

Committee on _____ MUTAGENICITY

MUT/MIN/2016/2

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

Minutes of the meeting held at 10.30 am on Thursday 16th June 2016 at the Department of Health in Room 137B Skipton House, Elephant and Castle, London, SE1 6LH.

Present:

Chairman: Dr D Lovell

Members: Dr C Beevers
Dr G Clare
Professor S Doak
Dr S Dean
Professor D Harrison
Professor G Jenkins
Professor D Kirkland
Professor A Lynch
Professor F Martin

Secretariat: Dr O Sepai (PHE Secretary)
Mr B Maycock (FSA Secretariat)
Dr K Burnett (PHE Tox Unit)
Mr S Robjohns (PHE Secretariat)
Miss H Smith (PHE Secretariat)

Assessors: Dr V Swaine (HSE)
Mr S Fletcher (VMD)

In attendance: Miss B Gadeberg (PHE COC Secretariat)
For Item 4:
Representatives from a company and consultancy for diflubenzuron

| | Paragraph |
|----|---|
| 1 | |
| 2 | |
| 3 | 1. Apologies for absence 1 |
| 4 | |
| 5 | 2. Minutes of the meeting held on 26 th February 2016 |
| 6 | (MUT/MIN/2016/1) |
| 7 | |
| 8 | 3. Matters Arising 5 |
| 9 | |
| 10 | ITEM 4 AND 5 RESERVED BUSINESS |
| 11 | |
| 12 | 4. Genotoxicity of para-chloroaniline presentation |
| 13 | |
| 14 | 5. Draft discussion paper: genotoxicity of para-chloroaniline 19 |
| 15 | (MUT/2016/04) |
| 16 | |
| 17 | OPEN SESSION |
| 18 | |
| 19 | 6. Environmentally induced epigenetic toxicity: potential public health |
| 20 | concerns- presentation 29 |
| 21 | |
| 22 | 7. Epigenetics: the transgenerational effects of Vinclozolin 36 |
| 23 | |
| 24 | 8. Any other business 44 |
| 25 | |
| 26 | 9. Date of next meeting – 20 th October 2016 |
| 27 | |
| 28 | |
| 29 | |

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

2
3 1. The Chair welcomed members, the secretariat and assessors. Mr B
4 Maycock was substituting Dr D Benford as secretariat for the Food Standards
5 Agency (FSA) and Miss B Gadeberg (PHE) was attending for the COC
6 Secretariat. Professor D Harrison, the chair of the COC, was attending as an
7 ex-officio member. The Chair also welcomed the assessors Dr V Swaine
8 (HSE) and Dr S Fletcher (VMD).

9
10 2. Apologies for absence were received from Dr D Benford (Secretariat
11 FSA), the Members Professor M O'Donovan and Ms P Hardwick, and from the
12 assessors Dr H Stemplewski (MHRA) and Dr L Koshy (HSE).

13
14 3. Members were reminded of the need to declare any conflicts of
15 interest and to ensure declarations of interests were kept up to date. No
16 members declared a conflict of interest for the items on the meeting agenda.

17
18 **ITEM 2: MINUTES OF MEETING ON 26 FEBRUARY 2016 (MUT/MIN/2016/1)**

19
20 4. Members agreed the minutes subject to minor editorial changes.

21
22 **ITEM 3: MATTERS ARISING**

23
24 5. The committee was informed that two new vacancies (one for expert
25 member and one for lay member) had been advertised and four
26 reappointments were being processed. The members were asked to circulate
27 the adverts to those who may be interested in the positions.

28
29 6. The COM also heard that a strategic review of the work undertaken at
30 PHE is currently in progress and contributions had been requested from the
31 chairs of the COC, COT and COM. The committee chairs would also no longer
32 be attending the FSA General Advisory Committee on Science (GACS) as this
33 committee had been disbanded and replaced by a Science Council.

34
35 7. FSA provided an update on cycloastragenol (a natural plant extract),
36 which had been used in dietary supplements due to claims it has a beneficial
37 effect on aging by stabilising the shortening of telomeres. The committee was
38 reminded that cycloastragenol had been referred to the COC by the Advisory
39 Committee on Novel Foods and Processes (ACNFP) as there were concerns
40 over the claimed mechanism and carcinogenicity data. The COC supported
41 those concerns and referred it to the COM for a view on the genotoxicity data.
42 The COM agreed that the general package of data was negative, but
43 recommended that an expert in telomere biology be consulted. The expert
44 noted that telomere shortening was a protective effect against DNA damage,
45 so stabilising such telomeres was potentially harmful. In addition, the expert
46 suggested that mechanisms of telomere biology differ between shorter-lived
47 rodent species and humans; therefore, the data provided may not be relevant
48 to humans. Since those reviews, the applicant withdrew cycloastragenol from
49 the approval process before the ACNFP could form an opinion. Consequently,
50 cycloastragenol cannot be sold in the EU; however, it remains on sale

1 elsewhere, including the USA and China. The discussions on cycloastragenol
2 by the ACFNP are recorded in the published minutes.

3
4 8. The Chair announced that this was the last meeting for Professor
5 Anthony Lynch who had come to the end of his term. The Chair thanked
6 Professor Lynch for all his excellent work over the years and the COM
7 provided its best wishes for the future.

8
9 **RESERVED BUSINESS**

10
11
12 **ITEM 4: GENOTOXICITY OF PARA-CHLOROANILINE – PRESENTATION**

13
14
15 **ITEM 5: DRAFT DISCUSSION PAPER: GENOTOXICITY OF PARA-**
16 **CHLOROANILINE (MUT/2016/04)**

17
18
19 **OPEN SESSION**

20
21
22 **ITEM 6: ENVIRONMENTALLY INDUCED EPIGENETIC TOXICITY:**
23 **POTENTIAL HEALTH CONCERNS- PRESENTATION**

24
25 9. The role of methylation changes in mediating transgenerational effects
26 was first examined by the COM in 2006 when the Advisory Committee on
27 Pesticides (ACP) had requested an opinion on a paper investigating the
28 pesticide vinclozolin. When the topic was presented at horizon scanning
29 exercises (2013 and 2015), COM Members expressed an interest in examining
30 the topic further, particularly with regards to the importance of examining these
31 changes in risk assessment strategies. This topic was addressed by a
32 presentation of work undertaken by the Toxicology Department at Public
33 Health England (PHE) and by consideration of MUT/2016/05, which examined
34 epigenetic experimental work on vinclozolin published since the 2006 COM
35 review.

36
37 10. Dr Emma Marczylo provided a presentation to the COM of a recent
38 literature review conducted by PHE and the associated substantial publication
39 (Marczylo E et al., 2016. Critical Reviews in Toxicology. DOI
40 10.1080/10408444.2016.1175417), which evaluated environmentally induced
41 epigenetic changes.

42
43 11. The review was split into 3 parts. The first part included an overview of
44 the role of epigenetic mechanisms involved in the mammalian life cycle,
45 particularly highlighting stages that might be vulnerable to epigenetic changes.
46 The second and main section examined current evidence for environmentally-
47 induced epigenetic toxicity from human cohort studies and animal (rodent)
48 studies. This included adverse outcomes, such as reproductive toxicity,
49 developmental toxicity, metabolic disorders and behavioural changes. The third

1 part of the review considered how potential epigenetic toxicity may affect public
2 health. This included potential implications for regulatory toxicology.

3
4 12. Dr Marczylo noted there are various difficulties in interpreting these
5 types of studies, such as the fact that epigenetic variation can be quite large in
6 human and animal models. It is difficult to determine whether a change is
7 normal and adaptive or adverse. It is also unclear whether a threshold needs to
8 be exceeded for an adverse effect to occur. Eighteen human cohort and 20
9 rodent studies reported a lack of epigenetically-related toxicity. It was noted
10 that these do not necessarily rule out an epigenetic mechanism of toxicity per
11 se, but they do exclude a link between the specific epigenetic, exposure and/or
12 adverse endpoints/markers investigated.

13
14 13. The PHE review suggested that there is a need to identify and
15 investigate specific functional epigenetic mechanisms and biological pathways
16 relevant to humans so that the risks of environmentally induced epigenetic
17 toxicity to public health can be adequately assessed. The PHE review
18 acknowledged that most studies involved a high, often single, dose in animals
19 many orders of magnitude greater than human environmental levels of
20 exposure. Also, a number of studies used routes of exposure that are not
21 relevant to humans (e.g. intraperitoneal). Other factors to consider in
22 evaluating potential relevance to humans, included differences in metabolism
23 between humans and animal models; extrapolation from *in vitro* models to *in*
24 *vivo*; timing of exposure in terms of susceptible life stages; and potential
25 mixture effects (i.e. humans are exposed to an environmental mixture not just
26 single chemicals). A robust, dose-dependent causal relationship between a
27 specific environmental exposure, an epigenetic change and an adverse public
28 health outcome would be required to classify a chemical as an epigenetic
29 toxicant.

30
31 14. The COM was informed that consideration of epigenetic mechanisms
32 was high on the agenda of the OECD and other expert groups. This indicated
33 that there was a need to consider whether epigenetics should or could be
34 included into regulatory chemical assessment. Also, epigenetics could
35 potentially be used in exposure assessment i.e. where epigenetic changes act
36 as indicators of exposure, but do not lead to adverse effects.

37
38 15. Regarding the future, Dr Marczylo suggested that more research was
39 required. Improved human biomonitoring of chemical exposure may help
40 determine the levels of chemicals that humans are exposed to environmentally
41 before establishing whether relevant effects occur at these levels. There was
42 also a need for improved molecular study designs to identify mechanisms for
43 transgenerational effects using additional models (e.g. zebra fish), and to
44 understand the normal variation of epigenetic change. Depending on such
45 information, future test guidelines including epigenetic endpoints could be
46 developed, which may be useful and could have benefits in terms of the 3Rs
47 (reduction, replacement, refinement of animal use). For example, early
48 epigenetic markers of adverse effect may result in a study being stopped early
49 and no further testing being needed.

50

1 **ITEM 7: EPIGENETICS: THE TRANSGENERATIONAL EFFECTS OF**
2 **VINCLOZOLIN (MUT/2016/05)**
3

4 16. Following the presentation, the COM was requested to provide its views
5 or make suggestions that could help with future work in this topic. Also, to
6 consider the potential implications for the COM from both the PHE review and
7 from the data that had been provided relating specifically to vinclozolin
8 (MUT/2016/05).
9

10 17. Members noted that a large amount of the chemical specific data on
11 epigenetic changes related to vinclozolin. The COM considered that most of
12 the studies on vinclozolin and other chemicals and epigenetic changes used
13 very different methods (including different doses and different timing of doses)
14 and different animal crosses. Some studies used very high doses and
15 intraperitoneal administration that were not relevant to human environmental
16 exposure. The inconsistency in the various studies made comparison difficult.
17 Different time points of exposure could be important because methylation
18 patterns might be expected to change 'naturally' over time in response to
19 'natural' changes in environmental exposure. Some of the results could be an
20 artefact from the use of outbred animals and variation in the strains of animals
21 used. However, it was acknowledged that much of the inconsistency could also
22 be due to researchers investigating different or novel areas of research and not
23 necessarily due to an underlying inconsistency in results or findings.
24

25 18. The COM considered that it would be important to identify and separate
26 out the key epigenetic changes that could lead to adverse effects from the
27 large 'natural' variation. It would be useful to identify what biomarkers or
28 endpoints were important. There was a need for greater consistency in studies
29 (e.g. timing of doses and routes of administration) and a standardisation of the
30 protocols. There was also a need for reproducibility of studies (i.e. validation).
31 Members suggested that there may be some currently available assays that
32 could be used or adapted. It was also suggested that the input and
33 involvement of wider scientific groups in addition to the COM could be
34 beneficial.
35

36 19. Members agreed that it was not likely that existing test guidelines would
37 be changed to include epigenetic endpoints in the foreseeable future. It was
38 suggested that it would be useful to create a 'safe harbour' for epigenetic data
39 that could receive data from industry, similar to that created for 'omics' data by
40 the USA Food and Drug Administration. This would mean that data could be
41 accumulated and made widely available for evaluation over time. This would
42 allow regulatory bodies and industry to determine what endpoints and types of
43 data may be useful and could be realistically obtained and added to existing
44 toxicity studies. A repository would also be useful for existing data, which
45 could include pre-clinical and clinical data.
46

47 20. The COM also noted that it was important to consider other groups that
48 can be added to DNA, rather than just methyl groups (e.g. carboxyl, formyl
49 etc.). Also, that there was a need to make further distinctions, such as between
50 5-methylation and 5- hydroxyl-methylation, because these changes may

1 represent different events (e.g. in terms of permanent effects). It was noted
2 that methylation may up-regulate some genes; down-regulate others; and may
3 have no effects on other genes.

4
5 21. Another important aspect to consider was whether there is a threshold
6 for adverse epigenetic effects. Currently this was not known.

7
8 22. There was some discussion on what aspects of this area of research the
9 COM could contribute to. Members considered that it would be important to
10 identify any impacts that epigenetics could have on standard genotoxicity
11 studies. Transgenerational heritable changes in the F3 generation were
12 considered to have some overlap with the interests of the COM. It was
13 considered that more subtle changes (e.g. seasonal, diurnal or effects more
14 marked at particular life stages (i.e. non-permanent changes)) would be of less
15 relevance to the COM. Any interaction between epigenetic change and
16 genotoxicity would be more relevant to the COM. For example, if epigenetic
17 changes could exacerbate or antagonise a genotoxic effect and whether this
18 had any impacts on standard genotoxicity tests. It was also important to
19 distinguish between epigenetic changes that can be re-programmed at a later
20 time point and those that were resistant to re-programming.

21
22 23. Overall, it was considered that areas of epigenetics relevant to the remit
23 of the COM would include any mechanisms for genetic damage and
24 inheritance. Furthermore, there was a need for good reproducibility and
25 validation of study findings before epigenetics could be considered in risk
26 assessment and chemical regulation. It was suggested that a joint meeting of
27 the three sister committees (i.e. the COM, COC and COT) on the topic of
28 epigenetics would be useful.

29 30 **ITEM 8: ANY OTHER BUSINESS**

31
32 24. At the last OECD WNT meeting, the guidance document on revisions to
33 OECD genetic toxicology Test Guidelines, previously seen by the COM, had
34 been approved. The COM was also informed that there was a proposal for a
35 test guideline on the microwell plate version of the Ames test.

36
37 25. One member expressed concern over four statements from the
38 EFSA/ECHA regulatory reviews recently. There had been a statement that for
39 *in vivo* genotoxicity, the intraperitoneal route of administration should be
40 preferred to oral and inhalation because, firstly, it leads to by-pass of some first
41 pass metabolism in the liver and therefore produces a more sensitive test.
42 Secondly, that even if a test compound is detected in the plasma that it does
43 not necessarily indicate that the target tissue in the bone marrow was also
44 exposed to the test compound (i.e. in the micronucleus test). Thirdly, that even
45 if it can be demonstrated that a test chemical has reached the bone marrow at
46 a concentration that exceeds anticipated human exposure, it may not be
47 considered adequate. This is because a higher exposure could be achieved in
48 an *in vivo* comet or site of contact test. This would lead to the requirement for a
49 further comet and site of contact tests to be conducted at a higher exposure.
50 Fourthly, ECHA seemed to be insisting that in addition to the liver and the

1 duodenum that the glandular stomach should also be sampled as a second
2 'site of contact' tissue following oral administration. It was suggested that the
3 COM should consider these recent regulatory genotoxicity testing requests at
4 the next meeting.

5
6 26. The Health and Safety Executive (HSE) provided the COM with an
7 update on glyphosate. The regulatory situation was ongoing. The EU was
8 considering an application for renewal of the regulatory approval of the
9 herbicide glyphosate. There was a proposal to extend the approval of
10 glyphosate for 6 months while ECHA considered its final decision on its
11 classification. Consideration on the extension of approval would take place on
12 the 24th June. A proposal to amend the harmonised classification and labelling
13 of glyphosate by the German Competent Authority was published on the
14 ECHA's website for a 45 day public consultation period. Germany was not
15 proposing to classify glyphosate as a germ cell mutagen or carcinogen, but the
16 ECHA welcomed comments on these hazard classes.

17
18 **ITEM 9: DATE OF NEXT MEETING**

19
20 27. 20th October 2016.