

Sulfapyridine

sc-220165



The Power to Question

Material Safety Data Sheet

Hazard Alert Code
Key:

EXTREME

HIGH

MODERATE

LOW

Section 1 - CHEMICAL PRODUCT AND COMPANY IDENTIFICATION

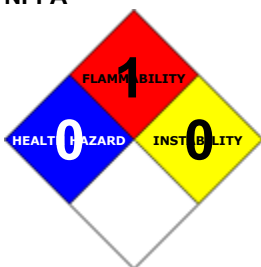
PRODUCT NAME

Sulfapyridine

STATEMENT OF HAZARDOUS NATURE

CONSIDERED A HAZARDOUS SUBSTANCE ACCORDING TO OSHA 29 CFR 1910.1200.

NFPA



SUPPLIER

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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

C11-H11-N3-O2-S, "benzenesulfonamide, 4-amino-N-(2-pyridinyl)-", 2-(p-aminobenzenesulphonamido)pyridine, N-2-pyridylsulfanilamide, "N(sup 1)-2-pyridylsulfanilamide", "sulfanilamide, N(sup 1)-2-pyridyl-", 2-sulfanilamidopyridine, "2-sulfanilyl aminopyridine", Adiplon, Coccoclase, Dagenan, Eubasin, Eubasinum, Haptocil, M+B-693, Piridazol, Plurazol, Relbapiridina, Ronin, Septipulmon, Sulfidine, Streptosilpyridine, Sulphapyridine, Thioseptal, Trianon, "antibacterial/ antibiotic", "suppressant (dermatitis herpetiformis)"

Section 2 - HAZARDS IDENTIFICATION

CHEMWATCH HAZARD RATINGS

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

CANADIAN WHMIS SYMBOLS



EMERGENCY OVERVIEW

RISK

Possible risk of impaired fertility.

Toxic to soil organisms.

Ingestion may produce health damage*.

Cumulative effects may result following exposure*.

May produce discomfort of the eyes*.

Limited evidence of a carcinogenic effect*.

May possibly be harmful to the foetus/embryo*.

Exposure may produce irreversible effects*.

* (limited evidence).

POTENTIAL HEALTH EFFECTS

ACUTE HEALTH EFFECTS

SWALLOWED

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

■ Limited evidence exists that this substance may cause irreversible mutations (though not lethal) even following a single exposure.

■ Sulfonamides and their derivatives can cause extensive kidney damage, and destroy red blood cells.

Overdose may cause an accumulation of acid in the blood or a diminished blood sugar level with confusion and coma resulting.

EYE

■ There is some evidence to suggest that this material can cause eye irritation and damage in some persons.

■ Eye drops with sulfonamides can cause local irritation, sensations of burning and stinging, blurred vision and loss of depth perception.

The conjunctiva and cornea may become inflamed, and the cornea and lens may become clouded.

SKIN

■ The material is not thought to produce adverse health effects or skin irritation following contact (as classified by EC Directives using animal models).

Nevertheless, good hygiene practice requires that exposure be kept to a minimum and that suitable gloves be used in an occupational setting.

■ 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 is not thought to produce either adverse health effects or irritation of the respiratory tract following inhalation (as classified by EC Directives using animal models).

Nevertheless, adverse systemic effects have been produced following exposure of animals by at least one other route and good hygiene practice requires that exposure be kept to a minimum and that suitable control measures be used in an occupational setting.

■ 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.

■ Limited evidence exists that this substance may cause irreversible mutations (though not lethal) even following a single exposure.

CHRONIC HEALTH EFFECTS

■ Ample evidence from experiments exists that there is a suspicion this material directly reduces fertility.

There has been some concern that this material can cause cancer or mutations but there is not enough data to make an assessment.

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

Based on experience with animal studies, there is a possibility that 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.

Based on laboratory and animal testing, exposure to the material may result in irreversible effects and mutations in humans.

Prolonged oral treatment with sulfonamides has caused nausea, vomiting, diarrhoea, abdominal pain, loss of appetite, inflammation of the mouth cavity, impaired folic acid absorption, exacerbation of porphyria, acidosis, liver damage with impaired blood clotting, jaundice and inflammation of the pancreas. Effects on the kidney include blood and crystals in the urine, painful and frequent urination or lack of urine with nitrogen retention. Nervous system symptoms include headache, drowsiness, trouble sleeping, dizziness, ringing in the ears, hearing loss, depression, hallucinations, inco-ordination, paralysis of muscles, numbness in the extremities, spinal cord damage and inflammation, convulsions and unconsciousness. Effects on the blood include a change in blood cell distribution with loss of white blood cells and platelets, and anaemia, which Africans seem to be more prone to developing than Europeans. Cyanosis can occur owing to complexes being formed by haemoglobin. Eye effects include inflamed cornea and conjunctiva with eyelid swelling and in severe cases, fear of the light. Allergies and cross-sensitivity is common, and can cause itches, wheals and sometimes a severe red rash with blisters that is often fatal. This class of drugs can scar the cornea and conjunctiva, cause swelling around the eyes, painful and inflamed joints, reduced sperm counts, pneumonia, fever, chills, hair loss, inflammation of vessels, lupus, reduced lung function, infertility,

hypothyroidism and goitre, and increased urinary output. More seriously, the lungs may become permanently scarred and there may be irreversible damage to the nervous system and muscles. Inflammation of the skin has occurred after the drug is ingested and has travelled through the bloodstream. Skin effects often occur when there has been exposure in conjunction with UV light. Clothed areas are initially less likely to be affected but may be in later stages. Rarely there may be persistence of inflammation on light contact even after the drug has been removed.

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.

Data from experimental studies indicate that pyridines represent a potential cause of cancer in man. They have also been shown to cross the placental barrier in rats and cause premature delivery, miscarriages and stillbirths. PAs are passed through breast milk. Pyridine has been implicated in the formation of liver cancers.

Exposure to small quantities may induce hypersensitivity reactions characterised by acute bronchospasm, hives (urticaria), deep dermal wheals (angioneurotic oedema), running nose (rhinitis) and blurred vision. Anaphylactic shock and skin rash (non-thrombocytopenic purpura) may occur. An individual may be predisposed to such anti-body mediated reaction if other chemical agents have caused prior sensitisation (cross-sensitivity).

Sulfapyridine has caused oligospermia and infertility in men.

Section 3 - COMPOSITION / INFORMATION ON INGREDIENTS

NAME	CAS RN	%
sulfapyridine	144-83-2	>98

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.

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 or hair contact occurs:

- Flush skin and hair with running water (and soap if available).
- Seek medical attention in event of irritation.

INHALED

- If dust is inhaled, remove from contaminated area.
- Encourage patient to blow nose to ensure clear passage of breathing.
- If irritation or discomfort persists seek medical attention.

NOTES TO PHYSICIAN

■ In cases of recent sulfonamide overdose the stomach should be emptied by aspiration and lavage. If kidney function is adequate, a saline purgative, such as sodium sulfate, 30 g in 250 ml water, may be given to promote peristalsis and elimination of sulfonamide in the urine may be assisted by giving alkalies, such as sodium bicarbonate and increasing fluid intake.

Persons developing hypersensitivity reactions must receive immediate medical attention. If breathing give artificial respiration. If breathing is difficult give oxygen. Treatment of overdose is primarily symptomatic, but if large amounts have been ingested, the following may be attempted. Induce vomiting or gastric lavage to empty stomach.

Activated charcoal to reduce further absorption.

Sodium bicarbonate may be given to raise the pH of the urine to reduce the danger of crystallisation.

US Pharmacopeial Convention, Inc MSDS quoting Gosselin et al, 5th Ed.

Note: pH adjustment may not be appropriate (see Acute, Swallowed) Irregular absorption occurs in the gastrointestinal tract; the material is bound to plasma protein (10-45%) and penetrates the cerebrospinal fluid. Up to 75% of sulfapyridine in the blood occurs as the acetyl derivative; excretion rates are irregular.

Section 5 - FIRE FIGHTING MEASURES

Vapour Pressure (mmHG):	Negligible
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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 breathing apparatus plus protective gloves.
- Prevent, by any means available, spillage from entering drains or water courses.
- Use water delivered as a fine spray to control fire and cool adjacent area.

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), nitrogen oxides (NO_x), sulfur oxides (SO_x), other pyrolysis products typical of burning organic material.

May emit poisonous fumes.

May emit corrosive 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

Environmental hazard - contain spillage.

- 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

Environmental hazard - contain spillage.

Moderate hazard.

- CAUTION: Advise personnel in area.
- Alert Emergency Services 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.

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
- 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.

Section 8 - EXPOSURE CONTROLS / PERSONAL PROTECTION

EXPOSURE CONTROLS

The following materials had no OELs on our records

- sulfapyridine: CAS:144-83-2

PERSONAL PROTECTION



RESPIRATOR

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

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]. [AS/NZS 1336 or national equivalent]

HANDS/FEET

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]

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
- fluorocautchouc

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. 6-12 air changes per hour) is preferred.

Section 9 - PHYSICAL AND CHEMICAL PROPERTIES

PHYSICAL PROPERTIES

Solid.

Does not mix with water.

State	Divided solid	Molecular Weight	249.29
Melting Range (°F)	374- 379	Viscosity	Not Applicable
Boiling Range (°F)	Not available	Solubility in water (g/L)	Partly miscible
Flash Point (°F)	Not available	pH (1% solution)	Not applicable
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

Odorless crystalline powder or granules with slight bitter taste; does not mix well with water (1:3500; 1:100 in boiling water). Solubilities: alcohol 1:400, acetone 1:65, mineral acids and aqueous solutions of alkali hydroxides, soluble. Slowly darkens on exposure to light.

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

sulfapyridine

TOXICITY AND IRRITATION

■ Limited evidence of a carcinogenic effect*.

NOTE: Substance has been shown to be mutagenic in at least one assay, or belongs to a family of chemicals producing damage or change to cellular DNA.

Section 12 - ECOLOGICAL INFORMATION

Toxic to soil organisms.

Ecotoxicity

Ingredient	Persistence: Water/Soil	Persistence: Air	Bioaccumulation	Mobility
sulfapyridine	HIGH	No Data Available	LOW	MED

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. 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

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

Section 15 - REGULATORY INFORMATION



sulfapyridine (CAS: 144-83-2) is found on the following regulatory lists;

"Canada - Alberta Ambient Air Quality Guidelines", "Canada - Alberta Ambient Air Quality Objectives", "Canada - British Columbia Occupational Exposure Limits", "Canada - Ontario Occupational Exposure Limits", "Canada - Quebec Permissible Exposure Values for Airborne Contaminants (English)", "Canada List of Prohibited and Restricted Cosmetic Ingredients (The Cosmetic Ingredient ""Hotlist""")", "Canada National Pollutant Release Inventory (NPRI)", "Canada Non-Domestic Substances List (NDSL)", "US - California Permissible Exposure Limits for Chemical Contaminants", "US - Michigan Exposure Limits for Air Contaminants", "US - Oregon Permissible Exposure Limits (Z-1)", "US - Tennessee Occupational Exposure Limits - Limits For Air Contaminants", "US - Wyoming Toxic and Hazardous Substances Table Z1 Limits for Air Contaminants", "US Clean Air Act (CAA) National Ambient Air Quality Standards (NAAQS)", "US Toxic Substances Control Act (TSCA) - Chemical Substance Inventory"

Section 16 - OTHER INFORMATION

LIMITED EVIDENCE

- Ingestion may produce health damage*.
- Cumulative effects may result following exposure*.
- May produce discomfort of the eyes*.
- Limited evidence of a carcinogenic effect*.
- May possibly be harmful to the foetus/embryo*.
- Exposure may produce irreversible effects*.

* (limited evidence).

Denmark Advisory list for selfclassification of dangerous substances

Substance	CAS	Suggested codes
sulfapyridine	144- 83- 2	R52/53

■ 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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