

Supplementary Materials

Probabilistic risk assessment of gold nanoparticles after intravenous administration by integrating *in vitro* and *in vivo* toxicity with physiologically based pharmacokinetic modeling

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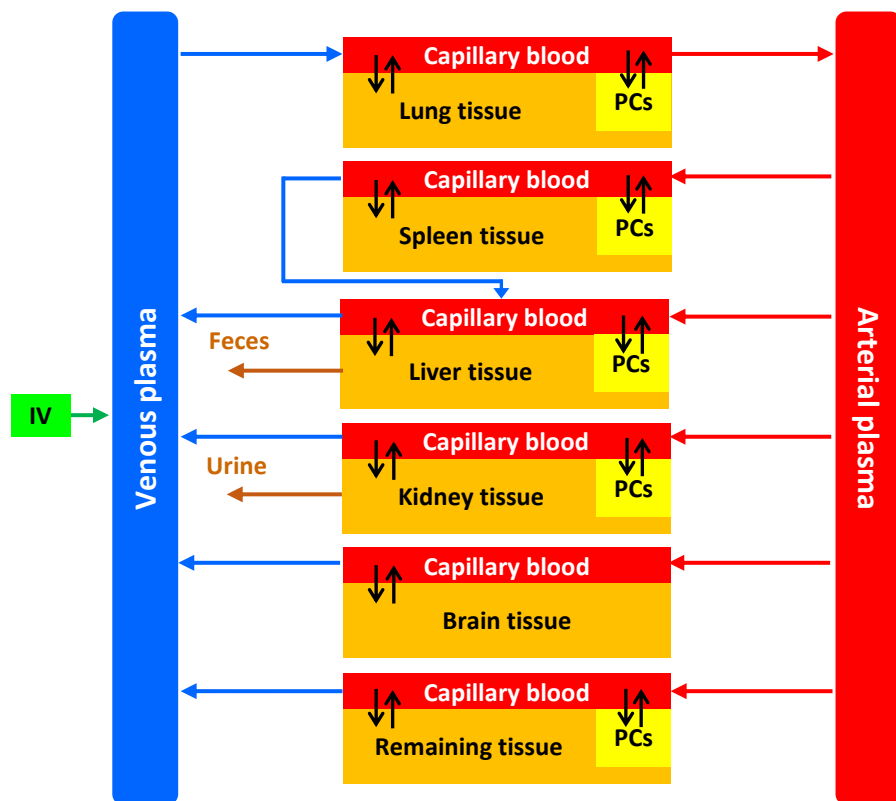


Figure S1. Schematic showing human AuNP-PBPK model following IV administration. This model structure was adapted from our earlier PBPK model for AuNPs in mice, rats, pigs, and humans (Lin et al., 2016a).

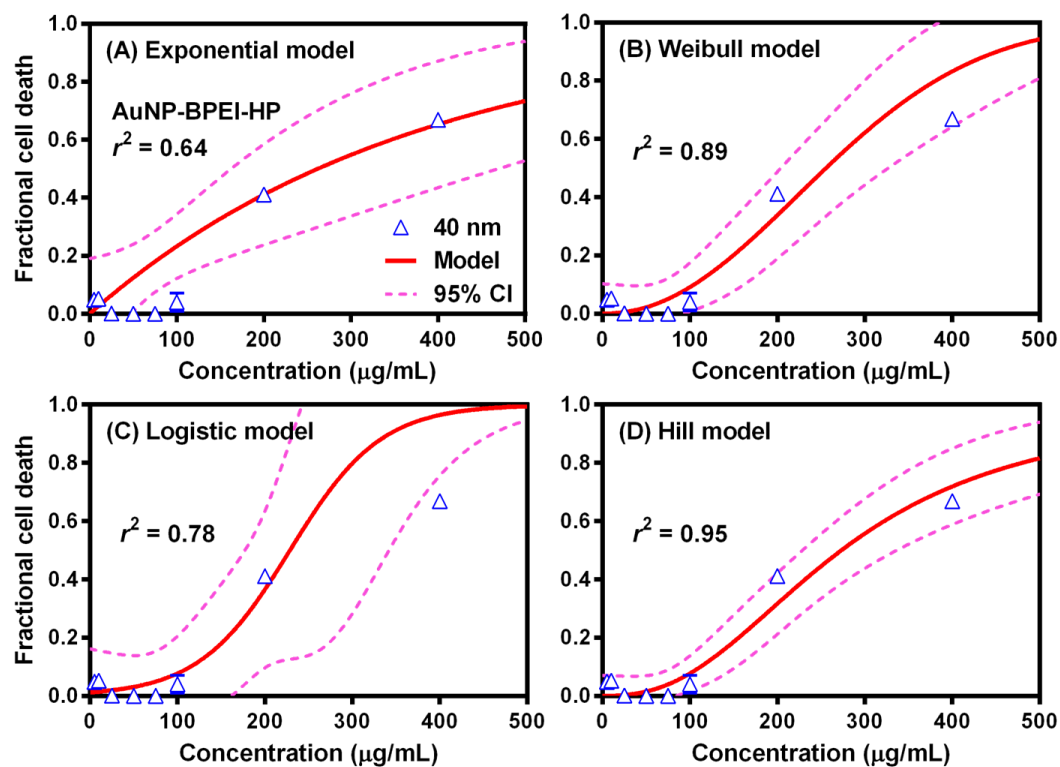


Figure S2. Comparison among fitted dose-response relationships describing concentration-dependent cell death fraction in hepatocytes exposed to 40 nm AuNP-BPEI-HP using (A) exponential, (B) Weibull, (C) Logistic, and (D) Hill model, respectively. AuNP, gold nanoparticle; BPEI, branched polyethylenimine; HP, human plasma proteins.

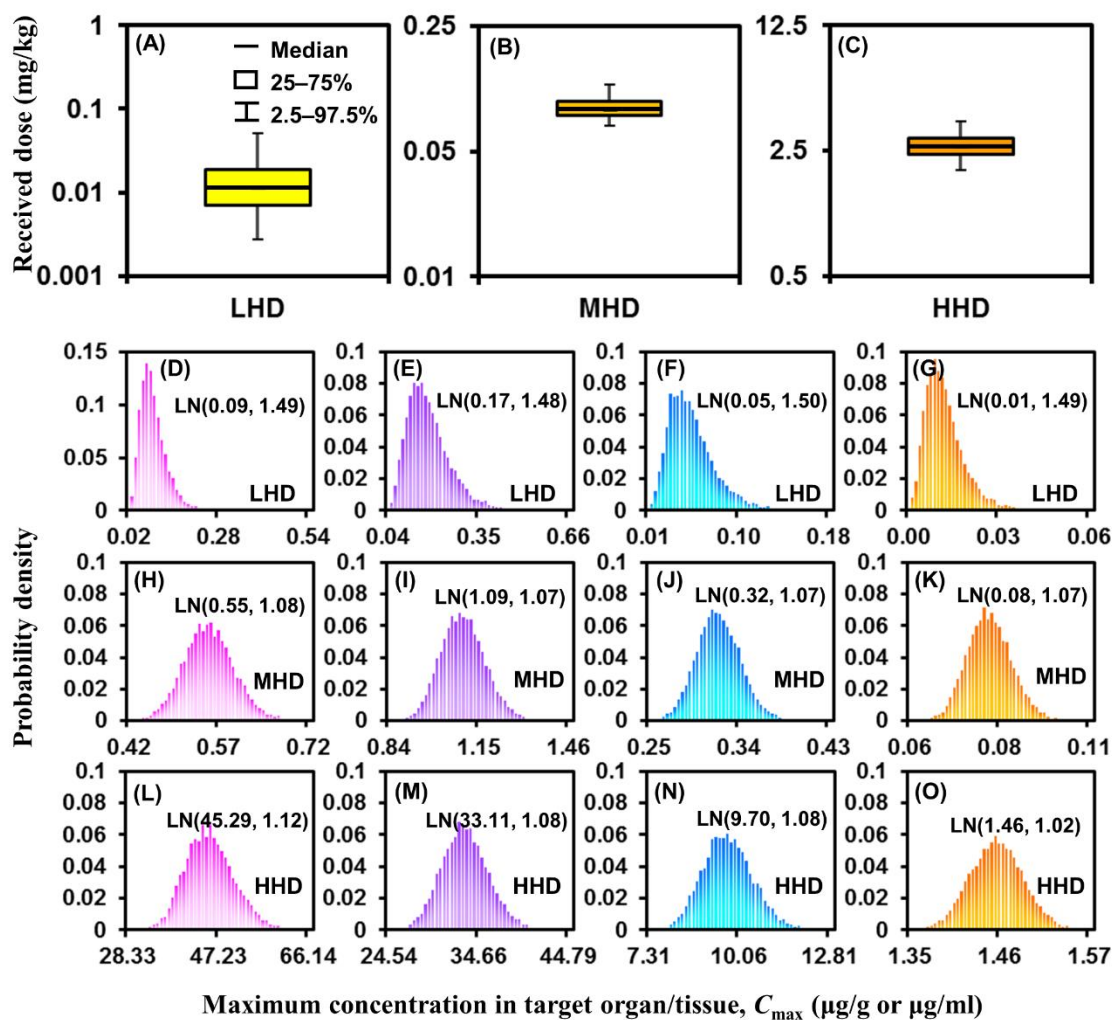


Figure S3. PBPK model-predicted internal organ concentrations of AuNPs. A, B, and C represent low, medium, and high scaled human doses (LHD, MHD, and HHD), respectively. D-O represent maximum internal concentrations in liver (pink) (D, H, L), venous plasma (purple) (E, I, M), kidney (blue) (F, J, N), and skin (orange) (G, K, O) estimated from human AuNP-PBPK model within 24 h after intravenous injection with LHD, MHD, and HHD, respectively.

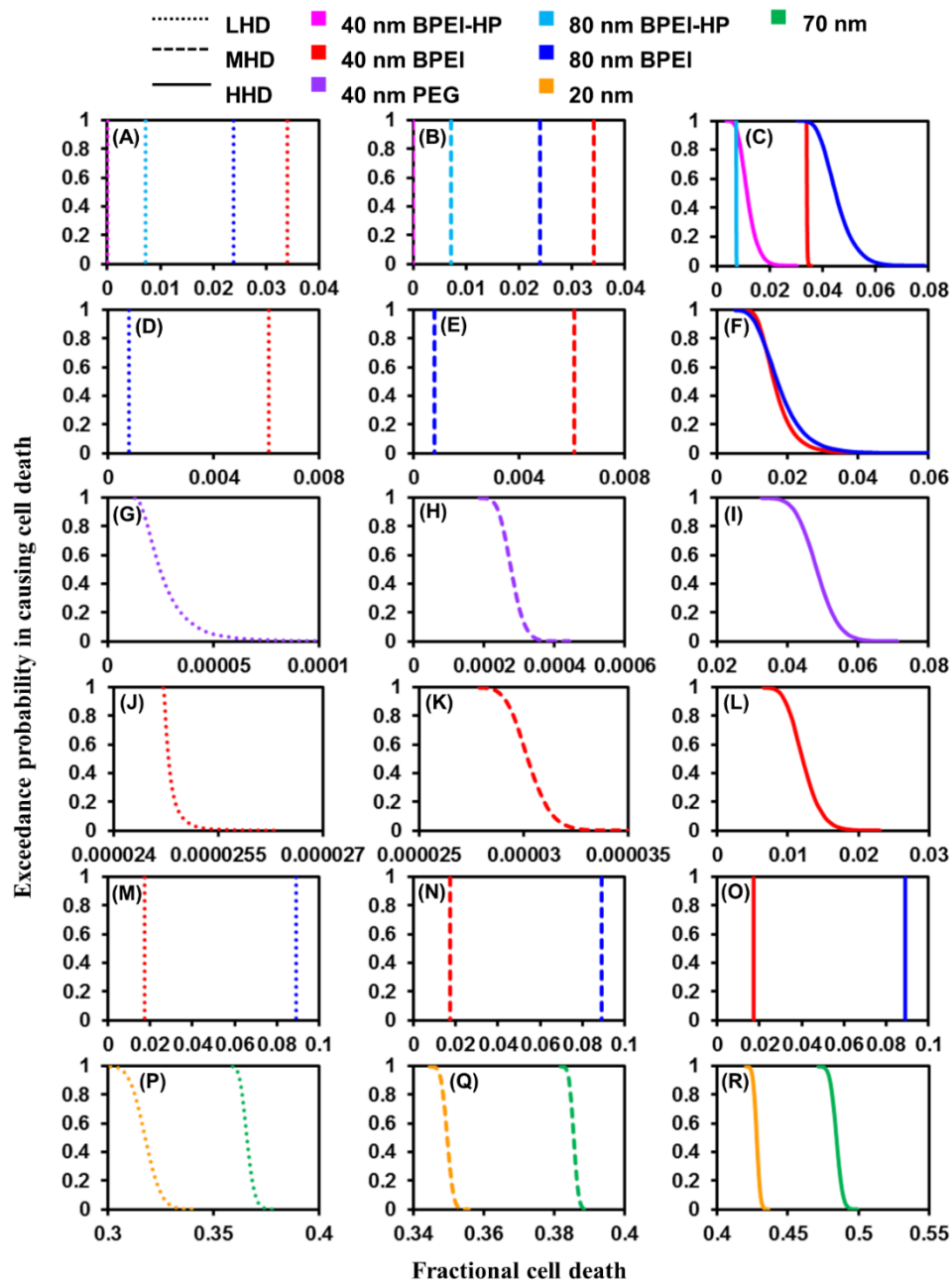


Figure S4. Exceedance risk profiles of internal concentration-associated cell death fraction in hepatocytes (A–C), HUVEC (D–I), HRPTEC (J–L), keratinocytes (M–O), and PMNs (P–R) given low (dotted line), medium (dashed line), high (solid line) scaled intravenous doses.

Table S1. Summary of selected *in vitro* studies used for dose-response analyses.

Human cell type	Size and surface coating of AuNPs	Cell density and incubated medium	Exposed AuNP concentration (µg/ml)	Incubated duration	Detection reagent/ method/instrument	Reference
Keratinocytes	40, 80 nm; BPEI, LA, PEG	10 ⁴ /96-well KGM-Gold™	12.5–100	24, 48 h	AlamarBlue/fluorescence microplate reader	Li and Monteiro-Riviere (2016)
Hepatocytes	40, 80 nm; BPEI, LA, PEG coated w/ HP or HSA	6×10 ⁴ /96-well Williams' medium E	0–400	24 h	AlamarBlue/fluorescence microplate reader	Choi et al. (2017)
HUVEC	40, 80 nm; BPEI, LA, PEG coated w/ HP or HSA	10 ⁴ /96-well EGM-2	0–100	24 h	AlamarBlue/fluorescence microplate reader	Chandran et al. (2017)
HRPTEC	40, 80 nm; BPEI, LA, PEG coated w/ HP or HSA	1.25×10 ⁴ /96-well EpiCM	0–200	24 h	AlamarBlue/fluorescence microplate reader	Ortega et al. (2017)
PMNs	20, 70 nm; NA	10 ⁷ /96-well RPMI-1640	0–100	24 h	Hema 3/cytology light microscopy	Noël et al. (2016)

Abbreviations: BPEI, branched polyethylenimine; LA, lipoic acid; PEG, polyethylene glycol; HP, human plasma proteins; HSA, human serum albumin; HRPTEC, human renal proximal tubule epithelial cells; HUVEC, human umbilical vein endothelial cells; PMN, polymorphonuclear neutrophil cells; NA, not available.

Table S2. Parameters used in *in vitro* sedimentation, diffusion and dosimetry (ISDD) model and estimated deposited fractions of AuNPs.

Size/surface coating of AuNPs	Hydrodynamic diameter in the DI water (nm) ^a	Hydrodynamic diameter in the medium at 37°C (nm) ^a	Density of AuNPs (g/mL)	Fractal dimension (DF) ^b	Packing factor (PF) ^b	Viscosity of medium at 37°C (N s/m ²) ^b	Density of medium (g/mL) ^a	Medium height (cm) ^a	Deposited fraction of AuNPs at 6, 12, and 24 h
40 nm; BPEI	59.4 ± 0.2	177.7 ± 3.3	19.32	2.3	0.637	0.00069	1	0.3125	0.41/0.79/1
80 nm; BPEI	118.9 ± 0.8	150.3 ± 1.1							0.91/1/1
40 nm; LA	48.7 ± 0.3	63.9 ± 0.4							0.30/0.52/0.83
80 nm; LA	103.8 ± 4.0	123.2 ± 0.6							0.83/1/1
40 nm; PEG	71.1 ± 0.2	64.1 ± 0.5							0.30/0.52/0.83
80 nm; PEG	133.1 ± 0.8	126.7 ± 0.9							0.84/1/1

^a Reported as average values of hydrodynamic diameter (mean ± SD) that were adopted from Choi et al. (2017).^b Defaulted values adopted from Hinderliter et al. (2010).

Table S3. Summary of intravenously (IV) administered dosages of AuNPs applied in animal studies and associated scaled dosages that were implemented in human PBPK modeling.

Animal	Size/coating/modification of AuNPs	IV dosage (mg/kg)		Dosing level ^b	Detection method	Reference
		Animal	Human ^a			
Adult rats	1.4, 2.8, 5, 18, 80, 200 nm; TPPMS, TGA, CA	0.005–0.3	0.001–0.05	Low	NAA	Hirn et al. (2011)
Adult mice	50, 80, 100, 150 nm; PEG	0.5–0.6	0.04–0.05	Medium	NAA	Bergen et al. (2006)
Adult mice	Nanorod: 65 nm; PEG	1.2–2.7	0.1–0.2	Medium	ICP-MS	Niidome et al. (2006)
Adult mice	2, 40 nm; citrate	0.6–3.2	0.05–0.3	Medium	AMG	Sadauskas et al. (2007)
Adult rats	10, 50, 100, 250 nm; NA	0.3–0.4	0.06–0.08	Medium	ICP-MS	De Jong et al. (2008)
Adult mice	13 nm; PEG	0.2–4.3	0.01–0.3	Medium	ICP-MS	Cho et al. (2009)
Adult rats	18.4 nm; citrate	0.6–1.0	0.1–0.2	Medium	GF-AAS	Morais et al. (2012)
Adult mice/rats	Nanorod: 60 nm; PEG	0.1	0.01–0.02	Medium	AAS	El-Sayed et al. (2013)
Adult mice	110 nm; PEG	10.3 ± 1.3	0.8 ± 0.1	High	NAA	James et al. (2007)
Adult mice	2 – 20 nm; GSH, pMBA	36.9–86.4	2.9–6.9	High	ICP-MS	Wong et al. (2013)

^a Human dosages were scaled from animal IV dosages based on conversion factors adopted from [Nair and Jacob \(2016\)](#).

^b Administered dosing levels were classified based on [Khlebtsov and Dykman \(2011\)](#).

Abbreviations: AAS, atomic absorption spectrometry; AMG, autometallography; CA, cysteamine (2-aminoethanethiol); GF-AAS, graphite furnace atomic absorption spectrometry; GSH, glutathione; ICP-MS, inductively coupled plasma mass spectrometry; NA, not available; NAA, neutron activation analysis; PEG, polyethylene glycol; pMBA, *p*-mercaptobenzoic acid; TGA, thioglycolic acid (mercaptoacetic acid); TPPMS, triphenylphosphine m-monosulfonate.

Table S4. Fitted parameters (mean $\pm$ SE) of the selected dose-response models for describing the relationship between exposure concentration and fractional cell death in human hepatocytes.

Size/surface coating of AuNPs	Model	$E_{\min}$	$E_{\max}$	EC_{50}^a	α	β	γ or n	r^2
40 nm; BPEI	Exponential	0.0001 $\pm$ 0.06	1	261.86		0.003 $\pm$ 0.001*		0.7781***
	Weibull	0.04 $\pm$ 0.03	1	184.51		0.005 $\pm$ 0.0002***	5.53 $\pm$ 1.76*	0.9396***
	Logistic	0.03 $\pm$ 0.03	1	183.97	7.64 $\pm$ 2.31**	0.04 $\pm$ 0.01**		0.9391***
	Hill	0.03 $\pm$ 0.02	1	185.01 $\pm$ 7.89***			6.16 $\pm$ 1.86**	0.9428***
80 nm; BPEI	Exponential	0.00001 $\pm$ 0.05	1	231.67		0.003 $\pm$ 0.001***		0.8401***
	Weibull	0.002 $\pm$ 0.04	1	213.19		0.004 $\pm$ 0.0004***	1.59 $\pm$ 0.34***	0.8908***
	Logistic	0.05 $\pm$ 0.04	1	191.98	5.88 $\pm$ 1.69**	0.03 $\pm$ 0.009**		0.8869***
	Hill	0.02 $\pm$ 0.04	1	210.07 $\pm$ 15.52***			2.46 $\pm$ 0.57***	0.8977***
40 nm; BPEI-HP	Exponential	0.0001 $\pm$ 0.08	1	261.86		0.003 $\pm$ 0.001*		0.6359**
	Weibull	0.0001 $\pm$ 0.04	1	255.73		0.003 $\pm$ 0.0003***	2.11 $\pm$ 0.50**	0.8916***
	Logistic	0.00001 $\pm$ 0.09	1	228.73	4.41 $\pm$ 2.75**	0.02 $\pm$ 0.01		0.7774**
	Hill	0.00001 $\pm$ 0.03	1	273.30 $\pm$ 23.36***			2.47 $\pm$ 0.45***	0.9468***
80 nm; BPEI-HP	Exponential	0.00001 $\pm$ 0.03	1	1059.87		0.001 $\pm$ 0.0003*		0.5616***
	Weibull	0.007 $\pm$ 0.004	1	394.52		0.002 $\pm$ 0.00003***	3.70 $\pm$ 0.27***	0.9887***
	Logistic	0.001 $\pm$ 0.006	1	394.97	5.61 $\pm$ 0.42***	0.01 $\pm$ 0.001***		0.9882***
	Hill	0.007 $\pm$ 0.004	1	394.66 $\pm$ 5.45***			4.22 $\pm$ 0.28***	0.9887***

* $p < 0.05$; ** $p < 0.01$; *** $p < 0.001$.

^a Parameter values of EC_{50} for exponential, Weibull, and Logistic models were estimated using TableCurve 2D based on constructed dose-response models.

Abbreviations: $E_{\min}$ and $E_{\max}$, minimum and maximum fraction of cell death; EC_{50} , exposure concentration leading to half maximum fractional cell death ($\mu\text{g/ml}$); α , location parameter for the Logistic model; β : slope parameter in dose-response models; γ , exponent parameter for the Weibull model; n , Hill coefficient or exponent; r^2 , coefficient of determination.

Table S5. EC_5 and EC_{10} with mean and 95% CI estimates based on the built dose-response relationships.

Human cell types	Size/surface coating of AuNPs	EC_5 ($\mu\text{g/ml}$)	EC_{10} ($\mu\text{g/ml}$)
Hepatocytes	40 nm; BPEI-HP	82.8 (40.2–125.3)	112.0 (81.7–152.8)
	80 nm; BPEI-HP	189.2 (173.4–208.1)	230.3 (215.2–246.6)
	40 nm; BPEI	95.4 (46.5–144.3)	121.1 (89.7–152.4)
	80 nm; BPEI	49.0 (9.5–88.5)	77.3 (30.9–108.8)
HUVEC	40 nm; BPEI	43.7 (37.3–50.2)	51.0 (45.5–55.8)
	80 nm; BPEI	42.3 (33.4–51.2)	49.9 (40.4–56.7)
	40 nm; PEG	33.8 (12.0–55.6)	62.2 (31.4–101.2)
HRPTEC	40 nm; BPEI	18.5 (11.0–26.1)	25.8 (14.2–32.0)
Keratinocytes	40 nm; BPEI	29.7 (23.2–36.2)	38.2 (33.3–43.4)
	80 nm; BPEI	NA	12.8 (0–28.8)

Abbreviations: EC_5 and EC_{10} , exposed concentrations leading to 5% and 10% maximum fractional cell death, respectively; BPEI, branched polyethylenimine; PEG, polyethylene glycol; HP, human plasma proteins; HUVEC, human umbilical vein endothelial cells; HRPTEC, human renal proximal tubule epithelial cells; NA, not available.

Human PBPK model code for AuNPs

{{AuNP-PBPK model for humans extrapolated from rats with the main model code adopted from Lin et al. (2016a) and incorporated with Monte Carlo simulation for Lognormally distributed intravenous (IV) dosages to estimate distribution profiles of internal AuNP exposure concentration}}}

METHOD RK4

STARTTIME = 0

STOPTIME = 24

DT = 0.00125

DTOUT = 0.005

; Blood flow rate (Fraction of cardiac output, unitless)

QCC = 16.5 ; Cardiac output (L/h/kg^{0.75}) (Brown et al.,1997)

QLC = 0.227 ; Fraction of blood flow to liver (Brown et al.,1997)

QBRC = 0.114 ; Fraction of blood flow to brain (Brown et al., 1997)

QKC = 0.175 ; Fraction of blood flow to kidneys (Brown et al.,1997)

QSC = 0.01375 ; Fraction of blood flow to spleen (Davies and Morris, 1993)

; Tissue volumes (Fraction of body weight, unitless)

BW = 70 ; Body weight (kg) (Brown et al., 1997)

VLC = 0.0257 ; Liver (Brown et al.,1997)

VBRC = 0.02 ; Brain (Brown et al., 1997)

VKC = 0.0044 ; Kidneys (Brown et al.,1997)

VSC = 0.00257 ; Spleen (Davies and Morris,1993)

VLuC = 0.008 ; Lungs (Brown et al., 1997)

VPlasmaC = 0.079 ; Plasma (Davies and Morris, 1993; Brown et al., 1997)

; Blood volume fraction in organs and tissues (percentage of organs/tissues, unitless)

BVL = 0.11 ; Liver (Brown et al. 1997)

BVBR = 0.04 ; Brain (Brown et al., 1997)

BVK = 0.36 ; Kidneys (Brown et al., 1997)

BVS = 0.3 ; Spleen (Brown et al., 1997, average of mouse, rat, and dog)

BVLu = 0.3867 ; Lungs (Brown et al., 1997, average of mouse, rat, and dog)

BVrest = 0.01 ; Rest of body (Brown et al., 1997, assume equal to the muscle)

; Tissue:plasma distribution coefficients (P, unitless); these values were from our published mouse PBPK model for gold nanoparticles (Lin et al., 2016b)

PL = 0.08 ; Liver

PBR = 0.15 ; Brain

PK = 0.15 ; Kidneys

PS = 0.15 ; Spleen

PLu = 0.15 ; Lungs

Prest = 0.15 ; Rest of body

; Membrane-limited permeability coefficient constants (PA, unitless); these values were from our published mouse PBPK model for gold nanoparticles (Lin et al., 2016b)

PALC = 0.001 ; Liver

PABRC = 0.000001 ; Brain

PAKC = 0.001 ; Kidneys

PASC = 0.001 ; Spleen

PALuC = 0.001 ; Lungs

PArestC = 0.000001 ; Rest of body

; Endocytic parameters; RES represent phagocytic cells; L, S, K, Lu, rest represent liver, spleen, kidneys, lungs, and rest of body, respectively.

KLRESrelease = 0.025 ; Release rate constant of phagocytic cells (h^{-1})
 KLRESmax = 20 ; Maximum uptake rate constant of phagocytic cells (h^{-1})
 KLRES50 = 24 ; Time reaching half maximum uptake rate (h)
 KLRESn = 0.5 ; Hill coefficient (unitless)
 ALREScap = 195 ; Uptake capacity per tissue weight ($\mu\text{g/g}$ tissue)

KSRESrelease = 0.09 ; Release rate constant of phagocytic cells (h^{-1})
 KSRESmax = 10 ; Maximum uptake rate constant of phagocytic cells (h^{-1})
 KSRES50 = 24 ; Time reaching half maximum uptake rate (h)
 KSRESn = 0.5 ; Hill coefficient (unitless)
 ASREScap = 150 ; Uptake capacity per tissue weight ($\mu\text{g/g}$ tissue)

KKRESrelease = 0.0075 ; Release rate constant of phagocytic cells (h^{-1})
 KKRESmax = 0.5 ; Maximum uptake rate constant of phagocytic cells (h^{-1})
 KKRES50 = 24 ; Time reaching half maximum uptake rate (h)
 KKRESn = 0.5 ; Hill coefficient (unitless)
 AKREScap = 330 ; Uptake capacity per tissue weight ($\mu\text{g/g}$ tissue)

KLuRESrelease = 0.07 ; Release rate constant of phagocytic cells (h^{-1})
 KLuRESmax = 1 ; Maximum uptake rate constant of phagocytic cells (h^{-1})
 KLuRES50 = 24 ; Time reaching half maximum uptake rate (h)
 KLuRESn = 0.5 ; Hill coefficient (unitless)
 ALuREScap = 150 ; Uptake capacity per tissue weight ($\mu\text{g/g}$ tissue)

KrestRESrelease = 0.1 ; Release rate constant of phagocytic cells (h^{-1})
 KrestRESmax = 80 ; Maximum uptake rate constant of phagocytic cells (h^{-1})
 KrestRES50 = 24 ; Time reaching half maximum uptake rate (h)
 KrestRESn = 0.5 ; Hill coefficient (unitless)
 ArestREScap = 1.5 ; Uptake capacity per tissue weight ($\mu\text{g/g}$ tissue)

; Biliary excretion
 KbileC = 0.0008 ; Biliary clearance ($\text{L/hr/kg}^{0.75}$)
 ; L/hr/kg changed to $\text{L/h/kg}^{0.75}$ for interspecies extrapolation

; Urine excretion
 KurineC = 0.0008 ; Urine clearance ($\text{L/hr/kg}^{0.75}$)
 ; L/hr changed to $\text{L/h/kg}^{0.75}$ for interspecies extrapolation

; IV dosing
 Timeiv = 0.005 ; IV infusion time (h), set, approximately 15-20 seconds, on average 18 sec
 PDOSEiv = 0.001286 ; mg/kg

; Low IV dose (<0.1 mg/kg in animal dose)
 LDM = 0.0817 ; low animal dose (mean) (mg/kg)
 LDSD = 0.0699 ; low animal dose (SD) (mg/kg)
 LDLOGM = $\text{LOGN}(\text{LDM}^2/(\text{LDM}^2+\text{LDSD}^2)^{0.5})$; logarithmized animal dose (mean) (mg/kg)
 LDLOGSD = $(\text{LOGN}(1+\text{LDSD}^2/\text{LDM}^2))^{0.5}$; logarithmized animal dose (SD) (mg/kg)
 LPDOSEiv = $\text{EXP}(\text{NORMAL}(\text{LDLOGM}, \text{LDLOGSD}))$; lognormally distributed animal dose

; Medium IV dose (0.1-10 mg/kg in animal dose)
 MDM = 0.87 ; medium animal dose (mean) (mg/kg)
 MDSD = 0.16 ; medium animal dose (SD) (mg/kg)
 MDLOGM = $\text{LOGN}(\text{MDM}^2/(\text{MDM}^2+\text{MDSD}^2)^{0.5})$; logarithmized animal dose (mean) (mg/kg)

$MDLOGSD = (LOGN(1+MDSD^2/MDM^2))^0.5$; logarithmized animal dose (SD) (mg/kg)
 $MPDOSEiv = EXP(NORMAL(MDLOGM, MDLOGSD))$; lognormally distributed animal dose

; High IV dose (>10 mg/kg in animal dose)
 $HDM = 33.81$; high animal dose (mean) (mg/kg)
 $HDSD = 5.33$; high animal dose (SD) (mg/kg)
 $HDLOGM = LOGN(HDM^2/(HDM^2+HDSD^2))^0.5$; logarithmized animal dose (mean) (mg/kg)
 $HDLOGSD = (LOGN(1+HDSD^2/HDM^2))^0.5$; logarithmized animal dose (SD) (mg/kg)
 $HPDOSEiv = EXP(NORMAL(HDLOGM, HDLOGSD))$; lognormally distributed animal dose

; Scaled parameters
; Cardiac output and regional blood flow (L/h)
 $QC = QCC*BW^0.75$; Cardiac output
 $QL = QC*QLC$; Blood flow to liver
 $QBR = QC*QBRC$; Blood flow to brain
 $QK = QC*QKC$; Blood flow to kidneys
 $QS = QC*QSC$; Blood flow to spleen
 $Qrest = QC-QL-QBR-QK-QS$; Blood flow to rest of body
 $Qbal = QC-QL-QBR-QK-QS-Qrest$; Blood flow balance equation

; Tissue volumes (L)
 $VL = BW*VLC$; Liver
 $VBR = BW*VBRC$; Brain
 $VK = BW*VKC$; Kidneys
 $VS = BW*VSC$; Spleen
 $VLu = BW*VLuC$; Lungs
 $VPlasma = BW*VPlasmaC$; Plasma
 $Vrest = BW-VL-VBR-VK-VS-VLu-VPlasma$; Rest of body
 $Vbal = BW-VL-VBR-VK-VS-VLu-VPlasma-Vrest$; Tissue volume balance equation

; Capillary blood and tissue interstitium volume in each tissue (L)
 $VLb = VL*BVL$; Weight/volume of capillary blood in liver compartment
 $VLt = VL-VLb$; Weight/volume of tissue in liver compartment
 $VBRb = VBR*BVBR$; Weight/volume of capillary blood in brain compartment
 $VBRt = VBR-VBRb$; Weight/volume of tissue in brain compartment
 $VKb = VK*BVK$; Weight/volume of capillary blood in kidney compartment
 $VKt = VK-VKb$; Weight/volume of tissue in kidney compartment
 $VSb = VS*BVS$; Weight/volume of capillary blood in spleen compartment
 $VSt = VS-VSb$; Weight/volume of tissue in spleen compartment
 $VLub = VLu*BVLu$; Weight/volume of capillary blood in lung compartment
 $VLut = VLu-VLub$; Weight/volume of tissue in lung compartment
 $Vrestb = Vrest*BVrest$; Weight/volume of capillary blood in rest of body compartment
 $Vrestt = Vrest-Vrestb$; Weight/volume of tissue in rest of body compartment

; Permeability coefficient-surface area cross-product (L/h)
 $PAL = PALC*QL$; Liver
 $PABR = PABRC*QBR$; Brain
 $PAK = PAKC*QK$; Kidneys
 $PAS = PASC*QS$; Spleen
 $PALu = PALuC*QC$; Lungs
 $PArest = PArestC*Qrest$; Rest of body

; Endocytosis rate (h^{-1})
 $KLRESUP = (KLRESmax*TIME^{KLRESn}/$
 $(KLRES50^{KLRESn}+TIME^{KLRESn})*(1-(ALRES/(ALREScap*VL))))$; Liver

$KSRESUP = (KSRESmax * TIME^{KSRESn} / (KSRES50^{KSRESn} + TIME^{KSRESn}) * (1 - (ASRES / (ASREScap * VS))))$; Spleen
 $KKRESUP = (KKRESmax * TIME^{KKRESn} / (KKRES50^{KKRESn} + TIME^{KKRESn}) * (1 - (AKRES / (AKREScap * VK))))$; Kidneys
 $KLuRESUP = (KLuRESmax * TIME^{KLuRESn} / (KLuRES50^{KLuRESn} + TIME^{KLuRESn}) * (1 - (ALuRES / (ALuREScap * VLu))))$; Lungs
 $KrestRESUP = (KrestRESmax * TIME^{KrestRESn} / (KrestRES50^{KrestRESn} + TIME^{KrestRESn}) * (1 - (ArestRES / (ArestREScap * Vrest))))$; Rest of body

; IV Dosing scenarios

$DOSEiv = PDSEiv * BW$; dose amount (mg)
 $IVR = DOSEiv / Timeiv$; dosing rate (mg/h)
 $RIV = IVR * (1 - \text{step}(1, Timeiv))$; scenario of dosing rate (mg/h)
 $d/dt(AIV) = RIV$
 $\text{init } AIV = 0$

$LDOSEiv = LPDOSEiv * BW$; low amount of dose (mg)
 $LIVR = LDOSEiv / Timeiv$; low dosing rate (mg/h)
 $LRIV = LIVR * (1 - \text{step}(1, Timeiv))$; scenario of low dosing rate (mg/h)
 $d/dt(AIVL) = LRIV$
 $\text{init } AIVL = 0$

$MDOSEiv = MPDOSEiv * BW$; medium amount of dose (mg)
 $MIVR = MDOSEiv / Timeiv$; medium dosing rate (mg/h)
 $MRIV = MIVR * (1 - \text{step}(1, Timeiv))$; scenario of medium dosing rate (mg/h)
 $d/dt(AIVM) = MRIV$
 $\text{init } AIVM = 0$

$HDOSEiv = HPDOSEiv * BW$; high amount of dose (mg)
 $HIVR = HDOSEiv / Timeiv$; high dosing rate (mg/h)
 $HRIV = HIVR * (1 - \text{step}(1, Timeiv))$; scenario of high dosing rate (mg/h)
 $d/dt(AIVH) = HRIV$
 $\text{init } AIVH = 0$

; Elimination

$Kbile = KbileC * BW^{0.75}$; allometric biliary excretion rate (L/h)
 $Kurine = KurineC * BW^{0.75}$; allometric urinary excretion rate (L/h)

{Blood compartment}

; CA = Arterial blood concentration (mg/L or µg/mL)

$RA = QC * CVLu - QC * CA$

$d/dt(AA) = RA$

$\text{init } AA = 0$

$CA = AA / (VPlasma * 0.2)$

; CV = Venous blood concentration (mg/L or µg/mL)

$RV = QL * CVL + QBR * CVBR + QK * CVK + Qrest * CVrest + LRIV - QC * CV$

$d/dt(AV) = RV$

$\text{init } AV = 0$

$CV = AV / (VPlasma * 0.8)$

$APlasma = AA + AV$

$CPlasma = APlasma / VPlasma$

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{Lung compartment}
; Membrane-limited model
RLub = QC*(CV-CVLu) - PALu*CVLu + (PALu*CLut)/PLu + RLuRESrelease - KLuRESup*ALub
d/dt(ALub) = RLub
init ALub = 0
CVLu = ALub/VLu

RLut = PALu*CVLu - (PALu*CLut)/PLu
d/dt(ALut) = RLut
init ALut = 0
CLut = ALut/VLut
ALuttotal = ALub+ALut
CLu = ALuttotal/VLu

RLuRES = KLuRESUP*ALub-KLuRESrelease*ALuRES
RLuRESUP = KLuRESUP*ALub
RLuRESrelease = KLuRESrelease*ALuRES
d/dt(ALuRES) = RLuRES
init ALuRES = 0

CLung = (ALuttotal+ALuRES)/VLu
CLungtissue = (ALut+ALuRES)/VLut
ALungtissue = ALut+ALuRES

{Brain compartment}
; Membrane-limited model
RBRb = QBR*(CA-CVBR) - PABR*CVBR + (PABR*CBRt)/PBR
d/dt(ABRb) = RBRb
init ABRb = 0
CVBR = ABRb/VBRb

RBRt = PABR*CVBR - (PABR*CBRt)/PBR
d/dt(ABRt) = RBRt
init ABRt = 0

CBRt = ABRt/VBRt
ABRtotal = ABRb+ABRt
CBR = ABRtotal/VBR

{Rest of body compartment}
; Membrane-limited model
Rrestb = Qrest*(CA-CVrest)-PArest*CVrest+(PArest*Crestt)/Prest+RrestRESrelease-KrestRESUP*Arestb
d/dt(Arestb) = Rrestb
init Arestb = 0
CVrest = Arestb/Vrestb

Rrestt = PArest*CVrest - (PArest*Crestt)/Prest
d/dt(Arestt) = Rrestt
init Arestt = 0
Crestt = Arestt/Vrestt
Aresttotal = Arestb+Arestt
Crest = Aresttotal/Vrest

RrestRES = KrestRESUP*Arestb-KrestRESrelease*ArestRES
RrestRESUP = KrestRESUP*Arestb

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$R_{restRES_{release}} = K_{restRES_{release}} \cdot A_{restRES}$
 $d/dt(A_{restRES}) = R_{restRES}$
 $init\ A_{restRES} = 0$

$C_{restall} = (A_{resttotal} + A_{restRES}) / V_{rest}$
 $C_{resttissue} = (A_{restt} + A_{restRES}) / V_{restt}$
 $A_{resttissue} = A_{restt} + A_{restRES}$

{Kidney compartment}
 ; Membrane-limited model
 $R_{Kb} = Q_K \cdot (C_A - C_{VK}) - PAK \cdot C_{VK} + (PAK \cdot C_{Kt}) / PK - R_{urine} + R_{KRES_{release}} - K_{KRESUP} \cdot A_{Kb}$
 $d/dt(A_{Kb}) = R_{Kb}$
 $init\ A_{Kb} = 0$
 $C_{VK} = A_{Kb} / V_{Kb}$

$R_{Kt} = PAK \cdot C_{VK} - (PAK \cdot C_{Kt}) / PK$
 $d/dt(A_{Kt}) = R_{Kt}$
 $init\ A_{Kt} = 0$
 $C_{Kt} = A_{Kt} / V_{Kt}$
 $A_{Ktotal} = A_{Kb} + A_{Kt}$
 $CK = A_{Ktotal} / V_K$

$R_{KRES} = K_{KRESUP} \cdot A_{Kb} - K_{KRES_{release}} \cdot A_{KRES}$
 $R_{KRESUP} = K_{KRESUP} \cdot A_{Kb}$
 $R_{KRES_{release}} = K_{KRES_{release}} \cdot A_{KRES}$
 $d/dt(A_{KRES}) = R_{KRES}$
 $init\ A_{KRES} = 0$

$CK_{kidney} = (A_{Ktotal} + A_{KRES}) / V_K$
 $CK_{kidneytissue} = (A_{Kt} + A_{KRES}) / V_{Kt}$
 $A_{kidneytissue} = A_{Kt} + A_{KRES}$

; Urinary excretion
 $R_{urine} = K_{urine} \cdot C_{VK} ; mg/h$
 $d/dt(A_{urine}) = R_{urine}$
 $init\ A_{urine} = 0$

{Spleen compartment}
 ; Membrane-limited model
 $R_{Sb} = Q_S \cdot (C_A - C_{VS}) - PAS \cdot C_{VS} + (PAS \cdot C_{St}) / PS + R_{SRES_{release}} - K_{SRESUP} \cdot A_{Sb}$
 $d/dt(A_{Sb}) = R_{Sb}$
 $init\ A_{Sb} = 0$
 $C_{VS} = A_{Sb} / V_{Sb}$

$R_{St} = PAS \cdot C_{VS} - (PAS \cdot C_{St}) / PS$
 $d/dt(A_{St}) = R_{St}$
 $init\ A_{St} = 0$
 $C_{St} = A_{St} / V_{St}$
 $A_{Stotal} = A_{Sb} + A_{St}$
 $CS = A_{Stotal} / V_S$

$R_{SRES} = K_{SRESUP} \cdot A_{Sb} - K_{SRES_{release}} \cdot A_{SRES}$
 $R_{SRESUP} = K_{SRESUP} \cdot A_{Sb}$
 $R_{SRES_{release}} = K_{SRES_{release}} \cdot A_{SRES}$

$$d/dt(ASRES) = RSRES$$

$$\text{init ASRES} = 0$$

$$CSpleen = (AS_{total} + ASRES)/VS$$

$$CSpleentissue = (AS_t + ASRES)/VS_t$$

$$ASpleentissue = AS_t + ASRES$$

{Liver compartment}

; Membrane-limited model

$$RLb = QL \cdot (CA - CVL) + QS \cdot CVS - PAL \cdot CVL + (PAL \cdot CL_t)/PL - R_{bile} + RLRES_{release} - KLRESUP \cdot ALb$$

$$d/dt(ALb) = RLb$$

$$\text{init ALb} = 0$$

$$CVL = ALb/VLb$$

$$RL_t = PAL \cdot CVL - (PAL \cdot CL_t)/PL$$

$$d/dt(AL_t) = RL_t$$

$$\text{init AL}_t = 0$$

$$CL_t = AL_t/VL_t$$

$$AL_{total} = ALb + AL_t$$

$$CL = AL_{total}/VL$$

$$RLRES = KLRESUP \cdot ALb - KLRES_{release} \cdot ALRES$$

$$RLRESUP = KLRESUP \cdot ALb$$

$$RLRES_{release} = KLRES_{release} \cdot ALRES$$

$$d/dt(ALRES) = RLRES$$

$$\text{init ALRES} = 0$$

$$CLiver = (AL_{total} + ALRES)/VL$$

$$CLivertissue = (AL_t + ALRES)/VL_t$$

$$ALivertissue = AL_t + ALRES$$

; Biliary excretion

$$R_{bile} = K_{bile} \cdot CVL ; \text{mg/h}$$

$$d/dt(A_{bile}) = R_{bile}$$

$$\text{init A}_{bile} = 0$$

{Mass balance}

$$T_{mass} = AA + AV + AL_{total} + ABR_{total} + AK_{total} + ALu_{total} + Arest_{total} + AS_{total} + A_{bile} + A_{urine} \\ + ALRES + ASRES + ALuRES + AKRES + ArestRES$$

$$Bal = AIVL - T_{mass}$$

Reference

- Bergen JM, von Recum HA, Goodman TT, Massey AP, Pun SH. 2006. Gold nanoparticles as a versatile platform for optimizing physicochemical parameters for targeted drug delivery. *Macromol Biosci* 6:506–16.
- Brown RP, Delp MD, Lindstedt SL, Rhomberg LR, Beliles RP. 1997. Physiological parameter values for physiologically based pharmacokinetic models. *Toxicol Ind Health* 13:407–84.
- Chandran P, Riviere JE, Monteiro-Riviere NA. 2017. Surface chemistry of gold nanoparticles determines the biocorona composition impacting cellular uptake, toxicity and gene expression profiles in human endothelial cells. *Nanotoxicology* 11:507–19.
- Cho WS, Cho M, Jeong J, Choi M, Cho HY, Han BS, et al. 2009. Acute toxicity and pharmacokinetics of 13 nm-sized PEG-coated gold nanoparticles. *Toxicol Appl Pharmacol* 236:16–24.
- Choi K, Riviere JE, Monteiro-Riviere NA. 2017. Protein corona modulation of hepatocyte uptake and molecular mechanisms of gold nanoparticle toxicity. *Nanotoxicology* 11:64–75.
- Davies B, Morris T. 1993. Physiological parameters in laboratory animals and humans. *Pharm Res* 10:1093–95.
- De Jong WH, Hagens WI, Krystek P, Burger MC, Sips AJ, Geertsma RE. 2008. Particle size-dependent organ distribution of gold nanoparticles after intravenous administration. *Biomaterials* 29:1912–9.
- El-Sayed MA, Shabaka AA, El-Shabraway OA, Yassin NA, Mahmoud SS, El-Shenawy SM,

- et al. 2013. Tissue distribution and efficacy of gold nanorods coupled with laser induced photoplasmonic therapy in ehrlich carcinoma solid tumor model. PLoS ONE 8:e76207.
- Hinderliter PM, Minard KR, Orr G, Chrisler WB, Thrall BD, Pounds JG, et al. 2010. ISDD: A computational model of particle sedimentation, diffusion and target cell dosimetry for in vitro toxicity studies. Part Fibre Toxicol 7:36.
- Hirn S, Semmler-Behnke M, Schleh C, Wenk A, Lipka J, Schäffler M, et al. 2011. Particle size-dependent and surface charge-dependent biodistribution of gold nanoparticles after intravenous administration. Eur J Pharm Biopharm 77:407–16.
- James WD, Hirsch LR, West JL, O’Neal PD, Payne JD. 2007. Application of INAA to the build-up and clearance of gold nanoshells in clinical studies in mice. J Radioanal Nucl Chem 271:455–9.
- Khlebtsov N, Dykman L. 2011. Biodistribution and toxicity of engineered gold nanoparticles: a review of in vitro and in vivo studies. Chem Soc Rev 40:1647–71.
- Li Y, Monteiro-Riviere NA. 2016. Mechanisms of cell uptake, inflammatory potential and protein corona effects with gold nanoparticles. Nanomedicine (Lond) 11:3185–203.
- Lin Z, Monteiro-Riviere NA, Kannan R, Riviere JE. 2016a. A computational framework for interspecies pharmacokinetics, exposure and toxicity assessment of gold nanoparticles. Nanomedicine (Lond) 11:107–19.
- Lin Z, Monteiro-Riviere NA, Riviere JE. 2016b. A physiologically based pharmacokinetic model for polyethylene glycol-coated gold nanoparticles of different sizes in adult mice. Nanotoxicology 10:162–72.
- Morais T, Soares ME, Duarte JA, Soares L, Maia S, Gomes P, et al. 2012. Effect of surface

- coating on the biodistribution profile of gold nanoparticles in the rat. *Eur J Pharm Biopharm* 80:185–93.
- Nair AB, Jacob SA. 2016. Simple practice guide for dose conversion between animals and human. *J Basic Clin Pharm* 7:27–31.
- Niidome T, Yamagata M, Okamoto Y, Akiyama Y, Takahashi H, Kawano T, et al. 2006. PEG-modified gold nanorods with a stealth character for in vivo applications. *J Control Release* 114:343–7.
- Noël C, Simard JC, Girard D. 2016. Gold nanoparticles induce apoptosis, endoplasmic reticulum stress events and cleavage of cytoskeletal proteins in human neutrophils. *Toxicol In Vitro* 31:12–22.
- Ortega MT, Riviere JE, Choi K, Monteiro-Riviere NA. 2017. Biocorona formation on gold nanoparticles modulates human proximal tubule kidney cell uptake, cytotoxicity and gene expression. *Toxicol In Vitro* 42:150–60.
- Sadauskas E, Wallin H, Stoltenberg M, Vogel U, Doering P, Larsen A, et al. 2007. Kupffer cells are central in the removal of nanoparticles from the organism. *Part Fibre Toxicol* 4:10.
- Wong OA, Hansen RJ, Ni TW, Heinecke CL, Compel WS, Gustafson DL, et al. 2013. Structure-activity relationships for biodistribution, pharmacokinetics, and excretion of atomically precise nanoclusters in a murine model. *Nanoscale* 5:10525–33.