





(Food) Toxicology and Risk Assessment

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QUESTIONS? COMMENTS? CONTACT ME AT KATHERINE.FLYNN@SAFECONSORTIUM.ORG

Today's Outline

Toxicology: Introduction

Determining Toxicity

Some Possible Food Toxicants: Pesticide Residues, Food Additives, Food Packaging

Risk Assessment: Hazards, Exposure, Characterisation





Toxicology: What is it?



- View of toxicology has changed over time
- Six areas of Applied Toxicology recognised today
 - Analytical, Clinical, Environmental, Forensic, Occupational, Regulatory

Toxicology's Basic Principle: « The dose makes the poison »

Egyptian Medical Papyrus (1500 BC) discussing poisonous plants therapeutic agents

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or tood save the Safe (deadour?) consortium

Old and New Poisons:

Hemlock. Execution of Socrates in 399 BC Dioxin. Disfigurement of Viktor Yushchenko in 2004







2,3,7,8-Tetrachlorodibenzodioxin







the study of *adverse effects*

of chemical, physical or biological agents

on living organisms and the ecosystem,

including the prevention and amelioration of such effects



Adverse effect

A change in morphology, physiology, growth, reproduction, development or lifespan of an organism

which results in an impairment of functional capacity

or impairment of capacity to compensate for additional stress

or increased susceptibility to the harmful effects of other environmental influences.

World Health Organization, 2004

The range of adverse effects is enormous:

From immediate death

to subtle molecular or behavioral changes in the next generation

Unintentional Toxicants



- Pharmaceuticals
- Household chemicals
- Cosmetics
- Food Toxicants
 - Natural or deliberate or accidental

Adverse Side Effects of Antidepressants

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Workers

Natural and Industrial disasters

Unintentional Toxicants



Since WWII more than 80.000 new chemicals have been invented

Many of these are widely dispersed in the environment

- In the US, more than 4 billion pounds (1.8 trillion kg) of synthetic chemicals are released into the environment every year by industry.
 - 72 million pounds are known carcinogens. (Mt.Sinai Med Center, USA)

Many of these are ingested with our food

Only a fraction have been tested





Toxicology Testing

Many scientific specialties are involved

Biology, chemistry, environmental science, epidemiology, genetics, physiology, pathology

*****The aim is to determine how an organism is affected by a substance

- How the substance enters the body
- How it moves throughout the organism
- How it may be changed within the organism, metabolised
- What parts of the organism are affected
- The health outcomes of exposure
- How the substance is excreted



QUESTION

Which of the following news headlines are concerned with issues relating to toxicology?

- Arsenic Widespread in Bangladeshi Water
- Sarin Gas Attack on the Tokyo Subway
- Gas Leak Accident in Bhopal: An Indian Tragedy
- Hormone Disrupters in Everyday Foods
- Toxic Chemicals in One-Third of Fast Food Packaging
- Adults and Children Suffer Lead Posioning From Public Water in Flint Michigan
- All of the above

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Determining Toxicity: Dose





"All substances are poisons; there is none which is not a poison. The right dose differentiates a poison and a remedy."

The dose makes the poison

« Alle Dinge sind Gift und nichts ist ohne Gif. Dosis macht, dass ein Ding kein Gift ist. »

Substance	Non-Toxic or Beneficial Dose	Toxic Dose	Lethal Dose
Alcohol ETHANOL BLOOD LEVELS	0.05 %	0.1 %	0.5 %
Carbon Monoxide % HEMOGLOBIN BOUND	< 10 %	20 - 30 %	> 60 %
Secobaraital (sleep aid) BLOOD LEVELS	0.1 mg/dL	0.7 mg/dL	>1 mg/dL
Aspirin	0.65 gm (2 tablets)	9.75 gm (30 tablets)	34 gm (105 tablets)
lbuprofin E.G., ADVIL & MOTRIN	400 mg (2 tablets)	1,400 mg (7 tablets)	12,000 mg (60 tablets)



- There are not good chemicals and toxic chemicals (substances).
- Anything can be toxic.
- The degree of toxicity varies and the dose which causes toxicity varies.

Principles of Clinical Toxicology (T. Gossel and J. Bricker, eds)

Determining Toxicity: Dose has many meanings



- Exposure (or Administered) Dose
- Absorbed Dose: what enters the body
- **« Effective » Dose:** what is at the site of action and active
- Total Dose: considers amount, frequency, length of time

Dose may be measured in amount (mg) or in amount per weight of the individual (mg/kg) or, for chronic exposure such as foods, in *amount per weight of the individual per time (mg/kg/day)*



Determining Toxicity: The Dose-Response Relationship





Many possible « responses » in a Dose-Response study!



Enzyme Inhibition

Inflammation

Cell death (necrosis)

Biochemical uncoupling or lethal synthesis

Covalent bonding

Free radical oxidation of lipids

Receptor interactions

Other possible responses to measure (7):

Allergy (immune hypersensitivity)

Behavioural changes

Cancer (aberrant cell division)

Developmental (effects on fetus)

Immune supression

Mutation (genotoxicity or DNA interference)

Reproductive (effects on conception)

Population Dose-Response Curve



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Normal distribution parameters





Classic D-R curve





On the x axis: the dose

On the y axis: the proportion of animals exhibiting a particular response, here death

LD₅₀: Lethal Dose 50 or dose which kills one half of the animals.

THRESHOLD: lowest dose at which there is an effect.



QUESTION

Which substance is more dangerous?

 \mathbf{V} One with an LD₅₀ of 5 mg/kg

□One with an LD₅₀ of 50 mg/kg

Different substances have different D-R curves





Same substance may have different D-R curves for different endpoints





Important points on a D-R curve





***LD50**

Lethal Dose 50.

NOAEL

 No Observed Adverse Effect Level. The highest tested dose at which no effect was observed.
 THRESHOLD is just after this point

LOAEL

Lowest Observed Adverse Effect Level. The lowest tested dose at which an effect was observed.

The NOAEL or LOAEL in animals is often used to make decisions on maximum recommended exposures for humans.

Many factors can affect response to a toxicant



•Species





- Some others (12):
- •Age
- •Weight
- •Gender
- •Overall health
- Nutrition
- •Other exposures
- Route of administration
- Temperature
- •Time of day
- Season
- •Gut contents
- •Sex life

Determining Toxicity. Cancer D-R Curve

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The D-R model here assumes no threshold. That is no dose is without effect.

Starting from a threshold of zero, a line is drawn to reach the lowest dose that caused cancer in an animal study.

This is used to predict cancer risk at specific doses in humans.



Atypical D-R Curves: U-shaped





Vitamins and trace elements have U shaped D-R curves

- Toxicity from too little, « Deficiency »
- Toxicity from too much,
 « Hypervitaminosis »
- ✤ A range of homeostasis

Often too little and too much have unrelated effects

Vitamin A



- Deficiency is the leading cause of preventable blindness in children in poor counries
- Vit A needed for RHODOPSIN





- Hypervitaminosis A causes central nervous system effects: headaches, nausea, irritability
- Vit A is fat soluble and crosses the BBB

Atypical D-R curves: Hormesis



J-Shaped D-R Curve

- Opposite effect at low dose
 - Not a different response
 - Not a deficiency
 - Not beneficial then adverse
- Counter-intuitive



Many substances have hormetic D-R curves







QUESTION

The dose level at which a toxic effect is first encountered is known as the Threshold dose First dose

Median toxic dose

LD50 dose

QUESTION



Which of the following does not affect toxicity?



Whether the agent is inhaled or ingested



Whether the exposed organism is male or female



Whether the agent is synthetic or naturally occurring



Whether the exposure is continuous or sporadic



Whether the exposed organism is a child or an adult



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Pesticide Residues

Pesticides are poisons. Used as directed, they kill

- Fungicides kill fungi
- Insecticides kill insects
- Herbicides kill plants
- Rodenticides kill rodents
- Bactericides kill bacteria
- etc.

Pesticides are meant to be species-specific toxicants. Do they have effects on non-target organisms?





Personal protection equipment required for pesticide application

Food Additives any substance intentionally added to food



Many agencies study the safety of food additives

- Joint FAO/WHO Expert Committee on Food Additives (JECFA)
 - Established in 1950
 - Assesses safety, internationally, of chemical food additives
- Codex Alimentarius Commission
 - Established in 1960
 - Has an on-line database of General Standard for Food Additives
 - http://www.fao.org/fao-who-codexalimentarius/standards/gsfa/en/
- Federation of American Societies for Experimental Biology (FASEB)
 - Does safety evaluations for the FDA
- European Scientific Committee for Food (SCF)
 - Similar to FDA



Saccharin is the name given to benzoic sulfimide in 1869



Food Packaging



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Current Food Safety Concerns





- Safe, alternative and innovative manufacturing processes
- Safely reducing food waste, from producer through consumer
- Safe valorisation of by-products into foods
- Emerging chemical and biological food safety, including toxins and contaminants
- Traceable, safe and authentic products for consumer confidence

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Risk Assessment is a part of Risk Analysis



4 STEPS OF RISK ANALYSIS

- Risk Assessment
- Risk-Benefit Analysis
- Risk Management
- Risk Communication







RISK: THE PROBABILITY THAT AN EVENT (HAZARDOUS) WILL OCCUR.

RISK ASSESSMENT:

The process of gathering all available information on the toxic effects of a substance and evaluating it to determine the possible risks associated with exposure.



Risk Assessment may be performed for a single substance or, more realistically, for a complex « cocktail » of chemicals.

For exposure to complex mixtures, the risk assessment itself becomes quite complex.

Greenpeace affirme que des cocktails de pesticides continuent d'être utilisés par les producteurs de pommes dans de nombreux pays européens, en particulier par les agriculteurs fournissant la grande distribution.

Le Parisien | 16 Juin 2015

Risk Assessment: 4 steps

or tood safe the safe



1. Identify the **hazard**. What is the danger? What will be lost?

- 2. Evaluate the hazard by dose-response analysis.
- 3. Assess the exposure: Who is exposed and to how much?
- Characterise the risk: probability (Frequent, Occasional, Improbable) and severity (Catastrophic, Critical, Negligible)

The probability of « losing » is important The severity of the « loss » is important







RISK ASSESSMENT MATRIX					Consor Lin
SEVERITY	Catastrophic (1)	Critical (2)	Marginal (3)	Negligible (4)	
Frequent (A)	High	High	Serious	Medium	
Probable (B)	High	High	Serious	Medium	
Occasional (C)	High	Serious	Medium	Low	
Remote (D)	Serious	Medium	Medium	Low	
Improbable (E)	Medium	Medium	Medium	Low	
Eliminated (F)					

Risk Assessment: 1. Hazard Identification



AIM IS TO IDENTIFY:

The innate adverse toxic effects of the agent
The primary hazard of concern. Is it cancer?



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Epidemiological Studies

- Retrospective.
 - Look back. Gather information from the past

Prospective.

Look ahead, follow a population for a given amount of time.

Home > Good Living

What's deal with non-stick cookware? Is it safe?

FRANKI HOBSON August 2 2016



Hazard Identification



But they are difficult to obtain

Often studies aren't available

When they are they are often incomplete or unreliable

Usually human studies provide qualitative data only

In vivo animal studies are the most common source of data

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Experiments are well controlled, exposures are known and clinical and pathological exams follow

The use of lab animals is necessary and accepted

Animals with physiology similar to humans are used.



In vitro studies are done on cells or isolated cellular molecules and provide supporting data particularly about the mechanism of action. **Structure-Activity Relationships (SAR) to prioritise testing.**



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QUESTION



The definition of risk is:

the capacity of a substance to cause an adverse effect in a specific organ or organ system

the probability that a hazard will occur under specific exposure conditions

the weighing of policy alternatives and selection of the most appropriate regulatory actions