From AOPs (Adverse Outcome Pathways) to the next generation risk assessment (NGRA) for the final goal of full animal replacement in toxicology

Costanza Rovida, CAAT-EU (European Centre for Alternatives to Animal Tests) costanza.rovida@chimici.it



Genova - 22nd October 2021

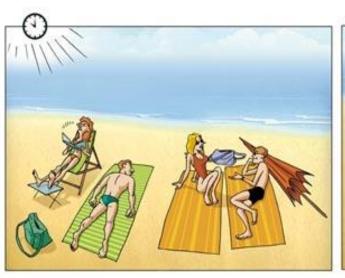








Principle of Risk Assessment





RISK = HAZARD x EXPOSURE

Definition of the threshold for the hazard

Assessment of the exposure

RCR (Risk Characterisation Ration) =

Exposure

RCR < 1

No effect Level

RCR > 1 RISK

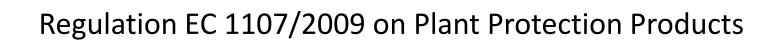
SAFE





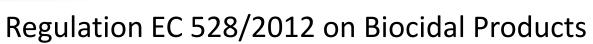


Each Regulation has its own conditions for Risk Assessment



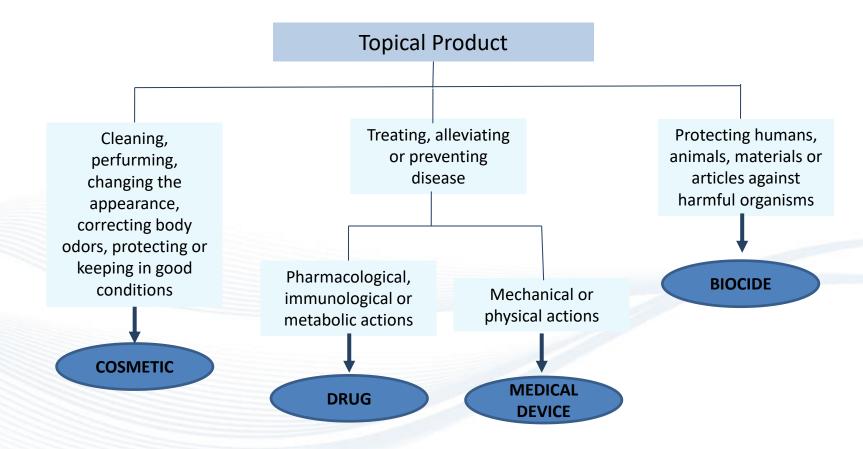








Cosmetic, medical device, drug,...?

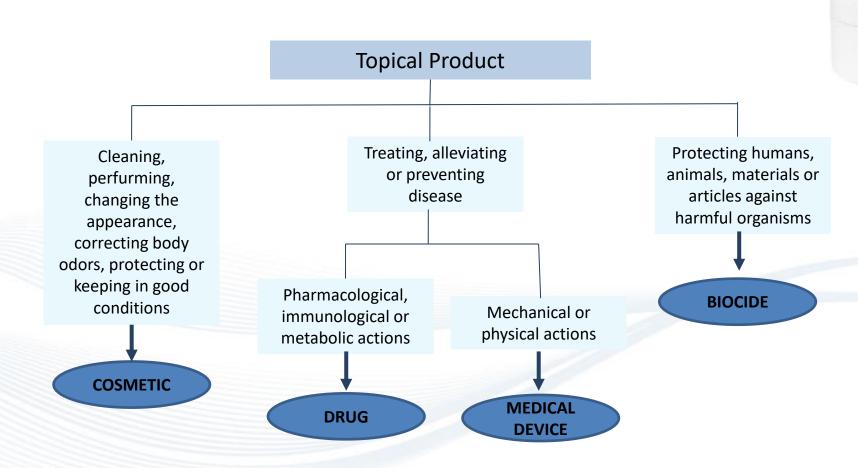




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Cosmetic, medical device, drug,...?

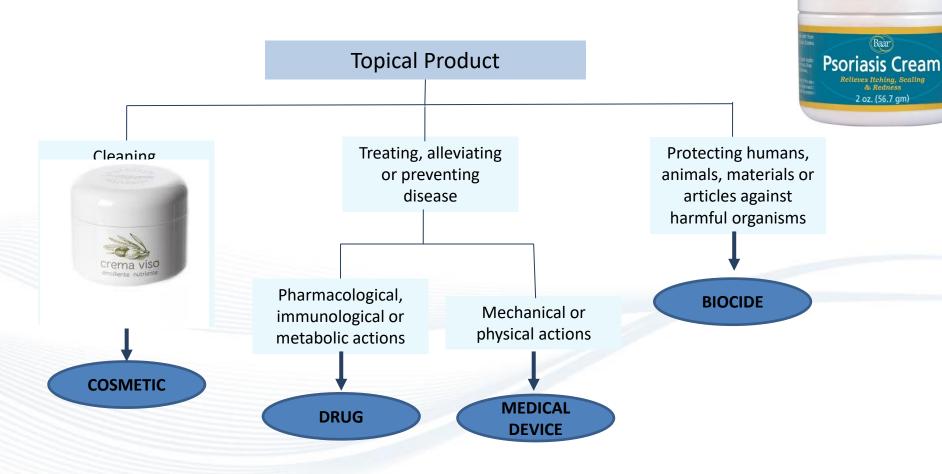












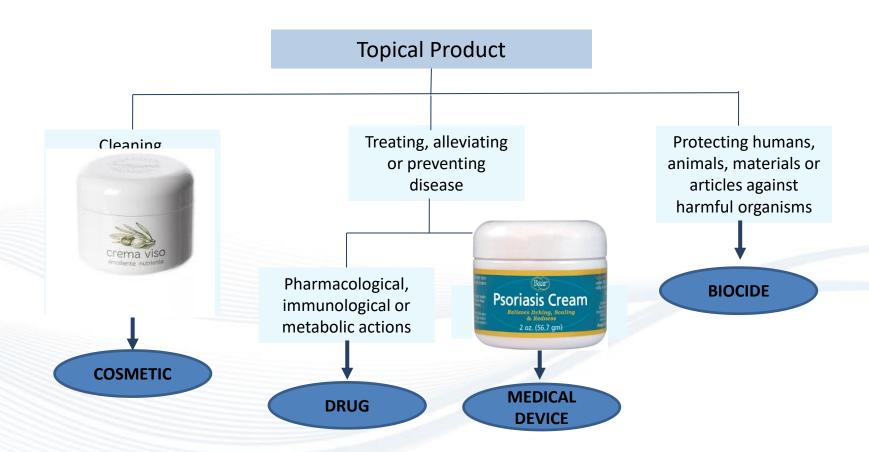




2 oz. (56.7 gm)



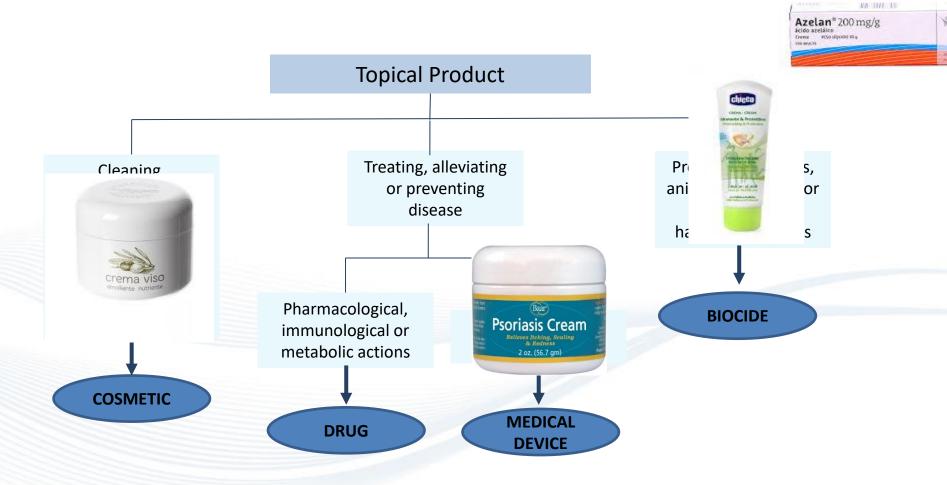
Cosmetic, medical device, drug,...?







Cosmetic, medical device, drug,...?





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At the moment, the official way to do Risk assessment is from in vivo studies



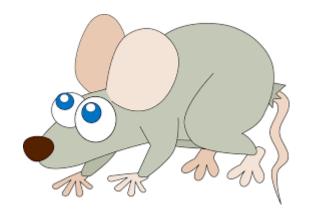


In vivo tests: administration









- Diet: feed
- Drinking water
- Gavage



Some examples:

NaCl was tested at 4% w/w in feed and 2% w/w in drinking water EtOH, a biocide active substance, was tested at 15% w/w in drinking water – more than wine!



If gavage does not enter the stomach, the substance is breath and goes into the lungs. If it is too long, it can damage the stomach.

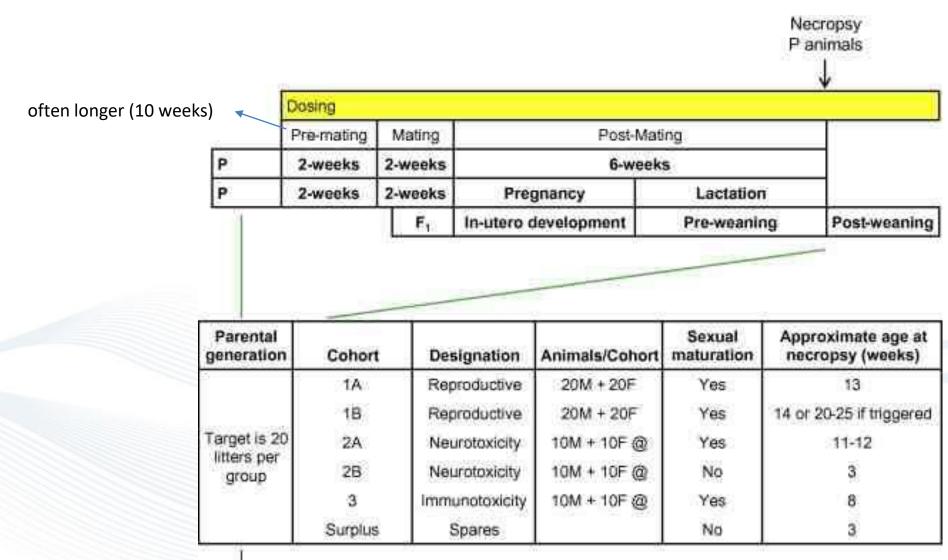
Volume:

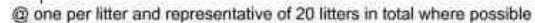
1 ml / 100 g bw

600 ml



In vivo tests: protocol (example of the OECD TG 443, EOGRTS)











Rat – human comparison: gastrointestinal tract

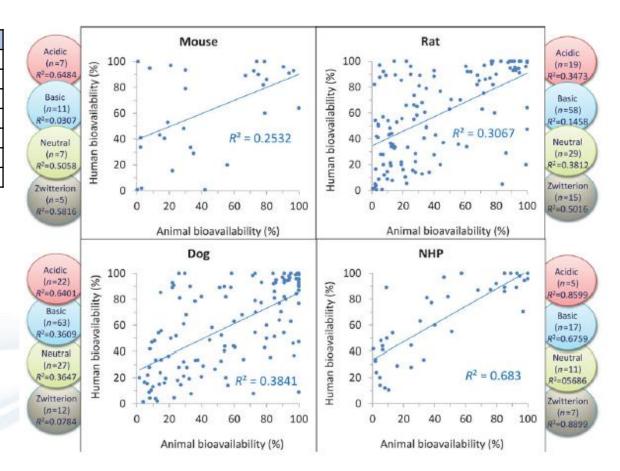




Gastrointestinal Region	Mouse	Rat	Rabbit	Human
Stomach - fasten	4.04	3.9	1.9	0.4 - 4
Stomach - fed	2.98	3.2		2.0 – 4.5
Duodenum	4.75	5.5	6	5.0 – 7.0
Jeiunum	5.01	6.13	6.8	6.6
lleum	4.8	5.9	7.5	7.5
Colon	4.7	5.5		6.4
Feces	4.7	5.7		6.5

pH in the different gastrointestinal regions

Bioavailability of various drugs in human versus mouse, rat, dog, and non-human primate (NHP).







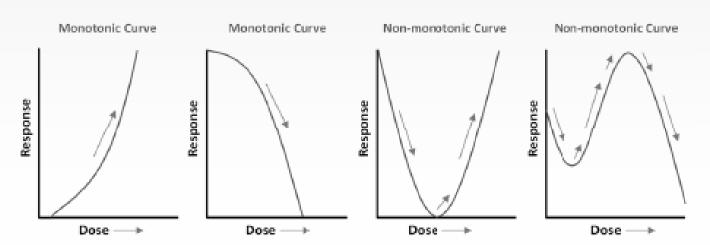


Non Monotonic Dose Response of Endocrine Disruptors









- Plurality of molecular target
- Receptor desensitization
- Metabolic effect hypotheses
- Mixed-ligand hypothesis

What about mixture or multiple exposure to chemicals?



Come si calcola la dose di no effetto (DNEL)



Oral Gavage 1000 - 300 - 150 - 0 mg/Kg Repeated dose toxicity
Reproductive toxicity
Developmental Toxicity
Carcinogenicity

Allometric scaling

Oral to inhaled quantity

4 (rat-human)

*70Kg/10m3/person

Calcolo Assessment Factor (AF)

Difference in duration of exposure: 6

Other interspecies differences: 2.5

Intraspecies differences: 5

Totale AF = 75

 $NOAEC = 367.5 \text{ mg/m}^3$

DNEL =
$$\frac{367.5 \text{ mg/m}^3}{75}$$
 = 4.9 mg/m³

Derived no Effect Level, workers, inhalation





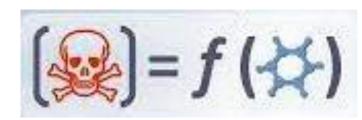






General rules for adaptation (Annex XI)

- Weight of evidence using existing data and non-animal methods
- Mathematical models/QSARs
- "Suitable" in vitro methods
- Grouping and Read-across









REACH pioneered use of such alternative methods to replace animal testing.





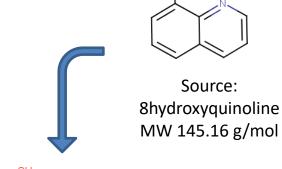


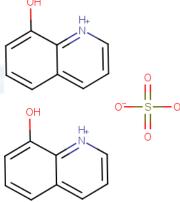
Derivation of DNEL after Annex XI application

There is no precise rules. Consider:

- Bioavailability
- Additional Assessment Factor
- MW compensation

An example





Target: bis-8hydroxyquinoline sulphate MW 388.4 g/mol

DERIVED NO EFFECT LEVEL (DNEL) – dermal consumer

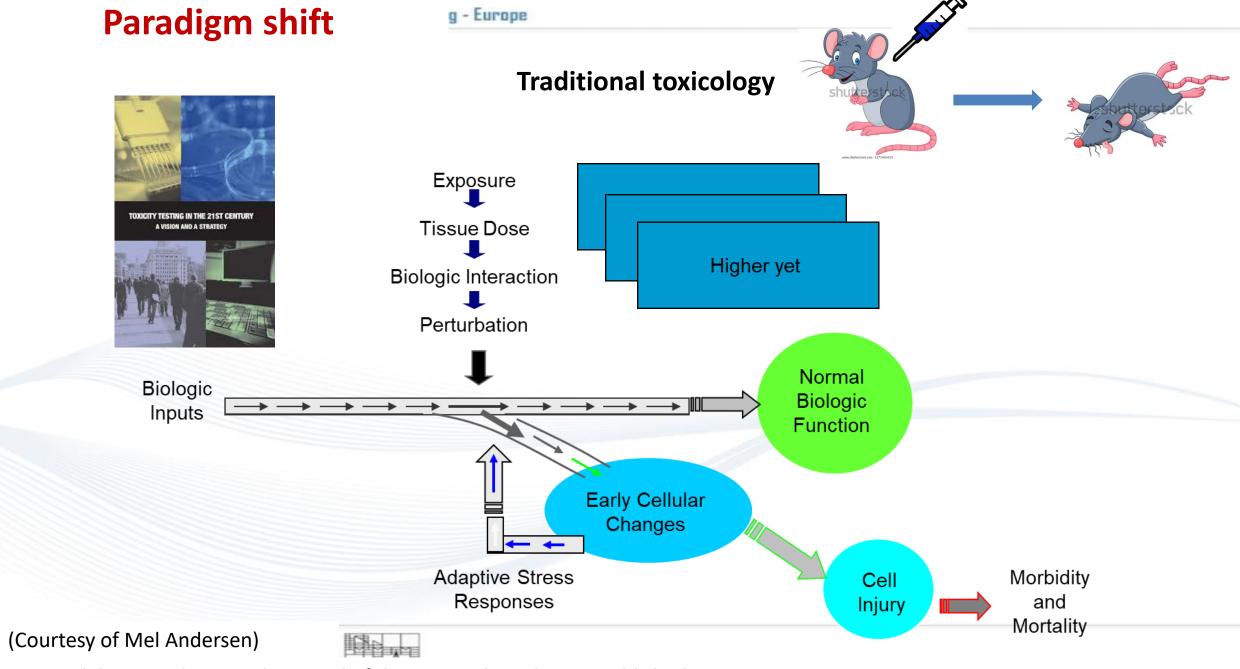
NOAEL_{8hydroxyquinoline} = 200 mg/kg bw/day \rightarrow Moli = 200/145.16 = 1.37 mmol NOAEL_{solfata} = 1,37/2 * 388,4 = 266 mg/kg bw/day AF = 600

DNEL_{solfata} = 0.443 mg/kg bw/day









Report del National Research Council of the National Academies Published on 2007



ADVERSE OUTCOME PATHWAY









Environmental Containment



Exposure



Molecular Initiating Event





Cellular Effects



Tissue Effects



Organ Organ Effects Systems Effects



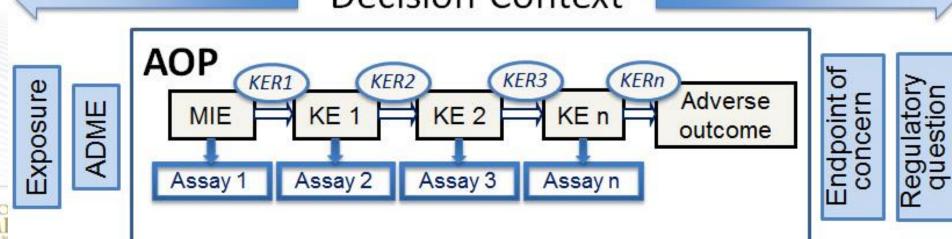
Individual Effects





IATA

Decision Context





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NAMs, New Approach Methodologies





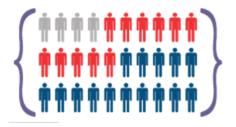


Qualunque tecnologia, metodo approccio o loro combinazione e che può essere utilizzata per fornire informazioni circa le proprietà tossicologiche delle sostanze chimiche e per effettuare valutazioni di rischio, senza ricorrere a all'uso di animali vertebrati vivi.

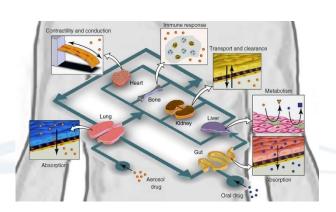
Questa nuova metodologia richiede approcci integrati IATA (Integrated Approaches to Testing and Assessment), e necessita di approcci definiti per l'interpretazione dei risultati oltre a una stima delle incertezze



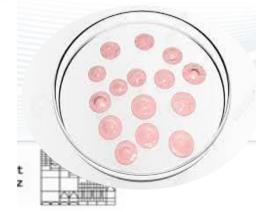


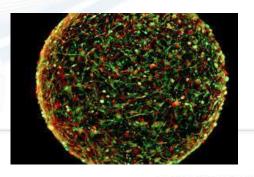


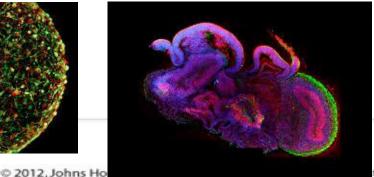
Complex integrated in vitro systems QSARs and Artificial Intelligence (AI) Epidemiological data In vivo / ex vivo data





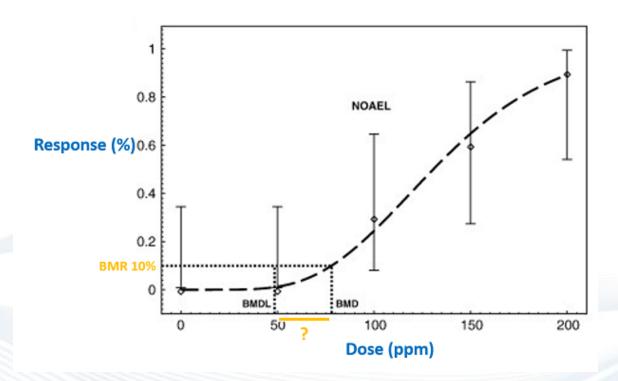


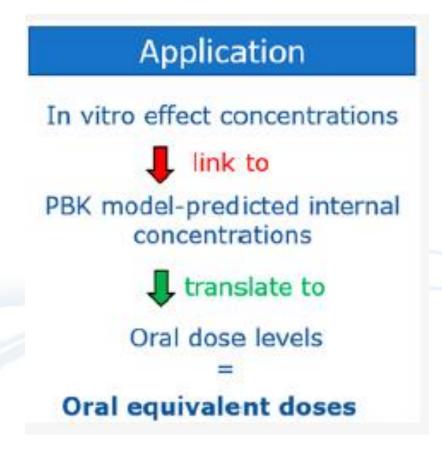






QIVIVE = Quantitative in vivo in vitro Extrapolation





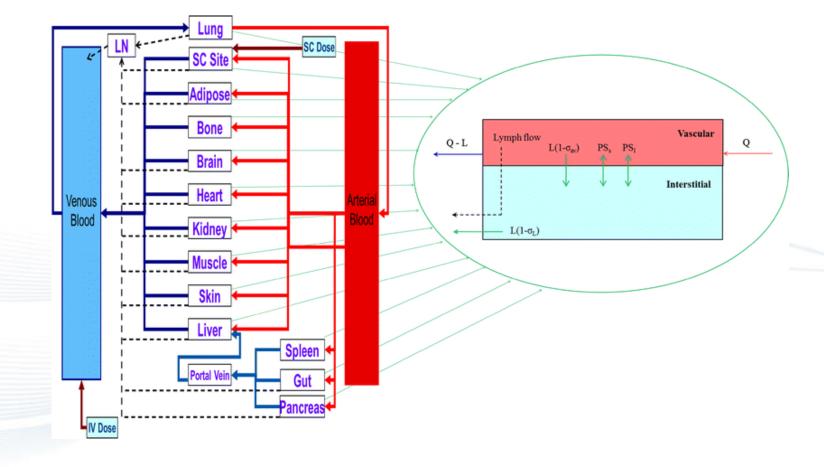






PBPK models (Physiologically Based Pharmacokinetic Model)

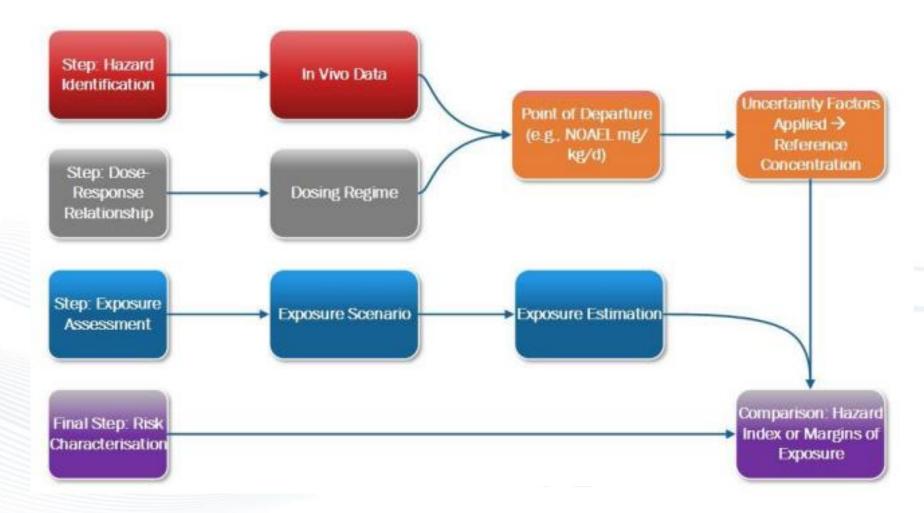
ADME
Absorption
Distribution
Metabolism
Excretion







Traditional Safety Assessment







Shifted Safety Assessment Paradigm



















Test in vivo







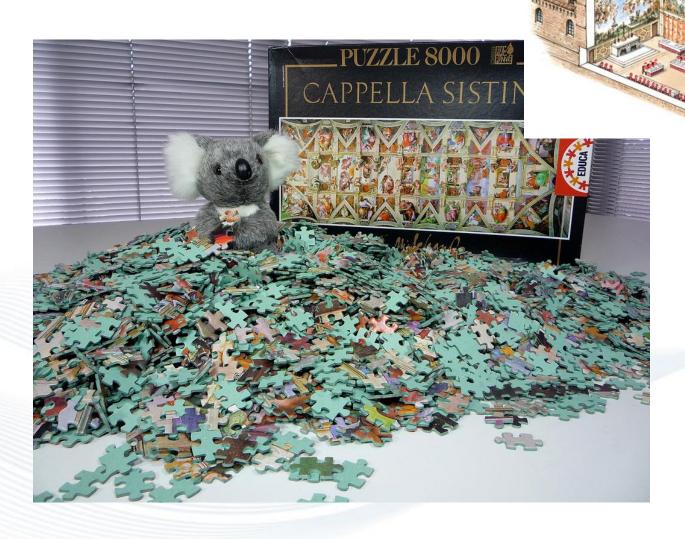


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Reserved.



























Conclusioni

- > Da un punto di vista regolatorio ci sono due pulsioni:
 - Da una parte la richiesta di andare verso I metodi in vitro è sempre più pressante
 - Dall'altra parte c'è una forte resistenza a lasciare I metodi tradizionali per abbracciare quelli nuovi
- Bisogna aprirsi verso la scienza per ottenere una maggiore salvaguardia dell'uomo e dell'ambiente
- Mai tralasciare il rigore scientifico nelle valutazioni
- > Il risultato di un singolo test va inserito in una valutazione globale
- La valutazione delle sostanza deve essere complessiva e non end-point per end-point
- Attenzione a costi e semplicità



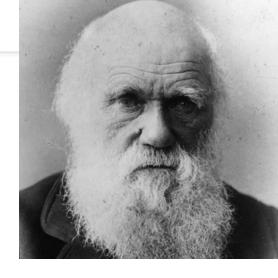






Charles Darwin, 1871

"You ask about my opinion on vivisection. I quite agree that it is justifiable for real investigations on physiology; but not for mere damnable and detestable curiosity. It is a subject which makes me sick with horror, so I will not say another word about it, else I shall not sleep tonight."



Grazie per l'attenzione!





