

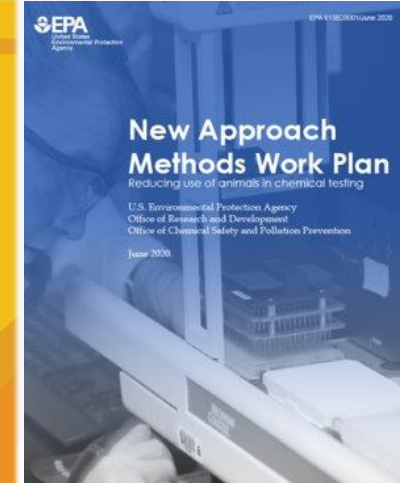
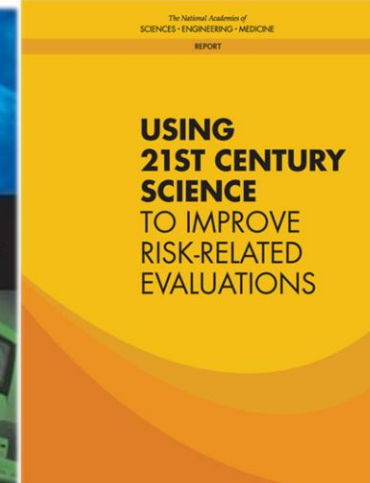
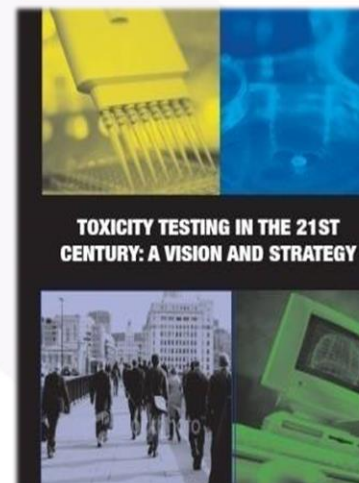
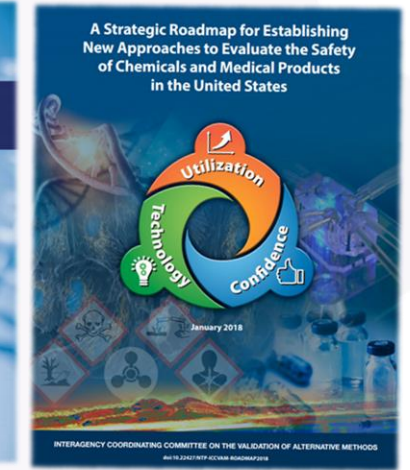
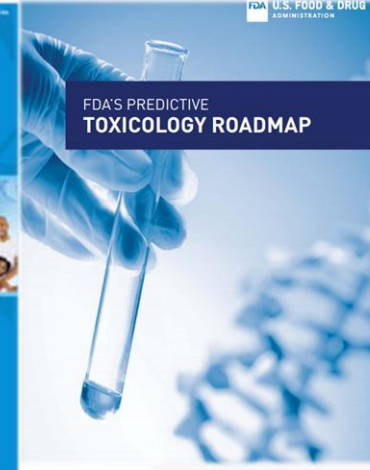
Application of a next generation risk assessment framework for skin sensitisation using non-animal data: geraniol case study

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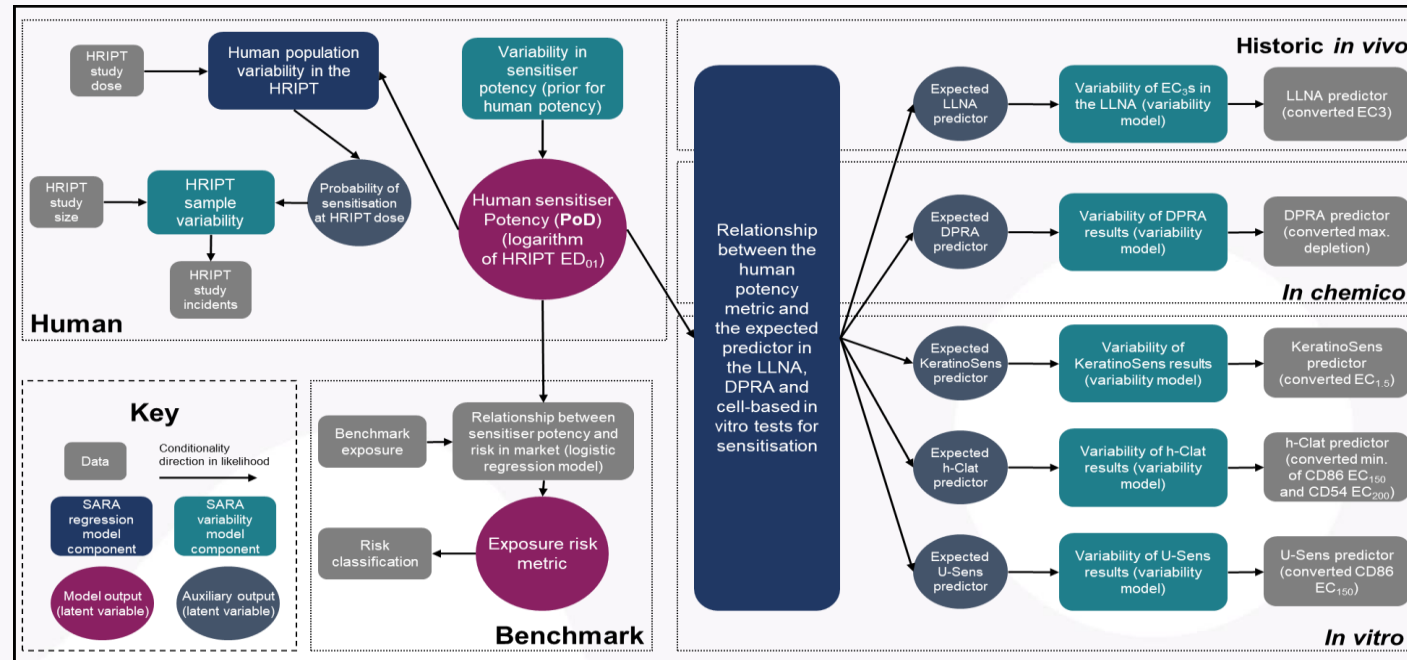
Assessing ingredient & product safety without animal testing

Next Generation Risk Assessment (NGRA)



Is it safe to include x% of chemical y in product z?

SARA Model – a defined approach to provide potency and risk information based upon New Approach Methodologies



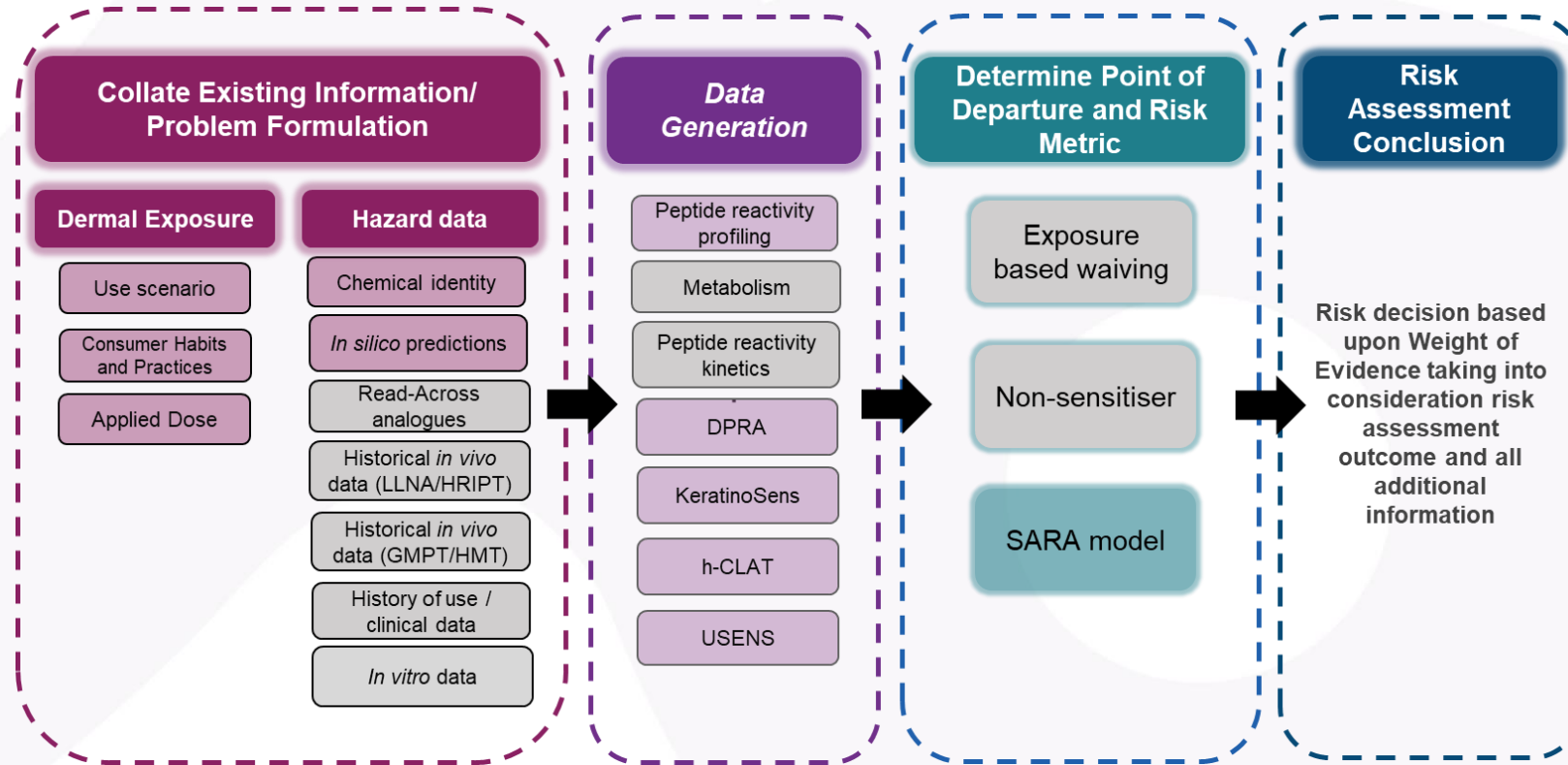
- SARA model is a Bayesian statistical approach which can make potency and risk predictions using any combination of historical *in vivo* (LLNA, HRIPT) or NAM (DPRA, KeratinoSensTM, h-CLAT and U-SENSTM)
- Skin sensitiser potency is expressed as the ED₀₁, the dose estimated to induce sensitisation in 1% of a HRIPT population. This is the Point of departure for the risk assessment.
- SARA model also makes use of benchmark exposures to infer a probability that a consumer exposure to a chemical is 'low risk',

Use of consumer exposure information and clinical evidence to develop skin allergy risk benchmarks

- Traditional risk assessment approaches for skin allergy use safety factors to rescale PoDs to market-equivalent safe doses for comparison against consumer exposure estimates.
- For NGRA, publicly available benchmark exposure information can be used to establish that an exposure is low risk and can be considered safe.
- To apply this concept, we established 62 low or high risk benchmark exposures using 10 human skin allergens (e.g. MCI/MI) with an established history of use in 7 cosmetic product types.

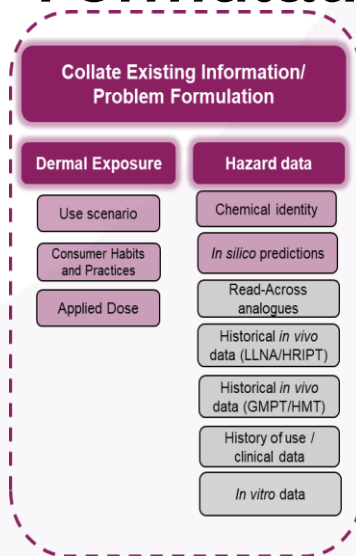
Material	Product type	Use level (ppm)	Consumer exposure to benchmark product (ng cm ⁻²)	Induction risk
MCI/MI	Deo	30	350	HIGH
		7.5	87.8	HIGH
	Face cream	30	100	HIGH
		7.5	25	HIGH
	Body lotion	30	18	HIGH
		7.5	4	HIGH
	Liquid hand soap	15	7.3	LOW
	Shampoo	15	1.1	LOW
	Shower gel	15	0.2	LOW

Application of NGRA framework for Skin Allergy

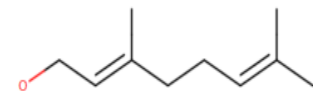


- Our NGRA framework is applied to a hypothetical skin allergy assessment of a consumer product: 0.02% (200ppm) geraniol in a face cream.
- For the purposes of the case study, historical *in vivo* data and read-across were not used, and the exposure was too high to apply exposure-based waiving.

Local exposure + Collate Existing Information/ Problem Formulation



Geraniol
CAS 106-24-1

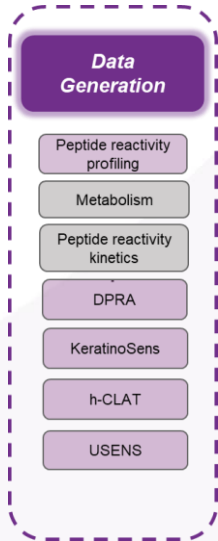


Product type	Face cream
Product used per day (90 th percentile) (g/day)	1.54
Ingredient inclusion level (%)	0.02
Skin surface area face (cm ²)	565
Leave-on or Rinse-off	Leave-on
Local dermal exposure (µg/cm ²)	0.544

DEREK NEXUS v.2.4	Alert – terpenoid EC3 model – 20% (weak)
TIMES-SS v.2.30.1.11 Skin Sensitisation model with autoxidation	Parent – Non sensitiser (in domain) Metabolites – Strong sensitiser- after autoxidation to disubstituted α,β-unsaturated aldehydes, Weak sensitiser after autoxidation to hydroperoxides
ToxTree v.3.1.0	Alert for Schiff base formation
OECD QSAR Toolbox v.4.4	<u>Protein binding by OECD</u> Parent - No alert found Skin Metabolites (2) - Direct Acting Schiff Base Formers >> Di-substituted alpha, beta-unsaturated aldehydes

- Geraniol is activated via autoxidation to reactive molecules Schiff base adducts
- Confidence in this prediction is high based upon chemical prediction consensus from all applied *in silico* tools.
- peptide reactivity profiling data should be generated to test the hypothesis, that geraniol is activated by an abiotic activation mechanism (autoxidation)
- DPRA, KeratinoSens™, h-CLAT and U-SENS™ data should also be generated to enable a potency prediction using the SARA model

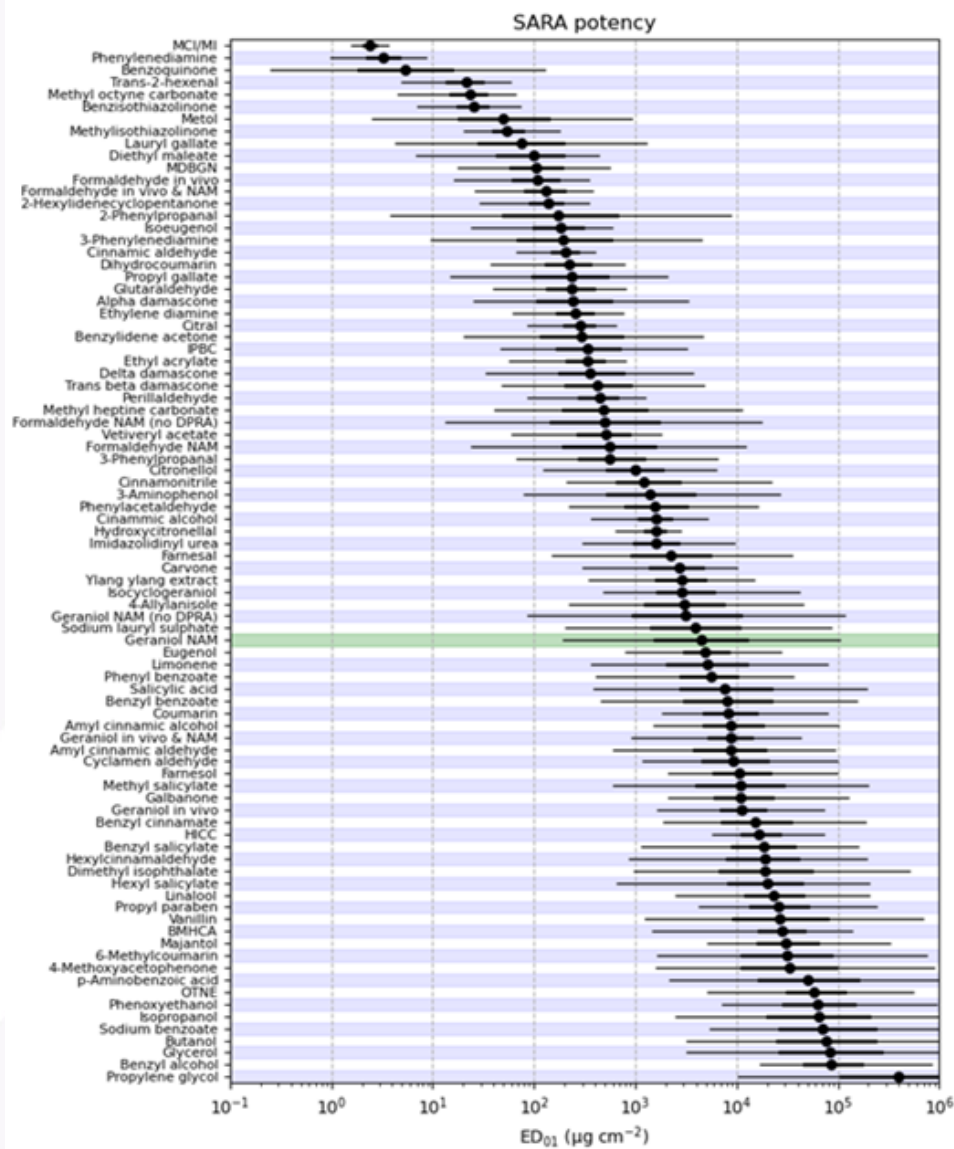
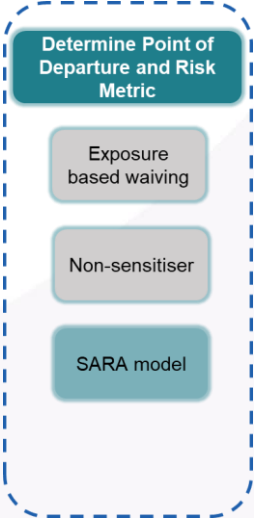
Data Generation



Reactivity Profiling	DPRA	KeratinoSens™	H-CLAT	U-SENS™
Cys (no adducts, 73.7 ± 0.8%)	Negative	Positive	Positive	Positive
Lys (no adducts, 3.5 ± 0.6%)	Cys depletion 0%	EC _{1.5} 110 µM	CD86 EC ₁₅₀ 123 µg ml ⁻¹	CD86 EC ₁₅₀ 53.6 µg ml ⁻¹
His (no adducts, -11.1 ± 8.0%)	Lys depletion 10%	EC ₃ >2000 µM	CD54 EC ₂₀₀ - µg ml ⁻¹	CV ₇₀ 113.9 µg ml ⁻¹
Arg (double Schiff base, 15.2 ± 0.2%)		IC ₅₀ 875 µM	CV ₇₅ 140 µg ml ⁻¹	
Tyr (no adducts, 8.2 ± 3.7%)				
N-term (acylation, Schiff base, 40.2 ± 1.1%)				
Ala (no adducts, -2.1 ± 17.0%)				

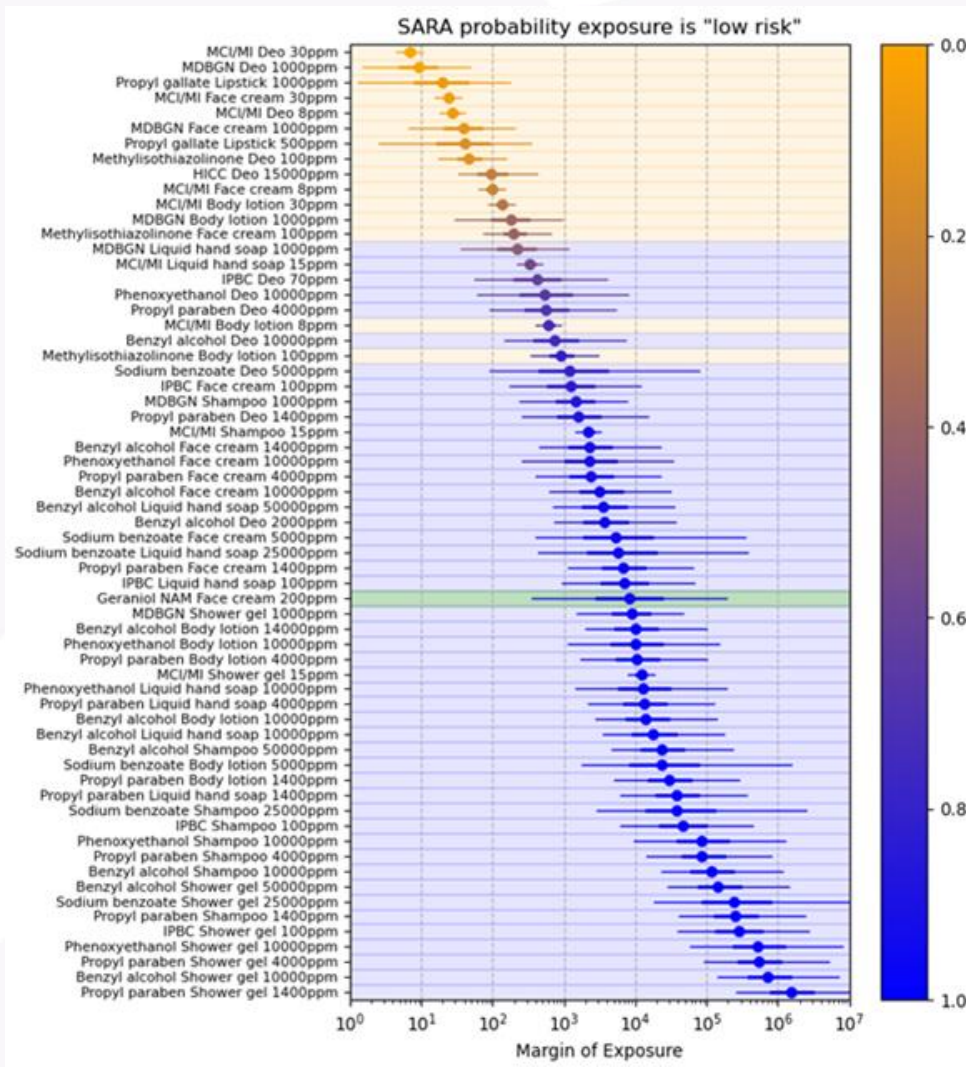
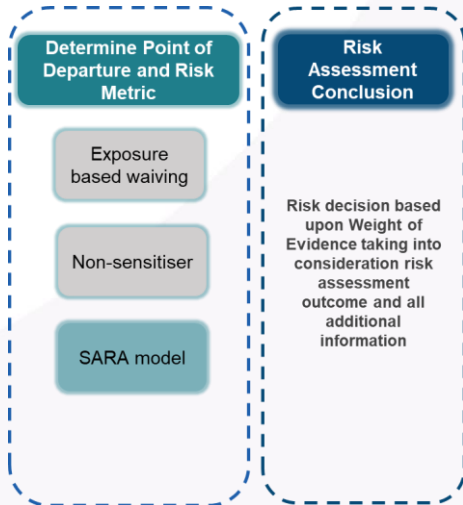
- Geraniol was confirmed to be a reactive chemical (Schiff base formation with amines following autoxidation) by peptide profiling
- Geraniol demonstrated minimal depletion of Cys and Lys in the DPRA. Positive responses were evident in the KeratinoSens™, h-CLAT and U-SENS™.
- Thus, the weight of evidence suggests geraniol is a skin sensitiser and The human potency (ED₀₁) was estimated using the SARA model

Determine Point of departure using SARA DA



- The generated DPRA, KeratinoSens™, hCLAT and USens™ data were used as inputs into the SARA model to define a human relevant PoD (ED₀₁ i.e the 1% sensitising dose for a HRIPT population).
- For geraniol (NAM data only), the expected ED₀₁ is 4,500 µg cm⁻² (2.5th percentile: 180 µg cm⁻², 97.5th percentile: 96,000 µg cm⁻². Geraniol ranks with eugenol (which based upon LLNA data is reported to be of moderate potency).

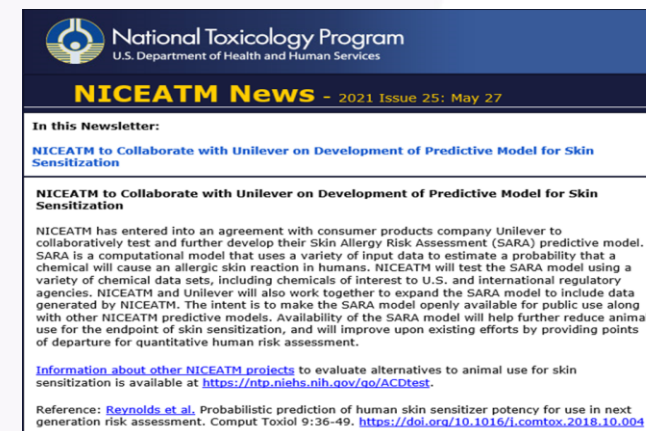
Determine MoE/Acceptable Exposure Level + NGRA conclusion



- The MoE was calculated from the ED₀₁ for geraniol and the dermal exposure for 0.02% geraniol in a face cream using SARA DA
- The MoE for 0.02% face cream exposure ranks with low-risk benchmarks.
- The SARA DA probability that this exposure is low risk is calculated to be 0.95. Thus, there is a 95% probability that this exposure is low risk.
- Geraniol used at 0.02% (200ppm) in a face cream is low risk for induction of skin sensitisation

Conclusions

- This case study provides an example of how NGRA approaches can be applied to skin allergy risk assessment.
- With the adoption of new risk assessment approaches, it is essential to demonstrate that they are sufficiently protective for consumers. Here we show historical exposures can provide a means to benchmark risk assessment outcomes using clinical experience.
- However additional clinical benchmarks still need to be identified, we aim to explore further with clinical partners how we can further build upon and refine the concept of using historical exposures (both high and low risk) to define the probability that a new exposure is high or low risk.
- We have initiated a collaboration with NICEATM to further develop the SARA model and make it available for public use.



The thumbnail shows a newsletter header for the National Toxicology Program, U.S. Department of Health and Human Services. The title is "NICEATM News - 2021 Issue 25: May 27". Below the header, the main article is titled "NICEATM to Collaborate with Unilever on Development of Predictive Model for Skin Sensitization". The text describes a collaboration between NICEATM and Unilever to develop and test the Skin Allergy Risk Assessment (SARA) predictive model. It mentions that SARA is a computational model that uses various input data to estimate the probability of an allergic skin reaction in humans. The newsletter also includes a reference to a study by Reynolds et al. on probabilistic prediction of human skin sensitizer potency.

Back up slides



SARA DA: partial datasets

- The SARA model can make predictions based upon any combination of the DPRA, KeratinoSens™, hCLAT and USens™ data.
- Predictions made using just KeratinoSens™ or hCLAT data yielded a marginally higher expected potency (lower ED₀₁) compared with the predictions made using just DPRA or USens™ data
- Combining data increases the precision in the estimate of potency (reduced uncertainty).

