NATIONAL TOXICOLOGY PROGRAM Technical Report Series No. 252



NATIONAL TOXICOLOGY PROGRAM

The National Toxicology Program (NTP), established in 1978, develops and evaluates scientific information about potentially toxic and hazardous chemicals. This knowledge can be used for protecting the health of the American people and for the primary prevention of chemically induced disease. By bringing together the relevant programs, staff, and resources from the U.S. Public Health Service, DHHS, the National Toxicology Program has centralized and strengthened activities relating to toxicology research, testing and test development/validation efforts, and the dissemination of toxicological information to the public and scientific communities and to the research and regulatory agencies.

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

Special Note: This Technical Report was peer reviewed in public session and approved by the NTP Board of Scientific Counselors' Technical Reports Review Subcommittee on September 22, 1982 [see page 11]. Thereafter, the NTP adopted the policy that the experimental data and laboratory records from all NTP Toxicology and Carcinogenesis Studies not yet printed and distributed would be audited. [A summary of the data audit is presented in Appendix K.] Consequently, printing and distribution of this Technical Report have been delayed and the format differs from that of Technical Reports peer reviewed more recently. The categories of evidence of carcinogenicity adopted by the NTP in June 1983 were not used to evaluate these data. This final Technical Report supersedes all previous drafts of this report that have been distributed.

NTP TECHNICAL REPORT ON THE

CARCINOGENESIS STUDIES OF FOOD GRADE GERANYL ACETATE (71% GERANYL ACETATE, 29% CITRONELLYL ACETATE) (CAS NO. 105-87-3) IN F344/N RATS AND B6C3F₁ MICE (GAVAGE STUDY)



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U.S. DEPARTMENT OF HEALTH AND HUMAN SERVICES Public Health Service National Institutes of Health

NOTE TO THE READER

This is one in a series of experiments designed to determine whether selected chemicals produce cancer in animals. Chemicals selected for testing in the NTP carcinogenesis program are chosen primarily on the bases of human exposure, level of production, and chemical structure. Selection per se is not an indicator of a chemical's carcinogenic potential. Negative results, in which the test animals do not have a greater incidence of cancer than control animals, do not necessarily mean that a test chemical is not a carcinogen, inasmuch as the experiments are conducted under a limited set of conditions. Positive results demonstrate that a test chemical is carcinogenic for animals under the conditions of the test and indicate that exposure to the chemical has the potential for hazard to humans. The determination of the risk to humans from chemicals found to be carcinogenic in animals requires a wider analysis which extends beyond the purview of this study.

This study was initiated by the National Cancer Institute's Carcinogenesis Testing Program, now part of the National Institute of Environmental Health Sciences, National Toxicology Program.

Comments and questions about the National Toxicology Program Technical Reports on Carcinogenesis Studies should be directed to the National Toxicology Program, located at Research Triangle Park, NC 27709 (919-541-3991).

Although every effort is made to prepare the Technical Reports as accurately as possible, mistakes may occur. Readers are requested to communicate any mistakes to NTP (P.O. Box 12233, Research Triangle Park, NC 27709), so that corrective action may be taken. Further, anyone who is aware of related ongoing or published studies not mentioned in this report is encouraged to make this information known to the NTP.

These NTP Technical Reports are available for sale from the National Technical Information Service, U.S. Department of Commerce, 5285 Port Royal Road, Springfield, VA 22161 (703-487-4650).

Single copies of this carcinogenesis studies technical report are available without charge (and while supplies last) from the NTP Public Information Office, National Toxicology Program, P.O. Box 12233, Research Triangle Park, NC 27709.

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CARCINOGENESIS STUDIES OF GERANYL ACETATE





71%

GERANYL ACETATE CAS NO. 105-87-3 C₁₂H₂₀O₂ Mol. Wt. 196.28 **29**%

CITRONELLYL ACETATE

CAS NO. 150-84-5 C₁₂H₂₂O₂ Mol. Wt. 198.30

ABSTRACT

Carcinogenesis studies of food-grade geranyl acetate (containing approximately 29% citronellyl acetate) were conducted by administering the test chemical in corn oil by gavage to groups of 50 male and 50 female F344/N rats at doses of 1,000 or 2,000 mg/kg body weight and to groups of 50 male and 50 female B6C3F₁ mice at doses of 500 or 1,000 mg/kg. Doses were administered five times per week for 103 weeks. Groups of 50 rats and 50 mice of each sex received corn oil by gavage on the same dosing schedule and served as vehicle controls.

The cumulative toxicity of geranyl acetate in the 2-year study was indicated by the significantly shorter survival of high dose male rats (control, 34/50; low dose, 29/50; high dose, 18/50) and of high dose male mice (control, 31/50; low dose, 32/50; high dose, 0/50) and dosed female mice (28/50; 15/50; 0/50) when compared with controls. Throughout most of the 2-year study, mean body weights of high dose rats and mice of each sex were lower than those of the controls.

The occurrence of retinopathy or cataracts in the high dose male rats and low dose female rats as compared with the controls does not appear to be related to the administration of geranyl acetate but rather to the proximity of the rats to fluorescent light. The incidence of retinopathy or cataracts (combined) was: males: control, 0/50, 0%; low dose, 1/50, 2%; high dose, 11/50, 22%; females: control, 1/50, 2%; high dose, 13/50, 26%; high dose, 2/50, 4%.

Kidney tubular cell adenomas, an uncommon tumor type, were found in 2/50 (4%) low dose male rats. The historical incidence of male corn oil gavage control F344/N rats with kidney tumors is 1/250 (0.4%) at this laboratory and 4/998 (0.4%) in the program.

Squamous cell papillomas in the skin were increased marginally in low dose male rats (control, 0/50; low dose, 4/50, 8%; high dose, 1/50, 2%). In addition, one low dose male rat had a squamous cell carcinoma of the skin. The incidence of low dose male rats with either squamous cell papillomas or carcinomas was greater (P<0.05) in comparison with the controls. The historical incidence of squamous cell papillomas or carcinomas (combined) in gavage control male F344/N rats is 3.6% (9/250) at this laboratory and 2.5% (25/999) throughout the program. The incidence of all epidermal tumors was not significantly elevated in dosed male rats relative to controls (control, 3/50, 6%; low dose, 6/50, 12%; high dose, 1/50, 2%). All high dose (1,000 mg/kg) male and female mice were dead by week 91 as a result of accidentally being administered 2,800 mg/kg for 3 days during week 91; survival of low dose and control male mice was comparable. Survival of high dose male and dosed female mice may have been inadequate for the detection of late-appearing tumors. No evidence of any carcinogenic effect was found in either low or high dose mice of either sex. An infection of the genital tract was probably responsible for the deaths of 14/22 control and 8/32 low dose female mice before the end of the study.

Cytoplasmic vacuolization was increased in the liver and in the kidney of male and female mice and was considered to be compound related (liver—male: control, 1/50, 2%; low dose, 7/50, 14%; high dose, 47/50, 94%; female: 1/50, 2%; 27/50, 54%; 46/50, 92%; kidney or kidney tubule—male: 0/50; 0/50; 41/50, 82%; female: 0/50; 24/49, 49%; 37/50, 74%).

Under the conditions of these studies, geranyl acetate was not carcinogenic* for F344/N rats or $B6C3F_1$ mice of either sex; however, the reduced survival observed in high dose male rats, high dose male mice, and high and low dose female mice lowered the sensitivity of these studies for detecting neoplastic responses in these groups. In male rats the marginal increases of squamous cell papillomas of the skin and tubular cell adenomas of the kidney may have been related to administration of geranyl acetate.

*See Special Note on inside front cover.

CONTRIBUTORS

These studies were conducted at Southern Research Institute under a subcontract to Tracor Jitco, Inc., the prime contractor for the Carcinogenesis Testing Program. The 2-year studies were begun in October 1978, and ended in November 1980.

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SUMMARY OF PEER REVIEW COMMENTS ON THE CARCINOGENESIS STUDIES OF GERANYL ACETATE

On 22 September 1982 this technical report on the carcinogenesis studies of geranyl acetate (containing 29% citronellyl acetate) underwent peer review by the National Toxicology Program Board of Scientific Counselors' Technical Reports Review Subcommittee and associated Panel of Experts. This public review meeting began at 9:00 a.m. in the Conference Center, Building 101, South Campus, National Institute of Environmental Health Sciences, Research Triangle Park, North Carolina. The following precis represents the critiques made by the principal reviewers, as well as comments from and discussion by the Peer Review Panel, NTP staff, and attendees.

Dr. Hitchcock, a principal reviewer for the report on the carcinogenesis studies of geranyl acetate, agreed with the conclusions. She noted that the chronic study was not completed for high dose mice of both sexes because of dosing errors in the ninety-first week. She said the thirteen-week study resulted in an overestimate of the maximum tolerated dose (MTD) for male rats in the two-year studies. As a second principal reviewer, Dr. Elashoff agreed with the conclusions, and that the doses were probably too high in the two-year rat studies.

Dr. Scala said more discussion could be added to the report about exceeding the MTD, and its impact on the usefulness of the study results. Dr. Mirer said the kidney and liver toxicity may relate to reduced survival and, if so, could be mentioned in the report. Dr. Moore, NTP, said since renal tubular-cell tumors ordinarily appear late in the rodent's life, we would not have seen them in many high dose rats due to the early mortality. Dr. Swenberg suggested the low dose in this instance becomes an MTD.

Dr. Elashoff moved that the report on the carcinogenesis studies of geranyl acetate be accepted. Dr. Mirer seconded the motion and the technical report was approved by nine affirmative votes with one negative vote (Dr. Scala).

I. INTRODUCTION





GERANYL ACETATE

CAS NO. 105-87-3 C₁₂H₂₀O₂ Mol. Wt. 196.28

Geranyl acetate—(3,7-dimethyl-2,6-octadiene-1-ol acetate)—is a colorless liquid prepared by fractional distillation of selected essential oils or by acetylation of geraniol (Food Chemicals Codex, 1972; Fenaroli, 1971). It is a natural constituent of more than 60 essential oils, including Ceylon citronella, palmarosa, lemon grass, petit grain, neroli bigarade, geranium, coriander, carrot, and sassafras.

Geranyl acetate is used primarily as a component of perfumes for creams and soaps and as a flavoring ingredient (Opdyke, 1974; Kirk-Othmer, 1967). On the U.S. Food and Drug Administration's list of substances "generally recognized as safe", the Food Chemicals Codex (1972) specifies that geranyl acetate must contain at least 90% total esters. Isomeric and other closely related terpenic esters may also be present (USCFR, 1977). Geranyl acetate may be found in foods at the following concentrations: baked goods, 17 ppm; candy, 15 ppm; ice cream, 6.5 ppm; and chewing gum, 0.3-1.2 ppm (Fenaroli, 1971). It may also be present in food-grade citronellyl acetate (Food Chemicals Codex, 1972).

The United States produced 195,000 pounds of geranyl acetate in 1980 (USITC, 1981).

Geraniol (a potential metabolite of geranyl acetate) and citronellol (a dihydro analog of geraniol, saturated at the 2,3-position) are excreted in rabbits and dogs as dicarboxylic



29%

CITRONELLYL ACETATE

CAS NO. 150-84-5 C₁₂H₂₂O₂ Mol. Wt. 198.30

acids (Williams, 1947). Geranyl pyrophosphate (a geraniol derivative) is an intermediate in the mammalian biosynthesis of cholesterol (White, 1973).

The reported oral LD50 value of geranyl acetate in male and female Osborne-Mendel rats is 6.33g/kg body weight (Jenner et al., 1964) and the oral LD50 value of citronellyl acetate in rats (strain unspecified) is 6.8 g/kg (Calandra, (1971). No compound-related macroscopic or microscopic effects were observed when Osborne-Mendel rats were fed diets containing 10,000 ppm geranyl acetate for 17 weeks (Hagan et al., 1967).

Geranyl acetate was not mutagenic in a recassay in *Bacillus subtilis* (Oda et al., 1978), and was not mutagenic to *Salmonella typhimurium* strains TA 1535, TA 1537, TA 98, and TA 100, with or without metabolic activation (NTP, 1982). Geraniol was not mutagenic in *Salmonella typhimurium* TA 100, with or without metabolic activation (Eder et al., 1980).

Geranyl acetate was tested because of its use in foods and because it had not previously been tested for carcinogenicity. Human exposure to this flavoring agent occurs through food ingestion and dermal application; gavage was chosen as the route of administration to animals in these studies because of its volatility and its reaction with moisture in feed.

II. MATERIALS AND METHODS

CHEMICAL ANALYSES

DOSE PREPARATION

SINGLE-DOSE STUDIES

FOURTEEN-DAY STUDIES

THIRTEEN-WEEK STUDIES

TWO-YEAR STUDIES

Study Design Source and Specifications of Test Animals Animal Maintenance Clinical Examinations and Pathology Data Recording and Statistical Methods

CHEMICAL ANALYSES

Food-grade geranyl acetate (3,7-dimethyl-2,6octadiene-1-ol acetate) was obtained in two lots. Lot No. 70201 (Elan Chemical Co, Newark, NJ) was used for the prechronic studies and Lot No. 36948 (Givaudan Corp.) was used for the 2-year studies.

Purity and identity analyses were conducted at Midwest Research Institute (Appendix G). Results of elemental analysis of Lot No. 70201 were higher than the theoretical value for carbon, and those of Lot No. 36948 were slightly high for carbon and hydrogen. Results of titration showed that Lot No. 70201 was 96.2% esters and less than 0.1% free acid and that Lot No. 36948 was 95.1% esters and less than 0.1% free acid. Food grade specifications for geranyl acetate require that the ester content be at least 90.0% (Food Chemicals Codex, 1981).

Eleven impurities were detected in Lot No. 70201 by vapor-phase chromatography. An unresolved shoulder with an area of 6%-17% of the major peak probably reflected the presence of citronellyl acetate. Citronellyl acetate is an analog of geranyl acetate in which the bond between carbons 2 and 3 is saturated. The areas of the remaining impurities in this lot totalled approximately 1% of the area of the major peak. Lot No. 36948, analyzed by different vaporphase chromatographic systems, was found to contain eight impurities. The major impurity, comprising approximately 29% of the area of the major peak, was identified as citronellyl acetate (3,7-dimethyl-6-octene-1-ol acetate). The remaining impurities in Lot No. 36948 totalled 0.37% of the major peak.

The infrared and nuclear magnetic resonance spectra were consistent with those expected for the structure. The impurity peaks in Lot No. 36948 were consistent with the spectrum of citronellyl acetate.

Thus, based on vapor-phase chromatography, the lot used in the 2-year studies (Lot No. 36948) was approximately 71% geranyl acetate and 29% citronellyl acetate, with less than 0.4% impurities detected. The amount of citronellyl acetate in the lot used in the prechronic studies (Lot No. 70201) was not determined accurately but appeared to be in the 6-17% range.

Geranyl acetate was stored in the dark at 5°C.

Reanalysis of the bulk chemical periodically throughout the studies by vapor-phase chromatography (using a system similar to number 2 for Lot No. 70201) and infrared spectroscopy indicated that storage conditions were adequate, since there was no apparent change in purity.

The food-grade geranyl acetate is referred to in this report as geranyl acetate.

DOSE PREPARATION

Appropriate amounts of geranyl acetate were mixed with enough corn oil to give the desired concentration for the high dose groups. Gavage solutions for lower doses were prepared by diluting this stock solution with corn oil. Rats received 5 ml/kg body weight and mice 10 ml/kg.

Geranyl acetate/corn oil mixtures at the 2%(v/v) level were analyzed at Midwest Research Institute and found to be stable at room temperature for 7 days (Appendix H). Samples of the mixtures selected at random were analyzed periodically at Southern Research Institute (Appendix I), and the results indicated that all analyzed mixtures except one were properly formulated (within 10% of the target concentration). The results from the three analyses conducted at Midwest Research Institute also confirmed this finding.

The one improperly formulated mixture (2.8 times the target dose) was administered to the 1,000 mg/kg groups of male and female mice for three days during week 91. These mice either died or were killed in a moribund condition as a result of this accidental overdose.

II. MATERIALS AND METHODS: SINGLE-DOSE STUDIES

SINGLE-DOSE STUDIES

Male and female F344/N rats and $B6C3F_1$ mice were obtained from Frederick Cancer Research Center and held for 7 days before the test began. Animals were 5 weeks old when placed on study.

Groups of five male and five female F344/N rats and $B6C3F_1$ mice were administered a single dose of geranyl acetate (500, 1,000, 2,000,

4,000, or 8,000 mg/kg body weight) in corn oil by gavage. No controls were used. All animals were observed twice daily for mortality for 15 days.

Animals were housed five per cage and received water and feed *ad libitum* during the observation period. Details of animal maintenance are presented in Table 1.

FOURTEEN-DAY STUDIES

Male and female F344/N rats and $B6C3F_1$ mice were obtained from Charles River Breeding Laboratories and held 7 days before the study began. Animals were 5 weeks old when placed on study.

Groups of five rats of each sex were administered geranyl acetate in corn oil by gavage for 14 consecutive days at doses of 0, 62, 125, 250, 500, or 1,000 mg/kg body weight. Groups of five mice of each sex were administered doses of 0, 125, 250, 500, 1,000, or 2,000 mg/kg on the same schedule.

Animals were housed five per cage and received water and feed *ad libitum*. Details of animal maintenance are presented in Table 1. Rats and mice were observed twice daily for mortality and were weighed weekly. Necropsies were performed on all animals.

THIRTEEN-WEEK STUDIES

Thirteen-week studies were conducted to evaluate the cumulative toxicity of geranyl acetate and to determine the doses to be used in the 2-year studies.

Three- to four-week-old male and female F344/N rats and $B6C3F_1$ mice were obtained from Harlan Industries, observed for 2 weeks, and assigned by sex and species to cages according to a table of random numbers. The cages were then assigned to dosed and control groups according to another table of random numbers.

Rats and mice were housed five per cage in polycarbonate cages (Table 1). Racks and filters were replaced once every 2 weeks. Cages and bedding were replaced twice per week. Water (via an automatic watering system) and feed were available *ad libitum*. Groups of 10 rats of each sex were administered geranyl acetate at doses of 0, 250, 500, 1,000, 2,000, or 4,000 mg/kg body weight in corn oil by gavage, 5 days per week for 13 weeks. Groups of 10 male and 10 female mice received doses of 0, 125, 250, 500, 1,000, or 2,000 mg/kg on the same schedule.

Animals were checked for mortality and signs of morbidity twice daily. Those animals that were judged moribund were killed and necropsied. Each animal was given a clinical examination weekly, including palpation for tissue masses or swelling. Body weight data were collected weekly.

At the end of the 91-day study, survivors were killed with carbon dioxide. Necropsies were performed on animals that survived to the end of the study and on all animals found dead, unless precluded in whole or in part by autolysis or cannibalization. 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. The following specimens were examined for control and high dose groups: gross lesions, tissue masses, abnormal lymph nodes, skin, mandibular lymph nodes, mammary gland, salivary gland, thigh muscle, sciatic nerve, bone marrow, thymus, larynx, trachea, lungs and bronchi, heart, thyroid, parathyroid, esophagus, stomach, duodenum, jejunum, ileum, colon, mesenteric lymph nodes, liver, gallbladder (mice), pancreas, spleen, kidneys, adrenals, urinary bladder, seminal vesicles/prostate/testes or ovaries/uterus, brain, pituitary, and spinal cord. Tissues were preserved in 10% neutral buffered formalin, embedded in paraffin, sectioned, and stained with hematoxylin and eosin.

TWO-YEAR STUDIES

Study Design

Groups of 50 rats and 50 mice of each sex were administered geranyl acetate in corn oil by gavage, 5 days per week for 103 weeks. Rats received 1,000 or 2,000 mg/kg body weight and mice 500 or 1,000 mg/kg. Vehicle controls received corn oil alone.

Source and Specifications of Test Animals

Four-week-old male and female F344/N rats and 5-week-old male and female $B6C3F_1$ mice were obtained from Harlan Industries, observed for 2 weeks, and then assigned to cages according to a table of random numbers. The cages were then assigned to control and dosed groups according to another table of random numbers.

Animal Maintenance

Rats and mice were housed five per cage in polycarbonate cages (Table 1). Cages and bedding were replaced twice per week. Water (via an automatic watering system) and feed were available *ad libitum*. The temperature in the animal rooms was $16^{\circ}-27^{\circ}$ C, and the humidity was 15%-96%. Fifteen changes of room air were provided. Fluorescent lighting provided illumination 12 hours per day. The health of the animals was monitored during the course of the studies according to the protocols of the NTP Sentinel Animal Program (Appendix J).

Clinical Examinations and Pathology

All animals were observed twice daily for signs of morbidity or mortality. Clinical signs and body weights by cage were recorded every week for the first 12 weeks and monthly thereafter. The mean body weight of each group was calculated by dividing the total weight of all animals in the group by the number of surviving animals in the group. Moribund animals and animals that survived to the end of the studies were killed using carbon dioxide and necropsied.

Major tissues or organs were examined for grossly visible lesions. Tissues were preserved in 10% neutral buffered formalin, embedded in paraffin, sectioned, and stained with hematoxylin and eosin. The following were examined microscopically: tissue masses, abnormal lymph nodes, skin, mandibular lymph nodes, mammary gland, salivary gland, thigh muscle, sciatic nerve, bone marrow, thymus, larynx, trachea, lungs and bronchi, heart, thyroid, parathyroid, esophagus, stomach, duodenum, jejunum, ileum, colon, mesenteric lymph nodes, liver, gallbladder (mice), pancreas, spleen, kidneys, adrenals, urinary bladder, seminal vesicles/prostate/ testes or ovaries/ uterus, brain, pituitary, and spinal cord.

Necropsies were performed on all animals found dead and on those killed at the end of the study, unless precluded in whole or in part by autolysis or cannibalization. Thus, the number of animals from which particular organs or tissues were examined microscopically varies and is not necessarily equal to the number of animals that were placed on study in each group.

The classification of neoplastic nodules was done according to the recommendations of Squire and Levitt (1975) and the National Academy of Sciences (1980). When the pathology examination was completed, the slides, individual animal data records, and summary tables were sent to an independent quality assurance laboratory. Individual animal records and tables

were compared for accuracy, slides and tissue counts verified, and histotechnique evaluated. All tumor diagnoses, all target tissues and all tissues from a randomly selected 10 percent of the animals were evaluated by an experienced rodent pathologist. Slides of all target tissues and those on which the original and quality assurance pathologists disagreed were submitted to the Chairperson of the Pathology Working Group (PWG) for evaluation. Representative slides selected by the PWG Chairperson were reviewed blindly by the PWG's experienced pathologists, who reached a consensus and compared their findings with the original diagnoses. When conflicts were found, the PWG sent the appropriate slides and their comments to the original pathologist for review. (This procedure has been described, in part, by Ward et al., 1978, and by Maronpot and Boorman, 1982.) The final diagnosis represents a consensus of contractor pathologists and the NTP Pathology Working Group.

Data Recording and Statistical Methods

Data from this experiment were recorded in the Carcinogenesis Bioassay Data System (Linhart et al., 1974). The data elements include descriptive information on the chemicals, animals, experimental design, clinical observations, survival, body weight, and individual pathologic results, as recommended by the International Union Against Cancer (Berenblum, 1969).

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. All reported P-values for the survival analyses are two-sided.

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 to the number of animals in which that site was examined. 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 (e.g., skin or mammary tumors) prior to histologic sampling, or when lesions could have appeared at multiple sites (e.g., lymphomas), the denominators consist of the number of animals on which necropsies were performed.

For the statistical analysis of tumor incidence data, two different methods of adjusting for intercurrent mortality were employed. Each used the classical method for combining contingency tables developed by Mantel and Haenszel (1959). Tests of significance included pairwise comparisons of high and low dose groups with controls and tests for overall dose-response trends.

The first method of analysis assumed that all tumors of a given type observed in animals dying before the end of the study were "fatal"; i.e., they either directly or indirectly caused the death of the animal. According to this approach, the proportions of tumor-bearing animals in the dosed and control groups were compared at each point in time at which an animal died with a tumor of interest. The denominators of these proportions were the total number of animals at risk in each group. These results, including the data from animals killed at the end of the study, were then combined by the Mantel-Haenszel method to obtain an overall P-value. This method of adjusting for intercurrent mortality is the life table method of Cox (1972) and of Tarone (1975).

Due to the termination of the high dose mouse groups at week 91, the life table trend test and control versus high dose pairwise comparison for mice were performed using a study termination date of 91 weeks, whereas the control versus low dose pairwise comparison was performed using a study termination date of 104 weeks.

The second method of analysis assumed that all tumors of a given type observed in animals dying before the end of the study were "incidental"; i.e., they were merely observed at autopsy in animals dying of an unrelated cause. According to this approach, the proportions of animals found to have tumors in dosed and control groups were compared in each of five time intervals: 0-52 weeks, 53-78 weeks, 79-92 weeks, 93 weeks to the week before the terminal kill, and the terminal kill period (all rat tests and the control versus low dose pairwise comparison for mice). Because of the termination of the high dose mouse groups at week 91, the mouse trend and high dose versus control pairwise comparisons utilized the following time intervals: 0-52 weeks, 53-90 weeks, and week 91 to the terminal kill period. The denominators of these proportions were the number of animals on which autopsies were performed during the time interval. The individual time interval comparisons were then combined by the previously described methods to obtain a single overall result. (See Peto et al., 1980, for the computational details of both methods.)

In addition to these tests, one other set of statistical analyses was carried out and reported in the tables analyzing primary tumors: the Fisher's exact test for pairwise comparisons and Cochran-Armitage linear trend test for doseresponse trends (Armitage, 1971; Gart et al., 1979). These tests were based on the overall proportion of tumor-bearing animals. All reported P values for the tumor incidence analyses are one-sided.

For studies in which there is little effect of compound administration on survival, the results of the three alternative analyses will generally be similar. When differing results are obtained by the three methods, the final interpretation of the data will depend on the extent to which the tumor under consideration is regarded as being the cause of death.

	Single-Dose Studies	Fourteen-Day Studies	Thirteen-Week Studies	Two-Year Studies
Experimental Design				
Size of Test Group	5 males and 5 females of each species	5 males and 5 females of each species	10 males and 10 females of each species	50 males and 50 females of each species
Doses	Rats and mice: males and females - 500, 1,000, 2,000, 4,000, or 8,000 mg/kg body weight geranyl acetate in corn oil	Rats: males and females - 0, 62, 125, 250, 500, or 1,000 mg/kg body weight geranyl acetate in corn oil	Rats: males and females, 0, 250, 500, 1,000, 2,000, or 4,000 mg/kg body weight geranyl acetate in corn oil	Rats: males and females, 0, 1,000 or 2,000 mg/kg body weight geranyl acetate in corn oil
		Mice: males and females - 0, 125, 250, 500, 1,000, or 2,000 mg/kg body weight geranyl acetate in corn oil	Mice: males and females - 0, 125, 250, 500, 1,000, or 2,000, mg/kg body weight geranyl acetate in corn oil	Mice: males and females - 0, 5,000, or 1,000 mg/kg body weight geranyl acetate in corn oil
Duration of Dosing	Single dose	Daily for 14 days	Five days per week for 13 weeks	Rats: Five days per week for 103 weeks
				Mice: Five days per week for 102 weeks
Type and Frequency of Observation	Observed for clinical signs and mortality twice daily	Observed for clinical signs, morbidity, and mortality twice daily; weighed weekly	Observed for clinical signs, and morbidity, and mortality twice daily; weighed weekly	Observed twice daily for morbidity, and mortality; weighed weekly for 12 weeks and then monthly thereafter
Necropsy and Histologic Observations	None	Necropsies were performed on all animals	Necropsies were performed on all animals. Histological examinations were performed on control and high-dose groups.	Necropsies and histological examinations were performed on all animals
Animals and Animal Mainte	nance			
Species	F344/N rats; $B6C3F_1/N$ mice	F344/N rats; $B6C3F_1/N$ mice	F344/N rats; $B6C3F_1/N$ mice	F344/N rats; B6C3F1/N

TABLE 1. EXPERIMENTAL DESIGN AND MATERIALS AND METHODS

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TABLE 1. EXPERIMENTAL DESIGN AND MATERIALS AND METHODS (Continued)

	Single-Dose Studies	Fourteen-Day Studies	Thirteen-Week Studies	Two-Year Studies
Animal Source	Frederick Cancer Research Center, Frederick MD	Charles River Breeding Laboratories, Portage, MI	Harlan Industries, Indianapolis, IN	Harlan Industries, Indianapolis, IN
Time Held Before Start of Test	1 week	1 week	2 weeks	2 weeks
Age When Placed on Study	5 weeks	5 weeks	6 weeks	Rats: 6 weeks Mice: 7.5 weeks
Age When Killed	7 weeks	7 weeks	19 weeks	Rats: 110 weeks Mice: low-dose and vehicle controls 112 weeks; high-dose 99 weeks
Method of Animal Distribution	Randomized into cages according to table of random numbers. Cages assigned to dosed and control groups according to another table set of random numbers	Same as single-dose studies	Same as single-dose studies	Same as single-dose studies
Feed Wayne® Lab Blox pellets, Allied Mills, Inc. Chicago, IL		Same as single-dose studies	Same as single-dose studies	Same as single-dose studies
Bedding Beta Chips® heat treated hardwood chips, Northeastern Products Corp., Warrensburg, NY		Same as single-dose studies	Same as single-dose studies; also sawdust, P.W.I., Inc. Lowville, NY	Same as single-dose studies
Water	Tap water by automatic watering system Edstrom Automatic, Waterford, WI	Same as single-dose studies	Same as single-dose studies	Same as single-dose studies

	Single-Dose Studies	Fourteen-Day Studies	Thirteen-Week Studies	Two-Year Studies
Cages	Polycarbonate (Lab Products Garfield, NJ)	Same as single-dose studies	Same as single-dose studies	Same as single-dose studies
Cage Filters	Reemay® spun-bonded polyester filters, Snow Filtration Cincinnati, OH	Same as single-dose studies	Same as single-dose studies	Same as single-dose studies
Animals per Cage	Five	Five	Five	Five
Animal Room Environment	21°-23°C; 40-60°% relative humidity; 15 air changes per hour; 12 hours fluorescent lighting per day	Same as single-dose studies	Same as single-dose studies	21°-24°C; 30%-60% relative humidity; 15 air changes per hour; 12 hours fluorescent lighting per day
Other Chemicals on Test in the Same Room	None	None	None	None
Chemical-Vehicle Mixture				
Preparation	Geranyl acetate was dissolved in corn oil	Same as single-dose studies	Same as single-dose studies	Same as single-dose studies
Maximum Storage Time		1 week	l week	13 days
Storage Conditions		Amber bottles at 25°	Amber bottles at 25°	Amber bottles at 5°

TABLE 1. EXPERIMENTAL DESIGN AND MATERIALS AND METHODS (Continued)

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III. RESULTS

RATS

SINGLE-DOSE STUDIES FOURTEEN-DAY STUDIES THIRTEEN-WEEK STUDIES

TWO-YEAR STUDIES

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

MICE

SINGLE-DOSE STUDIES FOURTEEN-DAY STUDIES THIRTEEN-WEEK STUDIES

TWO-YEAR STUDIES

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

SINGLE-DOSE STUDIES

All rats receiving 8,000 mg geranyl acetate/kg body weight died on day 2. No deaths occurred among rats dosed with 4,000, 2,000, 1,000, or 500 mg/kg. All animals were inactive immediately after dosing. No gavage controls were used. Dose levels of 1,000, 500, 250, 125, and 62 mg/kg geranyl acetate were selected for use in the 14-day studies and were based solely on the inactivity of dosed animals immediately following dosing.

FOURTEEN-DAY STUDIES

All animals survived to the end of the dosing period. Weight gains by dosed and control groups were comparable (Table 2). The activity of all rats that received 1,000 mg/kg decreased after dosing between days 2 and 4 of the studies. No compound-related effects were observed during necropsy. These results did not provide a basis for dose selection for the 13-week studies. The dose levels selected for use in the 13-week studies were 4,000, 2,000, 1,000, 500, and 250 mg/kg. The selection was based on the mortality observed in the single dose studies.

_	Mean Body Weight (grams)			Final Body Weight Relative to	
Dose Surviva (ppm) <i>(a)</i>	Survival (a)	Initial	Final	Change (b)	- Controls (<i>c)</i> (Percent)
Males			······································	<u></u>	
0	5/5	62.4 ± 3.2	123.4 ± 4.7	$+61.0 \pm 1.9$	
62	5/5	60.8 ± 2.8	121.4 ± 3.5	$+60.6 \pm 2.8$	-2
125	5/5	57.8 ± 1.9	118.0 ± 3.3	$+60.2 \pm 1.9$	-4
250	5/5	60.2 ± 3.8	124.8 ± 5.6	$+64.6 \pm 2.6$	+ 1
500	5/5	66.0 ± 3.4	127.6 ± 3.6	$+61.6 \pm 2.9$	+3
1,000	5/5	56.2 ± 1.5	119.8 ± 1.3	$+63.6 \pm 2.2$	-3
Females					
0	5/5	54.6 ± 0.7	99.2 ± 0.7	$+44.6 \pm 1.2$	_
62	5/5	57.0 ± 3.7	101.8 ± 5.4	$+44.8 \pm 2.4$	+3
125	5/5	55.6 ± 1.4	100.0 ± 2.0	$+44.4 \pm 0.9$	+ 1
250	5/5	60.4 ± 2.5	106.6 ± 2.9	$+46.2 \pm 1.8$	+7
500	5/5	59.0 ± 2.2	104.0 ± 1.6	$+45.0 \pm 2.3$	+5
1,000	5/5	60.4 ± 2.2	103.4 ± 2.9	$+43.0 \pm 1.2$	+4

TABLE 2. SURVIVAL AND MEAN BODY WEIGHTS OF RATS ADMINISTERED GERANYL ACETATE IN CORN OIL BY GAVAGE FOR 14 DAYS

(a) Number surviving/number initially in the group.

(b) Mean weight change of the group \pm standard error of the mean.

(c) Weight of the dosed survivors relative to the survivors of the controls **D**

Weight (Dosed Group) – Weight (Control Group)

Weight (Control Group)

× 100

III. RESULTS: RATS—THIRTEEN-WEEK STUDIES

THIRTEEN-WEEK STUDIES

Two of 10 male rats and 1/10 female rats receiving 4,000 mg/kg died (Table 3). One male rat in the 500 mg/kg group died due to gavage error. At 4000 mg/kg mean body weight compared to controls was depressed 19% in males and 8% in females.

Reddened mucosa of the stomach was observed in 3/10 males that received 4,000

mg/kg. No compound-related histopathologic effects were observed at necropsy.

Because of the depressions in mean body weight gain and the deaths that occurred at 4,000 mg/ kg, doses of geranyl acetate in corn oil for rats were set at 1,000 and 2,000 mg/ kg body weight (5 days per week) for the two-year studies.

TABLE 3.	SURVIVAL AND	MEAN BODY	WEIGHTS OF	RATS ADMIN	VISTERED GI	ERANYL
	ACETATE IN CO	RN OIL BY G	AVAGE FOR 13	WEEKS		

D		Mean Body Weight (grams)			Final Body Weight Relative to
Dose (ppm)	Survival (a)	Initial	Final	Change (b)	(Percent)
Males		••••••••••••••••••••••••••••••••••••••	. <u>(1128</u> , i Magaan	· · · · · · · · · · · · · · · · · · ·	
0	10/10	101.7 ± 2.8	323.2 ± 8.4	$+221.5 \pm 6.3$	—
250	10/10	102.0 ± 1.6	318.4 ± 7.4	$+216.4 \pm 7.2$	- 1
500	9/10(d)	102.0 ± 4.5	319.8 ± 12.3	$+217.8 \pm 10.2$	- 1
1,000	10/10	107.7 ± 3.3	323.0 ± 7.3	$+215.3 \pm 6.1$	0
2,000	10/10	109.8 ± 4.1	307.4 ± 8.7	+197.6 ± 5.6	- 5
4,000	8/10	101.3 ± 3.4	260.3 ± 9.9	+159.0 ± 8.1	-19
Females					
0	10/10	95.4 ± 2.0	188.1 ± 2.4	+92.7 ± 1.9	
250	10/10	93.9 ± 2.9	186.3 ± 3.4	+92.4 ± 2.2	- 1
500	10/10	86.7 ± 2.9	180.5 ± 5.3	$+93.8 \pm 3.3$	- 4
1,000	10/10	90.6 ± 2.2	188.4 ± 4.2	$+97.8 \pm 3.0$	0
2,000	10/10	93.1 ± 2.7	189.3 ± 3.8	$+96.2 \pm 2.4$	+ 1
4,000	9/10	90.8 ± 1.9	173.0 ± 2.8	$+82.2 \pm 2.6$	- 8

(a) Number surviving/number initially in the group. All calculations are based on those animals surviving to the end of the group.

× 100

(b) Mean weight change of the group \pm standard error of the mean.

(c) Weight of the dosed survivors relative to the survivors of the controls =

Weight (Dosed Group) - Weight (Control Group)

Weight (Control Group)

(d) Death due to gavage error.

TWO-YEAR STUDIES

Body Weights and Clinical Signs

The mean body weights of high dose male rats throughout the studies and of dosed female rats after about week 40 were lower than those of the controls, and the depressions in mean body weight gain were dose related (Table 4 and Figure 1). No compound-related clinical signs were observed.

TABLE 4. MEAN BODY WEIGHTS (RELATIVE TO CONTROLS) OF RATS ADMINISTEREDGERANYL ACETATE IN CORN OIL BY GAVAGE FOR TWO YEARS

	Mean	Body Weight (grams)		Body Weight Relative to Controls (a) (Percent)	
Week No.	Control	Low Dose	High Dose	Low Dose	High Dose
Males					
0	104	104	105	0	+ 1
1	141	140	138	- 1	- 2
21	359	337	291	- 6	-19
40	406	383	331	- 6	-18
62	447	426	356	- 5	-20
83	452	439	371	- 3	-18
101	421	430	373	+ 2	-11
104	414	417	364	+ 1	-12
Females					
0	90	88	90	- 2	0
1	114	111	108	- 3	- 5
21	199	195	188	- 2	- 6
40	225	215	206	- 4	- 8
62	259	242	216	- 7	-17
83	284	269	236	- 5	-17
101	283	268	235	- 5	-17
104	282	275	231	- 2	-18

(a) Weight of the dosed group relative to that of the controls \square

Weight (Dosed Group) – Weight (Control Group)

Weight (Control Group)

× 100



Figure 1. Growth Curves for Rats Administered Geranyl Acetate in Corn Oil by Gavage

Survival

Estimates of the probabilities of survival of dosed and control male and female rats administered geranyl acetate in this bioassay are shown by the Kaplan and Meier curves in Figure 2. In male rats, the survival of the high dose group was significantly less than that of either the controls (P=0.001) or the low dose group (P=0.003). No other significant differences were observed between any groups of either sex. Two control, seven low dose, and one high dose male rat and one low dose female rat were killed by gavage accidents and were censored from the statistical analysis of survival.

In male rats, 34/50 (68%) of the controls, 29/50 (58%) of the low dose, and 18/50 (36%) of the high dose group lived to the end of the study at 104-105 weeks. In female rats, 35/50 (70%) of the controls, 28/50 (56%) of the low dose, and 33/50 (66%) of the high dose group lived to the end of the study at 104-105 weeks. The survival data include one control male, one high dose male, one low dose female, and four high dose females that died during the termination period of the study. For statistical purposes, these animals have been pooled with those killed during the termination period.

Pathology and Statistical Analysis of Results

Histopathologic findings on neoplasms in rats are summarized in Appendix A, Tables A1 and A2; Tables A3 and A4 give the survival and tumor status for each individual animal in the male and female rat studies. Findings on nonneoplastic lesions are summarized in Appendix C, Tables C1 and C2. Tables 5 and 6 contain the statistical analyses of those primary tumors that occurred with an incidence of at least 5% in one of the three groups.

Skin: Squamous cell papillomas were increased in low dose male rats: control, 0/50, 0%; low dose, 4/50, 8%; high dose, 1/50, 2%. A squamous cell carcinoma was observed in an additional low dose male. The incidence of low dose male rats with either squamous cell papillomas or carcinomas (combined) was increased (P<0.05) in pairwise comparisons with the controls. The combined incidence of all epidermal tumors was not different among groups. All of these tumors were found during weeks 103 and 104. In female rats, these tumors were not observed in significant proportions.

Kidney: Two low dose male rats had tubular cell adenomas. None were observed in the other dosed or control groups. Nephropathy (diagnosed by the laboratory pathologist as nephrosis) occurred at these incidences; males: control, 40/50, 80%; low dose, 38/50, 76%; high dose, 45/50, 90%; females: 13/50, 26%; 6/49, 12%; 31/49, 63%.

Adrenal Gland: Pheochromocytomas occurred in male rats with a positive trend (P=0.031, life table) (control, 6/50, 12%; low dose, 8/50, 16%; high dose, 9/50, 18%). The results of pairwise comparisons between the control and dosed groups were not significant. This tumor was observed in 2/50, 0/49, and 2/49 female rats.

Testis: Although life table analyses indicated a significant (P < 0.001) increase in the incidence of animals with interstitial-cell tumors, this test result was primarily reflective of the decreased survival observed in the high dose male rats relative to controls. Since interstitial-cell tumors are not regarded as life threatening and because most aging male rats have these tumors, this particular effect was discounted.

Mammary Gland: Fibroadenomas were observed in female rats with a negative trend ($P \le 0.002$) and the results of pairwise comparisons between the control and high dose group were significant ($P \le 0.002$): control, 12/50, 24%; low dose, 7/50, 14%; high dose, 1/50, 2%. In male rats, this tumor was observed in 2/50, 2/50, and 1/50 animals.

Pituitary: Adenomas were seen in male rats with a negative trend (P < 0.02; control, 10/49, 20%; low dose, 8/50, 16%; high dose, 2/48, 4%). In pairwise comparisons between control and dosed groups, the incidence in the high dose group was lower (P < 0.02) than in the controls. Results of the life table analyses of adenomas in male rats were not significant. This tumor was observed in 13/47, 16/43, and 9/48 female rats.

Pancreas: Islet-cell adenomas or carcinomas (combined) were observed in male rats with a negative trend: control, 4/49, 8%; low dose, 3/48, 6%; high dose, 0/50, 0%, but this decrease was not significant when survival was considered. Results of the pairwise comparisons between control and dosed groups were not significant, and these tumors were not observed in female rats.



Figure 2. Survival Curves for Rats Administered Geranyl Acetate in Corn Oil by Gavage

III. RESULTS: RATS-TWO-YEAR STUDIES

Eye: Retinopathy and cataracts occurred at increased incidences in high dose male and low dose female rats as indicated below. These two dose groups of rats were housed in cages located

at the top portion of their respective rack, closest to light (Appendix F, Table F1). Thus, the incidence of these eye lesions may be related to the proximity to the fluorescent light source.

		Males			Females		
	Control	Low- Dose	High- Dose	Control	Low- Dose	High- Dose	
Retinopathy	0/ 50(0%)	1/50(2%)	11/50(22%)	1/50(2%)	13/ 50(26%)	2/50(4%)	
Cataracts	0/50(0%)	1/50(2%)	10/50(20%)	1/50(2%)	13/50(26%)	0/50(0%)	

Bile duct: Hyperplasia was observed with decreased incidence in rats of both sexes (males: control, 38/50, 76%; low dose, 15/50, 30%; high

dose, 2/50, 4%; females: 36/50, 72%; 16/50, 32%; 12/49, 24%).

	Vehicle Control	1,000 mg/kg	2,000 mg/kg
Skin: Squamous Cell Papilloma			
Tumor Rates			
Overall (a)	0/50(0%)	4/50(8%)	1/50(2%)
Adjusted (b)	0.0%	13.3%	5.6%
Terminal (c)	0/34(0%)	3/29(10%)	1/18(6%)
Statistical Tests (d)		-,(,0)	-,(-,0)
Life Table	P=0.191	P=0.046	P=0.373
Incidental Tumor Test	P=0.283	P=0.050	P=0.373
Cochran-Armitage Trend Test	P=0.390		1 000.0
Fisher Exact Test	. 0.570	P=0.059	P=0.500
Skin: Squamous Cell Papilloma or Carc	inoma		
Tumor Rates			
Overall (a)	0/ 50(0%)	5/50(10%)	1/50(2%)
Adjusted (b)	0.0%	16.7%	5.6%
Terminal (c)	0/34(0%)	4/29(14%)	1/18(6%)
Statistical Tests (d)			
Life Table	P=0.181	P=0.022	P=0.373
Incidental Tumor Test	P=0.263	P=0.024	P=0.373
Cochran-Armitage Trend Test	P=0.399		
Fisher Exact Test		P=0.028	P=0.500
Skin: All Epidermal Tumors			
Tumor Rates			
Overall (a)	3/50(6%)	6/50(12%)	1/50(2%)
Adjusted (b)	8.8%	18.8%	5.6%
Terminal (c)	3/34(9%)	4/29(14%)	1/18(6%)
Statistical Tests (d)			
Life Table	P=0.559N	P=0.177	P=0.550N
Incidental Tumor Test	P=0.421N	P=0.203	P=0.550N
Cochran-Armitage Trend Test	P=0.274N		
Fisher Exact Test		P=0.243	P=0.309N
Subcutaneous Tissue: Fibroma			
Tumor Rates			
Overall (a)	3/50(6%)	3/50(6%)	2/50(4%)
Adjusted (b)	8.8%	10.3%	10.1%
Terminal (c)	3/34(9%)	3/29(10%)	1/18(6%)
Statistical lests (d)	D 0 401	D 0 500	D 0 500
Life Table	P=0.491	P=0.589	P=0.598
Incidental lumor lest	P=0.576	P=0.589	P=0.659N
Cochran-Armitage Irend Test	P=0.412N		D 0 2000
Fisher Exact Test		P=0.661N	P=0.500N
Skin or Subcutaneous Tissue: Fibroma			
Overall (a)	2/50(607)	2/50(607)	2 50(607)
Adjusted (b)	3/ 30(0%0) 8 807-	5/ 50(0%) 10 20%	5/ JU(0%) 1/ 907
Terminal (c)	0.0%) 3/3/(00%)	10.3% 3/20(100%)	14.8%
Statistical Tests (d)	5/ 54(7%)	5/27(10%)	1/10(0%)
Life Table	P=0 203	P=0 589	P=0 367
Incidental Tumor Test	P=0.449	P=0.589	P=0.507
Cochran-Armitage Trend Test	P=0.583	1 -0.507	1 -0.375
Fisher Evact Test	1-0.00	P=0.661N	D-0 661

TABLE 5. ANALYSIS OF PRIMARY TUMORS IN MALE RATS

	Vehicle Control	1,000 mg/kg	2,000 mg/kg
Hematopoietic System: Lymphoma or I	Leukemia		
Tumor Rates			
Overall (a)	2/50(4%)	1/50(2%)	3/50(6%)
Adjusted (b)	5.3%	2.9%	10.1%
Terminal (c)	1/34(3%)	0/29(0%)	0/18(0%)
Statistical Tests (d)			
Life Table	P=0.266	P=0.555N	P=0.335
Incidental Tumor Test	P=0.561N	P=0.439N	P=0.630N
Cochran-Armitage Irend Test	P=0.399	D. 0. 60031	D 0 500
Fisher Exact Test		P=0.500N	P=0.500
Pituitary: Adenoma			
Tumor Rates			
Overall (a)	10/49(20%)	8/50(16%)	2/48(4%)
Adjusted (b)	24.8%	24.0%	9.1%
Terminal (c)	5/34(15%)	5/29(17%)	0/18(0%)
Statistical Tests (d)			
Life Table	P=0.100N	P=0.527N	P=0.103N
Incidental Tumor Test	P=0.005N	P=0.335N	P=0.002N
Cochran-Armitage Trend Test	P=0.015N		
Fisher Exact Test		P=0.379N	P=0.015N
Adrenal: Pheochromocytoma			
Tumor Rates			
Overall (a)	6/50(12%)	8/50(16%)	9/50(18%)
Adjusted (b)	16.8%	27.6%	35.1%
Terminal (c)	5/34(15%)	8/29(28%)	3/18(17%)
Statistical Tests (d)		0, =)(=0,0)	
Life Table	P=0.031	P=0.266	P≈0.053
Incidental Tumor Test	P=0.141	P=0.290	P=0.292
Cochran-Armitage Trend Test	P=0.244		
Fisher Exact Test		P=0.387	P=0.288
Thuroid: C.Cell Adenome			
Tumor Rates			<i>,</i>
Overall (a)	6/50(12%)	A / A8(80%)	2/15(107)
Adjusted (b)	16.8%	12 90%	6 6%
Terminal (c)	5/34(15%)	3/29(10%)	0/18(0%)
Statistical Tests (d)		5, 2, (10,0)	0,10(070)
Life Table	P=0.285N	P=0.471N	P=0.351N
Incidental Tumor Test	P=0.145N	P=0.427N	P=0.181N
Cochran-Armitage Trend Test	P=0.127N		
Fisher Exact Test		P=0.397N	P=0.171N
Thuroid: C-Cell Adenome or Carcinome			
Tumor Rates	•		
Overall (a)	7/50(14%)	4/48(8%)	3/45(7%)
Adjusted (h)	19.7%	12.9%	10 30%
Terminal (c)	6/34(18%)	3/29(10%)	0/18(0%)
Statistical Tests (d)	0/07(10/0)	5/2/(10/0)	0/10(070)
Life Table	P=0.339N	P=0 358N	P=0.431N
Incidental Tumor Test	P=0.158N	P=0.318N	P=0.202N
Cochran-Armitage Trend Test	P=0.149N		- 0.2021
Fisher Exact Test		P=0.286N	P=0 205N

TABLE 5. ANALYSIS OF PRIMARY TUMORS IN MALE RATS (Continued)
	Vehicle Control	1,000 mg/kg	2,000 mg/kg
Pancreatic Islets: Islet-Cell Adenoma			
Tumor Rates			
Overall (a)	3/49(6%)	3/48(6%)	0/50(0%)
Adjusted (h)	9.1%	10.7%	0.0%
Terminal (c)	3/33(9%)	3/28(11%)	0/18(0%)
Statistical Tests (d)	0,00(1,0)	0, =0(11,0)	0,10(0,0)
Life Table	P=0.231N	P=0.586	P=0.245N
Incidental Tumor Test	P=0.231N	P=0.586	P=0.245N
Cochran-Armitage Trend Test	P=0.098N		
Fisher Exact Test	- 0.0701	P=0.651	P=0.118N
Pancreatic Islets: Islet-Cell Adenoma or	Carcinoma		
Tumor Rates			
Overall (a)	4/49(8%)	4/48(8%)	0/50(0%)
Adjusted (b)	12.1%	13.6%	0.0%
Terminal (c)	4/33(12%)	3/28(11%)	0/18(0%)
Statistical Tests (d)			
Life Table	P=0.173N	P=0.554	P=0.163N
Incidental Tumor Test	P=0.126N	P=0.563	P=0.163N
Cochran-Armitage Trend Test	P=0.058N		
Fisher Exact Test		P=0.631	P=0.057N
Preputial Gland: Adenoma			
Tumor Rates			
Overall (a)	3/50(6%)	4/50(8%)	2/50(4%)
Adjusted (b)	8.1%	13.2%	9.3%
Terminal (c)	2/34(6%)	3/29(10%)	1/18(6%)
Statistical Tests (d)			
Life Table	P=0.484	P=0.418	P=0.630
Incidental Tumor Test	P=0.472N	P=0.464	P=0.531N
Cochran-Armitage Trend Test	P=0.417N		
Fisher Exact Test		P=0.500	P=0.500N
Testis: Interstitial-Cell Tumor			
Tumor Rates			
Overall (a)	43/50(86%)	44/50(88%)	44/49(90%)
Adjusted (b)	100.0%	100.0%	100.0%
Terminal (c)	34/34(100%)	29/29(100%)	18/18(100%)
Statistical Tests (d)			
Lite Table	P 0.001	P=0.100	P 0.001
Incidental Tumor Test	P=0.147	P=0.299	P=0.202
Cochran-Armitage Trend Test	P=0.335	D 0 000	D
Fisher Exact Test		P=0.500	P=0.394

TABLE 5. ANALYSIS OF PRIMARY TUMORS IN MALE RATS (Continued)

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

(b) Kaplan-Meier estimated lifetime tumor incidence after adjusting for intercurrent mortality.

(c) Observed tumor incidence at terminal kill.

⁽d) Beneath the control incidence are the P-values associated with the trend test. Beneath the dosed group incidence are the P-values corresponding to pairwise comparisons between that dosed group and the controls. The life table analysis regards tumors in animals dying prior to terminal kill as being (directly or indirectly) the cause of death. The incidental tumor test regards these lesions as non-fatal. The Cochran-Armitage and Fisher exact tests compare directly the overall incidence rates. A negative trend is indicated by (N).

	Vehicle Control	1,000 mg/kg	2,000 mg/kg
Hematopoietic System: Monocytic Leuke	mia		
Tumor Rates			
Overall (a)	8/50(16%)	7/50(14%)	7/50(14%)
Adjusted (b)	19.8%	20.9%	21.2%
Terminal (c)	4/35(11%)	3/28(11%)	7/33(21%)
Statistical Tests (d)	, - · (- · / c /		, , , , , ,
Life Table	P=0.490N	P=0.584	P=0.541N
Incidental Tumor Test	P=0.427N	P=0.386N	P=0.516N
Cochran-Armitage Trend Test	P=0.444N		
Fisher Exact Test		P=0.500N	P=0.500N
Pituitary: Adenoma			
Tumor Rates			
Overall (a)	13/47(28%)	16/43(37%)	9 48(19%)
Adjusted (b)	32.3%	47.2%	26.1%
Terminal (c)	8/34(24%)	10/26(38%)	8/33(24%)
Statistical Tests (d)			
Life Table	P=0.254N	P=0.151	P=0.269N
Incidental Tumor Test	P=0.241N	P=0.148	P=0.215N
Cochran-Armitage Trend Test	P=0.193N		
Fisher Exact Test		P=0.229	P=0.216N
Pituitary: Adenoma or Carcinoma			
Tumor Rates			0.10(10~)
Overall (a)	15/47(32%)	16/43(37%)	9/48(19%)
Adjusted (b)	36.9%	47.2%	26.1%
lerminal (c)	9/34(26%)	10/26(38%)	8/33(24%)
Statistical lests (d)			
Life lable	P=0.145N	P=0.262	P=0.151N
Incidental Tumor Test	P=0.133N	P=0.263	P=0.120N
Cochran-Armitage Trend Test	P=0.095N		
Fisher Exact Test		P=0.380	P=0.107N
Thyroid: C-Cell Adenoma			
Overall (a)	5/49(10%)	3/46(7%)	5/49(10%)
Adjusted (b)	14 7%	11.1%	15 2%
Terminal (c)	5/34(15%)	3/27(11%)	5/33(15%)
Statistical Tests (d)	0,0((0,0))	5/2/(11/0)	0,00(10,0)
Life Table	P=0.551	P=0.488N	P=0.614
Incidental Tumor Test	P=0.551	P=0.488N	P=0.614
Cochran-Armitage Trend Test	P=0.570		1 0.011
Fisher Exact Test	1 0.570	P=0.393N	P=0.630
Thyroid: C-Cell Adenoma or Carcinoma			
Tumor Rates			
Overall (a)	6/49(12%)	5/46(11%)	5/49(10%)
Adjusted (b)	16.8%	17.6%	15.2%
Terminal (c)	5/34(15%)	4/27(15%)	5/33(15%)
Statistical Tests (d)			
Life Table	P=0.458N	P=0.606	P=0.518N
Incidental Tumor Test	P=0.444N	P=0.581N	P=0.509N
Cochran-Armitage Trend Test	P=0.436N		
Fisher Exact Test		P=0.545N	P=0.500N

TABLE 6. ANALYSIS OF PRIMARY TUMORS IN FEMALE RATS

	Vehicle Control	1,000 mg/kg	2,000 mg/kg
Mammary Gland: Fibroadenoma			<u> </u>
Tumor Rates			
Overall (a)	12/50(24%)	7/50(14%)	1/50(2%)
Adjusted (b)	33.0%	22.0%	3.0%
Terminal (c)	11/35(31%)	4/28(14%)	1/33(3%)
Statistical Tests (d)			
Life Table	P=0.002N	P=0.298N	P=0.002N
Incidental Tumor Test	P=0.001 N	P=0.212N	P=0.002N
Cochran-Armitage Trend Test	P=0.001N		
Fisher Exact Test		P=0.154N	P=0.001N
Uterus: Endometrial Stromal Polyp or S	Sarcoma		
Tumor Rates			
Overall (a)	8/50(16%)	8/49(16%)	11/50(22%)
Adjusted (b)	18.7%	24.6%	32.4%
Terminal (c)	3/35(9%)	5/28(18%)	10/33(30%)
Statistical Tests (d)			
Life Table	P=0.226	P=0.472	P=0.265
Incidental Tumor Test	P=0.250	P=0.552N	P=0.312
Cochran-Armitage Trend Test	P=0.258		
Fisher Exact Test		P=0.590	P=0.305

TABLE 6. ANALYSIS OF PRIMARY TUMORS IN FEMALE RATS (Continued)

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

(b) Kaplan-Meier estimated lifetime tumor incidence after adjusting for intercurrent mortality.

(c) Observed tumor incidence at terminal kill.

(d) Beneath the control incidence are the P-values associated with the trend test. Beneath the dosed group incidence are the P-values corresponding to pairwise comparisons between that dosed group and the controls. The life table analysis regards tumors in animals dying prior to terminal kill as being (directly or indirectly) the cause of death. The incidental tumor test regards these lesions as non-fatal. The Cochran-Armitage and Fisher exact tests compare directly the overall incidence rates. A negative trend is indicated by (N).

SINGLE-DOSE STUDIES

Four of the five male mice receiving 8,000 mg/kg died (two on day 2 and two on day 3), and 5/5 female mice that received this dose died (four on day 2 and one on day 3). All mice administered 1,000-8,000 mg/kg were inactive immediately after dosing. Dose levels selected for use

in the 14-day studies were 2,000, 1,000, 500, 250, and 125 mg/kg. This selection was based solely on the inactivity of dosed animals immediately following dosing. No gavage controls were used in these studies.

FOURTEEN-DAY STUDIES

Three female mice that received 2,000 mg/kg died. All other animals survived to the end of the dosing period. Mean body weight gains by dosed groups were not adversely affected by administration of geranyl acetate (Table 7). All mice that received 1,000 mg/kg or more were inactive after the dose was administered but they returned to normal within 24 hours. One of five male mice that received 2,000 mg/kg had a thickened duodenal wall, and 3/5 female mice receiving 2,000 mg/kg had a thickened wall of the cardiac stomach. These effects were considered to be compound related. Since these clinical and pathological findings were mild and occurred only in females, dose levels of 2,000, 1,000, 500, 250, and 125 mg/kg were selected for use in the 13-week studies. This was done to provide a dose level that would result in notable toxicity.

_	~	Mean Body Weight (grams)			Final Body Weight Relative to
Dose Survival (ppm) <i>(a)</i>	Initial	Final	Change (b)	Controls (c) (Percent)	
Males	<u></u>				
0	5/5	20.2 ± 0.5	24.6 ± 0.7	$+4.4 \pm 0.4$	
125	5/5	18.8 ± 0.4	23.4 ± 0.7	$+4.6 \pm 0.8$	- 5
250	5/5	19.6 ± 0.5	24.6 ± 1.3	$+5.0 \pm 1.1$	0
500	5/5	19.4 ± 0.4	25.6 ± 0.5	$+6.2 \pm 0.2$	+ 4
1,000	5/5	20.4 ± 0.7	25.6 ± 1.2	$+5.2 \pm 0.7$	+ 4
2,000	5/5	19.8 ± 1.3	24.4 ± 1.0	$+4.6 \pm 0.4$	- 1
Females					
0	5/5	15.8 ± 0.6	19.4 ± 0.5	$+3.6 \pm 0.4$	
125	5/5	16.8 ± 0.7	19.8 ± 0.7	$+3.0 \pm 0.4$	+ 2
250	5/5	15.6 ± 0.5	19.0 ± 0.4	$+3.4 \pm 0.2$	- 2
500	5/5	16.6 ± 0.5	21.4 ± 0.5	$+4.8 \pm 0.5$	+10
1.000	5/5	15.8 ± 0.2	20.0 ± 0.3	$+4.2 \pm 0.2$	+ 3
2.000	2/5	15.5 ± 0.5	20.5 ± 1.5	$+5.0 \pm 1.0$	+ 6

TABLE 7. SURVIVAL AND MEAN BODY WEIGHTS OF MICE ADMINISTERED GERANYL ACETATE IN CORN OIL BY GAVAGE FOR 14 DAYS

(a) Number surviving/number initially in the group. All calculations are based on those animals surviving to the end of the study.

× 100

(b) Mean weight change of the survivors of the group \pm standard error of the mean.

(c) Weight of the dosed survivors relative to the survivors of the controls

Weight (Dosed Group) - Weight (Control Group)

Weight (Control Group)

III. RESULTS: MICE-THIRTEEN-WEEK STUDIES

THIRTEEN-WEEK STUDIES

Seven of ten males and 9/10 females receiving 2,000 mg/kg died (Table 8). Three female mice at lower doses died as a result of gavage error. All other animals survived to the end of the studies. Except for males that received 2,000 mg/kg, mean body weights of dosed groups were comparable with those of the controls.

Cytoplasmic vacuolization of the liver, kidney, and myocardium was observed in male and female mice at the 2,000 mg/kg dose level (liver: 7/10 males and 8/9 females; kidney: 2/10 males and 4/9 females; myocardium: 2/10 males and 1/9 females). The vacuoles appeared colorless with the H and E stain, but were strongly stained with the lipid oil red O (ORO) stain. Because of the presence of lipid in the vacuoles this lesion is sometimes referred to as "lipidosis."

In the liver, the lipid droplets varied in size from barely visible to larger than the nuclei of the hepatocytes. The nuclei of the hepatocytes remained in the center of the cells. The lipidosis was present throughout the lobules, particularly in the periportal area. The lipid droplets in the kidney were present in the cytoplasm of the proximal tubules in a subnuclear location. The myocardium contained fine lipid droplets within the fibers and the myofibriles.

Stomach lesions, consisting of focal suppurative inflammation, focal ulcerative inflammation, or submucosal edema, were found in 2/10males and 6/10 females that received 2,000 mg/kg.

Because of the deaths and histopathologic effects observed in animals that received 2,000 mg/kg, doses for mice in the 2-year studies were set at 500 and 1,000 mg/kg geranyl acetate in corn oil by gavage and were to be administered 5 days per week.

		Mean Body Weight (grams)			Final Body Weight Relative to
Dose Survival (ppm) <i>(a)</i>	Initial	Final	Change (b)	(Percent)	
Males					
0	10/10	22.3 ± 0.6	30.7 ± 1.2	$+8.4 \pm 0.8$	
125	10/10	22.9 ± 0.6	32.8 ± 1.1	$+9.9 \pm 0.8$	+ 7
250	10/10	22.5 ± 0.6	33.6 ± 1.2	$+11.1 \pm 0.9$	+ 9
500	10/10	22.3 ± 0.4	30.0 ± 0.7	$+7.7 \pm 0.9$	- 2
1,000	10/10	22.7 ± 0.7	30.9 ± 1.0	$+8.2 \pm 0.6$	+ 1
2,000	3/10	22.7 ± 0.9	29.0 ± 1.2	$+6.3 \pm 0.3$	6
Females					
0	9/10 (d)	18.8 ± 0.4	24.8 ± 0.6	$+6.0 \pm 0.6$	
125	10/10	18.4 ± 0.4	24.9 ± 0.4	$+6.5 \pm 0.3$	0
250	9/10(d)	18.6 ± 0.5	25.4 ± 0.7	$+6.8 \pm 0.4$	+ 2
500	9/10 (d)	18.0 ± 0.2	23.9 ± 0.3	$+5.9 \pm 0.4$	- 4
1,000	10/10	18.6 ± 0.5	25.4 ± 0.7	$+6.8 \pm 0.3$	+ 2
2,000	1/10	16.0 ± 0.0	23.0 ± 0.0	$+7.0 \pm 0.0$	- 7

TABLE 8. SURVIVAL AND MEAN BODY WEIGHTS OF MICE ADMINISTERED GERANYLACETATE IN CORN OIL BY GAVAGE FOR 13 WEEKS

(a) Number surviving/number initially in the group. All calculations are based on those animals surviving to the end of the study.

(b) Mean weight change of the survivors of the group \pm standard error of the mean.

(c) Weight of the dosed survivors relative to the survivors of the controls \square

Weight (Dosed Group) - Weight (Control Group)

(d) Deaths were due to gavage error.

TWO-YEAR STUDIES

Body Weights and Clinical Signs

Mean body weights of high dose mice of each sex were lower than those of the controls throughout most of the studies, and the depressions in mean body weight gain were dose related (Table 9 and Figure 3). No compound-related clinical signs were observed.

TABLE 9. MEAN BODY WEIGHTS (RELATIVE TO CONTROLS) OF MICE ADMINISTEREDGERANYL ACETATE IN CORN OIL BY GAVAGE FOR TWO YEARS

Mean Body Weight (grams)			Body Wei to Controls	ght Relative (a) (Percent)	
Week No.	Control	Low Dose	High Dose	Low Dose	High Dose
Males					
0	21	21	21	0	. 0
1	23	23	23	0	0
18	35	36	33	+3	- 6
37	45	45	41	0	- 9
59	47	47	44	0	- 6
80	48	48	46	0	- 4
101	47	49		+4	
104	44	48	_	+9	
Females					
0	17	17	18	0	+ 6
1	18	19	20	+6	+11
18	27	27	27	0	0
37	34	33	32	-3	- 6
59	37	36	32	-3	-14
80	40	38	35	-5	-13
101	36	35		-3	
104	36	34		6	

(a) Weight Relative to Controls =

Weight (Dosed Group) - Weight (Control Group) × 100

Weight (Control Group)

(b) Initial weight.



Figure 3. Growth Curves for Mice Administered Geranyl Acetate in Corn Oil by Gavage

Survival

Estimates of the probabilities of survival of male and female mice in the dosed and control groups are shown by the Kaplan and Meier curves in Figure 4. The survival of the high dose group of female mice was significantly less than that in the control or low dose groups (P < 0.001). The survival of the low dose group was significantly less than that of the controls (P=0.020). No significant differences were observed between any groups of male mice.

In male mice, 31/50 (62%) of the controls, 32/50 (64%) of the low dose, and 0/50 of the high dose group lived to the end of the study at 104-105 weeks. In female mice, 28/50 (56%) of the controls, 15/50 (30%) of the low dose, and 0/50of the high dose group lived to the end of the study at 104-105 weeks. Fourteen control, and eight low dose female mice that died possibly did so from a genital tract infection. The lesions were characterized by chronic suppurative inflammation of mainly the ovary and occasionally the uterus. In the affected animals, the ovarian abscesses were visible grossly as white masses (approximately 1 cm in diameter). Peritonitis was present in some mice. Although the lesions in the genitalia from animals in the current study were not cultured, pure colonies of Klebsiella pneumoniae were isolated from similarly affected female mice at this laboratory in chronic studies completed at a later date. The surviving males and females in the high dose groups were killed in a moribund condition at week 91 after an overdose of the chemical killed all of the other animals. High dose animals alive at the time of the overdose (36 males, 11 females) are considered to have been accidentally killed. In addition to these deaths, three control males, three low dose males, three low dose females, and two high dose females were killed by gavage accidents during the course of the study. Three other control males drowned when the automatic watering system malfunctioned and flooded one of the cages.

Pathology and Statistical Analysis of Results

Histopathologic findings of neoplasms occurring in mice are summarized in Appendix B, Tables B1 and B2; Tables B3 and B4 give the survival and tumor status for each individual animal in the male and female mouse studies. Findings on nonneoplastic lesions are summarized in Appendix D, Tables D1 and D2. Tables 10 and 11 contain the statistical analyses of those primary tumors that occurred with an incidence of at least 5% in one of the three groups.

Hematopoietic System: Malignant lymphomas were observed in male mice with a negative trend ($P \le 0.018$) and the incidence in the high dose group was lower ($P \le 0.044$) than in the controls: control, 7/50, 14%; low dose, 2/50, 4%; high dose, 1/50, 2%. Malignant lymphomas (mixed type) were observed with a negative trend ($P \le 0.041$) (3/50, 6%; 0/50, 0%; 0/50, 0%). In female mice, these tumors were not observed in statistically significant proportions.

Thyroid: Follicular-cell adenomas were observed with a negative trend (P=0.024, Cochran-Armitage) in female mice, and the results of the pairwise comparisons between the control and high dose groups were significant (P=0.030, Fisher): control, 5/50, 10%; low dose, 3/48, 6%; high dose, 0/49, 0%. This decrease was not significant when survival differences were taken into account. This tumor was not observed in significant proportions in male mice.

Liver: Cytoplasmic vacuolization was found in increased incidences in dosed mice of each sex (male: control, 1/50, 2%; low dose, 7/50, 14%; high dose, 47/50, 94%; female: 1/50, 2%; 27/50, 54%; 46/50, 92%).

Kidney: Cytoplasmic vacuolization was increased in the kidney or kidney tubule of high dose male mice and dosed female mice (male: control, 0/50; low dose, 0/50; high dose 41/50, 82%; female: 0/50; 24/49, 49%; 37/50, 74%).

Ovary, Uterus: Suppurative inflammation was found in the vagina, uterus, ovaries, or multiple organs of 18 control, 14 low dose and 2 high dose female mice.



Figure 4. Survival Curves for Mice Administered Gerany! Acetate in Corn Oil by Gavage

Lung: Alveolar/Bronchiolar AdenomaTumor RatesOverall (a)Adjusted (b)Terminal - 104 (c)4/31(13%)Terminal - 91 (d)Statistical Tests (e)Life TableP=0.130NIncidental Tumor TestP=0.095N		
Lang. Arveolal / Broncholal AdenolialTumor RatesOverall (a) $6/50(12\%)$ Adjusted (b) 17.2% Terminal - 104 (c) $4/31(13\%)$ Terminal - 91 (d) $4/37(11\%)$ Statistical Tests (e) $E=0.130N$ Incidental Tumor Test $P=0.095N$ Description $D=0.120Y$		
Overall (a) $6/50(12\%)$ Adjusted (b) 17.2% Terminal - 104 (c) $4/31(13\%)$ Terminal - 91 (d) $4/37(11\%)$ Statistical Tests (e) Life Table Incidental Tumor Test P=0.095N Operation Terminal - 100 (c)		
Overlan (d) $0/50(12\%)$ Adjusted (b) 17.2% Terminal - 104 (c) $4/31(13\%)$ Terminal - 91 (d) $4/37(11\%)$ Statistical Tests (e) Life Table Incidental Tumor Test P=0.095N Optimized to the test in the test in the test in tes	5/49(10%)	2/50(4%)
Terminal - 104 (c) $1/12/c$ Terminal - 91 (d) $4/31(13\%)$ Statistical Tests (e) $4/37(11\%)$ Life TableP=0.130NIncidental Tumor TestP=0.095NCubic TableTableDefinitionTable	15 1%	5 90%
Terminal - 91 (d) $4/37(11\%)$ Statistical Tests (e) $4/37(11\%)$ Life TableP=0.130NIncidental Tumor TestP=0.095NCaller And TestP=0.095N	4/31(13%)	0/0
Statistical Tests (e)P=0.130NIncidental Tumor TestP=0.095NControl TestP=0.095N	4/37(11%)	2/34(6%)
Life Table P=0.130N Incidental Tumor Test P=0.095N	., (11)0)	=/ 0 ((0/0)
Incidental Tumor Test P=0.095N	P=0 503N	P=0.162N
	P=0.605	P=0.121N
Lochran-Armitage Frend Lest P=0.107N	1 0.005	1 011211
Fisher Exact Test	P=0.514N	P=0.134N
Lung: Alveolar/Bronchiolar Adenoma or Carcinoma		
Tumor Rates		
Overall (a) $6/50(12\%)$	6/49(12%)	3/50(6%)
Adjusted (b) 17.2%	18.2%	8.8%
Terminal - $104 (c)$ $4/31(13\%)$	5/31(16%)	0/0
Terminal - 91 (d) 4/37(11%)	5/37(14%)	3/34(9%)
Statistical Tests (e)		
Life Table P=0.239N	P=0.617	P=0.283N
Incidental Tumor Test P=0.190N	P=0.475	P=0.228N
Cochran-Armitage Trend Test P=0.203N		
Fisher Exact Test	P=0.606	P=0.243N
Hematopoietic System: Malignant Lymphoma, Lymphocyti	: Туре	
Tumor Rates		
Overall (a) 4/50(8%)	2/50(4%)	1/50(2%)
Adjusted (b) 12.3%	6.3%	2.3%
Terminal - 104 (c) 3/31(10%)	2/32(6%)	0/0
Terminal - 91 (d) 4/37(11%)	2/38(5%)	0/34(0%)
Statistical Tests (e)		
Life Table P=0.132N	P=0.323N	P=0.202N
Incidental Tumor Test P=0.118N	P=0.295N	P=0.174N
Cochran-Armitage Trend Test P=0.118N		
Fisher Exact Test	P=0.339N	P=0.181N
Hematopoietic System: Malignant Lymphoma, Mixed Type		
Tumor Rates	0.00000	0.50(00)
Overall (a) $3/50(6\%)$	0/50(0%)	0/50(0%)
Adjusted (b) 8.0%	0.0%	0.0%
$\frac{1}{31(3\%)}$	U/ 32(0%)	U/U 0/24/09/1
$\frac{1}{3} \frac{3}{3} \frac{3}$	0/38(0%)	0/34(0%)
Dianonial ICSIS (C) $D=0.041$ N	D-A LOSNI	D-0 124N
Life Table P=0.041N	F-0.123IN D-0.221N	P-0.134N
Cookeen Armitege Trend Test P=0.027N	F-0.2211N	r-0.0//N
Cooman-Armitage Frend Test P=0.03/N Eisher Event Test	D-0 101N	D-0 101N

TABLE 10. ANALYSIS OF PRIMARY TUMORS IN MALE MICE

	Vehicle Control	1,000 mg/kg	2,000 mg/kg
Hematonoietic System: Lymphome All	Malignant		<u></u>
Tumor Rates	Manghane.		
Overall (a)	7/50(14%)	2/50(4%)	1/50(2%)
Adjusted (b)	19.6%	6 3%	2.3%
Terminal - $104(c)$	4/31(13%)	2/32(6%)	0/0
Terminal - 91 (d)	5/37(14%)	2/38(5%)	0/34(0%)
Statistical Tests (e)		-/(-/0)	
Life Table	P=0.018N	P=0.081N	P=0.044N
Incidental Tumor Test	P=0.010N	P=0.108N	P=0.022N
Cochran-Armitage Trend Test	P=0.014N		
Fisher Exact Test		P=0.080N	P=0.030N
Circulatory System: Hemangiosarcoma			
Tumor Rates			
Overall (a)	2/50(4%)	3/50(6%)	1/50(2%)
Adjusted (b)	4.9%	9.4%	2.4%
Terminal - 104 (c)	0/31(0%)	3/32(9%)	0/0
Terminal - 91 (d)	1/37(3%)	3/38(8%)	0/34(0%)
Statistical Tests (e)			
Life Table	P=0.423N	P=0.509	P=0.512N
Incidental Tumor Test	P=0.361N	P=0.472	P=0.408N
Cochran-Armitage Trend Test	P=0.399N		
Fisher Exact Test		P=0.500	P=0.500N
Circulatory System: Hemangioma or He	mangiosarcoma		
Tumor Rates			
Overall (a)	3/50(6%)	3/50(6%)	1/50(2%)
Adjusted (b)	7.9 %	9.4%	2.4%
Terminal - 104 (c)	1.31(3%)	3/32(9%)	0/0
Terminal - 91 (d)	2; 37(5%)	3/38(8%)	0/34(0%)
Statistical Tests (e)			
Life Table	P=0.261N	P=0.651N	P=0.325N
Incidental Tumor Test	P=0.214N	P=0.642	P=0.244N
Cochran-Armitage Trend Test	P=0.238N		
Fisher Exact Test		P=0.661	P=0.309N
Liver: Hepatocellular Adenoma			
Ouerall (g)	2/50/60/	0/50(1907)	6/50/1207
$\Delta divised (b)$	0 70%	7 JU(10%) 28 10%	17 60%
Terminal $\sim 104 \ (c)$	7.1%0 3/31/100%)	20.1% 0/37(780%)	0/0
Terminal $\sim 104 (c)$	3/31(10%)	9/32(20%) Q/38(340%)	6/3//1907
$\frac{1}{1} = \frac{1}{1} \left(\frac{1}{2} \right)$	5/ 5/(0%)	7/ 30(24%)	0/ 34(10%)
Life Table	P=0 170	P=0.063	P=0 100
Incidental Tumor Test	P=0.170	P=0.063	P=0.199
Cochran-Armitage Trend Test	P=0.170	1-0.003	1 -0,177
Ficher Exact Test	1 0.241	P=0.061	P=0 243

TABLE 10. ANALYSIS OF PRIMARY TUMORS IN MALE MICE (Continued)

	Vehicle Control	1,000 mg/kg	2,000 mg/kg
Liver: Hepatocellular Carcinoma			
Tumor Rates			
Overall (a)	11/50(22%)	8/50(16%)	9/50(18%)
Adjusted (b)	28.5%	20.1%	21.9%
Terminal - 104 (c)	5/31(16%)	2/32(6%)	0/0
Terminal - 91 (d)	7/37(19%)	6/38(16%)	3/34(9%)
Statistical Tests (e)			
Life Table	P=0.412N	P=0.296N	P=0.464N
Incidental Tumor Test	P=0.219N	P=0.227N	P=0.234N
Cochran-Armitage Trend Test	P=0.350N		
Fisher Exact Test		P=0.306N	P=0.402N
Liver: Hepatocellular Adenoma or Carc	inoma		
Tumor Rates			
Overall (a)	13/50(26%)	17/50(34%)	15/50(30%)
Adjusted (b)	34.0%	44.1%	37.0%
Terminal - 104 (c)	7/31(23%)	11/32(34%)	0/0
Terminal - 91 (d)	9/37(24%)	15/38(39%)	9/34(26%)
Statistical Tests (e)			
Life Table	P=0.297	P=0.306	P=0.344
Incidental Tumor Test	P=0.453	P=0.317	P=0.538
Cochran-Armitage Trend Test	P=0.372		
Fisher Exact Test		P=0.257	P=0.412
Thyroid: Follicular-Cell Adenoma			
Tumor Rates			
Overall (a)	4/49(8%)	1/47(2%)	1 / 50(2%)
Adjusted (b)	13.3%	3.4%	2.9%
Terminal - 104 (c)	4/30(13%)	1/29(3%)	0/0
Terminal - 91 (d)	4/36(11%)	1/35(3%)	1/34(3%)
Statistical Tests (e)	Y		
Life Table	P=0.111N	P=0.187N	P=0.196N
Incidental Tumor Test	P=0.111N	P=0.187N	P=0.196N
Cochran-Armitage Trend Test	P=0.099N		
Fisher Exact Test		P=0.194N	P=0.175N
Thyroid: Follicular-Cell Adenoma or Ca	arcinoma		
Tumor Rates			
Overall (a)	4/49(8%)	3/47(6%)	1 / 50(2%)
Adjusted (b)	13.3%	9.6%	2.9%
Terminal - 104 (c)	4/30(13%)	2/29(7%)	0/0
Terminal - 91 (d)	4/36(11%)	3/35(3%)	1/34 (3%)
Statistical Tests (e)			
Life Table	P=0.146N	P=0.511N	P=0.196N
Incidental Tumor Test	P=0.146N	P=0.485N	P=0.196N
Cochran-Armitage Trend Test	P=0.130N	D 0 C 10-	
Fisher Exact Test		P=0.524N	P=0.175N

TABLE 10. ANALYSIS OF PRIMARY TUMORS IN MALE MICE (Continued)

	Vehicle Control	1,000 mg/kg	2,000 mg/kg
Harderian Gland: Adenoma			<u></u>
Tumor Rates			
Overall (a)	3/50(6%)	6/50(12%)	0/50(0%)
Adjusted (b)	9.7%	18.7%	0.0%
Terminal - 104 (c)	3/31(10%)	6/32(19%)	0/0
Terminal - 91 (d)	3/37(8%)	6/38(16%)	0/34(0%)
Statistical Tests (e)			
Life Table	P=0.254	P=0.254	P=0.136N
Incidental Tumor Test	P=0.254	P=0.254	P=0.136N
Cochran-Armitage Trend Test	P=0.146N		
Fisher Exact Test		P=0.243	P=0.122N

TABLE 10. ANALYSIS OF PRIMARY TUMORS IN MALE MICE (Continued)

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

(b) Kaplan-Meier estimated lifetime tumor incidence after adjusting for intercurrent mortality.

(c) Observed tumor incidence at terminal kill.

(d) Tumor incidence in animals that died or were killed from week 91 through the end of the study.

(e) Beneath the control incidence are the P-values associated with the trend test. Beneath the dosed group incidence are the P-values corresponding to pairwise comparisons between that dosed group and the controls. The life table analysis regards tumors in animals dying prior to terminal kill as being (directly or indirectly) the cause of death. The incidental tumor test regards these lesions as non-fatal. The Cochran-Armitage and Fisher exact tests compare directly the overall incidence rates. A negative trend is indicated by (N).

	Vehicle Control	1,000 mg/kg	2,000 mg/kg
Hematopoietic System: Malignant Lymp	ohoma, Histiocytic Type		
Overall (a)	2/50(607)	0/50(007)	1(50(207)
A divisted (b)	3/30(0%) 0.207	0/30(0%)	1/30(2%) 6 70%
$\frac{104}{(a)}$	9.3% 0/08(707)	0.0%	0.7%
Terminal $-104(c)$	2/20(7%)	0/13(0%)	0/0
$\frac{1}{2} = \frac{1}{2} = \frac{1}$	2/3/(5%)	0/26(0%)	0/11(0%)
Statistical Tests (e)	D-0 4(7)	D-0.221N	D=0 (90
	P=0.46/N	P=0.221N	P=0.689
Incidental lumor lest	P=0.265N	P=0.161N	P=0.469N
Cochran-Armitage Trend Test	P=0.176N	D	D 0 0001
Fisher Exact Test		P=0.121N	P=0.309N
Hematopoietic System: Malignant Lymp	ohoma, Lymphocytic Type	e	
Tumor Rates	0 (50(40))	2 (50((31)	2 60(4(7))
$\begin{array}{c} \text{Overall} (a) \\ \text{A limit } (a) \end{array}$	2/50(4%)	3/50(6%)	2/50(4%)
Adjusted (b)	6.5%	18.8%	18.2%
Terminal - $104(c)$	1/28(4%)	2/15(13%)	0/0
1 erminal - 91 (d)	2/37(5%)	3/26(12%)	2/11(18%
Statistical Tests (e)			D
Life Table	P=0.143	P=0.250	P=0.237
Incidental Tumor Test	P=0.143	P=0.291	P=0.237
Cochran-Armitage Trend Test	P=0.594		
Fisher Exact Test		P=0.500	P=0.691
Hematopoietic System: Malignant Lymj	ohoma, Mixed Type		
Tumor Rates			
Overall (a)	0/50(0%)	3/50(6%)	0/50(0%)
Adjusted (b)	0.0%	14.3%	0.0%
Terminal - 104 (c)	0/28(0%)	1/15(7%)	0/0
Terminal - 91 (d)	0/37(0%)	3/26(12%)	0/11(0%)
Statistical Tests (e)			
Life Table	P=0.327	P=0.054	(1)
Incidental Tumor Test	P=0.327	P=0.097	(1)
Cochran-Armitage Trend Test	P=0.640		
Fisher Exact Test		P=0.121	<i>(</i>)
Hematopoietic System: Lymphoma, All	Malignant		
Tumor Rates			
Overall (a)	6/50(12%)	6/50(12%)	3/50(6%)
Adjusted (b)	17.4%	31.2%	23.6%
Terminal - 104 (c)	3/28(11%)	3/15(20%)	0/0
Terminal - 91 (d)	4/37(11%)	6/26(23%)	2/11(18%
Statistical Tests (e)			_
Life Table	P=0.251	P=0.272	P=0.349
Incidental Tumor Test	P=0.422	P=0.440	P=0.640N
Cochran-Armitage Trend Test	P=0.202N		
Fisher Exact Test		P=0.620N	P=0.243N

TABLE 11. ANALYSIS OF PRIMARY TUMORS IN FEMALE MICE

	Vehicle Control	1,000 mg/kg	2,000 mg/kg
Liver: Hepatocellular Carcinoma			
Tumor Rates			
Overall (a)	3/50(6%)	2/ 50(4%)	1/50(2%)
Adjusted (b)	7.4%	9.4%	6.7%
Terminal - 104 (c)	0/28(0%)	1/15(7%)	0/0
Terminal - 91 (d)	1/37(3%)	1/26(4%)	0/11(0%)
Statistical Tests (e)			
Life Table	P=0.596	P=0.650N	P=0.677
Incidental Tumor Test	P=0.277N	P=0.446N	P=0.335N
Cochran-Armitage Trend Test	P=0.222N		
Fisher Exact Test		P=0.500N	P=0.309N
Liver: Adenoma or Carcinoma			
Tumor Rates			
Overall (a)	5/50(10%)	4/50(8%)	2/50(4%)
Adjusted (b)	14.0%	17.9%	15.2%
Terminal - 104 (c)	2/28(7%)	2/15(13%)	0/0
Terminal - 91 (d)	3/37(8%)	2/26(8%)	1/11(9%)
Statistical Tests (e)			
Life Table	P=0.451	P=0.523	P=0.525
Incidental Tumor Test	P=0.381N	P=0.527N	P=0.471N
Cochran-Armitage Trend Test	P=0.169N		
Fisher Exact Test		P=0.500N	P=0.218N
Thyroid: Follicular Cell Adenoma			
Tumor Rates			
Overall (a)	5/50(10%)	3/48(6%)	0/49(0%)
Adjusted (b)	16.9%	17.7%	0.0%
Terminal - 104 (c)	4/28(14%)	2/15(13%)	0/0
Terminal - 91 (d)	5/37(14%)	3/26(12%)	0/11(0%)
Statistical Tests (e)			
Life Table	P=0.193N	P=0.606	P=0.236N
Incidental Tumor Test	P=0.193N	P=0.642	P=0.236N
Cochran-Armitage Trend Test	P=0.024N		
Fisher Exact Test		P=0.381N	P=0.030N

TABLE 11. ANALYSIS OF PRIMARY TUMORS IN FEMALE MICE (Continued)

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

(b) Kaplan-Meier estimated lifetime tumor incidence after adjusting for intercurrent mortality.

(c) Observed tumor incidence at terminal kill.

(d) Tumor incidence in animals that died or were killed from week 91 through the end of the study.

(e) Beneath the control incidence are the P-values associated with the trend test. Beneath the dosed group incidence are the P-values corresponding to pairwise comparisons between that dosed group and the controls. The life table analysis regards tumors in animals dying prior to terminal kill as being (directly or indirectly) the cause of death. The incidental tumor test regards these lesions as non-fatal. The Cochran-Armitage and Fisher exact tests compare directly the overall incidence rates. A negative trend is indicated by (N).

(f) No tumors observed in control or high dose groups.

IV. DISCUSSION AND CONCLUSIONS

Administration of geranyl acetate to F344/N rats (0, 1000, or 2000 mg/kg) and to $B6C3F_1$ mice (0, 500, or 1000 mg/kg) in the two-year studies produced cumulative toxic effects that were reflected in decreased weight gain and survival in some dosed groups. Mean body weight gains for high dose rats and mice of either sex were lower than those of the controls. All high dose male and female mice were moribund or dead by week 91 after receiving doses of 2,800 mg/kg (instead of 1,000 mg/kg) for 3 days, but the survival of low dose male mice was comparable with that of the controls. The survival of high dose male rats and dosed female mice was significantly less than that in the controls (male rats, P=0.001; female mice, P \leq 0.020). The amount of test chemical administered to those groups of rats and mice likely exceeded the estimated maximum tolerated dose. An acute suppurative inflammation in the vagina, uterus, ovaries, or multiple organs may have been responsible for the death of 14 control and 8 low dose female mice. While the inflammation appears to have begun in the genital tract, in many animals dving early a generalized purulent peritonitis was present. The precise etiology of the condition is not known. Generally, Klebsiella is considered an opportunistic pathogen in mice; and, while pure. cultures of this organism have been isolated from affected mice, the possibility of an inciting factor has not been ruled out. The survival of high dose male rats, high dose male mice, and dosed female mice may not have been adequate for the detection of late-appearing tumors.

Because the food grade geranyl acetate was only 71% pure (containing about 29% citronellyl acetate), the toxic effects observed could have been due to either geranyl acetate or citronellyl acetate, the 2,3-dihydro analog. As an illustration, the 2,000 mg/kg body weight dose group would have received per day 1400 mg/kg geranyl acetate and 600 mg/kg citronellyl acetate.

Lesions of interest in rats included squamous cell papillomas or carcinomas of the skin, tubular cell adenomas of the kidney, and cataracts and retinopathy. None of these, however, could be clearly associated with administration of geranyl acetate. The historical gavage control incidence of neoplastic lesions for which statistically significant results were obtained is given in Appendix E.

Squamous cell papillomas of the skin occurred with increased incidence (P < 0.05) in low dose male rats (control, 0/50, 0%; low dose, 4/50, 8%; high dose, 1/50, 2%). This incidence was higher than seen in historical corn oil gavage controls at this laboratory (7/250, 2.8%) or in the Bioassay Program (15/999, 1.5%; Appendix E, Table E1). The papillomas are considered to be late-appearing tumors since they were found in dosed male rats at week 103 and during the termination of the study. The low survival in the high dose group may have been responsible for the lack of significant dose response and for the low incidence of these tumors in this dose group. Thus, the increased incidence of squamous cell papillomas in male rats may have been related to geranyl acetate administration. A squamous cell carcinoma was observed in one low dose male rat. None was observed in control or high dose groups.

Tubular-cell adenoma of the kidney (an uncommon tumor) was found in two low dose male rats (2/50, 4%). The first tumor was observed in a male rat that died during the 75th week of the study and the second tumor was observed in the other male rat during the termination of the study. This incidence is higher than that found in comparable control groups that received corn oil at the same laboratory (1/250,(0.4%) or in the Bioassay Program (4/998, 0.4%)(Appendix E, Table E2). No such tumors were found in the high dose groups. There may be a relationship between geranyl acetate administration and this tumor. The absence of this tumor in the high dose group may have been affected by decreased survival, although 40/50 high dose male rats survived beyond the age at which the first renal tumor was observed in the low dose group.

Renal tubular cell adenoma occurred in rats that also had moderate nephropathy. In the human kidney, adenomas similar to those of the rat are observed frequently in nephrosclerotic kidneys of individuals past middle age (Anderson, 1971). The human nephrosclerosis is similar to the rat nephropathy. An obstructed renal tubule containing toxic waste material would permit an unusual degree of contact of tubular epithelium with a carcinogen. In the rat as in the human kidney, these adenomas could possibly progress to carcinomas. Renal tubular-cell adenoma or carcinoma have been observed in male rats given tetrachloroethylene (NTP, 1982), dimethylnitrosamine (Hard, 1979), Cycasin (Gusek, 1980), 2,3dibromopropyl phosphate (Reznik and Ward, 1979), dibromochloropropane (NCI, 1978), and N-nitrosoethyl and N-nitrosomethylurea (Turusov, 1980).

Nephropathy was observed in male rats (control, 40/50, 80%; low dose, 38/50, 76%; high dose, 45/50, 90%) and in female rats (13/50, 26%; 6/49, 12%; 31/49, 63%). The inconsistency of response in dosed rats (the incidence in low dose groups was lower than in controls) makes it difficult to determine whether geranyl acetate was responsible for the increased nephrosis in the high dose groups. The nephropathy appeared to be more severe in rats receiving the test compound.

Pheochromocytoma of the adrenal gland occurred in male rats with a marginally positive trend (Table 5). The incidence in the dosed groups was lower than that observed in gavage controls at this laboratory (60/250, 24%)(Appendix E, Table E3). Thus, these tumors were not considered to be related to the adminisation of geranyl acetate.

The increased incidences of retinopathy and cataracts in high dose male rats and low dose female rats were not considered to be related to administration of geranyl acetate. The incidence of retinopathy and cataracts in these studies appears to be related to the proximity of rats to fluorescent light.

Bile duct hyperplasia occurred with decreased incidence in dosed rats (males: control, 38/50, 76%; low dose, 15/50, 30%; high dose, 2/50, 4%; females: 36/50, 72%; 16/50, 32%; 12/49, 24%). A low incidence in the high dose male rats was considerably lower than that observed (Goodman et al., 1979) in untreated and aging F344 rats (440/1754, 24.5%). The incidence of this lesion in the high dose males may have been affected by the decreased survival.

Cytoplasmic vacuolization (also called "lipidosis" because lipid droplets are present) was found in the liver of dosed mice (males: control, 1/50; low dose, 7/50; high dose, 47/50; females: 1/50; 27/50; 46/50) and in the kidney or kidney tubules of high dose male and female mice (males: control, 0/50; low dose, 0/50; high dose, 41/50; females: control, 0/50; low dose, 24/49; high dose, 37/50). Lipidosis was also observed in the myocardium of dosed mice in the two-year studies, and to a lesser degree in dosed mice in the prechronic studies. These findings were considered to be related to geranyl acetate administration. Induction of lipidosis in animals by geranyl acetate may be species specific, since this lesion was observed only in mice in the current study. Lipidosis was also observed in the livers of mice receiving narcotics (Needham et al., 1981) and in liver, lung, lymph node, adrenal gland, pituitary, retina, and autonomic ganglia of rats receiving the antiestrogenic drug Tamoxifen (Luellmann and Luellmann-Rauch, 1981). This lesion was also observed in the liver, kidney, and myocardium of children with Reye's syndrome, a rare complication of viral infection associated with the administration of salicylate (Bourgeois et al., 1971). The presence of this unusual form of lipidosis in mice in the current study suggests an alteration in lipid metabolism. A structurally related compound, geranyl pyrophosphate, is an intermediate in cholesterol and steroid biosynthesis. High levels of geranyl moiety in dosed mice may have increased the formation of lipids or the biosynthesis of steroid hormones, which promote lipid storage in tissues. Studies of serum and visceral lipids in mice might elucidate the biochemical effect of this compound.

Nonneoplastic lesions (focal inflammation or submucosal edema) of the stomach were found in 2/10 male and 6/10 female mice that received geranyl acetate at doses of 2,000 mg/kg in the 13-week studies. In the 2-year gavage study, forestomach ulcers (control, 1/50; low dose, 1/50; high dose, 4/50) and epithelial hyperplasia (control, 2/50; low dose, 4/50; high dose, 7/50) were seen in male mice. No compound-related lesions were found at this site in female mice that received 500 or 1,000 mg/kg for two years.

Conclusions: Under the conditions of these studies, geranyl acetate was not carcinogenic for F344/N rats or $B6C3F_1$ mice of either sex; however, the reduced survival observed in high dose male rats, high dose male mice, and high and low dose female mice lowered the sensitivity of these studies for detecting neoplastic responses in these groups. In male rats the marginal increases of squamous cell papillomas of the skin and tubular cell adenomas of the kidney may have been related to administration of geranyl acetate.

Geranyl Acetate

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APPENDIX A

SUMMARY OF THE INCIDENCE OF NEOPLASMS IN RATS ADMINISTERED GERANYL ACETATE IN CORN OIL BY GAVAGE

TABLE A1.

SUMMARY	OF	THE IN	NCIDEN	ICE O	FN	EOPL	ASMS	IN	MALE	RATS	ADMINISTER	1ED
		GER	ANYL /	ACET.	ATE	IN C	ORN O)IL	BY GA	VAGE		

	VEHICLE Control	LOW DOSE	HIGH DOSE
ANIMALS INITIALLY IN STUDY ANIMALS NECROPSIED ANIMALS EXAMINED HISTOPATHOLOGICALLY	50 50 50	50 50 50	50 50 50
INTEGUMENTARY SYSTEM			
*SKIN SQUAMOUS CELL PAPILLOMA SQUAMOUS CELL CARCINOMA TRICHOEPITHELIOMA ADNEXAL ADENOMA	(50) 1 (2%) 2 ((%)	(50) 4 (8%) 1 (2%) 1 (2%) 1 (2%)	(50) 1 (2%)
FIBROMA	2 (4%)	1 (24)	1 (2%)
*SUBCUT TISSUE FIBROMA	(50) 3 (6%)	(50) 3 (6%)	(50) 2 (4%)
RESPIRATORY SYSTEM #LUNG ALVEOLAR/BRONCHIOLAR ADENOMA	(50)	(50)	(49) 1 (2%)
MESUIMELIUMA, INVASIVE			
HEMATOPOIETIC SYSTEM *MULTIPLE ORGANS MALIG.LYMPHOMA, HISTIOCYTIC TYPE MONOCYTIC LEUKEMIA	(50) 1 (2%) 1 (2%)	(50) 1 (2%)	(50) 1 (2%) 2 (4%)
CIRCULATORY SYSTEM			
DIGESTIVE SYSTEM			
LIVER	(50)	(50)	(50)

TABLE A1. MALE RATS: NEOPLASMS (CONTINUED)

	VEHICLE Control	LOW DOSE	HIGH DOSE
NEOPLASTIC NODULE HEPATOCELLULAR CARCINOMA		1 (2%)	1 (2%)
<pre>#PANCREAS ACINAR-CELL ADENOMA</pre>	(49)	(48)	(50) 2 (4%)
#GASTRIC MUCOSA SQUAMOUS CELL PAPILLOMA	(50)	(50)	(50) 1 (2%)
#FORESTOMACH SQUAMOUS CELL PAPILLOMA	(50)	(50)	(50) 1 (2%)
URINARY SYSTEM			
#KIDNEY TUBULAR-CELL ADENOMA	(50)	(50) 2 (4%)	(50)
#URINARY BLADDER TRANSITIONAL-CELL PAPILLOMA	(50)	(50) 1 (2%)	(50)
ENDOCRINE SYSTEM			
#PITUITARY ADENOMA, NOS	(49) 10 (20%)	(50) 8 (16%)	(48) 2 (4%)
#ADRENAL Pheochromocytoma	(50) 6 (12%)	(50) 8 (16%)	(50) 9 (18%)
<pre>#THYROID FOLLICULAR-CELL ADENOMA C-CELL ADENOMA C-CELL CARCINOMA</pre>	(50) 2 (4%) 6 (12%) 1 (2%)	(48) 1 (2%) 4 (8%)	(45) 2 (4%) 2 (4%) 1 (2%)
<pre>#PANCREATIC ISLETS ISLET-CELL ADENOMA ISLET-CELL CARCINOMA</pre>	(49) 3 (6%) 1 (2%)	(48) 3 (6%) 1 (2%)	(50)
REPRODUCTIVE SYSTEM			
*MAMMARY GLAND ADENOMA, NOS FIBROADENOMA	(50) 2 (4%)	(50) 1 (2%) 2 (4%)	(50) <u>1 (2%)</u>

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

	VEHICLE Control	LOW DOSE	HIGH DOSE
*PREPUTIAL GLAND ADENOMA, NOS	(50) 3 (6%)	(50) 4 (8%)	(50) 2 (4%)
<pre>#TESTIS INTERSTITIAL-CELL TUMOR</pre>	(50) 43 (86%)	(50) 44 (88%)	(49) 44 (90%)
NERVOUS SYSTEM None			
SPECIAL SENSE ORGANS			
*EYE/LACRIMAL GLAND SQUAMOUS CELL CARCINOMA, INVASIV	(50)	(50) 1 (2%)	(50)
*ZYMBAL GLAND Squamous cell carcinoma	(50)	(50) 1 (2%)	(50)
MUSCULOSKELETAL SYSTEM			
*MANDIBLE BASAL-CELL CARCINOMA	(50)	(50) 1 (2%)	(50)
*LUMBAR VERTEBRA OSTEOSARCOMA	(50) 1 (2%)	(50)	(50)
BODY CAVITIES			
*PERITONEUM MESOTHELIOMA, NOS MESOTHELIOMA, MALIGNANT	(50) 1 (2%)	(50) 2 (4%)	(50) 1 (2%)
*PLEURA MESOTHELIOMA, MALIGNANT	(50) 1 (2%)	(50)	(50)
*MESENTERY FIBROSARCOMA MESOTHELIOMA, MALIGNANT	(50) 1 (2%) 1 (2%)	(50)	(50)
ALL OTHER SYSTEMS			
LUMBAR REGION	1		

TABLE A1. MALE RATS: NEOPLASMS (CONTINUED)

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

TABLE A1. MALE RATS: NEOPLASMS (CONTINUED)

	CONTROL	LOW DOSE	HIGH DOSE
ANIMAL DISPOSITION SUMMARY			
ANIMALS INITIALLY IN STUDY	50	50	50
NATURAL DEATH	8	8	20
MORIBUND SACRIFICE	7	6	12
TERMINAL SACRIFICE	33	29	17
ACCIDENTALLY KILLED, NOS	2	7	1
TUMOR SUMMARY			
TOTAL ANIMALS WITH PRIMARY TUMORS*	47	44	45
TOTAL PRIMARY TUMORS	92	95	77
TOTAL ANIMALS WITH BENIGN TUMORS	47	44	45
TOTAL BENIGN TUMORS	82	87	71
TOTAL ANIMALS WITH MALIGNANT TUMORS	9	6	4
TOTAL MALIGNANT TUMORS	1 0		4
TOTAL ANIMALS WITH SECONDARY TUMORS	‡ 2	1	
TOTAL SECONDARY TUMORS	2	1	
TOTAL ANIMALS WITH TUMORS UNCERTAIN BENIGN OR MALIGNANT TOTAL UNCERTAIN TUMORS	-	2 2	2 2
* PRIMARY TUMORS: ALL TUMORS EXCEPT SI	ECONDARY TUMO	IRS	DJACENT ORGAN
# SECONDARY TUMORS: METASTATIC TUMORS	OR TUMORS IN	IVASIVE INTO AN A	

TABLE A2.

SUMMARY OF THE INCIDENCE OF NEOPLASMS IN FEMALE RATS ADMINISTERED GERANYL ACETATE IN CORN OIL BY GAVAGE

	VEHICLE Control	LOW DOSE	HIGH DOSE
ANIMALS INITIALLY IN STUDY ANIMALS NECROPSIED ANIMALS EXAMINED HISTOPATHOLOGICALLY	50 50 50	50 50 50	50 50 50 50
INTEGUMENTARY SYSTEM			
*SKIN BASAL-CELL TUMOR FIBROMA	(50) 1 (2%) 1 (2%)	(50)	(50)
*SUBCUT TISSUE TRICHOEPITHELIOMA	(50)	(50)	(50) 1 (2%)
RESPIRATORY SYSTEM			
<pre>#LUNG ALVEOLAR/BRONCHIOLAR CARCINOMA OSTEOSARCOMA, METASTATIC</pre>	(48) 2 (4%) 1 (2%)	(50) 1 (2%)	(49)
HEMATOPOIETIC SYSTEM			
*MULTIPLE ORGANS Monocytic Leukemia	(50) 7 (14%)	(50) 6 (12%)	(50) 7 (14%)
<pre>#BONE MARROW Monocytic Leukemia</pre>	(49) 1 (2%)	(50)	(50)
#LIVER MONOCYTIC LEUKEMIA	(50)	(50) 1 (2%)	(49)
CIRCULATORY SYSTEM			
#UTERUS HEMANGIOMA	(50) 1 (2%)	(49)	(50)
DIGESTIVE SYSTEM			
#LIVER HEPATOCELLULAR CARCINOMA	(50)	(50)	(49) <u>1 (2%)</u>

NUMBER OF ANIMALS WITH TISSUE EXAMINED MICROSCOPICALL * NUMBER OF ANIMALS NECROPSIED

	VEHICLE Control	LOW DOSE	HIGH DOSE
#PANCREAS ACINAR-CELL ADENOMA ACINAR-CELL CARCINOMA	(50)	(49) 1 (2%)	(47) 1 (2%)
#GASTRIC MUCOSA Squamous cell papilloma	(50) 1 (2%)	(49)	(49)
#FORESTOMACH SQUAMOUS CELL PAPILLOMA	(50)	(49)	(49) 2 (4%)
URINARY SYSTEM None			
ENDOCRINE SYSTEM			
<pre>#PITUITARY CARCINOMA, NOS ADENOMA, NOS</pre>	(47) 2 (4%) 13 (28%)	(43) 16 (37%)	(48) 9 (19%)
#ADRENAL Cortical Adenoma Pheochromocytoma	(50) 2 (4%)	(49)	(49) 1 (2%) 2 (4%)
#THYROID FOLLICULAR-CELL ADENOMA FOLLICULAR-CELL CARCINOMA C-CELL ADENOMA C-CELL CARCINOMA	(49) 1 (2%) 5 (10%) 2 (4%)	(46) 2 (4%) 3 (7%) 2 (4%)	(49) 2 (4%) 5 (10%)
REPRODUCTIVE SYSTEM			
*MAMMARY GLAND Adenoma, Nos Adenocarcinoma, Nos Fibroadenoma	(50) 1 (2%) 12 (24%)	(50) 1 (2%) 7 (14%)	(50) 1 (2%)
*PREPUTIAL GLAND Adenocarcinoma, nos Adenosquamous carcinoma	(50)	(50) 1 (2%) 1 (2%)	(50)
*CLITORAL GLAND ADENOMA, NOS	(50)	(50)	(50)

TABLE A2. FEMALE RATS: NEOPLASMS (CONTINUED)

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

	VEHICLE Control	LOW DOSE	HIGH DOSE
*VAGINA SARCOMA, NOS LEIOMYOSARCOMA	(50) 1 (2%) 1 (2%)	(50)	(50)
#UTERUS PAPILLARY ADENOMA LEIOMYOSARCOMA ENDOMETRIAL STROMAL POLYP ENDOMETRIAL STROMAL SARCOMA	(50) 1 (2%) 8 (16%) 1 (2%)	(49) 1 (2%) 8 (16%)	(50) 11 (22%)
#UTERUS/ENDOMETRIUM ADENOCARCINOMA, NOS	(50)	(49)	(50) 2 (4%)
NERVOUS SYSTEM			
<pre>#PALLIUM GLIOMA, NOS</pre>	(50)	(49)	(50) 1 (2%)
<pre>#HYPOTHALAMUS CARCINOMA, NOS, INVASIVE</pre>	(50) 1 (2%)	(49)	(50)
SPECIAL SENSE ORGANS			
*EXTERNAL EAR SQUAMOUS CELL PAPILLOMA NEURILEMOMA, MALIGNANT	(50)	(50) 1 (2%) 1 (2%)	(50)
MUSCULOSKELETAL SYSTEM			
*SPHENOID AND ETHMOID CARCINOMA, NOS, INVASIVE	(50) 1 (2%)	(50)	(50)
*FEMUR OSTEOSARCOMA	(50) 1 (2%)	(50)	(50)
BODY CAVITIES None			
ALL OTHER SYSTEMS			

TABLE A2. FEMALE RATS: NEOPLASMS (CONTINUED)

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

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TABLE A2. FEMALE RATS: NEOPLASMS (CONTINUED)

	VEHICLE Control	LOW DOSE	HIGH DOSE
ANIMAL DISPOSITION SUMMARY			
ANIMALS INITIALLY IN STUDY NATURAL DEATH MORIBUND SACRIFICE TERMINAL SACRIFICE ACCIDENTALLY KILLED, NOS	50 6 9 35	50 17 5 27 1	50 10 11 29
TUMOR SUMMARY			
TOTAL ANIMALS WITH PRIMARY TUMORS* Total primary tumors	38 66	31 53	28 46
TOTAL ANIMALS WITH BENIGN TUMORS TOTAL BENIGN TUMORS	33 46	26 38	24 33
TOTAL ANIMALS WITH MALIGNANT TUMOR Total Malignant Tumors	S 14 20	12 15	12 13
TOTAL ANIMALS WITH SECONDARY TUMOR TOTAL SECONDARY TUMORS	S# 3 3		
<pre>* PRIMARY TUMORS: ALL TUMORS EXCEPT # SECONDARY TUMORS: METASTATIC TUMOR</pre>	SECONDARY TU S OR TUMORS	MORS INVASIVE INTO AN	ADJACENT ORGAN

TABLE A3.

INDIVIDUAL ANIMAL TUMOR PATHOLOGY OF MALE RATS IN THE 2-YEAR STUDY OF GERANYL ACETATE

VEHICLE CONTROL

																								<u></u>
ANIMAL NUMBER	0 4	0 2	3	4	3				1	0	1	4	3	3	0	4	0	0	0	ö	ö	1	1	1 1
WEEKS ON	8	8	- 1	6	3	3	6	7	6	3	8	-	8	0	6	1	╢	1	1	8	9	1	1	$\frac{2}{1}$ $\frac{9}{1}$
STUDY	4	9	2	61	6	8	8	8 5	8	7	2	21	4	6	7	3	4	4	4	4	4	41	4	4 4
INTEGUMENTARY SYSTEM														L.	м					1				
SKIN TRICHOEPITHELIOMA KERATOACANTHOMA	<u>+</u>	+	+	+	+	+	N	*	+	+	<u> </u>	÷	*	*	<u>и</u>	• 	•	* x	•	*	•	<u> </u>	•	× •
SUBCUTANEOUS TISSUE FIBROMA	+	+	+	+	+	+	N	+	+	+	+	+	+	+	N	+	+	+	* x	+	+	+	+	+ +
RESPIRATORY SYSTEM																								
LUNGS AND BRONCHI Alveolar/bronchiolar Adenoma Mesothelioma, invasive	+	+	+	+	+	+	+	+	+	+	+	+	+	+ x	+	+	+	+	+	+	+	+	+	+ +
TRACHEA	-	÷	-	-	+	+	+	+	+	+	+	+	+	-	+	-	+	+	+	+	+	+	+	- +
HEMATOPOIETIC SYSTEM								_	_															
BONE MARROW	_ <u>+</u>	+	+	+	+	+	+	. †	+	+	+	+	+	+	+	+	+	÷	+	+	+	+	<u>+</u>	+ +
SPLEEN	<u>+</u>	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	<u>t</u>	+	+	+	+	+	±	+ +
LYMPH NODES	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+ +
THYMUS	-	+	+	+	-	+	-	+	-	+	-	+	+	+	+	+	-	+	+	+	+	+	-	+ +
CIRCULATORY SYSTEM																								
HEART	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+ +
DIGESTIVE SYSTEM																								
SALIVARY GLAND	+	+	+	+	+	+	+	<u>+</u>	+	+	+	+	+	+	+	+	<u>+</u>	+	+	+	+	+	+	+ +
LIVER BILE DUCT CARCINOMA	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+ +
BILE DUCT	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	<u>+</u>	+	+	+	+	+	+	+ +
PANCREAS		<u>+</u>	+	+	<u>+</u> _	-+	+	+	+	+	+	<u>+</u> .	+	+	+	+	<u>+</u>	+	<u>+</u>	+	+	+	+	+ +
ESOPHAGUS	<u>+</u>	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+ +
STOMACH	+	+		+	+	+	+	+	+	+	+	+	+	. <u>+</u>	+	+	<u>+</u>	+	+	+	+	+	+	<u>+ +</u>
SMALL INTESTINE	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	*	+	<u>+</u>	+	+	<u>+</u>	+	<u>+ +</u>
LARGE INTESTINE	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+ +
URINARY SYSTEM																								
KIDNEY		<u>+</u>	+	+	+	+	+	+	<u>+</u>	+	+	<u>+</u>	*	+	+	+	÷	+ <u>*</u>	-	- -	 	
URINARY BLADDER	+		+	+	+	+	+	+		+	*		<u> </u>	*	*	+	*	*	+	<u>+</u>	+	<u> </u>		· · ·
ENDUCKINE STOLEM	+	+	+	÷	+	_	+	+	+	+	+	+	÷	+	+	+	+	+	+	÷	÷	+	+	+ +
ADENOMA, NOS	-	-			×		×			-	-	_X	×	+	•	.×	•	+	<u>×</u>		+	+	+	
PHEOCHROMOCYTOMA	-					<u> </u>			<u>.</u>	•	_×_	<u>.</u>					ż.				×			
THYROID FOLLICULAR-CELL ADENOMA C-CELL ADENOMA C-CELL CARCINOMA	+	+	+	+	+	+	+		• 	×			•	-					<u> </u>	x	-	·	×	· ;
PARATHYROID	+		+	+	+		-	+	+	+	+	-	+	-	+	+	-	+	+	+	+	+	+	+ +
PANCREATIC ISLETS ISLET-CELL ADENOMA ISLET-CELL CARCINOMA	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	* X	+	+	+	+	+ +
REPRODUCTIVE SYSTEM																								
MAMMARY GLAND Fibroadenoma	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+ +
TESTIS Interstitial-Cell Tumor	+	+	+	*	+	ż.	+	* x	<u>*</u>	<u></u>	* X	+	+	*	* X	* X	*	* x	*	*	* x	*	*	* ;
PROSTATE	+	٠	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+ +
PREPUTIAL/CLITORAL GLAND Adenoma, Nos	N	N	N	N	N	N	N	N X	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	NI
NERVOUS SYSTEM																								
BRAIN	+	+	+	+	+	+	÷	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+ +
MUSCULOSKELETAL SYSTEM	<u> </u>								_															
BONE	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N I
BODY CAVITIES	-																							
PLEURA	N	N	N	N	N	N	N	N	N	N	N	N	N	Ņ	N	N	N	N	N	N	N	N	N	N
PERITONEUM	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	NI
MESOTHELIOMA, MALIGNANT Mesentery	N	N	N	N	N	N	N	N	N	N	N	N	N	N	X N	N	N	N	N	N	N	N	N	N
FIBROSARCOMA Mesothelioma, Malignant															x	x					-			
ALL OTHER SYSTEMS	Γ.																							
MULTIPLE ORGANS NOS Malig.lymphoma, histiocytic typ Monocytic leukemia	N	N	N	N	N	N	N	N	N	×	N	N	N	N	N	м 	N	н	N	N	N	N	м	X
LUMBAR REGION OSTEOSARCOMA, INVASIVE	1					x																		

TISSUE EXAMINED MICROSCOPICALLY REQUIRED TISSUE NOT EXAMINED MICROSCOPICALLY TUMOR INCIDENCE NECROPSY, NO AUTOLYSIS, NO MICROSCOPIC EXAMINATION ANIMAL MIS-SEXED +::: -::: N:::

: NO TISSUE INFORMATION SUBMITTED C: Necropsy, NO Histology due to protocol A: Autolysis M: Animal Missing B: No Necropsy Performed

ANIMAL NUMBER	0	1	0	20	0 2 1	22	0 2 3	2	2	27	21	21	0 3 2	0 3 4	0 3 5	0 3 7	0 3 8	0 3 9	0 4 2	0 4 3	044	0 4 5	0 4 7	0 4 9	0 5 0	TOTAL
WEEKS ON STUDY	1	1	i	1		1	1	1	1	1	1	1	Ĩ	1	1	1	1		1	1	1	1	1	1	Ĩ	TISSUES
INTEGUMENTARY SYSTEM	4	4	41	اذ	5	5	5	š	ŝ	أق	Š	5	أق	Š	5	š	5	51	51	5	51	51	51	51	Ś	
SKIN TRICHOEPITHELIOMA	+	+	+	+	+	N	÷	+	÷	+	÷	÷	+	٠	* ×	•	+	+	+	.+	+	+	+	+	+	50× 1 2
SUBCUTANEOUS TISSUE	+	÷	÷	+	+	N	+	+	+	+	÷	+	+	+	+ ×	+	+	+	+	+	+	+	+	+	+*	50× 3
RESPIRATORY SYSTEM	<u> </u>																								-	
LUNGS AND BRONCHI Alveolar/Bronchiolar Adenoma Mesothelioma, invasive	+	+	+	* x	+	+	+	+	+	+	+	+	+	+	+	+	+	+	•	+	+	+	+	+	+	50 1
TRACHEA	-	-	+	-	-	-	+	,	-	-	-	-	-	+	-	-		+	+	+	+	-	-	-	+	27
HEMATOPOIETIC SYSTEM	+																								_	
BONE MARROW	<u>+</u>	+	+	+	+	+	+	+	+	+	+	+	+	t_	+	+	+	+	+	+	+	<u>+</u>	+	+	+	50_
SPLEEN	+		+	+	t	+	+	+	+	+	+	+	<u>+</u>	+	+	+	+	+_	+	+	+	+	+	+	+	42
LYMPH NODES	+	+	+	<u>+</u>	+	+.	+	+	.t.	+	+	+	+	+	+	+	+_	+	+	+	+	+	<u>+</u>	+	+	50
THYMUS	+	-	+	+	+	+	+	+	+	+	+	+	-	+	+	+	+	+	+	+	-	+	+	+	-	39
CIRCULATORY SYSTEM								_				-							_							
HEART	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	50
DIGESTIVE SYSTEM																										
SALIVARY GLAND		+	+	+	+	t_	+	+	_ <u>t</u>	.+	+	. <u>+</u> _	+	+	<u>+</u>	+	+	+	+	+	+	+	. +	+	+	50
LIVER BILE DUCT CARCINOMA	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	*	+	+	+	+	+	+	+	+	50
BILE DUCT	+	+	÷	+	+	+	÷	+	+	+	+	+	+	+	+	+	+	+	+	+	ŧ.	+	+	+	+	50
PANCREAS	+	-	+	t	+	+	_ <u>+</u>	+	+	+	+	+	+	+	+	+	t	+	+	+	+	+	+	+	+	49
ESOPHAGUS	+-	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	<u>+</u>	+	+	50
STOMACH	+	t	+	+	+	+	+	+	+	+	+	+	+	+.	+	+	+	+	+	<u>+</u> .	+	+	+	+	+	<u>50</u>
SMALL INTESTINE	1+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	.+.	+	50
LARGE INTESTINE	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	÷	+	+	+	+	+	+	+	+	50
URINARY SYSTEM	1															-							-			
KIDNEY	+	+	+	+	+	+	+	+	+	+	+	+	+	+_	+	+	+	+	+	+	+	+	<u>+</u>	+	+	50
URINARY BLADDER	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	50
ENDOCRINE SYSTEM	1																									
PITUITARY Adenoma, nos	+	+	+	+	+	+	+	+	+	+	+	+	+	* X	*	+	+	+	+	+	<u>*</u>	+	* X	+	+	49
ADRENAL Pheochromocytoma	±	+	+	+	+	+	+	+	+	+	+	+	+	* *	+	+	+	+	+	+	+	* x	+	+	+	50
THYROID Follicular-Cell Adenoma C-Cell Adenoma C-Cell Carcinoma	+	+	+	+	+	+	+ x	+	+	+	+ x	+	+	+ X	+	+ x	* ×	+	+	+	+	+	+	+	+	50 2 6 1
PARATHYROID	+	_	+	+	+	+	+	+	+	+	+	+	+	+	-	+	÷	+	+	+	+	+	+	+	+	42
PANCREATIC ISLETS ISLET-CELL ADENOMA ISLET-CELL CARCINOMA	+	-	+	+	+	+	+	+	+	+ X	+	+	+	* ×	+	+	+	+	+	* X	+	+	+	+	+	49 3 1
REPRODUCTIVE SYSTEM	+																									<u> </u>
MAMMARY GLAND Fibroadenoma	+	+	+	+	+	+	+	+	+	+	N	+	+	+	+	+	+	+	* *_	+	+	+	* x	+	+	50×
TESTIS	+	+ Y	+ ×	+ Y	+ Y	+ ¥	+ ¥	+ Y	÷.	÷ ¥	÷	÷	÷ ¥	+ ×	* ×	÷	÷	* ×	+ x	+ ×	+ x	* ×	* x	* ×	+ x	50 43
PROSTATE	+	 +		 +	 +	÷	 +	 +	+	<u>+</u>	+	<u>0-</u> -	+	+	+	+	+	+	+	+	_^_ +	+	+	+	+	50
PREPUTIAL/CLITORAL GLAND	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	50×
ADENOMA, NOS			x									X														5
NERVOUS SYSTEM	Т																									
BRAIN	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	50
NUSCULUSRELETAL STSTEM		ы	A.I		м	м	ы		ы	N	ы		ы		N	N	м	м	ы	ы	м	ы	м	м	ы	50×
OSTEOSARCOMA		м		N	n	n	n	n	n	a	a	а	а	n	a	a	n	n	п	n	,	'n	'n	'n	n	Ĩ
BODY CAVITIES	1																									
PLEURA MESOTHELIOMA, MALIGNANT	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	50×
PERITONEUM MESOTHELIOMA, MALIGNANT	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	50× 1
MESENTERY FIBROSARCOMA MESOTHELIOMA, MALIGNANT	N	N	N	N	N	N	N	N	N	N	N	N	N	N	Ν.	N	N	N	N	N	N	N	N	N	N	50× 1
ALL OTHER SYSTEMS	N	N	N		N.	N	м		N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	50¥
MALIG.LYMPHOMA, HISTIOCYTIC TYP Monocytic Leukemia	_								.,															.,		
LUMBAR REGION	1																									1 .

TABLE A3. MALE RATS: TUMOR PATHOLOGY (CONTINUED) VEHICLE CONTROL

* ANIMALS NECROPSIED

TISSUE EXAMINED MICROSCOPICALLY
 REQUIRED TISSUE NOT EXAMINED MICROSCOPICALLY
 TUMDR INCIDENCE
 NECROPSY, NO AUTOLYSIS, NO MICROSCOPIC EXAMINATION
 ANIMAL MIS-SEXED

: NO TISSUE INFORMATION SUBMITTED C: NECROPSY, NO HISTOLOGY DUE TO PROTOCOL A: AUTOLYSIS M: ANIMAL MISSING B: NO NECROPSY PERFORMED

Geranyl Acetate

TABLE A3.

INDIVIDUAL ANIMAL TUMOR PATHOLOGY OF MALE RATS IN THE 2-YEAR STUDY OF GERANYL ACETATE

LOW DOSE

ÁNIMAL NUMBER		0	0	0	0	0	0	0	0	0	0	0	0	0	01	0	0	0	0	0	0	0	0	0	0	
HEEKS ON	1 8	- <u>8</u>	6	륑	- 01	-8	0	8	-	3	-	5	8		6	0	8	8	- 8	1	-1	-2	귀	-11	1	
	1	0	2i	2	ŝ	ŝ	3	3	ó	ś	3	3	3	ŝi.,	اه	ŝ	ź	6	ģ	0	3	41	Å	4	4	
SKIN	1.	+	•	+	+	+	+	+	+	+	+	+	•	•	•	•	÷	•	+	+	+	+	+	+	+	
SQUAMOUS CELL PAPILLOMA SQUAMOUS CELL CARCINOMA Adnexal Adenoma Keratoacanthoma					•	·						×			•						x		•		_	
SUBCUTANEOUS TISSUE	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	
FIBROMA	_													_											_	
LUNGS AND BRONCHI	1.	+	÷	+	+	+	+	+	+	+	+	+	+	•	•	+	+	+	+	+	+	+	+	+	+	
TRACHEA	+	+		-	-	-	-	-	+	+	+	-	+	+	+	+	+	+	+	+	+	+	+	+	+	
REMATOPOIETIC SYSTEM	⊢-			-								-		_											-	
BONE MARROW	+	+	+	+	+	+	+	+	+	+	+	+	+ .	<u>+</u>	+	+	+	+	+	+	+	+	+	+	±	
SPLEEN	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	<u>+</u>	
LYMPH NODES	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	_ <u>+</u>	
THYMUS	+	+	+	+	+	+	+	+	+	+	+	-	+	+	-	+	+	+	-	+	-	+	+	+	-	
CIRCULATORY SYSTEM	+														-	-									-	
HEART	+	+	+	+	+	+	+	+	+	+	+	-	+	+	+	+	+	+	+	+	+	+	+	+	+	
DIGESTIVE SYSTEM	†										_			-											-	
SALIVARY GLAND	_ <u>+</u> _	+	+	+	+	+	+	+	+	+	t	-	+	<u>+</u>	<u>+</u>	+	+	+	+	+	+	+	+	+	<u>+</u>	
LIVER HEPATDCELLULAR CARCINOMA	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	
BILE DUCT	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	
PANCREAS	+	+	+	+	+	+	+	+	-	+	+	+	+ ·	•	+	+	÷	+	+	+	+	+	+	+	Ŧ	
ESOPHAGUS	+	+	+	+	+	+	+	+	+	+	+	-	+	•	+	+	+	÷	+	÷	+	+	+	+	+	
STOMACH	+	+	+	+	+	+	+	+	+	+	+	+	+	۰	+	+	+	+	+	+	+	+	+	+	+	
SMALL INTESTINE	+	÷	+	+	+	+	<u>+</u> _	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	
LARGE INTESTINE	+	+	+	+	+	+	+	+	+	-	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	
URINARY SYSTEM	+													_											-	
KIDNEY TUBULAR-CELL ADENOMA	+	+	+	+	+	+	+	+	+	* x	+	+	+	•	+	+	+	•	+	+	+	+	+	+	+	
URINARY BLADDER	+	÷	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+ x	+	+	+	
ENDOCRINE SYSTEM	–			_																		~			-	
PITUITARY Adenoma, Nos	+	+	+	+	+	+	+	+	+	+	+	+	*	+	+	* ×	+	*	+	+	+	* x	+	+	+	
ADRENAL PHEOCHROMOCYTOMA	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	* x	*	_+	
THYROID Follicular-cell Adenoma C-cell Adenoma	+	+	+	+	+	+	+	-	+	+	+	-	+	+	٠	+ X	+	+	+	+	+	+	+	+	+	
PARATHYRDID	+	+	+	+	+	+	+		+	+	+	-	+	ŧ	+	+	+	+	+	+	+	+	+	+	-	
PANCREATIC ISLETS ISLET-CELL ADENOMA ISLET-CELL CARCINOMA	+	+	+	+	+	+	+	+	-	+	+	÷	+	ł	+	+	+	٠	+	+ x	+	+	٠	+	+	
REPRODUCTIVE SYSTEM	+						-								_						_				-	
MAMMARY GLAND Adenoma, Nos Fibroadenoma	+	+	+	+	+	+	+	+	N	+	+	+	+	•	N	+	+	+	+	+	+ X	+	+	+	+	
TESTIS	+	+	÷	÷	+	+	+	+	÷	÷	t	÷	÷ :	t	÷	÷	÷	÷	÷	÷	÷	+	÷	÷	÷	
PROSTATE	1-		<u>^</u>	<u>^</u>				*	<u>^</u>	<u>^</u>	÷	+	+	≏ ⊦	+	<u>^</u>	^ +	- <u>A</u>	<u>^</u>	<u>^</u>	<u>.</u>	<u>×</u>	<u>^</u>		إ هـ	
PREPUTTAL/CLITORAL GLAND	1 N			<u>,</u> М	, Ť	Ņ	Ň	N	 N	, N	 N	т	<u>, ,</u>		, N	 N	<u>е</u> N	- <u>-</u> -		ب N	 N		<u>т</u> N	 N		
ADENOMA, NOS			.,																	x						
NERVOUS SYSTEM																										
BRAIN	L+	+	+	+	+	+	+	+	+	+	+	+	+ ·	•	+	+	+	+	+	+	+	+	+	+	+	
SPECIAL SENSE ORGANS LACRIMAL GLAND SODAMOUS CELL CARCINOMA, INVASI	N	N	н	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	
ZYMBAL GLAND	N	N	N	N	N	N	N	N	N	N	N	N	N I	4	N	+	N	N	+	N	N	N	N	N	- N	
SQUAMOUS CELL CARCINDMA																×									_	
BONE BASAL-CELL CARCINOMA	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	NX	
BODY CAVITIES			-			_			_					~~~											-	
PERITONEUM MESOTHELIOMA, NOS	N	N	N	N	N	N	N	N	NX	N	N	N	N	4	N	N	N	N	N	N	N	N	N	N	N	
ALL OTHER SYSTEMS MULTIPLE ORGANS NOS MONOCYTIC LEUKEMIA	N	N	N	N	N	N	N	N	N	N	N	N	NI	4	N	N	NX	N	N	N	N	N	N	N	N	
+: TISSUE EXAMINED MICROSCOP -: REQUIRED TISSUE NOT EXAMI X: TUMOR INCIDENCE N: NECROPSY, NO AUTOLYSIS, N S: ANIMAL MIS-SEXED	NED	LY MIC CRO	ROS	COP	ICA	AMI	NAT	ION			: A: B:	ND NEC AUT ANT	TIS CROP TOLY MAL NEC	SUI SY, SIS MI ROF	E II NO	NFOF HI	RMA	TIO OLO RME	N S GY D	UBM DUE		ED	:070	CDL	'	
ANIMAL	0	0	0	0	0	0	0	0	0	0	0	0	2	0	0	0	0	0	0	0	0 3	0	0	01	0	
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WEEKS ON	1	8	9	1	1	5	1	1	1	1	4	1	7	8	1	╢	-	∄	1	1	1	1	╢	1	-	TISSUES
STUDY	4	4	4	4	4	4	4	4	4	4	4	4	4	4	4	4	4	4	4	4	4	4	4	4	4	
INIEGUMENIART SISIEM SKIN Squamous Cell Papilloma Squamous Cell Carcinoma Addexal Adenoma Veratoracanthoma	+	+	* ×	+	+	* × ×	+	+	+	+	+	+	* ×	+ X	٠	+	+	+	+	+	+	+	+	+	+	50× 4 1 1
SUBCUTANEOUS TISSUE FIBROMA	+	+	+	+	+	+	+	+	+	+	+	+	+	+	÷ x	+	+	+	+	+	*	+	+	+	*	50× 3
RESPIRATORY SYSTEM																									+	
LUNGS AND BRONCHI	+	+	+	+	+	+	+	+	+	÷	÷	+	+	+	+	+	+	+	+	+	+	+	+	+	+	50
TRACHEA	+	+	÷	÷	÷	+	+	+	+	+	+	ŧ	+	÷	+	+	÷	+	+	÷	+	+	÷	+	+	43
HEMATOPOIETIC SYSTEM																										
BONE MARROW	+	+	+	+	+	+	+	÷	+	+	+	+	+	+	+	+	+	+	+	<u>+</u>	+	+	+	+	+	50
SPLEEN	+	+		+	+	+	+	+	t	+	+	+	+	+	<u>+</u>	+	+	+	+	<u>+</u>	+	+	+	+	╧	50
LYMPH NODES	+	+	+	<u>.</u> +	_	+	+	+	+	+	+	+	+	+	+		+	+	+	+	+	.+	+	+	+	50
THYMUS	+	+	+	+	+	-	+	+	+	+	+	+	+	+	•	-	+	+	+	+	+	+	-	+	+	41
CIRCULATORY SYSTEM																										
HEART	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	49
DIGESTIVE SYSTEM																			Ŧ					L	1	69
SALIVARY GLAND	*	+	+	+	+	<u>+</u> _		÷.	+	+	+	•		_ <u>+</u>	<u>+</u>	+	-	<u> </u>	- <u>I</u>	-	<u> </u>	<u> </u>	- <u>-</u> -			50
HEPATOCELLULAR CARCINOMA	+	+	+		+		-	<u> </u>	-				*	·	*	<u> </u>		-	*	•			-	•	-	1
BILE DUCT	+	+	+	t_	+	+	+	+	+	+	+	+	+	+	+	_ <u>+</u>	+	+	÷	+	+	+	+	+	+	50
PANCREAS	+	+	+	-	.+	. <u>+</u> _	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+ .	+	+	-+	48
ESOPHAGUS	+	+	+	+	+	+	<u>+</u>	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	49
STOMACH	+	+	+	+	+	+	+	+	+	+	t	+	+_	+	+	+	+	+	+	+	+	+	+	+	+	50
SMALL INTESTINE	. <u>+</u>	+.	+	+	+	+	+	+	+	. <u>+</u>	+	+	+	t	+	+	+	+	<u>+</u>	+	+	+	+	+	+	50
LARGE INTESTINE	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+ •	+	+	+	49
URINARY SYSTEM																										
KIDNEY Tubular-cell Adenoma	+	+	+	*	+	+	+	+	+	+	+	+	+	+	+	+	+	*	+	+	+	+	+	+	+	50 2
URINARY BLADDER TRANSITIONAL-CELL PAPILLOMA	+	+	+	+	+	+	+	+	+	+	+	+	÷	+	+	+	+	+	+	+	+	+	+	+	+	50 1
ENDOCRINE SYSTEM																									-	
PITUITARY	t	+	+	+	+	+	÷	+	÷	+	+	ţ	+	ţ	+	+	+	+	÷	ţ	+	÷	+	+	+	50
ADENUMA, NUS ADRENAL PHEACHROMACYTAMA	+	+	+	+	+	+	*	+	+ ×	+	+	*	+	*	*	+	+	÷	+	+	+	+	+	*	+	50 8
THYROID FOLLICULAR-CELL ADENOMA	+	+	+	+	+	+	+	+	+	+	+	+	÷	+	+	* X	+	+	+	+	+	+	+	+	+	48 1
C-CELL ADENOMA								<u> </u>	X				<u> </u>		<u>×</u>										_	4
PARATHYROID	+	+	+	-	+	+	+	+	<u></u>	+	+	+	+	*	<u> </u>	<u>T</u>	<u> </u>	-	-	-		÷	<u> </u>	_ <u>_</u>	-	45
ISLET-CELL ADENOMA ISLET-CELL CARCINOMA		Ť	*	-	x	x	Ŧ	Ŧ	•		•	*	T	•	T	•	•	Ť			×	•	,	•		
REPRODUCTIVE SYSTEM																										
MAMMARY GLAND Adenoma, nos Fibroadenoma	+ _X_	+	+	+	+	+	+	+	+	+	*	+	N	+	+	+	*	+	+	+	*	+	×	+	_	1
TESTIS INTERSTITIAL-CELL TUMOR	±	*	* x	* x	* x	* X	* X	* X	*	* X	*	* X	* X	* x	* X	* x	* X	* X	* X	* X	*	*	* x	* ×	+ X	50 44
PROSTATE	+	+	+	+		+	+	+	+	÷	+	+	+	+	+	+		_+	+	+	+	+	-	+	+	49
PREPUTIAL/CLITORAL GLAND	N	Ŋ	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	Ņ	N	N	N	Ņ	N	N	N	50×
ADENUMA, NUS	 																	^				^				-
BDATN	1				1	1						+	+	+	+			÷	÷	+	+	+	+	+	+	50
SPECIAL SENSE ORGANS	<u> </u>					<u> </u>									-										_	
LACRIMAL GLAND SQUAMOUS CELL CARCINOMA, INVASI	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	50× 1
ZYMBAL GLAND Squamous cell carcinoma	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	×	50× 1
MUSCULOSKELETAL SYSTEM																									_	
BONE BASAL-CELL CARCINOMA	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	50× 1
BODY CAVITIES																										
PERITONEUM MESOTHELIOMA, NOS	N	N	N	N	N	N	×	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	50× 2
ALL UTHER SYSTEMS MULTIPLE ORGANS NOS MONDOYTIC LEUKEMIA	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	50×

TABLE A3. MALE RATS: TUMOR PATHOLOGY (CONTINUED) LOW DOSE

* ANIMALS NECROPSIED

+: TISSUE EXAMINED MICROSCOPICALLY -: REQUIRED TISSUE NOT EXAMINED MICROSCOPICALLY X: TUMOR INCIDENCE N: RECROPSY, NO AUTOLYSIS, NO MICROSCOPIC EXAMINATION S: AAIMAL MIS-SEKED

: NO TISSUE INFORMATION SUBMITTED C: Necropsy, no histology due to protocol A: Autolysis M: Animal Missing B: No Necropsy Performed

TABLE A3.

INDIVIDUAL ANIMAL TUMOR PATHOLOGY OF MALE RATS IN THE 2-YEAR STUDY OF GERANYL ACETATE

HIGH DOSE

ANIMAL NUMBER	0	0	0	0	0	0	0	9	2	0 3	0	0	0	0	0	0	0	0	0	2	0	0	2	0	04.
WEEKS ON	0 5	ġ	ē	ğ	- Č	2	Į,	ģ	0 6	2	-	퀽	<u>Š</u>	8	0	0	0	2	0	0 8	0	0	히		Ğ
THTEGUMENTARY SYSTEM	3	5	8	9	š	3	š	ĕ	ğİ	ź	41	8	Ž	ž	ž	3	31	<u>ši</u>	Ă İ	4	8	8	źİ	31	Ś
SKIN SQUAMDUS CELL PAPILLOMA FIBROMA	+	+	+	+	+	÷	+	÷	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+
SUBCUTANEOUS TISSUE FIBROMA	+	÷	+	÷	÷	÷	÷	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+
RESPIRATORY SYSTEM																									-
LUNGS AND BRONCHI Alveolar/Bronchiolar Adenoma	+	+	+	+	+	+	+	+	+	+	+	+	+	+	*	+	+	+	+	-	+	+	+	+	+
TRACHEA	-	+	+	+	+	-	-	+	+	-	+	+	-	+	+	+	+	+	+	+	-	-	+	-	4
HEMATOPOIETIC SYSTEM	\vdash																								-
BONE MARROW	±	+	+	+	+	+	ŧ	+	+	t.	+	-	+	+	+	+	+.	_ <u>t</u>	<u>+</u>	+	+	+	+	+	t
SPLEEN	+	+	+	+	+	+ .	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	. +	<u>+</u>	+	+
LYMPH NODES	+	+	<u>+</u>	<u>+</u>	+	+	+	+	+	+	+	+	. <u>+</u>	+	+	+	+	_	+	+		+	+	+	+
THYMUS	+	+	+	+	+	+	÷	+	+	+	+	+	+	+	+	+	+	+	+	-	-	+	-	+	-
CIRCULATORY SYSTEM																									-
HEART	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+
DIGESTIVE SYSTEM	<u> </u>																								-
SALIVARY GLAND	-	+	-	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	<u>+</u> .		-	+	+	+
LIVER NEOPLASTIC NODULE	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+
BILE DUCT	+	+	+	+	t	t.	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	<u>+</u>	+	+
PANCREAS Acinar-Cell Adenoma	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	*
ESOPHAGUS	-	+	+	+		t.	_ <u>+</u>	+	+	+	+	+	÷	+	+	+	+	<u>+</u>	t	+	+	-	+	+	+
STOMACH Squamous cell papilloma	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+
SMALL INTESTINE	+	+	-	+	-	-	+	+	+	<u>+</u>	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+
LARGE INTESTINE	+	+	+	+	-	-	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+
URINARY SYSTEM	<u>}</u>																								-
KIDNEY	<u>+</u>	+	+	+	ŧ	ŧ	+	+	+	+	+	+	+	÷	+	+	+	+	+	+.	t	+	+	+	+
URINARY BLADDER	+	÷	+	+	+	+	+	+	÷	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+
ENDOCRINE SYSTEM	⊢															·									-
PITUITARY Adenoma, Nos	+	+	+	+	+	-	+	-	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+
ADRENAL Pheochromocytoma	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	*	+	*	*
	-	+	-	÷	+	÷	+	+	+	÷	+	+	+	+	+	+	+	+	+	+	-	-	+	-	+
C-CELL ADENOMA C-CELL CARCINOMA C-CELL CARCINOMA	_																	x							x
PARATHYRDID	-	-	-	-	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	-	-	+	+	÷
REPRODUCTIVE SYSTEM	<u>†</u>							_										-							
MAMMARY GLAND Fibroadenoma	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	* x	+	+	+	+	+	+	+	+	+
TESTIS INTERSTITIAL-CELL TUMOR	+	+	+	* x	-	* X	* x	<u>*</u>	+	*		*	* X	* x	*	<u>*</u>	* *	<u>*</u>	* *	* x	ż.	<u>_</u> *	*	*	* ×
PROSTATE	+	+	+	+	+	+	+		+	+	+	+	+	+	+	+	+	+		+	+	+	+	+-	+
PREPUTIAL/CLITORAL GLAND Adenoma, NOS Nedució system	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N
BRAIN	+	÷	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+
BODY CAULTIES	Ļ																								_
PERITONEUM MESOTHELIONA, NOS	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N
ALL OTHER SYSTEMS	+																								
MULTIPLE ORGANS NOS MALIG.LYMPHOMA, HISTIOCYTIC TYP MONOCYTIC LEUKEMIA	N	N	N	N	N	N	N	N	N	N	N	N X	N	N	N	N	N	N	N	N X	N	N	N	N	N
+: TISSUE EXAMINED MICROSCOP -: REQUIRED TISSUE NOT EXAMI X: TUMOR INCIDENCE N: NECROPSY, NO AUTOLYSIS, N S: ANIMAL MIS-SEXED	ICAL NED 0 MJ	MIC	ROS	SCOP OPIC	ICA EX	AMI	NAT	ION	I		: A: M: B:	NO NE AU AN NO	TI CRO TOL IMA NE	SSU PSY YSI L M CRD	E I , N S ISS PSY	NFO O H ING PE	RMA Ist Rfo		N S GY	DUE		ED PR	070	COL	

ANIMAL NUMBER	0 4 2	50	27	0 2 3	0 0 5	0 1 6	0 1 3	0	0	0 0 7	1	11	0 1 2	0 1 4	21	2	2	2	3	3	32	0 3 3	0 3 4	3	0 3 8	TOTAL
WEEKS ON Study	9	9	9	9	0	0	0	1	1	9	0	6	1	6	9	0	9	0	1	2	0	0	0	2	1	TUMORS
INTEGUMENTARY SYSTEM	_6	61	-71	91	11	ш.	21.	<u> </u>	91	91	.91	91	.91	91	41	91	41		41.	-91	-1-	ـبد	91	41	4	
SKIN Squamous cell papilloma Fibroma	+	+	N	+	N	+	+ X	+	+	•	*	+	+	+	+	+	+	+	+	+	+	+	N	+	N	50× 1
SUBCUTANEOUS TISSUE FIBROMA	+	+	N	+	N X	+	+	+	+	+	+	+	+	+	+	+	+	+	÷	+	+	* X	N	+	N	50× 2
RESPIRATORY SYSTEM																									1	
LUNGS AND BRONCHI	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	•	+	+	+	49
TRACHEA	+	+	+	+	_	+	+	+	+	-	+	+	+	+	_	-	+	-	+	-	-	+	-	+	-	33
HEMATOPOIETIC SYSTEM		-				. .								_										_	-	
BONE MARROW	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	÷	49
SPLEEN	+	+	+	+	ŧ.	+	t	+	+	÷	+	+	+	+	+	<u>t</u>	÷	<u>+</u>	+	+	+	+	+	+	+	50
LYMPH NODES	+	+	+	+	+.	+	+	+	+	+	+	+	+	+	+	+	ŧ	+	+	+	+	+_	+	+	+	68
THYMUS	-	-	+	+	+	+	+	÷	+	+	÷	÷	+	-	+	-	÷	+	+	+	+	+	-	+	+	41
CIRCULATORY SYSTEM	-						_																		1	
HEART	+	+	+	+	٠	٠	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	50
DIGESTIVE SYSTEM																				_						
SALIVARY GLAND	+	+	+	+	+	+	+	+	+	+	+	+	+	<u>+</u>	+	+	+	+	+	+	+	+	+	+	.+	46
	+	+	+	+	+	+	+	+	+	+	+	+	+	+	* x	+	+	+	+	+	٠	+	٠	+	+	50
	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	50
PANCREAS	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	÷	+	+	50
ACINAR-CELL ADENDMA						X																			+	2
ESOPHAGUS	<u> </u>	+	<u>+</u>	+	<u>_</u> t	+	+	+	+	+	+	+	+	+	+	+	+	+	<u>+</u>	+	+	<u>+</u>	. <u>+</u>	+	+	- 47
STOMACH Squamous cell papilloma	<u>+</u>	<u>*</u>	+	+	+	+	+	+	+	+	+	<u>+</u>	+	+	÷	+	<u>+</u>	+	ż	+	<u>+</u>	+	+	+		<u>50</u>
SMALL INTESTINE	<u>+</u>	+	+	+	+	+	+	+	+	+_	+	+	+	+	+	+	+	+	÷	+	+	t	÷	t_	+	
LARGE INTESTINE	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	÷	+	48
URINARY SYSTEM																				-					1	
KIDNEY	+	+	+	+	+	+	+	+	+	+	. +	+	+	+	+	+	+	+	+	+	+	+	+	+	+	50
URINARY BLADDER	+	+	+	+	+	+	+	+	+	+	+	÷	+	+	+	+	+	+	+	+	+	+	+	÷	+	50
ENDOCRINE SYSTEM				_				_																		
PITUITARY Adenoma, nos	±.	+	+	+	+	+	*	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	4	48
ADRENAL Pheochromocytoma	<u>*</u>	+	* *	+	+	+	<u>_x</u>	+	+	*	+	+	+	+	+	+	* *	+	•	, ż	+	+	+	+	+	50 9
THYROID Follicular-cell Adenoma C-cell Adenoma C-cell Carcinoma	+	+	+	×	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	×	+	+	+	+	+	45 2 2
PARATHYROID	+	+	÷	+	+	+	+	+	+	+	÷	÷	÷	+	-	+	+	+	+	+	+	÷	+	+	+	43
REPRODUCTIVE SYSTEM																										
MAMMARY GLAND Fibroalenoma	+	+	+	+	+	+	+	+	+	٠	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	50×
TESTIS Interstitial-cell tumor	+	*	*	<u></u>	*	<u>*</u>	<u>*</u>	*	ż.	<u>*</u>	*	*	*	* X	*	*	*.	* x	* *	* *	*	<u>*</u>	*	* X	ż	49
PROSTATE	+	+	+	+	+	+	+	+	+	4	+	<u>+</u>	+	<u>+</u>	+	+	+	+	+	+	+	+	t.	+	+	49
PREPUTIAL/CLITORAL GLAND ADENOMA, NOS NERVOUS SYSTEM	N	N X	N	N	N	N	N	N	NX	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	50× 2
BRAIN	+	+	+	+	+	+	+	+	+	+	+	+	+	+	÷	+	+	+	+	+	+	+	÷	+	+	50
BODY CAVITIES	–																								-	
PERITONEUM Mesothelioma, Nos	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	50× 1
ALL OTHER SYSTEMS																										
MULTIPLE ORGANS NOS Malig.lymphoma, histiocytic typ Monocytic leukemia	N	N	N	N	N X	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	50× 1 2

TABLE A3. MALE RATS: TUMOR PATHOLOGY (CONTINUED) HIGH DOSE

* ANIMALS NECROPSIED

+: TISSUE EXAMINED MICROSCOPICALLY -: REQUIRED TISSUE NOT EXAMINED MICROSCOPICALLY X: TUMOR INCIDENCE N: NECROFY, NO AUTOLYSIS, NO MICROSCOPIC EXAMINATION S: ANIMAL MIS-SEXED

: NO TISSUE INFORMATION SUBMITTED C: NECROPSY, NO HISTOLOGY DUE TO PROTOCOL A: Autolysis M: Animal Missing B: NO NECROPSY PERFORMED

TABLE A4.

INDIVIDUAL ANIMAL TUMOR PATHOLOGY OF FEMALE RATS IN THE 2-YEAR STUDY OF GERANYL ACETATE

VEHICLE CONTROL

	1 9	2	ç	2	2	0	0	2	2	2	0	2	1	3	81	0		0	0	8	8	8	0	0 0
WEEKS ON	9	5	1	i	1	Ž	4	7	3	3	8	1	4	1	2	1	3	4	1	1	8	1	<u> </u>	$\frac{2}{1}$ $\frac{4}{1}$
STUDY	3 3	4	6	8	81	2	2	8 5	8 9	9 3	4	?	0	2	3	4	4	4	9	4	0 5	0 5	5	5 5
INTEGUMENTARY SYSTEM																								
SKIN BASAL-CELL TUMOR FIBROMA	+	+	+	+	+	+	+	N	•	•	•	•	+	•	•	+	+	Ī	Ŧ	Ţ	•	Ŧ	Ŧ	Ťž
RESPIRATORY SYSTEM		_																						
LUNGS AND BRONCHI Alveolar/bronchiolar carcinoma Diteosarcoma. Metastatic	+	+	+	+ X	+	+	+	+	+	-	+	+	+	+	+	+	+	+	+	+	+	+	+	+ +
TRACHEA	+	_	+	+	-	-	+	+	-	+	+	+	+	+	-	-	+	+	+		+	+	+	+ +
NEMATOPOTETIC SYSTEM	+																							<u> </u>
BONE MARROW MONOCYTIC LEUKEMIA	+	+	÷	+	+	+	+	+	÷	+	+	+	+	ż.	+	+	+	+	+	+	+	+	+	- +
SPLEEN	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	<u>+</u>	+	+	+ +
LYMPH NODES	+	+	+	+	+	+	+	÷	+	+	+	+	+	+	+	+	+	+	+	+	+	+	<u>+</u>	+ +
THYMUS	+	+	-	+	-	+	+	-	+	+	+	+	+	+	+	-	+	+	+	+	+	+	+	+ +
CIRCULATORY SYSTEM	+	-																						
HEART	+	+	+	÷	+	+	+	+	+	÷	+	+	+	+	+	+	+	+	+	+	+	+	+	+ +
DIGESTIVE SYSTEM	+																					-		
SALIVARY GLAND	1	<u>t</u>	+	+	<u>+</u>	+	+	+	+	<u>+</u>	+	+	+	+	+	+	+	+	+	+	+ '	+	.±	+ +
LIVER	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	<u>+</u>	+	+	.+	t	+	+	+	+ +
BILE DUCT	+_+	+	+	+	+	+	+	+	÷	+	+	+	+	+	+	+.	+	+	+	+	.±	+	+ .	+ +
PANCREAS	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	t	+	÷	+	<u>+</u>	+	+ .	+	+ +
ESOPHAGUS	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	-	+	+	+	+	+	+	+	+ +
STOMACH Squamous cell papilloma	+	+	+	+	* x	+	+	+	+	+	÷	+	+	+	+	+	+	+	+	+	+	+	+	+ +
SMALL INTESTINE	+	.	<u>+</u>	+	÷	+	+	. t	+	+	+	+	+	+	+	+	ŧ	+	+	+	+	+	+	+ +
LARGE INTESTINE	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	÷	÷	+	+	+	+	+	+ +
URINARY SYSTEM	+																							
KIDNEY	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+.	+ +
URINARY BLADDER	+	+	+	+	+	+	÷	÷	+	÷	÷	+	÷	+	+	+	+	+	+	÷	+	+	+	+ +
ENDOCRINE SYSTEM	┼──																							
PITUITARY Carcinoma, Nos Adenoma, Nos	-	٠	-	+	* x	+	+	+	+ x	+ X	+	+	+ X	+ X .	+ X	+	+	+	+	* ×	+	+ X	-	+ +
ADRENAL Pheochromocytoma	+	+	+	+	+	+	+	+	٠	+	+	+	ż.	+	+	+	÷	+	+	+	+	+	+	+ +
THYROID Follicular-cell carcinoma C-cell adenoma C-cell carcinoma	+	+	+	+	+	+	+	+	+	+	+ x	+	+	+	+	-	+	+	+	+ × ×	+	+ ×	+	+ + x
PARATHYROID	+	+	-	+	+	+	+	+	+	+	+	+	+	+	-	-	+	+	+ *	'+	+	+	+	+ +
REPRODUCTIVE SYSTEM	+																							
MAMMARY GLAND Adenoma, Nos Fibradenoma	+	+	+	+	+	+ x	÷	+	+	+	+	+	+	+	+	+	+	*	+	+ x	+	+ X	+	+ +
PREPUTIAL/CLITORAL GLAND	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N N
ADENOMA, NOS Vagina Sarcoma, Nos	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	NX	N	N	N	N N
LEIOMYOSARCOMA											X													
UTERUS Leidmydsarcoma Endometrial Stromal Polyp Endometrial Stromal Sarcoma Hemangtima	ŀ	+	* X	* x	+	+	+	+ X	* X	+	*	+ ×	×	+	+	+	+	•	+	+	+	+	+	• •
OVARY	+	÷	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+ +
NERVOUS SYSTEM	+-	-									•					•				- <u>·</u>	•			
BRAIN CARCINDMA, NOS, INVASIVE	+	÷	÷	÷	+	+	+	÷	÷	+	÷	+	+	÷	÷	+	+	+	+	+ X	+	÷	÷	+ +
MUSCULOSKELETAL SYSTEM	+																							
BONE Carcinoma, Nos, invasive Osteosarcoma	N	N	N	N X	N X	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N N
ALL OTHER SYSTEMS	+-																							
MULTIPLE ORGANS NOS MONOCYTIC LEUKEMIA	N	N	N	N	N	N	N X	N	N	N X	N X	N	N	N	N	N X	N	N	NX	N	N	N	N	N N
+: TISSUE EXAMINED MICROSCOP	ICAL	LY									1	ND	TI	ssu	ΕI	NEO	RMA	тто	N S	Пвм	ттт	FD		

IISSUE EXAMINED MICROSCOPICALLY
 REQURED ITSSUE NOT EXAMINED MICROSCOPICALLY
 TUMOR INCIDENCE
 NECROSY, NO AUTOLYSIS, NO MICROSCOPIC EXAMINATION
 ANIMAL MIS-SEXED

: NO TISSUE INFORMATION SUBMITTED C: NECROPSY, NO HISTOLOGY DUE TO PROTOCOL A: AUTOLYSIS M: ANIMAL MISSING B: NO NECROPSY PERFORMED

ANIMAL	0	0	1	1	2	2	022	024	24	028	2	0 3 0	0 3 2	3	0 3 5	3	3	4	42	0 4 3	44	4	4	4	0 5 0	TOTAL
HEEKS ON STUDY	- 1	1	1	1	1	3	-	1	0	1	1	1	1	1	1	1	1	1	1	1	8	1	1	1	1	TISSUE
INTEGUMENTARY SYSTEM	5	5	5	5	51	.5	5	51	_51	51	51	51	51.	-51	51	51	51.	5	51	51	51	.51	_51	5(-5	
SKIN BASAL-CELL TUMOR FIBROMA	+	+	N	+	+	+	N	+	+	+	+	+	N	+	+	+	+	+	+	+	+	+ x	+	+	+	50× 1 1
RESPIRATORY SYSTEM																							-		-	
LUNGS AND BRONCHI Alveolar/bronchiolar carcinoma Osteosarcoma, metastatic	+	+	+	+	+	+	+	+	+	+	*	+	*	+	+	+	+	+	*	+	-	+	+	+	+	48 2 1
TRACHEA	+	÷	+	+	+	÷	+	+	+	+	+	-	+	+	+	-	+	-	-	+	+	+	-	+	+	38
HEMATOPOIETIC SYSTEM																						-			-	
BONE MARROW Monocytic Leukemia	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	49
SPLEEN	+	+	+	+	+	+	+	+	<u>+</u>	+	. <u>t</u>	+	+	+	. <u>+</u>	+	-	+	ŧ.	+	+	+	+	+	+	49
LYMPH NODES	+	+	+	+	+	+	<u>.</u> t	+	_ <u>+</u> _	+	+	+	+	+	+	+_	+	+	±	+	+	+	+	+	+	50
THYMUS	+	+	-	+	+	+	+	-	-	+	+	+	+	+	-	+	+	+	+	+	-	+	+	+	+	41
CIRCULATORY SYSTEM											-											-			-	
HEART	+	+	÷	٠	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	50
DIGESTIVE SYSTEM	-								-					_			-									
SALIVARY GLAND	+	. <u>+</u>	ŧ.	+	+	+	+	+	+	+	+	+	+	t	+	+	+	+	+	<u>+</u>	+	+	+	+		50
LIVER	±	+	t	+	+	+	+	+	+	+	t_	+	+	+	÷	<u>+</u>	+	+	+	+	+	+	+	+	+	50
BILE DUCT	+	+	+	+	+	+	<u>.</u> +	+	+	+	+	+	<u>+</u>	+	<u>+</u>	+	+_	+	<u>+</u>	+	<u>+</u>	+	ŧ.	+	_t	50
PANCREAS	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	50
ESOPHAGUS	±	+	+	+	+	+.	+	+	t.	+	+	+	t.	-	+	+	+	+	+	+	+_	+	+	+	+	48
STOMACH Squamous cell papilloma	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	50 1
SMALL INTESTINE	+	+	+	+	+	+	+	+	+	+	+	+	+	+	<u>+</u>	+	+	+	t.	+	+	+	+	+	+	50
LARGE INTESTINE	+	+	÷	+	+	+	+	+	+	+	+	+	+	+	+	+	÷	+	+	+	+	+	+	+	+	50
URINARY SYSTEM	+-																		-							
KIDNEY	_+_	+	+	+	+	+	t	+		+.	_ <u>+</u>	+	÷	+	+	+	+	+	+	+	+	+	+	+_	+	50
URINARY BLADDER	+	+	÷	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	50
ENDOCRINE SYSTEM												~													-	
PITUITARY Carcinoma, Nos Adenoma, Nos	+	+ X	+ X	+	+	+	+ X	+ .x	+	+	+	+	+	+	+	+	+	+	+	+	+ X	+ _X	•	+ ×	+	47 2 13
ADRENAL PHEOCHROMOCYTOMA	+	+	+	+	+	+	+	+	+	+	+	+	+	*	+	+	+	+	+	+	+	+	+	+	+	50 2
THYROID	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	49
FOLLICULAR-CELL CARCINOMA C-CELL ADENOMA C-CELL CARCINOMA	_						x		x	_																5
PARATHYROID	-	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	÷	÷	+	+	+	٠	-	45
REPRODUCTIVE SYSTEM	+																					-				
MAMMARY GLAND Adenoma, Nos Firgadenoma	+	+	+ x	+	+ x	+	+	+	+	+	+	+	+ x	+	+ x	+	+ x	+ X	+ x	+	+	+	+	+ x	+ X	50× 1
PREPUTIAL/CLITORAL GLAND	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	Ń	N	N	50×
VAGINA SARCOMA, NOS LEIOMYOSARCOMA	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	50× 1
UTERUS LEIDMYOSARCOMA Endometrial stromal polyp Endometrial stromal sarcoma Hemangioma	+	+	+	+	+	+	+	+ ×	+ X	+	+	+	+	+	+	+ x	+	+	+	+	+	+	+	+	+	50 1 8 1
OVARY	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	÷	+	+	+	+	50
NERVOUS SYSTEM	+																		~						_	
BRAIN Carcinoma, Nos, Invasive	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	÷	+	+	+	+	50 1
MUSCULOSKELETAL SYSTEM	1							-												_						
BONE Carcinoma, Nos, invasive Osteosarcoma	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	50× 1
ALL OTHER SYSTEMS																					-					
MULTIPLE ORGANS NOS	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	Ņ	N	N	N	N	50×

TABLE A4. FEMALE RATS: TUMOR PATHOLOGY (CONTINUED) VEHICLE CONTROL

* ANIMALS NECROPSIED

+: TISSUE EXAMINED MICROSCOPICALLY -: REQUIRED TISSUE NUY EXAMINED MICROSCOPICALLY X: Tumor Incidence N: Recropsy, no Autolysis, no Microscopic examination S: Animal Mis-Seed

: NO TISSUE INFORMATION SUBMITTED C: NECROPSY, NO HISTOLOGY DUE TO PROTOCOL A: AUTOLYSIS N: ANIMAL MISSING B: NO NECROPSY PERFORMED

TABLE A4.

INDIVIDUAL ANIMAL TUMOR PATHOLOGY OF FEMALE RATS IN THE 2-YEAR STUDY OF GERANYL ACETATE

ANIMAL Number	2	2	047	0	0	2	0	0 4 9	0	0	0 3 4	4	0 4 3	0	0	0	0	0	0 4 1	0	0 3 0	0 3 2	0	0 0 7
WEEKS ON	ģ	ě	Ó	0	0	<u>P</u>	9	9	0	0 8	0	ğ	ğ	ģ	ğ	히	ö	ģ	1	1	1		1	1
RESPIRATORY SYSTEM	8	2	ž	Ğ	8	6	żi	اف	Ĩ.	3	8	źİ	4	źİ	81	8	8	8	ŏ	ž	ži	-ži	Ăİ.	- <u>i</u> i-
LUNGS AND BRONCHI Alveolar/bronchiolar carcinoma	+	+	+	+	+	+	٠	÷	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+
TRACHEA	-	+	-	+	+	+	+	-	+	÷	+	-	-	+	+	+	+	+	-	+	+	+	+	+
HEMATOPOIETIC SYSTEM															-									
BONE MARROW	+	+	_ <u>+</u>	_+_	<u>+</u>	+	+	+	+	÷	+	+	+	+	÷	+	+	+	+	+	+	+	+	+
SPLEEN	+	t_	+	+	+	+	+	+	+	+	+	•+	+	t	<u>+</u>	+	+	+	+	+	+	+	+	<u>t</u>
LYMPH NODES	+	+	+	+	+	+	+	+	+	<u>+</u>	+	+	+	+	+	+	+	+	+	+	_ 	+	+	+
THYMUS	+	+	+	+	ŧ	+	+	-	+	-	+	+	+	+	+	+	+	+	-	+	+	+	+	+
CIRCULATORY SYSTEM																	Ċ							
HEART	+	+	+	+	+	+	٠	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+
DIGESTIVE SYSTEM																								
SALIVARY GLAND	+	t	+	÷	÷.	+	+	-	+	+	+	-	÷	. +	+	+	+	+	+	+	+	+	+	+
	+	+	+	+	÷	+	+	+	÷	+	+	+	٠	÷	+	+	+	+	+	+	+	+	+	+
BILE DUCT	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+
	<u> </u>			+		+	•	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+
ACINAR-CELL CARCINOMA	<u> </u>						· · · ·														x			
ESOPHAGUS	+	+	. t	-	+	+	+	-	+	+	+	-	+	+	+	+	+	+	+	+	+	+	<u>+</u>	.+
STOMACH	+	+	+	<u>+</u>	+	+	+	+	+	+	+	+	+	<u>t</u>	-	+	+	+	+	+	+	+	+	+
SMALL INTESTINE	<u>+</u>	+	-	+	+	+	+	-	t_	t	+	+	+	÷	+	÷	ŧ	+	<u>+</u>	t.	+	+	ŧ	+
LARGE INTESTINE	<u>+</u>	+	-	+	+	+	t	-	<u>+</u>	+	+	-	+	+	.	. t	<u>t</u>	_ <u>t</u> _	<u>+</u>	+	-	+	+	+
KIDNEY	+	+	-	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+
URTNARY BLADDER	+	+	-	+	+	+	-	-	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+
ENDOCRINE SYSTEM				_																				
PITUITARY ADENOMA, NOS	+	-	+	+	+	+	+	* *	*	* ×	*	-	* x	+	+	+	* *	-	+	-	+	-	* X	-
ADRENAL	+	+	-	+	+	+	+	+	+	+	+	+	+	+	+	+.	+_	+	+	+	+	+	+	+
THYRDID Foliicular-cell Adenoma C-cell Adenoma C-cell Carcinoma	+	+	+	+	+	+	+	-	+	+	+	-	-	+	•	+	+	*	+	+	+	* ×	+ X	•
PARATHYROID	+	+	-	-	-	-	-	-	+	-	+	-	-	+	+	+	+	+	+	+	+	+	÷	+
REPRODUCTIVE SYSTEM	-										,	-												
MAMMARY GLAND Adenocarcinoma, Nos Firdadenoma	N	+	+	٠	+	+	+	+	+	+	+	+	+	+	+	+	+ X	+	+	+ x	+	+ x	*	+
PREPUTIAL/CLITORAL GLAND Adenocarcinoma, Nos Adenosquamous carcinoma	ŇX	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N _X
UTERUS Papillary Adenoma Endometrial Stromal Polyp	+	+	-	+	+	+	+	+	+ X	+	+	+	+	+	+	+	+	+ X	+	+ X	+	+	+	+
OVARY	+	+	-	+	+	+	+	+	+	+	+	+	+	+	+	+	+	-	+	+	+	÷	+	+
NERVOUS SYSTEM	+-																							
BRAIN	+	+	+	+	+	+	+	÷	+	+	+	-	÷	+	+	÷	+	+	+	+	+	+	+	+
SPECIAL SENSE ORGANS	+																							
EAR SQUAMOUS CELL PAPILLOMA NEURILEMOMA, MALIGNANT	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	+ x	N	N
ALL UINEK STSIEMS		N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N

LOW DOSE

-: REQURED TISSUE NOT EXAMINED MICROSCUPICALLY X: TUMOR INCIDENCE M: NECROPSY, NO AUTOLYSIS, NO MICROSCOPIC EXAMINATION S: ANIMAL MIS-SEXED

C: NECROPSY, NO HISTOLOGY A: AUTOLYSIS M: Animal Missing B: No Necropsy Performed

ANIMAL NUMBER	0	1	1	1	1	2	2	2	2	2	27	2	3	3	3	3	3	3	0 3 9	4	4	4	4	4	5	TOTAL
WEEKS ON STUDY		1	1		1	1	1	0	1	1	1	1	1	1	1	1	1	0	1	1	1	1	1	1	1	TUMORS
RESPIRATORY SYSTEM	4	<u>éi</u>	.61	41	أف	4	4	4	4	4	41	4	4	41	41	41	4	41	41	41	-41	41	-61	41	٩	
LUNGS AND BRONCHI Alveolar/Bronchiolar Carcinoma	+	+	+	+	+	+	+	* x	+	+	+	+	+	+	+	٠	+	+	+	÷	+	+	+	+	+	50
TRACHEA	+	+	+	+	+	+	+	+	-	+	+	+	÷	÷	÷	+	+	+	+	+	+	÷	+	+	+	43
HEMATOPOIETIC SYSTEM	+													-											-	
BONE MARROW	+	+	+	+	+	. <u>+</u>	+	+	+	+	+	+	+	+	+	+	+	+	+	+	t	+	+	+	+	50
SPLEEN	+	+	+_	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	_50
LYMPH NODES	1_+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	50
THYMUS	+	-	+	+	+	+	+	+	-	+	+	-	+	+	÷	+	+	+	+	+	+	÷	+	-	+	43
CIRCULATORY SYSTEM	+																									
HEART	+	+	+	+	+	+	+	+	+	+	+	÷	+	÷	÷	+	+	-	+	+	+	+	+	+	+	49
DIGESTIVE SYSTEM	-																								-	
SALIVARY GLAND	+	+	+	+	<u>+</u>	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	48
LIVER MONOCYTIC LEUKEMIA	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	*	+	+	+	+	+	50 1
BILE DUCT	+	+	+	<u>+</u>	+	+	+	+	+	ŧ.	+	+	+	+	+	+	+	÷	+	+	+ .	+	+	+	+	50
PANCREAS Acinar~Cell Carcinoma	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	49 1
ESOPHAGUS	+	+	+	+_	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	t_	+	-	-	+	+	45
STOMACH	+	+	+	+	±_	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+_	+	+	+	+	+	49
SMALL INTESTINE	+	+	+	+	+	+	+	+	+	+	t	+	+	+	+	+	. +	+	+	+	+	+	+	+_	+	48
LARGE INTESTINE	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	÷	+	+	+	46
URINARY SYSTEM	+									_															_	
KIDNEY	+	+	+	+	+	+.	+	+	+	+	<u>+</u>	+	+	+	+	+	+	+	<u>+</u>	+	+	+	+	+	t	49
URINARY BLADDER	+	÷	+	+	+	+	+	+	+	+	+	+	+	+	+	÷	+	+	+	+	+	+	+	+	+	47
ENDOCRINE SYSTEM	+	~																								
PITUITARY Adenoma, Nos	+	-	+	+	+	+	, ż	+	+	+	+	* ×	*	+	+	* X	+	*	*	+	*	*	+	+	+	43 16
ADRENAL	+	+	+	+	t.	+	+	+	+	+	+	.+	+	+	+.	t	+	t	+	+	+	+	+	+	+	49
THYROID Follicular-cell Adenoma C-cell Adenoma	+	+	+	+	+	+	+	+	-	+	+	+	+	+	+ X	+	+	+	+	+	+	+	+	+	+ X	46 2 3
C-CELL CARCINOMA		~—												<u> X </u>											_	2
PARATHYROID	+	+	+	+	+	+	-	+	~	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	39
REPRODUCTIVE SYSTEM																										
MAMMARY GLAND Adenocarcinoma, NOS Fibroadenoma	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+ X	+	+ X	+	+ .x.	+	+	+	50× 1 7
PREPUTIAL/CLITORAL GLAND Adenocarcinoma, nos Adenosquamous carcinoma	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	50× 1
UTERUS PAPILLARY ADENGMA Endometrial stromal polyp	+	+ X	+	+	+	+	+	+	+	+ X	+	+	+	+	+	+	+	+	**	+	+	+	+	+ X_	+ _X	49 1 8
OVARY	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	÷	+	÷	+	÷	+	+	+	48
NERVOUS SYSTEM	+	_												_							_					
BRAIN	+	÷	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	49
SPECIAL SENSE ORGANS	-	_		_		-			+													~	•			
EAR SQUAMOUS CELL PAPILLOMA NEURILEMOMA, MALIGNANT	N	N	+	N	* ×	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	50× 1 1
ALL OTHER SYSTEMS MULTIPLE ORGANS NOS	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	Ņ	N	N	N	N	N	N	50×
MUNUCYTIC LEUKEMIA	1							_											<u> </u>			_				<u> </u>

TABLE A4. FEMALE RATS: TUMOR PATHOLOGY (CONTINUED) LOW DOSE

* ANIMALS NECROPSIED

+: TISSUE EXAMINED MICROSCOPICALLY -: REQUIRED TISSUE NOT EXAMINED MICROSCOPICALLY X: TUMDR INCIDENCE N: NECROPSY, NO AUTOLYSIS, NO MICROSCOPIC EXAMINATION S: ANIMA MIS-SEXED

: NO TISSUE INFORMATION SUBMITTED C: Necropsy, No Histology due to Protocol A: Autolysis M: Anima: Missing B: No Necropsy Performed

TABLE A4.

INDIVIDUAL ANIMAL TUMOR PATHOLOGY OF FEMALE RATS IN THE 2-YEAR **STUDY OF GERANYL ACETATE**

HIGH DOSE

TRANT											07		AT	01	71		07	01	01	01	01	01	01	01	ā,
ANIMAL Number	0 0	4	0 4	1	24	i	5	4	4	1	22	1	į	1	2	4	25	0	0	0	0	0	0 9	1	í
WEEKS ON Study	0	0 5	5	6	6	6	8	8	8	9	9	9	9	9	9	1	1	1	1	0	0	0	0	0	ŗ
INTEGUMENTARY SYSTEM	-21	ш	- 41	2	3	6	0	3	91	_51	51.	6.	6	6	6	01	21	91	41	4	4	91	4	91	1
SUBCUTANEOUS TISSUE TRICHOEPITHELIOMA	+	+	+	+	+	+	+	+	+	+	٠	+	+	+	N	+	+	+	+	+	+	+	+	+	+.
RESPIRATORY SYSTEM								-																	
LUNGS AND BRONCHI	+	+	+	+	+		+	+	+	+		+	+	+	+	+	<u>+</u>	+	+	+	+	+	+	+	F
TRACHEA	+	+	+	-	+	+	+	+	+	+	-	+	-	+	-	+	+	+	+	+	+	-	+	+	•
HEMATOPOIETIC SYSTEM																									
BONE MARROW	+	+	.	+	+	+	+	+	+	+	+		+	+	+	. <u>+</u>	<u>+</u>	+	+	+	+	<u>+</u>	+	•	<u>+</u>
SPLEEN	+	<i>.</i>	+	+	+	+	+	-		+	. t	+	+	+	+	+	- -	+	+	+	+	+	+	•	<u>+</u>
LYMPH NODES	+	. +	+	+	+	+	+	+	<u>+</u>	+	ŧ.,	. .	+	+	+	+	. <u>+</u> .	+	+	+	+	+	. <u>+</u>	<u>+</u>	<u>*</u>
THYMUS	+	-	+	+	+	+	+	+	-	-	-	+	+	+	-	-	+	+	+	+	-	+	+	+	•
CIRCULATORY SYSTEM																									
HEART	1 *	+	+	+	+	+	+	+	+	+	-	+	+	+	+	+	+	+	+	+	+	+	+	+ ··	<u>'</u>
DIGESTIVE SYSTEM																									
SALIVARY GLAND	<u>+</u>	+	+	+	+	+	+	+	+	+	-	+	+	+	+	+	+	+	+	+	+	+	+	<u>+</u> :	ł
LIVER Hepatocellular carcinoma	+	+	+	+	+	+	+	+	-	+	+	+	+	+	+	*	+	+	+	+	+	+	+	+	•
BILE DUCT	+	+	+	.+	+	+	+	+	-	+	+	+	+	÷	+	<u>+</u>	+	+	+	+	+	<u>+</u>	+	+	+
PANCREAS ACINAR-CELL ADENOMA	+	+	+	+	+	+	+	-	-	+	+	+	*	+	+	+	-	+	+	+	+	+	+	+	+
ESOPHAGUS	<u>+</u>	+	+	+	+	+	+	.t.	+	+	-	+	<u>+</u>	+	+	t	+	+	+	+	-	. +	. .	+	±
STOMACH Squamous cell papilloma	+	+	+	+	+	+	+	-	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+
SMALL INTESTINE	<u>+</u>	+	+	+	+	+	+	-	-	÷.	+	+	+	+	+	+		+	+	+	+	+	+	+	t
LARGE INTESTINE	+	+	+	+	+	+	+	-	+	+	+	+	+	+	+	÷	+	+	+	+	+	+	+	+	+
URINARY SYSTEM	-																								Ī
KIDNEY			_+	+	+	+	ŧ.	+	-	+	+	+	<u>+</u>	+	+	÷	+	<u>.</u>	+	+	+	+	+	+	+
URINARY BLADDER	+	+	+	+	+	+	+	-	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+
ENDOCRINE SYSTEM																									
PITUITARY Adenoma, Nos	+	-	+	+	+	-	+	+	+	+	*	+	+	+	+	+	+	+	+	*	+	*	+	+	×
ADRENAL Cortical Adenoma Pheochromocytoma	+	+	+	•.	+	+	+	+	-	•	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+
THYROID Follicular-cell carcinoma C-cell Adenoma	+	+	+	+	+	+	+	+	+	+	-	•	+	+	+	+	+	+	+ x	+	+	+	+	+	+
PARATHYROID	+	-	+	+	+	+	+	-	+	+	-	+	-	+	+	+	+	-	+	+	+	+	+	+	-
REPRODUCTIVE SYSTEM	+							_														_			
MAMMARY GLAND FIBROADENOMA	+	+	+	+	+	N	+	'N	N	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+
UTERUS Adendcarcinoma, nos Endometrial stromal polyp	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+ x	+ X	+	+	+	+	+	+	+
DVARY	+	+	+	+	+	+	+	-	-	+	+	+	+	+	+	+	+	+	+	+	+	÷	÷	+	+
NERVOUS SYSTEM	+									_															-
BRAIN Glioma, Nos	+	* x	٠	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	٠	+	+	+
ALL OTHER SYSTEMS															. <u> </u>										
MULTIPLE ORGANS NOS Monocytic Leukemia	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	X
+: TISSUE EXAMINED MICROSCO -: REQUIRED TISSUE NOT EXAM X: TUMOR INCIDENCE N: HECROPSY. NO AUTOLYSIS, S: ANIMAL MIS-SEXED	PICA Ined No M	MIC MIC	CROS	SCOP OPIC	ICA	ALLY (AMI	NAT	ION	I		C: A: M: B:	NO NE AU ND	TI CRD TOL IMA NE	SSU PSY YSI L M CRO	E I , N ISS PSY	NFO O H ING PE	RMA IST RF0	TIO OLO RME	N S GY D	UBM DUE	111 T0	ED PR	070	COL	

ANIMAL NUMBER		0 1 5	0	0 2	0 2 3	0 2 6	0 2 7	0 2 8	0 2 9	030	0 3 1	0 3 2	0 3 3	0 3 4	0 3 5	0 3 6	0 3 7	0 3 8	0 3 9	0 4 0	0 4 3	0 4 5	0 4 6	047	0 4 9	TOTAL
WEEKS ON STUDY	0	1	104	1	0	1	04	0	1 0 4	1 0 4	1 0 4	1	104	104	104	1	1 0 4	104	104	104	0	1 0 4	1	1 0 4	10	TISSUES
INTEGUMENTARY SYSTEM	T																									
SUBCUTANEOUS TISSUE TRICHDEPITHELIOMA	+	+	N	+	+	+	+	+	+	+	+	* X	+	+	+	+	+	+	+	N	+	+	+	+	+	50× 1
RESPIRATORY SYSTEM	1															_										
LUNGS AND BRONCHI	-	+	+	+	+	+	+	+	+	+	+	+	<u>+</u>	+	+	+	+	+	+	. <u>t</u>	+	<u>+</u>	+	+	-+	49
TRACHEA	+	+	+	+	+	+	+	-	-	-	+	+	+	+	+	-	ŧ	+	+	+	+	+	+	+	+	41
HEMATOPOIETIC SYSTEM		_																								
BONE MARROW	<u> </u> +	+	+	. <u>+</u>	+	.t	+	+	+	+	+	+	<u>+</u>	+	<u>+</u>	+	<u>+</u>	+	+	+	+	+	+	+	+	50
SPLEEN	+	+	+	+	+	+	+	+	+	+	<u>+</u>	+	+	+	+	<u>+</u>	+	+	+	+	+	<u>+</u>	+	+	-+	<u> </u>
LYMPH NODES	<u> </u> +-	+	+_	+	+	+	+	<u>+</u>	+	<u>+</u>	+	+	+	<u>+</u>	+	+	<u>+</u>	+	<u>+</u>	+	+	+	.+	+	+	50
THYMUS	+	+	+	+	+	-	+	-	+	+	+	+	-	-	-	+	+	-	-	+	+	+	+	+	+	36
CIRCULATORY SYSTEM	\square																									
HEART	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	49
DIGESTIVE SYSTEM	\square																									
SALIVARY GLAND	+	.+	+	<u>+</u>	+	+	+		+	+	+	,	+	+	+	+	+	+	+	+	+	+	+	+	+	48
LIVER HEPATOCELLULAR CARCINOMA	<u> </u> +	+	+	+	+	<u>*</u> _	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	1_
BILE DUCT	+	+	+	+	+	+	+	+	+	ŧ.	+	+	+	+	+	+	<u>+</u>	+	+	+	+	+	+	+	+	49
PANCREAS ACINAR-CELL ADENOMA	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	47
ESOPHAGUS	+	+	+	+	+	-	<u>+</u>	+	<u>+</u>	+	t	+	+	+	+	<u>+</u>	+	<u>+</u>	+	+	+	<u>+</u>	+	+	_+	47
STOMACH Squamous cell papilloma	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	<u>*</u>	* x	+	+	+	49 2
SMALL INTESTINE	+	+	+	+	.	+	<u>+</u>	+	+	+	+	+	+	+	+	+	<u>+</u>	+	t_	+	+	+	+		+	47
LARGE INTESTINE	+	+	+	+	+	+	÷	+	÷	+	+	+	+	÷	+	÷	÷	+	+	+	٠	+	+	+	+	49
URINARY SYSTEM	+		-							-				-			_		_						-+	
KIDNEY	1.	+	. †	+	+	+	+	+	+	+	+	<u>+</u>	+	<u>+</u>	+	+	+	ŧ	t	+	<u>+</u>	+	+	<u>+</u>	+	49
URINARY BLADDER	+	÷	+	÷	+	+	+	+	+	+	+	+	+	+	+	÷	+	+	ŧ	+	+	+	+	+	+	49
ENDOCRINE SYSTEM	+							_																	-	
PITUITARY Adenoma, nos	+	+	+	+	ż	+	+	+	*	+	+	+	+	+	+	+	* x	+	+	+	*	*	+	+	+	48 9
ADRENAL Cortical Adenoma Pheochromocytoma	+	+	+	+	+	+	+	+	+	+	+	+	+	+ x	+	+	*	+	+	+	+	* ×	+	+	+	49 1 2
THYROID Follicular-cell carcinoma C-cell Adenoma	+	+	+	+	+	+	+	+	+	+	+ X	+	* *	+	+ X	+	+	+	+ X	+ X	٠	+	+	*	+	49 2 5
PARATHYROID	+	+	+	+	-	-	+	-	-	+	+	+	+	+	+	+	+	+	+	+	-	+	+	-	+	38
REPRODUCTIVE SYSTEM	+																		-							<u> </u>
MAMMARY GLAND Fibroadenoma	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	ţ.	+	+	+	+	+	+	+	+	50×
UTERUS ADENOCARCINOMA, NOS	+	+	+	+	+	+	٠	+	+	+	÷	+	+	+	*	+	+	+	+	+	÷	+	+	+	+	50 2
ENDUMEIRIAL SIKUMAL PULIP	-		_ <u>A</u> _			<u></u>			<u>^</u>		<u>^</u>		<u>^</u>		<u>^</u>					,	<u> </u>		<u>A</u>	-		<u> </u>
	Ļ	<u> </u>	*		+		<u> </u>	+	-	*	<u> </u>	-	-	*	-		-	-				<u> </u>	•		_	
BRAIN BRAIN GITOMA, NDS	+	÷	+	÷	+	+	+	÷	+	+	+	+	+	÷	+	+	÷	÷	ŧ	÷	÷	+	÷	÷	+	50 1
ALL OTHER SYSTEMS	+																					·				
MULTIPLE ORGANS NOS MONOCYTIC LEUKEMIA	N	N	N	N	N	N	N	N	N	N	N	N X	N	N	N	N	N _	N X	N X	NX	N	N	N	N	N	50×

TABLE A4. FEMALE RATS: TUMOR PATHOLOGY (CONTINUED) HIGH DOSE

* ANIMALS NECROPSIED

+: TISSUE EXAMINED MICROSCOPICALLY -: Required Tissue NOT Examined Microscopically X: Tumor Incidence N: MecRopsy, No Autolysis, No Microscopic Examination S: Animal Miss-Seved

: NO TISSUE INFORMATION SUBMITTED C: NECROPSY, NO HISTOLOGY DUE TO PROTOCOL A: AUTOLYSIS M: ANIMAL MISSING B: NO NECROPSY PERFORMED

APPENDIX B

SUMMARY OF THE INCIDENCE OF NEOPLASMS IN MICE ADMINISTERED GERANYL ACETATE IN CORN OIL BY GAVAGE

TABLE B1.

	VEHICLE CONTROL	LOW DOSE	HIGH DOSE
ANIMALS INITIALLY IN STUDY ANIMALS NECROPSIED ANIMALS EXAMINED HISTOPATHOLOGICALLY	50 50 50	50 50 50	50 50 50
INTEGUMENTARY SYSTEM			
*SKIN SQUAMOUS CELL PAPILLOMA	(50)	(50) 1 (2%)	(50)
*SUBCUT TISSUE SARCOMA, NOS FIBROMA	(50) 1 (2%) 1 (2%) 1 (2%)	(50)	(50)
RESPIRATORY SYSTEM			
#LUNG HEPATOCELLULAR CARCINOMA, METAST ALVEOLAR/BRONCHIOLAR ADENOMA ALVEOLAR/BRONCHIOLAR CARCINOMA	(50) 2 (4%) 6 (12%)	(49) 1 (2%) 5 (10%) 1 (2%)	(50) 3 (6%) 2 (4%) 1 (2%)
HEMATOPOIETIC SYSTEM			
<pre>*MULTIPLE ORGANS MALIG.LYMPHOMA, LYMPHOCYTIC TYPE MALIGNANT LYMPHOMA, MIXED TYPE</pre>	(50) 4 (8%) 3 (6%)	(50) 1 (2%)	(50) 1 (2%)
#MESENTERIC L. NODE HEPATOCELLULAR CARCINOMA, METAST	(50)	(48) 1 (2%)	(50)
<pre>#PEYERS PATCH MALIG.LYMPHOMA, LYMPHOCYTIC TYPE</pre>	(48)	(49) 1 (2%)	(47)
CIRCULATORY SYSTEM			
*MULTIPLE ORGANS HEMANGIOSARCOMA	(50)	(50)	(50) <u>1 (2%)</u>

SUMMARY OF THE INCIDENCE OF NEOPLASMS IN MALE MICE ADMINISTERED GERANYL ACETATE IN CORN OIL BY GAVAGE

TABLE B1. MALE MICE: NEOPLASMS (CONTINUED)

	VEHICLE Control	LOW DOSE	HIGH DOSE
*SUBCUT TISSUE Hemangiosarcoma	(50) 1 (2%)	(50)	(50)
#SPLEEN Hemangiosarcoma	(50) 1 (2%)	(50) 1 (2%)	(49)
#LIVER Hemangiosarcoma	(50)	(50) 2 (4%)	(50)
#URINARY BLADDER Hemangioma	(49) 1 (2%)	(49)	(50)
DIGESTIVE SYSTEM			
*TONGUE Squamous cell papilloma	(50) 1 (2%)	(50)	(50)
<pre>#LIVER HEPATOCELLULAR ADENOMA HEPATOCELLULAR CARCINOMA</pre>	(50) 3 (6%) 11 (22%)	(50) 9 (18%) 8 (16%)	(50) 6 (12%) 9 (18%)
#FORESTOMACH Squamous cell papilloma	(50)	(50) 1 (2%)	(50) 1 (2%)
#DUODENUM ADENOCARCINOMA, NOS	(48) 1 (2%)	(49)	(47) 1 (2%)
#JEJUNUM ADENOCARCINOMA, NOS	(48)	(49) 1 (2%)	(47)
#COLON ADENOCARCINOMA, NOS	(50)	(49) 1 (2%)	(47)
URINARY SYSTEM			
NONE			~ + * * ~ ~ ~ ~ * * *
ENDOCRINE SYSTEM			
#ADRENAL CORTICAL ADENOMA	(49) 1 (2%)	(48)	(50)

	VEHICLE Control	LOW DOSE	HIGH DOSE
РНЕОСНКОМОСУТОМА		2 (4%)	
#THYROID FOLLICULAR-CELL ADENOMA FOLLICULAR-CELL CARCINOMA	(49) 4 (8%)	(47) 1 (2%) 2 (4%)	(50) 1 (2%)
REPRODUCTIVE SYSTEM			
NERVOUS SYSTEM None			
SPECIAL SENSE ORGANS			
*HARDERIAN GLAND Adenoma, Nos	(50) 3 (6%)	(50) 6 (12%)	(50)
MUSCULOSKELETAL SYSTEM			
*MUSCLE OF BACK NEURILEMOMA	(50)	(50) 1 (2%)	(50)
BODY CAVITIES			
*MESENTERY HEPATOCELLULAR CARCINOMA, INVASI	(50) 1 (2%)	(50)	(50)
ALL OTHER SYSTEMS			
NONE			
ANIMAL DISPOSITION SUMMARY			
ANIMALS INITIALLY IN STUDY NATURAL DEATH MORIBUND SACRIFICE TERMINAL SACRIFICE ACCIDENTALLY KILLED, NOS	50 8 5 31 6	50 12 3 32 3	50 13 1 36

TABLE B1. MALE MICE: NEOPLASMS (CONTINUED)

TABLE B1. MALE MICE: NEOPLASMS ((CONTINUED)
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			· · · · · · · · · · · · · · · · · · ·
	VEHICLE Control	LOW DOSE	HIGH DOSE
TUMOR SUMMARY			
TOTAL ANIMALS WITH PRIMARY TUMORS*	33	33	21
TOTAL PRIMARY TUMORS	43	46	23
TOTAL ANIMALS WITH BENIGN TUMORS	17	22	1 0
TOTAL BENIGN TUMORS	20	26	1 0
TOTAL ANIMALS WITH MALIGNANT TUMORS	21	18	13
TOTAL MALIGNANT TUMORS	23	20	13
TOTAL ANIMALS WITH SECONDARY TUMORS	₿ 3	1	3
TOTAL SECONDARY TUMORS	3	2	3
<pre>@ PRIMARY TUMORS: ALL TUMORS EXCEPT SE</pre>	CONDARY TU	MORS	ADJACENT ORGAN
# SECONDARY TUMORS: METASTATIC TUMORS	OR TUMORS	Invasive into an A	

TABLE B2.

	CONTROL	LOW DOSE	HIGH DOSE
ANIMALS INITIALLY IN STUDY ANIMALS NECROPSIED ANIMALS EXAMINED HISTOPATHOLOGICALLY	50 50 50	50 50 50	50 50 50
INTEGUMENTARY SYSTEM			
*SKIN SQUAMOUS CELL PAPILLOMA	(50) 1 (2%)	(50)	(50)
*SUBCUT TISSUE SARCOMA, NOS	(50)	(50) 1 (2%)	(50)
RESPIRATORY SYSTEM			
#LUNG	(50)	(50)	(50)
ALVEOLAR/BRONCHIOLAR ADENOMA	1 (2%)	1 (2%)	1 (2%)
OSTEOSARCOMA, METASTATIC	1 (2%)		
HEMATOPOIETIC SYSTEM			
*MULTIPLE ORGANS	(50)	(50)	(50)
MALIG.LYMPHOMA, LYMPHOCYTIC TYPE	2(4%)	3 (6%)	2 (4%)
MALIGNANT LYMPHOMA, MIXED TYPE	2 (44)	2 (4%)	
#LIVER	(50)	(50)	(50)
MALIG.LYMPHOMA, HISTIOCTIC TYPE MALIGNANT LYMPHOMA, MIXED TYPE	1 (24)	1 (2%)	
CIRCULATORY SYSTEM			
#SPLEEN HEMANGIDSARCOMA	(50)	(50) 1 (2%)	(46)

SUMMARY OF THE INCIDENCE OF NEOPLASMS IN FEMALE MICE ADMINISTERED GERANYL ACETATE IN CORN OIL BY GAVAGE

	VEHICLE Control	LOW DOSE	HIGH DOSE
*MESENTERY HEMANGIOMA	(50) 1 (2%)	(50)	(50)
DIGESTIVE SYSTEM			
#LIVER HEPATOCELLULAR ADENOMA HEPATOCELLULAR CARCINOMA	(50) 2 (4%) 3 (6%)	(50) 2 (4%) 2 (4%)	(50) 1 (2%) 1 (2%)
#STOMACH SQUAMOUS CELL CARCINOMA	(50)	(50) 1 (2%)	(49)
#GASTRIC MUCOSA Adenomatous Polyp, Nos	(50) 1 (2%)	(50)	(49)
#FORESTOMACH SQUAMOUS CELL PAPILLOMA	(50)	(50) 1 (2%)	(49) 1 (2%)
URINARY SYSTEM			
NONE			
ENDOCRINE SYSTEM			
<pre>#PITUITARY ADENOMA, NOS</pre>	(44) 2 (5%)	(43) 2 (5%)	(39)
#ADRENAL CORTICAL ADENOMA PHEOCHROMOCYTOMA	(50) 1 (2%) 2 (4%)	(50)	(50)
#THYROID Follicular-cell Adenoma	(50) 5 (10%)	(48) 3 (6%)	(49)
REPRODUCTIVE SYSTEM			
*MAMMARY GLAND ADENOCARCINOMA, NOS	(50) 2 (4%)	(50) 2 (4%)	(50)
*CLITORAL GLAND ADFNOMA, NOS	(50)	(50) 1 (2%)	(50)

TABLE B2. FEMALE MICE: NEOPLASMS (CONTINUED)

	VEHICLE Control	LOW DOSE	HIGH DOSE
#UTERUS ENDOMETRIAL STROMAL POLYP ENDOMETRIAL STROMAL SARCOMA	(50) 1 (2%)	(50) 2 (4%)	(49)
NERVOUS SYSTEM NONE			
SPECIAL SENSE ORGANS *HARDERIAN GLAND ADENOMA, NOS	(50) 1 (2%)	(50)	(50)
MUSCULOSKELETAL SYSTEM NONE			
BODY CAVITIES None			
ALL OTHER SYSTEMS *MULTIPLE ORGANS NEOPLASM, NOS SQUAMOUS CELL CARCINOMA, METASTA ENDOMETRIAL STROMAL SARCOMA, MET HEAD OSTEOSARCOMA	(50) 1 (2%) 1 (2%) 1 (2%)	(50) 1 (2%)	(50)
ANIMAL DISPOSITION SUMMARY ANIMALS INITIALLY IN STUDY NATURAL DEATH MORIBUND SACRIFICE TERMINAL SACRIFICE ACCIDENTALLY KILLED, NOS	50 17 5 28	50 24 8 15 3	50 24 13 13

TABLE B2. FEMALE MICE: NEOPLASMS (CONTINUED)

		VEHICLE Control	LOW DOSE	HIGH DOSE
тι	JMOR SUMMARY			
	TOTAL ANIMALS WITH PRIMARY TUMORS* Total primary tumors	20 31	20 25	6 7
	TOTAL ANIMALS WITH BENIGN TUMORS TOTAL BENIGN TUMORS	14 17	10 11	3 3
	TOTAL ANIMALS WITH MALIGNANT TUMORS TOTAL MALIGNANT TUMORS	9 1 3	13 14	3 4
	TOTAL ANIMALS WITH SECONDARY TUMORS# TOTAL SECONDARY TUMORS	3 3	1 1	
	TOTAL ANIMALS WITH TUMORS UNCERTAIN- BENIGN OR MALIGNANT TOTAL UNCERTAIN TUMORS	1		
¥ #	PRIMARY TUMORS: ALL TUMORS EXCEPT SE SECONDARY TUMORS: METASTATIC TUMORS	CONDARY TU OR TUMORS	JMORS Invasive into an	ADJACENT ORGAN

TABLE B2. FEMALE MICE: NEOPLASMS (CONTINUED)

TABLE B3.

INDIVIDUAL ANIMAL TUMOR PATHOLOGY OF MALE MICE IN THE 2-YEAR **STUDY OF GERANYL ACETATE**

VEHICLE CONTROL

																									•••
ANIMAL NUMBER	ANIMAL 0																								
WEEKS ON STUDY	6	03	0	3	0	6	9	9	8	0	0 8	8	힑	<u>8</u> 91	0 9	9	9	9	9	1	1	1	1	1	Ť
INTEGUMENTARY SYSTEM	Ó.	81	8	8	اق	9	11	71	il	2	61	61	<u>0 i</u>	11	1	5	6	8	9	41	41	41	41	4	4
SUBCUTANEOUS TISSUE SARCOMA, NOS FIBROMA FIBROSARCOMA HEMANGIOSARCOMA	+	+	٠	+	+	+	+	+	+	* ×	N	+	+	+ x	+	+	+	+	+	+	+	+	+	٠	+
RESPIRATORY SYSTEM				<i>a</i> .															-						-
LUNGS AND BRONCHI Hepatocellular carcinoma, metas Alveolar/Bronchiolar Adenoma	+	+	+	+	+	+	×	* ×	+ X	+	+	+	+ X	+	+	+	+	+	+	+	+	+	+	+	+
TRACHEA	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	÷	+	ŧ
HEMATOPOIETIC SYSTEM	<u> </u>																								-
BONE MARROW	+	+	+	+	.+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	<u>+</u>	+	+	±
SPLEEN Hemangiosarcoma	+	+	+	+	+	* x	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+
LYMPH NODES	+	+	+	. <u>+</u>	+	+	+	+	+	÷	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+
THYMUS	+	+	+	+	+	+	+	+	÷	÷	+	+	+	-	+	-	+	+	-	+	+	+	+	+	+
CIRCULATORY SYSTEM																_						-		_	~
HEART	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+
DIGESTIVE SYSTEM							_																		~
ORAL CAVITY Squamous cell papilloma	N 	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N
SALIVARY GLAND	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+-	+	+	+	+	+	<u>+</u>	*
LIVER HEPATOCELLULAR ADENOMA HEPATOCELLULAR CARCINOMA	<u>+</u>	+	+	+	+	+	+ 	+ x	+	+	+ x	+ X	+	+	+	+	+ x	+	+ X.	+ x	+	+	+	+	+
BILE DUCT	+	+	_t_	+	+	+	+	+	+	+	+	+	+	+	+	ŧ.	+	+	<u>+</u>	+	+	+	÷	+	<u>+</u>
GALLBLADDER & COMMON BILE DUCT	<u>+</u>	+	N	+	+	+	<u>N</u> _	+	+	+	N	N	+	+	N	+	N	+	+	+	+	+	+	+	+
PANCREAS	<u>+</u> -	+	+	+	+	+	+	_ <u>+</u>	+	+	*	+	+	+	.+	+	. <u>+</u>	+	+	+	+	+	+	+	+
ESOPHAGUS	<u>+</u>	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	
STOMACH	+	+	+	+	+	+	+	+	+	+	_ 	+	+	+	+	+	<u>+</u>	+	<u>+</u>	+	+	*	+	+	<u> </u>
SMALL INTESTINE Adenocarcinoma, nos	+	+	+	+	+	-	-	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+
	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	•	*	<u> </u>	_
URINARY SYSTEM	.																								
VRINARY BLADDER HEMANGIAMA	-	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+
ENDOCRINE SYSTEM		_																							~
PITUITARY	+	+	+	+	+	-	+	+	+	+	+	+	+	-	+	+	+	+		+	+	+	+	+	+
ADRENAL	i	+	+	+	+	+	+	+	+	+	+	+	+	+	÷	+	-	+	+	+	+	+	+	+	+
CORTICAL ADENOMA		÷																			<u>×</u>				-
THYROID Follicular-Cell Adenoma	+	+		+	+	+	+	+	+	+	+	÷	+	+	+	+	+	+	+	<u>+</u>	+	+	+	<u>+</u>	-
PARATHYROID	-	-	+	+	+	+	+	-	-	+	-	+	+	-	-	+	-	+	+	-	-	-	+	-	-
REPRODUCTIVE SYSTEM			_																						-
MAMMARY GLAND	<u>N</u> .	N.	N	N	<u>N</u> _	_N_	<u> </u>	N	N	<u>_N</u>	N	_ <u>N_</u>	N	N		<u>N</u>	N	_N_	N	<u>N</u>	_N_	N	N	<u>N</u> _	-1
TESTIS	+	+	+	+	+	+	+	+		+	+.	<u>+</u>	+	<u>+</u>	+	+	+	_ +	+	<u>+</u>	+	+	+	+	4
NERVOUS SYSTEM	+-	+	_ <u>+</u>		+	<u>+</u>	+ -	+			+	*	+	+	<u>+</u>	-	+		+	<u>+</u>		+	-	-	-1
BRAIN	+	+	+	+	+	÷	+	+	+	+	÷	+	+	+	+	+	+	+	+	+	+	+	+	+	4
SPECIAL SENSE ORGANS	<u>† </u>																								
HARDERIAN GLAND Adenoma, Nos	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	M
BODY CAVITIES	—																								
MESENTERY HEPATOCELLULAR CARCINOMA, INVAS	N I	N	N	N	N	N	N	N	N	N	N	×	N	N	N	N	N	N	N	N	N	N	N	N	, ,
ALL UTHER STSTEMS MULTIPLE ORGANS NOS MALIG.LYMPHOMA, LYMPHOCYTIC TYP MALIGNANT LYMPHOMA, MIXED TYPE	N	N	N	N	N	N	N	N	N X	N	N	N	N X	N	N	XX	N	N	N	N	N	N	N	N	۸
+: TISSUE EXAMINED MICROSCOP -: REQUIRED TISSUE NOT EXAMI X: Tumor incidence N: Necropsy, no Autolysis, K S: Animal Mis-Sexed	ICAL NED 10 M?	MI	CRO OSC	SCOI OPIC	PIC/ C E)	ALLY KAMI	Y INAT	101	•		с: А: М: В:	NO NE Au An No	CRD TOL IMA NE	SSU PSY YSI L P CR0	E I S IISS PSY	NFO ID H ING PE	RMA IST		IGY IGY	DUE	1177 5 TO	ED PR	:0TC	COL	

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ANIMAL	0	0	01	01	01	01	01	0	0	0	01	01	01	01	0	01	0	01	0	01	01	01	01	01	01	<u></u> ,
NUMBER	0	9	11	2	4	8	21	2	23	2	25	2	3 0	3	6	3	3	3	6	4	4	4	4	4	4	TOTAL
MEEKS ON Study	0	0	0	0	0	0	2	2			0	2	3	2	0	0		6	2	2	2	0	0	6		TUMORS
INTEGUMENTARY SYSTEM	4	4	4	41	41	91	51	51	51	51	51	2	51	-11-	51	-14	21.	_ند_	21	51.	21	21	-21	- 14	귀	
SUBCUTANEOUS TISSUE Sarcoma, Nos Fibroma Fibrosarcoma Hemangiosarcoma	+	+	+	+ x	+	+	+	+	+	+	+	+	+	+	+	+	+	+	÷	+ X	+	•	+	+	+	50× 1 1 1
RESPIRATORY SYSTEM						-																			┥	
LUNGS AND BRONCHI Hepatocellular carcinoma, metas Alveolar/Bronchiolar Adenoma	+	+	+ x	+	+	+	+	+	+	+	+	+ x	+	+	+	+	+	+ x	+ x	+	+	+	+	+	+	50 2 6
TRACHEA	+	+	+	+	+	+	+	÷	+	+	+	+	+	+	-	+	÷	+	+	+	+	+	+	+	+	49
HEMATOPOIETIC SYSTEM																									+	
BONE MARROW	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	t	50
SPLEEN HEMANGIOSARCOMA	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	50 1
LYMPH NODES	+	+		<u>+</u>	.	t	+	+	+	+	+	t.	+	÷	+	+	+	+	+	+	+	+	+	t	+	50
THYMUS	+	+	+	+	+	+	+	+	+	+	-	+	-	-	+	+	+	+	+	+	+	+	+	+	-	43
CIRCULATORY SYSTEM																			-						+	
HEART	+	+	+	+	+	+	+	+	÷	+	+	+	+	+	+	+	+	+	÷	+	+	+	+	+	+	50
DIGESTIVE SYSTEM																										
GRAL CAVITY Squamous cell papilloma	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N X	N	N	N	N	N	N	N	N	50× 1
SALIVARY GLAND	<u>+</u>	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	50
LIVER HEPATOCELLULAR ADENOMA HEPATOCELLULAR CARCINOMA	+	+	+	+	+	+ x	+	+	+	*	+	*	+	+	+	+ x	+	+	+ x	+	÷××	+	+	+	+	50 3 11
BILE DUCT	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	50
GALLBLADDER & COMMON BILE DUCT	+	+	+	+	+	+	+	+	+	+	+	+	+	N	+	+	+	N	+	+	+	+	+	+	+	50×
PANCREAS	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	50
ESOPHAGUS	+	+	+	+	+	+	+	+	+	+	+	+	+	+	-	+	+	+	+	+	+	+	+	+	+	49
STDMACH	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	÷	+	+	+	+	+	+	+	-	50
SMALL INTESTINE ADENOCARCINOMA, NOS	* *	+	+	+	+	+	+	+	+	÷	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	48
LARGE INTESTINE	+	÷	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	50
URINARY SYSTEM																									-+	
KIDNEY	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	50
URINARY BLADDER Hemangioma	+	+	+	+	+	+	+	* X	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	49 ₁
ENDOCRINE SYSTEM																									-+	
PITUITARY	+	+	+	+	+	-	+	+	-	+	+	+	+	+	-	+	+	+	+	+	+	+	+	+	+	44
ADRENAL Cortical Adenoma.	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	÷	+	+	49
THYROID Follicular-cell Adendma	+	+	+	* X	+	+	+	<u>*</u>	+	+	* x	+	*	+	-	+	+	+	+	+	+	+	+	+	+	49
PARATHYRDID	-	+	+	-	-	-	-	+	-	+	+	+	-	-	-	+	+	-	-	-	-	-	+	+	-	22
REPRODUCTIVE SYSTEM																										
MAMMARY GLAND	<u>-</u> M_	N	N	N	N	N	N	N	N	N	N	N	N	N.	Ν	<u>N_</u>	н_	N	Ν	н	.н_	Ν.	N	N	N	<u>50×</u>
TESTIS	_ <u>+</u> _	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+		<u>+</u>	+		+	+	+	+	50
PROSTATE NERVOUS SYSTEM	<u>+</u> -	+	+	+	+	+	+	+	+	+	+	ŧ	+	+	+	+	+	+	+	+	+	<u>+</u>	.		+	49
BRAIN	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	÷	+	+	+	50
SPECIAL SENSE ORGANS																									-+	
HARDERIAN GLAND Adenoma, nos	N	N	N	N	N	N	N	N	N	N	N X	N	N	N	N	N	N	N	N	N	N	N X	N	N	NX	50× 3
BODY CAVITIES																									╡	
MESENTERY HEPATOCELLULAR CARCINOMA, INVAS	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	н	50× 1
ALL OTHER SYSTEMS							_																		1	
MULTIPLE ORGANS NOS Malig.lymphoma, lymphocytic typ Malignant lymphoma, mixed type	N	N	N	N	N X	N X	N X	N	N	N	N	N	N	N	N	N X	N	N	N	N	N	N	N	N	N	50× 4 3

TABLE B3. MALE MICE: TUMOR PATHOLOGY (CONTINUED) VEHICLE CONTROL

* ANIMALS NECROPSIED

 +: TISSUE EXAMINED MICROSCOPICALLY
 : NO TISSUE INFORMATION SUBMITTED

 -: REQUIRED TISSUE NOT EXAMINED MICROSCOPICALLY
 C: NECROPSY, NO MISTOLOGY DUE TO PROTOCOL

 X: TUMOR INCIDENCE
 AINTAL MISSING

 S: ANIMAL MISSERD
 MICROSCOPIC EXAMINATION

TABLE B3.

INDIVIDUAL ANIMAL TUMOR PATHOLOGY OF MALE MICE IN THE 2-YEAR STUDY OF GERANYL ACETATE

LOW DOSE

NAMAGE Signature S												- 21				-	01				01		-		
NEEDS OM NEEDS OM	ANIMAL NUMBER	2	3 8	3	3	2	3	3	2	3	1	0	2	1	4	2	1	2	1			0	0	0	0 0
131 EQUINARIARY SYSTEM 1 Al 2 1 SI 7 1 71 4 1 5 1 5 0 1 2 7 4 4 4 7 7 2 1 2 7 4 4 4 7 7 2 1 2 7 4 4 4 7 7 2 1 2 1 3 7 4 4 4 7 7 2 1 2 1 3 7 4 4 4 7 7 2 1 2 1 3 7 4 4 4 7 7 2 1 2 1 3 7 4 4 4 7 7 1 2 1 3 7 3 4 4 4 7 7 1 2 1 4 1 4 4 7 7 1 2 1 3 7 3 4 4 4 7 7 1 2 1 4 1 4 4 7 7 1 2 1 3 7 3 4 4 4 7 7 1 2 1 4 1 4 4 7 7 1 2 1 3 7 3 4 4 4 7 7 1 2 1 4 1 4 4 7 7 1 2 1 3 7 3 4 4 4 7 7 1 2 1 4 1 4 4 7 7 1 2 1 3 7 3 4 4 4 7 7 1 2 1 4 1 4 4 7 7 1 2 1 4 1 4 4 7 7 1 2 1 4 1 4 4 7 7 1 2 1 4 1 4 4 7 7 1 2 1 4 1 4 4 7 7 1 2 1 4 1 4 4 7 7 1 2 1 4 1 4 4 7 7 1 2 1 4 1 4 4 7 7 1 2 1 4 1 4 4 7 7 1 2 1 4 1 4 4 7 7 1 2 1 4 1 4 4 7 7 1 2 1 4 1 4 4 7 7 1 2 1 4 1 4 4 7 7 1 4 1 4 4 7 7 1 4 1 4 4 7 7 1 4 1 4	WEEKS ON STUDY	0	0	0	0	0	0	0	0	0	8	0	0	9	9	9	9	9	1	1	1	1	0	1	
SKIAMOUS CELL PAPILLOMA + + + + + + + + + + + + + + + + + + +	INTEGUMENTARY SYSTEM	5	81	Ž	31	71	21	41	51	51	οL	_51	71	41	41	21	81	91	31	4]	41	41	41	41	4 .
UVECUM STISSUE *	SKIN SQUAMOUS CELL PAPILLOMA	+	+	+	+	+	+	+	+	+	+	+	+	N	+	+	+	+	+	+	+	+	+	+	+ +
RESPIRATORY SYSTEM LUNGS AND RANCET LUNGS AND RANCET LUNGS AND RANCET LUNGS AND RANCET LUNGS AND RANCET CTIVERAL ADDRESS LUNG CARCENDAR CARCINORA ALVEGULAR CARCINORA ALVEGULAR CARCINORA, METAS L. L. L. L. L. L. L. L. L. L. L. L. L. L	SUBCUTANEOUS TISSUE	+	÷	+	+	*	+	+	+	* *	+	+	+	N	+	+	+	+	+	÷	+	+	+	+	+ •
Lines and B BORNEY X X X X X Lines and B BORNEY X X X X X Lines and B BORNEY X X X X X Lines and B BORNEY X X X X X Lines and B BORNEY X X X X X Lines and B BORNEY X X X X X Lines and B BORNEY X X X X X X Lines and B BORNEY X	RESPIRATORY SYSTEM	ļ																						·	
TRACHEA + + + + + + + + + + + + + + + + + + +	LUNGS AND BRONCHI HEPATOCELLULAR CARCINOMA, METAS ALVEOLAR/BRONCHIOLAR ADENOMA ALVEOLAR/BRONCHIOLAR CARCINOMA	+	+	+	+	+	+	+	+	+	+	+ X	+	+	+	+	+	*	+	+	+ ×_	+	+	+	+ •
HEMATOPOIETIC SYSTEM DOME TARARCH SPIEEN HEMATOPOIETIC SYSTEM HEMATORSARCOMA LYUPP NODES LYUPP NODES MERATORS SYSTEM SALIALYSTEM HEART SALIBLADER LYE HEART SALIBLADER LYE HEART HEART HEART	TRACHEA	+	+	+	+	÷	+	+	+	+	+	+	+	+	+	÷	+	+	+	÷	+	+	+	+	+ -
BDME MARROH + + + + + + + + + + + + + + + + + + +	HEMATOPOIETIC SYSTEM	<u> </u>																-					-		
SPLEEN + + + + + + + + + + + + + + + + + + +	BONE MARROW	+	+	+	+	+	+	+	÷		+	+	+	+	+	-	+	<u>+</u>	+	+	+	+	+	+	<u>+</u>
L'YPEN NDDESLULAR CARCINOMA, METAS THYMUS TH	SPLEEN Hemangiosarcoma	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	÷	+	+ •
THYNUS + + + + + + + + + + + + + + + + + + +	LYMPH NODES Hepatocellular carcinoma, metas	+	+	+	+	+	+	÷	+	+	+	+	-	+	+	+	+	* ×	+	+	+	+	+	+	+ •
CIRCULATORY SYSTEM HEART	THYMUS	+	+	+	+	+	+	+	-	+	÷	-	-	-	-	-	+	÷	+	-	÷	+	+	+	+ •
HEART + + + + + + + + + + + + + + + + + + +	CIRCULATORY SYSTEM	<u> </u>													_			-							
DIGESTIVE SYSTEM SALTVARY GLAND SALTVARY SYSTEM SALTVARY SYSTEM SALTVARY SYSTEM SALTVARY GLAND SALTVARY SYSTEM SALTVARY SY	HEART	+	+	÷	+	+	÷	+	+	ŧ	÷	+	+	+	+	÷	+	+	+	+	÷	+	+	+	+ +
SALIVARY GLAND + + + + + + + + + + + + + + + + + + +	DIGESTIVE SYSTEM	\vdash																_			-				
LIVER HEPATOCELLULAR ADENDMA HEPATOCELLULAR CARCINOMA HEPATOCELLULAR CARCINOMA HEPATOCELLULAR CARCINOMA HEPATOCELLULAR CARCINOMA SILE DUCT GALIBLADDER & COMMON BILE DUCT FANCREAS STOMACH SQUAMOUS CELL PAPILLONA SNALL INTESTINE ADENOCARCINOMA, INTERNOCYTIC TYP ARDENOCRCINOMA, NOS URINARY SYSTEM KIDNEY URINARY SYSTEM KIDNEY URINARY SYSTEM HEPACORBOCYTOMA THYEOID FOLLICULAR-CELL ADENOMA FOLLICULAR-CELL	SALIVARY GLAND	<u>+</u>	+	+	+	+	+	+	+	-	+	+	+_	+	+	+	+	+	+	+	+	+	+	+	<u>+</u>
X X	LIVER	+	+	+	+	+	+	+	+	÷	+	+	+	+	+	+	+	÷	+	+	+	+	+	÷	÷ •
BILE DUCT + + + + + + + + + + + + + + + + + + +	1.14EA HEPATOCELLULAR ADENOMA HEPATOCELLULAR CARCINOMA HEMANGIOSARCOMA X X X X X X 1.14EA HEPATOCELLULAR CARCINOMA HEMANGIOSARCOMA X X X X X X 1.14EA BILE DUCT																								
GALLBLADDER & COMMON BILE DUCT + N + + + + N N + + + N N + N N + N + N	HEPATOCELULAR ADENOMA HEPATOCELULAR ADENOMA HEPATOCELULAR CARCINOMAXXXXXXXXXXXBILE DUCT $+$ $+$ $+$ $+$ $+$ $+$ $+$ $+$ $+$ $+$																								
PANCREAS + + - + + + + + + + + + + + + + + + + +	HEMANGIOSARCOMA																								
ESOPHAGUS + + + + + + + + + + + + + + + + + + +	ILE DUCT + + + + + + + + + + + + + + + + + + +																								
STORACH SQUAMOUS CELL PAPILLOMA + + + + + + + + + + + + + + + + + + +	JILE DUCT + + + + + + + + + + + + + + + + + + +																								
SMALL INTESTINE ADEDROGRETIMEA, NOS MALIO.LYMPHOMA, LYMPHOCYTIC TYP LARGE INTESTINE ADENCACRINGA, NOS URINARY SYSTEM KIDNEY URINARY SYSTEM KIDNEY URINARY BLADDER + + + + + + + + + + + + + + + + + + +	SALLBLADDER & COMMON BILE DUCT + N + + + N + + + N N + N N + N N + N +																								
LARGE JNTESTINE ADENOCARCINGMA, NOS + + + + + + + + + + + + + + + + + + +	3ALLBLADDER & COMMON BILE DUCT + N + + + N + + + N N + N N + N N + N +																								
URINARY SYSTEM KIDNEY URINARY BLADDER + + + + + + + + + + + + + + + + + + +	LARGE INTESTINE Adenocarcinoma, nos	+	+	+	+	+	+	٠	* x	+	+	-	+	+	+	+	+	+	+	+	+	+	+	+	+ ·
KIDNEY + + + + + + + + + + + + + + + + + + +	URINARY SYSTEM															-					-				
URINARY BLADDER + + + + + + + + + + + + + + + + + + +	KIDNEY	+	+	+	+	+	+	+	+	+	+_	+	+	+	+	+.	+	+	+	+	+	+	+	+_	+;
ENDOCRINE SYSTEM PITUITARY ADREWAL PHEOCHROMOCYTOMA THYROID FOLLICULAR-CELL ADENDMA FOLLICULAR-CELL CARCINOMA MAMMARY GLAND MAMMARY GLAND HAMMARY GLAND HAMMARY GLAND HANN HANN HANN HANN HANN HANN HARDERIAN GLAND	URINARY BLADDER	+	+	+	+	+	+	+	+	-	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+ •
PITUITARY + + + + + + + + + + + + + + + + + + +	ENDOCRINE SYSTEM	\vdash							-					-											
ADRENAL PHEOCHROMOCYTOMA + + + + + + + + + + + + + + + + + + +	PITUITARY	<u>+</u>	+	+	+	. <u>+</u>	+	-	+	+	+	-	+	+		+	+	+	+	+	-	_	+	<u>+</u>	+
THYRDID FOLLICULAR-CELL ADENDMA FOLLICULAR-CELL CARCINOMA PARATHYRDID - + - + + + + + + + + + + + + + + + + +	ADRÉNAL Pheochromocytoma	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	* x	+-	+	+	+	+	+	+ •
PARATHYROID - + - + + + + + + + + + + + + + + + + +	THYROID Follicular-cell Adenoma Follicular-cell Carcinoma	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+ x	+	+	+	+	+	+	*	+
REPRODUCTIVE SYSTEM MAMMARY GLAND TESTIS + + + + + + + + + + + + + + + + + + +	PARATHYROID	-	+	-	+	+	+	-	-	÷	-	+	-	+	-	+	+	+	+	+	+	+	+	-	-
MAMMARY GLAND N <	REPRODUCTIVE SYSTEM	+																							
TESTIS + + + + + + + + + + + + + + + + + + +	MAMMARY GLAND	1	N	N	+	N	N	N	N	N	N	Ν.	N	N	N	N	N	N	N	N	N	N	N	<u>N</u> .	<u>. N</u>
PROSITE NERVOUS SYSTEM + + + + + + + + + + + + + + + + + + +	TESTIS	1±	+	+	+	+	÷	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	÷	<u>+</u>	+
BRAIN + + + + + + + + + + + + + + + + + + +	PROSTATE	+	+	÷	+	+	+	+	+	+	+	+	+	+	+	+	+_	+	+	+	+	+	+	+.	+
DRAIN SPECIAL SENSE ORGANS HARDERIAN GLAND N N N N N N N N N N N N N N N N N N N	BDATN						Ŧ		•			+	1		+		÷	•	+		_	+	÷	+	÷.
HARDERIAN GLAND HARDERIAN GLAND ADENOMA. NDS MUSCULOSKELETAL SYSTEM MUSCLE NEURILEMOMA ALL OTHER SYSTEMS MULTIPLE ORGANS NDS MULTIPLE ORGANS NDS MULTIPLE ORGANS NDS MULTIPLE ORGANS NDS MALIG.LYMPHOMA, LYMPHOCYTIC TYP	CDECTAL CENSE ODCANS	Ľ		<u> </u>			'			·	·														
MUSCULOSKELETAL SYSTEM MUSCULOSKELETAL SYSTEM MUSCIE	HARDERIAN GLAND	N N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N
MUSCLE NEURILEMOMA ALL OTHER SYSTEMS MULTIPLE ORGANS NOS MALIG, LYMPHORY, LYMPHOCYTIC TYP	MISCIII ASKEL FTAL SYSTEM	–																							
ALL OTHER SYSTEMS MULTIPLE ORGANS NOS MALIG LYMPHOMA, LYMPHOCYTIC TYP N N N N N N N N N N N N N N N N N N N	MUSCLE NEURILEMOMA	+	+	٠	÷	÷	+	+	+	N	÷	+	+	+	+	N	+	+	+	+	÷	+	+	+	+
MULTIPLE ORGANS NOS NN NN NN NN NN NN NN NN NN NN NN NN NN	ALL OTHER SYSTEMS	_																							
	MULTIPLE ORGANS NOS MALIG.LYMPHOMA, LYMPHOCYTIC TYP	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N

-: REQUIRED TISSUE NOT EXAMINED MICROSCOPICALLY X: TUMOR INCIDENCE N: NECROPSY, NO AUTOLYSIS, NO MICROSCOPIC EXAMINATION S: ANIMAL MIS-SEXED

C: NECROPSY, NO HISTOLOGY A: Autolysis M: Animal Missing B: No Necropsy Performed

NUMBER 1 <th></th> <th>1 11</th> <th></th> h> <th>01</th> <th></th> <th></th> <th>NT</th> <th></th> <th></th> <th></th> <th></th> <th></th> <th></th> <th></th>		1 11														- 1	01			N T							
Stress OM Stress OM <t< th=""><th>NUMBER</th><th></th><th>1</th><th>1</th><th>1</th><th>1</th><th>1</th><th>2</th><th>2</th><th>24</th><th>2</th><th>2</th><th>3</th><th>3</th><th>3</th><th>3</th><th>4</th><th>4</th><th>43</th><th>44</th><th>41</th><th>4</th><th>4</th><th>4</th><th>4</th><th>5</th><th>TOTAL</th></t<>	NUMBER		1	1	1	1	1	2	2	24	2	2	3	3	3	3	4	4	43	44	41	4	4	4	4	5	TOTAL
INTEGUDERTARY SYSTEM 1	WEEKS ON Study	0	0	0	0	0	0	0	0	0	0	1	0	0	0	1	0	1	0	0	1	1	1	0	1	1	TISSUES
3XU 3XU 4 <td>INTEGUMENTARY SYSTEM</td> <td>-41</td> <td>. 91</td> <td>41</td> <td>91</td> <td>- 41</td> <td>. 91</td> <td>91</td> <td>-91</td> <td>4</td> <td>91</td> <td>41</td> <td>41</td> <td>-91</td> <td>.91</td> <td>41</td> <td>91</td> <td>ना</td> <td>-91</td> <td>91</td> <td>41</td> <td>91</td> <td>. 91</td> <td>. 91</td> <td>41</td> <td>- 1</td> <td></td>	INTEGUMENTARY SYSTEM	-41	. 91	41	91	- 41	. 91	91	-91	4	91	41	41	-91	.91	41	91	ना	-91	91	41	91	. 91	. 91	41	- 1	
JUCUTANEOUS TISSUE + + + + + + + + + + + + + + + + + + +	SKIN Squamous Cell Papilloma	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	*	+	+	+	+	+	+	+	+	+	50× 1
REEPIRATIONY SYSTEM	SUBCUTANEDUS TISSUE FIBROSARCOMA	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	٠	+	+	+	÷	+	÷	+	+	+	50× 2
LUNGS AND BEDOCH MERAFORDELINAR CARCINOMA METASOCIELUMAR CARCINOMA TRACHEA TRACH	RESPIRATORY SYSTEM	┼──																								-	
TRACHEA + + + + + + + + + + + + + + + + + + +	LUNGS AND BRONCHI Hepatocellular carcinoma, metas Alveolar/Bronchiolar Adenoma Alveolar/Bronchiolar carcinoma	+	+	+	+	+	+	+	+	+	+ X	+	+	+	+	+	+	+ X	-	+	+	•	+ x	+	+ X	+	49 1 5 1
HEMATOPLETIC SYSTEM BONE MARCOM Impre MARCOMAR Imprototic	TRACHEA	+	+	+	+	+	+	÷	+	+	+	+	+	+	+	+	+	+	-	+	+	÷	+	+	+	+	48
BODE MARRON + + + + + + + + + + + + + + + + + + +	HEMATOPOIETIC SYSTEM																										
SPLEEN SPLEEN	BONE MARROW	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	-+	48
LIMPH NDDES LARC LINDHA, METAS + + + + + + + + + + + + + + + + + + +	SPLEEN Hemangidsarcoma	+	+	+	+	*	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	50
ThYNUS + + + + + + + + + + + + + + + + + +	LYMPH NODES Hepatocellular Carcinoma, Metas	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	-	4 8 1
CIRCULATORY SYSTEM HEART DIGESTIVE SYSTEM SALIVARY GLAND LIVER ILVER BILE DUCT OALIBLADER A COMMON BILE DUCT PARCREAS STOMACH SOUMOUS CELL PAPILLOMA STOMACH STOMACH	THYMUS	-	-	+	+	+	+	-	+	+	+	+	+	+	-	÷	+	+	-	+	+	+	÷	+	+	+	37
HEART + + + + + + + + + + + + + + + + + + +	CIRCULATORY SYSTEM																										
DIGESTIVE SYSTEM SALIVARY GLAND ITVER ITVER MEPATOCELULAR ADENOMA MEPATOCELULAR ADENOMA MEPATOCELULAR ADENOMA MEPATOCELULAR ADENOMA MEPATOCELULAR ADENOMA MEDATOCELULAR ADENOMA MEDATOCELULAR ADENOMA MEDATOCELULAR ADENOMA MEDATOCELULAR ADENOMA MEDATOCELULAR ADENOMA SILE DUCT GALLBLADDER & COMMON BILE DUCT PARCERS STOMACH MALTALIVERDING STOMACH MALTALIVER	HEART	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	-	+	+	+	+	+	+	+	49
SALTVARY OLAND + + + + + + + + + + + + + + + + + + +	DIGESTIVE SYSTEM	[_																							
LLVER HEPATOCELLULAR ADEMMA HEMANDIGSARCOMA HIGHLINKSTIME ADEMOCARCINOMA, NOS HIGHLINKSTIME ADEMOCARCINOMA, NOS HIGHLINKSTIME ADEMOCARCINOMA, NOS HIGHLINKSTIME HAMMARY GLAND HAMMARY N N N N N N N N N N N N N N N N	SALIVARY GLAND	<u>+</u>	+	+	+	+	+	+	+	+	+	+	+	<u>+</u>	+	+	+	+	+	+	+	+	+	+	+	+	49
BILE DUCT + + + + + + + + + + + + + + + + + + +	LIVER Mepatocellular adenoma Mepatocellular carcinoma Hemangidsarcoma	+	+	×	+	+	+	*	×	* ×	+	*	+	+	+	+	+ x	+	+	+	+	+	* x	*	+	+	50 9 8 2
GALLBLADDER & COMMON BILE DUCT + + + + + + + + + + + + + + + + + + +	BILE DUCT	+	+	+	+	+	+	+	+	+	+	+	+	+	+	_+	+	+	+	+.	+	+	+	+	+	+	50
PANCREAS + + + + + + + + + + + + + + + + + + +	GALLBLADDER & COMMON BILE DUCT	+	+	+	+	+	+	÷	N	+	N	N	+	+	+	+	N	N	N	N	N	+	+	+	+	+	50×
ESOPHAGUS + + + + + + + + + + + + + + + + + + +	PANCREAS	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	÷	+	+	+	+	+	49
STMACH * * * * * * * * * * * * * * * * * * *	ESOPHAGUS	+	+	+	+	t	+	+	+	+	+	+	+	+	+	+	÷	+		+	+	+	+	+	+	+	.49
SMALL INTESTINE ADEMOGRECHIMMA, LYMPHOCYTIC TYP MALIG.LYMPHOMA, LYMPHOCYTIC TYP ADEMOGRECHIMMA, NOS + + + + + + + + + + + + + + + + + + +	STOMACH Squamous cell papilloma	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	* x	+	+	+	+	+	50
LARGE INTESTINE ADDENGARCINDMA, NDS + + + + + + + + + + + + + + + + + + +	SMALL INTESTINE Adenocarcinoma, nos Malig.lymphoma, lymphocytic typ	+	+	+	+	+	+	+	+	+	+ X	+	+	+	+	+	+	+	+	*	+	+	+	+	+	+	49 1
URINARY SYSTEM KIDNEY URINARY BLADDER + + + + + + + + + + + + + + + + + + +	LARGE INTESTINE Adenocarcinoma, NOS	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	49 1
kIDNEY + + + + + + + + + + + + + + + + + + +	URINARY SYSTEM																									-+	
URINARY BLADDER + + + + + + + + + + + + + + + + + + +	KIDNEY	+	ŧ		+	+	+	+	+	+	+	+	+	<u>+</u>	+	+	+	+	+	+	+	+	+	+	+	+	50
ENDOCRINE SYSTEM - + + - + + + + + + + + + + + + + + + +	URINARY BLADDER	+	+	+	+	+	+	+	+	+	÷	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	49
PITUITARY ++-++++++++++++++++++++++++++++++++	ENDOCRINE SYSTEM	<u> </u>								-																	
ADBERNAL PHEOCHROMOCYTOMA + + + + + + + + + + + + + + + + + + +	PITUITARY		+	_ <u>+</u> _		+	+	+	+	+	+	+	+	<u>+</u>	+	÷	-	+	+	+	+	+	+	+	-		40
THYROID + + + + + + + + + + + + + + + + + + +	ADRENAL Pheochromocytoma	+	+	+	+	+	+	+	+	* ×	+	+	+	+	+	+	+	-	+	+	+	+	+	+	+	+	48 2
PARATHYROID + + + + + + + + + + + + + 30 REPRODUCTIVE SYSTEM MAMMARY GLAND TESTIS + + + + + + + + + + + + + + + + + + +	THYROID Follicular-cell Adenoma Follicular-cell Carcinoma	+	+	+	+	+	+	+	+	+ X	+	+	+	+	+	+	-	+	-	+	+	+	+	+	+	+	47 1 2
KEPRODUCTIVE SYSTEM N	PARATHYROID	-	-	-	+	+	+	+	+	+	+	-	-	+	+	+	-	+	-	-	÷	+	+	+	-	-	30
INNNNNNNNNNNNNNNNNNNNNNNNNNNNNNNNNNNN	REPRODUCTIVE SYSTEM																										
TOSTATE + + + + + + + + + + + + + + + + + + +	MAMMART GLAND	_N	_ <u>N_</u>	_ <u>N</u>	<u>N</u> .	<u>N</u>	<u>N</u>	N	<u>N</u>	<u>N</u>	N	<u>. N</u>	<u>N</u>	_N	<u>N</u>	<u>N</u>	<u>N</u>	N	<u>N</u>	<u>N</u>	<u>N</u>	N	N	<u>N</u> .	<u>N_</u>	N	<u>50×</u>
NERVÖJG ⁵ SYSTEM V	PROSTATE	+	+	_ <u>T</u>	+	+	<u>+</u>	<u>*</u>	<u>+</u>	+	. <u>+</u>	+	+	<u>.</u>	+	<u>+</u>	<u>+</u>	+	<u>*</u>	+	+	+	+		+	+	50
BRAIN + + + + + + + + + + + + + + + + + + +	NERVOUS SYSTEM	<u> </u>	- <u>-</u>		*	T	-	· ·	<u> </u>	Ŧ	- T			-		<u> </u>	<u> </u>	<u> </u>	7	<u> </u>		<u>.</u>		<u></u>		-	
SPECIAL SENSE ORGANS HARDERIAN GLAND ADERONA, NOS MUSCULOSKELETAL SYSTEM	BRAIN	+	+	+	+	+	÷	+	+	÷	+	+	÷	+	+	+	+	+	+	÷	+	+	+	+	+	+	49
HARDERIAN GLAND NNNNNNNNNNNNNNNNNNNNNNNNNNNNNN ADENOMA, NOS X X X X X X 6 MUSCULOSKELETAL SYSTEM	SPECIAL SENSE DRGANS			_													•••				-					1	
MUSCULOSKELETAL SYSTEM	HARDERIAN GLAND Adenoma, nos	N	N X	N	N	N X	N	N	N X	N	N	N	N X	N	N X	N	N	N	N	N	N	N	N	N	N	X	50× 6
	MUSCULOSKELETAL SYSTEM			_					-																	-	
MUSCLE NEURILEMOMA + + + + + + + + + + + + + + + + + + +	MUSCLE NEURILEMOMA	+	+	+	+	+	* X	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	50× 1
ALL OTHER SYSTEMS	ALL OTHER SYSTEMS MULTIPLE ORGANS NOS	N	N	N	н	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	

TABLE B3. MALE MICE: TUMOR PATHOLOGY (CONTINUED) LOW DOSE

* ANIMALS NECROPSIED

 +:
 TISSUE EXAMINED MICROSCOPICALLY
 :
 NO TISSUE INFORMATION SUBMITTED

 -:
 REQUIRED TISSUE NOT EXAMINED MICROSCOPICALLY
 C:
 NECROPSY, NO HISTOLOGY DUE TO PROTOCOL

 X:
 TUMOR INCIDENCE
 A:
 AUTOLYSIS, NO AUTOLYSIS, NO MICROSCOPIC EXAMINATION
 M:

 S:
 ANIMAL MISSENG
 B:
 NO HECROPSY PERFORMED

TABLE B3.

INDIVIDUAL ANIMAL TUMOR PATHOLOGY OF MALE MICE IN THE 2-YEAR **STUDY OF GERANYL ACETATE**

HIGH DOSE

ANIMAL 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0																									
ANIMAL NUMBER	0	4	0	022	2	2	2	0	1	2	0	0	4	4	2	4	0	0	0	0	0	0	0	0	
WEEKS ON Study	0	0	5	5	6	0 6	6	07	0 7	0	0	8	8	8	9	9	9	9 9	9	9	9	0 9	9	9	9
RESPIRATORY SYSTEM	71	8	71	91	11	21.	71	41	71	31	31	41	21	81	01	0	ш		щ	ш	_11	11	<u>.11</u>	11	긔
LUNGS AND BRONCHI Hepatocelular Carcinoma, metas Alveolar/bronchiolar Adenoma Alveolar/bronchiolar Carcinoma	+	+	+	+	+	+	•	+	+	+	+	*	*	+	+	+	+	+	+	+ x	+	+	+	+	+
TRACHEA	+	+	+	+	+	+	÷	+	÷	+	+	+	+	+	÷	+	÷	+	+	÷	÷	+	+	+	+
HEMATOPOIETIC SYSTEM																									-
BONE MARROW	+	+	+	+	+	+	<u>+</u>	+	+	+	+	+	+	+	ŧ	+	+	+	+	t.	+	+	+	+	±
SPLEEN	+	. .	+	+	+	+	+	+	<u>+</u>	+	+	+	+	<u>+</u>	+	+	÷	+	+	-	+	<u>+</u>	+	+	±
LYMPH NODES	<u>+</u>	. .	+	+	+	+	+	+	<u>+</u>	+	+	+	+	+	+	+	+	<u>+</u>	+	+	+	+	+	+	*
THYMUS	+	+	+	+	+	+	+	+	+	-	+	-	+	+	+	-	-	+	+	-	+	+	+	+	-
CIRCULATORY SYSTEM	1		• •																						-1
HEART	+	+	+	+	+	+	-	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+
DIGESTIVE SYSTEM	[-)
SALIVARY GLAND	+	+	ŧ	+	+	+	<u>+</u>	+	+	<u>+</u>	+	+	+	+	-	+	+	+	+	+	+	+	+	+	-+
LIVER HEPATOCELLULAR ADENOMA	+	÷	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	* ×	* x	+	+	+
HEPATOCELLULAR CARCINDMA	—					X			X			X	<u> </u>	X		X]ة.
BILE DUCT	<u>+</u>	+	+	+	<u>.t</u>	+	+	+	+	+	+	+	_ <u>+</u>	+	+	+	+	+	+	+	+	+	+	+	ᆀ
GALLBLADDER & COMMON BILE DUCT	<u> </u>	<u>+</u>	+	+	+	N	N	<u>N</u>	<u>+</u>	N.	+	N	+	N	+	Ν	+	N	+	+	+	+	+	Ν.	ᆂ
PANCREAS	+	+	t	+	+	+	+	+	+	ŧ.	_t_	+	+	+	+	+	+	+	+	+	+_	+	-	+	-+
ESOPHAGUS	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	<u>+</u>	+	+	+	+	-+
STOMACH Squamous Cell Papilloma	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	_
SMALL INTESTINE Adenocarcinoma, nos	<u> </u> +	*	+	+	-	+	-	-	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	_
LARGE INTESTINE	+	+	+	+	+	+	+	-	+	-	+	+	+	+	+	+	+	-	+	+	+	+	+	+	+
URINARY SYSTEM																				_					-
KIDNEY	<u> +</u>	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+
URINARY BLADDER	+	+	+	+	+	+	+	+	+	÷	+	+	+	+	+	+	÷	+	+	٠	+	+	+	+	+
ENDOCRINE SYSTEM	<u> </u>													· ·											
PITUITARY	+	+	+	+	+	+	+	+	+	<u>+</u>	-	+	+	+	+	+	+.	+	+	+	. t _	+	-	<u>+</u>	±
ADRENAL	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+.	+	+	+	. . .	+	+	+	+	+	±
THYROID Follicular-Cell Adenoma	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+
PARATHYROID	-	+	+	-	+	+	+	÷	+	+	٠	-	+	-	+	+	-	+	+	+	+	-	-	-	-
REPRODUCTIVE SYSTEM																			-						-
MAMMARY GLAND	<u> </u>	+	N	Ν.	<u>N</u>	N	N	N	N	N	N	Ν.	N	N	N	М.	N	N	N	N.	<u>N</u>	N	Ν.	+	<u>-</u> N
TESTIS	<u> +</u>	+	ŧ.	+	+	+	+	+	+	+	+	+	+	÷	+	+	+	+	+	+	+	+	+	+.	±
PROSTATE	+	+	+	+	+	+	+	+	+	+	÷	+	+	+	÷	+	+	+	+	+	+	+	+	+	+
NERVOUS SYSTEM																									
BRAIN	+	+	+	+	+	+	+	+	+	+	+	+	+	÷	+	+	+	+	+	+	÷	+	+	+	+
ALL OTHER SYSTEMS	1																		_						-
MULTIPLE ORGANS NOS Hemangiosarcoma Malig.Lymphoma, Lymphocytic typ	N	N	м	N	N	N	N	N X	N	N	N X	N	N	N	N	N	N	N	N	H	N	N	N	N	N

TISSUE EXAMINED MICROSCOPICALLY Required Tissue not examined microscopically tumor incidence Necropsy, no Autolysis, no microscopic examination Animal Mis-Sexed +::: -:: N::

NO TISSUE INFORMATION SUBMITTED
 NCCROPSY, NO HISTOLOGY DUE TO PROTOCOL
 Autolysis
 Animal Missing
 B: NO NECROPSY PERFORMED

ANTMA	1 01		01			01				01	<u>-</u>				01	01		<u></u>							<u>a</u> ī	
NUMBER		3	1	1	1	1	2	2	2	2 9	3	3	3	3	3	3	3	39	4	4	4	4	4	8	5	TOTAL
WEEKS ON Study	9	9	9	9	9	9	9	9	9	9	9	9	9	9	9	9	9	9	9	9	9	9	9	9	9	TISSUES
RESPIRATORY SYSTEM						- 1.4									-11										+	
LUNGS AND BRONCHI HEPATOCELLULAR CARCINDMA, METAS Alveolar/bronchiolar Adenoma Alveolar/bronchiolar carcinoma	+	+	+	+	+ X	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+ X	+	*	+	50 3 2 1
TRACHEA	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	÷	+	+	+	+	÷	+	+	+	50
HEMATOPOIETIC SYSTEM																						_			╉	
BONE MARROW	+	+	+	+	+	+	+	+_	.+	+	ŧ.	+	+	+.	+	+	+	+	+	+	+	+	+	+	+	50
SPLEEN	.+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	49
LYMPH NODES	+	+	+	+	+	+	+	+_	+	+	+	+	+	<u>+</u>	+	+	±	+	+	+	+	+	+	+	+	50
THYMUS	+	-	+	+	+	-	.+	+	-	÷	+	+	+	-	+	+	+	+	+	+	~	-	+	-	-	36
CIRCULATORY SYSTEM																	-								┽	
HEART	+	+	+	÷	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	49
DIGESTIVE SYSTEM																									+	
SALIVARY GLAND	+	+	+	+	+	+	+	+	+	+	+	+	+	<u>+</u>	+	+	+	+	+	+	+	+	+	+	+	49
LIVER HEPATOCELLULAR ADENOMA HEPATOCELLULAR CARCINOMA	+	+	+	+	+	+	+	+ ¥	* X	+	+	+	+	* x	+	+	* ×	+	* ×	+	٠	+	٠	+ x	+	50 6
BILE DUCT	+	+	+	+	+	+	+	+.	+	+	+	+	+	+	+	+	+	+	+	+	•		+	+	1	50
GALLBLADDER & COMMON BILE DUCT	N	N	N	+	+	N	+	+	N	N	+	N	+	N	+	+	N	N	+	+	+	+	+	+	N	50*
PANCREAS	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	*	+	+	+	+	+	+	+	+	49
ESOPHAGUS	+	+	+	+	+	+	+	+	+	+	+	+	+	*	+	+	+	+	+	+	+	+	+		Ť	50
STOMACH SQUAMOUS CELL PAPILLOMA	+	+	+	+	+	+	+	* x	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	50
SMALL INTESTINE Adenocarcinoma, nos	+	+	+	+	+	+	+	+	* X	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	47
LARGE INTESTINE	+	+	+	+	+	+	÷	÷	÷	÷	+	÷	+	+	+	+	+	+	+	+	+	+	+	+	+	47
URINARY SYSTEM												<u>``</u>						-							┽	
KIDNEY	+	+	<u>.</u> t_	+	+	+	+	+	+	÷	+	+	÷	+	+	+	+	<u>+</u>	+	<u>+</u>	+	+	+	+	+	50
URINARY BLADDER	+	÷	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	50
ENDOCRINE SYSTEM													-												╋	
PITUITARY	+	+	+	+	+	+	+	+	+	+	+:	+	+	+	+	+	<u>+</u>	+	+	+	+	+	+	+	±L	48
ADRENAL	+	+	+	+	.+	+	+	+	+	+	+.	+	+	+	+	+	+	+	+	+	+	+	+	+	+	50
THYROID Follicular-cell Adenoma	+	+	+	+	+	+	+	+	+	+	+	+	* x	+	+	+	+	+	+	+	+	+	+	+	+	50
PARATHYROID	+	+	-	-	+	+	-	+	-	-	+	-	-	+	-	+	÷	-	-	-	+	-	+	-	+	28
REPRODUCTIVE SYSTEM										-					-										+	
MAMMARY GLAND	<u>N</u> .	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N.	N	N	N	<u>N</u>	N	N	
TESTIS	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	. <u>+</u>	+	+	+	+	+	+	+	50
PROSTATE	+	+	+	+	+	+	+	+	+	+	÷	÷	÷	÷	+	+	+	+	+	+	+	÷	+	+	+	50
NERVOUS SYSTEM																									+	
BRAIN	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	÷	+	+	+	+	+	+	+	+ -	+	50
ALL OTHER SYSTEMS													-						-						+	
MULTIPLE ORGANS NOS Hemangiosarcoma Malig.lymphoma, lymphocytic typ	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	М	50× 1

TABLE B3. MALE MICE: TUMOR PATHOLOGY (CONTINUED) HIGH DOSE

* ANIMALS NECROPSIED

- +: TISSUE EXAMINED MICROSCOPICALLY -: REQUIRED TISSUE NOT EXAMINED MICROSCOPICALLY X: TUMOR INCIDENCE N: MECROPSY, NO AUTOLYSIS, NO MICROSCOPIC EXAMINATION S: ANIMAL MIS-SEED

: NO TISSUE INFORMATION SUBMITTED C: Necropsy, no histology due to protocol A: Autolysis M: Animal Missing B: No Necropsy Performed

TABLE B4.

INDIVIDUAL ANIMAL TUMOR PATHOLOGY OF FEMALE MICE IN THE 2-YEAR STUDY OF GERANYL ACETATE

VEHICLE CONTROL

ANIMAL NUMBER	1	8	2	3	0	3	4	0	8	2	0	04	2	2	4	3	0	2	4	4	3	3	0	0	0
WEEKS ON Study	6 0 3	5 0 5	2 0 7	6 0 7	6 0 7	0	8	8	7	0	0	0	0	9	9	9	0	5 0 9	0 9	9	1	0 0		1	1
INTEGUMENTARY SYSTEM	71	7	4	6	8	51	51	6	61	61	81	8	91	31	3	51	6	8	9	91	11	11	.41	.4	4
SKIN SQUAMOUS CELL PAPILLOMA	+	+	+	+	+	+	+	+	٠	+	+	+	N	+	+	÷	÷	* x	٠	+	÷	+	+	+	+
RESPIRATORY SYSTEM	-																								-
LUNGS AND BRONCHI Adenocarcinoma, NDS, Metastatic Alveolar/Bronchiolar Adenoma Osteosarcoma, Metastatic	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+ x	+	+	+	+	+	+
TRACHEA	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	÷	+	+
HEMATOPOIETIC SYSTEM	-																								
BONE MARROW	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+
SPLEEN	+	+	+	+	+	+	+	+	+	+	+	+	+.	+	+	+	+	+	+	+	+	+	+	+	<u>+</u>
LYMPH NODES	+		+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	<u>+</u>	+	+	+	+	+	+
THYMUS	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	-	+	+	+	+	-	+
CIRCULATORY SYSTEM																									-
HEART	+	÷	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+
DIGESTIVE SYSTEM																									-
SALIVARY GLAND	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+
LIVER	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+
HÉPATOCELLULAR ADENOMA Hepatocellular carcinoma Malig.lymphoma, histiocytic typ							x		x									x							
BILE DUCT	+	+	+	+	+	÷	+	+	ŧ	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	<u>+</u>
GALLBLADDER & COMMON BILE DUCT	+	+	N	+	N	÷	+		<u>+</u>	N	+	+	+	N	+	N	+	÷	N	÷	N	+	+	+	N
PANCREAS		<u>.</u>	-	+	+	+	+	+	<u>+</u>	+	+	+	+	+	+	+	+	+	-	+	+	+	+	+	<u>+</u>
ESOPHAGUS	+	+	+	+	+	+	+	+	+	+	+	÷	+	+	<u>+</u>	+	+	÷	ŧ	+	+	+	. <u>+</u>	+	+
STOMACH Adenomatous Polyp, Nos	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+
SMALL INTESTINE	+	+	+	+	+	+	t	+	+	+	+	+	+	ŧ	ŧ	+	+	+	÷	+	+	+	. +	+	+
LARGE INTESTINE	+	+	+	+	+	+	+	+	+	+	+	+	+	+	÷	+	+	+	+	+	+	+	+	+	+
URINARY SYSTEM																									
KIDNEY	<u>+</u>	+	+	+	+	+	+	+	+	+	+	+	+	+	ŧ	+	+	+	+	+	+	+	+	+	+
URINARY BLADDER	+	+	+	+	+	+	+	+	+	÷	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+
ENDOCRINE SYSTEM							-																		~
PITUITARY Adenoma, nos	-	+	+	+	+	+	-	+	+	+	+	+	+	+	+	-	+	+	+	+	+	+	-	+	+
ADRENAL Cortical Adenoma Pheochromocytoma	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+ x	+	+	+	+	+	+
THYROID Follicular-cell Adenomá	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	*	+	+	+	+	+	+	+
PARATHYROID	+	+	+	-	+	+	+	-	-	+	-	-	-	-	+	+	+	+	+	+	-	+	-	-	-
REPRODUCTIVE SYSTEM	1-																								
MAMMARY GLAND Adenocarcinoma, Nos	+	+	+	+	+	+	*	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+
UTERUS Endometrial stromal sarcoma	+	+	+	+	+	+	+	+	*	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+
OVARY	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+
NERVOUS SYSTEM	+																-								-
BRAIN	+	+	±	+	+	+	+	+	÷	+	+	+	÷	÷	+	.t	+	+	+	+	ŧ.	+	t	+	+
SPECIAL SENSE ORGANS Harderian Gland	N	N	N	N	м	м	N	N	N	N	N	N	N	н	N	N	N	N	N	N	N	N	N	N	N
ADENUMA, NUS																						-	^		_
BUDI CAVITIES					μ	ы	ы	н	м	м	μ	μ	ы	N	ы	k 1	μ	μ	μ	μ	Ņ	ы	ы	μ	L.
HEMANGIOMA	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	"		n	N	n	n	n		
ALL OTHER SYSTEMS						_																			
MULTIPLE DRGANS NOS NEOPLASM, NOS ENDOMERIAL STROMAL SARCOMA, ME Malionant Lymphoma, Nos Malio.lymphoma, Lymphocytic Typ Malig.lymphoma, Histiocytic Typ	N	N	××	N	N	N	N	N	N X X	м Х	N	N	N	N	N	N	N	N X	N	N	N	N	N	N 	N
HEAD NOS OSTEOSARCOMA																			x						
+: TISSUE EXAMINED MICROSCOP -: REQUIRED TISSUE NOT EXAMI X: TUMOR INCIDENCE N: NECROPSY, NO AUTOLYSIS, N	ICAL NED	LY MIC	CROS	SCOF							: C: A: M:		TI CRO	SSU PSY YSI	E I , N S	NFO O H	RMA Ist	TIC	IN S Igy	DUE		ED PR	010	COL	

N: NECROPSY, NO AUTOLYSIS, NO MICROSCO S: Animal Mis-Sexed M: ANIMAL MISSING B: NO NECROPSY PERFORMED

	- îl	-			01	0	<u> </u>	2	<u> </u>	2	9	<u>9</u>	9	9	ļ	Ţ	<u>q</u>	Ţ	0	0	<u></u>	2	0	2	<u>e</u>	<u></u>
WEEKS ON	ě	÷	-11	Ż	붜	4	취	4	÷.	1	- Î	补	Ŧ	ŧ١.	1	Ť.	ŧł.	Ť	Ť	1	-41	÷1	4	-	Ĩ	TOTAL
STUDY	ġ	ġ	ò	4	ġ	Ó	ġ	ŝ	ġ 5	ŝ	9	ġ 5	ŝ	ġ 5	ġ 5	ġ 5	ġ 5	Ó 5	0 5	ġ 5	ġ	ŝ	ġ	0 5) 5	TUMORS
INTEGUMENTARY SYSTEM																										
SKIN Squamous cell papilloma	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	50×
RESPIRATORY SYSTEM	<u> </u>																								+	
LUNGS AND BRONCHI Adenocarcinoma, nos, metastatic Alveolar/Jronchiolar Adenoma Osteosarcoma, metastatic	+	+	+	+	+	×	+	+	+	+	+	+ x	+	+	•	•	•	•	+	•	•	+	•	•	٠	50 1 1
TRACHEA	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	÷	٠	+	٠	÷	+	+	+	+	50
HEMATOPOIETIC SYSTEM																										
BONE MARROW	+	+	+	÷	ŧ	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	ŧ	+	+	50
SPLEEN	<u>+</u>	+	+	÷	+	+	+	+	+	+	+	ŧ	+	÷	ŧ	ŧ	ŧ	+	+	+	+	+	+	+	-	50
LYMPH NODES	+	+	+	÷	+		+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	49
THYMUS	+	+	+	+	-	+	+	+	+	+	+	+	+	+	٠	+	+	+	+	+	+	+	+	+	+	47
CIRCULATORY SYSTEM				_												~ •										
HEART	+	+	+	٠	٠	٠	٠	+	+	+	+	+	+	+	+	+	+	+	٠	٠	٠	+	٠	+	+	50
DIGESTIVE SYSTEM									_																	
SALIVARY GLAND	+	+	+	+	+	+	+	+	+	+	+		. t	+	+	+	+	+	+	+	+	+	+	+	-+	50
LIVER Hepatocellular Adenoma Hepatocellular Carcinoma Malig.lymphoma, Histiocytic Typ	+	+	•	+	+	•	•	+	•	•	•	+	+	+	•	+	+	+	*	×	+	+	•	+	+	50 2 3 1
BILE DUCT	÷	+	+	+	+	+	+	+	+	+.	+.	t	+	+	+	. †	÷	+	+	+	÷	٠	÷	+	+	50
GALLBLADDER & COMMON BILE DUCT	N	+	+	+	N	+	+	+	+	+	+	+	+	+	+	+	+	÷	N	+	+	N	÷	÷	+	<u>50×</u>
PANCREAS	+	+	+	+	+	+	+	+	+	+	+	+	+	<u>+</u>	+	+	.+	+	ŧ.	ŧ.	÷	+	ŧ	+	÷	
ESOPHAGUS	+	+	+	+	+	+	+	+	÷	+	+	÷	÷	+	+	÷	+	+	+	+	+	.	. t	+	+	50
STOMACH Adenomatous Polyp, Nos	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	* x	+	+	+	+	+	+	+	+	•	50
SMALL INTESTINE	+	+	.+	. .	. !		+	+	+	+	+	÷	÷	+	ŧ	+	ŧ	+	+	+	+	<u>+</u>	+	t	╧┥	50
LARGE INTESTINE	+	+	+	÷	+	٠	+	٠	٠	٠	+	٠	+	+	+	+	+	+	+	+	+	+	+	+	+	50
URINARY SYSTEM																										
KIDNEY	<u>+</u>	<u>+</u>		t	+	+	+	+	+	÷	÷	+	+	+	÷	+	ŧ	+	+	+	+	+	+		-t	50
URINARY BLADDER	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	50
ENDOCRINE SYSTEM																									_	
PITUITARY Adenoma, Nos	+	-	+	+	+	•	<u>*</u>	-	•	+	+	+	+	+	•	•	•	•	+	+	+	+	+	<u>*</u>	+	44 2
ADRENAL Cortical Adenoma Pheochromocytoma	<u> </u>	* x	+	•	•	•	•	+	•	+	+	+	x	•	•	•	•	+	<u>+</u>	+	+	+	•	*	1	50 1 2
THYROID Follicular-cell Adenoma	+	+	*	+	•	ż	+	•	+	+	+	*	+	+	+	+	+	+	+	+	+	+	+	*	•	50 <u>5</u>
PARATHYROID	-	-	-	-	-	÷	+	+	+	-	-	+	+	~	+	+	+	-	+	-	-	+	+	٠	+	28
REPRODUCTIVE SYSTEM																										
MAMMARY GLAND Adenocarcinoma, nos	+	+	+	+	+	ż.	+	+	+	+	+	+	•	+	+	+	+	+	•	+	+	+	+	+	•	50× 2
UTERUS Endometrial stromal sarcoma	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	50
OVARY	+	+	+	÷	+	+	+	+	+	+ 4	v+	+	+	+	+	+	-	+	+	-	+	+	+	+	+	48
NERVOUS SYSTEM																									-	
BRAIN	+	ŧ.	+	+	+	+	+	+	+	+	t.	+	+	+	+	+	+	+	+	+	+	+	+	+	+	
SPECIAL SENSE ORGANS																									_	
MARDERIAN GLAND Adenoma, Nos	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	50× 1
BODY CAVITIES																										
MESENTERY Hemangioma	N	N	N	N	N	N	N	N	N	N	N	N	N	NX	N	N	N	N	N	N	N	N	N	N	N	50× 1
ALL OTHER SYSTEMS	<u> </u>																								+	
MULTIPLE ORGANS NOS Neoplasm, nos Endometrial Stronal Sarcoma, me Malionant Lymphoma, nos Malio.Lymphoma, Lymphocytic typ Malio.Lymphoma, Histiocytic typ	N	N	N X	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	50× 1 1 2 2
HEAD_NOS																										
OSTEOSARCOMA	<u> </u>											_														1_

TABLE B4. FEMALE MICE: TUMOR PATHOLOGY (CONTINUED) VEHICLE CONTROL

* ANIMALS NECROPSIED

 +:
 TISSUE EXAMINED MICROSCOPICALLY
 :
 NO TISSUE INFORMATION SUBMITTED

 -:
 REQUIRED TISSUE NOT EXAMINED MICROSCOPICALLY
 C:
 NECKOPSY, NO ISTOLOGY DUE TO PROTOCOL

 X:
 TUMOR INCIDENCE
 A:
 Autolysis, NO Autolysis, NO MICROSCOPIC EXAMINATION
 A:

 S:
 ANIMAL MISSERED
 B:
 NO HEROPSY PEFORMED

TABLE B4.

INDIVIDUAL ANIMAL TUMOR PATHOLOGY OF FEMALE MICE IN THE 2-YEAR **STUDY OF GERANYL ACETATE**

LOW DOSE

																									÷.
ANIMAL NUMBER	03	3	1	2	1	0	4	1	3	4	4	0	3	11	1	1	1	2	2	3	3	4	0 4 3	4	1
WEEKS ON STUDY	1	0	3	0 3	4	0 5	0 5	0	0	6	6	7	0 7	?	9 7	8	9	9	9	9	9	9	9	9	9
INTEGUMENTARY SYSTEM	01	41	11	8	4	31	31	51	51	6	71	_01	0	41.	51	41	01	01	01	01	01	0	01	0	비
SUBCUTANEOUS TISSUE Sarcoma, Nos	+	+	+	+	+	+	÷	+	+	+	+	+	+	+	+	+	N	+	+	+	+	+	+	+	+
RESPIRATORY SYSTEM				-																					-
LUNGS AND BRONCHI Alveolar/Bronchiolar Carcindma	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	•	*l
TRACHEA	+	+	+	+	+	+	+	+	+	+	+	-	+	+	÷	+	+	÷	+	+	+	+	+	-	-
HEMATOPOIETIC SYSTEM	-								•																-
BONE MARRON	+	_ +	÷	+	+	+	÷	+	+	÷	+	+	+	+	ŧ_	+	+	÷	+	+	+	+	+	+	±
SPLEEN	+	+	+	+	+	+	÷	+	+	+	+	+	+	+	÷	+	+	+	+	+	+	+	+	+	+
LYMPH NODES	+	+	+	+	+	+	+	ŧ	+	+	+	+	+	+	+	+	+	+	+	+	+	+	÷	+	<u>+</u>
THYMUS	-	+	+	+	+	+	+	+	+	+	+	-	+	-	+	+	+	-	+	+	+	+	+	+	-
CIRCULATORY SYSTEM																				_					-
HEART	+	+	+	÷	÷	+	+	+	+	+	+	+	+	+	÷	+	+	+	+	+	+	÷	÷	+	+
DIGESTIVE SYSTEM						-	_									-			_						-
SALIVARY GLAND	+	t	+	+	+	+	+	+	+	+	+	-	+	+	t	+	+	<u>+</u>	+	+	+	+	+	-	±
LIVER Hepatocellular Adenoma Hepatocellular Carcinoma Malignant Lymphoma, mixed type	+	+	+	+	+	+	+	+	+	×	+	+	+	+	+	+	+	+	+	+	+	+ ×	+	+	+
BILE DUCT	+	<u>+</u>	+	+	+	+	+	+	+	+	+	÷	+	<u>+</u>	ŧ	+	+	+	+	+	+	+	t	+	±
GALLBLADDER & COMMON BILE DUCT	+	+	N	<u>N.</u>	N	+	+	N	+	+	t	N	N	+	+	<u>N</u>	N	. .	+	+	+	+	N	+	±ļ
PANCREAS	+	+	-	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	±
ESOPHAGUS	+	+	<u>+</u>	+	+	<u>+</u>	+	+	+	. t	+	+	+	+	+	+	+	<u>+</u>	+	+	+	+	+		±
STOMACH Squamous cell papilloma Squamous cell carcinoma	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+
SMALL INTESTINE	+	+	t.	+	+	+	. t	+	-	+	t	-	-	+	+	+	+	+	+	+	+	+	ŧ	+	±
LARGE INTESTINE	+	+	-	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+
URINARY SYSTEM																									-
KIDNEY	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	±
URINARY BLADDER	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+
ENDOCRINE SYSTEM	<u> </u>																								-
PITUITARY Adenoma, Nos	+	+	+	+	-	+	+	+	+	+	+	+	+	+	-	+	+	+	+	-	+	+	+	-	-
ADRENAL	+	+	+	+	+	+	+		+	+	+	.t.	+	+	+	+	t	+	+	<u>+</u>	+	+	+	<u>+</u>	±
THYROID Follicular-cell Adenoma	+	+	+	+	+	+	+	+	+	+	+	-	*	+	+	+	+	+	+	+	+	+	+	-	+
PARATHYROID	-	-	÷	÷	+	-	÷	+	+	+	+	-	+	+	-	÷	-	+	-	+	-	+	-	-	+
REPRODUCTIVE SYSTEM																									-
MAMMARY GLAND Adenocarcinoma, nos	+	+	N	+	+	+	+	+	+	+	+	N	+	+	+	+	+	+	+	+	+	+	+	N	+
PREPUTIAL/CLITORAL GLAND Adenoma, Nos	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	М	N	N	N	N	N	N	N	н
UTERUS ENDOMETRIAL STROMAL POLYP	÷	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	* x	+	+	+	+	+	+	+
QVARY NEBUQUE SYSTEM	+	+	+	+	+	+	+	+	÷	+	+	+	+	+	+	+	+	+	+	t	+	+	-	-	±
BRAIN	+	+	+	+	+	+	÷	+	+	+	÷	+	+	+	+	+	+	+	÷	+	+	+	÷	+	+
ALL OTHER SYSTEMS																									-
MULTIPLE ORGANS NOS Squamous cell carcinoma, metast Malig.lymphoma, lymphocytic typ Malignant lymphoma, mixed type	N	N	N	N	N	N	N	N	N	N	N	И	N	N	N	N	N	N	N	N	N	N	N	N	N
+: TISSUE EXAMINED MICROSCOP -: REQUIRED TISSUE NOT EXAMI X: TUMOR INCIDENCE N: NECROPSY, NO AUTOLYSIS, N S: ANIMAL MIS-SEXED	ICAL NED	MIC MIC	ROS	6COF	91C/ 5 E)	ALLN (AM)	r Ena'	101	N		С: А: М: В:	****	O Ť ECRI UTOI NIMA	ISS DPS LYS AL ECR	UE Y, IS MIS OPS	INF ND SIN Y P	ORM HIS G ERF	ATI TOL ORM	ON DGY ED	SUB DU	MIT E T	TED O P	ROT	OCOL	•

.

ANIMAL NUMBER	0 2 0	0 3 4	0 5 0	0	0 3 1	0	0 0 6	04	0 4 5	0 4 7	0	0	0	0	1	0	22	2	2	0 2 5	2	2	3	0 3 5	0	TOTAL
WEEKS ON Study	9	9	9	9	91	9	9	9	9	0	0	1	1	1	8	1	1	1	0		1	11	3	1	3	TUMORS
INTEGUMENTARY SYSTEM	+ 11	-11	11	41		<u>81</u>	81	<u></u>	<u>8</u>	2	- 9	41	-41	91	91	-91	.41	41	91	.41	4	41	_41	91	4	
SUBCUTANEOUS TISSUE Sarcoma, nos	+	+	+	+	+	* x	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	٠	+	+	50× 1
RESPIRATORY SYSTEM			-										_												+	
LUNGS AND BRONCHI Alveolar/Bronchiolar Carcinoma	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	50
TRACHEA	+	+	+	+	+	+	÷	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	48
HEMATOPOIETIC SYSTEM	t—																								+	
BONE MARROW	+	+	+	+	+	+	+	+	<u>.</u> +	+	+	+	+	+	+	+	+	+	+	<u>+</u>	+	+	t.	+	+	50
SPLEEN HEMANGIOSARCOMA	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	50
LYMPH NODES	+	+	+	+_	+	+	+	+	+	ŧ	+	+	+	+	+	+	<u>+</u>	+_	+	+	+	+	+	+	+	50
THYMUS	+	+	+	-	+	+	+	-	+	÷	+	+	+	+	÷	+	+	÷	+	-	+	÷	-	-	+	40
CIRCULATORY SYSTEM	t—												_												+	
HEART	+	+	+	+	÷	÷	+	+	+	+	+	+	+	+	+	÷	+	+	+	+	+	+	+	+	٠l	50
DIGESTIVE SYSTEM	\square							••••						• • •											+	
SALIVARY GLAND	±	+	+	-	+	+	.+	+	<u>, +</u>	+	+	+	+	+	+	+	+	t	+	+	+	.t	+	+	÷	97
	+	+	+	+	+	+	+	+	+	÷	+	+	+	+	+	÷	+	t	÷	+	+	÷	+	÷	+	50
HEPATOCELLULAR CARCINOMA HEPATOCELLULAR CARCINOMA Malignant Lymphoma, Mixed Type															x			×							×	22
BILE DUCT	<u> </u> +	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+_	+	+	+	+	ŧ	+	+	50
GALLBLADDER & COMMON BILE DUCT	<u>+</u>	+	+	+	+	+	N	+	*	+	+	÷	N	+	+	+	+	+	+	+	+	+	+_	t.	+	50×
PANCREAS	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	49
ESOPHAGUS	<u>+</u>	+	+	+	+		+	+	±.	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	±	49
STOMACH Squamous cell papilloma Squamous cell carcinoma	+	+	+	+	+ X	+	+	+	+	+	* X	+	+	÷	+	÷	+	+	•	+	+	+	+	+	+	50
SMALL INTESTINE	+	+	+	+_	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	47
LARGE INTESTINE	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	-	49
URINARY SYSTEM	├																								+	
KIDNEY	+	+	+	-	+	+	+	+	+	4	+	+	÷	+	+	+	+	+	+	+	+	+	+	+	+	49
URINARY BLADDER	+	÷	+	+	+	÷	+	+	÷	÷	+	+	+	+	÷	+	÷	+	+	+	+	+	+	+	+	50
ENDOCRINE SYSTEM	<u> </u>			_							_														+	
PITUITARY Adenoma, Nos	+	+	+	+	+	*	+	-	+	-	+	+	+	-	+	*	+	+	+	+	+	÷	+	+	+	43 2
ADRENAL	+	+	+	+	+	+	+	+	+	÷	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	50
THYRDID Follicular-cell Adenoma	+	+	+	+	+	* x	+	+	+	+	+	+ X	+	* ×	+	÷	÷	+	÷	+	+	+	+	+	÷	48 3
PARATHYROID	+	+	+	+	+	+	-	+	+	-	+	+	-	-	+	+	+	+	+	+	+	+	+	+	+	36
REPRODUCTIVE SYSTEM	ł—																								+	
MAMMARY GLAND Adenocarcinoma, nos	+	+	+	÷	+	+	+	+	+	+	+	+	+	+	+	÷.	+	+	+	+	+	+	+	+	+	50× 2
PREPUTIAL/CLITORAL GLAND Adenoma, NDS	N	N	N	N	N	N	N	N	N X	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	50×
UTERUS ENDOMETRIAL STROMAL POLYP	+	* x	+	+	+	+	+	+	+	+	+	+	+	•	+	+	+	+	+	•	+	+	+	+	+	50 2
OVARY NERVDUS SYSTEM	+	+	+	+	+	+	+	+	-	+	+	+	<u>+</u> .	+	+	+	+	<u>+</u>	+	+	+	+	+	+	+	47_
BRAIN	+	+	÷	+	+	+	+	+	+	÷	+	+	÷	÷	÷	÷	+	+	+	+	+	+	+	+	+	50
ALL OTHER SYSTEMS																		_							+	
MULTIPLE ORGANS NOS Squamous cell carcinoma, metast Malig.lymphoma, lymphocytic typ Malignant lymphoma, mixed type	N	N	N	N X	N X	N	N	N	N	N X	N	N	N	N X	N	N	N	N	N	N	N	N X	N	N	м	50× 1 3

TABLE B4. FEMALE MICE: TUMOR PATHOLOGY (CONTINUED) LOW DOSE

* ANIMALS NECROPSIED

TISSUE EXAMINED MICROSCOPICALLY
 REQUIRED TISSUE NOT EXAMINED MICROSCOPICALLY
 TUMOR INCIDENCE
 NECROPSY, NO AUTOLYSIS, NO MICROSCOPIC EXAMINATION
 ANIMAL MIS-SEXED

: NO TISSUE INFORMATION SUBMITTED C: Necropsy, no histology due to protocol A: Autolysis M: Animal Missing B: No necropsy performed

TABLE B4.

INDIVIDUAL ANIMAL TUMOR PATHOLOGY OF FEMALE MICE IN THE 2-YEAR **STUDY OF GERANYL ACETATE**

HIGH DOSE

ANIMAL NUMBER	0 3 7	1	1	3	0	4	0	2	2	0	3	4	4	1	3	24	4	3	1	0	3	3 3	0	0 0 4 1 4 9
WEEKS DN Study	0	1	1	1	2	2	2	Z	2	3	5	3	3	3	3	4	4	4	2	047	4	47	5	5 5
RESPIRATORY SYSTEM	- 21	_ 11	-21	21			-21	21	21	<u>. 61</u>	<u> </u>	-61		21		. ليف	-					<u> </u>	-11-1	ق ـــلــه
LUNGS AND BRONCHI Alveolar/bronchiolar Adenoma	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+ +
TRACHEA	+	+	÷	+	+	+	+	+	+	+	+	÷	-	-	-	+	٠	+	+	+	+	+	+	+ +
HEMATOPOIETIC SYSTEM																								
BONE MARROW	_ <u>+</u>	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	<u>+</u>	+ +
SPLEEN	+	<u>+</u>	+	+	+	+	+	+	+	+	-	+	+	+	+	+	+	+	+	-	-	+	<u>.</u>	+ +
LYMPH NODES	<u>+</u>	ŧ.	+	+	+	+	+	+	+	+	-		+	+	+	+	<u>+</u>	+.	+	+	+	+	<u>+</u>	+ +
THYMUS	-	+	÷	+	+	+	+	-	+	+	+	+	+	+	+	-	+	+	+	+	+	÷	+	+ +
CIRCULATORY SYSTEM																								
HEART	+	+	÷	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	٠	+	+	+ +
DIGESTIVE SYSTEM	<u> </u>											-												
SALIVARY GLAND	±	+	+	. <u>+</u>	+	+_	+	+	+	+	. +	<u>+</u>	+	+.	+	+	+	+	+	+	+	+	+	+ +
LIVER Hepatocellular adenoma Hepatocellular carcinoma	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	•	+	+	+ +
BILE DUCT	+	+	+	+	+	+	+	+	+	+	+	+	+	+	ŧ	+	+	ŧ.	+	+	+	+	+	+_+
GALLBLADDER & COMMON BILE DUCT	+	+	4	N	+	+	+	<u>N</u>	N	+	N	N	+	+	+	N	N	+	+	+	+	N	<u>+</u>	+ +
PANCREAS	+	+	+	+	+	+	+	+	+	+	-	+	+	+	+_	+	+	+	+	+	+	+	+	+ +
ESOPHAGUS	+	+	+	+	+	+	+	+	+	+_	+	+	+	+	+.	+	+	+	+	<u>+</u>	+	+	+	+ +
STOMACH Squamous Cell Papilloma	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	-	+	•	+ +
SMALL INTESTINE	+	+	+	+	-	+	+	t	+	+	-	-	+	. t	+	-	-	+	+	+	-	+	+	+ +
LARGE INTESTINE	+	+	+	+	-	+	+	+	+	+	-	ŧ	÷	+	÷	+	÷	+	+	+	-	+	+	+ +
URINARY SYSTEM																								
KIDNEY	+	_ <u>+</u>	+	+	+	+	+	+	+	+	+	+	+	+	+.	+	+.	+	+	+	ŧ.,	+	+	+ +
URINARY BLADDER	+	+	+	+	٠	+	٠	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+ +
ENDOCRINE SYSTEM						_																		
PITUITARY	+	+	+	+	-		+	+		+	-	+	+	+	ŧ	+	÷	+	+	+	-	+	+	+ -
ADRENAL	+	.+	+	+	+	t	+	÷	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+ +
THYROID	<u> </u>	+	ŧ	+	+	+	+	+	÷	÷	+	+	+	+	+	+	+	+	+	+	ŧ.	+	+	+ +
PARATHYROID	-	~	+	-	-	+	+	+	+	-	-	+	+	٠	-	-	÷	÷	+	+	÷	÷	+	- +
REPRODUCTIVE SYSTEM	╉──																-							
MAMMARY GLAND	+	+	+	+	+	м	N	N	N.	+	N	+	+	+	+	+	+	+	+	+	+	+	+	+ +
UTERUS	1+	+	+	+	+	+	÷	+	+	+	-	+	+	+	÷	+	+	+	+	+	+	+	+	+ +
OVARY	+	+	+	+	+	+	+	+	+	+	-	+	+	+	+	+	+	÷	+	+	÷	+	÷	+ +
NERVOUS SYSTEM																								<u></u>
BRAIN	+	+	÷	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	÷	+	+	+ +
ALL OTHER SYSTEMS	╉──																							
MULTIPLE DRGANS NOS Maig.lymphoma, lymphocytic typ Maig.lymphoma, histiocytic typ	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N P
+: TISSUE EXAMINED MICROSCOP -: REQUIRED TISSUE NOT EXAMI X: Tumor incidence N: Necropsy, No Autolysis, N S: Animal Mis-Sexed	ICAL NED 0 mi	LY MIC CRC	:R0:	5C0F 0PIC	PICA ; E)	ALLY (AMJ	NAT	ION			C: A: M: B:	N(N) A) A)	D TI ECRO JTOL NIMA NE	SSU PSY YSI L P	E S IS IS	INFO ND H Sing Pe	RM/	ATII TOLI DRMI	DN S DGY ED	SUBI DUI		TED D Pi	107	DCOL

												-57														
ANIMAL Number	0 3 1	0 4 0	4	0 5 0	1 2	2	1	3		34	1 8	2	2	4	0	0	8	0	1	2	2	2	2	4	4	TOTAL
WEEKS ON STUDY	5	5	5	5	5	5	6	6	6	9	21	9	- 91	8	9	9	9	9	9	9	9	9	9	9	믱	TISSUES
RESPIRATORY SYSTEM	31	31	31	31	_21	71	21	.41	51	81	91	91	. 91	21	11	1	1	_11	11	11	11	11	11	.11	4	·
LUNGS AND BRONCHI Alveolar/bronchiolar Adenoma	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	*	+	+	+	+	+	+	+	50
TRACHEA	+	+	+	+	+	+	+	+	+	+	+	÷	+	+	+	+	+	+	+	+	+	+	+	+	+	47
HEMATOPOIETIC SYSTEM							-																	·	-	
BONE MARROW	+	+	+	+	+	+	+	+	+	+_	t	+	+	+	+	+	+	+	+	+	+	÷	+.		+	50
SPLEEN	+	+	+	+	+	+	+	-	+	+	+	+		ŧ.	+	+	+	+	+	+	+	+	÷	ŧ	t	46
LYMPH NODES	<u>+</u>	ŧ	+	+	+	+	+	+	+	+	+	+	+	+	+	+.	t	+	-	+	+	+	+	+	+	47
THYMUS	+	-	+	+	+	÷	+	+	+	+	+	+	+	+	+	+	÷	+	-	+	-	-	+	÷	+	43
CIRCULATORY SYSTEM										• •											_				-1	
HEART	+	+	÷	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	÷	÷	+	+	+	50
DIGESTIVE SYSTEM																	-									
SALIVARY GLAND	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	ŧ	+	÷	÷	+	50
LIVER Hepatocellular adénoma Hepatocellular carcinoma	+	+	+	+	+	+	+	+	+	+	+ X	+	+	+	+	+	+	+	+	+	+	+	+	+	×	50
BILE DUCT	÷	+	+	+	+	+	+	+	+	+	+	+	+.	+.	+	+	+	+	+	+	+	+	+	+	+	50
GALLBLADDER & COMMON BILE DUCT	+	+	+	+	+	+	+	N	+	+	N	N	N	+	+	+	+	+	+	N	N.	.	t _	+	+	50×
PANCREAS	<u>+</u>	t	+	+	+	+	+	+	+	+	÷	+	+	+	+	+	+	+	+	+	÷	+	+	+	+	49
ESOPHAGUS	+	+	+	.+	+	+	+	+	+	+.	+	+.	+	+	+	ŧ.	+	. .	+	+	+	+	+	+	+	50
STOMACH Squamous cell papilloma	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	*	+	t	49
SMALL INTESTINE	<u>+</u>	+	+	+	+	+	-	-	+	+	+	+	+	+	+	+	ŧ.	+	+	+	ŧ	+	+	+	t	42
LARGE INTESTINE	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	47
URINARY SYSTEM																									-	
KIDNEY	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	50
URINARY BLADDER	+	+	+	+	+	+	+	-	+	+	+	+	+	+	+	+	÷	+	+	+	+	+	+	+	+	49
ENDOCRINE SYSTEM																				-						
PITUITARY	_	+	÷	-	+	+	+	+	-	+	-	+	-	+	+	+	+	+	+	+	+	+	-	+	+	
ADRENAL	+	ŧ	+	<u>+</u>	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	50
THYROID	<u>+</u>	+	+	÷	+	+	+	+	+	+	+	+	+	. <u>+</u>	+	+	+	+	+	+	+	ŧ.	ŧ.	+	+	
PARATHYROID	-	-	+	+	+	+	+	-	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	38
REPRODUCTIVE SYSTEM																										<u> </u>
MAMMARY GLAND	+	+	÷	+	+	+	+	+	+	+	+	+	N	+	+	+	+	+	+	+	ŧ.	N	+	+	+	<u>50×</u>
UTERUS	<u>+</u>	+	. +	+	.	+	+	+	+	+	+	+	+	+	+	+	ŧ	+	+	+	+	+	+	+	+	49
OVARY	+	+	+	+	+	+	+	+	+	+	+	+	+	٠	+	+	+	+	+	+	+	+	+	+	+	49
NERVOUS SYSTEM							_																			
BRAIN	+	+	+	+	+	+	+	+	+	+	+	+	+	+	÷	+	+	+	+	+	+	+	+	+	+	50
ALL OTHER SYSTEMS						-																				
MULTIPLE ORGANS NOS Malig.lymphoma, lymphocytic typ Malig.lymphoma, histiocytic typ	N	N	N	N	н	N	N	N	N	N	N X	N	N	N	N	NX	N	N	N	N X	N	N	N	N	м	50× 2 1

TABLE B4. FEMALE MICE: TUMOR PATHOLOGY (CONTINUED) **HIGH DOSE**

* ANIMALS NECROPSIED

 +: TISSUE EXAMINED MICROSCOPICALLY
 : NO TISSUE INFORMATION SUBMITTED

 -: REQUIRED TISSUE NOT EXAMINED MICROSCOPICALLY
 C: NECROPSY, NO HISTOLOGY DUE TO PROTOCOL

 X: TUMOR INCIDENCE
 A: AUTOLYSIS

 N: NECROPSY, NO AUTOLYSIS, NO MICROSCOPIC EXAMINATION
 M: ANIMAL MISSING

 S: ANIMAL MISSERED
 D: NO HECROPSY PERFORMED

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APPENDIX C

SUMMARY OF THE INCIDENCE OF NONNEOPLASTIC LESIONS IN RATS ADMINISTERED GERANYL ACETATE IN CORN OIL BY GAVAGE

TABLE C1.

	VEHICLE Control	LOW DOSE	HIGH DOSE
ANIMALS INITIALLY IN STUDY ANIMALS NECROPSIED ANIMALS EXAMINED HISTOPATHOLOGICALLY	50 50 50	50 50 50	50 50 50
INTEGUMENTARY SYSTEM			
*SKIN EPIDERMAL INCLUSION CYST	(50)	(50) 1 (2%)	(50)
INFLAMMATION, CHRONIC Hyperplasia, Epithelial	1 (2%)	1 (2%)	1 (24)
ACANTHOSIS	1 (2%)		
RESPIRATORY SYSTEM			
<pre>#TRACHEA INFLAMMATION, SUPPURATIVE</pre>	(27)	(43)	(33) 1 (3%)
#LUNG ASPIRATION, FOREIGN BODY CONGESTION, NOS EDEMA, NOS INFLAMMATION, FOCAL	(50) 4 (8%) 4 (8%) 1 (2%)	(50) 4 (8%)	(49) 2 (4%) 6 (12%) 2 (4%)
INFLAMMATION, INTERSTITIAL PNEUMONIA, ASPIRATION INFLAMMATION, SUPPURATIVE	1 (2%) 2 (4%)		1 (2%)
INFLAMMATION GRANULOMATOUS FOCAL Hyperplasia, alveolar epithelium Histiocytosis	1 (2%) 2 (4%)		4 (8%) 2 (4%)
#LUNG/ALVEOLI Hyperplasia, Adenomatous	(50)	(50) 1 (2%)	(49)
#ALVEOLAR EPITHELIUM	6 (16%) (50)	(50)	(49)
HYPERPLASIA, ADENOMATOUS	2 (4%)	(20)	(177

SUMMARY OF THE INCIDENCE OF NONNEOPLASTIC LESIONS IN MALE RATS ADMINISTERED GERANYL ACETATE IN CORN OIL BY GAVAGE

	VEHICLE Control	LOW DOSE	HIGH DOSE
HEMATOPOIETIC SYSTEM			
<pre>#BONE MARROW HYPERPLASIA, RETICULUM CELL</pre>	(50) 1 (2%)	(50)	(49)
#SPLEEN FIBROSIS METAMORPHOSIS, FATTY ATROPHY, NOS	(49) 1 (2%) 1 (2%) 1 (2%)	(50)	(50)
ATROPHY, FOCAL Hyperplasia, lymphoid Hematopoiesis	1 (2%) 2 (4%)	1 (2%)	1 (2%) 1 (2%)
#MANDIBULAR L. NODE INFLAMMATION, SUPPURATIVE HYPERPLASIA, NOS HYPERPLASIA, CYSTIC	(50) 1 (2%)	(50) 1 (2%) 1 (2%)	(48)
<pre>#MESENTERIC L. NODE DEGENERATION, CYSTIC</pre>	(50)	(50) 1 (2%)	(48)
<pre>#LUNG LEUKOCYTOSIS, NOS</pre>	(50) 1 (2%)	(50)	(49) 2 (4%)
<pre>\$LIVER LEUKOCYTOSIS, NOS</pre>	(50)	(50) 1 (2%)	(50)
<pre>#KIDNEY HYPERPLASIA, LYMPHOID</pre>	(50)	(50)	(50) 1 (2%)
<pre>#THYMUS HYPERPLASIA, EPITHELIAL HYPERPLASIA, CYSTIC HYPERPLASIA, PLASMA CELL</pre>	(39)	(41) 1 (2%)	(41) 1 (2%) 1 (2%) 1 (2%)
CIRCULATORY SYSTEM			
*MULTIPLE ORGANS PERIARTERITIS	(50) 1 (2%)	(50)	(50)
<pre>#HEART/ATRIUM THROMBOSIS, NOS</pre>	(50)	(49)	(50) 1 (2%)
#MYOCARDIUM FIBROSIS, FOCAL	(50) 13 (26%)	(49) 5 (10%)	(50) 5 (10%)

TABLE C1. MALE RATS: NONNEOPLASTIC LESIONS (CONTINUED)

	VEHICLE Control	LOW DOSE	HIGH DOSE
PERIARTERITIS	1 (2%)		
<pre>#ENDOCARDIUM FIBROSIS, FOCAL</pre>	(50) 1 (2%)	(49)	(50)
<pre>#PANCREAS PERIARTERITIS</pre>	(49)	(48) 2 (4%)	(50)
*MESENTERY PERIARTERITIS	(50) 1 (2%)	(50) 1 (2%)	(50)
DIGESTIVE SYSTEM			
<pre>#PAROTID DUCT INFLAMMATION, SUPPURATIVE</pre>	(50)	(49) 1 (2%)	(46)
#LIVER	(50)	(50)	(50)
CONGESTION, NOS DEGENERATION, CYSTIC	1 (2%)	1 (2%)	2 (1 %) 4 (8%)
CYTOPLASMIC VACUOLIZATION		3 (6%)	2 (4%)
NODULAR REGENERATION	1 (2%)		
#PORTAL TRACT	(50)	(50)	(50)
INFLAMMATION, CHRONIC FOCAL	1 (2%)		1 (2/)
#LIVER/CENTRILOBULAR	(50)	(50)	(50)
CONGESTION, NOS NECROSIS, NOS	1 (2%)	1 (2%)	1 (2%)
#LIVER/HEPATOCYTES METAMORPHOSIS, FATTY	(50) 1 (2%)	(50)	(50)
#BILE DUCT	(50)	(50)	(50)
HYPERPLASIA, FOCAL	2 (4%)	15 (50%)	2 (44)
#PANCREAS	(49)	(48)	(50)
ATROPHY, FOCAL	6 (12%)	2 (4%)	1 (2%)
#PANCREATIC ACINUS	(49)	(48)	(50)

TABLE C1. MALE RATS: NONNEOPLASTIC LESIONS (CONTINUED)
	VEHICLE	VEHICI F		
	CONTROL	LOW DOSE	HIGH DOSE	
#ESOPHAGUS INFLAMMATION, SUPPURATIVE	(50)	(49)	(47) 1 (2%)	
#STOMACH INFLAMMATION, CHRONIC	(50)	(50) 1 (2%)	(50)	
#GASTRIC MUCOSA ULCER, NOS ULCER, CHRONIC HYPERPLASIA, EPITHELIAL	(50) 1 (2%) 1 (2%)	(50) 1 (2%) 4 (8%)	(50) 2 (4%) 2 (4%)	
HYPERPLASIA, PAPILLARY #GASTRIC FUNDAL GLAND	(50)	(50)	2 (4%) (50)	
DILATATION, NOS		(20)	1 (2%)	
#FORESTOMACH ULCER, NOS	(50) 1 (2%)	(50)	(50)	
INFLAMMATION, CHRONIC HYPERPLASIA, EPITHELIAL	1 (2%)		1 (2%) 2 (4%)	
#DUODENUM Hemorrhage	(50) 1 (2%)	(50)	(47)	
#DUODENAL MUCOSA Ulcer, nos	(50)	(50)	(47) 1 (2%)	
*RECTUM INFLAMMATION, NOS	(50)	(50) 1 (2%)	(50)	
URINARY SYSTEM				
*KIDNEY	(50)	(50)	(50)	
NEPHROSIS, NOS NECROSIS, MEDULLARY	40 (80%) 1 (2%)	38 (76%)	45 (90%)	
<pre>#KIDNEY/PELVIS INFLAMMATION, NOS HYPERPLASIA, EPITHELIAL</pre>	(50)	(50) 1 (2%) 1 (2%)	(50)	
#URINARY BLADDER INFLAMMATION, NOS HYPERPLASIA, EPITHELIAL	(50)	(50) 2 (4%) 1 (2%)	(50)	

	VEHICLE Control	LOW DOSE	HIGH DOSE
ENDOCRINE SYSTEM			
<pre>#PITUITARY EMBRYONAL DUCT CYST HYPERPLASIA, NOS HYPERPLASIA, FOCAL ANGIECTASIS</pre>	(49) 2 (4%) 1 (2%) 1 (2%)	(50) 1 (2%) 2 (4%) 1 (2%)	(48) 1 (2%) 1 (2%)
#ADRENAL ANGIECTASIS	(50) 1 (2%)	(50)	(50)
#ADRENAL CORTEX Cytoplasmic vacuolization Focal cellular change	(50)	(50) 3 (6%) 1 (2%)	(50) 3 (6%) 1 (2%)
#ADRENAL MEDULLA Hyperplasia, focal	(50) 3 (6%)	(50) 3 (6%)	(50) 8 (16%)
<pre>#THYROID ULTIMOBRANCHIAL CYST CYSTIC FOLLICLES DEGENERATION, CYSTIC HYPERPLASIA, C-CELL ANGIECTASIS</pre>	(50) 3 (6%) 2 (4%) 1 (2%)	(48) 4 (8%) 2 (4%) 5 (10%)	(45) 1 (2%) 3 (7%) 7 (16%) 2 (4%)
<pre>#THYROID FOLLICLE HYPERPLASIA, CYSTIC</pre>	(50)	(48)	(45) 1 (2%)
REPRODUCTIVE SYSTEM			
*MAMMARY GLAND GALACTOCELE CYSTIC DUCTS HEMORRHAGIC CYST INFLAMMATION, CHRONIC HYPERPLASIA, CYSTIC CYSTIC DISEASE	(50) 1 (2%) 1 (2%) 1 (2%) 20 (40%)	(50) 1 (2%) 1 (2%) 1 (2%) 15 (30%)	(50) 1 (2%) 2 (4%) 15 (30%)
*PREPUTIAL GLAND INFLAMMATION, SUPPURATIVE INFLAMMATION CHRONIC SUPPURATIVE HYPERPLASIA, NOS HYPERPLASIA, CYSTIC	(50) 4 (8%) <u>1 (2%)</u>	(50) 4 (8%) 1 (2%) 1 (2%)	(50) 3 (6%) 1 (2%)

	VEHICLE Control	LOW DOSE	HIGH DOSE
<pre>#PROSTATE INFLAMMATION, NOS INFLAMMATION, SUPPURATIVE INFLAMMATION CHRONIC SUPPURATIVE HYPERPLASIA, EPITHELIAL</pre>	(50) 21 (42%)	(49) 14 (29%) 1 (2%)	(49) 1 (2%) 14 (29%) 1 (2%)
<pre>#TESTIS INFLAMMATION, SUPPURATIVE ATROPHY, NOS HYPERPLASIA, INTERSTITIAL CELL</pre>	(50) 1 (2%) 1 (2%)	(50)	(49) 1 (2%) 1 (2%)
*EPIDIDYMIS GRANULOMA, SPERMATIC	(50)	(50)	(50) 1 (2%)
*SCROTUM Ulcer, Nos	(50)	(50)	(50) 1 (2%)
<pre>*BRAIN #BRAIN HYDROCEPHALUS, NOS CONGESTION, NOS HEMORRHAGE CALCIFICATION, FOCAL</pre>	(50) 1 (2%)	(50) 1 (2%)	(50) 1 (2%) 1 (2%)
CEREBRAL BASAL SURFA DISPLACEMENT, NOS	(50) 1 (2%)	(50)	(50)
DISPLACEMENT, NOS		2 (4%)	
*EYE HEMORRHAGE RETINOPATHY CATARACT	(50)	(50) 1 (2%) 1 (2%)	(50) 1 (2%) 11 (22%) 10 (20%)
*EYE/CORNEA Inflammation, Nos ULCER. Nos	(50)	(50) 1 (2%)	(50) 1 (2%)

	VEHICLE Control	LOW DOSE	HIGH DOSE
MUSCULOSKELETAL SYSTEM			
*FEMUR FRACTURE-DISLOCATION	(50) 1 (2%)	(50)	(50)
BODY CAVITIES			
*MESENTERY	(50)	(50)	(50)
NECROSIS, FAT	1 (2%) 6 (12%)	4 (8%)	6 (12%)
ALL OTHER SYSTEMS			
SOLE OF FOOT Callus	2	1	
OMENTUM NECROSIS, FAT	8		4
SPECIAL MORPHOLOGY SUMMARY			
NO LESION REPORTED		4	1

TABLE C1. MALE RATS: NONNEOPLASTIC LESIONS (CONTINUED)

* NUMBER OF ANIMALS NECROPSIED

TABLE C2.

	VEHICLE Control	LOW DOSE	HIGH DOSE
ANIMALS INITIALLY IN STUDY ANIMALS NECROPSIED ANIMALS EXAMINED HISTOPATHOLOGICALLY	50 50 50	50 50 50 50	50 50 50
INTEGUMENTARY SYSTEM			
*SKIN ULCER, CHRONIC ATROPHY, NOS HYPERPLASIA, EPITHELIAL	(50) 1 (2%)	(50)	(50) 1 (2%) 1 (2%)
*SUBCUT TISSUE NECROSIS, FAT	(50) 1 (2%)	(50)	(50)
RESPIRATORY SYSTEM			
*LARYNX INFLAMMATION, NOS	(50) 1 (2%)	(50)	(50)
#TRACHEA Inflammation, NOS	(38) 2 (5%)	(43) 1 (2%)	(41) 2 (5%)
#LUNG/BRONCHUS Inflammation, Nos	(48)	(50)	(49) 2 (4%)
#LUNG/BRONCHIOLE Inflammation, focal	(48)	(50)	(49) 1 (2%)
#LUNG CONGESTION, NOS EDEMA, NOS INFLAMMATION, FOCAL PNEUMONIA, ASPIRATION HYPERPLASIA, ALVEOLAR EPITHELIUM HISTIOCYTOSIS	(48) 2 (4%) 1 (2%) 1 (2%)	(50) 12 (24%) 2 (4%) 1 (2%)	(49) 1 (2%) 1 (2%) 1 (2%)
#LUNG/ALVEOLI	- 3 -	(50) 2 (4%)	(49) 2 (4%)

SUMMARY OF THE INCIDENCE OF NONNEOPLASTIC LESIONS IN FEMALE RATS ADMINISTERED GERANYL ACETATE IN CORN OIL BY GAVAGE

	VEHICLE Control	LOW DOSE	HIGH DOSE
#ALVEOLAR EPITHELIUM HYPERPLASIA, ADENOMATOUS	(48) 2 (4%)	(50)	(49)
HEMATOPOIETIC SYSTEM			
<pre>#BONE MARROW MYELOFIBROSIS HYPERPLASIA, HEMATOPOIETIC</pre>	(49) 2 (4%)	(50) 1 (2%)	(50) 1 (2%)
<pre>#SPLEEN HYPERPLASIA, LYMPHOID HEMATOPOIESIS</pre>	(49) 1 (2%) 5 (10%)	(50) 1 (2%)	(47) 1 (2%)
#AXILLARY LYMPH NODE Hyperplasia, nos Angiectasis	(50) 1 (2%) 1 (2%)	(50)	(50)
*BONE Hyperplasia, granulocytic	(50)	(50)	(50) 1 (2%)
<pre>#LUNG LEUKOCYTOSIS, NOS HYPERPLASIA, RETICULUM CELL HYPERPLASIA, LYMPHOID</pre>	(48) 1 (2%)	(50) 2 (4%)	(49) 1 (2%) 1 (2%) 1 (2%)
<pre>#LIVER LEUKOCYTOSIS, NOS HEMATOPOIESIS</pre>	(50) 5 (10%) 1 (2%)	(50) 1 (2%)	(49) 4 (8%)
<pre>#THYMUS CONGESTION, NOS</pre>	(41)	(43) 1 (2%)	(36)
CIRCULATORY SYSTEM			
*MEDIASTINUM PERIARTERITIS	(50)	(50)	(50) 1 (2%)
<pre>#RIGHT ATRIUM DILATATION, NOS</pre>	(50) 1 (2%)	(49)	(49)
#MYOCARDIUM FIBROSIS, FOCAL	(50) <u>4 (8%)</u>	(49) <u>1 (2%)</u>	(49) 2 (4%)

	CONTROL	LOW DOSE	HIGH DOSE
DIGESTIVE SYSTEM			
<pre>#PAROTID GLAND ATROPHY, FOCAL</pre>	(50)	(48) 1 (2%)	(48)
#LIVER DEFORMITY, NOS CYTOPLASMIC VACUOLIZATION BASOPHILIC CYTO CHANGE REGENERATION, NOS NODULAR REGENERATION	(50) 8 (16%) 1 (2%)	(50) 1 (2%) 3 (6%)	(49) 1 (2%) 2 (4%) 1 (2%) 1 (2%)
<pre>#LIVER/CENTRILOBULAR NECROSIS, NOS ATROPHY, NOS</pre>	(50)	(50)	(49) 1 (2%) 2 (4%)
#LIVER∕HEPATOCYTES BASOPHILIC CYTO CHANGE	(50)	(50) 1 (2%)	(49)
<pre>#BILE DUCT HYPERPLASIA, NOS HYPERPLASIA, FOCAL</pre>	(50) 36 (72%) 1 (2%)	(50) 16 (32%)	(49) 12 (24%)
#PANCREAS Ectopia Cystic ducts Atrophy, Nos	(50) 1 (2%) 1 (2%)	(49)	(47) 1 (2%)
ATROPHY, FOCAL	4 (8%)	1 (2%)	(49)
EDEMA, NOS ULCER, NOS INFLAMMATION, ACUTE/CHRONIC NECROSIS, COAGULATIVE HYPERPLASIA, EPITHELIAL HYPERPLASIA, BASAL CELL	1 (2%)		1 (2%) 1 (2%) 1 (2%) 1 (2%) 1 (2%)
#GASTRIC FUNDAL GLAND DILATATION, NOS	(50) 1 (2%)	(49)	(49) 1 (2%)
<pre>#FORESTOMACH INFLAMMATION, CHRONIC HYPERPLASIA, EPITHELIAL</pre>	(50)	(49)	(49) 1 (2%) 2 (4%)
<pre>#INTESTINAL VILLUS NECROSIS, FOCAL</pre>	(50)	(48)	(47)

	VEHICLE Control	LOW DOSE	HIGH DOSE
*RECTUM PARASITISM	(50) 1 (2%)	(50)	(50)
URINARY SYSTEM			
#KIDNEY	(50)	(49)	(49)
LYMPHOCYTIC INFLAMMATORY INFILTR NEPHROSIS, NOS	1 (2%) 13 (26%)	6 (12%)	31 (63%)
<pre>#KIDNEY/MEDULLA CALCINOSIS, NOS</pre>	(50)	(49) 2 (4%)	(49) 1 (2%)
<pre>#KIDNEY/PELVIS INFLAMMATION, SUPPURATIVE</pre>	(50) 1 (2%)	(49)	(49)
*URETER CALCINOSIS, NOS	(50)	(50)	(50) 1 (2%)
#URINARY BLADDER INFLAMMATION, NOS	(50) 1 (2%)	(47)	(49) 1 (2%)
ENDOCRINE SYSTEM			
*PITUITARY	(47)	(43)	(48)
HYPERPLASIA, NOS Hyperplasia, focal	1 (2%)		2 (4%) 1 (2%) 5 (10%)
ANGIECTASIS	4 (9%)	4 (9%)	1 (2%)
<pre>#ADRENAL CORTEX CYTOPLASMIC VACUOLIZATION</pre>	(50)	(49) 3 (6%)	(49) 3 (6%)
#ADRENAL MEDULLA Hyperplasia, focal	(50) 3 (6%)	(49) 1 (2%)	(49) 2 (4%)
#THYROID Embryonal duct cyst	(49)	(46)	(49)
ULTIMOBRANCHIAL CYST CYSTIC FOLLICLES	2 (4%)	1 (2%)	2 (4%)
HYPERPLASIA, C-CELL Hyperplasia, follicular-cell	1 (2%)	1 (2%)	5 (10%)

	VEHICLE Control	LOW DOSE	HIGH DOSE
<pre>#THYROID FOLLICLE HYPERPLASIA, CYSTIC</pre>	(49)	(46)	(49) 1 (2%)
REPRODUCTIVE SYSTEM			
*MAMMARY GLAND Inflammation chronic suppurative Hyperplasia, cystic	(50) 1 (2%) 4 (8%)	(50)	(50)
CYSTIC DISEASE	35 (70%)	35 (70%)	17 (34%)
*PREPUTIAL GLAND	(50)	(50)	(50)
CYSTIC DUCTS TNFLAMMATION, FOCAL		1 (2%) 1 (2%)	1 (2%)
INFLAMMATION, SUPPURATIVE Hyperplasia, cystic Cystic disease	3 (6%) 1 (2%) 2 (4%)	2 (4%) 1 (2%)	1 (2%) 1 (2%)
#UTERUS	(50)	(49)	(50)
PROLAPSE Hydrometra	1 (2%)	1 (2)	1 (2%)
HEMATOMA, NOS	1 (2%)	4 (2%)	
HEMATOMETRA Inflammation, suppurative	2 (4%)	3 (6%)	4 (8%)
#UTERUS/ENDOMETRIUM	(50)	(49)	(50)
CYST, NOS Hyperplasia, cystic	3 (6%)	1 (2%) 3 (6%)	4 (8%) 5 (10%)
#OVARY	(50)	(48)	(48)
CYST, NOS CYSTIC FOLLICLES	4 (2%)	1(2%)	1 (2%)
FOLLICULAR CYST, NOS	1 (2%)	2 (4%)	<u> </u>
NERVOUS SYSTEM			
#CEREBRAL BASAL SURFA DISPLACEMENT, NOS	(50) 2 (4%)	(49)	(50)
#BASAL GANGLIA	(50)	(49)	(50)

	VEHICLE Control	LOW DOSE	HIGH DOSE
#PONS HEMORRHAGE	(50) 1 (2%)	(49)	(50)
SPECIAL SENSE ORGANS			
*EYE Hemorrhage Retinopathy Cataract	(50) 1 (2%) 1 (2%)	(50) 1 (2%) 13 (26%) 13 (26%)	(50) 2 (4%)
*HARDERIAN GLAND Ectopia	(50) 1 (2%)	(50) 2 (4%)	(50) 2 (4%)
MUSCULOSKELETAL SYSTEM None			
BODY CAVITIES			
*MESENTERY STEATITIS INFLAMMATION, CHRONIC NECROSIS, FAT	(50) 1 (2%) 5 (10%)	(50) 1 (2%) 5 (10%)	(50) 2 (4%)
ALL OTHER SYSTEMS			
OMENTUM NECROSIS, FAT CALCIFICATION, NOS	4 1	2	1
SPECIAL MORPHOLOGY SUMMARY			
NO LESION REPORTED	1	1	2
<pre># NUMBER OF ANIMALS WITH TISSUE * NUMBER OF ANIMALS NECROPSIED</pre>	EXAMINED MICROSCOPI	CALLY	

APPENDIX D

SUMMARY OF THE INCIDENCE OF NONNEOPLASTIC LESIONS IN MICE ADMINISTERED GERANYL ACETATE IN CORN OIL BY GAVAGE

TABLE D1.

	VEHICLE Control	LOW DOSE	HIGH DOSE
ANIMALS INITIALLY IN STUDY ANIMALS NECROPSIED ANIMALS EXAMINED HISTOPATHOLOGICALLY	50 50 50	50 50 50	50 50 50
INTEGUMENTARY SYSTEM			
*SKIN EPIDERMAL INCLUSION CYST INFLAMMATION, ACUTE/CHRONIC	(50) 1 (2%)	(50)	(50) 1 (2%)
RESPIRATORY SYSTEM			
*NASAL CAVITY INFLAMMATION, SUPPURATIVE	(50)	(50)	(50) 1 (2%)
<pre>#TRACHEA CYSTIC DUCTS</pre>	(49) 1 (2%)	(48) 1 (2%)	(50)
#LUNG/BRONCHUS BRONCHIECTASIS	(50)	(49)	(50) 1 (2%)
<pre>#LUNG BRONCHOPNEUMONIA, NOS BRONCHOPNEUMONIA, FOCAL PNEUMONIA, LIPID PNEUMONIA, ASPIRATION INFLAMMATION, SUPPURATIVE BRONCHOPNEUMONIA, ACUTE INFLAMMATION, CHRONIC FOCAL INFLAMMATION GRANULOMATOUS FOCAL PROTEINOSIS, ALVEOLAR HYPERPLASIA, ADENOMATOUS HYPERPLASIA, ALVEOLAR EPITHELIUM </pre>	(50) 14 (28%) 2 (4%) 4 (8%) 2 (4%) 1 (2%) 1 (2%) 2 (4%)	(49) 14 (29%) 2 (4%) 1 (2%) 1 (2%) 1 (2%)	(50) 1 (2%) 4 (8%) 10 (20%) 1 (2%) 1 (2%) 1 (2%) 2 (4%) 1 (2%)
#BONE MARROW ATROPHY. NOS	(50)	(48)	(50)

SUMMARY OF THE INCIDENCE OF NONNEOPLASTIC LESIONS IN MALE MICE ADMINISTERED GERANYL ACETATE IN CORN OIL BY GAVAGE

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

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	VEHICLE Control	LOW DOSE	HIGH DOSE
#SPLEEN ATROPHY, NOS HEMATOPOIESIS	(50) 2 (4%)	(50) 1 (2%) 1 (2%)	(49) 3 (6%)
<pre>#MESENTERIC L. NODE ANGIECTASIS</pre>	(50)	(48)	(50) 5 (10%)
#THYMUS Cyst, Nos	(43)	(37) 1 (3%)	(36)
CIRCULATORY SYSTEM			
<pre>#HEART THROMBUS, ORGANIZED INFLAMMATION, CHRONIC FOCAL</pre>	(50) 1 (2%)	(49) 1 (2%)	(49)
DIGESTIVE SYSTEM			
#LIVER MINERALIZATION CYST, NOS INFLAMMATION, ACUTE SUPPURATIVE INFLAMMATION, CHRONIC FOCAL FIBROSIS	(50) 1 (2%) 1 (2%) 1 (2%) 1 (2%) 1 (2%)	(50) 1 (2%)	(50)
NECROSIS, NOS NECROSIS, FOCAL NECROSIS, COAGULATIVE	2 (4%) 3 (6%) 1 (2%)	2 (4%)	1 (2%)
NECROSIS, HEMORRHAGIC Cytoplasmic vacuolization	1 (2%)	7 (14%)	2 (4%) 47 (94%) 1 (2%)
FOCAL CELLULAR CHANGE CYTOLOGIC ALTERATION, NOS	3 (6%) 1 (2%)	7 (14%)	1 (24)
<pre>#LIVER/CENTRILOBULAR CYTOPLASMIC VACUOLIZATION</pre>	(50) 1 (2%)	(50)	(50)
<pre>#PANCREAS CYSTIC DUCTS INFLAMMATION, CHRONIC ATROPHY, NOS</pre>	(50) 1 (2%)	(49)	(49) 1 (2%) 1 (2%)
ATROPHY, FOCAL #ESOPHAGUS PERFORATION, INFLAMMATORY	(49)	1 (2%) (49)	(50)

	VEHICLE Control	LOW DOSE	HIGH DOSE
#STOMACH EROSION Hyperplasia, Epithelial	(50)	(50) 1 (2%)	(50) 1 (2%)
#GASTRIC MUCOSA Inflammation, acute suppurative	(50)	(50) 2 (4%)	(50)
<pre>#FORESTOMACH ULCER, NOS HYPERPLASIA, EPITHELIAL</pre>	(50) 1 (2%) 2 (4%)	(50) 1 (2%) 4 (8%)	(50) 4 (8%) 7 (14%)
<pre>#DUODENUM INFLAMMATION, ACUTE SUPPURATIVE</pre>	(48)	(49) 1 (2%)	(47)
<pre>#ILEUM INFLAMMATION, ACUTE SUPPURATIVE</pre>	(48)	(49)	(47) 1 (2%)
*ANUS INFLAMMATION, ACUTE SUPPURATIVE	(50) 1 (2%)	(50)	(50)
URINARY SYSTEM			
#KIDNEY PYELONEPHRITIS, ACUTE	(50) 1 (2%)	(50)	(50) 2 (4%)
NEPHROPATHY INFARCT, NOS CYTOPLASMIC VACUOLIZATION	1 (2%) 1 (2%)	5 (0%)	41 (82%)
#URINARY BLADDER INFLAMMATION, ACUTE SUPPURATIVE	(49) 1 (2%)	(49)	(50)
XURETHRA Obstruction, Nos	(50) 1 (2%)	(50)	(50)
ENDOCRINE SYSTEM			
#ADRENAL CORTEX CYTOPLASMIC VACUOLIZATION FOCAL CELLULAR CHANGE	(49) 1 (2%) 1 (2%)	(48) 1 (2%)	(50)
#ADRENAL MEDULLA Hyperplasia, Nos	(49)	(48)	(50)

	VEHICLE Control	LOW DOSE	HIGH DOSE
HYPERPLASIA, FOCAL	1 (2%)		
<pre>#THYROID CYSTIC FOLLICLES Degeneration, Cystic</pre>	(49) 2 (4%)	(47) 2 (4%)	(50) 5 (10%) 2 (4%)
HYPERPLASIA, CYSTIC Hyperplasia, follicular-cell	2 (4%) 1 (2%)		1 (2%)
<pre>#PANCREATIC ISLETS Hyperplasia, Nos</pre>	(50)	(49) 1 (2%)	(49)
EPRODUCTIVE SYSTEM			
¥PENIS Hemorrhage Inflammation, acute suppurative	(50) 1 (2%) 1 (2%)	(50)	(50)
*PREPUTIAL GLAND CYST, NOS CYSTIC DUCTS TNUCTS	(50) 1 (2%) 11 (22%)	(50) 11 (22%)	(50)
INFLAMMATION, ACUTE/CHRONIC INFLAMMATION, CHRONIC	2 (4%) 1 (2%)	2 (4%) 4 (8%)	
<pre>#PROSTATE INFLAMMATION, ACUTE SUPPURATIVE</pre>	(49) 2 (4%)	(50)	(50)
*SEMINAL VESICLE Inflammation, acute suppurative	(50) 1 (2%)	(50)	(50)
TESTIS GRANULOMA, SPERMATIC	(50) 1 (2%)	(50)	(50)
<pre>KEPIDIDYMIS LYMPHOCYTIC INFLAMMATORY INFILTR GRANULOMA, SPERMATIC</pre>	(50) 1 (2%)	(50)	(50)
ERVOUS SYSTEM			
CEREBRUM Abscess, NOS	(50)	(49)	(50) 1 (2%)

NONE

VEHICLE Control	LOW DOSE	HIGH DOSE
(50) 1 (2%)	(50) 1 (2%) 1 (2%) 2 (6%)	(50)
1 (2%)	1 (2%)	1 (2%)
(50)	(50) 2 (4%)	(50)
(50) 1 (2%) 1 (2%) 4 (8%) 1 (2%)	(50) 4 (8%)	(50) 2 (4%)
(50) 1 (2%)	(50)	(50)
2	3	
-	VEHICLE CONTROL (50) 1 (2%) 1 (2%) (50) (50) (50) 1 (2%) 4 (8%) 1 (2%) 4 (8%) 1 (2%) (50) 1 (2%) (50) 1 (2%)	VEHICLE CONTROL LOW DOSE (50) (50) $1 (2x)$ $1 (2x)$ $1 (2x)$ $1 (2x)$ $2 (4x)$ $1 (2x)$ $1 (2x)$ $1 (2x)$ $1 (2x)$ $1 (2x)$ (50) (50) $1 (2x)$ $4 (8x)$ $1 (2x)$ $4 (8x)$ $1 (2x)$ $4 (8x)$ $1 (2x)$ $4 (8x)$ $1 (2x)$ 50 $1 (2x)$ $4 (8x)$ $1 (2x)$ 50

***** NUMBER OF ANIMALS NECROPSIED

TABLE D2.

	VEHICLE Control	LOW DOSE	HIGH DOSE
ANIMALS INITIALLY IN STUDY ANIMALS NECROPSIED ANIMALS EXAMINED HISTOPATHOLOGICALLY	50 50 50 50	50 50 50	50 50 50
INTEGUMENTARY SYSTEM			
*SKIN EPIDERMAL INCLUSION CYST INFLAMMATION, CHRONIC	(50)	(50)	(50) 1 (2%) 1 (2%)
*SUBCUT TISSUE INFLAMMATION, SUPPURATIVE	(50)	(50)	(50) 1 (2%)
RESPIRATORY SYSTEM			
<pre>#LUNG CONGESTION, NOS HEMORRHAGE BRONCHOPNEUMONIA, FOCAL PNEUMONIA, LIPID PNEUMONIA, ASPIRATION BRONCHOPNEUMONIA, ACUTE ABSCESS, CHRONIC PROTEINOSIS, ALVEOLAR HYPERPLASIA, ADENOMATOUS HYPERPLASIA, ALVEOLAR EPITHELIUM HISTIOCYTOSIS</pre>	(50) 13 (26%) 1 (2%) 1 (2%) 1 (2%)	(50) 5 (10%) 1 (2%) 3 (6%) 1 (2%) 1 (2%) 1 (2%) 2 (4%) 1 (2%)	(50) 5 (10%) 1 (2%) 12 (24%) 2 (4%)
HEMATOPOIETIC SYSTEM			
<pre>*MULTIPLE ORGANS HYPERPLASIA, LYMPHOID</pre>	(50)	(50) 1 (2%)	(50)
<pre>#BONE MARROW HYPERPLASIA, GRANULOCYTIC</pre>	(50)	(50) 1 (2%)	(50)
#SPLEEN ATROPHY, NOS	(50)	(50)	(46)

SUMMARY OF THE INCIDENCE OF NONNEOPLASTIC LESIONS IN FEMALE MICE ADMINISTERED GERANYL ACETATE IN CORN OIL BY GAVAGE

	VEHICLE Control	LOW DOSE	HIGH DOSE
HYPERPLASIA, LYMPHOID HEMATOPOIESIS	1 (2%) 10 (20%)	1 (2%) 2 (4%)	1 (2%)
#MANDIBULAR L. NODE Hyperplasia, lymphoid	(49)	(50) 1 (2%)	(47)
#MEDIASTINAL L.NODE Hyperplasia, Lymphoid	(49) 2 (4%)	(50)	(47)
#MESENTERIC L. NODE Angiectasis	(49) 1 (2%)	(50)	(47)
<pre>#RENAL LYMPH NODE Hyperplasia, Lymphoid</pre>	(49) 2 (4%)	(50)	(47)
<pre>#ILIAC LYMPH NODE HYPERPLASIA, LYMPHOID</pre>	(49) 2 (4%)	(50)	(47)
<pre>#LUNG LEUKOCYTOSIS, NOS</pre>	(50) 1 (2%)	(50)	(50)
<pre>#LIVER LEUKOCYTOSIS, NOS HEMATOPOIESIS</pre>	(50) 8 (16%)	(50) 2 (4%)	(50)
<pre>#THYMUS FOREIGN BODY, NOS INFLAMMATION, PYOGRANULOMATOUS</pre>	(47)	(40)	(43) 1 (2%) 1 (2%)
CIRCULATORY SYSTEM			
<pre>#HEART LYMPHOCYTIC INFLAMMATORY INFILTR</pre>	(50) 1 (2%)	(50)	(50)
#AURICULAR APPENDAGE Abscess, Chronic	(50)	(50) 1 (2%)	(50)
#MYOCARDIUM Inflammation, Chronic Degeneration, Granular	(50)	(50)	(50) 1 (2%) 1 (2%)
#ADRENAL Thrombosis, Nos	(50)	(50) 1 (2%)	(50)
<pre>#THYROID PERIARTERITIS</pre>	(50)	(48)	(49)

	VEHICLE Control	LOW DOSE	HIGH DOSE
DIGESTIVE SYSTEM			
#LIVER INFLAMMATION, GRANULOMATOUS NECROSIS, FOCAL NECROSIS, COAGULATIVE HEMOSIDEROSIS CYTOPLASMIC, VACUOLIZATION	(50) 3 (6%) 1 (2%)	(50) 1 (2%) 2 (4%) 2 (4%) 1 (2%) 27 (54%)	(50) 1 (2%) 46 (92%)
FOCAL CELLULAR CHANGE ANGIECTASIS	1 (2%) 1 (2%)	1 (2%)	
<pre>#BILE DUCT DILATATION, NOS</pre>	(50)	(50)	(50) 1 (2%)
<pre>#PANCREAS Atrophy, focal</pre>	(48) 1 (2%)	(49)	(49)
<pre>#FORESTOMACH ULCER, NOS HYPERPLASIA, EPITHELIAL</pre>	(50) 2 (4%)	(50) 1 (2%) 2 (4%)	(49) 1 (2%) 3 (6%)
URINARY SYSTEM			
#KIDNEY LYMPHOCYTIC INFLAMMATORY INFILTR INFLAMMATION, CHRONIC FOCAL AMYLOIDOSIS CYTOPLASMIC VACUOLIZATION	(50) 1 (2%) 1 (2%)	(49) 1 (2%) 1 (2%) 20 (41%)	(50) 33 (66%)
#KIDNEY/TUBULE CYTOPLASMIC VACUOLIZATION	(50)	(49) 4 (8%)	(50) 4 (8%)
ENDOCRINE SYSTEM			
#PITUITARY ANGIECTASIS	(44) 2 (5%)	(43) 1 (2%)	(39)
#ADRENAL CORTEX Inflammation, Chronic Fibrosis, Focal	(50) 1 (2%) 1 (2%)	(50)	(50)
NECROSIS, NOS Cytoplasmic vacuolization	1 (2%)	1 (2%)	

	VEHICLE Control	LOW DOSE	HIGH DOSE
* THYROID CYSTIC FOLLICLES DEGENERATION, CYSTIC HYPERPLASIA, CYSTIC HYPERPLASIA, FOLLICULAR-CELL	(50) 5 (10%) 1 (2%) 1 (2%) 2 (4%)	(48) 3 (6%) 1 (2%) 2 (4%) 1 (2%)	(49) 1 (2%) 1 (2%)
REPRODUCTIVE SYSTEM			
*MAMMARY GLAND CYSTIC DUCTS	(50) 2 (4%)	(50) 1 (2%)	(50)
*PREPUTIAL GLAND CYSTIC DUCTS INFLAMMATION, CHRONIC	(50) 1 (2%)	(50) 1 (2%)	(50)
*VAGINA INFLAMMATION, ACUTE SUPPURATIVE	(50) 1 (2%)	(50) 7 (14%)	(50) 2 (4%)
#UTERUS HYDROMETRA HEMORRHAGE	(50) 1 (2%)	(50) 1 (2%)	(49) 6 (12%)
PYOMETRA INFLAMMATION, ACUTE SUPPURATIVE AMYLOIDOSIS	3 (6%) 1 (2%)	3 (6%)	1 (2%)
<pre>#UTERUS/ENDOMETRIUM INFLAMMATION, SUPPURATIVE HYPERPLASIA, CYSTIC</pre>	(50) 46 (92%)	(50) 3 (6%) 44 (88%)	(49) 33 (67%)
#OVARY CYST, NOS INFLAMMATION, ACUTE SUPPURATIVE	(48) 4 (8%) 2 (4%)	(47)	(49) 1 (2%)
NERVOUS SYSTEM			
NONE			
SPECIAL SENSE ORGANS			
*EXTERNAL EAR INFLAMMATION, ACUTE SUPPURATIVE	(50) 2(4%)	(50)	(50)
<pre># NUMBER OF ANIMALS WITH TISSUE EXAM: * NUMBER OF ANIMALS NECROPSIED</pre>	INED MICROSCOP	ICALLY	

Geranyl Acetate

	VEHICLE Control	LOW DOSE	HIGH DOSE
*MIDDLE EAR INFLAMMATION, ACUTE SUPPURATIVE	(50) 2 (4%)	(50) 1 (2%)	(50)
MUSCULOSKELETAL SYSTEM			
*INTERCOSTAL MUSCLE Abscess, Nos	(50)	(50) 1 (2%)	(50)
BODY CAVITIES			
*PLEURA INFLAMMATION, FIBRINOUS	(50) 1 (2%)	(50)	(50)
*MESENTERY INFLAMMATION, ACUTE/CHRONIC NECROSIS, FAT	(50) 1 (2%) 1 (2%)	(50)	(50)
ALL OTHER SYSTEMS			
*MULTIPLE ORGANS INFLAMMATION, ACUTE INFLAMMATION, ACUTE SUPPURATIVE	(50) 1 (2%) 11 (22%)	(50) 2 (4%)	(50)
SPECIAL MORPHOLOGY SUMMARY			
NO LESION REPORTED		1	4
NUMBER OF ANIMALS WITH TISSUE EXAM: NUMBER OF ANIMALS NECROPSIED	INED MICROSCOPI	CALLY	

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APPENDIX E

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HISTORICAL INCIDENCES OF TUMORS IN F344/N RATS

Laboratory	Squamous Cell Papilloma	Squamous Cell Carcinoma
Battelle	0/100 (0.0%)	1/100 (1.0%)
Gulf South	1/294 (0.3%)	3/294 (1.0%)
Hazleton	0/50 (0.0%)	1/50 (2.0%)
Litton (b)	4/130 (3.1%)	0/130 (0.0%)
Mason (c)	3/125 (2.4%)	3/125 (2.4%)
Papanicolaou	0/50 (0.0%)	0/50 (0.0%)
Southern (c)	7/250 (2.8%)	2/250 (0.8%)
Total	15/999 (1.5%)	10/999 (1.0%)
Overall Historical Range High Low	3/50 0/50	2/48 0/50

TABLE E1. HISTORICAL INCIDENCE OF SKIN TUMORS IN MALE F344/N RATS RECEIVING CORN OIL BY GAVAGE (a)

(a) Data as of November 30, 1981 for studies of at least 104 weeks. The range is presented for groups of 35 or more animals.

(b) Includes 2 papillomas, NOS

(c) Greatest incidence of squamous cell papilloma or carcinoma (combined) 4/50.

TABLE E2. HISTORICAL INCIDENCE OF KIDNEY TUMORS IN MALE F344/N RATS RECEIVING CORN OIL BY GAVAGE (a)

Laboratory	Tumor Morphology			
Battelle		0/100 (0.0%)		
Gulf South	Kidney, NOS; tubular-cell adenocarcinoma	1/293 (0.3%)		
Hazleton		0/50 (0.0%)		
Litton	Kidney, NOS; adenocarcinoma, NOS	1/130 (0.8%)		
Mason	Kidney, NOS; tubular-cell adenocarcinoma	1/125 (0.8%)		
Papanicolaou		0/50 (0.0%)		
Southern	Kidney, NOS; adenocarcinoma, NOS	1/250 (0.4%)		
Total		4/998 (0.4%)		

(a) Data as of November 30, 1981 for studies of at least 104 weeks.

TABLE E3. HISTORICAL INCIDENCE OF ADRENAL TUMORS IN MALE F344/N RATS RECEIVING CORN OIL BY GAVAGE (a)

Laboratory	Pheochromocytoma	
Battelle	14/99 (14.1%)	
Gulf South	24/289 (8.3%)	
Hazleton	8/50 (16.0%)	
Litton	19/128 (14.8%)	
Mason	25 125 $(20.0^{c_{\ell}})$	
Papanicolaou	3 / 45 (6.7%)	
Southern	60/250 (24.0%)	
Total	153/986 (15.5%)	
Overall Historical Range		
High	16/50	
Low	2/46	

(a) Data as of November 30, 1981 for studies of at least 104 weeks. The range is presented for groups of 35 or more animals.

Geranyl Acetate

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APPENDIX F

CAGE POSITION AND INCIDENCE OF CATARACTS AND RETINOPATHY IN F344/N RATS ON THE TWO-YEAR STUDY WITH GERANYL ACETATE

Rack A						
High-Dose	Cage No.	1	2	3	4	5
Males	Animal No.	1-5	6-10	11-15	16-20	21-25
	Cataracts	3/5	2/5	3/5	0/5	2/5
	Retinopathy	3/5	2/5	3/5	0/5	3/5
	Cage No.	6	7	8	9	10
	Animal No.	26-30	31-35	36-40	41-45	46-50
	Cataracts	0/5	0/5	0/5	0/5	0/5
	Retinopathy	0/5	0/5	0/5	0/5	0/5
High-Dose	Cage No.	1	2	3	4	5
Females	Animal No.	1-5	6-10	11-15	16-20	21-25
	Cataracts	0/5	0/5	0/5	0/5	0/5
	Retinopathy	0/5	0/5	0/5	1/5	0/5
	Cage No.	6	7	8	9	10
	Animal No.	26-30	31-35	36-40	41-45	46-50
	Cataracts	0/5	0/5	0/5	0/5	0/5
	Retinopathy	0/5	1/5	0/5	0/5	0/5
Low-Dose	Cage No.	1	2	3	4	5
Males	Animal No.	1-5	6-10	11-15	16-20	21-25
	Cataracts	0/5	0/5	0/5	1/5	0/5
	Retinopathy	0/5	0/5	0/5	1/5	0/5
	Cage No.	6	7	8	9	10
	Animal No.	26-30	31-35	36-40	41-45	46-50
	Cataracts	0/5	0/5	0/5	0/,5	0/5
	Retinopathy	0/5	0/5	0/5	0/5	0/5

TABLE F1. CAGE POSITION AND INCIDENCE OF CATARACTS AND RETINOPATHY IN F344/NRATS ON THE TWO-YEAR STUDY WITH GERANYL ACETATE

Rack B						
Low-Dose Females	Cage No. Animal No. Cataracts Retinopathy	1 1-5 1/5 1/5	2 6-10 3/5 3/5	3 11-15 3/5 3/5	4 16-20 3/5 3/5	5 21-25 3/5 3/5
	Cage No. Animal No. Cataracts Retinopathy	6 26-30 0/5 0/5	7 31-35 0/5 0/5	8 36-40 0/5 0/5	9 41-45 0/5 0/5	10 46-50 0/5 0/5
Vehicle Control Males	Cage No. Animal No. Cataracts Retinopathy	1 1-5 0/5 0/5	2 6-10 0/5 0/5	3 11-15 0/5 0/5	4 16-20 0/5 0/5	5 21-25 0/5 0/5
	Cage No. Animal No. Cataracts Retinopathy	6 26-30 0/5 0/5	7 31-35 1/5 1/5	8 36-40 0/5 0/5	9 41-45 0/5 0/5	10 46-50 0/5 0/5
Vehicle Control Females	Cage No. Animal No. Cataracts Retinopathy	1 1-5 0/5 0/5	2 6-10 1/5 1/5	3 11-15 0/5 0/5	4 16-20 0/5 0/5	5 21-25 0/5 0/5
	Cage No. Animal No. Cataracts Retinopathy	6 26-30 0/5 0/5	7 31-35 0/5 0/5	8 36-40 0/5 0/5	9 41-45 0/5 0/5	10 46-50 0/5 0/5

TABLE F1. CAGE POSITION AND INCIDENCE OF CATARACTS AND RETINOPATHY IN F344/N RATS ON THE TWO-YEAR STUDY WITH GERANYL ACETATE (Continued)

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APPENDIX G

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ANALYSIS OF GERANYL ACETATE MIDWEST RESEARCH INSTITUTE

A. ELEMENTAL ANALYSIS

Element	С	Н
Theory	73.43	10.27
Determined:		
1. Lot No. 70201	74.30 74.33	10.51 10.55
2. Lot No. 36948	74.08 74.05	10.83 10.87

B. WATER ANALYSIS (Karl Fischer)

1.	Lot No.	70201	0.046 ± 0.004	(δ) %
2.	Lot No.	36948	0.061 ± 0.009	(δ) %

C. TITRATION (Annual Book of ASTM Standards, 1974)

1. Lot No. 70201

Ester titration: $96.2 \pm 0.3 \ (\delta)\%$ Free acid titration: Less than 0.1% free acid (calculated as acetic acid)

2. Lot No. 36948

Ester titration: $95.1 \pm 1.1 \ (\delta)\%$ Free acid titration: $0.081 \pm 0.001 \ (\delta)\%$ (as acetic acid)

D. BOILING POINT (Lot No. 70201)

Determined	Literature Value
241° \pm 1(δ)°C at 732 torr (visual, micro boiling point) 242°-243°C with endotherm at 239.6°-241.6°C (Dupont 900 DTA)	242°C-245°C at 764 torr (Pollock and Stevens, 1965)

E. REFRACTIVE INDEX (Lot No. 70201)

Determined	Literature Value
n_{D}^{15} : 1.4630 ± 0.0007 (δ)	n_D^{15} : 1.4628 (Pollack and
	Stevens, 1965)

F. DENSITY

Determined	Literature Value
d ₂₂ ²⁴ : 0.91179 ± 0.00003 (δ) g/ml	d ¹⁵ : 0.91174 g/ml

APPENDIX G

G. THIN LAYER CHROMATOGRAPHY

1. Lot No. 70201 Plates: Silica gel 60-F254 Ref. Standard: Geranyl acetate Amount spotted: 10 and 30 μ l (10 mg/ml in 95% ethanol) Visualization: Ultraviolet (254 nm) and iodine vapor System 1: Benzene: 1,4-System 2: Methylene chloride, dioxane (85:15) 100% Rf: 0.77 (trace), 0.50 R_f: 0.73 (trace), 0.68 (slight trace), 0.42 (slight trace), 0.65 (major), 0.38 (trace) (slight trace), 0.37 (major), 0.08 (trace) R_{st}: 2.03, 1.32, 1.10, Rst: 1.18, 1.10, 1.05 0.61 0.97. 0.21 2. Lot No. 36948 (Batch 02) Plates: Silica Gel F-254 Ref. Standard: Citronellyl acetate Amount spotted: 25, 100 and 300 μ g Visualization: Ultraviolet (254 nm) and potassium permanganate (KMnO₄) spray reagent System 2: Toluene: 1,4-dioxane System 1: Carbon tetrachloride 100% (85:15)R_f: 0.98 (minor); 0.21 (major) R_f: 0.96 (minor); 0.80 (major) Rst: 1.20, 1.00 Rst: 4.90, 1.05

NOTE: The thin-layer chromatographic systems did not separate geranyl and citronellyl acetate.

H. VAPOR-PHASE CHROMATOGRAPHY

Lot No. 70201
 Instrument: Tracor MT 200
 Detector: Flame ionization
 Carrier Gas: Nitrogen, 70 ml/min
 a. System 1
 Column: 15% OV-275 on 100/120 Chromosorb P (AW)-DMCS, 1.8 m x 4 mm ID, glass
 Oven temperature: 225°C, 5 min; 100°-230°C at 10°C/min
 Inlet temperature: 225°C
 Detector temperature: 240°C
 Sample injected: 6 μl, 1% solution in methanol
 Results: Two major peaks. No impurities detected.

Peak	Retention <u>Time (min)</u>	Retention Time (Relative to Major Isomer)	Area (Percent of Major Isomer)
1	10.4	1.00	100
2	11.3	1.09	85

b. System 2

Column: 3% SP 2250 on 80/100 Supelcoport (Lot E951), 1.8 m x 4 mm ID, glass

- Oven termperature program: 100°C, 5 min; 100°-250°C at 10°C/min
- Inlet temperature: 165°C, 95°C (no change in number or relative intensities of impurity peaks as the inlet temperature was changed)

Detector temperature: 200°C

Sample injected: Neat, 0.5% and 1% in hexane

Results: Major peak and 11 impurities. The four largest impurities were 0.13%, 0.36%, 7.2%, and 3.6% of the major peak area. All others were less than 0.06%.

Peak	Retention <u>Time (min)</u>	Retention Time (Relative to Major Peak)	Area (Percent of Major Peak)
1	7.0	0.82	0.13
2	7.9	0.93	0.36
3	8.1	0.95	7.2
4	8.2	0.96	3.6
5	8.5	1.00	100
6	9.7	1.14	0.02
7	10.0	1.18	0.01 (shoulder)
8	10.1	1.19	0.03
9	10.6	1.25	0.001
10	11.0	1.29	0.005
11	11.3	1.33	0.06
12	11.5	1.35	0.06

c. System 3

Column: 20% SP 2100/0.1% Carbowax 1500 on 100/120 Supelcoport, 1.8 m x 4 mm ID, glass

Oven temperature program: 100°C, 5 min; 100°-165°C at $10^{\circ}C/min$

Inlet temperature: 160°C

Detector temperature: 270°C

Sample injected: 4 μ l neat liquid diluted to 1% and 0.5% in

hexane to quantitate the major peak and check for overloading

Results: Major peak and 10 impurities. One impurity is an unresolved shoulder on the major peak with an area 6% to 17% of the area of the major peak. The areas of the other impurities total approximately 1% of the major peak.

Peak	Retention Time (min)	Retention Time (Relative to Major Peak)	Area (Percent of Major Peak)
1	10.2	0.84	0.04
2	10.3	0.87	0.3
3	11.1	0.93	0.3
4	11.7	0.98	shoulder 6-17
5	11.9	1.00	100
6	13.4	1.12	0.1
7	13.8	1.16	0.1
8	14.4	1.20	0.03
9	14.8	1.24	0.04
10	16.5	1.39	0.08
11	17,1	1.44	0.1

2. Lot No. 36948

Instrument: Perkin Elmer 3920

Detector: Flame ionization

Carrier gas: Nitrogen

Carrier flow rate: 65 ml/min

a. System 1

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

Column temperature: Programmed from 50° C to 220° C at 8° C/min; 4 min initial hold

Inlet temperature: 200°C

Detector temperature: 260°C

Sample injected: 5 μ l neat to detect impurities; 5 μ l of a 1% (v/v) solution in 2-propanol to quantitate the major peak, 5 μ l of a 0.5% (v/v) in 2-propanol to establish detector response linearity.

Results: A major peak and eight impurities. The two peaks preceding the major peak had relative areas of 0.39% and $29.8 \pm 1.2\%$ (a) with the larger impurity identified, by spiking, as citronellyl acetate; the other six impurities, three preceding and three following the major peak, had a total relative area of 0.23%.

Peak	Retention <u>Time (min)</u>	Retention Time (Relative to Major Peak)	Area (Percent of the Major Peak)
1	3.3	0.16	0.04
2	14.9	0.74	0.09
3	16.5	0.82	0.03
4	17.2	0.85	0.39
5	18.8	0.93	29.8% (a)
6	20.2	1.00	100
7	21.8	1.08	0.02
8	22.9	1.13	0.02
9	26.3	1.30	0.03

(a) Quantitated directly against the major peak using a 1% solution

b. System 2

Column: 3% SP-2250 on 100/120 Supelcoport; 1.8 m x 4 mm ID, glass

Column temperature: Programmed from 50° C to 250° C at 8° C/min; 4 min initial hold

Inlet temperature: 200°C

Detector temperature: 250° C

- Sample injected: 5 μ l near to detect impurities; 5 μ l of a 1% (v/v) solution in hexane to quantitate the major peak; 5 μ l of a 0.5% (v/v) to establish detector response linearity.
- Results: A major peak and eight impurities; one peak, preceding the major peak and identified, by spiking, as citronellyl acetate, had a relative area of 26.6%; two peaks, following the major peak, had relative areas of 0.15%and 0.16%; the four remaining impurities, three preceding and one following the major peak, had a total relative area of 0.06% of the major peak.

Peak	Retention <u>Time (min)</u>	Retention Time (Relative to Major Peak)	Area (Percent of the Major Peak)
1	5.1	0.29	0.01
2 (shoulder)	7.2	0.41	
3	7.6	0.43	0.01
4	15.2	0.86	0.01
5	16.1	0.91	26.6
6	17.6	1.00	100
7	18.5	1.05	0.03
8	18.7	1.06	0.15
9	19.1	1.09	0.16
APPENDIX G

	с.	Quantitation of Impurities			
		Instrument: Perkin-Elmer 3920			
		Detector: Flame ionization			
		Column: Carbowax 20M-TPA on O ID, glass	Chromosorb W(AW), 1.8 m x 4 mm		
		Inlet temperature: 205°C			
		Detector temperature: 260°C			
		Carrier gas: Nitrogen			
		Carrier flow rate: 55 cc/min			
		Oven temperature program: 145°C, isothermal			
		(1) Quantitation of Citronellyl Acetate			
		Analysis: A solution of geranyl acetate in hexane was injected with alternating injections of citronellyl acetate standards in hexane for quantitation.			
		Retention time: Citronellyl acetate - 4.2 min; geranyl acetate - 6.2 min			
		Conclusions: Geranyl acetate contains $28.9 \pm 0.8\%$ citronellyl acetate as an impurity			
		(2) Quantitation of Neryl Acetate			
		Analysis: A solution of geranyl acetate in hexane was injected with alternating injections of neryl acetate standards in hexane for quantitation.			
		Retention times: Neryl acetate - 5.4 min; geranyl acetate - 6.2 min.			
		Conclusions: Neryl acetate was not at a concentration greater than 1	present in geranyl acetate $.0\%$.		
I.	SPECTRAL DATA				
	1. Ir	frared			
	a.	Lot No. 70201			
		Instrument: Beckman IR-12 Cell: 0.013 mm liquid cell with sodium chlorida windows	Consistent with literature spectrum (Sadtler Standard Spectra)		
		Results: See Figure 5	. ,		
	b.	Lot No. 36948 Instrument: Perkin-Elmer Infracord	Consistent with literature spectrum		
		Cell: Neat liquid between silver chloride cells.			
		Results: See Figure 6			
	2. U	ltraviolet/Visible (Both lots)			
		Instrument: Cary 118	No literature reference found		
		No absorbance between 350 and 800 nm (visible range).			







Geranyl Acetate

Figure 6. Infrared Absorption Spectrum of Geranyl Acetate (Lot No. 36948)

No maximum between 210 and 350 nm (ultraviolet range) but a gradual increase in absorbance toward the solvent cut-off at 210 nm.					
Concentration: $1\% v/v$					
Solvent: Methanol					
3. Nuclear Magnetic Resonance					
a. Lot No. 70201					
Instrument: Varian HA-100	Consistent with literature				
Solvent: Neat, tetramethyl- silane added	spectrum (Sadtler Standard Spectra)				
Assignments: (See Figure 7)					
 (a) s, δ1.55 ppm; (b) s, δ 1.64 ppm; 					
(c) s, δ 1.87 ppm; (d) m, δ 2.00 ppm;					
(e) d, δ 4.44 ppm, J _{eg} = 7 Hz;					
(f) m, δ 5.02 ppm; (g) t, δ 5.26 ppm.					
Integration Ratios;					
(a) 2.77, (b) 5.64, (c) 3.09, (d) 4.36,					
(e) 2.02, (f) 1.17, (g) 1.06					
b. Lot No. 36948					
Instrument: Varian EM 360A	Consistent with literature				
Solvent: Neat with TMS internal standard.	Spectra)				
Assignments: (See Figure 8)					
(a) s, δ 1.59 ppm; (b) s, δ 1.68 ppm;					
(c) s, δ 1.91 ppm; (d) m, δ 2.03 ppm;					
(e) d, δ 4.53 ppm, J _{e-g} = 6 Hz;					
(f) m, δ 4.90-5.18 ppm; (g) t, δ 5.30 ppm;					
(h) impurity, d, δ 0.90 ppm (a)					
(i) impurity, t, δ 4.02 ppm (a)					
Integration Ratios:					
(a) 9.54 (b) (c) 2.93 (d) 3.79 (e) 1.78 (f) 1.84 (g)					

(a) Consistent with peaks of citronellyl acetate spectrum (Figure 9)



Figure 7. Nuclear Magnetic Resonance Spectrum of Geranyl Acetate (Lot No. 70201)





APPENDIX H

ANALYSIS OF GERANYL ACETATE/CORN OIL SOLUTIONS FOR STABILITY OF GERANYL ACETATE

A. SAMPLE PREPARATION AND STORAGE

Solutions of geranyl acetate in corn oil (2:100, v:v) were prepared in duplicate for storage of 0, 1, 2, 5, 6, or 7 days. A typical sample was prepared as follows: 2 ml of corn oil was transferred into an 8.5 ml septum vial and the vial was sealed (Microsep F-138 gas chromatography septa with Teflon[®] film facing, from Canton Bio-Medical Products, Inc; aluminum crimp seals from Wheaton Scientific Company, Inc.). Then 40 μ l of geranyl acetate was injected into the sample vial. The sample was agitated on a vortex mixer for 30 seconds and then stored at room temperature (25°C) for the appropriate time period.

B. EXTRACTION AND ANALYSIS

At the end of each storage time segment, the appropriate samples were extracted with 2 ml of methanol, which was injected into the vials with a 2-ml syringe. The two-phase mixtures were thoroughly shaken by hand and placed in an ultrasonic vibratory bath for 2 minutes. Aliquots for analysis were removed directly from the top (methanol) layer of each sample by microliter syringe and analyzed by the vapor-phase chromatographic system described above.

C. RESULTS

Storage Time (days)	Average % Chemical Found In Chemical Vehicle Mixture (e)
0	102.0 ± 4.0
1	95.4 ± 4.3
2	99.0 ± 4.6
5	101.0 ± 4.0
6	100.0 ± 4.1
7	100.5 ± 4.1

(a) Corrected for a spike recovery of $46.2 \pm 1.8\%$

(b) Original concentration of geranyl acetate in corn oil at time of sample preparation was 1.96%, with a variation among samples of 0.06%.

D. CONCLUSION

Geranyl acetate mixed with corn oil at the 2% dose level is stable when stored at room temperature (25° C) for 7 days.

APPENDIX I

ANALYSIS OF GERANYL ACETATE/CORN OIL SOLUTIONS FOR CONCENTRATIONS OF GERANYL ACETATE

A. METHOD USED UNTIL MARCH 1979

Samples were received as corn oil mixtures in sealed syringe bottles. Aliquots (0.2ml) of these samples were diluted to 10 ml with chloroform. References were standards prepared in corn oil and diluted in the same manner. These samples and standards were then analyzed by vapor-phase chromatography under the following conditions:

Column: 3% OV-17 on Chromosorb Q, 80/100 mesh, 1.8 m x 4 mm I.D., glass

Detection: Flame ionization

Temperatures: Inlet, 140°C; oven, 110°C; detector, 165°C

Carrier gas: Nitrogen

Injection size: $1 \mu l$

Retention time: 3.5 minutes

No correction was made for workup loss, since samples were not extracted.

Results: See Table II

B. METHOD USED AFTER MARCH 1979

Samples of geranyl acetate were received as corn oil mixtures in sealed syringe bottles. The samples were extracted 1:20 with methanol for 3 minutes (0.5 ml sample or standard with 10 ml methanol). Samples and standards were analyzed by vapor-phase chromatography under the same conditions described above.

The gavage samples were compared with reference standards of geranyl acetate prepared vol/vol in corn oil and then both were extracted with methanol. There was no correction applied to the samples, since samples and reference standards were treated in the same manner.

Results: See Table I1

		Concentration of Geranyl Acetate in Corn Oil (a) for Target Concentration (w/v%) of:			
Date Mixed	Week Used	5	10	20	40
10/13/78	10/20/78		-		41.5
11/10/78	11/17/78	-	10.8	-	-
12/01/78	12/08/78	-	-	-	43.5
01/05/79	01/12/79	-	10.3	-	-
02/02/79	02/09/79	-	-	-	43.3
03/02/79	03/09/79	-	10.0	-	-
03/30/79	04/06/79	-	-	-	41.1
04/27/79	05/02/79	-	9.6	-	-
05/25/79	06/01/79	-	-	-	41.6
06/22/79	06/29/79	-	10.9 (9.9)(c)	-	-
07/20/79	07/27/79	-	-	-	39.6
08/17/79	08/24/79	-	10.6	-	· -
09/14/79	09/21/79	-	-	-	41.2
10/12/79	10/19/79	-	9.7	-	-
11/09/79	11/17/79	-	-	-	40.8
12/11/79	12/18/79	-	9.9	-	-
01/04/80	01/11/80	-	-	-	42.7
02/01/80	02/08/80	4.8	-	19.5	-
02/29/80	03/05/80	-	9.5	-	39.2
03/28/80	04/04/80	4.7	· -	19.9	-
04/25/80	05/01/80	-	9.8	-	40.8
05/23/80	05/30/80	4.7(4.9) <i>(c)</i>		20.7	-
06/20/80	06/27/80	-	9.6	-	39.5
07/18/80	07/25/80	-	28.0	19.3	-
07/21/80	07/28/80	5.0	-	-	-
08/15/80	08/22/80	-	-	-	42.6
09/12/80	09/17/80	4.6 (5.0)(c)	-	21.8	-
10/10/80	10/17/80	4.81	-	-	
Mean (%)	· · · · · · · · · · · · · · · · · · ·	4.8	10.1 <i>(b)</i>	20.2	41.4
Standard deviation		0.13	0.5 <i>(b)</i>	0.9	1.5
Coefficient of varia	tion (%)	2.7	5.2 <i>(b)</i>	4.6	3.5
Range (%)		4.6-5.0	9.5-10.8 <i>(b)</i>	19.3-21.8	39.2-43.5
Number of Sample	S	7	10 <i>(b)</i>	6	12

TABLE II. CONCENTRATIONS OF GERANYL ACETATE

(a) Results of duplicate analyses

(b) Does not include mix of 07/18/80 which was 180% high due to a mixing error. The ensuing mortality and toxicity resulted in the termination of all high dose mice on 07/30/80.

(c) Results of MRI referee analysis

APPENDIX J

SENTINEL ANIMAL PROGRAM

I. METHODS

Rodents used in the Bioassay Program of the National Toxicology Program are produced in optimally clean facilities to eliminate potential pathogens that may affect test results. The Sentinel Animal Program is part of the periodic monitoring of animal health that occurs during the toxicologic evaluation of chemical compounds. Under this program the disease state of the rodents in the Bioassay Program is monitored via viral serology on serum from extra (sentinel) animals in the test rooms. These animals are untreated, and both these animals and the test animals are subject to the identical environmental conditions. The sentinel animals come from the same production source and weanling groups as the animals used for the bioassays of chemical compounds.

Fifteen $B6C3F_1$ mice of both sexes and 15 F344/N rats of both sexes selected at the time of randomization and allocation of the animals to the various study groups. Five animals of each designated sentinel group are killed at 6, 12, and 18 months on study. Data from animals surviving 24 months are collected from 5/50 randomly selected control animals of each sex and species. The blood from each animal is collected and clotted and the serum is separated. The serum is diluted 1:5 with buffered saline and shipped to the Marine Virus Diagnostic Laboratory of Microbiological Associates for determination of the viral titers. The following tests are performed:

	Hemagglutination Inhibition	Complement Fixation	
Mice	 PVM (Pneumonia Virus of Mice) Reo 3 (Reovirus, Type I) GDVII (Strain of Murine Encephalomyelitis Virus) Poly (Polyoma Virus) MVM (Minute Virus of Mice) Ectro (Infectious Ectromelia Virus of Mice) 	M. Ad. (Mouse Adenovirus) LCM (Lymphocytic Choriomeningitis Virus of Mice) MHV (Mouse Hepatitis Virus) Sendai (Sendai Virus)	
Rats	PVM (Pneumonia Virus of Mice)KRV (Kilham Rat Virus)H-1 (Toolan's H-1 Virus)	RCV (Rat Corona Virus) Sendai (Sendai Virus)	

II. RESULTS

See Table J1

TABLE J1. MURINE VIRUS ANTIBODY DETERMINATIONS FOR RATS AND MICE IN THETWO-YEAR FEED STUDIES OF GERANYL ACETATE(a)

	Interval (months)	No. of Animals	Positive Serologic Reaction for
RATS	6 mos.	2/10	Sendai
	12 mos.	3/10 2/10	PVM Sendai
	18 mos.	6/10 5/10	PVM Sendai
	24 mos.	2/10	PVM
MICE	6 mos.	10/10	Sendai
	12 mos. 18 mos.	2/10 2/10 8/10 5/8	PVM Ectro(b) Sendai Sendai
	24 mos.	1/10 5/10	GDVII Sendai

(a) Blood samples were taken from sentinel animals (5/sex) at 6, 12, and 18 months after the start of dosing and from the control animals (5/sex) just before they were killed; samples were sent to Microbiological Associates, Inc. (Bethesda, MD) for the Animals Disease Screening Program.

(b) false positives

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Geranyl Acetate

APPENDIX K

DATA AUDIT SUMMARY

The experimental data, documents, pathology materials, and draft Technical Report for the 2-year toxicology and carcinogenesis studies of geranyl acetate in rats and mice were audited for accuracy, consistency, and completeness. The laboratory experiments were conducted for NTP by Microbiological Associates, Bethesda, Maryland under a subcontract with Tracor Jitco, Inc. The in-life portion of the studies was completed prior to implementation by NTP of Good Laboratory Practice (GLP) Regulations of the Food and Drug Administration in October 1981. The retrospective audit was conducted during March, April, and December, 1985 at the Dynamac Corporation, Rockville, Maryland and the NTP Archives, Research Triangle Park, North Carolina. The audit was conducted by P.H. Errico, M.A., C.S. Reese, M.S., K.M. Witkin, B.S., and M.Y. Delany, B.S., from ImmuQuest, Inc. and by L.H. Brennecke D.V.M., A.C.V.P. and C.S. Corson, A.S.C.P., from Pathology Associates, Inc. Dr. F. Voelker, D.V.M., M.S. of Pathology Associates, Inc. performed the carcass identification checks on mice in the 2-year geranyl acetate study. Personnel from Pathco reviewed the wet tissues for all animals for untrimmed potential lesions. The untrimmed lesions found were trimmed, embedded, sectioned, and stained with hematoxylin and eosin. S. Eustis, D.V.M., Ph.D., A.C.V.P., of NTP diagnosed these additional lesions.

The full report of the audit is on file at the NIEHS. The audit included as minimum requirements, a review of:

- (1) All records concerning animal receipt, quarantine, randomization, and disposition prior to study start.
- (2) All chemistry records.
- (3) Body weight and clinical observation data for a random 10% sample of the study animals.
- (4) All in-life records concerning environmental conditions, palpable masses, mortality, animal identification.
- (5) All postmortem records for individual animals concerning identification, disposition codes, condition codes, and correlation between gross observations and microscopic diagnoses.
- (6) Wet tissues from a random 10% sample of the study animals to check for animal identification and the presence of untrimmed lesions.
- (7) Slides and blocks for tissues from all vehicle control and high dose animals to examine for proper match and inventory.
- (8) Tabulated pathology diagnoses for a random 10% of study animals to verify computer data entry.

The audit showed that the data in the Technical Report (including in-life observations and chemistry data) reflect the data at the NTP Archives. Uncut lesions in the wet tissues were found. As a result of this finding, all wet tissues were examined for uncut lesions, and these lesions then were sectioned by an NTP pathology support contractor. NTP pathology staff diagnosed these additional lesions. The final tables include the additional lesions found and represent a complete examination of all tissues. This additional pathology did not affect the interpretations of the study.

The audit findings were reviewed by NTP staff. In conclusion, the documents and materials at the NTP Archives support the data and results presented in the Technical Report.