Development of QRA II

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Starting point for the review

- How has the science advanced since QRA I?
- Is the QRA simply one aspect of general toxicology eg in terms of safety factors or must it be addressed differently?
- How do we define the population are we trying to protect, everyone?
- Can each unanticipated increase in allergy caused by an individual fragrance be assigned to failure of:
 - the methodology itself?
 - its application?
 - use of its outcome?

What are we trying to achieve in the short term (June/ July2014)?

A practical methodology that can be widely used that is:

- Effective in terms of improved consumer protection
- A significant improvement on existing methodology
- Based on current scientific and clinical knowledge both on fragrances and other dermal allergens
- Acceptable to regulatory authorities

issues that need to be considered

- Is the hazard end point for the QRA:
- -Threshold for induction?
- -Threshold for sensitisation even in the absence of allergy?
- -The threshold for allergy?
- What is the range (in dose per unit area terms) of relevant inter-individual variability in the population group of concern in response to fragrance exposure. And are the reasons for this variability understood and quantifiable?
- What is the range of exposure of the population group of concern to a particular fragrance (and related chemicals?) and how should this information be used in the QRA?

Main differences between QRA I and QRA II?

 Use of Creme model on actual exposure to replace conservative assumptions on exposure.

 Use of current scientific and clinical knowledge for the selection of appropriate SAF's

Other?

Consideration of exposure

Scope: simple external exposure or including physicochemical factors (eg stability, matrix, chemical build up in skin due to use frequency) that influence skin penetration

Guideline requirement: how to use aggregate exposure data.

Feedback loop: how to use data from clinical experience, substantial increases in use, other product exposure.

Consideration of safety (uncertainty) factors

- Application: based on scientific /clinical data, unambiguous, simple to apply and transparent.
 Separate consideration of fragrance QRA and individual product QRA?
- How many?: As few as possible or specific factors for each known variable
- Assigned values: Conservative and potential to reduce or minimal and potential to increase.
- Comparisons: Should the SAF selection take account of those used in other domains for dermal allergens

Issues not specifically addressed so far include:

- Whether additional SAF's are needed to allow for:
 - pre and pro hapten conversion to haptens
- reduction in methods available to identify the allergic potential of new fragrances.
- * Utilisation of data bases eg on non fragrance allergens / relevant on-going activities on non-fragrances and non animal tests in WoE
- Evidence to support the effectiveness of QRA II
- Cumulative exposure of MoA related chemicals

What do we need for the next workshop?

A working draft of the proposed QRA II for finalisation which:

- -is adapted from QRA I
- -is supported by suitable case histories
- -is in a format likely to be acceptable to the JRC and SCCS
- -highlights important gaps/areas where decisions are still required

Further steps

Develop an action plan to:

- Implement of QRAII widely
- Gather data to assess the effectiveness of QRA II.
- Further progress of the QRA II model to narrow uncertainties
- Adapt the QRA for new fragrances in the absence of opportunities to use animal test.