

# Committee on \_\_\_\_\_ MUTAGENICITY

MUT/MIN/2017/2

## **COMMITTEE ON MUTAGENICITY OF CHEMICALS IN FOOD, CONSUMER PRODUCTS AND THE ENVIRONMENT**

Minutes of the meeting held at 10.30 am on Thursday 22<sup>nd</sup> June 2017 at Public Health England, Wellington House, 133 – 155 Waterloo Road, Lambeth London, SE1 8UG.

### **Present:**

#### **Chairman:**

Dr D Lovell

#### **Members:**

Dr C Beevers  
Dr M O'Donovan  
Dr G Clare  
Professor S Doak  
Dr S Dean  
Professor H Drummond  
Professor D Harrison  
Ms P Hardwick  
Professor D Kirkland  
Professor F Martin  
Dr A Povey

#### **Secretariat:**

Dr O Sepai (PHE Secretary)  
Mr B Maycock (FSA Secretariat)  
Dr K Burnett (Imperial College)  
Mr K Okona-Mensah (Imperial College)  
Mr S Robjohns (PHE Secretariat)  
Miss H Smith (PHE Secretariat)

#### **Assessors:**

Dr L Dearly (HSE)  
Dr R Pearson (VMD)

#### **In attendance:** Secretariat)

Miss B Gadeberg (PHE COC & COT)

	Paragraph
1. Apologies for absence	1
2. Minutes of the meeting held on 23 <sup>rd</sup> February 2017 (MUT/MIN/2017/1)	6
3. Matters Arising	7
4. First draft quantitative risk assessment of genotoxicity data (MUT/2017/03)	8
5. Consolidated summary of germ cell mutation discussions (MUT2017/04)	20
<b>ITEM 6 RESERVED BUSINESS</b>	
6. Toxicological evaluation of novel Heat-not burn commercial products: Follow up information from joint Committee discussion (MUT/2017/05)	25
<b>OPEN SESSION</b>	
7. Update on Horizon Scanning items	32
8. Updates on OECD	43
9. Annual Report 2016 (MUT/2016/03)	44
10. Any Other Business	45
11. Date of next meeting – 9 October 2017, Joint Committee meeting, Public Health England, CRCE, Chilton, Oxfordshire	47

1  
2 **ITEM 1: ANNOUNCEMENTS/APOLOGIES FOR ABSENCE**  
3

4 1. The Chair welcomed members, the secretariat and assessors. Mr B  
5 Maycock attended for the secretariat from the Food Standards Agency (FSA)  
6 and Miss B Gadeberg (PHE) attended for the COC and COT Secretariat.  
7

8 2. Apologies for absence were received from Professor G Jenkins  
9 (member), Dr H Stemplewski (MHRA), Dr C Ramsay (Health Protection  
10 Scotland), Dr I Martin (EA), and Ms T Netherwood (DH).  
11

12 3. The committee was informed that the triennial review of the COM had  
13 been published on the DH website, but the secretariat had not yet received any  
14 confirmation that it been formally signed off.  
15

16 4. The COM heard that the current contract for scientific writing for the  
17 COM had come to an end and the contract had gone out to tender via open  
18 competition. The process of agreeing a new contract had not yet been  
19 finalised. The committee thanked Dr K Burnett and Mr K Okona-Mensah for  
20 their hard work in providing the scientific writing services for the committee and  
21 wished them the best for the future.  
22

23 5. The members were asked to review and provide any declarations of  
24 interest to the secretariat. Members were also reminded to declare any  
25 interests before discussion of items.  
26  
27

28 **ITEM 2: MINUTES OF MEETING ON 23 FEBRUARY 2017 (MUT/MIN/2017/1)**  
29

30 6. Members agreed the minutes subject to minor changes.  
31  
32

33 **ITEM 3: MATTERS ARISING**  
34

35 7. The assessor from the Health and Safety Executive informed the COM  
36 that the European Food Safety Authority (EFSA) had recently concluded that  
37 glyphosate was not classified as an endocrine disruptor. Members were also  
38 informed that a full opinion from the European Chemical Agency's (ECHA) Risk  
39 Assessment Committee (RAC) on the harmonised classification and labelling  
40 of glyphosate had recently been published on the ECHA's website.  
41  
42

43 **ITEM 4: FIRST DRAFT OF A STATEMENT ON QUANTITATIVE RISK**  
44 **ASSESSMENT OF GENOTOXICITY**  
45

46 8. The Chair declared that he sat on a number of the International Life  
47 Sciences Institute and the Health and Environmental Sciences Institute  
48 (ILSI/HESI) committees that have discussed this topic.  
49  
50

1 9. At the COM meetings in October 2016 and March 2017, members  
2 considered papers on recent developments in Quantitative approaches to the  
3 risk assessment of genotoxicity data. This included overviews of reports from  
4 the International Workshops on Genotoxicity Testing (IWGT) working group on  
5 quantitative approaches to genetic toxicology risk assessment (the QWG);  
6 publications arising from a workshop organised by HESI; and publications in a  
7 recent edition of Mutagenesis on this topic. Aspects, such as, the development  
8 of different benchmark dose (BMD) software (PROAST<sup>1</sup> and US EPA BMDS),  
9 point of departure metrics, and application in carcinogenicity risk assessment  
10 were considered.

11  
12 10. The COM had agreed that it would be useful for it to present its views  
13 and opinions in a statement. A first draft had been produced (MUT/2017/03) for  
14 consideration and comment by members.

15  
16 11. Members had a general discussion of the draft statement before going  
17 through each paragraph with specific comments and suggested amendments.

18  
19 12. The COM considered that it was important to emphasise in the  
20 statement that the area of quantitative analysis of genotoxicity data by the  
21 various experts in this field was a work in progress and was developing with  
22 new ideas. The changing nature of the topic made it difficult for the COM to  
23 come to overall conclusions or make recommendations. For example, the BMD  
24 software tools appeared to be frequently updated, which made it difficult to  
25 make comparisons between the US EPA BMDS and PROAST.

26  
27 13. Members agreed that it is difficult to understand the sophisticated  
28 algorithms and the detailed mathematical based work that had been  
29 conducted. It would be helpful if the experts in the field could provide relatively  
30 simple explanations of their work and explain the various strengths and  
31 weaknesses of the two main types of BMD software used. For example, to  
32 explain the arguments relating to critical effect size (CES) and whether a  
33 percentage change or a one standard deviation was the preferred option. The  
34 COM considered that it was very important to determine the most appropriate  
35 approach before the use of quantitative risk assessment of genotoxicity data  
36 could be developed further.

37  
38 14. Members had some reservations over how informative complex analysis  
39 applied to relatively limited data could be (e.g. when there were just three dose  
40 levels, with just one giving a positive response). The COM also had concerns  
41 over the quality of the data analysed and reiterated its request for guidance on  
42 a cut-off point where the ratio of the upper confidence interval to the lower was  
43 too large i.e. when the quality of the data were too poor to analyse.

44  
45 15. The COM believed that insufficient consideration had been given to the  
46 biological relevance of the genotoxic endpoints analysed and to the biological  
47 meaning or significance of the size of the effect seen. Members questioned

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<sup>1</sup> This includes the EFSA-PROAST platform

1 how the the biological relevance of the formation of micronuclei, the comet  
2 assay, and transgenic mutation assays could be compared quantitatively. The  
3 COM noted that it had been suggested that comparisons could be made  
4 between maximum effects of various endpoints; however, chromosome  
5 aberrations measured on a percentage basis would have a maximum of 100%,  
6 whereas mutation frequency had no realistic limit. Further, the size of any  
7 response would depend on sampling time. It would not be known whether the  
8 maximum response occurred before or after the selected sampling time. The  
9 COM also noted that there was a difference between quantal and continuous  
10 data.

11  
12 16. Currently, members understood that there would likely be two main uses  
13 for analysis of the dose-response relationship; one would be to help determine  
14 whether there was likely to be a threshold for genotoxicity; and the other as a  
15 predictor for potential carcinogenicity (i.e. where the intention was to avoid  
16 undertaking a carcinogenicity study). The COM was aware that analysis had  
17 suggested that a point of departure (POD) derived from genotoxicity dose-  
18 response data would give a more conservative and health protective exposure  
19 value than a POD derived from carcinogenicity dose-response data. However,  
20 such analysis had only been conducted with a relatively small number of  
21 chemicals with the same mode of action. The COM considered that further  
22 work needed to be done with a larger number of chemicals and with different  
23 genotoxic modes of action, before any conclusions could be drawn on a  
24 potential correlation between dose response analysis for genotoxicity and  
25 carcinogenicity data. Also, further work was required on different genotoxic  
26 endpoints and tissues before the COM could draw any conclusions. Currently,  
27 the COM did not consider that carcinogenic potency could be estimated from  
28 genotoxicity data.

29  
30 17. Members went through the draft statement paragraph by paragraph with  
31 various suggested amendments and comments, which would be addressed in  
32 the next revised version of the statement.

33  
34 18. Overall, the COM considered that quantitative dose-response analysis  
35 of genotoxicity data was work in progress and that further work was required. It  
36 was important to address a number of the points referred to above such as, the  
37 most suitable BMD software; documentation and explanation of the various  
38 versions of the BMD software; clearer explanation of the analytical quantitative  
39 approaches; difference between quantal and continuous data; suitable  
40 sampling time; a cut-off point for poor quality data; suitable genotoxic endpoint  
41 and tissues; biological relevance of CES or BMR; and analysis of a larger  
42 number of chemicals and classes with different modes of genotoxic action.

43  
44 19. The revised statement would be circulated to the committee via email  
45 for comment initially.

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48 **ITEM 5: CONSOLIDATED SUMMARY OF GERM CELL MUTATION**  
49 **DISCUSSIONS**  
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1 20. The COM had previously considered germ cell mutation at a meeting in  
2 June 2013, October 2015 and more recently in February 2016. A number of  
3 aspects had been considered, such as germ cell mutation assays; the effect of  
4 paternal age (e.g. increase in the number of mutations in sperm with paternal  
5 age); the sperm chromatin structure assay (SCSA) and the TUNEL (terminal  
6 deoxynucleotidyl transferase dUTP nick end labelling) assays and their  
7 potential for investigating germ cell mutagenesis in humans; and the  
8 suggestion that air pollution is a germ cell mutagen. As a number of different  
9 aspects relating to germ cell mutation had been considered by the COM it was  
10 agreed that a consolidated summary document could be produced to  
11 communicate the Committee's view. A draft COM summary document  
12 (MUT/2017/04) had been prepared and members were asked for comments.  
13

14 21. There was some discussion of the appropriate sampling time to detect  
15 mutations in sperm and the potential implications for current guidance on germ  
16 cell gene mutation assays (e.g. OECD Test Guideline 488). Members were  
17 aware of suggestions that a sampling time of 28 days post dosing in *in vivo*  
18 studies may be more appropriate than the current recommendation of a 3 day  
19 post dosing sampling time to detect DNA effects in sperm. It was agreed that  
20 this should be addressed in the draft COM summary document.  
21

22 22. The COM noted that there was evidence that the number of mutations in  
23 sperm increased as paternal age increased. It was not clear whether this  
24 increase in mutations was due to an individual being older per se (i.e. due to  
25 the aging process) or whether it was a consequence of a longer duration of  
26 exposure to environmental mutagens.  
27

28 23. Regarding the suggestion that air pollution was a germ cell mutagen,  
29 the COM considered that the sperm assays used in providing evidence for this  
30 assertion had not been sufficiently validated for detecting germ cell mutations.  
31 Members had previously agreed that the SCSA and the TUNEL assays were  
32 difficult to interpret in terms of germ cell mutagenicity and had not been  
33 sufficiently validated for detecting mutation.  
34

35 24. Members went through the draft COM summary document on germ cell  
36 mutagenicity paragraph by paragraph with various suggested amendments  
37 and comments, which would be addressed in the next revised version. The  
38 document would be amended accordingly and circulated to the committee for  
39 comments.  
40

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43 **RESERVED BUSINESS**  
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46 **ITEM 6: TOXICOLOGICAL EVALUATION OF NOVEL HEAT – NOT BURN**  
47 **TOBACCO PRODUCTS: FOLLOW UP INFORMATION FROM JOINT**  
48 **COMMITTEE DISCUSSION (MUT/2017/01)**  
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2  
3 OPEN SESSION  
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6 ITEM 7: UPDATE ON HORIZON SCANNING  
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8 i) Statements from EU Regulatory Agencies  
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10 25. One member provided an update on ongoing work to address concerns  
11 expressed at previous meetings (June 2016, October 2016, and February  
12 2017) on four statements from regulatory reviews by ECHA/EFSA.  
13

14 26. The first statement was that for *in vivo* genotoxicity assays the  
15 intraperitoneal (IP) route of administration should be preferred over oral and  
16 inhalation as it leads to a by-pass of some first pass metabolism in the liver,  
17 and therefore, produces a more sensitive test. However, at the meetings in  
18 October 2016 and February 2017 it was noted that for the majority of  
19 compounds the IP route of administration does not represent a realistic route of  
20 exposure. At the last meeting the committee were informed that the ILSI/HESI  
21 Genetic Toxicology (GTTC) Committee were gathering information to address  
22 this issue.  
23

24 27. However, the COM was informed that only limited information could be  
25 identified by the GTTC to address this issue. A study conducted in Japan in the  
26 late 90s compared the difference in genotoxicity of approximately 24  
27 compounds when tested via the IP and oral route. The study reported that  
28 overall there was no reason to prefer the IP over the oral route. It was noted  
29 that a representative from ECHA had recently joined the GTTC and would feed  
30 back the findings of the GTTC to the chair of the ECHA Member State  
31 Committee (MSC).  
32

33 28. The second statement was that for the *in vivo* mouse micronucleus test,  
34 even if a test compound is detected in the plasma, it does not necessarily  
35 indicate that the target tissue in the bone marrow had been sufficiently  
36 exposed to the test compound.  
37

38 29. The committee were informed this was being considered by the EFSA  
39 Scientific Committee and Emerging Risks Working Group on Genotoxicity who  
40 had been requested to address this and other questions in a mandate from the  
41 European Commission. A COM member attended a number of the meetings as  
42 a hearing expert and informed the committee that the working group  
43 recommendations will be published for a public consultation period during  
44 which members may wish to provide comments.  
45

46 30. The third statement was that even if it can be demonstrated that a test  
47 chemical has reached the bone marrow at a concentration that exceeds  
48 anticipated human exposure, it may not be considered adequate, as higher  
49 exposure could have been achieved in an *in vivo* site-of-contact comet assay.  
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1  
2 31. The committee were informed that the mandate issued by the European  
3 Commission to EFSA also requested the consideration of 'the use of data in a  
4 weight of evidence approach to conclude on the genotoxic potential of  
5 substances and the consequent setting of health-based reference values for  
6 the use in human health risk assessment' and therefore, this issue may be  
7 covered in the recommendations of the Scientific Committee and Emerging  
8 Risks Working Group on Genotoxicity.

9  
10 32. The fourth statement was that the glandular stomach (in addition to the  
11 liver and duodenum) should be sampled for site of contact assays to help  
12 account for tissue variables; such as tissue structure/function, pH conditions,  
13 absorption rates and differences in breakdown products.

14  
15 33. One COM member had drafted a discussion paper on this statement,  
16 which was shared with other COM members in advance of the last meeting  
17 and contained information available in the public domain on studies that had  
18 used both the duodenum and glandular stomach. Additional supportive data  
19 had subsequently been provided by other members of the COM for  
20 incorporation into the paper. A database of 90 chemicals collated by the  
21 ILSI/HESI GTTC was also being reviewed. Based on this preliminary analysis,  
22 almost all of the chemicals that produced positive results in an *in vivo*  
23 carcinogenicity study were identified as genotoxic chemicals using a  
24 combination of a bone marrow micronucleus assay and a liver comet assay  
25 (often conducted as a combined assay); suggesting that a site of contact  
26 comet assay may not be required. It was agreed that the members involved in  
27 the analyses would draft a discussion paper for submission to EFSA and  
28 ECHA. A COM paper would be produced, if required.

29  
30 ii) General horizon scanning

31  
32 34. The committee were reminded that at the last meeting one member was  
33 invited to give a presentation on the 'development of chronic and passive in  
34 vitro dosing systems for genotoxicity assessment', which had recently been  
35 covered at the joint National Centre for the Replacement Refinement &  
36 Reduction of Animals in Research (NC3Rs) and Unilever Workshop on  
37 'applying exposure science to increase the utility of non-animal data in efficacy  
38 and safety testing'. It was also suggested that a presentation could be given on  
39 the US Environmental Protection Agencies (EPA) Benchmark Dose Software  
40 (BMDS).

41  
42 35. The committee agreed to discuss the key themes and outcomes  
43 addressed at the International Workshop on Genotoxicity Testing (IWGT) (8-  
44 10<sup>th</sup> November in Tokyo, Japan) and the Industrial Genotoxicology Group  
45 (IGG) meeting (December) at the COM meeting in February 2018.

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48 **ITEM 8: UPDATES ON OECD**  
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1 36. The committee were informed that the work programme for OECD  
2 includes a detailed review paper on the miniaturised version of the Ames test.  
3 A nominated expert attended an expert group at the OECD on behalf of UK  
4 where this was discussed. A survey has been circulated by the OECD to  
5 experts (including many members of COM) asking for information on what is  
6 already known and if more validation is needed. It was noted that COM  
7 members may wish to comment.  
8  
9

#### 10 **ITEM 9: ANNUAL REPORT**

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12 37. The draft annual report had been distributed to the Committee.  
13 Members were asked to email any comments to the secretariat.  
14  
15

#### 16 **ITEM 10: ANY OTHER BUSINESS**

17

18 38. One member informed the committee that they had received final and  
19 draft decisions from the European Chemicals Agency (ECHA) requesting the  
20 conduct of a transgenic rodent (TGR) somatic and germ cell gene mutation  
21 assay (OECD TG 488) with analysis of mature sperm 3 days after the 28 day  
22 dosing period. As discussed under agenda item 5, the COM considered that  
23 sampling 3 days after dosing produces unreliable data in mature sperm and it  
24 was acknowledged that the current OECD guideline does not clearly state the  
25 sampling time that should be followed, depending on whether you are  
26 interested in somatic or germ cells. This was also acknowledged by ECHA who  
27 subsequently requested that mature sperm was analysed 7 weeks post-dosing,  
28 which would increase the number of animals required. The COM member  
29 noted the importance of raising awareness that the current OECD TG 488 is  
30 considered inappropriate for germ cell testing and that the guideline is under  
31 review. The committee were informed that Health Canada were conducting  
32 modelling of spermatogenesis in mice to establish whether a single sampling  
33 time could be used to investigate effects in both somatic and germ cells.  
34

35 39. Members discussed the relationship between ECHA, EFSA, the  
36 European Medicines Agency (EMA) and the Home Office regarding setting  
37 requirements for animal testing. It was noted that this relationship would  
38 change as a result of Brexit. The committee agreed to discuss this further as  
39 part of the horizon scanning exercise at the joint committee meeting in October  
40 2017.  
41  
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#### 43 **ITEM 11: DATE OF NEXT MEETING**

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45 40. 9<sup>th</sup> October 2017, Joint Committee meeting, Public Health England,  
46 CRCE, Chilton, Oxfordshire