

ENDOCRINE DISRUPTING CHEMICALS AND FETAL NEURODEVELOPMENTAL DISORDERS

I.G. Goidescu^{*,**,#}, Georgiana Nemeti^{*,#}, Gabriela Caracostea^{*}, M. Surcel^{*},
 Andra Preda^{*}, F. Stamatian^{**}, D. Mureșan^{*}

** Department of Obstetrics and Gynecology I, University of Medicine and Pharmacy 'Iuliu Hațieganu', Cluj-Napoca, Romania*

*** IMOGEN Research Center Institute*

Equal contribution

Abstract

Endocrine Disrupting Chemicals (EDC) is a heterogeneous group of substances that act on steroid receptors, inducing genetic, epigenetic and cellular changes. Their action is validated in all organs with steroid receptors, the effects of which vary depending on the time of exposure.

Neurodevelopmental disorders have experienced a significant increase in recent decades, most carefully studied problems being Autistic disorders and Attention Deficit Hyperactivity Disorder. Although these disorders are multifactorial, it appears that in utero exposure to EDC influences neurogenesis and neurogenesis processes, creating the premise of neurobehavioral disorders.

The purpose of this paper is to review the effects of the main classes of endocrine substances on the fetal nervous system that may lead to neurodevelopment disorders.

Rezumat: Disruptorii endocrini și tulburările de neurodezvoltare

Endocrine Disrupting Chemicals (EDC) constituie un grup heterogen de substanțe care acționează pe receptorii steroizi, inducând modificări la nivel genetic, epigenetic și celular. Acțiunea acestora se validează la nivelul tuturor organelor care prezintă receptori steroizi, efectele acestora fiind variate în funcție și de momentul expunerii.

Tulburările de neurodezvoltare au cunoscut o creștere importantă în ultimele decenii, cele mai atent studiate afecțiuni fiind cele autistice și Tulburările de hiperactivitate cu deficit de atenție. Deși aceste afecțiuni sunt multifactoriale, se pare că expunerea in utero la EDC influențează procesele de neurogeneză și nerulație intrauterine, creând premisele unor afecțiuni neurocomportamentale.

Scopul acestei lucrări este de a trece în revistă efectele principalelor clase de substanțe endocrine asupra sistemului nervos fetal care pot conduce la tulburări de neurodezvoltare.

Cuvinte cheie: Disruptori endocrini, Neurodezvoltare, Autism, ADHD

Introduction

The increase in the prevalence of neurodevelopment disorders in recent decades, particularly autism spectrum disorders (ASD) and Attention Deficit Hyperactivity Disorder (ADHD), has led to a more careful research into the etiology and risk factors involved in these pathologies. Neurodevelopment disorders are a group of disorders characterized by impairment of social

CORRESPONDENCE: Gabriela Caracostea, mail: gabriela.caracostea@umfcluj.ro

KEY WORDS: Endocrine disrupting chemicals, Neurodevelopment, Autistism, ADHD

Obstetrica și Ginecologia 5

aptitudes or intelligence during early childhood and are subclassified into intellectual disability (intellectual development disorder), communication disorders, ASD, ADHD, specific learning disabilities and motor disorders¹.

Fetal central nervous system (CNS) development is a complex process starting approximately from the 18th day of intrauterine life and it is based on a series of biological processes including proliferation, migration, neuronal differentiation and synaptogenesis occurring in a well-established sequence².

Researchers' attention was drawn to neurodevelopmental pathologies, especially ADHD and ASD, mainly due to the fact that they have childhood onset, pointing towards a possible intrauterine neurological trigger. Some of these disorders have an unequal gender distribution, for example, conditions such as ADHD and autistic-like behaviors are more common in boys, whereas girls are more likely to have anxiety and depression disorders, indicating a possible involvement of sex hormones in these pathologies⁵. Interactions between genetic, environmental and social factors are an important determinant of brain development and cognitive behavior⁵.

Numerous articles highlight the impact of environmental risk factors in pregnancy or infancy, which can influence future childhood and adulthood health status³. Studies regarding the harmful effects of environmental pollutants on fetal neurodevelopment began with the description of nicotine- and cigarette-induced changes on the fetal wellbeing, with recent evidence of a possible association between these substances and the development of emotional disturbances or attention deficit⁴.

EDCs are a group of endogenous substances defined as "exogenous agents that interfere with the production, release, transport, metabolism, binding, action or elimination of natural hormones in the body, hormones responsible for maintaining homeostasis and regulating physiological processes⁶.

EDCs are a complex class, which includes many substances harmful to the human body, such as Bisphenol A (BPA), phthalates, pesticides,

polychlorinated biphenyls (PCBs) and heavy metals. These agents are commonly found in cosmetics, pharmaceutical products and even in food⁷ and can easily enter the human body by ingestion, inhalation and even transdermally. They are then deposited in certain tissues and their harmful effects can be validated in the current or even future generations⁷.

EDCs have complex mechanisms of action which can influence the affinity of hormone receptors in all tissues in the body and these effects seem to take place already during intrauterine life. The transplacental passage of these substances has been demonstrated by several studies which highlighted the presence of EDCs in the fetal central nervous tissue⁸. Fetuses are more affected than adults by exposure to EDCs given their decreased hepatic metabolism of these compounds by an yet immature enzymatic system⁹. At the same time, the harmful effects of EDC are validated according to the organogenetic period in which they take action. Substance consumption resulting in neurogenesis impairment has been constantly linked to the neuro-behavioral disorders¹⁰.

The most studied neurodegenerative diseases caused by EDC are ASD and ADHD, with a large body of evidence favouring the association between these pathologies and certain classes of EDCs.

Autistic disorders have a polygenic and multifactorial etiology and typically arise from the complex interactions between certain genetic defects and intrauterine exposure to environmental factors causing a disruption of neurodevelopment and cortical processes^{11,12}.

Attention Deficit Hyperactivity Disorder is a mental disorder resulting from a neurodevelopmental trigger and it's characterized by attention problems, excessive activity or behavioral control difficulties that are not appropriate to the age of a person¹³.

How EDCs affect the CNS development

Brain development extends from the beginning of embryonic life to adolescence, and any disruption of this complex process can have serious and long-lasting consequences on the brain structure

and function resulting in a variety of neurodevelopmental disorders. The fetal brain is subject to continuous intrauterine changes and it is common knowledge that steroid receptors play an important role in the migration process of neurons, neuronal differentiation and formation of new synapses¹⁴. Impairment of the neurulation, neuronal proliferation, differentiation and migration processes, or changes in the synaptogenetic¹⁵ and neurotransmitter systems can lead to behavioral or cognitive deficits¹⁶.

Synaptogenesis appears to be a particularly sensitive period in the neurodevelopment process, given its molecular complexity and long duration - it spans from early gestation to adulthood¹⁰.

EDCs can stimulate the migration and acceleration of the differentiation of glutamatergic (excitatory) and gabbergic neurons (inhibitors) by means of an estrogen-like effect¹⁷.

One of the best-understood and extremely well organized synapses is the excitatory or glutamatergic synapse¹⁷. This also serves to support and mediate a series of critical neuronal processes for synaptic transmission and neuronal plasticity, and its impairment can lead to conditions such as mental retardation or neurobehavioral disorders such as autism¹⁸ and ADHD¹⁹.

Neuronal migration and neurogenesis may be influenced by EDCs through a nicotine-like mechanism, which can induce a reduction in the number of glutamatergic neurons in the medial prefrontal cortex and disruption of neuronal progenitor cell cycles in ventricular and subventricular areas²⁰, changes susceptible to behavioral disorders.

Stimulation of glutamatergic neurons in certain brain areas such as the hypothalamus and the hippocampus may lead to altered eating behaviours²¹, the association between neurobehavioral disorders and obesity being well known.

The hypothalamus is the center that coordinates homeostatic functions such as stress, emotion, reproduction, feeding habits and regulates the production and circulation of sex hormones in the body²². In rodents, sexual dysmorphisms in the hypothalamic regions appear during the perinatal period being caused by an interruption of estrogen

signaling at this level. This is presumed to be one of the main mechanisms underlying neuroendocrine changes triggered by EDCs²³.

At the same time, the hippocampus is susceptible to the action of EDCs, mainly amprenting cognitive functions and IQ, due to the importance of this region of the brain in processes such as memory and learning²⁴.

EDCs can also interfere with the synthesis, transport and release of neurotransmitters that can alter complex neurodegenerative and cognitive processes such as memory, learning and attention, thus leading to the onset of certain conditions such as ADHD or ASD²¹. Among these neurotransmitters are dopamine, serotonin, norepinephrine and glutamate, which play an important role in behavioral, cognitive, learning and memory processes²⁵.

The prototype of this class are pesticides, especially organophosphorus pesticides, whose mechanism of action consists in altering the synthesis and release of neurotransmitters, and ultimately in neurotoxicity²⁶. Several studies have highlighted a link between agricultural areas and a reduction in IQ, attention deficit or human interrelation behavioral disorders in the early years of life²⁶⁻²⁸.

A central role in neuro-behavioral EDC changes seems to be caused by an alteration in thyroid hormone metabolism and their mode of action²⁹. It is well-known the effect of thyroid hormones on neuronal migration and myelinization, which is validated both in the intrauterine life and in childhood²⁹.

Also another important link by which EDCs act on the nervous system is the alteration of local oxidative stress³⁰. Oxidative stress is defined as a change in the balance between pro-oxidant molecules and antioxidants that results in long-term lesions, a mechanism by which environmental factors influence the genetic susceptibility³⁰.

Along with oxidative stress, epigenetic mechanisms such as DNA methylation, histone changes and microRNA alterations can induce changes in fetal neurogenesis by modifying genetic expression³¹. Epigenetic mechanisms play an important role in brain development. In particular, DNA methylation, disorders in the establishment,

maintenance or reading of methylated DNA may be associated with neurodevelopmental disorders³².

Furthermore, in a study from 2016, LaRocca et al. described the cytotoxic effects of EDCs through the changes in the placental microRNA³³, effects which can be different according to the fetal gender. These effects of EDCs differ according to fetal sex because the placenta expresses different isoforms of certain receptors according to fetal gender, and autophagia processes also differ between male and female fetuses³⁴.

Bisphenol A (BPA)

Bisphenol A is considered the prototype of non-steroidal estrogens, which interferes with the estrogen receptors at nuclear level. However, its binding affinity to the estrogen receptor was found to be lower than that of 17 β -estradiol³⁵ and the harmful effects of BPA are manifested through its metabolites such as 4-methyl-2,4-bis (4-hydroxyphenyl) pent-1-ene (MBP)³⁶.

It is used in the production of a variety of chemical products such as polycarbonate plastic and epoxy resin⁷, and as such the most important route of entering the body is oral. Respiratory or transdermal routes are also possible³⁷.

BPA can induce changes in the endocrine system by interacting with estrogen, androgen, or thyroid receptors³⁸. Antenatal exposure of mice to BPA reduces synaptogenesis and synaptic proteins, causes changes in synapse structure, thus affecting behavior and memory, these effects being especially demonstrated in male rodents¹⁵. Furthermore, exposure to BPA may cause neural changes and changes in the glial tissue which also affect predominantly male subjects³⁹.

BPA may cross the placenta and it seems that its presence in maternal urine is associated with hyperreactivity and aggressiveness in children⁴⁰. In a study published in 2009 by Braun et al. they demonstrated that children aggressiveness and hyperreactivity are directly proportional to gestational concentrations of BPA⁴⁰.

In another study using the same cohort of patients, the authors have shown that attention

disturbances and hyperreactivity affect girls rather than boys, suggesting the possibility of a different behavior in adulthood⁴¹. However, the results of this study are disapproved by a more recent publication from 2015 by Casas et al., who reported that prenatal BPA concentrations were associated with an increased risk of ADHD-like behaviors especially in boys⁴².

There are researchers who report aggressive behaviors, but also learning difficulties and anxious and depressive disorders in children exposed to Bisphenol A in utero^{43,44}.

Several studies reported a correlation between mean urinary BPA concentration and ASD cases compared to control groups, some of them after removal of confounding factors such as age, body mass index (BMI), sex, and renal function of patients⁴⁵⁻⁴⁷.

Phthalates

Phthalates are diesters of 1,2-benzenedicarboxylic acid (phthalic acid), a group of chemicals used as plasticizers for vinyl polychlorinated plastic materials⁷. Phthalates reach the human body by ingestion, inhalation or cutaneous absorption⁴⁸ and have the ability to cross the placental barrier, especially those with low molecular weight, their presence being demonstrated in newborn meconium and urine⁴⁹. In addition to placental passage, there are studies that support the transfer of phthalates into breast milk thus validating their harmful effects in the neonatal period⁵⁰.

Phthalates act as EDCs, having both estrogenic and anti-androgenic activity⁵¹. They have a reduced effect in vitro on androgen receptors (AR), suggesting that phthalates are not direct antagonists of these receptors⁵². It is known that phthalates have a short half-life and their harmful effects occur through chronic and long-term exposure.

In rodent experimental models maternal exposure to DEHP (di (2-ethylhexyl) ftalat) decreases the concentration of free cholesterol and sphingomyelin, substances that play an important role in neurodevelopment⁵³. They may cause disruption at the neuro-endocrine level (impairment of estrogen,

androgen and thyroid hormones), may induce changes in dopaminergic neurons in the midbrain and thus affect the differentiation of neurons that lead to ADHD⁵⁴ or may cause placental micro-RNA damage and epigenetic expression alteration^{33,55}.

This mechanism was also described in a study from 2010 by Adibi et al., who analyzed phthalate induced placental transcriptional changes using placentas harvested from 54 vaginal deliveries and proved a direct relationship between these changes and urinary concentrations of phthalates⁵⁶.

Exposure to phthalates leads to neurodegenerative disorders such as ADHD⁵⁷, autistic-like disorders^{58,59}, cognitive problems with lower IQ and sometimes psycho-affective disorders^{60,61}.

Phthalates may lead to neurological and neurobehavioral disorders through an indirect mechanism also, namely the increased risk of premature birth in patients exposed to these substances⁶². There is a positive correlation between urinary concentrations of phthalate metabolites and preterm delivery before 37 weeks, both through the risk of premature labor and the risk of premature rupture of the membranes⁶³. A possible explanation for these induced changes is given by the pro-inflammatory effect of phthalates in the body which has been demonstrated both in vivo and in vitro⁶⁴.

At the same time, phthalates may induce oxidative stress changes, especially at the beginning of organogenesis when embryos are particularly sensitive to toxic injuries due to the transition from anaerobic to aerobic metabolism, which coincides with maturation of mitochondrial structure and function⁶⁵. This could reflect older observations that antioxidant enzyme activity is connected with the onset of organogenesis and at the beginning of this process the embryo cannot adequately protect itself from oxidative imbalances^{65,66}.

Pesticides

Pesticides are a class of harmful substances designed to destroy pests and improve agriculture, but the side effects of this class were not delayed, Rachel Carson being the first person to highlight their

harmful effect on the environment⁶⁷.

The adverse outcome of their use is validated during gametogenesis and early fetal development⁶⁸, because the highest rate of transfer of these chemicals to the fetus is due to the mobilization of the maternal fat reserve during pregnancy⁶⁹ and breastfeeding⁷⁰. Pesticides can cross the placenta based on their liposolubility, and because of the immaturity of the hematoencephalic barrier during intrauterine life they can validate their harmful effects very early in life⁷¹. The lipophilic properties of many pesticides make it possible to concentrate them in organs with high fat content, such as the brain⁷¹.

Newborn and children are extremely vulnerable to pesticides, which can cause a wide range of side effects on intellectual function⁷² and central nervous system development⁷³. Several epidemiological studies have described an association between pesticides exposure and neurological and psychiatric disorders in children and adults. Pesticides exposure may be associated with an increased risk of ASD-like^{28,74}, ADHD^{30,79}, memory / learning and motor disorders^{26,76}.

Organochlorine pesticides

Exposure to organochlorinated pesticides (OC) has been associated with neurological adverse effects for over 40 years, the class exponent being DDT (Dichlorodiphenyltrichloroethane). OCs are liposoluble compounds that can penetrate the neuronal membrane, alter depolarization and increase neuronal excitability^{2,76}. The pre and postsynaptic changes created by OCs and the alterations in the GABAergic, glutamatergic and dopaminergic responses in areas such as the prefrontal cortex and in the brain substantia nigra can induce behavioral changes and damage to cognitive and motor areas^{2,76}.

Also, these substances have a neurodegenerative effect. By affecting cerebral and cerebellar regions they can induce tremors and convulsions with the occurrence of Parkinson's disease⁷⁷.

Numerous studies associate OC pesticides exposure with reduced cognitive function and impaired memory^{72,78}, an impairment in reflexes and motor

function especially of fine movements⁷⁹, attention disorders^{27,75} and ASD⁷⁴.

Organophosphorus pesticides

Organophosphorus pesticides (OP) have as central mechanism of action the inactivation of acetylcholinesterase and enzyme phosphorylation². Acetylcholinesterase is an enzyme that carries out hydrolysis of acetylcholine - a neurotransmitter found in cholinergic synapses in the central and peripheral nervous systems - thus preventing over-stimulation of muscarinic and nicotinic receptors². OPs therefore act as inhibitors of acetylcholinesterase, increasing both the concentration and the time of action of acetylcholine in the body and causing cholinergic hyperactivity and spasms in the smooth and striated muscles².

During fetal development, the neurological effects of OP exposure, even at low doses, may affect neurotransmitters, including acetylcholine, which play essential roles in cellular and architectural development of the brain⁸⁰.

In addition to their anticholinergic effect, OPs can also act by interrupting or interfering with different cellular processes: DNA replication, axonal and dendritic growth, and oxidative stress impairment in the developing brain⁸¹. For example, infants exposed prenatally to a commonly used OP pesticide (chlorpyrifos) showed abnormal changes in brain areas related to attention and receptive language, social knowledge, reward, emotion, and inhibitory control⁸².

The effects of OP pesticides on IQ^{82,83}, cognitive deficits⁸², reflexes^{84,85} and attention disturbances^{86,87} or ASD⁸⁸ appear as early as childhood and aggravate with aging. The first changes that can be highlighted are reflexes and attention deficits⁸⁵.

Polychloro-biphenyls (PCBs)

Polychlorinated biphenyls were once widely used in cooling fluids, electrical equipment and in the manufacture of electrical insulators⁸⁹. These are chlorinated organic compounds that have been banned

since the 80s due to their pollutant effect and long life span in nature⁸⁹. PCBs are lipophilic substances and therefore can cross the placental barrier and be excreted in breast milk^{90,91}. Their effects as EDCs are mainly manifested by neurotoxicity⁹² and thyroid hormone alteration both directly and through their metabolites, hydroxylated PCBs (OH-PCBs), because their chemical structure is similar to that of thyroid hormones⁹³.

It has been proven in rodent models that PCB metabolites can induce changes in hyperreactivity and motor abnormalities^{94,95}, due to inhibition in the development of dendrites in cerebellar Purkinje cells⁹⁶. Also, in a more recent study using rodent models exposed to Aroclor 1254 authors demonstrated that this substance disrupts the maturation development of synaptic excitatory neurons in newborns, especially those from the hippocampus region, which are involved in learning and memory, thus explaining later behavioral changes⁹⁷.

In humans, intrauterine exposure to PCB may be associated with learning disorders, low IQ⁹⁸, ADHD⁹⁹ and autism¹⁰⁰. The prevalence of these pathologies has been on the rise in the past decades.

Heavy metals

Mercury and lead are two heavy metals that have been extensively studied, being considered to act as endocrine disruptors and to have negative effects on neurodevelopment. The most common exposure to these two metals occurs through the use of cosmetics and the consumption of fish during pregnancy, these metals being able to cross the placenta^{101,102}. Exposure to heavy metals, in particular lead and mercury, causes neuronal changes by methylation of DNA and can thus induce neurobehavioral and neurodegenerative changes^{103,104}.

Lead

Lead is the most abundant heavy metal on earth, the main sources of lead exposure are paints, dust, soil, kitchen utensils and gasoline. Exposure to lead even at low doses has been associated with a

number of adverse health effects, cognitive and behavioral disorders¹⁰⁵. Lead exposure may lead to learning and memory disorders in mice through several pathways: synapse changes, synaptic gene regulation, insulin degradation enzyme (IDE), insulin 2-like growth factor (IGF2) amyloid 40 (Ap 40) and tumor necrosis factor (TNF- α)¹⁰⁶. Similar to studies in mice, a study on human neurons has shown that lead exposure may increase the expression of serine / threonine protein phosphatases, changes are associated with impairment of learning and memory¹⁰⁷. Intrauterine exposure to lead is associated with cognitive impairment¹⁰⁸, decreased IQ¹⁰⁹, ADHD¹¹⁰. Following transplacental passage, lead gradually accumulates in fetal tissues, preferentially in the brain¹¹¹.

Mercury (Hg)

Depending on its chemical form, mercury (Hg) can be very toxic. Occupational exposure leads to neurodegenerative disorders, behavioral changes and even death¹⁰². The most common way of contamination is through fish and seafood widely consumed by pregnant women given their abundance in polyunsaturated fatty acids¹⁰².

Rodent exposure to mercury is associated with changes in the dopaminergic system and ADHD type disorders^{102,112}, but also with learning disabilities¹¹³.

In humans, in utero exposure to mercury leads to ADHD and ASD, but this association is often contradictory, because of the beneficial effect of omega 3 fatty acids on fetal neurodevelopment¹¹⁴. The harmful effect of Hg on neurodevelopment and the association with pathologies such as ADHD is possible, this correlation being stronger in studies that have controlled error factors such as the concentration of omega 3 and omega 6 fatty acids in the blood¹¹⁵. These studies also demonstrated that a high consumption of meat fish overrides the harmful effects of mercury^{102,115}.

Conclusions

The harmful effects of EDCs on fetal neurodevelopment are highly dependent on the time

of exposure, some periods of fetal development being more susceptible than others. The link between exposure to EDCs and neuro-behavioral pathologies is clear for most toxic categories, but their mechanisms of action are not yet fully elucidated, and the mode of action on animal models may be different in humans. Also, neither the effects nor the mode of action of simultaneous exposure to several classes of EDCs are known because they can act through different mechanisms or enhance their mutual effects.

References

1. Harris JC. New classification for neurodevelopmental disorders in DSM-5. *Curr Opin Psychiatry*. 2014;27(2):95-97.
2. Vester A, Caudle W. The Synapse as a Central Target for Neurodevelopmental Susceptibility to Pesticides. *Toxics*. 2016;4(3):18.
3. Heindel JJ, Balbus J, Birnbaum L, et al. Developmental origins of health and disease: Integrating environmental influences. *Endocrinology*. 2015;156(10):3416-3421.
4. Alkam T, Kim HC, Hiramatsu M, et al. Evaluation of emotional behaviors in young offspring of C57BL/6J mice after gestational and/or perinatal exposure to nicotine in six different time-windows. *Behav Brain Res*. 2013;239(1):80-89.
5. Rebuli ME, Patisaul HB. Assessment of sex specific endocrine disrupting effects in the prenatal and prepubertal rodent brain. *J Steroid Biochem Mol Biol*. 2016;160:148-159.
6. Kavlock RJ, Daston GP, DeRosa C, et al. Research needs for the risk assessment of health and environmental effects of endocrine disruptors: a report of the U.S. EPA-sponsored workshop. *Environ Health Perspect*. 1996;104(Suppl 4):715-740.
7. Stamatian F, Goidescu I. Side effects of endocrine disruptors on the human reproductive function. *Obstet si Ginecol*. 2016;64(4):205-214.
8. Roncati L, Termopoli V, Pusiol T. Negative role of the environmental endocrine disruptors in the human neurodevelopment. *Front Neurol*. 2016;7(AUG).
9. Creteil T. Onset of xenobiotic metabolism in children: Toxicological implications. *Food Addit Contam*. 1998;15:45-51.
10. Rice D, Barone S. Critical periods of vulnerability for the developing nervous system: Evidence from humans and animal models. *Environ Health Perspect*. 2000;108(SUPPL. 3):511-533.
11. Testa C, Nuti F, Hayek J, et al. Di-(2-Ethylhexyl) Phthalate and Autism Spectrum Disorders. *ASN Neuro*. 2012;4(4)
12. de Cock M, Maas YGH, van de Bor M. Does perinatal exposure to endocrine disruptors induce autism spectrum and attention deficit hyperactivity disorders? Review. *Acta Paediatr*. 2012;101(8):811-818.
13. Sroubek A, Kelly M, Li X. Inattentiveness in attention-deficit/hyperactivity disorder. *Neurosci Bull*. 2013;29(1):103-110.

14. Schug TT, Blawas AM, Gray K, Heindel JJ, Lawler CP. Elucidating the links between endocrine disruptors and neurodevelopment. *Endocrinology*. 2015;156(6):1941-1951.
15. Xu X, Xie L, Hong X, et al. Perinatal exposure to bisphenol-A inhibits synaptogenesis and affects the synaptic morphological development in offspring male mice. *Chemosphere*. 2013;91(8):1073-1081.
16. de Graaf-Peters VB, Hadders-Algra M. Ontogeny of the human central nervous system: What is happening when? *Early Hum Dev*. 2006;82(4):257-266.
17. Meldrum BS. Glutamate as a neurotransmitter in the brain: review of physiology and pathology. *J Nutr*. 2000;130(4S Suppl):1007S-15S.
18. Schmeisser MJ, Ey E, Wegener S, et al. Autistic-like behaviours and hyperactivity in mice lacking ProSAP1/Shank2. *Nature*. 2012;486(7402):256-260.
19. Elia J, Glessner JT, Wang K, et al. Genome-wide copy number variation study associates metabotropic glutamate receptor gene networks with attention deficit hyperactivity disorder. *Nat Genet*. 2012;44(1):78-84.
20. Aoyama Y, Toriumi K, Mouri A, et al. Prenatal Nicotine Exposure Impairs the Proliferation of Neuronal Progenitors, Leading to Fewer Glutamatergic Neurons in the Medial Prefrontal Cortex. *Neuropsychopharmacology*. 2016;41(2):578-589.
21. Luquet S, Perez FA, Hnasko TS, Palmiter RD. NPY/AgRP neurons are essentials for feeding in adult mice but can be ablated in neonates. *Science (80-)*. 2005;310(5748):683-685.
22. Campbell I. Hypothalamic and pituitary function. *Anaesth Intensive Care Med*. 2005;6(10):324-326.
23. Lenz KM, McCarthy MM. Organized for sex - steroid hormones and the developing hypothalamus. *Eur J Neurosci*. 2010;32(12):2096-2104.
24. Grandjean P, Landrigan PJ. Developmental neurotoxicity of industrial chemicals. *Lancet (London, England)*. 2006;368(9553):2167-2178.
25. Rasier G, Parent AS, Gérard A, et al. Mechanisms of interaction of endocrine-disrupting chemicals with glutamate-evoked secretion of gonadotropin-releasing hormone. *Toxicol Sci*. 2008;102(1):33-41.
26. Piek JP, Dyck MJ. Sensory-motor deficits in children with developmental coordination disorder, attention deficit hyperactivity disorder and autistic disorder. *Hum Mov Sci*. 2004;23(3-4 SPE. ISS.):475-488.
27. Richardson JR, Taylor MM, Shalat SL, et al. Developmental pesticide exposure reproduces features of attention deficit hyperactivity disorder. *FASEB J*. 2015;29(5):1960-1972.
28. Sealey LA, Hughes BW, Sriskanda AN, et al. Environmental factors in the development of autism spectrum disorders. *Environ Int*. 2016;88:288-298.
29. Zoeller RT, Rovet J. Timing of Thyroid Hormone Action in the Developing Brain: Clinical Observations and Experimental Findings. *J Neuroendocrinol*. 2004;16(10):809-818.
30. Halliwell B, Gutteridge JMC. *Free Radicals in Biology and Medicine*. Vol 10.; 2007.
31. Berger SL, Kouzarides T, Shiekhattar R, Shilatifard A. An operational definition of epigenetics. *Genes Dev*. 2009;23(7):781-783.
32. Tran NQV, Miyake K. Neurodevelopmental Disorders and Environmental Toxicants: Epigenetics as an Underlying Mechanism. *Int J Genomics*. 2017;2017.
33. LaRocca J, Binder AM, McElrath TF, Michels KB. First-trimester urine concentrations of phthalate metabolites and phenols and placenta miRNA expression in a cohort of U.S. women. *Environ Health Perspect*. 2016;124(3):380-387.
34. Saif Z, Hodyl NA, Hobbs E, et al. The human placenta expresses multiple glucocorticoid receptor isoforms that are altered by fetal sex, growth restriction and maternal asthma. *Placenta*. 2014;35(4):260-268.
35. Welshons W V., Thayer KA, Judy BM, Taylor JA, Curran EM, vom Saal FS. Large effects from small exposures. I. Mechanisms for endocrine-disrupting chemicals with estrogenic activity. *Environ Health Perspect*. 2003;111(8):994-1006.
36. Okuda K, Takiguchi M, Yoshihara S. In vivo estrogenic potential of 4-methyl-2,4-bis(4-hydroxyphenyl)pent-1-ene, an active metabolite of bisphenol A, in uterus of ovariectomized rat. *Toxicol Lett*. 2010;197(1):7-11.
37. Calafat AM, Ye X, Wong LY, Reidy JA, Needham LL. Exposure of the U.S. population to Bisphenol A and 4-tertiary-octylphenol: 2003-2004. *Environ Health Perspect*. 2008;116(1):39-44.
38. Moriyama K, Tagami T, Akamizu T, et al. Thyroid hormone action is disrupted by bisphenol A as an antagonist. *J Clin Endocrinol Metab*. 2002;87(11):5185-5190.
39. Wise LM, Sadowski RN, Kim T, Willing J, Juraska JM. Long-term effects of adolescent exposure to bisphenol A on neuron and glia number in the rat prefrontal cortex: Differences between the sexes and cell type. *Neurotoxicology*. 2016;53:186-192.
40. Braun JM, Yolton K, Dietrich KN, et al. Prenatal bisphenol A exposure and early childhood behavior. *Environ Health Perspect*. 2009;117(12):1945-1952.
41. Yolton K, Xu Y, Strauss D, Altaye M, Calafat AM, Khoury J. Prenatal exposure to bisphenol A and phthalates and infant neurobehavior. *Neurotoxicol Teratol*. 2011;33(5):558-566. doi:10.1016/j.ntt.2011.08.003
42. Casas M, Forn J, Martínez D, et al. Exposure to bisphenol A during pregnancy and child neuropsychological development in the INMA-Sabadell cohort. *Environ Res*. 2015;142:671-679.
43. Harley KG, Gunier RB, Kogut K, et al. Prenatal and early childhood bisphenol A concentrations and behavior in school-aged children. *Environ Res*. 2013;126:43-50.
44. Arbuckle TE, Davis K, Boylan K, Fisher M, Fu J. Bisphenol A, phthalates and lead and learning and behavioral problems in Canadian children 6-11 years of age: CHMS 2007-2009. *Neurotoxicology*. 2016;54:89-98.
45. Stein TP, Schluter MD, Steer RA, Guo L, Ming X. Bisphenol A Exposure in Children With Autism Spectrum Disorders. *Autism Res*. 2015;8(3):272-283.
46. Kardas F, Bayram AK, Demirci E, et al. Increased Serum Phthalates (MEHP, DEHP) and Bisphenol A Concentrations in Children With Autism Spectrum Disorder: The Role of Endocrine Disruptors in Autism Etiopathogenesis. *J Child Neurol*. 2015;31(5):629-635.
47. Rahbar MH, Swingle HM, Christian MA, et al. Environmental exposure to dioxins, dibenzofurans, bisphenol a, and phthalates in children with and without autism spectrum disorder living near the gulf of Mexico. *Int J Environ Res Public Health*. 2017;14(11).
48. Bornehag CG, Lundgren B, Weschler CJ, Sigsgaard T, Hagerhed-Engman L, Sundell J. Phthalates in indoor dust and their association with building characteristics.

- Environ Health Perspect.* 2005;113(10):1399-1404.
49. Arbuckle TE, Fisher M, MacPherson S, et al. Maternal and early life exposure to phthalates: The Plastics and Personal-care Products use in Pregnancy (P4) study. *Sci Total Environ.* 2016;551-552:344-356.
 50. Main KM, Mortensen GK, Kaleva MM, et al. Human breast milk contamination with phthalates and alterations of endogenous reproductive hormones in infants three months of age. *Environ Health Perspect.* 2006;114(2):270-276.
 51. Heudorf U, Mersch-Sundermann V, Angerer J. Phthalates: Toxicology and exposure. *Int J Hyg Environ Health.* 2007;210(5):623-634.
 52. Parks LG, Ostby JS, Lambright CR, et al. The plasticizer diethylhexyl phthalate induces malformations by decreasing fetal testosterone synthesis during sexual differentiation in the male rat. *Toxicol Sci.* 2000;58(2):339-349.
 53. Xu Y, Agrawal S, Cook TJ, Knipp GT. Di-(2-ethylhexyl)-phthalate affects lipid profiling in fetal rat brain upon maternal exposure. *Arch Toxicol.* 2007;81(1):57-62.
 54. Aumann TD. Environment- and activity-dependent dopamine neurotransmitter plasticity in the adult substantia nigra. *J Chem Neuroanat.* 2016;73:21-32. doi:10.1016/j.jchemneu.2015.12.009
 55. Braun JM. Early-life exposure to EDCs: Role in childhood obesity and neurodevelopment. *Nat Rev Endocrinol.* 2017;13(3):161-173. doi:10.1038/nrendo.2016.186
 56. Adibi JJ, Whyatt RM, Hauser R, et al. Transcriptional biomarkers of steroidogenesis and trophoblast differentiation in the placenta in relation to prenatal phthalate exposure. *Environ Health Perspect.* 2010;118(2):291-296.
 57. Kobrosly RW, Evans S, Miodovnik A, et al. Prenatal phthalate exposures and neurobehavioral development scores in boys and girls at 6-10 years of age. *Environ Health Perspect.* 2014;122(5):521-528.
 58. Jeddi MZ, Janani L, Memari AH, Akhondzadeh S, yunesian M. The role of phthalate esters in autism development: A systematic review. *Environ Res.* 2016;151:493-504.
 59. Kondolot M, Ozmert EN, Asci A, et al. Plasma phthalate and bisphenol a levels and oxidant-antioxidant status in autistic children. *Environ Toxicol Pharmacol.* 2016;43:149-158.
 60. Huang H-B, Chuang C-J, Su P-H, et al. Prenatal and Childhood Exposure to Phthalate Diesters and Thyroid Function in a 9-Year Follow-up Birth Cohort Study: Taiwan Maternal and Infant Cohort Study. *Epidemiology.* 2017;28 Suppl 1:S10-S18.
 61. Whyatt RM, Liu X, Rauh VA, et al. Maternal prenatal urinary phthalate metabolite concentrations and child mental, psychomotor, and behavioral development at 3 years of age. *Environ Health Perspect.* 2012;120(2):290-295.
 62. Latini G, De Felice C, Presta G, et al. In utero exposure to di-(2-ethylhexyl)phthalate and duration of human pregnancy. *Environ Health Perspect.* 2003;111(14):1783-1785.
 63. Ferguson KK, McElrath TF, Meeker JD. Environmental phthalate exposure and preterm birth. *JAMA Pediatr.* 2014;168(1):61-67.
 64. Latini G, Del Vecchio A, Massaro M, Verrotti A, DE Felice C. In utero exposure to phthalates and fetal development. *Curr Med Chem.* 2006;13(21):2527-2534.
 65. Choe H, Hansen JM, Harris C. Spatial and temporal ontogenies of glutathione peroxidase and glutathione disulfide reductase during development of the prenatal rat. *J Biochem Mol Toxicol.* 2001;15(4):197-206.
 66. Hansen JM. Oxidative stress as a mechanism of teratogenesis. *Birth Defects Res Part C - Embryo Today Rev.* 2006;78(4):293-307.
 67. Carson R. *Silent Spring.*; 1962. doi:10.2307/1441323
 68. Hardell L, Bavel B, Lindström G, Eriksson M, Carlberg M. In utero exposure to persistent organic pollutants in relation to testicular cancer risk. *Int J Androl.* 2006;29(1):228-234.
 69. Waliszewski SM, Aguirre AA, Infanzón RM, Siliceo J. Carry-over of persistent organochlorine pesticides through placenta to fetus. *Salud Publica Mex.* 2000;42(5):384-390.
 70. Przyrembel H, Heinrich-Hirsch B, Vieth B. Exposition to and health effects of residues in human milk. *Adv Exp Med Biol.* 2000;478:307-325.
 71. Andersen HR, Nielsen JB, Grandjean P. Toxicologic evidence of developmental neurotoxicity of environmental chemicals. *Toxicology.* 2000;144(1-3):121-127.
 72. Eskenazi B, Marks AR, Bradman A, et al. In Utero Exposure to Dichlorodiphenyltrichloroethane (DDT) and Dichlorodiphenyldichloroethylene (DDE) and Neurodevelopment Among Young Mexican American Children. *Pediatrics.* 2006;118(1):233-241.
 73. Ribas-Fito N, Cardo E, Sala M, et al. Breastfeeding, Exposure to Organochlorine Compounds, and Neurodevelopment in Infants. *Pediatrics.* 2003;111(5):e580-e585. doi:10.1542/peds.111.5.e580
 74. Shelton JF, Geraghty EM, Tancredi DJ, et al. Neurodevelopmental disorders and prenatal residential proximity to agricultural pesticides: The charge study. *Environ Health Perspect.* 2014;122(10):1103-1109.
 75. Biederman J. Attention-deficit/hyperactivity disorder: A selective overview. *Biol Psychiatry.* 2005;57(11):1215-1220.
 76. Lee I, Eriksson P, Fredriksson A, Buratovic S, Viberg H. Developmental neurotoxic effects of two pesticides: Behavior and biomolecular studies on chlorpyrifos and carbaryl. *Toxicol Appl Pharmacol.* 2015;288(3):429-438.
 77. Freire C, Koifman S. Pesticide exposure and Parkinson's disease: Epidemiological evidence of association. *Neurotoxicology.* 2012;33(5):947-971.
 78. Torres-Sánchez L, Schnaas L, Rothenberg SJ, et al. Prenatal p,U-DDE exposure and neurodevelopment among children 3.5-5 years of age. *Environ Health Perspect.* 2013;121(2):263-268.
 79. Boucher O, Simard MN, Muckle G, et al. Exposure to an organochlorine pesticide (chlordecone) and development of 18-month-old infants. *Neurotoxicology.* 2013;35(1):162-168.
 80. Muñoz-Quezada MT, Lucero BA, Barr DB, et al. Neurodevelopmental effects in children associated with exposure to organophosphate pesticides: A systematic review. *Neurotoxicology.* 2013;39:158-168.
 81. Jurewicz J, Polańska K, Hanke W. Chemical exposure early in life and the neurodevelopment of children - an overview of current epidemiological evidence. *Ann Agric Environ Med.* 2013;20(3):465-486.
 82. Rauh VA, Perera FP, Horton MK, et al. Brain anomalies in children exposed prenatally to a common organophosphate pesticide. *Proc Natl Acad Sci.* 2012;109(20):7871-7876.
 83. Bouchard MF, Chevrier J, Harley KG, et al. Prenatal exposure to organophosphate pesticides and IQ in 7-year-

- old children. *Environ Health Perspect.* 2011;119(8):1189-95.
84. Woskie S, Kongtip P, Thanasanpaiboon W, et al. A pilot study of maternal exposure to organophosphate pesticides and newborn neurodevelopment in Thailand. *Int J Occup Environ Health.* 2018;1-9.
85. Young JG, Eskenazi B, Gladstone EA, et al. Association between in utero organophosphate pesticide exposure and abnormal reflexes in neonates. *Neurotoxicology.* 2005;26(2):199-209.
86. Marks AR, Harley K, Bradman A, et al. Organophosphate pesticide exposure and attention in young Mexican-American children: The CHAMACOS study. *Environ Health Perspect.* 2010;118(12):1768-1774.
87. Harley KG, Huen K, Schall RA, et al. Association of organophosphate pesticide exposure and paraoxonase with birth outcome in Mexican-American women. *PLoS One.* 2011;6(8).
88. Philippat C, Barkoski J, Tancredi DJ, et al. Prenatal exposure to organophosphate pesticides and risk of autism spectrum disorders and other non-typical development at 3 years in a high-risk cohort. *Int J Hyg Environ Health.* februarie 2018.
89. Porta M, Zumeta E. Implementing the Stockholm Treaty on Persistent Organic Pollutants. *Occup Environ Med.* 2002;59(10):651-652.
90. Fångström B, Athanasiadou M, Grandjean P, Weihe P, Bergman L. Hydroxylated PCB metabolites and PCBs in serum from pregnant Faroese women. *Environ Health Perspect.* 2002;110(9):895-899.
91. Lesmana R, Shimokawa N, Takatsuru Y, Iwasaki T, Koibuchi N. Lactational exposure to hydroxylated polychlorinated biphenyl (OH-PCB 106) causes hyperactivity in male rat pups by aberrant increase in dopamine and its receptor. *Environ Toxicol.* 2014;29(8):876-883.
92. Boas M, Feldt-Rasmussen U, Skakkebjæk NE, Main KM. Environmental chemicals and thyroid function. *Eur J Endocrinol.* 2006;154(5):599-611.
93. Quinete N, Schettgen T, Bertram J, Kraus T. Occurrence and distribution of PCB metabolites in blood and their potential health effects in humans: a review. *Environ Sci Pollut Res.* 2014;21(20):11951-11972.
94. Berghuis SA, Soechitram SD, Hitzert MM, Sauer PJJ, Bos AF. Prenatal exposure to polychlorinated biphenyls and their hydroxylated metabolites is associated with motor development of three-month-old infants. *Neurotoxicology.* 2013;38:124-130.
95. Lombardo JP, Berger DF, Hunt A, Carpenter DO. Inhalation of Polychlorinated Biphenyls (PCB) Produces Hyperactivity in Rats. *J Toxicol Environ Heal - Part A Curr Issues.* 2015;78(18):1142-1153.
96. Kimura-Kuroda J, Nagata I, Kuroda Y. Hydroxylated metabolites of polychlorinated biphenyls inhibit thyroid-hormone-dependent extension of cerebellar Purkinje cell dendrites. *Dev Brain Res.* 2005;154(2):259-263.
97. Parent AS, Pinson A, Woods N, et al. Early exposure to Aroclor 1254 in vivo disrupts the functional synaptic development of newborn hippocampal granule cells. *Eur J Neurosci.* 2016;44(12):3001-3010.
98. Jacobson JL, Jacobson SW. Intellectual impairment in children exposed to polychlorinated biphenyls in utero. *N Engl J Med.* 1996;335(11):783-789.
99. Eubig PA, Aguiar A, Schantz SL. Lead and PCBs as risk factors for attention deficit/hyperactivity disorder. *Environ Health Perspect.* 2010;118(12):1654-1667.
100. Winneke G. Developmental aspects of environmental neurotoxicology: Lessons from lead and polychlorinated biphenyls. *J Neurol Sci.* 2011;308(1-2):9-15.
101. Di Renzo GC, Conry JA, Blake J, et al. International Federation of Gynecology and Obstetrics opinion on reproductive health impacts of exposure to toxic environmental chemicals. *Int J Gynecol Obstet.* 2015;131(3):219-225.
102. Sagiv SK, Thurston SW, Bellinger DC, Amarasiriwardena C, Korrick SA. Prenatal exposure to mercury and fish consumption during pregnancy and attention-deficit/hyperactivity disorder-related behavior in children. *Arch Pediatr Adolesc Med.* 2012;166(12):1123-1131.
103. Senut M-C, Sen A, Cingolani P, Shaik A, Land SJ, Ruden DM. Lead exposure disrupts global DNA methylation in human embryonic stem cells and alters their neuronal differentiation. *Toxicol Sci.* 2014;139(1):142-161.
104. Faulk C, Barks A, Liu K, Goodrich JM, Dolinoy DC. Early-life lead exposure results in dose- and sex-specific effects on weight and epigenetic gene regulation in weanling mice. *Epigenomics.* 2013;5(5):487-500.
105. Boucher O, Muckle G, Jacobson JL, et al. Domain-specific effects of prenatal exposure to PCBs, mercury, and lead on infant cognition: Results from the environmental contaminants and child development study in Nunavik. *Environ Health Perspect.* 2014;122(3):310-316.
106. Yu H, Liao Y, Li T, et al. Alterations of Synaptic Proteins in the Hippocampus of Mouse Offspring Induced by Developmental Lead Exposure. *Mol Neurobiol.* 2016;53(10):6786-6798.
107. Rahman A, Brew BJ, Guillemain GJ. Lead dysregulates serine/threonine protein phosphatases in human neurons. *Neurochem Res.* 2011;36(2):195-204.
108. Lanphear B, Hornung R, Khoury J, et al. Low-level environmental lead exposure and children's intellectual function: an international pooled analysis. *Environ Health Perspect.* 2005;113(July):894.
109. Bellinger DC. Very low lead exposures and children's neurodevelopment. *Curr Opin Pediatr.* 2008;20(2):172-177.
110. Aguiar A, Eubig PA, Schantz SL. Attention deficit/hyperactivity disorder: A focused overview for children's environmental health researchers. *Environ Health Perspect.* 2010;118(12):1646-1653. doi:10.1289/ehp.1002326
111. Lasley SM, Gilbert ME. Presynaptic glutamatergic function in dentate gyrus in vivo is diminished by chronic exposure to inorganic lead. *Brain Res.* 1996;736(1-2):125-134.
112. Dreiem A, Shan M, Okoniewski RJ, Sanchez-Morrissey S, Seegal RF. Methylmercury inhibits dopaminergic function in rat pup synaptosomes in an age-dependent manner. *Neurotoxicol Teratol.* 2009;31(5):312-317.
113. Cuomo V, Ambrosi L, Annau Z, Cagiano R, Brunello N, Racagni G. Behavioural and neurochemical changes in offspring of rats exposed to methyl mercury during gestation. *Neurobehav Toxicol Teratol.* 1984;6(3):249-254.
114. Choi AL, Mogensen UB, Bjerve KS, et al. Negative confounding by essential fatty acids in methylmercury neurotoxicity associations. *Neurotoxicol Teratol.* 2014;42:85-92.
115. Strain JJ, Davidson PW, Bonham MP, et al. Associations of maternal long-chain polyunsaturated fatty acids, methyl mercury, and infant development in the Seychelles Child Development Nutrition Study. *Neurotoxicology.* 2008;29(5):776-782.