Azelastine HCI

sc-201096

Material Safety Data Sheet



The Power to Question

Hazard Alert Code Key:

EXTREME

HIGH

MODERATE

LOW

Section 1 - CHEMICAL PRODUCT AND COMPANY IDENTIFICATION

PRODUCT NAME

Azelastine HCI

STATEMENT OF HAZARDOUS NATURE

CONSIDERED A HAZARDOUS SUBSTANCE ACCORDING TO OSHA 29 CFR 1910.1200.

NFPA



SUPPLIER

Santa Cruz Biotechnology, Inc. 2145 Delaware Avenue Santa Cruz, California 95060 800.457.3801 or 831.457.3800 EMERGENCY

ChemWatch

Within the US & Canada: 877-715-9305

Outside the US & Canada: +800 2436 2255

(1-800-CHEMCALL) or call +613 9573 3112

SYNONYMS

C22-H24-Cl-N3-O.HCl, "azelastine HCl", 4-(p-chlorobenzyl)-2-(N-methylperhydroazepin-4-yl)-(2H)-phthalazinone, "1(2H)-phthalazinone, 4-[(4-chlorophenyl)methyl]-2-(hexahydro-1-methyl-", "1H-azepin-4-yl)-, monohydrochloride", "(+/-)-1-(2H)-phthalazinone, 4-[(4-chlorophenyl)methyl]-2-(hexahydro-1-", methyl-1H-azepin-4-yl)-monohydrochloride, (RS)-4-[(4-chlorophenyl)methyl]-2-(1-methylazepan-4-yl)-phthalazin-1-, one, "A 5610", Allergodil, Astelin, Asepro, Azeptin, Optivar, Rhinolast, E0659, "W 2979M", antihistamine

Section 2 - HAZARDS IDENTIFICATION

CHEMWATCH HAZARD RATINGS

		Min	Max
Flammability:	1		
Toxicity:	2		
Body Contact:	2		Min/Nil=0 Low=1 Moderate=2 High=3 Extreme=4
Reactivity:	1		
Chronic:	2		

CANADIAN WHMIS SYMBOLS





EMERGENCY OVERVIEW

RISK

Harmful if swallowed. Possible risk of impaired fertility. Possible risk of harm to the unborn child. Irritating to eyes, respiratory system and skin. Inhalation may produce health damage*. Cumulative effects may result following exposure*. Possible skin sensitiser*. * (limited evidence).

POTENTIAL HEALTH EFFECTS

ACUTE HEALTH EFFECTS

SWALLOWED

- Accidental ingestion of the material may be harmful; animal experiments indicate that ingestion of less than 150 gram may be fatal or may produce serious damage to the health of the individual.
- Antihistamines have side effects such as sedation, stomach upset (nausea, vomiting, diarrhoea or constipation), blurred vision, ringing in the ears, mood changes, irritability, nightmares, loss of appetite, difficulty urinating, dry mouth, chest tightness and tingling, heaviness and weakness in the hands, nervousness, restlessness, irritability, feeling of well-being, disturbed eye movements, difficulties moving the face, "pins and needles", palpitations, faintness, increased heart rate, uncommonly irregular heart rhythms, lung swelling, and disturbed sleep

Treatment may cause side effects within 15 minutes including a dry mouth and throat, blocked nose, wheeze, thick phlegm, fever, sweating, smell disturbances, skin flushing, double vision and dilated pupils.

EYE

■ This material can cause eye irritation and damage in some persons.

- This material can cause inflammation of the skin oncontact in some persons.
- The material may accentuate any pre-existing dermatitis condition.
- Open cuts, abraded or irritated skin should not be exposed to this material.
- Entry into the blood-stream, through, for example, cuts, abrasions 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.

INHALED

■ The material can cause respiratory irritation in some persons.

The body's response to such irritation can cause further lung damage.

- Inhalation of dusts, generated by the material during the course of normal handling, may be damaging to the health of the individual.
- Persons with impaired respiratory function, airway diseases and conditions such as emphysema or chronic bronchitis, may incur further disability if excessive concentrations of particulate are inhaled.

If prior damage to the circulatory or nervous systems has occurred or if kidney damage has been sustained, proper screenings should be conducted on individuals who may be exposed to further risk if handling and use of the material result in excessive exposures.

CHRONIC HEALTH EFFECTS

■ Long-term exposure to respiratory irritants may result in disease of the airways involving difficult breathing and related systemic problems. Ample evidence from experiments exists that there is a suspicionthis material directly reduces fertility.

Based on experience with animal studies, exposure to the material may result in toxic effects to the development of the foetus, at levels which do not cause significant toxic effects to the mother.

Substance accumulation, in the human body, may occur and may cause some concern following repeated or long-term occupational exposure.

There is limited evidence that, skin contact with this product is more likely to cause a sensitisation reaction in some persons compared to the general population.

Long term exposure to high dust concentrations may cause changes in lung function i.e. pneumoconiosis; caused by particles less than 0.5 micron penetrating and remaining in the lung. Prime symptom is breathlessness; lung shadows show on X-ray.

Long-term use of antihistamines can cause sugar in the urine, obstructive jaundice, skin discolouration associated with loss of platelets, early periods, loss of milk production, breast development in males and decreased sex drive. Disturbances in the blood include anaemia, loss of white blood cells and platelets. Allergic reactions include fever, eczema, red wheal and blistering, a measles-like or scarlet-fever like rash, itching, sensitivity to light, swelling of the extremities, throat and other areas, asthma, lupus-like symptoms and anaphylactic shock. Prolonged use may cause difficulty in moving the muscles of the face. Withdrawing the drug generally improves these effects.

Wide area external application of antihistamines can cause various side effects, including sensitisation and eczema.

Section 3 - COMPOSITION / INFORMATION ON INGREDIENTS			
NAME	CAS RN	%	
azelastine hydrochloride	79307-93-0	>98	

Section 4 - FIRST AID MEASURES

SWALLOWED

- IF SWALLOWED, REFER FOR MEDICAL ATTENTION, WHERE POSSIBLE, WITHOUT DELAY.
- For advice, contact a Poisons Information Centre or a doctor.
- · Urgent hospital treatment is likely to be needed.
- In the mean time, qualified first-aid personnel should treat the patient following observation and employing supportive measures as indicated by the patient's condition.

EYE

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

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.

INHALED

- 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.

NOTES TO PHYSICIAN

■ In severe overdose of antihistamines, the stomach should be emptied by aspiration and lavage. Emetics should not be used.

Acute overdosage by adults using the spary form is unlikely to result in clinically significant adverse events, other than increased somnolence.

The systemic bioavailability of azelastine is approximately 40% when administered intranasally. Maximum plasma concentrations (Cmax) are observed within 2-3 hours. The elimination half life, steady-state volume of distribution and plasma clearance are 22 h, 14.5 l/kg and 0.5 l/h/kg respectively (based on intravenous and oral administration data). Azelastine is oxidatively metabolized by the cytochrome P450 family into its active metabolite, desmethylazelastine, and two inactive carboxylic acid metabolites. Approximately 75% of an oral dose is excreted in feces. Pharmacokinetics of orally administered azelastine are not affected by age, gender or hepatic impairment

Section 5 - FIRE FIGHTING MEASURES			
Vapour Pressure (mmHG):	Negligible		
Upper Explosive Limit (%):	Not Available		
Specific Gravity (water=1):	Not Available		
Lower Explosive Limit (%):	Not Available		

EXTINGUISHING MEDIA

- Foam.
- Dry chemical powder.
- BCF (where regulations permit).
- · Carbon dioxide.

FIRE FIGHTING

- Alert Fire Brigade and tell them location and nature of hazard.
- Wear full body protective clothing with breathing apparatus.
- Prevent, by any means available, spillage from entering drains or water course.
- Use fire fighting procedures suitable for surrounding area.

When any large container (including road and rail tankers) is involved in a fire, consider evacuation by 800 metres in all directions.

GENERAL FIRE HAZARDS/HAZARDOUS COMBUSTIBLE PRODUCTS

- Combustible solid which burns but propagates flame with difficulty; it is estimated that most organic dusts are combustible (circa 70%) according to the circumstances under which the combustion process occurs, such materials may cause fires and / or dust explosions.
- Avoid generating dust, particularly clouds of dust in a confined or unventilated space as dusts may form an explosive mixture with air, and any source of ignition, i.e. flame or spark, will cause fire or explosion. Dust clouds generated by the fine grinding of the solid are a particular hazard; accumulations of fine dust (420 micron or less) may burn rapidly and fiercely if ignited particles exceeding this limit will generally not form flammable dust clouds.; once initiated, however, larger particles up to 1400 microns diameter will contribute to the propagation of an explosion.
- In the same way as gases and vapours, dusts in the form of a cloud are only ignitable over a range of concentrations; in principle, the concepts of lower explosive limit (LEL) and upper explosive limit (UEL).are applicable to dust clouds but only the LEL is of practical use; this is because of the inherent difficulty of achieving homogeneous dust clouds at high temperatures (for dusts the LEL is often called

the "Minimum Explosible Concentration", MEC)

 A dust explosion may release of large quantities of gaseous products; this in turn creates a subsequent pressure rise of explosive force capable of damaging plant and buildings and injuring people.

Combustion products include: carbon monoxide (CO), carbon dioxide (CO2), hydrogen chloride, phosgene, nitrogen oxides (NOx), other pyrolysis products typical of burning organic material.

May emit poisonous fumes.

FIRE INCOMPATIBILITY

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

Section 6 - ACCIDENTAL RELEASE MEASURES

MINOR SPILLS

- Clean up waste regularly and abnormal spills immediately.
- Avoid breathing dust and contact with skin and eyes.
- Wear protective clothing, gloves, safety glasses and dust respirator.
- Use dry clean up procedures and avoid generating dust.

MAJOR SPILLS

- Clear area of personnel and move upwind.
- Alert Fire Brigade and tell them location and nature of hazard.
- Wear full body protective clothing with breathing apparatus.
- Prevent, by any means available, spillage from entering drains or water course.

Section 7 - HANDLING AND STORAGE

PROCEDURE FOR HANDLING

- Avoid all personal contact, including inhalation.
- Wear protective clothing when risk of exposure occurs.
- Use in a well-ventilated area.
- Prevent concentration in hollows and sumps.

Empty containers may contain residual dust which has the potential to accumulate following settling. Such dusts may explode in the presence of an appropriate ignition source.

- Do NOT cut, drill, grind or weld such containers.
- In addition ensure such activity is not performed near full, partially empty or empty containers without appropriate workplace safety authorisation or permit.

RECOMMENDED STORAGE METHODS

- Glass container is suitable for laboratory quantities
- Lined metal can, lined metal pail/ can.
- Plastic pail.
- Polyliner drum.
- Packing as recommended by manufacturer.

For low viscosity materials

- Drums and jerricans must be of the non-removable head type.
- Where a can is to be used as an inner package, the can must have a screwed enclosure.

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STORAGE REQUIREMENTS

- Store in original containers.
- Keep containers securely sealed.
- Store in a cool, dry, well-ventilated area.
- Store away from incompatible materials and foodstuff containers.

Section 8 - EXPOSURE CONTROLS / PERSONAL PROTECTION

EXPOSURE CONTROLS

The following materials had no OELs on our records

• azelastine hydrochloride: CAS:79307-93-0 CAS:153408-28-7 CAS:153408-27-6

PERSONAL PROTECTION









RESPIRATOR

Particulate. (AS/NZS 1716 & 1715, EN 143:2000 & 149:2001, ANSI Z88 or national equivalent)

EYE

For laboratory, larger scale or bulk handling or where regular exposure in an occupational setting occurs:

- Chemical goggles
- Face shield. Full face shield may be required for supplementary but never for primary protection of eyes
- Contact lenses may pose a special hazard; soft contact lenses may absorb and concentrate irritants. A written policy document, describing the wearing of lens 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]

HANDS/FEET

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.

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
- Rubber gloves (nitrile or low-protein, powder-free latex). Employees allergic to latex gloves should use nitrile gloves in preference.
- Double gloving should be considered.
- PVC gloves.
- Protective shoe covers. [AS/NZS 2210]

OTHER

- For quantities up to 500 grams a laboratory coat may be suitable.
- For quantities up to 1 kilogram a disposable laboratory coat or coverall of low permeability is recommended. Coveralls should be buttoned at collar and cuffs.
- For quantities over 1 kilogram and manufacturing operations, wear disposable coverall of low permeability and disposable shoe covers.
- For manufacturing operations, air-supplied full body suits may be required for the provision of advanced respiratory protection.

ENGINEERING CONTROLS

■ Enclosed local exhaust ventilation is required at points of dust, fume or vapour generation.

HEPA terminated local exhaust ventilation should be considered at point of generation of dust, fumes or vapours.

Barrier protection or laminar flow cabinets should be considered for laboratory scale handling.

When handling quantities up to 500 gram in either a standard laboratory with general dilution ventilation (e.g.

Section 9 - PHYSICAL AND CHEMICAL PROPERTIES

PHYSICAL PROPERTIES

State	Divided Solid	Molecular Weight	418.4
Melting Range (°F)	437	Viscosity	Not Applicable
Boiling Range (°F)	Not Applicable	Solubility in water (g/L)	Partly Miscible
Flash Point (°F)	Not Available	pH (1% solution)	5.0-5.4
Decomposition Temp (°F)	Not Available	pH (as supplied)	Not Applicable
Autoignition Temp (°F)	Not Available	Vapour Pressure (mmHG)	Negligible
Upper Explosive Limit (%)	Not Available	Specific Gravity (water=1)	Not Available
Lower Explosive Limit (%)	Not Available	Relative Vapour Density (air=1)	Not Applicable
Volatile Component (%vol)	Negligible	Evaporation Rate	Not Applicable

APPEARANCE

Almost odourless powder with bitter taste; mixes with water (13 g/l) Soluble in DMSO, ethanol.

Section 10 - CHEMICAL STABILITY

CONDITIONS CONTRIBUTING TO INSTABILITY

- Presence of incompatible materials.
- Product is considered stable.
- Hazardous polymerisation will not occur.

STORAGE INCOMPATIBILITY

Avoid reaction with oxidising agents

For incompatible materials - refer to Section 7 - Handling and Storage.

Section 11 - TOXICOLOGICAL INFORMATION

azelastine hydrochloride

TOXICITY AND IRRITATION

■ 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.

Section 12 - ECOLOGICAL INFORMATION

This material and its container must be disposed of as hazardous waste.

Ecotoxicity

Ingredient Persistence: Water/Soil Persistence: Air Bioaccumulation Mobility

azelastine hydrochloride No Data Available No Data Available

Section 13 - DISPOSAL CONSIDERATIONS

Disposal Instructions

All waste must be handled in accordance with local, state and federal regulations.

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

Otherwise:

- If container can not 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 MSDS 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. 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. In most instances the supplier of the material should be consulted.

- 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 licenced to accept chemical and / or pharmaceutical wastes or Incineration in a licenced apparatus (after admixture with suitable combustible material)
- Decontaminate empty containers. Observe all label safeguards until containers are cleaned and destroyed.

Section 14 - TRANSPORTATION INFORMATION

DOT:

Symbols:	None	Hazard class or Division:	6.1
Identification Numbers:	UN3249	PG:	III
Label Codes:	6.1	Special provisions:	T1, TP33
Packaging: Exceptions:	153	Packaging: Non-bulk:	213
Packaging: Exceptions:	153	Quantity limitations: Passenger aircraft/rail:	5 kg
Quantity Limitations: Cargo aircraft only:	5 kg	Vessel stowage: Location:	С
Vessel stowage: Other:	40		

Hazardous materials descriptions and proper shipping names:

Medicine, solid, toxic, n.o.s.

Air Transport IATA:

ICAO/IATA Class:	6.1	ICAO/IATA Subrisk:	None
UN/ID Number:	3249	Packing Group:	III
Special provisions:	A3		

Cargo Only

Packing Instructions: 677 Maximum Qty/Pack: 200 kg

Passenger and Cargo Passenger and Cargo

670 Maximum Qty/Pack: Packing Instructions: 100 kg

Passenger and Cargo Passenger and Cargo Limited Quantity **Limited Quantity**

Packing Instructions: Y645 Maximum Qty/Pack: 5 kg

Shipping name: MEDICINE, SOLID, TOXIC, N.O.S. (contains azelastine hydrochloride)

Maritime Transport IMDG:

IMDG Class: 6.1 IMDG Subrisk: None UN Number: 3249 Packing Group: Ш EMS Number: F-A,S-A 221 223 Special provisions:

Limited Quantities: 5 kg

Shipping name: MEDICINE, SOLID, TOXIC, N.O.S. (contains azelastine hydrochloride)

Section 15 - REGULATORY INFORMATION



Section 16 - OTHER INFORMATION

LIMITED EVIDENCE

- Inhalation may produce health damage*.
- Cumulative effects may result following exposure*.
- Possible skin sensitiser*.
- * (limited evidence).

Ingredients with multiple CAS Nos

Ingredient Name CAS

79307-93-0, 153408-28-7, 153408-27-6 azelastine hydrochloride

■ Classification of the preparation and its individual components has drawn on official and authoritative sources as well as independent review by the Chemwatch Classification committee using available literature references. A list of reference resources used to assist the committee may be found at:

www.chemwatch.net/references.

- The (M)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.
- For detailed advice on Personal Protective Equipment, refer to the following U.S. Regulations and Standards:

OSHA Standards - 29 CFR:

1910.132 - Personal Protective Equipment - General requirements

1910.133 - Eye and face protection

1910.134 - Respiratory Protection

1910.136 - Occupational foot protection

1910.138 - Hand Protection

Eye and face protection - ANSI Z87.1

Foot protection - ANSI Z41

Respirators must be NIOSH approved.

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Issue Date: Sep-8-2011 Print Date:Mar-23-2012