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EVALUATION OF EUTHYMIC HAIRLESS GUINEA PIGS [Crl:IAF(HA)BR] AS AN ANIMAL MODEL FOR VESICANT INJURY



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PREFACE

The work described in this report is authorized under the US Army Medical Research Institute of Chemical Defense (USAMRICD) animal use protocol number 1-20-88-000-B-497, "Evaluation of Euthymic Hairless Guinea Pigs [Crl:IAF(HA)ER] as an Animal Model for Vesicant Injury." The experimental results/data are recorded in USAMRICD laboratory notebook number 064-88.

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post-exposure in hairless guinea pigs.

INTRODUCITION

Research efforts at the USAMRICD to elucidate the mechanism of action, develop pretreatments and/or develops therapies for sulfur mustard (HD) skin toxicity have been hampered by the lack of a suitable experimental animal model. A literature review and discussion with institute investigators revealed that there is not a definitive animal model that develops elevated blisters/vesicles like those seen in human skin following exposure to sulfur mustard (HD). Re-epithelialized thermally burned guinea pig skin, bird skin, dog mammary gland skin, frog skin, and rabbit ear skin have been reported to form vesicles or vesicle-like structures following applications of HD.7 Haire quinea pigs have been used to study vesicant injury but blister formation has not been reported.^{1,3} It has been recently demonstrated that HD and lewisite form microblisters in swine.⁶ Investigators working during World War II speculated that animal skin does not blister like human skin because of (1) th increased number of hair follicles and/or hairs in animal skin, (2) the decreased number of sweat glands in animal skin, and/or (3) the decreased relative thickness of animal skin.' It is currently thought that fluid-filled blisters will not form unless (1) there is increased fluid accumulation/pressure resulting from the release of osmotically active tissue breakdown products following tissue injury; (2) the corneum and dermal layers are capable of retaining this fluid; and (3) there is a lack of intradermal structures (i.e., hair roots and/or follicles) which would otherwise prevent the accumulated fluid from separating the dermis from the epidermis.⁶ Euthymi hairless guinea pigs [Crl:IAF(HA)ER], a mutant strain that has only recently become commercially available, are basically devoid of hair, have a thickened epidermis when compared with normal haired guinea pigs, and have been shown to be equal, if not superior, to normal haired guinea pigs for contact sensitivit testing in that they manifest more uniform and superficial skin lesions.⁹

This study was conducted to evaluate the euthymic hairless guinea pig [Crl:IAF(HA)ER] as an animal model for HD skin toxicity compared to the normal haired guinea pig [Crl:(HA)ER].^b

MATERIALS AND METHODS

EXPERIMENTAL DESIGN:

Nineteen male guinea pigs (8 haired & 11 hairless) were divided into three experimental groups (see Table 1).

Groups I & II: Identical doses of neat HD were applied to the skin of haired and hairless guinea pigs in groups I & II. The exposed skin was examined at 24 and 48 hours post-exposure respectively for the presence of

^a Charles River Laboratories, Wilmington, MA 01887, U.S.A.

^b Charles River Laboratories, Wilmington, MA 01837, U.S.A.

gross, microscopic, and ultrastructural pathology. The unexposed skin from each animal served as the negative control.

Group III: Identical low doses of neat HD were applied to the skin of hairless guinea pigs. The exposed skin was examined at 24 hours post-exposure for the presence of gross, microscopic, and ultrastructural pathology.

TECHNICAL METHODS:

Animal Husbandry: Animals were maintained at 75-80° F. and 50% relative humidity. They are on a 12-hour d'urnal light cycle. Food and water were provided <u>ad libitum</u>. Animals were housed in individual polycarbonate shoe box cages with wood shavings prior to exposure to HD. Animals were housed in wire shoe box cages lined with an absorbent plastic-backed paper pad in a chemical fume hood during the post-exposure holding period.

Anesthesia/Analgesia: Guinea pigs were anesthetized with Ketamine HCL^C (30 mg/kg) and Xylazine^d (6 mg/kg) during the exposure and decontamination phases of the experiment. The ketamine and xylaxine were injected separately into the left and right lateral thigh muscles using tuberculin syringes and 26 gauge needles.

Methods of Restraint: Guinea pigs were manually restrained while they were being clipped and anesthetized. Anesthetized animals were secured with adhesive tape to a restraining board in sternal recumbency for the exposure and decontamination phases of the experiment.

Surgical Procedures: None.

Animal Preparation: On the day before the guinea pigs were scheduled to be dosed with HL, all animals were assigned an identification number and weighed to the nearest gram. The backs of the haired guinea pigs were clipped with a #40 clipper blade^e and wiped down with isopropyl alcohol. The backs of the hairless guinea pigs were also wiped with isopropyl alcohol. On the day of HD exposure the animals were anesthetized, exposure site reference points were marked on the skin with a black Sharpie^T permanent marker, and the animals were

^C Vetalar^T, 100 mg/ml. Parke-Davis, Division of Warner-Lambert Company, Morris Plains, NJ 07950, U.S.A.

^d Pompun^T, 20 mg/ml. Mobay Corporation, Animal Health Division, Shawnee, KS 66201, U.S.A.

⁹ Oster^T Golden A-5 Clipper. Oster Professional Products Department, Milwaukee, WI 53217, U.S.A. covered with a fenestrated (5 cm x 12 cm) plastic barrier drape^f taped in place so that only exposure sites on the animal backs remained exposed. The 8 exposure sites per animal were arranged in two parallel rows that were 1 cm to the left and right of the dorsal midline and had 2 cm spacing between sites (see Fig. 1).

HD Dosing: All HD dosing, post-exposure handling, and decontamination of animals and materials were performed IAW USAMRICD SOP No. 88-180-DA-13. "Cutaneous Applications of Sulfur Mustard (HD) on Guinea Pigs." Neat (liquid) HD was applied to the skin with either a 1.0 μ l⁹ or a 100 μ l^h syringe. Groups I & II animals had 4 doses of HD (0.5, 1.0, 2.0, & 4.0 μ l) applied to the 4 exposure sites on the left side of the dorsal midline (1 site/dose/animal) and no agent applied to the four (4) contralateral negative control sites to the right of the dorsal midline. Group III animals had 4 doses of agent (0.05, 0.1, 0.2, & 0.4 μ l) applied to the all 8 exposure sites (2 sites/dose/animal). The doses of HD were systematically rotated among the skin exposure sites to control for differences in skin trickness for all groups (see Table 2). The HD was allowed to remain in contact with the skin for 30 minutes for all groups. Following the 30 minute HD skin exposure the animals were placed in holding cages in the hood, allowed to recover from aresthecia, and held for 24 or 48 hours. Sample HD dosing worksheets are attached as Appendix A.

Euthanasia: Animals were euthanatized at the end of the 24 or 48 hour post-exposure holding period with a halot ane¹ overdose.¹⁰

Scoring of Gross Lesions: All sites were scored for lesion diameter, erythema and/or eschar (E/E) formation, and edema and/or blister (E/B) formation at either 24 hours (Groups I & III) or 48 hours (Group II) using a modified method for testing primary irritant substances.¹¹ The lesion diameter was measured to the nearest millimeter (mm) from the outermost edge of visible erythema. The lesion size for irregularly shaped lesions was the average of that lesion's longest and shortest dimension. The degree of E/E and E/B formation was scored on a scale of 0-4. Sample gross lesion worksheets are attached as Appendix B.

Light Microscopy: Following euthanasia and scoring of gross lesions the skin on the backs of the animals was excised using a #15 scalpel blade, taking care to include and not to traumatize all 8 skin sites/animal. The skin

^f 3M Steri-Drape^T, Style No. 102C. 3M Company, Medical Products Division, St. Paul, MN 55119, U.S.A.

⁹ Hamilton^T Model 7001N Microliter Syringe. Hamilton Company, Reno, NV 89502, U.S.A.

h Hamilton^T Model 710N Microliter Syringe. Hamilton Company, Reno, NV 89502, U.S.A.

ⁱ Halothane, U.S.P. Halocarbon Laboratories, Inc., Hackensack, NJ 07601, U.S.A.

specimens were immersed in a 4% formaldehyde:1% glutaraldehydw (4CF:1G) fixative⁵ for 2-3 hours. The lesions were then cut in half and the lateral 1/2 of each skin site was placed in 10% neutral buffered formalin (NBF) for at least 24 hours prior to trimming and processing the tissue for examination by light microscopy. The remaining medial 1/2 of each skin site was kept in 4CF:1G for electron microscopy (EM). All NBF fixed tissue specimens were embedded in glycol methacrylate (epon plastic) or paraffin, cut into 4 micrometer (μ m) thick sections, and stained with hematoxylin and eosin (H&E) using standard histology techniques. The extent of coagulative necrosis and the presence or absence of pathologic charges were scored for each specimen using the sample histopathology worksheet attached as Appendix C. The scoring of the lesions and the selection of tissue specimens for EM were done without knowledge of the dose of HD that had been applied (i.e., a "blind" control).

Electron Microscopy: Four skin specimens from skin exposure sites showing the best vesicle/cleft formation on light microscopy were submitted for scanning and transmission EM. Areas examined included centers of blisters and junctions of blistered and adjacent nonblistered skin. The 4CF:1G fixed tissues selected for transmission EM were transferred to a fresh solution of 4CF:1G and held at 4° C. for at least 48 hours. The tissues were then washed in buffer, post-fixed in 1% buffered osmium tetroxide, dehydrated in graded ethanols, embedded in epoxy resin, cut into 1 μ m semithin sections, stained with Humphrey's stain⁴ and examined by light microscopy to select appropriate areas for thin section analysis. Areas identified were cut into 1,000 Å thin sections and counterstained with lead citrate and uranyl acetate. Tissues selected for scanning EM were washed in buffer, dehydrated in graded ethanols, critical point dried, and sputter-coated with gold-palladium.

Data Analysis: The average lesion size, erythema/eschar score, and edema/blister score for each HD dose and observation time in the hairless guinea pig were compared to the corresponding haired counterpart. Lesion size data was analyzed using the Student's t-test ($H_0: \mu_1 = \mu_2; \alpha = 0.05;$ df = $n_1 + n_2 - 2$).² Erythema/eschar and cdema/blister data was analyzed using the Mann-Whitney Test ($H_0: M_1 = M_2; \alpha = 0.05$).²

RESULTS

CLINICAL OBSERVATIONS:

All animals tolerated the anesthetic regimen and restraint without complications. The hairless guinea pigs appeared to be much more sensitive to the HD than were the haired guinea pigs as evidenced by "he markedly visible erythema which developed within 7-30 minutes following the application of HD. The application of next HD to the skin also appeared to cause some degree of pruritus because numerous Group I & II animals scratched at the exposure sites within 3-5 hours following the application of HD to the point of causing selfinflicted breaks in the skin which complicated the scoring of gross lesions at the end of the 24 and 48 hour post-exposure holding periods. To alleviate this apparent pruritus and to minimize self-inflicted trauma, Group III animals

received a second dose of ketamine and xylazine 3 hours following the HD challenge.

GROSS PATHOLOGY:

All skin exposures to HD resulted in gross skin lesions consisting of well-defined, 'rreqularly shaped, and moderately elevated areas of swalling and crythema, whereas none of the negative control akin sites developed lesions (see Figure 2). At 24 hours post-exposure the size of the skin lesions ranged from 0-14 mm in haired animals and from 2-22 mm in hairless animals. At 48 hours post-exposure the size of the skin lesions ranged from 5-16 mm in haired animals and from 8-24 mm in hairless animals. The lesion diameter increased with both dose and/or time in both the haired and hairless guines pigs with the hairless quinea pigs having significantly larger lesions at corresponding doses at 24 hours post-exposure. There was no statistically significant difference in lesion size between the haired and hairless quines pigs for any of the doses at 48 hours post-exposure (see Tables 3-4 and Pictures 3-4). The erythema/eschar scores at 24 hours post-exposure rang-1 From 0-4 in haired animals and from 1-4 in hairless animals. At 48 hours post-exposure the erythema/eschar scores ranged from 1-4 in haired animals and from 2-4 in hairless animals. In haired guines pigs, scab formation occurred in 31.25% of the exposure sites at the 0.5-4.0 µl HD dosage level. In hairless animals, scab formation occurred in 59.38% of the exponence sites at the 0.5-4.0 μ 1 HD domage level and in 58.33% of the exposure sites at the 0.05-0.4 μ 1 HD domage level. The erythema/eschar scores increased slightly or not at all with increases in dose and/or time in both the haired and hairless guinea pigs with the hairless guines pigs having slightly highs scores at corresponding dose and time points (see Tables 3-4 and Figures 5-6). The edema/blister scores at 24 hours post-exposure ranged from 0-2 in haired animals and from 0-3 in hairless animals. At 48 hours post-soposure the edema/blister scores ranged from 1-2 in haired animals and from 1-3 in hairless animals. The edemn/blister scores increased slightly or not at all with increases in dose and/or time in both the heired and hairless guines pigs with the hairless guines pigs having slightly higher scores at corresponding dose and time points (see Tables 3-4 and Figures 7-8).

LIGHT MICPOSCOPY:

All skin exposures to HD resulted in skin lesions. The skin lesions typically consisted of coequiation necrosis of the epidemais and superficial dermis wherever HD had direct skin contact. The width of the necrotic areas (0.5-2.0 cm) was directly proportional to the dome of HD. Histologically, the necrosis involved the entire thickness of the epidemais and extended into the superficial dermal collegen (i.e., a total depth of 1-2 mm). Haired guinea pig skin reacted less neverely to identical domes of HD. Microblisters and less severe inflammatory changes developed within the epidemais adjacent to the congulation necrosis with microblister formation being more prevalent at lower HD domes. The morphologic changes seen in these areas consisted of ballooning degeneration and separation of basilar cells from adjacent cells and/or underlying dermis (see Figure 9). Clusters of neutrophils were sometimes present within the epidemais and often present in varying numbers within the

microblisters. Neutrophils were present in low numbers and were widely scattered throughout the dermal collagen. Collagen bundles subjacent to the site of application were usually mildly separated by edema fluid, and there were occasional small foci of hemorrhage present in some sections. Hair follicles commonly exhibited epithelial necrosis at their bases but not along the root sheaths. There was a moderate increase in numbers of neutrophils infiltrating the dermis in animals 48 hours post-exposure, as compared to 24 hours post-exposure, but other parameters remained essentially the same.

ELECTRON MICROSCOPY:

The 4 tissue specimens demonstrating the best examples of cleft/vesicle formation on light microscopy were from hairless guines pigm sacrificed at 24 hours post-exposure and exposed to 0.1, 0.2, 1.0, and 2.0 μ 1 of HD respectively. Semi-thin section analysis revealed the presence of microblisters at the dermal-spidermal junction (see Figure 10). The floor of the blister cavity was formed by an intact basal lamina in some cases and by remnants of a disrupted basal lamina in others. The upper boundary of the cavity was largely formed by plassalesse of intact basal calls of the stratum germinativum or by cellular debris of necrotic basal and supra-basal cells of the epidermis. Blister cavities were heavily infiltrated with inflammatory cells, recognized as neutrophils and macrophages, as was the underlying dermis. In most cases, cavities appeared to be interrupted by hair follicles which acted as lateral anchoring demarcatics points, while in others, cavities formed above follicles with follicular cells forming part of the floor of the blister. Blisters varied in size, up to 250 µm in width and up to 80 µm in height. Farly degenerative changes of the basal cell, signalled by paranuclear vacuolation and pylonosis, were most evident at the site of junction between normal and blistered akin. Ultrastructural factures of the lesion by thinsection analysis showed the total involvement of basal calls from essentially normal fine-structure at the perimeter of the blister to complete degeneration and necrosis at the centers of the blister (see Figure 11). This progression included perinuclear blabbing, plasmalessal defects, paranuclear vacuolation, coalescing cytoplasmic vacuoles, pychotic nuclei, lipid inclusions, lysosomal activity and electron opacity of organalles. Supra-basal cells of the epidermis were also involved to varying degrees especially in central regions of the blister cavity where basal calls were completely degenerated. Invading neutrophils and macrophages, actively phagocytizing degenerating basal cells and other cellular debris were in abundance within cavities. Basal laminae were disrupted and frayed with loosened fibers extending into the blister cavity. Hemidesmonomes, intact at the perimeter of the cavity, were interrupted at the site of the blister with anchoring filaments disabled and free from their attachments to the basal lamine. Within the durais proper, there was evidence of edems with large displacements of collagen burdles surrounding congested capillaries. Scanning EM showed to advantage and precision the extent, junctions, boundaries, and location of the blister cavities (see Figures 12-13). The three-dimensional nature of the blister, realized only through coanning EM, was useful in determining the relative role of hair follicies in demarcating the limits of some cavities and was especially informative as to the relative size of the blisters.

DISCUSSION AND CONCLUSIONS

The results of this study indicate that the hairless guinea pig is superior to the haired guinea pig as an animal model for studying HD-induced akin lesions. The hairless guinea pig skin was more sensitive to HD than was haired guinea pig skin at corresponding dose and time points. This increased sensitivity may be due to (1) the hair stubble on the haired animals acting as a physical barrier or (2) fundamental anatomical, biochemical, or immunological differences. There are advantages of the hairless guinea pig: (1) no shaving/clipping is required; (2) lower doses of HD can be used; (3) the resulting gross lesions are more readily visible and easily scored; and (4) the histopathologic lesions were more uniform and contained a higher incidence of microblister formation. A disadvantage of the hairless guinea pig is that they cost 60-70% more per animal.

To properly interpret the gross lesion data it is important to note that neat HD at a constant concentration was used for all exposures and that the delivered dose of HD to the skin was controlled by varying the volume of the droplet that was applied to the skin rather than by varying the concentration of HD in a fixed volume. This explains why we saw large increases in lesion diameters and basically no increases in E/E or E/B scores with increases in doses of HD on the same animal. Lesion diameter was directly proportional to the size/volume of the droplet of neat HD (i.e., the larger the droplet -- the larger the area of exposed skin -- the larger the resulting lesion). Conversely, the erythema/eschar and edema/blister scores which measure the severity of a lesion are functions of the dose per unit area which was ossentially the same for all HD doses (i.e., no change in dose/unit area -> no change in lesion severity).

The microscopic skin layions observed in hairless guines pig skin were comparable to those observed in pig skin exposed to HD.⁶ Both species exhibited histologic response to HD ranging from severe coagulation necrosis to mild basal cell involvement and microblister formation.

The ultrastructural correlate: of this study are reminiscent of the ultrastructural pathology of HD-induced blister formation in human skin grafted onto athymic nude mice.⁸ Although HD concentrations were not the same, the involvement of the basal cell, the location of the blister at the epidermal-dermal junction and the apparent disabling of the anchoring filaments of the hemidesmoscness are unequivocal. A persistent difference between the two studies is the pronounced infiltration of inflammatory cells in this study, which although noted within the previous study, was not to the same degree.





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Figure 9: Microblister in hairless guinea pig skin at 24 hours after exposure to 0.2 μ l of sulfur mustard (HD). Microblister cavity (mc), epidermis (e), dermis (d), hair follicles (hf), and polymorphonuclear cells (pmn). H&E.



Figure 11: Transmission electron micrographs of microblister cavity formation at the dermal-epidermal junction of the hairless guinea pig. A. At the perimeter of the blister cavity, basal calls (bc) of the stratum germinativum show progressive subcellular changes signalled by nuclear condensation of chromatin (nc), blebbing of the perimuclear envelope (pb), and paranuclear vacuolation (v). (12,000X) B. Area at the perimeter showing disabling of anchoring filaments (af) of the basal cell hemidesmosomes (hd). (30,000X) C. The cavity, infiltrated with neutrophils (ne) and cellular detritus, is demarcated by the basal lamina (bl) of the dermis (d) and degenerating basal cells and supra basal cells of the epidermis (epi). (9,000X)









epidermal junction of hairless guines pig skin. A. Area of non-blistered skin: epidermis (epi); dermis (d); kerstin (k); and collagen fibers (c). B. Area of microblister formation. Microblister cavity is bordered by calls of the epidermis at the roof and the basal lamins (b)) at the floor.



	NO. HAIRED	NO. HAIRLESS	DOSE RANGE	TIME
GROUP I	4	4	0.5-4.0 ul	24 hrs
GROUP II	4	4	6.5-4.0 ul	48 hrs
GROUP III	· 0	3	0.05-0.4 ul	24 hrs.

EXPERIMENTAL DESIGN TABLE 1:

ANIMAL NUMBER	SITZ 1L	SITE 2L	SITE 3L	SITE 4L	SITE 1R	SITE 2R	SITE JR	SITE 4R
I-1A	0.5	1.0	2.0	4.0	0	0	0	. 0
I-1B	0.5	1.0	2.0	4.0	0	0	0	0
I-2A	4.0	0.5	1.0	2.0	0	0	0	0
I-2B	4.0	0.5	1.0	2.0	0	0	0	0
I-3A	2.0	4.0	0.5	1.0	0	0	0	0
I-3B	2.0	4.0	0.5	1.0	0	0	0	0
I-4A	1.0	2.0	4.0	0.5	0	0	0	0
I-4B	1.0	2.0	4.0	0.5	0	0	0	0
II-1A	0.5	1.0	2.0	4.0	0.	0	0	. 0
II-1B	0.5	1.0	2.0	4.0	0	0	0	0
II-2A	4.0	0.5	1.0	2.0	0	0	0	0
II-2B	4.0	0.5	1.0	2.0	0	0	U	C
II-3A	2.0	4.0	0.5	1.0	· 0	0	0	n
II-38	2.0	4.0	0.5	1.0	0	, O	0	0
II-4A	1.0	2.0	4.0	0.5	0	0	<u>,</u> 0	0
II-4B	1.0	2.0	4.0	0.5	0	0	0	0
III-1B	0.05	0.1	0.2	0.4	0.4	0.2	0.1	0.05
III-2B	0.4	0.05	0.1	0.2	0.2	0.1	0.05	0.4
III-3B	0.2	0.4	0.05	0.1	0.1	0.05	0.4	0.2

TABLE 2: DOSES OF SULFUR MUSTARD (HD) APPLIED TO HAIRED AND HAIRLESS GUINEA PIG SKIN

Footnotes:

1.

Dose of HD is expressed in microliters (ul) Animal number alfanumeric code: Roman Numeral = Experimental group; Arabic Numeral = Individual/pair designator within an experimental 2.

group; A = Haired; B = Hairless.
3. Site code: Arabic numeral = site numbered from anterior to posterior;
L = Left; R = Right.

80	24 HOU	RS POST-EXI	POSURE	48 HOU	RS POST-EXI	POSURE
DOSE (ul)	DIAMETER (mm)	ERYTHEMA/ ESCHAR SCORE	EDEMA/ BLISTER SCORE	DIAMETER (2022)	ERYTHEMA/ ESCHAR SCORE	EDEMA/ BLISTER SCOPE
0.5	2.75	1.50	1.00	8.00	2.00	1.00
1.0	4.60	3.00	1.00	9.00	3.50	1.00
2.0	6.50	3.00	1.00	11.50	3.50	1.00
4.0	10.25	3.50	1.00	13.00	3.50	2.00
ERYTHEMA/ No erythe Slight er Moderate Severe er Eschar fo	FSCHAR SCO maythema (ba erythema (ythema (be rmation (n	RE: rely seen) pink) et red) ecrosis)	EDEM No e Signature Mode Seven Ender Blis	A/BLISTER dema ht edema (rate edema re edema (ter format	SCORE: barely seen (well defi raised >1 n ion	

TABLE 3: MEAN GROSS LESION DIAMETER, MEDIAN ERYTHEMA/ESCHAR SCORE, AND MEDIAN EDEMA/BLISTER SCORE AT 24 AND 48 HOURS POST-EXPOSURE IN HAIRED GUINEA PIGS.

TABLE 4: MEAN GROSS LESION DIAMETER, MEDIAN ERYTHEMA/ESCHAR SCORE, AND MEDIAN EDEMA/BLISTER SCORE AT 24 AND 48 HOURS POST-EXPOSURE IN HAIRLESS GUINEA PIGS.

an	24 HOU	rs post-exi	POSURE	48 HOU	RS POST-EX	Posure
DOSE (ul)	DIAMETER (mm)	ERYTHEMA/ ESCHAR SCORE	EDEMA/ BLISTER SCORE	DIAMETER (mm)	ERYTHEMA/ ESCHAR SCORE	EDEMA/ BLISTER SCORE
0.05	3.17	3.50	1.00	n/a	n/a	n/a
0.1	5.08	3.00	1.00	n/a	n/a	n/a
0.2	6.75	3.00	1.00	n/a	n/a	n/a
0.4	8.83	4.00	2.00	n/a	n/a	n/a
0.5	8.75	3.50	1.00	8.75	4.00	1.50
1.0	13.50	3.50	1.50	13.62	3.50	2.00
2.0	16.38	4.00	1.50	13.88	4.00	2.00
4.0	19.75	4.00	2.00	17.62	4.00	2.00
ERYTHEMA/ No erythe Slight er Koderate Severe er Eschar fo	ESCHAR SCO ma ythema (ba: erythema () ythema (be: rmation (no	RE: rely seen). pink) et red) ecrosis)	EDEM No e Slig Slig Seve Seve Seve	A/BLISTER dema ht edema () rate edema re edema () ter format	SCORE: barely seen (well def: raised >1 n ion	0 n)1 ined)2 mm)3

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		NESTHESIA						11-01-F		
							BULIN			
Keta	nmine (100	:(Tm/bm	30 mg/kg	M				HALLENG	N	
ž	ompum (20	1 (] u / bu	6 mg/kg 1	W	H	1/2800 0	SKIN SI7	N	EXPOSUL	TINE
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					0.5	1.0	2.0	0.4		
					••	0.5	1.0	2.0		
					• •		1.0	2.0		
				•	2.0	4.0	0.5	1.0		
					2.0	4.0	0.5	1.0		
					1.0	2.0.	4:0	0.5		
					1.0	2.0.	4.0	0.5		
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APPENDIX A

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NUN	Ket	aline (10)	1(11/200 (30 mg/k	WI D			GUI	TENCE		
Number of State			-(1=/=	e mg/kg		Æ.	B/BBOG GI	ITIG NINI		EXPOSUR	DIL D
	WEIGHT (grame)	KETANINE (00)	NONCIFUIK (00)	FINE TINE		ATTE 1 LAN	S TTS Lin	C STIO	A TTIS A ATTIS	PINT TINT	ENO TIND
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							2/5.		1 /50 -		
111-2B						. 1/1-	.05/L	1/1	2/1		
のでの時代の時代											
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APPENDIX A (cont.)

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APPENDIX B

					GROSS LESION MORKSHEET	
DOSE: .05 u	1 HD		~	A HOURS	POST-EXPOSURE	
NIMAL NO.	SITE	SIZE	E/E	E/B	NOTES	NOKING SISTEM
III-IB	11					
111-18	A R				-	S12E:
III-2B	2L					Diameter of the lesion measured in millimeters (mm) from the
111-2B	3R					outermost margin of visible erythema.
8C-111	3L					
III-3B	2R					
TOTAL						ERYTHEMA/ESCHAR SCORE: (E/E)
AVERAGE					•	No erythema0 Slight erythema (barely seen)1
DOSE: 0.1 u	1 HD		5	A HOURS	POST-EXPOSURE	Moderate erythema (pink)2 Severe erythema (beet red)3
ANIMAL NO.	SITE	SIZE	E/E	E/B	NOTES	Eschar (necrosis/sioughing)4
III-1B	2L					
111-1B	ЗR					
III-2B	3Ľ					EDEMA/BLISTER SCORE: (E/B)
111-2B	2R					No edema0
III-3B	4F					HOGERATE EGEMA (Well GETINEG)2 Severe edema (raised >1 mm)3
111-3B	IR	4.				BI18Cer
TOTAL				-		
AVERAGE						

APPENDIX B (cont.)

DENNAL	HISTOPATHOLOGY	WORK	LUSHS:					1		
ACCERSION NO.	BLOCK NO.	-	~	-	•	Γ			~	
ANTNAL I.D. NO.	SITE NO.	11	2L	3Ľ	1		1	ĸ	XC.	ŧ
LESION PRESENT (1.e., necrosis, vesicle	. etc.) (+/-)					Ĩ				
HORIZONTAL DIST. (mm)										
LESION DEPTH (mm) (1.e., depth of necro	eie)									
EPIDERMOLYSIS (+/-)										
ACANTHOLYSIS (+/-)										
PUSTULAR RPIDERMATITIS (+/-)										
VESICLE/CLEFT (+/-)							Γ			
DERMAL EDEMA (+/-)										
DERNAL CONGESTION (+/-)			1							
PUSTULAR DERUCATITIS (+/-)						Ī				
PERIVASCULITIS (+/-)										
POLLICULAR INVOLVENENT (1, medrosis)	(-/+)									
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APPENDIX C

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