Safety Data Sheet



WESTOX D-LAM 100

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1 - IDENTIFICATION

Product Name WESTOX D-LAM 100

Synonyms D-LAM Concentrate

Proper shipping name TERPENE HYDROCARBONS, N.O.S. (contains d-limonene)

Recommended Use Used for the removal of contaminants, graffiti and paint removal.

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Emergency Contact Point Australian Poisons Information Centre

24 Hour Service 13 11 26 Police, Fire Brigade or Ambulance 000

New Zealand Poisons Information Centre

24 Hour Service 0800 764 766

NZ Emergency Services 113

2 - HAZARD(S) IDENTIFICATION

Poisons Schedule S6

Hazard Categories Flammable Liquid Category 3

Skin Corrosion/Irritation Category 2 Eye Irritation Category 2A Skin Sensitizer Category 1 Reproductive Toxicity Category 1B

Specific target organ toxicity - single exposure Category 3 (respiratory tract irritation)

Specific target organ toxicity - single exposure Category 3 (narcotic effects)

Chronic Aquatic Hazard Category 1

Legend: 1. Classification drawn from HCIS; 2. Classification drawn from Regulation (EU) No 1272/2008 - Annex VI

Pictograms









Signal Word DANGER

Hazard statement(s) H226 Flammable liquid and vapour.

H315 Causes skin irritation.
H319 Causes serious eye irritation.
H317 May cause an allergic skin reaction.
H360D May damage the unborn child.
H335 May cause respiratory irritation.
H336 May cause drowsiness or dizziness.

H410 Very toxic to aquatic life with long lasting effects.

AUH019 May form explosive peroxides.

Precautionary statement(s) Prevention P201 Obtain special instructions before use.

P210 Keep away from heat/sparks/open flames/hot surfaces. - No smoking.

P271 Use only outdoors or in a well-ventilated area.

P280 Wear protective gloves/protective clothing/eye protection/face protection.

P240 Ground/bond container and receiving equipment.

P241 Use explosion-proof electrical/ventilating/lighting/intrinsically safe equipment.

P242 Use only non-sparking tools.

P243 Take precautionary measures against static discharge.

P261 Avoid breathing mist/vapours/spray.

P273 Avoid release to the environment.

P272 Contaminated work clothing should not be allowed out of the workplace.

Precautionary statement(s) Response

P308+P313 IF exposed or concerned: Get medical advice/attention.

P321 Specific treatment (see advice on this label).

P362 Take off contaminated clothing and wash before reuse.

P370+P378 In case of fire: Use alcohol resistant foam or normal protein foam for extinction.

P302+P352 IF ON SKIN: Wash with plenty of soap and water.

P305+P351+P338 IF IN EYES: Rinse cautiously with water for several minutes. Remove contact lenses, if

present and easy to do. Continue rinsing.

P312 Call a POISON CENTER or doctor/physician if you feel unwell.
P333+P313 If skin irritation or rash occurs: Get medical advice/attention.
P337+P313 If eye irritation persists: Get medical advice/attention.

P391 Collect spillage.

P303+P361+P353 IF ON SKIN (or hair): Remove/Take off immediately all contaminated clothing. Rinse skin

with water/shower.

P304+P340 IF INHALED: Remove victim to fresh air and keep at rest in a position comfortable for breathing.

Precautionary statement(s) Storage

P403+P235 Store in a well-ventilated place. Keep cool.

P405 Store locked up.

Precautionary statement(s) Disposal

P501 Dispose of contents/container in accordance with local regulations.

3 - COMPOSITION AND INFORMATION ON INGREDIENTS

Name	CAS Number	Content %
dimethyl glutarate	1119-40-0	>60
N-methyl-2-pyrrolidone	872-50-4	10-30
d-limonene	5989-27-5	10-30
additives unregulated	Not Available	10-30

4 - FIRST AID MEASURES

Eye Contact

If this product comes in contact with the eyes:

- Wash out immediately with fresh running water.
- Ensure complete irrigation of the eye by keeping eyelids apart and away from eye and moving the eyelids by occasionally lifting the upper and lower lids.
- Seek medical attention without delay; if pain persists or recurs seek medical attention.
- Removal of contact lenses after an eye injury should only be undertaken by skilled personnel.

Skin Contact

If skin contact occurs:

- ▶ Immediately remove all contaminated clothing, including footwear.
- Flush skin and hair with running water (and soap if available).
- Seek medical attention in event of irritation.

Inhalation

- If fumes or combustion products are inhaled remove from contaminated area.
- Lay patient down. Keep warm and rested.
- Prostheses such as false teeth, which may block airway, should be removed, where possible, prior to initiating first aid procedures.
- Apply artificial respiration if not breathing, preferably with a demand valve resuscitator, bag-valve mask device, or pocket mask as trained. Perform CPR if necessary.
- Transport to hospital, or doctor, without delay.

Ingestion

- If swallowed do NOT induce vomiting.
- If vomiting occurs, lean patient forward or place on left side (head-down position, if possible) to maintain open airway and prevent aspiration.
- Observe the patient carefully.
- Never give liquid to a person showing signs of being sleepy or with reduced awareness; i.e. becoming unconscious.
- Give water to rinse out mouth, then provide liquid slowly and as much as casualty can comfortably drink.
- Seek medical advice
- ▶ If spontaneous vomiting appears imminent or occurs, hold patient's head down, lower than their hips to help avoid possible aspiration of vomitus.

Indication of any immediate medical attention and special treatment needed

Any material aspirated during vomiting may produce lung injury. Therefore emesis should not be induced mechanically or pharmacologically. Mechanical means should be used if it is considered necessary to evacuate the stomach contents; these include gastric lavage after endotracheal intubation. If spontaneous vomiting has occurred after ingestion, the patient should be monitored for difficult breathing, as adverse effects of aspiration into the lungs may be delayed up to 48 hours.

Treat symptomatically.

for simple esters:

BASIC TREATMENT

- Establish a patent airway with suction where necessary.
- Watch for signs of respiratory insufficiency and assist ventilation as necessary.
- Administer oxygen by non-rebreather mask at 10 to 15 l/min.
- Monitor and treat, where necessary, for pulmonary oedema .
- Monitor and treat, where necessary, for shock.
- DO NOT use emetics. Where ingestion is suspected rinse mouth and give up to 200 ml water (5 ml/kg recommended) for dilution where patient is able to swallow, has a strong gag reflex and does not drool.
- Give activated charcoal.

ADVANCED TREATMENT

▶ Consider orotracheal or nasotracheal intubation for airway control in unconscious patient or where respiratory arrest has occurred.

- Positive-pressure ventilation using a bag-valve mask might be of use.
- Monitor and treat, where necessary, for arrhythmias.
- ▶ Start an IV D5W TKO. If signs of hypovolaemia are present use lactated Ringers solution. Fluid overload might create complications.
- Drug therapy should be considered for pulmonary oedema.
- ▶ Hypotension with signs of hypovolaemia requires the cautious administration of fluids. Fluid overload might create complications.
- Treat seizures with diazepam.
- ▶ Proparacaine hydrochloride should be used to assist eye irrigation.

EMERGENCY DEPARTMENT

- Laboratory analysis of complete blood count, serum electrolytes, BUN, creatinine, glucose, urinalysis, baseline for serum aminotransferases (ALT and AST), calcium, phosphorus and magnesium, may assist in establishing a treatment regime. Other useful analyses include anion and osmolar gaps, arterial blood gases (ABGs), chest radiographs and electrocardiograph.
- Positive end-expiratory pressure (PEEP)-assisted ventilation may be required for acute parenchymal injury or adult respiratory distress syndrome.
- Consult a toxicologist as necessary.

BRONSTEIN, A.C. and CURRANCE, P.L. EMERGENCY CARE FOR HAZARDOUS MATERIALS EXPOSURE: 2nd Ed. 1994 For acute and short term repeated exposures to methanol:

- ▶ Toxicity results from accumulation of formaldehyde/formic acid.
- ▶ Clinical signs are usually limited to CNS, eyes and GI tract Severe metabolic acidosis may produce dyspnea and profound systemic effects which may become intractable. All symptomatic patients should have arterial pH measured. Evaluate airway, breathing and circulation.
- Stabilise obtunded patients by giving naloxone, glucose and thiamine.
- Decontaminate with Ipecac or lavage for patients presenting 2 hours post-ingestion. Charcoal does not absorb well; the usefulness of cathartic is not established.
- Forced diuresis is not effective; haemodialysis is recommended where peak methanol levels exceed 50 mg/dL (this correlates with serum bicarbonate levels below 18 meg/L).
- ► Ethanol, maintained at levels between 100 and 150 mg/dL, inhibits formation of toxic metabolites and may be indicated when peak methanol levels exceed 20 mg/dL. An intravenous solution of ethanol in D5W is optimal.
- Folate, as leucovorin, may increase the oxidative removal of formic acid. 4-methylpyrazole may be an effective adjunct in the treatment. 8.Phenytoin may be preferable to diazepam for controlling seizure.

[Ellenhorn Barceloux: Medical Toxicology]

BIOLOGICAL EXPOSURE INDEX - BEI

Determinant Index Sampling Time Comment

1. Methanol in urine 15 mg/l End of shift B, NS

2. Formic acid in urine 80 mg/gm creatinine Before the shift at end of workweek B, NS

B: Background levels occur in specimens collected from subjects NOT exposed.

NS: Non-specific determinant - observed following exposure to other materials.

5 - FIREFIGHTING MEASURES

Extinguishing Media

- Alcohol stable foam.
- Dry chemical powder.
- BCF (where regulations permit)
- Carbon dioxide
- Water spray or fog Large fires only

Special hazards arising from the substrate or mixture

Fire Incompatibility

Avoid contamination with oxidising agents i.e. nitrates, oxidising acids, chlorine bleaches, pool chlorine etc, as ignition may result.

Fire Fighting

- ▶ Alert Fire Brigade and tell them location and nature of hazard.
- May be violently or explosively reactive.
- Wear breathing apparatus plus protective gloves.
- Prevent, by any means available, spillage from entering drains or water course.
- If safe, switch off electrical equipment until vapour fire hazard removed.
- ▶ Use water delivered as a fine spray to control fire and cool adjacent area.
- Avoid spraying water onto liquid pools.
- ▶ **DO NOT** approach containers suspected to be hot.
- ▶ Cool fire exposed containers with water spray from a protected location.
- If safe to do so, remove containers from path of fire.

Fire/ Explosion Hazard

- Liquid and vapour are flammable.
- Moderate fire hazard when exposed to heat or flame.
- Vapour forms an explosive mixture with air.
- Moderate explosion hazard when exposed to heat or flame.
- Vapour may travel a considerable distance to source of ignition.
- Heating may cause expansion or decomposition leading to violent rupture of containers.
 On combustion, may emit toxic fumes of carbon monoxide (CO).

Combustion products include:

carbon dioxide (CO2)

aldehvdes

nitrogen oxides (NOx)

other pyrolysis products typical of burning organic material.

WARNING: Long standing in contact with air and light may result in the formation of potentially explosive peroxides.

Hazchem

6 - ACCIDENTAL RELEASE MEASURES

Personal precautions, protective equipment and emergency procedures

See section 8

Environmental precautions

See section 12

Methods and material for containment and cleaning up

Minor Spills

- Remove all ignition sources.
- Clean up all spills immediately.
- Avoid breathing vapours and contact with skin and eyes.
- Control personal contact with the substance, by using protective equipment.
- Contain and absorb small quantities with vermiculite or other absorbent material.
- Wipe up.
- Collect residues in a flammable waste container.

Slippery when spilt.

Major Spills

CARE: Absorbent materials wetted with occluded oil must be moistened with water as they may auto-oxidize, become selfheating and ignite. Some oils slowly oxidise when spread in a film and oil on cloths, mops, absorbents may autoxidise and generate heat, smoulder, ignite and burn. In the workplace oily rags should be collected and immersed in water. Slippery when spilt.

- Clear area of personnel and move upwind.
- Alert Fire Brigade and tell them location and nature of hazard.
- May be violently or explosively reactive.
- Wear breathing apparatus plus protective gloves.
- Prevent, by any means available, spillage from entering drains or water course.
- Consider evacuation (or protect in place).
- No smoking, naked lights or ignition sources.
- Increase ventilation.
- Stop leak if safe to do so.
- Water spray or fog may be used to disperse /absorb vapour.
- Contain spill with sand, earth or vermiculite.
- Use only spark-free shovels and explosion proof equipment.
- Collect recoverable product into labelled containers for recycling.
- Absorb remaining product with sand, earth or vermiculite.
- Collect solid residues and seal in labelled drums for disposal.
- Wash area and prevent runoff into drains.
- If contamination of drains or waterways occurs, advise emergency services.

Personal Protective Equipment advice is contained in Section 8 of the SDS.

7 - HANDLING AND STORAGE

Precautions for Safe Handling

Safe Handling

- Containers, even those that have been emptied, may contain explosive vapours.
- Do NOT cut, drill, grind, weld or perform similar operations on or near containers.
- DO NOT allow clothing wet with material to stay in contact with skin.
- Avoid all personal contact, including inhalation.
- Wear protective clothing when risk of overexposure occurs.
- Use in a well-ventilated area.
- Prevent concentration in hollows and sumps.
- DO NOT enter confined spaces until atmosphere has been checked.
- Avoid smoking, naked lights or ignition sources.
- Avoid generation of static electricity.
- DO NOT use plastic buckets.
- Earth all lines and equipment.
- Use spark-free tools when handling.
- Avoid contact with incompatible materials. When handling, DO NOT eat, drink or smoke.
- Keep containers securely sealed when not in use. Avoid physical damage to containers.
- Always wash hands with soap and water after handling.
- Work clothes should be laundered separately.
- Use good occupational work practice.
- Observe manufacturer's storage and handling recommendations contained within this SDS.
- Atmosphere should be regularly checked against established exposure standards to ensure safe working conditions.

Other information

Consider storage under inert gas.

- Store in original containers in approved flammable liquid storage area.
- Store away from incompatible materials in a cool, dry, well-ventilated area.

- DO NOT store in pits, depressions, basements or areas where vapours may be trapped.
- No smoking, naked lights, heat or ignition sources.
- Storage areas should be clearly identified, well illuminated, clear of obstruction and accessible only to trained and authorised personnel – adequate security must be provided so that unauthorised personnel do not have access.
- Store according to applicable regulations for flammable materials for storage tanks, containers, piping, buildings, rooms, cabinets, allowable quantities and minimum storage distances.
- Use non-sparking ventilation systems, approved explosion proof equipment and intrinsically safe electrical systems.
- ▶ Have appropriate extinguishing capability in storage area (e.g. portable fire extinguishers dry chemical, foam or carbon dioxide) and flammable gas detectors.
- Keep adsorbents for leaks and spills readily available.
- Protect containers against physical damage and check regularly for leaks.
- ▶ Observe manufacturer's storage and handling recommendations contained within this SDS.

In addition, for tank storages (where appropriate):

- ▶ Store in grounded, properly designed and approved vessels and away from incompatible materials.
- For bulk storages, consider use of floating roof or nitrogen blanketed vessels; where venting to atmosphere is possible, equip storage tank vents with flame arrestors; inspect tank vents during winter conditions for vapour/ice build-up.
- Storage tanks should be above ground and diked to hold entire contents.

Conditions for safe storage, including any incompatibilities

Suitable container

- Packing as supplied by manufacturer.
- Plastic containers may only be used if approved for flammable liquid.
- Check that containers are clearly labelled and free from leaks.
- For low viscosity materials (i): Drums and jerry cans must be of the non-removable head type. (ii): Where a can is to be used as an inner package, the can must have a screwed enclosure.
- For materials with a viscosity of at least 2680 cSt. (23 deg. C)
- For manufactured product having a viscosity of at least 250 cSt. (23 deg. C)
- Manufactured product that requires stirring before use and having a viscosity of at least 20 cSt (25 deg. C): (i)
 Removable head packaging; (ii) Cans with friction closures and (iii) low pressure tubes and cartridges may be
 used.
- Where combination packages are used, and the inner packages are of glass, there must be sufficient inert cushioning material in contact with inner and outer packages
- In addition, where inner packaging's are glass and contain liquids of packing group, I there must be sufficient inert absorbent to absorb any spillage, unless the outer packaging is a close-fitting moulded plastic box and the substances are not incompatible with the plastic.

Storage Incompatibility

- Avoid reaction with oxidising agents.
- Avoid strong acids, acid chlorides, acid anhydrides and chloroformates.
- Avoid storage with reducing agents.

8 - EXPOSURE CONTROLS AND PERSONAL PROTECTION

Control parameters

Occupational Exposure Limits (OEL)

Ingredient Data

Source	Ingredient	Material name	TWA	STEL	Peak	Notes
Australia Exposure Standards	N-methyl-2- pyrrolidone	1-Methyl-2- pyrrolidone	25 ppm / 103 mg/m3	309 mg/m3 / 75 ppm	Not Available	Not Available

Emergency Limits

Ingredient	redient Material name		TEEL-2	TEEL-3
N-methyl-2-pyrrolidone	Methyl 2-pyrrolidinone, 1-; (N-Methylpyrrolidone)	30 ppm	32 ppm	190 ppm
d-limonene	Limonene, d-	15 ppm	67 ppm	170 ppm

Ingredient	Original IDLH	Revised IDLH
dimethyl glutarate	Not Available	Not Available
N-methyl-2-pyrrolidone	Not Available	Not Available
d-limonene	Not Available	Not Available

Material Data

Exposure Controls

Engineering Controls

Care: Atmospheres in bulk storages and even apparently empty tanks may be hazardous by oxygen depletion. Atmosphere must be checked before entry.

Requirements of State Authorities concerning conditions for tank entry must be met. Particularly with regard to training of crews for tank entry; work permits; sampling of atmosphere; provision of rescue harness and protective gear as needed.

Engineering controls are used to remove a hazard or place a barrier between the worker and the hazard. Well-designed engineering controls can be highly effective in protecting workers and will typically, be independent of worker interactions to provide this high level of protection. The basic types of engineering controls are:

Process controls which involve changing the way a job activity or process is done to reduce the risk.

Enclosure and/or isolation of emission source which keeps a selected hazard "physically" away from the worker and ventilation that strategically "adds" and "removes" air in the work environment. Ventilation can remove or dilute an air contaminant if designed properly. The design of a ventilation system must match the particular process and chemical or contaminant in use.

Employers may need to use multiple types of controls to prevent employee overexposure.

For flammable liquids and flammable gases, local exhaust ventilation or a process enclosure ventilation system may be required. Ventilation equipment should be explosion-resistant.

Air contaminants generated in the workplace possess varying "escape" velocities which, in turn, determine the "capture velocities" of fresh circulating air required to effectively remove the contaminant.

Type of Contaminant	Air Speed
solvent, vapours, degreasing etc., evaporating from tank (in still air).	0.25-0.5 m/s (50-100 f/min)
aerosols, fumes from pouring operations, intermittent container filling, low speed conveyer transfers, welding, spray drift, plating acid fumes, pickling (released at low velocity into zone of active generation)	0.5-1 m/s (100-200 f/min)
direct spray, spray painting in shallow booths, drum filling, conveyer loading, crusher dusts, gas discharge (active generation into zone of rapid air motion)	1-2.5 m/s (200-500 f/min)

Within each range the appropriate value depends on:

Lower end of the range	Upper end of the range
1: Room air currents minimal or favourable to capture	1: Disturbing room air currents
2: Contaminants of low toxicity or of nuisance value only	2: Contaminants of high toxicity
3: Intermittent, low production	3: High production, heavy use
4: Large hood or large air mass in motion	4: Small hood-local control only

Simple theory shows that air velocity falls rapidly with distance away from the opening of a simple extraction pipe. Velocity generally decreases with the square of distance from the extraction point (in simple cases). Therefore, the air speed at the extraction point should be adjusted, accordingly, after reference to distance from the contaminating source. The air velocity at the extraction fan, for example, should be a minimum of 1-2 m/s (200-400 f/min.) for extraction of solvents generated in a tank 2 meters distant from the extraction point. Other mechanical considerations, producing performance deficits within the extraction apparatus, make it essential that theoretical air velocities are multiplied by factors of 10 or more when extraction systems are installed or used.

Personal Protective Equipment









Eye and face protection

- Safety glasses with side shields.
- Chemical goggles.
- Contact lenses may pose a special hazard; soft contact lenses may absorb and concentrate irritants. A written policy document, describing the wearing of lenses or restrictions on use, should be created for each workplace or task. This should include a review of lens absorption and adsorption for the class of chemicals in use and an account of injury experience. Medical and first-aid personnel should be trained in their removal and suitable equipment should be readily available. In the event of chemical exposure, begin eye irrigation immediately and remove contact lens as soon as practicable. Lens should be removed at the first signs of eye redness or irritation lens should be removed in a clean environment only after workers have washed hands thoroughly. [CDC NIOSH Current Intelligence Bulletin 59], [AS/NZS 1336 or national equivalent]

Skin/hands/feet protection

- Wear chemical protective gloves, e.g. PVC
- Wear safety footwear or safety gumboots, e.g. Rubber

NOTE:

- The material may produce skin sensitisation in predisposed individuals. Care must be taken, when removing gloves and other protective equipment, to avoid all possible skin contact.
- Contaminated leather items, such as shoes, belts and watch-bands should be removed and destroyed.

The selection of suitable gloves does not only depend on the material, but also on further marks of quality which vary from manufacturer to manufacturer.

Where the chemical is a preparation of several substances, the resistance of the glove material cannot be calculated in advance and has therefore to be checked prior to the application.

The exact break through time for substances has to be obtained from the manufacturer of the protective gloves and has to be observed when making a final choice.

Personal hygiene is a key element of effective hand care. Gloves must only be worn on clean hands. After using gloves, hands should be washed and dried thoroughly. Application of a non-perfumed moisturiser is recommended. Suitability and durability of glove type is dependent on usage. Important factors in the selection of gloves include:

- · frequency and duration of contact,
- chemical resistance of glove material,
- glove thickness and
 - dexterity

Select gloves tested to a relevant standard (e.g. Europe EN 374, US F739, AS/NZS 2161.1 or national equivalent).

When prolonged or frequently repeated contact may occur, a glove with a protection class of 5 or higher (breakthrough time greater than 240 minutes according to EN 374, AS/NZS 2161.10.1 or national equivalent) is recommended.

- When only brief contact is expected, a glove with a protection class of 3 or higher (breakthrough time greater than 60 minutes according to EN 374, AS/NZS 2161.10.1 or national equivalent) is recommended
- Some glove polymer types are less affected by movement and this should be taken into account when considering gloves for long-term use.
- Contaminated gloves should be replaced.

As defined in ASTM F-739-96 in any application, gloves are rated as:

- Excellent when breakthrough time > 480 min
- Good when breakthrough time > 20 min
- Fair when breakthrough time < 20 min
 Poor when glove material degrades
- For general applications, gloves with a thickness typically greater than 0.35 mm, are recommended.

It should be emphasised that glove thickness is not necessarily a good predictor of glove resistance to a specific chemical, as the permeation efficiency of the glove will be dependent on the exact composition of the glove material. Therefore, glove selection should also be based on consideration of the task requirements and knowledge of breakthrough times.

Glove thickness may also vary depending on the glove manufacturer, the glove type and the glove model. Therefore, the manufacturers' technical data should always be taken into account to ensure selection of the most appropriate glove for the task.

Note: Depending on the activity being conducted, gloves of varying thickness may be required for specific tasks. For example:

- Thinner gloves (down to 0.1 mm or less) may be required where a high degree of manual dexterity is needed. However, these gloves are only likely to give short duration protection and would normally be just for single use applications, then disposed of.
- Thicker gloves (up to 3 mm or more) may be required where there is a mechanical (as well as a chemical) risk i.e. where there is abrasion or puncture potential

Gloves must only be worn on clean hands. After using gloves, hands should be washed and dried thoroughly. Application of a non-perfumed moisturiser is recommended.

Body/other protection

- Overalls
- PVC Apron.
- ▶ PVC protective suit may be required if exposure severe.
- Eyewash unit.
- Ensure there is ready access to a safety shower.

Glove selection index

Glove selection is based on a modified presentation of the:

"Forsberg Clothing Performance Index".

The effect(s) of the following substance(s) are taken into account in the computer-generated selection:

WESTOX DLAM 100

Rating
SATISFACTORY
POOR

Good Best Selection

Satisfactory May degrade after 4 hours continuous immersion

Poor Poor to dangerous choice for other than short term immersion

NOTE: As a series of factors will influence the actual performance of the glove, a final selection must be based on detailed observation.

- * Where the glove is to be used on a short term, casual or infrequent basis, factors such as "feel" or convenience (e.g. disposability), may dictate a choice of gloves which might otherwise be unsuitable following long-term or frequent use. A qualified practitioner should be consulted.

Respiratory Protection

Type AK Filter of sufficient capacity. (AS/NZS 1716 & 1715, EN 143:2000 & 149:2001, ANSI Z88 or national equivalent).

Where the concentration of gas/particulates in the breathing zone, approaches or exceeds the "Exposure Standard" (or ES), respiratory protection is required.

Degree of protection varies with both face-piece and Class of filter; the nature of protection varies with Type of filter.

Required Minimum Protection Factor	Half-Face Respirator	Full-face Respirator	Powered Air-Respirator
Up to 5 x ES	AK-AUS / Class 1	-	AK-PAPR-AUS / Class 1
Up to 25 x ES	Air-line*	AK-2	AK-PAPR-2
Up to 50 x ES	-	AK-3	-
50 + x ES	-	Air-line**	-

^ - Full-face A(All classes) = Organic vapours, B AUS or B1 = Acid gasses, B2 = Acid gas or hydrogen cyanide(HCN), B3 = Acid gas or hydrogen cyanide(HCN), E = Sulfur dioxide(SO2), G = Agricultural chemicals, K = Ammonia(NH3), Hg = Mercury, NO = Oxides of nitrogen, MB = Methyl bromide, AX = Low boiling point organic compounds(below 65 degC)

- Cartridge respirators should never be used for emergency ingress or in areas of unknown vapour concentrations or oxygen content.
- The wearer must be warned to leave the contaminated area immediately on detecting any odours through the respirator. The odour may indicate that the mask is not functioning properly, that the vapour concentration is too high, or that the mask is not properly fitted. Because of these limitations, only restricted use of cartridge respirators is considered appropriate.
- Cartridge performance is affected by humidity. Cartridges should be changed after 2 hr of continuous use unless it is determined that the humidity is less than 75%, in which case, cartridges can be used for 4 hr. Used cartridges should be discarded daily, regardless of the length of time used.

9 - PHYSICAL AND CHEMICAL PROPERTIES

Information on basic physical and chemical properties

Appearance Opaque flammable liquid with citrus odour; does not mix with water.

Physical state Liquid Relative density (Water = 1) 1.0-1.1 Not Available Partition coefficient n-octanol / water Not Available Odour Odour threshold Not Available Auto-ignition temperature (°C) 245 pH (as supplied) Not Applicable **Decomposition temperature** Not Available Not Available Melting point / freezing point (°C) -23 9 Viscosity (cSt) Initial boiling point and boiling range (°C) 175.5-178 Molecular weight (g/mol) Not Applicable Flash point (°C) Evaporation rate 52 PMCC **Taste** Not Available Not Available **Explosive properties** Not Available **Flammability** Flammable Oxidising properties Not Available **Upper Explosive Limit (%)** Surface Tension (dyn/cm or mN/m) Not Available Lower Explosive Limit (%) Volatile Component (%vol) 0.7 Not Available Vapour pressure (kPa) Not Available Not Available Gas group Solubility in water Immiscible pH as a solution (1%) 6.95 Vapour density (Air = 1) Not Available . VOC g/L Not Available

10 - STABILITY AND REACTIVITY

Reactivity See section 7

Chemical stability Unstable in the presence of incompatible materials.

Product is considered stable.

Hazardous polymerisation will not occur.

Possibility of hazardous reactionsSee section 7Conditions to avoidSee section 7Incompatible materialsSee section 7Hazardous decomposition productsSee section 5

11 - TOXICOLOGICAL INFORMATION

Inhaled

Evidence shows, or practical experience predicts, that the material produces irritation of the respiratory system, in a substantial number of individuals, following inhalation. In contrast to most organs, the lung is able to respond to a chemical insult by first removing or neutralising the irritant and then repairing the damage. The repair process, which initially evolved to protect mammalian lungs from foreign matter and antigens, may however, produce further lung damage resulting in the impairment of gas exchange, the primary function of the lungs. Respiratory tract irritation often results in an inflammatory response involving the recruitment and activation of many cell types, mainly derived from the vascular system. Inhalation of vapours may cause drowsiness and dizziness. This may be accompanied by narcosis, reduced alertness, loss of reflexes, lack of coordination and vertigo.

Inhalation of high vapour concentrations of N-methyl-2-pyrrolidone (NMP) may produce mucous membrane irritation, headache, giddiness, mental confusion and nausea. Fatalities were not recorded following inhalation of 180-200 mg/m3 for 2 hours by mice and following a 6-hour exposure to saturated vapours by rats.

Laboratory animals exposed to concentrations of 50 ppm for 8 hours daily for 20 days or 370 ppm for 6 hours daily for 10 days showed no gross or histopathological abnormalities

Inhalation of aerosols (mists, fumes), generated by the material during the course of normal handling, may be damaging to the health of the individual.

The main effects of simple aliphatic esters are narcosis and irritation and anaesthesia at higher concentrations. These effects become greater as the molecular weights and boiling points increase. Central nervous system depression, headache, drowsiness, dizziness, coma and neurobehavioral changes may also be symptomatic of overexposure. Respiratory tract involvement may produce mucous membrane irritation, dyspnoea, and tachypnoea, pharyngitis, bronchitis, pneumonitis and, in massive exposures, pulmonary oedema (which may be delayed). Gastrointestinal effects include nausea, vomiting, diarrhoea and abdominal cramps. Liver and kidney damage may result from massive exposures.

Minor but regular methanol exposures may affect the central nervous system, optic nerves and retinae. Symptoms may be delayed, with headache, fatigue, nausea, blurring of vision and double vision. Continued or severe exposures may cause damage to optic nerves, which may become severe with permanent visual impairment even blindness resulting.

WARNING: Methanol is only slowly eliminated from the body and should be regarded as a cumulative poison which cannot be made non-harmful [CCINFO]

Ingestion

Accidental ingestion of the material may be damaging to the health of the individual.

Considered an unlikely route of entry in commercial/industrial environments. The liquid may produce considerable gastrointestinal discomfort and may be harmful or toxic if swallowed. Ingestion may result in nausea, pain and vomiting. Vomit entering the lungs by aspiration may cause potentially lethal chemical pneumonitis.

Skin Contact

The material produces moderate skin irritation; evidence exists, or practical experience predicts, that the material either

- produces moderate inflammation of the skin in a substantial number of individuals following direct contact, and/or
- produces significant, but moderate, inflammation when applied to the healthy intact skin of animals (for up to four hours), such inflammation being present twenty-four hours or more after the end of the exposure period.

Skin irritation may also be present after prolonged or repeated exposure; this may result in a form of contact dermatitis (nonallergic). The dermatitis is often characterised by skin redness (erythema) and swelling (oedema) which may progress to blistering (vesiculation), scaling and thickening of the epidermis. At the microscopic level there may be intercellular oedema of the spongy layer of the skin (spongiosis) and intracellular oedema of the epidermis.

Repeated exposure may cause skin cracking, flaking or drying following normal handling and use.

Skin contact with the material may damage the health of the individual; systemic effects may result following absorption.

Prolonged contact with N-methyl-2-pyrrolidone (NMP) reportedly causes severe dermatitis with redness, cracking, swelling, blisters and oedema.

An instance of severe skin irritation after a few days work with NMP shows latex rubber gloves as giving insufficient protection. A review article casts doubts on reliability of animal single patch tests, i.e Draize tests.

[Irritant Cutaneous Reaction to NMP, Contact Dermatitis 27: 148-150, 1992]

Open cuts, abraded or irritated skin should not be exposed to this material

Entry into the blood-stream through, for example, cuts, abrasions, puncture wounds or lesions, may produce systemic injury with harmful effects. Examine the skin prior to the use of the material and ensure that any external damage is suitably protected.

Absorption by skin may readily exceed vapour inhalation exposure. Symptoms for skin absorption are the same as for inhalation. Application of d-limonene produced moderate irritation to both intact and abraded skin. High purity d-limonene does not cause significant allergic reaction in guinea pigs; d-limonene, exposed to air for 2-months, sensitised the animals and it is surmised that allergenic compounds are formed after prolonged air contact. In human patch testing, weak or moderate reactions (erythema, swelling) have been observed. Positive eczematous responses to purified limonene were observed in 5 of 16 previously sensitised to oil of turpentine. In one study, a 39-year old male immersed one hand in a jar of solvent, ensuring that inhalation exposure was minimal. After only few minutes of exposure, the subject experienced painful itching and burning. Itching decreased after the exposure but burning continued for 10 minutes. Swelling disappeared after 100 minutes. Six hours post-exposure, a purpuric eruption was observed; this persisted for several weeks. Blood concentrations during skin exposure were low compared to those during inhalation exposure.

Eye

Direct contact with the liquid N-methyl-2-pyrrolidone (NMP) may produce painful burning or stinging of the eyes and lids, watering and inflammation of the conjunctiva and temporary corneal clouding.

Evidence exists, or practical experience predicts, that the material may cause eye irritation in a substantial number of individuals and/or may produce significant ocular lesions which are present twenty-four hours or more after instillation into the eye(s) of experimental animals. Repeated or prolonged eye contact may cause inflammation characterised by a temporary redness (similar to windburn) of the conjunctiva (conjunctivitis); temporary impairment of vision and/or other transient eye damage/ulceration may

Chronic

Long-term exposure to respiratory irritants may result in disease of the airways involving difficult breathing and related systemic problems. Practical experience shows that skin contact with the material is capable either of inducing a sensitisation reaction in a substantial number of individuals, and/or of producing a positive response in experimental animals.

There is sufficient evidence to provide a strong presumption that human exposure to the material may result in developmental toxicity, generally on the basis of:

 clear results in appropriate animal studies where effects have been observed in the absence of marked maternal toxicity, or at around the same dose levels as other toxic effects but which are not secondary non-specific consequences of the other toxic effects.

On the basis, primarily, of animal experiments, concern has been expressed by at least one classification body that the material may produce carcinogenic or mutagenic effects; in respect of the available information, however, there presently exists inadequate data for making a satisfactory assessment.

Limited evidence suggests that repeated or long-term occupational exposure may produce cumulative health effects involving organs or biochemical systems.

The teratogenic potential, subchronic and long-term inhalation toxicity of N-methyl-2-pyrrolidone (NMP has been studied in rats. No evidence of nephrotoxicity was seen.

No carcinogenic effects were observed. Very high doses are embryotoxic to rats and mice. Reproductive effects have been reported in animals.

In the presence of air, a number of common flavour and fragrance chemicals can form peroxides surprisingly fast. Antioxidants can in most cases minimise the oxidation.

Fragrance terpenes are generally easily oxidised in air. Non-oxidised limonene, linalool and caryophyllene turned out to be very weak sensitizers, however after oxidation limonene hydroperoxide and linalool hydroperoxide are strong sensitizers. Of the patients tested 2.6% showed positive reaction to oxidised limonene, 1.3% to oxidised linalool, 1.1% to linalool hydroperoxide, 0.5% to oxidised caryophyllene, while testing with caryophyllene oxide and oxidised myrcene resulted in few positive patch tests. 2/3 of the patients reacting positive to oxidised terpenes had fragrance related contact allergy and/or positive history for adverse reactions to fragrances.

As well as the hydroperoxides produced by linalol, limonene and delta-3-carene other oxidation and resinification effects progressively causes other fairly major changes in essential oil quality over time. Autoxidation of fragrance terpenes contributes greatly to fragrance allergy, which emphasizes the need of testing with compounds that patients are actually exposed to and not only with the ingredients originally applied in commercial formulations.

Hydroperoxides of d-limonene are potent contact allergens when studied in guinea pigs. They may result when d-limonene is unstabilised against oxidation, or upon prolonged standing at room temperature and/ or upon exposure to light, or when stabiliser levels diminish. The two major hydroperoxides in auto-oxidised d-limonene, are cis- and trans- limonene-2-hydroperoxide (2-hydroperoxy-p-mentha-6,8-diene). In photo-oxidised d-limonene, they represent a minor fraction. Hydroperoxides may bind to proteins of the skin to make antigens either via a radical mechanism or after reactions to give epoxides. The cross-reactivity between the epoxide limonene-1,2-oxide, a potent contact allergen, and the hydroperoxides is NOT significant, indicating different mechanisms of sensitisation.

d-Limonene was considered to be weakly carcinogenic for the mouse fore-stomach epithelium, but not tumour producing. In 13-week and 2-year gavagestudies, male rats showed a range of compound-related kidney lesions including exacerbation of agerelated nephropathy, mineralisation in the renal medulla, hyperplasia of the transitional epithelium overlying the renal papilla and proliferation of the renal tubular epithelium. Neoplasms were believed to be caused by progression to tubular cell hyperplasia to tubular cell adenomas and, with increasing size, to adenocarcinomas or carcinomas. The similarity of the nephrotoxicity caused

by trichloroethylene and N-(4'-fluoro-4-biphenyl) acetamide, tris(2,3-dibromopropyl) phosphate in rats and the species-specific nature of the response suggests that degeneration and necrosis of convoluted tubules may be associated with the accumulation of alpha-2u-globin (a2u-G). Since a2u-G is a species and gender-specific protein that is causal for both the cytotoxic and carcinogenic response in male rats, extrapolation of d-limonene carcinogenicity data from rat studies to other species (including humans) is probably not warranted. Humans do not synthesise a2u-G; they do however produce other related low molecular weight proteins capable of binding chemicals that cause a2u-G nephropathy in rats but this does not necessarily connote human risk. The Risk Assessment Forum of the USA EPA concluded:

- Male renal rat tumours arising as a result of a process involving a2u-G accumulation do not contribute to the qualitative weight-of-evidence that the chemical poses a human carcinogenic hazard. Such tumours are included in dose-response extrapolations for the estimation of human carcinogenic risk.
- If the chemical induces a2u-G accumulation in male rats, the associated nephropathy is not to be used as an end-point for determining non-carcinogenic hazard.

Peroxidisable terpenes and terpenoids should only be used when the level of peroxides is kept to the lowest practicable level, for instance by adding antioxidants at the time of production. Such products should have a peroxide value of less than 10 millimoles peroxide per litre. This requirement is based on the published literature mentioning sensitising properties when containing peroxides.

Chronic solvent inhalation exposures may result in nervous system impairment and liver and blood changes. [PATTYS] Long-term exposure to methanol vapour, at concentrations exceeding 3000 ppm, may produce cumulative effects characterised by gastrointestinal disturbances (nausea, vomiting), headache, ringing in the ears, insomnia, trembling, unsteady gait, vertigo, conjunctivitis and clouded or double vision.

Liver and/or kidney injury may also result. Some individuals show severe eye damage following prolonged exposure to 800 ppm of the vapour.

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	TOXICITY	IRRITATION
	Dermal (rabbit) LD50: 8000 mg/kg ^[2]	Not Available
WESTOX D-LAM 100	Inhalation (rat) LC50: >5100 ppm/4h ^[2]	
	Oral (rat) LD50: 3914 mg/kg ^[2]	
	TOXICITY	IRRITATION
dimethyl glutarate	Dermal (rat) LD50: >2000 mg/kg ^[1]	Eye (rabbit): irritant
	Oral (rat) LD50 >2000 mg/kg ^[1]	Skin (human): irritant
	TOXICITY	IRRITATION
N-methyl-2-pyrrolidone	Dermal (rat) LD50: 2500-5000 mg/kg ^[2]	Eye (rabbit): 100mg - moderate
,	Inhalation (rat) LC50: 8290.5297 mg/l/4H ^[2]	
	Oral (rat) LD50: 3914 mg/kg ^[2]	
	TOXICITY	IRRITATION
d-limonene	Dermal (rabbit) LD50: >5000 mg/kg ^[2]	Eye: no adverse effect observed (not irritating) ^[1]
	Oral (rat) LD50 >2000 mg/kg	Skin (rabbit): 500mg/24h moderate
		Skin: no adverse effect observed (not irritating) ^[1]

Legend: 1. Value obtained from Europe ECHA Registered Substances - Acute toxicity 2.* Value obtained from manufacturer's SDS. Unless otherwise specified data extracted from RTECS - Register of Toxic Effect of chemical Substances

DIMETHYL GLUTARATE

The material may cause skin irritation after prolonged or repeated exposure and may produce a contact dermatitis (nonallergic). This form of dermatitis is often characterised by skin redness (erythema) and swelling the epidermis. Histologically there may be intercellular oedema of the spongy layer (spongiosis) and intracellular oedema of the epidermis.

The family of dibasic (methyl) esters (DBEs) comprise dimethyl succinate (DMS, CAS No. 106-65-0), dimethyl glutarate (DMG, CAS No. 1119-40-0), and dimethyl adipate (DMA, CAS No. 627-93-0), and their mixture DBE (CAS No. 95481-62-2). A crude dibasic ester mixture is distilled to produce DMS, DMG, and DMA and three other fractions that are mixtures of these esters generally composed of 10-25, 55-65, and 15-25% DMA, DMG, and DMS, respectively. The three discrete compounds are all short four-to six-carbon straight-chain dicarboxylic acid dimethyl esters differing incrementally by one carbon atom. The four members of the category produce similar levels of acute and repeated-dose toxicity in experimental animals.

DBEs have very low acute oral toxicities with LD50 s in rats generally > 5,000 mg/kg (with two exceptions reported as >500 and <5,000 mg/kg b.wt. for DBE (the mixture) and DMS.

By skin absorption, DBEs have a low order of acute toxicity to rabbits with dermal LD50s of 3,000 mg/kg. Based upon the most recent GLP studies DBEs are not considered to produce primary dermal irritation as defined in EPA Guidelines. Earlier studies did show moderate irritation in one of six rabbits, but these results were not repeated in later studies. All four DBE materials are considered to produce eye irritation as defined by EPA Guidelines. Mild to moderate irritation involving the cornea was observed in rabbits with recovery by 7 days. DBEs are not skin sensitisers, and are not harmful via skin or inhalation exposures. DBE is slightly toxic by inhalation with 1-and 4-hour LC50s in rats of > 10.7 and > 11 mg/L, respectively. In subchronic inhalation studies with all four DBEs, degeneration of the olfactory epithelium of the nose was observed. This change in the nasal tissue sis related to enzymatic hydrolysis of DBE within the nasal cavity. However, risk to human nasal tissue due to DBE toxicity is likely to be reduced when compared to rats since DBEs are hydrolysed more slowly in humans. No information is available on the carcinogenic potential of DBEs. A range of studies with DMS, DMG, DMA and DBE did not produce genetic damage in animals or bacterial cell cultures. DBE was positive in one study with

cultured mammalian cells, but the positive findings were not apparent when the assay was repeated. Testing in rats indicates DBEs are not developmental or reproductive toxicants.

N-METHYL-2-PYRROLIDONE

Asthma-like symptoms may continue for months or even years after exposure to the material ceases. This may be due to a non-allergenic condition known as reactive airways dysfunction syndrome (RADS) which can occur following exposure to high levels of highly irritating compound. Key criteria for the diagnosis of RADS include the absence of preceding respiratory disease, in a non-atopic individual, with abrupt onset of persistent asthma-like symptoms within minutes to hours of a documented exposure to the irritant. A reversible airflow pattern, on spirometry, with the presence of moderate to severe bronchial hyperreactivity on methacholine challenge testing and the lack of minimal lymphocytic inflammation, without eosinophilia, have also been included in the criteria for diagnosis of RADS. RADS (or asthma) following an irritating inhalation is an infrequent disorder with rates related to the concentration of and duration of exposure to the irritating substance. Industrial bronchitis, on the other hand, is a disorder that occurs as result of exposure due to high concentrations of irritating substance (often particulate in nature) and is completely reversible after exposure ceases. The disorder is characterised by dyspnea, cough and mucus production.

for N-methyl-2-pyrrolidone (NMP):

Acute toxicity: In rats, NMP is absorbed rapidly after inhalation, oral, and dermal administration, distributed throughout the organism, and eliminated mainly by hydroxylation to polar compounds, which are excreted via urine. About 80% of the administered dose is excreted as NMP and NMP metabolites within 24 h. A probably dose-dependent yellow coloration of the urine in rodents is observed. The major metabolite is 5-hydroxy-N-methyl-2-pyrrolidone. Studies in humans show comparable results. Dermal penetration through human skin has been shown to be very rapid. NMP is rapidly biotransformed by hydroxylation to 5-hydroxy-N-methyl-2-pyrrolidone, which is further oxidized to N-methylsuccinimide; this intermediate is further hydroxylated to 2-hydroxyN-methylsuccinimide. These metabolites are all colourless. The excreted amounts of NMP metabolites in the urine after inhalation or oral intake represented about 100% and 65% of the administered doses, respectively. NMP has a low potential for skin irritation and a moderate potential for eye irritation in rabbits. Repeated daily doses of 450 mg/kg body weight administered to the skin caused painful and severe haemorrhage and eschar formation in rabbits. These adverse effects have not been seen in workers occupationally exposed to pure NMP, but they have been observed after dermal exposure to NMP used in cleaning processes. No sensitisation potential has been observed.

In acute toxicity studies in rodents, NMP showed low toxicity. Uptake of oral, dermal, or inhaled acutely toxic doses causes functional disturbances and depressions in the central nervous system. Local irritation effects were observed in the respiratory tract when NMP was inhaled and in the pyloric and gastrointestinal tracts after oral administration. In humans, there was no irritative effect in the respiratory system after an 8-h exposure to 50 mg/m3.

Repeat dose toxicity: There is no clear toxicity profile of NMP after multiple administration. In a 28-day dietary study in rats, a compound-related decrease in body weight gain was observed in males at 1234 mg/kg body weight and in females at 2268 mg/kg body weight. Testicular degeneration and atrophy in males and thymic atrophy in females were observed at these dose levels. The no-observed-adverse-effect level (NOAEL) was 429 mg/kg body weight in males and 1548 mg/kg body weight in females. In a 28-day intubation study in rats, a dose-dependent increase in relative liver and kidney weights and a decrease in lymphocyte count in both sexes were observed at 1028 mg/kg body weight. The NOAEL in this study was 514 mg/kg body weight. In another rat study, daily dietary intake for 90 days caused decreased body weights at doses of 433 and 565 mg/kg body weight in males and females, respectively. There were also neurobehavioural effects at these dose levels. The NOAELs in males and females were 169 and 217 mg/kg body weight, respectively.

The toxicity profile after exposure to airborne NMP depends strongly on the ratio of vapour to aerosol and on the area of exposure (i.e., head-only or whole-body exposure). Because of higher skin absorption for the aerosol, uptake is higher in animals exposed to aerosol than in those exposed to vapour at similar concentrations. Studies in female rats exposed head only to 1000 mg/m3 showed only minor nasal irritation, but massive mortality and severe effects on major organs were observed when the females were whole-body exposed to the same concentration of coarse droplets at high relative humidity. Several studies in rats following repeated exposure to NMP at concentrations between 100 and 1000 mg/m3 have shown systemic toxicity effects at the lower dose levels. In most of the studies, the effects were not observed after a 4-week observation period. In rats, exposure to 3000 mg NMP/m3 (head only) for 6 h/day, 5 days/week, for 13 weeks caused a decrease in body weight gain, an increase in erythrocytes, haemoglobin, haematocrit, and mean corpuscular volume, decreased absolute testis weight, and cell loss in the germinal epithelium of the testes. The NOAEL was 500 mg/m3.

There are no data in humans after repeated-dose exposure.

Carcinogenicity: NMP did not show any clear evidence for carcinogenicity in rats exposed to concentrations up to 400 mg/m3 in a long-term inhalation study.

Genotoxicity: The mutagenic potential of NMP is weak. Only a slight increase in the number of revertants was observed when tested in a Salmonella assay with base-pair substitution strains. NMP has been shown to induce aneuploidy in yeast Saccharomyces cerevisiae cells. No investigations regarding mutagenicity in humans were available.

Reproductive toxicity: In a two-generation reproduction study in rats, whole-body exposure of both males and females to 478 mg/m3 of NMP vapour for 6 h/day, 7 days/week, for a minimum of 100 days (pre-mating, mating, gestation, and lactation periods) resulted in a 7% decrease in fetal weight in the F1 offspring. A 4-11% transient, non-dose-dependent decrease was observed in the average pup weight at all exposure levels tested (41, 206, and 478 mg/m3).

Developmental toxicity: When NMP was administered dermally, developmental toxicity was registered in rats at 750 mg/kg body weight. The observed effects were increased preimplantation losses, decreased fetal weights, and delayed ossification. The NOAEL for both developmental effects and maternal toxicity (decreased body weight gain) was 237 mg/kg body weight. Inhalation studies in rats (whole-body exposure) demonstrated developmental toxicity as increased preimplantation loss without significant effect on implantation rate or number of live fetuses at 680 mg/m3 and behavioural developmental toxicity at 622 mg/m3. In an inhalation study (whole-body exposure), the NOAEL for maternal effects was 100 mg/m3, and the NOAEL for developmental effects was 360 mg/m3.

A tolerable inhalation concentration, 0.3 mg/m3, based on mortality and organ damage, is expected to be protective against any possible reproductive toxicity. Similarly, an oral tolerable intake of 0.6 mg/kg body weight per day, based on a 90-day study, is expected to provide adequate protection against possible reproductive effects. Because of non-existent data on the exposure of the general population and very limited information on occupational exposure, no meaningful risk characterisation can be performed.

D-LIMONENE

The following information refers to contact allergens as a group and may not be specific to this product.

Contact allergies quickly manifest themselves as contact eczema, more rarely as urticaria or Quincke's oedema. The pathogenesis of contact eczema involves a cell-mediated (T lymphocytes) immune reaction of the delayed type. Other allergic skin reactions, e.g. contact urticaria, involve antibody-mediated immune reactions. The significance of the contact allergen is not simply determined by its sensitisation potential: the distribution of the substance and the opportunities for contact with it are equally important. A weakly sensitising substance which is widely distributed can be a more important allergen than one with stronger sensitising potential with which few individuals come into contact. From a clinical point of view, substances are noteworthy if they produce an allergic test reaction in more than 1% of the persons tested.

d-Limonene is readily absorbed by inhalation and ingestion. Dermal absorption is reported to be lower than by the inhalation route. d-Limonene is rapidly distributed to different tissues in the body, readily metabolised and eliminated primarily through the urine.

Limonene exhibits low acute toxicity by all three routes in animals. Limonene is a skin irritant in both experimental animals and humans. Limited data are available on the potential to cause eye and respiratory irritation. Autooxidised products of d-limonene have the potential to be skin sensitisers. Limited data are available in humans on the potential to cause respiratory sensitisation. Autooxidation of limonene occurs readily in the presence of light and air forming a variety of oxygenated monocyclic terpenes. Risk of skin sensitisation is high in situations where contact with oxidation products of limonene occurs.

Renal tumours induced by limonene in male rats is thought to be sex and species specific and are not considered relevant to humans. Repeated exposure affects the amount and activity of liver enzymes, liver weight, blood cholesterol levels and bile flow in animals. Increase in liver weight is considered a physiological adaption as no toxic effects on the liver have been reported. From available data it is not possible to identify an NOAEL for these effects

Limonene is neither genotoxic or teratogenic nor toxic to the reproductive system.

Adverse reactions to fragrances in perfumes and in fragranced cosmetic products include allergic contact dermatitis, irritant contact dermatitis, photosensitivity, immediate contact reactions (contact urticaria), and pigmented contact dermatitis. Airborne and connubial contact dermatitis occur. Intolerance to perfumes, by inhalation, may occur if the perfume contains a sensitising principal. Symptoms may vary from general illness, coughing, phlegm, wheezing, chest-tightness, headache, exertional dyspnoea, acute respiratory illness, hayfever, and other respiratory diseases (including asthma).

Perfumes can induce hyper-reactivity of the respiratory tract without producing an IgE-mediated allergy or demonstrable respiratory obstruction. This was shown by placebo-controlled challenges of nine patients to "perfume mix". The same patients were also subject to perfume provocation, with or without a carbon filter mask, to ascertain whether breathing through a filter with active carbon would prevent symptoms. The patients breathed through the mouth, during the provocations, as a nose clamp was used to prevent nasal inhalation. The patient's earlier symptoms were verified; breathing through the carbon filter had no protective effect. The symptoms were not transmitted via the olfactory nerve but they may have been induced by trigeminal reflex via the respiratory tract or by the eyes.

Cases of occupational asthma induced by perfume substances such as isoamyl acetate, limonene, cinnamaldehyde and benzaldehyde, tend to give persistent symptoms even though the exposure is below occupational exposure limits.

Inhalation intolerance has also been produced in animals. The emissions of five fragrance products, for one hour, produced various combinations of sensory irritation, pulmonary irritation, decreases in expiratory airflow velocity as well as alterations of the functional observational battery indicative of neurotoxicity in mice. Neurotoxicity was found to be more severe after mice were repeatedly exposed to the fragrance products, being four brands of cologne and one brand of toilet water.

Contact allergy to fragrances is relatively common, affecting 1 to 3% of the general population, based on limited testing with eight common fragrance allergens and about 16 % of patients patch tested for suspected allergic contact dermatitis.

Contact allergy to fragrance ingredients occurs when an individual has been exposed, on the skin, to a suffcient degree of fragrance contact allergens.

Contact allergy is a life-long, specifically altered reactivity in the immune system. This means that once contact allergy is developed, cells in the immune system will be present which can recognise and react towards the allergen. As a consequence, symptoms, i.e. allergic contact dermatitis, may occur upon re-exposure to the fragrance allergen(s) in question. Allergic contact dermatitis is an inflammatory skin disease characterised by erythema, swelling and vesicles in the acute phase. If exposure continues it may develop into a chronic condition with scaling and painful fissures of the skin. Allergic contact dermatitis to fragrance ingredients is most often caused by cosmetic products and usually involves the face and/or hands. It may affect fitness for work and the quality of life of the individual. Fragrance contact allergy has long been recognised as a frequent and potentially disabling problem. Prevention is possible as it is an environmental disease and if the environment is modified (e.g. by reduced use concentrations of allergens), the disease frequency and severity will decrease Fragrance contact allergy is mostly non-occupational and related to the personal use of cosmetic products. Allergic contact dermatitis can be severe and widespread, with a significant impairment of quality of life and potential consequences for fitness for work. Thus, prevention of contact sensitisation to fragrances, both in terms of primary prevention (avoiding sensitisation) and secondary prevention (avoiding relapses of allergic contact dermatitis in those already sensitised), is an important objective of public health risk management measure.

Hands: Contact sensitisation may be the primary cause of hand eczema, or may be a complication of irritant or atopic hand eczema. The number of positive patch tests has been reported to correlate with the duration of hand eczema, indicating that long-standing hand eczema may often be complicated by sensitisation. Fragrance allergy may be a relevant problem in patients with hand eczema; perfumes are present in consumer products to which their hands are exposed. A significant relationship between hand eczema and fragrance contact allergy has been found in some studies based on patients investigated for contact allergy. However, hand eczema is a multifactorial disease and the clinical significance of fragrance contact allergy in (severe) chronic hand eczema may not be clear.

Axillae Bilateral axillary: (underarm) dermatitis may be caused by perfume in deodorants and, if the reaction is severe, it may spread down the arms and to other areas of the body. In individuals who consulted a dermatologist, a history of such first-time symptoms was significantly related to the later diagnosis of perfume allergy.

Face: Facial eczema is an important manifestation of fragrance allergy from the use of cosmetic products (16). In men, after-shave products can cause an eczematous eruption of the beard area and the adjacent part of the neck and men using wet shaving as opposed to dry have been shown to have an increased risk of of being fragrance allergic.

Irritant reactions (including contact urticaria): Irritant effects of some individual fragrance ingredients, e.g. citral are known. Irritant contact dermatitis from perfumes is believed to be common, but there are no existing

investigations to substantiate this, Many more people complain about intolerance or rashes to perfumes/perfumed products than are shown to be allergic by testing. This may be due to irritant effects or inadequate diagnostic procedures. Fragrances may cause a dose-related contact urticaria of the non-immunological type (irritant contact urticaria). Cinnamal, cinnamic alcohol, and Myroxylon pereirae are well recognised causes of contact urticaria, but others, including menthol, vanillin and benzaldehyde have also been reported. The reactions to Myroxylon pereirae may be due to cinnamates. A relationship to delayed contact hypersensitivity was suggested, but no significant difference was found between a fragrance-allergic group and a control group in the frequency of immediate reactions to fragrance ingredients in keeping with a nonimmunological basis for the reactions seen.

Pigmentary anomalies: The term "pigmented cosmetic dermatitis" was introduced in 1973 for what had previously been known as melanosis faciei feminae when the mechanism (type IV allergy) and causative allergens were clarified.. It refers to increased pigmentation, usually on the face/neck, often following sub-clinical contact dermatitis. Many cosmetic ingredients were patch tested at non-irritant concentrations and statistical evaluation showed that a number of fragrance ingredients were associated: jasmine absolute, ylang-ylang oil, cananga oil, benzyl salicylate, hydroxycitronellal, sandalwood oil, geraniol, geranium oil.

Photo-reactions: Musk ambrette produced a considerable number of allergic photocontact reactions (in which UV-light is required) in the 1970s and was later banned from use in the EU. Nowadays, photoallergic contact dermatitis is uncommon. Furocoumarins (psoralens) in some plant-derived fragrance ingredients caused phototoxic reactions with erythema followed by hyperpigmentation resulting in Berloque dermatitis. There are now limits for the amount of furocoumarins in fragrance products. Phototoxic reactions still occur but are rare.

General/respiratory: Fragrances are volatile and therefore, in addition to skin exposure, a perfume also exposes the eyes and naso-respiratory tract. It is estimated that 2-4% of the adult population is affected by respiratory or eye symptoms by such an exposure. It is known that exposure to fragrances may exacerbate pre-existing asthma. Asthma-like symptoms can be provoked by sensory mechanisms. In an epidemiological investigation, a significant association was found between respiratory complaints related to fragrances and contact allergy to fragrance ingredients, in addition to hand eczema, which were independent risk factors in a multivariate analysis. Fragrance allergens act as haptens, i.e. low molecular weight chemicals that are immunogenic only when attached to a carrier protein. However, not all sensitising fragrance chemicals are directly reactive, but require previous activation. A prehapten is a chemical that itself is non- or low-sensitising, but that is transformed into a hapten outside the skin by simple chemical transformation (air oxidation, photoactivation) and without the requirement of specific enzymatic systems.

In the case of prehaptens, it is possible to prevent activation outside the body to a certain extent by different measures, e.g. prevention of air exposure during handling and storage of the ingredients and the final product, and by the addition of suitable antioxidants. When antioxidants are used, care should be taken that they will not be activated themselves and thereby form new sensitisers.

Prehaptens

Most terpenes with oxidisable allylic positions can be expected to autoxidise on air exposure due to their inherent properties. Depending on the stability of the oxidation products that are formed, a difference in the sensitisation potency of the oxidised terpenes can be seen.

Autoxidation is a free radical chain reaction in which hydrogen atom abstraction in combination with addition of oxygen forms peroxyl radicals. The reaction shows selectivity for positions where stable radicals can be formed. So far, all fragrance substances that have been investigated with regard to the influence of autoxidation on the allergenic potential, including identification of formed oxidation products, have oxidisable allylic positions that are able to form hydroperoxides and/or hydrogen peroxide as primary oxidation products upon air exposure. Once the hydroperoxides have been formed outside the skin they form specific antigens and act as skin sensitisers. Secondary oxidation products such as aldehydes and epoxides can also be allergenic, thus further increasing the sensitisation potency of the autoxidation mixture. The process of photoactivation may also play a role, but further research is required to establish whether this activation route is currently underestimated in importance due to insufficient knowledge of the true haptens in this context. It should be noted that activation of substances via air oxidation results in various haptens that might be the same or cross-reacting with other haptens (allergens). The main allergens after air oxidation of linalool and linalyl acetate are the hydroperoxides. If linalyl acetate is chemically hydrolysed outside the skin it can thereafter be oxidised to the same haptens as seen for linalool. A corresponding example is citronellol and citronellyl acetate. In clincal studies, concomitant reactions to oxidised linalool and oxidised linalyl acetate have been observed. Whether these reactions depend on cross-reactivity or are due to exposure to both fragrance substances cannot be elucidated as both have an allergenic effect themselves. Linalool and linalyl acetate are the main components of lavender oil. They autoxidise on air exposure also when present in the essential oil, and form the same oxidation products found in previous studies of the pure synthetic terpenes. Experimental sensitisation studies showed that air exposure of lavender oil increased the sensitisation potency. Patch test results in dermatitis patients showed a connection between positive reactions to oxidised linalool, linalyl acetate and lavender oil.

Prohaptens

Compounds that are bioactivated in the skin and thereby form haptens are referred to as prohaptens.

In the case of prohaptens, the possibility to become activated is inherent to the molecule and activation cannot be avoided by extrinsic measures. Activation processes increase the risk for cross-reactivity between fragrance substances. Crossreactivity has been shown for certain alcohols and their corresponding aldehydes, i.e. between geraniol and geranial (citral) and between cinnamyl alcohol and cinnamal.

The human skin expresses enzyme systems that are able to metabolise xenobiotics, modifying their chemical structure to increase hydrophilicity and allow elimination from the body. Xenobiotic metabolism can be divided into two phases: phase I and phase II. Phase I transformations are known as activation or functionalisation reactions, which normally introduce or unmask hydrophilic functional groups. If the metabolites are sufficiently polar at this point they will be eliminated. However, many phase I products have to undergo subsequent phase II transformations, i.e. conjugation to make them sufficiently water soluble to be eliminated. Although the purpose of xenobiotic metabolism is detoxification, it can also convert relatively harmless compounds into reactive species. Cutaneous enzymes that catalyse phase I transformations include the cytochrome P450 mixed-function oxidase system, alcohol and aldehyde dehydrogenases, monoamine oxidases, flavin-containing monooxygenases and hydrolytic enzymes. Acyltransferases, glutathione S-transferases, UDP-glucuronosyltransferases and sulfotransferases are examples of phase II enzymes that have been shown to be present in human skin. These enzymes are known to catalyse both activating and deactivating biotransformations, but the influence of the reactions on the allergenic activity of skin sensitisers has not been studied in detail. Skin sensitising prohaptens can be recognised and grouped into chemical classes based on knowledge of xenobiotic bioactivation reactions, clinical observations and/or in vivo and in vitro studies of sensitisation potential and chemical reactivity.

QSAR prediction: The relationships between molecular structure and reactivity that form the basis for structural alerts are based on well established principles of mechanistic organic chemistry. Examples of structural alerts are aliphatic aldehydes (alerting to the possibility of sensitisation via a Schiff base reaction with protein amino

groups), and alpha,beta-unsaturated carbonyl groups, C=C-CO- (alerting to the possibility of sensitisation via Michael addition of protein thiol groups). Prediction of the sensitisation potential of compounds that can act via abiotic or metabolic activation (pre- or prohaptens) is more complex compared to that of compounds that act as direct haptens without any activation. The autoxidation patterns can differ due to differences in the stability of the intermediates formed, e.g. it has been shown that autoxidation of the structural isomers linalool and geraniol results in different major haptens/allergens. Moreover, the complexity of the prediction increases further for those compounds that can act both as pre- and prohaptens. In such cases, the impact on the sensitisation potency depends on the degree of abiotic activation (e.g. autoxidation) in relation to the metabolic activation.

The substance is classified by IARC as Group 3:

NOT classifiable as to its carcinogenicity to humans. Evidence of carcinogenicity may be inadequate or limited in animal testing.

Monomethyltin chloride, thioglycolate esters, and tall oil ester reaction product:

Monomethyltin trichloride (MMTC, CAS RN: 993-16-8), monomethyltin tris[2-ethylhexylmercaptoacetate (MMT (EHTG; MMT (2-EHMA), CAS RN: 57583-34-3), monomethyltin tris[isooctylmercaptoacetate (MMT(IOTG), CAS RN: 54849-38-6) and methyltin reverse ester tallate reaction product (TERP, CAS RNs: 201687-58-3, 201687-57-2, 68442-12-6, 151436-98-5) are considered one category of compounds for mammalian studies via the oral route. The justification for this category is based on structural similarities and the demonstrated rapid conversion of all of the esters to the MMTC when placed in simulated mammalian gastric contents [0.07M HCI] under physiological conditions. For the MMT(EHTG) >90% conversion to MMTC occurred within 0.5 hours. For TERP, 68% of the monomethyltin portion of the compound was converted to MMTC within 1 hour. Thus, MMTC is the appropriate surrogate for mammalian toxicology studies via the oral route.

TERP is a reaction product of MMTC and dimethyltin dichloride (DMTC), Na2S, and tall oil fatty acid [a mixture of carboxylic acids, predominantly C-18].

The reaction product is a mixture of carboxylic esters and includes short oligomers of mono/dimethyltins bridged by sulfide groups. Although the tall oil component of TERP is not structurally similar to EHTG, TERP's conversion to MMTC justifies its inclusion. While the contribution of the various ligands to the overall toxicity may vary, the contribution is expected to be small relative to that of the MMTC. Further, the EHTG ligand from MMT(EHTG) is likely to be more toxic than the oleic or linoleic acid from TERP so inclusion of TERP in the category is a rather conservative approach. The other possible degradate of tall oil and EHTG is 2-mercaptoethanol (2-ME), and it is common to both ligands.

Data for MMT(EHTG) and MMT(IOTG) are used interchangeably because they are isomers differing only slightly in the structure of the C-8 alcohol of the mercaptoester ligand. In addition, the breakdown products of MMT(EHTG) and MMT(IOTG) are the thioglycolate esters (EHTG and IOTG), which have the common degradates, thioglycolic acid and C-8 alcohols (either 2-ethylhexanol or isooctanol). EHTG and IOTG also have similar physicochemical and toxicological properties.

The chemistry of the alkyl organotins has been well studied. For organotins, like MMT(EHTG), the alkyl groups are strongly bound to tin and remain bound to tin under most reaction conditions. However, other ligands, such as carboxylates or sulfur based ligands (EHTG), are more labile and are readily replaced under mild reaction conditions. To assess the reactivity of MMT(EHTG) under physiological conditions simulating the mammalian stomach, an in-vitro hydrolysis test was performed. This in vitro test provides chemical information that strongly suggests both the probable in vivo metabolic pathway and the toxicokinetics of the MMT(EHTG) substance. This result verifies that under physiological conditions MMT(EHTG) is rapidly and essentially completely converted to the corresponding monomethyltin chloride, MMTC.

Acute toxicity:

The majority of toxicology studies were conducted with commercial mixtures having high monoalkyltin to dialkyltin ratios.

Gastric hydrolysis studies were conducted with TERP and MMT(EHTG) in which simulated gastric fluid [0.07M HCl under physiological conditions] converted these substances to methyltin chloride and the respective organic acids. Based on data for DMTC and DMT esters the dermal penetration of MMTC and its esters is expected to be low.

Oral:

Acute oral LD50 values for MMTC, MMT(EHTG), MMT(IOTG), and TERP indicated low to moderate toxicity; the most reliable data place the LD50s in the range of 1000 mg/kg.

The acute oral LD50 of MMT(2-EHMA) was 880 mg/kg in rats. Clinical observations included depression, comatose, piloerection, eye squinting, hunched posture, laboured breathing, ataxia, faecal/urine stains, and masticatory movement. No gross pathological changes were reported in surviving animals.

Dermai

Acute dermal LD50 values were =1000 mg/kg bw, and inhalation LC50 was >200 mg/L. MMTC was corrosive to skin and assumed corrosive to eyes.

The acute dermal LD50 of MMT(2-EHMA) in rabbits was 1000 (460 to 2020) mg/kg for females and 2150 (1000 to 4620) mg/kg for males. There were no deaths at 215 and 464 mg/kg, 0/2 males and 1/2 females died at 1000 mg/kg and 1/2 males and 2/2 females died at 2150 mg/kg. All animals died at 4640 and 10,000 mg/kg. A variety of clinical abnormalities were observed and disappeared in surviving animals by the end of the exposure period. Clinical signs included death, uncoordinated movements, shaking, and hypersensitivity to external stimuli.

Gross necropsy results for animals that died during the study included irritated intestines; blanched stomach; reddened lungs; pale or congested kidneys; and oral, ocular and/or nasal discharges.

The acute inhalation LC50 of MMT(2-EHMA) was 240 mg/L.

The study reported an acute inhalation LC50 of 240 (212 to 271) mg/L in a 1-hr aerosol exposure to male and female rats. The mortality rate was 2/10, 6/10, 9/10 and 10/10 animals at dose levels of 200, 250, 300 and 250 mg/L/hr, respectively. Gross findings included blood in lungs, dark spleen, pale kidneys, fluid in the chest cavity, and heart failure. The slope of the dose-response curve was 1.22 (1.04 to 1.43). Irritation:

MMT(IOTG)/(EHTG) are irritating to skin, but not to eyes.

Sensitisation:

No data on sensitization are available on MMT(EHTG/(IOTG), but the hydrolysis products EHTG or IOTG are sensitizers. No primary irritation data were available for TERP, but it was a sensitizer in the mouse Local Lymph Node Assay.

Topical application with 5, 25 and 50 % v/v MMT(2-EHMA) elicited a stimulation index (SI) of 2.13, 7.25 and 9.05, respectively in a local lymph node assay (OECD 429), thus the material is a sensitiser. Repeat dose toxicity:

There are no repeated-dose studies for the category members via the dermal or inhalation routes.

In a 90-day repeated dose oral study of MMTC, treatment-related changes were limited to the high dose group (750 ppm in diet; 50 mg/kg bw/d with some gender-related variation). Organ weight changes (adrenal, kidney, thymus, spleen, brain, epididymides), haematology, clinical chemistry, and urinalysis changes were noted, but histopathology only confirmed effects in the thymus and brain. The critical toxic effects were neurotoxicity and thymic atrophy. Both sexes had decreased cortex/medulla ratios in the thymus. In the brain there was loss of perikarya of neuronal cells in the pyramidal layer of the Hippocampus CA1/2 in both sexes, and in males there was loss of perikarya in the piriform cortex. The NOAEL was 150 ppm (10 mg/kg bw/d). Another 90-day dietary study using MMTC showed increased relative kidney weights and slight to moderate epithelial hyperplasia of the bladder in females at the lowest dose (NOAEL <20 ppm in diet [<1-3.6 mg/kg bw/d]) and additional effects including increased relative thymus weights in females and urinalysis results in both sexes at higher doses.

A 90-day dietary study with dose levels of 30, 100, 300, and 1000 ppm TERP in the diet resulted in slightly decreased food intake, body and organ weight changes, and decreased specific gravity of the urine at the highest dose. The NOAEL was 300 ppm in diet (equivalent to 15 mg/kg bw/d). A 28-day gavage study using TERP showed changes in clinical chemistry and slight differences in haematology at 150 mg/kg bw/d and higher. The NOAEL was 50 mg/kg bw/d.

The effects of MMT(IOTG) were evaluated in a 90-day dietary study using doses of 100, 500, and 1500 ppm (decreased from 2500 ppm) in the diet. Based on clinical chemistry effects at 500 ppm and other effects at higher doses, the NOAEL was 100 ppm in diet (approximately 6-21 mg/kg bw/d).

Neurotoxicity:

In a guideline 90-day subchronic dietary study conducted in Wistar rats, effects occurred at the high dose of 750 ppm MMT(2-EHMA, (equivalent to 49.7 mg/kg bw/day in males and 53.6 mg/kg bw/day in females), which consisted of changes in neurobehavioral parameters and associated brain histopathology.

The NOAEL was the next lower dose of 150 ppm (equivalent to 9.8 mg/kg bw/day in males and 10.2 mg/kg bw/day in females.

Immunotoxicity:

Immune function was assessed in male Sprague-Dawley rats exposed to the mixture of organotins used in PVC pipe production.

Adult male rats were given drinking water for 28 d containing a mixture of dibutyltin dichloride (DBTC), dimethyltin dichloride (DMTC), monobutyltin trichloride (MBT), and monomethyltin trichloride (MMT) in a 2:2:1:1 ratio, respectively, at 3 different concentrations (5:5:2.5:2.5; 10:10:5:5, or 20:20:10:10 mg organotin/L). Rats were also exposed to MMT alone (20 or 40 mg MMT/L) or plain water as a control. Delayed-type hypersensitivity, antibody synthesis, and natural killer cell cytotoxicity were evaluated in separate endpoint groups immediately after exposure ended.

The evaluated immune functions were not affected by the mixture or by MMT alone. The data suggest that immunotoxicity is unlikely to result from the concentration of organotins present in drinking water delivered via PVC pipes, as the concentrations used were several orders of magnitude higher than those expected to leach from PVC pipes.

Genotoxicity:

In a guideline 90-day subchronic dietary study in rats,with MMT(2-EHMA), based on the changes in neurobehavioral parameters and associated brain histopathology that occurred at the high dose of 750 ppm (equivalent to 49.7 mg/kg bw/day in males and 53.6 mg/kg bw/day in females), as well as changes in haematology, clinical chemistry, urinalysis, organ weights, and pathology of the thymus at the same dose, the NOAEL was the next lower dose of 150 ppm (equivalent to 9.8 mg/kg bw/day in males and 10.2 mg/kg bw/day in females).

The monomethyltin compounds as a class are not mutagenic in the Ames test. TERP was positive in a human lymphocyte assay. MMTC was equivocal for induction of micronucleated polychromatic erythrocytes (MPEs) in an in vivo rat micronucleus test (OECD 474). In this study a statistically significant increase in MPE was observed only at 24 h and not at 48 h after treatment and there was no dose-response. Based on these observations the overall conclusion is that MMTC does not have genotoxic potential.

From the results obtained in a micronucleus test with MMT(2-EHMA), it was demonstrated that the substance was weakly genotoxic to bone marrow cells of rats and that the substance has the potential to induce damage to the mitotic spindle apparatus of the bone marrow target cells.

Carcinogenicity:

In a limited carcinogenicity study, MMT(EHTG) produced no compound-related macroscopic or microscopic changes in rats fed 100 ppm in the diet for two years.

Toxicity to reproduction:

In the reproductive satellite portion of the 90-day study using MMTC (with dose levels of 30, 150, and 750 ppm in the diet), post-implantation loss, decreased litter size and increased neonatal mortality occurred at 750 ppm (26-46 mg/kg bw/d for females). Maternal gestational body weights were transiently suppressed and other maternal toxicity was inferred from the repeated dose results at this dose. There were no malformations observed at any dose. The NOAEL for maternal toxicity, and reproductive, and foetotoxic effects was 150 ppm in the diet (6-12 mg/kg bw/d).

SIDS Inital Assessment Profile (SIAM 23 2006)

ECHA Registration Dossier for MMT(2-EHMÁ) (ethylhexyl 10-ethyl-4-[[2-[(2-ethylhexyl)oxy]-2-oxoethyl]thio]-4-methyl-7-oxo-8-oxa-3,5-dithia4-stannatetradecanoate)

Tumorigenic by RTECS criteria

Acute Toxicity X Carcinogenicity X
Skin Irritation/Corrosion V Reproductivity V
Serious Eye Damage/Irritation V STOT - Single Exposure V
Respiratory or Skin sensitisation V STOT - Repeated Exposure X
Mutagenicity X Aspiration Hazard X

Legend: X- Data either not available or does not fill the criteria for classification

✓– Data available to make classification

12 - ECOLOGICAL INFORMATION

Toxicity

Westox D-LAM 100	ENDPOINT	TEST DURATION (HR)	SPECIES	VALUE	SOURCE
	Not Available	Not Available	Not Available	Not Available	Not Available
	1	T		T	
	ENDPOINT	TEST DURATION (HR)	SPECIES	VALUE	SOURCE
Dimethyl glutarate	LC50	96	Fish	93.991mg/L	3
Dimetriyi giutarate	EC50	96	Algae or other aquatic plants	7.186mg/L	3
	NOEC	72	Algae or other aquatic plants	36mg/L	2

ENDPOINT LC50	ENDPOINT	TEST DURATION (HR)	SPECIES	VALUE	SOURCE
	LC50	96	Fish	464mg/L	1
N mothyl 2 pyrrolidono	EC50	48	Crustacea	ca.4897mg/L	1
N-methyl-2-pyrrolidone	EC50	72	Algae or other aquatic plants	>500mg/L	2
	EC0	24	Crustacea	>1-mg/L	2
	NOEC	504	Crustacea	12.5mg/L	2

	ENDPOINT	TEST DURATION (HR)	SPECIES	VALUE	SOURCE
	LC50	96	Fish	0.199mg/L	3
d-limonene	EC50	48	Crustacea	0.307mg/L	2
	EC50	96	Algae or other aquatic plants	0.212mg/L	3
	NOEC	504	Crustacea	0.05mg/L	2

Legend: Extracted from 1. IUCLID Toxicity Data 2. Europe ECHA Registered Substances - Ecotoxicological Information - Aquatic Toxicity 3. EPIWIN Suite V3.12 (QSAR) - Aquatic Toxicity Data (Estimated) 4. US EPA, Ecotox database - Aquatic Toxicity Data 5. ECETOC Aquatic Hazard Assessment Data 6. NITE (Japan) - Bioconcentration Data 7. METI (Japan) - Bioconcentration Data 8. Vendor Data

Persistence/ Degradability 100% in 28 days - readily biodegradable [Manufacturer]

Very toxic to aquatic organisms, may cause long-term adverse effects in the aquatic environment.

Do NOT allow product to come in contact with surface waters or to intertidal areas below the mean high water mark. Do not contaminate water when cleaning equipment or disposing of equipment wash-waters.

Wastes resulting from use of the product must be disposed of on site or at approved waste sites.

DO NOT discharge into sewer or waterways.

Persistence and degradability

 Ingredient
 Persistence: Water/Soil
 Persistence: Air

 dimethyl glutarate
 LOW
 LOW

dimethyl glutarateLOWLOWN-methyl-2-pyrrolidoneLOWLOWd-limoneneHIGHHIGH

Bioaccumulative potential

IngredientBioaccumulationdimethyl glutarateLOW (LogKOW = 0.62)N-methyl-2-pyrrolidoneLOW (BCF = 0.16)d-limoneneHIGH (LogKOW = 4.8275)

Mobility in soil

IngredientMobilitydimethyl glutarateLOW (KOC = 10)N-methyl-2-pyrrolidoneLOW (KOC = 20.94)d-limoneneLOW (KOC = 1324)

13 - DISPOSAL CONSIDERATIONS

Waste treatment methods

Product / Packaging disposal

- Containers may still present a chemical hazard/ danger when empty.
- Return to supplier for reuse/ recycling if possible.

Otherwise:

- ▶ If container cannot be cleaned sufficiently well to ensure that residuals do not remain or if the container cannot be used to store the same product, then puncture containers, to prevent re-use, and bury at an authorised landfill.
- Where possible retain label warnings and SDS and observe all notices pertaining to the product.

Legislation addressing waste disposal requirements may differ by country, state and/ or territory. Each user must refer to laws operating in their area. In some areas, certain wastes must be tracked.

A Hierarchy of Controls seems to be common - the user should investigate:

- Reduction
- Reuse

- Recycling
- Disposal (if all else fails)

This material may be recycled if unused, or if it has not been contaminated so as to make it unsuitable for its intended use. If it has been contaminated, it may be possible to reclaim the product by filtration, distillation or some other means. Shelf-life considerations should also be applied in making decisions of this type. Note that properties of a material may change in use, and recycling or reuse may not always be appropriate.

- ▶ DO NOT allow wash water from cleaning or process equipment to enter drains.
- ▶ It may be necessary to collect all wash water for treatment before disposal.
- In all cases disposal to sewer may be subject to local laws and regulations and these should be considered first.
- ▶ Where in doubt contact the responsible authority.
- Recycle wherever possible.
- Consult manufacturer for recycling options or consult local or regional waste management authority for disposal if no suitable treatment or disposal facility can be identified.
- ▶ Dispose of by: burial in a land-fill specifically licensed to accept chemical and / or pharmaceutical wastes or Incineration in a licensed apparatus (after admixture with suitable combustible material).
- Decontaminate empty containers. Observe all label safeguards until containers are cleaned and destroyed.

14 - TRANSPORT INFORMATION

Labels Required

Marine Pollutant	
HAZCHEM	3Y

Land transport (ADG)

UN number 2319

UN proper shipping name TERPENE HYDROCARBONS, N.O.S. (contains d-limonene)

Transport hazard class(es) Class 3

Subrisk Not Applicable

Packing group III

Environmental hazard Environmentally hazardous

Special precautions for user Special provisions Not Applicable

Limited quantity 5 L

Air transport (ICAO-IATA / DGR)

UN number 2319

UN proper shipping name Terpene hydrocarbons, n.o.s. (contains d-limonene)

Transport hazard class(es) ICAO/IATA Class 3

ICAO/IATA Class 3
ICAO/IATA Subrisk Not Applicable
ERG Code 3L

Packing group

Environmental hazard Environmentally hazardous

Special precautions for user

Special provisions	Not Applicable
Cargo Only Packing ilstructions	366
Cargo Only Maximum Qty/Pack	220 L
Passenger and Cargo Packing Instructions	355
Passenger and Cargo Maximum Qty/Pack	60 L
Passenger and Cargo Limited Quantity Packing Instructions	Y344
Passenger and Cargo Limited Maximum Qty/Pack	10 L

Sea transport (IMDG-Code / GGVSee)

UN number 2319

UN proper shipping name TERPENE HYDROCARBONS, N.O.S. (contains d-limonene)

Transport hazard class(es) IMDG Class 3

IMDG Subrisk Not Applicable

Packing group III

Environmental hazard Marine pollutant

Special precautions for user EMS Number

EMS Number F-E, S-D

Special provisions Not applicable

Limited Quantities 5 L

Transport in bulk according to Annex II of MARPOL and the IBC code

Not applicable

15 - REGULATORY INFORMATION

Safety, health and environmental regulations / legislation specific for the substance or mixture

DIMETHYL GLUTARATE IS FOUND ON THE FOLLOWING REGULATORY LISTS

Australia Inventory of Chemical Substances (AICS)
GESAMP/EHS Composite List - GESAMP Hazard Profiles
IMO IBC Code Chapter 17: Summary of minimum requirements
IMO MARPOL (Annex II) - List of Noxious Liquid Substances Carried in Bulk

N-METHYL-2-PYRROLIDONE IS FOUND ON THE FOLLOWING REGULATORY LISTS

Australia Exposure Standards

Australia Hazardous Chemical Information System (HCIS) - Hazardous Chemicals

Australia Inventory of Chemical Substances (AICS)

Australia Standard for the Uniform Scheduling of Medicines and Poisons (SUSMP) - Schedule 5

Australia Standard for the Uniform Scheduling of Medicines and Poisons (SUSMP) - Schedule 6

GESAMP/EHS Composite List - GESAMP Hazard Profiles

IMO IBC Code Chapter 17: Summary of minimum requirements

IMO MARPOL (Annex II) - List of Noxious Liquid Substances Carried in Bulk

D-LIMONENE IS FOUND ON THE FOLLOWING REGULATORY LISTS

Australia Dangerous Goods Code (ADG Code) - Dangerous Goods List

Australia Dangerous Goods Code (ADG Code) - List of Emergency Action Codes

Australia Hazardous Chemical Information System (HCIS) - Hazardous Chemicals

Australia Inventory of Chemical Substances (AICS)

Australia Standard for the Uniform Scheduling of Medicines and Poisons (SUSMP) - Appendix B (Part 3)

GESAMP/EHS Composite List - GESAMP Hazard Profiles

IMO IBC Code Chapter 17: Summary of minimum requirements

IMO MARPOL (Annex II) - List of Noxious Liquid Substances Carried in Bulk

International Agency for Research on Cancer (IARC) - Agents Classified by the IARC Monographs

International Air Transport Association (IATA) Dangerous Goods Regulations

International Maritime Dangerous Goods Requirements (IMDG Code)

United Nations Recommendations on the Transport of Dangerous Goods Model Regulations

National Inventory Status

National Inventory	Status
Australia – AICS	Yes
Canada – DSL	Yes
Canada – NDSL	No (dimethyl glutarate; d-limonene; N-methyl-2-pyrrolidone)
China – IECSC	Yes
Europe – EINIC / ELINCS / NLP	Yes
Japan – ENCS	Yes
Korea – KECI	Yes
New Zealand – NZloC	Yes
Philippines – PICCS	Yes
USA – TSCA	Yes
Taiwan – TCSI	Yes

Mexico – INSQ	Yes
Vietnam – NCI	Yes
Russia - ARIPS	Yes
Legend	Yes = All CAS declared ingredients are on the inventory
	No = One or more of the CAS listed ingredients are not on the inventory and are not on the inventory and are not exempt from listing (see specific items in brackets)

16 - OTHER RELEVANT INFORMATION

Revision Date 10/10/2024 **Initial Date** 17/05/2018

The SDS is a Hazard Communication tool and should be used to assist in the Risk Assessment. Many factors determine whether the reported Hazards are Risks in the workplace or other settings. Risks may be determined by reference to Exposures Scenarios. Scale of use, frequency of use and current or available engineering controls must be considered.

Definitions and abbreviations

PC—TWA: Permissible Concentration-Time Weighted Average PC—STEL: Permissible Concentration-Short Term Exposure Limit

IARC: International Agency for Research on Cancer

ACGIH: American Conference of Governmental Industrial Hygienists

STEL: Short Term Exposure Limit

TEEL: Temporary Emergency Exposure Limit

IDLH: Immediately Dangerous to Life or Health Concentrations

OSF: Odour Safety Factor

NOAEL: No Observed Adverse Effect Level LOAEL: Lowest Observed Adverse Effect Level

TLV: Threshold Limit Value LOD: Limit Of Detection OTV: Odour Threshold Value BCF: BioConcentration Factors BEI: Biological Exposure Index

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