figure 12 Identical to literature spectrum (Sadtler Standard Spectra) (4) Chemical Shift (8): s, 5.30 ppm a (5) Integration Ratios: a 2.00

Dichloromethane, NTP TR 306

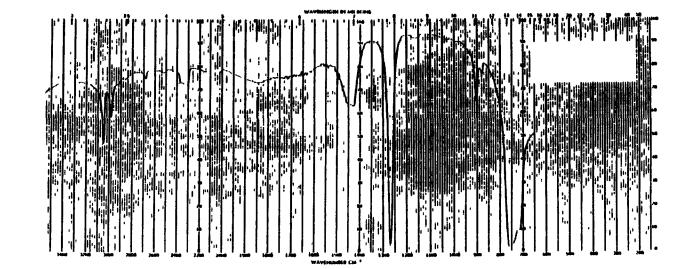
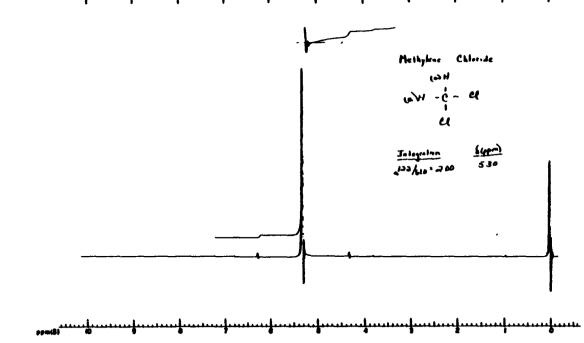


FIGURE 11. INFRARED ABSORPTION SPECTRUM OF DICHLOROMETHANE (LOT NO. 775007)



## **APPENDIX G. CHEMICAL CHARACTERIZATION**

### 3. Water Analysis (Karl Fischer): $0.008\% \pm 0.001\%$

### 4. Elemental Analysis

Element	С	Н	Cl
Theory	14.14	2.37	83.48
Determined	13.95 14.17	2.19 2.28	83.60 83.54

### 5. Titration: Free acid (as hydrochloric acid) < 3 ppm

### 6. Chromatographic Analysis: Gas Chromatography

Instrument: Perkin Elmer 3920 Detector: Flame ionization Carrier gas: Nitrogen

#### a. System 1:

Column: Carbopack C/0.1% SP2100, 1.8 m × 4 mm ID, glass Inlet temperature: 210° C Detector temperature: 240° C Carrier flow rate: 35 ml/min Oven temperature program: 50° C for 4 minutes, then 50° to 250° C at 16° C/minute Samples injected: 6 µl of the neat compound to detect and quantitate impurities and 5 µl of a 1.0% and 0.5% (v/v) solution in 1,2-dichloroethane to establish detector response linearity.

**Results:** A major peak followed by five impurity peaks.

Peak No.	Retention <u>Time (min)</u>	Retention Time Relative to <u>Major Peak</u>	Area (percent of <u>major peak)</u>
1	2.8	1.00	100
2	4.9	1.75	0.05
3	5.1	1.82	0.05
4	6.9	2.46	0.05
5	8.0	2.96	0.01
6	9.2	3.29	0.13

### b. System 2

Column: 10% Carbowax 20M-TPA on 80/100 Chromosorb W(AW), 1.8 m × 4 mm ID, glass Inlet temperature: 110° C Detector temperature: 270° C Carrier flow rate: 50 ml/minute Oven temperature program: 30° C for 4 minutes, then 30° to 200° C at 16° C/minute Samples injected: 0.5 µl, neat, to detect and quantitate impurities; 3.2 µl and 1.7 µl of a 1% (v/v) solution in 1,2-dichloroethane to establish linearity of detector response.

**Results:** A major peak preceded by three impurity peaks.

<u>Peak No.</u>	Retention <u>Time (min)</u>	Retention Time Relative to <u>Major Peak</u>	Area (percent of <u>major peak)</u>
1	0.5	0.17	0.11
2	0.7	0.23	0.06
3	1.3	0.43	0.04
4	3.0	1.00	100

7. Conclusions: The results of elemental analysis for carbon, hydrogen, and chlorine agreed, within experimental limits, with theoretical values. The water content was  $0.008\% \pm 0.001\%$  by Karl Fischer titration. The free acid concentration (as hydrochloric acid) by titration was less than 3 ppm. Gas chromatography detected a major peak followed by five impurity peaks with a combined relative area of 0.24% in one system and a major peak preceded by three impurities with a combined relative area of 0.21% in a second system. Infrared and nuclear magnetic resonance spectra were identical to the literature spectra. The ultraviolet/visible spectra were consistent with the structure.

E. Lot No. D112480		
1. Appearance:	Clear, colorless liquid	
2. Spectral Data		
a. Infrared	<b>Determined</b>	Literature Values
Instrument:	Perkin-Elmer 283	
Cell:	Thin film between silver chloride plates	
Results:	See Figure 13	Consistent with literature spectrum (Sadtler Standard Spectra)
b. Ultraviolet/Visible	Determined	Literature Values
Instrument:	Cary 118	
Solvent:	Methanol	
Results:	No absorbance from 800 to 350 nm at a concentration of 10% (v/v). No maximum from 350 to 209 nm but a gradual increase in absorbance toward 209 nm was observed at a concentration of 1% (v/v).	No literature reference found. Spectrum consistent with structure.
c. Nuclear Magnetic Resonan	ce	
	Determined	<u>Literature Values</u>
(1) Instrument:	Varian EM-360-A	
(2) Solvent:	Neat, internal standard tetramethylsilane	
(3) Assignments:	See Figure 14	Consistent with literature spectrum (Sadtler Standard Spectra)
(4) Chemical Shift (δ):	a s, 5.32 ppm	
(5) Integration Ratios:	a 2.00	

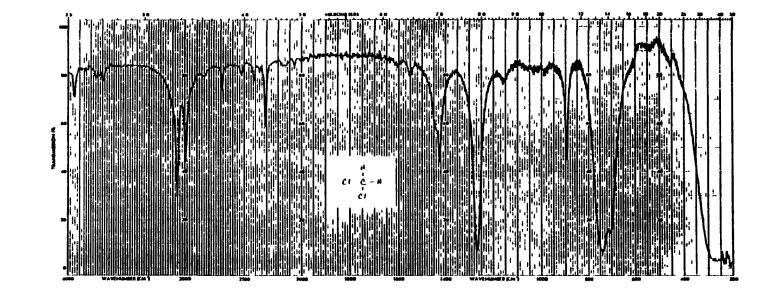
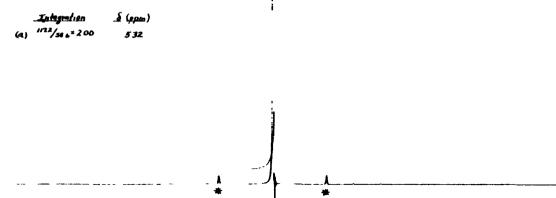
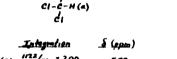


FIGURE 13. INFRARED ABSORPTION SPECTRUM OF DICHLOROMETHANE (LOT NO. D112480)







(A) H

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### **3. Water Analysis (Karl Fischer):** $0.0092\% \pm 0.0004(\delta)\%$

### 4. Elemental Analysis

Element	c	Н	Cl
Theory	14.14	2.37	83.49
Determined	14.13 14.15	2.35 2.24	83.19 83.21

**5. Titration for Acidic Components:** Titration was done in isopropanol with 0.01 N sodium hydroxide titrant using phenolphthalein indicator.

### $0.26 \pm 0.09(\delta)$ ppm (as hydrochloric acid)

### 6. Chromatographic Analysis: Gas Chromatography

Instrument: Varian 3700 Detector: Flame ionization Inlet temperature: 200° C Detector temperature: 250° C Carrier gas: Nitrogen Carrier flow rate: 70 ml/minute

### a. System 1

**Column:** 80/100 Carbopack C/0.1% SP2100, 1.8 m  $\times$  4 mm ID, glass **Oven temperature program:** 50° C for five minutes, then 50° C to 220° C at 10° C/minute **Samples injected:** Neat liquid (3 µl) and solutions of 1% and 0.5% dichloromethane 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 of 0.09% relative to the major peak area.

<u>Peak No.</u>	Retention <u>Time (min)</u>	Retention Time Relative to <u>Major Peak</u>	Area (percent of <u>major peak)</u>
1 2	1.5 8.4	1.0 5.6	1.00 0.09
2	8.4	5.6	

### b. System 2

Column: 10% Carbowax 20M-TPA on 100/120 Supelcoport, 1.8 m  $\times$  4 mm ID, glass Oven temperature program: 60° C for 6 minutes, then 60° C to 200° C at 10° C/minute Samples injected: Neat liquid (3 µl) and solutions of 1% and 0.5% dichloromethane in *o*-dichlorobenzene to quantitate the major peak and check for detector overload

**Results:** Major peak and two impurity peaks before the major peak with a combined area of 0.20% relative to the major peak area.

<u>Peak No.</u>	Retention <u>Time (min)</u>	Retention Time Relative to <u>Major Peak</u>	Area (percent of <u>major peak)</u>
1	0.7	0.37	0.18
2	1.2	0.63	0.02
3	1.9	1.00	100

**6.** Conclusions: The results of elemental analysis for carbon, hydrogen, and chlorine agreed with the theoretical values. Karl Fischer analysis indicated  $0.0092\% \pm 0.004(\delta)\%$  water. The free acid content (as hydrochloric acid) was  $0.26 \pm 0.09(\delta)$  ppm. Gas chromatography with an 80/100 Carbopack C/0.1% SP2100 column indicated a major peak and one impurity eluting after the major peak with an area of 0.09% relative to the major peak area. A second gas chromatographic system with a 10% Carbowax 20M-TPA column indicated a major peak and two impurities eluting before the major peak with a combined area totaling 0.20% of the major peak area. The infrared, ultraviolet/visible, and nuclear magnetic resonance spectra were consistent with those expected for the structure of dichloromethane.

## II. Test Chemical Stability Study of Lot No. 766062 Performed by the Analytical Chemistry Laboratory

A. Sample Storage: Samples of dichloromethane were stored in tightly screw-capped vials for two weeks at  $-20^{\circ}$ ,  $5^{\circ}$ ,  $25^{\circ}$ , or  $35^{\circ}$  C. They were then analyzed by gas chromatography.

### **B.** Analytical Method: Gas Chromatography

- 1. Instrument: Bendix 2500 with Hewlett-Packard 3380A Automatic Integrator
- 2. Detector: Flame ionization
- 3. Column: Chromosorb 102, 100/120 mesh, glass, 1.8 m  $\times$  4 mm
- 4. Inlet temperature: 200° C
- 5. Detector temperature: 250° C
- 6. Oven temperature program: 150°C, isothermal
- 7. Retention time: 6.3 minutes

### C. Results

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Storage Temperature	Average Percent Compound Recovered
– 20° C	$99.5 \pm 2.6$
5° C	$101.3 \pm 2.6$
25° C	$99.1 \pm 2.6$
35° C	99.9 ± 2.6

D. Conclusion: Dichloromethane is stable when stored for 2 weeks at temperatures up to 35°C.

### **APPENDIX G. CHEMICAL CHARACTERIZATION**

- III. Test Chemical Stability Study of Dichloromethane Lot No. D112480 Performed by the Testing Laboratory
  - A. Storage Conditions: Bulk chemical--Room temperature in steel drums
  - **B.** Analytical Methods
    - 1. Gas Chromatography

a. Instrument: HP5840A or HP5830 gas chromatograph
b. Column: 20% SP2100/0.1% Carbowax 1500 on 100/120 Supelcoport, 1.7 m × 4 mm ID, glass
c. Detector: Flame ionization

- d. Detector temperature: 275°C
- e. Injector temperature: 200°C
- f. Oven temperature: 30°C, isothermal
- g. Carrier gas: Helium
- h. Concentration: Neat

2. Infrared Spectroscopy: Beckman Acculab 6 or Beckman Acculab 8; run as liquid in a cell with sodium chloride windows.

### C. Results

1. Gas Chromatography

Date	Percent Purity of <u>Bulk Chemical</u> (a)
12/19/80	99.69
03/05/81	99.65
04/22/81	99.70
07/23/81	99.72
11/16/81	99.70
03/18/82	99.94
07/13/82	99.94
11/08/82	99.73
03/21/83	99.67
05/03/83	99.71

(a) Values are the average of three determinations

2. Infrared Spectroscopy: Spectra were consistent with the reference spectra and with the spectra provided by the analytical chemistry laboratory.

**D.** Conclusion: No notable degradation occurred during the studies.

### **APPENDIX H**

# GENERATION AND MEASUREMENT OF CHAMBER CONCENTRATIONS AT BATTELLE PACIFIC NORTHWEST LABORATORIES

### I. Vapor Generation System

The liquid to be vaporized was contained in a 5.6-liter stainless steel reservoir that was housed in a vapor hood within the exposure room. The liquid was pumped from this reservoir to a stainless steel cylinder covered with a glass fiber wick from which the liquid was vaporized (Decker et al., 1982). An 80-watt heater and a temperature-sensing element were incorporated within the cylinder. The heater maintained the vaporizer at  $40^{\circ} \pm 2^{\circ}$  C. The surface temperature of the vaporizer was slightly less than this temperature. Each cylindrical vaporizer was positioned in the fresh air duct leading directly into the exposure chamber to minimize material loss due to condensation on duct walls (Figure 15).

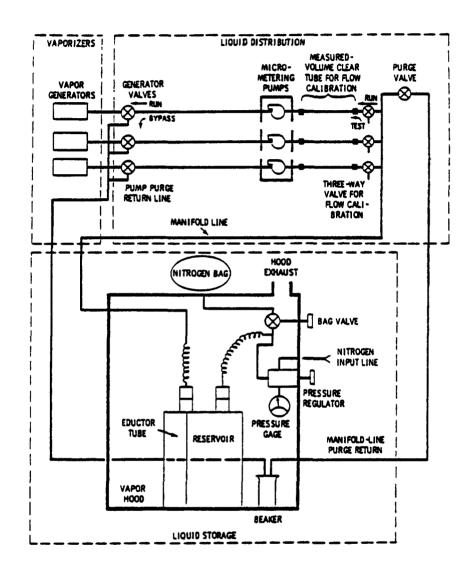
### **II. Vapor Concentration Monitoring**

A Hewlett Packard Model 5840 gas chromatograph equipped with a flame ionization detector, a Porapak 80/100 packed column, and an automatic sampling valve was used to monitor the concentration of dichloromethane in the chambers. All chambers and the room air were sampled approximately twice during each exposure hour. Starting on the 231st exposure day, hexane in nitrogen was added to the sampling sequence to establish instrumental performance. The calibration of the monitoring gas chromatograph was confirmed and corrected as necessary by periodic assay of grab samples from the chambers analyzed on a second gas chromatograph.

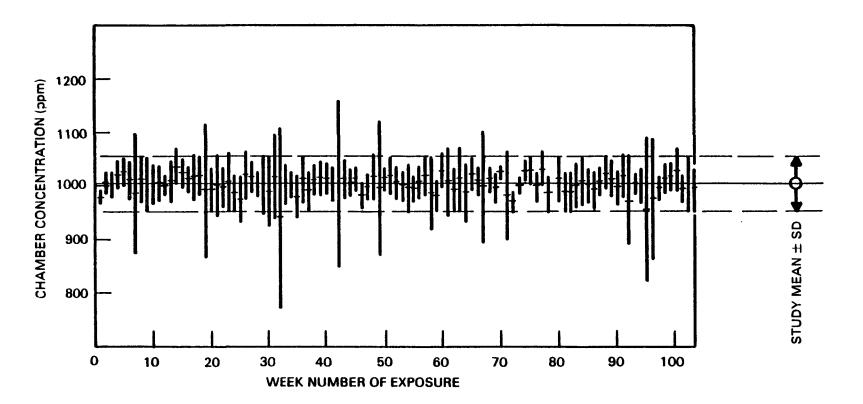
Weekly concentrations are graphically presented in Figures 16-18.

### **III. Vapor Concentration Uniformity in Chamber**

Uniformity of vapor concentration in each exposure chamber was measured periodically throughout the study with a portable photoionization detector (Model PI201, HNU Systems, Inc., Newton, MA). The standard deviations of the normalized average concentrations did not exceed  $\pm$  3.



### FIGURE 15. DICHLOROMETHANE VAPOR GENERATION SYSTEM



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FIGURE 16. WEEKLY MEAN CONCENTRATION AND STANDARD DEVIATION IN 1,000-PPM RAT EXPOSURE CHAMBER IN THE TWO-YEAR INHALATION STUDIES OF DICHLOROMETHANE

200

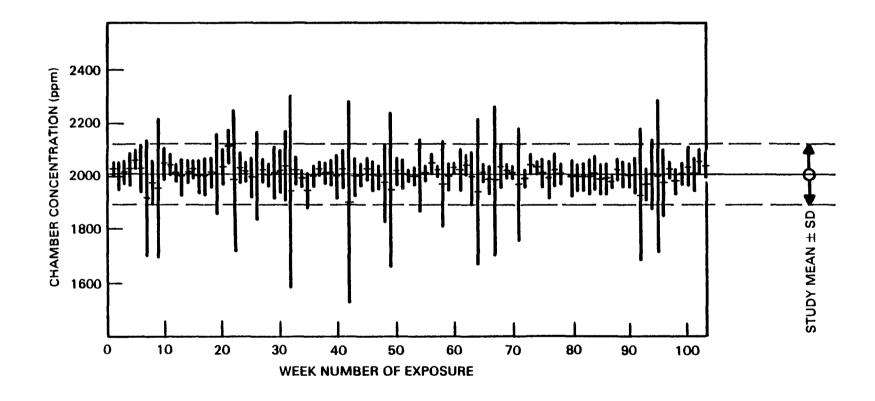


FIGURE 17. WEEKLY MEAN CONCENTRATION AND STANDARD DEVIATION IN 2,000-PPM RAT AND MOUSE EXPOSURE CHAMBER IN THE TWO-YEAR INHALATION STUDIES OF DICHLOROMETHANE

201

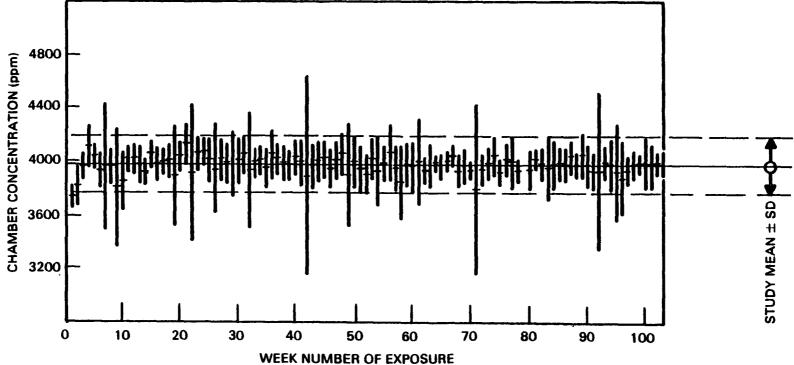


FIGURE 18. WEEKLY MEAN CONCENTRATION AND STANDARD DEVIATION IN 4,000-PPM RAT AND MOUSE EXPOSURE CHAMBER IN THE TWO-YEAR INHALATION STUDIES OF DICHLOROMETHANE

202

Dichloromethane, NTP TR 306

## **APPENDIX I**

## **RESULTS OF**

## SEROLOGIC ANALYSES

### I. Methods

Blood was drawn as described below:

<b>Species</b>	Male/Female	Dates Drawn	Status of Animals
Rat	8/8	01/08/82	Chronic (tested for Sendai only)
Rat	6/4	12/07-12/16/82	Chronic/moribund kill
Mouse	1/9	01/14-04/01/83	Chronic/moribund kill
Rat	5/5	04/25/83 & 04/27/83	Chronic/terminal kill
Mouse	5/5	04/26/83 & 04/27/83	Chronic/terminal kill

The blood from each animal was collected and clotted, and the serum was separated The serum was cooled on ice and shipped to Microbiological Associates' Comprehensive Animal Diagnostic Service for determination of the antibody titers. The following tests were performed:

	Hemagglutination Inhibition	Complement <u>Fixation</u>	<u>ELISA</u>
Mice	PVM (pneumonia virus of mice) Reo 3 (reovirus type 3) GDVII (Theiler's encephalomyelitis virus) Poly (polyoma virus) MVM (minute virus of mice) Ectro (infectious ectromelia) Sendai	M.Ad. (mouse adenovirus) LCM (lymphocytic choriomeningitis virus)	MHV (mouse hepatitis virus)
Rats	PVM Sendai KRV (Kilham rat virus) H-1 (Toolan's H-1 virus)	RCV (rat coronavirus)	M. pul. (Mycoplasma pulmonis)

### **II. Results**

Results are presented in Table I1.

	Interval (months)	Number of Animals	Positive Serologic Reaction for
RATS			
	8	4/6	Sendai
	19	10/10 5/10 3/10	PVM Sendai RCV
	24	10/10 4/10 4/10 5/10 10/10	PVM Sendai KRV RCV M. pul.
MICE			
	23	1/7 2/10	PVM MHV
	24	4/10 1/10	PVM MHV

## **TABLE 11. MURINE VIRUS ANTIBODY DETERMINATIONS FOR RATS AND MICE IN THE TWO-YEAR**INHALATION STUDIES OF DICHLOROMETHANE

## APPENDIX J

## DATA AUDIT SUMMARY

The experimental data and tables of the NTP Technical Report on the toxicology and carcinogenesis inhalation studies of dichloromethane in F344/N rats and B6C3F₁ mice were examined for completeness, consistency, and accuracy and for procedures consistent with Good Laboratory Practice requirements from October 29 to November 2, 1984, at Battelle Pacific Northwest Laboratories, Richland, Washington, and during the week of January 21, 1985, at the NTP Archives, Research Triangle Park, North Carolina. The audit was conducted by Argus Research Laboratories, Inc. The following people were involved in the audit: J. Goeke, Ph.D.; J. Hills., B.A.; A. Hoberman, Ph.D.; V. Everline, V.S.; G. Knutsen, D.V.M., M.S.; C. Veigle, H.T. The 2-year studies in rats and mice were conducted between April 1981 and April 1983 at Battelle Pacific Northwest Laboratories.

The full report of the audit is on file at the NTP, NIEHS. The audit included, but was not limited to, a review of the records of the in-life portion of the studies for 10% of the animals, 100% of the records for test article administration, 10% of the daily gas chromatograph printouts, and 100% of all other chemistry data. All Individual Animal Data Records (IADR's) were examined for correspondence between necropsy observations and histologic findings. A 10% audit of randomly selected wet tissue bags was conducted for verification of unique animal identification and to examine residual tissues for untrimmed lesions. A complete slide/block match for each sex of both species in the high dose and control groups was performed.

The examination of wet tissues indicated one animal with a missing ear tag and two others with discrepancies between ear tag and IADR number. These discrepancies were resolved during the course of the audit. The IADR's contained some minor clerical errors. With few exceptions, gross observations were followed by microscopic diagnoses. There were a few incidences of lack of correlation between gross and microscopic diagnoses, some of which were resolved by examination of the slides. These discrepancies (eight in male rats, three in female mice, none in female rats or male mice) were distributed over dose groups and tissue sites. A slide/block match performed at the NTP Archives identified a few broken slides, missing slides and blocks, or blocks not cut full face or sealed properly. Untrimmed lesions were found in the wet tissues, primarily in the livers of four rats (one mid dose and two high dose males, one high dose female). These lesions were not rediagnosed because they would not have significantly affected the conclusions for that target site.

The audit revealed no major problems with the conduct of the studies or with collection and documentation of the experimental data. No discrepancies that influenced the final interpretations of the results of these studies were found. The data examined during this audit are considered adequate to support the conclusions presented in the Technical Report.

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