Tier 2 Summary of KIIA 5 Toxicological and Toxicokinetic Studies on the

Data Requirements

EU Commission Regulation No. 1147/2016
on the renewal of the inclusion of AR2 active substances unction with Directive 91/414/EEC and Regulation EC/107/20

Annex IIA

Section 3. Point's
Document M

According to OECD format guidance for influstry on plant protection products and their Regulation No. 1141/20t

.e. inclusion of ALR2 active subsective 91/414/EEC and Regulation.

Annex IIA

Section 3, Point 5

Document M

Secording to OPCD format guidance for indistry data submissions on plant protection argulates and their active substances

Date

2013-10-04

Bayer Crop Science in conjunction with Directive 91/414/EEC and Regulation EC/M07/2009



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# $\label{lem:condition} \begin{tabular}{ll} \textbf{Document M / Tier 2, KIIA 5 Toxicological and Toxicokinetic Studies on the Active Substanceon Iprovalicarb \\ \end{tabular}$

(Submission for Annex I Renewal)

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### KIIA 5 - Toxicological and Toxicokinetic Studies on the Active Substance

### Comments with respect to the Annex I renewal process

This delta dossier contains only summaries of studies, which were not available at the time of the first Annex I inclusion of iprovalicarb and were therefore not evaluated during the first EU review of this compound. The summaries on the different toxicological endpoints from the baseline dossier were supplemented and adapted with the new information. In order to facilitate discrimination between new information and original paragraphs, the new information is written in bold italic letters. All other studies, which were already submitted by Bayer for the first Annex vinclusion, are contained in the Monograph and in the baseline dossier provided by Bayer CropScience

A synonymous name for iprovalicarb used at several locations in this delta dossier is SZX0722.

Addendum October 2013: A brief summary on the Expert panel consensus report in assessing the weight of evidence of iprovalicarb carcinogenicity in this statement has been sequested by RMS Iroland in the course of their evaluation. A position paper prepared by the on the biological relevance of the replication fraction (RF) is also included (M-461421-023). Please fine these additional summaries in chapter "KIIA 5.54 - Machanism of action and supporting tota", for easy reference printed in blue type.

# KIIA 5.1 - Absorption, distribution, excretion and metabolism in mammals

### KIIA 5.1.1 - Toxicokinetic studies Single dose oral toute, in rats

A rat metabolism (NDME) study conducted with [phenyl-UL, 4C] invovaling the was submitted with the original EU dossier. Since the metabolisation is well understood, so additional rat metabolism studies have been carried out.

Following oral administration (low dose), iprovalicarb was capidly and almost completely absorbed as indicated by a bile fistolation or dudy. It was widely distributed in the body with the highest residues in the liver. However, there is no evidence for accumulation in any tissue based on studies on plasma kinetics and autoradiography. Exerction of absorbed iprovalicarb was rapid and complete; 98 % of the oral dose was excreted within 48 hours after dosing.

The metabolism of iproval carb in the ratio extensive with a metabolisation rate of >90% of the dose and 12 metabolites have been identified in the excreta. Consequently, unchanged iprovalicarb accounted for <10% of the (low) dose (and 6-21% of the high dose). The metabolic pathway proceeds mainly via exidation of the 4-methyl prenyl group to iprovalicarb carboxylic acid, partly followed by conjugation with give in and taurine. Minor metabolites are formed by hydroxylation of the phenyl ring and cleavage of the melecule. The metabolism study was conducted in high quality. The total recovery of radioactivity ranged from 90 to 107% of the administered dose. The rate of identification accounted for 80 - 90% of the dose independent of sex and dose level.

Please refer to point IIA 5.1 (EU point 5.1) of the EU dossier submitted in the context of Annex I listing and the relevant data submitted during the EU evaluation process according to the "Review Report for Provalicarb (SANCO/2034/2000-FINAL, from July, 2002)".



(Submission for Annex I Renewal)

Report:

Title:

Report No: Document No: **Guidelines:** 

**GLP/GEP:** 

[Phenyl-UL-14C]SZX 0722: Investigation of the biokinetic behaviour and the metabolism in the rat PF4263
M-000019-01-1
Deviation not specified yes

inetic studies - Second single dose, oral route, in rats

[Phenyl-UL-14C]SZX 0722: Investigation of the biokinetic behaviour and the metabolism in the rat PF4263
M-000019-01-1
Deviation not specified yes

netic studies - Repeated dose oral route, in rats



 $\label{lem:condition} \textbf{Document} \ \mathbf{M} \ / \ \textbf{Tier} \ \mathbf{2}, \ \mathbf{KIIA} \ \mathbf{5} \ \mathbf{Toxicological} \ \mathbf{and} \ \mathbf{Toxicokinetic} \ \mathbf{Studies} \ \mathbf{on} \ \mathbf{the} \ \mathbf{Active} \ \mathbf{Substanceon} \ \mathbf{Iprovalicarb}$ 

(Submission for Annex I Renewal)

### KIIA 5.2 - Acute toxicity

### Summary of acute toxicity, irritation and sensitisation studies

Table 5.2-1: Summary of acute toxicity, irritation and sensitisation studies

Species	Sex	Vehicle	NSD/NSC	LED/LLC	LAO/LC50	Reference
			[mg/kgbw]	[mg/kg bw]	Omg/kg bw]	Reference 5
Acute ora	al toxicity		Ą	Q Q		400
rat	male	water/	5000	> 5000	<b>№</b> > 5000 °	, 1993;
	female	cremophor	5000 🖔	> 5000° (	> 5600	22110
		2%v/v				22110
mouse	male	water/	<i>5</i> 900 ~	\$500 <b>@</b>	50000 √	
	female	cremophor	©5000°>′ 🛫	5000 ×	" > <b>500</b> 0	1993; 22008
		2%v/v		J. J.	> 5000	
Acute per	rcutaneous	• -	5000			
rat	male	water/	5000° ©	> 5000	>5000 >5000	, 1993;
	female	cremophor 🖔	50000	<i>≈</i> 5000 ∜ ′	> 5000°	22107
		2%vyv	50000			
Acute inh	nalation to	cicity of G	1.4977 5			
rat	male		<b>1 1 1 1 1 1 1 1 1 1</b>	\$ 497 <sub>0</sub>	94977	Pauluhn, 1993;
	female		4972	> 4997	>4977	22368
			4° 2'			

NSD/NSC: no symptoms dose/concentration; LLIC/LLD: Towest legical dose/concentration

	Phicle V	Result	Reference
Irritation rabbit Femal Skin mo			
rabbit Femal Skin 5 m	oistene polyethylene	not	, 1992;
male S S Q	ycol 💇 🂢	irritating	21713
eye of of no	oney" , V	not	
	ycol & O	irritating	
1	20		
	remophor® EL	not	, 1992; 21938
pig   O' test S' '   62	%v/v) / phys.saline	sensitising	
So So	lution		
		LD > 500	, 1993;
Acute Male was	ater/ cremophor 2%v/v	mg/kg	22109
Acute Mate intra male was perstone was	_		
al rat			



(Submission for Annex I Renewal)

Please refer to point IIA 5.2 (EU point 5.2) of the EU dossier submitted in the context of Annex I listing and the relevant data submitted during the EU evaluation process according to the "Review Report for Iprovalicarb (SANCO/2034/2000-FINAL, from July, 2002)". angel to the state of the state

The state of the s Please refer to point IIA 5.2 (EU point 5.2) of the EU dos for submitted to the context of Anaex I listing and the relevant data submitted during the EU evaluation process according to the "Review Report for Iprovalicarb (SANCO/2034/2000-FINAL, from July, 2002)".



1993 M-000374-01-17 The state of the state o Document M / Tier 2, KIIA 5 Toxicological and Toxicokinetic Studies on the Active Substanceon **Iprovalicarb** 

(Submission for Annex I Renewal)

### **KIIA 5.2.1 - Acute oral toxicity**

Report: Title: SZX 0722 - Investigations of acute oral toxicity in rats

Report No: 22110

Document No: M-000355-01-1 **Deviation not specified Guidelines:** 

**GLP/GEP:** ves

Report: SZX 0722 - Study for acute oral toxicity to mice Title:

Report No: 22108

Document No: M-000368-01-1 Deviation not specifi **Guidelines:** GLP/GEP: yes

# KIIA 5.2.2 - Acute percutaneous toxicity

Report: ZX 0722 Study for a cite deciral toxicity in cats 2107 Title:

Report No:

Document No: Destation of specified **Guidelines: GLP/GEP:** 

### KIIA 5.2.3 Acute inhalation toxicity

:4993;M∕000337≦01 Report:

SZX 0722 Acute inhalation toxicity study on rats in compliance with OECD No. 403 Title:

Report No:

Document No: @

**Guidelines:** GLP/GEP:

Report: ;1992;M-000383-01

SZX 0722 Study of skin and eye irritation/corrosion in rabbits Title:

2 713 5 M-0003 3-01-1 Report N Document

Guidelines: Deviation not specified



Document M / Tier 2, KIIA 5 Toxicological and Toxicokinetic Studies on the Active Substanceon Jones in rabbits

SZX 0722 - Study for acute intraperitenced to secure a place of the control of

(Submission for Annex I Renewal)

### KIIA 5.2.5 - Eye Irritation

Report:

Title:

Report No:

Document No:

**Guidelines:** 

**GLP/GEP:** 

### KIIA 5.2.6 - Skin sensitization

# interactions of mulfiple active substances aperitorial foxicity SZX 0322 - Sudy for soute interperional toxicity in rats 22 100 M-000361-01 Deviation not specified (cs.



### KIIA 5.3 - Short-term toxicity

### **Summary of short-term toxicity studies**

Table 5.3-1: Summary of short-term toxicity studies

(Submission for An	inex I Renewo	al)
KIIA 5.3 - Short Summary of sh Table 5.3-1: S	ort-term to	
Type of study	Species	Dose range tested (ppm) NOAEL (equal to mg/kg bw)
oral, 4 weeks, gavage	rat	0,2000,6000,20000
oral, 13 weeks, feed	rat	0,1250,5000,20000 (373) 3000, 1996; 24766 (373)
oral, 13 weeks, feed	mouse	0,280,1400,7009,14009 400 (323) 1996,25296
oral, 4 weeks, feed	dog	0,190,1000,10000,50000 100 (3.00 MTD0299
oral, 4 weeks, feed, supplementary	dog	20,(0.77) & 20,810 20,(0.77) & 26810
oral, 13 weeks, feed	dog	0,250,2500,50000 <
oral, 52 weeks, c	dog	\$0,80,800,8000 \$80 (2.6) \$\times\$ et al., 1997; 26454
dermal, 4 weeks	rabbit,	0-1000 kg bwoday
inhalation, 5 days		0.20.6,102.9,504.4

In rat, mouse and dog, the over has been dentified as the main target organ as indicated by higher liver weights associated with liver enzyme induction and/or hepatocellular hypertrophy in all 3 species. The lowest short term NOAEL was stablished in female dogs following a 52-week treatment period, on the basis of which a sub-chronic NOAEL of 2.7 mg/kg/d was proposed. No NOAEL was observed in male dogs from this 52-week chronic toxicity study.

Please refer point IIA 55 (EU point 55) of the EU dossier submitted in the context of Annex I listing and the relevant data submitted during the EU evaluation process according to the "Review Report for Iprovalicarb (SANCO/2034/2000-FINAL, from July, 2002)".



(Submission for Annex I Renewal)

### KIIA 5.3.1 - Oral 28-day toxicity

**Report:** ; ; ; ; ; ; 1995; M-000448-62

Title: SZX 0722 - Subacute oral toxicity study in Wistar rats (Twenty-eight dan feeding study)

Report No: 24489

Document No: M-000448-02-1

**Guidelines:** Deviation not specified

GLP/GEP: yes

0

Title: Safety evaluation of SZX 0722 Four-week distary toxicity study in dogs

Report No: R5987

Document No: M-000390-01-1 
Guidelines: Deviation not specified

GLP/GEP: Yes

Title: SZX 0722 Subacute toxicity study in Beagle dogs (additional)

**Report No:** 26810√

Document No: M-000578-01-1

Guidelines: Deviation not specified

GLP/GEP:

### KIIA 5.3.2 - Oral & day toxicity (rodents)

Report: ; 1996;M-000440-01

Title: SZX 0722-Subchronic toxicological investigations in Wistar rats (Administration in feed

over 13 weeks for lowed by a 4 week recovery period)

Report No.: 2476

Document No: M-000440-01-1

Guidelines: Deviation Foot specified

GLP/GEP:

**Report:** ; ; ; ; 1996; M-000436-01

Title: SZX 0722 - Dose-range finding study in B6C3F1 mice (Administration in food over 13

week

Report No: 25296

Document No: M-000436401-1 Deviation not specific

GLP/GEP: O ves

KIIA 5.3.3 - Oral 90 day toxicity (dog)

Report: (1995;M-000453-02; Amended: 1998-03-17)

Title: SZX 0722 - Subchronic toxicity in dogs (13-week study by oral administration)

Report No: 24337

Document No: M-000453-02-1

**Guidelines:** Deviation not specified



(Submission for Annex I Renewal)

**GLP/GEP:** 

### KIIA 5.3.4 - Oral 1 year toxicity (dog)

Report:

Title:

Report No:

Document No:

**Guidelines:** 

**GLP/GEP:** 

### KIIA 5.3.5 - 28-day inhalation toxicity (rodents

Report:

Title:

Report No:

Document No:

**Guidelines:** 

**GLP/GEP:** 

# KIIA 5.3.6 - 90-day inhalation toxicity (rodents)

# KIIA 5.3.7 - Percutaneous 28-day toxicity (rodents)

Report: Title:

Report No.

Document No:

**Guidelines:** 

**GLP/GEP:** 

# KIIA 5.3.8 - Percutaneous 90-day toxicity (rodents)

Based on the results of the acute and 28 day percutaneous toxicity study with iprovalicarb, a subchronic study was not triggered.



(Submission for Annex I Renewal)

### KIIA 5.4 – Genotoxicity

### **Summary of genotoxicity testing**

**Table 5.4-1: Summary of genotoxicity testing** 

(Submission for An	nex I Renewal)				<del></del> .
KIIA 5.4 – Genot	toxicity			~	
Summary of gen	notoxicity testing				
<b>Table 5.4-1:</b> Su	ummary of genotox	icity testing		.A	
Test system	Test object	Concentration ©	Purity	Result	Reference / report
,	3	- Si	(%)		Cno. S
Salmonella	S.typhimurium	8-5000	98.1	negative O	994:
microsome test	TA98, TA100,	μg/plate	~~		Q28426 Q
	TA1535, TA1537				
Salmonella	S. typhimurium	16\(\text{\$\text{9000}}\)	96.8	me@ative O	<b>42001</b> ; ∘
microsome test	TA102	mg/plate ~			913318 2
Salmonella	S.typhimurium É	3-5000	<b>95.</b> 7 6	negative Ş	,
typhimurium	TA98, TA100,	pg/plate \			2012; 1466200
and E. coli	TA1535, TA1537,				
reverse	E.coli WP2/yvrA				<b>%</b> ,
mutation assay	Z, 'Y				0'
HGPRT-Test	Chinese hamster	7.8-2 <b>5</b> 0 μg/mL	98.1	negatiwe	
	lung cells (¥79)	12\$ 125\$			, 1995; 23858
		µg/ml			
Cytogenetic	Chinese hamster	6,30,150	<b>9</b> 8.7	negative	, 1995;
study 💍	ovaly cells	μg/mL , , ,		Z,	24403
Cytogenetic O	Chinese hamster	60,120,180 mgonl	968	@negative	, 2001;
study- 18 Mours	V79 cells	mg@nl O			31333
treatment					
without			3"		
metabolic					
activation		O O O			
Unscheduled	rat primary	/50-500 μg/int	98.1-	negative	
DNA synthesis	hepatocytes		99.4		,
test 🗬					1996; 24963
Micronucleus	NMR mouse	2000 mg/kg	96.7	negative	, 1995;
test	bone marrow cells	bw i.p.			24016
32P-	Uterys and urinary	20000 and	96.4	negative	
postlabelting	bladder of rats	10000 ppm in	/0.1	110541110	, 1998;
assay ** S		the feed			27184
			<u> </u>		2/101



(Submission for Annex I Renewal)

Iprovalicarb was negative in a complete battery of *in vitro* genotoxicity tests with or without metabolic activation. Results of *in vivo* tests such as mouse micronucleus and <sup>32</sup>D postlabeling access and <sup>32</sup>D postlabeling access and <sup>32</sup>D postlabeling access and <sup>33</sup>D postlabeling access and <sup>34</sup>D pos activation. Results of *in vivo* tests such as mouse micronucleus and <sup>32</sup>P postlabeling assay on rather us and urinary bladder were negative as well.

In addition, a reverse mutation assay on S. typhimurium on the strain TA 102 and achromosome aberration assay on Chinese V79 cells have been performed to comply with current standard regulatory guidelines. A third Ames test (M-428023-01-1) has been conducted in 2012 to comply with the new specification of the compound. Again this assay showed a negative response.

ted in the context cess according to the bonds of the bon Please refer to point IIA 5.4 (EU point 5.4) of the EU dossier submitted in the context of Amex I listing and the relevant data submitted during the EU evaluation process according to the Review Report for Iprovalicarb (SANCO/2034/2000-FNAL from July, 2002)". A Little of the state of the st The state of the s the of the state o listing and the relevant data submitted during the EU evaluation process Report for Iprovalicarb (SANCO/2034/2000-PNAL) from July 2002)



(Submission for Annex I Renewal)

KIIA 5.4.1 - In vitro genotoxicity

Report:

Title:

Report No:

Document No:

Guidelines:

GLP/GEP:

Report:

SZX 0722 Mutagenicity study for the detection of indoced forward mutations in the V79-HPRT assay in vitro 23858
M-000316-01-1
Deviation not specified (es.)

23 005 19-01-1
iation not specified (cs.) Title:

Report No:

Document No: Guidelines:

GLP/GEP:

Report:

Title:

Report No: Document No:

Guidelines:

GLP/GEP:

Report:

Test on unscheduled DNA synthesis in rat liver frimary cell cultures in Title:

vitr@

Report No: 24963

**M**-000507-01-K Document No: Guidelines: Deviation not specified

GLP/GEP:

Report:

SZX 0722 Salmonella/moroson@test 34331 Title:

Report No:

Document No: @ **M-**071987-01-L

Guidelines: \* Deviation not specified

GLP/GEP:

Executive summary;

In this in vitro assessment of the mutagent potential of iprovalicarb (Batch number 898222005, 96.8% purity), Mistidine dependent auxotrophic mutants of Salmonella typhimurium, strains TA 102 were exposed to SZX0722 up to 5000 µg/plate, diluted in dimethyl sulfoxide (DMSO). Triplicate plates were used in both The presence and absence of an Aroclor 1254-induced rat liver metabolic activation system (S9 mix). DNSO was also used as a negative control. Specific positive controls were used. After 48-hours of incubation at 37°C, the numbers of revertant colonies were scored using an automated colony counter.

Doses up to and including 1581 µg per plate did not cause any bacteriotoxic effects. Total bacteria counts remained unchanged and no inhibition of growth was observed. Substance precipitation occurred at the dose of 1581 ug per plate and above. Therefore, the test was no longer interpretable at 5000 µg per plate. Evidence of mutagenic activity of SZX0722 was not seen. No biologically



(Submission for Annex I Renewal)

relevant increase in the mutant count, in compari to negative controls was observed. At the positive control compounds produced expected increases in the number of revertant colonies, thereby demonstrating the sensitivity of the assay and the efficacy of the S9 mix.

Therefore, SZX0722 was non-mutagenic with or without S9 mix for Salmonella typlimurium TA 102 in the plate incorporation of the Salmonella/microsome test.

I. MATERIAL AND METHODS

A. MATERIALS:

1. Test Material:

Description:

fine white powder

Lot/Batch:

96.8%

Purity:

CAS

Stability of test compound:

Stable at room temperature

2. Control materials: Negative; Culture medium

Solvent: DMSO

Positive: Cumene hydroperoxide (Signal) for TA 102 without S9 2
Aminoanthracene (Aldrich) for the activating effect of the S9 mix.

Aminoanthracene (Aldrich) for the activating effect of the S9 mix.

3. Test organisms: 🛸

Species: Salmonella tohimurium 12 mulants

Strain: Histidine-auxotrophic strains TAT02 &

Source: Strains obtained From? i@ 1997 and stored in the laboratory

4. Test compound concentrations:

Plate incorporation assay: with or without S9 mix: 16 50, 158, 500, 1581 and 5000

5. Metabolic activation: The \$9 fraction was isolated from the livers of Aroclor 1254 induced male Sprague Dawleg Fats. &

### B. STODY DESIGNAND METHODS;

The experimental phase of the study was performed between August 8 to August 16, 2001 at Bayer Health Care AGOPH-RD P Health Care Toxicology).

The Salmonella/microsome Gest is screening method which detects point mutations caused by chemical agents in vitro. Auxotrophic mutants of Salmonella typhimurium are used to demonstrate this effect. For this purpose, the rate of reversion to prototrophy is evaluated in negative control and treated groups

1. Plate incorporation assay:

SZX0722 of the positive control material was dissolved in 0.1 mL of DMSO. DMSO (0.1 mL) containing SZX 9722 positive controls were added to glass vessels with 0.1 mL of bacterial cultures grown overwight, 1.5 mL of S9 mix or buffer and 2 mL of soft agar. The mixture was placed in a waterbath at \$5°C for 30 seconds, shaken and overlaid onto Petri dishes containing sollid agas After 48 hours of incubation at 37°C, the numbers of revertant colonies were scored using all automated colony counter. Three plates were used, both with and without S9 mix, for each dose. The doses for the first trial were routinely determined on the basis of a standard protectal with a maximum dose of 5000 µg/plate and at least 5 additional doses. If less than three doses were used for assessment, at least two repeats were performed.

2. Acceptance criteria:



(Submission for Annex I Renewal)

The negative controls had to be within the expected range. The positive controls had to show sufficient effects. Title determinations had to demonstrate sufficient bacterial density in the suspension. The title was determined by the total bacterial counts taken on two plates for each concentration studied with S9 mix.

### 4. Assessment criteria

A reproducible and dose-related increase in mulant colonies of at least one strain was considered to be positive. For TA 102 and increase of about 100 mutants should be reached. Otherwise, the result was considered as negatives.

### RESULTS AND DISCUS II.

The colony number of each plate and mean values are listed for each dose in Tables 5.4.1.5-1 and 5.4.1.5-2. As may be seen, there was no indication of a bacteriotoxic effect of SZX0722 at doses of ° up to and including 1581 ug per plate. The total bacteria counts consistently produced results comparable to the negative controls, of differed only insignificantly. No inhibition of growth was noted as well. At 1581 ug per plate, the substance started to precipitate so that for 5000 ug per plate no further evaluation was possible IA 102 showed in the plate Incorporation test to dose celated or biologically relevant increase in mutant counts over those of the negative controls. This applied both to the tests with and without S9 mix (Table 5.4.7.5-1) and was confirmed by the results of the preincubation trials (Table 5.4.1.5-2). The positive controls cunferle hydroperoxide and 2aminoanthracene increased mutant counts to well overathose of the negative controls, and thus demonstrated the system's sensitivity and the activity of the S9 mix

Table 5.4.1.5-1: Mean mutant colon counts

É	Strain TA 102 Preincubation					
Ž.	Plate incorp	ografion 😽 🗳		bation		
μg/plate 0		∞, τ <b>ω</b>	A EN	+ <b>S9</b>		
0 0	\$ \\ \alpha \\ \	√ <b>215</b> €	<b>Q98</b>	232		
16 👰	208	°5 <sup>7</sup> 207 °°	<i>∞</i> 215	228		
<b>50</b>	© 218 &	188	<b>205</b>	223		
758	~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~	\$ 219 <sub>(1</sub>	231	266		
500	7 7196	≈ 219 ° ×	212	285		
1581	236	231,	206	253		
5000 <sub>@</sub>			-	-		
Cumene	397		379			
2-44		453		500		

**©NCLUSION** 

In the absence of any increase in mutant counts, there was no indication of any mutagenic effect of SZX0722 in this test. Iprovalicarb was therefore considered to be non-mutagenic.



(Submission for Annex I Renewal)

Report: ;2012;M-428023-01

Salmonella typhimurium and Escherichia coli reverse mutation assay with Title:

Report No: 1466200 Document No: M-428023-01-1

OECD 471 (1997), EEC Commission Directive 2000/32/EC Method BV3/1 EPA 40 CFR part 160 OPPTS 870.5 and (August 100) Guidelines:

MAFF 12 Nousan No8628 (December 06, 2000)

GLP/GEP:

### Executive summary:

In this in vitro assessment of the mutagenic potential of iprovaligarb (Batch mimber EDMZ019701, 95.7% purity), histidine dependent auxotrophicomutatos of Salmonella typhimusum, strains VA 1535, TA 1537, TA 98, TA 100 and the Escherichia coli strath WPO uvrA were exposed to iprovalicarb up to 5000 µg/plate, diluted in dimethyl sulfoxide (DMSQ). For each bacterial strain and dose level, triplicate plates were used in both the presence and Absence of a Menobarbital/\betanaphthoflavone-induced rat liver metabolic activation system (S9 mix). DASO was also used as a negative control. Specific positive controls were used for each strain. After 48 Hours of incubation at 37°C, the numbers of revertant colonies were scored using an automated colony counter. No increase in revertant colony numbers of any of the five tester strains was observed at any dose level neither in the presence or the absence of metabolic activation.

In conclusion, under the experimental conditions reported, iprovations And not induce gene mutations by base pair changes of frameshift in the genome of the strains used. Therefore, iprovalicarb is considered to be con-magagenic in this Salmonella typhimurium and Escherichia coli reverse mutation assay.

iprovalicarb 1. Test Material Lot/Batch Purity: *19Ф793*≂6*©*~3 CAS \_@

Stability of test compounds Stable at roomstemperature

2. Control materials: Negative: Culture medjum

Solvent: DMSO

Positive: Softum aside (Serva) for TA 1535 and TA 100 at 10 µg/plate, 4-Nitro J,2-ph@nylen&diamine (Merck-Schuchardt) for TA1537 at 50 μg/Mate and TA 98 at 10 μg/plate, methyl methane sulfonate, MMS (Sigma Adrich) for WP2uvrA at 3.0 μL/plate, 2-Aminoanthracene (Aldrich) for the activating effect of the S9 mix in all strains at 2.5 µg/plate.

Species: Salmonella typhimurium LT2 mutants and Escherichia coli Strain: Histidine-auxotrophic strains TA 1535, TA 100, TA 1537,

TA 98 and tryptophan-independent strain WP2 uvrA

Source: Strains obtained from Germany)



(Submission for Annex I Renewal)

4. Test compound concentrations:

Plate incorporation assay: For all strains with or without S9 mix 10, 33, 100, 393,

1000, 2500 and 5000 µg/plate

Pre-incubation assay: For all strains with or without S9 mix: 10, 33, 100, 333

1000, 2500 and 5000 μg/plate

5. Metabolic activation: The S9 fraction was isolated from the liver of

Phenobarbital/β-Naphthoftavone induced male sprague

Dawley rats.

### **B. STUDY DESIGN AND METHODS:**

The experimental phase of the study was performed between February 16 to February 78, 2012, at Germany).

1. Plate incorporation assay:

Iprovalicarb or the positive control material was dissolved in 0.1 and of DMSO DMSO (0.1 mL) containing iprovalicarb or positive controls were added to glass vessets with 0.1 mL of bacterial cultures grown overnight. 0.5 mL of S9 mix of buffer and 2 mL of soft agar. The mixture was placed in a waterbath at 45°C for 30 seconds, shaken and overlaid onto Petri dishes containing solid agar. After 48 hours of incubation at 37°C, the numbers of revertant cotonies were scored using an automated colony counter. Three plates were used, both with and without S9 mix, for each strain and dose. The doses for the first trial were routinely determined on the basis of a standard protocol with a maximum dose of \$000 mg/plate and at least 5 additional doses. If less than three doses were used for assessment, at least two sepeats were performed.

2. Pre-incuDation assay;

An independent repeat test was performed as pre-facubation of the previously described mixture in a water bath at 37°C for 60 mittates. At the end of the previouslation period, 2 mL of molten soft agar were added to the tubes, the content mixed and plated onto Petri dishes with solid agar. After 48 hours of incubation at 37°C, the numbers of revertant colonies were also scored using an automated colony founter.

3. Acceptance criteria:

The negative controls had to be within the expected range. The positive controls had to show sufficient effects.

4. Assessment oviteria 🧸

A test item is considered as a managen of a biologically relevant increase in the number of revertants exceeding the threshold of twice (strains TA98, TA 100 and WP2uvrA) or trice (strains TA 1535 and TA 1537) the colony count of the corresponding solvent control is observed A dose dependent increase is considered biologically relevant if the threshold is exceeded at more than one concentration.

### II. RESULTS AND DISCUSSION

No toxic effects were observed in the test groups with or without metabolic activation.

No substantial increase in revertant colony numbers of any of the five tester strains was observed following treatment with iprovalicarb at any dose level. This applied both to the tests with and without S9 mix (table 5.4.1.3-1) and was confirmed by the results of the pre-incubation trials (Table 5.4.1.3-2).



(Submission for Annex I Renewal)

The positive controls caused a significant increase in the number of revertant colonies compared to the controls demonstrating the sensitivity of the system.

*Table 5.4.1.3-1: Mean mutant colony counts (1st experiment)* 

	c/concentration	TA 1535	TA 100 🖔	TA 1537	TA 98	WP2uvrA
(μ	g/plate)		ithout S9 mix		TA 98	
invovalicark	0 (DMSO)	22		-60	~~~	
iprovancaro	3	24	70k	16 9 15 9 5 16	35 40 20 33	47 5 47 5 416 416 47
	10	23	©113	15		
	33	28	% 10%°	2 15 N		*/ <b>1</b> /7
	100	24	O 126 %		<b>3</b> 3	. ⊿ <i>53</i> . ∘
	333	26	. W12 ~ W			7 49 53 53 55
	1000	26 p. "	~~109py	( 15 p)	35 O' 374p	55 F
	2500	26 pJh (	🌂 110g/m 🦠	🎾 15, P,m 🙎	" 37p,m 💍	68 n m
	5000	23\dots.m \langle	₽ 1 <b>29</b> p . S	<i>\mathbb{l} p,m P</i>	S p,m	55 p,m
Na-azide	10	2047	2402	5 - 5 - 5 - 5 - 5 - 5 - 5 - 5 - 5 - 5 -	339 339	√° -
4-NOPD	10				O 339	<b>-</b>
4-NOPD	50		j oʻ 4	@\$\D \\ \rangle		-
MMS	<i>3 μl</i>	<u> </u>	<u> </u>			780
	Q (DISCO)		With S9 mix	20		
iprovalicarb	0 (DMSO) 3	28 31 36 31 35		» 1.20	». 32	66
	3		\$27	23	₹ 46 45	62
		36		23 O	<sup>™</sup> 45	61 70
	33 5° 0°	\$\tag{\chi} 3F\tag{\chi} \tag{\chi}	136		© 51 52	70 65
	3 10 33 100 100 33 100 100	31 36 31 35 29	¥32 %	23	50 50	69
	38	<i>⊗</i> 30 p <sub>N</sub>	132 146 B	25 W	43 p	56 p
//	* 000	\$ 30 p * 27 pm	133.p.m	22 D.m	48 p,m	59 p,m
	2500 5 5000 5 2.5 5	28 0. m . \	155 p,m	20 p,m	51 p,m	58 p,m
2-AA **	2.5	\$449 O	289k	301	2384	-
2-AA	10		, ~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~	<u>-</u>	-	410
P: precipita	te; m? manadl con	nt O h		7		
.4						
	, b		¥ , L			
V	~ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	, D' <i>a,</i> Y	, <b>©</b> ″			
			¥			
a						
Ş		<b>*</b>				
	2500 5000 2.5 10 te; m: manual com					
Č <sup>o</sup>						



(Submission for Annex I Renewal)

*Table 5.4.1.3-2: Mean mutant colony counts (2<sup>nd</sup> experiment)* 

					())
Substance/concentration (µg/plate)	TA 1535	TA 100	TA 1537	TA 98	WP2uvrA
	V	Vithout S9 mix		1. (	\$ 29 0
iprovalicarb 0 (DMSO)	22	92	18	29 7 27 5 34 ©	<b>48</b>
10	25	92	18 19 Ø	27	~ 47, W
<i>33</i>	21	94	17	34 <sup>©</sup>	T 46 .
100	24	9.D	15	<b>28</b>	$\mathbb{Z}$ $\mathbb{Q}_3^{\mathbb{Z}}$ $\mathbb{Z}$
333	25	<b>82</b>	76 ©	<i>29 √</i>	39
1000	25 p	<i>₹</i> 91 p	215 p	27.0	49.p
2500	25 p,m	& 87 p.cm°	\$ 17 p,m ₹	26 pm	√ 36 <sup>4</sup> p³,m
5000	26 p,m	O 8& F,m	150,m S	3Dp,m 🛴	<b>4</b> 4 p,m <sub>e</sub> ∘
Na-azide 10	1723	. <b>№</b> 979, ©	Q- 4	(A)	
4-NOPD 10	- Ľ'	- ~		379	
4-NOPD 50	<b>-</b> @" (		,8 <b>°</b>		)
MMS 3 μl			~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~		- √ 515
		164 00			<i>∜</i> 515
		With Sonix			
iprovalicarb 0 (DMSO)		126		38	55 50
10	\$\frac{38}{35} \times \frac{38}{35} \times \frac{3}{35} \times \fr		36		50
33	35	113 123	26°	Ş" 425"	71
100	$\Rightarrow$ 34	r is	23	<b>45</b>	65
333 1000 2500 5000	ž <b>33</b>	\$22	25	<b>48</b>	59
1000 V	31	≈128 p	26 p°	<sup>™</sup> 46 p	50 p
2500 S	~ 28 p;wi	102 pm	0 19 <b>5</b> m	36 p,m	48 p,m
5000	¥ 29.p,m	98 p,m ~	13°p,m √"	26 p,m	46 p,m
2-AA 25 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2	300 🗳	7737 O	227 <sub>0</sub>	1482	-
$\frac{2-AA}{R}$	<u> </u>	- v	7) · 0	-	253

P: precipitate; m: manual count

In the absence of any inercase in mutant county, there was no indication of any mutagenic effect of In the absence of any increase in mutant counts, there was no indication of any mutagenic effect of iprovalicath, in this test. Iprovalication was therefore considered to be non-mutagenic in the Salmonella typhimurium and Escherichia coli reverse mutation assay.



(Submission for Annex I Renewal)

*Report:* ;2001;M-071975-01

Title: SZX 0722 - In vitro chromosome aberration test with Chinese hamster V79 cells using I

hours treatment without S9 mix

**Report No:** 31333

**Document No:** M-071975-01-1

Guidelines: Deviation not specified

GLP/GEP: Yes

### Executive summary:

In this in vitro assessment of the clastogenic potential of ippovalicarb (Batch-No.898227005, 96.8% purity), Chinese Hamster V79 cells were exposed to SZX0722 at 30, 60, 124 and 240 \( \sum \) cmL (18 hours treatment) diluted in dimethyl sulfoxide (DASO) in the obsence of an Aroctor 1250 induced rat liver metabolic activation system (99 mix). Cultures of all concentrations were harvested 18 hours after treatment start. Concentrations were selected for metaphases reading on the basis of their cytotoxicity and precipitation in the medium. Adequate positive control unitomorphic (18 was also used.

Without S9 mix, cytotoxic effects were observed at 12 β g/mix and above. Precipitation in the medium occurred at 120 μg/ml and above. Therefore, concentrations of 60, 120 and 180 mg/ml were chosen for reading.

None of the cultures treated with SZX0722 in the absence of Symix showed biologically relevant or statistically significant increased numbers of aberrant metaphases.

The positive control mitomycin C induced elastogenic effects and demonstrated the sensitivity of the test system. Ippovalicate was considered not to be clastogenic for mammalian cells in vitro.

### A. MATERIALS AND METHODS

### A. "MATERIALS:

1. Test Material: A S SZXO722

Description: Whole lungy powder

Lot/Batch: \$98222005 Purity: \$96.8% (AS: \$140923-17-7)

Stability of test compound. Stable for the duration of the study

2. Control materials Negative: Qulture medium

Solvent: @ DMSO for SZX0722 and Hanks's balanced salt solution for

postive controls (Seromed)

Fositive: Mitomycin C (Fluka, batch 410943/1 31600) without S9 mix

at 0.03  $\Box$ g/mL for a treatment period of 18 hours.

3. Test organisms:

Cell line: Chinese hamster V79 lung cells

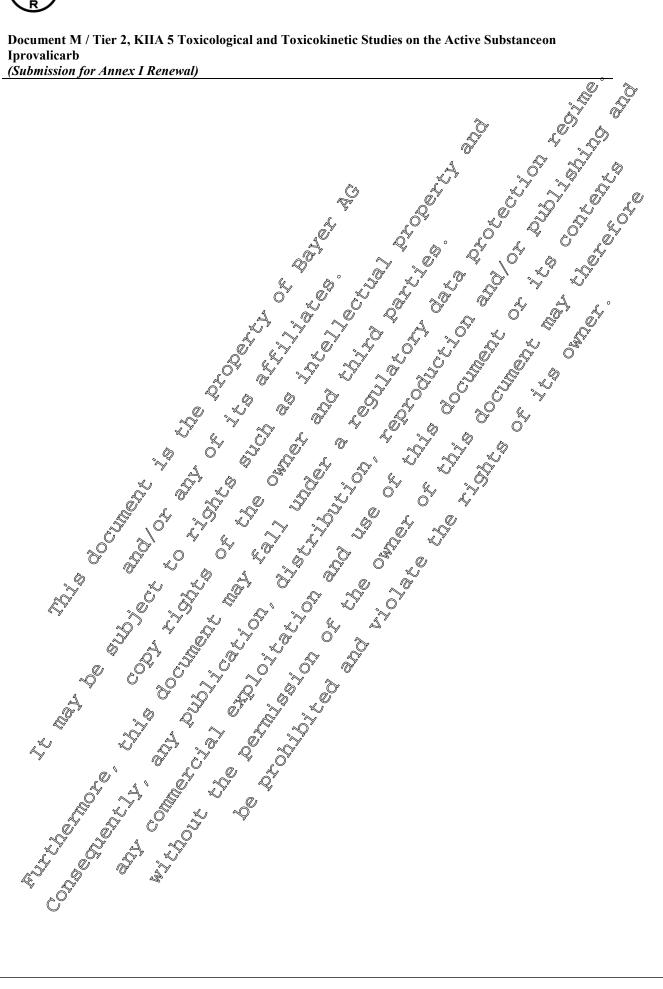
Source: Cells obtained from Darmstadt in

1993, stored in the laboratory since then.

4. Test compound concentrations:

SZX0722 was used without S9 mix up to 240  $\square g/mL$ .







(Submission for Annex I Renewal)

### B. STUDY DESIGN AND METHODS:

The experimental phase of the study was performed from August 1 to August 175, 2001 as Bayer Healthcare AG (PH-PD P Health Care Toxicology).

The in vitro cytogenetic test is a mutagenicity test system for the detection of chromosome aberrations in cultured mammalian cells. The test is designed to detect structural aberrations (chromatid and chromosome aberrations) in cells at their first post-treatment mitosis.

### 1. Determination of cytotoxicity

Cytotoxic effects of the test substance were assessed in the pre-test as well as in the main study. Cell survival as well as mitotic index were determined. At the end of the respective incubation period cells of all cultures of the respective period were trypsinized, and an appropriate dilution was counted using a hemocytometer (improved Newbouer) to determine cell survival.

The mitotic index was determined for all cultures. The number of mitotic cells among a total of 1000 cells per culture was determined. All cells which were not in interplase were defined as mitotic.

In the main study, cultures with a total incubation period of hours were additionally and exclusively used to determine the cytotoxicity of SZX 07220 5 5 6

### 2. Treatment protocol

The general protocol of the test system was similar to published procedures (ex. Dean and Danford, 1984). Chinese hamster V79 cells were passaged on the day pror to treatment. Approximately 1 x 106 cells were seeded in 20 ml of medium per 73 cm2 flasks and incubated as described in section 4.2.2. All cultures were set up in duplicate.

Immediately before treatment, the medium was removed from the cultures.

For the treatment, the following fresh solutions were added to each Bask: components volume in ml medium containing 2% PCS test substance solution. The cells were incubated for 18 at 37°C as described above. 0.2 mt Colcenid solution (40 ug/ml water) were added to each flask two hours prior to the end of the incubation period to arrest the cells in a metaphase-like stage of mitosis (metaphase).

Positive control and solvent control (6.2 ml solvent per culture), were set up in parallel and handled as described for SZX 6.22-treated cultures. Solvent controls are used as negative controls.

### 3. Chromosome preparations:

After the removal of the medium from each flask, the cells were trypsinized, suspended in medium and centrifuged for approximately 5 minutes at 700 rpm. The supernatant was removed and 1 to 2 mL of a hypotonic solution (0.4% KCl; 37°C) was added to each tube. Within 4 minutes, the volume was brought to 6 mL with additional hypotonic solution and cells were resuspended. The cells were centrifuged again and fixed with cold (4%C) fixative (ethanol/acetic acid 3:1) for 20 minutes at room temperature. Cells were pelleted and resuspended in fixative as before and centrifuged again. The pelleted cells were resuspended in a small volume of fixative and the suspension was dropped onto clean dides. The slides were allowed to dry for at least 2 hours. Thereafter, they were submerged in pure inethanol for 3 minutes and stained for 15-20 minutes in 3% Giemsa solution. Slides were rinsed twice in water and once in acetone and were then kept in xylene for about 30 minutes. The slides were allowed to dry completely and covered. At least two slides were generated per culture.



(Submission for Annex I Renewal)

### 4. Evaluation criteria:

Coded slides were evaluated using a light microscope at a magnification of about 1000. Chromosomes of approximately 200 metaphases per concentration, 100 metaphases from each of two parallel cultures, were examined. Only metaphases containing the modal chromosome number (22) were analyzed unless exchanges were detected. The following aberrations were recorded: gaps (an achromatic lesion within a chromatid arm without dislocation of the chromatid end), break (a discontinuity of one chromatid with dislocation of the chromatid end), break (a discontinuity of one chromatid with dislocation of the chromatid end), break (a chromosome without centromer), deletion (result of a break with the terminal chromatid pair of the chromosome missing within the metaphase under assessment), exchange (exchange of chromatid parts between different chromosomes or within the same chromosome), multiple aberration when five or more structural changes occur within one metaphase). Observed polyploidy metaphases were recorded but not used for assessment.

### 5. Assessment criteria:

An assay was acceptable, if there was a prologically relevant there we in chromosome deerrations induced by positive controls and If the numbers of aberrations for the negative controls were in the expected range.

An increased incidence of gaps of both types without a concenitant increase of other aberration types was considered not to be an indication of a clastogenic effect.

A test was considered positive, if there was a relevant and statistically significant increase in the aberration rate.

A test was considered negative, if there was no such increase at any time afterval or if there were statistically significant values, which were, however, within the range of historical negative controls.

A test was considered equivocal, if there was an increase above the range of historical negative controls which was statistically significant but considered not relevant, or if an increase occurred, which was considered relevant, but which was not statistically significant.

## II. RESULTS AND DISCUSSION

# A. Mitotic and Survived indices:

Mitotic inflex: in absence of Somix, the mitotic index was reduced at 120 µg/mL and above (tables 5.4.2-1 and 5.4.2-2). The cultures treated with intomycin C showed no reduction in mitosis rate compared to solvent control.

Survival index: Survival Indices were significantly reduced at 240 µg/ml.



(Submission for Annex I Renewal)

### B. Chromosome aberrations:

The results of the microscopic evaluation of the metaphases for structural chromosome aberrations are presented in Table 5.4.1.7-1. Numbers of aberrations (listed by class) and numbers of metaphases with aberrations including and excluding gaps and numbers of metaphases with exchanges for individual cultures are listed (in percent).

No biologically relevant and statistically significant increases of humbers of metaphases with aberrations were detected (Table 5.4.1.7-1).

The treatment with the positive control mitomycit. C resulted in a clear and statistically significant increase of metaphases with aberrations and demonstrated the sensitivity of the text system.

Table 5.4.1.7-1: Summary of the results of the coromosome aberration study with \$ZX0\\ 22 (18 hours treatment)

Experiment	Harvest	Test item	Mutotic	Aberrant	Aberrant cells	Aberrant cells &
	time	concentration	indices 🦫	🏅 cetts 🌊	etts	g cetts 🗸
		μg/mJ	©(% of control)	Incl; gaps	Excl. gáps	With exchanges
	18 h	∂PMSO (%)	\$00.00°	<b>1</b> 00 '	\$ \$\int_{2}^{\infty} 5 \tag{7}	<b>Q Q Q 5</b>
		Mitom <del>y</del> cin C	1029	26.5***	24.5**	\$7.0**
	Q <sub>i</sub>	<b>60</b>	Ø6.5 S	1.00		0.0
	Ĵ	1200	\$\\ 93?\theta_{\eta}	2.0	\$0.0\$\tag{\tag{0}}	0.0
		<b>₹80</b> €	<i>§8</i> 9.2 ≤	2.0	2.0	0.5

<sup>\*</sup> p < 0.05, p < 0.01

III GONCLUSION

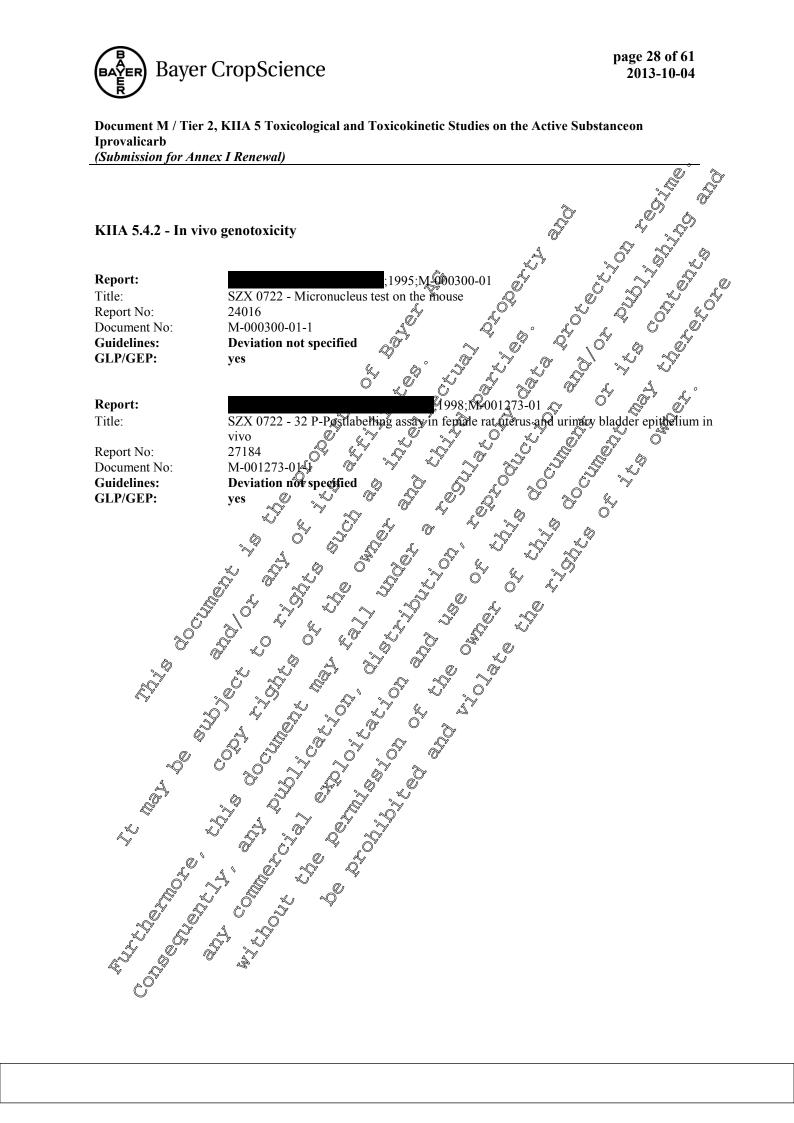
After 18 hours treatment of Chinese hamster V79 cells with SZX 0722 concentrations of 60, 120 and 180 ug/ml were used for assessment of the clastogenic potential of SZX 0722.

None of these cultures treated with SZX 0722 showed statistically significant or biologically relevant increases of numbers of metaphases with aberrations.

The positive control mitorix cin. Conducta clear clastogenic effects and demonstrated the sensitivity of the test system.

Based on the results of this test, SZX 07225 considered not to be clastogenic for mammalian cells in vitro.







(Submission for Annex I Renewal)

### KIIA 5.5 - Long-term toxicity and carcinogenicity

### Summary of long-term toxicity studies

Table 5.5-1: Summary of long-term toxicity studies

KIIA 5.5 - Long-ter Summary of long	•	and carcinogenicity	Ş	
<b>Table 5.5-1: Sun</b>	nmary of l	ong-term toxicity studie		
Type of study	Species	Dose range tested	NOAEL (mg/kg/Qy)	Reference
chronic/carcino- genicity, oral	rat	0-500-5000-20000 pm	500 pgm (26.0) Q	2760 Q
oncogenicity, oral	mouse	0-280-1400-7000 ppm	\$0 ppon (58.5) ng/kg (day)	1997; 26450

The 2-year rat chronic/carcinogenicity study showed higher liver weight (20 % in famales) associated with hepatocellular hyperroph (20/50) in Temales at 20,000 from, sight increased incidence of rare benign tumours (prerus, prinary bladder, cliteral gland, boxes) at 20,000 ppm. The NOAEL was established at 500 ppm (26 mg/kg/d). Siven that the increased incr 20,000 ppm was minimal and close to the historical control data, these tumors have been considered not to be treatment-related. In the mouse oncogenicity study, the liver and the kidneys were the target organ. The NOAEL was established at 280 ppm \$8.5 mg/kg/d). In both species, ippovalicarb was not

The increased incidences of the peen investigated in specific mechanism studies mentioned

point 5.5) of the EU dossier subsubmitted during the EU evaluation p
sANCO/2034/2000-FINAL, from July, 20 Please refer to point II 5.5 (EU point 5.5) of the EV dossier sulmitted in the context of Annex I listing and the relevant data submitted during the EU evaluation process according to the "Review



(Submission for Annex I Renewal)

### KIIA 5.5.1 - Long-term (2 years) oral toxicity in the rat

Report:

SZX 0722 - Chronic toxicity and cancerogenicity investigations in Wistabrats (administration in the feed over 24 months) 27160
M-001236-01-1
Deviation not specified yes

SZX 0722 - Chronic toxicity and cancerogenicity investigations in Wistabrats (administration in the feed over 24 months) 27160
M-001236-01=1
Deviation on the feed over 24 months) 27160
M-001236-01=1
Deviation on the mouse genicity study in the mouse Title:

Report No:

Document No: **Guidelines:** 

GLP/GEP:

### KIIA 5.5.2 - Carcinogenicity study in the rate

Report:

Title:

Report No:

Document No: **Guidelines:** 

**GLP/GEP:** 

# KIIA 5.5.3 - Carcinogenicity study in the mous

Report:

397;Mc000405-01 XX 0722/- Oncogenicity study in B6C3/1-mic/(Administration in the food over 2 years) Title:

Report No:

M-090405-01-1 Document No:

Deviation not specified Guidelines: 4 GLP/GEP

### KIIA 5.5.4 - Mechanism of action and supporting data

A specific mechanism study has been conducted in Westar rats to determine the tumor initiation potential of invovalicarb administered by oral gavage at 1,000 mg/kg for 28 days. The study showed no difference between control and treated group on the number of foci of altered hepatocytes suggesting that iprovaligarb was devoted of arm initiation potential and does not possess a carcinogenic potential?

The following additional information in the area of mammalian toxicology will be included in the dossier supporting the approxial revewal: Frew mechanistic study (M-267627-01-1 and M-422060-01-1) has been performed to assess cell proliferation in tissues of concern for carcinogenesis in the Wistar rat Farcinggenicity study bones, thyroid, uterus & urinary bladder. On the slides from the rat carcinogenicity 104-week sacrifice time, the immunohistochemical determination of Proliferating Cell Nuclear Antigen (PCNA), an endogenous marker for cell replication (G1, S phases of cell cycle), showed the absence of biologically significant differences between DNA replication in control and treated tissues for osteocytes, thyroid follicular cells, uterine cells & urothelia cells: the slight increased incidence of tumors are not related to treatment with iprovalicarb. Iprovalicarb is thus devoid of any carcinogenic potential.

An additional position paper (M-461421-02-1) has been provided as well by the external expert ) to address a question raised by the RMS during the review of the consultant (



(Submission for Annex I Renewal)

PCNA evaluation of the 2-year rat carcinogenicity tissues on the biological relevance of the increased replication fraction in the uterus and urinary bladder.

During the sub-chronic feeding study in rats at 500 ppm and 20,000 ppm, plasma samples were investigated to determine the toxicokinetics of iprovalicarb and the main metabolite SZS 0722 carboxylic acid (M03).

An additional sub-acute toxicity study was conducted in rats with thermodynamically stable and thermodynamically labile modification of iprovalicarb in diet for weeks at 2,000 and 20,000 ppm. The modifications are a result of molecular polymorphism, leading to two crystal modifications of different stability. However, no toxicologically relevant differences in plasma levels of the main metabolite SZX0722-carboxylic acid (M03) were observed.

Please refer to point IIA 5.8 (EU point 5.8) of the EU dossier submitted in the context of Angex I listing and the relevant data submitted shuring the EI) evaluation process according to the "Review Report for Iprovalicarb (SANCO/2034/2009) fivAt from July 2002)". Please refer to point IIA 5.8 (EU point 5.8) of the EU dossier submitted in the context of Angex I



(Submission for Annex I Renewal)

Report:

[14C] SZX 0722: Investigation of the biokinetic behaviour and the metabolism in the rat following subchronic feeding PF4322
M-001057-01-1
Deviation not specified yes

[1997; M-001057-01]

[14C] SZX 0722: Investigation of the biokinetic behaviour and the metabolism in the rat following subchronic feeding PF4322

[1997; M-001057-01-1

[1998; M-00127]-01-1

[1998; M-00127]-0 Title:

Report No:

Document No: **Guidelines:** 

**GLP/GEP:** 

Report:

Title:

Report No:

Document No: **Guidelines:** 

**GLP/GEP:** ves

Report:

Title: SZX 0722 - Bioavailability study compari

thermodynamically labile modification (feeding study over Liweeks in rats)

272\$\$7 Report No:

M-001275-01-1 Document No:

Deviation not specified **Guidelines:** 

**GLP/GEP:** 

Report:

P-Postfabelling assay in female rat therus and urinary bladder epithelium in Title:

Report No

Document No: **Guidelines:** 

**GLP/GEP:** 

O722 Liver foci test

2120

M-000347-01

Deviation not specified

no SZX 0722 Liver foci test for inicating effect



(Submission for Annex I Renewal)

;2006;M-267627-01 Report:

Proliferating cell nuclear antigen (PCNA) immunohistochemical evaluation reportion Title:

Title:

Proliferating cell nuclear antigen (PCA) immunohistochemical evaluation report in selected target tissues from SZX072: Chronic toxicity and Carcinogenicity investigations in Wistar rats (administration in the feed over 24 months) ...

Report No:

Document No:

M-267627-01-1

Guidelines:

GLP/GEP:

Not specified

GLP/GEP:

Not specified

Report No:

010512

Document No:

M-422060-01-1

Guidelines:

GLP/GEP:

Not specified

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GLP/GEP:

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GLP/GEP:

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Suidelines:

GLP/GEP:

Not specified

Suidelines:

Not specified

Suidelines:

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Not specified

Suidelines:

Suidelines: mg/kg/day in males and 0, 32, 326 or 1380 mg/kg/day in females). This study, entitled "SZX0722: Chronic toxicity and carginogenerity in restigations in Wistor rats (administration in the feed over 24 months)" was Peported on February 4, 1998 ( 1998, M -001236-01-1, see section 5.5.2), 0

In order to monitor, the rate of proliferation on certain target tissues, proliferating cell nuclear antigen (PONA) immunphistochemical stato was performed as selected tissues from archival material Blocks) from the 12-month and 24-month surfifices. The PCNA results from the 24month tissues have been reported and the weight-of-evidence of all of the significant rat neoplastic findings has been assessed (see document M-26762701-1). This expert panel consensus document (M-422060-01-11) reports the analysis of ICNA staining of the 12-month tissues following a requirement made by S-EPA and confirms that the neeplasms observed in rats following a 2-year treatment-period with ipprovalicary are not retevant for humans. In conclusion, iprovalicary is clearly considered as a non-car nogenic compound

### Introduction

Proliferating cell nuclear antigest (PCNA) im unohistochemical reaction was performed on bone and cartilage tissues from males and uritary bladder (UB), uterus and thyroid tissues from females from archival material (blocks) from the 12- (interim) and 24-month final terminations from randomly selected samples per group of rats, in Juding the samples with neoplasms. In late 2007, an IPRO Expert Payel was convened consisting of

replaced by

(Rapporteur) and

. Using a Weight of Evidence

(WE), the Panel concludes that the tumors observed in the 4 tissues of male and female rats were not  $treatmes P^{r}elated.$ 



(Submission for Annex I Renewal)

In high dose (HD) male rats only (three osteosarcomas), there was a statistically significant (p<0.01), positive trend for osteosarcoma in two combined bone sites, and also significant (p<0.05) by par-wise comparition (HD vs control). The incidence exceeded the concurrent control oscidence, and historical control data at both Bayer and RITA databases. These tumors are rare (<1%) and malignant.

- a. iprovalicarb is non-genotoxic and accordingly, for an exigenetic again profferation, hyperplastic or preneoplastic changes would be expected to precede ponor development. If we were no evidence of increased osteoblastic activity resulting in hyperostosis or other preneoplastic findings was present.
- b. At the HD level females received ~20% higher systemic exposure & iprobalicarb and are more prone to compensatory hyperostosis in old age (because of estrogen reduction) than male fats, yet no osteosarcomas were evident in females
- c. The occurrence of the three osteosarcoines was not time-relied, i.e., one at 53, sine at 89, and one at 94, but none at 106 weeks. This pattern of occurrence (41) weeks spart and not at the End) is the pattern of a background ("spontageous") heoplasm.

Thus, the Expert Panel WoE assessment based on the points made above concludes that the 3 osteosarcomas observed in HD mile rats were not related to proval oarb treatment.

In mid dose MD (2/48 or 45%) and HD (3/50 or 6%) female rate, there were Dicreases in the incidences of combined follicular cell adenospus and carcinoma of the thyroid. There was a statistically significant trend (p<0.05) but pay-wise companion with controls was not significant. These tumors exceeded the concurrent compol and historical control data in the Bayer and RITA databases. Subsequence-evaluation of all follicular cell reoplasms, found that one mid dose adenoma was very small, was reclassified a focally perpiasia, and was disqualified as a neoplasm.

d. Neither the pend analysis for the pair-wise comparison achieved the statistical significance required to establish a treatment related effect, i.e., p < p(0) for trend analysis (US FDA, 2001).

provalicarbos non cenotosic and accordingly proliferative, hyperplastic or preneoplastic changes would be expected to precede transport development. Increased follicular cell proliferation is always present with preatment with known thyroid non genotoxic carcinogens (Capen et al, 1999; Rice et al, 1999). The thyroid histopathology, including lack of evidence of increased trophicity or activation, and lack of increased follicular cell rate of preneoplasia (hyperplasia) indicate that iprovalicarb lacks the capability of inducing any of these effects, even in the HD where three follicular cell neoplasm were found There was no reduction in tatency for tumor development, the only neoplasm identified prior to termination was a HD adenomic observed at 82 weeks in a moribund rat.

Thus, the Expert Panel Wor Cassessment, Dased on the points described above, concludes that follicular cell deoplasms of the through and not related to iprovalicarb. Furthermore, the mode of action for non-generoxic coscinogens involves hypothyroidism produced by a variety of mechanisms, and this Mon has been considered not to be relevant to humans (Rice et al, 1999; Capen et al 1999).

In middose and high dose female rats the numerically greater incidence of mixed Müllerian uterine maligrant temors, 1/48 or 2.1% and 2/50 or 4%, respectively, was not statistically significant by either trend analysis of by pair-wise comparist to controls. The tumor incidence, however, did exceed the historical control incidence in both Bayer and RITA databases.

f. There was a lack of statistical significance for both trend and pairwise comparisons.



(Submission for Annex I Renewal)

- g. iprovalicarb is non-genotoxic and accordingly proliferative, hyperplastic or preneopastic changes would be expected to precede tumor development. Currently, assessment of atterine histopathology and uterine rate of cellular proliferation, including lumital/stromal/ thyometrial cellular elements measured by PCNA at the 12-month interval, did not yield evidence of in trophicity, dysplasia or preneoplasia.
- h. Organ weights of hormonally sensitive digans provided no evidence antiestrogenic effects indicative of any disruption of uter the hormonal of meostasis.

Thus, the Expert Panel WoE assessment based on the points mode above concludes that the Müllerian tumors observed in one mid dose and two high dose rats are not related to treatment.

In high dose females (2/50 or 4%), a numerically greater incidence of benightransitional arothestally cell papillomas of the urinary bladder was present, but the pricease was reither statistically significant by trend analysis, nor by por-wise compari With controls

Their incidence exceeded the concurrent and historical control and the Bayer and

- i. These two benign neoplasm were not state Ticall Signiffant.
- i. Inese iwo venign neomiasms were not statistically stants.  $\heartsuit$  ,  $\varphi$  ,  $\varphi$  ,  $\varphi$  ,  $\varphi$  ,  $\varphi$  . In the neoplasms were observed in HD female rats on  $\varphi$  at teomination (100 weeks) and no malignant tumors were present. Such findings do not strictly qualify is label a compound as "carcinogenic", since no galignant uritary bladder nyotheligh cell ulmors were present.
- k. iprovalicarb, is non genotoxic and accordingly proliferative, hyperposistic or preneoplastic changes would be expected to precise tumor development, especially then both urothelial cell tumors were benign (at 106 weeks). Curontly assessment of wother al cell histograthology, indicates lack of evidence of chronic irritation, in perplasia, assplasia, prescoplasia and lack of increased urothelial cell proliferation at the 12-month interval indicating that the two benign tumors observed at 106 weeks in high dose fanales, are not causally religied to Froval arb exposure. Furthermore, there was Inus, the Expert Ponel We assessment based on the above points, concludes that the UB benign tumors are not regard to iprove lear by eatment.

  Conclusions

  A Weighting To the second of the second of

A Weightoof Evidence analysis was applied to the four identified neoplasm types in four tissues, osseous malignant only in 3 HD male rats, uter ne (malignant only in three HD rats), follicular cell tumo of the thyroid (benien in 196 HD Jemales), and malignant in one MD and one in HD females), and urothelial cell papillema of the urinary badder (two benign in HD females).

Iprovalicarb as condude to be non-genotoxic and this was supported by structure activity analysis. Marginal statistical significance for Atreatment related effect was achieved only for the osseous tumors. For the and the other three tumor types there was no evidence for tissue changes or preneoptasia of advance of tumors and no increased incidences of preneoplastic lesions at the termikal ethanagi which are expected for a non-genotoxic carcinogen. Based on such considerations, the Expert Panel concludes that these tumors were not treatment related.

Using the WoE, the Expert Panel concludes that there is no evidence of iprovalicarb-induced carcinogenicity in male and female Wistar rats.



(Submission for Annex I Renewal)

**Report:** ;2013;M-461421-01

Title: Iprovalicarb PCNA reporting

Report No: M-461421-01-1 Document No: M-461421-01-1 **Guidelines:** not specified

**GLP/GEP:** 

### Executive summary:

ersus a non-ke The rapporteur questions the criteria for a biologically relevant persus a non-prologically relevant response in the PCNA assay with regard to finding in the uterus and Finary bladder. For both of these two tissues, the interpretation of a Auck of biological significance was based on the fact that the RF value increases, were marginal and below the approximate fold increase over the value of the appropriate controls, which we have found to be a threshold for clear biological significance.

Introduction

The uterine tissue is a composite of stromal (~ 51%), which also includes the glandular compartment, the luminal epithelial (~ 68%), oid momental (~ 1%) cellular compartments. Thus, the uterine tissue has cells with different patterns of produceration after maturity, is expending, e.g., myocytes and stromal cells indetermined a gender model of the control of the co and stromal cells; indeterminate e.g. Sendoc Inocyos; and renewing cell types e.g., mucosal epithelia \$96). In addition, in most this ues the maintenance of and ductular cells ( adequate trophicis is a sumed by the parasympathetic torvous system. The exceptions are the hematopoietic, fancrequic, and uterine tissues which have the sympothetic nervous system assume maintenance of troplacity, and which is tailed by estropens. Buy interruption of trophicity, triggers stimulation of proliferation (1994). Endometrial hyperplasia is found as a spontaneous change in rats as age advances. Hyperplasia can either be diffuse or focal (polypoid). In aging rats, Results and Discussion

In the present rat bioas by with iprovesicarly at twelve months, similar slight numerically greater values for the light for the provident of the light and HD high

values for eplicating fraction (RF) were soserved in all doses (LD, low, MD, mid, and HD high doses) Fiprovalicar vi.e., 1.14 to 1,2-fold Table 1). Only the mean HD value was significant (at p <0.050 in pair-wise compate t contr**O**s, although the RF increase was only  $\sim 1.2$ -fold greater than control. However, the absence of a dose response calls into the question whether the values reflect a compound-induced effect. Moreover routifie microscopic evaluation of the same uterine tissues did not reveal either diffuse or socal weas of hyperplasia, or even microscopic evidence of disruption of trophicity (Spertrophy of utrophy, even dystrophy) in any of the cellular compartments of the uterus. At the 24 Month Fermination, Sightly higher significant increases, i.e., 1.5- to 1.9-fold were observed. The relevance of these is questionable, however, since they were found only at the end of the study and hence cannot be implicated in the development of the uterine neoplasms.



 $\label{lem:condition} \textbf{Document} \ \textbf{M} \ / \ \textbf{Tier} \ \textbf{2}, \ \textbf{KIIA} \ \textbf{5} \ \textbf{Toxicological} \ \textbf{and} \ \textbf{Toxicokinetic} \ \textbf{Studies} \ \textbf{on} \ \textbf{the} \ \textbf{Active} \ \textbf{Substanceon} \ \textbf{Iprovalicarb}$ 

(Submission for Annex I Renewal)

Table 1. Effect of exposure to iprovalicarb (IPRO) on the replicating fraction (RF) of utering and urothelial non-neoplastic (NON) and neoplastic (NE) tissues in Wistar rats compared to conduct controls at 12- and 24-month terminations <sup>a</sup>.

				, O' , B'
		12 Month i	erim termination	
	Uter	rine <sup>b</sup>	Urot	newalasment
Group identification	RF fold change °	Neoplasms 27 24	RF fold change	Neoplasm©at 24 months
Control	CV	NA U		NA NA
LD IPRO d	~ 1.1	NA S		G NA
MD IPRO <sup>d</sup>	~ 100 ° 4	S S S		NA NA
HD IPRO	% ~ 1.2 *	NA ST	PF fold change VION	NA NA
		24 Megin inte	egn termination	
	S O Street	prine D	Uroti	helial
Control		Neoplasms at 24 months  NA  NA  NA  NA  NA  NA  NA  NA  NA  N	PF fold change (NON NON NON NON NON NON NON NON NON NO	NA
LD IPRO © .		NA O	TNE	NA
MD IPAQO d		1 MMMT	TNE	NA
JD IPRO	7 5 1.9 5 a,	2 200MT	~ 2.0 *	2 UP <sup>g</sup>

et al, 2010 b, a composite of stromal (~51%), luminal (~48%) and myometrial (~1%) cells; c, fold in rease over the controls b, low (LP), mid (MD), or high dose (HD) of iprovalicarb in the diet; e, one malignant mixed Müllahan (MM) t) tumor, observed at final termination; t, two MMMTs observed at final termination, all three MMMTs had different the diet; e, metastasis) and lacked significance for both trend and pair-wise comparisons; e, two benign to a particular particular to controls; CV, control value of the RF of the controls which served to calculate the RF fold change, NA, that applicable; Talks, tissue was not evaluated; ---, same as in controls.

In other studies in our laboratory with the selective estrogen-receptor modulators tamoxifen (TAM) and toremifene (TOR), and the pro-estrogen, diethylstilbestrol (DES), we studied the biological and statistical significance of a variety of changes (increases or decreases) in each of the cellular



(Submission for Annex I Renewal)

compartments of the uterine tissue (Table 2). As a result, the biological fold changes above of selow  $\sim$  3-fold seem to be more useful than the mean ( $\pm$  SD) RF values of exposure compared statistically to either pair-wise or trend comparisons. This was confirmed by the lack of hyperplasias with TAM or TOR, and the presence of hyperplasia with DES, which also induced metaplasia in the same compartments ( $\pm$  21 at 1998).

Table 2. Effect of exposure to tamoxifen, toremifene, or diethyl the strol on the replicating fraction (RD) of different uterine cellular compartments in F344 rats compared to concurrent controls.

RF fold <sup>b</sup> change in uterine	Group identification Q Q
cellular compartments	Control & TAM STATES
Luminal epithelium	CV d A ~ 3.4 ~ ~ 3.4 ~ ~ ~ 3.4 ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~
Glandular epithelium	CV 0 7 7 91.4 1 4 0 7 7 3 1 7 7 2 8 7 0 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
Stroma	
Myometrium	CV 0

a, Adapted and modified from the state of the controls, which reveal to calculate the Reviold crange.

The three (one in MD and two in HD involved that the ministron (MD, 107 weeks; HD, 105 and 106 weeks) (Table 1). Each of these neoplasms had a different histogenesis. Noticely, the MD neoplasm was accompanied to a stronal uterine local puryp, and a lyteoma of the ovary, without any evidence of metastasis. One HD neoplasm (at 106 weeks) had no other neoplasms in any of the tissues. The other HD neoplasm (at 105 weeks) had evidence of extensive metastasis to the ovary, kidney and lung. Yet, at termination, the RF fold in sease was ~ 1.6-fold in MD and ~ 1.9-fold in HD. Both fold increases were similar (~ 1.5-fold) to the LD increase which had no MM T neoplasms (Table 1). Hence, these three neoplasms were not eausally linked to any discription of trophicity based on epigenetic effects induced by iprovipicarly—

by iprovenicarly the strength of the same of the strength of the capacity of the same of t for the higher pattern of poliferating responses and, 1996). *In the rat, there* is absence of tight junctions readering the superficient urothelial layer ineffective as an intraluminal , 1975) and making the rat prinary bladder very sensitive to intraluminal changes ( et al, 1994. Intralyminal changes in per (both extremes) produce simple hyperplasia, which, with persisting stimuli becomes adaptive, reporative, and finally preneoplastic hyperplasia, which is irreversible. Collular atypia is also present in this preneoplasia hyperplasia, which can occur in small areas of papillary, notalar an mixed hyperplasias ( et al, 1994). In the present rat bioassay, at 2 months, the fold change (increase) in RF were minimal, i.e. 1.1- and 1.2-fold, without statistical any hyperplasia of any kind. The picture, remained the same of 24 months, although the HD RF value was significantly elevated (p <0.05 but the REFold increase was only  $\sim 2$  (Table 1). Again, between 12 and 24 months, no hyperplasicof any kind was present, and only two HD rats had benign urothelial cell papillomas. These to rats had no evidence of calculi or urothelial irritation. Thus, the presence of only two benign fumors (not statistically significant), without compound-related evidence of chronic urothelial irritation and subsequent dose-related preneoplastic hyperplasia cannot be causally linked to iprovalicarb epigenetic effects.



 $\label{lem:condition} \textbf{Document M / Tier 2, KIIA 5 Toxicological and Toxicokinetic Studies on the Active Substance on Iprovalicarb}$ 

(Submission for Annex I Renewal)

We can find no published criteria for biologically significant increases. Our data as
described above shows that 3-fold increase is biologically significant. Dr. S. Cohen of the University
of Nebraska, an expert in this matter (Cohen and Ellwein, 1990), concurs that there are no published
criteria and states that a 2-fold has frequently been used. All of the relevant 12 month of levels were
below a 2-fold increase. We know of no evidence that less than a 4-fold increase can drive see
carcinogenic process. In fact, et al (1994) reported on three nonewrinogenic
organophosphate pesticides which produced up to 1 stefold increases over controls in not live which
were considered not to be increases. Let al (1993) found statistically significant increases of cell proliferation in nontarget organs of carcing fenicity which were considered Conspectific" and
"without biological significant". Also in the urinary bladder, carcinogens were associated with
elevation of labelling index of 1.78 to 9.31.
In any event, no tumors were found in low dose this (32 mg/kg body weight) and this dose may be
considered to be below a threshold for a tongenovoxic agent.
I O MATERIALS AND METHODS OF S
elevation of labelling index of 1.78 to 9.31.  In any event, no tumors were found in low dose dis (32 mg/kg body weight) and dis dose may be considered to be below a threshold for a tongenoroxic agent.  I. MATERIALS AND METHODS  A. MATERIALS:
A. MATERIALS:
1 Tost Material:
A. MATERIALS:  1. Test Material:  Description:  Lot/Batch number: \$\frac{1}{2}\frac{1}{2
Lot/Batch number: \$\infty \operatorname{\infty} 05013/\text{0194} \operatorname{\infty}
Purity: \$\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\
Test material Stability: Some Stable at 25 ± 5 C / room temperature
Molecular weight: 320.4 granol
2. Vehicle and for positive control. None
3. Test animals:
Species Rat & Rat &
Strain; Wistar Hsd/WIN; WE
Ager weight at 48 weeks old 2129 gmean group weight for males; 105 g mean group
study initiation weight for females
(Day 1): A A A A A A A A A A A A A A A A A A A
Source: , Germany.
Housing. by seoin groups of 5 unless reduced by mortality or isolation. The
cages were suspended, stainless steel and wire mesh.
Digi: Aftromin 1231, ad libitum except at designated time periods

Filtered and softened tap water from the municipal water supply, ad

20-24 ℃

libitum

**Environmental** 

Temperature:

Humidity:



(Submission for Annex I Renewal)

 $55 \pm 5 \%$ Air changes: conditions:

15 days

Photoperiod: 15 to 20/hr

12 hrs dark/ 12 hrs light (6 m - 6 pm)

Acclimatization

period:

**B.** STUDY DESIGN:

light (6 am- 6 pm) 1. In life dates:

2. Animal assignment and treatment

Male and female experimental animals were randomized prior to the start of application and allocated to experimental groups. For this purpose, the animals were weighed individually, classified according to their weight (light and heavy), and, soparated by sex, placed into huge tubs where they could spread at random. Using a random list based on evenly distributed chance numbers, which was especially generated for this study animals were taken and allocated to the group and animal number specified by the tandom list, with the animals being placed one after the other into eages with ascending humbers.

3. PCNA evaluation

Staining for proliferating cell nucleur antigen (PCNA) was performed at Germany.

The tissue samples were obtained exclusively from wichived material (blocks) of the 2-year carcinogenicity study ( 71998) via a study protocol amendment. For the organs/tissues of interest, randomly selected tissue somples and neoplasms were processed.

Paraffin sections of the urinary bladder, aterus thyroid gland, bone, cartilage and tumor samples about five microns thick were cut and de-paraffinized. For gentle heat pretreatment, the sections were placed in a citrate buffer bath at a temperature of 90°C and put in an incubator for 60 minutes. For enhancement of the immunoreaction in bone tissue, one additional set of bone slides was pretreated in a pressure cooker for 3 minutes.

All sections were then incubated with anti-PCNA (clone PC 10, Biogenex), dilution 1:80 for 30 minutes at room temperature. Subsequent steps were performed according to the avidin-biotinmethod (Versastajn ABCA Mouse Peroxidase IgG, Camon). The immunoreaction was visualized by addition of 33 diamino-benzidine tetrachloride (DAB) and the enzyme substrate hydrogen peroxider Finally, the sections were counterstained with Hematoxylin. shipped to New York Medical College, Department of Pathology, in Valhalla, NY, for evaluation.

For quantitation of bone/cartilage, urinary bladder, uterine and thyroid gland cells, a square graticile (Olympus Instruments, Inc.) with 25 equal subdivisions was used at 400X magnification. Each side of the graticule was confirmed by measurement with a second micrometer (Graticules, Ltd., Tonbridge, UK) as 0.125 mm, providing a square counting area of 0.0156 mm<sup>2</sup> that usually



(Submission for Annex I Renewal)

contains 5-20 bone/cartilage cells, 10-70 thyroid follicular cells, 20-50 uterine cells, and 70-80 urothelial cells. Five of the most PCNA positive areas were enumerated for each rat. In Addition, areas from inside the neoplasm in the target tissues (UB, uterus, thyroid) were counted. Again, the most proliferative areas were selected for counting. Based on the above, the labeling indices of each tissue were calculated, reflecting the percent replicating fraction (RF).

All tissues selected rendered successful PCNA staining even when the tissue stained negative was the case with bone and cartilage cells which are stable and do not replicate. The white blood cells in vessels surrounding bone tissue were PCNA positive as was the bone marrow.

For statistical comparisons of each exposed group to control the Students-test was used.

II. RESULFS

In male bone and cartilage tissue samples, the percent RF group means could not be obtained because these tissues were PCNA negative despite the presence of PCNA-positive elements within blood vessels, e.g. white blood cells, and also in the borte marrow, RF ange 3 to \$\mathbb{Z}\$ (Table 5.5.4.6-1). The percent RF within 2 osteosarcomas wgs 28 in No. 203 (tymor in the lower jaw, which was lethal to the rat on week 53) and 38 in No. 220 (tuntor in the femily/knee joint with lung metastases, which was lethal on week 94). The third osteosarcoma was PCNA negative No. 187, of the femur/knee joint with lung metastases, Lethal on weels 89). Likewise, the singly osteochondroma was PCNA negative (No 199, of the nasal capity, which was lethal on week 101 Lable 5.5.4.6-2).

In females, the percent RF group means of the wering tissue showed an exposure-related increase (Table 5.5.46-1). The percent RF within the malignant mixed Mullerian (No. 379, killed at terminal sacrifice) of group & (5000 ppm) was &b. The RF, within the two other associated Müllerian neoplasms in group 4 was 80 in No. 434 Twith metastases in the kidney, ovary and lung, which died on week 105) and 90 in No. 436 (killed at terminal sacrifice) (Appendix 1). Likewise in females, the percent RF group mean of group 4 (2000 ppm) of UB urothelial tissue showed a significant increase compared to controls (Table 5.54.6-1). The percent RF within the 2 urothelial (adenomas) papillomas was 80 in No. 431, and 50 in No. 455, both killed at terminal sacrifice. The percent RF group mean of the nonneoptastic follicular thyroid tissue from all 3 exposure groups was similar to control (Table 5.5%.6-1). The gercent RF within the follicular carcinoma of No. 424, killed at term, was 80. The Res of follicular adenomas were PCNA negative for No. 425, killed at term and No. 473, killed morbund at 82 weeks, which also had an adenocarcinoma of the uterus, although the Surrounding Jascular elements in these animals were PCNA positive (Table 5.5.4.6-2, Appendix 1 from study report):

The occurrence of neoplasms in all rats Ding early (i.e. during the first 18 months of the study or 2/3rds of the study duration) is given in Table 5.5.4.6-3. This study was terminated at 106-107 weeks and had a 12 month interim sacrifice. Four rats were sacrificed moribund (Nos. 432, 148, 203 and 426) before or Auring the interim sacrifice. All four of the early deaths had lethal neoplasms; No. 432, pituitary adenomo; No. 148, malignant brain astrocytoma; No. 203, osteosarcomo of the lower aw, and No., 426 adenocarcinoma of the uterus (Table 5.5.4.6-3). All common nepplasms and the majority of the early neoplasms are consistent with the pattern of early background (spontaneous) neoplasia. Tumors in 3 of the 4 affected tissues (bone/cartilage, uterus, and the roid pland) occurred before the 60th week of the study. Only the neoplasms of the urothelium of the arrinary bladder occurred much later. The bone/cartilage was identified as the sole target site of neoplasia in males, and the uterus, thyroid and urinary bladder were identified in females.

Table 5.5.4.6-1. Mean Percent Replicating Fraction (RF) Values<sup>a</sup> of Selected Tissues from Rats Exposed to IPRO<sup>b</sup>



Group	Uteri	us	Thyroid	Urinary Bladder,	Bone / Gartilage
Identification			-		New New
and Sex	Neo <sup>c</sup>		Neo	Neo.	
Group 1- Control	!				~0, ~ <u>%</u> , ~
Males	NSA	_			CBE N
Females	28.53 ±	NA	$1.76 \pm NA$	15.590± NA	
	5.32		0.64	4.96	
Group 2 - 500 pp	m IPRO		A	Q'	
Males	NSA	_		~ - 0°   4	CBE O NA
Females	42.83 ±	NA	1,89 ± NA		
	5.31*		<b>639 6</b>		
Group 3 – 5000 p	om IPRO	J.			
Males	NSA	_&			CBE
Females	44.91 ±	80°	1.80 ± 0 90		
	5.34*		Ø.53 👸   «🗳		
Group 4 - 20000	opm IPRO	4 0			
Males	NSA *	¥ <u>-</u> \$	\$ \$ -6		<i>CBE</i> 28-38
Females	56.25 ±	80-90	1.96 ± 80°	$39.89 \pm 950-86$	7   👺   —
	4.67*		70.39 " " " " " " " " " " " " " " " " " " "	1.42*	
	- B		O O O O		

A, Measured by proliferating cell nuclear angles (PCNA) immunohistochemistry; b, Iprovalicarb; c, the RF range within the observed reoplasms; NSA, not sex appropriate; NA, not applicable; CBE, cannot be evaluated, being PCNA negative; —, tissue was not utilized, \* p<0.05.



 $\label{lem:condition} \textbf{Document} \ \textbf{M} \ / \ \textbf{Tier} \ \textbf{2}, \ \textbf{KIIA} \ \textbf{5} \ \textbf{Toxicological} \ \textbf{and} \ \textbf{Toxicokinetic} \ \textbf{Studies} \ \textbf{on} \ \textbf{the} \ \textbf{Active} \ \textbf{Substanceon} \ \textbf{Iprovalicarb}$ 

Table 5.5.4.6-2. Pertinent Malignant and Benign Rat Neoplasms

		Weeks	Neoplasm Diagnosis and Location (tissue)  Hamanaiosanon (MIN) C. Madanoma (Hyporid)
Group ID	Rat	on	Neoplasm Diagnosis and Location (tissue)
	No.	Study	Neoplasm Diagnosis and Location (tissue)
		-	
Group 1	10	107	Hemangiosarcoma (MLN), C-coll adenoma (hyroid)
Control	23	107	Follicular adenoma (thyroid), adenoma (pithitary)
Males	48	106	Hemangiosareoma (MLN); adrenomedullary adenoma (adrendi)
Group 2	74	107	Follicular adenoma sthyroidy, adregrome follary adenoma
500 ppm		10,	(adrenal) & Q Q O O O
IPRO	75	101	Fifrosarcoma (skin and other sites), Walignant Schwannina
Males	7.5	101	(Aomach) V S O J S
1,14,005	79	102	Histibertic surcoma (systemic)
	107	106	Fibrosarcoma (stomach), C-celoudenoma (thoroid)
	107	100 %	9 9 5 5 5 5 7
<i>C</i>	112	61 4	
Group 3	113		Fibrosarcoma (skin and other sites)
5000 ppm	123	04-	Folicula Ludenoma (thyroid), malignant Schwannoma (heart)
IPRO Malas	136	91	Föllicular adenoma (thyroid), malignant neoplasm (adrenal
Males	161	106	Gmedulta) G G G G
	161 @	106	C-sell carcinoma and adenoma (thyroid)
Group 4	<b>8</b> 7 >	89 💝	Osteosarcomy (femur and finee joint) with lung metastases
20000 ppm (	M99 🚫	100	Chondrosarcoma Gnasal Eavity),
IPRO - Males	203	53	Osteosarcoma (tower jaw)
	220	94	Osteosarcoma (femin and knee joint) with lung metastases
₽¥ .	<b>,</b>		
MLN, mesenterio	c lymph ne	oder 👸	
			Osteosarcoma (femili and finee joint) with lung metastases Chondrosarcoma (nasal cavity), Osteosarcoma (femili and knee joint) with lung metastases



 $\label{lem:condition} \textbf{Document} \ \textbf{M} \ / \ \textbf{Tier} \ \textbf{2}, \ \textbf{KIIA} \ \textbf{5} \ \textbf{Toxicological} \ \textbf{and} \ \textbf{Toxicokinetic} \ \textbf{Studies} \ \textbf{on} \ \textbf{the} \ \textbf{Active} \ \textbf{Substanceon} \ \textbf{Iprovalicarb}$ 

Table 5.5.4.6-2. Pertinent Malignant and Benign Rat Neoplasms (continued)

Troup ID  Rat No.  Study  Adenocarcinoma (uterus) with metastases in Jung, MLN, brain and abdominal favity  Troup 1  Control  243  107  Adenocarcinoma (uterus), adenocarcinoma (MG)  260  179  Adenocarcinoma (uterus), Adenocarcinoma (uterus)  Troup 2  317  317  317  317  318  329  334  340  340  340  340  340  340  34				
iroup 1 Control Contro			Weeks	
Front of Control 243 107 Adenocarcinoma (Interus) with metastases in Jung MIN, pain and abdominal tavity 250 106 Stromal sarcoma (Interus), adenocarcinoma (MG) 260 179 Adenocarcinoma (Interus) 250 107 Adenocarcinoma (Interus) 250 260 179 Adenocarcinoma (Interus) 250 260 179 Adenocarcinoma (Interus) 250 260 179 Adenocarcinoma (Interus) 250 260 260 260 260 260 260 260 260 260 26	Group ID	Rat	on	Neoplasm Diagnosis and Location (tissue)
Front of Control 243 107 Adenocarcinoma (Interus) with metastases in Jung MIN, pain and abdominal tavity 250 106 Stromal sarcoma (Interus), adenocarcinoma (MG) 260 179 Adenocarcinoma (Interus) 250 107 Adenocarcinoma (Interus) 250 260 179 Adenocarcinoma (Interus) 250 260 179 Adenocarcinoma (Interus) 250 260 179 Adenocarcinoma (Interus) 250 260 260 260 260 260 260 260 260 260 26	•	No.	Study	
Temales 250 106 Stromal sarcoina (uterus), udenogracinoma (MG)  260 179 Adenocarcinoma (uterus)  270 ppm 2 317 107 Adenocarcinoma (uterus)  280 ppm 334 90 Adenocarcinoma (uterus)  280 ppm 340 80 Adenocarcinoma (uterus)  280 ppm 379 107 Adenocarcinoma and udenoma (thyroid)  280 ppm 379 107 Adenocarcinoma (uterus), adenocarcinoma (MG)  280 ppm 379 107 Adenocarcinoma (uterus), adenocarcinoma (MG)  280 ppm 380 ppm 4 ppm				
Temales 250 106 Stromal sarcoina (uterus), udenogracinoma (MG)  260 179 Adenocarcinoma (uterus)  270 ppm 2 317 107 Adenocarcinoma (uterus)  280 ppm 334 90 Adenocarcinoma (uterus)  280 ppm 340 80 Adenocarcinoma (uterus)  280 ppm 379 107 Adenocarcinoma and udenoma (thyroid)  280 ppm 379 107 Adenocarcinoma (uterus), adenocarcinoma (MG)  280 ppm 379 107 Adenocarcinoma (uterus), adenocarcinoma (MG)  280 ppm 380 ppm 4 ppm	Group 1			Adenocarcinoma (uterus) with metastases in Jung, MLN, Brain
260 179 Adenocarcinoma (uterus) 270 ppm 334 90 Adenocarcinoma (uterus) 280 ppm 334 90 Adenocarcinoma (uterus) 280 ppm 340 80 Adenocarcinoma (uterus) 280 ppm 340 80 Adenocarcinoma (uterus) 280 ppm 341 ppm 342 ppm 343 ppm 343 ppm 344 ppm 345 ppm 34	Control	243	107	and abdominal savity
260 179 Adenocarcinoma (uterus) 270 ppm 334 90 Adenocarcinoma (uterus) 280 ppm 334 90 Adenocarcinoma (uterus) 280 ppm 340 80 Adenocarcinoma (uterus) 280 ppm 340 80 Adenocarcinoma (uterus) 280 ppm 341 ppm 342 ppm 343 ppm 343 ppm 344 ppm 345 ppm 34	Females	250	106	Stromal sarcona (uterus), adenocarcinoma (MG)
Group 2 317 107 Adenocarcinoma (uterus)  PRO 340 80 Adenocarcinoma (uterus)  Group 3 369 107 Adenocarcinoma (uterus), C-gell adeadma (thyroid)  Group 3 369 107 Adenocarcinoma (uterus), adenocarcinoma (thyroid)  PRO 100 ppm 379 107 Sixed Mullerian neoplasm guerus), stromal polyp (uterus), interior adeadma (thyroid), interior adeadma (thy				Adenocarcinoma (uterus) Q Q O O
Group 2 317 107 Adenocarcinoma (uterus) 334 90 Adenocarcinoma (uterus) 7 PRO 340 80 Adenocarcinoma (uterus) 7 PRO 340 80 Adenocarcinoma (uterus) 7 PRO 343 107 Adenocarcinoma (uterus), adenocarcinoma (uterus) 8 proprio 100 Prollicular adenoma (thyroid), histocytic carcoma (systemic) 100 Prollicular adenoma (thyroid) 100 Prollicular				
340   90   Adenocarcinoma (alerus)   340   340   80   Adenocarcinoma (alerus)   C-gell adenoma (thyroid)   Genales   343   107   G-cell adenoma (alerus)   G-gell adenoma (thyroid)   Group 3   369   107   Adenocarcinoma (alerus)   Adenocarcinoma (aler	Group 2	317	107	
PRO Semales  343 107	500 ppm			
Troup 3 369 107 Adenocarcinoma (uterus), adenocarcinoma (MG)  PRO  Troup 3 379 107 Mixed Mullerian neoplasm auterus), stromal polyp (uterus), iuteònia (orgry)  Troup 4 390 106 Follicular adenoma (thyroid), histocytic sorcoma (systemic)  390 106 Follicular adenoma (thyroid), histocytic sorcoma (systemic)  390 106 Adenocarcinoma (uterus)  Troup 4 23 107 Adenocarcinoma (uterus)  PRO 424 107 Fallicular adenoma (thyroid), stromal polyp (uterus)  Troup 4 25 106 Follicular adenoma (thyroid), stromal polyp (uterus)  Troup 4 25 106 Follicular adenoma (thyroid), stromal polyp (uterus)  Troup 4 107 Fallicular adenoma (thyroid), stromal polyp (uterus)  Adenocarcinoma (uterus)  431 107 Papilloma (UB), thecoma (ovary), C-cell adenoma (thyroid)  Mixed Mullerian neoplasm (uterus)  434 105 Mixed Mullerian neoplasm (uterus)  435 107 Adenocarcinoma (uterus)  455 107 Adenocarcinoma (uterus)  457 101 Squamous Cell carcinoma (uterus)  458 106 Squamous Cell carcinoma (clitoral gland)  468 105 Adenocarcinoma (uterus)  470 100 Hepuangiopericytoma and polyps (clitoral gland), C-cell adenoma (thyroid)  470 100 Hepuangiopericytoma and polyps (clitoral gland), C-cell adenoma (thyroid)  480 38 Squamous cell carcinoma (clitoral gland), stromal polyp (uterus), C-cell adenoma (thyroid)	IPRO			
343 107	Females	0.0		
Group 3 369 107 Adenocareinonia (uterus), adenocareinoma (MG) PRO Females 380 106 Follicular adenoma (thyroid), histiocytic sprcoma (systemic) 390 106 Follicular adenoma (thyroid) 396 106 Adenocarcinoma (uterus) Follicular adenoma (thyroid) 396 107 Adenocarcinoma (uterus) Follicular adenoma (thyroid) Follicular adenoma (thyroid), histiocytic sprcoma (systemic)  Adenocarcinoma (uterus) Formup 4 0000 ppm PRO 424 107 Follicular adenoma (thyroid), histiocytic sprcoma (systemic)  Adenocarcinoma (uterus) Follicular adenoma (thyroid), histiocytic sprcoma (systemic)  Adenocarcinoma (uterus) Formula 107 Follicular adenoma (thyroid), stromal polyp (uterus) Formula 107 Follicular adenoma (thyroid), stromal polyp (uterus) Formula 107 Formula 108 Follicular adenoma (thyroid), stromal polyp (uterus) Formula 108 Follicular adenoma (thyroid) Formula 108 Follicular adenoma (thyroid) Formula 108 Follicular adenoma (uterus) Formula 108 Formula 108 Formula 108 Follicular adenoma (uterus) Formula 108 Formula 108 Formula 108 Follicular adenoma (uterus) Formula 108 For		343	107	C-cell adenocarcinoma and adenoma (theroid)
107   Mixed Müllerigin neorlasm (uterus), strongal polyp (uterus), interval (orgry)   106   Follicular adegroma (thyroid), histiocytic corcoma (systemic)   390   106   Follicular adegroma (thyroid)   396   106   Adenocarcinoma (uterus)   423   107   Adenocarcinoma (uterus)   424   107   Follicular adegroma (thyroid), stromal polyp (uterus)   426   53   Adenocarcinoma (uterus)   426   53   Adenocarcinoma (uterus)   431   107   Papilloma (UB) sthecoma (ovary), C-cell adenoma (thyroid)   434   105   Adenocarcinoma (uterus)   434   105   Adenocarcinoma (uterus)   435   106   Mixed Müllerian neoplasm (uterus)   453   107   Adenocarcinoma (uterus)   455   107   Adenocarcinoma (uterus)   457   101   Squamous cell carcinoma (uterus)   475   94   Adenocarcinoma (uterus)   476   106   Hemangiopericytoma and polyps (clitoral gland), C-cell adenoma (thyroid)   476   106   Hemangiopericytoma and polyps (clitoral gland), C-cell adenoma (thyroid)   59   59   59   59   59   59   59   5			A	
107   Mixed Müllerigin neorlasm (uterus), strongal polyp (uterus), interval (orgry)   106   Follicular adegroma (thyroid), histiocytic corcoma (systemic)   390   106   Follicular adegroma (thyroid)   396   106   Adenocarcinoma (uterus)   423   107   Adenocarcinoma (uterus)   424   107   Follicular adegroma (thyroid), stromal polyp (uterus)   426   53   Adenocarcinoma (uterus)   426   53   Adenocarcinoma (uterus)   431   107   Papilloma (UB) sthecoma (ovary), C-cell adenoma (thyroid)   434   105   Adenocarcinoma (uterus)   434   105   Adenocarcinoma (uterus)   435   106   Mixed Müllerian neoplasm (uterus)   453   107   Adenocarcinoma (uterus)   455   107   Adenocarcinoma (uterus)   457   101   Squamous cell carcinoma (uterus)   475   94   Adenocarcinoma (uterus)   476   106   Hemangiopericytoma and polyps (clitoral gland), C-cell adenoma (thyroid)   476   106   Hemangiopericytoma and polyps (clitoral gland), C-cell adenoma (thyroid)   59   59   59   59   59   59   59   5	Group 3	369	107	Altenocarcinoma (uteras), adenocarcinoma (MG)
Internal (orary)    Semales   380    706    Follicular adegoma (thyroid), histocytic sarcoma (systemic)	<b>A</b>			
Semales  380 106 Follicular adenoma (thyroid), histocytic sprcoma (systemic)  390 106 Follicular carcinoma (thyroid), strong (systemic)  396 106 Adenocarcinoma (therus)  40000 ppm PRO 424 107 Follicular carcinoma (therus) with metastases in lung, liver, and pantereas, the coma (ovary)  425 106 Follicular carcinoma (thyroid), stromal polyp (uterus)  426 53 Adenocarcinoma (therus)  431 107 Papilloma (UB) the coma (ovary), C-cell adenoma (thyroid)  434 105 Sanamais cell carcinoma (uterus)  435 107 Sanamais cell carcinoma (uterus)  453 107 Sanamais cell carcinoma (uterus)  455 107 Adenocarcinoma (uterus), papilloma (UB)  457 101 Squamous cell carcinoma (clitoral gland)  465 105 Adenocarcinoma (uterus)  473 82 Adenocarcinoma (uterus)  474 106 Hemangiopericytoma and polyps (clitoral gland), C-cell adenoma (thyroid)  478 106 Squamous cell carcinoma (clitoral gland), stromal polyp (uterus), C-cell adenoma (thyroid)  570 Squamous cell carcinoma (clitoral gland), Squamous cell carcinoma (clitoral gland)	IPRO 1		~// ~	
380 106 Follicular adenoma (thyroid), histiocytic sgrcoma (systemic) 390 106 Follicular carcinoma (thyroid) 396 106 Adenocarcinoma (tterus) 396 106 Adenocarcinoma (tterus) 396 106 Adenocarcinoma (tterus) 397 Adenocarcinoma (tterus) 398 107 Adenocarcinoma (tterus) 399 107 Follicular adenoma (thyroid), stromal polyp (uterus) 390 106 Adenocarcinoma (tterus) 390 107 Adenocarcinoma (uterus) 391 107 Squamous cell carcinoma (clitoral gland) 392 Adenocarcinoma (uterus) 393 107 Adenocarcinoma (uterus) 394 107 Adenocarcinoma (uterus) 395 107 Adenocarcinoma (uterus) 396 107 Adenocarcinoma (uterus) 397 108 Adenocarcinoma (uterus) 398 108 108 Squamous cell carcinoma (clitoral gland), Stromal polyp (uterus), C-cell adenoma (thyroid) 398 Squamous cell carcinoma (uterus) 398 1080 1080 1080 1080 1080 1080 1080 10	Females			
390 106 Follicular carcinoma (thyroid) 396 106 Adefocarcinoma (uterus) 396 106 Adefocarcinoma (uterus) 396 107 Adenocurcinoma (uterus) 397 PRO 424 107 Follicular/carcinoma (thyroid), stromal polyp (uterus) 398 Follicular adenoma (thyroid), stromal polyp (uterus) 399 Follicular adenoma (thyroid), stromal polyp (uterus) 390 106 Follicular accinoma (thyroid), stromal polyp (uterus) 390 106 Follicular accinoma (thyroid), stromal polyp (uterus) 390 106 Follicular accinoma (uterus) 390 107 Follicular accinoma (uterus) 390 107 Follicular accinoma (uterus) with metastases in lung, in the polypolypolypolypolypolypolypolypolypoly		380	<b>706</b> «	Follicular adenoma (davroid), histiocytic sarcoma (systemic)
Group 4 0000 ppm PRO 424 107 Follicular carcinoma (uterus) with metastases in lung, liver, and partereas, the coma (ovary) PRO 425 106 Follicular adepoma (thyroid), stromal polyp (uterus) 426 431 107 Papilloma (UB) the coma (ovary), C-cell adenoma (thyroid) Mixed Mulerian neoplasm (uterus) with metastases in kidney, 6 vary and lung 436 116 Mixed Mulerian neoplasm (uterus) 453 107 Squamous cell carcinoma (uterus) 455 107 Adenocarcinoma (uterus), papilloma (UB) 457 101 Squamous cell carcinoma (clitoral gland) 465 473 82 Adenocarcinoma (uterus), follicular adenoma (thyroid) 475 94 Adenocarcinoma (uterus) 476 186 Hemangiopericytoma and polyps (clitoral gland), C-cell adenoma (thyroid)  8480 98 Squamous cell carcinoma (clitoral gland), stromal polyp (uterus), C-cell adenoma (thyroid)		390 ≪		
Adenocarcinoma (uterus) with metastases in lung, liver, and panceses, thecomic (ovary)  PRO  424 107 Follicular carcinoma (thyroid), stromal polyp (uterus)  Follicular adenoma (thyroid), stromal polyp (uterus)  425 106 Follicular adenoma (thyroid), stromal polyp (uterus)  426 53 Adenocarcinoma (uterus)  431 107 Papilloma (UB) thecoma (ovary), C-cell adenoma (thyroid)  Mixed Müllerian neoplasm (uterus) with metastases in kidney,  5vary and lung  433 107 Squamous cell arcinoma (uterus)  453 107 Adenocarcinoma (uterus), papilloma (UB)  455 107 Adenocarcinoma (uterus), papilloma (UB)  457 101 Squamous cell carcinoma (clitoral gland)  465 405 Adenocarcinoma (uterus)  473 82 Adenocarcinoma (uterus)  475 94 Adenocarcinoma (uterus)  476 106 Hemangiopericytoma and polyps (clitoral gland), C-cell adenoma (thyroid)  476 106 Squamous cell carcinoma (clitoral gland), stromal polyp (uterus), C-cell adenoma (thyroid)  80 Squamous cell carcinoma (uterus)			106	
PRO 424 107 Follicular carcinoma (thyroid), stromal polyp (uterus)  425 106 Follicular carcinoma (thyroid), stromal polyp (uterus)  426 53 Adengearcinoma (uterus)  431 107 Papilloma (UB) thecoma (ovary), C-cell adenoma (thyroid)  434 105 Ovary and lung  435 106 Mixed Mitterian neoplasm (uterus)  435 107 Adengearcinoma (uterus)  455 107 Adengearcinoma (uterus), papilloma (UB)  457 101 Squanous cell carcinoma (clitoral gland)  468 105 Adengearcinoma (uterus)  473 82 Adengearcinoma (uterus)  476 106 Hemangiopericytoma and polyps (clitoral gland), C-cell adenoma (thyroid)  478 106 Squamous cell carcinoma (clitoral gland), stromal polyp (uterus), C-cell adenoma (thyroid)  480 98 Squamous cell carcinoma (uterus)			4,0)	
PRO 424 107 Follicular carcinoma (thyroid), stromal polyp (uterus)  425 106 Follicular carcinoma (thyroid), stromal polyp (uterus)  426 53 Adengearcinoma (uterus)  431 107 Papilloma (UB) thecoma (ovary), C-cell adenoma (thyroid)  434 105 Ovary and lung  435 106 Mixed Mitterian neoplasm (uterus)  435 107 Adengearcinoma (uterus)  455 107 Adengearcinoma (uterus), papilloma (UB)  457 101 Squanous cell carcinoma (clitoral gland)  468 105 Adengearcinoma (uterus)  473 82 Adengearcinoma (uterus)  476 106 Hemangiopericytoma and polyps (clitoral gland), C-cell adenoma (thyroid)  478 106 Squamous cell carcinoma (clitoral gland), stromal polyp (uterus), C-cell adenoma (thyroid)  480 98 Squamous cell carcinoma (uterus)	Group 4	423	107 %	Adenocarcinoma (uterus) with medastases in lung, liver, and
Females 425 106 Follicular adenoma (hyroid), stromal polyp (uterus)  426 53 Adenocarcinoma (uterus)  431 107 Papilloma (UB) thecoma (ovary), C-cell adenoma (thyroid)  Mixed Müllerian neoplasm (uterus) with metastases in kidney,  ovary and lung  434 105 Mixed Müllerian neoplasm (uterus)  453 107 Squamous cell arcinoma (uterus)  455 107 Adenocarcinoma (uterus), papilloma (UB)  457 101 Squamous cell carcinoma (clitoral gland)  465 105 Adenocarcinoma (uterus)  473 82 Adenocarcinoma (uterus)  476 106 Hemangiopericytoma and polyps (clitoral gland), C-cell adenoma (thyroid)  478 106 Squamous cell carcinoma (clitoral gland), stromal polyp (uterus), C-cell adenoma (thyroid)  480 98 Squamous cell carcinoma (uterus)	20000 ppm %			
Females 425 106 Follicular adenoma (hyroid), stromal polyp (uterus)  426 53 Adenocarcinoma (uterus)  431 107 Papilloma (UB) thecoma (ovary), C-cell adenoma (thyroid)  Mixed Müllerian neoplasm (uterus) with metastases in kidney,  ovary and lung  434 105 Mixed Müllerian neoplasm (uterus)  453 107 Squamous cell arcinoma (uterus)  455 107 Adenocarcinoma (uterus), papilloma (UB)  457 101 Squamous cell carcinoma (clitoral gland)  465 105 Adenocarcinoma (uterus)  473 82 Adenocarcinoma (uterus)  476 106 Hemangiopericytoma and polyps (clitoral gland), C-cell adenoma (thyroid)  478 106 Squamous cell carcinoma (clitoral gland), stromal polyp (uterus), C-cell adenoma (thyroid)  480 98 Squamous cell carcinoma (uterus)	IPRO ?	424	107 ©	
431 107 Papilloma (UB) thecoma (ovary), C-cell adenoma (thyroid)  Affixed Müllerian neoplasm (uterus) with metastases in kidney,  ovary and lung  436 106 Mixed Müllerian neoplasm (uterus)  453 007 Squamous cell carcinoma (uterus)  455 107 Adenocarcinoma (uterus), papilloma (UB)  457 101 Squamous cell carcinoma (clitoral gland)  463 105 Adenocarcinoma (uterus)  473 82 Adenocarcinoma (uterus), follicular adenoma (thyroid)  475 94 Adenocarcinoma (uterus)  476 106 Hamangiopericytoma and polyps (clitoral gland), C-cell adenoma (thyroid)  500 Squamous cell carcinoma (clitoral gland), stromal polyp (uterus), C-cell adenoma (thyroid)  501 Squamous cell carcinoma (uterus)	Females >	425	4106 ×	
431 107 Papilloma (UB) thecoma (ovary), C-cell adenoma (thyroid)  Affixed Müllerian neoplasm (uterus) with metastases in kidney,  ovary and lung  436 106 Mixed Müllerian neoplasm (uterus)  453 007 Squamous cell carcinoma (uterus)  455 107 Adenocarcinoma (uterus), papilloma (UB)  457 101 Squamous cell carcinoma (clitoral gland)  463 105 Adenocarcinoma (uterus)  473 82 Adenocarcinoma (uterus), follicular adenoma (thyroid)  475 94 Adenocarcinoma (uterus)  476 106 Hamangiopericytoma and polyps (clitoral gland), C-cell adenoma (thyroid)  500 Squamous cell carcinoma (clitoral gland), stromal polyp (uterus), C-cell adenoma (thyroid)  501 Squamous cell carcinoma (uterus)		426 . 0	53 🔊	
Afted Millerian newplasm (uterus) with metastases in kidney, jovary and lung  436 116 Missa Millerian neoplasm (uterus)  453 007 Squamous cell carcinoma (uterus)  455 107 Adenocarcinoma (uterus), papilloma (UB)  457 101 Squamous cell carcinoma (clitoral gland)  465 405 Adenocarcinoma (uterus)  473 82 Adenocarcinoma (uterus), follicular adenoma (thyroid)  475 94 Adenocarcinoma (uterus)  476 106 Hemangiopericytoma and polyps (clitoral gland), C-cell âdenoma (thyroid)  598 Squamous cell carcinoma (uterus)  480 98 Squamous cell carcinoma (uterus)	,	4310	107	Papilloma (UB) thecoma (ovary), C-cell adenoma (thyroid)
436 DO7 Squamous cell carcinoma (uterus)  453 DO7 Squamous cell carcinoma (uterus)  455 DO7 Adenocarcinoma (uterus), papilloma (UB)  457 DO1 Squamous Cell carcinoma (clitoral gland)  465 DO5 Adenocarcinoma (uterus)  473 B2 Adenocarcinoma (uterus), follicular adenoma (thyroid)  475 DO1 Adenocarcinoma (uterus)  476 DO1 Adenocarcinoma (uterus)  478 DO2 Adenocarcinoma (uterus)  478 DO2 Adenocarcinoma (clitoral gland), C-cell adenoma (thyroid)  50 Squamous cell carcinoma (clitoral gland), stromal polyp (uterus), C-cell adenoma (thyroid)  51 DO2 Squamous cell carcinoma (uterus)				Mixed Müllerian neoplasm (uterus) with metastases in kidney,
436 DO7 Squamous cell carcinoma (uterus)  453 DO7 Squamous cell carcinoma (uterus)  455 DO7 Squamous cell carcinoma (uterus), papilloma (UB)  457 DO1 Squamous cell carcinoma (clitoral gland)  465 DOS Adenocarcinoma (uterus)  473 BO Adenocarcinoma (uterus), follicular adenoma (thyroid)  475 94 Adenocarcinoma (uterus)  476 DOS Adenocarcinoma (uterus)  478 DOS Adenocarcinoma (uterus)  478 DOS Squamous cell carcinoma (clitoral gland), Stromal polyp (uterus), C-cell adenoma (thyroid)  480 DOS Squamous cell carcinoma (uterus)		434 Q	105\$	
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457 101 Squamous Cell carcinoma (clitoral gland)  465 405 Adenocarcinoma (uterus)  473 82 Adenocarcinoma (uterus), follicular adenoma (thyroid)  475 94 Adenocarcinoma (uterus)  476 106 Hemangiopericytoma and polyps (clitoral gland), C-cell adenoma (thyroid)  478 106 Squamous cell carcinoma (clitoral gland), stromal polyp (uterus), C-cell adenoma (thyroid)  480 98 Squamous cell carcinoma (uterus)				
465 Agenocareinoma (uterus)  473 82 Adenocareinoma (uterus), follicular adenoma (thyroid)  475 94 Adenocarcinoma (uterus)  476 106 Hemangiopericytoma and polyps (clitoral gland), C-cell adenoma (thyroid)  5 Squamous cell carcinoma (clitoral gland), stromal polyp (uterus), C-cell adenoma (thyroid)  5 Squamous cell carcinoma (uterus)		455	107	
473 82 Adenogarcinoma (uterus), follicular adenoma (thyroid) 475 94 Adenogarcinoma (uterus)  476 106 Hemangiopericytoma and polyps (clitoral gland), C-cell adenoma (thyroid)  50 Squamous cell carcinoma (clitoral gland), stromal polyp (uterus), C-cell adenoma (thyroid)  51 Squamous cell carcinoma (uterus)		457	101 ~	Squañous Cell carcinoma (clitoral gland)
Adenocarcinoma (uterus)  476  476  Hemangiopericytoma and polyps (clitoral gland), C-cell adenoma (thyroid)  Squamous cell carcinoma (clitoral gland), stromal polyp (uterus), C-cell adenoma (thyroid)  Squamous cell carcinoma (uterus)		465		
476 106 Hemangiopericytoma and polyps (clitoral gland), C-cell adenoma (thyroid)  Squamous cell carcinoma (clitoral gland), stromal polyp (uterus), C-cell adenoma (thyroid)  486 98 Squamous cell carcinoma (uterus)	<b>y</b>	473		Adenogarcinoma (uterus), follicular adenoma (thyroid)
476 106 Hemangiopericytoma and polyps (clitoral gland), C-cell adenoma (thyroid)  Squamous cell carcinoma (clitoral gland), stromal polyp (uterus), C-cell adenoma (thyroid)  486 98 Squamous cell carcinoma (uterus)		√475 « N	94	AdenQcarcinoma (uterus)
Agenoma (thyroid) Squamous cell carcinoma (clitoral gland), stromal polyp (uterus), C-cell adenoma (thyroid) Squamous cell carcinoma (uterus)		476	106	Hemangiopericytoma and polyps (clitoral gland), C-cell
(uterus), C-cell adenoma (thyroid)  486			Ö 🗶	adenoma (thyroid)
4800 298 Squamous cell carcinoma (uterus)		<b>1</b> 8 .	1060	Squamous cell carcinoma (clitoral gland), stromal polyp
Squamous cell carcinoma (uterus)			23	1
		4800	<b>39.8</b>	
ILN, megenteric lymph node; MG, mammary gland; UB; urinary bladder		(		
	MLN, mesenteri	c lymph ne	ode; MG, m	ammary gland; UB; urinary bladder



(Submission for Annex I Renewal)

Table 5.5.4.6-3. Neoplasms and Early<sup>a</sup> Deaths

		Weeks	Neoplasm Diagnosis and
Group ID	Rat No.	on Study	Location (tissue)
4. 20000 ppm <sup>b</sup> , female	432	50	Adenoma (pituitary)  Malignant astrocytoma (brain)
2. 500 ppm, male	148	50	Malignant astroeytoma (brajh) 🧳 🥳
4. 20000 ppm, male	203	53	Osteosarcom@(jawbone) & \$ \$
4. 20000 ppm, female	426	53	Malignant astroeytoma (brajn)  Osteosarcoma (jawbone)  Adenocarcinoma (uterus)
4. 20000 ppm, male	231	56	C-cell adenoma (thyroid)
2. 500 ppm, female	342	60	Adenoma (pituitary)
2. 500 ppm, male	65	60 4 6	¦ Benigh grandlar çe¶ neo@asm (brain)√
2. 500 ppm, male	113	610	Fibrosarcoma (stan and other sites)
3. 5000 ppm, female	414	1 0¥ (?>≥	Malignant Schwannoma (skot and other stes)
2. 500 ppm, female	314	85 × ×	Liposarcoma (skin and other sites) &
2. 500 ppm, female	315 © 474 °	″ 65ພື≫ໍ ພື	Aderroma Gituitary) S S
4. 20000 ppm, female	474	65/	Adersoma (pituitary) S S S S S S S S S S S S S S S S S S S
3. 5000 ppm, female	391	1 68 ·	Adenoma (pituitary) S V
3. 5000 ppm, female	300	72	Adefoma (pituitary)
2. 500 ppm, female	<b>3333</b> ~	72. "0"	Adenome Spituitary)
3. 5000 ppm, male	40 &		Eibrohistiosarcomą (systemic)
, OQ			
a, During the first 18 mont	hs 42/3rds of	f stud duração	on); & IPRO.

JIII. F DISCUSSION

In male rate treated with lower (~20%) dose of iprovalicary compared to females, at 20000 ppm, 3 presented with osteosarcomas (Table 5.5.4.6-2). One animal (No. 203) had an osteosarcoma in the lower faw, observed at 53 weeks, which contributed to the animal's demise due to its location, with an RF of 28. The second (No. 187, in the femur/knee joint with lung metastases) was observed at 89 weeks (PCNA negative), and the metastases contributed to its demise. The third (No. 220 in the femur with lung metastases) was observed at 94 weeks and had an RF of 38 (Appendix 1 from study report). These neoplasms occurred only in high dose males, and not in high dose females, which received 20% higher dosing exposure of iprovalicars for 2 years. A plausible explanation is that these osteosarcomas represent background reoplasms which are extremely rare and which occur at variable intervals, some around one year and some later. This rationale also may be applied to the chondrosarcoma in the nasal cavity (No. 199 killed at 101 weeks) which was PCNA negative. This is also a very rare tumor In addition, cartilage is not routinely sampled, which is why information on it is sparse at all data bases.

on it is sparse in all data bases ( , 1994; , 1994; , 1998; , 1999; , 1999; , 2003).

Chemically induced osteosarcomas were recently described in rats at all dose levels, and were first detected around 20 months of exposure with subcutaneous injections of recombinant human parathyroid hormone (1334) ( et al., 2002; et al., 2005). These osteosarcomas were associated with extensive clinical and morphometric changes throughout the 2 year study, which bear no resemblance to the present findings.

The occurrence of malignant uterine neoplasms, especially the rare mixed Müllerian neoplasms, was associated with the mid dose (5000 ppm, 1/48) and high dose (20000 ppm, 2/50) of iprovalicarb,

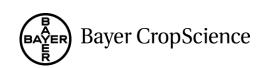


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all 3 cases observed at the terminal sacrifice (Table 2). This rare background (2%) malignant neoplasm has only recently been adequately investigated. It occurs later in life in rats, i.e. #23-25 months of age ( , 1990) and metastasizes and displayes neighboring tissue and organs such as intestines and UB. In humans these tumors occur in on and Christopherson, 1972; Auerbach & al, 1988). The RPof the vounger patients ( non neoplastic uterine tissue was 39.7 for rat No. 379\$5.1 for rat No. 434, and 66.2 for rat No. 436. Within the neoplasms the RFs were 80, 80, and 90, respectively. Thus, the mean group RF of the non neoplastic tissue of all 3 dose levels was significantly increased (Table \$5.4.6-Q). Yes these neoplasms occurred only in groups 3 and 4. Therefore, in all probability, these neoplasms reflect background neoplasms which occur later in life at low incidence, and are indirectly censored and diagnosed as sarcomas because of their anaplastic morphology. The relevance of these tumors to human Müllerian neoplasms is questionable Kaspareit-Rittinghausen and Deerberg, 1990) Thyroid follicular cell combined (benigh and indignant) neoplasia was significantly increased as a positive trend in high dose females. These peoplasms are incommon in Wistas atts, but are known to occur late in life (RITA, 1999; , 2003). The group RF mean of the nonneoplatic follicular thyroid tissue was comparable across all Study groups Flable 5.5.4.6-1). Even the individual RF value of nonneoplastic areas was comparable to control values (Table 5.5.4.6-1), whereas the RF within the follicular corcing das was 80-90 (No 390, group 3 at 106 weeks, or No. 424, group 4 at 107 weeks Appendix 1 from study report). Thus, all the follicular neoplasms are considered to reflect background neoplasms rather than IPRO-induced neoplasms. There was an increase in the incidence, although not statistically significant of benign transitional (urothelial) cell papiliomas of the TB ingwo high dose female rats Nos. 431 and 455, both at 107 weeks) (Table 5.5,26-2). The individual RF of each of these neaplasms was high both within and outside the neoplasm (Appendix 1 from study report). In addition, the group mean RF was significantly increased compared to controls (Table 5.5.4.64). This increase in RF cannot be explained directly, but it may be associated with provalearb which is excreted in the urine. Nevertheless, the relevance to bumans of these 2 benign neoplasms is questionable because there are major intraluminal differences between rais and humons. Thus, it is unlikely that the production of bladder neoptasia in rats by a jumgenotoxic mode of action would be predictive of cancer hazard to humans et 🔊, 199🔊 et al, 1996; al. 1999. et al\$2004)\$ Finally, in contrast to the increases in reoplasia in the 4 tissues described and discussed above, there was avery significant decrease in a major endocrine responsive tissue of importance for human relevance, namely in the mammar gland (MG) in females. The incidence of MG adenggarcinoma was 6/50 in controls, 329 in low dose, 2/48 in mid dose and 0/50 in high dose females. This is a background neoplasm which occurs late in life ( and and this reduction indicates that LPRO possesses a propensity to down regulate endocrine (epigenetic) modifiers operational in this tissue and, by extension, in uterine tissues.

#### IV CONCLUSION

Iprovalicarly's not genotoxic and its structure does not contain any structural alerts. There was no evidence of iprovalicarly induced carcinogenicity in male mice (up to 1567 mg/kg/day) or in female mice (up to 2544 mg/kg/day). Iprovalicarly did not induce carcinogenicity in male rats (up to 1110 mg/kg/day) or female rats (up to 1380 mg/kg/day). The appearance of increases at high doses of osteosarcomas/osteochondromas in males and Müllerian uterine, urinaru bladder papillomas and



abstanceon

salicarb. The iprovalicarb. The ipro watern, watern The state of the s



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Title: Expert panel consensus report in assessing the weight of evidence of iprovalicarb carcinogenicity in rats and mice.

Report No: 010512

Document No: M-422060-01-1

Guidelines: Not specified
GLP/GEP: no

Executive summary

Iprovalicarb was administered in the feed to groups of 50 Wistar (HsdWINWU) rats/sex/dose level for 24 months at dose levels of 0, 500, 5000, or 20000 ppm (equivalent to 0, 26, 263, or 5110 mg/kg/day in males and 0, 32, 326, or 1380 mg/kg/day in femalogy This Chronic toxicity and carcinogas. Chronic toxicity and carcinogenicity investigations in Wistar ros (athelinistration by the feed over 24 months)" was reported on February 4, 1998. 1998, M -001236-01-1@ee section 5.5.2).

In order to monitor the rate of profferation in certain larger dissues, profferating cell Auclear antigen (PCNA) immunohistochemical stain was performed on sected dissues from archival material (blocks) from the 24 nonth sacrifices. The PCNS results have been reported and the weight-of-evidence of all of the significant rap neoptistic fillings has been assessed (see document M-267627-01-1). This exper panel consensus report confirms that the neoptisms observed in rats following a 2-year treatment-period with providicarbage nativelevant for aumaus. In conclusion, iprovalicarb is clearly confidered as a non-carsinogenic compound. weight-of-evidence of all of the significant rat neoptastic findings has been as ossed (see document M-267627-01-1). This expery canel consensus report confirms that the neoplasms observed in rats



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#### **KIIA 5.6 - Reproductive toxicity**

**Table 5.6-1: Summary of reproductive toxicity studies** 

(Submission for An	nex i kene	ewai)				
KIIA 5.6 - Reproductive toxicity  Summary of reproductive toxicity studies  Table 5.6-1: Summary of reproductive toxicity studies						
Type of study	Species	Dose range	NOAER (mg/kg/day)			
2-generation, oral	rat	0-100-2000-20000 ppm				
teratogenicity, oral	rat	0-100, 300,1200 mg/kg/day	maternal: 1000 mg/kg 496; 24668 developmental: 1000 mg/kg 5			
teratogenicity, oral	rabbit	0-100 300 40000 G	material: 1000 mg/kg ,1995; 24179 bw/day developmental: 1000 mg/kg ,4995; 24179			

Iprovalicarb is not a reproductive toxin. No specific influence on either the reproduction performance of parents or the development of the young was detected. The lowest relevant reproduction NOAEL was 2,000 ppm (146.3 mg/kg bw/d) based on reduced pup weight at parentally toxic doses. The developmental NOABO in both rat and rabbit was greater than 1,000 mg/ kg bw/d; No effects were seen up to and including the limit dose.

No further reproductive toxicity studies on iprovalicarb were required or generated.

Please refer to point IA 5.6 (EU point 5.6) of the EU dossier submitted in the context of Annex I listing and the relevant data submitted during the EU evaluation process according to the "Review Report for Iprovalicars (SANO)/2034/2000 FINAL, from July, 2002)".

#### KIIA 5.6 Two generation reproductive to xicity in the rat

Report: 997;M-001052-01 Title: - Tw@generation study in Wistar-rats

Report No: Document 1

USPEPA \$83-4; OECD 416; JMAFF (1985);none Guidelines

# eparate male and female studies

Not required according to Directive 91/414/EEC.



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#### KIIA 5.6.3 - Three segment designs

Not required according to Directive 91/414/EEC.

#### KIIA 5.6.4 - Dominant lethal assay for the male fertility

Not required according to Directive 91/414/EEC.

# KIIA 5.6.5 - Cross-matings of treated males with untreated females and vice versa Not required according to Directive 91/414/EEC. KIIA 5.6.6 - Effects on spermatogenesis Not required according to Directive 91/414/EEC. KIIA 5.6.7 - Effects on coggression

#### KIIA 5.6.7 - Effects on oogenesis

# KIIA 5.6.8 - Sperm motility, mobility and morphology Not required according to Directive 2014

#### KIIA 5.6.9 - Investigation of hormonal activ

Not required according to Directive 91

#### KIIA 5.6.10 - Teratogenicity test by

1996 M-000244-01 Report:

SZX 1922 - Developmental toxicity study in this after oral administration Title:

Report No:

Document No. M 00044 01

Guidelines: eviation not specified

GLP/GEP:

#### oute in the rabbit KIIA 5.6.11

Report: 1995@M-000290-01

ZX 0722 - Developmental toxicity study in rabbits after oral administration Title:

Report No:

M-000290-01-1 Document No:

Deviation not specified **Guidelines:** 

GLP/GEP:

Neuropoxicity was not observed in rats under acute up to 2,000 mg/kg and sub-chronic (90-day) exposure up to 20,000 ppiny and more generally in the entire toxicology data package. A delayed neurotoxicity was not required.

Please refer to point IIA 5.7 (EU point 5.7) of the EU dossier submitted in the context of Annex I listing and the relevant data submitted during the EU evaluation process according to the "Review Report for Iprovalicarb (SANCO/2034/2000-FINAL, from July, 2002)".



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#### KIIA 5.7.1 - Acute neurotoxicity - rat

1997;M-000394-04 Report:

SZX 0722 - Acute oral neurotoxicity seening study Title:

Report No: 26021

M-000394-01-1 Document No:

**Guidelines: Deviation not specified** 

**GLP/GEP:** 

#### KIIA 5.7.2 - Delayed neurotoxicity following acut exposure

As iprovalicarb is a fungicide with a completely different molecular structure than the known delayed-neurotoxic substances, testing is not necessary.

#### KIIA 5.7.3 - 28-day delayed neurotoxicity

As iprovalicarb is a fungicide with a completely different molecular neurotoxic substances, testing is not neces

#### KIIA 5.7.4 - Subchronic neurotoxici

1990 M-001098-01 Report:

XX 0722 (common name (proposed): Fencaranid) - Subchronic neurotoxicity screening Title:

study @ WistaPrats (Murteen Week a ministration in the diet)

Report No:

Document No. MKØ01098 Guidelines: viat**ion** not specified

GLP/GEP:

#### KIIA 5.7.5 - Postnatal developmental neurotoxicat

Not required according to Directive 9

#### KIIA 5.8 - Toxicity studies on metabolite

An azute oral rat toxicity study a rabbit skar irritation, a skin sensitization assay (Magnus Kligmann) and an Ames test have been carried out with a plant metabolite of iprovalicarb, p-methylphenethylaming (M10 PMP4). These studies showed that PMPA is more acutely toxic than the parent compound  $(D_{50})$  range from 300-500 pg/kg). It is corrosive to the rabbit skin but did not show any skin sensifizing cotential in the guinea pig. It is also devoid of any mutagenic potential in bacteria. This metabolite was found in at ADME studies. Therefore its toxicity profile is covered by the studies performed with the parent compound and thus considered as no toxicologically relevant.

Please refer to point IIA 5.8 (EU point 5.8) of the EU dossier submitted in the context of Annex I listing and the relevant data submitted during the EU evaluation process according to the "Review Report for Iprovalicarb (SANCO/2034/2000-FINAL, from July, 2002)".



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Report:

p-Methyl-phenethylamine (Metabolite of SZX 0722) - Study for acute oral toxicity for rats Title:

Report No:

Document No:

**Guidelines: Deviation not specified** 

**GLP/GEP:** yes

Report:

Acute skin irritation test (patch test) of alpha 4 Title:

Report No: R6646

M-000423-01-1 Document No: **Guidelines:** Deviation not specifie

**GLP/GEP:** yes

Report:

alpha-4-Dimethylbenzylamine - Study for the skin ensitization effect in guinea pigs Title:

(guinea pig, maximization est according Magnus

25648 Report No:

M-000483-01-1 Document No:

**Guidelines:** Deviation not specified

GLP/GEP:

1996;M&00513**&**01 Report:

;1996;M 600513 01

Methylephenethylamine Salphonella/psicrosome test thate incorporation and reincubation method (4894)

M-000513-01-1

Eviation not specified

Mes Title:

preincubation method 🕜

Report No:

Document No M-000513-001-1

Guidelines:

GLP/GKP:

#### KIIA 5.9 - Medical and clinical data

Please refer to point IA 5.9 EU point 5.9 of the PU dossier submitted in the context of Annex I listing and the relevant days submitted during the EU coaluation process according to the "Review Report for provalicarb (SANCO/2034/2000 FINAL from July, 2002)".

#### KIIA 5.9.1 - Report on medical surveillance on manufacturing plant personnel

No data are available

### KIIA 5.9.2 - Report on climical cases and poisoning incidents

With regard to intervalicate no cases of human poisoning have been reported up to mid of January

# KIIA 5.9.3 Observations on general population exposure & epidemiological studies

Up to now there is no known exposure of the general population to iprovalicarb. No epidemiological studies bave been performed on iprovalicarb.



 $\label{lem:condition} \textbf{Document M} \, / \, \textbf{Tier 2, KIIA 5 Toxicological and Toxicokinetic Studies on the Active Substance on Iprovalicarb}$ 

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#### KIIA 5.9.4 - Clinical signs and symptoms of poisoning and details of clinical tests

Compound-specific poisoning signs in man after oral ingestion are not expected. The analytical demonstration of parent compound or metabolites in blood, urine or gastrointestinal contents is required for an exact diagnosis of poisoning.

#### KIIA 5.9.5 - First aid measures

- Remove patient from exposure / terminate exposure
- Thorough skin deciontamination with copious amounts of water and soap, if available with polyethylenglycol 300 followed by water.
- Flushing of the eyes with lukewarm water for 15 minutes
- Induction of vomiting does not seem to be required in regard of the low toxicity. It should only be considered if a large amount has been swallowed, if the ingestion was less than one hour ago, and of the patient is fully conscious?

#### KIIA 5.9.6 - Therapeutic regimes

- As there is no antidote available for iprovalicarb, treatment has to be symptomatic and supportive.
- Gastric lavage toes not seem to be required in regard of the low toxicity of the compound.
- The application of activated charcoal and sodium sulphate (or other carthartic) might be considered in significant ingestions.

# KIIA 5.9.7 - Expected effects & duration of poisoning as a function of exposure

No cases of human poisoning with providicarb are known. In an acute acute oral toxicity study in rats the limit dose was tolerated by the animals without any clinical signs or symptoms. After dermal application of 5000 mg/kg bw iprovalicarb to rats no systemic nor local signs were noted. This fits to the overall very low acute oral toxicity of iprovalicarb. Due to these facts poisoning via dermal exposure with iprovalicarb is also not expected in man, This applies also for invalative exposure, since acute inhalation of 4977 mg iprovalicarb/m<sup>3</sup> as dust for A hours was tolerated by rats without any clinical signs and symptoms.

#### KIIA 5.9%- Effects & ouration of poisoning as a function of time

No cases of human poisoning with iprovalicarb are known and in most of the acute toxicity studies the limit dose was tolerated by the animals without any clinical signs or symptoms.

# KIIA 5.99 - Dermal penetration

Please refer to thetier 2 summary, Annex III, section 3, point 7 (IIIA1.7.6) The dermal penetration studies on iprovalicarb (IPV) were carried out after the first inclusion of iprovalicarb in which a



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10% default value was used. These studies were realized in 2003 using a WG formulation 384 IPV/kg) comparable to the current representative WG formulation (90 g IPV/kg). Two dose levels were tested: a concentrate formulation (9.43 g IPV/L formulation) and a diluted formulation corresponding to the application phase (0.12 g IPV/L formulation). Taking into account the facts that generally the higher the dilution the higher the dermal penetration, these concentrations cover those encountered with the GAPs of the new representative formulation iprovaligarb Holpet WG 65.3 (granulate at 90 g IPV/kg for mixing loading and a diluted spray at 216 g IPV/400 L water 0.54 g IPV/L).

For folpet the notifier refers to EFSA endpoints (EFSA Scientific Report (2006) Conclusion of the peer review of folpet).

KIIA 5.10 - Other/special studies

KIIA 5.11 - Summary of mammahan toxicity and overall evaluation

Similar to the whole dossier also this summary on mammalian toxicity and overall evaluation consists of old paragraphs, which were originally submitted for Annex I inclusion, and new parts. For discrimination the new parts are written in bold italic letters. The old paragraphs were adopted unclunged as for as possible In areas in which the assessment changed in the old lext, the changed wording is also printed in bold italic letters.

Iprovalicarb is readily absorbed from the GIT and rapidly excreted. On average, more than or equal to 98% of the recovered adioactivity was excreted and urine and faeces within 48 hours. The major rouge of elimination was faecal for male rats and about equally faecal and renal for females. Metabolism was extensive, with >80% of the administered dose being metabolised within 48 bours. There was no evidence of bio-accumulation, with the intensity of radioactivity in almost all organs and tissues (except GDF, liver and renal cortex) being below the limit of detection after 8 hours. <0.5% of the oral dose remained in the body (excluding the GIT) at sacrifice (48 and/272 hours post-dosing). Only the liver retained a measurable amount of the dose at sacrifice, reaching 0.2% of the dose at most. The primary metabolite was the Grastereomer pair of Iprovalicarb-carboxylis acid. The isomer ratio SS:SR was shifted in favour of the SR isomer in the urine of ras which received the high dose (20000 ppm) in the additional subchronic study

#### Acute Toxicit

The compound has a very low acute toxicity when tested orally, dermally or by the inhalation route. It is not it it intant to the skin or eyes, and has no skin sensitising properties.

After repeated and administration of high doses of SZX 0722, no evidence of cumulative toxicity was seen in rats, mice or dogs. A daily dose of approximately 1980 mg/kg bw was Colerated in a 4-week feeding study by rats without increased mortality. In dogs, survival rates were unaffected up to and including approximately 1322 mg/kg bw over a 28 day treatment period.



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In all three species investigated, the liver was identified as the main target organ, and the dog was the most sensitive species.

In the 13-week dog study, microsomal liver enzyme induction was observed at 250 ppm, the lowest dietary concentration tested (9.1 mg/kg/bw/day), accompanied by elevated liver weights, macroscopic (discoloration, distinct lobalation) and incroscopic (increase incidence of cytoplasmic changes) findings which are considered to represent (about nonor) were considered to represent (about nonor) effects. At higher doses, additional effects occurred that are expressions of a moderate to marked liver toxicity: elevated serum liver enzymes (AP as the most sensitive parameter), decreased protein levels, and histopathological alterations like hepatocellular hypertrophy, cytoplasmic vacuolation, focal necroses, single cell necroses, acon-containing pigments in hepatocytes and Kupffer cells, multilantellar bodies, and granulocytic infiltration. gallbladder was also affected at the high dose of 50000 ppm; the aphormal contents seem at necropsy correlated microscopically with opdemas and diation of the lymphatic vessels. Dogs in the two high doses were in a poor physical condition and a poor nutrifional state; one animal had to be killed in a moribund condition. Secondary effects resulting from agnificant body weight losses were noted at necropsy and during histopathological evaluation such as atrophy of the fatty tissing of the subculis and longue or retainded growth male sexual organs. A NOAEL could not be established, based on liver changes observed at the lowest dietary concentration level

In the 13-week rat study, there was a slight indication of a treatment related effect on liver function beginning at 5000 ppm (373 mg/kg bw/day) which was associated with increased liver weights. The effects were all small and there were no histopathological findings to back them up. At higher doses, AP-activities were elevated and pale livers were noted at necropsy. Indications were of effects produced by a weak inducer of microsomal enzymes with attendant slight effects on hind metabolism. Results from the recovery groups have shown the reversibility of the liver effects after cossation of compound administration.

Effects on the mouse after dietary exposure to 7000 ppm (1724 mg/kg bw) led to liver changes which were adaptive responses to increased metabolism (increased relative liver weights and slightly increased cholesterol levels). There were no macroscopic or histopathological liver changes observed. At the laghest dose of 14000 ppm, lower kidney weights in males and a trendo alterations in red blood count parameters were noted. However, no histopathological findings in support were observed.

provalicarb was administered to dogs whethe diet over 53 weeks. While no adverse effects were observed in temales at the lowest dose administered (80 ppm, 2.62 mg/kg bw/day), the liver effects observed in males (increased ALAT and AP serum levels, microsomal enzyme induction and markedly increased liver weight in 2 of 4 dogs) corresponded to the more severe effects observed at higher dose levels. Therefore, an overall NOAEL could not be established. Marked hipatotocicity was found at 800 ppm and above: elevated ASAT, ALAT and AP admitted cellular hypertrophy, periportal fatty changes and iron storage changes. At 8000 ppm, the GLDH and GGT activities were also increased, the plasma albumin levels depressed and there was an increase in both the absolute and relative liver weights. The liver size was entarged, and obvious lobulation and discolouration was observed at necropsy. Focal pecroses, an increased incidence of bi-nucleated hepatocytes were seen (in addition to the changes seen at 800 ppm) during the histopathological examination. As was apparent in the 13-week study, effects on the gallbladder were also noted (adhesive mucus, formation of pseudoglands in the gallbladder wall) at 800 ppm and above. A slight increase in



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poikilocytosis was seen in females at 800 ppm and above, and in high dose (8000 ppm) males A marginal increase in normoblasts occurred in high dose females.

Hence, a NOAEL could not be established from the 53-week dog study, as increased liver weight and liver enzyme induction occurred at all dose levels tested. A supplemental a week study was carried out to investigate liver enzyme induction in a lower dose range, and so obtain a NOEL with regard to N-demethylase, O-demethylase and sytochrome P450 specifically. This data provided us with a NOEL of 20 ppm (0.77 mg/kg bw/day for males/females). The 80 ppm data from both the chronic study and the supplementary study were in agreement. No cumulative effect, was seen, and the effects were seen to be reversible. In contrast to the 53-week dog study, there were no increases in serum AP or ALAT activities and no liver weight increases after 4 weeks exposure at dose levels up to 80 ppm, indicating that prolonged treatment is necessary to provoke such effects.

In a subacute inhalation toxicity study on rats the maximum recharged feasible concentration of 504.4 mg/m³ air was tolerated without any compound-related effect on the parameters investigated.

In a subacute dermal toxicity study, rabbits receiving the limit dose of 1000 mg/kg bw did not reveal any local skin flydings or signs of systemic toxicity.

#### **Genotoxicity**:

The genotoxic potential of Iprovalicarb was investigated in bacteria and mammalian cells using various in vitro and in vivo assays. None of the tests revealed any evidence of mutagenic of genotoxic activity. The substance did not induce point mutations, DNA damage or chromosomal aberrations. In addition, an organ specific 32P postlabelling assay in vivo in the uterns and arinary bladder epithelium of female rate was conducted to investigate DNA-adduct formation by Iprovalicary treatment. No genotoxic potential identified for this substance in this study either.

# Long-term toxicity and carcin genicity:

Long term studies were conducted with rats and mice. In mice, administration of Iprovalicarb over 105 weeks resulted in slight increases in body weight-related food and water intakes in males of the high door group (7000 ppm) while body weight was slightly depressed. There was algority developed in both sexes at 1400 ppm and above, indicating a minor reduction in kidney function, which would explain the observed increases in water intake of high-dose animals. There was also a reduction in absolute and relative kidney weights which might correlate with the marked decrease in the incidence of tubular vacuolisation in the males of these dose groups. No such effect was seen in any of the females.

Elevated triglyceride levels and an associated increase in the incidence of 'cellular fatty changes' in the lives of high dose males was observed. However, more detailed descriptions of the lesions point more likely to these being degenerative cell changes.

In the chronic rat study, the effects on body weights in males at 20000 ppm and females at 5000 ppm difference to controls: maximally 8% and 7% respectively) were relatively small and not significant at most time points, and can be considered to be borderline effects.

Changes in liver morphology and function, beginning at 5000 ppm, were predominantly noted in females. They can be considered to be an adaptive response due to an inducing effect on microsomal enzymes with corresponding slight effects on lipid metabolism.



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There was an increase in malignant mixed Muellerian tumours in the oteri of female created at 5000 and 20000 ppm (1/50 and 2/50, respectively, as against 0/50 in controls). So documented cases of the induction of such tumours have been found in the literature. As a spontaneous occurrence, the finding was reported for the first time in 1990. Spontaneous incidences per study varied between 0% and 2%. However, in a supplementary 32-postlabelling assay performed with uterine tissue after treatment of rats with provoucarb gave no evidence of a DNA-adduct forming potential of the test substance (1998).

The incidence of uterine adenocarcinomas was slightly increased at 20000 pm (12%). However, there was no significant trend shown here and was within the distorical control data ranges given.

In two females at 20000 ppm, squamous celt carcinoma of the chtoral stand was observed. Clitoral glands are not routinely investigated, but only when some macroscopic changes are visible. Historical data are also rare and for these reasons, it is difficult to assess the toxicological significance of this finding. However, it should be noted that this was only seen at the very high dose of 20000 ppm.

Benign neoplastic lesions of the urinary pladder (transitional cell papilloms) were observed in two females at 20,000 ppm. No pre-neoplastic lesions of the uroffelium were observed. The incidence in this study (4%) is slightly above the range of historical values, which could indicate a treatment related effect. However, in a supplementary, \*2P-postlabelling assay performed with utinary bradder epithelium after treatment of rats with Iprovalicarb gave no evidence of a pNA-adduct forming potential of the test substance (1998). Therefore, there is no evidence of a primary carcinogenic potential of the test substance.

Malignant tumours of the skeletal system were seen in 20000 ppm males. There were 3 incidences of osteosarcomas (two of the femur and one of the lower jaw). Historical data showed incidences of spontaneously occurring osteosarcomas in the range of 0 - 2%. In addition, one chondrosarcoma of the nasal cauty was diagnosed. Historical data on chondrosarcoma are not available.

There was a statistically significant positive wend in the incidence of follicular cell adenomas (2000 and 2000 ppro groups). However, other lesions indicating an effect on the thyroid gland such as hypertrophy have not been reported in this study or in other toxicity studies with the test substance, and pre-noplastic lesions in the present study were seen in similar incidences in all groups. Additionally, incidences of the follicular cell neoplasms are covered by the cange of historical data and can therefore be treated as spontaneous events. No effect was seen in the thyroids of male.

Curiously, in high door group animals, slightly decreased incidences of non-neoplastic and/or tumous lesions were found for the female mammary gland (decreased diffuse hyperplasia, adepocarcinoma) and for the pituitary gland (decreased hyperplasia of the pars distalis).

conclusion, the histopathological findings indicate a shift in the incidences of certain tumours at 5000 ppm (mixed Muellerian uterine tumours), and at 20000 ppm (squamous cell carcinomas of the clitoral gland, transitional cell papillomas of the urinary bladder in females,



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and skeletal system tumours in males). None of these tumour types was seen in control animals, and are only rarely observed in long-term studies. However, the increased incidence was only minimal and close to the historical control range. In view of the decreased incidences of mammary and pituitary gland lesions in combination with increased incidences of urogenital tumours in females of the high-dose group, it appears possible that the aimour induction is preceded by disruption of hormone regulation at high dose levels.

It should be noted that the animals concerned were all subjected to extremely high doses (20000 ppm, 1110 mg/kg bw/day), as the test substance was observed to be of very low general toxicity in subchronic studies.

Furthermore, neither the battery of genotoxicity tests nor the supplementary <sup>32</sup>P-postlabelling assay revealed a genotoxic potential of the test substance. It seems unlikely, therefore, that Iprovalicarb poses any threat of acarcinogenic potential.

The tumourigenic NOEL for temales is 500 ppm, 26 mg/kg bw/day), based on the occurrence of mixed Muellerian tumours in the uterus at 5000 and 20000 ppm, and carcinomas of the clitoral gland, and papillerias of the urinary bladder at 20000 ppm only. The tumourigenic NOEL for males is 5000 ppm (262.3 mg/kg bw/day), based on the occurrence of malignant tumours of the skeletal system at 20000 ppm.

The PCNA evaluation of the dissues selected from the I-year rat corcinogenicity study showed that iprocalically did not induce a biologically relevant increase of PCNA positive cells in selected tissue of neoplasms.

In conjunction with the information gleaned from the supplementary studies (special metabolism study and the associated biokinetics study as well as a bioavailability study, the <sup>32</sup>P-postlabelling in vivo assay, and the liver foci test), which were carried out to elucidate the findings in the chronic ratistudy, the following can be concluded: SZX 0722 does not possess a carcinogenic potential.

#### Reproductive Toxicaty

The reproductive toxicity of SZX 0722 was investigated in a two-generation study in rats, and in developmental toxicity strolles in rats and rabbils.

A concentration of 2000 ppm in the feed, over two generations, had no adverse effect on reproductive parameters. Parental arimals of both generations showed signs of liver enzyme induction at 2000 ppm (cytoplasmic changes in hepatocytes which was not considered to be adverse). At the high dose level (2000 ppm), body weights were reduced and liver weights of both sexes were increased in the parental animals. A possible slight decrease of the female/male ratio was observed for both the F1 and F2 offspring of the 20000 ppm group. At the highest dose also, pup body weights during the lactation phase were reduced in both the F1 and F2 generations, slightly reduced mean litter weight at birth and at weaning (day 28) in F1 pups, are increase in relative liver weights in F2 weanlings, and a reduced lactation index in F1 pups were also recorded at the high dose level.

The administration of Iprovalicarb does not have a direct effect on reproduction and clinical effects are seen only at the high dose. A NOAEL of 2000 ppm was established for both parental and reproductive toxicity.



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In both species tested, Iprovalicarb, up to and including the highest dose level (1000 mg/kg b.w.), was tolerated well without any signs of toxicity either in days or on intracterine development. The maternal and developmental NOAEL/NOEL in both the rat and the rabbit is 1000 mg/kg b.w..

In conclusion, Iprovalicarb shows no evidence of either reprotocic or embryotoxic potential either species tested.

#### Neurotoxicity:

In an acute neurotoxicity screening study done of the investigated parameters was affected by treatment with Iprovalicarb. The highest dose (2000 ong/kg b.w.) was tolerated without any neurotoxic effects.

In the subchronic (13-week) neurotoxicity study evidence of slight, dose-related, non-specific general toxicity was noted. The only neurobehavioural effect observed was a marginal decrease in the motor activity measurements in females of the highest dose group during study week 8; no difference was observed between groups at the 13 week time-point. However, this effect is not regarded to be indicative of a meurotoxic potential. In addition, there were no histopathological correlatives observed in the skel can mustle or on the nervous tissues. The highest dose tested (20000 ppm) regressents the NOEL with respect to neurotoxic potential.

In conclusion, SZX 0722 does not have a neurotoxic potential, after either acute or subchronic administration.

#### Further toxicological studies:

Acute toxicity studies were conducted to test p-Methyl-phenethylamine (PMPA), a metabolite of Iprovalicarly. The oral LIS (200 2000 five/kg) was lower than that of the parent compound, it was correspond to the skin but was not consitising to the skin in the Guinea Pig Maximisation Test (Magnus and Kligman). PMPA showed no genotoxic potential in the Ames test.

#### Medical data:

No data are available on medical surveillance on manufacturing plant personnel. During intensive experimental biological testing and field use of formulations containing SZX 0722, no negative experiences affecting the fiealth of workers were reported. Compound-specific poisoning signs in man offer or an independent of parent compound or metabolites in blood, urine or gastrointestinal contents is required for an exact diagnosis of poisoning. No specific antidotal therapy is available for the treatment of oral poisoning. Any contamination of the skin should be washed off immediately with plenty of water. The removal of ingested compound by (preferably) gastric lavage or induction of vomiting followed by symptomatic treatment is recommended in cases of oral uptake of SZX 0722. The effects in man following oral uptake of toxic doses of SZX 0722 are not known.



Table 5.11.1 NOAELs and fin	idings at LOA	ELs	
Study/dose levels (ppm)	NOAEL (ppm)	NOAEL (mg/kg bw)	Findings at the LOAEL
28 day feeding study, Wistar rat			Clinical chemistry, enzyme induction and
0, 2000, 6000, 20000	2000	195.8	increased liver weight at 6000 mm
4-week feeding study, purebred			Hepatocytes with 'ground glass' appearance,
beagle	100	2.7	subtle AP increase
0, 100, 1000, 10000, 50000		\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\	
13 week feeding study, Wistar rat		L	Rel. 10er weights increased by 10%
0, 1250, 5000, 20000	5000	<b>3</b> Ø2.7	
13 week feeding study, B6C3F <sub>1</sub>			Slight \ in MCV and cholesterol in males and
mouse	1400	325	temales: slight↑ liver weight in temales:
0, 280, 1400, 7000, 14000		, b° .5	slight water Intake and kidney wt. in
			mates
13 week feeding study, purebred	,		250 ppw. slight in abound receiver
beagle	< 250	S.1 (NOSEL »	weight liver enzyme induction, ramimal
0, 250, 2500, 50000	(NOAEL not	prot established)	heparocellular cytoplastic change. 1 activity
0, 200, 2000, 2000	establehed)	Y	of AP at higher dos Fevels A O
53 week feeding study, purebred	9 4		80 ppm (males): Sectivity of serup ALAT
beagle	\$80 (for	2.62	and APO liver of liver azyme adduction.
0, 80, 800, 8000	Remales (not so	2.02	800 ppm and Dove: 1 Serum enzyme
4, 55, 555, 555			activities, There we selevant
~			betopathological findings
5 day inhalation study, Wistar rat	~	d, a.	This was the man technically feasible
0, 20.6, 102.9, 504.4 mg/m <sup>3</sup>	© ≥ 504°4	7181	concentration
0, 20.0, 102.9, 304.4 Hig/III			Conceptiation
<i>↓</i>	(NODEC)		
4 week subacute dermal toxicity			
study, HC:NZW rabbits		1000	No effects observed at the limit dose
study, HC:NZW rabbit 0, 1000 mg/kg bw/da		2 1000 ( /u) «	No effects observed at the limit dose
Combined obrania toriaitus			5000 ppm and above (females): ↓ bw, clinical
carcinogenicity shaly, Wishar rat	O 500 &	26.00	Themistry, ↑ rel. liver wt and ↑ hepatocellular
0, 500, 5000, 20000	\$ 200 kg	26.00	V1
, 200, 2000, <b>2</b>	19 A 7		Mudderian tumours
			2,000 ppm (males): Marginal ↓ bw, ↑ AP
, O , O		° 0, ~ ~ ,	sectivity; occurrence of malignant skeletal
		47 & 2	tumours.
J. A.			20000 ppm (females): carcinomas of the
			clitoral gland, and papillomas of the urinary
			bladder
Oncogenicity study, B6C9F1 0, 280, 1400, 7000		\$7 \$8.5 \$7	1400 ppm and above (both sexes): slightly \(\frac{1}{2}\)
0, 280, 1400, 7000	Q 280 (	<b>58</b> .5	blood urea levels, slightly ↓ kidney wt.
0, 280, 1400, 7000		*\bullet	7000 ppm (males): marginally ↓ bw, slight ↑
			food and water intake, ↑ triglyceride serum
		~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~	levels and degenerative changes in liver cells
	N Q ;	S.	with associated marginally \(\gamma\) rel. liver wt.
Two generation reproduction,			F0: ↓ body weight and ↑ liver weight
Wistar rat	2000 (parents)	146.3	Offspring: ↓ body weight during lactation, ↓
0, 100, 2000, 2000		1.0.5	mean litter weight, ↑ liver weights (F2), and
	~		$\downarrow$ lactation index in F1 pups
Developme Wal toxicity, Wistar rat	* · · · · · · · · · · · · · · · · · · ·		No treatment-related effects
Cavage)		> 1000	No treatment-related effects
0 100 300 100 ma/kalky/day		≥ 1000	
(gavage) 0, 100,300, 1000 mg/kg0w/day Deyelopmenta) toxicity, Russian			No treatment-related effects
rabbit (gayase)		≥ 1000	No treatment-related effects
0, 100, 300, 1000 mg/kg bw/day		≥ 1000	
Supplementary subacute dog feeding			↑ N-demethylase activity, slight ↑ Cyt P450
study	20	0.77	11-ucinculylase activity, slight   Cyt P450
0, 10, 20, 40, 80	20	0.77	
0, 10, 20, 70, 00	<u> </u>		<u> </u>



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#### Calculation of the acceptable daily intake (ADI)

Looking at the toxicological profile of SZX 0722, the risk to the consumer of treated crops with respect to acute toxicity, organotoxicity, genotoxicity, and carcinogenicity is not discernible. There is no evidence of bioaccumulation, the 2-generation reproduction study in rats and the oral developmental toxicity studies in rats and rabbits have shown that SZXXXX has no primary reproductive toxic or developmental toxic potential.

The calculation of the acceptable daily intake is based on data from the chronic feeding stud in the dog and the rat, and the oncogenicity study in the mouse (Table 6.00.2.1).

In the case of SZX 0722, the dog has been shown to bothe most sensitive species. Thus, the ADI can be calculated as follows:

A NOAEL of the chronic dog study was established at the lowest dose of 80 ppm (262 mg/kg bw/day) for females only. In males administered 80 ppm, fundings of increased levels of serum AP activity, and microsomal enzyme induction were correspond to Substantially increased liver weights observed in two of the four dogs. In view of the increased severity of hepatotoxicity at higher doses, the effects observed at 80 ppm in males are regarded to be adverse. However, in the absence of histopathological changes and of adverse effects in lowdose females, and because reversibility of liver enzyme induction was demonstrated in a supplementary 4-week dog study. If appears likely that the dost level of 80 ppm is close to the NOAEL of the 53-week dog study. Therefore, using a safety factor of 200 the resulting ADI is 0.015 mg SZX 0722 w/day,

The NOXEL' observed in the subspute and subchronic oxicity studies performed in rats, mice and dogs and the developmental toxocity studies in rats and rabbits are used in order to set on AOEL. The NOAPL's and the effects seen at the lowest effect levels are summarised for the toxicological studies performed with SZX 0722.

It is considered appropriate to base the AOEL on NOAELs from studies which were conducted with dogs (most sensitive species). Since an unequivocal NOAEL could not be derived in the 3-week feeding study, (toxicologically relevant liver effects at the lowest dose of 250 ppm) and the 4-week range finding study (NOAEL of 100 ppm) used only a limited number of dogs, the lowest relevant NGAEL TOAEL is from the 53-week feeding study with does. Thus, the value of 2.62 mg/kg bw/day (80 ppm) is used for the calculation of the AOEL. As for the calculation of the ADI, an additional uncertainty factor of 2 is introduced to account of for the slightly adverse effects observed in male dogs at this dose. Therefore by use of an overall assessment factor of 200, the AOEL is set at 0.015 mg/kg bw/day. Since intestinal absorption of Inrovalicarb is high, the oral AOEL is considered equivalent to the internal

This not believant for SZX 0722, which is of low acute toxicity and poses no long-term risks from acute intake.