

1 **OECD GUIDELINE FOR THE TESTING OF CHEMICALS**

2 **DRAFT PROPOSAL FOR A NEW TEST GUIDELINE**

3 **Skin Sensitisation: Local Lymph Node Assay: BrdU-ELISA**

4 **INTRODUCTION**

5 1. OECD Guidelines for the Testing of Chemicals are periodically reviewed in the
6 light of scientific progress, changing regulatory needs, and animal welfare considerations.
7 Toward that end, a modified Local Lymph Node Assay (LLNA) for the determination of skin
8 sensitisation in the mouse, the nonradiolabelled LLNA: 2-bromodeoxyuridine-ELISA test
9 method (LLNA: BrdU-ELISA) recently underwent validation studies. Based on a formal
10 evaluation and peer review of these studies, the LLNA: BrdU-ELISA is useful for identifying
11 skin sensitising and nonsensitising substances, with certain limitations (1)(2)(3). The method
12 is therefore proposed for adoption as an OECD Test Guideline (TG No. to be inserted). This
13 is the fourth Test Guideline to be promulgated for assessing skin sensitisation potential of
14 chemicals in animals. Test Guideline 429 describes the radiolabelled LLNA (4) and was the
15 first Test Guideline for the determination of skin sensitisation in the mouse. The details of the
16 validation of the LLNA and a review of the associated work have been published
17 (5)(6)(7)(8)(9). Test Guideline 406 utilises guinea pig tests, notably the guinea pig
18 maximisation test and the Buehler test (10).

19 2. The LLNA: BrdU-ELISA was developed as a nonradioactive modification to the
20 LLNA. Similar to the LLNA, the LLNA: BrdU-ELISA studies the induction phase of skin
21 sensitisation and provides quantitative data suitable for dose response assessment.
22 Furthermore, an ability to detect skin sensitisers without the necessity for using a radioactive
23 label for DNA eliminates the potential for occupational exposure to radioactivity and waste
24 disposal issues. This in turn may allow for the increased use of mice to detect skin sensitisers,
25 which could further reduce the use of guinea pigs to test for skin sensitisation potential. The
26 LLNA: BrdU-ELISA provides certain advantages with regard to animal welfare and a
27 reduced LLNA: BrdU-ELISA (rLLNA: BrdU-ELISA) for hazard classification of skin
28 sensitising substances can be performed under this Test Guideline, if dose-response
29 information is not needed (11)(12).

30 **DEFINITIONS**

31 3. Definitions used are provided in Annex 1.

32 **INITIAL CONSIDERATIONS**

33 4. The LLNA: BrdU-ELISA is a modified LLNA method for identifying skin
34 sensitising and nonsensitising chemicals, with specific limitations. This does not necessarily
35 imply that in all instances the LLNA: BrdU-ELISA should be used in place of the LLNA or
36 guinea pig tests, but rather that the assay is of equal merit and may be employed as an
37 alternative in which positive and negative results generally no longer require further

38 confirmation (1)(2). The LLNA: BrdU-ELISA is an *in vivo* method and, as a consequence,
39 will not eliminate the use of animals in the assessment of allergic contact sensitising activity.
40 It has, however, the potential to reduce the number of animals required for this purpose (e.g.,
41 reducing the number of guinea pigs used when the LLNA: BrdU-ELISA is used instead of
42 guinea pig assays where the use of radioactivity is prohibited and therefore the LLNA is not
43 used). Moreover, the LLNA: BrdU-ELISA offers a substantial refinement of the way in
44 which animals are used for allergic contact sensitisation testing. The LLNA: BrdU-ELISA is
45 based upon an evaluation of immunological events stimulated by chemicals during the
46 induction phase of sensitisation. Unlike guinea pig tests (i.e., TG 406) (10) the LLNA: BrdU-
47 ELISA does not require that challenge-induced dermal hypersensitivity reactions be elicited.
48 Furthermore, the LLNA: BrdU-ELISA does not require the use of an adjuvant, as is the case
49 for the guinea pig maximisation test, as described in reference (10). Thus, the LLNA: BrdU-
50 ELISA reduces animal distress. Despite the advantages of the LLNA: BrdU-ELISA over TG
51 406, there are certain limitations that may necessitate the use of TG 406 (e.g., the testing of
52 certain metals, false positive findings with certain skin irritants) (9), as limitations that have
53 been identified for the LLNA have been recommended to apply also to the LLNA: BrdU-
54 ELISA (1).

55 **PRINCIPLE OF THE TEST**

56 5. The basic principle underlying the LLNA: BrdU-ELISA is that sensitisers induce
57 proliferation of lymphocytes in the lymph nodes draining the site of chemical application.
58 This proliferation is proportional to the dose and to the potency of the applied allergen and
59 provides a simple means of obtaining a quantitative measurement of sensitisation. The
60 LLNA: BrdU-ELISA assesses this proliferation as the proliferation in test groups compared
61 to that in vehicle treated controls. The ratio of the proliferation in treated groups to that in
62 concurrent vehicle treated controls, termed the Stimulation Index (SI), is determined, and
63 should be ≥ 2.0 before a test substance can be considered as a skin sensitizer and should be
64 < 1.3 for the test substance to be considered a nonsensitizer (1). The methods, described here
65 are based on the use of measuring BrdU content to indicate an increased number of
66 proliferating cells in the draining auricular lymph nodes. However, other endpoints for
67 assessment of the number of proliferating cells may be employed provided there is
68 justification and appropriate scientific support, including full citations and description of the
69 methodology.

70 **DESCRIPTION OF THE ASSAY**

71 **Selection of animal species**

72 6. The mouse is the species of choice for this test. Young adult female mice of
73 CBA/Ca or CBA/J strain, which are nulliparous and non-pregnant, are used. At the start of
74 the study, animals should be between 8-12 weeks old, and the weight variation of the animals
75 should be minimal and not exceed 20% of the mean weight. Other strains and males may be
76 used when sufficient data are generated to demonstrate that significant strain and/or gender-
77 specific differences in the LLNA response do not exist.

78 **Housing and feeding conditions**

79 7. Mice should be group housed (13), unless adequate scientific rationale for housing
80 mice individually is provided. The temperature of the experimental animal room should be
81 22°C (\pm 3°C). Although the relative humidity should be at least 30% and preferably not
82 exceed 70%, other than during room cleaning, the aim should be 50-60%. Lighting should be
83 artificial, the sequence being 12 hours light, 12 hours dark. For feeding, conventional
84 laboratory diets may be used with an unlimited supply of drinking water.

85 **Preparation of animals**

86 8. The animals are randomly selected, marked to permit individual identification (but
87 not by any form of ear marking), and kept in their cages for at least five days prior to the start
88 of dosing to allow for acclimatisation to the laboratory conditions. Prior to the start of
89 treatment all animals are examined to ensure that they have no observable skin lesions.

90 **Preparation of dosing solutions**

91 9. Solid test substances should be dissolved in appropriate solvents/vehicles and
92 diluted, if appropriate, prior to application to an ear of the mice. Liquid test substances may
93 be applied neat or diluted prior to dosing. Insoluble materials, such as those generally seen in
94 medical devices, should be extracted in an appropriate solvent and, if appropriate, further
95 processed prior to application to an ear of the mice. The test substance should be prepared
96 daily unless stability data demonstrate the acceptability of storage.

97 **Reliability check**

98 10. Positive controls are used to demonstrate appropriate performance of the assay by
99 responding with adequate and reproducible sensitivity to a sensitising substance for which
100 the magnitude of the response is well characterised. Inclusion of a concurrent positive control
101 is recommended because it demonstrates competency of the laboratory to successfully
102 conduct each assay and allows for an assessment of intra- and inter-laboratory reproducibility
103 and comparability. The positive control should produce a positive LLNA: BrdU-ELISA
104 response at an exposure level expected to give an increase in the SI \geq 2.0 over the negative
105 control group. The positive control dose should be chosen such that the induction is
106 reproducible but not excessive. Preferred positive control substances are hexyl cinnamic
107 aldehyde (Chemical Abstracts Service [CAS] No 101-86-0) and eugenol (CAS No 97-53-0).
108 There may be circumstances in which, given adequate justification, other positive control
109 substances, meeting the above criteria, may be used.

110 11. While inclusion of a concurrent positive control group is recommended, there may
111 be situations in which periodic testing (i.e., at intervals \leq 6 months) of the positive control
112 substance may be adequate for laboratories that conduct the LLNA: BrdU-ELISA regularly
113 (i.e., conduct the LLNA: BrdU-ELISA at a frequency of no less than once per month) and
114 have an established historical positive control database that demonstrates the laboratory's
115 ability to obtain reproducible and accurate results with positive controls. Adequate
116 proficiency with the LLNA: BrdU-ELISA can be successfully demonstrated by generating
117 consistent results with the positive control in at least 10 independent tests conducted within a
118 reasonable period of time (i.e., less than one year).

119 12. A concurrent positive control group should always be included when there is a
120 procedural change to the LLNA: BrdU-ELISA (e.g., change in trained personnel, change in
121 test method materials and/or reagents, change in test method equipment, change in source of
122 test animals), and such changes should be documented in laboratory reports. Consideration
123 should be given to the impact of these changes on the adequacy of the previously established
124 historical database in determining the necessity for establishing a new historical database to
125 document consistency in the positive control results.

126 13. Investigators should be aware that the decision to conduct a positive control on a
127 periodic basis instead of concurrently has ramifications on the adequacy and acceptability of
128 negative study results generated without a concurrent positive control during the interval
129 between each periodic positive control study. For example, if a false negative result is
130 obtained in the periodic positive control study, all negative test substance results obtained in
131 the interval between the last acceptable periodic positive control study and the unacceptable
132 periodic positive control study will be questioned. Any study reports associated with these
133 negative test substance results should immediately be amended to report the failed positive
134 control test. In order to demonstrate that the prior negative test substance study results are
135 acceptable, a laboratory would be expected to repeat all negative studies, which would
136 require additional expense and increased animal use. Simply repeating a failed periodic
137 positive control study is not scientifically valid. These implications should be carefully
138 considered when determining whether to include concurrent positive controls or to only
139 conduct periodic positive controls. Consideration should also be given to using fewer animals
140 in the concurrent positive control group when this is scientifically justified and if the
141 laboratory demonstrates, based on laboratory-specific historical data, that fewer mice can be
142 used without substantially increasing the frequency with which studies will need to be
143 repeated.

144 14. Although the positive control substance should be tested in the vehicle that is known
145 to elicit a consistent response (e.g., acetone: olive oil), there may be certain regulatory
146 situations in which testing in a non-standard vehicle (clinically/chemically relevant
147 formulation) will also be necessary. In such situations the possible interaction of a positive
148 control with this unconventional vehicle should be tested. If the concurrent positive control
149 substance is tested in a different vehicle than the test substance, then a separate vehicle
150 control for the concurrent positive control should be included.

151 15. In instances where substances of a specific chemical class or range of responses are
152 being evaluated, benchmark controls may be useful to demonstrate that the test method is
153 functioning properly for detecting the skin sensitisation potential of a test substance.
154 Appropriate benchmark controls should have the following properties:

- 155 • structural and functional similarity to the class of the substance being tested;
- 156 • known physical/chemical characteristics;
- 157 • supporting data on known effects in animal models;
- 158 • known potency for sensitisation response.

159 **TEST PROCEDURE**

160 **Number of animals and dose levels**

161 16. A minimum of four animals is used per dose group, with a minimum of three
162 concentrations of the test substance, plus a concurrent negative control group treated only
163 with the vehicle for the test substance, and a concurrent positive control (see paragraphs 10-
164 14). Except for absence of treatment with the test substance, animals in the control groups
165 should be handled and treated in a manner identical to that of animals in the treatment
166 groups.

167 17. Dose and vehicle selection should be based on the recommendations given in the
168 references (5) and (15). Doses are selected from the concentration series 100%, 50%, 25%,
169 10%, 5%, 2.5%, 1%, 0.5%, etc. Existing acute toxicity and dermal irritation data should be
170 considered, where available, in selecting the three consecutive concentrations so that the
171 highest concentration maximises exposure whilst avoiding systemic toxicity and excessive
172 local skin irritation (14)(15). In the absence of such information, an initial prescreen test may
173 be necessary (see paragraphs 20-23).

174 18. The vehicle should not interfere with or bias the test result and should be selected on
175 the basis of maximising the solubility in order to obtain the highest concentration achievable
176 whilst producing a solution/suspension suitable for application of the test substance. In order
177 of preference, recommended vehicles are acetone: olive oil (4:1 v/v), *N,N*-
178 dimethylformamide, methyl ethyl ketone, propylene glycol, and dimethyl sulphoxide (8)(15),
179 but others may be used if sufficient scientific rationale is provided. In certain situations it
180 may be necessary to use a clinically relevant solvent or the commercial formulation in which
181 the test substance is marketed as an additional control. Particular care should be taken to
182 ensure that hydrophilic materials are incorporated into a vehicle system, which wets the skin
183 and does not immediately run off. Thus, wholly aqueous vehicles are to be avoided.

184 19. The processing of lymph nodes from individual mice allows for the assessment of
185 interanimal variability and a statistical comparison of the difference between test substance
186 and vehicle control group measurements. In addition, evaluating the possibility of reducing
187 the number of mice in the positive control group is only feasible when individual animal data
188 are collected.

189 **Prescreen test**

190 20. The purpose of the prescreen test is to provide guidance for selecting the maximum
191 dose level to use in the main LLNA: BrdU-ELISA study. The maximum dose level tested
192 should be a concentration of 100% (i.e., neat substance for liquid substances) or the
193 maximum soluble concentration (for solids), unless available information suggests that this
194 concentration induces systemic toxicity or excessive local irritation after topical application
195 in the mouse.

196 21. In the absence of such information, a prescreen test should be performed using three
197 dose levels of the test substance, in order to define the appropriate dose level to test in the
198 LLNA: BrdU-ELISA. Six mice (two per concentration) are used, and the prescreen test is

199 conducted under identical conditions as the main LLNA: BrdU-ELISA study, except there is
200 no assessment of lymph node proliferation. All mice will be observed daily for any clinical
201 signs of systemic toxicity or local irritation at the application site. Body weights are recorded
202 pre-test and prior to termination (Day 6). Both ears of each mouse are observed for erythema
203 and scored using Table 1. Ear thickness measurements are taken using a thickness gauge
204 (e.g., digital micrometer or Peacock Dial thickness gauge) on Day 1 (pre-dose), Day 3
205 (approximately 48 hours after the first dose), and Day 6. Excessive local irritation is
206 indicated by an erythema score ≥ 3 and/or ear swelling of $\geq 25\%$ (16)(17).

207 **Table 1 Erythema Scores**

Observation	Value
No visual effect	0
Slight erythema (barely perceptible)	1
Well-defined erythema	2
Moderate to severe erythema (beet redness)	3
Eschar (i.e., piece of dead tissue that is cast off from the surface of the skin)	4

208 22. In addition to a 25% increase in ear swelling (16)(17), a statistically significant
209 increase in ear swelling in the treated mice compared to control mice has also been used to
210 identify irritants in the LLNA (17)(18)(19)(20)(21)(22)(23). While statistically significant
211 increases can occur when ear swelling is less than 25%, they have not been associated
212 specifically with excessive irritation (20)(21)(22)(23)(24). Additionally, an adequately robust
213 statistical comparison would require that a vehicle control group be included and that more
214 than two mice per group be tested. Both of these requirements would substantially increase
215 the number of mice used in a prescreen test. For this reason, a threshold increase in ear
216 swelling above pre-dosing levels is recommended for this prescreen test.

217 23. Test guidelines for assessing acute dermal toxicity recommend a number of clinical
218 observations for assessing systemic toxicity (25)(26). The following clinical observations,
219 which are based on test guidelines and current practices (27), may indicate systemic toxicity
220 when used as part of an integrated assessment and therefore may indicate the maximum dose
221 level to use in the main LLNA: BrdU-ELISA:

- 222 • Changes in nervous system function (e.g., piloerection, ataxia, tremors, and
223 convulsions)
- 224 • Changes in behavior (e.g., aggressiveness, change in grooming activity,
225 marked change in activity level)
- 226 • Changes in respiratory patterns (i.e., changes in frequency and intensity of
227 breathing such as dyspnea, gasping, and rales)
- 228 • Changes in food and water consumption
- 229 • Lethargy and/or unresponsiveness

- 230 • Any clinical signs of more than slight or momentary pain and distress
- 231 • Reduction in body weight >10% from Day 1 to Day 6
- 232 • Mortality

233 **Reduced LLNA**

234 24. Use of a rLLNA: BrdU-ELISA protocol has the potential to reduce the number of
235 animals used in the LLNA: BrdU-ELISA by omitting the middle and low dose groups
236 (11)(12). This is the only difference between the LLNA: BrdU-ELISA and the rLLNA:
237 BrdU-ELISA and thus, the test substance concentration evaluated in the rLLNA: BrdU-
238 ELISA should be the maximum concentration that does not induce overt systemic toxicity
239 and/or excessive local irritation in the mouse. The rLLNA: BrdU-ELISA should be used for
240 the hazard classification of skin sensitising substances if dose-response information is not
241 needed, provided there is adherence to all other LLNA: BrdU-ELISA protocol specifications,
242 as described in this Test Guideline. To further reduce animal use, the rLLNA: BrdU-ELISA
243 should be used routinely as an initial test to determine allergic contact dermatitis potential of
244 chemicals and products before conducting the LLNA: BrdU-ELISA. Negative substances can
245 be classified as nonsensitisers and positive substances can be classified as sensitisers.

246 **Main study experimental schedule**

247 25. The experimental schedule of the assay is as follows:

- 248 • *Day 1:*
249 Individually identify and record the weight of each animal and any clinical
250 observations. Apply 25 µL of the appropriate dilution of the test substance,
251 the vehicle alone, or the concurrent positive control (see paragraphs 10-14), to
252 the dorsum of each ear.
- 253 • *Days 2 and 3:*
254 Repeat the application procedure carried out on Day 1.
- 255 • *Days 4:*
256 No treatment.
- 257 • *Days 5:*
258 Inject 0.5 mL (5 mg/mouse) of BrdU solution interperitoneally.
- 259 • *Day 6:*
260 Record the weight of each animal. Approximately 24 hours (24 h) after BrdU
261 injection, humanely kill the animals. Excise the draining auricular lymph
262 nodes from each mouse ear and process separately in PBS for each animal.
263 Details and diagrams of the node identification and dissection can be found in
264 reference (28).

265 **Preparation of cell suspensions**

266 26. A single cell suspension of lymph node cells excised bilaterally from each mouse is
267 prepared by gentle mechanical disaggregation through 200 micron-mesh stainless steel gauze
268 or another acceptable technique for generating a single-cell suspension.

269 **Determination of cellular proliferation (measurement of BrdU content in DNA of**
270 **lymphocytes)**

271 27. BrdU is measured by ELISA using a commercial kit. A complete protocol may be
272 found in (1).

273 **OBSERVATIONS**

274 **Clinical observations**

275 28. Each mouse should be carefully observed once daily for any clinical signs, either of
276 local irritation at the application site or of systemic toxicity. All observations are
277 systematically recorded with records being maintained for each mouse. Monitoring plans
278 should include criteria to promptly identify those mice exhibiting systemic toxicity, excessive
279 irritation, or corrosion of skin for euthanasia.

280 **Body weights**

281 29. As stated in paragraph 25, individual animal body weights should be measured at
282 the start of the test and at the scheduled kill.

283 **CALCULATION OF RESULTS**

284 30. Results for each treatment group are expressed as the mean SI. The SI is derived by
285 dividing the mean BrdU labelling index/mouse within each test substance group and the
286 concurrent positive control group by the mean BrdU labelling index for the solvent/vehicle
287 control group. The average SI for vehicle treated controls is then one.

288 The BrdU labelling index is defined as:

289
$$\text{BrdU labelling index} = (\text{ABS}_{\text{em}} - \text{ABS blank}_{\text{em}}) - (\text{ABS}_{\text{ref}} - \text{ABS blank}_{\text{ref}})$$

290 where em = emission wavelength and ref = reference wavelength.

291 31. Collecting data at the level of the individual mouse will enable a statistical analysis
292 for presence and degree of dose response in the data. Any statistical assessment should
293 include an evaluation of the dose response relationship as well as suitably adjusted
294 comparisons of test groups (e.g., pair-wise dosed group versus concurrent solvent/vehicle
295 control comparisons). Statistical analyses may include, for instance, linear regression or
296 William's test to assess dose-response trends, and Dunnett's test for pairwise comparisons. In
297 choosing an appropriate method of statistical analysis, the investigator should maintain an
298 awareness of possible inequalities of variances and other related problems that may
299 necessitate a data transformation or a non-parametric statistical analysis. In any case, the
300 investigator should be alert to possible "outlier" responses for individual mice within a group
301 that may necessitate analysis both with and without outliers.

302 32. The decision process with regard to a positive response includes a $\text{SI} \geq 2.0$, and the
303 decision process with regard to a negative response includes a $\text{SI} < 1.3$ (1). Dose response,

304 chemical toxicity, solubility, and, where appropriate, statistical significance should be
305 considered together with SI values to arrive at a final decision(6)(9)(26)(29).

306 33. If an SI value that falls into the range $2.0 > SI \geq 1.3$ is obtained, an integrated
307 assessment of the SI value should be considered in conjunction with all other available and
308 relevant information (e.g., dose response information, statistical analyses of treated vs.
309 control animals, peptide-binding activity, molecular weight, results from related chemicals,
310 other testing data), to determine if there is sufficient information on which to base an
311 accurate determination of sensitisation potential, or if additional testing is necessary (1).
312 Consideration should also be given to various properties of the test substance, including
313 whether it has a structural relationship to known skin sensitisers, whether it causes excessive
314 skin irritation in the mouse, and the nature of the dose response seen. These and other
315 considerations are discussed in detail elsewhere (7).

316 **DATA AND REPORTING**

317 **Data**

318 34. Data should be summarised in tabular form showing the individual animal BrdU
319 labelling index values, the group mean BrdU labelling index/animal, its associated error
320 term, and the mean SI for each dose group compared against the concurrent solvent/vehicle
321 control group.

322 **Test report**

323 35. The test report should contain the following information:

324 Test substance and control substances:

- 325 – identification data (e.g. CAS number, if available; source; purity; known
326 impurities; lot number);
- 327 – physical nature and physicochemical properties (e.g. volatility, stability,
328 solubility);
- 329 – if mixture, composition and relative percentages of components.

330 Solvent/vehicle:

- 331 – identification data (purity; concentration, where appropriate; volume used);
- 332 – justification for choice of vehicle.

333 Test animals:

- 334 – source of CBA mice;
- 335 – microbiological status of the animals, when known;
- 336 – number and age of animals;
- 337 – source of animals, housing conditions, diet, etc.

338 Test conditions:

- 339 – details of test substance preparation and application;
- 340 – justification for dose selection (including results from range finding study, if
- 341 conducted);
- 342 – vehicle and test substance concentrations used, and total amount of substance
- 343 applied;
- 344 – details of food and water quality (including diet type/source, water source);
- 345 – details of treatment and sampling schedules;
- 346 – methods for measurement of toxicity;
- 347 – criteria for considering studies as positive or negative;

- 348 – details of any protocol deviations and an explanation on how the deviation
- 349 affects the study design and results.

350 Reliability check:

- 351 – a summary of results of latest reliability check, including information on
- 352 substance, concentration and vehicle used;
- 353 – concurrent and/or historical positive and negative (solvent/vehicle) control
- 354 data for testing laboratory;
- 355 – If a concurrent positive control was not included, the date and laboratory
- 356 report for the most recent periodic positive control and a report detailing the
- 357 historical positive control data for the laboratory justifying the basis for not
- 358 conducting a concurrent positive control.

359 Results:

- 360 – individual weights of mice at start of dosing and at scheduled kill; as well as
- 361 mean and associated error term for each treatment group;
- 362 – time course of onset and signs of toxicity, including dermal irritation at site of
- 363 administration, if any, for each animal;
- 364 – a table of individual mouse BrdU labelling indices and SIs for each treatment
- 365 group;
- 366 – mean and associated error term for BrdU labelling index/mouse for each
- 367 treatment group and the results of outlier analysis for each treatment group;
- 368 – calculated SI and an appropriate measure of variability that takes into account
- 369 the interanimal variability in both the test substance and control groups;
- 370 – dose response relationship;
- 371 – statistical analysis, where appropriate.

372 Discussion of results:

- 373 – a brief commentary on the results, the dose-response analysis, and statistical
- 374 analyses, where appropriate, with a conclusion as to whether the test
- 375 substance should be considered a skin sensitiser.

376 Quality assurance statement for Good Laboratory Practice compliant studies:

377 – statement should indicate all inspections made during the study and the dates
378 any results were reported to the Study Director. The statement should also
379 confirm that the final report reflects the raw data.

380

380 **LITERATURE**

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492

ANNEX 1

493 **False negative:** A substance incorrectly identified as negative or non-active by a test method,
494 when in fact it is positive or active.

495 **False positive:** A substance incorrectly identified as positive or active by a test, when in fact
496 it is negative or non-active.

497 **Hazard:** The potential for an adverse health or ecological effect. The adverse effect is
498 manifested only if there is an exposure of sufficient level.

499 **Inter-laboratory reproducibility:** A measure of the extent to which different qualified
500 laboratories, using the same protocol and testing the same substances, can produce
501 qualitatively and quantitatively similar results. Inter-laboratory reproducibility is determined
502 during the prevalidation and validation processes, and indicates the extent to which a test can
503 be successfully transferred between laboratories, also referred to as between-laboratory
504 reproducibility.

505 **Intra-laboratory reproducibility:** A determination of the extent that qualified people within
506 the same laboratory can successfully replicate results using a specific protocol at different
507 times. Also referred to as within-laboratory reproducibility.

508 **Quality assurance:** A management process by which adherence to laboratory testing
509 standards, requirements, and record keeping procedures, and the accuracy of data transfer,
510 are assessed by individuals who are independent from those performing the testing.

511 **Reliability:** Measures of the extent that a test method can be performed reproducibly within
512 and between laboratories over time, when performed using the same protocol. It is assessed
513 by calculating intra- and inter-laboratory reproducibility.

514 **Skin sensitisation:** An immunological process that results when a susceptible individual is
515 exposed topically to an inducing chemical allergen, which provokes a cutaneous immune
516 response that can lead to the development of contact sensitisation.

517 **Stimulation Index (SI):** A value calculated to assess the skin sensitisation potential of a test
518 substance that is the ratio of the proliferation in treated groups to that in the concurrent
519 vehicle control group.