GUIDELINES FOR DRINKING-WATER QUALITY: FOURTH EDITION INCORPORATING THE FIRST AND SECOND ADDENDA

crops. Concentrations in drinking-water are usually less than 0.01 mg/l, although concentrations as high as $200 \mu g/l$ have been reported in areas near mining sites.

Reason for not establishing a guideline value	Occurs in drinking-water at concentrations well below those of health concern
Assessment date	1993, revised in 2011
Principal references	WHO (2011) Molybdenum in drinking-water

Molybdenum is considered to be an essential element, with an estimated daily requirement of 0.1–0.3 mg for adults.

As molybdenum occurs at very low concentrations in drinking-water, it is not considered necessary to set a formal guideline value. For guidance purposes, a health-based value can be derived.

In a 2-year study of humans exposed via drinking-water, the NOAEL was found to be 0.2 mg/l, but there are some concerns about the quality of this study. As molybdenum is an essential element, a factor of 3 is considered to be adequate to reflect intraspecies variation. This gives a health-based value of 0.07 mg/l (rounded figure), which is in the same range as that derived on the basis of the results of toxicological studies in experimental animals and is consistent with the essential daily requirement for molybdenum.

Monochloroacetic acid

Chlorinated acetic acids are formed from organic material during water chlorination.

Guideline value	0.02 mg/l (20 μg/l)
Occurrence	Present in surface water–derived drinking-water at concentrations up to 82 μ g/l (mean 2.1 μ g/l)
TDI	3.5 µg/kg body weight, based on a LOAEL of 3.5 mg/kg body weight per day from a study in which increased absolute and relative spleen weights were observed in male rats exposed to monochloroacetic acid in drinkingwater for 2 years, using an uncertainty factor of 1000 (100 for interspecies and intraspecies variation and 10 for use of a minimal LOAEL instead of a NOAEL and database deficiencies, including the lack of a multigeneration reproductive toxicity study)
Limit of detection	2 μg/l by GC with ECD; 5 μg/l by GC-MS
Treatment performance	No information available
Guideline value derivation	
 allocation to water 	20% of TDI
weight	60 kg adult
consumption	2 litres/day
Assessment date	2003
Principal reference	WHO (2004) Monochloroacetic acid in drinking-water

No evidence of carcinogenicity of monochloroacetate was found in 2-year gavage bioassays with rats and mice. Monochloroacetate has given mixed results in a limited

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number of mutagenicity assays and has been negative for clastogenicity in genotoxicity studies. IARC has not classified the carcinogenicity of monochloroacetic acid.

Monochlorobenzene

Releases of monochlorobenzene (MCB) to the environment are thought to be mainly due to volatilization losses associated with its use as a solvent in pesticide formulations, as a degreasing agent and from other industrial applications. MCB has been detected in surface water, groundwater and drinking-water; mean concentrations were less than 1 μ g/l in some potable water sources (maximum 5 μ g/l) in Canada. The major source of human exposure is probably air.

Reason for not establishing a guideline value	Occurs in drinking-water at concentrations well below those of health concern, and health-based value would far exceed lowest reported taste and odour threshold
Assessment date	2003
Principal reference	WHO (2004) Monochlorobenzene in drinking-water

MCB is of low acute toxicity. Oral exposure to high doses of MCB results in effects mainly on the liver, kidneys and haematopoietic system. There is limited evidence of carcinogenicity in male rats, with high doses increasing the occurrence of neoplastic nodules in the liver. The majority of evidence suggests that MCB is not mutagenic; although it binds to DNA in vivo, the level of binding is low.

A health-based value of 300 μ g/l can be calculated for MCB on the basis of a TDI of 85.7 μ g/kg body weight, based on neoplastic nodules identified in a 2-year rat study with dosing by gavage, and taking into consideration the limited evidence of carcinogenicity. However, because MCB occurs at concentrations well below those of health concern, it is not considered necessary to derive a formal guideline value. It should also be noted that the health-based value far exceeds the lowest reported taste and odour threshold for MCB in water.

MX

MX, which is the common name for 3-chloro-4-dichloromethyl-5-hydroxy-2-(5H)-furanone, is formed by the reaction of chlorine with complex organic matter in drinking-water. It has been identified in chlorinated humic acid solutions and drinking-water in Finland, the United Kingdom and the USA and was found to be present in 37 water sources at levels of 2–67 ng/l. Five drinking-water samples from different Japanese cities contained MX at concentrations ranging from less than 3 to 9 ng/l.

Reason for not establishing a guideline value	Occurs in drinking-water at concentrations well below those of health concern
Assessment date	2003
Principal references	IPCS (2000) Disinfectants and disinfectant by-products WHO (2003) MX in drinking-water