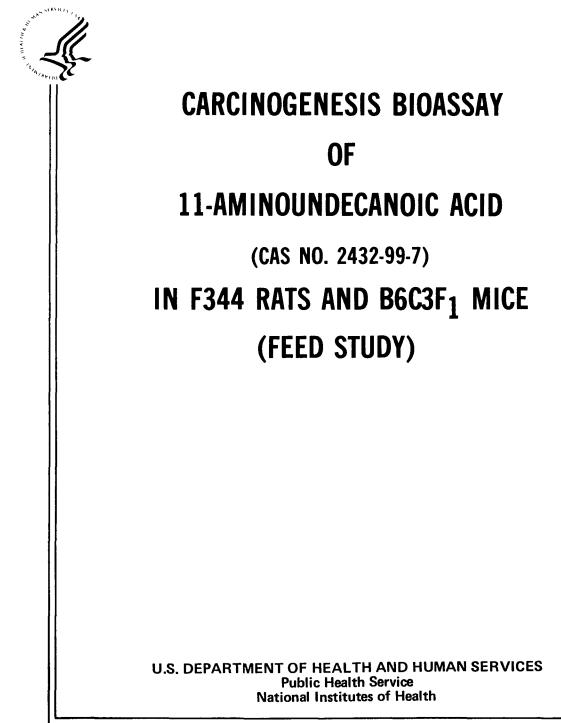
NATIONAL TOXICOLOGY PROGRAM Technical Report Series No. 216



#### NATIONAL TOXICOLOGY PROGRAM

The National Toxicology Program (NTP), established in 1978, develops and evaluates scientific information about potentially toxic and hazardous chemicals. This knowledge can be used for protecting the health of the American people and for the primary prevention of chemically induced disease. By bringing together the relevant programs, staff, and resources from the U.S. Public Health Service, DHHS, the National Toxicology Program has centralized and strengthened activities relating to toxicology research, testing and test development/validation efforts, and the dissemination of toxicological information to the public and scientific communities and to the research and regulatory agencies.

The NTP is comprised of four charter DHHS agencies: the National Cancer Institute, National Institutes of Health; the National Institute of Environmental Health Sciences National Institutes of Health; the National Center for Toxicological Research, Food and Drug Administration; and the National Institute for Occupational Safety and Health, Centers for Disease Control In June 1981, the Carcinogenesis Bioassay Testing Program, NCI, was transferred to the NIEHS. NTP Technical Report on the

# CARCINOGENESIS BIOASSAY OF 11-AMINOUNDECANOIC ACID

# (CAS NO. 2432-99-7)

IN F344 RATS AND B6C3F<sub>1</sub> MICE (FEED STUDY)



## NATIONAL TOXICOLOGY PROGRAM Research Triangle Park Box 12233 North Carolina 27709 and Bethesda, Maryland 20205

# May 1982

## NTP-80-34 NIH Publication No. 82-1772

U.S. DEPARTMENT OF HEALTH AND HUMAN SERVICES Public Health Service National Institutes of Health

### NOTE TO THE READER

This is one in a series of experiments designed to determine whether selected chemicals produce cancer in animals. Chemicals selected for testing in the NTP carcinogenesis bioassay program are chosen primarily on the bases of human exposure, level of production, and chemical structure. Selection per se is not an indicator of a chemical's carcinogenic potential. Negative results, in which the test animals do not have a greater incidence of cancer than control animals, do not necessarily mean that a test chemical is not a carcinogen, inasmuch as the experiments are conducted under a limited set of conditions. Positive results demonstrate that a test chemical is carcinogenic for animals under the conditions of the test and indicate that exposure to the chemical is a potential hazard to humans. The determination of the risk to humans from chemicals found to be carcinogenic in animals requires a wider analysis which extends beyond the purview of this study.

This study was initiated by the National Cancer Institute's Carcinogenesis Testing Program, now part of the National Institute of Environmental Health Sciences, National Toxicology Program.

These NTP Technical Reports are available for sale from the National Technical Information Service, U.S. Department of Commerce, 5285 Port Royal Road, Springfield, VA 22161 (702-487-4650).

Comments and questions about the National Toxicology Program Technical Reports on Carcinogenesis Bioassays should be directed to the National Toxicology Program, located at Room A-306, Landow Building, Bethesda, MD 20205 (301-496-1152) or at Research Triangle Park, North Carolina 27709 (919-541-3991).

Although every effort is made to prepare the Technical Reports as accurately as possible, mistakes may occur. Readers are requested to communicate any mistakes to the Deputy Director, NTP (P.O. Box 12233, Research Triangle Park, NC 27709), so that corrective action may be taken. Further, anyone who is aware of related ongoing or published studies not mentioned in this report is encouraged to make this information known to the NTP.

# TABLE OF CONTENTS

	Page
Abstract	vii
Contributors	viii
Reviewers	ix
Summary of Peer Review Comments	
I. Introduction	
II. Methods and Materials	3
Chemical Analysis	4
Prechronic Studies	4
Single-Dose Study	
Fourteen-Day Study	
Thirteen-Week Study	
Chronic Study	
Study Design	
Source and Specifications of Test Animals	
Animal Maintenance	
Preparation of Test Diets	
Clinical Examinations and Pathology	
Data Recording and Statistical Methods	
III. Results	_
Rats	
Prechronic Studies	
Single-Dose Study	
Fourteen-Day Study	
Thirteen-Week Study	
Chronic Studies	
Body Weights and Clinical Signs	
Survival	
Pathology and Statistical Analyses of Results	
Prechronic Studies	
Fourteen-Day Study	
Thirteen-Week Study	
Chronic Studies	
Body Weights and Clinical Signs	
Survival	
Pathology and Statistical Analyses of Results	
IV. Discussion and Conclusions	
V. References	
·	••••••••••••••••

## **TABLES**

Table 1	Sources and Descriptions of Materials Used for Animal Maintenance in the Prechronic and Chronic Studies	5
Table 2	Experimental Design of Chronic Feeding Studies with 11-Aminoundecanoic Acid in Rats and Mice	7
Table 3	Dosage, Survival, and Mean Body Weights of Rats Fed Diets Containing 11-Aminoundecanoic Acid for 13 Weeks	11
Table 4	Number of Rats with Mineralization or Hyperplasia of the Kidney or Renal Pelvis in the 13-Week Study	11
Table 5	Cumulative Mean Body Weight Change of Rats Fed Diets Containing 11-Aminoundecanoic Acid	13
Table 6	Average Daily Feed Consumption (in Grams) per Rat in the Chronic Study	13

## **TABLES** (Continued)

Table 7	Analysis of Primary Tumors in Male Rats 16
Table 8	Analysis of Primary Tumors in Female Rats
Table 9	Incidence of Tumors and Proliferative Lesions of Transitional Cells in Rats Fed Diets Containing 11-Aminoundecanoic Acid
Table 10	Dosage, Survival, and Mean Body Weights of Mice Fed Diets Containing 11-Aminoundecanoic Acid for 13 Weeks
Table 11	Number of Mice with Mineralization of the Kidney in the 13-Week Study 25
Table 12	Cumulative Mean Body Weight Change of Mice Fed Diets Containing 11-Aminoundecanoic Acid
Table 13	Average Daily Feed Consumption (in Grams) per Mouse in the Chronic Study
Table 14	Incidence of Malignant Lymphomas in Male Mice Fed Diets Containing 11-Aminoundecanoic Acid in the Chronic Study
Table 15	Analysis of Primary Tumors in Male Mice
Table 16	Analysis of Primary Tumors in Female Mice
	FIGURES
Figure 1	Growth Curves for Rats Fed Diets Containing 11-Aminoundecanoic Acid
Figure 2	Survival Curves for Rats Fed Diets Containing 11-Aminoundecanoic Acid
Figure 3	Growth Curves for Mice Fed Diets Containing 11-Aminoundecanoic Acid
Figure 4	Survival Curves for Mice Fed Diets Containing 11-Aminoundecanoic Acid
Figure 5	Infrared Absorption Spectrum of 11-Aminoundecanoic Acid
Figure 6	Nuclear Magnetic Resonance Spectrum of 11-Aminoundecanoic Acid111
	APPENDIXES
Appendix A	Summary of the Incidence of Neoplasms in Rats Fed Diets Containing 11-Aminoundecanoic Acid
Table A1	Summary of the Incidence of Neoplasms in Male Rats Fed Diets Containing 11-Aminoundecanoic Acid
Table A2	Summary of the Incidence of Neoplasms in Female Rats Fed Diets Containing 11-Aminoundecanoic Acid
Table A3	Individual Animal Tumor Pathology of Male Rats in the 2-Year Study of 11-Aminoundecanoic Acid
Table A4	Individual Animal Tumor Pathology of Female Rats in the 2-Year Study of 11-Aminoundecanoic Acid
Appendix B	Summary of the Incidence of Neoplasms in Mice Fed Diets Containing 11-Aminoundecanoic Acid
Table B1	Summary of the Incidence of Neoplasms in Male Mice Fed Diets Containing 11-Aminoundecanoic Acid
Table B2	Summary of the Incidence of Neoplasms in Female Mice Fed Diets Containing 11-Aminoundecanoic Acid

## **APPENDIXES (Continued)**

Table B3	Individual Animal Tumor Pathology of Male Mice in the 2-Year Study of 11-Aminoundecanoic Acid
Table B4	Individual Animal Tumor Pathology of Female Mice in the 2-Year Study of 11-Aminoundecanoic Acid
Appendix C	Summary of the Incidence of Nonneoplastic Lesions in Rats Fed Diets Containing 11-Aminoundecanoic Acid
Table Cl	Summary of the Incidence of Nonneoplastic Lesions in Male Rats Fed Diets Containing 11-Aminoundecanoic Acid
Table C2	Summary of the Incidence of Nonneoplastic Lesions in Female Rats Fed Diets Containing 11-Aminoundecanoic Acid
Appendix D	Summary of the Incidence of Nonneoplastic Lesions in Mice Fed Diets Containing 11-Aminoundecanoic Acid
Table D1	Summary of the Incidence of Nonneoplastic Lesions in Male Mice Fed Diets Containing 11-Aminoundecanoic Acid
Table D2	Summary of the Incidence of Nonneoplastic Lesions in Female Mice Fed Diets Containing 11-Aminoundecanoic Acid
Appendix E	Analysis of 11-Aminoundecanoic Acid at Midwest Research Institute 107
Appendix F	Analysis of Formulated Diets for Stability of 11-Aminoundecanoic Acid at Midwest Research Institute
Appendix G	Analysis of Formulated Diets for Concentrations of 11-Aminoundecanoic Acid at Litton Bionetics, Inc
Table G1	Analysis of Formulated Diets116

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## CARCINOGENESIS BIOASSAY OF 11-AMINOUNDECANOIC ACID

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## **11-AMINOUNDECANOIC ACID**

## ABSTRACT

A carcinogenesis bioassay of 11-aminoundecanoic acid was carried out by administering diets containing 7,500 or 15,000 ppm of 11-aminoundecanoic acid to F344 rats and B6C3F1 mice. Groups of 50 rats and 50 mice of either sex were administered the test chemical for 104 weeks (rats) or 103 weeks (mice). Controls consisted of 50 untreated rats and 50 untreated mice of each sex.

Nonneoplastic effects included dose-related decreases in mean body weight gain and survival for male rats and for mice of each sex; a dose-related increased incidence of hyperplasia of the transitional epithelium of the kidney and urinary bladder in rats of each sex; and mineralization of the kidney in dosed mice of each sex.

Neoplastic nodules of the liver in dosed male rats (control 1/50, 2%; low dose 9/50, 18%; high dose 8/50, 16%: P < 0.01) and transitional-cell carcinomas of the urinary bladder in high-dose male rats (control 0/48, 0%; low dose 0/48, 0%; high dose 7/49, 14%: P < 0.01) were observed at significantly increased incidences compared with controls. Malignant lymphomas occurred at a significantly (P < 0.05) increased rate in low-dose male mice (control 2/50, 4%; low dose 9/50, 18%; high dose 4/50, 8%).

Under the conditions of this bioassay, 11-aminoundecanoic acid was carcinogenic for male F344 rats, inducing neoplastic nodules in the liver and transitional-cell carcinomas in the urinary bladder. The test chemical was not carcinogenic for female F344 rats. No clear evidence was found for the carcinogenicity of 11-aminoundecanoic acid in B6C3F1 mice of either sex, although the increase in malignant lymphoma in male mice may have been associated with administration of 11-aminoundecanoic acid.

### **CONTRIBUTORS**

The bioassay of 11-aminoundecanoic acid was conducted at Litton Bionetics, Inc., under a subcontract to Tracor Jitco, Inc., the prime contractor for the Carcinogenesis Testing Program. The prechronic study was started in May 1976 and finished in August 1976; the chronic study was begun in February 1977 and completed in March 1979.

> Principal Contributors at Litton Bionetics, Inc. 5516 Nicholson Lane Kensington, Maryland 20795 (Conducted bioassay and evaluated tissues)

Dr. R. Cardy Pathologist Dr. E. Gordon Principal Investigator Dr. J. Moe Pathologist Mr. H. Paulin Chemist Mr. J. Sheldon Animal Care Supervisor Dr. B. Zook Pathologist

Principal Contributors at Tracor Jitco 1776 East Jefferson Street Rockville, Maryland 20852

(Prepared Preliminary Summary Report) Dr. John Keller Dr. M Director, Bioassay Program H

Dr. Abigail C. Jacobs Bioscience Writer

Dr. James R. Joiner Statistician Dr. Steve S. Olin Program Associate Director Pathologist Dr. William D. Theriault Reports Manager Mr. John Warner Statistician

Dr. Michael Stedham

Principal Contributors at the National Toxicology Program National Institute of Environmental Health Sciences and National Cancer Institute Box 12233 Research Triangle Park North Carolina 27709 and Landow Building Bethesda, Maryland 20205

(Evaluation of experiment, interpretation of results, and reporting of findings)

Dr. J. Fielding DouglasDr.Dr. June K. Dunnick (Chemical Manager)Dr.Dr. Charles K. GrieshaberDr.Dr. Larry HartDr.Dr. William V. HartwellDr.Dr. Joseph HasemanDr.Dr. James E. HuffDr.

Dr. C. W. Jameson Dr. Mary Kornreich Dr. Ernest E. McConnell Dr. John A. Moore Dr. Sherman F. Stinson Dr. Raymond Tennant Dr. Jerrold M. Ward

The pathology report and selected slides were evaluated by the NTP Pathology Working Group, which included Drs. G. Reznik, M. Stedham, and S. Stinson.

The chemicals used in this bioassay of 11-aminoundecanoic acid were analyzed by the Midwest Research Institute, 425 Volker Blvd., Kansas City, Missouri 64110; reanalysis of the bulk chemical and analysis of formulated diets were done by Litton Bionetics, Inc.

### REVIEWERS

## National Toxicology Program Board of Scientific Counselors' Technical Report Review Subcommittee

Margaret Hitchcock, Ph.D (Chairperson) Pharmacology/Toxicology John B. Pierce Foundation Laboratory New Haven, Connecticut

Curtis Harper, Ph.D. Associate Professor of Pharmacology University of North Carolina Chapel Hill, North Carolina Alice Whittemore, Ph.D.\* Biostatistics Stanford University School of Medicine Palo Alto, California

Thomas Shepard, M.D. University of Washington School of Medicine Seattle, Washington

### Ad Hoc Subcommittee Panel of Experts

James Swenberg, Ph.D. (Principal Reviewer) Chief of Pathology Chemical Industry Institute of Toxicology Research Triangle Park, North Carolina

Frank Mirer, Ph.D. (Principal Reviewer) United Auto Workers International Union Detroit, Michigan

Norman Breslow, Ph.D.\* Biostatistics University of Washington Seattle, Washington

Joseph Highland, Ph.D. Toxicology Environmental Defense Fund Washington, D.C.

Charles Irving, Ph.D. Veterans Administration Hospital Cancer Research Laboratory Memphis, Tennessee Sheldon Murphy, Ph.D. University of Texas Medical School Houston, Texas

Svend Nielsen, D.V.M., Ph.D. Professor of Pathology The University of Connecticut Storrs, Connecticut

Bernard Schwetz, Ph.D. Toxicology Research Laboratory Dow Chemical U.S.A. Midland, Michigan

Roy Shore, Ph.D. Statistics New York University Medical Center New York, New York

Gary Williams, M.D. Chief of Experimental Pathology American Health Foundation Valhalla, New York

<sup>\*</sup>Unable to attend February 18, 1981 meeting

# SUMMARY OF PEER REVIEW COMMENTS ON THE BIOASSAY OF 11-AMINOUNDECANOIC ACID

On February 18, 1981, this carcinogenesis bioassay report on 11-aminoundecanoic acid underwent peer review and was approved by the National Toxicology Program Board of Scientific Counselors' Technical Report Review Subcommittee and associated Panel of Experts at an open meeting held in Building 31C, National Institutes of Health, Bethesda, Maryland.

Dr. Swenberg, a principal reviewer for the report on the bioassay of 11-aminoundecanoic acid, agreed with the conclusion that, under the conditions of the bioassay, 11-aminoundecanoic acid was carcinogenic for male F344 rats, inducing increased incidences of neoplastic nodules in the liver and transitional-cell carcinomas in the urinary bladder. The test chemical was not carcinogenic for female F344 rats. No clear evidence of carcinogenicity was demonstrated in B6C3F1 mice of either sex. Other effects included a dose-related decrease in mean body weight gain and survival for male rats and for mice of each sex, hyperplasia of the transitional epithelium of the kidney and urinary bladder in rats of each sex, and mineralization of the kidney in mice of each sex.

Dr. Swenberg stated that if early mortality in high-dose mice groups was due to toxicity then the high dose exceeded the maximum tolerated dose. If this were the case, the low dose group represented a maximum tolerated dose and the study is valid and not compromised. He said that more information on toxicity and cause of death would be preferable, particularly for the early deaths in the high dose male rats and mice.

As another principal reviewer, Dr. Mirer, also agreed with the conclusions of the report. He noted that no transitional-cell carcinomas of the urinary bladder were observed in control male rats, and that this tumor is very rare in historical controls. He commented that compound-related toxicity in male mice (less than 50% survival) may have prevented the appearance of late developing tumors. Thus, this high mortality combined with a borderline statistically elevated incidence of lymphomas suggest that 11-aminoundecanoic acid was not adequately tested for carcinogenicity in male mice.

Dr. Shore questioned the word "clear" in the statement in the conclusions that "No clear evidence was found for the carcinogenicity of 11-aminoundecanoic acid in B6C3F1 mice of either sex." The qualifier derives from the finding of a statistically significant increase in malignant lymphoma in low-dose male mice but not in high-dose mice. After considerable discussion, Dr. Moore (NTP) proposed adding a clause to the statement such as, "although a significant incidence of malignant lymphoma in low-dose male mice may have been associated with chemical administration."

Dr. Swenberg moved that the report on the bioassay of 11-aminoundecanoic acid be accepted after minor changes and corrections described in the reviewers' comments and during the discussion are made. Dr. Mirer seconded the motion and the report was approved unanimously by the Peer Review Panel.

# I. INTRODUCTION

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## **11-AMINOUNDECANOIC ACID**

11-Aminoundecanoic acid (CAS No. 2432-99-7) is the monomer used in the manufacture of the polyamide, nylon-11. 11-Aminoundecanoic acid is synthesized through a series of reactions from ricinoleic acid isolated from castor bean oil (Hampel and Hawley, 1973; Hawley, 1977).

Nylon-11 is used in automobile parts, industrial fabrics (e.g., filter bags, work clothes, and netting), and brushes because of its resistance to vibration and shock and its stability when in contact with fuels (Kirk-Othmer, 1979). Nylon-11 resins are approved by the U.S. Food and Drug Administration for use in food contact films (U.S. CFR, 1977). 11-Aminoundecanoic acid is not produced in the United States, and specific production figures are not available for either 11aminoundecanoic acid or nylon-11. The amount of nylon-11 used in the United States accounts for less than 1% of the nylon in use in this country. Nylon-11 is used more widely in France, Italy, and Brazil (Hampel and Hawley, 1973; Hawley, 1977).

11-Aminoundecanoic acid was one of a series of monomers assigned for testing by the Carcinogenesis Testing Program because of possible worker exposure and the absence of previous studies for carcinogenicity or other biological properties.

# **II. METHODS AND MATERIALS**

## **CHEMICAL ANALYSIS**

## **PRECHRONIC STUDIES**

**Single-Dose Study** 

Fourteen-Day Study

**Thirteen-Week Study** 

## **CHRONIC STUDY**

Study Design Source and Specifications of Test Animals Animal Maintenance Preparation of Test Diets Clinical Examinations and Pathology Data Recording and Statistical Methdods

## **II. METHODS AND MATERIALS: CHEMICAL ANALYSIS**

### CHEMICAL ANALYSIS

White crystalline 11-aminoundecanoic acid was obtained as a single batch (Lot No 503) from Rilsan Corporation (Glenrock, NJ) and was found to be 99 13%  $\pm 0.03$  ( $\delta$ )% pure by titration of the amine (Midwest Research Institute), the elemental analyses were in agreement with the theoretical values (Appendix E) Results of thin-layer chromatography indicated one trace impurity or one trace and one slight impurity, depending on the solvent system used The infrared and nuclear magnetic resonance spectra were consistent with the structure

## **PRECHRONIC STUDIES**

### Single-Dose Study

Male and female F344 rats were obtained from Frederick Cancer Research Center (Frederick, MD), quarantined, and held for approximately 2 months before the test began Animals were approximately 11 weeks old when placed on study Mice were not used in the single-dose study

Groups of five male F344 rats were administered a single dose of 11-aminoundecanoic acid (14,700 or 21,500 mg/kg body weight) in corn oil by gavage and groups of five female rats received doses of 6,810, 10,000, 14,700, or 21,500 mg/kg by the same route All animals were observed for mortality for 14 days

Animals were housed two or three per cage and received water and feed *ad libitum* during the observation period Details of animal maintenance are presented in Table 1

Animals were observed for mortality every 30 minutes for the first 8 hours on the day of dosing and then daily for 14 days Weights were taken on the day of dosing and then on days 7 and 14 Gross necropsies were performed on all animals that died during the study and on those surviving to day 14

### **Fourteen-Day Study**

Male and female F344 rats and B6C3F1 mice were obtained from Frederick Cancer Research Institute, quarantined, and held for approximately 3 months before the study began Animals were approximately 15 weeks old when placed on study

Groups of five males and five females of each species were fed diets containing 0, 5,000, 10,000, 15,000, 20,000, or 30,000 ppm 11-aminoundecanoic acid for 2 weeks Test diets were prepared several days before the start of the study by mixing the test chemical and ground Purina® Lab Chow in a Patterson-Kelly® Twin Shell Blender Diets were refrigerated until use

Animals were housed two or three per cage and received water and feed *ad libitum* Details of animal maintenance are presented in Table 1 The rats and mice were observed daily for mortality and were weighed weekly Gross necropsies were performed on all animals at the end of the 14-day study

### **Thirteen-Week Study**

Subchronic studies were conducted to determine the concentrations to be used in the chronic studies

Three-week-old male and female F344 rats and B6C3F1 mice were obtained from the NCI Frederick Cancer Research Center, observed for 2 weeks, and then randomized by weight and assigned to test groups so that average cage weights were approximately equal for all animals of the same sex and species

Rats and mice were housed four per cage in polycarbonate cages covered with nonwoven polyester filter sheets (Table 1) Racks and filters were replaced once every 2 weeks Cages and bedding were replaced twice per week, and water bottles were replaced three times per week

Test diets consisted of Purina<sup>®</sup> Lab Chow and the required amount of 11-aminoundecanoic acid (Lot No 503) The analytical procedures described in the chronic study were used Control diets consisted of Purina<sup>®</sup> Lab Chow Dosed feed, control diets, and bottled water (acidified with hydrochloric acid to pH 2 5 for bacterial control) were available *ad libitum* 

Diets containing 0, 9,000, 12,000, 15,000, 18,000, 20,000 (mice), or 21,000 ppm (rats) 11aminoundecanoic acid were fed for 13 weeks to groups of 12 male and 12 female rats and to groups of 10 male and 10 female mice

Item	Description	Source		
Aır Filter	AG-55 Ameriglass Roughing Filter	American Air Filter (Louisville, KY)		
Air Filter	HEPA-100	American Air Filter (Louisville, KY)		
Anımal Feed	Purina <sup>®</sup> Lab Chow	Ralston Purina Co (Richmond, IN)		
Bedding	Absorb-dri <sup>®</sup> hardwood chips	Lab Products, Inc (Garfield, NJ)		
Cages	Polycarbonate	Lab Products, Inc (Garfield, NJ)		
Filter Sheets	Nonwoven polyester	Snow Filtration (Cincinnati, OH)		

# Table 1.SOURCES AND DESCRIPTIONS OF MATERIALS USED FOR ANIMAL<br/>MAINTENANCE IN THE PRECHRONIC AND CHRONIC STUDIES

Animals were checked for mortality and signs of morbidity twice daily Those animals that were judged moribund were killed and necropsied Each animal was given a clinical examination weekly, including palpation for tissue masses or swelling Body weight and feed consumption data were collected weekly

At the end of the 91-day study, survivors were killed with carbon dioxide and necropsies were performed on animals that survived to the end of the study and on all animals found dead, unless precluded in whole or in part by autolysis or cannibalization. Thus, the number of animals from which particular organs or tissues were examined microscopically varies and does not necessarily represent the number of animals that were placed on study in each group. The following specimens were examined for control and high-dose groups gross lesions, tissue masses, abnormal lymph nodes, skin, mandibular lymph nodes, mammary gland, salivary gland, thigh muscle, sciatic nerve, bone marrow, costochondral junction (rib), thymus, larynx, trachea, lungs and bronchi, heart, thyroid, parathyroid, esophagus, stomach, duodenum, jejunum, ileum, colon, mesenteric lymph nodes, liver, gallbladder (mice), pancreas, spleen, kidneys, adrenals, bladder, seminal vesicles/prostate/ testes or ovaries/uterus, nasal cavity, brain, pituitary, and spinal cord Tissues were preserved in 10% neutral buffered formalin, embedded in paraffin, sectioned, and stained with hematoxylin and eosin

Histopathologic examination for all other dosed groups was limited to the kidneys and liver, except for male and female rats administered 12,000 ppm The kidneys, liver, lungs, and heart of animals in the 12,000-ppm groups were examined histopathologically

## **CHRONIC STUDY**

### **Study Design**

Diets containing 7,500 or 15,000 ppm 11aminoundecanoic acid were fed to groups of 50 rats or mice of either sex for 104 weeks (rats) or 103 weeks (mice) Controls consisted of groups of 50 untreated rats and 50 untreated mice of either sex (Table 2) Rats and mice were approximately 5 weeks old when placed on study

## Source and Specifications of Test Animals

Three-week-old male and female F344 rats and B6C3F1 mice were obtained from the NCI Frederick Cancer Research Center (Frederick, MD), observed for 2 weeks, and randomly assigned to individual cages The cages were then randomly assigned to control and dosed groups

### Animal Maintenance

Rats and mice were housed five per cage in polycarbonate cages covered with nonwoven polyester filter sheets (Table 1) Racks and filters were changed once every 2 weeks Cages, bedding, and glass water bottles (equipped with stainless steel sipper tubes) were replaced twice per week Dosed feed, control diets, and tap water (acidified with hydrochloric acid to pH 2 5 for bacterial control) were available *ad libitum* Stainless steel feed containers were changed once per week

The temperature in the animal rooms was 22°-26°C and the humidity was 30%-70% Incoming air was first filtered through AG-55 Ameriglass roughing filters and then through HEPA-100 filters to remove particulate matter Ten changes of room air per hour were provided Fluorescent lighting provided illumination 12 hours per day

Rats fed 11-aminoundecanoic acid were housed in a room with rats on feeding studies of 2,6-dichloro-p-phenylenediamine (CAS No 609-20-1) (NTP TR 219, 1982) Mice fed 11aminoundecanoic acid were housed in rooms with mice on feeding studies of caprolactam (CAS No 105-60-2) (NTP TR 214, Rev 1982), bisphenol A (CAS No 80-05-7) (NTP TR 215, 1982), and 2,6-dichloro-p-phenylenediamine (CAS No 609-20-1) (NTP TR 219, 1982)

### **Preparation of Test Diets**

Test diets were prepared by first mixing a small amount of Purina<sup>®</sup> Lab Chow (Table 1)

and the required amount of 11-aminoundecanoic acid (Lot No 503) with a mortar and pestle and then adding this premix to the required amount of animal meal and mixing for 20 minutes in a Patterson-Kelly® twin shell blender equipped with an intensifier bar Prepared diets containing 100,000 ppm 11-aminoundecanoic acid were analyzed at Midwest Research Institute and were found to be stable for 2 weeks at temperatures up to 45°C (Appendix F) Test diets were stored in the dark at 4°C for no longer than 2 weeks Control animals were fed Purina® Lab Chow

Dosed feed samples from the chronic studies were analyzed The mean concentration of 11aminoundecanoic acid ( $\pm$  standard deviation) in nine randomly selected dosed feed samples containing a target level of 7,500 ppm was 7,597  $\pm$ 416 ppm (Appendix G) The mean concentration of 11-aminoundecanoic acid in eight samples containing a target level of 15,000 ppm was 14,701  $\pm$  618 ppm

## **Clinical Examinations and Pathology**

All animals were observed twice daily for signs of toxicity Clinical signs were recorded monthly Body weights and feed consumption by cage were recorded every 2 weeks for the first 13 weeks and monthly thereafter The mean body weight of each group was calculated by dividing the total weight of all animals in the group by the number of surviving animals in the group The average feed consumption per animal was calculated by dividing the total feed consumption measured for all cages by the number of surviving animals in the group Moribund animals and animals that survived to the end of the bioassay were killed using carbon dioxide and necropsied

Examinations for grossly visible lesions were performed on major tissues or organs Tissues were preserved in 10% neutral buffered formalin, embedded in paraffin, sectioned, and stained with hematoxylin and eosin The following were examined microscopically tissue masses, abnormal lymph nodes, skin, mandibular lymph nodes, mammary gland, salivary gland, thigh muscle, sciatic nerve, bone marrow, costochondral junction (rib), thymus, larynx, trachea, lungs and bronchi, heart, thyroid, parathyroid, esophagus, stomach, duodenum, jejunum, ileum, colon, mesenteric lymph nodes,

## **II. METHODS AND MATERIALS: CHRONIC STUDY**

	Initial		Weeks on Study	
Test Group	No. of Animals	11-Aminoundecanoic Acid (ppm)	Dosed	Not Dosed
MALE RATS	······································		<u> </u>	
Control	50	0	0	109
Low-Dose	50	7,500	104	5
High-Dose	50	15,000	104	5
FEMALE RATS				
Control	50	0	0	109
Low-Dose	50	7,500	104	5
High-Dose	50	15,000	104	5
MALE MICE				
Control	50	0	0	109
Low-Dose	50	7,500	103	5-6
High-Dose	50	15,000	103	5-6
FEMALE MICE				
Control	50	0	0	109
Low-Dose	50	7,500	103	5-6
High-Dose	50	15,000	103	5-6

#### Table 2. EXPERIMENTAL DESIGN OF CHRONIC FEEDING STUDIES WITH 11-AMINO-UNDECANOIC ACID IN RATS AND MICE

liver, gallbladder (mice), pancreas, spleen, kidneys, adrenals, bladder, seminal vesicles/prostate/testes or ovaries/uterus, nasal cavity, brain, pituitary, and spinal cord. Special staining techniques were used as necessary.

Necropsies were performed on all animals found dead and on those killed at the end of the study, unless precluded in whole or in part by autolysis or cannibalization. Thus, the number of animals from which particular organs or tissues were examined microscopically varies and is not necessarily equal to the number of animals that were placed on study in each group.

The pathology report and selected slides were evaluated by the NTP Pathology Working Group as described by Ward et al. (1978). The classification of neoplastic nodules was done according to the recommendations of Squire and Levitt (1975), and the National Academy of Sciences (1980). The diagnoses represent a consensus of contracting pathologists and the NTP Pathology Working Group.

# Data Recording and Statistical Methods

Data on this experiment were recorded in the Carcinogenesis Bioassay Data System (Linhart et al., 1974). The data elements include descriptive information on the chemicals, animals, experimental design, clinical observations, survival, body weight, and individual pathologic results, as recommended by the International Union Against Cancer (Berenblum, 1969).

Probabilities of survival were estimated by the product-limit procedure of Kaplan and Meier (1958) and are presented in this report in the form of graphs. Animals were statistically censored as of the time that they died of other than natural causes or were found to be missing; animals dying from natural causes were not statistically censored. Statistical analyses for a possible dose-related effect on survival used the method of Cox (1972) for testing two groups for equality and Tarone's (1975) extensions of Cox's methods for testing for a dose-related trend. The incidence of neoplastic or nonneoplastic lesions has been given as the ratio of the number of animals bearing such lesions at a specific anatomic site to the number of animals in which that site was examined. In most instances, the denominators included only those animals for which that site was examined histologically However, when macroscopic examination was required to detect lesions (e g, skin or mammary tumors) prior to histologic sampling, or when lesions could have appeared at multiple sites (e g, lymphomas), the denominators consist of the numbers of animals necropsied

For the statistical analysis of tumor incidence data, two different methods of adjusting for intercurrent mortality were employed Each used the classical methods for combining contingency tables developed by Mantel and Haenszel (1959) Tests of significance included pairwise comparisons of high-and low-dosed groups with controls and tests for overall dose-response trends

The first method of analysis assumed that all tumors of a given type observed in animals dying before the end of the study were "fatal", i.e., they either directly or indirectly caused the death of the animal According to this approach, the proportions of tumor-bearing animals in the dosed and control groups were compared at each point in time at which an animal died with a tumor of interest. The denominators of these proportions were the total number of animals at risk in each group. These results, including the data from animals killed at the end of the study, were then combined by the Mantel-Haenszel methods to obtain an overall P-value. This method of adjusting for intercurrent mortality is the life table method of Cox (1972) and of Tarone (1975)

The second method of analysis assumed that all tumors of a given type observed in animals dying before the end of the study were "incidental", 1 e, they were merely observed at autopsy in animals dving of an unrelated cause According to this approach, the proportions of animals found to have tumors in dosed and control groups were compared in each of five time intervals 0-52 weeks, 53-78 weeks, 79-92 weeks, 93-108 weeks, and 109 weeks (when all surviving animals were killed) The denominators of these proportions were the number of animals actually autopsied during the time interval The individual time interval comparisons were then combined by the previously described methods to obtain a single overall result (See Peto et al. 1980, for the computational details of both methods)

In addition to these tests, one other set of statistical analyses was carried out and reported in the tables analyzing primary tumors the Fisher's exact test for pairwise comparisons and the Cochran-Armitage linear trend test for doseresponse trends (Armitage, 1971, Gart et al, 1979) These tests were based on the overall proportion of tumor-bearing animals All reported P values are one-sided

For studies in which there is little effect of compound administration on survival, the results of the three alternative analyses will generally be similar When differing results are obtained by the three methods, the final interpretation of the data will depend on the extent to which the tumor under consideration is regarded as being the cause of death

# **III. RESULTS**

## RATS

## **PRECHRONIC STUDIES**

## Single-Dose Study

Fourteen-Day Study

**Thirteen-Week Study** 

## **CHRONIC STUDIES**

Body Weights and Clinical Signs Survival Pathology and Statistical Analyses of Results

## MICE

## **PRECHRONIC STUDIES**

Fourteen-Day Study

**Thirteen-Week Study** 

# **CHRONIC STUDIES**

Body Weights and Clinical Signs Survival Pathology and Statistical Analyses of Results

### RATS

## **PRECHRONIC STUDIES**

#### Single-Dose Study

Rats were observed for 14 days and, at the end of the 14-day observation period, survival was 100% in females administered 6,810 or 10,000 mg/kg and in males administered 14,700 or 21,500 mg/kg. Deaths occurred in 1/5 females administered 14,700 mg/kg and in 5/5 females administered 21,500 mg/kg; depressions in mean body weight were observed in males and females at these doses.

## Fourteen-Day Study

All animals survived to the end of the dosing period. No compound associated effects were observed in rats fed 0-15,000 ppm, but groups of male and female rats fed 20,000 or 30,000 ppm had depressions in mean body weight gain compared with controls. Daily food consumption data were not collected.

#### Thirteen-Week Study

One of 12 female rats fed the 18,000-ppm diet died at day 9. Mean body weight gain in male rats fed diets containing 18,000 or 21,000 ppm 11-aminoundecanoic acid was depressed 13% and 14%, respectively (Table 3). Multifocal tubular mineralization of the kidneys was noted in 70%-100% of all groups of female rats administered 11-aminoundecanoic acid (Table 4). The severity of the mineralization was dose related. Transitional-cell hyperplasia was found in the kidneys of 1/10 male rats fed 21,000 ppm, in 6/10 females fed 21,000 ppm, and in 2/9 females fed 18,000 ppm 11-aminoundecanoic acid. Hyperplasias of the renal pelvis were seen in 2/9females fed 18,000 ppm and in 1/10 males and 6/10 females fed 21,000 ppm.

Because of compound-related effects, including transitional cell hyperplasia in the kidneys and body weight depression, doses for rats in the chronic study were set at 7,500 and 15,000 ppm.

		Mear	Weight Change Relative to		
Dose (ppm)	Survival (a)	Initial	Final (b)	Change	Control (c) (Percent)
MALE	<u></u>		<u></u>		····
0	12/12	114	298	+184	
9,000	12/12	114	298	+184	0
12,000	12/12	113	298	+185	0
15,000	12/12	114	283	+169	- 8
18,000	12/12	114	275	+ 161	-13
21,000	12/12	114	273	+159	-14
FEMALE					
0	12/12	91	172	+ 81	
9,000	12/12	92	183	+ 91	+12
12,000	12/12	92	182	+ 90	+11
15,000	12/12	92	180	+ 88	+ 9
18,000	11/12	91	178	+ 87	+ 7
21,000	12/12	91	177	+ 86	+ 6

#### Table 3. DOSAGE, SURVIVAL, AND MEAN BODY WEIGHTS OF RATS FED DIETS CONTAINING 11-AMINOUNDECANOIC ACID FOR 13 WEEKS

(a) Number surviving/number per group

(b) Weights taken at week 12 are used as final weights.

(c) Weight Change Relative to Controls =

Weight Change (Dosed Group) - Weight Change (Control Group)

Weight Change (Control Group)

# Table 4. NUMBER OF RATS WITH MINERALIZATION OR HYPERPLASIA OF THE KIDNEY OR RENAL PELVIS IN THE 13-WEEK STUDY

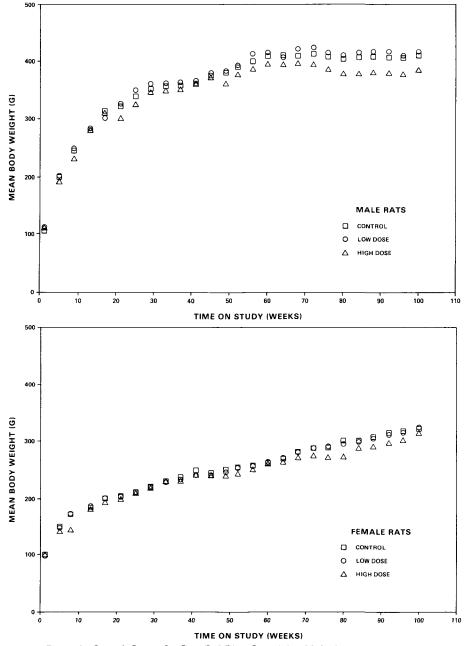
× 100

	Dose opm)	Number of Animals with Mineralization of the Kidney	Number of Animals with Transitional- Cell Hyperplasia of the Kidney	Number of Animals with Hyperplasia of the Renal Pelvis
Male			<u></u>	
	0	0/10		
9	9,000	0/10		_
1	2,000	0/10		_
1:	5,000	0/10		
1	8,000	0/10		_
2	1,000	0/10	1 / 10	1/10
Female				
	0	0/10		—
ę	9,000	7/10		
12	2,000	7/10	_	
1:	5,000	10/10	_	
1	8,000	9/9	2/9	2/9
2	1,000	8/10	6/10	6/10

## **CHRONIC STUDIES**

## **Body Weights and Clinical Signs**

Throughout the last year of the study, mean body weights of high-dose rats of either sex were lower than those of the controls (Figure 1 and Table 5). The average daily feed consumption per rat by low- and high-dose rats was 98% and 88% that of the controls for males and 88% and 86% for females (Table 6). No compound-related clinical signs were observed.





		Cumulative Mean Body Weight Change (grams)			Percent Weight Change Relative to Controls (a)	
	Week No.	Control	Low Dose	High Dose	Low Dose	High Dose
MALE					, <u>.</u>	, , , , , , , , , , , , , , , , , ,
	1	105 <i>(b)</i>	112 <i>(b)</i>	110 <i>(b)</i>		
	5	+ 94	+ 90	+ 81	-4	- 14
	25	+ 233	+ 237	+215	+2	- 8
	45	+ 270	+ 267	+ 260	- 1	- 4
	64	+ 307	+ 295	+ 285	-4	- 7
	84	+ 302	+ 304	+ 267	+1	-12
	100	+ 307	+ 306	+ 275	0	- 10
FEMALE						
	1	99 (b)	97 <i>(b)</i>	98 (b)		
	5	+ 51	+ 51	+ 42	0	- 18
	25	+114	+116	+112	+2	- 2
	45	+ 146	+ 144	+ 142	- 1	- 3
	64	+170	+173	+ 166	+2	- 2
	84	+ 201	+ 20 I	+ 189	0	- 6
	100	+ 222	+ 226	+216	+ 2	- 3

# Table 5. CUMULATIVE MEAN BODY WEIGHT CHANGE OF RATS FED DIETS CONTAINING 11-AMINOUNDECANOIC ACID

(a) Percent Weight Change Relative to Controls =

Weight Change (Dosed Group) - Weight Change (Control Group) × 100

Weight Change (Control Group)

(b) Initial weight

.

# Table 6 AVERAGE DAILY FEED CONSUMPTION (IN GRAMS) PER RAT IN THE CHRONIC STUDY

				Low Dose		High Dose
	Week	Control	I ow Dose	Control	High Dose	Control
MALE	8	30	27	0 9	21	0 7
	24	23	25	11	22	1.0
	36	24	24	1 0	24	10
	48	23	23	1.0	21	0 9
	60	26	25	10	24	0.9
	72	30	30	1.0	25	0.8
	84	32	30	0.9	27	0.8
	96	27	27	1.0	25	09
FEMALE	8	18	17	09	16	09
	24	16	14	09	15	0 9
	36	18	17	09	17	09
	48	18	14	0 8	13	07
	60	21	18	0 9	16	0.8
	72	20	18	09	18	09
	84	24	20	0.8	20	0.8
	96	23	21	09	21	09

## Survival

Estimates of the probabilities of survival of male and female rats administered 11-aminoundecanoic acid in feed at the concentrations of this bioassay, together with those of the control group, are shown by the Kaplan and Meier curves in Figure 2 The Tarone test indicated a linear trend (P=0.036) in the mortality of male rats in positive relation to the dose levels No significant trend was observed in the mortality of the female groups

In male rats, 39/50(78%) of the control group, 37 50 (74%) of the low-dose group, and 30/50(60%) of the high-dose group lived to the end of the study at 109 weeks In female rats, 38/50(76%) of the control group, 32/50 (64%) of the low-dose group, and 42/50 (84%) of the highdose group lived to the end of the study at 109 weeks The cause of death of animals dying during the study was not determined

# Pathology and Statistical Analyses of Results

Histopathologic findings on neoplasms in rats are summarized in Appendix A, Tables A1 and A2, findings on nonneoplastic lesions are summarized in Appendix C, Tables C1 and C2 Appendix Tables A3 and A4 give the survival and tumor status for each individual animal in the male rat and female rat studies, respectively

A variety of tumors was found in control and dosed groups, including leukemias, pituitary chromophobe adenomas, interstitial-cell tumors, pheochromocytomas, mammary fibroadenomas, and lesser incidences of other neoplasms

Tables 7 and 8 contain the statistical analyses of those primary tumors that occurred with an incidence of at least 5% in one of the three groups

Urinary Bladder Transitional-cell carcinomas of the urinary bladder were observed in a significantly increased incidence (P < 0.01) in the high-dose group of male rats (controls, 0/48, 0%, low-dose, 0/48, 0%, high-dose, 7/49, 14%) These tumors generally tended to grow toward the lumen of the bladder, often forming papillary processes These tumors had a large number of anaplastic cells, mitotic activity, and areas of focal necrosis Invasion of the basement membrane and underlying tissues was often seen in malignant tumors, however, no vascular invasion or metastases were observed Transitionalcell carcinomas of the urinary bladder were not observed in any of the three female rat groups

Focal or diffuse hyperplasia of the transitional epithelium of the urinary bladder was observed with a significantly (P < 0.01) increased incidence in high-dose male rats (controls, 0/48, 0%, low-dose, 2/48, 4%, high-dose, 20/49, 41%) These lesions were also observed with increased incidence in dosed female rats (controls, 4/49, 8%, low-dose, 12/47, 26%, high-dose, 9/48, 19%), but only in the low-dose group was this increase statistically significant (P < 0.05) (Table 9)

An increased incidence of calculi of the urinary bladder was seen in males in the high-dose group (controls, 1/48, 2%, low-dose, 1/48, 2%, high-dose, 5/49, 10%) However, these calculi were not found in any of the animals for which transitional-cell carcinomas were seen

Focal or diffuse hyperplasia of the Kidneys transitional epithelium of the kidney was observed with significantly (P < 0.01) increased incidence in high-dose male rats (controls, 0/50, 0%, low-dose, 4/50, 8%, high-dose 15/50, 30%) and female rats (controls, 0/49, 0%, low-dose 5/50, 10%, high-dose, 34/50, 68%) administered 11-aminoundecanoic acid The increased incidence in low-dose female rats was also statistically significant (P < 0.05) (Table 9) None was seen in the controls Foci of calcification in the renal cortex and medulla, especially at the cortico-medullary junction and tip of the medulla, were common lesions in dosed female rats Nonneoplastic kidney lesions (e g, chronic nephropathy), commonly seen in aging rats, were observed in all groups

*Liver* Neoplastic nodules occurred with a significantly increased incidence (P < 0.01) in dosed male rats (controls, 1/50, 2%, low-dose, 9/50, 18%, high-dose, 8/50, 16%) The neoplastic nodules were not life shortening The slight increase in neoplastic nodules observed in female rats was not statistically significant Hepatocellular carcinomas were also observed in two high-dose male rats and one low-dose male rat

Mammary Gland Fibroadenomas showed an increased incidence (P < 0.05) in the low-dose male rat group (controls, 0/50, 0%, low-dose, 5/50, 10%, high-dose, 2/50, 4%) The slight increase at the high dose was not statistically significant

Hematopoietic System: A significantly decreased incidence (P < 0.05) of leukemia was observed in male rats administered 11-aminoundecanoic acid (control, 14/50, 28%; low-dose, 4/50, 8%; high-dose, 5/50, 10%). Subcutaneous Tissue: A decreasing trend (P < 0.05) was seen in neurofibromas of the subcutaneous tissue of male rats (control, 3/50, 6%; low-dose, 0/50, 0%; high-dose, 0/50, 0%).

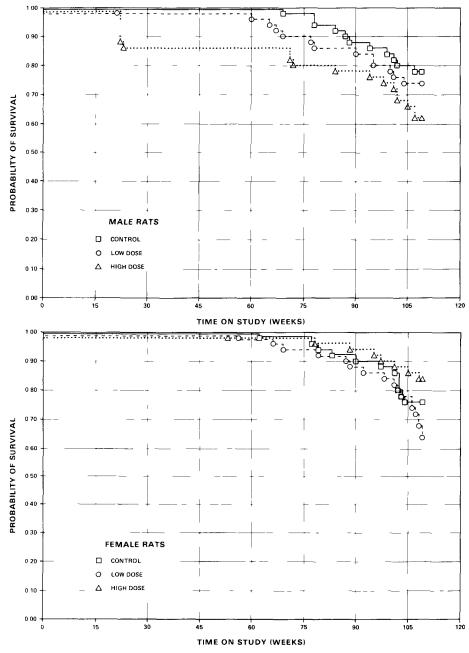


Figure 2. Survival Curves for Rats Fed Diets Containing 11-Aminoundecanoic Acid

Topography: Morphology:	Control	Low Dose	High Dose
Subcutaneous Tissue: Fibroma			
Tumor Rates			
Overall (b)	1/50(2)	1/50(2)	3/50(6)
Adjusted (c)	0 025	0 027	0 088
Terminal (d)	0/39(0)	1/37(3)	2/30(7)
Statistical Tests (e)			
Life Table	P=0 094	<b>P</b> =0 746	P=0 236
Incidental Tumor Test	P = 0 122	<b>P</b> =0 754	P=0 310
Cochran-Armitage Trend, Fisher Exact Tests	P = 0 202	P=0 753	P=0 309
Subcutaneous Tissue: Neurofibroma			
Tumor Rates			
Overall (b)	3/50(6)	0/50(0)	0/50(0)
Adjusted (c)	0 077	0 000	0 000
Terminal (d)	3/39(8)	0/37(0)	0/30(0)
Statistical Tests (e)			
Life Table	P = 0.023N	P = 0.131N	P = 0.171N
Incidental Tumor Test	P = 0.023 N	P=0 131N	P=0 171N
Cochran-Armitage Trend, Fisher Exact Tests	P = 0.037 N	P=0 121N	P=0 121N
Lung: Alveolar/Bronchiolar Adenon	na		
Fumor Rates			
Overall (b)	0/50(0)	4/50(8)	1/50(2)
Adjusted (c)	0 000	0 103	0 028
Terminal (d)	0/39(0)	3/37(8)	0/30(0)
Statistical Tests (e)			
Life Table	P=0 228	P=0 059	P=0 474
Incidental Tumor Test	P=0 320	P=0 060	P=0 617
Cochran-Armitage Trend, Fisher Exact Tests	P = 0 391	P=0 059	P=0 500
Hematopoietic System: Undifferentia	ated Leukemia		
Fumor Rates			
Overall (b)	12/50(24)	4/50(8)	4 50(8)
Adjusted (c)	0 284	0 099	0 114
Terminal (d)	9/39(23)	3/37(8)	1/30(3)
Statistical Tests (e)			
Life Table	P = 0.028 N	P = 0.040 N	P=0 084N
Incidental Tumor Test	$P = 0 \ 003 N$	P = 0.054 N	P=0 016N
Cochran-Armitage Trend, Fisher Exact Tests	P=0 014N	P = 0.027 N	P = 0.027 N

## Table 7. ANALYSIS OF PRIMARY TUMORS IN MALE RATS (a)

Topography: Morphology:	Control	Low Dose	High Dose
Hematopoietic System: Leukemia			
Tumor Rates			
Overall (b)	14/50(28)	4/50(8)	5/50(10)
Adjusted $(c)$	0 322	0 099	0 136
Terminal (d)	10/39(26)	3/37(8)	1/30(3)
Statistical Tests (e)			
Life Table	P = 0.023N	P=0 016N	P=0 075N
Incidental Tumor Test	P = 0.003 N	P = 0.017N	P = 0.020 N
Cochran-Armitage Trend, Fisher Exact Tests	P = 0 009 N	P = 0 009N	P=0 020N
Liver: Neoplastic Nodule			
Tumor Rates			
Overall (b)	1/50(2)	9/50(18)	8/50(16)
Adjusted (c)	0 026	0 237	0 258
Terminal (d)	1/39(3)	8/37(22)	7/30(23)
Statistical Tests (e)			
Life Table	P = 0 004	P=0 008	P=0 006
Incidental Tumor Test	P = 0 006	P=0 008	<b>P</b> = 0 008
Cochran-Armitage Trend, Fisher Exact Tests	<b>P</b> =0 023	<b>P</b> =0 008	P=0 015
Liver: Neoplastic Nodule or Carcino	ma		
Tumor Rates			
Overall (b)	1/50(2)	10/50(20)	10/50(20)
Adjusted (c)	0 026	0 255	0 298
Terminal (d)	1/39(3)	8/37(22)	7/30(23)
Statistical Tests (e)			
Life Table	$P = 0 \ 001$	P=0 005	P=0 002
Incidental Tumor Test	P=0 002	P = 0.003	P=0 004
Cochran-Armitage Trend, Fisher Exact Tests	<b>P</b> =0 007	P=0 004	P=0 004
Urinary Bladder: Transitional-Cell C	arcinoma		
Tumor Rates			
Overall (b)	0/48(0)	0/48(0)	7/49(14)
Adjusted (c)	0 000	0 000	0 196
Terminal (d)	0/39(0)	0/37(0)	3/30(10)
Statistical Tests (e)	·		
Life Table	P<0 001	(1)	P=0 005
Incidental Tumor Test	P<0 001	(f)	P=0 017
Cochran-Armitage Trend, Fisher Exact Tests	P=0 001	(f)	P=0 007

## Table 7. ANALYSIS OF PRIMARY TUMORS IN MALE RATS (a) (Continued)

Topography: Morphology:	Control	Low Dose	High Dose	
Pituitary: Chromophobe Adenoma		- 93		
Tumor Rates				
Overall (b)	3/48(6)	6/47(13)	5/47(11)	
Adjusted (c)	0 079	0.159	0.156	
Terminal (d)	3/38(8)	4/35(11)	4/30(13)	
Statistical Tests (e)				
Life Table	P=0.153	P=0.209	P=0 242	
Incidental Tumor Test	P=0.207	P=0.212	P=0.277	
Cochran-Armitage Trend, Fisher Exact Tests	P=0 292	P=0 232	P=0.345	
Adrenal: All Pheochromocytomas				
Tumor Rates				
Overall (b)	10/50(20)	12/50(24)	13/49(27)	
Adjusted (c)	0 212	0.316	0.404	
Terminal (d)	4/39(10)	11/37(30)	11/30(37)	
Statistical Tests (e)				
Life Table	P = 0.091	P=0.354	P=0.145	
Incidental Tumor Test	P=0.081	P=0.290	P = 0.120	
Cochran-Armitage Trend, Fisher Exact Tests	P=0 259	P = 0.405	P = 0.298	
Thyroid: C-Cell Adenoma or Carcin	oma			
Tumor Rates				
Overall (b)	6/42(14)	1/43(2)	3/42(7)	
Adjusted (c)	0.194	0.029	0.111	
Terminal (d)	6/31(19)	1/34(3)	3/27(11)	
Statistical Tests (e)				
Life Table	P = 0.141 N	P = 0.043N	P = 0.309 N	
Incidental Tumor Test	P=0.141N	P=0.043N	P=0.309N	
Cochran-Armitage Trend,	D-015731	D. O.CIN	D 6 6413	
Fisher Exact Tests	P=0.157N	P = 0.051 N	P=0.241N	
Testis: Interstitial-Cell Tumor				
Tumor Rates				
Overall (b)	45/50(90)	43/50(86)	40/50(80)	
Adjusted (c)	0.978	1.000	1.000	
Terminal (d)	38/39(97)	37/37(100)	30/30(100	
Statistical Tests (e)				
Life Table	P=0.101	P=0.568	P=0.159	
Incidental Tumor Test	P=0 221	P=0.584	P=0.530	
Cochran-Armitage Trend, Fisher Exact Tests	P=0.103N	P=0.380N	P=0.131	

## Table 7. ANALYSIS OF PRIMARY TUMORS IN MALE RATS (a) (Continued)

Topography: Morphology:	Control	Low Dose	High Dose
Mammary Gland: Fibroadenoma			
Tumor Rates			
Overall (b)	0/50(0)	5/50(10)	2/50(4)
Adjusted (c)	0 000	0 132	0 067
Terminal (d)	0/39(0)	4/37(11)	2/30(7)
Statistical Tests (e)			
Life Table	P=0 109	P=0 030	P=0 183
Incidental Tumor Test	<b>P</b> =0 136	P=0 031	P=0 183
Cochran-Armitage Trend, Fisher Exact Tests	P=0 239	P=0 028	P=0 247

#### Table 7. ANALYSIS OF PRIMARY TUMORS IN MALE RATS (a) (Continued)

(a) Dosed groups received doses of 7,500 or 15,000 ppm of 11-aminoundecanoic acid in the diet

(b) Number of tumor-bearing animals/number of animals examined at the site (percent)

(c) Kaplan-Meier estimated lifetime tumor incidence (proportion) after adjusting for intercurrent mortality

(d) Observed tumor incidence in surviving animals killed at the end of the study

(e) Beneath the control incidence are the P-values associated with the trend test Beneath the dosed group incidence are the P-values corresponding to pairwise comparisons between that dosed group and the controls The life table analysis regards tumors in animals dying before the end of the study as being (directly or indirectly) the cause of death The incidental tumor test regards these lesions as nonfatal The Cochran-Armitage and Fisher's exact tests compare directly the overall incidence rates A negative trend is indicated by (N)

(f) The configuration of tumor incidences precludes use of this statistic

Topography: Morphology:	Control	Low Dose	High Dose
Hematopoietic System: Undifferenti	ated Leukemia	<u> </u>	
Tumor Rates			
Overall (b)	11/50(22)	12/50(24)	6/50(12)
Adjusted (c)	0 240	0 294	0 127
Terminal (d)	4/38(11)	7/34(21)	2/42(5)
Statistical Tests (e)			
Life Table	P=0 094N	P=0 437	P = 0.132N
Incidental Tumor Test	P = 0.145N	P = 0.582N	P = 0.260 N
Cochran-Armitage Trend, Fisher Exact Tests	P=0 128N	P=0 500	P=0 143N
Hematopoietic System: Leukemia			
Tumor Rates			
Overall (b)	11/50(22)	14/50(28)	6/50(12)
Adjusted $(c)$	0 240	0 330	0 127
Terminal (d)	4/38(11)	7/34(21)	2/42(5)
Statistical Tests (e)			
Life Table	P = 0 100 N	P=0 283	P=0 132N
Incidental Tumor Test	P=0 158N	P=0 442	P = 0.260 N
Cochran-Armitage Trend, Fisher Exact Tests	P=0 134N	P=0 322	P = 0 143N
Hematopoietic System: Leukemia or	Lymphoma		
Tumor Rates	•		
Overall (b)	13/50(26)	15/50(30)	6/50(12)
Adjusted $(c)$	0 285	0 355	0 127
Terminal (d)	6/38(16)	8/34(24)	2/42(5)
Statistical Tests (e)	, , ,		, (,
Life Table	P = 0.046N	P=0 350	P = 0.060 N
Incidental Tumor Test	P = 0.068 N	P=0 521N	P=0 118N
Cochran-Armitage Trend,			
Fisher Exact Tests	P = 0.061 N	P=0 412	P = 0.062 N
Liver: Neoplastic Nodule			
Tumor Rates			
Overall (b)	4/50(8)	5/50(10)	6/50(12)
Adjusted (c)	0 105	0 147	0 143
Terminal (d)	4/38(11)	5/34(15)	6/42(14)
Statistical Tests (e)			
Life Table	P=0 313	P=0 430	P=0 433
Incidental Tumor Test	P=0 313	P=0 430	P=0 433
Cochran-Armitage Trend,	<b>D</b> 0.000	<b>D</b>	<b>_</b>
Fisher Exact Tests	P = 0.309	P = 0500	P = 0.370

## Table 8. ANALYSIS OF PRIMARY TUMORS IN FEMALE RATS (a)

Topography: Morphology:	Control	Low Dose	High Dose	
Liver: Neoplastic Nodule or Carcino	ma			
Tumor Rates				
Overall (b)	5/50(10)	5/50(10)	6/50(12)	
Adjusted (c)	0 132	0 147	0 143	
Terminal (d)	5/38(13)	5/34(15)	6 42(14)	
Statistical Tests (e)			. ,	
Life Table	P=0 444	P=0 560	P=0 570	
Incidental Tumor Test	<b>P</b> =0 444	P=0 560	<b>P</b> =0 570	
Cochran-Armitage Trend, Fisher Exact Tests	P = 0 436	P = 0.630	P=0 500	
Pituitary: Chromophobe Adenoma				
Fumor Rates				
Overall (b)	21 50(42)	19/50(38)	18/49(37)	
Adjusted (c)	0 509	0 445	0 408	
Terminal (d)	18/38(47)	11/34(32)	16/42(38)	
Statistical Tests (e)				
Life Table	P = 0.182N	P=0 559N	P=0 222N	
Incidental Tumor Test	P = 0.305 N	P = 0.434N	P=0 311N	
Cochran-Armitage Trend, Fisher Exact Tests	P=0 332N	P=0 419N	P=0 371N	
Adrenal: Pheochromocytoma				
Tumor Rates				
Overall (b)	3/48(6)	2 50(4)	2 49(4)	
Adjusted (c)	0 073	0 059	0 049	
Terminal (d)	1/38(3)	2/34(6)	2/41(5)	
Statistical Tests (e)				
Life Table	P = 0.296N	P = 0.534N	P = 0.471 N	
Incidental Tumor Test	P = 0.327 N	P = 0.485N	P = 0.540 N	
Cochran-Armitage Trend, Fisher Exact Tests	P=0 397N	P = 0.480N	P=0 490N	
Thyroid: C-Cell Adenoma or Carcin	oma			
Tumor Rates				
Overall (b)	4/45(9)	2 45(4)	3 45(7)	
Adjusted (c)	0 111	0 069	0 081	
Terminal (d)	2/33(6)	2 29(7)	3 37(8)	
Statistical Tests (e)				
Life Table	P = 0.294 N	P = 0.383N	P = 0.446 N	
Incidental Tumor Test	P = 0.323N	P = 0.338N	P = 0.507 N	
Cochran-Armitage Trend, Fisher Exact Tests	P=0 417N	P=0 338N	P = 0.500 N	

## Table 8. ANALYSIS OF PRIMARY TUMORS IN FEMALE RATS (a) (Continued)

Topography: Morphology:	Control	Low Dose	High Dose
Mammary Gland: Fibroadenoma	······································		
Tumor Rates			
Overall ( <i>b</i> )	11 50(22)	10/50(20)	11/50(22)
Adjusted (c)	0 289	0 282	0 255
Terminal (d)	11 38(29)	9/34(26)	10/42(24)
Statistical Tests (e)			
Life Table	P = 0.398N	<b>P</b> =0 588	P = 0.494 N
Incidental Tumor Test	P=0 417N	P=0 599N	P=0 511N
Cochran-Armitage Trend, Fisher Exact Tests	P=0 548	P=0 500N	P=0 595
Uterus: Endometrial Stromal Polyp			
Tumor Rates			
Overall (b)	15/50(30)	12/48(25)	10/50(20)
Adjusted $(c)$	0 382	0 328	0 238
Terminal (d)	14/38(37)	10/34(29)	10/42(24)
Statistical Tests (e)			
Life Table	P = 0.076N	P = 0.445N	P = 0.110N
Incidental Tumor Test	P = 0.095N	P = 0.407N	P=0 132N
Cochran-Armitage Trend, Fisher Exact Tests	P=0 150N	<b>P</b> =0 372N	P=0 178N

#### Table 8. ANALYSIS OF PRIMARY TUMORS IN FEMALE RATS (a) (Continued)

(a) Dosed groups received doses of 7,500 or 15,000 ppm of 11-aminoundecanoic acid in the diet

(b) Number of tumor bearing animals/number of animals examined at the site (percent)

(c) Kaplan-Meier estimated lifetime tumor incidence (proportion) after adjusting for intercurrent mortality

(d) Observed tumor incidence in surviving animals killed at the end of the study

(e) Beneath the control incidence are the P-values associated with the trend test Beneath the dosed group incidence are the P-values corresponding to pairwise comparisons between that dosed group and the controls The life table analysis regards tumors in animals dying before the end of the study as being (directly or indirectly) the cause of death The incidental tumor test regards these lesions as nonfatal The Cochran-Armitage and Fisher's exact tests compare directly the overall incidence rates A negative trend is indicated by (N)

		Males			Females		
	Control	Low Dose	High Dose	Control	Low Dose	High Dose	
Kidney							
Tissues Examined	50	50	50	49	50	50	
Hyperplasia	0	4 (8%)	15 (30%) (a)	0	5 (10%) <i>(b)</i>	34 (68%) (a)	
Papılloma	0	0	0	0	0	0	
Carcinoma	0	0	1 (2%)	0	0	2 (4%)	
Urinary Bladder							
Tissues Examined	48	48	49	49	47	48	
Hyperplasia	0	2 (4%)	20 (41%) (a)	4 (8%)	12 (26%) <i>(b)</i>	9 (19%)	
Papılloma	0	0	1 (2%)	0	0	1 (2%)	
Carcinoma	0	0	7 (14%) (a)	0	0	0	

### Table 9. INCIDENCE OF TUMORS AND PROLIFERATIVE LESIONS OF TRANSITIONAL CELLS IN RATS FED DIETS CONTAINING 11-AMINOUNDECANOIC ACID

(a) P < 0.01 (Fisher's exact tests) relative to controls

(b) P < 0.05 (Fisher's exact tests) relative to controls

## MICE

## **PRECHRONIC STUDIES**

## Fourteen-Day Study

All animals survived to the end of the dosing period. No compound-associated effects were observed in mice at any dose level (5,000-30,000 ppm).

### **Thirteen-Week Study**

Deaths occurred in 2/10 males and 2/10 females administered 15,000 ppm, 4/10 males and 2/10 females receiving 18,000 ppm, and 3/10 males receiving 20,000 ppm (Table 10). The cause of death of animals dying during the study

was not determined Mean body weight gain was depressed 20% in male mice receiving 15,000 ppm, but only 10% in male mice receiving 18,000 or 20,000 ppm Mean body weight gain was depressed by more than 10% in female mice fed diets containing 18,000-20,000 ppm 11-aminoundecanoic acid Focal mineralization of the kidney was noted in males that received 15,000-20,000 ppm and in females that received 15,000-18,000 ppm, particularly in those mice that died (Table 11)

Doses for mice in the chronic study were set at 7,500 and 15,000 ppm

### Table 10. DOSAGE, SURVIVAL, AND MEAN BODY WEIGHTS OF MICE FED DIETS CONTAINING 11-AMINOUNDECANOIC ACID FOR 13 WEEKS

-	Mean Body Weights (grams)			Weight Change Relative to	
(ppm)	Dose (ppm) Survival (a)	Initial	Final (b)	Change	Control <i>(c)</i> (Percent)
MALE			····		
0	10/10	20	30	+10	
9,000	10710	20	31	+11	+10
12,000	10/10	20	30	+ 10	0
15,000	8/10	20	28	+ 8	-20
18,000	6/10	20	29	+ 9	- 10
20,000	7/10	20	29	+ 9	- 10
FEMALE					
0	10/10	17	25	+ 8	
9,000	10/10	17	25	+ 8	0
12,000	10/10	17	25	+ 8	0
15,000	8/10	17	25	+ 8	0
18,000	8/10	17	24	+ 7	-13
20,000	10/10	17	23	+ 6	-25

(a) Number surviving/number per group

(b) Weights taken at week 12 are used as final weights

(c) Weight Change Relative to Controls =

```
Weight Change (Dosed Group) - Weight Change (Control Group)
```

Weight Change (Control Group)

× 100

Dose (ppm)	Number of Animals with Mineralization of the Kidney	Number of Animals with Mineralization that Died Before End of Study
Male		
0	0/10	0/0
9,000	0/10	0/0
15,000	2/10	1/2
18,000	4/10	3/4
20,000	2/10	2/3
Female		
0	0/10	0/0
9,000	0/10	0/0
15,000	1/10	1/2
18,000	2/10	2/2
20,000	0/10	0/0

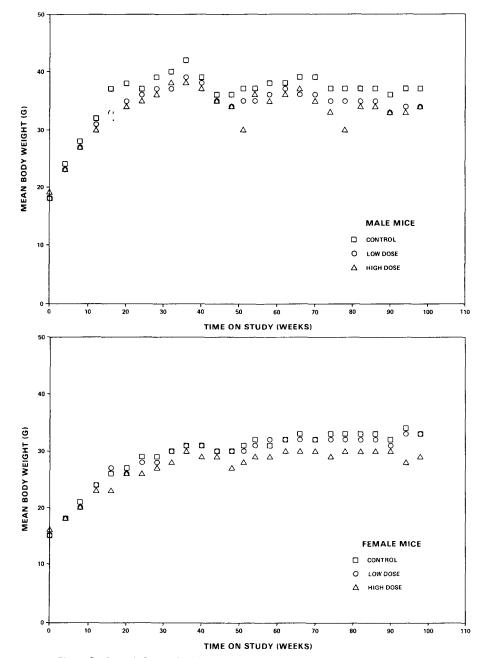
# Table 11.NUMBER OF MICE WITH MINERALIZATION OF THE KIDNEY IN THE 13-<br/>WEEK STUDY

#### **III. RESULTS MICE-CHRONIC STUDIES**

### **CHRONIC STUDIES**

#### **Body Weights and Clinical Signs**

Mean body weights of dosed mice of either sex were lower than those of the controls throughout the study, and the depressions in mean body weight gain were dose related (Figure 3 and Table 12). The average daily feed consumption per mouse by low- and high-dose mice was 110%and 123% that of the controls for males and 110% and 97% for females. No other compoundrelated clinical signs were observed (Table 13).





			Cumulative Mean Body Weight Change (grams)			Percent Weight Change Relative to Controls <i>(a)</i>	
	Week No.	Control	Low Dose	High Dose	Low Dose	High Dose	
MALE							
	1	18 <i>(b)</i>	18 <i>(b)</i>	19 <i>(b)</i>			
	4	+ 6	+ 5	+ 4	-17	-33	
	24	+ 19	+18	+16	- 5	- 16	
	44	+18	+17	+16	- 6	-11	
	62	+ 20	+ 19	+17	- 5	- 15	
	82	+19	+17	+15	-11	- 21	
	<del>9</del> 8	+19	+16	+15	-16	-21	
FEMALE							
	I	15 <i>(b)</i>	15 (b)	16 <i>(b)</i>			
	4	+ 3	+ 3	+ 2	0	- 33	
	24	+14	+13	+10	- 7	- 29	
	44	+15	+15	+13	0	- 13	
	62	+ 17	+17	+14	0	- 18	
	82	+18	+17	+14	- 6	- 22	
	98	+18	+18	+13	0	- 28	

# Table 12. CUMULATIVE MEAN BODY WEIGHT CHANGE OF MICE FED DIETS CONTAINING 11-AMINOUNDECANOIC ACID

(a) Percent Weight Change Relative to Controls =

Weight Change (Dosed Group) - Weight Change (Control Group) × 100

Weight Change (Control Group)

(b) Initial weight

				Low Dose		High Do
	Week	Control	Low Dose	Control	High Dose	Control
MALES	8	6	6	10	7	12
	24	6	5	0.8	6	10
	36	6	8	13	6	10
	48	5	6	12	6	12
	60	4	5	13	7	18
	72	4	4	10	5	13
	85	5	6	12	6	12
	97	4	4	10	6	15
FEMALES	8	7	8	11	6	09
	24	4	6	15	5	13
	36	-	9	-	9	-
	48	6	8	13	6	10
	60	6	6	10	6	10
	72	6	5	0.8	5	0 8
	85	6	4	07	4	07
	97	4	6	15	6	15

# Table 13. AVERAGE DAILY FEED CONSUMPTION (IN GRAMS) PER MOUSE IN THE CHRONIC STUDY

#### Survival

Estimates of the probabilities of survival of male and female mice administered 11-aminoundecanoic acid in feed at the concentrations of this bioassay, together with those of the control group, are shown by the Kaplan and Meier curves in Figure 4. The Tarone test indicated a significant (P < 0.001), positive, dose-related linear trend in mortality in both male and female groups. Two female mice, one from the low-dose and one from the high-dose groups, were missing.

In male mice, 37/50 (74%) of the control group, 34/50 (68%) of the low-dose group, and 18/50 (36%) of the high-dose group lived to the end of the study at 109 weeks. In female mice, 42/50 (84%) of the control group, 37/49 (76%) of the low-dose group, and 25/49 (51%) of the high-dose group lived to the end of the study at 109 weeks. The cause of death of animals dying during the study was not determined.

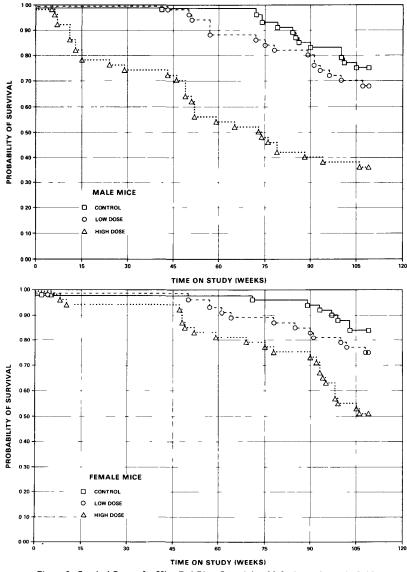


Figure 4. Survival Curves for Mice Fed Diets Containing 11-Aminoundecanoic Acid

# Pathology and Statistical Analyses of Results

Histopathologic findings on neoplasms occurring in mice are summarized in Table 14 and Appendix B, Tables B1 and B2; findings on nonneoplastic lesions are summarized in Appendix D, Tables D1 and D2. Tables B3 and B4 give the survival and tumor status for each individual animal in the male and female mouse studies, respectively.

Tables 15 and 16 contain the statistical analyses of those primary tumors that occurred with an incidence of at least 5% in one of the three groups.

Hematopoietic System: Malignant lymphomas occurred with a significant (P<0.05) increasing trend in male mice, as shown in Table 14 (control, 2/50, 4%; low-dose, 9/50, 18%, high-dose, 4/50, 8%). The increase was statistically significant (P<0.05) at the low dose but not at the high dose. In most of the affected mice, two or more organs were involved in the neoplastic process. For female mice, a slight increase in malignant lymphomas was not statistically significant. If the results of the two sexes are combined, then the increasing trend is significant (P < 0.05) by a life table analysis but not by an incidental tumor test.

*Kidneys:* The incidence of mineralization of the kidneys or kidney medulla was significantly (P < 0.01) increased in high-dose male mice (controls, 0/50, 0%; low-dose, 4/50, 8%; high-dose, 11/49, 22%), and in dosed female mice (controls, 0/50, 0%; low-dose, 8/49, 16%; high-dose, 9/49, 18%) fed 11-aminoundecanoic acid.

*Liver:* Hepatocellular vacuolization was observed with significantly (P < 0.05) increased incidence in high-dose male mice (controls, 2/50, 4%; low-dose, 2/50, 4%; high-dose 10/49, 20%) and in dosed female mice (controls, 0/50, 0%; low-dose, 5/49, 10%; high-dose, 6/49, 12%) fed 11-aminoundecanoic acid.

	Control	Low Dose	High Dose
Multiple Organs	2 (4%)	6 (12%)	4 (8%)
Localized			
Spleen		1 (2%)	
Lymph Node		1 (2%)	_
Thymus		1 (2%)	<u> </u>
Total	2 (4%)	9 (18%)	4 (8%)

Table 14.INCIDENCE OF MALIGNANT LYMPHOMAS IN MALEMICE FED DIETS CONTAINING 11-AMINO-<br/>UNDECANOIC ACID IN THE CHRONIC STUDY

Topography: Morphology:	Control	Low Dose	High Dose
Lung: Alveolar/Bronchiolar Adenon	18	*····	
Tumor Rates			
Overall (b)	10/50(20)	3/50(6)	4/46(9)
Adjusted $(c)$	0 262	0 088	0 222
Terminal (d)	9/37(24)	3/34(9)	4/18(22)
Statistical Tests (e)			
Life Table	P = 0.205 N	P = 0.051N	P=0 482N
Incidental Tumor Test	P = 0.202N	P=0 049N	P=0 478N
Cochran-Armitage Trend, Fisher Exact Tests	P=0 055N	<b>P</b> = 0 036N	P=0 100N
Hematopoietic System: Malignant L	ymphoma		
Tumor Rates	· •		
Overall (b)	2/50(4)	9/50(18)	4/50(8)
Adjusted (c)	0 049	0 243	0 181
Terminal (d)	1/37(3)	6/34(18)	1/18(6)
Statistical Tests (e)			
Life Table	P=0 036	P=0 022	P=0 097
Incidental Tumor Test	P=0 044	P=0 017	P=0 175
Cochran-Armitage Trend, Fisher Exact Tests	P=0 309	P=0 026	P=0 339
Circulatory System: Hemangiosarco	ma		
Tumor Rates			
Overall (b)	2/50(4)	3/50(6)	0/50(0)
Adjusted $(c)$	0 054	0 081	0 000
Terminal (d)	2/37(5)	2/34(6)	0/18(0)
Statistical Tests (e)			
Life Table	P=0 284N	P=0 463	P=0 407N
Incidental Tumor Test	P = 0.201 N	P=0 561	P=0 407N
Cochran-Armitage Trend,	D. 0 20201	D 0 500	D 0 2473
Fisher Exact Tests	P = 0.203N	P = 0500	P = 0.247 N
Liver: Adenoma			
Tumor Rates			
Overall (b)	1/50(2)	3/50(6)	3/49(6)
Adjusted (c)	0 024	0 088	0 140
Terminal (d)	0/37(0)	3/34(9)	2/18(11)
Statistical Tests (e)			
Life Table	P = 0.041	P=0 273	P = 0.114
Incidental Tumor Test	P=0 093	P=0 284	P=0 243
Cochran-Armitage Trend, Fisher Exact Tests	P=0 232	<b>P</b> = 0 309	P=0 301

#### Table 15. ANALYSIS OF PRIMARY TUMORS IN MALE MICE (a)

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Topography: Morphology:	Control	Low Dose	High Dose
Liver: Carcinoma	······································		· · · · · · · · · · · · · · · · · · ·
Tumor Rates			
Overall (b)	16/50(32)	16/50(32)	9/49(18)
Adjusted (c)	0.379	0.415	0.377
Terminal (d)	11/37(30)	12/34(35)	4/18(22)
Statistical Tests (e)			
Life Table	P=0.347	P=0.473	P=0.449
Incidental Tumor Test	<b>P=0.466</b>	P=0.459	P=0.579N
Cochran-Armitage Trend, Fisher Exact Tests	P = 0.081 N	P=0.585	P = 0.091 N
Liver: Adenoma or Carcinoma			
Tumor Rates			
Overall (b)	17/50(34)	18/50(36)	12/49(24)
Adjusted (c)	0.394	0.469	0.483
Terminal (d)	11/37(30)	14/34(41)	6/18(33)
Statistical Tests (e)			
Life Table	P = 0.140	P=0.386	P=0.203
Incidental Tumor Test	P=0.258	P = 0.368	P = 0.405
Cochran-Armitage Trend,			
Fisher Exact Tests	P = 0.184 N	P=0.500	P = 0.207 N

#### Table 15. ANALYSIS OF PRIMARY TUMORS IN MALE MICE (a) (Continued)

(a) Dosed groups received doses of 7,500 or 15,000 ppm of 11-aminoundecanoic acid in the diet.

(b) Number of tumor bearing animals/number of animals examined at the site (percent).

(c) Kaplan-Meier estimated lifetime tumor incidence (proportion) after adjusting for intercurrent mortality.

(d) Observed tumor incidence in surviving animals killed at the end of the study.

(e) Beneath the control incidence are the P-values associated with the trend test. Beneath the dosed group incidence are the P-values corresponding to pairwise comparisons between that dosed group and the controls. The life table analysis regards tumors in animals dying before the end of the study as being (directly or indirectly) the cause of death. The incidental tumor test regards these lesions as nonfatal. The Cochran-Armitage and Fisher's exact tests compare directly the overall incidence rates. A negative trend is indicated by (N).

Topography: Morphology:	Control	Low Dose	High Dose
Lung: Alveolar/Bronchiolar Adenor	na		
Tumor Rates			
Overall (b)	2/50(4)	3/49(6)	3/49(6)
Adjusted (c)	0 048	0 081	0 120
Terminal (d)	2/42(5)	3/37(8)	3/25(12)
Statistical Tests (e)			
Life Table	P=0 141	P=0 442	<b>P</b> =0 272
Incidental Tumor Test	P=0 141	P=0 442	<b>P</b> =0 272
Cochran-Armitage Trend, Fisher Exact Tests	P=0 403	P=0 490	P=0 490
Hematopoietic System: Malignant L	ymphoma		
Tumor Rates			
Overall (b)	9/50(18)	10/49(20)	10/49(20)
Adjusted (c)	0 203	0 250	0 327
Terminal (d)	7/42(17)	7/37(19)	5 25(20)
Statistical Tests (e)			
Life Table	P=0 089	P=0 384	P=0 137
Incidental Tumor Test	P = 0 339	P = 0.434	P=0 424
Cochran-Armitage Trend, Fisher Exact Tests	P=0 430	P=0 480	P=0 480
Liver: Adenoma or Carcinoma			
Tumor Rates			
Overall (b)	7/50(14)	8/49(16)	5/49(10)
Adjusted (c)	0 162	0 202	0 176
Terminal (d)	6/42(14)	6/37(16)	3 25(12)
Statistical Tests (e)			
Life Table	P=0 374	P=0 399	P=0 515
Incidental Tumor Test	P = 0.395N	P=0 415	P = 0.502N
Cochran-Armitage Trend Fisher Exact Tests	P=0 344N	P=0 483	P=0 394N
Liver: Carcinoma			
Tumor Rates			
Overall (b)	5/50(10)	7 49(14)	4/49(8)
Adjusted (c)	0 116	0 176	0 139
Terminal (d)	4 42(10)	5 37(14)	2 25(8)
Statistical Tests (e)			
Life Table	P = 0.320	<b>P</b> = 0 299	P=0 484
Incidental Tumor Test	P = 0.430 N	P=0 313	P = 0.537 N
Cochran-Armitage Trend Fisher Exact Tests	P = 0.450N	P=0 365	P=0 513N

## Table 16. ANALYSIS OF PRIMARY TUMORS IN FEMALE MICE (a)

Topography: Morphology:	Control	Low Dose	High Dose
Pituitary: Adenoma			
Tumor Rates			
Overall (b)	3/42(7)	5/39(13)	2/41(5)
Adjusted (c)	0.083	0.167	0.087
Terminal (d)	3/36(8)	5/30(17)	2/23(9)
Statistical Tests (e)			
Life Table	P=0.424	P=0.258	P=0.665
Incidental Tumor Test	P=0.424	P=0.258	P=0.665
Cochran-Armitage Trend, Fisher Exact Tests	P=0.434N	P=0.315	P=0.512N
Mammary Gland: Adenocarcinoma			
Tumor Rates			
Overall (b)	6/50(12)	1/49(2)	2/49(4)
Adjusted (c)	0.138	0.027	0.077
Terminal (d)	5/42(12)	1/37(3)	1/25(4)
Statistical Tests (e)			
Life Table	P = 0.132N	P = 0.083N	P=0.347N
Incidental Tumor Test	P = 0.073N	P = 0.094 N	P = 0.206 N
Cochran-Armitage Trend,			
Fisher Exact Tests	P = 0.075N	P = 0.059N	P = 0.141 N

#### Table 16. ANALYSIS OF PRIMARY TUMORS IN FEMALE MICE (a) (Continued)

(a) Dosed groups received doses of 7,500 or 15,000 ppm of 11-aminoundecanoic acid in the diet.

(b) Number of tumor bearing animals/number of animals examined at the site (percent).

(c) Kaplan-Meier estimated lifetime tumor incidence (proportion) after adjusting for intercurrent mortality.

(d) Observed tumor incidence in surviving animals killed at the end of the study.

(e) Beneath the control incidence are the P-values associated with the trend test. Beneath the dosed group incidence are the P-values corresponding to pairwise comparisons between that dosed group and the controls. The life table analysis regards tumors in animals dying before the end of the study as being (directly or indirectly) the cause of death. The incidental tumor test regards these lesions as nonfatal. The Cochran-Armitage and Fisher's exact tests compare directly the overall incidence rates. A negative trend is indicated by (N).

# IV. DISCUSSION AND CONCLUSIONS

A carcinogenesis bioassay of 11-aminoundecanoic acid was conducted in F344 rats and B6C3F1 mice

The probable cause(s) of death in the highdose male rats and in the high-dose mice of either sex was not determined, this poor survival rate, particularly for the mice (male, 36%, female, 51%) was due most likely to compound-related toxicity

11-Aminoundecanoic acid was carcinogenic for male F344 rats (Table 7), causing liver and urinary bladder tumors Transitional-cell carcinomas of the urinary bladder were observed in a significantly increased incidence (P < 0.01) in the high-dose group of male rats (controls, 0/48, 0%, low-dose, 0/48, 0%, high-dose, 7/49, 14%) Urinary bladder tumors are rare in untreated male F344 rats in the Bioassay Program (Goodman et al., 1979, Sacksteder, 1976, Sass et al, 1975) In 3,512 untreated male F344 rats observed in the NCI/NTP Bioassay Program, there is a 0.02% incidence of undifferentiated carcinoma and a 0 11% incidence of transitionalcell papilloma of the urinary bladder Transitional-cell carcinomas of the urinary bladder have not been seen in any untreated F344 male rats (0/780) examined at Litton Bionetics as part of the Bioassav Program

Neoplastic nodules of the liver also occurred with a significant, dose-related (P < 0.01) increase in male rats (controls, 1/50, 2%, lowdose, 9/50, 18%, and high-dose, 8/50, 16%) The historical incidence of this tumor in untreated male F344 rats in the Bioassay Program is 1.62% (57/3,512), and at Litton Bionetics, 1.79% (14/780) The occurrence of neoplastic nodules is considered to be a manifestation of the carcinogenesis process (NAS, 1980) Female rats fed diets containing 11-aminoundecanoic acid did not show evidence of compound related tumor development in the urinary bladder or liver or at any other site

Additional evidence of urinary tract toxicity was seen in rats An increased incidence of calculi of the urinary bladder was seen in males in the high-dose group (controls, 1/48, 2%, lowdose, 1/48, 2%, high-dose, 5/49, 10%) The rats with calculi were not the ones that had tumors of the urinary bladder Hyperplasia of the transitional epithelium of the kidney and bladder was associated with the administration of 11-aminoundecanoic acid in male and female rats (Table 9) In particular, hyperplasia was associated with calculi of the urinary bladder in 2/5 high-dose males For the 20 high-dose male rats with hyperplasia of the urinary bladder, 7 of these had transitional-cell carcinomas and 1 other had a papilloma, the remaining 12 had hyperplasia in the apparent absence of urinary bladder tumors Hyperplasia of the renal pelvis was also observed in the 13-week subchronic study in 2/9 females that received 18,000 ppm and in 1/10 males and 6/10 females that received 21,000 ppm

Leukemia was observed in male rats at the following incidences controls, 14/50, 28%, low-dose, 4/50, 8%, and high-dose, 5/50, 10% Control F344 male rats at Litton Bionetics have a mean incidence of leukemia of 14% (111/780, range 0%-44%)

No clear evidence was found for the carcinogenicity of 11-aminoundecanoic acid in mice Mean body weights for dosed mice of either sex were lower than those of the controls throughout the study There was a significant (P < 0.001), positive, dose-related linear trend in mortality in both male and female groups Early mortality in the high-dose male and female mice groups reduced the sensitivity of the bioassay for detecting increases in the incidence of late developing tumors

Malignant lymphomas occurred with a statistically significant (P<005), increase in lowdose male mice but not in the high-dose group (controls, 2/50, 4%, low-dose, 9/50, 18%, and high-dose, 4/50, 8%) The incidence of malignant lymphomas in untreated male B6C3F1 mice in this laboratory is 9% (44/507) (range 0%-20%) Malignant lymphomas in dosed male mice are not clearly associated with the administration of 11-aminoundecanoic acid because of the variable incidence of this tumor historically and the lack of a statistically significant effect at the high dose

Evidence for renal toxicity was also seen in mice Mineralization in the kidney was seen in dosed mice of either sex in both the subchronic and chronic studies

11-Aminoundecanoic acid was tested in the same room with other chemicals undergoing carcinogenesis bioassay feeding studies—rats 2,6dichloro-p-phenylenediamine, mice bisphenol A, caprolactam, and 2,6-dichloro-pphenylenediamine Abbreviated results from these three studies are given for comparative purposes Bisphenol A (NTP TR 215, 1982) was not carcinogenic for F344 rats or B6C3F1 mice of either sex, yet, the increased incidences of leukemia in male rats (control 13/50, low dose 12/50, high dose 23/50\*) and lymphoma in male mice (control 2/49, low dose 8/50\*, high dose 3/50) may have been associated with the administration of bisphenol A Caprolactam (NTP TR 214, Rev 1982) was not carcinogenic for F344 rats or B6C3F1 mice of either sex 2,6-Dichloro-p-phenylenediamine (NTP TR 219, 1982) was not carcinogenic for F344 rats and was carcinogenic for B6C3F1 mice, causing an increased incidence of hepatocellular adenomas (male control 4/50, low dose 7/50, high dose 15/50\*) and hepatocellular adenomas and carcinomas combined (female control 6/50, low dose 6/50, high dose 16/50\*)

Although chemical cross-contamination among groups cannot be excluded completely, the responses in the separate testing experiments persuade that any adjacent chemical effect was absent or minimal The results of these other studies support the conclusion that in male rats 11-aminoundecanoic acid caused transition-cell carcinomas of the urinary bladder and neoplastic nodules of the liver, additionally, in male mice an association may exist between the occurrence of malignant lymphoma (low dose) and administration of 11-aminoundecanoic acid These data stand independently because the bisphenol A exposed animals and the caprolactam exposed groups did not show any definite compound-related tumor development and because 2,6-dichloro-p-phenylenediamine induced liver tumors distinctly in mice The apparent correlative association between the 11aminoundecanoic acid-induced and the bisphenol A-caused marginal increase in lymphomas in low dose male B6C3F1 mice may or may not be real and significant

Conclusions Under the conditions of this bioassay, 11-aminoundecanoic acid was carcinogenic for male F344 rats, inducing neoplastic nodules in the liver and transitional-cell carcinomas in the urinary bladder The test chemical was not carcinogenic for female F344 rats No clear evidence was found for the carcinogenicity of 11-aminoundecanoic acid in B6C3F1 mice of either sex, although the increase in malignant lymphoma in male mice may have been associated with the administration of 11aminoundecanoic acid

\*Increase is statistically significant (P < 0.05) relative to controls

# **V. REFERENCES**

Armitage, P, Statistical methods in medical research New York John Wiley & Sons, Inc, 1971 362-365

Berenblum, I, ed, Carcinogenicity testing a report of the panel on carcinogenicity of the cancer research commission of UICC Geneva International Union Against Cancer, Vol 2, 1969

Cox, D R, Regression models and life tables J R Stat Soc B34, 187-220, 1972

Gart, J, Chu, K, Tarone, R, Statistical issues in interpretation of chronic bioassay tests for carcinogenicity J Natl Cancer Inst 62(4) 957, 1979

Goodman, D, Ward, J, Squire, R, Chu, K, Linhart, M, Neoplastic and nonneoplastic lesions in aging F344 rats Toxicol Appl Pharmacol 48 237-248, 1979

Hampel, C, Hawley, G, ed, The encyclopedia of chemistry New York Van Nostrand Reinhold Co, 1973 874-875

Hawley, G, ed, The condensed chemical dictionary New York Van Nostrand Reinhold Co, 1977 628-629

Kaplan, E L, Meier, P, Nonparametric estimation of incomplete observations J Amer Stat Assoc 53 457-481, 1958

Kırk-Othmer encyclopedia of chemical technology, 3rd ed New York John Wiley & Sons, Inc 5 6-7, 1979

Linhart, MS, Cooper, JA, Martin, RL, Page, NP, Peters, JA, Carcinogenesis bioassay data system Comp Biomed Res 7 230-248, 1974

Mantel, N, Haenszel, W, Statistical aspects of the analysis of data from retrospective studies of disease J Natl Cancer Inst 22 719-748, 1959

NAS, National Academy of Sciences Histologic typing of liver tumors of the rat J Natl Cancer Inst 64 179, 1980

NTP, National Toxicology Program Carcinogenesis bioassay of bisphenol A, US Dept of Health and Human Services, Public Health Service, National Institutes of Health, 1982, TR 215 NTP, National Toxicology Program Carcinogenesis bioassay of caprolactam, U S Dept of Health and Human Services, Public Health Service, National Institutes of Health, Rev 1982, TR 214

NTP, National Toxicology Program Carcinogenesis bioassay of 2,6-dichloro-pphenylenediamine, US Dept of Health and Human Services, Public Health Service, National Institutes of Health, 1982, TR 219

Peto, R, Pike, M, Day, N, Gray, R, Lee, P, Parish, S, Peto, J, Richard, S, Wahrendorf, J, Guidelines for simple, sensitive, significant tests for carcinogenic effects in long-term animal experiments International Agency for Research Against Cancer Monographs on the long-term and short-term screening assays for carcinogens A critical appraisal Geneva World Health Organization Supplement 2, 1980 311

Rekhter, MA, Nesterova, IP, Uch Zap Kishinevsk Univ 68 82, 1963

Sacksteder, M, Brief communication occurrence of spontaneous tumors in the germ free F344 rat J Natl Cancer Inst 57(6) 1371-1373, 1976

Sadtler Research Laboratories Sadtler standard spectra Philadelphia Sadtler Research Laboratories, IR No 15268

Sass, B, Rabstein, L, Madison, R, Nims, R, Peters, R, Kelloff, G, Incidence of spontaneous neoplasms in F344 rats throughout the natural lifespan J Natl Cancer Inst 54(6) 1449-1453, 1975

Squire, R, Levitt, M, Report of a workshop on classification of specific hepatocellular lesions in rats Cancer Res 35 3214, 1975

Tarone, R E, Tests for trend in life table analysis Biometrika 62 679-682, 1975

U S Code of Federal Regulations 21 177 1500 and 179 45, 1977

Ward, J M, Goodman, D G, Griesemer, R A, Hardisty, J F, Schueler, R L, Squire, R A, Strandberg, J D, Quality assurance for pathology in rodent carcinogenesis tests J Environ Path Toxicol 2 371-378, 1978

# **APPENDIX** A

# SUMMARY OF THE INCIDENCE OF NEOPLASMS IN RATS FED DIETS CONTAINING 11-AMINOUNDECANOIC ACID

#### TABLE A1.

# SUMMARY OF THE INCIDENCE OF NEOPLASMS IN MALE RATS FED DIETS CONTAINING 11-AMINOUNDECANOIC ACID

	UNTREATED Control	LOW DOSE	HIGH DOS
ANIMALS INITIALLY IN STUDY ANIMALS NECROPSIED ANIMALS EXAMINED HISTOPATHOLOGICALLY	50 50 50	50 50 50	50 50 50
INTEGUMENTARY SYSTEM			
¥SKIN PAPILLOMA, NOS SQUAMOUS CELL CARCINOMA TRICHOEPITHELIOMA SEBACEOUS ADENOMA	(50) 2 (4%) 1 (2%) 1 (2%)	(50) 1 (2%) 1 (2%) 1 (2%)	(50)
NEUROFIBROSARCOMA	1 (2%)		
*SUBCUT TISSUE SARCOMA, NOS FIBROMA FIBROSARCOMA LIPOMA	(50) 1 (2%) 1 (2%)	(50) 1 (2%) 1 (2%) 2 (4%) 1 (2%)	(50) 3 (6%)
NEUROFIBROMA	3 (6%)		
RESPIRATORY SYSTEM			
#LUNG ALVEOLAR/BRONCHIOLAR ADENOMA	(50)	(50) 4 (8%)	(50) 1 (2%)
PHEOCHROMOCYTOMA, METASTATIC FIBROSARCOMA, METASTATIC OSTEOSARCOMA, METASTATIC	1 (2%) 1 (2%)	1 (2%)	
HEMATOPOIETIC SYSTEM			
*MULTIPLE ORGANS LEUKEMIA,NOS UNDIFFERENTIATED LEUKEMIA	(50) 2 (4%) 10 (20%)	(50) 3 (6%)	1 (2%)
#SPLEEN UNDIFFERENTIATED LEUKEMIA	(50) 2 (4%)	(50) 1 (2%)	(50)

# NUMBER OF ANIMALS WITH TISSUE EXAMINED MICROSCOPICALLY \* NUMBER OF ANIMALS NECROPSIED

	UNTREATED Control	LOW DOSE	HIGH DOSE
DIGESTIVE SYSTEM			
#SALIVARY GLAND FIBROSARCOMA	(50)	(47) 1 (2%)	(49)
#LIVER NEOPLASTIC NODULE HEPATOCELLULAR CARCINOMA	(50) 1 (2%)	(50) 9 (18%) 1 (2%)	(50) 8 (16%) 2 (4%)
#STOMACH Squamous cell carcinoma	(50)	(50) 1 (2%)	(50)
#DUODENUM ADENOCARCINOMA, NOS	(49)	(50)	(50) 1 (2%)
#COLON Adenocarcinoma, nos Adenomatous Polyp, nos	(50)	(50)	(50) 1 (2%) 1 (2%)
URINARY SYSTEM			
#KIDNEY TRANSITIONAL-CELL CARCINOMA	(50)	(50)	(50) 1 (2%)
#URINARY BLADDER TRANSITIONAL-CELL PAPILLOMA TRANSITIONAL-CELL CARCINOMA	(48)	(48)	(49) 1 (2%) 7 (14%)
ENDOCRINE SYSTEM			
#PITUITARY CHROMOPHOBE ADENOMA	(48) 3 (6%)	(47) 6 (13%)	(47) 5 (11%)
#ADRENAL Cortical Adenoma	(50)	(50)	(49) 1 (2%)
PHEOCHROMOCYTOMA Pheochromocytoma, malignant	9 (18%) 1 (2%)	12 (24%)	13 (27%)
#THYROID C-CELL ADENOMA C-CELL CARCINOMA	(42) 6 (14%)	(43) 1 (2%)	(42) 1 (2%) 2 (5%)
#PANCREATIC ISLETS ISLET-CELL ADENOMA	(50)	(46) <u>1 (2%)</u>	(50) <u>1 (2%)</u>

## TABLE A1. MALE RATS: NEOPLASMS (CONTINUED)

TABLE A1. MALE RATS: NEOPLASMS (CONTINUED)	TABLE A1. MALE RATS: NEO	OPLASMS (CONTINUED)	
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	UNTREATED Control	LOW DOSE	HIGH DOSE
REPRODUCTIVE SYSTEM			
*MAMMARY GLAND Adenocarcinoma, nos Fibroadenoma	(50)	(50) 1 (2%) 5 (10%)	(50) 2 (4%)
*PREPUCE SEBACEOUS ADENOCARCINOMA	(50) 1 (2%)	(50)	(50)
*PREPUTIAL GLAND SQUAMOUS CELL CARCINOMA ADENOMA, NOS SEBACEOUS ADENOCARCINOMA	(50) 1 (2%) 1 (2%) 1 (2%)	(50) 1 (2%)	(50)
#TESTIS INTERSTITIAL-CELL TUMOR	(50) 45 (90%)	(50) 43 (86%)	(50) 40 (80%)
NERVOUS SYSTEM			
#CEREBRUM OLIGODENDROGLIOMA	(50)	(49) 1 (2%)	(49)
SPECIAL SENSE ORGANS			
*ZYMBAL'S GLAND Squamous cell carcinoma	(50)	1 (2%)	(50)
MUSCULOSKELETAL SYSTEM None			
BODY CAVITIES			
*MEDIASTINUM LIPOMA	(50)	(50) 1 (2%)	(50)
*ABDOMINAL CAVITY Mesothelioma, malignant	(50)	(50) 1 (2%)	(50)
*PERITONEUM MESOTHELIOMA, NOS	(50)	(50) 2 (4%)	(50)

	UNTREATED Control	LOW DOSE	
		(50)	
ALL OTHER SYSTEMS			
*MULTIPLE ORGANS MESOTHELIOMA, METASTATIC	(50)	(50) 1 (2%)	(50)
LEG OSTEOSARCOMA		1	
NIMAL DISPOSITION SUMMARY			
ANIMALS INITIALLY IN STUDY NATURAL DEATHƏ MORIBUND SACRIFICE SCHEDULED SACRIFICE	50 5 6	50 6 7	50 13 7
ACCIDENTALLY KILLED TERMINAL SACRIFICE Animal Missing	39	37	30
INCLUDES AUTOLYZED ANIMALS		****	
UMOR SUMMARY			
TOTAL ANIMALS WITH PRIMARY TUMORS* TOTAL PRIMARY TUMORS	49 94	48 105	42 98
TOTAL ANIMALS WITH BENIGN TUMORS Total benign tumors	48 71	43 78	4 1 7 0
TOTAL ANIMALS WITH MALIGNANT TUMORS TOTAL MALIGNANT TUMORS	18 21	14 16	17 19
TOTAL ANIMALS WITH SECONDARY TUMORS# Total secondary tumors	2 2	2 2	
TOTAL ANIMALS WITH TUMORS UNCERTAIN- Benign or malignant Total uncertain tumors	2 2	10 11	9 9
TOTAL ANIMALS WITH TUMORS UNCERTAIN- Primary or metastatic Total uncertain tumors			
PRIMARY TUMORS: ALL TUMORS EXCEPT SE Secondary Tumors: metastatic tumors			JACENT ORGA

# TABLE A1. MALE RATS: NEOPLASMS (CONTINUED)

## TABLE A2.

# SUMMARY OF THE INCIDENCE OF NEOPLASMS IN FEMALE RATS FED DIETS CONTAINING 11-AMINOUNDECANOIC ACID

	UNTREATED CONTROL	LOW DOSE	HIGH DOSE
ANIMALS INITIALLY IN STUDY ANIMALS NECROPSIED ANIMALS EXAMINED HISTOPATHOLOGICALLY	50	50 50 50	50 50 50
INTEGUMENTARY SYSTEM			
*SKIN PAPILLOMA, NOS SQUAMOUS CELL CARCINOMA BASAL-CELL TUMOR TRICHOEFITHELIOMA	(50) 1 (2%) 1 (2%)	(50)	(50) 2 (4%) 1 (2%)
*SUBCUT TISSUE NEUROFIBROMA	(50)	(50) 1 (2%)	(50)
RESPIRATORY SYSTEM			
#LUNG HEPATOCELLULAR CARCINOMA, METAST ALVEOLAR/BRONCHIOLAR ADENOMA	(50) 1 (2%) 1 (2%)	(50)	(49)
HEMATOPOIETIC SYSTEM			
*MULTIPLE ORGANS MALIGNANT LYMPHOMA, NOS LEUKEMIA,NOS UNDIFFERENTIATED LEUKEMIA	(50)	(50) 1 (2%) 2 (4%) 11 (22%)	(50) 6 (12%)
#SPLEEN MALIGNANT LYMPHOMA, NOS UNDIFFERENTIATED LEUKEMIA	(50) 1 (2%)	(49)	(50)
#LYMPH NODE Malignant Lymphoma, Nos	(50) 1 (2%)	(50)	(49)
#MESENTERIC L. NODE OSTEGSARCOMA, METASTATIC	(50)	(50)	(49) 1 (2%)

	UNTREATED Control	LOW DOSE	HIGH DOSE
#THYMUS THYMOMA	(43) 1 (2%)	(39)	(36)
CIRCULATORY SYSTEM			
NONE			
DIGESTIVE SYSTEM			
#SALIVARY GLAND Adenoma, nos	(50)	(49) 1 (2%)	(49)
#PAROTID DUCT Adenoma, Nos	(50) 1 (2%)	(49)	(49)
#LIVER NEOPLASTIC NODULE HEPATOCELLULAR CARCINOMA	(50) 4 (8%) 2 (4%)	(50) 5 (10%)	(50) 6 (12%)
#STOMACH Squamous cell carcinoma	(50) 1 (2%)	(50)	(48)
URINARY SYSTEM			
#KIDNEY TRANSITIONAL-CELL CARCINOMA	(49)	(50)	(50) 2 (4%)
#URINARY BLADDER TRANSITIONAL-CELL PAPILLOMA	(49)	(47)	(48) 1 (2%)
ENDOCRINE SYSTEM			
<pre>#PITUITARY     ADENOMA, NOS</pre>	(50) 1 (2%)	(50)	(49)
CHROMOPHOBE ADENOMA Chromophobe Carcinoma	21 (42%)	19 (38%) 1 (2%)	18 (37%)
#ADRENAL Cortical Adenoma	(48)	(50) 1 (2%)	(49)
PHEOCHROMOCYTOMA	3 (6%)	2 (4%)	2 (4%)

## TABLE A2. FEMALE RATS: NEOPLASMS (CONTINUED)

LOW DOSE	HIGH DOSE
(45) 2 (4%)	(45) 3 (7%)
(50)	(50) 1 (2%)
(50) 1 (2%) 1 (2%)	(50)
10 (20%) (50) 1 (2%)	11 (22%) (50)
(50)	(50) 1 (2%)
(50) 1 (2%)	(50) 1 (2%)
(48) 1 (2%) 1 (2%) 12 (25%)	(50) 10 (20%)
(50)	(50)
	1 (2%)
	(49)

#### TABLE A2. FEMALE RATS: NEOPLASMS (CONTINUED)

	UNTREATED Control	LOW DOSE	HIGH DOSE
MUSCULOSKELETAL SYSTEM			
NONE			
BODY CAVITIES			
*MESENTERY LIPOMA	(50) 1 (2%)	(50)	
ALL OTHER SYSTEMS			
LEG OSTEOSARCOMA			1
SOLE OF FOOT squamous cell carcinoma		11	
ANIMAL DISPOSITION SUMMARY			
ANIMALS INITIALLY IN STUDY NATURAL DEATHƏ MORIBUND SACRIFICE SCHEDULED SACRIFICE	50 4 8	50 5 13	50 3 5
ACCIDENTALLY KILLED TERMINAL SACRIFICE ANIMAL MISSING	38	32	42
TUMOR SUMMARY			
TOTAL ANIMALS WITH PRIMARY TUMORS* TOTAL PRIMARY TUMORS	46 86	47 80	37 67
TOTAL ANIMALS WITH BENIGN TUMORS TOTAL BENIGN TUMORS	38 60	38 53	3 1 5 1
TOTAL ANIMALS WITH MALIGNANT TUMORS Total malignant tumors	17 21	20 22	9 10
TOTAL ANIMALS WITH SECONDARY TUMORS# Total secondary tumors	1 1		1 1
TOTAL ANIMALS WITH TUMORS UNCERTAIN- Benign or malignant Total Uncertain Tumors	4 5	5 5	6 6
TOTAL ANIMALS WITH TUMORS UNCERTAIN- Primary or metastatic Total uncertain tumors			
<u>a includes autolyzed animals</u>			

#### TABLE A2. FEMALE RATS: NEOPLASMS (CONTINUED)

### TABLE A3.

#### INDIVIDUAL ANIMAL TUMOR PATHOLOGY OF MALE RATS IN THE 2-YEAR **STUDY OF 11-AMINOUNDECANOIC ACID**

## CONTROL

ANIMAL NUMBER	0	0	0 0 3	0 0 4	0 0 5	0 0 6	0 0 7	0 0 8	0 0 9	0 1	0 1		11	1	1	0 1 6	0 1 7	0 1 8	1	2	2	222	23	24	0.77
WEEKS ON Study	0	8	1	0 7	0	0	1	1	1	1	9	0	0	0	0	1	8	1	0	0	1	0	1	6	
INTEGUMENTARY SYSTEM	<u>+ 1</u>	8	91	8	_ 91	91	9	اف	9	. 91	8[	9	9	21	. 91	9	_41	9	_21	91	- 21	_91		-91	-
SKIN Papilloma, nos squamous cell carcinoma trichoepithelioma neurofibrosarcoma	ŀ	+	+	+	+	+	+	+	+	+	+	+ x	+	+	+	×	+	•	+	+	•	+	•	•	1
SUBCUTANEOUS TISSUE Fibroma Fibrosarcoma Neurofibroma	+	+	+	+	÷	+	+	+	+	+	+	٠	+	+ x x	+	+ x	+	+	+	•	+	+	٠	+	•
RESPIRATORY SYSTEM	+																								_
LUNGS AND BRONCHI Pheochromocytoma, metastatic Fibrosarcoma, metastatic	+	+	+	+	+	•	*	+	•	*	+	+	•	+ x	+	+	•	*	+	+	•	+	•	×	1
TRACHEA	+	+	+	+	+	+	+	+	+	+	٠	+	+	+	+	+	+	+	+	٠	÷	+	+	+	٠
HEMATOPOIETIC SYSTEM	1-								_								_								
BONE MARROW	+	+	+	+	+	+	+	÷		+	+	+	. <u>t</u>	+	+	+	*	+	+	+	+	+	+	÷	
SPLEEN UNDIFFERENTIATED LEUKEMIA	+	+	+	+	+	+	+	٠	+	+	+	+	+	+	+	+	+	+	+	٠	+	+	+	+	٠
LYMPH NODES	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	•
THYMUS	+	-	+		+	+	+	+	+	+	-	+	+	+	+	+	_	+	+	+	+	+	+	-	
CIRCULATORY SYSTEM	+					_			_		<u>.</u>														
HEART	+	÷	+	÷	+	+	+	÷	÷	+	÷	÷	+	+	+	÷	÷	+	÷	+	÷	÷	+	+	+
DIGESTIVE SYSTEM	+															·									
SALIVARY GLAND	+	+	+	+	+	.+	+	+	÷	+	+	+	+	+	+	÷	+	+	+	÷	÷	+	+	٠	+
LIVER Neoplastic Nodule	ŀ	+	+	÷	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+
BILE DUCT	1.	+	+	+	. +	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+
GALLBLADDER & COMMON BILE DUCT	н	N	м	N	N	N	N	N	+	н	N	N	N.	N	N	н	+	N	. М	N	N	N	N	н	N
PANCREAS	1.	+	+	+	+	+	+	+	+	+	+	+	+	+	÷	+	+	+	+	+	+_	+	+	+	
ESOPHAGUS	1+	-	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+
STOMACH	1+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+
SMALL INTESTINE	T+	+	+	-	+	+	+	+	+	+	+	+	+	+	+	+	+	÷	+	+	+_	+	+	+	+
LARGE INTESTINE	+	+	+	+	+	+	+	+	+	+	+	+	+	÷	+	+	+	+	+	+	+	+	+	+	+
URINARY SYSTEM	+				_																				_
KIDNEY	L.	+	+	+	+	+	<u>+</u>	.+	+	+	+	+	+	+	+	+	.t	+	+	+	+	+	t	<b>+</b> .	. +
URINARY BLADDER	+	÷	+	-	+	+	+	÷	+	+	+	÷	÷	÷	+	+	+	÷	+	+	+	+	+	<b>+</b> .	+
ENDOCRINE SYSTEM	+					-																			
PITUITARY Chromophobe Adendma	ŀ	+	+	+	+	+	+	+	+	+	+	+	-	+	+	ż	•	+	+	+	+	٠	* X	+	+
ADRENAL Pheochromocytoma Pheochromocytoma, malignant	Ľ	*	×	*	×	+	+	+	+	+	+	*	+	+	+	*	*	+	+	+	+	•	+	+ x	•
THYROID C-Cell Adenoma	<u> -</u>	+	+	+	+	+	+	٠	+	+	٠	~	-	+	+	+	+	+	+	-	+	+	-	+	-
PARATHYRGID	-	÷	+	+	-	+	+	+	÷	+	-	-	-	÷	+	+	-	+	+	-	+	+	-	+	-
REPRODUCTIVE SYSTEM	+				_										_										
MAMMARY GLAND	+	+	٠	+	*	÷	+	+	<del>.</del>	. <b>†</b>	+	÷	+	N.,	.t	÷	+	+	٠	÷	<u>t</u> _	+	+	+	•
TESTIS Interstitial-cell tumor	+ x	+	* ×	+	*	*	* ×	*	*	*	* ×	*	*	÷	*	*	+	*	* ×	*	+	* x	*	+	*
PROSTATE	1.	+	+	_	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+
PENIS Sebaceous Adenocarcinoma	N	N	N	N	N	N	N	N	NX	N	H	н	N	N	N	N	N	H	N	N	N	N	N	N	N
PREPUTIAL/CLITORAL GLAND Squamdus cell carcinoma Adenoma, nos Sebacedus Adenocarcinoma	N	N	н	N	N	N	N	N	N	N	N	N	N	N	H	N	N	H	N	NX	N	Ħ	N	N	N
BODY CAVITIES	+																								_
TUNICA VAGINALIS Mesothelioma, nos	+	+	٠	+	٠	+	+	÷	÷	+	٠	+	÷	÷	+	+	+	+	٠	•	÷	÷	+	+	+
ALL OTHER SYSTEMS	+																								
MULTIPLE ORGANS NOS Leukemia,nos	N	N	N	N	N	н	N	N	N	N	N	N	н	N	N	N	N	N	N	N	N	N	N	N X	N

+: TISSUE EXAMINED MICROSCOPICALLY -: REQUIRED TISSUE NOT EXAMINED MICROSCOPICALLY X: TUMOR INCIDENCE N: NECROPSY, NO AUTOLYSIS, NO MICROSCOPIC EXAMINATION

: NO TISSUE INFORMATION SUBMITTED C: Necropsy, NO Histology due to protocol A: Autolysis M: Animal Missing B: No Necropsy Performed

ANIMAL NUMBER	0 2 6	0 2 7	0 2 8	0 2 9	0 3 0	0 3 1	0 3 2	0 3 3	0 3 4	0 3 5	6 3 6	0 3 7	0 3 8	0 3 9	040	0 4 1	042	0 4 3	044	045	046	0 4 7	040	049	050	TOTAL
WEEKS ON Study	0	100	1	9	0	8	0	1	1	0	0	0	1	1	0	9	0	0	1	0	1	0	1	1	1	TISSUE
INTEGUMENTARY SYSTEM	1-91		1	- 91	91	71	91	9	- 21	.91	-21	-91	-91	91	-91	91	91	91	91	21		91	_ 9]	_21	2	
SKIN Papilloma, nos Squamous cell carcinoma Trichoepithelioma Neurofibrosarcoma	+	+	+	+	+	•	+	+	+	٠	+	+	+	+	+	+	* ×	+	+ ×	+	•	+	+	+ X	+	50× 2 1 1 1
SUBCUTANEOUS TISSUE Fibroma Fibrosarcoma Neurofibroma	+	+	+	+	+ x	٠	+	+	+	+	+ x	+	+	+	٠	+	٠	٠	+	+	+	+	+	+	+	50× 1 1 3
RESPIRATORY SYSTEM	+																		-		• -					
LUNGS AND BRONCHI Pheochromocytoma, metastatic Fibrosarcoma, metastatic	+	+	+	•	•	+	+	+	•	+	+	•	+	+	+	+	+	+	+	+	+	+	•	+	+	50 1 1
TRACHEA	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	50
TEMATOPOIETIC SYSTEM	1																									
BONE MARROW	++	+	+	+	+	+	+	+	+	+	+	+	.+	+	+	+	+	+	+	+	+	+	+	+	+	
SPLEEN UNDIFFERENTIATED LEUKEMIA	+	+	+	+	*	+	+	+	* x	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	50 2
LYMPH NODES	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	50
THYMUS	+	÷	+	+	+	-	÷	÷	+	+	+	+	+	+	+	-	+	+	+	+	-	÷	+	+	+	42
CIRCULATORY SYSTEM	+																								-	
HEART	+	+	+	+	÷	+	+	+	+	+	÷	+	٠	٠	+	+	÷	+	÷	+	+	+	+	+	+	50
DIGESTIVE SYSTEM																									-+	
SALIVARY GLAND	ļ.t.	<u>+</u>	+	+	<u>+</u>	+	+	<u>+</u>	+	+	+	+	+	+	+	+	+	+	+	÷	+	+	+	+	+	50
LIVER Neoplastic Nodule	+	+	+	+	+	+	+	+	+	+	* x	+	+	+	+	+	+	+	+	+	+	+	+	+	+	50
BILE DUCT	Ţ.	+	+	÷	÷	+	÷	÷	÷	+	+	÷	+	+	+	+	÷	+	+	+	+	+	+	÷	+	. 50
GALLBLADDER & COMMON BILE DUCT	IN	8	.N	N	Ν.	N	N	Ν.	N	N	N	N	N	н	N	N.	N	N	Ν	N	N	N	N	N	N	50×
PANCREAS	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	ŧ	+	+	+	+	+	50
ESOPHAGUS	+	+	+	+	÷	+	+	+	+	+	+	<u>+</u>	<u>+</u>	+	<u>+</u>	<u>+</u>	+	+	+	+	+	+	+	+	+	. 49
STOMACH	+	+	+	+	+	+	+	+	+	+	+	+	+	÷	÷	+	+	÷	+	+	+	+	. <u>+</u>	+	+	50
SMALL INTESTINE	+	+	+	+,	+	+	+	+	+	+	+	+	÷	+	÷	+	+	+	+	+	+	+	+	+	+	49
LARGE INTESTINE	+	+	+	+	÷	+	+	÷	+	÷	+	÷	+	+	+	+	÷	+	+	+	+	+	+	+	+	50
IRINARY SYSTEM	+																								+	
KIDNEY	++	+	+	+	+	+	<u>.</u>	+	+	+	+	+	+	<u>+</u>	+	+	+	+	+	+	+	+	ŧ	ŧ	+	50
URINARY BLADDER	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	-	ŧ	+	+	+	÷	+	+	+	+	48
NDOCRINE SYSTEM																										
PITUITARY Chromophobe Adenoma Adrenal	+	+	+	+	+	-	+	+		+	+	<u>*</u>	+	+	+	+	+	+	+	+	+	+	+	• •	+	48 50
PHEOCHROMOCYTOMA Pheochromocytoma, malignant Thyroid	+		•	× +		× +				•	•			+		•	•		•	•		•	•			<b>9</b> 1
C-CELL ADENOMA	Ļ	<u> </u>	-		×.	· · · ·		ž.	·				· · · ·	·	<u>x</u>	• 	-	x	•	·	ž_		•	-	ž.	42
PARATHYROID	+	-	+	+	+	-	-	+	+	+	+	-	+	+	+	+	+	÷	+	+	+	+	+	+	-	36
EPRODUCTIVE SYSTEM	1				-												,	•				_			1	
MAMMARY GLAND	++-	+	+	<u>+</u>	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	50×
TESTIS Interstitial-cell tumor	L*	*	* X	*	*	* x	* x	÷ X	* X	+ X	* X. :	* ×	* X	<u>*</u> .	*	*	*	*	50 45							
PROSTATE	L.	+	+	+	+	-	+	-	-	+	+	+	+	÷	+	+	+	-	+	+	+	+	+	+	+	45
PENIS	N	N	N	N	N	N	N	N	N	N	N	N	N	H	N	N	N	N	N	N	N	N	N	N	N	50×
SEBACEOUS ADENOCARCINOMA Preputial/clitoral gland Squamous cell carcinoma Adendma, Nos	N	N	н	N	N	N	N X	N	N	N	N	N	N	N	N	N	N	H	N	N	н	N	H	N	н	50× 1
ADENDMA, NOS Sebaceous Adenocarcinoma							î														x					1
ODY CAVITIES																									T	
TUNICA VAGINALIS Mesothelioma, Nos	+	+	+	+	+	•	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	*	+	50×
LL OTHER SYSTEMS																									+	
MULTIPLE ORGANS NOS LEUKEMIA,NOS UNDIFFERENTIATED LEUKEMIA	н	N	N X	N	N	H	N	н Х	N	N	н	N	N	N	N	н Х	N X	N X	N	N X	N	N	H	N	N X	50¥ 2 10
<ul> <li>TISSUE EXAMINED MICROSCOPICALLY</li> <li>REQUIRED TISSUE NOT EXAMINED MI</li> <li>TUMOR INCIDENCE</li> <li>NECROPSY, NO AUTOLYSIS, NO MICR</li> </ul>	CROSC	:0P1 91C	CAL EXA	LY MIN		ON				AUT	MAL	515 M1	IN NO SSI	NG				IBMI UE	7 T E T O	PRO	010	COL				

#### TABLE A3. MALE RATS: TUMOR PATHOLOGY (CONTINUED) CONTROL

### TABLE A3.

### INDIVIDUAL ANIMAL TUMOR PATHOLOGY OF MALE RATS IN THE 2-YEAR STUDY OF 11-AMINOUNDECANOIC ACID

#### LOW DOSE

ANIMAL NUMBER	801	0	0 0 3	0	0 0 5	0	0 0 7	0 0 8	0 0 9	0 1 0	0	0 1 2	0 1 3	0 1 4	0 1 5	0 1 6	0 1 7	0 1 8	0	20	0 2 1	0 2 2	0 2 3	024	
WEEKS ON Study	0 7 7	6	0	0	0	0	0	0	0	0	6	0	9	ò	0	9	9	ġ	0	ġ	0	6	0	0	0
INTEGUMENTARY SYSTEM																									_
SKIN Papilloma, Nos Squamous cell carcinoma Trichoepithelioma		+	+	+	* ×	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	*
SUBCUTANEOUS TISSUE Sarcoma nos Fibroma Fibrosarcoma Lipoma	+	+	+	٠	+	٠	+	+	+	*	+	÷	÷	+	+ x	•	+	+	+	•	+	* ×	+	•	•
RESPIRATORY SYSTEM																									
LUNGS AND BRONCHI Alveolar/bronchiolar adenoma Osteosarcoma, metastatic	+	+	+	+	+	+	+	+	+	+	+	+	×	+	+	+ 	+	+	+	•	+	•	+	+	+
TRACHEA	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+
HEMATOPOIETIC SYSTEM																									
SPLEEN UNDIFFERENTIATED LEUKEMIA	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	* *	+	+	+	+	+
LYMPH NODES Thymus	+	- -	+	+	+	+	+	+	+	++	+	+	+	+ +	+	+	+	++	+	++	+	- <u>+</u> -	+	+	+
CIRCULATORY SYSTEM	1																								-
HEART	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+
SALTVARY GLAND	1		1												1				1						
SALIVARY GLAND FIBROSARCOMA LIVER	+	+	<u>*</u>	+	+	+	+	+	+	+	+	+	+	+	+	+	•	+	+	+ 	+	+	• •	+	+
NEOPLASTIC NODULE Hepatocellular carcinoma	-							× +	+	×						×			×		×			+	_
BILE DUCT Gallbladder & common bile duct	-T-	- <u>+</u>		 N	<u>+</u>	, T		+ N	Ň	 N		+N		Ň		+ N	N	. <u>.</u> .	<u>.</u>		<u> </u>	N	<u>т</u> N		7
PANCREAS	1+	-	+	+	+	+	+	+	+	+		+	+	-	+	+	+	+	+	+	+	+	+	+	. +
ESOPHAGUS	+	÷	+	+	+	+	+	+	+	+	+	+	÷	+	+	+	+	+	+	+	+	+	+	+	
STOMACH Squamous cell carcinoma	+	+	+	ŧ	ţ	+	+	+	+	÷	+	+	+	÷	+	+	+	+	+	+	÷	+	÷	+	4
SMALL INTESTINE	<u>+</u>	+	+	+	 +	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	-
LARGE INTESTINE	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	÷	+	+	+	+	4
JRINARY SYSTEM																									-
KIDHEY	+	÷	.+	÷	÷	+	+	÷	ŧ	+	.+	+	.+	+	+	+	+	+	+	+	+	+	+	+	
URINARY BLADDER	+	+	+	+	+	+	+	+	+	+	-	+	+	+	+	+	+	+	+	+	+	+	+	+	+
NDOCRINE SYSTEM Pituitary													÷	+	+		÷							÷	
CHROMOPHOBE ADENOMA Adrenal	+	+	+	+	+	+	+	+	• •	• •	•	+		+	+	+	+	+	+	• •	+	+	; ;	+	+
PHEOCHROMOCYTOMA Thyroid	+	_	_	+	+	+	+	+	+	+	+	+	+	+	+	-	+	+	+	+	+	•	_^ +	+	-
C-CELL ADENOMA PARATHYROID	+-			<u>×</u> .					÷				<u> </u>												
PANCREATIC ISLETS	+	-	+	+	+	+	+	+	+	+	-	+	+	-	+	+	+	+	+	+	+	+	+	+	
ISLET-CELL ADENOMA								_																	
EPRODUCTIVE SYSTEM Mammary Gland Adenocarcinoma, nos Fibroadenoma	+	÷	+	÷	+ X	+	+	٠	+	٠	٠	÷	٠	+	÷	÷	+	+	÷	+	+	H	÷	+ x	•
TESTIS INTERSTITIAL-CELL TUMOR	+	+	* x	* x	* x	* ×	* x	* ×	<u>*</u>	* x	+	* x	*	*.	<u>*</u>	*.	* *	. <u>*</u>	ż	*	*	+	, X		*
PROSTATE Preputial/clitoral gland Adenoma, Nos	+ N	+ N	+ N	+ N	+ N	+ N	+ N	- N	+ N	- N	N	+ N	+ N	- н	+ N	+ N	+ N	÷ N	+ N	+ H	+ N	H	N	+ H	+ N
ERVOUS SYSTEM	+																								
BRAIN OLIGODENDROGLIOMA	+	+	+	+	+	+	٠	+	٠	+	+	-	+	+	÷	+	+	+	+	+	+	+	٠	+	+
PECIAL SENSE ORGANS																	,.			~					- 
ZYMBAL'S GLAND SQUAMOUS CELL CARCINOMA DDY CAVITIES	N	N	N	N	N	N	н	H	N	N	И	N	N	N	N	H	N	N	N	N	N	N	н	N	N
MEDIASTINUM LIPOMA	N	N	N	N	N	N	N	N	N	м	N	N	N	N	H	N	N	N	N	N	N	N	N	N	н
PERITONEUM MESOTHELIOMA, NOS MESOTHELIOMA, MALIGNANT	N	N	N	N	х	N	N	N	N	N	N X	N	N	N	N	N	N	H	N	N	H	N	N	н	N
LL OTHER SYSTEMS MULTIPLE ORGANS NOS MESOTHELIOMA, METASTATIC UNDIFFERENTIATED LEUKEMIA	N	N	H	N	N	N X	н	N	N	N	H X	N	N	N	N	N	N	N	N	N	N	N	N	N	N
LEG NOS OSTEOSARCOMA																x									_
TISSUE EXAMINED MICROSCOPICALLY REQUIRED TISSUE NOT EXAMINED MIC Tumor incidence Necropsy, no Autolysis, no Micro	CROSCO	DPIC	XAL	.Y 11N/	110	эн		C A B		NQ NECI AUTI ANII NO 1	ROP!	5Y, 5IS MIS	N0 551)	HIS 1G	AT1 Stol	0 M . 0 G 1	SUI	BMI1 JE 1	TEI O F	) 'R01	000	)L			

#### TABLE A3. MALE RATS: TUMOR PATHOLOGY (CONTINUED) LOW DOSE

ANIMAL NUMBER	0	0 2 7	02	0 2 9	03	0	0	0	0	0	0 3	0 3 7	0	0	0	0	6	0	0	0	0	0	0	0	0 5	
WEEKS ON Study	- 6 1 0	1	8 0 2	1	0	1	3	3 0 9	4		6 1 0	0	-8 1 0	9 1 0	0		1	3 1 0	4	0	-6-	7	- 8	9	-0 -1 0	TOTAL TISSUES TUMORS
INTEGUMENTARY SYSTEM	ě	ğ	ī	ğ	<u>ě</u>	ŏ	9	ś	. Ž	4	<u> </u>	5	9	9	8	. 9	9Ì	<u>ě</u>	ġ	5	ÿ	9	2	9	<u> </u>	
SKIN Papilloma, NOS Squamous cell carcinoma Trichoepithelioma	+	+	+	+	+	+	+	٠	+	٠	+	+	+	+	٠	٠	+	+	+	+	+	+ x	٠	٠	+	50× 1 1
SUBCUTANEOUS TISSUE Sarcoma, nos Fibroma Fibrosarcoma Lipoma	+ x	+	+	+	+	+	+	+ x	+	+	+	÷	+	+	+	+	÷	+	+	+ x	+	+	+	÷	+	50× 1 1 2
RESPIRATORY SYSTEM	$-\hat{ }$																									1
LUNGS AND BRONCHI Alveolar/Bronchiolar Adenoma Osteosarcoma, metastatic	+	+	+	+	+	+	+	* x	+	+	+	+	* x	+	+	* X	+	•	+	+	+	+	+	+	+	50 4 1
TRACHEA	+	+	+	+	+	+	+	ŧ	+	÷	+	+	+	+	÷	÷	÷	+	+	+	÷	+	+	+	+	50
HEMATOPOIETIC SYSTEM																				-					-	
BONE MARROW	+	+		+	+		+	+	+	+	+	+	+	+	+	÷	+	÷	+	+		+	+	+	+	47
SPLEEN UNDIFFERENTIATED LEUKEMIA	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	50
LYMPH NODES	+	+	+	+	+	+	+	_	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	48
THYMUS	+	+	-	+	+	+	+	-	÷	+	+	-	+	+	-	+	+	+	+		-	+	+	+	+	38
CIRCULATORY SYSTEM	+												_												+	
HEART	+	+	÷	+	٠	+	÷	+	+	+	÷	+	+	+	÷	+	+	+	+	+	+	+	+	+	+	50
DIGESTIVE SYSTEM																									+	
SALIVARY GLAND Fibrosarcoma Liver	+	+	-	+	+	+	+	-	•	+	+	+	+	+	+	+	+	+	+	+	-	+	+	+	+	47 1 50
NEOPLASTIC NODULE Hepatocellular carcinoma	×	+		÷	-	-	-	•	+	×		-		-	+	x	·	-			·	Ť	×	•	×	50 9 1
BILE DUCT	++	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	50
GALLBLADDER & COMMON BILE DUCT	<u></u> ⊢₩.	N	H	N	N	N	N	N	N	Ν	N	N	N	N	N	N	Ν.	<u>N</u>	<u>N.</u>	N	N	N	N	N	мİ	50×
PANCREAS	+	+	.+	+	+	+	+	+	+	+	+		_+		+	+	+	÷	+	+	+	+	+	+	≁	46
ESOPHAGUS	+	+	+	+	+	+	*	+	+	<u>+</u>	+	+	+	+	+	+	. <u>+</u>	<u>+</u>	+	. <u>+</u>	<u>+</u>	<u>+</u>	<u>+</u>	<u>+</u>	+	50
STOMACH Squamdus cell carcinoma	<u> </u>					<u> </u>	_	+	+	+	+		+	+	÷	+	+	+	+	+	+	+	+	+		50
SMALL INTESTINE	+	+	+	+	+	+	+	+	+	+	+	+	<u>+</u>	+	+	+	+	+	+	+	+	+	4	+	+	50
LARGE INTESTINE	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	50
URINARY SYSTEM																										
KIDNEY	+	+	+	- <u>+</u>	<u>+</u>	+	<u>+</u>	<u>+</u>	+	+	<u>+</u>	<u>+</u>			+	+	+	+	* +	+	<u>+</u>	<u>+</u>	+	+	+	50
URINARY BLADDER ENDOCRINE SYSTEM	+	+	*	+	+	+	<u> </u>	+	+	+	+	+	<u> </u>	+	-	+	+	+	•	+	+	+	+	+	+	48
PITUITARY Chromophobe Adenoma	+	+	+	* x	-	* ×	* ×	+ X	+	+	* x	+	+	+	٠	+	+	+	+	+	+	* x	+	+	+	47
ADRENAL Pheochromocytoma	t	+	+	÷	+	+	+	+	÷	÷	÷	+	+	+	+	÷	÷	+	÷	+	+	÷	ţ	+	+	50
T YROID C-CELL ADENOMA	Ť	+	+	+	+	+	+	-	+	+	+	+	+	÷	+	-	+	÷	~	+	+	+	-	+	+	43 1
PARATHYROID	+	-	+	+	+	÷	+		+	-	-	-	+		+	-	+	+	-	+	+	<u>+</u>	-	+	+	36
PANCREATIC ISLETS ISLET-CELL ADENOMA	+	+	+	+	+	+	+	+	* ×	+	+	-	+	+	+	+	+	+	+	+	+	+	+	+	+	45 1
REPRODUCTIVE SYSTEM MAMMARY GLAND ADENGCARCINOMA, NOS FIRROADENOMA	+	+	٠	+	÷	N	+	÷	+ x	+	+	+	+	÷	+	+	÷	÷	+	+	н	N	÷	÷	+	50×
TESTIS	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	* +	÷	+	+	+	+	+	+	+	+	50
INTERSTITIAL-CELL TUMOR	×.	<u>×</u> _	+	×	<u>×</u>	<u>×</u>	x	<u>×</u>	<u>×</u>	<u>×</u>	<u>×</u>	+	<u>x</u>	<u>×</u>	+	<u>×</u>	<u>×</u>	<u>×</u> +	× +	<u>×</u> +	× +	<u>×_</u> +	<u>×</u> +	<u>×</u> +	× +	<u>43</u> 39
PROSTATE Preputial/clitoral gland Adenoma, nos	N	N	N	N	N	N	N	N	N	N X	N	N	N	N	N	N	N	N	N	N	N	H	N	N	N	50× 1
NERVOUS SYSTEM						+	+		+		+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	49
BRAIN OLIGODENDROGLIOMA SPECIAL SENSE ORGANS	+	+	+	+		·		+			,				×	·									-	1
ZYMBAL'S GLAND Squamous Cell Carcinoma	N	N	N	N	N	н	N	н	н	н	N	N X	н	н	н	H	H	N	н	H	N	N	N	N	н	50* 1
BODY CAVITIES Mediastinum	N	N	N	N	н	N	N	н	N	N	N	N	N	н	н	N	N Y	N	N	N	н	N	N	N	N	50×
LIPOMA PERITONEUM MESOTHELIOMA, NOS MESOTHELIOMA, MALIGNANT	N X	N	н	N	N	N	H	N	N	N	N	N	N	N	N	N	А N	N	H	н	N	N	N	N	н	50× 2
MESCIHELIUMA, MALIGNANI ALL OTHER SYSTEMS MULTIPLE ORGANS NOS MESCIHELIOMA, METASTATIC UNDIFFERENITATED LEUKEMIA	N	N	N	N	N	н	N	н	N	N	N	н	N	N	N	N	N	N	н х	N	N	N	N	N	N	50×
LEG NOS	+		X																<u>×</u>							3
OSTEDSARCOMA	~ v									10	T T 4		E T	NFOR				IBMI	TTE	- D						

TISUE EXAMINED MICROSCOPICALLY
 REQUISED TISSUE NOT EXAMINED MICROSCOPICALLY
 TUMOR INCIDENCE
 NECROPSY, NO AUTOLYSIS, NO MICROSCOPIC EXAMINATION

NO TISSUE INFORMATION SUBMITTED C NECROPSY, NO HISTOLOGY DUE TO PROTOCOL A AUTOLYSIS M ANIMAL MISSING B NO NECROPSY DERFORMED

\* ANIMALS NECROPSIED

### TABLE A3.

### INDIVIDUAL ANIMAL TUMOR PATHOLOGY OF MALE RATS IN THE 2-YEAR STUDY OF 11-AMINOUNDECANOIC ACID

#### **HIGH DOSE**

ANIMAL	1 01																								
NUMBER	Ö	0	0	0	0	0	ş	0	Ö	1	1	1	1	1	1	1	1	1	1	2	2	2	2	2	2
WEEKS ON STUDY	6	1	1	9	1	1	1	i	9	1.	1		8	1	1	1	Î	1		1	1	1	1	3	7
INTEGUMENTARY SYSTEM	1 81	9	91	11	21	8	91	51	41	91	. 2)		-41	91	9	91	9	_71	. 91	21	_91		اف	91	2
SKIN Sebacedus Adenoma	+	+	•	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	*	+	+	+	+
SUBCUTANEOUS TISSUE Fibroma	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	* x	+	+	+	+	+	+
RESPIRATORY SYSTEM	-																						-		
LUNGS AND BRONCHI Alveolar/Bronchidlar Adenoma	+	+	٠	+	* X	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+
TRACHEA	+	+	+	+	+	+	+	+	+	+	+	+	٠	+	+	+	-	+	+	+	+	+	٠	+	+
HEMATOPOIETIC SYSTEM																									_
BONE MARROW	++	<u>+</u>	<u>+</u> .	±	+	+	+	+	+	+	+	+	_ <u>t</u>	+	+	+	+	.+	+	+	+	+	+	+	_ <u>+</u>
SPLEEN	++	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	ŧ	+	+	+	
LYMPH NODES	+	+	+	+	+	+	*	+	-	+	+	+	+	+	+	+	. <u>+</u>	+	t	+	+	+	+	+	
THYMUS	+	+	+	-	+	+	+	-	-	+	-	+	-	+	+	+	+	+	+	-	+	-	٠	+	
CIRCULATORY SYSTEM																									
HEART	+	+	+	+	+	+	*	+	+	+	+	+	+	+	+	+	+	+	+	+	+	*	*	*	+
DIGESTIVE SYSTEM																									
SALIVARY GLAND	++	+	+	+	+	+	+	+	~	+	+	+	+	+	. <u>+</u>		+	+	+	+	+	+	+	+	+
LIVER Neoplastic nodule Hepatocellular carcinoma	+	+	*	+	+	×	*	+	+	*	*	+	+	+	•	*	+	+	×	* x	+	+	+	•	•
BILE DUCT	+	÷	+	+	+	+	+	+	÷	+	÷	+	+	+	+	+	<u>+</u> .	+	+	+	÷	+	+	.+	•
GALLBLADDER & COMMON BILE DUCT	I N	к	N	N	N	N	N	N	N	N.	.N	N	N	N	N	N	N	N	<u>N.</u>	N	М	<u>N</u> .	N	N.	
PANCREAS	+	+	+	+	+	+	+	+	+	+	+	<u>+</u>	+	+	+	+	<u>+</u>	<del>.</del>	+	+	+	ŧ	<u>+</u>	+	
ESOPHAGUS	++-	+	+	+	+	+	+	+		+	+	+	+	+	+	+	+	+	+	+	+	.+	+	+	4
STOMACH	++,	+	+	+	+	<u>.</u>	+	+	+	+	+	+		+	+	+	+	+	+	+	+	+	+	+	1
SMALL INTESTINE Adendcarcinoma, NOS	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	_
LARGE INTESTINE Adenocarcinoma, nos Adenomátous Polyp, nos	*	+	+	+	•	+	+	+	+	•	+	+	+	+	+	+	+	+	+	+	•	•	•	+	•
URINARY SYSTEM	-																					_			_
KIDNEY TRANSITIONAL-CELL CARCINOMA	+	+	+	+	+	+	+	+	+	+	+	+	+	*	+	+	+	+	+	+	+	+	+	•	1
URINARY BLADDER TRANSITIONAL-CELL PAPILLOMA TRANSITIONAL-CELL CARCINOMA	+	+ x	* ×	+ x	+	+ x	٠	+	-	+	+	+	+	+	+	+	+ x	+	+	+ x	+	+ X	+	+	•
ENDOCRINE SYSTEM				<u> </u>													_								
PITUITARY Chromophobe Adenoma	+	÷	+	-	+	÷	+	÷	*	+	÷	÷	÷	+	٠	+	÷	٠	÷	+	+	+	+	+	+
ADRENAL Cortical Adendma Pheochromocytoma	+	+	+	+	+	+	+	÷	+	+	÷	+	+	+	+	+	+	+	+	٠	* x	+	+	+	+
	+					<u>×</u>				<u>×</u>		<u> </u>			<u>×</u>	<u>×</u>	<u> </u>					<u> </u>			
THYROID C-Cell Adenoma C-Cell Carcinoma	1×	-	•	•	-	•	+	_		•	+	+	+	+ X_	+	+	*	<u> </u>	•	_	·	-	•	-	
PARATHYROID	+	-	-	+	-	+		+	-	-	+	+	-	+	+	+	+	+	+	-	<b>t</b>	. <u>+</u> _	-	-	-
PANCREATIC ISLETS ISLET-CELL ADENOMA	+	+	+	+	•	+	+	+	+	+	+	+	* x	+	+	+	+	+	+	+	+	٠	+	+	+
REPRODUCTIVE SYSTEM																						_			-
MAMMARY GLAND FIBROADENOMA	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+
TESTIS INTERSTITIAL-CELL TUMOR	İż	*	x.	+	*	ż	×.	*	*	*	*	x	*	*	*	*	ż	ż	*	ż.	÷	*	*	*	1
PROSTATE	+	÷	+	+	+	+	+	-	-	+	+	÷	+	+	+	-	+	٠	+	+	+	٠	+	+	٠
BODY CAVITIES																						_			-
TUNICA VAGINALIS Mesothelioma, Nos	+	+	+	+	+	+	+	٠	+	+	+	+	+	+	+	+	+	٠	+	+	+	+	•	+	+
ALL OTHER SYSTEMS																								_	
MULTIPLE ORGANS NOS LEUKEMIA,NOS NDIFFERENTIATED LEUKEMIA	H	H	N	N	N	H	N	н 	N X	N	N	N	N X	N	N	н	N	N X	N	N	N	N	Η	N X	H
<ul> <li>TISSUE EXAMINED MICROSCOPICALLY</li> <li>REQUIRED TISSUE NOT EXAMINED MI</li> <li>TUMOR INCIDENCE</li> <li>NECROPSY, NO AUTOLYSIS, NO MICR</li> </ul>	CROSC				ATI	ON		C A M	1	AUT	OLY	SY, SIS MI	IN NO SSI	HI Ng	5T0	LOG	YE	IBM1 DUE	117E 70	PRO	ото	:OL			

WEEKS ÖN STUDY Stin Sebacedus adenoma Subcutanegus tissue Fibroma Respiratory System	2 6 9 8 +	2 7 1 9 +	2 8 1 0 9	2 9 1 0 9	3 0 1 0 9	3 1 1 7	32071	3	3 4 1 0	3 5 1 0	3 6 0 2	3 7 1 0	8	8	4 4 0 2 2 0	2		4 4 0 2	4 5 0 2	4 6 1 0	4  7  1  0	4 8 1	9	5	TOTA
STUDY INTEGUMENTARY SYSTEM SKIN SEBACEOUS ADEHOMA SUBCUTANEOUS TISSUE FIBROMA tespiratory system Lungs and Bronchi Alveolar/Bronchiolar Adenoma	9  8	9		9	9	0	7		6	d	ž	ó	ž	2	21	1.1	1 2	U I	- 51			ó	6		11220
SKIN SEBACEOUS ADENOMA SUBCUTANEGUS TISSUE FIBROMA ESPIRATORY SYSTEM LUNGS AND BRONCHI ALVEOLAR/BRONCHIOLAR ADENOMA	+	٠						- 21	- 91	9	2	9	2	ží	2 5	9	ź	ź	3	91	91	91	اف_	ية_	TUMO
SEBACEOUS ADENOMA SUBCUTANEGUS TISSUE FIBROMA ESPIRATORY SYSTEM LUNGS AND BRONCHI ALVEOLAR/BRONCHIOLAR ADENOMA	+		+	+	+	+	+	÷	÷	+	+	+	+	÷	+ +	+	+	+	+	+	÷	÷	÷,	+	50
FIBROMA ESPIRATORY SYSTEM Lungs and Bronchi Alveolar/Bronchiolar Adenoma	+																					<u> </u>	<u> </u>	•	
LUNGS AND BRONCHI Alveolar/Bronchiolar Adenoma		+	* ×	+	+	+	* ×	+	+	+	+	+	+	+	+ +	+	+	+	+	+	+	+	+	+	50
ALVEOLAR/BRONCHIOLAR ADENOMA			_					_													n			$\neg$	
TRACHEA	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+ +	+	+	+	•	+	+	+	+	+	50
	+	٠	+	+	+	+	+	+	+	+	+	+	+	+	+ +	+	+	+	+	+	+	+	+	+	4 9
EMATOPOIETIC SYSTEM																						_		+	
BONE MARROW	+	+	+	+	-	+	+	<u>+</u>	+	+	+	+	+	+	+ +	t	+	+	-	+		+	_+	-+	47
SPLEEN	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+ +	+	_ <u>+</u> _	+	+	+	+	+	+	-+	
LYMPH NODES	+	+	+	+	+	+	+	+	+	+	. <u>+</u>	+	+	+	<u>+</u> +	+	t_	+	+	+.	+	+	+	-+	49
THYMUS	+	+	+	+	-	+	-	+	+	+	-	+	-	-	- +	+	-	-	-	+	+	+	+	+	33
IRCULATORY SYSTEM																							-	Τ	
	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+ +	+	+	+	+	+	+	+	+	+	50
IGESTIVE SYSTEM																									
SALIVARY GLAND	<u>+</u>	+	+	+	+	+	+	+	+	+	+	+	<u>+</u>	<u>+</u>	+ +	+		+	+	+	+	+	<u>+</u>	+	49
LIVER NEOPLASTIC NODULE HEPATOCELLULAR CARCINOMA	+ x	+	+	+	*	+	+	+	+	*	+	+	•	+	* *	+	+	+	+	×	+	+	+	+	50
BILE DUCT	+	+	_ <b>t</b>	+	+	+	+	<u>+</u> _	+	+	÷	+	+	+	<u>+</u> _+	+	+	÷	+	+	<u>+</u>	+	+	+	50
GALLBLADDER & COMMON BILE DUCT	N	N	N	N	н	<u> </u>	N.	N	N	Ν.	H	Ν	N	N ·	+ N	N.	N.	N	N	N	Ν.	<u>N</u> _	<u>N</u>	N	50
PANCREAS	÷	+	<u>+</u>	+	+	+	÷	<u>+</u>	+	٠	+	+	+	+ ·	+ +	+	+	<u>+</u>	+	÷	+	+	<u>+</u>	+	.50
ESOPHAGUS	+	+	t	+	+	+	+	+	+	+	+	+	+	+ <u>·</u>	+ +	+	<del>.</del>	+	-	+	+	+	+	+	48
STOMACH	+	+	+	+	+	+	+	+	+	+	+	+	+	+ •	+ +	+	+	+	+	+	+	+	+	+	50
SMALL INTESTINE ADENOCARCINOMA, NOS	+	+	+	+	+	+	+	*	+	+	+	+	+	+ •	• •	+	+	+	+	+	+	+	+	+	50
LARGE INTESTINE Adenocarcinoma, nos Adenomatous Polyp, nos	+	٠	+	+	+	+	+	+	+	+	+	+	+	+ •	• •	* X	+	+	+	+	+	•	+	+ X	50
RINARY SYSTEM																	~							7	
KIDNEY TRANSITIONAL-CELL CARCINOMA	+	+	+	+	+	+	+	+		•	+	+	+	+ +	• •	+	+	+	+	+	+	+	+	+	50
URINARY BLADDER TRANSITIONAL-CELL PAPILLOMA TRANSITIONAL-CELL CARCINOMA	•	•	+ x	+	٠	+	+	+	+	+	•	+	+	•	• •	•	+	+	•	+	+	+	٠	+	49
NDOCRINE SYSTEM															-									+	
PITUITARY CHROMOPHOBE ADENOMA	+	+	•	*	+	-	+	+	+	+	-	* x	+	• •	×	+	+	+	+	+	+	<u>*</u>	+	+	47
ADRENAL Cortical Adenoma Pheochromocytoma	+	+	+	+	+ x	-	+	+	+ x	+	٠	+	+	• •	+ + ×	+ ×	٠	+	•	+ ×	•	+ x	+	+	49 1
THYROID C-CELL ADENOMA	+	ŧ	+	+	+	+	+	+	+	+	+	-	+ ·	+ +	+	+	+	+	+	+	+	+	+	+	42
C-CELL CARCINOMA																						<u>×</u>		+	
PARATHYROID	+	+	+	+	+	+	+	+	-	+	-				• •		+	+	+	+		+	-	+	30
PANCREATIC ISLETS ISLET-CELL ADENOMA	+	+	+	+	+	+	+	+	+	+	+	+	+ ·	• •	+	+	+	+	+	+	+	+	+	+	50
ÉPRODUCTIVE SYSTEM																								T	
MAMMARY GLAND FIBROADENOMA	+	+	* X	+	+	+	+	* X	+	+	+	+	н н ——	4 1	. +	+	N	N	N	+	+	+	+	+	50
TESTIS INTERSTITIAL-CELL TUMOR	+ x	* x	*	*	* X	* X	+	* X	+ x	+ X	+	+ x	+ -	• •	÷	*	٠	+	+	* x	* x	*	*	;	50 4
PROSTATE	+	+	+	+	+	+	+	+	+	+	+	+	+ •	• •		+	+	-	+	+	-	+	+	7	44
DY CAVITIES									•															+	
TUNICA VAGINALIS Mesothelioma, nos	+	÷	+	+	+	+	+	+	+	÷	+	+	+ +	+ +	+	٠	ŧ	+	+	÷	+	+	* x	+	50
L OTHER SYSTEMS MULTIPLE ORGANS NOS LEUKEMIA.NOS UNDIFFERENTIATED LEUKEMIA	н	N	N	N	N	N	N	N	N	N	N	N	N 1	• •	H N	N	N	N	N	N	N	N	N	N	50

#### **HIGH DOSE** TABLE A3. MALE RATS: TUMOR PATHOLOGY (CONTINUED)

#### TABLE A4.

### INDIVIDUAL ANIMAL TUMOR PATHOLOGY OF FEMALE RATS IN THE 2-YEAR **STUDY OF 11-AMINOUNDECANOIC ACID**

#### ANIMAL 0 0 0 0 0 0 0 0 0 0 0 0 0 WEEKS ON STUDY INTEGUMENTARY SYSTEM SKIN Papilloma, Nos Squamous cell carcinoma RESPIRATORY SYSTEM LUNGS AND BRONCHI Hepatocellular carcinoma, metasta Alveolar/Bronchiolar adenoma TRACHEA HEMATOPOIETIC SYSTEM BONE MARROW \* \* \* \* . . . . . . . . . SPLEEN MALIGNANT LYMPHOMA, NOS LYMPH NODES MALIGNANT LYMPHOMA. NOS THYMUS THYMOMA CIRCULATORY SYSTEM HEART DIGESTIVE SYSTEM SALIVARY GLAND ADENOMA, NOS LIVER NEOPLASTIC NODULE Hepatocellular carcinoma \* \* \* + + + ÷ + + + + BILE DUCT GALLBLADDER & COMMON BILE DUCT PANCREAS ESOPHAGUS STOMACH Squamous Cell Carcinoma SMALL INTESTINE + + + LARGE INTESTINE + URINARY SYSTEM KIDNEY URINARY BLADDER ENDOCRINE SYSTEM PITUITARY Adenoma, Nos Chromophobe Adenoma + + + ADRENAL PHEOCHROMOCYTOMA \* \* \* \* \* . . . . . . . . . . . . . . . . THYROID C-Cell Adenoma C-Cell Carcinoma PARATHYROID . . . . . . . . . . . . . . . . . . . REPRODUCTIVE SYSTEM MAMMARY GLAND Squamous Cell Carcinoma Fibroadenoma + + + PREPUTIAL/CLITORAL GLAND CARCINDMA,NOS ADENOMA, NOS UTERUS Adenocarcinoma, nos Endometrial stromal polyp GRANULOSA-CELL TUMOR + + + BODY CAVITIES MESENTERY LIPOMA ALL OTHER SYSTEMS MULTIPLE ORGANS NOS UNDIFFERENTIATED LEUKEMIA TISSUE EXAMINED MICROSCOPICALLY REQUIRED TISSUE NOT EXAMINED MICROSCOPICALLY TUMOR INCIDENCE NECROPSY, NO AUTOLYSIS, NO MICROSCOPIC EXAMINATION NO TISSUE INFORMATION SUBMITTED Necropsy, No Histology due to protocol Autolysis Animal Missing No Necropsy Performed

#### CONTROL

ANIMAL NUMBER	0 2 6	0 2 7	0 2 8	0 2 9	03	0 3 1	0 3 2	0 3 3	0 3 4	0 3 5	0 3 6	0 3 7	0 3 8	0 3 9	0 4 0	04	0 4 2	0 4 3	4	0 4 5	0 4 6	9	0 4 8	0	0 5 0	TOTAL
WEEKS ON Study	1	0 7	0	0	0	1	0	0	1	1	1	6	0	1	0	1	3	0	6	1	8	1	8 0 7	1	1	TUMOR
INTEGUMENTARY SYSTEM	- 91	91	2	9	21	.41	91	2	-21	9	91	91	9	91	91	2	2	71	91	91	21	-91	71	1	2	
SKIN Papilloma, nos Squamous cell carcinoma	•	+	٠	٠	+	+	*	٠	٠	+	+	٠	٠	+	٠	٠	+	٠	+	+	+	٠	+ x	+	٠	50× 1 1
RESPIRATORY SYSTEM																										
LUNGS AND BRDNCHI Hepatocellular carcinoma, metast Alveolar/Bronchiolar Adenoma	<u>م</u>	+	+	+	+ _X_	+	+	*	+	+	+	+	+	+	•	+	+	+	•	•	+	+	•	+	+	50 1
TRACHEA	+	+	+	+	+	+	٠	+	+	٠	+	+	+	+	+	+	٠	+	+	+	+	٠	+	+	÷	50
HEMATOPOIETIC SYSTEM																										
BONE MARROW	+	+	+	+	+	+	+	+	+	+	<u>+</u>	. <u>+</u> _	<u>.</u> +	+	.+	+ .	<u>+</u>	<u>+</u>	<u>+</u>	+	+	+	+	ŧ	+	50
SPLEEN Malignant Lymphoma, Nos	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	50 1
LYMPH NODES Malignant Lymphoma, Nos	L.	.+	+	+	+	+	+	+	*	+	+	+	+	+	+	+	+	+	+	+	+	<u>+</u>	+	+	+	50
THYMUS Thymoma	+	-	+	+	+	+	+	+	+	+	٠	+	* ×	٠	+	+	+	-	+	+	-	٠	-	+	+	43,
CIRCULATORY SYSTEM	+																									
HEART	+	٠	+	+	+	+	÷	÷	+	+	+	+	+	+	+	+	+	+	÷	÷	+	+	+	+	+	50
DIGESTIVE SYSTEM	1														-								-		1	
SALIVARY GLAND Adenoma, nos	+	+	+	+	+	+	+	+	+	+	+	+	+	+	•	•	+	+	•	+	+	+	+	•	+	50
LIVER Neoplastic nodule Hepatocellular carcinoma	+	+	+	+	+	+	*	+	+	*	+	•	+	+	+	•	+	•	+	+	+	•	•	•	+	50 4 2
BILE DUCT	+	+	+	+	. <u>+</u>	+	÷	÷	+	+	+	+	+	+ .	+	+	+	÷	+	<u>+</u>	+	+	+	<u>+</u>	+	
GALLBLADDER & COMMON BILE DUCT	1.1	N	N	N	N	N	н	N	N	N	N	N	N	N	N	<u>N</u>	N	Ν	N	N	N	N	N	N	N	50×
PANCREAS	+	÷	+	+	÷	+	+	+	+	÷	+	<u>+</u>	+	+	+	+	<u>+</u>	+	÷	÷	+	÷	+	+	+	50
ESOPHAGUS	+	+	+	+	÷	+	±	+	+	+	+	+	+	+	+	+	+	<u>+</u>	÷	÷	+	+	•	+	+	42
STOMACH Squamdus cell carcinoma	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	* ×	•	50
SMALL INTESTINE	+	+	+	+	+	+		+	+	+	+	<u>+</u>		+	+	t	+	+	+	+	ŧ	+	ŧ	+	┵	50
LARGE INTESTINE	+	+	٠	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	÷	+	+	+	+	50
IRINARY SYSTEM																									1	
KIDNEY	+	+	+	+	+	+	+	+	<u>+</u>	+	+	+	+	+	<u>+</u>	+	+	+	+	<u>+</u>		*	+	+	4	49
URINARY BLADDER	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	÷	+	+	+	+	-	+	+	+	+	49
NDOCRINE SYSTEM Pituitary Adenoma, nos	+	•	+	+	+	+	+	÷	+	+	+	+	÷	•	+	+	+	+	+	÷	+	+	+	+	+	50.
CHROMOPHOBE ADENOMA	×		X		x				x	x	x		-			x	x	<u>x</u>	<u>x</u>	x		<u>x</u>			+	21
ADRENAL Pheochromocytoma	Ľ	<u>+</u>	+	+	*	*	+	+	+	+	+	+	+	* x	+	+	+	+	+	*	-	+	+	*	4	48
THYROID C-Cell Adenoma C-Cell Carcinoma	L+	+	-	+	*	+	+	+	•	+	+	-	+	+	+	+	+	+	-	+	+	+	+	+	+	45 3 1
PARATHYROID	+	-	-	+	+	+	+	+	+	+	+	-	+	+	ŧ	-	+	-	-	÷	-	-	-	+	+	29
EPRODUCTIVE SYSTEM	+																								-	
MAMMARY GLAND Squamous cell carcinoma Fibroadenoma	+ X	•	+	+ x	+	٠	+ x	+ x	•	+	* ×	•	٠	+	•	+	+	+	+ x	+	+	N X	÷	+	٠	50× 1
PREPUTIAL/CLITORAL GLAND CARCINOMA,NOS Adenoma, Nos	N	N	N	N	н	н	N	N	N X	N	N	N	N	N	N	N	н	N	N X	N	N	H	H	N	N	50× 1 1
UTERUS Adenocarcinoma, nos Endometrial stromal Polyp		+	+	+	+	+	י X	÷ X	+	+ X	+	+ x	+	+ x	•	+	+	•	+	+ x	٠	•	•	+	*	50 1 15
OVARY Granulosa-Cell Tumor	+	+	+	÷	+	+	+	+	+	+	•	+	+	+	+	+	+	+	÷	+	+	+	+	+	-	<sup>50</sup> 1
ODY CAVITIES															-										+	
MESENTERY LIPOMA	N	H	N X	N	N	H	N	N	N	N	N	N	N	N	H	N	N	N	N	N	N	N	N	N	×	50× 1
LL OTHER SYSTEMS									_																1	
MULTIPLE ORGANS NOS UNDIFFERENTIATED LEUKEMIA	N	N	N	N	N	N	N	N	N	N	N	H	N	N	N	ĥ	N	N	N	N	H	N	N	N	N	50× 11

#### CONTROL TABLE A4. FEMALE RATS: TUMOR PATHOLOGY (CONTINUED)

NO TISSUE INFORMATION SUBMITTED C: Necropsy, No Histology due to Protocol Autolysis M Animal Missing B No Necropsy Performed

TISSUE EXAMINED MICROSCOPICALLY
 REQUIRED TISSUE NOT EXAMINED MICROSCOPICALLY
 Tumor Incidence
 Necropsy, No Autolysis, No Microscopic Examination

\* ANIMALS NECROPSIED

#### TABLE A4.

#### INDIVIDUAL ANIMAL TUMOR PATHOLOGY OF FEMALE RATS IN THE 2-YEAR **STUDY OF 11-AMINOUNDECANOIC ACID**

### LOW DOSE

NUMBER WEEKS ON STUDY INTEGUMENTARY SYSTEM SKIN TRICHOEPITHELIOMA SUBCUTANEOUS TISSUE NEUROFIBROMA RESPIRATORY SYSTEM LUNGS AND BRONCHI ALVEOLAR BRONCHIOLAR ADENOMA TRACHEA HEMATOPOIETIC SYSTEM BORE MARROW SPLEEM UNDIFFERENTIATED LEUKEMIA LYMPH NODES THYMUS CIRCULATORY SYSTEM HEART DIGESTIVE SYSTEM	+ + + + +	+ + + + + + + +	• • • • • • • • • • • • • • • • • • •	+ + + + + +	0 5 0 7 9 + + + + + + + +	0 5 6 + + + + + + +	0 7 1 0 9 9 + + + + + +	0 8 1 9 + + + + +	0  9  1  0  2 + + + +	+ + +	• • •	3 1 0 9 9 + + + +	4 0 8 8 8 8 8 8 8 8 8	5 1 0 9 + + + +		+++++	9[ + + +	2  + + 				3 9 + + +	+ + + + + + + + + + + + + + + + + + + +
STUDY INTEGUMENTARY SYSTEM SKIN TRICHOEPITHELIOMA UBCUTANEOUS TISSUE RESPIRATORY SYSTEM LUNGS AND BRONCHI ALVEOLAR/BRONCHIOLAR ADENOMA TRACHEA HEMATOPOIETIC SYSTEM BONE MARROM SPLEEM UNDIFFERENTIATED LEUKEMIA LYMPH NODES THYMUS CIRCULATORY SYSTEM HEART	0 9 + + + + + +	+ + + + + + + +	+ + + + +	• • • • •	_9  + + + +	61 + + +	• • • • •	• • •	+++++	+ +	• • •	++++	8 8 H H	• • • •	+++++	6 9 + + +	9[ + + +	• • •	• •	6  + +	* + +	• • •	+ + +
SKIN TRICHOEPITHELIOMA SUBCUTANEOUS TISSUE MEUROFIBROMA RESPIRATORY SYSTEM LUNGS AND BRONCHI ALVEOLAR/BRONCHIOLAR ADENOMA TRACHEA HEMATGPOIEYIC SYSTEM BONE MARROW SPLEEM UNDIFFERENTIATED LEUKEMIA LYMPH NODES THYMUS CIRCULATORY SYSTEM HEART	+ + + + + + + + + + + + + + + + + + + +	+ + + + +	+ + + + + + +	+ + + + + + +	+ + +	+ + +	+	+	+	+ +	• •	+	N +	+	+	+ +	+	+	+	+	+		
TRICHOEPITHELIOMA SUBCUTANEOUS TISSUE NEUROFIBROMA RESPIRATORY SYSTEM LUNGS AND BRONCHI ALVEOLAR/BRONCHIOLAR ADENOMA TRACHEA HEMATOPOIETIC SYSTEM BONE MARROW SPLEEN UNDIFFERENTIATED LEUKEMIA LYMPH NODES THYMUS CIRCULATORY SYSTEM HEART	+ + + + + + + + + + + + + + + + + + + +	+ + + + +	+ + + + + + +	+ + + + + + +	+ + +	+ + +	+	+	+	+ +	• •	+	N +	+	+	+ +	+	+	+	+	+		
NEUROFIBROMA RESPIRATORY SYSTEM LUNGS AND BRONCHI ALVEOLAR/BRONCHIOLAR ADENOMA TRACHEA HEMATOPOIETIC SYSTEM BONE MARROM SPLEEN UNDIFFERENTIATED LEUKEMIA LYMPH NODES THYMUS CIRCULATORY SYSTEM HEART	+ + + + + +	+ + + +	+ + +	+ + +	+	+	+	+					+										
LUNGS AND BRONCHI ALVEOLAR/BRONCHIOLAR ADENOMA TRACHEA HEMATOPOIETIC SYSTEM BONE MARROW SPLEEN UNDIFFERENTIATED LEUKEMIA LYMPH NODES THYMUS CIRCULATORY SYSTEM HEART	+ + + + + +	+ + + +	+ + +	+ + +	+	+	+	+															
ALVEOLAR/BRONCHIOLAR ADENOMA TRACHEA HEMATOPOIETIC SYSTEM BONE MARROW SPLEEN UNDIFFERENTIATED LEUKEMIA LYMPH NODES THYMUS CIRCULATORY SYSTEM HEART	+ + + + + +	+ + + +	+ + +	+ + +	+	+	+	+															
HEMATOPOIETIC SYSTEM BONE MARROW SPLEEN UNDIFFERENTIATED LEUKEMIA LYMPH NODES Thymus CIRCULATORY SYSTEM HEART	+	+ + + +	+ + +	+ + + +	+	+	+		+	+ +	+ +	+	+	-	•	•	+	+	+	+	+	+	+ •
BONE MARROW SPLEEN UNDIFFERENTLATED LEUKEMIA LYMPH NODES THYMUS CIRCULATORY SYSTEM HEART	+	+	+	+	+ + +	+	+	+															
SPLEEN UNDIFFERENTIATED LEUKEMIA LYMPH NODES THYMUS CIRCULATORY SYSTEM HEART	+	+	+	+	+	+	+	+															
UNDIFFERENTIATED LEUKEMIA LYMPH NODES Thymus Circulatory system Heart	+	+	+	+	+ +	+	+		+	+ +	• •	+	+	+	+	+	+	+	+	+	+	+	+ +
THYMUS CIRCULATORY SYSTEM HEART	+	+			+			+	+	+ +	+ +	+	+	+	+	-	+	+	+	+	+	+	• •
CIRCULATORY SYSTEM HEART			+	+		+	+	+	+	+ +	+ +	+	+	+	+	+	+	+	+	+	+	+	• •
CIRCULATORY SYSTEM HEART	+	+				-	+	+	+	+ +	+ +	-	1	+	1	-	-	-	+	-	+	+	
	+	÷																					
	+		+	+	÷	÷	+	+	÷	+ +	• •	+	+	+	+	+	+	+	+	+	+	+	+ +
	+																						
SALIVARY GLAND Adenoma, Nos	<b>_</b>	+	+	+	+	+	+	+	+	+ +	+ +	٠	+	+	+	+	+	+	+	+	+	+	• •
LIVER Neoplastic Nodule	+	+	+	+	+	+	* ×	+	+	+ +	+ +	+	+	+	+	+	ż.	* ×	+	+	+	+	+ +
BILE DUCT	+	+	+	+	+	+	+	+	+	+ +	• •	+	+	+	+	+	+	+	+	+	÷	+	+ - +
GALLBLADDER & COMMON BILE DUCT	N	N	N	N	N	N	Ν.	N	N	N N	N_	N	N	N	N	N	N	N	N	<u>N</u>	N	N	N N
PANCREAS	+	+	+	+	+	+	+	+	+	+ +	• •	÷	+	+	+	+	+	+	+	+	+	<u>+</u>	• •
ESOPHAGUS	+	+	+	+	+	÷	+	+	+	+ +	+	÷	÷	+	+	÷	+	+	+	+	+	+	+ +
STOMACH	+	+	+	÷	+	+	+	+	+	<u>+</u> +	• +	÷	+	+	+	÷	+	÷	•	+	+	+	• •
SMALL INTESTINE	+	+	+	+	+	+	+	+	+	+ +	• +	+	÷	+	+	+	+	÷	+	+	+	+	• •
LARGE INTESTINE	+	+	+	+	٠	+	+	+	+	+ +	• •	÷	+	+	+	÷	+	+	+	+	÷	+	
URINARY SYSTEM																							
KIDNEY	+	+	+	+	+	+	+	+	+	+ +	· . +	+	+	+	+	+	+	+	+	+	+	+	+ +
URINARY BLADDER	+	+	+	+	+	-	÷	+	+	+ +	• •	+	÷	+	+	-	+	+	+	+	•	+	
ENDOCRINE SYSTEM	<u>+</u>	-																					
PITUITARY Adenoma, Nos Chromophobe Adenoma Chromophobe Carcinoma	•	٠	+ ×	+ ×	+	+	٠	•	+ ×	+ + ×	+ : X	+	+	+ x	+	+	+ ×	+	+ x	+	+ x	•	+ + × ×
ADRENAL Cortical Adenoma Pheochromocytoma	+	+	+	+	+	+	+	+	* x	+ +	+	+	+	+	+	+	+	+	+	+	+	+	• •
THYROID C-CELL ADENOMA	+	+	+	+	÷	+	+	+	+	+ +	• •	-	÷	+	+	+	+	+	+	+	+	+	+ +
PARATHYROID	-	_	_	+	-	-	-	÷		+ -		-	+	+	+	+	+	+	÷	+	-	-	- +
REPRODUCTIVE SYSTEM	┼──																						
MAMMARY GLAND Adenoma, Nos Papillary Adenoma Fibroadenoma	+	+	+	+	+	٠	+ ×	* ×	•	• •	• + •	+	٠	+	٠	+	+	+	+	+	+ x	N	• •
PREPUTIAL/CLITORAL GLAND Sebaceous Adenocarcingma	N	N	N	H	N	N	N 1	N	N	N N	I N	N	н	N	N	N	N	N	н	н	о N	N	N N
UTERUS	+	+	•	•	+	-	+	+	+	+ +		+	+	+	+	+	+	+	÷	+	+	÷ •	
SARCOMA, HOS Leiomyosarcoma Endometrial stromal Polyp	+	•		•						× ×			×.		×								
OVARY OSTEOSARCOMA	•	+	÷	+	+	* *	+	٠	+	+ +	+	+	+	+	+	÷	+	+	÷	+	+	÷	+ +
ALL DTHER SYSTEMS	<u> </u>				. –															_			
MULTIPLE ORGANS NOS Malignant Lymphoma, nos Leukemia, nos undifferentiated Leukemia	N	H X	N X	N X	N	N	N	'n	N	N N	I N	N X	N X	N	N X	н х.	N X	N	H	N X	N	H	н н
SOLE OF FOOT Squamous cell carcinoma																	~	x					

TISSUE EXAMINED MICROSCOPICALLY Required Tissue not examined microscopically Tumor incidence Necropsy, no autolysis, no microscopic examination Ň

NO TISSUE INFORMATION SUBMITTED C Necropsy, no histology due to protocol A Autolysis A Animal Missing B No Necropsy Performed

ANIMAL NUMBER	2	0 2 7	2	0 2 9	0	0	0 3	3	0 3 4	0 3 5	0	0 3 7	0 3	0 3 9	0 4	0	0 4 2	0	4	0 4 5	0	0 4 7	0	0 4 9	0	
WEEKS ON	- 1	1	8	1		曲	-	1	1	1	-	1	-	1		╢	° 4 L	3	4	1	6	1	8	1	1	TOTAL
STUDY	9	0 8	8  7	9	9	0 6	9	9	0   9	9	9	9	8	9	9	0 3	0   9	9	9	9	9	0 9	9	9	9	TUMOR
SKIN TRICHDEPITHELIOMA	+	+	+	+	+	٠	* ×	+	+	+	+	+	+	+	+	+	٠	+	÷	+	+	٠	+	+	+	50× 1
SUBCUTANEOUS TISSUE Neurofibroma	+	+	+	+	+	+	+	* ×	+	+	+	+	+	+	+	+	÷	+	+	+	÷	+	+	+	+	50×
RESPIRATORY SYSTEM	+	_	··· -						-																+	
LUNGS AND BRONCHI Alveolar/bronchiolar Adenoma	+	+	+	÷	+	+	+	+	+	٠	+	÷	+	÷	+	+	+	÷	+	+	* ×	÷	÷	+	+	50
TRACHEA	T.	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	÷	÷	+	÷	+	÷	+	49
HEMATOPOIETIC SYSTEM																									-+	
BONE MARROW	+	÷	+	+	+	+	÷	÷	+	+	+	÷	+	<u>+</u>	-	+	+	+	<u>+</u>	+	+	+	+	+	+	49
SPLEEN UNDIFFERENTIATED LEUKEMIA	+	+	+	*	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	49
LYMPH NODES	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+_	+	+	+	+	50
THYMUS	+	+	-	+	+	÷	÷	+	÷	+	+	÷	+	+	+	+	+	÷	÷	÷	+	+	÷	٠	+	39
CIRCULATORY SYSTEM	+																								+	
HEART	+	+	+	+	+	+	+	+	+	+	٠	+	+	+	+	÷	+	+	+	+	+	+	+	+	+	50
DIGESTIVE SYSTEM																									+	
SALIVARY GLAND Adenoma, Nos	+	+	+	*	+	-	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	49 1
LIVER Neoplastic Nodule	ŀ	+	+	+	+	+	* x	+	+	+	* x	+	٠	+	+	+	+	+	+	+	+	+	+	+	٠	50 5
BILE DUCT	+	+	+	+	+	+	÷	+	+	+	+	+	+	+	+	+	+ .	+	+	+	+	÷	+	+	÷	50
GALLBLADDER & COMMON BILE DUCT	L.N.	н	N	Ν_	N	N	N	N	N	N	N	N	м	Ν	N	N	N	N	N	Ν.	.N	N	N	N	N	50×
PANCREAS	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	50
ESOPHAGUS	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	±	50
STOMACH	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	50
SMALL INTESTINE	+	+	-	+	+	+	+	+	÷	+	+	+	+	+	+	+	+	+	÷	+	+	÷	. t.	+	+	49
LARGE INTESTINE	+	+	-	+	+	+	٠	÷	+	+	+	+	+	+	+	+	÷	+	÷	÷	+	÷	÷	+	+	49
RINARY SYSTEM	+																								+	
KIDNEY	1+	+	+	+	+	+	+	<u>+</u>	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+ļ	50
URINARY BLADDER	+	+	÷	+	+	÷	÷	÷	-	+	+	+	+	+	÷	÷	+	+	+	+	÷	÷	÷	+	+	47
NDOCRINE SYSTEM																					_				+	
PITUITARY	+	+	+	÷	+	+	+	÷	+	+	+	+	+	+	+	+	+	+	+	÷	÷	+	+	+	٠ļ	50
ADENOMA, NOS Chromophobe Adenoma Chromophobe Carcinoma		x	x			x		x				x		×		x		x					x		x	19 1
ADRENAL Cortical Adenoma Pheochromocytoma	+	+	+	٠	+	٠	÷	٠	٠	+	+	+	+	+	+	÷	÷	+	+	+	+	+	+	+	+	50 1
THYPOTO	+	+	+	+	+	÷	+	÷	+	+	-	•	+	-	+	+	+	+	-	+	+	+	+	-	+	45
C-CELL ADENOMA					-							<u>×</u>													+	2
PARATHYROID Reproductive system		-	+	+	+	-	+	+	+	+	-	•	+	-	-	+	+	-	-	+	+	-	+	-	+	29
	+	÷	•	+	÷	+	•		+	+	N	÷	÷	÷	+	•				÷				÷		50×
ADENOMA, NOS PAPILLARY ADENOMA Fibroadenoma		x	•	,	Ŧ	•		•	•	•	r v	· ×	,		·	ŕ	Ý	ŕ	· ×	¥	•	•	· ×	•	Ì	1
PREPUTIAL/CLITORAL GLAND Sebacedus Adenocarcinoma	Ņ	H	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	50×
ITEDIIE	1	+	•	+	+		+	+	+	+	+	+	+	+	+	+	+	+	+	+	•	+	+	+	+	48
SARCOMA, NOS Leiomyosarcoma Endometrial Stromal Polyp		-			÷			- -	•		· ·				Ý	*		×	-		-				4	
OVARY OSTEOSARCOMA	<b>Î</b>	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	÷	+	50
LL OTHER SYSTEMS	+																								+	<u> </u>
MULTIPLE ORGANS NOS Malignant Lymphoma, nos Leukemia,nos Undifferentiated Leukemia	ж	N	N	H	N	N	N	N	N	N	н	N	н	N	N	N	H	N	N	N	H	N	N	N	н	50× 1 2
	+							X					<u>x</u>									<u>×</u>			+	U
SOLE OF FOOT	1																								1	1

### TABLE A4. FEMALE RATS: TUMOR PATHOLOGY (CONTINUED) LOW DOSE

 IISSUE EXAMINED MICROSCOPICALLY
 NO TISSUE INFORMATION SUBMITTED

 REQUIRED TISSUE NOT EXAMINED MICROSCOPICALLY
 NO TISSUE INFORMATION SUBMITTED

 X TUMOR INFOIDENCE
 AUTOLYSIS, NO MICROSCOPICALLY

 N MECROPSY, NO AUTOLYSIS, NO MICROSCOPIC EXAMINATION
 M ANTAL MISSING

 N MECROPSY, NO AUTOLYSIS, NO MICROSCOPIC EXAMINATION
 M ANTAL MISSING

\* ANIMALS NECROPSIED

#### TABLE A4.

### INDIVIDUAL ANIMAL TUMOR PATHOLOGY OF FEMALE RATS IN THE 2-YEAR STUDY OF 11-AMINOUNDECANOIC ACID

ANIMAL NUMBER	6 0 1	0	0	0	0 8 5	0	0 0 7	0	0	1	1	12	0 1 3	1	0	1	1		0	20	0 2 1	222	23	824	
WEEKS ON Study	0	1	0	1	1	1	0	0	0	2	1	07	1	0	2	0	1	2	-	0	1	5	0		
INTEGUMENTARY SYSTEM	+						لكسا							-	21	21		2		-21				_21	
SKIN Papilloma, ngs Basal-Cell Tumor	+	+	+	٠	+	+	+	+	•	+	٠	+	+	٠	•	•	•	+	٠	٠	٠	+	+ x	+	•
RESPIRATORY SYSTEM	1		_			••••														_					-
LUNGS AND BRONCHI	++	+	+	+	+	+		+	+	+	+	+	+	-	+	+	+	<del>†</del>	+	+	+	+	. •	+	_
TRACHEA	+	+	+	+	+	+	+	+	+	+	+	+	+	+	•	+	+	+	+	+	+	+	+	+	1
HEMATOPOIETIC SYSTEM																							_		
BONE MARROW	+	<u>+</u>	+	*	+	-	<u>+</u>	<u>+</u>	<u>+</u>	+	+	<u>+</u>	<u>+</u>	<u>+</u>	•	<u>+</u>	<u>+</u>	<u>+</u>	<u>+</u>	*	. <u>+</u> .	<u>+</u>	+	+	-
SPLEEN Lymph Nodes	+	+	÷	<u>+</u>	+	<del>*</del>	. <u>*</u>	* •	÷	•	<u>+</u>	+ +	÷	÷	* +	• •	<u>*</u>	• +	÷	÷	÷.	•	• •	 +	
OSTEOSARCOMA, METASTATIC	+	-	_				×	*	_	-	-				·	•				-	_	•	-	-	_
THYMUS	+	-	+	-	+	-	-	٠	+	+	+	-	+	-	-	+	•	+	+	+	+	-	+	+	-
CIRCULATORY SYSTEM			_																						
HEART	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	•	+	+	+	+	+	+	•
DIGESTIVE SYSTEM																									
SALIVARY GLAND Liver	+	+	+	+	- <u>+</u>	+ +	÷	÷	+	+	+	<u>+</u>	<u>+</u>	÷	+ +	<u>*</u>	+	<u>.</u>	<u>*</u>	*	+	<u>+</u>	*	+	-
NEOPLASTIC NODULE	Ļ	•	-	*	×.			x	•	•	•	•		·	*	*	*	-		ž.	+	÷	×.	*	_
BILE DUCT	++-	+	+	+	+	+	+	+	+	+	+	•	+	+	<u>+</u>	•	+	<u>.</u>	<u>+</u>	+	+	+		+	•
GALLBLADDER & COMMON BILE DUCT	<u>  ₩</u>	Η.	<u>N</u>	N	N	N	<u>N</u> .	N	N	Ν.	N	M	N	н	N	<u>N</u>	N	<u>۱</u>	N	Ν.	N.	N	N.		
PANCREAS		+	+	+	+	+	+	+	+	•	+		+	<u>+</u>	<u>+</u>	+	<u>+ ·</u>	•	<u>+</u>	+	+	+	•		-
ESOPHAGUS	+	+	+	<u>.</u>		+	+	<u>+</u>	<u> </u>	<u>+</u>	+	•	<u>+</u>	. <u>+</u>	+	<u>+</u>	<u>*</u>	•	<u>+</u>	+.	*	<u>+</u>	<u>+</u>	+	
STOMACH	+	·*.	<u>*</u>	<u>.</u>	•	<u>+</u>	<u> </u>	÷	•	<u>+</u>	<u>+</u>	<del>.</del>	+	<u>.</u>	<u>*</u>	<u>.</u>	<u> </u>		<u>.</u>	<u>.</u>	÷		Ť	<u>·</u>	
SMALL INTESTINE	+	•••	-	•	<u> </u>	<u> </u>	-	+	. <u>*</u>	<u>*</u>	+		<u>7</u> +	<u>~</u>	•	•	+ -	•		+	- <u>-</u>	-	•	<u> </u>	
LARGE INTESTINE URINARY SYSTEM	Ļ			•		· ·		•	<u> </u>	<u> </u>	-	•	•		-		•			·			•	·	_
KIDNEY	1.	÷	+	÷	+	+	+	+	•	+	+	+	+	÷	•	÷	•	•	+	•	÷	÷	÷	•	
TRANSITIONAL-CELL CARCINOMA	+															<u> </u>							-		Ň
URINARY BLADDER TRANSITIONAL-CELL PAPILLOMA	1+	*	+	+	+	+	+	+	٠	+	+	+	+	+	+	+	+	ł	+	+	+	+	+	+	•
ENDOCRINE SYSTEM	+																						-		-
PITUITARY	+	+	ŧ	+	٠	÷	+	+	÷	+	÷	+	+	t	-	÷	•	ŀ	+	+	t	+	t	+	t
CHROMOPHOBE ADENOMA Adrenal	+	+		+	+	•	+	•	* *	•	+	+	+	<u> </u>	+	•	+ •		+		÷	+	•	+	م.
PHEOCHROMOCYTOMA	<u> </u>			·	·			×		·			·					-							_
THYROID C-Cell Adenoma	+	*	* x	+	+	+	+	+	+	* X	+	+	+	+	+	+	+ ·	ŀ	+	+	-	+	+	+	+
PARATHYROID	L.	_	+	+		+	+	_	+	-	+	+	+		-	+	•		+	+	-	÷	+	+	
PANCREATIC ISLETS	+	+	+	÷	+	+	+	÷	+	÷	+	+	+	+	÷	+	•	۲	+	÷	÷	+	+	+	+
ISLET-CELL ADENOMA								×																	
REPRODUCTIVE SYSTEM Mammary Gland	1.	+	•	÷	÷	+	÷	÷	+	+	•	+	+	•		•	• •		+	÷	•	÷	÷	•	
FIBROADENOMA	Ļ			*	· -	-			•	<u>x</u>	<u> </u>	<u>.</u>	•			·			·		•			•	×
PREPUTIAL/CLITORAL GLAND Squamous cell carcinoma	N	N	N	N	N	N	N	N	N	N	N	N	N	N I	N	N	N I	1	N	N	N	N	н	N	N
FEMALE EXTERNAL GENITALIA PAPILLOMA, HOS	N	N	N	N	N	H	N	н	N	N	N	N	N	N	N	N	N I	1	N	N	NX	н	N	H	N
UTERUS	+	+	÷	+	+	+	+	+	+	•	+	÷	+	+	+	+	÷ •	•	÷ -	t	+	+	+	+	+
ENDOMETRIAL STROMAL POLYP Ovary	1.	•	-Ă-	+		+	+	+	+	+	+	+	+	+ .		•	×		× +	<u>×</u> +	•	•	•	+	-
NERVOUS SYSTEM	<u> </u>	•	-				•	-			•	'	· .			*				•	-	•	•		_
BRAIN	+	•	÷	÷	+	+	٠	•	+	÷	+	+	+	•	•	÷	• •	•	+	÷	+	+	÷	+	+
MENINGIOMA																						×			_
ALL OTHER SYSTEMS	<u> </u>																								
MULTIPLE ORGANS NOS Undifferentiated leukemia	L.	X	N	N	N	M	N	M	N	N	N	<u>х</u>	N	N 1	N	M	N )	•	N	N	N	N	N	ĸ	X
LEG NOS Osteosarcoma	1						x																		
LEG NOS OSTEDSARCOMA +: TISSUE EXAMINED MICROSCOPICALLY -: REQUIRED TISSUE HOT EXAMINED MI X: TUMOR INCIDENCE N: NECROPSY, NO AUTOLYSIS, NO MICR	Y ICROSI ROSCOI	COP: PIC	ICA EX			[ DN	×	,		AUI	ULT	SUE SY, SIS MI ROP		FOR HI NG PER				MI	TTE	DPRC	010	COL			

### HIGH DOSE

ANIMAL NUMBER	2	2	0 2 8	2	01 31 01	0 3	3	03	0 3	0 3 5	0	0 3 7	0 3 8	3	0 4 0	0	4	04	0	0	0   4   6	0 4 7	0 4 8	049	0 5 0	TOTAL
WEEKS ON STUDY	1	1	1	1	1		1	0	1	1	1	i			1	1		1	1	-1		1		1	1	TISSUES
INTEGUMENTARY SYSTEM	9	أف	أو	.91	. <u>9</u> [	<u> </u>	91	81	91	أف	9	ě	.9	91	<u>ě</u> ĺ	5	9	<u>ġ</u> j	<u> </u>	9	9	91	اف	. 9	_ ě	
SKIN Papilloma, nos Basal-Cell Tumor	+	٠	٠	+	٠	+	٠	٠	+	٠	٠	+	+	+	+	+	٠	٠	* ×	•	+	•	٠	, x	+	50* 2 1
RESPIRATORY SYSTEM																					_					· · ·
LUNGS AND BRONCHI	++-	+	+	+	+	_+_	+	+	+	+	+	+	+	+	+	+	+	+	<u>+</u>	+	+	+	*	+	+	49
	+	+	+	+	+	+	+	-	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	49
HEMATOPOIETIC SYSTEM																										
BONE MARROW Spleen	+	<u>+</u>	. <u>+</u>	•	+	- <u>+</u>	+	•	+	<u>*</u>	. <u>+</u>	<u>+</u>	<u>+</u>	+	. <u>+</u>	. <u>+</u>	+	*	_ <u>+</u>	. <u>+</u>	+	. <u>+</u>	+		-	<u>48</u>
LYMPH NODES			+	•		- <u>*</u> _	-	<u>.</u>	•	+	<u>,</u>	+	+	+	+	+	- <u>-</u> -		- <u>*</u>	+	+	- <u>*</u>	-	+	+	<u>50</u> 49
OSTEDSARCOMA, METASTATIC											•								· ·		<u> </u>				-1	
THYMUS	+	٠	+	+	-	+	+	-	+	+	+	+	+	+	+	+	+	-	+	-	-	+	+	÷	+	36
CIRCULATORY SYSTEM																										
HEART	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	*	+	+	50
DIGESTIVE SYSTEM																									1	
SALIVARY GLAND	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	-	+	+	+	+	+	49
LIVER NEOPLASTIC NODULE	+	+	+	+	+	+	+	+	+	<u>*</u>	+	+	+	+	+	+	+	* x	+	+	+	+	+	+	+	50 
BILE DUCT	+	+	+	+	+	+	+	+	t	+	+	+	+	+	+	+	+	+	+	+	+	+	t	+	+	50
GALLBLADDER & COMMON BILE DUCT	N.	N	N	N	Ν.	N_	N	N	ĸ	+	Ħ.	N	N	N	Ν	N	N	N	N	Ν.	N	N_	N	N	M	50 <u>*</u>
PANCREAS	<u>_</u> +	+	+	+	+	+	+	+	+	+	+_	<u>+</u>	+	+	+	+	+	+	+	+	+	+	+	+.	+	50
ESOPHAGUS	++		+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	<u>+</u>	+	+	+	+	+	+	49
STOMACH	++-	-	+	+	+	+	+	+	+	+	+	+	+	<u>+</u>	+	+	+	+	+	+	+	+	+	+	+	48
SMALL INTESTINE	++	-	+	+	+	•	+	+	+	+	+	<u>+</u>	+	. <u>+</u>	+	+	+	<u>+</u>	. <u>+</u>	+	+	. <u>+</u>	. <u>+</u>	+	+	49
LARGE INTESTINE	<b>•</b>		+	+	+	•	+	+	*	+	+	*	+	+	+	+	+	+	*	+	+	+	-	+	+	47
URINARY SYSTEM Kidney Transitional-cell Carcinoma	+	÷	٠	÷	÷	÷	+	٠	٠	٠	٠	÷	+	+	٠	÷	+	÷	* *	+	+	+	÷	÷	+	<sup>50</sup> ,
URINARY BLADDER TRANSITIONAL-CELL PAPILLOMA	+	-	+	+	+	+	+	-	+	+	+	+	+	÷	+	+	+	+	+	+	+	+	+	÷	+	48
ENDOCRINE SYSTEM																									-	
PITUITARY Chromophobe Adenoma	ŀ	+	*	+	+	+	* x	+	*	*	* x	+	*	+	* X	+	+	* ×	+	+	*	* x	* x	* ×	+	49 18
ADRENAL Pheochromocytoma	+	+	÷	* ×	+	+	+	+	+	+	+	+	+	+	+	÷	+	+	+	+	+	÷	+	+	+	49 2
THYROID C-CELL ADENOMA	+	+	+	+	-	+	+	+	+	+	-	-	+	+	+	+	+	+	+	+	-	+	+	÷	+	45 3
PARATHYROID	<u> </u>	÷	+	+	-	-	÷	+	-	+	-	-	+	+	-	+	+	÷	+	-	-		+	+	+	32
PANCREATIC ISLETS ISLET-CELL ADENOMA	+	+	+	÷	+	٠	+	+	+	•	+	+	+	٠	+	÷	+	+	+	+	٠	٠	+	+	+	50 1
REPRODUCTIVE SYSTEM																									1	
MAMMARY GLAND Fibroadenoma	1 ×	•	*	+	N	+	* x	+	+	<u>*</u>	* x	* x	<u>*</u>	+	+	+	+	+	*	+	+	+	<u>*</u>	+	+	50× 11
PREPUTIAL/CLITORAL GLAND Squamous Cell Carcinoma	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	H	N	N	N	N	N	N X	N	N	50×
FEMALE EXTERNAL GENITALIA PAPILLOMA, NOS	N	N	N	N	N	N	N	N	N	H	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	50×
UTERUS Endometrial Stromal Polyp	- <u> </u>	+	+	+	+	*	+	+	* ×	*	* x	+	+	+	Χ.	+	+	+	+	* x	+	+	+	+	+	50 10
OVARY	+	+	+	+	*	+	+	+	+	+	+	*	+	+	*	+	+	*	+	+	*	+	*	*	-1	50
NERVOUS SYSTEM BRAIN MENINGIOMA	+	+	+	÷	÷	+	÷	+	÷	÷	÷	٠	+	÷	+	+	÷	÷	÷	÷	+	÷	÷	+	+	50
ALL OTHER SYSTEMS																									$\dashv$	
MULTIPLE ORGANS NOS UNDIFFERENTIATED LEUKEMIA	N	N	N	N	N	N	N	N X	N	N	N	N	N	N	N	N X	N	N	H	N	N	N	N	N	м	50×
LEG NOS OSTEOSARCOMA				_																						1

#### TABLE A4. FEMALE RATS: TUMOR PATHOLOGY (CONTINUED) **HIGH DOSE**

 +
 TISSUE EXAMINED MICROSCOPICALLY
 NO TISSUE INFORMATION SUBMITTED

 REQUIRED TISSUE NOT EXAMINED MICROSCOPICALLY
 C

 X
 TUMOR INCIDENCE
 AUTOLYSIS

 N
 RECROPSY, NO AUTOLYSIS, NO MICROSCOPIC EXAMINATION
 M

 M
 ANIAL MISSING
 M

 N
 NECROPSY, NO AUTOLYSIS, NO MICROSCOPIC EXAMINATION
 M

\* ANIMALS NECROPSIED

# **APPENDIX B**

# SUMMARY OF THE INCIDENCE OF NEOPLASMS IN MICE FED DIETS CONTAINING 11-AMINOUNDECANOIC ACID

#### TABLE B1.

#### SUMMARY OF THE INCIDENCE OF NEOPLASMS IN MALE MICE FED DIETS CONTAINING 11-AMINOUNDECANOIC ACID

	UNTREATED CONTROL	LOW DOSE	HIGH DOSE
ANIMALS INITIALLY IN STUDY ANIMALS NECROPSIED ANIMALS EXAMINED HISTOPATHOLOGICALLY	50 50	50 50 50	50 50 49
INTEGUMENTARY SYSTEM			
NONE			
RESPIRATORY SYSTEM			
#LUNG HEPATDCELLULAR CARCINOMA, METAST ALVEOLAR/BRONCHIOLAR ADENOMA	(50) 3 (6%) 10 (20%)	(50) 2 (4%) 3 (6%)	(46) 1 (2%) 4 (9%)
HEMATOPOIETIC SYSTEM			
*MULTIPLE ORGANS Malignant Lymphoma, Nos	(50) 2 (4%)	(50) 6 (12%)	(50) 4 (8%)
#SPLEEN Malignant Lymphoma, Nos	(50)	(47) 1 (2%)	(47)
#LYMPH NODE Malignant Lymphoma, Nos	(33)	(43) 1 (2%)	(32)
#THYMUS Malignant Lymphoma, Nos	(24)	(25) 1 (4%)	(17)
CIRCULATORY SYSTEM			
*SKIN HEMANGIOMA	(50)	(50) 1 (2%)	(50)
*SUBCUT TISSUE Hemangioma	(50) 1 (2%)	(50)	(50)
#SPLEEN HEMANGIDSARCOMA	(50)	(47) 3 (6%)	(47)

	HIGH DOSE
(50)	(49)
(50) 1 (2%)	(49)
(50) 3 (6%) 16 (32%)	(49) 3 (6%) 9 (18%
	***
(48)	(42)
(42) 1 (2%)	(36) 1 (3%)
(50) 1 (2%)	(47) 1 (2%)
(50) 1 (2%)	(50)
_	(50) 1 (2%) PICALLY

### TABLE B1. MALE MICE: NEOPLASMS (CONTINUED)

### TABLE B1. MALE MICE: NEOPLASMS (CONTINUED)

	UNTREATED Control	LOW DOSE	HIGH DOSE
ODY CAVITIES			
NONE			
ALL OTHER SYSTEMS			
NONE			
NIMAL DISPOSITION SUMMARY			
ANIMALS INITIALLY IN STUDY Natural Deathg	50 7	50 12	50 28
MORIBUND SACRIFICE SCHEDULED SACRIFICE	5 1	4	4
ACCIDENTALLY KILLED Terminal sacrifice Animal missing	37	34	18
INCLUDES AUTOLYZED ANIMALS			
TUMOR SUMMARY			
TOTAL ANIMALS WITH PRIMARY TUMORS* Total primary tumors	30 36	29 39	18 22
TOTAL ANIMALS WITH BENIGN TUMORS Total benign tumors	15 16	8 10	9 9
TOTAL ANIMALS WITH MALIGNANT TUMORS TOTAL MALIGNANT TUMORS	19 20	25 29	12 13
TOTAL ANIMALS WITH SECONDARY TUMORS Total secondary tumors	# 3 3	2 2	1
TOTAL ANIMALS WITH TUMORS UNCERTAIN Benign or malignant Total uncertain tumors	-		
TOTAL ANIMALS WITH TUMORS UNCERTAIN Primary or metastatic Total uncertain tumors	-		
<pre>PRIMARY TUMORS: ALL TUMORS EXCEPT S \$ SECONDARY TUMORS: METASTATIC TUMORS</pre>			ADJACENT ORG

#### TABLE B2.

### SUMMARY OF THE INCIDENCE OF NEOPLASMS IN FEMALE MICE FED DIETS CONTAINING 11-AMINOUNDECANOIC ACID

	UNTREATED Control	LOW DOSE	HIGH DOSE
ANIMALS INITIALLY IN STUDY	50	50 1	50
ANIMALS MISSING Animals necropsied Animals examined histopathologically	50 50	49 49	49 49
INTEGUMENTARY SYSTEM			
*SKIN PAPILLOMA, NOS NEUROFIBROSARCOMA	(50) 1 (2%) 1 (2%)	(49)	(49)
*SUBCUT TISSUE OSTEOSARCOMA NEUROFIBROSARCOMA	(50)	(49) 1 (2%) 1 (2%)	(49)
RESPIRATORY SYSTEM			
#LUNG ALVEOLAR/BRONCHIOLAR ADENOMA OSTEOSARCOMA, METASTATIC	(50) 2 (4%)	(49) 3 (6%) 1 (2%)	(49) 3 (6%)
HEMATOPOIETIC SYSTEM			
*MULTIPLE ORGANS Malignant lymphoma, nos	(50) 7 (14%)	(49) 10 (20%)	(49) 9 (18%)
#SPLEEN Malignant Lymphoma, Nos	(50) 1 (2%)	(49)	(47)
#SMALL INTESTINE Malignant Lymphoma, Nos	(49)	(49)	(47) 1 (2%)
#KIDNEY Malignant Lymphoma, Nos	(50) 1 (2%)	(49)	(49)
CIRCULATORY SYSTEM			
*SUBCUT TISSUE HEMANGIOMA	(50)	(49)	(49)

	UNTREATED Control	LOW DOSE	HIGH DOSE
#SPLEEN Hemangiosarcoma	(50) 2 (4%)	(49)	(47)
#OVARY HEMANGIOMA	(46)	(46) 1 (2%)	(45)
DIGESTIVE SYSTEM			
#LIVER HEPATOCELLULAR ADENOMA HEPATOCELLULAR CARCINOMA OSTEOSARCOMA, METASTATIC	(50) 2 (4%) 5 (10%)	(49) 1 (2%) 7 (14%) 1 (2%)	(49) 1 (2%) 4 (8%)
URINARY SYSTEM			
NONE			
ENDOCRINE SYSTEM			
#PITUITARY Adenoma, Nos	(42) 3 (7%)	(39) 5 (13%)	(41) 2 (5%)
#ADRENAL Cortical Adenoma Pheochromocytoma	(47)	(46) 1 (2%) 1 (2%)	(48) 1 (2%)
#THYROID Follicular-cell Adenoma	(37) 1 (3%)	(41)	(40)
REPRODUCTIVE SYSTEM			
*MAMMARY GLAND Adenocarcinoma, nos	(50) 6 (12%)	(49) 1 (2%)	(49) 2 (4%)
XVULVA Papilloma, nos	(50) 1 (2%)	(49)	(49)
#UTERUS Adenocarcinoma, nos	(48) 1 (2%)	(49)	(49)
#OVARY/OVIDUCT PAPILLARY ADENOMA	(48)	(49)	(49) 1 (2%)

### TABLE B2. FEMALE MICE: NEOPLASMS (CONTINUED)

	UNTREATED Control	LOW DOSE	HIGH DOSE
		(46)	(45) 1 (2%)
NERVOUS SYSTEM			
NONE			
SPECIAL SENSE ORGANS			
*HARDERIAN GLAND ADENOMA, NOS		(49) 2 (4%)	(49)
MUSCULOSKELETAL SYSTEM			
NONE			
BODY CAVITIES			
NONE			
ALL OTHER SYSTEMS			
NONE			
ANIMAL DISPOSITION SUMMARY			
ANIMALS INITIALLY IN STUDY Natural deathg Moribund Sacrifice	50 4 4	50 8 4	50 19 5
SCHEDULED SACRIFICE ACCIDENTALLY KILLED TERMINAL SACRIFICE	42	37	25
ANIMAL MISSING TUMOR SUMMARY		1	1
TOTAL ANIMALS WITH PRIMARY TUMORS* TOTAL PRIMARY TUMORS	28 34	27 34	19 26
TOTAL ANIMALS WITH BENIGN TUMORS TOTAL BENIGN TUMORS	10 10	13 14	9 10
TOTAL ANIMALS WITH MALIGNANT TUMORS Total Malignant tumors	21 24	20 20	13 16
TOTAL ANIMALS WITH SECONDARY TUMORS# Total secondary tumors		1 2	
TOTAL ANIMALS WITH TUMORS UNCERTAIN- Benign or Malignant Total Uncertain Tumors			
TOTAL ANIMALS WITH TUMORS UNCERTAIN- PRIMARY OR METASTATIC TOTAL UNCERTAIN TUMORS			
A INCLUDES AUTOLYZED ANIMALS			

#### TABLE B3.

# INDIVIDUAL ANIMAL TUMOR PATHOLOGY OF MALE MICE IN THE 2-YEAR STUDY OF 11-AMINOUNDECANOIC ACID

#### CONTROL

ANIMAL			01		 01			 1									01				-	01		01	÷.
NUMBER	Ŏ	2	03	0	ŏi	ő	2	8	9	i	i	1	1	1	1	i	1		1	2	2	2	2	2	2
WEEKS ON Study	0	0	0	0	1	0	0	4	7	0	1	0	0	0	0	0	0	0	0	0	1	9	0	0	0
INTEGUMENTARY SYSTEM	- 21	_21		91		_91	91	.11	21	21	. 21	- 91	21.	.91	91	-21	.91	- 71	-21	_ <u>y</u> ]	<u>. 71</u>	01	-21-	<u>.</u>	4
SUBCUTANEOUS TISSUE Hemangioma	+	+	+	+	٠	+	٠	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	N
RESPIRATORY SYSTEM											•			• • •		·····						•			-
LUNGS AND BRONCHI Hepatocellular carcinoma, metasta Alveolar/Bronchiolar Adenoma	+	×	* ×	+	+	+ X	+	+	+	+	+	•	*	+	+	+ x	+	+	+	+	+	+	+ x	*	+
TRACHEA	+	+	÷	+	+	+	+	+	-	+	+	÷	+	+	+	+	+	+	÷	÷	-	-	+	+	+
HEMATOPOIETIC SYSTEM																									+
BONE MARROW	+	+	+	+	+	+	+	+	+	+	+	+	+	÷	+	÷	+	+		+	+	t	+	.+	-
SPLEEN	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	÷	+	ŧ	+	+	+
LYMPH NODES	+	_	-	+	-	+	-	+	-	+	+	+	+	+	_	+	+	+	+	+	+	+	+	+	_
THYMUS	+	-	-	+	-	+	+	÷	-	-	-	+	÷	-	-	÷	÷	÷	÷	+	-	-	+	-	+
CIRCULATORY SYSTEM																				-					+
HEART Hemangiosarcoma	+	+	+	+	* x	+	+	+	+	+	+	+	+	+	+	+	٠	+	+	+	٠	+	+	+	+
DIGESTIVE SYSTEM										-															+
SALIVARY GLAND	+	+	. •	+	+	+	+	+	ŧ	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	-
LIVER HEPATOCELLULAR ADENOMA HEPATOCELLULAR CARCINOMA HEMANGIOSARCOMA	÷	+ x	+ x	+	+	+	+	+	٠	٠	+	+	+	+	+	+ x	+ x	* x	+	+	٠	+	* x	+ x	+
BILE DUCT	+	÷	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	-
GALLBLADDER & COMMON BILE DUCT	+	+	+	+	N	+	+	м	÷		÷	+	+	+	+	+	+	÷	+	÷	÷	+	+	н	Ţ
PANCREAS	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	÷.	÷	÷	+	÷	+1
ESOPHAGUS	+	+	+	+	+	+	+	+	-	+	+	+	+	÷	+	+	+	+	+	÷	-	+	+	+	+
STOMACH	+	+	+	+	÷	+	+	-	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+
SMALL INTESTINE	+	+	+	+	÷	+	+	+		+	+	+	+	+	+	+	+	+	±	+	+	+	+	+	+
LARGE INTESTINE	+	+	+	+	÷	+	+	+	÷	+	+	+	÷	÷	+	÷	+	÷	÷	+	+	÷	+	+	+
URINARY SYSTEM								_																	+
KIDNEY	+	+	+	+	+	+	+	÷	÷	÷	÷	+	+	+	+	+	+	<u>.</u> +	+	+	<u>+</u> _		+	+	•
URINARY BLADDER	+	+	+	+	-	+	+	-	+	+	+	+	+	+	+	٠	+	+	+	+	+	+	+	+	+
ENDOCRINE SYSTEM	<u> </u>								• • •			~													+
PITUITARY	+	-	+	+	+	+	+	+		+	+	+	÷	+	-	<u>+</u>	+	+	+	+		-	+	+	*
ADRENAL Cortical Adenoma Pheochromocytoma	×	+	+	-	+	+	+	+	+	+ x	+	+	+	+	+	+	+	+	•	+	+	-	+	-	+
THYROID Follicular-cell Adenoma	+	+	+	+	+	+	+	+	-	+	+	+	+	•	+	+	+	+	+	+	-	+	+	+	+
PARATHYROID	+	-	+	-	-	ŧ	+	-	-	-	-	-	-	+	-	-	-	-	-	+	-	-	-	-	-
REPRODUCTIVE SYSTEM								-																	
MAMMARY GLAND	N	N	. M	N	H.	N	м	N	N	N	N	N	N	N	N	N	N	N	ŧ	N	N	Ņ	н	N	N
TESTIS	+	+	+	+	+	+	+	+	+	, <del>†</del>	+.	+	+	+	+	+	+	+	+	+	+	+	+	+	-
PROSTATE	+	٠	+	+	÷	+	+	+	٠	٠	+	+	٠	+	+	+	٠	+	+	+	+	+	+	٠	-
SPECIAL SENSE ORGANS																									+
HARDERIAN GLAND ADEHDMA, NOS All Other Systems	н.	N	N	H	N	N	N	N	N	H	N	H	N	N	H	N	н	N	N X	N	N	N	N	N	N
MULTIPLE ORGANS NOS MALIGNANT LYMPHOMA, NOS	н	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	H

ITSSUE EXAMINED MICROSCOPICALLY REQUIRED TISSUE NOT EXAMINED MICROSCOPICALLY TUMOR INCIDENCE NECROPSY, NO AUTOLYSIS, NO MICROSCOPIC EXAMINATION NO TISSUE INFORMATION SUBMITTED AUTOLYSIS NO NECROPSY PERFORMED NO NECROPSY PERFORMED + - X N

ANIMAL NUMBER	2	0 2 7	2	0 2 9	0 3 0	0 3	0320	0	0 3 4	3	03	0 3 7	3	0  3  9	04	4	4	0	4	4	0 4 6	0  4  7	040	4	0 5 0	TOTAL
WEEKS ON Study	0	0	8 0 7	1	1	0	8	0	1	0	1	1	8 8 7	1	8		2	3	1	0	1	1	1	0	1	TISSUE
INTEGUMENTARY SYSTEM				~11		. 71	-21		-71	-21			2.1	-71		<u></u>	-21	<u>.</u> 9 L	-21	21	_21				-4	
SUBCUTANEDUS TISSUE Hemangioma	+	+	+	* X	+	+	+	+	٠	+	+	+	+	٠	+	+	+	+	+	+	+	+	+	٠	+	50× 1
RESPIRATORY SYSTEM																			-							
LUNGS AND BRONCHI Hepatocellular carcinoma, metasta Alveolar/Bronchiolar Adenoma	+	+	+	+	•	+	+	+ X	+	+	+	+	+	+ x_	*	+ ×	+	+	×	+	+ 	+	* ×	+	+ _X	50 3 10
TRACHEA	+	÷	-	+	+	+	+	+	+	+	+	+	+	+	+	٠	+	-	+	+	+	+	+	+	+	45
HEMATOPOIETIC SYSTEM	-																								-1	
BONE MARROW	+	+	+	+	+	+	+	+	+	+	+	-	+	+	+	+	+	+	+	+	+	+	+	+	.+	47
SPLEEN	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+.	+	+	+	+	+	+	50
LYMPH NODES	+	-	-	+	+	-	+	-	+	+	-	+	-	~	+	+	+	~	+.	-		+	+	+	+	33
THYMUS	-	-	-	-	+	-	+	-	+	-	+	-	-	~	-	-	+	-	+	÷	_	+	+	+	-	24
CIRCULATORY SYSTEM	┢																								-+	
HEART H <b>emangio</b> sarcoma	+	+	٠	٠	٠	+	+	+	+	+	÷	+	+	+	+	+	÷	٠	+	+	+	+	+	+	+	50,
DIGESTIVE SYSTEM																-									-	
SALIVARY GLAND	+	+	+	+	+	+	+	+	+	+	+	<u>+</u>	+	+	+	+	+	+	+	+	+	+	+	+	+	- 49
LIVER Hepatocellular Adenoma Hepatocellular Carcinoma Hemangiosarcoma	+	+ ×	+	+ x	+	+ x	+ X	+	+ ×	* ×	+	+ X	+	+	+ x	* x	+	٠	+ x	+	+	+	+	* x	+	50 1 16
BILE DUCT	+	+	+	+	+	+	+	+	 +	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	50
GALLBLADDER & COMMON BILE DUCT	-	+	+	+	+	+	N	+	+	+	+	+	+	+	N	+	+	N	+	+	+	+	+	+	+	50×
PANCREAS		•	+	+		 +	*	+	 +	+	+		+	+	+	+	÷	+	÷	+	+	+	•	+	-1	50
ESDPHAGUS			+	- <u>i</u>			<u>.</u>	+		+	- <u>`</u> -		+	*	+	+						*	<u> </u>			47
	†		<u> </u>			-	- <u>-</u>	-	- <u>-</u>		•	+	+		<u>,</u>	+	<u>+</u>	- <u>+</u>	<u>.</u>		- <u>-</u> -	<u>,</u>	- <u>-</u> -		-	
STOMACH	<u> </u>	- <u>*</u>		. <u>.</u>	<u>T</u>		- <u>-</u>		- <b>T</b>	+	+		<u> </u>	• <u>*</u>	+	· · · ·		. <u>.</u> .		- <u>-</u>	_ <u></u>	- <u>+</u>	<u> </u>			48
SMALL INTESTINE	+	- <u>+</u>	<u> </u>	<u>+</u>	<u> </u>	*	÷	<u>*</u>	_ <del>*</del>			<u>+</u>			-	-		<u>*</u>	<u>.</u>	<u>*</u>	<u>+</u>	<u>*</u>	÷	<u>+</u>		46
LARGE INTESTINE	+	+	-	+	+	+	+	+	+	+	+	_	+	+	+	+	+	+	+	+	+	+	+	+	*	49
URINARY SYSTEM																										
KIDNEY	+	•	+	+		+	÷.	+	+	+ +	+	++	+	+	+	+.	<u>+</u>	+	+	+	÷	+	+		-	
URINARY BLADDER	Ľ	<u> </u>	<u> </u>	<u> </u>	+		÷	<u> </u>	+	<u> </u>	<u> </u>	-	<u> </u>	+	<u> </u>	+	+	<u> </u>		<u> </u>	+	<u> </u>		<u> </u>	+	48
ENDOCRINE SYSTEM																										40
PITUITARY Adrenal Cortical Adenoma	+	+	+	+	+	+	+	+	+	+	-	+	+	+	+	+	-	+	*	+	+	+	+	+	-	42 44 1
PHEOCHROMOCYTOMA Thyroid Follicular-cell Adenoma	ţ	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	-	+	+	•	+	+	+	+	47
PARATHYROID	<u> </u>																+			+			+	+		<u>17</u>
REPRODUCTIVE SYSTEM	<u> </u>	-	-	-	-	+	*	-	-	+	+		+	+	-	-	*	-	+	*		-	*	·	-	17
	Ι.																									
MAMMARY GLAND	<u>H</u>	N	N	<u>N</u>	<u>N</u>	<u>N</u>	<u>N</u>	<u>N</u>	<u>א</u>	N		<u>N</u> .	<u>N</u>			<u>N_</u>	N	N	N	<u>N</u>	<u>. N</u>	<u>N</u>	<u>N</u>	<u>N</u>	N	<u>_50×</u>
TESTIS	+	+	+	+	+	+	+	+	+	+	+	<u>+</u>	+	+	<u>+</u>	+	+	+	<u>+</u>	*	*	+	.+	<u>+</u>	+	49
PROSTATE	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	49
SPECIAL SENSE ORGANS Harderian Gland Adenoma, Nos	H	N	N	N	н	н	N	N	N	N	N	N	N	N	H	м	N	н	N	N	N	N	N	N	N	50×
ADENOMA, NOS ILL OTHER SYSTEMS MULTIPLE ORGANS NOS MALTONANT LYMPHOMA, NOS	N	N	N	N	N	н	м	н	N	N	N	N	н	N	N Y	N	Ň	N	N	N	N	N	N	H	N	50×
MALIGHANI LYNPHOMA. NOS + TISSUE EXAMINED MICROSCOPICALLY - REQUIRED TISSUE NOT EXAMINED MIN X: TUMOR INCIDENCE N HECROPSY. NO AUTOLYSIS, NO MICRI A ANIMALS NECROPSIED					NAT	ICN			C A M B	AU AU	TI CRO TOL IMA NE	₽51 YS1 L M	', N 5 1155	O H Ing	IST	010	GY	DUE	IITI TO	TED D PI	ROTI	DCO	<u></u>			<u> </u>

#### TABLE B3. MALE MICE: TUMOR PATHOLOGY (CONTINUED) CONTROL

\* ANIMALS NECROPSIED

#### TABLE B3.

#### INDIVIDUAL ANIMAL TUMOR PATHOLOGY OF MALE MICE IN THE 2-YEAR **STUDY OF 11-AMINOUNDECANOIC ACID**

#### 0 0 0 0 0 0 0 0 0 0 0 0 0 1 1 1 1 1 1 1 1 1 2 2 2 2 3 41 5 6 7 8 9 0 1 2 ANIMAL NUMBER 0 0 0 0 0 0 0 WEEKS OF ò ġ INTEGUMENTARY SYSTEM . . . . . . . . . \* \* \* \* \* \* \* \* \* SKIN Hemangioma RESPIRATORY SYSTEM LUNGS AND BRONCHI Hepatocellular carcinoma, metast Alveolar/Bronchiolar Adenoma TRACHEA HEMATOPOIETIC SYSTEM BONE MARROW SPLEEN Hemangiosarcoma Malignant Lymphoma, Nos LYMPH NODES Malignant Lymphoma, Nos THYMUS MALIGNANT LYMPHOMA, NOS CIRCULATORY SYSTEM HEART DIGESTIVE SYSTEM SALIVARY GLAND . . . . . . . . . LIVER Hepatocellular Adenoma Hepatocellular Carcinoma Hemangiosarcoma \* \* \* × × \* \* \* \* \* хх x x х BILE DUCT + + + . . . + + + + GALLBLADDER & COMMON BILE DUCT N + + + N + + + N N + + + + + + + + PANCREAS ESOPHAGUS ÷ \* \* \* \* \* \* \* \* \* + + + + + STOMACH \* \* \* \* \* \* \* \* - + + + + + + + SMALL INTESTINE LARGE INTESTINE INTRAPY SYSTEM KIDNEY \* \* \* \* \* \* \* \* \* \* \* \* \* \* \* \* \* \* \* URINARY BLADDER ENDOCRINE SYSTEM PITUITARY . . . . . . . . . . . . . . . . . . . ADRENAL THYROID Follicular-cell Adenoma - - • - - • • • • - - - - • • - • - - - - • -PARATHYROID REPRODUCTIVE SYSTEM MAMMARY GLAND TESTIS INTERSTITIAL-CELL TUMOR PROSTATE SPECIAL SENSE ORGANS HARDERIAN GLAND ADENOMA, NOS ALL OTHER SYSTEMS н й и и и и й и и и и и и и и и и й й и MULTIPLE ORGANS NOS Malignant Lymphoma, Nos

#### LOW DOSE

TISSUE EXAMINED MICROSCOPICALLY Required Tissue not examined microscopically Tumor incidence Necropsy, no autolysis, no microscopic examination

NO TISSUE INFORMATION SUBMITTED Necropsy, no histology due to protocol с

Ř ANIMAL MISSING NO NECROPSY PERFORMED

AN IMAL Number	0 2 6	0 2 7	0 2 8	2 9	030	03	0 3 2	0 3 3	3	0 3 5 1	0 3 6	0 3 7	0 3 8	3	0 4 0	04	0 4 2	0 4 3	044	0 4 5	0 4 6	0 4 7	0 4 8	049	0 5 0	TOTAL
WEEKS ON Study	0 5 7	0 7 2	8 0 9 3	0	1 0 9	109	1 0 9	0 5 0	1 0 7	100	0 5 1	1 0 9	8 5 7	0	0 7 8	1 0 9	2	3 0 8 9	9 9 6	1 0 9	6 1 0 9	7 0 9 1		1 0	1 0 9	TISSUE
INTEGUMENTARY SYSTEM																										
SKIN Hemangioma	+	٠	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	* x	+	+	*	50* 1
RESPIRATORY SYSTEM																										
LUNGS AND BRONCHI Hepatocellular carcinoma, metasta Alveolar/Bronchiolar Adenoma	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+ x	+	*	* x	+	+	•	+	+	+	50 2 3
TRACHEA	-	-	+	٠	+	+	+	٠	+	+	+	+	+	+	٠	-	+	-	+	+	+	+	+	+	٠	43
HEMATOPOIETIC SYSTEM											• • • •												~			
BONE MARROW	+		+	<u>+</u>	+	+	+	+	+	÷	+	+	+		+	.t	-		+	÷	+ _	+		+	_+	43
SPLEEN Hemangiosarcoma Malignant Lymphoma, Nos	-	+	+	+	+	+	+	-	•	+	+	+	+	+	+	+	+	+	+	+	f	+	+	+	+	47
LYMPH NODES Malignant Lymphoma, Nos	-	+	+	+	+	-	+	+	-	+	+	+	+	+	+	-	*	+	+	+	+	+	+	+	+	43
THYMUS Malignant Lymphoma, NGS	-	-	-	-	-	* ×	+	-	+	-	-	-	-	+	-	-	+	+	-	+	+	-	•	-	+	25
CIRCULATORY SYSTEM																							-		Τ	
HEART	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	50
DIGESTIVE SYSTEM																									┓	
SALIVARY GLAND	+-	+	+	+	+	+	+	+	+	+	-	+	+_	+	+	+	+	+	<b>.</b>	+	+	-	+	t_	+	47
LIVER Hepatocellular Adenoma Hepatocellular Carcinoma Hemangidsarcoma	+	+	+	* ×	+	+	+ x	+	+	+	+	* ×	+	+ x	+ x	+	* x	+ x	+ x	•	+ x	+	+	* ×	+	50 10
BILE DUCT	1+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	50
GALLBLADDER & COMMON BILE DUCT	+	+	+	+	+	+	+	н.	+	+	N	+	+	+	+	+	÷	N	+	+	+	÷	+	+	+	50*
PANCREAS	-	+	-	+	+	+	+	+.	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	48
ESOPHAGUS	+	÷	+	+	+	+	+	+ .	+	+	+	÷	-	+	+	~	÷	+ .	+	+	+	+	-	+	+	46
STOMACH	+	ŧ	÷	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	. 48
SMALL INTESTINE	+	÷	+	ŧ	+	+	+	+	+	+	+	+	+	+	+	+	+	+.	+	+	+	÷	+	+	+	50
LARGE INTESTINE	+	÷	+	÷	÷	-	÷	+	÷	-	÷	÷	+	+	÷	+	÷	+	÷	÷	+	÷	÷	÷	+	46
JRINARY SYSTEM	-						-																		- +	·····
KIDNEY	+	+	+	+	+	+	÷	+	+	+	+	+	+	+	+	+	+	+	+	+	+	÷	+	+	+	50
URINARY BLADDER	-	+	٠	+	+	+	÷	+	+	+	-	+	٠	٠	-	٠	+	+	+	٠	+	+	÷	+	÷	44
ENDOCRINE SYSTEM							-																			
PITUITARY	-	-	+	+	+	+	+	+	+	+	+	+	-	+	-	-	+	+	-	+	+	+ .	+	+	+	40
ADRENAL	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	.*	+	+	+	+	+	+	+	48
THYROID Follicular-cell Adenoma	<u> </u>	+		+	+	+	+	+	+	+	-	+	+	_			+	+	+	+	+	+	+	+	+	42
PARATHYROID	-	-	-	-	-	+	+	-	+	-	-	-	+	+	-	-	+	-	*	+	-	-	~	+	-	18
REPRODUCTIVE SYSTEM																									1	
MAMMARY GLAND	- N	<u>N</u> _	N	N	N	+	N		N								N		N	N		N	<u>N</u>	<u>N</u>	-14	50×
TESTIS INTERSTITIAL-CELL TUMOR	+	+	+	+	+	+	+	+	+	+	+	+	+		+		+	+	+	+	+	+	+	•	+	50
PROSTATE	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	50
SPECIAL SENSE ORGANS																										
HARDERIAN GLAND Adenoma, Nos NLL OTHER Systems	н	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	H	N	H	N	H	N	N	N	N	50*
MULTIPLE ORGANS NOS Malignant Lymphoma, Nos	N		X		N	N	N	N	N X		_			H			N					-	N	N	н	50×
<ul> <li>TISSUE EXAMINED MICROSCOPICALLY</li> <li>REQUIRED TISSUE NOT EXAMINED MIC</li> <li>TUMOR INCIDENCE</li> <li>NECROPSY, NO AUTOLYSIS, NO MICRO</li> </ul>	ROSC Scop	0P1 1C	CAL EXA	LY MIN	ATI	DN		Ă		AUI	MAL	(SIS MI	5 I S S I	NFOF D HI Ing Pef				UBM: DUE		ED PR	010	COL				

#### TABLE B3. MALE MICE: TUMOR PATHOLOGY (CONTINUED) LOW DOSE

\* ANIMALS NECROPSIED

#### TABLE B3.

#### INDIVIDUAL ANIMAL TUMOR PATHOLOGY OF MALE MICE IN THE 2-YEAR **STUDY OF 11-AMINOUNDECANOIC ACID**

#### **HIGH DOSE**

ANIMAL	1 01	0	0	0	01	0	0	0	01	0	0	0]	0	0	0	01	0]	0]	0	01	01	01	0	0	8
NUMBER	0	2	0 3	0 4	0 5	6	9	0 8	9	1	;	2	3	4	5	6	2	8	9	2	2	2	3	2	25
WEEKS ON Study	0	0	0	0	0	4	0	0	0	044	0	5	0		0	9	0		1	0	5	020	04	0	852
RESPIRATORY SYSTEM				. 11	. 41		_01	-21	-71	<u>_01</u>		. • •	-21	21	21	41			-24	-21	-61	_21	-11-		-
LUNGS AND BRONCHI Hepatocellular carcinoma, metasta Alveolar/Bronchiolar Adenoma	+	+	+	A	+	+	+	+	+ x	+	+	+	+	+	+	+	-	+	+	+	+	+	+	A	+
TRACHEA	+	÷	+	A	+	÷	-	+	÷	+	+	÷	+	÷	+	÷	÷	+	A	÷	٠	+	+	+	+
HEMATOPOIETIC SYSTEM	┢──																								
BONE MARROW	+	+	+	٨	+	+		+	+	+_	+	+	+	+	+	+	+	+	+	+	+	_	+	A	+
SPLEEN	+	+	+	Α.	+	+	+	+	+		+	+	. +	+	+	+	+	+	+	+	+	+	+	A	÷
LYMPH NODES	+	+	+	A	-	+	+	_	+	+	+	+	+	-	+	-	+	+	A	+	+	+	-	A	ŧ
THYMUS	-	+	+	A	+	-	-	-	÷	-	-	-	+	-	-	+	+	-	A	-	-	-	-	A	-
CIRCULATORY SYSTEM	-																								
HEART	+	+	+	A	+	+	+	+	+	+	÷	÷	+	+	+	+	+	÷	+	+	+	+	+	+	+
DIGESTIVE SYSTEM	<del> </del>																								
SALIVARY GLAND	L+	+	+	٨	+	+	ŧ	+	+	+	÷	+	+	+	+	+	+	+	+	+	+	+	+	A	•
LIVER Hepatocellular adenoma Hepatocellular carcinoma	* ×	+	+	A	+	+	+	+	+ .X	+	+	*	+	+	+	+	+	+	+	+	+	+	+	+	+
BILE DUCT	+	+	+	A	+	+	+	+	ŧ	+	+	+	+	+	+	+	<u>+</u>	+	+	+	+_	. <b>t</b>	+	+	t
GALLBLADDER & COMMON BILE DUCT	+	+	+	М	+	+	ы	+	÷	+	+	+	+	+	+	÷	N	+	N	ŧ	+	+	Ν.	+	+
PANCREAS	+	+	+	٨	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	Α	+
ESOPHAGUS	+	+	+	A	+	+	-	+	+	+	+	+	+	+	+	+	+	+	+	<u>+</u>	+	+	+	+	+
STOMACH	L+_	+	+	A	+	+	+	+	+	+	+	+	+	+	+	+	+	ŧ.	+	+	+	+	+	Α	÷
SMALL INTESTINE	+	+	_+	Α.	+	+	+	+	ŧ	+	t.	+	+	+	+	ŧ.	+	+	+	+	+	+	+	A	ŧ
LARGE INTESTINE	-	+	÷	A	+	+	+	+	+	+	+	+	+	-	+	+	-	+	+	÷	+	+	+	A	-
URINARY SYSTEM	$\vdash$		-					-																	-
KIDNEY	+	+	+	٨	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+
URINARY BLADDER	+	+	+	A	-	+	-	+	+	+	+	-	+	÷	+	÷	-	+	+	-	÷	-	-	A	÷
ENDOCRINE SYSTEM	┣──																								
PITUITARY	+	+	+	A	+	+	+	+	+	+	-	+	+	-	+	+	-	+	+	+	-	-	-		-
ADRENAL	+	+	+	A	+	+	+	+	+	+	+	+	+	+	÷	+	÷	+	A	+	-	+	-		-
THYROID Follicular-cell Adenoma	+	+	+	A	+	-	-	٠	+	+	+	+	+	* x	+	-	+	+	A	+	+	+	+		-
PARATHYROID	- 1	-	-	A	-	-	+	÷	+	-	-	-	+	÷	-	-	+	÷	A	-	-	-	+	A	÷
REPRODUCTIVE SYSTEM																									-
MAMMARY GLAND	N	N	N	N	N	N	N	N	N	М	N	N	N	N	N	N.	N.	N.,	N	N	N.,	N	N	N	N
TESTIS INTERSTITIAL-CELL TUMOR	+	+	+	A	+	+	•	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	A	+
PROSTATE	+	+	+	A	÷	+	+	+	+	+	+	+	+	+	+	+	+	٠	+	÷	+	+	+	+	٠
ALL OTHER SYSTEMS	<u> </u>	·· · · · ·										•		••••	••••			······							-
MULTIPLE ORGANS NOS	N	N	N	н	N	N	N	N	N	N	N	N	м	N	N	N	N	N	N	N	N	N	N	N	N

TISSUE EXAMINED MICROSCOPICALLY REQUIRED TISSUE NOT EXAMINED MICROSCOPICALLY TUMOR INCIGENCE NECROPSY, NO AUTOLYSIS, NO MICROSCOPIC EXAMINATION NO TISSUE INFORMATION SUBMITTED C NECROPSY, NO AUTOLYSIS, NO MICROSCOPIC EXAMINATION NO NECROPSY PERFORMED B NO NECROPSY PERFORMED + - X N

ANIMAL Number	2	2	0 2 8	2	0	03	3	3	03	3	0 3 6	0 3 7	0 3 8	0	04	04	0 4 2	4	04	0 4 5	0 4 6	0 4 7	0 4 8	04	5	TOTAL
WEEKS ON Study		6	1	0	0 7	0	0	7	0	8	1	1	04	0			1	0	1	1	07	1	1	0 5		TISSUE
RESPIRATORY SYSTEM	71	21		4	-31	. 9.1	21	-21	- 11	01	-21-	21,		<u> </u>	. 21	21	21	_ يو.,	21		-01.		-71	. 71	-7	
LUNGS AND BRONCHI Hepatocellular carcinoma, metasta Alveolar/Bronchiolar adendma	+ x	+	+	-	+	+	•	+	+	+	+	+ x_	+	+	+ x	•	+	+	+	+	+	+	+	+	×	46 1 5
TRACHEA	+	+	+	+	+	+	+	÷	+	+	+	-	-	+	+	+	+	+	+	+	+	÷	-	+	+	44
HEMATOPOIETIC SYSTEM	-																								-	
BONE MARROW	<u> </u>	+	÷	+	-	+	+	+	+	+	+	+	+	+	-	+	+	-	<u>+</u>	+	+		÷	+	-	41
SPLEEN	+	.+	+	+	+	+	<u>+</u>	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	47
LYMPH NODES	+	+	+	+	-	+	+	-	+	+	-	-	+	-	+	+	-	-	+	-	+	+	-	+	-	32
THYMUS	+	-	-	-	-	-	-	<b>'</b> -	-	-	+	-	-	+	٠	+	+	-	÷	÷	-	+	÷	-	-	17
CIRCULATORY SYSTEM														~~~											-	
HEART	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	49
DIGESTIVE SYSTEM																									-+	
SALIVARY GLAND	+	+	÷	+	+	+	+	+	+	+	+	÷	+	+	÷	+	÷	+	<u>+</u>	+	+	+	<u>+</u>	+	•	48
LIVER Hepatocellular Adenôma Hepatocellular carcinoma	+	+ X	+	+	+	+	+	+ x	+	+ ×	+	+ ×_	+	+	+	+	+	+	+ X	* x	+ X_	+	+ x	٠	+ X	49 3 _9
BILE DUCT	+	+	+	+	+	+	÷	+	+	+	+	+	+	+	+	+	+	÷	+	+	+	+	+	+	+	49
GALLBLADDER & COMMON BILE DUCT	+	+	+	+	+	+	+	+	N	+	+	+	+	+	+	+	+	+	N	+	+	+	+	Ν.	N	<u>50×</u>
PANCREAS	t.	+	+	+	+	+	+	+	+	-	+	ŧ	+	+	+	+	+	+	+	+	+	+	+	+	+	47
ESOPHAGUS	_	+	+	+	+	+	+	+	+	+	+	+		÷	+	+	+	+	+	+	+	+	+	+	<u>+</u>	46
STOMACH	+	+	+	÷	+	<u>+</u>	+	+	+.	+	+	+	+	÷	+	+	+	-	+	+	+	+	+	+	+	47
SMALL INTESTINE	+	+	+	+	+	+	+	+	+	<u>+</u>	+	+	+	-	+	+	+		+	<u>+</u>	+	+	+	+	-	45
LARGE INTESTINE	-	+	+	+	-	÷	+	+	+	+	+	+	+	-	+	-	÷	-	+	+	+	+	÷	+	-	37
JRINARY SYSTEM																									-+	
KIDNEY	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	.+	42
URINARY BLADDER	÷	+	+	+	+	+	-	+	÷	+	+	+	+	-	+	+	+	+	÷	+	+	÷	÷	+	+	39
ENDOCRINE SYSTEM																									-+	
PITUITARY	+		+	+	-	+	+	+	+	+	+	+	+	+	+	+	÷	+	<u>+</u>	+	+	+	+	+	-	38
ADRENAL	+	+	+	<u>+</u>	+	+	+	+	+	+	+	+	+	+	+	+	+	-	+	+	+	+	+	+	-	42
THYROIÐ Follicular-cell adenoma	-	+	+	•	+	+	+	+	+	-	+	-	-		+	+	+	+	+	+	+	+	-	-	+	36
PARATHYROID	-	-	+	-	-	+	-	+	+	-	-	-	-	-	-	+	-	-	-	-	+	+	-	-	-	16
REPRODUCTIVE SYSTEM																									-+	
MAMMARY GLAND	N	N	N	N	N	N	Ν.,	N	N	N	N	N	Ν.	N	N	<u>N_</u>	N	N	N	N	N	N	N_	N	N	50×
TESTIS INTERSTITIAL-CELL TUMOR	+	+	-	+	+	+	+	+	+	+	+	+	+	+	+	+	+ x	+	+	+	+	+	+	+	+	47
PROSTATE	÷	÷	÷	÷	÷	÷	t	÷	÷	+	÷	+	+	÷	-	+	÷	ŧ	+	÷	+	+	÷	÷	+	48
ALL OTHER SYSTEMS																									-+	
MULTIPLE ORGANS NOS Malignant Lymphoma, Nos	N	H	N	N	н Х	N X	N	N	N	N X	N	н	N	N	N X	N	N	N	N	N	N	N	N	H	N	50× 4
<ul> <li>TISSUE EXAMINED MICROSCOPICALLY</li> <li>REQUIRED TISSUE NOT EXAMINED MIC</li> <li>TUMOR INCIDENCE</li> <li>NECROPSY, NO AUTOLYSIS, NO MICRO</li> </ul>					ATI	ON		1		AUT ANT	CROF	SY SI M	E IN , No S ISS: PSY	0 H: ING	ISTI	0100	SY I	JBMI	11 TO	ED PR	010	COL				

#### TABLE B3. MALE MICE: TUMOR PATHOLOGY (CONTINUED) **HIGH DOSE**

\* ANIMALS NECROPSIED

### TABLE B4.

#### INDIVIDUAL ANIMAL TUMOR PATHOLOGY OF FEMALE MICE IN THE 2-YEAR **STUDY OF 11-AMINOUNDECANOIC ACID**

#### CONTROL

ANIMAL NUMBER	0	200	0	0	0	0	01	0 0 8	0	0	0	0	0	1	1	1	1	1	0	2	2	2	2	2	
WEEKS ON Study	1	1	1	1	9	1	i	0		- 1		1		8	0		1	1	1		1	1	-1	1	-
NTEGUMENTARY SYSTEM	- 91	9	9	9	_1	91	91	- 21	. 91	31	91	91	.91	91	21	91	<u>8</u> 1	9	9	_9]	91	<u>9</u> ]	31	_9]	-
SKIN Papilloma, nos Neurofibrosarcoma	+	+	+	+	٠	+	+	+	٠	+	•	+	٠	+	+	+	٠	٠	٠	٠	+	+	+	+	
RESPIRATORY SYSTEM																									
LUNGS AND BRONCHI Alveolar/Bronchiolar Adenoma	+	+	+	+	•	+	+	+	+	+	+	+	+	+	+	+	+	+	+	* x	+	+	•	+	
TRACHEA	-	+	+	+	+	+	+	-	+	+	-	+	+	+	-	+	-	+	+	+	+	+	+	+	
EMATOPOIETIC SYSTEM																									
BONE MARROW	++-	-	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	<u>+</u>	+_	+	+.	-	+	-
SPLEEN Hemangiosarcoma Malignant Lymphoma, Nos	+	+	+	+	+	+	+	+	* x	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	
LYMPH NODES	L+	-	-	+	+	÷	+	÷	+	_	+	-	+	_	+	+	+	+	+	+	-	+		.+	
THYMUS	-	+	-	+	-	+	+	-	+	+	-	-	+	-	+	+	-	+	-	+	+	+	-	+	
TRCULATORY SYSTEM																									
HEART	+	÷	+	+	+	+	+	+	+	+	+	+	+	+	+	+	÷	+	+	+	+	+	÷	+	
IGESTIVE SYSTEM											• • • •														
SALIVARY GLAND	+	+	+	-	÷	+	+	+	÷	-	+	+	+	+	+	+	+	+	+	+	÷	÷	-	+	
LIVER Hepatocellular adenoma Hepatocellular carcinoma	+	+	+	* ×	+	+ ×	+	+	+	+ x	+ x	+	+	+	+	+	+	+	+	+	+	+	+	+	
BILE DUCT	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	_
GALLBLADDER & COMMON BILE DUCT	+	+	н	+	N	+	+	+	+	+	+	+	+	+	+	+	N	+	+	+	+	+	+	+	
PANCREAS	i +	+	+	+	+	+	÷	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	
ESOPHAGUS	L -	+	+	+	-	+	÷	-	÷	÷	-	÷	+	÷	-	+	-	-	+	+	+	+	-	_	
STOMACH	+	t	+	+	ŧ.	+	t.	+	+	+	+	+	+	+	+	÷	+	+	+	+	+	+	+	+	
SMALL INTESTINE	+	+	+	+	-	+	+	+	+	+	+	÷	+	+	+	+	+	+	+	+	+	+	+	+	
LARGE INTESTINE	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	÷	+	+	+	+	+	+	+	+	
RINARY SYSTEM	+																								-
KIDNEY Malignant Lymphoma, NDS	+	•	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	٠	+	+	+	+	
URINARY BLADDER	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	÷	+	+	+	+	+	+	+	
NDOCRINE SYSTEM	-																								-
PITUITARY Adenoma, Nos	+	+	+	-	+	-	+	-	+	+	+	-	+	+	+	+	-	+	+	+	+	+	-	*	
ADRENAL	++	-	+		+		+	+	+	+	+	+	+	+	+	+	+	+	+	+.	<u>+</u>	+	-	+	-
THYROID Follicular-Cell Adenoma	-	+	+	+	+	-	+	-	+	-	-	+	+	+	+	* x	-	+	+	+	+	+	+	+	
PARATHYROID	-	÷	-	-	+	-	+	-	-	-	-	+	+	-	-	+	-	+	-	+	-	-	-	+	
EPRODUCTIVE SYSTEM	+																								-
MAMMARY GLAND Adenocarcinoma, Nos	+	+	+	+	+	+	+	+	+	N	+	+	*	+	•	+	+	+	+	+	N	+	N	N	
FEMALE EXTERNAL GENITALIA PAPILLOMA, NOS	N	N	N	N	N	N	N	N	N	N	N	м	N	N	N	N	N	H	N	N	N	N	м	N	1
UTERUS Adenocarcinoma, nos	+	+	+	* *	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	
OVARY LL OTHER SYSTEMS		+	_ <u>+</u>	<u>+</u>	+	+	+	+	+	+	<u>+</u>	+	+	+	+	-	+	+	+	+	+	+	+	+	
MULTIPLE ORGANS NOS MALIGNANT LYMPHOMA, NOS	N	N	н	N	N	N	N	N	N	н	N	N	н	N	N	N	N	N	N	N	H	Ņ	Ņ	N	ļ

TISSUE EXAMINED MICROSCOPICALLY
 REQUIRED TISSUE NOT EXAMINED MICROSCOPICALLY
 TUMOR INCIDENCE
 NECROPSY, NO AUTOLYSIS, NO MICROSCOPIC EXAMINATION

NO TISSUE INFORMATION SUBMITTED Necroppy, No Histology due to protocol A Autolysis M Anthal Missing B No Necropsy Performed

ANIMAL	2	8 2 7	2	2	0 3   0	0 3 (	3	0 3 3	0 3 4	0   3   5	0 3 6	0 31 71	0   3	3	0  41 0	4	4	0 4 3	0  4  4	41	0 4 (	47	4	4	5	TOTAL
WEEKS ON Study	1	0	1	1	1		1		1	1	ii oi	1	8	1	1		9	1	1	-5 1 0	6 1 0	1	8  1  0	9	- 0	TOTAL TISSUE TUMOR
INTEGUMENTARY SYSTEM	- 1 91	9	9	.91	91	9	91	91	9]	91	91	91	31	91	91	91	71	91	9	.91	91	91	91	91	-21	
SKIN Papilloma, nos Neurdfibrosarcoma	+	+ x	+	+	+	+	+	٠	+	+	+	+	+	+	+	+	+	+	+	+	* x	٠	+	N	+	50× 1 1
RESPIRATORY SYSTEM	-+																								-	
LUNGS AND BRONCHI Alveolar/Bronchiolar Adenoma	+	+	+	+	+	+	+	+	+	+	+	* ×	+	+	+	+	+	+	+	+	+	+	+	+	+	50 2
TRACHEA	+	+	+	+	-	-	+	-	+	-	+	+	+	+	+	+	+	+	+	+	+	+	+	+	-	39
TEMATOPOIETIC SYSTEM																										
BONE MARROW		ŧ	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	<u>+</u>	+	.*	+	
SPLEEN Hemangiosarcoma Malignant Lymphoma, NDS	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	* ×	+	+	+	+	+	+	+	+	50 2 1
LYMPH NODES	+	_	-	-	_	+	+	+	+	+	_	+	+	+	+	+	+	+	_	-	+	-	+	+	+	35
THYMUS	+	+	+	+	+	+	-	-	-	-	+	÷	-	-	+	+	~	+	+	+	+	-	+	-	-	30
IRCULATORY SYSTEM		-											_			_									{	
HEART	+	+	+	+	÷	+	+	+	÷	÷	+	+	+	+	+	+	+	+	÷	+	+	+	+	+	+	50
DIGESTIVE SYSTEM		_																							-	
SALIVARY GLAND	+	+	+	+	+	+	+	÷	+	+	+	+	+	+	+	+	+	+	+	+	÷	+	+	+	+	47
LIVER Hepatocellular adenoma Hepatocellular carcinoma	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	* x	ţ	50 2
BILE DUCT	1.	+	+			+	•	+				+	+	+	+	+	+		+	-	<u>`</u>	+	+	+	+	50
GALLBLADDER & COMMON BILE DUCT		+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+		+	+	+	+	*	÷1	50×
PANCREAS	1+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	 +	+	+	+	+	+1	5.0
ESOPHAGUS	+	+	+	+	_	÷	+	_	+		+	+	+	+	-	+	+	+	+	+	+	+	_	+	-	35
STOMACH	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	50
SMALL INTESTINE	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	49
LARGE INTESTINE	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	50
RINARY SYSTEM	+																								-+	
KIDNEY Malignant Lymphoma, Nos	+	+	+	+	+	*	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	1
URINARY BLADDER	-	+	+	+	+	+	+	+	+	+	+	÷	+	+	+	+	+	+	+	+	+	+	+	+	+	49
NDOCRINE SYSTEM																									╉	
PITUITARY Adenoma, Nos	+	-	+	+	+	+	+	+	*	+	+	+	+	-	+	+	+	+	+	* x	+	+	+	+	+	423
ADRENAL	+	+	+	+	+	+	÷	+	+	+	+	+	+	+	+	+	+	+	+	<u>+</u>	+	+	+	+	+	47
THYROID Follicular-cell Adenoma	+	-	+	+	-	•	+	-	+	-	+	+	+	+	-	+	+	+	+	+	+	+	*	+	-	37
PARATHYROID	-	-	+	-	-	+	~	-	-	-	-	+	-	+	-	+	-	-	+	-	-	+	-	-	-	16
EPRODUCTIVE SYSTEM			-				-							a											1	
MAMMARY GLAND Adenocarcinoma, nos	+	+	+	* X	+	+	+	+	+	+	X	+	+	+		+	x	+	+	N	+	+	* X	+	+	50× 6
FEMALE EXTERNAL GENITALIA PAPILLOMA, NOS	+	N	N 	N				N	N					N X				N 	N 	N	N	N .	N .	N	N1	50×
UTERUS Adenocarcinoma, Nos	+	+	+	+	+	+	+	+	+	+			+					+	+	+	+ 	+	+	+	-	48
OVARY LL OTHER SYSTEMS	++-	+-	+	+	<u>+</u>	+	+	+	-	*		+	+	+	.+	+	+	+	<u>+</u>	+	+		<u>+</u>	+	+	46
MULTIPLE ORGANS NOS Malignant Lymphoma, NOS	N	N	N	N	N	N	NX	N	N	N	N	N	N	N	N	N	н	N	N	N	N	N	н	N	н	50×

#### TABLE B4. FEMALE MICE: TUMOR PATHOLOGY (CONTINUED) CONTROL

+ - × ≈

 TISSUE EXAMINED MICROSCOPICALLY
 · NO TISSUE INFORMATION SUBMITTED

 REQUIRED TISSUE NOT EXAMINED MICROSCOPICALLY
 C
 NECROPSY, NO HISTOLOGY DUE TO PROTOCOL

 TUMOR INCIDENCE
 AUTOLYSIS
 NO MICROSCOPIC EXAMINATION

 NECROPSY, NO AUTOLYSIS, NO MICROSCOPIC EXAMINATION
 M ANIMAL MISSING

 NO NECROPSY PERFORMED
 B

\* ANIMALS NECROPSIED

#### TABLE B4.

#### INDIVIDUAL ANIMAL TUMOR PATHOLOGY OF FEMALE MICE IN THE 2-YEAR **STUDY OF 11-AMINOUNDECANOIC ACID**

#### LOW DOSE

ANIMAL NUMBER	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	0	0	2	2	2	2	2	2
WEEKS ON Study	1	1	1	4	9	6 1 0	1	8 1 0	9	0 1 0	1	1	1	1	1			1	9 1 0	0 1 0	1	1		9	2 1 0
INTEGUMENTARY SYSTEM		9	9	. 9.1	0	. 91	8	. 91.	.91	_9	-21		91	91	91	91	91	.91		. 91	91	9	91	1	-9
SUBCUTANEDUS TISSUE Ostedsarcoma Neurofibrosarcoma	+	+	+	٠	٠	+	+	+	٠	٠	+	٠	+	+	+	+	+	N	÷	٠	+	+	+	+	+
RESPIRATORY SYSTEM																									
LUNGS AND BRONCHI Alveolar/bronchiolar Adenoma Osteosarcoma, metastatic	+	+	+	+	+	*	÷	+	+	+	+	+	+	+	+	+	+	+	* ×	+	+	+	+	+	+
TRACHEA	+	+	÷	÷	-	+	-	+	-	+	-	+	+	+	+	+	+	-	+	+	+	+	+	+	+
HEMATOPOIETIC SYSTEM																									
BONE MARROW	+	+	÷	-	+	÷	+	+	+	+	+	+	+	+	+	+	+	+	+	t.	+	+	-	-	+
SPLEEN	+	+	÷	+	+	÷	+	÷	+	+	ŧ.	+	+	+	+	+	+	+	+	+	+	+	+	+	+
LYMPH NODES	+	+	+	+	+	+	-	+	-	+	-	+	+	+	+	+	+	+	+	÷	÷	-	+	+	+
THYMUS	+	+	÷	+	-	+	+	-	+	+	+	+	+	-	+	+	-	+	-	-	+	+	+	-	+
CIRCULATORY SYSTEM																									-
HEART	+	+	+	+	+	+	+	+	+	+	+	+	+	÷	+	+	+	+	+	+	+	+	+	+	+
DIGESTIVE SYSTEM	-								• •																-
SALIVARY GLAND	+	+	+	+	+	+	+	+	+	+	÷	+	+	+	+	+	+	+	+	+	+	+.	+	+	+
LIVER Hepatocellular Adenoma Hepatocellular Carcinoma Osteosarcoma, metastatic	+ ×	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+ x	+ X	+ x	* X	+	+	÷	+	+
BILE DUCT	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+
GALLBLADDER & COMMON BILE DUCT	+	+	+	+	+	+	N	N	+	+	+	N	+	+	+	+	+	+	+	+	+	+	+	+	+
PANCREAS	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	÷	+	+	+	+
ESOPHAGUS	+	+	+	+	+	+	+	+	+	+	-	+	-	+	+	+	+	+	+	+	+	+	-	+	-
STOMACH	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+
SMALL INTESTINE	+	+	+	+	+	÷	+	+	+	+	÷	+	+	+	+	÷	+	÷	+	+	+	+	+	+	+
LARGE INTESTINE	1	+	+	+	+	+	+	+	+	+	-	+	+	+	+	+	+	+	+	+	+	+	+	+	+
URINARY SYSTEM																			• •		•			. <u> </u>	
KIDNEY	+	÷	÷	+	+	÷	÷	+	÷	+	+	+	+	+	+	+	+	÷	+	÷	+	÷	+	+	+
URINARY BLADDER	+	+	+	+	+	+	-	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+
ENDOCRINE SYSTEM	+								-																
PITUITARY Adenoma, Nos	1 ×	+	+	+	+	+	•	*	+	+	-	* ×	-	*	-	+	+	+	+	+	-	-	+	+	+
ADRENAL Cortical Adenoma Pheochromocytoma	+	+	+	+	+	+	+	+	+	+	+	+	-	+	+	+	+	+	+	+	-	+	+	-	+
THYROID	+	+	+	+	-	+	-	+	+	+	-	+	+	_	+	+	+	-	+	+	+	+.		+	+
PARATHYROID	-	-	+	+	-	+	-	-	-	-	-	-	+	-	-	-	-	-	-	-	+	+	-	-	+
REPRODUCTIVE SYSTEM														_											-
MAMMARY GLAND Adenocarcinoma, Nos	+	+	+	+	+	+	N	+	+	+	+	+	+	+	+	+	+	н	N	+	ż.	+	N	+	٠
UTERUS	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	÷	+	+	+	+	+	+	+	+	÷
OVARY Hemangioma	+	٠	+	÷ ×	+	+	+	+	٠	÷	+	-	+	+	+	÷	+	+	+	٠	+	٠	÷	٠	+
SPECIAL SENSE ORGANS	+																								-
HARDERIAN GLAND ADENOMA, NOS ALL OTHER SYSTEMS	N	N	N	N	N	N	N	N X	N	н	N	N	N	N	N	N X	N	N	N	N	N	N	N	N	N
MULTIPLE DRGANS NOS	N	н	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	н	N	N	N
MALIGNANT LYMPHOMA, NOS				<u>×</u>			<u></u>				x.			x						x				X	

TISSUE EXAMINED MICROSCOPICALLY Required Tissue not Examined Microscopically Tumor Inclence Necropsy, no Autolysis, no Microscopic Examination ×

ND TISSUE INFORMATION SUBMITTED C NECROPSY, NO HISTOLOGY DUE TO PROTOCOL A UIDIYIS M Animal Missing B NO NECROPSY PERFORMED

ANIMAL NUMBER	0	2	0	0 2 9	0 3 0	0	0 3 2	0	0	0 3 5	0	0 3 7	3	0	0	0 4 1	0	0 4 3	0 4 4	0 4 5	0 4	0	0	0	0	
WEEKS ON Study		7	8 0 5	1	1	1	1	-3 1 0	4	0	6	6	1	1	0	0	0	1	0	8	-6 1 0	7	8	9	0 1 0	TOTAL TISSUE TUMOR
INTEGUMENTARY SYSTEM	-1-81	_9]	01	_9[	01	9	9	91	.91	41	.91	8	9	.91	51	7	11	-21	4	4	.91	91	91	اف_	- 9	
SUBCUTANEDUS TISSUE Osteosarcoma Neurdfibrosarcoma	+	٠	٠	+	+	+	+	+	+	* ×	+	٠	+	+	+	+	+ x	+	÷	M	٠	٠	+	+	+	49× 1 1
RESPIRATORY SYSTEM																										
LUNGS AND BRONCHI Alveolar/bronchiolar Adenoma Osteosarcoma, metastatic	+	+	+	+	+	+	* ×	+	+	+ X	+	+	+	+	+	+	•	+	+	M	+	+	+	+	+	49 1
TRACHEA	+	+	+	+	+	+	+	+	+	-	+	-	+	+	+	÷	+	+	+	м	+	+	+	+	+	42
HEMATOPOIETIC SYSTEM																									+	
BONE MARROW	+	+	+	+	-	-	+	+	+	+	+	<u>+</u> _	+	+	+	+	+	<u>+</u> _	+	M	+	+	+	+	+	44
SPLEEN	1+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	M	+	+	+	+	+	
LYMPH NODES	-	+	+	+	-	-	+	+	+	+	+		-	+	+	+	+	+	-	M	+	-	+	+	+	38
THYMUS	+	-	-	-	-	+	-	÷	+	+	4	-	+	+	+	-	_	+	-	м	+	+	+	+	-1	32
CIRCULATORY SYSTEM	+																_								-+	
HEART	1+	÷	+	÷	+	+	÷	+	+	+	+	+	÷	+	÷	+	÷	÷	+	м	÷	÷	÷	+	÷	49
DIGESTIVE SYSTEM											-				_										-	
SALIVARY GLAND	1+	+	+	+	+	+	+	+	+	+	-	+	+	+	+	+	+	+	+	м	+	÷	+	+	+	48
TVFR	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+		+	M	+	+	+	+	+	49
HEPATDCELLULAR ADENOMA HEPATDCELLULAR CARCINOMA OSTEOSARCOMA, METASTATIC			_		x			x		<u>x</u>					×											1 7 1
BILE DUCT	+	+	+	+	+	+	<u>+</u>	+	+	+	+	<u>+</u>	+	+	+	+	+	+	+	Μ	+	+	+	<u>+</u>	+	49
GALLBLADDER & COMMON BILE DUCT	+	+	N	+	+	÷	+	<u>+</u>	+	+	+	+	+	+	+	•	+	+	+	M	<u>+</u>	+	+	+_	+	<u> 49×</u>
PANCREAS	+	+	+	+	+	+	+	÷	+	+	+	+	+	+	+	+	+	+	+	M	+	+	+	+	+	_ 49
ESOPHAGUS	+	+	+	+	+	+	+	+		+	+	+	+	+	+	+	+	+	+	м	+	+	+.	+	t	44
STOMACH	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	-	м	+	+	+	+	+	48
SMALL INTESTINE	+	+	+	+	+	+	+	+	+	+	+	+	_+	+	+	+	+	+	+	M	+	+.	+	+	+	49
LARGE INTESTINE	+	+	+	+	+	+	÷	+	+	+	-	÷	+	÷	+	+	+	+	-	м	÷	+	+	-	+	45
URINARY SYSTEM																					~~~~				$\rightarrow$	
KIDNEY	+	+	÷	+	+	+	÷	÷	+	+	+	+	+	+	+	+	+	+	÷	м	+	+	+	+	+	49
URINARY BLADDER	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	M	+	+	+	+	+	48
ENDOCRINE SYSTEM																									+	
PITUITARY ADENOMA, NOS	+	+	+	-	-	+	+	+	+	+	-	+	*	+	+	+	+	+	-	м	+	+	+	-	+	39
ADRENAL Cortical Adenoma Pheochromocytoma	×	+	+	+	+ x	+	+	+	+	+	+	+	+	+	+	+	+	+	•	м	+	•	+	+	+	46 1 1
THYRDID	+		+	+	+	+	+	+	+	+	+	-	+	+	+	÷	+	+	+	M	÷	+	+	+	+	41
PARATHYROID	-	-	-	-	+	-	- 7	-	-	-	•	-	+	÷	-	+	+	-	+	M	-	-	+		+	15
REPRODUCTIVE SYSTEM	+																								+	
MAMMARY GLAND Adendcarcinoma, Nos	N	+	+	+	+	+	N	+	+	N	+	+	+	+	N	N	N	+	N	м	+	N	+	+	+	49×
UTERUS	+	+	+	÷	+	+.	+	+	+	+	+	+	+	+	+	+	<u>+</u>	+	+	м	+	+	+	+	4	
OVARY Hemangioma	+	٠	+	+	+	+	+	+	+	+	+	+	+	+	+	-	-	+	+	м	+	+	+	+	+	46 1
PECIAL SENSE ORGANS	1						_																		1	
HARDERIAN GLAND ADENOMA, NDS ALL OTHER SYSTEMS	N	N	N	H	N	к	N	N	N	N	N	N	N	N	N	N	N	N	N	M	N	N	N	N	N	49× 2
MULTIPLE ORGANS NOS MALIGNANT LYMPHOMA, NOS	1	N		X	N	H	н	ń	н	н	N X	N	H	н	N	N	N	N X	N	м	N X	N	N	н	н	5 9× 10
<ul> <li>TISSUE EXAMINED MICROSCOPICALL</li> <li>REQUIRED TISSUE NOT EXAMINED MX TUMOR INCIDENCE</li> <li>NECROPSY, NO AUTOLYSIS, NO MIC</li> <li>ANIMALS NECROPSIED</li> </ul>					HAT	ION			C • M M B	AU	TOL Ima	YSI L M	E I S ISS PSY	ING				DUE	II T	TED ) PJ	207	000	L			

#### LOW DOSE TABLE B4. FEMALE MICE: TUMOR PATHOLOGY (CONTINUED)

\* ANIMALS NECROPSIED

#### TABLE B4.

#### INDIVIDUAL ANIMAL TUMOR PATHOLOGY OF FEMALE MICE IN THE 2-YEAR **STUDY OF 11-AMINOUNDECANOIC ACID**

AN IMAL NUMBER	0	0	0	0	0	0	0	0	0	0	0	0	0	0	01	0	1	0 1 8	0	2	2	2	2	24	
WEEKS DN STUDY		0	2	0	8	6 0 9	6	8	1	1		6	1	1	1	0	0 5	1	1	11	9	0	9	1	
INTEGUMENTARY SYSTEM	- 91	0 1	4	3	9	8	8	81	91	9	9[	81	91	9	91	9	91		6	9	21	91	51	91	-
SUBCUTANEDUS TISSUE HEMANGIDMA	+	+	м	+	+	+	+	+	+	+	+	+	+	+	4	+	+	+	+	٠	٠	+	+	+	
RESPIRATORY SYSTEM							-	-																	-
LUNGS AND BRONCHI Alveolar/Bronchiolar Adenoma	+	+	M	+	+	+	+	+	+	+	+	+	* X	+	+	+	+	+	+	+	+	+	+	+	
TRACHEA	+	+	м	+	+	-	+	+	-	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	
TEMATOPOIETÍC SYSTEM	-																		_						-
BONE MARROW	+	+	м	+	+	+	+	+	. <u>+</u>	+	+	+	+	+	+	+	+	+	+		-	+	+	+	_
SPLEEN	+	+	M	+	+	+	-	+	<u>+</u>	+	+	+	+	+	+	+	+	+	+	+	٠	+	+	+	
LYMPH NODES	+	+	м	+	-	+	-	+	+	+	-	+	+	+	+	+		-	-	+		-	+	+	_
THYMUS	-	-	М	-	-	-	-	+	-	+	-	-	+	+	+	-	-	+	+	+	+	-	+	-	
IRCULATORY SYSTEM																									-
HEART	+	+	м	+	+	+	+	+	÷	+	+	÷	+	+	+	+	+	+	+	+	+	+	+	+	
DIGESTIVE SYSTEM																									-
SALIVARY GLAND	+	+	м	+	+	-	+	+	+	+	+	+	+	+	+	-	-	+		+	+	-	-	+	_
LIVER Hepatocellular Adenoma Hepatocellular Carcinoma	+	+	M	+	+	+	+	+	+	* x	+	+	+	+	+	+	+	+	+ X	+ x	+	+	+	+	
BILE DUCT	+	+	м	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	
GALLBLADDER & COMMON BILE DUCT	+	+	M	+	N	+	N	•	+	+	+	+	+	+	+	+	+	+	N	+	+	N	N	+	
PANCREAS	1.	+	 M	+	+	+				+	+	+		+	+	+	-	*	 	÷.	+	+	+	+	-
ESOPHAGUS	1.		M	+	 +	+	+	+	+	+		+	+	+	+	+	•		•	÷		 +	+	*	-
STOMACH	1	÷	M	+	 +	+	+	•	+	+	-	+		+	+	 3				<u>.</u>	•	+	+	+	
SMALL INTESTINE MALIGNANT LYMPHOMA, NOS	+	+	м	+	+	+	+	+	+	+		+			÷	+	+	+	-	+	+	~	+	+	-
LARGE INTESTINE	+	+	м	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	-	+	+	+	+	+	
RINARY SYSTEM	+																								-
KIDNEY	+	+	м	+	+	+	+	+	+	+	+	÷	+	÷	+	+	+	+	+	+	+	+	+	+	
URINARY BLADDER	+	+	м	+	+	+	+	+	+	+	+	+	+	+	+	+	-	+	+	+	+	+	+	+	
NDOCRINE SYSTEM																									-
PITUITARY Adenoma, Nos	+	+	м	+	+	-	+	+	+	٠	+	+	+	+	-	+ X	+	٠	-	+	+	-	+	+	
ADRENAL Pheochromocytoma	+	+	M	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	*	+	+	+	+	+	
THYROID	+	+	M	. <del>)</del>	+	-	+	-	÷	÷	+	+	+	<u>+</u>	+	+	+	+	+	+	+		+	+	
PARATHYROID	+	+	м	-	+	-	-	-	+	+	+		-	-	-	-	-	+	+	-	+	-	-	+	
EPRODUCTIVE SYSTEM	-							_											-						-
MAMMARY GLAND Adenocarcinoma, NDS	+	+	м	+	N	N	N	+	+	+	+	N	+	+	*	+	N	+	*	N	+	+	+	+	
UTERUS PAPILLARY ADENOMA	+	+	M	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	* ×	+	+	
OVARY Teratoma, benign	+	+	м	+	+	+	+	+	~	+	+	+	+	+	+	+	-	+	*	+	+	•	+	+	
LL OTHER SYSTEMS			_																						
MULTIPLE ORGANS NOS Malignant Lymphoma, Nos	N X	N	M	N X	N	N	N	N X	N						X	x			<u>x</u>		N	N	N	N	
<ul> <li>TISSUE EXAMINED MICROSCOPICALLY</li> <li>REQUIRED TISSUE NOT EXAMINED MI</li> <li>TUMOR INCIDENCE</li> <li>NECROPSY, NO AUTOLYSIS, NO MICR</li> </ul>	CROSC				ATI	DN		C A M B	1	NECF	IISS ROPS DLYS MAL HECR	Y, IS MIS	NO SIN	HIS G	TOL	OGY	DU	UE T	TEL To F	RO	тоса	) L			

#### **HIGH DOSE**

ANIMAL NUMBER WEEKS ON	0 2 6 0	0 2 7 0	0 2 8	0 2 9	0 3 0	0 3 1	0 3 2 1	0 3 3	0 3 4	0 3 5	0 3 6 0	0 3 7	0 3 8	0 3 9	0 4 0	0 4 1	8 4 2 0 4	0 4 3	044	0 4 5	0 4 6	0 4 7	0 4 8	0 4 9	0500	TOTAL
INTEGUMENTARY SYSTEM	0	51	7	0	9	9	9	9	0 9 4	0 9	1  9	9	9	4	9	9	4	9	9	0	6 0 7 5	9	9	0 9	0	TUMOPS
SUBCUTANEOUS TISSUE HEMANGIOMA	+	+	٠	+	+	+	* X	+	+	٠	÷	+	÷	+	+	٠	+	+	+	٠	٠	٠	+	٠	+	49× 1
RESPIRATORY SYSTEM									•••••																	
LUNGS AND BRONCHI Alveolar/bronchiolar Adenoma	+	÷	٠	+	+	* X	+	+	+	+	+	+	+	+	*	+	+	+	+	+	+	+	+	+	+	49
TRACHEA	-	+	+	+	+	+	+	+	+	+	+	÷	+	-	+	+	+	+	÷	+	-	+	÷	+	+	43
HEMATOPOIETIC SYSTEM																			-							
BONE MARROW	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	÷	+	+	+		+	+	47
SPLEEN	-	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	÷	+	+	47
LYMPH NODES	-	+	+	+	÷	+	+	+	-	+	+	+	+	+	+	÷	+	-	+	+	_+	+	+	+	+	38
THYMUS	Τ-	-	+	-	_	-	-	-	+	+	+	-	+	-	+	-	+	+	-	+	-	+	+	-	-	22
CIRCULATORY SYSTEM	+-						_					-													-	
HEART	+	+	+	+	+	+	÷	+	+	÷	+	+	+	+	+	÷	+	÷	÷	+	+	+	+	+	+	49
DIGESTIVE SYSTEM	+-																									
SALIVARY GLAND	1 -	+	+	+	-	+	+	+	÷	+	-	+	+	-	+	+	+	+	+	+	+	+	+	+	+	39
LIVER Hepatocellular Adenoma Hepatocellular carcinoma	+	+	+ Y	+	+	+ Y	+	+	+	+	+	+	+	+	+	+	+	+	+	+	÷	+	+	+	+	49 1 4
BILE DUCT	<u> </u>	+	+		+	<u>^</u>			+	+	+	+	+	+	+	+									_	49
GALLBLADDER & COMMON BILE DUCT	+	- <u>*</u>				•						- <u>T</u>		+	+				•	+				<u> </u>		49×
	<u>+</u> N		<u> </u>			•						-	<u> </u>	÷	-	+		<u> </u>	+	+	N			Ē		
PANCREAS	<u>ــــــــــــــــــــــــــــــــــــ</u>	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	- <u>+</u>	+	+	+	+	
ESOPHAGUS	+	+	+	+	+	+	+	+	+	+		+	+		-+	<u>+</u>	*	. <u>+</u>	+	+	+	+	+	+	+	46
STOMACH	++	+	+	+	+	+	+	+	+	+.	+	+	<u>+</u>	+	+	+	+	+		+	+	+	+	+	+	49
SMALL INTESTINE Malignant Lymphoma, Nos	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	47
LARGE INTESTINE	+	+	+	-	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	47
UKINARY SYSTEM																										
KIDNEY	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	49
URINARY BLADDER	+	-	+	+	+	+	+	+	+	+	+	+	+	+	+	+	-	+	+	+	+	+	+	+	+	46
ENDOCRINE SYSTEM														-												
PITUITARY Adenoma nos	-	-	+	+	-	+	+	+	+	+	+	+	+	+	+	+	+	*	+	+	+	-	+	+	+	41 2
ADRENAL Pheochromocytoma	+	+	+	+	+	+	+	-	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	48
THYROID	+	+	+	+	+	+	-	+	+	-	+	+	+	-	+	+	+	+	+	+	-	+	+	-	+	40
PARATHYROID	-	+	+	+	+	+	+	-	+	-	-	-	-	-	-	-	-	-	+	+	+	-	+	-	-	21
REPRODUCTIVE SYSTEM	+																									
MAMMARY GLAND Adenocarcihoma, nos	N	N	+	+	+	+	+	•	N	+	N	+	+	N	+	+	N	*	+	N	N	+	+	+	N	49× 2
UTERUS Papillary adenoma	+	+	+	+	+	+	•	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	49 1
OVARY TERATOMA, BENIGN	+	+	+	+	+	+	+	-	+	+	+	+	+	+	+	+	+	+	+	•	-	+	+	+	+	45
ALL OTHER SYSTEMS																				-						
MULTIPLE ORGANS NDS Malignant Limphoma, Nos	<u> </u>			N	N X	N	N	N	N.	N	N	N			N	N X	N		N	N X	N	N	N	м	N	49× 5
<ul> <li>TISSUE EXAMINED MICROSCOPICALL'</li> <li>REQUIRED TISSUE NOT EXAMINED MX TUMOR INCIDENCE</li> <li>NECROPSY, NO AUTOLYSIS, NO MICI</li> <li>ANIMALS NECROPSIED</li> </ul>					1AT I	1 O N			C A M B	AU	CRO TOU Imai	PSY YSI L M	, N S ISS	O H ING	RMA IST RFO	OLD	GY	UBM DUE	TC	TED PR	2010	col				

#### TABLE B4. FEMALE MICE: TUMOR PATHOLOGY (CONTINUED) **HIGH DOSE**

\* ANIMALS NECROPSIED

# **APPENDIX C**

# SUMMARY OF THE INCIDENCE OF NONNEOPLASTIC LESIONS IN RATS FED DIETS CONTAINING 11-AMINOUNDECANOIC ACID

#### TABLE C1.

#### SUMMARY OF THE INCIDENCE OF NONNEOPLASTIC LESIONS IN MALE RATS FED DIETS CONTAINING 11-AMINOUNDECANOIC ACID

		LOW DOSE	
ANIMALS INITIALLY IN STUDY ANIMALS NECROPSIED ANIMALS EXAMINED HISTOPATHOLOGICALLY	50 50	50 50 50	50 50 50
INTEGUMENTARY SYSTEM			
*SKIN EPIDERMAL INCLUSION CYST ABSCESS, NOS INFLAMMATION, CHRONIC CUTANEOUS HORN	(50) 1 (2%) 1 (2%)	(50) 1 (2%)	(50) 2 (4%) 1 (2%) 1 (2%)
*SUBCUT TISSUE DEFORMITY, NOS EDEMA, NOS	(50) 1 (2%)	(50)	(50) 1 (2%)
RESPIRATORY SYSTEM			
*NASAL CAVITY Inflammation, suppurative	(50)	(50) 1 (2%)	(50)
#LUNG INFLAMMATION, NOS PNEUMONIA, ASPIRATION ALVEOLAR MACROPHAGES HYPERPLASIA, ALVEOLAR EPITHELIUM	(50)	(50) 1 (2%) 2 (4%) 1 (2%)	(50)
HEMATOPOIETIC SYSTEM			
#MANDIBULAR L. NODE Hyperplasia, reticulum cell	(50)	(48) 1 (2%)	(49)
#COLON Hyperplasia, lymphoid	(50) 1 (2%)	(50) 2 (4%)	(50)
#THYMUS HYPERPLASIA, RETICULUM CELL	(42)	(38)	(33) 1 (3%)

# NUMBER OF ANIMALS WITH TISSUE EXAMINED MICROSCOPICALLY \* NUMBER OF ANIMALS NECROPSIED

	UNTREATED Control	LOW DOSE	HIGH DOSE
CIRCULATORY SYSTEM			
#LUNG PERIARTERITIS	(50) 1 (2%)	(50)	(50)
#HEART/ATRIUM THROMBOSIS, NOS	(50) 2 (4%)	(50) 3 (6%)	(50)
#AURICULAR APPENDAGE THROMBOSIS, NOS	(50) 1 (2%)	(50)	(50)
#MYOCARDIUM INFLAMMATION, NOS	(50)	(50)	(50) 1 (2%)
INFLAMMATION, CHRONIC FIBROSIS	2 (4%)	1 (2%)	
*AORTA Medial calcification	(50)	(50)	(50) 1 (2%)
*PULMONARY ARTERY Medial calcification	(50) 14 (28%)	(50) 11 (22%)	(50) 13 (26%)
*MESENTERY PERIARTERITIS	(50)	(50) 2 (4%)	(50)
DIGESTIVE SYSTEM			
#LIVER HERNIA, NOS GRANULOMA, NOS NECROSIS, FOCAL METAMORPHOSIS FATTY CYTOPLASMIC VACUOLIZATION BASOPHILIC CYTO CHANGE FOCAL CELLULAR CHANGE EOSINOPHILIC CYTO CHANGE CLEAR-CELL CHANGE	(50) 9 (18%) 1 (2%) 2 (4%) 1 (2%) 1 (2%) (50)	(50)  1 (2%)  15 (30%)  1 (2%)  1 (2%)  14 (28%)  2 (4%)  2 (4%)  4 (8%)  4 (8%)  (50)	(50) 4 (8%) 1 (2%) 2 (4%) 5 (10%) 4 (8%) 3 (6%) 5 (10%) (50)
<pre>#LIVER/CENTRILOBULAR NECROSIS, NOS</pre>	(50)	(50) 1 (2%)	(50)
#LIVER/HEPATOCYTES Necrosis, Nos	(50)	(50)	(50) 1 (2%)

	UNTREATED Control	LOW DOSE	HIGH DOSE
#BILE DUCT INFLAMMATION, FOCAL HYPERPLASIA, NOS HYPERPLASIA, FOCAL	(50) 1 (2%) 4 (8%) 1 (2%)	(50)	(50) 1 (2%)
#PANCREAS INFLAMMATION, NOS Atrophy, Nos Atrophy, Focal	(50) 2 (4%) 1 (2%)	(46) 1 (2%) 2 (4%)	(50) 3 (6%)
#STOMACH INFLAMMATION, ACUTE Hyperplasia, epithelial Hyperkeratosis	(50) 1 (2%)	(50)	(50) 3 (6%) 1 (2%)
#DUODENUM POLYP	(49)	(50) 1 (2%)	(50)
#COLON NEMATODIASIS	(50)		(50) 2 (4%)
URINARY SYSTEM			
#KIDNEY HYDRONEPHROSIS NEPHROPATHY, TOXIC GLOMERULOSCLEROSIS, NOS CALCIFICATION, FOCAL	(50) 1 (2%) 32 (64%)	(50) 1 (2%) 35 (70%) 1 (2%)	(50) 27 (54%) 2 (4%)
#KIDNEY/PELVIS Hyperplasia, epithelial	(50)	(50) 4 (8%)	(50) 15 (30%)
#URINARY BLADDER CALCULUS, NOS HYPERPLASIA, EPITHELIAL	(48) 1 (2%)	(48) 1 (2%) 2 (4%)	(49) 5 (10%) 20 (41%)
*URETHRA HYPERPLASIA, EPITHELIAL		(50)	1 (2%)
ENDOCRINE SYSTEM			
#PITUITARY CYST, NOS	(48)	(47)	(47) 1 (2%)

	UNTREATED Control	LOW DOSE	HIGH DOSE
GRANULOMA, FOREIGN BODY Hyperplasia, Chromophobe-Cell	1 (2%) 1 (2%)	1 (2%)	3 (6%)
#ADRENAL EDEMA, NOS Metamorphosis Fatty	(50) 1 (2%)	(50) 1 (2%) 1 (2%)	(49) 1 (2%)
#ADRENAL MEDULLA Hyperplasia, nos	(50)	(50) 3 (6%)	(49) 3 (6%)
#THYROID CYST, NOS Hyperplasia, C-Cell	(42) 4 (10%)	(43) 2 (5%)	(42) 1 (2%) 3 (7%)
#PARATHYROID Hyperplasia, NOS	(36) 1 (3%)	(36) 1 (3%)	(30) 1 (3%)
#PANCREATIC ISLETS HYPERPLASIA, NOS	(50) 1 (2%)	(46)	(50)
REPRODUCTIVE SYSTEM			
*MAMMARY GLAND CYST, NOS LACTATION	(50) 1 (2%)	(50)	(50) 1 (2%) 1 (2%)
*PREPUCE INFLAMMATION, CHRONIC	(50) 1 (2%)	(50)	(50)
*PREPUTIAL GLAND DISTENTION CYSTIC DUCTS Inflammation, Chronic Hyperplasia, Nos	(50) 1 (2%)	(50) 1 (2%) 1 (2%) 1 (2%)	(50)
#PROSTATE INFLAMMATION, SUPPURATIVE	(45)	(39) 2 (5%)	(44)
*SEMINAL VESICLE INFLAMMATION, NOS INFLAMMATION, SUPPURATIVE GRANULOMA, NOS GRANULOMA, SPERMATIC	(50)	(50) 1 (2%)	(50) 1 (2%) 1 (2%) 1 (2%)
#TESTIS ATROPHY, NOS	(50)	(50) 1 (2%)	(50)

# NUMBER OF ANIMALS WITH TISSUE EXAMINED MICROSCOPICALLY \* NUMBER OF ANIMALS NECROPSIED

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	UNTREATED Control	LOW DOSE	HIGH DOSE
HYPERPLASIA, INTERSTITIAL CELL	1 (2%)		1 (2%)
*EPIDIDYMIS Degeneration, Nos	(50)	(50)	(50) 1 (2%)
*SCROTUM NECROSIS, FAT	(50) 1 (2%)	(50)	(50)
NERVOUS SYSTEM			
#CEREBELLUM HEMORRHAGE	(50)	(49) 1 (2%)	(49)
SPECIAL SENSE ORGANS			
*EYE CATARACT	(50) 8 (16%)	(50) 9 (18%)	(50) 5 (10%)
*EYE ANTERIOR CHAMBER FIBROSIS	(50)	(50) 1 (2%)	(50)
¥EYE∕CORNEA INFLAMMATION, NOS ULCER, NOS INFLAMMATION, SUPPURATIVE SCAR	(50) 1 (2%) 1 (2%) 1 (2%) 1 (2%)	(50)	(50)
DEGENERATION, HYALINE		2 (4%)	1 (2%)
*EYE/RETINA ΔTROPHY, NOS	(50). 8 (16%)	(50) 9 (13%)	(50) 5 (10%)
MUSCULOSKELETAL SYSTEM			
NONE			
BODY CAVITIES			
*ABDOMINAL CAVITY Accessory spleen Necrosis, fat	(50)	(50) 1 (2%) 1 (2%)	(50)
*PERITONEUM INFLAMMATION, FOCAL	(50)	(50)	(50) 1 (2%)

	UNTREATED Control	LOW DOSE	HIGH DOSE
*MESENTERY NECROSIS, FAT	(50) 1 (2%)	(50)	(50) 3 (6%)
ALL OTHER SYSTEMS			
TAIL Hemorrhagic cyst			1
ADIPOSE TISSUE NECROSIS, NOS		1	
OMENTUM NECROSIS, FAT			1
SPECIAL MORPHOLOGY SUMMARY			
NO LESION REPORTED			5
NUMBER OF ANIMALS WITH TISSUE	EXAMINED MICROSCOPIC	CALLY	

### TABLE C2.

#### SUMMARY OF THE INCIDENCE OF NONNEOPLASTIC LESIONS IN FEMALE RATS FED DIETS CONTAINING 11-AMINOUNDECANOIC ACID

	UNTREATED Control	LOW DOSE	HIGH DOSE
ANIMALS INITIALLY IN STUDY ANIMALS NECROPSIED ANIMALS EXAMINED HISTOPATHOLOGICALLY	50 50 50	50 50 50	50 50 50
INTEGUMENTARY SYSTEM			
*SKIN ULCER, NOS INFLAMMATION, CHRONIC	(50) 1 (2%) 1 (2%)	(50)	(50)
RESPIRATORY SYSTEM			
#LUNG PNEUMONIA, ASPIRATION PNEUMONIA, CHRONIC MURINE	(50) 2 (4%)	(50)	(49)
HEMATOPOIETIC SYSTEM			
#BONE MARROIJ Hypoflasia, nos	(50) 2 (4%)	(49)	(48) 5 (10%)
∜SPLEEN HYPERPLASIA, NODULAR	(50)	(49) 2 (4%)	(50) 1 (2%)
#LIVER HYPERPLASIA, RETICULUM CELL	(50) 1 (2%)	(50)	(50)
CIRCULATORY SYSTEM			
#HEART DILATATION, NOS FIBROELASTOSIS ENDOCARDIAL	(50)	(50) 1 (2%)	(50) 1 (2%)
#MYOCARDIUM INFLAMMATION, NOS INFLAMMATION, CHRONIC	(50) 1 (2%) 1 (2%)	(50)	(50)

# NUMBER OF ANIMALS WITH TISSUE EXAMINED MICROSCOPICALLY \* NUMBER OF ANIMALS NECROPSIED

	UNTREATED Control	LOW DOSE	HIGH DOSE
FIBROSIS		1 (2%)	1 (2%)
*CORONARY ARTERY Thrombus, canalized	(50)	(50)	(50) 1 (2%)
*PULMONARY ARTERY MINERALIZATION MEDIAL CALCIFICATION	(50) 10 (20%)	(50) 1 (2%) 11 (22%)	(50) 1 (2%) 8 (16%)
DIGESTIVE SYSTEM			
#LIVER	(50)	(50)	(50)
HERNIA, NOS Granuloma, nos	21 (42%)	1 (2%) 26 (52%)	27 (54%)
NECROSIS, FOCAL Metamorphosis fatty	8 (16%)	1 (2%) 10 (20%)	
CYTOPLASMIC VACUOLIZATION BASOPHILIC CYTO CHANGE	3 (6%)	1 (2%)	3 (6%) 5 (10%)
FOCAL CELLULAR CHANGE Eosinophilic cyto change Clear-Cell change	1 (2%)	2 (4%) 3 (6%)	1 (2%)
#LIVER/CENTRILOBULAR	(50)	(50)	(50)
NECROSIS, NOS Metamorphosis fatty		1 (2%)	1 (2%)
#BILE DUCT Hyperplasia, Nos	(50)	(50) 1 (2%)	(50)
#PANCREAS	(50)	(50)	
INFLAMMATION, CHRONIC FOCAL Fibrosis, focal Atrophy, nos Atrophy, focal	3 (6%) 1 (2%)	1 (2%)	1 (2%) 1 (2%)
#STOMACH	(50)	(50)	(48)
ULCER, NOS Inflammation, acute	1 (2%)		1 (2%)
HYPERKERATOSIS		1 (2%)	
#GASTRIC MUCOSA CYST, NOS	(50) 1 (2%)	(50)	(48)
URINARY SYSTEM			
#KIDNEY MINERALIZATION	(49)	(50)	(50)

	UNTREATED Control	LOW DOSE	HIGH DOSE
CYST, NOS			3 (6%)
NEPHROSIS, TOXIC GLOMERULOSCLEROSIS, NOS METAMORPHOSIS FATTY	4 (8%) 1 (2%)	1 (2%) 1 (2%)	12 (24%)
CALCIFICATION, NOS Calcification, focal	3 (6%)	18 (36%)	3 (6%) 26 (52%)
#KIDNEY/MEDULLA CYST, NOS	(49)	(50)	(50) 1 (2%)
#KIDNEY/PELVIS	(49)	(50)	(50) 1 (2%)
DEGENERATION, MUCOID Hyperplasia, epithelial		5 (10%)	34 (68%)
#URINARY BLADDER	(49)	(47)	(48)
ULCER, NOS Hyperplasia, epithelial	4 (8%)	12 (26%)	1 (2%) 9 (19%)
ENDOCRINE SYSTEM			
#PITUITARY	(50)	(50)	(49)
CYST, NOS Hematoma, NOS	1 (2%)		1 (2%) 1 (2%)
HEMORRHAGIC CYST Hyperplasia, chromophobe-cell Angiectasis	1 (2%) 1 (2%)	2 (4%) 1 (2%)	4 (8%)
#ADRENAL	(48)	(50)	(49)
NECROSIS, CORTICAL Metamorphosis fatty Lipoidosis	5 (10%)	2 (4%) 2 (4%) 1 (2%)	1 (2%)
#ADRENAL CORTEX Hyperplasia, nodular	(48) 1 (2%)	(50)	(49)
#ADRENAL MEDULLA Hyperplasia, nos	(48) 1 (2%)	(50)	(49) 1 (2%)
<pre>#THYROID     HYPERPLASIA, C-CELL</pre>	(45) 5 (11%)	(45) 5 (11%)	(45) 4 (9%)
EPRODUCTIVE SYSTEM			
*MAMMARY GLAND CYST, NDS	(50)	(50)	(50) <u>1 (2%)</u>

# NUMBER OF ANIMALS WITH TISSUE EXAMINED MICROSCOPICALLY \* NUMBER OF ANIMALS NECROPSIED

11-Aminoundecanoic Acid

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	UNTREATED Control	LOW DOSE	HIGH DOSE
LACTATION	13 (26%)	10 (20%)	11 (22%)
*CLITORAL GLAND Hyperflasia, Nos	(50)	(50)	(50) 1 (2%)
*VAGINA Polyp	(50)	(50) 1 (2%)	(50)
#UTERUS CYST, NOS HEMORRHAGIC CYST HYPERPLASIA, EPITHELIAL	(50)	(48) 1 (2%)	(50) 1 (2%)
#UTERUS/ENDOMETRIUM CYST, NOS HYPERPLASIA, CYSTIC HYPERPLASIA, STROMAL	(50) 1 (2%) 1 (2%)	(48) 2 (4%)	(50) 4 (8%) 1 (2%)
#OVARY/OVIDUCT Abscess, Nos	(50)	(48) 1 (2%)	(50)
#OVARY CYST, NOS Atrophy, Nos	(50) 1 (2%) 1 (2%)	(50)	(50) 3 (6%)
NERVOUS SYSTEM			
#BRAIN Hydrocephalus, Nos Scar Atrophy, pressure	(50) 1 (2%) 3 (6%)	(49) 1 (2%) 6 (12%)	(50) 3 (6%)
SPECIAL SENSE ORGANS			
*EYE SYNECHIA, ANTERIOR SYNECHIA, POSTERIOR	(50) 1 (2%)	(50) 1 (2%)	(50)
CATARACT	12 (24%)	8 (16%)	8 (16%)
*SCLERA CALCIFICATION, NOS CALCIFICATION, FOCAL	(50)	(50) 1 (2%)	(50) 1 (2%)
*EYE/CORNEA Inflammation, Nos	(50)	(50)	(50) <u>2 (4%)</u>

UNTREATED Control	LOW DOSE	HIGH DOSE
4 (8%)	1 (2%)	
(50)	(50)	(50)
10 (20%)	7 (14%)	7 (14%)
(50)	(50)	(50) 1 (2%)
(50) 1 (2%)		(50)
(50)	(50) 1 (2%)	(50)
(50) 1 (2%)	(50)	(50)
(50)	(50)	(50)
(24)	1 (24)	2 (4%)
(50)	(50)	(50) 1 (2%)
(50) 1 (2%)	(50) 4 (8%)	(50) 1 (2%)
	1	
	CONTROL 4 (8%) (50) 2 (4%) 10 (20%) (50) (50) (50) (50) (50) (50) 1 (2%) (50) (50) (50) 1 (2%) (50) (5)) (5)) (5)) (5)	CONTROL         LOW DOSE           4 (8%)         1 (2%)           (50)         (50)           2 (4%)         7 (14%)           (50)         (50)           (50)         (50)           (50)         (50)           (50)         (50)           (50)         (50)           (50)         (50)           (50)         (50)           (50)         (50)           (50)         (50)           (50)         (50)           (50)         (50)           (50)         (50)           (50)         (50)           (50)         (50)           (50)         (50)           (50)         (50)           (50)         (50)           (1 (2%)         4 (8%)

# APPENDIX D

# SUMMARY OF THE INCIDENCE OF NONNEOPLASTIC LESIONS IN MICE FED DIETS CONTAINING 11-AMINOUNDECANOIC ACID

#### TABLE D1.

#### SUMMARY OF THE INCIDENCE OF NONNEOPLASTIC LESIONS IN MALE MICE FED DIETS CONTAINING 11-AMINOUNDECANOIC ACID

	UNTREATED Control	LOW DOSE	HIGH DOSE
ANIMALS INITIALLY IN STUDY ANIMALS NECROPSIED ANIMALS EXAMINED HISTOPATHOLOGICALLY	50 50 50	50 50 50	50 50 49
INTEGUMENTARY SYSTEM			
*SKIN EPIDERMAL INCLUSION CYST	(50)	(50) 1 (2%)	(50)
INFLAMMATION, CHRONIC Hyperkeratosis	1 (2%) 1 (2%)	1 (2%)	
*SUBCUT TISSUE ABSCESS, NOS INFLAMMATION, CHRONIC INFLAMMATION, GRANULOMATOUS	(50)	(50) 1 (2%) 1 (2%) 1 (2%)	(50)
RESPIRATORY SYSTEM			
*LARYNX Inflammation, chronic	(50) 1 (2%)	(50)	(50)
#TRACHEA Inflammation, suppurative	(45)	(43)	(44) 1 (2%)
#LUNG MINERALIZATION	(50)	(50) 2 (4%)	(46)
CONGESTION, NOS EDEMA, NOS	2 (4%) 1 (2%)	4 (8%)	9 (20%)
HEMORRHAGE SEQUESTRATION HISTIOCYTOSIS	1 (2%) 3 (6%)		1 (2%)
HEMATOPOIETIC SYSTEM			
#SPLEEN Congestion, nos Plasmacytosis	(50) 1 (2%) 1 (2%)	(47) 1 (2%)	(47)

# NUMBER OF ANIMALS WITH TISSUE EXAMINED MICROSCOPICALLY \* NUMBER OF ANIMALS NECROPSIED

	UNTREATED Control	LOW DOSE	HIGH DOSE
HYPERPLASIA, LYMPHOID HEMATOPOIESIS	5 (10%) 7 (14%)	3 (6%) 5 (11%)	4 (9%) 3 (6%)
CONGESTION, NOS	(33)	(43) 1 (2%)	(32)
EDEMA, NOS HEMORRHAGE HENOSIDEROSIS	1 (3%) 14 (42%)	10 (23%)	4 (13%) 1 (3%)
HEMOSIDEROSIS Plasmacytosis Hyperplasia, lymphoid	1 (3%) 9 (27%)	1 (2%) 3 (7%)	1 (34)
#INGUINAL LYMPH NODE Plasmacytosis Hyperplasia, lymphoid	(33) 3 (9%) 3 (9%)	(43)	(32)
#LUNG Plasmacytosis	(50) 1 (2%)	(50)	(46)
#LIVER HEMATOPOIESIS	(50) 1 (2%)	(50)	(49)
<pre>#PEYER'S PATCH     HYPERPLASIA, LYMPHOID</pre>	(46)	(50)	(45) 1 (2%)
#THYMUS EDEMA, NOS	(24)	(25) 1 (4%)	(17)
SIRCULATORY SYSTEM			
*MULTIPLE ORGANS PERIARTERITIS	(50)	(50) 1 (2%)	(50)
<pre>#MESENTERIC L. NODE    THROMBOSIS, NOS</pre>	(33) 1 (3%)	(43)	(32)
#HEART MINERALIZATION	(50)	(50)	(49)
FIBROSIS Degeneration, Nos	1 (2%) 3 (6%)	1 (2%)	
*AORTA MINERALIZATION	(50)	(50) 2 (4%)	(50) 2 (4%)
#LIVER THROMBUS, FIBRIN	(50)	(50)	(49)

	UNTREATED Control	LOW DOSE	HIGH DOSE
*MESENTERY THROMBUS, FIBRIN	(50) 1 (2%)	(50)	(50)
DIGESTIVE SYSTEM			
#SALIVARY GLAND Lymphocytic inflammatory infiltr Necrosis, nos	(49)	(47) 1 (2%) 1 (2%)	(48)
FOCAL CELLULAR CHANGE Atrophy, nos Angiectasis	(50) 1 (2%) 1 (2%) 1 (2%) 1 (2%) 2 (4%) 2 (4%)	(50) 1 (2%) 1 (2%) 1 (2%) 3 (6%) 2 (4%)	(49) 1 (2%) 1 (2%) 1 (2%) 1 (2%) 1 (2%) 1 (2%) 1 (2%)
#LIVER/CENTRILOBULAR NECROSIS, NOS Cytoplasmic vacuolization Atrophy, Nos	(50) 1 (2%) 1 (2%)	(50)	(49) 1 (2%)
*GALLBLADDER INFLAMMATION, NECROTIZING	(50)	(50) 1 (2%)	(50)
#PANCREAS Cyst, NOS Atrophy, NOS	(50) 1 (2%)	(48) 1 (2%)	(47)
#STOMACH MINERALIZATION INFLAMMATION ACUTE AND CHRONIC INFLAMMATION, CHRONIC INFLAMMATION, CHRONIC SUPPURATIV	1 (2%)	(48)	(47) 6 (13%)

	UNTREATED CONTROL	LOW DOSE	HIGH DOSE
HYPERPLASIA, EPITHELIAL	1 (2%)		
URINARY SYSTEM			
#KIDNEY MINERALIZATION HYDRONEPHROSIS	(50)	(50) 4 (8%) 1 (2%)	
NECROSIS, MEDULLARY	1 (2%) 38 (76%)	35 (70%)	3 (6%)
CYTOPLASMIC VACUOLIZATION Atrophy, nos	1 (2%)	4 (8%)	1 (2%) 3 (6%)
<pre>#KIDNEY/TUBULE    NECROSIS, NOS</pre>	(50) 1 (2%)	(50)	(49)
#KIDNEY/PELVIS INFLAMMATION, SUPPURATIVE	(50)	(50)	(49) 1 (2%)
#URINARY BLADDER INFLAMMATION, SUPPURATIVE INFLAMMATION, CHRONIC INFLAMMATION, CHRONIC SUPPURATIV HYPERPLASIA, EPITHELIAL		(44) 17 (39%)	
ENDOCRINE SYSTEM			
#ADRENAL Focal Cellular Change	(44)	(48) 1 (2%)	(42) 1 (2%)
#THYROID LYMPHOCYTIC INFLAMMATORY INFILTR HYPERPLASIA, FOLLICULAR-CELL	(47)	(42)	(36) 2 (6%) 1 (3%)
REPRODUCTIVE SYSTEM			
*PREPUCE Inflammation, Chronic	(50)	(50)	(50) 1 (2%)
*PREPUTIAL GLAND DILATATION/DUCTS	(50) <u>4 (8%)</u>	(50)	(50) <u> </u>

		LOW DOSE	HIGH DOSE
INFLAMMATION, CHRONIC Inflammation, chronic suppurativ Inflammation, granulomatous	1 (2%) 2 (4%) 2 (4%)		2 (4%) 1 (2%)
INFLAMMATION, PYOGRANULOMATOUS			2 (4%)
<pre>#PROSTATE LYMPHOCYTIC INFLAMMATORY INFILTR INFLAMMATION, SUPPURATIVE INFLAMMATION, ACUTE</pre>	(49) 1 (2%) 1 (2%)	(50) 3 (6%) 1 (2%)	(48)
#TESTIS MINERALIZATION	(49) 2 (4%)	(50) 2 (4%) 1 (2%)	(47)
CYST, NOS Atrophy, Nos	2 (4%)	(24)	1 (2%)
#TESTIS/TUBULE MINERALIZATION	(49)	(50) 1 (2%)	(47)
*EPIDIDYMIS Lymphocytic inflammatory infiltr granuloma, spermatic		(50) 1 (2%)	(50) 1 (2%) 1 (2%)
NERVOUS SYSTEM			
SPECIAL SENSE ORGANS *EYE CATARACT	(50)	(50) 1 (2%)	(50)
*EYE/RETINA DETACHMENT ATROPHY, NOS	(50)	(50) 1 (2%) 1 (2%)	(50)
MUSCULOSKELETAL SYSTEM			
*STERNUM INFLAMMATION ACUTE AND CHRONIC NECROSIS, NOS	(50)	(50) 1 (2%) 1 (2%)	(50)
BODY CAVITIES			
*PERITONEUM Inflammation acute and chronic	(50)	(50)	(50)

TABLE D1	MALE MICE:	NONNEOPLASTIC	LESIONS (	(CONTINUED)
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	UNTREATED Control	LOW DOSE	HIGH DOSE
*PLEURA Inflammation acute and chronic	(50)	(50) 1 (2%)	(50)
*PERICARDIUM Inflammation, suppurative	(50)	(50) 1 (2%)	(50)
*MESENTERY INFLAMMATION, CHRONIC	(50)	(50) 1 (2%)	(50)
ALL OTHER SYSTEMS			
*MULTIPLE ORGANS MINERALIZATION INFLAMMATION, ACUTE ABSCESS, NOS INFLAMMATICN ACUTE AND CHRONIC	(50) 1 (2%) 1 (2%) 1 (2%)	(50) 2 (4%)	(50) 5 (10%)
SITE UNKNOWN MINERALIZATION			1
SPECIAL MORPHOLOGY SUMMARY			
NO LESION REPORTED Auto/Necropsy/Histo Perf Auto/Necropsy/No Histo		1	2 1
<pre># NUMBER OF ANIMALS WITH TISSUE EXAM * NUMBER OF ANIMALS NECROPSIED</pre>	INED MICROSCOPIC	ALLY	

#### TABLE D2.

#### SUMMARY OF THE INCIDENCE OF NONNEOPLASTIC LESIONS IN FEMALE MICE FED DIETS CONTAINING 11-AMINOUNDECANOIC ACID

	UNTREATED CONTROL	LOW DOSE	HIGH DOSE
ANIMALS INITIALLY IN STUDY ANIMALS MISSING	50	50 1	50 1
ANIMALS NECROPSIED ANIMALS EXAMINED HISTOPATHOLOGICALLY	50 50	49 49	49 49
INTEGUMENTARY SYSTEM			
*SKIN INFLAMMATION, CHRONIC Hyperkeratosis Acanthosis	(50) 1 (2%) 1 (2%) 2 (4%)	(49) 2 (4%) 1 (2%)	(49)
RESPIRATORY SYSTEM			
#TRACHEA Inflammation, fibrinous	(39) 1 (3%)	(42)	(43)
#LUNG MINERALIZATION CONGESTION, NOS	(50)	(49) 1 (2%) 2 (4%)	(49) 4 (8%) 5 (10%)
EDEMA, NOS INFLAMMATION, SUPPURATIVE		1 (2%)	1 (2%)
INFLAMMATION, SUPPORTIVE INFLAMMATION, CHRONIC HYPERPLASIA, NOS	1 (2%) 1 (2%)		
HEMATOPOIETIC SYSTEM			
#BONE MARROW Hemosiderosis	(46)	(44)	(47)
GRANULOPOIESIS		1 (2%)	1 (2%)
#SPLEEN HEMOSIDEROSIS	(50)	(49)	(47) 1 (2%)
HYPERPLASIA, LYMPHOID HEMATOPOIESIS	5 (10%) 5 (10%)	4 (8%) 3 (6%)	3 (6%)
#LYMPH NODE congestion, nos	(35)	(38)	(38)

	UNTREATED Control	LOW DOSE	HIGH DOSI
HEMORRHAGE Plasmacytosis	1 (3%)	1 (3%)	
#MANDIBULAR L. NODE Hemosiderosis Hyperplasia, lymphoid	(35)	(38) 1 (3%)	(38) 1 (3%)
#ABDOMINAL LYMPH NODE Hyperplasia, lymphoid	(35) 1 (3%)	(38)	(38)
#LUMBAR LYMPH NODE EDEMA, NOS HEMOSIDEROSIS	(35) 1 (3%) 1 (3%)	(38)	(38)
#MESENTERIC L. NODE Hemorrhage Hyperplasia, lymphoid	(35) 1 (3%) 1 (3%)	(38) 1 (3%)	(38) 2 (5%)
#THYMUS INFLAMMATION, SUPPURATIVE NECROSIS, CORTICAL	(30)	(32) 1 (3%)	(22) 1 (5%)
IRCULATORY SYSTEM			
#HEART MINERALIZATION INFLAMMATION ACUTE AND CHRONIC DEGENERATION, NOS	(50) 3 (6%)	(49) 1 (2%)	(49) 2 (4%) 1 (2%) 1 (2%)
NECROSIS, NOS *AORTA MINERALIZATION	(50)	(49) 1 (2%)	(49) 2 (4%)
#UTERUS THROMBUS, FIBRIN	(48)	(49) 1 (2%)	(49)
IGESTIVE SYSTEM			
*TONGUE INFLAMMATION, GRANULOMATOUS	(50)	(49)	(49) 1 (2%)
#LIVER CONGFSTION, MOS	(50)	(49)	(49)

	UNTREATED Control	LOW DOSE	HIGH DOSE
INFLAMMATION, NOS INFLAMMATION ACUTE AND CHRONIC INFLAMMATION, GRANULOMATOUS INFLAMMATION, PYOGRANULOMATOUS NECROSIS, NOS		1 (2%)	1 (2%)
INFARCT, NOS Cytoplasmic vacuolization Focal cellular change	1 (2%)	5 (10%)	1 (2%) 6 (12%) 1 (2%)
#PANCREAS	(50)	(49)	(47)
DILATATION/DUCTS Lymphocytic inflammatory infiltr Atrophy, nos	1 (2%)	1 (2%)	2 (4%) 1 (2%) 3 (6%)
#STOMACH MINERALIZATION INFLAMMATION, SUPPURATIVE	(50)	(48)	(49) 4 (8%) 1 (2%)
HYPERPLASIA, ADENOMATOUS Hyperkeratosis	1 (2%) 1 (2%)	2 (4%)	
#FORESTOMACH Hyperplasia, Nos	(50) 1 (2%)	(48)	(49)
#COLON EDEMA, NOS INFLAMMATION, SEROUS	(50) 1 (2%) 1 (2%)	(45)	(47) 1 (2%)
RINARY SYSTEM			
MINERALIZATION	(50) 36 (72%)	(49) 6 (12%) 36 (73%) 4 (8%) 1 (2%) 4 (8%)	(49) 9 (18%) 32 (65%) 1 (2%) 1 (2%) 4 (8%)
#KIDNEY∕MEDULLA MINERALIZATION SCLERDSIS DEGENERATION, NOS	(50)	(49) 2 (4%) 1 (2%)	(49) 1 (2%)
#URINARY BLADDER LYMPHOCYTIC INFLAMMATORY INFILTR	(49)	(48)	(46)

ED L LOW DOSE	HIGH DOSE
32 (67%)	28 (61%)
(46) 1 (2%) 1 (2%)	(48)
(41) 1 (2%) 1 (2%)	(40)
(15) 1 (7%)	(21)
(49)	(49) 1 (2%) 1 (2%)
(49) 34 (69%)	1 (2%)
(46) 19 (41%) 1 (2%)	(45) 7 (16%) 1 (2%) 1 (2%) 1 (2%)
(49) 1 (2%)	(49) 3 (6%)
(49) 2 (4%)	(49) 1 (2%)
	$\begin{pmatrix} (49) \\ 1 (2\%) \\ (49) \\ 2 (4\%) \end{pmatrix}$

TABLE D2.	FEMALE MICE:	NONNEOPLASTIC LESIONS (CONTINUED)

	UNTREATED Control	LOW DOSE	HIGH DOSE
MUSCULOSKELETAL SYSTEM			
NONE			
BODY CAVITIES			
*MEDIASTINUM INFLAMMATION, SUPPURATIVE NECROSIS, FAT	(50)	(49) 1 (2%) 1 (2%)	(49)
ALL OTHER SYSTEMS			
*MULTIPLE ORGANS MINERALIZATION	(50)	(49)	(49) 3 (6%)
SPECIAL MORPHOLOGY SUMMARY			
ANIMAL MISSING/NO NECROPSY		1	1
# NUMBER OF ANIMALS WITH TISSUE EXA * NUMBER OF ANIMALS NECROPSIED	MINED MICROSCOPIO	CALLY	

# **APPENDIX E**

## ANALYSIS OF 11-AMINOUNDECANOIC ACID MIDWEST RESEARCH INSTITUTE

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#### **APPENDIX E**

#### A. ELEMENTAL ANALYSIS

Element	С	Н	Ν
Theory	65 63	11 52	6 96
Determined	65 54 65 71	11 46 11 60	6 95 6 97

#### **B. WATER ANALYSIS**

(Karl Fisher) 0 5%  $\pm 0.1$  ( $\delta$ )%

# C. TITRATION OF AMINO GROUP WITH PERCHLORIC ACID IN GLACIAL ACETIC ACID

99 13% ±0 03 (δ)%

#### **D. MELTING POINT**

Determined 190°-191°C, dec (Dupont 900DTA) 188°-189°C, dec (visual, capillary)

#### E. THIN-LAYER CHROMATOGRAPHY

Plates Silica gel 60 Amount spotted 100 and 300 $\mu$ g	Ref Standard L-phenylalanıne	
System 1 Phenol water formic acid (72 28 1)	Visualization Ninhydrin	
Rf 0 83 (trace), 0 66		

Literature Values

(Rekhter and Nesterova,

184°-185°C

1963)

R<sub>st</sub> 14, 11

System 2 Chloroform methanol water ammonium hydroxide (45 45 4 6)

Rf 0 94 (slight trace), 0 88 (trace), 0 48 (major)

R<sub>st</sub> 18, 17, 091

#### F. HIGH-PRESSURE LIQUID CHROMATOGRAPHY

Derivation procedure The amino acid was suspended in 0 5M aqueous sodium bicarbonate buffer and an equivalent amount of 10 mM 5-(dimethylamino)naphthalene sulphonyl chloride (dansyl chloride) solution in acetonitrile was added The resulting solution was incubated at 37°C for 1 hour and then diluted with 50% aqueous acetonitrile This resulting solution was analyzed by high-pressure liquid chromatography, using the following system

Instrument Waters ALC202, with Model 660 Solvent Programmer

Column  $\mu$ Bondapak C<sub>18</sub>, 30 cm x 4 mm l D

Detector UV-254 nm

Solvent 37% acetonitrile in 0.01M aqueous sodium bicarbonate

Flow 1 ml/min

Results A single peak with retention time of 7 5 minutes was detected in the samples

G. SPECTRAI DATA

(1) Infrared

Instrument Beckman IR-12

Cell 1% KBr pellet

Results (See Figure 5)

(2) Ultraviolet/Visible

Instrument Cary 118

Results No absorbance detected between 350 and 800 nm (visible range) No maximum between 200 and 350 nm (ultraviolet range), however, the absorbance increases from 250 nm to the instrument cutoff at 220 nm

Concentration 1 2 mg/ ml

Solvent 01N HCl

(3) Nuclear Magnetic Resonance

Instrument Varian HA-100

Solvent Deuterated trifluoroacetic acid with internal tetramethylsilane

Assignments (See Figure 6)

(a) s,  $\delta 1$  35 ppm, (b) m,  $\delta 1$  54 to 1 94 ppm, (c) t,  $\delta 2$  46 ppm, J<sub>bc</sub> = 7Hz, (d) m,  $\delta 3$  01 to 3 35 ppm, (e) s, 6 29 to 6 84 ppm

Integration ratios

(a) 13 2, (b) 3 7, (c) 1 8, (d) 1 4, (e) 0 5

Literature Values

Consistent with literature spectrum (Sadtler Research Laboratories)

No literature values found

No literature spectrum found

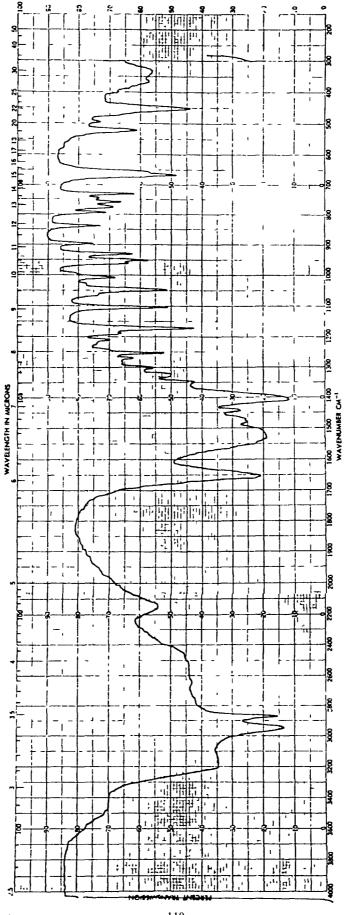
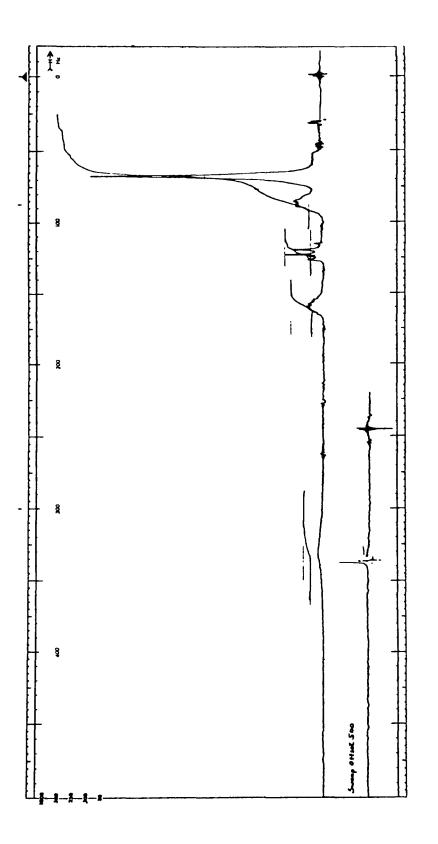


Figure 5. Infrared Absorption Spectrum 11-Aminoundecanoic Acid

11-Aminoundecanoic Acid

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11-Aminoundecanoic Acid

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## **APPENDIX F**

## ANALYSIS OF FORMULATED DIETS FOR STABILITY OF 11-AMINOUNDECANOIC ACID MIDWEST RESEARCH INSTITUTE

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1. MIXING AND STORAGE: 11-Aminoundecanoic acid (20 g) and Wayne Lab Blox<sup>®</sup> Rodent feed (180 g) were mixed in a mortar. Samples of the mixture were then removed and stored for 2 weeks at  $-20^{\circ}$ ,  $5^{\circ}$ ,  $25^{\circ}$ , and  $45^{\circ}$ C. These samples were extracted and analyzed by the high-pressure liquid chromatographic method described below.

2. PROCEDURES FOR EXTRACTION AND ANALYSIS: Samples of the chemical/feed mixtures were triturated three times with 0.1N nitric acid using a Polytron<sup>®</sup> mixer, and the combined mixtures were centrifuged. The supernatant solutions were separated and neutralized to approximately pH7 with 0.35N sodium hydroxide solution and then buffered by adding solid sodium bicarbonate(to make the solution 0.5M in NaHCO3). This solution was then treated with an equivalent amount of 10 mM 5-(dimethylamino)naphthalene sulphonyl chloride (dansyl chloride) solution in acetonitrile. The resulting solution was incubated at 37°C for 1 hour and then diluted with 50% aqueous acetonitrile. This resulting solution was analyzed by high-pressure liquid chromatography, using the following system:

Instrument: Waters ALC202, with Model 660 Solvent Programmer

Column:  $\mu$ Bondapak C<sub>18</sub>, 30 cm x 4 mm I.D.

Detector: UV-254 nm

Solvent: 37% acetonitrile in 0.01M aqueous sodium bicarbonate

Flow: 1 ml/min

#### 3. RESULTS:

Temperature (°C)	Average % Compound Recovered	
-20	9.8 ±0.4	
5	9.8 ±0.4	
25	$10.1 \pm 0.4$	
45	10.6 ±0.4	

There is no significant difference between the samples stored at the various temperatures.

4. CONCLUSION: 11-Aminoundecanoic acid mixed with feed is stable for two weeks at temperatures up to 45°C.

# **APPENDIX G**

## ANALYSIS OF FORMULATED DIETS FOR CONCENTRATIONS OF 11-AMINOUNDECANOIC ACID LITTON BIONETICS, INC.

#### APPENDIX G

A 5-g portion of feed was extracted with three 40-ml portions of 0.1N nitric acid. After the mixture was shaken for 10 minutes on an automatic shaker and centrifuged for 10 minutes at 1,500 rpm, the supernatant was filtered through glass wool into a 200-ml volumetric flask. The total extract was diluted to volume with additional dilute nitric acid. A 1.0- to 2.0-ml aliquot of the extract was transferred to a test tube; 0.1N nitric acid was added, if necessary, to make the final volume 2.0 ml in all cases. A reference standard was prepared by pipetting 2.0 ml of the 0.1N nitric acid containing 375  $\mu$ g aminoundecanoic acid into a test tube. To both the sample and the standard were added 5.0 ml of 0.5M NaHCO3 and 5.0 ml of 10 mM dansyl chloride in acetonitrile. The tubes were incubated for 1 hour at 37°C and allowed to cool. Two milliliters of acetonitrile were added and the volume adjusted to 15 ml with 50% acetonitrile/ water.

Analysis was performed with a Waters Model No. 204 high-pressure liquid chromatograph with a UV detector at 254 nm. The column was stainless steel, 25 cm x 4.6 mm I.D., packed with  $\mu$ Bondapak/C<sub>18</sub>. The solvent system was 37% acetonitrile in 0.01M aqueous sodium bicarbonate at a flow rate of 2.0 ml/min. The amount of test compound in the feed was calculated by reference to a calibration curve obtained by analysis of the reference standard in the same manner. Control feed and control feed treated with a known amount of aminoundecanoic acid were analyzed concurrently to correct for possible feed background and method recovery.

Date Mixed (a)	Date Used (week of)	Concentration (b) of 11-Aminoundecanoic Acid in Feed for Target Concentration	
		7,500 ppm	15,000 ppm
11/12/77	11/15 - 11/22	7,951	15,135
		7,805	13,833
		7,146	
12/12/77	12/14 - 12/21		14,411
2/23/78	2/25 - 3/1	6,892	
4/06/78	4/8 - 4/15		14,561
5/19/78	5/22 - 5/29		14,879
7/28/78	8/1 - 8/8	8,028	14,628
		7,930	
8/31/78	9/1 - 9/8	7,517	
9/14/78	9/16 - 9/23		15,884
10/26/78	10/28 - 11/4		14,278
11/09/78	11/11 - 11/18	7,232	
12/21/78	12/23 - 12/30	7,874	
Mean (ppm)		7,597	14,701
Standard deviation		416	618
Coefficient of variation (%)		5.5	4.2
Range (ppm)		6,892-	13,833-
		8,028	15,884
Number of samples		9	8

Table G-1. ANALYSIS OF FORMULATED DIE	TS
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(a) 2/2/77 was the start date for rats and 2/1/77 was the start date for mice.

(b) The data presented are the average of the results of duplicate analyses.

11-Aminoundecanoic Acid

NIH Publication No. 82-1772 May 1982