National Institute for Public Health and the Environment

Nanotechnology

What about safety How do we determine risk?

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Expected increase in use of nanomaterials

- Possible applications
 - Material science
 - Strenght of materials (especailly CNT)
 - Consumer products
 - Cosmetics (sunscreens)
 - Fabrics
 - •
 - Food/feed and food technology
 - Packaging
 - Vitamins, supplements

- Medical applications

- Pharmaceutical (drug delivery, enhanced activity)
- Medical technology







Why do we use nanomaterials? Decrease in size results in increase in surface area

All: 1 x 1 cm



size	number	Total Surface area
1 cm	1	6 cm ²
1 mm	1000	60 cm ²
1 µm	1 x 10 ¹²	6.000cm ²
1 nm	1 x 10 ²¹	60.000.000 cm ² (600km ²)



Increase in surface area >> increase in surface activity, but also increase in possible contact with cells and tissues

Increase in consumer products with nanoclaim



Number of total products listed, by date of inventory update, with regression analysis. **August 2009** Nanotechnology Consumer Products Inventory, Woodrow Wilson International Center for Scholars, Washington, USA



Most commonly used nanomaterials in consumer products



Nanotechnology Consumer Products Inventory, August 2009,

Woodrow Wilson International Center for Scholars, Washington, USA

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Why are we concerned?



Nanomaterials (nanoparticles) can have sizes similar to structures at subcellular level



and (theoretically) can reach and interact with such structures.

Safety evaluation

- Safety evaluation
 - Identification of substance
 - Hazard characterization
 - Hazard identification
 - Dose response effect (no effect level)
 - Exposure assessment/ treatment dose
- What is risk?
 - Risk, combination of likelyhood of occurrence of harm to health and the severity of that harm
 - Margin of safety (no effect level / effective treatment dose)
 - (No exposure >>>> No risk)
- Residual risk
 - Risk benefit analysis
- Risk is a possibility, not an absolute value !



How do you determine risk?

• Hazard, a potential source for harm to health

• In vitro studies

- Indicate possibility for cell damage
- Mainly used for to screening and mechanistic studies
- Relevance for risk assessment is limited

In vivo studies

- Overall "black box"
- Indications for possible organ specific toxic effects and no effect levels
- Extrapolation problems (inter- and intraspecies variation)
 - Uncertainty factors
- More relevant for risk assessment than in vitro



Why is safety evaluation and risk assessment of nanomaterials so difficult?

- Diversity of nanomaterials (inorganic, organic, coated,...)
- Solubility, agglomeration/aggregation (stability, size distribution)
- Matrix (interactions, effects on size, digestion)
- Quality of available nanomaterials (polydispersity, purity, concentration)
- Test protocols (dispersion, reproducibility, comparability)
- Choice & preparation of test medium (concentration, solvents)

Key issue in testing and quality control

Detection and characterization of the nanomaterials



For safety evaluation identification is essential

What do we want / need to know for nanoformulations / carriers?

- Chemical composition
- Size
- Size distribution
- Agglomeration / aggregation
- Crystallinity
- Coatings

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- Surface charge
- Specific physicochemical characteristics
 - why is this specific nanomaterial used?
 - mainly important for consumer products
- How is the nanoparticle defined?



How is a nanoparticle/nanomatrial defined? What do we mean by size?

Particle type	Nominal	TEM*	AFM*	FCS [^]	NTA*	DLS	FIFFF^
TiO ₂ & FA 1mg/L	5	16.1 +/-6.4	3.7 +/-2.1	6.5 +/-2.8	164 +/-32 (30mg/L)	1230 +/-430 (30mg/L)	3.7 (100mg/L)
ZnO & FA 1mg/L	20	12.2 +/-4.5	25.7 +/-8.5	28.5 +/-10.5	130 +/-50 (100mg/L)	870 +/-680 (30mg/L)	228.3 (100mg/L)
QDs 1.92 ug/L	6-10	6.5 +/-1.9	5.9 +/-3.4	81.8 +/-4.9	213 +/-17	234 +/-35	41.5

*number average ^weight average `z average

Domingos et al. 2009

Understanding and correlation of size measurement techniques is essential

TEM, transmission electron microscopy; AFM, atomic force microscopy; DLS, dynamic light scattering; FCS, fluorescence correlation spectroscopy; NTA, nanoparticle tracking analysis; FIFFF, flow field flow fractionation

Courtesy of Karin Tiede, FERA, York, UK

Existing problems in safety evaluation of nanomaterials/nanoparticles

- Identification of nanomaterial is essential
 - Various crystal forms of same material may exist
 - Titanium dioxide; rutile, anatase, brookite crystals
 - Presence of coating on nanomaterials
 - Each different coating can be considered a new formulation / material



Particle size and agglomeration Example of nominal and actual size of silica nanoparticles





Transmission electron microscopy images of silica nanoparticles deposited from deionized water.

Park et al., Toxicol Appl Pharmacol, 2009

Safety evaluation

- Problems with testing
 - Problems with identification/characterization
 - Problems with dispersion for testing in vitro and/or in vivo
 - Protein adherence, effect of protein corona
 - We now it exists, but we do not know its biological effects





Nanoparticles do not exist as single particle entity, they adsorbe things, e.g. proteins

What do we know

- Protein corona is important for biological interactions and cellular recognition
- Corona is not static, proteins get on and off

What do we not know

- Dependence on nanomaterial?
- Dependence on size?
- Dependence on ...?

Implications for interpretation of testing



EU FP6 project NanoInteract, courtesy of Prof Kenneth Dawson, UCD, Dublin, Ireland



What is the dose metric for particle toxicity?



Figure 4. Percentage of neutrophils in lung lavage of rats (A,B) and mice (C,D) as indicators of inflammation 24 hr after intratracheal instillation of different mass doses of 20-nm and 250-nm TiO₂ particles in rats and mice. (A, C) The steeper dose response of nanosized TiO₂ is obvious when the dose is expressed as mass. (B,D) The same dose response relationship as in (A,C) but with dose expressed as particle surface area; this indicates that particle surface area seems to be a more appropriate dosemetric for comparing effects of different-sized particles, provided they are of the same chemical structure (anatase TiO₂ in this case). Data show mean \pm SD.

Surface area was demonstrated to be a better descriptor for local effects in the lung after inhalation exposure. What about other routes of exposure (oral, dermal, intravenous)?

Reference of the second second

Oberdörster et al., Environ Health Perspect 113, 823, 2005

Is dose metric of mass applicable?

- Dose metrics per kg body weight
 - Mass (milligram, gram)
 - Number of particles, as effects may be determined by the particle characteristics
 - surface area, as demonstrated for inhalation toxicity of TiO₂
 -something else?



Pharmacological availability Effect of nanoparticle size on tissue distribution



Gold distribution at 24 h after iv injection in rats as percentage of injected dose (100 µg per animal)

Particle size	10 nm	50 nm	100 nm	250 nm
Number concentration	5.7x10 ¹²	4.5x10 ¹⁰	5.6x10 ⁹	3.6x10 ⁸
Surface area	1.6x10 ¹⁵	3.2x10 ¹⁴	1.7x10 ¹⁴	6.9x10 ¹³
Mass injected	85 µg	106 µg	98 µg	120 µg

De Jong et al., Biomaterials, 2008

Pharmacological availability Effcets of size on toxicokinetics

Table 6

The average number of gold particles distributed to the various organs (estimated)

Tissue	10 nm, Number of particles (number/g organ)	50 nm, Number of particles (number/g organ)	100 nm, Number of particles (number/g organ)	250 nm, Number of particles (number/g organ)
Blood	1.9E + 12	1.2E + 10	2.2E + 09	4.6E + 07
Liver	2.4E + 12	8.2E + 09	2.3E + 09	9.5E + 07
Spleen	1.1E + 11	5.2E + 08	7.3E + 07	3.8E + 06
Lungs	1.4E + 10	9.0E + 08	2.2E + 06	1.2E + 05
Kidneys	4.9E + 10	6.5E + 07	3.8E + 06	1.6E + 05
Testis	1.1E + 10	—	-	4.2E + 04
Thymus	9.1E+09	_	_	6.4E + 04
Heart	9.9E + 09	2.2E + 07	4.3E + 05	_
Brain	1.6E + 10	-	-	-
	N=7	N = 2	N = 4	N = 5

Although only a few % of the administered dose a considerable amount may be present in organs in terms of particle numbers. What about local accumulation and chronic effects?

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De Jong et al., Biomaterials, 2008

Pharmacological availability Effects of PEG coating of gold nanorods on toxicokinetics



Lankveld et al., Submitted, 2010

Effects of coating of gold nanorods on toxicokinetics





Lankveld et al., Submitted, 2010

Effects of coating of gold nanorods on toxicokinetics

	DAY 1		DAY 6	
	PEG-AuNR770	CTAB-AuNR770	PEG-AuNR770	CTAB-AuNR770
Liver	320 ± 105	2339 ± 390	978 ± 145	2059 ± 299
Spleen	3477 ± 153	1643 ± 236	6644 ± 1973	1132 ± 204
Kidney	183 ± 32	13 ± 1	176 ± 29	5 ± 3
Lung	264 ± 22	239 ± 102	106 ± 17	172 ± 99
Heart	192 ± 5	3 ± 1	104 ± 13	4 ± 3
Thymus	66 ± 19	2 ± 0	66 ± 26	2 ± 0
Brain	27 ± 3	5 ± 6	2 ± 0	2 ± 1
Testes	33 ± 10	2 ± 0	23 ± 6	2 ± 0
Blood	1007 ± 76	3 ± 0	3 ± 1	3 ± 0

Data are presented as gold concentration in ng per gram tissue. Gold nanorods were administered intravenously at day 0. Number of animals (samples) n=3 for day 1 and n=6 for day 6. Tissue samples were prepared by organ digestion before ICP-MS measurement.

For toxicity local organ dose is of importance. For PEGylated gold nanorods now SPLEEN is target organ with highest exposure dose. What about local accumulation and chronic effects?



Lankveld et al., Submitted, 2010

Effect of shape on biological responses Issue of nanofibres/nanotubes CNT versus asbestos

nature nanotechnology | VOL 3 | JULY 2008 | 423

Carbon nanotubes introduced into the abdominal cavity of mice show asbestoslike pathogenicity in a pilot study

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CRAIG A. POLAND¹, RODGER DUFFIN¹, IAN KINLOCH², ANDREW MAYNARD³, WILLIAM A. H. WALLACE¹, ANTHONY SEATON⁴, VICKI STONE⁵, SIMON BROWN¹, WILLIAM MACNEE¹ AND KEN DONALDSON^{1*}

The Journal of Toxicological Sciences (J. Toxicol. Sci.) Vol.33, No.1, 105-116, 2008

Original Article

Induction of mesothelioma in p53+/- mouse by intraperitoneal application of multi-wall carbon nanotube

Atsuya Takagi¹, Akihiko Hirose², Tetsuji Nishimura³, Nobutaka Fukumori⁴, Akio Ogata⁴, Norio Ohashi⁴, Satoshi Kitajima¹ and Jun Kanno¹ Sakamoto Y, Nakae D, Fukumori N, Tayama K, Maekawa A, Imai K, Hirose A, Nishimura T, Ohashi N, Ogata A.

Induction of mesothelioma by a single intrascrotal administration of multi-wall carbon nanotube in intact male Fisher 344 rats.

The Journal of Toxicological Sciences, 34, 65-76, 2009

TOXICOLOGICAL SCIENCES 110(2), 442–448 (2009) doi:10.1093/toxsci/kfp100 Advance Access publication May 8, 2009

Absence of Carcinogenic Response to Multiwall Carbon Nanotubes in a 2-Year Bioassay in the Peritoneal Cavity of the Rat

Julie Muller,* Monique Delos,† Nadtha Panin,* Virginie Rabolli,* François Huaux,* and Dominique Lison*^{,1}



Effect of shape on biological responses

• MWCNT induce a granulomatous inflammation in vivo similar to asbestos fibres





Rational Institute for Public Health and the Environment



Poland et al 2008 MWCNT induce chronic inflammation





FIG. 1. Transmission electron microscopy images of the carbon nanotubes. MWCNT +, unheated multiwall carbon nanotubes and MWCNT-, multiwalled carbon nanotubes heated at 2400°C under argon. The images were obtained on a Leo 922 (Zeiss), 200 kV.



Macrophage response to fibres Effect of shape CNT versus asbestos





Donaldson et al., Particle and Fibre Toxicology, 2010

Nanofibres, the MWCNT issue

There are different types of MWCNT "when a fibre has characteristics of brown/blue asbestos (rigid, non degradable, length >20 μm)

it behaves like brown/blue asbestos" (Poland et al., 2008, Donaldson et al., 2010)

Lesson is NOT MWCNT behave like asbestos but......when producing and using MWCNT or any fibre-like nanomaterial Check for these specific characteristics (rigidity, degradability, fibre length)

Perform proper safety evaluation to exclude this specific hazard associated with a certain types of fibres.

Including extensive characterization.



Where do we stand with nanotechnology?

- High expectations especially in nanomedicine
- Consumer products
 - Multitude of consumer products already available on the market
 - Some labeled, others not
- Various hazards (toxic effects) identified
 - Inhalation exposure most severe hazard and highest risk
- Exposure estimation remains a problem
- Little or no information on possible chronic effects
- Case by case approach for risk assessment advocated



Summary What do we know about toxicological risk assessment of nanomaterials?

• The particulate nature of nanomaterials influences the toxicokinetics

- ADME absorption, distribution, metabolism, excretion
- Dependent on size, shape, material, etc...
- Physico-chemical and toxicological properties of nanomaterials (and surfaces) different from bulk material – parameters?
 - What value is border/turning point for toxic behaviour?
- Not all nanomaterial formulations are toxic
 - Increase in surface activity does not automatically imply toxicity
- Many factors with varying effects



Continuing issues 2010

- Importance of characterization
 - Size determination and method
 - Example of various crystal forms of same material
 - Titanium dioxide; rutile, anatase, brookite crystals
- Problems with dispersion
- Toxicity of solvents and/or process residues
- Protein adherence, effect of protein corona
- Genotox issue, contradicting results reported
 - Can existing genotox assays be used?
- Dose metrics (mass, number of particles, surface area, ...)
 - Also for in vitro: is the dose the concentration (i.e. all particles present) in the liquid, or only the number of particles in contact with the cells?



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