IACUC Policy 10: Experimental Neoplasia in Rodents

1. Background

Experimental induction of neoplasia presents concerns for animal welfare. In particular, the endpoint for the animal bearing the tumor must be clearly described and that endpoint must be approved by the IACUC prior to the initiation of any procedures.

Proposals that involve experimental neoplasia usually involve three types of studies, including those that 1) increase our understanding of biological mechanisms 2) aid in the design of efficacious treatments, and 3) facilitate production of antibodies via ascites production.

A. The first goal describes studies of how cancer cells grow and behave. This policy is intended to limit the tumor burden an animal experiences to that which does not cause excessive pain or distress, but achieves the research goal.

B. The second goal involves studies of the response of neoplasms to chemical, radiologic or immunologic therapy. In this class of study, not only must the tumor burden be considered, but the effect of the treatment modality must also be evaluated.

C. The third type of study involves the production of experimental reagents (antibodies) by the injection of cell lines that retain properties of cancer cells. In this special case, the goal is to limit the volume of ascites liquid to that which does not interfere excessively with normal function of the animal.

2. Consideration of Alternatives

Outcomes of tumor studies vary depending on the species and strain of animals used, the route of administration used for the growth of transplantable tumors and the subsequent chemotherapy or other modality employed in cancer treatment studies. It is up to the investigator to determine whether alternatives to using live animals are available and are appropriate for their study.

It is very rare that “death as an endpoint” studies (i.e., survival studies) will be allowed by the IACUC. In considering such studies, the PI must examine all possible alternatives and present evidence to the IACUC that none are scientifically acceptable for the proposed outcome.

NOTE: Citing other studies in which ‘death as an endpoint’ has also been used is NOT a scientific justification.

3. Procedural Guidelines

A. General guidelines

All protocols involving experimental neoplasia in rodents must be consistent with the Humane Endpoints Policy (19). In addition to the Default Endpoints listed in Policy 19, the percentage of tumor mass to body weight and the animals' well-being must be considered for those superficial tumors that can be monitored by palpation and measurement. The following general tumor guidelines must be followed and euthanasia is required when:

1) Solid tumors

   Calculate the mass of the tumor using the following formula:
   \[ \text{Mass} = \text{tumor volume} (\text{mm}^3) = \text{length} \times \text{width} \times \text{height of tumor measured using calipers} \]
   Add the volume of multiple tumors together.
   For mice, the total tumor volume may not exceed 3.375 cm\(^3\)
   For rats, the tumor volume may not exceed 8 cm\(^3\)

   a) The animal is unable to drink, ambulate, defecate or urinate due to a tumor burden.
   b) The tumor is ulcerated and/or infected.
2) Hematological tumors
Hematological tumors or tumors induced in body cavities (cranium, orbit, abdomen, or thorax) may be more
difficult to monitor for progression and may have additional limitations as to the maximum acceptable size or
duration. These animals must be monitored very closely for any severe impairment in physiological or
neurological function and be euthanized as soon as such signs become apparent. Humane endpoints pertinent
to the model must be given in the protocol. For example, with brain tumors, the endpoints must reflect
neurological deficits and/or cranial deformity.

3) Myelomas and Ascites Production
After inoculation with an ascites-producing tumor cell line, animals must be observed at least three times per
week for the first week and daily thereafter to monitor the degree of abdominal distention and signs of illness.
Ascites fluid should be removed by peritoneal tap before abdominal distention is great enough to cause
discomfort or interference with normal activity. Animals should be euthanized if they become moribund (i.e.,
huddling, hunched posture, increased respiratory rate and/or effort, lethargy, difficulty with normal ambulation,
or ruffled coat). Animals should be tapped before they have gained 20% of their baseline body weight. Three
abdominal taps, with the last tap being terminal, is permitted.

Exceptions to these guidelines may be taken when scientifically justified and approved by the IACUC.

B. Interventions
After the study has begun, any deviation from the default endpoints (including death as an endpoint), must be
reported immediately to the LARC veterinary staff for clinical evaluation. For example, if the tumor severely
impairs normal bodily functions or the animal appears to be in distress, the veterinarian will prescribe
treatment/monitoring that may include humane euthanasia.

C. Pain category assignment
Assignment of pain category by the IACUC for studies involving tumor-bearing animals shall be in accordance
with Policy 4: Pain Categories for Experimental Protocols. However, because each study and each tumor line is
unique, the TTUHSC IACUC will review each protocol individually and consider circumstances that may impact
the assignment of the appropriate pain category. In the event that the procedure being proposed will cause pain or
distress and analgesics cannot be administered for scientifically justified reasons, the PI must describe additional
methods for ensuring that discomfort, distress, and pain will be limited to that which is unavoidable in the conduct
of this project.

Reference