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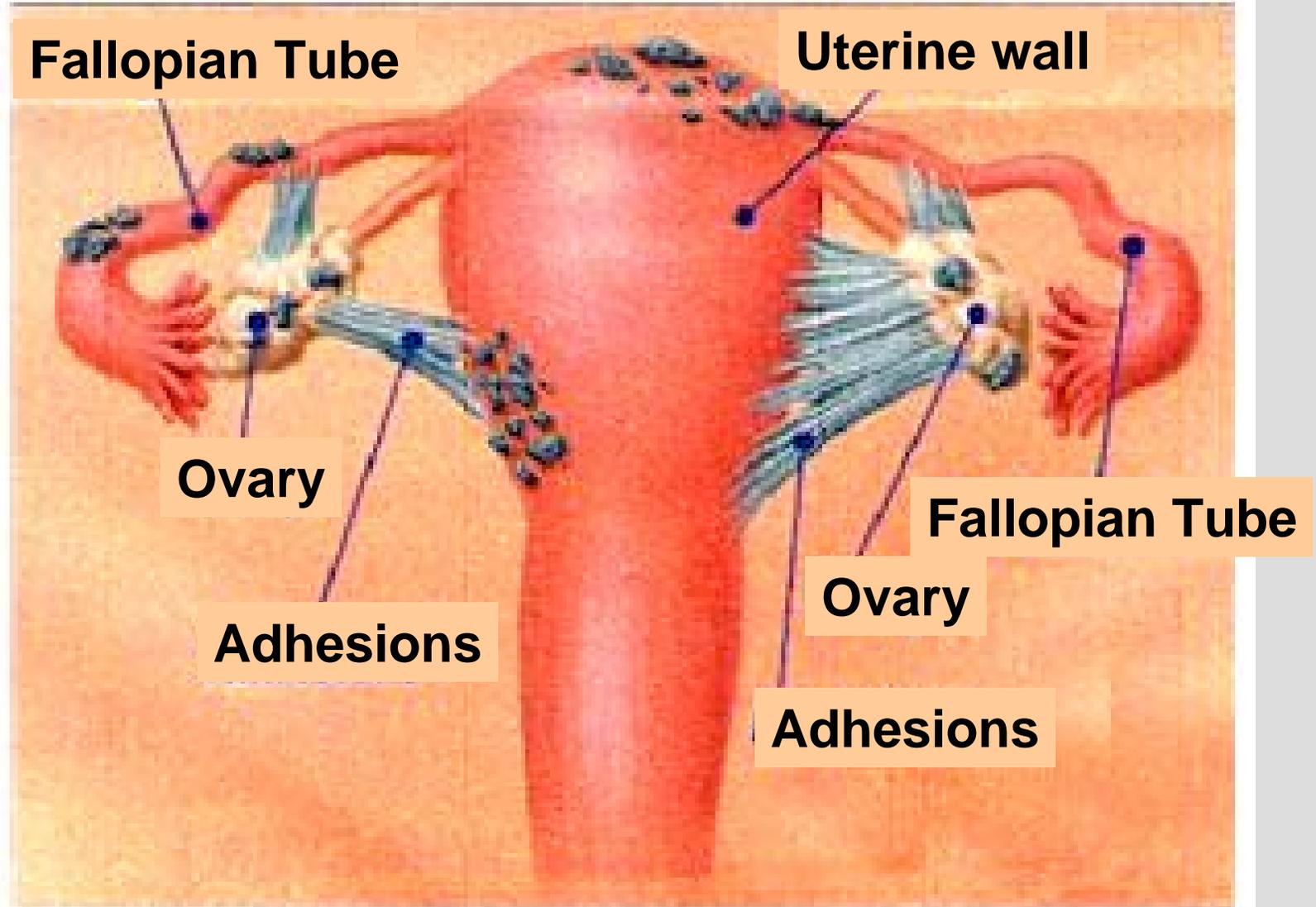


Persistent Organic Pollutants and Endometriosis Risk

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Pelvic endometriosis



Endometriosis signs and symptoms

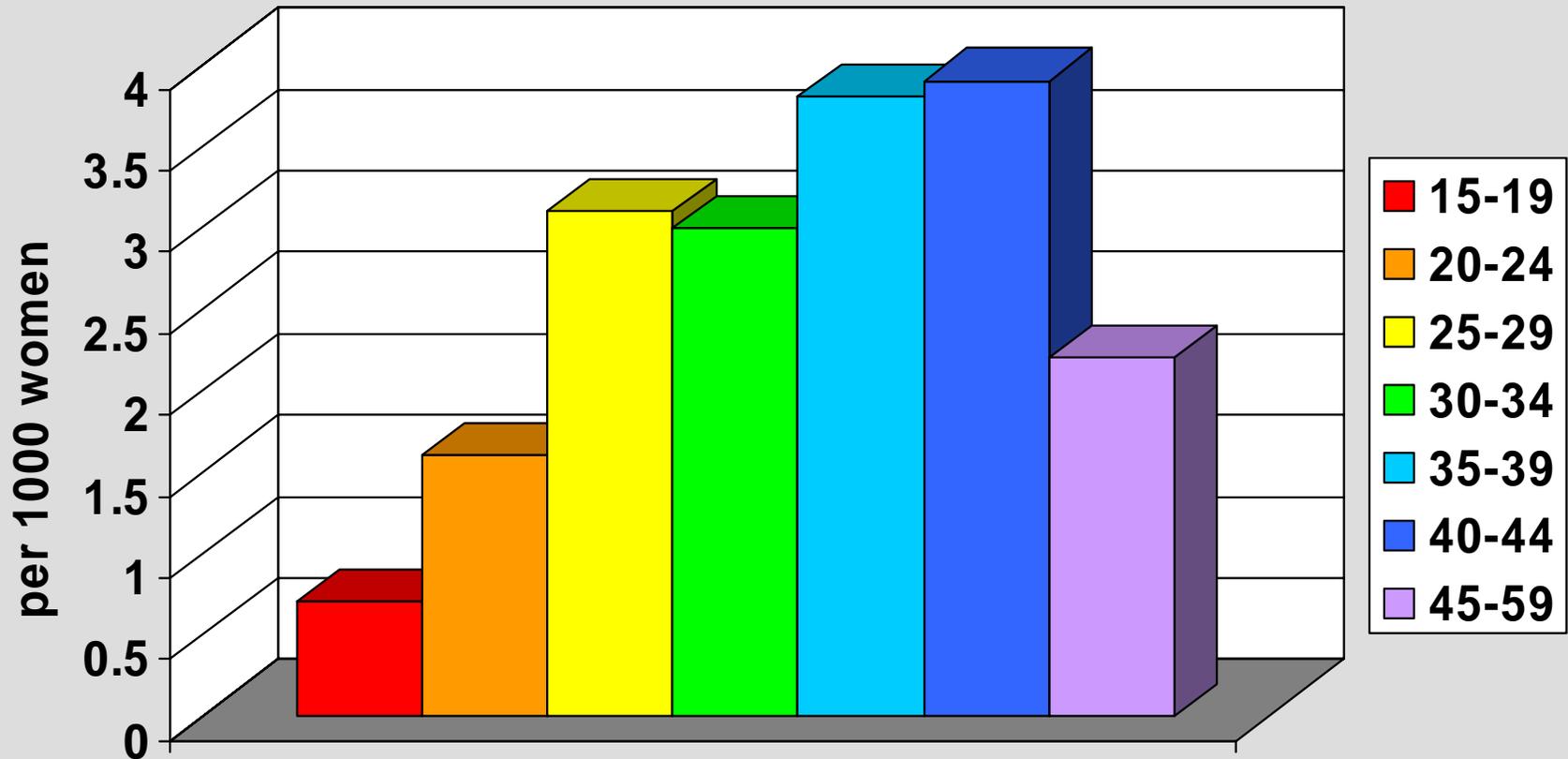


Severe menstrual pain
Severe bleeding

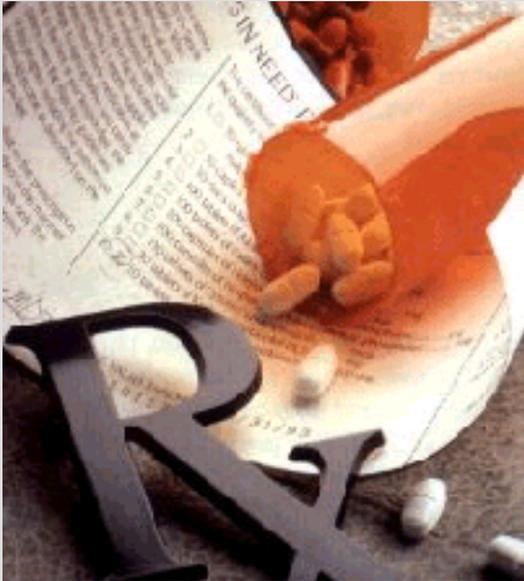
Adhesions

Severe chronic pelvic pain
Painful intercourse
Ovarian damage
Infertility

Endometriosis incidence by age group



Endometriosis treatment



GnRh agonists
Danazol
OCs
Progesterone
Alternative medicine



Lesion resection/ablation
Ovarian cystectomy
Hysterectomy
Oophorectomy

Endometriosis etiology

Menstrual reflux into peritoneal cavity

Immunologic alteration

Estrogen

- Occurs from menarche to menopause
- Anti-estrogenic treatments suppress it
- Markers of high estrogen increase risk
 - body fat distribution, height, alcohol use
 - estrogen-metabolizing genes

Persistent organic pollutants (POPs) and estrogen

Estrogenic activity in estrogen receptor binding tests

Transcriptional activation of estrogen-responsive genes

Estrogenic effects on breast cancer cells

Increased uterine weight in mouse studies

Reproductive toxicity (methoxychlor metabolite HPTE) – decreased fertility in rat studies

POPs associated with endometriosis in animal studies



Low dose dioxin
Dibenzofurans (PCDFs)
Methoxychlor

Not high dose dioxin
Not PCBs



Dioxin

PCBs?

POPs and endometriosis in human studies

Dioxin

- | | | |
|------------|---------------|--------------------------------|
| – Mayani | Israel | Significantly increased risk |
| – Pauwels | Belgium | Non-significant increased risk |
| – Eskenazi | Italy | Non-significant increased risk |
| – De Felip | Italy/Belgium | No association |

PCBs

- | | | |
|--------------|---------|---------------------------------|
| – Gerhard | Germany | 138, 153, 180 increased risk |
| – Buck Louis | US | Anti-est. PCBs increased risk |
| – Heilier | France | Dioxin-like PCBs increased risk |
| – Pauwels | Belgium | No association |

Pesticides

- | | | |
|---------|--------|-----------------------------|
| – Lebel | Canada | β -HCH, DDT, p,p'-DDE |
|---------|--------|-----------------------------|

WREN study design

Case-control study (NICHD R01 HD 33792)

Cases: 341 18-49 year-old female GHC enrollees with first-time endometriosis diagnosis between 4/1/96-3/31/01

Diagnosis confirmed by medical record review

Reference date was date of first visit for endo. symptoms

Minimum 6 months GHC enrollment at reference date

No hysterectomy or bilateral oophorectomy

WREN study design – control selection

Controls: 741 randomly selected 18-49 year-old female GHC enrollees

Assigned reference dates to correspond to cases' dates

Minimum 6 months GHC enrollment at ref. date

No hysterectomy or bilateral oophorectomy

No history of surgically-confirmed endometriosis

WREN study data collection

In-person interviews

Demographic and behavioral characteristics
Medical history
Work history
Reproductive history

Dietary questionnaires

Usual diet, plus fish & soy products questions

Body measurements

Waist, hip, thigh

Blood sample

GST, COMT polymorphisms

Medical/pharmacy record abstraction

Persistent Organic Pollutants and Endometriosis study aims

- Determine whether risk of endometriosis in women is associated with serum levels of polychlorinated biphenyls (total PCBs + 35 PCB congeners)
- Determine whether risk of endometriosis in women is associated with serum levels of 11 organochlorine pesticides
- Determine whether risk of endometriosis in women is associated with urine levels of the pesticide methoxychlor

Persistent Organic Pollutants and Endometriosis study aims

- Determine whether risk of endometriosis associated with organochlorine pesticide or PCB exposure differs by CYP1A1, CYP1A2, COMT, or GSTM1 genotype
- Determine whether risk of endometriosis associated with organochlorine pesticide or PCB exposure differs by levels of other exposures affecting estrogen levels

Additional activities for POPs and Endometriosis

- **Analysis of collected serum for**
 - Organochlorine pesticides
 - PCBs
 - Lipids
 - CYP1A1 and CYP1A2 polymorphisms
- **Collection and analysis of urine for methoxychlor metabolite HPTE**

POPs and Endometriosis results: analysis of interview data

All pesticides combined

	Cases (n=341)	Controls (n=741)	OR*	95% CI
Any exposure	62%	64%	0.96	0.70, 1.33
Occupational exp.	8%	6%	1.22	0.70, 2.12
Nonoccup. exp.	59%	61%	0.91	0.68, 1.23

*Odds ratios adjusted for age and reference year

POPs and Endometriosis results: analysis of interview data

Herbicides

	Cases (n=341)	Controls (n=741)	OR*	95% CI
Any exposure	17%	10%	1.65	1.03, 2.64
Occupational exp.	3%	1%	2.87	0.98, 8.40
Nonoccup. exp.	14%	10%	1.42	0.89, 2.28

*Odds ratios adjusted for age and reference year

POPs and Endometriosis results: analysis of interview data

Fungicides (all subjects)

	Cases (n=341)	Controls (n=741)	OR*	95% CI
Any exposure	5%	2%	2.15	0.99, 4.70
Occupational exp.	3%	1%	2.80	0.95, 8.23
Nonoccup. exp.	3%	1%	1.90	0.69, 5.23

*Odds ratios adjusted for age and reference year

POPs and Endometriosis results: analysis of interview data

Fungicides

COMT low activity allele subjects only

	Cases (n=222)	Controls (n=581)	OR*	95% CI
Any exposure	5.9%	2.5%	2.65	1.11, 6.35
Occupational exp.	3.2%	0.9%	3.94	1.12, 13.87
Nonoccup. exp.	3.2%	1.6%	1.98	0.66, 5.90

*Odds ratios adjusted for age and reference year

POPs and Endometriosis results: analysis of laboratory data

	Cases (n=269)	Controls (n=552)	OR*	95% CI
β-HCH				
geo. mean (pg/g)	53.6	46.1		
2 nd tertile			1.41	0.94-2.12
3 rd tertile			1.45	0.93-2.27
Trans-nonachlor				
geo. mean (pg/g)	83.5	76.0		
2 nd tertile			1.12	0.75-1.67
3 rd tertile			1.47	0.99-2.33

* Odds ratios adjusted for total lipids, age, and reference year

POPs and Endometriosis results: analysis of laboratory data

	Cases (n=269)	Controls (n=552)	OR*	95% CI
Heptachlor epoxide				
geo. mean (pg/g)	30.4	28.6		
2nd tertile			1.35	0.89-2.05
3rd tertile			1.22	0.78-1.91
Mirex				
geo. mean (pg/g)	10.5	9.7		
2nd tertile			1.06	0.72-1.55
3rd tertile			1.28	0.87-1.88

* Odds ratios adjusted for total lipids, age, and reference year

POPs and Endometriosis results: analysis of laboratory data

	Cases (n=269)	Controls (n=552)	OR*	95% CI
p,p'-DDE				
geo. mean (pg/g)	1796.4	1673.9		
2nd tertile			1.03	0.71-1.50
3rd tertile			1.05	0.71-1.57
p,p'-DDT				
geo. mean (pg/g)	32.5	30.4		
2nd tertile			0.87	0.59-1.27
3rd tertile			0.94	0.63-1.38

* Odds ratios adjusted for total lipids, age, and reference year

POPs and Endometriosis results: analysis of laboratory data

	Cases (n=269)	Controls (n=552)	OR*	95% CI
PCB 74				
geo. mean (pg/g)	83.2	78.4		
2nd tertile			1.39	0.93-2.06
3rd tertile			1.49	0.98-2.26
PCB 118				
geo. mean (pg/g)	74.1	71.4		
2nd tertile			1.25	0.84-1.86
3rd tertile			1.43	0.94-2.17

* Odds ratios adjusted for total lipids, age, and reference year

POPs and Endometriosis results: analysis of laboratory data

	Cases (n=269)	Controls (n=552)	OR*	95% CI
PCB 153				
geo. mean (pg/g)	223.1	206.9		
2nd tertile			1.20	0.80-1.81
3rd tertile			1.34	0.86-2.10
PCB 180				
geo. mean (pg/g)	136.2	137.4		
2nd tertile			0.93	0.61-1.42
3rd tertile			1.00	0.64-1.55

* Odds ratios adjusted for total lipids, age, and reference year

POPs and Endometriosis: conclusions and limitations

The relationship between endocrine disruptor chemical exposure and endometriosis is biologically plausible

Several epidemiologic studies have shown positive associations with various EDCs

This study found a fairly consistent pattern of modestly increased risk associated with self-reported exposure and with the top tertile of pesticide and PCB serum levels

While results were adjusted for age, the possibility exists that there are other noncausal explanations for the associations seen – further modeling will be done

In a case-control study using post-diagnosis serum the correct temporal sequence is not conclusive, but self-reported pesticide exposure was prior to disease onset

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Questions and Comments?

