



Scientific Conference
***“Challenging boundaries in risk
assessment – sharing experiences”***

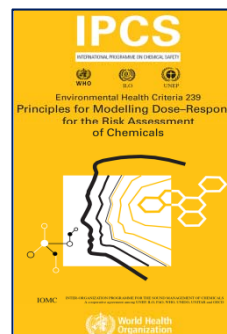
**Trends in chemical risk assessment
and integration of new methodologies**

Josef Schlatter

- **Background / Introduction**
- **Optimising hazard characterisation**
 - **Issues with genotoxic and carcinogenic compounds**
- **Improving Risk characterisation**
 - **Consideration of uncertainties in RA**
- **Newer methodology needs**
- **The future of RA ?**
- **Further information:**

EFSA JOURNAL

<http://www.efsa.europa.eu/en/publications.htm>

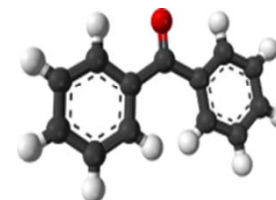


<http://www.who.int/foodsafety/chem/principles/en/index1.html>

Environmental Health Criteria 239
Principles for Modelling Dose-Response
for the Risk Assessment
of Chemicals

Environmental Health Criteria 240
Principles and Methods
for the Risk Assessment
of Chemicals in Food

Chemicals in Food and Feed



Botanicals



Whole food and feed



Organisms (plants & animals), microorganisms

Genetically modified foods, crops and organisms

Chemicals in Food and Feed



**Natural
constituents**

**Food
processing**



**biotech-
nology**



**overfeeding,
deficiencies**

nutrients

Dietary fibers...

additives

pesticides



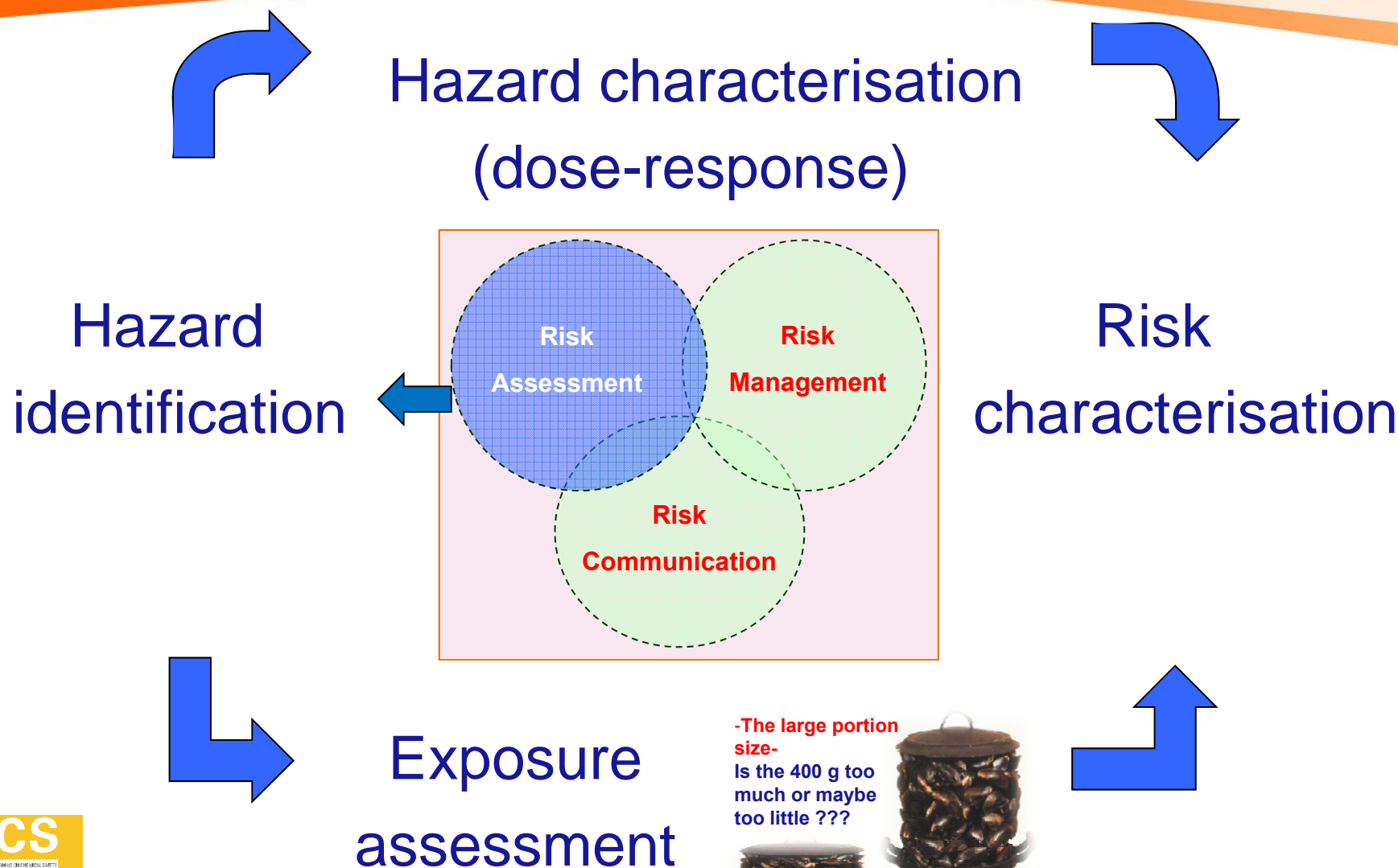
animal drugs

**packaging
materials**

**Environmental
contaminants**

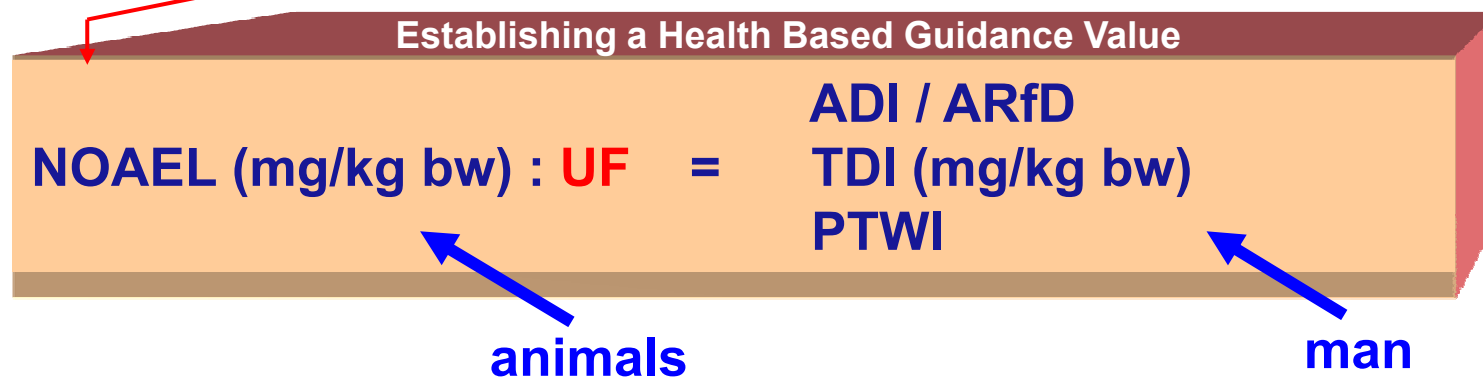
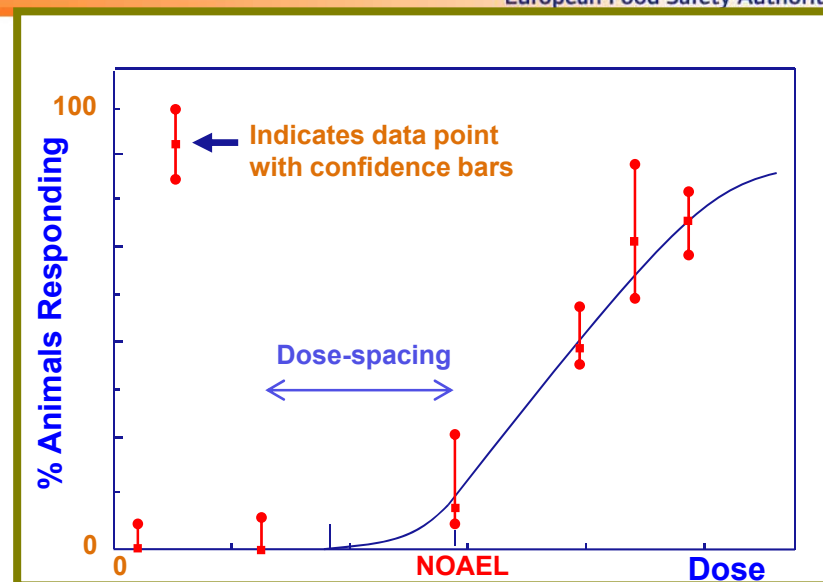


Risk assessment paradigm



Extrapolation from Animals to Man

- Most sensitive species
- Lowest NOAEL
- Apply uncertainty factors (UF)



ADI: intentionally added compounds

TDI, PTWI: Contaminants

Dose-response analysis : moving from NOAEL to Benchmark Dose approach (EFSA 2009)



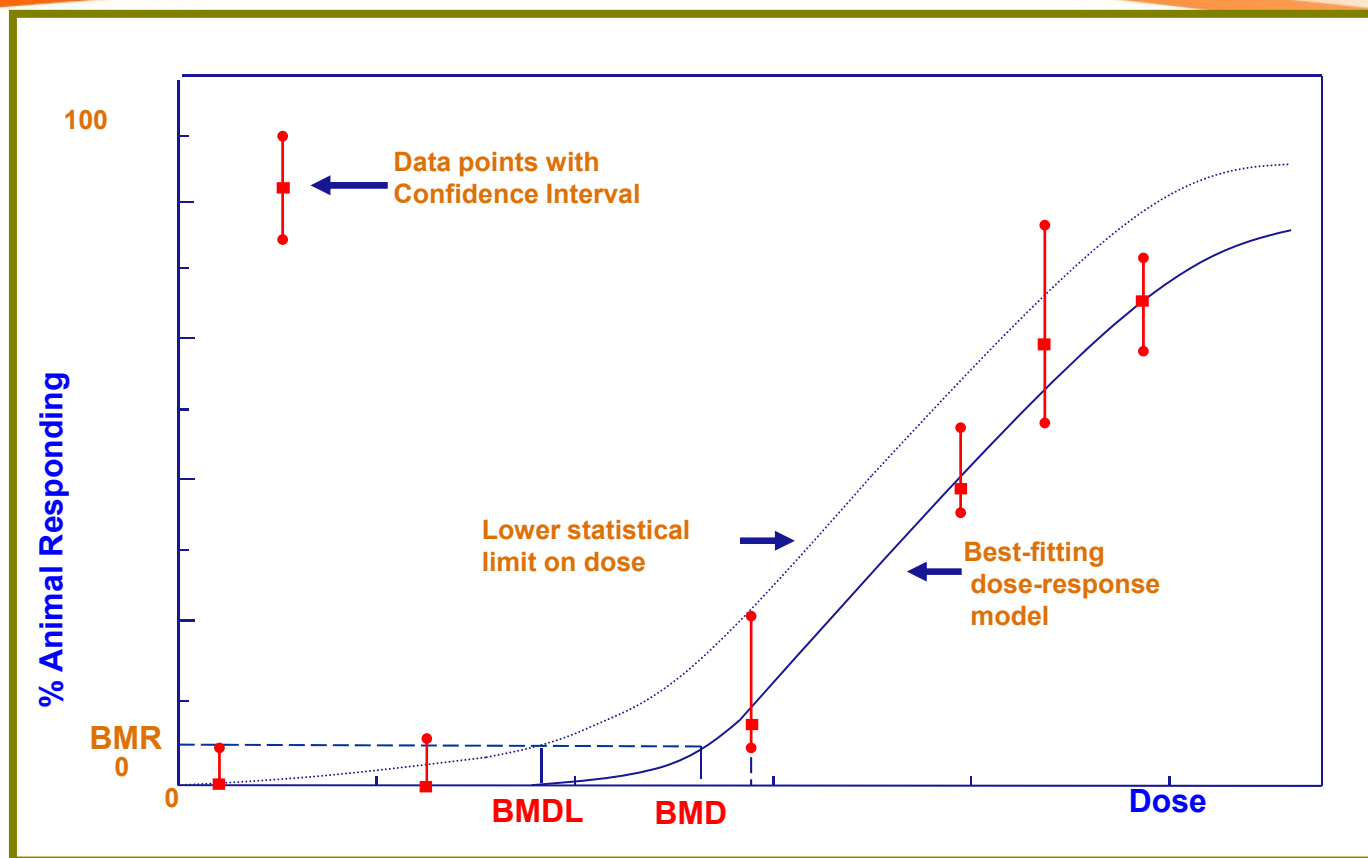
➤ The BMD approach offers a more scientific way of defining a reference point on the dose-response curve that can be used as the point of departure for risk characterisation

- ✓ Use of the whole dose-response data and no NOAEL is needed
- ✓ Not dependent on dose-spacing
- ✓ Evaluates the uncertainty in the calculated BMD

e.g.

- ❖ Derivation of **health-based guidance values** for substances with thresholded effects
- ❖ **Calculating margins of exposure for substances with non-thresholded effects – i.e. genotoxic & carc. compounds**

The Benchmark Dose (BMD)

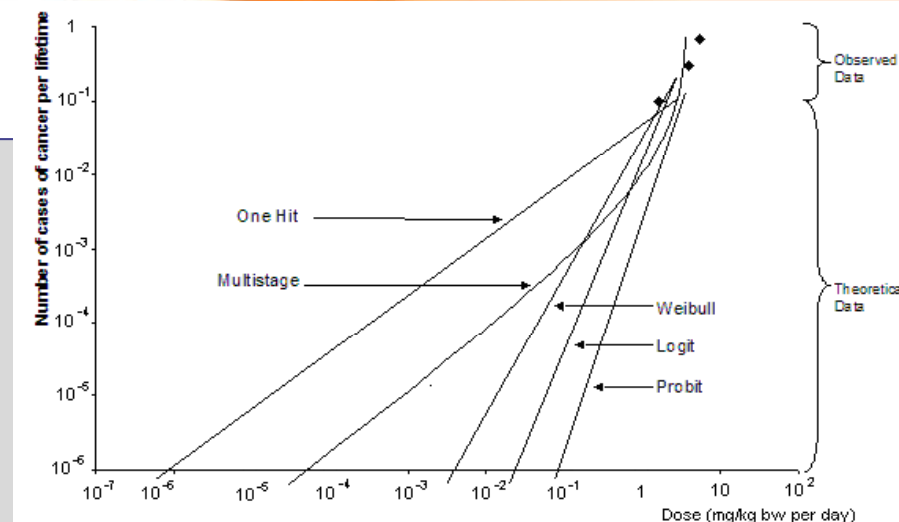


- Different Species
 - Different Endpoints (organ-specific Tumour incidence, Total Tumours)
 - Different Models
- Use lowest BMD(L) as reference point? Central estimate?

Extrapolation from observed range to Low-Dose Exposure

EFSA 2005:

has **serious reservations** about extrapolating outside the observed dose range using **mathematical modelling**



„Model used more important than actual data“

- sign. non-linearities in toxicokinetics and mode of actions
- cytotoxicity at high doses may influence the D-R

The MOE approach

Moving from ALARA To MOE

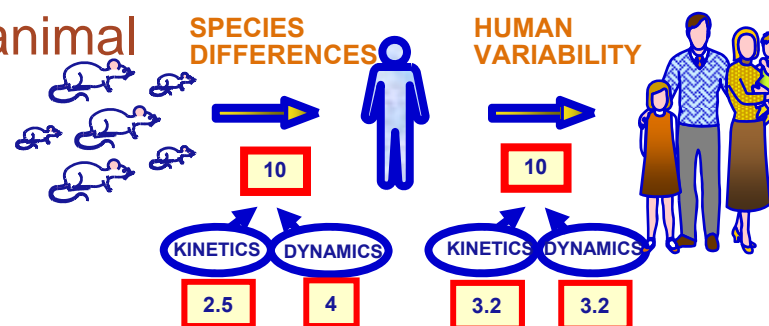
$$\text{MOE} = \frac{\text{dose producing tumours in animals}}{\text{human exposure dose}}$$

- to provide additional scientific advice to risk managers taking into account available scientific information
 - Potency of compound
 - Extent of human exposure
- Selection of a reference point (point of departure): **BMDL₁₀**

- ✓ Magnitude of a MOE can be used for **priority setting**: a small MOE represents a higher risk than a larger MOE
- ✓ Magnitude of MOE which is acceptable is a **societal judgment** and is the responsibility of risk managers
- ✓ MOE makes no implicit assumptions on a “safe” intake

Default values (EFSA 2012)

- Use of harmonised default values across EFSA Panels
 - e.g. body weight; human & animal food & liquid intake;
 - rounding figures
 - uncertainty factors when using animal data for human risk assessment



- Will result in more consistency and transparency in opinions

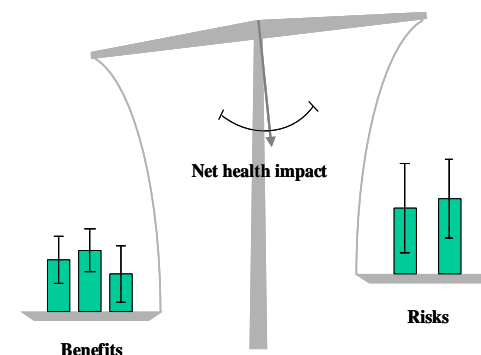
Expression of uncertainties in dietary exposure assessments (EFSA 2006)

- **Systematic examination of sources and types of uncertainty**
- **Quantitative or semi-quantitative expression of uncertainties**

Risk/benefit analysis (EFSA 2010)

➤ Improving the **human health assessment** of foods with **both risks and benefits**

- e.g. fish containing both
- toxic chemicals (methylmercury, PCBs, pesticides)
 - and beneficial nutrients (n3-LCPUFAs, Se, I, vit D)



Step-wise approach

- Do health risks outweigh benefits?
- Semi-quantitative or quantitative assessment of risks and benefits at same exposure using common metric
- Comparison of risks and benefits on a comparable scale

NEWER METHODOLOGY NEEDS

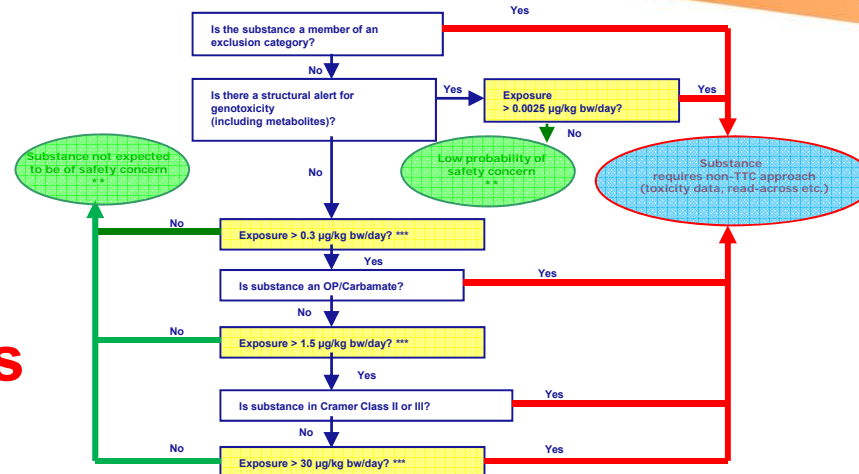
Improvement of methods within the standard RA paradigm

- Methods that facilitate assessment of large groups of chemicals over a short time
- **Methods enabling advice to be given on chemicals with few or no data**
- **Methods to assess cumulative risks from co-exposure to chemicals with similar and dissimilar MOAs**
- **Methods to assess risks of aggregate exposure to one chemical from all routes of exposure**

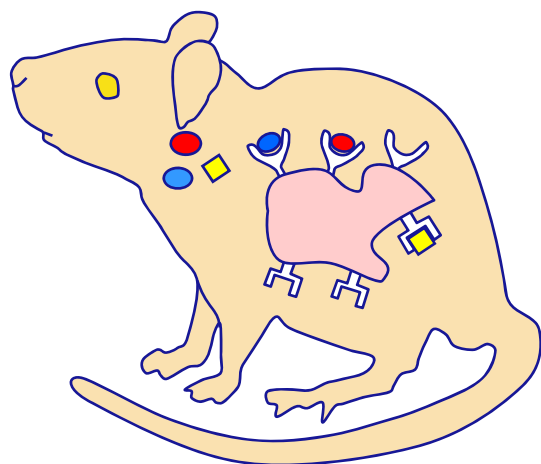
Chemicals with few or no data: the TTC approach

Data and expertise needed:

- Chemical structure
- Good exposure assessments or 'worst-case'
- Ability to use Cramer Structural Class Decision Tree (broad knowledge of metabolic pathways desirable)
- Ability to use decision trees or QSAR software to identify alerts for genotoxicity
 - e.g. Ashby and Tennant et seq.; DEREK, TOPKAT, CASE, Multicase, ADAPT, QSAR-ES, COMPACT, COREPA



Combination Effects



Dose Addition

- Dioxins, Furans, PCB
- Organophosphates
- N-Methyl-Carbamate
- Triazine
- Group ADI e.g. for different salts of an additive

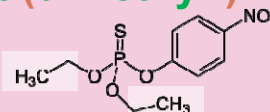
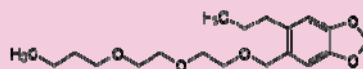
Effect Addition

- Many

Interaction

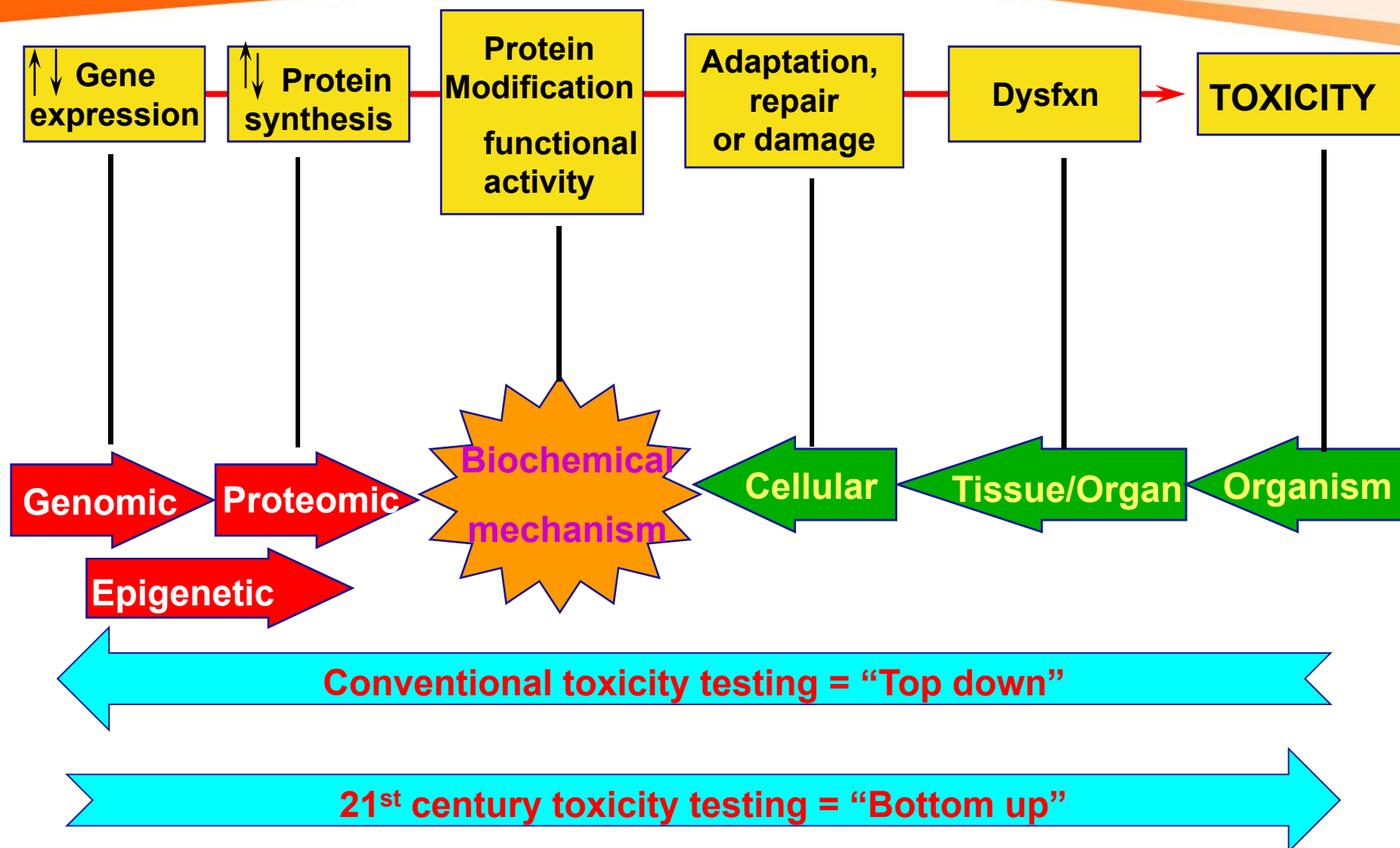


•Piperonylbutoxid
 as **Synergist** (diethyl-) or **Antagonist** (dimethyl-)
 of Phosphorothionate Insecticides
 (e.g. parathion↑↑, methylparathion↓↓)

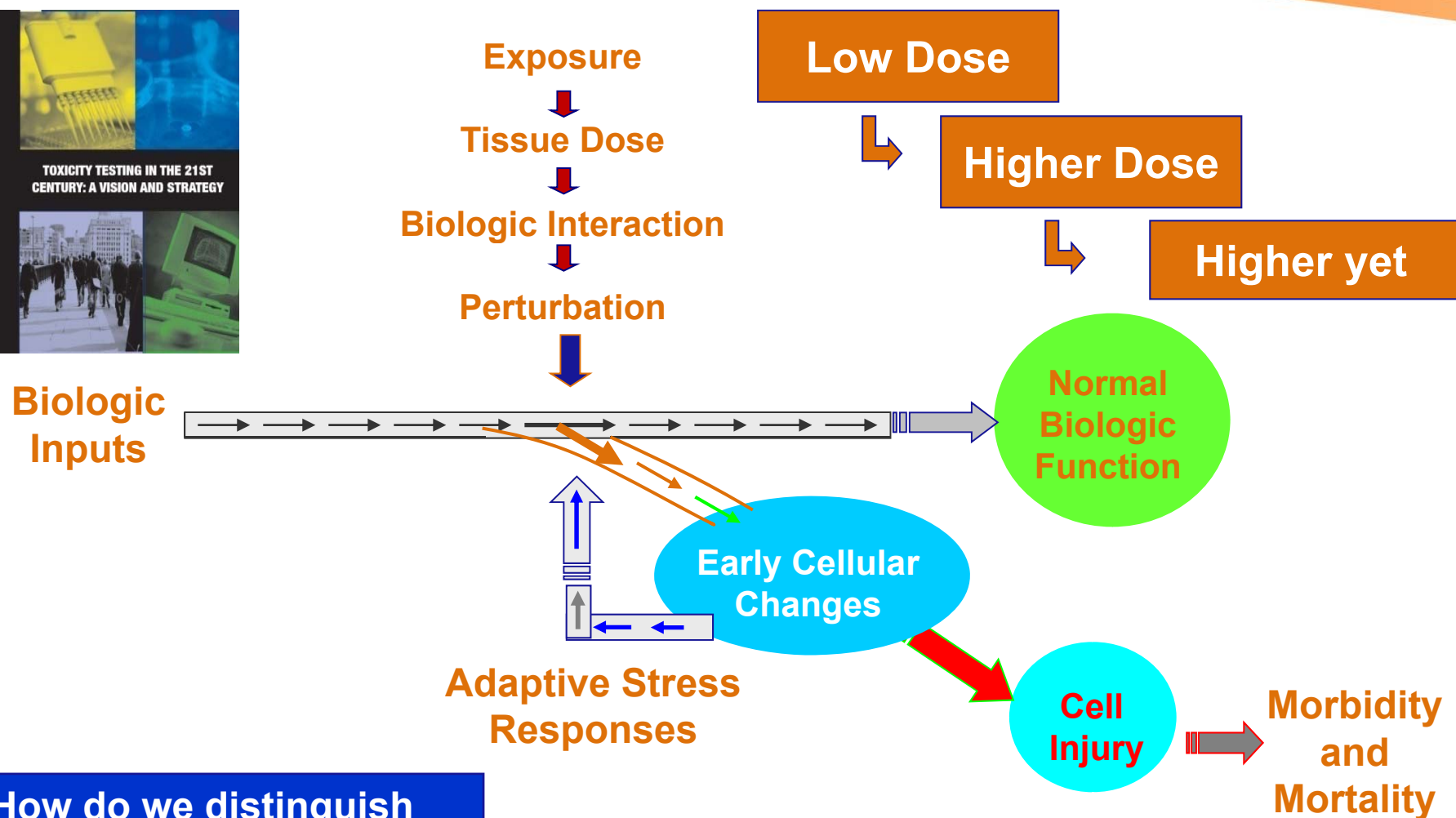
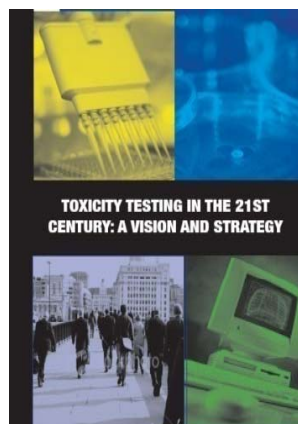


How do we group chemicals ??

Toxicity data continuum



Perturbation of toxicity pathways



How do we distinguish
adaptive versus adverse
(toxic) responses?

Where next?

❖ Future specific tasks and challenges include

- RA of low-dose effects, e.g. for endocrine-active substances
- RA of mixtures
- Environmental RA
- Characterisation of uncertainties in RA
- Implementing new technologies in RA

The future of risk assessment

- The basic principles of risk assessment will not change
 - Make the best use of all available information to inform policy to protect human health
- The **nature of the information** for risk assessment will **change** to a more bottom-up approach
- Assays will not be validated in conventional sense, but rather biologically justified
- **Uncertainty will increase**, at least initially, as new approaches are evaluated
- There is likely to be a move from “bright line” **safety** to **levels of protection**
 - Need to bound uncertainty



**Thank you very much
for your attention !**