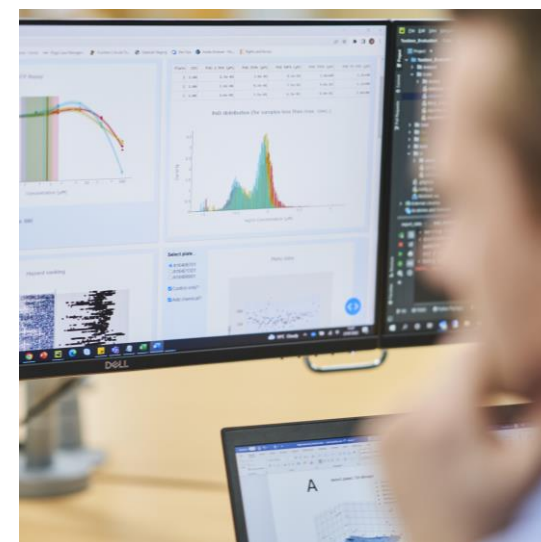


Next Generation Risk Assessment (NGRA) using New Approach Methods (NAMs) to Evaluate Systemic Safety for Consumers Using Benzophenone-4 as a UV-filter in a Sunscreen Product

Maria Baltazar, PharmD, PhD, ERT

Safety Science Programme Lead

Unilever Safety and Environmental Assurance Centre, UK



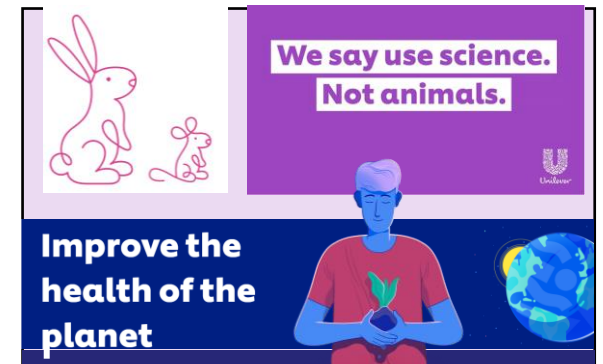
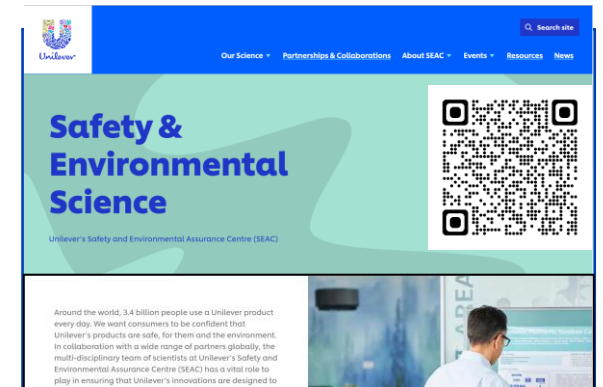
Unilever's Safety & Environmental Assurance Centre (SEAC)



SEAC is Unilever's global centre of excellence in Safety & Sustainability Sciences, part of R&D's Safety, Environment & Regulatory Sciences Capability.

Diverse, multi-disciplinary team of ~150 scientists based at Colworth, UK; ~70 miles north of London

Highly collaborative, working with over 70 academic, industry, government & NGO partners worldwide



Outline

- **Intro** – 5 mins
- **Problem formulation, in silico & exposure assessment** – 20 mins
- **Breakout discussion I**– 20 mins + 5 mins feedback
- **Bioactivity characterisation and risk assessment conclusion**- 15 mins
- **Breakout discussion II** – 20 mins + 5 mins feedback
- **Discussion** – 10 min

Purpose of the Workshop

- Make participants familiar with some of the available *in silico* and *in vitro* NAMs and promote a discussion about them – focus on systemic toxicity
- Showcase one way to integrate the presented NAMs in decision making using a real case industry application to inform a human-relevant safety decision
- To unpack our thought process whilst preparing the case study – truly end to end risk assessment, from problem formulation to safety decision

What is next generation risk assessment (NGRA)?

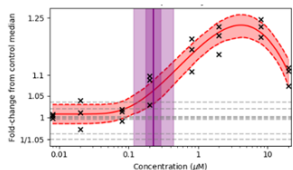
“An exposure-led, hypothesis driven risk assessment approach that incorporates one or more NAMs to ensure that chemical exposures do not cause harm to consumers”

Dent et al ., (2018) *Comp Tox* 7:20-26

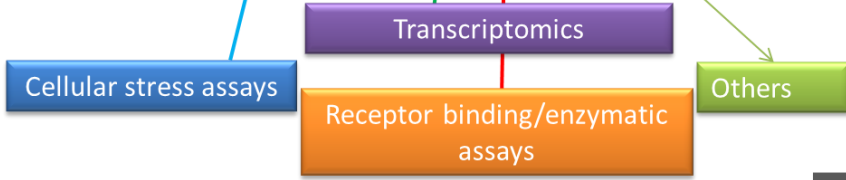


Approach to this Next Generation Risk Assessment – Protection of human health

Point of departure (POD) derived from concentration-response data



Systemic toolbox of assays (NAMs) which cover a broad biological space – measurements of bioactivity



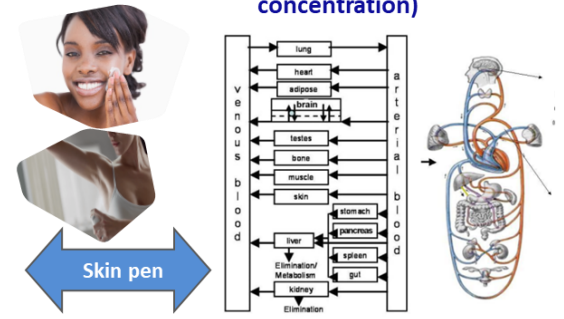
If there is no bioactivity observed at consumer-relevant concentrations, there can be no adverse health effects.

Calculation of Bioactivity exposure ratio (BER)

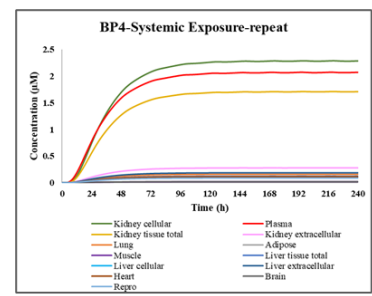
The BER is defined as the ratio between the POD and the relevant exposure metric

If there is bioactivity observed at consumer-relevant concentrations -> is it adverse?

Exposure models (PBK, free/total concentration)



Exposure estimation: Plasma C_{max}, organ distribution, AUC



Case study

Benzophenone-4 (BP-4) case study: Objectives & Approach

In 2019, the European Commission defined a list of 28 cosmetic ingredients with potential endocrine activity

BP-4 is one of the 28 chemicals for which the call for data took place

Objective of the case study:

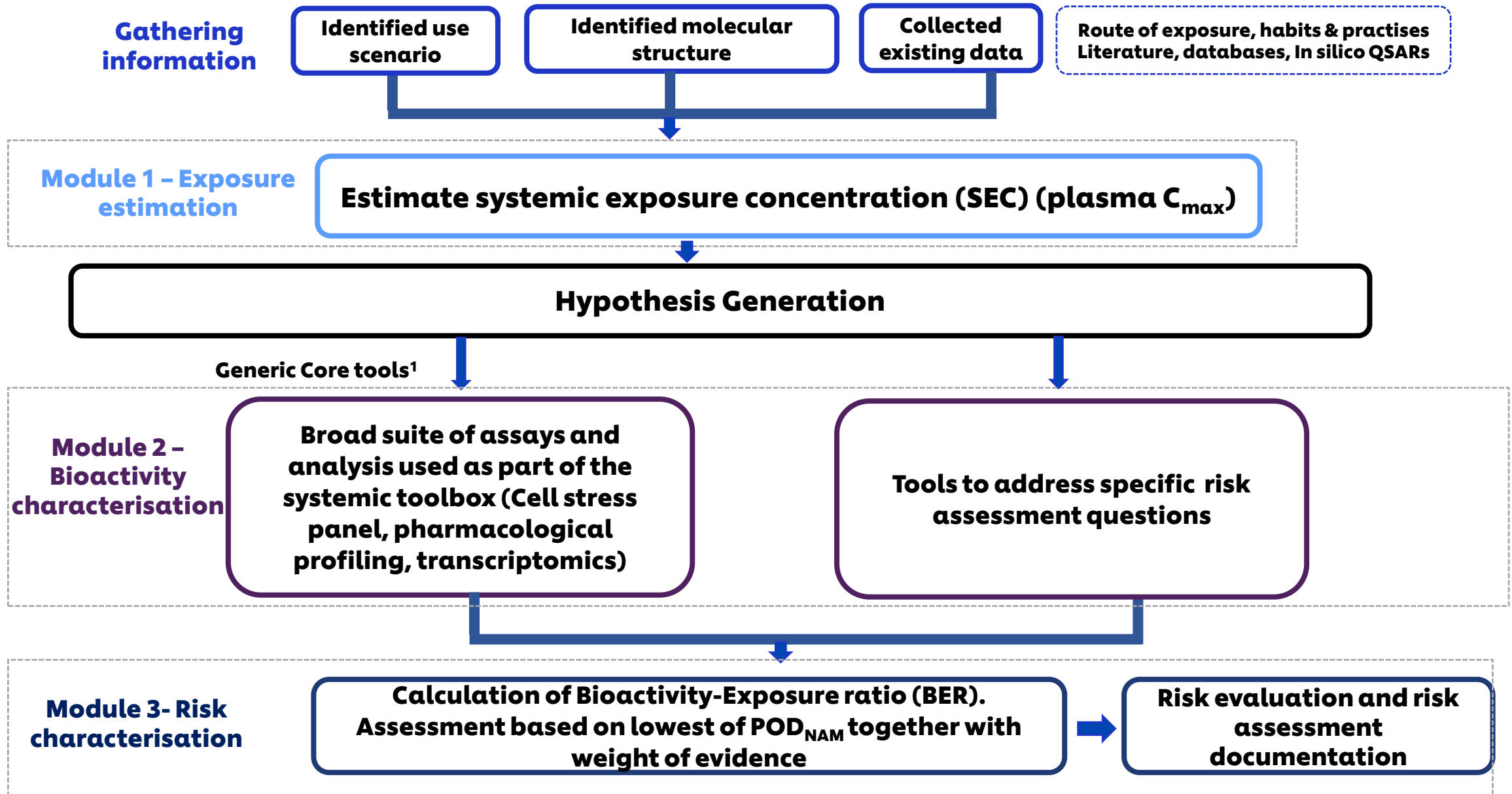
- **To assess whether a tiered NGRA approach is sufficiently protective and also useful to answer a real-life question**

Is Benzophenone-4 safe in a sunscreen product at the maximum approved level of 5%?



Benzophenone-4 (BP-4) case study: rules & assumptions

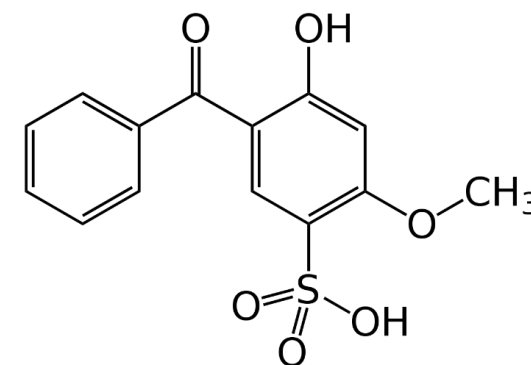
- For the purposes of this exercise, it has been assumed that **no *in vivo* animal data exist on the ingredient**
- Focus on **systemic toxicity**
- **Stand-alone illustration of how to assess systemic toxicity effects** (not including genetic toxicity) **using NAMs**



¹Middleton et al. (2022) *Toxicol Sci* (<https://doi.org/10.1093/toxsci/kfac068>)

Gathering information: Use scenario and molecular structure

- Benzophenone-4 (CAS No. 4065-45-6; EC No. 223-772-2) has been used up to 5% in Europe in cosmetics for decades as an ultraviolet (UV) filter and provides protection of the skin and hair from the harmful effects of the sun.
- Benzophenone-4 is water soluble, given the presence of a sulphate group in its chemical structure and an anion at physiological pH
- It is also used as a product protectant at much lower % inclusion levels as a UV stabiliser protecting cosmetic formulations against chemical breakdown by sunlight
- The specific use scenario of this case study is for dermal application of a leave-on sunscreen body lotion product containing benzophenone-4 at 5% w/w



Gathering information: Alerts from *in silico* tools

- DEREK Nexus



likely toxicity based on chemical structure

- METEOR Nexus



possible biotransformation based on chemical structure

- OECD QSAR Toolbox.



possible mechanisms of action

- TIMES

likelihood of skin sensitisation of the parent and metabolites

- OPERA



physchem, environmental fate, range of human-relevant toxicity endpoints

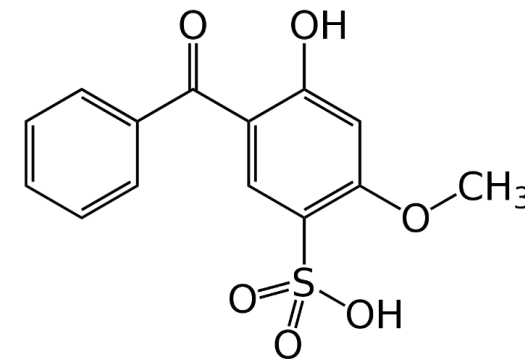
- VEGA



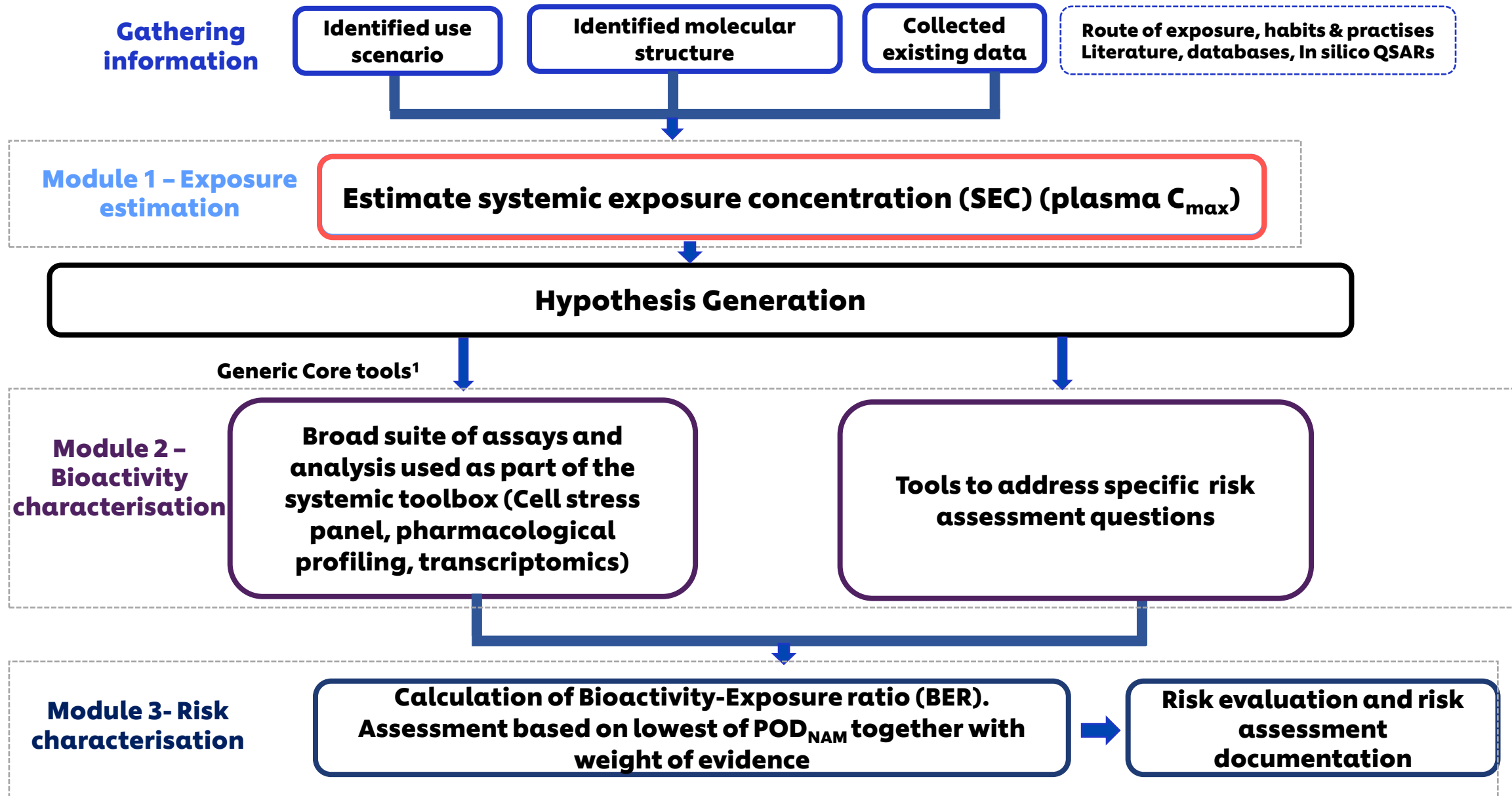
physchem, human-relevant toxicity endpoints

Gathering information: Alerts from *in silico* tools

- **Benzophenone-4 did not trigger many alerts within the tools used.** The most common alert across the tools was for skin sensitisation, or protein binding as an indication of skin sensitisation, in the DEREK, TIMES and OECD Toolbox outputs.
- No alerts for DNA binding, non-DART toxicant, no androgen agonism/antagonism
- Very few predicted metabolites (via hydroxylation and demethylation)
- **Benzophenone-4 triggered one potential alert for estrogen receptor binding in the VEGA profiler,** however this was not consistent across other profilers that also assess estrogen receptor activity.



CAS No. 4065-45-6; EC No. 223-772-2; *sulisobenzone*; 2-Hydroxy-4-methoxybenzophenone-5-sulphonic acid)



¹Middleton et al. (2022) *Toxicol Sci* (<https://doi.org/10.1093/toxsci/kfac068>)

Module 1: Exposure assessment

From applied dose to internal concentrations

External dose

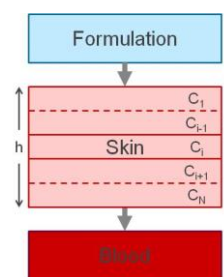
- **Route of exposure**
- **Consumer use (Habits & Practices)**
- **Applied dose (external concentration)**



ADME parameters

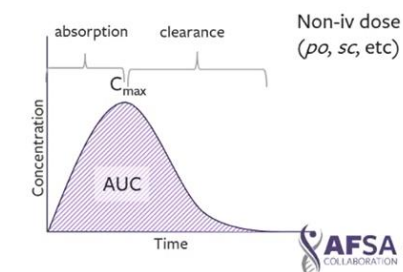
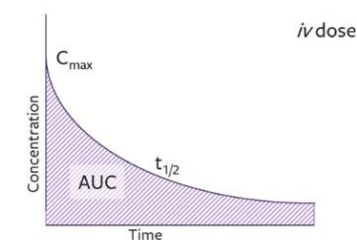
Absorption
Distribution
Metabolism
Elimination

- **Skin penetration**
- **Phys-chem properties**
- **Hepatic clearance**
- **Fraction unbound**
- **Blood:plasma ratio**



Kinetic profile of chemical

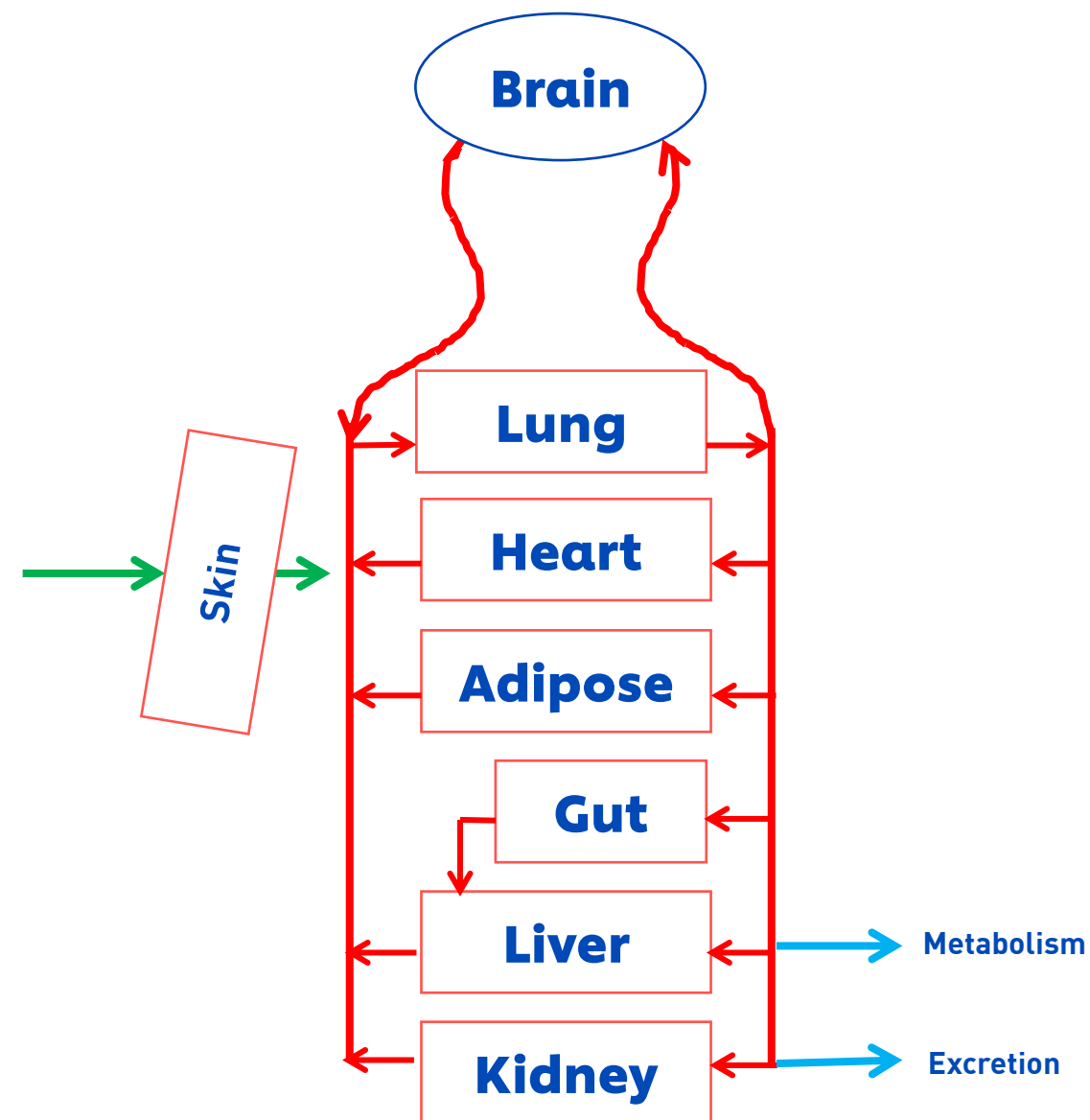
Physiologically-based kinetic (PBK) modelling
– Internal concentration (plasma, urine, organ-level)



Images from: AFSA training module "Dosimetry (Internal Exposure)", 2022

Module 1: Exposure assessment: What is PBK modelling?

- Mathematical description of interconnected compartments representing the human body
- Describe ADME (Absorption, Distribution, Metabolism, and Excretion) properties of a chemical within the body
- Prediction of concentration in blood, plasma, and tissues over time
- Can model an individual or a population



PBK modelling inputs– Exposure scenario, target individual/population, ADME parameters

Exposure scenario

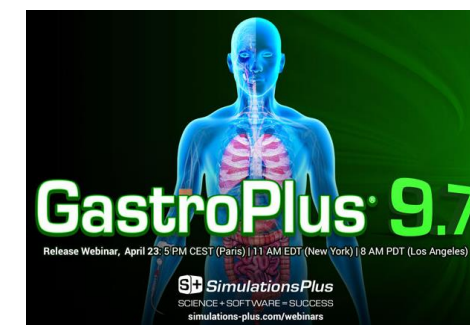
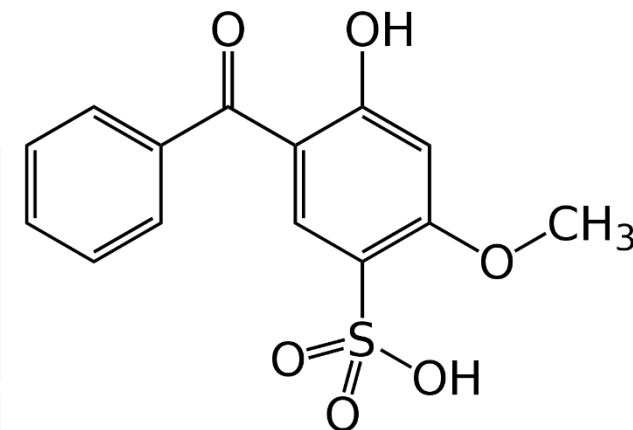
- 5% in Sunscreen product,
- 18g/day, two times, 9g/application,
- On body and face 17500cm² (total body area)

Physiological parameters

- Adult female, 30 years old, 60 kg (SCCS NoG 12th revision)
- PEAR (Population Estimates for Age-Related -Physiology™) was used to calculate organ weights, volumes, perfusions, and tissue-plasma partition coefficients for the 30 year old, 60 kg bodyweight person.

ADME In silico & data generation in vitro

- Dermal absorption (OECD TG 428)
- Blood to plasma ratio
- Plasma protein binding
- Metabolic stability (cryopreserved primary human hepatocytes)



PBK modelling inputs – ADME results

Main observations:

In silico

- **BP-4 was predicted to be cleared via liver metabolism (ECCS classification, Varma et al 2015)**
- **BP-4 was predicted to be substrate of several transporters by ADMET predictor**

Experimental

- **Very low skin penetration**
- **BP-4 stable in human hepatocytes. Hepatic intrinsic clearance <2.5L/h (Below LOQ)**

Conclusion: Conflicting data between in silico and experimental



Clarify hepatic clearance and understand the route of elimination

Hepatic clearance follow up: confirming the low permeability and the lack of metabolism

Human liver S9 incubation:

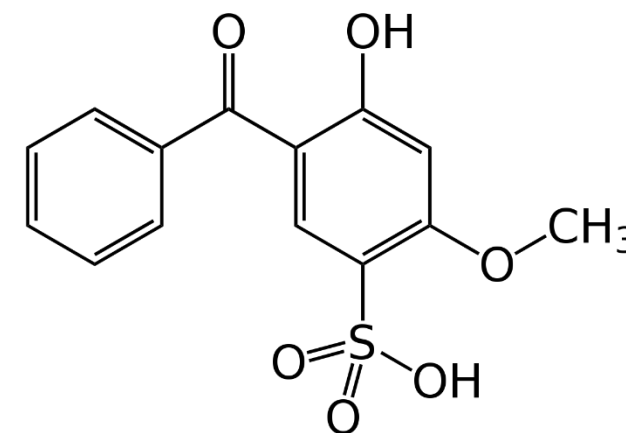
No metabolism of parent compound

- BP-4 is not a substrate of CYP enzymes
- High confidence that liver clearance is negligible (set to 0 in PBK).

Parallel artificial membrane permeability assay (PAMPA) assay:

Very low permeability

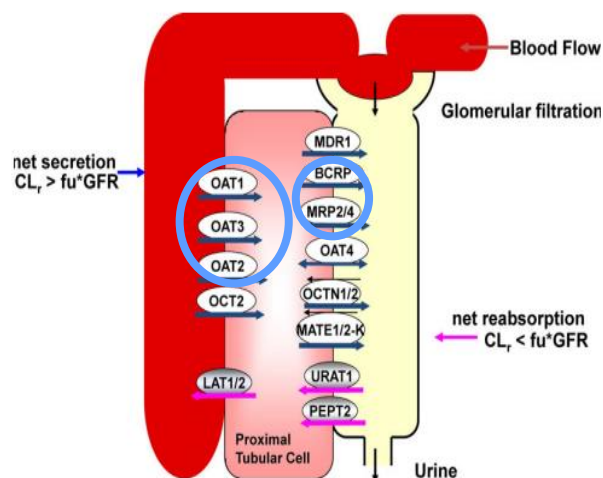
Next steps: Understanding chemical organ distribution and renal clearance



Understanding chemical organ distribution and renal clearance

1

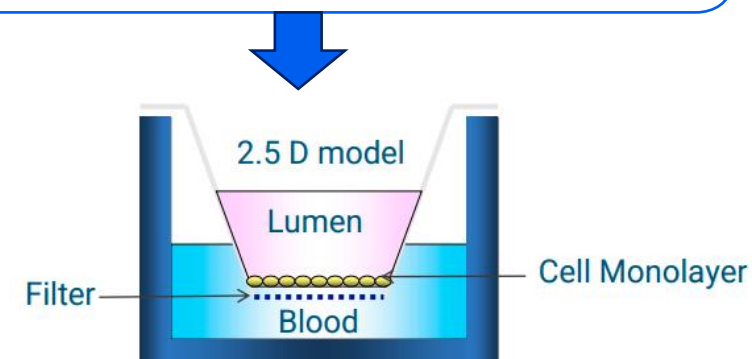
Transporter studies in transfected kidney cell



- Substrate of the influx transporters, **OAT1, OAT2, OAT3** and a substrate of the efflux transporters, **BCRP and MRP4**.
- All these transporters are expressed in the kidney, although **OAT-2, BCRP and MRP4 are expressed both in kidney and liver**

2

Transporter studies in freshly isolated kidney proximal tubule cells monolayer (αProximate™).

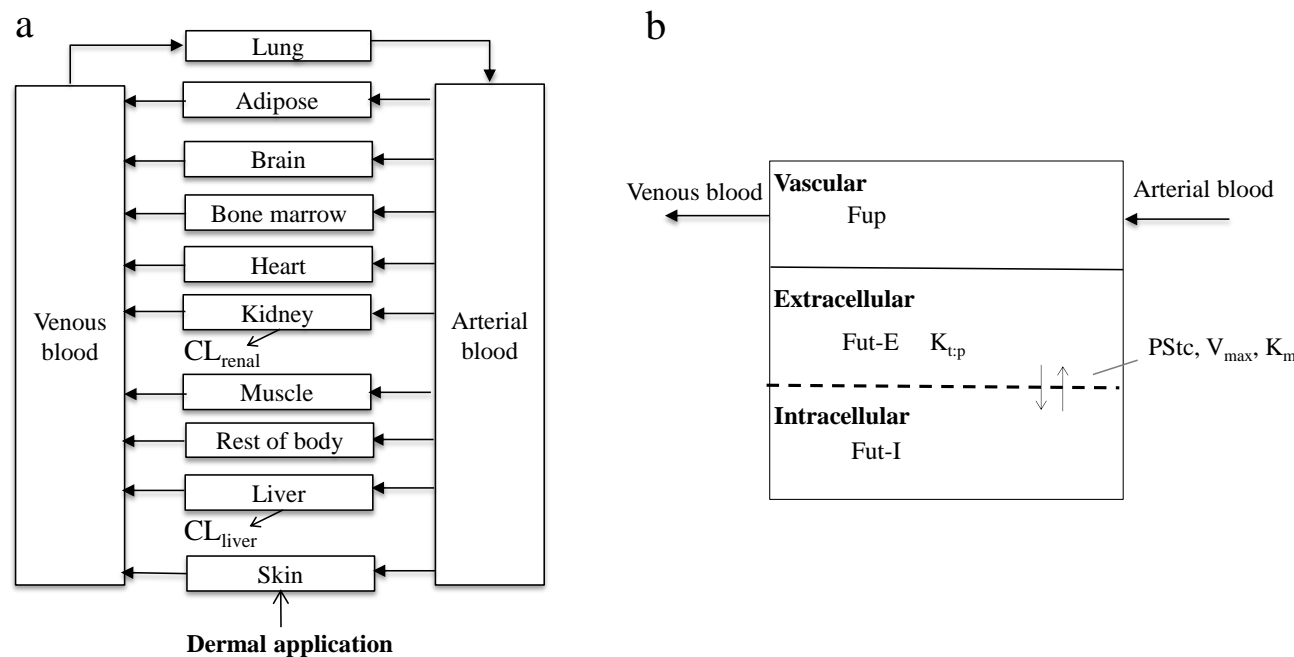


B-A → blood to urine → active secretion
A-B → urine to blood → reabsorption

- Transport in the proximal tubule cells is **equally efficient in both directions** leading to no net movement

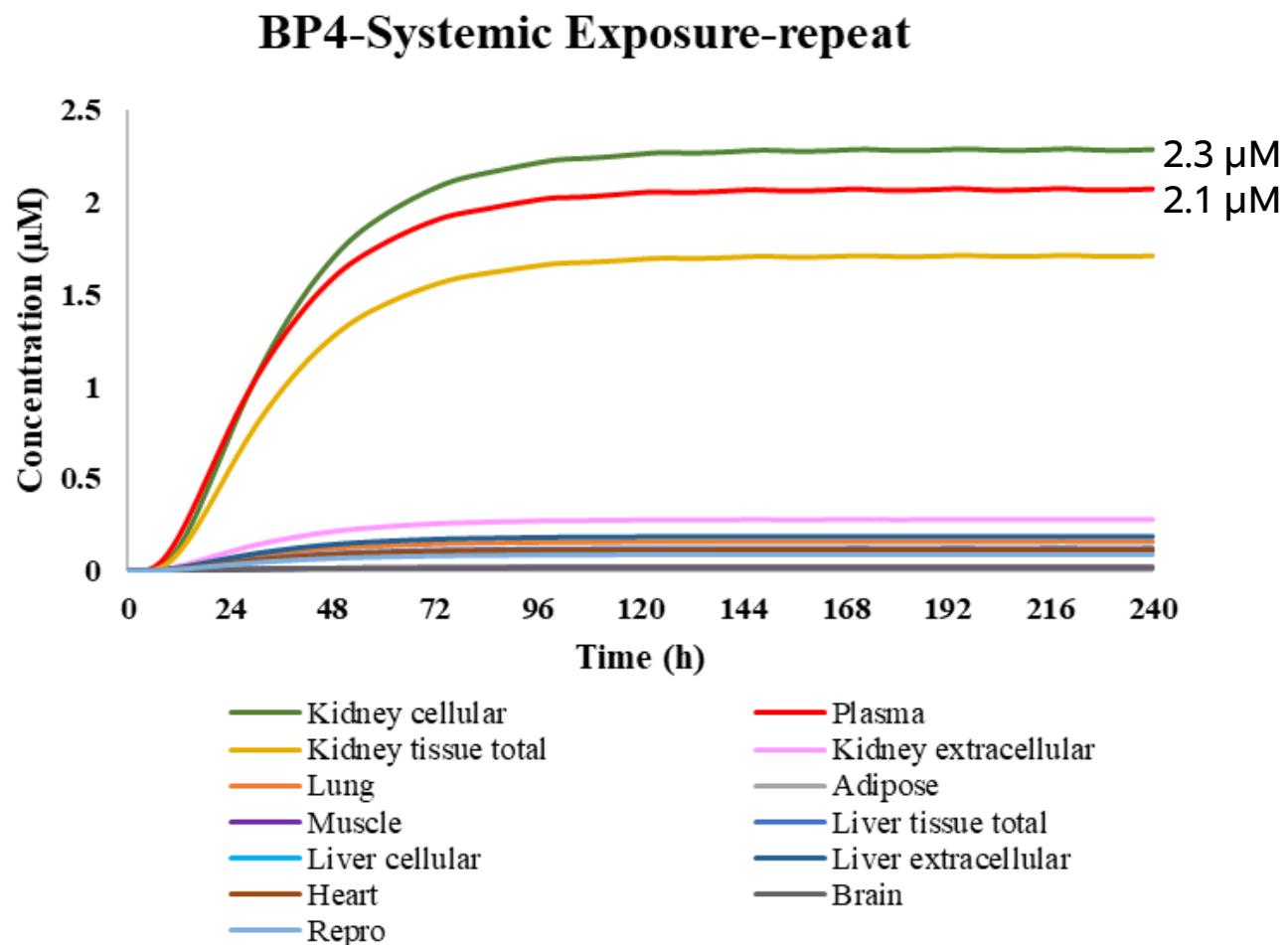
Update PBK model – choose the most conservative assumptions

- Set BP-4's distribution to each compartment to be modelled as permeability-limited
- Liver clearance set to 0
- Active transport in the liver was modelled by incorporating kinetic parameters for the transporters (OAT-2, BCRP and MRP4).
- $GFR \cdot F_{up}$ was used to calculate renal excretion of benzophenone-4, accounting for filtration only to be conservative



Human PBK model structure for BP4

Internal concentration: Deterministic PBK model simulation of C_{max} for an adult female (30 years old, 60 kg)



Benzophenone-4 concentrations in plasma and different tissues after repeated exposure of body lotion 18g/day, i.e., 9g twice per day for a period of 10 days, with 5% benzophenone-4, on the whole body.

To summarize BP-4's kinetic behavior in the human body:

- Overall, upon dermal absorption only a small amount of BP-4 enters systemic circulation, after which BP-4 remains unchanged due to negligible liver clearance.
- It has low tissue distribution due to low partitioning and limited passive diffusion of cell membranes (negatively charged at physiological pH).
- It can be taken up into the kidney and then excreted to urine via active transport and can be reabsorbed back to into the bloodstream, however, due to no preferred direction of movement, glomerular filtration determines the overall renal excretion rate.
- BP-4 can also move into and then out of the liver cells via active transport (OAT2).

Breakout discussion I

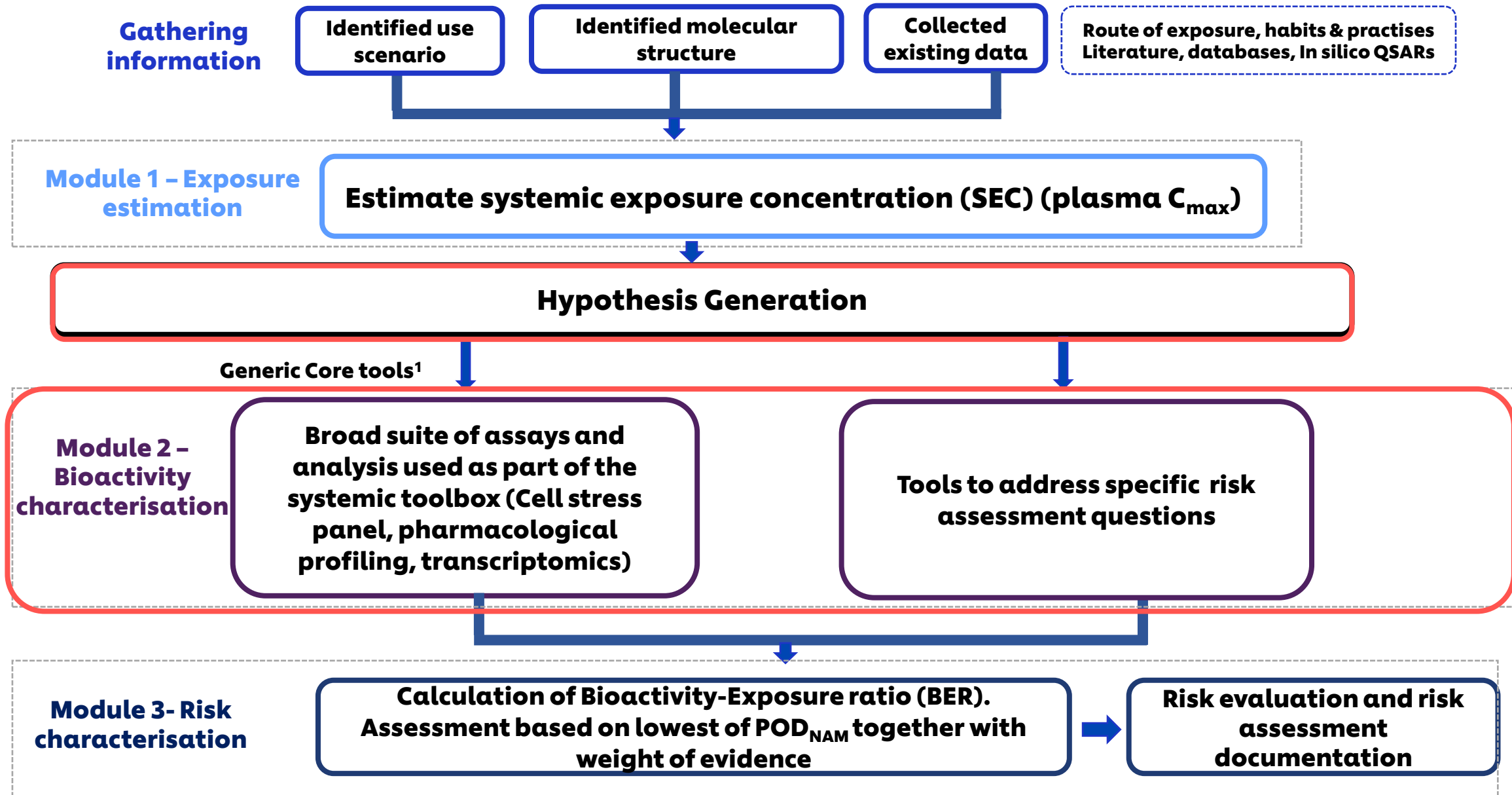


<https://app.sli.do/event/5BhpcwjEHnYGKMdJ3NfMae>

In your groups discuss the following:

1. How would these in silico predictions inform the next steps in the risk assessments? (i.e. follow up in vitro testing)
2. How confident are you in the predicted values of plasma C_{max} ?
3. How would you increase the confidence in the exposure prediction? (i.e. What other information would you like to have?)
4. How would these exposure results inform your next steps in the risk assessment?





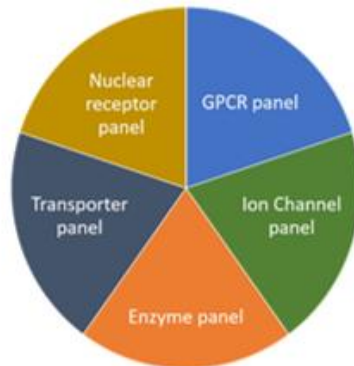
¹Middleton et al. (2022) *Toxicol Sci* (<https://doi.org/10.1093/toxsci/kfac068>)

Hypothesis Generation

- 1) Biological activity measured using a broad suite of human-relevant test systems is sufficiently protective. If bioactivity is not observed at concentrations experienced systemically in consumers then there are no adverse effects.**
- 2) In silico tools predicted binding to estrogen receptor.
- 3) PBK model indicated that the concentration of BP-4 is higher in the kidney than in any other organ, therefore a relevant kidney cell model was included in the testing strategy.

Module 2: Broad suite of assays and analysis used as part of the systemic toolbox

In vitro pharmacological profiling



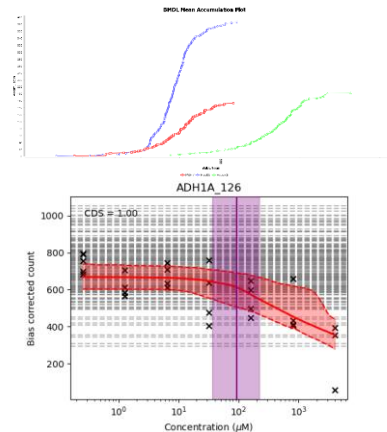
~79 targets

euofins | Cerep

Transcriptomics was applied as a broad non-targeted biological screen

High-Throughput transcriptomics (HTTr)

- TempO-seq technology – full gene panel
- 24hr exposure
- 7 concentrations
- Various cell models (e.g. HepG2, MCF7, HepaRG)
- Dose-response analysis using BMDExpress2 and BIFROST model



Reynolds et al. 2020. *Comp Tox* 16: 100138
Baltazar et al. 2020. *Toxicol Sci* 176(1): 236–252

PERSPECTIVES

Reducing safety-related drug attrition: the use of *in vitro* pharmacological profiling

Joanne Bowes, Andrew J. Bowes, Aracelis Hanson, Wolfgang Jankowiak, Alan Sridhar, Gareth Widdison and Steven Whitbread

Abstract | *In vitro* pharmacological profiling is increasingly being used earlier in the drug discovery process to identify undesirable off-target activity profiles that could hinder or halt the development of candidate drugs or even lead to market withdrawal if discovered after a drug is approved. Here, for the first time, the rationale, strategies and methodologies for *in vitro* pharmacological profiling at four major pharmaceutical companies (Amgen, AstraZeneca, GlaxoSmithKline, Novartis and Pfizer) are presented and illustrated with examples of their impact on the drug discovery pipeline. The hope is that this will enable other companies and academic institutions to benefit from this knowledge and consider joining us in our collaborative knowledge sharing.

Decreasing the high attrition rate in the drug discovery and development process is a primary goal of the pharmaceutical industry. One of the major challenges in achieving this goal is making an appropriate balance between drug efficacy and potential adverse effects. A key strategy to reduce safety-related attrition, particularly in the early stages of drug discovery and development, is to gain a better understanding of the *in vitro* pharmacological profile of a drug candidate early in the process. This is crucial for making the identification of safety issues leading to the use of approved drugs, or even leading to their market withdrawal, less likely to occur.

target (or targets), whereas secondary effects are due to interactions with targets other than the primary target (or targets). This is a key challenge in the development of drug candidates, as the identification of off-target interactions can lead to safety issues. *In vitro* pharmacological profiling of drug candidates in the drug discovery process might help to reduce the incidence of off-target effects.

In vitro pharmacological profiling involves the screening of compounds against a broad range of target receptors, ion channels, transporters and enzymes.

safety being of drug candidates and are designed to prevent serious ADRs from occurring in clinical studies.

The only *in vitro* pharmacology assay that is already required for regulatory authorities is one that measures the effects of new chemical entities on the activity of voltage-gated calcium channels (VGCCs), also known as hERG. The mechanism by which hERG inhibition can lead to potentially fatal cardiac arrhythmias (torsades de pointes) following a prolongation of the QT interval is well characterized¹, and the measurement of the hERG current prior to the submission of a new drug application is a mandatory regulatory requirement. Except for hERG, no other *in vitro* pharmacological assays are recommended as the first tier approach for the assessment of the dependence present in the human central nervous system.

In recent years, several regulatory agencies have encouraged the use of *in vitro* pharmacological profiling and have included the range of the discovery process in which *in vitro* pharmacological profiling should occur. Nevertheless, the general trend for most pharmaceutical companies is to perform this testing only in drug discovery to reduce attrition and to include better preclinical studies in the later stages of drug discovery and development.

Over the last five years, four major pharmaceutical companies (Amgen, AstraZeneca, GlaxoSmithKline, Novartis) have shared their knowledge and experience of the respective approaches of testing screening techniques to detect off-target interactions of compounds. The objective of this article is to describe the rationale and main advantages for the use of *in vitro* pharmacological

Bowes et al. 2012. *Nat Rev Drug Discov* 11(12): 909-22

Cell stress panel (CSP)

- 36 biomarkers covering 10 cell stress pathways
- HepG2
- 24hr exposure
- 8 concentrations
- Dose-response analysis using BIFROST model

To investigate specific biological activity with 44 key targets involved in drug attrition (Pharma) and additional targets relevant to exposure to cosmetics – now expanded to 79 targets

To characterize non-specific biological activity which is not mediated via a specific protein/receptor interaction

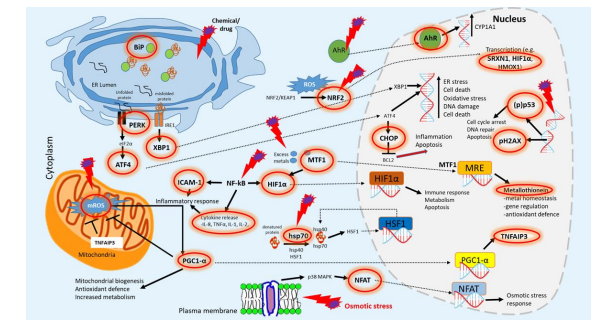


Image kindly provided by Paul Walker (Cyprotex)

Hatherell et al. 2020. *Toxicol Sci* 176(1): 11-33

High Throughput Transcriptomics (HTTr) applied as a broad nontargeted biological screen

- HTTr provides information **genome-wide biological perturbations**
- **Concentration-response** HTTr experiments can provide **potency estimates** for the concentrations of chemicals that produce perturbations in cellular response pathways
- **TempO-Seq technology** is the method adopted by the US EPA, Health Canada and in the APCRA case studies.

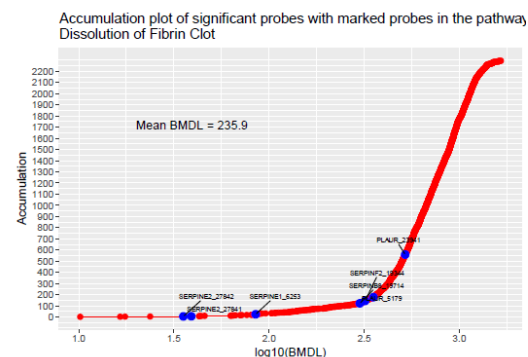
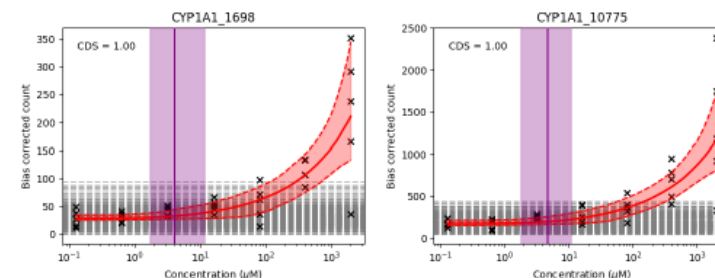
Experimental design for case study:

- Use of full human gene panel ~ 21k
- 24 hrs exposure, 7 concentrations
- 4 cell lines: HepG2 (OAT2), HepaRG (OAT2) and MCF7 (OAT1) and primary proximal tubule cells (PTCs; (aProximate™))

High Throughput Transcriptomics (HTTr) applied as a broad nontargeted biological screen

Data Analysis

- For the purposes of this case study, dose-response analysis and point of departure (POD) determination was performed using 2 different methods:
 - Global POD (BIFROST method):** Estimate of the highest nominal concentration of test substance at which there is no bioactivity.
 - Pathway average Bench Mark Dose Lowest (BMDL):** Average of all gene level BMDLs for genes within a pre-defined pathway using BMDExpress2. POD defined here is the lowest observed concentration that shows significant pathway perturbation.



Cell stress panel- 10 stress pathways responsible for cell homeostasis



- **~10 Stress Pathways: mitochondrial toxicity, Oxidative Damage, DNA damage, Inflammation, ER stress, Metal stress, Heat Shock, Hypoxia, Cell Health**

- HepG2 cells
- 36 Biomarkers;
- 24h exposure duration
- 8 Concentrations
- Dose response analysis and derivation of **Global POD by the BIFROST method**¹



TOXICOLOGICAL SCIENCES, 2020, 1-23

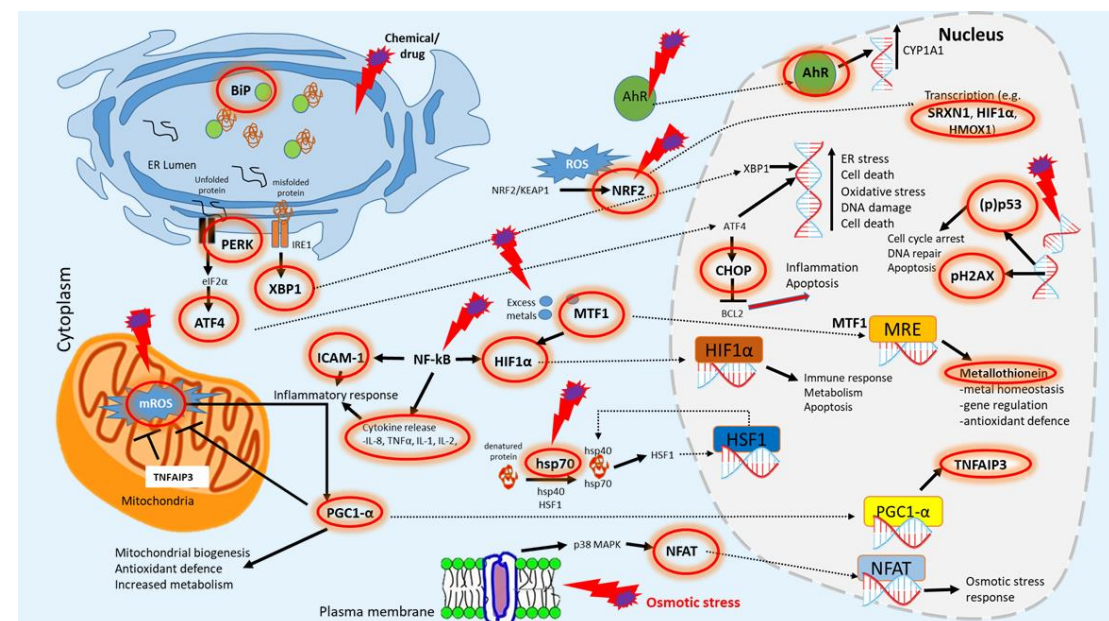
doi: 10.1093/toxsci/kfaa054
Advance Access Publication Date: May 6, 2020
Research article

FEATURED

Identifying and Characterizing Stress Pathways of Concern for Consumer Safety in Next-Generation Risk Assessment

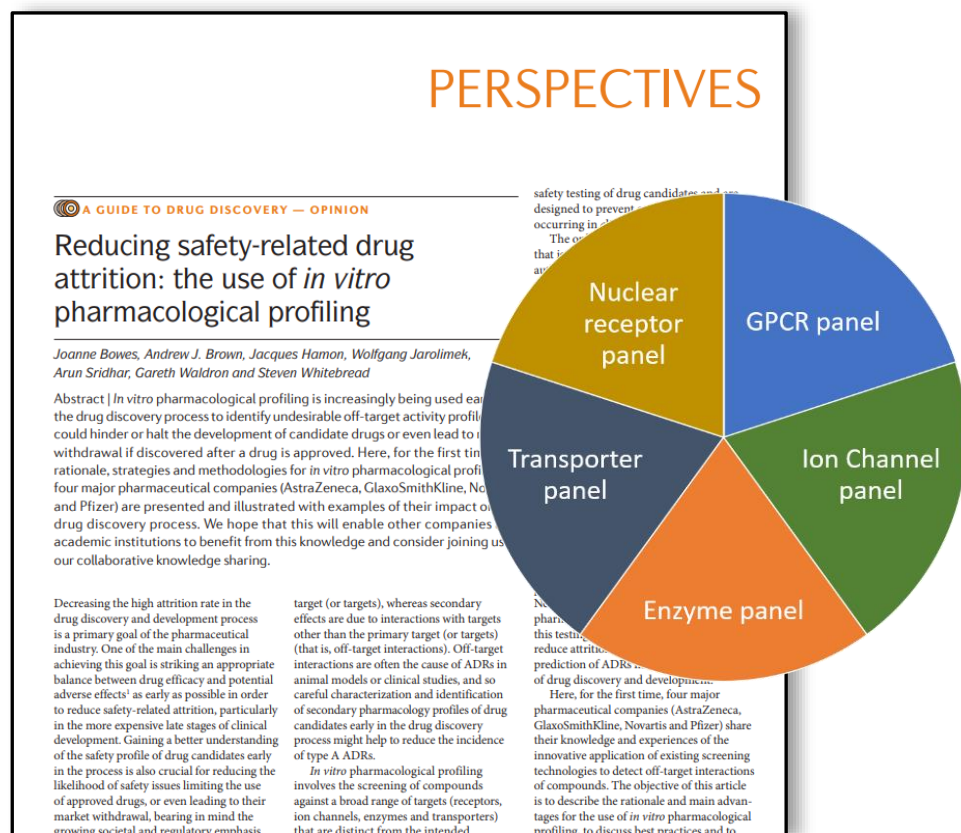
Sarah Hatherell,* Maria T. Baltazar,* Joe Reynolds,* Paul L. Carmichael,* Matthew Dent,* Hequn Li,* Stephanie Ryder,[†] Andrew White,* Paul Walker,[‡] and Alistair M. Middleton*¹

*Unilever Safety and Environmental Assurance Centre, Colworth Science Park, Sharnbrook, Bedfordshire



¹Middleton et al. (2022) *Toxicol Sci* (<https://doi.org/10.1093/toxsci/kfac068>)

In vitro pharmacological profiling- currently 79 targets



- Panel developed by the pharmaceutical industry and used during early drug discovery to predict, assess and minimise/avoid risk of potential off-target adverse drug reactions.
- Initial panel of 44 targets identified to be related to adverse health outcomes¹
- Cosmetics Europe/LRSS working group added 29 additional targets selected via literature review of 78 targets found in at least two separate sources (secondary pharmacology reviews, legacy data from companies)^{2,3,4}



DISCOVERY

1. Bowes J et al 2012. Nat Rev Drug Discov;11(12):909-22.
2. Lynch JJ et al., 2017 Pharmacol Toxicol Methods;87:108-126.
3. Smit IA et al., 2021 Chem Res Toxicol;34(2):365-384.
4. Letswaart R et al., 2020 EBioMedicine;57:102837

Hypothesis Generation

- 1) Biological activity measured using a broad suite of human-relevant test systems is sufficiently protective. If bioactivity is not observed at concentrations experienced systemically in consumers then there are no adverse effects.
- 2) **In silico tools predicted binding to estrogen receptor.**
- 3) **PBK model indicated that the concentration of BP-4 is higher in the kidney than in any other organ, therefore a relevant kidney cell model was included in the testing strategy.**

Module 2: Tools to address specific risk assessment questions

2. In silico prediction for estrogen binding

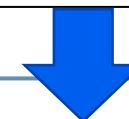


EATS activity: estrogenic, androgenic, thyroidogenic and steroidogenesis

- CALUX bioassays to measure transcriptional activation and binding assays: TTR-TR β - and hTPO
- U2-OS incorporating the firefly luciferase reporter gene coupled to Responsive Elements (REs)
- 12 concentrations. Calculation of AC50, LOEC and NOEC

3. Benzophenone-4 concentration was predicted to be higher in the kidney than any other organ

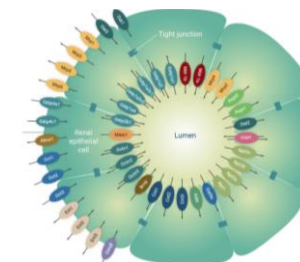
4. Cell models in the toolbox have limited expression of the relevant transporters



Renal Toxicity

Renal biomarkers (3 donors, duplicate per donor), 8 concentrations, 24h and 72h timepoints:

- KIM-1
- NGAL
- Clusterin
- TEER (Day 0 and Day 3)
- ATP
- LDH
- Toxicogenomics (3 donors, 2 duplicates per donor), 8 concentrations, 24h and 72h timepoints
- Omeprazole and cisplatin added as benchmarks/positive controls



[Newcells aProximate™ platform](#)

Piyush Bajaj et al. 2020. Toxicology. 442, 152535

Results from the key NAMs- Deriving Points of Departure (PoDs)

HTTr (HepG2, HepaRG, MCF7, PTC)

- Two approaches to calculating POD – BIFROST (gene level HepG2, 4.2 μM) and BMDL (pathway level HepG2, 240 μM)
- Significantly lower bioactivity was detected in PTC cells - BIFROST (gene level PTC, 320 μM) and BMDL (pathway level PTC, N/A)

Cell Stress Panel

- Global $\text{POD}_{\text{NAM}} = 140 \mu\text{M}$

In vitro Pharmacological profiling

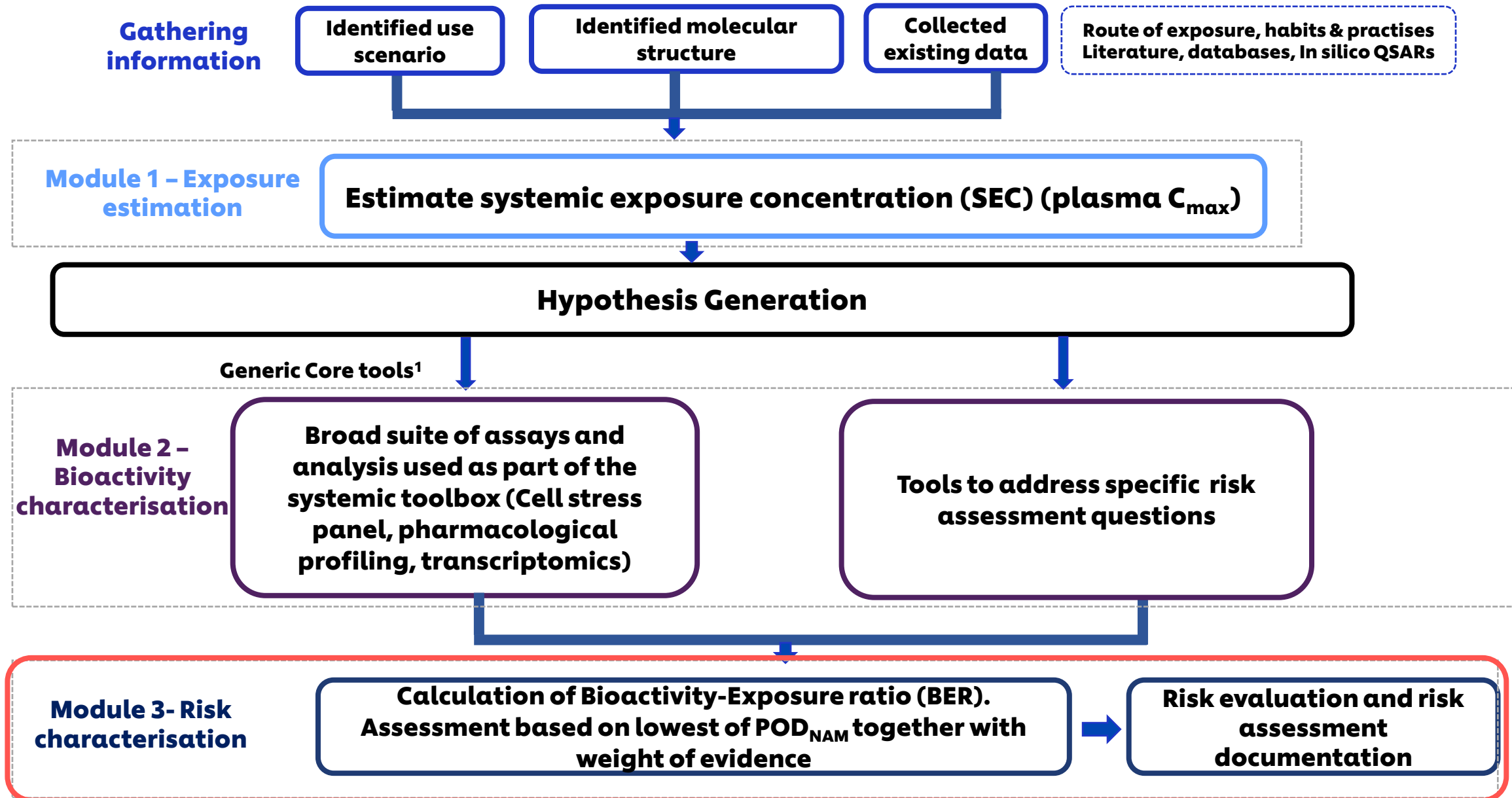
- Tested up to 10 μM
- ~79 targets compiled by Cosmetics Europe Safety pharmacology WG
- **No hits**

Calux assays

- No agonism or antagonism of ER, AR or TR and no effect on production of oestrogens or androgens $\pm\text{S9}$
- Activity towards hTPO and TTR was found at high concentrations (LOEC= 300-600 μM).

Renal biomarkers (PTC)

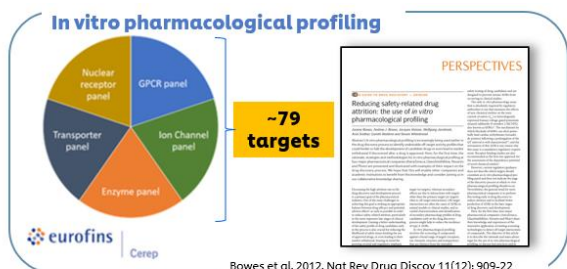
- No significant response for BP-4 (Cisplatin and Omeprazole gave expected dose-response at 72-h)



¹Middleton et al. (2022) *Toxicol Sci* (<https://doi.org/10.1093/toxsci/kfac068>)

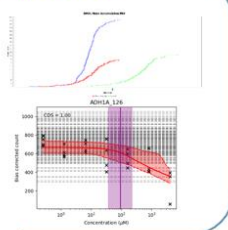
Risk Assessment Outcome

BIOACTIVITY



High-Throughput transcriptomics (HTTr)

- TempO-seek technology – full gene panel
- 24hr exposure
- 7 concentrations
- Various cell models (e.g. HepG2, MCF7, HepaRG)
- Dose-response analysis using BMDExpress2 and BIFROST model



Reynolds et al. 2020. Comp Tox 16: 100138
Baltazar et al. 2020. Toxicol Sci 176(1): 236–252

Cell stress panel (CSP)

- 36 biomarkers covering 10 cell stress pathways
- HepG2
- 24hr exposure
- 8 concentrations
- Dose-response analysis using BIFROST model

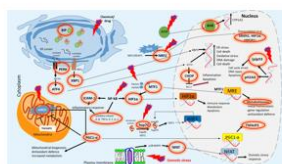
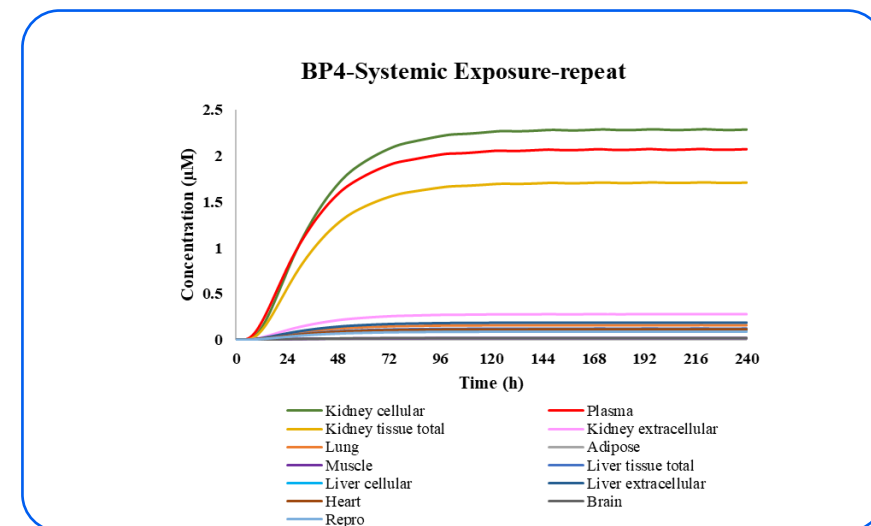


Image kindly provided by Paul Walker (Cyprotex)

Hatherell et al. 2020. Toxicol Sci 176(1): 11-33

EXPOSURE



Identify lowest (most sensitive) point of departure, expressed in µM

Identify realistic worst-case plasma exposure (C_{max}) expressed as µM

BIOACTIVITY EXPOSURE RATIO =

$$\frac{\text{BIOACTIVITY}}{\text{EXPOSURE}}$$

The bigger the BER, the greater the confidence that bioactivity will not occur in exposed consumers

Bioactivity: exposure ratio calculation: BER ranging from 2-300

Broad suit of assays

NAM	Cell type	POD _{NAM} Type	POD _{NAM} Value (µM)	BER (using C _{max} of 2.1 µM)
Cell stress panel	HepG2	Gene-based PoD	140	67
HTTr	HepG2	Gene-based PoD	4.2	2
HTTr	HepaRG	Gene-based PoD	52	25
HTTr	MCF7	Gene-based PoD	5.5	2.6
HTTr	HepaRG	Lowest pathway BMDL	530	252
HTTr	HepG2	Lowest pathway BMDL	240	114
HTTr	MCF7	Lowest pathway BMDL	330	157

Specific assays

NAM	Cell type	POD _{NAM} Type	POD _{NAM} Value (µM)	BER (using C _{max} of 2.1 µM)
Calux (hTPO-inhibition)	-	LOEC	300	143
Calux (T4 binding to TTR)	-	LOEC	630	300
Renal biomarkers (24 hr exposure)	PTC	PoD	>1000	NA
Renal biomarkers (72 hr exposure)	PTC	PoD	>1000	NA
HTTr (renal cells) (24 hr exposure)	PTC	Gene-based PoD	320	152
HTTr (renal cells) (72 hr exposure)	PTC	Gene-based PoD	320	152

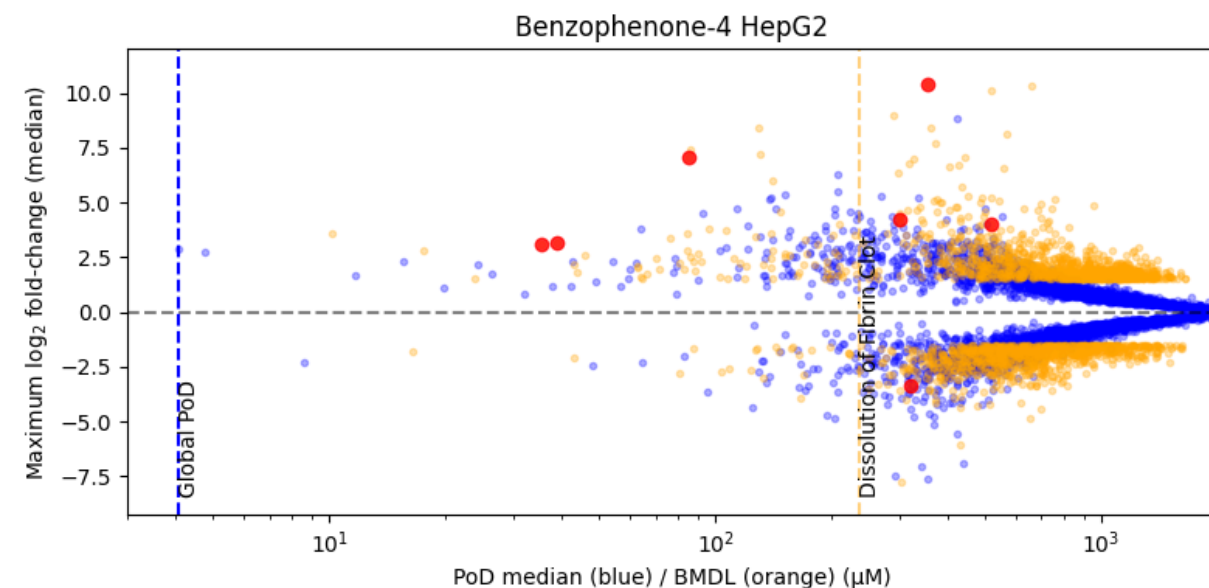
When is a BER sufficiently protective?

Conceptually, with the following assumptions a BER > 1 indicates a low risk of adverse effects in consumers following use of the product:

- a) The in vitro measures of bioactivity provide appropriate biological coverage
- b) There is confidence that the test systems are at least as sensitive to perturbation as human cells in vivo
- c) The exposure estimate is conservative for the exposed population

Safety assessment discussion

- Lowest BER across all PODs was obtained from HTTr in HepG2 cells when the BIFROST method was used (POD of 4.2 μM ; deterministic BER of 2)
 - *Single gene change of CYP 1A1*
 - *Lowest BMDL in the same cell line is 240 μM (deterministic BER of 114)*
 - This provides some assurance that the gene changes seen at 4.1 μM may be of limited toxicological significance.
- The BER calculated from the deterministic Cmax and cell stress panel global POD (the next lowest POD) was 67.



Safety assessment discussion

Conclusion: *Based on the tools and test systems used in this assessment and the assumptions used in the risk assessment, internal exposures would need to be greater than those predicted to lead to toxicologically significant systemic biological activity in consumers.*

Breakout discussion 2



<https://app.sli.do/event/5BhpcwjEHnYGKMdJ3NfMae>

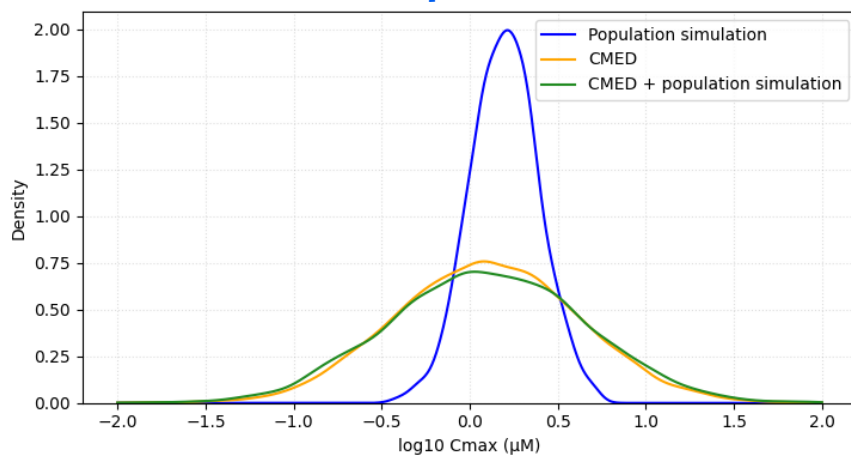
1. How confident are you about the use/interpretation of the bioactivity data?
2. How confident are you about making a risk assessment decision?
3. What are the main remaining uncertainties in the risk assessment?
4. What other data types/information would increase your confidence?



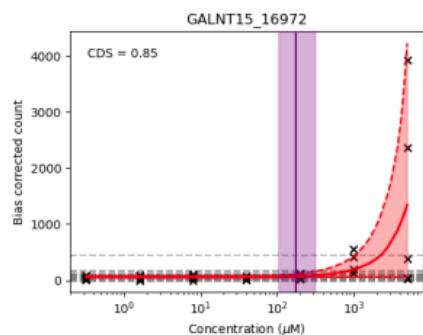
Addressing uncertainties in the safety assessment

Quantitative assessment-Probabilistic approaches for exposure & PoD determination

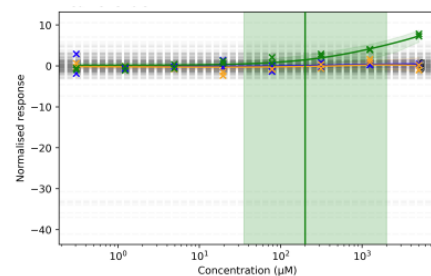
Population variability and uncertainty in model parameters



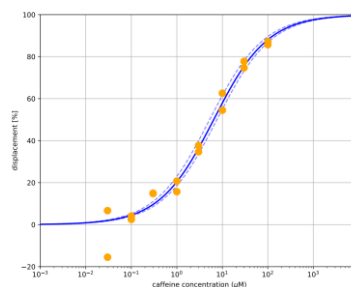
Gene expression



Cell stress panel



IPP target response



Qualitative assessment

Area	Level of certainty (rationale)	Is value likely to be an over- or under-estimate (rationale)	Impact on risk assessment decision
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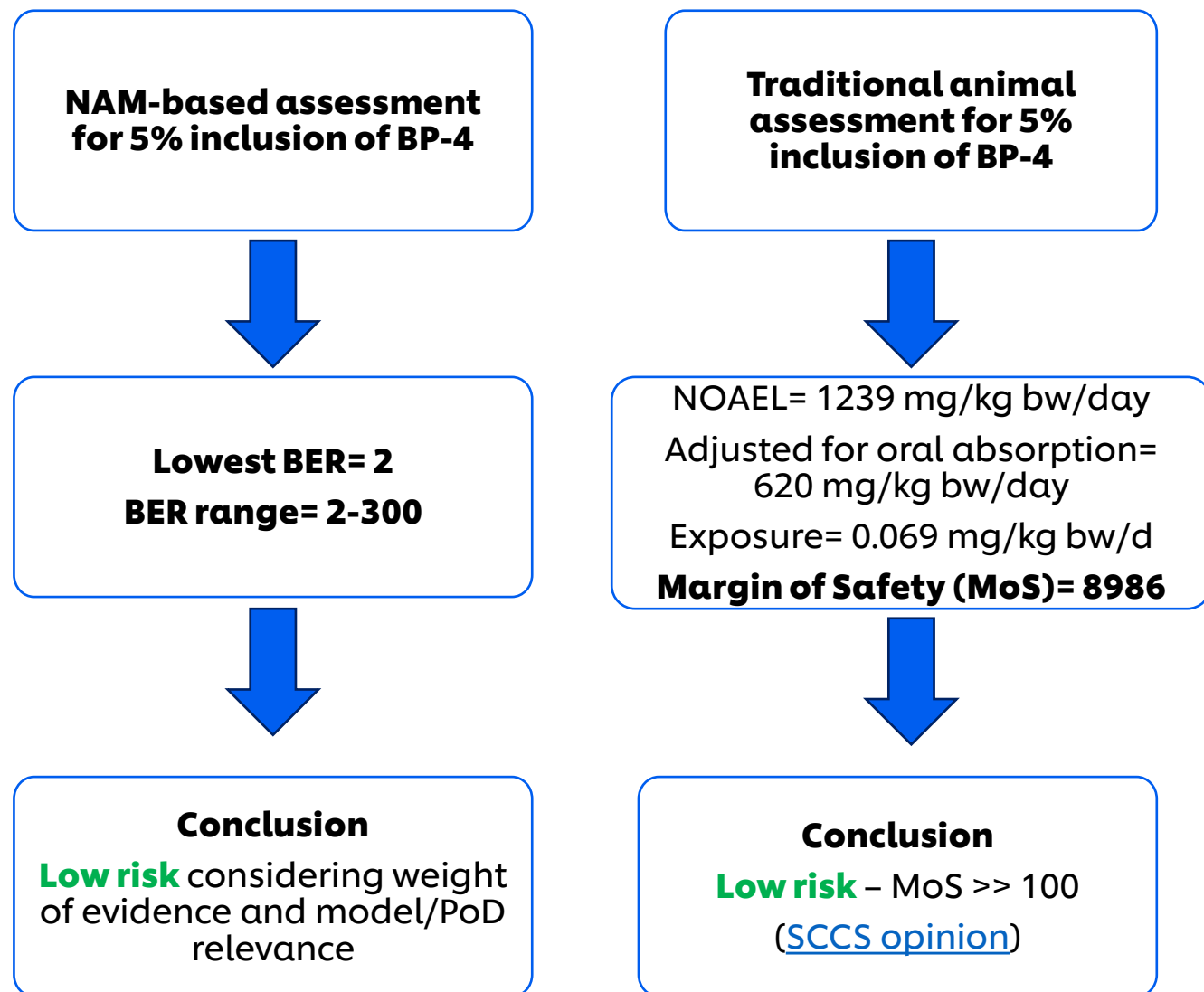
Areas

- Consumer exposure (applied dose)
- Identification of metabolites
- Consumer exposure (Internal dose)
- Range of biomarkers assessed
- Use of short-term tests *in vitro* to inform about risks of long-term human exposure
- Point of departure selection

Similar approach to OECD (2021): IATA for Phenoxyethanol

Area	Level of certainty (rationale)	Is value likely to be an over- or under-estimate (rationale)	Impact on risk assessment decision
Range of biomarkers assessed	Moderate (There is increasing evidence that POD_{NAM} obtained from the core NAMs, IPP, CSP and HTR are protective for a range of chemicals (Middleton <i>et al.</i> , 2022) and previous case studies (Baltazar <i>et al.</i> , 2020, OECD phenoxyethanol). The hypothesis and exposure driven approach led to the inclusion of additional NAMs to investigate potential endocrine activity and kidney toxicity)	Given the low activity of benzophenone-4 across all available assays together with its kinetic profile (low passive permeability and low organ distribution) it is considered unlikely a specific MoA exists that would affect the safety assessment	There are remaining uncertainties regarding the protectiveness of the tools utilised for a broader range of chemistries. Confidence could be increased by assessing how protective the range of biomarkers are for many more compounds and whether different biomarkers are needed to ensure the <i>in vitro</i> PoD is protective compared with the <i>in vivo</i> PoD

Conclusions & reflections

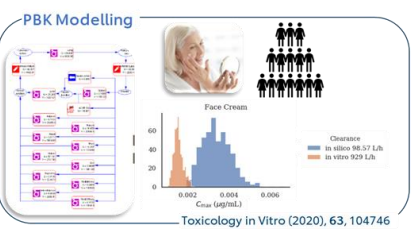
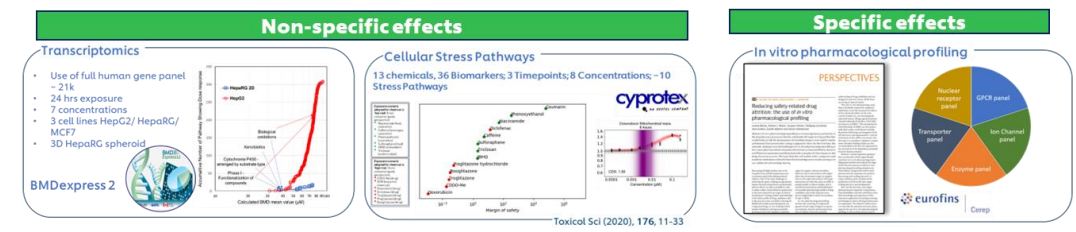


NAM-based risk assessments are in general more conservative than traditional approaches

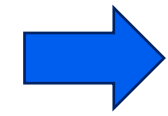
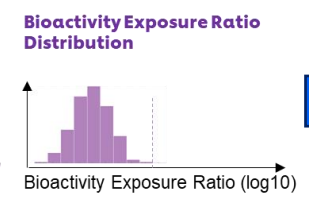
- Middleton et al. (2022) *Toxicol Sci* (<https://doi.org/10.1093/toxsci/kfac068>)
- Reardon A et al., 2023 <https://doi.org/10.3389/ftox.2023.1194895>
- Zobl et al., 2023 <http://dx.doi.org/10.14573/altex.2309081>
- Paul-Friedman K et al., 2020: <https://doi.org/10.1093%2Ftoxsci%2Fkfz201>
- Baltazar MT et al., 2020: <http://dx.doi.org/10.1093/toxsci/kfaa048>
- Ebmeyer et al., 2024: <https://doi.org/10.3389/fphar.2024.1345992>

Ongoing work to build confidence in the core toolbox for Tier 1

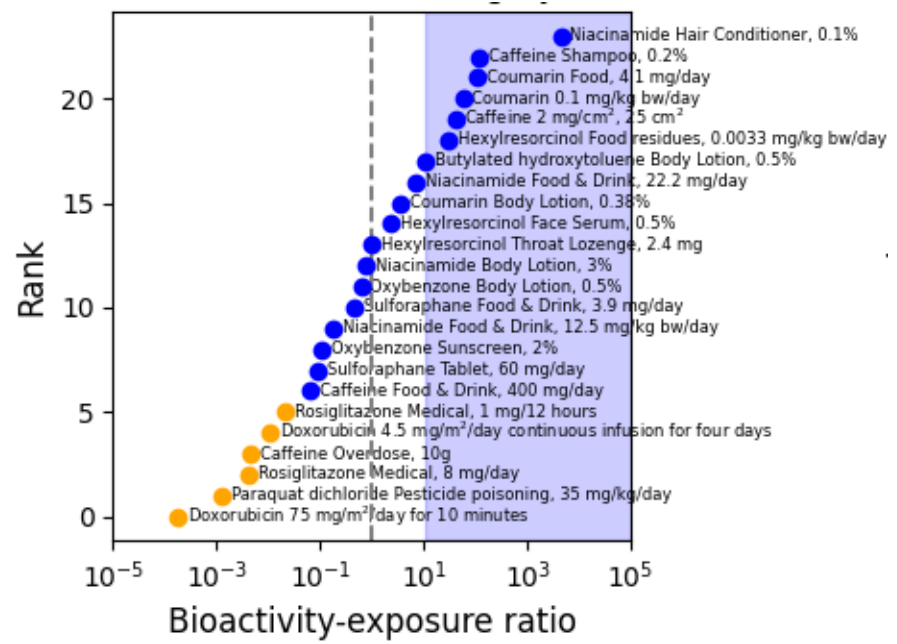
Point of Departure determination



Plasma C_{max} estimate → C_{max} Error Distribution model (CMED) (Bayesian model)



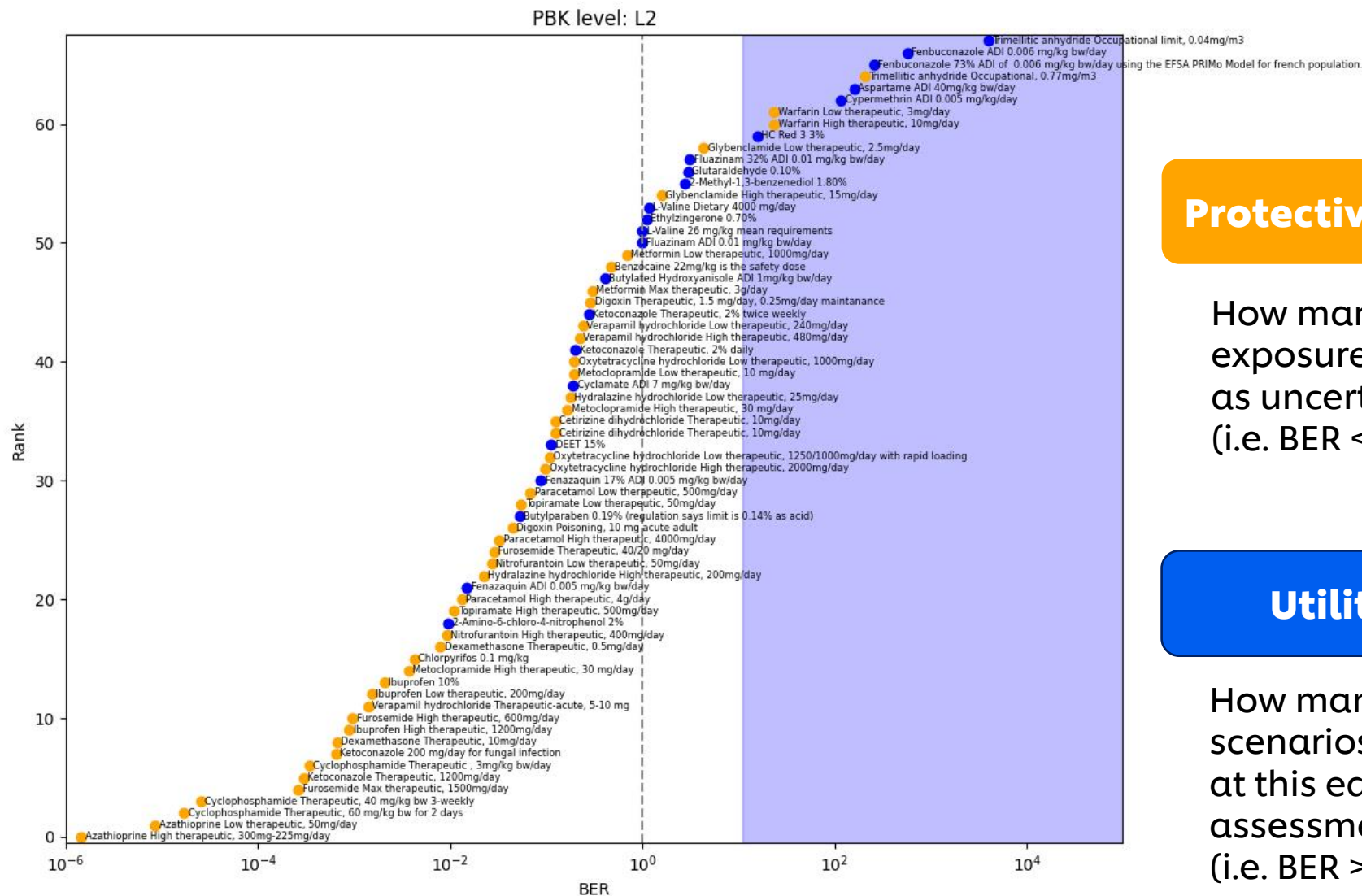
First pilot 10 chemicals, 24 exposure scenarios



- 'Low' risk for consumers from systemic perspective
- 'High' risk for consumers from systemic perspective



Results for a set of 38 test chemicals and 70 exposure scenarios (manuscript in preparation, Cable et al)



Protectiveness

93% (43 out of 46)

How many of the high risk exposure scenarios are identified as uncertain/high risk (i.e. BER < threshold)

Utility

27% (6 out of 22)

How many of the low risk scenarios are identified as low risk at this early tier stage in a risk assessment framework (i.e. BER > threshold)

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Eurofins

BioClavis

Cyprotex

SOLVO

BioDetection Systems

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