Preliminary (Phase I) Results of a Validation Study to Evaluate the Reliability and Relevance of two In Vitro Cytotoxicity Assays for Predicting Rodent and Human Acute Systemic Toxicity

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INTRODUCTION

The oral LD50 (median lethal dose) test has been conducted since the twenties for the acute toxicity ranking of substances. Although three methods that reduce the use of animals now substitute for the classical LD50 test, acute systemic toxicity testing still uses a large proportion of the total number of animals used in regulatory toxicology. In October 2000, ICCVAM and NICEATM organised an international workshop (ICCVAM 2001a) to review the state-of-the-art of in vitro cytotoxicity assays for assessing acute toxicity. One of the workshop recommendations was that two basal cytotoxicity assays were sufficiently developed and standarsised to be evaluated for their usefulness to improve starting dose selection in *in vivo* studies, and to evaluate their potential to correlate with human lethal concentrations (ICCVAM 2001b). Subsequently NICEATM and ECVAM started a joint multi-laboratory validation study.

IN VITRO CYTOTOXICITY ASSAYS

- The mouse fibroblast (BALB/c) 3T3 NRU
- The normal human keratinocyte (NHK) NRU

The **neutral red uptake** (NRU) cytotoxicity assay is a viability staining procedure (Borenfreund and Puerner, 1984). Determination of the amount of retained NR in

PREDICTION MODELS

RODENT

The prediction model evaluated will be the Registry of Cytotoxicity (RC) regression between cytotoxicity values (IC_{50}) and rodent acute oral LD50 values of 347 chemicals (Halle, 1998; 2003).

STUDY OBJECTIVES

•To optimise and standardise the two test method protocols

•To assess the ability of the two assays to estimate rodent oral LD50 values across the Globally Harmonised System categories of acute oral toxicity, and human lethal concentrations.

•To evaluate the accuracy in prediction for the starting dose in *in vivo* testing.

•To determine the reduction in the number of animals that would be obtained by predicting the starting doses for *in vivo* acute toxicity testing. cells exposed to test compounds (Riddell et al., 1986), compared with control cells, enables the relative toxicity of test chemicals to be assessed.

CHEMICALS

72 chemicals are being tested coded in both assays. Chemical selection followed the following criteria:

- Representative of five Globally Harmonised System (GHS) categories of acute toxicity (OECD 2001) as well as non-toxic chemicals.
- •Representative of chemicals regulated by the various regulatory authorities.

•Availability of acute oral rodent toxicity data and oral human toxicity data.

STUDY PHASES

Phase Ia: Laboratory evaluation phase – Completed

Establishment of the positive control chemical (sodium lauryl sulfate [SLS]) reference range (IC50 \pm 2.5 SD; N>10) for each cell type, to be used to assess the quality performance in subsequent phases.

Phase Ib: Laboratory evaluation phase- Completed

Testing of three coded chemicals (N \geq 3) \rightarrow protocol

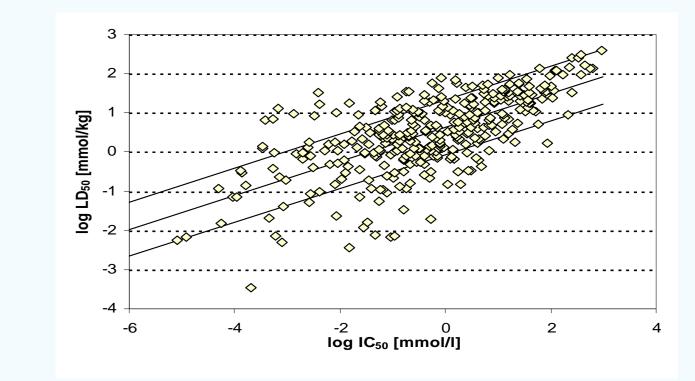


Figure 1. RC regression model

The thicker line represents the fit of the data to a linear regression (r=0.67). The two additional lines represent the empirical boundaries of the prediction interval (± log 5). The equation of the regression line is: log LD50 = $0.435 \times \log IC_{50X} + 0.625$

HUMAN

The feasibility of developing a preliminary human prediction model will be evaluated by using the *in vitro* results, obtained in both tests, for the 12 chemicals tested in Phase I and II, and the corresponding human sublethal and lethal blood concentrations (MEMO database; Ekwall et al. 1998). *In vitro* data for Phase III Chemicals will be used to validate the model.

PROJECT MANAGEMENT

FUNDING SPONSORS

•National Institute of Environmental Health Sciences (NIEHS)
•U.S. Environmental Protection Agency (U.S. EPA)
The Environmental Protection Agency (U.S. EPA)

•To generate a high quality *in vitro* database to be used for the evaluation of other methods to be part of an *in vitro* testing strategy for acute systemic toxicity.

PHASE I RESULTS

refinement

Phase II: Laboratory qualification phase- Ongoing Testing of nine coded chemicals (N \geq 3) \rightarrow protocol finalisation

Phase III: Testing phase

Each lab tests 60 coded chemicals in each assay (N=3)

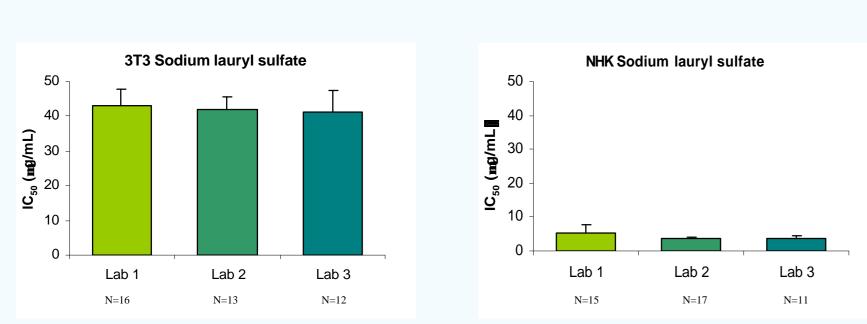


Figure 2. Toxicity of sodium lauryl sulfate to 3T3 cells and NHK cells. Data shown represent the mean IC_{50} value (concentration that inhibits cell viability by 50%.) ± SD for each laboratory.

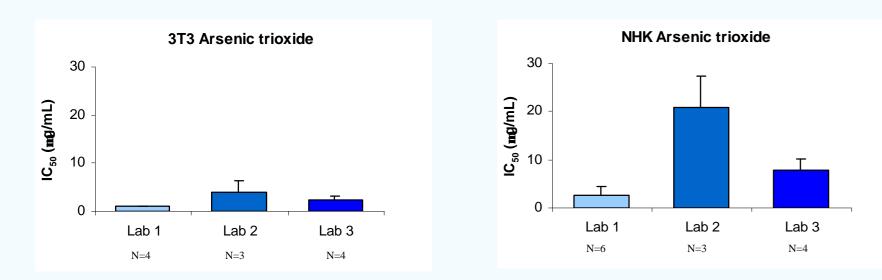


Figure 3. Toxicity of arsenic trioxide to 3T3 cells and NHK cells. Data shown represent the mean IC_{50} value (concentration that inhibits cell viability by 50%.) ± SD for each laboratory.

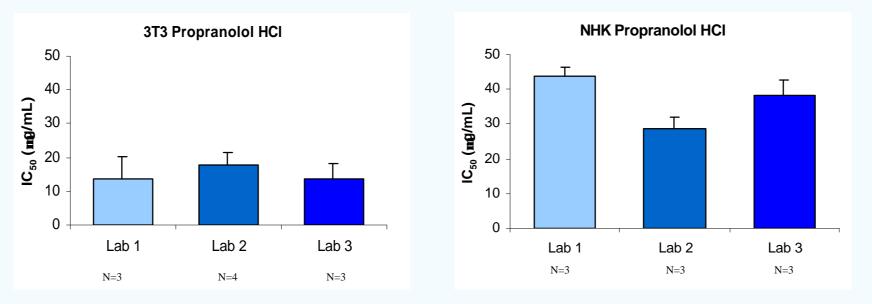


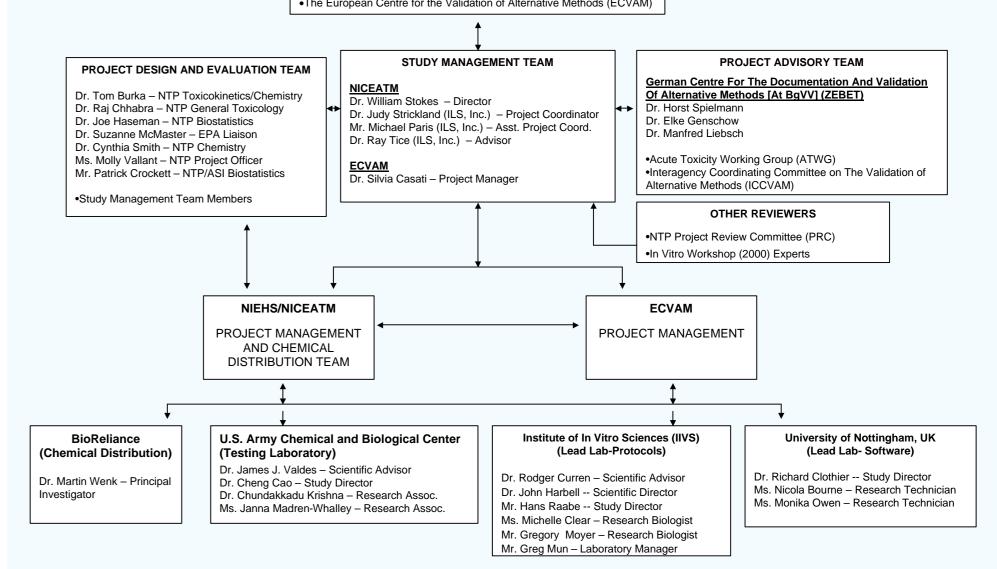
Figure 5. Toxicity of propranolol HCI to 3T3 cells and NHK cells. Data shown represent the mean IC_{50} value (concentration that inhibits cell viability by 50%.) ± SD for each laboratory.

Preliminary results (phases Ia and Ib) showed the following :

•The NHK cells proved to be more sensitive to the positive control SLS whereas the 3T3 cells were more sensitive to the other test compounds.

•The interlaboratory comparison of the endpoint measured (IC50 values) for each chemical showed no statistically significant difference at p < 0.05 (analysis of variance for random effects).

•Results for 3T3 cells were more reproducible than NHK results.



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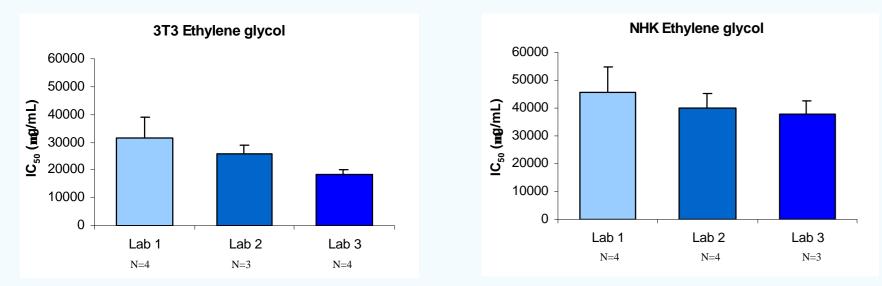


Figure 4. Toxicity of ethylene glycol to 3T3 cells and NHK cells. Data shown represent the mean IC_{50} value (concentration that inhibits cell viability by 50%.) ± SD for each laboratory.

The average coefficient of variation (CV= SD/mean) for the three test chemicals was 0.34 for the 3T3 cells and 0.41 for the NHK cells.

•The higher interlaboratory variability for arsenic trioxide can be explained by the difficulty in dissolving the chemical.

Phase I results provided the means to further standardise the protocols for phase II testing. Results for study II will be used to finalise the protocols for study phase III.

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