

Health Effects of Dioxins

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Outline

- What are Dioxins
- Exposures to Dioxins
- Health Effects
 - -Animals
 - -Humans
- Dose Response
- Summary

Dioxins

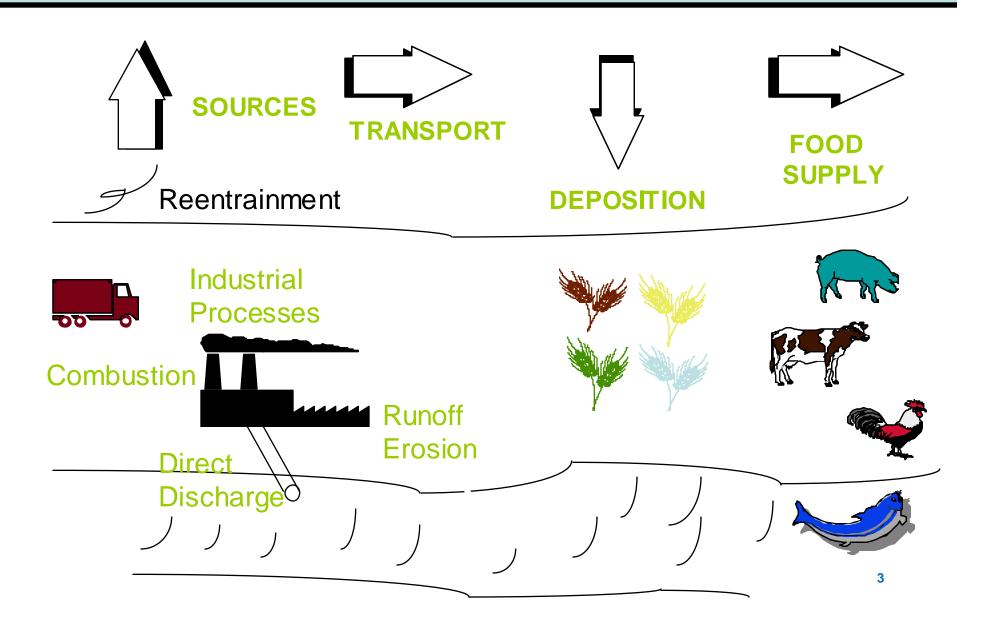
2,3,7,8-Tetrachlorodibenzo-p-dioxin "DIOXIN"

3,3',4,4',5-Pentachlorobiphenyl PCB 126

2,3,4,7,8-Pentachlorodibenzofuran

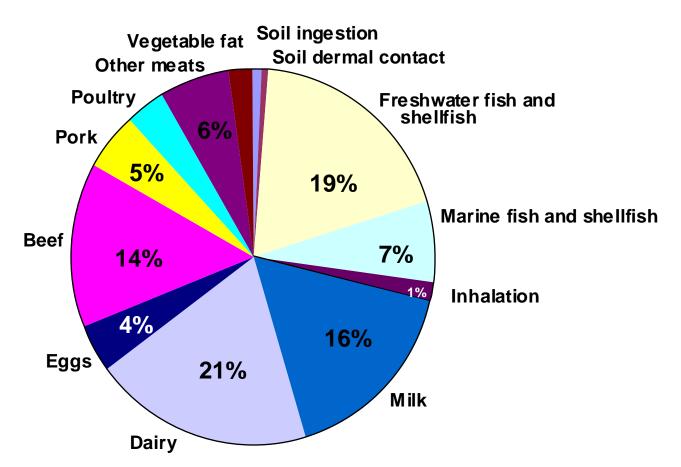
2,3,3',4,4'-Pentachlorobiphenyl PCB 118

Sources and Pathways to Human Exposures



U.S. Adult Average Daily Intake of CDDs/CDFs/Dioxin-Like PCBs

65 pg TEQ_{DFP}-WHO₉₈/day

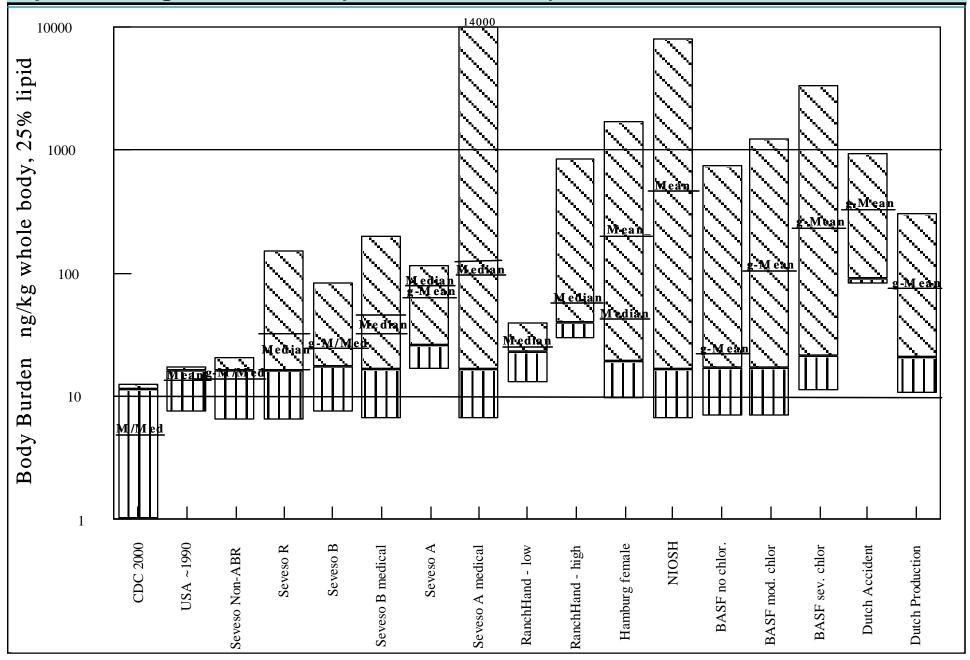


Dioxin Exposure Trends

→ Environmental levels:

- Peaked in late 60s/early 70s; declined since based on sediment data
- Decline also supported by Emissions Inventory which shows significant decrease from 1987 to 1995 (~80%)
- → Human tissue data suggest current levels are about 5 times lower than 1980 levels (55 to 10 pg TEQ_{DFP}/g lipid)

Peak Dioxin Body Burden Levels in Background Populations and Epidemiological Cohorts (Back-calculated)



- Hazard X Exposure = Risk
- Hazard inherent toxicity of chemical
- Exposure contact with the chemical
- Risk estimate of potential health effects

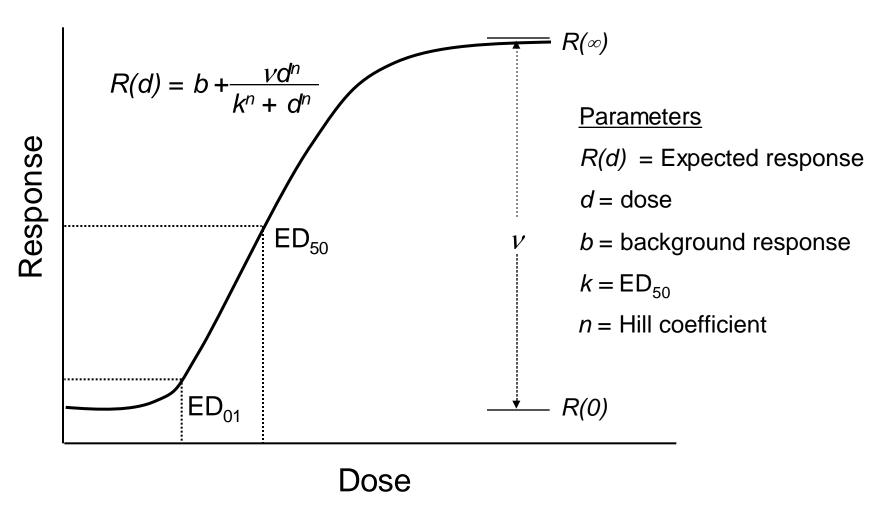
Evidence of Dioxin Toxicity

- Experimental Studies in Animals
 - Clear relationship between known exposure and response
 - Extrapolation to humans
- Epidemiological Studies in humans
 - Demonstrate Associations and sometimes causation
 - Extrapolation to low background exposures
 - Confounders sometimes difficult to control.

Extrapolation

- Animals
 - -Dose/Pharmacokinetics
 - -Pharmacodynamics What dioxin does
- Epidemiological Studies (Humans)
 - -Exposure Scenario
 - –Dose Response

Dose Response Relationship



Dioxin-like Compounds are Receptor Mediated Toxicants in Animals

→ Developmental Toxicity

Targets:

- Developing Immune System
- Developing Nervous System
- Developing Reproductive System
- Developing Bones
- → Immunotoxicity
- → Endocrine Effect
- → Chloracne
- → Cardiovascular
- → Cancer

Dioxins are Growth Dysregulators

- Growth
 - -Cell death
 - -Cell proliferation
 - -Cell differentiation
- Cancer
- Developmental toxicities
- Immunotoxicity
- Endocrine effects

Dioxins act through the Ah Receptor What do we know about the Ah Receptor

- Highly conserved across species
 - -Found in C. elegans though humans
 - Fish, clams, birds, mammals
- Member of PAS protein family
 - -Biosensors
 - Oxidative stress, light, circadian rthyms.
- Polymorhpisms
 - Binding affinity for TCDD ranges approximately 10 fold in humans

Margin of Exposure

- Metric for evaluation of safe or tolerable exposures to environmental contaminants.
- Does not apply uncertainty or safety factors,
- Does not provide any assumptions on the shape of the dose-response curves.
- Is not probabilistic.

Margin of Exposure

AnimalDose

HumanDose

Body Burdens Associated with Effects

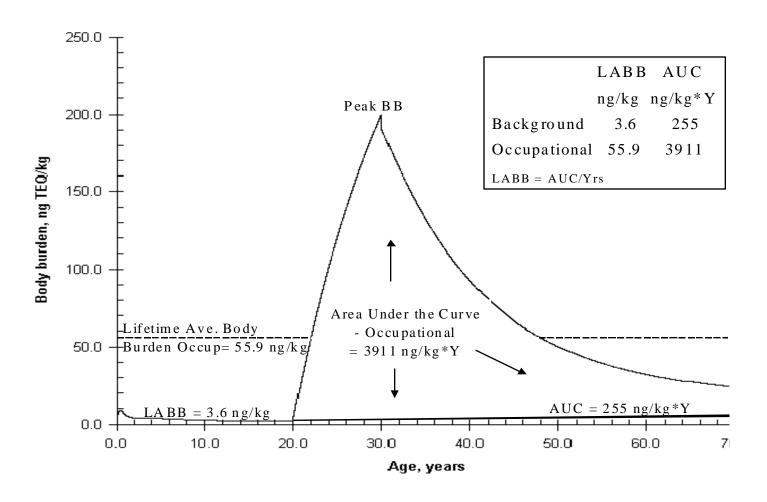
	Body Burden (ng/kg)	Margin of Exposure
ADVERSE EFFECTS		(Effect level/current av. US BB, 5ng/kg)
Developmental Neurotoxicity	22	4
Developmental reproductive toxicity	0.7 –42	0.1 - 8
Developmental immunotoxicity	50	10
Adult immunotoxicity	1.6 – 12	0.3 - 2
Endometriosis	22	4
Cancer	3.3 - 80	0.6 - 16
BIOCHEM. EFFECTS		
CYP1A1 induction	0.6 -33	0.1 - 7
CYP1A2 induction	2.1 - 83	0.4 - 17
Oxidative stress	10	2 16

Differences between animal and human exposures

- Animals
 - -Single acute exposure
 - Constant level of repeated exposure
 - Single route of exposure

- Humans
 - Exposure through multiple routes
 - -Exposure varies with age and occupational vs environmental exposures

Comparison of Lifetime Average Body Burden and Area under the Curve in Hypothetical Background and Occupational Scenarios



Dioxin-like Compounds are High Potency *Human* or *Likely* Human Carcinogens

TCDD → Characterized as a human carcinogenOthers → Likely to be carcinogenic

Based on:

- ◆ Unequivocal animal carcinogen
- ◆ Limited human information (epidemiologic/other)
- ◆ Mechanistic plausibility

Cancer potency increasing with focus on human studies

Note: In February 1997, the International Agency for Research on Cancer (IARC) classified 2,3,7,8-TCDD as a Category 1, "Known" human carcinogen; HHS/ROC proposed the same in 1999

Non-Cancer Effects Observed At or Near General Population Body Burden Levels

- Enzyme induction
- Immune system changes
- Developmental milestones
- Glucose tolerance/diabetes
- Hormone levels
- Others?

Generally considered to be adaptive changes, but potential to be adverse.

Summary and Challenges

- Continue and maintain the trend for lower emissions and lower exposures in the population
- Better characterize the source to exposure pathways in order to more efficiently decrease exposures
- Better understand biological basis of the actions of dioxins in order to predict adverse health effects of exposed populations.