



Total mercury and methylmercury levels in hair, blood, and urine of individuals following controlled intake of tuna fish

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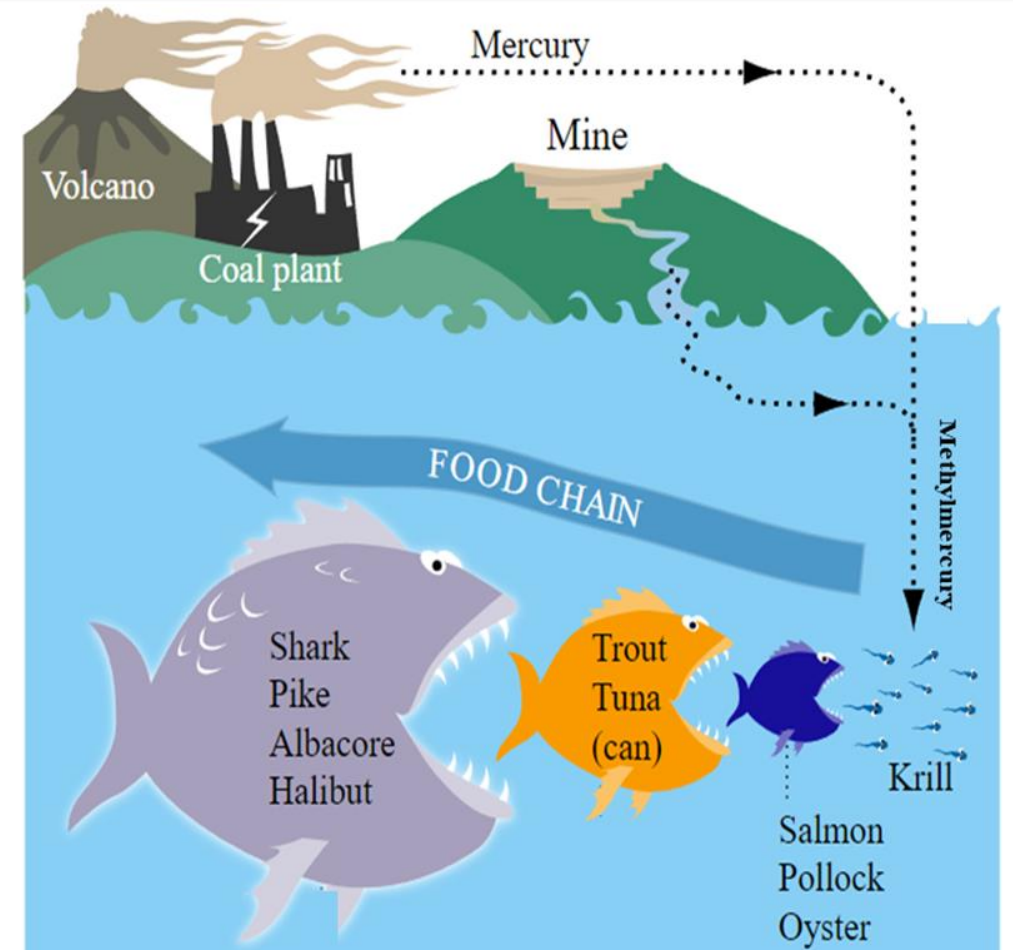
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Introduction

Fish – an important source of nutrients but also the main source of human exposure to Hg

→ large, predatory fish can contain high amounts of MeHg (biomagnification through the food chain)

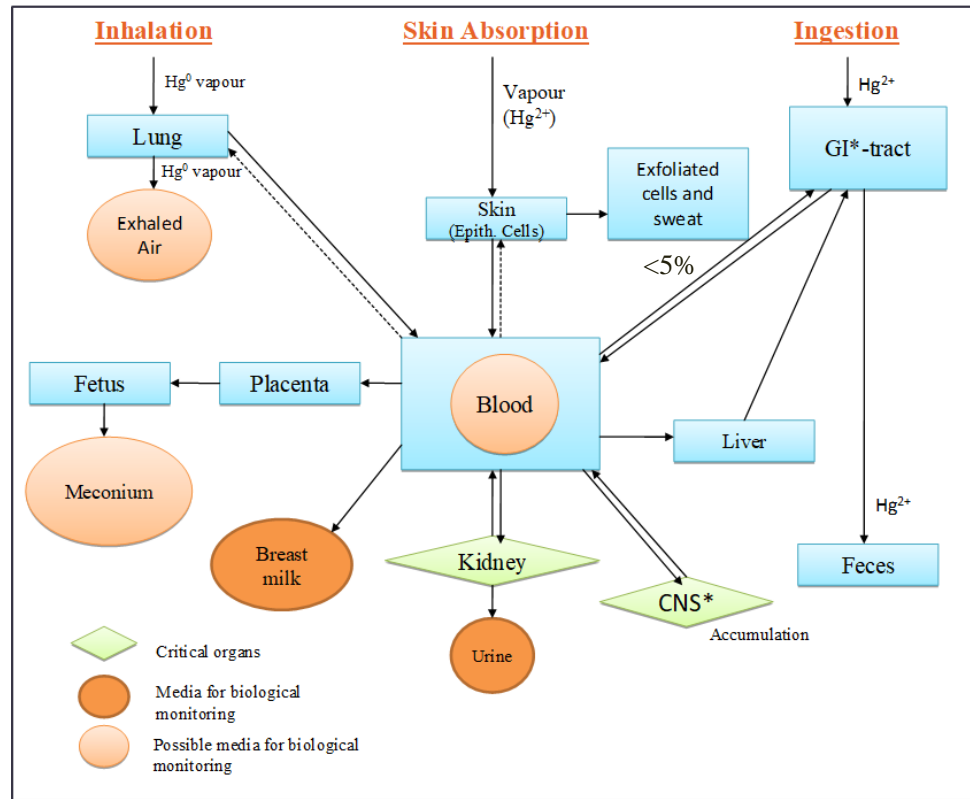


*Image adapted based on Bretwood Higman, Ground Truth Trekking

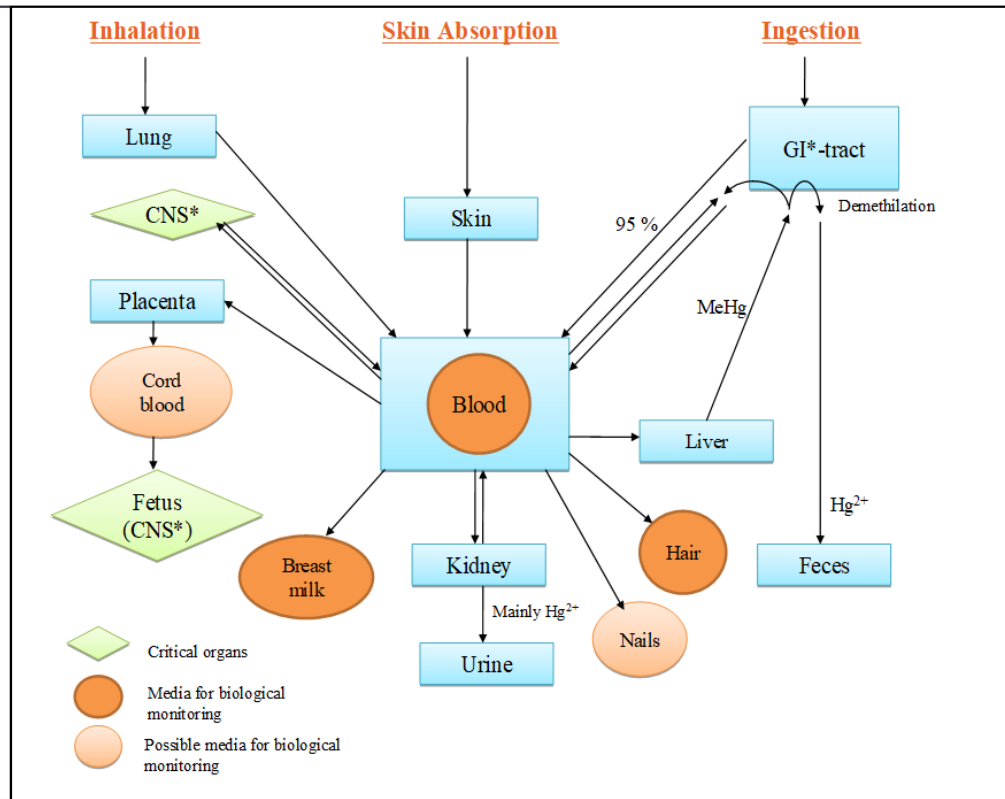
- Different mercury species have different toxicokinetic properties

→ MeHg is readily absorbed in the GI tract, IHg absorbed very little

Inorganic and elemental Hg



Methyl Hg

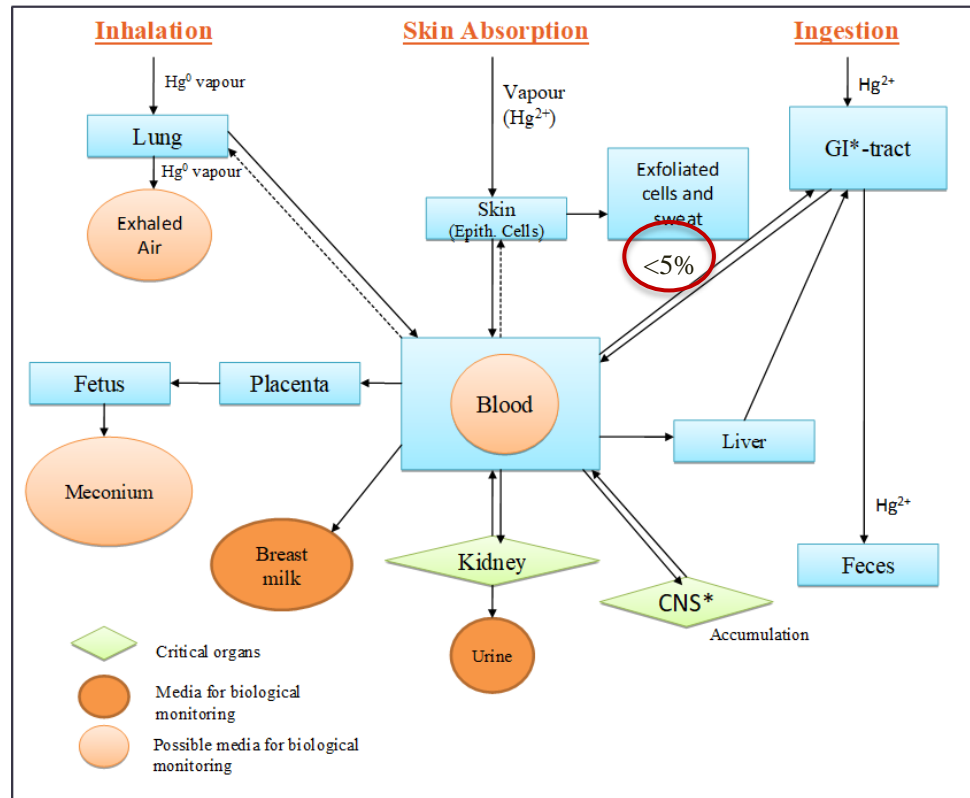


*GI: gastrointestinal; CNS: Central Nervous System

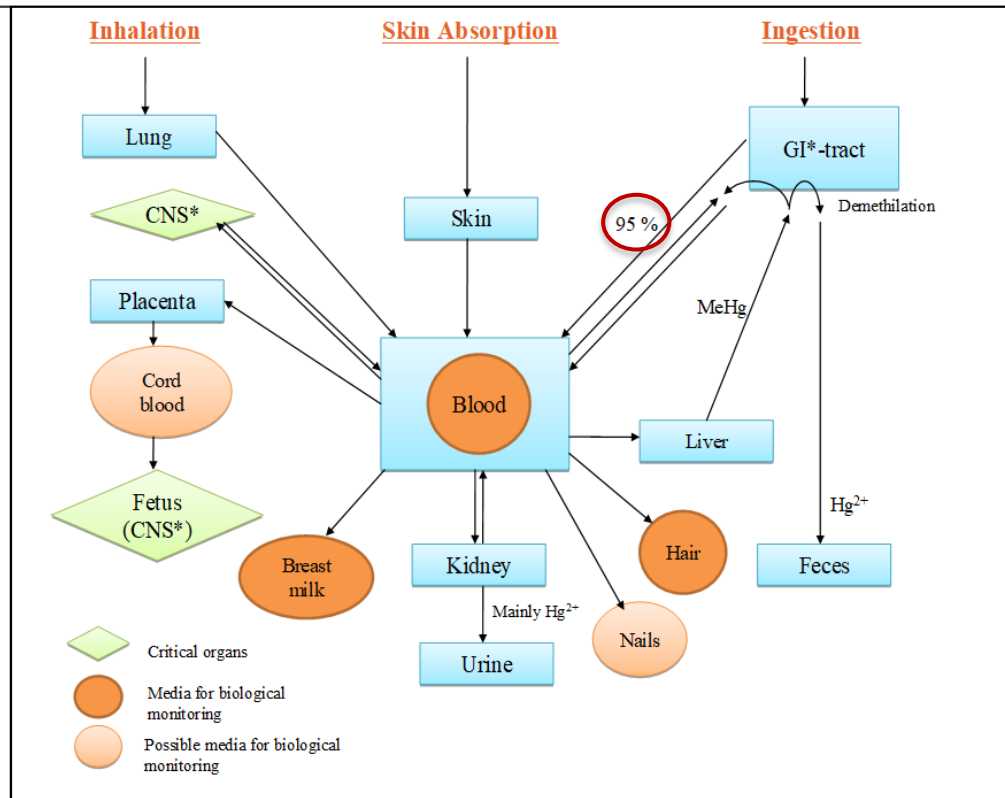
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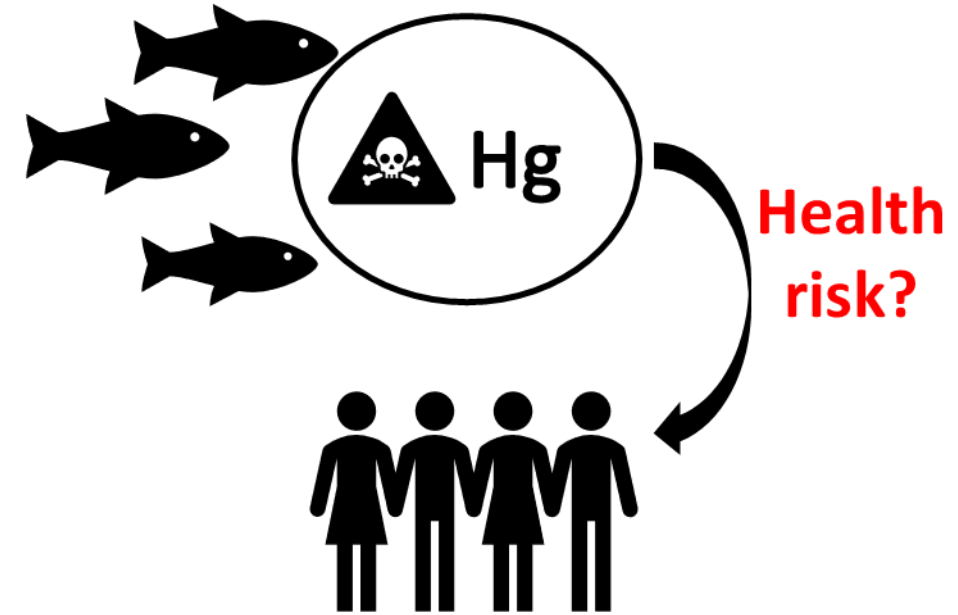


Methyl Hg



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- Common assumptions in health risk assessment:
 - all Hg in fish is MeHg
 - ingested MeHg from fish is 95-100% bioavailable
- based on **outdated** studies with significant **limitations** (e.g. unrealistic exposure routes, not using MeHg bound to fish tissue from natural contamination)
- studies on Hg kinetics – outdated, often limited data
- many uncertainties, worst-case scenario approach



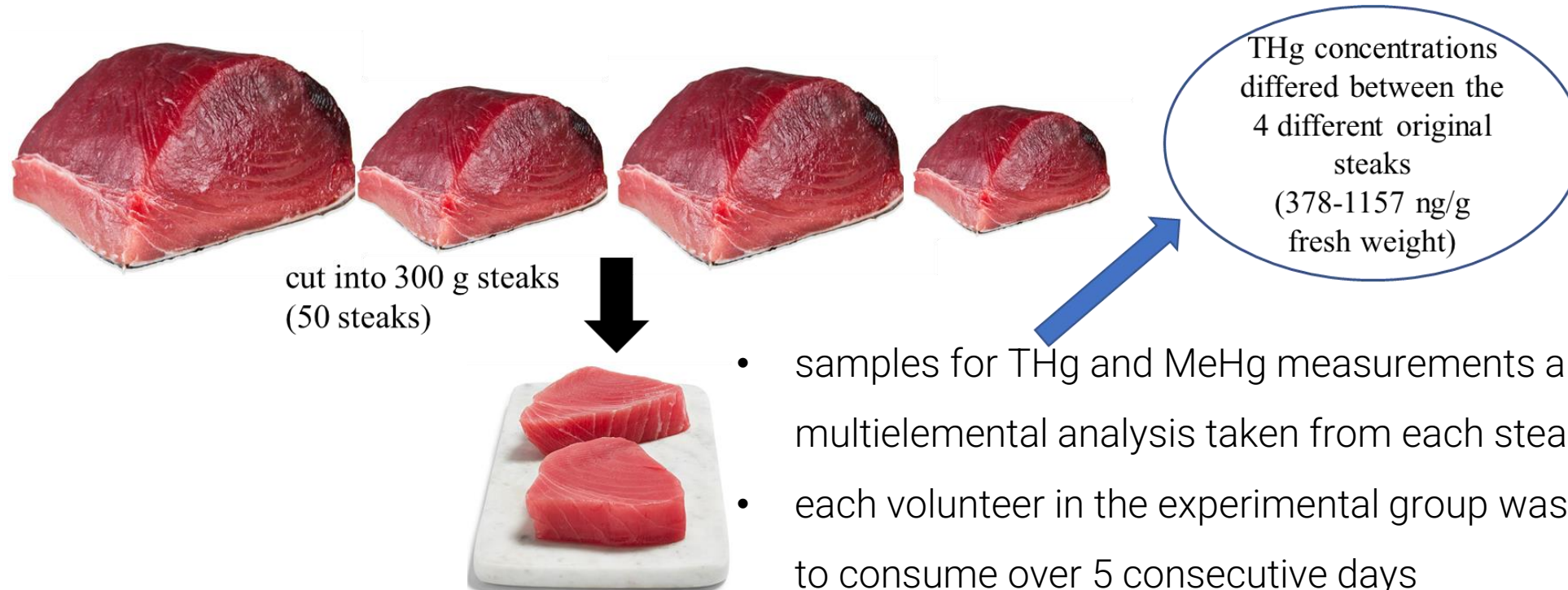
This can lead to an overestimation of exposure and risk!

Our aim: reduce the uncertainties in the exposure and HRA and validate pharmacokinetic models (detailed kinetic data from controlled exposure) → better prediction of individual internal dose, better risk assessment

The tuna experiment

→ creation of a **realistic** and **controlled** exposure scenario and subsequent measurements of **THg** and **MeHg** in **multiple** biological samples

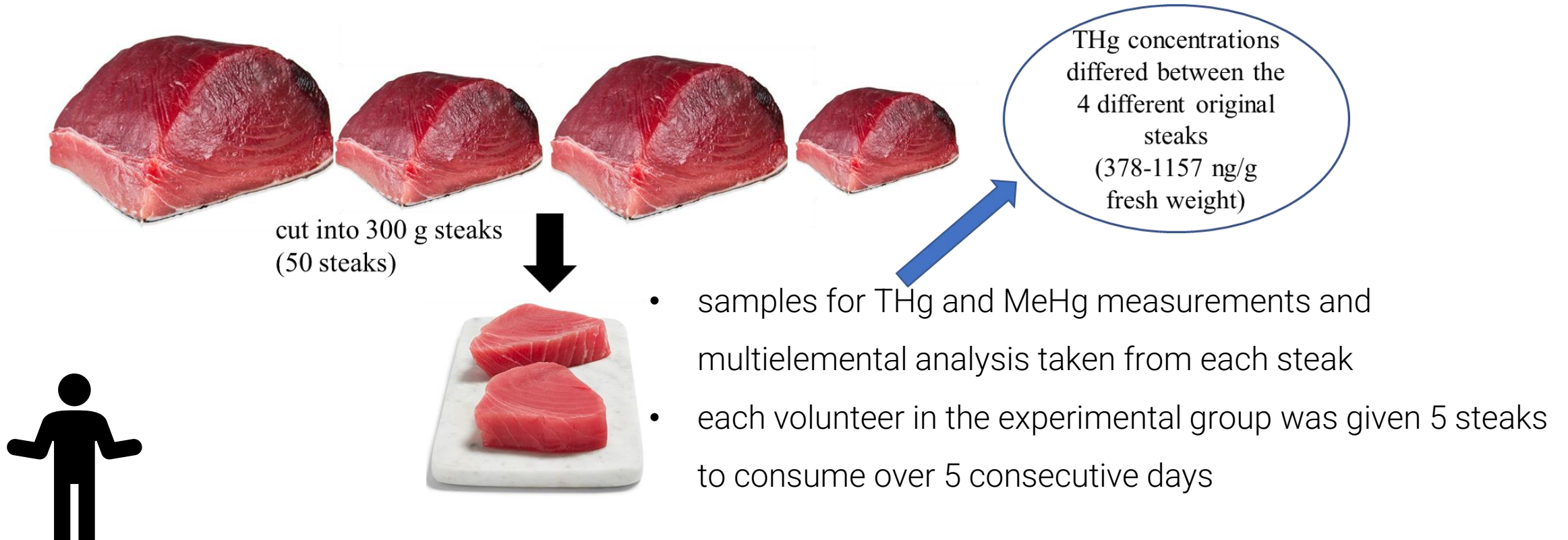
→ 16 volunteers (10 in experimental group + 6 in control group)



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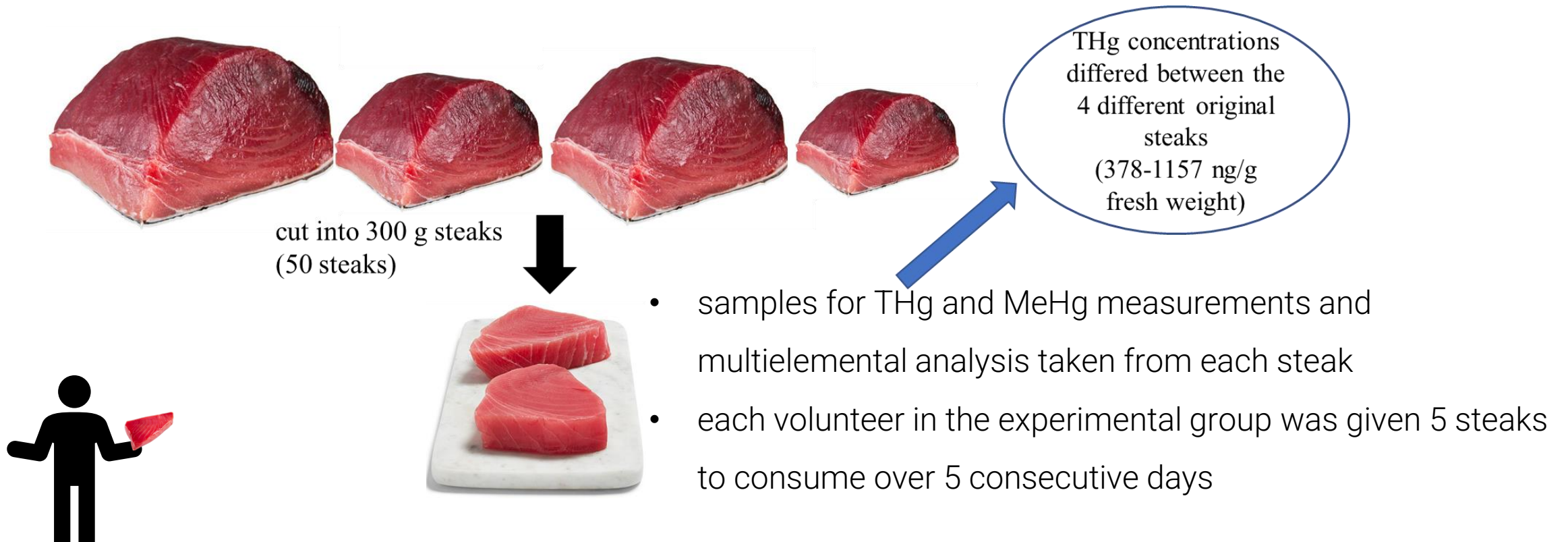
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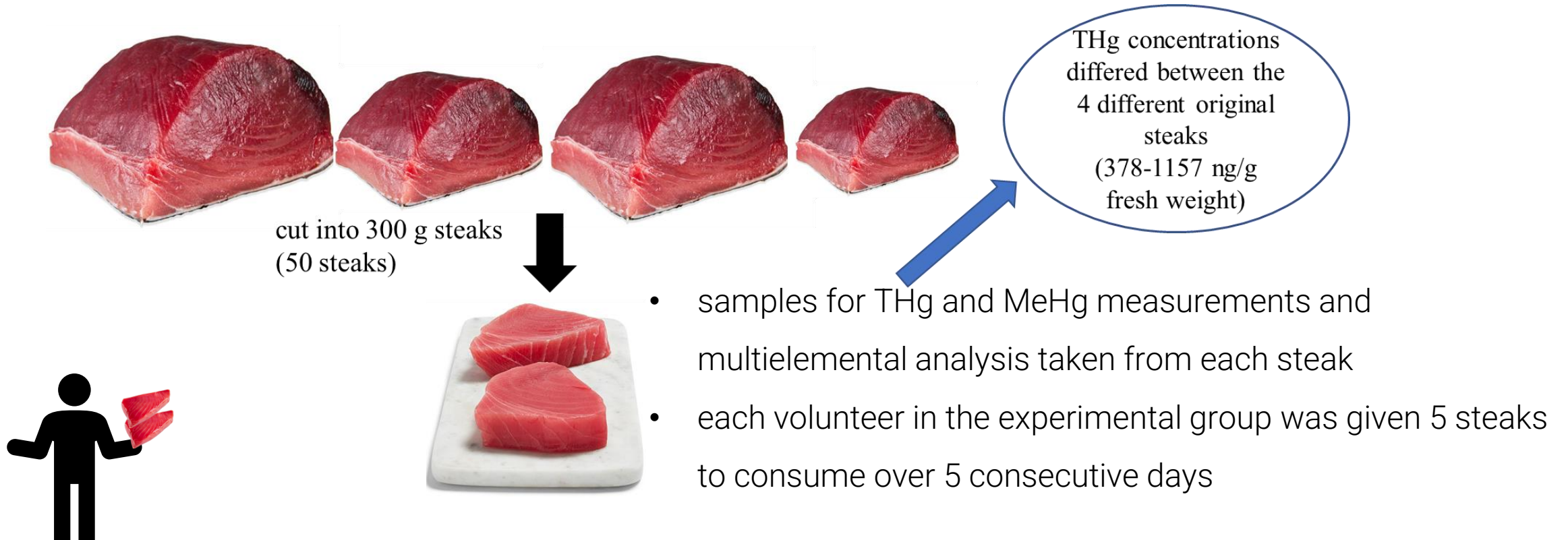
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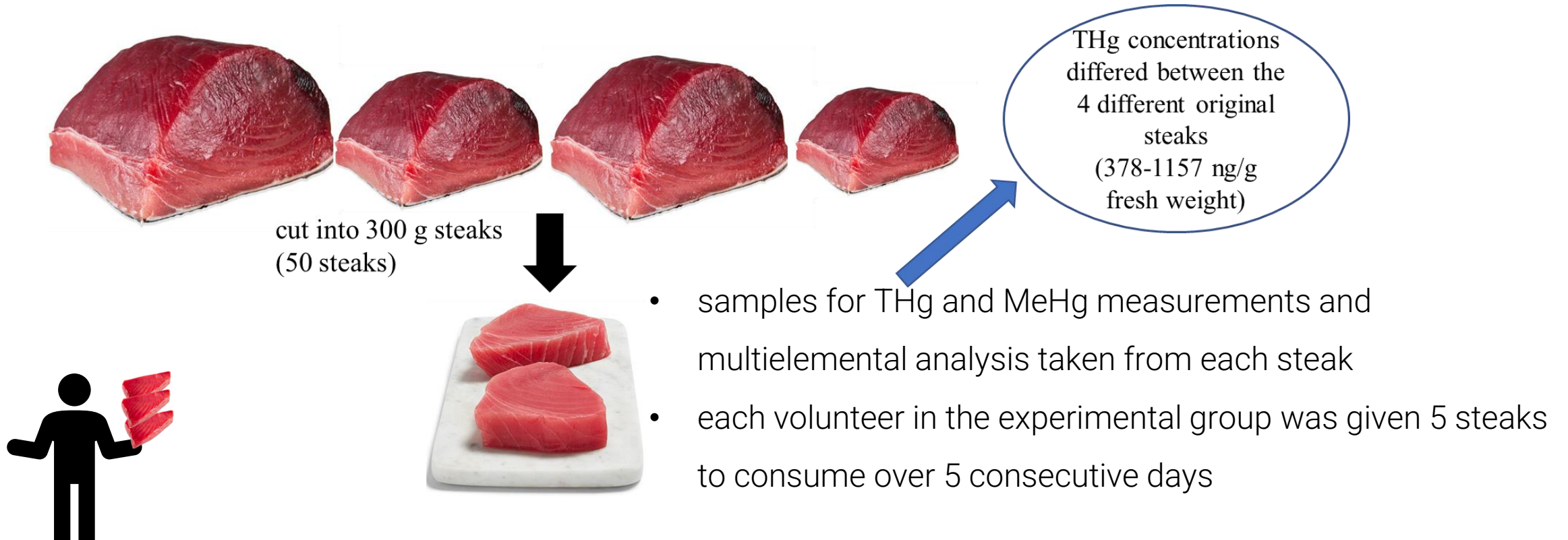
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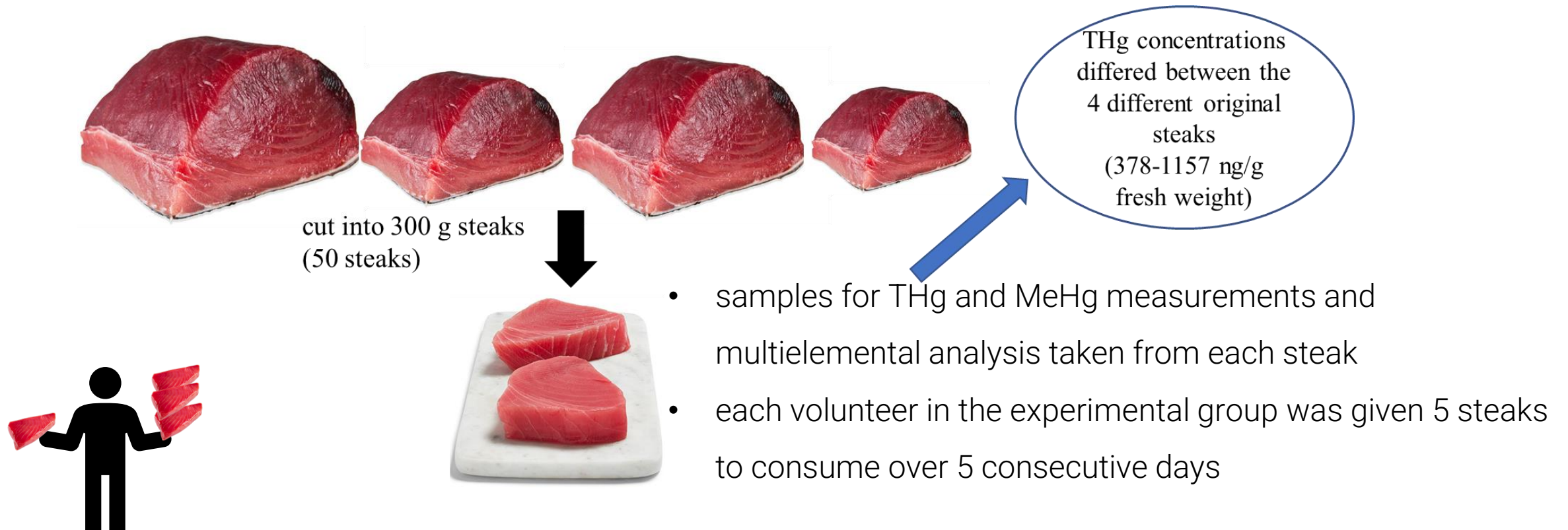
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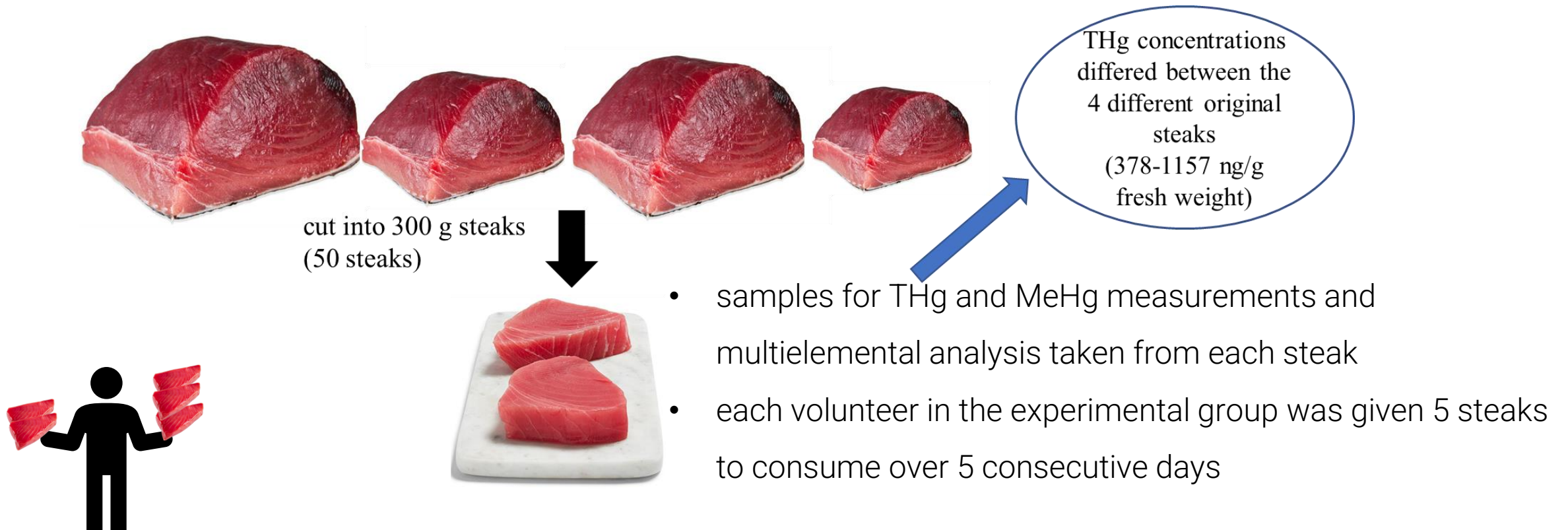
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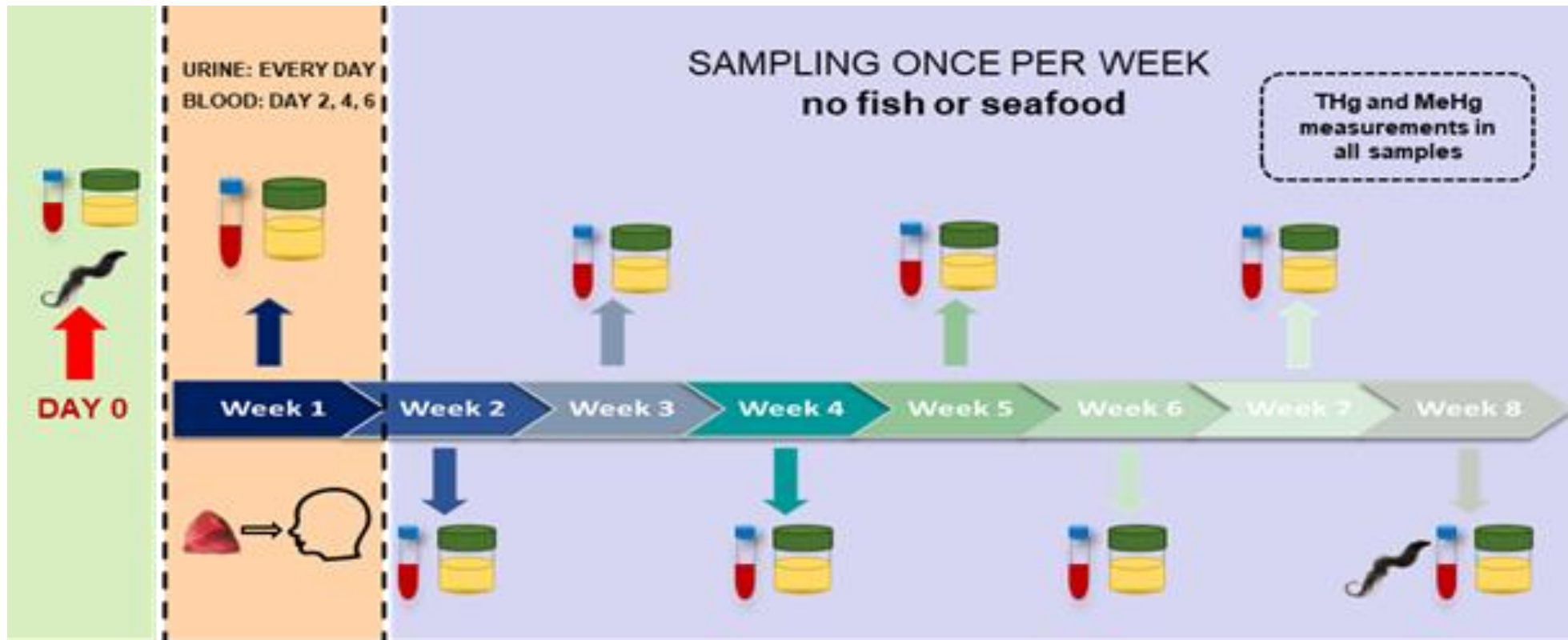
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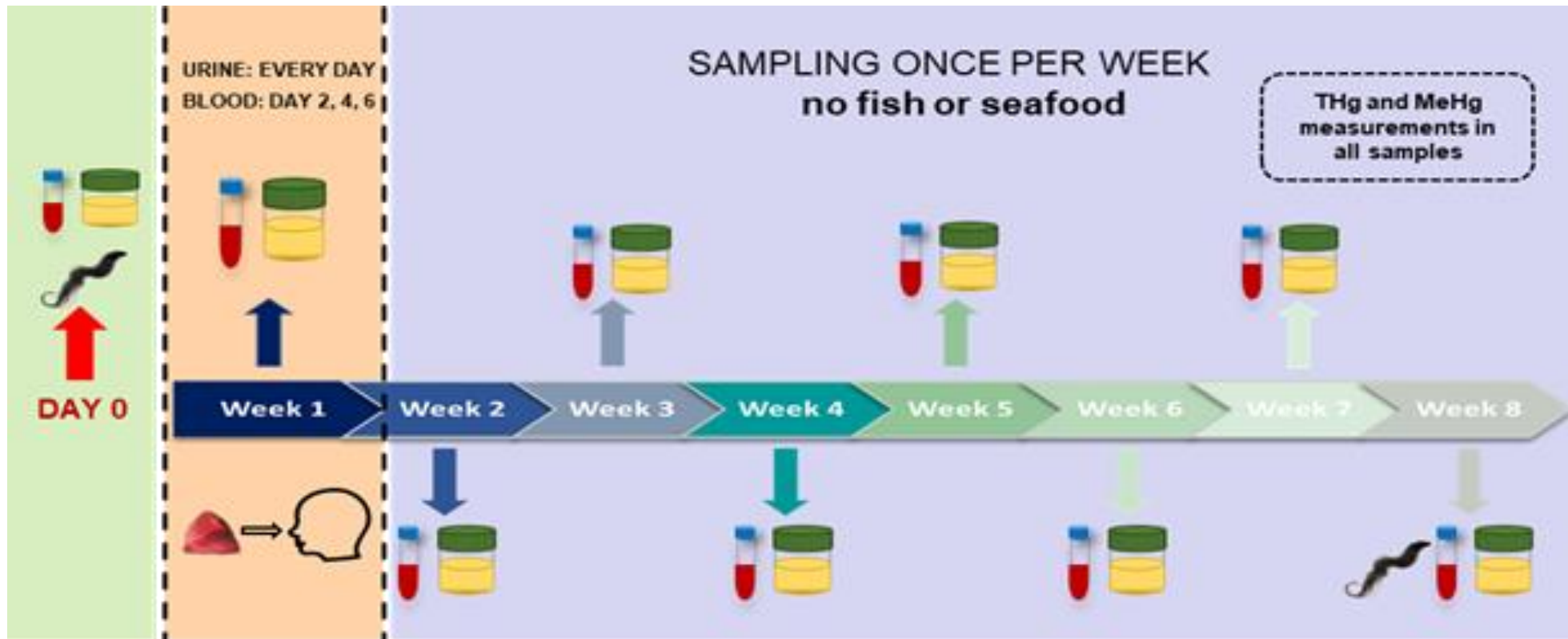


The sampling regimen

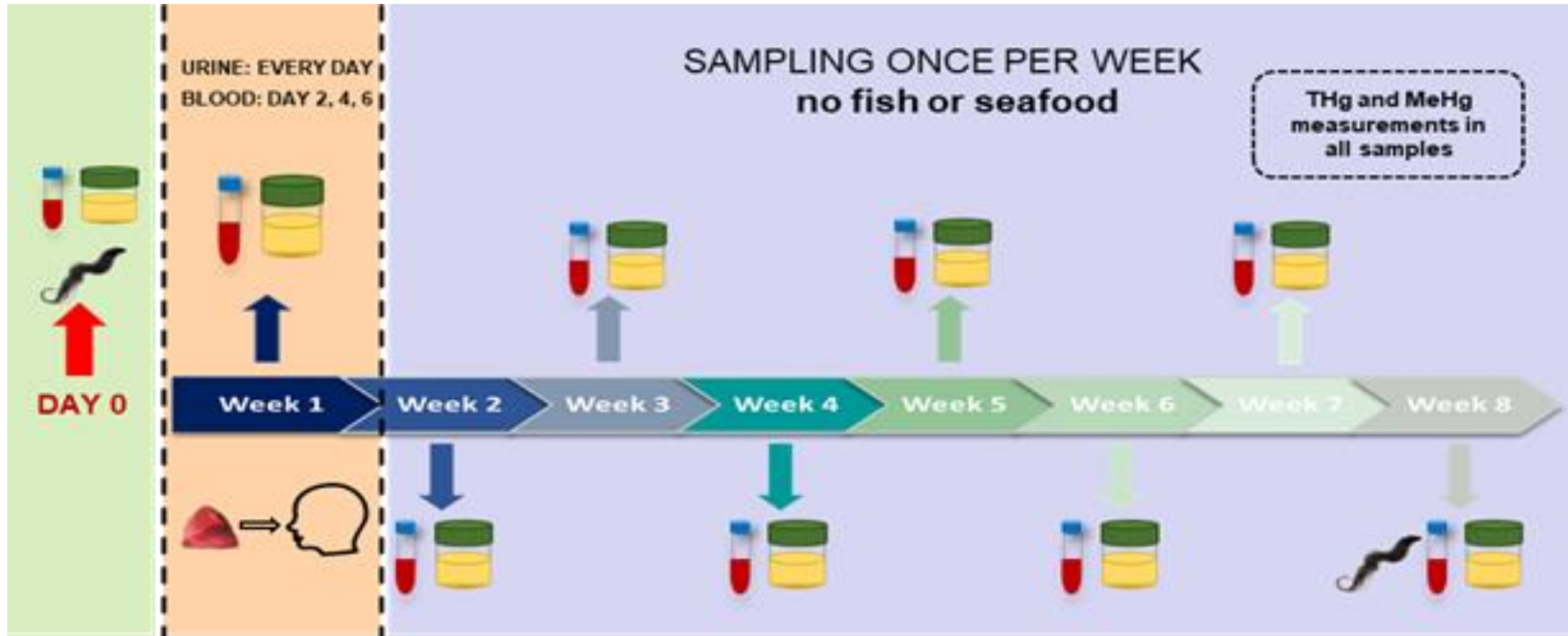


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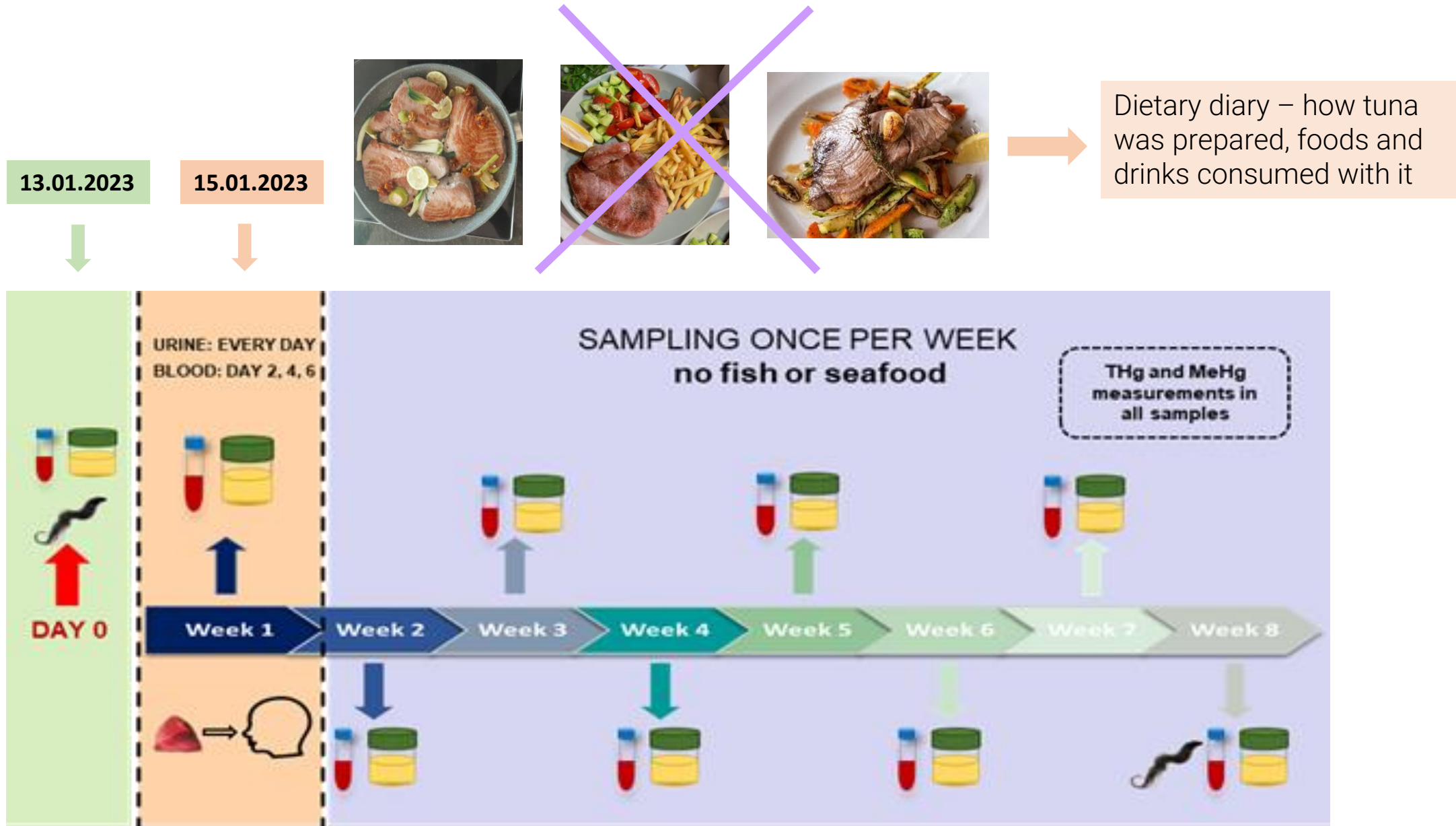
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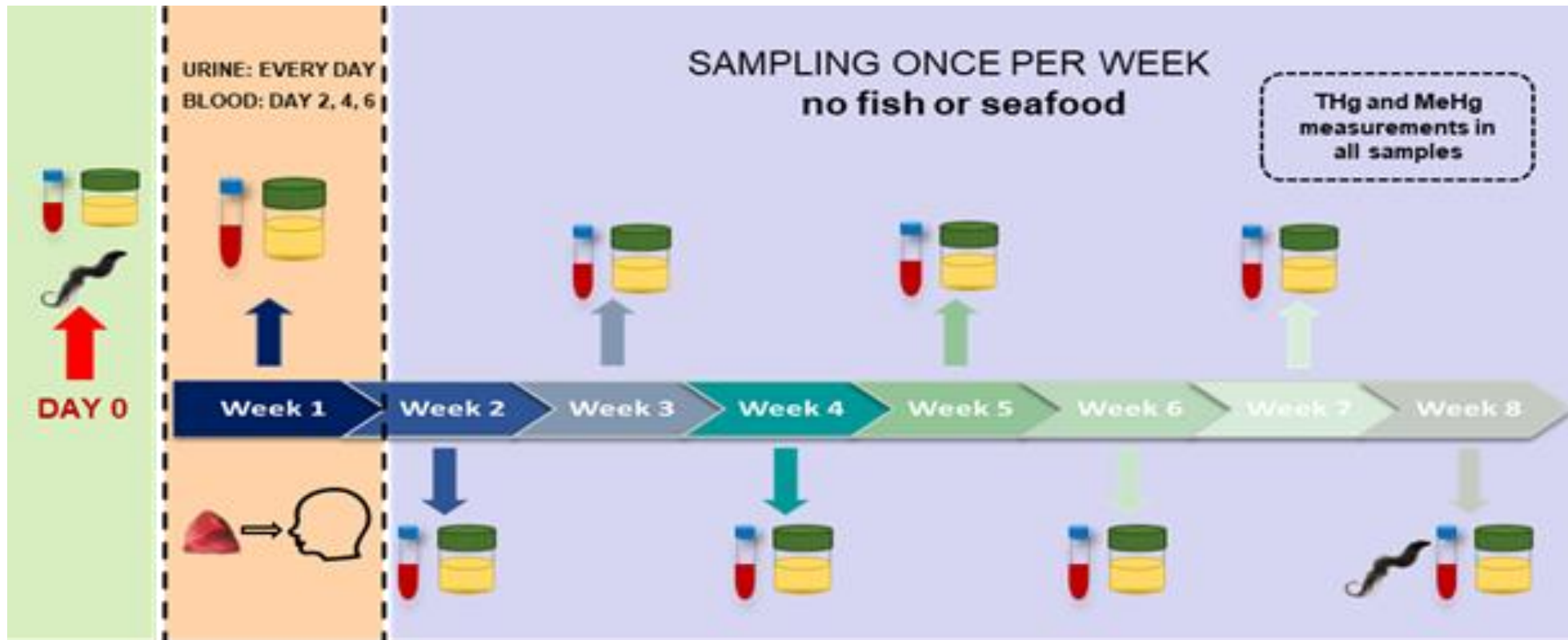
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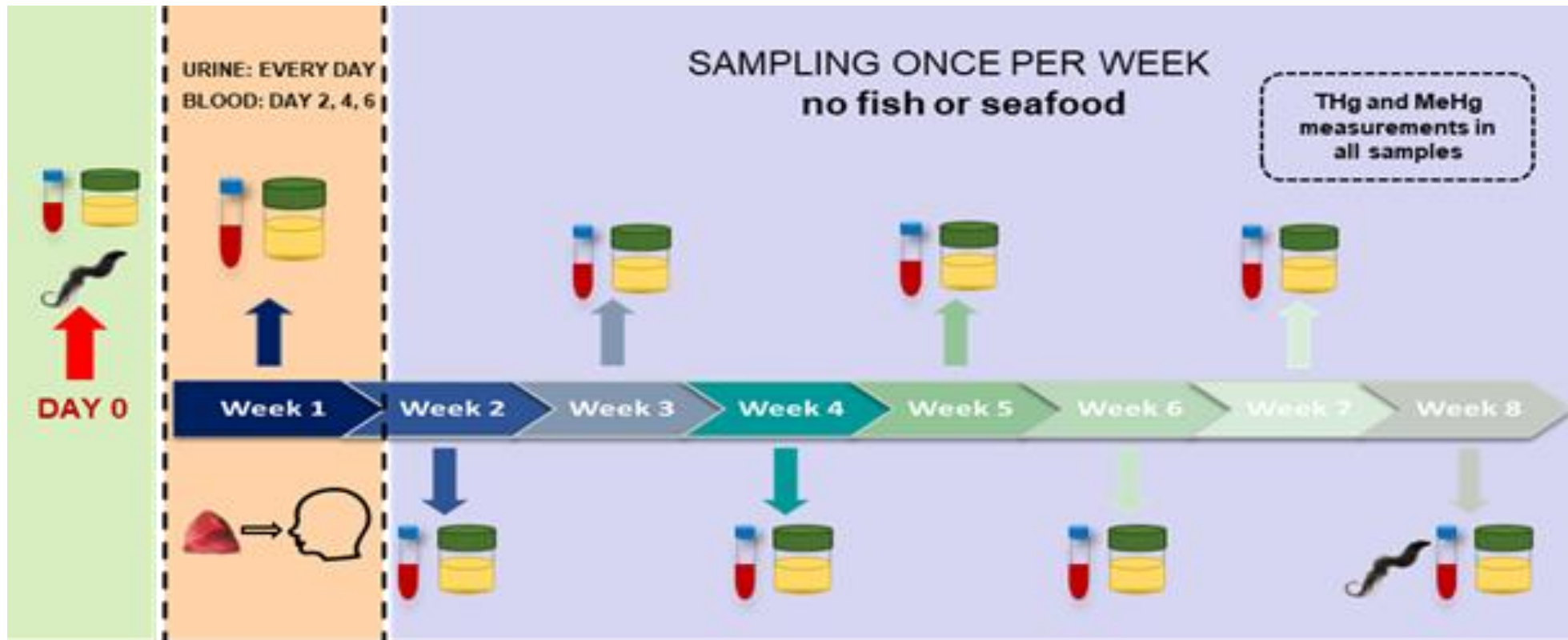


The experiment was continued until week 12, with 13 total sampling dates (last on the 14th of April)

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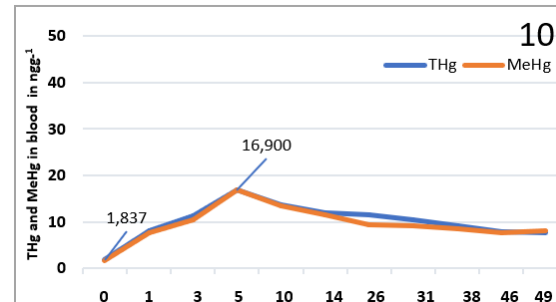
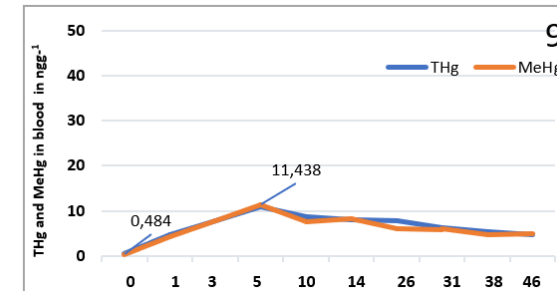
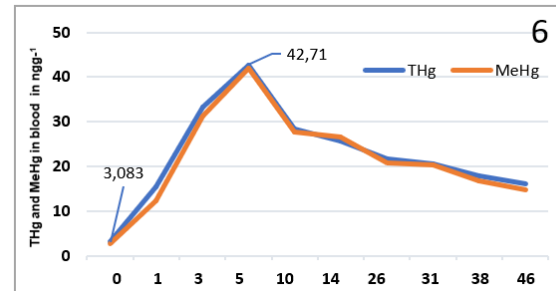
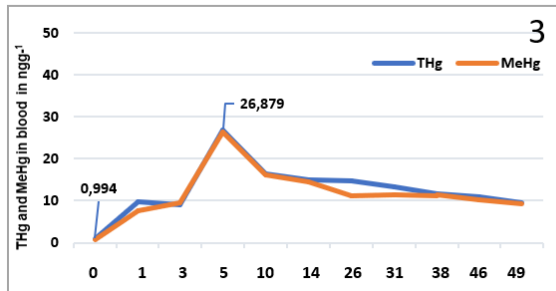
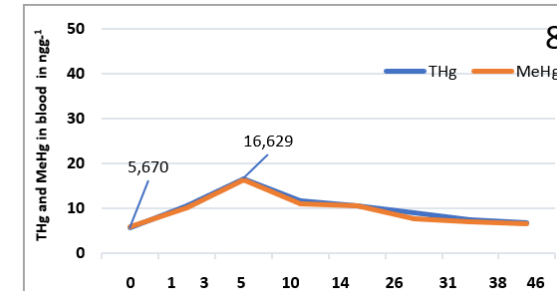
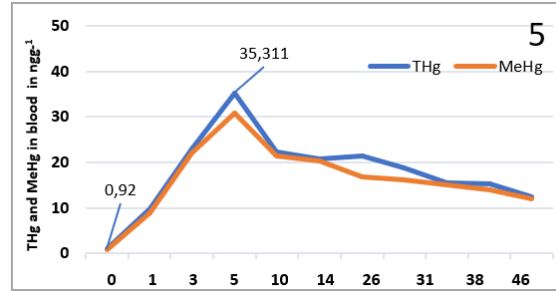
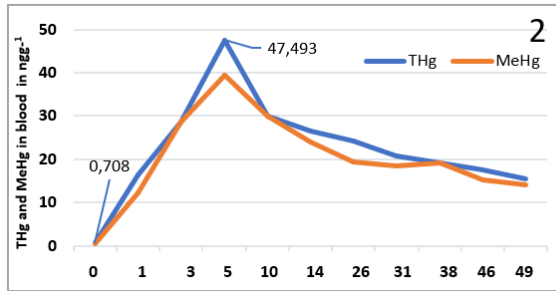
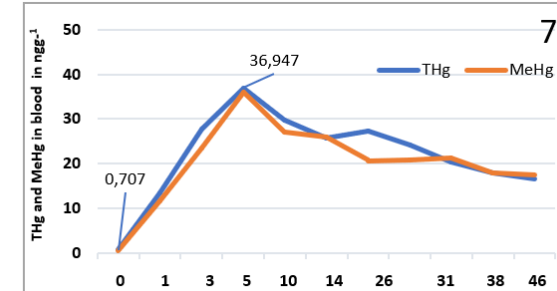
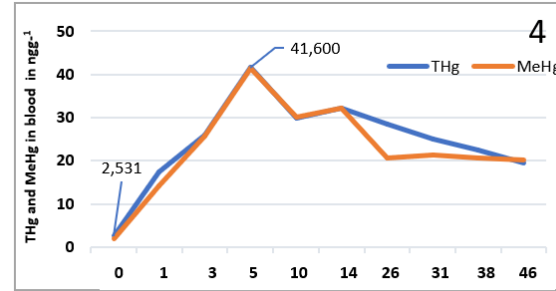
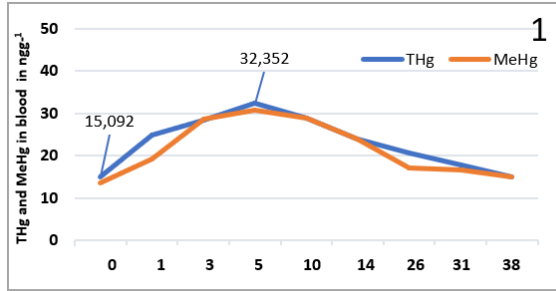


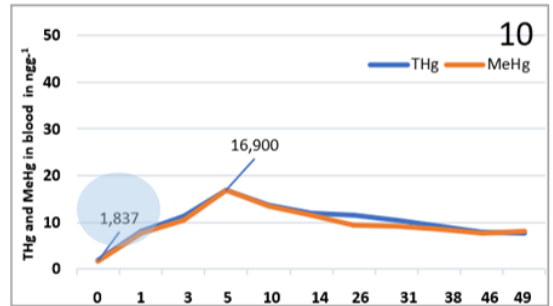
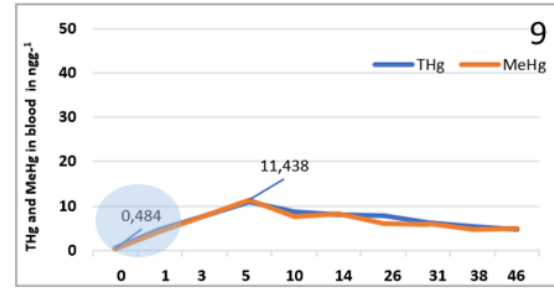
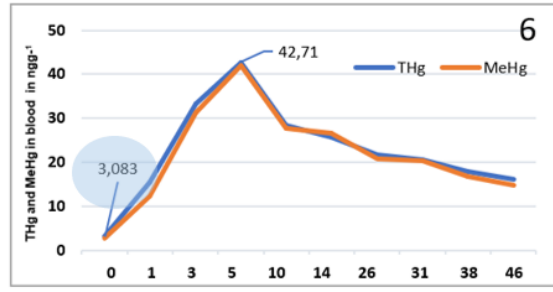
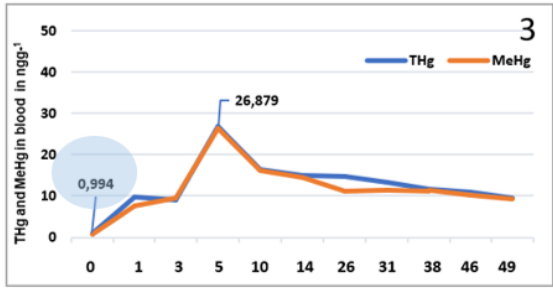
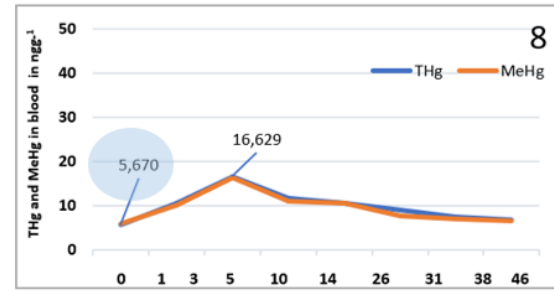
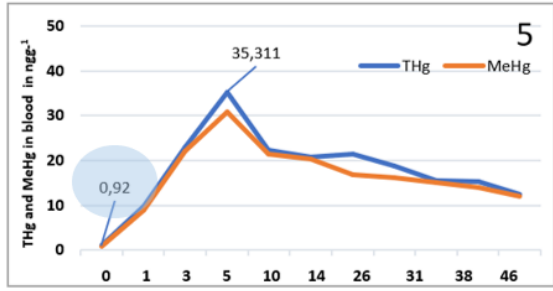
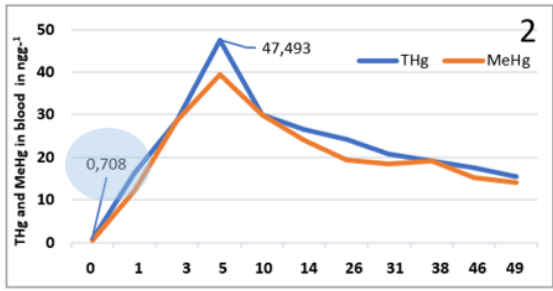
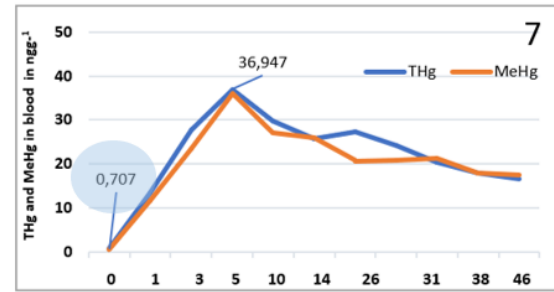
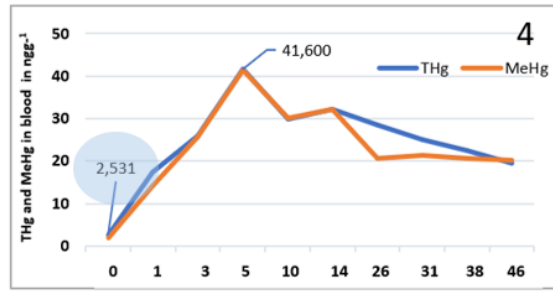
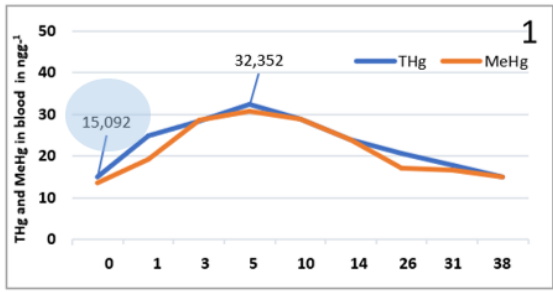
Different cooking methods – reduction of bioaccessibility of Hg from fish

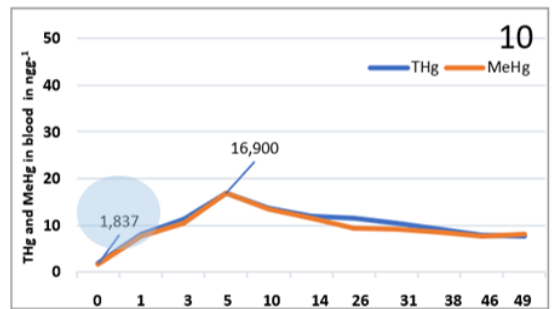
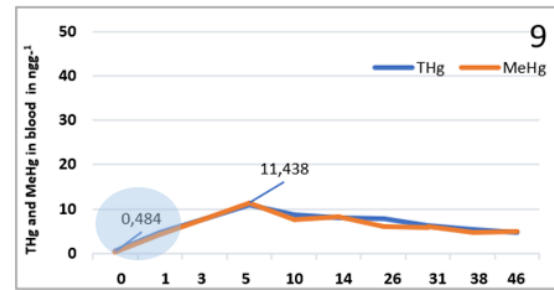
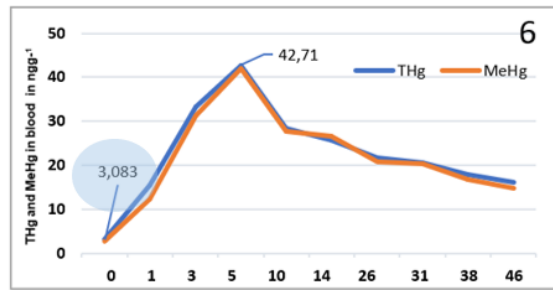
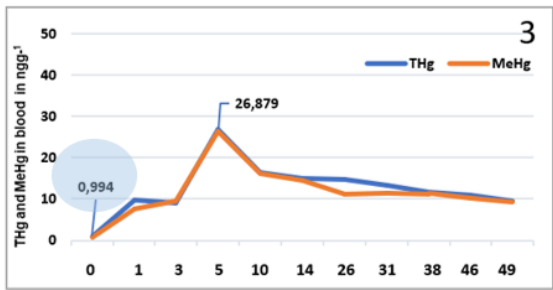
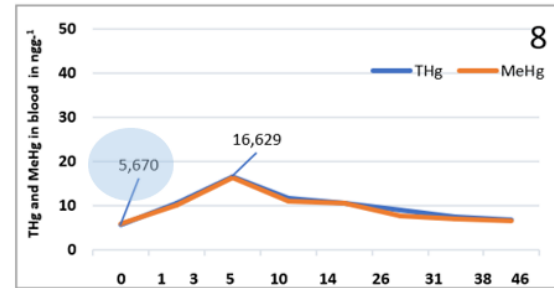
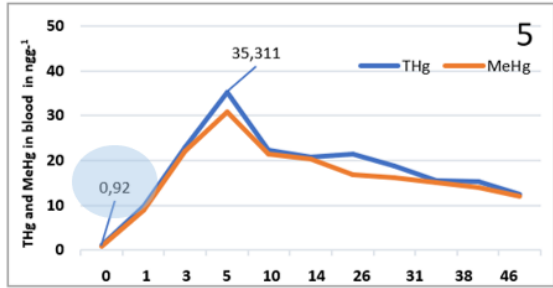
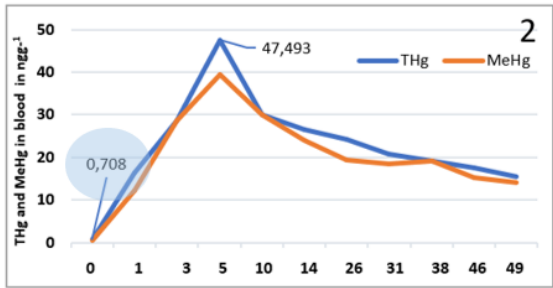
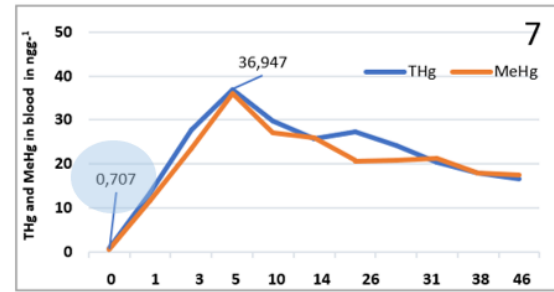
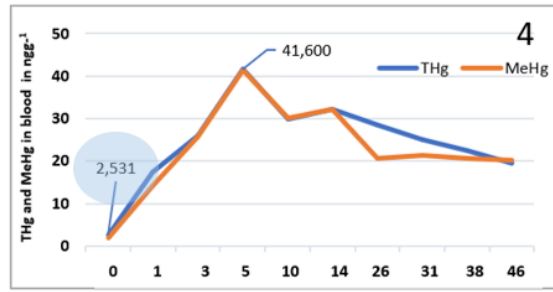
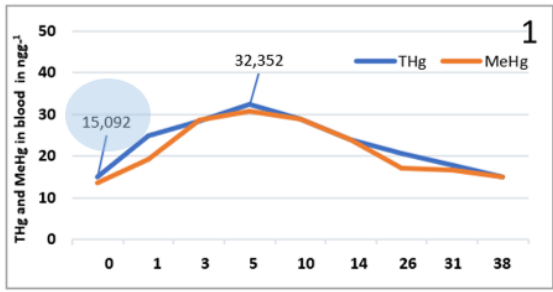


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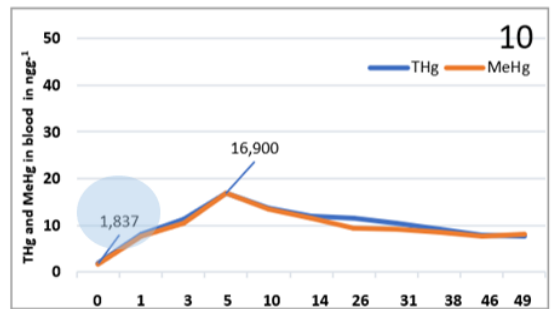
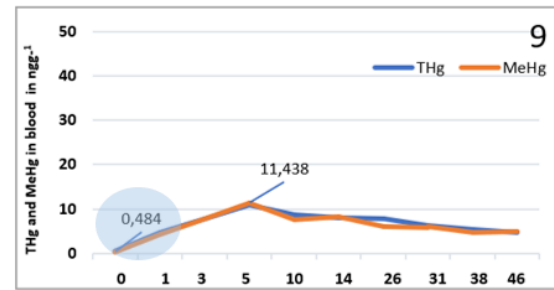
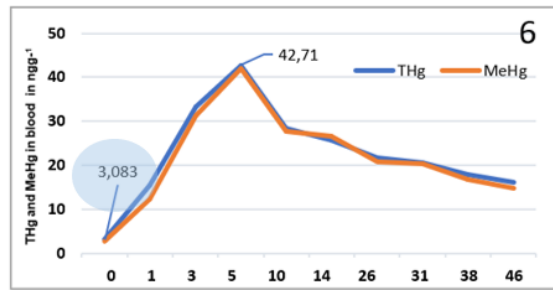
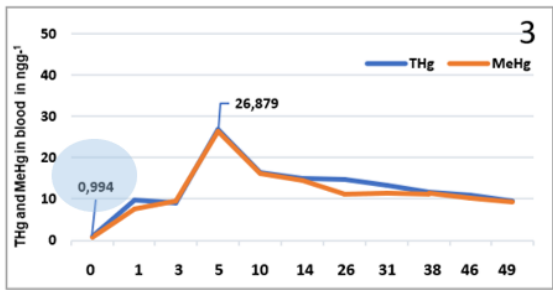
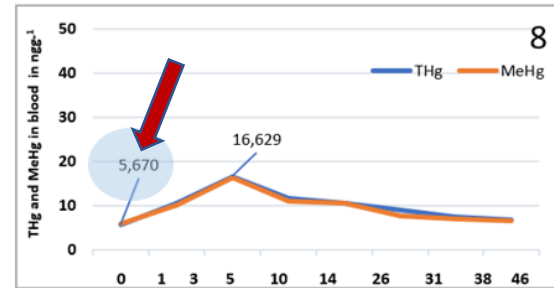
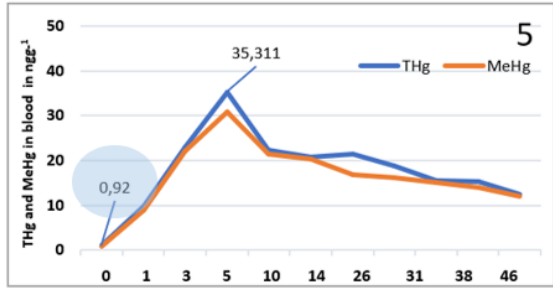
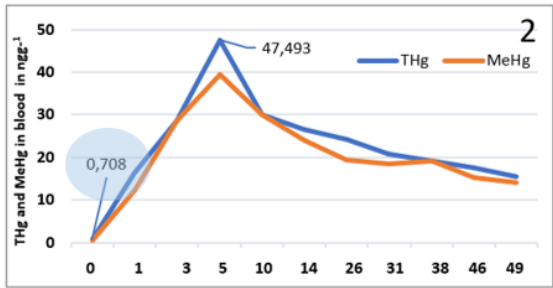
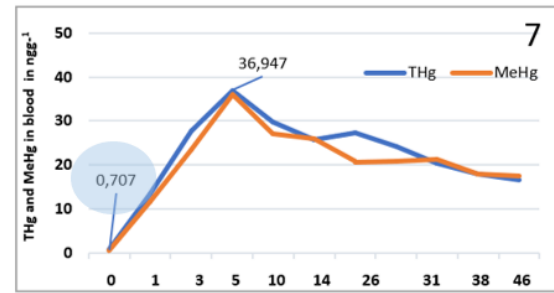
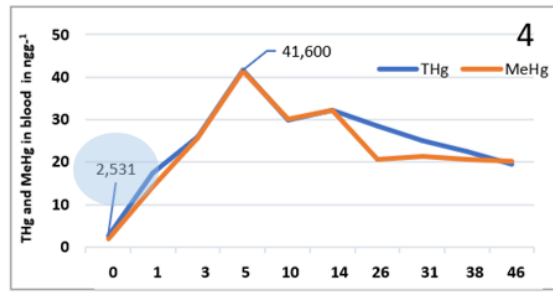
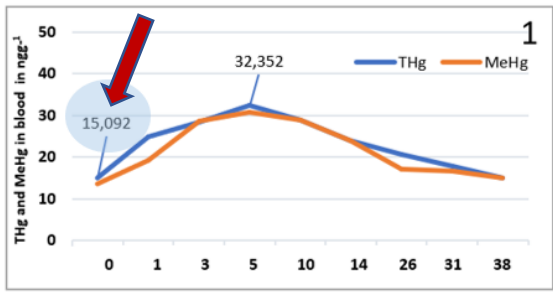
Total and methylmercury levels in blood over time – experimental group



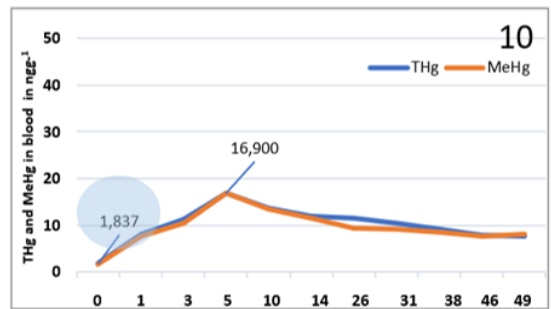
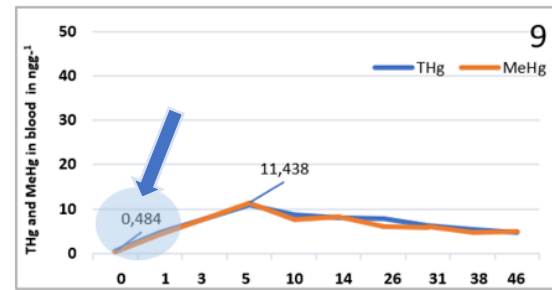
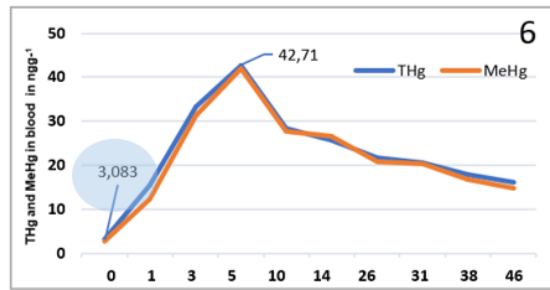
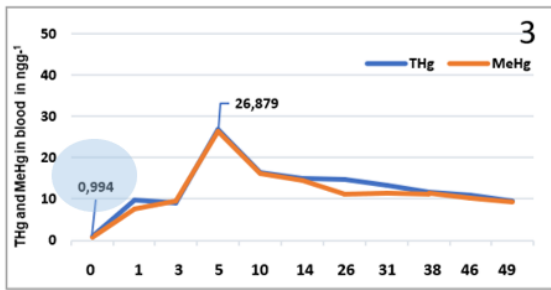
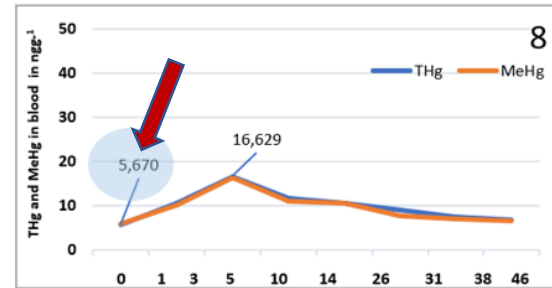
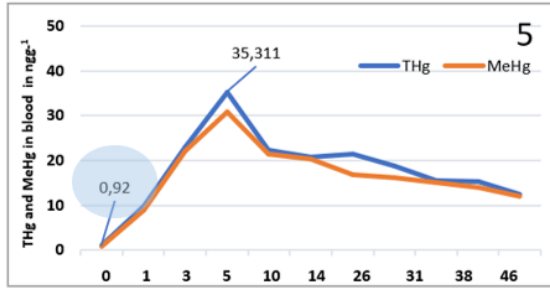
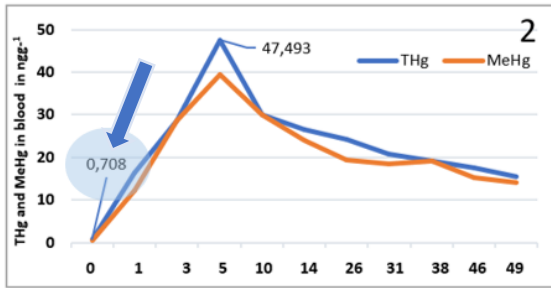
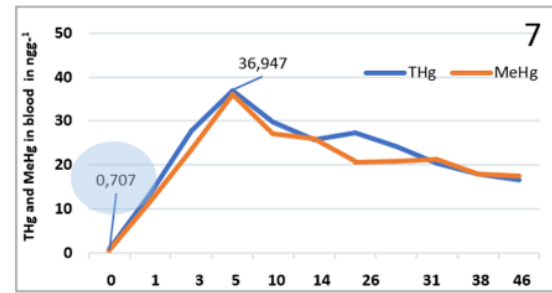
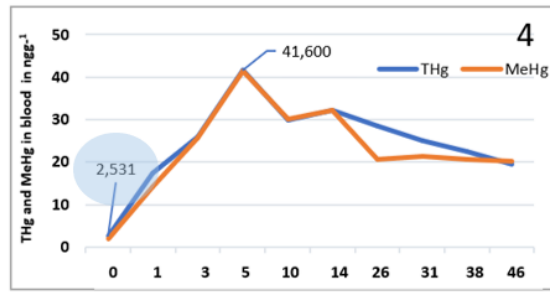
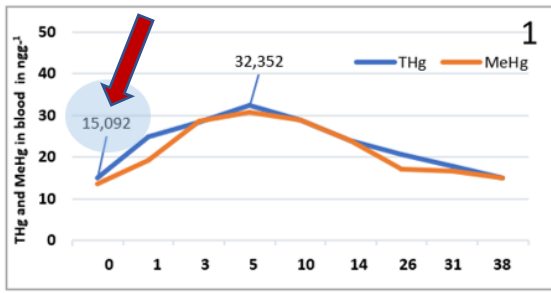




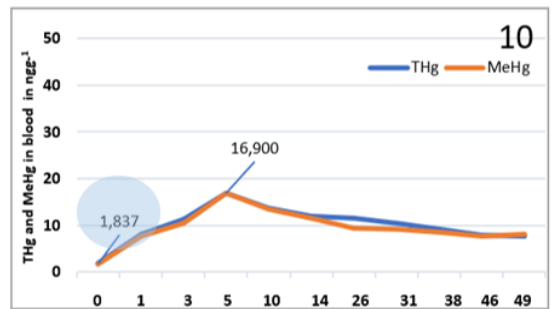
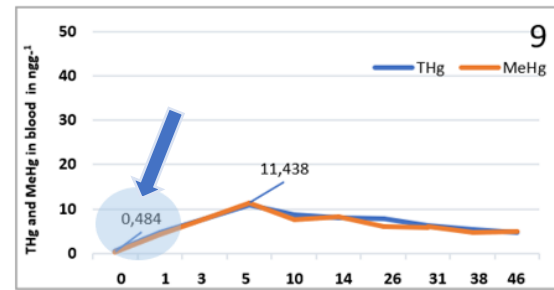
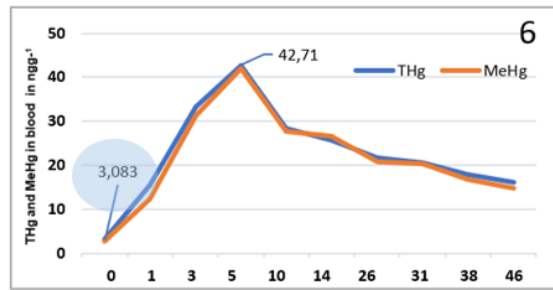
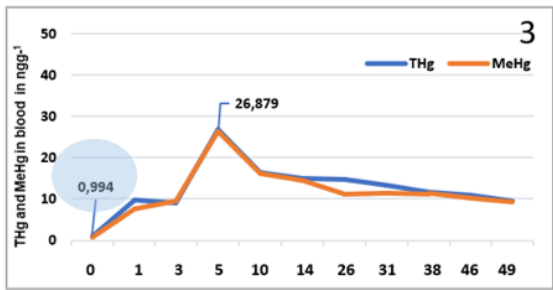
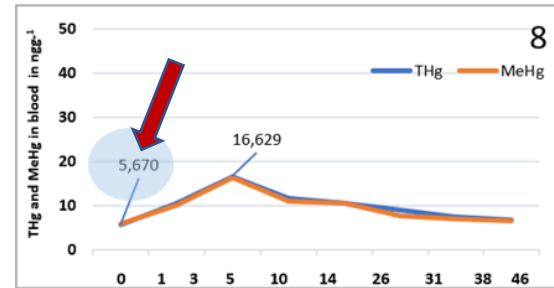
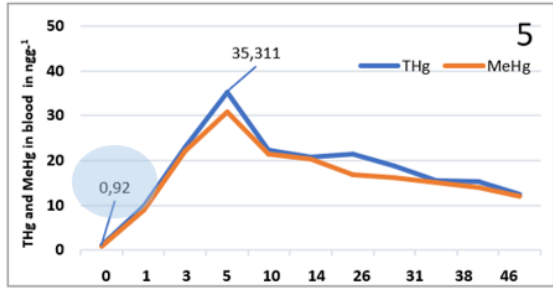
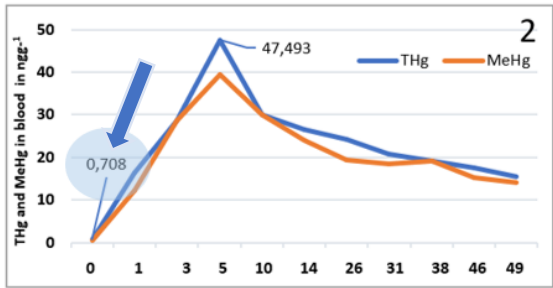
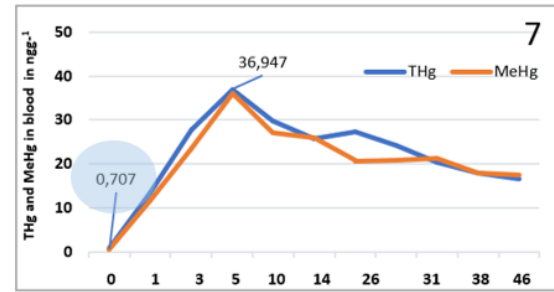
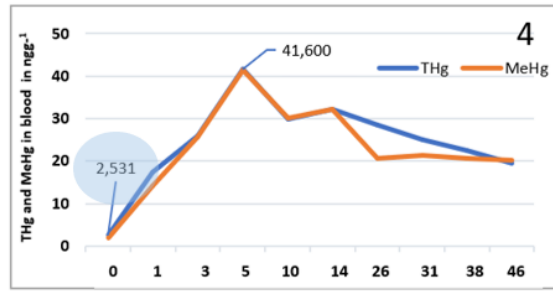
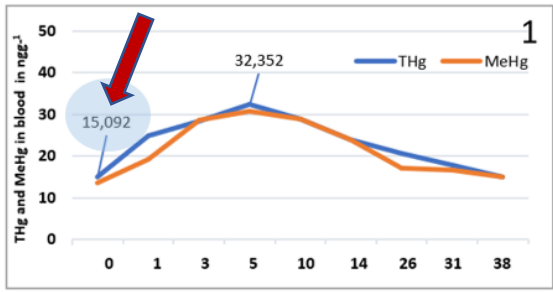
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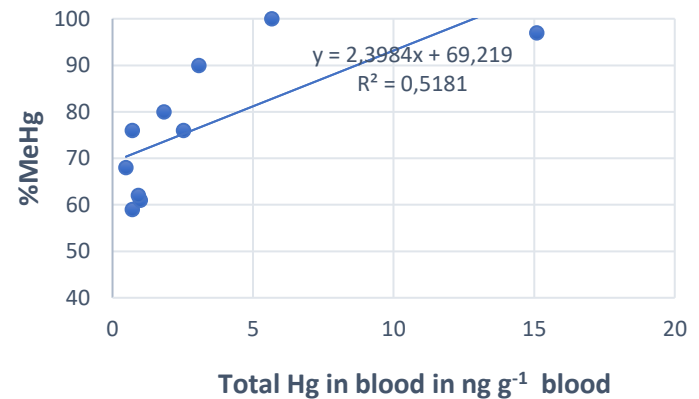


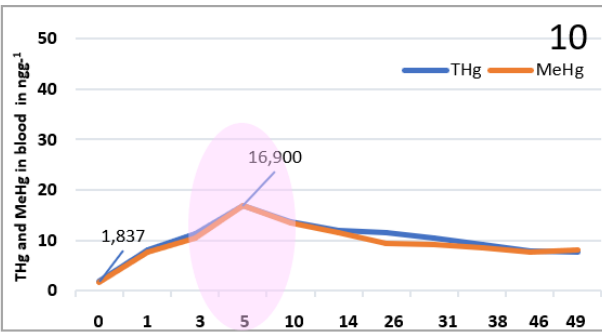
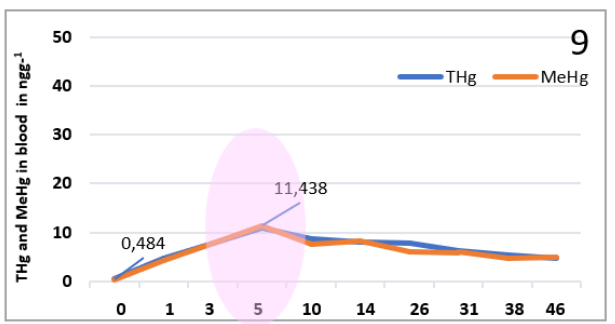
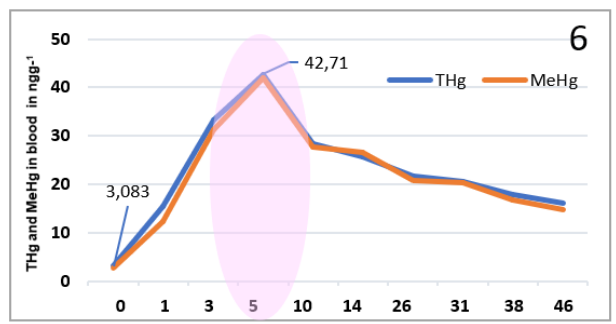
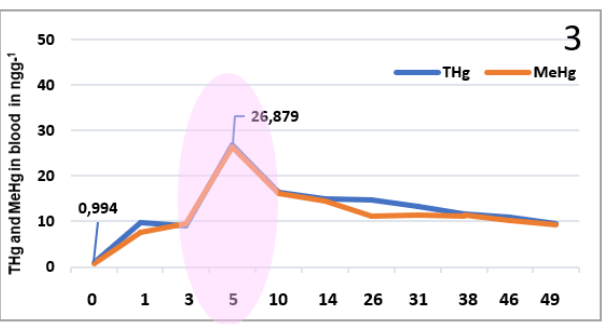
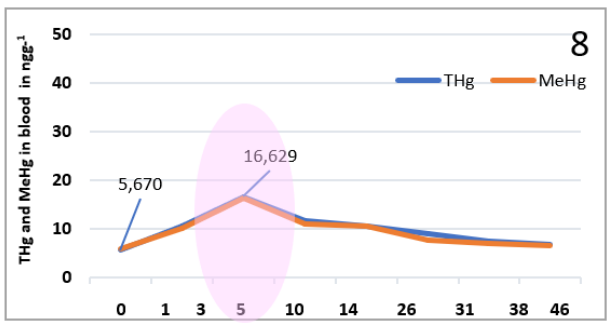
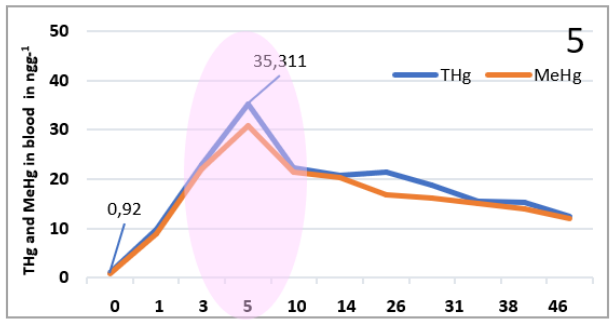
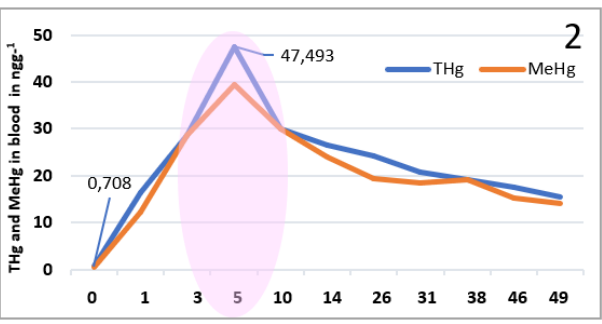
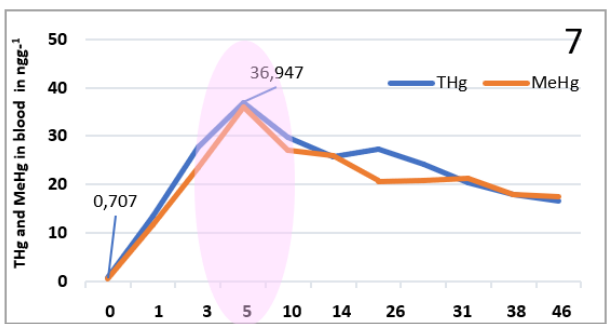
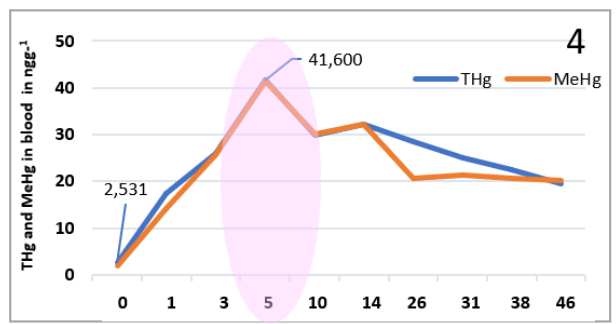
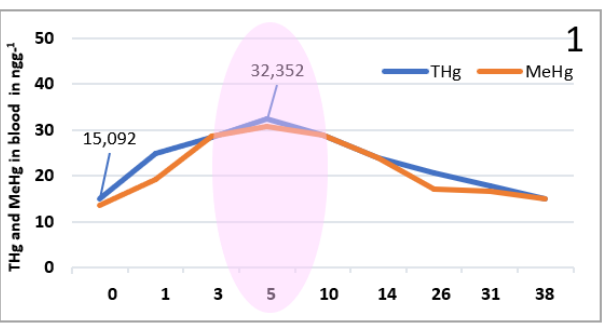
- different previous fish consumption habits → different starting concentrations of MeHg and THg in blood



- different previous fish consumption habits → different starting concentrations of MeHg and THg in blood
- lower THg concentrations – higher % of inorganic mercury

%MeHg dependent on THg in blood

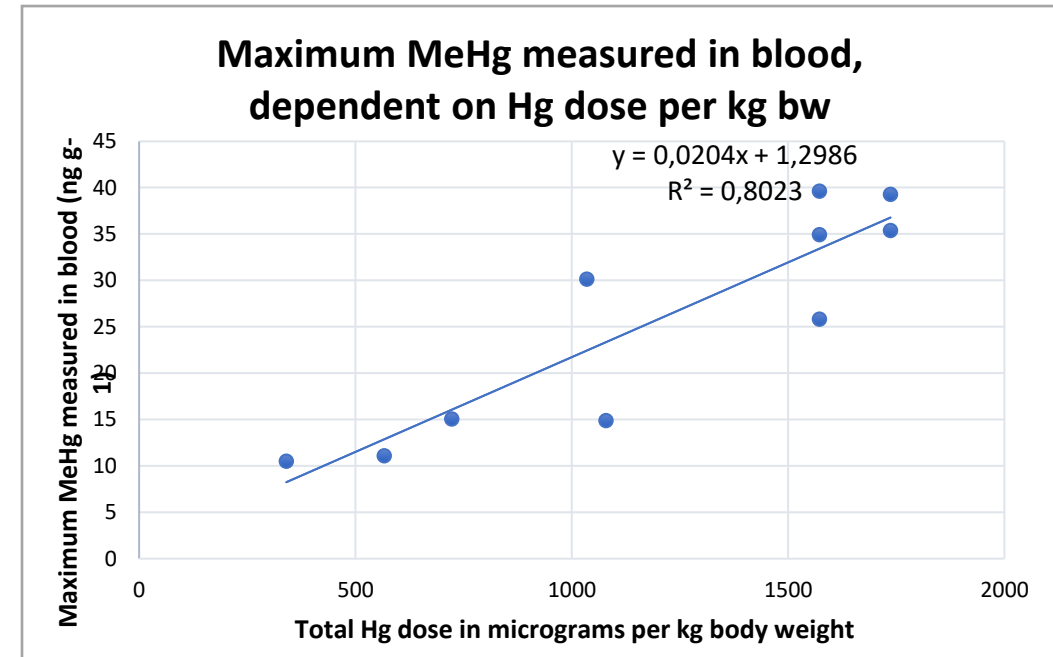
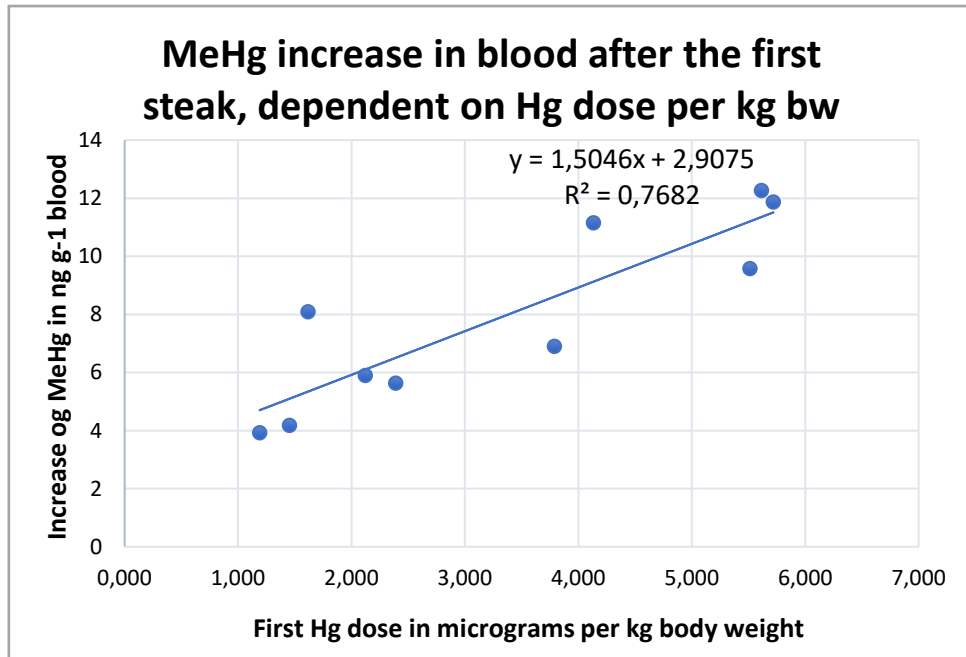




- all participants reached maximum THg and MeHg concentrations at the day 5 of the experimet
- practically all Hg was MeHg
- maximum concentrations varied significantly among the participants



- The increase in THg and MeHg levels in blood strongly depends on the **Hg concentration in tuna** and **dose per kilogram body weight**



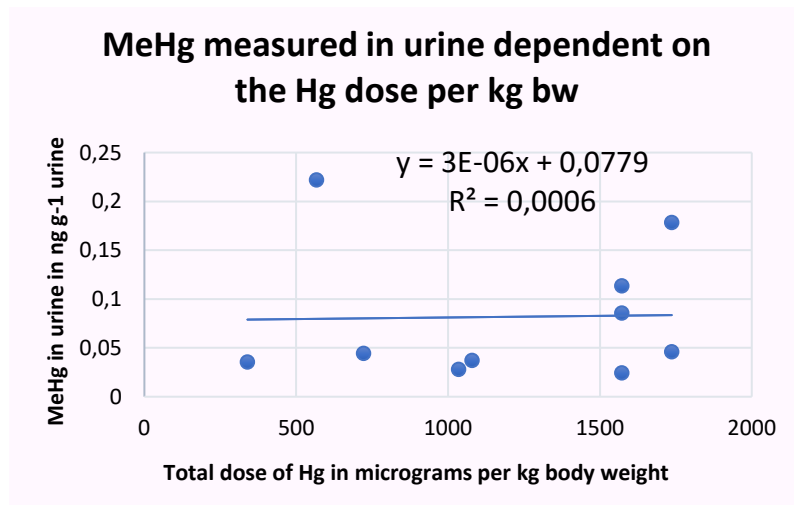
Total and methylmercury levels in urine over time – experimental group



Total and methylmercury levels in urine over time – experimental group



- MeHg measured in urine independent of the administered dose of Hg

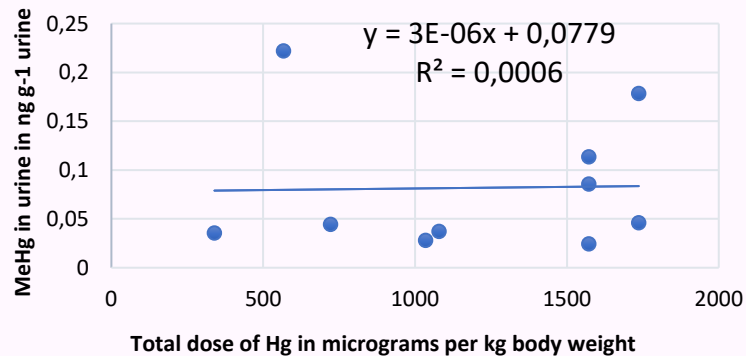


Total and methylmercury levels in urine over time – experimental group

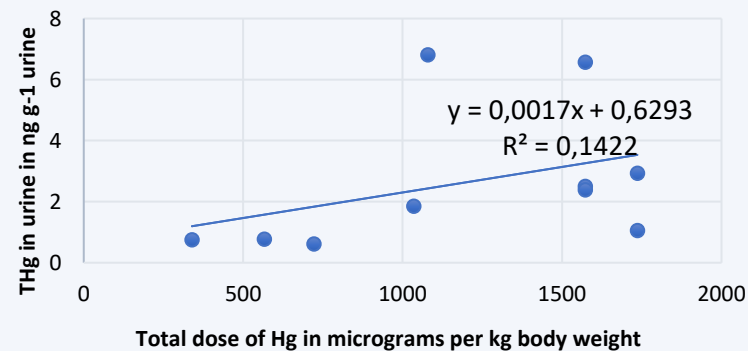


- MeHg measured in urine independent of the administered dose of Hg
- THg and IHg are very weakly dependent on the administered dose of Hg

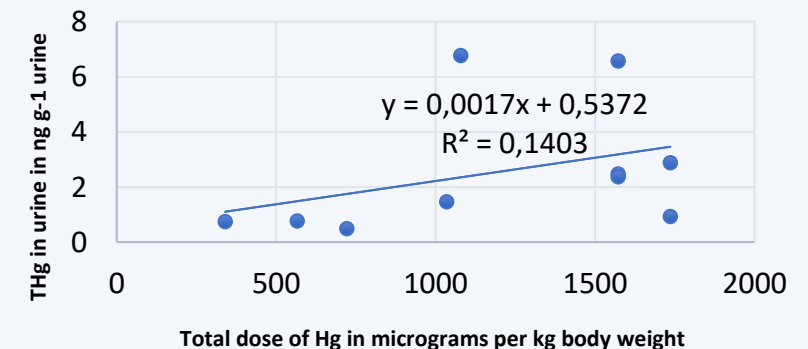
MeHg measured in urine dependent on the Hg dose per kg bw



THg measured in urine dependent on the Hg dose per kg bw



Maximum IHg measured in urine, dependent on total Hg dose per kg bw



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There are **large individual differences** in mercury levels in urine

→ Genetic factors? Is demethylation more efficient in people who often eat fish?



Conclusions

- Presented results are only preliminary – there is still a lot to do!
 - more measurements:
 - MeHg speciation in tuna
 - hair THg and MeHg, multielemental analysis
 - THg and MeHg in plasma, erythrocytes
 - Se speciation in in blood and plasma
 - Hg isotopic measurements
 - genotyping for single nucleotide polymorphisms previously found associated with Hg kinetics (e.g. APOE, GSH-related genes)
 - analyses of the results (multielemental + speciation)
 - comprehensive approach
 - improvement of kinetic models



We
are
here!

Thank you for your attention!

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