



National Institute for Public Health
and the Environment
Ministry of Health, Welfare and Sport

Low-dose effects: experimental challenges for endocrine disruption

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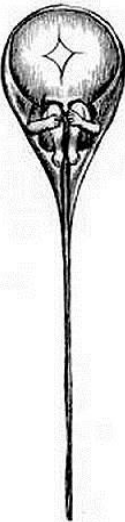
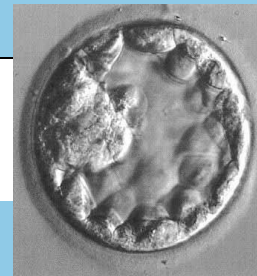
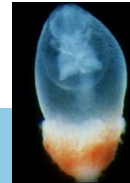
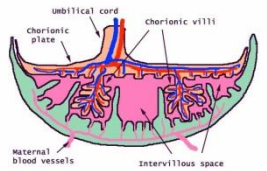
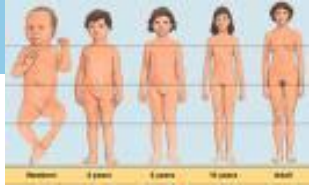
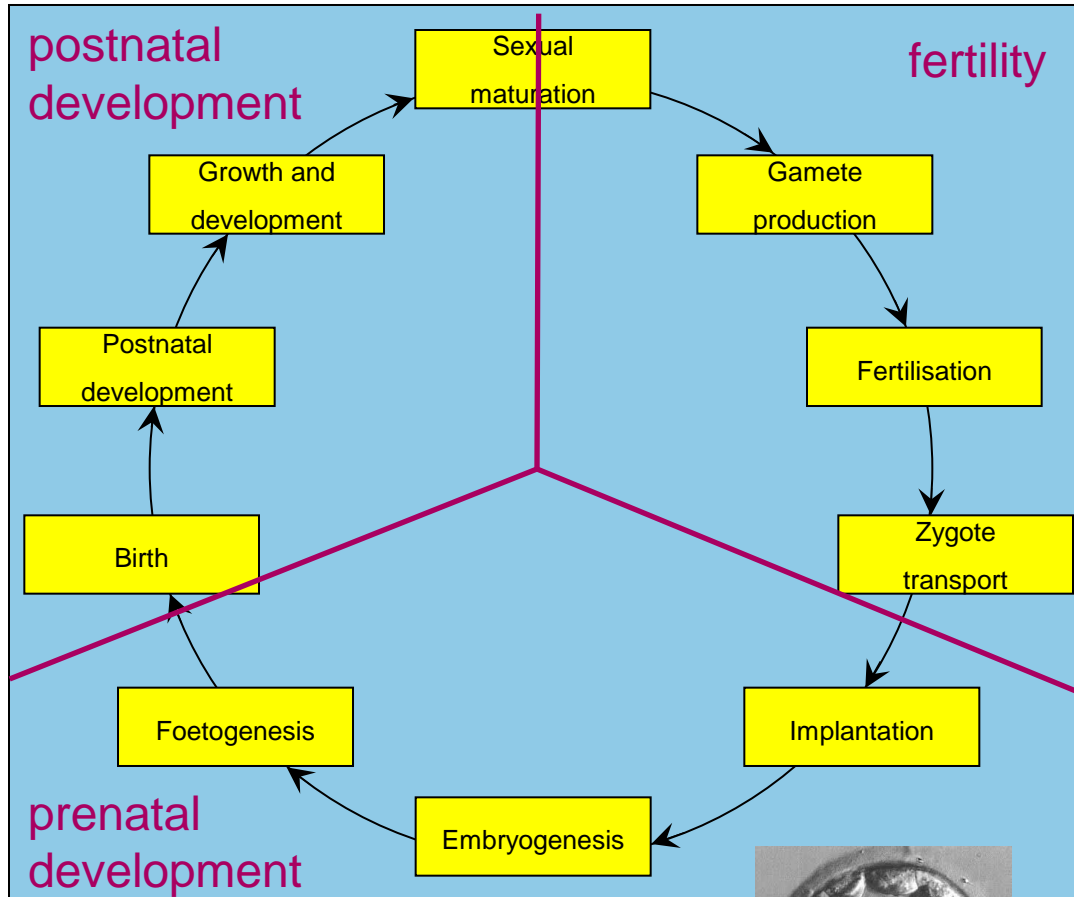


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The Reproductive Cycle





Food and Chemical Toxicology 42 (2004) 65–83



www.elsevier.com/locate/foodchemtox

Structure-based thresholds of toxicological concern (TTC): guidance for application to substances present at low levels in the diet

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- The NOELs for teratogenicity in most cases were considerably greater than 3 mg/kg. Therefore, the existing TTCs would be lower than any threshold related to teratogenicity. On the basis of a NOAEL analysis of 50 compounds the Expert Group decided that consideration of a separate class of teratogens would not be necessary.



Kroes et al., 2004: consideration of endocrine disrupting chemicals

- Low-dose effects were demonstrated in laboratory animals exposed to certain endocrine active agents but the effects were dependent on the compound studied and the endpoint measured. In some cases where low-dose effects have been reported, the **findings have not been replicated**. The validity and toxicological significance of many of these latter observations has not been determined.
- The Low-Dose Peer Review Panel **recommended additional research** to replicate previously reported key low-dose findings, to characterise target tissue dosimetry during critical periods of development, to identify sensitive molecular markers that would be useful in understanding mechanistic events associated with low-dose effects, and to determine the long-term health consequences of low-dose effects of endocrine active agents.
- The findings of the panel indicate that the current **testing paradigm** used for assessments of reproductive and developmental toxicity **should be revisited** to see if changes are needed regarding dose selection, animal model selection, age when animals are evaluated, and the endpoints being measured following exposure to endocrine active agents.

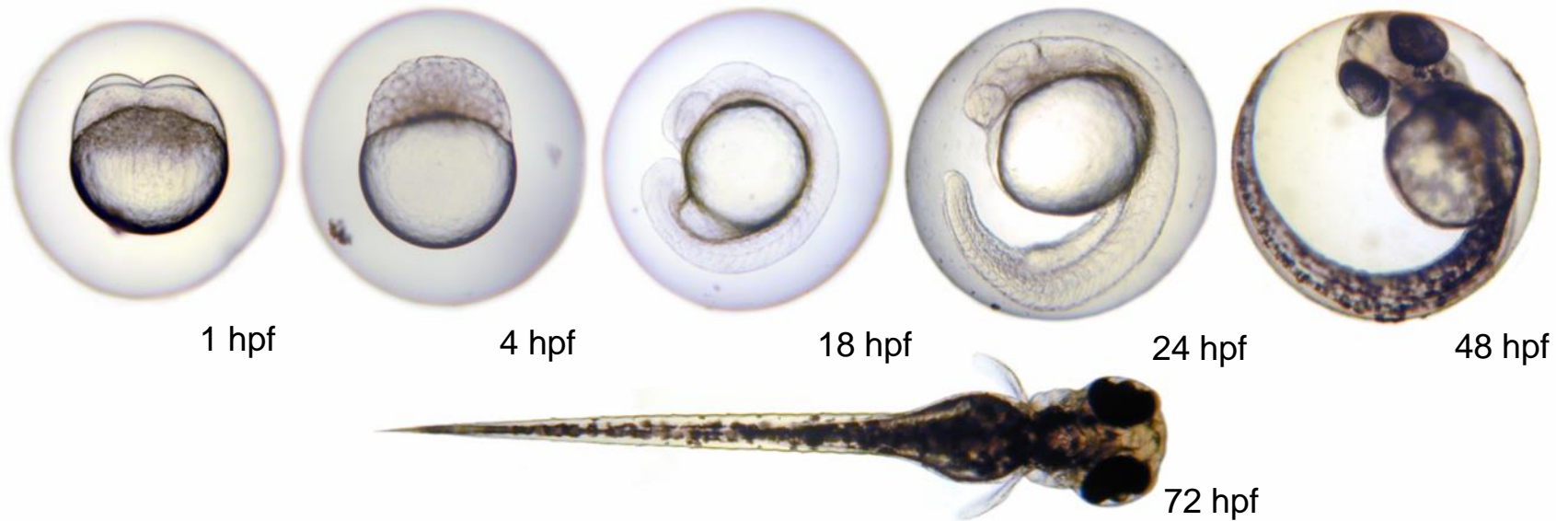


Some observations - 1

- Classical regulatory toxicology is largely based on effects that are generally considered **adverse**.
 - Death, body and organ weight, clinical signs etc.
- We are now able to detect a large variety of subtle changes in gene expression and biochemical parameters that may be **adaptive** or may indicate an adverse effect.
- How do we discriminate adaptive physiological changes from adverse health effects?



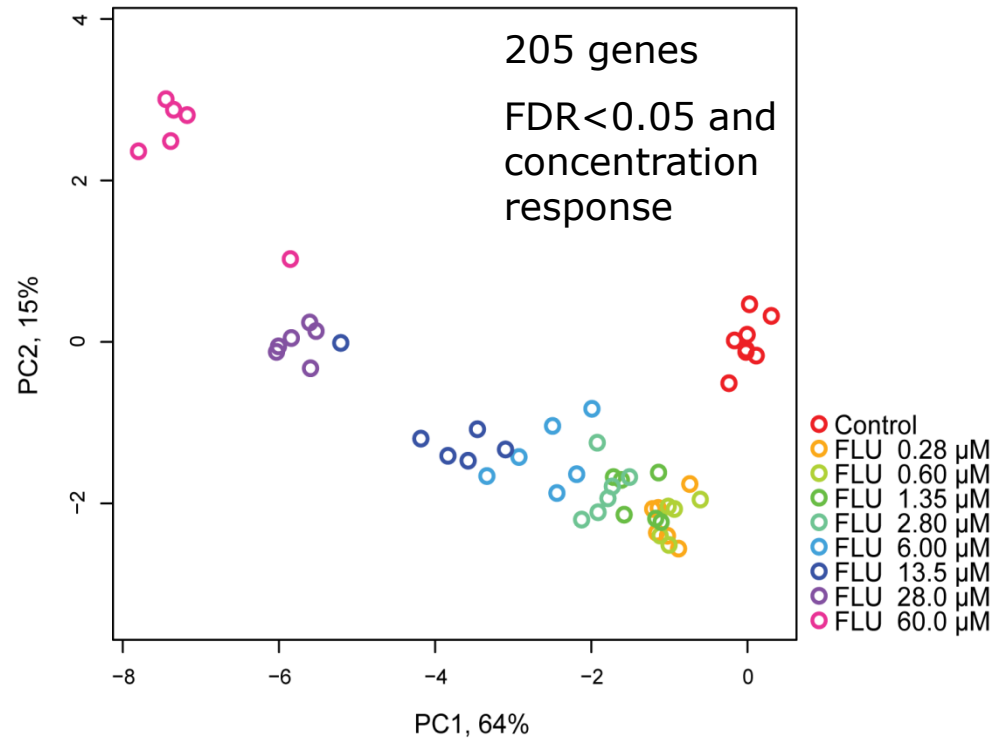
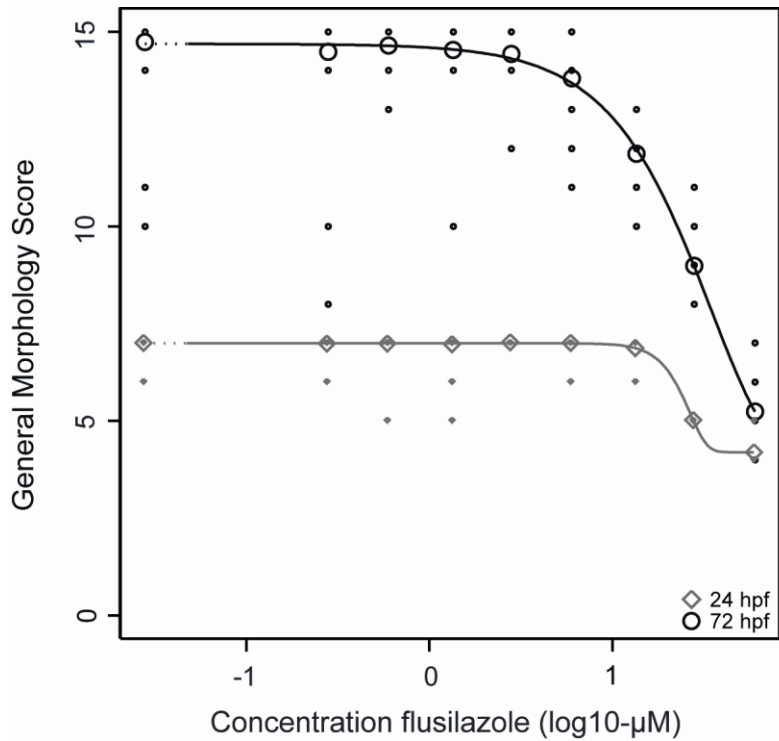
Zebrafish Embryotoxicity Test (ZET)



Hermesen et al., 2011



Principal Component Analysis - Flusilazole



Hermesen et al., 2011



Some observations - 2

- The organism has **homeostatic** mechanisms that enable compensation of effects of xenobiotic exposures precluding an adverse health effect to occur.
- Xenobiotic effects within the homeostatic range are not adverse per se.
- The **threshold of adversity** is crossed when homeostasis is overwhelmed, and adverse effects are then possible.



Homeostasis in the hypothalamic – pituitary – gonadal axis

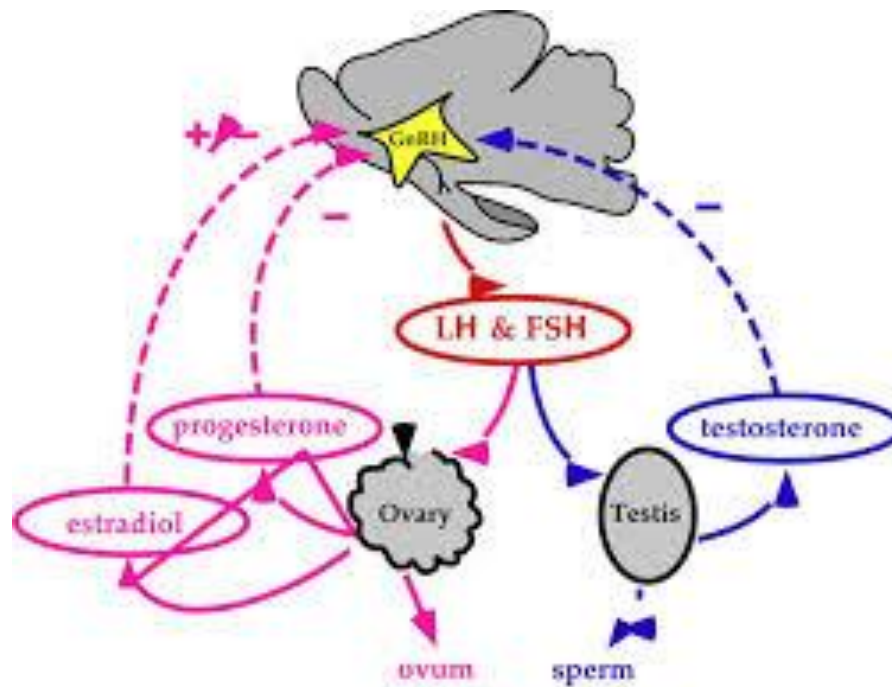


Figure 3



Critical Reviews in Toxicology, 2011; 41(6): 545–554
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REVIEW ARTICLE

Reproductive toxicants have a threshold of adversity

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Taken together, evidence from a variety of human teratogens supports the notion that the impact of exogenous chemical exposures is highly dose dependent and demonstrates that low-dose exposure can often be nonadverse, suggesting that **up to a threshold of adversity, the body can effectively neutralize hazards through homeostatic mechanisms**. A wealth of experience with thousands of chemicals evaluated in animal studies for reproductive hazard and risk identification corroborates this position. It is therefore justified to use the threshold dose approach in the risk assessment of reproductive toxicants.

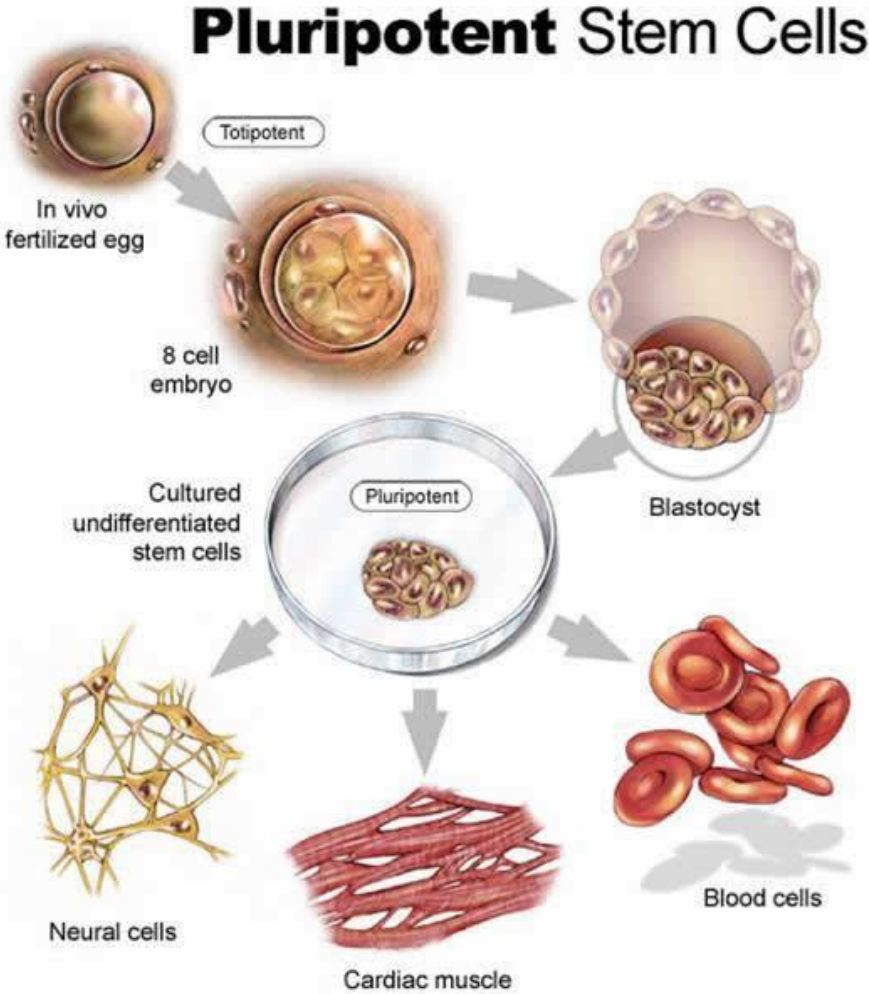


Some observations - 3

- We are now able to **detect** very low concentrations of xenobiotics in biological samples
- There is general concern about any exposure, secondary to the faulty assumption that hazard equals risk
- Cf. Paracelsus (1493-1541): *Alle Ding' sind Gift, und nichts ohn' Gift; allein die Dosis macht, daß ein Ding kein Gift ist.*
- Tr. *All things are poisons, and nothing is without poison; only the dose makes the thing not a poison.*



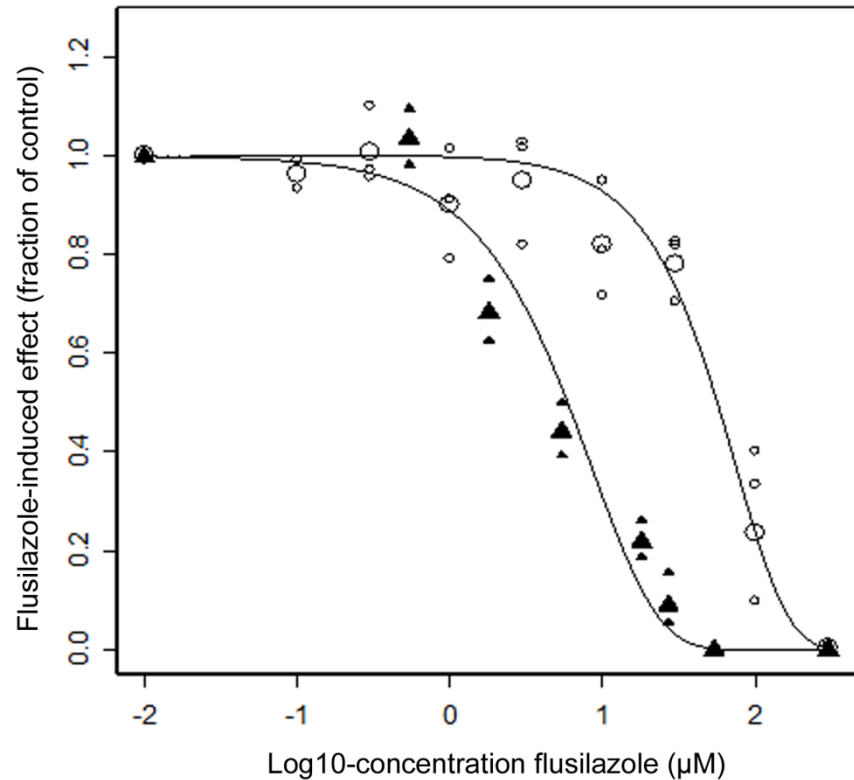
Pluripotent embryonic stem cells





Define threshold of adversity in vitro ?

- Flusilazole dose-response
- EST classical dose-response on contracting muscle foci readout
- Differentiation more sensitive than proliferation
- Interpreted as indicative of a specific developmental toxicant

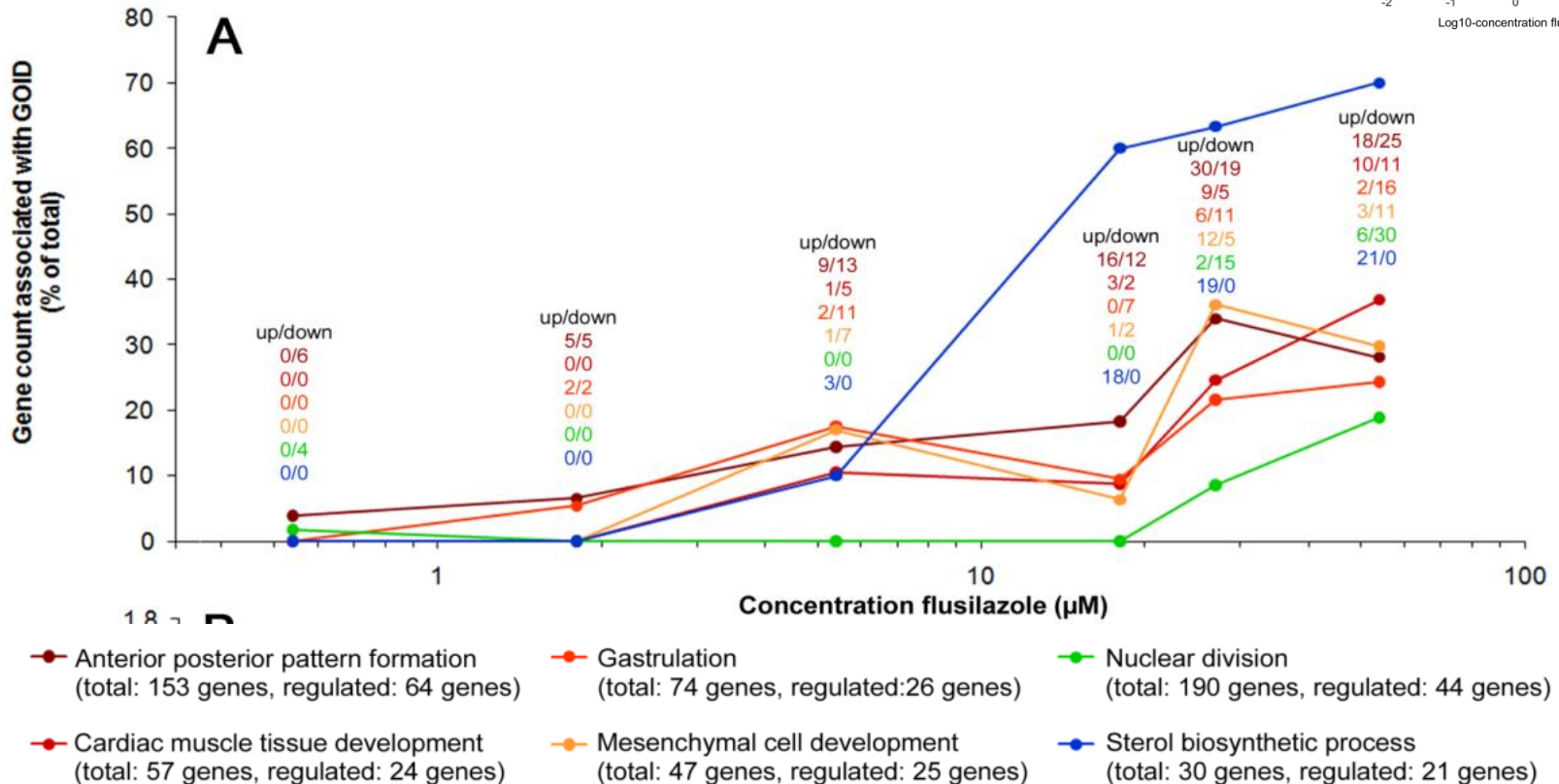
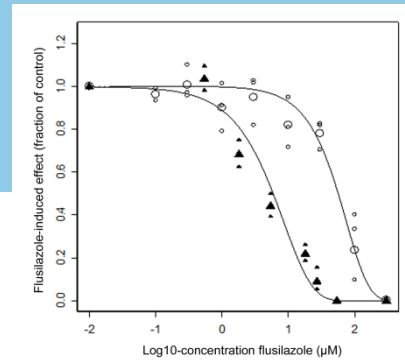


Concentration-response curves of ESC differentiation (▲) (n=2) and cell viability (○) (n=3) after flusilazole exposure.

Van Dartel et al., 2011



Flusilazole-induced GO term enrichment



Van Dartel et al., 2011



Some observations - 4

- Reported low-dose effects are often not reproducible.
- Study design and statistics are major issues of concern in many low dose studies.
- Findings from in vitro models lacking the homeostatic feedback mechanisms cannot be simply extrapolated to adversity and risk
- There is little time for reflection in view of the enormous amount of studies appearing continuously.



Developmental toxicity of butylbenzylphthalate

Exposure
GD6-15 (Δ)
GD6-20 (o)
Assessment
GD21

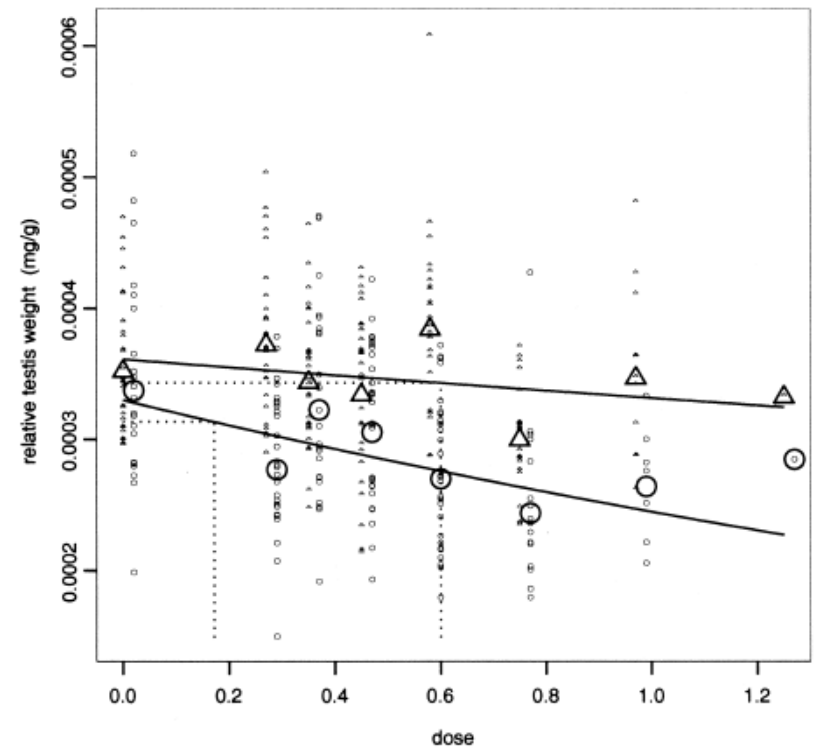


Fig. 12. Dose-response data and fitted model for relative fetal testis weight. For further explanation see legend of Fig. 1. Horizontal dashed line: 5% effect level.

Piersma et al., 2000



Needed

- Good quality studies – reproducibility of findings
- Innovation of current hazard assessment tools
- Realistic interpretation of findings
 - relevance of model (*pars pro toto*)
 - adaptation vs. adversity
 - compound potency
 - human exposure levels
- You cannot prove a negative, need to accept residual uncertainty
- Provide confidence instead of suspicion



Thank you