NIOSH Skin Notation Profiles Azinphos-methyl



DEPARTMENT OF HEALTH AND HUMAN SERVICES Centers for Disease Control and Prevention National Institute for Occupational Safety and Health



This page intentionally left blank.

NIOSH Skin Notation (SK) Profile

Azinphos-methyl [CAS No. 86-50-0]

Naomi L. Hudson and G. Scott Dotson

DEPARTMENT OF HEALTH AND HUMAN SERVICES Centers for Disease Control and Prevention National Institute for Occupational Safety and Health This document is in the public domain and may be freely copied or reprinted.

Disclaimer

Mention of any company or product does not constitute endorsement by the National Institute for Occupational Safety and Health (NIOSH). In addition, citations to websites external to NIOSH do not constitute NIOSH endorsement of the sponsoring organizations or their programs or products. Furthermore, NIOSH is not responsible for the content of these websites.

Ordering Information

To receive this document or information about other occupational safety and health topics, contact NIOSH:

Telephone: 1-800-CDC-INFO (1-800-232-4636) TTY: 1-888-232-6348 E-mail: cdcinfo@cdc.gov

Or visit the NIOSH website: www.cdc.gov/niosh

For a monthly update on news at NIOSH, subscribe to *NIOSH eNews* by visiting **www.cdc.gov/niosh/eNews**.

Suggested Citation

NIOSH [2015]. NIOSH skin notation profile: Azinphos-methyl. By Hudson NL, Dotson GS. Cincinnati, OH: U.S. Department of Health and Human Services, Centers for Disease Control and Prevention, National Institute for Occupational Safety and Health, DHHS (NIOSH) Publication No. 2015-235.

DHHS (NIOSH) Publication No. 2015-235

September 2015

SAFER • HEALTHIER • PEOPLETM

Foreword

As the largest organ of the body, the skin performs multiple critical functions, such as serving as the primary barrier to the external environment. For this reason, the skin is often exposed to potentially hazardous agents, including chemicals, which may contribute to the onset of a spectrum of adverse health effects ranging from localized damage (such as irritant contact dermatitis and corrosion) to induction of immune-mediated responses (such as allergic contact dermatitis and pulmonary responses) or systemic toxicity (such as neurotoxicity and hepatotoxicity). Understanding the hazards related to skin contact with chemicals is a critical component of modern occupational safety and health programs.

In 2009, the National Institute for Occupational Safety and Health (NIOSH) published *Current Intelligence Bulletin (CIB) 61: A Strategy for Assigning New NIOSH Skin Notations* [NIOSH 2009-147]. This document provides the scientific rationale and framework for the assignment of multiple hazard-specific skin notations (SK) that clearly distinguish between the systemic effects, direct (localized) effects, and immune-mediated responses caused by skin contact with chemicals. The key step within assignment of the hazard-specific SK is the determination of the hazard potential of the substance, or its potential for causing adverse health effects as a result of skin exposure. This determination entails a health hazard identification process that involves use of the following:

- Scientific data on the physicochemical properties of a chemical
- Data on human exposures and health effects
- Empirical data from in vivo and in vitro laboratory testing
- Computational techniques, including predictive algorithms and mathematical models that describe a selected process (such as skin permeation) by means of analytical or numerical methods.

This *Skin Notation Profile* provides the SK assignments and supportive data for azinphosmethyl. In particular, this document evaluates and summarizes the literature describing the hazard potential of the substance and its assessment according to the scientific rationale and framework outlined in CIB 61. In meeting this objective, this *Skin Notation Profile* intends to inform the audience—mostly occupational health practitioners, researchers, policy- and decision-makers, employers, and workers in potentially hazardous workplaces—so that improved risk-management practices may be developed to better protect workers from the risks of skin contact with the chemicals of interest.

> John Howard, M.D. Director, National Institute for Occupational Safety and Health Centers for Disease Control and Prevention

This page intentionally left blank.

Contents

Foreword.	iii
Abbreviations	vi
Glossary	viii
Acknowledgments	ix
1 Introduction	1
1.1 General Substance Information:	1
1.2 Purpose	1
1.3 Overview of SK Assignment	1
2 Systemic Toxicity from Skin Exposure (SK: SYS)	2
3 Direct Effects on Skin (SK: DIR)	4
4 Immune-mediated Responses (SK: SEN)	4
5 Summary	4
References	5
Appendix: Calculation of the SI Ratio for Azinphos-methyl	7
Overview	7
Calculation	8
Appendix References	8

Abbreviations

ACGIH	American Conference of Governmental Industrial Hygienists
AChE	acetylcholinesterase
Amu	atomic mass unit
ATSDR	Agency for Toxic Substances and Disease Registry
CIB	Current Intelligence Bulletin
cm ²	squared centimeter(s)
cm/hr	centimeter(s) per hour
cm/s	centimeter(s) per second
DEREK	Deductive Estimation of Risk from Existing Knowledge
DIR	skin notation indicating the potential for direct effects to the skin following con- tact with a chemical
DMPT	dimethylphosphorothioate
EC	European Commission
ED ₅₀	median effective dose
GHS	Globally Harmonized System for Classification and Labelling of Chemicals
GPMT	guinea pig maximization test
hr	hour(s)
IARC	International Agency for Research on Cancer
IPCS	International Program for Chemical Safety
(IRR)	subnotation of SK: DIR indicating the potential for a chemical to be a skin ir- ritant following exposure to the skin
k_{aq}	coefficient in the watery epidermal layer
k_p	skin permeation coefficient
k_{pol}	coefficient in the protein fraction of the stratum corneum
k_{psc}	permeation coefficient in the lipid fraction of the stratum corneum
LD ₅₀	dose resulting in 50% mortality in the exposed population
	dermal lethal dose
LLNA	local lymph node assay
LOAEL	lowest-observed-adverse-effect level
log K _{ow}	base-10 logarithm of a substance's octanol-water partition
M	molarity
m ³	cubic meter(s)
mg	milligram(s)
mg/cm²/hr	milligram(s) per square centimeter per hour
mg/kg	milligram(s) per kilogram body weight
mg/m ³	milligram(s) per cubic meter
mL	milliliter(s)
mL/kg	milliliter(s) per kilogram body weight
MW	molecular weight

NIOSH	National Institute for Occupational Safety and Health
NOAEL	no-observed-adverse-effect level
NTP	National Toxicology Program
OEL	occupational exposure limit
OSHA	Occupational Safety and Health Administration
ppm	parts per million
RBC-AChE	erythrocyte acetylcholinesterase
REL	recommended exposure limit
RF	retention factor
SEN	skin notation indicating the potential for immune-mediated reactions following exposure of the skin
SI	ratio ratio of skin dose to inhalation dose
SK	skin notation
S _w	solubility in water
SYS	skin notation indicating the potential for systemic toxicity following exposure of the skin
US EPA	United States Environmental Protection Agency
μg	microgram(s)
µg/cm ²	microgram(s) per square centimeter
µg/cm²/hr	microgram(s) per square centimeter per hour
μmol	micromole(s)

Glossary

Absorption—The transport of a chemical from the outer surface of the skin into both the skin and systemic circulation (including penetration, permeation, and resorption).

Acute exposure—Contact with a chemical that occurs once or for only a short period of time.

Cancer—Any one of a group of diseases that occur when cells in the body become abnormal and grow or multiply out of control.

Contaminant—A chemical that is (1) unintentionally present within a neat substance or mixture at a concentration less than 1.0% or (2) recognized as a potential carcinogen and present within a neat substance or mixture at a concentration less than 0.1%.

Cutaneous (or percutaneous)—Referring to the skin (or through the skin).

Dermal—Referring to the skin.

Dermal contact—Contact with (touching) the skin.

Direct effects—Localized, non-immune-mediated adverse health effects on the skin, including corrosion, primary irritation, changes in skin pigmentation, and reduction/disruption of the skin barrier integrity, occurring at or near the point of contact with chemicals.

Immune-mediated responses—Responses mediated by the immune system, including allergic responses.

Sensitization—A specific immune-mediated response that develops following exposure to a chemical, which, upon re-exposure, can lead to allergic contact dermatitis (ACD) or other immune-mediated diseases such as asthma, depending on the site and route of re-exposure.

Substance—A chemical.

Systemic effects—Systemic toxicity associated with skin absorption of chemicals after exposure of the skin.

Acknowledgments

This document was developed by the Education and Information Division (Paul Schulte, Ph.D., Director). G. Scott Dotson, Ph.D., was the project officer for this document, assisted in great part by Naomi Hudson, Dr.P.H., M.P.H., Todd Niemier, M.Sc., and Loren Tapp, M.D. The basis for this document was a report (*Toxicology Excellence for Risk Assessment [TERA]*) contracted by NIOSH and prepared by Bernard Gadagbui, Ph.D., and Andrew Maier, Ph.D.

For their contribution to the technical content and review of this document, special acknowledgment is given to the following NIOSH personnel:

Denver Field Office

Eric Esswein, M.Sc.

Division of Applied Research and Technology

Clayton B'Hymer, Ph.D. John Snawder, Ph.D. Mark Toraason, Ph.D.

Division of Respiratory Disease Studies

Gregory A. Day, Ph.D. Aleksander Stefaniak, Ph.D.

Division of Surveillance, Hazard Evaluations, and Field Studies

Matt Dahm, M.Sc. Aaron Sussell, Ph.D.

Education and Information Division

Devin Baker, M.Ed. Charles L. Geraci, Ph.D. Thomas J. Lentz, Ph.D. Richard Niemeier, Ph.D. Ralph Zumwalde, M.Sc.

Health Effects Laboratory Division

Stacey Anderson, Ph.D. H. Fredrick Frasch, Ph.D. Vic Johnson, Ph.D. Michael Luster, Ph.D. Anna Shvedova, Ph.D. Paul Siegel, Ph.D. Berran Yucesoy, Ph.D.

National Personal Protective Technology Laboratory

Heinz Ahlers, J.D., M.Sc. Angie Shepherd For their contribution to the technical content and review of this document, special acknowledgment is given to the following CDC personnel:

Office of Surveillance, Epidemiology and Laboratory Services/Epidemiology and Analysis Program Office

Barbara Landreth, M.A.

In addition, special appreciation is expressed to the following individuals for serving as independent, external reviewers and providing comments that contributed to the development or improvement of this document:

Phil Bigelow, B.Sc., M.H.Sc., Ph.D., University of Waterloo, School of Public Health and Health Systems, Waterloo, ON, Canada

Phillip L. Williams, Ph.D., CIH, The University of Georgia, College of Public Health, Athens, GA

G. Frank Gerberick, Ph.D., The Procter and Gamble Company, Cincinnati, OH

Dori Germolec, Ph.D., National Toxicology Program, National Institute for Environmental Health Sciences, Research Triangle, NC

Ben Hayes, M.D., Ph.D., Division of Dermatology, Vanderbilt School of Medicine, Nashville, TN

Jennifer Sahmel, M.Sc., CIH, ChemRisk, Boulder, CO

James Taylor, M.D., Industrial Dermatology, The Cleveland Clinic, Cleveland, OH

1 Introduction

1.1 General Substance Information:

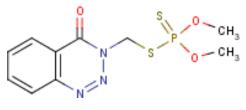
Chemical: Azinphos-methyl

CAS No: 86-50-0

Molecular weight (MW): 317.3

Molecular formula: $C_{10}H_{12}O_3PS_2N_3[(CH_30)_2P(S)SCH_2(N_3C_7H_4O)]$

Structural formula:



Synonyms: O,O-Dimethyl-S-4-oxo-1,2,3-benzotriazin-3(4H)-ylmethyl phosphorodithioate; methyl azinphos; azinfos-methyl; methyl guthion; gluthion; gusathion; gusathion methyl

Uses: Azinphos-methyl is a broad-spectrum organophosphate pesticide; an estimated 3 million pounds (~1.3 million kilograms) of the pesticide was produced in 1982 [HSDB 2009].

1.2 Purpose

This skin notation profile presents (1) a brief summary of epidemiological and toxicological data associated with skin contact with azinphos-methyl and (2) the rationale behind the hazard-specific skin notation (SK) assignment for azinphos-methyl. The SK assignment is based on the scientific rationale and logic outlined in the *Current Intelligence Bulletin (CIB) 61: A Strategy for Assigning New NIOSH Skin Notations* [NIOSH 2009]. The summarized information and health hazard assessment are limited to an evaluation of the potential health effects of dermal exposure to azinphos-methyl. A literature search was conducted through September 2014 to identify information on azinphos-methyl, including but not limited to data relating to its toxicokinetics, acute toxicity, repeated-dose systemic toxicity, carcinogenicity, biological system/function-specific effects (including reproductive and developmental effects and immunotoxicity), irritation, and sensitization. Information was considered from studies of humans, animals, or appropriate modeling systems that are relevant to assessing the effects of dermal exposure to azinphos-methyl.

1.3 Overview of SK Assignment

Azinphos-methyl is potentially capable of causing adverse health effects following skin

Skin notation	Critical effect	Available data	
SK: SYS (FATAL)	Acetylcholinesterase (AChE) inhibition	Sufficient human and animal data	
SK: SEN	Skin allergy	Limited animal data	

Table 1. Summary of the SK assignment for azinphos-methyl

contact. A critical review of available data has resulted in the following SK assignment for azinphos-methyl: **SK: SYS (FATAL)-SEN**. Table 1 provides an overview of the critical effects and data used to develop the SK assignment for azinphos-methyl.

2 Systemic Toxicity from Skin Exposure (SK: SYS)

Toxicokinetic data from dermal exposure of humans and animals to azinphos-methyl were identified. In volunteers, azinphos-methyl was dissolved in a small amount of acetone and applied to the forearm (4 micrograms per square centimeter [µg/cm²]) under nonocclusive conditions for 24 hours; 15.9% of the dose was absorbed, as measured by total excretion in the urine after 120 hours [Feldman and Maibach 1974]. When the same amount of azinphos-methyl was applied to the undamaged forearm skin of humans but under occlusive conditions, the in vivo percutaneous absorption was reported as 56.1% of the applied dose [Wester and Maibach 1985]. Franklin et al. [1989] reported on percutaneous absorption of azinphos-methyl in humans, monkeys, and rats. In humans, percutaneous absorption was 36% of the applied dose when the test material was applied to the forehead; in monkeys, it was 47% (forehead) and 32% (forearm); and in rats it was 93% [Franklin et al. 1989]. Thongsinthusack [1999] estimated absorption of 44.2% to 59.0% of the applied dose following application of 0.93 µg/ cm² azinphos-methyl to the skin of rats for 10 hours. Miles Inc. [1992] investigated the dermal absorption in rats of azinphos-methyl in a guthion (35%) wettable powder formulation using ¹⁴C-azinphos-methyl. Animals were treated with 0.26 to 267 µg of the formulation per cm² (corresponding to 0.93 to 93 µg azinphos-methyl/cm²). The absorption of the highest dosage level was 20% when calculated directly and 26% when calculated indirectly.

The potential of azinphos-methyl to pose a skin absorption hazard was also evaluated, with use of a predictive algorithm for estimating and evaluating the health hazards of dermal exposure to substances [NIOSH 2009]. The evaluation method compares an estimated dose accumulated in the body from skin absorption and an estimated dose from respiratory absorption associated with a reference occupational exposure limit. On the basis of this algorithm, a ratio of the skin dose to the inhalation dose (SI ratio) of 0.059 was calculated for azinphos-methyl. An SI ratio of ≥ 0.1 indicates that skin absorption may significantly contribute to the overall body burden of a substance [NIOSH 2009]; therefore, azinphos-methyl is not considered to be absorbed through the skin following dermal exposure. Additional information on the SI ratio and the variables used in its calculation are included in the appendix.

No estimated dermal lethal doses (LD_{Lo}) for humans were identified. A dermal LD₅₀ value (lethal dose in 50% of exposed animals) of 65.03 milligrams per kilogram body weight (mg/kg) was reported for a 20% azinphosmethyl formulation in mice [Sato 1959], and LD₅₀ values of 90 to 220 mg/kg were reported for rats [Gaines 1960; Pasquet et al. 1976]. Sato [1959] reported that the acute symptoms in percutaneous application of organic phosphorus, including azinphos-methyl, were similar to those in oral poisoning, including stillness, loss of coordination, dyspnea, muscle cramp, and fibrillation, indicating the potential of azinphos-methyl to cause acetylcholinesterase (AChE) inhibition. Skinner [1982a] reported a dermal LD₅₀ of 6000 mg/kg for mice; however, in this study the rodent's feet were immersed in azinphos-methyl. Because the reported acute dermal LD₅₀ values for mice and rats are less than the critical dermal LD_{50} value of 200 mg/kg that identifies chemical substances with the potential for fatality following acute dermal exposure [NIOSH 2009], azinphos-methyl is considered potentially fatal following acute dermal exposure.

McCurdy [1994] used the urinary metabolite dimethylphosphorothioate (DMPT) as the most sensitive indicator of recent exposure, since it correlated with dermal and clothing

Organization	Carcinogenic designation	
NIOSH [2005]	No designation	
NTP [2014]	No designation	
US EPA [2013]	No designation	
European Parliament [2008]	No GHS designation	
IARC [2012]	No designation	
ACGIH [2014]	A4: Not classifiable as a human carcinogen	

Table 2. Summary of the carcinogenic designations for azinphos-methylby numerous governmental and nongovernmental organizations

ACGIH = American Conference of Governmental Industrial Hygienists; GHS = Globally Harmonized System of Classification and Labelling; IARC = International Agency for Research on Cancer; NIOSH = National Institute for Occupational Safety and Health; NTP = National Toxicology Program; US EPA = United States Environmental Protection Agency.

levels, in addition to erythrocyte acetylcholinesterase (RBC-AChE) levels among 20 northern California peach harvesters. McCurdy [1994] reported that RBC-AChE levels decreased 7% over the initial 3-day period post-application of azinphos-methyl, and the levels continued to decrease up to 19% over the 6-week season. Quinby et al. [1958] described a pilot who spilled azinphos-methyl on his hands and washed them within 3 minutes. Following the azinphos-methyl spill, the pilot experienced headache, chest tightness, abdominal cramps, nausea, vomiting, weakness, and an excess in saliva [Quinby et al. 1958]. However, the pilot also had been dermally exposed to azinphos-methyl in the previous 10 days while loading methyl parathion. Symptoms were improved following treatment with atropine [Quinby et al. 1958].

In animals, ED_{50} values (levels of a compound that caused depression in 50%) for response of blood cholinesterase inhibition in mice exposed to foliar residue of azinphos-methyl (that is, the amount of azinphos-methyl that might be available shortly after application) were studied [Skinner and Kilgore 1982b]. In this study, mice were exposed to foliar doses of 5.4, 7.6, or 16.9 µg/cm² of dislodgeable active ingredient (corresponding to 0.135, 0.19, and 0.423 mg/kg-day) for 10 hours per day for 6 days, but there were no measurable responses in the mice at maximal foliar concentrations. The lack of effects on cholinesterase in this study may be attributed to the low dose levels used.

No standard toxicity or specialty studies were identified that evaluated biological system/function-specific effects (including reproductive/developmental toxicity or immunotoxicity) following dermal exposure to azinphos-methyl. No studies were identified that evaluated the potential of azinphos-methyl to be a carcinogen following dermal exposure. Table 2 summarizes carcinogenic designations for azinphos-methyl by multiple governmental and nongovernmental organizations.

Although the mathematical model indicates that azinphos-methyl is not absorbed by the skin after dermal exposure, sufficient toxicokinetic data from humans [Feldman and Maibach 1974; Wester and Maibach 1985; Franklin et al. 1989; McCurdy et al. 1994] and animals [Thongsinthusack 1999; Franklin et al. 1989] demonstrate that azinphos-methyl can be absorbed through the skin and is systemically available. Acute dermal toxicity data [Gains 1960; Pasquet et al. 1976; Sato 1959]^{*} and a case report [Quinby et al. 1958] indicate that azinphos-methyl has potential to be fatal at low doses following

^{*}References in **bold** text indicate studies that serve as the basis of the SK assignments.

exposure. Although adequate prolonged, repeated-dose dermal toxicity studies were not identified, azinphos-methyl acts via inhibition of AChE as its primary mode of action for inducing systemic toxicity [Sheets 1994]. Therefore, on the basis of the data for this assessment, azinphos-methyl is assigned the SK: SYS(FATAL) notation.

3 Direct Effects on Skin (SK: DIR)

No human or animal *in vivo* studies for corrosivity of azinphos-methyl, *in vitro* tests for corrosivity using human or animal skin models, or *in vitro* tests of skin integrity using cadaver skin were identified. No case reports or standard skin irritation tests in animals were identified that evaluated the potential of azinphos-methyl to cause direct skin effects. The structure-activity relationship model, Deductive Estimation of Risk from Existing Knowledge (*DEREK*) for Windows, predicted azinphos-methyl to be negative for skin irritation.

Therefore, on the basis of the data for this assessment, azinphos-methyl is not assigned the SK: DIR (IRR) notation.

4 Immune-mediated Responses (SK: SEN)

Evidence of skin sensitization following dermal exposure to azinphos-methyl is limited. While no diagnostic tests evaluating skin sensitization in humans were identified, one predictive test (Buehler patch test) was conducted in guinea pigs [Bayer AG 1987]. A dermal application of the test compound at a concentration of 12.5% [Bayer AG 1987] induced sensitization in approximately 50% of the experimental animals when a 6% active ingredient concentration was used (1st challenge), but when one-tenth of the concentration (0.6%) was used (2nd challenge) it failed to elicit any relevant skin reactions. Bayer AG [1987] concluded that the test compound had skin-sensitizing properties that were elicited only after application of relatively high concentrations. No other predictive tests were identified that evaluated the potential of azinphos-methyl to cause skin sensitization in animals. The structure-activity relationship model, *DEREK* for Windows, predicted azinphos-methyl to be positive for skin sensitization, indicating that azinphos-methyl has structural alerts for skin sensitization.

Although no diagnostic tests in humans or human case reports were identified that evaluated the potential for azinphos-methyl to be a skin sensitizer, one study using a standardized protocol, the Buehler patch test, indicated that azinphos-methyl is a sensitizer in guinea pigs [**Bayer AG 1987**]. Therefore, on the basis of the data for this assessment, azinphos-methyl is assigned the SK: SEN notation.

5 Summary

There is sufficient data from toxicokinetic studies in humans [Feldman and Maibach 1974; Wester et al. 1985; Franklin et al. 1989; McCurdy et al. 1994] and animals [Franklin et al. 1989; Thongsinthusack 1999] to demonstrate that azinphos-methyl can be absorbed through the skin and is systemically available. Acute dermal toxicity data from animals [Gains 1960; Sato 1959; Pasquet et al. 1976] and a case report [Quinby et al. 1958] indicate that azinphos-methyl can be fatal following exposure at low doses. No prolonged, repeated-dose dermal toxicity studies were identified, but azinphos-methyl inhibits AChE in the central and peripheral nervous systems, as is observed in oral toxicity studies in rats [Sheets 1994]. No case reports or standard skin irritation tests in animals were identified for determining the potential of azinphos-methyl to cause direct skin effects. No diagnostic tests in humans or case reports of sensitization were identified, but a well-conducted Buehler patch test on guinea pigs indicates that azinphos-methyl has the potential to cause skin sensitization [Bayer AG 1987]. Therefore, on the basis of these assessments,

Table 3. Summary of previous skin hazard designations for azinphos-methyl

Organization	Skin hazard designation	
NIOSH [2005]	[skin]: Potential for dermal absorption. Prevent skin contact.	
OSHA [2014]*	[skin]: Potential for dermal absorption. Prevent skin contact.	
ACGIH [2014]	[skin]: Based on the relatively low doses applied to rabbit skin that produced lethality and the reports of cholinergic inhibition in agricultural workers dermally exposed. DSEN: based on positive results of maximization tests and patch testing in animals	

ACGIH = American Conference of Governmental Industrial Hygienists; NIOSH = National Institute for Occupational Safety and Health; OSHA = Occupational Safety and Health Administration. *Date accessed.

azinphos-methyl is assigned a composite skin notation of SK: SYS (FATAL)-SEN.

Table 3 summarizes the skin hazard designations for azinphos-methyl previously issued by NIOSH and other organizations. The equivalent dermal designations for azinphos-methyl, according to the Globally Harmonized System (GHS) for the Classification and Labelling of Chemicals, are Acute Toxicity Category 3 (Hazard statement: Toxic in contact with the skin) and Skin Sensitization Category 1 (Hazard statement: May cause an allergic skin reaction) [European Parliament 2008].

References

Note: Asterisks (*) denote sources cited in text; daggers (†) denote additional resources.

- *ACGIH [2002]. Azinphos-methyl. In: Documentation of threshold limit values and biological exposure indices, 7th ed., vol. 1. Cincinnati, OH: American Conference of Governmental Industrial Hygienists.
- *Bayer AG [1987]. Study of skin sensitization effect on guinea pigs (Buehler patch test). By Heimann KG. Wuppertal, Germany: Bayer AG, Report #98565. EPA MRID #410644-01.
- [†]Carrier G, Brunet RC [1999]. A toxicokinetic model to assess the risk of azinphosmethyl exposure in humans through measures of urinary elimination of alkylphosphates. Toxicol Sci 47:23–32.

- *European Parliament, Council of the European Union [2008]. Regulation (EC) No 1272/2008 of the European Parliament and of the Council of 16 December 2008 on classification, labeling and packaging of substances and mixtures, amending and repealing Directives 67/548/EEC and 1999/45/EC, and amending Regulation (EC) No 1907/2006. OJEU, Off J Eur Union L353:1–1355, http://eurex.europa.eu/LexUriServ/LexUriServ. do?uri=OJ:L:2008:353:0001:1355:EN:PDF.
- *Feldman RJ, Maibach HI [1974]. Percutaneous penetration of some pesticides and herbicides in man. Toxicol Appl Pharmacol 28:126–132.
- [†]Franklin CA, Fenske RA, Greenhalgh R, Mathieu L, Denley HV, Leffingwell JT, Spear RC [1981]. Correlation of urinary pesticide metabolite excretion with estimated dermal contact in the course of occupational exposure to guthion. J Toxicol Environ Health *7*:715–731.
- [†]Franklin CA [1984]. Estimation of dermal exposure to pesticides and its use in risk assessment. Can J Physiol Pharmacol *62*:1037–1039.
- [†]Franklin CA [1985]. Occupational exposure to pesticides and its role in risk assessment procedures used in Canada. In: Honeycutt RC, Zweig G, Ragsdale NN, eds. Dermal exposure related to pesticide use: discussion of risk assessment. Washington, DC: American Chemical Society, pp. 429–444.
- *Franklin CA, Somers DA, Chu I [1989]. Use of percutaneous absorption data in risk assessment. J Am Coll Toxicol 8:815–827.
- *Gaines TB [1960]. The toxicity of pesticides to rats. Toxicol Appl Pharmacol *2*:88–99.

- *HSDB [2009]. Azinphos-methyl. In: HSDB (Hazardous Substances Data Bank), http://toxnet. nlm.nih.gov/cgi-bin/sis/htmlgen?HSDB.
- *IARC [2012]. Agents reviewed by the IARC monographs. In: International Agency for Research on Cancer (IARC) monographs on the evaluation of carcinogenic risks to humans, http://monographs.iarc.fr/ENG/Monographs/ PDFs/index.php.
- [†]Knaak JB, Schlocker P, Ackerman CR, Seiber JN [1980]. Reentry research: establishment of safe pesticide levels on foliage. Bull Environ Contam Toxicol *24*(5):796–804.
- *McCurdy SA, Hansen MA, Weisskopf CP, Lopez RL, Schneider F, Sanborn JR, Krieger RI, Wilson BW, Goldsmith DF, Schenker MB [1994]. Assessment of azinphos-methyl exposure in California peach harvest workers. Arch Environ Health 49:289–296.
- [†]Milby TH [1971]. Prevention and management of organophosphate poisoning. JAMA *216*:2131–2133.
- *Miles Inc. [1992]. Dermal absorption of azinphosmethyl by rats from a Guthion 35% wettable powder formulation using ¹⁴C-azinphos-methyl. Stillwell, KS: Miles Inc., Study #90-722-GE. EPA MRID #424527-01C.
- *NIOSH [2005]. Azinphos-methyl. In: NIOSH pocket guide to chemical hazards. Cincinnati, OH: U.S. Department of Health and Human Services, Centers for Disease Control and Prevention, National Institute for Occupational Safety and Health, DHHS (NIOSH) Publication No. 2005-149, http://www.cdc.gov/niosh/npg/ npgd0681.html.
- *NIOSH [2009]. Current intelligence bulletin 61: a strategy for assigning new NIOSH skin notations. Cincinnati, OH: U.S. Department of Health and Human Services, Centers for Disease Control and Prevention, National Institute for Occupational Safety and Health, DHHS (NIOSH) Publication No. 2009-147, http://www.cdc.gov/ niosh/docs/2009-147/pdfs/2009-147.pdf.
- *NTP [2014]. Report on carcinogens, 13th ed. Research Triangle Park, NC: U.S. Department of Health and Human Services, Public Health Service, National Toxicology Program, http://ntp. niehs.nih.gov/pubhealth/roc/roc13/index.html.

- *OSHA [ND]. Azinphos-methyl. In: OSHA occupational chemical database, http://www.osha.gov/ chemicaldata/chemResult.html?recNo=722.
- *Pasquet J, Mazuret A, Fournel J, Koenig FH [1976]. Acute oral and percutaneous toxicity of phosalone in the rat in comparison with azinphosmethyl and parathion. Toxicol Appl Pharmacol 37:85–92.
- *Quinby GE, Walker KC, Durham WF [1958]. Public health hazards involved in the use of organic phosphorus insecticides in cotton culture in the delta area of Mississippi. J Econ Entomol 51(6):831–838.
- *Sato I [1959]. Studies on organic phosphorus gusathion and phosdrin. 1. The toxicity of gusathion and phosdrin. Kumamoto Medical J *12*(4):312–317.
- *Sheets L [1994]. An acute oral neurotoxicity screening study with technical grade azinphosmethyl (GUTHION7). In: Summary of toxicology data: azinphos-methyl. Sacramento: California Environmental Protection Agency, Department of Pesticide Regulation, Medical Toxicology Branch, pp. 12.
- *Skinner CS, Kilgore WW [1982a]. Acute dermal toxicities of various organophosphate insecticides in mice. J Toxicol Environ Health *9*:491–497.
- *Skinner CS, Kilgore WW [1982b]. Application of a dermal self-exposure model to worker reentry. J Toxicol Environ Health 9:461–481.
- *Thongsinthusak T, Ross JH, Saiz SG, Krieger RI [1999]. Estimation of dermal absorption using the exponential saturation model. Reg Tox Pharmacol *29*:37–43.
- [†]US EPA [1998]. The HED chapter of the Reregistration Eligibility Decision Document (RED) for azinphos-methyl. Memorandum from Catherine Eiden, Health Effects Division, to Tom Moriarity, Special Review and Reregistration Division, Office of Prevention, Pesticides and Toxic Substances, US EPA, Washington, DC.
- *US EPA [2013]. Azinphos-methyl. In: Integrated risk information system, http://www.epa.gov/iris/.
- *Wester RC, Maibach HI [1985]. In vivo percutaneous absorption and decontamination of pesticides in humans. J Toxicol Environ Health 16(1):25–38.

Appendix: Calculation of the SI Ratio for Azinphos-methyl

This appendix presents an overview of the SI ratio and a summary of the calculation of the SI ratio for azinphos-methyl. Although the SI ratio is considered in the determination of a substance's hazard potential following skin contact, it is intended to serve only as supportive data during the assignment of the NIOSH SK. An in-depth discussion on the rationale and calculation of the SI ratio can be found in Appendix B of the *Current Intelligence Bulletin (CIB) 61: A Strategy for Assigning New NIOSH Skin Notations* [NIOSH 2009].

Overview

The SI ratio is a predictive algorithm for estimating and evaluating the health hazards of skin exposure to substances. The algorithm is designed to evaluate the potential for a substance to penetrate the skin and induce systemic toxicity [NIOSH 2009]. The goals for incorporating this algorithm into the proposed strategy for assigning SYS notation are as follows:

- Provide an alternative method to evaluate substances for which no clinical reports or animal toxicity studies exist or for which empirical data are insufficient to determine systemic effects.
- 2. Use the algorithm evaluation results to determine whether a substance poses a skin absorption hazard and should be labeled with the SYS notation.

The algorithm evaluation includes three steps:

- 1. determining a skin permeation coefficient (k_p) for the substance of interest,
- 2. estimating substance uptake by the skin and respiratory absorption routes, and
- 3. evaluating whether the substance poses a skin exposure hazard.

The algorithm is flexible in the data requirement and can operate entirely on the basis of the physicochemical properties of a substance and the relevant exposure parameters. Thus, the algorithm is independent of the need for biologic data. Alternatively, it can function with both the physicochemical properties and the experimentally determined permeation coefficient when such data are available and appropriate for use.

The first step in the evaluation is to determine the k_p for the substance to describe its transdermal penetration rate [NIOSH 2009]. The k_p , which represents the overall diffusion of the substance through the stratum corneum and into the blood capillaries of the dermis, is estimated from the compound's molecular weight (*MW*) and base-10 logarithm of its octanol–water partition coefficient (log K_{ow}). In this example, k_p is determined for a substance with use of Equation 1. A self-consistent set of units must be used, such as centimeters per hour (cm/hr), outlined in Table A1. Other model-based estimates of k_p may also be used [NIOSH 2009].

Equation 1: Calculation of Skin Permeation Coefficient (k_p)

$$k_p = \frac{1}{\frac{1}{k_{psc} + k_{pol}} + \frac{1}{k_q}}$$

where k_{psc} is the permeation coefficient in the lipid fraction of the stratum corneum, k_{pol} is the coefficient in the protein fraction of the stratum corneum, and k_{aq} is the coefficient in the watery epidermal layer. These components are individually estimated by

$$\log k_{psc} = -1.326 + 0.6097 \times \log k_{ow} - 0.1786 \times MW^{0.5}$$

$$k_{pol} = 0.0001519 \times MW^{-0.5}$$

$$k_{aq} = 2.5 \times MW^{-0.5}$$

The second step is to calculate the biologic mass uptake of the substance from skin absorption (skin dose) and inhalation (inhalation dose) during the same period of exposure. The skin dose is calculated as a mathematical product of the k_p , the water solubility (S_w) of the substance, the exposed skin surface area,

and the duration of exposure. Its units are milligrams (mg). Assume that the skin exposure continues for 8 hours to unprotected skin on the palms of both hands (a surface area of 360 squared centimeters $[cm^2]$).

Equation 2: Determination of Skin Dose

Skin dose = $k_p \times S_w \times \text{Exposed skin surface}$ area × Exposure time = $k_p (\text{cm/hour}) \times S_w (\text{mg/cm}^3) \times 360 \text{ cm}^2 \times 8 \text{ hours}$

The inhalation dose (in mg) is derived on the basis of the occupational exposure limit (OEL) of the substance—if the OEL is developed to prevent the occurrence of systemic effects rather than sensory/irritant effects or direct effects on the respiratory tract. Assume a continuous exposure of 8 hours, an inhalation volume of 10 cubic meters (m³) inhaled air in 8 hours, and a factor of 75% for retention of the airborne substance in the lungs during respiration (retention factor, or RF).

Equation 3: Determination of Inhalation Dose

Inhalation dose = OEL × Inhalation volume × RF = OEL (mg/m³) × 10 m³ × 0.75

The final step is to compare the calculated skin and inhalation doses and to present the result as a ratio of skin dose to inhalation dose (the SI ratio). This ratio quantitatively indicates (1) the significance of dermal absorption as a route of occupational exposure to the substance and (2) the contribution of dermal uptake to systemic toxicity. If a substance has an SI ratio greater than or equal to 0.1, it is considered a skin absorption hazard.

Calculation

Table A1 summarizes the data applied in the previously described equations to determine the SI ratio for azinphos-methyl. The calculated SI ratio was 0.059. On the basis of these results, azinphos-methyl is not predicted to represent a skin absorption hazard.

Appendix References

- NIOSH [2005]. NIOSH pocket guide to chemical hazards. Cincinnati, OH: U.S. Department of Health and Human Services, Centers for Disease Control and Prevention, National Institute for Occupational Safety and Health, DHHS (NIOSH) Publication No. 2005–149, http:// www.cdc.gov/niosh/npg/npgd0681.html.
- NIOSH [2009]. Current intelligence bulletin 61: a strategy for assigning new NIOSH skin notations. Cincinnati, OH: U.S. Department of Health and Human Services, Centers for Disease Control and Prevention, National Institute for Occupational Safety and Health, DHHS (NIOSH) Publication No. 2009-147, http://www.cdc.gov/ niosh/docs/2009-147/pdfs/2009-147.pdf.
- SRC [2009]. Interactive PhysProp database demo. North Syracuse, NY: SRC, Inc., http:// www.srcinc.com/what-we-do/databaseforms. aspx?id=386.

Variables used in calculation	Units	Value
Skin permeation coefficient		
Permeation coefficient of stratum corneum lipid path $(k_{_{psc}})$	cm/hr	0.0015
Permeation coefficient of the protein fraction of the stratum corneum (k_{pol})	cm/hr	8.527×10^{-6}
Permeation coefficient of the watery epidermal layer (k_{aq})	cm/hr	0.1403
Molecular weight (MW)*	amu	317.33
Base-10 logarithm of its octanol–water partition coefficient $(Log K_{ow})^*$	None	2.75
Calculated skin permeation coefficient (k_p)	cm/hr	0.0015
Skin dose		
Water solubility $(S_{w})^{*}$	mg/cm ³	0.0209
Calculated skin permeation coefficient (k_p)	cm/hr	0.0015
Estimated skin surface area (palms of hands)	cm^2	360
Exposure time	hr	8
Calculated skin dose	mg	0.0884
Inhalation dose		
Occupational exposure limit (OEL) [†]	mg/m ³	0.2
Inhalation volume	m ³	10
Retention factor (RF)	None	0.75
Inhalation dose	mg	1.5
Skin dose-to-inhalation dose (SI) ratio	None	0.059

Table A1. Summary of data used to calculate the SI ratio for azinphos-methyl

^{*}Variables identified from SRC [ND]. [†]The OEL used in calculation of the SI ratio for azinphos-methyl was the NIOSH recommended exposure limit (REL) [NIOSH 2005].



Delivering on the Nation's promise: safety and health at work for all people through research and prevention

To receive NIOSH documents or more information about occupational safety and health topics, contact NIOSH at

1-800-CDC-INFO (1-800-232-4636) TTY: 1-888-232-6348 CDC-INFO: www.cdc.gov/info

or visit the NIOSH website at **www.cdc.gov/niosh**. For a monthly update on news at NIOSH, subscribe to *NIOSH eNews* by visiting **www.cdc.gov/niosh/eNews**.

DHHS (NIOSH) Publication No. 2015-235

SAFER • HEALTHIER • PEOPLE[™]