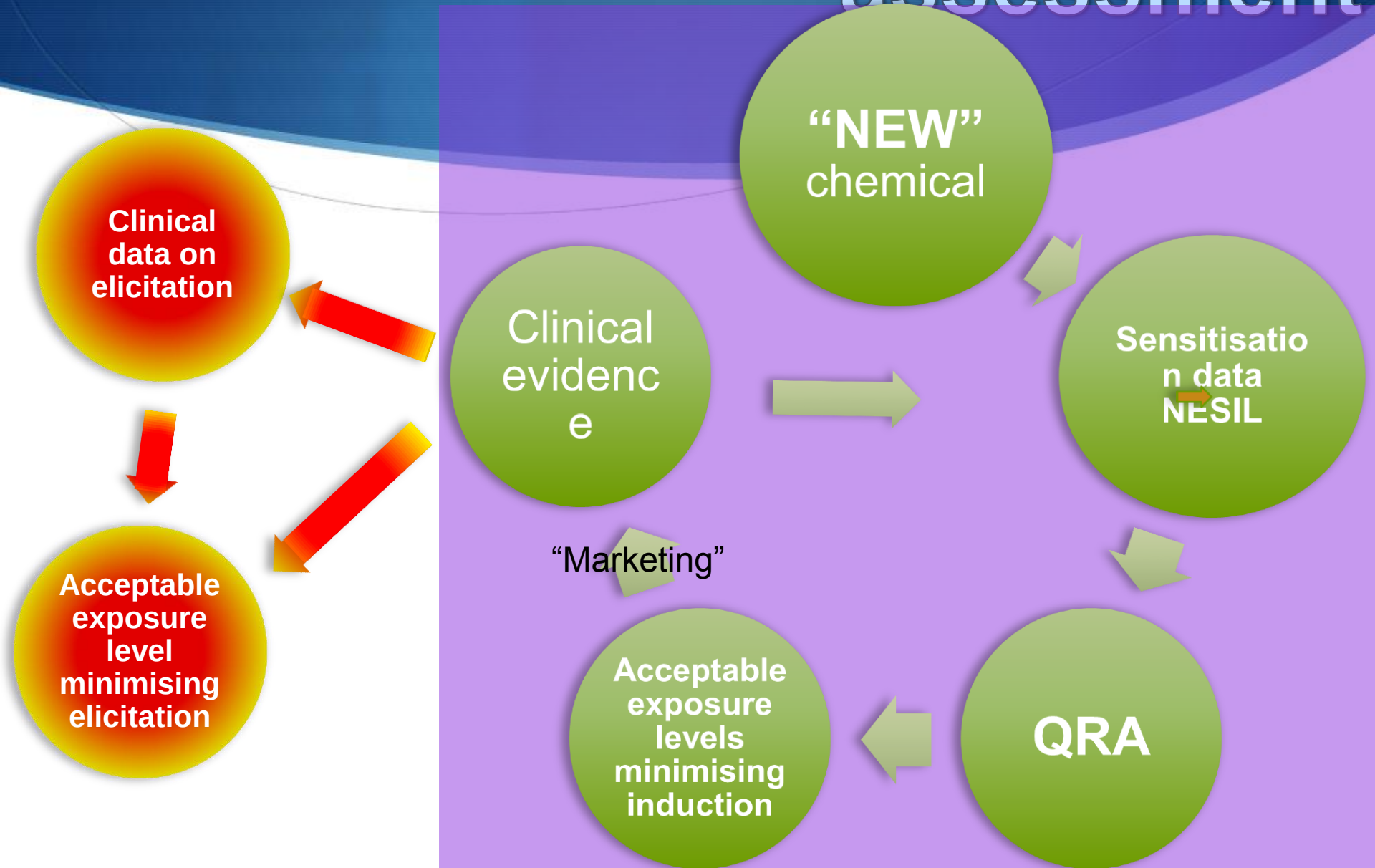
QRA Review 2014

- Toxicological risk assessment is normally based on the extrapolation of an experimentally derived threshold to an acceptable use level

- Skin sensitisation QRA follows this approach
  - NESIL is the experimental threshold
  - SAFs translate this into the real world

- Proof that any risk assessment functions properly requires clinical evidence in the context of appropriate risk management

Skin sensitisation risk assessment



Overview

- Reconsideration of the underlying science
- Impact of the above on QRA/SAFs
- Intensive discussion/debate in mid-March
- The outcome was a set of proposals for QRA2.0

What did we conclude?

- The starting point of the QRA is the NESIL, which is defined as the threshold known not to induce skin sensitization, considering all available hazard data in a weight of evidence approach, under the specific exposure conditions of a standard protocol HRIPT.

What did we conclude?

- Considerations related to Humans:
  - The variation in individual human susceptibility to skin sensitization is substantial. The biological basis of this variability is largely unknown, with ethnicity, gender, age (including infants), genetics each making only a minor contribution.
  - Regarding skin diseases / conditions:
    - Atopic dermatitis, psoriasis and dry skin have probably no impact on skin sensitization.
    - Irritant dermatitis is known to promote skin sensitization.
  - The inter-individual variability not accommodated in the NESIL is reflected by a SAF of 10.

What did we conclude?

- Considerations related to products:
  - The impact of product use factors such as degree of occlusion, frequency / duration of product use and the product matrix itself are reflected in SAFs that range between 0.3 and 3.
  - The role of skin condition / site is determined by a stepwise consideration of pre-existing inflammation, irritation by product, and penetration / permeation of product and is reflected in SAFs each between 1 and 3.
  - The impact of use of the product over extended periods of time is reflected in a SAF of 2

What did we conclude?

- In conclusion, the assumptions for the SAFs underpinning QRA 1.0 have been reviewed: ***QRA 2.0 represents a more detailed and transparent assessment with regard to aggregate exposure, skin condition, product type and site of application.***

Now we must evaluate whether that conclusion withstands the scrutiny of practical application.

We should all focus on the *outcome* of QRA2.0 calculations, not on comparing QRA1

QRA2.0

Un Produit Ainsi Solide Qu'il Est Nouvateur