US ERA ARCHIVE DOCUMENT



## **DATA EVALUATION RECORD - SUPPLEMENT**

XDE-570 (FLORASULAM)

Study Type: OPPTS 870.3100 [§82-1a]; Subchronic (90-day) Oral Toxicity Study in Rats

Work Assignment No. 4-1-128 B (MRID 46808219)

Prepared for
Health Effects Division
Office of Pesticide Programs
U.S. Environmental Protection Agency
2777 South Crystal Drive
Arlington, VA 22202

Prepared by
Pesticides Health Effects Group
Sciences Division
Dynamac Corporation
1910 Sedwick Road, Bldg 100, Ste B.
Durham, NC 27713

Primary Reviewer		
Michael E. Viana, Ph.D., D.A.B.T.	Signature:	
	Date:	
Secondary Reviewer		
Ronnie J. Bever, Jr., Ph.D.	Signature:	
	Date:	
Program Manager:		
Michael E. Viana, Ph.D., D.A.B.T.	Signature:	
	Date:	
Quality Assurance:		
Mary L. Menetrez, Ph.D.	Signature:	
	Date:	

## Disclaimer

This Data Evaluation Record my have been altered by the Health Effects Division subsequent to signing by Dynamac Corporation personnel

Subchronic (00-day) Oral Toxicity Study in Pate (1006) / Page 1 of ?

XDE-570 (FLORASULAM)/129108	OPPTS 870.3100	/ DACO 4.3.1/ OECD 408
EPA Reviewer: Karlyn J. Bailey	_ Signature: _	
Registration Action Branch 2, Hea	lth Effects Division (7509P) Date: _	
Work Assignment Manager: My	ron Ottley, Ph.D. Signature: _	
Registration Action Branch 3, Hea	olth Effects Division (7509P) Date:	
	`	Template version 02/00

## DATA EVALUATION RECORD – SUPPLEMENT

See TXR # 0054348 for previous DER

This supplement contains:

- New cover page
- New executive summary

**STUDY TYPE:** 90-Day Oral Toxicity [feeding]-[rat]; OPPTS 870.3100 [ '82-1a] (rodent);

OECD 408.

**PC CODE**: 129108 **DP BARCODE**: D331116

TXR#: 0054348

TEST MATERIAL (PURITY): XDE-570 (Florasulam; 99.2% a.i.)

**SYNONYMS**: N-(2,6-Difluorophenyl)-8-fluoro-5-methoxy(1,2,4)triazolo(1,5-c)pyrimidine-2-

sulfonamide; XR-570; XRD-570; DE-570

**<u>CITATION</u>**: Redmond, J. M., and K. A. Johnson (1996) XDE-570: 13-week dietary toxicity

and 4-week recovery in F344 rats. The Toxicology Research Laboratory, Health and Environmental Sciences, The Dow Chemical Company, Midland, MI. Laboratory Project Study ID: DR-0312-6565-011, January 31, 1996. MRID

46808219. Unpublished.

**SPONSOR:** Dow AgroSciences Canada, Inc., 2100-450 1 St. SW, Calgary, AB, Canada

EXECUTIVE SUMMARY: In a subchronic oral toxicity study (MRID 46808219), XDE-570 (Florasulam; 99.2% a.i.; Lot No. 930910) was administered in the diet to ten Fischer 344 rats/sex/dose at dose levels of 0, 20, 100, 500, or 1000/800 (males/females) mg/kg/day (time-weighted intake was 0/0, 22/21, 112/106, 550/528, and 1111/843 mg/kg/day [males/females]) for 13 weeks. An additional ten rats/sex/dose were fed test diets containing 0 or 1000/800 (males/females) mg/kg/day for 13 weeks, followed by a 4-week recovery period, during which time all rats were fed control diet.

No adverse treatment-related effects were observed on mortality, clinical signs, food consumption, food efficiency, ophthalmoscopic examinations, hematology, clinical chemistry, or gross pathology.

At 500 mg/kg/day, body weights were decreased (p<=0.05) in the females by 5-8% during Weeks 6-13, contributing to a 21% decrease (p<=0.05) in overall (Weeks 0-13) body weight gains. At 1000 mg/kg/day, body weights were decreased (p<=0.05) in both sexes by 7-17% throughout treatment, resulting in decreased (p<=0.05) overall body weights gains (decr. 23-30%). Body weights and body weight gains remained decreased (p<=0.05) in the 1000 mg/kg/day males following recovery (decr. 11% and 17% at Week 17, respectively).

Slight nephrotoxicity was observed at 500 mg/kg/day and above. Absolute and relative (to body weight) kidney weights were increased (p<=0.05) by 9-37% in both sexes. Urinary pH was decreased in both the males (5.90-6.85 vs. 7.55 in controls) and females (6.65-7.10 vs. 8.20 in controls). Very slight to slight hypertrophy of the epithelial cells of the collecting ducts were observed in the males (10/10 at each dose vs. 0/10 controls) and females (8-9/10 vs. 0/10 controls); and degeneration/regeneration and inflammation (with or without necrosis) of the descending portion of the proximal tubules was noted in the females (3/10 at each dose vs. 0/10 controls). Additionally, the specific gravity of the urine was decreased (p<=0.05) in the 1000 mg/kg/day males (1.035 vs. 1.051 in controls), and very slight multifocal mineralization of the kidney papilla was observed in the 800 mg/kg/day females (9/10 vs. 0/10 controls). Following recovery, both very slight mineralization of the tubules of the papilla (9/10 vs. 0/10 controls) and very slight degeneration/regeneration of the cortical tubules (5/10 vs. 0.10 controls) were noted in the kidney of the 800 mg/kg/day females.

The LOAEL is 500 mg/kg/day, based on decreased body weights and body weight gains in the females, and evidence of slight nephrotoxicity (described above) in both sexes. The NOAEL is 100 mg/kg/day.

This study is classified as **acceptable/guideline** and satisfies the guideline requirements (OPPTS 870.3100; OECD 408) for a subchronic oral toxicity study in the rat.

**COMPLIANCE:** Signed and dated GLP Compliance, Quality Assurance, and Data Confidentiality statements were provided.

Table A.2.2 Subchronic, Chronic, and Other Toxicity Profile				
Guideline No./Study	MRID No. (year)	Results		
Type	Classification/Doses			
870.3100 90-Day oral toxicity (rat)	46808219 (1996)   Acceptable/guideline   0, 20, 100, 500,   1000/800 mg/kg/day	NOAEL = 100 mg/kg/day LOAEL = 500 mg/kg/day based on decreased body weights and body weight gains in the females and evidence of slight nephrotoxicity in both sexes		
870.3100 90-Day oral toxicity (mouse)	46808222 (1996) Acceptable/guideline 0, 20, 100, 500, 1000 mg/kg/day	NOAEL = 1000 mg/kg/day (limit dose) LOAEL = Not observed		
870.3150 90-Day oral toxicity (dog)	46808223 (1995) Acceptable/guideline 0, 5, 50, 100 mg/kg/day	NOAEL = 50 mg/kg/day LOAEL = 100 mg/kg/day based on increased alkaline phosphatase activity and absolute and relative (to body) liver weights, and increased incidence/severity of hepatic vacuolation in both sexes		
870.3200 21/28-Day dermal toxicity (rat)	46808225 (1997) Acceptable/guideline 0, 100, 500, 1000 mg/kg/day, 6 h/day, 7 days/week for 28 days	NOAEL = 1000 mg/kg/day (limit dose) LOAEL = Not observed		
870.3250 90-Day dermal toxicity (species) 870.3465 90-Day inhalation toxicity (species)				
870.3700a Prenatal developmental toxicity (rat)	46808234 (1997) 46808231 (1996) Acceptable/guideline 0, 50, 250, 750 mg/kg/day (GD 6-15)	Maternal NOAEL = 250 mg/kg/day LOAEL = 750 mg/kg/day based on decreased body weights, body weight gains, and food consumption, and increased kidney weights Developmental NOAEL = 750 mg/kg/day LOAEL = Not observed		
870.3700b Prenatal developmental toxicity (rabbit)	46808233 (1997) 46808232 (1997) Acceptable/guideline 0, 50, 250, 500 mg/kg/day (GD 7-19)	Maternal NOAEL = 500 mg/kg/day LOAEL = Not observed Developmental NOAEL = 500 mg/kg/day LOAEL = Not observed Study was found acceptable due to findings of preliminary developmental toxicity study at 600 mg/kg/day		
870.3800 Reproduction and fertility effects (rat)	46808235 (1997) Acceptable/guideline 0, 10, 100, 500 mg/kg/day	Parental/Systemic NOAEL = 100 mg/kg/day LOAEL = 500 mg/kg/day based on decreased body weights, body weight gains, and food consumption, increased relative kidney weights, and increased incidence of multi-focal hypertrophy of the collecting duct in both sexes Offspring NOAEL = 500 mg/kg/day LOAEL = Not observed Reproductive NOAEL = 500 mg/kg/day LOAEL = Not observed		
870.4100a Chronic toxicity (species)				

ights
ights
nd in
nd in
nd in
nd in
ind in
!
ļ
ļ
<del></del> -
ınd in
L
ated
ıt
ights
-0****
ed in
- 1

Metabolism and pharmacokinetics (rat)  Acceptable/guideline 10 and 500 mg/kg and 10 mg/kg as a surration of the absorption and/or excretion mechanisms at the high dose. The apparent volume of distribution was increased at the high dose, possibly indicating a saturation of the absorption and/or excretion mechanisms at the high dose. The apparent volume of distribution was increased its sue binding. Total recoveries at 168 hours post-dose were 59-9100.2% indicative of increased tissue binding. Total recoveries at 168 hours post-dose were 59-9100.2% colo% at 500 mg/kg. Total radioactivity found in the urine was approximately 90-92% following single or repeated low-dose treatment, and 81-85% following tentent at 500 mg/kg. Radioactivity in the feces accounted for another 5-7% at 10 mg/kg and 14-17% at 500 mg/kg. The highest residue levels were observed in the sin (single dose) and carcass (repeated dose), but the mean recovery of radioactivity in the tissues/carcass at sacrifice was -0.6% of the dose) and carcass (repeated dose), but the mean recovery of radioactivity in the tissues/carcass at sacrifice was -0.6% of the dose) and carcass (repeated dose), but the mean recovery of radioactivity in the tissues/carcass at sacrifice was -0.6% of the dose). All the mean recovery of radioactivity in the tissues/carcass at sacrifice was -0.6% of the dose. Identified compounds accounted for 77.7-85.0% dose, OH-phenyl-XR-S70 accounted for 13-1-9.0% dose, OH-phenyl-XR-S70 accounted for 13-1-9.0% dose, OH-phenyl-XR-S70 uscented for 13-1-9.0% dose, OH-phenyl-XR-S70 uscented for 14-10 mg/kg and 14-17 mg/	870.7485	46808301 (1996)	Absorption was rapid and extensive (≈90-93% at 10 mg/kg;
pharmacokinetics (rat)  Acceptable/guideline 10 and 500 mg/kg  (Cmax) were achieved within 0.5-1 hour. Cmax in the plasma did not increase proportionally with dose, possibly indicating a saturation of the absorption and/or excretion mechanisms at the high dose. The apparent volume of distribution was increased tissue binding. Total recoveries at 168 hours post-dose were 95.9-100.2%. Elimination was rapid. The administered dose was mostly eliminated within 12 hours in the urine (>80% at 10 mg/kg; >60% at 500 mg/kg). Total radioactivity found in the urine was approximately 90-92% following signed or repeated low-dose treatment, and 81-85% following give or repeated low-dose treatment, and 81-85% following give or repeated low-dose treatment, and 81-85% following for another 5-7% at 10 mg/kg and 4-17% at 500 mg/kg. Thus, compared to the low dose, excretion of the high dose was slightly slower, and more of the compound was excreted in the feces. At 24 hours, 0.5% of the dose was found in expired air. By 24 hours post-dose, plasma levels had declined to <0.1 µg eq/g plasma in both sexes at 10 mg/kg and <5.0 µg eq/g plasma in both sexes at 10 mg/kg and <5.0 µg eq/g plasma in both sexes at 10 mg/kg and <5.0 µg eq/g plasma in both sexes at 50 mg/kg. The highest residue levels were observed in the skin (single dose) and carcass (repeated dose), but the mean recovery of radioactivity in the tissues/carcass at sacrifice was <0.6% of the dose. Identified compounds accounted for 87.6-91.6% of the administered dose in each group. In each group, the following compounds were isolated: parent accounted for <77.7-85.0% dose, OH-phenyl-XR-570 accounted for 2.8-3.7% dose, and 2 unidentified metabolites accounted for <2.8-3.7% dose, and 2 unidentified metabolites accounted for <2.8-3.7% dose, and less in the urine compared to the low dose. There were no sex-related differences in the metabolism or pharmacokinetics of the test compound. Similarly, the number of doses or the position of the radiolabel generally made no difference in	l .		
indicating a saturation of the absorption and/or excretion mechanisms at the high dose. The apparent volume of distribution was increased at the high dose, possibly indicative of increased tissue binding. Total recoveries at 168 hours post-dose were 95.9-100.2%. Elimination was rapid. The administered dose was mostly eliminated within 12 hours in the urine (~80% at 10 mg/kg). 760% at 500 mg/kg). Total radioactivity found in the urine was approximately 90-92% following single or repeated low-dose treatment, and 81-85% following israel or another 5.7% at 10 mg/kg and 14-17% at 500 mg/kg. Thus, compared to the low dose, excretion of the high dose was slightly slower, and more of the compand was excreted in the feces. At 24 hours, <0.5% of the dose was found in expired air. By 24 hours post-dose, plasma levels had declined to <0.1 µg ea/g plasma in both sexes at 10 mg/kg and <5.0 µg ea/g plasma in both sexes at 10 mg/kg and <5.0 µg ea/g plasma in both sexes at 10 mg/kg and <2.0 µg ea/g plasma in both sexes at 10 mg/kg and <3.0 µg ea/g plasma in both sexes at 10 mg/kg and <5.0 µg ea/g plasma in both sexes at 10 mg/kg and <5.0 µg ea/g plasma in both sexes at 10 mg/kg and <5.0 µg ea/g plasma in both sexes at 10 mg/kg and <5.0 µg ea/g plasma in both sexes at 500 mg/kg. The highest residue levels were observed in the skin (single dose) and carcass (repeated dose), but the mean recovery of radioactivity in the tissues/carcass at sacrifice was <0.6% of the dose. Identified compounds accounted for 87.6-91.6% of the administered dose in each group. In each group, the following compounds were isolated: parent accounted for 77.7-85.0% dose, OH-phenyl-XR-570 accounted for 3.1-90.9% dose, OH-phenyl-XR-570 accounted for 3.1-90.9% dose, OH-phenyl-XR-570 accounted for 60.23% dose, and less in the urine compared to the low dose. There were no sex-related differences in the metabolism or pharmacokinetics of the test compound. Similarly, the number of doses or the position of the radiolabel generally made no difference in the metabol	pharmacokinetics (rat)		
indicating a saturation of the absorption and/or excretion mechanisms at the high dose. The apparent volume of distribution was increased at the high dose, possibly indicative of increased tissue binding. Total recoveries at 168 hours post-dose were 95.9-100.2%. Elimination was rapid. The administered dose was mostly eliminated within 12 hours in the urine (>80% at 10 mg/kg). Fof6% at 500 mg/kg). Total radioactivity found in the urine was approximately 90-92% following single or repeated low-dose treatment, and 81-85% following treatment at 500 mg/kg. Radioactivity in the feces accounted for another 5-7% at 10 mg/kg and 14-17% at 500 mg/kg. Thus, compared to the low dose, excretion of the high dose was slightly slower, and more of the compund was excreted in the feces. At 24 hours, <0.5% of the dose was found in expired air. By 24 hours post-dose, plasma levels had declined to <0.1 µ g eq/g plasma in both sexes at 10 mg/kg and <5.0 µ g eq/g plasma in both sexes at 10 mg/kg and <5.0 µ g eq/g plasma in both sexes at 10 mg/kg and <3.0 µ g eq/g plasma in both sexes at 10 mg/kg and <3.0 µ g eq/g plasma in both sexes at 500 mg/kg. The highest residue levels were observed in the skin (single dose) and carcass (repeated dose), but the mean recovery of radioactivity in the tissues/carcass at sacrifice was <0.6% of the dose. Identified compounds accounted for 87.6-91.6% of the administered dose in each group. In each group, the following compounds were isolated: parent accounted for 77.7-85.0% dose, OH-phenyl-XR-570 accounted for 3.1-9.0% dose, OH-phenyl-XR-570 accounted for 5.1-9.0% dose, OH-phenyl-XR-570 accounted for 60.23% dose. In the high dose, more of the parent was isolated in the feces and less in the urine compared to the low dose. There were no sex-related differences in the metabolism or pharmacokinetics of the test compound. Similarly, the number of doses or the position of the radiolabel generally made no difference in the metabolism and pharmacokinetic profile.		10 and 500 mg/kg	plasma did not increase proportionally with dose, possibly
distribution was increased at the high dose, possibly indicative of increased tissue binding. Total recoveries at 168 hours post-dose were 95.9-100.2%. Elimination was rapid. The administered dose was mostly eliminated within 12 hours in the urine (-80% at 10 mg/kg), 60% at 500 mg/kg). Total radioactivity found in the urine was approximately 90-92% following single or repeated low-dose treatment, and 81-85% following treatment at 500 mg/kg. Radioactivity in the feces accounted for another 5-7% at 10 mg/kg and 14-17% at 500 mg/kg. Thus, compared to the low dose, excretion of the high dose was slightly slower, and more of the compound was excreted in the feces. At 24 hours, <0.5% of the dose was found in expired air. By 24 hours post-dose, plasma levels had declined to <0.1 µg eq/g plasma in both sexes at 10 mg/kg and <5.0 µg eq/g plasma in both sexes at 500 mg/kg. The highest residue levels were observed in the skin (single dose) and carcass (repeated dose), but the mean recovery of radioactivity in the tissues/carcas at sacrifice was <0.6% of the dose. Identified compounds accounted for 87.6-91.6% of the administered dose in each group. In each group, the following compounds were isolated: parent accounted for 77.7-85.0% dose, OH-phenyl-XR-570 accounted for 3.1-9.0% dose, OH-phenyl-XR-570 accounted for <0.32% dose, OH-phenyl-XR-570 accounted for <0.32% dose, OH-phenyl-XR-570 accounted for <1.8-3.7% dose, and 2 unidentified metabolites accounted for <0.32% dose, OH-phenyl-XR-50 accounted for serious describes accounted for <0.32% dose, of the parent was isolated in the feces and less in the urine compared to the low dose. There were no sex-related differences in the metabolism or pharmacokinetics of the test compound. Similarly, the number of doses or the position of the radiolabel generally made no difference in the metabolism and pharmacokinetic profile.			
distribution was increased at the high dose, possibly indicative of increased tissue binding. Total recoveries at 168 hours post-dose were 95.9-100.2%. Elimination was rapid. The administered dose was mostly eliminated within 12 hours in the urine (-80% at 10 mg/kg), 60% at 500 mg/kg). Total radioactivity found in the urine was approximately 90-92% following single or repeated low-dose treatment, and 81-85% following treatment at 500 mg/kg. Radioactivity in the feces accounted for another 5-7% at 10 mg/kg and 14-17% at 500 mg/kg. Thus, compared to the low dose, excretion of the high dose was slightly slower, and more of the compound was excreted in the feces. At 24 hours, <0.5% of the dose was found in expired air. By 24 hours post-dose, plasma levels had declined to <0.1 µg eq/g plasma in both sexes at 10 mg/kg and <5.0 µg eq/g plasma in both sexes at 500 mg/kg. The highest residue levels were observed in the skin (single dose) and carcass (repeated dose), but the mean recovery of radioactivity in the tissues/carcas at sacrifice was <0.6% of the dose. Identified compounds accounted for 87.6-91.6% of the administered dose in each group. In each group, the following compounds were isolated: parent accounted for 77.7-85.0% dose, OH-phenyl-XR-570 accounted for 3.1-9.0% dose, OH-phenyl-XR-570 accounted for <0.32% dose, OH-phenyl-XR-570 accounted for <0.32% dose, OH-phenyl-XR-570 accounted for <1.8-3.7% dose, and 2 unidentified metabolites accounted for <0.32% dose, OH-phenyl-XR-50 accounted for serious describes accounted for <0.32% dose, of the parent was isolated in the feces and less in the urine compared to the low dose. There were no sex-related differences in the metabolism or pharmacokinetics of the test compound. Similarly, the number of doses or the position of the radiolabel generally made no difference in the metabolism and pharmacokinetic profile.		1	mechanisms at the high dose. The apparent volume of
168 hours post-dose were 95.9-100.2%. Elimination was rapid. The administered dose was mostly eliminated within 12 hours in the urine (~80% at 10 mg/kg; ~60% at 500 mg/kg). Total radioactivity found in the urine was approximately 90-92% following single or repeated low-dose treatment, and 81-85% following treatment at 500 mg/kg. Radioactivity in the feces accounted for another 5-7% at 10 mg/kg and 14-17% at 500 mg/kg. Thus, compared to the low dose, excretion of the high dose was slightly slower, and more of the compound was excreted in the feces. At 24 hours, <0.5% of the dose was found in expired air. By 24 hours post-dose, plasma levels had declined to <0.1 μg eq/g plasma in both sexes at 10 mg/kg and <5.0 μg eq/g plasma in both sexes at 10 mg/kg and <5.0 μg eq/g plasma in both sexes at 500 mg/kg. The highest residue levels were observed in the skin (single dose) and carcass (repeated dose), but the mean recovery of radioactivity in the tissues/carcass at sacrifice was <0.6% of the dose. Identified compounds accounted for 87.6-91.6% of the administered dose in each group. In each group, the following compounds were isolated: parent accounted for 77.7-85.0% dose, OH-phenyl-XR-570 accounted for 3.1-9.0% dose, OH-phenyl-XR-570 sulfate conjugate accounted for <2.8-3.7% dose, and 2 unidentified metabolites accounted for <-0.32% dose. In the high dose, more of the parent was isolated in the feces and less in the urine compared to the low dose. There were no sex-related differences in the metabolism or pharmacokinetics of the test compound. Similarly, the number of doses or the position of the radiolabel generally made no difference in the metabolism and pharmacokinetic profile.			distribution was increased at the high dose, possibly
168 hours post-dose were 95.9-100.2%. Elimination was rapid. The administered dose was mostly eliminated within 12 hours in the urine (~80% at 10 mg/kg; ~60% at 500 mg/kg). Total radioactivity found in the urine was approximately 90-92% following single or repeated low-dose treatment, and 81-85% following treatment at 500 mg/kg. Radioactivity in the feces accounted for another 5-7% at 10 mg/kg and 14-17% at 500 mg/kg. Thus, compared to the low dose, excretion of the high dose was slightly slower, and more of the compound was excreted in the feces. At 24 hours, <0.5% of the dose was found in expired air. By 24 hours post-dose, plasma levels had declined to <0.1 μg eq/g plasma in both sexes at 10 mg/kg and <5.0 μg eq/g plasma in both sexes at 10 mg/kg and <5.0 μg eq/g plasma in both sexes at 500 mg/kg. The highest residue levels were observed in the skin (single dose) and carcass (repeated dose), but the mean recovery of radioactivity in the tissues/carcass at sacrifice was <0.6% of the dose. Identified compounds accounted for 87.6-91.6% of the administered dose in each group. In each group, the following compounds were isolated: parent accounted for 77.7-85.0% dose, OH-phenyl-XR-570 accounted for 3.1-9.0% dose, OH-phenyl-XR-570 sulfate conjugate accounted for <2.8-3.7% dose, and 2 unidentified metabolites accounted for <-0.32% dose. In the high dose, more of the parent was isolated in the feces and less in the urine compared to the low dose. There were no sex-related differences in the metabolism or pharmacokinetics of the test compound. Similarly, the number of doses or the position of the radiolabel generally made no difference in the metabolism and pharmacokinetic profile.			indicative of increased tissue binding. Total recoveries at
12 hours in the urine (>80% at 10 mg/kg; >60% at 500 mg/kg). Total radioactivity found in the urine was approximately 90-92% following single or repeated low-dose treatment, and 81-85% following treatment at 500 mg/kg. Radioactivity in the feces accounted for another 5-7% at 10 mg/kg and 14-17% at 500 mg/kg. Thus, compared to the low dose, excretion of the high dose was slightly slower, and more of the compound was excreted in the feces. At 24 hours, <0.5% of the dose was found in expired air. By 24 hours post-dose, plasma levels had declined to <0.1 µg eq/g plasma in both sexes at 10 mg/kg and <5.0 µg eq/g plasma in both sexes at 500 mg/kg. The highest residue levels were observed in the skin (single dose) and carcass (repeated dose), but the mean recovery of radioactivity in the tissues/carcass at sacrifice was <0.6% of the dose. Identified compounds accounted for 87.6-91.6% of the administered dose in each group. In each group, the following compounds were isolated: parent accounted for 77.7-85.0% dose, OH-phenyl-XR-570 sulfate conjugate accounted for 2.8-3.7% dose, oH-phenyl-XR-570 sulfate conjugate accounted for <0.32% dose. In the high dose, more of the parent was isolated in the feces and less in the urine compared to the low dose. There were no sex-related differences in the metabolism or pharmacokinetics of the test compound. Similarly, the number of doses or the position of the radiolabel generally made no difference in the metabolism and pharmacokinetic profile.			
mg/kg). Total radioactivity found in the urine was approximately 90-92% following single or repeated lowdose treatment, and 81-85% following treatment at 500 mg/kg. Radioactivity in the feces accounted for another 5-7% at 10 mg/kg and 14-17% at 500 mg/kg. Thus, compared to the low dose, excretion of the high dose was slightly slower, and more of the compound was excreted in the feces. At 24 hours, <0.5% of the dose was found in expired air. By 24 hours post-dose, plasma levels had declined to <0.1 µg eq/g plasma in both sexes at 10 mg/kg and <5.0 µg eq/g plasma in both sexes at 10 mg/kg. The highest residue levels were observed in the skin (single dose) and carcass (repeated dose), but the mean recovery of radioactivity in the tissues/carcass at sacrifice was <0.6% of the dose. Identified compounds accounted for 87.6-91.6% of the administered dose in each group. In each group, the following compounds were isolated: parent accounted for 77.7-85.0% dose, OH-phenyl-XR-570 accounted for 3.1-9.0% dose, OH-phenyl-XR-570 sulfate conjugate accounted for <2.8-3.7% dose, and 2 unidentified metabolites accounted for <0.32% dose. In the high dose, more of the parent was isolated in the feces and less in the urine compared to the low dose. There were no sex-related differences in the metabolism or pharmacokinetics of the test compound. Similarly, the number of doses or the position of the radiolabel generally made no difference in the metabolism and pharmacokinetic profile.			rapid. The administered dose was mostly eliminated within
approximately 90-92% following single or repeated low-dose treatment, and 81-85% following treatment at 500 mg/kg. Radioactivity in the feces accounted for another 5-7% at 10 mg/kg and 14-17% at 500 mg/kg. Thus, compared to the low dose, excretion of the high dose was slightly slower, and more of the compound was excreted in the feces. At 24 hours, -0.5% of the dose was found in expired air. By 24 hours post-dose, plasma levels had declined to <0.1 μg eq/g plasma in both sexes at 10 mg/kg and <5.0 μg eq/g plasma in both sexes at 10 mg/kg and <5.0 μg eq/g plasma in both sexes at 10 mg/kg and csrciate levels were observed in the skin (single dose) and carcass (repeated dose), but the mean recovery of radioactivity in the tissues/carcass at sacrifice was <0.6% of the dose. Identified compounds accounted for 87.6-91.6% of the administered dose in each group. In each group, the following compounds were isolated: parent accounted for 77.7-85.0% dose, OH-phenyl-XR-570 accounted for 3.1-9.0% dose, OH-phenyl-XR-570 accounted for 3.1-9.0% dose, OH-phenyl-XR-570 sulfate conjugate accounted for <=0.32% dose. In the high dose, more of the parent was isolated in the feces and less in the urine compared to the low dose. There were no sex-related differences in the metabolism or pharmacokinetics of the test compound. Similarly, the number of doses or the position of the radiolabel generally made no difference in the metabolism and pharmacokinetic profile.			
dose treatment, and 81-85% following treatment at 500 mg/kg. Radioactivity in the feces accounted for another 5-7% at 10 mg/kg and 14-17% at 500 mg/kg. Thus, compared to the low dose, excretion of the high dose was slightly slower, and more of the compound was excreted in the feces. At 24 hours, <0.5% of the dose was found in expired air. By 24 hours post-dose, plasma levels had declined to <0.1 μg eq/g plasma in both sexes at 10 mg/kg and <5.0 μg eq/g plasma in both sexes at 10 mg/kg. The highest residue levels were observed in the skin (single dose) and carcass (repeated dose), but the mean recovery of radioactivity in the tissues/carcass at sacrifice was <0.6% of the dose. Identified compounds accounted for 87.6-91.6% of the administered dose in each group. In each group, the following compounds were isolated: parent accounted for 77.7-85.0% dose, OH-phenyl-XR-570 accounted for 3.1-9.0% dose, OH-phenyl-XR-570 sulfate conjugate accounted for 2.8-3.7% dose, and 2 unidentified metabolites accounted for 2.8-3.7% dose. In the high dose, more of the parent was isolated in the feces and less in the urine compared to the low dose. There were no sex-related differences in the metabolism or pharmacokinetics of the test compound. Similarly, the number of doses or the position of the radiolabel generally made no difference in the metabolism and pharmacokinetic profile.			
mg/kg. Radioactivity in the feces accounted for another 5-7% at 10 mg/kg and 14-17% at 500 mg/kg. Thus, compared to the low dose, excretion of the high dose was slightly slower, and more of the compound was excreted in the feces. At 24 hours, <0.5% of the dose was found in expired air. By 24 hours post-dose, plasma levels had declined to <0.1 µg eq/g plasma in both sexes at 10 mg/kg and <5.0 µg eq/g plasma in both sexes at 10 mg/kg. The highest residue levels were observed in the skin (single dose) and carcass (repeated dose), but the mean recovery of radioactivity in the tissues/carcass at sacrifice was <0.6% of the dose. Identified compounds accounted for 87.6-91.6% of the administered dose in each group. In each group, the following compounds were isolated: parent accounted for 77.7-85.0% dose, OH-phenyl-XR-570 accounted for 3.1-9.0% dose, OH-phenyl-XR-570 accounted for 3.1-9.0% dose, OH-phenyl-XR-570 sulfate conjugate accounted for <2.8-3.7% dose, and 2 unidentified metabolites accounted for <0.32% dose. In the high dose, more of the parent was isolated in the feces and less in the urine compared to the low dose. There were no sex-related differences in the metabolism or pharmacokinetics of the test compound. Similarly, the number of doses or the position of the radiolabel generally made no difference in the metabolism and pharmacokinetic profile.			
5-7% at 10 mg/kg and 14-17% at 500 mg/kg. Thus, compared to the low dose, excretion of the high dose was slightly slower, and more of the compound was excreted in the feces. At 24 hours, <0.5% of the dose was found in expired air. By 24 hours post-dose, plasma levels had declined to <0.1 µg eq/g plasma in both sexes at 10 mg/kg and <5.0 µg eq/g plasma in both sexes at 500 mg/kg. The highest residue levels were observed in the skin (single dose) and carcass (repeated dose), but the mean recovery of radioactivity in the tissues/carcass at sacrifice was <0.6% of the dose. Identified compounds accounted for 87.6-91.6% of the administered dose in each group. In each group, the following compounds were isolated: parent accounted for 77.7-85.0% dose, OH-phenyl-XR-570 accounted for 3.1-9.0% dose, OH-phenyl-XR-570 sulfate conjugate accounted for 2.8-3.7% dose, and 2 unidentified metabolites accounted for <0.32% dose. In the high dose, more of the parent was isolated in the feces and less in the urine compared to the low dose. There were no sex-related differences in the metabolism or pharmacokinetics of the test compound. Similarly, the number of doses or the position of the radiolabel generally made no difference in the metabolism and pharmacokinetic profile.			
compared to the low dose, excretion of the high dose was slightly slower, and more of the compound was excreted in the feces. At 24 hours, <0.5% of the dose was found in expired air. By 24 hours post-dose, plasma levels had declined to <0.1 µg eq/g plasma in both sexes at 10 mg/kg and <5.0 µg eq/g plasma in both sexes at 10 mg/kg. The highest residue levels were observed in the skin (single dose) and carcass (repeated dose), but the mean recovery of radioactivity in the tissues/carcass at sacrifice was <0.6% of the dose. Identified compounds accounted for 87.6-91.6% of the administered dose in each group. In each group, the following compounds were isolated: parent accounted for 77.7-85.0% dose, OH-phenyl-XR-570 accounted for 3.1-9.0% dose, OH-phenyl-XR-570 sulfate conjugate accounted for 2.8-3.7% dose, and 2 unidentified metabolites accounted for <=0.32% dose. In the high dose, more of the parent was isolated in the feces and less in the urine compared to the low dose. There were no sex-related differences in the metabolism or pharmacokinetics of the test compound. Similarly, the number of doses or the position of the radiolabel generally made no difference in the metabolism and pharmacokinetic profile.		1	
slightly slower, and more of the compound was excreted in the feces. At 24 hours, <0.5% of the dose was found in expired air. By 24 hours, post-dose, plasma levels had declined to <0.1 µg eq/g plasma in both sexes at 10 mg/kg and <5.0 µg eq/g plasma in both sexes at 10 mg/kg. The highest residue levels were observed in the skin (single dose) and carcass (repeated dose), but the mean recovery of radioactivity in the tissues/carcass at sacrifice was <0.6% of the dose. Identified compounds accounted for 87.6-91.6% of the administered dose in each group. In each group, the following compounds were isolated: parent accounted for 77.7-85.0% dose, OH-phenyl-XR-570 accounted for 3.1-9.0% dose, OH-phenyl-XR-570 sulfate conjugate accounted for <2.8-3.7% dose, and 2 unidentified metabolites accounted for <=0.32% dose. In the high dose, more of the parent was isolated in the feces and less in the urine compared to the low dose. There were no sex-related differences in the metabolism or pharmacokinetics of the test compound. Similarly, the number of doses or the position of the radiolabel generally made no difference in the metabolism and pharmacokinetic profile.  870.7600  Dermal penetration (species)	İ		
the feces. At 24 hours, <0.5% of the dose was found in expired air. By 24 hours post-dose, plasma levels had declined to <0.1 µg eq/g plasma in both sexes at 10 mg/kg and <5.0 µg eq/g plasma in both sexes at 500 mg/kg. The highest residue levels were observed in the skin (single dose) and carcass (repeated dose), but the mean recovery of radioactivity in the tissues/carcass at sacrifice was <0.6% of the dose. Identified compounds accounted for 87.6-91.6% of the administered dose in each group. In each group, the following compounds were isolated: parent accounted for 77.7-85.0% dose, OH-phenyl-XR-570 accounted for 3.1-9.0% dose, OH-phenyl-XR-570 sulfate conjugate accounted for <2.8-3.7% dose, and 2 unidentified metabolites accounted for <=0.32% dose. In the high dose, more of the parent was isolated in the feces and less in the urine compared to the low dose. There were no sex-related differences in the metabolism or pharmacokinetics of the test compound. Similarly, the number of doses or the position of the radiolabel generally made no difference in the metabolism and pharmacokinetic profile.  870.7600  Dermal penetration (species)			
expired air. By 24 hours post-dose, plasma levels had declined to <0.1 µg eq/g plasma in both sexes at 10 mg/kg and <5.0 µg eq/g plasma in both sexes at 500 mg/kg. The highest residue levels were observed in the skin (single dose) and carcass (repeated dose), but the mean recovery of radioactivity in the tissues/carcass at sacrifice was <0.6% of the dose. Identified compounds accounted for 87.6-91.6% of the administered dose in each group. In each group, the following compounds were isolated: parent accounted for 77.7-85.0% dose, OH-phenyl-XR-570 accounted for 3.1-9.0% dose, OH-phenyl-XR-570 sulfate conjugate accounted for 2.8-3.7% dose, and 2 unidentified metabolites accounted for <=0.32% dose. In the high dose, more of the parent was isolated in the feces and less in the urine compared to the low dose. There were no sex-related differences in the metabolism or pharmacokinetics of the test compound. Similarly, the number of doses or the position of the radiolabel generally made no difference in the metabolism and pharmacokinetic profile.  870.7600  Dermal penetration (species)	1	{	
declined to <0.1 μg eq/g plasma in both sexes at 10 mg/kg and <5.0 μg eq/g plasma in both sexes at 500 mg/kg. The highest residue levels were observed in the skin (single dose) and carcass (repeated dose), but the mean recovery of radioactivity in the tissues/carcass at sacrifice was <0.6% of the dose. Identified compounds accounted for 87.6-91.6% of the administered dose in each group. In each group, the following compounds were isolated: parent accounted for 77.7-85.0% dose, OH-phenyl-XR-570 accounted for 2.8-3.7% dose, and 2 unidentified metabolites accounted for 2.8-3.7% dose. In the high dose, more of the parent was isolated in the feces and less in the urine compared to the low dose. There were no sex-related differences in the metabolism or pharmacokinetics of the test compound. Similarly, the number of doses or the position of the radiolabel generally made no difference in the metabolism and pharmacokinetic profile.			
and <5.0 µg eq/g plasma in both sexes at 500 mg/kg. The highest residue levels were observed in the skin (single dose) and carcass (repeated dose), but the mean recovery of radioactivity in the tissues/carcass at sacrifice was <0.6% of the dose. Identified compounds accounted for 87.6-91.6% of the administered dose in each group. In each group, the following compounds were isolated: parent accounted for 77.7-85.0% dose, OH-phenyl-XR-570 accounted for 3.1-9.0% dose, OH-phenyl-XR-570 sulfate conjugate accounted for 2.8-3.7% dose, and 2 unidentified metabolites accounted for <=0.32% dose. In the high dose, more of the parent was isolated in the feces and less in the urine compared to the low dose. There were no sex-related differences in the metabolism or pharmacokinetics of the test compound. Similarly, the number of doses or the position of the radiolabel generally made no difference in the metabolism and pharmacokinetic profile.  870.7600  Dermal penetration (species)			
highest residue levels were observed in the skin (single dose) and carcass (repeated dose), but the mean recovery of radioactivity in the tissues/carcass at sacrifice was <0.6% of the dose. Identified compounds accounted for 87.6-91.6% of the administered dose in each group. In each group, the following compounds were isolated: parent accounted for 77.7-85.0% dose, OH-phenyl-XR-570 accounted for 3.1-9.0% dose, OH-phenyl-XR-570 sulfate conjugate accounted for 2.8-3.7% dose, and 2 unidentified metabolites accounted for <=0.32% dose. In the high dose, more of the parent was isolated in the feces and less in the urine compared to the low dose. There were no sex-related differences in the metabolism or pharmacokinetics of the test compound. Similarly, the number of doses or the position of the radiolabel generally made no difference in the metabolism and pharmacokinetic profile.  870.7600  Dermal penetration (species)			
dose) and carcass (repeated dose), but the mean recovery of radioactivity in the tissues/carcass at sacrifice was <0.6% of the dose. Identified compounds accounted for 87.6-91.6% of the administered dose in each group. In each group, the following compounds were isolated: parent accounted for 77.7-85.0% dose, OH-phenyl-XR-570 accounted for 3.1-9.0% dose, OH-phenyl-XR-570 sulfate conjugate accounted for 2.8-3.7% dose, and 2 unidentified metabolites accounted for <=0.32% dose. In the high dose, more of the parent was isolated in the feces and less in the urine compared to the low dose. There were no sex-related differences in the metabolism or pharmacokinetics of the test compound. Similarly, the number of doses or the position of the radiolabel generally made no difference in the metabolism and pharmacokinetic profile.  870.7600  Dermal penetration (species)			
radioactivity in the tissues/carcass at sacrifice was <0.6% of the dose. Identified compounds accounted for 87.6-91.6% of the administered dose in each group. In each group, the following compounds were isolated: parent accounted for 77.7-85.0% dose, OH-phenyl-XR-570 accounted for 3.1-9.0% dose, OH-phenyl-XR-570 sulfate conjugate accounted for 2.8-3.7% dose, and 2 unidentified metabolites accounted for <=0.32% dose. In the high dose, more of the parent was isolated in the feces and less in the urine compared to the low dose. There were no sex-related differences in the metabolism or pharmacokinetics of the test compound. Similarly, the number of doses or the position of the radiolabel generally made no difference in the metabolism and pharmacokinetic profile.  870.7600  Dermal penetration (species)			
the dose. Identified compounds accounted for 87.6-91.6% of the administered dose in each group. In each group, the following compounds were isolated: parent accounted for 77.7-85.0% dose, OH-phenyl-XR-570 accounted for 3.1-9.0% dose, OH-phenyl-XR-570 sulfate conjugate accounted for 2.8-3.7% dose, and 2 unidentified metabolites accounted for <=0.32% dose. In the high dose, more of the parent was isolated in the feces and less in the urine compared to the low dose. There were no sex-related differences in the metabolism or pharmacokinetics of the test compound. Similarly, the number of doses or the position of the radiolabel generally made no difference in the metabolism and pharmacokinetic profile.  870.7600  Dermal penetration (species)			
of the administered dose in each group. In each group, the following compounds were isolated: parent accounted for 77.7-85.0% dose, OH-phenyl-XR-570 accounted for 3.1-9.0% dose, OH-phenyl-XR-570 sulfate conjugate accounted for 2.8-3.7% dose, and 2 unidentified metabolites accounted for <=0.32% dose. In the high dose, more of the parent was isolated in the feces and less in the urine compared to the low dose. There were no sex-related differences in the metabolism or pharmacokinetics of the test compound. Similarly, the number of doses or the position of the radiolabel generally made no difference in the metabolism and pharmacokinetic profile.  870.7600  Dermal penetration (species)			
following compounds were isolated: parent accounted for 77.7-85.0% dose, OH-phenyl-XR-570 accounted for 3.1-9.0% dose, OH-phenyl-XR-570 sulfate conjugate accounted for 2.8-3.7% dose, and 2 unidentified metabolites accounted for <=0.32% dose. In the high dose, more of the parent was isolated in the feces and less in the urine compared to the low dose. There were no sex-related differences in the metabolism or pharmacokinetics of the test compound. Similarly, the number of doses or the position of the radiolabel generally made no difference in the metabolism and pharmacokinetic profile.  870.7600  Dermal penetration (species)		(	
77.7-85.0% dose, OH-phenyl-XR-570 accounted for 3.1- 9.0% dose, OH-phenyl-XR-570 sulfate conjugate accounted for 2.8-3.7% dose, and 2 unidentified metabolites accounted for <=0.32% dose. In the high dose, more of the parent was isolated in the feces and less in the urine compared to the low dose. There were no sex-related differences in the metabolism or pharmacokinetics of the test compound. Similarly, the number of doses or the position of the radiolabel generally made no difference in the metabolism and pharmacokinetic profile.  870.7600  Dermal penetration (species)			
9.0% dose, OH-phenyl-XR-570 sulfate conjugate accounted for 2.8-3.7% dose, and 2 unidentified metabolites accounted for <=0.32% dose. In the high dose, more of the parent was isolated in the feces and less in the urine compared to the low dose. There were no sex-related differences in the metabolism or pharmacokinetics of the test compound. Similarly, the number of doses or the position of the radiolabel generally made no difference in the metabolism and pharmacokinetic profile.  870.7600  Dermal penetration (species)			
for 2.8-3.7% dose, and 2 unidentified metabolites accounted for <=0.32% dose. In the high dose, more of the parent was isolated in the feces and less in the urine compared to the low dose. There were no sex-related differences in the metabolism or pharmacokinetics of the test compound. Similarly, the number of doses or the position of the radiolabel generally made no difference in the metabolism and pharmacokinetic profile.  870.7600  Dermal penetration (species)			
for <=0.32% dose. In the high dose, more of the parent was isolated in the feces and less in the urine compared to the low dose. There were no sex-related differences in the metabolism or pharmacokinetics of the test compound. Similarly, the number of doses or the position of the radiolabel generally made no difference in the metabolism and pharmacokinetic profile.  870.7600  Dermal penetration (species)			
isolated in the feces and less in the urine compared to the low dose. There were no sex-related differences in the metabolism or pharmacokinetics of the test compound. Similarly, the number of doses or the position of the radiolabel generally made no difference in the metabolism and pharmacokinetic profile.  870.7600  Dermal penetration (species)		j	
low dose. There were no sex-related differences in the metabolism or pharmacokinetics of the test compound. Similarly, the number of doses or the position of the radiolabel generally made no difference in the metabolism and pharmacokinetic profile.  870.7600  Dermal penetration (species)			
metabolism or pharmacokinetics of the test compound.  Similarly, the number of doses or the position of the radiolabel generally made no difference in the metabolism and pharmacokinetic profile.  870,7600  Dermal penetration (species)	J		
Similarly, the number of doses or the position of the radiolabel generally made no difference in the metabolism and pharmacokinetic profile.  870.7600  Dermal penetration (species)			
radiolabel generally made no difference in the metabolism and pharmacokinetic profile.  870.7600  Dermal penetration (species)			
and pharmacokinetic profile.  870.7600  Dermal penetration (species)			
Dermal penetration (species)			
Dermal penetration (species)	870.7600		
(species)	•		
Special studies		]	
	Special studies		