

### **Evaluation Report for Category A, Subcategory 1.3 Application**



#### **Purpose of Application**

The purpose of this application was to establish maximum residue limits (MRLs) for the active ingredient dithianon on several imported commodities.

#### **1.0 Chemistry Assessment**

#### **1.1 Identity of the Active Ingredient**



**Purity of the active ingredient** 96.2% nominal



#### **1.2 Physical and Chemical Properties of the Active Ingredient**



#### **Dithianon Technical**

### **2.0 Method of Analysis**

#### **2.1 Methods for Analysis of the Active Ingredient**

The methods provided for the analysis of the active ingredient and impurities in the technical product have been validated and assessed to be acceptable for the determinations.

#### **2.2 Method for Formulation Analysis**

Methods for analysis of the end-use product are not required for this submission.

#### **2.3 Methods for Residue Analysis**

Several liquid- or gas-chromatography methods (HPLC-UV, GC-ECD) were developed for data generation purposes. A high performance liquid chromatography method with tandem mass spectrometric detection (HPLC-MS/MS) was developed and proposed for enforcement purposes in plant matrices. This method fulfilled the requirements with regards to specificity, accuracy and precision at the method limit of quantitation. Acceptable recoveries (70-120%) were obtained in plant matrices. The proposed enforcement method was successfully validated in plant matrices by an independent laboratory. The extraction solvents used in the metabolism studies were comparable to those in the proposed enforcement method, so the enforcement method is expected to adequately extract bioincurred residues of dithianon.

### **3.0 Health Assessments**

#### **3.1 Toxicology Summary**

A detailed review of the toxicological database for dithianon, a quinone fungicide, was conducted. The database is complete, consisting of the full array of toxicity studies currently required for hazard assessment purposes. All required studies were carried out in accordance with Good Laboratory Practices and followed currently accepted international testing protocols or protocols that were considered acceptable at the time the studies were conducted. Specialized investigative studies were also provided in support of a proposed mode of action (MOA) for kidney tumour formation in female rats. Additionally, relevant published investigations of dithianon were included for the hazard assessment. In general, the scientific quality of the data was high and the database is considered adequate to define the majority of the toxic effects that may result from exposure to dithianon.

The toxicokinetics and metabolism were investigated in rats. Dithianon was isotopically labelled  $($ <sup>14</sup>C or <sup>13</sup>C) at either the 5(10)-carbonyl carbon atoms of the quinone moiety, or the 2,3-cyano carbon atoms of the dithiine ring moiety. Treatments included gavage administration of single or repeated low doses or a single high dose. Regardless of the dosing regimen, absorption was rapid and dose-proportional, but incomplete. Absorption was 31-43% of the administered dose (AD) for single doses and repeated low doses. Plasma concentrations were measurable within 15 minutes and maximal at 6 hours post-administration. No dose- or sex-related differences in absorption were evident.

Once absorbed, dithianon and/or its metabolites were rapidly and widely distributed. The lowest concentrations occurred in the brain. Following administration of a single low dose, most organ/tissue concentrations were concordant with plasma kinetics and did not exceed maximum plasma concentrations. On this basis, uptake into most tissues was inferred to be passive and largely responsive to kinetics in the blood. The kidneys and male thyroid gland were exceptions, with maximum concentrations exceeding those of plasma by 2- to 4-fold. In both sexes, these targets had the slowest apparent elimination kinetics. Slower elimination kinetics were also apparent in the adrenal glands, bone marrow and whole blood in both sexes, as well as in the ovary. Comparable time-course information on early tissue concentrations was not available for single high dosing or for repeated low doses.

Metabolism of dithianon was rapid, extensive and complete. Unchanged dithianon was present at only trace levels in the feces and was not detected in the urine. Three major metabolites, (individually, 12-37% AD), and many minor metabolites  $( $2-3\%$  AD) were identified.$ Numerous fractions were also partially characterized. The three major metabolites were detected only in the urine. These included a glucuronide of the 1,4-dihydroxynaphthalene ring moiety (M216F020) and two dithiine ring metabolites (M216F029, M216F030). The main transformation steps in rats included oxidation of the sulfur atoms, cleavage of the dithiine ring, reduction of the 1,4-naphthoquinone moiety with further glucuronidation, as well as substitution of the carbonitrile moieties by amino and carboxy groups. The metabolic pathways were complex but the identified metabolites appeared generally similar in males and females. The chemical names of dithianon metabolites are listed in Table 1 of Appendix 1.

Elimination was rapid and complete, with no evident bioaccumulation. The majority was eliminated within 48 hours of dosing regardless of the dose level. Absorbed dithianon was eliminated primarily via the urine (24-33% AD) and to a lesser extent via the bile (7-12% AD). Only trace amounts were eliminated via expired air. Unabsorbed dithianon (57-72% AD) was completely degraded and/or metabolised within the gastrointestinal tract prior to elimination via the feces.

There was a small, toxicologically relevant, sex-dependent difference in the kinetics of dithianon elimination. Single-dosed females had slightly greater area under the curve (AUC) values, compared to males. This implies greater effective acute systemic exposure in females. At 48 hours, high-dose females had decreased elimination via the urine, increased retention in the carcass and no change in biliary elimination, compared to males. This pattern indicates delayed urinary elimination in females, which is consistent with acutely reduced kidney function. Femalespecific acute cytotoxicity of the kidney tubule epithelium occurred at this dose level elsewhere in the toxicology database.

With repeated low dosing, elimination in females shifted slightly away from the urinary route and towards the fecal route compared to single-dosed females; this is consistent with an adaptive hepatobiliary response. Comparable changes were not evident in repeat low-dose males. In a published study, dithianon-treated mice exhibited sex-specific differences in the metabolic response of the liver, kidney and lungs following single and repeated oral exposures (PMRA# 2742219). This possibility was not explicitly investigated in rats.

In eukaryotic cells, dithianon reacts broadly with sulfhydryl groups (for example, glutathione) and interferes with thiol-dependent biological processes. For instance, in published studies dithianon modified the catalytically active sulfhydryl groups of key glycolytic enzymes, thereby potently inhibiting glycolysis (PMRA# 2742220, 2742221). Thus, dithianon's cytotoxic potential may be the result of perturbation of cellular redox-dependent processes. Notably, dithianon's cytotoxicity was generally reduced in bacterial and mammalian cell assays by metabolic activation using rat liver supernatant fraction nine (S9).

Dithianon had high acute oral toxicity in rats. At lethal doses, signs of toxicity were evident within 1-2 hours of dosing and included impaired and poor general state, dyspnoea, staggering, piloerection, smeared fur and diarrhea; death occurred within 1-4 days.

Following short-term dosing via the diet, mice, rats and dogs exhibited kidney toxicity, altered red blood cell parameters and thyroid hormone changes. In dogs, there was evidence of liver toxicity, but in rodents the liver-specific changes were considered primarily adaptive. At higher dose levels, all three species exhibited decreases in body weight and/or body weight gain as well as decreases in food consumption. Decreased food efficiency was also observed at higher dose levels, but only in rats. In rats and dogs, effects on body weight and food consumption were more evident in females than in males. Also, body weight and food consumption effects in mice and dogs were observed only following short-term dosing, whereas such effects persisted chronically in rats.

All three of the above test species exhibited increases in liver weight with short-term dietary dosing. In rodents, this persisted no longer than 28 days, with little evidence of concordant adverse functional and/or histopathological liver change. In female mice, iron deposition occurred in Kupffer cells at 28 days along with altered red blood cell parameters and increased kidney weight; increased liver weight manifested at a higher dose. Rodents dosed chronically exhibited no clear adverse liver effects. In contrast, liver weights in dogs, particularly in females, were increased at relatively low dose levels, and dose-concordant liver histopathology and liverrelated clinical chemistry changes were observed following one year of dietary administration.

Thyroid hormone levels were perturbed at relatively low dose levels in rodents and dogs following short-term dietary dosing. In rats dosed with relatively high levels of dithianon, there was evidence that this perturbation persisted following longer dosing. Nevertheless, gross effects on the thyroid gland manifested only at higher dose levels, regardless of the species or duration of dosing. With short-term dosing in rodents, males exhibited a greater propensity for thyroid hormone perturbation and/or thyroid gland weight increase than females. Physiologically, the observed thyroid hormone changes in male rats tended to resemble hypothyroidism. Regardless, concordant increases in thyroid stimulating hormone (TSH) levels and thyroid gland weight occurred only at relatively high dose levels. The overall pattern of change suggests adequate homeostatic compensation of triiodothyronine  $(T_3)$  and thyroxine  $(T_4)$  levels at lower dose levels in rats. In dogs, thyroid hormones were only minimally investigated. Nevertheless, increased thyroid gland weight and histopathology (lymphocytic thyroiditis) occurred at high doses only, and with no obvious sex-specificity. Regardless of species or duration, concern for thyroidrelated effects was minimal due to the nature of the effects and the dose levels at which they occurred.

Red blood cell (RBC) numbers and other closely related parameters were decreased with shortterm dietary dosing in rodents and dogs. Such effects were evident at lower dose levels in females compared to males in all three species, but particularly so in dogs. In both sexes, RBC effects were consistently associated with kidney toxicity. Consequently, an acute decrease in the ratio of polychromatic to normochromatic erythrocytes (PCE/NCE) in female rats following a single high dose in a bone marrow micronucleus assay is consistent with acutely impaired erythropoiesis, but it may not be due to a direct toxic effect within the bone marrow. In addition, in a study published in the scientific literature, dithianon potently inhibited glycolysis in cultured mammalian cells (PMRA# 2742221). In rats dosed at relatively high dithianon levels, demonstrably achievable concentrations in the blood fall within a range that could begin to interfere with RBC glycolysis. Thus, a direct effect on mature RBC viability may be a contributing factor given their exclusive reliance on glycolysis for energy metabolism. Although

net decreases in circulating RBCs were modest with repeated dosing in rodents, evidence of compensatory increases in RBC production was evident; this manifested as decreased mean corpuscular hemoglobin (MCH) in female mice and increased reticulocytes in rats. This could have masked the absolute magnitude of RBC loss in rodents. In dogs, where RBC decreases were greatest, there was no evidence of compensatory change in erythropoiesis. In mice and dogs, the toxicological impact of short-term RBC destruction was evident in the liver as iron deposition within histiocytes/Kupffer cells.

The kidney was the primary target organ for toxicity in rodents and dogs, regardless of the duration of dosing. Kidney toxicity effects were more evident in rodents than in dogs and occurred at lower doses in females compared to males in all species tested. Overall, females exhibited a greater range and/or severity of kidney effects, or exhibited effects at lower dose levels compared to males. A critical aspect of dithianon-induced kidney toxicity that sets female rats apart from males appears to be a selectively increased cytotoxicity of the tubular epithelial cells within the transitional (S2) and straight (S3) segments of the proximal tubules. Given what is . Although the epithelium of all three segments are expected to play a critical role in eliminating and detoxifying dithianon, the segments with the greatest reliance on glycolysis appeared uniquely sensitive to dithianon and/or its metabolites. The earliest manifestation of cytotoxicity in these cells was mitochondrial degradation; this was observed within one to two days of exposure, depending on the dose level. Consequently, the cellular events causing mitochondrial damage and ensuing cell death were considered to have resulted from a single acute exposure to dithianon.

Kidney toxicity occurred for all exposure durations, from acute to chronic. In all three species, the number and severity of effects in the kidney increased as the dose level and exposure duration were increased. Observed effects appeared to be generally comparable in rodents and dogs, but the greatest observational detail was available for rats. In rats exposed acutely to high oral levels of dithianon, the most immediate adverse effect was tubular epithelial cell cytotoxicity, which consisted of mitochondrial damage, hydropic degeneration, dilated rough endoplasmic reticulum and nuclear degeneration. Acute cellular effects in rats administered a high oral dose of dithianon were accompanied by an increase in kidney weight and, based on toxicokinetic information, a slight but immediate decline in kidney function in female rats. Within one day of these acute effects in rats, there was also evidence of compensatory repair of the tubule epithelium.

The tubule repair response was investigated in dietary short-term mechanistic studies. At low dose levels the tubule cell response was evident as decreased apoptosis, increased cell proliferation, and increased expression of kidney injury molecule-one (KIM-1) protein. At higher dose levels, apoptosis was increased, rather than decreased; this suggests the existence of an exposure threshold beyond which the tubule repair response could become overwhelmed, resulting in increased cell death. This evident threshold is considered of relevance to the formation of tubule epithelial cell tumours in female rats (discussed in a later section).

Rats given repeated low dietary doses of dithianon exhibited transient increases in kidney weight and pallor, which did not persist beyond 28 days. Increased liver weight and greater apparent elimination via the biliary route also occurred within this time frame in female rats given repeated low doses. Thus, the transience of low-dose effects in the kidney likely reflects the time needed for a systemic adaptive response to manifest. At sufficiently high dose levels, increased

kidney weight persisted in rodents and dogs, regardless of the duration of exposure. This is consistent with the existence of a dose-response threshold within the kidney. At low dose levels in rats, regardless of whether kidney weight was increased concurrently, there was further evidence of ongoing kidney toxicity (increased epithelial cells, blood, and protein in the urine, as well as kidney histopathology); these effects were observed as early as 90 days but extended to chronic durations of exposure. Within the same subchronic to chronic time frame, high dose levels of dithianon resulted in elevated blood urea nitrogen levels, indicating that kidney metabolism was also adversely affected. In addition, chronic high dose levels in female rats resulted in histopathological changes in the kidney that reflect a greater severity of tubular cell damage (multifocal), involving atypical cell division (nuclear enlargement, karyomegaly), abnormal cell cycle regulation (atypical tubule hyperplasia, proliferating tubules), and the formation of tubule epithelial cell tumours. The kidney tumours had no adverse impact on survival in females. In addition, there was no evidence of a decrease in the latency of tumour formation at a dose that closely approached the maximum tolerated dose (MTD).

With chronic dietary dosing in mice, effects on the kidney and thyroid were generally consistent with those observed in the rat. As in rats, kidney tubule effects in females were more pronounced at lower dose levels compared to males, but in both sexes there was no evidence of tumour formation in the kidney or elsewhere.

Dithianon tested negative for genotoxicity in a majority of assays, including two bacterial reverse mutation assays, a mammalian cell (lung fibroblasts, V79) gene forward mutation assay, in vitro and in vivo unscheduled DNA synthesis assays in rat hepatocytes, in vivo chromosomal aberration (bone marrow) and micronucleus assays in rats and mice. It also tested negative in one of two acute in vivo comet assays using rat kidney cells, and there was minimal evidence that dithianon could bind covalently to DNA in liver and kidney tissues in rats. Conversely, in the rat kidney there was evidence of considerable non-covalent interaction between DNA and dithianon, and/or its metabolites. In addition, dithianon produced positive results using an in vitro forward mutation assay in mammalian cells (V79) with metabolic activation, and using an in vitro chromosomal aberration assay (V79) with and without metabolic activation. Both of these positive in vitro results occurred at, or very near, the threshold for in vitro cytotoxicity. One of the two in vivo single-dose comet assays using rat kidney cells was positive, but only at doses that were demonstrably cytotoxic to the proximal tubule epithelium. Thus, under in vitro and in vivo conditions at sufficiently high concentrations, dithianon exhibited mutagenic and clastogenic potential.

There were limitations in the conduct of both comet assays. However, the positive assay was considered superior in design because the cell isolation technique (perfusion with collagenase digestion) and the positive control chemical, streptozotocin (STZ), were considered more appropriate for dithianon. The respective consequences of these study features were that the total population of cells investigated was considered more likely to have included the most susceptible kidney cells, those of the proximal tubule epithelium, and that this expectation was specifically confirmed via the STZ-induced positive response. In the kidney, STZ is expected to selectively induce cytotoxicity/genotoxicity and subsequent cell death (necrosis/apoptosis) only in the proximal tubule epithelium, due to the expression of the GLUT 2 isoform of the facilitative glucose transporter in these cells (PMRA# 2742222, 2742223, 2742228, 2742229). Importantly, the results of this study clearly demonstrate that dithianon's in vivo cytotoxic and genotoxic

potential were closely associated in the kidney; at sufficiently low doses, cytotoxicity occurred without evident genotoxicity, whereas genotoxicity never manifested in the absence of cytotoxicity. Thus, the apparent genotoxicity in this study is considered threshold-dependent and secondary to dithianon's cytotoxic effects. Overall, the weight of evidence did not suggest primary genotoxic potential for dithianon.

The results from specialized mechanistic studies in rats were sufficiently robust to support cytotoxicity-dependent regenerative hyperplasia as the probable causative MOA for the observed female-specific kidney tubule epithelial cell tumours. The initiating key event, cytotoxicityinduced death, is a compensable, threshold-dependent event. Key precursor events of the proposed tumourigenic MOA were temporally-, spatially- and dose-concordant with tumour formation. Male rats also exhibited the key initiating cytotoxicity, but affected kidney cells were distributed diffusely and there were no treatment-related tumours. In females, cytotoxicity and cell death appeared to more specifically affect the epithelium of the straight proximal tubules within the inner cortex. This region is where most of the tumours appeared to have formed. The tumours appear to result from a unique confluence of sex-specific exposure circumstances within the kidney, rather than from a primary or generalized genotoxic effect of dithianon. Although the tumours manifested at a dose level that was possibly nearing the MTD, cytotoxicity-induced cell death was evident at lower doses. Overall, the data supported the use of a threshold approach for the cancer risk assessment. The kidney tumours were considered relevant to humans.

In a 28-day gavage neurotoxicity study, rats exhibited increased piloerection and decreased rearing in both sexes at the end of the study at the highest dose tested (HDT). Decreased motor activity also occurred in males at the same dose level, together with decreases in body weight and food efficiency. Females dosed at this level had decreases in body weight gain and food consumption. Although decreased rearing and motor activity are potentially related to an effect on the nervous system, they may also manifest due to more general or indirect causes. Given the high level of dosing and lack of corroborative neurohistopathological change, there was insufficient evidence to conclude that dithianon was selectively neurotoxic. Finally, no other potential signs of neurotoxicity were noted in the toxicology database.

Following in utero exposure, where maternal animals received dithianon via gavage, developmental toxicity included increased early intra-uterine deaths and/or abortions and postimplantation loss in rats and rabbits, and increased pre-implantation loss in rabbits. Consequently, there were concomitant decreases in live fetuses per maternal animal in both species. There was no evidence of treatment-related malformations. In both species, the observed developmental toxicity occurred in the presence of decreased body weight, body weight gain and food consumption in maternal animals. In rats, fetal body weight was decreased at twice the dose at which this effect was observed in maternal animals. At dose levels higher than the maternal lowest observable adverse effect level (LOAEL) in rats, there were increased mortalities in dams as well as gross pathology in the stomach and intestines, including enlarged Peyer's patches and a severely reddened mucosa. Although some limitations were identified in the rabbit developmental toxicity study, it was considered acceptable.

In a two-generation dietary reproductive toxicity study in rats, there were no treatment-related effects on reproductive performance. The primary target organs (kidney, liver) were not weighed in this study and the kidney was not examined histologically, but these were adequately

investigated at comparable dose levels in other studies. Systemic toxicity observed in parental animals was consistent with those reported in other repeated-dose dietary studies in rats and included reductions in body weight, body weight gain and food consumption. No treatmentrelated effects were observed in the offspring of either generation.

Results of the toxicology studies conducted on laboratory animals with dithianon are summarized in Table 2 of Appendix I. The toxicology reference values for use in the human health risk assessment are summarized in Table 3 of Appendix I.

#### **Incident Reports**

Since April 26, 2007, registrants have been required by law to report incidents to the PMRA, including adverse effects to Canadian health or the environment. Diathianon is not registered for use in Canada or the United States. As such, there are no incident reports on file with the PMRA.

### **3.1.1 PCPA Hazard Characterization**

For assessing risks from potential residues in food or from products used in or around homes or schools, the *Pest Control Products Act* (PCPA) requires the application of an additional 10-fold factor to threshold effects to take into account completeness of the data with respect to the exposure of, and toxicity to, infants and children, and potential prenatal and postnatal toxicity. A different factor may be determined to be appropriate on the basis of reliable scientific data.

With respect to the completeness of the toxicity database as it pertains to the toxicity to infants and children, the standard complement of required studies were available for risk assessment including gavage developmental toxicity studies in rats and rabbits and a dietary reproductive toxicity study in rats.

With respect to potential prenatal and postnatal toxicity, there was no indication of increased susceptibility of fetuses or offspring compared to parental/maternal animals in the dietary reproductive and gavage developmental toxicity studies. In the dietary reproductive toxicity study, parental animals exhibited bodyweight and food consumption effects at the HDT. At the same dose level, there were no evident effects in the offspring. In the developmental toxicity studies, there were increased early intra-uterine deaths and/or abortions and post-implantation loss in rats and rabbits, and increased pre-implantation loss in rabbits. In both species, these serious effects occurred in the presence of more generalized maternal effects (decreased body weight, body weight gain and food consumption); the maternal/developmental no observable adverse effect level (NOAEL) was lowest in rats. Thus, in both species a serious endpoint (increased fetal loss) was demonstrated in the presence of maternal toxicity.

Overall, the database is adequate for determining the sensitivity of the young. There was a low level of concern for sensitivity of the young and effects on the young are well characterized. Although increased fetal loss in the developmental toxicity studies was considered a serious endpoint, concern for this finding was tempered by the fact that maternal toxicity was evident at the same dose level. Accordingly, the 10-fold PCPA factor was reduced to 3-fold for exposure scenarios using the toxicological endpoint from the rat developmental toxicity study. For all other exposure scenarios, the PCPA factor was reduced to 1-fold.

#### **3.2 Determination of Acute Reference Dose**

#### *Females 13-49 Years of Age*

To estimate acute dietary risk, the developmental toxicity study in the rat with a maternal/developmental NOAEL of 20 mg/kg bw/day was selected. At the LOAEL of 50 mg/kg bw/day, an increase in early resorptions was observed, and maternal animals also appeared thin, had reduced body weights and food consumption. The possibility that the fetal loss could be the result of a single exposure could not be ruled out; this endpoint is therefore considered relevant to an acute risk assessment. An increase in early resorptions was also observed in the developmental toxicity study in the rabbit, but the NOAEL established in the rat study was lower. Standard uncertainty factors of 10-fold for interspecies extrapolation and 10-fold for intraspecies variability were applied. As discussed in the PCPA Hazard Characterization section, the PCPA factor was reduced to 3-fold. **Thus, the composite assessment factor (CAF) is 300.**

The ARfD is calculated according to the following formula:

ARfD (females 13-49) = 
$$
\frac{\text{NOAEL}}{\text{CAF}} = \frac{20 \text{ mg/kg bw/day}}{300} = 0.07 \text{ mg/kg bw}
$$

#### *General Population (excluding females 13-49 years of age)*

To estimate acute dietary risk, the 7-day nephrotoxicity study in the rat with a NOAEL of 12 mg/kg bw/day was selected for risk assessment. At the LOAEL of 60 mg/kg bw/day, kidney tubule cellular damage was observed. These effects were evident as early as two days following dosing, and are therefore relevant to an acute risk assessment. Comparable cellular and subcellular damage, or immunohistological evidence of such damage, occurred in three singledose studies at doses above the NOAEL established in the nephrotoxicity study. Standard uncertainty factors of 10-fold for interspecies extrapolation and 10-fold for intraspecies variability were applied. As discussed in the PCPA Hazard Characterization section, the PCPA factor was reduced to 1-fold. **Thus, the CAF is 100.**

The ARfD is calculated according to the following formula:

ARfD (general population) =  $\text{NOAEL} = 12 \text{ mg/kg}$  bw/day = 0.1 mg/kg bw CAF 100

### **3.3 Determination of Acceptable Daily Intake**

To estimate risk from repeat dietary exposure to dithianon, the chronic dietary toxicity/oncogenicity study in the rat with a NOAEL of 1 mg/kg bw/day was selected for risk assessment. At the LOAEL of 6 mg/kg bw/day, evidence of kidney damage was observed. This study provides the lowest NOAEL in the database. Standard uncertainty factors of 10-fold for interspecies extrapolation and 10-fold for intraspecies variability were applied. As discussed in the PCPA Hazard Characterization section, the PCPA factor was reduced to 1-fold. **Thus, the CAF is 100.**

The ADI is calculated according to the following formula:

 $ADI = NOAEL = 1$  mg/kg bw/day = 0.01 mg/kg bw/day CAF 100

The ADI provides respective margins of 600 and 2000 to the NOAELs for renal epithelial tumours and early resorptions observed in female rats.

#### **Cancer Assessment**

Kidney tubule epithelial cell tumours were observed in female rats administered a high dose of dithianon following chronic dosing. The proposed MOA for tumour formation was deemed plausible and was adequately supported by the data provided; dose and temporal concordance, as well as spatial concordance within the kidney, were considered adequately characterized and coherent. Although there was adequate evidence to support a threshold-based approach to risk assessment for the renal epithelial tumours in female rats, the human relevance of these tumours could not be discounted. The established toxicology reference values provide a sufficient margin to this tumour.

#### **3.5 Food Residues Exposure Assessment**

### **3.5.1 Residues in Plant and Animal Foodstuffs**

The residue definition for risk assessment and enforcement in plant commodities is dithianon. The data gathering/enforcement analytical methods are valid for the quantitation of dithianon residues in crop matrices. The residues of dithianon are stable in apples, pears, cherries and plums for 24 months, grapes for 21 months, and hops for 6 months when stored in a freezer at ≤-15°C. Therefore, adequate storage stability data are available to support the storage conditions and intervals in the field and processing trials. The raw agricultural commodities of apples, cherries, plums, grapes and dried hops were processed, and dithianon residues concentrated in raisins only (1.6x). Crop field trials conducted in Germany, France, Australia, the Netherlands, UK, Italy, Spain, Denmark, Belgium, and Greece using end-use products containing dithianon (at approved or exaggerated rates) in or on apples, pears, cherries (sweet and tart), plums, grapes and dried hops are sufficient to support the proposed MRLs.

#### **3.5.2 Dietary Risk Assessment**

Acute and chronic dietary risk assessments were conducted using the Dietary Exposure Evaluation Model (DEEM-FCID™, Version 4.02, 05-10-c), which incorporates food consumption data from the National Health and Nutritional Examination Survey, What We Eat in America (NHANES/ WWEIA) dietary survey for the years 2005-2010 available through CDC's National Center for Health Statistics (NCHS).

### **3.5.2.1 Chronic Dietary Exposure Results and Characterization**

The following criteria were applied to the intermediate chronic analysis for dithianon: 100% crop treated, default and experimental processing factors (when available), and residues of the petitioned crops based on supervised trial median residue (STMdR) values. The intermediate chronic dietary exposure from all supported dithianon food uses (alone) for the total population, including infants and children, and all representative population subgroups is less than 15% of the ADI. The highest exposure and risk estimate is for children 1-2 years old at 45% (0.004446 mg/kg bw/day) of the ADI, which is not of health concern.

### **3.5.2.2 Acute Dietary Exposure Results and Characterization**

The following assumptions were applied in the intermediate acute analysis for dithianon: 100% crop treated, default and experimental processing factors (when available), and residues of the petitioned crops based on maximum residue values. The intermediate acute dietary exposure for all supported dithianon imported commodities was estimated to be 16% (0.011093 mg/kg bw/day) of the ARfD for females 13-49 years old (95th percentile, deterministic), and 9-62% of the ARfD for all other population subgroups (95th percentile, deterministic), which is considered acceptable.

### **3.5.3 Maximum Residue Limits**

The recommendation for MRLs for dithianon was based upon the submitted field trial data from the exporting countries, and the guidance provided in the [OECD MRL Calculator.](http://www.oecd.org/env/chemicalsafetyandbiosafety/agriculturalpesticidesandbiocides/oecdmaximumresiduelimitcalculator.htm) MRLs to cover residues of dithianon in/on crops and processed commodities are proposed as shown in Table 3.1. Residues in processed commodities not listed in Table 3.1 are covered under the proposed MRLs for the raw agricultural commodities (RACs).

**Table 3.1. Summary of Field Trial and Processing Data Used to Support Maximum** 



LAFT = Lowest Average Field Trial; HAFT = Highest Average Field Trial

## **4.0 Environmental and Value Assessments**

Environmental and value assessments were not required for this application.

### **5.0 Conclusion**

The Pest Management Regulatory Agency has completed an assessment of the information provided in support of this application.

The toxicology database submitted for dithianon is adequate to define the majority of toxic effects that may result from exposure. In short- and long-term studies with adult animals, the targets of toxicity were the kidney, liver, thyroid gland and red blood cells. There was no evidence of disregulation of the immune system, and no evidence that dithianon was selectively neurotoxic. In the rat reproductive toxicity study and in the developmental toxicity studies in rats and rabbits, there was no evidence of increased sensitivity of the young. In the developmental toxicity studies, increased fetal loss, considered a serious endpoint, was observed in the presence of maternal toxicity. There was no evidence of carcinogenicity in mice after longer-term dosing. Chronic dosing with dithianon resulted in kidney tumours in female rats. Based on the mechanistic data provided, a proposed MOA for kidney tumours in rats was considered plausible and was supported by the data. The risk assessment protects against the toxic effects noted above by ensuring that the level of human exposure is well below the lowest dose at which these effects occurred in animal tests.

The nature of the residues in plants is adequately understood. The residue definition for enforcement is dithianon in plant products. The proposed use of dithianon on apples, pears, cherries (sweet and tart), plums, grapes and dried hops does not constitute a risk of concern for chronic or acute dietary exposure (food alone) to any segment of the population, including infants, children, adults and seniors. Sufficient crop residue data have been reviewed to recommend MRLs on imported commodities. The PMRA recommends that the following MRLs be specified for residues of dithianon.



# **List of Abbreviations**







### **Appendix I Tables and Figures**



#### **Table 1 Metabolite Identification**

#### **Table 2 Toxicity Profile of Technical Dithianon**

[Effects are known or assumed to occur in both sexes unless otherwise noted; in such cases, sex-specific effects are separated by semi-colons. Organ weight effects reflect both absolute organ weights and relative organ to bodyweights unless otherwise noted. Effects observed above the LOAEL(s) as well as non-adverse effects observed below the LOAEL(s) have not been reported in this table for most studies for reasons of brevity.]











of the naphthoquinone moiety of uncleaved dithianon (M216F026);



low dose of dithianon was below the limit of detection in most organs and

























## **Table 3 Toxiclogy Reference Values for Use in Health Risk Assessment for Dithianon**





<sup>1</sup> CAF (composite assessment factor) refers to a total of uncertainty and PCPA factors for dietary assessments.

## **References**

### **A. List of Studies/Information Submitted by Registrant**

### **1.0 Chemistry**





### **2.0 Human and Animal Health**

















### **B. Additional Information Considered**

#### **i) Published Information**

### **1.0 Human and Animal Health**





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