NATIONAL TOXICOLOGY PROGRAM Technical Report Series No. 313

# **TOXICOLOGY AND CARCINOGENESIS**

## STUDIES OF

## MIREX

(1,1a,2,2,3,3a,4,5,5,5a,5b,6-Dodecachlorooctahydro-1,3,4-metheno-1*H*-cyclobuta[*cd*]pentalene)

(CAS NO. 2385-85-5)

IN F344/N RATS

(FEED STUDIES)

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

## NOTE TO THE READER

The National Toxicology Program (NTP) is made up of four charter agencies of the U.S. Department of Health and Human Services (DHHS): the National Cancer Institute (NCI), National Institutes of Health; the National Institute of Environmental Health Sciences (NIEHS), National Institutes of Health; the National Center for Toxicological Research (NCTR), Food and Drug Administration; and the National Institute for Occupational Safety and Health (NIOSH), Centers for Disease Control. In July 1981, the Carcinogenesis Bioassay Testing Program, NCI, was transferred to the NIEHS. The NTP coordinates the relevant programs, staff, and resources from these Public Health Service agencies relating to basic and applied research and to biological assay development and validation.

The NTP develops, evaluates, and disseminates scientific information about potentially toxic and hazardous chemicals. This knowledge is used for protecting the health of the American people and for the primary prevention of disease.

The studies described in this Technical Report were performed under the direction of the NIEHS and were conducted in compliance with NTP chemical health and safety requirements and must meet or exceed all applicable Federal, state, and local health and safety regulations. Animal care and use were in accordance with the Public Health Service Policy on Humane Care and Use of Animals. All NTP toxicology and carcinogenesis studies are subjected to a comprehensive audit before being presented for public review. This Technical Report has been reviewed and approved by the NTP Board of Scientific Counselors' Peer Review Panel in public session; the interpretations described herein represent the official scientific position of the NTP.

These studies are designed and conducted to characterize and evaluate the toxicologic potential, including carcinogenic activity, of selected chemicals in laboratory animals (usually two species, rats and mice). Chemicals selected for NTP toxicology and carcinogenesis studies 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.

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## NTP TECHNICAL REPORT

## ON THE

## **TOXICOLOGY AND CARCINOGENESIS**

## **STUDIES OF MIREX**

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(CAS NO. 2385-85-5)

## IN F344/N RATS

(FEED STUDIES)

James Huff, Ph.D., Study Scientist

NATIONAL TOXICOLOGY PROGRAM P.O. Box 12233 Research Triangle Park, NC 27709

February 1990

## **NTP TR 313**

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

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### Mirex

Synonyms and trade names: 1,1a,2,2,3,3a,4,5,5,5a,5b,6-Dodecachlorooctahydro-1,3,4-metheno-1*H*-cyclobuta[*cd*]pentalene; Hexachloropentadiene dimer; dodecachloropentacyclodecane; perchloropentacyclodecane; hexachlorocyclopentadiene dimer; Dechlorane<sup>®</sup>; Ferriamicide<sup>®</sup>

#### CAS NO. 2385-85-5

 $C_{10}Cl_{12}$  Molecular weight 545.6

## ABSTRACT

Mirex (95% pure), formerly used as a systemic insecticide and as a fire retardant, was studied for toxicologic and carcinogenic effects by administering diets containing 0, 0.1, 1.0, 10, 25, or 50 ppm mirex to groups of 52 F344/N rats of each sex for 104 weeks. Doses selected for the 2-year studies were based primarily on the effects on body weights and survival of rats in a 26-week study. During the first 6 months of the 2-year study, because of good survival and the absence of observable toxic effects in female rats, additional groups (termed second study) of 52 F344/N female rats were started at higher dietary concentrations of 0, 50, and 100 ppm mirex. Based on feed consumption data, the estimated average intake per day was 0, 0.007, 0.075, 0.75, 1.95, and 3.85 mg mirex/kg body weight for male rats and female rats in the first study, and 0, 3.9, and 7.7 mg/kg for female rats in the additional study.

Body Weights, Feed Consumption, and Survival in Two-Year Studies: Mean body weights of male rats that received 25 or 50 ppm mirex were 5%-18% lower than those of the controls throughout most of the study; mean body weights of female rats that received 50 or 100 ppm mirex were 4%-18% lower than those of the controls after week 40; mean body weights of groups receiving 0.1, 1.0, or 10 ppm were similar to those of controls. Feed consumption by dosed male rats was 83%-91% that by controls, and that by dosed female rats was 86%-99% that by controls. The top dietary exposure groups of rats received the equivalent of 3.85 mg mirex/kg body weight, whereas the 100-ppm group of female rats (second study) averaged 7.7 mg/kg. At the end of the study, survival of male rats that received 25 or 50 ppm mirex was lower than that of controls, whereas survival of all dosed groups of female rats was similar to that of controls (male: control, 44/52; 0.1 ppm, 37/52; 1 ppm, 36/52; 10 ppm, 37/52; 25 ppm, 19/52; 50 ppm, 15/52; female--first study: 38/52; 38/52; 35/52; 35/52; 41/52; 35/52; female--second study: control, 44/52; 50 ppm, 44/52; 100 ppm, 39/52).

Nonneoplastic and Neoplastic Effects in the Two-Year Studies: The most notable compound-related effects were observed in the liver of male and female rats. Fatty metamorphosis, cytomegaly, angiectasis (males only), and necrosis of the liver were observed at increased incidences in dosed rats. The incidences of neoplastic nodules of the liver were dose related, and in the 10-, 25-, and 50-ppm groups of males and the 50- and 100-ppm groups of females (second study), they were markedly greater than those in controls (52/group--male: control, 3; 0.1 ppm, 5; 1 ppm, 5; 10 ppm, 14; 25 ppm,

15; 50 ppm, 26; female (second study): control, 2; 50 ppm, 23; 100 ppm, 30). In the first study in female rats, the incidences of neoplastic nodules were not significantly different between control and dosed groups (10; 5; 4; 5; 9; 7). The 10 neoplastic nodules of the liver seen in the control group (19%) was significantly greater than the mean incidence observed historically (57/2,015; 2.8%). The incidences of hepatocellular carcinomas in control and dosed groups were relatively low and were not significantly different between groups.

The incidences of pheochromocytomas of the adrenal gland occurred with a positive trend in male rats (8/51; 7/52; 13/52; 11/52; 18/51; 19/51); the incidences in the 25- and 50-ppm male rats were greater than that in controls; malignant pheochromocytomas were observed in 2 controls and in 2 mirex-exposed male rats. The incidence of pheochromocytomas in 50-ppm female rats in the first study was marginally greater than that in controls (control, 1/51; 50 ppm, 6/52); this borderline increase was not observed in the second female rat study and thus is not considered to be due to the dietary administration of mirex.

Nephropathy occurred at similar incidences in control and mirex-exposed groups of male and female rats; however, the severity of this nonneoplastic lesion was judged to be slightly greater in the groups given 25, 50, or 100 ppm mirex (male: severe vs. moderate in controls; female: moderate to severe vs. moderate). Hyperplasia of the transitional epithelium of the kidney pelvis was observed in dosed male rats (0/51; 2/51; 2/52; 5/52; 14/51; 9/52). Transitional cell papillomas of the renal pelvis in male rats occurred with a positive trend (P<0.02) (0/51; 0/51; 0/52; 1/51; 3/52). The highest incidence previously observed in untreated male F344/N rats in NTP studies is 1/48, and the mean historical incidence is 5/1,968 (0.3%).

In both the first and second studies in female rats, the incidence of mononuclear cell leukemia showed dose-related increases (first study: 8/52; 8/52; 11/52; 14/52; 18/52; 18/52; second study: 6/52; 9/52; 14/52). When the data from both studies are combined, the incidences are significantly increased in the 10-, 25-, 50-, and 100-ppm groups. The mean historical incidence is 19% (375/2,021).

For the thyroid gland, there was a positive trend for follicular cell neoplasms in male rats (0/51; 1/50; 0/47; 1/47; 0/35; 4/49) and a negative trend for C-cell neoplasms in male rats (8/51; 6/50; 4/47; 7/47; 3/35; 0/49) and in female rats in the first study (12/50; 13/50; 7/48; 9/47; 6/48; 2/46). Neither observation is considered to be associated with the dietary administration of mirex.

*Genetic Toxicology:* Mirex was not mutagenic in the *Salmonella typhimurium*-microsome assay when tested in a preincubation protocol in the presence or absence of exogenous metabolic activation in strains TA98, TA100, TA1535, or TA1537. Mirex did not induce either sister chromatid exchanges or chromosomal aberrations in Chinese hamster ovary cells in the presence or absence of S9.

*Conclusions:* Under the conditions of these 2-year feed studies of mirex, there is *clear evidence of carcinogenic activity*\* for male and female F344/N rats, as primarily indicated by marked increased incidences of benign neoplastic nodules of the liver, as well as by increased incidences of pheochromocytomas of the adrenal gland and transitional cell papillomas of the kidney in males and by increased incidences of mononuclear cell leukemia in females.

Nonneoplastic effects induced by mirex administration include cytomegaly, fatty metamorphosis, angiectasis (males only), and cellular necrosis in the liver.

<sup>\*</sup>Explanation of Levels of Evidence of Carcinogenic Activity is on page 6.

A summary of the Peer Review comments and the public discussion on this Technical Report appears on pages 9-10.

## SUMMARY OF THE TWO-YEAR FEED AND GENETIC TOXICOLOGY STUDIES OF MIREX

Male F344/N Rats	Female F344/N Rats
<b>Dietary concentrations</b> 0, 0.1, 1, 10, 25, or 50 ppm mirex	0, 0.1, 1, 10, 25, or 50 ppm mirex (first study) and 0, 50, or 100 ppm (second study)
Body weights in the 2-year study Exposed lower than controls	Exposed lower than controls
Survival rates in the 2-year study 44/52; 37/52; 36/52; 37/52; 19/52; 15/52	38/52; 38/52; 35/52; 35/52; <b>4</b> 1/52; 35/52 (first study); 44/52; 44/52; 39/52 (second study)
Nonneoplastic effects Fatty metamorphosis, cytomegaly, angiectasis, and necrosis of the liver; hyperplasia of the transitional epithelium of the kidney pelvis	Fatty metamorphosis, cytomegaly, and necrosis of the liver
<b>Neoplastic effects</b> Hepatocellular neoplastic nodules; pheochromocytomas of the adrenal gland; transitional cell papillomas of the kidney	Hepatocellular neoplastic nodules; mononuclear cell leukemia
Level of evidence of carcinogenic activity Clear evidence	Clear evidence
<b>Genetic toxicology</b> Not mutagenic in <i>S. typhimurium</i> TA98, TA100, TA1535, or TA chromosomal aberrations in Chinese hamster ovary cells with o	1537; did not induce either sister chromatid exchanges or r without S9

.

## **EXPLANATION OF LEVELS OF EVIDENCE OF CARCINOGENIC ACTIVITY**

The National Toxicology Program describes the results of individual experiments on a chemical agent and notes the strength of the evidence for conclusions regarding each study. Negative results, in which the study animals do not have a greater incidence of neoplasia than control animals, do not necessarily mean that a chemical is not a carcinogen, inasmuch as the experiments are conducted under a limited set of conditions. Positive results demonstrate that a chemical is carcinogenic for laboratory animals under the conditions of the study and indicate that exposure to the chemical has the potential for hazard to humans. Other organizations, such as the International Agency for Research on Cancer, assign a strength of evidence for conclusions based on an examination of all available evidence including: animal studies such as those conducted by the NTP, epidemiologic studies, and estimates of exposure. Thus, the actual determination of risk to humans from chemicals found to be carcinogenic in laboratory animals tory animals requires a wider analysis that extends beyond the purview of these studies.

Five categories of evidence of carcinogenic activity are used in the Technical Report series to summarize the strength of the evidence observed in each experiment: two categories for positive results ("Clear Evidence" and "Some Evidence"); one category for uncertain findings ("Equivocal Evidence"); one category for no observable effects ("No Evidence"); and one category for experiments that because of major flaws cannot be evaluated ("Inadequate Study"). These categories of interpretative conclusions were first adopted in June 1983 and then revised in March 1986 for use in the Technical Reports series to incorporate more specifically the concept of actual weight of evidence of carcinogenic activity. For each separate experiment (male rats, female rats, male mice, female mice), one of the following quintet is selected to describe the findings. These categories refer to the strength of the experimental evidence and not to either potency or mechanism.

- Clear Evidence of Carcinogenic Activity is demonstrated by studies that are interpreted as showing a dose-related (i) increase of malignant neoplasms, (ii) increase of a combination of malignant and benign neoplasms, or (iii) marked increase of benign neoplasms if there is an indication from this or other studies of the ability of such tumors to progress to malignancy.
- Some Evidence of Carcinogenic Activity is demonstrated by studies that are interpreted as showing a chemically related increased incidence of neoplasms (malignant, benign, or combined) in which the strength of the response is less than that required for clear evidence.
- Equivocal Evidence of Carcinogenic Activity is demonstrated by studies that are interpreted as showing a marginal increase of neoplasms that may be chemically related.
- No Evidence of Carcinogenic Activity is demonstrated by studies that are interpreted as showing no chemically related increases in malignant or benign neoplasms.
- Inadequate Study of Carcinogenic Activity is demonstrated by studies that because of major qualitative or quantitative limitations cannot be interpreted as valid for showing either the presence or absence of carcinogenic activity.

When a conclusion statement for a particular experiment is selected, consideration must be given to key factors that would extend the actual boundary of an individual category of evidence. This should allow for incorporation of scientific experience and current understanding of long-term carcinogenesis studies in laboratory animals, especially for those evaluations that may be on the borderline between two adjacent levels. These considerations should include:

- The adequacy of the experimental design and conduct;
- Occurrence of common versus uncommon neoplasia;
- Progression (or lack thereof) from benign to malignant neoplasia as well as from preneoplastic to neoplastic lesions;
- Some benign neoplasms have the capacity to regress but others (of the same morphologic type) progress. At present, it is impossible to identify the difference. Therefore, where progression is known to be a possibility, the most prudent course is to assume that benign neoplasms of those types have the potential to become malignant;
- Combining benign and malignant tumor incidences known or thought to represent stages of progression in the same organ or tissue;
- Latency in tumor induction;
- Multiplicity in site-specific neoplasia;
- Metastases:
- Supporting information from proliferative lesions (hyperplasia) in the same site of neoplasia or in other experiments (same lesion in another sex or species);
- The presence or absence of dose relationships;
- The statistical significance of the observed tumor increase;
- The concurrent control tumor incidence as well as the historical control rate and variability for a specific neoplasm;
- Survival-adjusted analyses and false positive or false negative concerns;
- Structure-activity correlations; and
- In some cases, genetic toxicology.

#### CONTRIBUTORS

The NTP Technical Report on the Toxicology and Carcinogenesis Studies of Mirex is based on 2-year studies that began in June 1977 or January 1978 and ended in June 1979 or January 1980 at Frederick Cancer Research Center (Frederick, Maryland).

## National Toxicology Program (Evaluated Experiment, Interpreted Results, and Reported Findings)

James Huff, Ph.D., Study Scientist

Charles Alden, Ph.D. Jack Bishop, Ph.D. John Bucher, Ph.D. Scot L. Eustis, D.V.M., Ph.D. Joseph K. Haseman, Ph.D. C.W. Jameson, Ph.D. E.E. McConnell, D.V.M. G.N. Rao, D.V.M., Ph.D. B.A. Schwetz, D.V.M., Ph.D.

## NTP Pathology Working Group (Evaluated Slides and Prepared Pathology Report for Rats on 1/11/83)

Gary A. Boorman, D.V.M., Ph.D. (Chair) NTP Scot L. Eustis, D.V.M., Ph.D. (NTP) R. Maronpot, D.V.M. (NTP) J. Popp, D.V.M., Ph.D. (Chemical Industry Institute of Toxicology)

- H. Solleveld, D.V.M., Ph.D. (NTP)
- R. Squire, D.V.M., Ph.D. (Johns Hopkins University)

## Principal Contributor at Frederick Cancer Research Center (Conducted Studies)

Donald Creasia, Ph.D.

Principal Contributor at Experimental Pathology Laboratories, Inc. (Provided Pathology Quality Assurance)

J. Hardisty, D.V.M.

### Principal Contributor at Clements Associates (Evaluated Tissues)

Dawn Goodman, V.D.M.

### Principal Contributors at Carltech Associates, Inc. (Contractor for Technical Report Preparation)

William D. Theriault, Ph.D. Abigail C. Jacobs, Ph.D. John Warner, M.S. Naomi Levy, B.A.

### PEER REVIEW PANEL

The members of the Peer Review Panel who evaluated the draft Technical Report on Mirex on March 4, 1987, are listed below. Panel members serve as independent scientists, not as representatives of any institution, company, or governmental agency. In this capacity, Panel members have five major responsibilities: (a) to ascertain that all relevant literature data have been adequately cited and interpreted, (b) to determine if the design and conditions of the NTP studies were appropriate, (c) to ensure that the Technical Report presents the experimental results and conclusions fully and clearly, (d) to judge the significance of the experimental results by scientific criteria, and (e) to assess the evaluation of the evidence of carcinogenicity and other observed toxic responses.

#### National Toxicology Program Board of Scientific Counselors Technical Reports Review Subcommittee

Robert A. Scala, Ph.D. (Chair)

Senior Scientific Advisor, Medicine and Environmental Health Department Research and Environmental Health Division, Exxon Corporation East Millstone, New Jersey

Michael A. Gallo, Ph.D.

Associate Professor, Director of Toxicology Department of Environmental and Community Medicine, UMDNJ - Rutgers Medical School Piscataway, New Jersey Frederica Perera, Dr. P.H.\* Division of Environmental Sciences School of Public Health, Columbia University New York, New York

### Ad Hoc Subcommittee Panel of Experts

Charles C. Capen, D.V.M., Ph.D. Department of Veterinary Pathobiology Ohio State University Columbus, Ohio

Vernon M. Chinchilli, Ph.D. (Principal Reviewer) Department of Biostatistics Medical College of Virginia Virginia Commonwealth University Richmond, Virginia

John J. Crowley, Ph.D.\* Division of Public Health Science The Fred Hutchinson Cancer Research Center Seattle, Washington

Kim Hooper, Ph.D. Hazard Evaluation System and Information Services Department of Health Services State of California Berkeley, California

Donald H. Hughes, Ph.D. (Principal Reviewer) Scientific Coordinator, Regulatory Services Division, The Procter and Gamble Company Cincinnati, Ohio Franklin E. Mirer, Ph.D.\* Director, Health and Safety Department International Union, United Auto Workers, Detroit, Michigan

James A. Popp, D.V.M., Ph.D. (Principal Reviewer) Head, Department of Experimental Pathology and Toxicology Chemical Industry Institute of Toxicology Research Triangle Park, North Carolina

I.F.H. Purchase, B.V.Sc., Ph.D., F.R.C. Path.\* Director, Central Toxicology Laboratory Imperial Chemical Industries, PLC Alderley Park, England

Andrew Sivak, Ph.D. Vice President, Biomedical Science Arthur D. Little, Inc. Cambridge, Massachusetts

<sup>\*</sup>Unable to attend

## SUMMARY OF PEER REVIEW COMMENTS ON THE TOXICOLOGY AND CARCINOGENESIS STUDIES OF MIREX

On March 4, 1987, the draft Technical Report on the toxicology and carcinogenesis studies of mirex received public review by the National Toxicology Program Board of Scientific Counselors' Technical Reports Review Subcommittee and associated Panel of Experts. The review meeting was held at the National Institute of Environmental Health Sciences, Research Triangle Park, North Carolina.

**Dr**. J. Huff, NIEHS, began the discussion by reviewing the experimental design, results, and proposed conclusions (clear evidence of carcinogenic activity for male or female rats).

**Dr**. Popp, a principal reviewer, deferred comment on the conclusions until the Panel discussed some of the major issues concerning the studies. These issues included: apparent nonreproducibility of liver neoplasms for female rats fed 50 ppm mirex in the original study and in a second study started several months later at 50 and 100 ppm; and an unusually high incidence of liver neoplasms in control female animals from the original study. Dr. Huff responded that there was no logical explanation either for the differences between studies or the high control tumor incidence in females from the first study.

As a second principal reviewer, Dr. Chinchilli agreed with the conclusions as written. He expressed concern over the less than complete record keeping on certain aspects of the study. He asked that either more details be given about the process used for randomization of animals or that a statement be added that detailed records are not available.

As a third principal reviewer, Dr. Hughes opined that the conclusions should be equivocal evidence of carcinogenic activity because the primary liver effect was increased nodules, the liver response in females was not the same in both studies, adrenal gland responses were mainly increases in benign pheochromocytomas, the renal transitional cell papilloma response in males was weak, and the mononuclear cell leukemia response was weak in females and equivocal in males and there was no evidence of early onset in exposed animals. Further, he questioned whether these were valid studies on which to base conclusions since not all records were available.

In response to the reviewers, Dr. Huff stated that staff had confidence that the data were scientifically valid and reportable and that the spectrum of neoplastic responses taken together supported the category of evidence selected. The liver and kidney lesions are rare occurrences in F344/N rats. Further, these findings in the liver are supported by other long-term studies reported in the literature, and ample evidence exists that the target organ for this nonmetabolized chemical is the liver. He reminded the Panel of other recent peer-reviewed studies with conclusions of clear evidence of carcinogenic activity based on increased incidences of neoplastic nodules and incidences lower than those reported here. Also, the audit revealed that the archived records necessary to support these conclusions are available, as are all the pathology materials and specimens.

In other discussions, Dr. Gallo also emphasized the liver as a primary target organ, noting that mirex is known to be a potent inducer of cytochrome P450 enzymes. He speculated that cross-contamination between rooms housing exposed and control female animals might have been involved in the high incidence of neoplastic nodules of the liver in control female rats in the first study. Dr. S. Eustis, NIEHS, noted that neoplastic nodules in control animals were primarily composed of basophilic cells, whereas nodules in exposed animals were primarily either clear cell or eosinophilic cell types, a clear indication that mirex caused these effects.

## SUMMARY OF PEER REVIEW COMMENTS (Continued)

Dr. Hooper moved that the Technical Report on mirex be accepted with the revisions discussed and the conclusions as written for male and female rats, clear evidence of carcinogenic activity. Dr. Sivak seconded the motion, and the Technical Report was accepted by the Panel with six affirmative votes and one negative vote (Dr. Hughes).

## I. INTRODUCTION

Physical and Chemical Properties Degradation and Persistence Bioaccumulation Disposition and Metabolism Toxicity Reproductive Effects Mutagenicity Carcinogenicity Human Exposure Study Rationale



2 2 3 3a 4 5 5 5a 5h 6-Dodecachlo

Synonyms and trade names: 1,1a,2,2,3,3a,4,5,5,5a,5b,6-Dodecachlorooctahydro-1,3,4-metheno-1*H*-cyclobuta[*cd*]pentalene; Hexachloropentadiene dimer; dodecachloropentacyclodecane; perchloropentacyclodecane; hexachlorocyclopentadiene dimer; Dechlorane<sup>®</sup>; Ferriamicide<sup>®</sup>

CAS NO. 2385-85-5

$$C_{10}Cl_{12}$$
 Molecular weight 545.6

Mirex is a chlorinated insecticide once used to combat the fire ant Solenopsis sp. First prepared by Prins (1946) by the dimerization of hexachlorocyclopentadiene in the presence of aluminum chloride and carbon tetrachloride, mirex was patented in 1955 and introduced in 1959 by the Allied Chemical Corporation for use in pesticidal formulations (Waters et al., 1977a,b). Although principally used as a pesticide, mirex was also marketed under the trade name Dechlorane<sup>®</sup> for use in flame-retardant coatings for various materials.

In 1976, the Allied Chemical Corporation ceased production of mirex and formally transferred all registrations on mirex to the Mississippi Department of Agriculture together with the right to manufacture and sell mirex bait (Pest. Chem. News, 1976a). The U.S. Environmental Protection Agency (EPA) and the state of Mississippi agreed to phase out all mirex registrations. Cancellation for mirex 10:5 bait (a dilute form of mirex) became effective at the end of 1977. Selective ground application was permitted only until June 1978 (Holden, 1976). In December 1986, the EPA revoked all existing tolerances for residues of mirex (Fed. Regist., 1986).

A literature collection of 325 abstracts from 1947 to 1976 was published by Waters and Black

(1976). Waters et al. (1977a,b) summarized the available information on mirex up to 1977; the International Programme on Chemical Safety published an Environmental Health Criteria Document and a Health and Safety Guide summarizing information on mirex and mirex breakdown products and containing recommendations and evaluations (IPCS, 1984, 1988).

## **Physical and Chemical Properties**

Physically, mirex is an odorless, snow-white crystalline solid that is insoluble in water but soluble in organic solvents such as methyl ethyl ketone, carbon tetrachloride, benzene, xylene, and dioxane. Mirex is reportedly unaffected by sulfuric, hydrochloric, or nitric acids; zinc dust; or sulfur trioxide (Brooks, 1974). Structurally, mirex is closely related to chlordecone (more commonly known as Kepone<sup>®</sup>); chlordecone and photomirex (8-monohydromirex) have been identified as slow degradation products of mirex.

Mirex, highly lipophilic, acts mainly as a stomach poison after ingestion, having little contact insecticidal activity (Brooks, 1974). It provides effective control of fire ants, harvester ants, and Texas leaf-cutting ants at a relatively low rate of application (Heath and Spann, 1973; Carlson et al., 1976).



### **Degradation and Persistence**

Mirex does not occur naturally in the environment. The chemical stability of mirex causes it to be highly persistent in the environment, as illustrated by various experiments (Shapley, 1971). Photodegradation under the influence of ultraviolet radiation is slow, with photomirex being the major product. The environmental half-life of mirex is many years (IPCS, 1984). Exposure to sunlight and ultraviolet light caused only slow degradation; resultant compounds included chlordecone hydrate, undecachloropentacyclodecane, and nonachloropentacyclodecan-5-one hydrate (Ivie et al., 1974a). These breakdown products are as stable as mirex (IPCS, 1984). Mirex was more stable than DDT in the presence of ultraviolet light (Baker and Applegate, 1974) and was not degraded by a variety of soil bacteria (Jones and Hodges, 1974). However, anaerobic sludge organisms appeared to degrade mirex to the 10-monohydro and possibly the 9-monohydro derivatives (Andrade et al., 1975). Unchanged mirex and a number of mirex-related organochlorine compounds (including chlordecone) were detected in two soil samples 12 and 5 years after application of relatively large quantities of mirex (Carlson et al., 1976). In one instance, mirex was applied at a rate of 1 pound per acre (the usual rate of application is 1.7 g per acre) to experimental plots near Gulfport, Mississippi. Analysis of soil samples 12 years later showed that approximately 65% of the mirex was still present unchanged. In a second instance, an aircraft carrying mirex crashed near Sebring, Florida, depositing its



#### (Kepone®)

entire load in a shallow pond. Five years later, up to 80% of the mirex was still present. In both cases, chlordecone and two monohydro and two dihydro mirex derivatives were identified. Lowe et al. (1971) reported that approximately 34% of the original mirex was still present after fire ant bait had been soaked in open seawater for 9 months.

#### Bioaccumulation

The accumulation of mirex in an estuarine food web was studied after mirex was applied three times (1.25 pounds of bait per acre) at 6-month intervals (Borthwick et al., 1973). Mirex migrated from treated lands and high marsh to estuarine biota, and significant concentrations were found in predators such as raccoons and birds. Similar results were obtained by Hyde et al. (1973a), who reported accumulation of mirex residues in a variety of species, including animals raised for human consumption, after mirex bait had been applied six times over a 4-year period. Mirex residues ranging from 0.001 to 0.125 ppm were detected in 67/77 (87%) samples of fat taken from beef cattle raised in mirextreated areas of Mississippi and Georgia (Ford et al., 1973). Mirex was identified in the blubber of 48 beluga whales sampled between 1982 and 1986 in the St. Lawrence River Estuary (Lum et al., 1987). Since there are no known sources of mirex in Quebec, it has been postulated that migrating eels (in which mirex has been measured) and suspended particulate material transported the mirex from Lake Ontario.

Mirex residues were found in birds collected from South Carolina, Georgia, and Florida (Oberheu, 1972; Kreitzer, 1974). Marine unicellular algae species exhibited bioconcentration factors of 3,200-7,300 (Hollister et al., 1975).

In four experiments, each lasting 28 days, mirex leached from bait was applied to an estuarine environment (Tagatz et al., 1975). Toxic responses were highest in summer and lowest in spring. Bioconcentrating factors for mirex were 40,800 for minnows, 10,000 for pink and grass shrimp, and 2,300 for blue crabs.

## **Disposition and Metabolism**

After ingestion, mirex is only partly absorbed; the remainder is generally excreted unaltered in the feces; mirex is also absorbed after inhalation and dermal exposure (IPCS, 1984). Mirex excretion occurs mainly via the feces, with small amounts excreted in urine (Mehendale et al., 1972): traces also have been detected in milk (Gaines and Kimbrough, 1970). Excretion kinetics appear to be biphasic--the initial "fast" phase lasting 38 hours and the "slow" phase projected to last up to 100 days (Mehendale et al., 1972). Mirex binds firmly to soluble liver proteins (Byard et al., 1975) and appears to be retained in fatty tissues (Mehendale et al., 1972; Kutz et al., 1974); these factors may contribute to the long biologic half-life of several months. Mirex was shown to bind to hepatocytes at 37° C and physiologic pH (Rosenbaum and Charles, 1986).

A survey conducted by EPA showed mirex to be present in 52/284 samples of human tissue at levels up to 1.32 ppm on a wet weight basis (Pest. Chem. News, 1976b; USEPA, 1978). Mirex residues of up to 0.16-5.94 ppm were detected in six samples of human adipose tissue from persons living in states where mirex had been used for pest control (Kutz et al., 1974).

Catfish raised in an area that received an application of mirex contained mirex levels from 0.008 to 2.59 ppm (Collins et al., 1973). A buildup of the insecticide was observed in the fish, suggesting that the accumulation occurred via the food chain rather than by direct consumption.

In laying hens fed 1.06 ppm mirex in the diet, the insecticide appeared to be readily absorbed from the digestive tract and distributed throughout the body (Woodham et al., 1975). At 27 weeks, the highest levels were found in fat at a concentration of 15 ppm; levels in other organs were: kidney, 2 ppm; liver, 0.5 ppm; breast, 0.1 ppm. After 39 weeks of dosing, all tissue levels were increased by 60%-300%. In other feed experiments, males often showed higher tissue levels of mirex than did females (Ivie et al., 1974b). Mirex accumulates in egg yolks, indicating that laying hens may lose large quantities of mirex through the eggs. Levels up to 200 ppm mirex in eggs appear to be tolerated without adverse effects on various reproductive indices such as egg hatching and chick growth and survival (Ivie et al., 1974c).

After rats received a single gavage dose of 6 mg/ kg of uniformly labeled [14C]mirex, approximately 60% was excreted unchanged in the feces and 0.7% in urine within 48 hours (Mehendale et al., 1972). Of the remainder, about 34% was stored in body tissues: 27.8% in fat, 3.2% in muscle, 1.75% in liver, 0.76% in kidney, and 0.23% in the intestines. Corticosterone and adrenalectomy affect the mirex distribution in rats. Forty-eight hours after administration of a single 100 mg/kg dose of [14C]mirex by gavage, the absorption of [14C] mirex was decreased in the brain of adrenalectomized rats receiving corticosterone supplements and the [14C]mirex concentration per liver was greater in intact than in adrenalectomized rats with or without corticosterone supplements (Brown and Yarborough, 1988).

Rats and Japanese quail fed diets containing [14C]mirex accumulated the [14C]mirex in all body tissues and especially in adipose tissue (Ivie et al., 1974b). After 16 months, the concentration of mirex in fat had increased over dietary levels 120-fold in rats and 185-fold in male quail. No indication of a plateau was noted. A further 10 months on normal diet produced only a 40% decline in tissue concentration. Mirex readily

traverses the placental barrier and accumulates in the rat fetus (Gaines and Kimbrough, 1970).

No metabolic products were identified following incubation of mirex with liver preparations from mice, rats, and rabbits (Mehendale et al., 1972). However, Stein et al. (1976) reported a nonpolar mirex derivative (tentatively identified as undecachloropentacyclodecane) in the feces of monkeys fed [14C]mirex. These investigators suggested that bacteria in the lower gut may have been responsible for the degradation, as no metabolites were detected in other tissues (such as fat) where the level of radioactivity was several orders of magnitude above that in the feces.

## Toxicity

Several marine species appear to be extremely sensitive to mirex. Crawfish are susceptible to mirex toxicity (Carter and Graves, 1973), with the third instar stage being the most vulnerable (Ludke et al., 1971). Survival of channel catfish was reduced by 33% after treatment of ponds with mirex bait (1.25 pounds per acre); residues present in the edible parts of the fish averaged 0.018 ppm (Hyde, 1973). In contrast, mirex was reported to have no detrimental effect on honeybee colonies adjacent to treated areas (Glancey et al., 1970). No mirex was detected in bees, honey, or pollen from such colonies.

Toxic effects of mirex in mammalian systems, as studied in laboratory animals, are generally characterized by decreased body weight and increased liver weight (Gaines and Kimbrough, 1970; Davison and Cox, 1974; Abraham et al., 1974; Byard and Pittman, 1975; Larson et al., 1979). The increased liver weight in rats is accompanied by increased ornithine decarboxylase and thymidine kinase activity, as well as by increased incorporation of [3H]thymidine into DNA, 36 or 48 hours after exposure to mirex (Yarbrough et al., 1986). Mirex is not metabolized by the liver; however, several reports indicate that mirex induces liver enzymes. Increased cytochrome P450 (Baker et al., 1972; Davison and Cox, 1974; Fouse and Hodgson, 1987; Crouch and Ebel, 1987), together with proliferation of smooth endoplasmic reticulum and increased numbers of osmiophilic dense bodies, have been reported in rats and mice (Gaines and Kimbrough, 1970; Baker, 1974). Mirex can potentiate hepatotoxic effects of other chemicals. Hepatotoxicity, as measured by the leakage of enzymes from hepatocytes in vitro after in vivo exposure to acetaminophen, was enhanced by prior exposure of male C57BL/6 mice in vivo to mirex (Fouse and Hodgson, 1987). In addition, increased demethylase activity has been observed in mice (Abraham et al., 1974; Baker et al., 1972) as well as increased total DNA, total protein, mitochondrial respiratory activity, and microsomal mixed function oxidase enzyme activity (Byard et al., 1975). Mirex is much weaker than chlordecane in potentiating liver damage in rats caused by chloroform, as measured by histologic examination and serum enymes (Mehendale and Klingensmith, 1988).

Conversely, a decrease in the level of glucose-6phosphatase activity (Abraham et al., 1974; Byard et al., 1975) as well as glycogen depletion (Abraham et al., 1974; Kendall, 1974a) were measured in both rats and mice. A 60%-65% loss in liver glutamic oxaloacetic transaminase activity was observed in rats receiving 10-200 ppm mirex in the diet for 4 weeks; lactic dehydrogenase (LDH) also was significantly reduced in rats after ingestion of 10 ppm mirex for 4 weeks (Abston and Yarbrough, 1974). A crystalline extract of LDH from rabbit muscle was competitively inhibited by mirex, both with respect to pyruvate (substrate) and NADH (coenzyme) (Hendrickson and Bowden, 1975).

Single doses of mirex which are not toxic to rats cause death in adrenalectomized animals but not in adrenalectomized animals given supplementary doses of corticosterone (Erwin and Yarbrough, 1983).

Toxic reactions following intraperitoneal administrations of mirex in corn oil at  $LD_{50}$  levels in rats and mice resemble the signs of DDT intoxication--hair loss, listlessness, and diarrhea. Fatty changes in the liver were manifested as periportal liposis in mice fed mirex, whereas intraperitoneal injection resulted in fibrous white patchy lesions on the liver surface with interior necrosis (Kendall, 1974b).

In humans, symptoms and signs of mirex exposure include gastrointestinal irritation with nausea, vomiting, diarrhea, malaise, headache, central nervous system excitation (including tremor, paresthesia, ataxia, confusion, convulsions, ventricular fibrillation, central nervous system depression, and central nervous system respiratory paralysis) (National Clearinghouse for Poison Control Centers, 1976).

## **Reproductive Effects**

White leghorn chickens, Coturnix quail (Davison and Cox, 1974), and Japanese quail (Davison et al., 1975) showed normal reproduction after being fed mirex in the diet for 12 weeks (160 ppm for chickens and 80 ppm for quail). However, eggs of mallards fed 1 ppm mirex showed slightly thicker and heavier shells, whereas at 100 ppm, the egg shells were thinner (Hyde, 1973). Reduced survival of the ducklings was observed; no other adverse effects were reported (Hyde et al., 1973b).

Various reproductive effects of mirex have been reported in rats and mice. Female rats fed 5 ppm mirex produced normal litters, whereas dams fed 25 ppm mirex had fewer offspring born alive, fewer offspring survived to weaning, and many pups developed cataracts (Gaines and Kimbrough, 1970). Offspring born to mothers dosed with mirex but nursed by undosed mothers showed normal survival to weaning and fewer cataracts. Thus, mirex appears to be cataractogenic in mouse and rat neonates only after lactogenic exposure (Chernoff et al., 1976). Gas chromatography of milk from dams dosed with mirex showed an average concentration of 11.3 ppm mirex (Gaines and Kimbrough, 1970).

Mirex administration in feed resulted in reduced litter size in BALB/c and CFW mice; additionally, BALB/c mice showed a significant increase in parent mortality (Ware and Good, 1967). In this experiment, fetuses were not evaluated for congenital defects. An investigation of the teratogenic potential of mirex in rats indicated that low doses of mirex (1.5-3.0 mg/kg administered as a single daily oral dose on days 6-15 of gestation) produced no signs of maternal toxicity and no adverse fetal effects (Khera et al., 1976). Maternal toxicity and subsequent fetal visceral abnormalities were noted in offspring of females receiving 6.0 or 12.5 mg/kg; in addition, decreased fetal survival and reduced fetal weight were observed at 12.5 mg/kg. A dominant lethal assay of males given 0, 1.5, 3.0, or 6.0 mg/kg by gavage daily for 10 days showed no significant difference in reproductive indices between experimental and control groups, even though mirex was detected in the testes of the exposed group.

## Mutagenicity

The genetic toxicity of mirex has been examined in both prokaryotic and eukaryotic cells. Results of reverse mutation assays with numerous strains of Salmonella typhimurium (Hallett et al., 1978; Schoeny et al., 1979; Rinkus and Legator, 1980; Probst and Hill, 1980; Probst et al., 1981) and similar assays using Escherichia coli strains WP2 and WP2 uvrA- (Probst and Hill, 1980; Probst et al., 1981) were uniformly negative; all these bacterial assays were conducted with and without exogenous metabolic activation from induced liver S9 preparations. Likewise, S. typhimurium-microsome studies with a preincubation protocol and Salmonella strains TA98, TA100, TA1535, or TA1537 in the presence or absence of Aroclor 1254-induced male Sprague Dawley rat or Syrian hamster liver S9 showed no mutagenic activity for mirex at doses of up to 10,000 µg/plate (Mortelmans et al., 1986; National Toxicology Program [NTP] data shown in Table C1).

No unscheduled DNA synthesis was detected in cultured rat, mouse, or hamster hepatocytes after exposure to mirex (Probst and Hill, 1980; Probst et al., 1981; Williams, 1980; Maslansky and Williams, 1981; Telang et al., 1981). Results from experiments on induction of gene mutation at the HGPRT locus in rat hepatocytemediated cultured human fibroblasts were negative (Tong et al., 1981). Mirex at exposure concentrations up to 260 µg/ml did not increase the number of sister chromatid exchanges or chromosomal aberrations in cultured Chinese hamster ovary (CHO) cells in the presence or absence of Aroclor 1254-induced male Sprague Dawley rat liver S9 (NTP data shown in Tables C2 and C3). The only in vivo mutagenicity assay reported for mirex was a dominant lethal study in Wistar rats in which no significant difference was reported in either viable embryos or deciduomas in pregnant females mated to males dosed by gavage on each of 10 consecutive days with 1.5, 3.0, or 6.0 mg/kg (Khera et al., 1976).

Chlordecone, the keto-analog of mirex, has been evaluated in a series of short-term mutagenicity assays. Like mirex, chlordecone was not mutagenic in the S. typhimurium-microsome assay at concentrations up to 10,000 µg/plate (Mortelmans et al., 1986) with or without exogenous metabolic activation. Bacterial reverse mutation assay results from other investigators were also reported to be negative (Hallett et al., 1978; Schoeny et al., 1979; Probst and Hill, 1980; Probst et al., 1981). No unscheduled DNA synthesis was observed after exposure of cultured F344 rat hepatocytes to chlordecone (Williams, 1979, 1980; Probst and Hill, 1980; Probst et al., 1981), and no gene mutations were produced in rat liver epithelial cells after chlordecone treatment (Williams, 1979, 1980; Telang et al., 1981). In in vitro cytogenetic studies (Galloway et al., 1987), treatment of CHO cells with up to 20 µg/ml chlordecone in the presence or absence of Aroclor 1254-induced rat liver S9 did not induce chromosomal aberrations: sister chromatid exchange rates were increased, however, after exposure of the cells to chlordecone at concentrations of 1.6-10 µg/ml only in the absence of exogenous metabolic activation. The only in vivo mutagenicity data for chlordecone were reported in an abstract by Simon et al. (1978) who stated that no dominant lethal mutations were produced in the offspring of male rats orally administered 3.6 or 11.4 mg/kg chlordecone per day for 5 days.

## Carcinogenicity

Groups of 18 male and 18 female  $(C57BL/6 \times C3H/Anf)F_1$  mice and 18 male and 18 female  $(C57BL/6 \times C3H/Anf)F_1$  mice were given mirex (98% pure) at doses of 10 mg/kg in 0.5% gelatin by gavage from 7 days to 4 weeks of age; then the mice were fed diets containing 26 ppm mirex (Innes et al., 1969; IARC, 1979). All mice were dead by 70 weeks. "Hepatomas" were observed in 6/18 (33%) males and 8/16 (50%) females of the first strain compared with 8/79

(10%) male and 0/87 female controls and in 5/15 (33%) males and 10/16 (63%) females of the second strain compared with 5/90 (6%) male and 1/82 (1%) female controls. In a companion experiment with the same strains and numbers of mice. 1.000 mg mirex/kg body weight was given by subcutaneous injection in 0.5% gelatin on the 28th day of life (NTIS, 1968). At 78 weeks of age, the remaining mice (16, 17, 17, 15) were killed and necropsies were performed. The incidences of hepatomas in male and female mice were 2/18 and 0/17 in the first strain and 4/17and 1/18 in the second strain; 1/18 gelatin vehicle control males and 1/161 dimethyl sulfoxide "negative" control males of the second strain had hepatomas, whereas none of the controls of the first strain had liver neoplasia.

Mirex (99% pure) was given in feed at 50 and 100 ppm for 18 months to groups of 26 male and 26 female CD rats (Ulland et al., 1977; IARC, 1979); for the first 10 weeks of the study, the dietary levels were 40 and 80 ppm. The animals were observed for another 6 months, and then survivors were killed and necropsies were performed. Groups of 20 male and 20 female rats were used as controls. Administration of mirex had no appreciable effect on growth rate, but the survival rate in all but the low dose female group was decreased, indicating a dose-related (and possible sex-related) effect. At necropsy. the liver of all animals administered mirex--except for the low dose females--appeared enlarged, mottled, or spotted. A wide spectrum of liver changes was observed, ranging from fatty metamorphosis and megalocytosis of hepatocytes, cystic degeneration and necrosis, and biliary hyperplasia with periportal fibrosis, to circumscribed areas of cellular alteration. Neoplastic nodules of the liver were increased in males (control, 0/20; 50 ppm, 2/26; 100 ppm, 7/26) and in females (0/20; 4/26; 4/26); carcinomas were observed in one low dose and four high dose males and in one high dose female.

In 1979, the International Agency for Research on Cancer (IARC, 1979) evaluated the available data and decided, "There is *sufficient evidence* that mirex is carcinogenic in mice and rats. In the absence of adequate data in humans, it is reasonable for practical purposes to regard mirex as if it presented a carcinogenic risk to humans." IARC (1987) reevaluated the available data and came to the same conclusion, mirex was placed into the overall evaluation category of Group 2B: possibly carcinogenic to humans.

For the related chemical chlordecone (98% pure). 2-year dietary studies were conducted in groups of 50 male and 50 female Osborne-Mendel rats and B6C3F<sub>1</sub> mice (NCI, 1976; IARC, 1979). Doses were reduced during the course of the studies, due to toxicity; time-weighted concentrations for male rats were 0, 8, 24 ppm; for female rats, 0, 18, 26 ppm; for male mice, 0, 20, 23 ppm; and for female mice, 0, 20, 40 ppm. Exposure was discontinued at week 80, and the animals were killed and necropsies performed at week 112 (rats) and week 90 (mice). For rats, hepatocellular carcinomas were found in males (control, 0/105; low dose, 0/50; high dose, 3/44; two low dose males had neoplastic nodules) and in females (0/100; 0/50; 10/45; one control and two high dose females had neoplastic nodules). Extensive hyperplasia, fatty infiltration, and cellular degeneration of the liver were observed in male and female rats in both dose groups. For mice, hepatocellular carcinomas were found in males (6/19; 39/48; 43/49) and in females (0/10;26/50; 23/49). IARC (1979, 1987) came to the same conclusions for chlordecone as for mirex.

## Human Exposure

In early 1974, the EPA expressed concern over the widespread use of mirex because of: (1) adverse effects on reproduction as demonstrated in laboratory animals, (2) detectable amounts found in human adipose tissue from a limited sampling of the population, (3) tumorigenic implications in mice, (4) effects on mammalian energy metabolism, (5) mortality in birds, (6) potential to move in a saltwater environment, (7) effects on certain aquatic organisms, and (8) persistence in the environment (Pest. Chem. News, 1974). In 1978, the EPA issued a report on human population exposure to mirex and kepone. Mirex was detected in human adipose tissue (52/184, 18%), and yet none was found in 1,500 breast milk samples taken throughout the United States (USEPA, 1978).

## **Study Rationale**

Mirex was nominated to the National Cancer Institute for carcinogenesis study in rodents because of widespread environmental exposure. Since there were positive results already in mice, only rats were exposed to mirex in the studies reported in the Technical Report. The dietary route of administration was chosen because this was a likely means of human exposure.

## **II. MATERIALS AND METHODS**

# PROCUREMENT AND CHARACTERIZATION OF MIREX PREPARATION AND CHARACTERIZATION OF

## FORMULATED DIETS

## **TWO-YEAR STUDIES**

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

## PROCUREMENT AND CHARACTERIZATION OF MIREX

Mirex (1,1a,2,2,3,3a,4,5,5,5a,5b,6-dodecachlorooctahydro-1,3,4-metheno-1H-cyclobuta[cd]pentalene) was obtained from the Agricultural Department of Allied Chemical Company (Baltimore, Maryland) in a 10-pound container as a fine powder (lot no. 083173). Gas chromatographic analysis indicated that the study material was approximately 95% pure. However, because data records for this analysis were incomplete, a retrospective purity analysis was performed on the residual study material by a different analytical laboratory. The identity of the study material was confirmed by infrared (Figure 1) and ultraviolet spectrophotometry and by low and high resolution mass spectrometry (Figure 2). All spectroscopic data were consistent with reference spectra and the structure of mirex. The purity of mirex was determined to be greater than 96% by thin-layer chromatography, capillary gas chromatography, and Karl Fischer water analysis. The residual study material contained 1% water and a 2% impurity that was identified as dechlorane 604 by infrared and ultraviolet spectrophotometry and by low- and high-resolution mass specrometry (Figure 3).

## PREPARATION AND CHARACTERIZATION OF FORMULATED DIETS

No data records were located for the preparation, analysis, or stability of the formulated diets used during the 2-year studies of mirex. A retrospective feed homogeneity and stability study was conducted to confirm that adequate uniform feed blends of mirex could be prepared with relative ease. Results of these studies indicate that homogeneous feed blends of mirex can be prepared easily at 0.1 and 50 ppm by spiking a small premix blend of feed with mirex dissolved in acetone, allowing the acetone to evaporate, and then blending the premix with the approximate amount of feed to yield the required concentration of mirex. These formulated diets were shown to be stable for at least 3 weeks when stored at temperatures ranging from  $-20^{\circ}$ 

to 25° C. Formulated diets of mirex were analyzed by extraction with hexane followed by gas chromatographic analysis on a GP 4% SE-30/6% SP2401 column with an electron capture detector. Because no records are available, the methods of preparing the diet/mirex mixtures are not known. Nonetheless, available information from the "dose preparation log" shows that the correct amounts of mirex were weighed and mixed with the appropriate amounts of feed to give the target concentrations needed for the different dose groups. Further, numerous entries in the "chemical/vehicle analysis" sheets show that sample analyses of the different dietary concentrations of mirex contained the desired levels of mirex. Moreover, homogenicity samples taken from "left, bottom, right" of the mirex-diet containers for the 0.1-, 1-, 10-, 25-, and 50-ppm mixtures verify uniform and adequate mixtures. Thus, although specific documentation regarding the exact procedure used to incorporate mirex into the feed is not in the archival records, the collective available information is sufficient to support that the mixtures were adequately and accurately prepared and that the animals did receive the appropriate mirex-containing diets.

## **TWO-YEAR STUDIES**

## Study Design

Dose selection was based on results of earlier short-term studies (primarily on the reduction of body weights and on differences in survival); although the data and records from these studies are considered incomplete and not adequate enough for reporting, there was enough information present to select the dietary concentrations for the 2-year studies. In brief, groups of five male and five female rats (strain not specified) received diets for 26 weeks containing mirex at concentrations of 0, 25, 50, 80, 100, 150, 200, 400, or 1,000 ppm. Final mean body weights were decreased 11% for the 100-ppm male group, 8% for the 150-ppm male group, 25% for the 400ppm male group, and 13% or 17% for the 80- to 200-ppm female groups; all animals in the 400and 1,000-ppm groups died before the end of the 26 weeks.





Mirex, NTP TR 313

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FIGURE 3. MASS SPECTRUM OF THE IMPURITY DECHLORANE 604 FOUND IN MIREX LOT NO. 083173

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For the 2-year studies, groups of 52 rats of each sex were fed diets containing 0, 0.1, 1, 10, 25, or 50 ppm mirex in feed for 104 weeks. Several months after the first study had started, it was decided, based on lack of clinical signs and only random and minor variations in the rate of weight gain, that females could tolerate greater concentrations of mirex in feed. In the second study, groups of 52 female rats were fed diets containing 0, 50, or 100 ppm mirex. Further, these dietary concentrations were the same as those used by Ulland et al. (1977) for their study with female CD rats.

## Source and Specifications of Animals

The male and female F344/N rats used in this study were produced at Frederick Cancer Research Center or at Harlan Industries (second female rat study). Breeding stock for the foundation colony at the production facility originated at the National Institutes of Health Repository. Animals shipped for study were progeny of defined microflora-associated parents that were transferred from isolators to barrier-maintained rooms. Animals were transferred or shipped to the study laboratory at 4 weeks of age. The animals were quarantined at the study facility for 4 weeks. Thereafter, five animals of each sex were killed and given a complete necropsy to assess their health status. The rats were placed on study at 7-8 weeks of age.

## **Animal Maintenance**

Rats were housed four per cage in polycarbonate cages. Feed and water were available ad libitum. Available details of animal maintenance are given in Table 1.

## Clinical Examinations and Pathology

All animals were observed two times per day, and clinical signs were recorded once per week; the available records on clinical observations were not considered adequate for reporting. Body weights by cage were recorded once per week for the first 12 weeks of the studies and once every 4 weeks thereafter. Mean body weights were calculated for each group. Moribund animals were killed, as were animals that survived to the end of the studies. A necropsy was performed on all animals, including those found dead. In some cases, a particular organ was not saved or was autolyzed (e.g., pancreas and thyroid gland in male rats). 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.

Examinations for grossly visible lesions were performed at necropsy. All major tissues were fixed and preserved in 10% neutral buffered formalin, processed and trimmed, embedded in paraffin, sectioned, and stained with hematoxylin and eosin for microscopic evaluation. Tissues examined microscopically are listed in Table 1.

The pathology diagnoses and evaluation of the long-term studies of mirex in rats was first performed by a pathologist at the Frederick Cancer Research Center. Both the pathology quality assessment review and the Pathology Working Group (PWG) review identified major discrepancies and deficiencies, largely in diagnoses, that did not permit an objective evaluation of the studies. As a result, the pathology was reassigned to an independent pathologist (Clement Associates) for a complete re-evaluation. The pathology quality assessment review also identified a marked disparity between the number of liver sections evaluated in some groups of dosed male and female rats and their corresponding control groups. This numerical disparity introduced a potential bias in the interpretation of the pathologic findings, and additional liver sections from control groups were prepared and examined to preclude any possibility of sampling bias. This re-evaluation by a pathologist at Clement Associates was subjected to an independent quality assessment review and a subsequent PWG review and was deemed satisfactory. The pathology data stored in the computerized Carcinogenesis Bioassay Data System and reported in this Technical Report represent a consensus of the opinions of the Clement pathologist and the members of the PWG.

# TABLE 1. EXPERIMENTAL DESIGN AND MATERIALS AND METHODS IN THE TWO-YEAR FEEDSTUDIES OF MIREX

EXPERIMENTAL DESIGN	
Study Laboratory	Frederick Cancer Research Center (Frederick, MD)
Size of Study Groups	52 males and 52 females
Doses	First study: 0, 0.1, 1, 10, 25, or 50 ppm mirex in feed; second study: female rats0, 50, or 100 ppm mirex in feed
Date of First Dose	First study: 6/7/77; second study: 1/10/78
Duration of Dosing	104 wk
Type and Frequency of Observation	Observed 2 $ imes$ d; weighed 1 $ imes$ wk for 12 wk and then 1 $ imes$ 4 wk
Necropsy and Histologic Examination	Necropsy performed on all animals; the following tissues were examined histo- logically: adrenal glands, bone marrow, brain, esophagus, heart, kidneys, liver, lungs and bronchi, mammary gland, submandibular and/or mesenteric lymph nodes, pancreas, parathyroid, pituitary gland, prostate/testes or ovaries/uterus, salivary glands, skin, small and large intestine, spleen, stomach, thymus, thy- roid gland, tissue masses, trachea, and urinary bladder
ANIMALS AND ANIMAL MAINTENAN	CE
Strain and Species	F344/N rats
Animal Source	Frederick Cancer Research Center (Frederick, MD) (first study); Harlan Industries (Indianapolis, IN) (second study)
Time Held Before Study	4 wk
Age When Placed on Study	7-8 wk
Age When Killed	First study: male112-113 wk; female112-114 wk; second study: female112-114 wk
Necropsy Dates	First study: 6/12/79-6/29/79; second study: female1/19/80-1/24/80
Method of Animal Distribution	Such that average cage weights were approximately equal; detailed records are not available.
Animal Identification	Ear notch
Feed	Wayne Sterilizable Lab-Blox Mash® (Allied Mills, Chicago, IL); available ad libitum
Water	Tap water acidified to pH 2.5 with 1 N HCl in glass bottles; available ad libitum
Cages	Polycarbonate (Lab Products, Rochelle Park, NJ)
Animals per Cage	4
Other Chemicals on Study in the Same Room	None
Animal Room Environment	Temp22°-24° C; hum45%-55%; fluorescent light 12 h/d; 15 room air changes/h

## **Statistical Methods**

*Data Recording:* Data on this experiment were recorded in the Carcinogenesis Bioassay Data System.

Survival Analyses: The probability of survival was estimated by the product-limit procedure of Kaplan and Meier (1958) and is presented in the form of graphs. Animals were censored from the survival analyses at the time they were found to be missing or dead from other than natural causes; animals dving from natural causes were not 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) life table test for a doserelated trend. When significant survival differences were detected, additional analyses using these procedures were carried out to determine the time point at which significant differences in the survival curves were first detected. All reported P values for the survival analysis are two-sided.

Calculation of Incidence: The incidence of neoplastic or nonneoplastic lesions is 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 include only those animals for which the 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 a necropsy was performed.

Analysis of Tumor Incidence: The majority of tumors in this study were considered to be incidental to the cause of death or not rapidly lethal. Thus, the primary statistical method used was an incidental tumor analysis, which assumed that the diagnosed tumors were discovered as the result of death from an unrelated cause and thus did not affect the risk of death. In this approach, the proportions of tumor-bearing animals in dosed and control groups were compared in each of five time intervals: weeks 0-52, weeks 53-78, weeks 79-92, week 93 to the week before the terminal-kill period, and the terminal-kill period. The denominators of these proportions were the number of animals actually examined for tumors during the time interval. The individual time interval comparisons were then combined to obtain a single overall result.

In addition to incidental tumor analysis, alternative methods of statistical analysis were used, and the results of these tests are summarized in the appendixes. These include the life table test (Cox, 1972; Tarone, 1975), appropriate for rapidly lethal tumors, and the Fisher exact test and the Cochran-Armitage trend test (Armitage, 1971; Gart et al., 1979), procedures based on the overall proportion of tumor-bearing animals.

Tests of significance include pairwise comparisons of each dosed group with controls and a test for an overall dose-response trend. Continuitycorrected tests were used in the analysis of tumor incidence, and reported P values are onesided. The procedures described above also were used to evaluate selected nonneoplastic lesions. (For further discussion of these statistical methods, see Haseman, 1984.)

Historical Control Data: Although the concurrent control group is always the first and most appropriate control group used for evaluation, there are certain instances in which historical control data can be helpful in the overall assessment of tumor incidence. Consequently, control tumor incidences from the NTP historical control data base (Haseman et al., 1984, 1985) are included for those tumors appearing to show compound-related effects.

## **III. RESULTS: TWO-YEAR STUDIES**

Body Weights and Feed Consumption Survival

Pathology and Statistical Analyses of Results

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### **Body Weights and Feed Consumption**

Mean body weights of male rats that received 25 or 50 ppm mirex were 5%-9% lower than those of the controls beginning at about weeks 12-16, 7%-11% lower at week 60, and 11%-18% lower at week 100 (Table 2; Figure 4). Mean body weights of female rats were 5%-10% lower than those of the controls after week 24 in the 50-ppm group (first study), week 52 in the 50-ppm group (second study), or week 40 in the 100-ppm group; 17% lower after week 84 in the 50-ppm group (first study); and 12%-18% lower after week 64 in the 100-ppm group (Tables 2 and 3; Figures 4 and 5). The average daily feed consumption per rat in the 0.1-ppm, 1-ppm, 10-ppm, 25-ppm and 50-ppm groups in the first studies was 83%, 84%,

87%, 91%, and 89% that by the controls for males and 86%, 99%, 86%, 92%, and 89% for females (Tables D1 and D2). The average amount of mirex consumed per day in the first studies was approximately 0.007, 0.07, 0.7, 1.8, and 3.8 mg/kg for the 0.1-ppm, 1-ppm, 10-ppm, 25-ppm, and 50-ppm groups of male rats and 0.007, 0.08, 0.7, 2.0, and 3.9 mg/kg of female rats. For the second study in female rats, the feed consumption data are incomplete and the available data indicate a wide range of values, and thus, average amounts of mirex per body weight could not be reliably calculated. However, based on the feed consumption data for the first study in female rats, average estimated mirex doses would have been 0, 3.9, and 7.7 mg/kg.

Weeks	Control		0.1 ppm		1 maa 1		10 pom		25 ppm			50 nnm					
00	Av. Wt. 1	No. of	Av. Wt.	Wt. (%	No. of	Av. Wt.	WL. (%	No. of	Av. Wt.	WL (%	No. of	Av. Wt.	WL. (%	No. of	Av. Wt.	Wt. (%	No. of
Study	(grams)	Surv	(grams)	of Cont)	Surv	(grams)	of Cont)	Surv	(grams)	of Cont)	Surv	(grams)	of Cont)	Surv	(grams)	of Cont)	Surv
ALE					······												
0	121	52	121	100	52	121	100	52	123	102	52	123	102	52	124	102	52
2	205	52	199	97	52	206	100	52	206	100	52	205	100	52	200	98	52
4	227	52	225	99	52	227	100	52	225	99	52	230	101	52	231	102	52
6	263	52	258	98	52	262	100	52	260	99	52	264	100	52	255	97	52
10	273	52	207	30	32	270	39	52	269	33	52	272	100	52	204	97	52
10	297	52 59	200	90	32 59	289	97	52	293	99	52	295	99	32	208	97	52
16	327	52	315	86	52	320	98	52	318	97	52	311	95	52	298	91	52
20	345	52	\$33	97	52	338	98	52	337	98	52	325	94	52	314	91	52
24	364	52	352	97	52	357	98	52	359	99	52	348	96	52	334	92	52
28	381	52	366	96	52	372	98	52	375	98	52	363	95	52	346	91	52
32	393	52	378	96	52	381	97	52	389	99	52	373	95	52	355	90	51
36	398	52	386	97	52	391	98	52	395	99	52	380	95	52	364	91	50
40	401	52	391	98	52	394	98	52	401	100	52	382	95	52	368	92	50
44	405	52	394	97	52	397	98	52	400	99	52	382	94	52	370	91	50
48	415	52	406	98	52	411	99	52	412	99	51	393	95	52	375	90	50
52	416	52	413	99	52	416	100	52	421	101	51	397	95	52	378	91	50
60	413	52	412	100	52	415	100	50	418	101	51	395	96	51	377	91	50
05 74	432	52	420	399	51	420	101	49	433	100	50	403	93	50	355	89	40
R4	411	49	413	100	51	416	101	45	419	100	49	303	92	42	343	83	44
92	423	49	423	100	49	425	100	40	420	99	45	392	93	38	545	85	39
100	418	47	415	99	46	425	102	36	405	97	42	371	89	27	344	82	23
FEMAL	Е																
0	100	52	100	100	52	100	100	52	100	100	52	100	100	52	100	100	52
2	146	52	145	99	52	144	99	52	142	97	52	142	97	52	142	97	52
4	156	52	155	99	52	154	99	52	153	98	52	159	102	52	158	101	52
6	174	52	173	99	52	172	99	52	171	98	52	170	98	52	172	99	52
8	175	52	173	99	52	172	98	52	170	97	52	170	97	52	172	98	52
10	190	52	183	96	52	182	96	52	180	95	52	182	96	52	183	98	52
17	194	32	191	<b>98</b> 00	52	188	97	52	182	92	52	186	96	5Z 59	185	01: AD	57
20	205	32 52	207	90	52	200	40	54 52	200	90 48	52	203	91	52 59	200	95	52
24	219	52	216	99	52	217	99	52	211	96	52	215	98	52	204	93	52
28	227	52	223	98	52	225	99	52	218	96	52	219	96	52	213	94	52
32	231	52	227	98	52	230	100	52	223	97	52	225	97	52	216	94	52
36	238	52	232	97	52	234	98	52	228	96	52	229	96	52	220	92	52
40	243	52	237	98	52	240	99	52	233	96	52	235	97	52	224	92	52
44	246	52	241	98	52	244	99	52	239	97	52	239	97	52	228	93	52
48	246	52	239	97	52	243	99	52	239	97	52	238	97	52	229	93	52
52	249	52	243	98	52	248	100	52	243	98	52	244	98	51	232	93	51
<b>50</b>	264	52	256	97	52	261	99	52	257	97	52	257	97	51	242	92	51
65	285	52	278	98	51	282	99	52	275	96	52	272	95	50	206	90 90	51 50
10	302	34 40	20-3 20-3	33 44	40	200	100	24 Au	290 991	70 44	34	213	91 VA	50 50		50	47
92	315	45	298	95	46	303	96	43	302	96	47	299	95	49	267	85	45
			200			400					••						

## TABLE 2. MEAN BODY WEIGHTS AND SURVIVAL OF RATS IN THE FIRST TWO-YEAR FEED STUDIES OF MIREX

Weeks	Co	ontrol		50 ppm		100 ppm			
on Study	Av. Wt. (grams)	No. of Survivors	Av. Wt. (grams)	Wt. (percent of controls)	No. of Survivors	Av. Wt. (grams)	Wt. (percent of controls)	No. of Survivors	
0	128	52	130	102	52	133	104	52	
4	147	52	147	100	52	150	102	52	
8	164	52	165	101	52	168	102	52	
12	168	52	172	102	52	174	104	52	
16	179	52	180	101	52	184	103	52	
20	187	52	189	101	52	188	101	52	
24	195	52	193	99	52	193	99	52	
28	199	52	198	99	52	197	99	52	
32	206	52	205	100	52	202	98	52	
36	213	52	208	98	52	207	97	52	
40	224	52	213	95	52	209	93	52	
44	231	52	222	96	52	216	94	52	
48	235	52	225	96	52	218	93	52	
52	244	51	233	95	52	224	92	52	
56	250	50	237	95	52	226	90	52	
60	259	50	246	95	52	232	90	52	
64	269	50	252	94	52	238	88	52	
68	276	50	260	94	52	243	88	52	
72	282	50	266	94	52	249	88	52	
76	282	50	270	96	51	252	89	52	
80	287	50	273	95	51	255	89	52	
84	290	49	273	94	51	251	87	50	
88	298	48	278	93	51	253	85	48	
92	285	48	265	93	51	242	85	47	
96	296	46	275	93	50	247	83	44	
100	289	44	264	91	49	247	85	40	
104	289	44	267	92	44	238	82	39	

# TABLE 3. MEAN BODY WEIGHTS AND SURVIVAL OF FEMALE RATS IN THE SECOND TWO-YEAR FEED STUDY OF MIREX



FIGURE 4. GROWTH CURVES FOR RATS FED DIETS CONTAINING MIREX FOR TWO YEARS (FIRST STUDY)

Mirex, NTP TR 313



FIGURE 5. GROWTH CURVES FOR FEMALE RATS FED DIETS CONTAINING MIREX FOR TWO YEARS (SECOND STUDY)

## Survival

Estimates of the probabilities of survival for male and female rats fed diets containing mirex and for controls are shown in Table 4 and in the Kaplan and Meier curves in Figures 6 and 7. The survival of the 25- and 50-ppm groups of male rats was lower (P < 0.001) than that of the controls after week 86 and week 87, respectively. No significant differences in survival were observed between any groups of female rats in either the first or second studies.

# Pathology and Statistical Analyses of Results

This section describes the statistically significant or biologically noteworthy changes in the incidences of rats with neoplastic or nonneoplastic lesions of the liver, adrenal gland, kidney, hematopoietic system, pituitary gland, and thyroid gland. For two lesions (adrenal gland benign and malignant pheochromocytomas and mononuclear cell leukemia), the incidence data from the two studies in female rats were combined for statistical purposes.

Summaries of the incidences of neoplasms and nonneoplastic lesions, individual animal tumor diagnoses, statistical analyses of primary tumors that occurred with an incidence of at least 5% in at least one animal group, and historical control incidences for the neoplasms mentioned in this section are presented in Appendixes A and B for male and female rats, respectively.

TABLE 4.	SURVIVAL	OF RATS	IN THE	TWO-YEAR	FEED	STUDIES	OF	MIREX
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	Control	0.1 ppm	1 ppm	10 ppm	25 ppm	50 ppm	100 ppm
MALE (a)							
Animals initially in study Nonaccidental deaths before termination (b Killed at termination Died during termination period Survival P values (c) FEMALE (FIRST STUDY) (a)	$52 \\ 8 \\ 42 \\ 2 \\ < 0.001$	52 15 32 5 0.159	52 16 33 3 0.072	52 15 34 3 0.140	$52 \\ 33 \\ 15 \\ 4 \\ < 0.001$	52 37 11 4 <0.001	
Animals initially in study Nonaccidental deaths before termination (b Killed at termination Died during termination period Survival P values (c)	52 ) 14 36 2 0.933	52 14 33 5 0.946	52 17 30 5 0.676	52 17 34 1 0.812	$52 \\ 11 \\ 35 \\ 6 \\ 0.530$	52 17 32 3 0.670	
FEMALE (SECOND STUDY) (d) Animals initially in study Nonaccidental deaths before termination (b Killed at termination Died during termination period Survival P values (c)	52 ) 8 43 1 0.266					52 8 43 1 0.897	$52 \\ 13 \\ 37 \\ 2 \\ 0.358$

(a) Termination period for the first study: male--weeks 105-107; female--weeks 107-109

(b) Includes animals killed in a moribund condition

(c) The result of the life table trend test is in the control column, and the results of the life table pairwise comparisons with the controls are in the dosed columns.

(d) Termination period for the second study: weeks 105-106



FIGURE 6. KAPLAN-MEIER SURVIVAL CURVES FOR RATS FED DIETS CONTAINING MIREX FOR TWO YEARS (FIRST STUDY)


FIGURE 7. KAPLAN-MEIER SURVIVAL CURVES FOR FEMALE RATS FED DIETS CONTAINING MIREX FOR TWO YEARS (SECOND STUDY)

Liver: Several lesions attributable to the administration of mirex were present in the liver (Table 5). These consisted of cytomegaly, fatty metamorphosis, angiectasis (males only), and cellular necrosis. Cytomegaly was observed at increased incidences in the 10-, 25-, and 50-ppm groups of males and the 10-, 25-, 50-, and 100ppm groups of females. The lesion consisted of generalized centrilobular cytomegaly that increased in both incidence and severity with increased dose. In more severely affected rats, there was bridging of centrilobular areas with involvement of virtually the entire hepatic lobules. Variable atrophy of periportal hepatocytes was associated with the centrilobular change and resulted in some distortion of the hepatic lobular architecture. The enlarged hepatocytes (cytomegaly) had abundant eosinophilic cytoplasm, and some had clear or vacuolated cytoplasm. The presence of cytoplasmic vacuoles is consistent with the intracellular accumulation of fat, and the lesion was diagnosed as fatty metamorphosis. Necrosis of hepatocytes, either focal and/or centrilobular, was observed at increased incidences in dosed groups of male and female rats. Angiectasis, consisting of dilated sinusoids filled with blood or proteinaceous material, occurred more frequently in dosed groups of male rats. This lesion often occurred within foci of cellular alteration or neoplastic nodules.

Neoplastic nodules of the liver in male and female (second study) rats, hepatocellular carcinomas in males, and neoplastic nodules or hepatocellular carcinomas (combined) in males and females (second study) occurred with positive trends, and the incidences in the 10-, 25-, and 50ppm groups of males and the 50- and 100-ppm

TABLE 5	NUMBER	OF RA	TS WITH	LIVER	LESIONS IN	THE	TWO-YEAR	FEED	STUDIES	OF	MIREX
IADDE U.	nomben	OF INA	10 11111		LEGIONS IN	11110	TWO-TRAIL	LUDD	010DIU0	O.	TALLAR TAL

			Conc	entration	(ppm)		
Lesion	Control	0.1	1	10	25	50	100
ALE (a)							
Fatty metamorphosis	10	11	13	*20	**21	**26	
Hepatocytomegaly	2	**12	2	**40	**43	**44	
Necrosis	7	11	10	12	**28	**38	
Angiectasis	20	20	19	**42	**38	**39	
Neoplastic nodule	3	5	5	**14	**15	**26	
Hepatocellular carcinoma	3	0	2	2	3	4	
EMALE (a)							
Fatty metamorphosis							
First study	11	13	18	**36	**45	**43	
Second study	14					**34	**39
Hepatocytomegaly							
First study	4	2	3	*14	**39	**45	
Second study	4					**49	**49
Necrosis							
First study	3	4	3	**15	8	**13	
Second study	4					7	**17
Angiectasis							
First study	3	8	3	2	2	*9	
Second study	6			••		7	10
Neoplastic nodule							
First study	10	5	4	5	9	7	
Second study	2					**23	**30
Hepatocellular carcinoma							
First study	0	0	0	0	1	2	
Second study	0					0	1

(a) Fifty-two rats were examined in each group.

\*P<0.05 vs. controls

\*\*P<0.01 vs. controls

groups of females (second study) were greater than those in the controls (Table 6). There were no differences in incidences of liver neoplasia in the first study in female rats; the number of benign tumors in the control group was unusually high compared with the historical incidence for female F344/N rats ( $3\% \pm 3\%$ ; 57/2,015; Table B7). The possibility exists that the

MALE	Control	0.1 ppm	1 ppm	10 ppm	25 ppm	50 ppm
Neoplastic Nodule (c)						
Overall Rates	3/52 (6%)	5/52 (10%)	5/52 (10%)	14/52 (27%)	15/52 (29%)	26/52 (50%)
Adjusted Rates	6.8%	12.6%	13.9%	36.5%	60.6%	81.4%
Terminal Rates	3/44 (7%)	4/37 (11%)	5/36 (14%)	13/37 (35%)	10/19 (53%)	10/15 (67%)
Week of First Observation	105	85	105	91	98	66
Life Table Tests	P<0.001	P = 0.279	P = 0.251	P = 0.001	P<0.001	P<0.001
Incidental Tumor Tests	P<0.001	P = 0.278	P = 0.251	P = 0.002	P<0.001	P<0.001
Hepatocellular Carcinoma (d)						
Overall Rates	3/52 (6%)	0/52 (0%)	2/52 (4%)	2/52 (4%)	3/52 (6%)	4/52(8%)
Adjusted Rates	6.8%	0.0%	5.6%	54%	12.4%	20.3%
Terminal Rates	3/44 (7%)	0/37 (0%)	2/36 (6%)	2/37 (5%)	1/19 (5%)	2/15 (13%)
Week of First Observation	105	0.07 (0.07	105	105	100	95
Life Table Tests	P = 0.002	P = 0.153N	P = 0.591 N	P = 0.579N	P=0.302	P = 0.094
Incidental Tumor Tests	P = 0.047	P = 0.153N	P = 0.591N	P = 0.579N	P = 0.601	P = 0.297
Neoplastic Nodule or Honotocollular Caroli						
Overall Rates	6/59 (19%)	5/59 (10%)	B/59 (1906)	15/59 (90%)	16/52 (31%)	28/52 (54%)
Admeted Potos	19 60	19 60.	16 70	20.90	69 104	20102 (04.07
Terminal Pater	C(AA (1 A07)	14.0%	E ( ) C ( ) 70 ( )	14/07/0000	10/10 (590)	11/15 (790)
Week of First Observation	105	4/3/(11%)	0/30 (1/%)	14/37 (36%)	10/19 (33%)	LT/13 (13%)
Lee Table Test	100 D < 0.001	00 D 0.007DI	103	D 0.000	90 D < 0 001	00 D < 0.001
	P<0.001	P = 0.607N	P = 0.475	P = 0.008	P<0.001	P<0.001
Incidental Tumor Tests	P<0.001	P ≈ 0.609N	P=0.475	P=0.010	P<0.001	P<0.001
FEMALE (FIRST STUDY)						
Neoplastic Nodule (f)						
Overall Rates	10/52(19%)	5/52 (10%)	4/52 (8%)	5/52(10%)	9/52 (17%)	7/52 (13%)
Adjusted Rates	25.3%	13.2%	11.4%	14.3%	21.2%	19.0%
Terminal Rates	9/38 (24%)	5/38 (13%)	4/35 (11%)	5/35 (14%)	8/41 (20%)	6/35 (17%)
Week of First Observation	87	107	107	107	96	94
Life Table Tests	P = 0.329	P = 0.130N	P = 0.098N	P = 0.165N	P = 0.424N	P = 0.356N
Incidental Tumor Tests	P = 0.326	P = 0.135N	P = 0.090N	P=0 180N	P = 0.500N	P = 0.347N
Hepatocellular Carcinoma						
Overall Rates	0/52 (0%)	0/52 (0%)	0/52 (0%)	0/52 (0%)	1/52 (2%)	2/52 (4%)
Neoplastic Nodule or Hepatocellular Carcin	loma (g)					
Overall Rates	10/52 (19%)	5/52 (10%)	4/52 (8%)	5/52(10%)	10/52 (19%)	9/52(17%)
Adjusted Rates	25.3%	13 2%	11 4%	14.3%	23 0%	24.6%
Terminal Rates	9/38 (24%)	5/38 (13%)	4/35 (11%)	5/35 (14%)	8/41 (20%)	8/35 (23%)
Week of First Observation	87	107	107	107	96	94
Life Table Tests	P = 0.117	P = 0.130N	P = 0.098N	P = 0.165N	P = 0.518N	P = 0.571N
Incidental Tumor Tests	P = 0.119	P = 0.135N	P = 0.090N	P = 0.180N	P = 0.593N	P = 0.563N
FEMALE (SECOND STUDY)		Control	50 j	opm	100 ppm	
Neoplastic Nodule (f)						
Overall Rates		2/59 (106)	92/5	2 (44%)	30/59 (58%)	
Admeted Rates		4 50	20/0	(44)) ()	80 10L	
Terminal Bates		9/14 (5%)	91/4	A (A 8%)	26/39 (67%)	
Week of First Observation		105	95		82	
L fe Table Tests		P<0.001	50 P / I	0.001	B < 0.001	
Incidental Tumor Tests		P<0.001 P<0.001	P<(	0.001	P<0.001	
Heretzellelen Consinone						
Overall Rates		0/52 (0%)	0/52	: (0%)	1/52 (2%)	
Neoplastic Nodule or Hepstocellular Caroin	oma (g)					
Overail Rates		2/52(4%)	23/5	2(44%)	31/52 (60%)	
Adjusted Rates		4.5%	49.8		70.0%	
Terminal Rates		2/44 (5%)	21/4	4 (48%)	26/39 (67%)	
Week of First Observation		105	95		82	
Life Table Tests		P<0.001	P<	0 001	P<0.001	
Incidental Tumor Tests		P<0.001	P<(	0 001	P<0.001	

(a) The statistical analyses used are discussed in Section II (Statistical Methods) and Table A3 (footnotes); the incidence of hepatocellular neoplasms in controls in the (a) The statistical analyses used are discussed in Section II (Statistical Methods) and Table A3 (footnotes); the incidence of nepacocalitar neoplasms in ( first study in female rats was significantly different from that in the second study, and therefore, the two control groups were not combined for analysis.
 (b) The estimated dose in milligrams per kilograms per day is given in Section III (Body Weights and Feed Consumption) and in Appendix D.
 (c) No 2-year studies by this laboratory are included in the historical data base; historical incidence in NTP studies (mean ± SD): 83/1,969 (1% ± 5%)
 (d) Historical incidence in NTP studies (mean ± SD): 19/1,969 (1% ± 1%)

(e) Historical incidence in NTP studies (mean  $\pm$  SD): 101/1,969 (5%  $\pm$  5%) (f) Historical incidence in NTP studies (mean  $\pm$  SD): 57/2,015 (3%  $\pm$  3%)

(g) Historical incidence in NTP studies (mean  $\pm$  SD): 59/2,015 (3%  $\pm$  3%)

additional sampling of liver sections may have contributed to this higher incidence. The two studies are not reported with combined statistical analyses because the two control groups were different (P=0.008); however, the combined analyses did show a positive trend (P<0.0012), and the incidences in both the 50ppm and 100-ppm groups were significantly increased (P<0.001) compared with that in the control composite (control: 12/104, 11%; 0.1 ppm: 5/52, 10%; 1 ppm: 4/52, 8%; 10 ppm: 5/52, 10%; 25 ppm: 10/52, 19%; 50 ppm: 32/104, 31%; 100 ppm: 31/52, 58%).

The neoplastic nodules observed in dosed rats usually consisted of enlarged hepatocytes with eosinophilic or clear cytoplasm arranged in irregular distorted cords one or two cell layers thick. The eosinophilic cell type predominated in males, and the clear cell type was more common in females. Neoplastic nodules consisting of cells with basophilic cytoplasm were seen in small numbers in control and dosed groups. Adrenal Gland: The incidences of medullary hyperplasia of the adrenal gland were not increased in dosed male or female rats (Table 7). The incidences of pheochromocytomas or malignant pheochromocytomas (combined) occurred with positive trends in male rats, and the incidences in both the 25- and 50-ppm groups of male rats were significantly increased compared with that in controls. The incidence in the 50ppm group of female rats (first study) was of borderline significance compared with that in controls; this was not observed in the second study. and combining the two studies for statistical analyses showed no differences among groups. Most neoplasms were benign pheochromocytomas; malignant pheochromocytomas were diagnosed in two control and one 10- and one 50-ppm males and in one 50-ppm (first study) and one 100-ppm female. For this lesion, the most appropriate analyses are for the combination of benign and malignant pheochromocytomas (McConnell et al., 1986).

Medullary Hyperplasia			our bhi		ւ հհա	to bbm	zo hhm	ov ppm
Overall Rates	8/51 (	(16%)	4/52 (89	/52 (8%) 2/52 (4		10/52 (19%)	6/51 (12%)	9/51 (18%)
Pheochromocytoma or Malign	ant Pheoc	hromoc	ytoma (	a)				
Overall Rates	10/51	10/51 (20%)		3%)	13/52 (25%)	12/52 (23%)	18/51 (35%)	20/51 (39%)
Adjusted Rates	22.7%	6	16.4%	:	32.0%	29.2%	61.5%	66.4%
Terminal Rates	10/44	(23%)	4/37 (1)	1%)	9/36 (25%)	9/37 (24%)	9/19 (47%)	7/15 (47%)
Week of First Observation	105		86	1	86	79	86	80
Life Table Tests	P<0.	.001	P = 0.42	23N	P = 0.164	P = 0.258	P<0.001	P<0.001
Incidental Tumor Tests	P<0	001	P = 0.33	34N	P = 0.236	P = 0.336	P = 0.008	P = 0.009
FEMALE (FIRST STUDY)								
Medullary Hyperplasia								
Overall Rates	1/51 (	2%)	1/52 (29	%)	2/52 (4%)	5/51 (10%)	0/51 (0%)	2/52 (4%)
Pheochromocytoma or Malign	ant Pheoc	hromoc	ytoma (	b)				
Overall Rates	1/51 (	2%)	3/52 (69	%)	5/52 (10%)	1/51 (2%)	2/51 (4%)	6/52 (12%)
Adjusted Rates	2.6%		7.2%		13.7%	2.9%	5.0%	16.6%
Terminal Rates	1/38 (	3%)	2/38 (59	%) 4	4/35 (11%)	1/35 (3%)	2/40 (5%)	5/35 (14%)
Week of First Observation	107		87		102	107	107	104
Life Table Tests	P=0.	096	P = 0.30	)7	P = 0.089	P = 0.743	P = 0.518	P≈0.048
Incidental Tumor Tests	P = 0	096	P = 0.29	91 :	P=0.094	P = 0.743	P = 0.518	P = 0.056
FEMALE (SECOND STUDY)		C	ontrol		50 pp	m	100 ppm	
Medullary Hyperplasia								
Overall Rates		1/	(52 (2%)		0/52 (0	1%)	0/52 (0%)	
Pheochromocytoma or Malign	ant Pheocl	hromoc	vtoma (	b)				
Overall Rates		3/	52 (6%)	-,	2/52 (4	(%)	2/52 (4%)	
Adjusted Rates		6.	8%		4.0%		5.1%	
Terminal Rates		3/	44 (7%)		0/44 (0	)%)	2/39(5%)	
Week of First Observation		1(	05		99		105	
Life Table Tests		Р	=0.455N	I	P = 0.4	83N	P = 0.555N	
Incidental Tumor Tests		Р	=0.363N	1	P=04	00N	P = 0.555N	
COMBINED ANALYSIS (c)	Control	0.1 pp	om 1	ppm	10 ppm	25 ppm	50 ppm	100 ppm
Pheochromocytoma or Malign	ant Pheoc	hromoc	ytoma					
Overall Rates	4/103 (4%)	3/52 (6	%) 5/5	52 (10%	) 1/51 (2%)	2/51 (4%)	8/104 (8%)	2/52(4%)
Adjusted Rates	4.9%	7.1%	13	.4%	25%	4.7%	9.5%	5.1%
Terminal Rates	4/82 (5%)	2/39 (5	%) 4/3	36(11%	) 1/40 (3%)	2/43(5%)	5/80 (6%)	2/39(5%)
Week of First Observation	105	87	10	2	108	107	99	105
Life Table Tests	P = 0.539	$P \approx 0.4$	23 P=	=0 098	P = 0.4462	N P = 0.649 N	P = 0.182	P = 0.651
Incidental Tumor Tests	P = 0.561 N	$\mathbf{P}=0\;4$	41 P=	=0 109	P = 0.446	N $P = 0.649N$	P = 0.223	P = 0.651

TABLE 7. ADRENAL GLAND LESIONS IN RATS IN THE TWO-YEAR FEED STUDIES OF MIREX

(a) No 2-year studies by this laboratory are included in the historical data base; historical incidence in NTP studies (mean  $\pm$  SD): 452/1,950 (23%  $\pm$  12%) (b) No 2-year studies by this laboratory are included in the historical data base; historical incidence in NTP studies

(mean  $\pm$  SD): 94/2,001 (5%  $\pm$  4%)

(c) Results of comparison of the 0.1-, 1-, 10-, 25-, 50- (combined incidence from first and second studies), and 100-ppm groups with controls (combined incidence from first and second studies)

Kidney: Nephropathy occurred at similar incidences in control and dosed groups of male and female rats. However, the severity was judged to be dose related and greater in groups of male and female rats receiving 25 ppm or more mirex (Table 8). Parathyroid hyperplasia is likely a secondary physiologic response to the nephropathy, and male rats showed dose-related incidences of this lesion (6/32; 12/39; 13/39; 18/40; 22/50; 24/45). Hyperplasia of the transitional epithelium overlying the renal pelvis was observed at increased incidences in dosed male rats (Table 9). This lesion has also been shown to accompany severe nephropathy.

TABLE 8.	INCIDENCES	AND	SEVERITY	OF	NEPHROP.	ATHY	IN	RATS	IN	THE	TWO-YE	AR	FEED
STUDIES OF MIREX													

	Control	0.1 ppm	1 ppm	10 ppm	25 ppm	50 ppm	100 ppm
MALE						······	
Incidence of nephropathy	50/51	50/51	45/52	49/52	51/51	52/52	
Severity (a)							
No grade (autolysis)	2	2	1	2	11	6	
Mild	7	4	5	1	5	1	
Moderate	31	39	32	14	10	3	
Marked	10	5	7	32	25	42	
Mean severity (b)	3.1	3.0	3.0	3.7	3.5	3.9	
FEMALE (FIRST STUDY)							
Incidence of nephropathy	34/51	35/52	44/52	47/51	46/50	42/52	
Severity (a)							
No grade (autolysis)				3	1	1	
Mild	17	17	15	22	9	8	
Moderate	16	17	24	16	29	28	
Marked	1	1	5	6	7	5	
Mean severity (b)	2.5	2.5	2.8	2.6	3.0	2.9	
FEMALE (SECOND STUDY)	)						
Incidence of nephropathy	45/51					51/52	52/52
Severity (a)							
Mild	15					7	7
Moderate	27					35	28
Marked	3					9	17
Mean severity (b)	2.7					3.0	3.2

(a) Number of animals with indicate severity

(b) Mean severity of animals with lesion of diagnosed severity; 2 = mild; 3 = moderate; 4 = marked.

		Concentration (ppm)								
	Control	0.1	1	10	25	50				
Epithelial Hyperplasia of the	Renal Pelvis									
Overall Rates	0/51 (0%)	2/51 (4%)	2/52 (4%)	5/52 (10%)	14/51 (27%)	9/52 (17%)				
Transitional Cell Papilloma (a	1)									
Overall Rates	0/51 (0%)	0/51 (0%)	0/52 (0%)	0/52 (0%)	1/51 (2%)	3/52 (6%)				
Adjusted Rates	0.0%	0.0%	0.0%	0.0%	3.0%	15.7%				
Terminal Rates	0/44 (0%)	0/37 (0%)	0/36(0%)	0/37 (0%)	0/19(0%)	1/15(7%)				
Week of First Observation					98	101				
Life Table Tests	P<0.001	(b)	(b)	(b)	P = 0.425	P = 0.018				
Incidental Tumor Tests	P = 0.018	(b)	(b)	(b)	P = 0.742	P = 0.193				

#### TABLE 9. KIDNEY LESIONS IN MALE RATS IN THE TWO-YEAR FEED STUDY OF MIREX

(a) No 2-year studies by this laboratory are included in the historical data base; historical incidence of transitional cell neoplasms in NTP studies (mean  $\pm$  SD): 5/1,968 (0.3%  $\pm$  0.7%)

(b) No P value is reported because no tumors were observed in the dosed and control groups.

Transitional cell papillomas in male rats occurred with a positive trend (Table 9). The incidence in the 50-ppm group was significantly greater than that in controls by the life table test but not by the incidental tumor test, which is the more appropriate analysis. These papillomas are uncommon in untreated male F344/N rats (historical incidence, 0.3%). The transitional cell papillomas differed from hyperplasia primarily by their complexity of structure. The transitional cell papillomas consisted of a single or stratified epithelium arranged in branching, papillary formations.

Hematopoietic System: Mononuclear cell leukemia in male and female rats occurred with positive trends in both studies (Table 10). The incidences of mononuclear cell leukemia in the 25-ppm group of males and in the 25- and 50 ppm groups of females in the first study and in

the 100-ppm group of females in the second study were greater (P < 0.05) than those in controls. Because this is most often a life-threatening or lethal lesion, the life table analysis is given preference; in the first study in female rats, most leukemia (except in the 25-ppm group) occurred before the end of the study (40/77, 52%). In the second study in females, most of these lesions were observed incidentally at the end of the study (23/29, 79%); yet in each study, both types of analyses showed positive trends and marginal increases in the 25- and 50ppm (first study) and in the 100-ppm (second study) groups. Since the incidences in female control groups in both studies were similar, combined statistical analyses were done; the marginal positive trends remained, and the 10-, 25-, 50-, and 100-ppm groups showed increased incidences compared with controls.

### TABLE 10. HEMATOPOIETIC SYSTEM TUMORS IN RATS IN THE TWO-YEAR FEED STUDIES OF MIREX

MALE	Contro	ol 0.1	ppm	1 ppr	n	10 ppm	25 ppm	50 ppm
Mononuclear Cell Leukemia Overall Rates Adjusted Rates Terminal Rates Week of First Observation Life Table Tests Incidental Tumor Tests	(a) 16/52 (3 35.4% 15/44 (3 85 P=0.04 P=0.10	16/52 (31%) 17/ 35.4% 38/ 15/44 (34%) 11/ 85 85 P=0.046 P= P=0.101N P=		%) 15/52 (29%) 36.9% %) 11/36 (31%) 84 P=0.420 P=0.573		22/52 (42%) 48.6% 14/37 (38%) 91 P=0.066 P=0.160	21/52 (40%)60.7%8/19 (42%)58P=0.001P=0.152	10/52 (19%) 31.1% 1/15 (7%) 66 P=0.264 P=0.195N
FEMALE (FIRST STUDY)								
Mononuclear Cell Leukemia Overall Rates Adjusted Rates Terminal Rates Week of First Observation Life Table Tests Incidental Tumor Tests	(b) 8/52 (11) 18.3% 4/38 (11) 91 P = 0.00 P = 0.00	5%) 8/5 18, 1%) 3/3 79 05 P= 03 P=	2 (15%) 0% 8 (8%) 0.586N 0.581N	11/52 23.4% 1/35 (3) 82 P = 0.3 P = 0	(21%) , 3%) 296 398	14/52 (27%) 30.4% 5/35 (14%) 77 P=0.132 P=0.183	18/52 (35%) 39.3% 14/41 (34%) 49 P=0.044 P=0.039	18/52 (35%) 40.6% 10/35 (29%) 69 P = 0.023 P = 0.027
FEMALE (SECOND STUDY)		Contr	ol		50 ppn	n	100 ppm	
Mononuclear Cell Leukemia Overall Rates Adjusted Rates Terminal Rates Week of First Observation Life Table Tests Incidental Tumor Tests	(b)	6/52 (1 12.8% 4/44 (9 80 P=0.0 P=0.0	2%) %) 18 39		9/52 (17) 18.8% 6/44 (14) 95 P=0.31 P=0.28	7%) 1%) 4 77	14/52 (27%)34.9%13/39 (33%)98P=0.024P=0.042	
COMBINED ANALYSIS (c)	Control	0.1 ppm	1 ppm	10	ppm	25 ppm	50 ppm	100 ppm
Mononuclear Cell Leukemia Overall Rates Adjusted Rates Terminal Rates Week of First Observation Life Table Tests Incidental Tumor Tests	14/104 (13%) 15.4% 8/82 (10%) 80 P = 0.044 P = 0.035	8/52 (15% 18.0% 4/39 (10% 79 P=0.445 P=0.548	) 11/52 (21 23.3% ) 1/36 (3% 82 P=0.130 P=0.331	l%) 14. 29 ) 8/4 77 ) P= l P=	/52 (27% .5% 40 (20%) = 0.041 = 0.042	$\begin{array}{l} 18/52 \ (35\%) \\ 37.2\% \\ 14/44 \ (32\%) \\ 49 \\ P = 0.006 \\ P = 0.002 \end{array}$	27/104 (26%) 29.0% 16/80 (20%) 69 P=0.025 P=0.024	14/52 (27%) 34.9% 13/39 (33%) 98 P = 0.030 P = 0.045

(a) No 2-year studies by this laboratory are included in the historical data base; historical incidence in NTP studies (mean  $\pm$  SD): 583/1,977 (29%  $\pm$  12%)

(b) No 2-year studies by this laboratory are included in the historical data base; historical incidence in NTP studies

(mean ± SD): 375/2,021 (19% ± 7%) (c) Results of comparison of the 0.1-, 1-, 10-, 25-, 50- (combined incidence from first and second studies), and 100-ppm groups with controls (combined incidence from first and second studies)

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Pituitary Gland: The incidences of adenomas (20/52; 24/51; 31/50; 24/51; 30/52; 22/50) and adenomas or carcinomas (combined) in the 1and 25-ppm groups of females were greater (P < 0.05) than those in controls in the first study; however, there was no dose response effect (Tables B5 and B6). The incidences in male rats and in females in the second study indicated negative (P < 0.05) trends (adenomas or carcinomas, combined-male: 12/52; 11/52; 13/51; 10/50; 9/52; 3/47; female: 32/52; 26/52; 22/52). Almost all lesions were adenomas.

*Thyroid Gland*: The incidences of follicular cell adenomas and follicular cell adenomas or carcinomas (combined) occurred with a positive trend in dosed male rats, and the incidence of adenomas

or carcinomas (combined) in the 50-ppm group of male rats was marginally (P=0.048) greater than that in controls (Table 11).

The incidences of C-cell adenomas and C-cell adenomas or carcinomas (combined) occurred with negative trends in male (P=0.043) and female (P=0.003) rats (in the first study but not in the second study) (Table 11). The incidence of Ccell adenomas or carcinomas (combined) in the 50-ppm group of females was lower (P=0.009) than that in controls in the first study but not in the second study. Statistical analyses of the two female rat studies combined showed a negative trend (P=0.009), and the 50-ppm groups were marginally decreased (P=0.026) but not the 100-ppm group.

	Control	0.1 ppm	1 ppm	10 ppm	25 ppm	50 ppm
MALE	- <u></u>	<u> </u>		<u> </u>		
Follicular Cell Hyperplasia						
Overail Rates	0/51 (0%)	0/50 (0%)	0/47 (0%)	0/47 (0%)	0/35 (0%)	1/49 (2%)
Follicular Cell Adenoma						
Overall Rates	0/51 (0%)	0/50 (0%)	0/47 (0%)	1/47 (2%)	0/35 (0%)	3/49 (6%)
Adjusted Rates	0.0%	0.0%	0.0%	2.7%	0.0%	14.4%
Terminal Rates	0/44 (0%)	0/37 (0%)	0/36 (0%)	1/37 (3%)	0/18 (0%)	1/15 (7%)
Week of First Observation				105		99
Life Table Tests	P<0.001	(a)	(a)	P = 0.465	(a)	P = 0.024
Incidental Tumor Tests	P = 0.017	(a)	(a)	P = 0.465	(a)	P = 0.193
Follicular Cell Carcinoma						
Overall Rates	0/51 (0%)	1/50 (2%)	0/47 (0%)	0/47 (0%)	0/35 (0%)	1/49 (2%)
Follicular Cell Adenoma or Carcinoma (b)						
Overail Rates	0/51 (0%)	1/50 (2%)	0/47 (0%)	1/47 (2%)	0/35 (0%)	4/49 (8%)
Adjusted Rates	0.0%	2.7%	0.0%	2.7%	0.0%	20.5%
Terminal Rates	0/44 (0%)	1/37 (3%)	0/36 (0%)	1/37 (3%)	0/18 (0%)	2/15 (13%)
Week of First Observation		105		105		99
Life Table Tests	P<0.001	P=0.465	(a)	P = 0.465	(a)	P = 0.005
Incidental Tumor Tests	P=0.004	P=0.465	(a)	P = 0.465	( <b>a</b> )	P=0.048
C-Cell Hyperplasia						
Overall Rates	9/51 (18%)	3/50 (6%)	1/47 (2%)	1/47 (2%)	1/35 (3%)	2/49 (4%)
C-Cell Adenoma or Carcinoma						
Overall Rates	8/51 (16%)	6/50 (12%)	4/47 (9%)	7/47 (15%)	3/35 (9%)	0/49 (0%)
Adjusted Rates	18.2%	15.6%	11 1%	17.7%	16.7%	0.0%
Terminal Rates	8/44 (18%)	5/37 (14%)	4/36 (11%)	5/37 (14%)	3/18 (17%)	0/15 (0%)
Week of First Observation	105	103	105	100	105	
Life Table Tests	P = 0.126N	P = 0.521N	P = 0.287N	P = 0.580	P = 0.588N	P = 0.092N
Incidental Tumor Tests	P = 0.043N	P = 0.476N	P = 0.287N	P = 0.604N	P = 0.588N	P = 0.092N
FEMALE (FIRST STUDY)						
Follicular Cell Adenoma or Carcinoma						
Overall Rates	1/50 (2%)	2/50 (4%)	0/48 (0%)	2/47 (4%)	0/48 (0%)	1/46 (2%)
C-Cell Hyperplasia						
Overall Rates	4/50 (8%)	2/50 (4%)	3/48 (6%)	1/47 (2%)	4/48 (8%)	5/46 (11%)
C-Cell Adenoma						
Overall Rates	10/50 (20%)	9/50 (18%)	6/48 (13%)	5/47 (11%)	6/48 (13%)	2/46 (4%)
Adjusted Rates	25.3%	22.7%	17.0%	14.3%	14.1%	5.9%
Terminal Rates	9/38 (24%)	8/38 (21%)	5/34 (15%)	5/35 (14%)	4/39 (10%)	2/34 (6%)
Week of First Observation	91	91	104	107	96	107
Life Table Tests	P = 0.018N	P = 0.500N	P = 0.276N	P = 0.165N	P = 0.185N	P = 0.024N
Incidental Tumor Tests	P = 0.022N	P = 0.541N	P = 0.259N	P = 0.189N	P = 0.237N	P = 0.027N
C-Cell Carcinoma						
Overall Rates	3/50 (6%)	4/50 (8%)	1/48 (2%)	4/47 (9%)	0/48 (0%)	0/46 (0%)
Adjusted Rates	7.9%	9.9%	2.9%	10.5%	0.0%	0.0%
Terminal Rates	3/38 (8%)	3/38 (8%)	1/34 (3%)	3/35 (9%)	0/39 (0%)	0/34 (0%)
Week of First Observation	107	94	107	92		
Life Table Tests Incidental Tumor Tests	P = 0.029N P = 0.034N	P = 0.505 P = 0.512	P = 0.345N P = 0.345N	P = 0.467 P = 0.410	P = 0.116N P = 0.116N	P = 0.141N P = 0.141N
C-Cell Adenoma or Carcinoma (c)	10/50 -010-	10/00/00/00	7140 (1 84)	0/47 (10/2)	0140 /1 000	DIAG (AM)
Overall Rates	12/50(24%)	13/90 (26%)	1/40(10%)	9/4-((19%)) 9/ 50/	0/4×0 (13%0) 14 10/	2/40 (41%) 5 0.02
Adjusted Rates	30.3%	32.0%	19.9% 8/91/1905)	24.0% 8/95 /990L	141.170 1/30 / 1/10/	0.00 9/34 (BOL)
Week of First Observation	11/38 (29%) 91	11/30 (29%) 91	104	92	96	107
Life Table Tests	P = 0.002N	P = 0.503	P = 0.220N	P = 0.377N	P = 0.084N	P = 0.008N
Incidental Tumor Tests	P = 0.003N	P = 0.470	P = 0.205N	P=0.445N	P = 0.112N	P = 0.009N

#### TABLE 11. THYROID GLAND LESIONS IN RATS IN THE TWO-YEAR FEED STUDIES OF MIREX

#### TABLE 11. THYROID GLAND LESIONS IN RATS IN THE TWO-YEAR FEED STUDIES OF MIREX (Continued)

	Control	50 ppm	100 ppm
FEMALE (SECOND STUDY)		·	an an Alain
Follicular Cell Adenoma Overall Rates	1/49 (2%)	1/49 (2%)	1/49 (2%)
C-Cell Hyperplasia Overall Rates	5/49 (10%)	3/49 (6%)	3/49 (6%)
C-Cell Adenoma Overali Rates	5/49 (10%)	3/49 (6%)	5/49 (10%)
C-Cell Carcinoma Overall Rates	2/49 (4%)	3/49 (6%)	0/49 (0%)
C-Cell Adenoma or Carcinoma Overall Rates	7/49 (14%)	6/49 (12%)	5/49 (10%)

(a) No P value is presented because no tumors were observed in the control and the indicated dose groups.
(b) No 2-year studies by this laboratory are included in the historical data base; historical incidence in NTP studies (mean ± SD): 27/1,928 (1% ± 2%)
(c) No 2-year studies by this laboratory are included in the historical data base; historical incidence in NTP studies (mean ± SD): 182/1,952 (9% ± 5%)

#### **IV. DISCUSSION AND CONCLUSIONS**

Mirex, NTP TR 313

Long-term toxicology and carcinogenesis studies were initiated by administering diets containing 0, 0.1, 1, 10, 25, or 50 ppm mirex to groups of 52 male and 52 female F344/N rats. During the first few months of the studies, there was concern that the doses selected for the female rats could perhaps have been higher. At that time, no chemical-related clinical signs were observed and no effects on body weight gain or survival were present. Thus, a second study was begun approximately 6 months after the first study was initiated. The second study was designed with two dose groups (50 and 100 ppm) and a control group, providing a top dose twice that used in the first study, a low dose that duplicated the top dose of the first study, and a second concurrent control group.

No studies were done in mice because at the time these studies were begun in F344/N rats, sufficient evidence was available that mirex was carcinogenic for the liver in mice (Innes et al., 1969; IARC, 1979); during the early phases of the rat studies, Ulland et al. (1977) reported that mirex caused liver neoplasms in CD rats (IARC, 1979). Because relatively small numbers of animals were used (26 per group), because dietary exposure lasted just 18 months, followed by a 6month observation period with no exposure (likely due to reduced survival), and because few neoplasms were observed, the studies in F344/N rats were continued to better define the effects overall, especially at lower exposures (Ulland et al. used dietary concentrations of 50 and 100 ppm mirex).

Mean body weights of male rats that received 25 or 50 ppm were lower than those of controls throughout much of the study, whereas body weights of dosed female rats were similar to those of controls until about week 68 of the first study, after which the 50-ppm group had body weights of 82%-90% those of controls. In the second study, weight gains of the 50-ppm group were affected less than in the first study, and the 100-ppm group had mean body weights 82%-90% those of controls after about week 56. Survival of male rats that received 25 or 50 ppm mirex was lower than that of controls only after weeks 86-87 of the study. Many of these male rats dying of "natural causes" had neoplasms of the liver and/or adrenal gland as well as severe nephropathy. Survival of dosed females was similar to that of controls in both studies.

The most notable compound-related effects were observed in the liver of male and female rats. Fatty metamorphosis, cytomegaly, angiectasis (males only), and necrosis were dose related. No significant differences in incidences of hepatocellular carcinomas were observed, but the incidences of neoplastic nodules of the liver were markedly increased in both dosed male and female rats. Particularly strong dose-response relationships were evident in neoplastic nodules in male rats and in female rats in the second study (see Table 6). The incidence of neoplastic nodules was unusually high in the first study control group (19%), approximately sevenfold greater than the mean historical incidence (2.9%) and twice the highest incidence observed in any previous untreated control group (Table B7a). Comparison of both concurrent female control groups shows clearly that they are statistically different with respect to the number of animals with liver neoplasms. The rats were obtained from different sources for the first and second studies, but uniformly high incidences were not observed across the dose groups in the first study, suggesting that the control incidence represented either a chance clustering of naturally occurring neoplastic nodules (so-called "spontaneous" or background neoplasms of unknown etiology) or the incidence could have been influenced by the additional sections taken from the controls to avoid sample bias, since the higher exposed groups had more sections.

In another study of mirex, in male and female CD rats, similar patterns of increased incidences with dose were reported for both nonneoplastic and neoplastic liver effects at comparable exposure levels (Ulland et al., 1977). In mice, the liver was also shown to be the target organ for toxic effects of mirex (Innes et al., 1968; IARC, 1979). For the related chemical chlordecone, 2-year dietary studies in Osborne-Mendel and B6C3F<sub>1</sub> mice at lower doses showed increased incidences in carcinomas of the liver in both sexes of both species, particularly in mice (NCI, 1976).

The incidences of pheochromocytomas or malignant pheochromocytomas (combined) of the adrenal gland increased with a dose-related trend in male rats, and the incidences in the 25and 50-ppm groups were greater than those in controls. The magnitude and dose response of the lesions in males were considered sufficient to make an association with mirex administration. The control incidence agreed well with the mean historical incidence for untreated control male rats (Table A4e), and the increases at the two top doses occurred despite lessened survival. In females, however, the incidence of pheochromocytomas in the 50-ppm group was marginally increased in the first study and not observed in the second study, suggesting that the neoplasms in females were unrelated to mirex administration.

Transitional cell papillomas of the kidney occurred with a positive trend in male rats (see Table 9). These lesions were observed in the two top dose groups (25 ppm, 1/51, and 50 ppm, 3/52). Transitional cell papillomas and carcinomas are uncommon in historical controls (0.3%; Table A4c). Transitional cell hyperplasia was also increased in dosed male rats. Although this finding strengthens the association of mirex administration with proliferative lesions of the transitional epithelium in the kidney, the biologic importance of these lesions is somewhat uncertain because the rarity of neoplasia has made it difficult to fully assess the potential for progression from hyperplasia to papilloma and from papilloma to carcinoma. In addition, the occurrence of transitional cell hyperplasia may also be associated with the increased severity of nephropathy observed in dosed rats in the current studies. Nonetheless, these hyperplastic and neoplastic lesions are considered to be related to the dietary administration of mirex.

Mononuclear cell leukemia in female rats showed positive dose-related trends in both studies. Increased incidences were observed in the 25- and 50-ppm groups in the first study, and the incidence in the 100-ppm group was increased in the second study (see Table 10). An association of mononuclear cell leukemia with mirex administration is indicated primarily because the rather marginal increases occurred in both studies. If one combines the two studies, since the incidences of leukemia did not differ statistically between the two control groups (13% and 15%), the incidences in the 10-, 25-, 50-, and 100-ppm groups were greater than the combined control incidence, lending further support to the association of mononuclear cell leukemia with mirex administration. In male rats, the increase observed in the 25-ppm group and the slight increase in the 10-ppm group were not supported by the incidence in the 50-ppm animals (see Table 10). Poor survival in the 25- and 50-ppm groups may have limited the expression of mononuclear cell leukemia in these groups, but the present evidence was considered to be insufficient to relate the incidences of mononuclear cell leukemia in male rats with mirex administration.

The incidence of follicular cell neoplasms in the thyroid gland was marginally increased in the top dose group of male rats (see Table 11). Even though the historical control incidence of these neoplasms is low (1.4%; Table A4d), the absence of an effect in the next lower dose group of males and the lack of an increase in either study in female rats make an association between follicular cell tumors and exposure to mirex unlikely. Conversely, negative trends (i.e., decreases in neoplasms in the exposed groups compared with controls) were observed for C-cell neoplasia in male rats and in female rats (first study). These decreases could be related to mirex administration; yet the biologic reasoning for this is unclear. In addition, the decrease in males was very marginal, and the decrease in females was due largely to the relatively low incidence in the top dose group compared with the higher than average control incidence; and neither the 50nor the 100-ppm female group in the second study exhibited a decreased incidence.

Neither mirex nor the structural analog chlordecone has been shown to induce any consistent effects in genetic toxicity assays in the presence or absence of exogenous metabolic activation, with the exception of one study in which an increase in the rates of sister chromatid exchanges was observed after exposure of CHO cells to chlordecone (Galloway et al., 1987). Mirex has generally been classified as metabolically inert (Waters and Black, 1976), but reductive dechlorination has been predicted as a pathway of degradation in vivo (Rinkus and Legator, 1980). McCann and Ames (1976) have suggested that microsomal enzymes in S9 fractions may be unable to dechlorinate pesticides such as mirex, chlordecone, and dieldrin, which are carcinogenic and yet lack activity in the Ames assay (Schoeny et al., 1979).

Under the conditions of these 2-year feed studies of mirex, there is *clear evidence of carcinogenic activity*\* for male and female F344/N rats, as primarily indicated by marked increased incidences of benign neoplastic nodules of the liver, as well as by increased incidences of pheochromocytomas of the adrenal gland and transitional cell papillomas of the kidney in males and by increased incidences of mononuclear cell leukemia in females.

Nonneoplastic effects induced by mirex administration include cytomegaly, fatty metamorphosis, angiectasis (males only), and cellular necrosis in the liver.

<sup>\*</sup>Explanation of Levels of Evidence of Carcinogenic Activity is on page 6.

A summary of the Peer Review comments and the public discussion on this Technical Report appears on pages 9-10.

#### **V. REFERENCES**

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#### APPENDIX A

# SUMMARY OF LESIONS IN MALE RATS IN THE TWO-YEAR FEED STUDY OF MIREX

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## TABLE A1. SUMMARY OF THE INCIDENCE OF NEOPLASMS IN MALE RATS IN THE TWO-YEAR FEEDSTUDY OF MIREX

	Untrea Contro	ted ol	0.1 pp	m	1 ppr	n	10 pp	m	25 pp	m	50 pp	m
ANIMALS INITIALLY IN STUDY ANIMALS NECROPSIED ANIMALS EXAMINED HISTOPATH	52 52 52		52 52 52		52 52 52		52 52 52		52 52 52		52 52 52	
INTEGUMENTARY SYSTEM *Skin Papilloma, NOS Squamous cell papilloma Squamous cell carcinoma Basal cell carcinoma Trichoepithelioma Sebaceous adenocarcinoma Sebaceous adenocarcinoma Keratoacanthoma Fibrosarcoma *Subcutaneous tissue Sarcoma, NOS Fibroma Fibrosarcoma	(52) 1 2 1 1 2 (52) 4	(2%) (4%) (2%) (4%) (4%)	(52) 1 (52) 4	(2%)	(52) 1 (52) 3	( <b>2%</b> ) (2%) (6%)	(52) 1 1 1 (52) 1 7	(2%) (2%) (2%) (13%)	(52) 1 (52) 3 1	(2%) (6%) (2%)	( <b>52)</b> 1 (52) 1	(2%) (2%)
RESPIRATORY SYSTEM #Lung Carcinoma, NOS, metastatic Squamous cell carcinoma, meta: Alveolar/bronchiolar adenoma Alveolar/bronchiolar carcinoma Sebaceous adenocarcinoma, met Pheochromocytoma, metastatic	(52) Ita ast 1	( <b>4%</b> ) (2%)	(52)		(52)	(2%)	(52) 2 1	( <b>4%</b> ) (2%)	(52) 1 1	(2%) (2%)	(51) 1 1	(2%) (2%)
HEMATOPOIETIC SYSTEM *Multiple organs Malgnant lymphoma, NOS Malig lymphoma, histiocytic ty Leukemia, mononuclear cell #Spleen Fibrosarcoma Malignant lymphoma, NOS Leukemia, mononuclear cell #Mediastinal lymph node Alveolar/bronchiolar carcinoma #Thymus Papillary carcinoma	(52) 1 (52) 15 (52) (51) (51) meta (47)	(2%) (29%) (2%)	(52) 1 1 17 (51) (52) (47)	(2%) (2%) (33%)	(52) 1 15 (50) (52) (42)	(2%) (29%)	(52) 1 20 (51) 2 (52) 1 (40) 1	(2%) (38%) (4%) (4%) (2%) (3%)	(52) 1 19 (48) 2 (48) (42)	(2%) (37%) (4%)	(52) 9 (52) 1 (48) (41) 1	(17%) (2%) (2%) (2%)
CIRCULATORY SYSTEM *Eye/lacrimal gland Hemangioma #Spleen Hemangiosarcoma *Mesenteric artery Hemangiosarcoma, invasive #Liver Hemangioma #Kidney Hemangiosarcoma	(52) 1 (52) (52) (52) (52) 1 (51)	(2%) (2%)	(52) (51) 1 (52) (52) (51) 1	(2%) (2%) (2%)	(52) (50) (52) (52) (52)		(52) (51) (52) (52) (52)		(52) (48) (52) (52) (51)		(52) (52) (52) (52) (52)	
DIGESTIVE SYSTEM #Liver Neoplastic nodule Hepatocellular carcinoma Pheochromocytoma, metastatic #Pancreas Acinar cell adenoma *Oropharynx Squamous cell carcinoma #Stomach Papillomatosis #Ileum Leiomyosarcoma	(52) 3 3 (51) 3 (52) (51) (51) (50)	(6%) (6%) (2%) (6%)	(52) 5 (50) (52) (51) (47) 1	(10%)	(52) 5 2 (51) (52) 1 (48) (47)	(10%) (4%) (2%)	(52) 14 2 (47) 1 (52) (51) (46)	(27%) (4%) (2%)	(52) 15 3 (48) 2 (52) (44) (38)	(29%) (6%) (4%)	(52) 26 4 (51) 1 (52) (44) 1 (35)	(50%) (8%) (2%) (2%)

	Untreated Control	0.1 pr	om	1 ppr	n	10 pp	m	25 pp	m	50 pp	m
URINARY SYSTEM	(61)	/=1\		(50)		(50)		(E1)		/ED)	
Tubular cell adenoma	1 (2%	(31) )		(32)		(52)		(31)		(32)	
Sarcoma, NOS	1 (2%	*)						1	(2%)		
Liposarcoma		1	(2%)					-			
#Kidney/pelvis Transitional cell papilloma	(51)	(51)		(52)		(52)		(51) 1	(2%)	(52) 3	(6%)
ENDOCRINE SYSTEM											
#Pituitary Carrinoma NOS	(52)	(52)		(51)	(90)	(50)		(52)		(47)	
Adenoma, NOS	12 (23)	<b>%</b> ) 11	(21%)	12	(2%) (24%)	10	(20%)	9	(17%)	3	(6%)
#Pituitary intermedia	(52)	(52)	(== (0)	(51)	(21:0)	(50)	(20.0)	(52)	(11.0)	(47)	(0.07
Adenoma, NOS										1	(2%)
#Adrenal	(51)	(52)		(52)	(	(52)		(51)		(51)	
Cortical adenoma		2	(4%)	$^{2}$	(4%)		(0//)			1	(2%)
Pheochromosutomo	0 (10)	aL) 7	(2%) (19 <i>0</i> )	10	1950	1,1	(2%)	10	19500	10	19701
Pheochromocytoma malignan	t 2. (4%)	70) ( b)	(10%)	13	(23%)	11	(21%)	18	(33%)	19	(3 (%) (2%)
Ganglioneuroma	- 2 (470	1	(2%)			1	(410)			1	( <b>4</b> 70)
#Adrenal/capsule	(51)	(52)		(52)		(52)		(51)		(51)	
Adenoma, NOS				1	(2%)			,			
#Thyroid	(51)	(50)		(47)		(47)		(35)		(49)	
Follicular cell adenoma						1	(2%)			3	(6%)
Follicular cell carcinoma		1	(2%)							1	(2%)
C-cell adenoma	5 (10)	<b>%</b> ) 4	(8%)	2	(4%)	5	(11%)	3	(9%)		
C-cell carcinoma	3 (6%	·) 2	(4%)	2	(4%)	2	(4%)	(50)		(45)	
Adapoma NOS	(32)	(39)	(996)	(39)		(40)		(50)	(10)	(40)	(904)
#Pancreatic islets	(51)	(50)	(0%)	(51)		(47)		(48)	(41-70)	(51)	(2%)
Islet cell adenoma	8 (16	%-) 3	(6%)	(01)	(14%)	4	(9%)	1	(2%)	5	(10%)
Islet cell carcinoma	6 (12)	%) 15	(30%)	4	(8%)	9	(19%)	5	(10%)	1	(2%)
REPRODUCTIVE SYSTEM											
*Mammary gland	(52)	(52)		(52)		(52)		(52)		(52)	
Fibroadenoma	1 (2%	) 1	(2%)	1	(2%)	5	(10%)	1	(2%)		
*Preputial gland	(52)	(52)		(52)		(52)		(52)		(52)	
Carcinoma, NOS				1	(2%)			1	(2%)		
Papillomatosis	1 (2%	)			(00)		(00)	0	(407)3		
#Prostate	(50)	(50)		(50)	(2%)	1 (59)	(2%)	159	(4%)2	(47)	
Carrinoma, NOS	(30)	(50)		(50)		(52)	12%)	(52)		\ <b>%</b> ()	
Adenoma, NOS	2 (4%	.) 6	(12%)	4	(8%)	2	(4%)			3	(6%)
#Testis	(52)	(52)		(51)	/	(52)	/	(52)		(51)	
Interstitial cell tumor	50 (96)	%) 51	(98%)	43	(84%)	48	(92%)	39	(75%)	42	(82%
*Epididymis Mesothelioma, NOS	(52)	(52) 1	(2%)	(52)		(52)		(52)		(52)	
VERVOUS SYSTEM											
#Brain	(52)	(52)		(52)		(51)		(52)		(50)	
Carcinoma, NOS, invasive				1	(2%)						
Glioma, NOS								2	(4%)		
Astrocytoma	1 (2%	)					(00)				
Ungodendroglioma		<u> </u>		<u>.</u>		1	(2%)				
SPECIAL SENSE ORGANS											
"Lye Thaifferentiated according	(52)	(52)		(52)	(041)	(52)		(52)		(52)	
Unginerentiated carcinoma *Harderian gland	(59)	(20)		(50)	(2%)	(59)		(E0)		(50)	
Carrinoma, NOS	(32)	(52)		(52)		(52)		(52)	(2%)	(52)	
	(52)	(52)		(52)		(52)		(52)	(2010)	(52)	
*Zymoal gland				1041		144		1000		(44)	
Zymbal gland Carcinoma, NOS	(01)	(0=)				1	(2%)	1	(2%)		
<sup>-</sup> Zymbal gland Carcinoma, NOS Squamous cell carcinoma	(02)	(0-)				1	(2%)	1	(2%) (2%)		

# TABLE A1. SUMMARY OF THE INCIDENCE OF NEOPLASMS IN MALE RATS IN THE TWO-YEAR FEED STUDY OF MIREX (Continued)

1	Untreated Control	0.1 ppm	1 ppm	10 ppm	25 ppm	50 ppm
MUSCULOSKELETAL SYSTEM *Vertebra Liposarcoma	(52)	(52)	(52)	(52)	(52)	(52) 1 (2%)
Osteosarcoma *Femur Fibrosarcoma	1 (2%) (52)	(52)	(52) 1 (2%)	(52)	(52)	(52)
BODY CAVITIES	(50)	(59)	(\$0)	(59)	(59)	(59)
Sarcoma, NOS	(32)	1 (2%)	(32)	(32)	(32)	(527
*Tunica vaginalis Mesothelioma, NOS	(52) 2 (4%)	(52) 1 (2%)	(52)	(52)	(52) 1 (2%)	(52)
ALL OTHER SYSTEMS *Multiple organs	(52)	(52)	(52)	(52)	(52)	(52)
Undiff. carcinoma, metastatic Mesothelioma, NOS			1 (2%)			1 (2%)
ANIMAL DISPOSITION SUMMARY	 ?					
Animals initially in study	52	52	52	52	52	52
Natural death	5	19	13	17	31	38
Moriound sacrifice	5 42	32	33	34	15	11
TUMOR SUMMARY				······		
Total animals with primary tumors*	* 52	51	49	51	51	48
Total primary tumors	147	143	127	160	137	135
Total benign tumors	52 105	51 09	48	90 99	44	40 87
Total animals with malignant tumor	rs 28	36	26	35	33	19
Total malignant tumors	37	44	31	47	39	21
Total animals with secondary tumor	s## 2	1	2	2	2	
Total secondary tumors Total animals with tumors uncertain	2 n	1	2	2	2	
benign or malignant	5	7	5	14	16	27
iotal uncertain tumors	5	7	Ð	14	10	41

## TABLE A1. SUMMARY OF THE INCIDENCE OF NEOPLASMS IN MALE RATS IN THE TWO-YEAR FEED STUDY OF MIREX (Continued)

\*Number of animals receiving complete necropsy examination; all gross lesions including masses examined microscopically. \*\*Primary tumors: all tumors except secondary tumors #Number of animals examined microscopically at this site ##Secondary tumors: metastatic tumors or tumors invasive into an adjacent organ

# TABLE A2. INDIVIDUAL ANIMAL TUMOR PATHOLOGY OF MALE RATS IN THE TWO-YEAR FEEDSTUDY OF MIREX: UNTREATED CONTROL

ANIMAL NUMBER	0 1 1	0 7 9	0 2 7	0 3 5	0 2 1	0 3 9	0 4 3	0 5 1	0 0 1	0 0 3	0 0 5	0 0 7	0 0 9	0 1 3	0 1 5	0 1 7	0 1 9	0 2 3	0 2 5	0 2 9	0 3 1	0 3 3	0 3 7	0 4 1	0 4 5	0 4 7
WEEKS ON STUDY	0 7 2	0 8 4	0 8 5	0 9 6	0 9 8	1 0 4	1 0 4	1 0 4	1 0 5	1 0 5	1 0 5	1 0 5	1 0 5	1 0 5	1 0 5	1 0 5	1 0 5	1 0 5	1 0 5	1 0 5	1 0 5	1 0 5	1 0 5	1 0 5	1 0 5	1 0 5
INTEGUMENTARY SYSTEM Skin Papilloma, NOS Squamous cell papilloma Trichoepithelioma Sebaceous adenocarcinoma Keratoacanthoma Subcutaneous tissue Fibroma	+	+ +	+	+ X +	N N	+ + x	+ + *	+	+ X +	+	+	N N	++	+ X +	+	++	++	N N	N N	++	++	+	+	+	+	++
RESPIRATORY SYSTEM Lungs and bronchi Alveolar/bronchiolar carcinoma Sebaceous adenocarcinoma, metastatic Trachea	+++	+	+	+	+	+	+	* *	+ X +	+	+	+	+	+	* x +	+	+	++	++	+	++	+	+	++	++	++
HEMATOPOIETIC SYSTEM Bone marrow Spleen Leukemia, mononuclear cell Lymph nodes Thymus	+++++++++++++++++++++++++++++++++++++++	+ + + +	++++++	+ + + +	+ + + + +	++++++	+ + + +	++++++	++++-	+ + + +	+ + + +	+ + + +	+ + + +	++ + +	+ + + +	+ + + +	+ + + +	+ + + +	+ + + +	+ + + +	+ + + +	+ + + -	+ + + +	+ + + +	+ + + +	+ + + +
CIRCULATORY SYSTEM Heart	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+
DIGESTIVE SYSTEM Salivary gland Liver Neoplastic nodule Hepatocellular carcinoma Pheochromocytoma, metastatic Hemangioma	++++	++++	+++	++++	++++	+++	+++	+++	+++	++++	+ +	+	+ +	+ +	+	+ +	+ + X	+ +	+ * X	++++	+ + X	+ + x	++	+ +	+ +	+++
Bile duct Pancreas Acinar cell adenoma Esophagus Stomach Small intestine Large intestine	+   ++	++ ++++	++  +++	++ ++++	++ ++++	++  +++	++ ++++	++x++	++++++	++++++	++ ++++	++ ++++	++ ++++	++++++	++ ++++	+ + + + + +	++++++	++++++	++++++	+ + X + + + +	++++++	++  +++	+ + + + + +	++ ++++	++ ++++	+ + + + + + + +
URINARY SYSTEM Kidney Tubular cell adenoma Tubular cell adenocarcinoma Urinary biadder	-	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	++
ENDOCRINE SYSTEM Pituitary Adenoma, NOS Adrenal Pheochromocytoma Pheochromocytoma, malignant Thyroid	+ - + +	+++++	+++	+ + +	* * +	+ + + +	+ + + +	+++++	+ + X +	+ x + x + x +	+ x + +	+ + +	+ + +	+ X + +	+ + +	+ + X +	+ + + +	+ + X +	++++++	++++++	+++++	+ + +	++++++	+ + +	+ X + X +	+ X + +
C-ceil adenoma C-ceil actrinoma Parathyroid Adenoma, NOS Pancreatic islets Islet cell adenoma	+	+ + X	- +	+ +	 +	- +	- + X	 +	+ +	+ +	+ +	+ + X	+ +	л + +	- +	- + X	+ + X	+ +	+ +	+ +	+ +	+ +	+ +	+ +	+ +	 +
Isiet celi carcinoma REPRODUCTIVE SYSTEM Mammary gland Fibroadenoma Testis Interstitial cell tumor Prostate Adenoma, NOS Preputial/citoral gland Papillomatosis Adenoma, NOS	+ + X N	N + X + N	+ + X + N	N + X + N	X N +X + N	N + X + N	+ + X + N	+ + X + N	+ + X + N	+ + X - N	N + X + NX	+ + X + N	x + + x + N x	N + X + N	N + X + N	N + X + N	+ + X + N	+ + + X + N	+ + X + N	+ + + X + N	N + X + N	N + X + N	x + + x + N	+ + + X + N	+ + + + N	N + X + X N
NERVOUS SYSTEM Brain Astrocytoma	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+
SPECIAL SENSE ORGANS Lacrimal gland Hemangioma	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	N
MUSCULOSKELETAL SYSTEM Bone 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	N
BODY CAVITIES Tunica vaginalis Mesothelioma, NOS	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	* x	+	+	+	+	+	+	+	+	+
ALL OTHER SYSTEMS Multiple organs, NOS Malignant lymphoma, NOS Leukemia, mononuclear ceil	N	N	N X	N X	N	N	N	N	N	N X	N	N	N X	N X	N	N	N X	N	N	N	N X	N	N	N	N	N X

## TABLE A2. INDIVIDUAL ANIMAL TUMOR PATHOLOGY OF MALE RATS: UNTREATED CONTROL (Continued)

ANIMAL NUMBER	0 4 9	0 5 3	0 5 5	0 5 7	0 5 9	0 6 1	0 6 3	0 6 5	0 6 7	0 6 9	0 7 1	0 7 3	0 7 5	0 7 7	0 8 1	0 8 3	0 8 5	0 8 7	0 8 9	0 9 1	0 9 3	0 9 5	0 9 7	0 9 9	1 0 1	1 0 3	TOTAL
WEEKS ON STUDY	1 0 5	1 0 5	1 0 5	1 0 5	1 0 5	1 0 5	1 0 5	1 0 5	1 0 5	1 0 5	1 0 5	1 0 5	1 0 5	1 0 5	1 0 6	1 0 6	1 0 6	1 0 6	1 0 6	1 0 6	1 0 6	1 0 6	1 0 6	1 0 6	1 0 6	1 0 6	TISSUES TUMORS
INTEGUMENTARY SYSTEM Skin Papilloma, NOS Squamous cell papilloma Trichoepitheiloma Sebaceous adenocarcinoma Keratoacanthoma	+	* X	N	+	+	+ X	+ X	+	+	+ x	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	*52 1 2 1 1 1 2
Subcutaneous tissue Fibroma	+	+	N	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	x x	+	+	+	+	+	+	+	*52 4
RESPIRATORY SYSTEM Lungs and bronchi Alveolar/bronchiolar carcinoma Sebaceous adenocarcinoma, metas Trachea	+	+ +	+ +	+	+ +	+	+	+ +	+ +	+ +	+ +	+	+	+	+ +	+ +	+ +	+	+	+	+	+ +	+	+	+	+ +	52 2 1 52
HEMATOPOIETIC SYSTEM Bone marrow Spleen Leukemia, mononuclear cell	+++++	+ +	+ +	+ +	+ +	+ +	+ +	+ +	+ +	+ +	+ +	+ +	+ +	+ +	+ +	+ +	+++	+ +	+++	+++	+ +	+ +	+ + X	+ +	+ +	 + +	52 52 1
Lymph nodes Thymus	++	++	++	+	++	++	++	++	++	++	+ +	++	++	++	++	++	+	+ +	+ -	++	++	++	+ +	++	++	++	51 47
Heart	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	52
Digestive system Salvary gland Liver Neoplastic nodule Hepatoreilular carcinoma Pheochromocytoma, metastatic Hemanoma	++++	+ +	+ + X	+ +	+ + X	+ + X	+	+ +	+ +	+ +	+ +	+ +	+ +	+ +	+ +	+ + X	+ +	+ +	+ +	+ +	+ +	+ +	+ +	+ +	+ +	+ +	52 52 3 1
Bile duct Pancreas Acnar ceil adenoma Esophagus Stomach Smail intestine	+++++++++++++++++++++++++++++++++++++++	+ + + + + + + + + + + + + + + + + + + +	++ +++	+ + X + + + -	+ + + + + + + + + + + + + + + + + + +	++++++	++ +++	+ + + + + + + + + + + + + + + + + + + +	++ +++	+++++-	++ +++-	+ + + + + + + + + + + + + + + + + + + +	+ + + + + + -	+ + + + + + + + + + + + + + + + + + + +	++++++	+ + + + + + + + + + + + + + + + + + + +	+ + + + + -	+ + + + + + + + + + + + + + + + + + + +	+ + + + + -	+ + + + + + + + + + + + + + + + + + + +	+ + + + + + + + + + + + + + + + + + + +	++++++	+ + + + + + + + + + + + + + + + + + + +	+++++-	+ + + + + + + + + + + + + + + + + + + +	+++++	52 51 3 48 51 50
URINARY SYSTEM Kidney Tubular cell adenoma	+	+	+ *	+	+ + v	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	51
Urinary bladder	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	49
Pituitary Adenoma, NOS Adrenal Pheochromocytoma Pheochromocytoma	++++	+ +	+ x + x	+ +	+ +	+ +	+ +	+ +	+ +	+ + X	+ +	+ +	+ X ≁	+ +	+ + v	+ +	+ +	+ +	+ +	+ +	+ + X	+ x + x	+ +	+ +	+ +	+ +	52 12 51 8
C cell adenoma C cell carcinoma Parathyroid Adenoma NOS	+	+ X +	х + Х +	+ x -	+	+	+	+	+ X +	+	+ X -	+	+ X -	+ +	++	+	+ x -	+	+	+	+	+	+	+	+	+ +	51 5 3 32
Islet cell adenoma Islet cell acronoma	+	+	+ X	+	+	+	+	+	+	*	* X	+	+	+	* X	+ X	+	+	+ X	+	+	+	+	+	+	+	51 8 6
REPRODUCTIVE SYSTEM Mammary gland Fibroadenoma Testis	N +	+	++	+	++	N +	N +	N +	N +	+	N +	N +	+	N +	+	N +	N +	N +	N +	+	+	+	+	N +	+	+	*52 1 52
Interstitial cell tumor Prostate Adenoma, NOS Preputal/clitoral gland Papillomatosis Adenoma, NOS	X + N	x + N	+ X N	x + N	x + N	X + N	x + N	x + N	x + N	x + N	x + N	x + N	X + N	x + N	x + N	x + N	x + N	x + N	X + N	x + N	X + N	x + N	x + N	x + N	x + N	x + N	50 50 2 *52 1 1
NERVOUS SYSTEM Brain Astrocytoma	+	+	+	+	* x	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	52 1
SPECIAL SENSE ORGANS Lacrimal gland Hemangioma	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N X	N	N	N	N	N	*52
MUSCULOSKELETAL SYSTEM Bone Osteosarcoma	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	N	*52
BODY CAVITIES Tunica vaginalis Mesothelioma, NOS	+ X	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	*52 2
ALL OTHER SYSTEMS Multiple organs, NOS Malignant lymphoma, NOS Leukemia, mononuclear cell	N	N	N X	N	N	N	N	N	N	N	N X	N X	N X	N	N	N	N X	N	N	N	N	N X	N	N X	N	N X	*52 1 15

\* Animals necropsied

## TABLE A2. INDIVIDUAL ANIMAL TUMOR PATHOLOGY OF MALE RATS IN THE TWO-YEAR FEEDSTUDY OF MIREX: 0.1 ppm

ANIMAL NUMBER	1 9 9	2 1 9	1 7 1	2 4 5	2 3 1	2 3 5	2 2 1	2 0 9	2 2 3	2 2 7	1 7 3	1 7 9	1 6 3	1 9 7	2 1 7	1 7 7	1 8 9	1 4 7	1 6 5	1 7 5	1 4 5	1 4 9	1 5 1	1 5 3	1 5 5	1 5 7
WEEKS ON STUDY	0 6 6	0 8 5	0 8 6	0 9 5	0 9 7	0 9 7	1 0 0	1 0 1	1 0 1	1 0 1	1 0 3	1 0 3	1 0 4	1 0 4	1 0 4	1 0 5	1 0 5	1 0 6	1 0 6	1 0 6	1 0 7	1 0 7	1 0 7	1 0 7	1 0 7	1 0 7
INTEGUMENTARY SYSTEM Skin Basal cell carcinoma Subcutaneous tissue Fibroma	+++	+ +	+ +	+	+ +	+ +	+ +	+ +	+ + X	+ +	+ +	+ +	+ + X	+ +	+ +	+ +	++	++	+ +	+ + X	+ +	+ +	+ +	N N	+ +	++
RESPIRATORY SYSTEM Lungs and bronch: Trachea	+	+++	+	+++	+++	+ +	+++	+ +	++++	++++	+++++	+ +	+++	++++	++++	+++	+ + +	++++	++++	+	+++	++++	+++	++++	+++++	++++
HEMATOPOIETIC SYSTEM Bone marrow Spieen Hemanglosarcoma Lymph nodes Thymus	+ + + +	+ + + +	+++	- - + -	+ + + +	+ + + +	+ + + +	+ + + +	+ + + + +	+ + + +	+ + X + +	+ + + +	+ + + +	+ + + +	+ + + +	- + +	+ + + +	++++++	+ + + +	+ +	+ + + +	+ + + +	+ + + +	+ + + +	+ + + +	+ + + +
CIRCULATORY SYSTEM Heart Blood vessels Hemangnosarcoma, invasive	+ N	+ N	+ N	+ N	+ N	+ N	+ N	+ N	+ N	+ N	+ N X	+ N	+ N	+ N	+ N	+ N	+ N	Ň	+ N	+ N	+ N	+ N	+ N	+ N	+ N	* N
DIGESTIVE SYSTEM Salivary gland Liver Neoplastic nodule Bile duct Pancreas Esophagus Stomach Small intestine Leiomyosarcoma Large intestine	+++++++++++++++++++++++++++++++++++++++	+ + X + + + +	++++++	+++-++	+++++++++++++++++++++++++++++++++++++++	+ + + + + + + + +	+++++++++++++++++++++++++++++++++++++++	· + + + + + + +	+++++++++++++++++++++++++++++++++++++++	+++++++++++++++++++++++++++++++++++++++	+ + + + + + + + -	+++++++++++++++++++++++++++++++++++++++	+++++++++++++++++++++++++++++++++++++++	+++++++++++++++++++++++++++++++++++++++	+++++++++++++++++++++++++++++++++++++++	+++++++++++++++++++++++++++++++++++++++	+++++++++++++	+++++++++++++++++++++++++++++++++++++++	+ + X + + + + + + + +	++ ++++ +	+++++++++++++++++++++++++++++++++++++++	+ + + + + + + + +	++ ++++ +	+++++++++++++++++++++++++++++++++++++++	+++++++++++++++++++++++++++++++++++++++	++ ++++ +
URINARY SYSTEM Kidney Liposarcoma Hemangiosarcoma	+	+	+	-	+	*	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+
ENDOCRINE SYSTEM Pituitary Adenoma, NOS Adrenal Cortical adenoma	+ + +	+ + *	+++++	++++	++++++	+ X + X	++++++	++++	++++	+++++	++++	+++++	++++	+ X +	++++	++++	+++++	+++++	+ X +	- * *	+++++++++++++++++++++++++++++++++++++++	++++	++++	+ * *	+++++	+ + X +
Cortical carcinoma Pheochromocytoma Ganglioneuroma Thyroid Foliicular cell carcinoma C cell adenoma C cell adenoma C cell carcinoma Parathyroid Adenoma NOS	+	+	<b>x</b> +	x - +	+	+	-+	+	+	+	x + +	x + x -	+	+	+	x +	+	x + x +	x + x	+	+	+	++	+	+	+
Islet cell carcinoma Islet cell carcinoma	+	+	+	-	+ X	+	-	+	+	+	+	+ X	+	+ X	+ X	+ X	+ X	+	+	+	+ X	+	+ X	+ X	+	+ x
REPRODUCTIVE SYSTEM Mammary gland Fibroadenoma Testis Interstitial cell tumor Prostate Adenoma, NOS Epididymis Mesothelioma, NOS	N + - N	+ + X + N	+ + X + N	+ + X + N X	N + X + N	+ + X + N	+ + X + N	+ + X + N	N + X + N	+ + X + N	+ + X + N	+ + X + X N	+ + X + N	+ + X + N	+ + X + X N	+ + X + N	+ + X + N	+ + X + X N	+ + X + N	+ + X - N	+ + X + N	+ + X + N	+ + X + N	N + X + X N	+ + X + N	N + X + N
NERVOUS SYSTEM Brain	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+
SPECIAL SENSE ORGANS Zymbal gland Sebaceous adenoma	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	N
BODY CAVITIES Pentoneum Sarcoma, NOS Tunca vagnalis 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 +	N +
ALL OTHER SYSTEMS Multple organs, NOS Malignant lymphoma, NOS Malignant iymphoma, histiocytic type Leukemia, mononuclear cell	N	N X	N X	N	N X	N	N X	N X	N	N X	N	N	N	N X	N	N X	N	N	N X	N	N	N X	N	N	N	N

#### TABLE A2. INDIVIDUAL ANIMAL TUMOR PATHOLOGY OF MALE RATS: 0.1 ppm (Continued)

ANIMAL NUMBER	1 5 9	1 6 1	1 6 7	1 6 9	1 8 1	1 8 3	1 8 5	1 8 7	1 9 1	1 9 3	1 9 5	2 0 1	2 0 3	2 0 5	2 0 7	2 1 1	2 1 3	2 1 5	2 2 5	2 2 9	2 3 3	2 3 7	2 3 9	2 4 1	2 4 3	2 4 7	
WEEKS ON STUDY	1 0 7	1 0 7	1 0 7	1 0 7	1 0 7	1 0 7	1 0 7	1 0 7	1 0 7	107	1 0 7	1 0 7	1 0 7	1 0 7	1 0 7	1 0 7	1 0 7	1 0 7	1 0 7	1 0 7	1 0 7	1 0 7	107	107	1 0 7	1 0 7	TUTAL: TISSUES TUMORS
INTEGUMENTARY SYSTEM Skin		+	+	+	+	 +	-, 	+	+	+	+	+	+		 +	+	N	+	+	+	+	+	+	+	+	 +	*52
Basal cell carcinoma Subcutaneous tissue Fibroma	+	+	+	+	+	+	+	+	X +	+	+	+	+	+	+	+	N	+	+	+	+	+	+	+ x	+	+	1 *52 4
RESPIRATORY SYSTEM Lungs and bronchi Trachea	++++	+++	+++	+++	+++	++++	+++++++++++++++++++++++++++++++++++++++	+++	++++	+++	+++	++++	+++	++++	+++	++++	+++	++++	+++	++++	+	+++	++++	+++	+++	+++	52 48
HEMATOPOIETIC SYSTEM Bone marrow	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	49
Spieen Hemangnosarcoma Lymph nodes Thymus	+++++	+++++	+++++	+++++	+++++++++++++++++++++++++++++++++++++++	+++++	++++	++++	+++++	+++++	++++++	+++++	++++	+++++	+ + +	++++	+++++	++	+++++	+++++	+++++	+++++	+++++	+++++	+++++	+ + +	51 1 52 47
CIRCULATORY SYSTEM Heart Blood vessels Hemangiosarcoma, invasive	+ 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	+ N	52 *52 1
DIGESTIVE SYSTEM Salivary gland	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	52
Liver Neoplastic nodule Bile duct	+	+	+	+	+	+	+	+	+	+	* *	+	+	+	+	* *	+	* *	+	+	+	+	+	+	+	+	52 52 52
Esophagus Stomach	+++++	++++	+++++++++++++++++++++++++++++++++++++++	++++	+ + +	++++	+++++	+++++++++++++++++++++++++++++++++++++++	+ + +	+++++++++++++++++++++++++++++++++++++++	+++++	++++++	+++++++++++++++++++++++++++++++++++++++	+++++	+ + +	+++++++++++++++++++++++++++++++++++++++	+++++	+ + +	+++++	+++++++++++++++++++++++++++++++++++++++	+ + +	+ + +	+ + +	+++++	+++++++++++++++++++++++++++++++++++++++	+ + +	50 52 51
Small intestine Leiomyosarcoma Large intestine	++	+	++	+	+ +	* X +	+	++	++	++	++	++	+	+	+ +	++	++	++	++	++	++	++	+	+	++	+ +	47 1 45
URINARY SYSTEM Kidney	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	51
Liposarcoma Hemangiosarcoma Urinary bladder	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	X +	+	+	+	+	
ENDOCRINE SYSTEM Pituitary Adapama NOS	+	+	+	+ v	+	+	+	+	+	+	+	+	+ v	+	+	+	+	+ ¥	+	+	+	+	+	+ ¥	+	+	52
Adrenal Cortical adenoma Cortical carcinoma	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	52 2 1
Pheochromocytoma Ganghoneuroma Thyroid	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	х +	+	+	X +	+	+	7 1 50
Follicular cell carcinoma C ceil adenoma C cell carcinoma			X				x			x	x																$\begin{array}{c} 1\\ 4\\ 2\end{array}$
Parathyroid Adenoma, NOS Pancreatic islats	+		-	+	+	+	+	-	+	+	+	+	+	+	+	-	-	+	+	-	+	+	+	+	-	~	39 1 50
Islet cell adenoma Islet cell carcinoma		•			x	x			,			,	x	•	,	x	,	x		x				x	x		3 15
REPRODUCTIVE SYSTEM Mammary gland Fibroadenoma	N	+	+	N	+	+	+	N	N	+	N	N	N	* x	+	+	N	N	+	+	+	+	+	+	N	N	*52
Testis Interstitial cell tumor Prostate	+ X +	* *	* X	* *	* x	* X	* *	* X	* X	+ X +	* *	* *	* X	* *	* *	* X	* *	* *	* *	* *	+ X +	* *	* *	* *	* X	+ X +	52 51 50
Adenoma, NOS Epididymis Mesothelioma, NOS	N	X N	Ý N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	6 *52 1
NERVOUS SYSTEM Brain	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	52
SPECIAL SENSE ORGANS Zymbal gland Sebaceous adenoma	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	* X	*52
BODY CAVITIES Peritoneum	N	N	N	N	N	N	N	N	N	N	N	Ņ	N	N	N	N	N	N	N	N	N	N	N	N	N	N	*52
Sarroma, NOS Tunica vaginalis Mesothelioma, NOS	+	+	+	+	+	+	+	+	+	+	+	х +	+	+	+	+	+	+	+	+	* X	+	+	+	+	+	*52 1
ALL OTHER SYSTEMS Multiple organs, NOS Malignant lymphoma, 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	N	*52
Malıg. lymphoma, hıstıocytic type Leukemia, mononuclear cell							x	-	x				x			x		x	x			x	x			x	17

\* Animals necropsied

## TABLE A2. INDIVIDUAL ANIMAL TUMOR PATHOLOGY OF MALE RATS IN THE TWO-YEAR FEEDSTUDY OF MIREX: 1 ppm

ANIMAL NUMBER	2 5 1	2 5 5	3 4 5	3 2 7	3 3 5	2 7 1	3 3 1	2 8 3	3 1 5	3 3 9	2 5 9	2 6 1	3 1 7	2 6 3	2 7 3	3 5 1	2 6 5	2 9 9	3 0 7	2 4 9	2 5 3	2 5 7	2 6 7	2 6 9	2 7 5	2 7 7
WEEKS ON STUDY	0 5 3	0 5 7	0 6 7	0 6 9	0 7 1	0 8 3	0 8 4	0 8 6	0 8 6	0 8 6	0 9 0	0 9 1	0 9 3	0 9 6	0 9 7	0 9 8	1 0 5	1 0 5	1 0 5	1 0 6	1 0 6	1 0 6	1 0 6	1 0 6	1 0 6	1 0 6
INTEGUMENTARY SYSTEM Skin Papilloma, NOS Fibrosarcoma	+	+	+	+	+	+	+	+	+	+	N	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+
Subcutaneous tissue Fibroma	+	+	+	+	+	+	+	+	+	+	N	+	+	+	+	+	*	+	+	+	+	+	+	+	+	+
RESPIRATORY SYSTEM Lungs and bronch Alveolar/bronchiolar carcinoma Trachea	+ -	+ -	+ -	+ -	+ -	+ +	+ -	+ +	+ +	+ 	+ +	+ +	+ +	+ +	+ +	+ +	+ +	+ +	+ +	+ +	+ -	+ +	+ +	+ +	+ +	+ +
HEMATOPOIETIC SYSTEM Bone marrow Spleen Lymph nodes Thymus		+ + + +	+ + +	++++-	+++-	+ + + +	+ + + +	- + + +	+ - + +	+ + + -	++++++	+ + + +		- + + +	+ + + +	++++-	+ + + +	+ + + +	+ - + +	+ + + +	+ + + +	 + + +	+ + + +	+++++	+ + + +	+ + + +
CIRCULATORY SYSTEM Heart	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+
DIGESTIVE SYSTEM Oral cavity Squamous cell carrinoma Salivary gland Liver Neoplastic nodule	N + +	N + +	N + +	N + +	N + +	N + +	N + +	N + +	N + +	N + +	N + +	N + +	N + +	N + +	N + +	N + +	N + +	N + +	N X + +	N + +	N + + X	N + +	N + X	N + +	N + +	N + + X
Hepatocellular carcinoma Bile duct Pancreas Esophagus Stomach Small intestine Large intestine	+++++	++-++	+++	+ + + + +	+++++	+ + + + - +	+ + + + + +	+ + + + -	+++	+++++	+++++	+ + + + + +	+++	++++	+++++	+++++	+++++	+++++	+ - + - + +	+ + + + + +	+++++	+ + + + + +	+ + + + + +	+ + + + + +	+ + + + +	++++++
URINARY SYSTEM Kidney Urinary bladder	+++++	++++	++++	+++++++++++++++++++++++++++++++++++++++	+++	+ +	++++	+	+++	++++	++++	++++	++++	+	+++++	++++	++++	++++	++++	++++	++++	+++++	+++	+ + +	++	+++++
ENDOCRINE SYSTEM Pituitary Carcinoma NOS	+	+	+	+	+	+	+	+	+	+ x	+	+	_	+	+	+	+	+	+	+	+	+	+	+	+	+
Adenoma, NOS Adrenal Adenoma, NOS	+	+	+	+	+	+	X +	+	+	+	+	X +	+	+	X +	+	+	+	+	+	+	X + X	+	+	+	+
Cortucal adenoma Pheochromocytoma Thyroud C cell adenoma C cell carcinoma	-	+	+	+	+	+	+	~	x_	<u>x</u>	+	+	X +	-	X +	+	X X +	X +	X +	+	+	X +	+ X	+	+	<b>X</b> +
Parathyroid Pancreatic islets Islet cell adenoma Islet cell carcinoma	+	- +	 +	+ +	+	+ +	+ +	+ +	+ +	+	+ + X	+ +	+ +	+ +	+ + X	+ +	+ +	+ + X	-	+ +	+ + X	+ +	+ +	- + X	+ +	+ +
REPRODUCTIVE SYSTEM Mammary gland Fibroadenoma	+	+	+	+	+	N	N	N	+	+	N	* x	N	+	N	+	+	N	+	N	N	+	N	N	N	N
Testis Interstitial cell tumor Prostate Advances NOS	+	+ +	+ +	* *	+	* *	+ +	-	* * +	+ +	+ x +	* * +	++	* * +	+ +	+ X +	+ X +	* * +	* *	+ X +	+ X +	* * +	+ X +	* *	* * +	+ X +
Preputa/clitoral gland Carcinoma, NOS Adenoma NOS	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	N	Ñ
NERVOUS SYSTEM Brain Carcinoma, NOS, invasive	+	+	+	+	+	+	+	+	+	* X	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+
SPECIAL SENSE ORGANS Eye Undufferentiated carcinoma	N	N	N	N	N	N	N	N	N	N	N	+ X	N	N	N	N	N	N	N	N	N	N	N	N	N	N
Zymbal gland Sebaceous adenoma	N	N	N	*	N	N	N	N	N	N	N	Ñ	N	N	N	N	N	N	N	N	N	N	N	N	N	N
MUSCULOSKELETAL SYSTEM Bone Fibrosarcoma	N	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
ALL OTHER SYSTEMS Multiple organs, NOS Undifferentiated carcinoma, metastatic	N	N	N	N	N	N	N	N	N	N	N	N X	N	N	N	N	N	N	N	N	N	N	N	N	N	N
Leukemia, mononuclear cell	[						x	A	x				x	x							x	x			x	

#### TABLE A2. INDIVIDUAL ANIMAL TUMOR PATHOLOGY OF MALE RATS: 1 ppm (Continued)

ANIMAL NUMBER	2 7 9	2 8 1	2 8 5	2 8 7	2 8 9	2 9 1	2 9 3	2 9 5	2 9 7	3 0 1	3 0 3	3 0 5	3 0 9	3 1 1	3 1 3	3 1 9	3 2 1	3 2 3	3 2 5	3 2 9	3 3 3	3 3 7	3 4 1	3 4 3	3 4 7	3 4 9	TOTAL
WEEKS ON STUDY	1 0 6	1 0 7	1 0 7	1 0 7	1 0 7	1 0 7	1 0 7	1 0 7	1 0 7	1 0 7	1 0 7	1 0 7	1 0 7	1 0 7	1 0 7	1 0 7	1 0 7	1 0 7	1 0 7	1 0 7	1 0 7	1 0 7	0 7	1 0 7	1 0 7	1 0 7	TISSUES
INTEGUMENTARY SYSTEM	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+		+	+	+	+	+	+	+	+	*52
Papilloma, NOS Fibrosarcoma Subcutaneous tissue Fibroma	+	+	+	+	+	+	+	+	* X	÷	+	+	<b>X</b> +	+	+ X	+	+	х +	+	+	+	+	+	÷	+	+	1 *52 3
RESPIRATORY SYSTEM Lungs and bronchi Alveolar/bronchiolar carcinoma Trachea	+ X +	+	+++	+++	++	+	+++	+++	++	+	++	++	+	+++	+++	++	+	+++	++	+	+++	+++	+ +	+++	+++	++++	52 1 44
HEMATOPOIETIC SYSTEM Bone marrow Spleen Lymph nodes Thymus	+++++	+++++++	++++++	+ + +	++++++	+++++	+ + + +	+++-	+++++	+++++	++++++	++++++	+++++	+++++	+++++	+++++	+++++	++++++	+++++	+++++	+++++	++++-	+++++	+++++	++++	+ + + +	48 50 52 42
CIRCULATORY SYSTEM Heart	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	52
DIGESTIVE SYSTEM Oral cavity Squamous cell carcinoma Salvary gland Lucer	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 +	N +	*52 1 52 59
Neoplastic nodule Hepatocellular carcinoma Bile duct Pancreas Esophagus	+++++++++++++++++++++++++++++++++++++++	• + +	, + + +	+ + + +	+++++	, + + +	, +++	x + + + +	, + + + +	, + + + +	- + + +	· + + + +	+ + +	- ++++	· + + + +	+ + -	++++	X X + + + +	, + + + +	+ + + +	· + + + +	- + + + +	X + + + +	++++	, + + + + +	+++++	5 2 52 51 50
Small intestine Large intestine	++++	+ + +	+ + +	+ + +	+ + +	+ +	+ + +	+++++++++++++++++++++++++++++++++++++++	+ +	+ + +	+++	+ + +	+ + +	+ + +	+ + +	+++	+ + +	+ + +	+ + +	+ + +	+ + +	+ + +	+ + +	++	+ + +	+ + +	48 47 47
URINARY SYSTEM Kidney Urinary bladder	+ -	+ +	+ +	+ +	++	+ +	+ +	+ +	+ +	+ +	+ +	+ +	+ +	+ +	+ +	+ +	+ +	+ +	+ +	+ +	+ +	+++++	+ +	+ +	+ +	+ +	52 49
ENDOCRINE SYSTEM Pituitary Carcinoma, NOS	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	51
Adenoma, NOS Adrenal Adenoma, NOS Cortical adenoma Phacebergroutema	+	л +	+ v	л + У	+	л +	+	+	÷	+ v	+	x	+	+	+	+	+	л + х	+	+	+	л +	+	+	+	+	12 52 1 2
Thyroid C cell adenoma C cell carcinoma	+	+ X	+	+	+	+	+	+	+	+	+	+	* x	+	+ X	+	+	+	+	+	+	+	+	+	+	+	47 2 2
Fancreatic islets Islet cell adenoma Islet cell carcinoma	+	*	+	+	+	+ X	÷	+	+	+	÷	+ X	+	+	+	+	+	+	+	+	÷ x	+	÷	+	+ X	+ X	51 7 4
REPRODUCTIVE SYSTEM Mammary gland Fibroadenoma	+	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	+	N	N	N	+	N	N	+	+	*52
Interstital cell tumor Prostate Adenoma, NOS Preputial/clitoral gland Carcinoma, NOS Adenoma, NOS	X + N	т + N	X + N	+ X + X N	т + N	X + X N	т Х + N	× + N	* + N	х + N	т + N	X + N X	X + N	* + N	т + N	т + N	т + N	т + N	т + N	× + N	+ + X N	х + N	т + N	т + N	× + N	+ + N	43 50 4 *52 1 1
NERVOUS SYSTEM Brain Carcinoma, NOS, invasive	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	52 1
SPECIAL SENSE ORGANS Eye Undifferentiated carcinoma Zymbal gland Sebaceous adenoma	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 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	N N	*52 1 *52 1
MUSCULOSKELETAL SYSTEM Bone Fibrosarcoma	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	N	*52
ALL OTHER SYSTEMS Multiple organs, NOS Undiff carcinoma, metastatic	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	N	*52
Malignant lymphoma, NOS Leukemia, mononuclear cell					x		x	x		x		x						x					x			x	15

\* Animals necropsied

# TABLE A2. INDIVIDUAL ANIMAL TUMOR PATHOLOGY OF MALE RATS IN THE TWO-YEAR FEEDSTUDY OF MIREX: 10 ppm

ANIMAL NUMBER	4 4 5	3 9 5	4 1 9	4 3 1	4 4 3	3 8 7	4 0 3	3 9 9	4 3 3	4 1 3	4 0 7	4 3 9	4 9	3 8 9	4 2 5	3 6 1	3 5 3	3 5 5	3 5 7	3 5 9	3 6 3	3 6 5	3 6 7	3 6 9	3 7 1	3 7 3
WEEKS ON STUDY	0 4 7	0 6 1	0 7 9	0 8 5	0 8 9	0 9 1	0 9 2	0 9 8	0 9 8	0 9 9	1 0 0	1 0 0	1 0 1	1 0 2	1 0 4	1 0 5	1 0 6	1 0 6	1 0 6	1 0 6	1 0 6	1 0 6	1 0 6	1 0 6	1 0 6	1 0 6
INTEGUMENTARY SYSTEM Skin Sebaceous adenoma Sebaceous adenoma Keratoacanthoma Subcutaneous tissue Sarcoma, NOS Fibroma	+	N N X	+ + X	+	+	+	+	+	+	+ + x	+	N N	+ + x	+	+	+	+	+	+	+	+	+ + x	+	+	* *	++
RESPIRATORY SYSTEM Lungs and bronch Alveolar/bronchiolar carcinoma Pheochromocytoma, metastatic Trachea	+	+	+	++	++	+	+	++	+	+	+	+	++	* * +	+	+	* * +	++	++	+	+	+	++	++	+	+
HEMATOPOIETIC SYSTEM Bone marrow Spleen Fibrosarcoma Leukema, mononuclear cell Lymph nodes Alveolarbonochiolar carcinoma, metastatic Thymus Papillary carcinoma	- + +	- + -	- + +	+ + + +	+ + + +	- + + +	+ + + +	+ + + -	++++	+ + +	+ + +	+ + + +	+ + + +	+ + X + +	 + +	+++++	+ + + X +	+ + +	+ + + +	+ + +	++++	+ + + +	+ + + X	+ + X + +	+ + +	+ + +
CIRCULATORY SYSTEM Heart	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+
DIGESTIVE SYSTEM Salvary gland Liver Neoplastic nodule Hepatocellular carcinoma Bile duct Pancreas Acinar cell adenoma Esophagus Stomach	++++-+++++++++++++++	+++++++++++++++++++++++++++++++++++++++	+ + + + + + +	++ ++ ++	+ + + + + + +	+ + X + - + +	+++++++	+++++++	++ ++ ++ ++	+++++++	++++++++++++++++++++++++++++++++++++++	+ + + + + +	+ + + + + +	+ + + + + + +	+++++++++++++++++++++++++++++++++++++++	++ ++ +++++	+ + + + + +	+++++++	+ + + X + + +	+ + X + + + +	+ + X + + + + + + + +	+ + + + + + - + +	+ + + + + + +	+ + + + +	+ + + + +	+++++++++++++++++++++++++++++++++++++++
Small intestine Large intestine	+	-	++	+	-	-	+ -	+		+ +	+ +	+++	++	+ -	-	+	+ +	++	++	+	+ +	+++	++	++	+ +	+
URINARY SYSTEM Kidney Urinary bladder	++++	+ +	+ +	+ +	+ +	+ -	+ +	+ +	+ +	+ +	+ +	+ +	+ +	+ +	+ -	+ +	+ +	+ +	+ +	+ +	+ +	+ +	+ +	+ +	+ +	+ +
ENDOCRINE SYSTEM Pituitary Adenoma, NOS Adrenal Cortical carcinoma Pheochromocytoma Pheochromocytoma, malignant	+	+ +	+ + X	+	+ +	+ +	+ +	+ +	+ + + X	+ + X	+ +	+	++	+ +	+	+ + X	+ +	+ + X	+ +	+ X +	+ + X	* X +	+ +	+ +	* * +	+ +
Thyroid Folicular cell adenoma C cell adenoma C cell carcinoma Parathyroid Pancreatic islets Islet cell adenoma Islet cell carcinoma	+	+	+ + +	+ + +	- + +	+ + -	+ - +	+ + +	- + +	+ + +	+ X +	+ - X	+ + +	+ X - + X	-	++++	+ X + +	+ X + + X	+ + +	-1 X  -1	+ + +	+	+ + +	+ - +	+  +	+ + +
REPRODUCTIVE SYSTEM Mammary gland Fibroadenoma Testus Interstitual cell tumor Prostate Carcinoma, NOS Adenoma, NOS Adenoma, NOS	+ + +	N + + N	N + + N	N + X + N	N + X + N	N + X + N	+ + X + N	+ + X + N	+ + X + N	N + X + N	+ + X + N	+ X + X + X + N	N + X + N	+ + X + N	+ + X + N	N + X + N	N + X + N	+ + X + N	N + X + N	+ + X + N	N + X + N	+ + X + N	+ X + X + X + N	+ X + X + N	N + X + N	N + X + N
Adenoma, NOS NERVOUS SYSTEM												·														
Brain Oligodendroghoma	<u> </u>	+	+	+	+	+	+	+	+	+	+	+	+	+	+	.+ 	+	+	+	+	+	+	+	+	+	+
SPECIAL SENSE ORGANS Zymbal gland Carcinoma, NOS Sebaceous adenoma	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	N
ALL OTHER SYSTEMS Multiple organs, NOS Malignant lymphoma, histiocytic type Leukemia, mononuclear ceil	N	N	N	N	N	N X	N X	N X	N	N X	N X	N X	N X	N	N	N	N	N X	N	N	N X	N	N	N	N X	N

Tissue examined microscopically
 Required tissue not examined microscopically
 X Tumor incidence
 N Necropsy, no autolysis, no microscopic examination
 S Animal missexed

No tissue information submitted C Necropsy, no histology due to protocol A. Autolysis M Animal missing B No necropsy performed

#### TABLE A2. INDIVIDUAL ANIMAL TUMOR PATHOLOGY OF MALE RATS: 10 ppm (Continued)

ANIMAL	3	3	3	3	3	3	3	3	3	4	4	4	4	4	4	4	4	4	4	4	4	4	4	4	4	4	
NUMBER	5	7	9	8	8 3	8 5	9 1	3	9 7	1	5	9	1	1 5	17	1	3	7	2 9	3	3	4	4	1	5 3	5 5	TOTAL.
WEEKS ON STUDY	1 0 6	1 0 6	1 0 6	1 0 6	1 0 6	1 0 6	1 0 6	1 0 6	1 0 6	1 0 6	1 0 6	1 0 6	1 0 6	1 0 6	1 0 6	1 0 6	1 0 6	1 0 6	1 0 6	1 0 6	1 0 6	1 0 6	1 0 6	1 0 6	1 0 6	1 0 6	TISSUES TUMORS
INTEGUMENTARY SYSTEM																											
Skin Squamous cell papilloma Sebaceous adenoma Keratoacanthoma	+	+	+	+	+	+	+	+	+	+	+ X	+ X	+	+	+	+	+	+	+	+	+	+	+	+	+	+	*52 1 1 1
Subcutaneous tissue Sarcoma, NOS Fibroma	+ X	+	+	+	+	+	+	+	+ X	+	+	+ X	+	+	+	+	+	+	+	+	+	+	+	+	+	+	*52 1 7
RESPIRATORY SYSTEM Lungs and bronchi Alveolar/bronchiolar carcinoma Phocomponentuma metactatic	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+ ¥	+	+	+	+	+	+	+	+	+	+	52 2
Trachea	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	÷	+	+	+	+	+	+	+	+	+	+	51
HEMATOPOIETIC SYSTEM Bone marrow	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	47
Spleen Fibrosarcoma	+	+	+	+	+	+	+	+	+	+	+	+	+	+	* X	+	+	+	+	+	+	* X	+	+	+	+	51 2
Leukemia, mononuclear cell Lymph nodes	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	$\frac{2}{52}$
Alveolar/bronchiolar carcinoma, met Thymus Papillary carcinoma	+	+	+	+	+	+	+	+	+	+	+	+	-	+	+	-	+	+	+	+	+	-	+	-	+	+	$\begin{array}{c}1\\40\\1\end{array}$
CIRCULATORY SYSTEM Heart	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	52
DIGESTIVE SYSTEM Salivary gland	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	 +	+	+	+	+	+	+	+	52
Liver Neoplastic nodule	+ X	*	+	*	+	*	* X	+	+	$\mathbf{x}^{+}$	+	+	+	* X	+	+	+	*	* X	+	*	*	+	+	+	+	52 14
Hepatocelluiar carcinoma Bile duct	+	+	+	+	+	+	+	+	+	+	+	+	÷	+	+	+	+	Х +	+	+	+	+	÷	+	+	+	2 52
Acipar cell adenoma	+	+	+	+	+	+	+	+	+	+	+	+	+	x X	+	+	+	+	+	+	+	+	+	+	+	+	47
Esophagus Stomach	+++++	+++++++++++++++++++++++++++++++++++++++	++	+++	+++	++	++	+	+++	+	+++	+++	+++++++++++++++++++++++++++++++++++++++	+	+	+++	+++	++++	+++	+	++	+++	+++	+++	++	+ +	45
Smail intestine Large intestine	++++	+ +	+++	++	++++	+++	+++	+ +	+++	+++	++	+++	+++	+++	+++	++++	++	+++	+++	+++	+ +	+++	+ +	++	++	+ +	46 42
URINARY SYSTEM																								_~			
Kidney Urinary bladder	+++++	+ +	++++	+ +	+++	+++	+ +	++	+++	+ +	+ +	+ +	+ +	++	+ +	++	++	+ +	52 50								
ENDOCRINE SYSTEM																						·					
Adenoma, NOS	+	+	x,	+	+	+	x	+	+	+	+	+	+	+	x	x	+	x,	x	+	+	+	+	+	-	+	10
Cortical carcinoma Pheochromocytoma Pheochromocytoma malignant	+	+	x	×	+	Ŧ	Ŧ	+	+	+	x	÷	x	+	+	+ X	+	+	x	+	x	+	+	+	Ŧ	+	1 11 11
Thyroid Follicular cell adenoma C cell adenoma	+	+ X	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+ X	+ X	47 1 5
C cell carcinoma Parathyroid	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+		-	+	-	+	+	+	+	+	-	
Pancreatic islets Islet cell adenoma	+	+	+	+	+	+	x X	+	+ v	+	+	x x	+	+	x x	+ v	+	+	+	+	+	+ v	+	+	+	+ v	47
PEPRODUCTIVE SYSTEM																		Λ									3
Mammary gland Fibroadenoma	N	N	+	Ν	* x	Ν	N	N	N	N	+	N	N	N	+	+	Ν	N	*	N	N	N	N	Ν	N	Ν	*52 5
Testis Interstitial cell tumor	<b>x</b>	× X	x x	×	×	x,	×	×,	x,	x x	x x	x+	×	×,	+	×	×	x x	×,	x+	x x	*	x x	x,	x x	*	52 48
Carcinoma, NOS	x	Ŧ	Ŧ	Ŧ	¥	т	Ŧ	Τ.	Ŧ	Ŧ	Ŧ	Ŧ	Ŧ	т	Ŧ	≁ ¥	Ŧ	Ŧ	Ŧ	Ŧ	Ŧ	т	Ŧ	Ŧ	Ŧ	Ŧ	
Preputial/clitoral gland Adenoma, NOS	N	N	N	N	Ñ	N X	N	N	N	N	N	N	N	N	N	Ñ	N	N	N	N	N	N	N	N	Ν	Ν	*52
NERVOUS SYSTEM Brain Oligodendroglioma	+	+	+	+	+	*	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	-	+	51 1
SPECIAL SENSE ORGANS Zymbal gland Carcinoma, NOS Sebaceous adenoma	N	N	+ X	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	* x	N	N	N	N	N	N	*52 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	N	N	N	N	N	N	N	N	*52
Malig, lymphoma, histiocytic type Leukemia, mononuclear cell				x		x	x	x	x	X	x				x					x		x	x				1 20

\* Animals necropsied

## TABLE A2. INDIVIDUAL ANIMAL TUMOR PATHOLOGY OF MALE RATS IN THE TWO-YEAR FEEDSTUDY OF MIREX: 25 ppm

ANIMAL NUMBER	5 0 5	5 8 5	5 0 1	4 9 9	5 2 9	5 8 1	5 3 5	5 2 7	5 9 7	5 2 5	5 0 7	5 5 7	5 4 7	5 3 3	5 8 9	5 8 7	5 5 9	5 6 9	5 9 9	5 0 3	5 4 9	5 6 7	5 7 5	5 9 1	5 4 3	5 1 1
WEEKS ON STUDY	0 5 8	0 6 3	0 7 1	0 7 4	0 7 4	0 7 9	0 8 1	0 8 3	0 8 3	0 8 4	0 8 6	0 8 8	0 8 9	0 9 1	0 9 2	0 9 5	0 9 6	0 9 7	0 9 7	0 9 8	0 9 8	0 9 8	0 9 8	0 9 8	0 9 9	1 0 0
INTEGUMENTARY SYSTEM Skin Squamous cell carcinoma Subcitancius tissue	+	N N	+	+	+	+	+	+	+	+	+	+	+	N N	+	+	+	+	+	+	+	+	+	+	+++	+
Fibroma Fibrosarcoma			x		x					X																
RESPIRATORY SYSTEM Lungs and bronchi Carcinoma, NOS, metastatic Squamous cell carcinoma, metastatic Trachea	+	+ X -	+	+	+	+	+	+	+ +	+ +	+	+	+ +	+ x +	+ +	+	+	+	+	+	+	+	+	+	+	+ +
HEMATOPOIETIC SYSTEM Bone marrow Spieen Leukemia, mononuclear cell	+++++	-	++++	 +	+++	-	+++++	 +	 +	++	+++	+	+++	+++++	+++	+		_	++++	+ +	 +	++++	+++	++++	+++++	+++
CIDCULLATORY SYSTEM	++	-	+	+	+	+	+	+	+	+	+	+	+	+	+	+	-	+	+	+	+ 	+	+	+	+	+
Heart	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+
Salvary gland Liver Neoplastic nodule Hepatocellular carcinoma	++	+ +	+ +	+ +	+ +	+ +	+ +	+ +	+ +	+ +	+	+ +	+ + X	+ +	+ +	+ + X	+ +	+ +	+ + X							
Bile duct Pancreas Acnar celi adenoma Esophagus Stornach	+   +   +	++++-	++++	++++	+++++	++++++	++++++	++	+++++++++++++++++++++++++++++++++++++++	+++++++++++++++++++++++++++++++++++++++	++++	+ - +	+++++	+++++	+++++	+++++	+ -++++++++++++++++++++++++++++++++++++	+  +	++++++	+++++++++++++++++++++++++++++++++++++++	+++++	+++++++++++++++++++++++++++++++++++++++	++++++	+++++	+++++++++++++++++++++++++++++++++++++++	+++++++++++++++++++++++++++++++++++++++
Small intestine Large intestine	+++	_	_		+ +	-	+ +	-	+++	-	+ +	-	+ +	- +	++		+ -	-	+ +	+ +	-	_	+ +	+ +	_	+ +
URINARY SYSTEM Kidney Sarcoma, NOS Kidney/pelvis Transitional cell papilloma	+++++	+ +	+ +	+ +	++	++	++	+ +	++	++	++	+ +	+ +	+++++	+++	++	* *	-	+++	+ + X	++	+++	+++	+++	+++	+++
ENDOCRINE SYSTEM		+	+	+			+ +		+				+ +			+ 	+		 +		+	+	+		+	, 
Adenoma, NOS Adrenal Pheochromocytoma	+	+	+	+	+	+	+	+	× +	+	* x	+	× +	+	+	+ x		* x	+ X	+	+	+	+	+ X	X +	x + x
C-cell adenoma Parathyroid Adenoma, NOS	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	-	+ X	+	+	+	+ X	+	+	+
Fancreatic islets Islet cell adenoma Islet cell carcinoma	+	+	+ X	+	+	+	+	+ X	+	+	+	-	+	+	+	+	-	-	+	+	+	+	+	+	+	+
REPRODUCTIVE SYSTEM Mammary gland Fibroadenoma	+	N	N	+	N	+	N	+	N	N	N	N	+	+	N	+	+	+	N	N	+	+	+	+	N	+
Testis Interstitial cell tumor Prostate Preputial/clitoral gland Carcinoma, NOS Adenoma, NOS	+ + N	+ + N	+ + N	+ + N	+ + N	+ + N	+ + N	+ + N	+ + N	+ + N	+ + N	+ X + N	+ + N	+ X + N	+ X + N	+ + N	+ + N	+ + N	+ + N	+ + N	+ + + N	+ X + N	+ + N	+ + N	+ + N	+ X + N X
NERVOUS SYSTEM Brain Ghoma, NOS	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	*	+	+	+	+	+
SPECIAL SENSE ORGANS Hardenan gland Carcinoma, NOS Zymbal gland Carcinoma, NOS Squamous cell carcinoma Sebaceous adenoma	N N	N + X	N N	N N	N N	N N	N N	N X N	N N	N N	N N	N N	N + X X	N N	N N	N N	N N	N N	N N	N N						
BODY CAVITIES Tunica vaginalis Mesothelioma, NOS	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	* x
ALL OTHER SYSTEMS Multiple organs, NOS Malignant lymphoma, NOS Leukemia, mononuclear cell	N X	N	N	N X	N	N	N X	N X	N X	N	N	N X	N	N	N X	N	N	N	N	N X	N	N	N X	N	N	N X
### TABLE A2. INDIVIDUAL ANIMAL TUMOR PATHOLOGY OF MALE RATS: 25 ppm (Continued)

ANIMAL NUMBER	5 3 7	4 9 7	5 1 3	5 2 3	5 6 5	5 7 1	5 8 3	5 3 9	5 7 3	5 9 3	5 0 9	5 1 5	5 1 7	5 1 9	5 2 1	5 3 1	5 4 1	5 4 5	5 5 1	5 5 3	5 5 5	5 6 1	5 6 3	5 7 7	5 7 9	5 9 5	TOTAL
WEEKS ON STUDY	1 0 1	1 0 2	1 0 2	1 0 2	1 0 2	1 0 2	1 0 3	1 0 5	1 0 5	1 0 5	1 0 6	1 0 6	1 0 6	1 0 6	1 0 6	1 0 6	1 0 6	1 0 6	1 0 6	1 0 6	1 0 6	1 0 6	1 0 6	1 0 6	1 0 6	1 0 6	TISSUES
INTEGUMENTARY SYSTEM																		·					<u> </u>				***
Skin Squamous cell carcinoma Subcutaneous tissue Fibroma Fibrosarcoma	+++	+	+	+	+	+	+	+	+	+ + X + X	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	*52 1 *52 3 1
RESPIRATORY SYSTEM Lungs and bronchi Carcinoma, NOS, metastatic Squamous cell carcinoma, metastati Trachea	+	+	+	++	++	+	+	+	+	+	+	+	+	+	+	+	+	+	++	+	+	+	+	+	+	+	52 1 1 40
HEMATOPOIETIC SYSTEM Bone marrow Spleen Leukemia, mononuclear cell Lymph nodes Thymus	   +   -   -	+ + X + +	++ + ++	+ + + +	+ + + +	- + +	+ + + +	+ + + +	+ + + +	+ + + +	+ + + -	++ ++ ++	+ + + +	+ + + +	+ + + +	+ + X + +	+ + + +	+ + + -	++ ++	+++++++++++++++++++++++++++++++++++++++	+ + + +	+ + + +	+ + + +	+ + + +	+ + + +	+ + + +	40 48 2 48 42
CIRCULATORY SYSTEM Heart	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	52
DIGESTIVE SYSTEM Sahvary gland Liver	- +	+ +	+++	+++	 + +	+ + +	+ +	++++	+++	+ +	++++	++++	+++	++++	+++	+++	+ +	++++	 + +	+++	+++	 + +	+++	++	+ +	+ +	50 52
Neoplastic nodule Hepatocellular carcinoma Bile duct Pancreas Acuar cell adenoma	x + -	+ +	x + +	X X + +	+ +	+ +	+ + ¥	+ +	+ +	+ +	X X + +	x + +	+ +	+ +	x + +	x + +	x + +	x + + x	x + +	x + +	+ +	+ +	x + +	+ +	+ +	x + +	15 3 52 48 2
Esophagus Stomach Small intestine Large intestine	+	+ - + +	+ + + +	++++	++++	+++-	+++++	+ + + + +	+ + + +	++++-	+ + + +	+ + +	+ + + +	+++	++++	+ + + +	+ + + +	A + + + + +	+ + + +	+ + + +	+ + + +	+++++	++++	+ + + +	+ + +	+ + +	48 44 38 36
URINARY SYSTEM Kidney Sarcoma, NOS	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	51
Kidney/pelvis Transitional cell papilloma Urinary bladder	+	+ +	+ +	+ +	+ +	+ +	+ +	+ +	+ +	+ +	+ +	+ +	+ +	+ +	+ +	+ +	+ +	+ +	+ +	+ +	+ +	+ +	+ +	+ +	+ +	+ +	51 1 50
ENDOCRINE SYSTEM Pituitary Adenoma, NOS	+	+	+	+	+	+	+	+	+	+	*	+	+	* X	+	+	+	*	+	+	+ x	+	+	* x	+	+	52 9
Adrenal Pheochromocytoma Thyroid	+	+	+	+ X +	+	* _	* +	+	* * +	* -	+ X +	++	* *	++	* *	+	* *	+	++	* *	+	+	++	++	+ X +	* * +	51 18 35
Parathyroid Adenoma, NOS	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	50 2
Islet cell adenoma Islet cell carcinoma		Ŧ	Ŧ	Ŧ	Ŧ	Ŧ	+	٣	Ŧ	+	Ŧ	Ŧ	Ŧ	x	x	Ŧ	x	x	Ŧ	т	+	*	Ŧ	Ŧ	Ŧ	Ŧ	48
REPRODUCTIVE SYSTEM Mammary gland Fibroadenoma	N	+	N	+	+	+	+	N	N	+	N	N	+	N	N	N	+	N	* x	N	N	N	N	+	N	N	*52
Interstitial cell tumor Prostate Preputial/clitoral gland	+ X + N	+ X + N	+ X + N	+ X + N	+ X + N	+ X + N	+ X + N	+ N	+ X + N	* + N	+ X + N	+ X + N	+ X + N	+ X + N	+ X + N	+ X + N	+ X + N	+ X + N	+ X + N	+ X + N	+ X + N	+ X + N	* * N	+ X + N	+ X + N	+ + + N	39 52 *52
Adenoma, NOS NERVOUS SYSTEM					_				-				X		X												
Brain Ghoma, NOS	+	+	+	+	+	+	+	+	+	+	+	+	* X	+	+	+	+	+	+	+	+	+	+	+	+	+	52 2
SPECIAL SENSE ORGANS Harderian gland Carcinoma, 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	N	*52
Zymbal gland Carcinoma, NOS Squamous cell carcinoma Sebaceous adenoma	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	N	*52 1 1 1
BODY CAVITIES Tunica vaginalis Mesothelioma, NOS	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	*52
ALL OTHER SYSTEMS Multiple organs, NOS Malignant lymphoma, NOS Leukemia, mononuclear cell	N X	N	N X	N	N	N X	N	N X	N	N	N	N	N	N X	N	N	N	N X	N X	N X	N	N	N X	N X	N	N	*52 1 19

## TABLE A2. INDIVIDUAL ANIMAL TUMOR PATHOLOGY OF MALE RATS IN THE TWO-YEAR FEEDSTUDY OF MIREX: 50 ppm

ANIMAL NUMBER	8 8 5	8 0 3	8 2 9	8 2 7	8 1 7	8 8 1	7 9 5	8 6 9	7 9 7	8 0 9	8 1 9	8 1 5	8 7 1	8 7 9	8 0 5	8 4 1	8 5 9	8 7 5	7 9 9	8 0 1	8 7 7	8 3 1	8 3 7	8 4 9	8 8 7	8 0 7
WEEKS ON STUDY	0 3 2	0 3 6	0 6 1	0 6 6	0 7 6	0 8 0	0 8 2	0 8 3	0 8 6	0 8 7	0 8 7	0 9 0	0 9 0	0 9 3	0 9 5	0 9 5	0 9 5	0 9 5	0 9 6	0 9 6	0 9 6	0 9 7	0 9 7)	0 9 7	0 9 7	0 9 9
INTEGUMENTARY SYSTEM Skin Keratoacanthoma Subcutaneous tissue Fibroma	++++	+ +	+ +	+ +	+ +	+ +	++	+ +	+ +	+ +	+ +	N N	+ +	+ +	+ +	++	+ +	+ +	+ +	+	+ +	* *	+ + X	++	+ +	+++
RESPIRATORY SYSTEM Lungs and bronchi Alveolar/bronchiolar adenoma Alveolar/bronchiolar carcinoma Trachea	+	+	++	++	+	+	-+	+	+	+	+	+	+	+	+	+	+	+	++	+	+	++	++	+	+ X +	+ X +
HEMATOPOIETIC SYSTEM Bone marrow Spleen Malignant lymphoma, NOS Leukema, mononuclear ceil Lymph nodes Thymus	+++++++++++++++++++++++++++++++++++++++	++++-	++++	+ + + +	+ +	+ + +	+ + +	+ + +	+ +	++++	+ + + +	+ + +	+++++	+ + + +	+ + +	- x -	+ + +	+++++++++++++++++++++++++++++++++++++++	+ + +	+ + +	+ + +	+ + +	+ + +	++++	+ + + -	+ + +
CIRCULATORY SYSTEM Heart		+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+
DIGESTIVE SYSTEM Salvary gland Lvver Neoplastic nodule Hepatocellular carcinoma Bue duct	++++++	+++++	+++++	+ + X +	 + +	+++++	+ + +	++++	+ + X +	+++++	+++++	++++	+++++	+++++	+ + X +	+ + X X +	+ + X +	+ + X +	+ + X +	+	+++++	+ + X +	++++	+ + x +	+ + X +	++++
Pancreas Acınar cell adenoma Esophagus Stomach Papillomatosıs Small ıntestıne Large intestine	; +   -   +   +	+ + + + -	+ ++ -+	++++++	+ -+ +	+ + + +	+ - -	+++	+	+ + - -	+ + + +	+ + + + +	+ ++	+ + + -	+ + + +	+	+ + + +	+ -+ +	+ + +	+ + + + + + + + + + + + + + + + + + +	+ + + -	+	+++	+	+ + + +	+ + + +
URINARY SYSTEM Kıdney Kıdney/pelvıs Transticonal cell papılloma Urınary bladder	+++++++++++++++++++++++++++++++++++++++	+ + +	+ + +	+++++++	++++++	+ + +	++++	+ + +	++++++	+ + +	+ + +	+ + +	+++	++++++	+ + +	+ + +	+ + +	+++++	++++++	+ + +	+++++	+++++++	+ + +	+ + +	+ + +	+ + +
ENDOCRINE SYSTEM Pituitary Adenoma, NOS		-	+	+	-	+	_	+	+	-	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+
Adrenal Cortical adenoma Pheochromocytoma Pheochromocytoma, malignant Thyroid Follicular cell adenoma	+	+	+	+	+	+ X +	++	+	-	+ X +	+ X +	+	++	++	+ X +	+	++	+	+	+ X +	+ X +	+ X +	+	+	+ X +	+ + X
Folheular cell carcinoma Parathyroid Adenoma, NOS Pancreatic islets Islet cell adenoma Islet cell carcinoma	+	+ +	+ +	+ +	+	+ +	+ -	+ +	- +	- +	+ +	+ +	+ +	+ +	+ +	+ +	+ +	+ +	+ +	- +	+ +	+ +	+ +	+ +	+ X +	+ +
REPRODUCTIVE SYSTEM Mammary gland Testus Interstutial cell tumor Prostate Adenoma, NOS	+++++++++++++++++++++++++++++++++++++++	N + +	+ + +	+ + 	+++++	+ + +	+ - -	N + X	N + X +	+++++	+ + +	N + X +	+ + X + X	+ + X +	+ + X +	N + X +	+ + X -	+ + X +	+ + X +	+ + +	+ + X +	+ + X +	+ + X +	+ + X +	N + X -	+ + X +
NERVOUS SYSTEM Brain	+	+	+	+	+	+	_	+	+	_	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+
SPECIAL SENSE ORGANS Zymbal gland Sebaceous adenoma	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
MUSCULOSKELETAL SYSTEM Bone Liposarcoma	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	N
ALL OTHER SYSTEMS Multiple organs, NOS Mesothehoma, NOS Leukemia, mononuclear cell	N	N	N	N X	N X	N	N	N	N	N	N X	N	N X	N	N	N	N	N	N	N	N X	N	N X	N	N	N X

+: Tissue examined microscopically
-: Required tissue not examined microscopically
X: Tumor incidence
N: Necropsy, no autolysis, no microscopic examination
S: Animal missexed

No tissue information submitted C: Necropsy, no histology due to protocol A: Autolysis M: Animal missing B: No necropsy performed

### TABLE A2. INDIVIDUAL ANIMAL TUMOR PATHOLOGY OF MALE RATS: 50 ppm (Continued)

ANIMAL NUMBER	8 3 9	8 6 7	8 4 3	8 4 5	8 7 3	7 9 3	8 5 5	8 5 7	8 1 3	8 5 3	8 9 5	8 2 1	8 6 1	8 6 3	8 1 1	8 2 3	8 2 5	8 3 3	8 3 5	8 4 7	8 5 1	8 6 5	8 8 3	8 8 9	8 9 1	8 9 3	TOTAL:
WEEKS ON STUDY	0 9 9	0 9 9	1 0 0	1 0 1	1 0 1	1 0 2	1 0 2	1 0 2	1 0 3	1 0 3	1 0 3	1 0 5	1 0 5	1 0 5	1 0 6	TISSUES											
INTEGUMENTARY SYSTEM Skin	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	*52
Keratoacanthoma Subcutaneous tissue Fibroma	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	*52 1
RESPIRATORY SYSTEM Lungs and bronch Alveolar/bronchiolar adenoma	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	51 1
Alveolar/bronchiolar carcinoma Trachea	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	50
HEMATOPOIETIC SYSTEM Bone marrow Spleen	+++++	+++	 + +	+++	+++	+++	+++	+++	+++	+++	++++	++++	+++	+++	+++	+++	+++	+++	++	+++	+++	+++	+++	+++	+++	++++	51 52
Malıgnant lymphoma, NOS Leukemia, mononuclear cell							x																				1
Lymph nodes Thymus Papillary carcinoma	++	+ + X	+ +	+-	+ +	+ +	+ +	+	+ +	+ +	48 41 1																
CIRCULATORY SYSTEM Heart	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	52
DIGESTIVE SYSTEM Salvary gland	+	+	+	+		+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	51
Liver Neoplastic nodule	x +	+	*	+	+	* X	*	+	*	* X	+	+	+	*	*	* x	+	*	* X	* X	+	+	*	*	×	*	52 26
Hepatocellular carcinoma Bile duct Pancreas	++++	+++	++	+ +	+++	+	+++	+	++	+	X + +	+	+	+ +	+	++	+ +	+	+ +	++	× + +	+++	++	+++	X + +	+	4 52 51
Acınar cell adenoma Esophagus	+	÷	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	X	+	+	+	+	+	1 46
Stomach Papillomatosis	+	+	+	+	+	_	+	+	-	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	44
Large intestine	+	+	+	+	+	-	+	+	=	_	+	+	+	+	_	+	+	+	+	+	+	+	+	+	-	+	30
URINARY SYSTEM Kidney	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	52
Kidney/pelvis Transitional cell papilloma Urinary bladder	+	+	+	+	* *	+	+	+	+	+ X +	+	+	+	+	+	+	+	+	* *	+	+	+	+	++	+	++	52 3 49
ENDOCRINE SYSTEM					· · ·																						
Adenoma, NOS	+	+	+	x x	+	x x	+	+	+	+	+	+	+	+	+	+	+	x x	+	+	×	+	+	+	+	+	47 4 51
Cortical adenoma Pheochromocytoma	x	,	x	,	,	,	x	x	x	,	,	x	x	x	x	,	,	x	,	,	,	,	,	,	x	x	
Pheochromocytoma, malignant Thyroid	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	1 49
Follicular cell adenoma Follicular cell carcinoma Parathymud	1	+	Ŧ	Ŧ	+	÷	х +	+	Ŧ	+	_	+	Ŧ	х +	+	+	÷	+	X	_	Ŧ	+	+	+	÷	+	3 1 45
Adenoma, NOS Pancreatic islets	+	+	+	+	+	+	•	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	1 51
Islet cell adenoma Islet cell carcınoma														x		X	X	x				X			X		5 1
REPRODUCTIVE SYSTEM Mammary gland	+	+	N	N	+	+	+	N	+	N	+	N	N	+	+	N	N	N	+	N	N	+	N	N	+	N	*52
Testis Interstitial cell tumor	x +	x X	*	x+	x+	x+	x x	*	x+	x x	x+	x x	*	x,	x x	x x	x+	×	x x	x x	51 42						
Adenoma, NOS	x	-	Ŧ	+	- <b>T</b>	+		Ŧ	Ŧ	+	+	x	+	+	+	Ŧ	Ŧ	Ŧ	Ŧ	Ŧ	Ŧ	т 	Ŧ	-	· ·	Ŧ	3
NERVOUS SYSTEM Brain	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	50
SPECIAL SENSE ORGANS Zymbal gland Sebaceous adenoma	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	N	*52
MUSCULOSKELETAL SYSTEM Bone Liposarcoma	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N X	N	N	N	N	*52 1
ALL OTHER SYSTEMS Multiple organs, NOS Mesothelioma, NOS Leukemia, mononuclear cell	N	N	N	N X	N	N	N	N	N	N X	N	N	N	N	N	N	N X	N	N	N	N	N	N	N	N	N	*52 1 9
	I																							_			. I

## TABLE A3. ANALYSIS OF PRIMARY TUMORS IN MALE RATS IN THE TWO-YEAR FEED STUDY OF MIREX

	Control	0.1 ppm	1 ppm	10 ppm	<b>2</b> 5 ppm	50 ppm
Skin: Papilloma or Squamous Cell	Papilloma o	r Carcinoma		<u></u>	<u></u>	
Overall Rates (a)	3/52 (6%)	0/52 (0%)	1/52(2%)	1/52 (2%)	1/52(2%)	0/52(0%)
Adjusted Rates (h)	6.8%	0.0%	2.8%	2.7%	5.3%	0.0%
Terminal Rates (c)	3/44(7%)	0/37(0%)	1/36 (3%)	1/37 (3%)	1/19 (5%)	0/15(0%)
Week of First Observation	105		105	105	105	0,20 (0,0)
Life Table Tests (d)	P = 0.458N	P = 0.153N	P = 0.379N	P = 0.369N	P = 0.629 N	P = 0.361 N
Incidental Tumor Tests (d)	P = 0.458N	P = 0.153N	P = 0.379N	P = 0.369N	P = 0.629 N	P = 0.361 N
Cochran-Armitage Trend Test (d)	P = 0.197N		1 0101011			
Fisher Exact Test (d)		P = 0.121 N	P = 0.309N	P = 0.309 N	P = 0.309 N	P = 0.121 N
Subcutaneous Tissue: Fibroma						
Overall Rates (a)	4/52(8%)	4/52 (8%)	3/52 (6%)	7/52 (13%)	3/52 (6%)	1/52 (2%)
Adjusted Rates (b)	8.3%	9.8%	8.3%	16.8%	9.4%	3.2%
Terminal Rates (c)	1/44(2%)	2/37 (5%)	3/36(8%)	4/37 (11%)	1/19 (5%)	0/15(0%)
Week of First Observation	84	101	105	79	74	97
Life Table Tests (d)	P = 0.452N	P = 0.568	P = 0.609 N	P = 0.196	P = 0.527	P = 0.463N
Incidental Tumor Tests (d)	$P = 0.041 \mathrm{N}$	P = 0.440 N	P = 0.511N	P = 0.414	P = 0.136N	P = 0.009 N
Cochran-Armitage Trend Test (d)	P = 0.102N					
Fisher Exact Test (d)		P = 0.642	P = 0.500N	P = 0.263	P = 0.500 N	P = 0.181 N
Subcutaneous Tissue: Fibroma or 1	Fibrosarcom	a				
Overall Rates (a)	4/52 (8%)	4/52 (8%)	3/52 (6%)	7/52(13%)	4/52 (8%)	1/52 (2%)
Adjusted Rates (b)	8.3%	9.8%	8.3%	16.8%	11.2%	3.2%
Terminal Rates (c)	1/44(2%)	2/37 (5%)	3/36 (8%)	4/37 (11%)	1/19(5%)	0/15(0%)
Week of First Observation	84	101	105	79	71	97
Life Table Tests (d)	P = 0.513N	P = 0.568	P = 0.609 N	P = 0.196	P = 0.376	P = 0.463N
Incidental Tumor Tests (d)	P = 0.054 N	P = 0.440 N	P = 0.511N	P = 0.414	P = 0.182N	P = 0.009 N
Cochran-Armitage Trend Test (d)	P = 0.131 N					_
Fisher Exact Test (d)		P = 0.642	P = 0.500N	P = 0.263	P = 0.642	P = 0.181N
Subcutaneous Tissue: Fibroma, San	coma, or Fil	orosarcoma				
Overall Rates (a)	4/52(8%)	4/52 (8%)	3/52 (6%)	8/52 (15%)	4/52 (8%)	1/52 (2%)
Adjusted Rates (b)	8.3%	9.8%	8.3%	18.4%	11.2%	3.2%
Terminal Rates (c)	1/44(2%)	2/37 (5%)	3/36 (8%)	4/37 (11%)	1/19(5%)	0/15(0%)
Week of First Observation	84	101	105	61	71	97
Life Table Tests (d)	P = 0.490N	P = 0.568	P = 0.609 N	P = 0.132	P = 0.376	P = 0.463N
Incidental Tumor Tests (d)	P = 0.047 N	P = 0.440N	P = 0.511N	P = 0.300	P = 0.182N	P = 0.009N
Cochran-Armitage Trend Test (d)	P = 0.125 N					
Fisher Exact Test (d)		P = 0.642	P = 0.500 N	P = 0.179	P = 0.642	P = 0.181N
Integumentary System: Fibroma or	Fibrosarco	na				
Overall Rates (a)	4/52 (8%)	4/52 (8%)	4/52 (8%)	7/52 (13%)	4/52 (8%)	1/52 (2%)
Adjusted Rates (b)	8.3%	9.8%	11.1%	16.8%	11.2%	3.2%
Terminal Rates (c)	1/44(2%)	2/37 (5%)	4/36 (11%)	4/37 (11%)	1/19 (5%)	0/15 (0%)
Week of First Observation	84	101	105	79	71	97
Life Table Tests (d)	P = 0.471 N	P = 0.568	P = 0.526	P = 0.196	P = 0.376	P = 0.463N
Incidental Tumor Tests (d)	P = 0.046N	P = 0.440 N	P = 0.623	P = 0.414	P = 0.182N	P = 0.009 N
Cochran-Armitage Trend Test (d) Fisher Exact Test (d)	P = 0.105N	P = 0.642	P = 0.642	P = 0.263	P = 0.642	P = 0.181 N
		1 -0.042	r — 0.042	1 - 0.200	I — V.U44	r0.1011
Integumentary System: Fibroma, S	arcoma, or F	ibrosarcoma	1/59 (20/-)	8/59 (1504)	4/59 (20%)	1/59 (9%)
Adjusted Rates (b)		-+/02(070) 0.80%	11 104	18 40	11 90%	3.2%
Terminal Rates (0)	1/11 (904)	9/37 (E0-)	11.170 1/26 (110/2)	10.4270 1/27(110/_)	1/10/50/	0.2 %
Wook of Finat Observation	1/4-4-(2%) Q/	2/37 (3%)	4/30(11%)	4+/3/(11%) 61	1/10(0%) 71	0/13(0%)
ife Table Tests (4)	04 D-0 /51N		100 D - 0 596	01 D=0 129	11 D-0.276	0-0163N
Life Table Tests (d) Incidental Tumor Tests (d)	r = 0.401 N D = 0.040 N	P = 0.000	r = 0.020	F = 0.132	F - U.3 (0 D - 0 199N	D = 0.403 N
1100000000000000000000000000000000000	r = 0.040 N	r = 0.440 N	r = 0.023	P = 0.300	F = 0.182 N	r = 0.009N
Cochran-Armitage Trend Test (d)	r = 0.100 N	D-0.049	D-0.649	B-0 170	D-0649	D-0 191N
risner Exact Test (d)		r = 0.642	r = 0.042	F=0.179	P = 0.042	r = 0.101 N

	Control	0.1 ppm	1 ppm	10 ppm	25 ppm	50 ppm
Hematopoietic System: Mononucle	ar Cell Leuk	emia		· · · · · · · · · · · · · · · · · · ·		
Overall Rates (a)	16/52 (31%)	17/52 (33%)	15/52 (29%)	22/52 (42%)	21/52 (40%)	10/52 (19%)
Adjusted Rates (b)	35.4%	38.5%	36.9%	48.6%	60.7%	31.1%
Terminal Rates (c)	15/44 (34%)	11/37 (30%)	11/36 (31%)	14/37 (38%)	8/19 (42%)	1/15(7%)
Week of First Observation	85	85	84	91	58	66
Life Table Tests (d)	P = 0.046	P = 0.317	P = 0.420	P = 0.066	P = 0.001	P = 0.264
Incidental Tumor Tests (d)	P = 0.101 N	P = 0.484	P = 0.573	P = 0.160	P = 0.152	P = 0.195N
Cochran-Armitage Trend Test (d) Fisher Exact Test (d)	P = 0.122N	P=0.500	P = 0.500 N	P = 0.154	P=0.206	P = 0.129N
Liver: Neoplastic Nodule						
Overall Rates (a)	3/52 (6%)	5/52 (10%)	5/52 (10%)	14/52 (27%)	15/52(29%)	26/52 (50%)
Adjusted Rates (b)	6.8%	12.6%	13.9%	36.5%	60.6%	81.4%
Terminal Rates (c)	3/44(7%)	4/37 (11%)	5/36 (14%)	13/37 (35%)	10/19(53%)	10/15(67%)
Week of First Observation	105	85	105	91	98	66
Life Table Tests (d)	P<0.001	P = 0.279	P = 0.251	P = 0.001	P<0.001	P<0.001
Incidental Tumor Tests (d)	P<0.001	P = 0.278	P = 0.251	P = 0.002	P<0.001	P<0.001
Cochran-Armitage Trend Test (d)	P<0.001					
Fisher Exact Test (d)		P = 0.358	P = 0.358	P = 0.003	P = 0.002	P<0.001
Liver: Hepatocellular Carcinoma	0/50/00	0/59 (00)	9/59 (401)	0/50 (401)	0/59 (00)	ALEO (00)
Overall Rates (a)	3/52 (6%)	0/52(0%)	2/52(4%)	2/52 (4%)	3/52(6%)	4/52 (8%)
Adjusted Rates (b)	0.8% 2/44 (70)	0.0%	0.0% 9/9 <i>C (CM</i> )	0.4% 0/27 (EM)	12,4%	20.3%
Week of First Observation	3/44 (7%)	0/37(0%)	2/36 (6%)	2/3/(3%)	1/19(0%)	2/13(13%)
Life Table Tests (d)	P = 0.002	P=0.153N	P = 0.591 N	P = 0.579N	P = 0.302	P = 0.094
Incidental Tumor Tests (d)	P = 0.002 P = 0.047	P = 0.153N	P = 0.591 N	P = 0.579N	P = 0.502 P = 0.601	P = 0.297
Cochran-Armitage Trend Test (d)	P = 0.105	1 = 0.10010	1 = 0.00110	1 = 0.07010	1 - 0.001	1-0.201
Fisher Exact Test (d)	1 = 0.105	P = 0.121 N	P = 0.500 N	P = 0.500 N	P=0.661	P = 0.500
Liver: Neoplastic Nodule or Hepa	tocellular Ca	rcinoma				
Overall Rates (a)	6/52 (12%)	5/52 (10%)	6/52 (12%)	15/52 (29%)	16/52 (31%)	28/52 (54%)
Adjusted Rates (b)	13.6%	12.6%	16.7%	39.2%	62.1%	86.1%
Terminal Rates (c)	6/44 (14%)	4/37 (11%)	6/36 (17%)	14/37 (38%)	10/19 (53%)	11/15(73%)
Week of First Observation	105	85	105	91	98	66
Life Table Tests (d)	P<0.001	P = 0.607 N	P = 0.475	P = 0.008	P<0.001	P<0.001
Incidental Tumor Tests (d)	P<0.001	P = 0.609 N	P = 0.475	P = 0.010	P<0.001	P<0.001
Cochran-Armitage Trend Test (d)	P<0.001					
Fisher Exact Test (d)		P = 0.500 N	P = 0.620	P = 0.024	P=0.015	P<0.001
Pancreas: Acinar Cell Adenoma	9/E1 (001)	0/50 (001)	A/E1 (00)	1/47 (001)	9//19 (401)	1/51 (901)
Overall Rates (a)	3/51 (6%)	0/50(0%)	0/51(0%)	1/47 (2%)	2/48 (4%)	1/31 (2%)
Adjusted Rates (b)	0.0% 0/44 (EM)	0.0%	0.0%	2.8%	10.0% 1/10(5%)	1/15 (70/_)
Wook of First Observation	2/44 (0%)	0/37 (0%)	0/33(0%)	105	103	105
Life Table Tests (d)	P = 0.170	P-0 155N	D-0 169N	P = 0.284 N	D-0 407	P = 0.710N
Incidental Tumor Tosta (d)	P = 0.170 P = 0.479	P = 0.135 N P = 0.100 N	P = 0.165N P = 0.166N	P = 0.304 M	P-0.497	P = 0.715N P = 0.457N
Cochran Armitage Trend Test (d)	P = 0.472 P = 0.594	F=0.100N	F=0.100N	F = 0.33014	F -0.00914	r - 0.40714
Fisher Exact Test (d)	F = 0.324	P = 0.125N	P = 0.121 N	P = 0.340N	P=0.529N	P = 0.309 N
Kidney: Transitional Cell Papillon	ıa					
Overall Rates (a)	0/51 (0%)	0/51 (0%)	0/52 (0%)	0/52 (0%)	1/51 (2%)	3/52 (6%)
Adjusted Rates (b)	0.0%	0.0%	0.0%	0.0%	3.0%	15.7%
Terminal Rates (c)	0/44 (0%)	0/37 (0%)	0/36 (0%)	0/37 (0%)	0/19(0%)	1/15 (7%)
Week of First Observation			<i>.</i> .		98	101
Life Table Tests (d)	P<0.001	(e)	(e)	(e)	P = 0.425	P = 0.018
Incidental Tumor Tests (d)	P = 0.018	(e)	(e)	(e)	P = 0.742	P = 0.193
Cochran-Armitage Trend Test (d)	P = 0.002	( )				D -0.105
risher Exact Test (d)		(e)	(e)	(e)	P = 0.500	P = 0.125

## TABLE A3. ANALYSIS OF PRIMARY TUMORS IN MALE RATS IN THE TWO-YEAR FEED STUDY OFMIREX (Continued)

	Control	0.1 ppm	1 ppm	10 ppm	25 ppm	50 ppm
Pituitary Gland: Adenoma						
Overall Rates (a)	12/52 (23%)	11/52(21%)	12/51 (24%)	10/50 (20%)	9/52(17%)	3/47 (6%)
Adjusted Rates (b)	25.4%	27.8%	30.3%	26.7%	34.8%	15.0%
Terminal Rates (c)	9/44 (20%)	9/37 (24%)	9/36 (25%)	9/36 (25%)	5/19 (26%)	1/15(7%)
Week of First Observation	98	97	84	98	83	101
Life Table Tests (d)	P = 0.381 N	P = 0.517	P = 0.372	P = 0.586	P = 0.205	P = 0.373N
Incidental Tumor Tests (d)	P = 0.025N	P = 0.452N	P = 0.434	P = 0.488N	P = 0.434 N	P = 0.016N
Cochran-Armitage Trend Test (d)	P = 0.009 N					
Fisher Exact Test (d)		P = 0.500 N	P = 0.571	P = 0.446N	P = 0.313 N	P = 0.019N
Pituitary Gland: Adenoma or Caro	cinoma					
Overall Rates (a)	12/52(23%)	11/52(21%)	13/51 (25%)	10/50 (20%)	9/52 (17%)	3/47 (6%)
Adjusted Rates (b)	25.4%	27.8%	31.9%	26.7%	34.8%	15.0%
Terminal Rates (c)	9/44 (20%)	9/37 (24%)	9/36(25%)	9/36 (25%)	5/19 (26%)	1/15 (7%)
Week of First Observation	98	97	84	98	83	101
Life Table Tests (d)	P = 0.338N	P = 0.517	P = 0.293	P = 0.586	P = 0.205	P = 0.373N
Incidental Tumor Tests (d)	P = 0.018N	P = 0.452N	P = 0.394	P = 0.488N	P = 0.434N	P = 0.016N
Cochran-Armitage Trend Test (d)	P = 0.007 N					
Fisher Exact Test (d)		P = 0.500 N	P = 0.478	P = 0.446 N	P = 0.313N	P = 0.019N
Adrenal Gland: Adenoma or Corti	cal Adenoma	0.50.000	0.000		0.51.00	
Overall Rates (a)	0/51 (0%)	2/52 (4%)	3/52 (6%)	0/52(0%)	0/51 (0%)	1/51 (2%)
Adjusted Rates (b)	0.0%	4.0%	8.3%	0.0%	0.0%	3.2%
Terminal Rates (c)	0/44(0%)	0/37 (0%)	3/36 (8%)	0/37 (0%)	0/19(0%)	0/15(0%)
Week of First Observation	D 0 50 (1)	85	105		( )	97
Life Table Tests (d)	P = 0.524N	P = 0.242	P = 0.088	(e)	(e)	P = 0.413
Incidental Tumor Tests (d)	P = 0.245N	P = 0.332	P = 0.088	(e)	(e)	P = 0.807
Fisher Exact Test (d)	P = 0.327 N	P = 0.252	P=0.125	(e)	(e)	P = 0.500
Adrenal Gland: Cortical Adenoma	or Carcinon	19				
Overall Rates (a)	0/51(0%)	3/52 (6%)	2/52(4%)	1/52(2%)	0/51(0%)	1/51(2%)
Adjusted Rates (b)	0.0%	6.3%	5.6%	27%	0.0%	3.2%
Terminal Rates (c)	0/44(0%)	0/37(0%)	2/36(6%)	1/37(3%)	0/19(0%)	0/15(0%)
Week of First Observation	0/44(0/0)	85	105	105	0,10 (0,0)	97
Life Table Tests (d)	P = 0.523N	P = 0.119	P = 0.195	P = 0.465	(e)	P = 0.413
Incidental Tumor Tests (d)	P = 0.020 N	P = 0.231	P = 0.195	P = 0.465	(e)	P = 0.807
Cochran-Armitage Trend Test (d)	P = 0.300N	1 - 0.201	1 = 0.100	1 - 0.400		1 = 0.001
Fisher Exact Test (d)	1 - 0.50010	P = 0.125	P = 0.252	P = 0.505	(e)	P=0.500
Adrenal Gland: Adenoma or Corti	cal Adenoma	or Carcinon	na			
Overall Rates (a)	0/51 (0%)	3/52 (6%)	3/52 (6%)	1/52(2%)	0/51 (0%)	1/51(2%)
Adjusted Rates (b)	0.0%	6.3%	8.3%	2.7%	0.0%	3.2%
Terminal Rates (c)	0/44 (0%)	0/37 (0%)	3/36 (8%)	1/37(3%)	0/19(0%)	0/15(0%)
Week of First Observation		85	105	105		97
Life Table Tests (d)	P = 0.451N	P = 0.119	P = 0.088	P = 0.465	(e)	P = 0.413
Incidental Tumor Tests (d)	P = 0.143N	P = 0.231	P = 0.088	P = 0.465	(e)	P = 0.807
Cochran-Armitage Trend Test (d) Fisher Exact Test (d)	P = 0.226N	P = 0.125	P = 0.125	P = 0.505	(e)	P=0.500
Advanal Claud. Dharahaan a	-				-	
Overall Pates (c)	8/51 (1 <i>60</i> /.)	7/59 (1901)	12/59 (950)	11/59 (910)	18/51 (250-)	19/51 / 2701-
A division of Poten (h)	0/01 (10%) 19.90	1/02(13%)	13/32 (23%)	11/02 (21%)	10/01 (00%) 61 50/	65 904
Aujusted Rates (D)	10.2%	10.4%	32.0% 0/26 (950)	20.0% 0/07 (00// )	01.070	00.4%
Wook of First Observation	0/44(10%) 105	4/3/(11%) 96	9/30(25%) 96	0/3/(22%) 70	9/19(4/%) 96	1/10(4/%) 90
week of rirst Ooservation Life Table Tests (4)	100 D < 0.001	00 D - 0 500	00 D - 0 075	19 D-0109	00 D < 0 001	
Life Table Tests (d) Incidental Tumor Tests (d)	P<0.001	P = 0.599 P = 0.594 N	F = 0.075 P = 0.117	r = 0.192 P = 0.263	P = 0.001	P = 0.001
Cochran, Armitego Trand Tost (d)	P<0.001	F = 0.3241	r = 0.117	r - 0.203	r - 0.00a	r - 0.004
Fisher Exact Test (d)	1 ~ 0.001	P = 0.484N	P = 0.177	P = 0.323	P = 0.020	P = 0.012
FISHEL PAGULLESU(U)		1 -0.40411	1 - 0.177	1 - 0.020	1 - 0.020	1 - 0.012

## TABLE A3. ANALYSIS OF PRIMARY TUMORS IN MALE RATS IN THE TWO-YEAR FEED STUDY OF MIREX (Continued)

	Control	<b>0.1 ppm</b>	1 ppm	10 ppm	25 ppm	50 ppm
Adrenal Gland: Pheochromocytom	a or Maligna	nt Pheochro	mocytoma			
Overall Rates (a)	10/51 (20%)	7/52 (13%)	13/52 (25%)	12/52 (23%)	18/51 (35%)	20/51 (39%)
Adjusted Rates (b)	22.7%	16.4%	32.0%	29.2%	61.5%	66.4%
Terminal Rates (c)	10/44 (23%)	4/37 (11%)	9/36 (25%)	9/37 (24%)	9/19 (47%)	7/15 (47%)
Week of First Observation	105	86	86	79	86	80
Life Table Tests (d)	P<0.001	P = 0.423N	P = 0.164	P = 0.258	P<0.001	P<0.001
Incidental Tumor Tests (d)	P<0.001	P = 0.334N	P = 0.236	P = 0.336	P = 0.008	P = 0.009
Cochran-Armitage Trend Test (d)	P = 0.001					
Fisher Exact Test (d)		P = 0.283N	P = 0.338	P = 0.425	P = 0.060	P = 0.025
Thyroid Gland: Follicular Cell Ad	enoma					
Overall Rates (a)	0/51 (0%)	0/50 (0%)	0/47 (0%)	1/47(2%)	0/35(0%)	3/49 (6%)
Adjusted Rates (b)	0.0%	0.0%	0.0%	2.7%	0.0%	14.4%
Terminal Rates (c)	0/44 (0%)	0/37 (0%)	0/36(0%)	1/37 (3%)	0/18 (0%)	1/15(7%)
Week of First Observation				105		99
Life Table Tests (d)	P<0.001	(e)	(e)	P = 0.465	(e)	P = 0.024
Incidental Tumor Tests (d)	P = 0.017	(e)	(e)	P = 0.465	(e)	P = 0.193
Cochran-Armitage Trend Test (d)	P = 0.006					
Fisher Exact Test (d)		(e)	(e)	P = 0.480	(e)	P = 0.114
Thyroid Gland: Follicular Cell Ad	enoma or Cai	rcinoma				
Overall Rates (a)	0/51 (0%)	1/50 (2%)	0/47 (0%)	1/47(2%)	0/35(0%)	4/49 (8%)
Adjusted Rates (b)	0.0%	2.7%	0.0%	2.7%	0.0%	20.5%
Terminal Rates (c)	0/44(0%)	1/37 (3%)	0/36(0%)	1/37 (3%)	0/18 (0%)	2/15 (13%)
Week of First Observation		105		105		99
Life Table Tests (d)	P<0.001	P = 0.465	(e)	P = 0.465	(e)	P = 0.005
Incidental Tumor Tests (d)	P = 0.004	P = 0.465	(e)	P = 0.465	(e)	P = 0.048
Cochran-Armitage Trend Test (d)	P = 0.005					
Fisher Exact Test (d)		P = 0.495	(e)	P = 0.480	(e)	P = 0.054
Thyroid Gland: C-Cell Adenoma						
Overall Rates (a)	5/51 (10%)	4/50(8%)	2/47(4%)	5/47(11%)	3/35 (9%)	0/49 (0%)
Adjusted Rates (b)	11.4%	10.3%	5.6%	13.1%	16.7%	0.0%
Terminal Rates (c)	5/44 (11%)	3/37(8%)	2/36(6%)	4/37 (11%)	3/18(17%)	0/15(0%)
Week of First Observation	105	103	105	102	105	
Life Table Tests (d)	P = 0.338N	P = 0.603 N	P = 0.304 N	P = 0.517	P = 0.442	P = 0.206 N
Incidental Tumor Tests (d)	P = 0.181 N	P = 0.550N	P = 0.304 N	P = 0.541	P = 0.442	P = 0.206N
Cochran-Armitage Trend Test (d)	P = 0.059 N					
Fisher Exact Test (d)		P = 0.513N	P = 0.253 N	P = 0.576	P = 0.580 N	P = 0.031 N
Thyroid Gland: C-Cell Carcinoma			A.4	A / I = / I = ·	0.00 × .0.2	0.110 (0.27)
Overall Rates (a)	3/51 (6%)	2/50 (4%)	2/47 (4%)	2/47 (4%)	0/35(0%)	0/49(0%)
Adjusted Rates (b)	6.8%	5.4%	5.6%	5.0%	0.0%	0.0%
Terminal Rates (c)	3/44 (7%)	2/37 (5%)	2/36(6%)	1/37 (3%)	0/18(0%)	0/15(0%)
week of First Observation	105	105	105		$\mathbf{D} = 0.01$ eV	D-0 00137
Life fable fests (d) Incidental Tumor Tests (d)	P = 0.149 N D = 0.002 N	P = 0.579N P = 0.579N	P = 0.591 N	P = 0.573N P = 0.54CN	P = 0.316 N D = 0.216 N	P = 0.361 N
Contract 1 umor 1 ests (d)	P = 0.093 N	P = 0.579 N	P=0.591N	P = 0.546 N	P = 0.316 N	P = 0.301  N
Fisher Exact Test (d)	P=0.051N	P = 0.509 N	P=0.539N	P = 0.539 N	P = 0.203 N	P = 0.129N
Thyroid Gland: C-Cell Adenome o	r Carcinoma					
Overall Rates (a)	8/51 (16%)	6/50 (19%)	1/17 (9%)	7/17 (15%)	3/35 (9%)	0/49(0%)
Adjusted Rates (b)	18 90%-	15 60-	11 10/-	1779/	167%	0.0%
Tarminal Pates (p)	10.470 Q/AA (1001)	10.070 5/07 (1.40/)	11,170 1/96 (110/)	5/97 (1 A MA)	10, (70 9/19 (1770)	0/15/00/
Wook of First Observation	0/44(10%) 105	0/07(14%) 102	4/30(11%) 105	3/3/(14%) 100	0/10(1(%)) 105	0/10(0%)
ife Table Tests (3)	100 D=0.100N	100	100 D-0.0073	100	100 D-0 500N	D-0.0001
Life Table Tests (d) Incidental Tumor Tests (d)	P = 0.126 N P = 0.042 N	P = 0.521 N	P = 0.287 N D = 0.997 N	r = 0.580	P = 0.588IN	P = 0.092N
Coobran Armite as Trand Tost (3)	P = 0.043 N P = 0.009 N	r = 0.4701	r = 0.20 (IN	r = 0.0041	r=0.9991	F = 0.092 N
Fisher Exact Test (d)	I 0.00914	P = 0.403 N	P = 0.990 N	P = 0.569 N	P = 0.265 N	P = 0.003 N
		* - 0.4001N	1 - 0.4401	* - 0.00914	- U.2UU11	0.000

# TABLE A3. ANALYSIS OF PRIMARY TUMORS IN MALE RATS IN THE TWO-YEAR FEED STUDY OF MIREX (Continued)

	Control	0.1 ppm	1 ppm	10 ppm	25 ppm	50 ppm
Pancreatic Islets: Islet Cell Adence	ma					
Overall Rates (a)	8/51 (16%)	3/50 (6%)	7/51 (14%)	4/47 (9%)	1/48 (2%)	5/51 (10%)
Adjusted Rates (b)	17.1%	8.1%	18.5%	10.5%	5.3%	33.3%
Terminal Rates (c)	6/44 (14%)	3/37 (8%)	5/35 (14%)	3/36 (8%)	1/19 (5%)	5/15 (33%)
Week of First Observation	84	105	90	100	105	105
Life Table Tests (d)	P = 0.246	P = 0.161 N	P = 0.540	P = 0.283N	P = 0.155N	P = 0.248
Incidental Tumor Tests (d)	P = 0.537	P = 0.130N	P = 0.541 N	P = 0.198N	P = 0.046N	P = 0.473
Cochran-Armitage Trend Test (d)	P = 0.235N					
Fisher Exact Test (d)		P = 0.106N	P = 0.500N	P = 0.220N	P = 0.019N	P = 0.277 N
Pancreatic Islets: Islet Cell Carcin	noma					
Overall Rates (a)	6/51 (12%)	15/50 (30%)	4/51 (8%)	9/47 (19%)	5/48 (10%)	1/51 (2%)
Adjusted Rates (b)	13.2%	36.2%	11.4%	24.2%	19.3%	6.7%
Terminal Rates (c)	5/44(11%)	11/37 (30%)	4/35 (11%)	8/36(22%)	3/19 (16%)	1/15(7%)
Week of First Observation	98	97	105	102	71	105
Life Table Tests (d)	P = 0.171 N	P = 0.011	P = 0.521 N	P = 0.170	P = 0.315	P = 0.366N
Incidental Tumor Tests (d)	P = 0.021 N	P = 0.027	P = 0.518N	P = 0.202	P = 0.639	P = 0.216N
Cochran-Armitage Trend Test (d)	P = 0.004 N					
Fisher Exact Test (d)		P = 0.021	P = 0.370 N	P = 0.232	P = 0.543 N	P = 0.056 N
Pancreatic Islets: Islet Cell Adence	oma or Carcino	oma				
Overall Rates (a)	14/51(27%)	18/50 (36%)	11/51(22%)	13/47 (28%)	6/48 (13%)	6/51 (12%)
Adjusted Rates (b)	29.5%	43.6%	29.4%	33.9%	24.4%	40.0%
Terminal Rates (c)	11/44(25%)	14/37 (38%)	9/35 (26%)	11/36 (31%)	4/19 (21%)	6/15 (40%)
Week of First Observation	84	97	90	100	71	105
Life Table Tests (d)	P = 0.429 N	P = 0.133	P = 0.570N	P = 0.455	P = 0.472N	P = 0.474
Incidental Tumor Tests (d)	P = 0.053N	P = 0.249	P = 0.454N	P = 0.572	P = 0.109 N	P = 0.439N
Cochran-Armitage Trend Test (d) Fisher Exact Test (d)	P = 0.003 N	P = 0.239	P = 0.323N	P = 0.580	P = 0.054 N	P = 0.040 N
Mammary: Fibroadenoma						
Overall Rates (a)	1/52(2%)	1/52 (2%)	1/52 (2%)	5/52(10%)	1/52 (2%)	0/52 (0%)
Adjusted Rates (b)	2.3%	2.7%	2.4%	12.9%	5.3%	0.0%
<b>Terminal Rates</b> (c)	1/44(2%)	1/37 (3%)	0/36(0%)	4/37 (11%)	1/19(5%)	0/15(0%)
Week of First Observation	105	105	91	100	105	
Life Table Tests (d)	P = 0.538N	P = 0.723	P = 0.718	P = 0.072	P = 0.564	P = 0.714N
Incidental Tumor Tests (d)	P = 0.354N	P = 0.723	P = 0.663N	P = 0.089	P = 0.564	P = 0.714N
Cochran-Armitage Trend Test (d)	P = 0.226N					
Fisher Exact Test (d)		P = 0.752	P = 0.752	P = 0.102	P = 0.752	P = 0.500N
Preputial Gland: Adenoma or Car	cinoma					
Overall Rates (a)	(f) 2/52 (4%)	0/52 (0%)	2/52(4%)	1/52(2%)	3/52 (6%)	0/52 (0%)
Adjusted Rates (b)	4.5%	0.0%	4.7%	2.7%	13.8%	0.0%
Terminal Rates (c)	2/44 (5%)	0/37 (0%)	1/36 (3%)	1/37 (3%)	2/19 (11%)	0/15(0%)
Week of First Observation	105		57	105	100	
Life Table Tests (d)	P = 0.522	P = 0.277 N	P = 0.637	P = 0.560 N	P = 0.180	P = 0.494N
Incidental Tumor Tests (d)	P = 0.5431	N $P = 0.277N$	P = 0.633 N	P = 0.560 N	P = 0.302	P = 0.494N
Cochran-Armitage Trend Test (d) Fisher Exact Test (d)	P = 0.3821	N $P = 0.248N$	P = 0.691	P = 0.500 N	P = 0.500	P = 0.248N
		- 0.2 1011		- 0.00011	- 0.000	- 0,24011
Prostate: Adenoma	0.50 / 1			0.000	0.00	
Overall Rates (a)	2/50 (4%)	6/50(12%)	4/50 (8%)	2/52 (4%)	0/52(0%)	3/47 (6%)
Adjusted Rates (b)	4.7%	15.4%	11.4%	5.4%	0.0%	12.3%
Terminal Rates (c)	2/43 (5%)	4/36 (11%)	4/35 (11%)	2/37 (5%)	0/19(0%)	1/15(7%)
week of First Observation	105	103	105	105		90
Lite Table Tests (d)	P = 0.464	P=0.091	P = 0.246	P = 0.640	P = 0.431 N	P = 0.187
Incidental Tumor Tests (d)	P = 0.3871	N $P = 0.155$	P = 0.246	P = 0.640	P = 0.431N	P = 0.433
Cochran-Armitage Trend Test (d)	P = 0.2361	N				
Fisher Exact Test (d)		P = 0.134	P = 0.339	P = 0.676 N	P = 0.238N	P = 0.470

# TABLE A3. ANALYSIS OF PRIMARY TUMORS IN MALE RATS IN THE TWO-YEAR FEED STUDY OFMIREX (Continued)

	Control	0.1 ppm	1 ppm	10 ppm	25 ppm	50 ppm
Prostate: Adenoma or Carcinoma				- <u> </u>		
Overall Rates (a)	2/50 (4%)	6/50 (12%)	4/50 (8%)	3/52 (6%)	0/52 (0%)	3/47 (6%)
Adjusted Rates (b)	4.7%	15.4%	11.4%	8.1%	0.0%	12.3%
Terminal Rates (c)	2/43 (5%)	4/36 (11%)	4/35 (11%)	3/37 (8%)	0/19(0%)	1/15(7%)
Week of First Observation	105	103	105	105		90
Life Table Tests (d)	P = 0.457	P = 0.091	P = 0.246	P = 0.431	P = 0.431 N	P = 0.187
Incidental Tumor Tests (d)	P = 0.396N	P = 0.155	P = 0.246	P = 0.431	P = 0.431N	P = 0.433
Cochran-Armitage Trend Test (d)	P = 0.225 N					
Fisher Exact Test (d)		P = 0.134	P = 0.339	P = 0.519	P = 0.238N	P = 0.470
Testis: Interstitial Cell Tumor						
Overall Rates (a)	50/52 (96%)	51/52 (98%)	43/51 (84%)	48/52 (92%)	39/52 (75%)	42/51 (82%)
Adjusted Rates (b)	96.2%	100.0%	100.0%	98.0%	97.5%	100.0%
Terminal Rates (c)	42/44 (95%)	37/37 (100%)	36/36 (100%)	36/37 (97%)	18/19 (95%)	15/15 (100%)
Week of First Observation	72	85	69	85	84	83
Life Table Tests (d)	P<0.001	P = 0.060	P = 0.391	P = 0.158	P<0.001	P<0.001
Incidental Tumor Tests (d)	P = 0.183 N	P = 0.540	P = 0.234N	P = 0.531 N	P = 0.080 N	P = 0.289N
Cochran-Armitage Trend Test (d)	P = 0.003 N					
Fisher Exact Test (d)		P = 0.500	P = 0.043N	P = 0.339N	P = 0.002N	P = 0.024N
All Sites: Benign Tumors						
Overall Rates (a)	52/52(100%)	51/52 (98%)	48/52 (92%)	50/52 (96%)	44/52 (85%)	46/52 (88%)
Adjusted Rates (b)	100.0%	100.0%	100.0%	100.0%	97.8%	100.0%
Terminal Rates (c)	44/44 (100%)	37/37 (100%)	36/36 (100%)	37/37 (100%)	18/19 (95%)	15/15 (100%)
Week of First Observation	72	85	57	7 <del>9</del>	74	80
Life Table Tests (d)	P<0.001	P = 0.110	P = 0.148	P = 0.135	P<0.001	P<0.001
Incidental Tumor Tests (d)	P = 0.091 N	P = 0.500 N	P = 0.366N	P = 0.500 N	P = 0.060 N	P = 0.223N
Cochran-Armitage Trend Test (d)	P = 0.005 N					
Fisher Exact Test (d)		P = 0.500 N	P = 0.059N	P = 0.248N	P = 0.003 N	P = 0.014N
All Sites: Malignant Tumors						
Overall Rates (a)	28/52 (54%)	36/52 (69%)	26/52(50%)	35/52 (67%)	33/52 (63%)	19/52 (37%)
Adjusted Rates (b)	58.2%	74.7%	58.6%	75.9%	80.4%	59.4%
Terminal Rates (c)	24/44 (55%)	25/37(68%)	18/36 (50%)	26/37 (70%)	12/19(63%)	5/15 (33%)
Week of First Observation	85	85	83	61	58	66
Life Table Tests (d)	P = 0.010	P = 0.023	P = 0.351	P = 0.027	P<0.001	P = 0.057
Incidental Tumor Tests (d)	P = 0.016N	P = 0.097	P = 0.489N	P = 0.081	P = 0.247	P = 0.117N
Cochran-Armitage Trend Test (d)	P = 0.010N					
Fisher Exact Test (d)		P = 0.079	P = 0.422N	P = 0.114	P = 0.213	P = 0.058N
All Sites: All Tumors						
Overall Rates (a)	52/52(100%)	51/52(98%)	49/52 (94%)	51/52 (98%)	51/52 (98%)	48/52 (92%)
Adjusted Rates (b)	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%
Terminal Rates (c)	44/44 (100%)	37/37 (100%)	36/36 (100%)	37/37 (100%)	19/19 (100%)	15/15 (100%)
Week of First Observation	72	85	57	61	58	66
Life Table Tests (d)	P<0.001	P = 0.110	P = 0.106	P = 0.097	P<0.001	P<0.001
Incidental Tumor Tests (d)	P = 0.575	P = 0.500 N	P = 0.500 N	(g)	P≈0.814N	P = 0.534N
Cochran-Armitage Trend Test (d)	P = 0.074N					<b>D</b>
Fisher Exact Test (d)		P = 0.500 N	P = 0.122N	P = 0.500 N	$P \approx 0.500 N$	P = 0.059N

### TABLE A3. ANALYSIS OF PRIMARY TUMORS IN MALE RATS IN THE TWO-YEAR FEED STUDY OF MIREX (Continued)

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

(b) Kaplan-Meier estimated tumor incidences at the end of the study after adjusting for intercurrent mortality

(c) Observed tumor incidence at terminal kill

(e) No P value is reported because no tumors were observed in the dosed and control groups.

(f) Includes one diagnosis of papillomatosis

(g) No P value is presented because the tumor incidences in the control and 10-ppm groups were 100% in each of the four time intervals during which tumors were observed

<sup>(</sup>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 nonfatal. The Cochran-Armitage and Fisher exact tests compare directly the overall incidence rates. A negative trend or lower incidence in a dosed group is indicated by (N).

### TABLE A4a. HISTORICAL INCIDENCE OF HEPATOCELLULAR TUMORS IN MALE F344/N RATS RECEIVING NO TREATMENT (a,b)

	Inc	cidence in Control	5
	Neoplastic Nodule	Carcinoma	Neoplastic Nodule or Carcinoma
Overall Historical Incidence	un <u>t (, , , , , , , , , , , , , , , , , , ,</u>		
TOTAL SD (c)	83/1,969 (4.2%) 4.54%	19/1,969 (1.0%) 1.37%	101/1,969 (5.1%) 4.60%
Range (d) High Low	12/50 0/50	3/50 0/90	12/50 0/50

(a) Data as of August 30, 1985, for studies of at least 104 weeks

(b) No 2-year studies by this laboratory are included in the historical data base.

(c) Standard deviation

(d) Range and SD are presented for groups of 35 or more animals.

### TABLE A4b. HISTORICAL INCIDENCE OF HEMATOPOIETIC SYSTEM TUMORS IN MALE F344/N RATS RECEIVING NO TREATMENT (a,b)

	Incidence of Leukemia in Controls	
Overall Historical Incidence		
TOTAL SD(c)	583/1,977 (29.5%) 11.59%	
Range (d) High Low	30/50 5/50	

(a) Data as of August 30, 1985, for studies of at least 104 weeks

(b) No 2-year studies by this laboratory are included in the historical data base.

(c) Standard deviation

(d) Range and SD are presented for groups of 35 or more animals.

#### TABLE A4c. HISTORICAL INCIDENCE OF KIDNEY TRANSITIONAL CELL TUMORS IN MALE F344/N RATS RECEIVING NO TREATMENT (a,b)

	Incidence of Papillomas or Carcinomas in Controls	
Overall Historical Incidence		
TOTAL SD (c)	(d) 5/1,968 (0.3%) 0.69%	
Range (e) High Low	1/48 0/90	

(a) Data as of August 30, 1985, for studies of at least 104 weeks

(b) No 2-year studies by this laboratory are included in the historical data base.

(c) Standard deviation

(d) Includes three papillomas and two carcinomas. One carcinoma, NOS, was also observed; the inclusion of this tumor would not affect the reported range.

(e) Range and SD are presented for groups of 35 or more animals.

### TABLE A4d. HISTORICAL INCIDENCE OF THYROID GLAND FOLLICULAR CELL TUMORS IN MALE F344/N RATS RECEIVING NO TREATMENT (a,b)

		Incidence in Conti	ols
	Adenoma	Carcinoma	Adenoma or Carcinoma
Overall Historical Incidence			
TOTAL SD (e)	(c) 16/1,928 (0.8%) 1.41%	(d) 11/1,928 (0.6%) 0.91%	(c,d) 27/1,928 (1.4%) 1.75%
Range (f) High Low	2/49 0/50	2/89 0/50	3/50 0/50

(a) Data as of August 30, 1985, for studies of at least 104 weeks

(b) No 2-year studies by this laboratory are included in the historical data base.

(c) Includes one cystadenoma and one papillary cystadenoma

(d) Includes one papillary adenocarcinoma

(e) Standard deviation

(f) Range and SD are presented for groups of 35 or more animals.

## TABLE A4e. HISTORICAL INCIDENCE OF ADRENAL GLAND TUMORS IN MALE F344/N RATSRECEIVING NO TREATMENT (a,b)

	Incidence in Controls								
	Pheochromocytoma	Malignant Pheochromocytoma	Pheochromocytoma or Malignant Pheochromocytoma						
Overall Historical Incidence			· · · · · · · · · · · · · · · · · · ·						
TOTAL SD (c)	427/1,950 (21.9%) 12.41%	30/1,950 (1.5%) 2.00%	452/1,950 (23.2%) 12.39%						
Range (d) High Low	<b>31/49</b> 2/50	<b>4/49</b> 0/50	32/49 3/50						

(a) Data as of August 30, 1985, for studies of at least 104 weeks
(b) No 2-year studies by this laboratory are included in the historical data base.
(c) Standard deviation

(d) Range and SD are presented for groups of 35 or more animals.

## TABLE A5. SUMMARY OF THE INCIDENCE OF IN MALE RATS IN NONNEOPLASTIC LESIONS IN THE TWO-YEAR FEED STUDY OF MIREX

U	ntreated Control	1 0.1 p	pm	1 рр	m	10 p	pm	25 pp	m	50 p	pm
ANIMALS INITIALLY IN STUDY ANIMALS NECROPSIED ANIMALS EXAMINED HISTOPATH	52 52 52	5	2 2 2	52 52 52		52 52 52		52 52 52		52 52 52	
INTEGUMENTARY SYSTEM *Skin Epidermal inclusion cyst Ulcer, NOS Inflammation, acute	(52)	(52	)	(52)		(52) 1 1	(2%) (2%)	(52)	(2%)	(52) 1	(2%)
Hyperplasia, epithelial								1	(2%)		
RESPIRATORY SYSTEM *Nasal cavity	(52)	(52	)	(52)		(52)		(52)	(00)	(52)	
#Lung Congestion, chronic passive	(52)	(52	) 1 (2%)	(52) 3	(6%)	(52) 8	(15%)	1 (52) 6	(2%) (12%)	(51) 4	(8%)
Inflammation, NOS Inflammation, interstitial Inflammation, acute focal	1 (29	%)	1 (2%)			. 3	(6%)	1	(2%)	1 1	(2%) (2%)
Pneumonia, chronic murine Inflammation, granulomatous foc Nacrosis, focal	al 1 (24	%)	6 (12%)					1	(90%)		
Hyperplasia, alveolar epithelium Metaplasia, cartilaginous	7 (13 1 (24	3%) %)		1	( <b>2%</b> )	2	(4%)	1	(2%)		
HEMATOPOIETIC SYSTEM											
#Bone marrow Fibrosis	(52)	(49	)	, (48)		(47)	(2%)	(40)		(51)	
Fibrosis, local #Spleen Fibrosis	(52)	(51	) 4 (8%)	(50)	(2%)	3 (51) 7	(16%)	( <b>4</b> 8) 6	(13%)	(52) 9	(17%)
Fibrosis, focal Adhesion, NOS	2 (44	%)	1 (2%)	-	(2.0)	1	(2%)	1	(2%)	1	(2%)
Necrosis, NOS Infarct, NOS Hemociderosis	1 (24	%)	1 (2%)	0	(496)						
Atrophy, NOS Hyperplasia, lymphoid			L (2%)	2	(** 70)			1	(2%)	1	(2%)
#Splenic capsule Fibrosis	(52)	(51	)	2 (50) 1	( <b>4%</b> ) ( <b>2%</b> )	(51)		(48)	(4%)	(52)	
Fibrosis, focal #Mesenteric lymph node Fibrosis	2 (49 (51)	%) (52	)	1 (52) 1	(2%) (2%)	(52)		(48)		(48)	
Necrosis, focal #Thymus	1 (24 (47)	%) (47	)	(42)		(40)		(42)		(41)	
Cyst, NOS Hyperplasia, epithelial	3 (64 15 (32	%) 2%) 1(	0 (21%)	1 7	(2%) (17%)	2 2	(5%) (5%)	1 8	(2%) (19%)	1 7	(2%) (17%)
CIRCULATORY SYSTEM								<u></u>			
*Mediastinum Periarteritis	(52)	(52	)	(52)		(52)		(52)		(52) 1	(2%)
#Lung Thrombosis, NOS #Hoad	(52)	(52	)	(52)		(52)		(52)		(51) 1	(2%)
Inflammation, acute/chronic Inflammation, chronic	(52) 50 (96	(52 3%) 51	) L (98%)	(52) 1 50	(2%) (96%)	(52)	(96%)	(52)	(96%)	(52)	(88%)
#Left atrium Thrombosis, NOS	(52)	(52	) 7 (13%)	(52) 6	(12%)	(52)	(13%)	(52)	(15%)	(52) 5	(10%)
#Left ventricle Thrombosis, NOS	(52)	(52	)	(52)		(52)		(52)		(52)	(2%)
#Cardiac valve Inflammation, chronic #Mitral valve	(52) 1 (29 (52)	(52 %)	)	(52)		(52)		(52)		(52)	
Thrombosis, NOS Inflammation, chronic	1 (29	(52 76) 1	, L (2%) L (2%)	(52)		(32)		(52)		(92)	
*Aorta Mineralization	(52) 3 (69	(52 %)	) L (2%)	(52)		(52)		(52)		(52) 1	(2%)
*Renal artery Thrombosis	(52) 1 (29	(52	)	(52)		(52)		(52)		(52)	
The pattic artery Thrombosis, NOS *Superior mesenteric vain	(52)	(52	)	(52)		(52) 1 (52)	(2%)	(52)		(52)	
Thrombosis	- 1 (29	%)	,	(02)		(02)		(02)		(02)	

	Untrea Contr	ted ol	0.1 pp	m	1 рри	n	10 p	pm	25 pp	m	50 p	pm
CIRCULATORY SYSTEM (Continue	ed)											
#Liver	(52)	(0.0)	(52)		(52)		(52)		(52)		(52)	
*Mosenter:	(59)	(2%)	(50)		(50)		(50)		(50)		(50)	
Periarteritis	(52)	(6%)	(52)	(8%)	(52)		(52)	(6%)	(52)	(8%)	(52)	
DIGESTIVE SYSTEM												
#Salivary gland	(52)		(52)		(52)		(52)		(50)		(51)	
Calculus, unkn gross or micro	(50)		(50)		(50)	(2%)	(20)		(50)		(50)	
Inflammation acute focal	(52)	(29%)	(52)		(52)		(32)		(52)		(52)	
Fibrosis	-	(2,0)	1	(2%)	1	(2%)					2	(4%)
Degeneration, NOS			1	(2%)	1	(2%)					-	(10)
Necrosis, NOS			2	(4%)	1	(2%)	2	(4%)	4	(8%)	18	(35%)
Necrosis, focal	6	(12%)	9	(17%)	7	(13%)	5	(10%)	17	(33%)		(15%)
Metamorphosis, fatty	10	(19%)	11	(21%)	13	(25%)	20	(38%)	21	(40%)	26	(50%)
Pigmentation, NOS			1	(2%)								
Cytoplasmic change, NOS					1	(2%)						
Basophilic cyto change	47	(90%)	38	(73%)	41	(79%)	39	(75%)	27	(52%)	22	(42%)
Eosinophilic cyto change					1	(2%)	2	(4%)	2	(4.%)		
Hepatocytomegaly	2	(4%)	12	(23%)	2	(4%)	40	(77%)	43	(83%)	44	(85%)
Atrophy, NOS	3	(6%)					2	(4%)			3	(6%)
Hypertrophy, focal					1	(2%)						
Angiectasis	20	(38%)	20	(38%)	19	(37%)	42	(81%)	38	(73%)	39	(75%)
Regeneration, NOS	1	(2%)										
#Liver/centrilobular	(52)		(52)		(52)		(52)		(52)		(52)	
Degeneration, NOS	1	(2%)	3	(6%)	3	(6%)			1	(2%)	1	(2%)
Necrosis, NOS	1	(2%)			1	(2%)	5	(10%)	7	(13%)	12	(23%)
Necrosis, focal	_				1	(2%)						
Atrophy, NOS	5	(10%)	5	(10%)	2	(4%)	3	(6%)	4	(8%)	1	(2%)
#Bile duct	(52)		(52)		(52)		(52)		(52)		(52)	
Cyst, NOS		1000		(000)			1	(2%)	1	(2%)	1	(2%)
Hyperplasia, NOS	52	(100%)	51	(98%)	46	(88%)	46	(88%)	50	(96%)	47	(90%)
#rancreatic duct	(51)		(50)	1000	(51)		(41)		(48)		(51)	
#Ponorostia aginua	(#1)		(50)	(2%)	(51)		(47)		(40)		(51)	
Atronhy NOS	19	(9504)	(30)	(1406)	(31)	(190)	(417)	(100)	(40)	(10%)	(01)	(904)
Humamlasia NOS	13	(23%)	( 0	(14%)	6	(12%)	9	(19%)	5	(10%)	4	(8%)
Hyperplasia, NOS	4	(6%)	4	(4%)			2	(4%)	I	(270)	3	(0%)
#Stomach	3 (51)	(0%)	(51)		(49)		(51)		(44)		(11)	
Diverticulum	(01)	(90%)	(31)		(40)		(01)		(44)		(44)	
Inflammation chronic	1	(2701									1	(20%)
Inflammation, proliferative	1	(2%)									-	(2,0)
#Gastric mucosa	(51)	(2,0)	(51)		(48)		(51)		(44)		(44)	
Ulcer, NOS	1	2(%)	3	(6%)	2	(4%)	(01)		(/		1	(2%)
Erosion	2	(4%)	2	(4%)	-	(1.07	2	(4%)	5	(196)	4	(9%)
Hyperplasia, epithelial	-	(1.0)	1	(2%)			-	(4.0)	0	(22.0)	•	(0.0)
Hyperplasia, focal			1	(2%)								
#Forestomach	(51)		(51)		(48)		(51)		(44)		(44)	
Ulcer, NOS			1	(2%)	1	(2%)	3	(6%)	4	(9%)	2	(5%)
Inflammation, acute	1	(2%)							1	(2%)		
Inflammation, chronic			1	(2%)								
Erosion											2	(5%)
Hyperplasia, epithelial	2	(4%)	2	(4%)	2	(4%)			1	(2%)	2	(5%)
#Duodenum	(50)		(47)		(47)		(46)		(38)		(35)	
Ulcer, NOS									3	(8%)		
Erosion			1	(2%)								
*Rectum	(52)		(52)		(52)		(52)		(52)		(52)	
Polyp, inflammatory	1	(2%)										
URINARY SYSTEM												
#Kidney	(51)		(51)		(52)		(52)		(51)		(59)	
Inflammation, acute focal	(01)		(01)		1	(2%)	(02)		(01)		(02)	
Abscess, NOS					1	(2%)	1	(2%)				
Nephropathy	50	(98%)	50	(98%)	45	(87%)	49	(94%)	51	(100%)	52	(100%)
Necrosis, focal			00			*/			1	(2%)		
Infarct, NOS	1	(2%)	1	(2%)			1	(2%)	•	/		
Hyperplasia, tubular cell	-		-		1	(2%)	-		1	(2%)		
#Kidney/pelvis	(51)		(51)		(52)		(52)		(51)		(52)	
Inflammation, acute focal									1	(2%)		
Hyperplasia, epithelial			2	(4%)	2	(4%)	5	(10%)	14	(27%)	9	(17%)
#Renal papilla	(51)		-		_						_	
Necrosis	í	(2%)										

# TABLE A5. SUMMARY OF THE INCIDENCE OF NONNEOPLASTIC LESIONS IN MALE RATS IN THE TWO-YEAR FEED STUDY OF MIREX (Continued)

	Untreated Control	l 0.1 pp	m	1 ррг	n	10 p	pm	25 pp	m	50 p	pm
URINARY SYSTEM (Continued)											
#Urinary bladder	(49)	(51)	(00)	(49)		(50)		(50)		(49)	
Inflammation, acute necrotizing	7	1	(2%)					1	(2%)		
#Urinary bladder/submucosa	(49)	(51)		(49)		(50)		(50)	(= , , , ,	(49)	
Hemorrhage						1	( <b>2%</b> )				
ENDOCRINE SYSTEM											
#Pituitary	(52)	(52)		(51)		(50)		(52)		(47)	
Cyst, NOS Necrosis focal	2 (49	<i>(</i> 6) 1	(2%)	2	(4%)	3	(6%)	1	(2%)	1	(2%)
Pigmentation, NOS	1 (29	76)								1	(2/0)
Hypertrophy, focal		1	(2%)	1	(2%)	1	(2%)	1	(2%)		
Hyperplasia, NOS	3 (69	%) 3	(6%)	2	(4%)	1	(2%)			2	(4%)
Hyperplasia, focal	2 (49	(6) 1	(2%)			3	(6%)	1	(2%)	2	(4%)
Anglectasis #Adrenel	(51)	(52)	(2%)	(50)		(50)		(51)		(51)	
Necrosis NOS	(51)	(52)		(52)		(34)	(4%)	(31)		(31)	
Necrosis, cortical						1	(2%)				
Cytoplasmic change, NOS						1	(2%)				
Hypertrophy, focal	1 (29	6)									
Angiectasis	1 (29	6)						1	(2%)		
#Adrenal cortex	(51)	(52)		(52)	(00)	(52)	(00)	(51)		(51)	
Necrosis focal	1 (29	<b>%</b> )		1	(2%)	1	(2%)				
Metamorphosis, fatty	6 (12	2%) 8	(15%)	4	(8%)	4	(8%)	9	(18%)	8	(16%)
Hyperplasia, NOS	5 (10	)%)		1	(2%)	2	(4%)	2	(4%)	2	(4%)
Hyperplasia, focal				1	(2%)						
#Zona fasciculata	(51)	(52)		(52)		(52)		(51)		(51)	
Hyperplasia, NOS #Adronal modulla	(51)	(50)		(50)		(50)	(2%)	(51)		(51)	
Hyperniasia NOS	8 (16	(02) (%) 4	(8%)	(34)	(4%)	10	(19%)	(31)	(12%)	(31)	(18%)
#Thyroid	(51)	(50)	(0.0)	(47)	(4,0)	(47)	(10 /0)	(35)	122.0)	(49)	(10.0)
Cystic foilicles	2 (49	%) 1	(2%)			5	(11%)	4	(11%)	6	(12%)
Hyperplasia, C-cell	9 (18	3%) 3	(6%)	1	(2%)	1	(2%)	1	(3%)	2	(4%)
Hyperplasia, follicular cell	(00)	(00)		(00)		(10)		(50)		1	(2%)
#raratnyroid	(32)	(39)		(39)		(40)	(50)	(50)	(901.)	(45)	(90)
Hyperolasia, NOS	6 (19	(%) 12	(31%)	12	(31%)	18	(3%)	22	(44%)	24	(2%) (53%)
Hyperplasia, focal			(02:0)	1	(3%)		(10 /0)		(,		(00.0)
#Pancreatic islets	(51)	(50)		(51)		(47)		(48)		(51)	
Hyperplasia, NOS	12 (24	%) 7	(14%)	8	(16%)	13	(28%)	14	(29%)	3	(6%)
Hyperplasia, focal	1 (29	6)									
REPRODUCTIVE SYSTEM	(59)	(50)		(50)		(50)		(50)		(59)	
Galactocele	(32)	(32)	(6%)	(32)	(2%)	2	(4%)	(32)		(32)	
Cyst, NOS						-		1	( <b>2%</b> )		
Cystic ducts	9 (17	%) 9	(17%)	1	(2%)	4	(8%)	2	(4%)	2	(4%)
Inflammation, granulomatous				1	(2%)	1	(2%)				
*Penis	(52)	(52)		(52)		(52)		(52)	000	(52)	
*Preputial gland	(52)	(52)		(52)		(52)		(52)	(2%)	(52)	
Cyst. NOS	(01)	(02)		(02)		(02)		(02)		2	(4%)
Cystic ducts								1	( <b>2%</b> )	1	(2%)
Inflammation, chronic	2 (4%	6)								1	(2%)
Atrophy, NOS										1	(2%)
#rrostate	(50)	(50)		(50)		(52)	(000)	(52)	(90)	(47)	
Inflammation, active chronic		1	(2%)			1	(2%)	1	(470)		
Inflammation, chronic	4 (89	6) 2	(4%)	7	(14%)	2	(4%)	3	(6%)		
Inflammation, granulomatous		1	(2%)								
Hyperplasia, NOS	13 (26	%) 10	(20%)	10	(20%)	4	(8%)	4	(8%)	2	(4%)
Hyperplasia, focal	2 (4%	6)		(20)		150		180		(50)	
Inflammation chronic	(32)	(32) h)		(52)		(32)		(52)	(4%)	(32)	
Atrophy, NOS	4 (4)	• /		1	(2%)			4	· + ·v/		
#Testis	(52)	(52)		(51)	••	(52)		(52)		(51)	
Granuloma, spermatic				1	(2%)	1	(2%)				
Infarct, NOS	1 (29	6)		-	(0.07)	-	(0.7.)			-	
Atrophy, NUS Hunemlesia, interstitiol coll				1	(2%)	1	(23%)			2	(41%) (9.05.)
riyperplasia, interstitial cell										4	(070)

# TABLE A5. SUMMARY OF THE INCIDENCE OF NONNEOPLASTIC LESIONS IN MALE RATS IN THE<br/>TWO-YEAR FEED STUDY OF MIREX (Continued)

\_\_\_\_

	Untreated Control	0.1 ppm	1 ppm	10 ppm	25 ppm	50 ppm
REPRODUCTIVE SYSTEM (Contin *Epididymis	eued) (52)	(52)	(52)	(52)	(52)	(52)
*Scrotum Necrosis, fat	(52)	(52)	(52)	(52)	(52)	(52) 1 (2%)
NERVOUS SYSTEM #Brain Compression, NOS Hydrocenhalus, NOS	(52)	(52)	(52) 1 (2%) 2 (4%)	(51)	(52)	(50)
Necrosis, NOS Necrosis, focal Necrosis, hemorrhagic *Spinal cord Necrosis, NOS	(52)	3 (6%) (52)	1 (2%) (52)	1 (2%) (52)	1 (2%) 3 (6%) (52) 1 (2%)	2 (4%) (52)
Malacia Necrosis, hemorrhagic	2 (4%)	2 (4%)		1 (2%)		
SPECIAL SENSE ORGANS *Eye/lacrimal gland Atrophy, NOS	(52)	(52)	(52)	(52) 1 (2%)	(52)	(52)
MUSCULOSKELETAL SYSTEM *Vertebra Fibrous osteodystrophy	(52)	(52)	(52)	(52)	(52) 2 (4%)	(52) 2 (4%)
Exostosis *Intervertebral disc Rupture	(52) 2 (4%)	1 (2%) (52)	(52)	(52)	(52)	(52)
30DY CAVITIES *Abdominal cavity Steatitis	(52)	(52) 2 (4%)	(52) 2 (4%)	(52) 2 (4%) 1 (2%)	(52)	(52) 3 (6%)
Necrosis, fat Necrosis, hemorrhagic	1 (2%)	3 (6%)	1 (2%)	2 (4%)	3 (6%)	1 (2%)
*Mesentery Inflammation, granulomatous Necrosis, fat	(52) 1 (2%) 1 (2%)	(52)	(52)	(52)	(52)	(52)
ALL OTHER SYSTEMS *Multiple organs Mineralization Congestion, NOS	(52) 1 (2%)	(52) 1 (2%)	(52) 1 (2%) 1 (2%)	(52) 1 (2%)	(52) 5 (10%)	(52) 3 (6%)
Adipose tissue Necrosis, NOS				1		

### TABLE A5. SUMMARY OF THE INCIDENCE OF NONNEOPLASTIC LESIONS IN MALE RATS IN THE TWO-YEAR FEED STUDY OF MIREX (Continued)

\*Number of animals receiving complete necropsy examination; all gross lesions including masses examined microscopically. #Number of animals examined microscopically at this site.

### **APPENDIX B**

### SUMMARY OF LESIONS IN FEMALE RATS IN THE

### TWO-YEAR FEED STUDY OF MIREX

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#### TABLE B1. SUMMARY OF THE INCIDENCE OF NEOPLASMS IN FEMALE RATS IN THE FIRST TWO-YEAR FEED STUDY OF MIREX

τ	Jntrea Contr	ted ol	0.1 pp	om	1 pp	m	10 pp	m	25 pp	m	50 pp	m
ANIMALS INITIALLY IN STUDY	52						52		52		52	
ANIMALS NECROPSIED ANIMALS EXAMINED HISTOPATH	52 52		52 52		52 52		52 52		52 52		52 52	
INTEGUMENTARY SYSTEM			<del>.</del>									
*Subcutaneous tissue	(52)		(52)		(52)		(52)		(52)		(52)	
Fibroma	1	(2%)	2	(4%)			1	(2%)			1	(2%)
Fibrosarcoma							1	(2%)	2	(4%)		
RESPIRATORY SYSTEM					·							
#Trachea	(47)		(47)		(45)		(47)		(46)		(44)	
C-cell carcinoma, invasive			1	(2%)								
#Lung Alveolar/bronchiolar adenoma	(52)		(52)		(52)		(52)		(52)		(52)	(906)
Alveolar/bronchiolar carcinoma					1	(2%)					1	(270)
C-cell carcinoma, metastatic			1	(2%)	•		<b>2</b>	(4%)				
Fibrosarcoma, metastatic							1	(2%)	1	(2%)		
TEMATOPOIETIC SUSTEM												
*Multiple organs	(52)		(52)		(52)		(52)		(52)		(52)	
Malig. lymphoma, histiocytic typ	e		1	(2%)	(02)		(02)		, <b>U</b> = )		(02)	
Leukemia, mononuclear cell	8	(15%)	8	(15%)	10	(19%)	13	(25%)	17	(33%)	14	(27%)
Heukemia, mononuclear cell	(50)		(52)		(52)		(50)	(2%)	(51)	(2%)	(50) A	(8%)
#Thymus	(42)		(47)		(42)		(42)	(20.70)	(48)	(2,0)	(41)	(0%0)
Carcinoma, NOS					1	(2%)					1	(2%)
#Spleen	(50)		(52)		(59)		(50)		(51)		(50)	
Hemangioma			(04)		(04)		(00/		(••)		1	(2%)
Hemangiosarcoma			1	(2%)								
#Pancreas	(50)		(52)	(90)	(51)		(49)		(50)		(50)	
nemangiosarcoma, invasive			1	(270)								
DIGESTIVE SYSTEM	-		-									
*Tongue	(52)		(52)		(52)		(52)		(52)		(52)	
Squamous cell papilloma #Liver	2	(4%)	1201		(50)		(50)		(20)		(60)	
Neoplastic nodule	(52)	(19%)	(52)	(10%)	(52)	(8%)	(32)	(10%)	(52) 9	(17%)	(52)	(13%)
Hepatocellular carcinoma				· • /		/	•		1	(2%)	2	(4%)
#Pancreas	(50)		(52)		(51)	(0.00)	(49)		(50)	(09)	(50)	
Acinar cell adenoma	(40)		120		1	(2%)	(10)		1	(2%)	147	
Papillary adenoma	(49)		(52)		(49)		(48)		(47)	(2%)	(47)	
			<u> </u>									
JRINARY SYSTEM #Kidney	(51)		(52)		(52)		(51)		(51)		(52)	
Sarcoma, NOS	( <b>U</b> I)		(02)		(02)		(0=/		101/		1	(2%)
Lipoma											1	(2%)
#Urinary bladder	(50)		(51)		(52)		(51)	1901	(47)		(50)	
Sarcoma, NOS, invasive							1	(2%)				
NDOCRINE SYSTEM												
#Pituitary	(52)		(51)		(50)		(51)		(52)		(50)	
Carcinoma, NOS	2	(4%)	1	(2%)	1	(2%)	2	(4%)	1	(2%)		
Adenoma, NOS	20	(38%)	24	(47%)	31	(62%)	24	( <b>4</b> 7%)	30	(58%)	22	(44%)
r iorosarcoma, inväsive #Adrenal	(51)		(52)		(52)		(51)	(2%)	(51)		(52)	
Cortical adenoma	3	(6%)	2	(4%)	5	(10%)	3	(6%)	4	(8%)	3	(6%)
Cortical carcinoma	,		-				-		-		1	(2%)
Pheochromocytoma	1	(2%)	3	(6%)	5	(10%)	1	(2%)	2	(4%)	5	(10%
Pheochromocytoma, malignant		(00)									1	(2%)
wangineuroma #Thyroid	(50)	(270)	(50)		(48)		(47)		(48)		( <b>4B</b> )	
Follicular cell adenoma	(00)		(00)		(40)		1	(2%)	(		(40)	
Follicular cell carcinoma	1	(2%)	2	(4%)			1	(2%)			1	(2%)
C-cell adenoma	10	(20%)	9	(18%)	6	(13%)	5	(11%)	6	(13%)	2	(4%)
C-cell carcinoma	3	(16%)	4	(8%)	1	(2%)	4	(91%)				

	Untrea Contr	ted ol	<b>0.1</b> pp	m	1 ppr	n	10 pp	m	25 pp	na	50 pp	m
ENDOCRINE SYSTEM (Continued) #Pancreatic islets Islet cell adenoma Islet cell carcinoma	(50) 2 2	(4%) (4%)	(52) 2	(4%)	(51) 1 1	(2%) (2%)	(49) 1 3	(2%) (6%)	(50) 4 1	(8%) (2%)	(50)	
REPRODUCTIVE SYSTEM *Mammary gland Adenocarcinoma, NOS Fibroma Fibroadenoma *Preputial gland Carrinoma NOS	(52) 1 12 (52)	(2%) (23%)	(52) 8 (52)	(15%)	(52) 3 11 (52)	(6%) (21%)	(52) 17 (52)	(33%)	(52) 1 1 10 (52)	(2%) (2%) (19%)	(52) 2 3 (52)	(4%) (6%) (2%)
*Clitoral gland Adenoma, NOS Cystadenoma, NOS #Uterus Adenocarcinoma, NOS Leiomvoma	(52) (51) 2	(4%)	(52) 1 (51)	(2%)	(52) 1 2 (52) 1	(2%) (4%) (2%)	(52) 1 (52)	(2%)	(52) (52)	(2%)	(52) (52) 1	(2%) (2%)
Endometrial stromal polyp Endometrial stromal sarcoma #Cervix uteri Sarcoma, NOS Endometrial stromal polyp #Ovary	14 (51) (51)	(27%)	8 (51) (51)	(16%)	10 1 (52) (52)	(19%) (2%)	13 (52) 1 (52)	(25%) (2%)	12 2 (52) 1 (52)	(2%) (23%) (4%) (2%)	15 (52) (51)	(29%)
Granulosa cell tumor Fibrosarcoma 	(52)		(52)	(2%)	(51)	<u> </u>	(52)	(2%)	(52)		(52)	
Carcinoma, NOS, invasive Astrocytoma	22	(4%) (4%)	1	(2%) (2%)	1	(2%)	2	(4%) (2%)	1	(2%)	1	(2%)
SPECIAL SENSE ORGANS *Zymbal gland Sebaceous adenoma	(52)		(52)		(52)		(52)		(52)		(52) 1	(2%)
MUSCULOSKELETAL SYSTEM None												
BODY CAVITIES *Thoracic cavity Mesothelioma, NOS *Abdominal cavity Osteoma Fibrosarcoma	(52) 1 (52) 1	(2%) (2%)	(52) (52)		(52) (52)		(52) (52) 1	(2%)	(52) (52)		(52) (52)	
ALL OTHER SYSTEMS *Multiple organs Adenocarcinoma, NOS, metasta Fibrosarcoma, metastic	(52) tic 1	(2%)	(52)		(52)		(52)		(52)		(52) 1	(2%)
ANIMAL DISPOSITION SUMMARY Animals initially in study Natural death Moribund sacrifice Terminal sacrifice	52 13 3 36		52 10 9 33	<u> </u>	52 14 8 30		52 15 3 34		52 16 1 35		52 18 2 32	

#### TABLE B1. SUMMARY OF THE INCIDENCE OF NEOPLASMS IN FEMALE RATS IN THE FIRST TWO-YEAR FEED STUDY OF MIREX (Continued)

## TABLE B1. SUMMARY OF THE INCIDENCE OF NEOPLASMS IN FEMALE RATS IN THE FIRST TWO-YEAR FEED STUDY OF MIREX (Continued)

τ	Intreated Control	0.1 ppm	1 ppm	10 ppm	25 ppm	50 ppm
TUMOR SUMMARY						
Total animals with primary tumors**	48	48	49	47	50	49
Total primary tumors	99	83	98	102	108	93
Total animals with benign tumors	40	37	44	40	43	36
Total benign tumors	66	57	73	68	73	56
Total animals with malignant tumors	19	18	20	26	24	25
Total malignant tumors	22	20	21	29	26	30
Total animals with secondary tumors	## 3	3	1	6	2	1
Total secondary tumors	3	4	1	7	2	1
Total animals with tumors uncertain						
benign or malignant	11	6	4	5	9	7
Total uncertain tumors	11	6	4	5	9	7

\*Number of animals receiving complete necropsy examination; all gross lesions including masses examined microscopically.

#\*Primary tumors: all tumors except secondary tumors
#Number of animals examined microscopically at this site
##Secondary tumors: metastatic tumors or tumors invasive into an adjacent organ

## TABLE B2. SUMMARY OF THE INCIDENCE OF NEOPLASMS IN FEMALE RATS IN THE SECOND TWO-<br/>YEAR FEED STUDY OF MIREX

Ŭ	Intreated	Control	50 p <u>r</u>	om	1 <b>00</b> p	pm
ANIMALS INITIALLY IN STUDY ANIMALS NECROPSIED ANIMALS EXAMINED HISTOPATHOLOGICAL	52 52 LY 52		52 52 52		52 52 52	
INTEGUMENTARY SYSTEM *Skin Squamous cell papilloma Squamous cell carcinoma Basal cell tumor *Subcutaneous tissue Carcinoma, NOS, unclear primary or metas	(52) 1 (52) static 1	(2%) (2%) (2%)	(52) 1 (52)	(2%)	(52) (52)	
RESPIRATORY SYSTEM #Lung Squamous cell carcinoma, metastatic Alveolar/bronchiolar adenoma Alveolar/bronchiolar carcinoma Pheochromocytoma, metastatic	(52) 2 1	(4%) (2%)	(52) 1 3	(2%) (6%)	(52) 1 3 1	(2%) (6%) (2%)
HEMATOPOIETIC SYSTEM *Multiple organs Malignant lymphoma, histiocytic type Leukemia, mononuclear cell #Spleen Leukemia, mononuclear cell	(52) 1 5 (51) 1	(2%) (10%) (2%)	(52) 6 (52) 3	(12%) (6%)	(52) 12 (49) 2	(23%) (4%)
CIRCULATORY SYSTEM *Subcutaneous tissue Hemangiosarcoma *Vertebra Hemangiosarcoma #Heart Hemangiosarcoma, metastatic	(52) (52) (52)		(52) (52) (52)		(52) 1 (52) 1 (52) 1	(2%) (2%) (2%)
DIGESTIVE SYSTEM *Tongue Squamous cell papilloma #Liver Neoplastic nodule Hepatocellular carcinoma #Pancreas Acinar cell adenoma Mixed tumor, benign #Stomach Squamous cell papilloma	(52) 1 (52) 2 (50) (51)	(2%) (4%)	(52) 1 (52) 23 (52) 1 (51)	(2%) (44%) (2%)	(52) (52) 30 1 (51) 1 (52) 1	(58%) (2%) (2%) (2%)
URINARY SYSTEM #Kidney Sarcoma, NOS #Kidney/pelvis Transitional cell carcinoma #Urinary bladder Transitional cell papilloma	(52) (52) 1 (50) 1	(2%) (2%)	(52) (52) (50)		(52) 1 (52) (49)	(2%)

	Untreated	Control	50 pp	m	100 p	opm
ENDOCRINE SYSTEM		<u> </u>				
#Pituitary	(52)		(52)		(52)	
Carcinoma, NOS	1	(2%)	3	(6%)		
Adenoma, NOS	31	(60%)	23	(44%)	22	(42%)
#Adrenal	(52)		(52)		(52)	
Cortical adenoma	5	(10%)	6	(12%)		
Cortical carcinoma	2	(4%)				(90)
Pheochromocytoma	3	(6%)	2	(4%)	1	(2%)
Pheochromocytoma, malignant	(40)		(40)		1 (40)	(270)
#Thyroid	(49)	(90)	(49)	(20)	(49)	(2%)
Follicular cell adenoma	1	(2%)	1	(270)	5	(10%)
C-cell adenoma	0	(10%)	3	(6%)	U	(10,0)
C-cell carcinoma	(50)	(470)	(52)	(0,07	(51)	
#Pancreatic islets	(00)	(296)	(02)	(196)	1	(2%)
	1	(270)	<u><u></u></u>	(170)	ĥ	(12%)
Islet cell carcinoma	*	(0%)	J	(17,0)		(12,0)
REPRODUCTIVE SYSTEM						
*Mammary gland	(52)		(52)		(52)	
Adenoma, NOS			1	(2%)		
Adenocarcinoma, NOS	1	(2%)				
Fibroadenoma	3	(6%)	6	(12%)	3	(6%)
#Uterus	(52)		(51)		(52)	
Undifferentiated carcinoma		- ···	1	(2%)		
Papillary adenoma	1	(2%)	_			
Endometrial stromal polyp	12	(23%)	8	(16%)	8	(15%)
NERVOUS SYSTEM						
#Brain	(52)		(52)		(52)	
Carcinoma, NOS, invasive	1	(2%)	2	(4%)		
Osteosarcoma, invasive					1	(2%)
Astrocytoma					1	(2%)
SPECIAL SENSE ORGANS None						
MUSCHLOSKELETAL SYSTEM						
*Skull	(52)		(52)		(52)	
Osteosarcoma					1	(2%)
BODY CAVITIES None						
ALL OTHER SYSTEMS						
*Multiple organs	(52)	1	(52)		(52)	
Undifferentiated carcinoma, metastati	ic		1	(2%)		
Fibrosarcoma			1	(2%)		
ANIMAL DISPOSITION SUMMARY		<u></u>				
Animals initially in study	52	2	52		52	
Natural death	7	,	7		14	
Moribund sacrifice	2	2	2		1	
Terminal sacrifice	43	3	43		37	

# TABLE B2. SUMMARY OF THE INCIDENCE OF NEOPLASMS IN FEMALE RATS IN THE SECOND TWO-<br/>YEAR FEED STUDY OF MIREX (Continued)

### TABLE B2. SUMMARY OF THE INCIDENCE OF NEOPLASMS IN FEMALE RATS IN THE SECOND TWO-YEAR FEED STUDY OF MIREX (Continued)

	Untreated Control	50 ppm	100 ppm
TUMOR SUMMARY		<u></u>	
Total animals with primary tumors**	49	47	48
Total primary tumors	90	107	104
Total animals with benign tumors	41	36	31
Total benign tumors	68	54	44
Total animals with malignant tumors	17	24	24
Total malignant tumors	19	30	30
Total animals with secondary tumors##	1	4	3
Total secondary tumors	1	4	3
Total animals with tumors uncertain			
benign or malignant	2	23	30
Total uncertain tumors	2	23	30
Total animals with tumors uncertain			
primary or metastatic	1		
Total uncertain tumors	1		

\*Number of animals receiving complete necropsy examination; all gross lesions including masses examined microscopically. \*\*Primary tumors: all tumors except secondary tumors #Number of animals examined microscopically at this site ##Secondary tumors: metastatic tumors or tumors invasive into an adjacent organ

# TABLE B3. INDIVIDUAL ANIMAL TUMOR PATHOLOGY OF FEMALE RATS IN THE FIRST TWO-YEAR FEED STUDY OF MIREX: UNTREATED CONTROL

ANIMAL NUMBER	0 6 4	0 1 4	0 5 0	0 2 4	0 5 4	0 1 2	0 9 4	0 1 0	0 9 8	0 7 6	0 4 6	0 0 4	0 8 0	0 4 4	0 0 2	0 0 6	0 0 8	0 1 6	0 1 8	0 2 0	0 2 2	0 2 6	0 2 8	0 3 0	0 3 2	0 3 4
WEEKS ON STUDY	0 7 8	0 8 1	0 8 1	0 8 6	0 8 7	0 9 1	0 9 1	0 9 3	0 9 3	0 9 4	0 9 5	0 9 9	1 0 2	1 0 4	1 0 7	1 0 7	1 0 7	1 0 7	1 0 7	1 0 7	1 0 7	1 0 7	1 0 7	1 0 7	1 0 7	1 0 7
INTEGUMENTARY SYSTEM Subcutaneous tissue Fibroma	N	+	+	+	+	+	+	+	+	+	+	+	+	+	+	N	+	+	N	÷	N	*	+	+	+	+
RESPIRATORY SYSTEM Lungs and bronchi Trachea	+	++++	+	+	++++	++++	+ +	++++	++++	++++	+++++	++++	++++	++++	++++	++++	+++	++++	+++	+++++	+++	++++	+++	++++	++++	+
HEMATOPOIETIC SYSTEM Bone marrow Spleen Lymph nodes Thymus	-	++++++	 + +	+ + +	+++++	+ + + +	++++-	++++	++++++	+++-	+ + +	+++++	++++-	+ + +	+++++	+ + + -	+++++	++++-	+++++	+++++	+ + + +	++++++	+ + + +	+ + + +	+++-	+++++
CIRCULATORY SYSTEM Heart	+	+	+	٠	+	+	+	+	+	+	+	+	+	+	+	+	+	+	٠	+	+	+	+	+	•	+
DIGESTIVE SYSTEM Orai cavity Squamous cell papilloma Salivary gland Liver Neoplastic nodule Bile duct Pancreas Esophagus Stomach Small intestine Large intestine	N + + + -	<b>Z</b> ++ ++++++	N ++ + + + + + + + + + + + + + + + + +	Z ++ ++!+++	N ++X++++++	<b>N</b> ++ ++++++	N ++ +++++	N ++ +++++	N ++ +++++	N ++ ++++ + + + + + + + + + + + + + + +	Z ++ +++++	N ++ +++++	N ++ +++++	Z ++ +++++	N ++X++++++	N ++ +++++	N X + + + + + + + +	N ++ ++++	N + + X + + + + + + +	N + + X + + + + + + + + + + + + + + + +	<b>X</b> ++ ++++++	Z ++ +++++	N + + X + + + + + + + + + + + + + + + +	N ++ +++++	N ++ +++++	N + + X + + + + + + + + + + + + + + + +
URINARY SYSTEM Kidney Urinary bladder		+++	+++	+++	+++	+++	+++	+++	++++	+++	+++	++++	+++	+++	++++	++++	+	+++	+++	+++++++	++++	+++	+++	++++	++++	++++
ENDOCRINE SYSTEM Pituitary Carcinoma, NOS Adrenal Cortical adenoma Pheochromocytoma Ganglioneuroma Thyroid Eollicular cell carcinoma	+ -	+ X + +	++++	+ X + +	++++	+ X +	++++	+ + +	+ X + +	+++++	+ + +	+ X + +	++	+ X +	+ X + +	++++	+ + X +	++++	++++	+ X + +	+ X + +	++++	+ X + +	++++	+ X + +	+ +
C-ceil adenoma C-ceil carcinoma Parathyroid Pancreatic islets Islet ceil adenoma Islet ceil carcinoma		+ +		+	+ +	- +	x + +	+ +	+ +	 +	+ +	- +	+ +	.+ .+	+ +	+ +	+ +	+ +	- + X	+ +	x + +	+ +	+ +	+ +	- + X	x - +
REPRODUCTIVE SYSTEM Mammary gland Adenocarcinoma, NOS Fibroadenoma Uterus Adenocarcinoma, NOS Endometrial stromal polyp Ovary	N - -	+++++	+++++	+ X + +	+ X + +	+++++	+++++	+++++	+++++	+++++	+++++	+ + +	+ + X +	+++++	+++++	++++	N + +	+ + X +	+++++	N + X +	N + +	+ X + +	N + +	N + X +	+ + X +	+ + +
NERVOUS SYSTEM Brain Carcinoma, NOS, invasive Astrocytoma	+	+	+	+	+	+ X	+	+	+	+	+ X	+	+	+ X	+	+	+	+	+	+	+	+	+	+	+	+
BODY CAVITIES Pleura Mesothelioma, NOS Peritoneum Fibrosarcoma	N N X	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 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 Fibrosarcoma, metastatic Leukemia, mononuclear cell	N X	N	N	N	N	N	N X	N X	N X	N	N X	N	N	N	N	N	N	N X	N	N	N	N	N	N	N	N

+: Tissue examined microscopically

Required tissue not examined microscopically
X. Tumor incidence

Necropsy, no autolysis, no microscopic examination

Animal missexed

@: Multiple occurrence of morphology

: No tissue information submitted C: Necropsy, no histology due to protocol A: Autolysis M: Animal missing B: No necropsy performed

TABLE B3.	<b>INDIVIDUAL ANIMAL</b>	TUMOR P	PATHOLOGY	OF I	FEMALE	RATS:	UNTREATED	CONTROL
			(Continued	l)	•			

ANIMAL NUMBER	0 3 6	0 3 8	0 4 0	0 4 2	0 4 8	0 5 2	0 5 6	0 5 8	0 6 0	0 6 2	0 6 6	0 6 8	0 7 0	0 7 2	0 7 4	0 7 8	0 8 2	0 8 4	0 8 6	0 8 8	1 0 0	1 0 2	1 0 4	0 9 0	0 9 2	0 9 6	TOTAL
WEEKS ON STUDY	1 0 7	1 0 7	1 0 7	1 0 7	1 0 7	1 0 7	1 0 7	1 0 7	1 0 7	1 0 7	1 0 7	1 0 7	1 0 7	1 0 7	1 0 7	1 0 7	1 0 7	1 0 7	1 0 7	1 0 7	1 0 7	1 0 7	1 0 7	1 0 8	1 0 8	1 0 8	TISSUES TUMORS
INTEGUMENTARY SYSTEM Subcutaneous tissue Fibroma	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	*52
RESPIRATORY SYSTEM Lungs and bronchi Trachea	+++	+++	+ -	+ +	+ +	+ +	+ +	+ +	+++++	+ +	+ +	+ +	+ +	+ +	+ +	+ +	+++++	+ +	+++	+++	+ +	+ +	+ +	+ +	+ +	+ +	52 47
HEMATOPOIETIC SYSTEM Bone marrow Spieen Lymph nodes Thymus	+++-	+ + + +	++++	+++++	+++++	+ + + +	+++++	+ + + +	+ + + +	+ + + +	+ + + +	++++++	+++++	+ + + +	+ + + +	+ + + +	++++-	++++++	++++++	++++++	++++++	++++++	++++	++++	++++++	+ + + +	50 50 51 42
CIRCULATORY SYSTEM Heart	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	52
DIGESTIVE SYSTEM Oral cavity Squamous cell papilloma Salivary gland Liver Neoplastic nodule Bila duct	Z ++ 4	N + +	N + + X	N +++++	N ++ +	N ++ +	N + + X	N ++ +	N + +	N X + + X +	N + +	N ++++	N + +	N ++++	N + + +	N ++++	N +++++	N ++++	N ++++	N +++++	N +++++	N + + + X +	N + +	N ++++++	N + + +	N + + +	*52 2 51 52 10 52
Bacreas Esophagus Stomach Small intestine Large intestine	++++++	+++++	+ + + + +	+ + + + +	++++++	+++++	++++++	++++++	+ + + + +	+ + + +	++++++	+++++	+++++	+++++	+ + + + + +	+++++	+++++	- + + + +	+++++	+++++	- + + + + +	- + + + + +	-++++	-++++	+++++	+ + + + +	50 51 50 49 49
URINARY SYSTEM Kidney Urinary bladder	+++	+ +	+ +	+ +	+ +	+ +	+ +	+ +	+ +	+ +	+ +	+ +	+ +	+ +	+ +	+ +	+ +	+ +	+ +	+ +	+ +	++++	+ +	++++	+ +	+ +	51 50
ENDOCRINE SYSTEM Pituitary Carcinoma, NOS Adenoma, NOS Adenoma, NOS	+	+	+	+	+	+	+	+ X	+ X	+	+	+	+	+ X +	+	+ X	+ X +	+ X +	+ X	+ X +	+ X	+	+	+	+ X +	* *	52 2 20 51
Cortical adenoma Pheochromocytoma Ganglioneuroma	T	x	т	T	т	,	T	T	T	r	'	,	,	1	x		1		ł				x			X	
Thyroid Follicular cell carcinoma C-cell adenoma C-cell carcinoma	+ X	+	+	+ x	+	+ X	+	*	+ X X	+ x	+	+	+	+	+ X	+	+	+	+	+ X	+	+ x	+	+	+ X	+	50 1 10 3
Parathyroid Pancreatic islets Islet cell adenoma Islet cell carcinoma	++	+	+	+	+	+ +	+	+ +	+ +	- + X	+	+ + X	+	+	+	+	+	+	+ +	+	+	+	+	+	+	+ +	50 2 2
REPRODUCTIVE SYSTEM Mammary gland Adenocarcinoma, NOS Fibroadenoma	+	* X	N	N	+	+	N	+ X	N	+ X	+	+	+	N	N	+ X	+ X	+	+ X	+	+ X	N	+ X	+	+ X	+ X	*52 1 12
Oterus Adenocarcinoma, NOS Endometrial stromai polyp Ovary	+	+	+	+ X +	+	+	+ X +	+	+ X +	+ X +	+ X +	+	+	+ X +	+ X +	+	+	+	+	* X +	+	+ X +	+	+	+ X +	+	51 2 14 51
NERVOUS SYSTEM Brain Carcinoma, NOS, invasive Astrocytoma	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	* x	52 2 2
BODY CAVITIES Pleura Mesothelioma, NOS Peritoneum Fibrosarcoma	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 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	N N	*52 1 *52 1
ALL OTHER SYSTEMS Multiple organs, NOS Fibrosarcoma, metastatic Leukemia, mononuclear cell	N	N	N X	N	N X	N	N	N	N	N	N	N	N	N X	N	N	N	N	N	N	N	N	N	N	N	N	*52 1 8

# TABLE B3. INDIVIDUAL ANIMAL TUMOR PATHOLOGY OF FEMALE RATS IN THE FIRST TWO-YEARFEED STUDY OF MIREX: 0.1 ppm

ANIMAL NUMBER	2 0 0	2 1 8	1 8 0	1 8 2	2 1 0	2 0 8	1 4 8	1 5 2	1 8 4	2 4 0	2 1 6	2 2 0	1 8 6	2 1 2	1 4 6	1 5 0	1 5 4	1 5 6	1 5 8	1 6 0	1 6 2	1 6 4	1 6 6	1 6 8	1 7 0	$\frac{1}{7}$
WEEKS ON STUDY	0 6 6	0 7 9	0 8 4	0 8 4	0 8 7	0 9 1	0 9 4	0 9 8	0 9 8	1 0 1	1 0 2	1 0 2	1 0 3	1 0 5	1 0 9	1 0 9	1 0 9	1 0 9	1 0 9	1 0 9	1 0 9	1 0 9	1 0 9	1 0 9	1 0 9	1 0 9
INTEGUMENTARY SYSTEM Subcutaneous tissue Fibroma	+	+	+	+	N	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+
RESPIRATORY SYSTEM Lungs and bronchi C-cell carcinoma, metastatic Trachea C-cell carcinoma, invasive	+	+	++	+ +	+ -	+ +	+ +	+ +	++	++	++	+ +	++	+ +	+	+ +	+	++	+ +	++	++	++	+ +	++	+ +	+++
HEMATOPOIETIC SYSTEM Bone marrow Spieen Hemangiosarcoma Lymph nodes Thymus	+++++++++++++++++++++++++++++++++++++++	+++++	+ + X + -	+++++	++++++	++++++	+ + +	+ + +	+ + + +	++++	++++++	++++++	-++++	+++++	++++++	+ + + +	+++++	+++++	+ + + +	+ + + +	+ + + +	+ + + -	+ + + +	++++++	+ + + +	+ + + +
CIRCULATORY SYSTEM Heart	+	+	÷	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+
DIGESTIVE SYSTEM Salivary gland Liver Neoplastic nodule Bile duct Pancreas Hemangiosarcoma, invasive Esophagus Stomach Small intestine Large intestine	+++++++++++++++++++++++++++++++++++++++	++ ++ ++++	++ ++ <b>X</b> ++++	++ ++ ++++	+++++++	+ + + + + + + + + + + + + + + + + + + +	+++++++++++++++++++++++++++++++++++++++	+ + + + + + + + + + + + + + + + + + + +	++++++	++ ++ ++++	++ ++ ++++	+++++++++++++++++++++++++++++++++++++++	++ ++ +++	+++++++	++ ++ ++++	+ + + + + + + + + + + + + + + + + + + +	++ ++ ++++	++ ++ ++++	+++++++	+++++++	++ ++ ++++	++X++ ++++	+ + + + + + + + + + + + + + + + + + +	+ + + + + + + + + + + + + + + + + + +	+ + + + + + + + + + + + + + + + + + +	+++++++++++++++++++++++++++++++++++++++
URINARY SYSTEM Kidney Urinary bladder	   + +	+++	+++	++++	++++	++++	+++++	+++	++++	+++++	+++++++	++++	++++	++++	+++	+++	+ + +	+	+++	+- +	+++	++++	+++	+++	+++	+++
ENDOCRINE SYSTEM Pituitary Carcinoma, NOS Adenoma, NOS Adrenal	+ X +	+	++	+ X +	+	+	+	+ X +	+ X +	+	+ X +	+	+	++	+	+ X +	+ X +	+ X +	+	+- X +	+ X +	+ X +	+ X +	+ X +	+ X +	++
Cortical adenoma Pheochromocytoma Thyroid Follicular cell carcinoma C-cell adenoma C-cell acenoma	+	+	+	+	x -	+ X	+	+	-	+	+	+	+	+	X +	+	+	+	+	+	+	+ X	+ X	+	+	+
Parathyroid Pancreatic islets Islet cell carcinoma	+++	 +	+ +	+ +	- +	+ +	4 + +	+ +	 +	+ +	+	÷	+ +	+ +	+ +	+ +	+ +	+ +	+ + X	+ +	+ +	+ +	 +	+ +	+ +	+++
REPRODUCTIVE SYSTEM Mammary gland Fibroadenoma Preputial/clitoral gland Adenoma, NOS Uterus Endometrial stromal polyp Ovary	+ N + +	+ N + +	+ X N + +	+ N + +	+ X N + +	+ X N + X + X +	+ X N + +	+ N + +	+ N + +	+ X + +	+ N + +	+ NX+ +	+ N + +	+ N + +	+ N + X +	+ X N + +	+ N + +	N N -	N N + +	- N + +	+ X N + +	+ N + +	N N + +	+ N + +	N N + +	N N + +
Granulosa cell tumor NERVOUS SYSTEM Brain Carcinoma, NOS, invasive Astroctoma	+ x	+	+	+	+	+	+	+	+	× +	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+
ALL OTHER SYSTEMS Multiple organs, NOS Malignant lymphoma, histiocytic type Leukemia, mononuclear cell	N	N X	N	N	N	N	N X	N	N	N X	N	N	N X	N X	N	N	N	N	N	N	N	N	N	N	N	N

### TABLE B3. INDIVIDUAL ANIMAL TUMOR PATHOLOGY OF FEMALE RATS: 0.1 ppm (Continued)

ANIMAL NUMBER	1 7 4	1 7 6	1 7 8	1 8 8	1 9 0	1 9 2	1 9 4	1 9 6	1 9 8	2 0 2	2 0 4	2 0 6	2 1 4	2 2 2	2 2 4	2 2 6	2 2 8	2 3 0	2 3 2	2 3 4	2 3 6	2 3 8	2 4 2	2 4 4	2 4 6	2 4 8	TOTAL
WEEKS ON STUDY	1 0 9	1 0 9	1 0 9	1 0 9	1 0 9	1 0 9	1 0 9	1 0 9	1 0 9	1 0 9	1 0 9	1 0 9	1 0 9	1 0 9	1 0 9	1 0 9	1 0 9	1 0 9	1 0 9	1 0 9	1 0 9	1 0 9	1 0 9	1 0 9	109	1 0 9	TISSUES
INTEGUMENTARY SYSTEM Subcutaneous tissue Fibroma	*	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	* x	+	*52 2
RESPIRATORY SYSTEM Lungs and bronchi C-cell carcinoma, metastatic Trachea C-cell carcinoma, invasive	++++	++	+ +	+ +	+ +	++	++	+ +	+ X + X	+ +	++	+ -	++	+ +	++	++	++	++	++	++	+++	++	++	++	++	+ +	52 1 47 1
HEMATOPOIETIC SYSTEM Bone marrow Spleen Hemangiosarcoma Lymph nodes Thymus	++++++	++++++	+++++++	1+++	+ + + +	++++++	+ + + +	++++++	 + + + +	+++++++	+++++++	++++++	++++++	+++++	+++++++	++++	++++++	+++++	++++++	+ + + +	++++++	++++++	++++++++++++++++++++++++++++++++++	++++-		+ + + +	49 52 1 52 47
CIRCULATORY SYSTEM	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	52
DIGESTIVE SYSTEM Salivary gland Liver Neoplastic nodule Bile duct Pancreas Hemangiosarcoma, invasive Esophagus Stomach Small intestine Large intestine	+ + X + + + + + + + + + + + + + + + + +	+++++++++++++++++++++++++++++++++++++++	++ ++ ++++	+ + + + + + + + + + + + + + + + + + + +	++ ++++	+++++++++++++++++++++++++++++++++++++++	++X++++++	+++++++++++++++++++++++++++++++++++++++	+++++++++++++++++++++++++++++++++++++++	+++++++++++++++++++++++++++++++++++++++	+++++++++++++++++++++++++++++++++++++++	+++++++++++++++++++++++++++++++++++++++	+++++++++++++++++++++++++++++++++++++++	+++++++++++++++++++++++++++++++++++++++	++ ++ ++++	+++++++++++++++++++++++++++++++++++++++	++ ++ ++++	++ ++ ++++	++ ++ ++++	++ ++ ++++	++ ++ ++++	++X++ ++++	++X++ ++++	++ ++ +++	++ ++ ++++	+++ ++++++++++++++++++++++++++++++++++	51 52 5 52 52 1 45 52 52 52 49
URINARY SYSTEM Kidney Urinary bladder	+++++	++++	+++	+++++	++++	+++	++++	+++	+++	+ + +	++++	+++	+ +	++++	+++++	+++	+++++	+++	+++	+++	++++	++++	++++	+++	+++	+ + +	52 51
ENDOCRINE SYSTEM Pituitary Carcinoma, NOS Adenoma, NOS Adrenai Cortical adenoma	+ + X	+	+ X +	+	+	+	+	+ X +	+ X +	+ X +	- +	+	+ X + X	+	+	+ X +	+ X +	++	+ +	+ X +	+	+ +	+	+ X +	+ X +	+ X +	51 1 24 52 2
Pheochromocytoma Thyroid Follicular cell carcinoma C-cell adenoma C-cell carcinoma Parathyroid Pancreatic islets Islet cell carcinoma	+ X + +	++++	+ + + +	+ -+	+ X + +	+ ++	+ X + +	+ + +	+ X +	x + x + x + + + x	* * + +	+ + +	+ + + +	+ + +	+ X + +	+ X + +	+ + +	+ X + +	++++	+ + +	+ + +	+ <u>x</u> +	+ + +	+ + +	+ + +	+ X + +	3 50 9 4 43 52 2
REPRODUCTIVE SYSTEM Mammary gland Fibroadenoma Preputial/clitoral gland Adenoma, NOS Uterus Endomatrial stromal polyn	N N +	+ N +	+ N +	+ N +	+ N +	+ N +	+ N +	+ X N + X + X	+ 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 N +	*52 8 *52 1 51
Granulosa cell tumor	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	51
NERVOUS SYSTEM Brain Carcinoma, NOS, invasive Astrocytoma	+	+	+	+	+	+	+	+	+	+	+	+	+	+ X	+	+	+	+	+	+	+	+	+	+	+	+	52 1 1
ALL OTHER SYSTEMS Multiple organs, NOS Malig. lymphoma, histiocytic type Leukemia, mononuclear cell	N	N	N	N X	N	N	N	N	N	N	N	N	N	N	N	N X	N	N X	N X	N	N	N	N	N	N	N	*52 1 8

# TABLE B3. INDIVIDUAL ANIMAL TUMOR PATHOLOGY OF FEMALE RATS IN THE FIRST TWO-YEAR FEED STUDY OF MIREX: 1 ppm

ANIMAL NUMBER	3 3 6	3 1 0	3 4 6	3 1 4	3 4 0	3 4 4	2 7 0	2 9 2	3 2 6	3 2 0	3 3 2	3 0 2	2 6 0	2 9 4	3 0 4	3 0 8	3 5 2	2 5 6	2 8 2	2 5 0	2 5 2	2 5 4	2 5 8	2 6 2	2 6 4	2 6 6
WEEKS ON STUDY	0 7 8	0 8 2	0 8 4	0 8 6	0 8 6	0 8 6	0 9 0	0 9 1	0 9 1	0 9 3	0 9 6	0 9 7	0 9 8	1 0 2	1 0 3	1 0 4	1 0 6	1 0 7	1 0 7	1 0 8	1 0 8	1 0 8	1 0 8	1 0 8	1 0 8	1 0 8
RESPIRATORY SYSTEM Lungs and bronchi Alveolar/bronchiolar carcinoma Trachea	+	+	++	+	+	+ -	+ +	+++	++	+	+ +	+++	+ +	+ +	+ +	++	+++	+ +	+ +	+ +	+ +	+ +	+++	+ +	+ +	+++
HEMATOPOIETIC SYSTEM Bone marrow Spleen Leukemia, mononuclear cell Lymph nodes Thymus Carcinoma, NOS	+++-	- + +	+++-	++++-	- + + -	+ + + +	++++++	+ + + +	+ + + +	+ + + +	+ + + +	++++-	+++-	+ + X + +	+ + + +	+++++	+ + + +	+ +++	+ + + +	+ + + +	+ + + +	+++++	+ + + +	+ + + +	+++++	+ + + +
CIRCULATORY SYSTEM Heart	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+
DIGESTIVE SYSTEM Salivary gland Liver Neoplastic nodule Bile duct Acinar cell adenoma Esophagus Stomach Small intestine	+++++++++++++++++++++++++++++++++++++++	+++++++	++ ++ +++	+++++++++++++++++++++++++++++++++++++++	+++++	+++++++++++++++++++++++++++++++++++++++	++ ++ ++	+ + + + + + + + + + + +	+ + + + + +	+++++++	++ ++ +++	+++++++++++++++++++++++++++++++++++++++	-+++-++	+++++++++++++++++++++++++++++++++++++++	+++++++++++++++++++++++++++++++++++++++	+++++++++++++++++++++++++++++++++++++++	+++++++++++++++++++++++++++++++++++++++	+++++++++++++++++++++++++++++++++++++++	+++++++++++++++++++++++++++++++++++++++	++X+++++++++++++++++++++++++++++++++++	+++++++++++++++++++++++++++++++++++++++	+++++++++++++++++++++++++++++++++++++++	+++++++++++++++++++++++++++++++++++++++	++++++++++++++++++++++++++++++++++++++	++ <b>X</b> ++ +++	+++++++++++++++++++++++++++++++++++++++
Large intestine URINARY SYSTEM Kidney Urinary bladder	+++	+++	+  + +	+ + +	+++	+	+++	+ + +	+	+ + +	+ + + +	+ + + +	+ + + +	+ + + +	+ + +	+ + + +	+ + + +	+++	+ + +	+ + +	+ + +	+ + + +	+++++	+ + + +	+  + +	+  + +
ENDOCRINE SYSTEM Pituitary Carcinoma, NOS Adenoma, NOS Adrenai Cortical adenoma Pheochromocytoma Thyroid C-cell adenoma C-cell adenoma	++	+ X + -	++++++	+ X + +	++	+ X + +	 + +	+++++	+ X + +	+ X + +	++++	 + +	+++++	+ X + X +	+ X + X +	+ x + x	++++	++	+++++	+ X + X +	+ X + +	+ X + X	+ X + +	+ X + +	+ + X +	+ X + X
Parathyroid Panchyroid Islet cell adenoma Islet cell carcinoma	+ -	+ +	+	+	+ +	+ +	+ +	+ +	+	+ +	 +	+ +	+ +	+ +	+ +	+ +	+ +	+ +	+ + X	+ +	+ +	+ +	+ + X	+ +	+ +	+ +
REPRODUCTIVE SYSTEM Mammary gland Adenocarcinoma, NOS Fibroadenoma Preputia/clitoral gland	+ N	+ N	+ X N	+ X N	+ N	+ N	+ N	+ N	+ X N	N N	+ N	+ X N	+ N	+ X N	+ N	+ X N	+ N	+ N	+ N	+ X N	+ X N	+ N	+ X N	+ N	+ N	+ N
Adenoma, NOS Cystadenoma, NOS Uterus Adenocarcinoma, NOS Endometriai stromal polyp Endometriai stromal sarcoma Ovary	+	+	+	+	+	+	+	+ X +	+	+	+ X +	+	+	+	+	+	+	+ X +	+	+	+	+	+ +	+	+ X +	+
NERVOUS SYSTEM Brain Carcinoma, NOS, invasive	+	+	+	+	+	+	+	+	+	+	+	-	+	+	+	+	+	+	+	+	+	+	+	+	+	+
ALL OTHER SYSTEMS Multiple organs, NOS Leukemia, mononuclear cell	N	N X	N	N X	N X	N	N X	N	N	N	N X	N X	N X	N	N X	N X	N	N	N	N X	N	N	N	N	N	N

### TABLE B3. INDIVIDUAL ANIMAL TUMOR PATHOLOGY OF FEMALE RATS: 1 ppm (Continued)

ANIMAL NUMBER	2 6 8	2 7 2	3 1 8	2 7 4	2 7 6	2 7 8	2 8 0	2 8 4	2 8 6	2 8 8	2 9 0	2 9 6	2 9 8	3 0 0	3 0 6	3 1 2	3 1 6	3 2 2	3 2 4	3 2 8	3 3 0	3 3 4	3 3	3 4 2	3 4 8	3 5 0	
WEEKS ON STUDY	1 0 8	1 0 8	1 0 8	1 0 9	1 0 9	1 0 9	1 0 9	1 0 9	1 0 9	1 0 9	1 0 9	1 0 9	1 0 9	1 0 9	1 0 9	1 0 9	1 0 9	1 0 9	1 0 9	1 0 9	1 0 9	1 0 9	1 0 9	1 0 9	1 0 9	1 0 9	TOTAL: TISSUES TUMORS
RESPIRATORY SYSTEM	+		+		+	+	+	+	+	+	+	+	+	+		+	+	 +	 +	+		+		 +	- <u> </u>		52
Alveolar/bronchiolar carcinoma Trachea	+	-	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	х +	+	+	+	+	1 45
HEMATOPOIETIC SYSTEM Bone marrow Spleen	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	49
Leukemia, mononuclear cell Lymph nodes Thymus Carcinoma, NOS	+++	+++	+ -	+ +	+ + X	+ +	+ +	+ +	+ -	+ -	+ +	1 52 42 1															
CIRCULATORY SYSTEM Heart	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	52
DIGESTIVE SYSTEM Salivary gland	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	51
Liver Neoplastic nodule	+	+	+	+	+	+	+	+	+	+	+	+	x x	+	+	+	+	+	+	× x	+	+	+	+	+	+	52 4
Pancreas Acinar cell adenoma	+	+	+	+ + X	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	÷	+	+	51
Esophagus Stomach	+++	+	++	+	++	++	+	++	+++++++++++++++++++++++++++++++++++++++	+	+	+++	+++	+	++++	+	+	+++	+	+	++	+	+	++	+++	+	29 50
Large intestine	+	+	-	+	+	+	+	+	+	+	+	+	+	++	+	++	+	+	+	+	+	++	+	+	+	+	49 46
URINARY SYSTEM Kidney Urinary bladder	++++	+++	++++	++++++	+++++	+++++	++++	++++	++++	+++	++++	++++	+++++	+ +	+++	++++	++++	++++	+++++	++++	+ +	+++	++++	++++	++++	+++++	52 52
ENDOCRINE SYSTEM Pituitary	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	50
Carcinoma, NOS Adenoma, NOS Adrenal	X +	+	X +	+	X +	X +	X +	+	+	X +	X +	X +	X +	+	X +	X +	X +	X +	х +	+	+	X +	X +	X +	X +	+	1 31 52
Cortical adenoma Pheochromocytoma Thyroid	+	+	х +	+	+	X +	+	+	+	+	х +	х +	+	+	+	+	X +	+	+	+	+	+	+	+	X +	+	5 5 48
C-cell adenoma C-cell carcinoma Parathyroid	+	÷	_	+	+	+	+	х +	+	+	X +	+	+	+	+	+	+	-	+	+	х -	х +	+	+	÷	+	6 1 45
Pancreatic islets Islet cell adenoma Islet cell carcinoma	+	+	+	÷	÷	+	+	÷	+	+	÷	÷	+	÷	+	÷	÷	+	÷	÷	+	÷	+	÷	÷	÷	51 1 1
REPRODUCTIVE SYSTEM Mammary gland Adenocarcinoma, NOS Eibrocarcinoma, NOS	N	N	+	+	+	N	+	+	+	+	+	+	+	÷	+	N	+	+	+	+	+	+	+	+	* *	+	*52
Preputial/clitoral gland Adenoma, NOS Custadenoma, NOS	N	Ν	Ň	N	N	N	N	N	N	Ν	N X	Ν	Ν	N	Ň	N	N	N	N V	N	N	N	N	N V	N	N	*52
Uterus Adenocarcinoma, NOS	+	+	+	+	+	+	+	+	+	+	+	+	+	*	+	+	+	+	+	+	+	+	+	+	+	+	52 1
Endometrial stromal polyp Endometrial stromal sarcoma Ovary	+	+	+	+	х +	X +	+	+	x +	+	+	+	+	+	+	+	+	+	+	+	х +	+	х +	х +	+	х +	$ \begin{array}{c} 10\\ 1\\ 52 \end{array} $
NERVOUS SYSTEM Brain Carcinoma, NOS, invasive	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	* x	+	+	+	+	+	+	+	51 1
ALL OTHER SYSTEMS Multiple organs, NOS Leukemia, mononuclear cell	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	N	*52 10

# TABLE B3. INDIVIDUAL ANIMAL TUMOR PATHOLOGY OF FEMALE RATS IN THE FIRST TWO-YEARFEED STUDY OF MIREX: 10 ppm

ANIMAL NUMBER	3 7 4	4 5 2	3 6 8	4 1 6	3 9 2	4 4 0	3 9 0	4 1 2	3 5 4	3 6 0	3 6 2	4 5 0	3 5 6	3 7 2	3 9 4	3 5 8	4 2 6	3 6 4	3 6 6	3 7 0	3 7 6	3 7 8	3 8 0	3 8 2	3 8 4	3 8 6
WEEKS ON STUDY	0 7 7	0 7 9	0 8 2	0 8 8	0 9 2	0 9 4	0 9 8	0 9 9	1 0 0	1 0 3	1 0 3	1 0 3	1 0 5	1 0 5	1 0 5	1 0 6	1 0 6	1 0 8	1 0 8							
INTEGUMENTARY SYSTEM Subcutaneous tissue Fibroma Fibrosarcoma	+	+	+	N	+	+	+	+	+	+	+	+	+ X	+	+	+	+	+	+	+	+	+	+	+	+	+
RESPIRATORY SYSTEM Lungs and bronchi C-cell carcinoma, metastatic Fibrosarcoma, metastatic Trachea	+	+	+	+	+	+	+	+	+	+	+	+	+ X +	+	+ +	++	+	+	+	+	+	+	+	+	+	+++
HEMATOPOIETIC SYSTEM Bone marrow Spleen Leukemia, mononuclear cell Lymph nodes Thymus	+ + + + +	+ + +	- - + -		+ + +	* + + +	++++	++ + +	+ + + +	+ + + -	+ + + -	++++-	++++++	+ + + +	+ + +	+ + X +	+++++	+ + + +	+++++	+++++	+ + +	+ + + +	+ + + -	+ + + +	+ + + +	+ + + +
CIRCULATORY SYSTEM Heart	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+
DIGESTIVE SYSTEM Salivary gland Liver Neoplastic nodule Bile duct Pancreas Esophagus Stomach Small intestine Large intestine	+++++++++++++++++++++++++++++++++++++++	++++++	++++++	+++	++++++-	+++++++++++++++++++++++++++++++++++++++	+++++++	++ ++++	++++-+	- + ++-+++++++++++++++++++++++++++++++	+ + + + + + + + + + + + + + + + + + + +	+ + + + + + + + + + + + + + + + + + + +	+ + + + + + + +	+++++++++++++++++++++++++++++++++++++++	+++++++++++++++++++++++++++++++++++++++	+++++++++++++++++++++++++++++++++++++++	+ + + + + + -	+++++++++++++++++++++++++++++++++++++++	+++++++++++++++++++++++++++++++++++++++	+++++++++++++++++++++++++++++++++++++++	++ ++++++++++++++++++++++++++++++++++++	+ + + + + + + + + + + + + + + + + + + +	+++++++++++++++++++++++++++++++++++++++	+++++++++++++++++++++++++++++++++++++++	+ + + + + + + + + + + + + + + + + + + +	++ ++++++
URINARY SYSTEM Kidney Urinary bladder Transitional cell carcinoma Sarcoma, NOS, invasive	+++	+ +	+ +	- + X	+ +	+ +	+ +	+++	+ +	+ +	+ +	+ +	+ -	+ +	+ +	+ +	+++	+ +	+ + +	+ +	+ +	+ +	++++	++++	+ +	+++
ENDOCRINE SYSTEM Pituitary Carcinoma, NOS Adenoma, NOS Fibrosarcoma, invasive Adrenal Cortical adenoma Pheochromocytoma Thyroid Follicular cell adenoma	+	+ X + +	+ + +	-	++++	+ X + +	+ X +	+ + +	+ + -	+ X + +	+ X +	++++	+ X + +	+ x * x +	+ X + +	+ + +	+ X + X -	++++	+++++	+ X + +	+++++	++++	+ X + +	+ X + +	+ X +	++++
Follicular cell carcinoma C-cell adenoma C-cell carcinoma Parathyroid Pancreatic islets Islet cell adenoma Islet cell carcinoma	- +	- +	+ -	-	X + +	+ +	+ 	+ +	+ +	x +	+ +	+ +	+ + X	+ +	+ +	+ +	+++	+ +	+ +	x + +	+ +	+ +	+ +	+ +	+ +	++++
REPRODUCTIVE SYSTEM Mammary gland Fibroadenoma Preputial/clitoral gland Cystadenoma, NOS Uterus Sarcoma, NOS Endometrial stromal polyp Ovary Fibrosarroma	+ X N +	N N + +	+ N +	+ N + X +	+ N + +	+ N + X +	+ N + +	+ N + +	+ N + +	+ N + X +	+ X N + X +	+ N + +	+ N + +	+ X N + +	+ N + +	+ X N +	+ N + X +	+ X N + +	+ X N + +	N N + +	+ X N + +	+ N + +	+ X N + +	+ N + X +	+ N + X +	N N + X +
NERVOUS SYSTEM Brain Carcinoma, NOS, invasive Astrocytoma	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	* X	+	+	+	* X	+	+	+	+	+	+
BODY CAVITIES Peritoneum Osteoma	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	Ν
ALL OTHER SYSTEMS Multiple organs, NOS Leukemia, mononuclear cell	N X	N X	N X	N	N	N	N X	N X	N X	N	N	N	N	N	N X	N	N X	N	N X	N	N	N	N	N	N	N

### TABLE B3. INDIVIDUAL ANIMAL TUMOR PATHOLOGY OF FEMALE RATS: 10 ppm (Continued)

ANIMAL NUMBER	3 8 8	3 9 6	3 9 8	4 0 0	4 0 2	4 0 4	4 0 6	4 0 8	4 1 0	4 1 4	4 1 8	4 2 0	4 2 2	4 2 4	4 2 8	4 3 0	4 3 2	4 3 4	4 3 6	4 3 8	4 4 2	4 4 4	4 4 6	4 4 8	4 5 4	4 5 6	TOTAL
WEEKS ON STUDY	1 0 8	1 0 8	1 0 8	1 0 8	1 0 8	1 0 8	1 0 8	1 0 8	1 0 8	1 0 8	1 0 8	1 0 8	1 0 8	1 0 8	1 0 8	1 0 8	1 0 8	1 0 8	1 0 8	1 0 8	1 0 8	1 0 8	1 0 8	1 0 8	1 0 8	1 0 8	TISSUES
INTEGUMENTARY SYSTEM Subcutaneous tissue Fibroma Fibrosarcoma	+	+	* X	+	+	N	+	+	+	+	+	+	+	+	N	+	+	N	+	+	+	+	+	+	N	+	*52 1 1
RESPIRATORY SYSTEM Lungs and bronchi C-cell carcinoma, metastatic Fibrosarcoma, metastatic Trachea	+	+++	++	++	+	+	+++	+	* x +	 X +	+	+++	+	++	+++	++	++	++	+	+++	+	++	++	+	+++	++	52 2 1 47
HEMATOPOIETIC SYSTEM Bone marrow Spleen Leukemia, mononuclear cell Lymph nodes Thymus	+++++	+ + + + + + +	++++++	+++++++	++++++	++++++	++ ++	+ + + +	++++++	+ + + +	++++++	++++-	++++++	+ + + + + + +	++++-	++++++	++ ++	+++++++++++++++++++++++++++++++++++++++	++++++	++++++	+++++++	+++++	++ ++ ++	++++-	+ + + +	++++++	50 50 1 51 42
CIRCULATORY SYSTEM Heart	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	52
DIGESTIVE SYSTEM Salivary gland Liver Neoplastic nodule Bile duct Pancreas Esophagus Stomach Small intestine Large intestine	+ + X + + + + + + + + + + + + + + + + +	++ ++ +++++	+ + X + + - + + + +	+ + X + + + + + + + + + + + + + + + + +	- ++ ++++++	++ ++ +++++	++ ++ +++++	+ + X + + + + + + + + + + + + + + + + +	++ ++++++	++ ++++++	++ ++++++	++ +++++	++ +++++	++ ++++++	++ ++++++++++++++++++++++++++++++++++++	++ +++++	++ ++++++	++ ++++++	++ ++ ++++	+ + <b>X</b> + + + + + + + + + + + + + + + + + + +	++ +++++	++ ++++++	++ ++++++	++ +++++	++ ++++++	+ + + + + + + + + -	51 52 5 52 49 35 51 48 42
URINARY SYSTEM Kidney Urinary bladder Transitional cell carcinoma Sarcoma, NOS, invasive	+++++++++++++++++++++++++++++++++++++++	++++	+ +	+++	+ +	++++	++++	+ +	+++++	++	+ +	++++	+ + X	++++	++++	+ +	+ +	+++	++++	+ +	+ +	++	++++	+ +	++++	+++	51 51 1 1
ENDOCRINE SYSTEM Pituitary Carcinoma, NOS Adenoma, NOS Fibrosarcoma, invasive Adrenal	+	+	+	+	+	+ X +	+	+	+	+ X +	+ X +	+	+ X	+	+	+ X +	+ X	+ X +	+	+ X	+	+	+ X +	+ X +	+ X +	+ X +	51 2 24 1 51
Cortical adenoma Pheochromocytoma Thyroid Follicular cell adenoma	X   +	+	+	+	+	+	+	+	X +	+	+	+	+	+	, +	+	+	+	+	+	+	+	+	+ X	+	+	3 1 47 1
C-cell adenoma C-cell carcinoma Parathyroid Pancreatic islets Islet cell adenoma Islet cell carcinoma	+ +	+ +	X + +	X + +	+ +	+++	+ +	+ + X	X + + X	x +	+ +	+ +	+ +	X + +	+++	+ +	x + +	+ +	++	- +	+ +	+ +	+ +	+ +	+ + X	X + +	5 4 46 49 1 3
REPRODUCTIVE SYSTEM Mammary gland Fibroadenoma Preputial/clitoral gland Cystadenoma, NOS Uterus Sarroma, NOS Endometrial stromal polyp Ovary Fibroacroma	N N + X +	+ N + +	+ N + +	+ N + X +	+ N + +	N N + +	+ X N + X + + +	+ N + +	N N + +	+ N + +	N N + +	+ N + X +	+ X N + +	+ X N + +	N N + +	+ X N + X +	+ X N + +	N N + +	N N + X +	+ N +	+ N +	+ N +	+ X N +	+ X N + +	+ X N +	+ X N X + +	$ \begin{array}{c}                                     $
NERVOUS SYSTEM Brain Carcinoma, NOS, invasive Astrocytoma	+	+	+	+	+	+	+	+ X	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	52 2 1
BODY CAVITIES Peritoneum Osteoma	N	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	*52
ALL OTHER SYSTEMS Multiple organs, NOS Leukemia, mononuclear cell	N	N X	N	N	N X	N	N	N	N	N	N	N	N	N X	N	N	N X	N	N	N	N	N	N	N	N	N	*52 13

TABLE B3.	INDIVIDUAL ANIMAL	<b>TUMOR PATHOLOGY</b>	OF FEMALE	RATS IN THE	E FIRST TWO-YEAR
		FEED STUDY OF MIR	tEX: 25 ppm		

ANIMAL NUMBER	5 2 0	5 1 8	558	5 7 0	5 0 4	5 2	5 1 4	5 6 6	5 2 6	5 0 8	5 1 2	4 9 8	5 0 0	5 1 0	5 5	5 7 4	5 7 6	5 0 2	5 0 6	5  1 6	5 2 2	5 2 4	5 2 8	5 3 0	5 3 2	5 3 4
WEEKS ON STUDY	0 4 9	0 6 8	0 8 9	0 9 6	1 0 1	1 0 2	1 0 3	1 0 4	1 0 5	1 0 6	1 0 6	1 0 7	1 0 7	1 0 7	1 0 7	1 0 7	1 0 7	1 0 8	1 0 8	1 0 8	1 0 8	1 0 8	1 0 8	1 0 8	1 0 8	1 0 8
INTEGUMENTARY SYSTEM Subcutaneous tissue Fibrosarcoma	+	+	N	+	+	+	* x	+	+	+	+	N	+	+	+	+	+	+	+	+	+	+	+	+	+	+
RESPIRATORY SYSTEM Lungs and bronchi Fibrosarcoma, metastatic Trachea	++	++	+++	++	++	++	+ X +	+++	++	++	++	++	++	++	++	++	+	+	+ +	+++	+	+++	+++	++	+ +	+ +
HEMATOPOIETIC SYSTEM Bone marrow Spleen Leukemia, mononuclear cell Lymph nodes Thymus	+++++	+ + + +	++ ++ ++	+ + + +	+ + + +	+ + + +	+ + + +	++ ++ ++	++++++	+ + + +	++++++	++++++	+ ++++	++ + ++	- + + +	 + + + +	+++++	+ + + + +	+ + X + +	++++++	+++++	++++++	+++++	+ + +	~+ + + -	+ + + +
CIRCULATORY SYSTEM Heart	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+
DIGESTIVE SYSTEM Salivary gland Liver Neoplastic nodule Hepatocellular carcinoma Bila durt	+++++++++++++++++++++++++++++++++++++++	++++++	+++++	+ + X +	+++++	+++++	++++++	+++++	++++++	++++++	+ + X	+++++	+ + X +	+++++++++++++++++++++++++++++++++++++++	+++++	+++++	++++++	++++++	++++++	+++++	++++++	++++++	+ + X +	++++++	++++++	+++++++++++++++++++++++++++++++++++++++
Acinar cell adenoma Esophagus Stomach Small intestine Papillary adenoma	++++	· + + + +	+ +++	++++	- +	+ +++	+ +++	+ +	+ + +	+ + + X	+ + + +	+ + + +	++	+ + + +		++++	+++	+++++	+ - + +	·+  ++	++++	+ + +	· + + + +	+ + + +	+ + + +	+ + + +
Large intestine URINARY SYSTEM Kidney	+	+	+	+	+	+	+	- +	+	+	+	+	+	++	-	++	+	+	+	+	+	+	+	+	+ +	+ 
ENDOCRINE SYSTEM Pituitary Carcinoma, NOS Adenoma, NOS	+	+	- + X	+	 x	+ + X	+ +	+	+	+ + X	+	+	+ + X	+	- + X	+ + X	+	+ + X	+ + X	+	+	+ + X	+ + X	+ + X	+ + X	+ + X
Adrenal Cortical adenoma Pheochromocytoma Thyroid C-ceil adenoma	+++	+	+	+ + X	+ +	+	+ +	+	+ + X	+	+ +	+	+	+ +	-	+ X +	* -	+	+	+ X +	+ + X	+	+	+	+	+
Parathyroid Pancreatic islets Islet cell carcinoma Islet cell carcinoma	+++	+	+ +	+ +	+ -	+	 + X	+ +	 +	+ +	+ + X	+ +	+ +	+ +	+ -	+	+ +	+ +	+ +	+ +	+	+ +	+	+ + X	+ +	+ +
REPRODUCTIVE SYSTEM Mammary gland Adenocarcinoma, NOS Fibroma	N	+	+	+	+	+	+	+	+	+	+ X	+	N	+	+	+	N	+	+	+	N	+	+	+	+	N
Fibroadenoma Uterus Endometrial stromal polyp Endometrial stromal sarcoma	+	+	+	+	+	* +	+ X	× +	+	+	+	x +	+ X	+	+	+	+	+ X X	+	+-	+	+	+ X	+	× +	+
NERVOUS SYSTEM Brain Carcinoma, NOS, invasive	+	+	+	+	 *	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+
ALL OTHER SYSTEMS Multiple organs, NOS Leukemia, mononuclear ceil	N X	N X	N	N X	N	N	N	N X	N	N	N	N X	N X	N X	N X	N X	N X	N	N	N	N	N	N	N	N	N

### TABLE B3. INDIVIDUAL ANIMAL TUMOR PATHOLOGY OF FEMALE RATS: 25 ppm (Continued)

ANIMAL NUMBER	5 3 6	5 3 8	5 4 0	5 4 2	5 4 4	5 4 6	5 4 8	5 5 0	5 5 4	5 6 0	5 6 2	5 6 4	5 6 8	5 7 2	5 7 8	5 8 0	5 8 2	5 8 4	5 8 6	5 8 8	5 9 0	5 9 2	5 9 4	5 9 6	5 9 8	6 0 0	
WEEKS ON STUDY	1 0 8	1 0 8	1 0 8	1 0 8	1 0 8	1 0 8	1 0 8	1 0 8	1 0 8	1 0 8	1 0 8	1 0 8	1 0 8	1 0 8	1 0 8	1 0 8	1 0 8	1 0 8	1 0 8	1 0 8	1 0 8	1 0 8	1 0 8	1 0 8	1 0 8	1 0 8	TUTAL: TISSUES TUMORS
INTEGUMENTARY SYSTEM Subcutaneous tissue Fibrosarcoma	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	N	+	+	+	+	+	+	+	+	*	*52 2
RESPIRATORY SYSTEM Lungs and bronchi Fibrosarcoma, metastatic Trachea	   +   +	+++	+	+++	+++	+++	+	+	+++	+++	+++	+	+++	++++	+	++	+++	+++	+	+++	+++	+++	+++	+	+	++	52 1 46
HEMATOPOIETIC SYSTEM Bone marrow Spleen Leukemia, mononuclear celi Lymph modes	+++++++++++++++++++++++++++++++++++++++	++++++	+++++	+++++	+++++	++++	++++++	+++++	++++++	+++++	+++++	+++++	++++++	+++++	+++++	++++	+++++	++++	+++++	+++++	+++++	+++++	++++	++++	+++++	++++++	49 51 1 52
Thymus CIRCULATORY SYSTEM	+	-	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	-	+	+	÷	+	+	+	48
Heart	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	52
DIGESTIVE SYSTEM Salivary gland Liver Neoplastic nodule Hepatocellular carcinoma	++	+ +	+ +	+ +	+ +	+ +	+ +	+ +	+ +	+ +	+ +	+ + X	+ + X	+ +	+ +	+ + X	+ + X	+ +	+ +	+ + X	+ + X	+ +	+ +	+ +	+ +	+ +	52 52 9 1
Bile duct Pancreas Acinar cell adenoma	++++	+ +	+ +	+ +	+ +	+ +	+ +	+ +	+ +	+ +	+ +	+ +	+ +	+ +	+ +	+ +	+ +	+ +	+ +	+ +	+ +	+ +	+ +	+ +	+ +	+ +	52 50 1
Esophagus Stomach Small intestine Papillary adenoma	+++++++++++++++++++++++++++++++++++++++	++++	+++++	+++++++++++++++++++++++++++++++++++++++	+++++	- + + + -	-++	++++	 + +	+ + + -	+++	++++	+++	++++		-++	-+++	+++	+++++	+++++	+++++	+++++	++++	++++	++++	+++++	42 48 47 1
URINARY SYSTEM			+	+	+		+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	42
Kidney Urinary bladder	+++	+ +	+ +	+ +	+ +	+ +	+ +	+ +	+++	+ +	+ +	+ +	+ +	+ +	+ +	+++	+ +	+ +	+ +	+ +	+++	+ +	+++	+ +	+ +	+ +	51 47
ENDOCRINE SYSTEM Pituitary Carcinoma, NOS	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	52 1
Adenoma, NOS Adrenai Cortical adenoma Phenchromocytoma	X +	+	+	X +	X +	X +	* x	X +	+	+	X +	X +	+	+	X +	X +	X + X	X +	X +	X +	+	Х +	+	X +	x + X	X +	30 51 4 2
Thyroid C-cell adenoma	+	+	+	+	* X	+	*	+	+	+	+	+	+	+	+	+	+	+	+	+	+	*	+	+	+	+	48
Parathyroid Pancreatic islets Islet cell adenoma Islet cell carcinoma	++	+ +	+ +	+ +	+ +	+ + X	+ +	+ +	+ +	+ +	+ +	+ + X	+ +	+ +	+ +	+ +	+	+ +	+ +	+ +	+ +	+ +	+++	+ +	++	+ +	44 50 4 1
REPRODUCTIVE SYSTEM Mammary gland Adenocarcinoma, NOS	+	+	+	+	+	+	+	+	N	N	+	+	+	N	+	N	N	+	+	+	+	* x	+	N	N	+	*52
Fibroadenoma Uterus Leiomyoma	+	+	X +	+	+	+	+	X +	+	+	+	+	X +	+	+	+	+	X +	+	X +	+	+	+	+ x	+	X +	10 52
Endometrial stromal polyp Endometrial stromal sarcoma Ovary	+	+	+	+	Х +	+	+	+	х +	+	+	+	х +	+	÷	Х +	÷	X (	₽¥@ +	+	+	+	+	+	X X +	х +	$\begin{array}{c}12\\2\\52\end{array}$
NERVOUS SYSTEM Brain Carcinoma, NOS, invasive	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	52 1
ALL OTHER SYSTEMS Multiple organs, NOS Leukemia, mononuclear cell	N	N X	N	N	N X	N	N	N	N	N	N	N X	N X	N	N	N	N	N	N	N	N X	N X	N X	N	N	N	*52

ANIMAL NUMBER	8 4 2	8 6 4	8 0 2	8 4 4	8 3 8	8 3 6	8 1 8	8 1 6	7 9 8	8 2 6	8 8 0	8 2 8	8 5 0	8 5 2		8 9 2	8 9 4	8 3 2	8 7 6	8 8 8	7 9 4	7 9 6	8 0 0	8 0 4	8 0 6	8 0 8
WEEKS ON STUDY	0 5 2	0 6 9	0 8 0	0 8 1	0 8 5	0 8 7	0 9 1	0 9 3	0 9 4	0 9 4	0 9 4	0 9 7	0 9 8	0 9 9	1 0 1	1 0 4	1 0 5	1 0 7	1 0 7	1 0 7	1 0 8	1 0 8	1 0 8	1 0 8	1 0 8	1 0 8
INTEGUMENTARY SYSTEM Subcutaneous tissue Fibroma	N	+	+	+	+	+	+	+	+	+	+	+	N	+	+	+	+	+	+	+	+	*	+	+	+	+
RESPIRATORY SYSTEM Lungs and bronchi Alveolar/bronchiolar adenoma Trachea	+	+++	+	+++	+	+++	+	+	+++	++	++	+++	+++	+ +	+ +	+ +	++	+ -	++	++	++	+	+ +	+++	++	+++
HEMATOPOIETIC SYSTEM Bone marrow Spleen Hemangioma	+ + +	+++	 +	+++++	+ + +	+++	+ +	+ + X	+ -	+ +	+ +	+ +	+ +	+++	+++	+++	+++	+	+++	+ +	+ +	+ +	+ +	+ +	++++	+ +
Lymph nodes Thymus Carcinoma, NOS	+++	+ +	+ +	+ -	+ -	+	+ +	+ -	+	+ -	+ -	+ 	+ +	л + Х	+ +	+ +	+ +	+ +	+ +	$\frac{x}{x}$	+ +	+ +	+ +	+ -	+ +	+ +
CIRCULATORY SYSTEM Heart	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+
DIGESTIVE SYSTEM Salivary gland Liver Neoplastic nodule Hepatocellular carcinoma	+++++++++++++++++++++++++++++++++++++++	+ +	+++	+ + X	+ +	+ +	+ +	+ +	+ +	+ +	+++	+ +	+ + X	+ +	+ +	+ +	+ +	+ +	+ +							
Bile duct Pancreas Esophagus Stomach	+++-++	++++	++-+-	++++	++++	++	+ + +	++-+-	++++	+ + + + -	+ + + -	++++-	++++	++++-	++++	++++	++++	++++	++++	+ - + +	+ + - + +	++-++	+ + + + +	+++++	+ + + + +	+ + + +
Small intestine Large intestine	++	+	++	+ 	+	-	-	+	++	++	+	+	+	-	+	-	+	-	-	-	+	- -	+	+	+	+
URINARY SYSTEM Kidney Sarcoma, NOS Lipoma Urinary bladder	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+ +	+ +
ENDOCRINE SYSTEM Pituitary Adenoma, NOS Adrenai Cortical adenoma Cortical carcinoma Pheochromocytoma	+	+ X +	+ +	+ +	* *	+ +	+ +	+ +	+ X +	+ +	+ +	* * +	+ +	++	+ X +	+ + X	+ +	+ +	+ x + x	  +	+ + X	++	+	+ + x	+ X +	+ X +
Pheochromocytoma, malignant Thyroid Follicular cell carcinoma	+	+	+	-	+	+	+	-	-	, x	+	+	+	-	+	-	+	+	+		+	+	+	+	+	+
C-cell adenoma Parathyroid	+	+	+	+	-	+	+	-	+	+	+	+	+	+	-	-	-	х -	-	+	+	+	+		+	+
REPRODUCTIVE SYSTEM Mammary gland Adenocarcinoma, NOS Eibracharama	+	N	+	N	+	+	N	+ x	+	+	N	+	+	+	+	+	N	N	+	+	+	+	+	+	+	+
Preputial/clitoral gland Carcinoma, NOS	N	Ν	N	N	N	Ν	Ν	Ñ	N	N	N	N	N	N	N	N	N	N	N	N	Ν	N	N	N	N	N
Adenocarcinoma, NOS Leiomyoma	+	+	+	+	+	+	+ v	+	+	+	+	+	+	+ v	+ v	+	+	x	+	+	+	+	+	Ŧ ¥	+ Y	+
Ovary	+	+	+	+	-	+	÷	+	+	+	+	+	+	+	÷	+	+	+	+	+	+	+	+	+	+	+
Brain Astrocytoma	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	*	+	+	+
SPECIAL SENSE ORGANS Zymbal gland Sebaceous adenoma	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	* X	N	N	N	N
ALL OTHER SYSTEMS Multiple organs, NOS Adenocarcinoma, NOS, metastatic Leukemia, mononuclear cell	N	N X	N X	N	N	N	N X	N	N X	N X	N X	N	N X	N	N	N	N	N X	N X	N	N	N	N	N	N X	N

### TABLE B3. INDIVIDUAL ANIMAL TUMOR PATHOLOGY OF FEMALE RATS IN THE FIRST TWO-YEAR FEED STUDY OF MIREX: 50 ppm

### TABLE B3. INDIVIDUAL ANIMAL TUMOR PATHOLOGY OF FEMALE RATS: 50 ppm (Continued)

ANIMAL NUMBER	8	8 1 4	8 2 0	82	8 2 4	8 3 0	8 3 4	8 4 0	8 4 6	8 4 8	8 5 4	8 5 6	858	8 6	862	8 6 6	86	8 7	8 7 2	8 7 4	8 7	8	8 8 4	888	8 9	8 9 6	
WEEKS ON STUDY		1	1	1	1	1	1	1		1	1	1	l	1	1	1	10		10	1	1	1	1	1	1	1	TOTAL: TISSUES TUMORS
	8	8	8	8	8	8	8	8	8	8	8	8	8	8	8	8	8	8	8	8	8	8,	8	8	8	8	
Subcutaneous tissue Fibroma	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	÷	+	+	+	+	*52
RESPIRATORY SYSTEM	+	+	+	+	+	+	 +	+	+	+	 +	+	+	+	 +	+	+	+	+	+	+	+	 +	+	+	+	52
Alveolar/bronchiolar adenoma Trachea	+	+	+	+	+	-	+	+	+	+	+	+	+	+	+	, +	+	+	+	+	+	+	x -	+	+	+	1 44
HEMATOPOIETIC SYSTEM Bone marrow	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	50
Hemangioma Leukemia, mononuclear cell	+	÷	+	+	+	+	+	+	+	+ x	+	+	+	+ x	+	+	+	+	+	+	+	+	+	+	+	+	1
Lymph nodes Thymus Carcinoma, NOS	++	+ +	+ +	+ +	+ +	+ +	+ +	+ + X	+ +	+ +	+ +	+++	+ +	+++	+ +	+ +	+ +	+ +	+ +	+ +	+ -	++	+ +	+ +	+ +	+ +	52 41 1
CIRCULATORY SYSTEM Heart	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	52
DIGESTIVE SYSTEM Salivary gland	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	52
Neoplastic nodule Hepatocellular carcinoma	x	+	+	x	+	x	x	+	+	+ X	+	+	+	÷	+	+	+	+	+	+	x	+	x	+	+	+	52 7 2
Bile duct Pancreas	+++	++	++	+ +	+ +	+ +	+ +	+++	+ +	+ +	++++	+++	+++	+ +	+ +	++	+ +	+ +	++	+ +	+ +	++	+ +	++	++	+ +	52 50
Esophagus Stomach	+++++++++++++++++++++++++++++++++++++++	+ +	+++	++	+	+++++++++++++++++++++++++++++++++++++++	+	+++++++++++++++++++++++++++++++++++++++	+++	+++++++++++++++++++++++++++++++++++++++	-	+++++	 +	+	 +	-+	+++	++	++++	++++	-+	 +	++++	+++	+++	+++++	38
Small intestine Large intestine	+++++	+++++	+++	+++	+ +	+++	+++	++++	++	+++++++++++++++++++++++++++++++++++++++	+++	+ 	+ +	+++++++++++++++++++++++++++++++++++++++	+++	+ +	++++	+ +	÷ +	++++	+++	+ +	÷ +	+++	++++	+ +	47 40
URINARY SYSTEM				<u>-</u>																							
Sarcoma, NOS Lipoma Urinary bladder	+	+	++	++	+	+	+	+	+	++	+	++	++	+	++	+	+ X +	+	+	+	+	+	* +	++	+	++	52 1 1 50
ENDOCRINE SYSTEM																	L.					-					
Adenoma, NOS		x	x		x	x	+	x	x			x			x		x	- -	x		x		x	x		x	22
Cortical adenoma Cortical carcinoma Pheochromocytoma		x	x	Ŧ	Ŧ	Ŧ	т	Ŧ	×	Ŧ	Ŧ	Ŧ	x	Ŧ	-	т	x	Ŧ	Ŧ	Ŧ	Ŧ	Ŧ	т	Ŧ	Ŧ	Ŧ	
Pheochromocytoma, malignant Thyroid	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	X +	+	+	+	+	+	+	+	+	+	+	1 46
Follicular cell carcinoma C-cell adenoma Parathuroid														x											1	+	
REPRODUCTIVE SYSTEM		+	т 	+	-	+		+	+		+	+	+		+		+	т —									40
Mammary gland Adenocarcinoma, NOS Fibroadenoma	+	Ν	+ x	+	+	+	+	Ν	+	+	+	+	+	Ν	+	Ν	+	*	*	+ x	+	+	+	Ν	+	+	*52
Preputial/clitoral gland Carcinoma NOS	N	N	Ň	Ν	Ν	Ν	Ν	Ν	Ν	Ν	N	Ν	Ν	Ν	N X	Ν	Ν	Ν	Ν	Ň	Ν	Ν	Ν	Ν	N	Ν	*52
Uterus Adenocarcinoma, NOS	+	+	+	+	+	+	+	+	+	+	+	+	+	+ v	+	+	+	+	+	+	+	+	+	+	+	+	52 1
Endometrial stromal polyp Ovary	+	+	+	+	+	+	+	+	<b>X</b> +	+	Х +	÷	+	л +	+	+	+	+	X +	X +	+	X +	X +	X +	+	X +	15 51
NERVOUS SYSTEM Brain Astrocytoma	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	52 1
SPECIAL SENSE ORGANS Zymbal gland Sebaceous adenoma	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	N	*52
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	N	N	N	N	N	N	*52
Agenocarcinoma, NOS, metastatic Leukemia, mononuclear ceil						x		X									х	x							x		14

TABLE B4.	INDIVIDUAL ANIMAL TUMOR PATHOLOGY OF FEMALE RATS IN THE SECOND
	TWO-YEAR FEED STUDY OF MIREX: UNTREATED CONTROL

ANIMAL NUMBER	0 4 0	0 2 2	0 2 8	0 7 2	0 4 4	0 8 4	0 0 2	0 7 0	0 0 4	0 0 6	0 0 8	0 1 0	0 1 2	0 1 4	0 1 6	0 1 8	0 2 0	0 2 4	0 2 6	0 3 0	0 3 2	0 3 4	0 3 6	0 3 8	0 4 2	0 4 6
WEEKS ON STUDY	0 5 0	0 5 4	0 8 0	0 8 7	0 9 3	0 9 4	0 9 9	1 0 0	1 0 5	1 0 5	1 0 5	1 0 5	1 0 5	1 0 5	1 0 5	1 0 5	1 0 5	1 0 5	1 0 5	1 0 5	1 0 5	1 0 5	1 0 5	1 0 5	1 0 5	1 0 5
INTEGUMENTARY SYSTEM Skin Squamous cell papilloma Bacel stumor	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	. +	+	+	+	+	+	+	+	+
Subcutaneous tissue Carcinoma, NOS, unclear prim or metastatic	+	+	+	+	+	+	+	÷	+	+	+	+	+	+	+	+	+	+	* X	+	+	+	+	+	+	+
RESPIRATORY SYSTEM Lungs and bronchi Alveolar/bronchiolar adenoma Alveolar/bronchiolar carcinoma Trachea	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	++	+	+	+	+	+	+	+	++	* * +
HEMATOPOIETIC SYSTEM Bone marrow Spieen Leukemia, mononuclear ceil Lymph nodes Thymns	-+++	+++++	+ + +	- + -+	+++	  ++	+++++	+++++	+++++	+++++	+++++	+ + + +	+++++	+++++	+++++	++++	++ + ~	+++++	++++++	+++++	+++++	+++++	+++++	+++++	+ + X +	+ + +
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	N
Salivary gland Liver Neoplastic nodule	+	+ +	+ +	+++	++	+ +	++	++	++	++	++	+ +	++	++	+ +	+++	++	++	++	+++++	++	++	++	++	+ +	+++++
Pancreas Esophagus	+++++	+ + +	+ + +	+ - +	+++++	+ -+ +	+ + +	+ + +	+ + +	++	+ + -	+ + -	+ + -	++-	++++	+ + +	++	+ + -	+++++++++++++++++++++++++++++++++++++++	+ + +	+	+ + -	++++	+ + +	+ + -	+ +
Stomach Small intestine Large intestine	++	+ + +	+ + +	1 1	+ + +	+ - -	+++	+ + -	++++	+ + +	+ + +	+ + +	+ + +	+ + +	+++	+ + +	+++	+ + +	+ + +	++++	+ + +	+ + +	+ + +	++++	+ + +	+++++
URINARY SYSTEM Kidney Kidney/pelvis Transitional cell carcinoma Urinary bladder	+++++++++++++++++++++++++++++++++++++++	++++++	+++++	++++++	+++++	++	+++++	++++++	+ + +	+++++	++++++	++++++	+++	+++++	+++++	+++++	+++++	++++++	+++++	++++++	+ + X +	+++++	++++++	+ + +	++++++	+ + +
Transitional cell papilloma ENDOCRINE SYSTEM									-																	
Pituitary Carcinoma, NOS Adenoma, NOS	+	+	+	+ X	+ X	+	+ X	+	+ X	+ X	+	+	+ X	+	+ X	+	+ X	+	+	+						
Cortical adenoma Cortical carcinoma Pheochromocytoma	+	Ŧ	Ŧ	7	Ŧ	Ŧ	Ŧ	Ŧ	Ŧ	Ŧ	т	x	Ŧ	+	Ŧ	Ŧ	Ŧ	Ŧ	Ŧ	x	Ŧ	Ŧ	Ŧ	Ŧ	т	x
Thyroid Follicular cell adenoma C-cell adenoma	+	+	+	~	-	-	+	+	+ X	+	+	÷	* X	+	+ X	+	+	+	+	+	+	+	+ X	+	+	+
C-cell carcinoma Parathyroid Pancreatic islets Islet cell adenoma Islet cell carcinoma	+	+ +	+ +	+ 1	+ +	+ 	+ + X	+ +	+ +	+ +	+ +	+ +	+ +	+ +	+ +	+++	+ +	+ +	+ +	+ +	+ +	+ + X	+ +	+ +	+ +	x + X
REPRODUCTIVE SYSTEM Mammary gland Adenocarcinoma, NOS	+	+	+	+	+	+	+	+	+	+	N	+	+	+	+	+	+	+ X	+	+	+	+	+	+	+	+
Fibroadenoma Uterus Papillary adenoma	X +	+	+	+	+	+	+	+	+	X +	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+
Endometrial stromal polyp Ovary	+	+	+	+	+	+	+	+	X +	+	+	+	+	+	X +	+	+	+	+	+	+	+	+	Х +	+	+
NERVOUS SYSTEM Brain Carcinoma, NOS, invasive	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+
ALL OTHER SYSTEMS Multiple organs, NOS Malignant lymphoma, histiocytic type Leukemia, mononuclear cell	N	N	N X	N	N	N X	N	N X	N	N	N	N	N	N	N	N	N X	N	N	N	N	N	N	N	N	N

+: Tissue examined microscopically
 -: Required tissue not examined microscopically
 X: Turnor incidence
 N Pecropsy, no autolysis, no microscopic examination
 S: Animal missexed

: No tissue information submitted C: Necropsy, no histology due to protocol A: Autolysis M: Animal missing B: No necropsy performed
TABLE 54, INDIVIDUAL		.191.	IVI A	L	10	WIC	ĸ	PA	(C	on	tin	ued	1)	, K.	EM	AL	JL:	КA	13		UN	TR	ĽA	TE	D	CU.	NTROL
ANIMAL NUMBER	0 4 8	0 5 0	0 5 2	0 5 4	0 5 6	0 5 8	0 6 0	0 6 2	0 6 4	0 6 6	0 6 8	0 7 4	0 7 6	0 7 8	0 8 0	0 8 2	0 8 6	0 8 8	0 9 0	0 9 2	0 9 4	0 9 6	0 9 8	1 0 0	1 0 2	1 0 4	TOTAL
WEEKS ON STUDY	1 0 5	TISSUES																									
INTEGUMENTARY SYSTEM Skin Squamous cell papilloma Basal cell tumor	+	+	+	+	+	N	+	+	+	+	+	+	+	+	+	+	+	+	+	+	*	+	+	+	+	+	*52
Subcutaneous tissue Carcinoma, NOS, unclear pri or met	+	+	+	+	+	Ν	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	*52
RESPIRATORY SYSTEM Lungs and bronchi Alveolar/bronchiolar adenoma Alveolar/bronchiolar carcinoma Trachea	+	++	+	+	+	+	+	+	+	+	+	++	+	+	+ X +	+	+	+	+	+	+	+	+	* x +	++	+	52 2 1 49
HEMATOPOIETIC SYSTEM																											-

TABLE B4.	INDIVIDUAL ANIMAL	TUMOR	PATHOLOGY	OF	FEMALE	RATS:	UNTREATED	CONTROL
			(Continued	I)				

		9	9	0,	0	01	9	9	01	91	9	5	9	9	Ч	0	9	0	01	0ļ	01	9	oi	9	0	0	
INTEGUMENTARY SYSTEM Skin	+	+	+	+	+	N	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	*52
Squamous cell papilloma	}																				X						1
Basal cell tumor	Ĺ					NT									x										L.		1
Carcinoma, NOS, unclear pri or met	1	Ŧ	Ŧ	Ŧ	Ŧ	14	Ŧ	+	Ŧ	+	Ŧ	+	+	Ŧ	+	Ŧ	+	Ŧ	+	Ŧ	Ŧ	+	Ŧ	+	Ŧ	Ŧ	1
RESPIRATORY SYSTEM																											
Alveolar/bronchiolar adenoma	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	×	+	+	52
Alveolar/bronchiolar carcinoma															х												1
Trachea	+	+	+	+	+	+	+	+	+	-	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	49
HEMATOPOIETIC SYSTEM						-																					
Spleet	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	48
Leukemia, mononuclear cell	'		1		,						4	Ŧ	+	-	Ŧ	· ·	Ŧ	Ŧ	Ŧ	Ŧ	Ŧ	Ŧ	-	Ŧ	Ŧ	-	1
Lymph nodes	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	51
Inymus	+	+	+	+	+	-	+	+	+	+	-	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	44
CIRCULATORY SYSTEM																									,		50
		+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	52
DIGESTIVE 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	N	*59
Squamous cell papilloma	1	7.4	X	7.4	11	7.4	14	ΤM	14	TA	14	ΤA	7.4	ΤN	14	TA	74	14	τ×	7.4	14	14	7.4	ΤA	14	14	1
Salivary gland	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	-	50
Neoplastic nodule	+	+	+	+	+	+	+	+	×	+	+	+	+	+	+	+	+	+	+	+	×	+	+	+	+	+	52
Bile duct	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	52
Pancreas	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	50
Stomach	+	+	+	+	+	+	+	÷	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	51
Small intestine	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	50
Large intestine	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	48
URINARY SYSTEM							_																	· · ·			
Kidney Kidnay/palwin	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	52
Transitional cell carcinoma	Ť	Ŧ	÷	Ŧ	Ŧ	Ŧ	+	÷	÷	÷	+	+	Ŧ	+	÷	÷	+	+	+	+	+	+	+	÷	÷	Ŧ	1 52
Urinary bladder	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	50
Transitional cell papilloma		х																									1
ENDOCRINE SYSTEM																											
Carring NOS	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	52
Adenoma, NOS	x		х	х	х		х		х			X	х				х	х	х	х	х	х	•	х	х	x	31
Adrenal	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	52
Cortical adenoma	X		х		х			х			v																5
Pheochromocytoma											^								х	х							3
Thyroid	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	÷	+	+	+	+	49
C-cell adenoma																		x					x				5
C-cell carcinoma													Х														2
Parathyroid Pancreatic islats	+	+	+	+	+	+++++++++++++++++++++++++++++++++++++++	+	+++++++++++++++++++++++++++++++++++++++	+	+	+++++++++++++++++++++++++++++++++++++++	+	+	+	+	+++++++++++++++++++++++++++++++++++++++	+	+	+	+	+	+	+	+	+	+	52
Islet cell adenoma	Ľ				'															1							1
Islet cell carcinoma										Х	X																4
REPRODUCTIVE SYSTEM																				•							
Mammary gland	+	+	+	+	+	Ν	+	Ν	+	+	+	+	+	+	+	Ν	+	+	+	+	+	+	+	Ν	+	+	*52
Fibroadenoma																							x				3
Uterus	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	52
Papillary adenoma Endometrical strome linelym	v	v	х	v	v	v		v	v							v			v								
Ovary	÷	÷	+	÷	+	÷	+	÷	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	52
NERVOUS SYSTEM										·																	
Brain	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	52
Carcinoma, NOS, invasive																							X				1 1
ALL OTHER SYSTEMS																											
Multiple organs, NOS Malig, lymphoma, histiorytic type	N	N	Ν	Ν	N	N	N	Ν	Ν	Ν	Ν	Ν	Ν	N	N	N	Ν	Ν	N	N	N	N	N	Ν	N	Ν	*52
Leukemia, mononuclear cell							х								х												5
																			_								

\* Animals necropsied

<

ANIMAL NUMBER	2 0 2	1 6 6	1 1 4	1 6 0	1 7 4	1 2 6	1 5 4	1 9 0	1 5 6	1 0 6	1 0 8	1 1 0	1 1 2	1 1 6	1 1 8	$1 \\ 2 \\ 0$	1 2 2	1 2 4	1 2 8	1 3 0	$\frac{1}{3}$	1 3 4	1 3 6	1 3 8	1 4 0	1 $4$ $2$
WEEKS ON STUDY	0 7 5	0 9 5	0 9 9	1 0 2	1 0 2	1 0 4	1 0 4	1 0 4	1 0 5	1 0 6	1 0 6	1 0 6	1 0 6	1 0 6	1 0 6	1 0 6	1 0 6	1 0 6	1 0 6	1 0 6	1 0 6	1 0 6	1 0 6	1 0 6	1 0 6	1 0 6
INTEGUMENTARY SYSTEM Skin Squamous cell carcinoma	+	+	+	+	*	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+
RESPIRATORY SYSTEM Lungs and bronchi Squamous cell carcinoma, metastatic Alveolar/bronchiolar carcinoma Trachea	+++	++	++	+++	* * +	++	+	+	++	+	+	+	+ X +	+	+	++	+	+	+	++	+	+	+	++	+ X +	++
HEMATOPOIETIC SYSTEM Bone marrow Spleen Leukemia, mononuclear cell Lymph nodes Thymus	+++++++++++++++++++++++++++++++++++++++	- + +	++++-	++++-	++++-	+++++	+ + + +	+ + +	++ ++ ++	+ + + +	+++++	+ + + +	+ + + +	+ + + X + + +	+++++	+ + + +	+++++	+ + + +	+++++	+++++	+ + + +	+ + +	+++++	+ + + +	+++++	++++++
CIRCULATORY SYSTEM Heart	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+
DIGESTIVE SYSTEM Oral cavity Squamous cell papilloma Salivary gland Liver Neoplastic nodule Bile duct Pancreas Mixed tumor, benign Esophagus Stomach Small intestine Large intestine	N +++ ++++++++++++++++++++++++++++++++	Z ++X++ + + + + + + + + + + + + + + + +	Z ++ ++ ++++	Z -+ ++ ++ ++ ++ ++ ++ ++ ++ ++ ++ ++ ++	Z ++ ++ ++++	Z ++ ++ ++++	X + + X + + + + + + + + + + + + + + + +	N ++ ++ ++++	Z ++ ++ ++++	Z ++ ++ ++++	X ++X++ ++++	Z ++ ++ ++++	Z ++X++ ++++	X ++X++ ++++	Z ++ ++ ++++	Z ++ ++ ++++	<b>X</b> ++ <b>X</b> ++ ++++	X ++X++ ++++	N ++X++ ++++	N ++ ++X++++	N + + X + + + + + + + + + + + + + + + +	N ++ ++ ++ ++ ++ ++ ++ ++ ++ ++ ++ ++ ++	Z ++X++ ++++	Z ++X++ ++++	Z ++ ++ +++	N ++X++ ++++
URINARY SYSTEM Kidney Urinary bladder	++++	+	+++	+ + +	+	+ +	+ + +	+++++	+ +	+ +	+++	++++	+++	+++++	+ +	+++	++++	++++	+ +	+++	+++	++++	+ +	++++	+++	+ +
ENDOCRINE SYSTEM Pituitary Carcinoma, NOS Adenoma, NOS Adenoma Cortical adenoma Pheochromocytoma Thyroid Follicular cell adenoma C-cell adenoma C-cell acerinoma Parathyroid Pancreatic islets Islet cell adenoma Islet cell adenoma Islet cell adenoma	+ + - + + + +	+ + - +	+ x + x + + - +	+ + -	+ X + X + + + +	+ + + ++	+ X + + X + +	+ X + + + + + + + + + + + + + + + + + +	+ x + + x + x	+ + + + x	+ + + X + +	+ + + +	+ + + + +	+ + + + + + +	+ X+ +	+ + + +	+ + + +	+ x + + + x + + x + + x	+ + + + +	+ X + +	+ + + + + + + + + + + + + + + + + + + +	+ x + + +	+ X + + +	+ x + + +	+ + X + X + +	+ + + +
REPRODUCTIVE SYSTEM Mammary gland Adenoma, NOS Fibroadenoma Uterus Undifferentiated carcinoma Endometrial stromal polyp Ovary	+ X + +	++++++	+ + +	+ + +	+++++	+++++	+++++	++++++	+ + +	N + +	+ + X +	++++	+ X ~ +	+++++++++++++++++++++++++++++++++++++++	+ x + +	++++	+ X + X +	++++	+ + X +	+ + + +	+ + + +	N + +	+ X + +	+++++	+++++	+++++
NERVOUS SYSTEM Brain Carcinoma, NOS, invasive	+	+	+	+	+	+	+	* *	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+
ALL OTHER SYSTEMS Multiple organs, NOS Undifferentiated carcinoma, metastatic Fibrosarcoma Leukemia, mononuclear cell	N	N X	N	N X	N	N X	N X	N	N	N	N	N	N	N	N	N	N	N X	N	N	N	N	N	N	N X	N

# TABLE B4. INDIVIDUAL ANIMAL TUMOR PATHOLOGY OF FEMALE RATS IN THE SECONDTWO-YEAR FEED STUDY OF MIREX: 50 ppm

#### TABLE B4. INDIVIDUAL ANIMAL TUMOR PATHOLOGY OF FEMALE RATS: 50 ppm (Continued)

ANIMAL NUMBER	1 4 4	1 4 6	1 4 8	1 5 0	1 5 2	1 5 8	1 6 2	1 6 4	1 6 8	1 7 0	1 7 2	1 7 6	1 7 8	1 8 0	1 8 2	1 8 4	1 8 6	1 8 8	1 9 2	1 9 4	1 9 6	1 9 8	2 0 0	2 0 4	2 0 6	2 0 8	TOTAL
WEEKS ON STUDY	1 0 6	1 0 6	1 0 6	1 0 6	1 0 6	1 0 6	1 0 6	1 0 6	1 0 6	1 0 6	1 0 6	1 0 6	1 0 6	1 0 6	1 0 6	1 0 6	1 0 6	1 0 6	1 0 6	1 0 6	1 0 6	1 0 6	1 0 6	1 0 6	1 0 6	1 0 6	TISSUES
INTEGUMENTARY SYSTEM Skin Squamous cell carcinoma	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	<b>,</b> +	+	+	+	+	+	+	+	+	+	+	*52
RESPIRATORY SYSTEM Lungs and bronchi Squamous cell carcinoma, metastati Alveolar/bronchiolar carcinoma	+	+ X	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	52 1 3
Hadisa HEMATOPOIETIC SYSTEM Bone marrow Spleen Leukemia, mononuclear cell Lymph nodes Thymus	+++++++++++++++++++++++++++++++++++++++	++++++	+++++	+++++	+++++	+ + + +	+ + + +	+ + + + +	+ + + +	+ + + +	+ + + + +	+ + + +	++++-	+ + + + +	+++++++	+ + + + +	+++++++++++++++++++++++++++++++++++++++	+ + + + +	++++++	+ + + +	++++++	+ + X + + X +	+++++++	+ + + +	+ + + +	+ + X + +	51 52 3 52 46
CIRCULATORY SYSTEM Heart	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	52
DIGESTIVE SYSTEM Oral cavity Squamous cell papilloma Salivary gland Liver Neoplastic nodule Bile duct Pancreas Mixed tumor, benign Esophagus Stomach Small intestine Large intestine	N ++ ++ ++ ++ ++ ++ ++ ++ ++ ++ ++ ++ ++	Z ++ ++ ++++	XX++ ++ ++++	<b>N</b> ++ ++ ++ ++ ++ ++ ++ ++ ++ ++ ++ ++ ++	N ++ ++ ++++	N ++X++ ++++	Z ++ ++ ++++	N ++X++ ++++	N ++X++ ++++	N ++ ++ ++++	<b>X</b> ++ ++ ++++	N ++ ++ ++++	N ++ ++ ++++	N ++ ++ ++++	N ++ ++ ++++	Z ++ ++ ++++	Z ++X++ ++++	N ++X++ ++++	N ++X++ ++++	Z ++ ++ ++++	N ++X++ ++++	N ++X++ ++++	N ++X++ ++++	Z ++ ++ ++++	N ++X++ ++++	N ++X ++ ++ ++ ++ ++ ++ ++ ++ ++ ++ ++ ++	*52 1 51 52 23 52 52 52 52 51 52 51 52 52 52 52 52 52 52 52 52 52
URINARY SYSTEM Kidney Urinary bladder	++++	++++	+++++	+++++	++++	++++	++++++	+++++	++++	+++++++++++++++++++++++++++++++++++++++	++++	+++++	++++	+++	++++	++++	+++++	+++++	+++	+++++	+++++	+ +	+ +	++++	+ +	+++++	52 50
ENDOCRINE SYSTEM Pituitary Carcinoma, NOS Adrenał Cortical adenoma Pheochromocytoma Thyroid Follicular cell adenoma C-cell adenoma	+ + X +	+ x + +	+ X + +	+ X + +	+ X + X + X	+ X + +	+ X + + X	+ + X +	+ X + +	+ + +	++++	+ + +	+ + +	+ + +	+ X + +	+ X + +	+ + +	+ X + +	+ X + +	+ + +	+ + +	+ X + +	+++++	+ X + +	+ + +	+ X + X +	52 3 23 52 6 2 49 1 3
C-cell carcinoma Parathyroid Pancreatic islets Islet cell adenoma Islet cell carcinoma	+ + X	+ +	+ +	 +	+ +	+ + X	+ +	+ +	+ + X	+ +	+ +	+ +	+ + X	+ + X	+ + X	+ +	+ +	+ +	+ +	+ +	+ +	+ +	+	+ +	+ +	+ +	3 45 52 2 9
REPRODUCTIVE SYSTEM Mammary gland Adenoma, NOS Fibroadenoma Uterus Undifferentiated carcinoma Endometrial stromet polyn	+++	++	++	+ + X	+	++	+ X +	+	++	++	+ + ¥	++	+ + ¥	++	++	+ + ¥	++	+ +	+ +	++	+ +	++	+ X +	++	++	+	*52 1 6 51 1 8
NERVOUS SYSTEM	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	52
Carcinoma, NOS, invasive		x	т 	·			+	т 	т	+			т		т 	Ŧ			+	+	T	+	+	т 	Ŧ	+ 	2
ALL OTHER SYSTEMS Multiple organs, NOS Undifi. carcinoma, metastatic Fibrosarcoma Leukemia, mononuclear cell	N	N	N	N X	N	N	N	N	N	N	N	N	N	N	N	N	N X	N	N	N	N	И	N	И	N	N	*52 1 1 6

\* Animals necropsied

ANIMAL NUMBER	2 8 4	3 1 0	2 5 2	2 3 6	2 2 6	3 0 0	2 8 2	2 8 0	2 4 8	2 9 4	2 7 2	2 6 8	2 8 6	2 1 0	2 1 2	2 1 4	2 1 6	2 1 8	2 2 0	$2 \\ 2 \\ 2$	2 2 4	2 2 8	2 3 0	2 3 2	2 3 4	2 3 8
WEEKS ON STUDY	0 8 2	0 8 2	0 8 6	0 8 7	0 9 2	0 9 4	0 9 5	0 9 6	0 9 7	0 9 7	0 9 8	1 0 1	1 0 4	1 0 5	1 0 5	1 0 5	1 0 5	1 0 5	1 0 5	1 0 5	1 0 5	1 0 5	1 0 5	1 0 5	1 0 5	1 0 5
INTEGUMENTARY SYSTEM Subcutaneous tissue Hemangiosarcoma	+	*	+	N	+	+	+	+	+	+	+.	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+
RESPIRATORY SYSTEM Lungs and bronchi Alveolar/bronchiolar adenoma Alveolar/bronchiolar carcinoma Pheochromocytoma, metastatic Trachea	+	+	++	+	+	+	++	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+++	+ X +
HEMATOPOIETIC SYSTEM Bone marrow Spleen Leukemia, mononuclear cell Lymph nodes Thymus	++++-	+ + + +	+ + + -	+ -+ +-	++ ++ ++	+ + + +	+ - + + +	- - + +	+++++	+ + + +	+ + + +	+ + + + +	+ + + +	+ + + +	+ + + +	+ + + +	+ + + +	++ ++ ++	++++++	+ + + +	+ + + +	+ + + +	 + + + +	+ + + +	+ + + +	+ + X +
CIRCULATORY SYSTEM Heart Hemangiosarcoma, metastatic	+	+	+	+	+	*	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+
DIGESTIVE SYSTEM Salivary gland Liver Neoplastic nodule Hepatocellular carcinoma Bile duct Pancreas Acinar cell adenoma Esophagus Stomach Squamous cell papilloma Small intestine Large intestine	+ + + + + + + + + + + + + + + + + + +	++X ++ ++ ++	++X ++ ++ ++ ++ ++	++ ++ ++ +1	++ ++ ++ ++	+++++++++++++++++++++++++++++++++++++++	++ ++ ++ ++	++ + + + + + + + + + - -	++ ++ ++	+ + + + + <b>X</b> + +	++ ++ ++	++X ++ ++ ++	++ ++ ++ ++	+ + X + + + + + + + + + + + + + + + + +	+ + X + + + + + + + + + + + + + + + + +	++ ++ ++	+ + X + + + + + + + + + + + + + + + + +	++ ++ ++	+ + X + + + + + + + + + + + + + + + + +	+++++++++++++++++++++++++++++++++++++++	+ + X + + + + + + + + + + + + + + + + +	+++++++++++++++++++++++++++++++++++++++	++X ++ ++ ++	+++++++++++++++++++++++++++++++++++++++	++X ++ ++ ++	++x ++ ++ ++
URINARY SYSTEM Kidney Sarcoma, NOS Urinary bladder	+ x -	+++	+++	+	+++	+	+++	+	+++	+++	+ +	+ +	+ +	+++	+ +	+ +	+ +	+++	+ + +	+ +	+++	+ +	+	+++	++	+ + +
ENDOCRINE SYSTEM Pituitary Adenoma, NOS Adrenal Pheochromocytoma Pheochromocytoma malignant	+ X +	+++	+ +	+ X +	+ +	+ +	+ +	+ +	+ +	+ X +	+ +	+ +	+ X +	+ +	+ +	+ X +	+ X +	+ X +	+ X +	+ +	* * +	+ +	+ +	++	* * +	++
Thyroid Follicular cell adenoma C-ceil adenoma Parathyroid Pancreatic islets Islet cell adenoma Islet cell carcinoma	+++++	+ + +	+ + +	- -+	+ + +	+  +	+ + +	- + -	+ + +	+ - +	+ X + +	+ + +	+  +	+ + +	+ + +	+ + X	+ X + +	+ + +	+ X + +	+ + +	+ + +	+ + +	+ + +	+ + +	+ + +	+ + +
REPRODUCTIVE SYSTEM Mammary gland Fibroadenoma Uterus Endometrial stromal polyp Ovary	+ + X +	+++++	+ + +	+ + X +	+ + +	+ + +	+ + + +	+ + +	N + +	+ + +	+ + +	+ + +	+ + +	* * +	* + +	+ + +	+ + +	+ + +	+ + +	+ + +	+ + +	+ + X +	+ + +	+ + +	+ + +	+ + +
NERVOUS SYSTEM Brain Osteosarcoma, invasive Astrocytoma	+	+	+	+	+	+	+	+	* X	+	+	÷	+	+	+	+	+	+	+	+	+	+	+	+	+	+
MUSCULOSKELETAL SYSTEM Bone Hemangiosarcoma Osteosarcoma	N	N	N	N	N	N X	N	N	N X	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N
ALL OTHER SYSTEMS Multiple organs, NOS Leukemia, mononuclear ceil	N	N	N	N	N	N	N	N	N	N	N X	N	N	N	N	N X	N X	N	N	N X	N	N	N X	N	N	N

## TABLE B4. INDIVIDUAL ANIMAL TUMOR PATHOLOGY OF FEMALE RATS IN THE SECONDTWO-YEAR FEED STUDY OF MIREX: 100 ppm

#### TABLE B4. INDIVIDUAL ANIMAL TUMOR PATHOLOGY OF FEMALE RATS: 100 ppm (Continued)

ANIMAL	2	2	2	2	2	2	2	25	2	2	2	2	2	27	2	27	2	2	2	2	2	3	3	3	3	3	1
NUMBER	ō	2	4	6	ő	4	6	8	õ	2	4	6	ó	4	6	8	8	ő	2	6	8	2	4	6	8	2	TOTAL:
WEEKS ON STUDY	1 0 5	1 0 6	1 0 6	1 0 6	1 0 6	TISSUES																					
INTEGUMENTARY SYSTEM Subcutaneous tissue Hemangiosarcoma	+	N	+	+	+	+	+	+	+	+	+	+	. +	+	+	+	+	N	+	+	+	+	+	+	+	+	*52 1
RESPIRATORY SYSTEM Lungs and bronchi	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	52
Alveolar/bronchiolar adenoma Alveolar/bronchiolar carcinoma Pheochromocytoma, metastatic Trachea	_	+	+	+	+	х +	+	+	x +	+	+	+	+	+	+	+	+	+	_	+	+	х +	+	x _	+	+	1     3     1     47
HEMATOPOIETIC SYSTEM	+	+	+	+	+	+	+	+	+	+	+		+	+	+	+	+	+	+	+	+	+	+	+	+	+	51
Spleen	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+ v	+	+	+	+	+	+	49
Lymph nodes Thymus	++	+ +	+ +	+ +	+ +	+ +	+ -	+ +	+++	+ +	++	+ +	+ +	+ +	+ +	52 48											
CIRCULATORY SYSTEM																											
Heart Hemangiosarcoma, metastatic	+	+	÷	+	+	+	+	+	+	+	+	+	+	+	+	÷	+	+	+	+	+	+	+	+	+	+	52 1
DIGESTIVE SYSTEM																											
Liver	+	+	++	+	++	+	++	++	++	++	++	++	+	++	+	+	++	++	+	++	+	+	+	+	+	+	52
Neoplastic nodule Hepatocellular carcinoma	x	X	X	X		x	X	X	X	X			X			x		x	x	X	x	x			X	x	30
Pancreas	++	+	+	+	+	+	+	+	+	+	++	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	51
Acinar cell adenoma Esophagus	-	-	_	+	+	-	_	+	+	X +	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	47
Stomach Squamous cell papilloma	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	52
Small intestine Large intestine	++++	+ +	+ -	+ +	+ +	51 48																					
URINARY SYSTEM																									~		·
Kidney Sarroma NOS	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	52
Urinary bladder	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	49
ENDOCRINE SYSTEM																·											= 0
Adenoma, NOS	x	x	x	+	x	x	x	x	+	+	x	x	+	+	+	x	Ŧ	+	+	Ŧ	+	x	Ŧ	+	x	Ŧ	22
Adrenal Pheochromocytoma	+	+	+	+	+	+	x +	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	52
Pheochromocytoma, malignant	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	_	+	+	+	+	+	X +	+	+	1 49
Follicular cell adenoma		1.		1-	,		v	т	,	1	'	1	1	,		1					x		v		,		1
Parathyroid	+	+	+	+	+	+	+	+	+	+	-	-	+	+	+	+	+	-	-	+	+	-	+	-	+	+	42
Pancreatic islets Islet cell adenoma	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	51
Islet cell carcinoma			х			х					х	х		х				х									6
REPRODUCTIVE SYSTEM Mammary gland	+	+	+	+	+	+	+	+	+	+	+	+	+	N	+	+	+	+	+	+	+	+	+	+	+	N	*52
Fibroadenoma Uterus	+	+	+	+	+	+	+	+	+	+	+	X +	+	+	+	+	+	+	+	+	+	+	+	+	+	+	52
Endometrial stromal polyp Ovary	+	+	X +	+	X +	+	X +	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	X +	X +	8 52
NERVOUS SYSTEM												~		-													·
Brain Osteosarcoma, invasive Astrocytoma	+	+	+	+	+	÷	+	+	+	+	+ X	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	52 1 1
MUSCULOSKELETAL SYSTEM																											-
Bone Hemangiosarcoma Osteosarcoma	N	Ν	N	N	Ν	N	N	Ν	Ν	N	N	N	N	N	N	N	N	Ν	N	N	N	N	N	Ν	N	N	*52 1 1
ALL OTHER SYSTEMS Multiple organs, NOS Leukemia, mononuclear ceil	N	N	N X	N	N	N	N X	N	N	N	N	N	N X	N X	N	N	N X	N	N	N	N X	N	N	N X	N	N	*52 12
																											. !

\* Animals necropsied

## TABLE B5. ANALYSIS OF PRIMARY TUMORS IN FEMALE RATS IN THE FIRST TWO-YEAR FEED STUDY OF MIREX

	Control	0.1 ppm	1 ppm	10 ppm	25 ppm	50 ppm
Hematopoietic System: Mononucle	ar Cell Leuk	emia				
Overall Rates (a)	8/52 (15%)	8/52 (15%)	11/52 (21%)	14/52(27%)	18/52 (35%)	18/52 (35%)
Adjusted Rates (b)	18.3%	18.0%	23.4%	30.4%	39.3%	40.6%
Terminal Rates (c)	4/38 (11%)	3/38 (8%)	1/35 (3%)	5/35 (14%)	14/41(34%)	10/35 (29%)
Week of First Observation	91	79	82	77	49	69
Life Table Tests (d)	P = 0.005	P = 0.586N	P = 0.296	P = 0.132	P = 0.044	P = 0.023
Incidental Tumor Tests (d)	P = 0.003	P = 0.581 N	P = 0.398	P = 0.183	P = 0.039	P = 0.027
Cochran-Armitage Trend Test (d)	P = 0.003					
Fisher Exact Test (d)		P = 0.607	P = 0.306	P = 0.115	P = 0.020	P = 0.020
Liver: Neoplastic Nodule						
Overall Rates (a)	10/52 (19%)	5/52 (10%)	4/52 (8%)	5/52 (10%)	9/52 (17%)	7/52(13%)
Adjusted Rates (b)	25.3%	13.2%	11.4%	14.3%	21.2%	19.0%
Terminal Rates (c)	9/38 (24%)	5/38 (13%)	4/35 (11%)	5/35 (14%)	8/41 (20%)	6/35(17%)
Week of First Observation	87	107	107	107	96	94
Life Table Tests (d)	P = 0.329	P = 0.130N	P = 0.098N	P = 0.165N	P = 0.424 N	P = 0.356N
Incidental Tumor Tests (d)	P = 0.326	P = 0.135N	P = 0.090 N	P = 0.180 N	P = 0.500 N	P = 0.347 N
Cochran-Armitage Trend Test (d)	P = 0.345					
Fisher Exact Test (d)		P = 0.132N	P = 0.075N	P = 0.132N	P = 0.500 N	P = 0.298N
Liver: Neoplastic Nodule or Hepat	ocellular Ca	cinoma				
Overall Rates (a)	10/52 (19%)	5/52 (10%)	4/52 (8%)	5/52 (10%)	10/52 (19%)	9/52(17%)
Adjusted Rates (b)	25.3%	13.2%	11.4%	14.3%	23.0%	24.6%
Terminal Rates (c)	9/38 (24%)	5/38 (13%)	4/35 (11%)	5/35 (14%)	8/41 (20%)	8/35 (23%)
Week of First Observation	87	107	107	107	96	94
Life Table Tests (d)	P = 0.117	P = 0.130N	P = 0.098N	P = 0.165 N	P = 0.518N	P = 0.571 N
Incidental Tumor Tests (d)	P = 0.119	P = 0.135N	P = 0.090 N	P = 0.180N	P = 0.593 N	P = 0.563 N
Cochran-Armitage Trend Test (d) Fisher Exact Test (d)	P = 0.130	P = 0.132N	P = 0.075 N	P = 0.132N	P = 0.598	P = 0.500 N
Pituitary Gland: Adenoma						
Overall Rates (a)	20/52 (38%)	24/51(47%)	31/50 (62%)	24/51(47%)	30/52 (58%)	22/50(44%)
Adjusted Rates (b)	45.7%	58.0%	71.6%	54.0%	68.0%	56.8%
Terminal Rates (c)	15/38 (39%)	20/37(54%)	23/35 (66%)	15/35 (43%)	27/41 (66%)	17/33 (52%)
Week of First Observation	81	84	82	79	89	69
Life Table Tests (d)	P = 0.528	P = 0.264	P = 0.018	P = 0.244	P = 0.090	P = 0.261
Incidental Tumor Tests (d)	P = 0.518N	P = 0.243	P = 0.015	P = 0.278	P = 0.021	P = 0.293
Cochran-Armitage Trend Test (d)	P = 0.454N	1 0.210	1 0.010	1 0.210	1 0.021	1 0.200
Fisher Exact Test (d)	0.40411	P = 0.247	P = 0.014	P = 0.247	P = 0.038	P = 0.357
Pituitary Gland: Adenoma or Caro	einoma					
Overall Rates (a)	22/52(42%)	25/51 (49%)	32/50 (64%)	26/51 (51%)	31/52 (60%)	22/50 (44%)
Adjusted Rates (b)	49.4%	58.8%	73.9%	57.5%	68.7%	56.8%
Terminal Rates (c)	16/38 (42%)	20/37(54%)	24/35 (69%)	16/35 (46%)	27/41 (66%)	17/33(52%)
Week of First Observation	81	66	82	79	89	69
Life Table Tests (d)	P = 0.408N	P = 0.335	P = 0.028	P = 0.247	P = 0.140	P = 0.393
Incidental Tumor Tests (d)	P = 0.373 N	P = 0.318	P = 0.023	P = 0.308	P = 0.038	P = 0.451
Cochran-Armitage Trend Test (d)	P = 0.325 N					
Fisher Exact Test (d)		P = 0.314	P = 0.023	P = 0.247	P = 0.058	P = 0.511
Adrenal Gland: Cortical Adenoma						
Overall Rates (a)	3/51 (6%)	2/52 (4%)	5/52 (10%)	3/51 (6%)	4/51 (8%)	3/52(6%)
Adjusted Rates (b)	7.9%	5.3%	13.8%	7.8%	10.0%	8.6%
Terminal Rates (c)	3/38 (8%)	2/38 (5%)	4/35 (11%)	1/35 (3%)	4/40(10%)	3/35 (9%)
Week of First Observation	107	107	103	105	107	107
Life Table Tests (d)	P=0.559	P = 0.500N	P = 0.316	P = 0.637	P = 0.528	P = 0.625
Incidental Tumor Tests (d)	P = 0.548N	P = 0.500 N	P = 0.327	P = 0.606 N	P = 0.528	P = 0.625
Cochran-Armitage Trend Test (d)	P = 0.551 N					
Fisher Exact Test (d)		P = 0.491 N	P = 0.369	P = 0.661	P = 0.500	P = 0.652N

	Control	0.1 ppm	1 ppm	10 ppm	25 ppm	50 ppm
Adrenal Gland: Cortical Adenoma	or Carcinom					·
Overall Rates (a)	3/51 (6%)	$\frac{2}{52}(4\%)$	5/52 (10%)	3/51 (6%)	4/51 (8%)	4/52(8%)
Adjusted Rates (b)	7.9%	5.3%	13.8%	7.8%	10.0%	11.4%
Terminal Rates (c)	3/38 (8%)	2/38(5%)	$\frac{4}{35}(11\%)$	1/35 (3%)	4/40(10%)	4/35 (11%)
Week of First Observation	107	107	103	105	107	107
Life Table Tests (d)	P = 0.380	P = 0.500 N	P = 0.316	P = 0.637	P = 0.528	P = 0.455
Incidental Tumor Tests (d)	P = 0.000	P = 0.500 N	P = 0.327	P = 0.606N	P = 0.528	P = 0.455
Cochran Armitage Trend Test (d)	P = 0.398	1 -0.00011	1 - 0.021	1 0.00011	1 01020	
Fisher Exact Test (d)	1 - 0.000	P=0.491N	P=0.369	P = 0.661	P = 0.500	P = 0.511
Adrenal Gland: Pheochromocyton	1a					
Overall Rates (a)	1/51 (2%)	3/52 (6%)	5/52(10%)	1/51(2%)	2/51(4%)	5/52 (10%)
Adjusted Rates (b)	2.6%	7.2%	13.7%	2.9%	5.0%	13.8%
Terminal Rates (c)	1/38 (3%)	2/38 (5%)	4/35 (11%)	1/35 (3%)	2/40(5%)	4/35 (11%)
Week of First Observation	107	87	102	107	107	104
Life Table Tests (d)	P = 0.199	P = 0.307	P = 0.089	P = 0.743	P = 0.518	P = 0.088
Incidental Tumor Tests (d)	P = 0.199	P = 0.201	P = 0.000	P = 0.743	P = 0.518	P = 0.102
Cochran Armitage Trend Test (d)	P = 0.213	1 = 0.2.91	1 - 0.004	1 - 0.140	1 0.010	1 = 0.102
Fisher Exact Test (d)	1 -0.210	P = 0.316	P = 0.107	P = 0.752	P=0.500	P = 0.107
Adrenal Gland: Pheochromocyton	na or Maligna	nt Pheochro	mocvtoma			
Overall Rates (a)	1/51 (2%)	3/52 (6%)	5/52(10%)	1/51(2%)	2/51(4%)	6/52 (12%)
Adjusted Rates (h)	2.6%	7 2%	13.7%	2.9%	5.0%	16.6%
Terminal Rates (c)	1/38 (3%)	2/38(5%)	$\frac{4}{35}(11\%)$	1/35 (3%)	2/40(5%)	5/35 (14%)
Week of First Observation	100(0.0)	2/30(0/0)	109	107	107	104
Life Table Tests (d)	107 B-0.006	01 D-0.207	D-0.090	D-0742	D0519	D-0049
Incidental Tumor Tests (d)	P=0.096	P = 0.307	P = 0.009	P = 0.743	P0.518	P = 0.048
Cashaan Amaita na Tran d Tast (1)	P = 0.090	F = 0.291	r=0.094	F = 0.740	r 0.516	r = 0.000
Fisher Exact Test (d)	P = 0.106	P = 0.316	P = 0.107	P = 0.752	P=0.500	P=0.059
Thyroid Gland: C-Cell Adenoma						
Overall Rates (a)	10/50 (20%)	9/50 (18%)	6/48 (13%)	5/47(11%)	6/48(13%)	2/46(4%)
Adjusted Rates (b)	25.3%	227%	17.0%	14.3%	14.1%	59%
Torminal Rates (a)	Q/28 (2106)	2/22 (910%)	5/21/1506)	5/35 (14%)	1/39 (10%)	2/34 (6%)
Wools of First Observation	01	0/00 (21%)	104	107	9/00/10/07	107
	91 D-0010N	91 D 0 500N	104	107 D=0.165N	JU D_0105N	D = 0.094N
Life Table Tests (d)	$P \approx 0.018 N$	P = 0.500 N	P = 0.276N	P = 0.165N	P = 0.185 N	P = 0.0241
Incidental Tumor Tests (d)	P = 0.022N	P = 0.541 N	P=0.259N	P=0.189N	P = 0.237 N	P = 0.027 N
Cochran-Armitage Trend Test (d)	P = 0.021 N	D 0 500.	D 0.000M	D 0 100N	D 0 000N	
Fisher Exact Test (d)		P = 0.500 N	P = 0.233 N	P = 0.160 N	P = 0.233 N	P = 0.020 N
Thyroid Gland: C-Cell Carcinoma	2/50 (60)	A/50 (900)	1/48 (90-)	A / A 77 ( Q 07 )	0/48 (00-)	0/16 (00)
Adjusted Rates (d)	7 00		1/140 (270) 9 Q0/2	++/++((37/0) 10.50/_	0/140(0%)	0/40(0%)
Terminal Pates (b)	1.9% 3/39 (90%)	9.9% 3/39 (90%)	2.9%	10.0% 3/35 (9%)	0.0%	0.0% 0/34(0%)
Weak of First Observation	107	0/00 (0%) 0/	107	0/00 ( <i>9%)</i> 09	0100 (0701	0/0 - (0%)
Life Table Tests (d)	D-0.090N	94 D-0505	D-0346N	94 D=0 467	P-0 116N	P = 0.141 N
Line Table Tests (d) Incidental Tumor Tests (d)	P = 0.0291 D = 0.0291	r = 0.000 D = 0.510	P - 0.340IN	P-040/	P = 0.110N	P = 0.141N
Cashaan Amaita na Tuand Tast (d)	F = 0.034 M	F = 0.512	F = 0.34514	r 0.410	r = 0.110M	r = 0.14110
Fisher Exact Test (d)	P≡0.032N	P = 0.500	P = 0.324 N	P = 0.465	P = 0.129 N	P = 0.137 N
Thyroid Gland: C.Cell Adapama	r Carcinoma					
Overall Rates (a)	19/50/940-1	13/50 (960)	7/48 (15%)	9/47 (19%)	6/48 (19%)	2/46 (19%)
Adjusted Dates (d)	14/00 (241%)	13/30(20%)	(/+±0(10%)) 10.00/-	9/12/(1970) 9/50/	0/+±0(1070) 1/10/-	2/40(4/0) 5 0.0/-
Aujusted Rates (b)	30.5%	32.0%	19.9%	24.0%	14,1%	0.070 0/04 (001)
Terminal Rates (c)	11/38 (29%)	11/38(29%)	0/34(18%)	8/35(23%)	4/39(10%)	2/34(6%)
week of First Observation	91	91	104	92 D 0.0551	96	107
Life Table Tests (d)	P = 0.002N	P = 0.503	P = 0.220N	P = 0.377N	F = 0.084N	P = 0.008N
Incidental Tumor Tests (d)	P = 0.003 N	P = 0.470	P = 0.205 N	P = 0.445 N	P = 0.112N	P = 0.009 N
Cochran-Armitage Trend Test (d)	P = 0.003 N	<b>D</b> 0	B 0 1 - 0	D 0 0-01-	<b>D</b>	<b>D</b>
Fisher Exact Test (d)		P = 0.500	P = 0.178N	P = 0.370 N	P = 0.113 N	P = 0.006N

## TABLE B5. ANALYSIS OF PRIMARY TUMORS IN FEMALE RATS IN THE FIRST TWO-YEAR FEED STUDY OF MIREX (Continued)

	Control	0.1 ppm	1 ppm	10 ppm	25 ppm	50 ppm
Pancreatic Islets: Islet Cell Adence	ma		<u></u>			
Overall Rates (a)	2/50 (4%)	0/52 (0%)	1/51 (2%)	1/49 (2%)	4/50 (8%)	0/50 (0%)
Adjusted Rates (b)	5.3%	0.0%	2.9%	2.9%	9.7%	0.0%
Terminal Rates (c)	2/38 (5%)	0/38 (0%)	1/35 (3%)	1/35 (3%)	3/40 (7%)	0/34 (0%)
Week of First Observation	107		107	107	106	
Life Table Tests (d)	P = 0.587 N	P = 0.238N	P = 0.529 N	P = 0.529N	P = 0.368	P = 0.263N
Incidental Tumor Tests (d)	P = 0.576N	P = 0.238N	P = 0.529 N	P = 0.529 N	P = 0.358	P = 0.263N
Cochran-Armitage Trend Test (d)	P = 0.576N					
Fisher Exact Test (d)		P = 0.238N	P = 0.492N	P = 0.508N	P=0.339	P = 0.247 N
Pancreatic Islets: Islet Cell Carcin	noma					
Overall Rates (a)	2/50 (4%)	2/52(4%)	1/51(2%)	3/49 (6%)	1/50 (2%)	0/50(0%)
Adjusted Rates (b)	5.3%	5.3%	2.9%	8.1%	2.2%	0.0%
Terminal Rates (c)	2/38(5%)	2/38 (5%)	1/35 (3%)	2/35(6%)	0/40 (0%)	0/34(0%)
Week of First Observation	107	107	107	105	103	
Life Table Tests (d)	P = 0.136N	P = 0.695	P = 0.529 N	P = 0.475	P = 0.469 N	P = 0.263 N
Incidental Tumor Tests (d)	P = 0.128N	P = 0.695	P = 0.529 N	P = 0.511	P = 0.488N	P = 0.263 N
Cochran-Armitage Trend Test (d)	P = 0.135N					
Fisher Exact Test (d)		P = 0.676N	P = 0.492N	P = 0.490	P = 0.500 N	P = 0.247 N
Pancreatic Islets: Islet Cell Adence	oma or Carcir	noma				
Overall Rates (a)	4/50 (8%)	2/52 (4%)	2/51 (4%)	4/49 (8%)	5/50 (10%)	0/50 (0%)
Adjusted Rates (b)	10.5%	5.3%	5.7%	10.9%	11.6%	0.0%
Terminal Rates (c)	4/38 (11%)	2/38 (5%)	2/35 (6%)	3/35 (9%)	3/40(7%)	0/34(0%)
Week of First Observation	107	107	107	105	103	
Life Table Tests (d)	P = 0.203 N	P = 0.336N	P = 0.375N	P = 0.607	P = 0.544	P = 0.078N
Incidental Tumor Tests (d)	P = 0.190N	P = 0.336N	P = 0.375N	P = 0.635	P = 0.525	P = 0.078N
Cochran-Armitage Trend Test (d)	P = 0.197 N					
Fisher Exact Test (d)		P = 0.320N	P = 0.329N	P = 0.631	P = 0.500	P = 0.059N
Mammary Gland: Fibroadenoma						
Overall Rates (a)	12/52(23%)	8/52 (15%)	11/52(21%)	17/52(33%)	10/52(19%)	3/52 (6%)
Adjusted Rates (b)	29.3%	17.8%	27.5%	42.9%	23.0%	7.8%
Terminal Rates (c)	10/38 (26%)	4/38 (11%)	7/35 (20%)	13/35(37%)	8/41(20%)	2/35(6%)
Week of First Observation	86	84	84	77	102	93
Life Table Tests (d)	P = 0.017 N	P = 0.235N	P = 0.568N	P = 0.149	P = 0.330N	P = 0.020 N
Incidental Tumor Tests (d)	P = 0.017 N	P = 0.254N	P = 0.507 N	P = 0.161	P = 0.462 N	P = 0.018N
Cochran-Armitage Trend Test (d)	P = 0.014N					
Fisher Exact Test (d)		P = 0.228N	P = 0.500 N	P = 0.191	P = 0.405 N	P = 0.012N
Mammary Gland: Adenocarcinom	a					
Overall Rates (a)	1/52(2%)	0/52 (0%)	3/52 (6%)	0/52(0%)	1/52(2%)	2/52(4%)
Adjusted Rates (b)	2.6%	0.0%	7.0%	0.0%	2.4%	5.7%
Terminal Rates (c)	1/38 (3%)	0/38 (0%)	1/35 (3%)	0/35(0%)	1/41(2%)	2/35 (6%)
Week of First Observation	107		86		107	107
Life Table Tests (d)	P = 0.370	P = 0.500 N	P = 0.290	P = 0.516N	P = 0.745N	P = 0.471
Incidental Tumor Tests (d)	P = 0.322	P = 0.500 N	P = 0.341	P = 0.516N	P = 0.745 N	P = 0.471
Cochran-Armitage Trend Test (d)	P = 0.376					
Fisher Exact Test (d)		$P = 0.500 \mathrm{N}$	P = 0.309	P = 0.500 N	P = 0.752	P = 0.500
Mammary Gland: Fibroma or Fibr	oadenoma					
Overall Rates (a)	12/52 (23%)	8/52 (15%)	11/52(21%)	17/52(33%)	11/52(21%)	3/52 (6%)
Adjusted Rates (b)	29.3%	17.8%	27.5%	42.9%	24.8%	7.8%
Terminal Rates (c)	10/38 (26%)	4/38 (11%)	7/35 (20%)	13/35(37%)	8/41 (20%)	2/35 (6%)
Week of First Observation	86	84	84	77	102	93
Life Table Tests (d)	P = 0.022N	P = 0.235N	P = 0.568N	P = 0.149	P = 0.416N	P = 0.020N
Incidental Tumor Tests (d)	P = 0.021N	P = 0.254N	P = 0.507 N	P = 0.161	P = 0.552N	P = 0.018N
Cochran-Armitage Trend Test (d)	P = 0.018N	D 0 00015	D 0 5003	D 0.404	D 0 5000	D 0.0400
Fisher Exact Test (d)		P = 0.228 N	P = 0.500 N	P = 0.191	P = 0.500 N	P = 0.012N

# TABLE B5. ANALYSIS OF PRIMARY TUMORS IN FEMALE RATS IN THE FIRST TWO-YEAR FEEDSTUDY OF MIREX (Continued)

	Control	0.1 ppm	1 ppm	10 ppm	25 ppm	50 ppm
Mammary Gland: Fibroadenoma o	or Adenocarci	noma	<u> </u>		<u></u>	
Overall Rates (a)	13/52 (25%)	8/52 (15%)	13/52 (25%)	17/52 (33%)	11/52(21%)	5/52(10%)
Adjusted Rates (b)	31.8%	17.8%	30.5%	42.9%	25.3%	13.4%
Terminal Rates (c)	11/38 (29%)	4/38 (11%)	7/35 (20%)	13/35 (37%)	9/41 (22%)	4/35 (11%)
Week of First Observation	86	84	84	77	102	93
Life Table Tests (d)	P = 0.041N	P = 0.172N	P = 0.516	P = 0.204	P = 0.328N	P = 0.051 N
Incidental Tumor Tests (d)	P = 0.046N	P = 0.185N	P = 0.574N	P = 0.219	P = 0.456N	P = 0.049N
Cochran-Armitage Trend Test (d)	P = 0.035N					
Fisher Exact Test (d)		P = 0.164N	P = 0.589	P = 0.258	P = 0.408N	P = 0.034N
Mammary Gland: Fibroma, Fibroa	denoma, or A	Adenocarcing	ma			
Overall Rates (a)	13/52 (25%)	8/52 (15%)	13/52(25%)	17/52(33%)	12/52(23%)	5/52(10%)
Adjusted Rates (b)	31.8%	17.8%	30.5%	42.9%	27.0%	13.4%
Terminal Rates (c)	11/38 (29%)	4/38 (11%)	7/35(20%)	13/35(37%)	9/41 (22%)	4/35(11%)
Week of First Observation	86	84	84	77	102	93
Life Table Tests (d)	P = 0.050 N	P = 0.172N	P = 0.516	P = 0.204	P = 0.411N	P = 0.051 N
Incidental Tumor Tests (d)	P = 0.054 N	P = 0.185 N	P = 0.574N	P = 0.219	P = 0.543N	P = 0.049N
Cochran-Armitage Trend Test (d)	P = 0.042N					
Fisher Exact Test (d)		P = 0.164N	P = 0.589	P = 0.258	P = 0.500 N	P = 0.034N
Clitoral Gland: Adenoma or Cysta	denoma					•
Overall Rates (a)	0/52(0%)	1/52(2%)	3/52 (6%)	1/52 (2%)	0/52 (0%)	0/52 (0%)
Adjusted Rates (b)	0.0%	2.4%	8.6%	2.9%	0.0%	0.0%
Terminal Rates (c)	0/38(0%)	0/38 (0%)	3/35 (9%)	1/35 (3%)	0/41 (0%)	0/35(0%)
Week of First Observation		102	107	107		
Life Table Tests (d)	P = 0.126N	P = 0.510	P = 0.107	P = 0.484	(e)	(e)
Incidental Tumor Tests (d)	P = 0.121N	P = 0.527	P = 0.107	P = 0.484	(e)	(e)
Cochran-Armitage Trend Test (d)	P = 0.127 N	-	5	D 0 800	<i>(</i> )	
Fisher Exact Test (d)		P = 0.500	P = 0.121	P = 0.500	(e)	(e)
Clitoral Gland: Adenoma, Cystader	noma, or Carci	inoma				
Overall Rates (a)	1/52(0%)	1/52 (2%)	3/52 (6%)	1/52 (2%)	0/52(0%)	1/52(2%)
Adjusted Rates (b)	0.0%	2.4%	8.6%	2.9%	0.0%	2.9%
Terminal Rates (c)	0/38 (0%)	0/38 (0%)	3/35 (9%)	1/35(3%)	0/41 (0%)	1/35 (3%)
Week of First Observation		102	107	107		107
Life Table Tests (d)	P = 0.411 N	$P = 0.510^{\circ}$	P = 0.107	P = 0.484	(e)	P = 0.484
Incidental Tumor Tests (d)	P = 0.398N	P = 0.527	P = 0.107	P = 0.484	(e)	P = 0.484
Cochran-Armitage Trend Test (d)						
Fisher Exact Test (d)	P = 0.406 N	P = 0.500	P = 0.121	P = 0.500	(e)	P = 0.500
Uterus: Endometrial Stromal Poly	р					
Overall Rates (a)	14/51(27%)	8/51 (16%)	10/52 (19%)	13/52 (25%)	12/52 (23%)	15/52 (29%)
Adjusted Rates (b)	35.9%	20.6%	26.4%	32.6%	28.4%	36.4%
Terminal Rates (c)	13/38 (34%)	7/37 (19%)	8/35 (23%)	9/35(26%)	11/41(27%)	10/35 (29%)
Week of First Observation	102	91	91	94	103	80
Life Table Tests (d)	P = 0.138	P = 0.123N	P = 0.310N	P = 0.565 N	P = 0.317 N	P = 0.410
Incidental Tumor Tests (d)	P = 0.129	P = 0.126N	P = 0.285 N	P = 0.463 N	P = 0.318N	P = 0.440
Cochran-Armitage Trend Test (d)	P = 0.154					
Fisher Exact Test (d)		P = 0.114 N	P = 0.226N	P = 0.476 N	P = 0.388N	P = 0.525
Uterus: Endometrial Stromal Poly	p or Sarcoma	a				
Overall Rates (a)	14/51(27%)	8/51 (16%)	11/52 (21%)	13/52 (25%)	12/52 (23%)	15/52 (29%
Adjusted Rates (b)	35.9%	20.6%	29.1%	32.6%	28.4%	36.4%
Terminal Rates (c)	13/38 (34%)	7/37 (19%)	9/35 (26%)	9/35 (26%)	11/41 (27%)	10/35 (29%
Week of First Observation	102	91	91	94	103	80
Life Table Tests (d)	P = 0.162	P = 0.123N	P = 0.402N	P = 0.565 N	P = 0.317 N	P = 0.410
Incidental Tumor Tests (d)	P = 0.152	P = 0.126N	P = 0.374 N	P = 0.463 N	P = 0.318 N	P = 0.440
Cochran-Armitage Trend Test (d)	P = 0.179					
Fisher Exact Test (d)		P = 0.114N	P = 0.303 N	P = 0.476N	P = 0.388N	P = 0.525

## TABLE B5. ANALYSIS OF PRIMARY TUMORS IN FEMALE RATS IN THE FIRST TWO-YEAR FEED STUDY OF MIREX (Continued)

	Control	0.1 ppm	1 ppm	10 ppm	25 ppm	50 ppm
All Sites: Benign Tumors						
Overall Rates (a)	40/52 (77%)	37/52 (71%)	44/52 (85%)	40/52 (77%)	43/52 (83%)	36/52 (69%)
Adjusted Rates (b)	86.8%	78.4%	93.5%	86.8%	87.7%	77.9%
Terminal Rates (c)	32/38 (84%)	28/38 (74%)	32/35 (91%)	29/35 (83%)	35/41 (85%)	25/35 (71%)
Week of First Observation	81	84	82	77	89	69
Life Table Tests (d)	P = 0.305 N	P = 0.341 N	P = 0.134	P = 0.417	P = 0.550 N	P = 0.471 N
Incidental Tumor Tests (d)	P = 0.298N	P = 0.345N	P = 0.180	P = 0.542	P = 0.208	P = 0.374N
Cochran-Armitage Trend Test (d)	P = 0.211N					
Fisher Exact Test (d)		P = 0.328N	P = 0.228	P = 0.592N	P = 0.313	P = 0.254N
All Sites: Malignant Tumors						
Overall Rates (a)	19/52 (37%)	18/52 (35%)	20/52 (38%)	26/52 (50%)	24/52(46%)	25/52(48%)
Adjusted Rates (b)	41.6%	39.2%	42.7%	53.4%	49.6%	57.2%
Terminal Rates (c)	12/38(32%)	11/38 (29%)	9/35 (26%)	13/35(37%)	17/41(41%)	17/35 (49%)
Week of First Observation	78	66	82	77	49	69
Life Table Tests (d)	P = 0.099	P = 0.489N	P = 0.428	P = 0.136	P = 0.346	P = 0.135
Incidental Tumor Tests (d)	P = 0.081	P = 0.486N	P = 0.566	P = 0.148	P = 0.286	P = 0.159
Cochran-Armitage Trend Test (d)	P = 0.078					
Fisher Exact Test (d)		P = 0.500N	P = 0.500	P = 0.117	P = 0.213	P = 0.161
All Sites: All Tumors						
Overall Rates (a)	48/52 (92%)	48/52 (92%)	49/52 (94%)	47/52 (90%)	50/52 (96%)	49/52 (94%)
Adjusted Rates (b)	94.1%	92.3%	98.0%	92.1%	96.2%	100.0%
Terminal Rates (c)	35/38 (92%)	34/38 (89%)	34/35 (97%)	31/35 (89%)	39/41 (95%)	35/35 (100%)
Week of First Observation	78	66	82	77	49	69
Life Table Tests (d)	P = 0.366	P = 0.544N	P = 0.289	P = 0.496	P = 0.430N	P = 0.280
Incidental Tumor Tests (d)	P = 0.247	P = 0.631 N	P = 0.493	P = 0.469 N	P = 0.418	P = 0.357
Cochran-Armitage Trend Test (d)	P = 0.330					
Fisher Exact Test (d)		P = 0.642N	P = 0.500	P = 0.500N	P = 0.339	P = 0.500
		•				

#### TABLE B5. ANALYSIS OF PRIMARY TUMORS IN FEMALE RATS IN THE FIRST TWO-YEAR FEED STUDY OF MIREX (Continued)

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

(b) Kaplan-Meier estimated tumor incidences at the end of the study 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 nonfatal. The Cochran-Armitage and Fisher exact tests compare directly the overall incidence rates. A negative trend or lower incidence in a dosed group is indicated by (N).

(e) No P value is reported because no tumors were observed in the dosed and control groups.

	Control	50 ppm	100 ppm
Lung: Alveolar/Bronchiolar Carcinoma			······································
Overall Rates (a)	1/52 (2%)	3/52 (6%)	3/52 (6%)
Adjusted Rates (b)	2.3%	6.8%	7.7%
Terminal Rates (c)	1/44(2%)	3/44(7%)	3/39 (8%)
Week of First Observation	105	105	105
Life Table Tests (d)	P = 0.197	P = 0.305	P = 0.263
Incidental Tumor Tests (d)	P = 0.197	P = 0.305	P = 0.263
Cochran-Armitage Trend Test (d)	P = 0.239		
Fisher Exact Test (d)		P = 0.309	P=0.309
Lung: Alveolar/Bronchiolar Adenoma or	Carcinoma		
Overall Rates (a)	3/52 (6%)	3/52 (6%)	4/52 (8%)
Adjusted Rates (b)	6.8%	6.8%	10.3%
Terminal Rates (c)	3/44 (7%)	3/44(7%)	4/39 (10%)
Week of First Observation	105	105	105
Life Table Tests (d)	P = 0.358	P = 0.663	P = 0.434
Incidental Tumor Tests (d)	P = 0.358	P = 0.663	P = 0.434
Cochran-Armitage Trend Test (d)	P = 0.421		
Fisher Exact Test (d)		P = 0.661	P = 0.500
Hematopoietic System: Mononuclear Cel	l Leukemia		
Overall Rates (a)	6/52 (12%)	9/52(17%)	14/52(27%)
Adjusted Rates (b)	12.8%	18.8%	34.9%
Terminal Rates (c)	4/44 (9%)	6/44 (14%)	13/39 (33%)
Week of First Observation	80	95	98
Life Table Tests (d)	P = 0.018	P = 0.314	P = 0.024
Incidental Tumor Tests (d)	P = 0.039	P = 0.287	P = 0.042
Cochran-Armitage Trend Test (d)	P = 0.029		
Fisher Exact Test (d)		P = 0.289	P = 0.040
Liver: Neoplastic Nodule			
Overall Rates (a)	2/52(4%)	23/52(44%)	30/52 (58%)
Adjusted Rates (b)	4.5%	49.8%	69.4%
Terminal Rates (c)	2/44(5%)	21/44 (48%)	26/39(67%)
Week of First Observation	105	95	82
Life Table Tests (d)	P<0.001	P<0.001	P<0.001
Incidental Tumor Tests (d)	P<0.001	P<0.001	P<0.001
Cochran-Armitage Trend Test (d)	P<0.001		
Fisher Exact Test (d)		P<0.001	P<0.001
Liver: Neoplastic Nodule or Hepatocellu	lar Carcinoma		
Overall Rates (a)	2/52 (4%)	23/52(44%)	31/52 (60%)
Adjusted Rates (b)	4.5%	49.8%	70.0%
Terminal Rates (c)	2/44 (5%)	21/44 (48%)	26/39 (67%)
Week of First Observation	105	95	82
Life Table Tests (d)	P<0.001	P<0.001	P<0.001
Incidental Tumor Tests (d)	P<0.001	P<0.001	P<0.001
Cochran-Armitage Trend Test (d)	P<0.001		
Fisher Exact Test (d)		P<0.001	P<0.001
Pituitary Gland: Adenoma		00/50 (14%)	00/50 (40~)
Overall Rates (a)	31/52 (60%)	23/52 (44%)	22/52 (42%)
Adjusted Rates (b)	65.9%	48.8%	50.7%
Terminal Rates (c)	28/44 (64%)	20/44 (45%)	18/39 (46%)
Week of First Observation	87	99	82
Life Table Tests (d)	P = 0.136N	P = 0.086N	P = 0.165N
Incidental Tumor Tests (d)	P = 0.042N	P = 0.070 N	P = 0.058 N
Cochran-Armitage Trend Test (d)	P = 0.048N		
Fisher Exact Test (d)		P = 0.085 N	P = 0.058N

# TABLE B6. ANALYSIS OF PRIMARY TUMORS IN FEMALE RATS IN THE SECOND TWO-YEAR FEEDSTUDY OF MIREX

	Control	50 ppm	100 ppm
Pituitary Gland: Carcinoma			
Overall Rates (a)	1/52 (2%)	3/52 (6%)	0/52 (0%)
Adjusted Rates (b)	2.3%	6.6%	0.0%
Terminal Rates (c)	1/44 (2%)	2/44 (5%)	0/39 (0%)
Week of First Observation	105	104	
Life Table Tests (d)	P = 0.413N	P = 0.313	P = 0.524 N
Incidental Tumor Tests (d)	P = 0.354N	P = 0.356	P = 0.524 N
Cochran-Armitage Trend Test (d)	P = 0.378N		
Fisher Exact Test (d)		P = 0.309	P = 0.500 N
Pituitary Gland: Adenoma or Carcinoma			
Overall Rates (a)	32/52 (62%)	26/52(50%)	22/52 (42%)
Adjusted Rates (b)	68.0%	54.0%	50.7%
Terminal Rates (c)	29/44 (66%)	22/44 (50%)	18/39 (46%)
Week of First Observation	87	99	82
Life Table Tests (d)	P = 0.106N	P = 0.163N	P = 0.124 N
Incidental Tumor Tests (d)	P = 0.026N	P = 0.127  N	P = 0.039 N
Cochran-Armitage Trend Test (d)	P = 0.031 N	D = 0.1  CON	D-0.020N
risner Exact Test (d)		P = 0.162 N	P=0.039N
Adrenal Gland: Cortical Adenoma			
Overall Rates (a)	5/52 (10%)	6/52 (12%)	0/52(0%)
Adjusted Rates (b)	11.4%	13.6%	0.0%
Terminal Rates (c)	5/44 (11%)	6/44 (14%)	0/39(0%)
Week of First Observation	105	105	
Life Table Tests (d)	P = 0.057N	P = 0.500	P = 0.045 N
Incidental Tumor Tests (d)	P = 0.057 N	P = 0.500	P = 0.045 N
Fisher Exact Test (d)	P = 0.042N	P = 0.500	P = 0.028N
Adrenal Gland: Cortical Adenoma or Carcinom	a		
Overall Rates (a)	7/52 (13%)	6/52 (12%)	0/52(0%)
Adjusted Rates (b)	15.9%	13.6%	0.0%
Terminal Rates (c)	7/44(16%)	6/44 (14%)	0/39(0%)
Week of First Observation	105	105	
Life Table Tests (d)	P = 0.015N	P = 0.500 N	P = 0.014 N
Incidental Tumor Tests (d)	P = 0.015N	P = 0.500 N	P = 0.014N
Cochran-Armitage Trend Test (d)	P = 0.011N		
Fisher Exact Test (d)		P = 0.500 N	P = 0.006 N
Adrenal Gland: Pheochromocytoma			
Overall Rates (a)	3/52(6%)	2/52(4%)	1/52 (2%)
Adjusted Rates (b)	6.8%	4.0%	2.6%
Terminal Rates (c)	3/44 (7%)	0/44(0%)	1/39 (3%)
Week of First Observation	105	99	105
Life Table Tests (d)	P = 0.257 N	P = 0.483 N	P = 0.349 N
Contrar Armite on Trend Test (d)	P = 0.178N	P = 0.400 N	P = 0.349 N
Fisher Exact Test (d)	P = 0.222 N	P = 0.500 N	P = 0.309 N
Advenational Dianate Dianate and the second second	- A Dhaaabaaaa a	ioma	
Adrenal Gland: Pheochromocytoma or Maligna	nt Pheochromocy	2/59 (ADL)	2/59 (AGA)
Overall Rates (a) Adjusted Rates (b)	0/02 (0%) 6 8%	2/02 (4%)	2102 (470) 5 10
Aujusteu Rates (D) Terminal Bates (c)	0.0% 2/11 (79%)	$\frac{1}{100}$	9/39 (5%)
Week of First Observation	105	99	105
Life Table Tests (d)	P=0.455N	P = 0.483N	P = 0.555N
Incidental Tumor Tests (d)	P = 0.363N	P = 0.400N	P = 0.555N
Cochran-Armitage Trend Test (d)	P = 0.406N		
Fisher Exact Test (d)		P = 0.500 N	P = 0.500 N

# TABLE B6. ANALYSIS OF PRIMARY TUMORS IN FEMALE RATS IN THE SECOND TWO-YEAR FEED STUDY OF MIREX (Continued)

Thyroid Gland: C-Cell Adenoma         5/49(10%) $3/49(6\%)$ $5/49(10\%)$ Overall Rates (a)         5/49(10%) $3/49(6\%)$ $5/49(10\%)$ Adjusted Rates (b)         11.4% $6.8\%$ 12.7%           Weak of First Observation         105         98           Incidental Tumor Tests (d)         P=0.486         P=0.356N         P=0.619           Cohran-Armitage Trend Test (d)         P=0.541         P=0.357N         P=0.630           Thyroid Gland: C-Cell Carcinoma         0/49(4%) $3/49(6\%)$ $0/49(0\%)$ Overail Rates (a)         2/49(4%) $3/49(6\%)$ $0/49(0\%)$ Adjusted Rates (a)         2/24(45%) $2/24(5\%)$ $0/38(0\%)$ Week of First Observation         105         104         104           Life Table Tests (d)         P=0.236N         P=0.579         P=0.271N           Incidental Tumor Tests (d)         P=0.202N         P=0.500         P=0.247N           Thyroid Gland: C-Cell Adenoma or Carcinoma         0/49(14\%)         6/49(12\%)         5/49(10%)           Overall Rates (a)         1/54%         102,4%         1/38(11%)         Weak of First Observation         105           Terminal Rates (c)         7/49(14\%) <th></th> <th>Control</th> <th>50 ppm</th> <th>100 ppm</th> <th></th>		Control	50 ppm	100 ppm	
Overall Rates (a)         5/49 (10%)         3/49 (6%)         5/49 (10%)           Adjusted Rates (b)         11.44         6.88         12.7%           Terminal Rates (c)         5/44 (11%)         3/44 (7%)         4/38 (11%)           Week of First Observation         106         105         98           Lafe Table Tests (d)         P=0.486         P=0.356N         P=0.639           Incidental Tumor Tests (d)         P=0.641         P=0.367N         P=0.630           Thyroid Gland: C-Cell Carcinoma         0/49 (4%)         3/49 (6%)         0/49 (0%)           Adjusted Rates (b)         4.5%         6.6%         0.0%           Terminal Rates (c)         2/49 (4%)         3/49 (6%)         0/49 (0%)           Week of First Observation         105         104         104           Life Table Tests (d)         P=0.230N         P=0.506         P=0.271N           Cohran Armitage Trend Test (d)         P=0.302N         P=0.5079         P=0.271N           Cohran Armitage Trend Test (d)         P=0.202N         P=0.447N         S/49 (10%)           Adjusted Rates (b)         1.5%         12.3%         12.7%         S/49 (10%)           Adjusted Rates (b)         1.5%         12.3%         12.7%         S/49 (10%)	Thyroid Gland: C.Cell Adenoma				<u></u>
Adjusted Rates (b)       11.44       6.85       27.8         Terminal Rates (c)       564 (11%)       37.44 (7%)       47.8 (11%)         Use of First Observation       106       105       9.8         Life Table Fests (d)       P=0.466       P=0.355N       P=0.619         Codvran-Armitage Trend Test (d)       P=0.571       P=0.357N       P=0.630         Thyroid Gland; C-Cell Carcinoma       Oreal Rates (a)       2/49 (4%)       3/49 (6%)       0/49 (0%)         Adjusted Rates (a)       2/44 (5%)       3/49 (6%)       0/49 (0%)       Adjusted Rates (a)       0/38 (0%)         Overal Rates (a)       2/44 (5%)       3/49 (6%)       0/49 (0%)       Adjusted Rates (a)       0/38 (0%)         Terminal Rates (a)       2/44 (5%)       3/49 (6%)       0/49 (0%)       Adjusted Rates (a)       0/38 (0%)         Terminal Rates (a)       2/44 (5%)       3/44 (5%)       0/38 (0%)       0/38 (0%)         Uife Table Tests (d)       P=0.236N       P=0.579       P=0.271 N         Codvran-Armitage Trend Test (d)       P=0.202 N       Fisher Exact Test (d)       P=0.217 N         Terminal Rates (a)       15.9%       13.2%       12.7%       Terminal Rates (a)       4/39 (11%)         Adjusted Rates (b)       15.4% <t< td=""><td>Overall Rates (a)</td><td>5/49 (10%)</td><td>3/49 (6%)</td><td>5/49 (10%)</td><td></td></t<>	Overall Rates (a)	5/49 (10%)	3/49 (6%)	5/49 (10%)	
Terminal Rates (c)         5/44 (11%)         3/44 (7%)         4/38 (11%)           Wesk of First Observation         105         105         98           Lafe Table Tests (d)         P=0.486         P=0.359N         P=0.639           Incidental Tumor Tests (d)         P=0.571         P=0.356N         P=0.630           Thyroid Gland: C-Cell Carcinoma         0/49 (4%)         3/49 (6%)         0/49 (0%)           Adjusted Rates (b)         4.5%         6.6%         0.0%           Terminal Rates (c)         2/44 (5%)         2/44 (5%)         0/49 (0%)           Meek of First Observation         105         104         104           Line frable Tests (d)         P=0.236N         P=0.506         P=0.271N           Cohran Armitage Trend Test (d)         P=0.302N         P=0.500         P=0.271N           Cohran Armitage Trend Test (d)         P=0.202N         P=0.500         P=0.247N           Thyroid Gland: C-Cell Adenoma or Carcinoma         0/49 (12%)         5/49 (10%)         A/30 (16%)           Overall Rates (a)         7/49 (14%)         6/49 (12%)         5/49 (10%)         A/30 (16%)           Meek of First Observation         105         104         98         12.7%         12.7%           Terminal Rates (c) <td< td=""><td>Adjusted Rates (b)</td><td>11 4%</td><td>6.8%</td><td>12.7%</td><td></td></td<>	Adjusted Rates (b)	11 4%	6.8%	12.7%	
Week of First Observation         106         106         106         106         106         106         106         106         106         106         106         106         106         106         106         106         106         106         106         106         106         106         106         106         106         106         106         106         106         106         106         106         106         106         106         106         106         106         106         106         106         106         106         106         106         106         106         106         106         106         106         106         106         106         106         106         106         106         106         106         106         106         106         106         106         106         106         106         106         106         106         106         106         106         106         106         106         106         106         106         106         106         106         106         106         106         106         106         106         106         106         107         106         106         106 </td <td>Terminal Rates (c)</td> <td>5/44 (11%)</td> <td>3/44(7%)</td> <td>4/38 (11%)</td> <td></td>	Terminal Rates (c)	5/44 (11%)	3/44(7%)	4/38 (11%)	
Life Table Texts (d)         P=0.486         P=0.356N         P=0.339           Incidental Tumor Texts (d)         P=0.561         P=0.356N         P=0.630           Cochran Armitage Trend Test (d)         P=0.671         P=0.357N         P=0.630           Thyrold Gland: C-Cell Carcinoma         2/49 (4%)         3/49 (6%)         0/49 (0%)           Adjusted Rates (b)         4.5%         6.6%         0.0%           Terminal Rates (c)         2/49 (4%)         2/44 (5%)         0/24 (4%)           Meek of Pirst Observation         105         104         105           Incidental Tumor Tests (d)         P=0.286N         P=0.509         P=0.271N           Cochran Armitage Trend Test (d)         P=0.170N         P=0.500         P=0.247N           Thyroid Gland: C-Cell Adenoma or Carcinoma         0000         P=0.328         17%           Adjusted Rates (b)         7/49 (14%)         6/49 (12%)         5/49 (10%)           Adjusted Rates (b)         7/49 (14%)         6/49 (12%)         5/49 (10%)           Incidental Tumor Test (d)         P=0.322N         P=0.436N         P=0.427N           Perturn Dates (a)         P=0.322N         P=0.449N         P=0.427N           Terminal Rates (c)         7/49 (14%)         6/49 (12%)         6	Week of First Observation	105	105	98	
Incidential Turnov Tests (d) $P = 0.541$ $P = 0.356N$ $P = 0.615$ Cochran-Armitage Trent Test (d) $P = 0.571$ $P = 0.357N$ $P = 0.630$ Thyroid Gland: C-Cell Carcinoma $2/49 (4x)$ $3/49 (6x)$ $0/49 (0\%)$ Adjusted Rates (b) $4.5\%$ $6.6\%$ $0.0\%$ Terminal Rates (c) $2/49 (4x)$ $3/49 (6x)$ $0/49 (0\%)$ Mek of First Observation $105$ $2/44 (5\%)$ $2/44 (5\%)$ $0.0\%$ Incidental Turnor Tests (d) $P = 0.236N$ $P = 0.506$ $P = 0.271N$ Incidental Turnor Tests (d) $P = 0.202N$ $P = 0.500$ $P = 0.247N$ Thyroid Gland: C-Cell Adenoma or Carcinoma $P = 0.417N$ $P = 0.429N$ $P = 0.427N$ Adjusted Rates (b) $15.5\%$ $13.2\%$ $12.7\%$ Terminal Rates (c) $7/49 (14\%)$ $6/49 (12\%)$ $5/49 (10\%)$ Adjusted Rates (b) $15.5\%$ $13.2\%$ $12.7\%$ Terminal Rates (c) $7/49 (14\%)$ $6/9 (12\%)$ $7/49 (10\%)$ Adjusted Rates (b) $15.5\%$ $12.7\%$ $12.7\%$	Life Table Tests (d)	P = 0.486	P = 0.356N	P = 0.539	
Cochran Armitage Tend Test (d) $P = 0.571$ $P = 0.357N$ $P = 0.360$ Dyrold Gland: C-Cell Carcinoma         2/49 (4%)         3/49 (6%)         0/49 (0%)           Adjusted Rates (b)         4.5%         6.6%         0.0%           Terminal Rates (c)         2/44 (5%)         2/44 (5%)         0/38 (0%)           Week of Pirst Observation         105         104         105           Incidental Tumor Test (d) $P = 0.236N$ $P = 0.579$ $P = 0.271N$ Prisher Exact Test (d) $P = 0.170N$ $P = 0.579$ $P = 0.247N$ Thyroid Gland: C-Cell Adenoma or Carcinoma $O = 0.247N$ $P = 0.500$ $P = 0.247N$ Terminal Rates (c)         7/49 (14%)         6/49 (12%)         5/49 (10%) $Adjusted Rates (b)$	Incidental Tumor Tests (d)	P = 0.541	P = 0.356N	P = 0.619	
Optimized Field Test (d) $P = 0.31$ $P = 0.327N$ $P = 0.630$ Thyroid Gland: C-cell Carcinoma         2/49 (4%)         3/49 (6%)         0/49 (0%)           Adjusted Rates (b)         4.5%         6.6%         0.0%           Meak of First Observation         105         2/44 (5%)         2/44 (5%)         0/48 (0%)           Meak of First Observation         106         P=0.236N         P=0.506         P=0.271N           Incidental Tumor Tests (d)         P=0.170N         P=0.579         P=0.271N           Cohran Armitage Trend Test (d)         P=0.202N         P=0.500         P=0.247N           Thyroid Gland: C-Cell Adenoma or Carcinoma         0/49 (12%)         5/49 (10%)           Overail Rates (a)         7/49 (14%)         6/49 (12%)         5/49 (10%)           Adjusted Rates (b)         15.9%         13.2%         12.7%           Terminal Rates (c)         7/44 (16%)         5/44 (11%)         4/38 (11%)           Week of First Observation         105         104         98           Lind tests (a)         P=0.421N         P=0.429N         P=0.420N           Cohran Armitage Trend Test (d)         P=0.322N         P=0.500N         P=0.380N           Pisher Exact Test (d)         P=0.247N         <	Cachran Armitage Trend Test (d)	P = 0.571	1 = 0.00011	1 = 0.010	
Thyroid Gland: C-Cell Carcinoma           Overall Rates (a) $2/49 (4\%)$ $3/49 (6\%)$ $0/49 (0\%)$ Adjusted Rates (b) $4.5\%$ $6.6\%$ $0.0\%$ Terminal Rates (c) $2/44 (5\%)$ $2/44 (5\%)$ $0/38 (0\%)$ Week of First Observation $105$ $104$ Life Table Tests (d) $P = 0.236N$ $P = 0.271N$ Doverall Rates (a) $P = 0.202N$ $P = 0.500$ $P = 0.247N$ Thyroid Gland: C-Cell Adenoma or Carcinoma $Overall Rates (a)$ $6/49 (12\%)$ $5/49 (10\%)$ Adjusted Rates (b) $15.9\%$ $13.2\%$ $12.7\%$ $12.7\%$ Terminal Rates (c) $7/49 (14\%)$ $6/49 (12\%)$ $5/49 (10\%)$ $13.2\%$ $12.7\%$ Adjusted Rates (b) $15.9\%$ $13.2\%$ $12.7\%$ $12.7\%$ $12.7\%$ Adjusted Rates (b) $15.9\%$ $6/41 (1\%)$ $4/34 (11\%)$ $4/38 (11\%)$ $4/38 (11\%)$ Mausted Rates (b) $15.9\%$ $9/52 (17\%)$ $6/51 (12\%)$ $7/61 (14\%)$ Adjusted Rates (b) $9.2322N$ $P = 0.449N$	Fisher Exact Test (d)	1 = 0.071	P = 0.357 N	P = 0.630	
$\begin{array}{llllllllllllllllllllllllllllllllllll$	Thyroid Gland: C-Cell Carcinoma				
Adjusted Rates (b)       4.5%       6.6%       0.0%         Terminal Rates (c)       2/44 (5%)       0/38 (0%)         Usek of First Observation       105       104       0/38 (0%)         Life Table Tests (d)       P = 0.236N       P = 0.579       P = 0.271N         Cochran-Armitage Trend Test (d)       P = 0.170N       P = 0.579       P = 0.271N         Cochran-Armitage Trend Test (d)       P = 0.202N       P = 0.500       P = 0.247N         Thyroid Gland: C-Cell Adenoma or Carcinoma       0/49 (12%)       5/49 (10%)       3/44 (1%)         Adjusted Rates (b)       15.5%       13.2%       12.7%         Terminal Rates (c)       7/44 (16%)       5/44 (11%)       4/38 (11%)         Week of First Observation       105       104       98         Life Table Tests (d)       P = 0.322N       P = 0.449N       P = 0.497N         Cochran-Armitage Trend Test (d)       P = 0.322N       P = 0.449N       P = 0.407N         Cochran-Armitage Trend Test (d)       P = 0.322N       P = 0.449N       P = 0.407N         Cochran-Armitage Trend Test (d)       P = 0.322N       P = 0.449N       P = 0.407N         Cochran-Armitage Trend Test (d)       P = 0.322N       P = 0.449N       P = 0.407N         Cochran-Armitage Trend Test (d)	Overall Rates (a)	2/49 (4%)	3/49 (6%)	0/49 (0%)	
Terminal Rates (c)       2/44 (5%)       2/44 (5%)       0/38 (0%)         Week of First Observation       105       104         Life Table Tests (d)       P = 0.236N       P = 0.579       P = 0.271N         Cochran - Armitage Trend Test (d)       P = 0.170N       P = 0.579       P = 0.271N         Thyroid Gland: C-Cell Adenoma or Carcinoma       0/48 (12%)       5/49 (10%)         Overall Rates (a)       7/49 (14%)       6/49 (12%)       5/49 (10%)         Adjusted Rates (b)       15.5%       13.2%       12.7%         Terminal Rates (c)       7/44 (16%)       5/44 (11%)       4/38 (11%)         Week of First Observation       105       104       98         Life Table Tests (d)       P = 0.420N       P = 0.442N       P = 0.442N         Incidental Tumor Tests (d)       P = 0.324N       P = 0.449N       P = 0.407N         Cochran - Armitage Trend Test (d)       P = 0.500N       P = 0.380N         Pacreatic Islets: Islet Cell Carcinoma       P = 0.500N       P = 0.380N         Overall Rates (a)       4/50 (3%)       9/52 (17%)       6/51 (12%)         Adjusted Rates (b)       3/44 (7%)       9/44 (20%)       6/39 (15%)         Incidental Tumor Tests (d)       P = 0.247       P = 0.121       P = 0.328 </td <td>Adjusted Rates (b)</td> <td>4.5%</td> <td>6.6%</td> <td>0.0%</td> <td></td>	Adjusted Rates (b)	4.5%	6.6%	0.0%	
Week of First Observation         105         104         104           Life Table Tests (d) $P = 0.236N$ $P = 0.579$ $P = 0.271N$ Incidental Tumor Tests (d) $P = 0.202N$ $P = 0.579$ $P = 0.271N$ Cochran-Armitage Trend Test (d) $P = 0.202N$ $P = 0.500$ $P = 0.271N$ Thyroid Gland: C-Cell Adenoma or Carcinoma $Overall Rates (a)$ $749 (14\%)$ $6/49 (12\%)$ $5/49 (10\%)$ Adjusted Rates (b)         15.9%         13.2%         12.7% $747 (14\%)$ $4/38 (11\%)$ Week of First Observation         105         104 $98$ $12.7\%$ $749 (14\%)$ $4/38 (11\%)$ Week of First Observation         105         104 $98$ $102.5\%$ $12.7\%$ Incidental Tumor Tests (d) $P = 0.417N$ $P = 0.496N$ $P = 0.482N$ $P = 0.496N$ $P = 0.407N$ Cochran-Armitage Trend Test (d) $P = 0.322N$ $P = 0.500N$ $P = 0.380N$ Pancreatic Islets: Islet Cell Carcinoma $0yerall Rates (a)$ $450 (8\%)$ $9f52 (17\%)$ $6f51 (12\%)$ Adjusted Rates (b) $8.8\%$ $20.5\%$ $15.4\%$ <td>Terminal Rates (c)</td> <td>2/44(5%)</td> <td>2/44(5%)</td> <td>0/38(0%)</td> <td></td>	Terminal Rates (c)	2/44(5%)	2/44(5%)	0/38(0%)	
Life Table Tests (d) $P = 0.236N$ $P = 0.576$ $P = 0.271N$ Incidental Tumor Tests (d) $P = 0.170N$ $P = 0.579$ $P = 0.271N$ Cochran-Armitage Trend Test (d) $P = 0.202N$ $P = 0.579$ $P = 0.271N$ Thyroid Gland: C-Cell Adenoma or Carcinoma $Overall Rates (a)$ $5/49 (12\%)$ $5/49 (10\%)$ Adjusted Rates (b) $15.9\%$ $13.2\%$ $12.7\%$ Terminal Rates (c) $7/44 (16\%)$ $5/44 (11\%)$ $4/38 (11\%)$ Week of First Observation $105$ $104$ $98$ Incidental Tumor Tests (d) $P = 0.324N$ $P = 0.449N$ $P = 0.449N$ Polymore Tests (d) $P = 0.322N$ $P = 0.500N$ $P = 0.438N$ Incidental Tumor Tests (d) $P = 0.324N$ $P = 0.449N$ $P = 0.407N$ Cochran-Armitage Trend Test (d) $P = 0.322N$ $P = 0.500N$ $P = 0.380N$ Pancreatic Islets: Islet Cell Carcinoma $0/50 (15\%)$ $9/52 (17\%)$ $6/51 (12\%)$ Adjusted Rates (b) $3.8\%$ $20.5\%$ $15.4\%$ Terminal Rates (c) $3/44 (7\%)$ $9/44 (20\%)$ $6/39 (15\%)$ Verail Rates (a) $4/50 (8\%)$ $9/52 (17\%)$ $6/51 (12\%)$ Adjusted Rates (b) $1.16\%$ $P = 0.277$ $P = 0.121$ $P = 0.298$ Incidental Tumor Tests (d) $P = 0.277$ $P = 0.121$ $P = 0.381$ Pancreatic Islets: Islet Cell Adenoma or Carcinoma $Overall Rates (a)$ $5/50 (10\%)$ $11/52 (21\%)$ Overal Rates (b) $11.1\%$ $25.0\%$ $17,9\%$ Terminal Rates (c) $4/44 (9\%)$ $11/44 (2$	Week of First Observation	105	104		
Incidental Tumor Tests (d) $P = 0.170N$ $P = 0.579$ $P = 0.271N$ Cochran-Armitage Trend Test (d) $P = 0.202N$ $P = 0.500$ $P = 0.247N$ Thyroid Gland: C-Cell Adenoma or Carcinoma $P = 0.202N$ $P = 0.579$ $P = 0.247N$ Adjusted Rates (b) $15.9\%$ $13.2\%$ $12.7\%$ Terminal Rates (c) $744(116\%)$ $5/44(11\%)$ $4/38(11\%)$ Week of First Observation $105$ $104$ $98$ Life Table Tests (d) $P = 0.417N$ $P = 0.496N$ $P = 0.482N$ Incidental Tumor Tests (d) $P = 0.322N$ $P = 0.500N$ $P = 0.407N$ Cochran-Armitage Trend Test (d) $P = 0.322N$ $P = 0.500N$ $P = 0.407N$ Fisher Exact Test (d) $P = 0.322N$ $P = 0.500N$ $P = 0.300N$ Pancreatic Islets: Islet Cell Carcinoma $00xerall Rates (a)$ $4/50(8\%)$ $9/52(17\%)$ $6/51(12\%)$ Adjusted Rates (b) $8.8\%$ $20.5\%$ $105$ $105$ $105$ Incidental Tumor Tests (d) $P = 0.247$ $P = 0.121$ $P = 0.2928$ $11.64(20\%)$ $7$	Life Table Tests (d)	P = 0.236N	P = 0.506	P = 0.271 N	
Cochran-Armitage Trend Test (d) $P = 0.202N$ $P = 0.500$ $P = 0.247N$ Thyroid Gland: C-Cell Adenoma or Carcinoma $749(14\%)$ $6/49(12\%)$ $5/49(10\%)$ Adjusted Rates (a) $15.9\%$ $13.2\%$ $12.7\%$ Terminal Rates (c) $7/44(16\%)$ $5/44(11\%)$ $4/38(11\%)$ Week of First Observation $105$ $104$ $98$ Incidental Tumor Tests (d) $P = 0.322N$ $P = 0.496N$ $P = 0.482N$ Incidental Tumor Tests (d) $P = 0.322N$ $P = 0.500N$ $P = 0.380N$ Pancreatic Islets: Islet Cell Carcinoma $0/52(17\%)$ $6/51(12\%)$ $6/39(15\%)$ Overall Rates (a) $4/50(8\%)$ $9/52(17\%)$ $6/51(12\%)$ $6/39(15\%)$ Adjusted Rates (b) $8.8\%$ $20.5\%$ $15.4\%$ $15.5\%$ Verall Rates (a) $4/50(8\%)$ $9/52(17\%)$ $6/31(15\%)$ Mainet Bates (b) $8.8\%$ $20.5\%$ $15.4\%$ Terminal Rates (c) $3/44(7\%)$ $9/44(20\%)$ $6/39(15\%)$ Verall Rates (a) $5/60(10\%)$ $11/52(21\%)$ $7/51(14\%)$ Adjusted Rates (b) $11.1\%$ $25.0\%$ </td <td>Incidental Tumor Tests (d)</td> <td>P = 0.170N</td> <td>P = 0.579</td> <td>P = 0.271 N</td> <td></td>	Incidental Tumor Tests (d)	P = 0.170N	P = 0.579	P = 0.271 N	
Contract Test (d) $P = 0.500$ $P = 0.247N$ Fisher Exact Test (d) $7/49 (14\%)$ $6/49 (12\%)$ $5/49 (10\%)$ Adjusted Rates (a) $7/49 (14\%)$ $6/49 (12\%)$ $5/49 (10\%)$ Adjusted Rates (b) $15.9\%$ $13.2\%$ $12.7\%$ Terminal Rates (c) $7/44 (16\%)$ $5/44 (11\%)$ $4/38 (11\%)$ Week of First Observation $104$ 98         Life Table Tests (d) $P = 0.417N$ $P = 0.496N$ $P = 0.407N$ Cochran-Armitage Trend Test (d) $P = 0.324N$ $P = 0.407N$ $P = 0.407N$ Cochran-Armitage Trend Test (d) $P = 0.322N$ $P = 0.407N$ $P = 0.30N$ Pancreatic Islets: Islet Cell Carcinoma $0$ $0/52 (17\%)$ $6/51 (12\%)$ Overall Rates (a) $4/50 (8\%)$ $9/52 (17\%)$ $6/51 (12\%)$ Adjusted Rates (b) $8.8\%$ $20.5\%$ $15.4\%$ Terminal Rates (c) $3/44 (7\%)$ $9/44 (20\%)$ $6/39 (15\%)$ Incidental Tumor Tests (d) $P = 0.273$ $P = 0.121$ $P = 0.381$ Cochran-Armitage Trend Test (d) $P = 0.339$ $P = 0.133$ $P = 0.383$ Panc	Cochran Armitage Trend Test (d)	P = 0.202N	1 - 0.015	1 - 0.21111	
Thyroid Gland: C-Cell Adenoma or Carcinoma $7/49(14\%)$ $6/49(12\%)$ $5/49(10\%)$ Adjusted Rates (a)       15.9%       13.2%       12.7%         Terminal Rates (c) $7/44(16\%)$ $5/44(11\%)$ $4/38(11\%)$ Week of First Observation       105       104       98         Life Table Tests (d)       P=0.417N       P=0.496N       P=0.482N         Incidental Tumor Tests (d)       P=0.322N       P=0.600N       P=0.380N         Pancreatic Islets: Islet Cell Carcinoma       0/52.17% $6/51(12\%)$ $6/51(12\%)$ Overall Rates (a) $4/50(8\%)$ $9/52.17\%$ $6/51(12\%)$ $6/39(15\%)$ Vereall Rates (a) $4/50(8\%)$ $9/52.17\%$ $6/51(12\%)$ $6/39(15\%)$ Vereall Rates (a) $4/50(8\%)$ $9/52.17\%$ $6/51(12\%)$ $6/39(15\%)$ Vereall Rates (a) $8/\%$ $20.5\%$ $15.4\%$ $105$ $105$ $105$ $105$ $105$ $105$ $105$ $105$ $105$ $105$ $105$ $105$ $105$ $105$ $105$ $105$ $105$ $105$ $105$ $105$ $105$ $105$ $105$ $105$	Fisher Exact Test (d)	1 = 0.2021	P-0 500	P = 0.247N	
Thyroid Gland: C-Cell Adenoma or Carcinoma Overall Rates (a) 7/49 (14%) 6/49 (12%) 5/49 (10%) Adjusted Rates (b) 15.9% 13.2% 12.7% Terminal Rates (c) 7/44 (16%) 5/44 (11%) 4/38 (11%) Week of First Observation 105 104 98 Life Table Tests (d) P=0.417N P=0.496N P=0.482N Incidental Tumor Tests (d) P=0.322N Fisher Exact Test (d) P=0.322N Fisher Exact Test (d) P=0.322N P=0.500N P=0.380N Pancreatic Islest: Islet Cell Carcinoma Overall Rates (a) 4/50 (8%) 9/52 (17%) 6/51 (12%) Adjusted Rates (b) 8.8% 20.5% 15.4% Terminal Rates (c) 3/44 (7%) 9/44 (20%) 6/39 (15%) Week of First Observation 99 105 105 Life Table Tests (d) P=0.247 P=0.121 P=0.298 Incidental Tumor Tests (d) P=0.273 P=0.142 P=0.351 Cochran-Armitage Trend Test (d) P=0.339 Fisher Exact Test (d) P=0.339 Fisher Exact Test (d) P=0.339 Pancreatic Islest: Islet Cell Adenoma or Carcinoma Overall Rates (a) 5/50 (10%) 11/52 (21%) 7/51 (14%) Adjusted Rates (b) 11.1% 25.0% 17.9% Terminal Rates (c) 4/44 (9%) 11/44 (25%) 7/39 (18%) Week of First Observation 99 105 105 Life Table Tests (d) P=0.273 P=0.142 P=0.383 Pancreatic Islest: Islet Cell Adenoma or Carcinoma Overall Rates (a) 11.1% 25.0% 17.9% Terminal Rates (c) 4/44 (9%) 11/44 (25%) 7/39 (18%) Week of First Observation 99 105 105 Life Table Tests (d) P=0.273 P=0.105 P=0.348 Cochran-Armitage Trend Test (d) P=0.354 Fisher Exact Test (d) P=0.354 Fisher Exact Test (d) P=0.354 Fisher Exact Test (d) P=0.354 Fisher Exact Test (d) P=0.249 P=0.089 P=0.299 Incidental Tumor Tests (d) P=0.354 Fisher Exact Test (d) P=0.354 Fisher Exact Test (d) P=0.249 P=0.105 P=0.348 Cochran-Armitage Trend Test (d) P=0.354 Fisher Exact Test (d) P=0.217 P=0.100 P=0.394 Mammary Gland: Fibroadenoma Overall Rates (a) 3/52 (6%) 6/52 (12%) 3/52 (6%) Adjusted Rates (b) 6.4% 13.1% 7.7% Terminal Rates (c) 2/44 (5%) 5/44 (11%) 3/39 (6%) Week of First Observation 50 Tist Discretation 75 105 Life Table Tests (d) P=0.289 P=0.137 P=0.445 Cochran-Armitage Trend Test (d) P=0.518 P=0.249 P=0.615 Hindigeneral Tumor	risher Exact rest(u)		1 = 0.500	1 - 0.24710	
Overail Rates (a)       7/49 (14%)       6/49 (12%)       5/49 (10%)         Adjusted Rates (b)       15.9%       13.2%       12.7%         Terminal Rates (c)       7/44 (16%)       5/44 (11%)       4/38 (11%)         Week of First Observation       105       104       98         Life Table Tests (d)       P=0.417N       P=0.498N       P=0.482N         Incidental Tumor Tests (d)       P=0.322N       P=0.449N       P=0.407N         Cochran-Armitage Trend Test (d)       P=0.322N       P=0.500N       P=0.380N         Parcreatic Islets: Islet Cell Carcinoma         Overall Rates (a)       4/50 (8%)       9/52 (17%)       6/51 (12%)         Adjusted Rates (b)       8.8%       20.500N       P=0.380N         Pancreatic Islets: Islet Cell Carcinoma         Overall Rates (c)       3/44 (7%)       9/44 (20%)       6/39 (15%)         Week of First Observation       99       105       105       105         Life Table Tests (d)       P=0.273       P=0.142       P=0.383         Pancreatic Islets: Islet Cell Adenoma or Carcinoma       0verall Rates (a)       5/50 (10%)       11/52 (21%)       7/51 (14%)         Adjusted Rates (b)       11.1%       25.0%       17.9%       17.9%	Thyroid Gland: C-Cell Adenoma or Carcin	oma			
Adjusted Rates (b)       15.9%       13.2%       12.7%         Terminal Rates (c)       744 (16%)       5/44 (11%)       4/38 (11%)         Week of First Observation       105       104       98         Life Table Tests (d)       P=0,417N       P=0,496N       P=0.407N         Cochran-Armitage Trend Test (d)       P=0.322N       P=0.449N       P=0.407N         Cochran-Armitage Trend Test (d)       P=0.322N       P=0.500N       P=0.300N         Pancreatic Islets: Islet Cell Carcinoma       Verall Rates (a)       4/50 (8%)       9/52 (17%)       6/51 (12%)         Adjusted Rates (b)       8.8%       20.5%       15.4%       15.4%         Terminal Rates (c)       3/44 (7%)       9/44 (20%)       6/39 (15%)         Week of First Observation       99       105       105         Lincidental Tumor Tests (d)       P=0.273       P=0.121       P=0.2381         Cochran-Armitage Trend Test (d)       P=0.339       P=0.13       P=0.383         Pancreatic Islets: Islet Cell Adenoma or Carcinoma       Overall Rates (a)       5/50 (10%)       11/52 (21%)       7/51 (14%)         Adjusted Rates (b)       11.1%       25.0%       17.9%       11/44 (25%)       7/39 (18%)         Week of First Observation       99	Overall Rates (a)	7/49(14%)	6/49 (12%)	5/49 (10%)	
Terminal Rates (c)       7/44 (16%)       5/44 (11%)       4/38 (11%)         Week of First Observation       105       104       98         Life Table Tests (d)       P=0.417N       P=0.496N       P=0.482N         Incidental Tumor Tests (d)       P=0.324N       P=0.449N       P=0.407N         Cochran Armitage Trend Test (d)       P=0.322N       P=0.500N       P=0.380N         Pancreatic Islets: Islet Cell Carcinoma $P=0.324N$ P=0.500N       P=0.380N         Pancreatic Islets: Islet Cell Carcinoma $9/52 (17\%)$ $6/51 (12\%)$ $Adjusted Rates (a)$ $A/50 (8\%)$ $9/52 (17\%)$ $6/51 (12\%)$ Adjusted Rates (a) $4/50 (8\%)$ $9/52 (17\%)$ $6/51 (12\%)$ $6/51 (12\%)$ Adjusted Rates (a) $3/44 (7\%)$ $9/44 (20\%)$ $6/39 (15\%)$ $9/52 (17\%)$ $6/51 (12\%)$ Week of First Observation       99       105       105 $105$ $105$ $105$ Life Table Tests (d)       P=0.273       P=0.121       P=0.298       Incidental Tumor Tests (d)       P=0.339       P=0.133       P=0.383         Pancreatic Islets: Islet Cell Adenoma or Carcinoma       Overall Rates (a) $1/144 (25\%)$ $7/51 (14\%)$ $3/52 (6\%)$ $6/52 (12\%)$	Adjusted Rates (b)	15.9%	13.2%	12.7%	
Week of First Observation       105       104       98         Life Table Tests (d)       P=0.417N       P=0.496N       P=0.482N         Incidental Tumor Tests (d)       P=0.322N       P=0.449N       P=0.407N         Cochran-Armitage Trend Test (d)       P=0.322N       P=0.500N       P=0.380N         Pancreatic Islets: Islet Cell Carcinoma $V=0.142N$ $P=0.500N$ P=0.380N         Overall Rates (a)       4/50 (8%)       9/52 (17%) $6/51$ (12%)         Adjusted Rates (b)       8.8%       20.5%       15.4%         Terminal Rates (a)       3/44 (7%)       9/44 (20%) $6/39$ (15%)         Week of First Observation       99       105       105       105         Life Table Tests (d)       P=0.247       P=0.121       P=0.298         Incidental Tumor Tests (d)       P=0.273       P=0.142       P=0.351         Cochran-Armitage Trend Test (d)       P=0.339       P=0.133       P=0.383         Pancreatic Islets: Islet Cell Adenoma or Carcinoma       0verall Rates (a) $5/50 (10\%)$ $11/52 (21\%)$ $7/51 (14\%)$ Adjusted Rates (b)       11.1%       25.0%       17.9%       17.9%         Terminal Rates (c)       4/44 (9%)       11/44 (25%)       7/39 (18%) </td <td>Terminal Rates (c)</td> <td>7/44(16%)</td> <td>5/44 (11%)</td> <td>4/38(11%)</td> <td></td>	Terminal Rates (c)	7/44(16%)	5/44 (11%)	4/38(11%)	
Life Table Tests (d) $P = 0.417N$ $P = 0.496N$ $P = 0.482N$ Incidental Tumor Tests (d) $P = 0.324N$ $P = 0.449N$ $P = 0.407N$ Cochran-Armitage Trend Test (d) $P = 0.322N$ $P = 0.449N$ $P = 0.407N$ Fisher Exact Test (d) $P = 0.322N$ $P = 0.449N$ $P = 0.407N$ Pancreatic Islets: Islet Cell Carcinoma $P = 0.322N$ $P = 0.300N$ $P = 0.380N$ Adjusted Rates (a) $4/50$ (8%) $9/52$ (17%) $6/51$ (12%)         Adjusted Rates (b) $8.3\%$ $20.5\%$ $15.4\%$ Terminal Rates (c) $3/44$ (7%) $9/44$ (20%) $6/39$ (15%)         Week of First Observation $99$ $105$ $105$ $105$ Incidental Tumor Tests (d) $P = 0.273$ $P = 0.142$ $P = 0.333$ Pancreatic Islets: Islet Cell Adenoma or Carcinoma $V$ $7/51$ (14%)         Overall Rates (a) $5/50 (10\%)$ $11/52 (21\%)$ $7/51 (14\%)$ Adjusted Rates (b) $11.1\%$ $20.5\%$ $17.9\%$ Terminal Rates (c) $4/44 (9\%)$ $11/44 (25\%)$ $7/39 (13\%)$ Week of First Observation $99$ $105$	Week of First Observation	105	104	98	
Incidental Tumor Tests (d) $P = 0.324N$ $P = 0.449N$ $P = 0.407N$ Cochran-Armitage Trend Test (d) $P = 0.322N$ $P = 0.500N$ $P = 0.380N$ Pancreatic Islets: Islet Cell Carcinoma $P = 0.732N$ $P = 0.500N$ $P = 0.380N$ Overall Rates (a) $4/50$ (8%) $9/52$ (17%) $6/51$ (12%)         Adjusted Rates (b) $8.8\%$ $20.5\%$ $15.4\%$ Terminal Rates (c) $3/44$ (7%) $9/44$ (20%) $6/39$ (15%)         Week of First Observation $99$ $105$ $105$ Incidental Tumor Tests (d) $P = 0.247$ $P = 0.121$ $P = 0.351$ Cochran-Armitage Trend Test (d) $P = 0.339$ $P = 0.142$ $P = 0.351$ Cochran-Armitage Trend Test (d) $P = 0.339$ $P = 0.133$ $P = 0.383$ Pancreatic Islets: Islet Cell Adenoma or Carcinoma $V$ $V$ $V$ $V$ Overall Rates (a) $5/50$ (10%) $11/52$ (21%) $7/51$ (14%)         Adjusted Rates (b) $11.1\%$ $25.0\%$ $17.9\%$ Terminal Rates (c) $4/44$ (9%) $11/44$ (25%) $7/39$ (18%)         Week of First Observation $99$	Life Table Tests (d)	P = 0.417 N	P = 0.496N	P = 0.482N	
Cochran-Armitage Trend Test (d) $P=0.322N$ Fisher Exact Test (d) $P=0.500N$ $P=0.380N$ Pancreatic Islets: Islet Cell Carcinoma $P=0.500N$ $P=0.380N$ Overall Rates (a) $4/50$ (8%) $952$ (17%) $6/51$ (12%)         Adjusted Rates (b) $8.8\%$ $20.5\%$ $15.4\%$ Terminal Rates (c) $3/44$ (7%) $9/44$ (20%) $6/39$ (15%)         Week of First Observation $99$ $105$ $105$ Life Table Tests (d) $P=0.273$ $P=0.121$ $P=0.298$ Incidental Tumor Tests (d) $P=0.339$ $P=0.133$ $P=0.383$ Pancreatic Islets: Islet Cell Adenoma or Carcinoma $O$ $7/51$ (14%)         Overall Rates (a) $5/50$ (10%) $11/52$ (21%) $7/51$ (14%)         Adjusted Rates (b) $11.1\%$ $25.0\%$ $17.9\%$ Terminal Rates (c) $4/44$ (9%) $11/44$ (25%) $7/39$ (18%)         Week of First Observation $99$ $105$ $105$ Life Table Tests (d) $P=0.249$ $P=0.089$ $P=0.299$ Incidental Tumor Tests (d) $P=0.273$ $P=0.100$ $P=0.334$	Incidental Tumor Tests (d)	P = 0.324 N	P = 0.449 N	P = 0.407 N	
Fisher Exact Test (d) $P = 0.500N$ $P = 0.380N$ Pancreatic Islets: Islet Cell Carcinoma $20.5\%$ $P = 0.380N$ Overall Rates (a) $4/50$ (8%) $9/52$ (17%) $6/51$ (12%)         Adjusted Rates (b) $8.8\%$ $20.5\%$ $15.4\%$ Terminal Rates (c) $3/44$ (7%) $9/44$ (20%) $6/38$ (15%)         Week of First Observation $99$ $105$ $105$ $105$ Incidental Tumor Tests (d) $P = 0.247$ $P = 0.121$ $P = 0.298$ Incidental Tumor Tests (d) $P = 0.273$ $P = 0.142$ $P = 0.381$ Cochran-Armitage Trend Test (d) $P = 0.339$ $P = 0.133$ $P = 0.383$ Pancreatic Islets: Islet Cell Adenoma or Carcinoma $P = 0.133$ $P = 0.383$ Overall Rates (a) $5/50$ (10%) $11/52$ (21%) $7/51$ (14%)         Adjusted Rates (b) $11.1\%$ $25.0\%$ $17.9\%$ Terminal Rates (c) $4/44$ (9%) $11/44$ (25%) $7/39$ (18%)         Week of First Observation $99$ $105$ $105$ $105$ Life Table Tests (d) $P = 0.249$ $P = 0.334$ $P = 0.334$ <	Cochran-Armitage Trend Test (d)	P = 0.322N			
Pancreatic Islets: Islet Cell Carcinoma         Overall Rates (a) $4/50$ (8%) $9/52$ (17%) $6/51$ (12%)         Adjusted Rates (b) $8.8\%$ $20.5\%$ $15.4\%$ Terminal Rates (c) $3/44$ (7%) $9/44$ (20%) $6/39$ (15%)         Week of First Observation $99$ $105$ $105$ $105$ Life Table Tests (d) $P = 0.247$ $P = 0.121$ $P = 0.298$ Incidental Tumor Tests (d) $P = 0.339$ $P = 0.142$ $P = 0.351$ Cochran-Armitage Trend Test (d) $P = 0.339$ $P = 0.133$ $P = 0.383$ Pancreatic Islets: Islet Cell Adenoma or Carcinoma $V/50$ (10%) $11/52$ (21%) $7/51$ (14%)         Adjusted Rates (a) $5/50$ (10%) $11/52$ (21%) $7/51$ (14%)         Adjusted Rates (c) $11.1\%$ $25.0\%$ $17.9\%$ Terminal Rates (c) $4/44$ (9%) $11/44$ (25%) $7/39$ (18%)         Week of First Observation $99$ $105$ $105$ $105$ Life Table Tests (d) $P = 0.249$ $P = 0.089$ $P = 0.348$ Cochran-Armitage Trend Test (d) $P = 0.354$ $P = 0.100$ $P = 0.394$ <t< td=""><td>Fisher Exact Test (d)</td><td></td><td>P = 0.500 N</td><td>P = 0.380N</td><td></td></t<>	Fisher Exact Test (d)		P = 0.500 N	P = 0.380N	
Overall Rates (a) $4/50 (8\%)$ $9/52 (17\%)$ $6/51 (12\%)$ Adjusted Rates (b) $8.8\%$ $20.5\%$ $15.4\%$ Terminal Rates (c) $3/44 (7\%)$ $9/44 (20\%)$ $6/39 (15\%)$ Week of First Observation $99$ $105$ $105$ Life Table Tests (d) $P = 0.247$ $P = 0.121$ $P = 0.298$ Incidental Tumor Tests (d) $P = 0.273$ $P = 0.142$ $P = 0.351$ Cochran Armitage Trend Test (d) $P = 0.339$ $P = 0.133$ $P = 0.383$ Pancreatic Islets: Islet Cell Adenoma or CarcinomaOverall Rates (a) $5/50 (10\%)$ $11/52 (21\%)$ $7/51 (14\%)$ Adjusted Rates (b) $11.1\%$ $25.0\%$ $17.9\%$ Terminal Rates (c) $4/44 (9\%)$ $11/44 (25\%)$ $7/39 (18\%)$ Week of First Observation $99$ $105$ $105$ Life Table Tests (d) $P = 0.273$ $P = 0.105$ $P = 0.299$ Incidental Tumor Tests (d) $P = 0.354$ $P = 0.100$ $P = 0.348$ Cochran Armitage Trend Test (d) $P = 0.354$ $P = 0.100$ $P = 0.394$ Manmary Gland: Fibroadenoma $3/52 (6\%)$ $6/52 (12\%)$ $3/52 (6\%)$ Adjusted Rates (b) $6.4\%$ $13.1\%$ $7.7\%$ Terminal Rates (c) $2/44 (5\%)$ $5/44 (11\%)$ $3/39 (8\%)$ Week of First Observation $50$ $75$ $105$ Life Table Tests (d) $P = 0.289$ $P = 0.137$ $P = 0.445$ Cochran Armitage Trend Test (d) $P = 0.573$ $P = 0.661$ Incidental Tumor Tests (d) $P = 0.57$	Pancreatic Islets: Islet Cell Carcinoma				
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Week of First Observation       99       105       105         Life Table Tests (d) $P = 0.247$ $P = 0.121$ $P = 0.298$ Incidental Tumor Tests (d) $P = 0.273$ $P = 0.142$ $P = 0.351$ Cochran-Armitage Trend Test (d) $P = 0.339$ $P = 0.133$ $P = 0.383$ Pancreatic Islets: Islet Cell Adenoma or Carcinoma $P = 0.339$ $P = 0.133$ $P = 0.383$ Pancreatic Islets: Islet Cell Adenoma or Carcinoma $P = 0.142$ $7/51$ (14%)         Adjusted Rates (a) $5/50$ (10%) $11/52$ (21%) $7/51$ (14%)         Adjusted Rates (b) $11.1\%$ $25.0\%$ $17.9\%$ Terminal Rates (c) $4/44$ (9%) $11/44$ (25%) $7/39$ (18%)         Week of First Observation       99       105       105         Life Table Tests (d) $P = 0.249$ $P = 0.089$ $P = 0.299$ Incidental Tumor Tests (d) $P = 0.354$ $P = 0.100$ $P = 0.348$ Cochran-Armitage Trend Test (d) $P = 0.354$ $P = 0.100$ $P = 0.394$ Mammary Gland: Fibroadenoma $0.4\%$ $3.1\%$ $7.7\%$ $7.7\%$ Overall Rates (a) $3/52$ (6%) $6/52$ (12%)	Terminal Rates (c)	3/44(7%)	9/44 (20%)	6/39 (15%)	
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Indicidit Function Function $P = 0.210$ $P = 0.210$ $P = 0.142$ $P = 0.001$ Cochran-Armitage Trend Test (d) $P = 0.339$ $P = 0.133$ $P = 0.133$ $P = 0.383$ Pancreatic Islets: Islet Cell Adenoma or CarcinomaOverall Rates (a) $5/50(10\%)$ $11/52(21\%)$ $7/51(14\%)$ Adjusted Rates (b) $11.1\%$ $25.0\%$ $17.9\%$ Terminal Rates (c) $4/44(9\%)$ $11/44(25\%)$ $7/39(18\%)$ Week of First Observation $99$ $105$ $105$ Life Table Tests (d) $P = 0.249$ $P = 0.089$ $P = 0.299$ Incidental Tumor Tests (d) $P = 0.273$ $P = 0.105$ $P = 0.348$ Cochran-Armitage Trend Test (d) $P = 0.354$ $P = 0.100$ $P = 0.394$ Mammary Gland: Fibroadenoma $0/2144(5\%)$ $5/44(11\%)$ $3/52(6\%)$ Overall Rates (a) $3/52(6\%)$ $6/52(12\%)$ $3/52(6\%)$ Adjusted Rates (b) $6.4\%$ $13.1\%$ $7.7\%$ Terminal Rates (c) $2/44(5\%)$ $5/44(11\%)$ $3/39(8\%)$ Week of First Observation $50$ $75$ $105$ Life Table Tests (d) $P = 0.518$ $P = 0.249$ $P = 0.615$ Incidental Tumor Tests (d) $P = 0.289$ $P = 0.137$ $P = 0.445$ Cochran-Armitage Trend Test (d) $P = 0.573$ $P = 0.244$ $P = 0.661$	Incidental Tumor Tests (d)	P = 0.273	P = 0.121	P = 0.351	
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Pancreatic Islets: Islet Cell Adenoma or Carcinoma         Overall Rates (a) $5/50(10\%)$ $11/52(21\%)$ $7/51(14\%)$ Adjusted Rates (b) $11.1\%$ $25.0\%$ $17.9\%$ Terminal Rates (c) $4/44(9\%)$ $11/44(25\%)$ $7/39(18\%)$ Week of First Observation $99$ $105$ $105$ Life Table Tests (d) $P=0.249$ $P=0.089$ $P=0.299$ Incidental Tumor Tests (d) $P=0.354$ $P=0.105$ $P=0.348$ Cochran-Armitage Trend Test (d) $P=0.354$ $P=0.100$ $P=0.394$ Mammary Gland: Fibroadenoma $3/52(6\%)$ $6/52(12\%)$ $3/52(6\%)$ $Ajusted Rates (a)$ Adjusted Rates (b) $6.4\%$ $13.1\%$ $7.7\%$ Terminal Rates (c) $2/44(5\%)$ $5/44(11\%)$ $3/39(8\%)$ Week of First Observation $50$ $75$ $105$ Life Table Tests (d) $P=0.289$ $P=0.137$ $P=0.615$ Incidental Tumor Tests (d) $P=0.289$ $P=0.137$ $P=0.445$ Cochran-Armitage Trend Test (d) $P=0.573$ $P=0.244$ $P=0.661$	Fisher Exact Test (d)	1 = 0.335	P = 0.133	P-0.383	
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Week of First Observation       99       105       105         Life Table Tests (d) $P = 0.249$ $P = 0.089$ $P = 0.299$ Incidental Tumor Tests (d) $P = 0.273$ $P = 0.105$ $P = 0.348$ Cochran-Armitage Trend Test (d) $P = 0.354$ $P = 0.100$ $P = 0.394$ Mammary Gland: Fibroadenoma       0verall Rates (a) $3/52 (6\%)$ $6/52 (12\%)$ $3/52 (6\%)$ Adjusted Rates (b) $6.4\%$ $13.1\%$ $7.7\%$ Terminal Rates (c) $2/44 (5\%)$ $5/44 (11\%)$ $3/39 (8\%)$ Week of First Observation $50$ $75$ $105$ Life Table Tests (d) $P = 0.518$ $P = 0.249$ $P = 0.615$ Incidental Tumor Tests (d) $P = 0.573$ $P = 0.137$ $P = 0.645$ Cochran-Armitage Trend Test (d) $P = 0.573$ $P = 0.244$ $P = 0.661$	Terminal Rates (c)	4/44 (9%)	11/44 (25%)	7/39(18%)	
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Cochran-Armitage Trend Test (d) $P=0.354$ Fisher Exact Test (d) $P=0.394$ Mammary Gland: Fibroadenoma $0$ verall Rates (a)Overall Rates (a) $3/52 (6\%)$ Adjusted Rates (b) $6.4\%$ 13.1% $7.7\%$ Terminal Rates (c) $2/44 (5\%)$ Week of First Observation $50$ $50$ $75$ Life Table Tests (d) $P=0.518$ $P=0.249$ $P=0.615$ Incidental Tumor Tests (d) $P=0.573$ Fisher Exact Test (d) $P=0.573$ $P=0.244$ $P=0.661$	Incidental Tumor Tests (d)	P = 0.273	P = 0.105	P = 0.348	
Fisher Exact Test (d) $P = 0.100$ $P = 0.394$ Mammary Gland: Fibroadenoma $3/52 (6\%)$ $6/52 (12\%)$ $3/52 (6\%)$ Overall Rates (a) $3/52 (6\%)$ $6/52 (12\%)$ $3/52 (6\%)$ Adjusted Rates (b) $6.4\%$ $13.1\%$ $7.7\%$ Terminal Rates (c) $2/44 (5\%)$ $5/44 (11\%)$ $3/39 (8\%)$ Week of First Observation $50$ $75$ $105$ Life Table Tests (d) $P = 0.518$ $P = 0.249$ $P = 0.615$ Incidental Tumor Tests (d) $P = 0.289$ $P = 0.137$ $P = 0.445$ Cochran-Armitage Trend Test (d) $P = 0.573$ $P = 0.244$ $P = 0.661$	Cochran-Armitage Trend Test (d)	P = 0.354			
Mammary Gland: Fibroadenoma $3/52(6\%)$ $6/52(12\%)$ $3/52(6\%)$ Adjusted Rates (a) $3/52(6\%)$ $6.4\%$ $13.1\%$ $7.7\%$ Terminal Rates (c) $2/44(5\%)$ $5/44(11\%)$ $3/39(8\%)$ Week of First Observation $50$ $75$ $105$ Life Table Tests (d) $P = 0.518$ $P = 0.249$ $P = 0.615$ Incidental Tumor Tests (d) $P = 0.573$ $P = 0.645$ Fisher Exact Test (d) $P = 0.573$ $P = 0.244$ $P = 0.661$	Fisher Exact Test (d)		P = 0.100	P = 0.394	
Overall Rates (a) $3/52 (6\%)$ $6/52 (12\%)$ $3/52 (6\%)$ Adjusted Rates (b) $6.4\%$ $13.1\%$ $7.7\%$ Terminal Rates (c) $2/44 (5\%)$ $5/44 (11\%)$ $3/39 (8\%)$ Week of First Observation $50$ $75$ $105$ Life Table Tests (d) $P = 0.518$ $P = 0.249$ $P = 0.615$ Incidental Tumor Tests (d) $P = 0.289$ $P = 0.137$ $P = 0.445$ Cochran-Armitage Trend Test (d) $P = 0.573$ $P = 0.244$ $P = 0.661$	Mammary Gland: Fibroadenoma				
Adjusted Rates (b) $6.4\%$ $13.1\%$ $7.7\%$ Terminal Rates (c) $2/44$ (5%) $5/44$ (11%) $3/39$ (8%)Week of First Observation $50$ $75$ $105$ Life Table Tests (d) $P = 0.518$ $P = 0.249$ $P = 0.615$ Incidental Tumor Tests (d) $P = 0.289$ $P = 0.137$ $P = 0.445$ Cochran-Armitage Trend Test (d) $P = 0.573$ $P = 0.244$ $P = 0.661$	Overall Rates (a)	3/52(6%)	6/52 (12%)	3/52(6%)	
Terminal Rates (c) $2/44 (5\%)$ $5/44 (11\%)$ $3/39 (8\%)$ Week of First Observation $50$ $75$ $105$ Life Table Tests (d) $P = 0.518$ $P = 0.249$ $P = 0.615$ Incidental Tumor Tests (d) $P = 0.289$ $P = 0.137$ $P = 0.445$ Cochran-Armitage Trend Test (d) $P = 0.573$ $P = 0.244$ $P = 0.661$	Adjusted Rates (b)	6.4%	13.1%	7.7%	
Week of First Observation5075105Life Table Tests (d) $P = 0.518$ $P = 0.249$ $P = 0.615$ Incidental Tumor Tests (d) $P = 0.289$ $P = 0.137$ $P = 0.445$ Cochran-Armitage Trend Test (d) $P = 0.573$ $P = 0.244$ $P = 0.661$	Terminal Rates (c)	2/44 (5%)	5/44(11%)	3/39 (8%)	
Life Table Tests (d) $P = 0.518$ $P = 0.249$ $P = 0.615$ Incidental Tumor Tests (d) $P = 0.289$ $P = 0.137$ $P = 0.445$ Cochran-Armitage Trend Test (d) $P = 0.573$ $P = 0.244$ $P = 0.615$	Week of First Observation	50	75	105	
Incidental Tumor Tests (d) $P = 0.289$ $P = 0.137$ $P = 0.445$ Cochran-Armitage Trend Test (d) $P = 0.573$ $P = 0.661$	Life Table Tests (d)	P = 0.518	P = 0.249	P = 0.615	
Cochran-Armitage Trend Test (d) $P = 0.573$ $P = 0.244$ $P = 0.661$	Incidental Tumor Tests (d)	P = 0.289	P = 0.137	P = 0.445	
Fisher Exact Test (d) $P=0.244$ $P=0.661$	Cochran. Armitage Trand Tast (d)	P = 0.573	1 0.101		
	Fisher Exact Test (d)	1 0.010	P = 0.244	P = 0.661	

## TABLE B6. ANALYSIS OF PRIMARY TUMORS IN FEMALE RATS IN THE SECOND TWO-YEAR FEED STUDY OF MIREX (Continued)

	Control	50 ppm	100 ppm
Mammary Gland: Adenoma or Fibroadenoma			
Overall Rates (a)	3/52 (6%)	7/52(13%)	3/52 (6%)
Adjusted Rates (b)	6.4%	15.3%	7.7%
Terminal Rates (c)	2/44 (5%)	6/44 (14%)	3/39 (8%)
Week of First Observation	50	75	105
Life Table Tests (d)	P = 0.511	P = 0.165	P = 0.615
Incidental Tumor Tests (d)	P = 0.292	P = 0.083	P = 0.445
Cochran-Armitage Trend Test (d)	P = 0.570		
Fisher Exact Test (d)	1 0.010	P = 0.159	P = 0.661
Uterus: Endometrial Stromal Polyp			
Overall Rates (a)	12/52 (23%)	8/51 (16%)	8/52 (15%)
Adjusted Rates (b)	27.3%	18.6%	18.7%
Terminal Rates (c)	12/44 (27%)	8/43 (19%)	6/39 (15%)
Week of First Observation	105	106	82
Life Table Tests (d)	P = 0.260 N	P = 0.241 N	P = 0.315N
Incidental Tumor Tests (d)	P = 0.196N	P = 0.241 N	P = 0.241 N
Cochran-Armitage Trend Test (d)	P = 0.186N		
Fisher Exact Test (d)		P = 0.243 N	P = 0.228 N
All Sites: Benign Tumors			
Overall Rates (a)	41/52 (79%)	36/52 (69%)	31/52 (60%)
Adjusted Rates (b)	85.4%	74.9%	70.2%
Terminal Rates (c)	37/44 (84%)	32/44(73%)	26/39 (67%)
Week of First Observation	50	75	82
Life Table Tests (d)	P = 0.128N	P = 0.189 N	P = 0.153N
Incidental Tumor Tests (d)	P = 0.055N	P = 0.219N	P = 0.054 N
Cochran-Armitage Trend Test (d)	P = 0.022N		
Fisher Exact Test (d)		P = 0.186N	P = 0.028N
All Sites: Malignant Tumors			
Overall Rates (a)	17/52 (33%)	24/52(46%)	24/52 (46%)
Adjusted Rates (b)	35.4%	48.0%	52.7%
Terminal Rates (c)	13/44 (30%)	18/44(41%)	18/39 (46%)
Week of First Observation	80	95	82
Life Table Tests (d)	P = 0.057	P = 0.154	P = 0.071
Incidental Tumor Tests (d)	P = 0.184	P = 0.166	P==0.193
Cochran-Armitage Trend Test (d)	P = 0.098		
Fisher Exact Test (d)		P = 0.114	P = 0.114
All Sites: All Tumors			
Overall Rates (a)	49/52 (94%)	47/52 (90%)	48/52 (92%)
Adjusted Rates (b)	96.1%	90.4%	96.0%
Terminal Rates (c)	42/44 (95%)	39/44 (89%)	37/3 <b>9</b> (95%)
Week of First Observation	50	75	82
Life Table Tests (d)	P = 0.232	P = 0.372 N	P = 0.262
Incidental Tumor Tests (d)	P = 0.395N	P = 0.358N	P = 0.419N
Cochran-Armitage Trend Test (d)	P = 0.427 N		
Fisher Exact Test (d)		P = 0.358N	P = 0.500 N

#### TABLE B6. ANALYSIS OF PRIMARY TUMORS IN FEMALE RATS IN THE SECOND TWO-YEAR FEED STUDY OF MIREX (Continued)

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

(b) Kaplan-Meier estimated tumor incidences at the end of the study after adjusting for intercurrent mortality

(c) Observed tumor incidence at terminal kill

<sup>(</sup>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 nonfatal. The Cochran-Armitage and Fisher exact tests compare directly the overall incidence rates. A negative trend or lower incidence in a dosed group is indicated by (N).

#### TABLE B7a. HISTORICAL INCIDENCE OF HEPATOCELLULAR TUMORS IN FEMALE F344/N RATS **RECEIVING NO TREATMENT (a,b)**

		Incidence in Cont	rols
	Neoplastic Nodule	Hepatocellular Carcinoma	Neoplastic Nodule or Hepatocellular Carcinoma
Overall Historical Incidence	w		
TOTAL SD (c)	57/2,015 (2.8%) 2.86%	3/2,015 (0.1%) 0.70%	59/2,015 (2.9%) 3.04%
Range (d) High	5/50	2/50	5/50
Low	0/50	0/88	0/50

(a) Data as of August 30, 1985, for studies of at least 104 weeks

(b) No 2-year studies by Frederick Cancer Research Center are included in the historical data base.

(c) Standard deviation

(d) Range and SD are presented for groups of 35 or more animals.

#### TABLE 87b. HISTORICAL INCIDENCE OF HEMATOPOIETIC SYSTEM TUMORS IN FEMALE F344/N **RATS RECEIVING NO TREATMENT** (a,b)

	Incidence of Leukemia in Controls	
Overall Historical Incidence		
TOTAL SD (c)	375/2,021 (18.6%) 6.55%	
Range (d) High Low	19/50 3/50	

(a) Data as of August 30, 1985, for studies of at least 104 weeks

(b) No 2-year studies by Frederick Cancer Research Center are included in the historical data base.

(c) Standard deviation

(d) Range and SD are presented for groups of 35 or more animals.

#### TABLE B7c. HISTORICAL INCIDENCE OF PITUITARY GLAND TUMORS IN FEMALE F344/N RATS **RECEIVING NO TREATMENT (a,b)**

		Incidence in Controls									
	Adenoma (c)	Carcinoma (d)	Adenoma or Carcinoma								
Overall Historical Incide	ence		······································								
TOTAL SD (e)	862/1,952(44.2%) 11.56%	71/1,952(3.6%) 3.97%	931/1,952(47.7%) 11.02%								
Range (f) High Low	33/47 7/39	8/49 0/50	33/47 9/39								

(a) Data as of August 30, 1985, for studies of at least 104 weeks

(b) No 2-year studies by Frederick Cancer Research Center are included in the historical data base.

(c) Includes all adenomas diagnosed as NOS, chromophobe, acidophil, or basophil (d) Includes all adenocarcinomas, NOS, carcinomas, NOS, and chromophobe carcinomas

(e) Standard deviation

(f) Range and SD are presented for groups of 35 or more animals.

	Incidence in Controls										
	Pheochromocytoma	Malignant Pheochromocytoma	Pheochromocytoma or Malignant Pheochromocytoma								
Overall Historical Incidence											
TOTAL SD (c)	87/2,001 (4.3%) 3.68%	7/2,001 (0.3%) 0.77%	94/2,001 (4.7%) 3.59%								
Range (d) High Low	8/50 0/50	1/40 0/50	8/50 0/50								

#### TABLE B7d. HISTORICAL INCIDENCE OF ADRENAL GLAND TUMORS IN FEMALE F344/N RATS **RECEIVING NO TREATMENT (a,b)**

(a) Data as of August 30, 1985, for studies of at least 104 weeks

(b) No 2-year studies by Frederick Cancer Research Center are included in the historical data base.

(c) Standard deviation

(d) Range and SD are presented for groups of 35 or more animals.

#### TABLE B7e. HISTORICAL INCIDENCE OF THYROID GLAND C-CELL TUMORS IN FEMALE F344/N RATS **RECEIVING NO TREATMENT (a,b)**

	Incidence in Controls										
	Adenoma	Carcinoma	Adenoma or Carcinoma								
Overall Historical Incidence	······································										
TOTAL SD (c)	114/1,952 (5.8%) 5.02%	71/1,952 (3.6%) 2.55%	182/1,952 (9.3%) 5.46%								
Range (d) High Low	9/50 0/86	5/50 0/50	11/50 0/50								

(a) Data as of August 30, 1985, for studies of at least 104 weeks (b) No 2-year studies by Frederick Cancer Research Center are included in the historical data base.

(c) Standard deviation

(d) Range and SD are presented for groups of 35 or more animals.

## **TABLE B8.** SUMMARY OF THE INCIDENCE OF NONNEOPLASTIC LESIONS IN FEMALE RATS IN THEFIRST TWO-YEAR FEED STUDY OF MIREX

	Untreated Control		0.1 pp	m	1 ppr	n	10 p	10 ppm		25 ppm		pm
ANIMALS INITIALLY IN STUDY ANIMALS NECROPSIED ANIMALS EXAMINED HISTOPATH	52 52 52		52 52 52	- <u></u>	52 52 52		52 52 52		52 52 52		52 52 52	
INTEGUMENTARY SYSTEM None				<u>.</u>								
RESPIRATORY SYSTEM #Tracheal mucosa Metaplasia, squamous #Lung Congestion, chronic passive Inflammation, interstitial Hyperplasia, alveolar epitheliu	(47) (52) m 2	(4%)	(47) 1 (52)	(2%)	(45) (52) 3	(6%)	(47) (52) 1	(2%)	(46) (52)		(44) (52) 3 1	(6%) (2%)
HEMATOPOIETIC SYSTEM #Bone marrow Fibrosis Fibrosis, focal #Spleen Fibrosis Fibrosis Fibrosis, focal Infarct, NOS	(50) 1 (50) 1	(2%)	(49) (52) 3	(6%)	(49) (52) 1	(2%)	(50) 2 (50) 2 1	(4%) (4%) (2%)	(49) (51) 2	(4%)	(50) (50) 1	(2%)
Atrophy, NOS Depletion, lymphoid Hematopoiesis #Splenic sinusoids Angiectasis #Mediastinal lymph node Congestion, NOS #Mesenteric lymph node Information acute negrotizin	7 (50) (51) (51)	(14%)	5 (52) (52) (52)	(10%)	5 (52) (52) (52)	(10%)	1 (50) (51) 1 (51)	(2%) (14%) (2%)	1 (51) (52) (52)	(2%) (2%)	1 (50) 1 (52) (52)	(2%) (2%)
Fibrosis #Thymus Cyst, NOS Hyperplasia, epithelial	(42) 5	(12%)	(47) 3 5	(6%) (11%)	1 (42) 4 7	(2%) (10%) (17%)	1 (42) 3 8	(2%) (7%) (19%)	(48) 2 5	(4%) (10%)	(41) 6 13	(15%) (32%)
CIRCULATORY SYSTEM #Heart Mineralization Inflammation, chronic #Left atrium Thrombosis, NOS #Cardiac valve Inflammation, chronic *Hepatic vein Thrombosis, NOS #Pancreas Periarteritis #Stomsch	(52) 1 44 (52) (52) (52) (52) (50) 1 (50)	(2%) (85%) (2%)	(52) 44 (52) 1 (52) (52) (52) 1 (52)	(85%) (2%) (2%)	(52) 45 (52) 3 (52) (52) (52) (51) 1	(87%) (6%) (2%)	(52) 44 (52) 2 (52) (52) (52) (49)	(85%) (4%)	(52) 49 (52) (52) (52) (52) (52)	(94%)	(52) 47 (52) (52) 1 (52) (52) (50)	(90%) (2%)
Periarteritis *Mesentery Periarteritis #Kidney Periarteritis #Adrenal Periarteritis	(50) (52) (51) (51)	(2%)	(52) 1 (52) (52)	(2%)	(52) 1 (52) (52)	(2%)	(52) (51) 1 (51) 1	(2%) (2%)	(52) (51) (51)		(52) (52) (52)	
DIGESTIVE SYSTEM #Salivary gland Abscess, NOS #Liver Inflammation, acute focal Inflammation, chronic Inflammation, cranulomatous	(51) (52)		(51) (52)		(51) (52) 1 1	(2%) (2%)	(51) 1 (52)	(2%)	(52) (52)		(52) (52) 1	(2%)
Necrosis, NOS Necrosis, focal Metamorphosis, fatty Pigmentation, NOS Basophilic cyto change Eosinophilic cyto change	2 1 11 47	(4%) (2%) (21%) (90%)	4 13 45	(8%) (25%) (87%)	1 1 18 1 45 1	(2%) (2%) (35%) (2%) (87%) (2%)	7 4 36 44	(13%) (8%) (69%) (85%)	4 4 45 43	(8%) (8%) (87%) (83%)	4 3 43 1 34	(8%) (6%) (83%) (2%) (65%)

1	Untreat Contro	ted ol	0.1 ppm		1 ppm		10 ppm		25 ppm		50 p	50 ppm	
DIGESTIVE SYSTEM										····		<u></u>	
#Liver (Continued)	(52)		(52)		(52)		(52)		(52)		(52)		
Hepatocytomegaly	4	(8%)	2	(4%)	3	(6%)	14	(27%)	39	(75%)	45	(87%)	
Atrophy, NOS			1	(2%)	2	(4%)					•	(1.50)	
Anglectasis #Liver/condets labe	3 (FD)	(6%)	8	(15%)	3 (50)	(6%)	2 (50)	(4%)	(50)	(4,%)	(52)	(17%)	
Infarct NOS	(32)		(52)	(2%)	(32)		(32)		(32)		(32)		
#Liver/centrilobular	(52)		(52)	(2.0)	(52)		(52)		(52)		(52)		
Degeneration, NOS							1	(2%)	1	(2%)	2	(4%)	
Necrosis, NOS					1	(2%)	4	(8%)			6	(12%)	
Atrophy, NOS #Liver/Kupfer coll	(50)	(8%)	4	(8%)	7	(13%)	(50)	(2%)	(50)	(16%)	(59)	(4%)	
Pigmentation NOS	(52)	(2%)	(52)	(2.%)	(52)	(2%)	(32)		(54)		(32)		
#Bile duct	(52)		(52)		(52)	(2.07	(52)		(52)		(52)		
Cyst, NOS	1	(2%)	(- <b>-</b> )								1	(2%)	
Hyperplasia, NOS	23	(44%)	29	(56%)	29	(56%)	35	(67%)	37	(71%)	26	(50%)	
#Pancreas	(50)		(52)		(51)		(49)		(50)		(50)		
Inflammation, chronic						.0.00			1	(2%)			
r IDROSIS Necrosis fat					1	(2%) (2%)							
Eosinophilic cyto change					1	(2%)	2	(4%)			1	(2%)	
#Pancreatic acinus	(50)		(52)		(51)		(49)		(50)		(50)	.=/	
Atrophy, NOS	4	(8%)	1	(2%)	3	(6%)	2	(4%)	5	(10%)	3	(6%)	
#Stomach	(50)		(52)		(50)		(51)		(48)		(51)		
Inflammation, chronic											1	(2%)	
#Gastric mucosa	(50)	(196)	(52)	(196)	(50)	(6%)	(51)		(48)	(290)	(91)		
Erosion	4	(19-70)	2	(4%) (4%)	3	(0%)	3	(6%)	1	(2/0)	2	(4%)	
Hyperplasia, epithelial			~	(*/0/			Ŭ	(0.07	1	(2%)	-	(1.0)	
#Gastric submucosa	(50)		(52)		(50)		(51)		(48)		(51)		
Cyst, NOS	1	(2%)											
#Forestomach	(50)		(52)		(50)	.00	(51)	(00)	(48)	(00)	(51)	(4.01)	
Ulcer, NOS Inflammation, couto	,	(901-)	5	(10%)	4	(8%) (9%)	3	(15%) (19 <i>0</i> %)	I	(2%)	2	(4.%)	
Inflammation, acute necrotizing	. <b>1</b>	(2%)			1	(2%)	1	(2%)			1	(2%)	
Inflammation, chronic			1	(2%)							-		
Hyperplasia, epithelial	1	(2%)	5	(10%)	5	(10%)	3	(6%)	1	(2%)	1	(2%)	
URINARY SYSTEM													
#Kidney	(51)		(52)		(52)		(51)		(51)		(52)		
Mineralization	1	(2%)											
Hydronephrosis		(0777)	10	(010)	1	(2%)	17	(000)	47	000	40	(0100)	
Nephropathy Inferet NOS	34	(67%)	42	(81%)	40	(8(%) (9%)	47	(92%)	41	(92%)	42	(01%)	
#Kidnev/cortex	(51)		(52)		(52)		(51)		(51)		(52)		
Cyst, NOS					1	(2%)							
#Kidney/pelvis	(51)		(52)		(52)		(51)		(51)		(52)		
Mineralization Hyperplasia, epithelial	3	(6%)	$\frac{2}{1}$	(4%) (2%)	1	(2%)							
ENDOCRINE SYSTEM						<u>,</u>							
#Pituitary	(52)		(51)		(50)		(51)		(52)		(50)		
Cyst, NOS					2	(4%)					2	(4%)	
Hemorrhagic cyst	3	(6%)	_	(1.401)		1000	-	(100)	0	( 107.)		(90)	
Hyperplasia, NUS #Adrenal	3	(6%)	(59)	(14%)	(52)	(6%)	5 (51)	(10%)	(51)	(4170)	(52)	(070)	
Necrosis, hemorrhagic	(01)		(52)		(02)		(01)		(01)		1	(2%)	
Necrosis, cortical											1	(2%)	
#Adrenal cortex	(51)		(52)		(52)		(51)		(51)		(52)		
Degeneration, NOS		00	2	(4%)	1	(2%)	~	(100)		(100)		(00)	
Metamorphosis, fatty	3	(16%) (19%)	2	(4%) (10%)	9	(17%) (8%)	6 «	(12%) (10%)	6	(12%) (2%)	4	(8%)	
Cytoplasmic vacualization	2	(4)70)	Э	(10%)	4	(2%)	э	(10%)	1	(270)			
Hypertrophy. NOS					1	(2%)	1	(2%)					
Hyperplasia, NOS	4	(8%)	3	(6%)	4	(8%)	6	(12%)	5	(10%)	5	(10%)	
#Adrenal medulla	(51)		(52)		(52)		(51)		(51)		(52)		
Hyperplasia, NOS	1	(2%)	1	(2%)	2	(4%)	5	(10%)			2	(4%)	
#Thyroid	(50)		(50)		(48)		(47)		(48)		(4-16)	(29h)	
Eccopia Custic follicles			,	(2%)			1	(296)	5	(10%)	2	(4%)	
Lymphocytic inflammatory infil	tr		1	(2%)			-	\= ·V/	0		-	/	
Hyperplasia, C-cell	4	(8%)	2	(4%)	3	(6%)	1	(2%)	4	(8%)	5	(11%)	

# TABLE B8. SUMMARY OF THE INCIDENCE OF NONNEOPLASTIC LESIONS IN FEMALE RATS IN THE FIRST TWO-YEAR FEED STUDY OF MIREX (Continued)

	Untreated Control		0.1 ppm		1 ppr	1 ppm		10 ppm		25 ppm		pm
ENDOCRINE SYSTEM (Continued) #Parathyroid Hyperplasia, NOS Hyperplasia, focal #Pancreatic islets	(39) 2 (50) 10	(5%)	(43) 2 (52) 8	(5%)	(45) 1 1 (51) 11	(2%) (2%) (22%)	(46) 1 (49) 14	(2%)	(44) 2 (50) 12	(5%)	(43) 5 (50) 8	(12%)
REPRODUCTIVE SYSTEM *Mammary gland Galactocele Cyst, NOS	(52) 2	(4%)	(52)		(52)	(2%)	(52)		(52) 1	(2%)	(52) 1 1	(2%) (2%)
Cystic ducts Abscess, NOS Necrosis, NOS	7	(13%)	5	(10%)	7 1	(13%) (2%)	8 1	(15%) (2%)	10	(19%)	5 1	(10%) (2%)
Fibrocystic disease *Preputial gland Cyst, NOS	$12 \\ (52)$	(23%)	15 (52)	(29%)	14 (52)	(27%)	15 (52)	(29%)	10 (52)	(19%)	3 (52) 1	(6%) (2%)
*Clitoral gland Cyst, NOS Inflammation, granulomatous *Vagina	(52)		(52)		(52) 1 1 (52)	(2%) (2%)	(52)		(52)		(52)	
Inflammation, chronic #Uterus Hydrometra Cyst. NOS	(51) 2	(4%)	(51)		(52)		(52)		(52) 1 (52)	(2%)	(52) (52) 1	(2%) (2%)
Angiectasis #Cervix uteri Hynemlasia enithelia]	(51)		(51)		(52)		1 (52)	( <b>2%</b> )	(52)		(52)	
#Uterus/endometrium Cyst, NOS Hyperplasia, NOS	(51) 1	(2%)	(51) 1 1	(2%) (2%)	(52) 1 1	(2%) (2%)	(52)	(2%)	(52)		(52)	
Hyperplasia, cystic #Ovary Parovarian cyst	6 (51) 1	(12%) (2%)	10 (51)	(20%)	7 (52) 1	(13%) (2%)	4 (52)	(8%)	6 (52)	(12%)	8 (51)	(15%)
NERVOUS SYSTEM #Brain Hemorrhage	(52)	(2%)	(52)		(51)		(52)		(52)		(52)	
Malacia Necrosis, hemorrhagic	2	(4%)	1 1	(2%) (2%)	1	(2%)	1	(2%)				
SPECIAL SENSE ORGANS *Eye/conjunctiva	(52)		(52)		(52)		(52)		(52)	<u> </u>	(52)	<u> </u>
Abscess, NOS *Eye/lacrimal gland Atrophy, NOS	(52)		(52)		(52)	(2%)	1 (52)	(2%)	(52)	(2%)	(52)	
*Zymbal gland Inflammation, granulomatous	(52)		(52)		(52)	1-10	(52)		(52)		(52) 1	(2%)
*Bone	(52)		(52)		(52)		(52)		(52)		(52)	
Fibrosis, focal *Vertebra Fibrous osteodystrophy	(52)		(52)		(52)		(52)	(2%)	1 (52) 1	(2%) (2%)	(52)	
BODY CAVITIES *Abdominal cavity	(52)		(52)		(52)		(52)		(52)		(52)	
Steatitis Necrosis, fat	1	(2%)	1 1	(2%) (2%)	5	(10%)	6	(12%)	3	(6%)	1	(2%)

## TABLE B8. SUMMARY OF THE INCIDENCE OF NONNEOPLASTIC LESIONS IN FEMALE RATS IN THE FIRST TWO-YEAR FEED STUDY OF MIREX (Continued)

### TABLE B8. SUMMARY OF THE INCIDENCE OF NONNEOPLASTIC LESIONS IN FEMALE RATS IN THE FIRST TWO-YEAR FEED STUDY OF MIREX (Continued)

	Untreated Control	0.1 ppm	1 ppm	10 ppm	25 ppm	50 ppm
ALL OTHER SYSTEMS Adipose tissue Inflammation, granulomatous Necrosis, NOS	5		1	1	3	
SPECIAL MORPHOLOGY SUMM.	ARY					

\*Number of animals receiving complete necropsy examination; all gross lesions including masses examined microscopically.

**#Number of animals examined microscopically at this site** 

## TABLE B9. SUMMARY OF THE INCIDENCE OF NONNEOPLASTIC LESIONS IN FEMALE RATS IN THESECOND TWO-YEAR FEED STUDY OF MIREX

Untr	eated	Control	50 pj	pm	100 g	opm
ANIMALS INITIALLY IN STUDY	52		52		52	
ANIMALS NECROPSIED	52		52		52	
ANIMALS EXAMINED HISTOPATHOLOGICALLY	7 52		52		52	
INTEGUMENTARY SYSTEM						· *
*Skin	(52)		(52)		(52)	
Inflammation, acute	1	(2%)				
RESPIRATORY SYSTEM				· · · · · · · · · · · · · · · · · · ·		
#Lung Hyperplasia, alveolar epithelium	(52) 3	(6%)	(52)		(52) 3	
			<u>.</u>	<u> </u>		
*Multiple organs	(59)		(59)		(59)	
Multiple of galls Myelonroliferative disorder	(02)		(52)	(9%)	(52)	
#Bone marrow	(48)		(51)	(2 /07	(51)	
Fibrosis	1	(2.%)	(01/	(2%)	(01)	
Hyperplasia, NOS	1	(2%)	-	(2,0)		
#Spleen	(51)	(= / • /	(52)		(49)	
Fibrosis	1	(2%)			(	
Fibrosis, focal					2	(4%)
Infarct, NOS	1	(2%)				
Hyperplasia, hematopoietic					1	(2%)
Hematopoiesis	1	(2%)	3	(6%)	2	(4%)
Myelopoiesis			1	(2%)		
#Mesenteric lymph node	(51)		(52)		(52)	
Fibrosis, focal			1	(2%)		
#Liver	(52)		(52)		(52)	
Hematopoiesis	1	(2%)				
#Thymus	(44)	(1.2.2)	(46)		(48)	
Cyst, NOS Hyperplasia, epithelial	7 9	(16%) (20%)	4 10	(9%) (22%)	3 7	(6%) (15%)
				<u> </u>	<u> </u>	<u>_</u>
CIRCULATORY SYSTEM	(50)		(50)		(50)	
#Heart	(62)	(901)	(52)		(52)	
Inflammation abrania	1	(2%)	16	(990)	46	(880)
#I oft atrium	(59)	(00%)	(52)	(00%)	(52)	(00%)
Thrombosis NOS	1	(2%)	(02)		(02)	
#Endocardium	(52)		(52)		(52)	
Hyperplasia, NOS			1	(2%)		
#Liver	(52)		(52)		(52)	
Thrombosis, NOS			2	(4%)		
#Pancreas	(50)		(52)		(51)	
Periarteritis			1	(2%)		
#Kidney	(52)		(52)		(52)	
Periarteritis			1	(2%)		
DIGESTIVE SYSTEM						
*Intestinal mucosa	(52)		(52)		(52)	(2~)
Ectopia					1	(2%)
Tongue	(52)	(0~)	(52)	(0) (7)	(52)	
inflammation, granulomatous	1	(2%)	1	(2%)	100	
#Liver	(52)		(52)	(00)	(52)	
ADSCESS, NUS		(90)	1	(2%)		
Norrogia NOS	1	(270)	1	(470) (606)	c	(1996)
Necrosis focal	1 2	(6%)	3 A	(8%)	10	(19%)
1,0010B10,100B1	U	(0/0)			±0	

	Untreated	Control	50 pj	om	100 g	opm
DIGESTIVE SYSTEM					. <u> </u>	
#Liver (Continued)	(52)		(52)		(52)	
Necrosis, hemorrhagic					1	$(2\%)^{-1}$
Metamorphosis, fatty	14	(27%)	34	(65%)	39	(75%)
Pigmentation, NOS	1	(2%)			2	(4%)
<b>Basophilic cyto change</b>	48	(92%)	40	(77%)	27	(52%)
Ground glass cyto change	3	(6%)	1	(2%)		
Eosinophilic cyto change	1	(2%)				
Clear cell change	5	(10%)				
Hepatocytomegaly	4	(8%)	49	(94%)	49	(94%)
Atrophy, NOS					3	(6%)
Atrophy, focal					1	(2%)
Angiectasis	6	(12%)	7	(13%)	10	(19%)
#Liver/centrilobular	(52)		(52)		(52)	
Degeneration, NOS	1	(2%)				
Atrophy, NOS			1	(2%)	2	(4%)
#Bile duct	(52)		(52)		(52)	
Hyperplasia, NOS	33	(63%)	43	(83%)	30	(58%)
#Pancreas	(50)		(52)		(51)	
Eosinophilic cyto change			1	(2%)	1	(2%)
#Pancreatic acinus	(50)		(52)		(51)	
Atrophy, NOS	4	(8%)	4	(8%)	9	(18%)
Hyperplasia, NOS	3	(6%)	1	(2%)	1	(2%)
<b>#Peripancreatic tissue</b>	(50)		(52)		(51)	
Necrosis, fat			1	(2%)		
#Gastric mucosa	(51)		(51)		(52)	
Ulcer, NOS			2	(4%)	1	(2%)
Erosion	2	(4%)				
#Forestomach	(51)		(51)		(52)	
Ulcer, NOS			4	(8%)	7	(13%)
Inflammation, acute			1	(2%)	2	(4%)
Inflammation, acute focal					1	(2%)
Inflammation, active chronic	1	(2%)				
Inflammation, chronic					1	(2%)
Ulcer, perforated	1	(2%)	1	(2%)	_	
Hyperplasia, epithelial	2	(4%)	5	(10%)	7	(13%)
URINARY SYSTEM						
#Kidney	(52)		(52)		(52)	
Abscess, NOS	1	(2%)				
Nephropathy	45	(87%)	51	(98%)	52	(100%)
#Kidney/pelvis	(52)		(52)		(52)	
Mineralization	1	(2%)				
#Urinary bladder	(50)		(50)		(49)	
Hyperplasia, epithelial					1	(2%)
INDOCRINE SYSTEM						
#Pituitary	(52)		(52)		(52)	
Hemorrhagic cyst			1	(2%)		
Necrosis, focal	1	(2%)				
Hyperplasia, NOS	5	(10%)	6	(12%)	3	(6%)
#Adrenal	(52)		(52)		(52)	
Necrosis, focal					1	(2%)
#Adrenal cortex	(52)		(52)		(52)	
Degeneration, NOS			1	(2%)		
Metamorphosis, fatty	8	(15%)	9	(17%)	14	(27%)
Cytoplasmic change, NOS	4	(8%)	7	(13%)	3	(6%)
Hyperplasia, NOS	3	(6%)	5	(10%)	5	(10%)
#Adrenal medulla	(52)		(52)		(52)	
Hyperplasia, NOS	1	(2%)				

### TABLE B9. SUMMARY OF THE INCIDENCE OF NONNEOPLASTIC LESIONS IN FEMALE RATS IN THE SECOND TWO-YEAR FEED STUDY OF MIREX (Continued)

	Untreated	Control	50 pi	om	100 1	opm
ENDOCRINE SYSTEM (Continued)				<u> </u>		
#Thyroid	(49)		(49)		(49)	
Cystic follicles					4	(8%)
Hyperplasia, C-cell	5	(10%)	3	(6%)	3	(6%)
Hyperplasia, follicular cell			3	(6%)	2	(4%)
#Parathyroid	(52)		(45)		(42)	
Ectopia	1	(2%)	3	(7%)		
Hyperplasia, NOS	1	(2%)	4	(9%)	6	(14%)
#Pancreatic islets	(50)	(017)	(52)	(170)	(51)	(100)
nyperplasia, NOS	12	(24%)	9	(17%)	0	(12%)
REPRODUCTIVE SYSTEM						
*Mammary gland	(52)		(52)		(52)	
Galactocele	1	(2%)	2	(4%)		
Cystic ducts	5	(10%)	7	(13%)	2	(4%)
Fibrocystic disease	16	(31%)	7	(13%)	2	(4%)
*Clitoral gland	(52)		(52)		(52)	
Cystic ducts			1	(2%)		
#Uterus	(52)		(51)		(52)	
Hydrometra	1	(2%)			_	
Angiectasis					1	(2%)
#Cervix uteri	(52)		(51)		(52)	
Metaplasia, squamous	1	(2%)	(		(50)	
#Uterus/endometrium	(52)		(51)		(52)	(0) (7)
Cyst, NOS	0	(00)	9	(40())	10	(2%)
Hyperplasia, cystic	3	(6%)	Z (EQ)	(4%)	10	(19%)
#Uvary Crust NOS	(52)		(52)		(02)	(10)
Dyst, NOS Paravanian evet	1	(90%)	1	(9%)	2	(4270)
	1	(270)		(270)		
NERVOUS SYSTEM						
#Brain	(52)		(52)		(52)	(0.07)
Hemorrhage					1	(2%)
Necrosis, hemorrhagic		(2%)	(50)		(50)	
"Spinal cord	(52)		(52)	(90)	(52)	
Cyst, NOS			1	(2%)		
nemorrnage			1	(2%)		
SPECIAL SENSE ORGANS				_		
*Eye	(52)	•	(52)		(52)	
Inflammation, chronic	1	(2%)				
MUSCULOSKELETAL SYSTEM	- <u>.</u>	<u> </u>				
*Vertebra	(52)		(52)		(52)	
Fibrous osteodystrophy					1	(2%)
BODY CAVITIES	<u></u>	<u> </u>				
*Abdominal cavity	(52)		(52)		(52)	
Necrosis, fat	2	(4%)			1	(2%)
*Peritoneum	(52)		(52)		(52)	
Inflammation, acute			1	(2%)		

## TABLE B9. SUMMARY OF THE INCIDENCE OF NONNEOPLASTIC LESIONS IN FEMALE RATS IN THE SECOND TWO-YEAR FEED STUDY OF MIREX (Continued)

## TABLE B9. SUMMARY OF THE INCIDENCE OF NONNEOPLASTIC LESIONS IN FEMALE RATS IN THE SECOND TWO-YEAR FEED STUDY OF MIREX (Continued)

<u> </u>	Untreated Control	50 ppm	100 ppm
ALL OTHER SYSTEMS *Multiple organs Inflammation, chronic	(52)	(52)	(52) 1 (2%)
Adipose tissue Inflammation, granulomatous	1	1	1
SPECIAL MORPHOLOGY SUMMARY None			

\* Number of animals receiving complete necropsy examination; all gross lesions including masses examined microscopically. #Number of animals examined microscopically at this site

#### **APPENDIX C**

### GENETIC TOXICOLOGY OF

#### MIREX

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04						Rev	vertant	ts/Plate (b	,c)				
Strain	Dose	-		<u>- 59</u>	1.0	+	<u>S9 (ha</u>	amster)	<u> </u>		<u>+s</u>	<u>9 (rat)</u>	
	(µg/plate)	Tr	ial 1	Tri	al 2	Trial	1	Tri	al 2	Tri	al 1	Tria	12
TA100													
	0	126 ±	7.5	93 ±	11.2	145 ±	4.5	141 ±	3.6	$165 \pm$	9.7	141 ±	8.0
	100	$112 \pm$	4.7	86 ±	4.9	140 ±	5.8	133 ±	1.8	173 ±	3.1	118 ±	0.9
	333	$124 \pm$	8.8	$100 \pm$	8.2	164 ±	4.3	$131 \pm$	23.1	$172 \pm$	8.7	128 ±	5.6
	1,000	$104 \pm$	5.4	99 ±	11.8	139 ±	13.6	$122 \pm$	6.1	175 ±	8.0	128 ±	6.8
	3,333	$105 \pm$	4.8	86 ±	5.8	$141 \pm$	13.0	114 ±	4.3	170 ±	15.0	$127 \pm$	5.6
	10,000	111 ±	5.7	97 ±	9.6	149 ±	16.3	$133 \pm$	5.2	137 ±	3.5	109 ±	7.6
Tri Pos	ial summary sitive	Nega	tive	Nega	tive	Negat	tive	Nega	tive	Nega	tive	Nega	tive
co	ntrol (d)	$1,129 \pm$	6.8	$1,334 \pm$	108.7	1,136 ±	4.8	2,186 $\pm$	45.1	$2,463 \pm$	27.0	2,193 ±	185.8
TA1535	5 0	3 ±	1.3	11 ±	0.9	3 ±	0.9	11 ±	2.8	5 ±	0.9	10 ±	1.7
	100	4 ±	0.7	13 ±	3.5	3 ±	1.0	$11 \pm$	2.5	6 ±	1.0	16 ±	1.5
	333	3 ±	0.6	10 ±	4.0	3 ±	1.5	9 ±	1.5	6 ±	0.3	12 ±	2.5
	1,000	5 ±	2.3	8 ±	2.3	2 ±	0.9	7 ±	0.6	4 ±	0.9	13 ±	1.2
	3,333	4 ±	1.9	9 ±	0.9	4 ±	2.1	7 ±	1.5	2 ±	0.7	14 ±	3.1
	10,000	2 ±	0.0	9 ±	1.5	1 ±	0.7	12 ±	1.8	2 ±	0.3	13 ±	1.0
Tri Pos	ial summary sitive	Nega	tive	Nega	tive	Negat	ive	Nega	tive	Nega	tive	Nega	tive
co	ntrol(d)	39 ±	2.1	$1,173 \pm$	24.1	88 ±	7.0	158 ±	7.4	78 ±	3.2	$220 \pm$	18.2
TA1537	7 0	5 ±	0.9	9 ±	0.9	5 ±	0.9	16 ±	1.5	5 ±	0.3	19 ±	2.3
	100	1 ±	0.6	5 ±	0.7	4 ±	1.5	$18 \pm$	0.6	3 ±	1.8	$12 \pm$	2.3
	333	3 ±	0.6	6 ±	0.9	3 ±	1.2	$20 \pm$	1.5	$\tilde{3} \pm$	0.3	$17 \pm$	3.0
	1.000	$2\pm$	0.9	$\tilde{8\pm}$	3.0	1 ±	0.9	$13 \pm$	3.7	4 ±	0.6	$17 \pm$	2.9
	3,333	$2 \pm$	1.2	$7\pm$	2.2	$\frac{1}{3} \pm$	0.9	$12 \pm$	3.5	4 ±	0.6	$16 \pm$	3.0
	10,000	3 ±	0.3	8 ±	2.7	$\frac{1}{2} \pm$	0.7	$10 \pm$	2.6	5 ±	0.3	$16 \pm$	2.2
Tri Pos	al summary sitive	Nega	tive	Nega	tive	Negat	ive	Nega	tive	Nega	tive	Nega	tive
co	ntrol (d)	186 ±	27.0	$265 \pm$	68.4	88 ±	9.8	386 ±	37.3	49 ±	3.5	<b>49</b> 0 ±	28.1
TA98	0	34 ±	0.5	19 ±	1.9	45 ±	3.2	34 ±	2.3	49 ±	0.5	34 ±	1.2
	100	$37 \pm$	2.6	21 ±	1.2	60 ±	4.3	26 ±	0.3	51 ±	1.8	40 ±	1.2
	333	43 ±	2.0	19 ±	3.2	47 ±	3.1	24 ±	4.2	57 ±	4.0	24 ±	2.6
	1,000	35 ±	4.3	19 ±	2.6	58 ±	2.6	$35 \pm$	5.5	55 ±	2.5	29 ±	5.9
	3.333	46 ±	3.8	$27 \pm$	6.3	58 ±	1.9	$32 \pm$	2.6	$50 \pm$	6.9	$31 \pm$	4.3
	10,000	$42 \pm$	3.0	$32 \pm$	3.8	$50 \pm 51 \pm$	5.0	$31 \pm$	3.8	$61 \pm$	13.0	$31 \pm$	7.1
Tri Pos	al summary sitive	Nega	tive	Nega	tive	Negat	ive	Nega	tive	Negative		Negative	
co	ntrol (d)	286 ±	31.3	$248~\pm$	28.2	$1,522 \pm 2$	205.3	$1,633 \pm$	99.3	1,496 $\pm$	74.4	1,546 $\pm$	103.7

#### TABLE C1. MUTAGENICITY OF MIREX IN SALMONELLA TYPHIMURIUM (a)

(a) Study performed at Case Western Reserve University. The detailed protocol is presented by Haworth et al. (1983). Cells and study compound or solvent (dimethyl sulfoxide) were incubated in the absence of exogenous metabolic activation (-S9) or with Aroclor 1254-induced S9 from male Syrian hamster liver or male Sprague Dawley rat liver. High dose was limited by toxicity or solubility but did not exceed 10 mg/plate; 0 µg/plate dose is the solvent control.

(b) Revertants are presented as mean  $\pm$  standard error from three plates.

(c) Precipitate on plate noted in each trial at doses of 1,000 µg/plate and above.

(d) Positive control; 2-aminoanthracene was used on all strains in the presence of S9. In the absence of metabolic activation, 4-nitro-o-phenylenediamine was used with TA98, sodium azide was used with TA100 and TA1535, and 9-aminoacridine was used with TA1537.

Compound	Dose (µg/ml)	Total Cells	No. of Chromo- somes	No. of SCEs	SCEs/ Chromo- some	SCEs/ Cell	Hours in BrdU	Relative SCEs/Celi (percent) (b)
-S9 (c)								
Trial 1Summary: Negative	e, but positive	control t	oo low					
<b>Dimethyl</b> sulfoxide		50	1,046	426	0.41	8.5	26.0	
Mirex	$\begin{array}{c}26\\83.2\\260\end{array}$	50 50 50	1,048 1,047 1,049	428 412 451	0.41 0.39 0.43	8.6 8.2 9.0	26.0 26.0 26.0	101.2 96.5 105.9
Mitomycin C	0.005	50	1,050	514	0.49	10.3	26.0	121.2
Trial 2Summary: Negativ	e							
Dimethyl sulfoxide		50	1,052	409	0.39	8.2	26.0	
Mirex	26 83.2 260	50 50 50	1,044 1,044 1,052	403 314 350	0.39 0.30 0.33	8.1 6.3 7.0	26.0 26.0 26.0	98.8 76.8 85.4
Mitomycin C	0.005	25	526	610	1.16	24.4	26.0	297.6
+ <b>S9</b> ( <b>d</b> )								
Summary: Negative								
<b>Dimethyl</b> sulfoxide		50	1,047	461	0.44	9.2	26.0	
Mirex	$26 \\ 83.2 \\ 260$	50 50 50	1,051 1,047 1,052	475 491 483	0.45 0.47 0.46	9.5 9.8 9.7	26.0 26.0 26.0	$103.3 \\ 106.5 \\ 105.4$
Cyclophosphamide	1	25	526	443	0.84	17.7	26.0	192.4

#### TABLE C2. INDUCTION OF SISTER CHROMATID EXCHANGES IN CHINESE HAMSTER OVARY CELLS BY MIREX (a)

(a) Study performed at Columbia University. SCE = sister chromatid exchange; BrdU = bromodeoxyuridine. A detailed description of the SCE protocol is presented by Galloway et al. (1985). Briefly, Chinese hamster ovary cells were incubated with study compound or solvent (dimethyl sulfoxide) as described in (c) or (d) below and cultured for sufficient time to reach second metaphase division. Cells were then collected by mitotic shake-off, fixed, air-dried, and stained.

(b) SCEs/cell in treated culture expressed as a percent of the SCEs/cell in the control culture

(c) In the absence of S9, Chinese hamster ovary cells were incubated with study compound or solvent for 2 hours at 37° C. Then BrdU was added, and incubation was continued for 24 hours. Cells were washed, fresh medium containing BrdU and colcemid was added, and incubation was continued for 2-3 hours.

(d) In the presence of S9, cells were incubated with study compound or solvent for 2 hours at 37° C. Then cells were washed, and medium containing BrdU was added. Cells were incubated for a further 26 hours, with colcemid present for the final 2-3 hours. S9 was from the liver of Aroclor 1254-induced male Sprague Dawley rats.

		- <b>S9</b> (b)					+ <b>S9</b> (c)		
Dose (µg/ml)	Total Cells	No. of Abs	Abs/ Cell	Percent Cells with Abs	Dose (µg/ml)	Total Cells	No. of Abs	Abs/ Cell	Percent Cells with Abs
Trial 1			······································		Trial 2		·		
Dimethyl sulf	oxide				Dimethyl s	ulfoxide			
	100	3	0.03	3		100	5	0.05	5
Mirex					Mirex				
26 83.2 260	100 100 100	4 6 5	0.04 0.06 0.05	4 6 5	26 83.2 260	100 100 100	8 8 8	0.08 0.08 0.08	8 7 7
Su	mmary: N	egative				Summary	: Negative		
Mitomycin C					Cyclophos	ohamide			
0.150	50	20	0.40	32	15	50	16	0.32	30

### TABLE C3. INDUCTION OF CHROMOSOMAL ABERRATIONS IN CHINESE HAMSTER OVARY CELLS BY MIREX (a)

(a) Study performed at Columbia University. Abs = aberrations. Harvest time--12 hours. A detailed presentation of the technique for detecting chromosomal aberrations is presented by Galloway et al. (1985). Briefly, Chinese hamster ovary cells were incubated with study compound or solvent (dimethyl sulfoxide) as indicated in (b) or (c). Cells were arrested in first metaphase by addition of colcemid and harvested by mitotic shake-off, fixed, and stained in 6% Giemsa.

(b) In the absence of S9, Chinese hamster ovary cells were incubated with study compound or solvent (dimethyl sulfoxide) for 8-10 hours at 37° C. Cells were then washed, and fresh medium containing colcemid was added for an additional 2-3 hours followed by harvest.

(c) In the presence of S9, cells were incubated with study compound or solvent (dimethyl sulfoxide) for 2 hours at 37°C. Cells were then washed, medium was added, and incubation was continued for 8-10 hours. Colcemid was added for the last 2-3 hours of incubation before harvest. S9 was from the liver of Aroclor 1254-induced male Sprague Dawley rats.

#### APPENDIX D

# FEED AND COMPOUND CONSUMPTION BY RATS IN THE TWO-YEAR FEED STUDIES OF MIREX

PAGE

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	Control		0.1 ppm			1 ррт			10 ppm			25 opm		50 ppm			
Week	Grams Feed/ Day (a)	Body Weight (grams)	Grams Food/ Day (a)	Body Weight (grams)	Dose/ Day (b)	Grams Food/ Day (a)	Body Weight (grams)	Dose/ Day (b)	Grams Feed/ Day (a)	Body Weight (grams)	Dose/ Day (b)	Grams Feed/ Day (a)	Body Weight (grams)	Done/ Day (b)	Grams Food/ Day (a)	Body Weight (grams)	Duse/ Day (b)
2	30	205	26	199	0.013	24	206	0.12	23	206	1.1	24	205	2.9	23	200	5.8
4	30	227	26	225	0.012	24	227	0.11	23	225	1.0	24	230	2.6	23	231	5.0
6	35	263	28	258	0.011	25	262	0.10	30	260	1.2	34	264	3.2	30	255	5.9
8	35	273	28	267	0.010	25	270	0.09	30	269	1.1	34	272	3.1	30	264	5.7
10	35	297	25	285	0.009	27	289	0.09	26	293	0.9	27	295	2.3	28	288	4.9
12	35	308	25	296	0.008	27	301	0.09	26	300	0.9	27	299	2.3	28	290	4.8
16	25	327	25	315	0.008	28	320	0.09	24	318	0.8	25	311	2.0	30	298	5.0
20	22	345	19	333	0.006	20	338	0.06	20	337	0.6	22	325	1.7	25	314	4.0
24	33	364	25	352	0.007	27	357	0.08	27	359	0.8	24	348	1.7	20	334	3.0
28	33	381	21	366	0.006	26	372	0.07	33	375	0.9	31	363	2.1	23	346	3.3
32	11	393	25	378	0.007	25	381	0.07	25	389	0.6	31	373	2.1	25	355	3.5
36	44	398	37	386	0.010	32	391	0.08	34	395	0.9	39	380	2.6	40	364	5.5
40	33	401	19	391	0.005	25	394	0.06	25	401	0.6	23	382	1.5	23	368	3.1
44	31	405	26	394	0.007	26	397	0.07	22	400	0.6	25	382	1.6	30	370	4.1
48	18	415	17	406	0.004	16	411	0.04	17	412	0.4	18	393	1.1	18	375	2.4
52	19	416	16	413	0.004	16	416	0.04	17	421	0.4	19	397	1.2	20	378	2.6
60	15	413	17	412	0.004	16	415	0.04	(c) 17	418	0.4	15	395	0.9	17	377	2.3
68	21	432	17	426	0.004	18	426	0.04	17	433	0.4	20	403	1.2	20	386	2.6
76	18	419	12	420	0.003	14	424	0.03	17	420	0.4	19	385	1.2	19	360	2.6
84	23	411	16	411	0.004	16	416	0.04	18	412	0.4	18	379	1.2	19	343	2.8
92	17	423	14	423	0.003	15	425	0.04	15	420	0.4	13	392	0.8	12	360	1.7
100	18	418	15	415	0.004	16	425	0.04	17	405	0.4	15	371	1.0	16	344	2.3
Mean	26.4	360.6	21.8	353.2	0.007	22.2	357.4	0.07	22.9	357.6	0.7	24.0	342.9	1.8	23.6	327.3	3.8
SD (d)	8.6		6.0		0.003	5.3		0.03	5.7		0.3	6.8		0.7	6.3		1.3
CV (e)	32.6		27.5		<b>42.9</b>	23.9		42.9	24.9		42.9	28.3		<b>38.9</b>	26.7		34.2

TABLE DI. FEED AND COMPOUND CONSUMPTION BY MALE RATS IN THE TWO-YEAR FEED STUDY OF MIREX

(a) Grams of feed removed from feed hopper per animal per day; not corrected for scatter.

(b) Estimated milligrams of mirex consumed per day per kilogram of body weight

(c) Feed consumption data not available; value presented is the mean of values reported for weeks 52 and 68

(d) Standard deviation

(e) Coefficient of variation = (standard deviation/mean)  $\times$  100

_	Com	tral		01 nnm			1 ppm			10 ppm			25 ppm			50 ppm	
Week	Grams Feed/ Day (a)	Body Weight (grams)	Grams Food/ Day (a)	Body Weight (grams)	Dose/ Day (b)	Grams Feed/ Day (s)	Body Weight (grams)	Dose/ Day (b)	Grams Feed/ Day (a)	Body Weight (grams)	Dose/ Day (b)	Grams Feed/ Day (a)	Body Weight (grams)	Dose/ Day (b)	Gram# Feed/ Day (a)	Body Weight (grams)	Dose/ Day (b)
 9		146	17	145	0.012	18	144	0.13	17	142	1.2	18	142	3.2	15	142	5.3
Å	20	156	17	155	0.011	18	154	0.12	17	153	1.1	18	159	2.8	15	108	4.1
6	26	174	20	173	0.012	26	172	0.15	21	171	1.2	20	170	2.9	19	172	0.0 5.5
Å	26	175	20	173	0.012	26	172	0.15	21	170	1.2	20	170	2.9	19	172	0.0
10	22	190	18	183	0.010	21	182	0.12	16	180	0.9	19	182	2.6	18	183	4.9
12	22	194	18	191	0.009	21	188	0.11	16	185	0.9	19	186	2.6	18	185	4.9
16	17	209	21	207	0.010	37	206	0.18	18	200	0.9	20	203	2.5	18	200	4.0
20	15	211	15	208	0.007	13	209	0.06	12	203	0.6	15	207	1.8	12	200	3.0
20	16	219	15	216	0.007	15	217	0.07	19	211	0.9	27	215	3.1	16	204	3.9
98	14	997	14	223	0.006	15	225	0.07	18	218	0.8	19	219	2.2	18	213	4.Z
20	15	231	15	227	0.007	16	230	0.07	15	223	0.7	16	225	1.8	18	216	4.2
36	27	238	21	232	0.009	23	234	0.10	25	228	1.1	22	229	2.4	26	220	5.9
40	20	243	15	237	0.006	31	240	0.13	16	233	0.7	18	235	1.9	19	224	4.2
44	20	246	21	241	0.009	16	244	0.07	16	239	0.7	15	239	1.6	23	228	5.0
44	11	246	10	239	0.004	12	243	0.05	11	239	0.5	12	238	1.3	12	229	2.6
40	19	240	11	243	0.005	12	248	0.05	11	243	0.5	11	244	1.1	12	232	2.6
52	17	245	13	256	0.005	13	261	0.05	12	257	0.5	15	257	1.5	11	242	2.3
60	16	285	13	278	0.005	12	282	0.04	13	275	0.5	13	272	1.2	16	256	J.I 0.0
00	10	200	10	283	0.004	11	286	0.04	11	280	0.4	12	279	1.1	12	258	2.3
94	13	309	13	288	0.005	13	284	0.05	11	288	0.4	15	284	1.3	13	255	2.5
01	16	315	14	298	0.005	14	303	0.05	12	302	0.4	12	299	1.0	13	267	2.4
100	13	320	ii	298	0.004	11	307	0.04	12	298	0.4	11	296	0.9	12	267	Z.2
Maan		233.0	15.5	227.0	0.007	17.9	228.7	0.08	15.5	224.5	0.7	16.7	225.0	2.0	16.1	214.7	3.9
mean SD(a)	10.1	233.0	3.6	221.0	0.003	7.0		0.04	3.9		0.3	4.1		0.8	3.9		1.2
CV (d)	28.7		23.2		42.9	39.1		50.0	25.2		42.9	24.6		40.0	24.2		30.8

TABLE D2. FEED AND COMPOUND CONSUMPTION BY FEMALE RATS IN THE FIRST TWO-YEAR FEED STUDY OF MIREX

(a) Grams of feed removed from feed hopper per animal per day; not corrected for scatter.
(b) Estimated milligrams of mirex consumed per day per kilogram of body weight
(c) Standard deviation
(d) Coefficient of variation = (standard deviation/mean) × 100

#### APPENDIX E

#### AUDIT SUMMARY

The experimental data, documents, pathology materials, and draft Technical Report for the 2-year toxicology and carcinogenesis studies of mirex in rats were audited for accuracy, consistency, and completeness. The laboratory experiments were conducted for the National Cancer Institute by the Frederick Cancer Research Center (FCRC), Frederick, Maryland. Two studies were conducted: In the first study, animal exposures to mirex began in June 1977 and ended in June 1979; the second study in female rats began in January 1978 and ended in January 1980. Both studies were completed before October 1, 1981, the date when the NTP implemented its requirement that studies be conducted in compliance with Good Laboratory Practice (GLP) regulations of the Food and Drug Administration. The retrospective audit was conducted at the FCRC in December 1984 and January 1985 by Dynamac Corporation. The individuals who conducted the audit are listed in the full audit report, which is on file at the NIEHS. The audit included a review of:

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

The audit indicated that records were not available for environmental conditions or for the randomization procedure used for the second study. Records indicated that analyses of the chemical/vehicle mixtures for the high dose group in the second study were not done except for the final 4 months of the study. Other chemistry records showed no major discrepancies.

Clinical observations were intermittently recorded, did not include all animals, and were occasionally inconsistent regarding sequential recordings. This information was not complete or reliable enough to be interpreted as is usually done. An audit of the correlation between masses noted inlife and at necropsy showed that 43/64 observations recorded for male rats and 52/64 observations for female rats were noted at necropsy; the majority of those not recorded at necropsy included small, apparently cutaneous masses on the head, neck, legs, or tail which either regressed or could not be correlated because of inadequate description for the location of these masses on the necropsy record forms.

Wet tissues were present for all rats on study with the exception of one control male and one high dose female; animals were properly identified. Because of an apparent disproportionate number of liver tissue samples taken from the high dose groups, additional and comparative liver sections were made for the male and female control groups and the high dose male group after the initial Pathology Working Group (PWG) review of the study. A second PWG was convened to review the liver sections. Any discrepancies noted during the subsequent review of the pathology materials were considered minor in nature and not clustered in any one group of study animals.

The audit findings were reviewed by NTP staff. Although some omissions and discrepancies were noted in the audited experiments, the materials and documents at the NTP Archives are considered adequate to support the data and results presented in this Technical Report.