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Evaluation of the ability of a battery of three *in vitro* genotoxicity tests to discriminate rodent carcinogens and non-carcinogens II. Further analysis of mammalian cell results, relative predictivity and tumour profiles

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Abstract

One of the consequences of the low specificity of the *in vitro* mammalian cell genotoxicity assays reported in our previous paper [D. Kirkland, M. Aardema, L. Henderson, L. Müller, Evaluation of the ability of a battery of three *in vitro* genotoxicity tests to discriminate rodent carcinogens and non-carcinogens. I. Sensitivity, specificity and relative predictivity, *Mutat. Res.* 584 (2005) 1–256] is industry and regulatory agencies dealing with a large number of false-positive results during the safety assessment of new chemicals and drugs. Addressing positive results from *in vitro* genotoxicity assays to determine which are “false” requires extensive resources, including the conduct of additional animal studies. In order to reduce animal usage, and to conserve industry and regulatory agency resources, we thought it was important to raise the question as to whether the protocol requirements for a valid *in vitro* assay or the criteria for a positive result could be changed in order to increase specificity without a significant loss in sensitivity of these tests. We therefore analysed some results of the mouse lymphoma assay (MLA) and the chromosomal aberration (CA) test obtained for rodent carcinogens and non-carcinogens in more detail. For a number of chemicals that are positive only in either of these mammalian cell tests (i.e. negative in the Ames test) there was no correlation between rodent carcinogenicity and level of toxicity (we could not analyse this for the CA test as insufficient data were available in publications), magnitude of response or lowest effective positive concentration. On the basis of very limited *in vitro* and *in vivo* data, we could also find no correlation between the above parameters and formation of DNA adducts. Therefore, a change to the current criteria for required level of toxicity in the MLA, to limit positive calls to certain magnitudes of response, or to certain concentration ranges would not improve the specificity of the tests without significantly reducing the sensitivity.

We also investigated a possible correlation between tumour profile (trans-species, trans-sex and multi-site *versus* single-species, single-sex and single-site) and pattern of genotoxicity results. Carcinogens showing the combination of trans-species, trans-sex and multi-site tumour profile were much more prevalent (70% more) in the group of chemicals giving positive results in all three *in vitro* assays than amongst those giving all negative results. However, single-species, single-sex, single-site carcinogens were not very prevalent even amongst those chemicals giving three negative results *in vitro*. Surprisingly, when mixed positive and negative results were compared, multi-site carcinogens were highly prevalent amongst chemicals giving only a single positive result in the battery of three *in vitro* tests.

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Finally we extended our relative predictivity (RP) calculations to combinations of positive and negative results in the genotoxicity battery. For two out of three tests positive, the RP for carcinogenicity was no higher than 1.0 and for 2/3 tests negative the RP for non-carcinogenicity was either zero (for Ames + MLA + MN) or 1.7 (for Ames + MLA + CA). Thus, all values were less than a meaningful RP of two, and indicate that it is not possible to predict outcome of the rodent carcinogenicity study when only 2/3 genotoxicity results are in agreement.

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1. Introduction

Current regulatory guidelines for genotoxicity testing require chemicals to be evaluated at high concentrations/molarity and/or cellular toxicity *in vitro* for a valid test. The low specificity in the mammalian cell assays reported in our previous paper [1] raises the question as to whether such protocol requirements for a valid assay or the criteria for a positive result (according to ICH [2] and OECD [3] guidelines) could be changed in order to increase specificity, thereby reducing the number of false-positive results obtained. Since the standard approach to determine the biological relevance of positive *in vitro* genotoxicity assays involves conduct of additional *in vivo* genotoxicity assays, efforts to reduce this high false-positive rate could lead to substantial reductions in animal testing, as well as the cost and time to run these tests. Therefore, we examined such questions as whether the sensitivity of a particular mammalian cell assay could be maintained, but the specificity improved, if lower levels of toxicity were required for a valid assay? Did the carcinogens induce genotoxic responses of greater magnitude than the non-carcinogens, such that by requiring a higher level of response for a positive result, specificity might be improved? Also, were the non-carcinogens positive at much higher concentrations than the carcinogens, such that by requiring a lower top concentration than the current 10 mM, specificity might be improved? In this paper we have analysed some of the mouse lymphoma assay (MLA) and chromosomal aberration (CA) test results with rodent carcinogens and non-carcinogens (as defined in our previous paper [1]) in light of these questions.

We also examined whether a consistent pattern of genotoxicity results e.g. positive in Ames, MLA and either *in vitro* micronucleus (MN) or CA tests correlated better with trans-species, trans-sex, multi-site carcinogens than with single-species, single-sex, single-site carcinogens.

Finally, the new concept of relative predictivity (RP) that we introduced in our previous paper [1] and that had been calculated and reported only for those chemicals giving all three results positive or all three results

negative in the *in vitro* battery, was examined for other combinations of test results. Previously we reported that a reasonable correlation (RP of two or more) with rodent carcinogenicity was obtained when all three *in vitro* tests gave positive results ($>3\times$ more likely that a chemical would be a rodent carcinogen if all three tests were positive), and a reasonable correlation with non-carcinogenicity was obtained when all three tests were negative ($>2\times$ more likely that a chemical would be a non-carcinogen if all three tests were negative). As most compounds tested by industry give mixtures of positive and negative results across a battery of three tests (2 positive + 1 negative, or 1 positive + 2 negative), and not all regulatory guidelines request the conduct of an extensive *in vitro* battery, we calculated the RP for rodent carcinogenesis and non-carcinogenesis from these combinations of results.

2. Quantitative analysis of various aspects of the mammalian cell tests

An important source of poor specificity in our previous analysis [1] was for non-carcinogens where a single positive result was obtained in one of the mammalian cell tests in the battery. We therefore decided to examine whether changing the criteria for a valid assay or the criteria for a positive result would eliminate some of the isolated positives with non-carcinogens, whilst preserving the single positive results with carcinogens, thereby improving the specificity without decreasing the sensitivity. We decided to look at three parameters:

- Level of toxicity
- Magnitude of positive response
- Lowest clearly positive concentration

As indicated above, we focussed this analysis on those chemicals where the only positive response was in either the MLA or CA test, accompanied by negative results in the Ames test (we included one chemical with no Ames result), and either negative or no results in the other mammalian cell test.

Analysing these three parameters was relatively easy to do for the MLA because most published data (and many results came from NTP tests [4]) contained sufficient detail. However, very few CA publications, including the many NTP tests, provided detail on toxicity. We did have access to the laboratory notebooks of Dr. Ishidate, but were able to obtain toxicity information on too few clastogens to allow a meaningful analysis to be undertaken. For the MN test, where there are many fewer publications, there were so few situations where the MN was the only positive in the battery that this was not worthy of further analysis at this time.

As is the case in a retrospective analysis of this sort, it is important to recognise that the data from some studies may not meet current guideline requirements. Whilst it would be ideal to review each published result in terms of compliance with current guidelines, and focus our analysis only on those that complied, this goes beyond the scope of the project. As indicated previously [1], we did re-evaluate a significant number of the MLA studies from Mitchell et al. [6], and a number of published studies that we considered to be “technically compromised” were excluded from the analysis. However, there was insufficient information to do this for other study types, in particular the CA test. Nonetheless, we believe the trends observed here would largely still hold true if the analysis was limited to studies compliant with current guidelines.

2.1. Mouse lymphoma assay (MLA) results

The criteria for conclusions of positive, negative, equivocal or technically compromised have been described in our previous paper [1], as have the reasons why some previously reported MLA results were reassessed in order to fit our categorisation. The carcinogens and non-carcinogens where only the MLA gave a positive result (i.e. either both Ames and MN/CA were negative or results were not available) were identified from our Carcinogenicity Genotoxicity eXperience (CGX) database (as detailed in [1]; it can be viewed at <http://www.lhasalimited.org/cgx>). This amounted to only 45 chemicals, which is a small number, and analysis of other categories of chemicals in our database may provide more useful information. We re-examined the original reports and recorded the following:

- The highest relative total growth (RTG—i.e. lowest level of toxicity) at which a significant increase in mutant frequency occurred. Increases in MF above concurrent control levels of 90×10^{-6} for the agar method and 126×10^{-6} for the microwell method are

considered significant according to the latest recommendations [5]. Most of the published studies in our database used the agar method.

- The maximum increase in MF at any concentration giving acceptable RTG (i.e. RTG >0.1).
- The lowest effective concentration at which a significant increase in MF (as defined above) was observed.

For the MLA-positive chemicals shown in Tables 1 and 2, all except one were negative in the Ames test—for pyrilamine maleate there was no Ames test result. Most were also negative for CA and/or MN but for a small number there was no result for either CA or MN, as noted in the Table. For pyrilamine maleate there was also no result in either CA or MN, so the MLA was the only result. For two carcinogens (*o*-benzyl-*p*-chlorophenol and C.I. Direct Blue 218) the MLA data were referred to by Mitchell et al. [6] in their revised EPA Gene-Tox review, and therefore included in our CGX database, but the original data were not available for review.

Tables 1 and 2 show the highest RTG levels (i.e. lowest levels of toxicity) at which significant positive responses were seen for carcinogens and non-carcinogens, respectively. As can be seen, there were no differences between carcinogens and non-carcinogens in the levels of toxicity at which the minimum positive response was observed. Carcinogens and non-carcinogens are distributed across the whole range of toxicity for the point at which the first positive response is seen. The lowest level of toxicity for a biologically relevant positive response ranged from 23 to 89% (RTG from 0.77 to 0.11) for carcinogens, and from 16 to 91% (RTG 0.84–0.09) for non-carcinogens.

Thus, if the upper limit of toxicity required for a valid assay were lowered, several carcinogens would be missed. Also, sufficient non-carcinogens were positive at low levels of toxicity that the specificity would not be improved. For instance, if the toxicity limit were lowered to 50% (consistent with the chromosomal aberration test), seven non-carcinogens would no longer be positive (see Table 2A) but 15 carcinogens would also no longer be positive (see Table 1A).

Tables 1 and 2 also show the maximum induced MF (IMF) at any concentration that produced acceptable (non-excessive) toxicity (i.e. RTG not lower than 0.1). It should be noted that, at the time most of the MLA studies were performed, there was limited appreciation of the importance of small-colony mutants, and therefore some tests may have achieved conditions that favoured growth of small-colony mutants, whereas others would not. Clearly this could have an impact on

Table 1
Toxicity, maximum mutagenic response and lowest mutagenic concentrations in the MLA for Ames-negative carcinogens

Chemical name	CAS number	RTG for minimum positive response ^a	Maximum induced MF ($\times 10^{-6}$) at any treatment with RTG of 0.1 or higher	Lowest effective concentration ($\mu\text{mol/l}$) for minimum positive or highest non-significant response ^a	Induction of DNA adducts [reference]
A: Carcinogens positive only in MLA (i.e. negative or equivocal in Ames and CA/MN)					
11-Aminoundecanoic acid	2432-99-7	0.51	149	99.4	No data
Benzofuran	271-89-6	0.22	172	1270	No data
<i>o</i> -Benzyl- <i>p</i> -chlorophenol	120-32-1	Data not publicly available			
Butylated hydroxytoluene	128-37-0	0.26	145	45	No data
Chlorobenzilate	510-15-6	0.30	244	277	No data
Chloroform	67-66-3	0.34	92	0.4	+ Calf thymus DNA ^b [9] and hepatocytes [10] <i>in vitro</i>
4-Chloro- <i>o</i> -toluidine	3165-93-3	0.17	71 ^c	848	+ Liver <i>in vivo</i> [11]
C.I. Direct blue 218	28407-37-6	Data not publicly available			
Cinnamyl anthranilate	87-29-6	0.24	205	30.8	No data
Dicofol	115-32-2	0.30	36 ^c	135	No data
<i>N,N'</i> -Diethyl-2-thiourea	105-55-5	0.42	2307	11344	No data
Ethylbenzene	100-41-4	0.34	529	754	No data
Kepon (AKA chlordecone)	143-50-0	0.38	62 ^c	71.3	No data
Malonaldehyde sodium salt	24382-04-5	0.67	239	5553	+ Liver <i>in vivo</i> [12]
Methyl <i>tert</i> -butyl ether	1634-04-4	0.61	181	22.7	+ Hepatocytes <i>in vitro</i> ^d [13]
Piperonyl butoxide	51-03-6	0.17	443	148	No data
Piperonyl sulphoxide	120-62-7	0.70	85 ^c	7.7	No data
Toluene	108-88-3	0.21	216	2442	+ HL-60 cells <i>in vitro</i> [14]
2,4,6-Trichlorophenol	88-06-2	0.11	144	608	No data
Trimethylthiourea	2489-77-2	0.21	377	35533	No data
4-Vinylcyclohexene	100-40-3	0.40	79 ^c	740	+ Skin <i>in vivo</i> [15]
B: Carcinogens positive in MLA, negative Ames but no test (or TC) in CA/MN					
1,4-Benzoquinone	106-51-4	0.34	200	3.15	+ Plasmid DNA <i>in vitro</i> [16]
Dimethyl methylphosphonate	756-79-6	0.73	54 ^c	40.3	No data
FD&C Red 1 (Ponceau 3R)	3564-09-8	0.36	100	3440	No data
Procarbazine HCl (Natulan)	366-70-1	0.77	356	49.7	+ Mammary tissue [17], liver and bone marrow [18] <i>in vivo</i>
Thioacetamide	62-55-5	0.69	177	10240	+ Liver <i>in vivo</i> [19]
Trichloroacetic acid	76-03-9	0.28	121	12241	+ Liver <i>in vivo</i> ^b [20]
Vinylidene chloride	75-35-4	0.70	212	64990	No data
C: Carcinogens positive in MLA but no test (or TC) in Ames and CA/MN					
Pyrimidine maleate	59-33-6	0.55	155	1619	No data

NB: There were no chemicals positive in MLA, negative in CA/MN but no test (or TC) in Ames.

^a Minimum clear positive response considered where mutant frequency (MF) increased at least 90×10^{-6} (all studies used agar method) over concurrent control as recommended by Moore et al. [5]. In some cases, due to spacing of doses, the lowest significant increase in MF was much greater than the minimum, which would therefore have occurred at a higher RTG and lower concentration.

^b Oxidative damage to DNA.

^c Minimum increase in MF not achieved. These chemicals should be reclassified as equivocal rather than positive.

^d DNA-protein crosslinks.

^e Although induced MF was $<90 \times 10^{-6}$, the dose response was very steep and it is expected that a significant response would have been achieved at higher concentrations.

Table 2
Toxicity, maximum mutagenic response and lowest effective mutagenic concentrations in the MLA Ames-negative non-carcinogens

Chemical name	CAS number	RTG for minimum positive response ^a	Maximum induced MF ($\times 10^{-6}$) at any treatment with RTG of 0.1 or higher	Lowest effective concentration ($\mu\text{mol/l}$) for minimum positive or highest non-significant response ^a	Induction of DNA adducts [reference]
A: Non-carcinogens positive only in MLA (i.e. Ames and CA/MN negative or equivocal)					
Aldicarb	116-06-3	0.84	111	21024	No data
Anilazine	101-05-3	0.72	298	10.5	No data
Barium chloride dihydrate	10326-27-9	0.40	27 ^b	4094	No data
1,2-Dichlorobenzene	95-50-1	0.81	357	68	+ Calf thymus DNA <i>in vitro</i> [21]
FD&C yellow number 6	2783-94-0	0.79	62 ^b	8842	No data
4-Hexylresorcinol	136-77-6	0.29	110	154	No data
Hydrochlorothiazide	58-93-5	0.51	264	2519	No data
Isopropyl-N-(3-chlorophenyl)carbamate	101-21-3	0.13	68 ^b	147	No data
Malaixon	1634-78-2	0.22	75 ^b	477	No data
Oxytetracycline HCl	2058-46-0	0.30	4329	616	No data
Phenyl- β -naphthylamine	135-88-6	0.36	140	59.3	No data
Sodium diethylcarbamate trihydrate	148-18-5	0.55	326	0.39	No data
Sulfisoxazole	127-69-5	0.39	96	3741	No data
2,3,5,6-Tetrachloro-4-nitroanisole	2438-88-2	0.55	151	24.1	No data
B: Non-carcinogens positive in MLA, negative in Ames but no test (or TC) in CA/MN					
Alpha-methyl dopa sesquihydrate	41372-08-1	0.27	164	168	No data
Rhodamine 6G	989-38-8	0.09	94	16.7	No data

NB: There were no chemicals positive in MLA, negative in CA/MN but no test (or TC) in Ames.

^a Minimum clear positive response considered where mutant frequency (MF) increased at least 90×10^{-6} (all studies used agar method) over concurrent control as recommended by Moore et al. [5]. In some cases, due to spacing of doses, the lowest significant increase in MF was much greater than the minimum, which would therefore have occurred at a higher RTG and lower concentration.

^b Minimum increase in MF not achieved. Chemical should be reclassified as equivocal rather than positive.

the IMF, and highlights some of the difficulties of trying to apply current standards to old studies. Non-carcinogens (Table 2) were just as likely to produce very high IMF as were carcinogens (Table 1), and some carcinogens produced very low IMF. In fact, several carcinogens (as well as four non-carcinogens) failed to achieve the minimum IMF (90×10^{-6} for the agar method) currently recommended for a biologically relevant response [5] and should be re-classified as equivocal. These changes will be made in the web version of the CGX database (<http://www.lhasalimited.org/cgx>). Thus, if we were to consider increasing the required IMF for a positive response, several carcinogens would be missed.

The lowest concentrations of chemicals at which the minimum positive responses were seen (or in the case of those where minimum IMF was not reached, the highest non-significant concentration) are also shown in Tables 1 and 2. The lowest-effective concentrations clearly vary widely from <1 to $>10,000 \mu\text{M}$ for both carcinogens (Table 1) and non-carcinogens (Table 2). It will be noted that some chemicals are listed where

the concentration for a minimum positive response was $>10 \text{ mM}$. If tested according to current standards such high concentrations would not be used. Thus five carcinogens and two non-carcinogens would drop out of the analysis if positive results were only included when obtained below 10 mM . However, the range of lowest effective concentrations would still be large, both for carcinogens and non-carcinogens. Thus, changing the maximum concentration requirement for a valid test might improve the specificity of the MLA but it would lower the sensitivity.

We investigated whether formation (or not) of DNA adducts might discriminate between MLA positives of different potency. The *in vitro* and *in vivo* DNA-adduct data that could be found in the literature are also included in Tables 1 and 2. The following comments can be made on these limited data:

- There were nine carcinogens positive only in the MLA that had adduct data, and all formed DNA adducts. Within this sub-group, the level of toxicity varied widely (from 23 to 83% toxicity for a minimum pos-

itive response), the maximum IMF varied from 71 to 356×10^{-6} , and the lowest effective concentration varied over six orders of magnitude from 0.4 to 64,990 μM .

- There was only one non-carcinogen giving an isolated positive result in the MLA for which adduct data could be found, and this compound formed DNA adducts. This was positive at low toxicity (19% toxicity for minimum positive response).

Since all the MLA-positive carcinogens and the one MLA-positive non-carcinogen induced DNA adducts, it is not possible to use these data to draw conclusions regarding DNA reactivity and the other parameters we studied (level of toxicity required, minimum effective

concentration or magnitude of response). However, it does not appear that any changes to currently recommended toxicity levels or maximum concentration of test chemical, or requiring a higher induced mutant frequency for a positive "call" would improve the specificity of the MLA without causing serious deterioration in the sensitivity.

2.2. Chromosomal aberration (CA) test results

As mentioned earlier, there were very few published examples where CA results were accompanied by toxicity data. Although one of us (MH) was able to look at the laboratory notebooks of Dr. Ishidate, who published many of the CA results in our previous analysis [1], we

Table 3
Analysis of CA test responses for Ames-negative carcinogens

Chemical name	CAS number	Survival (cell count, confluence or mitotic index as a % of control) for minimum positive response ^a	Maximum % of aberrant cells (excluding gaps) at any treatment with survival 50% or higher	Lowest effective concentration ($\mu\text{mol/l}$) for minimum positive or highest non-significant response ^a	Induction of DNA adducts [reference]
A: Carcinogens positive only in CA ^b (i.e. negative in Ames and MLA) ^c					
Pentachloronitrobenzene	82-68-8	Not given	19	8.1	No data
Naphthalene	91-20-3	Not given	16	234	No data
Zearalenone	17924-92-4	Not given	13	47.1	+ Kidneys, liver and ovaries <i>in vivo</i> [22]
B: Carcinogens positive in CA ^b , negative in Ames but no test (or TC) in MLA ^d					
Atrazine	1912-24-9	64	28.7	5.0	- Liver <i>in vivo</i> [23]
Heptachlor	76-44-8	Not given	14	67.0	+ Hop plants <i>in vivo</i> [24]
Hexanamide	628-02-4	Not given	10	39071	No data
4-Methoxyphenol	150-76-5	Not given	6.8	250	No data
N-Methyloacrylamide	924-42-5	Not given	26	2473	No data
Methylphenidate HCl	298-59-9	Not given	9	3707	No data
Nafenopin	3771-19-5	100	Cannot be established	30.0	No data
Nitrobenzene	98-95-3	Not given	33.2	61.3	+ Liver <i>in vivo</i> [25]
C: Carcinogens positive in CA ^b but no test (or TC) in Ames and MLA ^e					
Haloperidol	52-86-8	Not given	Only one concentration used	Only one concentration used	No data
Retinol acetate ^f	127-47-9	Not given	13	200	No data

NB: There were no chemicals positive in CA, negative in MLA but no test (or TC) in Ames.

^a Minimum positive response was considered as >5% cells with aberrations (excluding gaps) as this would usually be considered a positive response for CHO, CHL cells and human lymphocytes.

^b Chemicals that were also positive in MN were excluded from these tables.

^c Another chemical in this category, but for which there were insufficient data in the publications to complete any of the columns, was sodium saccharin.

^d Other chemicals in this category, but for which there were insufficient data in the publications to complete any of the columns, were aldrin, aniline HCl, asbestos, carboxymethylnitrosourea, clofibrate, lead acetate, methimazole, styrene and 12-*O*-tetradecanoylphorbol 13-acetate.

^e Other chemicals in this category, but for which there were insufficient data in the publications to complete any of the columns, were 1-*amyl*-1-nitrosourea, sodium barbital, manganese ethylenebisthiocarbamate and petasitenine.

^f Equivocal in MN.

were only able to find toxicity data on very few additional clastogens. Therefore, it was not possible to analyse (as we did above for the MLA) whether any change to the required level of toxicity (currently at least 50% according to OECD [3]) would provide improved specificity whilst retaining sensitivity.

For a small number of chemicals that were positive only in this test, we could identify the maximum induced CA response (although we could not know whether this occurred at levels of toxicity much higher than 50%) and the lowest effective concentration required for a minimum positive response. For the latter, since most published data were from Chinese hamster cells, we accepted that CA frequencies (excluding gaps) of >5% would probably be statistically significant and exceed historical control ranges. These data are tabulated in Tables 3 and 4 for carcinogens and non-carcinogens, respectively. Unfortunately there were a number of chemicals for which the published reports contained insufficient details to establish the maximum frequency of aberrant cells or the minimum concentration for a positive effect.

From Tables 3 and 4 it can be seen that the maximum percentage of aberrant cells ranged from 9 to 33% for carcinogens and from 7 to 23% for non-carcinogens.

The minimum positive concentration ranged from 5 to 39,000 μM for carcinogens and from 24 to 5000 μM for non-carcinogens. In other words, for this small sample of Ames-negative clastogens there were no clear differences in maximum response or minimum positive concentration between carcinogens and non-carcinogens. It will be noted that one chemical (hexanamide, Table 3) is listed where the concentration for a minimum positive response was >10 mM. If tested according to current standards such high concentrations would not be used. Thus this one carcinogen would drop out of the analysis if positive results were only included when obtained below 10 mM. However, the range of lowest effective concentrations would still be large, both for carcinogens and non-carcinogens. Thus it does not appear that any change to the maximum concentration, or the introduction of a requirement for the induced frequency of aberrant cells to reach a certain level would improve the specificity of the CA test without causing serious deterioration in the sensitivity.

As for the analysis of MLA data, we investigated whether DNA reactivity may correlate better with potency. Any *in vitro* or *in vivo* DNA-adduct data that could be found in the literature for these chemicals positive only in the CA test are shown in Tables 3 and 4.

Table 4
Analysis of CA test responses for Ames-negative non-carcinogens

Chemical name	CAS number	Survival (cell count, confluence or mitotic index as a % of control) for minimum positive response ^a	Maximum % of aberrant cells (excluding gaps) at any treatment with survival 50% or higher	Lowest effective concentration ($\mu\text{mol/l}$) for minimum positive or highest non-significant response ^a	Induction of DNA adducts [reference]
A: Non-carcinogens positive only in CA ^b (i.e. Ames and MLA negative) ^c					
Diphenhydramine HCl	147-24-0	Not given	17	343	No data
4,4'-Isopropylidenediphenol	80-05-7	45	23	399	+ Liver <i>in vivo</i> [26] and Syrian hamster cells <i>in vitro</i> [27]
Tin (II) chloride	7772-99-8	Not given	22	132	No data
B: Non-carcinogens positive in CA, negative in Ames but no test (or TC) in MLA ^d					
Carbromal	77-65-6	Not given	7	5061	No data
Chlorpheniramine maleate	113-92-8	Not given	18	1279	No data
Fenvalerate	51630-58-1	Not given	20	23.8	No data
Hexachlorocyclopentadiene	77-47-4	Not given	9.5	27.5	No data

NB: There were no chemicals positive in CA, negative in MLA but no test (or TC) in Ames.

^a Minimum positive response was considered as >5% cells with aberrations (excluding gaps) as this would usually be considered a positive response for CHO, CHL cells and human lymphocytes.

^b Chemicals that were also positive in MN were excluded from these tables.

^c Other chemicals in this category, but for which there were insufficient data in the publications to complete any of the columns, were acetohexamide, benzoin, FD&C Red number 3 and tetracycline HCl.

^d Other chemicals in this category, but for which there were insufficient data in the publications to complete any of the columns, were sodium benzoate, caffeine, chlorpropamide, FD&C Yellow number 5 and vinyl toluene.

Adduct data were found for only a small number of chemicals. However, the following comments can be made:

- Of the carcinogens that were positive only for CA, there were only four with adduct data, and one of these (atrazine) did not form DNA adducts. Whereas we might have expected DNA-reactive chemicals to be positive at lower concentrations, the non-DNA-reactive atrazine was positive at the lowest concentration of all the 13 carcinogens studied in this set.
- Of the carcinogens with adduct data the maximum CA response was quite variable (13–33%) as was the lowest effective concentration (5–67 μM).
- Only one non-carcinogen had adduct data (which was positive).

Since all except one CA-positive carcinogen and the one CA-positive non-carcinogen induced DNA adducts, it is not possible to draw conclusions regarding DNA reactivity and the other parameters we studied (magnitude of response, or lowest effective concentration). Thus it does not appear that the specificity of the CA test can be improved, without serious deterioration in sensitivity, by changing the maximum required test concentration or setting a limit for magnitude of response.

3. Tumour profiles

We reviewed the tumour profiles as detailed in the Carcinogenic Potency DataBase (CPDB) of Gold [7] for those carcinogens giving positive results across all three *in vitro* tests (Table 5) or giving negative results across all three *in vitro* tests (Table 6). The prevalence of the trans-species, trans-sex and multi-site carcinogens amongst the two categories of results we examined (positive or negative across all three *in vitro* tests) is shown in Table 7A. The prevalence of chemicals showing “all positive” or “all negative” amongst the single-species, single-sex, single-site carcinogens is shown in Table 7B. The following conclusions can be drawn from these analyses:

- There are no differences between “all positive for genotoxicity” and “all negative for genotoxicity” amongst the carcinogens as far as inducing tumours in both males and females. In other words, trans-sex carcinogens are equally likely to be genotoxic in all *in vitro* tests as to be non-genotoxic in all *in vitro* tests.
- Trans-species carcinogens are 39% more prevalent in the “all positive for genotoxicity” group than in the “all negative for genotoxicity” group.

- Multi-site carcinogens are 31% more prevalent in the “all positive for genotoxicity” group than in the “all negative for genotoxicity” group.
- Carcinogens showing the combination of trans-species, trans-sex and multi-site tumour profile are much more prevalent (70% more) in the “all positive for genotoxicity” group than in the “all negative for genotoxicity” group.
- Single-species, single-sex, single-site carcinogens are not very prevalent even amongst those chemicals giving three negative results *in vitro*.

We also reviewed the tumour profiles for carcinogens giving positive results in only one of the *in vitro* genotoxicity tests whilst being negative in the other two tests in the battery. The results are shown in Table 8A for Ames-positive only, Table 8B for MLA-positive only, and Table 8C for MN- or CA-positive only. The prevalence of trans-species, trans-sex or multi-site carcinogens amongst these compounds positive in a single genotoxicity test is shown in Table 9. The following conclusions can be drawn:

- Multi-site carcinogens are surprisingly prevalent amongst those chemicals inducing only single positive genotoxicity results.
- Multi-site carcinogens are more prevalent amongst Ames-positive genotoxins, but the database is very small.
- The prevalence of trans-species or trans-sex or multi-site carcinogens amongst single genotoxicity test positive compounds is intermediate between those in “all positive” and “all negative” groups.

4. Relative predictivity for batteries with mixed positive and negative results

Because we did not observe any obvious changes to protocols for the mammalian cell tests that would improve specificity without impairing sensitivity, we revisited the topic of relative predictivity described in our previous paper [1] and we calculated relative predictivity (RP) for rodent carcinogenicity from different combinations of test results. As described previously, positive RP for predicting carcinogenicity was acceptable (>2) only for the Ames test of the single tests, but was most informative when all three tests were positive. We also calculated the RP for non-carcinogenicity from one, two or three *in vitro* tests all giving negative results. Only a few combinations of all negative results gave acceptable RP for non-carcinogenicity.

Table 5
 Tumour profiles for carcinogens (tested in rats and mice, males and females) positive in Ames plus MLA plus either MN or CA

Carcinogen	CAS number	Tumour profile		
		Rats and mice	Males and females	Multi-site
<i>N</i> -Acetoxy-2-acetylaminofluorene	6098-44-8	Yes	Yes	Yes
2-Acetylaminofluorene	53-96-3	Yes	Yes	Yes
2-Aminoanthracene ^a	613-13-8	Yes	Yes	Yes
2-Aminofluorene ^a	153-78-6	Yes	Yes	Yes
2-Amino-4-nitrophenol	99-57-0	No	No	No
4-Amino-2-nitrophenol	119-34-6	No	No	No
2-Amino-5-nitrothiazole	121-66-4	No	No	Yes
5-Azacytidine	320-67-2	Yes	Yes	Yes
Benzo[a]pyrene	50-32-8	Yes	Yes	No ^b
Benzyl chloride	100-44-7	Yes	Yes	Yes
bis(2-Chloro-1-methylethyl)ether, technical grade	108-60-1	No	Yes	Yes
Calcium chromate	13765-19-0	Yes	Yes	Yes
Captan	133-06-2	Yes	Yes	Yes
Chlorodibromomethane	124-48-1	No	Yes	No
3-(Chloromethyl)pyridine HCl	6959-48-4	Yes	Yes	No
C.I. Disperse blue 1	2475-45-8	No	Yes	No
C.I. Disperse orange 2 (1-amino-2-methyl-anthraquinone)	82-28-0	Yes	Yes	Yes
Cyclophosphamide monohydrate	6055-19-2	Yes	Yes	Yes
Cytembena	21739-91-3	No	Yes	Yes
2,4-Diaminoanisole sulphate	39156-41-7	Yes	Yes	Yes
2,4-Diaminotoluene	95-80-7	Yes	Yes	Yes
1,2-Dibromo-3-chloropropane	96-12-8	Yes	Yes	Yes
1,2-Dibromoethane	106-93-4	Yes	Yes	Yes
Dichloroacetic acid	79-43-6	Yes	Yes	No
Dichloromethane	75-09-2	Yes	Yes	Yes
2,6-Dichloro- <i>p</i> -phenylenediamine	609-20-1	No	Yes	No
1,2-Dichloropropane	78-87-5	No	Yes	No
Dichlorvos	62-73-7	Yes	Yes	Yes
Diglycidyl resorcinol ether, technical grade	101-90-6	Yes	Yes	No
3,3'-Dimethylbenzidine	119-93-7	Yes	Yes	Yes
Dimethyl hydrogen phosphite	868-85-9	No	No	Yes
Epichlorohydrin	106-89-8	No	Yes	No
1,2-Epoxybutane	106-88-7	No	No	Yes
Ethyl methanesulphonate	62-50-0	Yes	Yes	Yes
Formaldehyde	50-00-0	Yes	Yes	Yes
Furylfuramide (AF-2)	3688-53-7	Yes	Yes	No ^b
Glycidol	556-52-5	Yes	Yes	Yes
Hydrazine sulphate	10034-93-2	Yes	Yes	Yes
Methylazoxymethanol acetate	592-62-1	No	Yes	Yes
4,4'-Methylenedianiline 2HCl	13552-44-8	Yes	Yes	Yes
<i>N</i> -Methyl- <i>N'</i> -nitro- <i>N</i> -nitrosoguanidine	70-25-7	Yes	Yes	Yes
2-Naphthylamine	91-59-8	Yes	Yes	No ^b
<i>o</i> -Nitroanisole	91-23-6	Yes	Yes	Yes
5-Nitro-2-furaldehyde semicarbazone (AKA Nitrofurazone)	59-87-0	Yes	No	Yes
1-[(5-Nitrofurfurylidene)amino]hydantoin (AKA Nitrofurantoin)	67-20-9	Yes	No	No ^b
2-Nitro- <i>p</i> -phenylenediamine	5307-14-2	No	No	No
4-Nitroquinoline- <i>N</i> -oxide	56-57-5	Yes	Yes	Yes
<i>N</i> -Nitrosodimethylamine (dimethylnitrosamine)	62-75-9	Yes	Yes	Yes
<i>p</i> -Nitrosodiphenylamine	156-10-5	Yes	No	No
4,4'-Oxydianiline	101-80-4	Yes	Yes	Yes
Phenobarbital	50-06-6	No	Yes	No
Beta-Propiolactone	57-57-8	Yes	Yes	No
1,2-Propylene oxide	75-56-9	Yes	Yes	Yes
Quercetin	117-39-5	No	Yes	Yes
<i>p</i> -Quinone dioxime	105-11-3	No	No	No
Selenium sulphide	7446-34-6	Yes	Yes	Yes
Styrene oxide	96-09-3	Yes	Yes	No
1,2,3-Trichloropropane	96-18-4	Yes	Yes	Yes
Zinc dimethyldithiocarbamate (Ziram)	137-30-4	No	Yes	Yes

NT: not tested in that species or sex.

^a Carcinogens positive in Ames + MLA + MN but not tested or equivocal in CA. All others positive in Ames + MLA + CA.

^b Single-site tumours only within a species. However, different tumours may have arisen in rats and mice.

Table 6
 Tumour profiles for carcinogens negative in Ames plus MLA plus either MN or CA

Carcinogen	CAS number	Tumour profile		
		Rats and mice	Males and females	Multi-site
3-Amino-1,2,4-triazole (Amitrole)	61-82-5	Yes	Yes	Yes
<i>tert</i> -Butyl alcohol	75-65-0	Yes	No ^a	No ^b
5-Chloro- <i>o</i> -toluidine	95-79-4	No	Yes	Yes
Decabromodiphenyl oxide	1163-19-5	No	Yes	No
Diethanolamine	111-42-2	No	Yes	Yes
Di(2-ethylhexyl)phthalate	117-81-7	Yes	Yes	No
1,4-Dioxane	123-91-1	Yes	Yes	Yes
DL-Ethionine	67-21-0	Yes	Yes	No
Melamine	108-78-1	No	No	No
Methyl carbamate	598-55-0	No	Yes	No
Nitrilotriacetic acid, trisodium salt, monohydrate	18662-53-8	No	Yes	Yes
<i>N</i> -Nitrosodiphenylamine	86-30-6	No	Yes	No
Progesterone	57-83-0	Yes	Yes	Yes
Pyridine	110-86-1	Yes	Yes	No ^b
Reserpine	50-55-5	Yes	Yes	Yes
2,3,7,8-Tetrachlorodibenzo- <i>p</i> -dioxin	1746-01-6	Yes	Yes	Yes
1,1,1,2-Tetrachloroethane	79-34-5	No	Yes	No
Tris(2-ethylhexyl)phosphate	78-42-2	No	No	No

By inhalation.

^a Tumours in male rats but female mice.

^b Single-site tumours only within a species. However, different tumours may have arisen in rats and mice.

Table 7A
 Prevalence of trans-species, trans-sex or multi-site carcinogens amongst consistent positive or negative genotoxicity responses

	Trans-species carcinogens (%)	Trans-sex carcinogens (%)	Multi-site carcinogens (%) ^a	Trans-species, multiple site and trans-sex carcinogens (%)
Positive in Ames plus MLA plus either MN or CA	69.5 (41/59)	83.1 (49/59)	72.9 (43/59)	56 (33/59)
Negative in Ames plus MLA plus either MN or CA	50.0 (9/18)	83.3 (15/18)	55.6 (10/18)	33 (6/18)

^a Including those carcinogens producing single-site tumours within one species but tumours at different sites in different species.

Table 7B
 Prevalence of single-species, single-sex and single-site carcinogens amongst consistent positive or negative genotoxicity responses

	Single-species, single-sex, single-site carcinogens (%)
Positive in Ames plus MLA plus either MN or CA	6.8 (4/59)
Negative in Ames plus MLA plus either MN or CA	11.1 (2/18)

Table 8A
 Tumour profile for carcinogens positive in Ames but negative in MLA, MN or CA

Carcinogen	CAS number	Tumour profile		
		Rats and mice	Males and females	Multi-site
D&C red 9	5160-02-1	No	No	Yes
Trifluralin, technical grade	1582-09-8	No	No	Yes
Urethane ^a	51-79-6	Yes	Yes	Yes

^a There are a number of reports that urethane is negative in the Ames test. As noted in our previous paper [1] we decided to accept the deliberations of Zeiger [28] for this test with urethane.

Table 8B

Tumour profile for carcinogens (with results in rats and mice, males and females) positive in MLA but negative in Ames, MN or CA

Carcinogen	CAS number	Tumour profile		
		Rats and mice	Males and females	Multi-site
11-Aminoundecanoic acid	2432-99-7	No	No	Yes
Benzofuran	271-89-6	Yes	Yes	Yes
<i>o</i> -Benzyl- <i>p</i> -chlorophenol	120-32-1	No	No	No
Butylated hydroxytoluene	128-37-0	No	No	Yes
Chlorobenzilate	510-15-6	No	Yes	No
Chloroform	67-66-3	Yes	Yes	Yes
C.I. Direct blue 218	28407-37-6	Yes	Yes	No ^a
Cinnamyl anthranilate	87-29-6	Yes	Yes	Yes
Dicofol	115-32-2	No	No	No
<i>N,N</i> -Diethyl-2-thiourea	105-55-5	No	Yes	No
Ethylbenzene	100-41-4	Yes	Yes	Yes
Kepone (AKA Chlordecone)	143-50-0	Yes	Yes	No
Malonaldehyde sodium salt	24382-04-5	Yes	Yes	Yes
Methyl <i>tert</i> -butyl ether	1634-04-4	Yes	Yes	Yes
Piperonyl butoxide	51-03-6	Yes	Yes	No
Piperonyl sulphoxide	120-62-7	No	No	No
Toluene	108-88-3	No	Yes	Yes
Trichloroethylene (with and without epichlorhydrin)	79-01-6	Yes	Yes	Yes
2,4,6-Trichlorophenol;	88-06-2	Yes	Yes	No ^a
Trimethylthiourea	2489-77-2	No	No	No

^a Single-site tumours only within a species. However, different tumours may have arisen in rats and mice.

Table 8C

Tumour profile for carcinogens (with results in rats and mice, males and females) positive in MN or CA but negative in Ames and MLA

Carcinogen	CAS number	Tumour profile		
		Rats and mice	Males and females	Multi-site
DDT	50-29-3	Yes	Yes	Yes
17- β -Estradiol	50-28-2	Yes	Yes	Yes
Nitrilotriacetic acid	139-13-9	Yes	Yes	Yes
Oxazepam	604-75-1	No	Yes	Yes
Pentachloronitrobenzene	82-68-8	No	No	No
Saccharin, sodium ^a	128-44-9	No	No	No
Zeralenone	17924-92-4	No	Yes	Yes

^a Sodium saccharin induces bladder tumours via chronic irritation from the formation of precipitates at high doses, and the CA positive response was only obtained at concentrations >10 mM, so it is unlikely these effects are connected.

Table 9

Prevalence of trans-species, trans-sex or multi-site carcinogens amongst single-positive genotoxicity responses

	Trans-species carcinogens (%)	Trans-sex carcinogens (%)	Multi-site carcinogens (%) ^a	Trans-species, multiple site and trans-sex carcinogens (%)
Positive Ames only	33.3 (1/3)	33.3 (1/3)	100 (3/3)	33.3 (1/3)
Positive MLA only	55.0 (11/20)	70.0 (14/20)	60.0 (12/20)	45.0 (9/20)
Positive MN or CA only	42.9 (3/7)	71.4 (5/7)	71.4 (5/7)	42.9 (3/7)
Positive in any single test but Negative in the other two	50.0 (15/30)	66.7 (20/30)	66.7 (20/30)	43.3 (13/30)

^a Including those carcinogens inducing single-site tumours within one species, but inducing tumours at different sites in different species.

Table 10A

Numbers of carcinogens and non-carcinogens with 2/3 results positive or negative^a

	Ames plus MLA plus MN (%)	Ames plus MLA plus CA (%)
Carcinogens		
2/3 Tests positive	16/50 (32.0)	51/176 (29.0)
2/3 Tests negative	6/50 (12.0)	30/176 (17.0)
Non-carcinogens		
2/3 Tests positive	8/12 (66.7)	22/76 (28.9)
2/3 Tests negative	0/12 (0)	22/76 (28.9)

^a E and TC results excluded from analysis (counted as blank = no result).

Table 10B

Relative predictivity of carcinogen/non-carcinogen status when 2/3 results indicative (data from Table 10A)

Combination of three tests	Chemicals positive in 2/3 tests (%)		Relative predictivity that 2/3 positive results indicate a carcinogen A/B	Chemicals negative in 2/3 tests (%)		Relative predictivity that 2/3 negative results indicate a non-carcinogen C/D
	Carcinogens (A)	Non-carcinogens (B)		Non-carcinogens (C)	Carcinogens (D)	
Ames plus MLA plus MN	32.0	66.7	0.48	0	12.0	0
Ames plus MLA plus CA	29.0	28.9	1.00	28.9	17.0	1.70

As a battery of three *in vitro* tests most often gives a mixture of positive and negative results, we decided to calculate RP for predicting carcinogenicity when two tests were positive but one negative, and to calculate RP for predicting non-carcinogenicity when two tests were negative but one positive. The numbers of results falling into each category are shown in Table 10A and the RP values in Table 10B. It can be seen that in all cases the RP values are less than the meaningful value of two, and in some cases are <1, which means there would be a better chance of predicting the outcome of the carcinogenicity studies by flipping a coin.

As all of the RP values were worse for 2/3 tests than for 3/3 tests, we decided not to analyse further the RP from 1/3 tests.

5. Discussion and conclusions

Although limited data were available, our analyses of chemicals giving isolated positive genotoxicity results in one of the mammalian cell tests, suggest that revising the requirements for toxicity limits or highest test concentration, or to apply some "threshold" response that must be exceeded, would improve the poor specificity of the MLA and CA tests, but would at the same time significantly impair sensitivity. An examination of DNA reactivity within these small groups did not suggest any associations between DNA reactivity and level of toxicity or concentration needed for a minimum positive

response, or the magnitude of the genotoxic response. It is possible that if we examine all MLA and CA positives, and view separately those carcinogens known to interact with DNA, and/or known to have structural alerts, we may find that the "profile" of the genotoxicity results (concentration, level of toxicity, magnitude of response) would be more useful in predicting carcinogenic outcome. This is currently being explored and will be the subject of a future manuscript.

An analysis of tumour profiles indicated that trans-species, trans-sex and multi-site carcinogens are much more prevalent amongst those chemicals giving positive results in all three *in vitro* genotoxicity tests than amongst those giving negative results in all three tests. This is consistent with the relative predictivity (RP) analysis we reported previously [1] where chemicals giving positive results in all three *in vitro* tests would be at least 3× more likely to be rodent carcinogens than non-carcinogens. However, unexpectedly, single-species, single-sex and single-site carcinogens were not prevalent amongst those chemicals giving negative results in all three *in vitro* tests. This suggests that non-genotoxic carcinogens are just as likely to produce single-site tumours in one sex of one species as to produce multi-site tumours in both sexes of rats and mice. It was also surprising that multi-site carcinogens were highly prevalent amongst those chemicals positive in one but negative in the other two genotoxicity tests. Multi-site carcinogens were particularly prevalent amongst Ames-positive chemicals, but the

database was small and further examples are needed for a rigorous evaluation. Thus, it appears that the profile of genotoxicity results cannot be used with any confidence to predict the tumour profile in subsequent carcinogenicity studies. This is consistent with a more modern view that mutational events and chromosomal rearrangements are, although required for tumourigenesis, not a major driving factor for prevalence and incidence of tumours in lifetime rodent carcinogenicity tests with chemical compounds [8]. In such long-term experiments, hormonal disturbances, genetic strain background, general tumour promotional effects, etc. are very important. Such effects may equally be exerted by many of the investigated chemicals that also possess genotoxic properties.

Although our previous RP analysis [1] indicated that chemicals giving positive results in all three *in vitro* tests were $>3\times$ more likely to be rodent carcinogens than non-carcinogens, and that chemicals giving all negative results were $>2\times$ more likely to be non-carcinogens than carcinogens, in industry mixed positive and negative results are most common. As might be expected, RP analysis of “mixed” genotoxicity results revealed that these cannot be used to predict carcinogenic outcome. It should be noted that predictivity analyses are dependent on the choice of compounds analysed and influenced by the prevalence of carcinogens and non-carcinogens in the data set. Different predictivities from those presented here could be obtained with different numbers of carcinogens and non-carcinogens in the data set. Also, only some of the mechanisms (e.g. genotoxic) giving rise to cancer are the same as those leading to mutations and chromosomal aberrations, and non-genotoxic mechanisms would not be expected to be predicted by genotoxicity assays. Therefore, the predictivity of genotoxicity tests for cancer will depend on the mechanism.

As indicated previously [1], the disappointing findings from these analyses suggest it may be time for a complete rethink with regard to *in vitro* genotoxicity testing. It does not appear that a redefinition of the conditions (cytotoxicity, solubility, etc.) for *in vitro* testing will improve the low specificity for prediction of rodent tumourigenesis, and therefore new, more robust assays may be needed. We should also consider, however, that the rodent bioassay is not relevant for predicting human carcinogenicity in many cases, and therefore new, more robust carcinogenicity assays may also be needed.

Regarding the availability of complete data sets, or of critical information (e.g. cytotoxicity) related to single-assay results, the authors are astonished that only small subsets of chemicals have full data sets. Hence, despite more than 30 years of genotoxicity testing, the published literature still contains large data gaps. These gaps cer-

tainly do not facilitate far-reaching and important conclusions on correlations between important parameters. Thus in many cases our only recourse is to some kind of patchwork analysis when working with published data. As expected, most adduct data have been reported for the carcinogens and there are very few studies of adducts formed by non-carcinogens.

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Summary

Summary of major conclusions from the 4th IWGT, San Francisco, 9–10 September, 2005

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1. Introduction

Seven individual working groups addressed either specific aspects of the strategy for genetic toxicology testing or the design of protocols for specific assays. Comprehensive summaries of the outcome of each Working Group (WG) are given in the individual WG reports. The following outline summarises the main points that either differ from existing published recommendations (as in the case of mouse lymphoma test and *in vivo* micronucleus assay) or are key features to be considered in the development of new guidelines for an improved testing strategy.

2. Protocol design

Historically, there has been a tendency to recommend protocols that are as extensive as possible in the hopes of not failing to identify a genotoxic chemical. Based

on previous experience [1–3] and the large databases that are now available for all of the assays evaluated in this workshop, it is clear that no assay, however extensive the protocol, can detect all genotoxic chemicals. This has led to the adoption of combinations of tests for genotoxicity screening (*i.e.* the use of test batteries). Further, recent data [4–6] have shown that *in vitro* assays commonly employed in regulatory screening strategies are often positive for agents considered not to present a significant genotoxic or carcinogenic risk *in vivo*. The rate of positive responses for non-carcinogens becomes exceptionally high when test batteries are employed [4]. Therefore, the WGs dealing with test methods were asked to define the basic features of the protocol that are essential for the detection of the majority of genotoxic agents. They were then encouraged to identify special cases, namely compounds or classes of compounds for which specific protocol adaptations might be needed.

2.1. *In vivo* erythrocyte micronucleus assay

Reaffirming this WG's report from the 2nd workshop [7], it was agreed that flow cytometric systems to detect

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the induction of micronucleated immature erythrocytes have advantages over manual scoring in that they give good reproducibility, are rapid and provide improved statistical power. A major new conclusion was that flow cytometric analysis of rat peripheral blood is acceptable as the sole assay endpoint for screening purposes. Previously, bone marrow analysis was required as part of the routine assay. This new conclusion allows integration of the micronucleus test with routine toxicology studies in either rats or mice, as only small (μL) quantities of peripheral blood are required. Data were presented (some still unpublished) that suggested that flow cytometry of blood reticulocytes may have the potential to allow monitoring of chromosome damage in other species. This could include dogs and non-human primates as part of routine toxicology studies, and humans in clinical trials or as part of biomonitoring studies, as long as the potential confounding effects of splenic activity are considered. At present the use of anti-CD71 fluorescent staining has been the most extensively validated, but other flow cytometric methods may be chosen as long as they meet the validation criteria previously published by this group [7]. The group also confirmed that rat peripheral blood reticulocytes can be used as the sole assay endpoint when young reticulocytes are analysed under proper assay protocol and sample size.

This WG also reviewed the assay using tissues other than those from the haematopoietic system, e.g. liver, colon, skin and testes. The group consensus was that the assay using young rat liver as the target organ to detect micronucleus induction was acceptable as an alternative to approaches such as hepatectomy in adult rats. Assay results from other tissues were incorporated into the database published previously [7].

The extension of the application of a single dose level assay was proposed, but the WG decided not to suggest any alteration to the current recommendations in the OECD guideline 474 for use of a single dose level only in a limit test.

2.2. *In vivo comet assay workgroup*

The Comet assay has been considered previously by IWGT [8]. At this most recent meeting, the WG discussed aspects of study design and conduct that needed clarification, with the primary focus being on the alkaline ($\text{pH} > 13$) version of the assay as it is applied to *in vivo* rodent systems. With regard to the numbers of dose levels required for a valid *in vivo* test, due to the lack of sufficient test data to demonstrate that downturns in dose response do not exist for this endpoint, it was concluded that a single dose level would not be sufficient

even when conducted at the limit dose of 2 g/kg. A discussion on the relative merits of different methods for processing solid tissues (i.e. using isolated nuclei versus isolated cells) did not result in a conclusion that one method was superior to the other. However, it was recognised that more data are needed, and it was recommended that the proposed international Comet assay validation study include investigation of both processing methods. The impact of cytotoxicity on DNA migration formation was discussed, and there was consensus agreement that measures of cytotoxicity need to be included in all studies so that the impact of cytotoxicity on interpretation of Comet assay data can be addressed. For *in vivo* studies, histopathology was recognised as the most reliable way to identify the presence of apoptosis or necrosis in solid tissues, but it was agreed that there is a need to standardise the presentation of histopathological findings, as is normally done for chronic animal toxicity studies.

Scoring of comets by manual methods and image analysis was discussed, as were the various measures of DNA migration. The WG agreed that image analysis is preferred but not required, and that the percentage of tail DNA is the measure that seems most linearly related to dose and the easiest to understand, but other measures of DNA migration are equally acceptable. There was agreement that if a measure of tail moment is used, then percentage of tail DNA and tail length data should also be presented. It was also recommended that negative control treatments should exhibit measurable DNA migration as a means for evaluating run-to-run variability across time. Such historical data can be used as part of the acceptance criteria for new studies. In addition, it was recognised that, with sufficient migration in the negative controls, substances that induce DNA cross-linking could be detected.

2.3. *Mouse lymphoma thymidine kinase gene mutation assay*

This WG has met informally on a number of occasions in addition to the formal meetings at the Washington [9] and Plymouth [10] workshops, and has recently published recommendations on assay acceptance criteria, positive controls and data evaluation [11]. The WG met again informally during the 4th IWGT workshop, and the Steering Committee decided to include its report along with the formally constituted WGs at this meeting.

The main objectives of the San Francisco workshop were to review various aspects of the 24 h treatment protocol for the mouse lymphoma assay (MLA). The WG agreed to continue their support of the International Conference on Harmonisation (ICH) recommendation that

the MLA assay should include a 24-h treatment (without S-9) in those situations where the short treatment (3–4 h) gives negative results. Recommendations were made concerning the acceptable values for the negative/solvent control (mutant frequency, cloning efficiency and suspension growth) and the criteria to define an acceptable positive control response. Consensus was also reached concerning the use of both the global evaluation factor (GEF) and appropriate statistical trend analysis to define positive and negative responses.

3. Classification of genotoxic agents and strategy for risk assessment

At the Plymouth workshop a WG discussing strategies for classification and risk assessment of genotoxic agents was first established. A number of key conclusions were reached [12] but a number of important issues were not discussed. At the present workshop, four individual WGs addressed the key issues identified previously.

3.1. Strategy for genotoxicity testing: hazard identification and risk assessment in relation to *in vitro* testing

The objective of this WG was to develop recommendations for interpretation of results from tests commonly included in regulatory genotoxicity test batteries, and to propose an appropriate strategy for follow-up testing when positive *in vitro* results were obtained in these assays. Firstly, it was agreed that in most cases, a chemical found negative in an initial regulatory battery of tests (e.g. as proposed by ICH for pharmaceuticals [13]), does not require follow-up testing. However, some examples where metabolism may not be appropriate, and where positive *in vivo* results or tumours are subsequently found would require additional testing. The topics of metabolism and of rodent carcinogens that are negative in the standard screening battery were discussed by other subgroups and are summarised in the following sections. A structurally alerting chemical might trigger additional testing, but generally only if the negative *in vitro* battery was considered likely not to be sensitive to that chemical class.

The WG was able to agree and define the circumstances in which the pattern and magnitude of positive results *in vitro* are such that there is very low or no concern, and no further testing is needed (e.g. non-reproducible or marginal responses). Consideration of historical control data is important in this context.

The criteria for determining when follow-up testing is needed include factors such as evidence of reproducibility, level of cytotoxicity at which increased DNA damage or mutation frequency is observed, relationship of results to the historical control range of values, and total weight of evidence across assays.

When follow-up testing is needed, it should be based on the knowledge about the mode of action that is available, gleaned from the published literature and previous experimental observations. Initial findings and available information on the biochemical and pharmacological nature of the agent should allow conclusions as to whether the responses are consistent (or not) with certain molecular mechanisms. Follow-up tests should be chosen so as to be sensitive to the endpoints known to be capable of inducing the initial observed response, and non-standard tests may be more appropriate than standard tests in this regard.

The WG recognised that genotoxic events might arise from processes other than direct reactivity with DNA, that these mechanisms may often have a non-linear, or threshold, dose–response relationship. Such dose–response relationships are often also associated with indications of an overload of the biochemical processes within the test organism, and hence may not linearly relate to what is observed at lower concentrations. In cases in which a non-linear or threshold response can be demonstrated, it may be possible to determine an exposure level below which there is negligible concern for humans.

3.2. Strategy for genotoxicity testing: metabolic considerations

This WG considered the role of metabolism in producing *in vitro* genotoxicity results that may not be predictive of rodent carcinogenicity, or relevant for the evaluation of human risk. The basic question is whether a human metabolite(s) of interest is (are) represented in the assays used for genotoxicity and carcinogenicity testing. Alternative (and more “competent”, *i.e.* capable of generating the metabolite of interest) metabolic activation or test systems may need to be evaluated. Since the default species for carcinogenicity testing are rats and mice, the impact of human metabolism relative to these species needs to be assessed in most cases. Also, appropriate action triggers, based on the extent of human exposures (*i.e.* “major” or unique), consideration of structural knowledge of the metabolite (e.g. evidence of reactivity), and evidence of genotoxicity obtained with conventional metabolic activation systems (e.g. induced liver S9), need to be defined. The WG emphasised the

need to consider these points in relation to the timing of human ADME studies in the case of pharmaceutical development. They therefore proposed both proactive and retroactive strategies to assess metabolite genotoxic potential, including use of an alternative/optimised *in vitro* metabolic activation system or direct testing of metabolites, and study of both point mutations and chromosomal aberrations.

The WG also identified specific areas where there is insufficient understanding, experience or scientific basis to achieve full consensus. The definition of a quantitative human metabolite exposure as a trigger for safety assessment requires broader discussions and debate (*e.g.* on the significance of absolute or relative metabolite abundance) to reach consensus. The WG expressed the desire to consider further an absolute exposure definition in order to better support risk assessment, analogous to the threshold of toxicological concern (TTC) concept. This absolute exposure definition could be associated with a re-definition of the highest suitable test concentrations for *in vitro* assays. Justification for such re-definition could be supported by the capability limitations for most biochemical/metabolic processes (K_m s) within tissues and cells, the overload of which can generate results of questionable meaning. A universal recommendation for the timing of human ADME studies in the case of pharmaceutical development was not agreed, and neither was how to use structural knowledge and/or physico-chemical properties (*e.g. in silico* systems, literature, or expert analysis) of metabolites to assess safety *in lieu* of genotoxicity testing. Lastly, the group was unable to define discrete triggers for direct metabolite testing vs. use of an alternative activation system. This was largely driven by the inability to define a universal metabolite exposure level that was considered “sufficient” to characterise potential genotoxic hazards when generated by an alternative activation system.

3.3. Increases in micronucleated bone marrow cells in rodents that do not indicate genotoxic hazards and identification of *in vivo*-only positive compounds in the bone marrow micronucleus test

This WG reviewed the growing body of (published and unpublished) evidence that compound-related disturbances in the physiology of rodents used for bone marrow micronucleus tests can result in positive responses not relevant to human exposures. These disturbances include significant and sustained increases or decreases in core body temperature, increases in erythropoiesis in the bone marrow (*e.g.* following prior toxicity to erythroblasts or by direct stimulation of division in

these cells), and inhibition of protein synthesis. The potential for a test compound to operate through any one of these modes of action should be considered when interpreting the results of *in vivo* micronucleus studies.

Not all compounds that are positive (or more readily detected) in an *in vivo* micronucleus test, yet give negative or marginal results for *in vitro* genotoxicity, operate through the kinds of physiological disturbances described above. Reasons may be due to metabolic differences, the influence of gut flora, higher exposures *in vivo* compared to *in vitro*, and effects on pharmacology, in particular folate depletion. A number of receptor kinases fall into the category of pharmacologically mediated activity. Amongst the compounds reviewed by the WG, many interfere with cell cycle kinetics and this can result in either aneugenicity or chromosome breakage. It is possible that some of these compounds could be detected *in vitro* if a specific test were chosen as part of the test battery, but the “correct” choice may not always be obvious when testing a compound of unknown genotoxicity. The WG considered that a sufficient number of “unique” *in vivo* positive compounds exist that it may not be appropriate, at this time, to eliminate the *in vivo* micronucleus test from those batteries in which it is an integral part. However, as the relevant compounds act *via* a number of specific mechanisms, *e.g.* compounds metabolised by CYP2E1, folate inhibitors, kinase inhibitors, *etc.*, it may be possible to consider additional modified *in vitro* testing when such compounds are negative in conventional *in vitro* assays.

3.4. Follow-up testing of rodent carcinogens not positive in the standard genotoxicity testing battery

This WG focussed on when it would be appropriate to conduct additional genotoxicity studies, as well as what types of studies, if the initial standard battery of tests is negative, but tumour formation is observed in the rodent carcinogenicity assessment. Standard genetic toxicology tests can help to determine the mode of action for carcinogenesis (genotoxic vs. non-genotoxic) but there are limitations. The entire toxicological profile of a compound (*e.g.* structure activity relationships, the nature of the tumour finding, metabolic profiles) needs to be considered before conducting any additional testing. If the need for further genotoxicity testing is identified, test models for investigating genotoxicity in the tumour target organ(s) are highly recommended. Transgenic mutation assays, the Comet assay, or DNA binding studies are considered appropriate for this purpose. However, it should be remembered that only those assays that directly assess the induction of mutations, in particular

following the repeat dosing protocol as previously recommended [14,15], can provide definitive information as to the ability of the compound to induce mutation. A positive finding in any genotoxicity study indicates a genotoxic potential for the compound, but not necessarily that genotoxicity, or more specifically DNA reactivity, is the principal mode of carcinogenic action. It requires a thorough weight of evidence assessment of all the available and relevant information, including effect and/or extent of exposure at the target sites, in order to decide whether tumourigenesis is mediated *via* a genotoxic mode of action.

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Editorial

The International Workshops on Genotoxicity Testing (IWGT): History and achievements

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1. The objectives and structure of the IWGT

Three workshops have been organised previously under the auspices of the International Workshops on Genotoxicity Testing (IWGT). Recognising the success of these earlier workshops, the International Association of Environmental Mutagen Societies (IAEMS) formalised these workshops in 2002 under the IAEMS umbrella and agreed that they would be held on a continuing basis in conjunction with the International Conferences on Environmental Mutagens (ICEM) that are held every 4 years. In this way, an ongoing process of international discussion and harmonisation of testing methods and testing approaches has been established that can take advantage of the international experts who attend these meetings. These ongoing workshops will help to ensure that different recommendations for methodology in these new assays do not arise in different parts of the world, and thus avoid situations that could lead to:

- Unnecessary duplication of testing to satisfy local requirements.
- Variations in the test performance.
- Potential differences in test outcome.
- Unjustified differences in the use of test data for description, assessment and management of risk.

The IWGT process is implemented through working groups of recognised international experts from industry, academia and the regulatory sectors, with due attention to geographical, disciplinary and sector balance. For each working group, a chairperson, deputy chair, and rapporteur are appointed. Experts in the science of each topic are invited to bring experimental

data to bear on the discussions; the remit of each group is to derive recommendations based on data, and not on unsupported opinion or anecdotal information. Geographical as well as scientific balance has been attempted within these groups as can be seen from the composition of the groups. There are several objectives sought in bringing together representatives from around the world to share their experiences in generating and evaluating genotoxicity data from a variety of methodological and strategic approaches. We strive to:

- Attain a greater understanding of true test performance from a wide database.
- Provide recommendations that minimise misinterpretation.
- Recognise that no single assay can detect every genotoxin.
- Achieve compromise for the sake of harmonisation or acceptance that more than one approach is both reasonable and valid.

Because of the IWGT approach, in particular development of data-driven consensus by the key global experts from academia, government and industry, IWGT recommendations have been seen as state-of-the-art and have high credibility. These recommendations serve as important supplements to established regulatory guidelines and provide a sound basis for updating those guidelines as the state of science advances.

2. Achievements of previous workshops

The first IWGT Workshop was held in Melbourne, Australia as a satellite to the International Conference