

**METHYL BROMIDE****Identity**

Name (parent)	Methyl bromide
UN number	1062
CAS number	74-83-9
Intervention value (AGW in mg/m ³)	200
Structure	CH ₃ Br

Occurrence

Chemical state (at 20°C)	Gas
Physical appearances	Colorless gas
Industrial products	Methyl bromide is used to fight pests, e.g. rats, insects, fungus and is used for production of brominated chemicals

Physicochemical properties

Molecular weight	95.0
Vapor pressure (mbar at 20°C)	1900
Octanol/water partition coefficient (log Po/w)	1.19 [1]
Water solubility (in g/100mL at 20 °C)	1.5

Toxicokinetics (parent)

Uptake by inhalation	In rats, approximately 50% is absorbed at low concentrations (50 – 300 nmol/L). At higher concentrations 37% (5700 nmol/L) and 27% (10400 nmol/L) were absorbed [2].
Uptake by skin absorption	In humans accidental reports indicate skin absorption [3]. In rats a rapid increase in the concentration of plasma bromide ion was observed in upon topical treatment [4].
Uptake via gastrointestinal tract	Rats given [¹⁴ C]–methyl bromide in corn oil absorbed nearly all methyl bromide, < 3% of radioactivity was excreted in feces [5].
Distribution	After absorption, methyl bromide is distributed throughout the body [6].
Metabolism	Conjugation with glutathione, both non-enzymatic and catalyzed by glutathione-S-transferase to methylglutathione. Methylglutathione is transformed in S-methylcysteine by transpeptidases [7].
Excretion via lungs	In rats 66 h following inhalation exposure <4% of the dose was exhaled 50% as methyl bromide and 50 % as CO ₂ [2]. In rats 72 h following oral administration 4 % of the dose was exhaled as methyl bromide and 32% as CO ₂ [5]. In rats 72 h following intraperitoneal administration 20% of the dose was exhaled as methyl bromide and 45% as CO ₂ [5]
Excretion via urine	In rats 66 h following inhalation exposure 50 % of the dose was excreted in urine [2]. In rats 72 h following oral administration 43 % of the dose was excreted in urine [5]. In rats 72 h following intraperitoneal administration 16% of the dose was excreted in urine [5]. [5]
Excretion via feces	Minor excretion route, independent of route of administration. In rats, 66 h following inhalation exposure or 72 h following oral or intraperitoneal administration <3% of the dose was excreted in feces [2, 5].

**METHYL BROMIDE****Toxicodynamics**

Mechanisms of toxicity	Neurological toxicity, lung injury: edema and hemorrhagic lesions, renal toxicity, irritation of the eyes and skin
Classifications for carcinogenicity	Group 3, IARC [8]
Classifications for reprotoxicity	<p>Exposure of female rats to dose levels up to 30 mg/kg/day and female rabbits to dose levels up to 10 mg/kg/day, during gestation days 6 to 15, were not fetotoxic or teratogenic to rat and rabbit fetuses. At these levels, maternal toxicity was evident [9].</p> <p>From a two-generation study in rats it was concluded that total bromine residues in the diet at levels of up to 500 ppm do not affect reproductive performance including viability of offspring in rats [10].</p> <p>In male animals, effects on the testes (delayed formation of spermatozoa, tubular degeneration, atrophy) have been observed in rats and mice exposed to 160-405 ppm for 1-6 weeks or 120 ppm for 13 weeks, cited in ATSDR [6]</p>
Classifications for sensitizing properties	Not classified



METHYL BROMIDE

Biological monitoring

Biomarkers	S-Methylcysteine adduct in hemoglobin	S-methylcysteine albumin adducts	Bromide in whole blood	Bromide in plasma	Bromide in serum	Bromide in urine
Molecular weight	135.18	135.18	79.904	79.904	79.904	79.904
Involved enzymatic metabolism	Glutathion-S-transferase, transpeptidases [7]	Glutathion-S-transferase, transpeptidases [7]	Nucleophilic displacement of the bromide ion [6]	Nucleophilic displacement of the bromide ion [6]	Nucleophilic displacement of the bromide ion [6]	Nucleophilic displacement of the bromide ion [6]
Biological material	Blood	Blood	Blood	Blood	Blood	Urine
Type of sample	Blood	Blood	Blood	Blood	Blood	Morning spot urine
Sampling strategy	Adducts are stable during the lifespan of globin (126 days)	< 1 month	< 1 month	< 1 month	< 1 month	< 1 month
Excretion pattern	Globin adducts are stable during the lifespan of globin, approximately 120 days. [11]	Biological half-life of albumin is 20 days [11]	Half-life of 12 days in healthy people, cited in ATSDR [6].	Biological half-life bromide in humans: 10-12 days [14, 15]	Biological half-life of the bromide-ion is 10 – 12 days [16]	Slow first order process with a half-life ranging from 10.5 to 14 days [17].
Materials	Vacutainer tubes, containing coagulant (e.g. heparin, EDTA)	Vacutainer tubes, containing coagulant (e.g. heparin, EDTA)	Blood collection tube with anticoagulant, e.g EDTA	Blood collection tube with lithium heparin	Hard plastic or glass collection tube without any anticoagulant	nitric acid rinsed high density polyethylene bottles [18]
Transportation	-20°C	-20°C	-20°C	-20°C [19]	-20°C	Cooled (chilled in with gel ice) [18]
Storage	-20°C	-20°C	-20°C [20]	-20°C	-20°C [21]	-30°C [22]
Stability	Not reported	Not reported	Not reported	7 days at -20°C (bromate) [19]	Not reported	Not reported
Pretreatment	Isolation of hemoglobin and Edman degradation	Isolation of albumin		Plasma was treated with acetonitrile to precipitate bulk proteins and lipids. The resulting	1:10 dilution with 2 mmol/L potassium thiocyanate as an internal standard and directly injected [21]; oxidation of bromide to bromine and reaction with phenolsulfon-	Methylation of bromide ion to methyl bromide [18, 22]



METHYL BROMIDE

				actetonitrile extract was further concentrated using nitrogen and then diluted in water [19]	phthalein followed by a photometric determination [23]; filter the sample through an 30 000 cut-off membrane ultrafilter-paper [24]; ultra filtration cartridge to remove substances with > 10000 Dalton and centrifuged at 3000 rpm for 5 min [25]	
Measurement principle	HPLC with precolumn fluorescent derivatization [11]; LC/ESMS/SIM [26]	HPLC with precolumn fluorescent derivatization[11]	GC-MS [27]	IC-ICP-MS [19]	Photometric method absorption was measured at 589 nm [23]; capillary electropherograph P/ACE-MDQ with a diode array detector [21]; Ion-chromatography (IC) [24] HPLC [25]	ECD-GC [22] ICP-MS [18]
Aliquot for 1 analysis	9 mL [11] 2 mL [26]	9 mL [11]	1 mL	1 mL [19] – 10 mL	400 µL [23]; ≥ 30 µL [21]; 0.5 mL [24]; 150 µL [25]	0.25 mL [28] 1 mL [18]
Limit of quantification	LOD: 200 fmol (HPLC with precolumn fluorescent derivatization) [11] LOD: 2 nmol/ g globin (HPLC-MS-MS) [29]	LOD: 200 fmol [11]	LOD: 1000 µg/L (GC-MS) [27] LOQ: 2000 µg/L (GC-MS) [27]	5 µg/L (method reporting limit) [19] 1 µg/L (instrument detection limit) [19]	LOD: 1000 µg/L (photometry) [23]; 4000 µg/L (capillary electropherograph P/ACE-MDQ) [21]; 20 µg/L (IC) [24]; 5000 µg/L (HPLC) [25] LOQ: 8000 µg/L (capillary electropherograph P/ACE-MDQ) [21]	LOD: 10 µg/ L (ECD-GC) [28] LOD: 100 µg / L (ICP-MS) [18]
Recommended adjustments	Adjustment for globin	Adjustment for globin	n/a	n/a	n/a	Adjustment for specific gravity [22]
Preferred units for expression of results	ng/g globin	ng/g globin	mg/L	µg/L [19]	mmol/L	nmol / mol creatinine
Conversion factor	n/a	n/a	$1 \mu\text{g} / \text{L} = 1.25 \cdot 10^{-2} \mu\text{mol} / \text{L}$	$1 \mu\text{g} / \text{L} = 1.25 \cdot 10^{-2} \mu\text{mol} / \text{L}$	$1 \mu\text{g} / \text{L} = 1.25 \cdot 10^{-2} \mu\text{mol} / \text{L}$	$1 \mu\text{g} / \text{L} = 1.25 \cdot 10^{-2} \mu\text{mol} / \text{L}$
Biological exposure value US	n/a	n/a	n/a	n/a	n/a	n/a
Biological	n/a	n/a	n/a	n/a	n/a	n/a



METHYL BROMIDE

exposure value Germany [30]						
Background level	16.4 nmol / g globin [31]	3.9 +/- 1.9 μ mol/l (range 1.4--6.5 μ mol/l) [32]	5.3 \pm 1.4 mg/L (mean \pm SD) (range: 2.5 to 11.7 mg/L) [33]	5 -7 mg/L [19]	4.13 \pm 1.05 mg/L (mean serum bromide level \pm SD) (Germany, base don a group of 64 healthy and non- occupationally exposed volunteers) [23]	3.9 \pm 1.1 mg / g creatinine (average \pm SD) (USA, based on 7 controls) [18]
Possible confounders	Occupational exposure to methyl bromide or other industrial products such as 1-bromopropane, 2-bromopropane and ethyl bromide. Fruit and vegetables are sometimes fumigated with methyl bromide.					
Remarks	<ol style="list-style-type: none">1. Not specific for methyl bromide exposure: bromide is also formed after exposure to among others 1-bromopropane, 2-bromopropane and ethyl bromide [22].2. Half-life of bromide ion in rats is dependent on the chloride status of the rat (Bromide half-lives varied from 2.5 days at high-chloride intake, via 3.5 days at normal dietary chloride intake, to 25 days at low-chloride intake)3. About 25% of the population in Western countries are so-called "non-conjugators", i.e., possess little or none of this enzyme which catalyzes the reaction between methyl bromide and glutathione [1]					



METHYL BROMIDE

References

1. DePierre JW. Mammalian Toxicity of Organic Compounds of Bromine and Iodine. *The Handbook of Environmental Chemistry*. 2003;3:205 - 51.
2. Medinsky MA, Dutcher JS, Bond JA, Henderson RF, Mauderly JL, Snipes MB, et al. Uptake and excretion of [¹⁴C]methyl bromide as influenced by exposure concentration. *Toxicol Appl Pharmacol*. 1985 Apr;78(2):215-25.
3. Hezemans-Boer M, Toonstra J, Meulenbelt J, Zwaveling JH, Sangster B, van Vloten WA. Skin lesions due to exposure to methyl bromide. *Arch Dermatol*. 1988 Jun;124(6):917-21.
4. Yamamoto O, Hori H, Tanaka I, Asahi M, Koga M. Experimental exposure of rat skin to methyl bromide: a toxicokinetic and histopathological study. *Arch Toxicol*. 2000 Feb;73(12):641-8.
5. Medinsky MA, Bond JA, Dutcher JS, Birnbaum LS. Disposition of [¹⁴C]methyl bromide in Fischer-344 rats after oral or intraperitoneal administration. *Toxicology*. 1984 Sep 14;32(3):187-96.
6. ATSDR. Toxicological profile for bromomethane. 1992. <http://www.atsdr.cdc.gov/>
7. Garnier R, Rambourg-Schepens MO, Muller A, Hallier E. Glutathione transferase activity and formation of macromolecular adducts in two cases of acute methyl bromide poisoning. *Occup Environ Med*. 1996 Mar;53(3):211-15.
8. IARC. Agents reviewed by the IARC monographs, volumes 1-99. 2008 12-05 [cited; Available from:]
9. Kaneda M, Hojo H, Teramoto S, Maita K. Oral teratogenicity studies of methyl bromide in rats and rabbits. *Food Chem Toxicol*. 1998 May;36(5):421-7.
10. Kaneda M, Hatakenaka N, Teramoto S, Maita K. A two-generation reproduction study in rats with methyl bromide-fumigated diets. *Food Chem Toxicol*. 1993 Aug;31(8):533-42.
11. Müller AMF, Hallier E, Westphal G, Schröder KR, Bolt HM. Determination of methylated globin and albumin for biomonitoring of exposure to methylating agents using HPLC with precolumn fluorescent derivatization. *Fresenius J Anal Chem*. 1994;350:712 - 5.
12. Hori H, Hyakudo T, Oyabu T, Ishimatsu S, Yamato H, Tanaka I. Effects of inhaled methyl bromide gas on the metabolic system and kinetics of bromine ion in rats. *J Uoeh*. 2002 Jun 1;24(2):151-60.
13. Honma T, Miyagawa M, Sato M, Hasegawa H. Neurotoxicity and metabolism of methyl bromide in rats. *Toxicol Appl Pharmacol*. 1985 Nov;81(2):183-91.
14. Rauws AG. Pharmacokinetics of bromide ion--an overview. *Food Chem Toxicol*. 1983 Aug;21(4):379-82.
15. Sangster B, Blom JL, Sekhuis VM, Loeber JG, Rauws AG, Koedam JC, et al. The influence of sodium bromide in man: a study in human volunteers with special emphasis on the endocrine and the central nervous system. *Food Chem Toxicol*. 1983 Aug;21(4):409-19.
16. Hustinx WN, van de Laar RT, van Huffelen AC, Verwey JC, Meulenbelt J, Savelkoul TJ. Systemic effects of inhalational methyl bromide poisoning: a study of nine cases occupationally exposed due to inadvertent spread during fumigation. *Br J Ind Med*. 1993 Feb;50(2):155-9.
17. Ryan M, Baumann RJ. Use and monitoring of bromides in epilepsy treatment. *Pediatr Neurol*. 1999 Aug;21(2):523-8.
18. Hanley KW, Petersen M, Curwin BD, Sanderson WT. Urinary bromide and breathing zone concentrations of 1-bromopropane from workers exposed to flexible foam spray adhesives. *Ann Occup Hyg*. 2006 Aug;50(6):599-607.
19. Quinones O, Snyder SA, Cotruvo JA, Fisher JW. Analysis of bromate and bromide in blood. *Toxicology*. 2006 Apr 17;221(2-3):229-34.
20. Corina DL, Ballard KE, Grice D, Eade OE, Lucas K. Bromide measurement in serum and urine by an improved gas chromatographic method. *J Chromatogr*. 1979 Mar 1;162(3):382-7.
21. Pascali JP, Trettene M, Bortolotti F, de Paoli G, Gottardo R, Tagliaro F. Direct analysis of bromide in human serum by capillary electrophoresis. *J Chromatogr B Analyt Technol Biomed Life Sci*. 2006 Jul 24;839(1-2):2-5.
22. Kawai T, Zhang ZW, Moon CS, Shimbo S, Watanabe T, Matsuda-Inoguchi N, et al. Comparison of urinary bromide levels among people in East Asia, and the effects of dietary intakes of cereals and marine products. *Toxicol Lett*. 2002 Aug 5;134(1-3):285-93.
23. Muller M, Reinhold P, Lange M, Zeise M, Jurgens U, Hallier E. Photometric determination of human serum bromide levels--a convenient biomonitoring parameter for methyl bromide exposure. *Toxicol Lett*. 1999 Jun 30;107(1-3):155-9.
24. Michigami Y, Yamamoto Y, Ueda K. Determination of nitrite, sulphate, bromide and nitrate in human serum by ion chromatography. *Analyst*. 1989 Oct;114(10):1201-5.

**METHYL BROMIDE**

25. Tanaka H, Nakajima M, Fujisawa M, Kasamaki M, Hori Y, Yoshikawa H, et al. Rapid determination of total bromide in human serum using an energy-dispersive X-ray spectrometer. *Biol Pharm Bull.* 2003 Apr;26(4):457-61.
26. Sannolo N, Mamone G, Ferranti P, Basile A, Malorni A. Biomonitoring of human exposure to methyl bromide by isotope dilution mass spectrometry of peptide adducts. *J Mass Spectrom.* 1999 Oct;34(10):1028-32.
27. Kage S, Kudo K, Ikeda H, Tsujita A, Ikeda N. Determination of bromide in whole blood and urine from humans using gas chromatography-mass spectrometry. *J Chromatogr B Analyt Technol Biomed Life Sci.* 2005 Mar 25;817(2):335-9.
28. Kawai T, Okada Y, Odachi T, Horiguchi S, Zhang Z, Moon C, et al. Diffusive sampling and biological monitoring of 2-bromopropane. *Arch Environ Contam Toxicol.* 1997 Jul;33(1):23-8.
29. Ferranti P, Sannolo N, Mamone G, Fiume I, Carbone V, Tornqvist M, et al. Structural characterization by mass spectrometry of hemoglobin adducts formed after in vivo exposure to methyl bromide. *Carcinogenesis.* 1996 Dec;17(12):2661-71.
30. Deutsche, Forschungsgemeinschaft. List of MAK and BAT values 2008, Commission for the investigation of health hazards of chemical compounds in the work area, Report no. 44. 2008.
31. Bailey E, Connors TA, Farmer PB, Gorf SM, Rickard J. Methylation of cysteine in hemoglobin following exposure to methylating agents. *Cancer Res.* 1981 Jun;41(6):2514-7.
32. Armstrong MD. N-delta-acetylornithine and S-methylcysteine in blood plasma. *Biochim Biophys Acta.* 1979 Nov 1;587(4):638-42.
33. Olszowy HA, Rossiter J, Hegarty J, Geoghegan P. Background levels of bromide in human blood. *J Anal Toxicol.* 1998 May-Jun;22(3):225-30.