



## Fourth International Workgroup on Genotoxicity testing: Results of the in vivo Comet assay workgroup

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### Abstract

As part of the Fourth International Workshop on Genotoxicity Testing (IWGT), held 9–10 September 2005 in San Francisco, California, an expert working group on the Comet assay was convened to review and discuss some of the procedures and methods recommended in previous documents. Particular attention was directed at the in vivo rodent, alkaline (pH >13) version of the assay. The aim was to review those protocol areas which were unclear or which required more detail in order to produce a standardized protocol with maximum acceptability by international regulatory agencies. The areas covered were: number of dose levels required, cell isolation techniques, measures of cytotoxicity, scoring of comets (i.e., manually or by image analysis), and the need for historical negative/positive control data. It was decided that a single limit dose was not sufficient although the required number of dose levels was not stipulated. The method of isolating cells was thought not to have a qualitative effect on the assay but more data were needed before a conclusion could be drawn. Concurrent measures of cytotoxicity were required with histopathological examination of tissues for necrosis or apoptosis as the "Gold Standard". As for analysing the comets, the consensus was that image analysis was preferred

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but not required. Finally, the minimal number of studies required to generate a historical positive or negative control database was not defined; rather the emphasis was placed on demonstrating the stability of the negative/positive control data. It was also agreed that a minimum reporting standard would be developed which would be consistent with OECD *in vivo* genotoxicity test method guidelines.

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## 1. Introduction

The Comet assay, also referred to as the single cell gel electrophoresis (SCG or SCGE) assay, is a rapid, visual, and quantitative technique for measuring DNA damage in eukaryote cells [1–7]. Under alkaline (pH >13) conditions, the assay can detect single and double-stranded breaks, incomplete repair sites, alkali labile sites, and also possibly both DNA–protein and DNA–DNA cross-links, in virtually any eukaryotic cell population that can be obtained as a single cell suspension.

As the Comet assay has gained in popularity as a standard laboratory technique for evaluating DNA damage and/or repair, the question of how it can be applied within the current regulatory strategy of genotoxicity testing has become a matter of debate [8]. The primary focus of interest has been on the alkaline (pH >13) version, as it is applied to *in vivo* genotoxicity testing strategies [6,8–11]. This is especially important now that acceptance of the *in vivo* Comet assay by regulatory agencies in a number of countries is growing, with some already citing it as an acceptable second test [12,13]. Part of the reason for this acceptance has been the development of a standard protocol and acceptance criteria for the assay through the IWGT working parties [6] and international Comet assay workshops [10]. The purpose of this meeting was to review the procedures and methods recommended in previous guidance documents [6,10], with particular attention being given to the *in vivo* rodent alkaline (pH >13) assay.

Prior to the actual IWGT session, the members of the working group were assigned to different subgroups with each subgroup responsible for reviewing a particular topic. At the IWGT meeting, the subgroups presented their conclusions and recommendations to the complete working group for consideration and discussion, with input from the audience. This report provides an overview of the topics discussed and the consensus reached by the working group with regard to the *in vivo* rodent alkaline (pH >13) Comet assay (hereafter designated as the *in vivo* Comet assay).

## 2. Discussion topics and recommendations

### 2.1. Multiple dose levels versus limit dose

For this topic, the discussions focused on the number of dose levels to be used in the *in vivo* Comet assay, especially for cases where there is no evidence of animal toxicity. For example, as stated in the Organisation for Economic Development and Co-operation (OECD) test guideline 474 (rodent bone marrow micronucleus test), a chemical which shows no sign of toxicity up to the limit dose of 2 g/kg need only be tested at that dose [14].

The consensus of the working group was that a single dose level was not sufficient even for substances that could be tested at the limit dose of 2 g/kg. The reasoning behind this consensus was that there were not yet sufficient data to conclude that downturns in the dose response curve (i.e., a bell shaped dose response curve) would not occur for some substances due, for example, to altered bioavailability at higher dose levels. The 'downturn phenomenon', was also a matter of discussion among the members of the IWGT *in vivo* micronucleus (MN) group [15], where this phenomenon has been shown to occur in some MN studies although the underlying mechanism(s) have yet not been identified. In such cases, positive responses occurred at the second highest dose level. Therefore, it was concluded that the use of a single dose level could lead to problems in data interpretation. There was also the feeling that positive responses at multiple dose levels could reinforce the biological relevance of the result.

### 2.2. Cell isolation process

The background behind this discussion point was the disparate *in vivo* rodent Comet assay data sets published about *ortho*-phenyl phenol. When tested by Sasaki et al. [16], *ortho*-phenyl phenol was positive in the mouse using stomach, liver, kidneys, lung, urinary bladder as target organs. However, when tested by Bomhard et al. [17] in the same species, *ortho*-phenyl phenol was negative in the tissues investigated. One possible explanation for the difference in results was how the tissues were pro-

cessed. In Sasaki et al. [16], isolated nuclei were used, whereas in Bomhard et al. [17], isolated whole cells were used. Although there was much discussion on this subject along with data from two groups which showed that the method of tissue processing (i.e., isolated cells versus isolated nuclei) did not have a qualitative effect on the comet response, it was decided that more data were needed before a conclusion could be made and that any international validation study should consider both processing methods.

### 2.3. Concurrent measures of cytotoxicity

Cell death is a process that leads to DNA degradation. Thus, all test methods that evaluate primary DNA damage, including the Comet assay, have the potential to detect agents that are cytotoxic rather than genotoxic. However, since DNA damage in the Comet assay is assessed at the level of the individual cell, it is possible in some cases to identify dead or dying cells by their specific image. Under alkaline conditions, necrotic or apoptotic cells can result in comets with small or non-existent head and large diffuse tails [18] as observed in *in vitro* studies following treatment with cytotoxic, non-genotoxic compounds [19–21]. However, such images may not be uniquely diagnostic for apoptosis or necrosis since they may also be detected after treatment with high doses of radiation or high concentrations of strong mutagens [22]. For the *in vivo* Comet assay, only limited data are available to establish whether cytotoxicity results in increased DNA migration in tissues of experimental animals. It was discussed that migration levels detected at the time of sampling are dependent on the tissue and the slope of the dose response for a particular tested compound. For some chemicals, despite the presence of necrosis or apoptosis in target organs such as kidneys [23], testes [24], and liver or duodenum [11], an increase in DNA migration was not observed. In contrast, enhanced DNA migration was seen in cells isolated from the livers of mice dosed with carbon tetrachloride under conditions that also resulted in necrosis, as determined from a histopathological examination [25]. It is also possible that at cytotoxic doses, a decrease in DNA migration may be detected due to the loss of heavily damaged or dying cells during sample processing and/or electrophoresis.

There was consensus on the need to include measures of cytotoxicity and to address the possible effects of cytotoxicity in comet data interpretation. The suggested methods included: a dye exclusion test for membrane integrity and metabolic competency [26] and determining the frequency of cells with low molecular weight

DNA using the neutral diffusion assay [6,27]. The "Gold Standard" for assessing levels of necrosis and apoptosis when an *in vivo* Comet assay gave positive results was concluded to be histopathology. It was pointed out that there was a need to standardize ways to present histopathological findings.

### 2.4. Image analysis (IA) or manual scoring

A variety of commercial and freeware IA systems are available for assessing DNA migration in individual cells. In addition, manual scoring can also be used to determine the length of DNA migration, the percentage of cells with and without migration, or the proportion of comets that can be "binned" into various migration categories (generally one of five, from undamaged to maximally damaged depending upon the tail length) [28]. However, a limitation of this categorization method may be a potential inability to take into account the density or shape of tails which can include short but dense tails and long but sparse tails depending on the effects of compounds tested. With IA systems, the most common parameters analyzed are the percentage DNA in the tail (% tail DNA), tail moment, and tail length and/or image length (referring to nucleus plus migrated DNA). The percentage DNA in the tail is generally defined as the fraction of DNA in the tail divided by the amount of DNA in the cell multiplied by 100, while the tail length is the distance from the middle or the estimated perimeter of the comet head to the last visible signal in the tail. There are several measures of tail moment. The one most commonly used, called the Olive tail moment, is the product of the amount of DNA in the tail and the mean distance of migration in the tail [29]. It is important to note that some parameters (e.g., tail moment) may be calculated differently among IA systems and this can lead to quantitative differences, which can be problematic when comparing inter-laboratory data.

The consensus was that IA is preferred but not required. Heavily damaged cells exhibiting a specific microscopic image (commonly referred to as hedgehogs) consisting of small or non-existent head and large and diffuse tails [18] potentially represent dead or dying cells and may be excluded from data collection. However, determining their frequency may be useful for data interpretation. If IA is used, then % tail DNA appeared to be the most linearly related to dose and the easiest to intuitively understand [30]. However, there was no consensus that this IA measure of DNA migration must be the only one used. If some measure of tail moment is used, then % tail DNA and tail length data must be provided also. Data on the distribution of migration among

cells should also be presented. This is accomplished by sorting cells within "bins" based on the metric used to evaluate DNA migration and presenting the data as the percentage of cells within each bin.

### 2.5. Historical negative/positive control data

The minimal number of studies needed was not defined but enough studies need to be conducted to demonstrate the stability of the negative/positive control data. Criteria for determining the acceptability of new studies, based on historical control data, should be developed for each tissue by each laboratory. There was discussion on the background responses for negative controls and there was a consensus that negative controls should exhibit measurable DNA migration. However, there was no consensus as to how much mean DNA migration was needed among the control cells. It was recognized that the ability to detect chemicals that predominantly induce DNA cross-linking, damage that reduces the ability of the DNA to migrate, depends on the extent of average DNA migration in the control cells. Investigators who are attempting to detect such chemicals will need to demonstrate the adequacy of their *in vivo* Comet assay protocol for this purpose.

### 2.6. Minimal reporting standards

It was agreed that to ensure that all studies can be independently evaluated, a minimum reporting standard for regulatory submissions and publications will be developed. This standard will be consistent with OECD *in vivo* genetic toxicology test method guidelines. Previous publications have covered some aspects of protocol design and reporting [10,31].

### 2.7. Conclusions

In recent years, the *in vivo* Comet assay has become increasingly used for regulatory purposes and acceptance of the test method by regulatory agencies is growing (reviewed in [8]). However, several issues on study design and on data analysis and assessment that required further investigation remain and it was these issues that were discussed by the IWGT working group. In addition to guidance provided in previous published guidelines [6,10], consensus among the participants of the working group was reached with regards to the selection of the number of dose levels, the need to include concurrent measures of cytotoxicity in the studies, the adequacy of manual scoring, and the need to develop historical control data. Consensus was also reached on the need

for an international validation study to stringently evaluate the reliability and accuracy of the *in vivo* Comet assay (as well as *in vitro* versions). This validation study would compare, among other protocol issues, test results obtained using isolated nuclei versus isolated whole cells from various tissues.

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During the preparation of this report, the Japanese Center for the Validation of Alternative Methods (JaCVAM) announced that they were forming a study management team including participants from the European Centre for the Validation of Alternative Methods (ECVAM), the US Interagency Coordinating Committee on the Validation of Alternative Methods (ICCVAM), US National Toxicology Program Interagency Center for the Evaluation of Alternative Toxicological Methods (NICEATM), and the Mammalian Mutagenicity Study Group/Japanese Environmental Mutagen Society (MMS/JEMS) to conduct an international Comet assay validation study. This validation study is scheduled to start in late 2006 and will focus initially on the *in vivo* Comet assay, to be followed by the validation of various *in vitro* Comet assays. ECVAM has also implemented an initiative to evaluate the validity of the *in vitro* Comet assay.

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## Mouse lymphoma thymidine kinase gene mutation assay: Meeting of the International Workshop on Genotoxicity Testing, San Francisco, 2005, recommendations for 24-h treatment

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### Abstract

The Mouse Lymphoma Assay (MLA) Workgroup of the International Workshop on Genotoxicity Testing (IWGT), comprised of experts from Japan, Europe and the United States, met on September 9, 2005, in San Francisco, CA, USA. This meeting of the MLA Workgroup was devoted to reaching a consensus on issues involved with 24-h treatment. Recommendations were made concerning the acceptable values for the negative/solvent control (mutant frequency, cloning efficiency and suspension growth) and the criteria

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to define an acceptable positive control response. Consensus was also reached concerning the use of the global evaluation factor (GEF) and appropriate statistical trend analysis to define positive and negative responses for the 24-h treatment. The Workgroup agreed to continue their support of the International Committee on Harmonization (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.

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**Keywords:** Mouse lymphoma assay; In vitro mutation; Thymidine kinase

## 1. Introduction

The Mouse Lymphoma Assay (MLA) Workgroup of the International Workshop on Genotoxicity Testing (IWGT), comprised of experts from Japan, Europe and the United States, met on September 9, 2005, in San Francisco, CA, USA. This meeting of the MLA Workgroup was devoted to reaching a consensus on issues related to the use of 24-h treatment.

The first meeting of the MLA Workgroup was held as a part of the International Workshop on Genotoxicity Testing Procedures in Washington, DC, in the spring of 1999. Since that time, the Workgroup has been working to address three main issues of importance to the assay. These include: (1) the conduct of a data-based analysis and a final recommendation for using the relative total growth (RTG) as the appropriate measure for cytotoxicity; (2) the criteria for data acceptance (based on the negative/vehicle and positive controls) and a new method [the global evaluation factor (GEF)] for data evaluation; (3) the issues related to the International Conference on Harmonization of technical requirements for registration of pharmaceuticals for human use (ICH) recommended use of a 24-h treatment time (including the ability of the assay to detect aneugens). This is the 5th meeting of the Workgroup in which consensus has been reached and reported. The previous four meetings are reported in Moore et al. [1–4].

## 2. 24-h treatment

Following the ICH recommendation requiring that the MLA be conducted using a 24-h treatment (without S-9) in situations where the short treatment (3–4 h) was negative, laboratories have conducted such experiments. With the goal of determining the approximate frequency at which chemicals require a 24-h treatment to express their mutagenic potential, and to make recommendations concerning the conduct of the 24-h treatment, the Workgroup solicited data from laboratories conducting both the agar and microwell versions of the assay.

Laboratories were asked to evaluate data obtained since 2002 (some earlier data were submitted) and to

base a positive result on the assay evaluation criteria in force for each participating laboratory at the time of the performance of the assay. They were asked to identify: (i) compounds uniquely positive following 24-h treatment in the absence of S-9, (ii) compounds positive following short (3- or 4-h) treatment times in the absence of S-9, but negative following 24-h treatment in the absence of S-9, and (iii) compounds either known or suspected to be aneugens.

An estimated 990 data sets (compounds) were reviewed by the individual laboratories to identify compounds fitting into one of these three categories. The majority of assays (approximately 900) were performed using the microwell method; approximately 90 assays used the agar method. Of these approximately 990 tests, 71 (7%) were positive, as assessed by the individual laboratory. It should be noted that the nine laboratories that submitted data only provided the actual data for these 71 test agents. These data were compiled, analyzed and summarized by three members of the Workgroup and the summary information was used in the deliberations of the entire Workgroup. It should be noted that only five data sets were submitted for the third category (known or suspected aneugens). This small number was considered insufficient to permit meaningful analysis and although the data was compiled, there was no discussion of this category by the Workgroup.

### 2.1. Category 1 responses

A total of 56 data sets (54 in the microwell assay and 2 in the agar assay) were uniquely positive following 24-h treatment in the absence of S-9. The negative controls for each of the 56 data sets were evaluated to determine whether they met all of the revised assay acceptance criteria agreed in the 3rd Workgroup meeting, held in Plymouth in 2002 [3] and the acceptable range for solvent control mutant frequencies (MF) agreed in the 4th Workgroup meeting held in Aberdeen in 2003 [4]. The application of these acceptance criteria eliminated 19 data sets. See Fig. 1 for a breakdown as to the causes of the unacceptable experiments.

A number of the remaining 56 data sets showed only a very small induced MF (IMF). In fact, the maximum

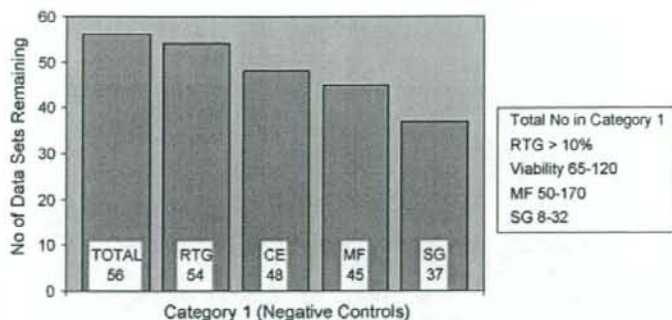


Fig. 1. Column graph demonstrating how many Category 1 (unique 24-h positive) data sets would be excluded as the acceptance criteria [4] are applied sequentially left to right. Note that SG as described in this instance were the values recommended for the short term treatment. They were applied to the 2 day expression period and excluded the 24-h treatment.

increase in MF observed at any data point (compared to concurrent controls) did not exceed the GEF in 26 out of 56 data sets (Fig. 2). Therefore, these data sets did not meet the new criteria required for a positive response, as agreed in the 4th Workgroup meeting in Aberdeen in 2003 [4]. Positive responses are defined as those that exceed the GEF and show statistically positive dose response trends (see discussion below concerning data evaluation).

After applying both the acceptance criteria for the negative controls and the GEF, the number of unique 24-h positive compounds was reduced to 18.

## 2.2. Category 2 responses

Only 10 data sets (9 in the microwell assay and 1 in the agar assay) were positive following the short (3- or 4-h) treatment in the absence of S-9, but apparently negative following 24-h treatment in the absence of S-9. Application of the acceptance criteria to the negative controls in these data sets reduced this number to 7 and the addi-

tional application of the GEF to the data further reduced the number to 4 (Fig. 3). The Workgroup made no additional recommendations concerning the 3–4 h treatment, based on this data.

## 2.3. Acceptance criteria for negative/vehicle controls (24-h treatment)

Previously, following an extensive evaluation of negative/vehicle control data from a number of laboratories using the short (3- or 4-h) treatment time, the Workgroup reached consensus on the acceptance criteria for individual experiments based upon several negative/vehicle control parameters [4]. With the exception of the suspension growth (SG) parameter, the Workgroup recommended that the same criteria be applied to the 24-h treatment experiments. Because the 24-h treatment includes 3 rather than 2 days of suspension growth, the acceptance criteria for the 24-h SG was revised to 32–180. The theoretical optimum suspension growth is about 5-fold per day, or 125 over the 3-day

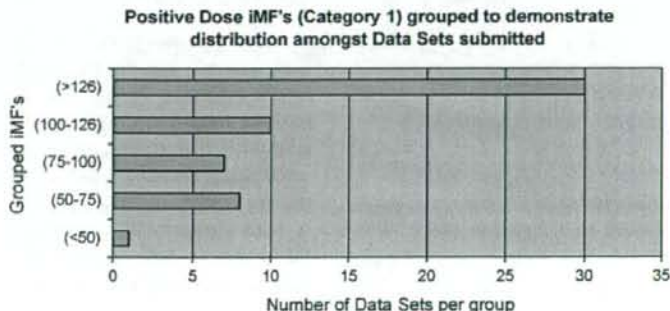


Fig. 2. Bar chart demonstrating breakdown of the 56 Category 1 (unique 24-h positive) studies in terms of the induced MF of highest positive data point.



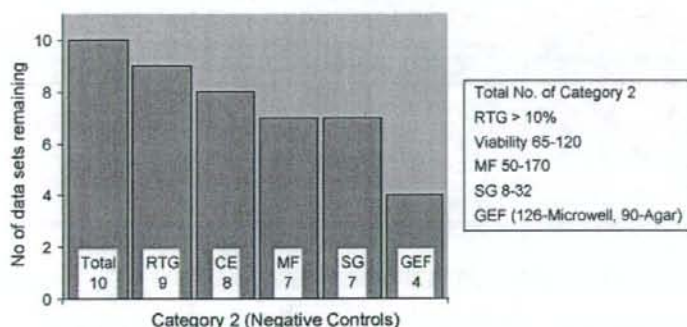


Fig. 3. Column graph demonstrating the number of Category 2 (unique 3- or 4-h positive) data sets that would be excluded as stated acceptance criteria [4] are applied in sequence of left to right.

period. However, there is variability in growth rates and the Workgroup would be very concerned with suspension growth less than 32. The high limit of 180 allows for reasonable errors in cell counting and dilution. As with the short treatment, the acceptance criteria for the background MF are specific to the agar or microwell version of the assay. For both methods the cloning efficiency (CE) referred to in the criteria is the absolute CE obtained at the time of mutant selection. The suspension growth of the negative/vehicle control refers to the growth during both the 24-h treatment and the 2-day expression period following treatment. It is defined as the fold-increase of the cell number during this 3-day period. The SG is calculated by the treatment period fold-increase multiplied by both the expression day 1 and expression day 2 fold-increases in cell number.

The acceptance criteria for the negative/vehicle control parameters for the soft agar and microwell methods of performing the MLA using 24-h treatment are now as follows:

Agar method	Microwell method
MF: 35–140 × 10 <sup>-6</sup>	MF: 50–170 × 10 <sup>-6</sup>
CE: 65–120%	CE: 65–120%
SG: 32–180	SG: 32–180

#### 2.4. Acceptance criteria for positive controls (24-h treatment)

As with the short treatment time experiments, positive control cultures should be included in every 24-h treatment MLA experiment. To assess the adequacy of detection of both small and large colony mutants in the 24-h treatment, the Workgroup agreed that it is appropriate to apply the same acceptance criteria developed for the short treatment time. There are two equally accept-

able approaches to assuring an adequate positive control response. (1) The laboratory should use a dose of a mutagenic chemical that yields an absolute increase in total MF that is an increase above the spontaneous background MF [an induced MF] of at least  $300 \times 10^{-6}$ . The small colony MF should account for at least 40% of that IMF. For instance, in a culture showing an IMF of  $300 \times 10^{-6}$ , the small colony IMF should be at least  $120 \times 10^{-6}$ . (2) The second approach requires the use of a dose of a chemical that increases the small colony MF at least  $150 \times 10^{-6}$  above that seen in the concurrent negative/vehicle control (a small colony IMF of  $150 \times 10^{-6}$ ).

In addition, the upper limit of cytotoxicity observed in the positive control culture should have a relative total growth (RTG) that is greater than 10% [2]. The Workgroup recognizes that some laboratories prefer to use more than one dose of their positive control and/or to use a dose that gives a small increase in MF. For these laboratories, it is sufficient if only a single dose of the positive control meets the acceptance criteria.

#### 2.5. Data evaluation

Once the criteria for experimental acceptance have been satisfied, the data from each individual experiment can be evaluated to determine whether the response is positive, negative or equivocal. The Workgroup agreed that data generated using 24-h treatment should be evaluated using the same method previously developed by the Workgroup for use with the short treatment times. A brief summary of the previous analyses conducted by the Workgroup and the rationale for developing the new method using the GEF in conjunction with appropriate statistical analysis to ascertain the presence of a dose-related positive trend is included in the Plymouth and Aberdeen Meeting Reports [3,4]. It should

be noted that the GEF approach takes into account previous guidance documents (i.e. FDA Redbook [http://www.cfsan.fda.gov/~redbook/red-toca.html] and OECD [5], which states that biological relevance should be a major factor in data evaluation).

The GEF evaluation method requires that the IMF exceeds a value based on the global distribution of the background MF for each method (agar or microwell). This value, the GEF, was established by the Workgroup, based on short treatment experiments, to be 126 for the microwell version of the assay and 90 for the agar version. The GEF is applied as follows: if the negative/vehicle control MF in a microwell experiment is  $100 \times 10^{-6}$ , then one of the treatment groups must have a MF of at least  $100 + 126$  (the microwell GEF) =  $226 \times 10^{-6}$  in order to meet the GEF criterion for a positive call. An appropriate statistical trend test should be applied to determine whether there was a positive dose-related increase.

A test agent response in an experiment is positive if both the IMF for any treatment meets or exceeds the GEF and a positive trend test is obtained. A test agent response is clearly negative if both the trend analysis and the GEF are negative. Situations where either (but not both) the GEF or statistical analysis is positive should be evaluated on a case-by-case basis. It should be noted that it is generally advisable to conduct one or more additional experiments to better define the assay response (particularly in the 30–10% RTG cytotoxicity range).

For more detail on the Workgroup recommendations on the steps for proper assay evaluation, the reader is referred to the summaries of the New Orleans, Plymouth and Aberdeen meetings [2–4]. All of these recommendations are equally applicable to the short treatment and the 24-h treatment.

### 3. Conclusions

From this analysis, it is clear that only a very small percentage of chemicals (less than 2%) are uniquely positive at 24 h, and an even smaller percentage appear to be uniquely positive at short (3- or 4-h) treatment times. The low numbers of unique 3- or 4-h positive results may be attributable to the regulatory guideline requirements that positive results observed following 3- or 4-h treatments do not need to be further evaluated at 24 h. In some of the unique 24-h treatment cases, the longer treatment time provides for the effective treatment of

a higher dose of compound. This is particularly true when a chemical's insolubility prevents testing to adequate toxicity in the short treatment time. There are also some situations in which the maximum recommended concentration (5000  $\mu\text{g}/\text{ml}$ ) was not mutagenic and was insufficiently toxic in the short treatment, but was mutagenic following a 24-h treatment. There is also evidence that some (but not all) aneugens require longer treatment time [6].

Based upon all the available data, the Workgroup agreed to continue its support of the ICH recommendation that 24-h treatment be used when the short treatment time is negative or equivocal.

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## Strategy for genotoxicity testing—Metabolic considerations

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### Abstract

The report from the 2002 International Workshop on Genotoxicity Tests (IWGT) Strategy Expert Group emphasized metabolic considerations as an important area to address in developing a common strategy for genotoxicity testing. A working group convened at the 2005 4th IWGT to discuss this area further and propose practical strategy recommendations. To propose a strategy, the working group reviewed: (1) the current status and deficiencies, including examples of carcinogens “missed” in genotoxicity testing, established shortcomings of the standard *in vitro* induced S9 activation system and drug metabolite case examples; (2) the current status of possible remedies, including alternative S9 sources, other external metabolism systems or genetically engineered test systems; (3) any existing positions or guidance. The working group established consensus principles to guide strategy development. Thus, a human metabolite of interest should be represented in genotoxicity and carcinogenicity testing, including evaluation of alternative genotoxicity *in vitro* metabolic activation or test systems, and the selection of a carcinogenicity test species showing appropriate biotransformation. Appropriate action triggers need to be defined based on the extent of human exposure, considering any structural knowledge of the metabolite, and when genotoxicity is observed upon *in vitro* testing in the presence of metabolic activation. These triggers also need to be considered in defining the timing of human pharmaceutical ADME assessments. The working group proposed two strategies to consider; a more proactive approach, which emphasizes early metabolism predictions to drive appropriate hazard assessment; and a retroactive approach to manage safety risks of a unique or “major” metabolite once identified and quantitated from human clinical ADME studies. In both strategies, the assessment of the genotoxic potential of a metabolite could include the use of an alternative or optimized *in vitro* metabolic activation system, or direct testing of an isolated or synthesized metabolite. The working group also identified specific areas where more data or experiences need to be gained to reach consensus. These included defining a discrete exposure action trigger for safety assessment and when direct testing of a metabolite of interest is warranted versus the use of an alternative *in vitro* activation system, a universal recommendation for the timing of human ADME studies for drug candidates and the positioning of metabolite structural knowledge (through *in silico* systems, literature, expert analysis) in supporting metabolite safety qualification. Lastly, the working group outlined future considerations for refining the initially proposed

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strategies. These included the need for further evaluation of the current *in vitro* genotoxicity testing protocols that can potentially perturb or reduce the level of metabolic activity (potential alterations in metabolism associated with both the use of some solvents to solubilize test chemicals and testing to the guidance limit dose), and proposing broader evaluations of alternative metabolic activation sources or engineered test systems to further challenge the suitability of (or replace) the current induced liver S9 activation source. © 2006 Elsevier B.V. All rights reserved.

**Keywords:** Genotoxicity; Metabolism; Testing; Strategy

## 1. Introduction

The report on initial activities of the IWGT Strategy Expert Group [1] emphasized metabolic considerations as an important area to address in developing a common strategy for genotoxicity testing and risk assessment. For human risk assessment, differences in metabolism attributed to the conditions of standard *in vitro* test systems or animal species pose challenges for establishing human relevance. This can be important in cases where the ultimate toxic chemical entity may be a metabolite of the parent chemical agent, whether it applies to pharmaceuticals, pesticides or industrial chemicals. Current genotoxicity testing guidelines incorporate a battery of *in vitro* and *in vivo* tests to identify hazards [2,3]. To address the potential role of metabolism, induced rat liver S9 has been adopted for *in vitro* genotoxicity tests as an exogenous activation system for detecting promutagens [4,5]. In evaluating test results, current *in vitro* test systems can generate both false negative and false positive results in relation to predicting rodent carcinogenicity. These potential discrepancies could be attributed to metabolic considerations, such as the limited capability of *in vitro* exogenous activation systems [6]. These discrepancies may be reduced by considering the use of alternative activation and/or testing approaches based on knowledge of certain structural features or chemical classes (potential chemical reactivity or substrate preference for a specific enzyme not represented or inactive in the standard S9 activation system). *In vivo* genotoxicity tests, typically conducted in rodent species (rat or mouse), take into consideration route of administration, toxicokinetics and absorption–distribution–metabolism–excretion (ADME) in the assessment of relevance and risk of any *in vitro* findings. These same rodent species are also employed for later assessment of carcinogenic potential. The ability of both *in vitro* and *in vivo* test systems to model human metabolites of interest can be quite variable and therefore limit current capabilities to adequately conduct human genotoxicity and carcinogenicity risk assessment in certain cases.

An independent working group convened at the 4th International Workshop on Genotoxicity Tests (IWGT) to discuss the issues regarding metabolic considera-

tions and propose practical strategy recommendations. To arrive at a proposed strategy, the working group reviewed the following: (1) the current status and deficiencies, including examples of carcinogens “missed” in genotoxicity testing, established shortcomings of the standard *in vitro* induced S9 activation system and drug metabolite case examples; (2) the current status of possible remedies, including alternative S9 sources, other external metabolism systems or genetically engineered test systems; (3) any existing and related recommendations, guidance or strategies [7–10]. Based upon this review, an initial working strategy was proposed along with working group consensus and non-consensus areas.

## 2. Key learnings from assessing historical and current information

### 2.1. Current status and deficiencies

#### 2.1.1. Representative examples of carcinogens “missed” in standard genotoxicity testing due to inadequate metabolism

The standard test battery (ICH S2B) for genotoxic potential was designed to avoid the risk of false negative results for compounds with genotoxic potential. However, it cannot be taken for granted that this risk is completely eliminated when compounds give negative results in all the battery assays. Brambilla and Martelli [11] have shown that there are some chemicals, classified by the International Agency for Research on Cancer (IARC) as probable (Group 2A) or possible (Group 2B) human carcinogens, that tested consistently negative in the standard battery but were positive in other non-standard genotoxicity assays. These chemicals often induced DNA damage and repair synthesis or the formation of DNA adducts in the target organs of their carcinogenic activity, as well as in primary cultures of cells of the target organ from animal and, in some cases, human donors. These chemicals include certain polychlorinated biphenyls, trichloroethylene, tetrachloroethylene, *o*-toluidine, carbon tetrachloride, cyproterone acetate and its structural analogues chlormadinone acetate and megestrol acetate, *p*-dichlorobenzene, hexachlorobenzene, hexachloroethane, nitrilotriacetic acid and its salts,

and ochratoxin A. The failure of the standard test battery to detect some genotoxic carcinogens is attributable to several causes, but the principal ones are the following: *in vitro*, the artificial metabolic activity of the liver S9-mix, and the different biotransformation of chemicals in cells of different tissues and from different species; *in vivo*, the pharmacokinetics of the test compound and its possible species-, sex- and tissue-specificity.

Recently, further investigation [12 and unpublished data] by this research group demonstrated that four rat thyroid carcinogens (propylthiouracil, methimazole, *N,N*-diethylthiourea and ethylenethiourea) (see IARC Monograph 79, 2001) that gave negative or contradictory responses in the standard battery are thyroid-specific DNA-damaging agents. All four compounds induce DNA single-strand breaks and alkali-labile sites in primary cultures of human thyroid cells. Following oral administration to rats, these compounds induced DNA fragmentation in the thyroid with no evidence of DNA lesions being induced in liver and kidneys. This organ specificity may be due to a difference in metabolism in the thyroid versus liver and kidney and/or to the occurrence in the thyroid of a higher concentration or a more persistent presence of these compounds.

### 2.1.2. A historical introduction: 2-acetylaminofluorene

2-Acetylaminofluorene (2-AAF) was developed, but never used, as an insecticide, as early animal studies indicated high carcinogenic activity [13]. Instead it became a key model compound in experimental carcinogenesis. It is active over wide tissue and species ranges, often with marked sex-dependence. In a feeding study in rats, it induced high incidences of liver tumors in males, but none in females (where mammary tumors were very common), and moderate incidences of neoplasias in the ear duct and the small intestine in both sexes [14]. In the 1960s, James and Elizabeth Miller pioneered the concept that carcinogens are either electrophiles as such or are metabolically activated to electrophiles, which covalently bind to cellular macromolecules [15]. At this time, DeBaun et al. [16] and King et al. [17] discovered that *N*-hydroxy-2-AAF, a major phase-1 metabolite of 2-AAF, extensively bound to proteins and nucleic acids in the presence of a cytosolic preparation from rat liver fortified with a system generating 3'-phosphoadenosine-5'-phosphosulfate (PAPS), the cofactor required by sulfotransferases (SULTs). This finding marked a milestone, as for the first time the activation pathway of a carcinogen to an electrophilic metabolite was elucidated. Later it was shown that the SULT inhibitor pentachlorophenol drastically decreases

the formation of DNA adducts and the induction of tumors by 2-AAF and *N*-hydroxy-2-AAF in liver of rats and mice [18–21]. Likewise, a genetic defect leading to reduced hepatic biosynthesis of PAPS strongly protected infant mice against the hepatocarcinogenicity of *N*-hydroxy-2-AAF [20]. These various findings clearly demonstrate that a sulfo conjugate is the principal ultimate carcinogen of 2-AAF in mouse and rat liver.

The detection of the bioactivation of carcinogens revolutionized genetic toxicology. External activating systems, usually in the form of liver S9, were incorporated in all kinds of *in vitro* test systems. Ironically, standard S9 does not provide any SULT activity—the key factor of the hallmark findings with *N*-hydroxy-2-AAF described in the preceding paragraph. The reason for this deficiency is lack of the cofactor PAPS. Nevertheless, 2-AAF is mutagenic in the Ames test in the presence of liver S9 [22], although its activity is very modest taking into account the exceptional carcinogenic activity of 2-AAF and that a major target tissue, the liver of the male rat, is the source of standard S9. Surprisingly, the mutagenicity of *N*-hydroxy-2-AAF in the presence of hepatic cytosol was decreased upon addition of PAPS, whereas its covalent binding to free DNA was enhanced by the same modification [23]. Likewise, chemically synthesized *N*-sulfoxy-AAF, the putative ultimate carcinogen of 2-AAF, showed negligible mutagenic activity in *Salmonella* [24].

2-AAF, tested up to a concentration of 300  $\mu$ M, was negative in a gene (*hprt*) mutation test in V79 cells in the presence of liver S9, whereas it was clearly mutagenic even at 0.1  $\mu$ M in V79-derived cells engineered for co-expression of rat cytochrome P450 (CYP) 1A2 and rat SULT1C1 [25]. Both enzymes were required for the activation. SULT1C1 is expressed with high tissue and sex specificity in the liver of male rats [26,27], in agreement with the sex-specific major target tissue in male rats [14] (the activation pathways leading to tumors in other tissues, such as the mammary gland, have not been elucidated; they may involve other SULT forms or be independent of SULT).

Subsequently, *N*-hydroxy-2-AAF was tested in *Salmonella* strains engineered for expression of various individual human SULTs. A strong activation was observed in the presence of SULT1A2 [28]. This finding implies that *N*-sulfoxy-AAF generated within the target cell is mutagenic to bacteria. Thus, the negligible activity of externally added or generated *N*-sulfoxy-AAF has to be due to insufficient penetration. The half-life of *N*-sulfoxy-AAF in water at 37 °C amounts to ~4 s [29]. A similar half-life has been reported for aflatoxin B<sub>1</sub> exo-8,9-epoxide, the active metabolite of aflatoxin B<sub>1</sub> [30].

Since bioactivated aflatoxin B<sub>1</sub> is readily detected in the Ames test [22], other properties of *N*-sulfooxy-AAF may be important for its poor membrane permeability. The most plausible factor is the negative charge (combined with the relatively short lifespan).

Key learnings from the findings with 2-AAF are:

- Non-CYP enzymes may be critically involved in the activation of carcinogens and mutagens.
- These non-CYP enzymes may not be active in standard target cells (in the case of 2-AAF due to lack of the critical enzyme, a SULT) or S9 preparations (due to lack of the corresponding cofactor, PAPS) [31–33].
- Supplementation of the cofactor may not be a reliable remedy, as some active metabolites (especially phase-2 metabolites) may not permeate into the target cells. In fact, external activation may lead to decreased mutagenicity as shown for *N*-hydroxy-2-AAF [23] and thus preclude detoxification. The more appropriate remedies are the use of metabolically competent target cells.

The SULT form required for hepatocarcinogenicity of 2-AAF (SULT1C1) is expressed with high tissue selectivity and is rapidly lost when hepatocytes are taken into culture. Liu et al. [34] cultured primary rat hepatocytes under 12 different conditions. Even under the best conditions, the level of SULT1C1 mRNA fell to approximately 20% and <5% of its initial values within 24 and 96 h, respectively. Under certain conditions, the SULT1C1 mRNA was already undetectable after 24 h. For such expression-sensitive enzymes, the use of genetically engineered cells appears to be the most practical approach to date.

### 2.1.3. Issues and potential shortcomings of the induced rat liver S9 fraction in *in vitro* genotoxicity tests

In standard *in vitro* genotoxicity testing, an activation system is included with the purpose of generating electrophilic metabolites that can react with macromolecules including nucleic acids. This has been a hallmark of the Ames bacterial mutagenicity test, and its utility was apparent when some of the first environmental mutagens were characterized in this system. It was a natural extension of the pioneering work of the Millers who demonstrated bioactivation of xenobiotics to reactive metabolites [35]. Many mutagens require oxidative metabolism to reactive species before demonstrating mutagenicity.

The induced rat liver S9 fraction is, in essence, employed as a 'metabolite factory' in the Ames and

other *in vitro* genotoxicity tests. In principle, other systems capable of generating reactive metabolites could also be used (see below). However, the regulatory standard presently requires the induced rat liver system, which has been used for decades. Its initial choice was logical; the levels of several CYP enzymes are elevated after induction, in particular the CYP1A subfamily of enzymes (CYP1A1 and 1A2), which are efficient catalysts of the bioactivation of polycyclic aromatic hydrocarbons and azaarenes, aromatic amines and aflatoxins. These types of compounds were some of the first and best understood mutagens, and the Aroclor 1254-induced rat S9 fraction effectively allowed their identification as mutagens. Its choice was also logical in that it provided a reliable, robust and readily available bioactivation system at a time when human-derived systems were rare or unavailable. Also, a rodent system can be more easily standardized than an exogenous human-derived system that normally would rely on human tissue samples, which are subject to significant biological variation.

However, to identify human hazards, the relevance of the induced rat liver S9 fraction can be called into question. It is now known that the rat and human CYP enzymes can differ in their substrate selectivities and reactions catalyzed. While the CYP1A family is reasonably well conserved between rats and humans with regard to structure and function, other CYP enzymes that are more frequently involved in drug metabolism are more divergent. In particular, the CYP2 family (e.g. CYP2C, 2D) demonstrates vast differences in activity between rat and human. Furthermore, upon induction with Aroclor 1254, an unnatural complement of CYP enzymes is generated: the CYP1A and 2B enzymes are very markedly elevated; others such as CYP3A are affected in a minor way, while others (e.g. CYP2C11) may decrease (Table 1).

Table 1  
Complement of rat liver cytochrome P450 (CYP) enzymes in uninduced and Aroclor-1254 induced states

Enzyme	Cytochrome P450 (nmol/mg microsomal protein)	
	Untreated	Aroclor treated
CYP1A1	0.04	1.45
CYP1A2	<0.03	1.23
CYP2B1	0.03	1.29
CYP2B2	0.07	1.46
CYP2C6	0.36	0.36
CYP2C11	1.20	0.27
CYP2D1	0.15	0.15
CYP3A	0.39	0.77

From Ref. [73].

Little has been done to compare the metabolite profiles generated in Aroclor-induced rat liver S9 to those in human liver S9 for drug-like molecules. In a preliminary unreported study, the metabolism of ten common drugs spanning a range of structural types and CYP substrates in Aroclor-1254 induced rat and pooled human liver S9 fractions was examined. In this study, it was demonstrated that in a qualitative sense, metabolite profiles in the two systems did not differ substantially—for the most part metabolites generated in one system were observed in the other. However, relative quantities of metabolites did differ between the two systems and in a few cases, metabolites observed in one system were not observed in the other. In addition, there is recent evidence demonstrating a large variation in the Ames test results between human and induced rat S9 [36–43]. For example, according to a recent study, certain human S9 preparations detected 25% of compounds with higher sensitivity than induced rat S9 although the remaining 75% was detected at higher levels with the rat enzymes. The chemicals that showed stronger mutagenic activity in the human than in the rat S9 systems included some aromatic amines, polycyclic azaarenes, and nitrosamines, which constitute important classes of mutagenic substances. In addition, a large variation (inter-individual diversity) in the Ames test results was found between multiple human S9 samples that varied by chemical. The Ames test data with 18 different human S9 samples indicated that although the mutagenicity of 2-amino-3-methylimidazo[4,5-f]quinoline (IQ) and benzo[a]pyrene (BP) in the presence of a high activity human S9 was equal to that observed in the presence of induced rat S9, their mutagenicity in the presence of pooled human S9 was much lower than that observed in the presence of induced rat S9 (IQ: 0.1-fold and BP: 0.05-fold). In contrast, the mutagenicity of dimethylnitrosamine in the presence of either high activity human S9 or pooled human S9 was eight-fold higher than that found in the presence of induced rat S9.

The above examples call into question the relevance of a rodent *in vitro* system for evaluating human metabolites. The possibility exists that the induced rat system may generate mutagenic metabolites of no relevance, or worse still may not generate a mutagenic metabolite that would be generated by human enzymes. Considerations for replacing or complementing the rat *in vitro* system with a human system are highlighted particularly when we need to assess the mutagenicity of unique or major human metabolites. Identification of cases in which discordance between metabolite profiles in rat liver S9 fraction and corresponding systems from other species can be readily made. Over the past decade, profiling and

identification of metabolites in various *in vitro* systems (e.g. liver microsomes, S9 fractions, hepatocytes) from human and laboratory animal species has become a standard part of the contribution of Drug Metabolism and Pharmacokinetics scientists to drug discovery and development processes. Such metabolite profile data can be leveraged in the design of appropriate *in vitro* genotoxicity tests—comparison of rat and human profiles can be made, and if markedly different, the rat system could be replaced.

Based on these situations stated above, consideration of replacing the rat *in vitro* system with a human system has been highlighted particularly when we need to assess the mutagenicity of human unique or major metabolites. These findings, therefore, suggest the utility of human S9 in mutagenicity testing systems for human hazard identification.

In addition to the potential shortcomings of the use of an *in vitro* system from a non-human species, it must also be considered that the use of an S9 system with NADPH (for CYP and flavin-containing monooxygenase activities) also represents an incomplete picture of the metabolism that can occur *in vivo*. Some enzymes that can sequester proximate mutagens, such as UDP-glucuronosyltransferases (UGTs), or inactivate electrophilic metabolites, such as glutathione transferases (GSTs), are not active in the NADPH supplemented S9 system because other cofactors and additives would be needed. In particular, sulfotransferases, which through the transfer of a sulfonyl group, can sequester some proximate mutagens but are well known to activate others are also not active in the standard testing system because the necessary cofactor, PAPS, is not added [31,32].

#### 2.1.4. Issue of poisoning of enzymes by organic solvents

The use of solvents to deliver the test chemicals to the *in vitro* genotoxicity tests is a common practice. Regulatory requirements are such that new compounds should be tested to 10 mM (or 5 mg/ml) or 5 mg/plate in the Ames test or to the limit of solubility, whichever is lower [2]. In order to achieve such high concentrations for lipophilic molecules such as drugs and environmental chemicals, solvents are used in the preparation of concentrated stock solutions. Due to its nearly universal capability to dissolve organic chemicals, aqueous miscibility, and its very low reactivity, dimethylsulfoxide (DMSO) has become a routinely used vehicle for the genotoxicity tests. For instance, in the Ames test (preincubation version) DMSO volumes of 100 and 200  $\mu$ l per incubation mix (700 or 800  $\mu$ l) have been recommended

[44,45], amounting to 14% and 25% of DMSO in the preincubation mix. In the plate incorporation assay the initial concentration of DMSO is 3.7% (100  $\mu$ l per 2.7 ml softagar) but will decrease upon diffusion into the bottom agar.

However, DMSO has been demonstrated to have a marked effect on the activities of CYP enzymes [46]. At concentrations of just 1% (v/v), DMSO can cause up to 75% inhibition of some CYP enzymes. Thus, pushing concentrations of test chemical to very high levels may yield diminishing returns with regard to the generation of potential reactive mutagenic metabolites due to the inhibitory effect of the delivery solvent.

The working group recommended limiting the DMSO concentration to a maximum of 1% for mammalian cell *in vitro* test systems. In the Ames test, the maximal volumes of DMSO should be 100  $\mu$ l/plate for the plate incorporation but lower in the preincubation test version (31.6  $\mu$ l/plate of DMSO produced little poisoning of metabolic activation for a number of promutagens [Gocke, personal communication]).

#### 2.1.5. Issue of substrate saturation

The use of very high concentrations of test compound may also prove fruitless if the enzyme kinetics are such that saturation and even substrate inhibition occur. For drugs, it is typical to observe  $K_M$  values of below 100  $\mu$ M. Testing compounds at concentrations higher than this (i.e. up to 10 mM) will generally not yield any greater quantity of metabolites because saturation of the enzyme will already have occurred at lower concentrations. Additionally, it is quite common to observe reductions in the amounts of metabolite at high (compared to low) concentrations due to substrate inhibition of CYP reactions at very high concentrations. If it is desired to generate metabolites that arise via a series of sequential reactions, it is likely that a very high concentration of parent compound in the incubation will take up all of the enzyme, effectively inhibiting downstream metabolism. Finally, to achieve high concentrations of compounds will usually require the use of delivery solvents, which can be inhibitory, as described above. No consensus was reached for recommending a general reduction of the maximal concentration of test compound to values below 10 mM for tests including S9.

#### 2.1.6. Metabolite case examples

Appendix A provides short synopses of case examples shared with the working group where diverse aspects of drug metabolism precipitated further investigations. The examples address situations of unique human metabolites and inefficient metabolism by standard S9

preparations, in some cases because of extrahepatic metabolism or, in others, for unknown reasons. Remedies for solving the issues included direct testing of the metabolite in question or the use of human S9. The extended testing provided assurance that the initially 'missed' metabolites did not pose undue risks. Other cases involved parent molecules, which showed genotoxic activities in the standard studies with or without S9 and bacterial-specific activation steps leading to considerations on potential activation by intestinal bacteria. Problematic aspects of metabolism were recognized in some cases in early, preclinical metabolism studies. In other cases, identification of human specific metabolism was realized in human clinical ADME studies. While the working group was unable to define a minimally essential and/or most appropriate course of action for the individual cases, the examples illustrate well the diversity of issues arising and might serve as a basis for defining expedient approaches in analogous situations.

### 2.2. Current status of possible remedies

#### 2.2.1. Use of genetically modified bacteria, mammalian cells and animal models for studying the activation and inactivation of genotoxins

To be detected as mutagens, some genotoxic metabolites have to be formed within the target cell by enzymes that are not represented in standard *in vitro* test systems, as exemplified in the introduction for *N*-sulfoxy-2-AAF. SULT-dependent activations are not uncommon. Using genetically modified target cells, activation by SULTs has been demonstrated for more than 100 chemicals, including various carcinogens (such as tamoxifen, cyproterone acetate, safrole, nitrofen and some nitro-toluenes) that are missed in conventional test systems [31–33]. Depending on the compound, varying SULT forms were required for the activation. Like *N*-sulfoxy-2-AAF, several other several sulfo conjugates [e.g. furfuryl sulfate and 1-( $\alpha$ -sulfoxyethyl) pyrene] had to be formed within the target for a positive test result. Other reactive sulfo conjugates underwent spontaneous substitution reactions with components of the culture medium, such as chloride anions, leading to the formation of secondary, membrane-penetrating active species [47]. Moreover, cDNA-mediated expression of organic anion transporters in target cells enhanced the genotoxic effects of some reactive sulfuric acid esters externally added [48]. Such uptake mechanisms might play a role in the organotropism of reactive species, but should not be relied on when testing new compounds.

Other conjugating enzymes (some UGTs, GSTs and NATs) have also been expressed in target cells.



Activation of promutagens by UGTs in such models has not yet been reported (and not been studied). However, co-expression of human UGT1A1 provided protection against the mutagenicity and cytotoxicity of 2-amino-1-methyl-6-phenylimidazo[4,5-*b*]pyridine (PhIP) in CHO-derived cells engineered for expression of CYP1A2 [49]. Human GST T1, expressed in *Salmonella typhimurium*, strongly enhanced the mutagenicity of various dihalogenated alkanes as well as diepoxybutane [50]. The activation of some of these agents could also be demonstrated using external glutathione (GSH)-conjugating systems [51], but extent of uptake and its dependence on the structures of the reactive GSH conjugates are largely unexplored. Heterologous expression of GSTs in mammalian cells conferred resistance against various alkylating agents; in some cases, this protection was enhanced by, or even strictly dependent on, the co-expression of an export pump (MRP-1 or MRP-2) [52]. The expression of endogenous acetyltransferases (termed OAT) in *Salmonella* may be a reason for the high mutagenic activity observed in the Ames test with many amino- and nitroarenes, whose final activation step often is an *O*-acetylation. *Salmonella* strains are available in which OAT has been replaced by a mammalian NAT [33,53], which differ in substrate specificity. Thus, various aromatic hydroxamic acids are activated to mutagens by human NATs, but not by OAT. Such differences may sporadically lead to misleading results when standard bacterial strains are used. Unlike typical phase-2 metabolites, acetyl conjugates are uncharged. Nevertheless the site of their formation can strongly affect the outcome of mutagenicity experiments. Thus, 2-hydroxylamino-6-methylidipyrido[1,2-*a*:3',2'-*d*]imidazole shows much higher mutagenicity in *S. typhimurium* TA98 compared to an OAT-deficient variant of this strain; however, purified OAT in the presence of its cofactor acetyl-CoA drastically reduced its bacterial mutagenicity (although it strongly enhanced the covalent binding to naked DNA) [54]. Various standard mammalian target cells, including most sublines of V79 cells, do not express any endogenous NAT. Heterologous expression of human NATs in these cells strongly enhanced the genotoxic effects of many nitro- and aminoarenes [33,55]. For example, induction of gene mutations by 3-nitrobenzanthrone required 100 times lower substrate concentrations in NAT2-expressing compared to control V79 cells. The isomer, 2-nitrobenzanthrone, was mutagenic in cells engineered for expression of human SULT1A1, but not in control cells (Glatt et al., unpublished result). 2-Amino-3-methylimidazo[4,5-*f*]quinoline (IQ) induced gene mutations in V79 cells co-expressing human

NAT2 or NAT1 together with human CYP1A2, even at a concentration of 0.01 and 1  $\mu$ M, respectively, but was inactive (even at 30  $\mu$ M) in cells expressing only CYP1A2 [33,55].

Liver S9 is useful as a source of diverse CYP activities in genetic toxicology studies. CYP forms have been individually expressed in bacterial and mammalian target cells primarily with the aim to identify the forms that can activate a given promutagen [56,57]. It was noticed, however, that this approach can drastically increase the test sensitivity, especially for mammalian cell models. For example, the concentration of classical carcinogens (such as benzo[*a*]pyrene, dibenzo[*a,l*]pyrene, aflatoxin B<sub>1</sub> and *N*-nitrosodimethylamine) could be decreased by a factor of 700–25,000 in the V79/*hprt* test, when the appropriate CYP was expressed compared with a standard protocol using S9 (Glatt et al., unpublished results). Several factors may contribute to these differences in sensitivity:

- Some promutagens are preferentially activated by a CYP form that is low in standard S9 (e.g. CYP1B1 or 2E1).
- Diffusion pathways are longer for externally generated active metabolites resulting in more opportunities for alternative chemical reactions (e.g. with components of S9 or cell membranes) than for metabolites formed within the target cell.
- Since S9 is not stable and toxic to cells upon prolonged exposures, incubations with this preparation have to be limited to 2–4 h, which is much less than the replication time of a mammalian cell; in contrast, there is no real time limit for exposing metabolically competent cells (24 h exposures are typical, and 72 h is unproblematic for the V79/*hprt* assay).
- Competing pathways, leading to inactive metabolites, may be more prevalent with S9 than with more specific enzyme systems (this may be the least important point, as in many cases a major portion of the test compound remains unchanged during the incubation time).

The decrease in the substrate concentration required by CYP-expressing cells has some technical advantages, e.g. concentrations of organic solvents can be decreased, and poorly soluble compounds can be tested appropriately. Thus, picene and 3,4,3',4'-tetrachlorobiphenyl, which are negative in standard *in vitro* tests, were clearly mutagenic (even at a concentration of 100 nM) in cells engineered for expression of CYP1B1 (Glatt et al., unpublished results). It may be speculated that such sensitive systems will produce many false positive results. However, the available results do not justify this fear.

The systems are not only highly sensitive, but also highly specific, with regard to the enzyme system required for the activation of a given compound as well as the compounds activated by a given metabolic system. Moreover, effects occurring at low substrate concentrations *in vitro* are more likely to be relevant for humans at realistic (low) exposures than *in vitro* effects produced at heroic concentrations in standard systems, where promiscuous activation may occur even with carcinogens; this can lead to an apparently correct result via an incorrect mechanism. The fact that appropriate metabolically competent cells readily detect classical carcinogens at very low concentrations (usually in the nM range) would provide a rationale for reducing the maximal concentration of the test compound to a biochemically sound level (for example, in the range of 100  $\mu$ M).

At present genetically engineered cells are primarily used as an analytical tool for elucidating activation and inactivation mechanisms. In general, only one to three foreign factors (enzymes or transporters) have been expressed in a given cell line. For screening purposes, this number would have to be increased in order to keep low the total number of cell lines required. This is technically feasible. Indeed, a human cell line (MCF-5) exists in which five enzymes have been overexpressed using gene transfer techniques [58]. The working group has not further explored the strengths and weaknesses of this cell line, as not much data has been published for this cell line and no member had practical experience with it.

An important aim of genetic toxicology studies is the detection and assessment of carcinogenic risks to humans. In practice, results of animal carcinogenicity studies represent the "gold standard" used for validating *in vitro* test systems. However, carcinogenicity results from studies in rats and mice are frequently discordant; even larger differences may be expected for human, a phylogenetically remote species. This species-dependence of carcinogenicity is often due to differences in biotransformation. Indeed, cDNA-expressed orthologous enzymes from different species have demonstrated pronounced differences in substrate and product specificity. Likewise they can substantially differ in their regulation and tissue distribution. For example, the expression of most SULT forms is focused on the liver (and is usually sex-specific in adult animals) in the rat; in contrast, several human SULTs are highly expressed in extrahepatic tissues but low or absent in liver, with only minute sex-dependent differences [59]. In recent years, various genes of human xenobiotic-metabolizing enzymes, including their regulatory sequences, have been introduced into mouse models. In some cases, e.g. with human SULT1A1 and 1B1, this resulted in the

expression of the human enzyme with a human-like tissue distribution in the mouse (Meinl et al., in preparation). Similar approaches have been used for some CYPs [60]. It will be interesting to explore these models in carcinogenicity and genotoxicity investigations.

#### 2.2.2. Utility of S9 from human, and potential utility of "humanized" test systems

In practical terms, there are three possible ways to apply human S9 in genotoxicity testing systems:

- (1) As an *in vitro* metabolic activation/detoxification system for hazard identification of unique or major human metabolites.
- (2) As a second tier assay for comprehensive assessment.
- (3) For replacing induced rat S9.

Human S9 that has a high level of metabolic enzyme activity or shows a potent genotoxicity for a test agent might be useful (in addition to using pooled human S9) for a retroactive approach (see Section 4) to a metabolism issue. In addition, a potential future testing approach combining multiple endpoints including micronuclei, Comet, and TK6 gene mutations based on human cells with human S9, may be proposed as an *in vitro* humanized test system for a proactive approach (see Section 4) to addressing metabolism issues. The humanized genotoxicity tests are also helpful for elucidating the genotoxic mechanisms in human cells. The current status of possible remedies is discussed below.

In a recent publication there were no practical differences in the mutagenicity of three chemicals in the Ames test using pooled human S9 from three different sources that were commercially available (HAB Biomedical Research Institute, In Vitro Technologies, and Xenotech) [37]. When using a crude human liver S9 in the Ames test, contaminating bacterial colonies might be found and could lead to an increased number of apparent revertant colonies over the normal range on control plates. Therefore, it may be useful to use a purified fat- and bacteria-free human S9, as can be obtained by a simple modification to the crude S9 preparation [39].

A large and extensive body of data on the use of human liver S9 or microsomes in the Ames test has recently been presented [36,40–43]. The mutagenicity of about 60 chemicals was studied using the Ames test in the presence of a selected human S9 with a high metabolic activity and also with pooled human S9. The mutagenicity of chemicals in induced rat S9 and human S9 varied considerably, depending on the chemicals. Most of the mutagens tested (75%) were less mutagenic in the pres-

ence of human S9 than in the presence of induced rat S9. On the other hand, the other compounds (25%), including some aromatic amines, polycyclic azaarenes, and nitrosamines, showed a more potent mutagenicity with human S9 than with induced rat S9.

To examine the inter-individual variation in the mutagenicity of chemicals using a variety of human liver S9 samples, the mutagenicity of 3 chemicals was examined in the Ames test using S9 from 18 separate donors and also using a pooled human S9 sample [38]. There was a large inter-individual diversity in the mutagenic response to procarcinogens. The results also suggest that the use of both selected human S9 with high metabolic activity and a pooled S9 could be used as a means to evaluate the inter-individual variability in mutagenic response to chemicals.

The mutagenicity of nine chemicals was assayed by the Ames test using human S9 at varying S9 concentrations (1, 3, 10 or 30% S9 fraction in the S9 mix) (published in part in [37]). Many of the chemicals tested showed higher mutagenic activity at increasing S9 concentrations. A 10% S9 concentration (1 mg S9 protein/plate), which is usually used, may be sufficient to compare the mutagenic activity of chemicals with that produced by induced rat S9, although it may be suggested to use >10% concentrations of human S9 to confirm a negative response. When the mutagenic activity was calculated as induced revertants/ $\mu\text{g}/\text{plate}/\text{pmol}$  total CYP, the data suggest that S9 quality and amount of CYP protein may be probable reasons for the large diversity in the mutagenic activities of the chemicals in the presence of induced rat S9 and human S9. The mutagenic activity varied by as much as 100-fold between induced rat S9 and human S9, depending on the chemicals.

An *in vitro* humanized test system was recently established based on human cells used together with human S9 (Honma et al., in preparation) and 16 chemicals were tested using this assay system. Human lymphoblastoid cell lines WTK-1, which were homozygous p53 mutant cells of TK6, were used as human cell lines. This multiple endpoint genotoxicity test system incorporates the Comet assay, micronucleus test, and the TK gene mutation assay. Human carcinogens (class 1 by IARC), benzidine, cyclophosphamide, and 2-naphthylamine clearly showed genotoxicity with human S9 as well as rat S9. Rodent carcinogens (2A or 2B), benzo[a]pyrene, a food mutagen (IQ), and dibutyl nitrosamine exhibited no or very weak responses with human S9 although they were extremely genotoxic with rat S9. On the other hand, 2-aminoanthracene, which is non-classified in IARC, yielded stronger genotoxicity with human S9 than with rat S9, suggesting that spe-

cial attention should be taken for evaluating its human carcinogenicity.

### 2.2.3. Use of recombinant human CYPs as an external activation source for Ames testing

Experiences using baculovirus-infected insect cell-expressed human CYPs as an exogenous metabolic activation source for *in vitro* bacterial mutagenicity testing were reviewed [61]. The testing of selected model pro-mutagens incorporated the use of Gentest's Supermix<sup>TM</sup>, a mixture of individual cDNA-expressed enzymes (Supersomes<sup>TM</sup>) prepared using a baculovirus expression system. Exogenous glucose-6-phosphate dehydrogenase and NADP were added to the incubation mixtures as co-factors. The enzyme mixture includes CYP1A2, CYP2C8, CYP2C9, CYP2C19, CYP2D6 and CYP3A4, which have been demonstrated to be principally responsible for the oxidative metabolism of pharmaceuticals. The mutagenicity results using Supermix<sup>TM</sup> were compared to results using induced rat and human liver S9 activation sources. 2-Aminoanthracene showed similar mutagenic activity with human S9 and Supermix<sup>TM</sup> (maximum 40–50-fold increases in revertants above negative controls), with slightly higher activity (maximum 60-fold increases in revertants above controls) noted for induced rat liver S9. The reason for this apparent discrepancy in 2-aminoanthracene response between human and induced rat S9 [36–40] could be related to differences in the amount of enzyme protein or concentration used. In contrast, benzo[a]pyrene showed much higher mutagenic activity with induced rat liver S9 (maximum 25-fold increases in revertants above controls) than with Supermix<sup>TM</sup> or human liver S9 (<5-fold increases), likely attributed to the importance of CYP1A1 in the activation of benzo[a]pyrene. 7,12-Dimethylbenz[a]anthracene demonstrated comparable levels of mutagenic activity between induced rat liver S9 and Supermix<sup>TM</sup> (maximum 14-fold increases). This latter result is somewhat puzzling, as the knockout of CYP1B1 [62,63] or microsomal epoxide hydrolase [64] abolishes the carcinogenicity of 7,12-dimethylbenz[a]anthracene in mice. Both enzymes are absent in Supersomes<sup>TM</sup>, and CYP1B1 is absent or extremely low in human S9. Thus, the results with the human enzyme preparations are either false-positive or 7,12-dimethylbenz[a]anthracene is carcinogenic in humans via a different activation mechanism than in the mouse models used. Despite such open points, the results confirm and support the utility of alternative exogenous activation sources to complement standard genotoxicity testing with induced rat liver S9. The con-

ditions established to utilize recombinant human CYPs may be important when there are informed data on the route of metabolism and this system (either individual Supersomes™ or Supermix™) may be more proficient at generating a human metabolite of interest from the parent drug in an *in vitro* test system.

### 2.3. Existing recommendations, guidance or strategies

A position paper was published in 2002 [7] that outlined the pharmaceutical industry views on the qualification criteria for determining whether a metabolite is major or minor or whether it is species specific. This discussion continued with the publication of a draft guidance for comment by the U.S. FDA [10]. Each of these documents discussed the toxicology testing strategy that should be implemented for human specific metabolites. In both cases the recommended strategy includes an initial evaluation of the potential genotoxicity of a specific metabolite in a minimal screen of *in vitro* assays to detect point mutations and chromosomal aberrations. Currently the guidance is undergoing the approval process at the agency.

### 3. Consensus principles and recommendations

From the review of the information currently available, the working group agreed upon a number of principles that lead to the development of recommendations for a proposed working strategy. Table 2 summarizes the consensus statements that should be integrated into an overall common strategy for genotoxicity testing and risk assessment. The basic elements of the principles center on ensuring that a human metabolite of interest is represented in genotoxicity and eventual carcinogenicity testing. This includes evaluating alternative (and more "competent", i.e. capable of generating the metabolite of interest) metabolic activation or test systems, ensuring the selection of a competent carcinogenicity test species, defining appropriate action triggers based on the extent of human exposures (i.e. "major" or unique), considering any structural knowledge of the metabolite (e.g. evidence of reactivity) and whether any evidence of genotoxicity is apparent in testing with standard metabolic activation (induced liver S9). The working group also emphasized the need to consider these points in relation to the timing of human ADME studies in the case of pharmaceutical development, and proposed both proactive and retroactive strategies to assess metabolite genotoxic potential (below). Lastly, the potential genotoxicity of a metabolite (in either case

Table 2

Consensus principles and recommendations as derived from discussions in the IWGT metabolic considerations subgroup

Rodent species used for carcinogenicity testing can generate more, less or different metabolites from humans. The potential exists for generating false positives/negatives. The following should be considered to reduce this gap
Use of an alternative metabolic activation system for genotoxicity testing that is capable of generating the human metabolite of interest
Assure that a carcinogenicity test species can generate the metabolite of interest
The triggers for safety follow-up may include: precedented clinical exposures to a metabolite, a unique human metabolite, structural knowledge of the metabolite (e.g. evidence of reactivity) or any preclinical evidence of genotoxicity in standard testing of the parent chemical agent (e.g. genotoxic effects seen only in the presence of liver S9)
The timing of the human ADME studies (for pharmaceutical development) is a critical trigger for considering additional safety assessment
Consider information that point to the potential for a unique human metabolite to determine if human ADME studies should be conducted earlier
There is a need for the development of a more proactive but practical approach for genetic toxicology screening applied to metabolites
This strategy should consider structural knowledge of the potential metabolite in the design of an appropriate genotoxicity test system
Based on structural knowledge, consider using proficient tester strains/cells or more appropriate exogenous activation sources (alternative microsomes, S9). Notable examples include
Use of CYP2E1 proficient systems for small molecules
Use of SULT proficient systems for amino, amido and nitroarenes
For pharmaceuticals, there is a need to develop a retroactive but practical strategy to respond to documented human metabolite exposures from human ADME studies
Consider structural knowledge of the metabolite of interest in designing an appropriate genotoxicity test strategy
In evaluating the extent of metabolite exposures generated via external metabolic activation systems from testing the parent chemical agent (or drug), it is inappropriate to extrapolate risk through the use of safety margins comparing concentrations generated in <i>in vitro</i> hazard tests with <i>in vivo</i> human exposures
If a human metabolite of interest cannot be generated under standard conditions of metabolic activation, exploring a more optimized system to generate the metabolite of interest is an option to consider
Consider the use of rat liver S9 induced by alternatives to Aroclor 1254 or phenobarbital/5,6-benzoflavone, or adjusting enzyme cofactors
Certain types of active metabolites (including many short-lived phase-2 metabolites) will not sufficiently penetrate cell membranes. Therefore, it is not recommended to routinely add cofactors for phase-2 enzymes to detect possible bioactivation by these enzymes
Consider alternative systems/tissues/species. This could include liver S9 from human or other animal species (e.g. hamster), alternative cells & tissues, genetically engineered systems, and