National Cancer Institute CARCINOGENESIS

Technical Report Series No. 101 1978

BIOASSAY OF FORMULATED FENAMINOSULF FOR POSSIBLE CARCINOGENICITY

CAS No. 140-56-7

NCI-CG-TR-101

U.S. DEPARTMENT OF HEALTH, EDUCATION, AND WELFARE Public Health Service
National Institutes of Health



BIOASSAY OF

FORMULATED FENAMINOSULF

FOR POSSIBLE CARCINOGENICITY

Carcinogenesis Testing Program
Division of Cancer Cause and Prevention
National Cancer Institute
National Institutes of Health
Bethesda, Maryland 20014

U.S. DEPARTMENT OF HEALTH, EDUCATION, AND WELFARE
Public Health Service
National Institutes of Health

DHEW Publication No. (NIH) 78-1351

REPORT ON THE BIOASSAY OF FORMULATED FENAMINOSULF FOR POSSIBLE CARCINGGENICITY

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

FOREWORD: This report presents the results of the bioassay of formulated fenaminosulf conducted for the Carcinogenesis Testing Program, Division of Cancer Cause and Prevention, National Cancer Institute (NCI), National Institutes of Health, Bethesda, Maryland. This is one of a series of experiments designed to determine whether selected chemicals have the capacity to produce cancer in animals. Negative results, in which the test animals do not have a significantly greater incidence of cancer than control animals, do not necessarily mean the test chemical is not a carcinogen because the experiments are conducted under a limited set of circumstances. Positive results demonstrate that the test chemical is carcinogenic for animals under the conditions of the test and indicate a potential risk to man. The actual determination of the risk to man from animal carcinogens requires a wider analysis.

CONTRIBUTORS: This bioassay of formulated fenaminosulf 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 Testing Program.

The experimental design was determined by the NCI Project Officers, Dr. J. H. Weisburger (1,2) and Dr. E. K. Weisburger (1). The principal investigators for the contract were Dr. E. Smith (3) and Dr. A. Handler (3). Animal treatment and observation were supervised by Mr. G. Wade (3) and Ms. E. Zepp (3). Chemical analysis was performed by Midwest Research Institute (4) and the analytical results were reviewed by Dr. N. Zimmerman (5).

Histopathologic examinations were performed by Dr. A. S. Krishna Murthy (3) and Dr. D. S. Wyand (3) at the Mason Research Institute, and the diagnoses included in this report represent the interpretation of these pathologists. Histopathology findings and reports were reviewed by Dr. R. L. Schueler (6).

Compilation of individual animal survival, pathology, and summary tables was performed by EG&G Mason Research Institute (7); the statistical analysis was performed by Mr. W. W. Belew (5) and Dr. J. R. Joiner (6) using methods selected for the Carcinogenesis Testing Program by Dr. J. J. Gart (8).

This report was prepared at METREK, a Division of The MITRE Corporation (5) under the direction of the NCI. Those responsible for this report at METREK are the project coordinator, Dr. L. W. Thomas (5), task leader Dr. M. R. Kornreich (5), senior biologist Ms. P. Walker (5), biochemist Mr. S. C. Drill (5), and technical editor Ms. P. A. Miller (5). The final report was reviewed by members of the participating organizations.

The following other scientists at the National Cancer Institute were responsible for evaluating the bioassay experiment, interpreting the results, and reporting the findings: Dr. K. C. Chu (1), Dr. C. Cueto, Jr. (1), Dr. J. F. Douglas (1), Dr. D. G. Goodman (1), Dr. R. A. Griesemer (1), Dr. H. A. Milman (1), Dr. T. W. Orme (1), Dr. R. A. Squire (1,9), Dr. J. M. Ward (1), and Dr. C. E. Whitmire (1).

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

Now with the Naylor Dana Institute for Disease Prevention, American Health Foundation, Hammon House Road, Valhalla, New York.

Mason Research Institute, 57 Union Street, Worcester, Massachusetts.

Midwest Research Institute, 425 Volker Boulevard, Kansas City, Missouri.

^{5.} The MITRE Corporation, METREK Division, 1820 Dolley Madison Boulevard, McLean, Virginia.

Tracor Jitco, Inc., 1776 East Jefferson Street, Rockville, Maryland.

^{7.} EG&G Mason Research Institute, 1530 East Jefferson Street, Rockville, Maryland.

^{8.} Mathematical Statistics and Applied Mathematics Section, Biometry Branch, Field Studies and Statistics Program, Division of Cancer Cause and Prevention, National Cancer Institute, National Institutes of Health, Bethesda, Maryland.

^{9.} Now with the Division of Comparative Medicine, Johns Hopkins University, School of Medicine, Traylor Building, Baltimore, Maryland.

SUMMARY

A bioassay of formulated fenaminosulf for possible carcinogenicity was conducted using Fischer 344 rats and B6C3F1 mice. Fenaminosulf was administered in the feed, at either of two concentrations, to groups of 50 male and 50 female animals of each species. The time-weighted average high and low dietary concentrations of fenaminosulf were, respectively, 0.10 and 0.05 percent for rats, 0.19 and 0.10 percent for male mice, and 0.10 and 0.05 percent for female mice. After a 78-week period of compound administration, observation of the rats continued for up to an additional 31 weeks and observation of the mice continued for up to an additional 19 weeks.

Fifty male mice and 50 rats of each sex were placed on test as controls and fed only the basal diet. For female mice, 50 animals served as controls for the high dose group and 50 as controls for the low dose group.

For female rats there was no significant association between fenaminosulf dosage and mortality and, if the 21 male rats that died in the first two weeks of the bioassay were excluded from consideration, the same was true for male rats. For both male and female mice there was a significant positive association between dosage and mortality. In all groups of both species, however, adequate numbers of animals survived sufficiently long to be at risk from late-developing tumors.

No convincing, statistically significant positive associations were demonstrated between chemical administration and the incidence of neoplasms in either sex of either species. An increased incidence of necrosis and mineralization of the tubular cells of the renal papilla occurred in treated rats and mice. These nonneoplastic lesions were not present in control animals of either species.

Under the conditions of this bioassay, dietary administration of formulated fenaminosulf was not carcinogenic in either Fischer 344 rats or B6C3Fl mice.

·		
·		
	di series di ser	

TABLE OF CONTENTS

			Page
ı.	INTRODUCT	TION	1
II.	MATERIALS	S AND METHODS	3
	A. Chemi	icale	3
		ary Preparation	3
	C. Anima		4
		al Maintenance	4
	E. Selec	tion of Initial Concentrations	8
	F. Exper	rimental Design	9
		ical and Histopathologic Examinations	13
	H. Data	Recording and Statistical Analyses	15
III.	CHRONIC T	TESTING RESULTS: RATS	20
	A. Body	Weights and Clinical Observations	20
	B. Survi		20
	C. Patho		23
		istical Analyses of Results	25
IV.	CHRONIC T	TESTING RESULTS: MICE	33
	A. Body	Weights and Clinical Observations	33
	B. Survi		33
	C. Patho		36
		istical Analyses of Results	37
v.	DISCUSSIO	ON CONTRACTOR OF THE PROPERTY	44
VI.	BIBLIOGRA	АРНУ	47
A PPE N	DIX A	SUMMARY OF THE INCIDENCE OF NEOPLASMS IN	
		RATS TREATED WITH FENAMINOSULF	A-1
APPEN	DIX B	SUMMARY OF THE INCIDENCE OF NEOPLASMS IN	n 1
		MICE TREATED WITH FENAMINOSULF	B-1
APPEN	DIX C	SUMMARY OF THE INCIDENCE OF NONNEOPLASTIC	
		LESIONS IN RATS TREATED WITH FENAMINOSULF	C-1
APPEN	DIX D	SUMMARY OF THE INCIDENCE OF NONNEOPLASTIC	
		LESIONS IN MICE TREATED WITH FENAMINOSULF	D-1

LIST OF ILLUSTRATIONS

Figure Number		Page
1	GROWTH CURVES FOR FENAMINOSULF CHRONIC STUDY RATS	21
2	SURVIVAL COMPARISONS OF FENAMINOSULF CHRONIC STUDY RATS	22
3	GROWTH CURVES FOR FENAMINOSULF CHRONIC STUDY MICE	34
4	SURVIVAL COMPARISONS OF FENAMINOSULF CHRONIC STUDY MICE	35
	LIST OF TABLES	
Table Number		Page
1.	DESIGN SUMMARY FOR FISCHER 344 RATSFENAMI- NOSULF FEEDING EXPERIMENT	10
2	DESIGN SUMMARY FOR B6C3F1 MICEFENAMINOSULF FEEDING EXPERIMENT	11
3	ANALYSES OF THE INCIDENCE OF PRIMARY TUMORS AT SPECIFIC SITES IN MALE RATS TREATED WITH FENAMINOSULF SURVIVING AT LEAST 52 WEEKS	26
4	ANALYSES OF THE INCIDENCE OF PRIMARY TUMORS AT SPECIFIC SITES IN FEMALE RATS TREATED WITH FENAMINOSULF	29
5	ANALYSES OF THE INCIDENCE OF PRIMARY TUMORS AT SPECIFIC SITES IN MALE MICE TREATED WITH FENAMINOSULF SURVIVING AT LEAST 52 WEEKS	38
6	ANALYSES OF THE INCIDENCE OF PRIMARY TUMORS AT SPECIFIC SITES IN FEMALE MICE TREATED WITH FENAMINOSULF SURVIVING AT LEAST 52 WEEKS	40
Al	SUMMARY OF THE INCIDENCE OF NEOPLASMS IN MALE RATS TREATED WITH FENAMINOSULF	A-3

LIST OF TABLES (Concluded)

Table Number		Page
A2	SUMMARY OF THE INCIDENCE OF NEOPLASMS IN FEMALE RATS TREATED WITH FENAMINOSULF	A-7
В1	SUMMARY OF THE INCIDENCE OF NEOPLASMS IN MALE MICE TREATED WITH FENAMINOSULF	в-3
В2	SUMMARY OF THE INCIDENCE OF NEOPLASMS IN FEMALE MICE TREATED WITH FENAMINOSULF	в-6
Cl	SUMMARY OF THE INCIDENCE OF NONNEOPLASTIC LESIONS IN MALE RATS TREATED WITH FENAMI-NOSULF	C-3
C2	SUMMARY OF THE INCIDENCE OF NONNEOPLASTIC LESIONS IN FEMALE RATS TREATED WITH FENA-MINOSULF	C-7
Dl	SUMMARY OF THE INCIDENCE OF NONNEOPLASTIC LESIONS IN MALE MICE TREATED WITH FENAMI-NOSULF	D-3
D2	SUMMARY OF THE INCIDENCE OF NONNEOPLASTIC LESIONS IN FEMALE MICE TREATED WITH FENA-MINOSULF	D-7

I. INTRODUCTION

Fenaminosulf (NCI No. CO3010), an aromatic diazo compound used exclusively as a fungicide, was selected for bioassay by the National Cancer Institute because of conflicting reports concerning its ability to induce hepatomas in rats (Herrmann and DuBois, 1949; Miller et al., 1957). The structural similarity of fenaminosulf to the carcinogenic aminoazo dyes, such as dimethylaminoazobenzene (Terayama, 1967) was an additional factor in its selection for testing.

The Chemical Abstracts Service (CAS) Ninth Collective Index

(1977) name for this compound is sodium 4-(dimethylamino)phenol diazenesulfonate.* It is also known as p-dimethylaminobenzenediazo sodium sulfonate; sodium 4-dimethylaminobenzenediazosulfonate; DAS; Dexon[®]; diazoben; and Bayer 22555.

Fenaminosulf is registered by the U.S. Environmental Protection Agency as a seed-treatment fungicide for beans, beets, corn, cotton, cucumbers, peas, sorghum, spinach, and sugar beets; and as the active ingredient in commercial fungicides for use on avocados, ornamentals, sugarcane, lawns, and turf (Carter et al., 1973; as cited in International Agency for Research on Cancer, 1975).

Specific production figures for fenaminosulf are not available; however, the inclusion of this compound in the 1977 Directory of Chemical Producers, U.S.A. (Stanford Research Institute, 1977) implies an

The CAS registry number is 140-56-7.

annual commercial production in excess of 1000 pounds or \$1000 in value.

The potential for exposure to fenaminosulf is greatest for agricultural workers, although workers in fenaminosulf production facilities may also be exposed. The general population may be exposed via dermal contact to fenaminosulf on packaged seeds, in lawn and garden fungicides, and to residues in soils and turf. Ingestion is unlikely since fenaminosulf is apparently not sprayed directly on food crops. Persistence may not be a major problem because fenaminosulf is labile in the environment (Farm Chemicals Handbook, 1976).

II. MATERIALS AND METHODS

A. Chemicals

A fenaminosulf formulation manufactured by Chemagro Corporation (Kansas City, Missouri) under the trade name Dexon was purchased by the NCI for Mason Research Institute. Chemical analysis was performed by Midwest Research Institute, Kansas City, Missouri. The composition of this formulation was estimated by the manufacturer to contain 35 percent fenaminosulf, 41 percent Kaolin clay, 12 percent synthetic silica, 5 percent sodium naphthalene sulfonate, and 6 percent sodium ligno-sulfate.

The results of elemental analysis were consistent with those which would be expected from this formulation. Direct current polarography indicated that the formulation was 30 to 35 percent pure feraminosulf.

Throughout this report the term fenaminosulf is used to represent this mixture.

B. Dietary Preparation

The basal laboratory diet for both treated and control animals consisted of Wayne Lab-Blox (Allied Mills, Inc., Chicago, Illinois). Fenaminosulf was administered to the treated animals as a component of the diet. The chemical was hand-mixed with an aliquot of the ground feed until visual uniformity was attained. This premix was then placed into a 6 kg capacity Patterson-Kelley twin-shell stainless steel V-blender along with the remainder of the feed and blended

for 20 minutes. Prepared diets were placed in double plastic bags and stored in the dark at 4°C. Mixtures were prepared weekly and stored for not longer than 2 weeks.

C. Animals

Two animal species, rats and mice, were used in the carcinogenicity bioassay. Fischer 344 rats and B6C3F1 mice were obtained through contracts of the Division of Cancer Treatment, National Cancer Institute. The animals were received in several separate shipments from Charles River Breeding Laboratories, Inc., Wilmington, Massachusetts. All male mice to be assigned to treated groups and the female mice to be assigned to the high dose group were received approximately 5 weeks before the mice to be used as controls for these groups. Low dose female mice were received 3 months after the first shipment and the controls for this group were received 1 week later. Rats to be utilized for the high dose and control groups were received 12 weeks before the low dose rats.

Upon arrival, a sample of animals was examined for parasites and other signs of disease. The remaining animals were quarantined by species for 2 weeks prior to initiation of the test. Animals were assigned to groups and distributed among cages so that the 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. Incoming air was filtered through Tri-Dek®

15/40 denier Dacron^(R) filters (Tri-Dim Filter Corp., Hawthorne, New Jersey) 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 16 months of study, high dose and control rats were housed in galvanized-steel wire-mesh cages suspended above newspapers. Low dose rats were housed in galvanized wire-mesh cages during quarantine and for the first 14 months of study. Newspapers under cages were replaced daily and cages and racks washed weekly. For the remainder of the study, rats were housed in suspended polycarbonate cages equipped with disposable nonwoven fiber filter sheets. Clean bedding and cages were provided twice weekly. Corncob bedding (SAN-I-CEL®, Paxton Processing Company, Paxton, Illinois) was used for the first 7 months that high dose and control rats were housed in polycarbonate cages and for the first 6 months that low dose rats were housed in polycarbonate cages. For the remainder of the study Aspen hardwood chip bedding (American Excelsior Company, Baltimore, Maryland) was provided in rat cages. Stainless steel cage racks were cleaned once every two weeks, and disposable filters were replaced at that time.

Mice were housed by sex in polycarbonate shoe box type cages fitted with perforated stainless steel lids (Lab Products, Inc., Garfield, New Jersey) and nonwoven fiber filter bonnets. All mice were housed ten per cage for the first part of the study. Low dose

treated and control females, treated males and high dose females, and control males and high dose control females were reduced to five per cage after 11, 14, and 13 months, respectively. Cages, lids, filters, and bedding were provided three times per week when the number of mice per cage was ten and twice per week when cage populations were five. Ab-sorb-dri® hardwood chip bedding (Wilner Wood Products Company, Norway, Maine) was used for 2 months (control males and high dose control females) and 3 months (treated males and high dose females). Subsequently, SAN-I-CEL® was used for the next 12 months for these groups and for the first 12 months for low dose treated and control females. A second corncob bedding (Bed-o-Cobs®, The Andersons Cob Division, Maumee, Ohio) was used for the next 8 months. Aspen bedding was then provided for the remainder of the study. Reusable filter bonnets and pipe racks were sanitized every 2 weeks throughout the study.

Water was available <u>ad libitum</u> for both species from 250 ml water bottles equipped with rubber stoppers and stainless steel sipper tubes. Bottles were replaced twice weekly and, for rats only, refilled as needed between changes.

Wayne Lab-Blox[®] was supplied <u>ad libitum</u> throughout the entire test. Pelleted Wayne Lab-Blox[®] was supplied to treated and control male mice and high dose treated and control female mice during the final observation period. During the quarantine and dosing periods, all animals received Wayne Lab-Blox[®] meal. Alpine[®] aluminum feed

cups (Curtin Matheson Scientific, Inc., Woburn, Massachusetts)

containing stainless steel baffles were used to distribute powdered

feed until the last 5 months of the study for rats, all control male

mice, and high dose control female mice. This same apparatus was

used until the last 4 months of the study for treated male mice and

high dose female mice, and until the last 7 months of the study for

low dose treated and control female mice. After these periods stain
less steel gangstyle food hoppers (Scientific Cages, Inc., Bryan,

Texas) were utilized.

During the final observation period, treated and control male mice and high dose female mice were fed pellets from a wire bar hopper incorporated into the cage lid, low dose treated and control females were fed meal from gangstyle hoppers, and rats were fed pellets on the cage floor. Food hoppers were changed on the same schedule as were cages. Food was replenished daily in Alpine feed cups.

Treated and control rats were housed with rats being intubated with * m-cresidine (102-50-1); and with other rats receiving diets containing 2,5-dithiobiurea (142-46-1) and cupferron (135-20-6).

All treated male mice, high dose treated female mice, and low dose control female mice were housed with other mice receiving diets containing 2-methyl-1-nitroanthraquinone (129-15-7); acetylamino-fluorene (53-96-3); p-cresidine (120-71-8); and 4-chloro-m-phenylene-diamine (5131-60-2). Low dose treated female mice, high dose control

CAS registry numbers are given in parentheses.

male mice, low dose control male mice, and high dose control female mice were housed with other mice receiving diets containing cupferron (135-20-6); 2,5-dithiobiurea (142-46-1); 4-chloro-o-phenylenediamine (95-83-0); o-anisidine hydrochloride (134-29-0); and p-anisidine hydrochloride (20265-97-8).

E. Selection of Initial Concentrations

In order to establish the maximum tolerated concentrations of fenaminosulf for administration to treated animals in the chronic studies, subchronic toxicity tests were conducted with both rats and mice. Animals of each species were distributed among five groups, each consisting of five males and five females. Fenaminosulf was incorporated into the basal laboratory diet and supplied ad libitum to four of the five rat groups and four of the five mouse groups in concentrations of 0.008, 0.015, 0.030, and 0.060 percent. The fifth group of each species served as a control group, receiving only the basal laboratory diet. The dosed dietary preparations were administered for a period of 7 weeks, followed by a 1-week observation period during which all animals were fed the untreated basal diet.

The highest concentration causing no deaths, no compound-related gross abnormalities, and no mean body weight depression in excess of 30 percent relative to controls was selected as the high concentration utilized for the rat and mouse chronic bioassays.

No deaths or gross abnormalities were observed in male or female rats treated with fenaminosulf. Mean body weight depression was

approximately 28 and 8 percent, respectively, in male and female rats receiving a dietary concentration of 0.060 percent. The initial high dose selected for use in the rat chronic bioassay was 0.10 percent for both sexes.

One of the five male and one of the five female mice receiving dietary concentrations of 0.060 percent fenaminosulf died. No mean body weight depression was observed among male mice. There was, however, slight spleen enlargement in all males treated with 0.060 percent. Mean body weight depression was approximately 14 percent in female mice treated with 0.060 percent. The initial high doses selected for use in the mouse chronic bioassay were 0.20 and 0.10 percent for males and females, respectively.

F. Experimental Design

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

The rat groups receiving an initial concentration of 0.20 percent had a lower time-weighted average dose at the end of the study, than the rat groups receiving an initial concentration of 0.10 percent, and thus will be referred to as the low dose groups throughout this report, while the latter groups will be referred to as the high dose groups. At the time of inclusion in the study, high dose and control male and female rats were approximately 6 weeks old. Low

TABLE 1

DESIGN SUMMARY FOR FISCHER 344 RATS FENAMINOSULF FEEDING EXPERIMENT

	INITIAL GROUP SIZE	FENAMINOSULF CONCENTRATION	TREATED	ION PERIOD UNTREATED (WEEKS)	TIME-WEIGHTED AVERAGE CONCENTRATION
MALE					
CONTROL	50	0	0	110	0
LOW DOSE ^C	50	0.20 0.05 0	1 77	27	0.05
HIGH DOSE ^C	50	0.10 0.05 0.10 0	1 6 71	31	0.10
FEMALE					
CONTROL	50	0	0	110	0
LOW DOSE ^C	50	0.20 0.05 0	1 77	27	0.05
HIGH DOSE ^C	50	0.10 0.05 0.10 0	1 6 71	31	0.10

a Concentrations given in percentages in feed.

 $^{^{}b}_{\text{Time-weighted average concentration}} = \frac{\Sigma(\text{concentration X weeks received})}{\Sigma(\text{weeks receiving chemical})}$

 $^{^{\}mathrm{c}}$ Group designations were determined by time-weighted average concentrations.

TABLE 2

DESIGN SUMMARY FOR B6C3F1 MICE FENAMINOSULF FEEDING EXPERIMENT

	INITIAL GROUP SIZE	FENAMINOSULF CONCENTRATION ^a	OBSERVAT TREATED (WEEKS)	ION PERIOD UNTREATED (WEEKS)	TIME-WEIGHTED AVERAGE CONCENTRATION
MALE					
CONTROL	50	0	0	97	0
LOW DOSE	50	0.10 0.05 0.10	1 6 71		0.10
		0		17	
HIGH DOSE	50	0.20 0.10 0.20	1 6 71		0.19
		0		17	
FEMALE					
LOW DOSE CONTROL	50	0	0	97	0
HIGH DOSE CONTRO	L 50	0	0	98	0
LOW DOSE ^C	50	0.20 0.05	1 77		0.05
		0		19	
HIGH DOSE ^C	49	0.10 0.05 0.10 0	1 6 71	17	0.10
		•			

a Concentrations given in percentages in feed.

 $^{^{}b}$ Time-weighted average concentration = $\frac{\Sigma(\text{concentration X weeks received})}{\Sigma(\text{weeks receiving chemical})}$

 $^{^{\}mathrm{c}}$ Group designations were determined by time-weighted average concentrations.

dose male and female rats were also approximately 6 weeks old; however, they were started on test 12 weeks later than the other groups.

The high and low concentrations utilized for both sexes for the first
week were 0.20 and 0.10 percent. The dietary concentrations of fenaminosulf for all treated rats were reduced to 0.05 percent in week 2

and in week 8 the concentration administered to the high dose male
and female rats was increased to 0.10 percent. These concentrations
were maintained for the remainder of the fenaminosulf administration
period. Subsequent to chemical exposure was an untreated observation
period of up to 31 weeks.

As the female mouse group receiving an initial concentration of 0.20 percent had the lower time-weighted average dose at the end of the bioassay, this female mouse group will be referred as the low dose group throughout this report; the female mouse group receiving an initial concentration of 0.10 percent, on the other hand, will be referred to as the high dose group. For males the initial concentrations utilized were 0.20 and 0.10 percent and the males receiving the former concentration will be referred to as the high dose group while those receiving the latter will be referred to as the low dose group. At the time of inclusion in the study all mice were approximately 6 to 7 weeks old. High and low dose males and high dose females were approximately 5 weeks older than their controls. The low dose females were 12 weeks younger than the other treated mice and the low dose control females were 1 week younger than the low dose treated

females. The high and low dose male mice received initial dietary concentrations of 0.20 and 0.10 percent, respectively. After 1 week the concentrations were decreased to 0.10 and 0.05 percent for high and low dose male mice, respectively. Six weeks later concentrations were increased to original levels and these were maintained for the remainder of the fenaminosulf administration period. Subsequently, the male mice were observed for an untreated period of up to 17 weeks. The high and low dose females received initial dietary concentrations of 0.10 and 0.20 percent, respectively. After 1 week the concentration administered to both groups was decreased to 0.05 percent. Six weeks later the concentration administered to the high dose groups was increased to 0.10 percent. These concentrations were maintained for the remainder of the fenaminosulf administration period. An untreated observation period of up to 19 weeks followed.

G. Clinical and Histopathologic Examinations

Animals were weighed immediately prior to initiation of the experiment. Body weights were recorded twice weekly for the first 12 weeks of the study and at monthly intervals thereafter. From the first day, all animals were inspected twice daily for mortality. 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, and gross lesions taken from sacrificed animals and, whenever possible, from animals found dead.

Tissues 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.

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 (mice), pancreas, esophagus, stomach, small intestine, large intestine, kidney, urinary bladder, pituitary, adrenal, thyroid, parathyroid, testis, prostate, brain, uterus, mammary gland, and ovary.

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) when testing two groups for equality and used Tarone's (1975) extensions of Cox's methods when 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.

The Cochran-Armitage test for linear trend in proportions, with continuity correction (Armitage, 1971, pp. 362-365), was also used when appropriate. Under the assumption of a linear trend, this test determined if the slope of the dose-response curve is different from zero at the one-tailed 0.05 level of significance. Unless otherwise noted, the direction of the significant trend was a positive dose relationship. This method also provides a two-tailed test of departure from linear trend.

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

No distinct mean body weight depression was associated with compound administration in either males or females (Figure 1). Although the low dose male groups experienced high early mortality, the mean body weight for this group was consistently higher than that for the other male groups.

Two high dose females developed subcutaneous masses, one high dose female had a cutaneous growth, and one control male developed a crusted cutaneous lesion. One high dose female and one low dose male exhibited discoloration of the eye and there was brown exudate from the eyes of one low dose female.

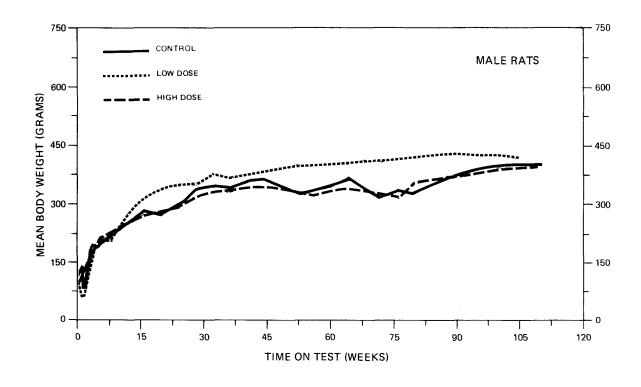
B. Survival

The estimated probabilities of survival for male and female rats in the control and fenaminosulf-dosed groups are shown in Figure 2.

Twenty-one of the original high dose male rats died in weeks l or 2 from toxic effects--at which point the dosage was lowered and the original high dose group was renamed as the low dose group.

These 21 animals were excluded for test purposes; the Tarone test did not indicate a positive association between dosage and mortality.

Five animals were sacrificed from the high dose treated group and five from the control group in week 78. Adequate numbers of males were at risk from late-developing tumors as 78 percent (39/50)



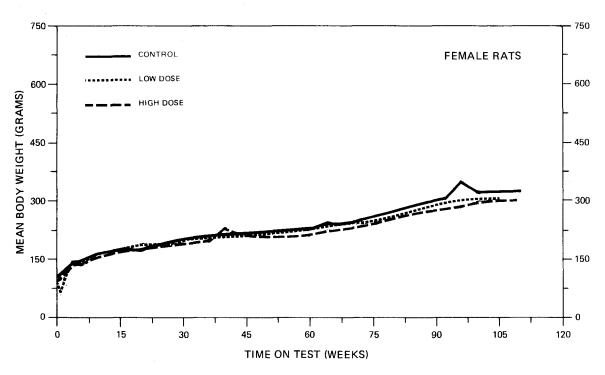


FIGURE 1
GROWTH CURVES FOR FENAMINOSULF CHRONIC STUDY RATS

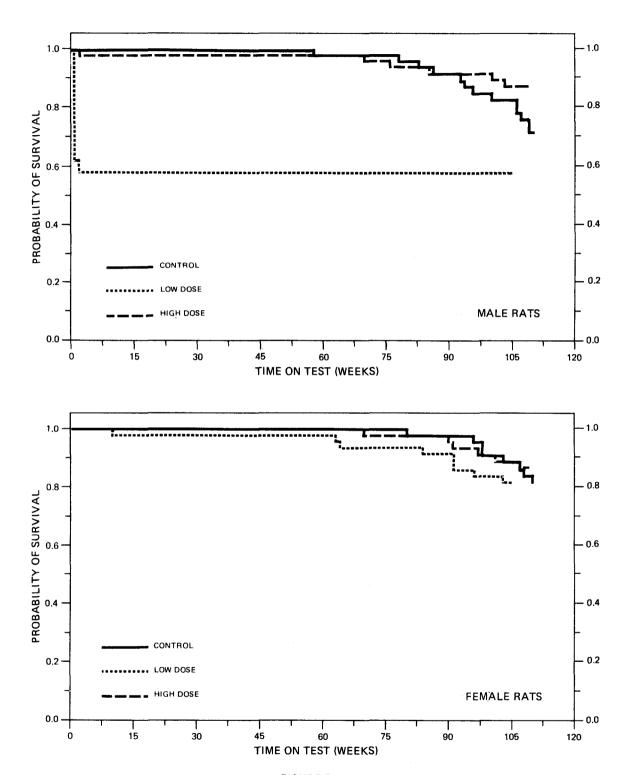


FIGURE 2
SURVIVAL COMPARISONS OF FENAMINOSULF CHRONIC STUDY RATS

high dose, 58 percent (29/50) low dose, and 64 percent (32/50) control rats survived on test until the termination of the study.

For female rats, the Tarone test for association between dosage and mortality was not significant. Five animals were sacrificed from the high dose and five from the control group in week 78. With 78 percent (39/50) high dose, 82 percent (41/50) low dose and 72 percent (36/50) control rats alive on test until the end of the study, adequate numbers of females were at risk from late-developing tumors.

C. Pathology

Histopathologic findings on neoplasms in rats are summarized in Appendix A (Tables Al and A2); findings on nonneoplastic lesions are summarized in Appendix C (Tables C1 and C2).

A variety of neoplasms was observed with approximately equal frequency in the treated and control rats. The most frequently observed neoplasms in the male rats were interstitial-cell adenomas of the testis. In the female rats, the most commonly observed neoplasms were adenomas of the pituitary gland, fibroadenomas of the mammary gland, and endometrial stromal polyps of the uterus. A high spontaneous incidence of these tumors is characteristic of aged Fischer 344 rats. A neoplasm which was observed in the treated female rats was endometrial stromal sarcoma. This neoplasm was seen in 3/48 (6 percent) low dose females and 1/47 (2 percent) high dose females but in none of the control females.

There were instances in this study, as noted in the summary tables, where neoplasms occurred only in treated animals, or with increased frequency when compared to the control animals. The nature and incidence of these lesions were similar to those known to occur spontaneously in aged Fischer 344 rats.

A high incidence of necrosis and mineralization of the tubules of the renal papilla was present in the treated rats. These lesions were not observed in control rats. Mineralization of tubules was present in 21/41 (51 percent) low dose and 32/48 (67 percent) high dose male rats and 34/48 (71 percent) low dose and 12/49 (24 percent) high dose female rats. The severity of the papillary necrosis and mineralization was quite variable and was superimposed on chronic renal disease (nephrosis, nephropathy) commonly seen in aged Fischer 344 rats. Several other nonneoplastic lesions commonly seen in aged Fischer 344 rats were observed with approximately equal frequency in the treated and control animals.

Under the conditions of this study, the administration of fenaminosulf did not appear to induce neoplastic lesions in Fischer 344 rats. Although endometrial stromal sarcomas were present only in treated female rats, the low incidence observed in this study does not provide conclusive evidence that these neoplasms were induced by the compound. The concentrations of the compound administered did have a toxic effect on the kidney, producing tubular necrosis and mineralization of the renal papilla.

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 is included for every type of malignant tumor in either sex where at least two such tumors were observed in at least one of the control or fenaminosulf-dosed groups and where such tumors were observed in at least 5 percent of the group. Because of high early mortality noted in rats of both sexes, the analyses for males were based on those rats surviving at least 52 weeks.

In male rats the Fisher exact test indicated a significantly (P = 0.021) higher incidence of interstitial-cell tumors of the testis in the low dose treated group than in the control. The high dose comparison and the Cochran-Armitage test, however, were not significant.

For both male and female rats the possibility of a negative association between chemical administration and the incidence of leukemia or of malignant lymphomas was observed. For females, however, none of the Fisher exact tests were significant under the Bonferroni criterion.

No other statistical tests for any site indicated a significant association between compound administration and incidence. Based upon these results there was no convincing statistical evidence of the carcinogenicity of fenaminosulf in rats.

ANALYSES OF THE INCIDENCE OF PRIMARY TUMORS AT SPECIFIC SITES IN MALE RATS TREATED WITH FENAMINOSULF SURVIVING AT LEAST 52 WEEKS^a

TOPOGRAPHY:MORPHOLOGY	CONTROL	LOW DOSE	HIGH DOSE
Skin and Subcutaneous Tissue: Fibromab	2/50(0.04)	2/29(0.07)	3/49(0.06)
P Values ^c	N.S.	N.S.	N.S.
Relative Risk (Control) ^d Lower Limit Upper Limit		1.724 0.130 22.468	1.531 0.183 17.671
Weeks to First Observed Tumor	86	105	108
Hematopoietic System: Leukemia or Malignant Lymphoma ^b	10/50(0.20)	1/29(0.03)	1/49(0.02)
P Values ^c	P = 0.002(N)	P = 0.037(N)	P = 0.004(N)
Relative Risk (Control) ^d Lower Limit Upper Limit		0.172 0.004 1.109	0.102 0.002 0.675
Weeks to First Observed Tumor	78	105	108
Pituitary: Adenoma NOS, Chromophobe Adenoma, or Acidophil Adenoma ^b	7/45(0.16)	7/26(0.27)	9/42(0.21)
P Values ^C	N.S.	N.S.	N.S.
Relative Risk (Control) ^d Lower Limit Upper Limit		1.731 0.577 5.029	1.378 0.502 3.955
Weeks to First Observed Tumor	78	105	78

6

27

TABLE 3 (CONTINUED)

TOPOGRAPHY: MORPHOLOGY	CONTROL	LOW DOSE	HIGH DOSE
Adrenal: Pheochromocytomab	3/50(0.06)	6/29(0.21)	3/47(0.06)
P Values ^C	N.S.	N.S.	N.S.
Relative Risk (Control) ^d Lower Limit Upper Limit	 	3.448 0.796 19.588	1.064 0.149 7.571
Weeks to First Observed Tumor	78	105	103
Thyroid: C-Cell Carcinoma ^b	2/37(0.05)	1/26(0.04)	2/44(0.05)
P Values ^C	N.S.	N.S.	N.S.
Relative Risk (Control) ^d Lower Limit Upper Limit	 	0.712 0.012 12.845	0.841 0.064 11.135
Weeks to First Observed Tumor	109	105	108
Thyroid: C-Cell Carcinoma or C-Cell Adenoma ^b	3/37(0.08)	5/26(0.19)	3/44(0.07)
P Values ^C	N.S.	N.S.	N.S.
Relative Risk (Control) ^d Lower Limit Upper Limit	 	2.372 0.505 13.893	0.841 0.120 5.944
Weeks to First Observed Tumor	109	105	108

TABLE 3 (CONCLUDED)

TOPOGRAPHY: MORPHOLOGY	CONTROL	LOW DOSE	HIGH DOSE
Pancreatic Islets: Islet-Cell Carcinoma or Islet-Cell Adenoma ^b	1/47(0.22)	3/29(0.10)	2/47(0.04)
P Values ^C	N.S.	N.S.	N.S.
Relative Risk (Control) ^d Lower Limit Upper Limit	 	4.862 0.411 245.698	2.000 0.108 115.483
Weeks to First Observed Tumor	110	105	108
Testis: Interstitial-Cell Tumor ^b	42/50(0.84)	29/29(1.00)	40/47(0.85)
P Values ^C	N.S.	P = 0.021	N.S.
Departure from Linear Trend ^e	P = 0.025		
Relative Risk (Control) ^d Lower Limit Upper Limit		1.190 1.007 1.190	1.013 0.842 1.208
Weeks to First Observed Tumor	78	105	100

Treated groups received time-weighted average doses of 0.05 or 0.10 percent in feed.

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

The probability level for the Cochran-Armitage test is given beneath the incidence of tumors in the control group when P < 0.05; otherwise, not significant (N.S.) is indicated. 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. For both Cochran-Armitage and Fisher exact tests a negative designation (N) indicates a lower incidence in the treated group(s) than in the control group.

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

^eThe probability level of the test for departure from linear trend is given beneath the control group when P < 0.05.

TABLE 4

ANALYSES OF THE INCIDENCE OF PRIMARY TUMORS AT SPECIFIC SITES IN FEMALE RATS TREATED WITH FENAMINOSULF^a

		LOW	HIGH
TOPOGRAPHY: MORPHOLOGY	CONTROL	DOSE	DOSE
Hematopoietic System: Leukemia or Malignant Lymphoma ^b	7/49(0.14)	1/48(0.02)	1/50(0.02)
P Values ^C	P = 0.010(N)	P = 0.032(N)	P = 0.028(N)
Relative Risk (Control) ^d Lower Limit Upper Limit		0.146 0.003 1.072	0.140 0.003 1.030
Weeks to First Observed Tumor	96	91	109
Pituitary: Adenoma NOS, Chromophobe Adenoma, or Acidophil Adenoma ^b	17/39(0.44)	18/40(0.45)	17/41(0.41)
P Values ^C	N.S.	N.S.	N.S.
Relative Risk (Control) ^d Lower Limit Upper Limit	 	1.032 0.598 1.791	0.951 0.542 1.678
Weeks to First Observed Tumor	78	84	101
Adrenal: Pheochromocytoma ^b	3/49(0.06)	2/46(0.04)	2/46(0.04)
P Values ^c	N.S.	N.S.	N.S.
Relative Risk (Control) ^d Lower Limit		0.710 0.062 5.914	0.710 0.062 5.914
Upper Limit Weeks to First Observed Tumor	110	63	70

TOPOGRAPHY: MORPHOLOGY	CONTROL	LOW DOSE	HIGH DOSE
Thyroid: C-Cell Carcinomab	2/45(0.04)	2/46(0.04)	3/49(0.06)
P Values ^C	N.S.	N.S.	N.S.
Relative Risk (Control) ^d Lower Limit Upper Limit		0.978 0.074 12.993	1.378 0.166 15.892
Weeks to First Observed Tumor	110	105	109
Thyroid: C-Cell Carcinoma or C-Cell Adenoma ^b	2/45(0.04)	2/46(0.04)	7/49(0.14)
P Values ^c	N.S.	N.S.	N.S.
Relative Risk (Control) ^d Lower Limit Upper Limit	 	0.978 0.074 12.993	3.214 0.654 30.445
Weeks to First Observed Tumor	110	105	91
Mammary Gland: Fibroadenoma b	12/49(0.24)	8/48(0.17)	8/50(0.16)
P Values ^C	N.S.	N.S.	N.S.
Relative Risk (Control) ^d Lower Limit Upper Limit		0.681 0.265 1.642	0.653 0.254 1.581
Weeks to First Observed Tumor	103	105	70

TABLE 4 (CONCLUDED)

TOPOGRAPHY:MORPHOLOGY	CONTROL	LOW DOSE	HIGH DOSE
Uterus: Endometrial Stromal Polyp	5/46(0.11)	7/48(0.15)	4/47(0.09)
P Values ^C	N.S.	N.S.	N.S.
Relative Risk (Control) ^d Lower Limit Upper Limit	 	1.342 0.396 4.998	0.783 0.165 3.409
Weeks to First Observed Tumor	110	105	109
Jterus: Endometrial Stromal Sarcomab	0/46(0.00)	3/48(0.06)	1/47(0.02)
P Values ^C	N.S.	N.S.	N.S.
Relative Risk (Control) ^d Lower Limit Upper Limit	 	Infinite 0.578 Infinite	Infinite 0.053 Infinite
Weeks to First Observed Tumor		91	91

^aTreated groups received time-weighted average doses of 0.05 or 0.10 percent in feed.

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

The probability level for the Cochran-Armitage test is given beneath the incidence of tumors in the control group when P < 0.05; otherwise, not significant (N.S.) is indicated. 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. For both Cochran-Armitage and Fisher exact tests a negative designation (N) indicates a lower incidence in the treated group(s) than in the control group.

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

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 3 and 4, 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 rats by fenaminosulf that could not be established under the conditions of this test.

IV. CHRONIC TESTING RESULTS: MICE

A. Body Weights and Clinical Observations

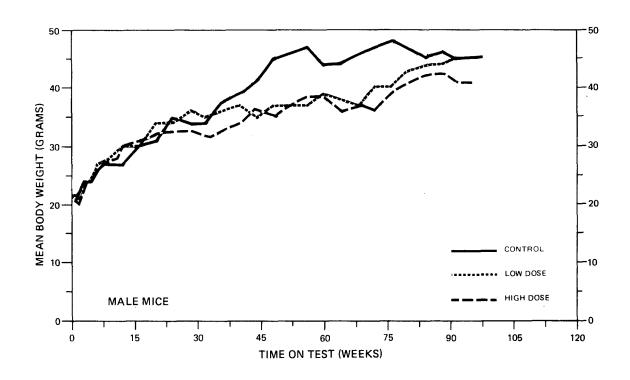
There was no significant mean body weight depression in treated male mice when compared to controls until approximately week 32, at which time the mean body weight of the treated male mice was consistently lower than that of control mice (Figure 3). Slight mean body weight depression was noted when low dose female mice were compared to their controls. Fluctuations in the growth curve may be due to mortality; as the size of the group diminishes, the mean body weight may be subject to wide variations.

No clinical abnormalities were observed in treated or control mice of either sex.

B. Survival

The estimated probabilities of survival for male and female mice in the control and fenaminosulf-dosed groups are shown in Figure 4.

Nineteen of the 50 high dose male mice died in weeks 1 or 2 from toxic reactions. After excluding these mice, the Tarone test still indicated a significant positive association between dose and mortality. Twelve high dose male mice died in weeks 42 and 43, nine of which were autolyzed. With only 13 of the high dose male mice surviving on test beyond week 52, five of which were sacrificed in week 78, inadequate numbers of high dose male mice were at risk from late-developing tumors. Five control male mice were sacrificed in week 79. Survival was adequate in the low dose and control groups



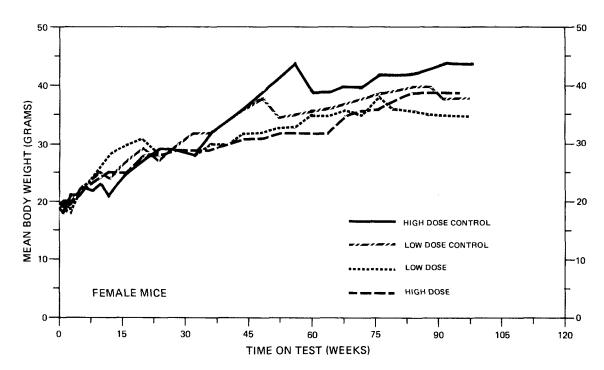


FIGURE 3
GROWTH CURVES FOR FENAMINOSULF CHRONIC STUDY MICE

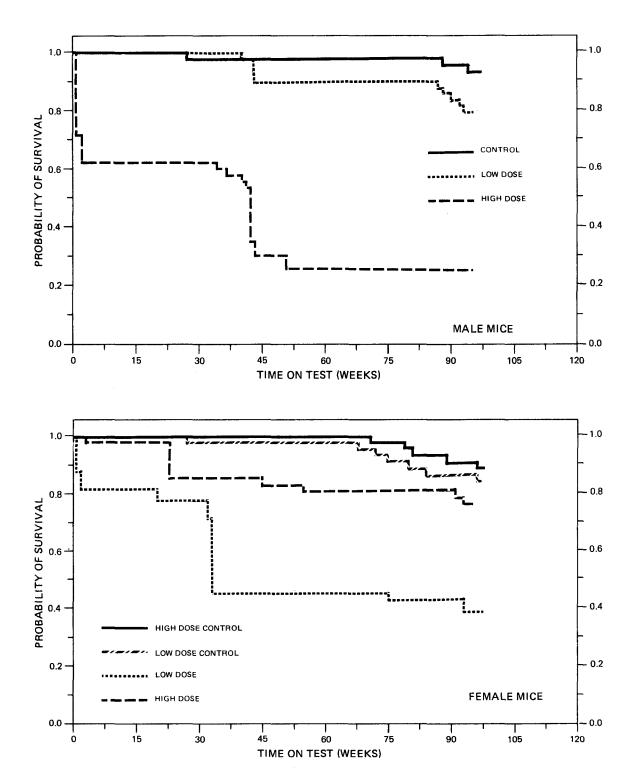


FIGURE 4
SURVIVAL COMPARISONS OF FENAMINOSULF CHRONIC STUDY MICE

with 78 percent (39/50) of the low dose and 84 percent (42/50) of the controls surviving on test until the end of the study.

For female mice the Cox tests also showed significant positive differences between each of the dosed groups and its respective control; for the low dose those females that died in weeks 1 and 2 were excluded for this Cox test. The departure from linear trend was also significant, primarily because survival was poorer in the low dose group than in the high dose group. Five females from the high dose treated group, five from the low dose control, and five from the high dose control group were sacrificed in week 79. Adequate numbers of female mice were at risk from late-developing tumors with 64 percent (32/50) of the high dose, 72 percent (36/50) of the low dose control, and 80 percent (40/50) of the high dose control mice alive on test until the end of the study. In the low dose group, 18/21 of those mice surviving at least 52 weeks were alive on test until the end of the study. Since no tumors were observed in females that died before week 78, there was no evidence that early mortality was tumorrelated.

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).

A variety of neoplasms occurred with approximately equal frequency in the treated and control mice. Occasionally, as shown in

the summary tables, neoplasms occurred only in the treated mice or with an increased frequency when compared with the control animals. The nature and incidence of these neoplasms were similar to spontaneously occurring neoplasms in B6C3F1 mice. An unusual tumor was a teratoma of the ovary in 1/37 (3 percent) of the high dose mice.

The treated mice had a variety of nonneoplastic lesions. The incidence and severity of the lesions were approximately equal in the treated and control groups, with the exception of 13/16 low dose female mice that died in weeks 32 and 33 having either kidney nephropathy, kidney tubule mineralization, or both.

The results of this microscopic examination indicate that the administration of fenaminosulf was not carcinogenic to B6C3Fl mice.

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 is included for every type of malignant tumor in either sex where at least two such tumors were observed in at least one of the control or fenaminosulf-dosed groups and where such tumors were observed in at least 5 percent of the group. Because of high early mortality noted in mice of both sexes, these analyses were based on those mice surviving at least 52 weeks. No Cochran-Armitage tests were used in the analyses of the female mice because the high dose group and its control were started at a different time from the low dose group and its control.

TABLE 5

ANALYSES OF THE INCIDENCE OF PRIMARY TUMORS AT SPECIFIC SITES IN MALE MICE TREATED WITH FENAMINOSULF SURVIVING AT LEAST 52 WEEKS^a

TOPOGRAPHY: MORPHOLOGY	CONTROL	LOW DOSE	HIGH DOSE
Lung: Alveolar/Bronchiolar Carcinomab	3/47(0.06)	3/42(0.07)	0/13(0.00)
P Values ^C	N.S.	N.S.	N.S.
Relative Risk (Control) ^d Lower Limit Upper Limit		1.119 0.158 7.921	0.000 0.000 5.581
Weeks to First Observed Tumor	97	90	
Lung: Alveolar/Bronchiolar Carcinoma or Alveolar/Bronchiolar Adenoma ^b	7/47(0.15)	7/42(0.17)	1/13(0.08)
P Values ^C	N.S.	N.S.	N.S.
Relative Risk (Control) ^d Lower Limit Upper Limit		1.119 0.365 3.421	0.516 0.012 3.391
Weeks to First Observed Tumor	97	90	95
Hematopoietic System: Leukemia or Malignant Lymphoma ^b	1/49(0.02)	7/43(0.16)	0/13(0.00)
P Values ^C	N.S.	P = 0.019	N.S.
Departure from Linea r Trend ^e	P = 0.009		nine days
Relative Risk (Control) ^d Lower Limit Upper Limit		7.977 1.088 349.807	0.000 0.000 66.474
Weeks to First Observed Tumor	97	87	

TABLE 5 (CONCLUDED)

TOPOGRAPHY: MORPHOLOGY	CONTROL	LOW DOSE	HIGH DOSE
Liver: Hepatocellular Carcinoma ^b	15/49(0.31)	7/43(0.16)	2/13(0.15)
P Values ^C	N.S.	N.S.	N.S.
Relative Risk (Control) ^d Lower Limit Upper Limit		0.532 0.202 1.243	0.503 0.060 1.752
Weeks to First Observed Tumor	94	88	95
Liver: Hepatocellular Carcinoma or Hepatocellular Adenoma ^b	15/49(0.31)	9/43(0.21)	2/13(0.15)
P Values ^c	N.S.	N.S.	N.S.
Relative Risk (Control) ^d Lower Limit Upper Limit		0.684 0.294 1.485	0.503 0.060 1.752
Weeks to First Observed Tumor	94	88	95

Treated groups received time-weighted doses of 0.10 or 0.19 percent in feed.

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

The probability level for the Cochran-Armitage test is given beneath the incidence of tumors in the control group when P < 0.05; otherwise, not significant (N.S.) is indicated. 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. For both Cochran-Armitage and Fisher exact tests a negative designation (N) indicates a lower incidence in the treated group(s) than in the control group.

The 95% confidence interval on the relative risk of the treated group to the control group.

 $_{\rm The}$ probability level of the test for departure from linear trend is given beneath the control group when P < 0.05.

TABLE 6

ANALYSES OF THE INCIDENCE OF PRIMARY TUMORS AT SPECIFIC SITES IN FEMALE MICE TREATED WITH FENAMINOSULF SURVIVING AT LEAST 52 WEEKS^a

TOPOGRAPHY: MORPHOLOGY	LOW DOSE CONTROL	HIGH DOSE CONTROL	LOW DOSE	HIGH DOSE
Lung: Alveolar/Bronchiolar Carcinoma	3/45(0.07)	3/50(0.06)	0/20(0.00)	1/39(0.03)
P Values ^C			N.S.	N.S.
Relative Risk (Control) ^d Lower Limit Upper Limit			0.000 0.000 3.598	0.427 0.008 5.060
Weeks to First Observed Tumor	97	79		93
Lung: Alveolar/Bronchiolar Carcinoma or Alveolar/Bronchiolar Adenoma ^b	4/45(0.09)	4/50(0.08)	3/20(0.15)	4/39(0.10)
P Values ^c			N.S.	N.S.
Relative Risk (Control) ^d Lower Limit Upper Limit		 	1.687 0.265 8.837	1.282 0.253 6.438
Weeks to First Observed Tumor	97	79	93	93
Hematopoietic System: Leukemia or Malignant Lymphoma ^b	6/46(0.13)	6/50(0.12)	3/20(0.15)	5/39(0.13)
P Values ^c			N.S.	N.S.
Relative Risk (Control) ^d Lower Limit Upper Limit			1.150 0.200 4.701	1.068 0.277 3.872
Weeks to First Observed Tumor	68	98	93	91

TOPOGRAPHY: MORPHOLOGY	LOW DOSE CONTROL	HIGH DOSE CONTROL	LOW DOSE	HIGH DOSE
Liver: Hepatocellular Carcinoma	0/45(0.00)	2/49(0.04)	2/19(0.11)	3/37(0.08)
P Values ^C	table dead district	-	N.S.	N.S.
Relative Risk (Control) d			Infinite	1.986
Lower Limit Upper Limit			0.706 Infinite	0.239 22.690
Weeks to First Observed Tumor		98	97	78
Liver: Hepatocellular Carcinoma or	0//5/0 00	2//0/0 0/>	//10/0 01)	2/27/0 00
Hepatocellular Adenomab	0/45(0.00)	2/49(0.04)	4/19(0.21)	3/37(0.08)
P Values ^C	states along alone		P = 0.006	N.S.
Relative Risk (Control) ^d	error fight time	date and date	Infinite	1.986
Lower Limit			2.228	0.239
Upper Limit	desire ditab state		Infinite	22.690
Weeks to First Observed Tumor	ganiş Ağğın Sasır	98	93	78
Pituitary: Adenoma NOS ^b	1/32(0.03)	0/42(0.00)	3/16(0.19)	3/32(0.09)
P Values ^c			N.S.	N.S.
Relative Risk (Control) ^d			6.000	Infinite
Lower Limit	Mar dip. Mills		0.523	0.796
Upper Limit			291.426	Infinite
Weeks to First Observed Tumor	80		97	95

TABLE 6 (CONCLUDED)

a Treated groups received time-weighted average doses of 0.05 or 0.10 percent in feed.

 $^{
m b}$ 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 its 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 on the relative risk of the treated group to the control group.

In male mice the incidence of leukemia or malignant lymphoma was increased in the low dose treated group. The Fisher exact test showed a significantly (P = 0.019) greater incidence in the low dose than in the control group. However, in historical data compiled by this laboratory for the NCI Carcinogenesis Testing Program 29/275 (11 percent) of the untreated male B6C3F1 mice had a malignant lymphoma or leukemia, compared to the 7/43 (16 percent) observed in the low dose group.

In female mice the combined incidence of hepatocellular adenomas or hepatocellular carcinomas was increased in the treated groups compared to their respective controls. The results of the Fisher exact test comparing the low dose treated group to its control was significant (P = 0.006). This was not supported, however, by significant high dose Fisher exact test results.

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 fenaminosulf that could not be established under the conditions of this test.

V. DISCUSSION

It is recognized that the results reported in this study are not for pure or technical-grade fenaminosulf, but for the commercially available formulated product containing fenaminosulf.

There was no significant association for female rats between fenaminosulf dosage and mortality; this was also true for male rats if the 21 males that died in the first two weeks of the bioassay are excluded from consideration. For both male and female mice there was a significant positive association between dosage and mortality. In all groups of both species, except for high dose male and low dose female mice, adequate numbers of animals survived sufficiently long to be at risk from late-developing tumors.

No convincing statistical evidence was provided for a significant positive association between compound administration and the incidence of any tumor in male or female rats. Endometrial stromal sarcomas were observed only in treated female rats (i.e., 3/48 [6 percent] low dose and 1/47 [2 percent] high dose). These incidences did not, however, prove to be statistically significant when compared to controls.

There were increased incidences of necrosis and mineralization of the renal papillary tubules in treated rats and mice when compared to controls. The severity of these lesions was variable and they were observed in addition to the chronic renal disease often seen in aging rodents.

When those female mice having either hepatocellular carcinomas or hepatocellular adenomas were combined and the resulting tumor incidences statistically analyzed, the low dose group had an incidence significantly higher than that of the low dose control group. This finding was not, however, supported by similar results for the high dose females. In addition, the historical incidence for this combination of tumors in control female mice at Mason Research Institute during the NCI Carcinogenesis Testing Program was 19/275 (7 percent), in contrast to the 0/46 observed in the low dose controls during this chronic study. The importance of the significant Fisher exact comparison for hepatocellular neoplasms in low dose female mice, therefore, appears questionable and is considered as insufficient evidence of carcinogenicity.

When those male mice having leukemia or malignant lymphoma were combined and the resulting tumor incidences statistically analyzed, the Fisher exact test indicated a significantly greater incidence of these neoplasms in the low dose group when compared with controls. However, the incidence of these neoplasms in the historical control untreated male B6C3F1 mice compiled by this laboratory for the Carcinogenesis Testing Program is 29/275 (11 percent) as compared to 7/43 (16 percent) observed in the low dose male mice in this bioassay, not a convincing difference.

No unusual tumors were observed among mice of either sex and no convincing statistical evidence was provided for a significant

positive association between compound administration and the incidence of any tumor in either sex.

Contradictory carcinogenicity data have been obtained in two other studies with fenaminosulf. An unspecified number of Sprague-Dawley rats fed fenaminosulf at a concentration of 1000 mg/kg of diet developed "hepatomas resembling those produced by dimethylaminoazoben-zene" after 12 months (Herrmann and DuBois, 1949); however, no liver tumors were found in 2 groups of 20 Holtzmann rats 15 months after administration of a diet containing 1.35 or 4.0 millimoles of fenaminosulf per kg of feed (339.12 or 1004.8 mg/kg) (Miller et al., 1957).

Under the conditions of this bioassay, dietary administration of formulated fenaminosulf was not carcinogenic in either Fischer 344 rats or B6C3F1 mice.

VI. BIBLIOGRAPHY

- 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.
- Carter, L.J., J.G. Mitchell, and D.J. Wilson, EPA Compendium of Registered Pesticides, Volume II: Fungicides and Nematacides. Technical Service Division, Office of Pesticides Programs, U.S. Environmental Protection Agency, Washington, D.C., 1973.
- 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.
- Farm Chemicals Handbook. Mesiter Publishing Company, Willoughby, Ohio, 1976.
- 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.
- Herrmann, R.G. and K.P. DuBois, "Studies on the Toxicity and Pharma-cological Action of p-Dimethylaminobenzenediaso Sodium Sulfonate (DAS)." Journal of Pharmacology and Experimental Therapeutics 95:262-271, 1949.
- International Agency for Research on Cancer. <u>IARC Monographs on the Evaluation of Carcinogenic Risk of Chemicals to Man</u>, Volume 8. IARC, Lyon, France, 1975.
- Kaplan, E.L., and P. Meier, "Nonparametric Estimation from Incomplete Observations." <u>Journal of the American Statistical Association</u> 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.

- Miller, J.A., E.C. Miller, and G.C. Finger, "Further Studies on the Carcinogenicity of Dyes Related to 4-Dimethylaminoazobenzene. The Requirement for an Unsubstituted 2-Position." <u>Cancer Research</u> 17:387-398, 1957.
- 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.
- Stanford Research Institute, 1977 Directory of Chemical Producers, U.S.A. Menlo Park, California, 1977.
- Tarone, R.E., "Tests for Trend in Life-Table Analysis." <u>Biometrika</u> 62:679-682, 1975.
- Terayama, H., "Aminoazo Carcinogenesis--Methods and Biochemical Problems." Methods in Cancer Research 1:399-449, 1967.

Review of the Bioassay of Formulated Fenaminosulf* for Carcinogenicity by the Data Evaluation/Risk Assessment Subgroup of the Clearinghouse on Environmental Carcinogens

April 26, 1978

The Clearinghouse on Environmental Carcinogens was established in May, 1976, in compliance with DHEW Committee Regulations and the Provisions of the Federal Advisory Committee Act. The purpose of the Clearinghouse is to advise the Director of the National Cancer Institute (NCI) on its bioassay program to identify and to evaluate chemical carcinogens in the environment to which humans may be 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 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 reports prepared on NCI-sponsored bioassays of chemicals studied for carcinogenicity. It is in this context that the below critique is given on the bioassay of Formulated Fenaminosulf for carcinogenicity.

The primary reviewer said that the compound was not carcinogenic in rats or mice under the conditions of test. He noted that only 35% of the tested compound was estimated to be Fenaminosulf, the remainder being clay, silica, sodium naphthalene sulfonate, and sodium ligno-sulfate. Despite certain experimental shortcomings, he said that the study was adequate to conclude that Formulated Fenaminosulf was not carcinogenic under the conditions of test.

Although the secondary reviewer agreed that the study was "essentially negative," he pointed out the elevated incidence of hepatocellular carcinomas in low dose treated female mice and hematopoietic system tumors in low dose treated male mice. The meaningfulness of these increases was obscured by excessive early mortality due to toxicity. If Formulated Fenaminosulf is still a major environmental hazard, he suggested that it be retested, at least in mice.

A motion was made that the report on the bioassay of Formulated Fenaminosulf be accepted as written. The motion was seconded and approved unanimously.

Members present were:

Michael Shimkin (Acting Chairman), University of California at San Diego
Joseph Highland, Environmental Defense Fund
George Roush, Jr., Monsanto Company
Louise Strong, University of Texas Health Sciences Center
John Weisburger, American Health Foundation
(David Clayson, Eppley Institute for Cancer Research, submitted a written review)

♣U.S. GOVERNMENT PRINTING OFFICE: 1978-260-899/3205

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.

APPENDIX A

SUMMARY OF THE INCIDENCE OF NEOPLASMS IN RATS TREATED WITH FENAMINOSULF

			·	

 $\begin{tabular}{ll} \textbf{TABLE A1} \\ \textbf{SUMMARY OF THE INCIDENCE OF NEOPLASMS IN MALE RATS TREATED WITH FENAMINOSULF} \\ \end{tabular}$

	CONTROL (UNTR) 01-0160	LOW DOSE 01-R150	HIGH DOSE 01-0140
NIMALS INITIALLY IN STUDY NIMALS NECROPSIED NIMALS EXAMINED HISTOPATHOLOGICALLY	50 50	50 43 41	50 49 48
NTEGUMENTARY SYSTEM			
*SKIN PIBROMA PIBROSARCCMA	(50) 1 (2%) 1 (2%)	(43)	(49)
*SUBCUT TISSUE SARCOMA, NOS FIBROMA FIBROSARCOMA LEIOMYOSARCOMA FIBROADENCMA	(50) 1 (2%) 1 (2%) 1 (2%)	(43) 1 (2%) 2 (5%)	(49) 3 (6%) 1 (2%) 1 (2%)
#LUNG ALVEOLAR/BRONCHIOLAR CARCINOMA C-CELL CARCINOMA, METASTATIC	1 (276)	(41) 1 (2%)	(48) 1 (2%)
EMATOPOIRTIC SYSTEM			
*MULTIPLE ORGANS LEUKEMIA, NOS MYELOMONOCYTIC LEUKEMIA	(50) 1 (2%) 9 (18%)	(43)	(49)
#SPLEEN MYELOMONOCYTIC LEUKEMIA	(50)	(41) 1 (2%)	(48) 1 (2%)
#THYMUS C-CELL CARCINOMA, METASTATIC	(24)	(23) 1 (4%)	(34)
IRCULATORY SYSTEM			
#HEART SARCOMA, NOS, METASTATIC	(48) 1 (2%)	(40)	(48)

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

TABLE A1 (CONTINUED)

	CONTROL (UNTR) 01-0160	LOW DOSE 01-R150	HIGH DOSF 01-0140
IGESTIVE SYSTEM			
*LIVER NEOPLASTIC NODULE	(49)	(41) 1 (2%)	(48)
FJEJUNUM SARCOMA, NOS	(49)	(36) 1 (3%)	(47)
INARY SYSTEM			
NONE			
NDOCKINE SYSTEM			
*PITUITARY ADENOMA, NOS CHROMOPHOBE ADENOMA ACIDOPHIL ADENOMA	(45) 5 (11%) 2 (4%)	(30) 4 (13%) 3 (10%)	(42) 5 (12%) 2 (5%) 2 (5%)
#ADRENAL CORTICAL ADENOMA PHEOCHROMOCYTOMA	(50) 3 (6%)	(41) 1 (2%) 6 (15%)	(47) 1 (2%) 3 (6%)
#THYROID FOLLICULAR-CELL CARCINOMA C-CELL ADENOMA C-CELL CARCINOMA	(37) 1 (3%) 1 (3%) 2 (5%)	(31) 4 (13%) 1 (3%)	(44) 1 (2%) 1 (2%) 2 (5%)
*PARATHYROID ADENOMA, NOS	(20)	(17) 1 (6%)	(24)
*PANCREATIC ISLETS ISLET-CELL ADENOMA ISLET-CELL CARCINOMA	(47) 1 (2%)	(40) 2 (5%) 1 (3%)	(47) 2 (4%)
EPRODUCTIVE SYSTEM			
*PREPUTIAL GLAND CARCINOMA,NOS	(50) 2 (4%)	(43)	(49)
#TESTIS INTERSTITIAL-CELL TUMOR	(50) 42 (84%)	(41) 29 (71%)	(47) 40 (85%)

TABLE A1 (CONTINUED)

	CONTROL (UNTR) 01-0160	LOW DOSE 01-R150	HIGH DOSE
NERVOUS SYSTEM			
#CEREBRAL CORTEX GLIOMA, NOS	(50) 1 (2%)	(39)	(47)
SPECIAL SENSE ORGANS			
*ZYMBAL'S GLAND SEBACEOUS ADENOCARCINOMA	(50)	(43) 1 (2%)	
MUSCULOSKELETAL SYSTEM			
NONE			
BODY CAVITIES			
*BODY CAVITIES MESOTHELIOMA, NOS	(50)	(43) 1 (2%)	(49)
ALL OTHER SYSTEMS			
NONE			
ANIMAL DISPOSITION SUMMARY			
ANIMALS INITIALLY IN STUDY	50_	50	50
NATURAL DEATHO	5 8	21	3
MORIBUND SACRIFICE SCHEDULED SACRIFICE	5		
ACCIDENTALLY KILLED	,		,
TERMINAL SACRIFICE ANIMAL MISSING	32	29	39
D INCLUDES AUTOLYZED ANIMALS			

TABLE A1 (CONCLUDED)

	CONTROL (UNTR) 01-0160	LOW DOSE 01-R150	
UMOR SUMMARY			
TOTAL ANIMALS WITH PRIMARY TUMORS* TOTAL PRIMARY TUMORS	49 76	29 60	42 66
TOTAL ANIMALS WITH BENIGN TUMORS TOTAL BENIGN TUMORS	46 56	29 52	41 60
TOTAL ANIMALS WITH MALIGNANT TUMORS TOTAL MALIGNANT TUMORS	17 20	6 6	6 6
TOTAL ANIMALS WITH SECONDARY TUMORS# TOTAL SECONDARY TUMORS	1	1 2	
TOTAL ANIMALS WITH TUMORS UNCERTAIN- BENIGN OF MALIGNANT TOTAL UNCERTAIN TUMORS		1 2	
TOTAL ANIMALS WITH TUMORS UNCERTAIN- PRIMARY OR METASTATIC TOTAL UNCERTAIN TUMORS			

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

	CONTROL (UNTR) 02-0160	LOW DOSE 02-R150	HIGH DOSE 02-0140
· · · · · · · · · · · · · · · · · · ·	50	50	50
NIMALS MISSING NIMALS NECROPSIED NIMALS EXAMINED HISTOPATHOLOGICALLY**	1 49 49	48 48	50 50
NTEGUMENTARY SYSTEM			
*SUBCUT TISSUE FIBROMA	(49) 2 (4%)	(48) 1 (2%)	(50)
ESPIRATORY SYSTEM			
#LUNG SQUAMOUS CELL CARCINOMA ALVEOLAR/BRONCHIOLAR ADENOMA		(48) 1 (2%)	(49) 1 (2%)
EMATOPOIETIC SYSTEM			
*MULTIPLE ORGANS MALIGNANT LYMPHOMA, NOS LEUKEMIA, NOS MYELOMONOCYTIC LEUKEMIA	(49) 1 (2%) 6 (12%)	(48) 1 (2%)	(50)
#SPLEFN MYELOMONOCYTIC LEUKEMIA	(47)		(49) 1 (2%)
IRCULATORY SYSTEM			
NONE			
IGESTIVE SYSTEM			
#LIVER HEPATOCELLULAR CARCINOMA	(48) 1 (2%)	(48) 1 (2%)	(50)
	(49)	(45) 1 (2%)	(42)

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

^{**}EXCLUDES PARTIALLY AUTOLYZED ANIMALS

TABLE A2 (CONTINUED)

	CONTROL (UNTR 02-0160) LOW DOSE 02-R150	HIGH DOSE 02-0140
NDOCRINE SYSTEM			
*PITUITARY	(39)	(40)	(41)
NEOPLASM, NOS	(++)		1 (2%)
ADENOMA, NOS	15 (38%)		16 (39%)
CHROMOPHOBE ADENOMA	2 (5%)	2 (5%)	
ACIDOPHIL ADENOMA			1 (2%)
#ADRENAL	(49)	(46)	(46)
CORTICAL CARCINOMA	(47)	(40)	1 (2%)
PHEOCHROMOCYTOMA	3 (6%)	2 (4%)	2 (4%)
#THYROID	(45)	(46)	(49)
C-CELL ADENOMA C-CELL CARCINOMA	2 (4%)	2 (4%)	4 (8%) 3 (6%)
C-CBLL CARCINORA	2 (476) 	2 (4 <i>h</i>)	
*MAMMARY GLAND ADENOCARCINOMA, NOS PAPILLARY ADENOCARCINOMA FIBROADENOMA	(49) 12 (24%)	(48) 1 (2%) 8 (17%)	(50) 1 (2%) 8 (16%)
*CLITORAL GLAND	(49)	(48)	(50)
ADENOMA, NOS	1 (2%)		1 (2%)
*UTERUS	(46)	(48)	(47)
NEOPLASM, NOS	•		1 (2%)
ENDOMETRIAL STROMAL POLYP	5 (11%)		4 (9%)
ENDOMETRIAL STROMAL SARCOMA		3 (6%)	1 (2%)
#OVARY	(47)	(48)	(49)
GRANULOSA-CELL TUMOR	(· · · /	1 (2%)	• • • •
NERVOUS SYSTEM			
#BRAIN	(49)	(48)	(50)
ASTROCYTOMA	1 (2%)		1 (2%)
SPECIAL SENSE CRGANS			
	41. 4.		
*ZYMBAL'S GLAND CERUMINOUS CARCINOMA	(49)	(48)	(50)
	!_(∠70}		

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

TABLE A2 (CONCLUDED)

	CONTROL (UNTR) 02-0160	LOW DOSE 02-R150	HIGH DOSE 02-0140
USCULOSKELETAL SYSTEM			
HONE			
ODY CAVITIES			
NONE			************
LL OTHER SYSTEMS			
NONE			
NIMAL DISPOSITION SUMMARY			
ANIMALS INITIALLY IN STUDY NATURAL DEATH®	50 2	50 6	50 3
NORIBUND SACRIFICE SCHEDULED SACRIFICE	6 5	3	3 5
ACCIDENTALLY KILLED Terminal Sacrifice	36	41	39
ANIMAL MISSING INCLUDES AUTOLYZED ANIMALS	1		
UMOR SUMMARY	24	22	20
TOTAL ANIMALS WITH PRIMARY TUMORS* TOTAL PRIMARY TUMORS	52	33 47	30 47
TOTAL ANIMALS WITH BENIGN TUMORS TOTAL BENIGN TUMORS	27 40	30 38	25 36
TOTAL ANIMALS WITH MALIGNANT TUMORS		8	8
TOTAL MALIGNANT TUMORS	12	8	9
TOTAL ANIMALS WITH SECONDARY TUMORS: TOTAL SECONDARY TUMORS	*		
TOTAL ANIMALS WITH TUMORS UNCERTAIN- BENIGN OR MALIGNANT	-	1	2
TOTAL UNCERTAIN TUMORS		1	2
TOTAL ANIMALS WITH TUMORS UNCERTAIN- PRIMARY OR METASTATIC TOTAL UNCERTAIN TUMORS	-		

^{*} PRIMARY TUMORS: ALL TUMORS EXCEPT SECONDARY TUMORS
* SECONDARY TUMORS: METASTATIC TUMORS OR TUMORS INVASIVE INTO AN ADJACENT ORGAN

APPENDIX B

SUMMARY OF THE INCIDENCE OF NEOPLASMS
IN MICE TREATED WITH FENAMINOSULF

TABLE B1
SUMMARY OF THE INCIDENCE OF NEOPLASMS IN MALE MICE TREATED WITH FENAMINOSULF

	CONTROL (UNTR) 05-0160	LOW DOSE 05-0140	HIGH DOSE 05-0150
ANIMALS INITIALLY IN STUDY ANIMALS MISSING	50	50	50
ANIMALS NECROPSIED ANIMALS EXAMINED HISTOPATHOLOGICALLY**	50 49	44 4 4	22 22
NTEGUMENTARY SYSTEM			
NONE			
RESPIRATORY SYSTEM			
#LUNG HEPATOCELLULAR CARCINOMA, METAST	(47) 2 (4%)	(43)	(22)
ALVEOLAR/BRONCHIOLAR ADENOMA ALVEOLAR/BRONCHIOLAR CARCINOMA		4 (9%) 3 (7%)	1 (5%)
HEMATOPOIETIC SYSTEM			
*MULTIPLE ORGANS MALIGNANT LYMPHOMA, NOS MALIG.LYMPHOMA, HISTIOCYTIC TYPE	(50) 1 (2%)	(44) 1 (2%) 1 (2%)	(22)
#SPLEEN HEMANGIOMA	(49)	(43)	(20)
HEMANGIOSARCOMA MALIGNANT LYMPHOMA, NOS	1 (2%)	1 (2%) 1 (2%)	
#LYMPH NODE MALIGNANT LYMPHOMA, NOS	(40)	(40) 1 (3%)	(14)
*MESENTERIC L. NODE MALIGNANT LYMPHOMA, NOS MALIG.LYMPHOMA, HISTIOCYTIC TYPE	(40)	(40) 1 (3%)	(14)
*LIVER MALIG.LYMPHOMA, HISTIOCYTIC TYPE	(49)	(44)	(22)
*PEYERS PATCH MALIG.LYMPHOMA, HISTIOCYTIC TYPE	(49)	(42) 1 (2%)	(19)

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

TABLE B1 (CONTINUED)

		t) LOW DOSE 05-0140	HIGH DOSE 05-0150
#THYMUS MALIGNANT LYMPHOMA, NOS	(30)	(24) 1 (4%)	(7)
CIRCULATORY SYSTEM			
NONE	·		
DIGESTIVE SYSTEM			
*LIVER	(49)	(44)	(22)
HEPATOCELLULAR ADENOMA HEPATOCELLULAR CARCINOMA	15 (31%)	2 (5%) 7 (16%)	2 (9%)
*STOMACH ADENOMATOUS POLYP, NOS	(49) 1 (2%)	(41)	(19)
URINARY SYSTEM			
NONE			
ENDOCRINE SYSTEM			
#THYROID FOLLICULAR-CELL ADENOMA FOLLICULAR-CELL CARCINOMA	(42)	(39)	(14)
REPRODUCTIVE SYSTEM			
*TESTIS INTERSTITIAL-CELL TUMOR EMBRYONAL CARCINOMA	(49) 1 (2%)	(44)	(22)
NERVOUS SYSTEM			
NONE			
SPECIAL SENSE ORGANS			
*HARDERIAN GLAND CYSTADENCHA, NOS	(50)	(44)	(22)

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

TABLE B1. (CONCLUDED)

	CONTROL (UNTR) 05-0160		HIGH DOSE 05-0150
USCULOSKELETAL SYSTEM			
NONE			
ODY CAVITIES			
NONE			
LL OTHER SYSTEMS			
NONE			
NIMAL DISPOSITION SUMMARY			
ANIMALS INITIALLY IN STUDY	50	50	50
NATURAL DEATHO	3	9	36
MORIBUND SACRIFICE SCHEDULED SACRIFICE	5	1	1 5
ACCIDENTALLY KILLED	,		.,
TERMINAL SACRIFICE	42	39	8
ANIMAL MISSING		1	
INCLUDES AUTOLYZED ANIMALS			
TUMOR SUMMARY			
TOTAL ANIMALS WITH PRIMARY TUMORS*	20	20	3
TOTAL PRIMARY TUMORS	26	24	3
		_	
TOTAL ANIMALS WITH BENIGN TUMORS TOTAL BENIGN TUMORS	6 6	6 6	1
TOTAL BENIEW TOWORS	G	O	'
TOTAL ANIMALS WITH MALIGNANT TUMORS	18	15	2
TOTAL MALIGNANT TUMORS	20	18	2
TOTAL ANIMALS WITH SECONDARY TUMORS	* 2		
TOTAL SECONDARY TUMOPS	2		
TOTAL ANIMALS WITH TUMORS UNCERTAIN	-		
BENIGN OR MALIGNANT TOTAL UNCERTAIN TUMORS			
TOTAL ORCEPTATE TOUGHT			
TOTAL ANIMALS WITH TUMORS UNCERTAIN	-		
PRIMARY OR METASTATIC			
TOTAL UNCERTAIN TUMORS			

^{*} PRIMARY TUMORS: ALL TUMORS EXCEPT SECONDARY TUMORS
* SECONDARY TUMORS: METASTATIC TUMORS OR TUMORS INVASIVE INTO AN ADJACENT ORGAN

TABLE B2 SUMMARY OF THE INCIDENCE OF NEOPLASMS IN FEMALE MICE TREATED WITH FENAMINOSULF

	HIGH DOSE CONTROL (UNTR) 06-0160	LOW DOSE CONTROL (UNTR) 06-0220	LOW DOSE 06-R151	HIGH DOSE 06-0140
ANIMALS INITIALLY IN STUDY	50	50	50	a50
ANIMALS MISSING		2	2	1
ANIMALS NECROPSIED		47	43	42
NIMALS EXAMINED HISTOPATHOLOGICALLY	** 50 	47 	38	39
NTEGUMENTARY SYSTEM				
*SKIN	(50)	(47)	(43)	(42)
KERATOACANTHOMA	(35)	1 (2%)	(10)	(12)
*SUBCUT TISSUE	(50)	(47)	(43)	(42)
FIBROSARCCMA	1 (2%)	, ,	• •	, ,
HEMANGIO SARCOMA	1 (2%)			
ESPIRATORY SYSTEM				
*LUNG	(50)	(46)	(39)	(39)
HEPATOCELLULAR CARCINOMA, METAST ALVEOLAR/BRONCHIOLAR ADENOMA	1 (2%)	1 (20)	2 (0#)	2 (0#)
ALVEOLAR/BRONCHIOLAR CARCINOMA	3 (6%)	3 (7%)	3 (0%)	1 (3%)
EMATOPOIETIC SYSTEM				
*MULTIPLE ORGANS	(50)	(47)	(43)	(42)
MALIGNANT LYMPHOMA, NOS	3 (6%)	1 (2%)	2 (5%)	2 (5%)
MALIG.LYMPHOMA, HISTIOCYTIC TYPE	, ,	3 (6%)		•
#BONE MARROW	(49)	(39)	(35)	(32)
HEMANGIO SARCOMA	,	*,	(,	1 (3%)
#SPLEEN	(49)	(45)	(38)	(38)
HEMANGIOSARCOMA	1 (2%)	(43)	(20)	1 (3%)
MALIG. LYMPHOMA, HISTIOCYTIC TYPE		2 (4%)		1 (3%)
#MANDIBULAR L. NODE	(40)	(38)	(29)	(35)
MALIGNANT LYMPHOMA, NOS	1 (3%)			
#MESENTERIC L. NODE	(40)	(38)	(29)	(35)
MALIGNANT LYMPHOMA, NOS				1 (3%)

^{*} NUMBER OF ANIMALS WITH TISSUE EXAMINED MICROSCOPICALLY

* NUMBER OF ANIMALS NECROPSIED

**EXCLUDES PARTIALLY AUTOLYZED ANIMALS

**O ANIMALS WERE INITIALLY IN THE STUDY BUT ONE ANIMAL WAS FOUND TO BE A MALE IN A FEMALE GROUP.

TABLE B2 (CONTINUED)

	06-0160	06-0220	06-R151	06-0140
PPEYERS PATCH MALIGNANT LYMPHOMA, NOS MALIG.LYMPHOMA, HISTIOCYTIC TYPE	(49) 1 (2%)	(44) .	(34) 1 (3%)	(37) 1 (3%)
IRCULATORY SYSTEM				
NONE				
IGESTIVE SYSTEM				
*LIVER HEPATOCELLULAR ADENOMA HEPATOCELLULAR CARCINOMA	(49) 2 (4%)	(46)	(36) 2 (6%) 2 (6%)	(37) 3 (8%)
RINARY SYSTEM				
NONE				
NDOCRINE SYSTEM				
*PITUITARY ADENOMA, NOS	(42)	(33) 1 (3%)	(25) 3 (12 %)	(32) 3 (9%)
#ADRENAL/CAPSULE ADENOMA, NOS	(47)	(40) 1 (3%)	(37)	(39)
*THYROID FOLLICULAR-CELL ADENOMA	(41)	(29) 1 (3%)	(27)	(31)
EPRODUCTIVE SYSTEM				
*MAMMARY GLAND ADENOCARCINOMA, NOS	(50)	(47)	(43) 1 (2%)	(42)
OVAKY PAPILLARY ADENOMA	(48)	(40) 1 (3%)	(32)	(37)
PAPILLARY CYSTADENOMA, NOS TERATOMA, BENIGN		, ,	1 (3%)	1 (3%)

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

TABLE B2 (CONTINUED)

·	HIGH DOSE CONTROL (UNTR) 06-0160	LOW DOSE CONTROL (UNTR) 06-0220	LOW DOSE 06-R151	HIGH DOSE 06-0140
				~
SPECIAL SENSE ORGANS				
*HARDERIAN GLAND CYSTADENOMA, NOS	(50)	(47)	(43)	(42) 1 (2%)
SUSCULOSKELETAL SYSTEM				
NONE				
BODY CAVITIES				
NONE				
ALL OTHER SYSTEMS				
ALL OTHER SISIENS				
NONE				
ANIMAL DISPOSITION SUMMARY				
ANIMALS INITIALLY IN STUDY	50	50	50	50
NATURAL DEATHO	3	ц	23	10
MORIBUND SACRIFICE	2	3	7	1
SCHEDULED SACRIFICE	5	5		5
ACCIDENTALLY KILLED				
TERMINAL SACRIFICE	40	36	18	32
ANIMAL MISSING		2	2	1
ANIMAL DELFTED (WRONG SEX)				1

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

TABLE B2 (CONCLUDED)

		LOW DOSE CONTROL (UNTR) 06-0220		HIGH DOSE 06-0140
TUMOR SUMMARY				
TOTAL ANIMALS WITH PRIMARY TUMORS* TOTAL PRIMARY TUMORS	12 15	14 15	10 15	16 19
TOTAL ANIMALS WITH BENIGN TUMORS TOTAL BENIGN TUMORS	1	5 · 6	7	8
TOTAL ANIMALS WITH MALIGNANT TUMORS TOTAL MALIGNANT TUMORS	11 14	9	5 6	10 11
TOTAL ANIMALS WITH SECONDARY TUMORS TOTAL SECONDARY TUMORS	# 1 1			
TOTAL ANIMALS WITH TUMORS UNCERTAIN BENION OR MAIIGNANT TOTAL UNCERTAIN TUMORS	-			
TOTAL ANIMALS WITH TUMORS UNCERTAIN PRIMARY OF 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 FENAMINOSULF

	,	

TABLE C1 SUMMARY OF THE INCIDENCE OF NONNEOPLASTIC LESIONS IN MALE RATS TREATED WITH FENAMINOSULF

	CONTE 01-0	ROL (UNTR) 160	LOW I		HIGH 01-0	
ANIMALS INITIALLY IN STUDY ANIMALS NECROPSIED ANIMALS EXAMINED HISTOPATHOLOGICALLY*	50 50 50		50 43 41		50 49 48	·
NTEGUMENTARY SYSTEM						
*SKIN EPIDERMAL INCLUSION CYST INFLAMMATICN, SUPPURATIVE		(2%)	(43) 1	(2%)	(49) 1	(2%)
RESPIRATORY SYSTEM						
#LUNG CONGESTION, CHRONIC PASSIVE INFLAMMATICN, INTERSTITIAL PIBROSIS, DIFFUSE	4	(2%) (8%) (2%)	(41) 2		(48) 1	
HYPERPLASIA, NOS HYPERPLASIA, EPITHELIAL HYPERPLASIA, ALVEOLAR EPITHELIUM		(2%) (2%)	2	(5%)	1	(2%)
#LUNG/ALVEOLI HEMORRHAGE	(49) 1	(2%)	(41)		(48)	
MEMATOPOIETIC SYSTEM						
#SPLEEN FIBROSIS HEMOSIDEROSIS HEMATOPOIESIS		(2%) (4%)	(41)			(4%) (2%)
*LYMPH NODE INFLAMMATICN, NOS	(49)		(34)		(47) 1	(2%)
*MANDIBULAR L. NODE HYPERPLASIA, PLASMA CELL	(49) 1	(2%)	(34)		(47)	
#MESENTERIC L. NODE HYPERPLASIA, PLASMA CELL	(49) 1	(2%)	(34)		(47)	

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

TABLE C1 (CONTINUED)

	CONTROL (UNTR) 01-0160	01-R150	HIGH DOSE 01-0140
IRCULATORY SYSTEM			
#MYOCARDIUM	(48)	(40)	(48)
INFLAMMATION, INTERSTITIAL	1 (2%)		
FIBROSIS	2 (4%)		
DEGENERATION, NOS	1 (2%)		·
IGESTIVE SYSTEM			
#SALIVARY GLAND	(50)	(38)	(46)
HYPERTROPHY, POCAL		1 (3%)	
HYPERPLASIA, INTRADUCTAL	1 (2%)		
#LIVER	(49)	(41)	(48)
INFLAMMATION, CHRONIC FOCAL	1 (2%)	(,	(/
NECROSIS, FOCAL	3 (6%)	1 (2%)	
METAMORPHOSIS FATTY	` '	1 (2%)	2 (4%)
HYPERPLASIA, FOCAL	1 (2%)	4 (10%)	5 (10%)
#LIVER/CENTRILOBULAR	(49)	(41)	(48)
CONGESTION, PASSIVE	1 (2%)		
*BILE DUCT	(50)	(43)	(49)
HYPERPLASIA, NOS	2 (4%)		2 (4%)
*PANCREAS	(47)	(40)	(47)
INFLAMMATION, NOS	2 (4%)		2 (4%)
INFLAMMATION, CHRONIC FOCAL	1 (2%)		
*PANCREATIC ACINUS	(47)	(40)	(47)
ATROPHY, NOS			1 (2%)
*STOMACH	(49)	(40)	(46)
HYPERKERATOSIS	1 (2%)		
ACANTHOSIS	1 (2%)	1 (3%)	
*PEYERS PATCH	(49)	(36)	(47)
HYPERPLASIA, NOS	1 (2%)		2 (4%)
#JEJUNUM	(49)	(36)	(47)
METAPLASIA, OSSEOUS	, ,	1 (3%)	• • • •
#COLON	(48)	(30)	(43)
PARASITISM	* *	• •	2 (5%)

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

TABLE C1 (CONTINUED)

	CONTROL (UNTR) 01-0160		HIGH DOSE 01-0140
URINARY SYSTEM			
*KIDNEY HYDRONEPHROSIS CONGESTION, NOS GLOMERULONEPHRITIS, NOS NEPHROPATHY DEGENERATION, CYSTIC NEPHROSIS, NOS HYPERPLASIA, EPITHELIAL *KIDNEY/TUBULE	(50) 1 (2%) 4 (8%) 35 (70%)	(41) 39 (95%) 1 (2%) 1 (2%) (41)	(48) 1 (2%) 5 (10%) 42 (88%)
MINERALIZATION		21 (51%)	32 (67%)
#PITUITARY CYST, NOS CONGESTION, NOS HYPERPLASIA, NOS	(45) 1 (2%)	(30) 1 (3%) 1 (3%)	(42) 2 (5%)
#ADRENAL MEDULLA HYPERPLASIA, NOS HYPERPLASIA, FOCAL	(50)	(41) 2 (5%) 2 (5%)	(47) 1 (2%) 5 (11%)
*THYROID CYSTIC FOLLICLES FOLLICULAR CYST, NOS HYPERPLASIA, PAPILLARY HYPERPLASIA, C-CELL	(37) 1 (3%) 2 (5%)	(31)	(44) 1 (2%) 1 (2%) 1 (2%)
#PARATHYROID HYPERPLASIA, NOS	(20)	(17)	(24) 1 (4%)
REPRODUCTIVE SYSTEM			
*MAMMARY GLAND HYPERPLASIA, NOS	(50)	(43)	(49) 2 (4 %)
#PROSTATE INFLAMMATION, NOS ABSCESS, NOS HYPERPLASIA, FOCAL	(48) 3 (6%)	(26)	(39) 1 (3%)

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

TABLE C1 (CONCLUDED)

	CONTROL (UNTR) 01-0160	LOW DOSE 01-R150	HIGH DOSE 01-0140
*TESTIS PERIVASCULITIS CALCIFICATION, NOS	(50) 1 (2%) 3 (6%)	(41)	(47)
CALCIFICATION, FOCAL ATROPHY, NOS HYPERPLASIA, INTERSTITIAL CELL	1 (2%) 11 (22%) 4 (8%)	4 (10%)	9 (19%) 5 (11%)
*TESTIS/TUBULE MINERALIZATION	(50)	(41) 3 (7%)	(47)
ERVOUS SYSTEM			
NONE		- * - *	
PECIAL SENSE ORGANS			
*EYE/RETINA DEGENERATION, NOS	(50)	(43) 1 (2%)	(49)
USCULOSKELETAL SYSTEM			
NONE		*~~~***	
ODY CAVITIES			
*PLEURA FIBROSIS, DIFFUSE	(50) 1 (2%)	(43)	(49)
LL OTHER SYSTEMS			
OMENTUM NECROSIS, FAT		1	1
PPCIAL MORPHOLOGY SUMMARY			
NO LESION REPORTED AUTO/NECROPSY/NO HISTO AUTOLYSIS/NO NECROPSY		1 2 7	1

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

${\it TABLE~C2} \\ {\it SUMMARY~OF~THE~INCIDENCE~OF~NONNEOPLASTIC~LESIONS~IN~FEMALE~RATS~TREATED~WITH~FENAMINOSULF} \\$

	CONTROL (UNTR) 02-0160	LOW DOSE 02-R150	
NIMALS INITIALLY IN STUDY	50	50	50
NIMALS MISSING NIMALS NECROPSIED	1 49	48	50
NIMALS EXAMINED HISTOPATHOLOGICALLY**	• •	48	50
NTEGUNENTARY SYSTEM			
NONE			
ESPIRATORY SYSTEM			
*LUNG	(49)	(48)	(49)
CONGESTION, ACUTE PASSIVE INFLAMMATION, INTERSTITIAL PNEUMONIA, CHRONIC MURINE	1 (2%)		3 (6%) 1 (2%)
#SPLEEN HEMOSIDEROSIS HYPERPLASIA, HEMATOPOIETIC	(47) 3 (6%)	(48) 5 (10%)	(49) 6 (12% 2 (4%)
HYPERPLASIA, ERYTHROID HEMATOPOIESIS		8 (17%)	2 (4%) 6 (12%
IRCULATORY SYSTEM			
#MYOCARDIUM INFLAMMATION, INTERSTITIAL	(48)	(48)	(50) 1 (2%)
FIBROSIS	1 (2%)		1 (2 %)
FIBROSIS, FOCAL		1 (2%)	
IGESTIVE SYSTEM			
*LIVER INFLAMMATION, ACUTE/CHRONIC INFLAMMATION, CHRONIC FOCAL	(48) 1 (2%) 1 (2%)	(48)	(50)

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

TABLE C2 (CONTINUED)

	CONTROL (UNTR) 02-0160	LOW DOSE 02-R150	HIGH DOSE 02-0140
NECROSIS, COAGULATIVE METAMORPHOSIS FATTY BASOPHILIC CYTO CHANGE HYPERPLASIA, FOCAL ANGIECTASIS HEMATOPOIESIS	1 (2%) 2 (4%) 1 (2%)	1 (2%) 3 (6%) 9 (19%) 4 (8%)	2 (4%) 17 (34%) 10 (20%) 2 (4%) 1 (2%)
*BILE DUCT HYPERPLASIA, NOS HYPERPLASIA, FOCAL	(49) 2 (4%) 1 (2%)	(48)	(50) 2 (4%)
*PANCREAS INFLAMMATION, NOS	(48)	(46)	(47) 1 (2%)
*STOMACH INFLAMMATION, NOS ACANTHOSIS	(49) 1 (2%)	(45) 1 (2%)	(47) 1 (2%)
#GASTRIC SUBMUCOSA EDEMA, NOS	(49) 1 (2%)	(45)	(47)
*PEYERS PATCH HYPERPLASIA, NOS	(49) 2 (4%)	(46)	(48) 3 (6%)
#COLON PARASITISM	(49) 1 (2%)	(45)	(42) 1 (2%)
PINARY SYSTEM			
#KIDNEY HYDPONEPHROSIS CYST, NOS	(48)	(48) 1 (2%)	(49) 1 (2%)
GLOMERULONEPHRITIS, NOS NEPHROPATHY NEPHROSIS, NOS	4 (8%) 29 (60%)	44 (92%)	3 (6%) 35 (71%)
#KIDNEY/CORTEX METAMORPHOSIS FATTY	(48) 1 (2%)	(48)	(49)
#KIDNEY/TUBULF MINERALIZATION	(48)	(48) 34 _. (71%)	(49) 12 (24%)
NDOCRINE SYSTEM			
#ADRENAL MEDULLA HYPERPLASIA, FOCAL	(49)	(46) 4_(9%)	(46) 1_(2%)

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

TABLE C2 (CONTINUED)

	CONTROL (UNTR) 02-0160	LOW DOSE 02-R150	HIGH DOSE 02-0140
#THYROID HYPERPLASIA, C-CFLL	(45) 2 (4%)	(46) 2 (4%)	(49) 3 (6%)
#PARATHYROID HYPERPLASIA, NOS	(27)	(21) 1 (5%)	(35)
*PANCREATIC ISLETS HYPERPLASIA, NOS	(48)	(46) 1 (2%)	(47) 1 (2%)
EPRODUCTIVE SYSTEM			
*MAMMARY GLAND	(49)	(48)	(50)
DILATATION/DUCTS GALACTOCELE HYPERPLASIA, NOS	1 (2%)	3 (6%)	5 (10%) 1 (2%)
*MAMMARY DUCT HYPERPLASIA, CYSTIC	(49) 1 (2%)	(48)	(50)
#UTERUS	(46) 1 (2%)	(48)	(47)
HYDROMETRA HEMATOMA, NOS	1 (2%)		
ABSCESS, NOS POLYP, INFLAMMATORY	1 (2%)	1 (2%)	
#OVARY INFLAMMATION, CHRONIC	(47) 1 (2%)	(48)	(49)
NERVOUS SYSTEM			
NONE			
PECIAL SENSE ORGANS			
*LENS CAPSULE CALCIFICATION, NOS	(49) 1 (2%)	(48)	(50)
USCULOSKELETAL SYSTEM			
NONE	• • • • • • • • • • • • • • • • • • • •		
CODY CAVITIES			
NONE			

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

TABLE C2 (CONCLUDED)

	CONTROL (UNTR) 02-0160	LOW DOSE 02-R150	
LL'OTHER SYSTEMS			
OMENTUM NECROSIS, NOS			1
CRANIOBUCCAL POUCH CYST, NOS			1
SPECIAL MORPHOLOGY SUMMARY			
NO LESION REPORTED	2	1	1
ANIMAL MISSING/NO NECROPSY AUTOLYSIS/NO NECROPSY	1	2	

^{*} NUMBER OF ANIMALS NECROPSIED

APPENDIX D

SUMMARY OF THE INCIDENCE OF NONNEOPLASTIC LESIONS
IN MICE TREATED WITH FENAMINOSULF

•	CONTROL (UNTR) 05-0160	LOW DOSE 05-0140	HIGH DOSE 05-0150
NIMALS INITIALLY IN STUDY NIMALS MISSING	50	50 1	50
NIMALS NECROPSIED NIMALS EXAMINED HISTOPATHOLOGICALLY**	50 49	44 44 	22 22
NTEGUMENTARY SYSTEM			
*SUBCUT TISSUE HEMATOMA, NOS INFLAMMATION, ACUTE FOCAL ABSCESS, NOS	(50) 1 (2%) 1 (2%) 1 (2%)	(44)	(22)
ESPIRATORY SYSTEM			
*LUNG/BRONCHUS INFLAMMATION, NOS	(47)	(43) 1 (2%)	(22)
*LUNG INFLAMMATION, INTERSTITIAL	(47)	(43)	(22)
EMATOPOIETIC SYSTEM			
*SPLEEN HYPERPLASIA, HEMATOPOIETIC HEMATOPOIESIS	(49)	(43) 1 (2%)	(20)
ERYTHROPOIESIS	2 (4%)		
#MESENTERIC L. NODE INFLAMMATION, NOS HEMATOPOIESIS	(40)	(40) 2 (5%)	(14)
*RENAL LYMPH NODE HYPERPLASIA, NOS	(40) 2 (5%)	(40)	(14)

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

TABLE D1 (CONTINUED)

	CONTROL (UNTR) 05-0160	LOW DOSE 05-0140	HIGH DOSE 05-0150
DIGESTIVE SYSTEM			
#LIVER	(49)	(44)	(22)
ABSCESS, NOS	, ,		(/
NECROSIS, FOCAL		1 (2%)	
NECROSIS, COAGULATIVE			
METAMORPHOSIS FATTY	1 (2%)	1 (2#)	
HYPERPLASTIC NODULE		1 (2%)	1 (50)
HYPERPLASIA, FOCAL ANGIECTASIS	1 (2%)		1 (5%)
HEMATOPOIESIS	(2%)		
		e 10 40 5	
#LIVER/KUPFFER CELL	(49)	(44)	(22)
HYPERPLASIA, NOS	1 (2%)		
*GALLBLADDER	(50)	(44)	(22)
INFLAMMATION, NOS	.	2 (5%)	(,
#PANCREAS	(46)	(42)	(18)
CYSTIC DUCTS	1 (2%)	(42)	(10)
INFLAMMATION, NOS	, (2,7)		1 (6%)
PERIVASCULITIS	1 (2%)		, (0,4)
DEGENERATION, CYSTIC	` ,		1 (6%)
NECROSIS, FAT	1 (2%)		•
*PANCREATIC ACINUS	(46)	(42)	(18)
DEGENERATION, NOS	(10)	1 (2%)	(10)
ATROPHY, NOS		νγ	
HYPERTROPHY, NOS			
HYPERTROPHY, FOCAL			
#STOMACH	(49)	(41)	(19)
INFLAMMATION, NOS	V /	,	(12)
ACANTHOSIS			
#PEYERS PATCH	(49)	(42)	(19)
INFLAMMATION, ACUTE	1 (2%)	·	11/1
HYPERPLASIA, LYMPHOID	1 (2%)		
#COLON	(48)	(40)	(18)
PARASITISM	•	1 (3%)	(10)
RINARY SYSTEM			
	41.01	46.00	
#KIDNEY HYDDON FOR HOSTS	(49)	(44)	(21)
HYDRONEPHROSIS	∠_14⊅1		

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

TABLE D1 (CONTINUED)

	CONTROL (UNT 05-0160	R) LOW DOSE 05-0140	HIGH DOSE 05-0150
INFLAMMATICN, NOS INFLAMMATION, SUPPURATIVE INFLAMMATION, CHRONIC NEPHROPATHY	1 (2%)	1 (2%)	2 (10% 3 (14%
#KIDNEY/TUBULE MINERALIZATION		(44)	(21) 1 (5%)
INDOCRINE SYSTEM			
#ADRENAL NECROSIS, NOS CALCIFICATION, NOS	(47)	(38)	(21)
*THYROID INFLAMMATION, NOS INFLAMMATION, FOCAL HYPERPLASIA, FOCAL	(42) 1 (2%)	(39) 1 (3%) 1 (3%)	(14)
#PANCREATIC ISLETS INFLAMMATION, NOS HYPERPLASIA, ADENOMATOUS	(46)	(42)	(18)
REPRODUCTIVE SYSTEM			
*PREPUTIAL GLAND DILATATION, NOS INFLAMMATION, NOS	(50) 1 (2%)	(44) 1 (2%)	(22)
*TESTIS MIMERALIZATION DEGENERATION, NOS ATROPHY, NOS	(49)	(44) 1 (2%)	(22) 1 (5%)
*TESTIS/TUBULE MINERALIZATION NECROSIS, FOCAL	(49) 1 (2%)	(44)	(22)
NERVOUS SYSTEM			
NONE			

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

TABLE D1 (CONCLUDED)

	05-0160	R) LOW DOSE 05-0140	HIGH DOSE 05-0150
MUSCULOSKELETAL SYSTEM			
NONE			
BODY CAVITIES			
*ABDOMINAL CAVITY ADHESION, NOS	(50) 1 (2%)	(44)	(22)
*MESENTERY STEATITIS ABSCESS, NOS	(50) 1 (2%) 1 (2%)	(44)	(22)
ALL OTHER SYSTEMS			
ADIPOSE TISSUE STEATITIS NECROSIS, FAT	1 2		
SPECIAL MORPHOLOGY SUMMARY			
NO LESION REPORTED ANIMAL MISSING/NO NECROPSY	17	18 1	9
NO NECROPSY PERFORMED AUTO/NECROPSY/HISTO PERF AUTO/NECROPSY/NO HISTO	1	·	19 2
AUTOLYSIS/NO NECROPSY	•	5	9

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

TABLE D2 SUMMARY OF THE INCIDENCE OF NONNEOPLASTIC LESIONS IN FEMALE MICE TREATED WITH FENAMINOSULF

	HIGH DOSE CONTROL (UNTR) 06-0160	LOW DOSE CONTROL (UNTR) 06-0220	LOW DOSE 06-R151	HIGH DOSE 06-0140
ANIMALS INITIALLY IN STUDY	50	50	50	a)50
ANIMALS MISSING		2	2	1
ANIMALS NECROPSIED		47	43	42
ANIMALS EXAMINED HISTOPATHOLOGICALLY**	. 20	47	38	39
INTEGUMENTARY SYSTEM				
*SUBCUT TISSUE	(50)	(47)	(43)	(42)
MINERALIZATION INFLAMMATION, NOS		1 (2%)		1 (2%)
NECROSIS, NOS		• •		1 (2%)
RESPIRATORY SYSTEM				
#LUNG	(50)	(46)	(39)	(39)
INFLAMMATION, INTERSTITIAL			1 (3%)	
HEMATOPOIETIC SYSTEM #SPLEEN HYPERPLASIA, LYMPHOID	(49) 1 (2%)		(38)	(38)
HEMATOPOIESIS	1 (2.0)	1 (2%)	7 (18%)	5 (13%)
ERYTHROPOIESIS	1 (2%)	(2~)	(10%)	, (,
#MANDIBULAR L. NODE HYPERPLASIA, PLASMA CELL	(40) 1 (3%)	(38)	(29)	(35)
#MEDIASTINAL L.NODE HYPERPLASIA, NOS	(40) 1 (3%)	(38)	(29)	(35)
*LUMBAR LYMPH NODE	(40)	(38)	(29)	(35)
HYPERPLASIA, NOS	1 (3%)			
#MESENTERIC L. NODE	(40)	(38)	(29)	(35)
INFLAMMATION, NOS	, -,	. ,		1 (3%)
HEMATOPOIESIS			1 (3%)	
*RENAL LYMPH NODE	(40)	(38)	(29)	(35)
HYPERPLASIA, NOS				

^{*} NUMBER OF ANIMALS WITH TISSUE EXAMINED MICROSCOPICALLY
* NUMBER OF ANIMALS NECROPSIFD
**EXCLUDES PARTIALLY AUTOLYZED ANIMALS

3 50 ANIMALS WERE INITIALLY IN THE STUDY BUT ONE ANIMAL WAS FOUND TO BE A MALE IN A FEMALE GROUP.

TABLE D2 (CONTINUED)

	HIGH DOSE LOW DOSE CONTROL (UNTR) CONTROL (UNTR) 06-0160 06-0220		LOW DOSE 06-R151	HIGH DOSE 06-0140	
HYPERPLASIA, PLASMA CELL	1 (3%)				
CIRCULATORY SYSTEM					
*CARDIOVASCULAR SYSTE PERIVASCULITIS	(50)	(47)	(43) 1 (2%)	(42)	
#MYOCARDIUM INFLAMMATION, ACUTE DIFFUSE	(50) 1 (2%)	(45)	(39)	(39)	
DIGESTIVE SYSTEM					
#LIVER NECROSIS, NOS	(49) 1 (2%)	(46)	(36)	(37)	
NECROSIS, FOCAL INFARCT, NOS	1 (2%) 1 (2%)		1 (3%)		
METAMORPHOSIS FATTY HYPERPLASIA, FOCAL HEMATOPOLESIS		1 (2%)	2 (6%) 1 (3%)	1 (3%) 1 (3%)	
*BILE DUCT INFLAMMATION, CHRONIC FOCAL	(50) 2 (4%)	(47)	(43)	(42)	
#PANCREAS DILATATION/DUCTS	(47)	(45)	(34)	(38) 1 (3 %)	
#PANCREATIC ACINUS HYPERTROPHY, FOCAL	(47)	(45)	(34) 1 (3%)	(38)	
#STOMACH INFLAMMATION, ACUTE FOCAL INFLAMMATION, CHRONIC	(49) 1 (2克) 1 (2克)	(46)	(34)	(36)	
*PEYERS PATCH HYPERPLASIA, LYMPHOID	(49) 1 (2%)	(44)	(34)	(37)	
#COLON NEMATODIASIS	(50) 1 (2%)	(42)	(27)	(35)	
URINARY SYSTEM			-		
#KIDNFY GLOMERULONEPHRITIS, NOS	(49)	(46) 1_(2%)	(39) 2_(5%)	(39) 1_(3%)	

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

TABLE D2 (CONTINUED)

	HIGH DOSE CONTROL (UI 06-0160	LOW DOSE NTR) CONTROL (UNTR) 06-0220	LOW DOSE 06-R151	HIGH DOSE 06-0140	
LYMPHOCYTIC INFLAMMATORY INFILTR INFLAMMATION, CHRONIC INFLAMMATION, CHRONIC FOCAL NEPHROPARHY	2 (4%) 1 (2%)		15 (38%)	1 (28)	
GLOMERULOSCLEROSIS, NOS *KIDNEY/TUBULF MINERALIZATION	1 (2%) (49)	(46)	(39) 8 (21%)	1 (3%) (39)	
#URINARY BLADDER INFLAMMATION, NOS INFLAMMATION, CHRONIC FOCAL HYPERPLASIA, EPITHBLIAL	(50) 1 (2%)	(45)	(36)	(36) 1 (3%) 2 (6%)	
#U.BLADDER/SUBMUCOSA INFLAMMATION, CHRONIC INFLAMMATION, CHRONIC FOCAL PERIVA SCULITIS	(50) 1 (2%) 16 (32%) 1 (2%)	(45)	(36)	(36)	
#U.BLADDER/MUSCULARIS CALCIUM DEPOSIT	(50) 1 (2%)	, ,	(36)	, ,	
NDOCRINE SYSTEM					
#ADRENAL/CAPSULE HYPERPLASIA, NOS	(47)	(40)	(37) 4 (11%)	(39) 2 (5%)	
#THYROID FOLLICULAR CYST, NOS NECROSIS, FOCAL HYPERPLASIA, C-CELL HYPERPLASIA, FOLLICULAR-CELL	(41) 2 (5%) 1 (2%)	(29)	(27) 1 (4%)	(31) 1 (3%)	
RPRODUCTIVE SYSTEM					
*MAMMARY GLAND HYPERPLASIA, NOS METAPLASIA, SQUAMOUS	(50)	(47) 1 (2%)	(43) 1 (2%)	(42)	
#UTERUS HYDROMETRA PYOMETRA ABSCESS, NCS NECROSIS, FAT	(49) 5 (10%) 1 (2%)	•	(36)	(37) 1 (3%) 2 (5%) 1 (3%)	

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

TABLE D2 (CONTINUED)

·	HIGH DOSE CONTROL (UNTR) 06-0160	LOW DOSE CONTROL (UNTR) 06-0220	LOW DOSE 06-R151	HIGH DOSE 06-0140
CALCIPICATION, NOS METAPLASIA, SQUAMOUS	1 (2%)		2 (6%)	
#UTERUS/ENDCMETRIUM INFLAMMATICN, SUPPURATIVE HYPERPLASIA, NOS	(49) 2 (4%)	(45)	(36) 9 (25%)	(37) 1 (3%)
HYPERPLASIA, CYSTIC	32 (65%)		4 (11%)	3 (8%)
*OVARY/OVIDUCT	(49)	(45)	(36)	(37)
INFLAMMATION, NOS DEGENERATION, NOS		1 (2%)		1 (3%)
#OVARY	(48)	(40)	(32)	(37)
CYST, NOS INFLAMMATION, NOS	6 (13%)		3 (9%)	
INFLAMMATION, SUPPURATIVE ABSCESS, NOS	1 (2%)		5 (16%)	1 (3%) 1 (3%)
INFLAMMATION, CHRONIC DEGENERATION, NOS	1 (2%)		2 (6%)	1 (3%)
PECIAL SENSE ORGANS				
USCHLOSKELFTAL SYSTEM				
NONE				
ODY CAVITIES				
*PERITONEUM INFLAMMATION, NOS	(50)		(43)	(42) 1 (2%)
LL OTHER SYSTEMS				
*MULTIPLE ORGANSAMYLDIDOSIS	(50) 1 (2%)	(47)	(43)	(42)

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

TABLE D2. (CONCLUDED)

		LOW DOSE CONTROL (UNTR) 06-0220		
DMENTUM				
PERIVASCULITIS	1			
ECIAL MORPHOLOGY SUMMARY				
BCIAL MORPHOLOGY SUMMARY				
ECIAL MORPHOLOGY SUMMARY NO LESION REPORTED	2	30	2 2 2	11
BCIAL MORPHOLOGY SUMMARY NO LESION REPORTED ANIMAL MISSING/NO NECROPSY NECROPSY PERF/NO HISTO PERFORMED	2	30 2	2 2 2 2	11
ECIAL MORPHOLOGY SUMMARY NO LESION REPORTED ANIMAL MISSING/NO NECROPSY	2		2 2 2 2	11