NIOSH Skin Notation Profiles

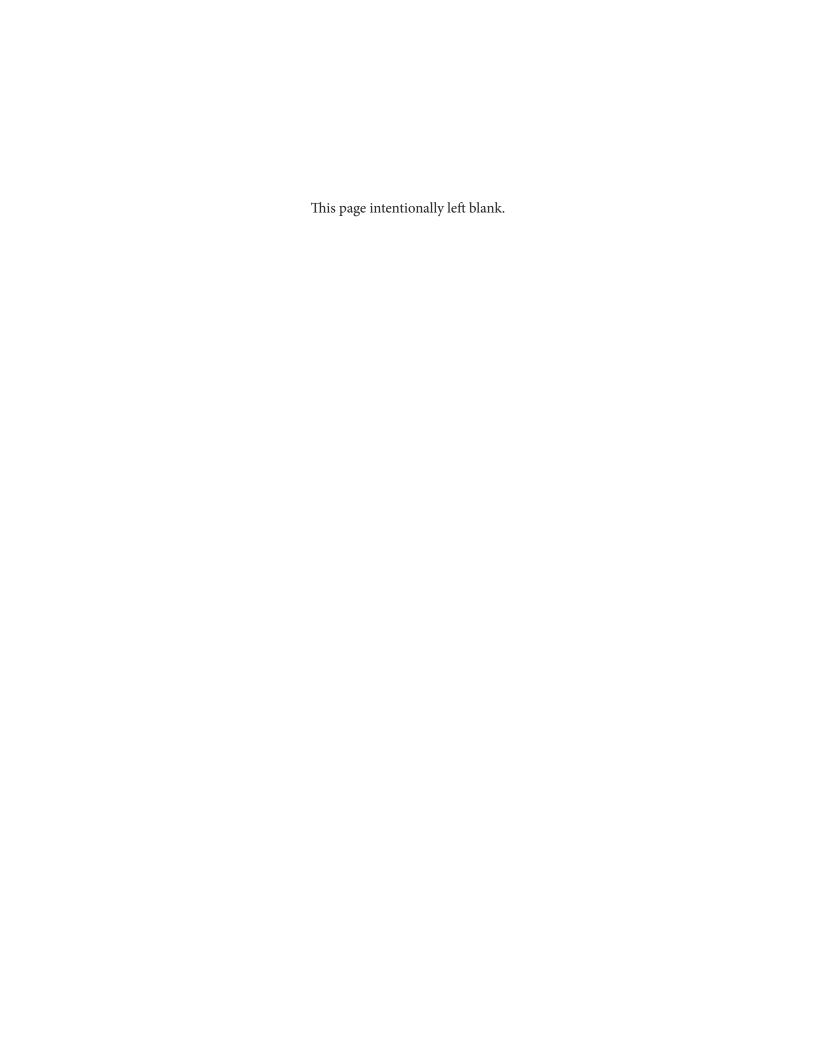
Dichlorvos



DEPARTMENT OF HEALTH AND HUMAN SERVICES

Centers for Disease Control and Prevention National Institute for Occupational Safety and Health





NIOSH Skin Notation (SK) Profile

Dichlorvos

[CAS No. 62-73-7]

Naomi L. Hudson and G. Scott Dotson

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 [2017]. NIOSH skin notation profile: Dichlorvos. 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. 2017-134

DHHS (NIOSH) Publication No. 2017-134

April 2017

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 (SKs) 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.

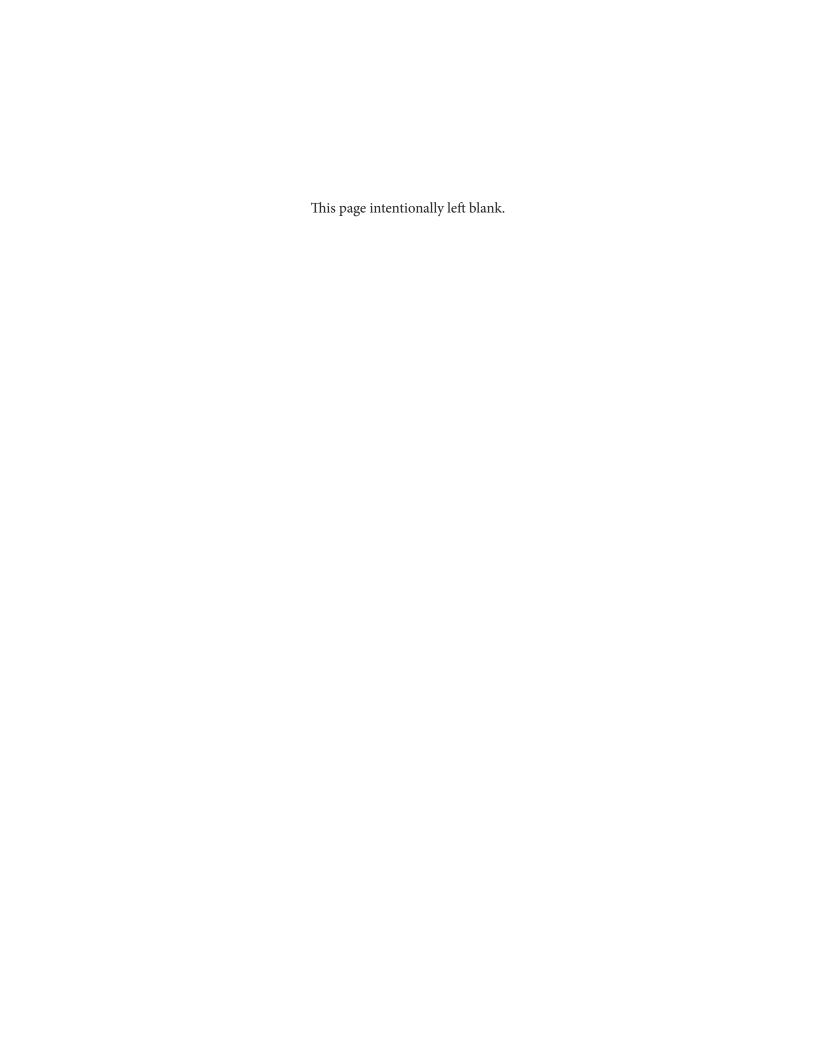
This *Skin Notation Profile* provides the SK assignments and supportive data for dichlorvos. In particular, this document evaluates and summarizes the literature describing the hazard potential of the substance and its assessment according to the scientific rationale and framework outlined in CIB 61. 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



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)	1
3 Direct Effects on Skin (SK: DIR)	4
4 Immune-mediated Responses (SK: SEN)	5
5 Summary	5
References	6
Appendix: Calculation of the SI Ratio for Dichlorvos	9
Overview	9
Calculation	10
Appendix References	10

Abbreviations

ACGIH American Conference of Governmental Industrial Hygienists

ATSDR Agency for Toxic Substances and Disease Registry

CIB Current Intelligence Bulletin

ChE cholinesterase

cm² square centimeter(s)
cm/hour centimeter(s) per hour

DEREK Deductive Estimation of Risk from Existing Knowledge

DIR skin notation indicating the potential for direct effects to the skin following

contact with a chemical

EC European Commission

GHS Globally Harmonized System for Classification and Labelling of Chemicals

GPMT guinea pig maximization test

IARC International Agency for Research on Cancer

(IRR) subnotation of SK: DIR indicating the potential for a chemical to be a skin

irritant 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

LD₁₀ dermal lethal dose

LOAEL lowest-observed-adverse-effect level

 $\log K_{\rm ow}$ base-10 logarithm of a substance's octanol-water partition

M molarity

m³ cubic meter(s) mg milligram(s)

mg/cm³ milligram(s) per cubic centimeter
mg/kg milligram(s) per kilogram body weight

mg/min milligram(s) per minute

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

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

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). Naomi Hudson, Dr.P.H., M.P.H., was the project officer for this document, assisted in great part by G. Scott Dotson, Ph.D., Todd Neimeier, M.Sc., and Sudha Pandalai, M.D., Ph.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. Loren Tapp, M.D.

Education and Information Division

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

Health Effects Laboratory Division

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

National Personal Protective Technology Laboratory

Heinz Ahlers, 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:

Frank A. Barile, Ph.D., R.Ph., Full Professor, Pharmaceutical Sciences, St. John's University College of Pharmacy and Allied Health Professionals, Queens, NY

Larry Kenneth Lowry, Ph.D., Professor, Department of Occupational and Environmental Medicine, The University of Texas Health Science Center at Tyler, TX

Karin Pacheco, M.D., MSPH, Associate Professor, Division of Environmental and Occupational Health Sciences, National Jewish Medical and Research Center, Denver, CO

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: Dichlorvos

CAS No: 62-73-7

Molecular weight (MW): 221.0

Molecular formula:

 $(CH_3O)_2P(O)OCH=CCl_2$

Synonyms: 2,2-Dichlorovinyl dimethyl phosphate; Phosphoric acid, 2,2-dichloroethenyl dimethyl ester; 2,2 -Dichloroethenyl phosphoric acid dimethyl ester; 2,2 - Dichlorovinyl dimethyl phosphoric acid ester; DDVP

Structural formula:

Uses: Dichlorvos is used primarily as a broad-spectrum organophosphate pesticide [ATSDR 1997].

1.2 Purpose

This skin notation profile presents (1) a brief summary of epidemiological and toxicological data associated with skin contact with dichlorvos and (2) the rationale behind the hazard-specific skin notation (SK) assignment for dichlorvos. 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 dichlorvos. A literature search was conducted through April 2016 to identify information on dichlorvos, 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 dichlorvos. The criteria for the search strategy, evaluation, and selection of data are described in Appendix E in the aforementioned CIB 61 [NIOSH 2009].

1.3 Overview of SK Assignment

Dichlorvos is potentially capable of causing numerous adverse health effects following skin contact. A critical review of available data has resulted in the following SK assignment for dichlorvos: **SK: SYS-DIR (IRR)-SEN**. Table 1 provides an overview of the critical effects and data used to develop the SK assignment for dichlorvos.

2 Systemic Toxicity from Skin Exposure (SK: SYS)

Limited toxicokinetic data following dermal exposure to dichlorvos were identified. The authors of an animal study reported skin penetration of dichlorvos. Tos-Luty et al. [1994] applied 0.3%, 0.62%, and 1.5% of dichlorvos

Table 1. Summary of the SK assignment for dichlorvos

Skin notation	Critical effect	Available data	
SK: SYS	Inhibition of cholinesterase activity; neurotoxicity; histopathological changes in the liver, and may potentially be fatal	Sufficient animal data	
SK: DIR (IRR)	Skin irritation	Sufficient human and animal data	
SK: SEN	Skin allergy, photoallergy	Sufficient human and animal data	

in ethanol to the tails of rats for 4 hours. The highest penetration of dichlorvos in the rat tail skin (2.91% absorption) was at the lowest concentration (0.3%), and absorptions of 2.02% and 2.23% were reported for 0.62% and 1.5% concentrations of dicholorvos, respectively [Tos-Luty et al. 1994]. A more recent study, Moore et al. [2014] used dermatomed human breast skin mounted on PTFE flow-through diffusion cells that received an infinite dose of 1, 5, or 10 milligrams per square centimeter (mg/ cm²) or a finite dose of 5 micrograms per square centimeter (µg/cm²) of dichlorvos in three different vehicles: isopropanol, isopropyl myristate, and propylene glycol. The authors [Moore et al. 2014] reported that the greatest absorption was 75% at 24 hours (dichlorvos in isopropanol) for the infinite dose and 38.6% (dichlorvos in isopropanol) for the finite dose.

In another study, Moore et al. [2014b] used an *in vitro* model to investigate the dermal penetration of dichlorvos on clothed and unclothed skin. In this study, Moore et al. [2014b] reported a 10% dermal absorption of 5 µg/cm² dichlorvos in isopropanol where the skin was decontaminated 30 minutes after exposure. The majority of dichlorvos that was applied to clothed skin was retained within the clothing [Moore et al. 2014b]. The potential for significant dermal absorption is also indicated by cases of systemic effects, including neurotoxicity, resulting from cholinesterase (ChE) activity inhibition after a single episode of dermal exposure [Bisby and Simpson 1975; Mathias 1983] and cases of

ChE inhibition-associated symptoms following dermal exposures in animals [Durham et al. 1957; Gajewski and Katkiewicz 1981; Tos-Luty et al.1994].

The potential of dichlorvos 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 2.41 was calculated for dichlorvos. An SI ratio of ≥0.1 indicates that skin absorption may significantly contribute to the overall body burden of a substance [NIOSH 2009]; therefore, dichlorvos has the potential to be absorbed through the skin and to become available systemically following dermal exposure. Additional information on the SI ratio and the variables used in its calculation are included in the appendix.

No quantitative estimates of the lethal dermal dose (LD_{Lo}) in humans have been identified. In animals, dermal LD_{50} values (the dose resulting in 50% mortality in the exposed animals) were influenced by the purity of dichlorvos tested, the vehicle used, and condition of the skin. LD_{50} values for rats were reported to range from 75 milligrams per kilogram body weight (mg/

kg) to 107 mg/kg [Gaines 1969; Durham et al. 1957]. Gajewski and Katkiewicz [1981] reported an LD_{50} in a negative logarithm of 3.49 mols/kg in rats. Because the reported acute dermal LD_{50} values for experimental animals are all lower than the critical dermal LD_{50} value of 200 mg/kg body weight that identifies chemical substances with the potential for acute dermal toxicity that may be potentially fatal [NIOSH 2009], dichlorvos is considered systemically toxic and potentially fatal by the dermal route.

Dermal application of dichlorvos to several animal species, including the monkey and rat, over a few days, resulted in significant inhibition of brain, erythrocyte, or serum ChE activity [Durham et al. 1957; Moriearty et al. 1993]. Symptoms of neurotoxicity have been reported within 20 minutes in monkeys after single or repeated dermal exposure to doses of dichlorvos in xylene at doses as low as 50 mg/kg or in rats topically exposed to 75 mg/kg [Durham et al. 1957]. These studies indicate that dichlorvos is a potent ChE inhibitor, significantly reducing blood plasma, red blood cell and brain ChE following dermal exposure.

No repeat-dose dermal toxicity studies have been identified that quantified the dose to which humans were exposed. Although no chronic toxicity studies were identified in animals, the potential of dichlorvos to cause systemic toxicity has been evaluated in two repeat-dose and two subchronic dermal toxicity studies. Dermal application of dichlorvos over shorter durations, such as daily doses of 50 mg/kg, 75 mg/kg, and 100 mg/kg, resulted in death in monkeys after 8, 10, and 4 doses, respectively, whereas cholinergic signs (incoordination, muscle fasciculation, excessive salivation, labored breathing, miosis, and eventually inability or indisposition to move) and significant inhibition of ChE activities in the plasma and red blood cells were qualitatively similar at all dosage levels [Durham et al. 1957]. Luty et al. [1998] also reported dose-dependent histopathological changes in multiple organs (lungs, lymphatic glands, thymus, liver, kidneys, and heart muscle) and stimulation of the bactericidal and phagocytic activity of neutrophils in

rats exposed for 4 hours/day to 7.5 and 37.5 mg/ kg-day dichlorvos for 4 weeks. In a subchronic study, dermal painting of rats with dichlorvos at a dosage of 30 mg/kg per day (mg/kg-day) for 90 days did not elicit any symptoms of intoxication or mortality [Ali and Abdalla 1992]. However, histopathological examination revealed changes in testicular and liver tissues, with the cellular damage being prominent in animals treated for 30 days or more [Ali and Abdalla 1992]. Degenerative seminiferous tubules and fewer Leydig cells were observed in the testis, while congestion, atrophy, and cells at different stages of necrobiotic changes were observed in the liver [Ali and Abdalla 1992]. In an earlier 90-day subchronic dermal painting study, rats exposed to 21.4 mg/kg-day for 5 days/week exhibited few clinical symptoms or histopathologic changes in the skin or testes [Dikshith et al. 1976]. Histopathologic changes in the testes occurred in one control animal, but the power to detect a difference between the cases and controls was low. Therefore, the possibility of an effect of the compound at 21.4 mg/kg-day cannot be fully ruled out. The dose of 21.4 mg/kg-day can be regarded as the lowest observed-adverse-effect level (LOAEL) for the testicular and hepatic effects. These studies demonstrate that dermal exposure to dichlorvos is systemically toxic, causing histopathological changes in internal organs, ChE inhibition, and central nervous system effects at doses significantly lower than the critical dermal LOAEL value of 1,000 mg/kg for repeat-dose toxicity that identifies chemical substances with the potential for subchronic dermal toxicity [NIOSH 2009].

No standard toxicity or specialty studies evaluating biological system/function-specific effects (including developmental effects) following dermal exposure of humans or animals to dichlorvos were identified. However, reproductive system effects were identified when histopathologic examination following a 90-day subchronic dermal exposure to 30 mg/kg/day revealed testicular effects [Ali and Abdalla 1992]. The study by Luty et al. [1998] also demonstrates the potential of dichlorvos to affect immune system components (including

Table 2. Summary of the carcinogenic designations* for dichlorvos by numerous governmental and nongovernmental organizations

Organization	Carcinogenic designation
NIOSH [2005]	No designation
NTP [2016]	No designation
US EPA [2014]	Suggestive evidence of carcinogenicity, but not sufficient to assess carcinogenic risk to humans
European Parliament [2008]	No GHS designation
IARC [2012]	Group 2B: possibly carcinogenic to humans
Joint FAO/WHO Meeting on Pesticide Residues [2011]	Unlikely to pose carcinogenic risk to humans
ACGIH [2014]	A4: not classifiable as a human carcinogen

ACGIH = American Conference of Governmental Industrial Hygienists; FAO = Food and Agriculture Organization of the United Nations; GHS = Globally Harmonized System for Classification and Labelling of Chemicals; 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; WHO = World Health Organization.

lymphatic glands and thymus) following dermal exposure.

No studies that evaluated the potential of dermally applied dichlorvos to cause cancer in humans or animals were identified. Table 2 summarizes carcinogenic designations for dichlorvos by multiple governmental and non-governmental organizations.

Taken together, the toxicokinetic data from animals [Tos-Luty et al. 1994], findings of in vitro studies by Moore et al. [2014a, 2014b], and results from the predictive mathematical algorithm, acute toxicity studies in animals [Gaines 1969; Durham et al. 1957], and dermal toxicity and subchronic toxicity studies in animals [Ali and Abdalla 1992; Durham et al. 1957; Dikshith et al. 1976; Luty et al. 1998; Moriearty et al. 1993] are sufficient to demonstrate the potential of dichlorvos to be absorbed through the skin and be systemically toxic, causing inhibition of ChE activity, neurotoxicity, and histopathological changes in the liver, and may be potentially fatal following dermal exposure. Therefore, this assessment assigns a skin notation of SK: SYS for dichloryos.

3 Direct Effects on Skin (SK: DIR)

No human or animal in vivo studies on corrosivity of dichlorvos, in vitro tests for corrosivity using human or animal skin models, or in vitro tests of skin integrity using cadaver skin were identified. However, cases have been reported of irritant contact dermatitis in humans who came into direct contact with 1% to 10% solutions of, or mixtures containing, dichlorvos [Bisby and Simpson 1975; Cronce and Alden 1968; Mathias 1983]. Flea collar dermatitis — a primary irritant contact dermatitis — has occurred in cats and dogs wearing dichlorvos-impregnated PVC flea collars [Breen and Conroy 1971; Fox et al. 1969a, 1969b]. Matsushai et al. [1985] implicated dichlorvos as a causative agent for contact dermatitis in a case series. In guinea pigs, Matsushai et al. [1985] noted a threshold irritation concentration of 2% or more, and Ueda et al. [1994] reported a threshold irritation concentration of 1%. In addition, Fujita [1985] reported that a 0.5% concentration produced discrete erythema. The structure-activity relationship model, Deductive Estimation of Risk from

^{*} The listed cancer designations were based on data from nondermal (such as oral or inhalation) exposure, because no studies using the dermal route of exposure were available.

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

Existing Knowledge (*DEREK*) [Sanderson and Earnshaw 1991], predicted dichlorvos to be negative for skin irritation.

Case reports of irritant contact dermatitis in humans [Bisby and Simpson 1975; Cronce and Alden 1968; Mathias 1983] and animals [Breen and Conroy 1971; Fox et al. 1969a, 1969b], as well as evidence of skin irritation in animals [Fujita 1985; Matsushai et al. 1985; Ueda et al. 1994], provide sufficient evidence that dilute solutions of dichlorvos are irritating to the skin. Therefore, on the basis of the data for this assessment, dichlorvos is assigned the SK: DIR (IRR) notation.

4 Immune-mediated Responses (SK: SEN)

There is evidence from occupational exposures that dichlorvos has the potential to cause skin sensitization. For example, human diagnostic patch tests of occupational flower growers or tea growers with a history of pesticide dermatitis have shown an allergic contact dermatitis response to dichlorvos [Fujita 1985; Ueda et al. 1994]. Horiuchi and Ando [1978] reported light-induced hypersensitization to dichlorvos in photosensitizing patch tests of workers presenting with dermatitis caused by agricultural pesticides. Matsushita et al. [1985] reported that 5% dichlorvos was a moderate sensitizer in the Guinea pig maximization test (GPMT). A positive response in the GPMT was also reported by Ueda et al. [1994]. Ueda et al. [1994] also reported cross-sensitization when guinea pigs were sensitized with triforine (1,4-bis (2,2,2-trichloro-1-formamidoethyl) piperazine), another pesticide used in flower growing, and challenged with dichlorvos. However, cross-reactivity was not shown when animals were sensitized with dichlorvos and challenged with triforine. This could be because the challenge dose for triforine was not large enough to elicit an allergic reaction, since the allergenic potency of triforine is less than that of dichlorvos. Fujita [1985] rated the allergenicity of dichlorvos as moderate in the guinea pig maximization test. DEREK [Sanderson and Earnshaw 1991] also predicted dichlorvos to be a plausible skin sensitizer.

Human diagnostic patch tests on agricultural workers presenting with contact dermatitis show that dichlorvos has the potential to be a skin sensitizer [Fujita 1985; Ueda et al. 1994] and a photosensitizer [Horiuchi and Ando 1978]. Predictive tests in animals (for example, guinea pig maximization tests) [Fujita 1985; Matsushita et al. 1985; Ueda et al. 1994] demonstrate that dichlorvos causes skin sensitization. Therefore, on the basis of the data for this assessment, dichlorvos is assigned the SK: SEN notation.

5 Summary

Taken together, the toxicokinetic data [Tos-Luty et al. 1994] and findings from in vitro studies by Moore et al. [2014a, 2014b], the predictive mathematical algorithm, acute toxicity studies in animals [Gaines 1969; Durham et al. 1957], and dermal toxicity and subchronic toxicity studies in animals [Ali and Abdalla 1992; Durham et al. 1957; Dikshith et al. 1976; Luty et al. 1998; Moriearty et al. 1993] are sufficient to demonstrate the potential of dichlorvos to be absorbed through the skin and be systemically toxic, causing diverse effects such as inhibition of ChE activity, neurotoxicity, histopathological changes in lungs, and potential fatality following dermal exposure. Although cases of skin corrosivity were not identified, case reports of irritant contact dermatitis in humans [Bisby and Simpson 1975; Cronce and Alden 1968; Mathias 1983] and animals [Breen and Conroy 1971; Fox et al. 1969a, 1969b], as well as evidence of skin irritation in animals [Fujita 1985; Matsushai et al. 1985; Ueda et al. 1994], provide sufficient evidence that dilute solutions of dichlorvos are irritating to the skin. Human diagnostic patch tests conducted on agricultural workers presenting with contact dermatitis show that dichlorvos has the potential to be a skin sensitizer [Fujita 1985; Matsushita et al. 1985; Ueda et al. 1994] and a photosensitizer [Horiuchi and Ando 1978]. Predictive tests in animals (for example, guinea pig maximization tests) [Fujita 1985; Ueda et al. 1994] demonstrate that

Table 3. Summary of previous skin hazard designations for dichlorvos

Organization	Skin hazard designation	
NIOSH [2005]	[skin]: Potential for dermal absorption; prevent skin contact	
OSHA [2017]*	[skin]: Potential for dermal absorption	
ACGIH [2014]	[skin]: Symptoms of organophosphate poisoning have been seen in humans and animals following dermal contact DSEN: Based upon positive patch-test responses in humans and positive responses in the guinea pig maximization test	

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

dichlorvos causes skin sensitization. Therefore, on the basis of these assessments, dichlorvos is assigned a composite skin notation of **SK: SYS-DIR (IRR)-SEN**.

Table 3 summarizes the skin hazard designations for dichlorvos previously issued by NIOSH and other organizations. The equivalent dermal designations for dichlorvos, according to the Globally Harmonized System (GHS) for 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.

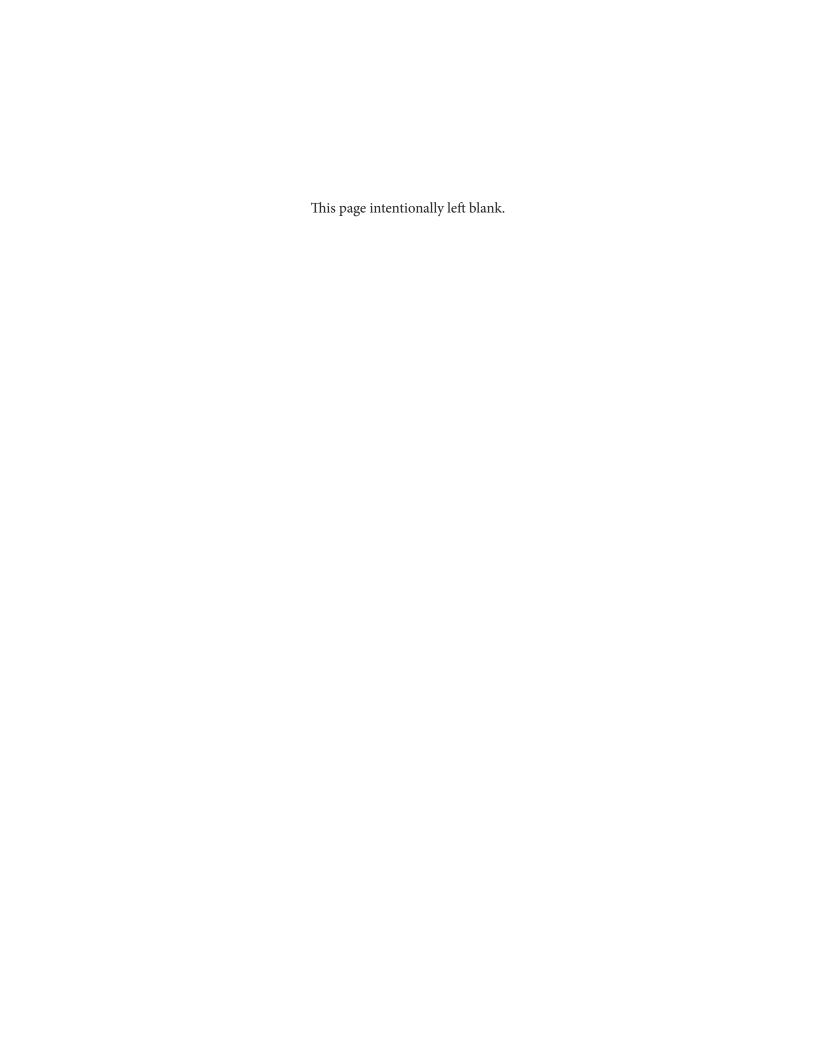
- *Ali FA, Abdalla MH [1992]. Pathological changes in testes and liver of male albino rats after dermal exposure to DDVP insecticide. J Egypt Public Health Assoc 67(5-6):565–578.
- *ACGIH (American Conference of Governmental Industrial Hygienists) [2014]. Dichlorvos. In: 2014 TLVs and BEIs: Based on the documentation of the threshold limit values for chemical substances and physical agents and biological exposure indices. Cincinnati, OH: American Conference of Governmental Industrial Hygienists.
- *ATSDR [1997]. Toxicological profile for dichlorvos. Atlanta, GA: U.S. Department of Health and Human Services, Public Health Service, Agency for

- Toxic Substance and Disease Registry (ATSDR), http://www.atsdr.cdc.gov/toxprofiles/tp88.pdf.
- *Bisby JA, Simpson GR [1975]. An unusual presentation of systemic organophosphate poisoning. Med J Aust 2:394–395.
- *Breen PT, Conroy JD [1971]. Flea-collar contact dermatitis. Vet Med Small Anim Clin 66(12):1181–1183.
- *Cronce PC, Alden HS [1968]. Flea-collar dermatitis. JAMA 206(7):1563–1564.
- *Dikshith TS, Datta KK, Chandra P [1976]. 90-Day dermal toxicity of DDVP in male rats. Bull Environ Contam Toxicol *15*(5):574–580.
- *Durham WF, Gaines TB, McCauley RH Jr, Sedlak VA, Mattson AM, Hayes WJ Jr [1957]. Studies on the toxicity of O,O-dimethyl-2-2-dichlorovinyl phosphate (DDVP). AMA Arch Ind Health 15:340–349.
- *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, labelling and packaging of substances and mixtures, amending and repealing Directives 67/548/EEC and 1999/45/EC, and amending Regulation (EC) No 1907/2006. Off J Eur Union *L353*:1–1355, http://eur-lex.europa.eu/LexUriServ/LexUriServ.do?uri =OJ:L:2008:353:0001:1355:EN:PDF.
- *Fox I, Bayona IG, Armstrong JL [1969a]. Cat flea control through use of dichlorvos-impregnated collars. J Am Vet Med Assoc 155(10):1621–1623.
- *Fox I, Rivera GA, Bayona IG [1969b]. Controlling cat fleas with dichlorvos-impregnated collars. J Econ Entomol 62(5):1246–1249.
- *Fujita Y [1985]. Studies on contact dermatitis from pesticides in tea growers. Acta Med Univ Kagoshima 27(1):17–37.
- *Gaines TB [1969]. Acute toxicity of pesticides. Toxical Appl Pharmacol *14*:515–534.

^{*}Date accessed.

- *Gajewski D, Katkiewicz M [1981]. Activity of certain enzymes and histomorphological changes in subacute intoxication of rats with selected organophosphates. Acta Physiol Pol 32(5):507–520.
- *Horiuchi N, Ando Y [1978]. Photosensitivity caused by pesticides. Proceedings of the VII International Congress of Rural Medicine, September 17–21, Salt Lake City, Utah. International Association of Agricultural Medicine, Grant No. R13-OH-00694, pages 279–284.
- †HSDB (Hazardous Substances Data Bank) [2010]. Dichlorvos. In: HSDB (Hazardous Substances Data Bank), http://toxnet.nlm.nih.gov/cgi-bin/sis/htmlgen?HSDB.
- *IARC (International Agency for Research on Cancer) [2012]. Agents reviewed by the IARC monographs. In: IARC monographs on the evaluation of carcinogenic risks to humans, http://monographs.iarc. fr/ENG/Monographs/PDFs/index.php.
- *JMPR (Joint FAO/WHO Meeting on Pesticide Residues) [2011]. Pesticides in food 2011. Report of the Joint Meeting of the FAO Panel of Experts on Pesticide Residues in Food and the Environment and the WHO Core Assessment Group on Pesticide Residues, Geneva, Switzerland, 20–29 September 2011.
- *Luty S, Latuszynska J, Halliop J, Tochman A, Obuchowska D, Przylepa E, Korczak E, Bychawski E [1998]. Toxicity of dermally absorbed dichlorvos in rats. Ann Agric Environ Med 5(1):57–64.
- *Mathias CGT [1983]. Persistent contact dermatitis from the insecticide dichlorvos. Contact Dermatitis 9:217–218.
- *Matsushita T, Aoyama K, Yoshimi K, Fujita Y, Ueda A [1985]. Allergic contact dermatitis from organophosphorus insecticides. Ind Health 23:145–153.
- *Moore CA, Wilkinson SC, Blain PG, Dunn M, Aust GA, Williams FM [2014a]. Percutaneous absorption and distribution of organophosphates (chlorpyrifos and dichlorvos) following dermal exposure and decontamination scenarios using in vitro human skin model. Toxicol Lett 229(1):66–72.
- *Moore CA, Wilkinson SC, Blain PG, Dunn M, Aust GA, Williams FM [2014b]. Use of human skin in vitro model to investigate the influence of 'everyday' clothing and skin surface decontamination on the percutaneous penetration of organophosphates. Toxicol Lett 229(1):257–264.
- *Moriearty PL, Thornton SL, Becker RE [1993]. Transdermal patch delivery of acetylcholinesterase inhibitors. Meth Find Exp Clin Pharmacol 15(6):407–412.
- †Muller GH [1970]. Flea collar dermatitis in animals. J Am Vet Med Assoc *157*(11):1616–1626 [Cited in IPCS 1989].

- *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/.
- *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 [2016]. Report on carcinogens. 14th ed. U.S. Department of Health and Human Services, Public Health Service, National Toxicology Program, https://ntp.niehs.nih.gov/pubhealth/roc/index-1.html.
- *OSHA [ND]. Dichlorvos. In: OSHA Occupational Chemical Database, http://www.osha.gov/chemicaldata/chemResult.html?recNo=457. Accessed: 01-17-2017.
- *Sanderson DM, Earnshaw CG [1991]. Computer prediction of possible toxic action from chemical structure; the DEREK system. Hum Exp Toxicol 10(4):261–273.
- †Shellenberger TE [1980]. Organophosphorus pesticide inhibition of cholinesterase in laboratory animals and man and effects of oxime reactivators. J Environ Sci Health B *15*(6):795–822.
- †Shellenberger TE, Newell GW, Okamoto SS, Sarros A [1965]. Response of rabbit whole blood cholinesterase in vivo after continuous intravenous infusion and percutaneous application of dimethyl organophosphate inhibitors. Biochem Pharmacol 14:943–952.
- *Tos-Luty S, Latuszynska J, Halliop J, Tochman A, Przylepa E, Bychawski E, Obuchowska D [1994]. Skin penetration of selected pesticides. Ann Agric Environ Med 1:57–67.
- *Ueda A, Aoyama K, Manda F, Ueda T, Kawahara Y [1994]. Delayed-type allergenicity of triforine (Saprol®). Contact Dermatitis *31*:140–145.
- †Ueda K, Shiyo K, Iizuka Y, Kitahara E, Ohashi A [1960]. The toxicity of organic phosphate "DDVP" for small animals and man [in Japanese]. Igaku Seibutsugaku (Med Biol) 57(3):98–101.
- *US EPA [2014]. Annual cancer report: chemicals evaluated for carcinogenic potential. Office of Pesticide Programs, U.S. Environmental Protection Agency, http://npic.orst.edu/chemicals_evaluated.pdf.



Appendix: Calculation of the SI Ratio for Dichlorvos

This appendix presents an overview of the SI ratio and a summary of the calculation of the SI ratio for dichlorvos. 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 the 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 octanolwater 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 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)

$$k_p = \frac{1}{\frac{1}{k_{pso} + k_{pol}} + \frac{1}{k_{aq}}}$$

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

$$\begin{split} \log k_{psc} &= -1.326 + 0.6097 \\ &\quad \times \log K_{ow} - 0.1786 \times \text{MW}^{0.5} \\ k_{pol} &= 0.0001519 \times \text{MW}^{-0.5} \\ k_{aq} &= 2.5 \times \text{MW}^{-0.5} \end{split}$$

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 square centimeters [cm²]).

Equation 2: Determination of Skin Dose

Skin dose = $k_p \times S_w \times$ Exposed skin surface area × Exposure time = k_p (cm/hour) × S_w (mg/cm³) × 360 cm² × 8 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 \times Inhalation volume \times RF = OEL (mg/m³) \times 10 m³ \times 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 dichlorvos. The calculated SI ratio was 2.41. On the basis of these results, dichlorvos is predicted to represent a skin absorption hazard.

Appendix References

Hayes WA [2008]. Principles and methods of toxicology. 5th ed. New York: Informa Healthcare USA.

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/.

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/hyperlink2ocs/2009-147/pdfs/2009-147.pdf.

SRC [ND]. Interactive PhysProp database demo, http://esc.syrres.com/fatepointer/webprop. asp?CAS=62737. Accessed: 01-17-2017.

Table A1. Summary of data used to calculate the SI ratio for dichlorvos

Variables used in calculation	Units	Value			
Skin permeation coefficient					
Permeation coefficient of stratum corneum lipid path(k_{psc})	cm/hour	8.2281×10^{-4}			
Permeation coefficient of the protein fraction of the stratum corneum (k_{pol})	cm/hour	1.0218×10^{-5}			
Permeation coefficient of the watery epidermal layer (k_{aq})	cm/hour	0.1682			
Molecular weight $(MW)^*$	amu	220.98			
Base-10 logarithm of its octanol–water partition coefficient $(\text{Log }K_{ow})^*$	None	1.43			
Calculated skin permeation coefficient (k_p)	cm/hour	7.8442×10^{-4}			
Skin dose					
Water solubility $(S_w)^*$	mg/cm ³	8			
Calculated skin permeation coefficient (k_p)	cm/hour	7.8442×10^{-4}			
Estimated skin surface area (palms of hand) §	cm^2	360			
Exposure time	hour	8			
Calculated skin dose	mg	18.07			
Inhalation Dose					
Occupational exposure limit (OEL)†	mg/m³	1			
Inhalation volume	m3	10			
Retention factor (RF)	None	0.75			
Inhalation dose	mg	7.5			
Skin dose-to-inhalation dose (SI) ratio	None	2.41			

^{*}Variables identified from SRC [ND].

[†]The OEL used in calculation of the SI ratio for dichlorvos was the NIOSH recommended exposure limit (REL) [NIOSH 2005]. \$Hayes WA [2008]. Principles and methods of toxicology. 5th ed. New York: Informa Healthcare USA.



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. 2017-134