Assessment date	2004
Principal reference	WHO (2005) Dichloroacetic acid in drinking-water

IARC reclassified DCA as Group 2B (possibly carcinogenic to humans) in 2002, based on the absence of data on human carcinogenicity and sufficient evidence of its carcinogenicity in experimental animals. This classification was based primarily on findings of liver tumours in rats and mice. Genotoxicity data are considered to be inconclusive, particularly at lower doses. Glycogen deposition, peroxisome proliferation, changes in signal transduction pathways and DNA hypomethylation have all been observed following DCA exposure and have been hypothesized to be involved in its carcinogenicity. However, the available data are not sufficient to establish a cancer mode of action with reasonable certainty, especially at the very low exposure levels expected to apply to humans ingesting chlorinated drinking-water. Recent data suggest that there may be more than one mechanism leading to tumours, as altered hepatic foci from treated mice were found to have three different types of cellular characteristics.

Dichlorobenzenes (1,2-dichlorobenzene, 1,3-dichlorobenzene, 1,4-dichlorobenzene)

The dichlorobenzenes (DCBs) are widely used in industry and in domestic products such as odour-masking agents, chemical dyestuffs and pesticides. Sources of human exposure are predominantly air and food.

Guideline values	1,2-Dichlorobenzene: 1 mg/l (1000 μg/l)
	1,4-Dichlorobenzene: 0.3 mg/l (300 μg/l)
Occurrence	Have been found in raw water sources at levels as high as 10 μg/l and in drinking-water at concentrations up to 3 μg/l; much higher concentrations (up to 7 mg/l) present in contaminated groundwater
TDIs	1,2-Dichlorobenzene: 429 µg/kg body weight, based on a NOAEL of 60 mg/kg body weight per day for tubular degeneration of the kidney identified in a 2-year mouse gavage study, adjusting for daily dosing and using an uncertainty factor of 100 (for interspecies and intraspecies variation)
	1,4-Dichlorobenzene: 107 µg/kg body weight, based on a LOAEL of 150 mg/kg body weight per day for kidney effects identified in a 2-year rat study, adjusting for daily dosing and using an uncertainty factor of 1000 (100 for interspecies and intraspecies variation and 10 for the use of a LOAEL instead of a NOAEL and the carcinogenicity end-point)
Limit of detection	0.01–0.25 $\mu g/l$ by gas–liquid chromatography with ECD; 3.5 $\mu g/l$ by GC using a photoionization detector
Treatment performance	0.01 mg/l should be achievable using air stripping
Guideline value derivation	
 allocation to water 	10% of TDI
weight	60 kg adult
 consumption 	2 litres/day

GUIDELINES FOR DRINKING-WATER QUALITY

Additional comments	Guideline values for both 1,2- and 1,4-DCB far exceed their lowest reported taste thresholds in water of 1 and 6 µg/l, respectively.
Assessment date	1993
Principal reference	WHO (2003) Dichlorobenzenes in drinking-water

Reason for not establishing a guideline value	Available data inadequate to permit derivation of health-based guideline value for 1,3-dichlorobenzene
Assessment date	1993
Principal reference	WHO (2003) Dichlorobenzenes in drinking-water

1,2-Dichlorobenzene

1,2-DCB is of low acute toxicity by the oral route of exposure. Oral exposure to high doses of 1,2-DCB affects mainly the liver and kidneys. The balance of evidence suggests that 1,2-DCB is not genotoxic, and there is no evidence for its carcinogenicity in rodents.

1,3-Dichlorobenzene

There are insufficient toxicological data on this compound to permit a guideline value to be proposed, but it should be noted that it is rarely found in drinking-water.

1.4-Dichlorobenzene

1,4-DCB is of low acute toxicity, but there is evidence that it increases the incidence of renal tumours in rats and of hepatocellular adenomas and carcinomas in mice after long-term exposure. IARC has placed 1,4-DCB in Group 2B (possibly carcinogenic to humans). 1,4-DCB is not considered to be genotoxic, and the relevance for humans of the tumours observed in experimental animals is doubtful.

1,1-Dichloroethane

1,1-Dichloroethane is used as a chemical intermediate and solvent. There are limited data showing that it can be present at concentrations of up to 10 μ g/l in drinkingwater. It is primarily of concern for groundwater.

Reason for not establishing a guideline value	Available data inadequate to permit derivation of health-based guideline value
Assessment date	1993
Principal reference	WHO (2003) 1,1-Dichloroethane in drinking-water

1,1-Dichloroethane is rapidly metabolized by mammals to acetic acid and a variety of chlorinated compounds. It is of relatively low acute toxicity, and limited data are available on its toxicity from short-term and long-term studies. There is limited in vitro evidence of genotoxicity. One carcinogenicity study by gavage in mice and rats provided no conclusive evidence of carcinogenicity, although there was some evidence of an increased incidence of haemangiosarcomas in treated animals.