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THE  
SENSES



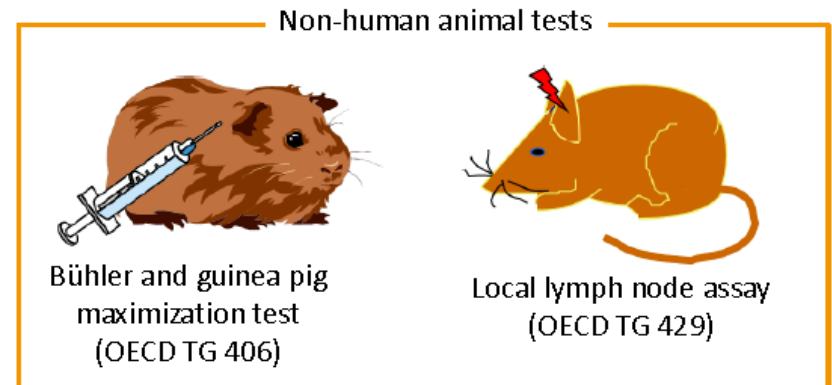
## Identification of an allergen by non-clinical pre-tests

(historic animal and human data and existing and future tools of alternatives to animal testing) for the characterisation of allergens

- Well known methods to determine the potential for a material to be a sensitiser (allergen)
- CLP criteria
- Alternatives and OECD Integrated Approach to Testing and Assessment (IATA)

# Well known methods to determine sensitisation of a substance

- In Silico tools (WoE)
- Read-across and structural considerations (WoE)
- Animal studies
  - OECD 429: LLNA
  - OCED 406: GPMT, Buehler occluded patch test
  - Other
- Human non-clinical studies
  - Human maximisation test
  - HRIPT
- In vitro studies
  - DPRA, Keratinosens, H-Clat – OECD guidelines to be published
  - Other





Sensitiser

Non-sensitiser

# CLP Criteria

## Human Data

**Annex I: 3.4.2.2.2.1.** Human evidence for sub-category 1A can include:

- (a) positive responses at  $\leq 500 \mu\text{g}/\text{cm}^2$  (HRIPT, HMT – induction threshold);
- (b) diagnostic patch test data where there is a relatively high and substantial incidence of reactions in a defined population in relation to relatively low exposure;
- (c) other epidemiological evidence where there is a relatively high and substantial incidence of allergic contact dermatitis in relation to relatively low exposure.

**Annex I: 3.4.2.2.2.2.** Human evidence for sub-category 1B can include:

- (a) positive responses at  $> 500 \mu\text{g}/\text{cm}^2$  (HRIPT, HMT – induction threshold);
- (b) diagnostic patch test data where there is a relatively low but substantial incidence of reactions in a defined population in relation to relatively high exposure;
- (c) other epidemiological evidence where there is a relatively low but substantial incidence of allergic contact dermatitis in relation to relatively high exposure.

HRIPT: Human Repeat Insult Patch Test; HMT: Human Maximisation Test

# CLP Criteria

## Clinical data

**Table 3.4.2—b Relatively high or low frequency of occurrence of skin sensitisation\***

Human diagnostic patch test data	High frequency	Low/moderate frequency
General population studies	$\geq 0.2 \%$	$< 0.2 \%$
Dermatitis patients (unselected, consecutive)	$\geq 1.0 \%$	$< 1.0 \%$
Selected dermatitis patients (aimed testing, usually special test series)	$\geq 2.0 \%$	$< 2.0 \%$
Work place studies:		
1: all or randomly selected workers	$\geq 0.4 \%$	$< 0.4 \%$
2: selected workers with known exposure or dermatitis	$\geq 1.0 \%$	$< 1.0 \%$
Number of published cases	$\geq 100$ cases	$< 100$ cases

\* Only one or two types of information may be sufficient for sub-categorisation.

# CLP Criteria

## Animal data

**Table 3.4.2—e Definition of significant skin sensitising effect**

Test	Result
Mouse local lymph node assay (LLNA) (OECD TG 429)	Stimulation Index $\geq 3$
LLNA: DA (OECD TG 442A),	Stimulation Index $\geq 1.8$
LLNA: BrdU-ELISA (OECD TG 442B)	Stimulation Index $\geq 1.6$
Guinea pig maximisation test (GPMT) (OECD 406)	Redness (Score $\geq 1$ ) in $\geq 30\%$ of the test animals
Buehler assay (OECD 406)	Redness (Score $\geq 1$ ) in $\geq 15\%$ of the test animals

### 3.4.2.2.3.2. Non human data

**Annex I: 3.4.2.2.3.2.** Animal test results for sub-category 1A can include data with values indicated in Table 3.4.3

*Table 3.4.3*

#### **Animal test results for sub-category 1A**

Assay	Criteria
Local lymph node assay	EC3 value $\leq 2\%$
Guinea pig maximisation test	$\geq 30\%$ responding at $\leq 0,1\%$ intradermal induction dose or $\geq 60\%$ responding at $> 0,1\%$ to $\leq 1\%$ intradermal induction dose
Buehler assay	$\geq 15\%$ responding at $\leq 0,2\%$ topical induction dose or $\geq 60\%$ responding at $> 0,2\%$ to $\leq 20\%$ topical induction dose

**3.4.2.2.3.3.** Animal test results for sub-category 1B can include data with values indicated in Table 3.4.4 below:

*Table 3.4.4*

#### **Animal test results for sub-category 1B**

Assay	Criteria
Local lymph node assay	EC3 value $> 2\%$
Guinea pig maximisation test	$\geq 30\%$ to $< 60\%$ responding at $> 0,1\%$ to $\leq 1\%$ intradermal induction dose or $\geq 30\%$ responding at $> 1\%$ intradermal induction dose
Buehler assay	$\geq 15\%$ to $< 60\%$ responding at $> 0,2\%$ to $\leq 20\%$ topical induction dose or $\geq 15\%$ responding at $> 20\%$ topical induction dose

The CLP Regulation allows classification of skin sensitisers in one hazard category, Category 1,

## CLP Criteria

### Animal data

deriving sub-categories



**DRAFT**

Alternatives

OECD Guidance under development

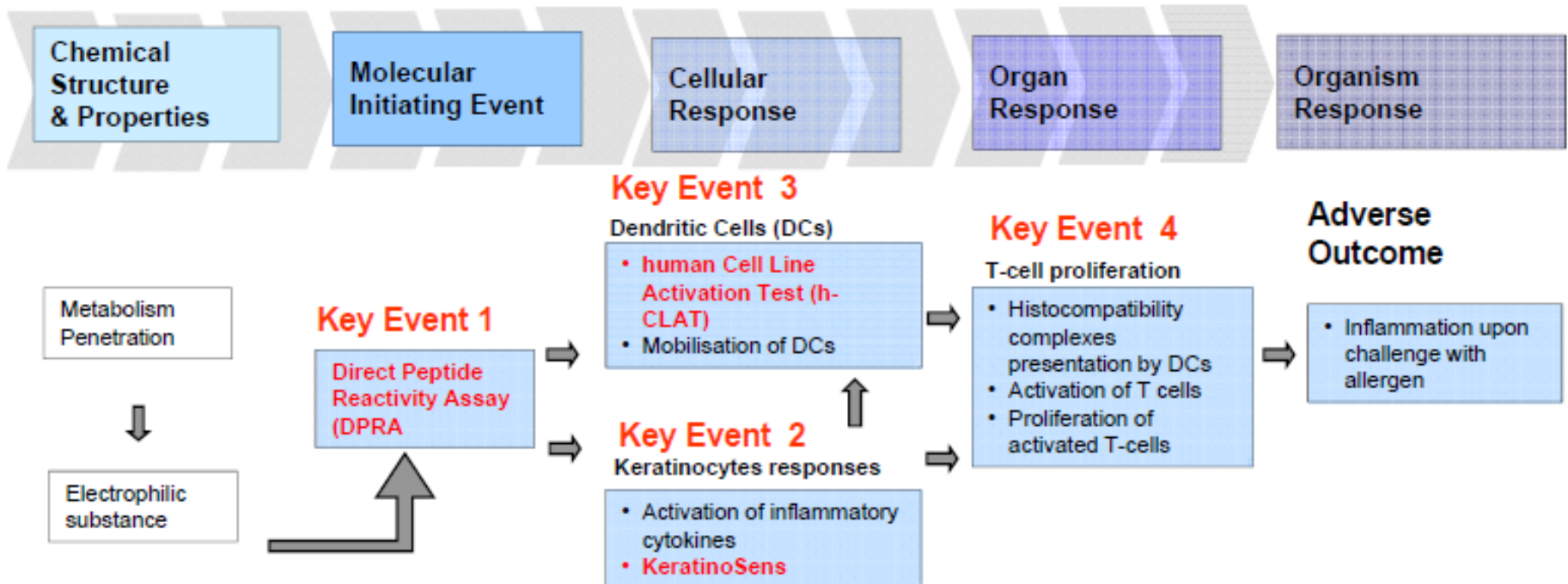
**GUIDANCE DOCUMENT ON THE EVALUATION  
AND APPLICATION OF INTEGRATED  
APPROACHES TO TESTING AND ASSESSMENT  
(IATA) FOR SKIN SENSITISATION**

**Draft 16 June 2014**

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# AOP

The AOP describes such key events starting from the molecular initiating event (MIE) (covalent binding of a chemical to skin proteins) through to sensitisation.



## OECD IATA

- An Integrated Approach to Testing and Assessment (IATA) is a structured approach used for hazard identification (potential), hazard characterisation (potency) and/or safety assessment (potential/potency and exposure) of a chemical or group of chemicals, which strategically integrates and weights all relevant data
- Provide a general framework for skin sensitisation IATA that enables sufficient flexibility in the use of the individual information sources to cover multiple regulatory needs within OECD member countries
- Provide generic guidance on the evaluation and application of IATA
- Provide consistent description of the information sources that can be used within an IATA for skin sensitisation
- Include a template for describing IATA so that the same documentation format for describing and evaluating IATA can be used by member countries.

IATA Elements		Information Sources
Exposure considerations		<ul style="list-style-type: none"> <li>• Dose-unit area</li> <li>• Use conditions</li> <li>• Others</li> </ul>
	<b>Dermal bioavailability (penetration and metabolism)</b>	<b>Chemical structure</b>  <b>Physico-chemical properties</b> <ul style="list-style-type: none"> <li>• Molecular Weight</li> <li>• pKa</li> <li>• Log K<sub>ow</sub></li> <li>• Evaporation rate/Vapour pressure</li> <li>• Melting point</li> <li>• N° of H bond donors/acceptors</li> <li>• Others</li> </ul> <b>Non-testing methods</b> <ul style="list-style-type: none"> <li>• In silico (TIMES-SS, Meteor, Nexus, OECD Toolbox)</li> <li>• Physiological based-pharmacokinetic (PBPK) models</li> <li>• Read across</li> <li>• Others</li> </ul> <b>Testing methods</b> <ul style="list-style-type: none"> <li>• TG 427 (Skin absorption: in vivo method)</li> <li>• TG 428 (Skin absorption: in vitro method)</li> <li>• Others</li> </ul> <b>To the extent addressed by each of the test methods e.g:</b> <ul style="list-style-type: none"> <li>• Peroxidase-peroxide system (PPRA)</li> <li>• Incubation with S9 fractions</li> <li>• Use of metabolically competent test systems</li> </ul>

AOP key event 1: Protein binding reactions, Reactivity and Metabolism	
	<p><b>Non-testing methods</b></p> <ul style="list-style-type: none"> <li>• Protein binding alerts (e.g. OECD Toolbox, Derek Nexus, Toxtree)</li> </ul>

Protein binding/Reactivity	<ul style="list-style-type: none"> <li>• Others</li> </ul>
	<p><b>Testing methods</b></p> <ul style="list-style-type: none"> <li>• DPRA and other methods measuring peptide depletion</li> <li>• PPRA and other methods measuring adduct formation</li> <li>• Methods measuring relative reactivity rate</li> <li>• Others</li> </ul>

**AOP key event 2: events in Keratinocytes**

Activation of biochemical pathways	<p><b>Testing methods</b></p> <ul style="list-style-type: none"> <li>• <a href="#">KeratoSens™</a> (Keap-1 Nrf2-ARE pathway)</li> <li>• <a href="#">LuSens</a> (Keap-1 Nrf2-ARE pathway)</li> <li>• AREc32 assay (Keap-1 Nrf2-ARE pathway)</li> </ul>
Pathways-associated gene expression	<ul style="list-style-type: none"> <li>• <a href="#">Sens-is</a></li> <li>• <a href="#">SenCeeTox</a></li> <li>• <a href="#">HaCaT</a> gene signature</li> </ul>
Release of pro-inflammatory mediators	<ul style="list-style-type: none"> <li>• RHE-IL-18</li> </ul>
	<ul style="list-style-type: none"> <li>• Others</li> </ul>

**AOP key Event 3: Events in Dendritic cell**

	<p><b>Testing methods</b></p> <ul style="list-style-type: none"> <li>• h-CLAT</li> <li>• MUSST</li> <li>• Modified MUSST</li> <li>• PBMDc</li> </ul>
Expression of co-stimulatory and adhesion molecules	
Pathways-associated gene expression	<ul style="list-style-type: none"> <li>• GARD</li> <li>• <a href="#">VitoSens</a></li> </ul>
Pathways-associated protein expression	<ul style="list-style-type: none"> <li>• <a href="#">SensiDerm</a></li> </ul>

**AOP key event 4: Events in Lymphocytes**

	<p><b>(Existing) animal data</b></p> <ul style="list-style-type: none"> <li>• TG 429</li> <li>• TG 442a</li> <li>• TG 442b</li> </ul>
	<p><b>Testing methods</b></p> <ul style="list-style-type: none"> <li>• Human T cell priming/proliferation assay</li> </ul>

	<b>AOP Adverse Outcome</b>	
		<p><b>(Existing) human data</b></p> <ul style="list-style-type: none"> <li>• Human Repeat Insult Patch Test (HRIPT)</li> <li>• Clinical data</li> <li>• Data from occupational exposure</li> <li>• Epidemiological data</li> </ul> <p><b>(Existing) animal data</b> - TG 406</p> <p><b>Others</b></p>
<b>Other supporting information</b>		<ul style="list-style-type: none"> <li>• Skin irritation</li> <li>• Skin corrosion</li> <li>• Genotoxicity</li> <li>• Others</li> </ul>

## Generic Matrix for Weight of Evidence Analysis

Component	Information source	Reference (scientific literature, Test Guidelines, Methods etc.)	Study result and/or positive/negative evidence obtained	Data reliability e.g. Klimisch rating	Data relevance, including coverage / prediction of relevant parameters	Consistency with other information	Conclusive remarks (adequacy of information for given component)
Exposure information							
Dermal penetration							
Dermal metabolism							
Protein binding/reactivity							
Events in <u>keratinocytes</u>							
Events in dendritic cells							
Events in lymphocytes							
Adverse outcome							
Other information							
Overall conclusions	<ol style="list-style-type: none"> <li>1. <u>WoE</u> allows a decision on the skin <u>sensitisation</u> potential (and possibly potency) of a substance to be made</li> <li>2. <u>WoE</u> does not allow a decision of skin <u>sensitisation</u> potential (potency) of a substance to be made. Recommendation of most appropriate additional testing (could be based on other structured ITS)</li> </ol> <p>NB: This will also depend on the decision e.g. <u>prioritisation</u>, hazard identification, risk assessment</p>						

Compared to human		Positive predictive value	Negative predictive value	Accuracy
<i>In vivo</i> standard	LLNA	86 %	94 %	89 %
Individual assays	DPRA	88 %	86 %	87 %
	LuSens	85 %	81 %	83 %
	MUSST	100 %	73 %	85 %
	h-CLAT	83 %	71 %	78 %
Combinations	DPRA and LuSens	80 %	100 %	85 %
	DPRA and MUSST	100 %	69 %	81 %
	DPRA and h-CLAT	100 %	71 %	83 %
	LuSens and MUSST	100 %	67 %	80 %
	LuSens and h-CLAT	88 %	66 %	76 %
Prediction model	DPRA, LuSens and MUSST	97 %	91 %	94 %

Courtesy of BASF



# Adverse outcome pathway

Protein reactivity

Keratinocyte  
activation

DC activation

DPRA

LuSens or KeratinoSens

MUSST (or h-CLAT)

If both results are negative:

**NON-SENSITIZER**  
(High Sensitivity, 100%)

If positive:

**SENSITIZER**  
(High Specificity, 100%)

**Weight of evidence**  
**High Overall Accuracy (94%)**

Courtesy of BASF

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# Conclusions

- Well know animal and human models for identifying skin sensitisers
- Regulatory framework for hazard classification
- Significant progress on in vitro methods for hazard identification
- Challenge remains potency assessment
- OECD guidance will be valuable in bringing approaches together

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