



National Institute for Public Health  
and the Environment  
*Ministry of Health, Welfare and Sport*

# Human health risk assessment of nanosilver

Overview of available data

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BfR conference on nanosilver

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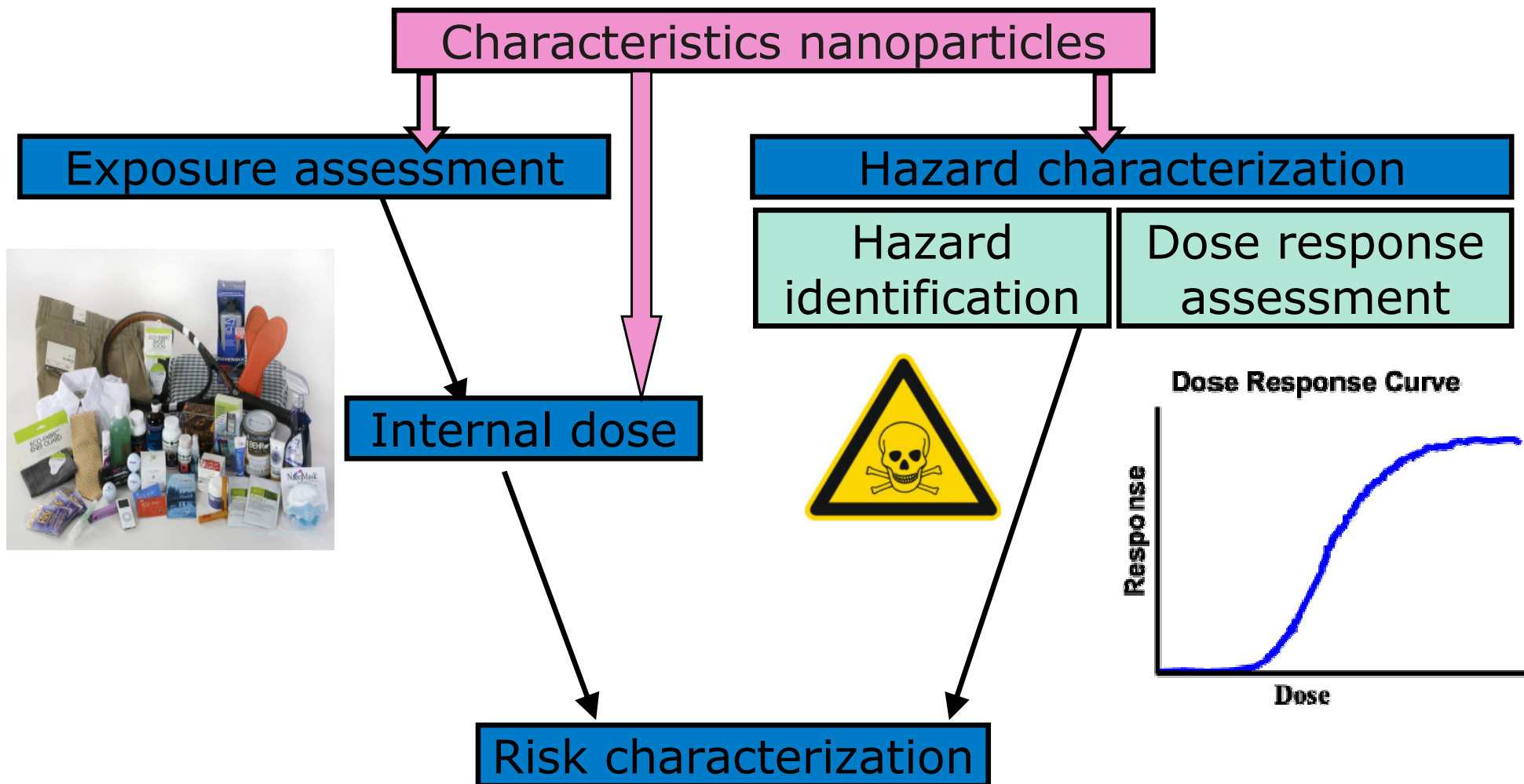
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## Content

1. Introduction risk assessment
2. RA of nanomaterials
3. Available data on nanoAg
4. Knowledge gaps and priorities for future studies

08 February 2012

# Risk Assessment of nanoparticles





- **RIVM studies on nanosilver** (data until 2009)
  - Nano-silver- a review of available data and knowledge gaps in human and environmental risk assessment (2009) Wijnhoven et al., *Nanotoxicol.*
  - Nanomaterials under REACH- Nanosilver as a case study (2009) Pronk et al, *RIVM report 60178003/2009*
- **Additional literature** (reviews  $\geq$  2009)
  - - Aschberger et al, (2011) Analysis of currently available data for characterising the risks to environment and human health. Four case studies. *Environment International*
  - - Christensen et al, (2010) Nano-silver, feasibility and challenges for human health risk assessment based on open literature, *Nanotoxicology*
  - - Johnston et al, (2010) A review of the in vivo and in vitro toxicity of silver and gold particulates *Critical reviews in Toxicology*
  - - EPA Nanomaterial case study (2010): Nanosilver in disinfectant spray
  - - Friends of the Earth reports:
    - - Nano and biocidal silver, extreme germ killers present a growing threat to human health (2009)
    - - Nano-silver, policy failure puts public health at risk (2011)



# Consumer exposure



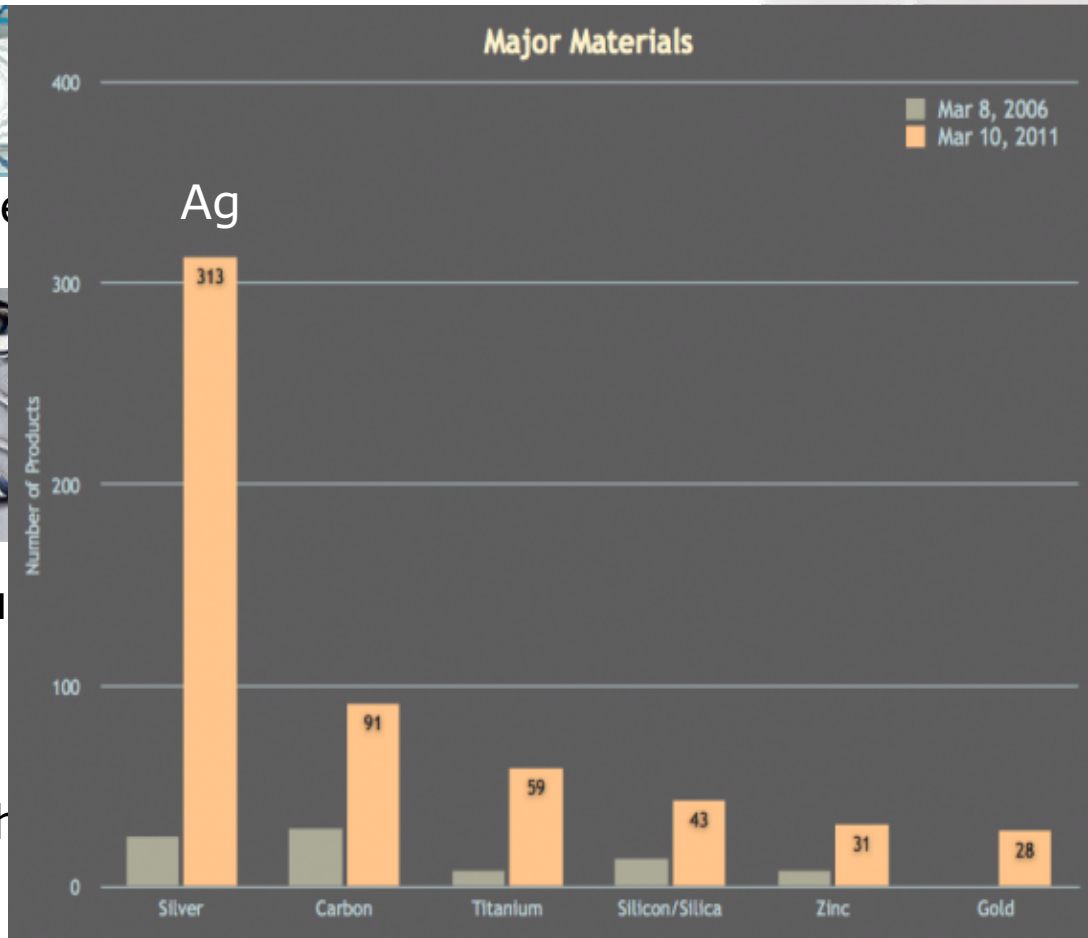
## Consumer products with nano-Ag



toothpaste



cooking utensils



refrigerator



plasters



computer mouse

<http://www.nanotechproject.org/inventories/consumer>



## Detection of nanomaterials in consumer products

- 21 different products, selected on basis of nano claim or on expectation on the presence of nanomaterial (Ag, Zn, Ti, Si)
- Microscopic techniques were used to analyse the products, investigate whether these techniques are appropriate
  - SEM, TEM: size distribution
  - EDX: determination of chemical nature
  - XPS: mass concentration

*RIVM report Oomen et al, (2011) Nanomaterial in consumer products-  
Detection, characterisation and interpretation*



## Analysed products claimed to contain nano-Ag



Food container

Cuddly toy

Indoor wall paint

Socks

T-shirt

Wound dressing

Tooth brush

Deodorant

- ← Verify presence of NP in more detail (TEM)
- ← Size distribution of NP, XPS on isolated fibers  
Optical microscopy, number of Ag coated fibers
- ← Individual NP or layer, if NP: size distribution  
Presence of coating, Microscopy if it is a layer
- ← Focus on finding of Ag NP







## Results of analysed products with nano-Ag

Food container	no Ag detected (<0.8 g/kg)
Cuddly toy	no Ag in fibrils at the outside (<0.8 g/kg)
Indoor wall paint	no Ag detected (<0.8 g/kg)
Socks	Ag present on 1-5/ 100 fibers on bottom part of sock (continuous layer)
T-shirt	no Ag detected (<0.8 g/kg)
Wound dressing	fibrous materials coated with 300-500nm Ag (continuous layer)
Tooth brush	no Ag detected in hair or back part of toothbrush
Deodorant	no Ag detected (<0.8 g/kg)



It is impossible to be **conclusive about the absence** of nanomaterial

- only a small area of the product can be analysed
- techniques are not validated for consumer products



## Exposure assessment – important characteristics

Nanoparticle characteristics determining the possible exposure		Comments
<b>Nanomaterial in consumer product</b>	<b>Chemical entity of the nanomaterial</b>	Actual composition of material
	<b>Shape of nanomaterial (in product)</b>	Composite, solid particle, hollow particle, other particle, aggregate, agglomerate
	<b>Product form</b>	Spray, powder, liquid, suspension, solid/ coating
	<b>Free/ fixed nanoparticles</b>	Free particles, fixed inside matrix
	<b>Concentration</b>	Mostly unknown (based on mass?)
<b>Application</b>	<b>Direct/ indirect exposure</b>	Direct exposure to nanomaterials in the product or indirect via release of particles out of the product
	<b>Indoor/ outdoor use</b>	Inside or outside a small space
	<b>Event duration</b>	< 5 min, 5 min- 1 hr, 1 hr- 1 day
	<b>Frequency of events</b>	> 1x/day, 1x/day-1x/week, 1x/week-1x/month, 1x/month- 1x/year
	<b>Number of users in population</b>	<10%, 10-50%, 50-90%, >90%
<b>Exposure route</b>	<b>External exposure</b>	Inhalation, dermal, oral, combination

*RIVM letter report Wijnhoven et al, (2009) Exposure to nanomaterials in consumer products.*

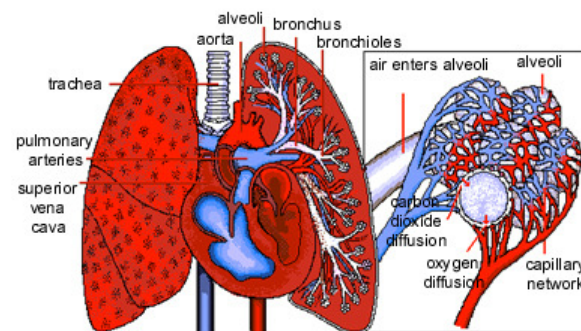


# Consumer exposure

## Indications for high possible consumer exposure

### Expert consultation:

- **Nanomaterial in consumer product**
  - > Product form: spray
  - > Free (single) particles
  - > Concentration: mostly unknown
- **Application**
  - > Direct exposure
  - > Indoor use
- **Exposure route**
  - > Inhalation
  - > Oral route

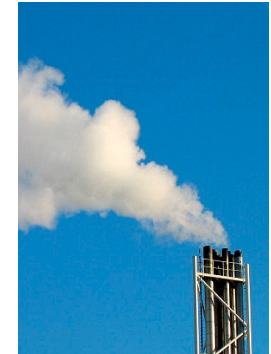




## Very limited data on exposure to nano-Ag

Not reviewed in previous RIVM studies

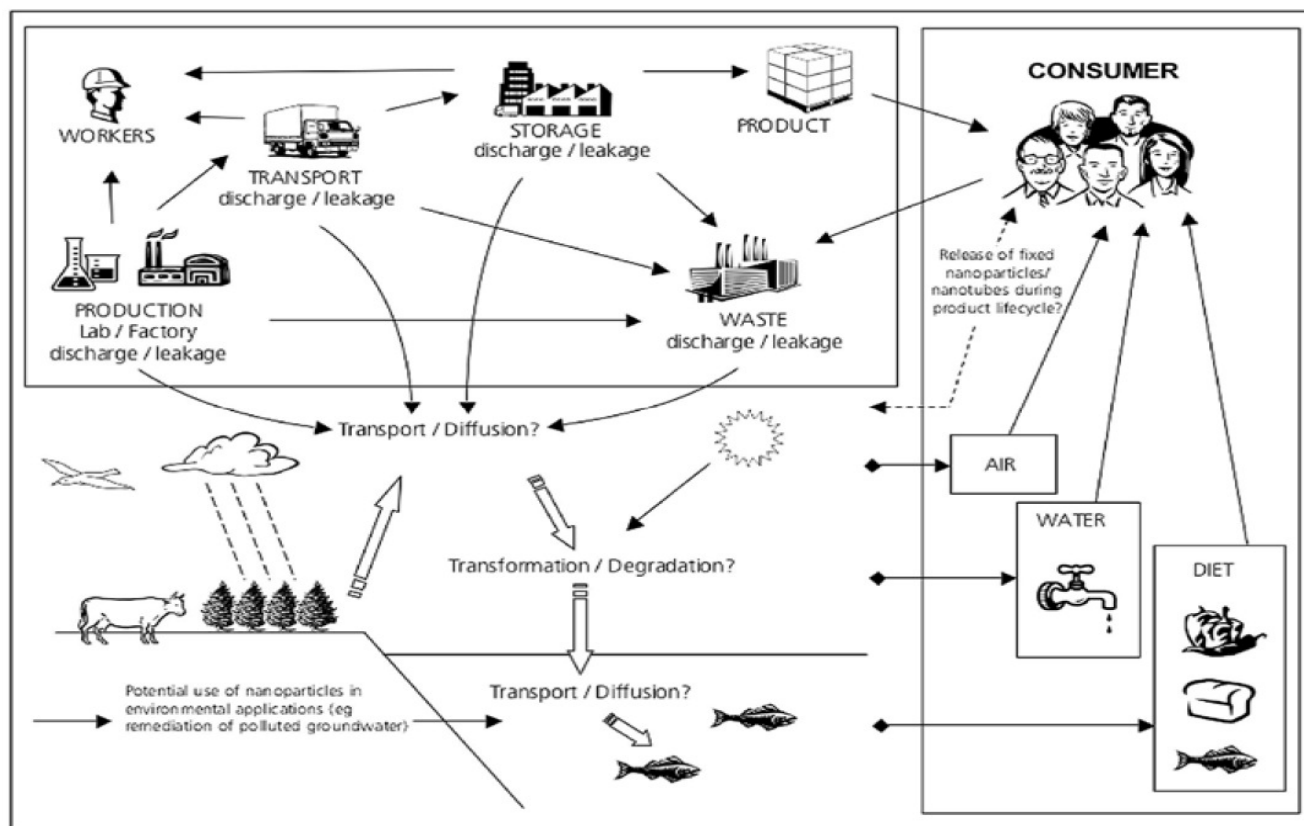
- Pilot scale 'nanostructured particle' gas phase facility (*Demou et al, 2008*): (representative for nano-silver manufacturing)
  - Average concentration during production was **59100 particles/ cm<sup>3</sup>** for sub-micron particles
- Manual handling of nano-alumina and nano-silver in fume hoods in a laboratory scale facility (*Tsai et al, 2009*)
  - 15 g silver in beaker → peak count of **7000 particles/ cm<sup>3</sup>**
- Analysis of exposure characteristics during liquid phase process in commercial production facility (*Park et al, 2009*)
  - Increase of particle number was higher than during handling of dry powder → impact of **liquid phase** should be studied further.





# Exposure man via environment

## Plausible exposure routes of nanomaterials



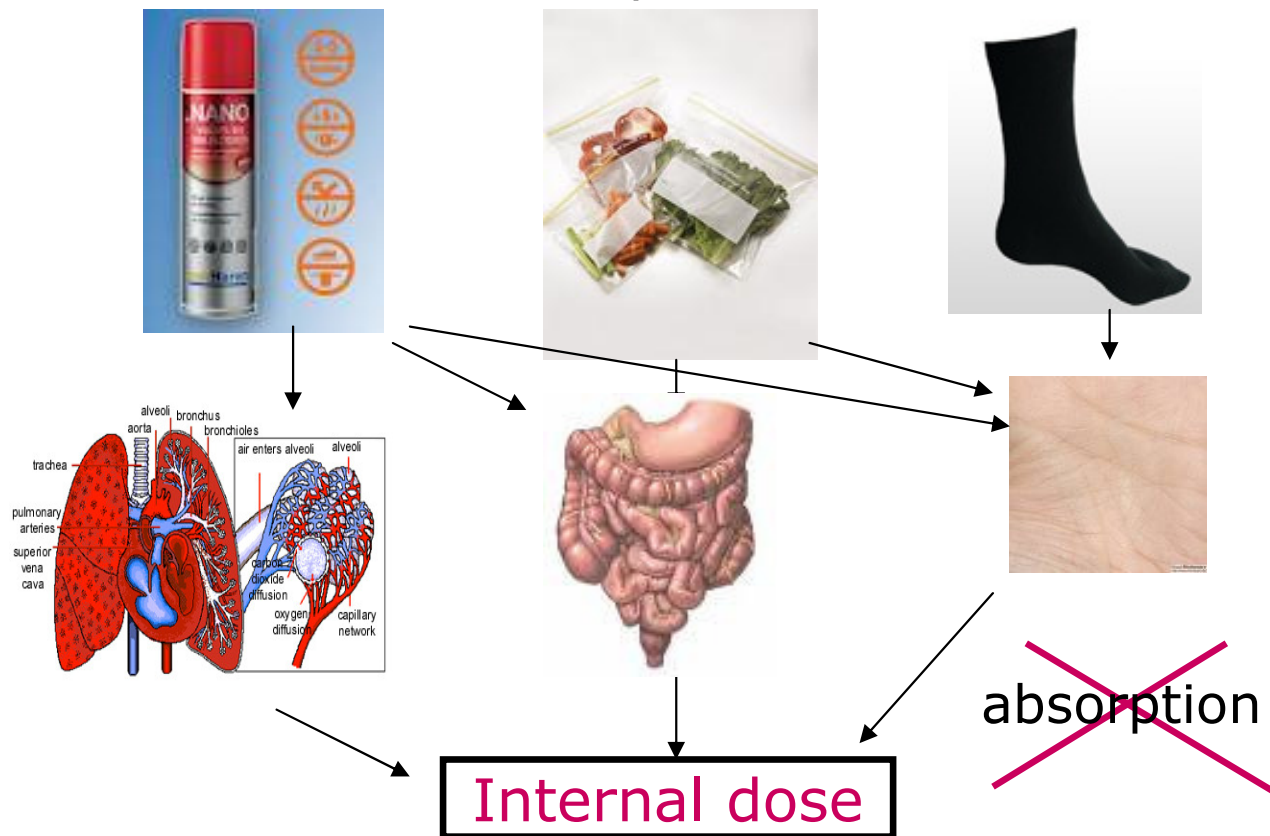
Man via environment????

RS/RAEng 2004



# Relevance of exposure data for risk assessment

Product with nanoclaim: presence / release of nanomaterial



**If no absorption = then no internal dose = no risk!!**



## Toxicokinetics of nano-Ag

- **Absorption** of silver

- **Dermal route** (wound dressings, textiles, creams, tissues)

- › Absorption shown for 15 nm particles on burned skin (wound dressings), **human**
    - › Absorption shown on healthy skin of **guinea pigs** (acute and sub chronic) after exposure to colloidal silver suspension



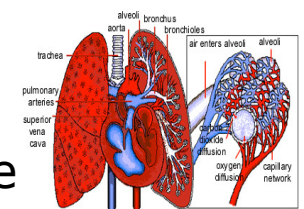
- **Oral route** (food supplements, toothpaste, lip balm)

- › Ingestion (shown for colloidal silver suspension) **human**
    - › Systemic availability of (nano-)silver after oral exposure of nanosilver particles (60 nm), **rat**



- **Inhalation** (sprays)

- › Systemic availability of (nano-)silver after inhalation exposure (nm) silver present in lungs and brain, **rat**





## Toxicokinetics data on nano-Ag relevant for RA

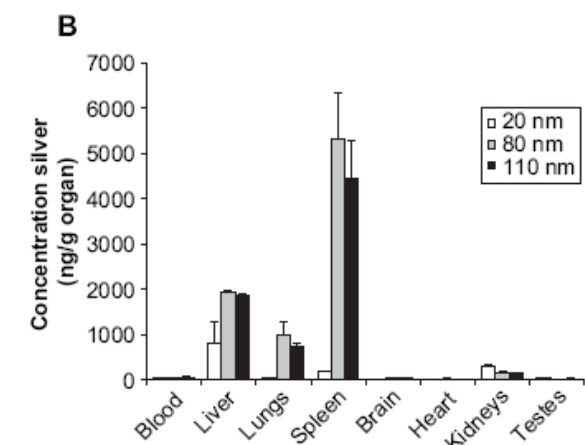
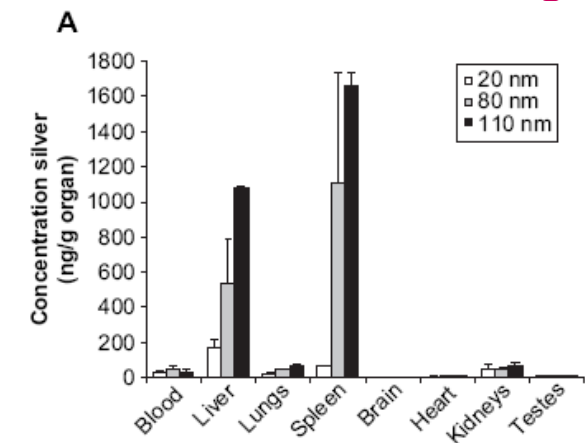
- Single and repeated dose

- Single and 5 days iv. exposure of 20, 80 and 110 nm particles in rat
- Silver nanoparticles disappeared rapidly from the blood and distributed to all organs evaluated
- 20 nm mainly to liver, followed by kidneys and spleen; larger particles mainly to spleen followed by liver and lung
- Difference in distribution can lead to difference in toxicity
- Unlikely that silver nanoparticles dissolve all immediately to ions

*Lankveld et al, 2010, Biomaterials*

repeated

single







## Toxicity data on nano-Ag relevant for RA

- Acute toxicity
  - Oral, 2,5 mg directly in stomach, **not relevant**
  - Inhalation, no studies
  - Dermal,
    - › wound dressings in burn patients, **not relevant**
    - › acute and subchronic tox in guinea pigs, **colloidal silver**



## Toxicity data on nano-Ag relevant for RA

- Repeated dose toxicity

- Oral

- › 28 days tox study in rats, 30, 300 and 1000 mg/kg/day (60nm): dose-dependent tox in liver, **high dose** (*Kim et al, 2008*)
- › 90 days tox study in rats, 30, 125 and 500 mg/kg/day (56 nm): dose dependent accumulation of silver in organs (*Kim et al, 2010*)
- › Pharmaceutical ingestion of **colloidal silver** in human: argyria (skin decolourization) in sun-exposed areas, 3.5 mg/kg/day, 3 times a day for 10 months (*Wadhera and Fung, 2005*)

- Inhalation:

- › 28 days tox study in rats with 0.48, 3.48 and 61  $\mu\text{g}/\text{m}^3$  (15 nm)(6h/day, 5 days/week), no sign health effects (*Ji et al, 2007*)
- › 90 days tox study in rats with 49, 133 and 515  $\mu\text{g}/\text{m}^3$  (18-19 nm)(6h/day, 5 days/week), main targets for accumulation and tox were lungs and liver (*Sung et al, 2008, 2009*)



## Risk assessment for consumer

- Nano-silver case study within the context of REACH (*Pronk et al, 2009*)
  - Quick and dirty risk assessment
  - Bathroom cleaner, trigger spray with 1% nano-Ag (spherical,  $15 \pm 5$  nm)
  - Consumer exposure, both inhalation and dermal
  - ConsExpo
    - > Dermal vs effect dose 28 and 90 days oral tox study:  
Margin of exposure: 2700 – 90000 (based on mass)
    - > Inhalation vs effect dose 28 and 90 days inhalation study:  
Margin of exposure 1.3 – 170 and 140 – 1400 (based on **mass**)

Margins are **not of such magnitude that they would support waiving** of further testing of systemic effects



## Risk assessment for worker

- First attempt for derivation of Human **Indicative No-Effect Levels** (INELs) (*Christensen et al, 2010*)
- Semi-quantitative risk characterisation
- NOAEL/ LOAEL for repeated inhalation from literature
  - LOAEL inhalation
  - LOAEL→NOAEL (factor 3 and factor 10)
  - Assessment factors (interspecies, intra species, sub-chronic to chronic)
  - Lung effects and liver effects

Direct comparison of identified exposure data with toxicity data:  
with care!

Worker exposure data with derived INELs  
(in terms of particle numbers):  
**Same order of magnitude!**



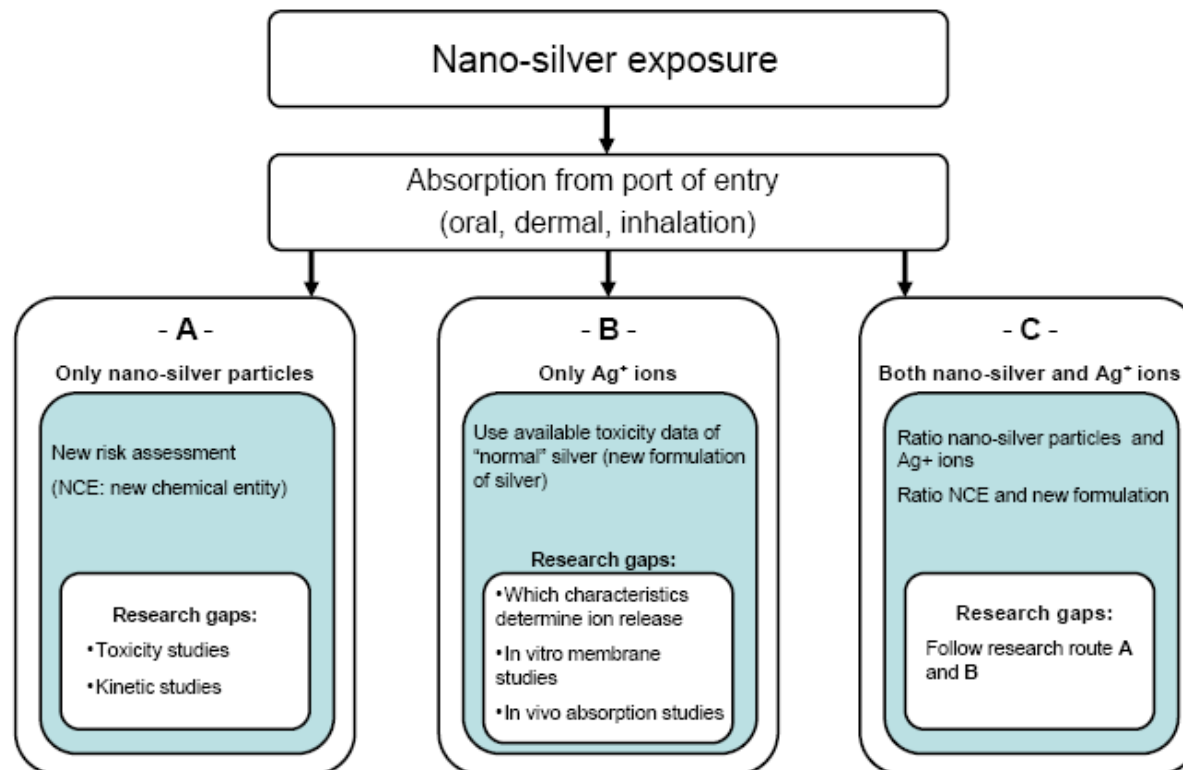
## Knowledge gaps in human RA of nano-Ag

- Data on nanosilver in public literature relate to **different types of nanosilver**
  - Different size, distribution, agglomeration state, coating etc
  - Incomplete characterisation
  - Colloidal silver
- Data on **exposure are missing**
  - Little data on **worker** exposure: repeated inhalation in working environment
  - **Consumer** exposure: exposure frequency and levels
    - › which products, what types of particles, what concentration, release from products, exposure route etc.
    - › inhalation of spray products seems relevant
    - › dermal and oral exposure, lack of data for consumer and worker, but exposures lower than for drugs and wound dressings



## Knowledge gaps in human RA of nano-Ag

- Internal dose: **lack of toxicokinetics data**
  - To which extent is silver absorbed via the different routes available as ions, nanoparticles or both



*Wijnhoven et al, 2009*



## Knowledge gaps in human RA of nano-Ag

- Toxicity:
  - Potential target organs may involve liver, lung and immune system
  - Very limited well controlled studies with multiple particle sizes
  - Uncertainties in possible direct genotoxic effect of nanoAg



## Priorities for future research

1. Generation of exposure data
  - Occupational inhalation, consumer inhalation, dermal
2. Further toxicokinetic studies
  - Absorption, distribution of different types of nanoAg
3. Toxicity studies with levels and types of nanoAg as encountered on the workplace:
  - Sub chronic inhalation
4. Testing of possible direct genotoxicity of nanoAg
5. Oral and dermal toxicity studies relevant for occupational and consumer exposure
6. Studies to identify possible reproductive toxicity





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