

1-Bromo-3,5-dimethyladamantane

sc-253909



The Power is Question

Material Safety Data Sheet

Hazard Alert Code Key: **EXTREME** **HIGH** **MODERATE** **LOW**

Section 1 - CHEMICAL PRODUCT AND COMPANY IDENTIFICATION

PRODUCT NAME

1-Bromo-3,5-dimethyladamantane

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

C12-H19-Br, "adamantane, 3, 5-dimethyl-1-bromo-"

Section 2 - HAZARDS IDENTIFICATION

CHEMWATCH HAZARD RATINGS

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

CANADIAN WHMIS SYMBOLS



EMERGENCY OVERVIEW

RISK

Harmful to aquatic organisms.

POTENTIAL HEALTH EFFECTS

ACUTE HEALTH EFFECTS

SWALLOWED

■ The material has NOT been classified as "harmful by ingestion".
This is because of the lack of corroborating animal or human evidence.

EYE

■ Although the liquid is not thought to be an irritant, direct contact with the eye may produce transient discomfort characterized by tearing or conjunctival redness (as with windburn).

SKIN

■ The liquid may be miscible with fats or oils and may degrease the skin, producing a skin reaction described as non-allergic contact dermatitis.

The material is unlikely to produce an irritant dermatitis as described in EC Directives .

■ 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 adverse health effects or irritation of the respiratory tract (as classified using animal models).

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

■ Inhalation hazard is increased at higher temperatures.

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 some evidence that human exposure to the material may result in developmental toxicity. This evidence is based on 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.

Chronic intoxication with ionic bromides, historically, has resulted from medical use of bromides but not from environmental or occupational exposure; depression, hallucinosis, and schizophreniform psychosis can be seen in the absence of other signs of intoxication. Bromides may also induce sedation, irritability, agitation, delirium, memory loss, confusion, disorientation, forgetfulness (aphasias), dysarthria, weakness, fatigue, vertigo, stupor, coma, decreased appetite, nausea and vomiting, diarrhoea, hallucinations, an acne like rash on the face, legs and trunk, known as bronchoderma (seen in 25-30% of case involving bromide ion), and a profuse discharge from the nostrils (coryza). Ataxia and generalised hyperreflexia have also been observed. Correlation of neurologic symptoms with blood levels of bromide is inexact. The use of substances such as brompheniramine, as antihistamines, largely reflect current day usage of bromides; ionic bromides have been largely withdrawn from therapeutic use due to their toxicity. Several cases of foetal abnormalities have been described in mothers who took large doses of bromides during pregnancy.

Section 3 - COMPOSITION / INFORMATION ON INGREDIENTS

NAME	CAS RN	%
1-bromo-3,5-dimethyladamantane	941-37-7	>98

Section 4 - FIRST AID MEASURES

SWALLOWED

· Immediately give a glass of water. · First aid is not generally required. If in doubt, contact a Poisons Information Center or a doctor.

EYE

■ If this product comes in contact with eyes: · Wash out immediately with water. · If irritation continues, seek medical attention.

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 fumes or combustion products are inhaled remove from contaminated area. · Other measures are usually unnecessary.

NOTES TO PHYSICIAN

■ Treat symptomatically.

Section 5 - FIRE FIGHTING MEASURES

Vapour Pressure (mmHG):	Not available
Upper Explosive Limit (%):	Not available
Specific Gravity (water=1):	1.224
Lower Explosive Limit (%):	Not available

EXTINGUISHING MEDIA

- Foam.
- Dry chemical powder.

FIRE FIGHTING

- Alert Emergency Responders and tell them location and nature of hazard.
- Wear full body protective clothing with breathing apparatus.

GENERAL FIRE HAZARDS/HAZARDOUS COMBUSTIBLE PRODUCTS

- Combustible.
 - Slight fire hazard when exposed to heat or flame.
- Combustion products include: carbon dioxide (CO₂), other pyrolysis products typical of burning organic material.
May emit poisonous 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:

Type A Filter of sufficient capacity

Section 6 - ACCIDENTAL RELEASE MEASURES

MINOR SPILLS

- Remove all ignition sources.
- Clean up all spills immediately.

MAJOR SPILLS

- Moderate hazard.
- Clear area of personnel and move upwind.
- Alert Emergency Responders and tell them location and nature of hazard.

Section 7 - HANDLING AND STORAGE

PROCEDURE FOR HANDLING

- Avoid all personal contact, including inhalation.
- Wear protective clothing when risk of exposure occurs.

RECOMMENDED STORAGE METHODS

- Metal can or drum
- Packing as recommended by manufacturer.

STORAGE REQUIREMENTS

- Store in original containers.
- Keep containers securely sealed.
- No smoking, naked lights or ignition sources.
- 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.

Section 8 - EXPOSURE CONTROLS / PERSONAL PROTECTION

EXPOSURE CONTROLS

The following materials had no OELs on our records

- 1-bromo-3,5-dimethyladamantane: CAS:941-37-7

PERSONAL PROTECTION



RESPIRATOR

Type A Filter of sufficient capacity

EYE

- Safety glasses with side shields
- Chemical goggles.

HANDS/FEET

■ 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.

· Neoprene gloves.

Wear chemical protective gloves, eg. PVC.

OTHER

- Overalls.
- P.V.C. apron.
- Barrier cream.
- Skin cleansing cream.
- Eye wash unit.

ENGINEERING CONTROLS

■ General exhaust is adequate under normal operating conditions. If risk of overexposure exists, wear an approved respirator.

Section 9 - PHYSICAL AND CHEMICAL PROPERTIES

PHYSICAL PROPERTIES

Liquid.

Does not mix with water.

Sinks in water.

State	Liquid	Molecular Weight	243.19
Melting Range (°F)	Not available	Viscosity	Not Available
Boiling Range (°F)	Not available	Solubility in water (g/L)	Partly miscible
Flash Point (°F)	228	pH (1% solution)	Not available
Decomposition Temp (°F)	Not available.	pH (as supplied)	Not applicable
Autoignition Temp (°F)	Not available	Vapour Pressure (mmHG)	Not available
Upper Explosive Limit (%)	Not available	Specific Gravity (water=1)	1.224
Lower Explosive Limit (%)	Not available	Relative Vapor Density (air=1)	>1
Volatile Component (%vol)	Not available	Evaporation Rate	Not available

APPEARANCE

Colourless liquid; does not mix well with water.

Section 10 - CHEMICAL STABILITY

CONDITIONS CONTRIBUTING TO INSTABILITY

- Presence of incompatible materials.
- Product is considered stable.

STORAGE INCOMPATIBILITY

■ Avoid reaction with oxidizing agents.

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

Section 11 - TOXICOLOGICAL INFORMATION

1-bromo-3,5-dimethyladamantane

TOXICITY AND IRRITATION

1-BROMO-3,5-DIMETHYLADAMANTANE:

■ unless otherwise specified data extracted from RTECS - Register of Toxic Effects of Chemical Substances.

■ Amantadine (an adamantane or amantane) has been associated with several central nervous system side effects, likely due to amantadine's dopaminergic and adrenergic activity, and to a lesser extent, its activity as an anticholinergic.

Common side-effects associated with amantadine therapy include ankle oedema, nervous excitement, confusion, difficulty in concentration, dizziness, light-headedness, orthostatic hypotension, urinary retention, slurred speech, ataxia, depression, insomnia, lethargy, nausea, anorexia, vomiting, dry mouth, constipation, skin rash, discoloured spots or skin patches (livedo reticularis) and visual disturbances. More serious side-effects may include congestive heart-failure, psychosis and leucopenia. Dose-related responses include hallucination, feelings of detachment and convulsions.

Deaths have been reported from overdose with amantadine. The lowest reported acute lethal dose was 1 gram. Acute toxicity may be attributable to the anticholinergic effects of amantadine. Drug overdose has resulted in cardiac, respiratory, renal or central nervous system toxicity. Cardiac dysfunction includes arrhythmia, tachycardia and hypertension

Suicide attempts, some of which have been fatal, have been reported in patients treated with amantadine many of whom received short courses for influenza treatment or prophylaxis. The incidence of suicide attempts is not known and the pathophysiologic mechanism is not understood. Suicide attempts and suicidal ideation have been reported in patients with and without prior history of psychiatric illness.

Sporadic cases of possible Neuroleptic Malignant Syndrome (NMS) have been reported in association with dose reduction or withdrawal of the drug. NMS is an uncommon but life-threatening syndrome characterised by fever or hyperthermia; neurologic findings including muscle rigidity, involuntary movements, altered consciousness; mental status changes; other disturbances such as autonomic dysfunction, tachycardia, tachypnea, hyper- or hypotension; laboratory findings such as creatine phosphokinase elevation, leukocytosis, myoglobinuria, and increased serum myoglobin.

Carcinogenicity and mutagenicity: Long-term in vivo animal studies designed to evaluate the carcinogenic potential of amantadine have not been performed. In several in vitro assays for gene mutation, the drug did not increase the number of spontaneously observed mutations in four strains of Salmonella typhimurium (Ames Test) or in a mammalian cell line (Chinese Hamster Ovary cells) when incubations were performed either with or without a liver metabolic activation extract. Further, there was no evidence of chromosome damage observed in an in vitro test using freshly derived and stimulated human peripheral blood lymphocytes (with and without metabolic activation) or in an in vivo mouse bone marrow micronucleus test (140-550 mg/kg; estimated human equivalent doses of 11.7-45.8 mg/kg based on body surface area conversion).

Reproductive toxicity: In a three litter, non-GLP, reproduction study in rats, amantadine at a dose of 32 mg/kg/day (equal to the maximum recommended human dose on a mg/m² basis) administered to both males and females slightly impaired fertility. There were no effects on fertility at a dose level of 10 mg/kg/day (or 0.3 times the maximum recommended human dose on a mg/m² basis); intermediate doses were not tested.

Failed fertility has been reported during human in vitro fertilization (IVF) when the sperm donor ingested amantadine 2 weeks prior to, and during the IVF cycle.

Developmental toxicity: The hydrochloride is embryotoxic and teratogenic in rats at 50 mg/kg/day (about 12 times a recommended human dose). These effects do not occur at 37 mg/kg/day nor do they occur in rabbits.

In two non-GLP studies in rats in which females were dosed from 5 days prior to mating to Day 6 of gestation or on Days 7-14 of gestation, amantadine produced increases in embryonic death at an oral dose of 100 mg/kg (or 3 times the maximum recommended human dose on a mg/m² basis). In the non-GLP rat study in which females were dosed on Days 7-14 of gestation, there was a marked increase in severe visceral and skeletal malformations at oral doses of 50 and 100 mg/kg (or 1.5 and 3 times, respectively, the maximum recommended human dose on a mg/m² basis). The no-effect dose for teratogenicity was 37 mg/kg (equal to the maximum recommended human dose on a mg/m² basis).

Cardiovascular maldevelopment (single ventricle with pulmonary atresia) has been associated with maternal exposure to amantadine (100 mg/d) administered during the first 2 weeks of pregnancy.

No significant acute toxicological data identified in literature search.

CARCINOGEN

BROMINE COMPOUNDS (ORGANIC OR INORGANIC)	US Environmental Defense Scorecard Suspected Carcinogens	Reference(s)	P65-MC
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Section 12 - ECOLOGICAL INFORMATION

Harmful to aquatic organisms.

Ecotoxicity

Ingredient	Persistence: Water/Soil	Persistence: Air	Bioaccumulation	Mobility
1-bromo-3,5-dimethyladamantane	HIGH		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. 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 equipment to enter drains. Collect all wash water for treatment before disposal.

- Recycle wherever possible or consult manufacturer for recycling options.

· Consult Waste Management Authority for disposal.

Section 14 - TRANSPORTATION INFORMATION

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

Section 15 - REGULATORY INFORMATION

No data for 1-bromo-3,5-dimethyladamantane (CAS: , 941-37-7)

Section 16 - OTHER INFORMATION

ND

Substance CAS Suggested codes 1- bromo- 3, 5- dimethyladamantane 941- 37- 7 Xn; R22

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■ 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. 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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