Methylprednisolone

sc-205749

Material Safety Data Sheet

Hazard Alert Code Key:

- **EXTREME**
- **HIGH**
- **MODERATE**
- **LOW**

Section 1 - CHEMICAL PRODUCT AND COMPANY IDENTIFICATION

**PRODUCT NAME**
Methylprednisolone

**STATEMENT OF HAZARDOUS NATURE**
Considered a hazardous substance according to OSHA 29 CFR 1910.1200.

**NFPA**

**SUPPLIER**
Company: Santa Cruz Biotechnology, Inc.
Address:
2145 Delaware Ave
Santa Cruz, CA 95060
Telephone: 800.457.3801 or 831.457.3800
Emergency Tel: CHEMWATCH: From within the US and Canada: 877-715-9305
Emergency Tel: From outside the US and Canada: +800 2436 2255 (1-800-CHEMCALL) or call +613 9573 3112

**PRODUCT USE**
Methylprednisolone is a synthetic glucocorticoid used in the treatment of inflammatory disease and treatment of certain allergic disorders. Not useful in corticosteroid replacement therapies because of its lack of sodium-retaining properties. Aqueous solutions of the acetate are injected directly into joints and soft tissues in the treatment of rheumatoid arthritis, osteoarthritis, bursitis and similar conditions. Applied topically in the treatment of skin disorders.

**SYNONYMS**

Section 2 - HAZARDS IDENTIFICATION

**CANADIAN WHMIS SYMBOLS**

**EMERGENCY OVERVIEW**

**RISK**

**POTENTIAL HEALTH EFFECTS**
ACUTE HEALTH EFFECTS

SWALLOWED

- Accidental ingestion of the material may be damaging to the health of the individual.
- The corticosteroids cause alterations in metabolism of fats, proteins and carbohydrates, and affect a range of organs in the body including the heart, muscle and kidneys. Blood chemistry may change and there is decreased activity and shrinkage of the thymus gland, adrenal glands, spleen and lymph nodes. The liver becomes enlarged, thyroid activity decreases, and mineral is drawn away. Muscle wasting occurs, the immune system is adversely affected causing the person to be more susceptible to infections, especially of the eye. Allergies can occur. Wound healing is slowed. In large doses, corticosteroids cause a severe chemical imbalance in the body’s minerals, leading to salt and water being retained in the body, causing swelling and high blood pressure. This is more severe when natural rather than synthetic drugs are used. Blood glucose is raised, and in extreme cases the heart may fail. The characteristic “moon-face” appearance may be seen, with weakness of the muscles and bones, high blood pressure, cessation of periods, profuse sweating, mental disturbance, flushing, a humped back, hairiness, and obesity of the trunk with wasting of the arms and limbs (“lemon with matchsticks” shape). These generally improve when treatment is stopped. High pressure in the head, an inflamed pancreas and mental disturbance become more common, and bone tissue may die. The blood also condenses more easily leading to an increased risk of clots. Psychiatric changes include mood swings, personality changes, severe depression and psychosis (hallucinations and delusions). One should be aware of an increased susceptibility to a wide range of infections which may be masked by the ability of corticosteroids to reduce pain, inflammation and fever. Those with ulcers, gastrointestinal disease, kidney impairment, hypothyroidism, high blood pressure, liver damage and osteoporosis may be especially susceptible to the adverse effects of corticosteroids. Prolonged exposure can cause cataracts and eye nerve damage, leading to blindness.

EYE

- If applied to the eyes, this material causes severe eye damage.
- When applied to the eye, corticosteroids may produce ulceration of the cornea, raised eye pressure and reduced vision; internal administration can cause cataracts.

SKIN

- The material is not thought to be a skin irritant (as classified using animal models). Abrasive damage however, may result from prolonged exposures. Good hygiene practice requires that exposure be kept to a minimum and that suitable gloves be used in an occupational setting.
- Skin contact with the material may damage the health of the individual; systemic effects may result following absorption.
- 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.
- Topically applied corticosteroids may be absorbed in sufficient quantity to produce systemic effects. Application to the skin may result in collagen loss and subcutaneous atrophy and local bleaching of deeply pigmented skin. Systemic absorption may produce adrenal suppression and collapse.

INHALED

- The material is not thought to produce respiratory irritation (as classified using animal models). Nevertheless inhalation of dusts, or fume, especially for prolonged periods, may produce respiratory discomfort and occasionally, distress.
- 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.
- Systemic absorption of aerosols containing corticosteroids may produce adrenal insufficiency and collapse.

CHRONIC HEALTH EFFECTS

- Limited evidence suggests that repeated or long-term occupational exposure may produce cumulative health effects involving organs or biochemical systems. There is limited evidence that, skin contact with this product is more likely to cause a sensitization 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. Chronic exposure to glucocorticoids can lead to changes in hormone production, a characteristic "moon face" appearance and a "lemon with matchsticks" fat distribution (central obesity with wasting of limbs), susceptibility to infections, osteoporosis, cataracts, glaucoma, mental disturbance, high blood sugar and sugar in the urine. There may be muscular weakness and fatigue, acne, period disturbances in women and peptic ulcers. Growth retardation can occur in children and birth defects are possible. Corticosteroids appear in human milk and some may stunt the growth of infants.

Section 3 - COMPOSITION / INFORMATION ON INGREDIENTS

HAZARD RATINGS

<table>
<thead>
<tr>
<th></th>
<th>Min</th>
<th>Max</th>
</tr>
</thead>
<tbody>
<tr>
<td>Flammability:</td>
<td>1</td>
<td></td>
</tr>
<tr>
<td>Toxicity:</td>
<td>2</td>
<td></td>
</tr>
<tr>
<td>Body Contact:</td>
<td>3</td>
<td></td>
</tr>
<tr>
<td>Reactivity:</td>
<td>1</td>
<td></td>
</tr>
<tr>
<td>Chronic:</td>
<td>3</td>
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</tbody>
</table>

NAME: methylprednisolone
CAS RN: 83-43-2
%: >95

Section 4 - FIRST AID MEASURES

SWALLOWED
• 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.

**EYE**
• If this product comes in contact with the eyes:
  • Immediately hold eyelids apart and flush the eye continuously with 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.
  • Continue flushing until advised to stop by the Poisons Information Center or a doctor, or for at least 15 minutes.
  • Transport to hospital or doctor without delay.
  • 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.
• Transport to hospital, or doctor.

**NOTES TO PHYSICIAN**
• The adverse effects of corticosteroids are almost always due to their use in excess of physiological requirements. Symptomatic treatment is called for. Where possible the dose should be withdrawn or reduced. Acute renal insufficiency should be treated with intravenous hydrocortisone sodium succinate with infusions of 0.9% dextrose. MARTINDALE, The Extra Pharmacopoeia, 29th Ed. Patients or individuals exposed regularly in an occupational setting, should be evaluated periodically for evidence of HPA axis suppression. The evaluation may be performed by using the ACTH stimulation, A.M. plasma cortisol and urinary free cortisol tests. If HPA axis suppression is confirmed the individual should be removed from exposure. Recovery of the HPA axis function is generally prompt upon exposure cessation. Infrequently, signs and symptoms of glucocorticosteroid insufficiency may occur, requiring supplemental systemic corticosteroids.

### Section 5 - FIRE FIGHTING MEASURES

<table>
<thead>
<tr>
<th>Property</th>
<th>Value</th>
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<tbody>
<tr>
<td>Vapour Pressure (mmHG)</td>
<td>Negligible</td>
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<tr>
<td>Upper Explosive Limit (%)</td>
<td>Not available</td>
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<tr>
<td>Specific Gravity (water=1)</td>
<td>Not available</td>
</tr>
<tr>
<td>Lower Explosive Limit (%)</td>
<td>Not available</td>
</tr>
</tbody>
</table>

**Extinguishing Media**
- Foam.
- Dry chemical powder.
- BCF (where regulations permit).
- Carbon dioxide.
- Water spray or fog - Large fires only.

**Fire Fighting**
- Alert Emergency Responders and tell them location and nature of hazard.
- Wear breathing apparatus plus protective gloves.
- Prevent, by any means available, spillage from entering drains or water course.
- Use water delivered as a fine spray to control fire and cool adjacent area.
- 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.
- Equipment should be thoroughly decontaminated after use.

**General Fire Hazards/Hazardous Combustible Products**
- Combustible solid which burns but propagates flame with difficulty.
- 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 may burn rapidly and fiercely if ignited.
- Dry dust can be charged electrostatically by turbulence, pneumatic transport, pouring, in exhaust ducts and during transport.
- Build-up of electrostatic charge may be prevented by bonding and grounding.
- Powder handling equipment such as dust collectors, dryers and mills may require additional protection measures such as explosion venting.

Combustion products include: carbon monoxide (CO), carbon dioxide (CO2), other pyrolysis products typical of burning organic
material. May emit poisonous fumes. May emit corrosive fumes.

FIRE INCOMPATIBILITY

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

PERSONAL PROTECTION

Glasses:
- Chemical goggles.

Gloves:

Respirator:
- Particulate

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.
- Vacuum up or sweep up. NOTE: Vacuum cleaner must be fitted with an exhaust micro filter (HEPA type) (consider explosion-proof machines designed to be grounded during storage and use).
- Dampen with water to prevent dusting before sweeping.
- Place in suitable containers for disposal.

MAJOR SPILLS

- Moderate hazard.
- CAUTION: Advise personnel in area.
- Alert Emergency Responders and tell them location and nature of hazard.
- Control personal contact by wearing protective clothing.
- Prevent, by any means available, spillage from entering drains or water courses.
- Recover product wherever possible.
- IF DRY: Use dry clean up procedures and avoid generating dust. Collect residues and place in sealed plastic bags or other containers for disposal. IF WET: Vacuum/shovel up and place in labelled containers for disposal.
- ALWAYS: Wash area down with large amounts of water and prevent runoff into drains.
- If contamination of drains or waterways occurs, advise emergency services.

ACUTE EXPOSURE GUIDELINE LEVELS (AEGL) (in ppm)

AEGL 1: The airborne concentration of a substance above which it is predicted that the general population, including susceptible individuals, could experience notable discomfort, irritation, or certain asymptomatic nonsensory effects. However, the effects are not disabling and are transient and reversible upon cessation of exposure.

AEGL 2: The airborne concentration of a substance above which it is predicted that the general population, including susceptible individuals, could experience irreversible or other serious, long-lasting adverse health effects or an impaired ability to escape.

AEGL 3: The airborne concentration of a substance above which it is predicted that the general population, including susceptible individuals, could experience life-threatening health effects or death.

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.
- DO NOT enter confined spaces until atmosphere has been checked.
- DO NOT allow material to contact humans, exposed food or food utensils.
- 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.
- Launder contaminated clothing before re-use.
- Use good occupational work practice.
- Observe manufacturer's storing and handling recommendations.
- Atmosphere should be regularly checked against established exposure standards to ensure safe working conditions are maintained.
- 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.
■ Polyethylene or polypropylene container.
■ Check all containers are clearly labelled and free from leaks.

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.
■ Protect containers against physical damage and check regularly for leaks.
■ Observe manufacturer’s storing and handling recommendations.

SAFE STORAGE WITH OTHER CLASSIFIED CHEMICALS

X: Must not be stored together
O: May be stored together with specific precautions
+: May be stored together

Section 8 - EXPOSURE CONTROLS / PERSONAL PROTECTION

EXPOSURE CONTROLS

<table>
<thead>
<tr>
<th>Source</th>
<th>Material</th>
<th>TWA ppm</th>
<th>TWA mg/m³</th>
<th>STEL ppm</th>
<th>STEL mg/m³</th>
<th>Peak ppm</th>
<th>Peak mg/m³</th>
<th>TWA F/CC</th>
<th>Notes</th>
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<tr>
<td>US - Oregon Permissible Exposure Limits (Z3)</td>
<td>methylprednisolone (Inert or Nuisance Dust: (d) Total dust)</td>
<td>10</td>
<td></td>
<td></td>
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<tr>
<td>US OSHA Permissible Exposure Levels (PELs) - Table Z3</td>
<td>methylprednisolone (Inert or Nuisance Dust: (d) Respirable fraction)</td>
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<td>US OSHA Permissible Exposure Levels (PELs) - Table Z3</td>
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<td>US - Hawaii Air Contaminant Limits</td>
<td>methylprednisolone (Particulates not other wise regulated - Total dust)</td>
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<td></td>
<td></td>
</tr>
<tr>
<td>US - Hawaii Air Contaminant Limits</td>
<td>methylprednisolone (Particulates not other wise regulated - Respirable fraction)</td>
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<tr>
<td>US - Oregon Permissible Exposure Limits (Z3)</td>
<td>methylprednisolone (Inert or Nuisance Dust: (d) Respirable fraction)</td>
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<td>US - Michigan Exposure Limits for Air Contaminants</td>
<td>methylprednisolone (Particulates not otherwise regulated, Respirable dust)</td>
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<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

MATERIAL DATA
METHYL PREDNISOLONE:
■ CEL TWA: 0.02 mg/m³
(compare Merck, Sharp and Dohme recommendation for dexamethasone)All corticosteroids have numerous and varied pharmacological actions. In humans, single dose or short term (several days) use is virtually without harmful effects. However prolonged therapeutic use of cortico- steroids may result in suppression of the pituitary function. The daily threshold dose for this effect is approximately 0.5 mg for a 50 kg individual. Therefore typical exposure limits of about 0.02 mg/m³ have been calculated from the threshold dose. This is thought to provide about a two-fold safety factor.

Airborne particulate or vapor must be kept to levels as low as is practicably achievable given access to modern engineering controls and monitoring hardware. Biologically active compounds may produce idiosyncratic effects which are entirely unpredictable on the basis of literature searches and prior clinical experience (both recent and past).

PERSONAL PROTECTION
Consult your EHS staff for recommendations

**EYE**

- When handling very small quantities of the material eye protection may not be required.
- 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]

**HANDS/FEET**

- **NOTE:** The material may produce skin sensitization in predisposed individuals. Care must be taken, when removing gloves and other protective equipment, to avoid all possible skin contact.

Suitability and durability of glove type is dependent on usage. Important factors in the selection of gloves include: such as:
  - 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).
- 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) 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) is recommended.
- Contaminated gloves should be replaced.

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.
- 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.
- Head covering.

Experience indicates that the following polymers are suitable as glove materials for protection against undissolved, dry solids, where abrasive particles are not present.
  - polychloroprene
  - nitrile rubber
  - butyl rubber
  - fluororubber
  - polyvinyl chloride

Gloves should be examined for wear and/ or degradation constantly.

**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.
- Eye wash unit.
- Ensure there is ready access to an emergency shower.
- For Emergencies: Vinyl suit

- Respirators may be necessary when engineering and administrative controls do not adequately prevent exposures.
- The decision to use respiratory protection should be based on professional judgment that takes into account toxicity information, exposure measurement data, and frequency and likelihood of the worker's exposure - ensure users are not subject to high thermal loads which may result in heat stress or distress due to personal protective equipment (powered, positive flow, full face apparatus may be an option).
- Published occupational exposure limits, where they exist, will assist in determining the adequacy of the selected respiratory protection. These may be government mandated or vendor recommended.
- Certified respirators will be useful for protecting workers from inhalation of particulates when properly selected and fit tested as part of a complete respiratory protection program.
- Use approved positive flow mask if significant quantities of dust becomes airborne.
- Try to avoid creating dust conditions.

**RESPIRATOR**

<table>
<thead>
<tr>
<th>Protection Factor</th>
<th>Half-Face Respirator</th>
<th>Full-Face Respirator</th>
<th>Powered Air Respirator</th>
</tr>
</thead>
<tbody>
<tr>
<td>10 x PEL</td>
<td>P1</td>
<td>-</td>
<td>PAPR-P1</td>
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**PHYSICAL AND CHEMICAL PROPERTIES**

**PHYSICAL PROPERTIES**

<table>
<thead>
<tr>
<th>Property</th>
<th>Value</th>
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<tbody>
<tr>
<td>Solid</td>
<td>Divided solid</td>
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<tr>
<td>Does not mix with water.</td>
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</tr>
<tr>
<td>Melting Range (°F)</td>
<td>464- 469.4 (decomp)</td>
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<tr>
<td>Boiling Range (°F)</td>
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<tr>
<td>Flash Point (°F)</td>
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<td>Decomposition Temp (°F)</td>
<td>464</td>
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<tr>
<td>Autoignition Temp (°F)</td>
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<tr>
<td>Upper Explosive Limit (%)</td>
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<table>
<thead>
<tr>
<th>Property</th>
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<tbody>
<tr>
<td>Molecular Weight</td>
<td>374.5</td>
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<tr>
<td>Viscosity</td>
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<tr>
<td>Solubility in water (g/L)</td>
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<td>pH (1% solution)</td>
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<tr>
<td>pH (as supplied)</td>
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<tr>
<td>Vapour Pressure (mmHg)</td>
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<tr>
<td>Specific Gravity (water=1)</td>
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</tr>
</tbody>
</table>

**Chemical Properties**

- Does not mix with water.
- Solid.

**ENGINEERING CONTROLS**

- Enclosed local exhaust ventilation is required at points of dust, fume or vapor generation.
- HEPA terminated local exhaust ventilation should be considered at point of generation of dust, fumes or vapors.
- Barrier protection or laminar flow cabinets should be considered for laboratory scale handling.
- The need for respiratory protection should also be assessed where incidental or accidental exposure is anticipated: Depending on levels of contamination, PAPR, full face air purifying devices with P2 or P3 filters or air supplied respirators should be evaluated.
- Fume-hoods and other open-face containment devices are acceptable when face velocities of at least 1 m/s (200 feet/minute) are achieved. Partitions, barriers, and other partial containment technologies are required to prevent migration of the material to uncontrolled areas. For non-routine emergencies maximum local and general exhaust are necessary. 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, vapors, etc. evaporating from tank (in still air): 0.25-0.5 m/s (50-100 ft/min.)
  - aerosols, fumes from pouring operations, intermittent container filling, low speed conveyor transfers (released at low velocity into zone of active generation): 0.5-1 m/s (100-200 ft/min.)
  - direct spray, drum filling, conveyor loading, crusher dusts, gas discharge (active generation into zone of rapid air motion): 1-2.5 m/s (200-500 ft/min.)

Within each range the appropriate value depends on:

- 1: Room air currents minimal or favourable to capture
- 2: Contaminants of high toxicity
- 3: Intermittent, low production.
- 4: Large hood or large air mass in motion

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 1-2.5 m/s (200-500 ft/min.) for extraction of gases discharged 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.
**Lower Explosive Limit (%)**
Not available

**Relative Vapor Density (air=1)**
Not Applicable

**Volatile Component (%vol)**
Negligible

**Evaporation Rate**
Not Applicable

### APPEARANCE
White crystalline powder, tasteless at first but with a persistent bitter after-taste; does not mix with water. Solubility in dehydrated alcohol (1:100), chloroform (1:530), ether (1:800).

### Section 10 - CHEMICAL STABILITY

#### CONDITIONS CONTRIBUTING TO INSTABILITY
- Presence of incompatible materials.
- Product is considered stable.
- Hazardous polymerization will not occur.

#### STORAGE INCOMPATIBILITY
- Avoid reaction with oxidizing agents.

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

### Section 11 - TOXICOLOGICAL INFORMATION

**methylprednisolone**

#### TOXICITY AND IRRITATION
**TOXICITY**
**IRRITATION**
- Oral (rat) LD50: >4000 mg/kg
- Nil Reported
- Intraperitoneal (mouse) LD50: 2292 mg/kg

These "dusts" have little adverse effect on the lungs and do not produce toxic effects or organic disease. Although there is no dust which does not evoke some cellular response at sufficiently high concentrations, the cellular response caused by P.N.O.C.s has the following characteristics:
- the architecture of the air spaces remain intact,
- scar tissue (collagen) is not synthesised to any degree,
- tissue reaction is potentially reversible.

Extensive concentrations of P.N.O.C.s may:
- seriously reduce visibility,
- cause unpleasant deposits in the eyes, ears and nasal passages,
- contribute to skin or mucous membrane injury by chemical or mechanical action, per se, or by the rigorous skin cleansing procedures necessary for their removal. [ACGIH]

This limit does not apply:
- to brief exposures to higher concentrations
- nor does it apply to those substances that may cause physiological impairment at lower concentrations but for which a TLV has as yet to be determined.

This exposure standard applies to particles which
- are insoluble or poorly soluble* in water or, preferably, in aqueous lung fluid (if data is available) and
- have a low toxicity (i.e., are not cytotoxic, genotoxic, or otherwise chemically reactive with lung tissue, and do not emit ionizing radiation, cause immune sensitization, or cause toxic effects other than by inflammation or by a mechanism of lung overload)

Exposure to the material for prolonged periods may cause physical defects in the developing embryo (teratogenesis).

#### CARCINOGEN

Progestogen-only contraceptives

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

Group 2B

### Section 12 - ECOLOGICAL INFORMATION

Refer to data for ingredients, which follows:
METHYLPREDNISOLONE:
- DO NOT discharge into sewer or waterways.

Ecotoxicity

**Persistence:**
Section 13 - DISPOSAL CONSIDERATIONS

Disposal Instructions
All waste must be handled in accordance with local, state and federal regulations.
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.
DO NOT allow wash water from cleaning equipment to enter drains. Collect all wash water for treatment before disposal.
- Recycle wherever possible.
- Consult manufacturer for recycling options or consult Waste Management Authority for disposal if no suitable treatment or disposal facility can be identified.
- Dispose of by: Burial in a licensed land-fill 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.

Section 14 - TRANSPORTATION INFORMATION

NOT REGULATED FOR TRANSPORT OF DANGEROUS GOODS: DOT, IATA, IMDG

Section 15 - REGULATORY INFORMATION

methylprednisolone (CAS: 83-43-2) is found on the following regulatory lists;
*Canada Non-Domestic Substances List (NDSL)*; "US Toxic Substances Control Act (TSCA) - Inventory"

Section 16 - OTHER INFORMATION

LIMITED EVIDENCE
- Inhalation skin contact and/or ingestion may produce health damage*. 
- Cumulative effects may result following exposure*.
- Eye contact may produce serious damage*.
- Possible skin sensitizer*.
* (limited evidence).

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Classification of the mixture 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. Risks may be determined by reference to Exposures Scenarios. Scale of use, frequency of use and current or available engineering controls must be considered.

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