



50+  
persons

Biodetection, Water

Mechanistic

Soil

PIs /  
Seniors

Bláha  
Hilscherová

Babica  
Sovadinová

Hofman  
Sáňka

PostDocs  
+experts

Novák / Bittner / Adamovský /  
Bláhová / Smutná / Rajasarkka

Labohá

Bielská  
Vašíčková

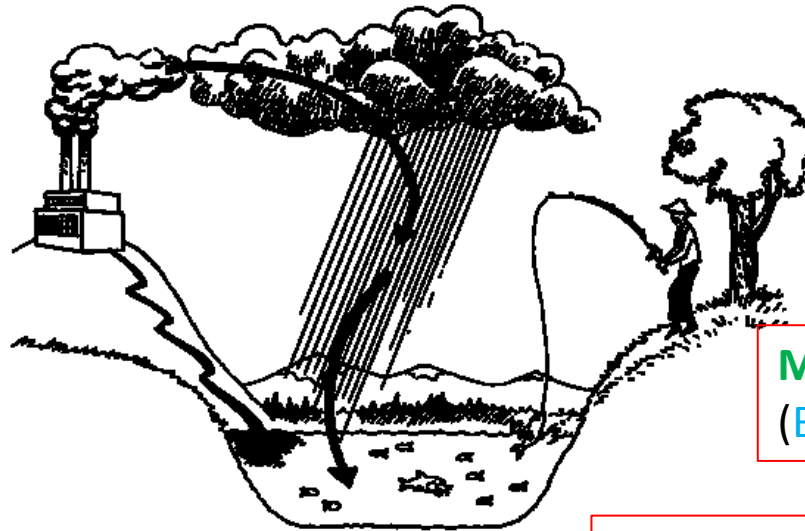
PhD  
students

30+

BSc +  
MSc.  
students

20+

# Ecotoxicology - areas and research questions



**Effect-based tools**  
in vitro and in vivo  
(Hilscherová, Bláha)

**Mechanistic toxicology**  
(Babica, Sovadinova)

**Biomarkers *in vivo***  
(Hilscherová, Bláha)

**Cyanobacterial blooms and  
their envi- and health risks**  
(Hilscherová, Bláha, Babica)

## Focus today 2016-11-03

**Envi technologies and  
risk assessment**  
(Bittner, Bláha, Babica)

**Soil ecotoxicology and  
environmental  
chemistry** (Hofman et al)

# Effect-based tools (EBTs) (KH, LB)

Funding: FP7 Solutions, GACR KH, GACR MS, TACR JK, NPU  
(proposals GACR GL, GACR JK)

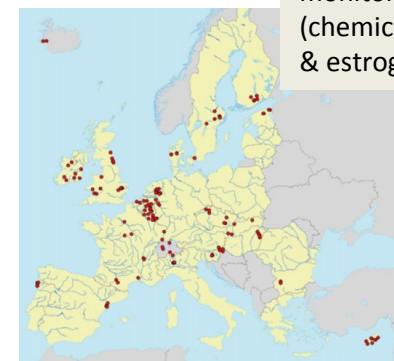
- **AOP (MoA)-based set of assays (bioanalytical detectors *in vitro*)** - toxic potencies of complex samples and individual compounds
- **In vivo battery of aquatic models** (bacteria, algae, invertebrates, fish embryo, frog embryo)
- Effect-directed analysis (**EDA**) and targeted **mixture** effect investigations
- Linked to detailed advanced chemical analyses – target indicated by bioassay, non-target for identification of unknowns (RECETOX, cooperation UFZ, EAWAG)
- Ready-to use assays (immobilized cells/biosensors) fast ready-to-use versions with high long-term stability and fast response

## Aquatic environment

- Mixture effects (contributions of natural and anthropogenic chems), emerging pollutants
- **AOPs** - Relation of *in vitro* to *in vivo* effects – mechanistic studies
  - e.g. retinoids in early development and neurotoxicity (fish and frog embryos)
- EBTs applications with passive sampling (dosing)

## Assessment of mixtures relevant for human exposure

- Outdoor air and **indoor samples**
  - focus on emerging pollutants
- Mixtures from **food** exposure



Pan-EU  
monitoring  
(chemical  
& estrogenicity)

# Biomarkers *in vivo* (KH, LB)

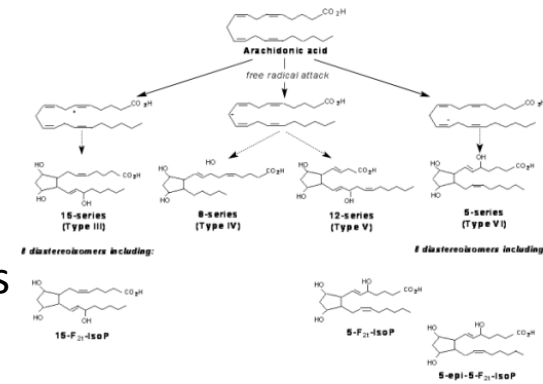
Funding: NPU, RMU, HBM4EU

## HPLC/MS/MS and biochemical techniques

- optimized towards minimal sample consumption
- e.g. GSH/GSSG, OH-dG, lipids (isoprostanes, MDA)

## Previous studies

- cyanobacterial and multistressor exposure to aquatic organisms (sublethal endpoints in *in vivo* studies – collaborations with Veterinary U)
- collaboration – effects of **inhalation exposure to nanoparticles**

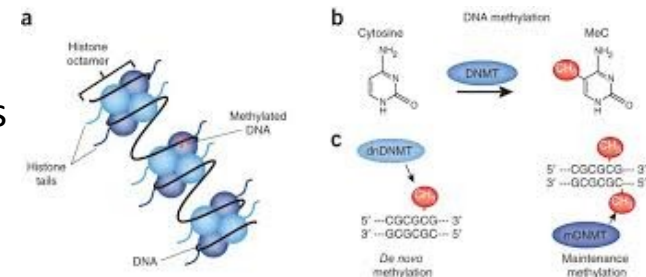


## Gene expressions – effects on specific pathways (towards **AOP** key events)

- e.g. thyroid-related genes, estrogen-related genes, retinoid-related genes
- **moving towards omics profiling**

## Epigenetics

- Cellomics - phenotype/functional responses
- DNA-methylations of specific target genes
- Applications
  - *in vivo*: human cohort study, ecotox models
  - *in vitro*: mechanistic investigations



# Cyanobacterial blooms and their envi- and health risks (KH, LB, PB)

Funding: GACR KH, GACR MS,  
GACR LB/PB, GACR OA

One point of view:

## Focus on environment, character of pollution in reservoirs and ponds

- Toxicity/sublethal effects of the individual bioactive metabolites produced by organisms from water blooms and their mixtures to affected organisms
- Co-occurrence with other contaminants – possible interactions in effects

Another point of view:

## Identification of new bioactive molecules

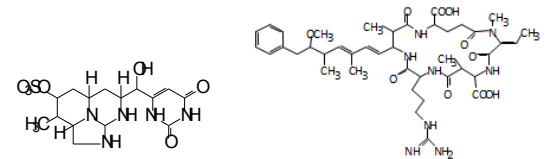
- Production of bioactive secondary metabolites by different species
- Identification through EDA



## In Vitro MoA Toxicology

- New targets and mechanisms of well-recognized toxins (MCs, CYN, cyanoLPS)
  - Immunotoxicity
    - Effects on **MΦ**
    - 1x postdoc, 1x PhD, GACR postdoc, collab. w/ IBP ASCR
  - Effects on **TLR & Intestinal cells**
    - 1x postdoc, collab. w/ IBP ASCR, GACR proposal pending
  - Effects on **neuronal cells**
    - human iNSC, collab. w/ Prof. Kang, Seoul Natl U
    - MCSA proposal in preparation
- Understudied but relevant organs & tissues
  - Testicular cells, lung cells, kidney (future projects)

## Environmental occurrence & fate, biotransformation



# Mechanistic toxicology (PB, IS)

## Increasing relevance of in vitro models

- Non-cancer cell lines (**stem cells**) → GJIC capable
- Microenvironment → **3D cultures**, co-cultures

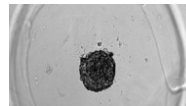
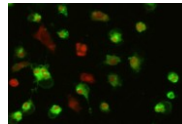
## Effects of chemicals on tissue homeostasis

- Proliferation, Cell survival (Apoptosis/Necrosis), Differentiation, In Vitro Neoplastic Transformation
- Gap junctional intercellular communication, nongenomic signaling
- The role of progenitor and stem cells in (toxico)pathologies



## New methods & endpoints

- (Semi-) **High Content Imaging/Analysis**
- GJIC evaluation
- 3D cultures - hepatospheroids
- apoptosis/necrosis, cell cycle, genotox



## Metabolic markers

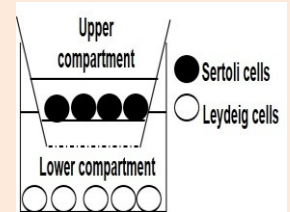
- **In Vitro Toxicokinetics & IVIVE**

## Liver progenitor and adult stem cells

- Collab. w/ Prof. Trosko, Upham, MSU
- Connexin/pannexin (hemi)channels (collab. w/ Prof. Vinken, VUB)
- Cyanotoxins – GACR project

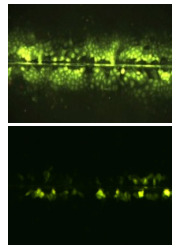
## Somatic testicular cells – Leydig/Sertoli

- Effects of contaminants on male fertility?



## Bronchial/lung cells

- Chronic respiratory diseases, inflammation
- Indoor/Outdoor Air Contaminants

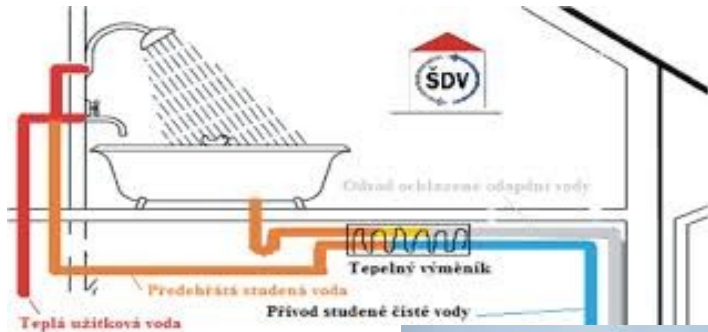


## Target in cancer prevention / therapy?

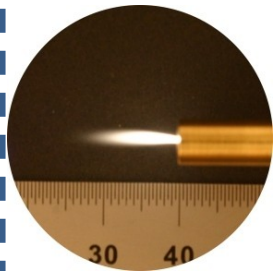
- (Dietary) chemopreventive agents
- Anticancer metabolites from cyanobacteria (collab. w/ Dr. Hrouzek, Algatech)
- nsPEF (collab. w/ Prof. Kolb, INP Greifswald)

# Envi technologies (MB, PB, LB)

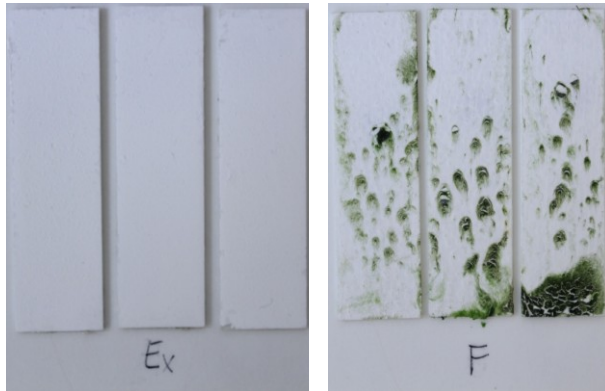
## COMBATING BIOFOULING



# Envi technologies (MB, PB, LB)



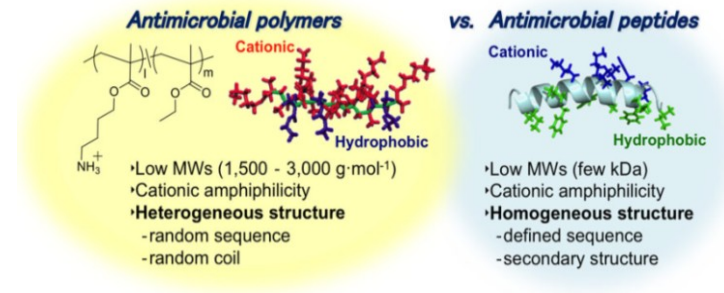
**Anti-biofouling:**  
surface plasma modifications  
coop with MUNI Physics dept



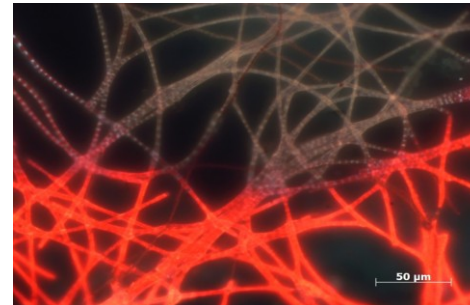
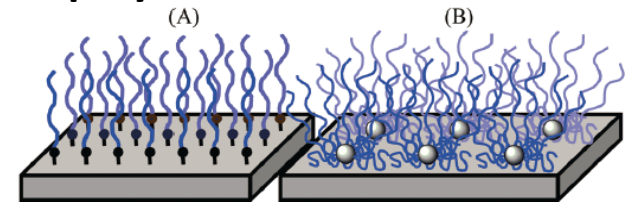
## New polymer materials for control of aquatic microorganisms

- biomedical => environmental applications?
- solutions/suspensions, antifouling
- Prof. Kuroda, UMICH, Prof. Ando, NAIST

## Biomimetic polymers



## Star-shaped polymers

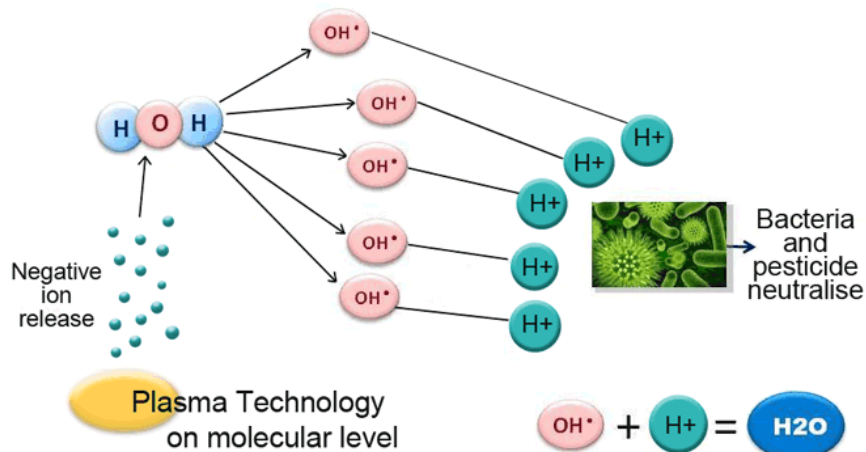
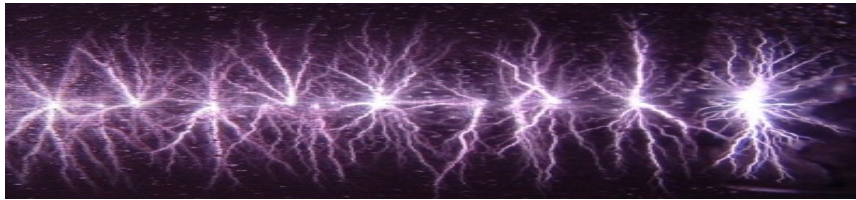




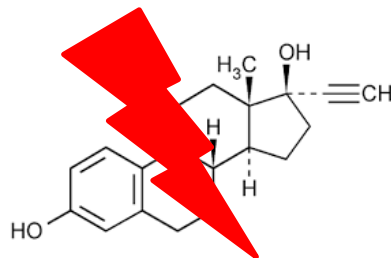
# Envi technologies (MB, PB, LB)

## Plasma treatment for water purification (INP Greifswald, DE)

\* ITN NaToxAq



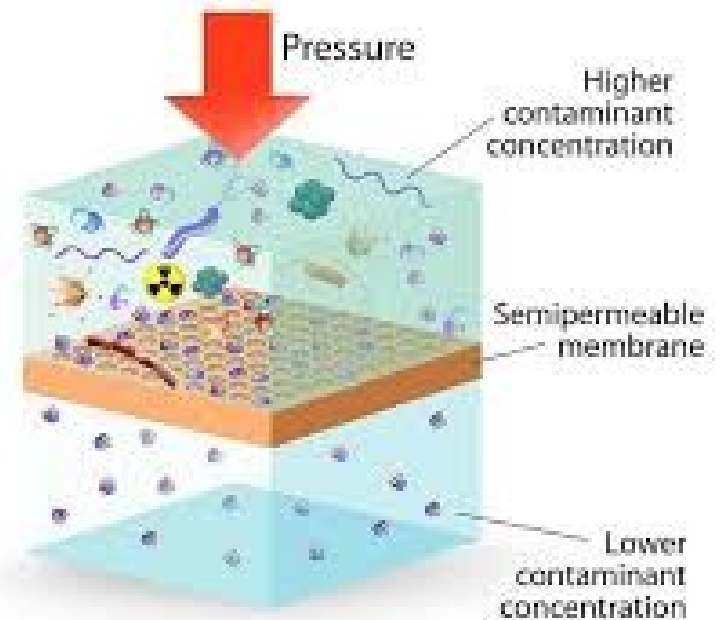
REMOVAL OF  
ENDOCRINE  
DISRUPTERS



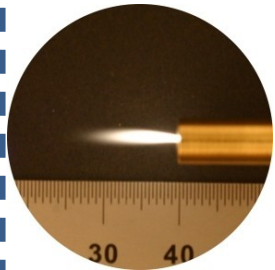
## Reverse osmosis applications

- Industry (ASIO Ltd) cooperation
- **Toxicant preconcentrations** for instrumental and bioassay applications

## REVERSE OSMOSIS



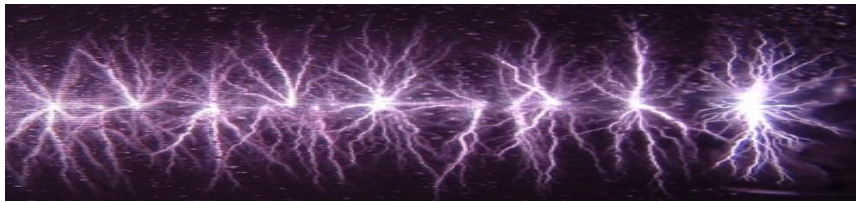
# Envi technologies (MB, PB, LB)



**Anti-biofouling:**  
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## Plasma treatment for water purification (INP Greifswald, DE)

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## Occupational risks

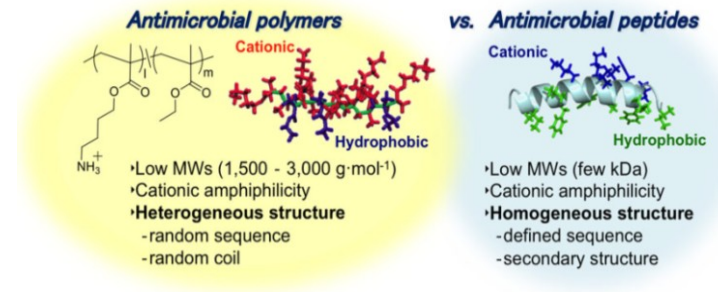
### antineoplastics and their management

- contracted research w/hospitals
- CP, 5PU/FBAL, cisPt, oxalyPt, total Pt

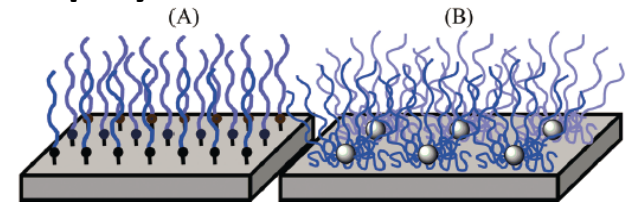
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RESEARCH CENTRE  
FOR TOXIC COMPOUNDS  
IN THE ENVIRONMENT (RECETOX)

[www.recetox.cz](http://www.recetox.cz)



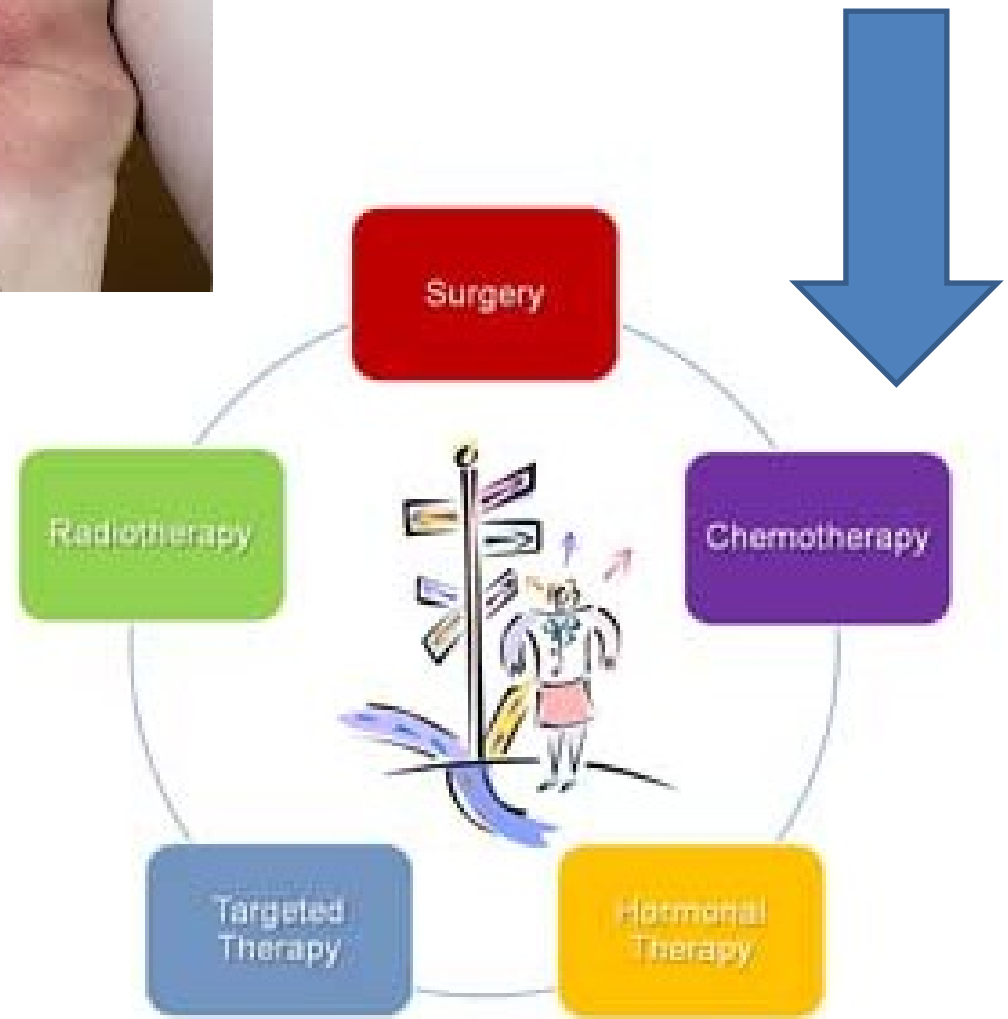
# Expozice a zdravotní rizika cytostatik pro pracovníky nemocnic

Luděk Bláha, Lenka Doležalová, Šárka Kozáková,  
Jan Kuta, Lucie Bláhová, Pavel Odráška

RECETOX, Přírodovědecká fakulta MU, Brno  
Masarykův onkologický ústav, Brno



[www.cytostatika.cz](http://www.cytostatika.cz)







# Proč studovat rizika protinádových léčiv?

- **Stále rostoucí spotřeba**
  - Více pacientů s nádory, časnější diagnostika
  - Více protokolů / kombinací
    - Příklad – MOÚ počty příprav 2010:23000 vs 2015:38000
- **Primární cíl – bezpečnost pacienta**
  - (pre-)klinické testy / nežádoucí účinky
  - QA/QC v přípravě a podávání léčiv, mikrobiologická bezpečnost atd.
- **Bezpečnost pracovníků ... ?**
  - lékárníci, sestry, lékaři, sanitářky, uklízečky
  - menší priorita a pozornost

# Nebezpečnost – karcinogenita (13 terapií = IARC 1)

IARC – WHO INTERNATIONAL AGENCY FOR RESEARCH ON CANCER

[www.iarc.fr](http://www.iarc.fr)

## Group 1 („Carcinogenic to humans“)

## Group 2A („Probably carcinogenic“)

Arsenic trioxide

Azothioprin

Chlorambucil

Chlomaphazine

Cyclophosphamide

Myleran

Melphalan

Semustine

Tamoxifen

Thiotepa

Treosulfan

Mustargen-Oncovin-Procarbazine-Pednisone (MOPP)

Etoposide-Cisplatin-Bleomycin (ECB)

Azacitidine

BCNU

CCNU

Chlorozolocin

Cisplatin

Doxorubicin HCL

N-Ethyl-N-Nitrosourea

Etoposide

Mechlorethamine HCL

N-Methyl-nitrosourea

Procarbazine HCL

Teniposide



# Zdravotní účinky při vysokých (terapeutických) dávkách

## REPRODUKČNÍ VÝVOJOVÁ

toxicta

toxicta (embryotoxicta, teratogenita)

## US Food & Drug Administration (FDA)

kategorizace nebezpečnosti léčiv pro těhotenství

United States FDA Pharmaceutical Pregnancy Categories	
<b>Pregnancy Category A</b>	Adequate and well-controlled human studies have failed to demonstrate a risk to the fetus in the first trimester of pregnancy (and there is no evidence of risk in later trimesters).
<b>Pregnancy Category B</b>	Animal reproduction studies have failed to demonstrate a risk to the fetus and there are no adequate and well-controlled studies in pregnant women OR Animal studies have shown an adverse effect, but adequate and well-controlled studies in pregnant women have failed to demonstrate a risk to the fetus in any trimester.
<b>Pregnancy Category C</b>	Animal reproduction studies have shown an adverse effect on the fetus and there are no adequate and well-controlled studies in humans, but potential benefits may warrant use of the drug in pregnant women despite potential risks.
<b>Pregnancy Category D</b>	There is positive evidence of human fetal risk based on adverse reaction data from investigational or marketing experience or studies in humans, but potential benefits may warrant use of the drug in pregnant women despite potential risks.
<b>Pregnancy Category X</b>	Studies in animals or humans have demonstrated fetal abnormalities and/or there is positive evidence of human fetal risk based on adverse reaction data from investigational or marketing experience, and the risks involved in use of the drug in pregnant women clearly outweigh potential benefits.

**US FDA**  
**45 léčiv**  
**kategorie „D“**

Drug	Pregnancy Category	Drug	Pregnancy Category
Arsenic trioxide	D	Imatinib mesylate	D
Azathioprine	D	Interferon alfa-2b	X
Bleomycin	D	Irinotecan HCL	D
Capecitabine	D	Leflunomide	X
Carboplatin	D	Lomustine	D
Carmustine	D	Mechlorethamine HCL	D
Chlorambucil	D	Melphalan	D
Cisplatin	D	Mercaptopurine	D
Cladribine	D	Methotrexate	X
Cyclophosphamide	D	Mitoxantrone HCL	D
Cytarabine	D	Oxaliplatin	D
Dactinomycin	D	Paclitaxel	D
Daunorubicin HCL	D	Pipobroman	D
Docetaxel	D	Procarbazine	D
Doxorubicin HCL	D	Tamoxilin	D
Epirubicin	D	Temozolomide	D
Etoposide	D	Teniposide	D
Floxuridine	D	Thalidomide	X
Fludarabine	D	Thioguanine	D
Fluorouracil	D	Thiotepa	D
Gemcitabine	D	Topotecan	D
Hydroxyurea	D	Tositumomab	X
Ibritumomab tiuxetan	D	Vinblastine sulfate	D
Idarubicin	D	Vincristine sulfate	D
Ifosfamide	D	Vinorelbine tertrate	D

# Rizika pro pracovníky ?

## Desítky různých studií ... ne vždy konzistentní výsledky

**METAANALYTICKÁ STUDIE** - Dranitsaris et al. Are health care providers who work with cancer drugs at an increased risk for toxic events? Systematic review and metaanalysis of the literature. J Oncol Pharm Practice 2005; 11: 69-78

### ➤ Rizika **NEVÝZNAMNÁ**

- Vývojové malformace
- Mrtví novorozenci
- Akutní účinky
- Přímé riziko karcinogenity

### ➤ **VYSOCE VÝZNAMNÉ RIZIKO**

Spontánní potraty

RR = 1,46 95% CI = (1,11 – 1,92)

Skov et al. 1992

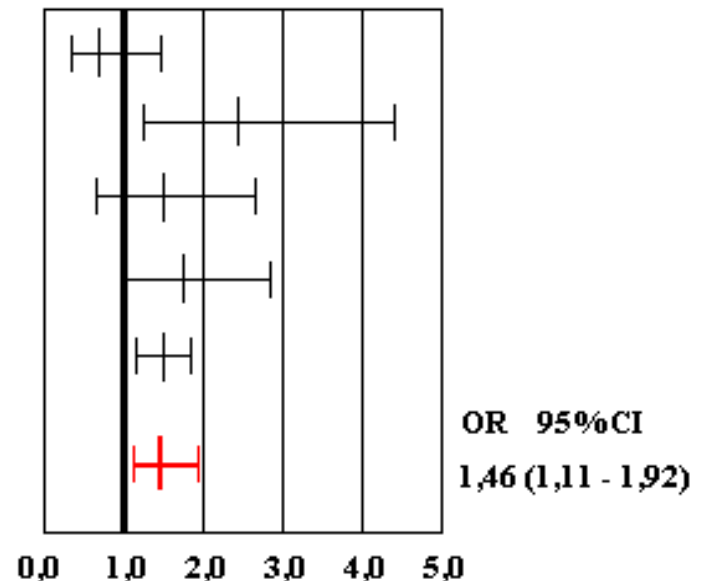
Selevan et al. 1985

Peelen et al. 1999

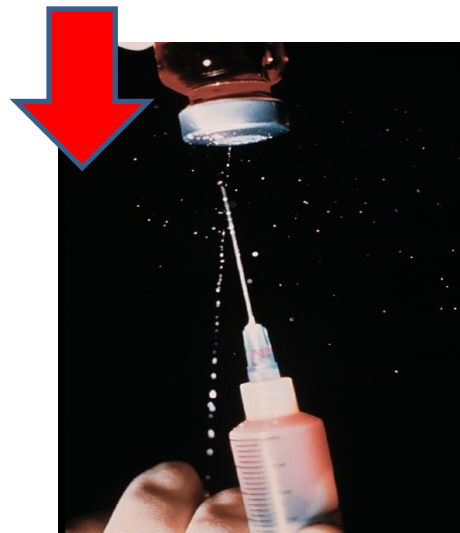
Stucker et al. 1990

Valanis et al. 1999

Pooled OR



# Zdroje expozice cytostatikům



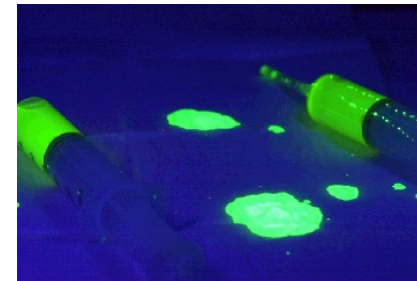
# Expoziční cesty a monitoring

- **Vzduch:**

- Aspirace léčiv – plynná fáze, vázány na částice/aerosoly
- **Výsledky projektu CYTO: malý význam**

- **Povrchy – kontaminace rukou**

- Přímý vstup přes kůži
- Přenos na potraviny (Hands → Mouth)



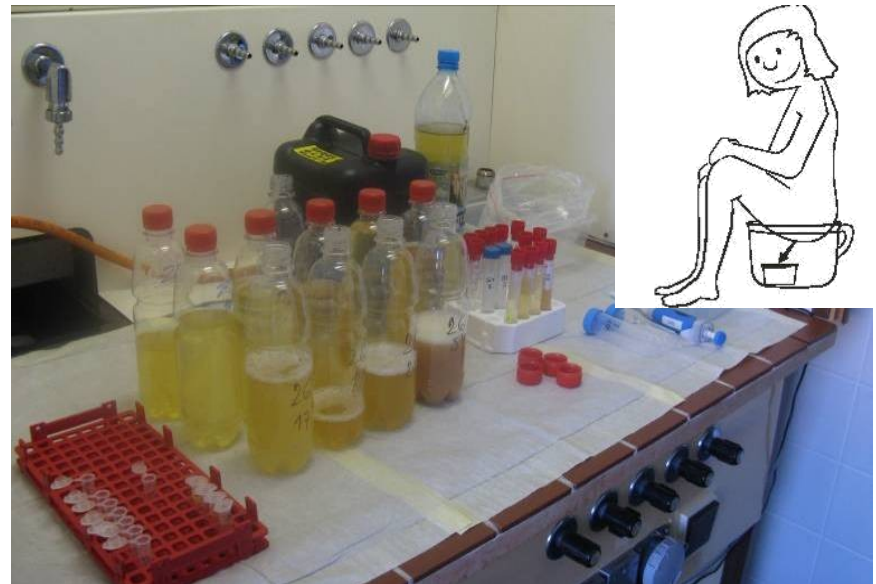
## Design monitoringu: POVRCHY

- Lékárny (přípravna, sklady, kanceláře atd.)
- Nemocniční prostory (stacionáře, lůžková odd.)
  - „Stoly“ (= stoly + židle + police)
  - „Podlahy“
  - „Další“ (telefony, klávesnice, madla u lednice...)

# BIOMONITORING

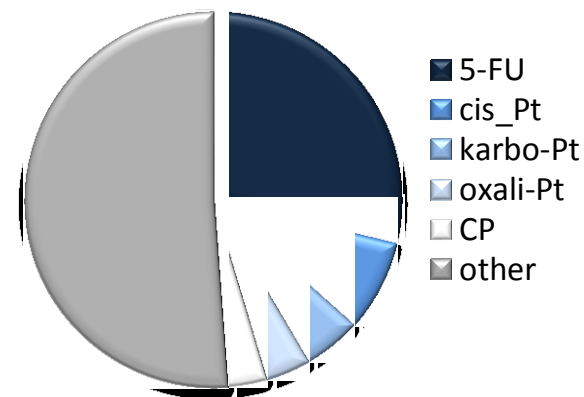
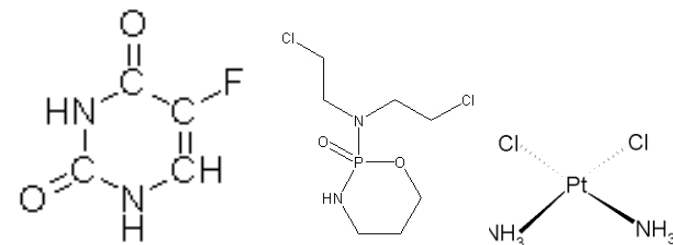
## Biomonitoring

- oplachy rukou
- směsné vzorky moče reprezentující 24-hod exkreci

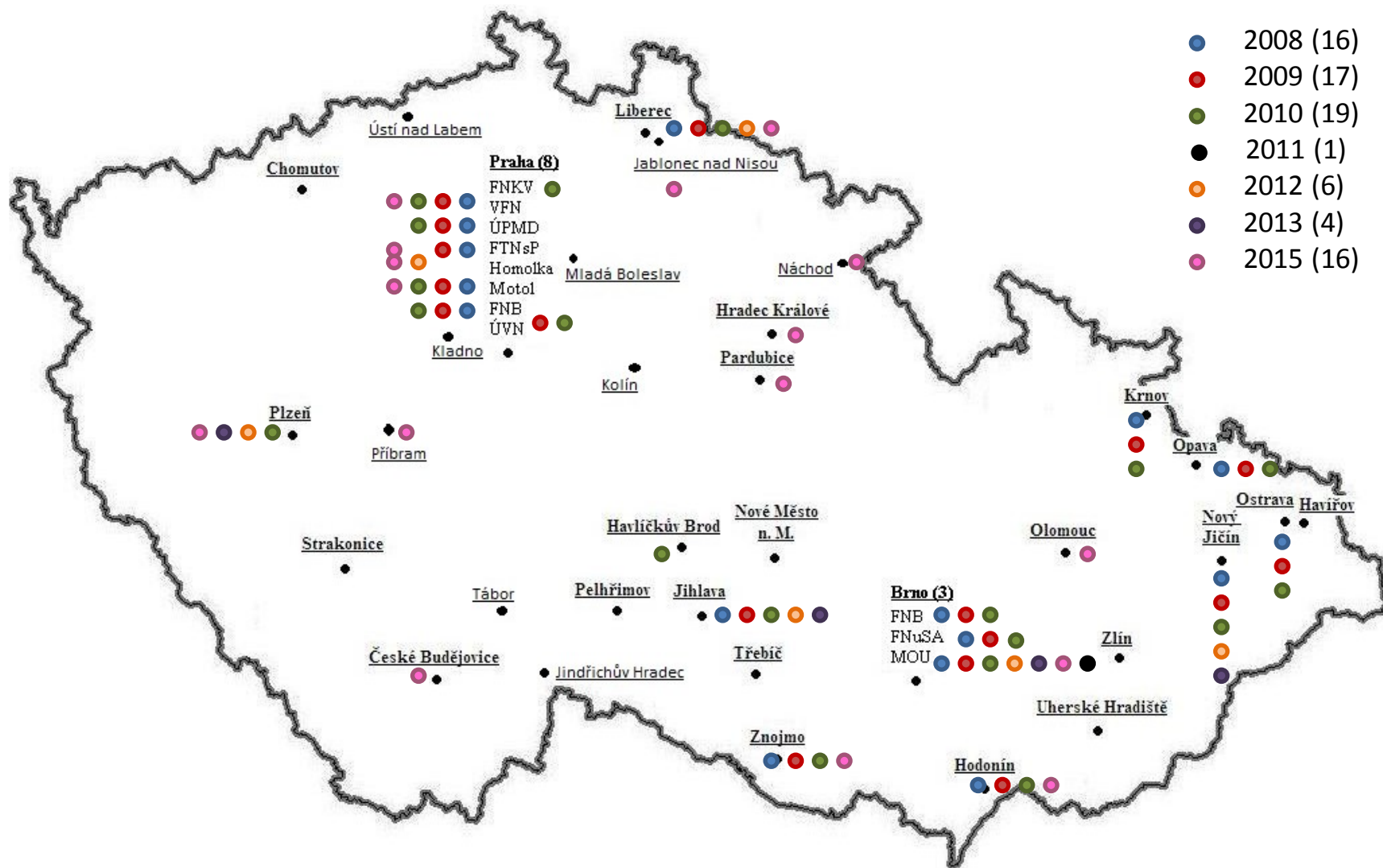


# Metody

- **Standardizované protokoly**
  - Video / Zaškolování pracovníků v nemocnicích
  - [www.cytostatika.cz](http://www.cytostatika.cz)
- **Vzorkování – povrchové stěry**
- **Extrakce a analýzy**
  - LC-MS/MS
    - Cyklofosamid (CP)
    - 5-Fluorouracil (FU) **nově od 2015**
  - ICP-MS
    - Pt (platinová cytostatika)
- **Standardní protokoly, databáze**



# Zapojené nemocnice v ČR





# Výsledky – kontaminace povrchů 2008-2015

	Cyklofosfamid pg/cm <sup>2</sup>			Platina pg/cm <sup>2</sup>			5-Fluorouracil pg/cm <sup>2</sup>			
	N/Npos.	Median	Min/Max	N/Npos.	Median	Min/Max	N/Npos.	Median	Min/Max	
<b>N=840</b>	644 / 321	<1	<1 / 33853	663 / 413	1.1	<0.2 / 7343	96 / 53	13.4	<7 / 234905	
<b>Lékárny</b>	<b>Přípravna</b>									
	Stůl	135 / 83	7.1	<1 / <b>33853</b>	144 / 97	1.3	<0.2 / 5333	29 / 20	16.1	<7 / <b>234905</b>
	Podlaha	89 / 57	5.8	<1 / 638	72 / 47	0.9	<0.2 / 84	10 / 5	3.6	<7 / 564
	Kliky, telefony, klávesnice	89 / 39	2.2	<1 / 4656	63 / 43	1.5	<0.2 / 450	3 / 1	<7	<7 / 61
	<b>Sklad léčiv</b>									
	Stůl	105 / 29	<1	<1 / 1466	95 / 40	<0.2	<0.2 / <b>7343</b>	3 / 0	<7	<7 / <7
Podlaha	79 / 23	<1	<1 / 235	61 / 28	<0.2	<0.2 / 57	3 / 1	<7	<7 / 25	
Kliky, telefony, klávesnice	35 / 11	<1	<1 / 1184	38 / 22	0.8	<0.2 / 23	3 / 1	<7	<7 / 15	
<b>Nemocniční prostory</b>	<b>Denní stacionář</b>									
	Stůl	16 / 12	15.5	<1 / 1324	9 / 9	2.6	1.1 / 96	4 / 3	<b>135.7</b>	<7 / 262
	Podlaha	34 / 32	<b>101.9</b>	<1 / 3244	62 / 59	<b>47.0</b>	<0.2 / 5390	9 / 8	<b>189.7</b>	<7 / 775
	WC	13 / 12	4.5	<1 / 144	13 / 13	<b>673.7</b>	0.5 / 4220	6 / 3	6.7	<7 / 220
	<b>Sesterny</b>									
	Stůl	29 / 16	2.2	<1 / 221	55 / 23	<0.2	<0.2 / 227	14 / 11	<b>119.2</b>	<7 / 49510
<b>Kancelářské prostory</b>										
Kliky, telefony, klávesnice	29 / 6	<1	<1 / 142	20 / 4	<0.2	<0.2 / 3.7	11 / 1	<7	<7 / 38	

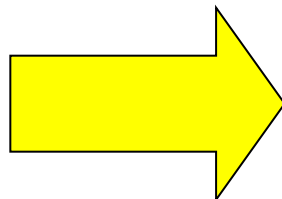
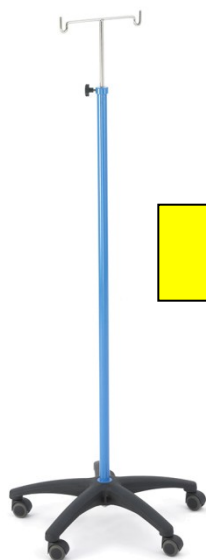
# Výsledky – podzim 2016

**Tabulka 3:** Kontaminace zdravotnických zařízení s vyšším počtem příprav CL (více než 1500 příprav za měsíc) v ČR - **kampaň podzim 2016**. Sumární statistiky pro Pt, CP a FU - analýzy stěrů pracovního prostředí (přípravny, administrativní část a nemocniční prostory) u celkem **8 zúčastněných zdravotnických zařízení**.

\*- hodnota pod limitem detekce metody

	<b>Platina pg/cm<sup>2</sup></b>	<b>Cyklofosfamid pg/cm<sup>2</sup></b>	<b>5-fluorouracil pg/cm<sup>2</sup></b>
<b>Lékárna - Přípravna (Izolátor, Materiálová propust', Přípravna CL, Balení)</b>			
Analyzované vzorky (počet, N)	18	32	32
Median (pg/cm <sup>2</sup> )	0.81	18.2	12.5
Průměr (pg/cm <sup>2</sup> )	2.79	138.6	89.5
Maximum (pg/cm <sup>2</sup> )	18.9	1521	983
<b>Administrativní část</b>			
Analyzované vzorky (počet, N)	8	11	11
Median (pg/cm <sup>2</sup> )	<0.17*	<1.1*	<6.9*
Průměr (pg/cm <sup>2</sup> )	<0.17	1.11	<6.9
Maximum (pg/cm <sup>2</sup> )	<0.17	8.63	<6.9
<b>Nemocnice - (Stacionář, Lůžková část, WC, Pracovní prostory - Sesterny)</b>			
Analyzované vzorky (počet, N)	30	31	31
Median (pg/cm <sup>2</sup> )	0.88	7.73	18.7
Průměr (pg/cm <sup>2</sup> )	153.6	1335	145.1
Maximum (pg/cm <sup>2</sup> )	2825	29695	1681

# Příklad – řízení rizik



Držáky na zdi



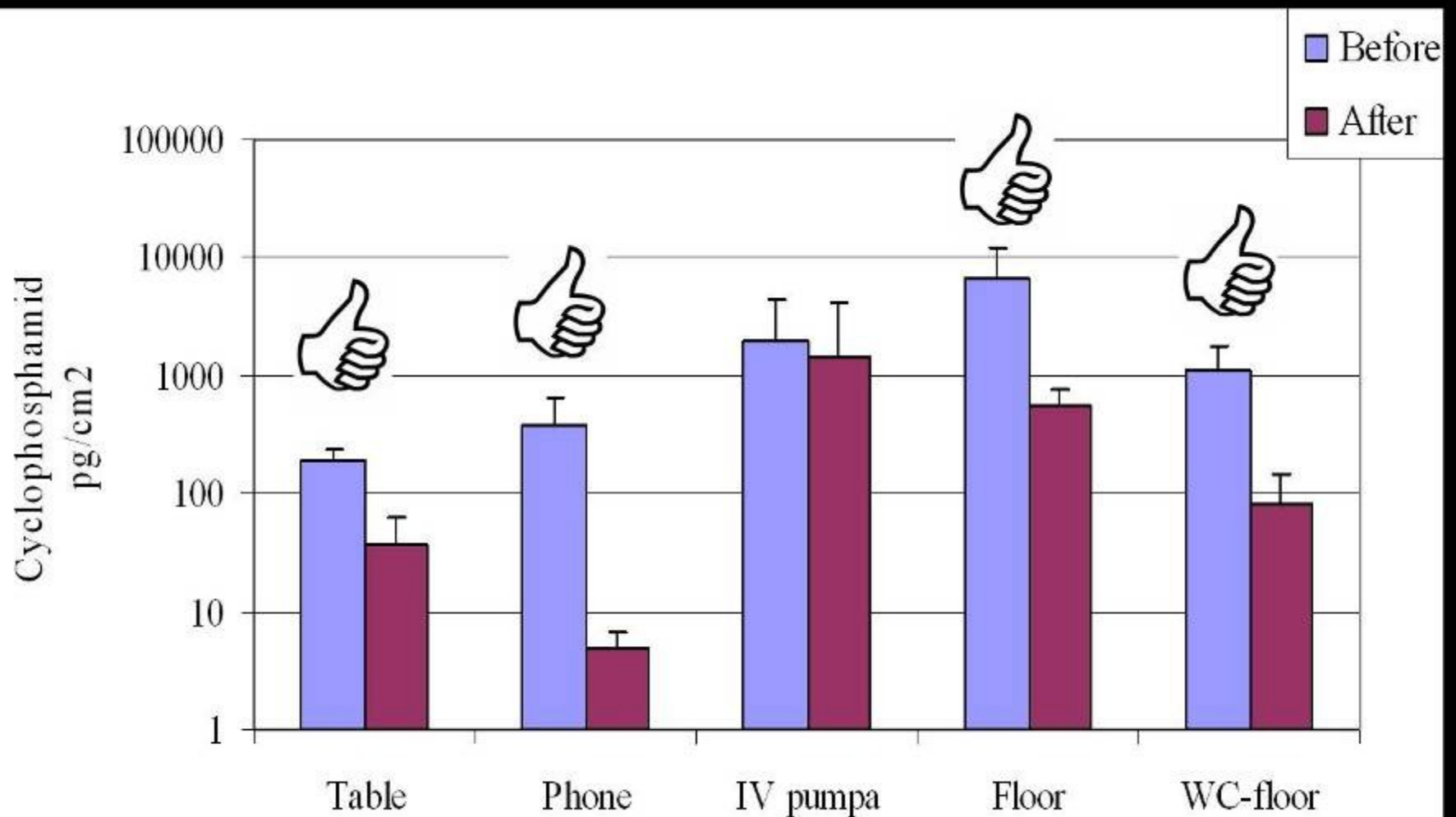
Více kanálové sety



Toalety se samočisticím sedátkem

# Příklad – cyklofosfamid

(before / after – před / po zavedení nových postupů)



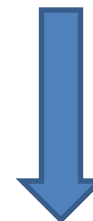
# Doporučené limity (Treshold Guidance Values)

Bouwman-Boer et al. „Occupational Safety and Health“ in *Practical Pharmaceutics* 2015

TGV (percentile)	5-fluorouracil pg/cm <sup>2</sup>	Platinum pg/cm <sup>2</sup>	Cyclophosphamide pg/cm <sup>2</sup>	References
75th	30	4		Schierl et al. 2009
90th	100		100	Kiffmeyer et al. 2013
90th			100	Sessink 2011
<b>75th</b>	<b>38 (provisional)</b> <b>(27%&gt;TGV; N=96; 2015)</b>	<b>12</b> <b>(8%&gt;TGV;N=663)</b>	<b>67</b> <b>(20%&gt;TGV; N=644)</b>	<b>CYTO 2006-2010</b> <b>MONITORING 2008-</b> <b>2015</b>

Dr. Paul Sessink (Exposure Control B.V., NL) [www.exposurecontrol.nl](http://www.exposurecontrol.nl)

**Health based (cancer) surface contamination limits for cyclophosphamide in hospitals**



**POVRCHY**

	Strive risk level			Prohibitory risk level
Urine CP (µg/24 hr)	< 0.02	0.02 – 0.2	0.2 – 2	> 2
Contamination CP (ng/cm <sup>2</sup> )	< 0.1	0.1 – 1	1.0 – 10	> 10
Action	No	Yes At short notice	Yes Immediately	Yes Stop working
Monitoring	Now and then	Yes	Yes	Yes

# Shrnutí

- Dlouhodobě běžící výzkum expozice cytostatikům v lékárnách a nemocničních prostorách od roku 2008
  - Analýzy nejběžnějších a široce používaných cytostatik: CP, Pt, FU
- Samotná realizace monitoringu vede ke zlepšení situace a snížení expozic na sledovaných pracovištích – pokles 2008-2015
  - Specifická opatření a změny režimu – další zlepšení situace
- Doporučené limity (Technical Guidance Values) byly odvozeny s využitím statistických metod a umožňují řídicím pracovníkům v nemocnicích sledovat kvalitu práce a úroveň kontaminace
- **Hlavní otevřené otázky**
  - Léárny (s dobrým povědomím o problematice a rizicích) jsou méně kontaminovány než další místa v nemocnicích
  - Sestry na denních stacionářích – více exponovaná skupina
  - Sanitářky, údržba, úklid - často s horším proškolením a menším povědomím o rizicích - jsou nejvíce exponovanou skupinou (např. velmi vysoké koncentrace v prostorách WC).

# Current issues in ECOTOXICOLOGY

Examples

# PHARMACEUTICALS



R&D and Manufacturing

Storage ↓ Transport



Distribution

Storage ↓ Transport



Consumption

Storage ↓ Transport

Waste management



Manufacturing waste

Possible releases to the environment



# Environmental Life-Cycle of Pharmaceuticals

created by CG Daughton  
US EPA, Las Vegas  
2 December 2006

- transformation/degradation
- mineralization
- stewardship opportunities

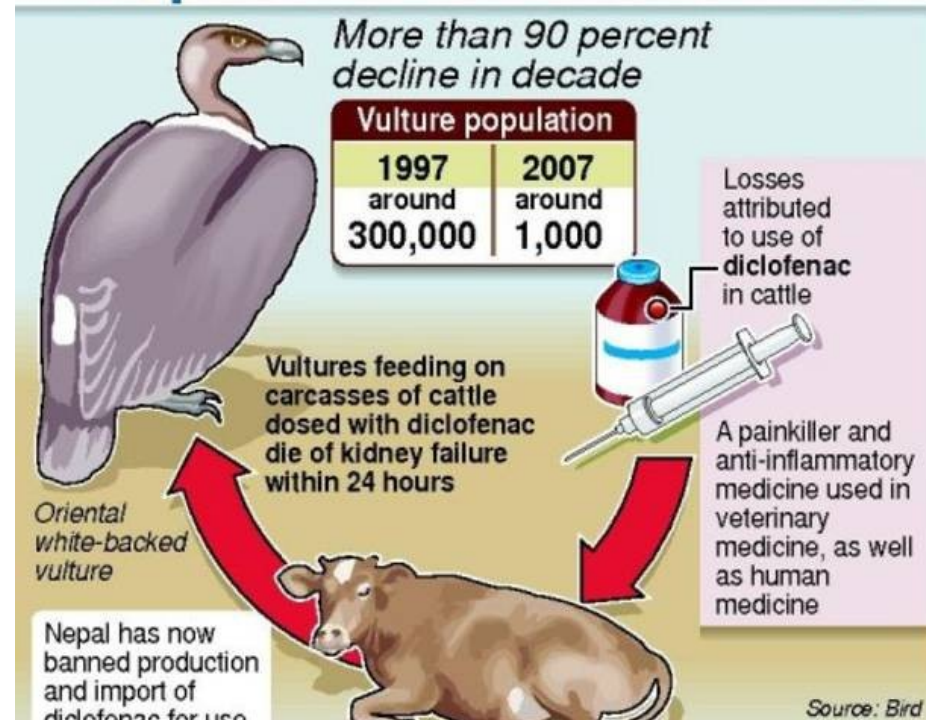
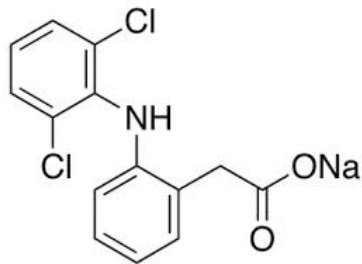


Oral & Dermal

# Example 1 - DICLOFENAC

## Unexpected effects at NON-TARGET species

- **nephrotoxicity** at vultures
- Relevant also in EU (ESP, EL,CY)



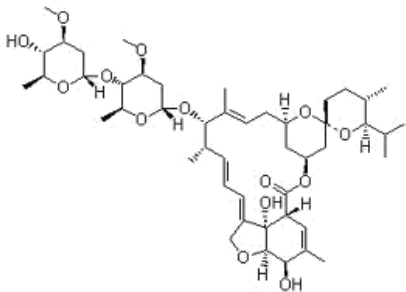
# Example 2 – AVERMECTIN-like antiparasitics

**Moxidectin** – used e.g. in home „spot on” products



**Ivermectin** – antiparasitics in large herds

- Used **2-times per season** per sheep/cow
- **Kills 100% parasites** in sheep
- Released in dung - **kills 80-90% larvae of dung flies**
- High concentrations in dung (released 2 days post application)
- **Persistent in the soil** (half-life 30 days)
- Can be washed into adjacent streams (highly toxic to water insects)

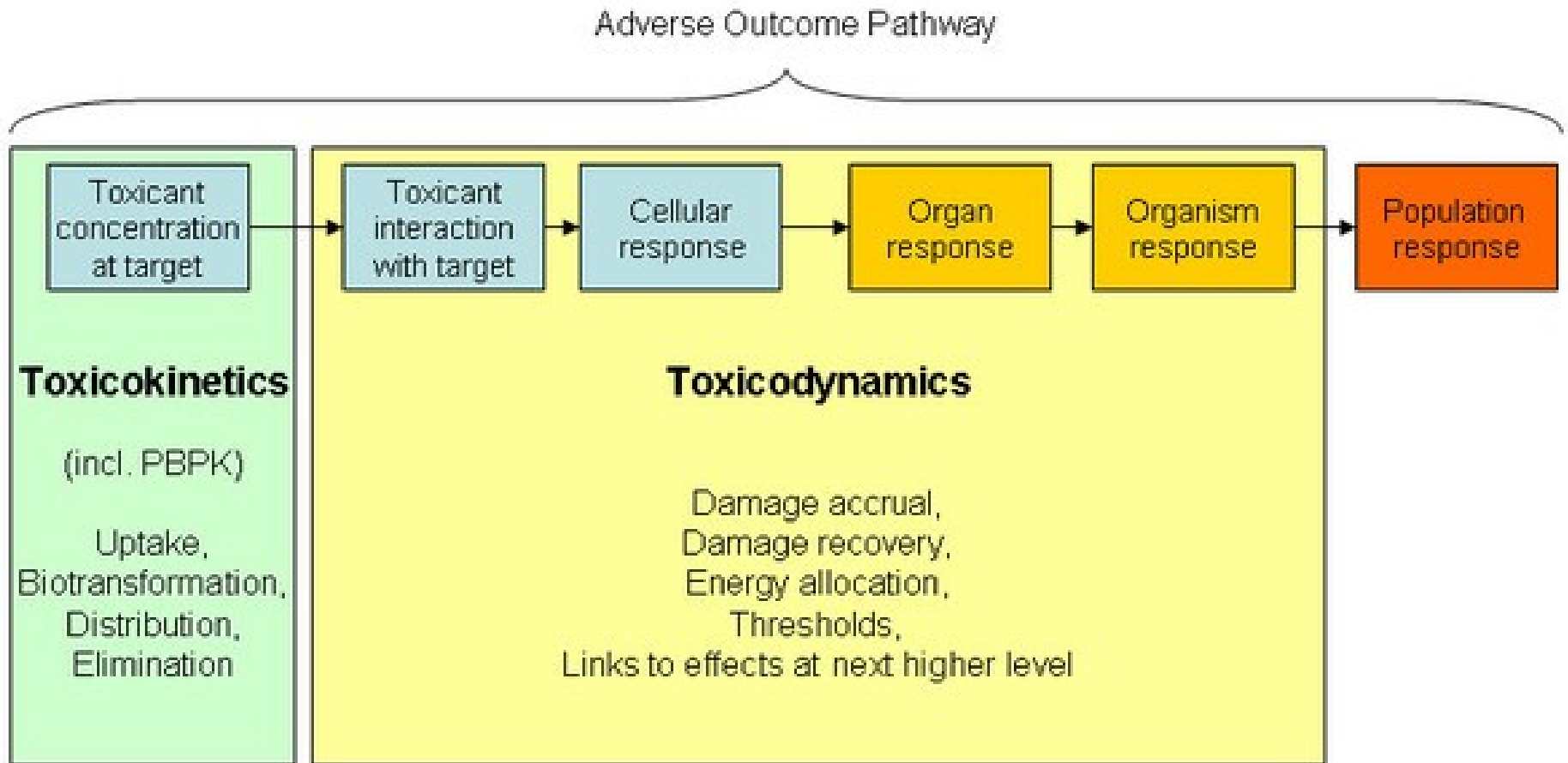


# COMPUTATIONAL (ECO)TOXICOLOGY

# Adverse outcome pathways

... and its modelling

**Key is to understand the mechanisms at low levels of organization**



## Computational Toxicology Research

Contact Us

You are here: [EPA Home](#) » [Research & Development](#) » [CompTox](#) » [ToxCast™](#)

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# ToxCast™

## Screening Chemicals to Predict Toxicity Faster and Better

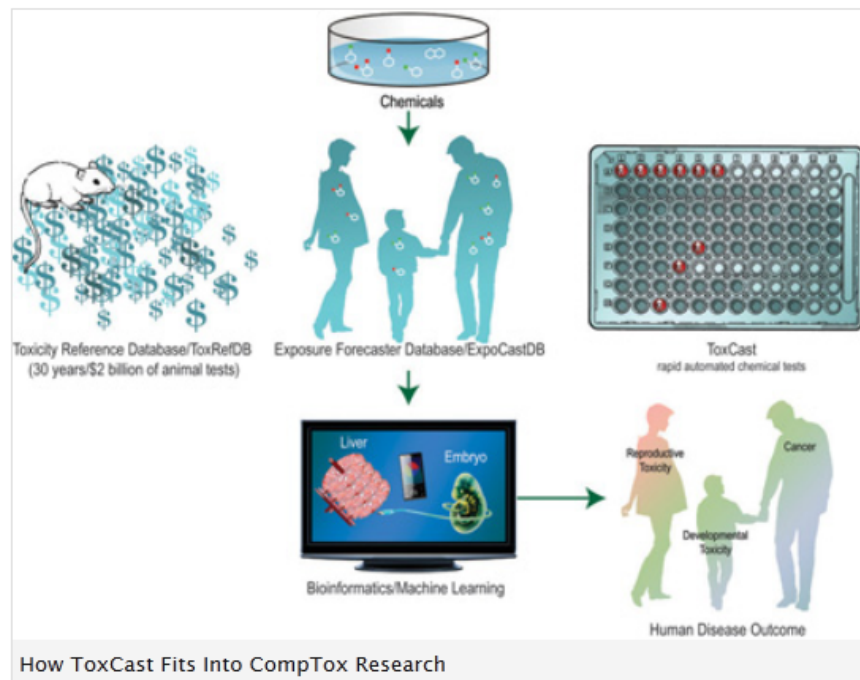
EPA launched ToxCast™ in 2007 to develop ways to predict potential toxicity without the need for animal testing. The uses advanced are impacted are most



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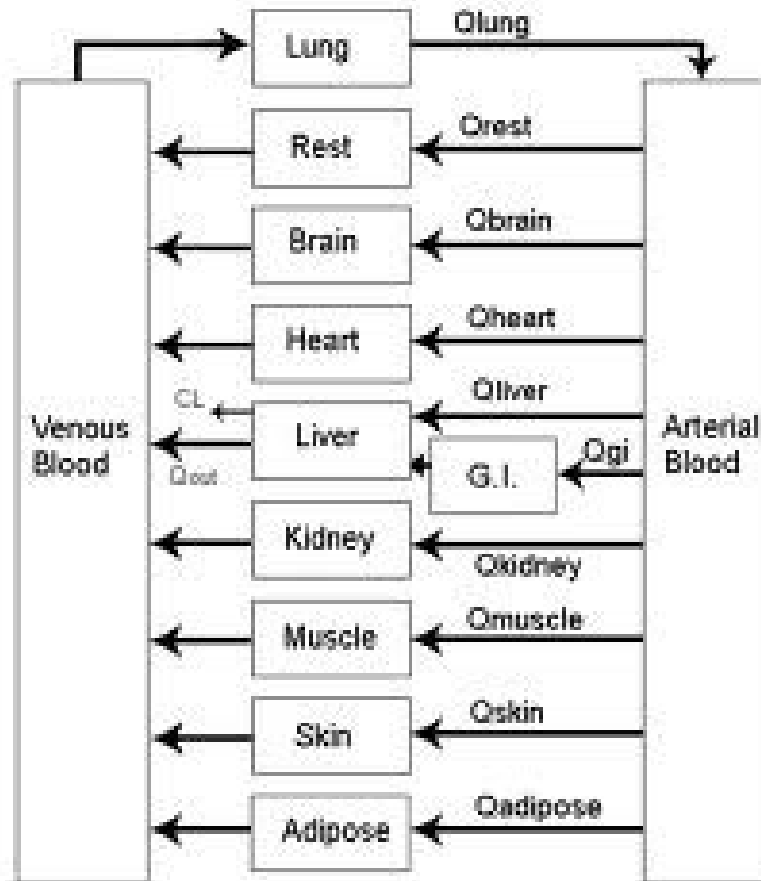
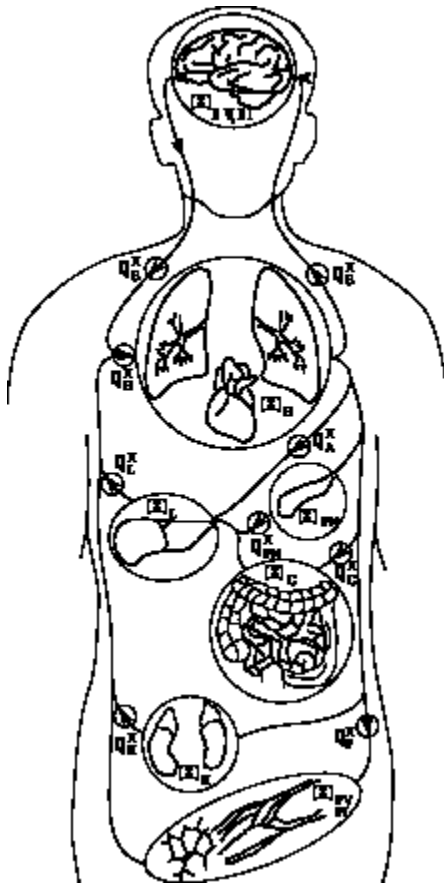
How ToxCast Fits Into CompTox Research

### ToxCast Resources

# PBPK models

PBPK (PBTK)

Physiologically based pharmacokinetic (toxicokinetic) models



Fragmentation of a complex system to „boxes“

→ All Processes described by arrows (mathematical equations)

# Example

Li et al. *BMC Systems Biology* 2011, **5**:63  
<http://www.biomedcentral.com/1752-0509/5/63>



RESEARCH ARTICLE

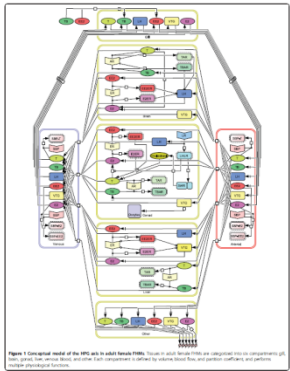
Open Access

## A computational model of the hypothalamic - pituitary - gonadal axis in female fathead minnows (*Pimephales promelas*) exposed to $17\alpha$ -ethynylestradiol and $17\beta$ -trenbolone

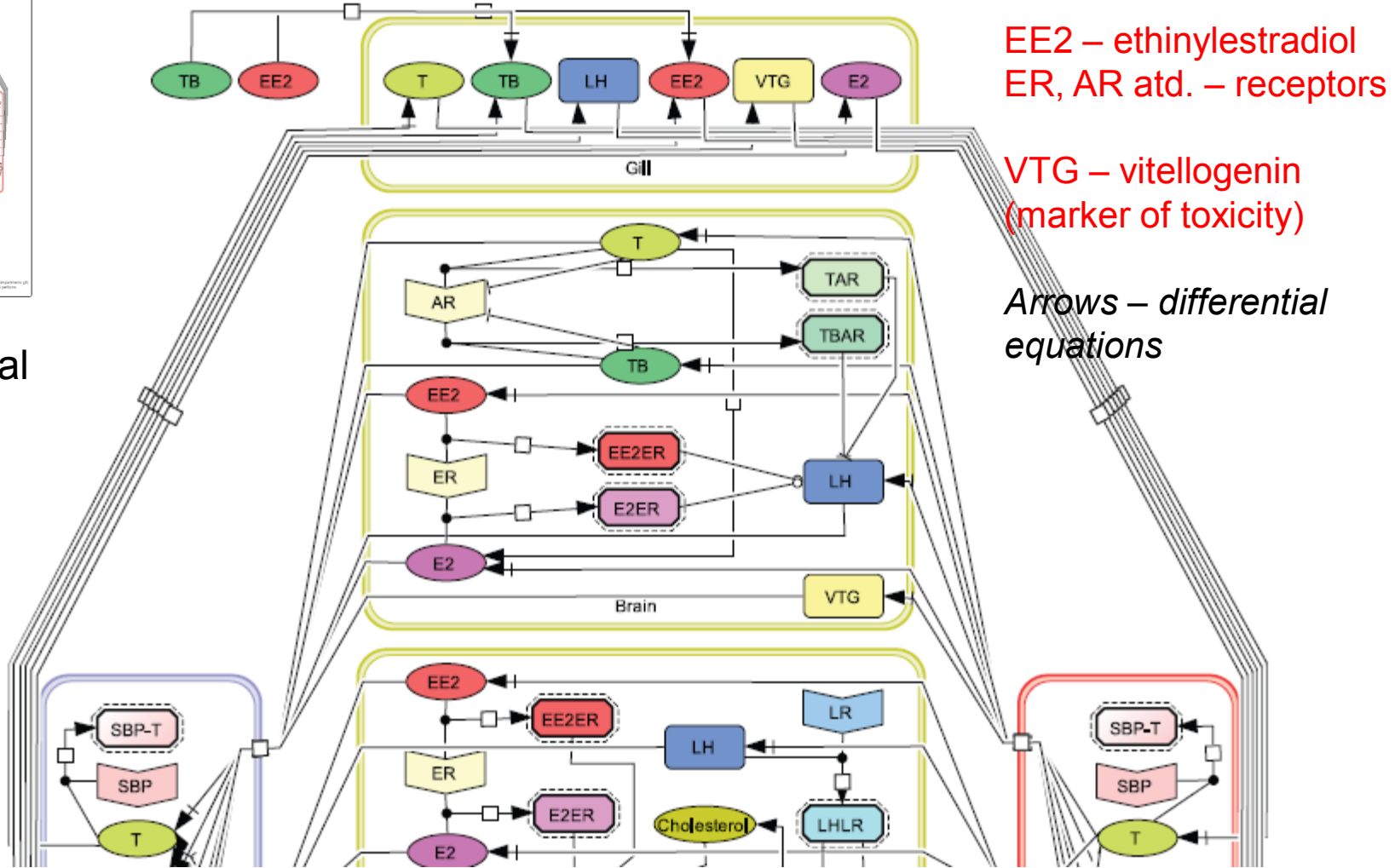
Zhenhong Li<sup>1</sup>, Kevin J Kroll<sup>2</sup>, Kathleen M Jensen<sup>3</sup>, Daniel L Villeneuve<sup>3</sup>, Gerald T Ankley<sup>3</sup>, Jayne V Brian<sup>4</sup>, María S Sepúlveda<sup>5</sup>, Edward F Orlando<sup>6</sup>, James M Lazorchak<sup>7</sup>, Mitchell Kostich<sup>7</sup>, Brandon Armstrong<sup>8</sup>, Nancy D Denslow<sup>2</sup> and Karen H Watanabe<sup>1\*</sup>



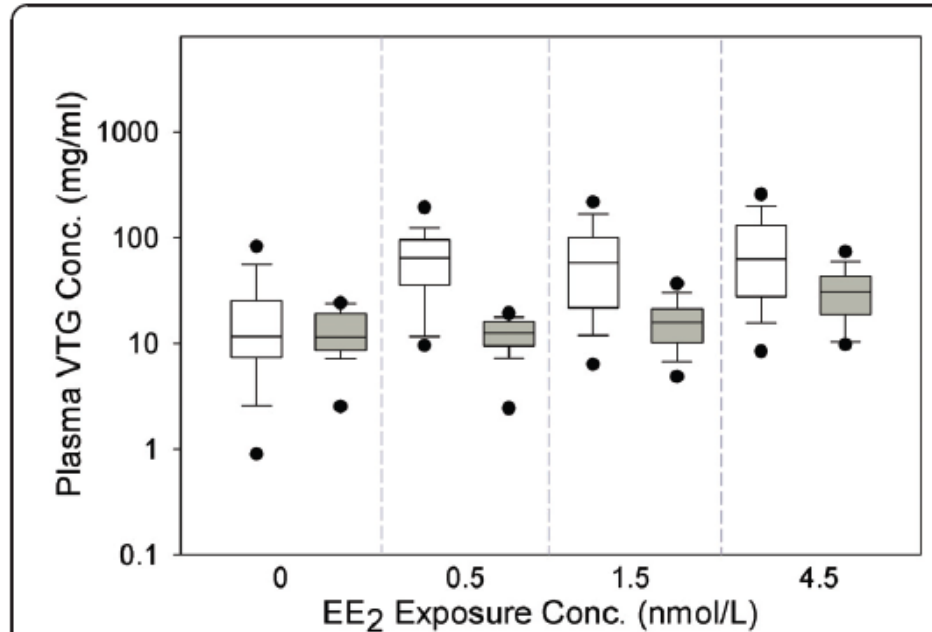
# Li (2011) BMC Systems Biology



Conceptual model



# Li (2011) BMC Systems Biology



Results:

MODELLED (white)

Vs

MEASURED (grey)

...good comparable

**Figure 6** Comparison of model predictions with measured data in female FHM<sub>s</sub> exposed to EE<sub>2</sub>.  $n = 28$  at each sampling time.

White boxes represent model predictions, and grey boxes represent measured data [42]. The x-axis represents EE<sub>2</sub> concentrations in ng/L. The solid line within the box marks the median; the boundary of the box farthest from zero indicates the 75<sup>th</sup> percentile; the boundary of the box closest to zero indicates the 25<sup>th</sup> percentile; the whisker (error bar) farthest from zero marks the 90<sup>th</sup> percentile; whisker (error bar) closest to zero marks the 10<sup>th</sup> percentile; the circle farthest from zero marks the 95<sup>th</sup> percentile; and the circle closest to zero marks the 5<sup>th</sup> percentile.