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Biokinetik und Toxikologie inhalierter Nanopartikel

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Nanotechnologien - Basis für zukünftige Wissenschaft + Technologien

Per se
nachhaltig:
Ressourcen
+ Energie
sparend



Welche
Risiken?



Paradigma der Risikoanalyse für NP

exposure assessment

hazard identification

hazard characterization

risk characterization

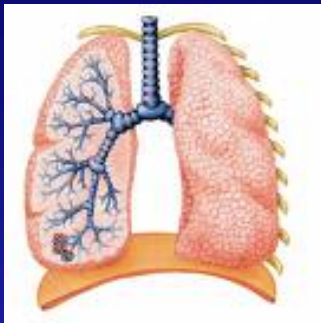


NP Dosimetrie

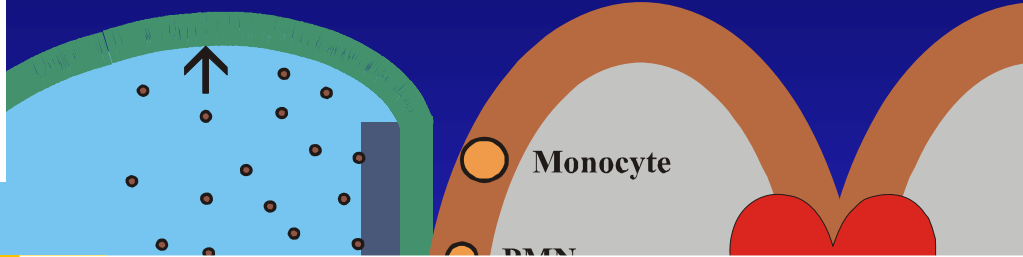
Toxikologische Reaktionen auf NP



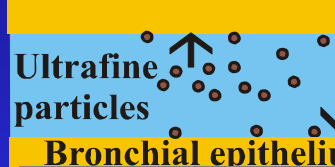
Nanoparticles (NP): Access to blood circulation



Alveolar epithelium



~2 m²

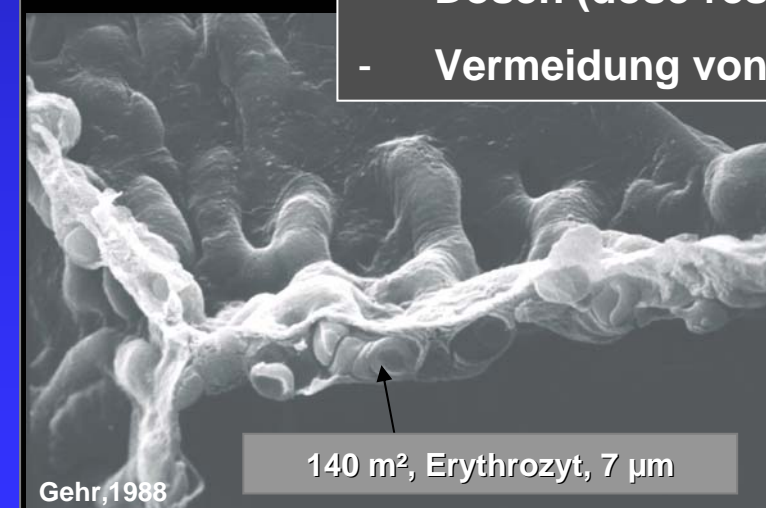


Ultrafine particles
Bronchial epithelium

Daher liefern Biokinetikstudien mit inkorporierten NP:

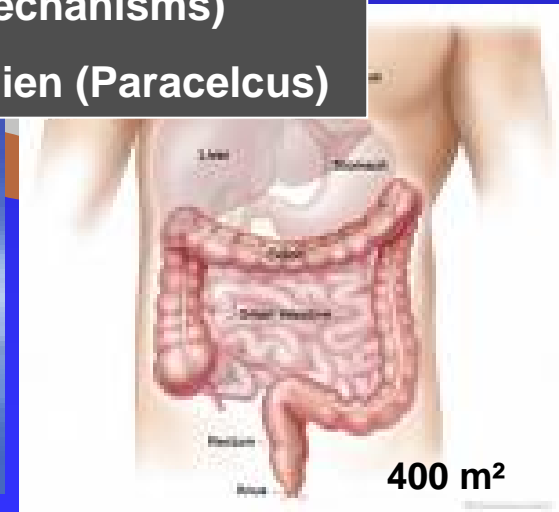
- Fundierte Dosisabschätzung für jedes Organ
- Rationale Basis für toxikologische Studien mit relevanten Dosen (dose-response, modes of action, mechanisms)
- Vermeidung von unsinnigen Überdosisstudien (Paracelcus)

Alve



140 m², Erythrozyt, 7 µm

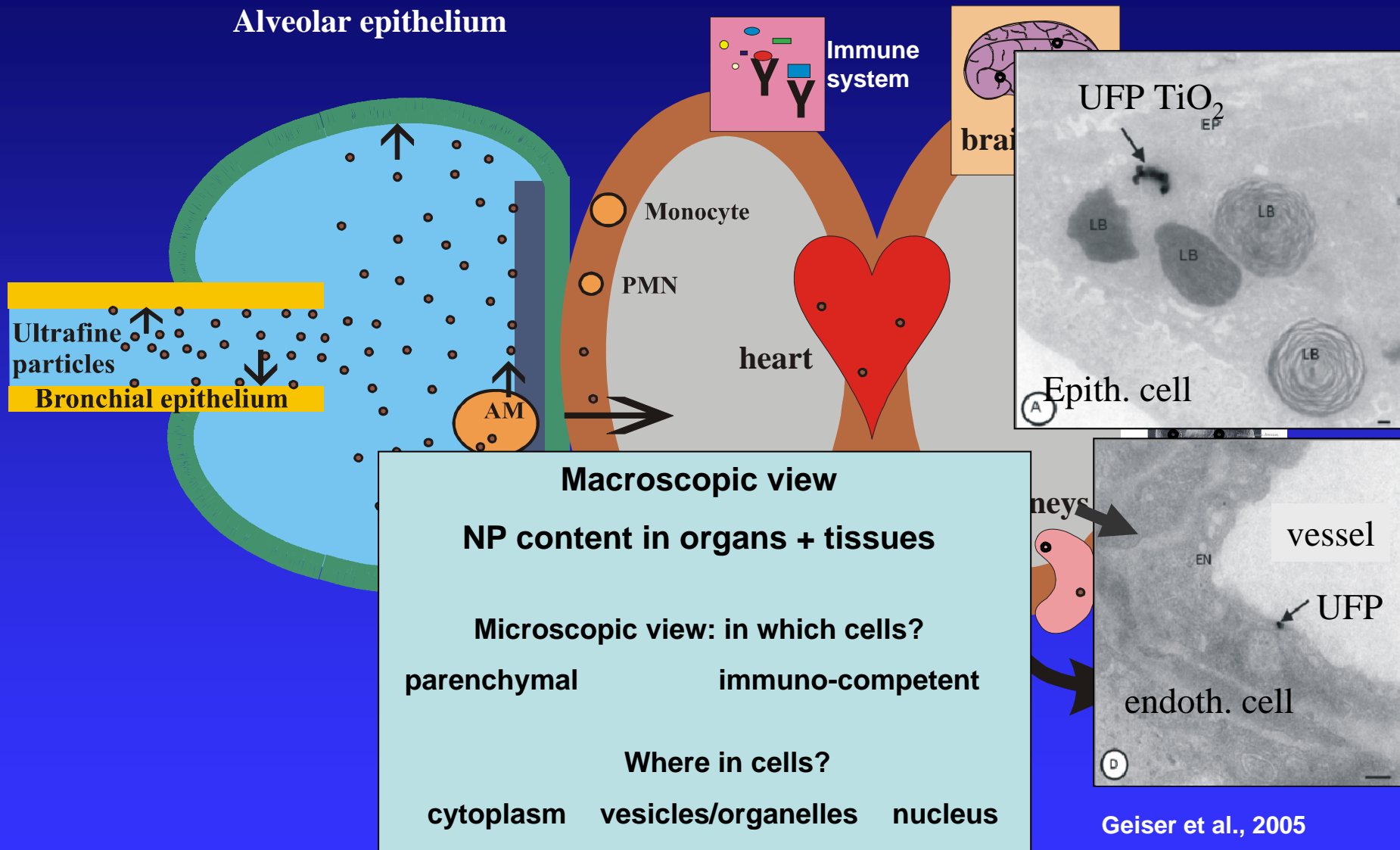
Gehr, 1988



400 m²



Nanoparticle (NP) translocation into circulation

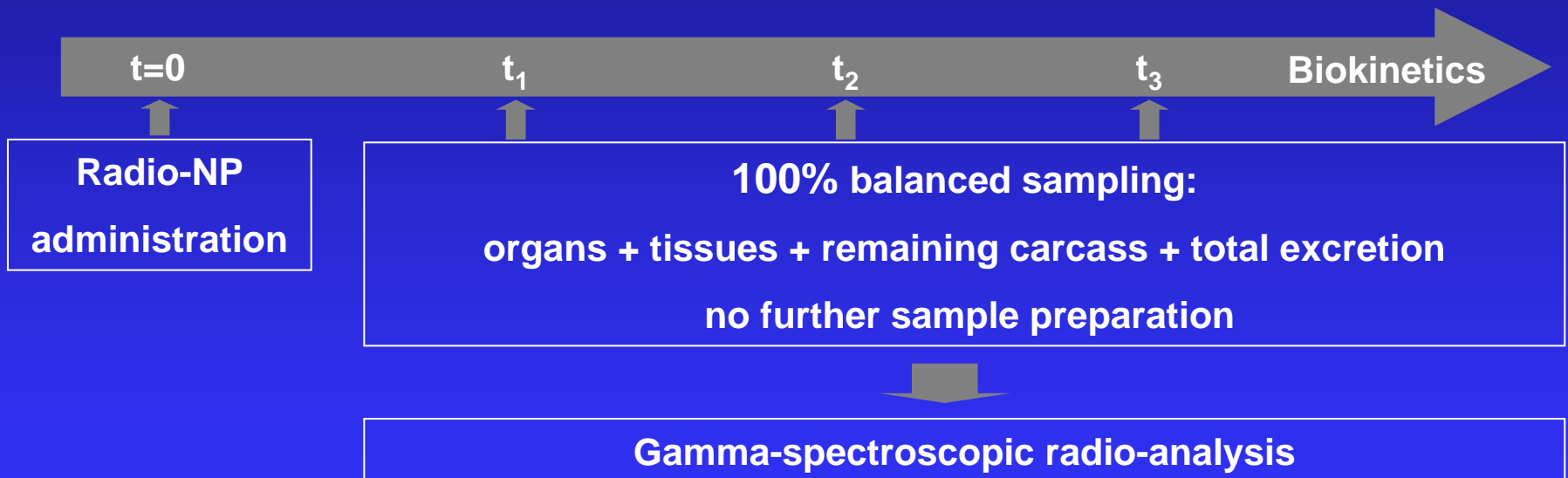


Application + analysis of radio-labeled NP

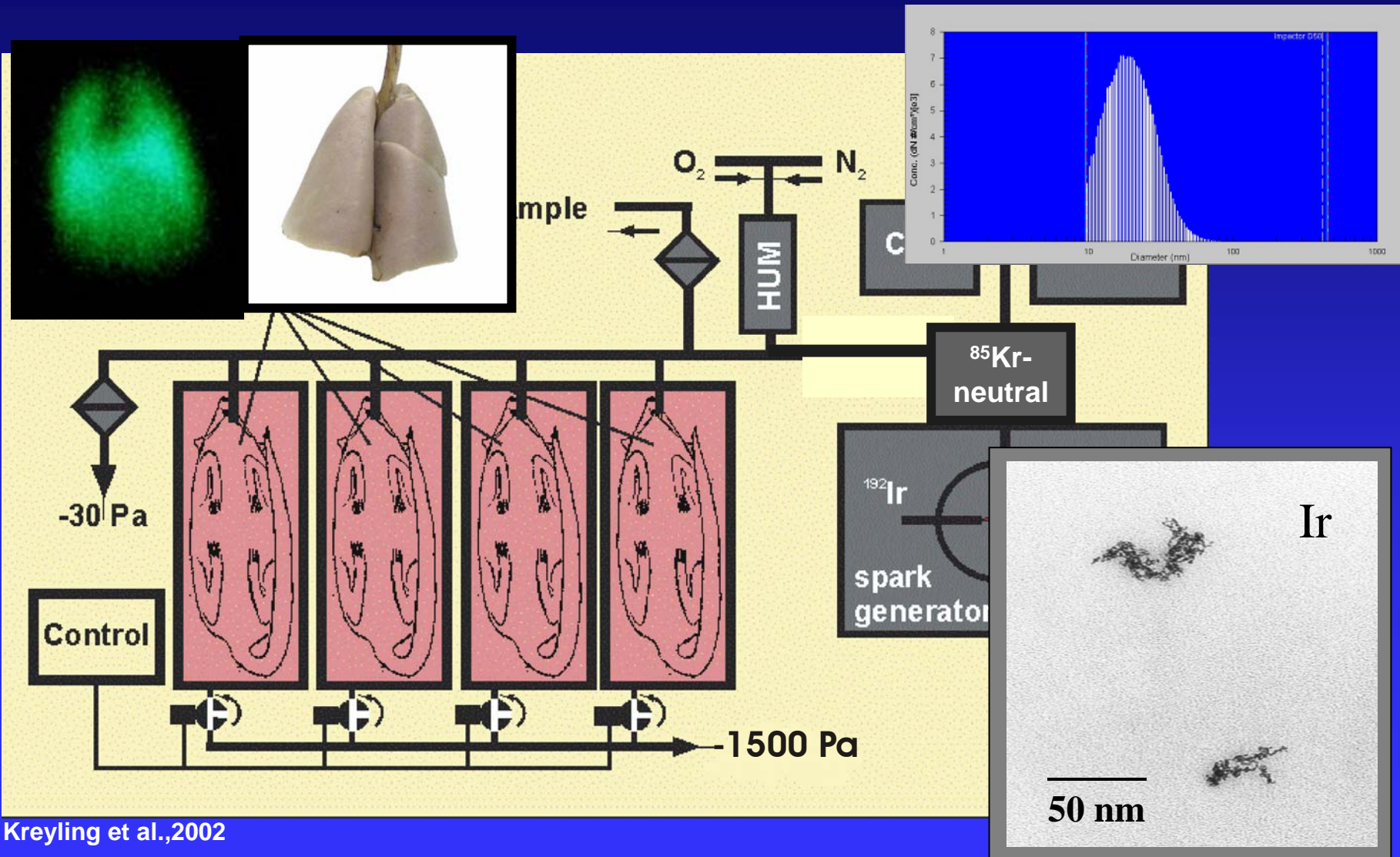
Inhalation (INH)

Intra-tracheal instillation (IT)

Intravenous (IV) injection



Intratracheal intubation-ventilation of Ir-NP



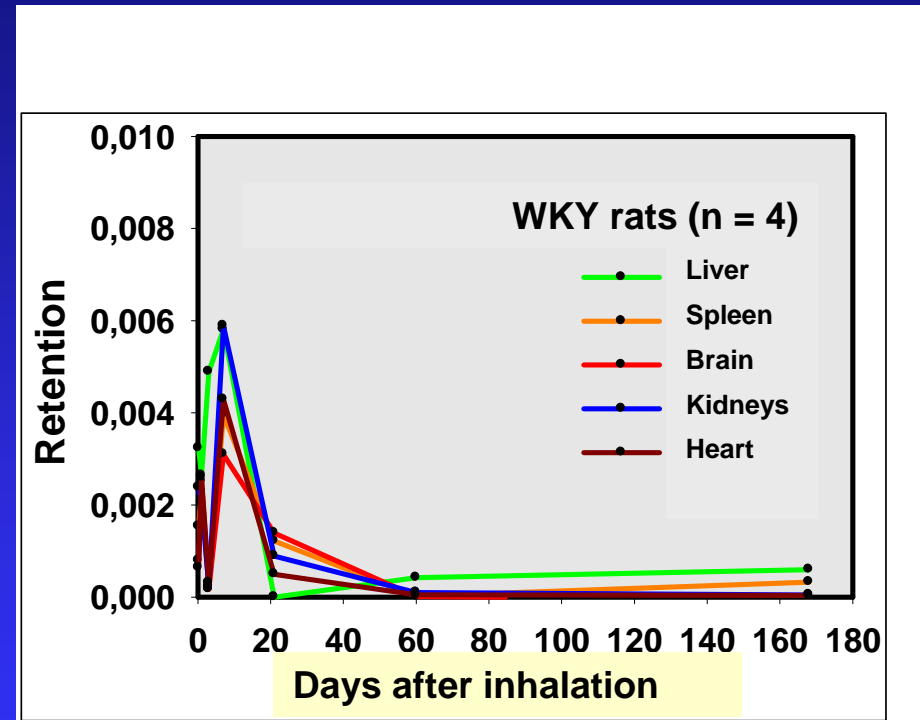
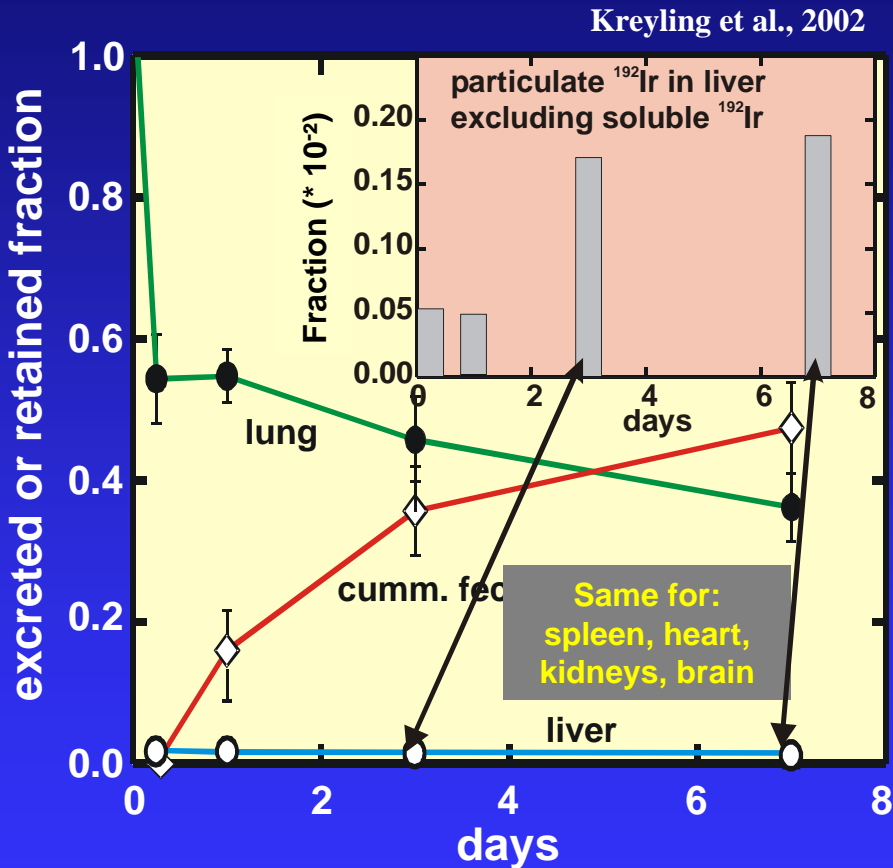
Kreyling et al., 2002



Systemic translocation of Ir NP towards 2nd target organs

WKY rat, ¹⁹²Ir NP, 1 hr exposure
15 nm CMD, 10⁷ cm⁻³, 0.2 mg/m³

Long-term translocation kinetics
same exposure

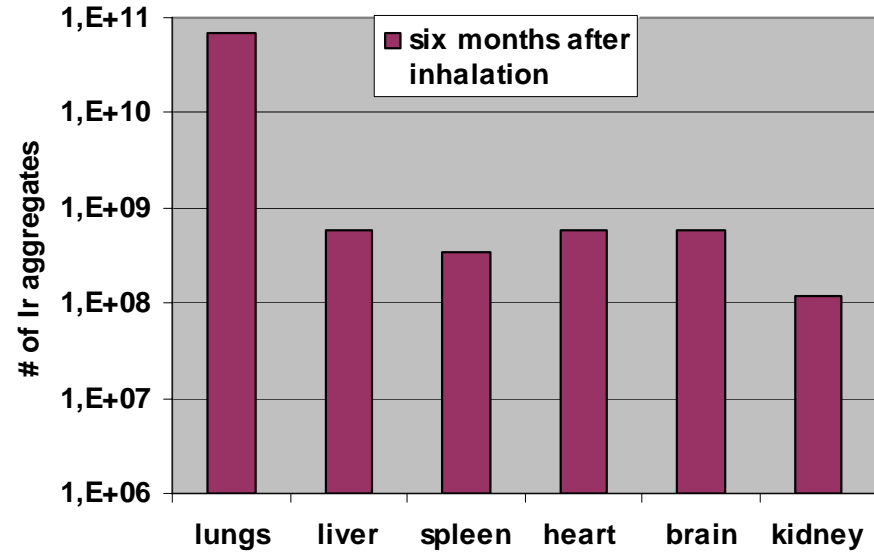
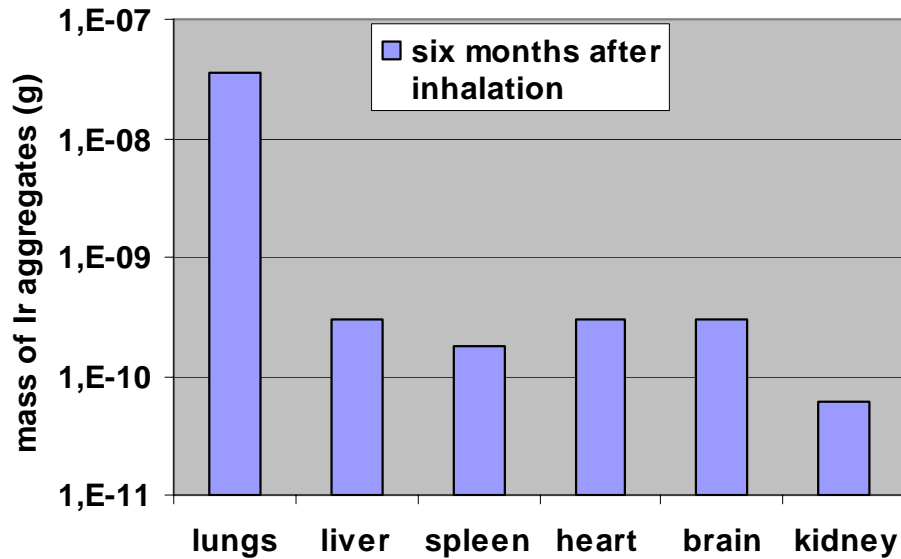


There is little but persistent accumulation of Ir-NP in secondary target organs
Ir NP mass < 1 ng, but number > 10⁸ NP per organ



Systemic translocation of nanoparticles towards secondary target organs

WKY rat, ^{192}Ir NP, 1 hr exposure
15 nm CMD, 10^7 cm^{-3} , 0.2 mg/m^3



Primary particles $\sim 2 \text{ nm}$
Specific surface area $1200 \text{ m}^2 / \text{cm}^3$
Zeta potential -20 mV
SIMS-TOF surface analysis IrO_2

Unexpected high NP numbers in secondary target organs including heart and brain after six months which are not considered to be exposed to particulate foreign bodies.
Do these many NP cause harm?

Systemic translocation of nanoparticles towards secondary target organs

Human dose estimate during continuous exposure applying rat translocation dynamics determined for Ir UFP:

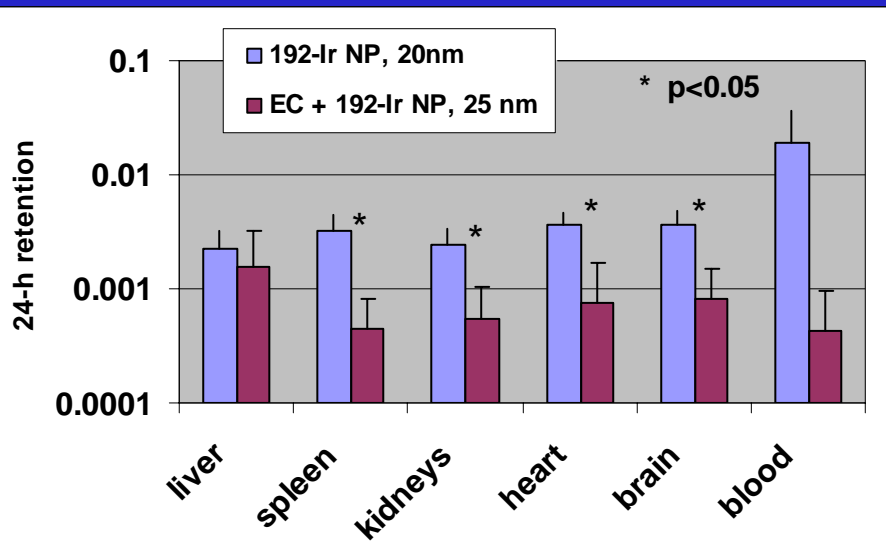
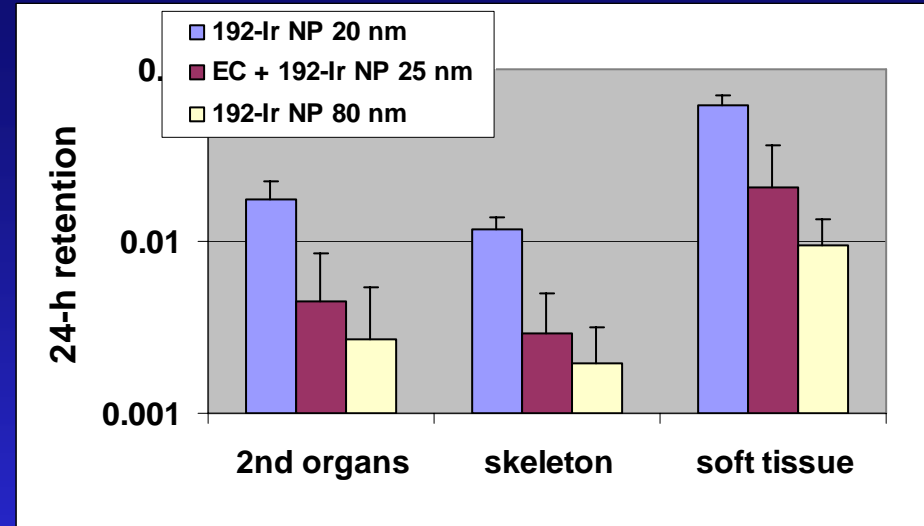
NC (UFP) ($3 \cdot 10^4$ p/cm ³)	$3 \cdot 10^{10}$ p/m ³
Daily inhaled volume	10 m ³
Deposition fraction	0.3
Insoluble UFP fraction	0.1
Translocated fraction to brain, heart	0.001 (of lung deposit)
Retained UFP number in brain, heart	$\sim 3 \cdot 10^9$ UFP / year

Translocation of iridium + carbon NP towards 2nd target organs

WKY rat, Ir or carbon UFP + ¹⁹²Ir label,
1-hr inhalation exposure
20 or 80 nm CMD, 10⁷ cm⁻³, 0.1 mg/m³



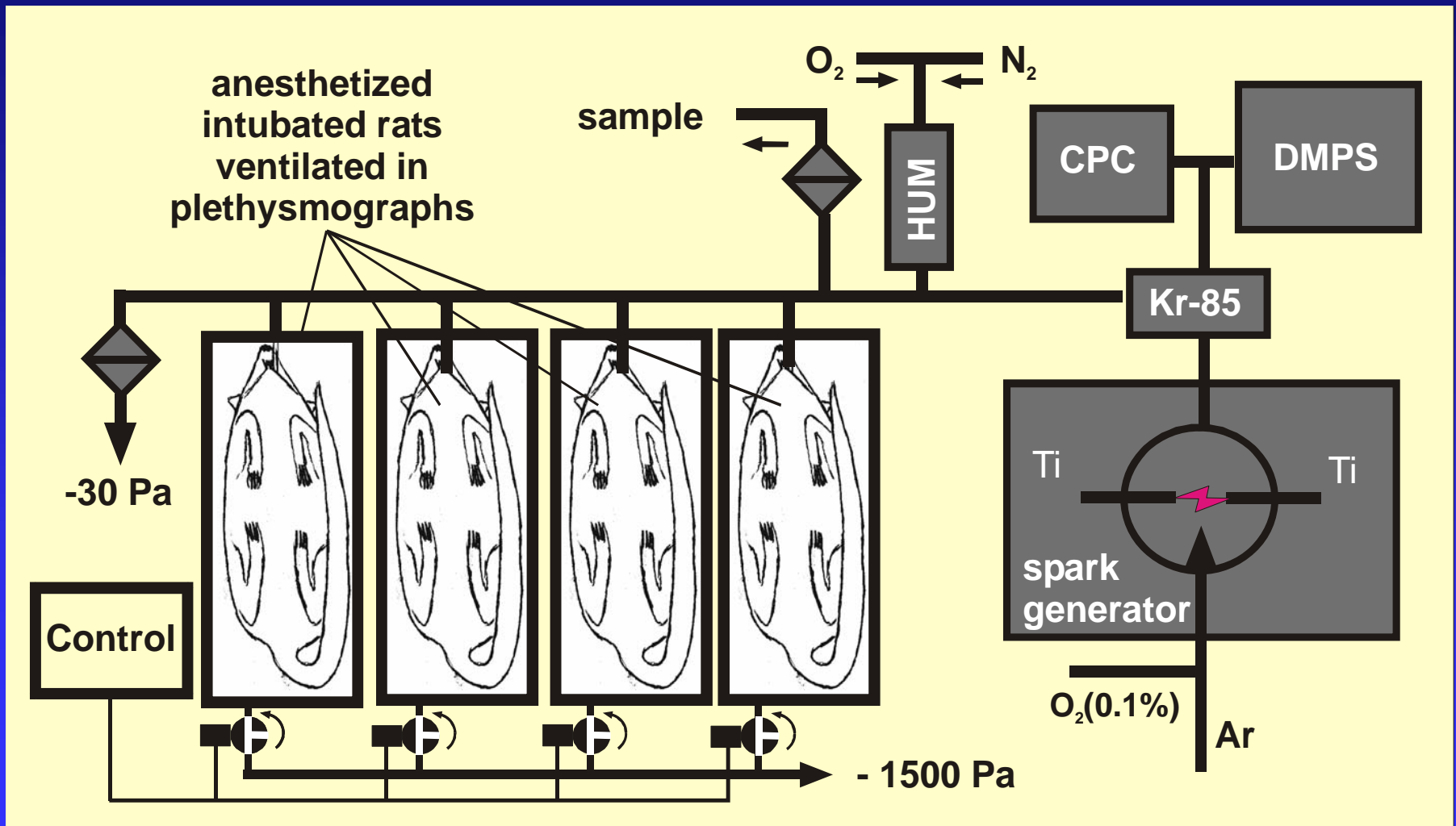
Szymczak et al. 2006



- Strong dependency of translocation on NP material: iridium vs. carbon NP of same size
- Size dependency of translocation of iridium NP (20 vs. 80 nm)

Ventilation-inhalation system of TiO₂ NP

Morphological characterisation of NP distribution in the lungs

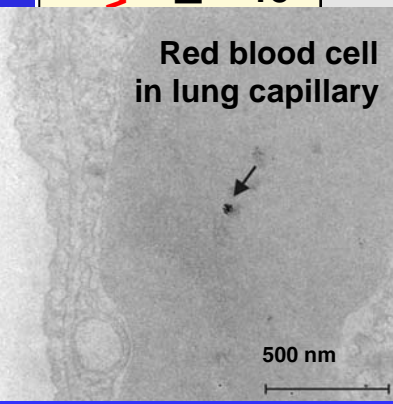
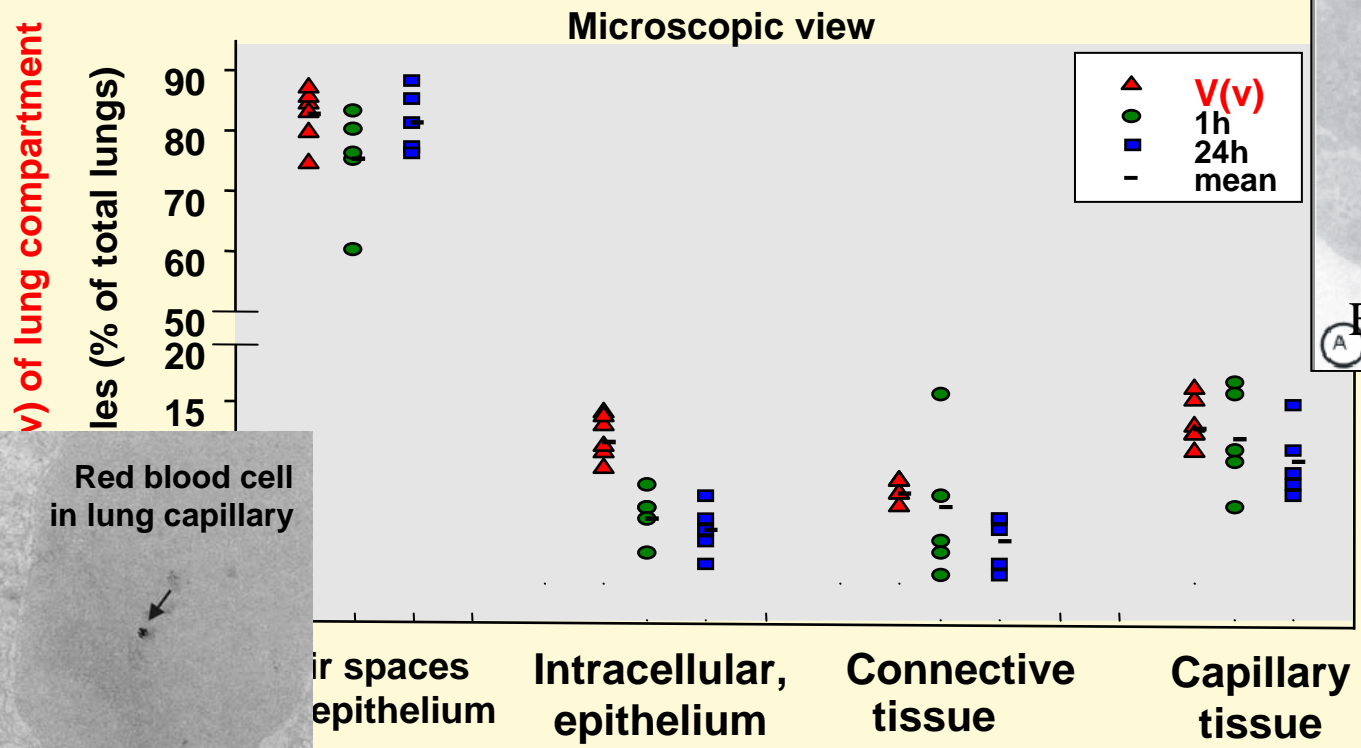
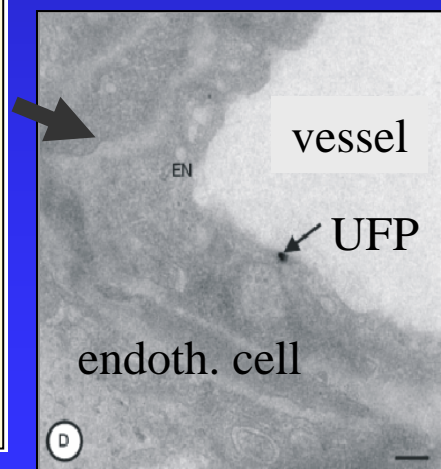
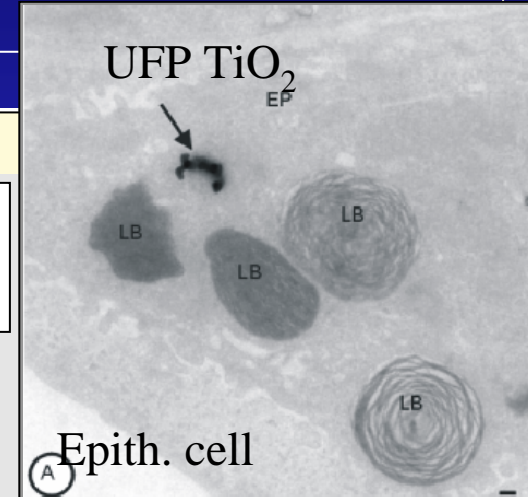


Morphometry of inhaled TiO₂ nanoparticles in rat lungs

Intubated ventilated WKY rat,
TiO₂ NP, 1 hr exposure
22 nm CMD, 10⁷ cm⁻³, 0.1 mg/m³
morphometry 0 + 24 h after inhalation

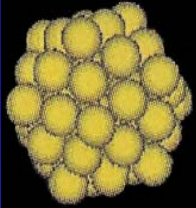
- Rapid translocation of ~ 20% NP fraction
- Volume proportional re-distribution: by which mechanism?

M. Geiser et al., EHP 2005



Translocation of gold nanoparticles: Effect of particle size

^{198}Au 55
cluster
1.4 nm



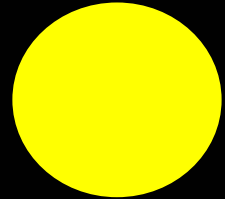
Intratracheal instillation or intravenous injection in WKY rats

1-10 μg ^{198}Au particles in 50 μL saline, negative ionic surface charge

of particles: 1 10^{14} (1.5 nm cluster) 2 10^{11} (18 nm colloid)

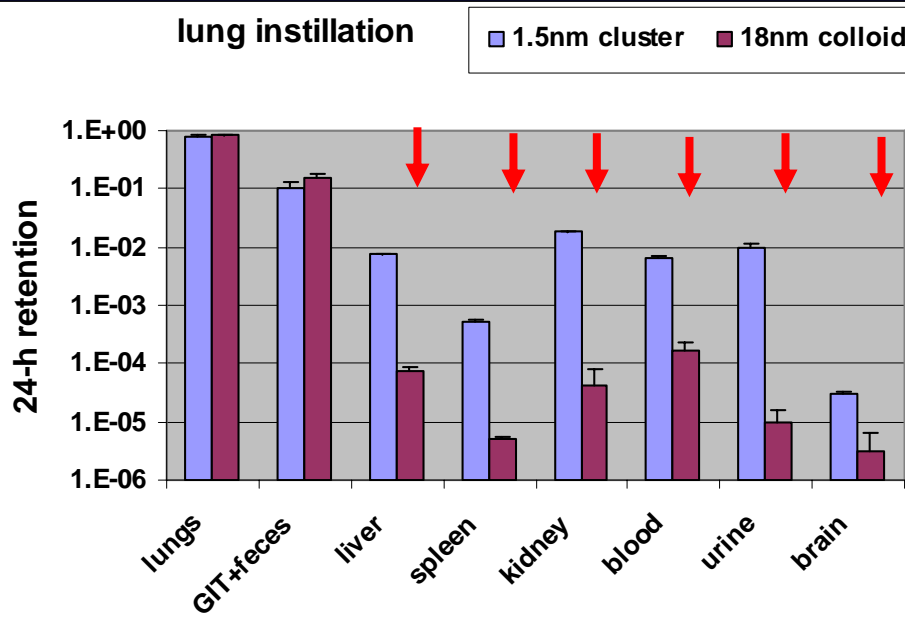
G. Schmid, Univ of Essen, Germany

^{198}Au
colloid
18 nm

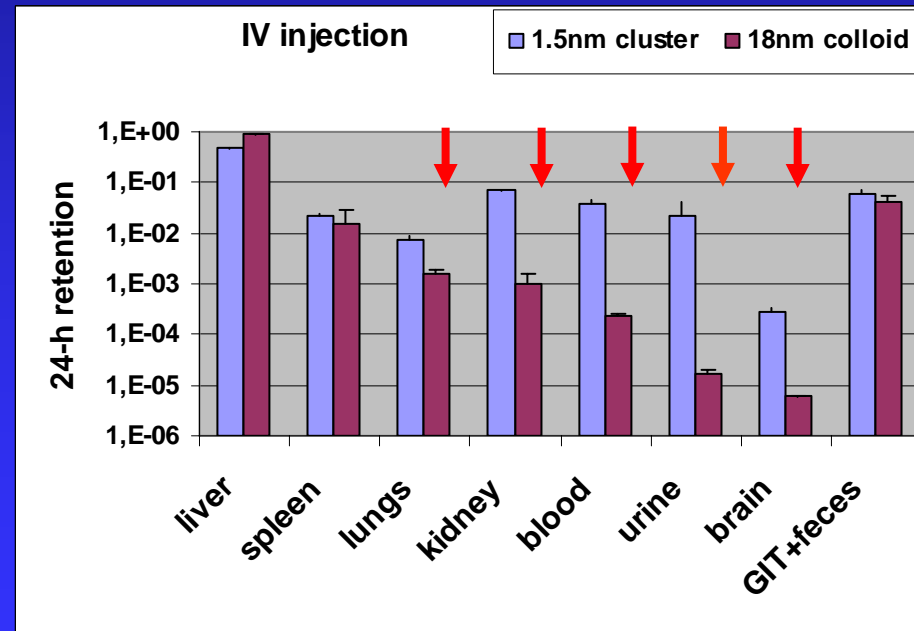


➤ Mass fractions of gold nanoparticles in different organs after 24 h

lung instillation



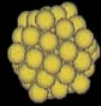



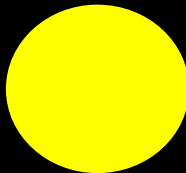
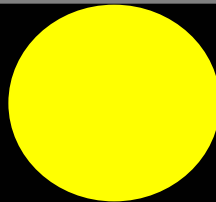
IV injection



Indeed, size matters!!

Semmler-Behnke, Small, 2008

Administered Gold NP

							
		¹⁹⁸ Au ₅₅ cluster	¹⁹⁸ Au cluster	¹⁹⁸ Au cluster	¹⁹⁸ Au colloid	¹⁹⁸ Au colloid	¹⁹⁸ Au-colloid
diameter	(nm)	1.4	2.5	2.5	5	18	80 + 200
ligand		phosphine	carboxyl	amino	phosphine	phosphine	phosphine
surface charge		ionic negative	ionic negative	ionic positive	ionic negative	ionic negative	ionic negative
admin. suspension vol.	(μL)	50	50	50	50	50	50
NP mass admin.	(μg)	2	1	1	10	5	2
NP number admin.		10 ¹⁴	10 ¹³	10 ¹³	10 ¹³	10 ¹¹	10 ⁹ + 10 ⁸
NP surface admin.	(cm ²)	5	2	2	7	1	0.1 + 0.01

All gold NP were neutron activated prior to administration to achieve ¹⁹⁸Au radio-label



Toxikologische Reaktionen auf NP:

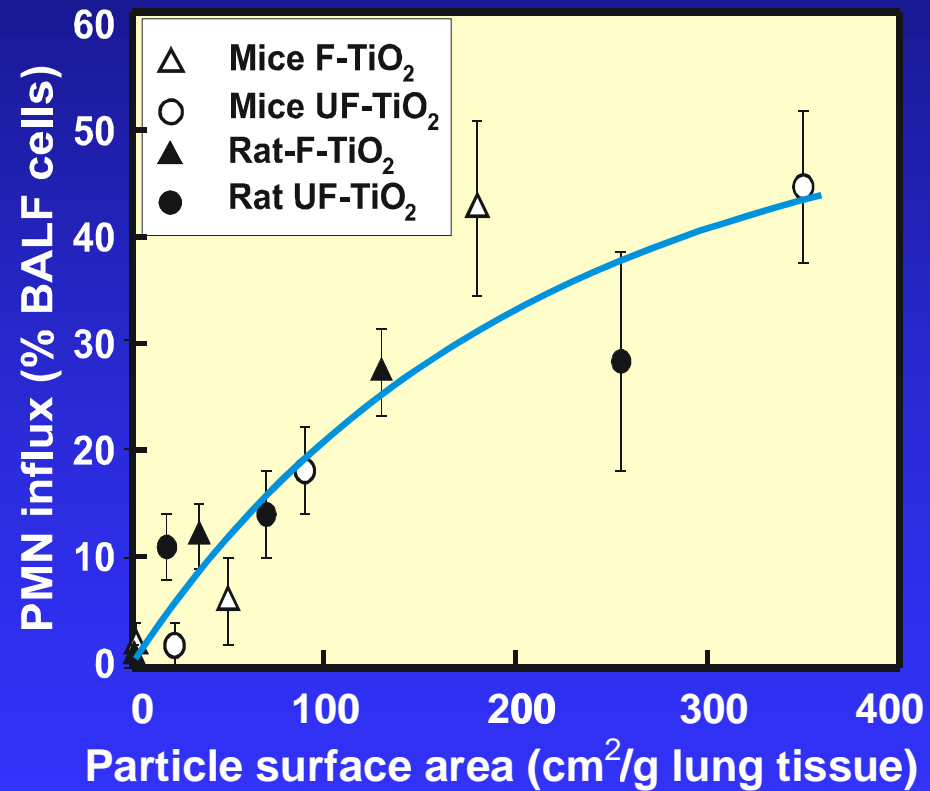
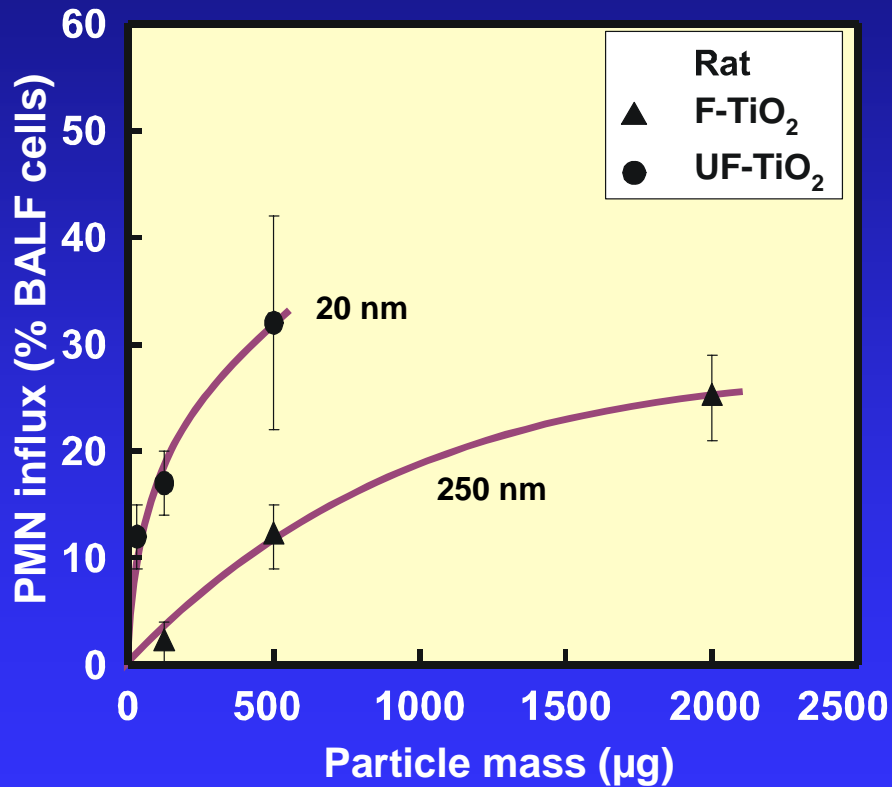
Rolle verschiedener NP Parameter



Surface area of NP is associated with inflammatory response

Influx of neutrophils (PMN) : indicator of inflammation

Instillation of ultrafine UF-TiO₂ (20 nm) or fine F-TiO₂ (250 nm) into rat lungs

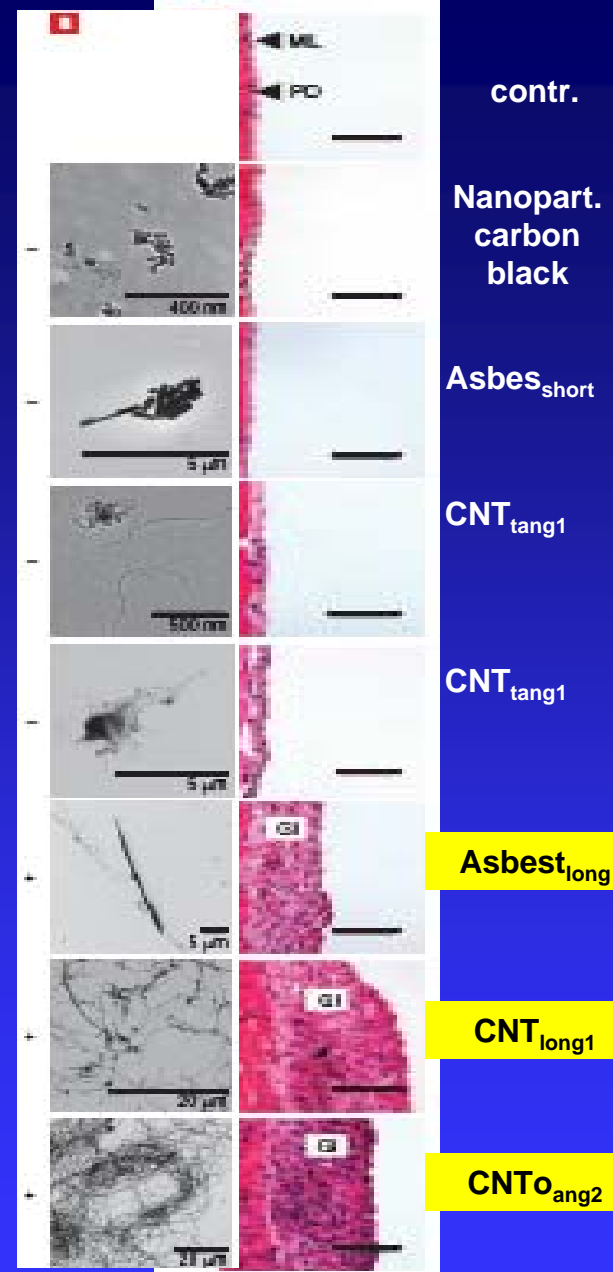
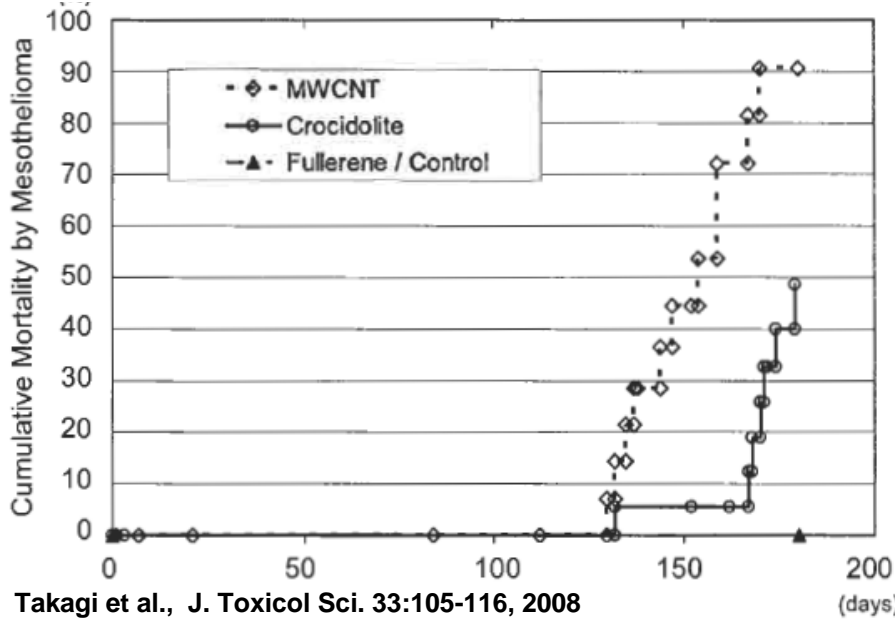


Oberdörster et al., HEI 2000



Long, biopersistent carbon nanotubes (CNT) lead to similar pathogenesis as asbestos fibers

Life shortening by mesothelioma



Formation of granuloma :

only Asbest_{long} und CNT_{long1+2}

Inflammatory parameters only

Asbest_{long} und CNT_{long1+2} :

Neutrophil cell influx

increased total protein

Alv. Macroph: frustrierte Phagozytose von CNT_{lang}

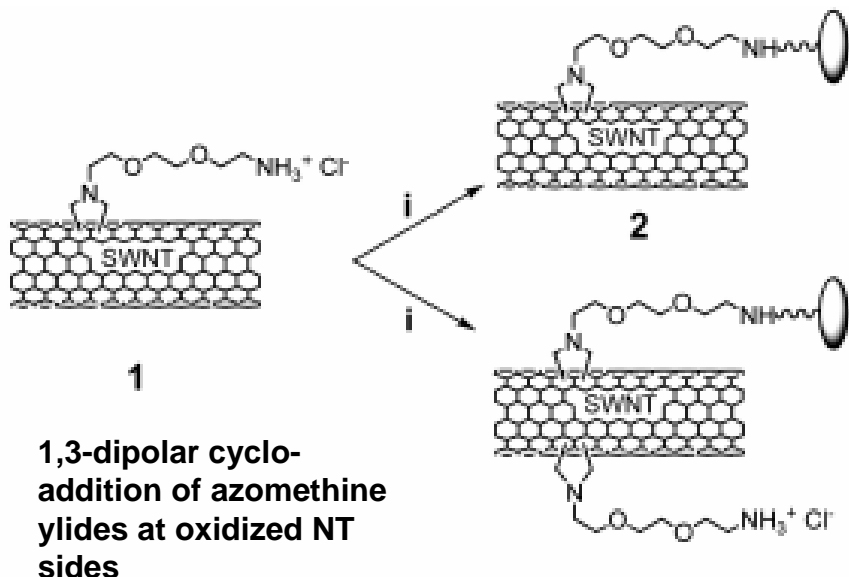


Poland et al. Nature Nanotechnology, 2008



Less toxicity of functionalized nanotubes

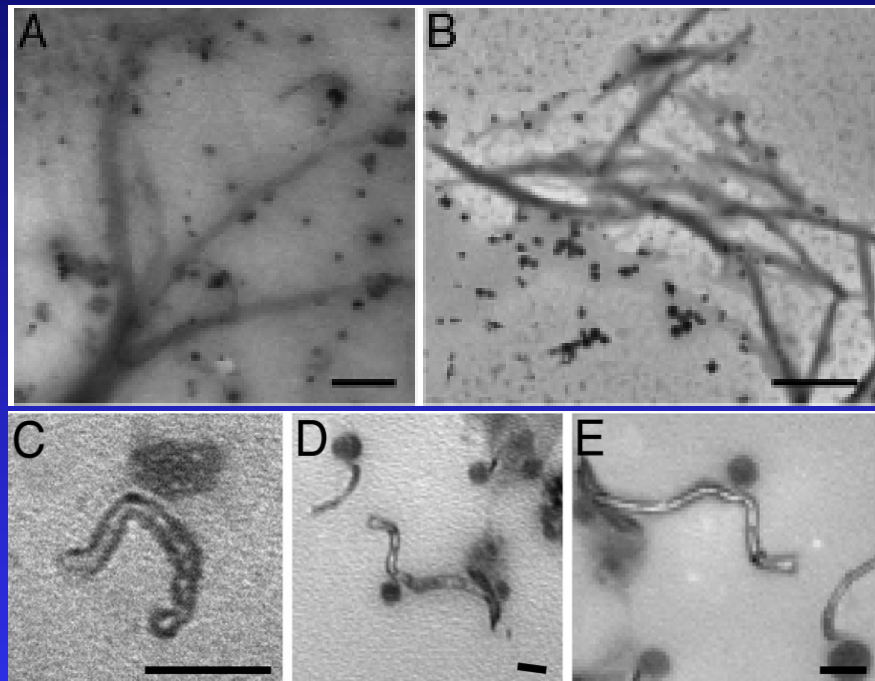
Functionalized SWNT & MWNT lead to high solubilization + no toxic response



Singh et al. PNAS (2006)

Original SWNT and MWNT were not excreted in urine and showed inflammatory responses

SWNT in urinary supernatant



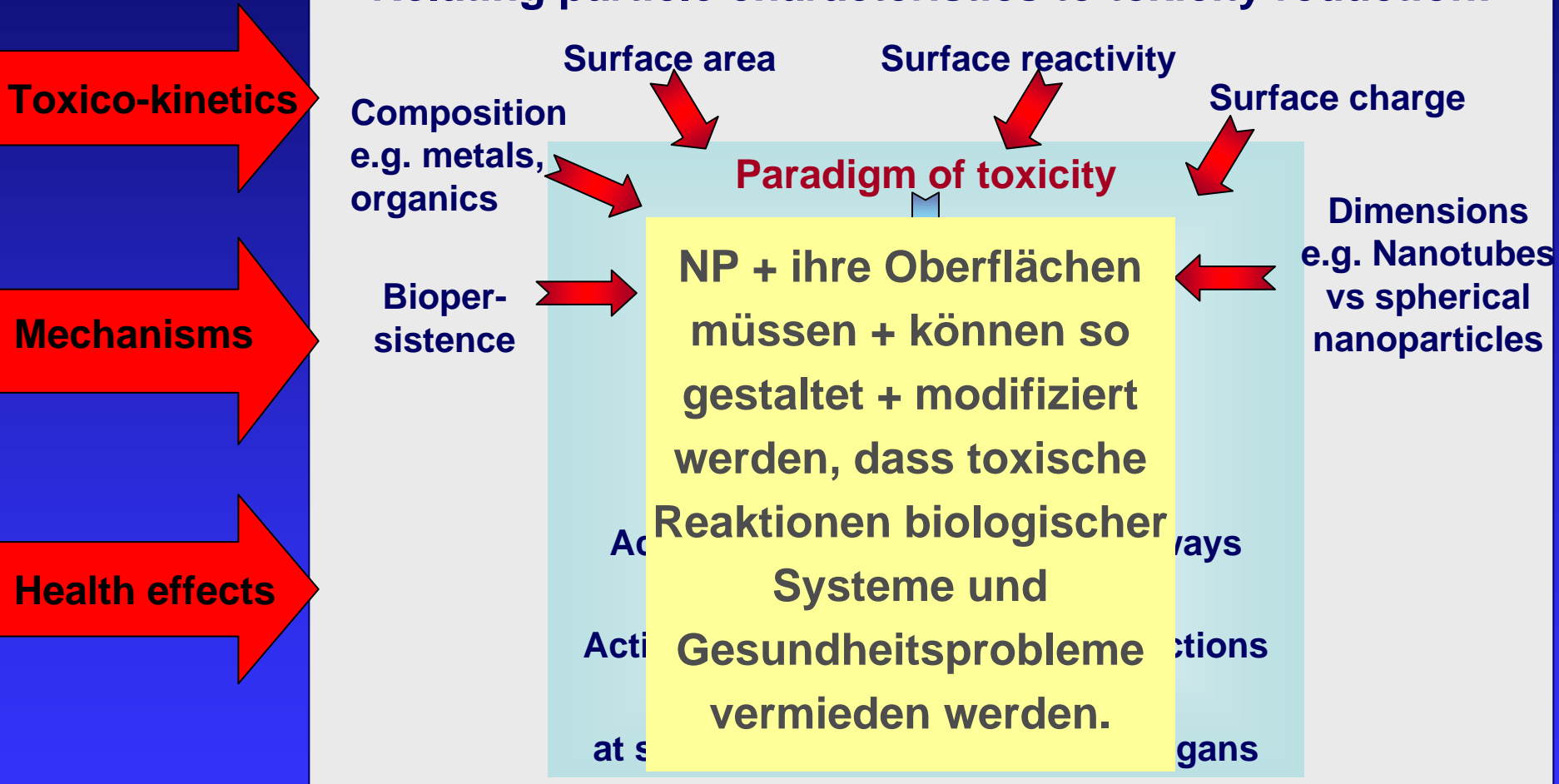
MWNT in urinary supernatant

Virtually no organ & tissue retention after 3 hours

→ No signs of inflammation

Search for Safe Nanomaterials

Relating particle characteristics to toxicity reduction:



Acknowledgements

HMGU-Inst. f. Inhalation Biology:

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