Development of additional workflows for risk assessment and prioritization for the **PLETHEM R Package**

Abstract

Over the past three years we have been population life-course the developing to health effects model exposure (PLETHEM) – the open source R package that is designed to provide tools that can be used to bridge the source-to-outcome continuum. Pharmacokinetic modeling is increasingly important in becoming chemical safety decision making, with applications in prioritizing risk assessment by establishing margins of exposure for chemicals and extrapolating hazard across different ages, population cohorts, or occupational classes. As a part of our effort to provide the community with an easy-touse yet capable modeling tool, we have continued to develop the PLETHEM package. We have created workflows for automated reverse dosimetry and route to extrapolation, modeling for route ecotoxicology applications, and kinetically derived maximum tolerated dose The automated reverse estimation. module the implements dosimetry Bayesian Approach as Discretized described by Tan et al. (2007) along with an easy-to-use interface to run the workflow. Simulation results from existing models PBPK or from models parameterized within PLETHEM can be imported for dose reconstruction. We have the ability to perform also added automated route-to-route extrapolations PLETHEM. The user can parameterize the model for a given route of exposure using the existing forward dosimetry interface within PLETHEM and use this parameterized model to estimate exposure along a different route using this workflow. Next, as a part of this update, we have added a fish PBPK model described by Krishnan et al. (2009), physiological datasets for this model and an easy to use modeling interface to help stakeholders address ecotoxicology concerns. Lastly, we are incorporating into PLETHEM additional features to make kinetically derived maximum tolerated dose (KMD) modeling more accessible. KMD makes use of kinetic modeling to identify dose ranges that avoid saturating ADME processes, which would convolute the interpretation of the study. McFadden et al. (2012) described a statistical method to determine KMD values for toxicokinetic studies. We are adding to PLETHEM an interface that allows users to import their own toxicokinetic datasets or simulated PBPK models from PLETHEM to estimate a KMD. PLETHEM is freely available via the Comprehensive R Archive Network (CRAN). We are also hosting some of these workflows as standalone apps online to provide users with easy access to them.

Reverse Dosimetry

PBPK models can be used to estimate external exposure that can lead to observed biomarker distribution in a population of interest. Reverse dosimetry workflows are used to perform this extrapolation using either Exposure useful in estimating hazard due do exposure from a route which was not explicitly can indicate inefficiencies in absorption and/or elimination of dose. We have Conversion Factor Approach (ECF), Discretized Bayesian Approach (DBA), or estimate internal plasma concentration (Cmax) that corresponds to the external https://scitovation.shinyapps.io/plethem-kmd POD for a known route of exposure. The reverse dosimetry workflow is then Biomonitoring data for a specific biomarkers measured from a population of used to estimate an external POD along a different route that would give the interest same internal plasma concentration. All of this is achieved through a series of interfaces that allow users to upload PLETHEM project files created using the forward dosimetry workflow interface. Create PBPK model with biomarker of interest and parameterized to match the Create PBPK model with the routes of exposure needed to perform population being studied extrapolation Run PBPK model in Monte Carlo model at the known POD to generate a exposures estimated distribution of plasma concentrations Amend dose Estimate the expected distribution of exposure for the range and Run PBPK model in Monte Carlo mode at multiple exposures (at least 25) and measured biomarker distribution by using Bayesian rerun model multiple times per dose (at least 1000) in the range of exposures estimated statistics Amend Estimate the expected distribution of exposure for the dose range measured biomarker distribution by using Bayesian and rerun statistics model Upload Existing Results Run Monte Carlo Simulation ScitoVation 🗠 Inputs 🖽 Output Browse... RD_test_proj.Rdata perform the estimation. Add Monte Carlo Simulation PLETHEM project elect Tissue Type Select Chemical Type rowse... RD_test_proj.Rdata created using Plasma Urine Parent Metabolite Upload complete dosimetry workflow xposure Type (Units Number of Doses Add Biomonitoring Results Oral MC Run Biomonitoring Simulation Run Reverse Dosimetry Run Simulation Cancel Set Route of Exposure pload Biomonitoring Results in Route To Route Extrapolatio ataset Name Percentile daa My Biomonitoring Results' Nam 5th 2.62 Select Type 25th 5.63 Parent Metabolite Set Route of Exposure 9.63 pload Biomonitoring CSV File 16.49 75th



Markov-chain Monte Carlo Approach. Of these we have implemented DBA within PLETHEM. The approach was first described by Tan et al (2007). DBA uses the following process to estimate external exposure that may lead to the observed biomonitoring profile. Run PBPK model in Monte Carlo mode at multiple exposures (>=25) and multiple times per dose (>=1000) to account for population level variability in the range of Each of the steps above can be completed in PLETHEM using specialized interfaces for defining inputs and outputs. The model created using the forward dosimetry interface in PLETHEM can be imported into the reverse dosimetry interface to estimate exposures



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Route to Route Extrapolation

Kinetically Derived Maximum Tolerated Dose (KMD)

PBPK models can be used to extrapolate human or animal Pont of Departure Kinetically derived maximum tolerated dose (KMD) is an important tool in (POD) from one route of exposure to another. Route to route extrapolation is understanding the non-linearities in a toxicokinetic study. These non-linearities tested in previous studies (like calculating the POD for a dermal exposure that implemented the workflow developed by McFadden et al. (2012) to determine the leads to the same internal concentration following a known oral exposure-based KMD in a toxicokinetic study. The workflow is implemented in PLETHEM through POD). PLETHEM uses the forward and reverse dosimetry workflows internally to a series of interfaces that will be incorporated into the next release of PLETHEM perform route to route extrapolation. The forward dosimetry workflow is used to in CRAN. The workflow is also available as a standalone web tool at

	А	В	С	D	E	F
1	Nominal E	Actual Exp	AUC	Cmax	Histopath	Reps
2	0	0	0	0	0	1
3	0	0	0	0	0	2
4	0	0	0	0	0	3
5	0.01	0.01	0.012602	0.030189	0.022402	1
6	0.01	0.01	0.012127	0.031382	0.030006	2
7	0.01	0.01	0.012373	0.04031	0.0322	3
8	0.1	0.1	0.12451	0.422081	0.205313	1
9	0.1	0.1	0.130754	0.330519	0.204716	2
10	0.1	0.1	0.124276	0.40334	0.210449	3
11	0.5	0.5	0.626542	2.023835	1.547637	1
12	0.5	0.5	0.636158	2.097046	1.589893	2
13	0.5	0.5	0.635538	2.077093	1.583088	3

Template excel file for uploading data for estimating maximum tolerated dose



Output from the maximum tolerated dose algorithm. The red circles indicate doses that have been identified as not being on a linear dose response relationship

Other improvements to PLETHEM in 2019

- (2009) to support ecotoxicology modeling
- compounds

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Implemented trout PBPK model in PLETHEM developed by Krishnan et al

• A unified QSAR algorithm for predicting partition coefficients in highly lipophilic

API to connected to NIEHS's Integrated Chemical Dashboard (ICE)

 Interfaces to import physical-chemical predictions from OPERA QSAR models References

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