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From: Venezia, Carmen F. [Carmen.Venezia@globaltungsten.com]
Sent: Friday, November 07, 2008 12:38 PM
To: IRRC
Subject: Proposed Molybdenum Water Quality Standard
Attachments: IRRC Molybdenum Comments.pdf

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INDEPENDENT REGULATORY
REVIEW COMMISSION

Dear Chairman Coccodrilli:

Please find attached comments from Global Tungsten & Powders Corp., Towanda, PA on the Triennial Review of Water Quality Standards, Proposed Molybdenum Standard.

Sincerely,

Carmen Venezia
Manager, Safety and Environment
GTP ▶ Hawes Street ▶ Towanda, PA 18848
Direct: (570) 268-5128 ▶ Fax: (570) 268-5129
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GLOBAL TUNGSTEN & POWDERS CORP

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November 7, 2008

INDEPENDENT REGULATORY
REVIEW COMMISSION

By Electronic & Regular Mail

The Honorable Arthur Coccodrilli, Chairman
Independent Regulatory Review Commission
333 Market St., 14th Floor
Harrisburg, PA 17101

Re: Triennial Review of Water Quality Standards (Regulation 7-421)
Comments to Proposed Molybdenum Standard (38 Pa.B. 236 (January 12, 2008))

Dear Chairman Coccodrilli:

Global Tungsten & Powders Corp. ("GTP") is pleased to submit the following comments on the above-referenced proposed rulemaking for consideration by the Independent Regulatory Review Commission ("IRRC"). Specifically, GTP objects to the proposed new water quality standard for molybdenum, which is included as part of the proposed rulemaking by the Pennsylvania Department of Environmental Protection (the "Department"). GTP respectfully requests that the IRCC disapprove the inclusion of a water quality standard for molybdenum in the referenced standards.

By way of background, OSRAM SYLVANIA Products, Inc. ("OSRAM") recently sold its facility located on the banks of the North Branch of the Susquehanna River, in Towanda, Pennsylvania. The Towanda facility is now owned and operated by GTP. GTP essentially has continued the same operations at the Towanda facility that were previously conducted by OSRAM, including the manufacturing of high temperature metallurgy and inorganic chemicals.

Prior to GTP's acquisition, OSRAM submitted comments to the Environmental Quality Board ("EQB") objecting to the proposed new water quality standard for molybdenum ("Mo") included in proposed Regulation 7-421. By this letter, GTP hereby adopts and confirms those comments submitted regarding Regulation 7-421 as they were proposed in the Spring 2008. For your convenience a copy of OSRAM's comments is attached hereto as Exhibit "A."

Principally, OSRAM objected to the proposed new water quality standard for Mo for the following reasons: (1) there is an insufficient level of concern to human health to

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Mo standard did not consider the most recent and technically justifiable toxicological data and was calculated improperly; and (3) the proposed Mo standard is far more stringent than those of EPA and the neighboring states, which have no Mo standard, placing Pennsylvania industry at a competitive disadvantage. The Department responded to OSRAM's comments in the July 2008 "Comment and Response Document." Below for each of OSRAM's three primary comments, we summarize the initial comment in opposition to the proposed Mo standard and respond to the Department's reply and provide additional comments in support of deleting the Mo standard from the proposed regulations.

(1) There is an Insufficient Level of Concern to Human Health to Merit a Mo Standard based on a Limited Amount of Available Data.

As stated by OSRAM in its prior comments, the limited number of existing epidemiological studies indicate that Mo appears to have a low toxicity in humans. This may be because Mo is a *necessary trace element* in the human body and because Mo is rapidly eliminated from the body in the urine. Notably, EPA has acknowledged that the study used by EPA/IRIS to establish the current reference dose reporting low copper, high uric acid and gout-like symptoms in a population exposed to high levels of Mo is limited. In addition, the National Research Council concluded that because of the various limitations, Mo's association with the adverse effects in that study was "speculative." Moreover, the adverse effects reported in animals, the basis of the proposed Mo standard, have not been identified in any of the epidemiological investigations or other human studies. Markedly, there are several reports that highlight the beneficial effects of Mo and potential hazards associated with deficiencies, including susceptibility to certain cancers.

The Department's response to OSRAM regarding the lack of toxicity of Mo did no more than cite the same unconvincing EPA/IRIS study mentioned above in addition to an apparent review of the scientific literature regarding dietary micronutrients by the Institute of Medicine ("IOM"). The Department's response, however, continues to ignore the lack of reliability of the EPA/IRIS study and the beneficial effects of Mo. As a result, the Department has yet to offer an explanation sufficient to justify the imposition of a statewide water quality standard for Mo.

(2) The Proposed Mo Standard did not Consider the Most Recent and Technically Justifiable Toxicological Data, and was Calculated Improperly.

In its comments, OSRAM highlighted two problems with the method used by the Department to calculate the proposed Mo standard: (1) instead of relying on data from

IRIS, the Department used information provided to them by a regulated entity that does not represent the most up to date scientific information; and (2) the Department did not use the EPA recommended methodology to derive the toxicity value, i.e., the Benchmark Dose (“BMD”) approach. Regarding the first issue, OSRAM suggested that the data derived by a recently published study by Pandey and Singh (2002) should have been used to calculate the Mo standard. That study showed no adverse effects observed in rats when given a stronger dosage of Mo than what was used to calculate the proposed Mo standard. Moreover, in addition to providing more recent data, the Pandey and Singh data is more precise due to greater control of dosage during the study. When OSRAM used the BMD recommended methodology and the data derived from the Pandey and Singh study, it derived a health-based criterion of 5.1 mg/L for Mo, which is substantially higher than the proposed Mo standard.

In response to these comments, the Department suggested that the Pandey and Singh study is a single study based on the evaluation of selected male reproductive endpoints and is unrepresentative of the most sensitive study population or response to Mo toxicity when compared to the IRIS and IOM studies. The Department also responded that the data input to the BMD must be derived from several critical studies and not one single study. These observations by the Department are flawed. First, the IRIS study does reference the reproductive effects in males as support, and the IOM document evaluates the same endpoint as that in the Pandey and Singh study. Further, while the study used by the Department may appear more “sensitive,” this may not be the case due to the lack of dosage precision in that study. Instead, the Pandey and Singh study actually could be the more sensitive. Second, it is simply untrue that the BMD model cannot be run with a single study. In fact, the BMD model *cannot be run with multiple studies*, and IRIS has several examples where the point of departure was developed to calculate the RfD using a single study.

(3) The Proposed Mo Standard is far More Stringent Than Those of EPA and the Neighboring States, Which Have no Mo. Standard, Placing Pennsylvania Industry at a Competitive Disadvantage.

As OSRAM has commented, EPA currently has no water quality standards for Mo, and none of the surrounding nearby states have developed surface water quality standards for Mo. As a result, if Pennsylvania is the only state in the region to impose the proposed Mo standard, it could hamper the development of new industry in the Commonwealth and force current Pennsylvania companies to either incur significant capital expenditures to develop treatment technologies for Mo, curtail production or relocate production to a another state.

In its response to comments, the Department pointed out that four other states have water quality based criterion to protect human health. These criterion, however

The Honorable Arthur Coccodrilli, Chairman
November 7, 2008
Page 4

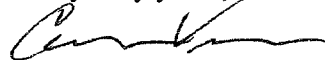
should have no bearing on IRRC's analysis of the Department's proposed Mo standard. Likewise, Colorado's criterion is for groundwater not surface water; North Carolina's criterion is only a provisional criterion; Ohio's criterion is a regional criterion specific to the Lake Erie basin; and as a general matter, *none of the cited Mo criterion is a statewide surface water quality standard for Mo.*

The Department also suggested in its response to comments that there were three possible options for wastewater treatment for Mo (iron co-precipitation with sand filtration, ion exchange, and reverse osmosis); however, the Department has not cited any examples of success utilizing those treatments. Furthermore, Langeloth Metallurgical Co., LLC has pointed out in its recent comments to IRRC that at least one of these methodologies, ion exchange, has proven ineffective.

GTP is an environmentally responsible company employing approximately 1000 citizens of this Commonwealth. If the proposed Mo standard is promulgated, at its current level of production, GTP could find itself on the edge of non-compliance. There is no telling whether GTP would be in compliance if it wished to increase its production. Because there is limited information about proven treatment technologies available to remove Mo from water, should the proposed Mo standard become effective, GTP would be forced to conduct a complicated and costly evaluation of treatment technologies. There is a strong possibility, given the available information, that there may not be any successful treatments for Mo and that GTP would have to spend large amounts of money on capital improvements or potentially limit its business and operations.

Given the uncertainty of any negative effects on human health from Mo in surface water and the problems surrounding the Department's calculation of the proposed Mo standard, allowing the proposed Mo standard to be promulgated and placing a resultant economic strain on Pennsylvania companies, such as GTP, is unsupported and seems entirely unnecessary. This is especially so given the current economic climate in the Commonwealth. Thus, GTP respectfully asks IRRC to disapprove the inclusion of a Mo standard in proposed Regulation 7-421.

Very truly yours,



Carmen Venezia
Manager, Safety and Environment

Attachments

March 25, 2008

VIA FEDERAL EXPRESS

Environmental Quality Board
Rachel Carson State Office Building
16th Floor
400 Market Street
Harrisburg, PA 17101-2301

RE: Comments to Triennial Review of Water Quality Standards
Proposed Molybdenum Standard (38 Pa. B. 236 (January 12, 2008))

Dear Sir/Madam:

OSRAM SYLVANIA Products, Inc. (OSRAM) is pleased to submit the following comments on the Environmental Quality Board's Proposed Triennial Review of Water Quality Standards, as published in the *Pennsylvania Bulletin* on January 12, 2008. Also enclosed is a one page summary of the comments that we would like to be provided to the Board members.

OSRAM owns and operates five manufacturing plants in the Commonwealth and employs approximately 2,800 individuals in the Commonwealth. One of the five manufacturing plants is located in Towanda, Pennsylvania, where OSRAM manufactures high temperature metallurgy and inorganic chemicals. The Towanda facility employs approximately 1,000 individuals and is located on the banks of the North Branch of the Susquehanna River.

OSRAM objects to the proposed new water quality standard for molybdenum for a number of reasons, including the following:

1. There Is an Insufficient Level of Concern to Human Health to Merit a Molybdenum Standard based on the Limited Available Data
2. The Proposed Molybdenum Standard Did Not Consider The Most Recent and Technically Justifiable Toxicological Data, and Was Calculated Improperly
3. The Proposed Molybdenum Standard Is Far More Stringent than those of EPA and the Neighboring States, Which Do Not Have a Molybdenum Standard, and Will Place Pennsylvania Industry at a Competitive Disadvantage

4. If Adopted, the Molybdenum Standard Should Apply at the Point of Existing or Planned Surface Potable Water Supply Withdrawal, per 25 Pa. Code § 96.3(d)

Each of these reasons is discussed in depth, below.

1. **There Is an Insufficient Level of Concern to Human Health to Merit a Molybdenum Standard based on the Limited Available Data**

As noted by the Institute of Medicine (IOM), the limited number of epidemiological studies indicate that molybdenum compounds appear to have low toxicity in humans (IOM, 2000). Reports indicate that elevated levels of molybdenum exposure can result in “mineral imbalance,” although many sources acknowledge that this is not necessarily an adverse effect. In fact, as noted on the United States Environmental Protection Agency’s (EPA) Integrated Risk Information System (IRIS, 2008), in referring to the study by Koval'skiy et al. (1961), the “increased copper excretion and elevated serum ceruloplasmin are not definitive adverse effects, and as presented here are associated with no frank adverse effects in a human population.” A similar conclusion was reached by Vyskocil and Viau (1999), and these authors observed that the reason for the apparent low toxicity is the fact that molybdenum is a necessary trace element in the human body, functioning in conjunction with some flavoprotein enzyme, and is rapidly eliminated from the body in the urine.

Interestingly, the study by Koval'skiy et al. (1961) which reported low copper, high uric acid and gout-like symptoms in a population exposed to high levels of molybdenum, was used by EPA/IRIS to establish the current reference dose. However, EPA acknowledged the limitations of the study, and the US National Research Council (NRC) also noted many weaknesses in this study. The NRC concluded that because of the various limitations, the involvement of molybdenum in the apparent adverse effects was “speculative” and insufficient to establish a cause-and-effect relationship (Vyskocil and Viau, 1999).

Furthermore, adverse effects reported in animals, particularly the reproductive effects reported by Fungwa et al. (1990) which forms the basis of the proposed molybdenum standard, have not been identified in any of the epidemiological investigations or other human studies (i.e., experimental studies). In fact, there are a small number of reports that highlight the beneficial effects of molybdenum and the potential hazards associated with limiting intake. Low

molybdenum levels in soils, plants, drinking water, food and human tissues may be responsible for high mortality from oesophageal cancer (Pandey and Singh, 2002). Similarly, in several animal studies molybdenum has been reported to inhibit gastrointestinal cancers (Luo et al. 1983). These results suggest that not only does molybdenum exhibit relatively low toxicity, but as an essential element, insufficient intake can have adverse effects on human health.

There is an insufficient level of concern to human health associated with molybdenum, and in fact the available data suggest that an insufficient intake of molybdenum can have adverse effects on human health. As such, there is no legitimate reason to adopt the molybdenum standard and it should be deleted from the triennial review package.

2. The Proposed Molybdenum Standard Did Not Consider The Most Recent and Technically Justifiable Toxicological Data, and Was Calculated Improperly

There are two problems with the method used by the Department to calculate the proposed molybdenum standard. First, according to the "Summary of Molybdenum Criteria Development" developed by the Bureau of Water Standards and Facility Regulation (DEP, 2006), the Department used information provided to them by Tom Ondrejko of the Langeloth Metallurgical Company instead of the RfD provided by IRIS. This information contained a reference to a study of the reproductive effects of molybdenum (specifically molybdate) in rats, and included "new toxicity data from the 1990 study published by the [Institute of Medicine]." Specifically, the Department used a No Observed Adverse Affect Level (NOAEL) of 0.9 mg/kg body weight per day. While these data, originally published by Fungwa et al. (1990), represent an improvement in terms of information useful for deriving risk-based toxicity values, they do not represent the most up to date scientific information.

In a study recently published by Pandey and Singh (2002) (attached as Exhibit A), sodium molybdate was dissolved in distilled water and administered orally via cannula to adult male rats at dose levels of 10, 30, and 50 mg/kg body weight (5 days per week) for 60 days. At the higher dose levels (30 and 50 mg/kg-d) significant decreases in absolute and organ-to-bodyweight ratios of testes, epididymides, seminal vesicles and ventral prostate was observed. The sperm abnormality, associated with decreases in sperm motility and sperm count was also

observed at the two higher doses. Significant alterations in the activities of marker testicular enzymes, including sorbitol dehydrogenase (decreases), lactate dehydrogenase (increases) and γ -glutamyl transpeptidase (increases) associated with histopathological changes in testes was also observed. However, these effects were not observed at the 10 mg/kg-d exposed animals, which is a dosage more than ten times the NOAEL used by the Department to calculate the proposed molybdenum standard.

In addition to providing more recent data, the Pandey and Singh study has an important study design advantage over the report by Fungwa et al. In the study design of Fungwa and co-workers, the animals were allowed free access to drinking water that was "supplemented with sodium molybdate." Thus, the actual administered dose had to be estimated based on the amount of water consumed by the individual animals. This consumption rate was determined only on a weekly basis, and therefore the fluctuation or variability in the individual daily dose could have been substantial and was not considered in what can only be considered an *estimate* of daily intake.

Conversely, in the protocol employed by Pandey and Singh (2002) the "desired amount of sodium molybdate was dissolved in distilled water and 0.2 ml was orally fed to rats with the help of cannula." Thus, unlike the Fungwa study, the *administered* dose could be determined with an acceptable degree of precision. Both studies deal with a toxicological endpoint that is considered to be a sensitive indicator of adverse effects (that is reproductive or developmental effects), but the ability to accurately quantify the administered dose of molybdate means that the more recent report by Pandey and Singh (2002) should be the basis of the new value.

The second problem with the methodology used by the Department concerns the derivation of the toxicity value. The Department simply identified a NOAEL from the published data and applied an uncertainty factor based on inter and intra-species variability. While this approach has been used by EPA and others for many years, EPA now recommends using the Benchmark Dose Methodology as an improved way to estimate the point of departure for deriving toxicity factors. As described by EPA (2006), "the Benchmark Dose (BMD) approach provides a more quantitative alternative to the first step in the dose-response assessment than the current NOAEL/LOAEL process for non-cancer health effects, and is similar to that for determining the [point of departure] proposed for cancer endpoints (EPA, 1996). The BMD

approach is an alternative to the NOAEL/LOAEL approach that has been used for many years in dose-response assessment. The development of this approach has been pursued because of recognized limitations in the NOAEL/LOAEL approach.”

We employed the recommended methodology (i.e., the BMD), and used the data provided by the most recent toxicity study (Pandey and Singh, 2002) to develop an alternative point of departure, one preferential to the NOAEL. The results of the BMD calculation, using EPA’s Benchmark Dose Software Version 1.4.1 (NCEA, 2006) are listed below. The lower limit on the BMD (BMDL) for several reproductive endpoints affected by molybdenum exposure, using either the Linear or Power statistical model, are:

- Testis: 38.9 mg/kg-d
- Epididymis: 23.4 mg/kg-d
- Seminal Vesicle: 22.1 mg/kg-d
- Prostate Gland: 22.4 mg/kg-d

The point of departure defined by the BMDL can be used in place of the NOAEL in calculating the threshold human health criterion for molybdenum. Using the lowest of the BMDLs (22.1 mg/kg-d based on effects in seminal vesicles), and applying the same variables listed in the Summary of Molybdenum Criteria Development, including the UF of 30, would result in a health-based criterion of 5.1 mg/L, substantially higher than the proposed molybdenum standard of 208 ug/l.

The proposed molybdenum standard did not consider the most recent and technically justifiable toxicological data from 2002 (a copy of which is attached to the comments), and it was calculated improperly. When the proper data and methodology are used, a standard of 5.1 mg/l is calculated.

3. The Proposed Molybdenum Standard Is Far More Stringent than those of EPA and the Neighboring States, Which Do Not Have a Molybdenum Standard, and Will Place Pennsylvania Industry at a Competitive Disadvantage

The proposed molybdenum standard is far more stringent than those of the EPA and neighboring states and will place Pennsylvania industry at a competitive disadvantage. In fact, EPA currently has no water quality standards for molybdenum. Furthermore, none of the following nearby states have developed surface water quality standards for molybdenum: Delaware, Indiana, Maryland, Massachusetts, New Jersey, New York, Ohio, Virginia, and West Virginia.

Imposing the proposed molybdenum standard in Pennsylvania will force Pennsylvania industries to incur significant capital expenditures to develop treatment technologies capable of meeting the standard and/or require them to reduce and curtail production. Such expenditures and reduced production will not be required of competitive facilities in nearby states, placing Pennsylvania industry at a competitive disadvantage. There simply is no legitimate basis to impose such unfair conditions on Pennsylvania industry, and in fact is completely contrary to the position that the Department of Environmental Protection (DEP) repeatedly has taken in defense of matters such as the challenge to EPA's final mercury emissions reduction rule for new and existing coal-fired power plants. As DEP's Secretary indicated with respect to the mercury rule, "EPA's plan is bad public policy --- it is bad for public health and bad for Pennsylvania's economy." (DEP News Release, March 15, 2005). The same is true for the proposed molybdenum standard.

The proposed molybdenum standard is far more stringent than those of EPA and the neighboring states, which do not have a similar standard, and will place Pennsylvania industry at a competitive disadvantage. There is no legitimate basis to impose such unfair conditions on Pennsylvania industry, and in fact is completely contrary to the position that the Department of Environmental Protection (DEP) repeatedly has taken in defense of other matters. As such, the molybdenum standard should be deleted from the triennial review package.

4. If Adopted, the Molybdenum Standard Should Apply at the Point of Existing or Planned Surface Potable Water Supply Withdrawal, per 25 Pa. Code § 96.3(d)

As previously noted, the proposed threshold human health criterion for molybdenum is based on the study of reproductive and developmental effects in rats published by Fungwa and co-workers (Fungwa et al., 1990). In the study, the animals experienced a constant exposure to molybdenum in their drinking water. This is important because several studies have demonstrated the rapid elimination of ingested molybdenum. For example, molybdenum elimination was assessed in a clinical study in which 4 men consumed a low-molybdenum diet of 22 µg/d (0.23 µmol/d) for 102 d, followed by a high molybdenum diet of 467 µg/d (4.9 µmol/d) for 18 d. During high intake, urinary molybdenum excretion was greater than during low intake. Fractional tissue storage of molybdenum was lower during high intake than during low intake. Low intake results in an adaptation to conserve body molybdenum, and high intake results in an adaptation to eliminate molybdenum (Giussani et al., 2007).

Giussani et al., 2006 also measured the intestinal uptake, systemic kinetics and urinary excretion of molybdenum in 17 healthy human volunteers. Molybdenum was administered in water (up to 5 mg molybdenum in 100 ml), and 0.5 ± 1 mg molybdenum in black tea (100 ml) mg and in vegetables (cress and green salad) and solid food (baby formula, tomatoes, bean soup). The object of the experiments was to develop preliminary information on systemic kinetics of molybdenum in humans. "The main observations were molybdenum was eliminated very rapidly from the circulation. Urinary excretion of molybdenum was intense and rapid in the few hours after incorporation. After 24 h excretion rates were negligible."

Thus, constant exposure is required to maintain elevated body burdens. These elevated body burdens are responsible for the limited reported adverse reproductive effects observed in pregnant female and male rats. Because the toxicity study, which forms the basis of the risk-based water standard, evaluates adverse effects from direct, constant ingestion of molybdenum in the drinking water, the appropriate point of application is the household tap.

The limited studies that indicate adverse health effects are based on constant exposure via drinking water. If adopted, the molybdenum standard should apply at the point of existing or planned surface potable water supply withdrawal, per 25 Pa. Code § 96.3(d).

Environmental Quality Board
March 25, 2008
Page 8

We appreciate the opportunity to submit these comments. If you have any questions or wish to discuss our comments in greater detail, please contact me at (570) 268-5128.

Sincerely,

A handwritten signature in black ink, appearing to read 'Carmen Venezia', written in a cursive style.

Carmen Venezia
Manager, Safety and Environment

Enclosure

Attachment

REFERENCES

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EXHIBIT A



Effects of molybdenum on fertility of male rats

Ratna Pandey* & S.P. Singh

Department of Zoology, University of Lucknow, Lucknow-226007 U.P., India; * Author for correspondence (E-mail: ratmap23.@sify.com)

Received 5 April 2001; accepted 20 June 2001

Key words: enzymes, epididymis, rat, seminal vesicles, sodium molybdate, sperm, testis

Abstract

Sodium molybdate was administered orally to adult male rat at dose level of 10, 30, and 50 mg/kg body weight (5 days per week) for 60 days. At higher dose levels significant decrease in absolute and organ-to-body weight ratios of testes, epididymides, seminal vesicles and ventral prostate was observed. The sperm abnormality, associated with decrease in sperm motility and sperm count was also observed. Significant alterations in the activities of marker testicular enzymes, viz. sorbitol dehydrogenase (decreases), lactate dehydrogenase (increases) and γ -glutamyl transpeptidase (increases) associated with histopathological changes in testes was also observed. Accumulation of molybdenum in testes, epididymides and seminal vesicles was also observed. The study reveals that the oral ingestion of molybdenum may affect the histoarchitecture of testes and sperm morphology. The testicular and spermatotoxic changes may be responsible for observed male mediated developmental toxic effects.

Introduction

Molybdenum is used in manufacture of electric and electronic parts, a wide variety of glass, ceramic, lubricant, dyes, in production of catalyst, pigment and in alloying the steels. Persons get exposed to molybdenum in the weapons industry, aeronautical engineering, chemical industry, automobile industry, mining and refining of this metal (Mills 1987).

Molybdenum is an essential, trace and micronutrient element and play an important role in animal and plant physiology (Schroeder *et al.* 1962; Mills & Davis 1987; Pennington & Jones 1987). Molybdenum is a constituent of at least three mammalian metalloflavoprotein xanthine oxidase, aldehyde oxidase and sulphite oxidase and that of nitrate reductase of plant protein (Schroeder *et al.* 1962; Anke *et al.* 1985). The importance of molybdenum in animal is well recognised. Its antagonistic effects on copper metabolism in ruminants have always attracted much attention (Mason 1986; Mills & Davis 1987). Molybdenum is known to act as an anticarcinogen (Luo *et al.* 1983). Low molybdenum levels in soils, plants, drinking water, food and human tissues may be responsible

for high mortality from oesophageal cancer. In several animal studies molybdenum has been reported to inhibit gastrointestinal cancers (Luo *et al.* 1983). The recent findings have indicated that molybdenum has direct effects on biological processes controlling growth and reproductive performance (Dixon 1986). In the present investigation, the studies have been undertaken to evaluate the effect of orally administered molybdenum on histoarchitecture of different compartments of testes, sperm count, motility and abnormalities in different regions of spermatozoa. The study also describes the bioaccumulation pattern of molybdenum in reproductive organs, effects on enzyme considered to be marker of testicular function and male mediated developmental toxic effects.

Material and methods

Sodium molybdate of AR grade was procured from E-merck. All other chemicals used in study were of the highest purity available.

Table 1. Effect of sodium molybdate exposure on organ weights of rats.

Group	Testis	Epididymis	Accessory sex organs		
			Seminal vesicle	Prostate gland	
I	A	2.50 ± 0.08	0.81 ± 0.01	0.18 ± 0.013	0.11 ± 0.010
	B	1.20 ± 0.03	0.38 ± 0.01	0.08 ± 0.006	0.05 ± 0.006
II	A	2.50 ± 0.03	0.78 ± 0.02	0.17 ± 0.016	0.11 ± 0.006
	B	1.20 ± 0.04	0.37 ± 0.01	0.08 ± 0.008	0.05 ± 0.004
III	A	2.40 ± 0.05	0.50 ± 0.02*	0.09 ± 0.012*	0.09 ± 0.004
	B	1.15 ± 0.03	0.30 ± 0.02*	0.05 ± 0.008	0.04 ± 0.002*
IV	A	2.40 ± 0.03	0.49 ± 0.02	0.08 ± 0.010*	0.05 ± 0.010*
	B	1.15 ± 0.03*	0.32 ± 0.02*	0.05 ± 0.008*	0.03 ± 0.005*

Mean ± SE of requisite number of rat in each group.

* $P < 0.05$ considered to be statistically significant.

A = Absolute body weight/whole animal weight (g)

B = relative (organ to whole animal weight) weight

Group I - Control

Group II - Treated with 10 mg Sodium molybdate kg body weight.

Group III - Treated with 30 mg Sodium molybdate kg body weight.

Group IV - Treated with 50 mg Sodium molybdate kg body weight.

Treatment of animals

Adult male Druckery rats (120 ± 10 g) bred at Industrial Toxicology Research Centre, Lucknow, Animal house colony, were used in the present study. The animals were fed on pellet diet (Lipton India Limited) and water ad libitum, maintained under standard laboratory conditions. The rats were acclimatised for fortnight before oral administration of test chemicals.

The rats were equally divided into four groups consisting of ten animals in each group. The animals of group I were orally administered 0.2 ml of distilled water while rats of group II, III, IV were orally administered 10, 30 and 50 mg sodium molybdate kg body weight, respectively, five days a week for a 60 days. Desired amount of sodium molybdate was dissolved in distilled water and 0.2 ml was orally fed to rats with the help of cannula. The body weights of rats were recorded at the initiation and termination of experiment. The rats were sacrificed by cervical dislocation on 61st day of the experiment. Testes, epididymes, seminal vesicles and prostate glands were quickly removed and weighed.

The tissues (one from each pair) like testis, epididymis and seminal vesicle of rats from each group were used for determination of molybdenum contents. While the

Table 2. Effect of sodium molybdate exposure on motility and total epididymal sperm count of rats treated for 60 days.

Group	Sperm motility (%)	Total sperm count (Per epididymis) $\times 10^7$
I	86.0 ± 2.3	8.0 ± 0.17
II	85.0 ± 1.2	8.2 ± 0.08
III	65.0 ± 1.2*	6.0 ± 0.07*
IV	49.1 ± 1.3*	5.0 ± 0.05

Means ± SE of requisite number of rats in each group.

* $P < 0.05$ considered to be statistically significant.

Group I - Control

Group II - Treated with 10 mg Sodium molybdate kg body weight.

Group III - Treated with 30 mg Sodium molybdate kg body weight.

Group IV - Treated with 50 mg Sodium molybdate kg body weight.

remaining same tissues from same group were used for histopathological and biochemical studies.

Spermatozoa count

Epididymal sperms were obtained by mincing cauda epididymis in normal saline and filtering through nylon mesh. The sperm were counted using Neubauer Chamber (Freund & Carol 1964).

Sperm motility assay

The motility of sperm was assayed microscopically within 5 min following their isolation from cauda epididymis at 37 °C and data were expressed as percent motility (Adelman & Cabil 1936).

Morphological abnormalities

The morphological abnormalities in sperm were enumerated by the methodology as reported by Hemavathi & Rahiman (1993) using light microscope.

Testicular enzyme assay

A portion of testis was homogenised (1:9) in 0.2 M Tris/HCl buffer pH 7.0 having 0.1% cetyltrimethylammoniumbromide (CTNB) using Potter Elvehjem homogeniser for the estimation of sorbitol dehydrogenase (SDH) following the method of Gerlach (1983). In the same homogenate lactate dehydrogenase (LDH) was also estimated (Vassault 1983).

Another portion of testis was homogenised (1:9) in 0.05 M Tris/HCl buffer pH 7.4 for the assay of γ -glutamyl transpeptidase following the methodology of Roomi & Goldberg (1981). Protein contents of the sample were estimated by the method of Lowry *et al.* (1951).

Histological techniques

Testes and other accessory sex organs were fixed in 10% neutral buffered formalin, dehydrated and embedded in paraffin. Sections from each block (5 μ m) were prepared and stained with haematoxylin-eosin following standard procedures (Putt 1972).

Molybdenum analysis

The testis, epididymis and seminal vesicle were soaked on the filter paper and weighed immediately. The tissues were digested twice with the nitric acid and finally with acid mixture of nitric, perchloric and sulphuric acids (2 + 1 + 0.5 ml) (Morrice *et al.* 1989). The digested samples were dissolved in 1% HNO₃ and made upto 5 ml. In the similar fashion acid blanks were prepared. The presence of metal was also checked in the diet and drinking water of animals (normal as well as exposed) and its quantity was 0.011 ng gm and 0.001 ng ml, respectively. The processed and digested samples were analysed on Graphite furnace atomic absorption

spectrometer (Varian GTA-97, SpectrAA-250 Plus).

Recommended operating conditions for the AAS:

Wave length	: 390.3 nm
Lamp current	: 7 mA
Injection volume	: 10 μ l
Fuel	: acetylene
Support for fuel	: nitrous oxide
Flame stoichiometry	: strongly reducing

Male mediated developmental toxicity studies

Twenty male rats of proven fertility, were administered 30 mg sodium molybdate/kg body weight 5 days a week for a period of 60 days. Desired amount of sodium molybdate was suspended in distilled water and 0.2 ml was orally fed to rats with the help of cannula. Similarly twenty male rats were given equivalent amount of distilled water in an identical manner which served as vehicle control. The treated male and non treated female of proven fertility were housed overnight on a 1:2 basis in the home cage of the male. The maximum duration of pairing was 1 or 2 weeks. Positive evidence of copulation was confirmed by the presence of sperm in vaginal smear taken each morning during cohabitation (Dunnick *et al.* 1984). The day on which evidence of copulation identified was termed day zero of gestation. The number of pregnant rats with each sodium molybdate exposed or the control group was recorded for determination of fertility index. On the 20th day of gestation laparotomies were performed and number of corpora lutea were counted and foetuses were removed by uterine opening. The number of live and resorbed foetuses (embryo) and total number of implantation were recorded. Fertility index, pre and post implantation loss were calculated. Foetal weight and crown rump lengths were recorded.

Statistical analysis

The data were statistically analysed using Student's *t*-test (Fisher 1950). *P* < 0.05 was considered significant.

Results

General toxicity

The animals did not show any mortality. Only sluggishness is observed at highest dose level.

Table 3. Effect of sodium molybdate exposure on different types of morphological abnormalities in rats spermatozoa.

Group	Percent abnormalities								Percent total abnormalities
	Head		Neck		Tail				
	Banana	Detached	Curved	Curved	Dent	Round	Loop	Signet	
I	1.0 ± 0.36	1.0 ± 0.16	1.4 ± 0.16	1.5 ± 0.22	1.5 ± 0.42	1.4 ± 0.13	1.0 ± 0.11	0.8 ± 0.30	10.3 ± 0.61
II	1.1 ± 0.16	1.3 ± 0.21	1.6 ± 0.33	1.4 ± 0.21	1.3 ± 0.21	1.6 ± 0.33	1.0 ± 0.32	1.2 ± 0.25	11.1 ± 0.40
III	2.2 ± 0.21*	1.4 ± 0.10*	2.0 ± 0.21*	2.0 ± 0.30*	2.0 ± 0.26*	2.2 ± 0.27	1.4 ± 0.12*	1.5 ± 0.23*	16.1 ± 0.99*
IV	3.1 ± 0.10*	2.5 ± 0.20*	3.7 ± 0.22*	5.3 ± 0.42*	4.1 ± 0.48*	2.5 ± 0.25*	1.6 ± 0.30*	2.0 ± 0.12	23.1 ± 1.40*

* $P < 0.5$ considered to be statistically significant

Mean ± SE of requisite number of rats in each group.

Group I - Control

Group II - Treated with 10 mg Sodium molybdate kg body weight

Group III - Treated with 30 mg Sodium molybdate kg body weight.

Group IV - Treated with 50 mg Sodium molybdate kg body weight.

Body gain profile

The body gain profile is insignificant at any dose level.

Organs weight

The organ weight data is presented in Table 1, there was no significant change in absolute weight of testes and accessory organs at the dose levels tested, however relative weights of testes were decreased at 30 and 50 mg dose level.

Effect on sperm motility, sperm count and morphological sperm abnormality

The results indicate significant dose dependent decrease in sperm motility, total epididymal sperm count (Table 2) and increase in morphological abnormalities (Table 3) in different regions of spermatozoa of rats exposed to 30 and 50 mg sodium molybdate kg body weight. However, such effects were not at the lowest dose of sodium molybdate.

Effect on testicular enzyme activities

The effect of sodium molybdate treatment on the specific activities of marker testicular enzymes associated with specific cell types is presented in Table 4. The results indicate significant decrease in the activity of SDH and an increase in the activities of LDH and γ -GT with different doses of sodium molybdate in a dose dependent manner.

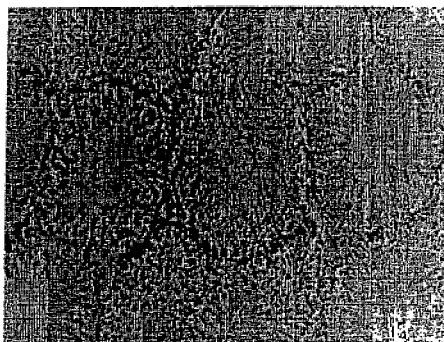


Fig. 1. Control testis shows compact seminiferous tubules, the tubules have well-developed germinal epithelial cells (HE&160).

Histopathological observation

The histological examination of testis obtained from rats treated with lowest dose of sodium molybdate (10 mg kg body weight) showed almost normal structural appearance. However high doses of sodium molybdate caused degeneration of seminiferous tubules in testes. The seminiferous tubules shrank in size resulting in increased intertubular space associated with degeneration of interstitial cells (Figure 1A & B). No more changes were observed in other accessory organs.

Table 4. Effect of sodium molybdate exposure on marker testicular enzymes of rats treated for 60 days.

Enzymes	Group-I	Group-II	Group-III	Group-IV
Sorbitol dehydrogenase	3.92 ± 0.51	3.85 ± 0.62	2.60 ± 0.45 ^o	1.58 ± 0.38 [*]
γ-glutamyl transpeptidase	12.72 ± 1.38	13.72 ± 0.89	24.81 ± 2.57 [*]	35.23 ± 1.33 [*]
Lactate dehydrogenase	250.60 ± 18.50	265.01 ± 15.01	398.01 ± 28.50	516.02 ± 15.52 [*]

Mean ± SE.

^{*} P < 0.05 considered to be statistically significant

Enzyme activities are expressed as specific activities (n moles of substrate oxidised or continue product formed/min/mg protein).

Group I - Control

Group II - Treated with 10 mg Sodium molybdate kg body weight.

Group III - Treated with 30 mg Sodium molybdate kg body weight.

Group IV - Treated with 50 mg Sodium molybdate kg body weight.

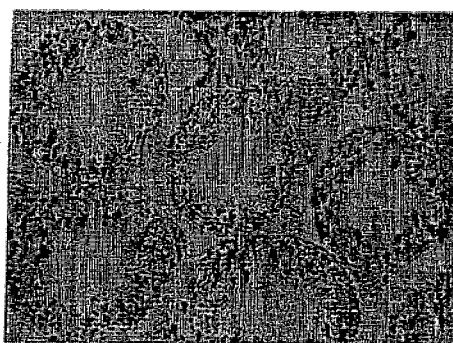


Fig. 2. In treated rats at 50 mg/kg b.wt. intertubular space and loss in spermatozoa (HE&160).

Accumulation of molybdenum

Molybdenum was present in appreciable quantity in the male reproductive organs even in control animals and it is clear that after the oral administration of molybdenum salt at dose of 50 mg kg body weight resulted in significant amount of metal accumulation in testis, epididymis, seminal vesicle and prostate gland (Table 5). No metal accumulation was recorded at lower dose levels.

The degree of accumulation of molybdenum in the male reproductive organs of exposed animals was observed as follows:

Seminal vesicle > Epididymis > Testis > Prostate gland.

Table 5. Distribution of molybdenum in male reproductive tissue of rats.

Tissues	Group I (ng/g)	Group IV (ng/g)
Testis	229.86 ± 2.15	245.57 ± 2.11
Epididymis	315.00 ± 1.99	417.78 ± 2.00 [*]
Seminal vesicle	283.16 ± 2.51	427.43 ± 1.75 [*]
Prostate gland	031.93 ± 1.91	241.65 ± 1.90 [*]

Mean ± SE

^{*} P < 0.05 considered to be statistically significant.

Group I - Control

Group IV - Treated with 50 mg Sodium molybdate kg body weight.

No metal accumulation was recorded in group II and III.

Male mediated developmental toxicity

No treatment related mortality or overt clinical signs of toxicity were observed in the rats during this period. The fertility index of exposed male rats were calculated on their ability to impregnate unexposed female rats. At 30 mg kg body weight dose level fertility index was 60% in comparison to control rats 80%. The number of corpora lutea was calculated in treated and control group, and it was found number of implantation was significantly reduced. The foetal weight was observed 3.70 g in control and 3.65 g in treated group. Grown rump length was found reduced (Table 6).

Table 6. Male mediated embryotoxicity studies with sodium molybdate.

	Group I	Group IV
Number of dams	10.00	10.00
Copora lutea	12.30 ± 0.21	12.00 ± 0.25
Implantation	12.50 ± 0.26	10.30 ± 0.42*
Pre-implantation loss (%)	06.47 ± 1.57	14.92 ± 3.09*
Live foetuses	11.90 ± 0.20	08.80 ± 0.41*
N. of resorptions	00.60 ± 0.16	01.50 ± 0.50*
Post-implantation loss (%)	04.69 ± 0.97	13.80 ± 4.27*
Foetal crown-rump length (mm)	39.30 ± 0.07	30.50 ± 0.04*
Foetal weight (g)	03.70 ± 0.05	02.81 ± 0.03*

* $P < 0.05$ considered to be statistically significant.

Pre-implantation loss (%) = (Corpora lutea-Implantation/Corpora lutea) × 100.

Post-implantation loss (%) = (Implantation-Live foetuses/Implantation) × 100.

No such results were observed in remaining groups of animal.

Discussion

No mortality, in exposed rats, indicates such molybdate does not show acute toxicity at their dose levels. The decrease in body organ weight gain profile (testes, epididymides, seminal vesicles and prostate gland) of rats may be due to cellular loss during the histopathological changes. Weight loss in reproductive organs and accessory reproductive organs are well in accordance to nickel (Pandey *et al.* 1999), sodium selenite (Nebbia *et al.* 1987), carbofuran (Plant *et al.* 1995), quinolphos (Ray *et al.* 1991) and lead (Ronis & Badger 1996).

The studies have shown that the activity of certain enzymes are associated with specific cell type of testis of germ cell maturation (Blackshaw 1970; Hodgen & Sherins 1973; Sherins & Hodgen 1976). The decreased activity of marker testicular enzymes viz SDH, which is known to be associated with germ cell maturation along with increased activity of LDH and γ -GT (the enzymes related with germinal epithelium and Sertoli cell, respectively) indicate damage to these particular cell types of testes by different dose of sodium molybdate in a dose dependent manner. The biochemical alterations in the activities of marker testicular enzymes, associated with specific cell types of testes, indicating testicular damage by sodium molybdate (Pandey & Singh 1999) is well supported with histopathological observations indicating degeneration of seminiferous tubules, disturbed spermatogenesis, increase in intertubular spaces and either few or absence of spermatozoa (Pandey *et al.* 1999). The lumen of tubule is completely devoid of spermatozoa which is also supported by Dixit (1976).

The significant reduction in total epididymal count, the decreased activity of marker testicular enzyme viz SDH is known to be associated with germ cell maturation along with increased activity of LDH and γ -GT (the enzymes related with germinal epithelium and Sertoli cell, respectively) indicate damage to these particular cell types of testes by different dose of sodium molybdate in a dose dependent manner. The biochemical alterations in the activities of marker enzymes, associated with specific cell types of testes, indicating testicular damage by sodium molybdate is well supported with histopathological observations indicating degeneration of seminiferous tubules (Saxena *et al.* 1990), disturbed spermatogenesis and degenerative changes of Sertoli cells. It has been suggested from these that Sertoli cell damage may be responsible for germ cell degeneration (Pant *et al.* 1995; Srivastava *et al.* 1990, 1992).

The significant reduction in total epididymal sperm count and sperm motility, with different doses of sodium molybdate, may be due to sperm toxic effects of molybdenum. The increased percentage of morphological abnormalities, observed in different regions of spermatozoa (Sobti & Gill 1989) following sodium molybdate exposure, may be due to toxic potential of this heavy metal (Pandey & Srivastava 2000).

Exposure of 30 mg sodium molybdate to male rats resulted in decrease in fertility index (Meistrich 1989). Exposed male rats were able to impregnate unexposed female but comparatively in lower number. Many metals such as lead and cadmium have shown deleterious effects on fertility and histopathology of testis. The observed decrease in fertility in males have been attributed to a direct cytotoxic ac-

tion on testes resulting increase in sperm abnormalities (Working *et al.* 1985a). The results from rats dosed with 50 mg sodium molybdate/kg demonstrated significantly decreased organ weights (Davis 1967) while histopathological examination revealed severe effects on spermatogenic cells in the testes and degeneration of seminiferous tubules (Hocy *et al.* 1966) and lumen devoid of spermatozoa. Analysis of sperm from the rats in the 50 mg/kg group further revealed the decrease in epididymal sperm count, poor motility as well as increase in abnormally shaped sperm. These testicular and spermatotoxic changes could have been expected to lead to poor reproductive performance (Oehninger *et al.* 1989; Morales *et al.* 1988). The low implantation observed may be due to damage to spermatogenic cells or aberrations in sperm. Further the decrease in number of implantation suggests that exposure to molybdate induces dominant toxic effects in rats which represents embryonic death (Mathur *et al.* 1978). The foetal loss may occur before and after implant. A decrease in the number of five foetuses observed in post implantation death and decrease in total implantation induced pre implantation death of fertilized ova (Working *et al.* 1985b).

The data suggest that preimplantation loss, may be due to part failure of fertilization due to poor sperm quality and lowered sperm number. The reported testicular and spermatotoxic effects and observed decrease in fertility index and developmental toxicity effect suggest that exposure to sodium molybdate may effect fertility and development of embryo/foetus.

Thus the results of the present study indicate testicular damage and sperm toxic effects of sodium molybdate concomitant with supportive biochemical and histo-pathological alterations in a dose dependent manner. Sodium molybdate has also the potential to cause infertility in male rats through its spermatotoxic influence on its foetus or embryo.

Acknowledgements

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**Summary of Comments by OSRAM SYLVANIA Products, Inc.
to the Triennial Review of Water Quality Standards
Proposed Molybdenum Standard (38 Pa. B. 236 (January 12, 2008))**

OSRAM SYLVANIA Products, Inc. (OSRAM) owns and operates five manufacturing plants in the Commonwealth and employs approximately 2,800 individuals in the Commonwealth. One of the five manufacturing plants is located in Towanda, Pennsylvania, where OSRAM manufactures high temperature metallurgy and inorganic chemicals. The Towanda facility employs approximately 1,000 individuals and is located on the banks of the North Branch of the Susquehanna River.

- 1. There is an insufficient level of concern to human health associated with molybdenum, and in fact the available data suggest that an insufficient intake of molybdenum can have adverse effects on human health. As such, there is no legitimate reason to adopt the molybdenum standard and it should be deleted from the triennial review package.**
- 2. The proposed molybdenum standard did not consider the most recent and technically justifiable toxicological data from 2002 (a copy of which is attached to the comments), and it was calculated improperly. When the proper data and methodology are used, a standard of 5.1 mg/l is calculated.**
- 3. The proposed molybdenum standard is far more stringent than those of EPA and the neighboring states (Delaware, Indiana, Maryland, Massachusetts, New Jersey, New York, Ohio, Virginia, and West Virginia), which do not have a similar standard, and will place Pennsylvania industry at a competitive disadvantage. There is no legitimate basis to impose such unfair conditions on Pennsylvania industry, and in fact is completely contrary to the position that the Department of Environmental Protection (DEP) repeatedly has taken in defense of other matters. As such, the molybdenum standard should be deleted from the triennial review package.**
- 4. The limited studies that indicate adverse health effects are based on constant exposure via drinking water. If adopted, the molybdenum standard should apply at the point of existing or planned surface potable water supply withdrawal, per 25 Pa. Code § 96.3(d).**

March 25, 2008