

Computational Toxicology and High-Throughput Risk Assessment

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ToxForum July 2011

ToxCast / Tox21 Context

EDSP as case study

- Congress has mandated that EPA test 4000-8000 chemicals for their potential to be endocrine disruptors
 - Through interaction with estrogen and other pathways
 - US testing labs and EPA reviewers have a capacity to test ~100 chemicals per year in guideline studies (Tier 1)
 - 40-80 year backlog
- Prioritization is a logical approach
 - Test chemicals for ability to interact with E, A, T, S *in vitro*
 - “Validate” *in vitro* assays against expert-derived reference chemicals
 - Estimate **dose** at which activity can occur
 - Compare with estimated human exposure levels
 - Suggest testing those with an overlap **first** in science-based, standard, GLP, guideline studies

High-Throughput Risk Assessment (HTRA)

- Uses HTS data for initial, rough risk assessment of data poor chemicals
- Risk assessment approach
 - Estimate upper dose that is still protective (~ RfD, BMD)
 - BPAD (Biological Pathway Altering Dose)
 - Compare to estimated steady state exposure levels
- Contributions of high-throughput methods
 - Focus on molecular pathways whose perturbation can lead to adversity
 - Screen 100s to 1000s of chemicals in HTS assays for those pathways
 - Estimate oral dose using High-Throughput PK modeling (R. Thomas talk)
- Incorporate population variability and uncertainty

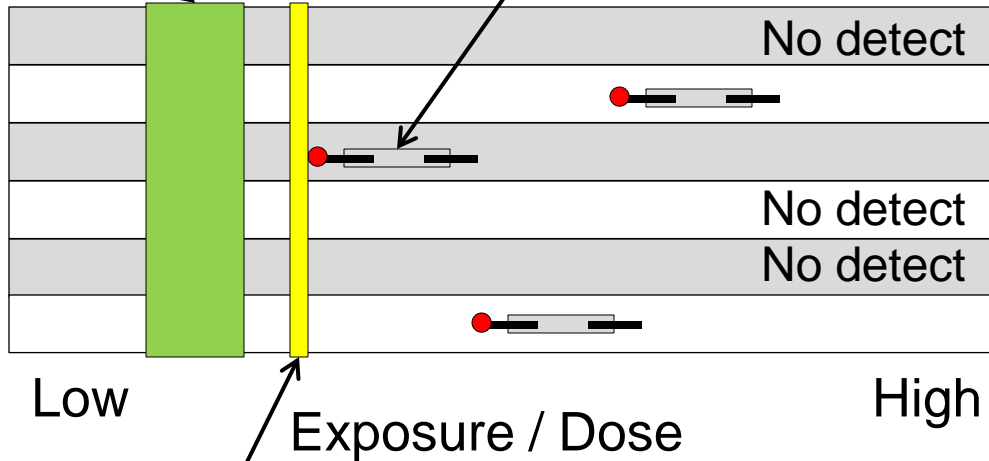
High Throughput Risk Assessment (HTRA)

HTRA Report Card For Chemical: ABC

Estimated Exposure

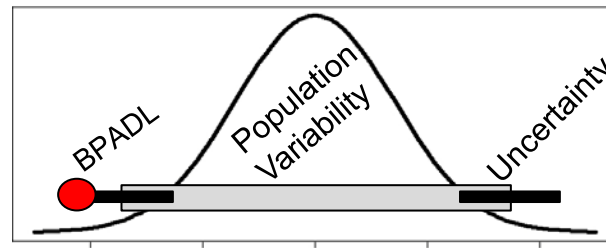
Critical Effect

Pathway / Target / Model



CAR/PXR Pathway
ER / AR / Endocrine Targets
ReproTox Signature
DevTox Signature
Vascular Disruption Signature
Thyroid Cancer Signature

Upper no effect dose



BPAD Distribution

HTRA Outline

Identify biological pathways linked to adverse effects



Measure Biological Pathway Altering Concentration (BPAC) *in vitro*



Estimate *in vivo* Biological Pathway Altering Dose (BPAD) (PK modeling)



Incorporate uncertainty and population variability estimates

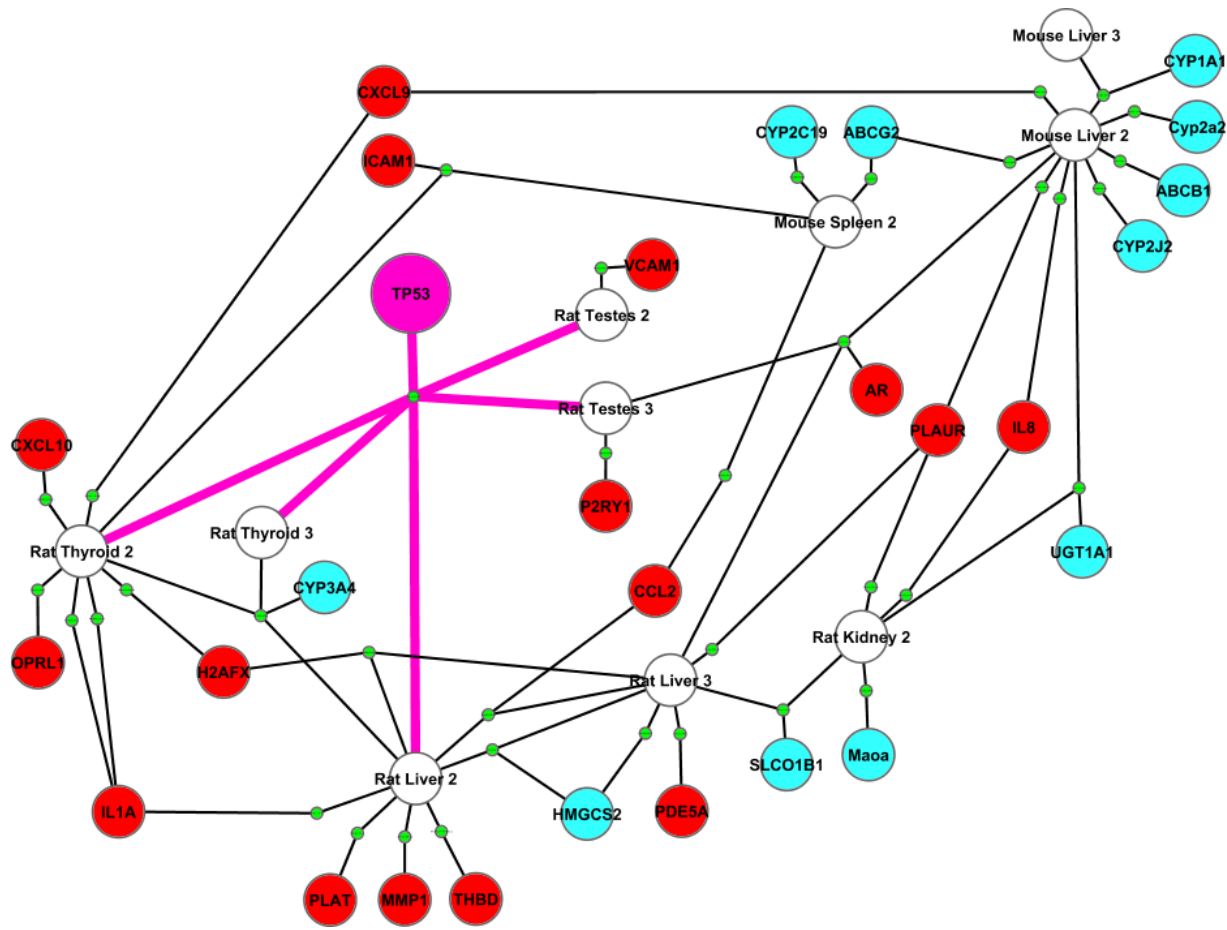


Calculate BPAD lower limit – Estimated health protective exposure limit

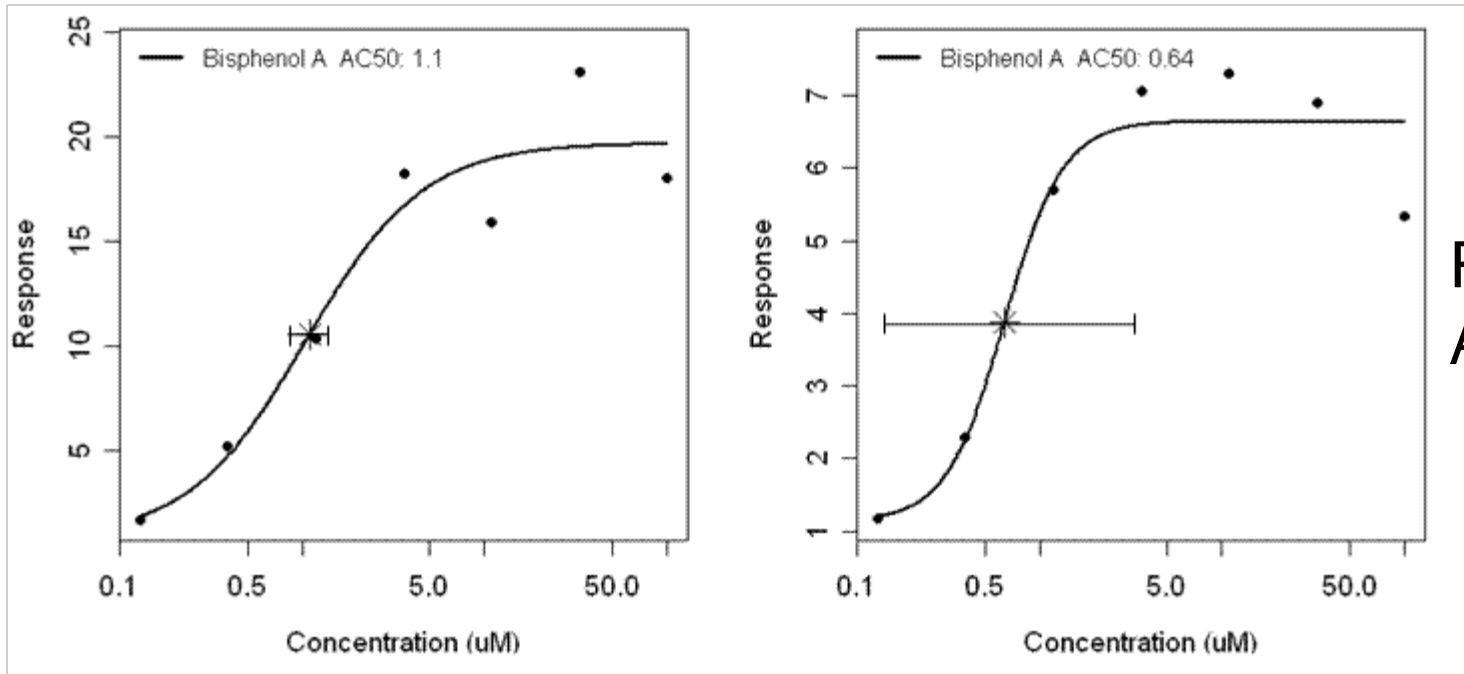
Assay targets linked to rodent cancer

Out of hundreds of assays and targets, only a few are statistically associated with adversity and therefore useful for toxicity testing prioritization

All of these target-cancer links are backed up by the broader biomedical literature



HTS – Pharmacodynamics (PD)



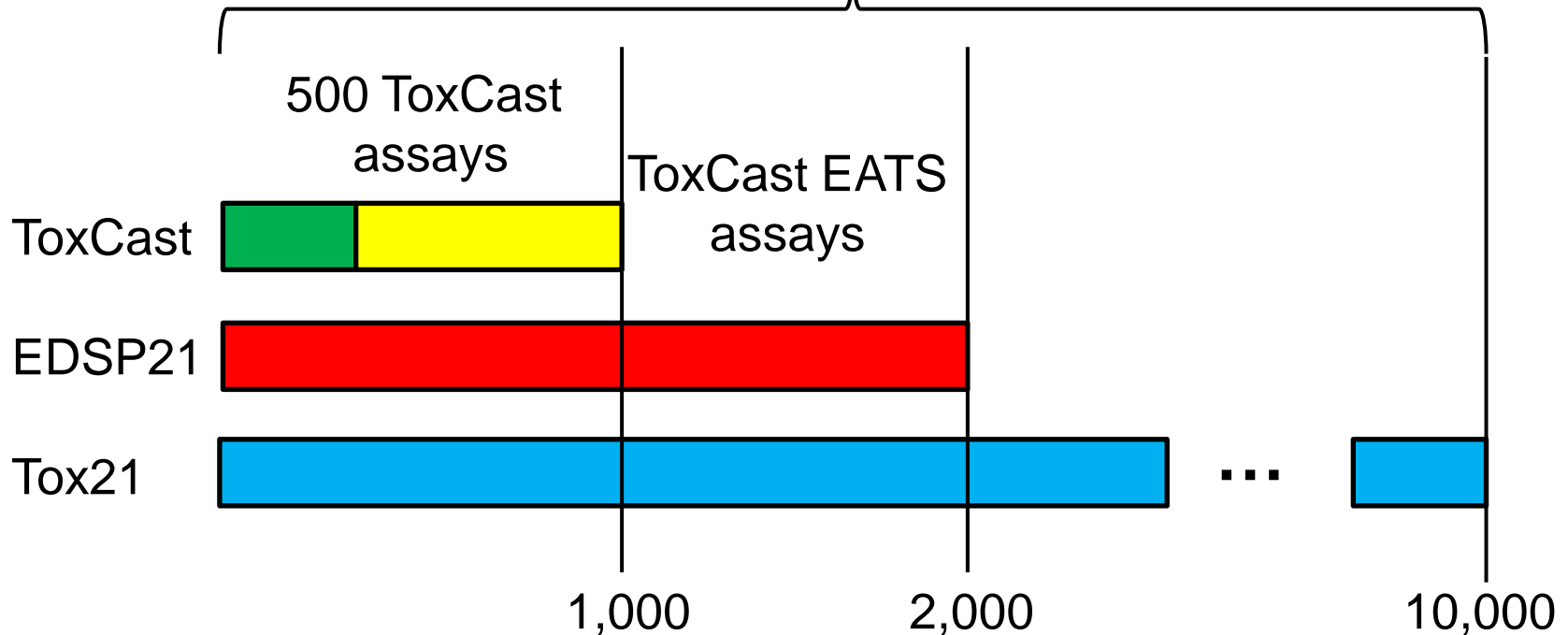
Result:
AC20, AC50

Sample curves for BPA in two ER assays

Full concentration-response profiles can be measured, at arbitrary spacing and to arbitrarily low concentrations

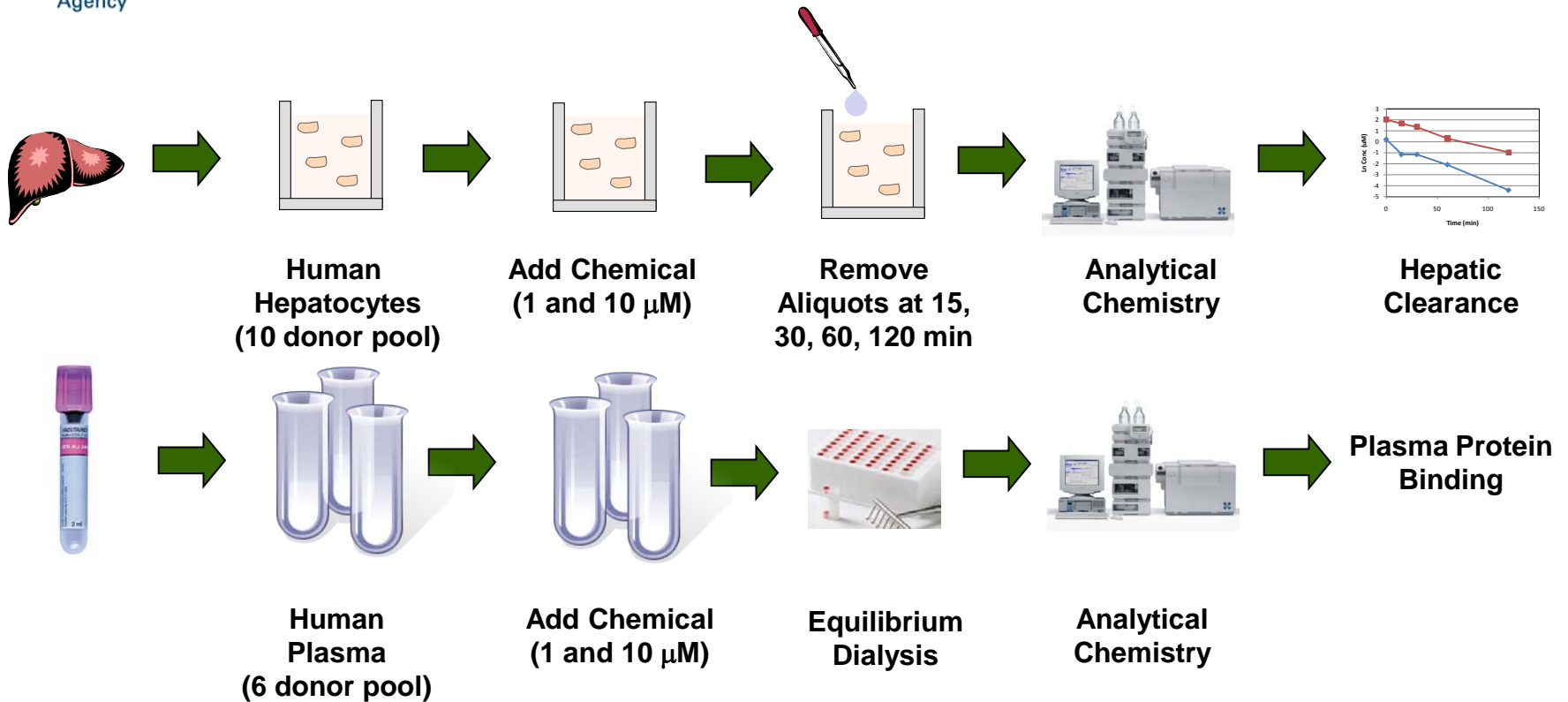
HTRA HTS Chemical Space

Tox21 Assays



Pesticides (active and inert), industrial chemicals, consumer products, marketed and failed pharmaceuticals, food additives, water contaminants, natural human metabolites

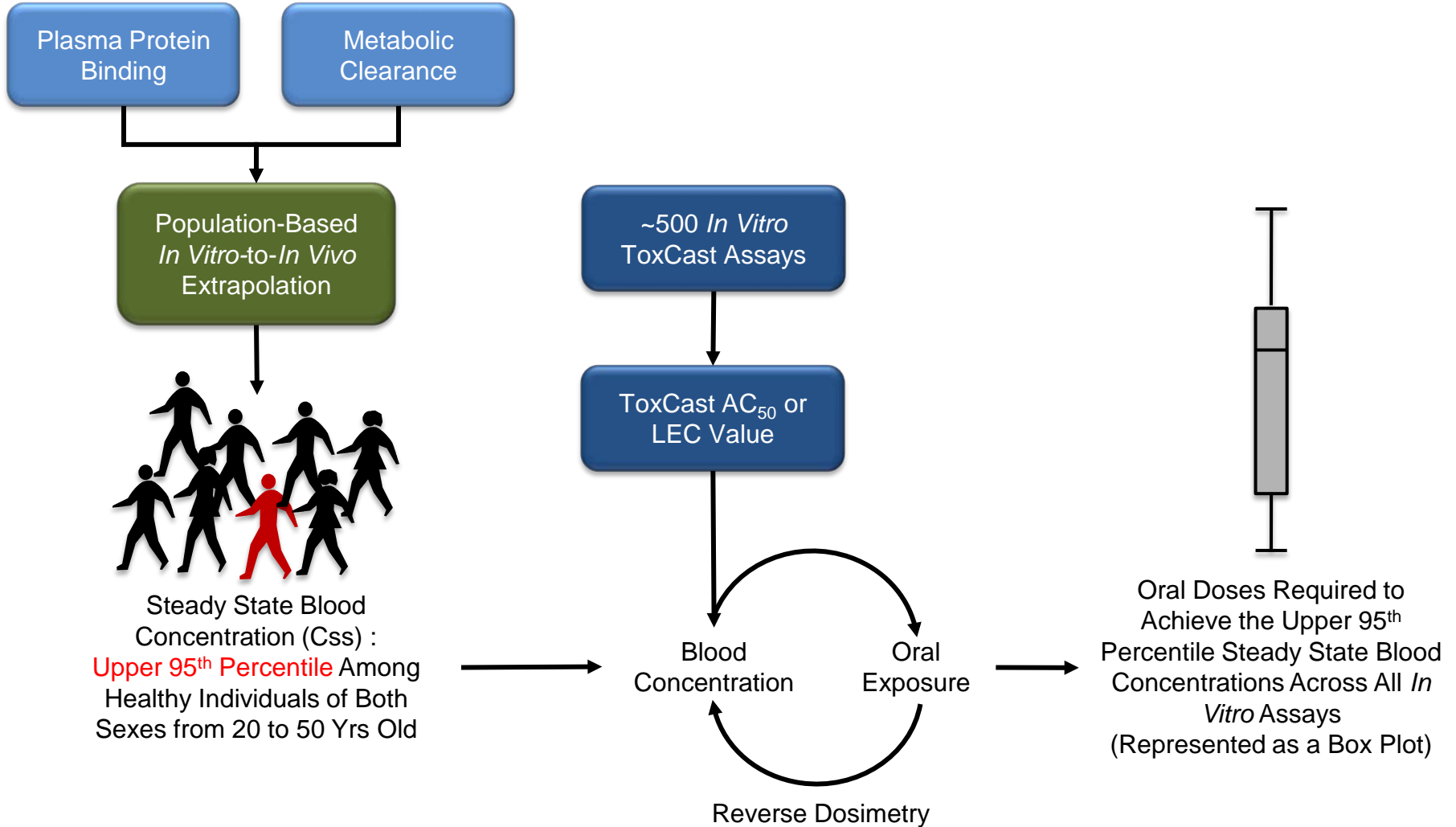
Reverse Toxicokinetics



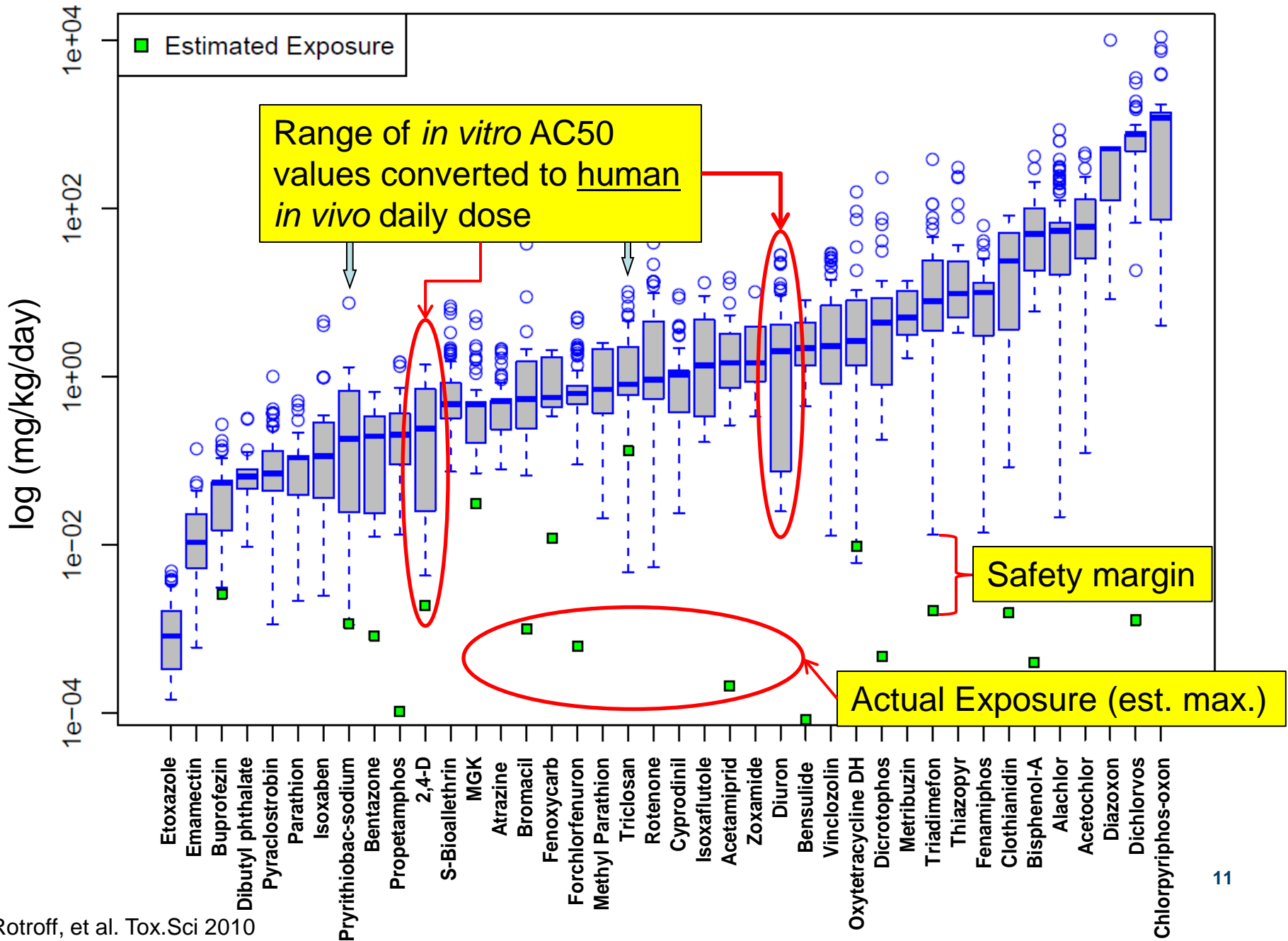
Combine experimental data with PK Model to estimate dose-to-concentration scaling

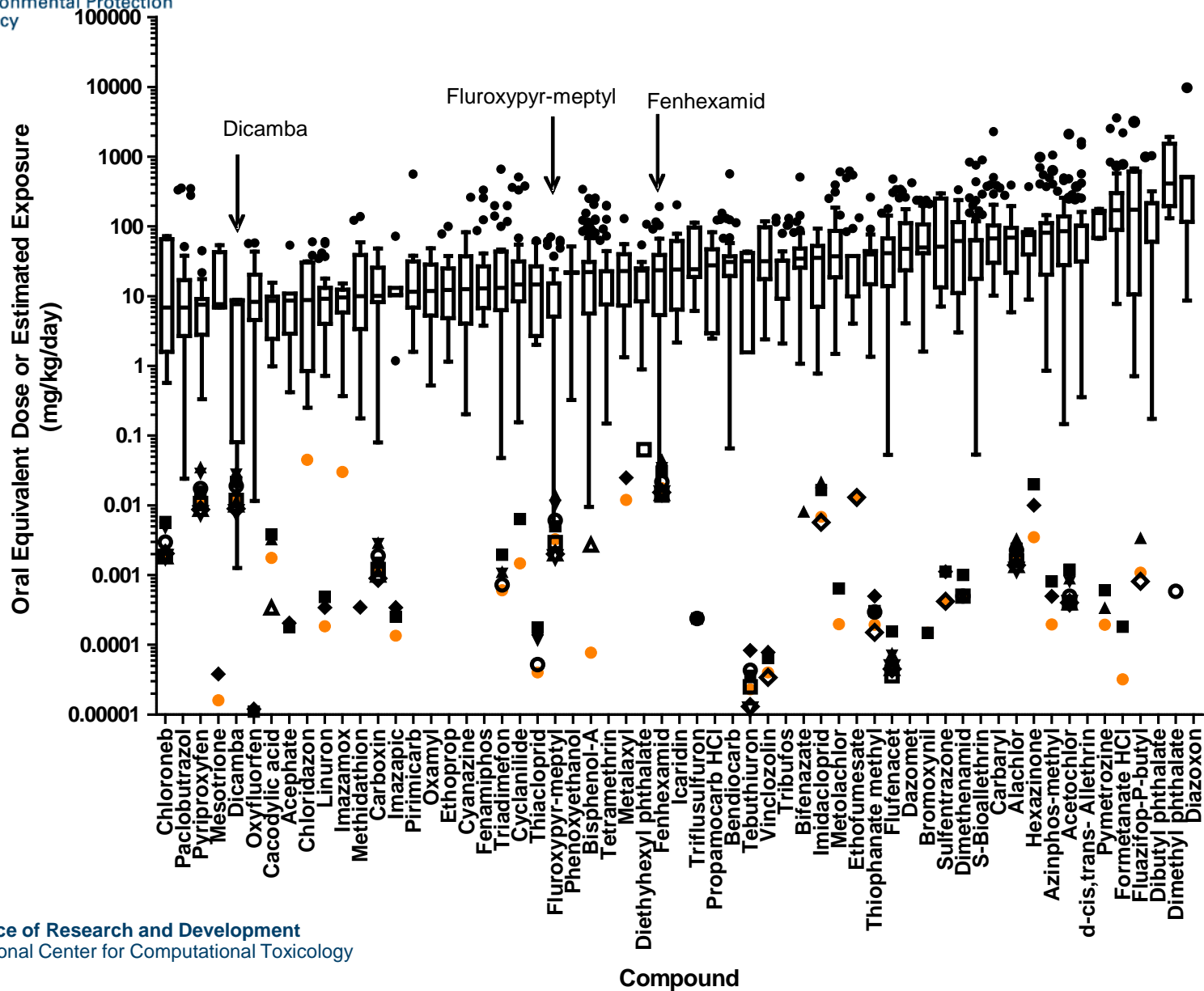
“Reverse Toxicokinetics”

Oral Equivalent Distributions



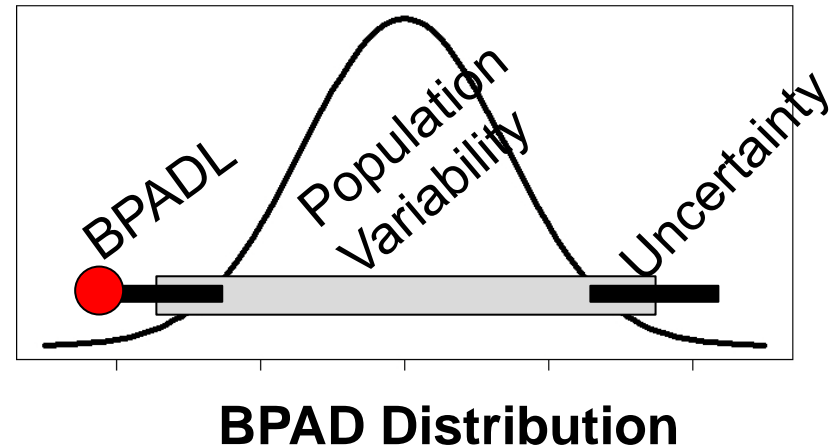
Combining *in vitro* activity and dosimetry





BPAD Probability Distribution

- “Biological Pathway Altering Dose”
- $BPAD = BPAC / C_{ss} / DR$



- Add in uncertainty and population variability
- Take low dose end of distribution (BPADL) as health-protective estimate of allowable safe exposure level

This is being used where no animal data is available!

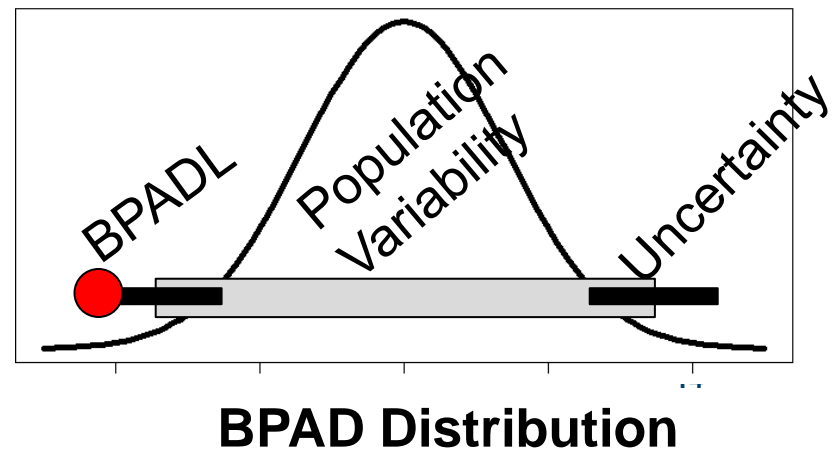
BPAD Variability and Uncertainty

- Variability

- PK – models are available (CYPs, liver mass, age, populations)
- PD – HapMap vs. chemicals vs. assays (UNC, NCGC)

- Uncertainty

- PK – model uncertainty, experimental measurement
- PD – assay background, experimental noise

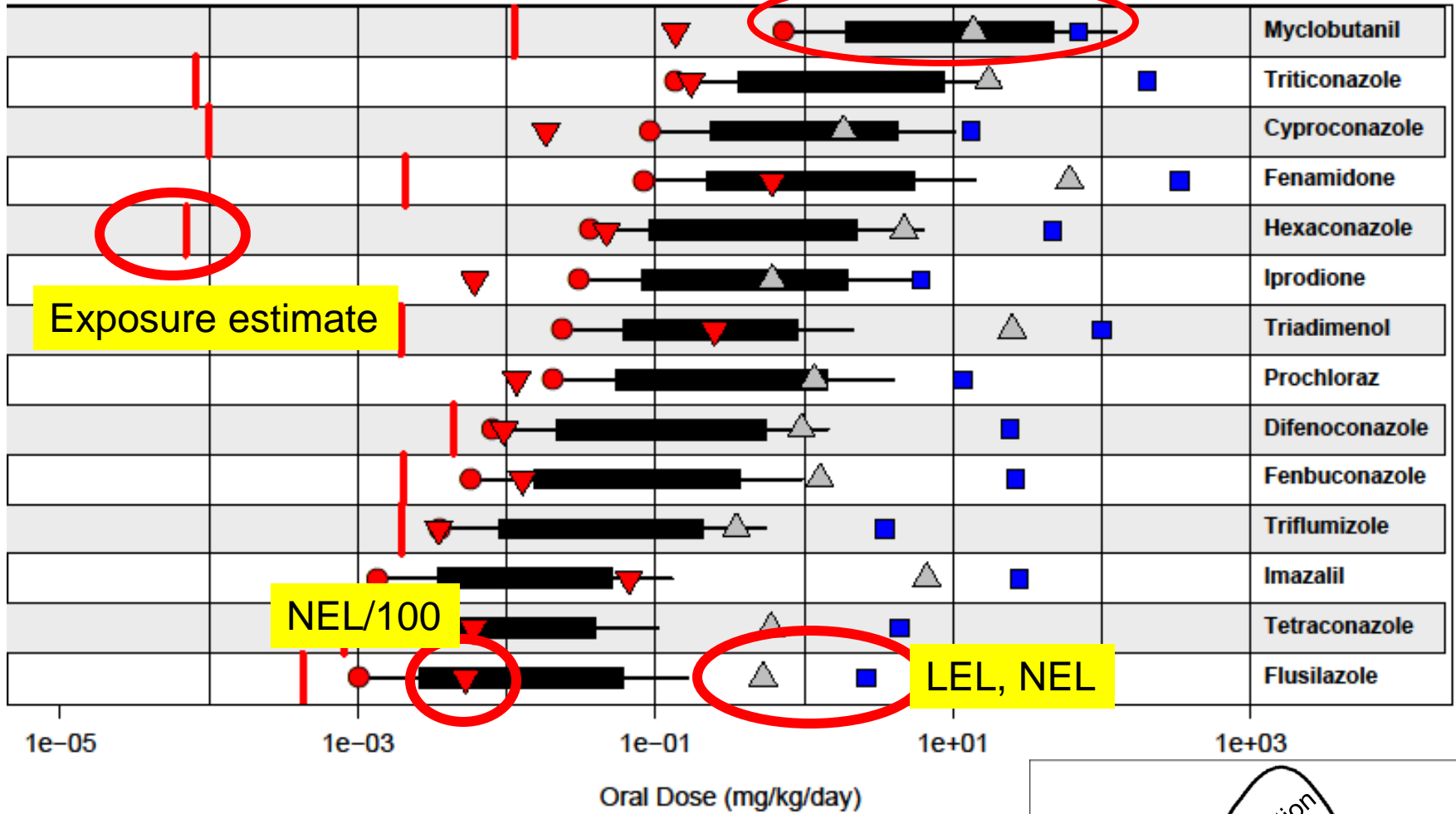


Conazoles and Liver Hypertrophy

- Conazoles are known to cause liver hypertrophy and other liver pathologies
- Believed to be due (at least in part) to interactions with the CAR/PXR pathway
- ToxCast has measured many relevant assays
- Calculate BPADL for 14 conazoles
 - Compare with liver hypertrophy NEL/100

Conazole / CAR/PXR results

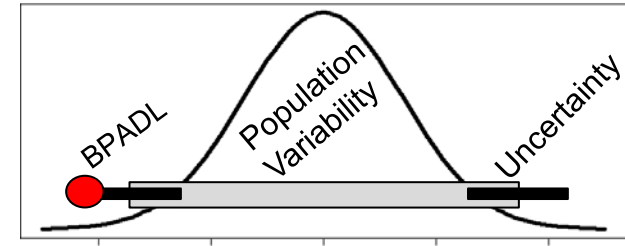
BPAD Range



Exposure estimate

NEL/100

LEL, NEL



BPAD Distribution

Conazole Summary

- Rough quantitative agreement
 - Significant BPADL vs. NEL/100 rank correlation ($p=0.025$)
 - 12 of 14 chemicals have BPADL within 10 of NEL/100
 - For only 3 is BPADL significantly less protective than NEL/100
 - All BPADL > Exposure estimate
- Some apples to oranges: human BPADL, rat NEL
 - Rat RTK underway for some of these chemicals

BPADL vs. Exposure

- “Allowable exposure levels” (RfD, BPADL, etc.) are only relevant compared to exposure
- HTRA looks at many chemicals simultaneously in a prioritization context
 - Prioritize further testing if $BPADL < \text{estimated exposure}$
- Drives ExpoCast program (exposure parallel to ToxCast)
 - Hard to measure exposure in HT
 - Need to model

HTRA Summary

1. Select toxicity-related pathways
 2. Develop assays to probe them
 3. Estimate concentration at which pathway is “altered” (PD)
 4. Estimate *in vitro* to *in vivo* PK scaling
 5. Estimate PK and PD uncertainty and variability
 6. Combine to get BPAD distribution and health protective exposure limit estimate (BPADL)
- Many (better) variants can be developed for each step (1-6)
 - Use for analysis and prioritization of data-poor chemicals

ExpoCast

Environment

Human

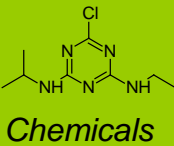
Sources

Distribution/Fate

Contact

Background Exposure

Population



Exposure

Biotransformation



Products



Exposure Media



Uptake

Biomonitoring



Host Susceptibility



Rapid
Prioritization

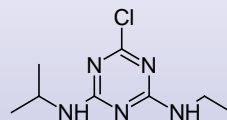
Relate real-world exposures with
toxicity pathway perturbations

Select doses for
toxicity testing

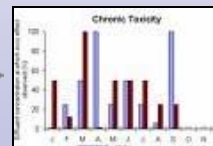
Translate in vitro results
for risk assessment



HTS assays



Toxicity
endpoints



In vivo
bioassays

Data
Repositories

Mechanistic
Models

Informatics
Approaches

Knowledge
Systems

Network
Models

Exposome

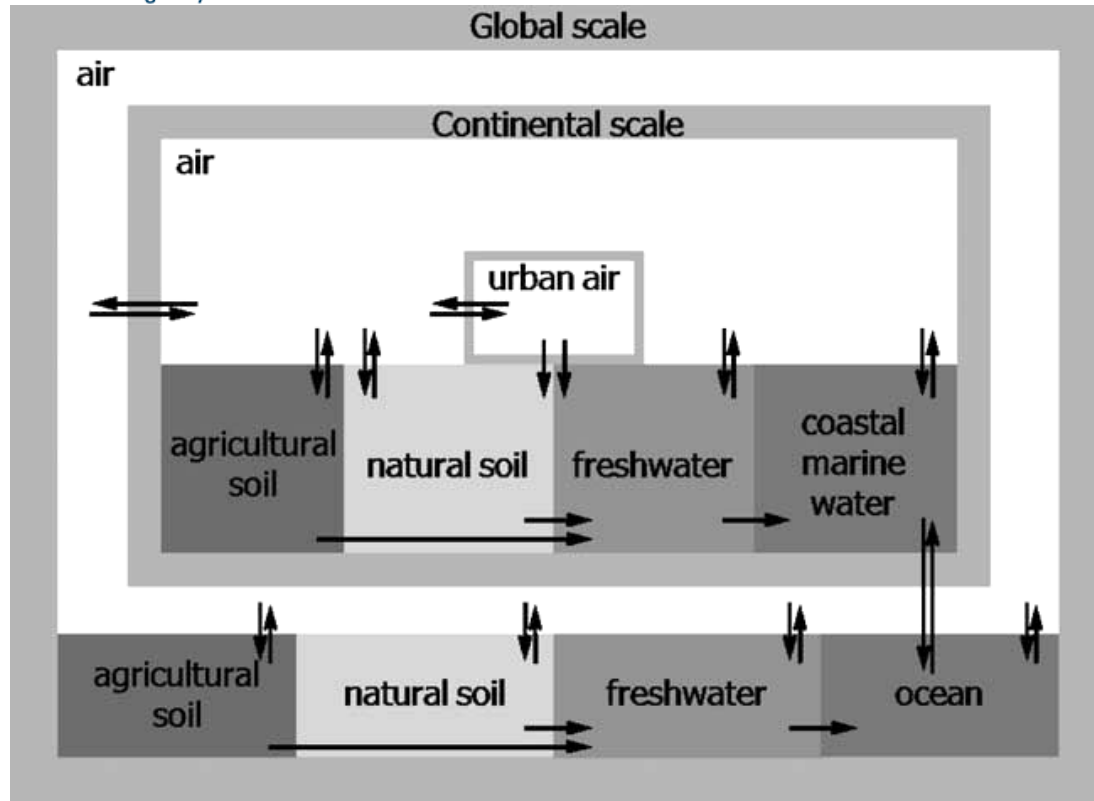
High-throughput Exposure Estimates

- Hard, because most chemicals are not BPA, dioxin-like in their data-richness
- Data
 - Use class, products
 - Measured data
 - Pesticide residues
 - Water / air / monitoring
 - Captured in ACToR (<http://actor.epa.gov>)
- Models
 - USEtox
 - RAIDAR
 - MENTOR
 - GxE FRAMES

Exposure-Based Prioritization Model Challenge

- Improve understanding of existing prioritization schemes or models for evaluating potential exposures.
- Participating teams/models
 - USEtox
 - RAIDAR
 - MENTOR
 - GxE FRAMES
- Models are being applied to evaluate common list of 52 chemicals
 - High interest to EPA
 - Relatively data rich
 - Do not span the full range of potential exposure

Far Field Exposure (Fate and Transport) Models: USEtox



<http://www.usetox.org/>

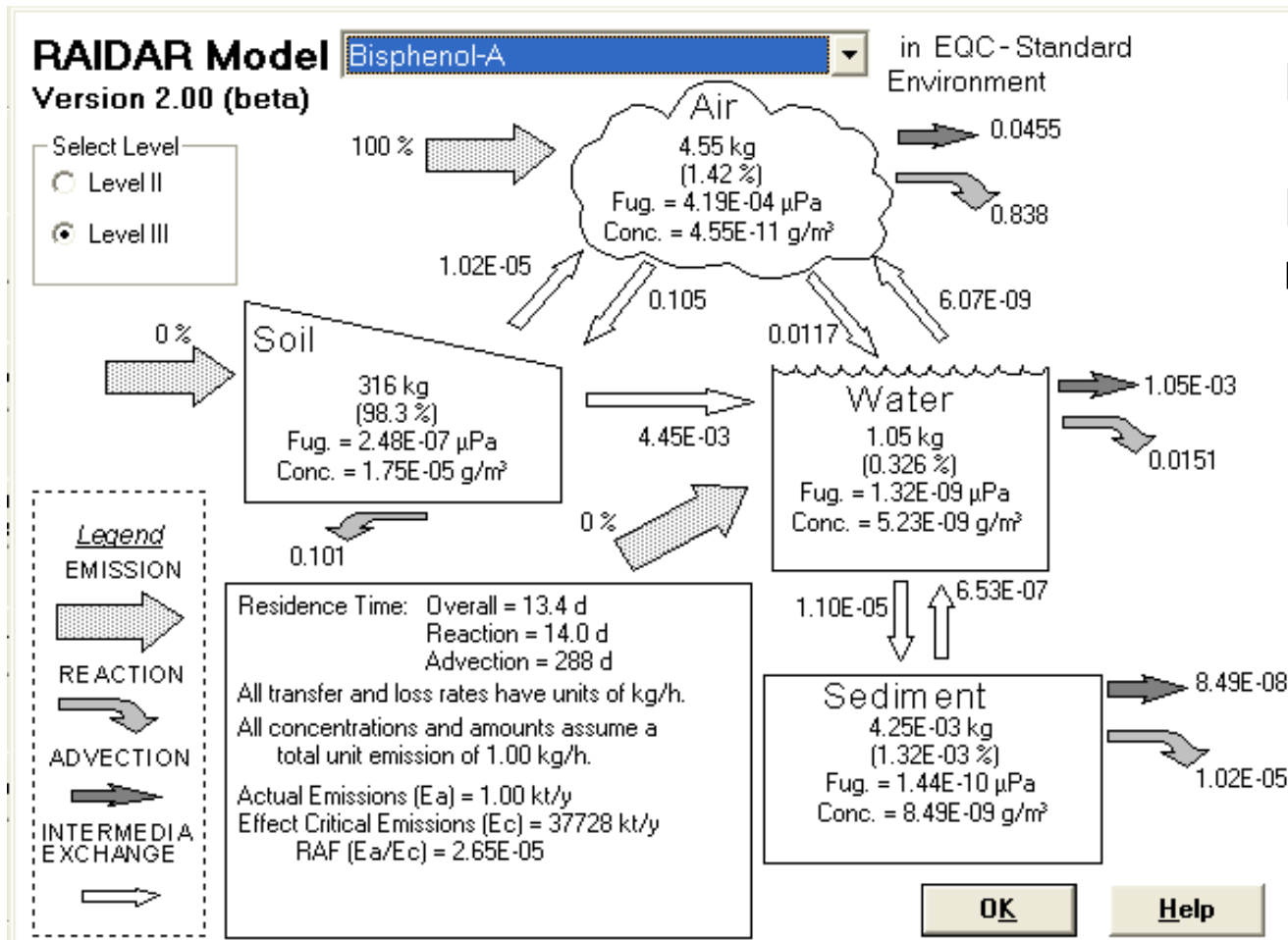
“The USEtox™ model is an environmental model for characterization of human and ecotoxic impacts in Life Cycle Impact Assessment and for comparative assessment and ranking of chemicals according to their inherent hazard characteristics.”

Rosenbaum, R.K. et al., (2008) Int J Life Cycle Assess DOI 10.1007/s11367-008-0038-4

Predicts increase in eleven compartments (five global, five continental, and urban air) due to additional 1 kg/day emitted

Far Field Exposure (Fate and Transport) Models: RAIDAR

Risk Assessment,
Identification, And
Ranking (RAIDAR)
model

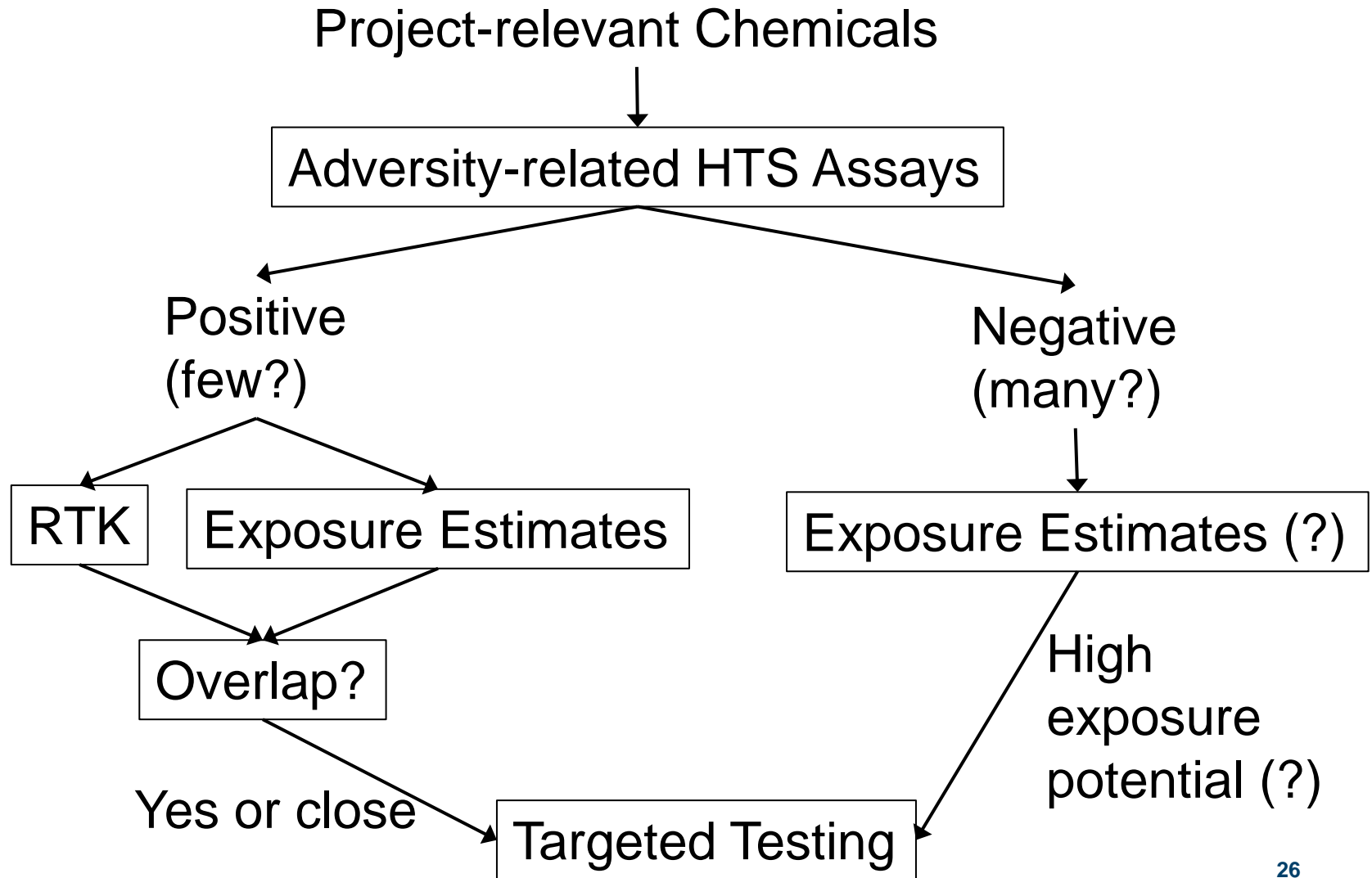


Arnot, J.A., Mackay, D., and Webster, E. *Environ. Sci. Technol.* (2006) 40 (7), pp 2316–2323

LRI RfP: Developing Exposure Indices for Rapid Prioritization of Chemicals in Consumer Products:

- Leverage the best existing exposure models
 - Derive exposure classification indices
- Consider multiple metrics to cover important aspects of exposure space and product lifecycle:
 - Physical -Chemical properties
 - Product characteristics (manufacture, formulation, use, lifecycle)
 - Emission characteristics (indoor/outdoor, media of release, amount available for release/contact)
 - Pathways (media, routes)
 - Scale (far-field, near-field)
 - Target characteristics (individual, population, lifestage, lifestyle, susceptibility)
 - Dosimetry (ADME)
- Demonstrate application ~100-1000 chemicals

HTRA Prioritization Scheme



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APRIL 2011 VOLUME 24, NUMBER 4 pubs.acs.org/crt

