

response. The data on the gastrointestinal effects of copper must be used with caution, as the effects observed are influenced by the concentration of ingested copper to a greater extent than the total mass or dose ingested in a 24-hour period. Recent studies have delineated the threshold for the effects of copper in drinking-water on the gastrointestinal tract, but there is still some uncertainty regarding the long-term effects of copper on sensitive populations, such as carriers of the gene for Wilson disease and other metabolic disorders of copper homeostasis.

### **Cyanazine**

Cyanazine (CAS No. 21725-46-2) is a member of the triazine family of herbicides. It is used as a pre-emergence and post-emergence herbicide for the control of annual grasses and broadleaf weeds. It can be degraded in soil and water by microorganisms and by hydrolysis.

Guideline value	0.0006 mg/l (0.6 µg/l)
Occurrence	Has been detected in surface water and groundwater, usually at concentrations of a few micrograms per litre, although levels as high as 1.3 and 3.5 mg/l have been measured in surface water and groundwater, respectively
TDI	0.198 µg/kg body weight based on a NOAEL of 0.198 mg/kg body weight for hyperactivity in male rats in a 2-year toxicity/carcinogenicity study, using an uncertainty factor of 1000 (100 for interspecies and intraspecies variation and 10 for limited evidence of carcinogenicity)
Limit of detection	0.01 µg/l by GC-MS
Treatment performance	0.1 µg/l should be achievable using GAC
Guideline value derivation	
• allocation to water	10% of TDI
• weight	60 kg adult
• consumption	2 litres/day
Assessment date	1998
Principal reference	WHO (2003) <i>Cyanazine in drinking-water</i>

On the basis of the available mutagenicity data on cyanazine, evidence for genotoxicity is equivocal. Cyanazine causes mammary gland tumours in rats but not in mice. The mechanism of mammary gland tumour development in rats is currently under investigation and may prove to be hormonal. Cyanazine is also teratogenic in rats at dose levels of 25 mg/kg body weight per day and higher.

### **Cyanide**

Cyanides can be found in some foods, particularly in some developing countries, and they are occasionally found in drinking-water, but usually only at very low concentrations. However, there are occasions on which large spills of cyanide, associated with industry, occur, and these can give rise to very high concentrations in drinking-water source waters, particularly surface waters.

Reason for not establishing a guideline value	Occurs in drinking-water at concentrations well below those of health concern, except in emergency situations following a spill to a water source
Assessment date	2009
Principal references	IPCS (2004) <i>Hydrogen cyanide and cyanides</i> WHO (2009) <i>Cyanide in drinking-water</i>

Cyanide is highly acutely toxic. It is detoxified in the liver by first-pass metabolism following oral exposure. As a consequence, exposure to a dose spread over a longer period, through a day, for example, will result in lower toxicity, or higher tolerance, than the same dose given in a single bolus dose. Exposure to high doses can give rise to thyroid toxicity as a secondary effect of exposure due to the inhibition of iodine uptake from the thiocyanate generated through the detoxifying action of rhodanese. It is difficult to interpret human data in view of the difficulty in assessing the actual absorbed dose in humans following acute fatal intoxication and the lack of well-conducted studies on sublethal toxicity.

There is a need for guidance regarding concentrations that would not be of concern for public health following short-term exposure to cyanide. However, because cyanide is unlikely to occur in drinking-water at concentrations of health concern, it is considered unnecessary to derive a formal guideline value for short-term exposure to cyanide.

The data on acute exposure to cyanide are unsuitable for use in deriving a health-based value for short-term exposure because of the high uncertainty surrounding the data. Using the NOAEL for effects on the reproductive organs of male rats in a 13-week study and an uncertainty factor of 100, a TDI of 0.045 mg/kg body weight can be derived. Because this health-based value is intended for short-term use and exposure would not exceed 5 days, it is considered to be acceptable to allocate 40% of the TDI to drinking-water to allow for exposure to cyanogenic glycosides in food. Therefore, assuming a 60 kg adult drinking 2 litres of water per day with an allocation of 40% of the TDI to drinking-water, a health-based value of 0.5 mg/l (rounded value) for short-term exposure can be calculated.

This health-based value is well below the level that is normally considered to be of health concern for humans. Cyanide is rapidly detoxified, and exposure spread throughout the day will further reduce the potential for effects. This health-based value would be suitable for use for a limited period of up to 5 days, which is the longest period likely to be required under the circumstances of such an emergency. However, it is probable that, in most circumstances, this value will be highly conservative for short-term exposure.

It should be noted that the lowest reported odour threshold for cyanide in drinking-water is 0.17 mg/l, which is below the short-term health-based value. It is therefore possible that a small number of individuals will detect cyanide by odour at concentrations below the health-based value.

The health-based value relates to total cyanide concentration at the tap, including cyanide from cyanogen chloride in drinking-water as a by-product of disinfection with chlorine. Cyanogen chloride rapidly breaks down to cyanide in the distribution system or when ingested. As the low levels of cyanide normally found in drinking-water