



EUROTOX 2018, Brussels

Symposium: "Breeding IATAs for predicting DART by fusing high-dimensional data with biological knowledge"

Integrative modeling and AOP-based simulation of developmental toxicity

Thomas B. Knudsen, PhD

Developmental Systems Biologist

US EPA, National Center for Computational Toxicology

Chemical Safety for Sustainability Research Program

Virtual Tissue Models (VTM) project

knudsen.thomas@epa.gov

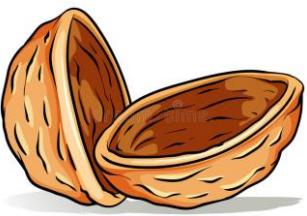
[ORCID 0000-0002-5036-596x](https://orcid.org/0000-0002-5036-596x)

DISCLAIMER: The views expressed are those of the presenters and do not reflect Agency policy.



Problem statement

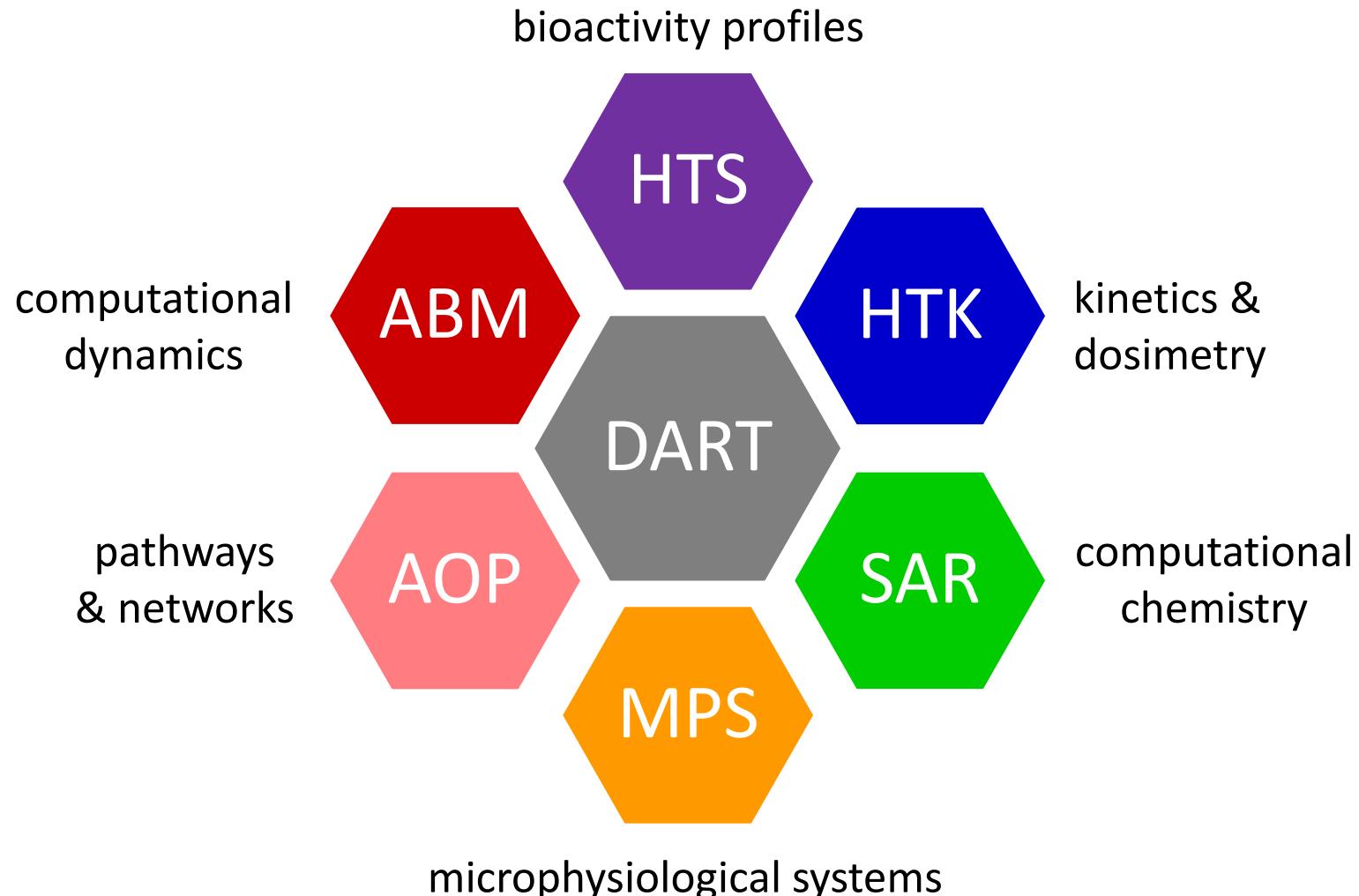
- Chemical exposure to a pregnant woman has the potential to affect her unborn child, leading to adverse birth outcomes and/or risks to early child development.
- Traditional animal-based methods for assessing prenatal developmental toxicity (OECD TG 414) expose pregnant rats and/or rabbits during organogenesis and necropsy at term.
- Under reauthorized TSCA (2016) the EPA must accelerate development of scientifically valid test methods to prioritize large numbers of chemicals with less reliance on animal testing.
- **Challenge:** advancing actionable alternatives to vertebrate animal testing for chemical safety assessment requires *in vitro* data and *in silico* models for complex systems.



In a nutshell ...

- Many alternative methods for developmental toxicity have been evaluated for 20 years; however, their application as NAMs in a regulatory setting is still poorly defined.
- IATAs can help focus DART resources by strategically targeting developmental hazards predicted by alternative *in vitro* assays and ‘non-testing’ *in silico* platforms.
- Advances in biomedical engineering and high-throughput screening enable *in vitro* profiling of chemical bioactivity for developmental processes and toxicities.
- Integration of *in vitro* data with *in silico* models that recapitulate tissue dynamics of embryonic development can reconstruct phenotypic systems synthetically.
- Computational biology is uniquely position to translate AOP-based IATAs predictively and mechanistically with regards to anatomical development.

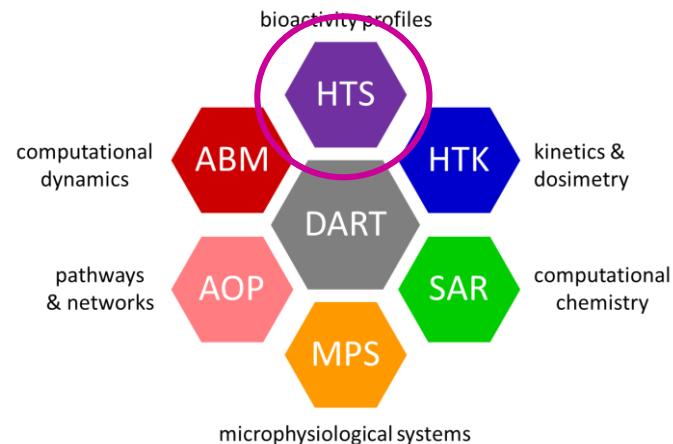
IATA: computational synthesis and integration



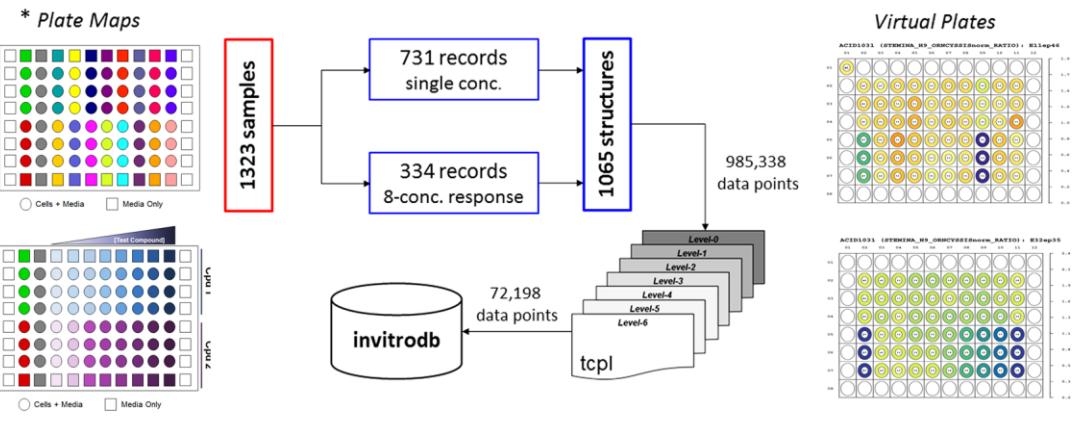
ToxCast STM platform: devTOX^{qP} assay from Stemina

Pluripotent H9 human embryonic stem cell metabolomics assay that "... identified the potential developmental toxicants in the test set with 77% accuracy (57% sensitivity, 100% specificity)."

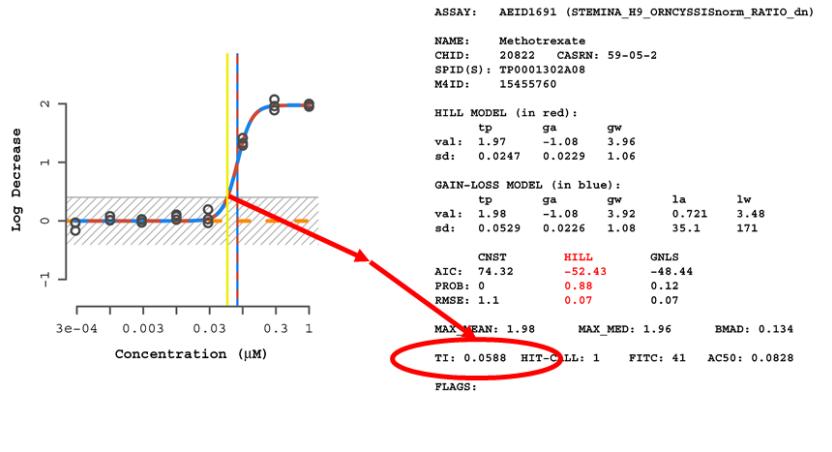
Palmer et al. (2013) Birth Def Res



Workflow



Example: Methotrexate



- Data processed through tcpl (Lvl 6) yielding teratogenic index (ORN:CYSS biomarker).
- Viable cell point of departure equates to 11% reduction in cell number.
- Positive response on 181 of 1065 (17%) chemicals tested to date.

Performance Check

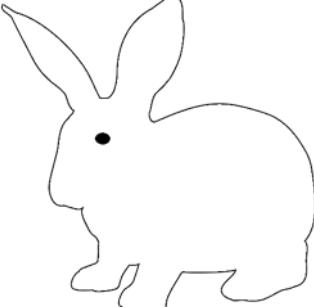
- ToxCast_STM anchored to 42 DevTox benchmark compounds aimed at assessing alternative models¹ and having information on pregnancy risk.
- Overall accuracy of 78.6% (0.65 sensitivity, 1.00 specificity, MCC = 0.647).
- Consistent with Palmer et al. (2013) pharma-trained model 77% accuracy (0.57 sensitivity, 1.00 specificity).

How does the STM prediction do with ToxRefDB (v1) prenatal developmental toxicity studies?

¹ Genschow et al. 2002; West et al. 2010; Daston et al. 2014; Augustine-Rauch et al. 2016; Wise et al. 2016

CASRN	Chemical	HTC ¹	CV ²	TI ³	Preg.class ⁴	STM
		(μ M)	(μ M)	(μ M)		class ⁵
302-79-4	all-trans-Retinoic acid	10	NA	0.003	X	TP
69-74-9	Cytarabine hydrochloride	1	0.083	0.054	D	TP
59-05-2	Methotrexate	1	0.062	0.059	X	TP
147-24-0	Diphenhydramine hydrochloride	100	3.76	0.588	B	TP
50-35-1	Thalidomide	100	NA	1.27	X	TP
51-21-8	5-Fluorouracil	1	1.45	2.02	D	TP
298-46-4	Carbamazepine	100	NA	2.29	C	TP
55-98-1	Busulfan	100	4.91	2.31	D	TP
13292-46-1	Rifampicin	10	NA	2.46	C	TP
19774-82-4	Amiodarone hydrochloride	10	NA	5.1	D	TP
75330-75-5	Lovastatin	20	NA	5.1	X	TP
3056-17-5	Stavudine	100	NA	32.5	C	TP
2392-39-4	Dexamethasone sodium phosphate	100	21.8	37.7	C	TP
53-86-1	Indomethacin	100	44.1	72.7	D	TP
127-07-1	Hydroxyurea	1000	237	74.9	D	TP
127-01-1	Valproic acid	1000	271	155	D	TP
4376-20-9	MEHP	500	NA	167	D	TP
57-41-0	5,5-Diphenylhydantoin	100	NA	NA	D	FN
51-52-5	6-Propyl-2-thiouracil	100	NA	NA	D	FN
10043-35-3	Boric acid	40.7	NA	NA	NTP	FN
4449-51-8	Cyclopamine	10	NA	NA	D	FN
6055-19-2	Cyclophosphamide monohydrate	20	NA*	NA	D	FN
56-53-1	Diethylstilbestrol	10	NA	NA	X	FN
107-21-1	Ethylene glycol	100000	NA	NA	NTP	FN
57-30-7	Phenobarbital sodium	100	NA*	NA	D	FN
81-81-2	Warfarin	100	NA	NA	X	FN
69-72-7	Salicylic acid	1000	1795	513	C	TN
103-90-2	Acetaminophen	100	NA*	NA	B	TN
79-06-1	Acrylamide	36	NA	NA	NTP	TN
50-78-2	Aspirin	100	NA*	NA	C	TN
80-05-7	Bisphenol A	100	39.4	NA	NTP	TN
94-26-8	Butylparaben	100	NA	NA	GRAS	TN
58-08-2	Caffeine	500	NA	NA	B	TN
464-49-3	D-Camphor	20	NA	NA	C	TN
131-11-3	Dimethyl phthalate	100	NA	NA	NTP	TN
59-30-3	Folic acid	100	NA	NA	A	TN
54-85-3	Isoniazid	8.8	NA*	NA	C	TN
57-55-6	1,2-Propane glycol	1000000	246664	327552	NTP	TN
68-26-8	Retinol	10	NA	NA	A	TN
81-07-2	Saccharin	100	NA	NA	A	TN
134-03-2	Sodium L-ascorbate	20	NA*	NA	A	TN
599-79-1	Sulfasalazine	100	NA*	NA	B	TN
True Positive Rate (sensitivity)					0.29	0.65
True Negative Rate (specificity)					0.94	1
Overall Accuracy					55.00%	78.60% (MCC = 0.647)

DevTox evidence calls: *ToxRefDB endpoint_summary download (10/16/15)*

CLEAR	dLEL \leq 200 mg/kg/day dLEL < mLEL <i>rat and rabbit</i>	 
SOME	dLEL \leq 200 mg/kg/day dLEL \leq mLEL <i>rat or rabbit</i>	<ul style="list-style-type: none">• provides No Effect Level (NEL)/Lowest Effect Level (LEL) across prenatal DevTox studies [Knudsen et al. 2009];
EQUIVOCAL	any dLEL dLEL > mLEL <i>rat or rabbit</i>	<ul style="list-style-type: none">• each study attempts to achieve a maternal (mLEL) and fetal (dLEL) for developmental parameters observed at term.
NO	no dLEL <i>rat or rabbit</i>	

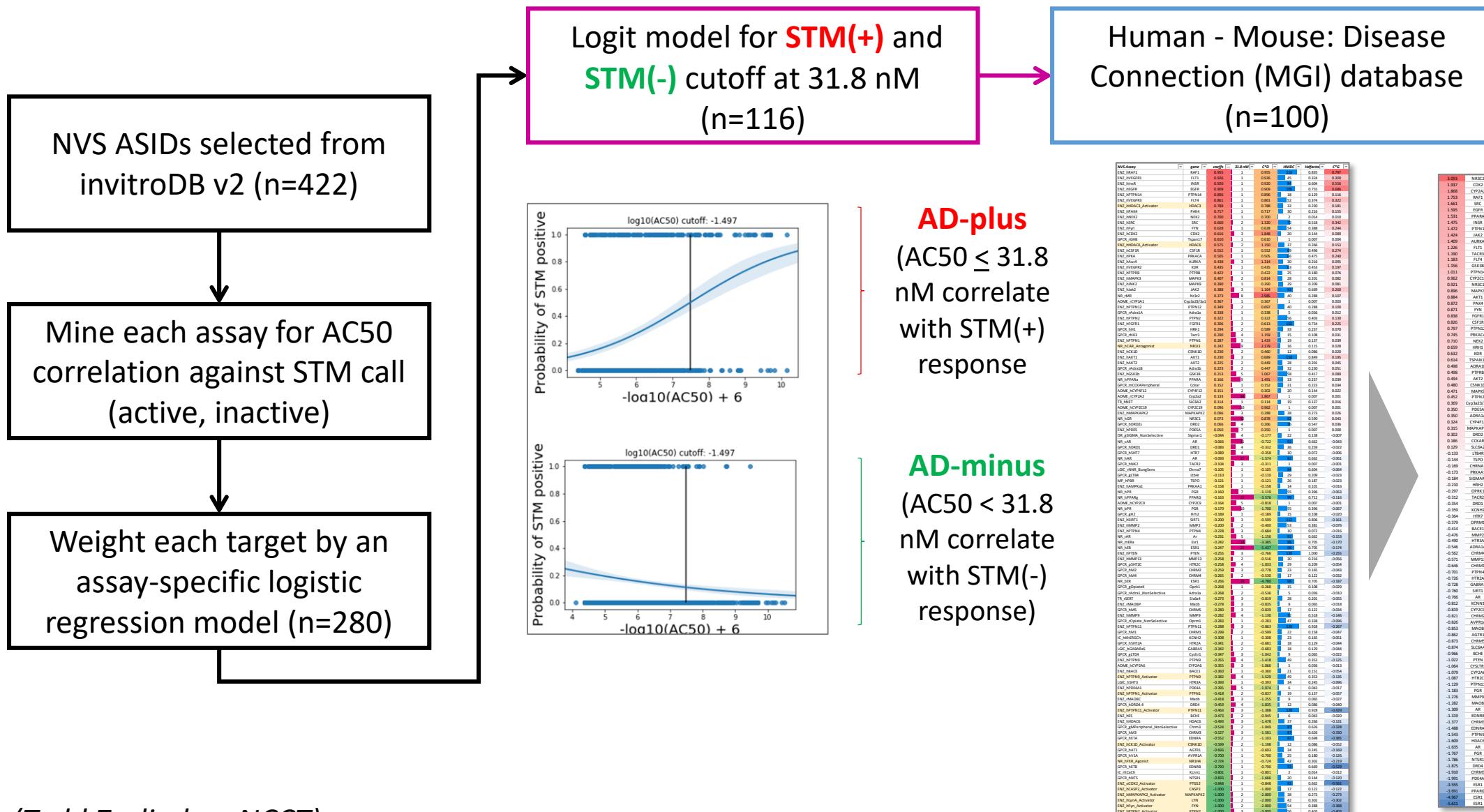
Performance anchored to ToxRefDB

Condition ²	Stringency Filter Applied to DevTox Anchor				
	BM-42 ³	Base ⁴	Low ⁵	Medium ⁶	High ⁷
TP	17	85	60	35	19
FP	0	14	37	23	9
FN	9	217	127	51	11
TN	16	116	208	176	88
n	42	432	432	285	127
sensitivity	0.654	0.281	0.321	0.407	0.633
specificity	1.000	0.892	0.849	0.884	0.907
PPV	1.000	0.859	0.619	0.603	0.679
NPV	0.640	0.348	0.621	0.775	0.889
ACC	78.6%	46.5%	62.0%	74.0%	84.3%
MCC	0.647	0.190	0.202	0.332	0.554



STM(+)	TI \leq 200 μM	TI \leq 1000 μM	TI \leq 200 μM	TI \leq 200 μM	TI \leq 200 μM
DevTox anchor	benchmark reference set	any dLEL rat or rabbit	SOME evidence rat OR rabbit	CLEAR evidence rat OR rabbit	CLEAR evidence rat AND rabbit

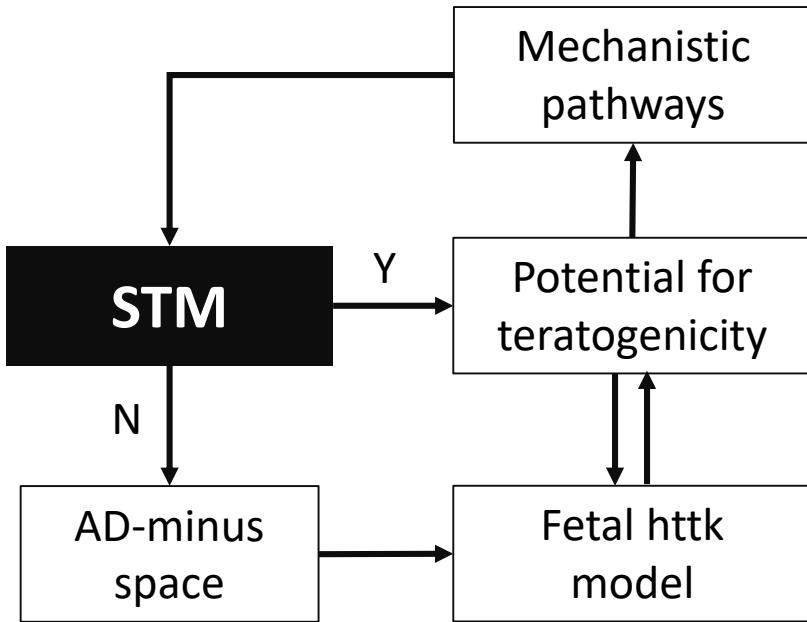
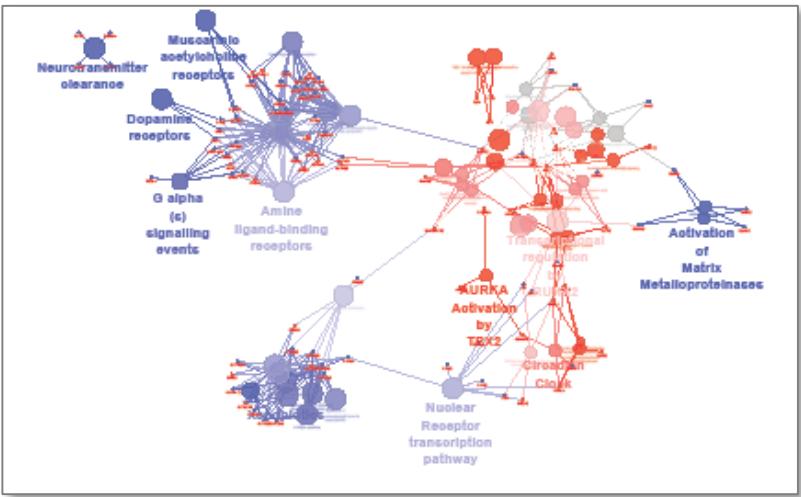
Applicable Domain: STM results mined against NVS biochemical target profile



(Todd Zurlinden, NCCT)

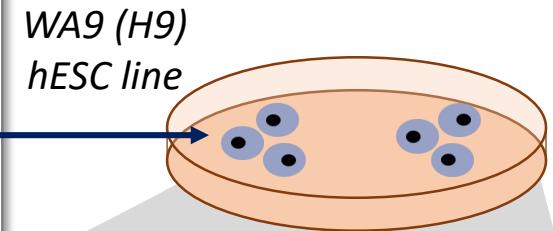
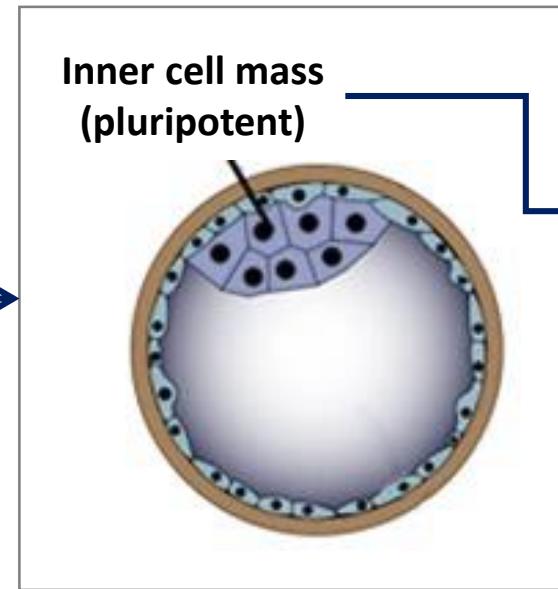
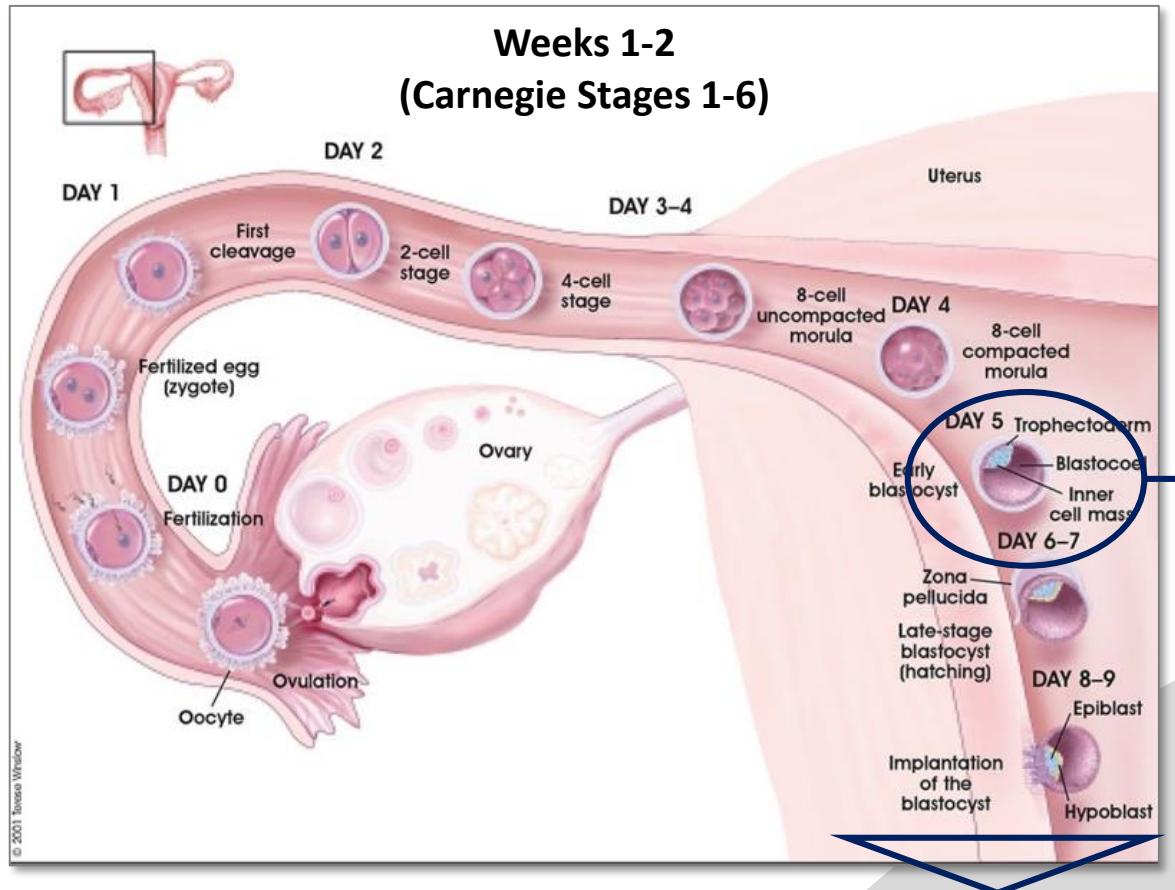
Nuclear receptors (GR, MR, PPARA)
 RTKs (VEGFR1/2/3, FGFR1, EGFR, INSR)
 Kinases (RAF1, AKT1/2, SRC, FYN, PRKA, JAK2, GSK3B, MAPK3, MAPKAPK2)

3.093	NR3C2
1.937	CDK2
1.868	CYP2A2
1.753	RAF1
1.661	SRC
1.595	EGFR
1.531	PPARA
1.475	INSR
1.472	PTPN1
1.424	JAK2
1.409	AURKA
1.226	FLT1
1.190	TACR3
1.183	FLT4
1.156	GSK3B
1.011	PTPN14
0.962	CYP2C19
0.921	NR3C1
0.896	MAPK3
0.884	AKT1
0.872	PAK4
0.871	FYN
0.838	FGFR1
0.826	CSF1R
0.797	PTPN12
0.745	PRKACA
0.710	NEK2
0.659	HRH1
0.632	KDR
0.614	TSPAN17
0.498	ADRA1B
0.498	PTPRB
0.494	AKT2
0.480	CSNK1D
0.471	MAPK9
0.452	PTPN2
0.369	Cyp3a23/3a1
0.350	PDE5A
0.350	ADRA1A
0.324	CYP4F12
0.315	MAPKAPK2
0.302	DRD2

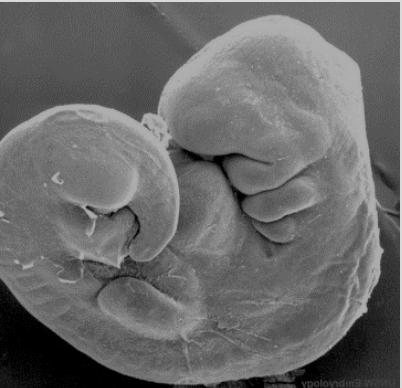
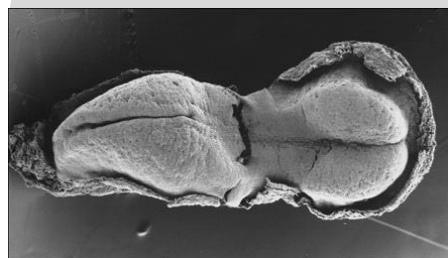


GPCRs (CHRM1/2/3/4/5, HTR2A/2C, DRD4, EDNRA/B, ...)
 Nuclear receptors (ESR1, PGR, AR, PPARG)
 Phosphatases (PTEN, PTPN4/9/11)

-0.562	CHRM4
-0.571	MMP13
-0.646	CHRM1
-0.701	PTPN4
-0.726	HTR2A
-0.728	GABRA5
-0.760	SIRT1
-0.766	AR
-0.812	KCNN1
-0.819	CYP2C9
-0.821	CHRM2
-0.826	AVPR1A
-0.853	MAOB
-0.862	AGTR1
-0.873	CHRM5
-0.874	SLC6A4
-0.966	BCHE
-1.022	PTEN
-1.064	CYSLTR1
-1.079	CYP2A6
-1.087	HTR2C
-1.129	PTPN11
-1.183	PGR
-1.276	MMP9
-1.282	MAOB
-1.309	AR
-1.319	EDNRB
-1.377	CHRM3
-1.488	EDNRA
-1.543	PTPN9
-1.609	HDAC6
-1.635	AR
-1.767	PGR
-1.786	NTSR1
-1.875	DRD4
-1.910	CHRM3
-1.991	PDE4A
-3.555	ESR1
-3.691	PPARG
-4.967	ESR1
-5.611	ESR1



**Week 3
(Carnegie Stage 8)**



**Week 4
(Carnegie Stage 13)**



TIMELINE OF HUMAN EMBRYONIC DEVELOPMENT

AOP-based modeling: cleft palate as an example

ToxCast Chemicals

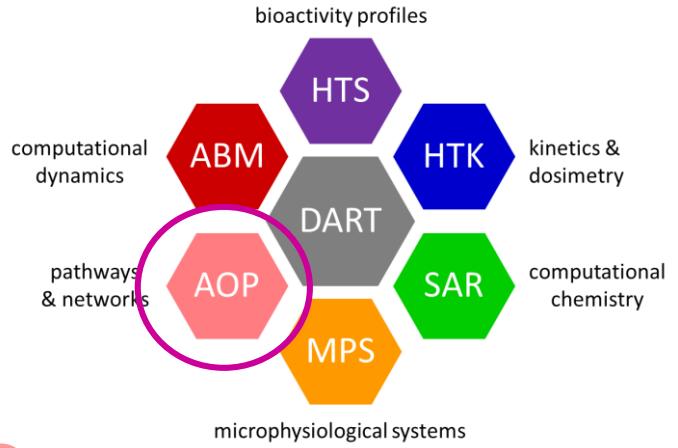
HTS assay results filtered-out cytotox and summarized by gene for cheminformatics and machine-learning

Animal studies

63 of 500 chemicals were associated with cleft palate in ToxRefDB_Dev or biomedical literature

AOP clusters

6 mechanistic profiles inferred from integration of HTS data with chemical structure.

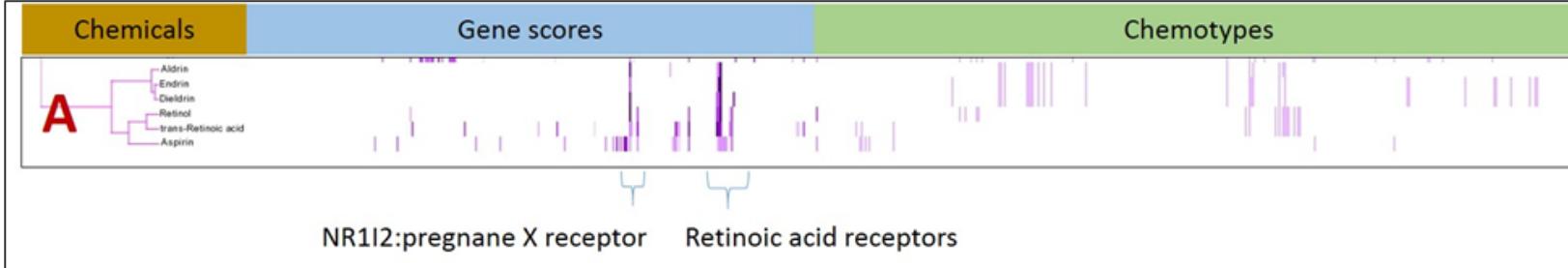


Chemicals

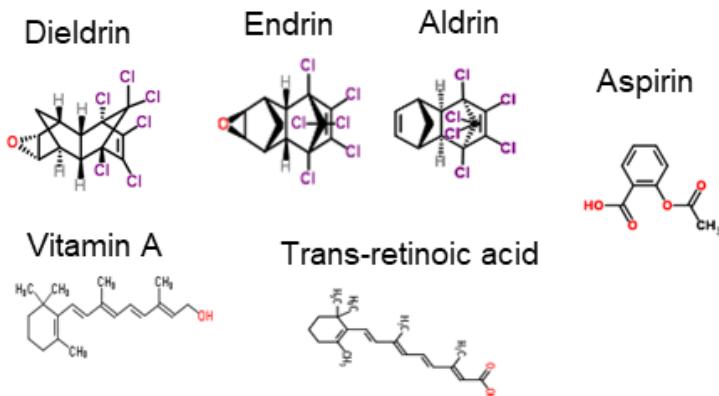
Gene scores

Chemotypes

i)



ii)



iii)

Chemical	Cleft palate? 0/1	Gene Score RARG
Retinol	1	13.5
Dieldrin	1	12.0
Endrin	1	11.9
Aldrin	1	11.6
Bromoconazole	0	10.8
Tributyltin chloride	1	8.6
trans-Retinoic acid	1	8.2
Rotenone	0	7.7
Fenpyroximate (Z,E)	0	7.6
Chlorothalonil	0	6.7
Triflumizole	0	6.5
SSR126768	0	6.4
Tebufenpyrad	0	6.3
... > 50 more chemicals		

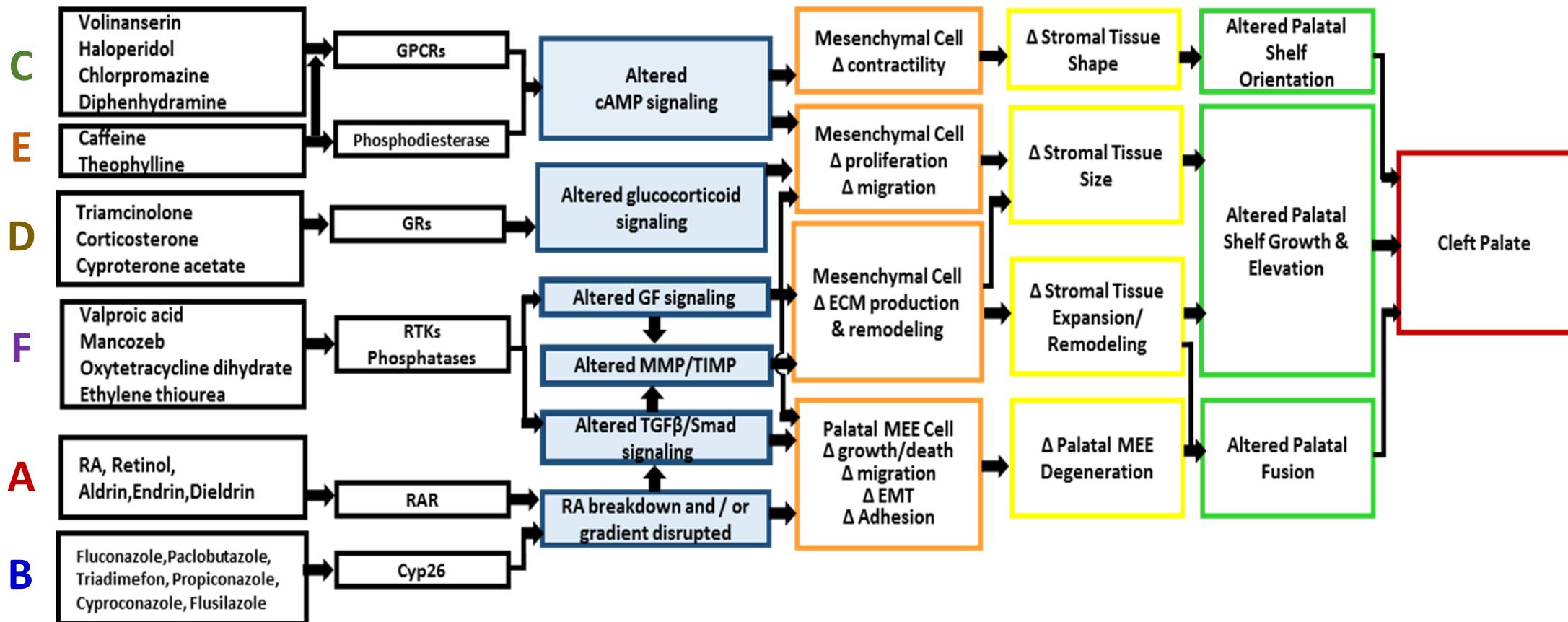
Cyproconazole
Aldrin
Endrin
Dieldrin
Retinol
trans-Retinoic acid
Aspirin

0.00

7.40

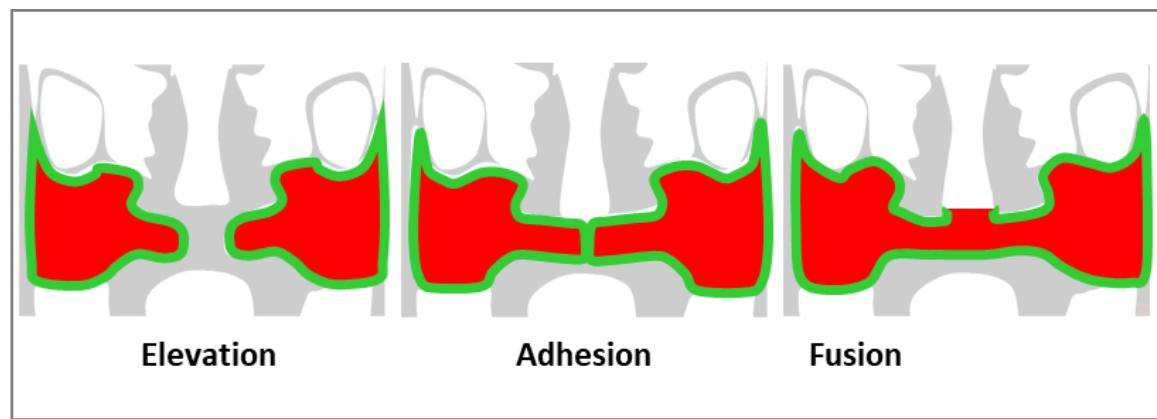
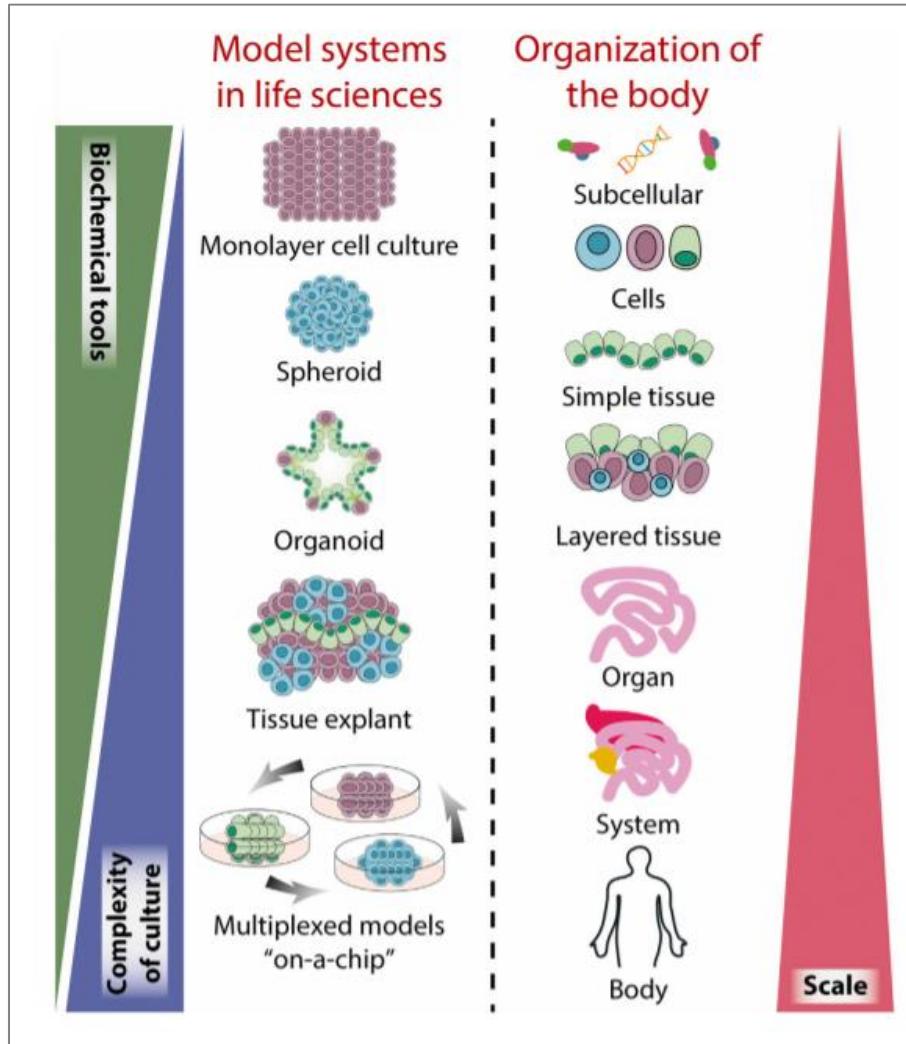
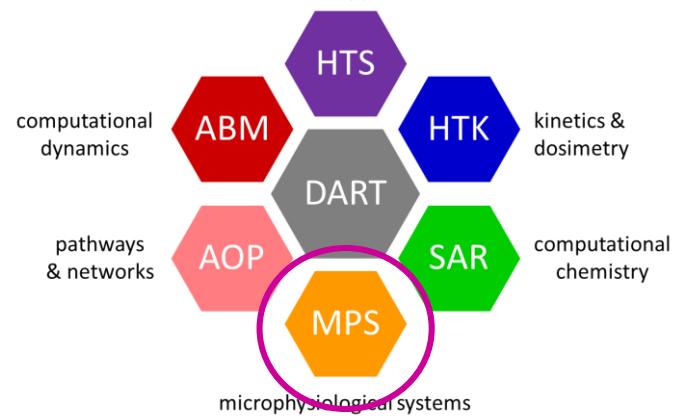
14.80

AOP clusters: inferred from chemical structure-bioactivity profiles



bioactivity profiles

Microtissue models: reconstructing the system

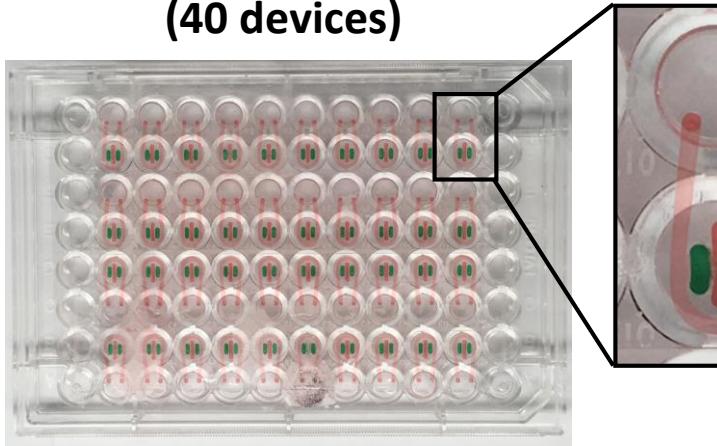


- Palatal development is structurally simple: surface epithelium covering cranial mesenchyme.
- Dynamic signaling between epithelium-mesenchyme drives outgrowth, adherence and fusion.

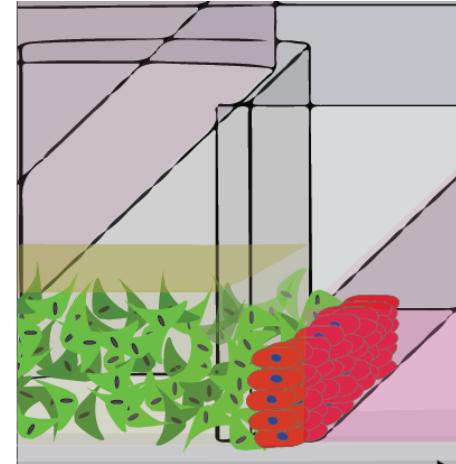
SOURCE: Yin et al. Cell Stem Cell 2016.

Microphysiological system: reverse-engineering E/M interactions during outgrowth

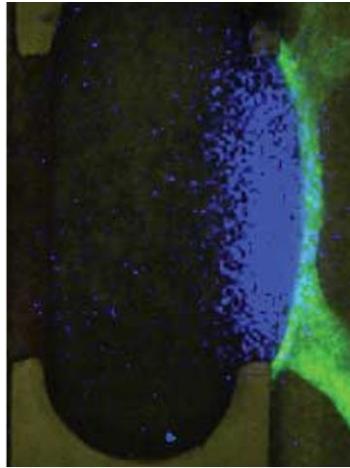
Microfluidic plates
(40 devices)



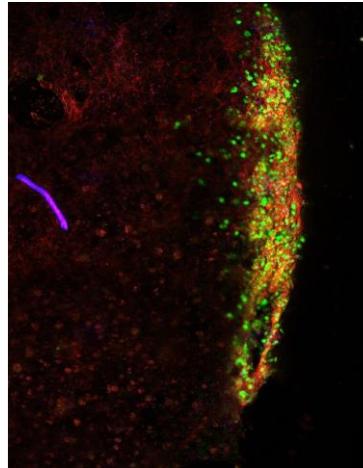
Media Ports
Microtissue Wells



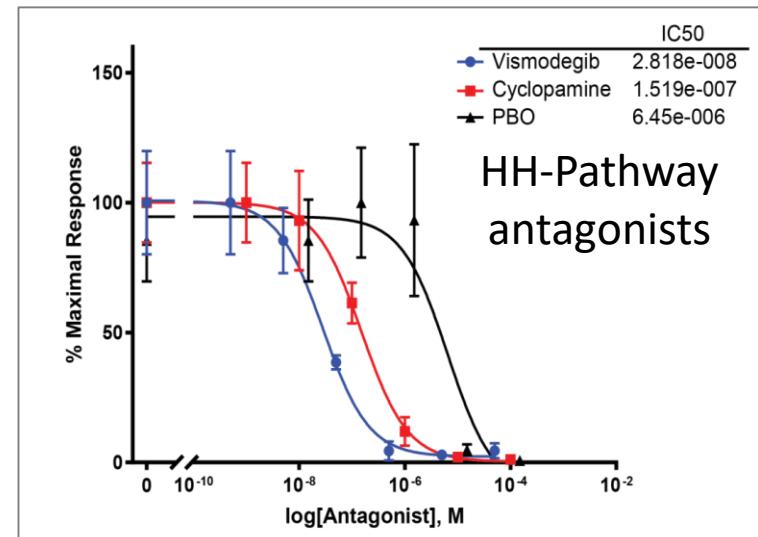
Gli-luciferase



Ki67 proliferation

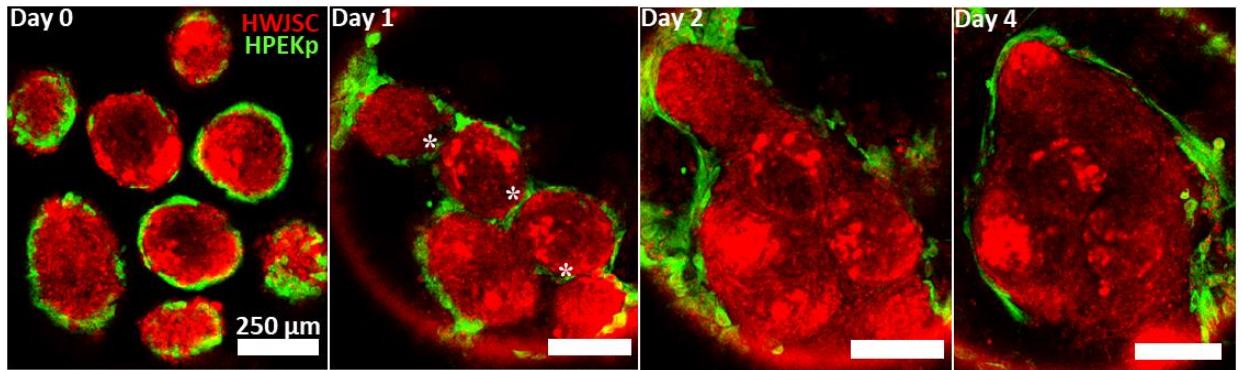
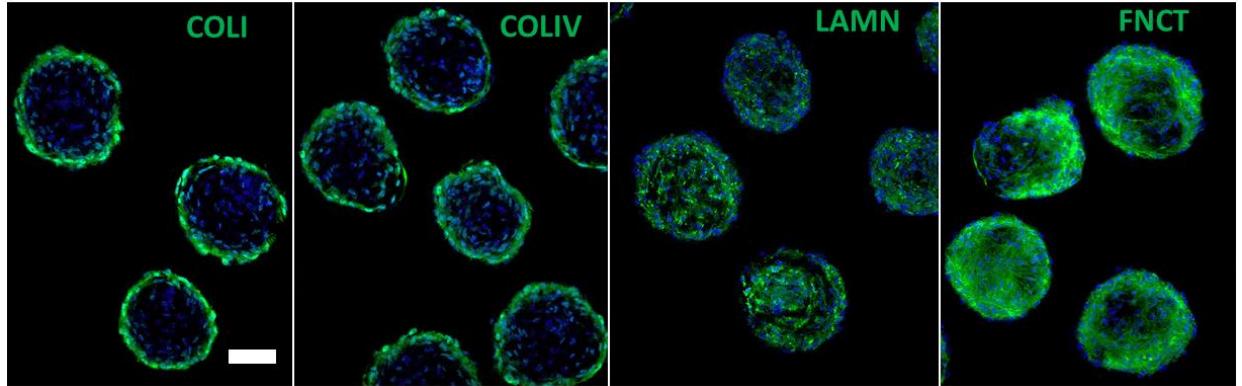
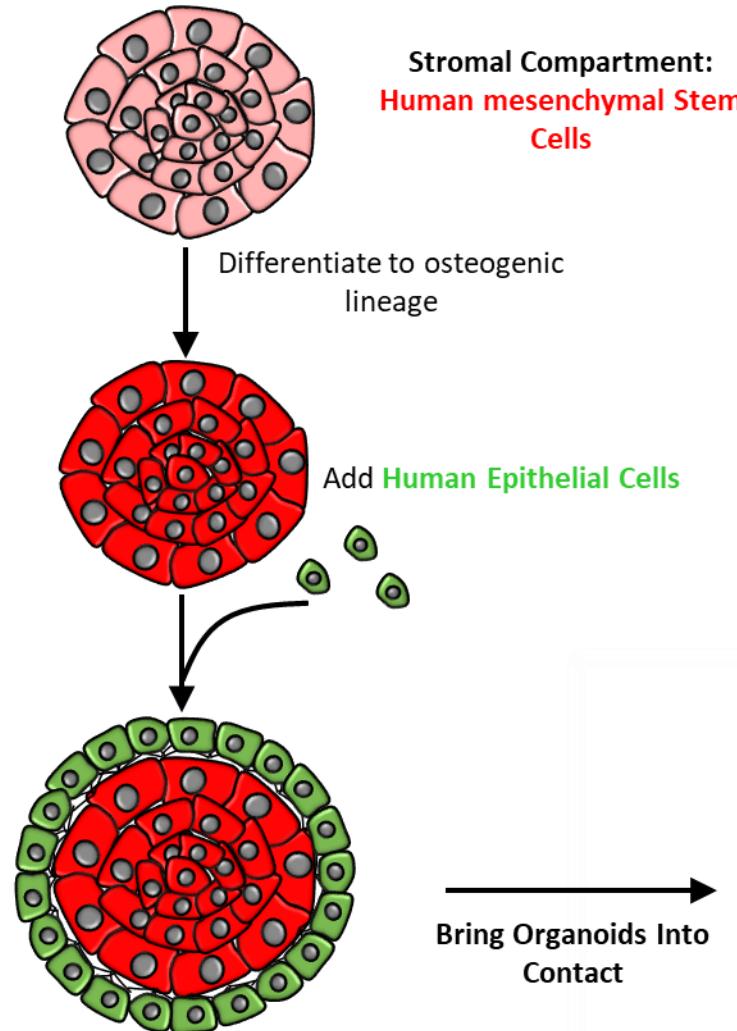


- 3D epithelial / mesenchymal organization
- directed SHH gradient and Gli1-outgrowth
- HTS and HCl amenable
- fluorescent and luminescent readouts

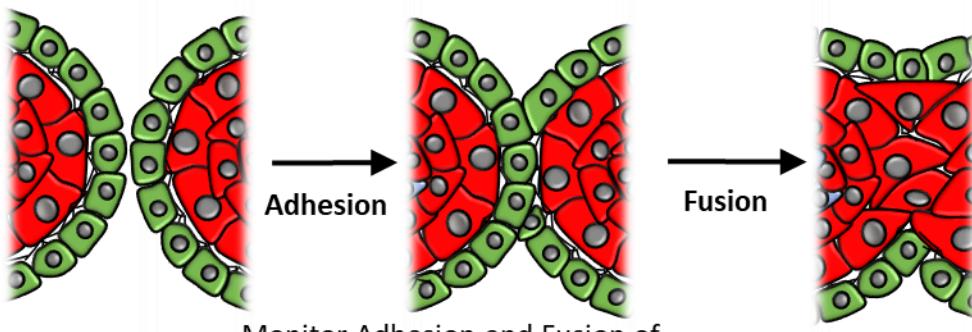


SOURCE: Brian Johnson, U Wisconsin (HMAPS)

Fusion-competent organoids



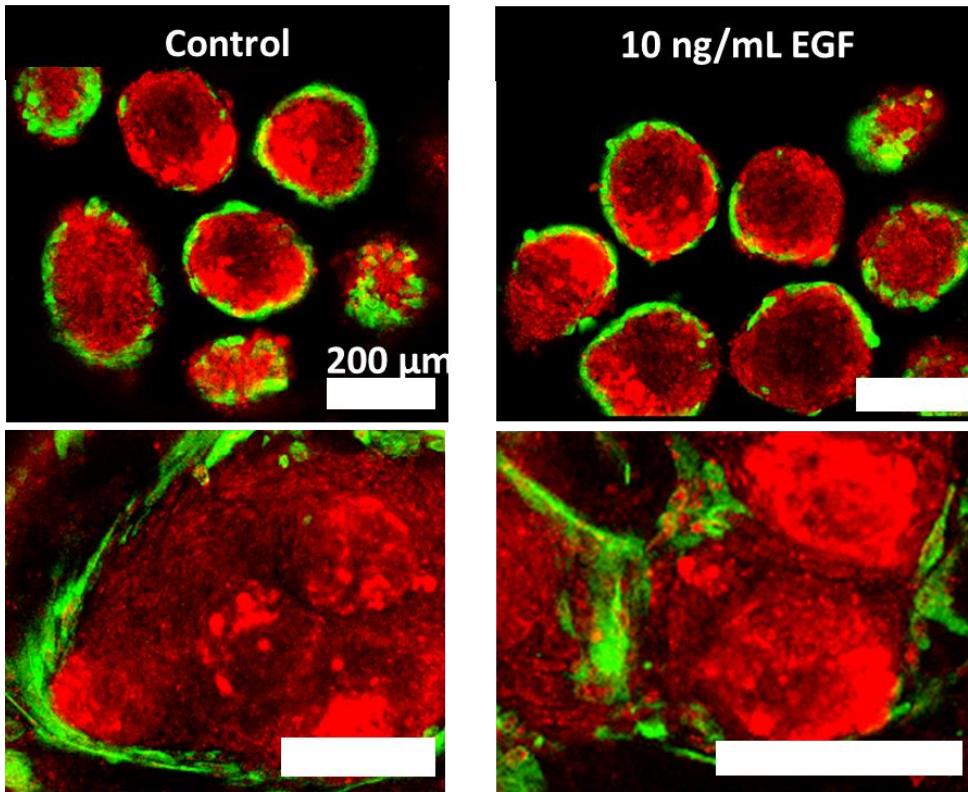
In Vitro Fusion



Monitor Adhesion and Fusion of
Mesenchymal/Epithelial Organoids

SOURCE: Belair et al. (2018) Toxicol Sci

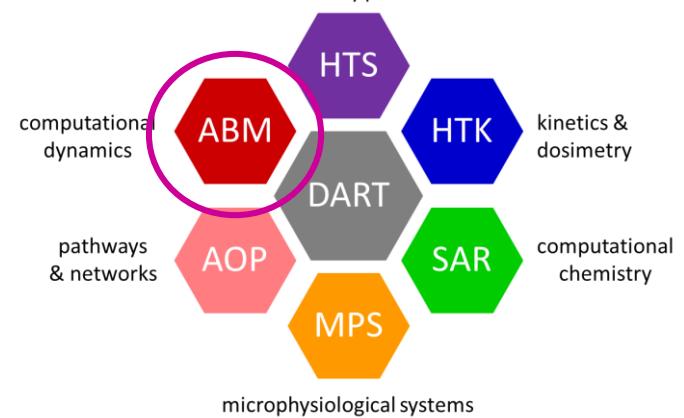
Fusion is delayed by excessive EGF Signaling



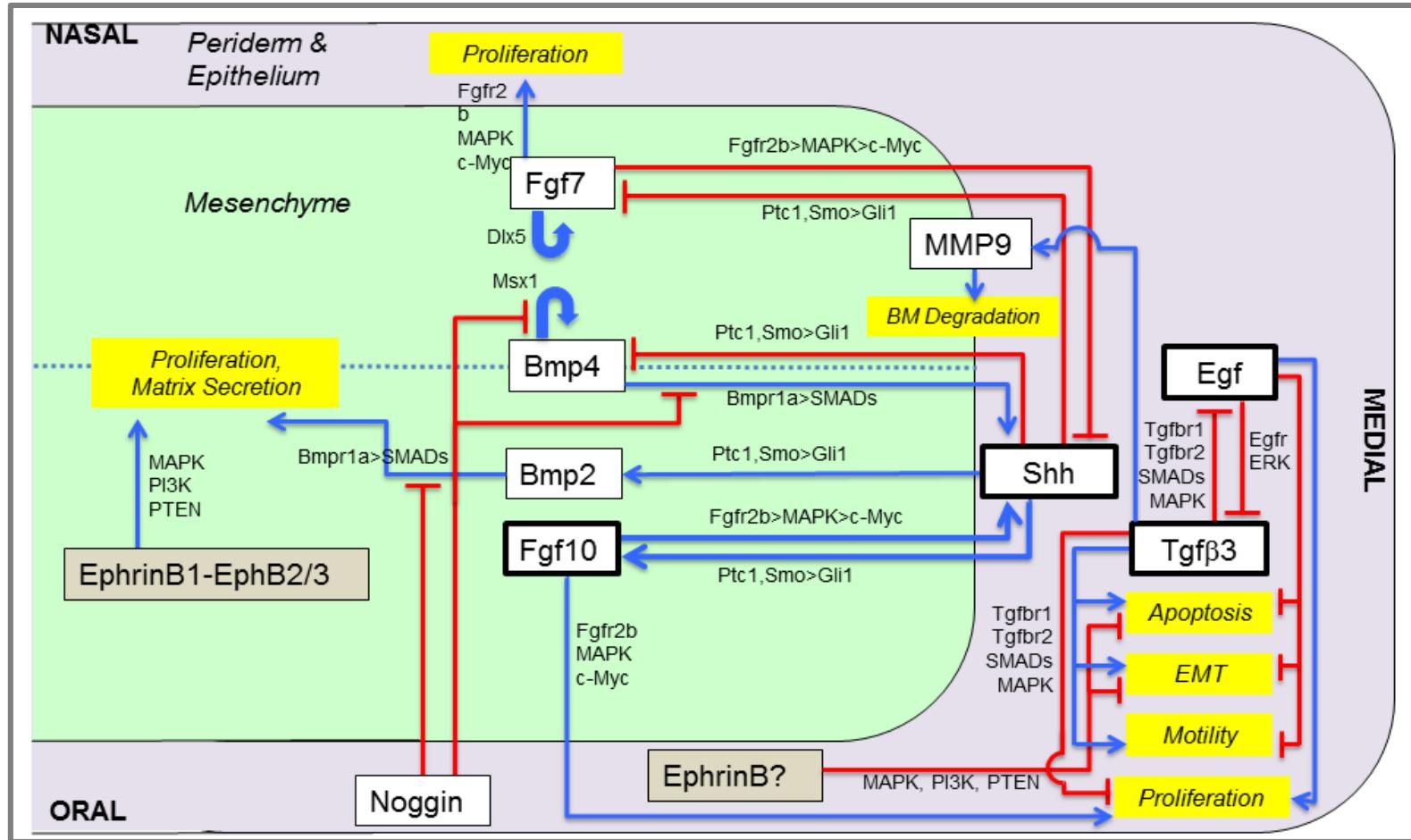
Chemical	Perturbation Days 0-2	Perturbation Days 0-4	Cytotoxicity
TCDD			
All-Trans Retinoic Acid (ATRA)		✓	✓
Dexamethasone			
Corticosterone			
Triamcinolone		✓	
Valproic Acid	✓		
Fluconazole			
Caffeine			
Nicotine			
Tributyltin	✓	✓	✓
Triadimefon			
Theophylline	✓		

- 2,400 spheroids per batch (120 wells per week) to assess tissue fusion in a human cell-based system.
- Process is sensitive to pharma compounds acting on various pathways (EGF, IGF, FGF, HGF, BMP);
- Sensitive to chemicals (ATRA, TBT, VPA, Theophylline, Triamcinolone) via viability or epithelial migration.

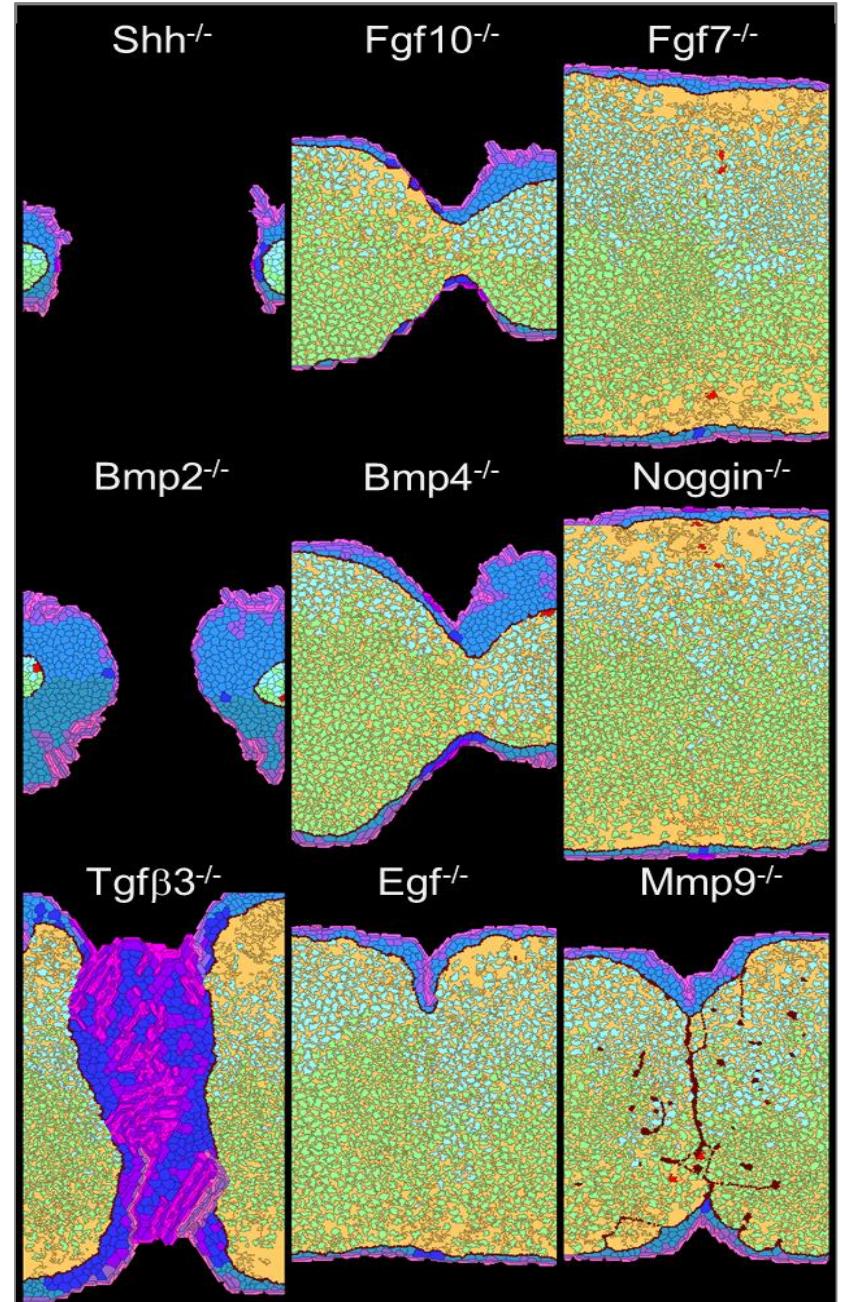
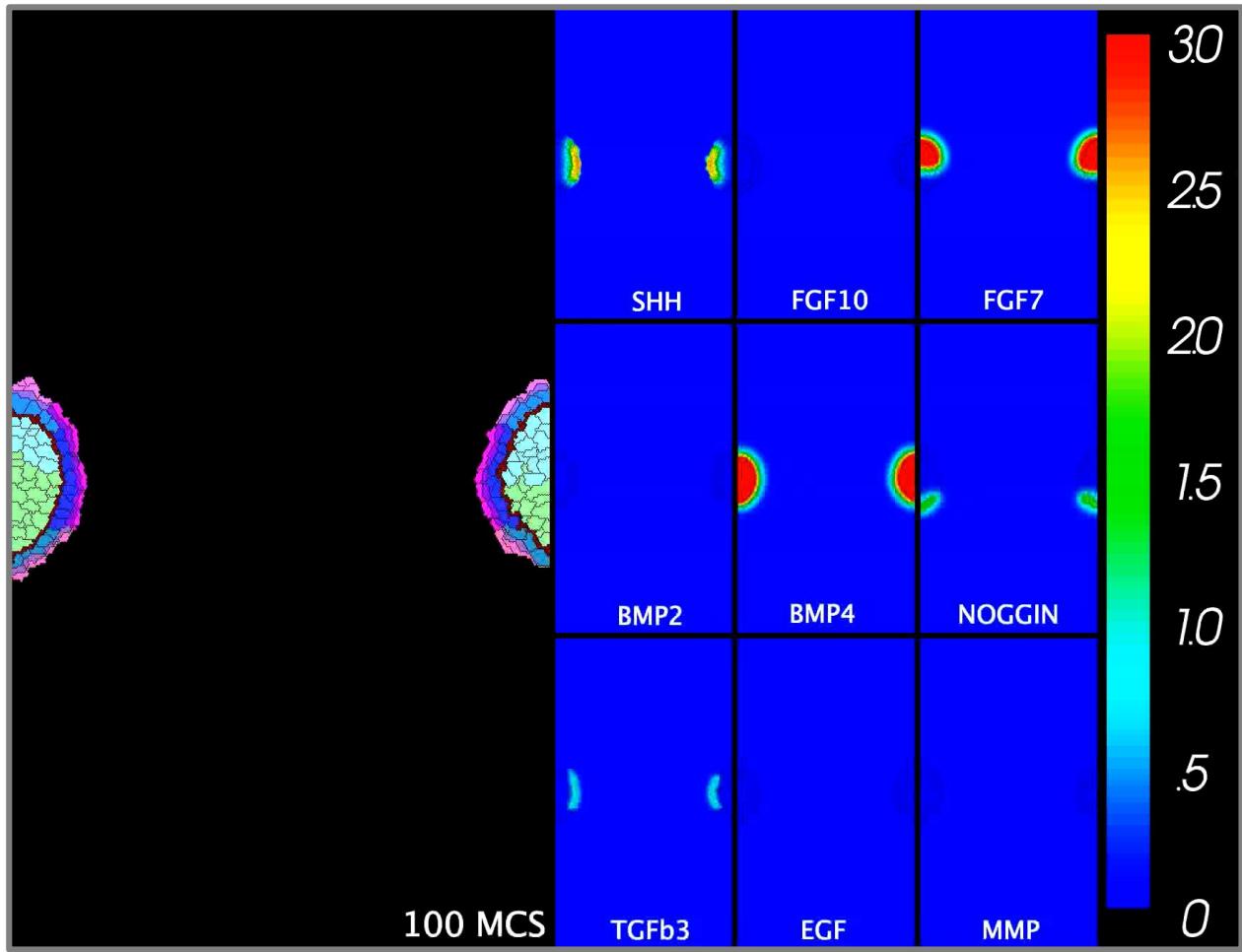
bioactivity profiles



Systems model: palatal outgrowth and fusion



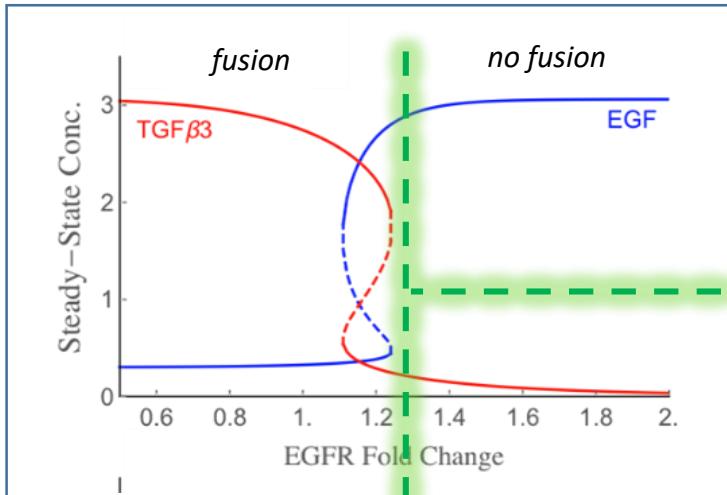
ABM simulation: hacking the control network



SOURCE: Hutson et al. (2017) Chem Res Toxicol

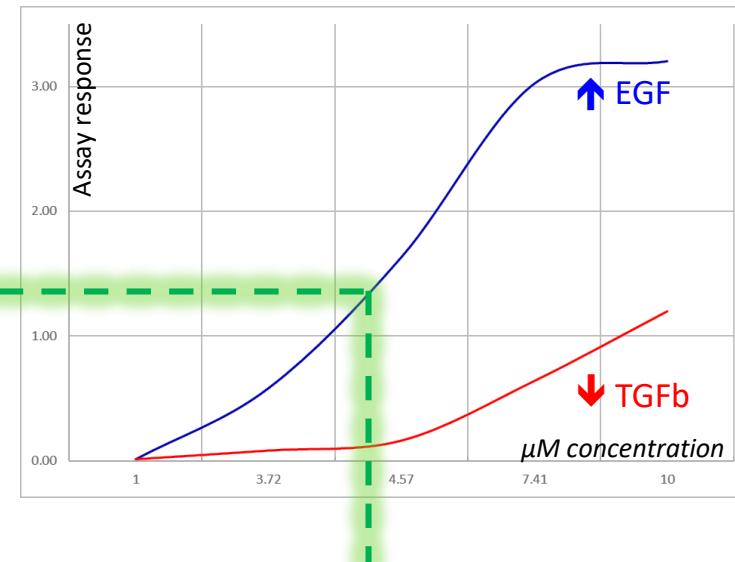
TGF-beta/EGF latch switch: *controls MEE breakdown*

INPUT: switch dynamics



tipping point predicted by computational dynamics (hysteresis switch)

Captan in ToxCast



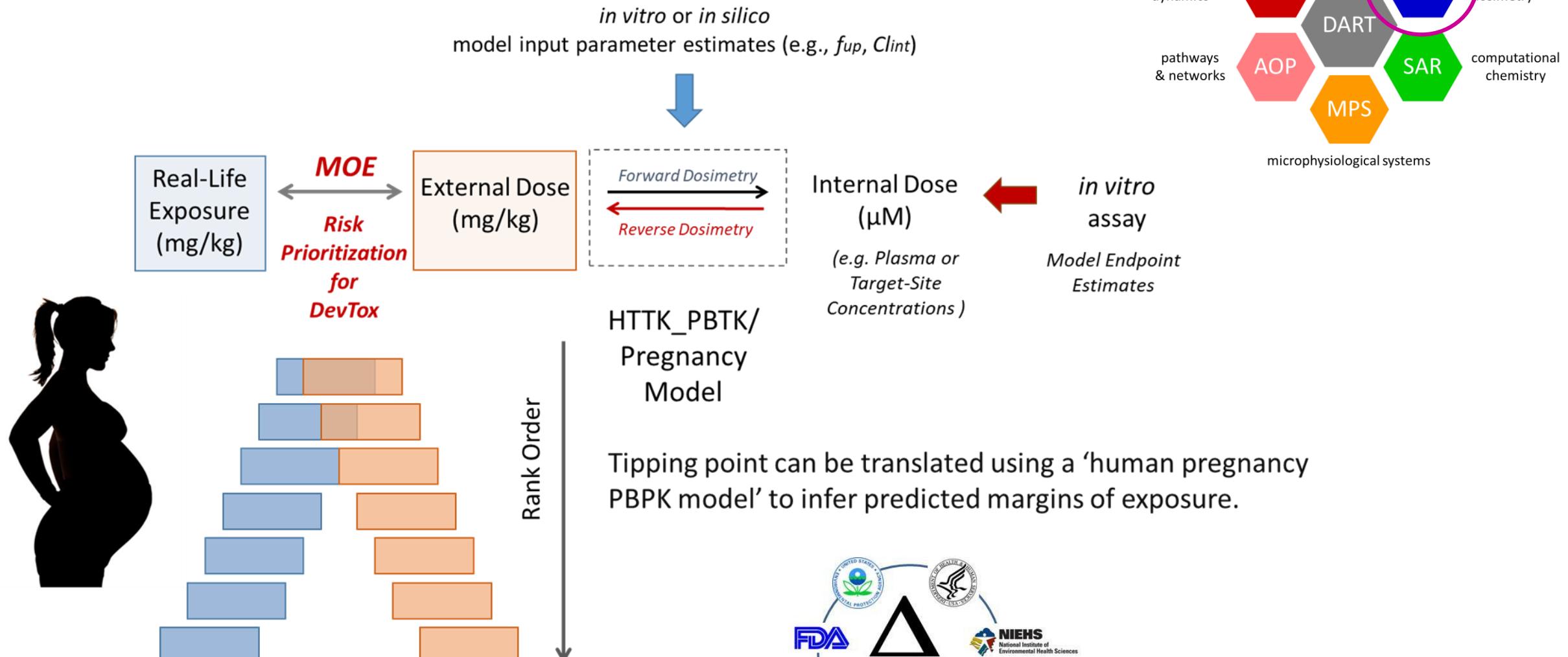
OUTPUT: tipping point mapped to concentration response (4 μM)

Captan in ToxRefDB
NOAEL = 10 mg/kg/day
LOAEL = 30 mg/kg/day

human HTTK model
2.39 mg/kg/day would achieve a steady state of 4 μM in fetal plasma



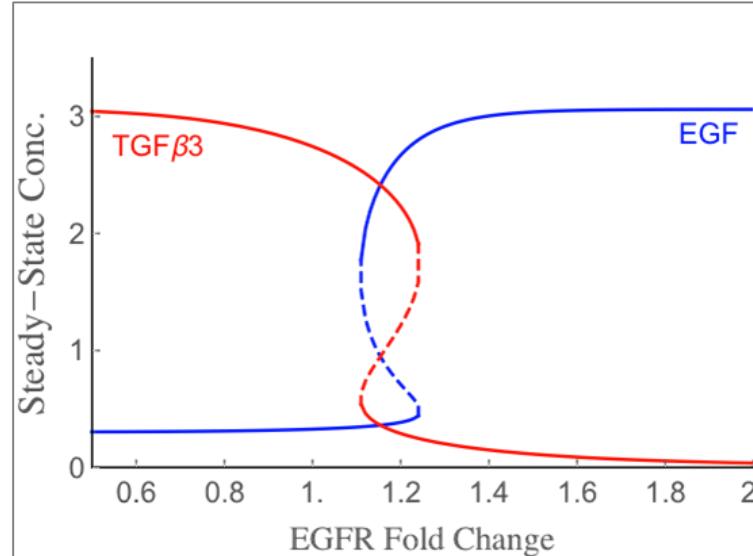
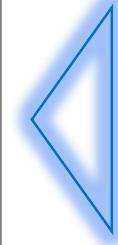
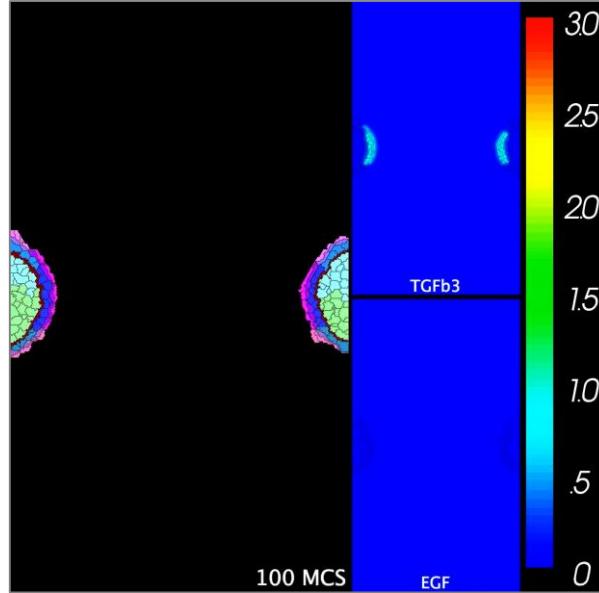
httk workflow



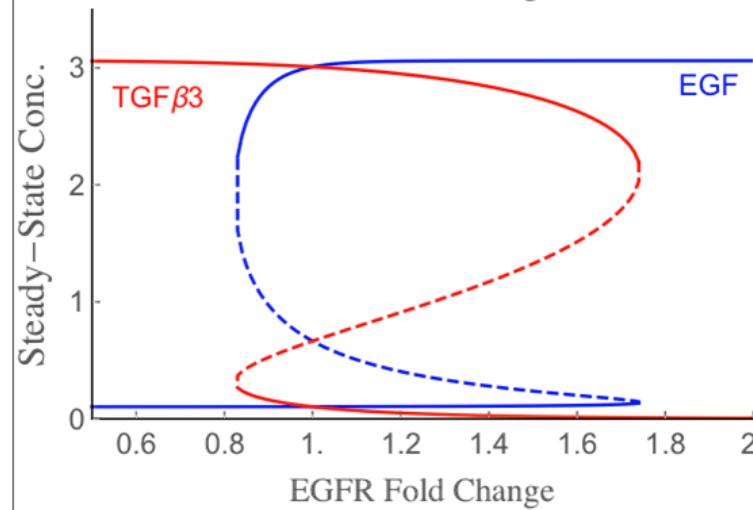
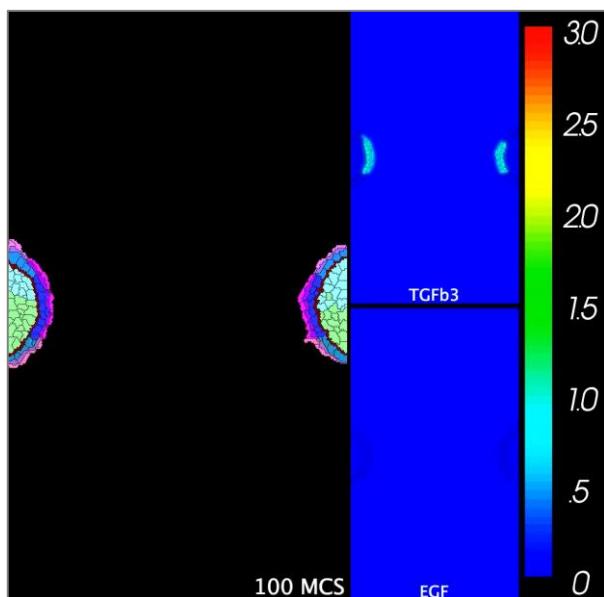
SOURCE: A Lumen (FDA), N Kleinstreuer (NTP)



Messin' with the switch: two scenarios for bistable dynamics



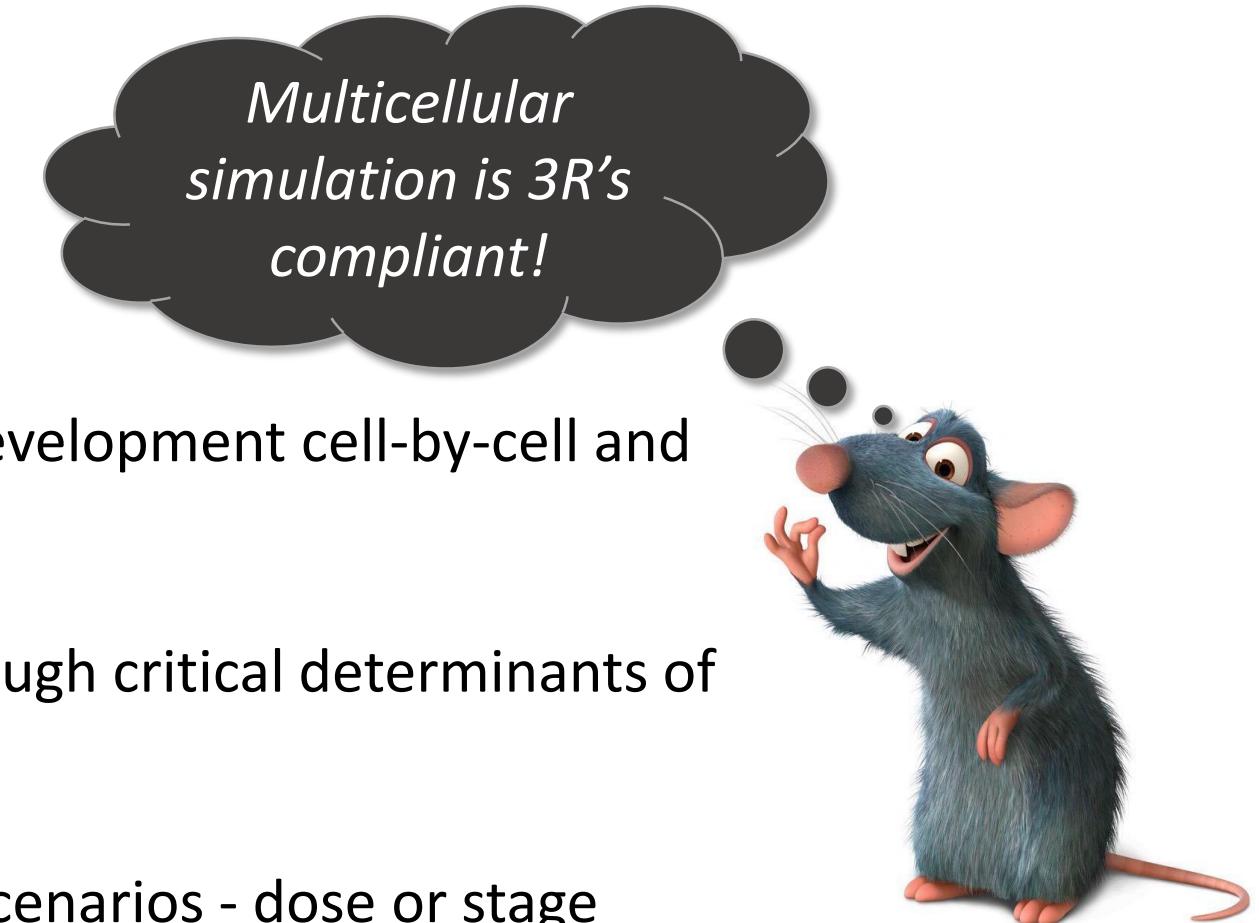
Narrow hysteresis:
less resilient
but reversible



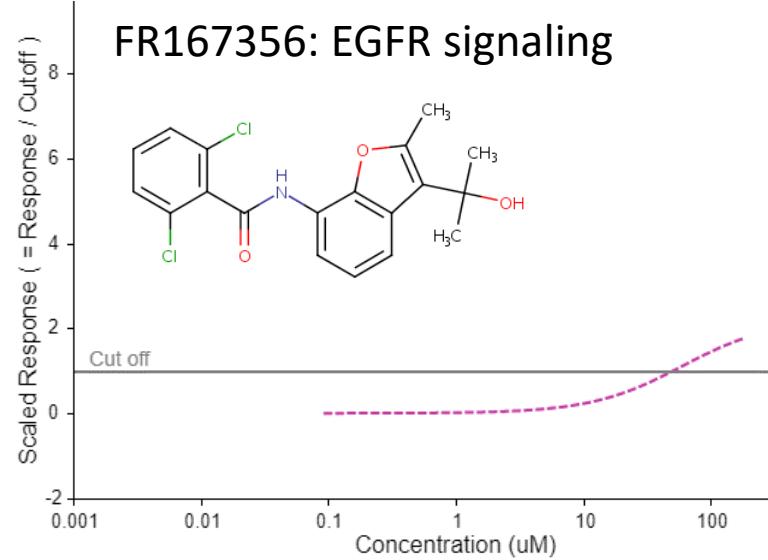
Broad hysteresis:
more resilient
but irreversible

Agent-Based Models (ABMs):

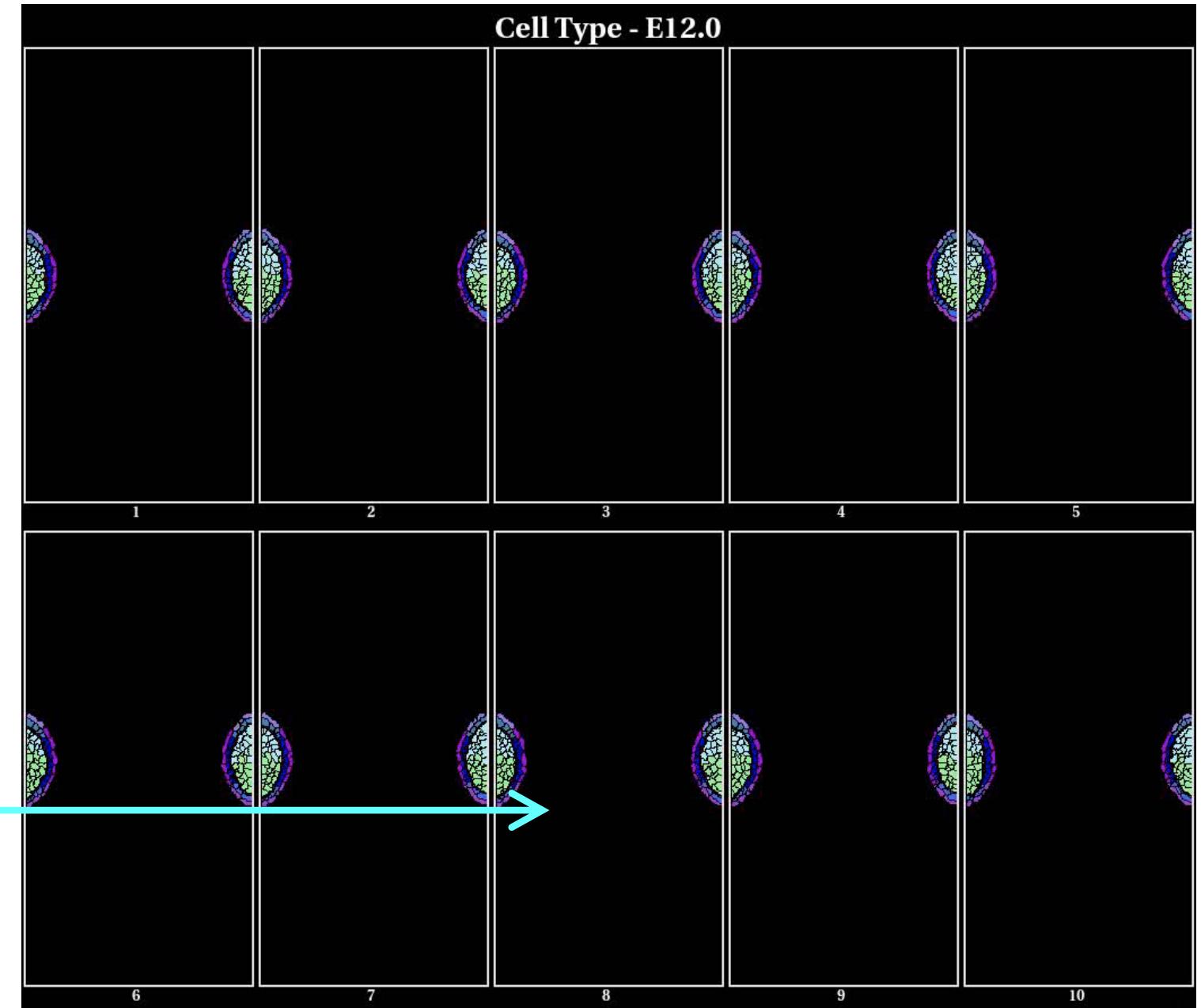
- reconstruct priority systems of embryonic development cell-by-cell and interaction-by-interaction (*emergence*);
- execute tissue simulations that advance through critical determinants of phenotype (*self-organizing phenotypes*);
- simulate *in vitro* data under various *in vivo* scenarios - dose or stage response, critical pathways, non-chemical stressors, etc (*dynamics*);
- probabilistic rendering of where, when and how a defect might occur under different exposure scenarios (*mechanistic interpretation*).



Simulated dose-response



Tipping point predicted
in topological context



Read across: structural neighbors to the query

United States Environmental Protection Agency

Home Advanced Search Batch Search Lists Predictions Downloads

ADME
EXPOSURE
BIOACTIVITY
SIMILAR COMPOUNDS
GENRA (BETA)
RELATED SUBSTANCES
SYNONYMS
LITERATURE
LINKS
COMMENTS

of Analogs: 10 Next

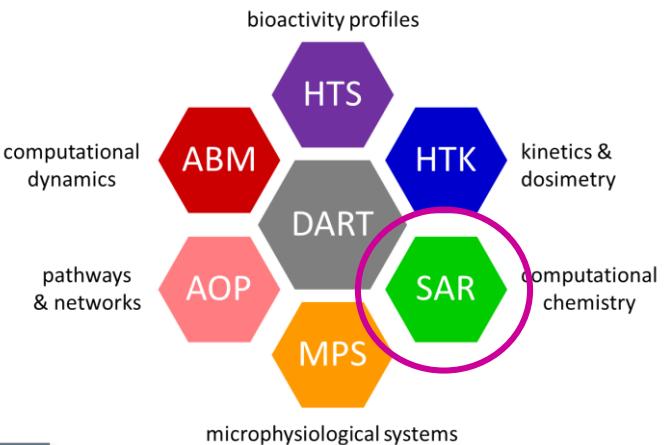
Run Read-Across GenRA Min+: 0 Min-: 0 Filter: Similarity Weight: Download: Filetype

FR167356 33 703 17 0
2,6-Dichlorobenzamide 8 0 9 180
Fluopicolide 0 0 17 177
Pyriproxyfen 12 818 15 345
Propyzamide 9 819 10 345
Diclofenac sodium 5 714 14 95
Isoxaben 20 818 14 345
Zoxamide 48 819 22 250
Dicamba 2 819 11 260
Teflubenzuron 18 0 16 168
Chlorsulfuron 12 0 15 260

FR167356 2,6-Dichloroben... Fluopicolide Pyriproxyfen Propyzamide Diclofenac sodium Isoxaben Zoxamide Dicamba Teflubenzuron Chlorsulfuron

DEV.Liver DEV.Locomotion DEV.Lung DEV.Lymph Node DEV.Mammary Gland DEV.Maternal Wastage DEV.Mesentery DEV.Mortality DEV.Motor activity DEV.Mouth / Jaw DEV.Nasal DEV.Nose

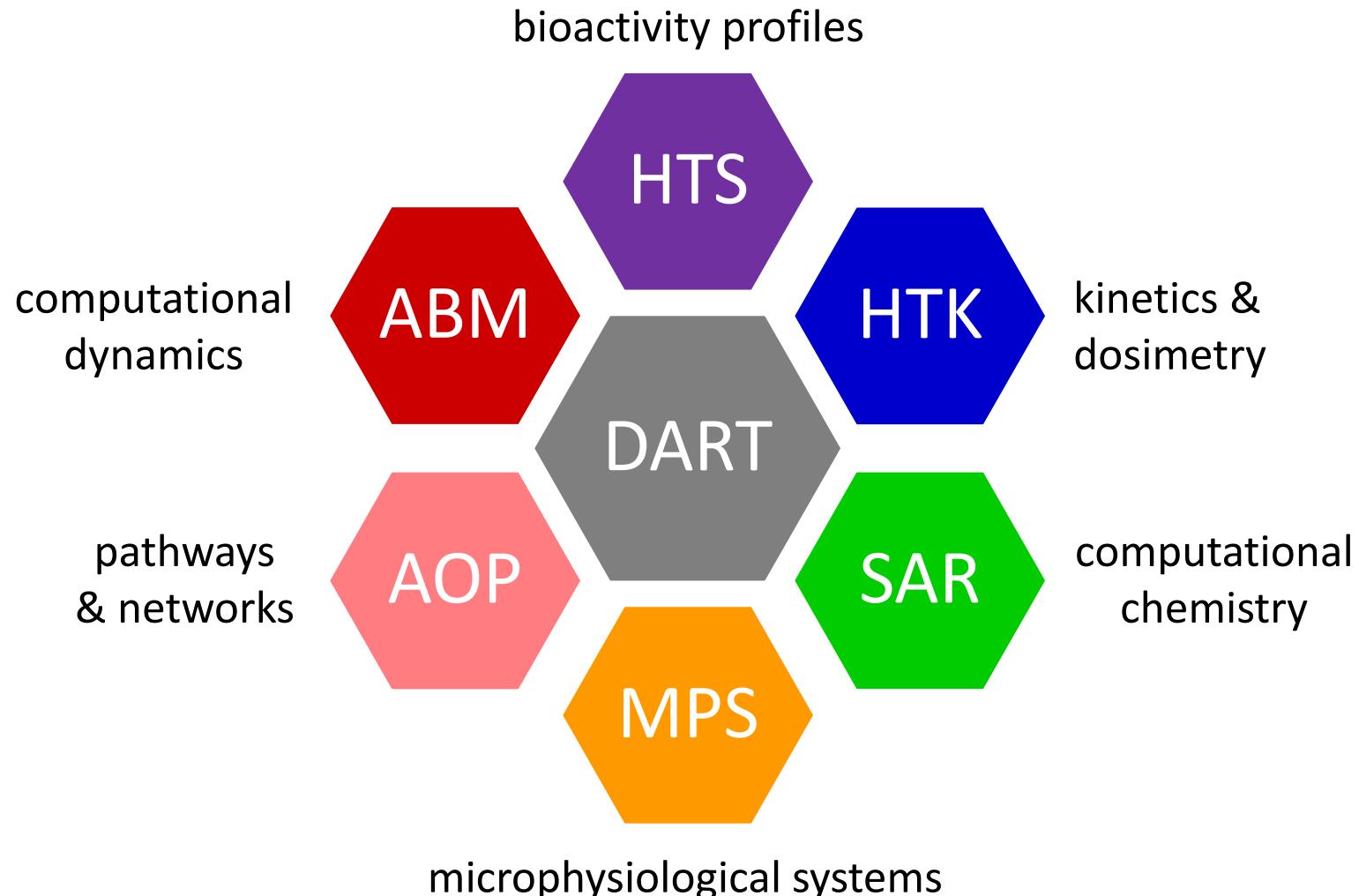
DEV.Aortic arch DEV.Bladder DEV.Blood DEV.Blood vessel DEV.Body Weight DEV.Bone DEV.Brain DEV.Clinical Chemistry DEV.Clinical Signs



- **FR 167356** is a selective inhibitor of osteoclast vacuolar H⁺-ATPase (V-ATPase)
- high potency against osteoclast V-ATPase and low potency against lysosomal V-ATPase
- proposed as a drug target in lytic bone diseases due osteoclast V-ATPase selectivity
- No ReproTox, DevTox, Chronic Tox, Neurotox, ... available in open database or literature

1	Abstract Sifter	Landscape View						
2			Update Article Counts	View / hide queries	Heat Map by column	Heat Map by row		
3								
5684			(reproduct ion AND (toxicity OR abnormal OR adverse effects))	Diseas es and Abnorm alities[nital, Heredit ary, and Neonat al	palate OR palate/ drug effects)	not surgery	bone AND develop ment
4	DSSTOX link to Dashboard	Preferred Name	Chemical / entity query	Reprotox	DevTox	CP	bone	
5	Indomethacin	Indomethacin		482	468	7	174	
6	DTXSID3037208	Diclofenac sodium	15307-79-6 OR Diclofenac sodium OR Diclofenac	143	37	1	18	
7	DTXSID4024018	Dicamba	1918-00-9 OR Dicamba	9	1	0	0	
8	DTXSID1048174	FR167356	174185-16-1 OR FR167356 OR FR 167356 OR "FR 167356"[nm]	0	0	0	4	
9	DTXSID7022170	2,6-Dichlorobenzamide	2008-58-4 OR 2,6-Dichlorobenzamide	0	0	0	0	
10	DTXSID7034624	Fluopicolide	239110-15-7 OR Fluopicolide	0	0	0	0	
11	DTXSID8032673	Pyri thiobac-sodium	123343-16-8 OR Pyri thiobac-sodium OR pyri thiobac sodium	0	0	0	0	
12	DTXSID2020420	Propyzamide	23950-58-5 OR Propyzamide OR pronamide	1	0	0	0	
13	DTXSID8024159	Isoxaben	82558-50-7 OR Isoxaben	1	0	0	0	
14	DTXSID9032581	Zoxamide	156052-68-5 OR Zoxamide	0	0	0	0	
15	DTXSID6042440	Teflubenzuron	83121-18-0 OR Teflubenzuron	6	0	0	0	
16	DTXSID7023980	Chlorsulfuron	64902-72-3 OR Chlorsulfuron	0	0	0	0	
17	DTXSID4032619	Halofeno zide	112226-61-6 OR Halofeno zide OR N-4-chlorobenzoyl-N'-benzoyl-N'-tert- butylbenzene	5	0	0	0	
18	DTXSID0034774	Noviflumuron	121451-02-3 OR Noviflumuron	0	0	0	0	
19	DTXSID7052862	Cumyluron	99485-76-4 OR Cumyluron	0	0	0	0	
20	DTXSID4047672	Flubendiamide	272451-65-7 OR Flubendiamide	5	0	0	0	
21	DTXSID3032628	Methoxyfenozide	161050-58-4 OR Methoxyfenozide	11	0	0	0	
22								

IATA: computational synthesis and integration



Special Thanks



Barbara Abbott – NHEERL / TAD

Nancy Baker – Leidos / NCCT

Dave Belair – NHEERL / TAD (now CellGene)

John Cowden – NCCT/CSS

Keith Houck - NCCT

Sid Hunter – NHEERL / ISTD

Brian Johnson – U Wisconsin / HMAPS

Richard Judson – NCCT

Ann Richard – NCCT

Nathan Rush - NCCT

Kate Saili – NCCT

Rusty Thomas – NCCT

Todd Zurlinden – NCCT



EPA contract EP-D-13-055

Michael Colwell – Stemina

Jessica Palmer - Stemina



Tox21 Cross-Partner Project #6

Nicole Kleinstreuer – NICEATM / NTP / NIEHS

Thomas Knudsen – NCCT / ORD / EPA

Annie Lumen – NCTR / FDA

Menghang Xia – NCATS / NIH