

Toxicokinetic New Approach Methodologies (NAMs) Generic TK models: Parameterization and Evaluation

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Office of Research and Development Center for Computational Toxicology and Exposure

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- Generic vs. bespoke PBTK models
- Models available within R package "httk"
- Model parameterization
 - Physiologic parameters
 - Chemical-specific parameters
- Model evaluation
 - The Concentration vs. Time Database (CvTdb)



HTTK: A NAM for Exposure

- Toxicokinetics is the predictive description of the absorption, distribution, metabolism, and elimination (ADME) of a chemical compound
- We collect *in vitro*, high throughput toxicokinetic (HTTK) data to provide toxicokinetics for larger numbers of chemicals (for example, Rotroff et al., 2010, Wetmore et al., 2012, 2015)
- HTTK methods have been used by the pharmaceutical industry to determine range of efficacious doses and to prospectively evaluate success of planned clinical trials (Jamei, et al., 2009; Wang, 2010)
- The primary goal of HTTK is to provide a human dose context for bioactive in vitro concentrations from HTS (that is, in vitro-in vivo extrapolation, or IVIVE) (for example, Wetmore et al., 2015)
- A secondary goal is to provide open-source data and models for evaluation and use by the broader scientific community (Pearce et al, 2017a)



In vitro toxicokinetic data



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In vitro toxicokinetic data



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In vitro toxicokinetic data + generic toxicokinetic model



Paini et al. (2020)



In vitro toxicokinetic data + generic toxicokinetic model



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In vitro toxicokinetic data + generic toxicokinetic model = high(er) throughput toxicokinetics



Breen et al. (2021)



Generic vs. bespoke PBTK models



Everyone Uses Models

- Toxicology has long relied upon model animal species
- People rely on mental models every day
 - For example, with repetitive activities like driving home from work
- Mathematical models offer some significant advantages:
 - Reproducible
 - Can (and should) be transparent
- ...with some disadvantages:
 - Sometimes reality is complex
 - Sometimes the model doesn't always work well
 - How do we know we can extrapolate?
- ...that can be turned into advantages:
 - If we have evaluated confidence/uncertainty and know the "domain of applicability" we can make better use of mathematical models





Fit for Purpose Models

• A "fit for purpose" model is an abstraction of a complicated problem that allows us to reach a decision.

"Now it would be very remarkable if any system existing in the real world could be *exactly* represented by any simple model. However, cunningly chosen parsimonious models often do provide remarkably useful approximations... **The only question of interest is 'Is the model illuminating and useful?'**" George Box

- A fit for purpose model is defined as much by what is omitted as what is included in the model.
- We must accept that there will always be areas in need of better data and models our knowledge will always be incomplete, and thus we wish to extrapolate.
 - How do I drive to a place I've never been before?



Complexity should match the data...

"Since all models are wrong the scientist cannot obtain a 'correct' one by excessive elaboration. On the contrary, following William of Occam, they should seek an economical description of natural phenomena."

George Box

We choose to make the complexity of the model and the number of physiological processes appropriate given the data and the decision context





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K₁₂

PK of MDMA

MDMA

q1

MDA

Qh



Jones et al., 2012 **PK of Statins** MDMA In this case they Q2 had transporterspecific data Cho et al., 1990





Lex Parsimoniae "Law of Parsimony"

"Among competing hypotheses, the one with the fewest assumptions should be selected." William of Occam

"While Occam's razor is a useful tool in the physical sciences, it can be a very dangerous implement in biology. It is thus very rash to use simplicity and elegance as a guide in biological research." Francis Crick

"With four parameters I can fit an elephant, and with five I can make him wiggle his trunk." John von Neumann





Fit for Purpose Toxicokinetics

Blood: f.

GFR

- Chiu et al. (2007) "...[P]arsimony in selecting [toxicokinetic] model structures is an important and guiding principle in developing models for use in risk assessments."
 - Complexity is constrained by the limited data available to calibrate and test TK models and the need to justify both the model assumptions and predictions
 - Bessems et al. (2014): We need "a first, relatively quick ('Tier 1'), estimate" of concentration vs. time in blood, Skin: Pape Lung (non-volatiles): Papp plasma, or cell Lung (volatiles): K_{ba} Jejunum: Papp Bessems et al. (2014) Absorption At the time they suggested that we might neglect active metabolism. Thanks to *in vitro* **Tier 1 PBTK Modelling** C.t - curve measurements we can now do better Metabolism We still neglect transport and other protein-Distribution CL_{int} or $K_m + V_{max}$ specific phenomena Tissues: Kth Excretion



Bespoke vs. Generic

Bespoke, Tailored, Custom... *Requires specific measurements*



Generic, Off-the-Shelf/Rack, One-Size-Fits-Most *Approximately fits certain categories*





Why Use Generic Models?

- Each of the models provided by the R package "httk" is a generic model
 - Each model is designed to used standardized chemical-specific *in vitro* measurements (fraction unbound in plasma, intrinsic hepatic clearance)

high(er) throughput toxicokinetics =

In vitro toxicokinetic data + generic toxicokinetic model

- Standardized physiology is assumed, regardless of chemical:
 - The same parameters such as volumes, flows, and rates are used
 - The same processes are included (hepatic metabolism, glomerular filtration) or omitted
- The generic model is a hypothesis
 - If we have evaluation data then we can check if we need to elaborate the model (for example, create a bespoke model)
- We can estimate the accuracy of a generic model for a new chemical using performance across multiple chemicals where data happen to exist



Generic Models as a Hypothesis



- For pharmaceuticals, in vitro data plus a model including hepatic metabolism and passive glomerular filtration (kidney) are often enough to make predictions within a factor of 3 of in vivo data (Wang, 2010)
- For other chemicals there may be complications, for example there is thought to be (Andersen et al. 2006) active transport of some per- and polyfluorinated alkyl substances (PFAS) in the kidney
- We could add a renal resorption process to HTTK (that is, add a new generic model) only if there was some way to parameterize the process for most chemicals – otherwise we are back to tailoring the model to a chemical



Generic PBTK Models

The idea of generic PBTK has been out there for a while...

FUNDAMENTAL AND APPLIED TOXIC ARTICLE NO. 0072 Incorporating Pharmacokir La RUSSELL S. THOMAS, W	Int. J. Mol. Sci. 2011, 12, 7469-7480; doi:10.3390/ijms12117469 OPEN ACCESS International Journal of Molecular Science ISSN 1422-000 www.mdpi.com/journal/ijm Review Development of a Human Physiologically Based Pharmacokinetic (PBPK) Toolkit for Environmental Pollutants	S OIS20.00 Disposit e Ame Of ON (S OT) TH A Generic with Mul	Aun. Occup. Hyg., Vol. 55, No. 8, pp. 841 ⁽²⁾ The Author 2011. Published by Oxford University on behalf of the British Occupational Hygin doi:10.1093/annh c, Cross-Chemical Predictive PBTK Mod tiple Entry Routes Running as Applicatio	864, 2011 ersity Press ene Society hyg/mer075
Cen	 Patricia Ruiz ¹,*, Meredith Ray ², Jeffrey Fisher ³ and Moiz Mumtaz ¹ ¹ Computational Toxicology and Methods Development Laboratory, Division of Toxicology and Environmental Medicine, Agency for Toxic Substances and Disease Registry, Atlanta, GA 303: USA; E-Mail: mgm4@cdc.gov ² Department of Epidemiology and Biostatistics, Arnold School of Public Health, University of S 	Expert Opinion	Technology Evaluation The Simcyp [®] Population-based ADME Simulator	. UI
Clinical Pharmacokinetics October 2006, Volume 4 Developmen Based Pharm	 Carolina, Columbia, SC 29208, USA; E-Mail: mere2110@yahoo.com ³ USFDA, National Center for Toxicological Research, Jefferson, AR 72079, USA; E-Mail: jeffrey.fisher@fda.hhs.gov * Author to whom correspondence should be addressed; E-Mail: pruiz@cdc.gov; Tel.: +1-770-488-3348; Fax: +1-770-488-3470. <i>Received: 20 September 2011; in revised form: 13 October 2011 / Accepted: 24 October 2011 / Published: 31 October 2011</i> 	 Introduction The programming language The platform structure Applications of the simulator Discussion Expert opinion 	Masoud Jamei [†] , Steve Marciniak, Kairui Feng, Adrian Barnett, Geoffrey Tucker & Amin Rostami-Hodjegan [†] <i>Modelling & Simulation Group, Simcyp Limited, Blades Enterprise Centre, John Street, Sheffield, S2 4SU, UK</i> The Simcyp [®] population-based absorption, distribution, metabolism and excretion simulator is a platform and database for 'bottom-up' mechanistic modelling and simulation of the processes of oral absorption, tissue distribution, metabolism and excretion of drugs and drug candidates in healthy and direase negativities.	
Authors Andrea N. Edginton ⊡, Wal	Authors and affiliations ter Schmitt, Stefan Willmann phthalate and di(2-e as metabolites. Tiss rommetal exposure properties, reaction Received 8 April 2005, Revised 25 May		nealthy and disease populations. It combines experimental data generated routinely during preclinical drug discovery and development from <i>in vitro</i> enzyme and cellular systems and relevant physicochemical attributes of compound and dosage form with demographic, physiological and genetic information on different patient populations. The mechanistic approach implemented in the Simcyp Simulator allows simulation of complex absorption, distribution, metabolism and excretion outcomes, particularly those involving multiple drug interactions, parent drug and metabolite profiles and time- and dose-dependent phenomena such as auto-induction and auto-inhibition.	

Why Build Another Generic PBTK Tool?

Environmental Protection

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from Breen et al. (2021)

	SimCYP	ADMET Predictor / GastroPlus	PK-Sim	IndusChem Fate	pbktool	G-PBTK	httk
References	Jamei (2009)	Parrott (2009)	Eissing (2011)	Jongeneelen (2011)	Punt (2020)	Armitage (2021)	Pearce (2017)
Availability	License, but inexpensive for research	License, but inexpensive for research	Free	Free	Free	Free	Free
Open Source	No	No	GitHub	No	GitHub	Planned Release	CRAN and GitHub
Default PBTK Structure	Yes	Yes	Yes	Yes	Yes	Yes	Yes
Population Variability	Yes	Yes	Yes	No	No	No	Yes
Data Needs	High/Low	High/Low	High	High	Low	Low	Low
Typical Use Case	Drug Discovery	Drug Discovery	Drug Discovery	Environmental Assessment	Food and Drug Safety Evaluation	Environmental Assessment	Screening
Batch Mode	Yes	Yes	Yes	No	No	No	Yes
Graphical User Interface	Yes	Yes	Yes	Excel	No	Excel	No
Built-in Chemical-Specific Library	Many Clinical Drugs	No	Many pharmaceutical- specific models available	15 Environmental Compounds	No	No	Pharmaceuticals and ToxCast: 998 human, 226 rat
Oral Bioavailability Modeling	Yes	Yes	No	No	No	No	No (Will be available in the future version)
In Vitro Distribution	SIVA VIVD	No	No	No	No	No	Armitage Model
Exposure Route	Oral, IV	Oral, IV	Oral, IV	Oral, Gas Inhalation, Dermal	Oral	Oral, IV, Inhalation	Oral, IV, Gas Inhalation (Dermal, Aerosol, and Fetal forthcoming)
Ionizable Compounds	Yes	Yes	Yes	No	No	Yes	Yes
Export Function	No	No	Matlab and R	No	No	No	SBML and Jarnac
R Integration	No	No	Yes (2017)	No	Yes	Yes	Yes
Reverse Dosimetry	Yes	Yes	Yes	No	No	No	Yes

*Both PLETHEM (Pendse et al., 2020) and Web-ICE (Bell et al., 2020) provide GUI's to HTTK and other models

Pre-computed HTTK results are also available at https://comptox.epa.gov/dashboard



Regulatory Acceptance

TOXICOLOGICAL SCIENCES **126(1)**, 5–15 (2012) doi:10.1093/toxsci/kfr295 Advance Access publication November 1, 2011

> Physiologically Based Pharmacokinetic Model Use in Risk Assessment—Why Being Published Is Not Enough

Eva D. McLanahan,*¹ Hisham A. El-Masri,† Lisa M. Sweeney,‡ Leonid Y. Kopylev,|| Harvey J. Clewell,§ John F. Wambaugh,¶ and P. M. Schlosser||

"Although publication of a PBPK model in a peerreviewed journal is a mark of good science, subsequent evaluation of published models and the supporting computer code is necessary for their consideration for use in [Human Health Risk Assessments]"

The White House

Office of the Press Secretary

For Immediate Release

May 09, 2013

Executive Order -- Making Open and Machine Readable the New Default for Government Information

EXECUTIVE ORDER

MAKING OPEN AND MACHINE READABLE THE NEW DEFAULT FOR GOVERNMENT INFORMATION

By the authority vested in me as President by the Constitution and the laws of the United States of America, it is hereby ordered as follows:

<u>Section 1</u>. <u>General Principles</u>. Openness in government strengthens our democracy, promotes the delivery of efficient and effective services to the public, and contributes to economic growth. As one vital benefit of open government, making information resources easy to find, accessible, and usable

"...the default state of new and modernized Government information resources shall be open and machine readable."

Why Build Another Generic PBTK Tool?

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Population Variability	Yes	Yes	Yes	No	No	No	Yes
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Pre-computed HTTK results are also available at https://comptox.epa.gov/dashboard

Exquisite Systems

"Although NASA has always partnered with industry, the nature of that relationship is changing. **Historically, NASA would design an exquisite system or spacecraft,** select a commercial contractor to build it, oversee its construction in detail while sometimes changing its requirements, then own and operate the result. The government was the sole buyer/owner."

After retirement of the Space Shuttle, NASA began working with multiple contractors who may provide their services to multiple customers. Once "...certified, the manufacturers would deliver cargo for NASA—and any other customer the company could engage in the growing LEO commercial marketplace. **Rather than building, owning, and operating a luxury sedan, NASA now essentially hails a taxi**."



From:

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https://www.nasa.gov/directorates/heo/scan/services/nasas_commercial_communications_services



Models available within R package "httk"



Open Source Tools and Data for HTTK

https://CRAN.R-project.org/package=httk

R CRAN - Package httk × +	0	—		×
← → C 🔒 cran.r-project.org/web/packages/httk/index.html	☆	65	* 🤹	:
👯 Apps CompTox Chemical 🔇 Article Request 🔇 Absence Request 🤭 Travel Forms 🛹 EHP 😽 Change Password 🞯 FAITAS		»	🗉 Readii	ng list

httk: High-Throughput Toxicokinetics

Generic models and chemical-specific data for simulation and statistical analysis of chemical toxicokinetics ("TK") as described by Pearce et al. (2017) <<u>doi:10.18637/jss.v079.i04</u>>. Chemical-specific in vitro data have been obtained from relatively high throughput experiments. Both physiologically-based ("PBTK") and empirical (for example, one compartment) "TK" models can be parameterized with the data provided for thousands of chemicals multiple

exposure routes, and various species. The models consist of systems of ordinary differential equations which are solved using compiled (C speed. A Monte Carlo sampler is included, which allows for simulating human biological variability (Ring et al., $2017 < \frac{doi:10.1016/j.envi}{2017 < \frac{doi:10.1007/s10928-017-9548-7}{s}$). These functions and data provide a set of tools for in vitro-in vivo extrapolation ("IVIVE") of h screening data (for example, Tox21, ToxCast) to real-world exposures via reverse dosimetry (also known as "RTK") (Wetmore et al., 2015 < $\frac{doi:10.1093/toxsci/kfv171}{s}$).

Version:	2.0.4	
Depends:	R (≥ 2.10)	
Imports:	deSolve, msm, data.table, survey, mvtnorm, truncnorm, stats, graphics, utils, magrittr, purrr, methods	
Suggests:	ggplot2, knitr, rmarkdown, R.rsp, GGally, gplots, scales, EnvStats, MASS, RColorBrewer, TeachingDemos, classInt, 1 reshape2, gdata, viridis, CensRegMod, gmodels, colorspace, cowplot, ggrepel, dplyr, forcats, smatr, gtools, gridExtra,	
Published:	2021-05-10	
Author:	John Wambaugh ([aut, cre], Robert Pearce ([aut], Caroline Ring ([aut], Greg Honda ([aut], Mark Sfeir [[aut], Sarah Davidson ([aut], Miyuki Breen ([ctb], Shannon Bell [ctb], Xiaoqing Chang ([ctb], Jimena Davi ([ctb], Nisha Sipes ([ctb], Barbara Wetmore ([ctb], Woodrow Setzer ([ctb])	
Maintainer:	John Wambaugh <wambaugh.john at="" epa.gov=""></wambaugh.john>	
BugReports:	https://github.com/USEPA/CompTox-ExpoCast-httk	
License:	<u>GPL-3</u>	
Copyright:	This package is primarily developed by employees of the U.S. Federal government as part of their official duties and i domain.	
URL:	https://www.epa.gov/chemical-research/rapid-chemical-exposure-and-dose-research	
NeedsCompilation:	yes	
Citation:	httk citation info	
Materials:	NEWS	
CRAN checks:	httk results	
Downloads:		

R package "httk"

• Open source, transparent, and peerreviewed tools and data for high throughput toxicokinetics (httk)

downloads 1071/month

- Available publicly for free statistical software R
- Allows *in vitro-in vivo* extrapolation (IVIVE) and physiologically-based toxicokinetics (PBTK)
- Human-specific data for 998 chemicals
- Described in Pearce et al. (2017a) and Breen et al. (2020)

Reference manual: httk.pdf



HTTK Models Range in Complexity

Model	Hepatic clearance	Partition coefficients	Fraction unbound	Hematocrit	Molecular weight	Ratio of blood to plasma	Elimination rate ¹	Volume of distribution ²	Dynamic prediction	Steady state prediction
pbtk	Yes	Yes	Yes	Yes	Yes	Yes	No	No	Yes	Yes
Gas_pbtk	Yes	Yes	Yes	Yes	Yes	Yes	No	No	Yes	Coming Soon
1compartment	No	No	No	No	Yes	No	Yes	Yes	Yes	Yes
3compartment	Yes	Yes	Yes	Yes	Yes	Yes	No	No	Yes	Yes
3compartmentss	Yes	No	Yes	No	Yes	Νο	No	No	No	Yes



¹Partition coefficients are needed in calculating V_{dist} ²Clearances and *fup* are needed in calculating k_{elim}

Adapted from Pearce et al. (2017a)



HTTK Models Range in Complexity

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1compartment	No	No	No	No	Yes	No	Yes	Yes	Yes	Yes
3compartment	Yes	Yes	Yes	Yes	Yes	Yes	No	No	Yes	Yes
3compartmentss	Yes	No	Yes	No	Yes	No	No	No	No	Yes

- The simplest models often allow predictions with a single equation
- More complex models often require numerical solvers to determine the solution to a system of differential equations as a function of exposure (dose) and time



HTTK Models Range in Complexity

Model	Hepatic clearance	Partition coefficients	Fraction unbound	Hematocrit	Molecular weight	Ratio of blood to plasma	Elimination rate ¹	Volume of distribution ²	Dynamic prediction	Steady state prediction
pbtk	Yes	Yes	Yes	Yes	Yes	Yes	No	No	Yes	Yes
Gas_pbtk	Yes	Yes	Yes	Yes	Yes	Yes	No	No	Yes	Coming Soon
1compartment	No	No	No	No	Yes	Νο	Yes	Yes	Yes	Yes
3compartment	Yes	Yes	Yes	Yes	Yes	Yes	No	No	Yes	Yes
3compartmentss	Yes	No	Yes	No	Yes	Νο	No	No	No	Yes

- At steady-state all compartments are at equilibrium and the concentrations can be predicted with a single equation, **but**:
 - The exposure (dose) must be constant
 - Enough time must pass to reach equilibrium



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Simple Model for Steady-State Plasma Concentration (C_{ss})

This equation is the steady-state solution for a three-compartment model (3compartmentss):

$$C_{SS} = oral \ dose \ rate \ * \ F_{hepfirstpass}$$

$$(GFR * f_{up}) + \left(Q_l * f_{up} * \frac{Cl_{hepatic}}{Q_l + f_{up} * Cl_{hepatic}}\right)$$

$$(UVET \ ISSUE \ UVET \ ISSUE \ ISSUE$$



Simple Model for Steady-State Plasma **Concentration** (C_{ss})

This equation is the steady-state solution for a three-compartment model (3compartmentss):



Wilkinson and Shand (1975)



Simple Model for Steady-State Plasma **Concentration** (C_{ss})

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Passive Renal Clearance
(GFR: Glomerular filtration
rate
f_{up}: fraction unbound in
plasma)
$$(Uver Tissue \ V = V = V = V$$
Wilkinson and Shand (1975)

Wilkinson and Shand (1975)



33

Simple Model for Steady-State Plasma Concentration (C_{ss})

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$$(GFR * f_{up}) + \left(Q_l * f_{up} * \frac{Cl_{hepatic}}{Q_l + f_{up} * Cl_{hepatic}}\right)$$
Hepatic Metabolism
$$(Cl_{hepatic}: \ Scaled \ hepatic \\ clearance \\ Q_i: \ Blood \ flow \ to \ liver)$$

$$(Cl_{hepatic}: \ Scaled \ hepatic \\ Cl_{hepatic}: \ Scaled \ hepatic \\ Cl_{clearance} \ Cl_{hepatic}: \ Cl_{hepatic}:$$





Pearce et al. (2017a)

The "httk" General Physiologically-based Toxicokinetic (PBTK) Model

- Tissues are modeled by compartments:
 - Some tissues (for example, arterial blood) are simple compartments
 - Others (for example, kidney) are compound compartments consisting of separate blood and tissue sections with constant partitioning (that is, tissue specific tissue:plasma partition coefficients)
 - Remaining tissues (for example, fat, brain, bones) are lumped into the "Rest of Body" compartment
- Clearance from the body depends on two processes:
 - Metabolism in the liver (estimated from in vitro clearance and binding)
 - Excretion by glomerular filtration in the kidney (estimated from *in vitro* binding)
- Model parameters are either:
 - Physiological: determined by species and potentially varied via Monte Carlo (including HTTK-pop, Ring et al. 2017)
 - Chemical-specific: physico-chemical properties (Mansouri et al., 2018) and equilibrium partition coefficients plus plasma binding and metabolism rates that are determined from *in vitro* measurements or potentially predicted from structure





Generic Gas Inhalation Model

- Inhalation is an important route of exposure, particularly for occupational settings
- The structure of the inhalation model was developed from two previously published physiologically-based models from Jongeneelen *et al.* (2011) and Clewell *et al.* (2001)
- The model can be parameterized with chemical-specific in vitro data from the HTTK package for 917 chemicals in human and 181 chemicals in rat
- Model was made publicly available with the release of httk v2.0.0 in February 2020

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Model parameterization


Model parameters are either:

Physiological: determined by species and potentially varied via Monte Carlo (including HTTK-pop, Ring et al. 2017)

Chemical-specific: physicochemical properties (Mansouri et al., 2018) and equilibrium partition coefficients plus plasma binding and metabolism rates that are determined from *in vitro* measurements or potentially predicted from structure

Parameter	Definition	Value (Mean)	Units	Reference	
Q _{liverc}	Total blood flow to liver (arterial, gut)	3.6	1/h/kg BW	Davies and Morris (1993)	
Q _{GFR}	Flow to glomerulus (glomerular filtration rate)	0.32	1/h/kg BW	Davies and Morris (1993)	
n _{cell_density}	Hepatocellularity	110	Millions of cells / g Liver	Carlile et al. (1997)	
V liverc	Liver volume (scaled to kg body weight)	0.0245	1/kg BW	Davies and Morris (1993)	
d _{liver}	Liver density	1.05	g/ml	International Commission on Radiological Protection (1975)	
Hematocrit	Fraction of blood that is red blood cells	0.43	Unitless	Davies and Morris (1993)	
$Cl_{henatic} = n_{cell density} \times V_{linerc} \times d_{liner} \times Cl_{int}$					

Breen et al. (2021)



Species-Specific Physiological Parameters for Physiologically-Based Toxicokinetics

- Rates, volumes, and tissue-specific information (not shown) are needed for a species
 - Users can choose to add new species to HTTK by providing this information

Parameter	Units	Mouse	Rat	Dog	Human	Rabbit	Monkey
Total Body Water	ml/kg	725.000	668.000	603.600	600.000	40.812	693.000
Plasma Volume	ml/kg	50.000	31.200	51.500	42.857	110.000	44.800
Cardiac Output	ml/min/kg^(3/4)	150.424	209.304	213.394	231.401	266.576	324.790
Average BW	kg	0.020	0.250	10.000	70.000	2.500	5.000
Total Plasma Protein	g/ml	0.062	0.067	0.090	0.074	0.057	0.088
Plasma albumin	g/ml	0.033	0.032	0.026	0.042	0.039	0.049
Plasma a-1-AGP	g/ml	0.013	0.018	0.004	0.002	0.001	0.002
Hematocrit	fraction	0.450	0.460	0.420	0.440	0.360	0.410
Urine Flow	ml/min/kg^(3/4)	0.013	0.098	0.037	0.040	0.042	0.151
Bile Flow	ml/min/kg^(3/4)	0.026	0.044	0.015	0.010	0.083	0.004
GFR	ml/min/kg^(3/4)	5.265	3.705	10.901	5.165	3.120	2.080
Average Body Temperature	С	37.000	38.700	38.900	37.000	39.350	38.000
Plasma Effective Neutral Lipid Volume Fraction	unitless	0.004	0.002	0.001	0.007	0.002	0.007
Plasma Protein Volume Fraction	unitless	0.060	0.059	0.090	0.070	0.057	0.070
Pulmonary Ventilation Rate	l/h/kg^(3/4)	24.750	24.750	24.750	27.750	24.750	27.750
Alveolar Dead Space Fraction	unitless	0.330	0.330	0.330	0.330	0.330	0.330

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PBTK Partition Coefficients

- Although in our model there are really three separate concentrations (C) that describe a tissue, we assume that they are related to each other by constants
- We assume that the ratio between the blood and plasma (*R_{blood:plasma}*) is a uniform constant throughout the body

 $C_{compartment,blood} = R_{blood:plasma}C_{compartment,plasma}$

We assume that all the tissues are "perfusion limited", which means that the tissue concentration instantly comes to equilibrium with the free fraction in plasma (concentration is limited by flow to the tissue)

 $C_{compartment,tissue} = K_{tissue:plasma} * f_{up} * C_{compartment,plasma}$

K_{tissue:plasma} is the tissue partition coefficient which we either measure experimentally or predict *in silico* (*for example* Schmitt's method)





Tools for Chemical-Specific PBTK Parameters

Physiological parameters depend on species, but we must also make chemical-specific estimates of tissue partitioning...





Schmitt's Method (2008)

- Depending on its structure a chemical partitions differently into water, fats, and charged materials
- Schmitt's method predicts chemical affinity based on the composition of a tissue
 - Users can choose to add new tissue to HTTK by providing this information

	Fract	ion of total volume	Fractio	on of cell	volume		Fraction of total I	ipid	
Tissue	Cells	Interstitium	Water	Lipid	Protein	Neutral Lipid	Neutral Phospholipid	Acidic Phospholipid	рН
Adipose	0.86	0.14	0.02	0.93	0.05	0.94	0.06	0.01	7.10
Bone	0.90	0.10	0.26	0.02	0.21	0.85	0.11	0.04	7.00
Brain	1.00	0.01	0.80	0.11	0.08	0.37	0.46	0.17	7.10
Gut	0.90	0.10	0.78	0.07	0.15	0.69	0.26	0.05	7.00
Heart	0.75	0.25	0.70	0.14	0.17	0.89	0.08	0.03	7.10
Kidney	0.84	0.17	0.77	0.06	0.17	0.64	0.29	0.07	7.22
Liver	0.77	0.23	0.72	0.09	0.18	0.72	0.23	0.05	7.23
Lung	0.80	0.20	0.80	0.01	0.18	0.30	0.56	0.14	6.60
Muscle	0.85	0.15	0.80	0.02	0.18	0.54	0.38	0.08	6.81
Skin	0.40	0.60	0.43	0.28	0.29	0.36	0.50	0.14	7.00
Spleen	0.75	0.26	0.77	0.04	0.19	0.53	0.39	0.07	7.00
Red blood cells	1.00	0.00	0.66	0.01	0.33	0.40	0.50	0.10	7.20

HTTK Partition Coefficients

 We use a modified Schmitt (2008) method with elements of Peyret et al. (2010)

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- Pearce et al. (2017b) analyzed literature measurements of chemicalspecific partition coefficients (PC) in rat
 - 945 tissue-specific PC
 - 137 unique chemicals
 - Mostly pharmaceuticals
- We use tissue-specific calibrations for the *in silico* predictors
- Pearce et al. (2017b) evaluated with human measured volumes of distribution for 498 chemicals from Obach (2008) – root mean squared error was 0.48



Pearce et al. (2017b)



Review: HTTK model parameters

Chemical-specific parameters

Intrinsic hepatic clearance rate (CL _{int})	 Measured in HT <i>in vitro</i> assays (Rotroff <i>et al.</i> 2010; Wetmore <i>et al.</i> 2012, 2014, 2015; Wambaugh <i>et al.</i> 2019) or predicted <i>in silico</i> (Sipes <i>et al.</i> 2017) 			
Fraction unbound to plasma protein (F _{up})				
Tissue:blood partition coefficients (for compartmental models)	Predict from phys-chem properties and tissue properties (Pearce et al., 2017)			
Physiological parameters				
Tissue masses (including body weight)				
Tissue blood flows	Gathered from data available in the			
Glomerular filtration rate (passive renal clearance)	published literature [Wambaugh et al. 2015; Pearce et al. 2017a]			
Hepatocellularity				



Model evaluation



Verifying PBTK Models

Process for the Evaluation of PBPK Models

- 1. Assessment of Model Purpose
- 2. Assessment of Model Structure and Biological Characterizations
- 3. Assessment of Mathematical Descriptions
- 4. Assessment of Computer Implementation
- 5. Parameter Analysis and Assessment of Model Fitness
- 6. Assessment of any Specialized Analyses

Clark et al. (2004)



FIG. 1. This figure shows examples of key considerations during model development, evaluation, and application that are necessary before a PBPK model may be adopted for use in a HHRA.

Why Build Another Generic PBTK Tool?

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from Breen et al. (2021)

	SimCYP	ADMET Predictor / GastroPlus	PK-Sim	IndusChem Fate	pbktool	G-PBTK	httk
References	Jamei (2009)	Parrott (2009)	Eissing (2011)	Jongeneelen (2011)	Punt (2020)	Armitage (2021)	Pearce (2017)
Availability	License, but inexpensive for research	License, but inexpensive for research	Free	Free	Free	Free	Free
Open Source	No	No	GitHub	No	GitHub	Planned Release	CRAN and GitHub
Default PBTK Structure	Yes	Yes	Yes	Yes	Yes	Yes	Yes
Population Variability	Yes	Yes	Yes	No	No	No	Yes
Data Needs	High/Low	High/Low	High	High	Low	Low	Low
Typical Use Case	Drug Discovery	Drug Discovery	Drug Discovery	Environmental Assessment	Food and Drug Safety Evaluation	Environmental Assessment	Screening
Batch Mode	Yes	Yes	Yes	No	No	No	Yes
Graphical User Interface	Yes	Yes	Yes	Excel	No	Excel	No
Built-in Chemical-Specific Library	Many Clinical Drugs	No	Many pharmaceutical- specific models available	15 Environmental Compounds	No	No	Pharmaceuticals and ToxCast: 998 human, 226 rat
Oral Bioavailability Modeling	Yes	Yes	No	No	No	No	No (Will be available in the future version)
In Vitro Distribution	SIVA VIVD	No	No	No	No	No	Armitage Model
Exposure Route	Oral, IV	Oral, IV	Oral, IV	Oral, Gas Inhalation, Dermal	Oral	Oral, IV, Inhalation	Oral, IV, Gas Inhalation (Dermal, Aerosol, and Fetal forthcoming)
Ionizable Compounds	Yes	Yes	Yes	No	No	Yes	Yes
Export Function	No	No	Matlab and R	No	No	No	SBML and Jarnac
R Integration	No	No	<mark>Yes (2017)</mark>	No	Yes	Yes	Yes
Reverse Dosimetry	Yes	Yes	Yes	No	No	No	Yes

*Both **PLETHEM** (Pendse et al., 2020) and **Web-ICE** (Bell et al., 2020) provide GUI's to HTTK and other models

Pre-computed HTTK results are also available at https://comptox.epa.gov/dashboard



Statistical Analysis with HTTK

- If we are to use HTTK, then we need confidence in its predictive ability
- In drug development, HTTK methods estimate therapeutic doses for clinical studies predicted concentrations are typically on the order of values measured in clinical trials (Wang, 2010)
 - For most compounds in the environment there will be no clinical trials
- Uncertainty must be well characterized
 - We compare to *in vivo* data to get **empirical estimates of HTTK uncertainty**
 - ORD has both compiled existing (literature) TK data (Wambaugh *et al.*, 2015) and conducted new experiments in rats on chemicals with HTTK *in vitro* data (Wambaugh *et al.*, 2018)
 - Any approximations, omissions, or mistakes should work to increase the estimated uncertainty when evaluated systematically across chemicals



- To evaluate a chemical-specific TK model for "chemical x" you can compare the predictions to *in vivo* measured data
 - Can estimate bias
 - Can estimate uncertainty
 - Can consider using model to extrapolate to other situations (dose, route, physiology) where you have no data





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- However, we do not typically have TK data





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 - Can estimate uncertainty
 - Can consider using model to extrapolate to other situations (dose, route, physiology) where you have no data
- However, we do not typically have TK data
- We can parameterize a generic TK model, and evaluate that model for as many chemicals as we do have data
 - We do expect larger uncertainty, but also greater confidence in model implementation
 - Estimate bias and uncertainty, and try to correlate with chemical-specific properties



Cohen Hubal et al. (2019)



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Cohen Hubal et al. (2019)



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Cohen Hubal et al. (2019)



Evaluation Example: Observed Total Clearance

- We estimate clearance from two processes – hepatic metabolism (liver) and passive glomerular filtration (kidney)
- This appears to work better for pharmaceuticals than other chemicals:
 - ToxCast chemicals are overestimated
- Non-pharmaceuticals may be subject to extrahepatic metabolism and/or active transport





CvTdb: An In Vivo TK Database

https://github.com/USEPA/CompTox-PK-CvTdb

- EPA has developed a public database of concentration vs. time data for building, calibrating, and evaluating TK models
- Curation and development is ongoing, but to date includes:
 - 198 analytes (EPA, National Toxicology Program, open literature)
 - Routes: Intravenous, dermal, oral, sub-cutaneous, and inhalation exposure
- Standardized, open-source curve fitting software invivoPKfit used to calibrate models to all data:

https://github.com/USEPA/CompTox-ExpoCast-invivoPKfit





Developing Models with the CvT Database

- USAF and EPA developed generic gas inhalation physiologically-based toxicokinetic (PBTK) model
- Evaluated HTTK with CvTdb: 142 exposure scenarios across 41 volatile organic chemicals were modeled and compared to published *in vivo* data for humans and rat
- R² was 0.69 for predicting peak concentration
- R² was 0.79 for predicting time integrated plasma concentration (Area Under the Curve, AUC)





Developing Models with the CvT Database

- Access to *in vivo* concentration vs. time data made it easier to identify coding and other modeling errors
- Access to *in vivo* concentration vs. time data also made it easier to find fault with specific data sets





Review of HTTK Evaluations

- World Health Organization (2010): PBTK models are "adequate" when predictions "are, on average, within a factor of 2 of the experimental data"
- Predictions of full concentration vs. time curve (that is, all time points for all chemicals):
 - Linakis et al. (2020): For forty volatile, non-pharmaceutical chemicals root mean squared error (RMSE) of 1.11 (on a log10 scale, therefore a factor of 13x) and a coefficient of determination (R²) of 0.47
- Prediction of TK summary statistics such as peak concentration and time-integrated ("area under the curve" or AUC) concentration:
 - Wang (2010): For 54 pharmaceutical clinical trials the predicted AUC differed from observed by
 2.3x
 - Linakis et al. (2020): RMSE = 0.46 or 2.9x for peak concentration and RMSE = 0.5 or 3.2x for AUC
 - Wambaugh et al. (2018): For 45 chemicals of both pharmaceutical and non-pharmaceutical nature, RMSE of 2.2x for peak and 1.64x for AUC
 - Pearce et al. (2017b):The calibrated method for predicting tissue partitioning that is included in httk similarly predicted human volume of distribution with a RMSE of 0.48 (3x)



Conclusions





Clark et al. (2004) Process for the Evaluation of PBPK Models	Evaluation of HTTK R Package
Assessment of Model Purpose	
Assessment of Model Structure and Biology	
Assessment of Mathematical Descriptions	
Assessment of Computer Implementation	
Parameter Analysis and Assessment of Model Fitness	
Assessment of any Specialized Analyses	



	Clark et al. (2004) Process for the Evaluation of PBPK Models	Evaluation of HTTK R Package
٧	Assessment of Model Purpose	Rapidly parameterized in vitro-in vivo extrapolation
	Assessment of Model Structure and Biology	
	Assessment of Mathematical Descriptions	
	Assessment of Computer Implementation	
	Parameter Analysis and Assessment of Model Fitness	
	Assessment of any Specialized Analyses	



	Clark et al. (2004) Process for the Evaluation of PBPK Models	Evaluation of HTTK R Package
٧	Assessment of Model Purpose	Rapidly parameterized in vitro-in vivo extrapolation
٧	Assessment of Model Structure and Biology	Consistent model structure evaluated across a diverse chemical library
	Assessment of Mathematical Descriptions	
	Assessment of Computer Implementation	
	Parameter Analysis and Assessment of Model Fitness	
	Assessment of any Specialized Analyses	



	Clark et al. (2004) Process for the Evaluation of PBPK Models	Evaluation of HTTK R Package
٧	Assessment of Model Purpose	Rapidly parameterized in vitro-in vivo extrapolation
٧	Assessment of Model Structure and Biology	Consistent model structure evaluated across a diverse chemical library
٧	Assessment of Mathematical Descriptions	Model structures added and revised through peer-reviewed journal articles
	Assessment of Computer Implementation	
	Parameter Analysis and Assessment of Model Fitness	
	Assessment of any Specialized Analyses	



	Clark et al. (2004) Process for the Evaluation of PBPK Models	Evaluation of HTTK R Package
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٧	Assessment of Mathematical Descriptions	Model structures added and revised through peer-reviewed journal articles
٧	Assessment of Computer Implementation	Open-source code available from GitHub (<u>https://github.com/USEPA/CompTox-ExpoCast-httk</u>) and CRAN (<u>https://CRAN.R-project.org/package=httk</u>) where bugs can be reported and patched
	Parameter Analysis and Assessment of Model Fitness	
	Assessment of any Specialized Analyses	



	Clark et al. (2004) Process for the Evaluation of PBPK Models	Evaluation of HTTK R Package
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٧	Parameter Analysis and Assessment of Model Fitness	Model fitness quantified through comparison with CvTdb
	Assessment of any Specialized Analyses	



		Clark et al. (2004) Process for the Evaluation of PBPK Models	Evaluation of HTTK R Package
	٧	Assessment of Model Purpose	Rapidly parameterized in vitro-in vivo extrapolation
	V	Assessment of Model Structure and Biology	Consistent model structure evaluated across a diverse chemical library
	V	Assessment of Mathematical Descriptions	Model structures added and revised through peer-reviewed journal articles
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	V	Parameter Analysis and Assessment of Model Fitness	Model fitness quantified through comparison with CvTdb
	٧	Assessment of any Specialized Analyses	Population variability simulator httk-pop has been published (Ring et al., 2017) and is being revised with most recent NHANES biometrics (Breen et al., in prep.)
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- The in vitro-measured chemical specific parameters may be used to build a variety of models ranging in complexity from steady-state to full PBTK
- Chemical-independent information on physiology and tissue composition allow predictions of chemical distribution



- Generic models allow for verification of model implementation
- Comparing model predictions for chemicals with *in vivo* data allows estimation of confidence in predictions for chemicals without *in vivo* data

The views expressed in this presentation are those of the author and do not necessarily reflect the views or policies of the U.S. EPA



There is time for questions now followed by a BREAK

Talk Three will begin at 2:00 PM EST

Feel free to contact me at: wambaugh.john@epa.gov



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Jimena Davis

Nisha Sipes



Monte Carlo for variability simulation and uncertainty

Caroline L. Ring



The views expressed in this presentation are those of the author(s) and do not necessarily reflect the views or policies of the U.S. EPA.

Office of Research and Development Center for Computational Toxicology and Exposure

October 29, 2021


Overview

- Uncertainty vs. Variability in HTTK model parameters
- Characterizing key uncertainty in chemical-specific TK parameters
 - Fraction unbound in plasma protein (Fup)
 - Intrinsic hepatic clearance rate (Clint)
- Characterizing variability: HTTK-Pop for human TK variability
- Relative contributions of uncertainty and variability to TK model predictions
- Simulating sensitive subpopulations



Uncertainty vs. variability in HTTK model parameters



Review: HTTK model parameters

Chemical-specific parameters				
Intrinsic hepatic clearance rate (CLint) Fraction unbound to plasma protein (Fup)	Measured in HT <i>in vitro</i> assays (Rotroff <i>et al.</i> 2010; Wetmore <i>et al.</i> 2012, 2014, 2015; Wambaugh <i>et al.</i> 2019) or predicted <i>in silico</i> (Sipes <i>et al.</i> 2017)			
Tissue:blood partition coefficients (for compartmental models)	Predict from phys-chem properties and tissue properties (Pearce et al., 2017)			
Physiological parameters				
Tissue masses (including body weight)				
Tissue blood flows	Gathered from data available in the published literature [Wambaugh et al. 2015; Pearce et al. 2017a]			
Glomerular filtration rate (passive renal clearance)				
Hepatocellularity				



Chemical-specific parameters measured in vitro carry measurement uncertainty

Chemical-specific parametersIntrinsic hepatic clearance rate (CLint)Fraction unbound to plasma protein (Fup)Praction unbound to plasma protein (Fup)Practin unbound to plasm





Parameters represent biology — so they have population variability

Chemical-specific parameters					
Intrinsic hepatic clearance rate (CLint)	Represent chemical-body interactions —				
Fraction unbound to plasma protein (Fup)	vary with individual genetics, environmental factors, age, etc.				
Tissue:blood partition coefficients (for compartmental models)					
Physiological parameters					
Tissue masses (including body weight)	Represent physiology — vary with individual genetics, environmental factors, age, etc.				
Tissue blood flows					
Glomerular filtration rate (passive renal clearance)					
Hepatocellularity					

HTTK model parameters determine the slope relating Css to daily dose – need to propagate both uncertainty & variability



Approach to uncertainty & variability: Monte Carlo

- Characterize uncertainty in chemical-specific parameters Fup and Clint in terms of probability distributions
- Characterize population variability in physiological parameters in terms of (correlated) probability distributions
- Draw samples from distributions: "simulated population"

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- Evaluate HTTK model for each "simulated individual" in the "simulated population"
- Describe resulting distribution of HTTK model predictions



Characterizing key uncertainty in chemical-specific TK parameters



General approach to uncertainty quantification





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General approach to uncertainty quantification

ntal Protection





Uncertainty in Fup

Understanding sources of error in Fup: How to measure *in vitro* using Rapid Equilibrium Dialysis (RED)



Waters et al. (2008); Rotroff et al. (2010); Wambaugh et al. (2019)



Sources of measurement uncertainty: Mass spectrometry





LOQ is a problem in the RED assay for highlybound chemicals





Approach to <LOQ problem: Repeat RED assay with varying amounts of protein



Estimate dissociation constant K_d

(strength of binding affinity between chemical and protein)

Wambaugh et al. (2019)



Additional source of uncertainty: Non-specific chemical binding to membrane or walls





Bayesian inference model for Fup uncertainty



Observed (measured) value:



Uncertainty in CLint



CLint: How to measure *in vitro* using pooled human hepatocytes



Culture donated human hepatocytes from 10 adult volunteers

Add known amount of chemical Measure chemical concentration remaining at 0, 15, 30, 60, and 120 minutes

CLint can be estimated from fitting a decaying exponential





Mass spec uncertainties also apply to CLint





Additional uncertainty source: Is chemical really metabolized at all?



Wambaugh et al. (2019)



Additional uncertainty source:

Saturable metabolism







Bayesian inference model for Clint uncertainty

Observed (measured) value: MS peak areas at 5 time points





Characterizing variability: HTTK-Pop for human TK variability



HTTK physiological parameters

Physiological parameters

Tissue masses (including body weight)

Tissue blood flows

Glomerular filtration rate (passive renal clearance)

Hepatocellularity



Data source for population physiology: CDC NHANES



CDC NHANES = Centers for Disease Control National Health and Nutrition Examination Survey

Large, representative, ongoing survey of US population: demographics, body measures, medical examination data....

 NHANES does
 NHANES does not

 measure:
 Sex

 Sex
 Tissue masses

 Age
 Tissue blood flows

 Height
 GFR (kidney function)

 Weight
 Hepatocellularity

Ring et al. (2017)



Correlated Monte Carlo approach to simulating population variability in physiology: HTTK-Pop

Sample NHANES measured quantities for actual NHANES individuals (capturing covariance):

> Sex Age Height Weight Serum creatinine



Regression equations from literature (McNally *et al.,* 2014) (+ residual marginal variability) *Predict* physiological TK quantities (as used by generic TK model) for each individual:

> Tissue masses Tissue blood flows GFR (kidney function) Hepatocellularity

(Similar approach used in SimCYP [Jamei et al. 2009], GastroPlus, PopGen [McNally et al. 2014], P3M [Price et al. 2003], physB [Bosgra et al. 2012], etc.)



Chemical-specific parameters have both uncertainty and variability

Chemical-specific parameters

Intrinsic hepatic clearance rate (CLint)

Fraction unbound to plasma protein (Fup)

Carry uncertainty from *in vitro* measurements

Also have population variability: represent chemical-body interactions — vary with individual genetics, environmental factors, age, etc.



Chemical-specific TK parameters: Two-stage Monte Carlo approach to modeling both *measurement uncertainty* and *population variability*

Step 1: Draw 1 sample from uncertainty distribution and treat as "population average" value



Step 2: Assume population variability (30% CV) around the sampled "population average" value from Step 1, and draw 1 sample

75.

50 sount

25 -

2

Clint

Repeat Steps 1 and 2 for each simulated individual to get sampled values that include both uncertainty & variability



Putting it all together: A table of HTTK model parameters for each "simulated individual" in a "simulated population"

SEQN	Demographics		Body measures		Tissue volumes	Blood flows	GFR	Hepatocell ularity	Fup	Clint
	Sex	Age	Ht	Wt						
67184	Μ	42	171	55	[]	[]	[]	[]	[]	[]
52034	Μ	0.5	73	9	[]	[]	[]	[]	[]	[]
64847	F	11	154	47	[]	[]	[]	[]	[]	[]
51787	F	22	166	87	[]	[]	[]	[]	[]	[]
49889	Μ	9	147	50	[]	[]	[]	[]	[]	[]
64606	F	59	169	115	[]	[]	[]	[]	[]	[]
45549	F	50	165	80	[]	[]	[]	[]	[]	[]
[]	[]	[]	[]	[]	[]	[]	[]	[]	[]	[]



httk R package automates this Monte Carlo sampling & model evaluation process

- > library(httk)
- > set.seed(42)

Human plasma concentration returned in mg/L units for 0.95 0.5 0.05 quantile.

95%50%5%68.51013.0703.742



Result: Percentiles of predicted Css vs. dose slope





Another way to visualize: ratio of 95th percentile to median (roughly, how wide is the Css slope distribution?)





Relative contributions of variability & uncertainty





C_{ss} Varied to Reflect

Uncertainty
Variability
Both


Simulating sensitive subpopulations



Identifying potentially sensitive sub-populations



Who is in the most sensitive portion of the population?

What does this slope distribution look like for kids, for example?

Or people over 65?

To answer this question: Need to model TK variability for specified subpopulations



HTTK-Pop can generate simulated subpopulations with user-specified demographics

Use httkpop.generate.args argument to calc_mc_css () function: Takes a named list of arguments

Name of list element	User can specify	Exar	nple	Default if not specified
agelim_years	Age limits in years	c(6,11)	Ages 6-11 years	All NHANES (0-79 years)
agelim_months	Age limits in months	c(0,36)	Ages 0-36 months	All NHANES (0-79 years)
gendernum	# of males and females	list(Male = 1000, Female = 0)	1000 males, 0 females	Randomly selected from NHANES
weight_category	BMI category	c('Overweight', 'Obese')	BMI > 25 (overweight & obese)	c('Underweight', 'Normal', 'Overweight', 'Obese')

HTTK-Pop generates physiology based on NHANES respondents in the specified demographic groups



Example of Css95 Azamethiphos Doxepin Isoxaben differences by ᄂ Ametryn ſC subpopulation log10(Css95/Css95_Total) ГŒ Clozapine Octhilinone 0.5 Propachlor 0 Benzydamine -0.5 Diuron Fenthion Quinoline Pyrene

10 subgroups of interest

Heatmap: Css95 difference (subgroup vs. Total population) for 50 chemicals with largest Css95 difference in *any* subgroup





Conclusions



Conclusions

- Uncertainty vs. Variability in TK model parameters
 - Measurement uncertainty: Chemical-specific parameters measured in vitro
 - Population variability: Physiological & chemical-specific parameters
- Characterizing key uncertainty in chemical-specific TK parameters using Bayesian inference
 - Fraction unbound in plasma protein (Fup)
 - Intrinsic hepatic clearance rate (Clint)
- Characterizing variability: HTTK-Pop for human TK variability
 - Correlated Monte Carlo approach based on CDC NHANES data
- Relative contributions of uncertainty and variability to TK model predictions
 - For most chemicals, population variability has larger effect
- Simulating sensitive subpopulations
 - HTTK-Pop can simulate populations with user-specified demographics



Thank you!

Questions?



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In vitro to *in vivo* extrapolation for decision-making

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August 13, 2021

Presented to the SETAC NA 2021 Continuing Education Course: Toxicokinetic New Approach Methodologies

The views expressed in this presentation are those of the authors and do not necessarily reflect the views or policies of the U.S. EPA



- Reverse dosimetry for in vitro to in vivo extrapolation (IVIVE)
 - Key assumptions
 - Operationalizing library(httk)
- Impacts of choices made in IVIVE on a NAM-based point of departure (POD_{NAM})
 - What are the key choices to be made in using library(httk)
 - Continuing uncertainties
- Case studies using the bioactivity:exposure ratio (BER)



Reverse dosimetry for in vitro to in vivo extrapolation (IVIVE)

Steady state in vitro-in vivo extrapolation assumption: blood::tissue partitioning ≈ cells::medium partitioning



EPA



Derivation of PODs from NAMs: IVIVE that employs toxicokinetic extrapolation of dose

High-throughput toxicokinetic (HTTK) approaches make it possible to predict doses corresponding to *in vitro* bioactivity for thousands of chemicals.



Robert G. Pearce^{1,2} · R. Woodrow Setzer¹ · Jimena L. Davis^{1,3} · John F. Wambaugh¹

Reverse dosimetry can be leveraged in IVIVE to estimate the exposure that would produce the plasma concentration corresponding to bioactivity

High throughput toxicokinetics (HTTK)

in vitro toxicokinetic data

Hepatic clearance from suspended hepatocytes

SFPA



Generic toxicokinetic models Inhaled Gas Lung Tissue Lung Blood (idnev Tissue Gut Lumer Gut Bloo Liver Tissue Liver Blood Rest of Body Body Bloo http://www.endline.com

Some high-level assumptions commonly employed:

- bioactive nominal *in vitro* assay concentration ~ *in vivo* plasma concentration that would correspond to a similar effect;
- (2) external exposures (in mg/kg/day units) that may have resulted in that plasma concentration can be constructed using estimates of species-specific physiology and Phase I and Phase II enzyme-driven hepatic clearance; and,
- (3) Often, we expect that plasma concentration can be approximated by steady-state kinetics (unless we have enough information to use other dose metrics).

Led by John Wambaugh, Barbara Wetmore, Caroline Ring, and colleagues

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Simplifying assumptions for a steady-state model

- 100% bioavailability (all of an oral dose is received by the liver through the portal vein);
- No extrahepatic metabolism: the liver is the only source of chemical clearance from the body by metabolism;
- Hepatic metabolism is first order (proportional to concentration) and does not saturate;
- Renal clearance is proportional to fraction unbound in plasma and glomerular filtration rate (i.e., no active transport); and,
- No biliary excretion or enterohepatic recirculation occurs.

With these assumptions, HTTK models have demonstrated reasonable accuracy in predicting relevant TK endpoints, for example plasma concentrations over time (AUC) (R² = 0.62) and maximum plasma concentrations (Cmax) (R² = 0.48) (Wambaugh et al., 2018).

AED values in mg/kg/day units were calculated using the following equation:

Eq.2:
$$AED_{50}\left(\frac{\frac{mg}{kg}}{day}\right) = AC_{50}(\mu M) * \frac{\frac{1\frac{mg}{kg}}{day}}{Css_{50}}$$

Where the Css (steady-state concentration) values for the median individual based on Monte Carlo simulation of species-specific physiological parameters (Css₅₀) (Pearce et al. 2017) were generated using the 3-compartment steady state model.

A simple approach for using the CompTox Chemicals Dashboard to estimate a POD_{NAM} Operationally, the httk R package (v 2.0.4) can be downloaded from CRAN or GitHub for reproducible generation of administered equivalent doses (AEDs). AC50 or LEC (micromolar) * (1 mg/kg/day/Css (micromolar)) = AED prediction Httk package optionally implements multiple models that can have increasing complexity based on data available (e.g., using

pbtk model or including interindividual toxicokinetic variability)

		•		-							
3.3 mg	g	mol	1e6 µmol	= 14.45523 umol/L = 11.45523 umol/L = 11.45523 umol/L = 1.1533 umol/L = 1.15333 umol/L = 1.15333 umol/L = 1.15333		0.1 µ A	4 1 mg/k	kg/day	0 0	07 mg/kg/	
L	1000 mg	228.291 g	mol	- 14.45525 μποι/ε - μι			14.455	23 µM =	0.0		lay = AED9
	ted States ironmental Protection ncv	Home Advanced Searc	ch Batch Search List	s 🗸 Predictions Downloads			Copy 🔻 Share	e 🔻 Submit Com	nment	Q Search all data	
DETAILS		Sear	ched by DSSTox Su	ostance Id.		IVIVE	E				
EXECUTIVE SUMM	ARY	📩 Download 🔻 🛛 Co	olumns 🗸								Search query
PROPERTIES											
ENV FATE/TRANS	PORT	Label		\$	Measured	\$	Predicted \$	Computed	\$	Unit	
		In Vitro Intrinsic He	patic Clearance		19.9		-	-		uL/min/million hepatoc	ytes
HAZARD		 Fraction Unbound i 	n Human Plasma		0.04		-	-			
► SAFETY		Olume of Distribut	tion		-		-	5.01		L/kg	
		Days to Steady Stat	e		-		-	1		Days	
		PK Half Life			-		-	31.7		hours	
IVIVE		Human Steady-Stat	e Plasma Concentration		-		-	3.3		mg/L	
► EXPOSURE											

6 records

Css here is from 95th *quantile (Note that 95th concentration quantile is the same population as the 5th dose quantile).*

EPA A simple operational use of library(httk) Default micromolar Which quantile from Monte Carlo steady-state concentration; this simulation (for Css). 95th is the in vitro point of departure you concentration quantile want to use produces the 5th dose Which generic toxicokinetic model to use? quantile. > set.seed(12345) > library(httk) > calc_mc_oral_equiv(0.1, dtxsid='DTXSID7020182', species = 'Human', which.quantile = c(0.5), output.units = 'mqpkqpday', restrictive.clearance = TRUE, model = '3compartmentss') uM concentration converted to mgpkgpday dose for 0.5 quantile. 50% 0.04836 Restrictive clearance indicates that chemical bound to protein is relatively unavailable for 'Rat', 'Rabbit', 'Dog', hepatic metabolism or renal excretion 'Mouse' or default 'Human' (whereas non-restrictive clearance assumes that chemical bound to protein rapidly disassociates from that protein for metabolism

and excretion).



Impacts of choices in the IVIVE approach to POD_{NAM}

Some key choices

- What species physiology should be considered for the application?
- Which generic HTTK model is fit-for-purpose?
- How should interindividual variability be considered?
- What assumptions should be made about restrictive clearance and bioavailability of a chemical for bioactivity?
- To what extent will our predictions of POD be inaccurate because of differential *in vitro* partitioning of the chemical?

On selection of the species for the physiology

- Does the application require comparison to animal-based PODs or human exposure predictions or both?
- How much *in vitro* toxicokinetic data is available for the species in question/how many chemicals can IVIVE be performed?
- Another approach: is allometric scaling (based on body surface area) useful for converting human administered equivalent doses to other species?

RESEARCH ARTICLE

Using the concordance of *in vitro* and *in vivo* data to evaluate extrapolation assumptions

Gregory S. Honda^{1,2}, Robert G. Pearce^{1,2}, Ly L. Pham^{1,2}, R. W. Setzer¹, Barbara A. Wetmore³, Nisha S. Sipes⁴, Jon Gilbert⁵, Briana Franz⁵, Russell S. Thomas¹, John F. Wambaugh¹*

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With this paper came the introduction of a larger set of rat intrinsic hepatic clearance and fraction unbound in plasma data, but there is still more data available for humans.

What to do when data is missing by species?



SEPA

Supplemental Appendix Figure 2, https://www.regulations.gov/docket/EPA-HQ-OPP-2020-0263/document

- In the absence of hepatic clearance values from rat hepatocytes, rat liver microsomes, or rat liver Phase I enzymes, would the use of human hepatocyte-derived hepatic clearance values be a reasonable substitute?
- The Cmax values obtained from the rat PBTK model, using either rat or human HTTK data for Fup and Clint, result in values that are similar (generally within ± 0.5 log10-μM) for the 151 substances compared. Similarly, the plasma AUC values that result from using rat or human HTTK data in a rat PBTK model generally were within ± 1 log10-μM.

On selection of a generic HTTK model

Models:	3-compartment steady state (3compss)	РВТК
Chemical-specific parameters	Clint only	Clint, Fup, logP, pKa
Model inputs	A single oral dose	A single oral dose
Model outputs	Steady-state blood concentrations	Time course of blood concentrations; estimate Cmax, AUC (24 hr), Cmean (AUC/time) from time course simulations
Human interindividual variability	Human physiological parame metabolic clearance; plasma blood flow, and cell density; can be varied in a Monte Car dose required to achieve equ for the most to least sensitiv	eters (first order hepatic protein binding; liver volume, and glomerular filtration rate) rlo simulation to estimate the uivalent blood concentrations re individuals.
Rat interindividual variability	Rat physiological parameters glomerular filtration rate) ca simulation to estimate the d equivalent blood concentrat sensitive individuals.	s (rat liver volume and n be varied in a Monte Carlo ose required to achieve ions for the most to least

SFPA

- How many chemicals of interest have sufficient data for the model?
- Can *in silico* predictions of Fup or other parameters be used?
- Because the fraction unbound in plasma (Fup) assay fails for highly bound chemicals (Wambaugh et al., 2015), the steady state model can be used with the assumption that plasma protein binding is simply "small," i.e., typically 0.5% (Wetmore et al., 2012).



On consideration of population toxicokinetic variability



Paul Friedman et al., 2020 Supplemental Appendix; 10.1093/toxsci/kfz201

For the 448 chemicals in Paul Friedman et al., 2020, AED50 was typically 2-5 times larger than AED95, though in some cases the differences was much greater.

What is the application: screening or assessment?

SEPA

On consideration of restrictive clearance

The degree to which a protein bound chemical is available for metabolism and excretion is likely chemical specific and a continuous function (i.e., not binary).

Currently, there is no way to predict or measure this property for a chemical. Restrictive clearance has been used as a conservative assumption.

Because the amount of chemical bound to protein can vary from 0-100%, the AEDs produced using a non-restrictive clearance assumption may be as much as two or three orders of magnitude greater than those produced using a restrictive clearance assumption (on a log10-mg/kg/day scale and based on current measurement ability). The amount of difference observed depends on how much of the chemical is thought to be protein-bound; the more highly protein-bound the chemical, the greater the shift observed.



Paul Friedman et al., 2020 Supplemental Appendix; 10.1093/toxsci/kfz201

\$EPA

Restrictive clearance with the free 'bioactive' fraction in the media may perform best



In predicting in vivo PODs, restrictive clearance with the modeled mean free (media) concentration may perform the better.

One would need good curated information and models for *in vitro* disposition of the chemical – here we have ongoing work to apply an existing model (Armitage model) to more data.

The Armitage 2014 model operationalized in Honda et al. 2019 is available in library(httk).

```
# Run the Armitage et al. (2014) model:
out <- armitage_eval(
    casrn.vector = "793-24-8",
    this.FBSf = 0.1,
    this.well_number = 384,
    nomconc = 10)
print(out)
```

Honda et al. 2019, Figure 8; <u>10.1371/journal.pone.0217564</u>

\$EPA

What factors really influence in vitro partitioning?

- Armitage et al. (2014) suggest that in vitro partitioning relates strongly to logK_{ow} and concentration of serum in the medium
- Sorption to plastic played a smaller role in determining the cellular concentration





Armitage et al. 2014; <u>10.1021/es501955g</u>

Others reinforce that lipid and protein content of media formulations may be an important determinant



☞/►₽

Figure 1. Mass balance model used for this study. The chemical partitioning was calculated from the distribution ratios between medium and cells at a medium pH of 7.4. Both compartments are composed of water, proteins, and lipids. Proteins and lipids are represented by BSA and lip.

Fischer et al. 2017; <u>Modeling Exposure in the Tox21 in Vitro</u> <u>Bioassays | Chemical Research in Toxicology (acs.org)</u>

- Fischer et al. (2017) suggest that in vitro partitioning relates strongly to medium formulation (lipid and protein content)
- Time may play a role; perhaps equilibrium is not always reached rapidly?
- What we really need are some additional empirical measures and refinements to models to understand the extent to which differential partitioning is leading to large differences in cellular and media concentrations for the chemical space.



Bioactivity:exposure ratios

EPA Bioactivity:exposure ratios are not new



Rotroff et al., 2010 10.1093/toxsci/kfq220





Many works apply HTTK to prioritization and assessment case studies

Chemical **Research** in PERSPECTIVE pubs.acs.org/crt Toxicology 2011

Estimating Toxicity-Related Biological Pathway Altering Doses for High-Throughput Chemical Risk Assessment

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ABSTRACT: We describe a framework for estimating the human dose at which a chemical significantly alters a biological pathway in vivo, making use of in vitro assay data and an in vitroderived pharmacokinetic model, coupled with estimates of population variability and uncertainty. The quantity we calculate, the biological pathway altering dose (BPAD), is analogous to current risk assessment metrics in that it combines doseresponse data with analysis of uncertainty and population variability to arrive at conservative exposure limits. The analogy is closest when perturbation of a pathway is a key event in the mode of action (MOA) leading to a specified adverse outcome

Pharmacodynamics Pharmacokinetics Dose-to-Concentration ling Function (C_{ss}/DR Adverse Effect Toxicity Path < P .↓/ **.** obability Distribut for Dose that Activate Population **Biological Pathwa** Contents lists available at ScienceDirect

2019 Food and Chemical Toxicology journal homepage: www.elsevier.com/locate/foodchemtox



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High-throughput screening tools facilitate calculation of a combined exposure-bioactivity index for chemicals with endocrine activity

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Research Article

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Incorporating High-Throughput Exposure Predictions With Dosimetry-Adjusted In Vitro Bioactivity to Inform Chemical Toxicity Testing

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Toxicology



Review

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Research Article

In vitro to in vivo extrapolation for high throughput prioritization and decision making



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Utility of In Vitro Bioactivity as a Lower Bound Estimate of In Vivo Adverse Effect Levels and in Risk-Based Prioritization

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Angrish, 2020 Bahadori Rasenbei

RESEARCH ARTICLE

Using the concordance of in vitro and in vivo data to evaluate extrapolation assumptions

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The role of fit-for-purpose assays within tiered testing approaches: A case study evaluating prioritized estrogen-active compounds in an in vitro human uterotrophic assay

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> A subset of the papers describing the application of a highthroughput toxicokinetic approach - too many to fit 22





A retrospective case study with the Accelerating the Pace of Chemical Risk Assessment (APCRA)



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Utility of In Vitro Bioactivity as a Lower Bound Estimate of In Vivo Adverse Effect Levels and in Risk-Based Prioritization

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Why is the retrospective case study important?

- Clear need to demonstrate in practical terms, for as many chemicals as possible, how preliminary screening level risk assessment using a new approach methodologies (NAM) based approach would perform when compared to traditional approaches to deriving points-of-departure (PODs).
- Illustrate the current state-of-the-science.
- Evaluate the specific strengths and weaknesses of rapid, screening level risk assessment using NAMs.
- Approach: Take a retrospective look at the traditional and NAM data for as many chemicals as possible (448 at the time).





The big question:

See the forest for the trees

Can *in vitro* bioactivity be used to derive a conservative point-of-departure (POD) for prioritization and screening level risk assessment?

Case study workflow






The log10-POD ratio distribution shows POD_{NAM} is generally conservative *and adjustable*.



POD_{NAM,95} includes interindividual variability in the in vitro to in vivo extrapolation process to a greater extent and is more often a conservative estimate of POD_{traditional}.

This should trigger thinking regarding uncertainty and uncertainty factors/safety factors. In the NAMbased process, we have quantitatively informed uncertainty that can be included explicitly at multiple steps in the screening assessment process.

- \log_{10} POD ratio is illustrated for the POD_{NAM,95} and the POD_{NAM, 50}.
- Using the more conservative (i.e., lower) POD_{NAM,95}, 48 of the 448 substances (10.7%) demonstrated a log₁₀POD ratio < 0 (to the left of the solid vertical line), whereas 92 of the 448 substances (20.5%) demonstrated a log10-POD ratio < 0 using the POD_{NAM,50}.
- The medians of the log10-POD ratio distributions are indicated by dashed lines for POD_{NAM, 95} and POD_{NAM, 50} as 2 and 1.2, respectively.

The bioactivity:exposure ratio (BER) provides a way of prioritizing substances for further review.



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- <u>Make choices based on tolerable</u> <u>uncertainty (i.e., based on use case).</u>
- BER₉₅ used 95th percentile from the credible interval to predict median total US population exposure (ExpoCast SEEM2);BER₅₀ the 50th percentile.
- BER₉₅ and BER₅₀ values were calculated as the "95th%-ile" and "50th%-ile," using the POD_{NAM,95} and POD_{NAM,50}, respectively.

BER₉₅, 95th percentile did not prioritize an unreasonable number of substances; the BER selected reflects the level of conservatism and uncertainty considered within a screening assessment.

Conclusions and limitations

- <u>An approach to using *in vitro* bioactivity data as a POD appears to be a conservative estimate ~ 90% of the time for 448 chemicals.</u>
- POD_{NAM} estimates appear conservative with a margin of ~100-fold.
- POD_{NAM} may provide a refinement of a TTC approach.

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- When combined with high-throughput exposure estimates, this approach provides a reasonable basis for risk-based prioritization and screening level risk assessments.
- Specific types of chemicals may be currently outside the domain of applicability due to assay limitations, e.g., organophosphate insecticides: how do we identify these in the future?
- This is the largest retrospective look at this to-date; but what if new chemicals perform differently? What will be the prospective approach?
- Additional research to include expanded and improved highthroughput toxicokinetics and *in vitro* disposition kinetics may help improve POD_{NAM} estimates.







Application of hazard-specific NAMs to specific questions about the potential developmental neurotoxicity

Agency Issue Paper:

Use of New Approach Methodologies to Derive Extrapolation Factors and Evaluate Developmental Neurotoxicity for Human Health Risk Assessment

July 2020

ORD DNT NAMs Team: Josh Harrill, Tim Shafer, Katie Paul Friedman

September 15-18, 2020 Federal Insecticide, Fungicide, and Rodenticide Act Scientific Advisory Panel met to review this Issue Paper and presentations

<u>https://beta.regulations.gov/document/EPA-HQ-OPP-2020-0263-0006</u> Code here: <u>https://www.epa.gov/sap/use-new-approach-methodologies-</u> nams-derive-extrapolation-factors-and-evaluate-developmental

Phenotypic Screening for DNT Hazard

Assays should allow quantitative measurements of key neurodevelopmental events in vitro

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EPA Employing toxicokinetic and toxicodynamic NAMs

EPA New Approach Methods Work Plan: Reducing Use of Animals in Chemical Testing

https://www.epa.gov/chemical-research/epa-new-approach-methods-work-plan-reducing-use-animals-chemical-testing



- How much uncertainty can be tolerated?
- Can BER be informative for the problem?
- Are there specific hazards of interest?
- How should toxicokinetic modeling be tuned?

- Chemical safety assessment with fewer resources is a motivator for rapid data acquisition and model development.
- There is a lot more work to do, and case studies will help build confidence and identify gaps to fill.



- Reverse dosimetry is a powerful tool for deriving NAM-based points-ofdeparture for different chemical screening and assessment applications.
- The details of the choices made in the IVIVE approach have impacts on the POD_{NAM} derived, and uncertainties and assumptions should be explained.
 - R library(httk) provides a simple way for users to operationalize generic HTTK models and *in vitro* toxicokinetic data to derive POD_{NAM} from *in vitro* bioactivity data such as ToxCast data.
 - For some applications, conservative assumptions can be more tolerated.
 - Ongoing research will further inform sets of decisions for specific chemicals chemical assessment contexts (e.g., improvements and application of *in vitro* chemical disposition modeling).
- Ongoing work to compare POD_{NAM} to existing PODs as well as to values obtained through other PBTK approaches will provide important benchmarks on HTTK approaches to increase the acceptance of POD_{NAM} and BERs.



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