Environmental effects of estrogens - xenoestrogens

Dr. Stavroula A. Paschou, MD, PhD Specialist in Endocrinology and Diabetes

Division of Endocrinology and Diabetes, "Aghia Sophia" Hospital Medical School, National and Kapodistrian University of Athens, Greece and School of Medicine, European University Cyprus, Nicosia, Cyprus

Lecture Diagram

- Definitions
- Environmental Sources
- Actions
- Main Male Problems:
- 1. Hypospadias
- 2. Cryptorchidism
- 3. Testicular cancer
- 4. Semen quality
- 5. Prostate Cancer
- Conclusion

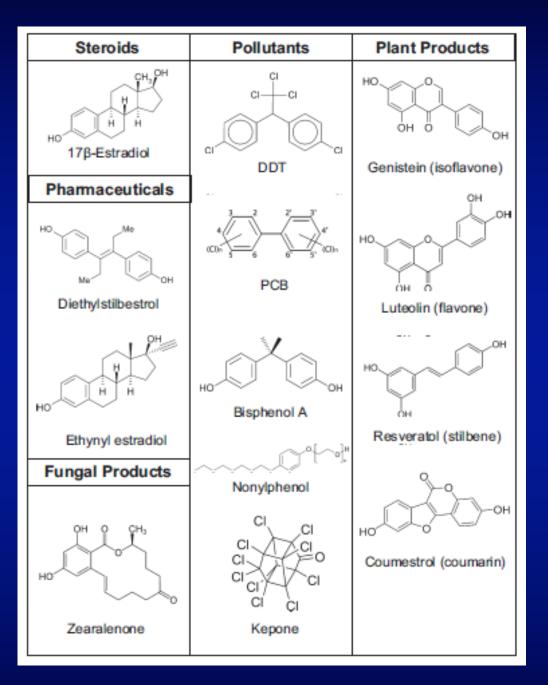
Environmental estrogens - xenoestrogens

- Molecules with identified estrogenic activity (estrogen mimics), primarily through Estrogen Receptor activation:
- 1. Natural chemicals found in human and animal food.
- 2. Synthetic chemicals used as industrial products and their byproducts.

Part of the broader Endocrine Disruptors Group

"An endocrine-disrupting compound" is defined as an exogenous agent that interferes with the synthesis, secretion, transport, binding, action or elimination of natural hormones in the body that is responsible for the maintenance of homeostasis, reproduction, development and/or behavior"

Estrogens - Xenoestrogens



Environmental Sources

- 1. Phytoestrogens: soya, cereals, nuts
- 2. BPA: polycarbonate plastics, plastic toys and bottles, lining of food cans
- 3. DDT: contaminated water, soil crops, fish
- 4. *DES*: pharmaceutical
- 5. *EE2*: oral contraceptives, contaminated water and food
- 6. PCBs: contaminated air and food, skin contact with old electrical equipment
- 7. *Phthalates:* contaminated food, PVC plastics and flooring, personal care products, medical devices and tubing

Everywhere!















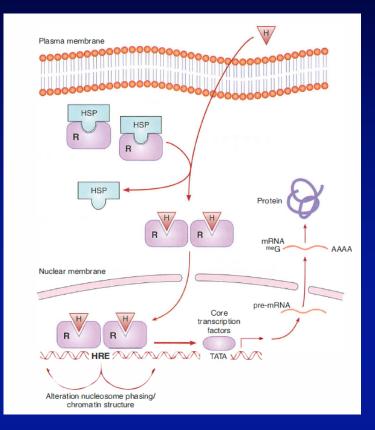


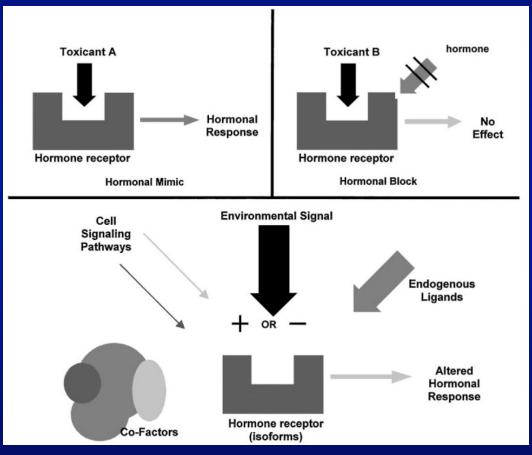




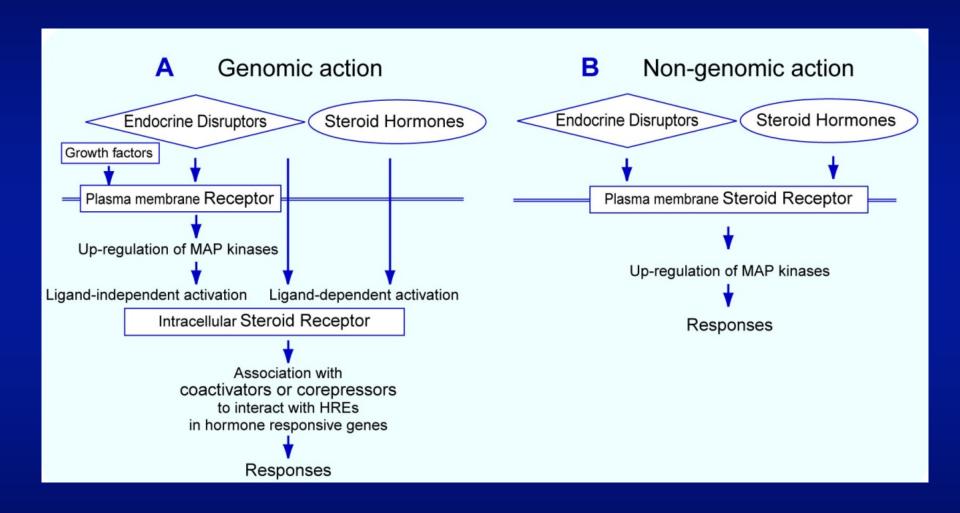
General mechanisms of action

- A. Binding to and activation of a receptor
- B. Binding to and non-activation of a receptor (anti-hormone)
- C. Binding to other receptors
- D. Modification of the receptor number
- E. Modification of hormones metabolism
- F. Interactions with transport proteins





Genomic and non-genomic actions

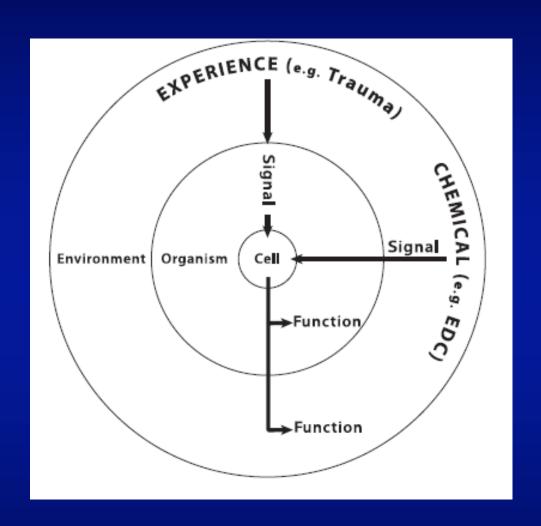


Epigenetic Effects

Heritable changes in gene expression that are not due to changes in DNA sequence:

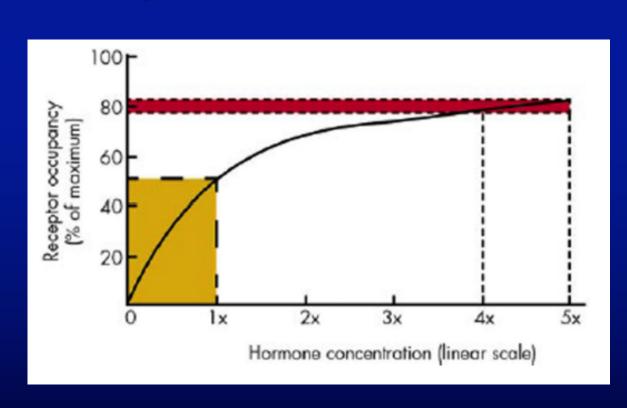
- ✓ Methylation of cytosine residues on DNA
- ✓ Post-translational modification of histones
- ✓ Altered microRNA expression
- When EDCs introduce epigenetic changes during early development, they permanently alter the epigenome in the germline and the changes can be transmitted to subsequent generations.
- When EDCs introduces epigenetic changes during adulthood, the changes within an individual occur in somatic cells and are not permanent or transmitted to subsequent generations.

- ✓ In some cases, the environmental chemical is itself the signaling molecule.
- ✓ In others, an environmental factor stimulates internal signaling systems.
- ✓ In either cases, the signal elicits a functional change in the cell or organism.



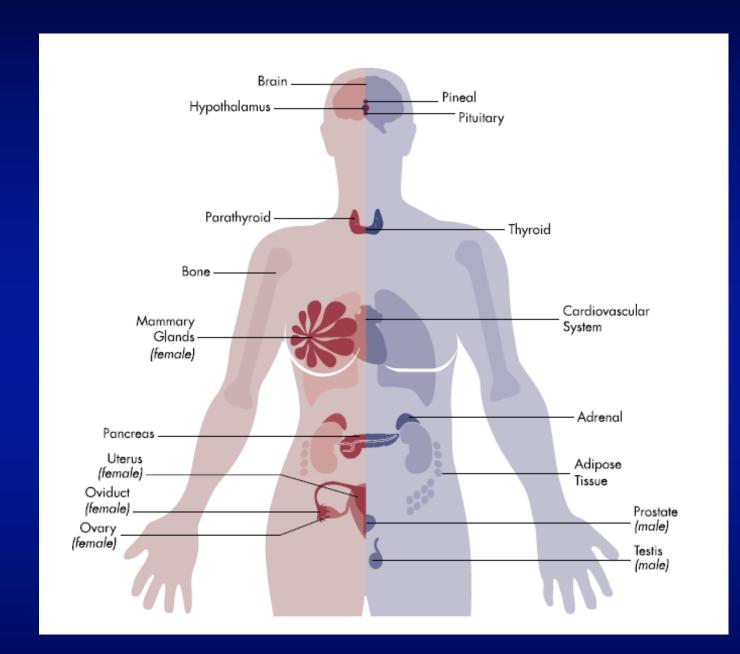
Dose-response characteristics of EDCs

- Receptor characteristics
- ✓ Ligand characteristics
- ✓ Non-linear response pattern
- Differences in tissues/cells sensitivity
- ✓ Differences between:
- toxicology studies
- human studies
- animal studies
- ✓ Difficulties:
- potency
- thresholds
- kinetics



Key issues to consider

- ✓ Diverse sources of exposure, which vary widely around the world.
- ✓ Some EDCs have long half-lives, do not decay easily, they may not be metabolized, or may be metabolized into more toxic compounds.
- ✓ EDCs are usually mixtures with different effects, occasionally additive or even synergistic.
- ✓ Susceptibility to EDCs may vary according to genetic polymorphisms.
- ✓ Latency periods
- ✓ Trans-generational effects



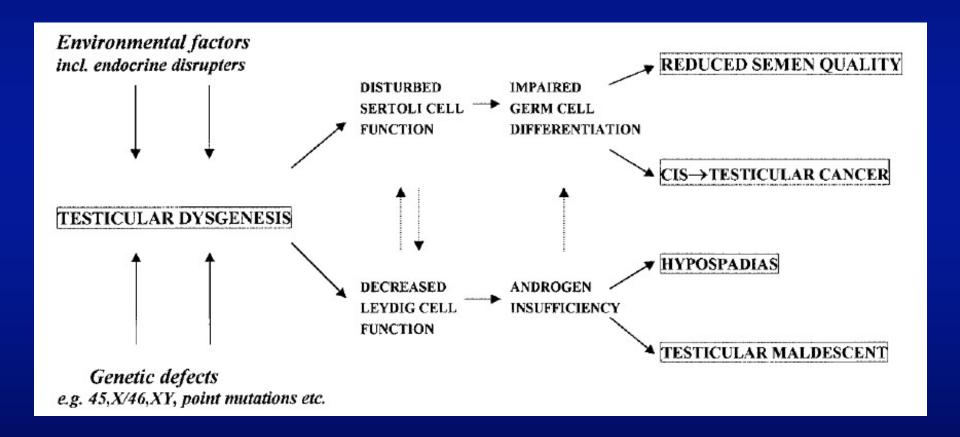
Epidemiological Observations in Humans

- I. Decrease in male reproductive parameters such as semen quality and Leydig cell function (*Carlsen et al 1992, Giwercman et al 1993, Irvine et al 1996, Swan et al 2000, Jørgensen et al 2012, Andersson et al 2007, Clementi et al 2008*).
- II. Increase in male disorders, such as hypospadias, cryptorchidism and testicular germ cell cancer (Giwercman et al 2007, Skakkebaek et al 2001).
- III. Increase in exposure to EDs such as pesticides, insecticides, persistent organic pollutants (POPs), perfluorinated chemicals (PFCs), polychlorinated biphenyls (PCBs), phthalates, bisphenol A (BPA) and heavy metals (Clementi et al 2008).

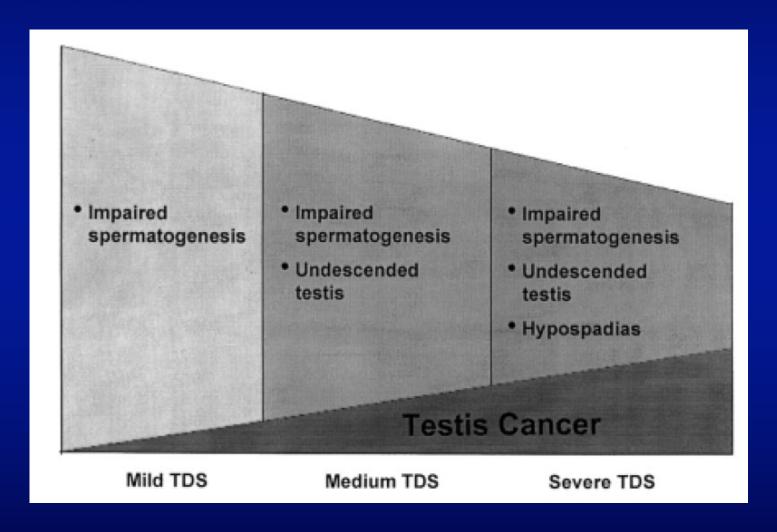
Experimental Studies in Rodents - Exposure to BPA, phthalates and alkylphenols

- I. Developmental genitourinary abnormalies, cryptorchidism, shorter anogenital distance, smaller testicular and penile size, decreased epididymal weight, increased prostate weight (Williams et al 2001, Richter et al 2007, Salian et al 2009, Foster et al 2006, vom Saal et al 1998, Hossaini et al 2001, Nagel et a 1997, Talsness et al 2000).
- II. Lower daily sperm production, decreased sperm motility and morphology (*Talsness et al 2000, Aikawa et al 2004*).
- III. Abnormalities in the acrosomal granule and nucleus in older spermatids and spermatozoa, lower height of the seminiferous epithelium, lower testosterone concentrations (Akingbemi et al 2001, Herath et al 2004, Richter et al 2007, Toyama & Yuasa 2004, Fisher et al 1999).

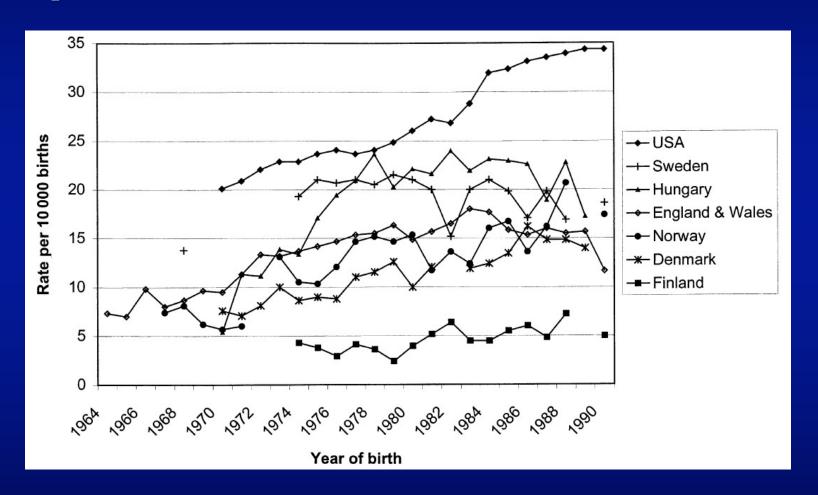
Testicular Dysgenesis Syndrome: diminished semen quality, testicular germ cell cancer and male urogenital tract anomalies



TDS was reproduced entirely or partly in rodent studies by employing phthalates and PCBs.



Hypospadias: the urethral folds do not fuse properly, and the urethra is exteriorized on the ventral side rather than the tip of the penis.



Pesticides and hypospadias: A meta-analysis

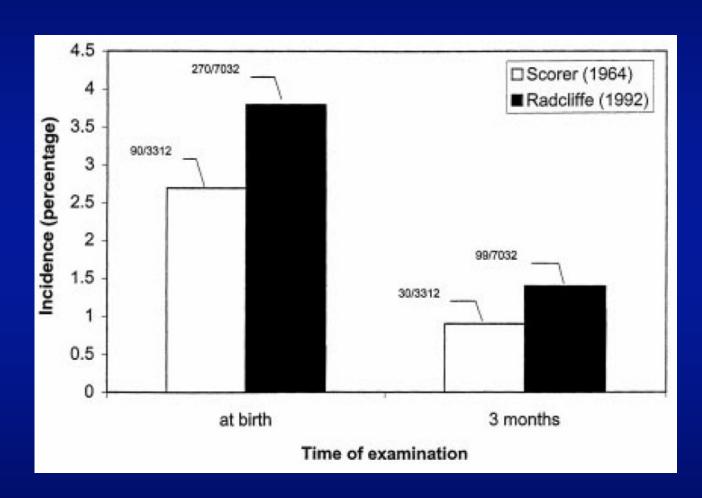
Carissa M. Rocheleau, Paul A. Romitti*, Leslie K. Dennis

Department of Epidemiology, College of Public Health, University of Iowa, Iowa City, IA, USA

- 9 studies included
- Pooled risk ratios were 1.36 (95% CI, 1.04–1.77) and 1.19 (95% CI, 1.00–1.41) for maternal and paternal exposures, respectively.

Cryptorchidism: the failure of the testis to fully descend to the bottom of the scrotum

Incidence in full-term boys at birth and at 3 months during 1950s and 1980s in UK.

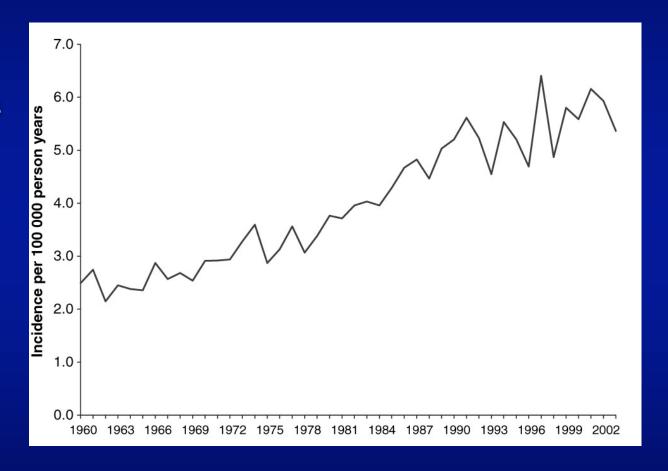


Cryptorchidism

- ✓ *California* children in the two higher quartiles of DDT exposure had a higher incidence of cryptorchidism (*Bhatia R et al, Environ Health Perspect.* 2005).
- ✓ A Spanish study that assessed total estrogenic burden in placenta samples linked cryptorchidism with xenoestrogen exposure (Fernandez MF et al, Environ Health Perspect. 2007).
- ✓ A French case-control study on cryptorchidism showed that boys in the high exposure group for DDE and PCBs had a higher risk of cryptorchidism than boys in the lower exposure group (Krysiak-Baltyn K et al, Int J Androl 2012).
- ✓ In a Finnish-Danish study, PCBs and PBDEs were measured in mother's milk and placenta, with no positive association with cryptorchidism (Main KM et al, Environ Health Perspect. 2007).

Age standardized incidence of testicular cancer in Sweden 1960-2003

- First generation of immigrants follows the pattern of their home country.
- Second generation (born in Sweden) adopts the Swedish risk profile.



✓ Maternal serum concentrations of PCBs (collected when the men were adults) were higher in the TGCC group than in controls, whereas no association was found between TGCC and PCB levels in the adult men themselves.

Table 6. OR (95% CI) for mothers of cases with testicular cancer, all types combined.^a

	Cases/controls	OR (95% CI)
Sum of PCBs ^b	34/20	3.8 (1.4–10)
HCB	35/22	4.4 (1.7-12)
p,p´-DDE	22/22	1.3 (0.5–3.0)
<i>cis</i> -Heptachlordane	27/21	2.1 (0.8-5.0)
<i>cis</i> -Chlordane	22/15	2.5 (0.99-6.1)
Oxychlordane	28/22	2.6 (0.9–7.1)
MC6	25/22	1.3 (0.5–3.2)
trans-Nonachlordane	34/22	4.1 (1.5–11)
<i>cis</i> -Nonachlordane	32/22	3.1 (1.2–7.8)
Sum of chlordanes	27/22	1.9 (0.7–5.0)

OR for mothers of cases with testicular cancer

Table 1 Odds ratio (OR) and 95% confidence interval (CI) for mothers of cases with testicular cancer, all types combined. The median concentration of the chemicals in mothers of controls was used as cut-off value. Numbers greater than median (expressed in nanogram per gram lipid) are shown. Adjustment was made for age and BMI

	All	All			≤55 years old			>55 years old		
	Cases/controls	OR	95% CI	Cases/controls	OR	95% CI	Cases/controls	OR	95% CI	
Sum of PCBs	34/20	3.8	1.4–10	18/11	3.1	0.7–14	16/9	5.3	1.1–25	
НСВ	35/22	4.4	1.7–12	19/9	14	2.8–75	16/13	2.2	0.5–9.6	
p,p'-DDE	22/22	1.3	0.5–3.0	11/11	2.3	0.6-9.5	11/11	0.9	0.3-3.4	
Sum of chlordane	s 27/22	1.9	0.7–5.0	12/7	3.9	0.9–16	15/15	0.9	0.2–4.1	

Table 2 Odds ratio (OR) and 95% confidence interval (CI) for mothers of cases with testicular cancer. Grouping of PCB congeners was made according to structural and biological activity. The median concentration of the chemicals in mothers of controls was used as cut-off value. Numbers greater than median (expressed in nanogram per gram lipid) are shown. Adjustment was made for age and BMI

	Seminoma		Non-seminoma	Non-seminoma		All (n = 43)	
	Cases/controls	OR (CI)	Cases/controls	OR (CI)	Cases/controls	OR (CI)	
Estrogenic PCBs ^a	10/20	2.3 (0.6–8.9)	20/20	2.4 (0.8–6.8)	30/20	2.4 (0.95–6.0)	
Enzyme-inducing PCBs ^b	9/21	1.4 (0.4–5.3)	22/21	3.3 (1.1–9.7)	31/21	2.6 (1.03–6.5)	
TEQ ^b	11/21	3.5 (0.8–15)	22/21	3.3 (1.1–9.8)	33/21	3.3 (1.3–8.4)	
Sum of PCBs ^a	11/20	3.1 (0.7–14)	23/20	4.3 (1.3–14)	34/20	3.8 (1.4–10)	

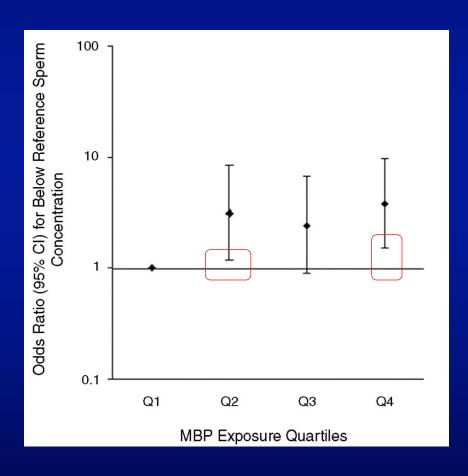
Semen Quality

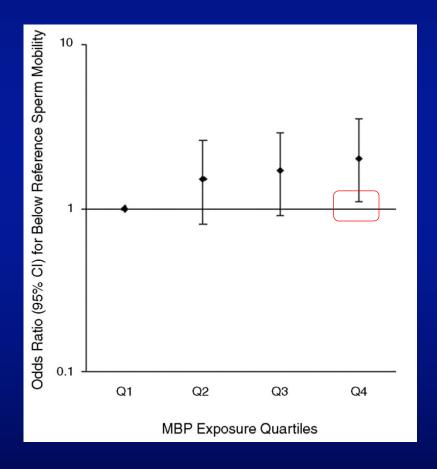
Association of below-reference value semen parameters (motility) with median phthalate monoester levels (MBP)

TABLE 3. Association of Below-Reference Value Semen Parameters with Median Phthalate Monoester Levels* $(N = 143 \text{ subjects})^{\dagger}$

	Semen Parameter					
		ncentration llion/mL		Motility Motile	Morphology <4% Normal	
Phthalate Monoester	Crude OR	Adjusted	Crude OR	Adjusted	Crude OR	Adjusted OR
	(CI)	OR (CI)‡	(CI)	OR (CI)‡	(CI)	(CI)‡
Ethyl (MEP)	1.1 (0.4–2.9)	1.2 (0.4–3.4)	1.3 (0.6–2.6)	1.1 (0.6–2.4)	0.9 (0.4–2.1)	0.9 (0.4–2.2)
2-Ethylhexyl (MEHP)	1.1 (0.4–2.9)	1.0 (0.3–2.9)	1.4 (0.7–2.8)	1.4 (0.7–2.9)	1.2 (0.5–2.6)	1.2 (0.5–2.8)
Butyl (MBP)	2.2 (0.8–5.8)	2.4 (0.8–7.2)	2.3 (1.1–4.6)	2.4 (1.1–5.0)	1.6 (0.7–3.5)	1.7 (0.8–3.9)
Benzyl (MBzP)	1.8 (0.7–4.8)	2.7 (0.8–8.5)	1.6 (0.8–3.1)	1.8 (0.9–3.9)	1.8 (0.8–4.0)	2.1 (0.9–5.1)
Methyl (MMP)	2.3 (0.6–8.1)	1.7 (0.4–7.9)	1.3 (0.5–3.4)	1.1 (0.4–3.3)	2.9 (0.9–9.3)	3.2 (0.8–12.2)

Adjusted odds ratios for below reference sperm concentration and mobility associated with higher quartiles of monobutylphthalate (MBP) urine concentration.

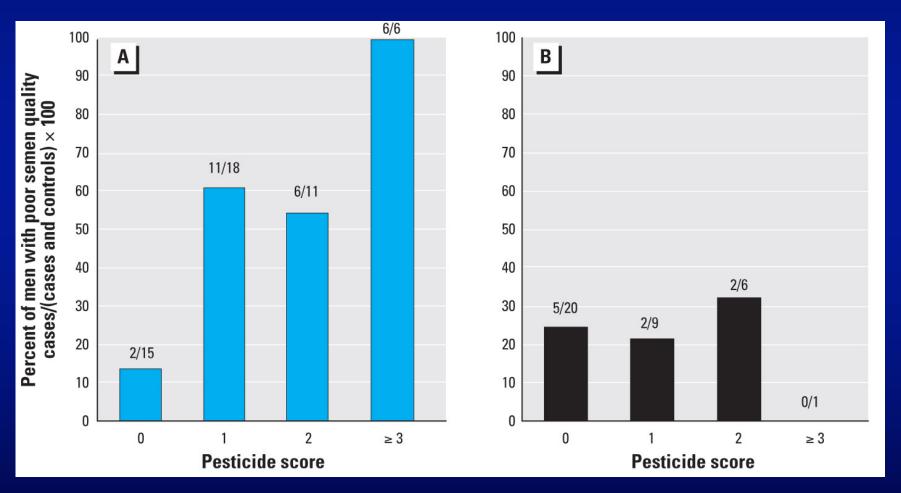




Odds ratios for low semen quality for men exposed to elevated pesticide levels

Table 4. ORs for low semen quality for men exposed to elevated pesticide levels.							
	Missouri						
Pesticide	Level (µg/g creatinine)	Cases	Controls	OR (95% CI)			
Alachlor	< 0.15	3	15	Reference			
	0.15-0.7	10	8	6.3 (1.3–29.4)			
	> 0.7	12	2	30.0 (4.3–210)			
IMPY	< 0.1	6	20	Reference			
	0.1–3.0	9	3	10.0 (2.0-49.2)			
	> 3.0	10	2	16.7 (2.8–98.0)			
Atrazine	< 0.1	17	24	Reference			
	≥ 0.1	8	1	11.3 (1.3–98.9)			
Metolachlor	< 0.15	5	11	Reference			
	0.15-0.3	11	8	3.0 (0.7–12.2)			
	> 0.3	9	6	3.3 (0.8–14.5)			
2,4-D	< 0.1	20	19	Reference			
	≥ 0.1	5	6	0.8 (0.2–3.0)			
1-Naphthol	< 1.5	9	2	Reference			
	> 1.5	12	1	2.7 (0.2–34.2)			
3,5,6-Trichloropyridinol	< 0.5	5	2	Reference			
6,6,6	≥ 0.5	16	1	6.4 (0.5–86.3)			
4-Nitrophenol	< 0.1	20	3				
	≥ 0.1	1	0				

The proportion of men with poor semen quality in relation to pesticide score (the number of pesticides found at higher levels) (A) Missouri (B) Minnesota



Swan et al, Environ Health Perspect 2003

ANDROLOGY



ISSN: 2047-2919 ANDROLOGY

OPINION ARTICLE

Correspondence

Dimitrios G. Goulis, Unit of Reproductive Endocrinology, First Department of Obstetrics and Gynecology, Papageorgiou General Hospital, Ring Road, Nea Efkarpia, 56403 Thessaloniki, Greece. E-mail: dqq@auth.gr.

Keywords:

endocrine disrupters, epidemiology, male reproductive system, methodology

Received: 10-Aug-2016 Revised: 12-Jan-2017 Accepted: 16-Jan-2017

Effect of endocrine disruptors on male reproduction in humans: why the evidence is still lacking?

^{1,2}D. Bliatka, ¹S. Lymperi, ²G. Mastorakos and ¹D. G. Goulis

¹Unit of Reproductive Endocrinology, First Department of Obstetrics and Gynecology, Aristotle University of Thessaloniki, Thessaloniki, Greece, and ²Second Department of Obstetrics and Gynecology, Athens University Medical School, Athens, Greece

Methodological Problems

- 1. Exposed and non-exposed populations
- 2. Age
- 3. Insufficient control for confounders
- 4. ED assay and threshold
- 5. Time parameters of ED exposure
- 6. Study outcome

Prostate Cancer

- ✓ Prostate gland is a hormone-dependent structure, and dysregulation of hormonal signaling is a known contributor to the high rates of prostate disease with aging.
- ✓ Epidemiological evidence indicates increased prostate cancer rates and mortality in men exposed to pesticides.
- ✓ EDC classes with known prostatic effects from animal studies include pesticides, PCBs, alkylphenols, BPA, and some heavy metals.
- ✓ Animal models and human cell-based studies provide evidence for elevated prostate cancer risk from BPA exposures, with increased sensitivity to BPA reprogramming during early-life developmental.

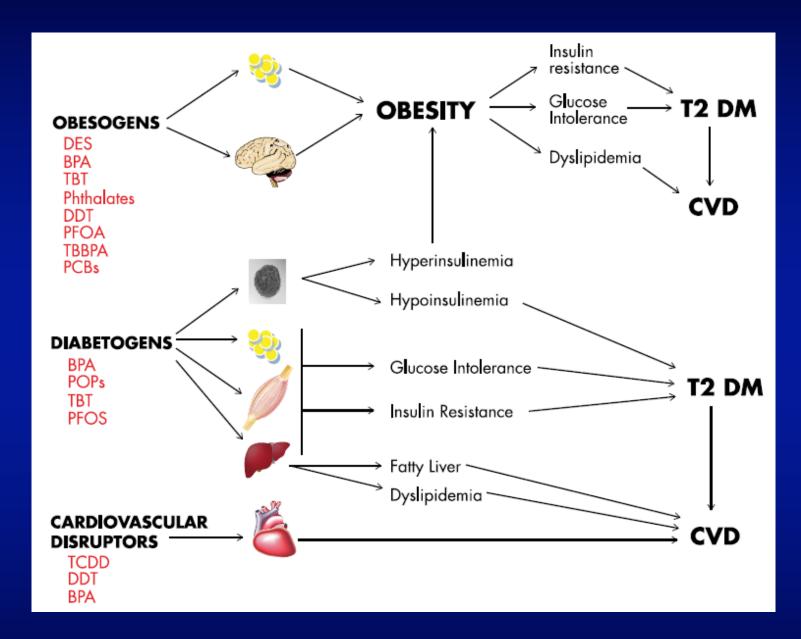
Exposure to Bisphenol A Correlates with Early-Onset Prostate Cancer and Promotes Centrosome Amplification and Anchorage-Independent Growth *In Vitro*

Pheruza Tarapore^{1,2,3}, Jun Ying^{1,2,3}, Bin Ouyang^{1,2,3,3}, Barbara Burke⁴, Bruce Bracken⁴, Shuk-Mei Ho^{1,2,3,5}*

- ✓ The first direct clinical evidence
- ✓ Prospective study of 60 urological patients evaluated for potential prostate cancer due to elevated PSA levels
- ✓ Urinary BPA-glucuronide levels before prostate biopsy were significantly higher in the biopsy-confirmed prostate cancer patients than those with no diagnosis of cancer.
- ✓ Cancer-positive patients < 65 years old had higher urine BPA-glucuronide levels than non-cancer patients, whereas there was no difference in BPA levels in cancer vs non- cancer patients in men □> 65 years old.

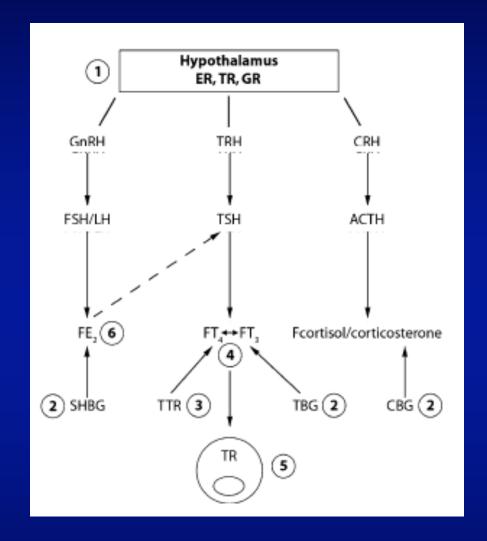
Reproductive health problems associated with environmental estrogens-xenoestrtogens through male life cycle

	Fatal/Neonatal	Prepubertal	Pubertal	Adult
Processes	Intrauterine growth	Adrenarche	Pubarche	Spermatogenesis
Disorders	IUGR	Premature	Small	Oligospermia
		Pubarche	Testes and	
			high FSH	
	Cryptorchidism		Early	Testicular Cancer
			Puberty	
	Hypospadias		Delayed	Prostate
			Puberty	Hyperplasia



✓ Several key components of most hormones homeostasis are susceptible to the action of endocrine disruptors, including estrogens and xenoestrogens.

✓ Developmental disorders in the structure and functioning of the brain, leading possibly to behavioral changes.



Environmental Sources











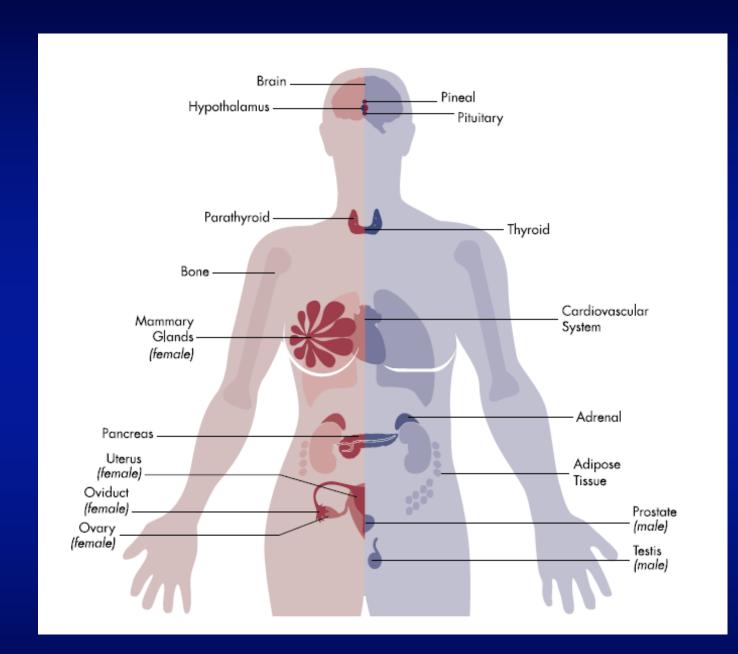












Endocrine-Disrupting Chemicals: An Endocrine Society Scientific Statement

Evanthia Diamanti-Kandarakis, Jean-Pierre Bourguignon, Linda C. Giudice, Russ Hauser, Gail S. Prins, Ana M. Soto, R. Thomas Zoeller, and Andrea C. Gore

Endocrine Reviews 2009

EDC-2: The Endocrine Society's Second Scientific Statement on Endocrine-Disrupting Chemicals

A. C. Gore, V. A. Chappell, S. E. Fenton, J. A. Flaws, A. Nadal, G. S. Prins, J. Toppari, and R. T. Zoeller

"Until such time as conclusive scientific evidence exists to either prove or disprove harmful effects of substances, a precautionary approach should be taken in the formulation of EDC policy"

Endocrine Society 2009

"As we move forward, we believe that the evidence is sufficient to recommend greater regulation, more precaution, better communication between healthcare professionals and patients, and efforts to avoid introducing new EDCs, in a misguided effort to replace previous chemicals in the absence of proper testing"

Endocrine Society 2015