Excerpt from "Microchip-Induced Tumors in Laboratory Rodents and Dogs: A Review of the Literature 1990–2006"
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Full report and additional information is available at www.antichips.com/cancer

Palmer et al., 1998

Fibrosarcomas associated with passive integrated transponder implants. *Toxicologic Pathology*. 1998;26:170.

Author(s)	# of Animals	Species	Study Length	Developed Cancer
Palmer et al., 1998	800	mice	2 years	2.0%

> ***"All tumors were observed . . . at or near the implantation site . . . [the tumors] were attached to the implant or partially or totally encased the implant."*** (p. 170)

Summary of Study

800 mice were implanted with microchips for identification purposes. After two years 2% of the mice had developed cancerous tumors (malignant fibrosarcomas) around the implants.

Study Design and Key Findings

The article is a short, one-page writeup, around 350 words in length. The following is known based on the information provided:

800 mice were implanted with a microchip transponder for identification purposes as part of "a 104-week dietary study" lasting two years. Between weeks 79 and 105, 16 of the mice developed "subcutaneous tumors associated with the implanted transponder." The tumors occurred in both control and treated animals and were judged unrelated to the test material. The tumors were identified as malignant fibrosarcomas.

All of the tumors occurred at or near the implantation site and were "attached to the implant or partially or totally encased the implant." The larger tumors commonly had areas of necrosis and hemorrhage with inflammation, and some of the tumors invaded adjacent skeletal muscle. In addition, two of the mice developed metastases in which the cancer spread either to the lymph nodes or to the lungs.

Study Details

- The study was conducted by T. Palmer and other researchers[1] at Covance Laboratories, Inc. in Madison, Wisconsin.
- Animals used were B6C3F1/CrlBR VAF/Plus mice.
- Microchips used were identified as "passive integrated transponder implants used for identification." No additional information is provided.

1 J. Nold, M. Palazzolo, and T. Ryan.