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# BIOASSAY OF SULFISOXAZOLE

# FOR POSSIBLE CARCINOGENICITY

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



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

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This report presents the results of the bioasay of FOREWORD: sulfisoxazole conducted for the Carcinogenesis Testing Program, Division of Cancer Cause and Prevention, National Cancer Institute (NCI), National Institutes of Health, Bethesda, This is one of a series of experiments designed to Marvland. determine whether selected chemicals have the capacity to produce cancer in animals. Negative results, in which the test animals do not have a greater incidence of cancer than control animals, do not necessarily mean that the test chemical is not a carcinogen, inasmuch as 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 that exposure to the chemical is a potential risk to man. The actual determination of the risk to man from chemicals found to be carcinogenic in animals requires a wider analysis.

CONTRIBUTORS: This bioassay of sulfisoxazole was conducted by Hazleton Laboratories America, Inc., Vienna, Virginia, initially under direct contract to NCI and currently under a subcontract to Tracor Jitco, Inc., Rockville, Maryland, prime contractor for the NCI Carcinogenesis Testing Program.

The NCI project officers who were responsible for selecting the protocols used in this bioassay were Drs. N. P. Page (1,2) and C. Cueto (1). The principal investigators were Drs. M. B. Powers (3) and R. W. Voelker (3). Ms. K. J. Petrovics (3) was responsible for data management, and Mr. G. Najarian (3) for animal care. Histopathologic examinations were performed by Drs. B. W. Ulland (3) and D. A. Banas (3) and reviewed by Dr. Voelker, and the diagnoses included in this report represent their interpretation.

Animal pathology tables and survival tables were compiled at EG&G Mason Research Institute (4). Statistical analyses were performed by Dr. J. R. Joiner (5) and Ms. P. L. Yong (5), using methods selected for the bioassay program by Dr. J. J. Gart (6).

Chemicals used in this bioassay were analyzed at Midwest Research Institute under the direction of Dr. E. Murrill (7), and feed mixtures containing the test chemical were analyzed at Hazleton Laboratories by Dr. C. L. Guyton (3) and Mr. E. Missaghi (3). The results of these analyses were reviewed by Dr. C. W. Jameson (5).

This report was prepared at Tracor Jitco (5) in collaboration with Hazleton Laboratories and NCI. Those responsible for the report at Tracor Jitco were Dr. L. A. Campbell, Director of the Bioassay Program; Dr. S. S. Olin, Deputy Director for Science; Dr. J. F. Robens, toxicologist; Dr. R. L. Schueler, pathologist; Dr. G. L. Miller, Mr. W. D. Reichardt, and Ms. L. A. Waitz, bioscience writers; and Dr. E. W. Gunberg, technical editor, assisted by Ms. Y. E. Presley and Ms. P. J. Graboske.

The following scientists at NCI (1) were responsible for evaluating the bioassay experiment, interpreting the results, and reporting the findings: Dr. Kenneth C. Chu, Dr. Cipriano Cueto, Jr., Dr. J. Fielding Douglas, Dr. Richard A. Griesemer, Dr. Thomas E. Hamm, Dr. William V. Hartwell, Dr. Morton H. Levitt, Dr. Harry A. Milman, Dr. Thomas W. Orme, Dr. Sherman F. Stinson, Dr. Jerrold M. Ward, and Dr. Carrie E. Whitmire.

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#### SUMMARY

A bioassay of sulfisoxazole for possible carcinogenicity was conducted by administering the chemical by gavage to Fischer 344 rats and B6C3F1 mice.

Groups of 50 rats of each sex and 50 mice of each sex were administered sulfisoxazole suspended in 0.5% aqueous carboxymethyl cellulose 7 days per week at one of two doses, either 100 or 400 mg/kg body weight for the rats and either 500 or 2,000 mg/kg for the mice. Vehicle controls consisted of groups of 50 rats of each sex and 50 mice of each sex that were administered only the aqueous 0.5% carboxymethyl cellulose. Untreated controls consisted of groups of 50 rats of each sex and 50 mice of each sex. The dosed groups of the rats and mice were administered the chemical by gavage for 103 weeks, then observed for 1 to 3 additional weeks; the vehicle-control groups were similarly administered 0.5% carboxymethyl cellulose alone. A11 surviving rats and mice were killed at weeks 104 to 106.

Mean body weights of high-dose male rats and female mice were slightly lower than those of corresponding vehicle controls during the last 40 to 50 weeks of the bioassay; mean body weights of dosed female rats and male mice were unaffected. Survival rates were unaffected by the test chemical, and adequate numbers of animals were at risk for the development of late-appearing tumors.

No tumors occurred in the dosed groups of rats or mice of either sex at incidences that were significantly higher than those of the vehicle-control groups.

It is concluded that under the conditions of this bioassay, sulfisoxazole was not carcinogenic for either Fischer 344 rats or B6C3F1 mice.

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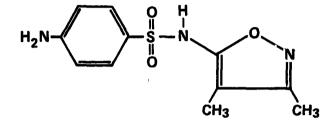
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#### I. INTRODUCTION



#### Sulfisoxazole

Sulfisoxazole (CAS 127-69-5; NCI C50022) is an antimicrobial drug that is a derivative of sulfanilamide; the chemical name is  $N^{1}$ -(3,4-dimethyl-5-isoxazolyl)sulfanilamide (Koralkovas and Burckhalter, 1976). The sulfanilamide part of the molecule is a structural analog and an effective antimetabolite of p-aminobenzoic-acid (PABA), one of the components of folic acid. The incorporation of sulfanilamides into folic acid precursors inhibits the synthesis of folic acid in susceptible microorganisms and hence, by indirectly inhibiting the formylation of 5'-phosphoribosyl-4-carboxamide-5-aminoimidazole, prevents the biosynthesis of purine (Lehninger, 1975). Susceptible microorganisms are those that must synthesize their own folic acid; thus, bacteria that do not require folic acid or that can utilize preformed folic acid are not affected (Weinstein, 1975). While some toxic effects may be produced by sulfanilamides in mammals, these are not due to folic acid deficiency, since mammalian cells do not synthesize folic acid and depend on the diet as a source of this material.

Sulfisoxazole was patented in 1947 (Stecher, 1968) and was first used clinically in 1949 (Hayton et al., 1976). It is a broad-spectrum antibacterial agent, effective against both gram-positive and gram-negative organisms (Weinstein, 1975). The foremost clinical use of this drug is in the treatment of urinary tract infections such as cystitis, pyelitis, and pyelonephritis (Stanford Research Institute, 1973). Other uses include the treatment of trachoma, inclusion conjunctivitis, nocardiosis, chancroid, certain types of meningococcal meningitis, and otitis media as well as adjunctive therapy for malaria (American Medical Association, 1971). The normal adult dose is 1 gram, given orally every 4 to 6 hours. The parenteral dose is 100 mg/kg/day, given in divided doses (Weinstein, 1975).

Sulfisoxazole is available in 500 mg tablets; as acetyl sulfisoxazole in a pediatric suspension; as the diolamine salt for injection; as the diolamine salt in a 4% solution and 4% ointment for eye, ear, and nose applications; and as a 10%

vaginal cream. Sulfisoxazole is also marketed in combination with phenazopyridine, the latter providing pain relief from urinary tract infections (Physician's Desk Reference, 1977; Kastrup and Schwach, 1977; Weinstein, 1975).

Although the use of sulfonamide drugs has declined in the past few years due to the emergence of drug-resistant strains of bacteria and the development of newer antimicrobial drugs with side fewer effects (American Medical Association, 1971; Weinstein, 1975), these compounds are still widely prescribed on a chronic basis for the treatment of recurrent urinary tract infections and certain other infectious diseases (American Medical Association, 1971). For 1977, approximately 990,000 new prescriptions for sulfisoxazole tablets, suspensions, or syrups from a single manufacturer were written (National Disease and Therapeutic Index, 1977). Sulfisoxazole was selected for study in the Carcinogenenesis Testing Program because of its extensive clinical use in humans.

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#### **II. MATERIALS AND METHODS**

#### A. Chemical

Sulfisoxazole was obtained as the USP-grade chemical in two different lots from Hoffmann-LaRoche, Inc., Nutley, New Jersey. Lot No. 414034 was used for the subchronic study and Lot No. 466094 for the chronic study. USP specifications require 99 to 101% purity on a dry basis with a melting range of 194 to 199°C (USP, 1975).

The identity and purity of both lots of sulfisoxazole were confirmed in analysis at Midwest Research Institute. The melting range for Lot No. 414034 was 196 to  $199^{\circ}C$  and for Lot No. 466094, 194 to  $199^{\circ}C$ , with decomposition. Titration of the sulfamide acid group with tetrabutyl ammonium hydroxide indicated a purity of 98.0  $\pm$  0.3% for Lot No. 414034 and 99.3  $\pm$  0.6% for Lot No. 466094. High-pressure liquid chromatography showed one homogeneous peak for both lots. Elemental analyses (C, H, N, S) for both lots were correct for  $C_{11}H_{13}N_3O_3S$ , the molecular formula of sulfisoxazole. Nuclear magnetic resonance and infrared spectra were consistent with spectra for sulfisoxazole given in the literature (Sadtler Standard Spectra, Sadtler

Research Laboratories, Philadelphia, Pennsylvania; Turczan and Medwick, 1972).

The bulk chemical was stored at room temperature.

#### B. Dosage Preparation

Sulfisoxazole was suspended in an aqueous 0.5% carboxymethyl cellulose (Sigma, St. Louis, Mo.) solution for administration during these studies. Suspensions were prepared at desired concentrations once per week and stored at  $4^{\circ}$ C for up to 1 week. To ensure the uniformity of the suspension, it was stirred continuously during the dosing time using a magnetic stirring bar.

Due to problems encountered in the analytical method that was used and to the 1- to 5-month lag period between preparation and analysis, analyses of the suspensions varied considerably (i.e., greater than  $\pm$  10%) from the concentrations established for use in the bioassay during the first year of the study. A modification in the analytical procedures and prompt performance of the analyses resulted in an improvement in the recoveries obtained from subsequent samples, which were shown to be within a  $\pm$  10% tolerance limit.

#### C. Animals

Fischer 344 rats and B6C3F1 mice were obtained through a National Cancer Institute contract from the Frederick Cancer Research Center Animal Farm, Frederick, Maryland, through contracts with the Division of Cancer Treatment, NCI. They were received at the test lab at 4 weeks of age, and housed within the test facilities. Animals determined to be free from observable disease were assigned to the various dosed and control groups based on initial individual body weights so that a homogeneous distribution of mean weights and weight ranges was obtained between groups. Rats were approximately 5 weeks of age and mice were approximately 7 weeks of age when placed on study.

#### D. Animal Maintenance

All animals were housed in rooms maintained at a temperature of 20 to 24<sup>o</sup>C and a relative humidity of 45 to 55%. Incoming air was filtered through 2-inch-thick disposable fiberglass filters at a rate that allowed 12 changes of room air per hour. Fluorescent lighting was provided on a 12-hour-per-day cycle.

The rats and mice were housed in polycarbonate cages covered with

stainless steel cage lids and nonwoven fiber filter bonnets (Filtek, Appleton, Wis.). The rats were initially housed five per cage; at week 52, however, the males were divided into groups of two or three per cage. The mice were housed five per cage throughout the study.

All cages were furnished with heat-treated hardwood chip bedding (Sani-Chips<sup>®</sup>, Shurfire Products Corporation, Beltsville, Md.); the bedding was changed twice per week. Diets and well water were provided <u>ad libitum</u>. Feed hoppers and water bottles were refilled twice per week.

Cages and water bottles were sanitized at 81°C twice per week, feed hoppers once per week, and cage racks once per month. An industrial dishwasher was used for the water bottles; a cage and rack washer was used for the feed hoppers, cages, and racks. The detergent used was Super Soilax<sup>®</sup>. When racks were washed, clean racks containing cages of animals were randomly repositioned in the rooms.

The rats and mice were housed in separate rooms. Control animals were housed in the same room as the respective dosed animals.

Rats administered sulfisoxazole by gavage were maintained in the

same room as rats being administered the following chemicals:

#### Feed Studies

(CAS 119-53-9) benzoin (CAS 120-61-6) dimethyl terephthalate (CAS 89-78-1) dl-menthol (CAS 13463-67-7) titanium dioxide

**Gavage Studies** 

(CAS 108-60-1) bischloroisopropyl ether (CAS 7488-56-4) selenium disulfide

Drinking Water Studies

(CAS 108-95-2) pheno1

At week 48, the rats fed titanium dioxide, dl-menthol, or benzoin were moved to a separate room for the remainder of the bioassay.

Mice administered sulfisoxazole by gavage were maintained in the same room as mice being administered the following chemicals:

#### Feed Studies

(CAS 119-53-9) benzoin (CAS 120-61-6) dimethyl terephthalate (CAS 89-78-1) dl-menthol (CAS 13463-67-7) titanium dioxide

Gavage Studies

(CAS 108-60-1) bischloroisopropyl ether (CAS 7488-56-4) selenium disulfide

Drinking Water Studies

(CAS 108-95-2) phenol

#### E. Subchronic Studies

Subchronic oral gavage studies were conducted to estimate the maximum tolerated doses (MTD's) of sulfisoxazole, on the basis of which two concentrations (hereinafter referred to as "low" and "high" doses) were selected for administration in the chronic studies. Groups of ten males and ten females of each species were administered sulfisoxazole by gastric intubation 7 days per week. Ten animals of each sex and species received only the 0.5% aqueous carboxymethyl cellulose solution. Animals were observed daily for deaths and weighed once per week. Table 1 shows the number of animals in each dosed group that survived during the course of administration and the week on study when the last death occurred. The table also shows the mean body weights of the dosed animals at week 13, expressed as percentages of mean body weights of controls.

After 13 weeks of administration of the test chemical, the animals were observed for 1 additional week and then killed and necropsied. The footnotes to table 1 indicate the number of animals having clinical signs and the degree of the finding.

Based on these data, the doses selected for the chronic studies

<del> </del>		Male		Female		
Dose (mg/kg/ day)	Surviv- _al(a)	Week on Study when Last Animal Died	Mean Weight at week 13 as % of Control	Surviv- al(a)	Week on Study when Last Animal Died	Mean Weight at Week 13 as % of Control
RATS						
100	5/5		103	5/5		100
215	5/5		102	5/5		100
464	5/5		97	5/5		99
1,000(Ъ)	5/5		94	5/5	·	102
2,160(c)	1/5	13	91	5/5		98
MICE(d)						
100	5/5		104	5/5		104
215	5/5		104	5/5		104
464	5/5		108	5/5		100
1,000	5/5		104	5/5		100
2,160	3/5	3	104	5/5		104

#### Table 1. Sulfisoxazole Subchronic Oral Gavage Studies in Rats and Mice

(a) Numbers surviving/number in group.

(b) Two males had slight interstitial nephritis.

(c) Two males had severe interstitial nephritis; eight males and four females had tubular nephrosis.

(d) No dose-related histopathologic findings were reported for the mice.

were 100 and 400 mg/kg for the rats and 500 and 2,000 mg/kg for the mice.

#### F. Chronic Studies

The test groups, doses administered, and durations of the chronic feeding studies are shown in tables 2 and 3.

#### G. Clinical and Pathologic Examinations

All animals were observed twice per day for deaths. Clinical signs and the presence of palpable masses were recorded every week. Mean body weights were recorded every 2 weeks for the first 12 weeks and monthly thereafter.

Animals that were moribund and those that survived to the termination of the study were killed by exsanguination under (Diabuta1<sup>®</sup>, sodium pentobarbital anesthesia Diamond The Diabutal<sup>®</sup>, Laboratories, Inc., Moines, Iowa). Des containing 60 mg/ml sodium pentobarbital, was injected intraperitoneally at a volume of 0.3 to 0.5 ml for the rats and 0.03 to 0.05 ml for the mice.

Sex and Test <u>Group</u>	Initial No. of <u>Animals(a)</u>	Sulfisoxazol Dose (b) <u>(mg/kg)</u>	e <u>Time o</u> Dosed (weeks)	n Study Observed (weeks)
<u>Male</u>				
Untreated-Control	50	0		106-107
Vehicle-Control(c)	50	0	103	3
Low-Dose	50	100	103	3
High-Dose	50	400	103	2
Female				
Untreated-Control	50	0		106-107
Vehicle-Control(c)	50	0	103	3
Low-Dose	50	100	103	3
High-Dose	50	400	103	3

#### Table 2. Chronic Gavage Studies with Sulfisoxazole in Rats

(a) Rats were approximately 5 weeks of age when placed on study.

- (b) Dosed rats were administered a suspension of sulfisoxazole in 0.5% aqueous carboxymethyl cellulose by gavage 7 days per week. A volume of 1 ml/kg body weight was administered, based on the group mean weight and adjusted at weighing periods.
- (c) Vehicle controls received a volume of the 0.5% carboxymethyl cellulose solution equal to the highest volumetric dose of test solution given.

Sex and Test Group	Initial No. of Animals(a)	Sulfisoxazole Dose (b) (mg/kg)	<u>Time</u> Dosed (weeks)	on Study Observed (weeks)
Male				
Untreated-Control	50	0		104
Vehicle-Control(c)	50	0	103	1
Low-Dose	50	500	103	1
High-Dose	50	2,000	103	1-2
Female				
Untreated-Control	50	0		104
Vehicle-Control(c)	50	0	103	1
Low-Dose	50	500	103	2
High-Dose	50	2,000	103	2

### Table 3. Chronic Gavage Studies with Sulfisoxazole in Mice

(a) Mice were approximately 7 weeks of age when placed on study.

- (b) Dosed mice were administered a suspension of sulfisoxazole in 0.5% aqueous carboxymethyl cellulose by gavage 7 days per week. A volume of 10 ml/kg body weight was administered, based on the group mean weight and adjusted at weighing periods.
- (c) Vehicle controls received a volume of the 0.5% carboxymethyl cellulose solution equal to the highest volumetric dose of test solution given. Vehicle-control groups were started approximately 1 week before other groups.

The pathologic evaluation consisted of gross and microscopic examination of major tissues, major organs, and all gross lesions from killed animals and from animals found dead. The different tissues were preserved in 10% buffered formalin, embedded in paraffin, sectioned, and stained with hematoxylin and eosin. The following tissues were examined microscopically: skin, lungs and bronchi, trachea, bone and bone marrow, spleen, lymph nodes, heart, salivary gland, liver, gallbladder (mice), pancreas, stomach, small intestine, large intestine, kidney, urinary bladder, pituitary, adrenal, thyroid, parathyroid, mammary gland, prostate or uterus, testis or ovary, and brain. Occasionally, additional tissues were also examined microscopically. Special staining techniques were utilized when indicated for more definitive diagnosis.

A few tissues from some animals were not examined, particularly from those animals that may have died early, been missing, or been in advanced states of cannibalization or autolysis. Thus, the number of animals from which particular organs or tissues were examined microscopically varies and does not necessarily represent the number of animals that were placed on study 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 appropriate statistical techniques described in this section. Those analyses of the experimental results that bear on the possibility of carcinogenicity are discussed in the statistical narrative sections.

Probabilities of survival were estimated by the product-limit procedure of Kaplan and Meier (1958) and are presented in this report in the form of graphs. Animals were statistically censored as of the time that they died of other than natural causes or were found to be missing; animals dying from natural causes were not statistically censored. Statistical analyses for

a possible dose-related effect on survival used the method of Cox (1972) for testing two groups for equality and Tarone's (1975) extensions of Cox's methods for testing for 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 is 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) was used to compare the tumor incidence of a control group with that of a group of dosed animals at each dose level. When results for a number of dosed 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) 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), was also used. Under the assumption of a linear trend, this test determines 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 is 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 an animal died naturally or was 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 less than 0.05, twotailed 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 dosed 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 dosed 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 dosed 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% of a large number of identical experiments, the true ratio of the risk in a dosed 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 (P less than 0.025 one-tailed test when the control incidence is not zero, P less than 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. RESULTS - RATS

#### A. Body Weights and Clinical Signs (Rats)

Mean body weights of the dosed male rats were slightly lower than those of corresponding vehicle controls during the last 40 weeks of the bioassay (figure 1); mean body weights of the females were unaffected. Other clinical signs occurred at comparable frequencies in dosed and control groups and included hunched or thin appearance, body sores, alopecia, urine stains, respiratory involvements, and various lesions of the eyes. The eye lesions were noted in all groups at increasing frequency from week 10 to termination of the study.

### B. Survival (Rats)

The Kaplan and Meier curves estimating the probabilities of survival for male and female rats administered sulfisoxazole by gavage at the doses of this bioassay, together with those of the vehicle controls, are shown in figure 2. Two control groups, a vehicle-control and an untreated-control, were used in this study. However, in the statistical analysis, only the

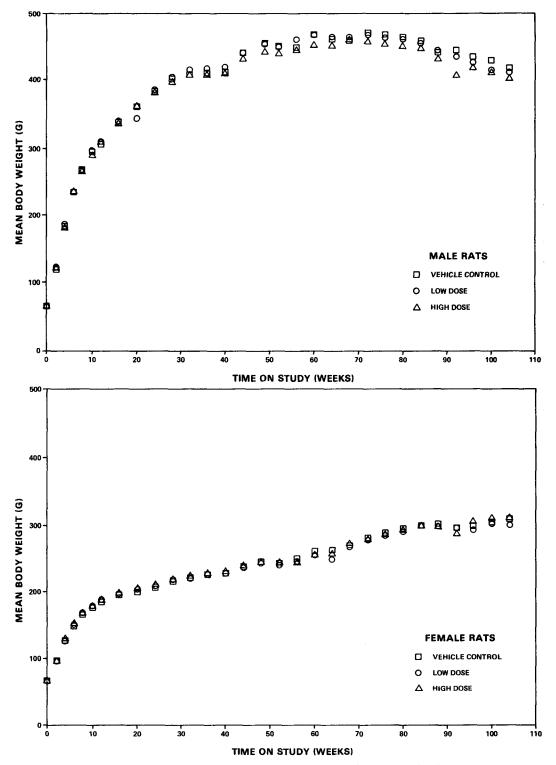


Figure 1. Growth Curves for Rats Administered Sulfisoxazole by Gavage

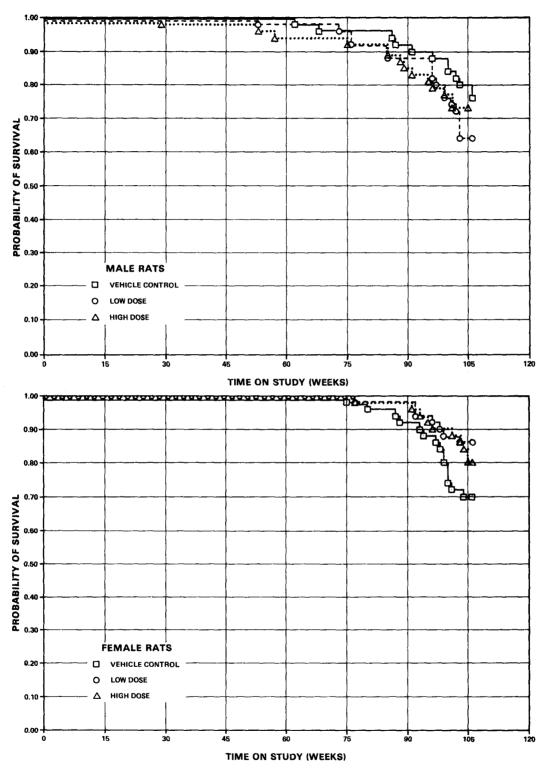


Figure 2. Survival Curves for Rats Administered Sulfisoxazole by Gavage

vehicle-control group is used, because the test conditions of the vehicle-control group more closely resemble those of the dosed groups. The result of the Tarone test for dose-related trend in mortality is not significant in either sex.

In male rats, 36/50 (72%) of the high-dose group, 32/50 (64%) of the low-dose group, and 38/50 (76%) of the vehicle-control group lived to the end of the bioassay. In females, 40/50 (80%) of the high-dose group, 43/50 (86%) of the low-dose group, and 35/50 (70%) of the vehicle-control group lived to the end of the bioassay.

Sufficient numbers of rats of each sex were at risk for the development of late-appearing tumors.

### C. Pathology (Rats)

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 Cl and C2.

A variety of neoplastic and nonneoplastic lesions were observed in this study. These were of a type, incidence, and distribution commonly observed in aged Fischer 344 rats and are therefore considered spontaneous and not related to compound administration.

Based on the pathologic examination, sulfisoxazole was neither carcinogenic nor toxic to Fischer 344 rats under the conditions of this bioassay.

### D. Statistical Analyses of Results (Rats)

Tables El and E2 in Appendix E contain the statistical analyses of the incidences of those primary tumors that occurred in at least two animals of one group and at an incidence of at least 5% in one or more than one group. Two control groups, a vehicle-control and an untreated-control, were used in this study. However, in the statistical analysis, only the vehicle-control group is used, because the test conditions of the vehicle-control group more closely resemble those of the dosed groups.

In male rats, the result of the Cochran-Armitage test for dose-related trend in the incidences of tumors and those of the Fisher exact test comparing the incidence of tumors in the

vehicle-control group with that in each dosed group are not significant.

In female rats, the results of the Cochran-Armitage test for the incidence of monocytic leukemia and the combined incidence of malignant lymphocytic lymphoma and monocytic leukemia of the hematopoietic system are significant (P = 0.016 and P = 0.033, respectively), but those of the Fisher exact test are not. There is no other incidence of tumors in female rats with significant statistical test results.

In each of the 95% confidence intervals for relative risk, shown in the tables, the value of one is included; this indicates the absence of significant positive results. It should also be noted that each of the intervals has an upper limit greater than one, indicating the theoretical possibility of the induction of tumors by sulfisoxazole, which could not be detected under the conditions of this test.

#### IV. RESULTS - MICE

### A. Body Weights and Clinical Signs (Mice)

Mean body weights of the high-dose female mice were slightly lower than those of corresponding vehicle controls during the last 50 weeks of the bioassay (figure 3); mean body weights of the males were unaffected. Other clinical signs occurred at comparable rates for dosed and control groups and included hunched or thin appearance, body sores, alopecia, genital irritation and swelling, and distended abdomen.

### B. Survival (Mice)

The Kaplan and Meier curves estimating the probabilities of survival for male and female mice administered sulfisoxazole by gavage at the doses of this bioassay, together with those of the vehicle controls, are shown in figure 4. Two control groups, a vehicle-control and an untreated-control, were used in this study. However, in the statistical analysis, only the vehicle-control group is used, because the test conditions of the vehicle-control group more closely resemble those of the dosed

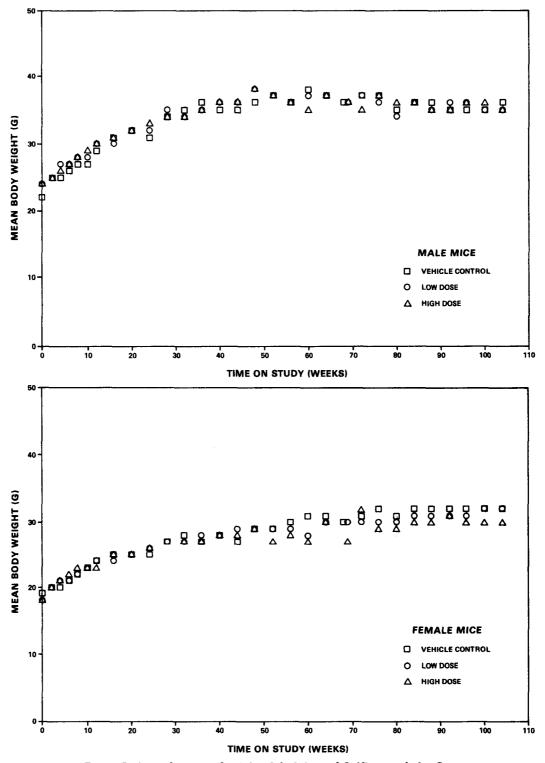


Figure 3. Growth Curves for Mice Administered Sulfisoxazole by Gavage

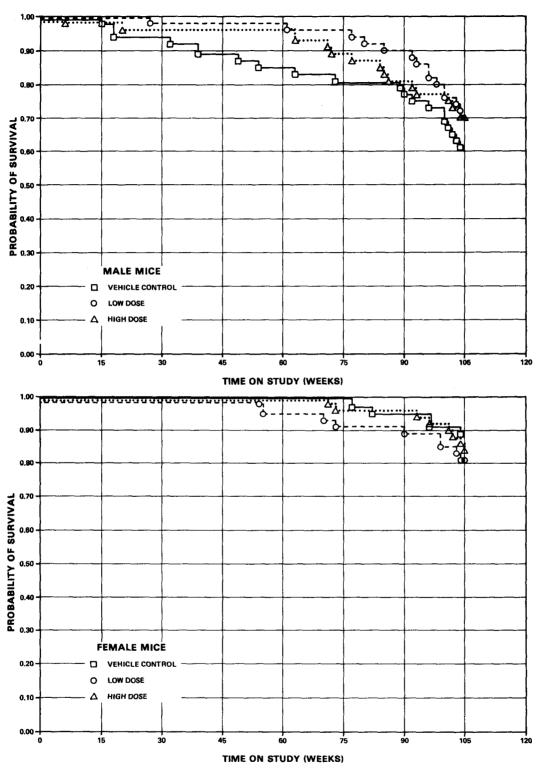


Figure 4. Survival Curves for Mice Administered Sulfisoxazole by Gavage

groups. In each sex of mice, the vehicle-control group was started on study 1 week earlier than the dosed groups; however, the Tarone test for dose-related trend in mortality is applied as if the three groups were started on study at the same time. The Cox test is also used to compare the survival of the vehicle-control group with that of each dosed group. The result of the Tarone test is not significant in either sex. The results of the Cox test comparing the survival of the vehicle-control group with that of each dosed group are also not significant in either sex.

In male mice, 34/50 (68%) of the high-dose group, 36/50 (72%) of the low-dose group, and 30/50 (60%) of the vehicle-control group lived to the end of the bioassay. In females, 42/50 (84%) of the high-dose group, 40/50 (80%) of the low-dose group, and 43/50 (86%) of the vehicle-control group lived to the end of the bioassay.

Sufficient numbers of mice of each sex were at risk for the development of late-appearing tumors.

### C. Pathology (Mice)

Histopathologic findings on neoplasms in mice are summarized in Appendix B, tables B1 and B2; findings on nonneoplastic lesions are summarized in Appendix D, tables D1 and D2.

There was a high incidence of primary liver tumors in dosed male mice. It was also high in both untreated- and vehicle-control males. This finding is considered to be unrelated to compound administration.

A moderate number of hematopoietic neoplasms and a low incidence of other neoplasms were observed in both control and dosed groups of mice. These neoplasms were of the usual number and type observed in B6C3F1 mice of this age.

Other degenerative, proliferative, and inflammatory lesions observed were also of the usual number and kind observed in aged B6C3F1 mice, and their incidences in control and dosed groups of mice were comparable.

Based on the pathologic examination, sulfisoxazole at the dosage used was neither carcinogenic nor toxic to B6C3F1 mice under the conditions of this bioassay.

#### D. Statistical Analyses of Results (Mice)

Tables Fl and F2 in Appendix F contain the statistical analyses of the incidences of those primary tumors that occurred in at least two animals in one group and at an incidence of at least 5% in one or more than one group. Two control groups, а vehicle-control and an untreated-control, were used in this study. However, in the statistical analysis, only the vehicle-control group is used, because the test conditions of the vehicle-control group more closely resemble those of the dosed groups. In each sex of mice, the vehicle-control group was started on study 1 week earlier than the dosed groups; however, the Cochran-Armitage test for dose-related trend in the incidence of tumors is applied as if the three groups were started on study at the same time.

In male mice, the result of the Cochran-Armitage test for positive dose-related trend in the incidence of tumors and the results of the Fisher exact test are not significant. In female comparing incidence of mice, the Fisher exact test the hepatocellular carcinomas in the low-dose and vehicle-control groups indicates a P value of 0.030, which is above the 0.025 level for significance when the Bonferroni inequality criterion is used for multiple comparison. The incidence of this tumor in

the high-dose females is not significant, nor is the result of the Cochran-Armitage test for the females. The result of the Cochran-Armitage test on the incidence of female mice with either alveolar/bronchiolar adenoma or carcinoma is significant (P =0.006). The Fisher exact comparison of incidences in the high-dose and control groups indicates a P value of 0.030, which is above the 0.025 level required for significance when the Bonferroni inequality criterion is used for multiple comparison.

Significant results in the negative direction are observed in the incidence of lung tumors in male mice and in the incidence of adenocarcinomas of the mammary gland in female mice.

In most of the 95% confidence intervals for relative risk, shown in the tables, the value of one or less than one is included; this indicates the absence of significant positive results. It should also be noted that each of the intervals (except that for the incidence of adenocarcinomas of the mammary gland in high-dose female mice) has an upper limit greater than one, indicating the theoretical possibility of the induction of tumors by sulfisoxazole, which could not be detected under the conditions of this test.

#### V. DISCUSSION

Mean body weights of the high-dose male rats and female mice were slightly lower than those of the corresponding vehicle controls during the last 40 to 60 weeks of the bioassay; mean body weights of the dosed female rats and male mice were unaffected. No other observed could be clinical signs were that related to administration of the test compound. Survival rates of both rats and mice were unaffected by the test chemical. All dosed groups of rats and mice could probably have tolerated higher doses. Adequate numbers of rats and mice in dosed and control groups were at risk for the development of late-appearing tumors.

In the male rats and male mice, no tumors occurred in the dosed groups at incidences that were significantly higher than those of the vehicle-control groups.

In the female rats, monocytic leukemia occurred at incidences that were dose related (P = 0.016), as did combined monocytic leukemia and lymphocytic lymphoma (P = 0.033); however, in direct comparisons, the incidence of these tumors in the individual dosed groups were not significantly higher than those for the vehicle-control groups, and, in addition, there were four animals

with monocytic leukemia among the untreated controls. Thus, the occurrence of these tumors in the dosed groups of female rats cannot be clearly related to administration of the test chemical.

In the female mice, alveolar/bronchiolar adenomas or carcinomas occurred at incidences that were dose related (P = 0.006), and, in a direct comparison, the incidence of the tumors in the high-dose group was higher (P = 0.030) than that for the Similarly, hepatocellular carcinomas vehicle-control group. occurred in the low-dose group at an incidence that was higher (P = 0.030) than that for the vehicle-control group. However, these P values for direct comparisons of dosed groups with control groups are above the level of P = 0.025 required for significance when the Bonferroni inequality criterion is used for multiple of alveocomparison. Thus, the occurrence lar/bronchiolar adenomas or carcinomas in the high-dose group and of hepatocellular carcinomas in the low-dose group cannot be clearly related to administration of the test material.

The oral  $LD_{50}$  of sulfisoxazole has been reported as 10,000 mg/kg for white rats and albino mice (Schnitzer et al., 1946). When the rats were administered sulfisoxazole in the diet for 26 weeks at daily doses beginning at 2,190 mg/kg and ending at 1,350 mg/kg, they showed no inhibition of growth and no macroscopic or

microscopic change that could be attributed to the chemical. A number of sulfonamides have been reported to induce hyperplasia of the thyroid gland in rats of unspecified strain (Astwood et al., 1943; Mackenzie and Mackenzie, 1943); this effect was believed to be mediated by pituitary thyrotropin (Swarm et al., 1973). When Charles River CD rats were administered sulfamethoxazole, the hyperplasia progressed to adenoma formation and metastases to the lung (Swarm et al., 1973). No evidence of effects on the thyroid is found in reports on sulfisoxazole, including the 26-week chronic study by Schnitzer et al. (1946) and the present 103-week study.

It is concluded that under the conditions of this bioassay, sulfisoxazole was not carcinogenic for either Fischer 344 rats or B6C3F1 mice.

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SUMMARY OF THE INCIDENCE OF NEOPLASMS IN RATS ADMINISTERED SULFISOXAZOLE BY GAVAGE

## TABLE A1.

## SUMMARY OF THE INCIDENCE OF NEOPLASMS IN MALE RATS ADMINISTERED SULFISOXAZOLE BY GAVAGE

	UNTREATED Control	VEHICLE Control	LOW DOSE	HIGH DOSE
ANIMALS INITIALLY IN STUDY	50	50	50	50
ANIMALS NECROFSIED ANIMALS EXAMINED HISTOPATHOIOGICALLY	49 49	50 50	50 50	50 50
NTEGUMENTARY SYSTEM				
*SKIN	(49)	(50)	(50)	(50)
PAPILLOMA, NOS Souamous cell papilloma	1 (2%)	1 (2%)	1 (2%)	1 (2%)
SUUANOUS CELL CARCINONA	1 (2%)	2 (4%)		1 (2)
BASAL-CELL CARCINONA				1 (2%)
*SUBCUT TISSUE FIBROMA	(49) 1 (2%)	(50) 1 (2%)	(50) 6 (12%)	(50) 2 (4%)
FIBROSAFCCMA	2 (4%)	2 (4%)	1 (2%)	-
HEMANGIOSAFCOMA OSTEOSARCCMA			1 (2%)	2 (4%
NEUROFIBECHA			2 (4%)	
ESPIBATORY SYSTEM				
*TPACHEA	(48)	(50)	(50)	(49)
FOLLICULAR-CELL CARCINOMA, METAS	. ,		1 (2%)	
#LUNG	(48)	(50)	(50)	(50)
ALVEOLAR/EPONCHIOLAR ADENOMA	2 (4%) 1 (2%)	1 (2%)	1 (2%)	1 (2
ALVEOLAR/ERONCHIOLAR CAPCINCMA INTERSTITIAL-CELL TUMOR, METASTA	1 (2%)		( (24)	
PHEOCHRONOCYTONA, METASTATIC FIBROSARCCMA, METASTATIC			1 (2%)	1 (2%)
CSTBOSAPCCMA, METASTATIC			1 (2%)	
EMATOPOIETIC SYSTEM		·		
*MULTIPLE OFGANS	(49)	(50)	(50)	(50)
MALIG.LYMPHCMA, UNDIFFER-TYPE MALIG.LYMFHOMA, LYMPHOCYTIC TYPE	1 (28)	1 (2%)	1 (2%)	

\* NUMBER OF ANIMALS WITH TISSUE EXAMINED MICROSCOPICALLY \* NUMBER OF ANIMALS NECROFSIED

	UNTREATED Control	VEHICLE Control	LOW DOSE	HIGH DOSE
UNDIFFERENTIATED LEUKEMIA Myelononcytic leukemia	1 (2%)	1 (2%)	< 1100x	
MONOCYTIC LEUKEMIR	6 (12%)	8 (16%)	6 (12%)	8 (16%)
*SUBCUT TISSUE/GROIN MALIG.LYMPHONA, HISTIOCYTIC TYPE	(49)	(50)	(50)	(50) 1 (2%)
#SPLBEN	(48)	(50)	(50)	(50)
FIBROSARCCHA, METASTATIC MESOTHELICHA, METASTATIC ANGIOSARCCHA Malig.lymphcna, histiocytic type	1 (2%)		1 (2%)	1 (2%) 1 (2%)
*BPONCHIAL LYMPH NODE FIBROSARCCEA, METASTATIC	(47) 1 (2%)	(50)	(48)	(50)
<pre>#MESENTERIC L. NODE     FIBPOSARCCHA, METASTATIC</pre>	(47) 1 (2%)	(50)	(48)	(50)
<pre>#LIVER MONOCYTIC LEUKEMIA</pre>	(48)	(50) 1 (2%)	(50)	(50)
CIRCULATORY SYSTEM				
#HEART	(48)	(50)	(50)	(50)
ADENOCARCINOMA, NOS, METASTATIC Alvzolar/Eronchiolar ca, metasta Pibrosarccma, metastatic			1 (2%) 1 (2%)	1 (2%)
CIGESTIVE SYSTEM				
#LIVER	(48)	(50)	(50)	(50)
NEOPLASTIC MODULE HEPATOCELLULAR CARCINOMA	2 (4%)	1 (2%)	2 (4%) 2 (4%)	2 (4%)
#PANCREAS	(48)	(50)	(49)	(50)
FIBROSARCCMA, METASTATIC Mesothelicma, metastatic	1 (2%)		1 (2%)	
*ESOPHAGUS FOLLICULAR-CELL CARCINOMA, METAS	(48)	(47)	(46) 1 (2%)	(47)
*SMALL INTESTINE ADENOCAPCINCHA, NOS	(48)	(50)	(48)	(50)

\* NUMBER OF ANIMALS WITH TISSUE EXAMINED MICFOSCOPICALLY \* NUMBER OF ANIMALS NECROFSIED

	UNTREATED Control	VEHICLE Control	LOW DOSE	HIGH DOSE
*DUODENUM MUCINOUS ADEFOCARCINOMA	(48) 1 (2%)	(50)	(48)	(50)
*ILEUN ADENONATOUS POLYP, NCS	(48)	(50)	(48)	(50) 1 (2%)
RINARY SYSTEM				
*KIDNEY MIXED TUMOR, BENIGN	(48)	(50)	(50) 1 (2%)	(50)
NDOCRINE SYSTEM				
*PITUITARY	(47)	(49)	(44)	(50)
CARCINOMA,NOS Chronophcee Adenoma	1 (2%) 1 (2%)	4 (8%)	4 (9%)	5 (10%
#ADRENAL	(48)	(50)	(50)	(50)
CORTICAL ADENCHA Pheochromocytona	1 (2%) 5 (10%)	3 (6%)	10 (20%)	1 (2%) 9 (189
PHEOCHRONOCYTOMA, MALIGNANT MESOTHELICMA, METASTATIC OSTEOSARCCMA, METASTATIC		2 (4%)	1 (2%) 1 (2%)	1 (2%)
#ADRENAL MEDUILA GANGLICNEURCMA	(48) 1 (2%)	(50)	(50)	(50)
#THYRCID	(48)	(49)	(44)	(48)
FOLLICULAR-CELL ADENOMA Folliculaf-cell carcinoma		1 (2%)	1 (2%) 1 (2%)	
C-CELL CARCINCHA	2 (4%)	1 (2%)	1 (2%)	2 (4%)
PAPATHYROID Adenona, NCS	(37)	(37)	(34) 1 (3%)	(40)
#PANCREATIC ISLETS ISLET-CEII ADENCHA	(48) 3 (6%)	(50) 2 (4%)	(49) 1 (2%)	(50)
EPRODUCTIVE SYSTEM				
MAMMARY GLANI FIBPOADENCHA	(49) 1 (2%)	(50) 1 (2%)	(50) 2 (4 <b>%</b> )	(50)

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

	UNTREATED CONTROL	VEHICLE CONTROL	LOW DOSE	HIGH DOSE
*PREPUTIAL GIAND CAFCINOMA,NOS SQUAMOUS CELL CARCINOMA ADBNOMA, NCS	(49) 3 (6%) 1 (2%)	(50) 2 (4 <b>%)</b>	(5C) 4 (8%) 1 (2%)	(50) 3 (6%) 2 (4%)
*TESTIS INTERSTITIAL-CELL "UMOR INTERSTITIAL-CELL TUMOR, MALIGNA MESOTHELICMA, MALIGNANT MESOTHELICMA, METASTATIC	(44) 39 (89%) 1 (2%)	(48) 45 (94%)	(49) 43 (88%) 1 (2%) 1 (2%)	(49) 46 (94 <b>%</b>
*EPIDIDYMIS MESOTHELICHA, METASTATIC	(49)	(50)	(50) 1 (2%)	(50)
NERVOUS SYSTEM MONE SPECIAL SENSE CRGANS				
*ZYMBAL'S GIANC CARCINONA,NOS	• •	(50)	(50) 1 (2%)	(50)
USCULOSKELETAI SYSTEM	(49)		(50) 1 (2%)	(50)
CODY CAVITIES				
*MEDIASTINUM Alveolar/eronchiolar CA, Metasta Pibrosarccha	(49)	(50)	(50) 1 (2%) 1 (2%)	(50)
*MESENTERY FIEROSARCCMA Mesotheliona, Malignant	(49) 1 (2%)	(50)	(50) 1 (2%)	(50)
*TUNICA VAGINALIS MESOTHELICEA, NOS	(49)	(50)	(50)	(50)

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

· · · · · · · · · · · · · · · · · · ·	UNTREATED CONTROL	VEHICLE CONTROL	LOW DOSE	HIGH DOS
ALL OTHER SYSTEMS	,			
*NULTIPLE ORGANS MESOTHELICHA, NOS	(49)	(50)	(50) 2 (4%)	(50)
DIAPHRAGE FIBROSARCCEA, METASTATIC			1	
NNIMAL DISFOSITION SUMMARY				
ANIMALS INITIALLY IN STUDY	50	50	50	50
NATURAL DEATHO	19	11	16	12
MORIBUND SACRIFICE		1	2	1
SCHEDULED SACRIFICE Accidentally killed				1
TERMINAL SACRIFICE	31	38	32	36
ANIMAL MISSING	-			
INCLUDES AUTCLYZED ANIMALS				
IUNOR SUMMARY				
TOTAL ANIMALS WITH PRIMARY TUNORS*	43	48	47	49
TOTAL PRIMARY TUMOPS	80	81	100	93
TOTAL ANIMALS WITH BENIGN TUMORS	42	47	45	47
TOTAL BENIGN TUMORS	55	59	73	71
TOTAL ANIMAIS WITH MALIGNANT TUMORS	20	21	20	18
TOTAL MALIGNANT TUMORS	24	21	23	20
TOTAL ANIMALS WITH SECONDARY TUMORS#	2		5	2
TOTAL SECONDARY TUMORS	<b>5</b>		14	2
TOTAL ANIMALS WITH TUMORS UNCEPTAIN- BENIGN OR MALIGNANT	1	1	4	2
TOTAL UNCEFTAIN TUMORS	1	1	4	2
	•	•	•	-
TOTAL ANIMALS WITH TUMORS UNCERTAIN-				
PRIMARY OR METASTATIC				
TOTAL UNCEFTAIN TUMORS				
PRIMARY TUMORS: ALL TUMORS EXCEPT SE	CONDARY TUMOR	5		
SECONDARY TUPORS: METASTATIC TUPORS			JACENT ORGAN	

### TABLE A2.

## SUMMARY OF THE INCIDENCE OF NEOPLASMS IN FEMALE RATS ADMINISTERED SULFISOXAZOLE BY GAVAGE

	UNTREATED Control	VEHICLE Control	LOW DOSE	HIGH DOSE
ANIMALS INITIALLY IN STUDY	50	50	50	50
ANIMALS NECROPSIED ANIMALS EXAMINED HISTOPATHOIOGICAILY	50 50	50 50	50 50	50 50
INTEGUNENTARY SYSTEM				
*SKIN PAPILLONA, NOS	(50)	(50)	(50) 2 (4%)	(50)
*SUBCUT TISSUE	(50)	(50)	(50)	(50)
PIBROMA PIBROSARCCHA	1 (2%)			1 (2%)
ESPIRATORY SYSTEM				
NONE				
IEMATOPOIETIC SYSTEM				
*NULTIPLE ORGANS	(50)	(50)	(50)	(50)
MALIG-LYMPHCMA, LYMPHOCYTIC TYPE LEUKEMIA, NCS		1 (2%) 1 (2%)		
GRANULOCITIC LEUKEMIA	H (0#)	1 (2%)	2 (6 11)	0 ( 10 8
HONOCYTIC IBUKENIA	4 (8%)	3 (6%)	3 (6%)	9 (18%
IRCULATORY SYSTEM				
NONE				
IGESTIVE SYSTEM				
#LIVEP HEPATOCEIIULAR CARCINONA	(50)	(50) 1 (2%)	(50)	( 50 )
RINARY SYSTEM				
NONE				

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

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-

	UNTREATED CONTROL	VENICLE CONTROL	LOW DOSE	HIGH DOSE
ENCOCRINE SYSTEM				
*PITUITARY	(47)	(49)	(50)	(50)
ADENOMA, NCS Chromophcee Adenoma	17 (36%)	2 (4%) 18 (37%)	1 (2%) 19 (38%)	1 (2%) 17 (34%)
#ADRENAL	(50)	(49)	(50)	(50)
CORTICAL ADENONA	Ì (2%)	1 (2%)		• • • •
PHBOCHRONCCYTONA		1 (2%)	2 (4%)	
#THYRCID	(49)	(47)	(50)	(49)
C-CELL ADENOMA C-CELL CARCINOMA	1 (2%)	1 (2%)		2 ( <b>ba</b> )
C*CBDD CRACIRORR	(28)			2 (4%)
*PARATHYROID	(33)	(32)	(38)	(43)
ADENONA, NCS		1 (3%)		
<b>\$PANCREATIC ISLETS</b>	(50)	(50)	(50)	(49)
ISLET-CEIL ADBNONA		1 (2%)	1 (2%)	
REPRODUCTIVE SYSTEM *MAHHAPY GIANI ADENOHA, NCS ADENOCARCINOHA, NOS PAPILLARY CYSTADENOHA, NOS	(50) 1 (2%) 1 (2%)	(50) 1 (2%)	(50) 1 (2%)	(50)
PIBROADENCHA	6 (12%)	2 (4%) 12 (24%)	16 (32%)	15 (30%)
*PREPUTIAL GIAND	(50)	(50)	(50)	(50)
CAPCINCHA, KOS	1 (2%)	3 (6%)		1 (2%)
ADBNOMA, NCS	2 (4%)			1 (2%)
#UTER US	(50)	(49)	(49)	(48)
CARCINONA,NOS PAPILLARY CYSTADENOMA, NOS	1 (2%)		1 (2%)	
ENDONETRIAL STROMAL FOLYP ENDOMETRIAL STROMAL SARCOMA	6 (12%)	5 (10%) 1 (2%)	6 (12%)	8 (17%
NBRYOUS SYSTEM				
#CEREBRUM	(50)	(50)	(50)	(50)
ASTROCYTCHA		· ·	1 (2%)	• •

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

	UNTREATED CONTROL	VEHICLE CONTROL	LOW DOSE	HIGH DOS
SPECIAL SENSE CRGANS				
*EYE/CONJUNCTIVÅ SQUANOUS CELL CARCINCHA	(50)	(50)	(50) 1 (2%)	(50)
NUSCULOSKELETAL SYSTEM				
NONE				
EOLY CAVITIES				
EOLY CAVITIES				
NONE				
NONE ALL OTHER SYSTEMS NONE				
NONE ALL OTHER SYSTEMS NONE ANIMAL DISPOSITION SUMMARY ANIMALS INITIALLY IN STUDY	50	50	50	
NONE ALL OTHER SYSTEMS NONE ANIMAL DISPOSITION SUMMARY ANIMALS INITIALLY IN STUDY NATURAL DEATH@	50 11	50 15	4	8
NONE ALL OTHER SYSTEMS NONE ANIMAL DISPOSITION SUMMARY ANIMALS INITIALLY IN STUDY NATURAL DEATHO MORIBUND SACRIFICE SCHEDULED SACRIFICE				
NONE ALL OTHER SYSTEMS NONE ANIMAL DISPOSITION SUMMARY ANIMALS INITIALLY IN STUDY NATURAL DEATH@ MORIBUND SACRIFICE			4	8
NONE ALL OTHER SYSTEMS NONE ANIMAL DISPOSITION SUMMARY ANIMALS INITIALLY IN STUDY NATURAL DEATH@ MORIBUNC SACRIFICE SCHEDULED SACRIFICE ACCIDENTALLY KILLED	11	15	4 3	8 2

	UNTREATED CONTROL	VEHICLE Control	LOW DOSE	HIGH DOSE
IUMOR SUMMÀRY				
TOTAL ANIMALS WITH PRIMARY TUMORS* TOTAL PRIMARY TUMORS	30 42	38 56	37 54	35 55
TOTAL ANIMAIS WITH BENIGN TUMORS TOTAL BENIGN TUMORS	27 34	32 45	36 48	32 42
TOTAL ANIMALS WITH MALIGNANT TUMORS TOTAL MALIGNANT TUMOPS	8 8	11 11	.6 6	11 13
TOTAL ANIMALS WITH SECONDARY TUMORS# TOTAL SECCNDARY TUMORS				
TOTAL ANIMALS WITH TUMORS UNCERTAIN- PENIGN OR MALIGNANT TOTAL UNCEFTAIN TUMOPS				
TOTAL ANIMAIS WITH TUMORS UNCEPTAIN- PRIMARY OF METASTATIC TOTAL UNCEFTAIN TUMORS				
PRIMARY TUMORS: ALL TUMORS EXCEPT SEC SECONDARY TUMOPS: METASTATIC TUMORS C			DJACENT ORGAN	

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APPENDIX B

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SUMMARY OF THE INCIDENCE OF NEOPLASMS IN MICE ADMINISTERED SULFISOXAZOLE BY GAVAGE .

#### TABLE B1.

#### SUMMARY OF THE INCIDENCE OF NEOPLASMS IN MALE MICE ADMINISTERED SULFISOXAZOLE BY GAVAGE

	UNTREATED Control	VEHICLE Control	LOW DOSE	HIGH DOSE
NIMALS INITIAILY IN STUDY	50	50	50	50
NIHALS MISSING NIHALS NECROISIED NIHALS EXAMINED HISTOPATHOLOGICALLY	1 49 49 	50 50	50 50	49 49
NTEGUNENTARY SYSTEM				
SKIN	(49)	(50)	(50)	(49)
BASAL-CELL TUHOP Fibrona	1 (2%)		1 (2%)	
SUBCUT TISSUE	(49)	(50)	(50)	(49)
PIBPONA Pibrosarccha Pibrous histiocytona	6 (12%)	4 (8%) 1 (2%)	2 (4%) 5 (10%)	3 (6%
SPIRATORY SYSTEM				
LUNG HEPATOCEILULAR CARCINONA, METAST ALVEOLAR/ERONCHIOLAR ADENOMA ALVEOLAR/BRONCHIOLAR CARCINONA	(49) 2 (4%) 8 (16%) 1 (2%)	(50) 2 (4%) 3 (6%) 1 (2%)	(50) 3 (6%) 3 (6%) 2 (4%)	(49) 1 (2 <b>%</b>
CORTICAL CARCINONA, METASTATIC Sebaceous Adenocarcinoma, metast Fibrosarccma, metastatic	1 (2%)	1 (2%) 1 (2%) 1 (2%)		
MATOPOIETIC SYSTEM				
MULTIPLE OFGANS	(49)	(50) 1 (2%)	(50) 5 (10%)	(49) 3 (6%)
MALIG.LYMFHOMA, LYMPHOCYTIC TYPE MALIG.LYMFHOMA, HISTIOCYTIC TYPE	4 (8%)	2 (4%)	3 (6%)	1 (2%
MALIGNANT IYMPHONA, MIXED TYPE Granulocytic leukenia	1 (2%)	1 (2%)		
SPLEEN	(49)	(50)	(50)	(49)
HEMANGICMA HEMANGIOSAFCONA		2 (4%)	1 (2%)	1 (2%

\* NUMBER OF ANIMALS WITH TISSUE EXAMINED NICPOSCOPICALLY \* NUMBER OF ANIMALS NECROPSIED

TABLE B1. MALE MICE: NEOPLASMS (CONTINUED)

	UNTREATED Control	VEHICLE Control	LOW DOSE	HIGH DOSE
¢LUODEBUM NALIG.LYMPHONA, HISTIOCYTIC TYPE	(49) 1 (2%)	(49)	(50)	(49)
♥THYNUS LIPOSARCCMA	(19)	(22) 1 (5%)	(22)	(8)
CIRCULATORY SYSTEM				
NON &				
CIGESTIVE SYSTEM				
#LIVER HEPATOCEILULAR ADENONA HEPATOCEILULAR CARCINONA HEMANGIOSAFCOMA	(49) 3 (6%) 17 (35%)	(50) 15 (30%) 2 (4%)	(50) 13 (26%) 1 (2%)	(49) 1 (2%) 20 (41%) 2 (4%)
BILL DUCT CARCINOS RECOMA	(49)	(50) 1 (2 <b>%</b> )	(50)	(49)
PANCREAS CORTICAL CARCINOMA, METASTATIC	(49)	(50) 1 (2%)	(49)	(48)
STONACH CARCINONA,NOS SQUANOUS CELL PAPILLONA ADENONATOUS POLYP, NOS	(49) 1 (2%)	(49) 1 (2%)	(49)	(49) 1 (2%) 1 (2%)
SMALL INTESTINE HEMANGIOSAFCOMA, HETASTATIC	(49)	(49) 1 (2%)	(50)	(49)
*JEJUNUN CARCINONA, NOS	(49) 1 (2%)	(49)	(50)	(49)
UPINARY SYSTEM				
#URINARY BLACEER TRANSITIONAL-CELL PAPILLOMA	(49)	(50) 1 (2%)	(50)	(49)
ENDOCAINE SYSTEM				
PADRENAL CORTICAL BIENONA	(48)	(49)	(49)	(49)

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WUNBER OF ANIMALS WITH TISSUE EXAMINED NICROSCOPICALLY
 NUMBER OF ANIMALS NECROPSIED

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# TABLE B1. MALE MICE: NEOPLASMS (CONTINUED)

	UNTREATED Control	VEHICLE Control	LOW DOSE	HIGH DOS
CORTICAL CARCINONA PHEOCHRONCCYTONA		1 (2%) 2 (4%)	5 (10%)	- * - * - * - *
*THYROID Follicular-cell Adencha	(47)	(47)	(48)	(48) 1 (29
BPRODUCTIVE SYSTEM				
<pre>#PROSTATE HEMANGIOSARCOMA, METASTATIC</pre>	(49)	(50) 1 (2%)	(50)	(49)
#TESTIS INTERSTITIAL-CELL TUMOR	(49)	(50)	(47)	(48) 1 (29
ERVOUS SYSTEM				
NONE				
PECIAL SENSE CRGANS				
*EYELID STBACEOUS FDENOCARCINOMA	(49)	(50) 1 (2%)	(50)	(49)
*HARDERIAN GLAND CARCINCHA, NOS	(49)	(50) 1 (2%)	(50)	(49)
USCULOSKELETAL SYSTEM				
NONE				
OLY CAVITIES				
NONE				
ALL OTHER SYSTEMS				
*NULTIPLE ORGANS CARCINOSAFCOMA, METASTATIC HEMANGIOSAFCOMA	(49)	(50) 1 (2%) 1 (2%)	(50)	(49)

\* NUMBER OF ANIMALS NECROPSIED

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# TABLE B1. MALE MICE: NEOPLASMS (CONTINUED)

	UNTREATED Control	VEHICLE CONTROL	LOW DOSE	HIGH DOS
NIMAL DISFOSITION SUMMARY				
ANIHALS INITIALLY IN STUDY NATURAL DEATHƏ Moribund Sacrifice Scheduled Sacrifice	50 12	50 18 1	50 14	50 14
ACCIDENTAILY KILLED TERMINAL SACRIFICE ANIMAL MISSING	1 36 1	1 30	36	2 34
INCLUDES AUTCLYZED ANIMALS				
UNOR SUMMARY				
TOTAL ANIMALS WITH PRIMARY TUMORS* TOTAL PRIMARY TUMORS	32 45	29 43	31 41	28 36
TOTAL ANIMALS WITH BENIGN TUMORS TOTAL BENIGN TUMORS	12 13	8 8	9 12	4 4
TOTAL ANIMALS WITH MALIGNANT TUMORS TOTAL MALIGNANT TUMOPS	26 32	25 35	25 29	25 32
TOTAL ANIMALS WITH SECONDARY TUMORS# TOTAL SECCNDARY TUMORS	3 3	7 9	3 3	1 1
TOTAL ANIMALS WITH TUMORS UNCERTAIN- BENIGN OR MALIGNANT TOTAL UNCEFTAIN TUMORS				
TOTAL ANIMAIS WITH TUMORS UNCEFTAIN- PRIMARY OF METASTATIC TOTAL UNCERTAIN TUMORS				
PRIMARY TUMERS: ALL TUMORS EXCEPT SE SECONDARY TUMORS: METASTATIC TUMORS			DJACENT OPGAN	

#### TABLE 82.

### SUMMARY OF THE INCIDENCE OF NEOPLASMS IN FEMALE MICE ADMINISTERED SULFISOXAZOLE BY GAVAGE

	UNTREATED Control	VEHICLE Control	LOW DOSE	HIGH DOSE
NNIMALS INITIAILY IN STUDY	50	50 1	50	50
NIMALS NECROFSIED NIMALS NECROFSIED NIMALS EXAMINED HISTOPATHOLOGICALLY	50 50	49 49	50 50	50 50
NTEGUHENTARY SYSTEM				
*SKIN SQUAMOUS CELL PAPILLOMA	(50) 1 (2%)	(49)	(50)	(50)
*SUBCUT TISSUF FIBROSARCCMA	(50)	(49)	(50)	(50) 1 (2%)
HE HANGIOHA		1 (2%)	1 (2%)	
ESPIRATORY SYSTEM				
#LUNG	(50)	(49)	(50)	(50)
ADENOCARCINONA, NOS, METASTATIC ALVEOLAR/ERONCHIOLAR ADENONA ALVEOLAR/BFONCHIOLAR CAPCINONA	2 (4%)		1 (2%) 1 (2%)	3 (6%) 2 (4%)
IEMATOPOIETIC SYSTEM				
*NULTIPLE ORGANS MALIG.LYMPHOMA, LYMPHOCYTIC TYPE MALIG.LYMPHOMA, HISTIOCYTIC TYPE MALIGNANT LYMPHOMA, MIXED TYPE GRANULOCYTIC LEUKEMIA	(50) 3 (6%) 10 (20%) 3 (6%) 1 (2%)	(49) 6 (12%) 7 (14%) 3 (6%) 1 (2%)	(50) 7 (14%) 8 (16%) 1 (2%)	(50) 10 (20%) 10 (20%)
# SP LE EN HEMANG IO SA PCOMA	(50)	(49)	(50) 1 (2%)	(50)
#MESENTERIC 1. NODE NALIGNANT LYMPBONA, MIXED TYPE	(48) 1 (2%)	(48)	(50)	(50)
IRCULATORY SYSTEM		-		
NONE				

\* NUMBER OF ANIMALS WITH TISSUE EXAMINED MICROSCOPICALLY \* NUMBER OF ANIMALS NECROPSIFD

(2%) (4%) (2%) (2%)	(49) (49) (49) (42) 2 (5%) (48)	(50) 5 (10%) (50) (49) (44) 1 (2%)	(50) ) 2 (4% (50) (50) (31) 1 (3%
(2%) (4%) (2%) (2%)	(49) (49) 	5 (10%) (50) (49)	) 2 (4% (50) (50) 
(4%) (2%) (2%)	(49) [42] 2 (5 <b>%</b> )	(50) (49) 	(50) (50) 
(2%) (2%)	(49) [42] 2 (5 <b>%</b> )	(4 9)	(50)
(2%)	(42) 2 (5 <b>%</b> )	(44)	(31)
(2%)	2 (5%)		
(2%)	2 (5%)		
(2%)	2 (5%)		
(2%)	2 (5%)		
I	(48)		
	1 (2%)	(49) 1 (2%)	(50)
(2%)	(48)	(48) 1 (2 <b>%</b> )	(46) 2 (4%)
i	(49)	(50)	(50)
(2%)	5 (10%)	1 (2%) 1 (2%)	1 (2%
I	(49)	(50)	(50)
	1 (2%)	2 (4%)	1 (2%
(2%)	1 (2%)	1 (2%) 1 (2%)	1 (2%
,	(49)	(50)	(50)
)	(2%) ) (2%) (2%)	(2%) 5 (10%) ) (49) (2%) 1 (2%) (2%)	$ \begin{array}{cccccccccccccccccccccccccccccccccccc$

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# TABLE B2. FEMALE MICE: NEOPLASMS (CONTINUED)

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

### TABLE B2. FEMALE MICE: NEOPLASMS (CONTINUED)

	UNTREATED CONTROL	VEHICLE Control	LOW DOSE	HIGH DOSE
#HESOVARIUM CARCINOMA, NOS, METASTATIC		(49)	(50)	(50)
NERVOUS SYSTEM				
NONE				
SPECIAL SENSE CRGANS				
*HARDERIAN GIAND ADENOMA, NCS	(50)	(49) 2 (4%)	(50) 2 (4%)	(50)
MUSCULOSKELETAI SYSTEM				
NONE				
EOLY CAVITIES				
NONE				
ALL OTHER SYSTEMS				
*NULTIPLE ORGANS FIBROSARCCMA	(50)	(49)	(50)	(50) 1 (2%)
ANIMAL DISPOSITION SUMMARY				
ANIMALS INITIALLY IN STUDY NATURAL DEATHƏ MORIBUND SACRIFICE	50 9	50 5	50 9	50 8
SCHEDULED SACRIFICE ACCIDENTAILY KILLED TERNINAL SACRIFICE ANIMAL HISSING	4 1	1 43 1	1 40	42
a INCLUDES AUTCLYZED ANIMALS				

NUMBER OF ANIMALS WITH TISSUE EXAMINED MICROSCOPICALLY
 NUMBER OF ANIMALS NECROPSIED

	UNTREATED Control	VEHICLE Control	LOW DOSE	HIGH DOS
OR SUMMARY				
OTAL ANIMALS WITH PRIMARY TUMORS*	26	24	29	31
TOTAL PRIMARY TUMORS	30	31	35	35
OTAL ANIMALS WITH BENIGN TUMORS	7	7	10	7
TOTAL PENIGN TUMORS	8	8	11	7
OTAL ANIMALS WITH MALIGNANT TUMORS	22	20	22	26
TOTAL MALIGNANT TUMORS	22	23	24	28
OTAL ANIMALS WITH SECONDARY TUNORS#	1		1	
TOTAL SECONDARY TUMORS	2		1	
OTAL ANIMALS WITH TUMORS UNCERTAIN-				
IENIGN OR MAIIGNANT TOTAL UNCERTAIN TUMORS				
OTAL ANIMALS WITH TUMORS UNCERTAIN- RIMARY OR METASTATIC				
TOTAL UNCEFTAIN TUNORS				

### TABLE B2. FEMALE MICE: NEOPLASMS (CONTINUED)

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APPENDIX C

SUMMARY OF THE INCIDENCE OF NONNEOPLASTIC LESIONS IN RATS ADMINISTERED SULFISOXAZOLE BY GAVAGE

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#### TABLE C1.

#### SUMMARY OF THE INCIDENCE OF NONNEOPLASTIC LESIONS IN MALE RATS ADMINISTERED SULFISOXAZOLE BY GAVAGE

	UNTREATED Control	VEHICLE CONTROL	LOW DOSE	HIGH DOSE
ANIMALS INITIAILY IN STUDY	50	50	50	50
NIMALS NECROFSIED	49	50	50	50
ANIMALS EXAMINED HIS DUPATHOLOGICALLY	49	50	50	50
INTEGUNENTARY SYSTEM				
*SRIN	(49)	(50)	(50)	(50)
EPIDERMAL INCLU: ON CYST	1 (2%)	3 (6%)	1 (2%)	
HYPERKERAICSIS	1 (2%)			1 (2%)
ACANTHOSIS	1 (2%)	1 (2%)		
*SUBCUT TISSUE	(49)	(50)	(5 C)	(50)
STEATITIS	1 (2%)			
INPLAMMATION, C · ONIC		1 (2%)		
ESPIRATORY SYSTEM				
#LUNG	(48)	(50)	(50)	(50)
MINERALIZATION		1 (2%)		
HEMORRHAGE	5 (10%)	2 (4%)	6 (12%)	5 (10%
INFLAMMATION, S PURATIVE	1 (2%)			
INFLAMMATICN, A TR PNEUMONIA, CHFOY C MURINE	39 (81%)	46 (92%)	1 (2%) 43 (86%)	44 (88%
ENATOPOIETIC SYSTEM				
*SPLEEN	(48)	(50)	(50)	(50)
ECTOPIA			2 (4%)	
FIBPOSIS	4 (0.5)	1 (2%)		
FIBPOSIS, FOCAL	1 (2%) 1 (2%)			
AMYLOIDOSIS Hemosidefcsis	1 (270)	1 (2%)	1 (2%)	
HEMATOPOIESIS	5 (10%)	3 (6%)	1 (2%)	2 (4%)
	- (		· · · · · · · · · · · · · · · · · · ·	
#SPLENIC CAPSULE	(48)	(50)	(50)	(50)
FIBROSIS, FOCAL			1 (2%)	
#LYMPH NODE	(47)	(50)	(48)	(50)
ATROPHY, NOS	1 (2%)		_	

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

	UNTREATED Control	VEHICLE Control	LOW DOSE	HIGH DOSE
CERVICAL LYNPH NODE Anyloidosis	(47) 1 (2%)	(50)	(48)	(50)
#BRONCHIAL LYMPH NODE HEMORRHAGE ATROPHY, NCS	(47) 1 (2%)	(50) 1 (2%)	(48) 1 (2%)	(50) 1 (2%)
<pre>#MESENTERIC L. NODE LYMPHANGIECTASIS AMYLOIDOSIS ATROPHY, NCS</pre>	(47) 1 (2%)	(50) 1 (2%) 1 (2%)	(48) 1 (2%) 1 (2%)	(50) 1 (2 <b>%</b> )
TRCULATORY SYSTEM				
#BEART/ATRIUM THRONBOSIS, NOS	(48) 8 (17 <b>%)</b>	(50) 2 (4%)	(50) 4 (8%)	(50) 1 (2%)
<pre>#HYOCARDIUM INFLAMMATICN, CHRONIC PIBROSIS FIBROSIS, FOCAL DEGEWERATICN, WOS</pre>	(48) 6 (13%) 23 (48%) 11 (23%)	(50) 13 (26%) 27 (54%) 2 (4%) 6 (12%)	(50) 1 (2%) 34 (68%) 1 (2%) 2 (4%)	(50) 2 (4%) 32 (64% 9 (18%
* AORTA THRONBOSIS, NOS INFLAMMATICN, CHRONIC	(49) <u>1</u> (2%)	(50)	(50) 1 (2%)	(50) 1 (2 <b>%</b> )
IGESTIVE SYSTEM				
#SALIVARY GLABD INPLANMATION, ACUTE INFLAMMATICN, CHRONIC	(48)	(49)	(49) 1 (2%) 1 (2%)	(50)
<pre>#LIVER     FIBROSIS     CLRPHOSIS, PORTAL</pre>	(48) 1 (2%) 3 (6%)	(50)	(50) 1 (2%)	(50)
HEPATITIS, TOXIC Peliosis Hepatis	2 (4%)	2 (4%)	1 (2%) 1 (2%)	2 (4%)
N&CROSIS, NOS HETAMORPHOSIS PATTY HENOSIDERCSIS	2 (4%) 1 (2%)	2 (4%) 2 (4%)	1 (2%)	1 (2%)
FOCAL CELLULAR CHANGE	25 (52%)	28 (56%)	20 (40%)	18 (36%

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

	UNTREATED Control	VEHICLE Control	LOW DOSE	HIGH DOSE
HEMATOFOIESIS		1 (2%)		
POPTAL TRACI FIBROSIS	(48) 1 (2%)	(50)	(50)	(50)
LIVER/CENTRIIOPULAR NECROSIS, VOS	(48) 5 (10%)	(50) 1 (2%)	(50) 3 (6%)	(50) 2 (4%)
#LIVER/PERIFCFTAL FIBROSIS	(48) 1 (2%)	(50)	(50)	(50)
BILE DUCT INPLAMMATICN, NOS	(48) 1 (2%) 4 (8%)	(50)	(50) 2 (4%)	(50)
INFLAMMATICN, CHRONIC Fibrosis Hyperplasia, nos	3 (6%) 33 (69%)	7 (14%) 31 (62%)	6 (12%) 32 (64%)	10 (20% 36 (72%
#PANCREAS INFLAMMATICN, CHRONIC	(48) 4 (8%)	(50) 3 (6%)	(49)	(50)
PERIARTEPITIS ATPOPHY, NCS	3 (6%) 6 (13%)	1 (2%) 6 (12%)	2 (4%) 11 (22%)	3 (6%) 13 (26%
*STONACH Hemopphage Ulcer, Nos	(48) 1 (2%)	(48)	(49) 1 (2%) 1 (2%)	(48)
INFLAMMATICN, CHRONIC NECROSIS, NOS NECROSIS, FOCAL	1 (2%) 2 (4%)	2 (4%) 2 (4%)	1 (2%)	1 (2%) 1 (2%) 1 (2%)
ACANTHOSIS #LARGE INTESTINE	(48)	(50)	1 (2%) (49)	(49)
PARASITISM INFARCT, NCS	8 (17%)	7 (14%)	12 (24%) 1 (2%)	7 (14%
FINARY SYSTEM				
#KIDNEY INFLAMMATICN, CHRONIC	(48) 42 (88 <b>%</b> )	(50) 45 (90%) 1 (2%)	(50) 44 (88 <b>%</b> )	(50) 45 (90%
CALCIFICATION, NOS PIGMENTATICN, NOS NEMOSIDERCSIS		2 (4%)	2 (4%)	
#KIDN EY/TUBULE PIGMENTATICN, NOS	(48)	(50)	(50)	(50)

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

	UNTREATED Control	VEHICLE Control	LOW DOSE	HIGH DOSE
ENDOCRINE SYSTEM				
#PITUITAR Y	(47)	(49)	(44)	(50)
CIST, NOS				1 (2%)
HYPERPLASIA, FOCAL	2 (4%)	1 (2%)	3 (7%)	1 (2%)
#ADRENAL	(48)	(50)	(50)	(50)
THROMBOS IS, NOS	1 (2%)		1 (2%)	
HEFORRHAGE				1 (2%)
NECROSIS, NOS NECPOSIS, FOCAL	1 (2%)			1 (2%)
METANORPHOSIS FATTY	4 (8%)		2 (4%)	
**ADRENAL CORTEX	(48)	(50)	(50)	(50)
THRONBOSIS, NOS	1 (2%)	(30)	(	(30)
DEGENERATION, NOS	<b>1</b>	4 (8%)		1 (2%)
HYPERPLASIA, NOS				1 (2%)
HYPERPLASIA, FOCAL				1 (2%)
CADRENAL MEDULLA	(48)	(50)	(50)	(50)
HYPERPLASIA, NOS	5 (10%)	6 (12%)	9 (18%)	9 (18%)
#THYROID	(48)	(49)	(44)	(48)
FOLLICULAF CYST, NOS			1 (2%)	
HYPERPLASIA, C-CELL	4 (8%)	1 (2%)	2 (5%)	2 (4%)
<b>#PANCREATIC ISLETS</b>	(48)	(50)	(49)	(50)
HYPERPLASIA, NOS	2 (4%)	1 (2%)		1 (2%)
REPRODUCTIVE SYSTEM				
* MAMMAPY GLANE	(49)	(50)	(50)	(50)
CYST, NOS		1 (2%)	()	1 (2%)
CYSTIC DUCTS		5 (10%)		2 (4%)
INPLAMMATICN, CHPONIC		1 (2%)		1 (DE)
HYPERPLASIA, CYSTIC				1 (2%)
*PREPUTIAL GLAND	(49)	(50)	(50)	(50)
INPLAMMATICN, NOS	1 (2%)		0 (H <b>M</b> )	
INFLAMMATICN, CHRONIC Hyperplasia, NCS			2 (4%) 1 (2%)	1 (2%)
•	44.63	(10)	. ,	(50)
#PROSTATE INFLAMMATICN, ACUTE	(46) 2 (4%)	(49)	(50)	(50) 7 (14%)

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

	UNTREATED CONTROL	VEHICLE Control	LOW DOSE	HIGH DOSE
INFLAMMATICN, CHRONIC NECROSIS, NOS	7 (15%)	17 (35%) 2 (4%)	4 (8%)	3 (6%)
*TESIIS	(44)	(48)	(49)	(49)
HEMORR HAGE	1 (2%)			
ABSCESS, NCS				1 (2%)
INFLAMMATICN, CHRONIC	0 . F. F. S.	1 (2%)		
PEPIARTERITIS	2 (5%)	2 ( ( )		
DLGENERATICN, NOS	11 (25%)	3 (6%)	11 (22%)	40 430 8
HYPERPLASIA, INTERSTITIAL CELL	10 (23%)	13 (27%)	18 (37%)	19 (39%)
* EPIDIDYMIS	(49)	(50)	(50)	(50)
STEATITIS	• •	1 (2%)	•••	2 (4%)
INFLAMMATICN, ACUTE			1 (2%)	• •
INFLAMMATICN, CHRONIC	1 (2%)		2 (4%)	1 (2%)
NECROSIS, NOS	•••	1 (2%)		
NECROSIS, FAT	1 (2%)	, ,	1 (2%)	1 (2%)
*SCROTUM	(49)	(50)	(50)	(50)
NECROSIS, FAT	(	1 (2%)	(3.4)	(30)
ERVOUS SYSTEM *CEREBELLUM HEMORPHAGE	(48)	(50)	(49) 1 (2%)	(50)
FECIAL SENSE CPGANS				
* EY B	(49)	(50)	(50)	(50)
HENOPPHAGE		3 (6%)		
SYNECHIA, ANTERIOR		1 (2%)		
SYNECHIA, POSTERIOF	1 (2%)	2 (4%)		
CATARACT	1 (2%)	2 (4%)	4 (8%)	
PHTHISIS PULBI		1 (2%)	1 (2%)	
* EYE/PETINA	(49)	(50)	(50)	(50)
INFLAMMATICN, CHRONIC		1 (2%)	····	<b>v</b> <i>i</i>
DEGENERATION, NOS	1 (2%)	4 (8%)	4 (8%)	

NONE ------

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

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	UNTREATED Control	VEHICLE Control	LOW DOSE	HIGH DOSE
EODY CAVITIES				
* MEDIASTINUM HEMORRHAGE	(49) 1 (2%)	(50)	(5C)	(50)
*ABDONINAL CAVITY STBATITIS NECROSIS, FAT	(49)	(50) 7 (14%)	(50)	(50) 1 (2%)
*MESENTERY STEATITIS INFLAMMATICN, CHRONIC PERIARTERITIS NECROSIS, FAT	(49) 1 (2%)	(50)	(50) 1 (2%) 2 (4%)	(50) 2 (4%) 1 (2%)
LL OTHER SYSTEMS None				
PECIAL HOPPHCIOGY SUMMARY				
NO LESION FEPCRTED Auto/necpcpsy/histo perf Autolysis/ko necropsy	1 1			1
NUMBER OF ANIMALS WITH TISSUE EX.	AMINED MICROSCOPI	CALLY		

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#### TABLE C2.

#### SUMMARY OF THE INCIDENCE OF NONNEOPLASTIC LESIONS IN FEMALE RATS ADMINISTERED SULFISOXAZOLE BY GAVAGE

	UNTREATED CONTROL	VEHICLE Control	LOW DOSE	HIGH DOSE
ANIMALS INITIAILY IN STUDY	50	50	50	50
NIMALS NECROPSIED	50	50	50	50
ANIMALS EXAMINED HISTOPATHOLOGICALLY	50	50	50	50
NTEGUMENTARY SYSTEM				
*SKIN	(50)	(50)	(50)	(50)
EPIDERMAL INCLUSION CYST INFLAMMATICN, CHRONIC	1 (2%) 1 (2%)			
*SUBCUT TISSUE NECROSIS, FAT	(50)	(50)	(50)	(50) 1 (2 <b>%</b> )
ESPIRATORY SYSTEM				
#TRACHEA	(50)	(49)	(50)	(50)
CALCIFICATION, NOS		1 (2%)		
#LUNG	(50)	(49)	(50)	(50)
HEMORR HAGE	12 (24%)	8 (16%)	7 (14%)	3 (6%)
PNEUMONIA, ASPIRATION Abscess, NCS	1 (2%)	1 (2%)		
PNEUMONIA, CHRONIC MUPINE HYPERPLASIA, ALVEOLAP EPITHELIUM	46 (92%)		50 (100%)	47 (94%) 2 (4%)
EMATOPOIETIC SYSTEM				
#BONE MARROW	(50)	(50)	(50)	(50)
HYPOPLASIA, NOS			1 (2%)	
#SPLEEN	(50)	(50)	(50)	(49)
ECTOPIA CONGRESSION NOG	1 (2%)	1 (28)		
CONGESTICN, NOS HEMORRHAGE	1 (2%)	1 (2%)		
HENOSIDEROSIS	9 (18%)	13 (26%)	10 (20%)	4 (8%)
ATROPHY, NCS	• • •	1 (2%)		
HEMATOPOIESIS		9 (18%)	3 (5%)	1 (2%)

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

	UNTREATED Control	VEHICLE Control	LOW DOSE	HIGH DOSE
<pre>#MESENTERIC L. NODE    HEMORRHAGE    NECROSIS, NOS</pre>	(49)	(50) 1 (2%) 1 (2%)	(50)	(50)
#THYMUS HEMORRHAGE	(37) 2 (5%)	(10)	(24)	(17) 1 (6%)
CIRCULATORY SYSTEM				
#HEART PERIARTERITIS	(50)	(49) 1 (2%)	(50)	(50)
#HEART/ATRIUM THROMBOSIS, NOS	(50)	(49) 2 (4%)	(50)	(50)
<pre>#NYOCARDIUM INFLAMMATICN, CHRONIC FIBROSIS DEGENERATION, NOS CALCIFICATION, NOS</pre>	(50) 13 (26%) 20 (40%) 3 (6%)	(49) 3 (6%) 5 (10%) 5 (10%) 1 (2%)	(50) 9 (18%) 2 (4%) 1 (2%)	(50) 10 (20%) 6 (12%) 8 (16%)
DIGESTIVE SYSTEM				
<pre>#LIVER HEMORPHAGE HEPATITIS, TOXIC NECROSIS, NOS NECROSIS, FOCAL INFARCT, NCS METAMORFHOSIS FATTY</pre>	(50) 1 (2%) 1 (2%) 1 (2%) 2 (4%)	(50) 2 (4%) 1 (2%) 3 (6%) 4 (8%)	(50) 1 (2%) 1 (2%)	(50) 1 (2%) 1 (2%) 5 (10%)
FOCAL CELLULAR CHANGE HEMATOPOIESIS	38 (76%)	29 (58%) 1 (2%)	40 (80%)	39 (78%)
<pre>#LIVER/CENTRIIOBULAR NECROSIS, NOS</pre>	(50)	(50) 2 (4%)	(50)	(50) 1 (2%)
<pre>#BILE DUCT BILE STASIS INFLAMMATICN, CHPONIC FIBROSIS</pre>	(50) 2 (4%) 6 (12%)	(50) 5 (10 <b>%</b> )	(50) 1 (2%)	(50) 3 (6%)
FIBROSIS HYPERPLASIA, NOS	6 (12%) 17 (34%)	7 (14%)	7 (14%)	10 (20%)
#PANCE BAS           INFLAMMATION, CHRONIC	(50)	(50) <u>1_(2%)</u>	(50)	(49) <u>1 (2%)</u>

\* NUMBER OF ANIMALS WITH TISSUE EXAMINED MICPOSCOPICALLY \* NUMBER OF ANIMALS NECROPSIED

	UNTREATED Control	VEHICLE Control	LOW DOSE	HIGH DOSE
PERIARTEFITIS Atrophy, NCS Atrophy, FCCAL	5 (10%) 1 (2%)	2 (4%)	1 (2%) 3 (6%)	7 (14%
<pre>#PANCREATIC EUCT HYPERPLASIA, FOCAL</pre>	(50)	(50)	(50)	(49) 1 (2%)
#STONACH CYST, NOS Hemorrhage	(50)	(50) 1 (2%)	(50) 1 (2%)	(49)
ULCER, NOS ULCER, FOCAL INFLAMMATION, CHRONIC NECROSIS, NOS CALCIFICATION, NOS ACANTHOSIS	1 (2%)	1 (2%) 1 (2%) 1 (2%)	3 (6%)	1 (2%) 1 (2%)
#GASTRIC SUBMUCOSA EDEMA, NOS	(50)	(50)	(50)	(49) 1 (2%)
<pre>\$LARGE INTESTINE PARASITISM</pre>	(50) 7 (14%)	(50) 7 (14 <b>%</b> )	(50) 5 (10%)	(49)
COLON PARASITISM	(50)	(50)	(50)	(49) 8 (16%
URINARY SYSTEM				
<pre>#KIDNEY INFLAMMATION, CHRONIC METAMORPHOSIS PATTY PIGNENTATICN, NOS</pre>	(50) 38 (76%) 1 (2%)	(50) 20 (40%)	(50) 22 (44%) 1 (2%)	(50) 29 (58%
<pre>#KIDNEY/TUBULE PIGNENTATION, NOS</pre>	(50)	(50)	(50) 1 (2%)	(50) 1 (2 <b>%</b> )
ENDOCRINE SYSTEM				
<pre>#PITUITARY CYST, NOS HEMORRHAGE</pre>	(47) 1 (2%) 2 (4%)	(49) 2 (4%) 3 (6%)	(50) 5 (10%)	(50) 3 (6%) 2 (4%)
HEMATOMA, NOS <u>PIGMENTATICN, NOS</u>			2 (4%)	1 (2%)

\* NUMBER OF ANIMALS WITH TISSUE EXAMINED NICPOSCOPICALLY \* NUMBER OF ANIMALS NECROPSIED

	UNTREATED Control	VEHICLE Control	LOW DOSE	HIGH DOSE
HYPERPLASIA, NOS Hyperplasia, focal Angiectasis	1 (2%) 4 (9%)	1 (2%) 5 (10%) 1 (2%)	3 (6%) 4 (8%)	_1 (2%) 3 (6%)
#ADRENAL	(50)	(49)	(50)	(50)
THRONBOSIS, NOS Hemorrhage	1 (2%) 1 (2%)		1 (2%)	
ANGIECTASIS	1 (2%)		1 (24)	1 (2%)
#ADRENAL CORTEX	(50)	(49)	(50)	(50)
THFOMBOSIS, NOS	4 (8%)	4 (8%)	2 (4%)	5 (10%)
DEGENEPATION, NOS Angiectasis	4 (0%)	2 (4%)	5 (10%)	5 (10%)
#ADRENAL MECUILA	(50)	(49)	(50)	(50)
HYPERPLASIA, NOS		3 (6%)	3 (6%)	
<pre>#THYROID INFLAMMATICN, CHRONIC FIBROSIS</pre>	(49) 1 (2%) 1 (2%)	(47)	(50)	(49)
HYPERPLASIA, C-CELL	3 (6%)	2 (4%)	3 (6%)	8 (16%)
<pre>#PANCPEATIC ISLETS HYPERPLASIA, NOS</pre>	(50)	(50)	(50) 1 (2%)	(49)
REPRODUCTIVE SYSTEM				
*MANHARY GLANI	(50)	(50)	(50)	(50)
GALACTOCELE	2 (4%)	1 (2%) 2 (4%)		3 (6%)
CYST, NOS CYSTIC DUCIS Inplamaticn, Acute	9 (18%) 7 (14%) 1 (2%)	2 (4%) 22 (44%)	22 (44%)	1 (2%) 24 (48%)
INPLAMMATICN, CHRONIC Hyperplasia, Nos	1 (2%)		1 (2%)	
HYPERPLASIA, CYSTIC			2 (4%)	
*PREPUTIAL GIAND NECROSIS, NOS	(50)	(50) 1 (2%)	(50)	(50)
#UTERUS	(50)	(49)	(49)	(48)
H Y DROM ET FA HE MORRHAGE PYONETRA	1 (2%)	1 (2%)	1 (2%)	1 (2%) 1 (2%)
*UTERUS/ENDCMETRIUM INFLAMMATICN, VESICULAR	(50) <u>5 (10%)</u>	(49)	(49)	(48)

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

	UNTREATED CONTROL	VEHICLE Control	LOW DOSE	HIGH DOSE
*OVARY/PAROVARIAN NECROSIS, FAT	(50) 1 (2%)	(49)	(49)	(48)
OVARY CIST, NOS PAROVARIAN CIST HEMORRHAGE	(50) 1 (2 <b>%</b> )	(49) 1 (2%) 1 (2%) 1 (2%)	(49) 3 (6%)	(48)
ERVOUS SYSTEM				
#BRAIN HYDROCEPEALUS, NOS	(50)	(50)	(50) 1 (2%)	(50)
#CEREBELLUM HEMORRHAGE	(50) 1 (2%)	(50)	(50)	(50)
PECIAL SENSE CRGANS				
*EYE SYNECHIA, ANTERIOR SYNECHIA, FOSTERIOR	(50) 1 (2%) 1 (2%)	(50) 1 (2%)	(50)	(50)
CATARACT PHTHISIS BULBI	1 (2%)		1 (2%)	1 (2%
*EYE/CORNEA INPLAMMATICN, CHRONIC	(50) 1 (2%)	(50)	(50)	(50)
*EYE/IRIS INPLAMMATICN, CHRONIC	(50) 1 (2%)	(50)	(50)	(50)
* EYE/PETINA	(50)	(50)	(50)	(50)
INFLAMMATICN, CHRONIC Degeneration, Nos	1 (2%) 1 (2%)	1 (2%)	4 (8%)	1 (2%)
USCULOSKELETAL SYSTEM				
NON &				
EOLA CAVITIES				
*ABDOMINAL CAVITY STEATITIS	(50)	(50)	(50)	(50)

# NUMBER OF ANIMALS WITH TISSUE EXAMINED MICROSCOPICALLY \* NUMBER OF ANIMALS NECPOPSIED

	UNTREATED Control	VEHICLE Control	LOW DOSE	HIGH DOSE
NECROSIS, FAT	1 (2%)	3 (6%)	2 (4%)	2 (4%)
*MESENTERY NECROSIS, FAT	(50) 1 (2%)	(50)	(50) 1 (2%)	(50)
ALL OTHER SYSTEMS				
NONE				
PECIAL MORPHCIOGY SUMMARY				
AUTO/NECRCESY/HISTO PERF	1	1		
NUMBER OF ANIMALS WITH TISSUE EX NUMBER OF ANIMALS NECROPSIED	AMINED MICROSCOPI	CALLY		

APPENDIX D

SUMMARY OF THE INCIDENCE OF NONNEOPLASTIC LESIONS IN MICE ADMINISTERED SULFISOXAZOLE BY GAVAGE

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### TABLE D1.

# SUMMARY OF THE INCIDENCE OF NONNEOPLASTIC LESIONS IN MALE MICE ADMINISTERED SULFISOXAZOLE BY GAVAGE

CONTROL	VEHICLE Control	LOW DOSE	HIGH DOSE
50	50	50	50
1	50	50	49
49 49	50	50	49 49
(49)	(50)	(50)	(49)
2 (4%)			• • •
1 (2%)		1 (25)	
1 (2%)		. (==,)	
(49)	(50)	(50)	(49)
()	1 (2%)	<b>V</b> = -7	<b>1</b> • • 7
	1 (2%)		
(49)	(50)	(50)	(49)
		1 (2%)	
2 (1991)		2 (# 4)	1 (2%)
	5 (104)	2 (4 4)	(22)
1 (2%)	2 (4%)		4 (8%)
2 (H <b>F</b> )			E (10.8
2 (4%) 1 (2%)	2 (4%)	4 (8%) 1 (2%)	5 (10%)
(49)	(50)	(49)	(49)
1 (2%)		(KO) C	
• \2~7	2 (4%)		
(49)	(50)	(50)	(49) 2 (4%)
	1 49 49 (49) 2 (4%) 1 (2%) 1 (2%) 1 (2%) (49) 2 (4%) 1 (2%) 2 (4%) 1 (2%) 2 (4%) 1 (2%) 49) 1 (2%) (49) 1 (2%)	$ \begin{array}{cccccccccccccccccccccccccccccccccccc$	$ \begin{array}{c} 1 \\ 49 \\ 49 \\ 50 \\ 50 \\ 50 \\ 50 \\ 50 \\ 50 \\ 50 \\ 5$

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

	UNTREATED Control	VEHICLE Control	LOW DOSE	HIGH DOSE
LEUKEMOID FEACTION		1 (2%)		
HYPERPLASIA, LYMPHOID	8 (16%)	1 (2%)	1 (2%)	2 (4%)
HEMATOPOIESIS	3 (6%)	2 (4%)	7 (14%)	3 (6%)
*CERVICAL LYMFH NODE	(49)	(50)	(50)	(49)
INFLAMMATICN, NOS		1 (2%)		
*MESENTEPIC L. NODE	(49)	(50)	(50)	(49)
LYMPHANGIECTASIS	1 (2%)			
CONGESTION, NOS	3 (6%)	11 (22%)	2 (4%)	2 (4%)
INFLAMMATICN, NOS	3 (6%)		2 (4%)	
INFLAMMATICN, ACUTE	1 (2%)		1 (2%)	
HYPERPLASIA, RETICULUM CELL	1 (2%)			
HYPERPLASIA, LYMPHOID	13 (27%)	5 (10%)	5 (10%)	3 (6%)
HAMATOPOIESIS	1 (2%)		1 (2%)	1 (2%)
IRCULATORY SYSTEM				
#HEART	(49)	(50)	(50)	(49)
MINERALIZATION			1 (2%)	
DILATATICN, NOS	1 (2%)	1 (2%)		
PERIARTERITIS		1 (2%)		
METAPLASIA, CSSEOUS		1 (2%)		
#AURICULAR APPENDAGE	(49)	(50)	(50)	(49)
THRONBOSIS, NCS	1 (2%)			
#MYOCARDIUM	(49)	(50)	(50)	(49)
INFLAMMATICN, POCAL				1 (2%)
DEGENERATION, NOS	1 (2%)			
* ACRTA	(49)	(50)	(50)	(49)
INFLAMMATICN, NOS		1 (2%)		
IGESTIVE SYSTEM				
#LIVER	(49)	(50)	(50)	(49)
CYST, NOS			1 (2%)	
THRONBOSIS, NOS			2 (4%)	1 (2%)
ABSCESS, NOS		1 (2%)		
NECROSIS, NOS	3 (6%)	1 (2%)	2 (4%)	1 (2%
INFARCT, NCS	3 (6%)			4 (8%)
ANYLOIDOSIS		1_(2%)		

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

	UNTREATED CONTROL	VEHICLE Control	LOW DOSE	HIGH DOSE
RETANOFPHOSIS PATTY			1 (2%)	**********
FOCAL CELLULAR CHANGE Angiectasis		1 (2%)	2 (4%)	
<pre>#LIVER/CENTRIIOBULAR WECROSIS, NOS</pre>	(49)	(50) 1 (2%)	(50)	(49) 1 (2%)
LIVER/PERIFCETAL FIBROSIS	(49) 1 (2%)	(50)	(50)	(49)
BILE DUCT	(49)	(50)	(50)	(49)
CYST, NOS Hyperplasia, Nos	1 (2%)			1 (2%)
#ESOPHAGUS	(49)	(50) 1 (2%)	(49)	(49) 1 (2%)
RUPTURE Inflammation, suppurative		1 (24)		1 (2%)
*STORACH	(49)	(49)	(49)	(49)
ULCER, FCCAL Hyperkeratosis Acanthosis	3 (6%)	2 (4%)	1 (2%)	1 (2%) 2 (4%) 2 (4%)
*PEYERS PATCH Hyperplasia, lymphoid	(49)	(49) 1 (2 <b>%)</b>	(50)	(49)
LARGE INTESTINE	(49)	(50)	(50)	(47)
INFLAMMATICN, ACUTE NEMATODIASIS	1 (2%)	2 (4%)	3 (6%)	1 (2%) 1 (2%)
PINARY SYSTEM				
#KIDNEY HYDRONEPHROSIS	(49)	(50)	(50)	(49) 2 (45)
THROMBOSIS, NOS	1 (28)	1 (2%)		- 1.47
CONGESTION, NOS Inflammation, Chronic	1 (2%) 6 (12%)	9 (18%)	14 (28%)	14 (29%
INFLAMMATICN, CHPONIC DIFFUSE HETAPLASIA, OSSEOUS		1 (2%)		1 (2%)
#URINARY BLADDER	(49)	(50)	(50)	(49)
INPLAMMATICN, CHRONIC HYPEPPLASIA, EPITHELIAL	2 (4%)			1 (25)

\* NUMBER OF ANIMALS WITH TISSUE EXAMINED MICROSCOPICALLY \* NUMBER OF ANIMALS NECROFSIED

	UNTREATED Control	VEHICLE Control	LOW DOSE	HIGH DOSE
ENDOCÀINE SYSTEM				
*PITUITARY CYST, NOS	(40) 2 (5%)	(33)	(46)	(39)
#ADRENAL CONGESTION, NOS	(48)	(49)	(49)	(49) 1 (2%)
#ADRENAL MEDUILA Hyperplasia, Nos	(48)	(49) 2 (4%)	(49)	(49)
#THYROID HYPERPLASIA, C-CELL	(47) 1 (2%)	(47)	(48)	(48)
REPRODUCTIVE SYSTEM				
*PREPUTIAL GIAND DISTENTION	(49)	(50)	(50)	(49) 1 (2%)
<pre>\$PROSTATE INFLAMMATICN, SUPPURATIVE INFLAMMATICN, ACUTE</pre>	(49)	(50) 1 (2%)	(50) 1 (2 <b>%</b> )	(49)
*SEMINAL VESICLE DISTENTION ATROPHY, NCS	(49)	(50) 1 (2%)	(50) 1 (2%)	(49) 2 (4%)
*TESTIS ATROPHY, NCS Hypospermatogenesis	(49)	(50) 2 (4%)	(47) 4 (9 <b>%</b> )	(48) 1 (2%)
*EPIDIDYMIS GRANULOMA, SPERMATIC	(49) 1 (2%)	(50)	(50) 2 (4 <b>%</b> )	(49) 1 (2%)
ERVOUS SYSTEM				
NONE				
SPECIAL SENSE CRGANS				
*EYE ABSCESS, CHRONIC	(49)	(50) 1 (2 <b>%</b> )	(50)	(49)

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\* NUMBER OF ANIMALS NECROPSIED

	UNTREATED CONTROL	VEHICLE Control	LOW DOSE	HIGH DOSE
USCULOSKBLETAL SYSTEM				
NONE				
ODY CAVITIES				
*HEDIASTINUM INFLAMMATICN, CHRONIC	(49)	(50)	(50)	(49) 2 (4%
*ABDOMINAL CAVITY NECROSIS, FAT	(49)	(50)	(50)	(49) 1 (21)
*PERITONBUM INFLAMMATICN, NOS	(49)	(50)	(50)	(49) 1 { 21
*PLEURA INFLAMMATICN, SUPPURATIVE INFLAMMATICN, CHPONIC SUPPURATIV	(49)	(50) 1 (2%)	(50)	(49) 1 (21
*PERICARDIUN INFLANNATICN, CHRONIC	(49)	(50)	(50)	(49) 1 (21
LL OTHER SYSTEMS				
*MULTIPLE CRGANS	(49)	(50)	(50)	(49)
EMBOLUS, SEPTIC	1 (2%)		1 (2%)	
LEUKOCYTCSIS, NOS LEUKEMOID FEACTION	1 (2%)			
PECIAL NOFPHCIOGY SUMMARY				
NO LESIGN REPORTED	5	7	8	7
ANIMAL MISSING/NO NECROPSY Autolysis/No necropsy	1			1

#### TABLE D2.

#### SUMMARY OF THE INCIDENCE OF NONNEOPLASTIC LESIONS IN FEMALE MICE ADMINISTERED SULFISOXAZOLE BY GAVAGE

	UNTREATED Control	VEHICLE CONTROL	LOW DOSE	HIGH DOSE
ARIMALS INITIAILY IN STULY ANIMALS MISSING	50	50 1	50	50
ANIMALS NECPORSIED ANIMALS EXAMINED HISTOPATHOLOGICALLY	50 50	49 	50 50	50 50
INTEGUMENTARY SYSTEM				
NONE				
RESPIRATORY SYSTEM				
*LUNG	(50)	(49)	(50)	(50)
CONGESTION, NOS Hemorrhage	1 (2%)	1 (2%) 4 (8%)	1 (2%)	2 (4%
PNEUMONIA, CHPONIC MURINE	3 (6%)	4 (8%)	1 (2%)	2 (4%
PIGHENTATICN, NOS Alveolar facrophages		1 (2%) 1 (2%)		
LEUKOCYTCSIS, NOS	1 (2%)	· (2 <i>m</i> )		
HEMATOPOIETIC SYSTEM				
BONE MARROW	(50)	(49)	(50)	(50)
FIBPOUS OSTBODYSTROPHY HYPEPPLASIA, GRANULOCYTIC	1 (2%)		1 (2%)	
HIPBPPLASIR, GRANOLOCITIC	((2%)			
*SPLEEN	(50)	(49)	(50)	(50)
HYPERPLASIA, LYMPHOID Hematopoiesis	3 (6%) 1 (2%)	7 (14%)	5 (10%) 3 (6%)	1 (2%) 2 (4%)
	• •	<i>(t</i> ) <b>0</b>	• •	
*CERVICAL LYMFH NODE HYPERPLASIA, LYMPHOID	(48)	(48) 1 (2%)	(50)	(50)
AMESENTEPIC L. NODE INFLAMMATICN, NOS	(48)	(48) 1 (2%)	(50)	(50)
HYPERPLASIA, LYMPHOID	4 (8%)	5 (10%)	5 (10%)	4 (8%)
*RENAL LYMPH NODE	(48)	(48)	(50)	(50)
HYPERPLASIA, LYMPHOID			1 (2%)	

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

	UNTREATED Control	VEHICLE Control	LOW DOSE	HIGH DOSE
THYMUS HYPERPLASIA, LYMPHOID	{29}	(29) 1 (3%)	(21)	(20)
IRCULATORY SYSTEM				
#HEART PERIARTERITIS	(50) 1 (2%)	(49)	(50)	(50)
IGESTIVE SYSTEM				
<pre>#LIVER CONGESTION, NOS HEMORPHAGE NECROSIS, NOS</pre>	(50) 1 (2%) 1 (2%) 1 (2%)	(49)	(50) 1 (2%)	(50)
*BILE DUCT CYST, NOS	(50)	(49)	(50) 1 (2%)	(50) 1 (2%)
PANCREAS CYSTIC DUCTS	(50) 3 (6%)	(49) 3 (6 <b>%</b> )	(50) 4 (8%)	(50)
PANCREATIC ACINUS ATROPHY, NOS	(50) 1 (2%)	(49) 1 (2%)	(50)	(50) 1 (2 <b>%</b>
#STONACH INFLAMMATICN, POCAL ULCER, FCCAL INFLAMMATICN, CHPONIC	(50)	(49) 2 (4%) 1 (2%)	(49) 1 (2%)	(50) 1 (25 1 (25
GASTRIC NUCOSA HypErplasia, Focal	(50)	(49)	(49) 1 (2%)	(50)
IGASTRIC SUBNUCOSA Idema, Nos	(50)	(49)	(49) 1 (2%)	(50)
#LARGE INTESTINE NEMATODIASIS	(49) 1 (2 <b>%)</b>	(49)	(50) 1 (2%)	(50) 1 (2 <b>%</b>
RINARY SYSTEE				
*KIDHEY CYST, NOS	(50)	(49)	(50)	(50)

# NUMBER OF ANIMALS WITH TISSUE EXAMINED MICROSCOPICALLY \* NUMBER OF ANIMALS NECPOPSIED

	UNTREATED CONTROL	VEHICLE Control	LOW DOSE	HIGH DOSE
PYELCNEPHRITIS, NOS INPLANMATICW, CHPONIC PERIARTERITIS GLOMERULOSCLEROSIS, NOS	5 (10%) 1 (2%) 1 (2%)		1 (2%) 3 (6%)	1 (2%)
AMYLOIDOSIS METAPLASIA, OSSEOUS	1 (2%)			1 (2%)
<pre>#KIDNEY/TUBULE PIGNENTATICN, NOS</pre>	(50)	(49)	(50) 1 (2%)	(50)
#URINARY ELADDER Anyloidosis	(49) 1 (2%)	(48)	(49)	(50)
BRDOCRINE SYSTEM				
#ADRENAL CORTEX DEGENERATION, NOS Hypertrophy, Nos	(50)	(48)	(49) 1 (2%)	(50) 1 (2%)
THYROID CYSTIC FOLLICLES INFLAMMATION, CHRONIC HYPERPLASIA, FOLLICULAR-CELL	(49) 1 (2%) 1 (2%) 1 (2%)	(48)	(48)	(46) 1 (2%)
REPRODUCTIVE SYSTEM				
*NAMMARY GLAND METAPLASIA, SQUAMOUS	(50)	(49) 1 (2%)	(50)	(50)
UTERUS HYDROMETRA Thronbosis, Nos Angiectasis	(50) 1 (2%) 1 (2%)	(49)	(50) 1 (2%)	(50) 1 (2%)
#UTERUS/BUDCHETRIUM INFLAMMATICN, SUPPURATIVE	(50)	(49)	(50) 1 (2%)	(50)
HYPERPLASIA, CYSTIC	41 (82%)	45 (92%)	42 (84%)	44 (88%)
TOTARY CYSTIC POILICLES	(50)	(49) 2 (4 <b>%</b> )	(50)	(50)
FOLLICULAR CYST, NOS Parovarian cyst Hemorrhagic cyst	4 (8%) 7 (14%)	1 (2%) 9 (18%)	4 (8%) 5 (10%) 1 (2%)	8 (16%) 11 (22%) 1 (2%)

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

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TABLE D2. FEMALE MICE: NONNEOPLASTIC LESIONS (CONTINUED) \_\_\_\_\_ ----VEHICLE CONTROL UNTREATED HIGH DOSE LOW DOSE CONTROL 1 (2%) INFLAMMATICN, NOS (50) 1 (2%) (50) \*RIGHT OVARY (50) (49) PAROVARIAN CYST THRONBOSIS, NOS 1 (2%) (50) 1 (2%) #LEPT OVARY (49) (50) (50) THRONBUS, CRGANIZED HEMORRHAGIC CYST 1 (2%) ----------NERVOUS SYSTEM (50) 1 (2%) 1 (2%) (50) (50) #BPAIN (48) COMPRESSION HEBATOFOIESIS -----\_\_\_\_\_ SPECIAL SENSE CRGANS (49) 1 (2%) 1 (2%) \*EYE (50) (50) (50) INPLAMMATICN, NOS PHTHISIS EULBI NUSCULOSKELETAI SYSTEM (50) 1 (2%) \*SKELETAL MUSCLE (49) (50) (50) PARASITISM \_ \_ \_ \_ FODY CAVITIES (50) 2 (4%) \*PEBITONEUM (49) (50) (50) INFLAMMATICN, NOS \_\_\_\_ \_\_\_\_\_ ALL OTHER SYSTEMS NONE \_\_\_\_ \_\_\_\_ \_\_\_\_\_ SPECIAL MORPHCIOGY SUMMARY NO LESION FEFORTED \_1

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

UNTREATED Control	VEHICLE Control	LOW DOSE	HIGH DOSE			

ANIMAL MISSING/NO NBCROFSY	1	 
NUMBER OF ANIMALS WITH TISSUE EXAMINE		 

\* NUMBER OF ANIMALS WITH TISSUE \* NUMBER OF ANIMALS NECPOPSIED APPENDIX E

ANALYSES OF THE INCIDENCE OF PRIMARY TUMORS IN RATS ADMINISTERED SULFISOXAZOLE BY GAVAGE

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Topography: Morphology	Vehicle Control	Low Dose	High Dose
Integumentary System: Fibroma			
of the Subcutaneous Tissue (b)	1/50 (2)	6/50 (12)	2/50 (4)
P Values (c,d)	N.S.	N.S.	N.S.
Departure from Linear Trend (e)	P = 0.026		
Relative Risk (f)		6.000	2.000
Lower Limit		0.768 269.891	0.108
Upper Limit		209.091	115.621
Weeks to First Observed Tumor	106	96	85
Hematopoietic System:			
Monocytic Leukemia (b)	9/50 (18)	6/50 (12)	8/50 (16)
P Values (c,d)	N.S.	N.S.	N.S.
Relative Risk (f)		0.667	0.889
Lower Limit		0.211	0.325
Upper Limit		1.935	2.382
Weeks to First Observed Tumor	96	101	91

	Vehicle	Low	High
Topography: Morphology	<u>Control</u>	Dose	Dose
Hematopoietic System: All			
Lymphoma or Leukemia (b)	11/50 (20)	7/50 (14)	10/50 (20)
P Values (c,d)	<u>N</u> .S.	N.S.	N.S.
Relative Risk (f)		0.636	0.909
Lower Limit		0.228	0.381
Upper Limit		1.645	2.140
Weeks to First Observed Tumor	96	101	88
Liver: Hepatocellular Carcinoma		······	
or Neoplastic Nodule (b)	1/50 (2)	4/50 (8)	2/50 (4)
P Values (c,d)	N.S.	N.S.	N.S.
Relative Risk (f)		4.000	2.000
Lower Limit		0.415	0.108
Upper Limit		192.805	115.621
Weeks to First Observed Tumor	106	106	105

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	Vehicle	Low	High
Topography: Morphology	<u>Control</u>	Dose	Dose
Pituitary: Chromophobe			
Adenoma (b)	4/49 (8)	4/44 (9)	5/50 (10)
P Values (c,d)	N.S.	N.S.	N.S.
Relative Risk (f)		1.114	1.225
Lower Limit		0.220	0.280
Upper Limit		5.626	5.833
Weeks to First Observed Tumor	86	99	75
Adrenal: Pheochromocytoma or			
Malignant Pheochromocytoma (b)	5/50 (10)	10/50 (20)	10/50 (20)
P Values (c,d)	N.S.	N.S.	N.S.
Relative Risk (f)		2.000	2.000
Lower Limit		0.675	0.675
Upper Limit		6.944	6.944
Weeks to First Observed Tumor	91	97	89

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## Table El. Analyses of the Incidence of Primary Tumors in Male Rats Administered Sulfisoxazole by Gavage (a)

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	Vehicle	Low	High
Topography: Morphology	<u>Control</u>	Dose	Dose
Preputial Gland: Carcinoma, NOS (b)	2/50 (4)	4/50 (8)	3/50 (6)
P Values (c,d)	N.S.	N.S.	N.S.
Relative Risk (f)		2.000	1.500
Lower Limit		0.301	0.180
Upper Limit		21.316	17.329
Weeks to First Observed Tumor	106	103	105
Testis: Interstitial-cell			<u> </u>
Tumor (b)	45/48 (94)	43/49 (88)	46/49 (94)
P Values (c,d)	N.S.	N.S.	N.S.
Relative Risk (f)		0.936	1.001
Lower Limit		0.843	0.907
Upper Limit		1.082	1.106
Weeks to First Observed Tumor	87	85	66

## (continued)

- (a) Dosed groups received 100 or 400 mg/kg.
- (b) Number of tumor-bearing animals/number of animals examined at site (percent).
- (c) Beneath the incidence of tumors in the vehicle-control group is the probability level for the Cochran-Armitage test when P is less than 0.05; otherwise, not significant (N.S.) is indicated. Beneath the incidence of tumors in a dosed group is the probability level for the Fisher exact test for the comparison of that dosed group with the vehicle-control group when P is less than 0.05; otherwise, not significant (N.S.) is indicated.
- (d) A negative trend (N) indicates a lower incidence in a dosed group than in the vehicle-control group.

(e) The probability level for departure from linear trend is given when P is less than 0.05 for any comparison.

(f) The 95% confidence interval of the relative risk between each dosed group and the vehicle-control group.

	Vehicle	Low	High
Topography: Morphology	Control	Dose	Dose
Hematopoietic System:			
Monocytic Leukemia (b)	3/50 (6)	3/50 (6)	9/50 (18)
P Values (c,d)	P = 0.016	N.S.	N.S.
Relative Risk (f)		1.000	3.000
Lower Limit		0.140	0.803
Upper Limit		7.133	16.338
Weeks to First Observed Tumor	98	106	91
Hematopoietic System: Malignant			
Lymphocytic Lymphoma or Monocytic	(150 (0)	2/50 (6)	0/50 (10)
Leukemia (b)	4/50 (8)	3/50 (6)	9/50 (18)
P Values (c,d)	P = 0.033	N.S.	N.S.
Relative Risk (f)		0.750	2.250
Lower Limit		0.115	0.676
Upper Limit		4.206	9.394
Weeks to First Observed Tumor	98	106	91

	Vehicle	Low	High
Topography: Morphology	Control	Dose	Dose
Hematopoietic System: All			
Lymphoma or Leukemia (b)	6/50 (12)	3/50 (6)	9/50 (18)
P Values (c,d)	N.S.	N.S.	N.S.
Relative Risk (f)		0.500	1.500
Lower Limit		0.085	0.517
Upper Limit		2.200	4.749
Weeks to First Observed Tumor	98	106	91
Pituitary: Chromophobe			
Adenoma (b)	18/49 (37)	19/50 (38)	17/50 (34)
P Values (c,d)	N.S.	N.S.	N.S.
Relative Risk (f)		1.034	0.926
Lower Limit		0.590	0.513
Upper Limit		1.821	1.667
Weeks to First Observed Tumor	75	77	77

Topography: Morphology	Vehicle <u>Control</u>	Low Dose	High Dose
Mammary Gland: Fibroadenoma (b)	12/50 (24)	16/50 (33)	15/50 (30)
P Values (c,d)	N.S.	N.S.	N.S.
Relative Risk (f)		1.333	1.250
Lower Limit		0.663	0.611
Upper Limit		2.754	2.615
Weeks to First Observed Tumor	88	99	103
Preputial Gland: Carcinoma, NOS (b)	3/50 (6)	0/50 (0)	1/50 (2)
P Values (c,d)	N.S.	N.S.	N.S.
Relative Risk (f)		0.000	0.333
Lower Limit		0.000	0.006
Upper Limit		1.663	3.983
Weeks to First Observed Tumor	94		106

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Topography: Morphology	Vehicle Control	Low Dose	High Dose
Preputial Gland: Carcinoma or Adenoma, NOS (b)	3/50 (6)	0/50 (0)	2/50 (4)
P Values (c,d)	N.S.	N.S.	N.S.
Relative Risk (f) Lower Limit Upper Limit		0.000 0.000 1.663	0.667 0.058 5.570
Weeks to First Observed Tumor	94		106
Uterus: Endometrial Stromal Polyp (b)	5/49 (10)	6/49 (12)	8/48 (17)
P Values (c,d)	N.S.	N.S.	N.S.
Relative Risk (f) Lower Limit Upper Limit		1.200 0.327 4.654	1.633 0.509 5.913
Weeks to First Observed Tumor	106	106	95

#### (continued)

- (a) Dosed groups received 100 or 400 mg/kg.
- (b) Number of tumor-bearing animals/number of animals examined at site (percent).

(c) Beneath the incidence of tumors in the vehicle-control group is the probability level for the Cochran-Armitage test when P is less than 0.05; otherwise, not significant (N.S.) is indicated. Beneath the incidence of tumors in a dosed group is the probability level for the Fisher exact test for the comparison of that dosed group with the vehicle-control group when P is less than 0.05; otherwise, not significant (N.S.) is indicated.

- (d) A negative trend (N) indicates a lower incidence in a dosed group than in the vehicle-control group.
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- (e) The probability level for departure from linear trend is given when P is less than 0.05 for any comparison.
- (f) The 95% confidence interval of the relative risk between each dosed group and the vehicle-control group.

APPENDIX F

ANALYSES OF THE INCIDENCE OF PRIMARY TUMORS IN MICE ADMINISTERED SULFISOXAZOLE BY GAVAGE

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Topography: Morphology	Vehicle <u>Control</u>	Low Dose	High Dose
Integumentary System:			
Fibrosarcoma of the			
Subcutaneous Tissue (b)	4/50 (8)	5/50 (10)	3/49 (6)
P Values (c,d)	N.S.	N.S.	N.S.
Relative Risk (f)		1.250	0.765
Lower Limit		0.286	0.118
Upper Limit		5.954	4.288
Weeks to First Observed Tumor	100	80	92
Lung: Alveolar/Bronchiolar			~~~***********************************
Adenoma or Carcinoma (b)	4/50 (8)	5/50 (10)	0/49 (0)
P Values (c,d)	P = 0.029 (N)	N.S.	N.S.
Relative Risk (f)		1.250	0.000
Lower Limit		0.286	0.000
Upper Limit		5.954	1.100
Weeks to First Observed Tumor	73	104	~ ~

Table Fl.	Analyses of the	Incidence of Primary Tumors in Male Mice
	Administered	Sulfisoxazole by Gavage (a)

Topography: Morphology	Vehicle Control	Low Dose	High Dose
Hematopoietic System: All Lymphoma (b)	3/50 (6)	8/50 (16)	5/49 (10)
Rematoporetic System. All Lymphoma (b)	5750 (07	0/00 (10)	J/49 (10)
P Values (c,d)	N.S.	N.S.	N.S.
Relative Risk (f)		2.667	1.701
Lower Limit		0.685	0.351
Upper Limit		14.816	10.426
Weeks to First Observed Tumor	90	77	104
Hematopoietic System: All			
Lymphoma or Leukemia (b)	4/50 (8)	8/50 (16)	5/49 (10)
P Values (c,d)	N.S.	N.S.	N.S.
Relative Risk (f)		2.000	1.276
Lower Limit		0.576	0.292
Upper Limit		8.539	6.070
Weeks to First Observed Tumor	89	77	104

Topography: Morphology	Vehicle Control	Low Dose	High Dose
Topography. Horphorogy	<u>concroi</u>	Dose	Dose
All Sites: Hemangiosarcoma (b)	5/50 (10)	1/50 (2)	3/49 (6)
P Values (c,d)	N.S.	N.S.	N.S.
Relative Risk (f)		0.200	0.612
Lower Limit		0.004	0.100
Upper Limit		1.699	2.967
Weeks to First Observed Tumor	63	100	63
All Sites: Hemangiosarcoma or			
Hemangioma (b)	5/50 (10)	2/50 (4)	3/49 (6)
P Values (c,d)	N.S.	N.S.	N.S.
Relative Risk (f)		0.400	0.612
Lower Limit		0.040	0.100
Upper Limit		2.313	2.967
Weeks to First Observed Tumor	63	100	63

Topography: Morphology	Vehicle Control	Low Dose	High Dose
Liver: Hepatocellular			
Carcinoma (b)	15/50 (30)	13/50 (26)	20/49 (41)
P Values (c,d)	N.S.	N.S.	N.S.
Relative Risk (f)		0.867	1.361
Lower Limit		0.426	0.755
Upper Limit		1.741	2.493
Weeks to First Observed Tumor	100	93	71
Liver: Hepatocellular Carcinoma			
or Adenoma (b)	15/50 (30)	13/50 (26)	21/49 (43)
P Values (c,d)	N.S.	N.S.	N.S.
Relative Risk (f)		0.867	1.429
Lower Limit		0.426	0.802
Upper Limit		1.741	2.592
Weeks to First Observed Tumor	100	93	71

	Vehicle	Low	High
Fopography: Morphology	<u>Control</u>	Dose	Dose
Adrenal: Pheochromocytoma	2/49 (4)	5/49 (10)	0/49 (0)
P Values (c,d)	N.S.	N.S.	N.S.
Relative Risk (f)		2.500	0.000
Lower Limit		0.433	0.000
Upper Limit		25.265	3.379
Weeks to First Observed Tumor	104	93	

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(a) Dosed groups received 500 or 2,000 mg/kg.

- (b) Number of tumor-bearing animals/number of animals examined at site (percent).
- (c) Beneath the incidence of tumors in the vehicle-control group is the probability level for the Cochran-Armitage test when P is less than 0.05; otherwise, not significant (N.S.) is indicated. Beneath the incidence of tumors in a dosed group is the probability level for the Fisher exact test for the comparison of that dosed group with the vehicle-control group when P is less than 0.05; otherwise, not significant (N.S.) is indicated.
- (d) A negative trend (N) indicates a lower incidence in a dosed group than in the vehicle-control group.
- (e) The probability level for departure from linear trend is given when P is less than 0.05 for any comparison.
- (f) The 95% confidence interval of the relative risk between each dosed group and the vehicle-control group.

Topography: Morphology	Vehicle Control	Low Dose	High Dose
Lung: Alveolar/Bronchiolar	0/49 (0)	1/50 (2)	5/50 (10)
Adenoma or Carcinoma (b)	0/49 (0)	1/50 (2)	5/50 (10)
P Values (c,d)	P = 0.006	N.S.	P = 0.030
Relative Risk (f)		Infinite	Infinite
Lower Limit		0.053	1.237
Upper Limit		Infinite	Infinite
Weeks to First Observed Tumor		105	96
Hematopoietic System: All			
Lymphoma (b)	16/49 (33)	16/50 (32)	20/50 (40)
P Values (c,d)	N.S.	N.S.	N.S.
Relative Risk (f)		0.980	1.225
Lower Limit		0.521	0.690
Upper Limit		1.847	2.205
Weeks to First Observed Tumor	77	73	71

	Vehicle	Low	High
Topography: Morphology	Control	Dose	Dose
Hematopoietic System: All			
Lymphoma or Leukemia (b)	17/49 (35)	16/50 (32)	20/50 (40)
P Values (c,d)	N.S.	N.S.	N.S.
Relative Risk (f)		0.922	1.153
Lower Limit		0.496	0.658
Upper Limit		1.709	2.040
Weeks to First Observed Tumor	77	73	71
Liver: Hepatocellular	<u> </u>		
Carcinoma (b)	0/49 (0)	5/50 (10)	2/50 (4)
P Values (c,d)	N.S.	P = 0.030	N.S.
Departure from Linear Trend (e)	P = 0.019		
Relative Risk (f)		Infinite	Infinite
Lower Limit		1.237	0.290
Upper Limit		Infinite	Infinite
Weeks to First Observed Tumor		103	105

Topography: Morphology	Vehicle Control	Low Dose	High Dose	
Pituitary: Chromophobe Adenoma (b)	2/42 (5)	1/44 (2)	1/31 (3)	
P Values (c,d)	N.S.	N.S.	N.S.	
Relative Risk (f)		0.477	0.677	
Lower Limit		0.008	0.012	
Upper Limit		8.824	12.354	
Weeks to First Observed Tumor	104	105	105	
Mammary Gland: Adenocarcinoma,				
NOS (b)	5/49 (10)	1/50 (2)	0/50 (0)	
P Values (c,d)	P = 0.018 (N)	N.S.	P = 0.027 (N)	
Relative Risk (f)		0.196	0.000	
Lower Limit		0.004	0.000	
Upper Limit		1.665	0.777	
Weeks to First Observed Tumor	104	105		

Table F2. Analyses of the Incidence of Primary Tumors in Female Mice Administered Sulfisoxazole by Gavage (a)

	Vehicle	Low	High
Copography: Morphology	Control	Dose	Dose
All Sites: Hemangioma or			
Hemangiosarcoma (b)	2/49 (4)	4/50 (8)	1/50 (2)
P Values (c,d)	N.S.	N.S.	N.S.
Relative Risk (f)		1.960	0.490
Lower Limit		0.296	0.008
Upper Limit		20.886	9.103
Weeks to First Observed Tumor	104	105	105

Table F2.	Analyses of the Incidence of Primary Tumors in Female Mice	
	Administered Sulfisoxazole by Gavage (a)	

(a) Dosed groups received 500 or 2,000 mg/kg.

- (b) Number of tumor-bearing animals/number of animals examined at site (percent).
- (c) Beneath the incidence of tumors in the vehicle-control group is the probability level for the Cochran-Armitage test when P is less than 0.05; otherwise, not significant (N.S.) is the indicated. Beneath the incidence of tumors in a dosed group is the probability level for the Fisher exact test for the comparison of that dosed group with the vehicle-control group when P less than 0.05; otherwise, not significant (N.S.) is indicated.
- (d) A negative trend (N) indicates a lower incidence in a dosed group than in the vehicle-control group.
- (e) The probability level for departure from linear trend is given when P is less than 0.05 for any comparison.
- (f) The 95% confidence interval of the relative risk between each dosed group and the vehicle-control group.

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## Review of the Bioassay of Sulfisoxazole\* for Carcinogenicity by the Data Evaluation/Risk Assessment Subgroup of the Clearinghouse on Environmental Carcinogens

#### August 31, 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 exposed. The members of the Clearinghouse have been drawn from academia, industry, organized labor, public interest groups, State health officials, and quasi-public health and research organizations. Members have been selected on the basis of their experience in carcinogenesis or related fields and, collectively, provide expertise in 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 Sulfisoxazole for carcinogenicity.

The primary reviewer noted that Sulfisoxazole is a widely used antibiotic for urinary tract infections. She agreed with the conclusion in the report that Sulfisoxazole was not carcinogenic, under the conditions of test. She briefly described the experimental design and noted the absence of any unusual highlights in the conduct or results of the study. The primary reviewer remarked on the lack of toxicity displayed in treated rats and mice, suggesting that maximum tolerated doses may not have been achieved.

The secondary reviewer agreed with the conclusion in the report that Sulfisoxazole was not carcinogenic, under the conditions of test. Although the study was adequately conducted, he noted the four-fold difference in dose levels, in both treated rats and mice. He commented on the increased incidence of lung tumors in treated female mice, which appeared to be dose-related, and the negative association for these tumors among treated male rats. The secondary reviewer concluded that the study was a valid test for the carcinogenicity of Sulfisoxazole and that the compound would not appear to pose a risk to humans.

A motion was approved unanimously that the report on the bioassay of Sulfisoxazole be accepted as written.

#### Members present were:

Arnold Brown (Chairman), University of Wisconsin Medical School Joseph Highland, Environmental Defense Fund Michael Shimkin, University of California at San Diego Louise Strong, University of Texas Health Sciences Center (Kenneth Wilcox, Michigan State Health Department, submitted a written review)

\* 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.

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