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BIOASSAY OF 2,4-DINITROTOLUENE FOR POSSIBLE CARCINOGENICITY

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2,4-DINITROTOLUENE

FOR POSSIBLE CARCINOGENICITY

Carcinogenesis Testing Program
Division of Cancer Cause and Prevention
National Cancer Institute
National Institutes of Health
Bethesda, Maryland

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REPORT ON THE BIOASSAY OF 2,4-DINITROTOLUENE FOR POSSIBLE CARCINGGENICITY

CARCINOGENESIS TESTING PROGRAM
DIVISION OF CANCER CAUSE AND PREVENTION
NATIONAL CANCER INSTITUTE, NATIONAL INSTITUTES OF HEALTH

CONTRIBUTORS: This report presents the results of the bioassay of 2,4-dinitrotoluene conducted for the Carcinogenesis Testing Program, Division of Cancer Cause and Prevention, National Cancer Institute (NCI), National Institutes of Health, Bethesda, Maryland. This bioassay was conducted by Mason Research Institute, Worcester, Massachusetts, initially under direct contract to the NCI and currently under a subcontract to Tracor Jitco, Inc., prime contractor for the NCI Carcinogenesis Bioassay Program.

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SUMMARY

A bioassay of practical-grade 2,4-dinitrotoluene for possible carcinogenicity was conducted using Fischer 344 rats and B6C3F1 mice. 2,4-Dinitrotoluene was administered in the feed, at either of two concentrations, to groups of 50 male and 50 female animals of each species. For male and female rats, the high and low time-weighted average dietary concentrations of 2,4-dinitrotoluene were 0.02 and 0.008 percent, respectively. For male and female mice, the high and low time-weighted average concentrations were 0.04 and 0.008 percent, respectively. After a 78-week period of compound administration, observation of the rats continued for an additional 26 weeks and observation of the mice continued for 13 additional weeks.

For the chronic rat bioassay, 25 rats of each sex were placed on test as high dose controls, and 50 rats of each sex served as the low dose controls. For the mice, 50 males and 50 females were placed on test as controls for each of the high dose and low dose groups.

In both species the survival in all groups was adequate for statistical analysis of late-appearing tumors.

In the male rats, a significantly increased incidence of fibroma of the skin and subcutaneous tissue occurred in both the high and the low dose groups when compared to their respective controls. A statistically significant incidence of fibroadenoma of the mammary gland occurred in the high dose female rats.

Among the mice a variety of tumors was observed but none were considered to be associated with the dietary administration of 2,4-dinitrotoluene.

Under the conditions of this bioassay dietary administration of 2,4-dinitrotoluene to Fischer 344 rats induced benign tumors (i.e., fibroma of the skin and subcutaneous tissue in males and fibroadenoma of the mammary gland in females). No evidence was provided for the carcinogenicity of the compound in B6C3F1 mice of either sex.

TABLE OF CONTENTS

			Page
1.	INT	RODUCTION	1
II.	MAT	ERTALS AND METHODS	3
	Α.	Chemicals	3
	В.	Dietary Preparation	3
	c.	Animals	4
	D.	Animal Maintenance	4
	F	Selection of Initial Concentrations	' 8
	F.	Experimental Design	9
	G.		12
	н.	Data Recording and Statistical Analyses	14
III.	CHR	DNIC TESTING RESULTS: RATS	19
	Α.	Body Weights and Clinical Observations	19
	В.	Survival	21
	c.	Pathology	21
		Statistical Analysis of Results	24
IV.	CHR	ONIC TESTING RESULTS: MICE	34
	Α.	Body Weights and Clinical Observations	34
	В.	Survival	34
		Pathology	37
	D.	Statistical Analyses of Results	37
v.	DIS	CUSSION	43
VI.	БІВ	LIOGRAPHY	45
APPENI	nty.	SUMMARY OF THE INCIDENCE OF NEOPLASMS IN RATS	
		TREATED WITH 2,4-DINITROTOLUENE	A-1
APPEN	DIX	SUMMARY OF THE INCIDENCE OF NEOPLASMS IN MICE	
		TREATED WITH 2,4-DINITROTOLUENE	B-1
APPEN	DIX :	SUMMARY OF THE INCIDENCE OF NONNEOPLASTIC	
		LESIONS IN RATS TREATED WITH 2,4-DINITROTOLUENE	C-1
APPENI	DIX !	SUMMARY OF THE INCIDENCE OF NONNEOPLASTIC	
	_	LESIONS IN MICE TREATED WITH 2,4-DINITROTOLUENE	D-1

LIST OF ILLUSTRATIONS

Figure Number		Page
1	GROWTH CURVES FOR 2,4-DINITROTOLUENE CHRONIC STUDY RATS	20
2	SURVIVAL COMPARISONS OF 2,4-DINITRO-TOLUENE CHRONIC STUDY RATS	22
3	GROWTH CURVES FOR 2,4-DINITROTOLUENE CHRONIC STUDY MICE	35
4	SURVIVAL COMPARISONS OF 2,4-DINITRO-TOLUENE CHRONIC STUDY MICE	36
	LIST OF TABLES	
Table Number		Page
1	DESIGN SUMMARY FOR FISCHER 344 RATS2,4-DINITROTOLUENE FEEDING EXPERIMENT	10
2	DESIGN SUMMARY FOR B6C3F1 MICE2,4- DINITROTOLUENE FEEDING EXPERIMENT	11
3	ANALYSES OF THE INCIDENCE OF PRIMARY TUMORS AT SPECIFIC SITES IN MALE RATS TREATED WITH 2,4-DINITROTOLUENE	25
4	ANALYSES OF THE INCIDENCE OF PRIMARY TUMORS AT SPECIFIC SITES IN FEMALE RATS TREATED WITH 2,4-DINITROTOLUENE	29
5	ANALYSES OF THE INCIDENCE OF PRIMARY TUMORS AT SPECIFIC SITES IN MALE MICE TREATED WITH 2,4-DINITROTOLUENE	38
6	ANALYSES OF THE INCIDENCE OF PRIMARY TUMORS AT SPECIFIC SITES IN FEMALE MICE TREATED WITH 2,4-DINITROTOLUENE	40

LIST OF TABLES (Concluded)

Table Number		Page
A1	SUMMARY OF THE INCIDENCE OF NEOPLASMS IN MALE RATS TREATED WITH 2,4-DINITRO-TOLUENE	A -3
A2	SUMMARY OF THE INCIDENCE OF NEOPLASMS IN FEMALE RATS TREATED WITH 2,4-DINITRO-TOLUENE	A- 8
B1	SUMMARY OF THE INCIDENCE OF NEOPLASMS IN MALE MICE TREATED WITH 2,4-DINITROTOLUENE	В-3
В2	SUMMARY OF THE INCIDENCE OF NEOPLASMS IN FEMALE MICE TREATED WITH 2,4-DINITROTOLUENE	В-6
C1	SUMMARY OF THE INCIDENCE OF NONNEOPLASTIC LESIONS IN MALE RATS TREATED WITH 2,4-DINITROTOLUENE	C-3
C2	SUMMARY OF THE INCIDENCE OF NONNEOPLASTIC LESIONS IN FEMALE RATS TREATED WITH 2,4-DINITROTOLUENE	C-12
D1	SUMMARY OF THE INCIDENCE OF NONNEOPLASTIC LESIONS IN MALE MICE TREATED WITH 2,4-DINITROTOLUENE	D-3
D2	SUMMARY OF THE INCIDENCE OF NONNEOPLASTIC LESIONS IN FEMALE MICE TREATED WITH 2,4-DINITROTOLUENE	D-8

I. INTRODUCTION

2,4-Dinitrotoluene (NCI No. CO1945), a precursor in the synthesis of azo dyes, was selected for bioassay by the National Cancer Institute along with other dye intermediates in an attempt to elucidate those chemicals which may be responsible for the increased incidence of bladder cancer observed among workers in the dye manufacturing industry (Wynder et al., 1963; Anthony and Thomas, 1970). Aromatic nitro compounds are one of several classes of chemicals thought to contribute to the increased cancer risk in this industry (Wynder et al., 1963). The structural relationship of 2,4-dinitrotoluene to the known carcinogen 2,4-diaminotoluene was also a factor in its selection for testing (Weisburger, 1976; Hiasa, 1970).

The Chemical Abstracts Service (CAS) Ninth Collective Index

(1977) name for this compound is 1-methyl-2,4-dinitrobenzene.* It is
also called 2,4-dinitrotoluol and 2,4-DNT.

Precise production figures for 2,4-dinitrotoluene are not available; however, the U.S. International Trade Commission (1977) reported a combined production of 272,610,000 pounds for the 2,4- and 2,6-dinitrotoluene isomers in 1975.

Aside from its use by the dye manufacturing industry, 2,4-dinitrotoluene is used by the munitions industry as a modifier for smokeless powders and, to a limited extent, as a gelatinizing and waterproofing

The CAS registry number is 121-14-2.

agent in military and commercial explosive compositions (Institute of Makers of Explosives, 1977). 2,4-Dinitrotoluene experiences wide-spread application as a chemical intermediate for the production of toluene diisocyanate (TDI) which, in turn, is consumed in the production of flexible polyurethane foams; however, most TDI producers use toluene as the starting material, generating 2,4-dinitrotoluene as a captive intermediate in the process (Urso, 1977).

The risk of exposure to 2,4-dinitrotoluene is greatest for workers in the dye and explosives industries and at chemical plants producing TDI. The general population may also experience exposure as a result of discharge of 2,4-dinitrotoluene into rivers and streams from munitions plants (Simon et al., 1977).

2,4-Dinitrotoluene can cause anemia, methemoglobinemia, cyanosis, and liver damage (Sax, 1975). It is rapidly absorbed through the intact skin; however, toxic levels may also be reached by inhalation or ingestion (Manufacturing Chemists Association, 1966). Studies by Simon et al. (1977), suggest that 2,4-dinitrotoluene is not a potent mutagen in the rat, as determined by dominant lethal mutation experiments.

II. MATERIALS AND METHODS

A. Chemicals

Practical-grade 2,4-dinitrotoluene was purchased from J. T. Baker Chemical Company. Analysis by the manufacturer suggested a purity greater than 95 percent. The observed melting point (67° to 70°C) suggested a compound of relative purity due to the narrow range and its close proximity to the literature value (71°C). Thin-layer chromatography visualized with ultraviolet light indicated at least one impurity. Ultraviolet analysis showed a peak at 250 nm which is consistent with the value reported in the literature (252 nm).

Throughout this report the term 2,4-dinitrotoluene is used to represent this practical-grade material.

B. Dietary Preparation

The basal laboratory diet for both treated and control animals was Wayne Lab-Blox[®] (Allied Mills, Inc.). 2,4-Dinitrotoluene was weighed under an exhaust hood and ground in a mortar and pestle with an aliquot of ground Wayne Lab-Blox[®] meal. Once visual homogeneity was attained, the mixture and the remainder of the feed to be administered to the treated animals were placed into a 6 kg capacity Patterson-Kelly twin shell stainless steel V-blender. After blending for 20 minutes, the mixture was sealed in double plastic bags and stored in the dark at 4°C. Mixtures were used for only 1 week.

C. Animals

Two animal species, rats and mice, were used in the carcinogenicity bioassay. Fischer 344 rats and both C57BL/6CR and B6C3F1 mice were obtained through contracts of the Division of Cancer Treatment, National Cancer Institute. High and low dose rats and mice, and high dose control rats were supplied by Charles River Breeding Laboratories, Wilmington, Massachusetts. Low dose control animals were supplied by ARS/Sprague-Dawley, Madison, Wisconsin. The low dose groups were received in shipments separate from their respective controls. Upon arrival, a sample of animals was examined for parasites and other signs of disease. The rats and mice to be tested were quarantined for 2 weeks prior to initiation of the bioassay. Animals were assigned to groups and distributed among cages so that average body weight per cage was approximately equal for a given sex and species.

D. Animal Maintenance

All animals were housed by species in rooms having a temperature range of 23° to 34°C and a range in relative humidity of 10 to 85 percent. Incoming air was filtered through Tri-Dek 15/40 denier Dacron filters providing six changes of room air per hour. Fluorescent lighting was provided on a 12-hour-daily cycle.

Rats were housed five per cage by sex. During quarantine and for the first 11 months of study, high dose rats and their controls

were maintained in galvanized- and stainless-steel wire-mesh cages suspended above newspapers. Low dose and low dose control rats were kept in these cages for the first 13 months of study. Newspapers under the cages were replaced daily and cages and racks washed weekly. For the remainder of the study, all rats were housed in suspended polycarbonate cages equipped with disposable nonwoven fiber filter sheets. Clean bedding and cages were provided twice weekly. Low dose rats and their controls were provided with hardwood chip bedding (Ab-sorb-dri®, Wilner Wood Products Co.) for the first 9 months that they were housed in polycarbonate cages. SAN-I-CEL corncob bedding (Paxton Processing Co.) was used for these animals for the next 12 months. High dose rats and their controls were provided with SAN-I-CEL® for the first 12 months that they were housed in polycarbonate cages. For the remainder of the study, Bed-o'Cobs (The Anderson's Cob Division) was provided in all treated and control rat cages. Stainless steel cage racks (Fenco Cage Products) were cleaned once every 2 weeks and disposable filters were replaced at that time.

Mice were housed by sex in polycarbonate cages. During quarantine and periods of chemical administration, cages were fitted with perforated stainless steel lids. During the observation period following chemical administration, stainless steel wire bar lids were substituted. Both types of lids were supplied by Lab Products, Inc. Nonwoven fiber filter bonnets were used over cage lids. All mice were housed 10 per cage for the first part of the study. Cage

populations for high dose, high dose control, low dose, and low dose control mice were reduced to five per cage after 12 months, 14 months, 19 months, and 19 months, respectively. Cages, lids, filters, and bedding were provided three times per week when cage populations were ten and twice per week when cage populations were reduced to five. Bedding was of the same brands as those used for rats. Ab-sorb-dri[®] was used for 2 months (high dose), 4 months (high dose controls), and 9 months (low dose and low dose controls) prior to SAN-I-CEL[®] being used for 12 months. A second type of corncob bedding (Bed-o'Cobs[®]) was then used for the remainder of the bioassay. Reusable filter bonnets and pipe racks were sanitized every 2 weeks throughout the study.

Water was available from 250 ml water bottles equipped with rubber stoppers and stainless steel sipper tubes. Bottles were replaced twice weekly. Food and water were available ad libitum.

Pelleted Wayne Lab-Blox was supplied to all animals during the quarantine and final observation periods. During the period of chemical administration, all treated animals received dosed Wayne Lab-Blox. Control animals received untreated meal. Alpine aluminum feed cups (Curtin Matheson Scientific, Inc.) containing stainless steel baffles were used to distribute powdered feed to low dose rats, their controls, and all mice during the entire study, and to high dose rats and their controls for the first 13 months of chemical administration. High dose rats and their controls were fed from stainless

steel gangstyle feed hoppers (Scientific Cages, Inc.) during the last 5 months of chemical administration. During the observation period, rats were fed pellets on the cage floor and mice were fed pellets from a wire bar hopper incorporated into the cage lid. Food hoppers were changed on the same schedule as were cages. Food was replenished daily in Alpine feed cups.

Low dose, low dose control, and high dose rats were housed in a room in which other rats were receiving diets treated with acetylaminofluorene (53-96-3); dulcin (150-69-6) and L-arginine glutamate (4320-30-3); sodium nitrite (7632-00-0); L-arginine glutamate (4320-30-3); N-butyl urea (592-31-4); N,N-dimethyl-p-nitrosoaniline (138-89-6); 2,5-toluenediamine sulfate (6369-59-1); 4-nitroanthranilic acid (619-17-0); 1,5-naphthalenediamine (2243-62-1); N-(1-naphthyl) ethylenediamine dihydrochloride (1465-25-4); 2-chloro-p-phenylenediamine sulfate (61702-44-1); aniline hydrochloride (142-04-1); and p-anisidine hydrochloride (20265-97-8). High dose control rats shared a room with other rats receiving diets treated with 5-nitro-o-toluidine (99-55-8); hydrazobenzene (530-50-7); 2-aminoanthraquinone (117-79-3); 3-amino-9-ethylcarbazole hydrochloride; 6-nitrobenzimidazole (94-52-0); 1-nitronaphthalene (86-57-7); 2,4-diaminoanisole sulfate (615-05-4); and APC (8003-03-0).

^{*} CAS registry numbers are given in parentheses.

Low dose, low dose control, and high dose mice were housed in a room in which other mice were receiving diets treated with: 2,5-toluenediamine sulfate (6369-59-1); 2-aminoanthraquinone (117-79-3); 3-amino-4-ethoxyacetanilide (17026-81-2); 3-amino-9-ethylcarbazole hydrochloride; 1-amino-2-methylanthraquinone (82-28-0); 5-nitro-o-anisidine (99-59-2); 1-nitronaphthalene (86-57-7); 4-nitroanthranilic acid (619-17-0); 5-nitroacenaphthene (602-87-9); 2,4-diaminoanisole sulfate (615-05-4); 3-nitro-p-acetophenetide (1777-84-0); and N,N-dimethyl-p-nitrosoaniline (138-89-6). High dose control mice shared a room with other mice receiving diets treated with 2-methyl-1-nitro-anthraquinone (129-15-7); p-cresidine (120-71-8); fenaminosulf (140-56-7); 4-chloro-m-phenylenediamine (5131-60-2); and cinnamyl anthranilate (87-29-6).

E. Selection of Initial Concentrations

Six-week subchronic toxicity studies were conducted with Fischer 344 rats and C57BL/6CR mice in order to determine the high concentrations for administration during the chronic bioassay. Animals of each species were distributed among four groups, each consisting of five males and five females. 2,4-Dinitrotoluene was administered in the feed for 4 weeks. Three animal groups of each species received dietary concentrations of 0.00375, 0.0075, and 0.015 percent. A fourth group of each species served as a control, receiving only the basal laboratory diet. No deaths occurred at any dose level tested.

All animals were sacrificed at the end of the test and gross necropsies were performed.

A dosage inducing no mortality and resulting in a depression in mean group body weight of approximately 15 percent relative to controls was to be selected as the initial high dose. When weight gain criteria were not applicable, mortality data alone were utilized.

The initial high dose selected for administration to rats and mice in the chronic study was 0.008 percent. However, for the reasons indicated below, the initial high doses utilized for rats and mice in the chronic study were 0.02 and 0.04 percent, respectively.

F. Experimental Design

The experimental design parameters for the chronic study (species, sex, group size, concentrations administered, duration of treated and untreated observation periods, and the time-weighted average concentrations) are summarized in Tables 1 and 2.

The treated and control rats were all approximately 6 weeks old at the time they were placed on test. The initial dietary concentrations of 2,4-dinitrotoluene administered to rats were 0.0075 and 0.00375 percent. After week 19, the higher dose was changed from 0.0075 to 0.008 percent to facilitate dose formulation. The rat group receiving 0.00375 percent was sacrificed after 51 weeks and no histopathologic examinations were performed because the dose levels being used in the chronic bioassay were considered, on the basis of weight depression, to have been too low. A new group, receiving

TABLE 1

DESIGN SUMMARY FOR FISCHER 344 RATS
2,4-DINITROTOLUENE FEEDING EXPERIMENT

	INITIAL GROUP SIZE	2,4-DINITRO- TOLUENE (PERCENT)	OBSERVAT TREATED (WEEKS)	ION PERIOD UNTREATED (WEEKS)	TIME-WEIGHTED AVERAGE CONCENTRATION
MALE					
LOW DOSE CONTROL	50	0	0	104	0
HIGH DOSE CONTROL	25	0	0	104	0
LOW DOSE	50	0.0075 0.008 0	19 59	26	0.008
HIGH DOSE	50	0.02 0	78	26	0.02
FEMALE					
LOW DOSE CONTROL	50	0	0	104	0
HIGH DOSE CONTROL	25	0	0	104	0
LOW DOSE	50	0.0075 0.008 0	19 59	26	0.008
HIGH DOSE	50	0.02	78	26	0.02

Time-weighted average concentration = $\frac{\sum (\text{concentration x weeks received})}{\sum (\text{weeks receiving chemical})}$

TABLE 2

DESIGN SUMMARY FOR B6C3F1 MICE
2,4-DINITROTOLUENE FEEDING EXPERIMENT

	INITIAL GROUP SIZE	2,4-DINITRO- TOLUENE (PERCENT)	OBSERVAT TREATED (WEEKS)	UNTREATED (WEEKS)
MALE				
LOW DOSE CONTROL	50	0	0	91
HIGH DOSE CONTROL	50	0	0	91
LOW DOSE	50	0.008	78	13
HIGH DOSE	50	0.04	78	13
FEMALE				
LOW DOSE CONTROL	50	0	0	91
HIGH DOSE CONTROL	50	0	0	91
LOW DOSE	50	0.008	78	13
HIGH DOSE	50	0.04	78	13

0.02 percent, was started with a new control. Throughout this report the groups initially receiving a concentration of 0.0075 percent and their controls are referred to as the low dose and low dose control groups, respectively, while the groups receiving 0.02 percent and their controls are referred to as the high dose and high dose control groups, respectively. These treated rats were supplied with dosed feed for a total of 78 weeks followed by a 26-week observation period.

The treated and control mice were all approximately 6 weeks old at the time they were placed on test. The initial dietary concentrations of 2,4-dinitrotoluene administered to mice were 0.008 and 0.00375 percent. The mouse groups receiving 0.00375 percent were sacrificed after 29 weeks because the groups receiving 0.008 percent did not demonstrate desired weight depression. A new group, receiving 0.04 percent, was started with a new control group. Throughout this report the groups initially receiving a concentration of 0.008 percent and their controls are referred to as the low dose and low dose control groups, respectively, while the groups receiving 0.04 percent and their controls are referred to as the high dose and high dose control groups, respectively. Treated mice were supplied with dosed feed for a total of 78 weeks, followed by a 13-week observation period.

G. Clinical and Histopathologic Examinations

Animals were weighed immediately prior to initiation of the experiment. From the first day, all animals were inspected twice

daily for mortality. Body weights were recorded twice weekly for the first 12 weeks of the study and at monthly intervals thereafter. Food consumption, for two cages from each group, was monitored for seven consecutive days once a month for the first nine months of the bioassay and for three consecutive days each month thereafter. The presence of tissue masses and lesions was determined by monthly observation and palpation of each animal.

A necropsy was performed on each animal regardless of whether it died, was killed when moribund, or was sacrificed at the end of the bioassay. The animals were euthanized by carbon dioxide inhalation, and were immediately necropsied. The histopathologic examination consisted of gross and microscopic examination of major tissues, organs, or gross lesions taken from sacrificed animals and, whenever possible, from animals found dead.

Slides were prepared from the following tissues: skin, subcutaneous tissue, lungs and bronchi, trachea, bone marrow, spleen, lymph nodes, thymus, heart, salivary gland, liver, gallbladder and bile duct (mice), pancreas, esophagus, stomach, small intestine, large intestine, kidney, urinary bladder, pituitary, adrenal, thyroid, parathyroid, testis, prostate, brain, ear, uterus, mammary gland, and ovary.

Tissues for which slides were prepared were preserved in 10 percent buffered formalin, embedded in paraffin, sectioned, and stained with hematoxylin and eosin prior to microscopic examination. An

occasional section was subjected to special staining techniques for more definitive diagnosis.

A few tissues were not examined for some animals, particularly for those that died early. Also, some animals were missing, cannibalized, or judged to be in such an advanced state of autolysis as to preclude histopathologic interpretation. Thus, the number of animals for which particular organs, tissues, or lesions were examined microscopically varies and does not necessarily represent the number of animals that were placed on experiment in each group.

H. Data Recording and Statistical Analyses

Pertinent data on this experiment have been recorded in an automatic data processing system, the Carcinogenesis Bioassay Data System (Linhart et al., 1974). The data elements include descriptive information on the chemicals, animals, experimental design, clinical observations, survival, body weight, and individual pathologic results, as recommended by the International Union Against Cancer (Berenblum, 1969). Data tables were generated for verification of data transcription and for statistical review.

These data were analyzed using the statistical techniques described in this section. Those analyses of the experimental results that bear on the possibility of carcinogenicity are discussed in the statistical narrative sections.

Probabilities of survival were estimated by the product-limit procedure of Kaplan and Meier (1958) and are presented in this report

in the form of graphs. Animals were statistically censored as of the time that they died of other than natural causes or were found to be missing; animals dying from natural causes were not statistically censored. Statistical analyses for a possible dose-related effect on survival used the method of Cox (1972) for testing two groups for equality and used Tarone's (1975) extensions of Cox's methods for testing a dose-related trend. One-tailed P-values have been reported for all tests except the departure from linearity test, which is only reported when its two-tailed P-value is less than 0.05.

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

The purpose of the statistical analyses of tumor incidence is to determine whether animals receiving the test chemical developed a significantly higher proportion of tumors than did the control animals. As a part of these analyses, the one-tailed Fisher exact test (Cox, 1970, pp. 48-52) was used to compare the tumor incidence of a control

group to that of a group of treated animals at each dose level. When results for a number of treated groups, k, are compared simultaneously with those for a control group, a correction to ensure an overall significance level of 0.05 may be made. The Bonferroni inequality (Miller, 1966, pp. 6-10) requires that the P-value for any comparison be less than or equal to 0.05/k. In cases where this correction was used, it is discussed in the narrative section. It is not, however, presented in the tables, where the Fisher exact P-values are shown.

A time-adjusted analysis was applied when numerous early deaths resulted from causes that were not associated with the formation of tumors. In this analysis, deaths that occurred before the first tumor was observed were excluded by basing the statistical tests on animals that survived at least 52 weeks, unless a tumor was found at the anatomic site of interest before week 52. When such an early tumor was found, comparisons were based exclusively on animals that survived at least as long as the animal in which the first tumor was found. Once this reduced set of data was obtained, the standard procedures for analyses of the incidence of tumors (Fisher exact tests, Cochran-Armitage tests, etc.) were followed.

When appropriate, life-table methods were used to analyze the incidence of tumors. Curves of the proportions surviving without an observed tumor were computed as in Saffiotti et al. (1972). The week during which animals died naturally or were sacrificed was entered as the time point of tumor observation. Cox's methods of comparing

these curves were used for two groups; Tarone's extension to testing for linear trend was used for three groups. The statistical tests for the incidence of tumors which used life-table methods were one-tailed and, unless otherwise noted, in the direction of a positive dose relationship. Significant departures from linearity (P < 0.05, two-tailed test) were also noted.

The approximate 95 percent confidence interval for the relative risk of each dosed group compared to its control was calculated from the exact interval on the odds ratio (Gart, 1971). The relative risk is defined as p_t/p_c where p_t is the true binomial probability of the incidence of a specific type of tumor in a treated group of animals and p_c is the true probability of the spontaneous incidence of the same type of tumor in a control group. The hypothesis of equality between the true proportion of a specific tumor in a treated group and the proportion in a control group corresponds to a relative risk of unity. Values in excess of unity represent the condition of a larger proportion in the treated group than in the control.

The lower and upper limits of the confidence interval of the relative risk have been included in the tables of statistical analyses. The interpretation of the limits is that in approximately 95 percent of a large number of identical experiments, the true ratio of the risk in a treated group of animals to that in a control group would be within the interval calculated from the experiment. When the lower limit of the confidence interval is greater than one, it

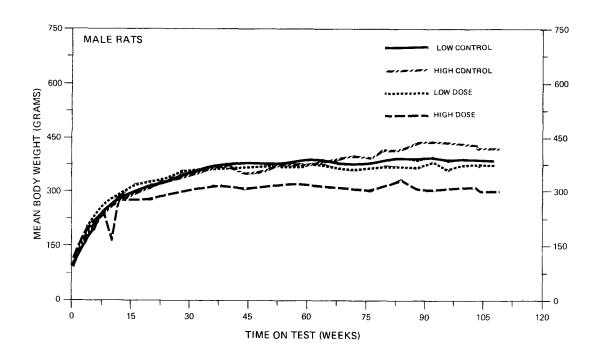
can be inferred that a statistically significant result (a P < 0.025 one-tailed test when the control incidence is not zero, P < 0.050 when the control incidence is zero) has occurred. When the lower limit is less than unity but the upper limit is greater than unity, the lower limit indicates the absence of a significant result while the upper limit indicates that there is a theoretical possibility of the induction of tumors by the test chemical which could not be detected under the conditions of this test.

III. CHRONIC TESTING RESULTS: RATS

A. Body Weights and Clinical Observations

In males, mean body weight depression was evident in the high dose group, when compared to the high dose controls, as early as week 16 (Figure 1). At the end of the bioassay these high dose males weighed approximately 25 percent less than their controls. Very slight mean body weight depression was recorded for the low dose males when compared to their controls. The same general weight depression patterns were observed in females. The exceptions were: the unexplained large weight gain and subsequent loss in the low dose females as compared to their controls during weeks 36 to 68; the negative and positive peaks observed in high dose males and females, respectively, in week 10; and a mean group body weight in the high dose females approximately 18 percent less than their controls at the end of the bioassay.

Clinical observations recorded for rats were primarily limited to palpable subcutaneous masses (one low dose female, one low dose control female, and three high dose males) and ulcerative inguinal lesions (one high dose male, one low dose control male, and one low dose control female). The only other clinical signs reported were pale discoloration of the eye in one high dose male and an abscess on the ventral surface in one high dose female.



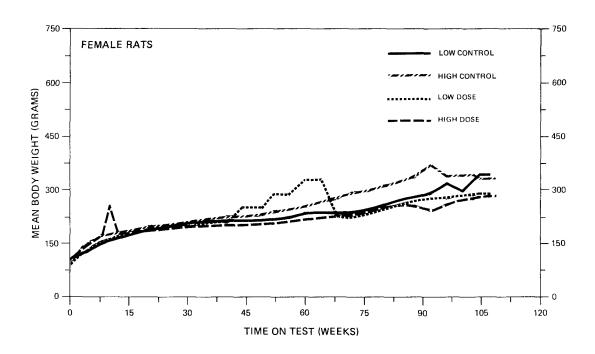


FIGURE 1
GROWTH CURVES FOR 2,4-DINITROTOLUENE CHRONIC STUDY RATS

B. Survival

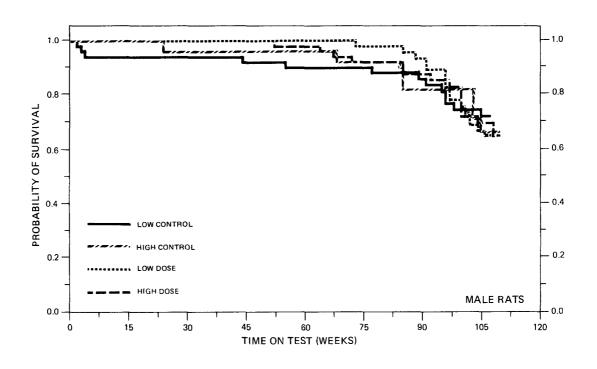
The estimated probabilities of survival for male and female rats in the control and 2,4-dinitrotoluene-treated groups are shown in Figure 2. Because the experiments for the low dose and high dose rats were conducted at different times, each was assigned its own set of controls.

For male rats neither the high dose nor the low dose group experienced a significantly different survival rate from its corresponding control group. Despite the sacrifice of five males from each group in week 78, survival was relatively good: 58 percent (29/50) of the high dose, 58 percent (29/50) of the low dose, 52 percent (13/25) of the high dose control, and 64 percent (32/50) of the low dose control group survived until the end of the study.

For female rats neither the high dose nor the low dose group had a significantly different survival rate from its corresponding control group. Five females were sacrificed from each group in week 78. Survival, however, was relatively good as 52 percent (26/50) of the high dose, 48 percent (12/25) of the high dose control, 62 percent (31/50) of the low dose, and 62 percent (31/50) of the low dose control survived until the end of the study.

C. Pathology

Histopathologic findings on neoplasms in rats are tabulated in Appendix A (Tables Al and A2); findings on nonneoplastic lesions are tabulated in Appendix C (Tables Cl and C2).



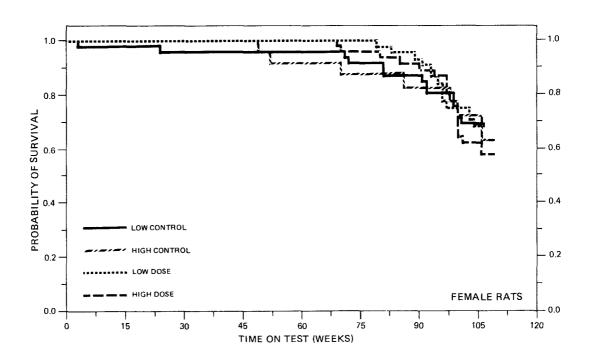


FIGURE 2
SURVIVAL COMPARISONS OF 2,4-DINITROTOLUENE CHRONIC STUDY RATS

There appeared to be an increase in the occurrence of integumentary tumors in low and high dose males. The predominant tumor type was the fibroma (skin/subcutaneous tissue 7/49 low dose, 13/49 high dose), with the sporadic occurrence of squamous-cell papillomas (1/49 low dose), basal-cell carcinomas (1/49 low dose), fibrosarcomas (1/49 low dose; 2/49 high dose), and lipomas (3/49 high dose). None of these integumentary tumor types were observed in control males. Among females, a slight increase in fibromas of the skin was noted among the high dose group. The fibromas were circumscribed, well-differentiated masses composed of mature fibroblasts enmeshed in bundles and whorls of collagen.

In assessment of other organ systems, there was a high incidence of fibroadenomas of the mammary gland in high dose females. The histologic appearance of these tumors was basically similar to those described by Hallowes and Young (1973). However, certain histologic variations were seen in these fibroadenomas which were not noted by Hallowes and Young. Marked variation in the epithelial/stromal ratio of the tumors was noted and many contained large dilated ducts of galactoceles which contained secretion. Within a focal area of a fibroadenoma in one low dose female, transformation to an intraductal carcinoma was noted. In the affected area, cells were more hyperchromatic, piled upon each other, and there were numerous mitotic figures. In one high dose female with multiple mammary tumors, four were fibroadenomas and one was an adenocarcinoma. Lobular hyperplasia of mammary

tissue adjacent to the fibroadenomas frequently occurred and, in some areas, there was marked basophilia of the cytoplasm and hyperchromicity of nuclei in the hyperplastic lobules. In general, the remaining organ systems showed a similar variety and incidence of neoplasms in the chemically treated and control groups, and these were considered to be part of the general background level of neoplasms in Fischer 344 rats.

Certain unusual neoplasms occurred in a low incidence in some treated groups and not in controls. These included one hemangiosarcoma in the subcutis, one hemangiosarcoma of the urinary bladder, and one adenocarcinoma of the prostate gland in the high dose males. However, these are not considered to be related to chemical administration.

The incidence and variety of nonneoplastic, degenerative, proliferative, and inflammatory lesions were similar in control and chemically treated rats.

Based on the increase of fibromas in male rats and fibroadenomas in high dose female rats observed in this histopathologic examination, 2,4-dinitrotoluene appeared to induce benign tumors in the Fischer 344 rat.

D. Statistical Analyses of Results

The results of the statistical analyses of tumor incidence in rats are summarized in Tables 3 and 4. The analysis for every type

TABLE 3

ANALYSES OF THE INCIDENCE OF PRIMARY TUMORS AT SPECIFIC SITES IN MALE RATS TREATED WITH 2,4-DINITROTOLUENE a

TOPOGRAPHY: MORPHOLOGY	LOW DOSE CONTROL	HIGH DOSE CONTROL	LOW DOSE	HIGH DOSE
Liver: Hepatocellular Carcinomab	0/45(0.00)	0/25(0.00)	3/49(0.06)	3/48(0.06)
P Values ^C			N.S.	N.S.
Relative Risk (Control) ^d Lower Limit			Infinite 0.554	Infinite 0.321
Upper Limit			Infinite	Infinite
Weeks to First Observed Tumor			96	108
Subcutaneous Tissue or Skin: Fibroma ^b	0/46(0.00)	0/25(0.00)	7/49(0.14)	13/49(0.27)
P Values ^C			P = 0.008	P = 0.003
Relative Risk (Control) ^d Lower Limit Upper Limit		 	Infinite 1.827 Infinite	Infinite 2.106 Infinite
Weeks to First Observed Tumor			96	85
Subcutaneous Tissue: Lipoma ^b	0/46(0.00)	0/25(0.00)	0/49(0.00)	3/49(0.06)
P Values ^C				N.S.
Relative Risk (Control) d				Infinite
Lower Limit Upper Limit				N.S. Infinite
Weeks to First Observed Tumor				108

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TABLE 3 (Continued)

TOPOGRAPHY: MORPHOLOGY	LOW DOSE CONTROL	HIGH DOSE CONTROL	LOW DOSE	HIGH DOSE
	CONTROL	CONTROL	DOOL	DOSE
Pancreatic Islets: Islet-Cell Adenoma or Islet-Cell Carcinoma ^b	1/45(0.02)	2/25(0.08)	3/45(0.07)	3/48(0.06)
P Values ^C			N.S.	N.S.
Relative Risk (Control) ^d			3.000	0.781
Lower Limit			0.252	0.097
Upper Limit			153.830	8.952
Weeks to First Observed Tumor	105	109	102	78
Hematopoietic System: Leukemia b	3/46(0.07)	4/25(0.16)	4/49(0.08)	3/49(0.06)
P Values ^c		N.S.	N.S.	N.S.
Relative Risk (Control) ^d			1.252	0.383
Lower Limit			0.224	0.061
Upper Limit			8.138	2.111
Weeks to First Observed Tumor	105	85	78	64
Pituitary: Adenoma NOS or Basophil				
Adenomab	9/44(0.20)	3/21(0.14)	5/44(0.11)	0/35(0.00)
P Values ^C			N.S.	P = 0.048(N)
Relative Risk (Control) ^d			0.556	0.000
Lower Limit			0.159	0.000
Upper Limit			1.689	0.979
Weeks to First Observed Tumor	105	78	78	

TOPOGRAPHY: MORPHOLOGY	LOW DOSE CONTROL	HIGH DOSE CONTROL	LOW DOSE	HIGH DOSE
Adrenal: Pheochromocytomab	6/45(0.13)	2/25(0.08)	3/46(0.07)	3/45(0.07)
P Values ^C			N.S.	N.S.
Relative Risk (Control) d	~		0.489	0.833
Lower Limit Upper Limit			0.084 2.140	0.104 9.528
Weeks to First Observed Tumor	96	109	106	108
Thyroid: C-Cell Adenoma or C-Cell Carcinoma ^b	3/42(0.06)	0/23(0.00)	3/41(0.07)	5/47(0.11)
P Values ^C	3/42(0.00)	0/25(0.00)	N.S.	N.S.
Relative Risk (Control) ^d			1.537	Infinite
Lower Limit Upper Limit			0.186 17.606	0.637 Infinite
Weeks to First Observed Tumor	105		96	108
Testis: Interstitial-Cell Tumor	44/45(0.98)	19/24(0.79)	43/46(0.93)	46/49(0.94)
P Values ^C			N.S.	N.S.
Relative Risk (Control) d			0.956	1.186
Lower Limit	-		0.914	0.963
Upper Limit	~~~		1.058	1.411
Weeks to First Observed Tumor	77	78	78	72

TABLE 3 (Concluded)

^aTreated groups received time-weighted average concentrations of 0.008 or 0.020 percent in feed.

b_{Number} of tumor-bearing animals/number of animals examined at site (proportion).

The probability level for the Fisher exact test for the comparison of a treated group with the control group is given beneath the incidence of tumors in the treated group when P < 0.05; otherwise, not significant (N.S.) is indicated. A negative designation (N) indicates a lower incidence in the treated group than in the control group.

 $^{^{}m d}$ The 95% confidence interval of the relative risk of the treated group to the control group.

TABLE 4

ANALYSES OF THE INCIDENCE OF PRIMARY TUMORS AT SPECIFIC SITES IN FEMALE RATS TREATED WITH 2,4-DINITROTOLUENE^a

TOPOGRAPHY: MORPHOLOGY	LOW DOSE CONTROL	HIGH DOSE CONTROL	LOW DOSE	HIGH DOSE
Liver: Hepatocellular Carcinomab	1/47(0.02)	0/23(0.00)	0/49(0.00)	1/50(0.02)
P Values ^c			N.S.	N.S.
Relative Risk (Control) ^d Lower Limit Upper Limit	 	 	0.000 0.000 17.891	Infinite 0.025 Infinite
Weeks to First Observed Tumor	107			109
Subcutaneous Tissue: Fibroma	0/48(0.00)	0/23(0.00)	0/49(0.00)	3/50(0.06)
P Values ^c				N.S.
Relative Risk (Control) ^d Lower Limit Upper Limit	 	 		Infinite 0.285 Infinite
Weeks to First Observed Tumor				100
Mammary Gland: Fibroadenomab	9/48(0.19)	4/23(0.17)	12/49(0.24)	23/50(0.46)
P Values ^c	This lates Title		N.S.	P = 0.016
Relative Risk (Control) ^d Lower Limit Upper Limit		 	1.306 0.559 3.183	2.645 1.062 9.435
Weeks to First Observed Tumor	92	109	83	69

29

TABLE 4 (Continued)

TOPOGRAPHY: MORPHOLOGY	LOW DOSE CONTROL	HIGH DOSE CONTROL	LOW DOSE	HIGH DOSE
Hematopoietic System: Leukemia b	2/48(0.04)	2/23(0.09)	2/49(0.04)	4/50(0.08)
P Values ^C			N.S.	N.S.
Relative Risk (Control) ^d			0.980	0.920
Lower Limit			0.074	0.145
Upper Limit			13.043	9.724
Weeks to First Observed Tumor	105	106	107	93
Pituitary: Adenoma NOS or				
Chromophobe Adenoma ^b	19/46(0.41)	8/21(0.38)	22/45(0.49)	14/40(0.35)
P Values ^C			N.S.	N.S.
Relative Risk (Control) ^d			1.184	0.919
Lower Limit			0.718	0.446
Upper Limit			1.955	2.154
Weeks to First Observed Tumor	71	109	78	78
Adrenal: Pheochromocytoma b	2/47(0.04)	2/23(0.09)	2/49(0.04)	0/50(0.00)
P Values ^C			N.S.	N.S.
Relative Risk (Control) ^d			0.959	0.000
Lower Limit			0.072	0.000
Upper Limit			12.769	3.177
Weeks to First Observed Tumor	105	109	78	

TABLE 4 (Concluded)

TOPOGRAPHY: MORPHOLOGY	LOW DOSE CONTROL	HIGH DOSE CONTROL	LOW DOSE	HIGH DOSE
Thyroid: C-Cell Adenoma or C-Cell Carcinoma ^b	2/45(0.04)	3/21(0.14)	2/45(0.04)	6/48(0,13)
P Values ^C			N.S.	N.S.
Relative Risk (Control) ^d Lower Limit Upper Limit	 		1.000 0.075 13.270	0.875 0.213 5.047
Weeks to First Observed Tumor	105	109	94	100
Uterus: Endometrial Stromal Polyp ^b	15/46(0.33)	6/23(0.26)	14/47(0.30)	11/49(0.22
P Values ^c			N.S.	N.S.
Relative Risk (Control) ^d Lower Limit Upper Limit		 	0.914 0.464 1.789	0.861 0.343 2.539
Weeks to First Observed Tumor	78	86	91	78

 $^{^{\}mathrm{a}}$ Treated groups received time-weighted average concentrations of 0.008 or 0.020 percent in feed.

 $^{^{\}mathrm{b}}$ Number of tumor-bearing animals/number of animals examined at site (proportion).

The probability level for the Fisher exact test for the comparison of a treated group with the control group is given beneath the incidence of tumors in the treated group when P < 0.05; otherwise, not significant (N.S.) is indicated. A negative designation (N) indicates a lower incidence in the treated group than in the control group.

d_{The 95%} confidence interval of the relative risk of the treated group to the control group.

of tumor that was observed in more than 5 percent of any of the 2,4-dinitrotoluene-dosed groups of either sex is included. The Cochran-Armitage test was not used in these analyses since the low dose and the low dose control were started at a different time from the high dose and the high dose control.

For male rats the Fisher exact test showed that the high dose group had a significantly (P = 0.003) higher incidence of fibromas of the subcutaneous tissue and skin than the high dose control. For the comparison of low dose to low dose control the Fisher exact test was also significant (P = 0.008). In the historical data compiled by this laboratory for the NCI Bioassay Program, 23/584 (3 percent) of the untreated male Fischer 344 rats had fibromas of the subcutaneous tissue or skin.

Based on these results the statistical conclusion is that the administration of 2,4-dinitrotoluene to male Fischer 344 rats was associated with the increased incidence of fibromas of the subcutaneous tissue or skin.

In females the Fisher exact test indicated a significant (P = 0.016) increase in fibroadenomas of the mammary gland in the high dose compared to the high dose control. The historical data indicated 115/585 (20 percent) untreated female Fischer 344 rats had a mammary fibroadenoma.

Based upon these results the statistical conclusion is that the administration of 2,4-dinitrotoluene to the high dose female Fischer

344 rats was associated with the increased incidence of fibroadenomas of the mammary gland.

The possibility of a negative association between administration and incidence was noted for pituitary adenomas in male rats.

IV. CHRONIC TESTING RESULTS: MICE

A. Body Weights and Clinical Observations

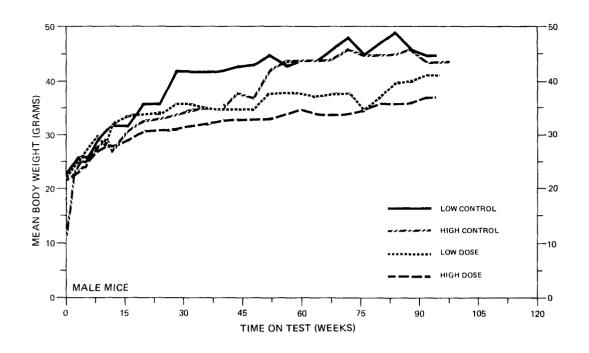
When compared with their respective controls, high and low dose mice of both sexes exhibited mean body weight depression by week 30 (Figure 3). Approximate weight gain, expressed as a percentage of the weight gained by their respective control groups at the end of the bioassay, was 91 percent for low dose males, 82 percent for high dose males, 89 percent for low dose females, and 76 percent for high dose females.

No clinical observations were reported for any treated or control mice of either sex.

B. Survival

The estimated probabilities of survival for male and female mice in the control and 2,4-dinitrotoluene-treated groups are shown in Figure 4. Because the low and high dose groups were tested at different times, each was assigned its own control group.

The statistical tests did not indicate a significant positive relationship between dosage and mortality for either sex. In male mice survival was high despite the sacrifice of five high dose and five high dose control males in week 78 and of five of the low dose control males in week 79. Seventy-eight percent of the high dose, 74 percent of the high dose control, 90 percent of the low dose, and 82 percent of the low dose control males survived until the end of the test.



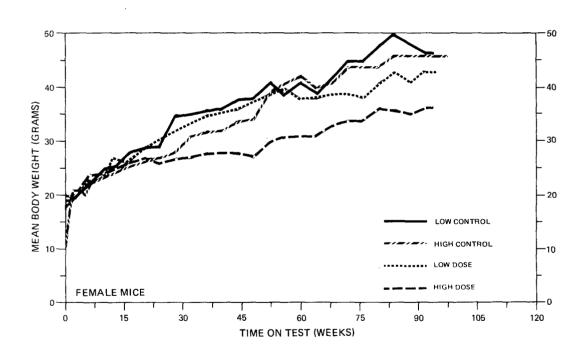
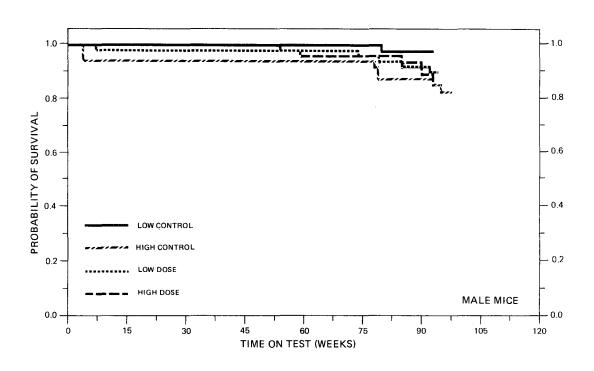


FIGURE 3
GROWTH CURVES FOR 2,4-DINITROTOLUENE CHRONIC STUDY MICE



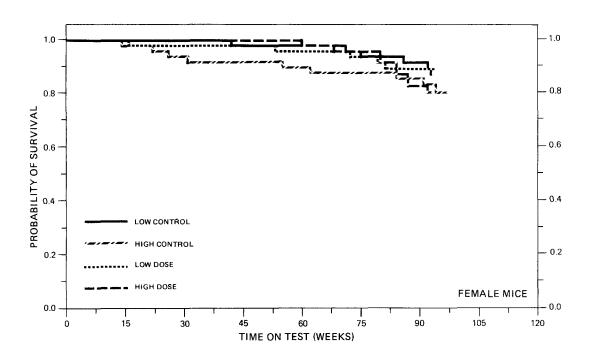


FIGURE 4
SURVIVAL COMPARISONS OF 2,4-DINITROTOLUENE CHRONIC STUDY MICE

In females five of the high dose treated and five of the high dose control mice were sacrificed in week 78, as well as five low dose controls in week 79. Seventy-two percent of the high dose, 70 percent of the high dose control, 84 percent of the low dose, and 78 percent of the low dose control survived until the end of the study.

Thus in both sexes survival was adequate for meaningful statistical analyses.

C. Pathology

Histopathologic findings on neoplasms in mice are summarized in Appendix B (Tables Bl and B2); findings on nonneoplastic lesions are summarized in Appendix D (Tables Dl and D2).

There appeared to be no increase in the incidence of neoplasms in the treated mice compared with their corresponding control groups. With few exceptions, the same variety of neoplasms occurred in the chemically treated and control groups. This spectrum of neoplasms was similar to that expected in untreated B6C3F1 mice.

The incidence and variety of nonneoplastic, degenerative, proliferative, and inflammatory lesions was similar in the control and chemically treated mice.

This histopathologic examination of B6C3F1 mice treated with 2,4-dinitrotoluene provided no evidence of carcinogenicity.

D. Statistical Analyses of Results

The results of the statistical analyses of tumor incidence in mice are summarized in Tables 5 and 6. The analysis for every type

TABLE 5

ANALYSES OF THE INCIDENCE OF PRIMARY TUMORS AT SPECIFIC SITES IN MALE MICE TREATED WITH 2,4-DINITROTOLUENE^a

TOPOGRAPHY: MORPHOLOGY	LOW DOSE CONTROL	HIGH DOSE CONTROL	LOW DOSE	HIGH DOSE
Liver: Hepatocellular Carcinoma ^b	12/46(0.26)	10/45(0.22)	6/47(0.13)	9/48(0.19)
P Values ^c			n.s.	N.S.
Relative Risk (Control) ^d Lower Limit Upper Limit			0.489 0.165 1.281	0.844 0.335 2.095
Weeks to First Observed Tumor	93	93	92	59
Hematopoietic System: Malignant Lymphoma	b 2/46(0.04)	2/46(0.04)	1/48(0.02)	3/49(0.06)
P Values ^C			N.S.	N.S.
Relative Risk (Control) ^d Lower Limit Upper Limit	 	 	0.479 0.008 8.888	1.408 0.169 16.250
Weeks to First Observed Tumor	93	97	93	78
Lung: Alveolar/Bronchiolar Carcinoma	2/46(0.04)	4/45(0.09)	3/48(0.06)	1/48(0.02)
P Values ^C			N.S.	N.S.
Relative Risk (Control) ^d Lower Limit Upper Limit	 	 	1.437 0.173 16.575	0.234 0.005 2.254
Weeks to First Observed Tumor	93	97	93	93

TOPOGRAPHY: MORPHOLOGY	LOW DOSE CONTROL	HIGH DOSE CONTROL	LOW DOSE	HIGH DOSE
Lung: Alveolar/Bronchiolar Adenoma or Alveolar/Bronchiolar Carcinoma ^b	7/46(0.15)	11/45(0.24)	3/48(0.06)	2/48(0.04)
P Values ^C		****	N.S.	P = 0.005(N
Relative Risk (Control) ^d Lower Limit Upper Limit	 		0.411 0.072 1.679	0.170 0.019 0.725
Weeks to First Observed Tumor	79	78	93	93
Hematopoietic System: Hemangiosarcoma or Hemangioma ^b	0/46(0.00)	0/46(0.00)	3/48(0.06)	0/49(0.00)
P Values ^C			N.S.	~
Relative Risk (Control) ^d Lower Limit Upper Limit			Infinite 0.578 Infinite	
Weeks to First Observed Tumor			93	

 $^{^{\}mathbf{a}}$ Treated groups received time-weighted average concentrations of 0.008 or 0.040 percent in feed.

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

^CThe probability level for the Fisher exact test for the comparison of a treated group with the control group is given beneath the incidence of tumors in the treated group when P < 0.05; otherwise, not significant (N.S.) is indicated. A negative designation (N) indicates a lower incidence in the treated group than in the control group.

 $^{^{}m d}_{
m The}$ 95% confidence interval of the relative risk of the treated group to the control group.

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TABLE 6

ANALYSES OF THE INCIDENCE OF PRIMARY TUMORS AT SPECIFIC SITES IN FEMALE MICE TREATED WITH 2,4-DINITROTOLUENE a

TOPOGRAPHY: MORPHOLOGY	LOW DOSE CONTROL	HIGH DOSE CONTROL	LOW DOSE	HIGH DOSE
Liver: Hepatocellular Carcinoma ^b	4/46(0.09)	4/45(0.09)	1/46(0.02)	1/50(0.02)
P Values ^C			N.S.	N.S.
Relative Risk (Control) ^d			0.250	0.225
Lower Limit	ands maps alone		0.005	0.005
Upper Limit			2.401	2.167
Weeks to First Observed Tumor	93	78	94	93
Hematopoietic System: Malignant Lymphom	na ^b 5/46(0.11)	11/46(0.24)	4/46(0.09)	7/50(0.14)
P Values ^C	the time tills		N.S.	N.S.
Relative Risk (Control) d			0.800	0.586
Lower Limit			0.169	0.211
Upper Limit			3.480	1.509
Weeks to First Observed Tumor	79	94	94	68
Lung: Alveolar/Bronchiolar Adenoma	0/46(0.00)	1/45(0.02)	3/46(0.07)	0/48(0.00)
P Values ^C			N.S.	N.S.
Relative Risk (Control) d			Infinite	0.000
Lower Limit			0.603	0.000
Upper Limit			Infinite	17.480
Weeks to First Observed Tumor		97	84	

^aTreated groups received time-weighted average concentrations of 0.008 or 0.040 percent in feed.

bNumber of tumor-bearing animals/number of animals examined at site (proportion).

^CThe probability level for the Fisher exact test for the comparison of a treated group with the control group is given beneath the incidence of tumors in the treated group when P < 0.05; otherwise, not significant (N.S.) is indicated. A negative designation (N) indicates a lower incidence in the treated group than in the control group.

 $^{^{}m d}$ The 95% confidence interval of the relative risk of the treated group to the control group.

of tumor that was observed in more than 5 percent of any of the 2,4-dinitrotoluene-dosed groups of either sex is included.

There were no tumors in either sex having a statistically significant positive association between chemical administration and incidence. As such, there was no convincing evidence of carcinogenicity in B6C3Fl mice at the dose levels used in this experiment.

To provide additional insight into the possible carcinogenicity of this compound, 95 percent confidence intervals on the relative risk have been estimated and entered in the tables based upon the observed tumor incidence rates. In many of the intervals shown in Tables 5 and 6, the value one is included; this indicates the absence of statistically significant results. It should also be noted that many of the confidence intervals have an upper limit greater than one, indicating the theoretical possibility of tumor induction in mice by 2,4-dinitrotoluene that could not be established under the conditions of this test.

The possibility of a negative association between administration and incidence was observed for pituitary adenomas in female mice and for alveolar/bronchiolar neoplasms in male mice.

V. DISCUSSION

Under the conditions of this bioassay, dietary administration of 2,4-dinitrotoluene was associated with increased incidences of fibromas of the subcutaneous tissue and skin in male rats and fibroadenomas of the mammary gland in female rats, but there were no increased incidences of tumors in treated mice of either sex when compared to controls. No significant association was demonstrated between chemical administration and mortality in either species.

In male rats integumentary tumors (i.e., fibromas) were the only neoplasms observed at statistically significant incidences. The incidences of skin and subcutaneous tissue fibromas were 0/46, 0/25, 7/49 (14 percent), and 13/49 (27 percent) in low dose control, high dose control, low dose, and high dose males, respectively. The only group among the female rats exhibiting these tumors was the high dose (3/50 or 6 percent). Statistical analyses of the incidences of these subcutaneous fibromas indicated a significant positive increase in incidence for the high dose males compared to the high dose control males.

There were certain unusual neoplasms (i.e., hemangiosarcoma in the subcutis, hemangiosarcoma of the urinary bladder, and prostate gland adenocarcinoma) that occurred at low incidences in high dose but not low dose or control male rats. These tumors were not considered to be related to chemical administration.

In female rats the only neoplasm observed at a significantly increased incidence was fibroadenoma of the mammary gland. This

tumor occurred at incidences of 9/48 (19 percent), 4/23 (17 percent), 12/49 (24 percent), and 23/50 (46 percent) in the low dose control, high dose control, low dose, and high dose groups, respectively. The comparison of the high dose group to its control group indicated a statistically significant increase in incidence in the dosed females.

There were no neoplasms occurring at statistically significant incidences in mice of either sex.

Under the conditions of this bioassay dietary administration of 2,4-dinitrotoluene to Fischer 344 rats induced benign tumors (i.e., skin and subcutaneous tissue fibromas in male Fischer 344 rats and mammary fibroadenomas in female Fischer 344 rats). No evidence was provided for the carcinogenicity of the compound in B6C3F1 mice of either sex.

VI. BIBLIOGRAPHY

- Anthony, H.M., and G.M. Thomas, "Tumors of the Urinary Bladder: An Analysis of the Occupations of 1,030 Patients in Leeds, England."

 Journal of the National Cancer Institute 45:879-895, 1970.
- Armitage, P., Statistical Methods in Medical Research, Chapter 14.
 J. Wiley & Sons, New York, 1971.
- Berenblum, I., editor, <u>Carcinogenicity Testing</u>. International Union Against Cancer, Technical Report Series, Vol. 2. International Union Against Cancer, Geneva, 1969.
- Chemical Abstracts Service, The Chemical Abstracts Service (CAS)

 Ninth Collective Index, Volumes 76-85, 1972-1976. American
 Chemical Society, Washington, D.C., 1977.
- Cox, D.R., Analysis of Binary Data, Chapters 4 and 5. Methuen and Co., Ltd., London, 1970.
- Cox, D.R., "Regression Models and Life-Tables." <u>Journal of the Royal</u> Statistical Society, Series "B" 34:187-220, 1972.
- Gart, J.J., "The Comparison of Proportions: A Review of Significance Tests, Confidence Limits, and Adjustments for Stratification."

 International Statistical Institute Review 39:148-169, 1971.
- Hallowes, R.C., and S. Young, "Tumours of the Mammary Gland." Pathology of Tumours in Laboratory Animals, Volume 1. V.S. Turusov, editor. International Agency for Research on Cancer, Lyon, France, pp. 31-74, 1973.
- Hiasa, Y.J., "m-Toluenediamine Carcinogenesis in Rat Liver." <u>Journal</u> of the Nors <u>Medical Association</u> 21:1-19, 1970.
- Institute of Makers of Explosives, New York, New York. Personal communication, May 16, 1977.
- Kaplan, E.L., and P. Meier, "Nonparametric Estimation from Incomplete Observations." Journal of the American Statistical Association 53:457-481, 1958.
- Linhart, M.S., J.A. Cooper, R.L. Martin, N.P. Page, and J.A. Peters, "Carcinogenesis Bioassay Data System." Computers and Biomedical Research 7:230-248, 1974.

- Manufacturing Chemists Association, "Properties and Essential Information for Safe Handling and Use of Dinitrotoluenes." Chemical Safety Data Sheet SD-93, 1966.
- Miller, R.G., Simultaneous Statistical Inference. McGraw-Hill Book Co., New York, 1966.
- Saffiotti, U., R. Montesano, A.R. Sellakumar, F. Cefis, and D.G. Kaufman, "Respiratory Tract Carcinogenesis in Hamsters Induced by Different Numbers of Administration of Benzo (a) Pyrene and Ferric Oxide." Cancer Research 32:1073-1079, 1972.
- Sax, N.I., <u>Dangerous Properties of Industrial Materials</u>. Van Nostrand Reinhold Company, New York, 1975.
- Simon, G.S., R.G. Tardiff, and J.F. Borzelleca, "Possible Mutagenic Effects of 2,4-Dinitrotoluene: A Dominant Lethal Study in the Rat." Abstracts of Papers. Society of Toxicology Sixteenth Annual Meeting. Toronto, Canada, March 27-30, 1977.
- Tarone, R.E., "Tests for Trend in Life-Table Analysis." <u>Biometrika</u> 62:679-682, 1975.
- Urso, S., Research Analyst, Chemical-Environmental Programs. Chemical Industries Center, Stanford Research Institute, Menlo Park, California. Personal communication, May 11, 1977.
- U.S. International Trade Commission, Synthetic Organic Chemicals.

 <u>United States Production and Sales, 1975</u>. USITC Publication 804, Washington, D.C., 1977.
- Weisburger, E.K., Chief, Carcinogen Metabolism and Toxicology Branch, National Cancer Institute, Bethesda, Maryland. Personal communication, 1976.
- Wynder, E.L., J. Onderdonk, and N. Mantel, "An Epidemiological Investigation of Cancer of the Bladder." <u>Cancer</u> 16:1388-1407, 1963.

APPENDIX A

SUMMARY OF THE INCIDENCE OF NEOPLASMS IN RATS TREATED WITH 2,4-DINITROTOLUENE

		,

TABLE A1 SUMMARY OF THE INCIDENCE OF NEOPLASMS IN MALE RATS TREATED WITH 2,4-DINITROTOLUENE

	LOW DOSE CONTROL (UNTR) 01-0030	HIGH DOSE CONTRCL (UNTR) 01-0084	LOW DOSE 01-0025	HIGH DOSE 01-0087
ANIMALS INITIALLY IN STUDY ANIMALS NECROPSIED ANIMALS EXAMINED HISTOPATHOLOGICALLY	50 46 ** 45	25 25 25 25	50 49 49	50 49 49
INTEGUMENTARY SYSTEM				
*SKIN SQUAMOUS CELL PAPILLOMA SQUAMOUS CELL CARCINOMA BASAL-CELL CARCINOMA FIEROMA	(46) 1 (2%)	(25)	(49) 1 (2%) 1 (2%) 2 (4%)	(49)
*SUBCUT TISSUE FIEROMA PIBROSARCOMA LIPOMA ANGIOSAPCOMA	(46)	(25)	(49) 5 (10%) 1 (2%)	(49) 13 (27%) 2 (4%) 3 (6%) 1 (2%)
RESPIRATORY SYSTEM				
#TRACHEA SQUAMOUS CFIL CARCINOMA	(45) 1 (2%)	(11)	(44)	(49)
#IUNG ALVEOIAR/BECNCHICLAF ADENOMA ALVEOIAR/BECNCHIOIAR CARCINCMA PHEOCHROMOCYTOMA, METASTATIC	(45) 1 (2%)	(25) 2 (8%) 1 (4%) 1 (4%)	(48)	(49)
FIBROSARCOMA, METASTATIC				1 (2%)
HEMATOPOIETIC SYSTEM				
*MULTIPLE ORGANS MALIGNANT LYMPHOMA, NOS LEUKEMIA,NOS	(46) 1 (2%)	(25)	(49) 1 (2%)	(49)
UNDIFFERENTIATED IEUKEMIA MYELOMONOCYTIC IEUKEMIA LYMPHOCYTIC IEUKEMIA GRANULOCYTIC IEUKEMIA	1 (2%) 2 (4%)	2 (8%)	1 (2%) 1 (2%)	3 (6%)

^{*} NUMBER OF ANIMALS WITH TISSUE EXAMINED MICROSCOPICALLY * NUMBER OF ANIMALS NECROPSIED

^{**}EXCLUDES PARTIALLY AUTOLYZED ANIMALS

TABLE A1 (CONTINUED)

	LOW DOSE CCNTROL (UNTR)		LOW DOSE	HIGH DOSE
	01-0030	01-0084	01-0025	01-0087
*SPIREN LEICHYCMA MYELOMONOCYTIC IFUKEMIA	(45)	(25)	(48) 1 (2%) 1 (2%)	(49)
CIFCULATORY SYSTEM				
NCNE				
DIGESTIVE SYSTEM				
#SALIVARY GLAND FIBFOSARCCMA, METASTATIC	(43)	(24)	(43)	(48) 1 (2%)
#IIVER HEPATCCFIIULAF CAFCINOMA	(45)	(25)	(49) 3 (6%)	(48) 3 (6%)
♦STGMACH SQUAMCUS CEIL FAFILIOMA EASAL-CEIL CARCINCMA	(45)	(24) 1 (4%) 1 (4%)	(45)	(49)
#IUODENUM ADENOCAPCINOMA, NCS	(45)	(24)	(45)	(49) 1 (2%)
#ILEUM CYSTA DENCCARCINCMA, NOS	(45)	(24)	(45) 1 (2 %)	(49)
URINARY SYSTEM				
#URINARY BLADDEF TRANSITIONAL-CFLL PAPILLOMA HEMANGICSARCOMA	(44)	(23)	(44) 1 (2%)	(49) 1 (2%)
ENDOCRINE SYSTEM				
#PITUITARY CARCINCMA, NCS ADENOMA, NCS EASOPHIL ADENOMA	(44) 9 (2 0%)	(21) 1 (5%) 2 (10%)	(44) 2 (5%) 5 (11%)	(35)
#ADBENAL CORTICAL ADENCMA	(45) 1 (2%)	(25)	(46)	(45)

[#] NUMBER OF ANIMALS WITH TISSUE EXAMINED MICROSCOPICALLY
* NUMBER OF ANIMALS NECROFSIED

TABLE A1 (CONTINUED)

	LOW DOSE CCNTROL (UNTR) 01-0030	01-0084	LOW DOSE 01-0025	HIGH DOSE 01-0087
FHEOCHROMOCYTOMA, MALIGNANT		2 (8%) 2 (8%)	3 (7%)	
*ADRENAL MEDULLA GANGLICNEURCMA	(45)	(25)	(46) 1 (2%)	(45)
#THYRCID FOLLICULAR-CELL CARCINOMA C-CELL ADENCMA C-CELL CARCINOMA	(42) 2 (5%) 1 (2%)	(23)	(41) 3 (7%)	(47) 2 (4%) 1 (2%) 4 (9%)
#FARATHYFOID ADENCMA, NCS	(32)	(15)	(27)	(30) 1 (3%)
#FANCREATIC ISLETS ISLET-CELL ADENCMA ISLET-CELL CARCINCMA	(45) 1 (2%)	(25) 2 (8%)	(45) 3 (7%)	(48) 2 (4%) 1 (2%)
REPRODUCTIVE SYSTEM				
*MAMMARY GLAND ADENOCARCINOMA, NOS FIEROADENOMA	(46)	(25) 1 (4%)	(49) 1 (2%)	(49) 1 (2%)
*FPEFUTIAL GIAND CARCINOMA, NOS ADENOMA, NOS	(46) 1 (2%)	(25) 1 (4%) 1 (4%)	(49)	(49) 1 (2%)
*PROSTATE ADENOCARCINOMA, NCS	(45)	(23)	(45)	(48) 1 (2%)
#TESTIS INTERSTITIAL-CFLL TUMOR	(45) 44 (98%)	(24) 19 (79%)	(46) 43 (93%)	(49) 46 (94%)
NERVOUS SYSTEM				
#ERAIN GLIOMA, NOS	(45)	(25)	(45) 1 (2%)	(49)
SFECIAL SENSE ORGANS				
*HARDERIAN GLAND ADENOMA, NOS	(46)	(25)	(49) 1 (2%)	(49)

^{*} NUMBER OF ANIMALS WITH TISSUE TXAMINED MICROSCOPICALLY * NUMBER OF ANIMALS NECEOPSIED

TABLE A1 (CONTINUED)

	LOW DOSE CCNTFOL (UNTR) 01-0030	HIGH DOSE CONTROL (UNTR) 01-0084	LOW DOSE 01-0025	HIGH DOSE 01-0087
*EAR CANAL SQUAMOUS CELL CARCINOMA	(46)	(25) 1 (4%)	(49)	(49)
MUSCULOSKELETAL SYSTEM				
NCNE		*****		
BCDY CAVITIES				
*BCDY CAVITIES MESCTHELICMA, NOS MESCTHELICMA, MAIIGNANT	(46) 3 (7%)	(25)	(49) 1 (2%)	(49) 1 (2%) 1 (2%)
*MEDIASTINUM ALVEOLAR/ERONCHICIAR CA, METASTA		(25) 1 (4%)	(49)	(49)
*FLEURA ALVEOLAR/BRONCHICIAR CA, METASTA		(25) 1 (4%)	(49)	(49)
ALL OTHER SYSTEMS				
NCNE				
ANIMAL CISPOSITION SUMMARY				
ANIMALS INITIALLY IN STUDY NATURAL DEATHO	50 7	25 3	5 0	5 0
MORIEUND SACRIFICE SCHEDULED SACRIFICE	6 18	4 5	10 5	11 5
ACCIDENTALLY KILLED TERMINAL SACRIFICE ANIMAL MISSING	19	13	29	29
@ INCLUDES AUTCLYZED ANIMALS				

[#] NUMBER OF ANIMALS WITH TISSUE EXAMINED MICROSCOPICALLY
* NUMBER OF ANIMALS NECROPSIED

TABLE A1 (CONCLUDED)

	LOW DOSE CONTROL (UNTR) 01-0030	HICH DOSE CONTRCL (UNTR) 01-0084	LOW DOSE 01-0025	HIGH DOSE 01-0087
TUMOR SUMMARY				
TOTAL ANIMALS WITH PRIMARY TUMORS* TOTAL FRIMARY TUMORS	44 75	22 41	47 84	48 92
TOTAL ANIMALS WITH BENIGN TUMORS TOTAL BENIGN TUMORS	44 65	20 31	45 70	46 69
TOTAL ANIMALS WITH MALIGNANT TUMOFS TOTAL MALIGNANT TUMORS	7 7	9 10	12 13	18 22
TOTAL ANIMALS WITH SECONDARY TUMORS# TOTAL SECONDARY TUMORS	:	2		1 2
TOTAL ANIMALS WITH TUMORS UNCERTAIN- BENIGN OR MALIGNANT TOTAL UNCERTAIN TUMORS	3 3		1	1
TOTAL ANIMALS WITH TUMORS UNCERTAIN- FFIMARY OR MFTASTATIC TOTAL UNCERTAIN TUMORS				

[#] SECONDARY TUMORS: METASTATIC TUMORS OR TUMORS INVASIVE INTO AN ADJACENT ORGAN

TABLE A2
SUMMARY OF THE INCIDENCE OF NEOPLASMS IN FEMALE RATS
TREATED WITH 2,4-DINITROTOLUENF

	LOW DOSE CONTROL (UNTR) 02-0030	HIGH DOSE CONTROL (UNTR) 02-0084	LOW DOSE 02-0025	HIGH DOSE 02-0087
ANIMALS INITIALLY IN STUDY	50	25	50	50
ANIMALS NECROPSIEC ANIMALS EXAMINEC HISTOPATHOLOGICALLY	48 ** 47	23 23	49 49	50 5 0
INTEGUMENTARY SYSTEM				
*SKIN	(48)	(23)	(49)	(50)
SEEACEOUS ADENCCARCINOMA		1 (4%)		
FIEROMA	1 (2%)			
FIEROS ARCOMA FIERO ADENOMA	1 (2%) 1 (2%)			
*SUBCUT TISSUF	(48)	(23)	(49)	(50)
SQUAMOUS CFIL CAFCINOMA FIBFOMA				1 (2%) 3 (6%)
RESPIRATORY SYSTEM #LUNG SQUAMOUS CELL CARCINOMA ALVEOLAR/BRONCHIOLAR ADENOMA	1 (2%)	(23) 1 (4%)	(49)	(50) 1 (2%)
ALVEOLAR/ERONCEIOLAP CARCINOMA	1 (2%)			
HEMATOPOIETIC SYSTEM				
*MULTIPLE CPGANS	(48)	(23)	(49)	(50)
MALIGNANT LYMPFOMA, NOS LEUKEMIA,NOS	1 (2%)		1 (2%)	
UNCIFFERENTIATED LEUKEMIA		2 (9%)	1 (2 //)	
MYELOMONOCYTIC LEUKEMIA	1 (2%)	- (/	1 (2%)	4 (8%)
*SUBCUT TISSUE MAIIG.LYMPHCMA, HISTIOCYTIC TYFE	(48)	(23)	(49) 1 (2%)	(50)
#SPLEEN	(47) 1 (2%)	(23)	(49)	(50)

NONE

[#] NUMBER OF ANIMALS WITH TISSUE EXAMINED MICROSCOPICALLY * NUMBER OF ANIMALS NECFORSIED **EXCLUDES PARTIALLY AUTOLYZED ANIMALS

TABLE A2 (CONTINUED)

	LOW DOSE CCNTROL (UNTR) 02-0030	HIGH DOSE CONTROL (UNIR) 02-0084	LOW DOSE 02-0025	HIGH DOSE 02-0087
DIGESTIVE SYSTEM				
#LIVER NEOFLASTIC NODULE HEPATOCELLULAR CARCINOMA	(47) 1 (2%)	(23) 2 (9%)	(49)	(50) 1 (2%) 1 (2%)
#STONACH SQUANCUS CELL FAFILLOMA		(23)	(49) 1 (2 %)	(48)
URINARY SYSTEM				
NONE				
ENDOCRINE SYSTEM				
#FITUITARY CARCINCMA, NOS ADENOMA, NOS CHROMOPHOEF ADENOMA	(46) 1 (2%) 19 (41%)	(21) 1 (5%) 7 (33%)	(45) 2 (4%) 22 (49%)	(40) 1 (3%) 14 (35%)
#ADRENAL CORTICAL ADENGMA PHEOCHROMOCYTOMA PHEOCHROMOCYTOMA, MALIGNANT	(47) 1 (2%) 2 (4%)	(23) 2 (9%) 1 (4%)	(49) 2 (4%)	(50) 1 (2%)
#THYRCID ADERONA, NCS FOLLICULAR-CFLL CARCINOMA	(45)	(21) 1 (5%)	(45) 1 (2%)	(48)
C-CELL ADENOMA C-CELL CAPCINOMA	2 (4%)	2 (10%) 1 (5%)	2 (4%)	2 (4%) 4 (8%)
#FANCREATIC ISLETS ISLET-CELL ADENCHA	(46) 2 (4%)	(22)	(47)	(48)
REFRODUCTIVE SYSTEM				
*MAMMARY GLAND ADENOCARCINGMA, NOS PAPILIARY CYSTADENOMA, NOS PAPILIARY CYSTADENOCARCINGMA, NCS	(48) 2 (4%)	(23) 2 (9%)	(49) 1 (2%)	(50) 1 (2%)
INTRADUCTAL CARCINOMA INFILTRATING DUCT CARCINOMA		1_(4%)	1 (2%)	

^{*} NUMBER OF ANIMALS WITH TISSUP EXAMINED MICROSCOPICALLY * NUMBER OF ANIMALS NECFORSIED

TABLE A2 (CONTINUED)

	02-0030	HIGH DOSE CONTROL (UNIR) 02-0084	LOW DOSE 02-0025	HIGH DOSE 02-0087
PIBROADENCMA	9 (19%)	4 (17%)		23 (46%)
*CLITCRAL GLAND SQUAMOUS CELL FAPILIONA	(48)	(23)	(49)	(50) 1 (2%)
*VAGINA FIBROSARCOMA LYMPHANGIOSARCOMA	(48) 1 (2%) 1 (2%)	(23)	(49)	(50)
*UTERUS ENDOMETRIAL STFCMAL FOLYP	(46) 15 (33%)	(23) 6 (26%)	(47) 14 (30%)	(49) 11 (22%)
#UTERUS/FNCOMETRIUM CARCINCHA,NOS	(46) 1 (2%)	(23)	(47)	(49)
NERVOUS SYSTEM				
NONE				
SFECIAL SENSE ORGANS				
*FAR CANAL FIBROSARCCMA	(48) 1 (2%)	(23)	(49)	(50)
NUSCULOSKEIPTAL SYSTEM				
NONE				
ECDY CAVITIES				
NCNE				
ALL OTHER SYSTEMS				
SITE UNKNOWN ADENOCARCINOMA, NOS	ti		1	

^{*} NUMBER OF ANIMALS WITH TISSUE EXAMINED MICROSCOPICALLY * NUMBER OF ANIMALS RECROFSIED

TABLE A2 (CONCLUDED)

	LOW DOSE CCNTRCL (UNTR) 02-0030	HIGH DOSE CONTROL (ENTR) 02-0084	02-0025	02-0087
AUTHER PROPOSITION CONTRACT				
ANIMAL DISPOSITION SUMMARY				
ANIMAIS INITIALLY IN STUDY	50	25	50	5 0
NATURAL DEATHO	6	3	4	7
MORIBUND SACRIFICE	8	5	10	12
SCHEDULEE SACRIFICE	17	5	5	5
ACCIDENTALLY KILLED				
TERMINAL SACRIFICE	19	12	31	26
ANIMAL MISSING				
@ INCLUDES AUTCLYZED ANIMALS				
TUNCE SUMMARY				
TOTAL ANIMALS WITH FRIMARY TUMORS*	38	19	41	40
TOTAL PRIMARY TUMCES	66	34	62	69
TOTAL ANIMALS WITH FFRIGN TUMORS	36	18	40	39
TOTAL BENIGN TUMOFS	54	23	54	56
TOTAL ANIMALS WITH MALIGNANT TUNCES	9	8	8	11
TOTAL MALIGNANT TUMORS	12	ຶ່ງ	8	12
TOTAL ANIMALS WITH SECONDARY TUMOFS TOTAL SECONDARY TUMORS	*			
TOTAL ANIMALS WITH TUMORS UNCEPTAIN	-			
BENIGN OF MALIGNANT		2		1
TOTAL UNCEFTAIN TUMORS		2		1
TOTAL ANIMALS WITH TUMORS UNCESTAIN	-			
FEIMARY OF METASTATIC				
FOTAL UNCEFTAIN TUMORS				
TOTAL UNCEFTAIN TOWORS				
* PRIMARY TUMOPS: ALL TUMORS EXCEPT S * SECONDARY TUMOPS: METASTATIC TUMORS			ACENT ORGAN	

[#] SECONDARY TUMORS: METASTATIC TUMORS OR TUMORS INVASIVE INTO AN ADJACENT ORGAN

APPENDIX B

SUMMARY OF THE INCIDENCE OF NEOPLASMS IN MICE TREATED WITH 2,4-DINITROTOLUENE

		·	

TABLE BI SUMMARY OF THE INCIDENCE OF NEOPLASMS IN MALE MICE TREATED WITH 2,4-DINITROTOLUENE

	LOW DOSE CONTROL (UNTR) 05-0030	HIGH DOSE CONTROL (UNTR) 05-0077	LOW DOSE 05-0025	HIGH DOSE 05-0088
ANIMALS INITIALLY IN STUDY ANIMALS NECRCESIED ANIMALS EXAMINED HISTOPATHOLOGICALLY	50 46 ** 46	50 46 45	5 0 48 48	5 0 49 49
INTEGUMENTARY SYSTEM				
*SKIN HEMANGIOSAFCOMA	(46)	(46)	(48) 1 (2%)	(49)
RESPIRATORY SYSTEM				
#IUNG HEPATCCBILULAR CARCINOMA, METAST ALVEOLAR/BRONCHICLAR ADENOMA ALVEOLAR/ERONCFIOLAR CARCINOMA	(46) 1 (2%) 5 (11%) 2 (4%)	(45) 1 (2%) 7 (16%) 4 (9%)	(48) 3 (6%)	(48) 1 (2%) 1 (2%)
HEMATOPOIETIC SYSTEM				
*MULTIPLE ORGANS MALIGNANT LYMPHOMA, NOS MALIG.LYMPHOMA, EISTIOCYTIC TYFE		(46)	(48) 1 (2 %)	(49) 1 (2%) 1 (2%)
#SPLEEN HEMANGIOMA HEMANGIOSARCOMA MALIG.LYMPHOMA, HISTIOCYTIC TYFF	(46)	(45) 1 (2%)	(47) 1 (2%) 1 (2%)	(44)
#MANDIBULAR L. NCDE MALIG.IYMPHOMA, HISTIOCYTIC TYFF	(34)	(35) 1 (3%)	(40)	(34)
#FEYERS FATCH	(46)	(43)	(45)	(45) 1 (2%)

[#] NUMBER OF ANIMALS WITH TISSUE EXAMINED MICROSCOPICALLY
* NUMBER OF ANIMALS NECROPSIED
**EXCLUDES PARTIALLY AUTOLYZED ANIMALS

TABLE Bi (CONTINUED)

	LOW DOSE CONTROL (UNTR) 05-0030	HIGH DOSE CONTROL (UNTR) 05-0077	LOW DOSE 05-0025	HIGH DOSE
DIGESTIVE SYSTEM				
#IIVER HEPATCCELLULAR CAFCINOMA HEMANGIOMA	(46) 12 (26%)	(45) 10 (22 %)	(47) 6 (13%) 1 (2%)	(48) 9 (19%)
#STOMACH SQUAMOUS CEIL PAPILIOMA	(45)	(42) 1 (2%)	(45)	(45)
URINARY SYSTEM				
NONE				
ENCOCRINE SYSTEM				
#FITUITAFY ACENOMA, NCS	(39) 1 (3%)	(36)	(33)	(42)
#THYRGID ADENOMA, NCS ADENOCAPCINOMA, NCS	(44) 2 (5%)	(40)	(42) 1 (2%)	(41)
REPRODUCTIVE SYSTEM				
#TESTIS SEMINCMA/DYSGERMINOMA	(46) 1 (2%)	(45)		
NERVOUS SYSTEM				
NONE				
SFFCIAL SENSE ORGANS				
*HARDERIAN GLAND PAPILLARY CYSTADENOMA, NOS	(46) 1 (2%)	(46)	(48)	(49)
*FAF CANAL SQUAMOUS CELL CARCINOMA	(46)	(46) 1 (2%)	(48)	(49)
MUSCULOSKELETAL SYSTEM				
NCNE				

^{*} NUMBER OF ANIMALS WITH TISSUE EYEMINED MICROSCOPICALLY * NUMBER OF ANIMALS RECROFSIED

TABLE B1 (CONCLUDED)

	LOW DOSE CCNTRCL (UNTR) 05-0030	HIGH DOSE CONTFOL (UNTR) 05-0077	LOW DOSE 05-0025	HIGH DOS 05-0088
ODY CAVITIES				
NONE		~		
LI CTHER SYSTEMS				
NONE				
NIMAL CISECSITION SUMMARY				
	50	50	50	50
NATURAL DEATHO	1	7	5	6
MCRIBUND SACRIFICE SCHEDULED SACRIFICE	5	1 5		5
ACCIDENTALLY KILLED	3	3		5
TERMINAL SACRIFICE ANIMAL MISSING	41	37	45	39
INCLUDES AUTCLYZED ANIMALS				
UNCF SUMMARY				
TOTAL ANIMALS WITH FFIMARY TUMOFS* TOTAL PRIMARY TUMORS	19 26	21 25	13 15	13 14
TOTAL ANIMALS WITH BENIGN TUMORS TOTAL BENIGN TUMORS	6 7	8	3 3	1
TOTAL ANIMALS WITH MALIGNANT TUPCES TOTAL MALIGNANT TUMORS	16 19	15 17	10 12	13 13
TOTAL ANIMALS WITH SPCCNDARY TUMCES ** TOTAL SECONDARY TUMORS	1 1	1		
TOTAL ANIMALS WITH TUMORS UNCERTAIN- BENIGN CR MALIGNAN1 TOTAL UNCERTAIN TUMORS				
TOTAL ANIMALS WITH TUMORS UNCERTAIN-	-			

[#] SECONDARY TUMOPS: METASTATIC TUMORS OR TUMORS INVASIVE INTO AN ADJACENT ORGAN

TABLE B2 SUMMARY OF THE INCIDENCE OF NEOPLASMS IN FEMALE MICE TREATED WITH 2,4-DINITROTOLUENE

	LOW DOSE CONTROL (UNTR) 06-0030	HIGH DOSE CONTROL (UNTR) 06-0077	LOW DOSE 06-0025	HIGH DOSE 06-0088	
ANIMALS INITIALLY IN STUDY ANIMALS MISSING	<u></u>	50	50 3	50	
ANIMALS NECHOPSIED PNIMALS EXAMINED HISTOFATHOLOGICALLY *	47 * 47	46 46	46 46	5 0 50	
INTEGUMENTARY SYSTEM					
*SKIN FIBROSARCOMA	(47)	(46) 2 (4%)	(46)	(50)	
RESPIRATORY SYSTEM					
#IUNG CARCINOMA, NOS, METASTATIC ALVEOLAR/BRONCHIOLAF ADENOMA	(46) 1 (2%)	(45) 1 (2%)	(46)	(48)	
ALVEOLAR/ERONCHIOLAE CARCINOMA	1 (2%)	1 (2%)	1 (2%)		
HEMATOPOIETIC SYSTEM					
*MUITIPLE CRGANS MALIGNANT LYMPHOMA, NOS MALIGLYMPHOMA, UNCIFFER-TYPE	(47) 2 (4%)	(46) 3 (7%) 1 (2%)	(46) 2 (4%)	(50) 4 (8%) 2 (4%)	
MALIG.LYMPHOMA, HISTIOCYTIC TYFE LYMPHOCYTIC LEUKEMIA	2 (4%)	6 (13%) 1 (2%)	1 (2%)		
#SPLEEN HEMANGICSAFCOMA	(45) 1 (2%)	(43)	(44)	(48)	
MALIGNANT IYMPHOMA, NCS MALIG.IYMPHOMA, HISTIOCYTIC TYFF	, ,		1 (2%)	1 (2%)	
#IIVER MAIIG.IYMFHCMA, HISTIOCYTIC TYFE	(46) 1 (2 %)	(45)	(46)	(50)	
KUPFFER-CELL SARCOMA	(22)		1 (2%)		
•FEYERS PATCH MALIG.IYMPHCMA, HISTICCYTIC TYPE	(45)	(43) 1 (2%)	(42)	(44)	

NONE # NUMBER OF ANIMALS WITH TISSUE EXAMINED MICROSCOPICALLY
* NUMBER OF ANIMALS NECEOPSIED
**EXCLUDES PARTIALLY AUTOLYZED ANIMALS

TABLE B2 (CONTINUED)

	LOW DOSE CONTROL (UNTR) 06-0030	HIGH DOSE CONTROL (UNTR) 06-0077	LOW DOSE 06-0025	HIGH DOSE 06-0088
DIGESTIVE SYSTEM				
*LIVER CARCINCMA, NOS, METASTATIC HEPATOCELIULAR CARCINOMA	(46) 1 (2%) 4 (9%)	(45) 4 (9%)	(46) 1 (2%)	(50) 1 (2%)
OSTOMACH SQUAMOUS CELL PAPILLOMA	(45)	(42) 3 (7%)	(44)	(41)
URINARY SYSTEM				
NONE				
ENDOCRINE SYSTEM				
#FITUITARY ACENOMA, NOS CHROMOFHCEF ADENOMA	(37) 3 (8%) 1 (3%)	(37) 6 (16%)	(38) 3 (8%)	(34)
#ADRENAL CORTICAL ADENCMA	(44)	(43) 1 (2%)	(42)	(45)
#THYROID PAPILIARY CARCINCMA	(44)	(30)	(40)	(42) 1 (2%)
#PANCREATIC ISLETS ISLET-CELL ADENCMA	(39)	(41) 1 (2%)	(44)	(41)
REPRODUCTIVE SYSTEM				
*MAMMARY GLAND ADENOCARCINOMA, NOS FIBROADENOMA	(47) 1 (2%)	(46) 1 (2%)	(46)	(50)
#UTERUS ADENOCARCINOMA, NCS ENDOMETRIAL STROMAL FOLYP ENDOMETRIAL STROMAL SARCOMA	(43) 1 (2%)	(43)	(44)	(43) 1 (2%) 1 (2%)
♦ UTERUS∕ENDCMETFIUM CARCINCMA,NCS	(43) 1 (2%)	(43)	(44)	(43)
#CVARY/OVIDUCT FAPILLARY ADENCMA	(43) 1 (2%)	(43)	(44)	(43)

[#] NUMBER OF ANIMALS WITH TISSUE EXAMINED MICROSCOPICALLY * NUMBER OF ANIMALS NECROPSIED

TABLE B2 (CONTINUED)

	LOW. DOSE CONTROL (UNTR) 06-0030	HIGH DOSE CONTROL (ENTR) 06-0077	LOW DOSE 06-0025	HIGH DOSE 06-0088
INTRADUCTAL PARTITIONA	1 (2%)			
#CVARY LUTECMA	(44)	(41) 1 (2%)	(44)	(37)
NEPVCUS SYSTEM				
NONE				
SFECIAL SENSE ORGANS				
*HARDERIAN GIAND PAPILIARY CYSTADENOMA, NOS	(47)	(46)	(46) 2 (4%)	(50)
MUSCULCSKELETAL SYSTEM				
NONE				
BCDY CAVITIES				
*ABDCMINAL CAVITY HEMANGIOSAFCOMA	(47) 1 (2%)	(46)	(46)	(50)
ALL CTHER SYSTEMS	·			
NONE				
ANIMAL DISECSITION SUMMARY				
ANIMALS INITIALLY IN STUDY NATURAL CEATHO MORIBUND SACRIFICE SCHEDULED SACRIFICE	50 5 1 5	50 8 2 5	50 5	50 8 1 5
ACCIDENTALLY KILIED TERMINAL SACRIFICE ANIMAL MISSING	39	35	42 3	36
@ INCLUDES AUTOLYZED ANIMALS				

[#] NUMBER OF ANIMALS WITH TISSUE EXAMINED MICROSCOPICALLY * NUMBER OF ANIMALS NECROPSIED

TABLE B2 (CONCLUDED)

		HIGH DOSE CONTFOL (UNIR) 06-0077		
TUMOF SUMMARY				
TCTAL ANIMALS WITH FRIMARY TUMORS* TCTAL FRIMARY TUMOFS	17 21	22 32	14 15	11 11
TOTAL ANIMALS WITH EENIGN TUMORS TOTAL BENIGN TUMORS	7 8	12 13	8 8	
TOTAL ANIMALS WITH MAILGNANT TUMORS TOTAL MALIGNANT TUMORS	11 13	18 19	7 7	11 11
TOTAL ANIMALS WITH SECONDARY TUMORS* TOTAL SECONDARY TUMORS	1 2			
TOTAL ANIMALS WITH TUMORS UNCERTAIN- BENIGN OR MALIGNANI TOTAL UNCEFTAIN TUMORS				
TOTAL ANIMALS WITH TUMORS UNCERTAIN- FRIMARY OR METASTATIC TOTAL UNCERTAIN TUMORS				

^{*} PRIMARY TUMORS: ALL TUMORS EXCEPT SECONDARY TUMORS

SECONDARY TUMORS: METASTATIC TUMORS OR TUMORS INVASIVE INTO AN ADJACENT ORGAN

APPENDIX C

SUMMARY OF THE INCIDENCE OF NONNEOPLASTIC LESIONS IN RATS TREATED WITH 2,4-DINITROTOLUENE

TABLE C1 SUMMARY OF THE INCIDENCE OF NONNEOPLASTIC LESIONS IN MALE RATS TREATED WITH 2,4-DINITROTOLUENE

	LOW DOSE CONTROL (UNTR) 01-0030	HICH DOSE CONTROL (UNTR) 01-0084	LOW DOSE 01-0025	HIGH DOSE 01-0087
ANIMALS INITIALLY IN STUDY ANIMALS NECROPSIEC ANIMALS EXAMINED HISTOFATHOLOGICALLY	50 46 ** 45	25 25 25 25	50 49 49	50 49 49
INTEGUMENTARY SYSTEM				
*SKIN EPIDERMAI INCLUSION CYST COLLAGEN DISEASE	(46)	(25)	(49) 1 (2%)	(49) 1 (2%)
FIBFOSIS NECROSIS, NOS		1 (4%)	1 (2%)	. (,
*SUBCUT TISSUE EPIDERMAI INCLUSION CYST INFLAMMATION, CHRONIC NECROSIS, NOS	(46)	(25)	(49)	(49) 1 (2%) 1 (2%) 1 (2%)
KELOID PIBROUS DYSPLASIA	1 (2%) 1 (2%)			
RESPIRATORY SYSTEM				
*IARYNX INFLAMMATION ACUTE AND CHRONIC INFLAMMATION, CHRONIC	(46)	(25) 1 (4%) 7 (28%)	(49)	(49)
TTRACHEA INFLAMMATION, NOS	(45)	(11) 1 (9%)	(44)	(49)
LYMPHOCYTIC INFLAMMATORY INFILITE INPLAMMATION, ACUTE/CERONIC INFLAMMATION, CHRONIC	2 (4%) 24 (53%)	, (5%)	3 (7%) 29 (66%)	3 (6%) 26 (53%)
#IUNG/BRONCHUS BRONCHIECTASIS INFLAMMATION, FCCAL	(45)	(25) 2 (8%) 1 (4%)	(48) 1 (2%)	(49) 4 (8克)
INFLAMMATION, ACUTE/CHRONIC HYPERPLASIA, LYMPEOID	2 (4%)		1 (2%)	3 (6%)
#IUNG/BRCNCHICLE BRCNCHIOIECTASIS	(45) 1_(2%)	(25)	(48)	(49)

[#] NUMBER OF ANIMALS WITH TISSUE EXAMINED MICROSCOPICALLY
* NUMBER OF ANIMALS NECFOESIED
**EXCLUDES PARTIALLY AUTOLYZED ANIMALS

TABLE C1 (CONTINUED)

	LOW DO CCNTBOL (01-0030			H DOSE SCL (UNTR) 0084	LOW 01-	DO SE 0025	HIGH 01-	DOSE 0087
LYMPHOCYTIC INPLAMMATCRY INFILTE INFLAMMATION, ACUTE/CHRONIC HYPERPLASIA, LYMPHOID	5 (11 3 (7% 6 (13)				(4%) (2%)		
#IUNG FMPHYSEMA, NOS ATELECTASIS EDEMA, NOS HEMORPHAGE	(45) 1 (2% 1 (2%		(25)			(2%) (2%)	(49)	1
INFLAMMATION, INTERSTITIAL FRONCHOPMEUMONIA, ACUTE AESCESS, NOS PNEUMONIA, CHRONIC MURINE	4 (9% 2 (4%	•	1 1 11	(8%) (4%) (4%) (44%)		(2%)		(6%) (2%)
GRANULOMA, NOS FIBROSIS, CIFFUSE FERTVASCULITIS HYPERPLASTA, NOS HYPERFLASTA, ALFNOMATOUS HYPERPLASTA, ALVECIAR EPITHELIUM	5 (11 1 (2% 1 (2%)	1	(4%)	3	(6%)		(4%) (4%)
#IUNG/ALVEOLI CALCIFICATION, NCS	(45)	•	(25)		(48)	(49) 1	(2%)
HEMATOPOIRTIC SYSTEM								
#EONE MARRCW HEMORRHAGE KARYORRHEXIS ATROPHY, NOS	(45) 1 (2% 1 (2%)	(25)		(44)	(2%)	(46)	ı
MYELOFIEROSIS HYPERPLASIA, HEMATOPOIETIC ERYTHROPOIESIS MYELOPOIFSIS	4 (9% 1 (2% 1 (2%)	2	(8%)	1	(2%)		
4SPLEEN CONGESTION, NGS HEMORRHAGE HEMATOMA, NOS	(45) 1 (2%)	(25)		(48))		(2%) (2%)
FIEROSIS HEMOSIDEROSIS ATROPHY, NOS				(4%)			2 1	(4%) (2%) (4%)
HYFFREIASIA, HEMMIOPOIETIC HYPERPLASIA, ERTTHPOIL HYPERPLASIA, RETICULUM CELL HYFEREIASIA, LYMPHOID	1 (2%	•		(4%) (4%)			1	(2%)

NUMBER OF ANIMALS WITH TISSUE EXAMINED MICROSCOPICALLY
 NUMBER OF ANIMALS NECPOPSIED

TABLE C1 (CONTINUED)

	LOW DOSE CONTROL (UNTR) 01-0030	HIGH DOSE CCNTFOL (UNIR) 01-0084	LOW DOSE 01-0025	HIGH DOSE 01-0087
HEMATOPOIESIS ERYTHROPOIESIS MYELOFOIESIS	1 (2%) 1 (2%)		1 (2%)	1 (2%) 1 (2%)
#SPIENIC CAFSULE HEMOREHAGE	(45) 1 (2%)	(25)	(48)	(49)
*IYMEH NODE PLASMACYTOSIS	(41)	(24) 1 (4%)	(37)	(44)
#FASOTID LYMEH NOTE EYPERFIASIA, NCS	(41)	(24)	(37) 1 (3%)	(44)
#MANDIBULAR L. NOIF LYMPHANGIECTASIS	(41)	(24)	(37) 2 (5%)	(44)
#MEDIASTINAL L.NOIE LYMEHANGIECTASIS HEMOPPHAGE	(41)	(24)	(37) 1 (3%) 1 (3%)	(44)
#THYMUS HYPEPFIASIA, EFITHELIAL	(35) 1 (3%)	(22)	(26)	(34)
IRCULATORY SYSTEM				
#HEART PERIAFTEPITIS PERIVASCULITIS	(45) 2 (4%)	(25) 1 (4%)	(48)	(49)
#MYOCARDIUM INFLAMMATION, FCCAL INFLAMMATION, INTERSTITIAL INFLAMMATION, ACUTE/CHRONIC	(45) 1 (2%) 3 (7%)	(25)	(48) 2 (4%) 2 (4%) 2 (4%)	(49) 2 (4%)
FIBROSIS FIBROSIS, FOCAL FIBROSIS, DIFFUSE	1 (2%)	1 (4%)	1 (2%) 2 (4%) 15 (31%)	2 (4%) 1 (2%)
DEGENERATION, NOS CALCIFICATION, NOS	13 (29%)	10 (40%)	3 (6%)	1 (2%)
*ENDOCARDIUM INFLAMMATION, ACUTE/CHRONIC	(45)	(25)	(48) 1 (2%)	(49)
*ACRTA MINERALIZATION INFLAMMATION, ACUTE/CHRONIC	(46)	(25)	(49) 1 (2%) 1 (2%)	(49)

^{*} NUMBER OF ANIMALS WITH TISSUE EXAMINED MICROSCOPICALLY * NUMBER OF ANIMALS NECROFSIED

TABLE C1 (CONTINUED)

	LOW DOSE CCNTROL (UNIR) 01-0030	HIGH DOSE CONTROL (UNTR) 01-0084	LOW DOSE 01-0025	HIGH DOSE 01-0087
MEDIAL CALCIFICATION CALCIFICATION, FOCAL		1 (4%)	***********	2 (4%)
CALCIFICATION, FOCAL		1 (4%)		
*CORONARY ARTERY INFLAMMATION, ACUTE/CHRONIC	(46)	(25)	(49) 1 (2%)	(49)
*PULMONARY AFTERY MEDIAL CALCIFICATION	(46)	(25)	(49)	(49) 1 (2%)
*ANTERIOR MEDIASTINAL MEDIAL CALCIFICATION	(46)	(25)	(49)	(49) 1 (2%)
*SPIENIC ARTEFY MEDIAL CALCIFICATION	(46)	(25)	(49)	(49) 1 (2%)
*MESENTERIC ARTERY MEDIAL CALCIFICATION	(46)	(25)	(49)	(49) 1 (2%)
*RENAL ARTEPY HYPERPLASIA, FOCAL	(46)	(25)	(49) 1 (2%)	(49)
DIGESTIVE SYSTEM				
*PAROTID GLAND INFLAMMATICN, INTERSTITIAL	(43) 1 (2%)	(24)	(43)	(48)
SUBMAXILLARY GLAND HYPERFLASIA, FCCAL	(43) 1 (2%)	(24)	(43)	(48)
#IIVER CONGESTION, NOS	(45) 1 (2%)	(25)	(49)	(48)
CONGESTICN, CHRONIC FASSIVE HEMORRHAGE INFLAMMATION, POCAL INFLAMMATION, ACUTE FOCAL	2 (4%)	1 (4%)	1 (2%) 2 (4%) 1 (2%)	
CHOLANGIOFIBROSIS PERIVASCULITIS DEGENERATION, NOS	2 (4%)	1 (4%)	1 (2%)	
NECROSIS, FOCAL NECROSIS, DIFFUSE	1 (2%)	1 (4%)	1 (2%)	1 (2%)
METAMORPHOSIS FATTY HYPERPLASIA, NODULAR	3 (7%)	4 (16%)	21 (43%) 4 (8%)	12 (25%)
HYPERPLASIA, NOS HYPERPLASIA, FOCAI	1 (2%) 8 (18%)		25 (51%)	2 (4%)
#IIVER/CENTRILOBULAR NECROSIS, NOS	(45)	(25)	(49)	(48) 1 (2%)

[#] NUMBER OF ANIMALS WITH TISSUE EXAMINED MICROSCOPICALLY
* NUMBER OF ANIMALS NECROFISED

TABLE C1 (CONTINUED)

	LOW DOSE CCNTROL (UNTR) 01-0030	HIGH DOSE CCNTFOL (UNIR) 01-0084	LOW DOSE 01-0025	HIGH DOSE 01-0087
METAMORPHOSIS FATTY	1 (2%)			
*IIVER/HEFATCCYTES HYPERPIASIA, FCCAL	(45) 6 (13%)	(25)	(49)	(48)
*PILE DUCT INFLAMMATION, NCS HYPERPLASIA, NOS HYPERPLASIA, FOCAL	(46) 5 (11%) 11 (24%)	(25) 6 (24%)	(49) 3 (6%) 7 (14%) 7 (14%)	(49)
#FANCREAS INFLAMMATION, NCS INFLAMMATION, INTEFSTITIAL INFLAMMATION, ACUTE/CHRONIC SCAR FEBIARTERITIS METAMORPHOSIS FATTY	(45) 1 (2%) 1 (2%) 2 (4%)	(25) 1 (4%)	(45) 1 (2%) 5 (11%) 2 (4%) 1 (2%)	(48) 1 (2%) 1 (2%)
HYPERPLASTIC NODULE		105.		1 (2%)
#PANCREATIC DUCT HYPERPLASIA, NCS	(45)	(25) 1 (4%)	(45)	(48)
#FANCREATIC ACINUS ATROPHY, NCS ATROPHY, FCCAL	(45) 13 (29%) 2 (4%)	(25)	(45)	(48)
#ESOPHAGUS INFLAMMATION, ACUTE FOCAL	(44) 1 (2%)	(25)	(42)	(49)
#SICMACH PPICERMAI INCLUSION CYST PYPERKERATOSIS	(45) 1 (2%)	(24) 1 (4%)	(45)	(49)
AGASTRIC MUCCSA CALCIFICATION, NCS	(45)	(24)	(45)	(49) 2 (4¶)
#GASTRIC MUSCULARIS CALCIFICATION, NCS	(45)	(24)	(45)	(49) 2 (4%)
#SMALL INTESTINE HYPERFIASIA, LYMFHCID	(45)	(24)	(45) 1 (2%)	(49)
*FEYERS FAICH HYPERFIASIA, NCS HYPERFIASIA, LYMFHOID	(45) 1 (2%)	(24) 2 (8%)	(45)	(49)
*ILEUM METAPLASIA, CSSEQUS	(45)	(24)	(45) 1 (2%)	(49)

^{*} NUMBER OF ANIMALS WITH TISSUE EXAMINED MICROSCOPICALLY
* NUMBER OF ANIMALS NECROFSIED

TABLE C1 (CONTINUED)

	LOW DOSE CONTROL (UNTR) 01-0030	HICH DOSE CONTFOL (UNTR) 01-0084	LOW DOSE 01-0025	HIGH DOSE 01-0087
#COLON PARASITISM	(44)	(24)	(43) 4 (9%)	(46) 1 (2%)
URINARY SYSTEM				
#KIDNEY HYDRONEPHROSIS CONGESTION, NOS	(45) 1 (2%)	(24)	(48)	(49) 1 (2%)
GLOMERULONEPHRITIS, NOS GLOMERULONEPHRITIS, FOCAL	34 (76%) 5 (11%)	5 (21%)	37 (77%) 2 (4%)	5 (10%)
INFLAMMATION, INTERSTITIAL GLOMERULONEPHRITIS, CHRONIC NEPHROPATHY	o (1174)	1 (4%)	1 (2%)	#2 100 %
NEPHROSIS, NOS GLOMERULOSCLEROSIS, NOS CALCIFICATION, NOS		16 (67%)	1 (2%)	43 (88%) 1 (2%)
#KIDNEY/MEDULLA MULTIPIF CYSTS	(45) 1 (2%)	(24)	(48)	(49)
#KIDNEY/GLOMEFULUS INFLAMMATION, MEMERANOUS	(45) 9 (20%)	(24)	(48) 4 (8%)	(49)
*KIDNEY/TUBULE CALCIFICATION, NCS	(45)	(24)	(48)	(49) 1 (2%)
#UFINARY BLACCEP CALCUIUS, NCS	(44)	(23) 3 (13%)	(44)	(49)
INFLAMMATION, ACUTE/CHRONIC HYPERPLASIA, EPITEELIAL	1 (2%)		1 (2%)	
ENDOCRINE SYSTEM				
#PITUITARY CYST, NOS	(44)	(21)	(44) 1 (2%)	(35)
CONGESTION, NOS HEMOREHAGE HYPERPLASIA, FOCAI	1 (2%) 6 (14%)		1 (2%) 5 (11%)	2 (6%)
#FITUITAFY/BASOFHIL NODULE	(44)	(21) 1 (5%)	(44)	(35)
#ACRENAL METAMORPHOSIS FATTY	(45)	(25)	(46) 1 (2%)	(45)

[#] NUMBER OF ANIMALS WITH TISSUE EXAMINED MICROSCOPICALLY * NUMBER OF ANIMALS NECROFSIED

TABLE C1 (CONTINUED)

	01-0030	HIGH DOSE CONTROL (UNTR) 01-0084		HIGH DOSE 01-0087
HYPERFLASIA, FOCAL				1 (2%)
#ADRENAL CCRTEX	(45)	(25)	(46)	(45)
NODULE	1 (2%)			
METAMORPHOSIS FATTY			2 (4%)	
HYPERTROPHY, FOCAL		1 (4%)		
HYPERPLASIA, NODULAP	1 (2%)		4	
HYPERPLASIA, NOS			1 (2%)	
HYPERPLASIA, FOCAL	7. (16%)		3 (7%)	
#ADRENAL MEDULLA	(45)	(25)	(46)	(45)
HYPEPPIASIA, NCS	2 (4%)			
HYPERPIASIA, FCCAL	4 (9%)			
ANGIECTASIS			2 (4%)	
*THYROID	(42)	(23)	(41)	(47)
THYROGICSSAL DUCT CYST	` '		, ,	1 (2%)
HYPERPIASIA, FCCAI	2 (5%)		1 (2%)	
HYPERPLASIA, C-CEIL	1 (2%)		1 (2%)	
HYPERPLASIA, FOILICULAR-CEIL				1 (2%)
#FANCREATIC ISLETS	(45)	(25)	(45)	(48)
HYPERFLASIA, NCS	2 (4%)			1 (2%)
HYPERPLASIA, PCCAL			1 (2%)	1 (2%)
REFRODUCTIVE SYSTEM				
*MAMMARY GLAND	(46)	(25)	(49)	(49)
CYST, NOS			1 (2%)	
HYPERPLASIA, NOS LACTATION	3 (7%)	3 (12%) 7 (28%)	1 (2%)	
*FREPUTIAL GLAND	(46)	(25)	(49)	(49)
ABSCESS, NOS	2 (4%)			
#FROSTATE	(45)	(23)	(45)	(48)
INFLAMEATION, NOS		1 (4%)		
INFLAMMATION, FCCAL	1 (2%)			
INFLAMMATION, ACUTE	10 (22%)		5 (11%)	1 (2%)
INFLAMMATION, ACUTE FOCAL	4 (9%)		14 (31%)	
INFLAMMATION, ACUTE/CHRONIC	40 .00*		1 (2%)	
DEGENERATION, NOS	13 (29%)	# (4 78)		
ATROPHY, NOS	2 (4%)	4 (17%)	1 (2%)	
HYPERPLASIA, FCCAL	2 (10)		, (24)	
HYPERPLASIA, PAPILIARY	∠_(476)			

[#] NUMBER OF ANIMALS WITH TISSUE EXAMINED MICROSCOPICALLY * NUMBER OF ANIMALS NECROFSIED

TABLE C1 (CONTINUED)

	LOW DOSE CCNTROL (UNTR) 01-0030	HIGH DOSE CONTFOL (UNTR) 01-0084	LOW DOSE 01-0025	HIGH DOSE 01-0087
HYPERFLASIA, ALENCMATOUS METAPLASIA, SQUAMOUS	1 (2%)		1 (2%)	
*SEMINAL VESICIF ATROPHY, NOS HYPERPLASIA, PAPILLARY	(46) 26 (57%) 1 (2%)	(25) 1 (4%)	(49) 1 (2%)	(49)
*COAGULATING GLAND ATROPHY, NCS	(46) 3 (7%)	(25)	(49)	(49)
#TESTIS CEGENERATION, NCS CALCIFICATION, FOCAL	(45)	(24) 4 (17%)	(46) 32 (70%)	(49)
ATROPHY, NOS HYPERPLASIA, INTERSTITIAL CELL	1 (2%)	12 (50%) 2 (8%)	2 (4%)	5 (10%)
#TESTIS/TUBUIE DEGENERATION, NCS	(45) 10 (22%)	(24)	(46) 3 (7%)	(49) 2 (4%)
NERVOUS SYSTEM				
*BRAIN HEMCRPHAGE CALCIFICATION, FCCAL	(45)	(25) 2 (8%) 1 (4%)	(45)	(49)
#CEREBRAL CCRTEX HEMORRHAGE MALACIA	(45) 1 (2%) 1 (2%)	(25)	(45)	(49)
SPECIAL SENSE ORGANS				
*EYE SYNECHIA, POSTERIOR CATARACT	(46) 1 (2%) 1 (2%)	(25)	(49)	(49)
MUSCULOSKEIETAL SYSTEM				
*SKELETAL MUSCLE CALCIFICATION, FOCAL	(46)	(25) 1 (4%)	(49)	(49)
BODY CAVITIES				
NCNE			_	

^{*} NUMBER OF ANIMALS WITH TISSUE EXAMINED MICROSCOPICALLY * NUMBER OF ANIMALS NECROPSIED

TABLE C1 (CONCLUDED)

	LOW DOSE CCNTROL (UNTR) 01-0030	HIGH DOSE CONTROL (UNTR) 01-0084	LOW DOSE 01-0025	HIGH DOSE 01-0087
ALL OTHER SYSTEMS				
ACIFOSE TISSUE INFLAMMATION, ACUTE/CHRONIC			1	
SPECIAL MOPPHOLOGY SUMMARY				
AUTC/NECRCESY/HISTO PERF			1	
AUTC/NECRCESY/NC HISTO AUTOLYSIS/NO NECROPSY	1 4		1	1

^{*} NUMBER OF ANIMALS NECPOPSIED

TABLE C2 SUMMARY OF THE INCIDENCE OF NONNEOPLASTIC LESIONS IN FEMALE RATS TREATED WITH 2,4-DINITROTOLUENE

	LOW DOSE CONTROL (UNTR) 02-0030	HIGH DOSE CONTROL (UNTR) 02-0084	LOW DOSE 02-0025	HIGH DOSE 02-0087
ANIMALS INITIALLY IN STUDY ANIMALS NECRCESIED ANIMALS EXAMINED HISTOFATHOLOGICALLY	50 48 ** 47	25 23 23	50 49 49	50 50 50
INTEGUMENTARY SYSTEM				
*SUBCUT TISSUE COLLAGEN DISFASE	(48)	(23)	(49)	(50) 1 (2%)
RESPIRATORY SYSTEM				
*NASAL SEPTUM INFLAMMATION, CHRONIC	(48)	(23)	(49)	(50) 1 (2%)
*IARYNX INFLAMMATION ACUTE AND CHRONIC INFLAMMATION, CHRONIC	(48)	(23) 1 (4%) 3 (13%)	(49)	(50)
*TRACHFA LYMPHCCYTIC INFLAMMATORY INFILIR INFLAMMATION, ACUTE/CHRONIC INFLAMMATION, CEROMIC FCLYF, INPLAMMATORY	(47) 4 (9%) 18 (38%) 1 (2%)	(5)	(48) 4 (8%) 25 (52%)	(50) 1 (2%) 20 (40%)
#IUNG/ERCNCHUS BRONCHIECTASIS INFIAMMATICN, ACUTE FOCAL PIEROSIS	(47) 2 (4%) 1 (2%)	(23)	(49) 1 (2%)	(50)
#IUNG/EPCNCHIOLF INFLAMMATION, KCS LYMPHOCYTIC INFLAMMATORY INFILITE INFLAMMATION, ACUTE/CHRONIC HYPERPLASIA, LYMPHOID	(47) 4 (9%) 7 (15%) 5 (11%) 2 (4%)	(23)	(49) 4 (8%)	(50)
#IUNG CONGESTION, NCS INFLAMMATION, FCCAL	(47)	(23)	(49) 2 (4%) 1 (2%)	(50)
INFLAMMATION, INTERSTITIAL	4 (9%)	3 (13%)	. (2 * /	

Number of animals with tissue examined microscopically
 Number of animals necrofised
 **excludes partially autolyzed animals

TABLE C2 (CONTINUED)

	LOW DOSE CCNTROL (UNTR) 02-0030	HIGH DOSE CONTFOL (UNTR) 02-0084	LOW DOSE 02-0025	HIGH DOSE 02-0087
EFONCHOPNEUMONIA, ACUTE ENEUMONIA, CHRONIC MURINE GRANULOMA, FOREIGN BODY PERIVASCULITIS CALCIFICATION, FOCAI HYPERPIASIA, EPITHELIAL HYPERPLASIA, ADENCMATOUS	15 (32%)	8 (35%) 1 (4%) 1 (4%) 1 (4%)	4 (8%)	1 (2%) 1 (2%)
#IUNG/ALVECLI EPITHELIALIZATICN	(47) 1 (2%)	(23)	(49)	(50)
HEMATOPOIETIC SYSTEM				
#EONE MAPROW EYFOPIASIA, NOS OSTEOSCLERCSIS HYFERFLASIA, HEMATOPOIETIC	(47) 1 (2%) 1 (2%)	(22) 1 (5%)	(48)	(45) 1 (2%)
#SPIEEN CONGESTION, NCS HEMATOMA, NOS HEMOSIDEROSIS ATROPHY, NOS HYFEPPLASIA, HEMATOPOIETIC HYPEPPLASIA, ERYTHROIL HEMATOPOIESIS ZAYTHEOPOIESIS	(47) 1 (2%) 2 (4%)	(23) 1 (4%) 2 (9%) 3 (13%) 4 (17%) 3 (13%)	(49)	(50) 1 (2%) 1 (2%) 1 (2%) 2 (4%)
#MANDIBULAR I. NODE HYPEPFLASIA, NCS	(42)	(21)	(44)	(47) 1 (2%)
#FANCREATIC L.NODE HYPERFIASIA, NCS	(42)	(21)	(44) 1 (2%)	(47)
#MESENTEPIC L. NODE HYPERFIASIA, NCS	(42)	(21)	(44)	(47) 1 (2%)
#THYMUS HYPERFLASIA, FETICULUM CELL	(36)	(20)	(27) 1 (4%)	(32)
CIPCULATORY SYSTEM				
#HEAST PERIARTERITIS	(47) 2 (4%)	(23)	(49) 1_(2 %)	(49)

[#] NUMBER OF ANIMALS WITH TISSUE EXAMINED MICROSCOPICALLY * NUMBER OF ANIMALS NEOFOESIED

TABLE C2 (CONTINUED)

	CONTROL (UNTR) 02-0030	HIGH DOSE CONTFCL (UNIR) 02-0084	LOW DOSE 02-0025	HIGH DOSE 02-0087
PERIVASCULITIS HYPERTROPHY, NOS	1 (2%) 1 (2%)	~~~~		
#MYOCAPDIUM TNFLAMMATICN, NOS	(47)	(23)	(49) 1 (2%)	(49)
INFLAMMATION, FCCAL	1 (2%)		• •	
INFLAMMATION, INTERSTITIAL INFLAMMATION, ACUTE/CHRONIC FIEROSIS, DIFFUSE	2 (4%)	1 (4%)	1 (2%) 5 (10%) 4 (8%)	2 (4%)
DEGENERATION, NOS	2 (4%)	4 (17%)	4 (0%)	3 (6%)
#ENDOCARDIUM INFLAMMATICN, ACUTE/CHRONIC	(47) 3 (6%)	(23)	(49)	(49)
#CAPDIAC VALVE INFLAMMATICN, ACUTE/CHRONIC	(47)	(23)	(49) 1 (2%)	(49)
*FENAL ARTERY THROMBCSIS, NCS	(48)	(23)	(49) 1 (2%)	(50)
DIGESTIVE SYSTEM	(47)	(23)	(49)	(50)
CONGESTION, CHRONIC PASSIVE HEMORRHAGE INFLAMMATION, FOCAL	1 (2%) 1 (2%)	1 (4%)	1 (2%)	
INFLAMMATION, CERONIC DIFFUSE SCIEROSIS CHOLANGIOFIBROSIS	1 (2%)	1 (4%)		1 (2%)
PERIVASCULITIS NECROSIS, FOCAL NECROSIS, COAGULATIVE	1 (2%) 1 (2%) 1 (2%)		1 (2%)	
METAMORPHOSIS FATTY BASOPHILIC CYTC CEANGE	4 (9%)	2 (9%) 4 (17%)	8 (16%)	4 (8%)
HYPERTROPHY, NOS HYPERPLASIA, NCDULAR	1 (2%)		4 (8%)	
HYPERPLASIA, NOS HYPERPLASIA, FOCAL HYPERPLASIA, DIFFUSE	1 (2%) 21 (45%) 1 (2%)	3 (13%)	33 (67%)	6 (12%
HYPERPLASIA, RETICULUM CELL			1 (2%)	
♦IIVER/HEPATOCYTES HYPERPIASIA, FCCAL	(47) 2 (4%)	(23)	(49)	(50)
*PILE DUCT INFLAMMATION, KOS	(48)	(23)	(49) 1 (2%)	(50) 1 (2%)

[#] NUMBER OF ANIMALS WITH TISSUE EXAMINED MICROSCOPICALLY
* NUMBER OF ANIMALS NECFORSIED

TABLE C2 (CONTINUED)

	LOW DOSE CCNTROL (UNTR) 02-0030	HIGH DOSE CONTROL (UNTR) 02-0084	LOW DOSE 02-0025	HIGH DOSE 02-0087
INPLAMMATION, ACUTE/CHRONIC INPLAMMATION WITH FIBROSIS HYPERPLASIA, NOS HYPERPLASIA, FOCAL	1 (2%) 1 (2%) 4 (8%)	2 (9%)	7 (14%) 7 (14%)	1 (2%)
#FANCREAS INFLAMMATION, INTERSTITIAL INFLAMMATION, ACUTE/CHRONIC ATROPHY, NOS	(46) 2 (4%) 1 (2%)	(22)	(47) 2 (4%) 5 (11%)	(48)
#FANCREATIC ACINUS CEGENEFATION, GPANULAR ATROPHY, NCS ATROPHY, FOCAL	(46) 1 (2%) 4 (9%) 1 (2%)	(22)	(47)	(48)
*STOMACH INFLAMMATION, ACUTE FOCAL	(46)	(23)	(49) 1 (2%)	(48)
#SMALL INTESTINE HYPERFLASIA, LYMFHCID	(47) 1 (2%)	(23)	(47) 2 (4%)	(50)
#FEYERS PATCH HYPERPLASIA, NCS	(47)	(23) 4 (17%)	(47)	(50)
#CCLCN ULCEP, FCCAI PARASITISM	(46) 1 (2%)	(22) 2 (9%)	(46) 4 (9%)	(49) 2 (4%)
URINARY SYSTEM				
#KIDNEY GIOMEPULCNEPHRITIS, NOS GLOMEPULCNEPHRITIS, FCCAL INFLAMMATION, INTERSTITIAL PYELONEPHRITIS, ACUTE	(47) 32 (68%) 2 (4%)	(23) 4 (17%) 1 (4%) 1 (4%)	(49) 19 (39%) 3 (6%) 2 (4%)	(49)
PYELONEPERITIS, CHRONIC HEPHROSIS, NOS POSTMORTEM CHANGE CALCIFICATION, FOCAL		10 (43%)	1 (2%)	40 (82%
# KIDNEY/CCRTEX CYST, NOS	(47) 1 (2%)	(23)	(49)	(49)
#KIDNEY/GLOMERULUS INFIAMMATICN, KEMERANOUS	(47) 7 (15%)	(23)	(49) 4 (8%)	(49)

[#] NUMBER OF ANIMALS WITH TISSUE FXAMINED MICROSCOPICALLY * NUMBER OF ANIMALS NECFOESIED

TABLE C2 (CONTINUED)

	LOW DOSE CCNTROL (UNTR) 02-0030	HIGH DOSE CONTRCL (UNTR) 02-0084	LOW DOSE 02-0025	HIGH DOSE 02-0087
#KIDNEY/TUBULE NECROSIS, NOS	(47)	(23) 1 (4%)	(49)	(49)
ENDOCRINE SYSTEM				
*FITUITARY	(46)	(21)	(45)	(40)
CYST, NOS HEMORRHAGIC CYST		1 (5%)	2 (4%)	
NECROSIS, FOCAL	1 (2%)	1 (3%)		
HYPERTROPHY, FOCAL	1 (2%)			
HYPERPLASIA, FOCAL	6 (13%)	1 (5%)	1 (2%)	
#ADPENAL	(47)	(23)	(49)	(50)
METAMORPHOSIS FATTY	`1´(2 %)	, /	2 (4%)	, ,
HYPERPLASIA, FOCAL	1 (2%)			
#ADRENAL COPIEX	(47)	(23)	(49)	(50)
HEMCRRHAGE	2 (4%)			
NODULE	4 (9%)			
DEGENERATION, NOS NECROSIS, FOCAL	2 (4%) 1 (2%)			
METAMORPHOSIS FATTY	1 (2%)		2 (4%)	
PIGMENTATION, NOS	1 (2%)		,	
HYPERPLASIA, NOCULAP	1 (2%)			
HYPERPLASIA, PGCAL	9 (19%)		1 (2%)	
#ADFENAL MEDULLA	(47)	(23)	(49)	(50)
HYPERPIASIA, NCDULAR	1 (2%)			
HYPEPPLASIA, FCCAL	2 (4%)			
#THYROID	(45)	(21)	(45)	(48)
LYMPHCCYTIC INFLAMMATORY INFILTR			1 (2%)	
HYPERPIASIA, FOCAL	3 (7%)	3 (1)(5)		1 (2%)
HYPERPLASIA, C-CEII	1 (2%)	3 (14%)		
REFRODUCTIVE SYSTEM				
*MAMMARY GLAND	(48)	(23)	(49)	(50)
GALACTOCELE	6 (13%)	1 (4%)	9 (18%)	4 .04.
MULTIPLE CYSTS			1 (2#)	1 (2%)
INFLAMMATION, ACUTE HYPERPLASIA, NOS	1 (2%)	1 (4%)	1 (2%) 12 (24%)	
HYPERPLASIA, CYSTIC	1 (2%)	, (-4)	(2 , 7/	2 (4%)

[#] NUMBER OF ANIMALS WITH TISSUE EXAMINED MICROSCOPICALLY * NUMBER OF ANIMALS NECPOSSIED

TABLE C2 (CONTINUED)

	LOW DOSE CCNTROL (UNTR) 02-0030	HIGH DOSE CONTFOL (ENTR) 02-0084	LOW DOSE 02-0025	HIGH DOSE 02-0087
IACTATION		9 (39%)	+	
*CITTOPAL GLAND ABSCESS, NOS	(48) 1 (2%)	(23)	(49)	(50)
HYPERPLASIA, PAPILLARY			1 (2%)	
*VAGINA FOLYP	(48) 1 (2%)	(23)	(49)	(50)
#UT FRUS HYDROMETIA INFLAMMATION, NOS	(46) 2 (4%)	(23)	(47) 2 (4%)	(49) 3 (6%) 1 (2%)
FYOMETRA INFLAMMATION, ACUTE FIBROSIS HYPERFLASIA, ALENCMATOUS		3 (13%)		1 (2%) 1 (2%) 1 (2%) 2 (4%)
#UTERUS/ENDCMETRIUM CYST, NOS	(46)	(23)	(47) 3 (6%)	(49)
INFLAMMATION, NCS INFLAMMATION, SUPPURATIVE INFLAMMATION, ACUTE INFLAMMATION, ACUTE FOCAL	6 (13%)	1 (4%)	20 (43%) 1 (2%)	7 (14%) 4 (8%)
INFLAMMATION, ACUTE/CHRONIC INFLAMMATION, CHPONIC HYPERTROFHY, NOS HYPERPLASIA, NOS	1 (2%) 1 (2%) 1 (2%)	1 (4%) 1 (4%)		
HYPERPLASIA, FOCAL HYPERPLASIA, CYSTIC	7 (15%)	1 (4%)	1 (2%) 7 (15%)	2 (4%)
*CVARY/CVIDUCT RETENTION FIUID INFLAMMATION, SUFFURATIVE INFLAMMATION, ACUTE ABSCESS, NOS	(46) 1 (2%) 1 (2%) 1 (2%)	(23) 1 (4%) 1 (4%)	(47)	(49)
*CVARY CYST, NCS PARDVARIAN CYST	(47) 4 (9%)	(22) 3 (14%)	(47) 1 (2%) 1 (2%)	(49) 1 (2%)
HYPERPLASIA, NOS	1 (2%)			
#EF!IN HYDROCEPHALUS, NCS	(47)	(23) 1 (4%)	(48)	(48)

[#] NUMBER OF ANIMALS WITH TISSUE EXAMINED MICROSCOPICALLY
* NUMBER OF ANIMALS NECROFSIED

TABLE C2 (CONCLUDED)

	LOW DOSE CCNTRCI (UNTR) 02-0030	HIGH DOSE CCNTFOL (UNTR) 02-0084	LOW DOSE 02-0025	HIGH DOSE 02-0087
HEMOPRHAGE CALCIFICATION, FOCAL				
SPECIAL SENSE ORGANS				
*FYE CATARACT	(48) 1 (2%)	(23)	(49) 1 (2%)	(50)
*EYF/CCFNEA INTERSTITIAL	(48)	(23)	(49) 1 (2%)	(50)
*EYE/RETINA DEGENERATION, NCS	(48) 1 (2%)	(23)	(49) 1 (2%)	(50)
MUSCULOSKEIETAL SYSTEM NCNE BODY CAVITIES				
*FLEURA INFLAMMATICN, ACUTE/CHRONIC HYPERPLASIA, ADENCMATOUS	(48)	(23)	(49) 1 (2%)	(50) 1 (2%)
ALI OTHER SYSTEMS				
*MULTIPLE ORGANS ECSIMOFTEM CHANGE	(48)	(23)	(49) 1 (2%)	(50)
SPECIAL MOPPHOLOGY SUMMARY				
AUTC/NECFOFSY/NO HISTO AUTCLYSIS/NC NECRCESY	1 2	2	1	

^{*} NUMBER OF ANIMALS WITH TISSUE EXAMINED MICROSCOPICALLY * NUMBER OF ANIMALS NECROFISED

APPENDIX D

SUMMARY OF THE INCIDENCE OF NONNEOPLASTIC LESIONS IN MICE TREATED WITH 2,4-DINITROTOLUENE

TABLE D1 SUMMARY OF THE INCIDENCE OF NONNEOPLASTIC LESIONS IN MALE MICE TREATED WITH 2,4-DINITROTOLUENE

	LOW DOSE CONTROL (UNTR) 05-0030	HIGH DOSE CONTRCL (UNTR) 05-0077	LOW DO SE 05-0025	HIGH DOSE 05-0088
ANIMALS INITIALLY IN STULY ANIMALS NECROPSIED ANIMALS EXAMINED HISTOPATHOLOGICALLY*'	50 46 * 46	50 46 45	5 0 48 48	50 49 49
NIEGUMENTARY SYSTEM				
*SKIN GRANULOMA, PYOGENIC	(46) 1 (2%)	(46)	(48)	(49)
ESPIRATORY SYSTEM				
*IUNG/BRCNCHUS INFLAMMATION, FCCAL	(46) 1 (2%)	(45)	(48)	(48)
#IUNG FMPHYSEMA, NCS	(46) 1 (2%)	(45)	(48)	(48)
EDEMA, NOS HEMORRHAGE	1 (2%)		1 (2%)	
INFLAMMATION, INTERSTITIAL ARTERIOSCLEROSIS, NOS	7 (15%)	1 (2%)		
*IUNG/ALVECLI INFLAMMATICN, NCS	(46) 1 (2%)	(45)	(48)	(48)
EMATOPOIRTIC SYSTEM				
#SPIEFN FIBROSIS	(46)	(45) 1 (2%)	(47)	(44)
HYPERPLASIA, HEMATOPOIRTIC	4 (00)	1 (2%)	1 (2%)	
HYPEPPIASIA, EPYTHROID HYPERPIASIA, RETICUIUM CELL HEMATOPOIESIS	1 (2%) 1 (2%)	3 (7%) 1 (2%)		1 (2%)
*IYMPH NCDE	(34)	(35)	(40)	(34)
HEMORRHAGE HYPERPLASIA, NOS HYPEPPLASIA, PIASMA CELL	1 (3%) 1 (3%)			1 (3%)
#MANDIEULAR L. NOPE HYPEPFIASIA, BETICULUM CELL	(34)	(35)	(40)	(34)

[#] NUMBER OF ANIMALS WITH TISSUE EXAMINED MICROSCOPICALLY
* NUMBER OF ANIMALS NECROPSIED
**EXCLUDES PARTIALLY AUTOLYZED ANIMALS

TABLE D1 (CONTINUED)

	LOW DOSE CCNTROL (UNTR) 05-0030	HIGH DOSE CONTROL (UNTR) 05-0077	LOW DOSE 05-0025	HIGH DOSE 05-0088
#MESENTERIC L. NODE THRCMBOSIS, NOS	(34) 1 (3%)	(35)	(40)	(34)
CONGESTION, NCS HEMOREHAGE HYPERPLASIA, NOS	1 (3%)		1 (3%)	1 (3%) 2 (6%)
HYFERFLASIA, PIASMA CELL HYPERFLASIA, RETICUIUM CELL HYPERPLASIA, LYMPHOID			1 (3%)	1 (3%)
CIRCULATORY SYSTEM				
#ENDOCARDIUM INFLAMMATION PECLIFERATIVE	(46) 1 (2%)	(44)	(48)	(47)
DICESTIVE SYSTEM				
#SALIVARY GLAND PERIVASCULITIS	(37) 5 (14%)	(43)	(44)	(47)
#IIVER	(46)	(45)	(47)	(48)
INFLAMMATION, NECROTIZING DEGENERATION, NOS NECROSIS, FOCAL	1 (2%)	1 (2%)		
NECPOSIS, HEMORPHAGIC METAMORPHOSIS FATTY HYPEPPLASIA, NODUIAR	1 (2%) 8 (17%)	3 (7%)	1 (2%) 1 (2%)	
HYPERPLASIA, NOS HYPERPLASIA, FOCAI	1 (2%) 1 (2%)			2 (4%)
#IIVEF/PEFIFORTAL INFLAMMATION, NOS	(46)	(45) 1 (2%)	(47)	(48)
#IIVER/KUFFFEF CELL HYPEFFIASIA, NOS	(46)	(45) 2 (4%)	(47)	(48)
*BILE TUCT INFLAMMATION, NOS LYMPHOCYTIC INFLAMMATORY INFLITE	(46) 1 (2%)	(46) 1 (2%)	(48)	(49)
#FANCREAS CILATATION/DUCIS	(44)	(44)	(46) 1 (2%)	(42)
INFLAMMATION, FCCAL INFLAMMATION, INTERSTITIAL	2 (5%) 1 (2%)			

[#] NUMBER OF ANIMALS WITH TISSUE EXAMINED MICPOSCOPICALLY * NUMBER OF ANIMALS NECROPSIED

TABLE D1 (CONTINUED)

	LOW DOSE CCNTROI (UNTR) 05-0030	HIGH DOSE CONTROL (UNTR) 05-0077	LOW DOSE 05-0025	HIGH DOSE 05-0088
INFLAMMATION, ACUTE/CHRCNIC HYPERPLASIA, POCAL	2 (5%)		2 (4%)	
#FANCREATIC DUCT INFLAMMATION, ACUTE FOCAL	(44)	(44)	(46) 1 (2%)	(42)
#FANCRFATIC ACINUS ATROPHY, FCCAL HYPERPIASIA, FCCAL	(44) 1 (2%)	(44)	(46) 1 (2%)	(42)
#STOMACH INFLAMMATICN, NCS INFLAMMATICN, ACUTE HYPERPLASIA, NCS HYPERFLASIA, EFITHELIAL HYPERPLASIA, FOCAL HYPERPLASIA, ADENCMATOUS	(45) 2 (4%) 1 (2%) 1 (2%) 1 (2%) 2 (4%)	1 (2%)	(45)	(45) 1 (2%)
#GASTRIC SERCSA PERIARTERITIS	(45)	(42)	(45)	(45) 1 (2%)
#ILFUM ABSCESS, NOS	(46)	(43)	(45) 1 (2%)	(45)
#HIDNEY CALCULUS, NOS GLOMERULONEPHRITIS, NOS INFLAMMATION, INTERSTITIAL INFLAMMATION, ACUTE/CHRONIC INFLAMMATION, CHRONIC PERIVASCULITIS ARTEFICSCLEROSIS, NOS NEPHROSIS, NOS HYPERPLASIA, TUEULAP CELL METAPIASIA, OSSFOUS	(46) 3 (7%) 7 (15%) 1 (2%)	(45) 20 (44%) 5 (11%) 1 (2%) 2 (4%) 1 (2%) 1 (2%) 2 (4%)	(48) 16 (33%) 1 (2%)	(48)
*KIDNEY/TUBULE DEGENERATION, NOS METAMOPPHOSIS FATTY	(46)	(45) 1 (2%) 9 (20%)	(48)	(48)
<pre>####################################</pre>	(46) 3 (7%)	(45)	(48) 14 (29%)	(48)
#URINABY ELADDER FERIVASCULAR CUFFING	(46)	(44)	(46)	(45) 1 (2%)

^{*} NUMBER OF ANIMALS WITH TISSUE EXAMINED MICROSCOPICALLY
* NUMBER OF ANIMALS NECROFSIED

TABLE D1 (CONTINUED)

	LOW DOSE CCNTROL (UNTR) 05-0030	HIGH DOSE CCNIRCL (UNTR) 05-0077	LOW DOSE 05-0025	HIGH DOSE 05-0088
HYPERPLASIA, EPITHELIAI	2 (4%)			
ENDOCRINE SYSTEM				
#PITUITARY	(39)	(36)	(33)	(42)
CYST, NOS HYPFRPIASIA, FCCAL	1 (3%)		1 (3%) 1 (3%)	
#ADPENAL	(44)	(43)	(46)	(45)
NECPOSIS, FOCAL HYPERPLASIA, FOCAL	1 (2%)		2 (4%)	
#ADPENAL CORTEX	(44)	(43)	(46)	(45)
HYPEPPIASIA, NOS HYPERPIASIA, FCCAL	2 (5%) 14 (32%)		25 (54%)	
#FARATHYRCID	(17)	(18)	(21)	(20)
CYST, NOS	1 (6%)	(10)	(21)	(20)
*FRERUTIAL GLAND INFLAMMATION, ACUTE	(46)	(46)	(48)	(49) 1 (2%)
INFLAMMATION, ACUTE	(46)	(44)	(45)	1 (2%) (47)
HYPERFIASIA, FFITHFLIAL	1 (2%)	, ,		, ,
#TESTIS MINERALIZATION DEGENERATION, NOS	(46)	(45)	(47) 1 (2%) 4 (9%)	(47)
*TESTIS/TUBULE DEGENERATION, NOS	(46) 3 (7%)	(45) 2 (4%)	(47)	(47)
*EPIDICYMIS NECROSIS, NGS	(46)	(46)	(48) 1 (2%)	(49)
NERVOUS SYSTEM				
*ERAIN	(4€)	(45)	(46) 18 (39%)	(45)

__NONE

^{*} NUMBER OF ANIMALS WITH TISSUE EXAMINED MICROSCOPICALLY * NUMBER OF ANIMALS NECROPSIED

TABLE D1 (CONCLUDED)

:===\=================================				
		HIGH DOSE CONTFOL (UNTR) 05-0077		
MUSCULOSKEIETAI SYSTEM				
*SKELETAL MUSCLE PERIAFTERITIS	(46)	(46)	(48)	(49) 1 (2%)
BODY CAVITIES				
*ABDOMINAL CAVITY STEATITIS	(46)	(46) 1 (2%)	(48)	(49)
NECROSIS, FAT	1 (2%)			
ALL OTHER SYSTEMS				
*MULTIFIE ORGANS ECSIMOFIEM CHANGE	(46)	(46)	(48) 1 (2%)	(49)
SPECIAL MORPHOLOGY SUMMARY				
NO LESION PEFORIED	2	8	1	28
ACCIDENTAL DEATH AUTO/NECROPSY/EISTO PERF AUTC/NECROESY/NO HISTO	2	1	1	2
AUTOLYSIS/NC NECECESY	1	<u>.</u>	2	1

^{*} NUMBER OF ANIMALS WITH TISSUE EXAMINED MICROSCOPICALLY
* NUMBER OF ANIMALS NECFORSIED

TABLE D2 SUMMARY OF THE INCIDENCE OF NONNEOPLASTIC LESIONS IN FEMALE MICE TREATED WITH 2,4-DINITROTOLUENE

	LOW DOSE CONTROL (UN: 06-0030		LOW DOSE 06-0025	HIGH DOSE 06-0088
ANIMALS INITIALLY IN STUDY	50	50	50	50
ANIMALS MISSING			3	
ANIMALS NECHOFSIED	. 47	46	46	50
ANIMALS EXAMINED HISTOFATHOLOGICALLY	* 47 	46	46	50
INTEGUMENTARY SYSTEM				
*SKIN	(47)	(46)	(46)	(50)
FIBROSIS	` '	1 (2%)	` ,	••••
FIEROSIS, FOCAL		1 (2%)		
RESPIRATORY SYSTEM				
#LUNG/BRONCHUS	(46)	(45)	(46)	(48)
INFIAMMATICA, ACUTE FOCAL	,	(/	1 (2%)	(/
INFLAMMATION, ACUTE/CHRONIC			1 (2%)	
INFLAMMATION, CHRONIC			1 (2%)	
METAPLASIA, NOS			1 (2%)	
#IUNG	(46)	(45)	(46)	(48)
CONGESTION, NOS			1 (2%)	
FDEMA, NCS			1 (2%)	
INFLAMMATION, FOCAL			1 (2%)	
INFLAMMATION, INTERSTITIAL	2 (4%)	2 (4%)		
PERIARTERITIS		1 (2%)		
*IUNG/ALVECLI	(46)	(45)	(46)	(48)
EMPHYSEMA, NOS	1 (2%)			
HEMATOPCIETIC SYSTEM				
#EONE MARRCW	(45)	(44)	(45)	(45)
HYPOPIASIA, NOS	1 (2%)			
MYEIOFIBRCSIS	1 (2%)		1 (2%)	
HYPEPPLASIA, HEMATOPOIETIC			1 (2%)	
*SPIREN	(45)	(43)	(44)	(48)
LYMPHOCYTCSIS	2 (4%)		4 (0.0)	
HYPERPLASIA, HEMATOPOIETIC			1 (2%)	

[#] NUMBER OF ANIMALS WITH TISSUE EXAMINED MICROSCOPICALLY
* NUMBER OF ANIMALS NECROPSIED
**EXCLUDES PARTIALLY AUTOLYZED ANIMALS

TABLE D2 (CONTINUED)

	LOW DOSE CCNTROL (UNTR) 06-0030	HIGH DOSE CONTFOL (UNIR) 06-0077	LOW DOSE 06-0025	HIGH DOSE 06-0088
HYPERFLASIA, RETICULUM CELL HYPERPLASIA, LYMPHOID HEMATOPOIESIS ERYTHROPOIESIS	3 (7%) 2 (4%)	2 (5%) 4 (9%) 1 (2%)	3 (7%) 1 (2%)	1 (2%) 3 (6%)
#MANDIBULAR I. NODE INFLAMMATION, ACUTE	(27)	(41)	(42) 1 (2%)	(38)
#MECIASTINAL L.NCCE INFLAMMATION, ACUTE	(27)	(41)	(42) 1 (2%)	(38)
*FANCREATIC L.NODF HYPERFIASIA, RETICULUM CELL	(27) 1 (4%)	(41)	(42)	(38)
*MESENTERIC I. NODE INFLAMMATICN, ACUTE FOCAL INFLAMMATICN, GRANUICMATCUS HYPEPPLASIA, PIASMA CELI HYFERFIASIA, LYMPEOID	(27)	(41)	(42) 1 (2%) 1 (2%)	(38) 1 (3%) 1 (3%)
CIRCULATORY SYSTEM				
#HEART/ATRIUM CALCIFICATION, FCCAL	(46) 1 (2%)	(45)	(46)	(47)
#MYCCAFDIUM CALCIFICATION, FCCAL	(46)	(45) 1 (2%)	(46)	(47)
*FUIMCNAFY AFTEFY byPerpiasya, NCS	(47)	(46) 1 (2%)	(46)	(50)
DIGESTIVE SYSTEM				
#SALIVARY GLAND FERIVASCULITIS	(29) 1 (3%)	(43)	(44)	(48)
#IIVER MINERALIZATION INPIAMMATICN, NOS	(46)	(45)	(46) 1 (2%) 1 (2%)	(50)
INFLAMMATION, GRANULOMATOUS	1 (2%)		1 (2%) 1 (2%)	1 (2%)
NECROSIS, FOCAL NECROSIS, COAGULATIVE METAMORPHOSIS FATTY	1 (2%)		1 (2%)	
HYPERPLASIA, NODULAR	<u>2 (4%)</u>			

[#] NUMBER OF ANIMALS WITH TISSUE EXAMINED MICROSCOPICALLY * NUMBER OF ANIMALS NECROPSIED

TABLE D2 (CONTINUED)

	LOW DOSE CCNTROL (UNTR) 06-0030	HIGH DOSE CONTROL (UNTR) 06-0077	LOW DOSE 06-0025	HIGH DOSE 06-0088
HYPERFLASIA, FCCAI HYPERPLASIA, DIFFUSE ANGIECTASIS	1 (2%)	1 (2%) 1 (2%)	1 (2%)	
#LIVER/PEFIFORTAL INFLAMMATION, NCS HYPERPLASIA, LYMPHCID	(46) 1 (2%)	(45) 1 (2%)	(46)	(50)
#IIVER/KUFFFER CEIL HYPERFIASIA, NCS	(46)	(45) 1 (2%)	(46)	(50)
*EILE DUCT INFLAMMATION, NCS INFLAMMATION, ACUTE/CHRONIC INFLAMMATION, CHRONIC DIFFUSE	(47)	(46) 1 (2%)	(46) 3 (7%)	(50) 1 (2%)
TRANCREAS INFLAMMATION, INTERSTITIAL INFLAMMATION, CHRONIC PIEFOSIS ATROPHY, FOCAL	(39)	(41)	(44) 2 (5%)	(41) 1 (2%) 1 (2%) 1 (2%)
#FANCREATIC DUCT INFLAMMATICN, NOS	(39) 1 (3%)	(41)	(44)	(41)
#STCMACH INFLAMMATION, NOS ULCER, FOCAL INFLAMMATION, ACUTE FOCAL INFLAMMATION, ACUTE/CHRONIC HYPERPLASIA, EPITHELIAL	(45) 3 (7%)	(42)	(44) 1 (2%) 1 (2%) 1 (2%) 1 (2%)	(41)
#SMALL INTESTINE AMVIOIDESIS	(45)	(43)	(42) 1 (2%)	(44)
#FEYERS PATCH HYPERFLASIA, NCS	(45) 1 (2%)	(43)	(42)	(44) 1 (2%)
# LUCDENUM ECTCPIA	(45) 1 (2%)	(43)	(42)	(44)
#ILEUM ABSCESS, NCS	(45)	(43)	(42) 1 (2%)	(44)
*RECIUM PRCIAPSE	(47)	(46)	(46)	(50) 1 (2%)

^{*} NUMBER OF ANIMALS WITH TISSUE EXAMINED MICROSCOPICALLY * NUMBER OF ANIMALS NECROPSIED

TABLE D2 (CONTINUED)

	LOW DOSE CCNTRCL (UNTR) 96-0030	HIGH DOSE CCNTFOL (UNTR) 06-0077	LOW DOSE 06-0025	HIGH DOSE 06-0088
URINARY SYSTEM				
#KICNEY GLOMERUICNEPHRITIS, NOS INFLAMMATION, INTERSTITIAL GLOMERULONEPHRITIS, CHRONIC PERIVASCULITIS	(45) 3 (7%) 9 (20%)	(43) 3 (7%) 4 (9%)		(46) 1 (2%) 1 (2%)
#KICNEY/GIOMERULUS AMYLOIDOSIS	(45)	(43) 1 (2%)	(46)	(46)
#KITNEY/FELVIS INFLAMMATION, NCS INFLAMMATION, ACUTE/CHRONIC	(45) 1 (2%)	(43) 1 (2%)	(46) 1 (2%) 8 (17%)	(46)
#URINARY BLACCEF INFLAMMATION, ACUIE/CHRONIC HYPERPIASIA, EPITHELIAL	(42)	(41)	(42) 9 (21%) 3 (7%)	(44)
ENDOCRINE SYSTEM				
#PITUITAPY HYPERPIASIA, FCCAL	(37)	(37)	(38) 7 (18%)	(34)
*ADPENAL CONGESTION, NOS	(44)	(43)	(42) 1 (2%)	(45)
*ADEENAL COFTEX NODULE HYPERPLASIA, NOS HYPERPLASIA, FOCAL	(44) 1 (2%) 2 (5%)	(43)	(42) 3 (7%) 36 (86%)	(45)
#THYROID COLICID CYST INFLAMMATION, ACUTE/CHRONIC HYPERPLASIA, FOCAL	(44)	(30)	(40) 1 (3%) 1 (3%) 1 (3%)	(42)
REPRODUCTIVE SYSTEM				
#UTERUS HYCROMETRA INFLAMMATION, SUFPURATIVE INFLAMMATION, ACUIE	(43) 4 (9%)	(43) 4 (9%)	(44)	(43) 1 (2%) 2 (5%) 2 (5%)

[#] NUMBER OF ANIMALS WITH TISSUE FXAMINED MICROSCOPICALLY * NUMBER OF ANIMALS NECROPSIED

TABLE D2 (CONTINUED)

	LOW DOSE CONTROL (UNTR) 06-0030	HIGH DOSE CCNTFOL (ENTR) 06-0077	LOW DOSE 06-0025	HIGH DOSE 06-0088
AESCESS, NOS NECROSIS, FOCAL METAPLASIA, SQUAMOUS	1 (2%)		2 (5%) 1 (2%)	
#UTERUS/ENDCMETFIUM CYST, NOS INFLAMMATION, NOS INFLAMMATION, SUPPUPATIVE INFLAMMATION, ACUIE HYPERPLASIA, NOS HYPERPLASIA, FOCAL HYPERPIASIA, CYSTIC	(43) 1 (2%) 33 (77%)	(43) 2 (5%) 1 (2%) 35 (81%)	1 (2%) 5 (11%) 1 (2%) 34 (77%)	(43) 1 (2%) 3 (7%) 1 (2%) 1 (2%) 23 (53%)
CVARY CYST, NCS HEMORPHAGIC CYST INFLAMMATION, SUPPURATIVE INFLAMMATION, ACUIE INFLAMMATION, CERCNIC	(44) 5 (11%)	(41) 1 (2%)	(44) 5 (11%) 1 (2%)	(37) 2 (5%) 1 (3%) 2 (5%) 4 (11%
IERVOUS SYSTEM				
PFCIAL SENSF ORGANS				
*FYF SYNECHIA, NCS CATAPACT	(47)	(46)	(46) 1 (2%) 1 (2%)	(50)
*EYE/RETINA DEGENERATION, NOS	(47)	(46)	(46) 1 (2%)	(50)
*FYE/CRYSTALLINE IENS SYNECHIA, ANTERIOR	(47)	(46)	(46) 1 (2%)	(50)
*FAFDERIAN GIAND INFLAMMATION, ACUTE/CHRONIC	(47)	(46)	(46) 1 (2%)	(50)
USCULOSKELETAL SYSTEM				
*VERTEBRA CSTECSCLEFOSIS	(47)	(46) 1 (2%)	(46)	(50)

 $[\]boldsymbol{\theta}$ number of animals with tissue examined microscopically $\boldsymbol{\star}$ number of animals necrofsied

TABLE D2 (CONCLUDED)

		HIGH DOSE CONTFOL (UNTR) 06-0077		HIGH DOSE 06-0088
BODY CAVITIES				
*FLEURA HYPERPIASIA, LYMPHCID	(47) 1 (2%)	(46)	(46)	(50)
ALI OTHER SYSTEMS				
*MULTIPLE ORGANS FCSIMCFTEM CHANGE	(47)	(46)	(46) 1 (2%)	(50)
SPECIAL MORPHOLOGY SUMMARY				
NC LESION REPORTED	1	1	3	6
ANIMAL MISSING/NC NECROFSY AUTO/NECROPSY/HISTO PERF AUTOLYSIS/NO NECROPSY	1 3	2 4	3 1 1	6

Review of the Bioassay of 2,4-Dinitrotoluene* for Carcinogenicity by the Data Evaluation/Risk Assessment Subgroup of the Clearinghouse on Environmental Carcinogens

January 18, 1978

The Clearinghouse on Environmental Carcinogens was established in May, 1976 under the authority of the National Cancer Act of 1971 (P.L. 92-218). The purpose of the Clearinghouse is to advise on the National Cancer Institute's bioassay program to identify and evaluate chemical carcinogens in the environment to which humans may be exposed. The members of the Clearinghouse have been drawn from academia, industry, organized labor, public interest groups, State health officials, and quasi-public health and research organizations. Members have been selected on the basis of their experience in carcinogenesis or related fields and, collectively, provide expertise in organic chemistry, biochemistry, biostatistics, toxicology, pathology, and epidemiology. Representatives of various Governmental agencies participate as ad hoc members. The Data Evaluation/Risk Assessment Subgroup of the Clearinghouse is charged with the responsibility of providing a peer review of NCI bioassay reports on chemicals studied for carcinogenicity. In this context, below is the edited excerpt from the minutes of the Subgroup's meeting at which 2,4-Dinitrotoluene was reviewed.

The primary reviewer said that he agreed with the staff's conclusion that, under the conditions of test, 2,4-Dinitrotoluene induced benign tumors in rats but showed no evidence of carcinogenicity in either sex of mice. He noted that a different strain of mouse was used for the prechronic study than for the chronic phase. After briefly describing the experimental design, the primary reviewer said that the study was deficient in that the maximum tolerated dose was not adequately defined during the subchronic studies. Therefore, it had to be approximated for the chronic phase. He opined that the hemangiosarcomas in the treated rats may be biologically significant. In summary, the primary reviewer said that the tumors in the treated rats must be viewed with concern, especially since the maximum tolderated dose may not have been attained. He felt that the data did not allow an assessment of human risk.

The secondary reviewer noted that 2,4-Dinitrotoluene is an intermediate in the production of dyes. He added

that there may be considerable human exposure from residues of 2,4-Dinitrotoluene in dye products. He continued that there may be a potential for human risk because of the increased tumor incidence seen in the treated rats. He suggested that another study be done, possibly using another species and route of exposure.

A Program staff member commented that there was a treatment-related biological effect produced by 2,4-Dinitro-toluene in the rats. He added that the dose levels in the mice and male rats approached the maximum tolerated dose, as suggested by the growth curves.

A Subgroup member suggested that the biological activity of 2,4-Dinitrotoluene may be due to its conversion to the diamine compound. The rate of its enzymatic conversion may limit its activity. He added that skin exposure would be a more appropriate route if 2,4-Dinitrotoluene is to be retested. Another Subgroup member suggested that the staff consult with Dr. Harris at North Carolina and Dr. Peters at Harvard, both of whom are doing epidemiologic studies among workers exposed in the TDI process. The consultation would be helpful in considering the need to retest 2,4-Dinitrotoluene.

It was moved that, in view of the significant number of benign tumors in the treated rats and widespread human exposure, 2,4-Dinitrotoluene be considered for retest. The motion was seconded and approved unanimously.

Members Present Were:

Arnold Brown (Acting Chairman), Mayo Clinic
Lawrence Garfinkel, American Cancer Society
Joseph Highland, Environmental Defense Fund
Charles Kensler, Arthur D. Little Company
Verald K. Rowe, Dow Chemical, U.S.A.
Sheldon Samuels, Industrial Union Department, AFL-CIO
Louise Strong, University of Texas Health Sciences Center
Sidney Wolfe, Health Research Group

^{*} Subsequent to this review, changes may have been made in the bioassay report either as a result of the review or other reasons. Thus, certain comments and criticisms reflected in the review may no longer be appropriate.