

Levels of Chlordane, Oxychlordane, and Nonachlor on Human Skin and in Human Blood

Yukio Hirai and Katsumaro Tomokuni

Department of Community Health Science, Saga Medical School, Nabeshima 5-1-1, Saga 849, Japan

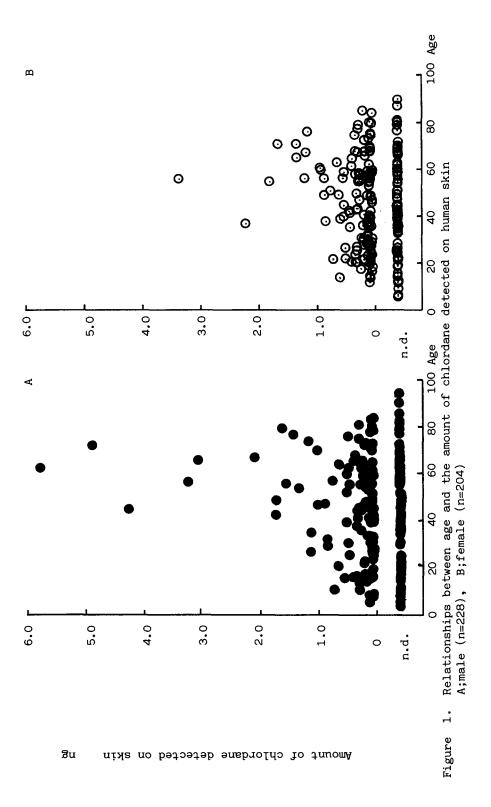
Chlordane had been used as a termiticide for more than twenty years in Japan. The characteristic features of chlordane are that it is stable in an environment such as sediment (Oloffs et al. 1978, Hirai and Tomokuni 1989) and that its bioaccumulation in some species of bacteria, invertebrates, and fish is large (WHO 1984).

Although the use of chlordane was prohibited in Japan in September 1986, chlordane and its related compounds are still detected human body such as in blood and in adipose tissues (Hirai and Tomokuni 1991a, 1991b, Sasaki et al. 1991a). These facts indicate the slow elimination of the compounds from human body (WHO Nomeir and Hajjar 1987, USEPA 1988, Takamiya 1990) and/or successive intake. Wariishi and Nishiyama (1989) observed the progression of chlordane contamination in humans by blood sebum analysis. They concluded that skin lipid might be a unique and available sample source for evaluating direct exposure technical chlordane. Sasaki et al. (1991b) reported that transnonachlor and trans-chlordane in skin lipids was satisfactory for detecting dermal exposure to chlordane and that oxychlordane in skin lipids reflected its accumulation in the body. In the present study, we investigated the levels of chlordane, oxychlordane, and nonachlor on human skin and in human blood. The data obtained are discussed mainly in consideration of age and sex.

MATERIALS AND METHODS

The subjects were outpatients at Saga Medical School Hospital in January to December 1991 (Table 1). The purpose of the present study and the procedures were explained to about 500 of subjects, and informed consent was obtained from 248 of males and from 227 of females to wipe skin surface of antebrachium and/or to use for analyzing rest of the blood utilized for hematological examination. The average weight and height of the subjects were $60.1\pm12.6~\mathrm{kg}$ (mean±standard deviation) (n=244) and $165\pm11~\mathrm{cm}$ (n=241) for males, and $50.0\pm8.3~\mathrm{kg}$ (n=225) and $154\pm8~\mathrm{cm}$ (n=224) for females. The

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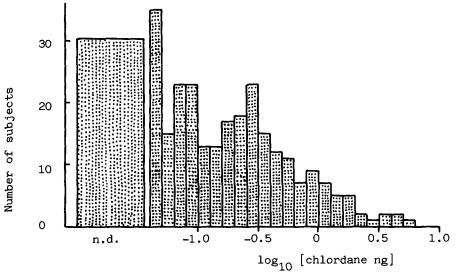


Figure 2. Histogram of the amount of chlordane detected on skin

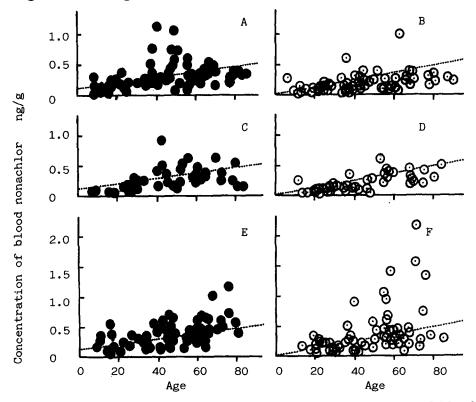


Figure 3. Relationships between age and the concentration of blood nonachlor screened by the amount of skin chlordane detected A,C,E;male, B,D,F;female Skin chlordane:A,B;n.d., C,D;0.04 \leq <0.10ng, E,F; \geq 0.10ng

subjects were different from those in our previous study (Hirai and Tomokuni 1991a) except two males with age of 8.8 and 65.6 and one female with age of 14.4.

Table 1. The number and age of subjects

Sample	sex	n	range	mean age	SD
Skin	male	228	3.7-94.4	46.8	21.0
	female	204	5.8-89.8	44.8	19.7
	total	432	3.7-94.4	45.9	20.4
Blood	male	192	7.4-86.0	46.1	19.9
	female	191	5.8-89.8	45.1	19.3
	total	383	5.8-89.8	45.6	19.6
Skin and Blood	male	177	7.4-86.0	46.1	20.1
	female	1 <i>7</i> 1	5.8-89.8	44.7	19.6
	total	348	5.8-89.8	45.4	19.9

The sampling point and method for skin analysis were selected so as to reduce physical and mental burden on subjects. cotton for skin sampling was washed with 8 ml of acetone-hexane (3:7) and dried before use. Skin surface sample was collected by wiping 25 cm 2 of antebrachium with 2 cm x 2 cm of the cotton soaked with 0.5 ml of 70% ethyl alcohol water solution. The sampling was done once with three strokes of wiping. The cotton was packed into a column (8mm i.d.). The column was eluted 10 ml of acetone-hexane (1:9). The eluate was washed with 2 ml of 2% sodium sulfate solution and distilled water, and dried anhydrous sodium sulfate. The dried solution was concentrated by rotating evaporator into 0.5 ml hexane solution. After clean-up with a silicagel column (Adsorbex SCX(400mg), Merck, FRG), eluate was concentrated into 20-30 µl in a capillary (Hirai and Tomokuni 1987). The method for blood analysis was elsewhere (Hirai and Tomokuni 1991a).

GC-MS was used to determine total amount of *cis*-chlordane and *trans*-chlordane, oxychlordane, and total amount of *cis*-nonachlor and *trans*-nonachlor as described in the report on the levels of these compounds in human blood (Hirai and Tomokuni 1991a). Coefficient of variation of the determination (1ng, n=10) was less than 10%. The recovery of *cis*-chlordane, oxychlordane, and *trans*-nonachlor obtained by adding 1 ng of each standard to cotton was about 50% for the three compounds. Detected amounts are described in the results. Detection limits were 0.04 ng, 0.08 ng, and 0.02 ng for chlordane, oxychlordane, and nonachlor, respectively.

Student's t-test preceded by F test was used to analyze the difference of means.

RESULTS AND DISCUSSION

Chlordane on the skin surface was detected in 132 males with age of 7.4 to 80.4 and in 127 females with age of 11.6 to 84.7. The amounts ranged from 0.04 to 5.76 ng for males and from 0.04 to 3.37 ng for females. Nonachlor was detected in 127 males and in

118 females. The amounts ranged from 0.02 to 1.91 ng for males and from 0.02 to 1.19 ng for females. We could not detect oxychlordane. Calculated regression lines and correlation coefficients between chlordane and nonachlor were Y=0.02+0.34X r=0.99 for males (n=123) and Y=0.01+0.35X r=0.98 for females (n=117), where X, Y, and r are amount of chlordane detected, that of nonachlor, and correlation coefficient. Simple correlation coefficients were statistically significant at 0.001 level. Such a high correlation was observed by Sasaki et al. (1991b). No significant difference was observed between males and females.

Relationships between age and the amount of chlordane detected on skin are shown in Fig. 1. Calculated regression lines and correlation coefficients were Y=0.14+0.0070X r=0.17, Y=0.14+0.0041X r=0.17, and Y=0.13+0.0058X r=0.16, for males (n=132), females (n=127), and total (n=259), where X, Y, and r are age, amount of chlordane detected, and correlation coefficient. The slope for males was larger than that for females. The correlation coefficient was smaller, but significant for total at 0.05 level.

Histogram of skin chlordane is shown in Fig. 2. An obscure peak was observed at higher level than 0.10 ng with a maximum at 0.25 to 0.32 ng. Such a peak was also observed in the histogram of skin nonachlor, where the peak located at 0.10 to 0.12 ng. Medians of the amounts of chlordane detected were 0.06, 0.07, and 0.06 ng for males, females, and total. Medians of skin nonachlor were 0.02 ng for males, females, and total. No remarkable difference was observed in the median levels of skin chlordane and skin nonachlor between males and females.

Table 2. Regression equations for the linear relationship among chlordane, oxychlordane, and nonachlor in human blood (ng/g)

Х	Y	sex R	egression equation	r	n
chlordane	oxychlordane	male female	Y=0.11+0.81X Y=0.07+1.72X	0.36 0.69*	26 25
chlordane	nonachlor	male female	Y=0.57+0.49X Y=0.27+6.16X	0.08 0.71*	26 25
oxychlorda	ne nonachlor	male female	Y=0.44+0.98X Y=0.10+3.19X	0.37 0.92*	26 25

* p<0.001

Blood chlordane was detected in 46 males with age of 10.8 to 80.8 and in 47 females with age of 19.8 to 86.8. The concentration ranged from 0.04 to 0.19 ng/g for males and from 0.04 to 0.24 ng/g for females. Oxychlordane was detected in 54 males with age of 9.3 to 86.0 and in 41 females with age of 11.6 to 86.8. The concentration ranged from 0.08 to 0.47 ng/g for males and from 0.08 to 0.70 ng/g for females. Nonachlor was detected except only one female with age of 28.1. The concentration ranged from 0.02 to 1.16 ng/g for males and from 0.02 to 2.17 ng/g for females. The concentration of 4 males and 8 females were higher than 1.00 ng/g. These subjects were 3.1% of total (n=383). All of chlordane,

oxychlordane, and nonachlor was detected in 26 males with age of 15.6 to 79.3 and in 25 females with age of 35.7 to 86.8. Linear regression equations among these compounds are shown in Table 2. Intercepts were smaller in females than in males. Slopes were larger in females than in males. Correlation coefficients were smaller in males than in females. We suppose from these results the existence of the difference in metabolic rate of these compounds between males and females.

Calculated regression lines and correlation coefficients between age and blood nonachlor were Y=0.12+0.0042X r=0.41, Y=-0.007+0.0063X r=0.43, and Y=0.06+0.0052X r=0.41, for males (n=192), females (n=190), and total (n=382). The correlation coefficients were significant at 0.001 level. Geometric mean concentrations were 0.26, 0.20, and 0.23 ng/g for males, females, and total, respectively. The sex difference was significantly detected at 0.001 level (t=3.35).

Table 3. The levels of blood nonachlor (ng/g) screened by the amount of skin chlordane detected (ng)

Skin ch	lordane	sex	n	age mean(SD)	Blood nonachlor g. mean (-SE,+SE)
n.d.		male female	72 63	45.8(20.6) 43.9(20.5)	0.24(0.22,0.26) 0.15(0.14,0.17) **
0.04≦	<0.10	male female	42 44	45.3(20.6) 42.8(19.8)	0.22(0.19,0.24) _] *
<u>≥</u> 0.10		male female	63 64	46.8(19.1) 46.8(18.2)	0.33(0.31,0.36) 0.27(0.24,0.30)

^{**} p<0.001 t=3.56, * p<0.10 t=1.85

Figure 3 shows the relationships between age and nonachlor concentration in human blood screened by the detected amount of skin chlordane. Dotted lines show the regression lines for males (n=177) (Fig. 3 A,C,E) and females (n=170) (Fig. 3 B,D,F). were some subjects with age of 30 to 50 at the groups of lower level of skin chlordane (Fig. 3 A,B) whose blood nonachlor were markedly higher than the level of the regression lines. number was larger in male than in female. No apparent increase in concentrations of blood nonachlor was accompanied by the increase in the level of skin chlordane (Fig. 3 C,D). Somewhat increase in concentrations of blood nonachlor was observed at the groups higher level of skin chlordane (Fig. 3 E,F) especially in females of age between 50 to 80. There were some boys and girls whose nonachlor concentrations in blood were as high as the level of middle age.

The geometric mean levels of blood nonachlor screened by the detected amount of skin chlordane are shown in Table 3. The level was higher in males than in females in every group. The sex difference was larger in the groups of the subjects with lower level of skin chlordane, especially in the n.d. groups where the significance was at 0.001 level. The increase in the levels of blood nonachlor at the groups of higher level of skin chlordane

may be explained by the direct exposure to nonachlor in the subjects of higher levels of skin chlordane as reported by Wariishi and Nishiyama (1989), and Sasaki et al. (1991b).

Table 4. Regression equations for the linear relationship between the amount of chlordane or nonachlor detected on human skin (ng), and concentration of chlordane, oxychlordane, and nonachlor in human blood (ng/g)

Х	Y	sex	Regression equation	r	n
Skin	Blood	male	Y=0.07+0.0005X	0.02	33
chlordane	chlordane	female	Y=0.05+0.043X	0.47**	31
Skin	Blood	male	Y=0.13+0.022X	0.38*	32
chlordane	oxychlordane	female	Y=0.13+0.061X	0.37*	39
Skin	Blood	male	Y=0.31+0.19X	0.29**	97
nonachlor	nonachlor	female	Y=0.17+1.10X	0.58***	100

*** p<0.001, ** p<0.01, * p<0.05

Table 4 shows the linear relationships between the amount of chlordane or nonachlor detected on human skin and the concentration of chlordane, oxychlordane and nonachlor in human blood. Intercepts were higher in males than in females with respect to the correlation between skin nonachlor and blood nonachlor. Slopes were larger in females than in males. Correlation coefficients were larger in females than in males except the relationship between skin chlordane and blood oxychlordane.

The levels of skin chlordane and nonachlor, and blood nonachlor as determined monthly are shown in Table 5. The level of chlordane was minimum in March and maximum in July. The level of blood nonachlor was maximum in January and minimum in Fluctuation (maximum/minimum) of the monthly level was about four for skin chlordane and nonachlor, and it was about two for blood nonachlor. Mean temperature is minimum in January to February and maximum in August. We have a rainy season in June to July. relative humidity is minimum in February to March and maximum in Most people wear clothes with half-length sleeves June to July. in July to September. The level on skin and in blood affected partially by the temperature and the relative humidity, by Wariishi by the clothes as has been pointed out Nishiyama (1989). No apparent correlation was observed between the monthly levels of skin chlordane and blood nonachlor, nonachlor and blood nonachlor.

The peak observed in the histogram of skin chlordane as well as the component of skin chlordane and nonachlor suggest the existence of direct exposure to chlordane residues. About 38% (163/432) of subjects was included in the peak with the level of 0.1 ng or higher (Fig. 2). From the rate we assume they are exposed to chlordane residues in the house where they live in. The main origin of chlordane, oxychlordane, and nonachlor detected in the blood of the other subjects may be food (Matsumoto et al. 1987, Taguchi et al. 1989) or water. There was more than 50 times

Table 5. The levels of chlordane and nonachlor on human skin (ng), and nonachlor in human blood (ng/g) as determined monthly

Month Sampling period	sex	n	age mean(SD)	Skin chlordane median	Skin nonachlor median	Blood nonachlor g.mean(-SE,+SE)
January 7–11	male female total	17 12 29	53.2(17.3) 44.0(21.3) 49.4(19.6)	0.07	0.09 0.03 0.05	0.34(0.29,0.39) 0.25(0.21,0.31) 0.30(0.26,0.34)
February 4–8	male female total	17 18 35	47.7(17.5) 37.7(18.1) 42.5(18.5)	0.06	n.d. 0.02 n.d.	0.26(0.22,0.30) 0.21(0.18,0.24) 0.23(0.21,0.26)
March 4-7	male female total	10 14 24	46.1(24.8) 49.0(18.9) 47.8(21.6)	n.d.	n.d. n.d. n.d.	0.27(0.19,0.36) 0.19(0.15,0.24) 0.22(0.18,0.26)
April 9-12	male female total	15 13 28	43.2(20.6) 46.7(18.6) 44.8(19.8)	0.08	n.d. 0.03 n.d.	0.26(0.22,0.30) 0.23(0.18,0.29) 0.24(0.21,0.28)
May 13-16	male female total	19 17 36	43.0(18.0) 40.0(21.1) 41.6(19.6)	0.07	0.02 0.03 0.02	0.21(0.17,0.26) 0.20(0.15,0.26) 0.21(0.17,0.24)
June 10–14	male female total	13 22 35	49.0(18.5) 43.3(15.7) 45.4(17.0)	0.05	0.03 0.02 0.02	0.36(0.31,0.40) 0.17(0.15,0.20) 0.23(0.20,0.25)
July 8-11	male female total	17 15 32	44.6(21.3) 47.4(19.4) 45.9(20.5)	0.07	0.02 0.03 0.03	0.21(0.18,0.25) 0.11(0.08,0.15) 0.16(0.13,0.19)
August 5-8	male female total	14 20 34	42.7(20.3) 40.9(19.3) 41.6(19.8)	0.08	0.02 0.03 0.03	0.23(0.20,0.26) 0.20(0.18,0.23) 0.21(0.19,0.23)
September 9-12	male female total	14 14 28	48.0(22.0) 50.0(23.1) 49.0(22.6)	0.09	0.03 0.04 0.03	0.28(0.23,0.34) 0.20(0.16,0.25) 0.24(0.21,0.27)
October 14-17	male female total	22 11 33	47.5(19.2) 53.1(14.7) 49.4(18.0)	0.08	0.03 0.03 0.03	0.28(0.24,0.33) 0.25(0.20,0.31) 0.27(0.24,0.31)
November 11-12 14-15	male female total	9 8 17	47.1(22.5) 47.8(12.9) 47.4(18.6)	0.09	n.d. 0.04 0.02	0.22(0.18,0.28) 0.16(0.12,0.23) 0.19(0.16,0.24)
December 9-13	male female total	10 7 17	37.9(16.8) 45.8(24.1) 41.2(20.5)	n.d.	0.03 n.d. 0.02	0.28(0.23,0.33) 0.15(0.13,0.18) 0.22(0.19,0.25)

difference in the levels of blood nonachlor in the subjects with non detectable levels of skin chlordane.

Further investigations are in progress to elucidate the levels of chlordane, oxychlordane, and nonachlor in human.

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