

Why Inteon?





Paraquat is primarily absorbed via the small intestine



Alginates in Gramoxone Inteon

Natural gelling agents (Seaweed extract)

• Commonly used in food and pharmaceutical industries

> Acid triggered gelling

- Immediately forms into a gel only at very low pH (e.g., 1 3)
- Gel minimizes/slows dispersion and passage into the small intestines
 - Allowing more time for emetic to work
 - Providing more productive emesis
- Does not adversely effects agricultural performance





Gramoxone Inteon

An improvement in oral toxicity - experimental evidence



Formulation Terms Used

| Gramoxone | 200 g/l | Non Inteon | Global, not reg. in US | | |
|--------------|---------|------------|---------------------------|--|--|
| Gramoxone US | 360 g/l | Non Inteon | US Voluntary cancellation | | |
| Inteon | 200 g/l | Inteon | Global, not reg. in US | | |
| Inteon US | 240 g/l | Inteon | Registered in US | | |



SYNG-PQ-00237850



SYNG-PQ-00237851

Evidence in the dog – existing non-Inteon Gramoxone baseline

Gramoxone data based on 200g paraquat/l with built in wetters

Widdop et al (1977) - literature - showed mortality at 10mg paraquat/kg

➢ 6/6 dogs died

11

plasma kinetics measured

Syngenta data (1988) confirmed median lethal dose (MLD) in dog to be 12mg paraquat/kg for Gramoxone formulation

plasma kinetics measured

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Evaluation Patragrage # 1000 pations

Plasma paraquat following an oral dose of paraquat



Gramoxone: peak plasma paraquat levels in dogs (existing data - 1988 study)



Evaluation of paraquat absorption from formulations Paraquat Absorption in the Dog

Plasma paraquat following an oral dose of Gramoxone INTEON 8-64mg/kg paraquat ion



Gramoxone control data was generated at CTL between 1987 and 1991. Mean of 7 independent groups of dogs (n = 3 each). The blood levels shown (in black) are well tolerated in this species with no acute toxicity.

How does this relate to a lethal dose in dogs? This is kinetic study but we use a criteria of a peak plasma paraquat level of 10µg/ml or a 24 hour AUC of 40 µg/ml /h as the criteria for humane termination of test animals since it would lead to overt toxicity.

Evaluation of paraquat absorption from Inteon formulations



Clear evidence of Inteon US safening in the dog

All dogs survived Inteon US doses at 32, 64 and 128 mg paraquat ion/kg

The peak paraquat plasma concentration following dosing with Inteon US at 128 mg/kg was similar to that following dosing with Gramoxone at 8 mg/kg

Suggested an approximate 10X improvement in oral toxicity in dog with Inteon and Inteon US compared with non-Inteon Gramoxone

16













Clear evidence of Inteon US safening in the dog

≻All dogs survived doses of Inteon US up to 128 mg/kg

Even at 128mg/kg, the plasma paraquat level indicated limited paraquat absorption

The data indicate a clear expected reduction in toxicity with Inteon US compared with existing non-Inteon Gramoxone formulations

Further studies to allow a better quantitative estimate of the level of reduction in toxicity of the Inteon formulations are being planned

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Main study elements

Objective

Formulations to evaluate

Study details

Study placement

Timing

25

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Main study elements

Objective

Objective for single oral dose studies over a range of formulation doses

- Determine kinetic data on paraquat absorption
- Determine acute toxicity (lethality) minimum lethal dose





SYNG-PQ-00237869

Formulations to evaluate

| | Non-I | nteon | Inteon | | |
|---------------------------|---|--------|---------------------------|-------------------------------|--|
| | US Global Gramoxone Gramoxone Max | | US Gramoxone Inteon | Global Gramoxone Inteon | |
| Paraquat Concentration | 360g/l | 200g/l | 240 g/l | 200g/l | |
| Emetic Concentration | 0.5g/L | 0.5g/L | 1.5g/L | 1.5g/L | |
| Built In Wetters | No | Yes | Νο | Νο | |

Main study elements

Study details

Both sexes required?

• Use a single sex; use males

Aim of study: LD50 number or minimal lethal dose

 Determine the shape of the kinetic curve for paraquat absorption together with the minimum lethal dose.

Numbers of animals per dose level

• Proposed to use 4.

Rising doses or concurrent group dosing

• Use rising doses, moving up when reasonable confirmation of the toxicity of the first dose is available (likely 48 hours). Fresh animals per dose level

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Main study elements
  Study details
  Dose levels: number and actual levels
                             Plan for 8, 16, 32 as initial doses
  Non-Inteon (USA):
  Non-Inteon (Rest of World): Plan for 4, 8, 16 as initial doses
  Inteon (USA & Rest of World): Plan for 64, 128 as initial doses
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30
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SYNG-PQ-00237872

Main study elements

Study details

Means of oral dosing

• Dose by capsule

Endpoints to measure

• As currently done in CTL* - Plasma paraquat kinetics (peak/AUC); clinobs; bodyweight; full gross macropathology; histopathology (incl lungs, kidneys, GI tract)

Endpoint thresholds for requiring termination

- Clinobs or bodyweight thresholds exceeded (detailed limits to be confirmed)
- Measurement of paraquat absorption to be done in real time to advise clinobs frequency

Source of dogs - parity to existing Inteon data

• Beagles of similar weight range to CTL studies (10-12kg). Control potential stress and GI tract factors such as worming, diet, housing

Analysis - parity to existing sensitivity/specificity

 Method validation for PQ analysis in advance on spiked plasma and confirmation the same as results obtained in CTL

Histopathology

• Return tissues as wet tissues or blocks to CTL for histopathology analysis

31

*CTL: Central Toxicology Laboratory

Main study elements

Study placement

Laboratory for conducting study

• To be determined

Monitoring of study

• Study monitors with first-hand experience of these studies

Timing

32

Planning for animal arrival December

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Main study elements: Humane termination criteria

- Excessive weight loss and/or extreme emaciation
- Prolonged absence of voluntary responses to external stimuli
- Prolonged anorexia
- Severe dehydration
- Evidence to suggest irreversible organ failure
- Persistent, difficult, laboured breathing
- Prolonged diarrhoea

33

- Significant and sustained decrease in body temperature
- Other treatment related effects judged to be indicative of impending death

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Scientific Governance

Steering Group

Responsible for all aspects of the design and conduct of the survey (data capture, analysis, interpretation and reporting)

Dr M Wilks (PI) Prof R Fernando Prof PL Ariyananda Dr M Eddleston Dr J Tomenson Mr D Berry

Scientific Advisory Group

To advise the Steering Group on the scientific aspects of survey design, conduct and interpretation

Prof A Dawson (chair) Prof N Buckley Dr S Jayamanne Prof D Gunnell Prof K Hawton



Commitment to publish results

'Syngenta commits to present and publish data from the survey in appropriate scientific venues and journals, and will ask the Steering Group to form the core authorship of any future publication of the survey in the scientific literature, seeking the advice and contribution of the Science Advisory Group as appropriate.'



It was an important consideration for the study team and SAP that Syngenta committed to publish the results of the survey.

37

Survey outline

Objective

- Initially, set up to investigate circumstances of paraquat self-harm incidents
 - Amount ingested; time from exposure to treatment; body weight; time to death ; follow up of survivors after discharge from hospital
- Objective modified to compare the outcome of poisoning cases following the introduction of INTEON[®] with the standard paraguat formulation.
 - Analytical marker was added to INTEON[®] to differentiate between old and new formulations

SYNG-PQ-00237881



SYNG-PQ-00237882

Mortality rates of poison admissions at Anuradhapura General Hospital, Sri Lanka (2.4.02 – 13.1.03)

| | # Admissions | # Deaths | Mortality Rates (%) | | |
|--------------------|--------------|----------|---------------------|--|--|
| Oleander | 350 | 25 | 7.1 | | |
| Organophosphate | 277 | 39 | 14.1 | | |
| Other Pesticides | 141 | 6 | 4.3 | | |
| Medicines | 101 | 1 | 1.0 | | |
| Carbamates | 57 | 4 | 7.0 | | |
| Hydrocarbons | 44 | 0 | 0 | | |
| Paraquat | 45 | 21 | 46.7 | | |
| Unknown | 56 | 3 | 5.4 | | |
| Unknown Pesticides | 93 | 9 | 9.7 | | |
| Organochlorines | 5 | 3 | 60.0 | | |
| Acid | 3 | 0 | 0 | | |
| Alkali | 4 | 0 | 0 | | |
| TOTAL | 1176 | 111 | 9.4 | | |
| | | | | | |

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40

Sri Lanka Observational Monitoring Survey - overview

- > 9 hospitals involved
- > ~ 350 Gramoxone cases (06/03 08/04)
- > Introduced Inteon 09/04, later discovered formulation separation problem
- Closed to new cases 01/26/06, at that time 224 confirmed INTEON ingestions (predominantly intentional)
- Criteria for survival: patient alive 3 mo. after release from hospital - end 04/06
- > Independent experts met May 2006
- > Summary of findings available

41



Survey methodology

Data collected from 9 hospitals

ACCESS questionnaire

Key Parameters

- Amount ingested; time of exposure, time to treatment. Outcome and treatment. Use of Fuller's Earth/charcoal
- Differentiation between Gramoxone and INTEON[®] formulation
- Plasma paraquat concentration
- Vomiting data

42

- Body weight, sex, age
- Follow-up of survivors

Power calculation: 210 cases with ingestion of standard product and 210 with INTEON[®] would give 90% power to detect a x 2-fold reduction in toxicity

Survival by amount ingested

| Amount Ingested | Old Product | | | Confirmed or Probable Inteon | | | |
|--------------------|-------------|---------|-------|------------------------------|---------|-------|--|
| | | (n=297) | | | (n=289) | | |
| | Alive | Unknown | Total | Alive | Unknown | Total | |
| < 5 mls | 26 (70.3%) | 2 | 37 | 22 (68.8%) | 1 | 32 | |
| 5-10 mls | 6 (33.3%) | 0 | 18 | 17 (68.0%) | 0 | 25 | |
| 10-15 mls | 7 (29.2%) | 0 | 24 | 19 (44.2%) | 0 | 43 | |
| 15-30 mls | 4 (12.9%) | 1 | 31 | 18 (40.9%) | 2 | 44 | |
| 30-50 mls | 2 (9.1%) | 0 | 22 | 6 (20.0%) | 1 | 30 | |
| 50-100 mls | 1 (3.8%) | 0 | 26 | 5 (16.1%) | 0 | 31 | |
| 100-150 mls | 1 (4.0%) | 1 | 25 | 1 (7.1%) | 0 | 14 | |
| > 150 mls | 0 | 0 | 38 | 1 (3.6%) | 0 | 28 | |
| Unknown | 29 (38.2%) | 2 | 76 | 13 (31.0%) | 0 | 42 | |
| Total | 76 (25.6%) | 6 | 297 | 102 (35.3%) | 4 | 289 | |

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43

Summary and Conclusions

Summary

The overall survival rate is increased from 25.3% to 35.2% - this is considered clinically significant

All stats analysis indicated that this was a real difference between the two products. The overall reduction in toxicity was approximately 2-fold

The correlation between amount ingested and survival was strong

Patients who have a lethal ingestion of product survive longer with Inteon, allowing more opportunities for intervention medicine

Conclusion

The survey has shown that Inteon® technology significantly improves the survival of patients following paraquat ingestion despite the lack of an optimized formulation



Reporting: Current status

- Presentation made to Asia Pacific Medical Association Meeting in Sri Lanka (5-8 August 2006)
- Draft publication in progress

45

- Expected draft for early November, then review by Science Advisory Group (SAG)
- Approval for release by SAG in November earliest but dependent on agreement and any additional data manipulation required

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Introduction of Inteon ®

Inteon ® introduced into Sri Lanka Sept 2004. Old product actively removed from distributors and wholesalers.

No change in product label; slightly thicker product due to different surfactants – slightly improved efficacy

Challenges with quality control of formulated product – screening of product to ensure product meets minimum criteria to deliver anticipated safety.



- ¶ When left undisturbed, slight phasing of ingredients resulting in surfactant rich top layer with reduced paraquat concentration. Fully homogenised on inversion.
- ¶ Alginate associated with lower, paraquat rich (surfactant poor) layer
- ¶ Emetic associated with upper, lower paraquat layer
- ¶ Increased QC to address possibility of drinking from top layer – increased surfactant would give increased pq absorption
- ¶ Only batches that met acceptable profile of paraquat and coformulants were released for the Sri Lanka market – resulted in approx 50% batches being rejected for use
- ¶ Batches air-freighted to Sri Lanka to maintain market commitments



Requirement for use of the dog and issues arising

 Inteon technology requires vomiting as essential for realizing the safety potential

•The dog is a vomiting species

50

- •The dog has good similarity to humans in regard to the stomach and GI tract
- •Need to minimize the use of animals

•Need to minimize the toxicity induced in dogs but retain an evaluation of Inteon against current non-Inteon Gramoxone formulations

•Utilize existing data where possible and non-lethal end-points



This chart shows the blood levels of PQ following an oral dose of 200g paraquat ion/l formulation as either Gramoxone or the AWT formulation (A3879BU) in the adult male dog over a range of dose levels.

As with human ingestion (suicide attempts) the increase in dose is achieved by administration of increasing volume and therefore the dose of any component in the formulation would be increased as the dose of paraquat increases, mg/kg bw.

The AWT formulation under identical conditions of dosing etc. caused no toxicity over the dose range 40-320mg formulation per kg bodyweight. There was no toxicity in any animal and no effect on kidney or liver function.

The additional gel, emetic and purgative is more than compensating for the extra PQ given. Consistent with acid triggered gelling in the stomach, the formulation remaining in the stomach longer and more productive emesis. (More of the dose being removed from the body prior to the dose reaching the small intestines.

Emesis occurred at approximately 53mins – low dose and approximately 25 mins high dose.

[Gramoxone contains 0.5g/l emetic, whereas A3879BU contains 1.5g/l, but it is the effectiveness of the emetic and gelling which is important rather than the level of emetic per se.]

Gramoxone control data was generated at CTL between 1987 and 1991. Mean of 7 independent groups of dogs (n = 3 each). The blood levels shown (in black) are well tolerated in this species with no acute toxicity.

How does this relate to a lethal dose in dogs? This is kinetic study but we use a criteria of a peak plasma paraquat level of $10\mu g/ml$ or a 24 hour AUC of 40 $\mu g/ml$ /h as the criteria for humane termination of test animals since it would lead to overt toxicity.

Page 51

Evidence in the dog - background

These data provide the rationale for not testing Gramoxone at doses greater than 8 mg/kg (sub-lethal)

Higher doses of Gramoxone (e.g., 16, 32, 64, and 128 mg/kg) doses would be expected to result in mortality







SYNG-PQ-00237899

- The analytical profile of bottom phase is very similar to US formulation
- NB no visual difference between homogeneous and separated formulation (recall demonstration), even in clear packs and sales packs are essentially opaque (recall demonstration)

Inteon formulation in Sri Lanka: Plasma Paraquat Levels in Dogs



Status of the Inteon formulation used in Sri Lanka

Separated Inteon formulation A3879BU

- \checkmark It is safer than Gramoxone
- ✓ Not as safe as homogenous Sri Lankan Inteon formulation (A3879BU)

✓ Not as safe as the Inteon US formulation (A7813K)
 Inteon US does not separate

Syngenta Locking up chemicals to prevent deliberate self-harm: A feasibility study in Hettipola and Lunugamvehera Sri Lanka

A Secure Access project

Visit notes David Scott March 05







the project

Conceived by Sumithrayo with support from CIC and Syngenta

>working together to reduce suicide from drinking CPPs by implementing secure access on small holdings

>100 metal boxes distributed in 2 areas 2 villages per area –each box cost 2500 rupee

>safety messages on each box – "talk to a friend....."

The Sumithrayo volunteer network introduced the project and obtained community agreement to implement

>boxes distributed via a lottery system to willing families thought to have "at risk" members

>some boxes with 1 lock some with 2 locks with separate keys

Sumithrayo checking on use, experiences and impact of the boxes

2 padlocks on this box





Skin Irritation Comparisons Inteon US vs Gramoxone Oedema scores **Oedema Scores:** 0 No oedema 4 1 Very slight (barely **Mean Oedema Score** 3.5 perceptible) 3 2 Slight (edges of area 2.5 Inteon US defined by definite 2 - Graomxone 1.5 raising) 1 3 Moderate (raised 0.5 approx 1mm) 0

28

31

21

14

2

1

3

3

7

Day of study

4 Severe (raised >1mm and extending beyond exposure area

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SYNG-PQ-00237908

