**Toxicology of Chlorinated Disinfection By-products** 

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#### Introduction



## Personal



## Disinfection of Drinking Water

- Chlorine
- Chloramine
- Ozone
- Ultraviolet Light

#### Disinfection Dilemma

- Raising chlorine concentrations produces higher levels of chlorination by-products
- Removing natural organic matter before chlorination reduces by-product levels
- The high cost of organic removal is a serious economic/political problem
- Chlorine concentration must always be maintained at an adequate level for disinfection until the by-product problem can be solved

#### Exposure and Toxicity

- Health Risk = Exposure x Toxicity
- Exposure = Water consumed x Concentration
- Toxicity = Maximum dose that is safe expressed as ug per kg body weight per day
- VOCs: Ingestion, Inhalation and Dermal absorption

## Factors affecting CDBP levels

- Chlorine concentration
- Contact time
- Level of natural organic matter
- □ pH
- Bromide
- Temperature

## Commonly found CDBPs - 1

- □ Trihalomethanes, CH.X<sub>3</sub>
- □ Chloroform, CH.Cl<sub>3</sub>
- Bromodichloromethane, CH.Cl<sub>2</sub>Br
- Dibromochloromethane, CH.CIBr<sub>2</sub>
- □ Bromoform, CH.Br<sub>3</sub>

#### Commonly found CDBPs - 2

- Haloacetic acids, HAAs
- Monochloroacetic acid, MCA, CI.CH<sub>2</sub>.COOH
- Dichloroacetic acid, DCA, Cl<sub>2</sub>.CH.COOH
- □ Trichloroacetic acid, TCA, Cl<sub>3</sub>.C.COOH
- Brominated acetic acids (6 identified)

## Other minor CDBPs

- Chloral Hydrate, CH, 6.1 ug/L
- Haloacetonitriles, HANs, e.g. Dichloroacetonitrile, 2.9 ug/L
- 1,1,1-Trichloropropanone, 2.7 ug/L

## Typical CDBP concentrations



National Survey of Chlorination Disinfection By-Products in Canadian Drinking Water, Health Canada 1995.

www.hc-sc.gc.ca/hecs-sesc/water/pdf/eng\_pt1.pdf

#### Toxicity review – Animal studies

- Controlled environment
- Accurate doses
- Ethics
- Species differences

# Toxicity review- Human epidemiological studies

- No species differences
- Complex, highly variable environment/lifestyle
- Dose uncertain
- Ethical limitations

## Epidemiological studies - Ecological

- Compare disease rates in different geographic areas
- Many possible causes of different disease rates
- Never conclusive, might give clues
- Inexpensive

#### Epidemiological studies – Case control

- Dose can be more accurately estimated
- Confounders can be controlled if known
- Very expensive can be \$millions
- Still not conclusive

#### Critical health effects

- Literature review of all toxic endpoints
- e.g. neurotoxicity, cancer, reproductive, immunological, etc.
- Endpoint that is shown at the lowest exposure level is chosen for quantitative risk assessment

## Trihalomethanes (THMs) Chloroform

- Chloroform causes kidney and liver tumours in rodents BUT now believed NOT to be due to an affect on DNA
- No evidence of human cancer despite extensive occupational exposure
- The tolerable daily intake (TDI) of 6.2 ug per kg body weight per day is derived from liver toxicity in a dog study
- THMs levels above 50 ug/L have been associated with bladder and colon cancer

### Bromodichloromethane (BDCM)

- Major brominated THM
- Rodent tumours in the intestine, kidney and liver
- Probably genotoxic (i.e. changes DNA)
- Calculated cancer risk at a level of 16 ug/L is 10<sup>-5</sup> (1 cancer per 100,000 people drinking the water for a lifetime of 70 yrs)
- Association between BDCM levels and stillbirth, retarded fetal growth and spontaneous abortion

## Chlorinated haloacetic acids (HAAs)

- Not in current Canadian guidelines but coming soon
- Difficult to measure
- US EPA has regulated HAAs for many years
- Regulations based solely on animal studies since no human data available

#### Monochloroacetic acid (MCA)

- No evidence of carcinogenicity
- No evidence of genotoxicity
- Significant changes in body and organ weights in rats
- TDI of 3.9 ug per kg body weight per day

## Dichloroacetic acid (DCA)

- Liver tumours in rats and mice
- Probable human carcinogen
- A level that gives a 10<sup>-5</sup> cancer risk after a lifetime of exposure is achievable

#### Trichloroacetic acid (TCA)

- Liver tumours in mice
- Peroxisome proliferation casts doubt on relevance of mouse result
- Possible human carcinogen
- TDI of 32.5 ug per kg body weight per day based on liver toxicity in rats

## Chloral hydrate (CH)

- Pituitary tumours in female mice were the only significant cancer effect
- Used as drug for a long time without any apparent cancer effect
- Possible human carcinogen
- TDI of 4.5 ug per kg body weight per day based on the incidence of proliferative lesions in the liver of male mice

## Regulated levels - 1

- THMs, IMAC 0.1 mg/L (proposed MAC 0.1 mg/L based on an annual average of a minimum of quarterly samples taken at the extremities of the distribution system)
- BDCM, No current guideline (proposed MAC 0.016 mg/L based on an annual average of a minimum of quarterly samples taken at the extremities of the distribution system)

## Regulated levels- 2

- HAAs No Canadian guidelines although a proposal from Health Canada is being prepared
- HAA5 (US EPA), MCL 0.06 mg/L (MCA, DCA, TCA, Bromoacetic acid and Dibromoacetic acid)

## Chloral hydrate (CH)

No current guideline

- Risk assessment gave a proposed MAC of 200 ug/L – well above levels seen in drinking water
- No guideline recommended

#### Conclusion

- CDBPs are a significant health risk
- Technological solutions are usually possible
- Need to balance the drinking water risks against other public health issues that require funding
- Adequate disinfection is the number one priority
- Health Canada Drinking Water Web Page www.hc-sc.gc.ca/hecs-sesc/water/index.htm