

Chlordane

Chlordane (CAS No. 57-47-9) is a broad-spectrum insecticide that has been used since 1947. Its use has recently been increasingly restricted in many countries, and it is now used mainly to destroy termites by subsurface injection into soil. Chlordane may be a low-level source of contamination of groundwater when applied by subsurface injection. Technical chlordane is a mixture of compounds, with the *cis* and *trans* forms of chlordane predominating. It is very resistant to degradation, highly immobile in soil and unlikely to migrate to groundwater, where it has only rarely been found. It is readily lost to the atmosphere. Although levels of chlordane in food have been decreasing, it is highly persistent and has a high bioaccumulation potential.

Guideline value	0.0002 mg/l (0.2 µg/l)
Occurrence	Has been detected in both drinking-water and groundwater, usually at levels below 0.1 µg/l
PTDI	0.5 µg/kg body weight based on a NOAEL of 50 µg/kg body weight per day for increased liver weights, serum bilirubin levels and incidence of hepatocellular swelling, derived from a long-term dietary study in rats, and using an uncertainty factor of 100 (10 each for interspecies and intraspecies variation)
Limit of detection	0.014 µg/l by GC with ECD
Treatment performance	0.1 µg/l should be achievable using GAC
Guideline value derivation	
• allocation to water	1% of PTDI
• weight	60 kg adult
• consumption	2 litres/day
Additional comments	Chlordane is listed under the Stockholm Convention on Persistent Organic Pollutants. Hence, monitoring may occur in addition to that required by drinking-water guidelines.
Assessment date	2003
Principal references	FAO/WHO (1995) <i>Pesticide residues in food—1994 evaluations</i> WHO (2003) <i>Chlordane in drinking-water</i>

In experimental animals, prolonged exposure in the diet causes liver damage. Chlordane produces liver tumours in mice, but the weight of evidence indicates that it is not genotoxic. Chlordane can interfere with cell communication in vitro, a characteristic of many tumour promoters. IARC re-evaluated chlordane in 1991 and concluded that there is inadequate evidence for its carcinogenicity in humans and sufficient evidence for its carcinogenicity in animals, classifying it in Group 2B.

Chloride

Chloride in drinking-water originates from natural sources, sewage and industrial effluents, urban runoff containing de-icing salt and saline intrusion.

The main source of human exposure to chloride is the addition of salt to food, and the intake from this source is usually greatly in excess of that from drinking-water.

Reason for not establishing a guideline value	Not of health concern at levels found in drinking-water
Additional comments	May affect acceptability of drinking-water
Assessment date	1993
Principal reference	WHO (2003) <i>Chloride in drinking-water</i>

Excessive chloride concentrations increase rates of corrosion of metals in the distribution system, depending on the alkalinity of the water. This can lead to increased concentrations of metals in the supply.

No health-based guideline value is proposed for chloride in drinking-water. However, chloride concentrations in excess of about 250 mg/l can give rise to detectable taste in water (see chapter 10).

Chlorine

Chlorine is produced in large amounts and widely used both industrially and domestically as an important disinfectant and bleach. In particular, it is widely used in the disinfection of swimming pools and is the most commonly used disinfectant and oxidant in drinking-water treatment. In water, chlorine reacts to form hypochlorous acid and hypochlorites. Concentrations of chlorate and some perchlorates increase in hypochlorite solutions upon storage at high ambient temperatures or when new hypochlorite is added to old hypochlorite.

Guideline value	5 mg/l (5000 µg/l)
Occurrence	Present in most disinfected drinking-water at concentrations of 0.2–1 mg/l
TDI	150 µg/kg body weight, derived from a NOAEL for the absence of toxicity in rodents ingesting chlorine in drinking-water for 2 years
Limit of detection	0.01 µg/l following pre-column derivatization to 4-bromoacetanilide by HPLC; 10 µg/l as free chlorine by colorimetry; 200 µg/l by ion chromatography
Treatment performance	It is possible to reduce the concentration of chlorine effectively to zero (< 0.1 mg/l) by reduction. However, it is normal practice to supply water with a chlorine residual of a few tenths of a milligram per litre to act as a preservative during distribution.
Guideline value derivation	
• allocation to water	100% of TDI
• weight	60 kg adult
• consumption	2 litres/day
Additional comments	The guideline value is conservative, as no adverse effect level was identified in the critical study.
	Most individuals are able to taste chlorine at the guideline value.