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Highlights

- First quantitative study of fetomaternal transfer of CLO and its metabolites
- Highly accurate quantification using LC-MS/MS analysis
- Clear demonstration of the rapid passage of CLO through the placental barrier
- Metabolite-dependent differences observed in blood pharmacokinetics and residual levels

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Quantitative elucidation of maternal-to-fetal transfer of neonicotinoid pesticide clothianidin and its metabolites in mice

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32 **ABSTRACT**

33 Neonicotinoids (NNs), a widely used class of systemic pesticides, are regarded as
34 exhibiting selective toxicity in insects. However, NNs are suspected of exerting adverse
35 effects on mammals as well, including humans. To date, only adult male animal models
36 have been subjected to general toxicity studies of NNs; fetuses have yet to be considered
37 in this context. Here, we focused on the NN clothianidin (CLO) for the first quantitative
38 LC-MS/MS analysis of maternal-to-fetal transfer and residual property of once-daily
39 (single or multiple days), orally administered CLO and its metabolites in mice. The results
40 revealed the presence of CLO and its five metabolites at approximately the same
41 respective blood levels in both dams and fetuses. In the dams, CLO showed a peak value
42 1 h after administration, after which levels rapidly decreased at 3 and 6 h. In the fetuses
43 of each group, levels of CLO were almost the same as those observed in the corresponding
44 dams. The present results clearly demonstrated rapid passage of CLO through the
45 placental barrier. However, metabolite-dependent differences observed in blood
46 pharmacokinetics and residual levels. This is the first quantitative demonstration of the
47 presence of CLO and its metabolites in fetal mouse blood.

48

49

50 **Key words:** clothianidin, maternal-to-fetal transfer, metabolites, mouse, neonicotinoid,
51 quantitative LC-MS/MS

52 **1. Introduction**

53 The systemic pesticides collectively referred to as “neonicotinoids” (NNs) are
54 chemically similar to nicotine. While NNs have been thought to exhibit low toxicity in
55 birds and mammals, they are known to exert agonistic effects on the nicotinic
56 acetylcholine receptors (nAChRs) of insects, affecting their central nervous system and
57 leading to eventual paralysis and death (Ihara *et al.*, 2003; Tomizawa and Casida, 2005).
58 These systemic pesticides are taken up by, and transported throughout, plants, thereby
59 protecting them from harmful insects for extended durations. In birds and mammals, the
60 NNs have been shown to cause less toxicity than organophosphate and carbamate
61 insecticides (Tomizawa and Casida, 2005). Vertebrates and insects have differently
62 composed receptor subunits and receptor structures, which accounts for the higher affinity
63 of NNs for the nAChRs of insects than for their counterpart vertebrate receptors (Latli *et*
64 *al.*, 1999; Tomizawa and Casida, 2005).

65 However, recent studies have reported reproductive toxicity in quails (Tokumoto *et al.*,
66 2013; Hoshi *et al.*, 2014) and adverse neurobehavioral effects in mice and rats (Hirano *et*
67 *al.*, 2015, 2018; Dhouib *et al.*, 2017; Takada *et al.*, 2018; Yoneda *et al.*, 2018). In addition,
68 it has been shown that exposure of perinatal mice to NNs causes abnormalities in germ
69 cells (Yanai *et al.*, 2017) and induction of anxiety-like behaviors (Tanaka , 2012; Sano *et*
70 *al.*, 2016) in their offspring. Such studies have suggested that NNs are almost certainly
71 transferred from mother to fetus. Epidemiological investigations have also detected NNs
72 in the urine of Japanese adults (Ueyama *et al.*, 2015) as well as Japanese children (Ikenaka
73 *et al.*, 2019). It is therefore generally assumed that humans are indeed exposed to NNs on
74 a daily basis. The residue standard of pesticides is set based on the acceptable daily intake
75 (ADI) value calculated from the results of animal toxicity studies, in which almost
76 exclusively adult individuals have been examined. Generally, fetuses are more sensitive
77 to potentially toxic chemicals than are adults. Even if safe for adults, pesticides are not
78 always equally safe for fetuses. At the very least, fetal safety studies require the collection
79 of data regarding the extent to which pesticides are transferred from mother to fetus. Some
80 chemicals have previously been reported in samples of umbilical cord blood (Todaka and

81 Mori, 2002), thereby demonstrating fetal exposure. However, no quantitative or time-
82 dependent analyses of maternal-to-fetal transfer of NNs have been reported.

83 The potency and effectiveness of NNs are determined primarily by the structural
84 features of the overall molecule (Tomizawa and Casida, 2005). The molecular structures
85 change with metabolism, producing several different metabolites (Roberts and Hutson,
86 1999; Klein, 2001, 2003; Environmental Protection Agency, 2003). Due to such changes,
87 certain metabolites exhibit reduced affinity for insect receptors and increased affinity for
88 mammalian receptors (Casida, 2011). A desmethyl metabolite of the NN thiamethoxam
89 causes single-cell necrosis and an increase in apoptosis in the mouse liver (Green *et al.*,
90 2005). Such findings demonstrate the importance of including consideration of
91 metabolites in investigations of NN toxicity.

92 For this study, we selected clothianidin (CLO), one of the NNs reported to cause
93 neurobehavioral effects in mice (Hirano *et al.*, 2015, 2018). We then performed a
94 quantitative analysis of maternal-to-fetal transfer of CLO and its metabolites in mice.

95

96 **2. Materials and methods**

97 *2.1. Experimental animals and procedure*

98 Male and female ICR mice (8-12 weeks old) were purchased from Japan SLC
99 (Hamamatsu, Shizuoka, Japan). All mice were maintained in individual (40.5 × 20.5 ×
100 18.5 cm) ventilated cages (Sealsafe Plus Mouse; Tecniplast, Buguggiate, Italy) under
101 controlled temperature (23 ± 2°C) and humidity (50 ± 10%) on a 14-h light/10-h dark
102 cycle at the Kobe University Life-Science Laboratory with *ad libitum* access to a pellet
103 diet (DC-8; Clea Japan, Tokyo, Japan) and water. Female mice in proestrus were mated
104 1:1 with males overnight, and females that had a vaginal plug at 12:00 noon the following
105 day were designated as being at embryonic day (E) 0.5. We administered CLO (purity:
106 95%, extracted from Dantotsu[®] Sumitomo Chemical Co., Tokyo, Japan; Hirano *et al.*,
107 2015) or vehicle (0.5% carboxymethylcellulose, 10 mL/kg) to pregnant ICR mice by oral
108 gavage, and the treatment group was divided into a single-dose administration group and
109 a daily (4 or 9 days) single-dose administration group (Fig. 1). In all groups (n = 5-6 mice

110 in each group), the administration concentration was set to 65 mg/kg/day with reference
111 to the no-observed-adverse-effect level (NOAEL) of 65.1 mg/kg from a 78-wk dietary
112 carcinogenicity study in female mice (Food and Agriculture Organization of the United
113 Nations, 2016; Uneme *et al.*, 2006), and two to four fetuses were selected from each dam.
114 The single-dose administration group was divided into 4 subgroups, and blood was
115 collected from the dams (posterior vena cava) and the fetuses (heart) under anesthesia
116 with isoflurane at 1, 3, and 6 h after CLO administration on E18.5, respectively, after
117 which, the animals were euthanized (Fig. 1A). The daily single-dose administration
118 groups received CLO once per day from E10.5 and E15.5 to E18.5, and blood was
119 collected from the mice 6 h after the final administration of CLO by the method described
120 above (Fig. 1B). The groups were designated by time of administration as CLO-1h, CLO-
121 3h, CLO-6h, CLO4d-6h, CLO9d-6h. This study was approved by the Institutional Animal
122 Care and Use Committee (Permission #26-05-07) and was carried out according to the
123 Kobe University Animal Experimentation Regulations.

124

125 2.2. Chemicals

126 The CLO standard (purity: 99.9%) was purchased from Fluka (Buchs, Switzerland).
127 The CLO-d3 (purity: >97.0%) was purchased from Hayashi Junyaku (Osaka, Japan). The
128 1-methyl-3-nitroguanidine (MNG) (purity: >98.0%) was purchased from Tokyo
129 Chemical Industry (Tokyo, Japan). Desmethyl-CLO (dm-CLO), desmethyl-desnitro-
130 CLO (dm-dn-CLO), desnitro-CLO (dn-CLO) and CLO-urea were synthesized at Toho
131 University (Supplement data).

132

133 2.3. Extraction of neonicotinoids from blood samples

134 Here, 100 μ l of 100-ppb CLO-d3 were placed in a 10-ml glass test tube as an internal
135 standard substance. After the addition of 10 μ l of blood and mixing the sample well, 0.5
136 ml of 1% formic acid in acetonitrile was added for protein precipitation. The tube contents
137 were then briefly vortex-mixed. Then, 0.5 ml of acetonitrile and 0.5 ml of methanol were
138 added to the tube, and the contents were each briefly vortex-mixed. The contents were

139 then sonicated for 10 min. Samples of supernatant were separated and used for the next
140 extraction and purification step. Two types of solid-phase extraction cartridges, InertSep
141 Phospholipid Remover (PR) (GL Science, Tokyo, Japan) and InertSep PSA (PSA) (GL
142 Science), were connected in series (PR, top; PSA, bottom) and the samples were
143 conditioned by the addition of 3 ml of acetonitrile. The samples were passed through the
144 PR/PSA cartridges, and the eluents were collected in new test tubes (Fraction 1). After
145 0.5 ml of acetonitrile and 0.5 ml of methanol were sequentially passed through the
146 PR/PSA cartridges, the PR was removed. Fraction 2 was also collected in the same test
147 tube as that used for Fraction 1 (fraction 1+2). Furthermore, 3 ml of acetonitrile was
148 passed through the PSA cartridge to elute all neonicotinoids, and the eluents were
149 collected in the same test tube (Fraction 1+2+3). The collected eluents were evaporated
150 to dryness using a centrifugal concentrator (CVE-200D with UT-2000, Eyela, Tokyo,
151 Japan). The samples were then reconstituted with 200 μ l of 20% methanol aqueous
152 solution containing 100 ppb Cotinine-d3. Then they were transferred to a 1.5-ml tube and
153 centrifuged at 10,000 G for 10 min. The supernatant was transferred into an HPLC vial
154 for LC-MS/MS analysis.

155 An LC-ESI/MS/MS (Agilent 6495B, Agilent Co., CA, USA) system equipped with
156 Kinetex Biphenyl (2.1 mm ID \times 100 mm, ϕ 2.6 μ m) (Phenomenex, Inc., CA, USA) was
157 used for the sample analysis. Solvents A and B used for the HPLC analysis were 0.1%
158 formic acid + 10 mM ammonium acetate water solution and 0.1% formic acid + 10 mM
159 ammonium acetate methanol solution, respectively. The gradient was programmed as
160 follows: $t = 0$ to 1 min: 5% B (isocratic), $t = 6$ min: 95% B (gradient), $t = 6$ to 8 min
161 (gradient): 95% B (isocratic). The column oven temperature and flow rate were 60°C
162 centigrade and 0.5 ml/min, respectively. Detection of target compounds was performed
163 by multiple-reaction monitoring (MRM) in positive ionization mode as described in Table
164 1. The recovery rates of clothianidin and its metabolites were in the range of $62.1 \pm 7.1\%$
165 (MNG) to $92.3 \pm 8.5\%$ (dm-CLO). In addition, the reproducibility of the analysis system
166 was confirmed by single or multiple analysts, with a relative standard deviation (RSD) of
167 10% for all compounds.

168

169 2.4. Data analysis

170 Statistical analyses were performed with Excel Statistics 2012 (Version 1.00, SSRI,
171 Tokyo, Japan). Levels of CLO and dm-CLO were analyzed by one-way ANOVA followed
172 by the Tukey-Kramer post hoc test. Levels of other chemicals were analyzed by Kruskal-
173 Wallis test followed by Steel-Dwass test. The results were considered significant when
174 the *p*-value was less than 0.05. The correlation between dams and fetuses regarding the
175 blood levels of CLO and dm-CLO were assessed using Pearson's correlation coefficient
176 analysis, and those of dm-dn-CLO, dn-CLO, CLO-urea, and MNG were done using
177 Spearman's rank correlation coefficient analysis.

178

179 3. Results

180 3.1. Blood pharmacokinetics of CLO and its metabolites in dams and fetuses

181 In the present study, CLO and its five metabolites were detected not only in dams but
182 also in the fetuses. There are several metabolic pathways for CLO. Here, we detected
183 desmethyl-CLO (dm-CLO), a major metabolite of CLO in mice that is generated by
184 demethylation of the methyl group of CLO. When dm-CLO is metabolized, the nitro
185 group is reduced to form desmethyl-desnitro-CLO (dm-dn-CLO). Thus, CLO forms not
186 only dm-CLO but also desnitro-CLO (dn-CLO) by reduction of the nitro group, and MNG
187 is formed from CLO by cleaving the thiazolyl chlorine substituent. Then, dn-CLO is
188 further metabolized to CLO-urea by cleavage of the imino group (Fig. 2).

189 Blood levels of CLO in both the dam and fetus groups were significantly higher in the
190 CLO-1h group (dams 23.69 ± 2.10 ppm, fetuses 20.46 ± 1.10 ppm) than in the CLO-3h
191 group (dams 16.19 ± 2.58 ppm, fetuses 14.48 ± 0.84 ppm), and blood levels in the CLO-
192 3h group were significantly higher than in the CLO-6h group (dams 7.29 ± 0.99 ppm,
193 fetuses 5.91 ± 0.43 ppm) (Fig. 3A). On the other hand, the blood levels of dm-CLO in the
194 CLO-3h group (dams 10.97 ± 1.01 ppm, fetuses 7.28 ± 0.32 ppm) and the CLO-6h group
195 (dams 10.27 ± 1.05 ppm, fetuses 6.50 ± 0.39 ppm) were significantly higher than in the
196 CLO-1h group (dams 5.53 ± 0.34 ppm, fetuses 2.90 ± 0.17 ppm) (Fig. 3B). The blood

197 levels of dm-dn-CLO in the CLO-6h group of dams (0.036 ± 0.002 ppm) were
198 significantly higher than those in the CLO-1h group of dams (0.022 ± 0.004 ppm);
199 however, in the fetuses there was no corresponding significant difference, although a
200 tendency was observed by which dm-dn-CLO levels increased with time (Fig. 3C). The
201 blood levels of fetal dn-CLO in the CLO-6h group (0.049 ± 0.004 ppm) were significantly
202 lower than those in the CLO-3h group (0.068 ± 0.005 ppm). Although the difference was
203 not statistically significant, dams in the CLO-6h group (0.050 ± 0.006 ppm) had lower
204 blood levels of dn-CLO than those in the CLO-3h group (0.061 ± 0.013 ppm) (Fig. 3D).
205 The blood levels of CLO-urea in both dams and fetuses gradually decreased over time. In
206 the dams, the blood levels of CLO-urea in the CLO-6h group (0.039 ± 0.004 ppm) were
207 significantly lower than those in the CLO-1h group (0.084 ± 0.009 ppm), and in the
208 fetuses, blood levels of CLO-urea in the CLO-6h group (0.039 ± 0.003 ppm) were
209 significantly lower than those in both the CLO-1h group (0.071 ± 0.005 ppm) and the
210 CLO-3h group (0.055 ± 0.003 ppm) (Fig. 3E). The blood levels of MNG were highest in
211 the CLO-3h group in both dams (0.307 ± 0.051 ppm) and fetuses (0.167 ± 0.010 ppm)
212 (Fig. 3F).

213

214 *3.2. Maternal-fetal ratio of levels of CLO and its metabolites in the blood*

215 There was a positive correlation between the blood levels of maternal CLO and its
216 metabolites and those of the offspring. The ratio of blood levels of each substance in the
217 fetus to those in the dam were 85.0% for CLO (Fig. 4A), 63.0% for dm-CLO (Fig. 4B),
218 84.5% for dm-dn-CLO (Fig. 4C), 96.7% for dn-CLO (Fig. 4D), 84.0% for CLO-urea (Fig.
219 4E), and 47.2% for MNG (Fig. 4F). For all compounds, blood levels in the fetus were
220 lower than those in the dams.

221

222 *3.3. Residual levels of CLO and its metabolites in the blood*

223 Since the transfer of CLO to the fetus was confirmed as described above, it was
224 administered daily for the purpose of confirming its residual property in both the dams
225 and fetuses. However, as regards maternal blood CLO levels, there was no significant

226 difference between the CLO-6h group (7.28 ± 0.99 ppm), the CLO4d-6h group ($7.84 \pm$
227 0.74 ppm), and the CLO9d-6h group (6.67 ± 0.90 ppm). On the other hand, the blood
228 CLO level in the fetus was significantly higher in the CLO4d-6h group (6.57 ± 0.35 ppm)
229 than in the CLO9d-6h group (5.00 ± 0.31 ppm) (Fig. 5A). As regards dm-CLO, no
230 significant differences were observed between groups of dams, nor between groups of
231 fetuses (Fig. 5B). In the case of dm-dn-CLO, the blood level of dams was significantly
232 higher in the CLO9d-6h group (0.048 ± 0.004 ppm) than in the CLO4d-6h group (0.029
233 ± 0.004 ppm). As regards the corresponding fetal blood levels, those in the CLO9d-4h
234 group (0.033 ± 0.001 ppm) were significantly higher than those in both the CLO4d-6h
235 group (0.022 ± 0.001 ppm) and the CLO-6h group (0.029 ± 0.003 ppm), and those in the
236 CLO-6h group were significantly higher than in the CLO4d-6h group (Fig. 5C). In the
237 case of dn-CLO, maternal blood levels were significantly higher in both the CLO-6h
238 group (0.050 ± 0.006 ppm) and the CLO9d-6h group (0.053 ± 0.003 ppm) than in the
239 CLO4d-6h group (0.034 ± 0.002 ppm). Likewise, in the fetus, the CLO9d-6h group (0.046
240 ± 0.003 ppm) had significantly higher levels of dn-CLO than those in the CLO4d-6h
241 group (0.038 ± 0.003 ppm) (Fig. 5D). As regards CLO-urea, no statistically significant
242 differences were seen in maternal blood levels between groups, although the levels in the
243 CLO9d-6h group (0.030 ± 0.003 ppm) were lower than those in the CLO4d-6h group
244 (0.046 ± 0.009 ppm). As for CLO-urea in the fetal blood, the level in the CLO9d-6h group
245 (0.029 ± 0.002 ppm) was significantly lower than that of the CLO4d-6h group ($0.036 \pm$
246 0.003 ppm) (Fig. 5E). Regarding MNG, the blood levels of the dams were not
247 significantly different between groups, but the CLO4d-6h group (0.144 ± 0.020 ppm) had
248 a higher level of MNG than that in the CLO9d-6h group (0.111 ± 0.012 ppm). On the
249 other hand, fetal blood levels of MNG were significantly higher in the CLO4d-6h group
250 (0.109 ± 0.006 ppm) than in the CLO9d-6h group (0.083 ± 0.005 ppm) (Fig. 5F).

251

252 **4. Discussion**

253 This study was the first to quantitatively confirm the transfer of CLO and its metabolites
254 from dam to fetus in a mouse model. A time-dependent decrease in blood levels of CLO
255 was observed in dams and fetuses in the single-dose administration group.
256 On the other hand, dm-CLO increased from 1 to 3 h after administration. Although the
257 blood levels of dm-dn-CLO increased from 1 to 6 h, the levels of CLO-urea decreased
258 with time. In the case of MNG, a peak was observed 3 h after the administration of CLO.
259 From these findings, it was determined that the behavior of metabolites varies. This
260 differential finding regarding the blood pharmacokinetics of CLO metabolites is thought
261 to be due to differences between rapidly metabolized substances and those that are slower
262 to metabolize. When the blood concentrations of maternal and fetal substances were
263 compared, no substance-dependent differences were found to be associated with placental
264 barrier permeability.

265 It is thought that variants of Cytochrome P450 (CYPs) are related to the metabolism of
266 neonicotinoids (Shi *et al.*, 2009). Since most CYPs are negligibly expressed in fetal mice,
267 it is expected that fetuses would not possess any capacity for CLO metabolism (Kitaoka
268 *et al.*, 2018). In fact, it is highly unlikely that a fetus could metabolize CLO transferred
269 from the dam because the blood levels of CLO metabolites in the fetus were not higher
270 than those of the dam. In addition, it was found that CLO crossed the placental barrier
271 very quickly because it was transferred to the fetus at a high rate of 86% [CLO-1h group
272 (fetus / maternal: 20.46 / 23.69 × 100)] of the maternal blood level 1 h after CLO
273 administration. Furthermore, it was not only CLO that crossed the placental barrier
274 quickly, but also dm-CLO at a rate of 63.0%, dm-dn-CLO at 84.5%, CLO-urea at 84.0%,
275 and dn-CLO at 96.7%. These findings reveal that CLO and its metabolites were hardly
276 inhibited by the placental barrier.

277 There were no significant differences observed in the blood CLO levels of the dams
278 between the multiple days-of-exposure groups. In fetuses, the 4-day group showed
279 significantly higher values than those of the 9-day group. From these findings, it can be
280 concluded that the metabolism of the parent compound (CLO) is very fast and there is
281 almost no residual property of CLO in the blood. On the other hand, dm-dn-CLO and dn-

282 CLO levels were lower in the 4-day administration group than in the 1-day administration
283 group, and higher in the 9-day administration group than in the 4-day administration
284 group, respectively. While it is thought that CLO exhibits little residual property, the same
285 cannot be concluded about its metabolites. Of the five metabolites detected in this study,
286 three substances (i.e., not dm-dn-CLO or dn-CLO) were found at lower levels or almost
287 the same level in the 9-day group compared to the 4-day group. Thus, it will still be
288 necessary to conduct experiments that include longer-term exposures.

289 Here, dn-CLO was detected in both dams and fetuses. Imidacloprid, a neonicotinoid,
290 is metabolized to a desnitro form, thereby increasing affinity for mammalian target
291 receptors (Casida, 2011). Similarly, dn-CLO has a higher affinity for mammalian target
292 receptors than insects' ones (Casida, 2011). Taken together, these structural and metabolic
293 findings contribute to the elucidation of the effects of CLO on mammals. However, it has
294 been confirmed that the desnitro metabolic reaction is not active specifically in mice,
295 since levels were several hundredths of those of dm-CLO.

296 Neurobehavioral effects and germ cell abnormalities in adult mice have been reported
297 as effects of exposure to CLO (Hirano *et al.*, 2015, 2018; Yanai *et al.*, 2017). Likewise,
298 mild focal necrosis with swollen cellular nuclei, hypertrophied blood vessels and
299 cytoplasmic lesions in the mouse liver, and degeneration of the tubules and glomeruli in
300 the kidney have been reported to be induced by imidacloprid (Arfat *et al.*, 2014), as has
301 suppression of humoral and cellular immune responses by thiamethoxam (Salema *et al.*,
302 2016). The results of this study revealed that fetuses are also exposed to CLO at the same
303 level as that in adults. Given that fetuses are thought to be more sensitive to chemicals
304 than adults (Needham and Sexton, 2000; Charnley and Putzrath, 2001; Mori, 2004), the
305 present findings raise concern about the potential for more serious adverse effects of CLO
306 on fetuses. Neurobehavioral effects have been confirmed in male mice after the
307 administration of CLO, even with the administration of one-tenth of the NOAEL dose
308 (Hirano *et al.*, 2018), which is close to the assumed acceptable daily intake (ADI);
309 therefore, it is reasonable to extrapolate that CLO would also affect fetuses. The current
310 NOAEL setting takes into account intake by adults only. Thus, the NOAEL values should

311 be recalculated to include non-adults, considering that fetuses would be exposed to toxins
312 at the same levels as the dam. The ADI is calculated based on the NOAEL settings, and
313 the residual standard value for food pesticide residues are set with reference to the ADI.
314 Because there are NOAEL- and ADI-related concerns about effects on fetuses, it will be
315 necessary to review the pesticide residual standard value of CLO.

316 In conclusion, the placental transfer of CLO was confirmed quantitatively for the first
317 time in the present study. Specifically, this is the first report to quantitatively detect an
318 NN, as well as its metabolites, in fetal blood. **The fetuses are also potentially threatened**
319 **by some metabolites which might have higher affinity for mammalian nAChRs than the**
320 **parent compound (CLO).** The present results thus provide important data for future
321 elucidation of the cause of the effects of CLO on adults and fetuses.

322

323 **Conflict of interest statement**

324 The authors declare that there are no conflicts of interest.

325

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330

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435

436 **FIGURE LEGENDS**

437 **Fig. 1. Outline of the experiments**

438 (A) Scheme showing the overall experimental design of a single-dose administration of
439 CLO. CLO was orally administered to pregnant ICR mice at embryonic day 18.5 (E18.5).
440 The single oral administration group was divided into three subgroups each of dams and
441 fetuses (total=six groups), from which blood samples were obtained at 1, 3, and 6 h after
442 CLO administration. The vehicle group was treated with 0.5% carboxymethyl-cellulose,
443 and blood samples were collected 1 h after the administration of vehicle, as in the CLO-
444 administration groups.

445 (B) Scheme showing the overall experimental design of a daily single-dose administration
446 of CLO. To examine CLO residual property, the CLO-6h group received a single dose at
447 E18.5, the CLO4d-6h group received four doses at E15.5-18.5, and the CLO9d-6h group
448 received nine doses at E10.5-18.5. Blood was collected in the same manner as described
449 in Fig. 1A after 6 h of the last CLO administration.

450

451 **Fig. 2. Partial metabolic pathway of CLO in mice**

452 Demethylation of the CLO methyl group forms dm-CLO, and dm-dn-CLO is produced
453 by further reduction of the dm-CLO nitro group. Reduction of the nitro group of CLO
454 produces dn-CLO, which in turn cleaves the imino group of dn-CLO to produce CLO-
455 urea. Metabolic cleavage of the thiazolyl choline group of CLO produces the substance
456 1-methyl-3-nitroguanidine (MNG).

457

458 **Fig. 3. Blood pharmacokinetics of CLO and its metabolites in dams and fetuses**

459 The parent compound (CLO) and its metabolites detected in maternal and fetal blood
460 after a single CLO administration are shown. The blood pharmacokinetics showed
461 various behaviors for each substance, but the dynamics were similar between the dams
462 and fetuses. Values are mean \pm SE. * P <0.05. The number of samples: CLO-1h (dam = 6,
463 fetus = 24), CLO-3h (dam = 6, fetus = 22), CLO-6h (dam = 6, fetus = 23)

464

465 **Fig. 4.** Maternal-fetal ratio of blood levels of CLO and its metabolites

466 The fetus-to-mother ratio of blood levels of CLO and its metabolites in the single-dose
467 group. The horizontal axis (coordinates) shows the blood concentrations of the mothers
468 and the vertical axis (coordinates) shows the blood concentrations of the offspring. The
469 number of samples: CLO-1h (dam = 6, fetus = 24), CLO-3h (dam = 6, fetus = 22), CLO-
470 6h (dam = 6, fetus = 23)

471

472 **Fig. 5.** Residual levels of CLO and its metabolites in the blood of dams and fetuses

473 Residual levels of the parent compound (CLO) and its metabolites detected in maternal
474 and fetal blood after a daily single-dose CLO administration are shown. The blood
475 pharmacokinetics showed various behaviors for each substance (A-F), but the general
476 dynamics were similar between the dams and fetuses. Values are mean \pm SE. * $P < 0.05$.
477 The number of samples: CLO-6h (dam = 6, fetus = 23), CLO4d-6h (dam = 5, fetus = 20),
478 CLO9d-6h (dam = 7, fetus = 28)

479

480

481

482

Table 1: Multiple-reaction monitoring (MRM), retention times (RT), recovery rate, and limit of quantification (LOQ) of target chemicals

Chemicals	MRM	Qualifier ion	RT	Recovery rate (%\pmSD)	LOQ (ng/ml)
Clothianidin	250.02>132.00	169.1	3.9	86.3 \pm 6.4	0.5
Clothianidin-d3	253.04>132.10	171.9	3.9	86.8 \pm 7.2	–
dm-Clothianidin	236.00>132.00	113.1	2.9	92.3 \pm 8.5	1.0
dm-Clothianidin-urea	192.00>132.10	86.1	1.8	77.1 \pm 7.6	5.0
Clothianidin-urea	206.02>86.2	175.0	2.6	82.5 \pm 11.0	0.5
dn-Clothianidin	205.03>132.1	45.1	1.3	72.2 \pm 6.3	0.5
dm-dn-Clothianidin	191.02>132.1	45.2	1.2	74.4 \pm 7.2	1.0
MNG	119.10>73.02	57.2	1.0	62.1 \pm 7.1	0.5

Fig. 1

A: Scheme showing the overall experimental design of a single-dose administration of CLO

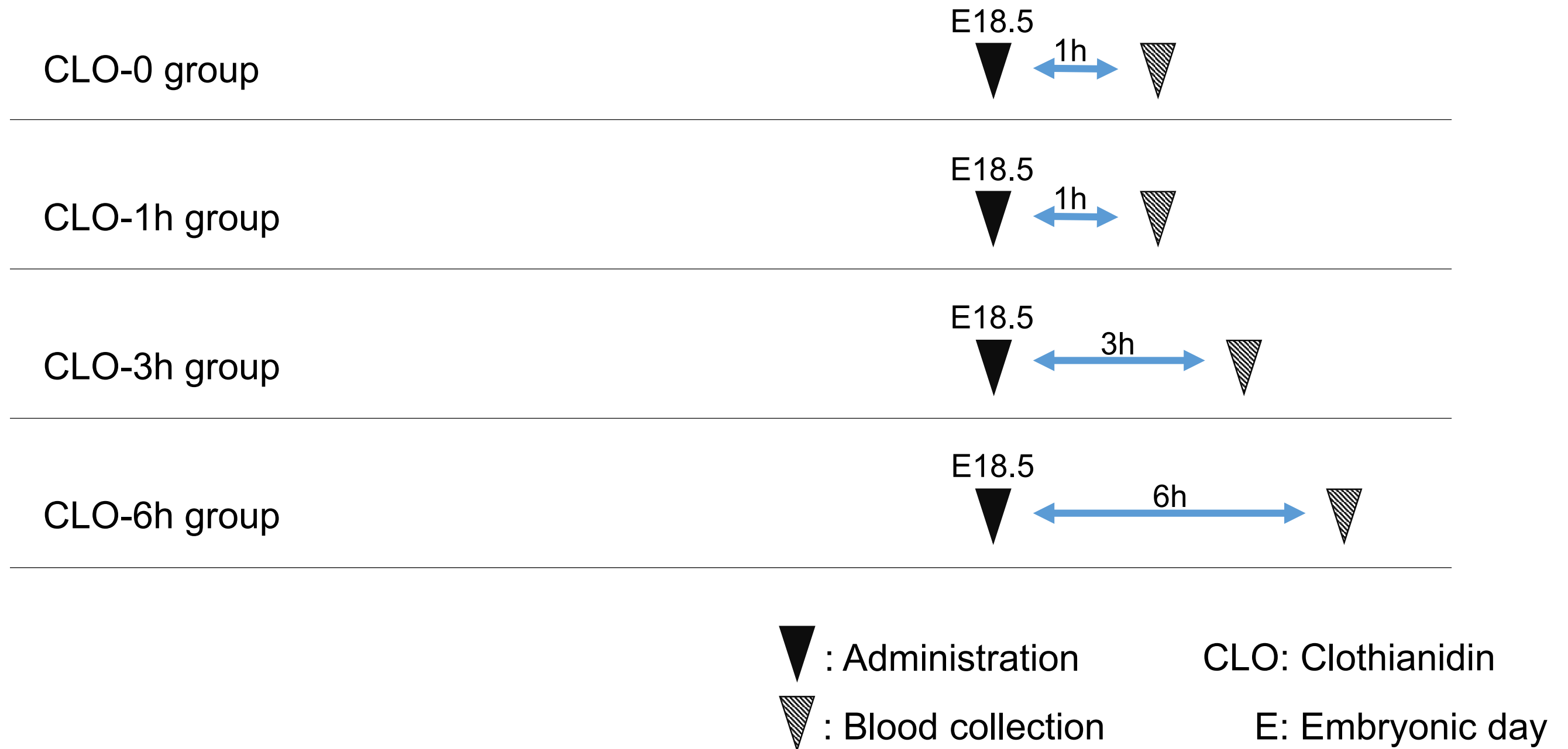


Fig. 1

B: Scheme showing the overall experimental design of a daily single-dose administration of CLO

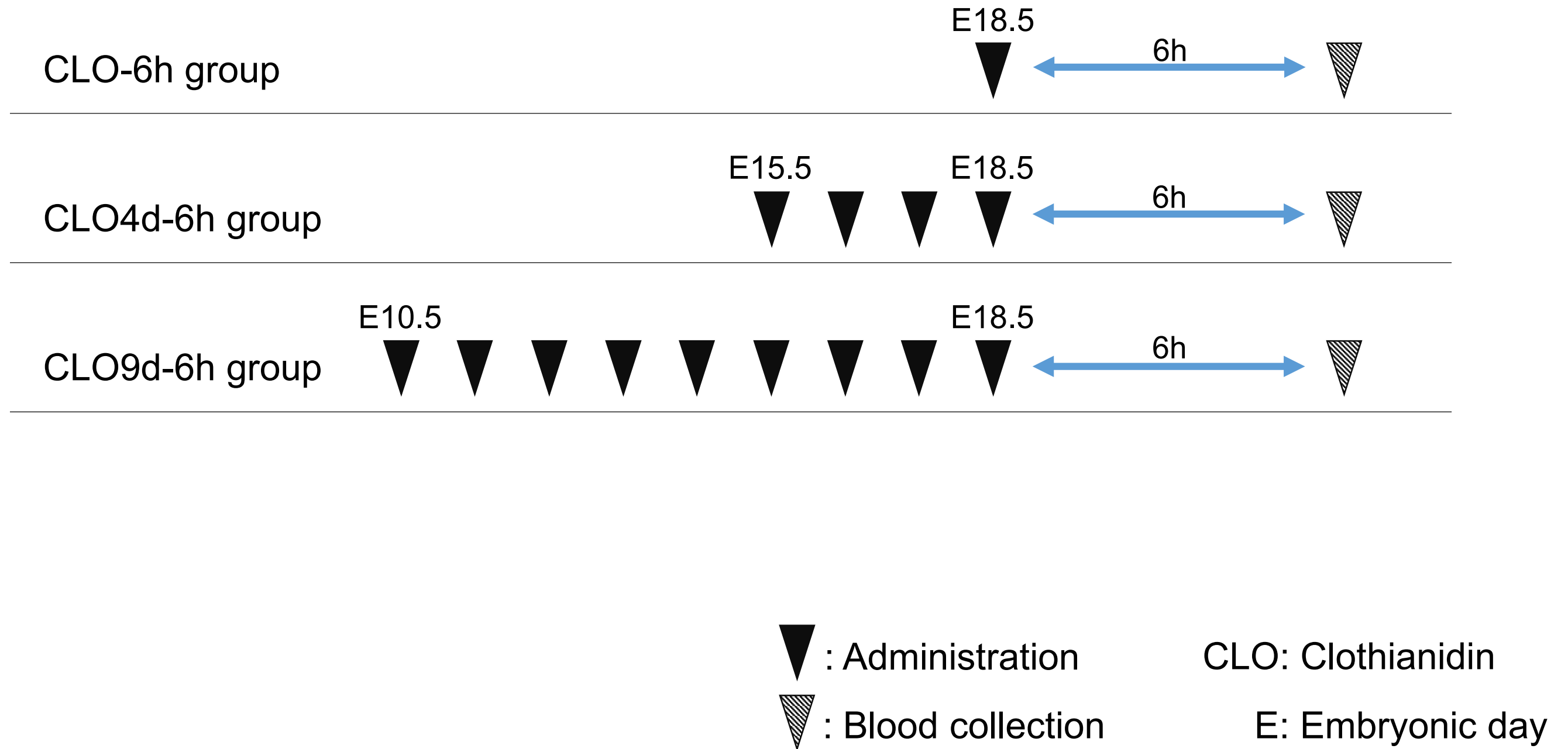


Fig. 2 Partial metabolic pathway of CLO in mice

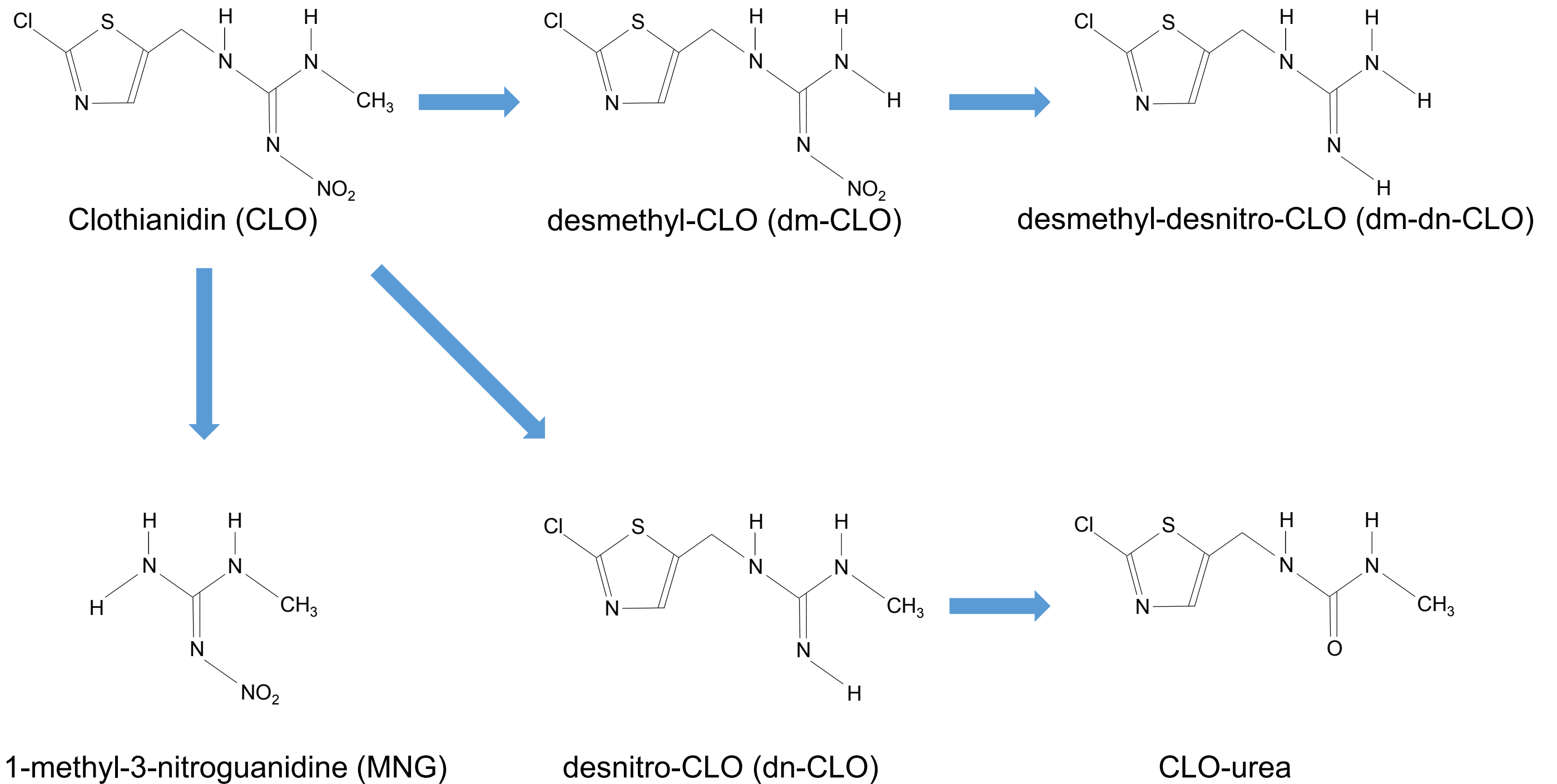


Fig. 3 Blood pharmacokinetics of CLO and its metabolites in dams and fetuses

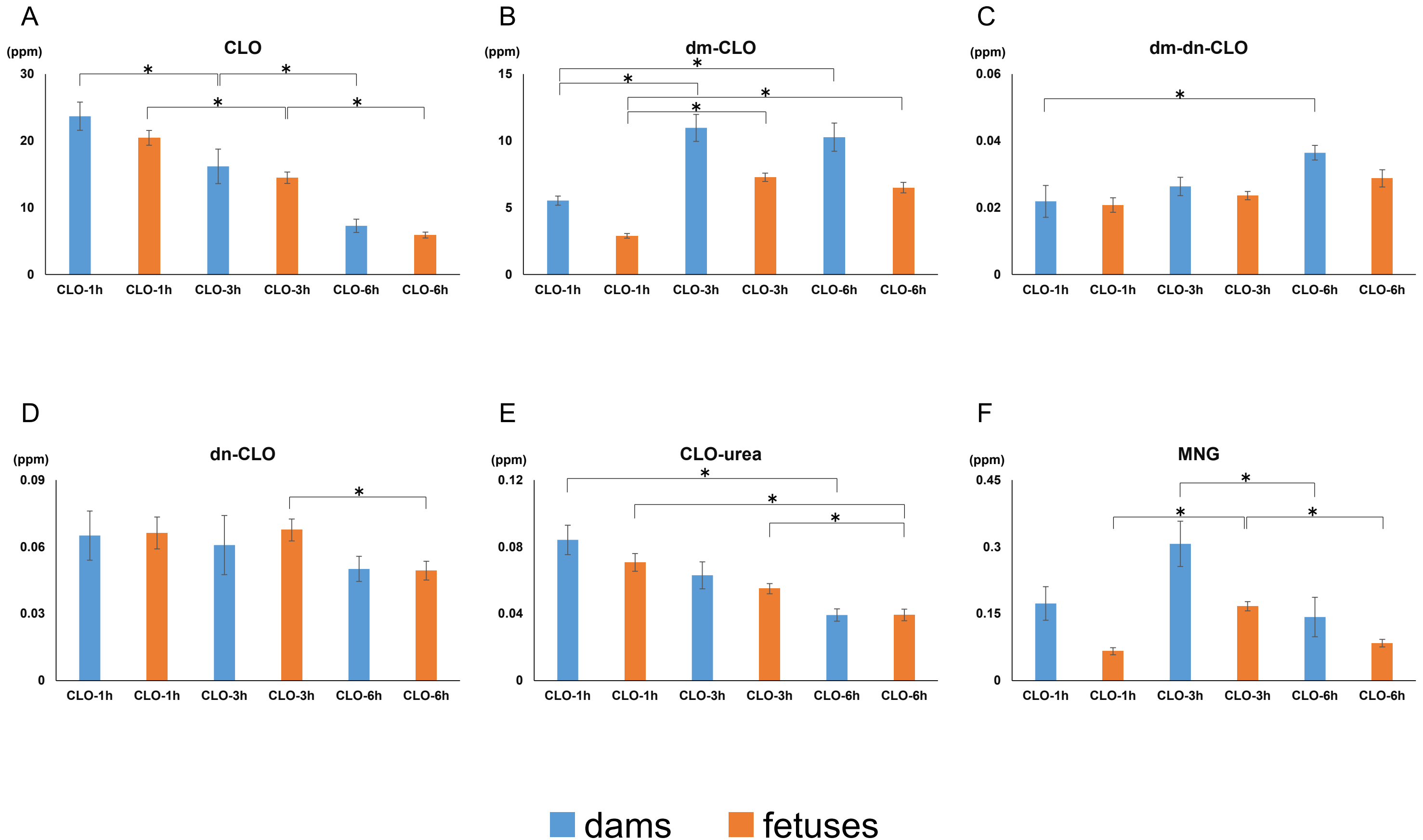


Fig. 4 Maternal-fetal ratio of blood levels of CLO and its metabolites

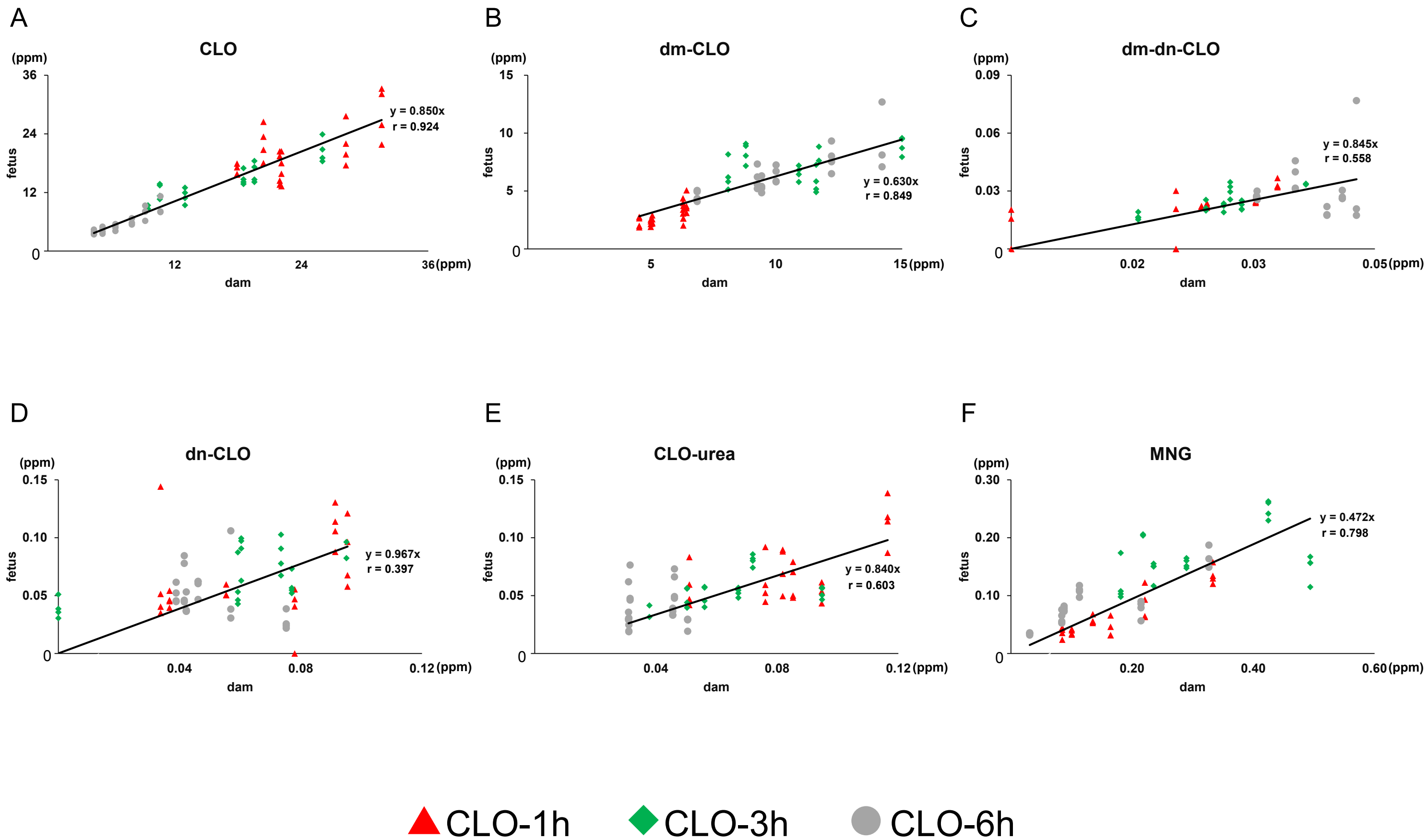
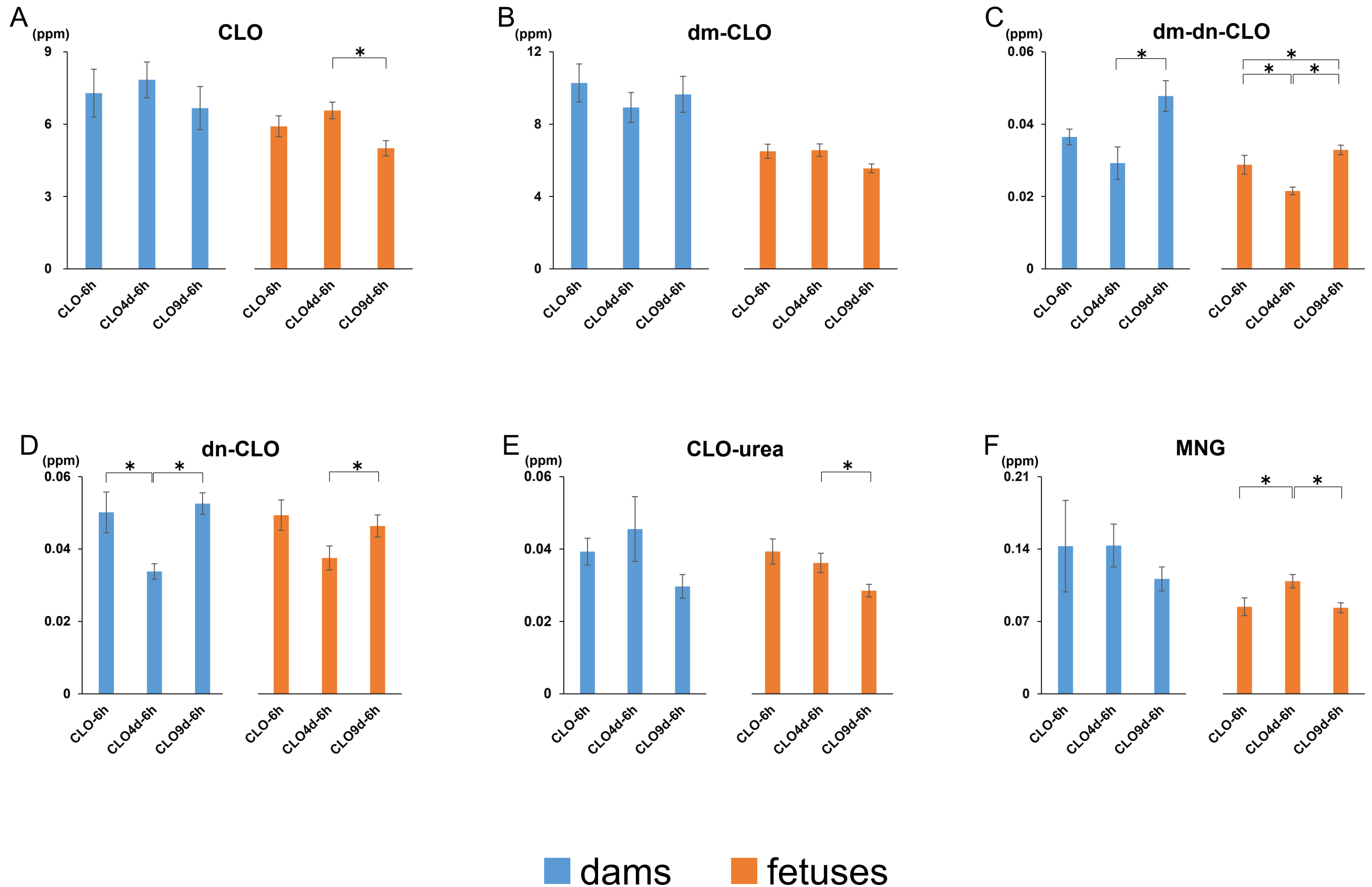
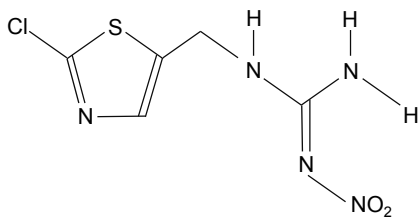


Fig. 5 Residual levels of CLO and its metabolites in the blood of dams and fetuses



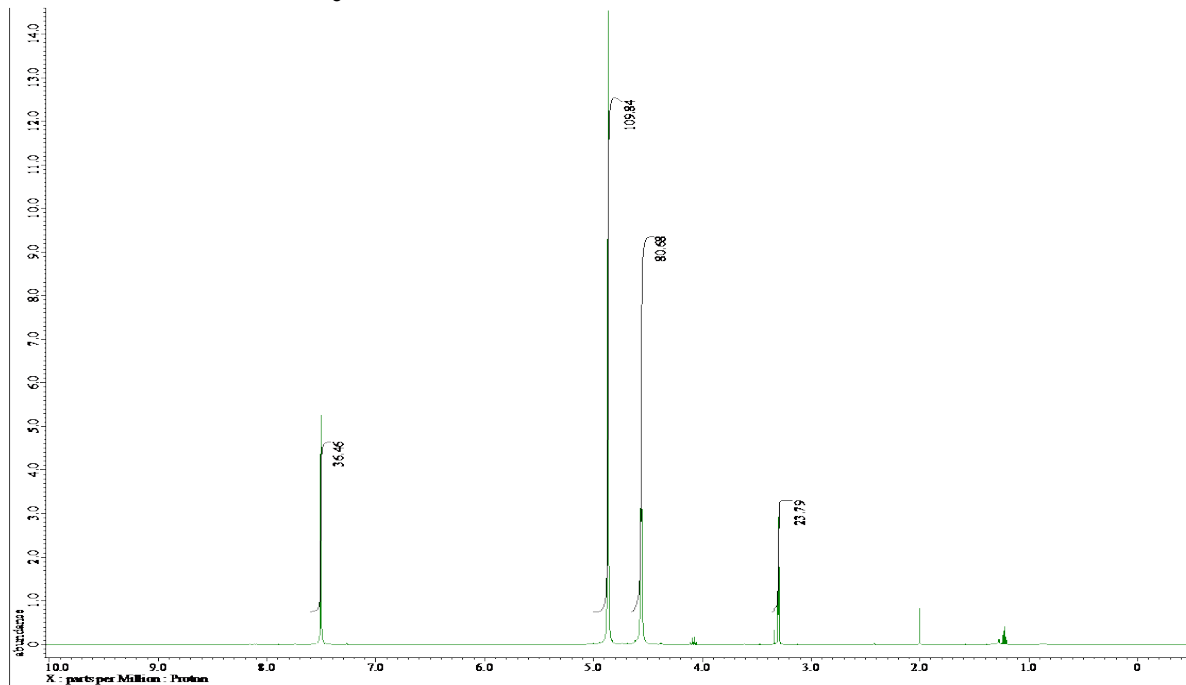
Supplementary

[Click here to download Supplementary: Suppl_Fig_Ohno_S_R2.pdf](#)

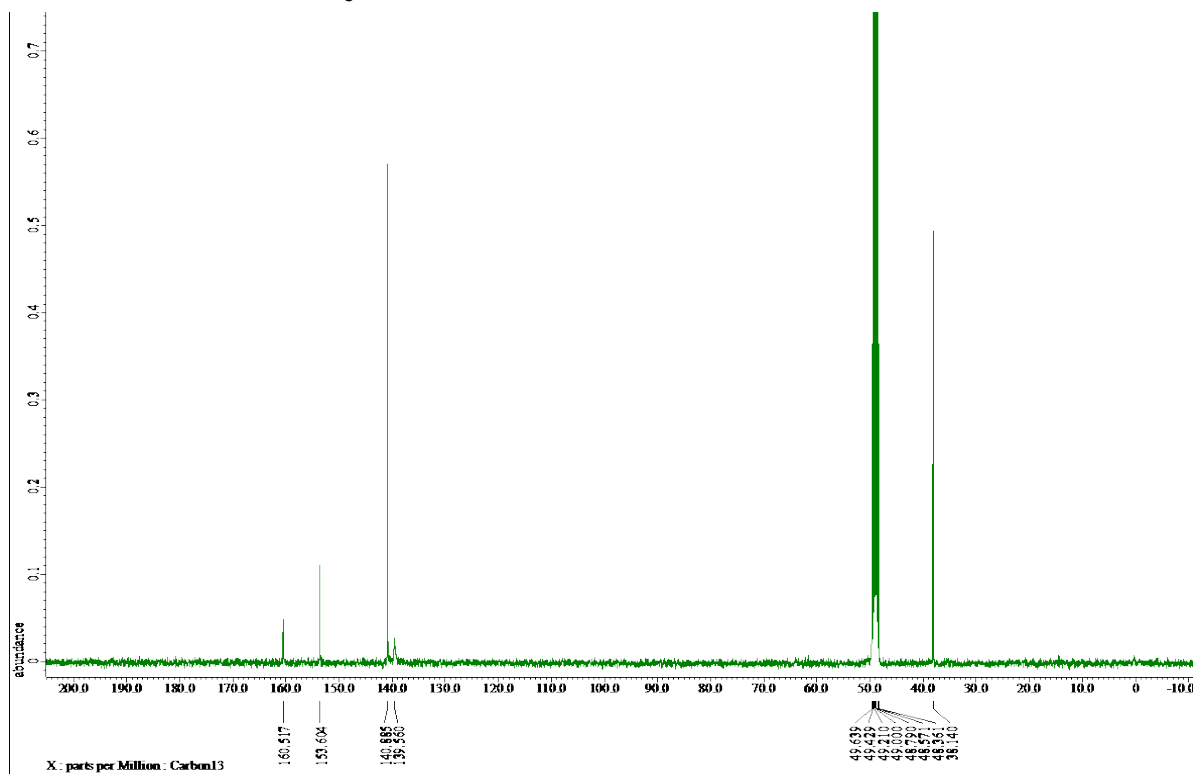


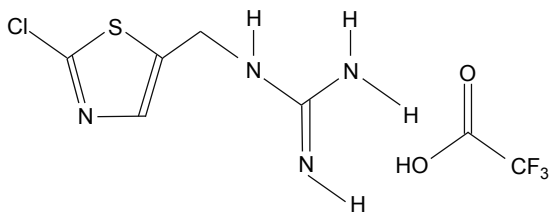
desmethyl-CLO

^1H NMR (400 MHz, CD_3OD)



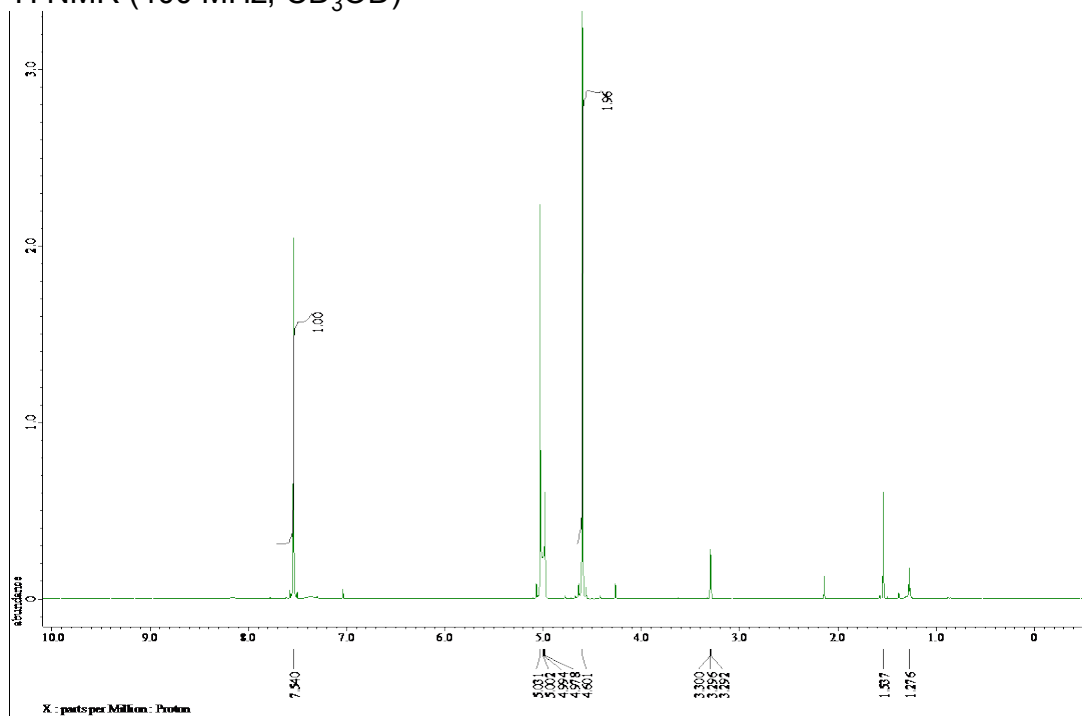
^{13}C NMR (100 MHz, CD_3OD)



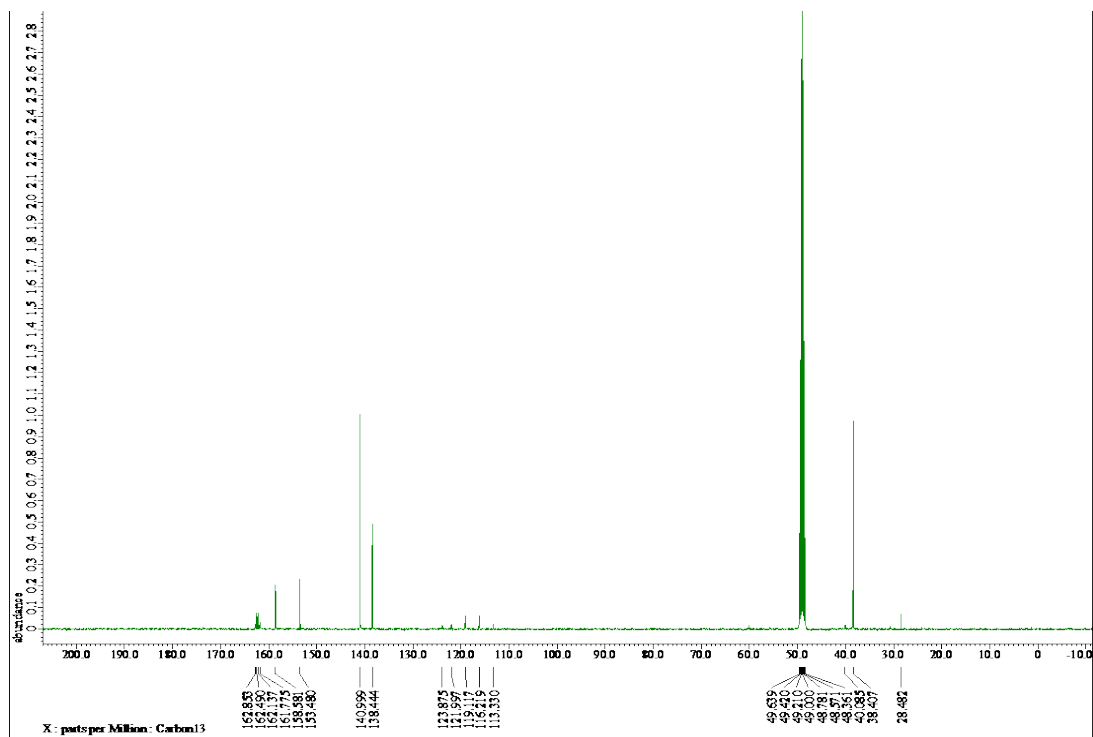


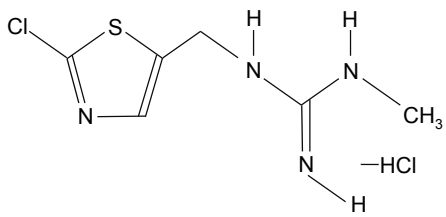
desmethyl-desnitro-CLO TFA salt

^1H NMR (400 MHz, CD_3OD)



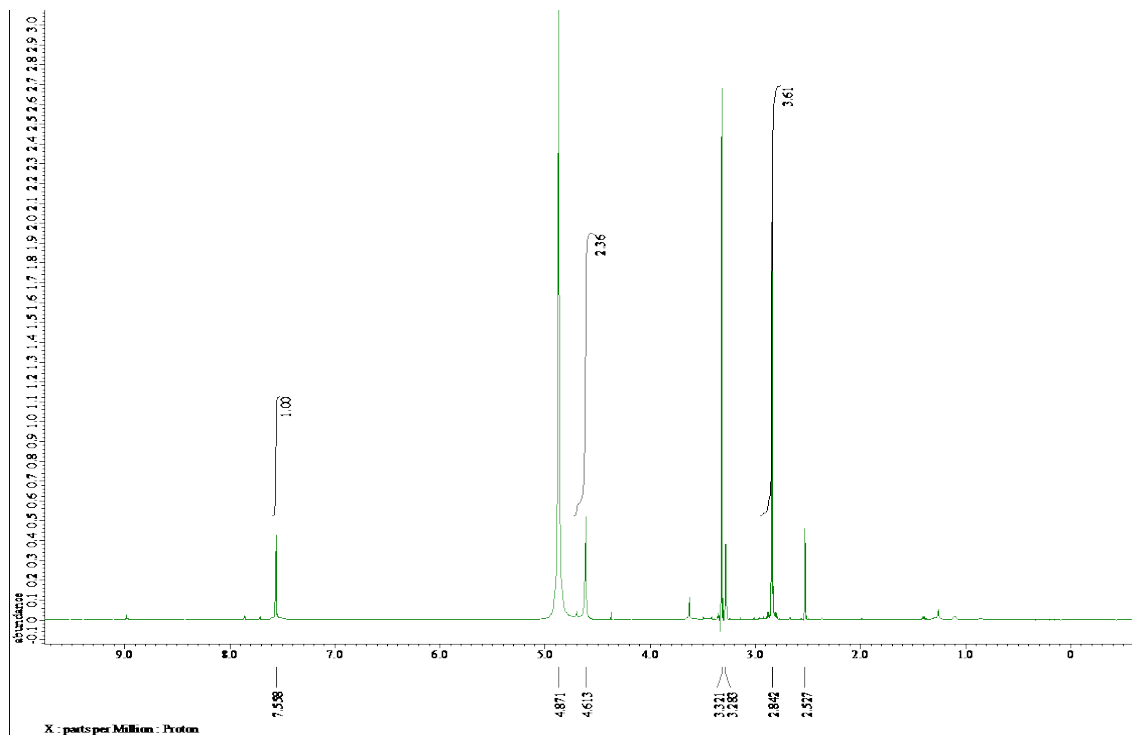
^{13}C NMR (100 MHz, CD_3OD)



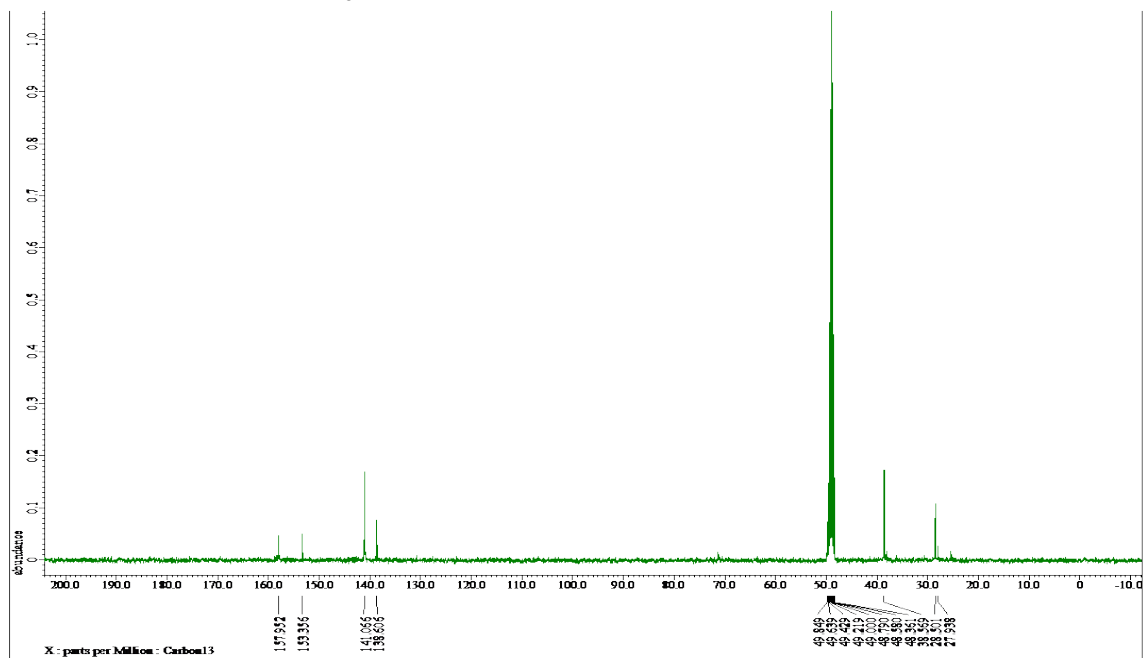


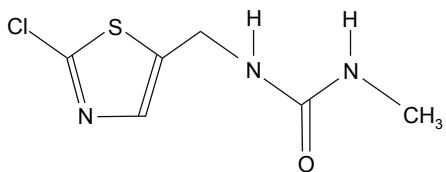
desnitro-CLO HCl salt

^1H NMR (400 MHz, CD_3OD)



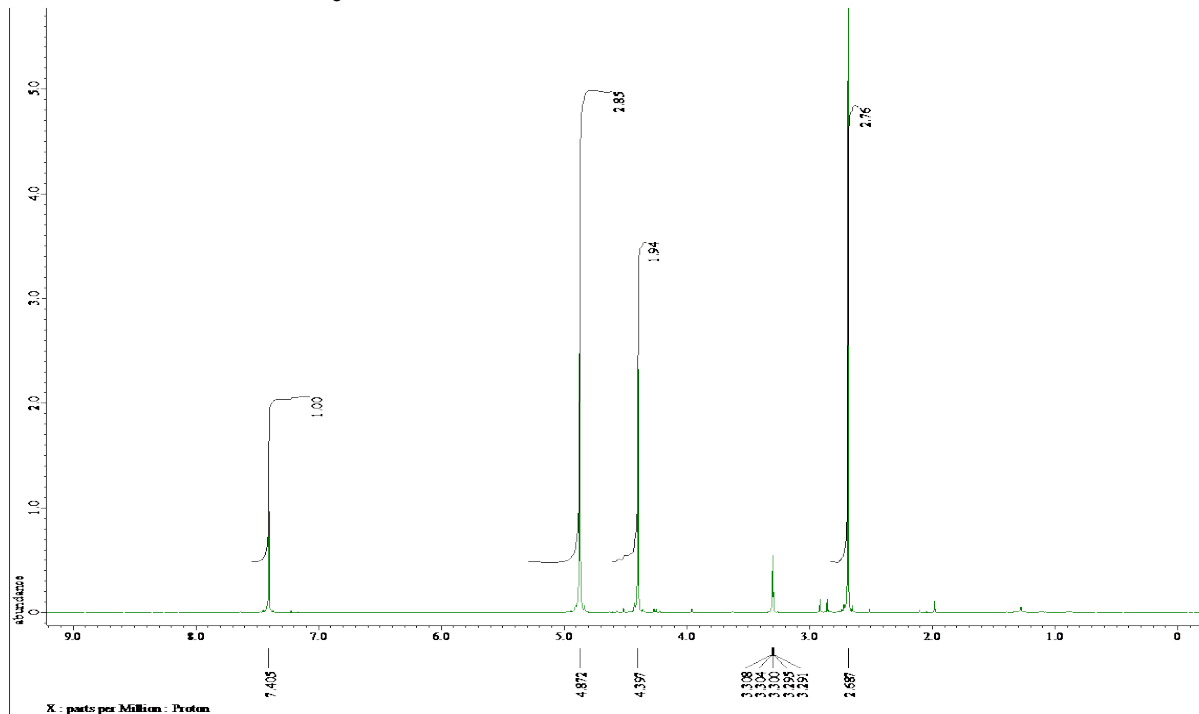
^{13}C NMR (100 MHz, CD_3OD)





CLO-urea

^1H NMR (400 MHz, CD_3OD)



^{13}C NMR (100 MHz, CD_3OD)

