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## Review The potential health risk of titania nanoparticles

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## ABSTRACT

Widespread use of titania nanoparticles (TNPs) has caused a significant release of TNPs into the environment, increasing human exposure to TNPs. The potential toxicity of TNPs has become an urgent concern. Various models have been used to evaluate the toxic effects of TNPs, but the relationship between TNPs' toxicity and physicochemical properties is largely unknown. This review summarizes relevant reports to support the development of better predictive toxicological models and the safe future application of TNPs.

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## 1. Introduction

Titania (titanium dioxide) has three natural forms: rutile, anatase, and brookite [1,2]. Titania nanoparticle (TNP) is a widely used nanomaterial; cosmetics and sunscreen products alone account for 50% of TNP usage [3]. Because they are an n-type semiconductor [4], TNPs are also used as a photocell coating and as a photo-catalyst to reduce waterborne or airborne pollutants such as organic dyes, nitric oxide, organophosphorus insecticides, formaldehyde, and benzene [3,5,6]. TNPs have been added to self-cleaning sanitary ceramics, antimicrobial plastic packaging, and cement. Because light-mediated TiO<sub>2</sub> surface hydroxylation makes it fouling-resistant, it is used in window glass, pavement, and walls [7–9]. TNPs have also been used as additives in sugar, film, tooth-paste, and capsules [10].

Although limited epidemiological studies in U.S. and European TNP production factories showed no significant respiratory carcinogenic risks [11–14]. TNP toxicity has been observed in diverse models, such as rodents [15–18], aquatic organisms [19–21], and human cells [22–24]. Female workers were reported to experience shortness of breath and pleural effusions after 5–13 months of exposure in a polyacrylic ester nanoparticle processing factory [25], raising significant doubt about the human safety of TNPs.

Because of widespread environmental exposure to TNPs, it is urgent to elucidate their effects on human health. Currently available reports cover a diverse range of nanoparticle properties, exposure schemes, and toxicological models, impeding clear interpretation. Here we summarize the likely scenarios of TNP release and human exposure and compare the potential *in vivo* and *in vitro* toxic effects of TNP in association with its properties. Rather than being exhaustive, this review seeks to promote scientific awareness of the potential risk of TNPs. Our hope is to stimulate the development of guidelines for the proper use and disposal of TNPs, thereby reducing its potential harm to human health and the environment [7].

## 2. TNP production and pollution

In 2006, 40,000 tons of TNPs were produced in the U.S.[26]. Due to ever-increasing market demand, the annual production of TNPs is predicted to reach 2.5 million tons by 2025 (Fig. 1) [26]. As a result, a significant amount of TNPs will be released into the environment [7,27] (Fig. 2).

TNPs distributed in the environment may affect the biosphere via food chain, air, and water [28]. Workers at TNP production factories and academic researchers encounter the highest exposure risks, possibly through skin penetration and inhalation. Material dispersal cannot be avoided during application, leading to free



Fig. 1. Forecast of TNP production in the U.S. (MT = metric tons). Reproduced with permission from [26].

## 3. Potential toxicity of TNPs

Although TNP is classified as a suspected carcinogen [12], a retrospective cohort mortality study revealed no significant association between mortality risk and TNP exposure levels [13]. However, workers who manufacture polyacrylic ester nanoparticles developed symptoms such as shortness of breath, pleural effusions, and rash with intense itching on their faces, hands, and forearms. Some even experienced hypoxemia and pericardial effusions [25]. Because of the limited data on TNP toxicity to humans, the potential risk is still in doubt. Therefore, researchers should use various toxicological models, such as animals, aquatic organisms, and human cells, to generate the needed information.

#### 3.1. Toxicity of TNPs to mammals

TNP's mammalian toxicity was investigated using rodent models under various exposure schemes and conditions. The endpoint assays included inflammation, oxidant stress, cell proliferation, and histopathological changes [30].

#### 3.1.1. Biodistribution and systemic toxicity

After a single intravenous (iv) injection of TNP in male Wistar rats with TNP suspension (5 mg/kg body weight), various organs, biochemical indices, and antigen levels were analyzed after 1, 14, and 28 days. At day 28, TNPs had accumulated in liver, spleen, lung, and kidney, in descending order. No obvious abnormality was observed in immune response and organ function. Hence, brief, low-dose TNP exposure was relatively safe [15]. Toxicokinetics of TNPs at a higher dose was studied in Balb/c female mice treated (iv) with 560 mg/kg TNP. TNP microparticle aggregates were found in lung, liver, lymph node, spleen, and kidney [31]. In an investigation of the acute toxicity and biodistribution of fine and ultrafine TiO<sub>2</sub> at a larger dose (5 g/kg BW by oral gavage), TNPs were transported to other organs and tissues via the gastrointestinal tract and induced hepatic injury and myocardial damage within 2 weeks [32]. ICR mice were treated with anatase TNPs by intraperitoneal (ip) injection daily for 45 days. TNPs accumulated in the spleen and other organs, and reduced immunity and pathological changes were observed [18]. These studies show a general pattern of translocation and biodistribution of TNPs that is illustrated in Fig. 3 [33]. All of the different exposure routes lead to blood entrance and translocation into various organs. Systemic toxicity is therefore a possibility.

#### 3.1.2. Respiratory system

Exogenous fine particles enter the body mainly via the respiratory system, after which phagocytosis by alveolar macrophages induces reactive oxygen species (ROS) [34]. Alveolar macrophages usually contain enzymatic and non-enzymatic antioxidants that scavenge ROS; however, these are insufficient to prevent oxidative stress and pulmonary damages [35,36]. TNPs have been found to cause pulmonary damage and inflammation [37,38]. Acute exposure to TNP rods and dots for 24 h caused pulmonary and cardiac edema, lung and systemic inflammation, and platelet aggregation [39,40]. Levels of inflammation and oxidative stress were exacerbated when TiO<sub>2</sub> was coated with Fe. The coated TNPs increased the risk of hepatic injury, thrombus, tachycardia, and systolic hypertension and induced splenic congestion, lymph nodule proliferation,



Fig. 2. Potential release, exposure, and uptake of TNPs in the ecosystem (1) inhalation; (2) ingestion; (3) deposition. Reproduced with permission from [27].

and splenocyte apoptosis [41,42]. In another study, treatment of female mice with TNPs (5g/kg) by oral gavage caused hepatic injury, nephrotoxicity, and pathological changes in the kidneys [32].

## 3.1.3. Skin

TNPs are widely used in sunscreens, cosmetics, and even clothes to provide protection from harmful UV irradiation. These applications cause general skin exposure, posing the potential risk of percutaneous absorption and ROS-mediated skin aging [43–48]. Skin is the body's first line of defense from the outside world. Skin hair follicles are surrounded by a tight network of capillaries (Fig. 4), which facilitates transdermal drug delivery [49] but also provides a possible route for NP entry and a long-term NP reservoir. Although only 1% of applied TNPs were found in the orifices of hair follicles, these deposits were much harder to remove than those on the skin surface [45–48]. The stratum corneum (the upper layer of epidermis) shields against percutaneous penetration by most extraneous substances [50], but TNPs were shown to penetrate the stratum corneum and the stratum granulosum in pigs [44]. So far, there is no evidence that NP skin penetration leads to systemic exposure. Most studies have found that TNPs remain at the outmost layer of stratum corneum, possibly in skin furrows or the infundibulum; little TNP has been found in the living epidermis [49,51–56]. Moreover, acute dermal irritation studies and local lymph node assays in mice found no irritation or sensitization [57]. Recently, TNPs were found to induce ROS and skin aging after prolonged exposure, especially under illumination [43]. Treatment of human keratinocyte HaCaT cells with low-dose TNPs ( $<60 \mu g/mL$ ) for 24 h altered cell-matrix adhesion but did not affect cell viability [58]. In contrast, ROS induced dose- and time-dependent apoptosis at a higher concentration of TNPs [59] and induced DNA damage and micronuclei in epidermal cells [60]. Photo-irradiation increased the level of ROS and decreased cell viability [61]. ROS-mediated protein



**Fig. 3.** Kinetic properties of NPs in the body. The internal exposure is the portion of the external dose that enters the systemic circulation. Black lines represent confirmed routes of nanoparticles; dashed lines represent hypothetical routes. (Other organs = spleen, heart, reproductive organs, etc.) Reprinted with permission from [33].





ig. i. Skin Structure alu

tyrosine nitration was also observed in mouse skin homogenate, although the relation of this finding to chronic cutaneous diseases needs further study [62]. Considering the aging risks posed by photo-induced oxidative stress and the lack of data on long-term effects on mammalian skin, further investigation of TNP-induced skin alteration is warranted.

#### 3.1.4. Brain and CNS

Because of its high metabolic rate, low capacity for cellular regeneration, and numerous cellular ROS targets, brain is highly vulnerable to oxidative stress. The olfactory nerve is speculated to be the most likely pathway for the transport of intranasally instilled NPs to the brain [30,63,64]. High accumulation, oxidative stress, and obvious morphological alteration of hippocampal neurons and olfactory bulb were detected after nasal exposure to TNPs [65]. In contrast, TNPs induced only a slight brain lesion after oral gavage [32]. The hippocampus was recognized as the main target for TNPs introduced through the olfactory bulb route. TNPs exhibited a time-dependent translocation capacity in CNS after intranasal instillation [66]. Further studies indicated that TNPs could reduce the spatial recognition memory ability of mice. This finding was attributed to the disturbance of homeostasis of trace elements, enzymes, and neurotransmitter systems [67]. TNPs were also able to translocate from the abdominal cavity to the brain and then to cause brain injury and a cascade of reactions, such as lipid peroxidation, excessive release of nitric oxide, reduced antioxidative enzyme activity, reduction of glutamic acid, and down-regulation of acetylcholinesterase activity [68]. Exposure to TNPs enhanced the expression of tumor necrosis factor alpha (TNF- $\alpha$ ), interleukin (IL-1 $\beta$ ), factor- $\kappa$ B-inducible kinase, nucleic factor- $\kappa$ B (NF- $\kappa$ B), and IkB kinase in a dose-dependent manner, while expression of IkB was down-regulated [67-69]. Taken together, the evidence supports concern about the potential neurotoxicity of TNPs.

#### 3.1.5. Developmental toxicity

During early fetal development, blood barriers are incomplete and hazardous substances can easily gain entry and cause injury [70]. In fact, TNPs were shown to be transferred from pregnant mice to their pups [70–73]. When pregnant mice were treated with TNPs via subcutaneous injection, the genital and cranial nerve systems of the male offspring were affected [70]. When time-mated female mice were treated with TNPs, their offspring showed moderate neurobehavioral alterations, although cognitive function was not affected [71]. This finding can be explained by changes in the expression of genes associated with CNS development and function [72]. Maternal intranasal instillation with respirable TNPs increased allergic susceptibility [73] and caused pathologic and functional disorders and reduced daily sperm production in offspring [70].

#### 3.2. TNP toxicity to organisms in the ecosystem

Environmental release of TNPs may pose a significant risk to life within the ecosystem, such as algae, zooplankton, bacteria, and fish [74,75]. TNP aggregation status and abiotic factors, such as ionic strength and pH, affect TMP ecotoxicity [75]. The TNP EC<sub>50</sub> for the green alga Desmodesmus subspicatus was 44 mg/L, showing TNP to be more toxic than bulk TiO<sub>2</sub> [74]. Concentrations of TNPs above 100 mg/L, which was considered nontoxic, were toxic to fish and bacteria [21]. The LC<sub>50</sub> of filtered titania solution to the zooplankton Daphnia magna was 5.5 mg/L for 48 h of exposure [19], and the mortality was over 70% with chronic exposure [76]. In another study, the viability of Daphnia magna was reported to be significantly affected, while the crustacean Thamnocephalus platyurus was not affected under the same conditions [77]. Although TNPs showed only slight effects on D. magna mortality, its reproduction was severely affected by chronic exposure [78]. The ecotoxicity of TNP is ROS-mediated damage to organisms induced by TNP accumulation, disruption of membranes, and other oxidative stress responses [76,79]. TNP micelles or protein-coated TNPs were easily internalized by Salmonella typhimurium [80]. Moreover, TNP penetrated multilayered membranes of Anabaena variabilis and caused oxidative structural membrane damage [81,82]. Consistent with the protective enzymes inhibited, TNP induced oxidative stress, DNA damage and cytotoxicity in Escherichia coli [82] and illuminationenhanced ROS-mediated acute toxicity in daphnids [83].

In summary, TNP is classified as a harmful material that presents a low risk to the ecosystem [84]. However, despite low or moderate toxicity in short-term evaluations, long-term TNP exposure showed greater risks [76]. Rainbow trout treated with 1 mg/L of TNPs for 14 days showed pathologic alterations in the gills (edema and thickening of gill lamellae) as well as oxidative stress, dose/timedependent inhibition of growth, and changes in Cu and Zn levels in tissues [85]. Further, TNPs have a stronger adsorptive capacity for metal ions (*e.g.*, Cu, Cd) than do sediment particles [86,87]. In carp, for example, the presence of TNPs significantly enhanced accumulation of toxic metal ions in the viscera and gills [87]. Furthermore, TNPs passed through the blood–heart/brain barriers [88].

## 3.3. Toxicity of TNPs to mammalian cells

Both cytotoxicity and animal models are used to evaluate the potential toxicity of nanomaterials. When human bronchial epithelial cells (BEAS-2B) were incubated with TNPs, the aggregated TNPs penetrated into the cytoplasm and were observed surrounding the nucleus. They induced an increase in ROS, expression of the oxidative stress-related genes, a decrease in reduced glutathione (GSH), and eventually, cell death [89]. TNPs were also reported to induce mitochondrial dysfunction [90]. Cellular uptake and cytotoxicity of TNPs of various shapes were studied in Hela cells. The zero-dimensional (0D) nanodots and 1D nanorods were internalized after a 24-h incubation, while little of the 3D aggregates was taken up [61]. Cell viability was 80% after treatment with 0D TNPs at and 100% after treatment with 1D and 3D TNPs, all at 125 µg/mL. However, viability after treatment with 1D nanorods decreased by 40% under irradiation, indicating generation of ROS and increased apoptosis [61]. Anatase TNPs ( $LC_{50} \sim 3.6 \mu$ g/mL) were more toxic than rutile ( $LC_{50} \sim 550 \mu$ g/mL) TNPs to human dermal fibroblasts [23]. At a non-cytotoxic concentration (2.5–120 ppm) of P25, brain microglia (BV2) showed a rapid and sustained oxidative stress response and impaired mitochondrial energy production [24]. Human lymphoblastoid cells were affected by TNPs in a time- and dose-dependent manner. However, most of the cells recovered after removal of the nanoparticles [91].

TNPs were reported to induce cell apoptosis and necrosis [92]. Rutile TNPs induced apoptosis through ROS generation [59], while anatase TNPs caused necrosis by inducing membrane leakage [93]. TNPs induced mitotic perturbation, DNA damage, formation of micronuclei (MN), and eventually, apoptosis in Syrian hamster embryo cells [94]. In mitochondrially mediated splenocyte apoptosis, TNPs activated caspases 3 and 9, down-regulated expression of Bcl-2 member genes and proteins, and up-regulated expression of Bax and cytochrome c genes and proteins [18]. TNP altered cellular signaling pathways and induced cellular stress and inflammatory responses. In a study of TNP-induced neuroinflammatory responses, TNPs elevated TNF- $\alpha$  gene expression and activated IKB kinase (NIK), IKK1, and IKK2, eventually causing neuroinflammation and impairment of cognitive function and spatial memory [66,67,69]. TNPs also triggered both chronic inflammation and a change in autoimmunity. After intratracheal instillation of TNPs, mice showed inflammation and increased pro-inflammatory cytokines and proteins in the lung [95].

TNPs can potentially induce genotoxicity and carcinogenicity. Anatase TNPs cause dose-related oxidative DNA damage and micronucleus (MN) formation in A431 and BEAS 2B cells [60,96], as well as sister chromatid exchange at a higher dosage [97]. IMR-90 cells were more sensitive to TNP, showing genotoxicity (ROS-induced DNA adduct formation) [98]. In HepG2 cells, DNA breakage and oxidized purines were found, accompanied by activation of p53 and its downstream DNA damage response genes [99]. Mice given drinking water containing TNPs for five days experienced the formation of 8-hydroxy-2'-deoxyguanosine,  $\gamma$ -H2AX foci, micronuclei, DNA deletions, and DNA double-strand breaks [100]. TNPs inserted into DNA base pairs or directly bound to DNA nucleotides and altered DNA conformation [101]. Anatase TNPs at a dose of 150 mg/kg caused liver DNA cleavage in mice [101]. Furthermore, TNP exposure in utero increased the number of DNA deletions in the fetus [100]. Cellular ROS and apoptosis were not observed when human keratinocyte HaCaT cells were treated with TNPs. However, genes related to inflammatory response and cell adhesion were up-regulated [58].

Although TNPs cause inflammation, cell death, and genotoxicity via different signaling routes (as proposed in Fig. 5), they exert two basic mechanisms of toxicity: (1) toxicity induced by ROS-mediated inflammatory reaction and (2) direct toxicity caused by interaction with biomolecules, such as DNA and pepsin. Current studies focus on the former mechanism, while the latter is more fundamental and less well elucidated.

## 4. Challenges in evaluating TNP's nanotoxicity

The inconsistent reports about TNP toxicity reflect the overall complexity of evaluating nanotoxicity. First, the toxicity of NPs depends on a large number of NP-related properties, such as



**Fig. 5.** Hypothetical cellular interactions of TNPs, with emphasis on potential oxidative stress-induced effects and their consequences. (A) Particle-associated characteristics induce lipid peroxidation, intracellular oxidative stress, and increased cytosolic calcium ion concentration. (B) NPs may undergo active endocytosis via different mechanisms (caveolae, clathrin-coated pits, or receptor-mediated mechanisms). In phagocytic cells, phagocytosis triggers activation of NADPH oxidase and generation of ROS. (C) Particles and their associated metals, as well as oxidative stress, can activate the EGF receptor. (D) Oxidative stress, receptor activation, and increased calcium ions activate transcription of pro-inflammatory genes via transcription factors such as NF-κB. NPs may enter the cell by passive diffusion, remain non-membrane bound, and then (E) enter mitochondria and (F) disrupt normal electron transport, leading to oxidative stress. (G) Free particles may also enter the nucleus via the nuclear pore complex and interact with the genetic material. (H) Lipid peroxide-derived products such as 4-hydroxy nonenal form DNA adducts that may cause genotoxicity and mutagenesis (EGFR, epidermal growth factor receptor).

Reproduced with permission from [126].

the material, crystal form, size, shape, surface area and properties, aggregation status, and impurities [102,103], which are not comprehensively characterized in most published reports. Second, toxicological animal models are crucial to such evaluations, but there may be inter-species differences in toxic effects, and none of the models can predict human toxicity with certainty. Cell lines are even more variable, resulting in inconsistent reports from different labs using the same cell line. Third, experimental conditions are highly variable among labs, and results cannot be meaningfully compared when parameters like dose, exposure time, endpoint assay, and evaluation model differ.

#### 4.1. Evaluation model and experimental conditions

Contradictory results are often obtained from different experimental species. For example, when the subchronic pulmonary responses of different rodent species to inhaled TNPs were investigated, rats showed more severe and persistent inflammation than did mice and hamsters, although the lung burden was equal. Tumors developed in rats but not in mice [16,17,104].

Nanoparticles usually exert classic dose-dependent effects that are enhanced with exposure time [19,23,39]. Dose-dependent alveolar proteinosis, collagenized fibrosis, thickened alveolar walls impairing oxygen diffusion, cholesterol granuloma formation, and focal pleurisy have been observed in rats exposed to TNPs [40,105].

In toxicological evaluations, the effects of a single dose cannot truly recapitulate the effects of environmental exposure to nanomaterials. When ICR mice were intraperitoneally injected with anatase TNPs (5, 10, 50, 100, and 150 mg/kg body weight) for 14 consecutive days, the  $LD_{50}$  was 150 mg/kg and inflammatory responses were generated. TNPs accumulated in various organs in the order of liver > kidney > spleen > lung > brain > heart [18]. When mice were treated with a lower dose of TNPs, little pathological change was observed. However, when mice were treated with a higher dose, liver, kidney, and myocardium were seriously damaged. The balance of blood glucose and of lipids was also perturbed [106].

The route of administration also makes a difference. When TNPs were injected subcutaneously, NPs were found in liver, lymph nodes, and spleen. In contrast, when TNPs were injected intravenously, they were found in lung and kidney [31].

## 4.2. Effects of TNP physicochemical properties on its toxicity

#### 4.2.1. Primary size

Size is widely considered a primary factor in nanotoxicity [39,107–110]. Exposure to NPs was reported to induce greater inflammation than exposure to larger particles with identical chemical composition and mass concentration [30,111–115]. ROS-mediated membrane breakdown and metabolic pathway alterations induced by TNPs were size-dependent [94]. In a pulmonary toxicity evaluation of instilled TNPs of different primary sizes, the smaller particles were found to induce more severe inflammation in the short term [110]. In lungs, the likelihood that NPs would escape alveolar macrophage phagocytosis was highly and inversely related to size. Consequently, smaller NPs may be substantially more likely to translocate from the alveolar epithelium to pulmonary interstitial sites, leading to inflammation [30,109,113].

Conflicting data showing that particle size is not related to inflammatory potential has also been reported [22,23,39,57,102]. It is likely that the factors involved in nanotoxicity are complex and interactive. These include pharmacokinetic properties and aggregation status, which are also important and cannot be ignored.

#### 4.2.2. Crystal form

In a cytotoxicity study, anatase TiO<sub>2</sub> was found to be 100 times as toxic as an equivalent sample of rutile TiO<sub>2</sub>, and the cytotoxic effects of mixed anatase/rutile TiO<sub>2</sub> were intermediate. The more cytotoxic crystal form tends to be more active in generating ROS [23]. In a study of the dependence of membrane LDH leakage and ROS generation on TNP crystal structure, LDH leakage was associated with cell necrosis and was induced by anatase TNPs without ROS generation. In contrast, the rutile TNPs stimulated a relatively high level of ROS, which eventually induced apoptosis. Hence, it was concluded that anatase TNPs mediated necrotic cell death, while rutile TNPs induced apoptosis [93]. Three forms of TNPs were intratracheally instilled in rats, with quartz used as control. The levels of lung inflammation, cytotoxicity, cell proliferation, and histopathological changes were presented as quartz > 80/20 anatase/rutile (uf-3)> fine rutile = ultrafine rutile (uf-1/uf-2). The different responses to uf-3 versus uf-1 and uf-2 TNPs can be attributed to their crystal forms [57]. Similar results have also been achieved by investigating three different crystal forms of TNPs with similar size distributions. The results showed that particle surface reactivity plays a more important role in toxicity than particle size or surface area [102]. In contrast, another study found that anatase TiO<sub>2</sub> did not induce greater ROS generation and that viability did not differ significantly in cells treated with anatase, rutile, and mixed crystal TNPs [93].

#### 4.2.3. Aggregate size

NPs are often described by their primary sizes. Such descriptions become insufficient when discussing the biological effects of NPs, which also depend on the aggregate size of the NPs in various biological fluids. The aggregate size of NPs is influenced by the ionic strength of the solution. TNPs with a diameter of 100 nm can form aggregates of microsize in high-ionic strength solutions (e.g., PBS). High ionic strength reduces the thickness of the electric double layer surrounding the charged NPs and shields the electrostatic repulsion between NPs, resulting in aggregation. In the absence of special modifications, TNPs would be expected to aggregate in body fluids, according to dynamic light scattering results [31]. For example, the average diameter of Degussa P25 measured by dynamic light scattering was 542 nm in de-ionized water and 3500 nm in DMEM, while its primary size was approximatly 26 nm [110]. There is no discernable relationship between agglomeration size, primary size, and crystalline structure. After cellular uptake, most TNPs are localized in endosomes [116,117] and lysosomes, while some are localized in cytoplasm [60,118] or in the peri-nuclear region [89,98] and may even penetrate into the nucleus after prolonged incubation [60,116]. The extent of TNP uptake can be diverse, depending on cell line species, TNP physicochemical properties, incubation time, and the assays used [119]. TNPs with the same aggregate size and crystal structure but with different primary sizes differed in their cytotoxicity [93]. This size-dependent cytotoxicity has also been observed in other NPs [112-114]. Therefore, both the particle aggregate size and the primary size should be considered in evaluating size-dependent toxicity. However, the size-dependent effects were not confirmed in vivo in groups of rats dosed with different agglomerations of TNPs of equal primary size [110].

#### 4.2.4. Surface coating

Surface coating may play a significant role in determining cytotoxicity. Chitin–chitosan/nano TiO<sub>2</sub> composite scaffolds have good biocompatibility with bone tissue [120]. Nonetheless, surface coating on NPs can dramatically alter their risk potential. Treatment of human macrophages and fibroblasts with SiO<sub>2</sub>-coated rutile TNPs caused increases in pulmonary neutrophilia, tumor necrosis factoralpha (TNF-a), and neutrophil-attracting chemokines CXCL1 and CXCL8. However, these changes were minimal when cells were Factor analysis studies of toxicity based on the inherent physicochemical properities of TNPs.

| Study type | Material/characteristics   | Animal/cell   | Treatment |  |   | Factors in TNPs induced toxicity |             |                 |                      |                                   |         |    | Ref.  |
|------------|--|---|-----------|--|---|----------------------------------|-------------|-----------------|----------------------|-----------------------------------|---------|----|-------|
|            |  |   | Route     | Duration   | Dose/<br>concentration                  | Primary<br>size                  | Aggregation | Surface<br>area | Crystal<br>structure | Surface<br>chemical<br>reactivity | Coating | рН |       |
| In vivo    | TNPs (5 nm, 21 nm,<br>50 nm)   | Sprague-<br>Dawley<br>rats                                  | it        | Single dose  | 0.5, 5,<br>50 mg/kg BW                  | +                                |             |                 |                      |                                   |         |    | [106] |
| In vivo    | R-TNPs (uf-1, uf-2); R<br>fine-TiO <sub>2</sub> (F-1);<br>A/R ~ 80/20 P25 (uf-3)   | IGS BR rats   | it        | Single dose  | 1 or<br>5 mg/kg BW                      |                                  |             |                 | +                    | +                                 |         | +  | [57]  |
| In vivo    | Fine TiO <sub>2</sub> (382 nm);<br>R-TNPs (149 nm); A/R<br>TNPs (129 nm); fine<br>quartz (534 nm); nano<br>quartz (12 nm)  | IGS BR rats   | it        | Single dose  | 1 or<br>5 mg/kg BW                      | -                                |             | -               |                      | +                                 |         |    | [102] |
| In vivo    | Fine TiO <sub>2</sub> (R, 300 nm);<br>TNP rods (A,<br>200 nm × 35 nm); TNP<br>dots (A, 10 nm)  | IGS BR rats   | it        | Single dose  | 1 or<br>5 mg/kg BW                      | -                                |             | -               |                      |                                   |         |    | [39]  |
| In vivo    | $TiO_2$ particles (5, 23, and 154 nm)  | CD (SD) rats  | it        | Single dose  | 5 mg/k BW                               | +                                |             |                 |                      |                                   |         |    | [110] |
| In vivo    | TNP (3 nm, 20 nm)  | Kunming mice  | it        | Single dose  | 0.4, 4,<br>40 mg/k BW/                  | -                                | -           | -               |                      |                                   |         | +  | [124] |
| In vitro   | A, A/R, R, Degussa TNPs<br>(3-5 nm)  | Human dermal<br>fibroblasts and<br>lung epithelial<br>cells |           | 24 h   | 0.1 µg/Ml–<br>100 mg/mL                 | -                                |             | -               | +                    |                                   |         |    | [23]  |
| In vitro   | 100% A (6.3, 10, 50,<br>100 nm); 40% A and<br>60% R (39 nm); 61% A<br>and R (39 nm);<br>amporphous (40 nm);<br>100% R (51 nm);<br>Degussa P25 75% A and<br>25% R (26 nm);<br>Ruthenium TiO <sub>2</sub> 100%<br>A (40 nm)  | HEL-30 mouse<br>keratinocyte<br>cell line                   |           | 24 h   | 0, 10, 25, 50,<br>100, and<br>150 μg/mL | +                                | ÷           |                 | ÷                    |                                   |         |    | [93]  |
| In vivo    | R-TiO <sub>2</sub> (80 nm) and<br>A-TiO <sub>2</sub> (155 nm)  | CD-1(ICR)<br>female mice                                    | it        | Every other day<br>for 30 days   | 500 μg/mouse                            |                                  |             |                 | +                    |                                   |         |    | [66]  |
| In vivo    | Commercial TiO <sub>2</sub><br>materials: R (initial<br>size < 5 $\mu$ m); nano<br>(~30 nm) R/A; nano<br>(<25 nm) A;<br>silica-coated nano<br>(~10 nm × 40 nm);<br>needle-like A (cnTiO <sub>2</sub> );<br>A/B TiO <sub>2</sub> (21 nm); SiO <sub>2</sub><br>NPs | Balb/c mice   | INH.      | 2 h on 4<br>consecutive<br>days or 2 h on 4<br>consecutive<br>days per week<br>for 4 weeks | $10\pm 2mg/m^3$                         | -                                | -           | -               |                      |                                   | +       |    | [22]  |

R, rutile; A, anatase; B, brookite; it, intranasal instillation; INH, inhalation; NPs, nanoparticles; BW, body weight; "-", independent factor; "+", dependent factor.

treated with uncoated rutile TNPs, anatase TNPs, and SiO<sub>2</sub> NPs [22]. UV Titan (rutile TiO2 modified with Al, Si, Zr and coated with polyalcohol) is reported to produce prolonged lung inflammation in dams and developmental neurotoxicity in pups [71]. In addition, it causes acute-phase immune and inflammatory responses by altering gene expression [121].

Investigations based on the inherent physicochemical properities of TNPs are summarized in Table 1. The toxicity of TNPs, like that of other NPs, is associated with physicochemical properties, such as size, crystal form, surface coating, and in-solution aggregation. As the data show, nanotoxicity may involve many factors, and much remains to be learned.

## 5. Concluding remarks

Nanotoxicology has developed through three stages: descriptive toxicology, mechanistic toxicology, and regulatory toxicology. Various toxic effects of TNPs have been widely investigated in animals and cells using different exposure routes, doses, duration, and endpoints. The molecular mechanisms of toxicity and the structure–toxicity relationships are just starting to emerge. Most studies show that TNP is toxic to various experimental models, especially when escalating doses are used. However, results obtained from research in cells and animal models cannot be assumed to apply directly to human beings. Therefore, efforts must be made to develop more predictive models and conduct more epidemiological investigations.

The ultimate goal of our efforts is to predict and control TNP toxicity in order to assure its safe application. However, this challenging goal cannot be achieved until the molecular mechanisms of TNP toxicity and the associated structure–toxicity relationships are elucidated. More comprehensive and quantitative models must be built to assist in evaluating the impact of TNPs on humans. Further, approaches to modulate potential TNP toxicity, such as surface coating modifications using nano-combinatorial chemistry methods [122,123], should be developed.

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