# **CLH** report

# **Proposal for Harmonised Classification and Labelling**

Based on Regulation (EC) No 1272/2008 (CLP Regulation), Annex VI, Part 2

**Substance name: 2-methylimidazole** 

**EC Number:** 211-765-7

**CAS Number:** 693-98-1

**Index Number:** 

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# 1. IDENTITY OF THE SUBSTANCE

# 1.1 Name and other identifiers of the substance

Table 1: Substance identity and information related to molecular and structural formula of the substance

Name(s) in the IUPAC nomenclature or other international chemical name(s)	2-methyl-1H-imidazole
Other names (usual name, trade name, abbreviation)	Usual name: 2-methylimidazole
ISO common name (if available and appropriate)	n/a
EC number (if available and appropriate)	211-765-7
EC name (if available and appropriate)	2-methylimidazole
CAS number (if available)	693-98-1
Other identity code (if available)	-
Molecular formula	$C_4H_6N_2$
Structural formula	NH NH
SMILES notation (if available)	c1([nH]ccn1)C
Molecular weight or molecular weight range	82.1038
Information on optical activity and typical ratio of (stereo) isomers (if applicable and appropriate)	n/a
Description of the manufacturing process and identity of the source (for UVCB substances only)	n/a
Degree of purity (%) (if relevant for the entry in Annex VI)	Not relevant

# 1.2 Composition of the substance

Table 2: Constituents (non-confidential information)

Constituent	Concentration range	Current CLH in	Current self- classification and
(Name and	(% w/w minimum and	Annex VI Table	labelling (CLP)
numerical	maximum)	3.1 (CLP)	

identifier)			
<b>2-methylimidazole</b> EC no.: 211-765-7 CAS no.: 693-98-1	98-100%	No current entry	Current self-classification in the full/lead registration:
			Repr. 1B - H360
			Carc. 2 - H351
			Acute Tox. 4 - H302
			Skin Corr. 1C - H314
			Eye Dam. 1 - H318
			In addition the following hazard classes (with frequency of occurrence) are notified among the 20 other aggregated self-classifications in the C&L Inventory:
			8/20: Skin Corr. 1B - H314
			2/20: Repr. 2 - H361
			2/20: STOT RE2 - H373 (thyroid)
			2/20: STOT RE2 - H373 (endocrine system)
			1/20: Skin Irrit. 2 - H315
			1/20: Acute Tox. 4 - H312
			1/20: Acute Tox. 4 - H332
			1/20: Eye Irrit. 2 - H319
			1/20: STOT SE3 - H335 (Lungs, inhalation)

Table 3: Impurities (non-confidential information) if relevant for the classification of the substance

Impurity (Name and numerical identifier)	Concentration range (% w/w minimum and maximum)	Current CLH in Annex VI Table 3.1 (CLP)	Current self- classification and labelling (CLP) for endpoints not specified in the Annex VI entry)	The impurity contributes to the classification and labelling
Imidazole EC no.: 206-019-2 CAS no.: 288-32-4	Confidential information	Acute Tox. 4 – H302 Repr. 1B - H360D Skin Corr. 1C - H314. (AnnexVI entry number: 613-319- 00-0)	Acute Tox. 3 - H301 STOT SE 3 - H336 Eye Dam 1 – H318	Reproductive toxicity: The impurity is not considered to contribute to the classification. See section 9.10.5 for further information

Table 4: Additives (non-confidential information) if relevant for the classification of the substance

Additive (Name and numerical identifier)	Function	Concentration range (% w/w minimum and maximum)	Current CLH in Annex VI Table 3.1 (CLP)	Current self- classification and labelling (CLP)	The additive contributes to the classification and labelling
none					

Table 5: Test substances (non-confidential information)

Identification of test substance	Purity	Impurities and additives (identity, %, classification if available)	Other information
<b>2-methylimidazole</b> EC no.: 211-765-7 CAS no.: 693-98-1	99.8%	-	Used in the reproductive toxicity studies (BASF 2013a and 2013b).
2-methylimidazole CAS no.: 693-98-1	99.1 – 100.8 %, depending on method of analysis.		14 days and 15 week repeated tox studies (NTP 2004a)
2-methylimidazole CAS no.: 693-98-1	> 95.5%		2-year repeated toxicity studies (NTP 2004b)

Note: The test substance is the same as the substance for which CLH is proposed.

# 2. PROPOSED HARMONISED CLASSIFICATION AND LABELLING

# ${\bf 2.1}$ Proposed harmonised classification and labelling according to the CLP criteria

Table 6:

					Classification		Labelling		Specific		
	Index No	International Chemical Identification	EC No	CAS No	Hazard Class and Category Code(s)	Hazard statement Code(s)	Pictogram, Signal Word Code(s)	Hazard state- ment Code(s)	Suppl. Hazard statement Code(s)	Conc. Limits, M- factors	Notes
Current Annex VI entry	-	-	-	-	-	-	-	-	-	-	-
Dossier submitters proposal	-	2-methylimidazole	211-765-7	693-98-1	Repr. 1B	H360Df	GHS08 Danger	H360Df	-	-	-
Resulting Annex VI entry if agreed by RAC and COM	To be determined	2-methylimidazole	211-765-7	693-98-1	Repr. 1B	H360Df	GHS08 Danger	H360Df	-	-	-

Table 7: Reason for not proposing harmonised classification and status under public consultation

Hazard class	Reason for no classification	Within the scope of public consultation
Explosives	Hazard class not assessed in this dossier	No
Flammable gases (including chemically unstable gases)	Hazard class not applicable	No
Oxidising gases	Hazard class not applicable	No
Gases under pressure	Hazard class not applicable	No
Flammable liquids	Hazard class not applicable	No
Flammable solids	Hazard class not assessed in this dossier	No
Self-reactive substances	Hazard class not assessed in this dossier	No
Pyrophoric liquids	Hazard class not applicable	No
Pyrophoric solids	Hazard class not assessed in this dossier	No
Self-heating substances	Hazard class not assessed in this dossier	No
Substances which in contact with water emit flammable gases	Hazard class not assessed in this dossier	No
Oxidising liquids	Hazard class not applicable	No
Oxidising solids	Hazard class not assessed in this dossier	No
Organic peroxides	Hazard class not applicable	No
Corrosive to metals	Hazard class not assessed in this dossier	No
Acute toxicity via oral route	Hazard class not assessed in this dossier	No
Acute toxicity via dermal route	Hazard class not assessed in this dossier	No
Acute toxicity via inhalation route	Hazard class not assessed in this dossier	No
Skin corrosion/ irritation	Hazard class not assessed in this dossier	No
Serious eye damage/eye irritation	Hazard class not assessed in this dossier	No
Respiratory sensitisation	Hazard class not assessed in this dossier	No
Skin sensitisation	Hazard class not assessed in this dossier	No
Germ cell mutagenicity	Hazard class not assessed in this dossier	No
Carcinogenicity	Hazard class not assessed in this dossier	No
Reproductive toxicity	Harmonized classification proposed	Yes
Specific target organ toxicity- single exposure	Hazard class not assessed in this dossier	No
Specific target organ toxicity- repeated exposure	Hazard class not assessed in this dossier	No

Aspiration hazard	Hazard class not applicable	No
Hazardous to the aquatic environment	Hazard class not assessed in this dossier	No
Hazardous to the ozone layer	Hazard class not assessed in this dossier	No

#### 3. HISTORY OF THE PREVIOUS CLASSIFICATION AND LABELLING

2-methylimidazole has no prior harmonized classification, please see Table 2 for information on current self-classification. The substance was registered in 2013, and updated 2014, and was identified as a candidate for harmonised classification during ECHAs Manual Screening of substances for CLH in 2014.

#### 4. JUSTIFICATION THAT ACTION IS NEEDED AT COMMUNITY LEVEL

2-methylimidazole has a CMR property (developmental toxicity). Harmonised classification and labelling for CMR and respiratory sensitisation is a community-wide action under article 36 of the CLP regulation.

#### 5. IDENTIFIED USES

2-Methylimidazole is used as a starting material, a chemical intermediate, and as a component in the manufacture of pharmaceuticals, photographic- and photothermographic chemicals, dyes and pigments, agricultural chemicals, and rubber. It is also widely used as a polymerization cross-linking accelerator and hardener for epoxy resin systems for semiconductor potting compounds and soldering masks. It is a component of numerous polymers including epoxy resin pastes, acrylic rubber-fluororubber laminates, films, adhesives, textile finishes and epoxy silane coatings. It is also used as a dyeing auxiliary for acrylic fibres and plastic foams (NTP, 2004b).

Usages registered in EU includes: industrial use of processing aids in processes and products, not becoming part of articles; industrial use resulting in manufacture of another substance (use of intermediates); and industrial use of process regulators for polymerisation processes in production of resins, rubbers, polymers (REACH registration, 2014).

#### 6. PHYSICOCHEMICAL PROPERTIES

Table 8: Summary of physicochemical properties<sup>1</sup>

Property	Value	Reference <sup>1</sup>	Comment (e.g. measured or estimated)
Physical state at 20°C and 1013 hPa	Solid	REACH registration (2014)	
Melting/freezing point	1) 144 – 145 °C at 1013 hPa 2) 142°C 3) 144 °C at 1013 hPa	1). GESTIS - Substance Database 2) Begg et al 1973, Australien Journal of Chemistry, 1973, vol. 26, p. 2435,246 3) Lide, D.R. CRC Handbook of Chemistry and Physics 88TH Edition 2007-2008. CRC Press, Taylor & Francis, Boca Raton, FL 2007, p. 3- 356 as	Experimental result     Experimental result     Experimental result     Experimental result
Boiling point	1) 267 °C (No value for atmospheric pressure available) 2) 268 °C at 1013hPa 3) 267°C (No value for atmospheric pressure available) 4) 267 °C at 1013 hPa	1) Golovnya, R. V et al., 2000. Russian Chemical Bulletin, 2000, vol. 49, # 2 p. 319-324 as cited in Reaxys data base (Registry Number: 1368) 16 February 2011. 2). GESTIS - Substance Database (Information system on hazardous substances of the Berufsgenossenschaften) as cited 18.03.2011. 3) Yaws' Handbook of Physical Properties for Hydrocarbons and Chemicals As cited in Knovel e- books 18 February 2011  4) Lide, D.R. CRC Handbook of Chemistry and Physics 88TH Edition 2007-2008. CRC Press, Taylor & Francis, Boca Raton, FL 2007, p. 3- 356 as cited in HSDB 18 March 2011 CSR	1-4: Experimental results
Relative density	1.096 g/ml at 20°C.	REACH registration (2014)	OECD Guideline 109 (Density of Liquids and Solids)
Vapour pressure	<ul> <li>0.00043 hPa (extrapolated),at 20°C</li> <li>0.00078 hPa(extrapolated), at 25°C and</li> <li>0.011 hPa at 50°C.</li> </ul>	REACH registration (2014)	OECD Guideline 104 (Vapour Pressure Curve)
Surface tension	Not surface active	REACH registration (2014)	Based on chemical structure, no surface activity is to be expected.
Water solubility	REACH registration	REACH registration (2014)	Experimental result - OECD Guideline 105 (Water Solubility)
Partition coefficient n-octanol/water	1) Log Pow = 0.24 (@25°C) 2) Log Pow = 0.22 @ 25°C 3) Log Pow = -0.17 @ 25°C 4) Log Pow = 0.24 @	1) Hansch, C., Leo, A., D. Hoekman. Exploring QSAR - Hydrophobic, Electronic, and Steric Constants. Washington, DC: American Chemical Society., 1995., p. 8 as cited in HSDB 18 March 2011 2)REACH registration (2014) 3)Domanska et al 2002, Journal of	<ol> <li>Estimated by calculation</li> <li>Experimental result, study similar to OECD TG 107.</li> <li>Experimental result _guideline not reported</li> <li>Experimental result</li> </ol>

Property	Value	Reference <sup>1</sup>	Comment (e.g. measured or estimated)
	25°C	Chemical & Engeneering Data, 2002, vol. 47, #3 p456-466 as cited in Reaxys data base (Registry Number: 1368) 16 February 2011.  4) HANSCH, C ET AL. 195. As cited	
		in SRC PhysProp Database, online query 16 Feb 2011.	
Flash point	Not relevant		The substance is a solid.
Flammability	Brief burning and rapid extinction was observed The test substance is not considered highly flammable	REACH registration (2014)	Experimental result (EU Method A.10 (Flammability (Solids))
Explosive properties	Data Waived in REACH registration	REACH registration (2014)	
Self-ignition temperature	Not relevant	REACH registration (2014)	The substance is a solid with a melting point < 160°C.
Oxidising properties	Data Waived in REACH registration	REACH registration (2014)	The Substance is incapable of reacting exothermically with combustible materials on the basis of the chemical structure.
Granulometry	The particle size distribution is: < 100 µm: 9.1 %; < 10µm: 0.0% < 4 µm: 0.0%	REACH registration (2014)	Experimental result (OECD Guideline 110)
Stability in organic solvents and identity of relevant degradation products	Data waived in REACH registration	REACH registration (2014)	The stability of the substance is not considered as critical.
Dissociation constant	1) pKa = 7.88 @ 25 °C. 2) pKa = 7.86 @ 25 °C. 3) pKa = 7.85 @ 25 °C.	1) REACH registration (2014) 2) Perrin, HH. Dissociation Constants of Organic Bases in Aqueous Solution: Supplement 1972. London: International Union of Pure and Applied Chemistry, 1972 as cited in HSDB 18 March 2011 3) PERRIN,DD 1965, as cited in SRC PhysProp Database, online query 16 February 2011	1) Model calculation using SPARC v4.5 2) Experimental result, guidline not reported. 3) Experimental result, guidline not reported.
Viscosity	not applicable	REACH registration (2014)	The substance is a solid.

<sup>&</sup>lt;sup>1</sup>All information provided in this table was extracted from the REACH registration. If available, references as cited in the REACH registration has been included.

# 7. EVALUATION OF PHYSICAL HAZARDS

Not evaluated in the dossier

# 8. TOXICOKINETICS (ABSORPTION, METABOLISM, DISTRIBUTION AND ELIMINATION)

Table 9: Summary table of toxicokinetic studies

Method	Results	Remarks	Reference
Male and female (F344/N) rats received a single gavage dose of 25, 50 or 100 mg/kg bw 2-methylimidazole.  Sampling: 25 and 50 mg/kg bw groups: 5, 10, 15, 30, 60, 120, 240, 460 and 720 minutes after dosing. 100 mg/kg bw group: 5, 10, 15, 30, 60, 120, 240, 460, 720 and 1440 minutes after dosing. 3 rats were sampled at each time point. Each rat was sampled at two occasions.  Plasma samples were analysed for 2-MI. Concentration versus time data were evaluated using nonlinear least-squares estimation in WinNONLIN (version 2.1). A one-compartment model with first order absorption and elimination was used to fit the data (C(t)= D•K <sub>01</sub> /V/(K <sub>01</sub> -K <sub>10</sub> )•[exp(K <sub>10</sub> •t)-exp(K <sub>01</sub> •t)]). AUC values were calculated using the trapezoidal rule. Clearance was calculated as D/AUC <sub>inf</sub> and the half-lives for the absorption and elimination phases were calculated as 0.693/K <sub>01</sub> and 0.693/K <sub>10</sub> , respectively.	Peak 2-MI plasma concentrations were reached within 35 to 50 min for all groups. The absorption half-life values ranged from 10 to 18 minutes and were linear with dose. Elimination half-life values (T½) ranged from 61 to 96 minutes. In the 100 mg/kg bw group, T½ was higher compared to what would be expected from the increase in dose. Absolute bioavailability for 2-MI was estimated to approach 97%.	Publication Study report Reliability: 2  GLP-compliant study  Name of test material (as cited in publication): 2- methylimidazole  Analytical purity: 97.9% (Johnson, J.D., et al. 2002) >99.5 (NTP, 2004b)	Johnson, J.D. et al 2002. National Toxicology Program (2004b).
Male and female (B6C3F1) mice received a single gavage dose of 25, 50 or 100 mg/kg bw 2-methylimidazole.  Sampling: 25 and 50 mg/kg bw groups: 5, 10, 15, 30, and 45 minutes after dosing. 100 mg/kg bw group: 60, 90, 180, 360 and 720 minutes after dosing. 3 mice were sampled at each time point. Each mice was sampled at one occasion.  Plasma samples were analysed for 2-methylimidazole. Concentration versus time data were evaluated as	Peak 2-MI plasma concentrations were reached within 20 min for all groups. The absorption half-life values ranged from 2 to 4 minutes and were linear with dose. T <sub>1/2</sub> ranged from 15 to 20 minutes. In the 100 mg/kg bw group, T <sub>1/2</sub> was higher compared to what would be expected from the increase in dose.	Study report  Reliability: 2  GLP-compliant study  Name of test material (as cited in study report): 2-methylimidazole, CAS No. 693-98-1  Analytical purity: > 99.5%	National Toxicology Program (2004b).

Method	Results	Remarks	Reference
described above.			
Per oral administration of radiolabelled 2-methylimidazole as a single dose of 5, 50 or 150 mg/kg bw, or by intravenous administration of 5 mg/kg to male F344/N rats	Approximately 90% of the total dose was eliminated in urine within 24 h. Remaining <sup>14</sup> C was excreted in feces and as expired <sup>14</sup> CO2. Excretion data were similar following iv	Publication Reliability: 1 GLP-compliant study	Sanders, J.M. et al., 1998.
Sampling: Urine and faeces: 4, 8, 12, 24 and 48 hours. Expired air: 4, 8, 12 and 24 hours.	administration. Biliary excretion of 2-MI-derived 14C was negligible.  Approximately 70% of the <sup>14</sup> C	Name of test material (as cited in study report): 2- methylimidazole	
<u>Tissue examinations:</u> Post oral dosing: 2 h (50 mg/kg	excreted in urine was as parent compound. HPLC chromatograms for all treatment	Analytical purity: 99%	
bw) and 48 h (5, 50 or 150 mg/kg bw groups).  Post i.vdosing: 0.25, 0.5, 1, 2, 4, 6, 8 and 12 hours Biliary excretion was investigated following i.v	groups were similar, indicating that metabolism of 2-MI in rats was not affected by dose or route of administration.	Radiochemical purity: > 98%	
injections of 5 mg/kg bw to 3 rats.	Skin, kidney, and liver contained the highest concentrations of 14-C following oral administration. The highest concentrations following iv administration was found in the kidney.		
Male and female F344/N rats (15/sex/dose) recieved a single intravenous dose of 10 mg/kg bw.	The iv profiles was best described by a two-compartment model with first-order	Publication	Johnson, J. D. 2002.
	elimination.	Reliability: 2	National
Blood samples were collected at 5, 10, 15, 30 and 45 min and 1, 1.5, 2, 4 and 8 h from 3 animals at each time point. Each rat was sampled	2-MI was rapidly distributed. The distribution half-life was 5 to 8 min. The volume of	GLP-compliant study	Toxicology Program (2004b).
twice	distribution (Vss) of 2-MI was determined to be 1 to 2 L.	Name of test material (as cited in publication): 2- methylimidazole	
		Analytical purity: 97.9% (Johnson, J.D., et al. 2002) >99.5 (NTP, 2004b)	

# 8.1 Short summary and overall relevance of the provided toxicokinetic information on the proposed classification(s)

Male and female F344/N rats, and male and female B6C3F<sub>1</sub> mice was administered 2-methylimidazole (25, 50 or 100 mg/kg bw) by gavage (Johnson et al. 2002; NTP 2004b). The absorption half-life values ranged from 10 to 18 minutes in rats, and 2 to 4 minutes in mice and were generally linear with dose. Elimination half-life values ranged from 61 to 96 minutes in rats, and from 15 to 20 minutes in mice and were generally increased in the 100 mg/kg groups. The data indicate that the 100 mg/kg bw dose is approaching the upper limit of the linear dosing range. The oral bioavailability was approximately 97% (Johnson et al. 2002).

The distribution half-life following iv-administration of 10 mg/kg bw to male and female F344/N rats was 5 to 8 min, indicating that distribution of 2-MI from the blood to tissues was complete within about 30 min after entering the systemic circulation (Johnson et al. 2002). The volume of distribution (*Vss*) of 2-MI was determined to be 1 to 2 L. The highest peak concentration of <sup>14</sup>C was observed in the kidney. Following oral administration of 5, 50 or 150 mg/kg bw to male F344/N rats, only trace levels of 2-methylimidazole-derived radioactivity remained in tissues 48 hours post exposure (Sanders et al. 1998). The highest concentrations of <sup>14</sup>C was found in skin, kidney, and liver. Concentrations of <sup>14</sup>C in tissues increased proportionally with dose, and tissue/blood ratios of <sup>14</sup>C were relatively constant throughout the dose range. Hence, the distribution of 2-MI seems not to be affected by exposure level or route of exposure.

Following oral administration of radiolabelled 2-methylimidazole to male rats, the total dose excretion in urine approached 90% within 24 hours (Sanders et al. 1998). Hence, 2-methylimidazole is eliminated primarily via urine. The parent compound accounted for up to 78% of the total radioactivity excreted in urine, whereas radioactivity from metabolites made up only 5%. Fecal elimination accounted for most of the remaining radioactivity, however a small amount of the dose was eliminated via breath as CO<sub>2</sub>. Elimination of radioactivity was somewhat more rapid following intravenous administration. In the iv-group, over 90% of the administered radioactivity was recovered in urine within 12 hours of injection.

Mice had slightly higher clearance rates than rats, and therefore lower internal exposure to 2-methyl imidazole following oral gavage administration at the same dose level.

#### **Conclusion**

The experimental toxicokinetic data shows that 2-methylimidazole is rapidly and extensively absorbed as well as rapidly distributed and eliminated in the body following oral and iv administration, indicating that there is no build-up of 2-methylimidazole for repeated exposure. The toxicokinetic processes are linear at doses below 100 mg/kg bw, however the elimination becomes saturated at higher dose levels.

#### 9. EVALUATION OF HEALTH HAZARDS

## 9.1 Acute toxicity - oral route

Hazard class not evaluated in this dossier.

## 9.2 Acute toxicity - dermal route

Hazard class not evaluated in this dossier.

## 9.3 Acute toxicity - inhalation route

Hazard class not evaluated in this dossier.

#### 9.4 Skin corrosion/irritation

Hazard class not evaluated in this dossier.

# 9.5 Serious eye damage/eye irritation

Hazard class not evaluated in this dossier.

## 9.6 Respiratory sensitisation

Hazard class not evaluated in this dossier.

#### 9.7 Skin sensitisation

Hazard class not evaluated in this dossier.

# 9.8 Germ cell mutagenicity

Hazard class not evaluated in this dossier.

## 9.9 Carcinogenicity

Hazard class not evaluated in this dossier.

# 9.10 Reproductive toxicity

No human data is available for 2-methylimidazole.

# 9.10.1 Adverse effects on sexual function and fertility

Table 10a: Summary table of animal studies on adverse effects on sexual function and fertility

Method, guideline,		Results	Reference
deviations if any, species, strain, sex, no/group			Reliability
strain, sex, no/group	exposure		
		A statistically significant increase in mean duration of pregnancy (22.5 days) was recorded in the high dose dams. The recorded gestation length was however still comparable between the test substance-treated groups and the control group (i.e. between 21.9 and 22.5 days. (According to the registrant, Historical control data within the lab for this strain and type of study is 21.6 – 22.4 days)  Mean number of implantation sites was comparable between all test substance-treated groups and the controls (12.9, 12.8, 13.0 and 11.8 implants/dam at 0.50, 150 and 500	
		11.8 implants/dam at 0, 50, 150 and 500 mg/kg bw/day, respectively).	
		No effects on post-implantation losses (8.2%/7.5%/12.0% / 9.2%) or on mean number of pups (live + dead) delivered per dam (11.8, 11.9, 11.5 and 11.1 pups/dam at 0, 50, 150 and 500 mg/kg bw/day, respectively).	
		↑ number of stillborn pups in the high dose group (11*[p<=0.01] as compared to 0, 0 and 4 in the control, low and intermediate dose group, respectively). This was mainly caused by high-dose dam No. 140 (found dead on PND 3), which had 7 stillborn pups in its litter (12 pups in total). Consequently the live birth index was reduced at the high dose level, 90%** [p<=0.01] when compared to the other dose groups (100%, 100%, 97% and) in the control, low and intermediate dose groups, respectively). Historical control data for live birth index in the lab 93-100 %).	
		The registrant considers that the increase in gestation length and the reduced live birth index are adverse findings and these findings are the basis for setting LOAELs for reproduction.	
		See Table 35a for more information regarding fetal examination.	

<sup>&</sup>lt;sup>1</sup>Female fertility index (%) = (number of females pregnant\* / number of females mated\*\*) x 100. \* defined as the number of females with implants in utero. \*\* defined as the number of females with vaginal sperm or with implants in utero. <sup>2</sup>Gestation index (%) = (number of females with live pups on the day of birth / number of females pregnant\*) x 100. \* defined as the number of females with implants in utero. <sup>3</sup>Live birth index (%) = (number of live-born pups at birth / total number of pups born) x 100..

Table 10b: Summary table of other studies relevant for toxicity on sexual function and fertility.

Method, guideline, deviations if any, species, strain, sex, no/group	Test substance, dose levels duration of exposure.	Results	Reference Reliability					
	RAT studies							
Oral repeated dose toxicity study in rat Not in compliance with GLP Rat (Sprague-Dawley) 10 animals per sex and per group	2-Methylimidazol >99% purity Oral gavage, once daily, 5 days/week for 4 weeks  Dose levels: 100, 200, 400, 800 mg/kg bw/day	Clinical signs and mortalities: no mortality observed, slightly ruffled fur at 200 mg/kg dose; 400 and 800 mg/kg: yellow urine, ruffled fur and increased salivation.  Body weight and weight gain: normal body weight gain in all exposure groups, except for males at 800 mg/kg bw.  Organ weights and histopathology: No effects on testicular weights (no info on other reproductive organs). No adverse finding at the histopathological examination of testicles/ovaries, prostate/uterus, seminal vesicles and epididymis up to and including the high dose level.	Study report (Report date 1975-12-29) entitled "Exp Key Repeated dose toxicity: oral.001" in REACH registration (2014) Reliability 3 (dosing only 5 days /week, thus difficult to assess what dosing period the result from this study cover.					
Non-guideline GLP-compliant repeated dose toxicity study Rat (Fischer 344) 5/sex/dose	2-methylimidazole (CAS No. 693-98-1)  Analytical purity: 99.1 – 100.8 %, depending on method of analysis  Dietary, 15 days daily  Dose levels:  Nominal: 0, 1200, 3300 and 10 000 ppm.  Actual: 0, 108, 297 and 900 mg/kg bw/day.	Clinical signs and mortalities All male and female rats survived till the end of the study with no exposure-related clinical signs.  Body weight and weight gain  ↓ mean absolute body weight in high dose males (162g** as compared to 198g in the control group).  ↓ mean body weight gain in high (38g**) and intermediate (63g**) dose males as compared to controls (75g); and in high dose females (18**) as compared to controls (34g).  Food consumption In the groups treated with 900 mg/kg food consumption was significantly reduced for males and females.  Gross pathology and histopathology No effect on testis weight (the only reproductive organ that was weighed) and no abnormal finding at the histopathological examination of the ovary and the testes (the only reproductive organs that were examined) at doses up to and including 900 mg/kg bw/day.	NTP (2004a)— Chan, P. et al., 2006.  Reliability 2 (reliable with restrictions)					
Similar or equivalent to OECD Guideline	2-methylimidazole (CAS No. 693-98-1)	Clinical signs and mortalities: No mortalities  Body weights. Mean body weight were	NTP (2004 a					

408 (Repeated Dose 90-Day Oral Toxicity in Rodents) GLP compliant Rat (Fischer 344) 10/Sex/dose in core study groups Additional analysis at end of study in Control (suring the last 12 study days) and sperm analysis (number and motility).  Actual ingested: 0, 40, 80, 80, 80, 80, 80, 80, 80, 80, 80, 8	Method, guideline,		Results					Reference
90-Day Oral Toxicity in Rodents)  Analytical purity: 99.1 — control) and high-dose females (89% of control).  Organ weights  The only reproductive organ that was included in the kits of organs that were weighed at necropsy was the right testis. In addition the weight of the organs proceived before processing these tissues for sperm analysis. Oestrous eyele monitoring (during the last 12 study days) and sperm analysis (number and motility).  Analytical purity: 99.1 — control) and high-dose females (89% of control).  Organ weights  The only reproductive organ that was included in the kits of organs that were weighed at necropsy was the right testis. In addition the weight of the organs specified below (at these dose levels) were recorded before processing these tissues for sperm analysis.  Oestrous eyele monitoring (during the last 12 study days) and sperm analysis (number and motility).  Particle of the processing these tissues for sperm analysis.  Dictary, 14 weeks daily Dose levels:  Oestrous eyele monitoring (during the last 12 study days) and sperm analysis (number and motility).  Dose levels:  Oestrous eyele monitoring (during the last 12 study days) and sperm analysis (number and motility).  Dose levels:  Testis (g)  Reliability 1  Reliabili		levels duration of exposure.						Reliability
Sontrols and at the 3 highest dose levels; obstrous cycle monitoring (during the last 12 study days) and sperm analysis (number and motility).   Testis (g) (absolute)   Right   1.388   1.478   1.471   1.247*   1.248*   1.539   1.518   1.289**	90-Day Oral Toxicity in Rodents) GLP compliant Rat (Fischer 344) 10/sex/dose in core study groups Additional analysis at	– 100.8 %, depending on method of analysis Dietary, 14 weeks daily Dose levels:  Nominal: 0, 625, 1250, 2500, 5000 and 10000 ppm.	control) and  Organ weigl The only rep the list of org was the right organs specifi recorded before	high-do: hts roductivgans that testis. I	re organ the were we n addition ow (at the	s (89% of hat was indighed at no the weight se dose lev	control).  cluded in ecropsy to of the vels) were	al., 2006.  Reliability 1 (reliable without
Testis (g) (absolute) In the last 12 Study days) and sperm analysis (number and motility).  Testis (g)(Relative) Inght 1.498 1.539 1.518 1.289**  Testis (g)(Relative) Inght 3.78 4.22** 4.38** 4.37** I epididymis (g) I epididymis (g) I epididymis (g) I erose Pathology Small uteri in 10 000ppm females (Uterus weights were not recorded).  Histopathology The incidence of animals with testicular degeneration was significantly increased in the high-dose group (2, 2, 1, 2, 2 and 9** in the control, 40, 80, 160, 300 and 560 mg/kg dose group. respectively). The group mean severity score (grading 0-4, 1 = minimal, 2=mild, 3=moderate, "4" = marked severity) was, however, lower in 2-methylimidazole treated groups as compared to controls (2.5, 1, 1, 1, 1, 1.2, in the 0, 40, 80, 160, 300 and 560 mg/kg dose group. respectively). There was no recording of adverse histopathological findings in the epididymidis, seminal vesicle, prostate, ovary or in the uterus  Sperm analysis and esterous cycling	controls and at the 3	80, 160, 300 and 560		0	160	300	560	
L epididymis (g) 0.4987 0.4965 0.4852 0.4341* (g)    L cauda epididymis (g)   Necropsy weight (g) 366 ±7 350±2 336±5* 294**  Gross Pathology Small uteri in 10 000ppm females (Uterus weights were not recorded).  Histopathology The incidence of animals with testicular degeneration was significantly increased in the high-dose group (2, 2, 1, 2, 2 and 9** in the control, 40, 80, 160, 300 and 560 mg/kg dose group. respectively). The group mean severity score (grading 0-4, 1 = minimal, 2=mild, 3=moderate, "4" = marked severity) was, however, lower in 2-methylimidazole treated groups as compared to controls (2.5, 1, 1, 1, 1, 1, 1, 1, in the 0, 40, 80, 160, 300 and 560 mg/kg dose group. respectively). There was no recording of adverse histopathological findings in the epididymidis, seminal vesicle, prostate, ovary or in the uterus  Sperm analysis and esterous cycling	Oestrous cycle monitoring (during the last 12 study days) and sperm analysis (number and	mg/kg bw/day rcle (during study days) analysis	Testis (g) (absolute) - Right - Left Testis (g)(Relative) - right	1.498	1.539	1.518	1.289**	
epididymis (g)  Necropsy weight (g)  Small uteri in 10 000ppm females (Uterus weights were not recorded).  Histopathology  The incidence of animals with testicular degeneration was significantly increased in the high-dose group (2, 2, 1, 2, 2 and 9** in the control, 40, 80, 160, 300 and 560 mg/kg dose group. respectively). The group mean severity score (grading 0-4, 1 = minimal, 2=mild, 3=moderate, "4" = marked severity) was, however, lower in 2-methylimidazole treated groups as compared to controls (2.5, 1, 1, 1, 1, 1, 2, in the 0, 40, 80, 160, 300 and 560 mg/kg dose group. respectively). There was no recording of adverse histopathological findings in the epididymidis, seminal vesicle, prostate, ovary or in the uterus  Sperm analysis and esterous cycling			L epididymis	0.4987	0.4965	0.4852	0.4341*	
Recropsy weight (g)  Gross Pathology Small uteri in 10 000ppm females (Uterus weights were not recorded).  Histopathology The incidence of animals with testicular degeneration was significantly increased in the high-dose group (2, 2, 1, 2, 2 and 9** in the control, 40, 80, 160, 300 and 560 mg/kg dose group. respectively). The group mean severity score (grading 0-4, 1 = minimal, 2=mild, 3=moderate, "4" = marked severity) was, however, lower in 2-methylimidazole treated groups as compared to controls (2.5, 1, 1, 1, 1, 1.2, in the 0, 40, 80, 160, 300 and 560 mg/kg dose group. respectively). There was no recording of adverse histopathological findings in the epididymidis, seminal vesicle, prostate, ovary or in the uterus  Sperm analysis and esterous cycling			epididymis	0.1777	0.1798	0.16512	0.1250*	
Small uteri in 10 000ppm females (Uterus weights were not recorded).  Histopathology The incidence of animals with testicular degeneration was significantly increased in the high-dose group (2, 2, 1, 2, 2 and 9** in the control, 40, 80, 160, 300 and 560 mg/kg dose group. respectively). The group mean severity score (grading 0-4, 1 = minimal, 2=mild, 3=moderate, "4" = marked severity) was, however, lower in 2-methylimidazole treated groups as compared to controls (2.5, 1, 1, 1, 1, 1.2, in the 0, 40, 80, 160, 300 and 560 mg/kg dose group. respectively). There was no recording of adverse histopathological findings in the epididymidis, seminal vesicle, prostate, ovary or in the uterus  Sperm analysis and esterous cycling			Necropsy	366 ±7	350±2	336±5*	294**	
Spermatid heads			Small uteri in were not reconstructed. Histopatholo The incidence degeneration high-dose green control, 40, 8 group. respectively and to 40, 80, 160, 2 respectively histopatholog seminal vesicose (mg/kg bw/day.	on 10 000 prded).  ogy  e of anin  was sig oup (2, 2, 2, 30, 160, etively).  e of anin  ag 0-4, 1  "4" = m  ethylimic controls  300 and  . There  igical fine cle, pros  is and es	mals with mificantly 2, 1, 2, 2 a 300 and 5 The grou = minim marked sevidazole tro 5 (2.5, 1, 1) 560 mg/k was no reddings in titate, ovar	testicular increased and 9** in 560 mg/kg ip mean se al, 2=mild verity) was eated groud, 1, 1, 1, 1.2, ag dose grocording of the epididy y or in the cling	in the the dose verity , s, however, ps as , in the 0, oup. adverse midis, uterus	

Method, guideline, deviations if any, species, strain, sex, no/group	Test substance, dose levels duration of exposure.	Results				Reference Reliability
Equivalent or similair to OECD Guideline 453 (Combined Chronic Toxicity / Carcinogenicity Studies) GLP compliant Rat (F344/N) 60/sex/dose in core study groups.	2-methylimidazole (CAS No. 693-98-1) (Analytical purity: > 99.5%) Dietary,2 year, with interim evaluation of 10 animals/dose group at 6 months)  Dose levels: Nominal: 0, 300, 1000 and 3000 ppm (males); 0, 1000, 2500 and 5000 ppm (females).  Actual: 0, 13, 40 and 130 mg/kg bw (males); 0, 50, 120 and 230 mg/kg bw (females)	Spermatid counts (mean/10 <sup>4</sup> mL susoension)  Epididymal spermatozoal measurements (Motility (%))  Conc (10 <sup>6</sup> / cauda epididymal tissue)  In females, the migh-dose female compared to the 4.65 ± 0.15 and 5160, 300 and 560  Clinical signs at Survival of dose than that of the cathin body cond females. This was the feed rather the methylimidazole  Body weight and Mean body weight intermediate and less than those of study.  Organ weights I study for reproductive orghistopathological evaluation.  2yr: Hyperplasia 14/50, 15/50 and (4/50, 5/50, 4/50) germinal epitheli of the epididymic compound.	87.67 ± 0.36  87.67 ± 0.36  439 ± 25  mean length es was signic controls (4.5.56±0.41** 0 mg/kg dos  and mortalite demales we controls. Clinition in high as attributed ann a toxic estable of the control.  No recordinative organization on-neoplast ans was recalled examination of uterus ending the control of the control o	87.91 ± 0.51  399 ± 38  of estrous of ificantly incompanies in the segroup, restricted in the segroup, restricted in the segroup in the segro	eycle of the creased as $61 \pm 0.14$ , controls, spectively).  antly less gs included as and latability of and re generally ost of the en during the in $10/50$ , sue, cyst ces of granuloma	NTP, 2004b. Chan. P.C. et al., 2008. Tani Y, et al., 2005 Reliability 1 (reliable without restriction)
Paraetad daga	2 mothydimidozolo	Studies in Mouse		ing. All mo	lo and	NTD (2004a)
Repeated dose toxicity study GLP compliant Non-guideline	2-methylimidazole (CAS No. 693-98-1) Purity: Depending on analytical method 99.1 – 100.8%)	Clinical signs ar female mice surv no exposure-rela Body weight an females treated v	vived till the ted clinical <b>d body wei</b>	e end of the signs. ght gain: In	study with	NTP (2004a) Chan, P. et al., 2006.

Method, guideline, deviations if any, species, strain, sex, no/group	Test substance, dose levels duration of exposure.	Results	Reference Reliability
Mouse B6C3F1 5/sex/dose	Dietary, 15 days daily- <b>Dose levels.</b> Nominal: 0, 1200, 3300 and 10000 ppm.  Actual ingested: 0, 232, 638 and 1933 mg/kg bw/day	were significantly reduced compared to controls.  No effects on the weight of the testis (only reproductive organ that was examined). No adverse finding at the histopathological examination of the testis and ovaries (only reproductive organs that were examined) at dose levels up to and including 1933 mg/kg:	Reliability 2 (reliable with restrictions)
Equivalent/similar to OECD Guideline 408 (Repeated Dose 90-Day Oral Toxicity in Rodents) GLP compliant Mouse (B6C3F1) 10/sex/dose in core study groups.  Additional analysis at end of study in controls and at the 3 highest dose levels: Oestrous cycle monitoring during last 12 study days and sperm analysis (number and motility).	2-methylimidazole (CAS No. 693-98-1) Analytical purity: depending on method of analysis 99.1 - 100.8%), Dietary, 14 weeks daily  Dose levels: Nominal: 0. 625, 1250, 2500, 5000 and 10000 ppm.  Actual ingested: 0, 100, 165, 360, 780 or 1740 mg/kg bw/day (males); 0, 90, 190, 400, 800 and 1860 mg/kg bw/day (females)	Clinical signs and mortalities All mice survived. No chemical-related clinical signs of toxicity were observed.  Body weight and weight changes ↓ Terminal body weight was recoded at the 5000 and 10000 ppm dose level in both males (33.7 g** and 30.0 g**, respectively as compared to controls, 37.4g) and females (26.5 g** and 23.5 g**, respectively as compared to controls, 32.0 g).  Organ weights: No reported effects on the weight of the testis (the only reproductive organ that was weighed)  Histopatology No adverse effect recorded at the histopathological examination of the reproductive organs.  Spermanalysis and vaginal cytology No significant differences between exposed and control mice were found on sperm motility or on the esterous cycle length.	NTP, 2004a  Chan, P. et al., 2006.  Reliability 1 (reliable without restriction)

Method, guideline, deviations if any, species, strain, sex, no/group	Test substance, dose levels duration of exposure.	Results	Reference Reliability
Equivalent or similar to OECD Guideline 453 (Combined Chronic Toxicity / Carcinogenicity Studies) GLP compliant Mouse (B6C3F1 60/sex/dose in core study groups	2-methylimidazole) (CAS No. 693-98-1) (Analytical purity: > 99.5%) Dietary,2 year, with interim evaluation of 10 animals/dose group at 6 months Nominal: 0, 625, 1250 and 2500 ppm in diet. Actual ingested 0, 75, 150 and 315 mg/kg bw/day (males); 0, 80, 150 and 325 mg/kg bw/day (females)	Clinical signs and mortalities: Survival of all exposed groups was similar to that of the control group. No clinical findings were attributed to 2-methylimidazole exposure  Body weights: Mean body weights of mid- and high-dose males and high dose females were less than those of the controls during most of the study  Histopatholog  Evaluation at 6 month  No dose dependent increase of adverse findings were recorded at the histopathological examination of the reproductive organs  Evaluation at end of study:  No dose-dependent increase in adverse effects was recorded in the female reproductive organs  An increase in sperm granuloma of the epididymidis (0/0/6/12% in control, low, intermediate and high dose, respectively) and of germinal epithelium atrophy (2/8/16/28% in control/low/intermediate and high dose, respectively) was recorded at the intermediate and high dose level. However these effects were only found after 2 years and are therefore considered to be of less relevance for the evaluation of reproductive toxicity.	NTP 2004b Chan, P.C. et al., 2008. Tani Y, et al., 2005. Reliability 1 (reliable without restriction)

The information provided in the table only relates to endpoints that are of specific interest for the evaluation of reproductive toxicity.

# 9.10.2 Short summary and overall relevance of the provided information on adverse effects on sexual function and fertility

No effects on male or female fertility or mating indices were recorded in the available reproductive screening study (OECD 421, GLP; oral gavage) at dose level up to and including 500 mg/mg bw/day. No adverse histopathological findings were recorded at the examination of the testis, ovaries and epididymides or on the weight of the testicles (no other reproductive organs were analysed in the study). However, at the highest dose level, an increase in mean duration of pregnancy (22.5 days, statistically significant) was observed. The recorded gestation length was however comparable between the test substance-treated groups and the control group (i.e. between 21.9 and 22.5 days, historical control data within the performing laboratory for this strain and type of study is 21.6 – 22.4 days). Two high dose dams died during or shortly after parturition (PND 2 and 3), both showing signs of complicated parturition proceeding death (undelivered pups, umbilical cords not cut, newborn not nursed). As a consequence their pups either died or had to be killed for humane reasons. There were no pathological findings that could explain these deaths. There were no adverse clinical findings in the high dose group and the recorded effects on body weight on PND 0 (\dagger 7% as compared to controls)

were mild in nature. The effect on parturition at the high dose level is considered to be an adverse effect on female reproduction that is not considered to be secondary to unspecific toxicity.

Some indications of an adverse effect on fertility were recorded in the rat 14 week dietary repeated dose toxicity study (NTP 2004a, GLP study of high reliability). In this study, a lower but statistically significant decreased testis weight (absolute: ~10% less as compared to the controls; P≤0.05) and epididymidis weight (13% less than the control; p≤0.01) was recorded at the high dose level (560 mg/kg bw/day). Spermanalysis revealed a decrease in the spermatid head count (p≤0.05, 14.5% less as compared to controls), but no effect on the motility or on the concentration of epididymal spermatozoa was recorded at the high dose level. No adverse histopathological finding was recorded at the examination of the ovary, uterus, epididymidis, seminal vesicle and prostate. A higher incidence of testis degeneration was recorded in the high dose males, but the group mean severity-score of the finding was mild and therefore this finding is considered to be of no importance for classification purposes. The high dose females displayed an increased oesterous cycle length (5.38±0.24 days (p≤0.01) as compared to 4.70 ±0.15 in the controls). However, there was no significant difference between the high dose and controls females, when one compared the relation of time spent in in each stage of the oesterous cycle. At the high dose level the group mean necropsy weight of males were ~20% less and that of the females was ~11% less as compared to the controls. No similar effect on sperm count, oesterous cyling and testis and epididymal weights was recorded in the 14 week dietary repeated dose toxicity study in mice (NTP 2004a, GLP study of high reliability) at dose level up to and including ~1800 mg/kg bw/day.

In the rat 2 year dietary carcinogenicity study (NTP 2004b, GLP), no histopathological findings of relevance for the evaluation of reproductive toxicity was recorded at the interim evaluation after 6 months or at the end of the study at dose levels up to and including 130 (m)/230(f) mg/kg bw/day. In the mice dietary 2 year carcinogenicty study (NTP 2004b, GLP), there were no histopathological findings of relevance for the evaluation of female reproduction. In male mice, there was an increase in the incidence of germinal cell atrophy as well as in the incidence of spermgranuloma of the epididymidis. However since no similar findings was recorded at the 6 month interim evaluation, the recording after 2 year is considered to be of less importance for the evaluation of male reproductive toxicity.

In conclusion, the available data from repeated dose toxicity studies do not give a concern for effects on the integrity of the male and female reproductive organs. No adverse effect was recorded for female and male fertility, mating and gestation indices in the OECD 421 study. However it should be emphasised that this study is a screening study (covering a limit number of endpoints and having less statistical power then the more comprehensive reproductive toxicity studies (2-generation, one generation or extended one generation reproductive toxicity studies), consequently an absence of signal should be interpreted with caution. In addition, since there is no two-generation/one-generation or extended one generation study available for 2-methylimidazole, there is no available study where fertility is assessed after an exposure period that fully covers spermatogenesis or folliculogenesis, neither do the available studies allow for an assessment of possible effects on sexual maturation. The available data set do however indicate that female reproduction is affected by 2-methylimidazole, i.e. two dams out of 10 died during or shortly after parturition in the OECD 421 study.

#### 9.10.3 Comparison with the CLP criteria

The available dataset indicate that there is some evidence for an adverse effect on the process of parturition. In the OECD 421 study two dams in the high dose group died during or shortly after parturition. Although no clear effect was seen on the group mean gestation time, the severity of the finding as such is considered to be high especially since the recorded level of toxicity in the high

dose group females was considered to be mild and no abnormal clinical findings were recorded for the other high dose dams during the study or for the period up until start of parturition for the two dams that were found dead. The observed mortalities are not considered to be secondary to non-specific toxicity but rather be specifically related to the process of parturition. Classification in Repr. 2 - H361f is therefore, warranted.

Classification in Repr. 1A – H360F is not justified since there is no human data that indicates that 2-methyl imidazole have an adverse effect on human fertility or sexual maturation.

Classification in Repr. 1B-H360F is not warranted since the data set available is limited and the signal strength is such that it is considered to provide "some" but not "clear" evidence for an adverse effect on fertility.

# 9.10.4 Adverse effects on development

Table 11: Summary table of animal studies on adverse effects on development

Method	Species	Dose levels	Results	Reference
Guideline Deviation(s)	Strain Sex	duration of		
from the	no/group	exposure Test		
guideline	g	substance.		
GLP	Rat	EC name: 2-	Mortalities and clinical observations: see Table 34a.	BASF 2013 a
compliant	(Wistar)	methylimidaz	Maternal toxicity	
OECD	11-13 week	ole (CAS No.	GD 0-20 mean body weight gain stat sign reduced (-	As cited in REACH
Guideline 421	at start of	693-98-1)	18% as compared to controls) on PND0 mean body	registration
(Reproduction	dosing	Analytical	weight stat sign deceased (-7%) as compared to	(2014)
Davalanmente	male/female	purity: 99.8%	controls. No effects at 150 and 50 mg/kg bw/day.	
Developmenta 1 Toxicity		Oral: gavage,	Developmental effects	
Screening	10 animals	once daily	No effects on post-implantation losses (8.2% / 7.5% /	
Test)	per sex per	(vehicle: 1%	12.0% / 9.2% in the control, low, intermediate and	
,	dose:	carboxymeth	high dose group).	
All pups with		ylcellulose in	↑ number of stillborn pups in the high dose group	
scheduled		drinking	(11*[p<=0.01] as compared to 0, 0 and 4 in the	
sacrifice on		water)	control, low and intermediate dose group,	
PND 4,		0, 50, 150	respectively). This was mainly caused by high-dose	
moribund/still		and 500	dam No. 140 (found dead on PND 3), which had 7	
born pups and pups that died		mg/kg	stillborn pups in its litter (12 pups in total).	
before		bw/day	Consequently the live birth index <sup>1</sup> was decreased in	
scheduled		(actual	the high dose group (90%** [p<=0.01] as compared	
necropsy were		ingested)	to 100%, 100%, 97% in controls, low and	
examined		Males were	intermediate dose groups, respectively.	
externally and		dosed for 28	↓ Viability index PND 0-4 (i.e. pups also died during lactation [28 pups died and 3 were cannibalized]) in	
eviscerated;		days (2 weeks	the high dose group $(59\% ** [p <= 0.01])$ as compared	
their organs		prior to	to 99% / 98% / 97% in in the control (1 pup was	
were assessed		mating,	cannibalized in the control), low and intermediate	
macroscopical		during mating (max 2	dose groups.	
ly, paying		weeks), and	No adverse clinical signs were observed in the F1	
particular attention to the		up to the day	pups. Six runts <sup>2</sup> were born in the high dose group.	
heart and		prior to	Slightly, but not statistically significant, decreased pup	
aortic vessels.		scheduled	mean body weight and body weigh changes were	
		necropsy).	recorded during lactation.	
All pups with findings and		Females were	Gross pathological examination of pups identified	
10 control		dosed from 2	aneurysms at different levels of the aorta, in the region	
pups (5/sex)		weeks prior	of the ductus arteriosus and the pulmonary trunk.	
were further		to mating,	Frequently, aneurysms (balloon-like swellings) were	
processed for		until day 4 of	observed simultaneously at different sites in the same	
histopathologi		lactation (last	pup. Number of affected pups were 0, 2, 14 and 42 in	
cal		dose on the	the control, low, intermediate and high dose group,	
examination		day prior to	respectively.	

Method Specie	es Dose levels	Results	Reference
Guideline Deviation(s) from the guideline Strain Sex no/gre	duration of exposure	Results	Reference
of the basis of the heart and great vessels  GLP- compliant (Wistamodified reproduction/d female)	egnant ole (CAS:	In most cases, histopathology correlated with the aneurysm detected at gross pathology. Number of affected pups were 0, 2, 14 and 37 in the control, low, intermediate and high dose groups, respectively). No NOAEL for developmental effects was identified in the study.  Maternal toxicity  No test-substance related clinical signs or mortalities in any dose group.  No effect on food consumption or on parental body	BASF SE (2013b) As cited in
evelopmental screening study  Examinations in adult females included clinical signs, parturition and lactation behaviour, body weight, food consumption and gross pathology Pup examinations included pup status, litter size and external examination at birth, viability, clinical signs, body weight, gross pathological examination, followed by histopathologi cal examination of the great blood vessels of the	Purity: 99.8%  Oral: gavage, once daily (vehicle: 1% carboxymeth ylcellulose in drinking water)  Dose levels: 0, 2, 10 and 50 mg/kg bw/day  Duration of exposure Once daily from gestation day 6 through post-natal day 3 (i.e. from implantation to one day prior to sacrifice).)	Development  No effects on Gestation index <sup>3</sup> , live birth index <sup>1</sup> or mean litter-size at birth. The number of stillborn pups was comparable between the groups. No effects on viability index at PND4. No effect on mean pup body weight or body weight changes. The number of runts <sup>2</sup> was 1, 2, 1, 6 in the 0, 2, 10 and 50 mg/kg bw/day group, respectively.  Histopathological examination of the base of the great vessels of the heart revealed dissection aneurysm in 0, 1, 3 and 3 pups in the controls, low intermediate and high dose group, respectively	REACH registration (2014)

Method	Species	Dose levels	Results	Reference
Guideline	Strain	duration of		
<b>Deviation(s)</b>	Sex	exposure		
from the	no/group	Test		
guideline		substance.		
pups.				

<sup>&</sup>lt;sup>1</sup>Live birth index (%) = (number of liveborn pups at birth / total number of pups born) x 100. <sup>2</sup> Runts defined as pups weighing less than 75% of the mean weight of concurrent control pups.

# 9.10.5 Short summary and overall relevance of the provided information on adverse effects on development

For examination of developmental effects two studies are available, a reproduction/developmental toxicity screening test in Wistar rats according to OECD 421 and GLP (BASF 2013a) and a follow-up study (GLP) according to a modified developmental toxicity protocol (BASF 2013b), with dosing of only females from gestation day 6 until postnatal day 3. The follow-up study was conducted because developmental toxicity (dissecting aneurysm of the great vessels of the heart) was observed at all dose levels (0, 2, 14 and 37 pups in the control, low, intermediate and high dose groups, respectively)) in this original study. In addition a decreased pup-viability index at PND 4 (53% as comp to 100% in control) and a decreased live birth index (90%, although mainly due to one litter, as comp to 100% in controls) was recorded in the original study. No maternal toxicity were seen at the low and intermediate dose levels whereas a reduced gestational body weight gain (-18% as compared to controls) and a statistically significant decrease in mean body weight (7% less than the controls at PND 0) were recorded at the high dose level.

In the follow up study (BASF 2013b), no apparent maternal toxicity was recorded and no treatment-related effects on litter size, number of stillborn pups, on postnatal survival or on pup weight at birth and PND (see Table 35a for more details). Gross pathology examination of the pups revealed macroscopic dilations of the great vessels at the base of the heart (aorta, ductus arteriosus, pulmonary trunk and carotid artery) (0, 1, 4, 5 pups in the control, low, intermediate and high dose groups, respectively) mostly these effects were correlated microscopically with dissecting aneurysms, which occurred in 0, 1 (0.5%), 3 (1.2%) and 3 (1.3%) in the controls, low, intermediate and high dose level. Predominant locations were the ductus arteriosus and aorta. No aneurysms were observed in male and female control pups. The incidence in the low dose group was slightly higher as compared to the background incidence reported from the same lab (0.2% see Treumann et al., 2011).

Histopathology also revealed the presence of intramural haemorrhages that were not detected macroscopically. There was no dose –response relationship in the distribution of pups with haemorrhages and the incidence in 2-methylimidazole treated groups were similar to the incidence recorded in the control group i.e.in 2 (0.9%), 3 (1.4%), 1 (0.4%) and 2 (0.9%) in the controls, low, intermediate and high dose pups. Individual pups had either aneurysms or haemorrhages, but never both lesions together.

Imidazole, a substance that has a harmonised classification in Repr 1 B-360D (7<sup>th</sup> ATP), is a known impurity in 2-methylimidazole (see table 3). However, considering that the stated purity of 2-methylimidazole used in the studies reported (BASF 2013a and 2013b, see REACH registration

2014) is 99.8%, the contribution from imidazole in the test substance used in the studies was at maximum 0.2% (i.e. below the GCL for imidazole). Furthermore, based on the available data, 2-methylimidazole is clearly more potent (LOAEL $_{developmental\ toxicity} = \leq 2$  mg/kg bw/day) than Imodazole (NOAEL $_{developmental\ toxicity} = 60$  mg/kg bw/day and LOAEL $_{developmental\ toxicity} = 160$  mg/kg bw/day, see ECHA 2013). It can therefore be concluded that it is highly unlikely that a possible impurity of imidazole (up to a maximum concentration of 0.2%) had any impact on the recorded developmental toxicity that was recorded in the two studies that examined the potential for 2-methylimidazole to cause developmental toxicity.

#### 9.10.6 Comparison with the CLP criteria

Classification in Repr. 1A – H360D is not justified since there is no human data that indicates that 2-methyl imidazole have adverse effect on human fetal development.

Classification in Repr. 1B – H360D is warranted since the evidence for developmental toxicity is considered to be *clear*. Dissecting aneurysm of the vessel at the base of the heart was detected in rat pups in two separate studies (BASF 2013a; BASF 2013b). The adverse effect was seen at dose levels down to 10 mg/kg bw/day, and possibly at 2 mg/kg bw. In addition pup viability was decreased during the first days of lactation (viability index at PND 4 was 53% as compared to 100% in controls) at 500 mg/kg bw/day. The recorded effects are relevant for humans, and are not considered to be secondary to non-specific maternal toxicity.

Classification in Repr. 2 would be relevant if the data set only would provide "some evidence" of developmental toxicity, but as the present data base is considered to provide clear evidence classification in Repr. 1B is the proper classification.

#### 9.10.7 Adverse effects on or via lactation

Pups were only followed until day 4 postnatally and this limits the assessment of possible effects on or via lactation. There is no information on whether the compound is transferred to the milk.

## 9.10.8 Comparison with the CLP criteria

The available database does not give support for a classification for effects on or via lactation.

## 9.10.9 Conclusion on classification and labelling for reproductive toxicity

Based on available data classification in Repr. 1B – H360Df is warranted.

#### 9.11 Specific target organ toxicity-single exposure

Hazard class not evaluated in this dossier.

#### 9.12 Specific target organ toxicity - repeated exposure

Hazard class not evaluated in this dossier.

#### 9.13 Aspiration hazard

Hazard class not evaluated in this dossier.

#### 10. EVALUATION OF ENVIRONMENTAL HAZARDS

Hazard class not evaluated in this dossier.

#### 11. REFERENCES

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#### 12. ANNEXES

There are no Annexes.