

Ranvet's Hydroxy P Hydroxyprogesterone Injection

Ranvet

Chemwatch: 4614-31

Version No: 6.1

Safety Data Sheet according to WHS Regulations (Hazardous Chemicals) Amendment 2020 and ADG requirements

Chemwatch Hazard Alert Code: 2

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L.GHS.AUS.EN.E

SECTION 1 Identification of the substance / mixture and of the company / undertaking

Product Identifier

Product name	Ranvet's Hydroxy P Hydroxyprogesterone Injection
Chemical Name	Not Applicable
Synonyms	Not Available
Chemical formula	Not Applicable
Other means of identification	Not Available

Relevant identified uses of the substance or mixture and uses advised against

Relevant identified uses	Injection for the prevention and treatment of progesterone deficiencies in mares.
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Details of the supplier of the safety data sheet

Registered company name	Ranvet
Address	10-12 Green Street Banksmeadow NSW 2019 Australia
Telephone	+61 2 9666 1744
Fax	+61 2 9666 1755
Website	http://www.ranvet.com.au/other_msds.htm
Email	info@ranvet.com.au

Emergency telephone number

Association / Organisation	Ranvet
Emergency telephone numbers	+61 425 061 584
Other emergency telephone numbers	Not Available

SECTION 2 Hazards identification

Classification of the substance or mixture

HAZARDOUS CHEMICAL. NON-DANGEROUS GOODS. According to the WHS Regulations and the ADG Code.


ChemWatch Hazard Ratings

	Min	Max
Flammability	1	2
Toxicity	2	3
Body Contact	2	3
Reactivity	1	2
Chronic	2	3

0 = Minimum
1 = Low
2 = Moderate
3 = High
4 = Extreme

Poisons Schedule	S4
Classification [1]	Acute Toxicity (Oral) Category 4, Skin Corrosion/Irritation Category 2, Sensitisation (Skin) Category 1, Serious Eye Damage/Eye Irritation Category 2A, Specific Target Organ Toxicity - Single Exposure (Respiratory Tract Irritation) Category 3, Hazardous to the Aquatic Environment Long-Term Hazard Category 2
Legend:	1. Classified by Chemwatch; 2. Classification drawn from HCIS; 3. Classification drawn from Regulation (EU) No 1272/2008 - Annex VI

Label elements

Hazard pictogram(s)	
Signal word	Warning

Hazard statement(s)

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H302	Harmful if swallowed.
H315	Causes skin irritation.
H317	May cause an allergic skin reaction.
H319	Causes serious eye irritation.
H335	May cause respiratory irritation.
H411	Toxic to aquatic life with long lasting effects.

Precautionary statement(s) Prevention

P271	Use only outdoors or in a well-ventilated area.
P280	Wear protective gloves, protective clothing, eye protection and face protection.
P261	Avoid breathing mist/vapours/spray.
P264	Wash all exposed external body areas thoroughly after handling.
P270	Do not eat, drink or smoke when using this product.
P273	Avoid release to the environment.
P272	Contaminated work clothing should not be allowed out of the workplace.

Precautionary statement(s) Response

P302+P352	IF ON SKIN: Wash with plenty of water and soap.
P305+P351+P338	IF IN EYES: Rinse cautiously with water for several minutes. Remove contact lenses, if present and easy to do. Continue rinsing.
P333+P313	If skin irritation or rash occurs: Get medical advice/attention.
P337+P313	If eye irritation persists: Get medical advice/attention.
P362+P364	Take off contaminated clothing and wash it before reuse.
P391	Collect spillage.
P301+P312	IF SWALLOWED: Call a POISON CENTER/doctor/physician/first aider if you feel unwell.
P304+P340	IF INHALED: Remove person to fresh air and keep comfortable for breathing.
P330	Rinse mouth.

Precautionary statement(s) Storage

P405	Store locked up.
P403+P233	Store in a well-ventilated place. Keep container tightly closed.

Precautionary statement(s) Disposal

P501	Dispose of contents/container to authorised hazardous or special waste collection point in accordance with any local regulation.
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Not Applicable

SECTION 3 Composition / information on ingredients

Substances

See section below for composition of Mixtures

Mixtures

CAS No	%[weight]	Name
8001-79-4	30-60	<u>castor oil</u>
120-51-4	30-40	<u>benzyl benzoate</u>
630-56-8	9.5-10.5	<u>17alpha-hydroxyprogesterone caproate</u>

Legend: 1. Classified by Chemwatch; 2. Classification drawn from HCIS; 3. Classification drawn from Regulation (EU) No 1272/2008 - Annex VI; 4. Classification drawn from C&L; * EU IOELVs available

SECTION 4 First aid measures

Description of first aid measures

Eye Contact	<p>If this product comes in contact with the eyes:</p> <ul style="list-style-type: none"> Wash out immediately with fresh running water. Ensure complete irrigation of the eye by keeping eyelids apart and away from eye and moving the eyelids by occasionally lifting the upper and lower lids. Seek medical attention without delay; if pain persists or recurs seek medical attention. Removal of contact lenses after an eye injury should only be undertaken by skilled personnel.
Skin Contact	<p>If skin contact occurs:</p> <ul style="list-style-type: none"> Immediately remove all contaminated clothing, including footwear. Flush skin and hair with running water (and soap if available). Seek medical attention in event of irritation.
Inhalation	<ul style="list-style-type: none"> If fumes, aerosols or combustion products are inhaled remove from contaminated area. Other measures are usually unnecessary.

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Ingestion

- ▶ **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.
- ▶ If the services of a medical officer or medical doctor are readily available, the patient should be placed in his/her care and a copy of the SDS should be provided. Further action will be the responsibility of the medical specialist.
- ▶ If medical attention is not available on the worksite or surroundings send the patient to a hospital together with a copy of the SDS.

Where medical attention is not immediately available or where the patient is more than 15 minutes from a hospital or unless instructed otherwise:

- ▶ **INDUCE** vomiting with fingers down the back of the throat, **ONLY IF CONSCIOUS**. Lean patient forward or place on left side (head-down position, if possible) to maintain open airway and prevent aspiration.

NOTE: Wear a protective glove when inducing vomiting by mechanical means.

Indication of any immediate medical attention and special treatment needed

As in all cases of suspected poisoning, follow the ABCDEs of emergency medicine (airway, breathing, circulation, disability, exposure), then the ABCDEs of toxicology (antidotes, basics, change absorption, change distribution, change elimination).

For poisons (where specific treatment regime is absent):

BASIC TREATMENT

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

ADVANCED TREATMENT

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

BRONSTEIN, A.C. and CURRANCE, P.L.

EMERGENCY CARE FOR HAZARDOUS MATERIALS EXPOSURE: 2nd Ed. 1994

Treat symptomatically.

SECTION 5 Firefighting measures

Extinguishing media

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

Special hazards arising from the substrate or mixture

Fire Incompatibility

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

Advice for firefighters

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.
- ▶ **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.

Fire/Explosion Hazard

- ▶ Combustible.
 - ▶ Slight fire hazard when exposed to heat or flame.
 - ▶ Heating may cause expansion or decomposition leading to violent rupture of containers.
 - ▶ On combustion, may emit toxic fumes of carbon monoxide (CO).
 - ▶ May emit acrid smoke.
 - ▶ Mists containing combustible materials may be explosive.
- Combustion products include:
carbon dioxide (CO₂)
acrolein
nitrogen oxides (NO_x)
other pyrolysis products typical of burning organic material.
May emit poisonous fumes.
May emit corrosive fumes.

HAZCHEM

Not Applicable

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SECTION 6 Accidental release measures

Personal precautions, protective equipment and emergency procedures

See section 8

Environmental precautions

See section 12

Methods and material for containment and cleaning up

Minor Spills	Slippery when spilt. ▶ Remove all ignition sources. ▶ Clean up all spills immediately. ▶ Avoid breathing vapours and contact with skin and eyes. ▶ Control personal contact with the substance, by using protective equipment. ▶ Contain and absorb spill with sand, earth, inert material or vermiculite. ▶ Wipe up. ▶ Place in a suitable, labelled container for waste disposal.
Major Spills	Slippery when spilt. Moderate hazard. ▶ Clear area of personnel and move upwind. ▶ 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 course. ▶ No smoking, naked lights or ignition sources. ▶ Increase ventilation. ▶ Stop leak if safe to do so. ▶ Contain spill with sand, earth or vermiculite. ▶ Collect recoverable product into labelled containers for recycling. ▶ Absorb remaining product with sand, earth or vermiculite. ▶ Collect solid residues and seal in labelled drums for disposal. ▶ Wash area and prevent runoff into drains. ▶ If contamination of drains or waterways occurs, advise emergency services.

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

SECTION 7 Handling and storage

Precautions for safe handling

Safe handling	▶ DO NOT allow clothing wet with material to stay in contact with skin ▶ Avoid all personal contact, including inhalation. ▶ Wear protective clothing when risk of exposure occurs. ▶ Use in a well-ventilated area. ▶ Prevent concentration in hollows and sumps. ▶ DO NOT enter confined spaces until atmosphere has been checked. ▶ Avoid smoking, naked lights or ignition sources. ▶ Avoid contact with incompatible materials. ▶ When handling, DO NOT eat, drink or smoke. ▶ Keep containers securely sealed when not in use. ▶ Avoid physical damage to containers. ▶ Always wash hands with soap and water after handling. ▶ Work clothes should be laundered separately. ▶ Use good occupational work practice. ▶ Observe manufacturer's storage and handling recommendations contained within this SDS. ▶ Atmosphere should be regularly checked against established exposure standards to ensure safe working conditions.
Other information	▶ 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 storage and handling recommendations contained within this SDS. Keep cool. Store below 25 deg.C

Conditions for safe storage, including any incompatibilities

Suitable container	Ampoule. Vial. ▶ Glass container is suitable for laboratory quantities
Storage incompatibility	▶ Avoid reaction with oxidising agents

SECTION 8 Exposure controls / personal protection

Control parameters

Occupational Exposure Limits (OEL)

INGREDIENT DATA

Not Available

Emergency Limits

Ingredient	TEEL-1	TEEL-2	TEEL-3
benzyl benzoate	5.7 mg/m3	63 mg/m3	380 mg/m3

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Ingredient	Original IDLH	Revised IDLH
castor oil	Not Available	Not Available
benzyl benzoate	Not Available	Not Available
17alpha-hydroxyprogesterone caproate	Not Available	Not Available

Occupational Exposure Banding

Ingredient	Occupational Exposure Band Rating	Occupational Exposure Band Limit
castor oil	E	≤ 0.1 ppm
benzyl benzoate	E	≤ 0.1 ppm
Notes:	Occupational exposure banding is a process of assigning chemicals into specific categories or bands based on a chemical's potency and the adverse health outcomes associated with exposure. The output of this process is an occupational exposure band (OEB), which corresponds to a range of exposure concentrations that are expected to protect worker health.	

MATERIAL DATA

Sensory irritants are chemicals that produce temporary and undesirable side-effects on the eyes, nose or throat. Historically occupational exposure standards for these irritants have been based on observation of workers' responses to various airborne concentrations. Present day expectations require that nearly every individual should be protected against even minor sensory irritation and exposure standards are established using uncertainty factors or safety factors of 5 to 10 or more. On occasion animal no-observable-effect-levels (NOEL) are used to determine these limits where human results are unavailable. An additional approach, typically used by the TLV committee (USA) in determining respiratory standards for this group of chemicals, has been to assign ceiling values (TLV C) to rapidly acting irritants and to assign short-term exposure limits (TLV STELs) when the weight of evidence from irritation, bioaccumulation and other endpoints combine to warrant such a limit. In contrast the MAK Commission (Germany) uses a five-category system based on intensive odour, local irritation, and elimination half-life. However this system is being replaced to be consistent with the European Union (EU) Scientific Committee for Occupational Exposure Limits (SCOEL); this is more closely allied to that of the USA.





OSHA (USA) concluded that exposure to sensory irritants can:

- cause inflammation
- cause increased susceptibility to other irritants and infectious agents
- lead to permanent injury or dysfunction
- permit greater absorption of hazardous substances and
- acclimate the worker to the irritant warning properties of these substances thus increasing the risk of overexposure.

Exposure controls

Appropriate 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. A fume hood or vented balance enclosure is recommended for weighing/ transferring quantities exceeding 500 mg. 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. Quantities up to 1 kilogram may require a designated laboratory using fume hood, biological safety cabinet, or approved vented enclosures. Quantities exceeding 1 kilogram should be handled in a designated laboratory or containment laboratory using appropriate barrier/ containment technology. Manufacturing and pilot plant operations require barrier/ containment and direct coupling technologies. Barrier/ containment technology and direct coupling (totally enclosed processes that create a barrier between the equipment and the room) typically use double or split butterfly valves and hybrid unidirectional airflow/ local exhaust ventilation solutions (e.g. powder containment booths). Glove bags, isolator glove box systems are optional. HEPA filtration of exhaust from dry product handling areas is required. 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, vapours, etc. evaporating from tank (in still air)	0.25-0.5 m/s (50-100 f/min.)
	aerosols, fumes from pouring operations, intermittent container filling, low speed conveyer transfers (released at low velocity into zone of active generation)	0.5-1 m/s (100-200 f/min.)
	direct spray, drum filling, conveyer loading, crusher dusts, gas discharge (active generation into zone of rapid air motion)	1-2.5 m/s (200-500 f/min.)
	Within each range the appropriate value depends on:	
	Lower end of the range	Upper end of the range
	1: Room air currents minimal or favourable to capture	1: Disturbing room air currents
	2: Contaminants of low toxicity or of nuisance value only.	2: Contaminants of high toxicity
	3: Intermittent, low production.	3: High production, heavy use
	4: Large hood or large air mass in motion	4: Small hood-local control only
	Simple theory shows that air velocity falls rapidly with distance away from the opening of a simple extraction pipe. Velocity generally decreases with the square of distance from the extraction point (in simple cases). Therefore the air speed at the extraction point should be adjusted, accordingly, after reference to distance from the contaminating source. The air velocity at the extraction fan, for example, should be a minimum of 1-2.5 m/s (200-500 f/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. The need for respiratory protection should also be assessed where incidental or accidental exposure is anticipated: Dependent on levels of contamination, PAPR, full face air purifying devices with P2 or P3 filters or air supplied respirators should be evaluated. The following protective devices are recommended where exposures exceed the recommended exposure control guidelines by factors of: 10; high efficiency particulate (HEPA) filters or cartridges 10-25; loose-fitting (Tyvek or helmet type) HEPA powered-air purifying respirator. 25-50; a full face-piece negative pressure respirator with HEPA filters 50-100; tight-fitting, full face-piece HEPA PAPR 100-1000; a hood-shroud HEPA PAPR or full face-piece supplied air respirator operated in pressure demand or other positive pressure mode.	

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Personal protection	    
Eye and face protection	<p>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:</p> <ul style="list-style-type: none"> ▸ 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 lenses or restrictions on use, should be created for each workplace or task. This should include a review of lens absorption and adsorption for the class of chemicals in use and an account of injury experience. Medical and first-aid personnel should be trained in their removal and suitable equipment should be readily available. In the event of chemical exposure, begin eye irrigation immediately and remove contact lens as soon as practicable. Lens should be removed at the first signs of eye redness or irritation - lens should be removed in a clean environment only after workers have washed hands thoroughly. [CDC NIOSH Current Intelligence Bulletin 59], [AS/NZS 1336 or national equivalent]
Skin protection	See Hand protection below
Hands/feet protection	<p>NOTE:</p> <ul style="list-style-type: none"> ▸ 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. <p>The selection of suitable gloves does not only depend on the material, but also on further marks of quality which vary from manufacturer to manufacturer. Where the chemical is a preparation of several substances, the resistance of the glove material can not be calculated in advance and has therefore to be checked prior to the application.</p> <p>The exact break through time for substances has to be obtained from the manufacturer of the protective gloves and has to be observed when making a final choice.</p> <p>Personal hygiene is a key element of effective hand care. Gloves must only be worn on clean hands. After using gloves, hands should be washed and dried thoroughly. Application of a non-perfumed moisturiser is recommended.</p> <p>Suitability and durability of glove type is dependent on usage. Important factors in the selection of gloves include:</p> <ul style="list-style-type: none"> · frequency and duration of contact, · chemical resistance of glove material, · glove thickness and · dexterity <p>Select gloves tested to a relevant standard (e.g. Europe EN 374, US F739, AS/NZS 2161.1 or national equivalent).</p> <ul style="list-style-type: none"> · When prolonged or frequently repeated contact may occur, a glove with a protection class of 5 or higher (breakthrough time greater than 240 minutes according to EN 374, AS/NZS 2161.10.1 or national equivalent) is recommended. · When only brief contact is expected, a glove with a protection class of 3 or higher (breakthrough time greater than 60 minutes according to EN 374, AS/NZS 2161.10.1 or national equivalent) is recommended. · Some glove polymer types are less affected by movement and this should be taken into account when considering gloves for long-term use. · Contaminated gloves should be replaced. <p>As defined in ASTM F-739-96 in any application, gloves are rated as:</p> <ul style="list-style-type: none"> · Excellent when breakthrough time > 480 min · Good when breakthrough time > 20 min · Fair when breakthrough time < 20 min · Poor when glove material degrades <p>For general applications, gloves with a thickness typically greater than 0.35 mm, are recommended.</p> <p>It should be emphasised that glove thickness is not necessarily a good predictor of glove resistance to a specific chemical, as the permeation efficiency of the glove will be dependent on the exact composition of the glove material. Therefore, glove selection should also be based on consideration of the task requirements and knowledge of breakthrough times.</p> <p>Glove thickness may also vary depending on the glove manufacturer, the glove type and the glove model. Therefore, the manufacturers technical data should always be taken into account to ensure selection of the most appropriate glove for the task.</p> <p>Note: Depending on the activity being conducted, gloves of varying thickness may be required for specific tasks. For example:</p> <ul style="list-style-type: none"> · Thinner gloves (down to 0.1 mm or less) may be required where a high degree of manual dexterity is needed. However, these gloves are only likely to give short duration protection and would normally be just for single use applications, then disposed of. · Thicker gloves (up to 3 mm or more) may be required where there is a mechanical (as well as a chemical) risk i.e. where there is abrasion or puncture potential <p>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.</p> <ul style="list-style-type: none"> ▸ Rubber gloves (nitrile or low-protein, powder-free latex, latex/ nitrile). Employees allergic to latex gloves should use nitrile gloves in preference. ▸ Double gloving should be considered. ▸ PVC gloves. ▸ Change gloves frequently and when contaminated, punctured or torn. ▸ Wash hands immediately after removing gloves. ▸ Protective shoe covers. [AS/NZS 2210] ▸ Head covering.
Body protection	See Other protection below
Other protection	<ul style="list-style-type: none"> ▸ 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

Recommended material(s)

GLOVE SELECTION INDEX

Glove selection is based on a modified presentation of the:

"Forsberg Clothing Performance Index".

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

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Respiratory protection

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

Selection of the Class and Type of respirator will depend upon the level of breathing zone contaminant and the chemical nature of the contaminant. Protection Factors (defined as the ratio of contaminant outside and inside the mask) may also be important.

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Material	CPI
NEOPRENE	A

* CPI - Chemwatch Performance Index

A: Best Selection

B: Satisfactory; may degrade after 4 hours continuous immersion

C: Poor to Dangerous Choice for other than short term immersion

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

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

Required minimum protection factor	Maximum gas/vapour concentration present in air p.p.m. (by volume)	Half-face Respirator	Full-Face Respirator
up to 10	1000	A-AUS / Class1 P2	-
up to 50	1000	-	A-AUS / Class 1 P2
up to 50	5000	Airline *	-
up to 100	5000	-	A-2 P2
up to 100	10000	-	A-3 P2
100+			Airline**

* - Continuous Flow ** - Continuous-flow or positive pressure demand

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

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

SECTION 9 Physical and chemical properties

Information on basic physical and chemical properties

Appearance	Yellow straw coloured oil based clear liquid; does not mix with water.		
Physical state	Liquid	Relative density (Water = 1)	1.00-1.03
Odour	Not Available	Partition coefficient n-octanol / water	Not Available
Odour threshold	Not Available	Auto-ignition temperature (°C)	Not Available
pH (as supplied)	Not Applicable	Decomposition temperature (°C)	Not Available
Melting point / freezing point (°C)	Not Available	Viscosity (cSt)	Not Available
Initial boiling point and boiling range (°C)	Not Available	Molecular weight (g/mol)	Not Applicable
Flash point (°C)	Not Available	Taste	Not Available
Evaporation rate	Not Available	Explosive properties	Not Available
Flammability	Not Available	Oxidising properties	Not Available
Upper Explosive Limit (%)	Not Available	Surface Tension (dyn/cm or mN/m)	Not Available
Lower Explosive Limit (%)	Not Available	Volatile Component (%vol)	Not Available
Vapour pressure (kPa)	Not Available	Gas group	Not Available
Solubility in water	Immiscible	pH as a solution (Not Available%)	Not Applicable
Vapour density (Air = 1)	Not Available	VOC g/L	Not Available

SECTION 10 Stability and reactivity

Reactivity	See section 7
Chemical stability	<ul style="list-style-type: none"> ▶ Unstable in the presence of incompatible materials. ▶ Product is considered stable. ▶ Hazardous polymerisation will not occur.
Possibility of hazardous reactions	See section 7
Conditions to avoid	See section 7
Incompatible materials	See section 7
Hazardous decomposition products	See section 5

SECTION 11 Toxicological information

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Information on toxicological effects

Inhaled	<p>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.</p> <p>Inhalation hazard is increased at higher temperatures.</p> <p>Not normally a hazard due to non-volatile nature of product</p> <p>Fine mists generated from plant/ vegetable (or more rarely from animal) oils may be hazardous. Extreme heating for prolonged periods, at high temperatures, may generate breakdown products which include acrolein and acrolein-like substances.</p>								
Ingestion	<p>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.</p> <p>Ricinoleic acid, the major fatty acid present in castor oil, has a variety of effects on the gastrointestinal tract, including inhibition of water and electrolyte absorption (Donowitz, 1979), stimulation of water secretion into the intestinal lumen (Ammon and Phillips, 1974), and depression of small bowel contractile activity (Ammon et al., 1974). The cathartic action of orally ingested castor oil traditionally has been attributed to irritant or stimulatory effects of ricinoleic acid on the gastrointestinal smooth muscle; the ricinoleic acid is liberated in the small intestine by the action of pancreatic lipase (Stewart and Bass, 1976). Moreover, absorption of ricinoleic acid occurs incompletely; substantial quantities remain in the gastrointestinal tract after oral administration (Stewart and Bass, 1976). Since diet palatability was not affected by the presence of castor oil, the poor absorption of ricinoleic acid and its potential to reduce absorption of other fatty acids could be responsible for the absence of more substantial body weight gains by rats and mice consuming castor oil-containing diets.</p> <p>Adverse effects associated with the administration of central nervous system stimulants include dyspnea, coughing, bronchospasm, and laryngospasm. Muscular involvement may produce symptoms ranging from fasciculation to spasticity or seizures. Headache, dizziness and confusion may also result as can hyperpyrexia or a sensation of warmth. Other symptoms may include nausea, vomiting, diarrhoea and difficulty in urination. Cardiovascular involvement may produce alterations in blood pressure or arrhythmia.</p>								
Skin Contact	<p>The material produces severe skin irritation; evidence exists, or practical experience predicts, that the material either:</p> <ul style="list-style-type: none"> produces severe inflammation of the skin in a substantial number of individuals following direct contact, and/or produces significant and severe inflammation when applied to the healthy intact skin of animals (for up to four hours), such inflammation being present twenty-four hours or more after the end of the exposure period. Skin irritation may also be present after prolonged or repeated exposure; this may result in a form of contact dermatitis (nonallergic). The dermatitis is often characterised by skin redness (erythema) and swelling (oedema) which may progress to blistering (vesiculation), scaling and thickening of the epidermis. At the microscopic level there may be intercellular oedema of the spongy layer of the skin (spongiosis) and intracellular oedema of the epidermis. <p>NOTE: Prolonged contact is unlikely, given the severity of response, but repeated exposures may produce severe ulceration.</p> <p>Open cuts, abraded or irritated skin should not be exposed to this material</p> <p>Entry into the blood-stream through, for example, cuts, abrasions, puncture wounds or lesions, may produce systemic injury with harmful effects. Examine the skin prior to the use of the material and ensure that any external damage is suitably protected.</p>								
Eye	<p>Although the liquid is not thought to be an irritant (as classified by EC Directives), direct contact with the eye may produce transient discomfort characterised by tearing or conjunctival redness (as with windburn).</p>								
Chronic	<p>Limited evidence suggests that repeated or long-term occupational exposure may produce cumulative health effects involving organs or biochemical systems.</p> <p>Practical experience shows that skin contact with the material is capable either of inducing a sensitisation reaction in a substantial number of individuals, and/or of producing a positive response in experimental animals.</p> <p>Substances that can cause occupational asthma (also known as asthmagens and respiratory sensitisers) can induce a state of specific airway hyper-responsiveness via an immunological, irritant or other mechanism. Once the airways have become hyper-responsive, further exposure to the substance, sometimes even to tiny quantities, may cause respiratory symptoms. These symptoms can range in severity from a runny nose to asthma. Not all workers who are exposed to a sensitiser will become hyper-responsive and it is impossible to identify in advance who are likely to become hyper-responsive.</p> <p>Substances than can cause occupational asthma should be distinguished from substances which may trigger the symptoms of asthma in people with pre-existing air-way hyper-responsiveness. The latter substances are not classified as asthmagens or respiratory sensitisers</p> <p>Wherever it is reasonably practicable, exposure to substances that can cause occupational asthma should be prevented. Where this is not possible the primary aim is to apply adequate standards of control to prevent workers from becoming hyper-responsive.</p> <p>Activities giving rise to short-term peak concentrations should receive particular attention when risk management is being considered. Health surveillance is appropriate for all employees exposed or liable to be exposed to a substance which may cause occupational asthma and there should be appropriate consultation with an occupational health professional over the degree of risk and level of surveillance.</p> <p>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.</p> <p>Exposure to the material may cause concerns for human fertility, on the basis that similar materials provide some evidence of impaired fertility in the absence of toxic effects, or evidence of impaired fertility occurring at around the same dose levels as other toxic effects, but which are not a secondary non-specific consequence of other toxic effects.</p> <p>The use of oral contraceptives has been associated with an increased risk of thrombo-embolic and cardiovascular disease, related, at least in part, to the oestrogen content of combined oral contraceptives. An increased risk of the incidence of benign liver tumours, though marked, is thought to be rare.</p> <p>Exposure to the material for prolonged periods may cause physical defects in the developing embryo (teratogenesis).</p> <p>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 antibody mediated reaction if other chemical agents have caused prior sensitisation (cross-sensitivity).</p>								
Ranvet's Hydroxy P Hydroxyprogesterone Injection	<table> <tr> <th>TOXICITY</th><th>IRRITATION</th></tr> <tr> <td>Not Available</td><td>Not Available</td></tr> </table>	TOXICITY	IRRITATION	Not Available	Not Available				
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Ranvet's Hydroxy P Hydroxyprogesterone Injection

benzyl benzoate	TOXICITY	IRRITATION
	Dermal (rabbit) LD50: 4000 mg/kg ^[2]	Not Available
	Oral (Rat) LD50; 1700 mg/kg ^[2]	
17alpha-hydroxyprogesterone caproate	TOXICITY	IRRITATION
	Not Available	Not Available
Legend:	1. Value obtained from Europe ECHA Registered Substances - Acute toxicity 2. * Value obtained from manufacturer's SDS. Unless otherwise specified data extracted from RTECS - Register of Toxic Effect of chemical Substances	

CASTOR OIL

For aliphatic fatty acids (and salts)

Acute oral (gavage) toxicity:

The acute oral LD50 values in rats for both were greater than >2000 mg/kg bw Clinical signs were generally associated with poor condition following administration of high doses (salivation, diarrhoea, staining, piloerection and lethargy). There were no adverse effects on body weight in any study. In some studies, excess test substance and/or irritation in the gastrointestinal tract was observed at necropsy.

Skin and eye irritation potential, with a few stated exceptions, is chain length dependent and decreases with increasing chain length.

According to several OECD test regimes the animal skin irritation studies indicate that the C6-10 aliphatic acids are severely irritating or corrosive, while the C12 aliphatic acid is irritating, and the C14-22 aliphatic acids generally are not irritating or mildly irritating.

Human skin irritation studies using more realistic exposures (30-minute, 1-hour or 24-hours) indicate that the aliphatic acids have sufficient, good or very good skin compatibility.

Animal eye irritation studies indicate that among the aliphatic acids, the C8-12 aliphatic acids are irritating to the eye while the C14-22 aliphatic acids are not irritating.

Eye irritation potential of the ammonium salts does not follow chain length dependence; the C18 ammonium salts are corrosive to the eyes.

Dermal absorption:

The in vitro penetration of C10, C12, C14, C16 and C18 fatty acids (as sodium salt solutions) through rat skin decreases with increasing chain length. At 86.73 ug C16/cm² and 91.84 ug C18/cm², about 0.23% and less than 0.1% of the C16 and C18 soap solutions is absorbed after 24 h exposure, respectively.

Sensitisation:

No sensitisation data were located.

Repeat dose toxicity:

Repeated dose oral (gavage or diet) exposure to aliphatic acids did not result in systemic toxicity with NOAELs greater than the limit dose of 1000 mg/kg bw. .

Mutagenicity

Aliphatic acids do not appear to be mutagenic or clastogenic in vitro or in vivo

Carcinogenicity

No data were located for carcinogenicity of aliphatic fatty acids.

Reproductive toxicity

No effects on fertility or on reproductive organs, or developmental effects were observed in studies on aliphatic acids and the NOAELs correspond to the maximum dose tested. The weight of evidence supports the lack of reproductive and developmental toxicity potential of the aliphatic acids category.

Given the large number of substances in this category, their closely related chemical structure, expected trends in physical chemical properties, and similarity of toxicokinetic properties, both mammalian and aquatic endpoints were filled using read-across to the closest structural analogue, and selecting the most conservative supporting substance effect level.

Structure-activity relationships are not evident for the mammalian toxicity endpoints. That is, the low mammalian toxicity of this category of substances limits the ability to discern structural effects on biological activity. Regardless, the closest structural analogue with the most conservative effect value was selected for read across. Irritation is observed for chain lengths up to a cut-off at or near 12 carbons).

Metabolism:

The aliphatic acids share a common degradation pathway in which they are metabolized to acetyl-CoA or other key metabolites in all living systems. Common biological pathways result in structurally similar breakdown products, and are, together with the physico-chemical properties, responsible for similar environmental behavior and essentially identical hazard profiles with regard to human health.

Differences in metabolism or biodegradability of even and odd numbered carbon chain compounds or saturated/ unsaturated compounds are not expected; even-and odd-numbered carbon chain compounds, and the saturated and unsaturated compounds are naturally occurring and are expected to be metabolized and biodegraded in the same manner.

The acid and alkali salt forms of the homologous aliphatic acid are expected to have many similar physicochemical and toxicological properties when they become bioavailable; therefore, data read across is used for those instances where data are available for the acid form but not the salt, and vice versa. In the gastrointestinal tract, acids and bases are absorbed in the undissociated (non-ionised) form by simple diffusion or by facilitated diffusion. It is expected that both the acids and the salts will be present in (or converted to) the acid form in the stomach. This means that for both aliphatic acid or aliphatic acid salt, the same compounds eventually enter the small intestine, where equilibrium, as a result of increased pH, will shift towards dissociation (ionised form).

Hence, the situation will be similar for compounds originating from acids and therefore no differences in uptake are anticipated

Note that the saturation or unsaturation level is not a factor in the toxicity of these substances and is not a critical component of the read across process..

Toxicokinetics:

The turnover of the [14C] surfactants in the rat showed that there was no significant difference in the rate or route of excretion of 14C given by intraperitoneal or subcutaneous administration. The main route of excretion was as 14CO₂ in the expired air at 6 h after administration. The remaining material was incorporated in the body. Longer fatty acid chains are more readily incorporated than shorter chains. At ca. 1.55 and 1.64 mg/kg bw, 71% of the C16:0 and 56% of the C18:0 was incorporated and 21% and 38% was excreted as 14CO₂, respectively.

Glycidyl fatty acid esters (GEs), one of the main contaminants in processed oils, are mainly formed during the deodorisation step in the refining process of edible oils and therefore occur in almost all refined edible oils. GEs are potential carcinogens, due to the fact that they readily hydrolyze into the free form glycidol in the gastrointestinal tract, which has been found to induce tumours in various rat tissues. Therefore, significant effort has been devoted to inhibit and eliminate the formation of GEs

GEs contain a common terminal epoxide group but exhibit different fatty acid compositions. This class of compounds has been reported in edible oils after overestimation of 3-monochloropropane-1,2-diol (3-MCPD) fatty acid esters analysed by an indirect method, 3-MCPD esters have been studied as food processing contaminants and are found in various food types and food ingredients, particularly in refined edible oils.

3-Monochloropropane-1,2-diol (3-MCPD) and 2-monochloropropane-1,3-diol (2-MCPD) are chlorinated derivatives of glycerol (1,2,3-propanetriol). 3- and 2-MCPD and their fatty acid esters are among non-volatile chloropropanols. Glycidol is associated with the formation and decomposition of 3- and 2-MCPD. It forms monoesters with fatty acids (GE) during the refining of vegetable oils. Chloropropanols are formed in HVP during the hydrochloric acid-mediated hydrolysis step of the manufacturing process. In food production, chloropropanols form from the reaction of endogenous or added chloride with glycerol or acylglycerol.

Although harmful effects on humans and animals have not been demonstrated, the corresponding hydrolysates, 3-MCPD and glycidol, have been identified as rodent genotoxic carcinogens, ultimately resulting in the formation of kidney tumours (3-MCPD) and tumours at other tissue sites (glycidol). Therefore, 3-MCPD and glycidol have been categorised as "possible human carcinogens (group 2B) and "probably carcinogenic

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to humans (group 2A), respectively, by the International Agency for Research on Cancer (IARC).

Diacylglyceride (DAG) based oils produced by one company were banned from the global market due to "high levels" of GEs.

Several reports have also suggested that a bidirectional transformation process may occur not only between glycidol and 3-MCPD but also their esterified forms in the presence of chloride ions. The transformation rate of glycidol to 3-MCPD was higher than that of 3-MCPD to glycidol under acidic conditions in the presence of chloride ion.

Precursors of GEs in refined oils have been identified as partial acylglycerols, that is, DAGs and monoacylglycerides (MAGs); however, whether they also originate from triacylglycerides (TAGs) is still a topic of controversial debates. Several authors noted that pure TAGs were stable during heat treatment (such as 235 deg C) for 3 h and were therefore not involved in the formation of GEs. However, experimental results have shown that small amounts of GEs are present in a heat-treated oil model consisting of almost 100% TAGs. The formation of GEs from TAGs can be attributed to the pyrolysis of TAGs to DAGs and MAGs. In contrast, 3-MCPD esters in refined oils can be obtained from TAG. Presently, the mechanism for the formation of GE intermediates and the relationship between GEs and 3-MCPD esters are still unknown.

For Group E aliphatic esters (polyol esters):

According to a classification scheme described by the American Chemistry Council' Aliphatic Esters Panel, Group E substances are esters of monoacids, mainly common fatty acids, and trihydroxy or polyhydroxyalcohols or polyols, such as pentaerythritol (PE), 2-ethyl-2-(hydroxymethyl)-1,3-propanediol or trimethylolpropane (TMP), and dipentaerythritol (diPE). The Group E substances often are referred to as "polyol esters". The polyol esters are unique in their chemical characteristics since they lack beta-tertiary hydrogen atoms, thus leading to stability against oxidation and elimination. The fatty acids often range from C5-C10 to as high as C18 (e.g., oleic, stearic, isostearic, tall oil fatty acids) in carbon number and generally are derived from naturally occurring sources. Group E esters may have multiple ester linkages and may include mixed esters derived from different carbon-length fatty acid mixtures. The lack of beta-tertiary hydrogen atoms in the structure of the polyol esters makes them characteristically and chemically stable against oxidation and elimination in comparison to other ester classes or groups. For these reasons, trimethylolpropane (TMP) and pentaerythritol (PE) esters with fatty acids of C5 to C10 carbon-chain length have applications as synthetic lubricants for passenger car motor oil and military and civilian jet engines. TMP and PE esters of C18 acids (e.g., isostearic and oleic acids) also have found use in synthetic lubricant applications, including refrigeration lubricants and hydraulic fluids. Because of their higher thermal stability characteristics, they also find use in a variety of high temperature applications such as industrial oven chain oils, high temperature greases, fire resistant transformer coolants and turbine engines.

Polyol esters that are extensively esterified also have greater polarity, less volatility and enhanced lubricity characteristics. **Acute toxicity:**

Depending on the degree of esterification, the polyol esters can be resistant or slow towards chemical or enzymatic hydrolysis (i.e., esterase or lipases) as a result of steric hindrance. PE and diPE esters that are capable of being enzymatically hydrolyzed will generate pentaerythritol or dipentaerythritol, and the corresponding fatty acids which, for most of the Group E esters, are comprised mainly of oleic, linoleic and stearic acids as well as the fatty acids in the C5-10 carbon-length. Similarly, TMP esters can undergo metabolism to yield trimethylolpropane (2-ethyl-2-hydroxymethyl-1,3-propanediol) and fatty acid constituents. Pentaerythritol and trimethylolpropane have been reported to have a low order of toxicity. The acute oral LD50 for these substances was greater than 2000 mg/kg indicating a relatively low order of toxicity. The similarity in the low order of toxicity for these substances is consistent with their similar chemical structure and physicochemical properties.

Metabolic studies of polyglyceryl esters indicated that these esters are hydrolyzed in the gastrointestinal (GI) tract, and utilization and digestibility studies supported the assumption that the fatty acid moiety is metabolized in the normal manner. Analytical studies have produced no evidence of accumulation of the polyglycerol moiety in body tissues.

In an acute dermal toxicity study in rats, the LD50 of 1,2,3-propanetriol, homopolymer, diisooctadecanoate was >5000 mg/kg. Low toxicity was reported in acute oral studies. In rats, the LD50 >2000 mg/kg for polyglyceryl-3 caprate, polyglyceryl-3 caprylate, polyglyceryl-4 caprate, diisostearyl polyglyceryl-3 dimer dilinoleate, and the LD50 was >5000 mg/kg for polyglyceryl-3 iso-stearate, polyglyceryl-3-oleate, polyglyceryl-2 diisostearate and polyglyceryl-3 diisostearate.

The ability to enhance skin penetration was examined for several of the polyglyceryl fatty acid esters.

Repeat dose toxicity: Polyol esters are generally well tolerated by rats in 28-day oral toxicity studies. NOAEL for these substances was 1000 mg/kg/day in Sprague-Dawley rats. The TMP ester of heptanoic and octanoic acid did not produce signs of overt systemic toxicity at any dose levels tested (i.e., 100, 300, and 1000 mg/kg/day). There were no treatment-related clinical in-life, functional observation battery, or gross postmortem findings. There were no treatment related mortality, and no adverse effects on body weight, food consumption, clinical laboratory parameters, or organ weights. However, there were increased numbers of hyaline droplets in the proximal cortical tubular epithelium of the 300 and 1000 mg/kg/day in male rats. Based on these findings (hyaline droplets), the NOAEL for this polyol ester was established at 100 mg/kg/day for male rats. Hyaline droplet formation observed in the male kidneys is believed to be a sex/species condition specific to only male rats, which has little relevance to humans.

The results from these repeated dose dermal toxicity studies suggest that polyol esters exhibit a low order of toxicity following repeated application. This may be attributable to similarities in their chemical structures, physicochemical properties, and common metabolic pathways (i.e., esters can be enzymatically hydrolyzed to the corresponding polyalcohol and the corresponding fatty acids). The polyol, hexanedioic acid, mixed esters with decanoic acid, heptanoic acid, octanoic acid and PE, was applied to the skin of groups of 10 (male and female) rats for five days a week for four (4) weeks at dose levels of 0, 125, 500 and 2000 mg/kg/day. Treated animals exhibited no signs indicative of systemic toxicity. No visible signs of irritation were observed at treatment sites. Microscopically, treated skin (viz., greater than or equal to 500 mg/kg/day) exhibited a dose-related increased incidence and severity of hyperplasia and hyperkeratosis of the epidermis and sebaceous gland hyperplasia. These effects were reversible. None of the minor changes in haematology and serum chemistry parameters were considered biologically significant. High dose females (2000 mg/kg/day) exhibited a significant increase in relative adrenal and brain weights when compared to the controls. These differences were attributed to the lower final body weight of the female animals. The NOAEL in this study for systemic toxicity was established as 500 mg/kg/day and 125 mg/kg/day for skin irritation.

Two 28-day study conducted with fatty acids, C5-10, esters with pentaerythritol (CAS RN: 68424-31-7) and dipentaerythritol ester of n-C5/iso-C9 acids (CAS RN: 647028-25-9) showed no signs of overt toxicity. The 90-day study pentaerythritol ester of pentanoic acids and isononanoic acid (CAS RN: 146289-36-3) did not show any signs of overt toxicity. However, increased kidney and liver weights in the male animals was observed. In conclusion, since the effects observed are not considered to be systemic and relevant for humans, the NOAEL was found to exceed 1000 mg/kg bw for all substances based on the result from the 28 and 90-day studies.

Reproductive and developmental toxicity: Since metabolism of the polyol esters can occur, leading to the generation of the corresponding fatty acids and the polyol alcohol (such as pentaerythritol, trimethylolpropane, and dipentaerythritol), the issue of whether these metabolites may pose any potential reproductive/developmental toxicity concerns is important. However, the polyol alcohols such as pentaerythritol, trimethylolpropane, and dipentaerythritol, would be expected to undergo further metabolism, conjugation and excretion in the urine. Available evidence indicates that these ester hydrolysates (i.e., hydrolysis products), primarily fatty acids (e.g., heptanoic, octanoic, and decanoic acids) and secondarily the polyol alcohols should exhibit a low order of reproductive toxicity. It can be concluded that this group of high molecular weight polyol esters should not produce profound reproductive effects in rodents.

Genotoxicity: Polyols tested for genetic activity in the Salmonella assay, have been found to be inactive. Several polyol esters have been adequately tested for chromosomal mutation in the in vitro mammalian chromosome aberration assay, and all were inactive. Two TMP esters were also tested for in vivo chromosomal aberration in rats, and both demonstrated no activity. Thus, it is unlikely that these substances are chromosomal mutagens.

Carcinogenicity: In a 2-yr study, 28 male and 28 female rats were fed 5% polyglyceryl ester in the diet. No adverse effects on body weight, feed consumption, haematology values, or survival rate were noted. Liver function tests and renal function tests performed at 59 and 104 wks of the study were comparable between the test group and a control group fed 5% ground nut oil. The carcass fat contained no polyglycerol, and the levels of free fatty acid, unsaponifiable residue and fatty acid composition of carcass fat were not different from the controls. Organ weights, tumour incidence and tumour distribution were similar in control and test groups. A complete histological examination of major organs showed nothing remarkable.

For triglycerides:

Carboxylic acid esters will undergo enzymatic hydrolysis by ubiquitously expressed GI esterases. The rate of hydrolysis is dependant on the structure of the ester, and may therefore be rapid or rather slow. Thus, due to hydrolysis, predictions on oral absorption based on the physico-chemical characteristics of the intact parent substance alone may no longer apply.

When considering the hydrolysis product glycerol, absorption is favoured based on passive and active absorption of glycerol.

The Cosmetic Ingredient Review (CIR) Expert Panel has issued three final reports on the safety of 25 triglycerides, i.e., fatty acid triesters of

Ranvet's Hydroxy P Hydroxyprogesterone Injection

glycerin

High purity is needed for the triglycerides. Previously the Panel published a final report on a diglycerides, and concluded that the ingredients in the diglyceride family are safe in the present practices of use and concentration provided the content of 1,2-diesters is not high enough to induce epidermal hyperplasia. The Panel discussed that there was an increased level of concern because of data regarding the induction of protein kinase C (PKC) and the tumor promotion potential of 1,2-diacylglycerols. The Panel noted that, nominally, glyceryl-1,3-diesters contain 1,2-diesters, raising the concern that 1,2-diesters could potentially induce hyperplasia. The Panel did note that these compounds are more likely to cause these effects when the fatty acid chain length is ≤ 14 carbons, when one fatty acid is saturated and one is not, and when given at high doses, repeatedly. Although minimal percutaneous absorption of triolein has been demonstrated in vivo using guinea pigs (but not hairless mice) and in vitro using full-thickness skin from hairless mice, the Expert Panel recognizes that, reportedly, triolein and tricaprylin can enhance the skin penetration of other chemicals, and recommends that care should be exercised in using these and other glyceryl triesters in cosmetic products. The Panel acknowledged that some of the triglycerides may be formed from plant-derived or animal-derived constituents. The Panel thus expressed concern regarding pesticide residues and heavy metals that may be present in botanical ingredients. They stressed that the cosmetics industry should continue to use the necessary procedures to sufficiently limit amounts of such impurities in an ingredient before blending them into cosmetic formulations. Additionally, the Panel considered the risks inherent in using animal-derived ingredients, namely the transmission of infectious agents. Although tallow may be used in the manufacture of glyceryl tallowate and is clearly animal-derived, the Panel notes that tallow is highly processed, and tallow derivatives even more so. The Panel agrees with determinations by the U.S. FDA that tallow derivatives are not risk materials for transmission of infectious agents.

Finally, the Panel discussed the issue of incidental inhalation exposure, as some of the triglycerides are used in cosmetic sprays and could possibly be inhaled. For example, triethylhexanoin and triisostearin are reported to be used at maximum concentrations of 36% and 30%, respectively, in perfumes, and 14.7% and 10.4%, respectively, in face powders. The Panel noted that in aerosol products, 95% – 99% of droplets/particles would not be respirable to any appreciable amount. Furthermore, droplets/particles deposited in the nasopharyngeal or bronchial regions of the respiratory tract present no toxicological concerns based on the chemical and biological properties of these ingredients. Coupled with the small actual exposure in the breathing zone and the concentrations at which the ingredients are used, the available information indicates that incidental inhalation would not be a significant route of exposure that might lead to local respiratory or systemic effects.

Cosmetic Ingredient Review (CIR) : Amended Safety Assessment of Triglycerides as Used in Cosmetics August 2017
Glyceryl triesters are also known as triglycerides; ingested triglycerides are metabolized to monoglycerides, free fatty acids, and glycerol, all of which are absorbed in the intestinal mucosa and undergo further metabolism. Dermal absorption of Triolein in mice was nil; the oil remained at the application site. Only slight absorption was seen in guinea pig skin. Tricaprylin and other glyceryl triesters have been shown to increase the skin penetration of drugs. Little or no acute, subchronic, or chronic oral toxicity was seen in animal studies unless levels approached a significant percentage of caloric intake. Subcutaneous injections of Tricaprylin in rats over a period of 5 weeks caused a granulomatous reaction characterized by oil deposits surrounded by macrophages. Dermal application was not associated with significant irritation in rabbit skin. Ocular exposures were, at most, mildly irritating to rabbit eyes. No evidence of sensitization or photosensitization was seen in a guinea pig maximization test. Most of the genotoxicity test systems were negative. Tricaprylin, Trioctanoin, and Triolein have historically been used as vehicles in carcinogenicity testing of other chemicals. In one study, subcutaneous injection of Tricaprylin in newborn mice produced more tumors in lymphoid tissue than were seen in untreated animals, whereas neither subcutaneous or intraperitoneal injection in 4- to 6-week-old female mice produced any tumors in another study. Trioctanoin injected subcutaneously in hamsters produced no tumors. Trioctanoin injected intraperitoneally in pregnant rats was associated with an increase in mammary tumors in the offspring compared to that seen in offspring of untreated animals, but similar studies in pregnant hamsters and rabbits showed no tumors in the offspring. One study of Triolein injected subcutaneously in rats showed no tumors at the injection site. As part of an effort to evaluate vehicles used in carcinogenicity studies, the National Toxicology Program conducted a 2-year carcinogenicity study in rats given Tricaprylin by gavage. This treatment was associated with a statistically significant dose-related increase in pancreatic acinar cell hyperplasia and adenoma, but there were no acinar carcinomas, the incidence of mononuclear leukemia was less, and nephropathy findings were reduced, all compared to corn oil controls. Overall, the study concluded that Tricaprylin did not offer significant advantages over corn oil as vehicles in carcinogenicity studies. Trilaurin was found to inhibit the formation of neoplasms initiated by dimethylbenzanthracene (DMBA) and promoted by croton oil. Tricaprylin was not teratogenic in mice or rats, but some reproductive effects were seen in rabbits. A low level of fetal eye abnormalities and a small percentage of abnormal sperm were reported in mice injected with Trioctanoin as a vehicle control. Clinical tests of Trilaurin at 36.3% in a commercial product applied to the skin produced no irritation reactions. Trilaurin, Tristearin, and Tribehenin at 40%, 1.68%, and 0.38%, respectively, in commercial products were also negative in repeated-insult patch tests. Tristearin at 0.32% in a commercial product induced transient, mild to moderate, ocular irritation after instillation into the eyes of human subjects. Based on the enhancement of penetration of other chemicals by skin treatment with glyceryl triesters, it is recommended that care be exercised in using them in cosmetic products.

Cosmetic Ingredient Review (CIR) Expert Panel: Final Report on the Safety Assessment of Trilaurin etc: Int J Toxicol, 20 Suppl 4, 61-94 2001

Some tumorigenic effects have been reported in animal studies using castor oil

The castor seed contains ricin, a toxic protein. Heating during the oil extraction process denatures and inactivates the protein. However, harvesting castor beans may not be without risk. Allergenic compounds found on the plant surface can cause permanent nerve damage, making the harvest of castor beans a human health risk.

The United States Food and Drug Administration (FDA) has categorized castor oil as "generally recognized as safe and effective" (GRASE) for over-the-counter use as a laxative with its major site of action the small intestine where it is digested into ricinoleic acid. Despite castor oil being widely used to start labor in pregnant women, to date there is not enough research to show whether it is effective to ripen the cervix or induce labour

Due to its foul taste a heavy dose of castor oil was formerly used as a humiliating punishment for children and adults. Victims of this treatment did sometimes die, as the dehydrating effects of the oil-induced diarrhea; however, even those victims who survived had to bear the humiliation of the laxative effects resulting from excessive consumption of the oil.

Several instances of sensitization to castor oil in cosmetics have been reported, including an allergic reaction to a make-up remover and contact dermatitis caused by use of a lipstick containing castor oil. Hypersensitivity reactions such as angioedema, rhinitis, asthma, and scarlatiniform rashes have been reported in factory workers involved in the extraction of castor oil, or in association with ingesting it.

Relatively few studies of castor oil toxicity have been conducted with experimental animals, and no studies were located concerning its absorption, distribution, metabolism, or excretion. Subcutaneous injection of 0.1 ml of castor oil in adult C57Bl/6 mice, daily for 4 weeks, was associated with the presence of electron dense lipid inclusions in parenchymal cells of the zona fasciculata of the adrenal gland. Gavage administration of 1 ml/kg to rhesus monkeys, daily for 4 days, caused mild morphological changes in the small intestine, characterized by lipid droplets along the mucosal epithelium and in the underlying lamina propria. This was considered a possible indication that castor oil had reduced lipid metabolism in the intestinal epithelium.

Because of widespread human exposure, large annual production and use, and the lack of studies characterizing the effect of exposures of moderate duration, the subchronic toxicity of castor oil was evaluated by administering diet formulations to F344/N rats and B6C3F1 mice for 13 weeks. Exposure to castor oil in the diet at concentrations up to 10% had no effect on survival of F344/N rats. No significant differences in average food consumption among each sex were observed, although food consumption of male and female rats receiving diets containing 10% castor oil was slightly lower than that of controls. Hematological effects of the castor oil diets among male rats included a slight decrease in MCHC at day 21 in those receiving the 10% diet; a statistically significant decrease in MCV among the 10% group; a decrease in MCH among the 5% and 10% groups; and an increase in platelets among the 1.25%, 5%, and 10% groups. The only change observed among female rats was a statistically significant decrease in reticulocyte counts at day 5 in groups receiving the 0.62% or 10% diets. None of these changes was considered biologically significant.

A treatment- and dose-related increase in the activity of serum alkaline phosphatase was observed in male and female rats at days 5 and 21, and at study termination. Total bile acids were increased among males receiving the higher dietary levels at days 5 and 21 but were not increased at study termination. Other minor changes included increases in albumin observed at study termination in males receiving 5% diets and at day 5 in females receiving 10% diets, and an increase in urea nitrogen at study termination in males that received 0.62% diets and a decrease at day 5 in females that received castor oil at 10% in the diet. Absolute liver weights and the liver-to-body-weight ratio were increased in male rats that received diets containing 10% castor oil. Heart-to-body-weight ratios were increased in groups of male rats receiving 0.62%, 2.5%, and 10% diets; however, absolute heart weights were not increased, and the differences in body weight ratios were small and not considered treatment related. Using light microscopy, it was determined there were no morphologic changes associated with the slight differences in organ weights between

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	<p>groups. In male rats, there was a slight decrease in epididymal weight (6-7%) which occurred in the middle- and high-dose groups, but this was not dose-related. There were no effects on any other male rat reproductive endpoint, or on any female rat reproductive endpoint. Although there was some variation in epididymal weights, their small magnitude and the absence of changes in other endpoints suggested that there was little or no evidence of any reproductive toxicity associated with castor oil exposure. Histopathologic examination revealed an absence of compound-related lesions in any organ or tissue of rats exposed to castor oil in the diet.</p> <p>In genetic toxicity studies, castor oil (100-10,000 ug/plate) was not mutagenic in <i>Salmonella typhimurium</i> strains TA100, TA1535, TA97, or TA98 when tested with a preincubation protocol in the presence and the absence of exogenous metabolic activation (S9). Castor oil did not induce sister-chromatid exchanges or chromosome aberrations in Chinese hamster ovary cells treated with concentrations up to 5000 Og/ml with and without S9. No induction of micronuclei was observed in peripheral blood erythrocytes of male and female B6C3F1 mice sampled at the termination of the 13-week study.</p> <p>Castor oil was found not to be mutagenic or clastogenic in several in vitro genetic toxicity assays, and administration of diets containing up to 10% castor oil was not associated with toxicity to any specific organ, organ system, or tissue in this study</p>
BENZYL BENZOATE	<p>The following information refers to contact allergens as a group and may not be specific to this product.</p> <p>Contact allergies quickly manifest themselves as contact eczema, more rarely as urticaria or Quincke's oedema. The pathogenesis of contact eczema involves a cell-mediated (T lymphocytes) immune reaction of the delayed type. Other allergic skin reactions, e.g. contact urticaria, involve antibody-mediated immune reactions. The significance of the contact allergen is not simply determined by its sensitisation potential: the distribution of the substance and the opportunities for contact with it are equally important. A weakly sensitising substance which is widely distributed can be a more important allergen than one with stronger sensitising potential with which few individuals come into contact. From a clinical point of view, substances are noteworthy if they produce an allergic test reaction in more than 1% of the persons tested.</p> <p>Adverse reactions to fragrances in perfumes and in fragranced cosmetic products include allergic contact dermatitis, irritant contact dermatitis, photosensitivity, immediate contact reactions (contact urticaria), and pigmented contact dermatitis. Airborne and conubial contact dermatitis occur.</p> <p>Intolerance to perfumes, by inhalation, may occur if the perfume contains a sensitising principal. Symptoms may vary from general illness, coughing, phlegm, wheezing, chest-tightness, headache, exertional dyspnoea, acute respiratory illness, hayfever, and other respiratory diseases (including asthma). Perfumes can induce hyper-reactivity of the respiratory tract without producing an IgE-mediated allergy or demonstrable respiratory obstruction. This was shown by placebo-controlled challenges of nine patients to "perfume mix". The same patients were also subject to perfume provocation, with or without a carbon filter mask, to ascertain whether breathing through a filter with active carbon would prevent symptoms. The patients breathed through the mouth, during the provocations, as a nose clamp was used to prevent nasal inhalation. The patient's earlier symptoms were verified; breathing through the carbon filter had no protective effect. The symptoms were not transmitted via the olfactory nerve but they may have been induced by trigeminal reflex via the respiratory tract or by the eyes.</p> <p>Cases of occupational asthma induced by perfume substances such as isoamyl acetate, limonene, cinnamaldehyde and benzaldehyde, tend to give persistent symptoms even though the exposure is below occupational exposure limits.</p> <p>Inhalation intolerance has also been produced in animals. The emissions of five fragrance products, for one hour, produced various combinations of sensory irritation, pulmonary irritation, decreases in expiratory airflow velocity as well as alterations of the functional observational battery indicative of neurotoxicity in mice. Neurotoxicity was found to be more severe after mice were repeatedly exposed to the fragrance products, being four brands of cologne and one brand of toilet water.</p> <p>Contact allergy to fragrances is relatively common, affecting 1 to 3% of the general population, based on limited testing with eight common fragrance allergens and about 16 % of patients patch tested for suspected allergic contact dermatitis.</p> <p>Contact allergy to fragrance ingredients occurs when an individual has been exposed, on the skin, to a sufficient degree of fragrance contact allergens. Contact allergy is a life-long, specifically altered reactivity in the immune system. This means that once contact allergy is developed, cells in the immune system will be present which can recognise and react towards the allergen. As a consequence, symptoms, i.e. allergic contact dermatitis, may occur upon re-exposure to the fragrance allergen(s) in question. Allergic contact dermatitis is an inflammatory skin disease characterised by erythema, swelling and vesicles in the acute phase. If exposure continues it may develop into a chronic condition with scaling and painful fissures of the skin. Allergic contact dermatitis to fragrance ingredients is most often caused by cosmetic products and usually involves the face and/or hands. It may affect fitness for work and the quality of life of the individual. Fragrance contact allergy has long been recognised as a frequent and potentially disabling problem. Prevention is possible as it is an environmental disease and if the environment is modified (e.g. by reduced use concentrations of allergens), the disease frequency and severity will decrease. Fragrance contact allergy is mostly non-occupational and related to the personal use of cosmetic products. Allergic contact dermatitis can be severe and widespread, with a significant impairment of quality of life and potential consequences for fitness for work. Thus, prevention of contact sensitisation to fragrances, both in terms of primary prevention (avoiding sensitisation) and secondary prevention (avoiding relapses of allergic contact dermatitis in those already sensitised), is an important objective of public health risk management measure.</p> <p>Hands: Contact sensitisation may be the primary cause of hand eczema, or may be a complication of irritant or atopic hand eczema. The number of positive patch tests has been reported to correlate with the duration of hand eczema, indicating that long-standing hand eczema may often be complicated by sensitisation. Fragrance allergy may be a relevant problem in patients with hand eczema; perfumes are present in consumer products to which their hands are exposed. A significant relationship between hand eczema and fragrance contact allergy has been found in some studies based on patients investigated for contact allergy. However, hand eczema is a multi-factorial disease and the clinical significance of fragrance contact allergy in (severe) chronic hand eczema may not be clear.</p> <p>Axillae Bilateral axillary (underarm) dermatitis may be caused by perfume in deodorants and, if the reaction is severe, it may spread down the arms and to other areas of the body. In individuals who consulted a dermatologist, a history of such first-time symptoms was significantly related to the later diagnosis of perfume allergy.</p> <p>Face Facial eczema is an important manifestation of fragrance allergy from the use of cosmetic products (16). In men, after-shave products can cause an eczematous eruption of the beard area and the adjacent part of the neck and men using wet shaving as opposed to dry have been shown to have an increased risk of being fragrance allergic.</p> <p>Irritant reactions (including contact urticaria): Irritant effects of some individual fragrance ingredients, e.g. citral are known. Irritant contact dermatitis from perfumes is believed to be common, but there are no existing investigations to substantiate this. Many more people complain about intolerance or rashes to perfumes/perfumed products than are shown to be allergic by testing. This may be due to irritant effects or inadequate diagnostic procedures. Fragrances may cause a dose-related contact urticaria of the non-immunological type (irritant contact urticaria). Cinnamal, cinnamic alcohol, and Myroxylon pereirae are well recognised causes of contact urticaria, but others, including menthol, vanillin and benzaldehyde have also been reported. The reactions to Myroxylon pereirae may be due to cinnamates. A relationship to delayed contact hypersensitivity was suggested, but no significant difference was found between a fragrance-allergic group and a control group in the frequency of immediate reactions to fragrance ingredients in keeping with a nonimmunological basis for the reactions seen.</p> <p>Pigmentary anomalies: The term "pigmented cosmetic dermatitis" was introduced in 1973 for what had previously been known as melanosis faciei feminae when the mechanism (type IV allergy) and causative allergens were clarified. It refers to increased pigmentation, usually on the face/neck, often following sub-clinical contact dermatitis. Many cosmetic ingredients were patch tested at non-irritant concentrations and statistical evaluation showed that a number of fragrance ingredients were associated: jasmine absolute, ylang-ylang oil, cananga oil, benzyl salicylate, hydroxycitronellal, sandalwood oil, geraniol, geranium oil.</p> <p>Photo-reactions Musk ambrette produced a considerable number of allergic photocontact reactions (in which UV-light is required) in the 1970s and was later banned from use in the EU. Nowadays, photoallergic contact dermatitis is uncommon. Furocoumarins (psoralens) in some plant-derived fragrance ingredients caused phototoxic reactions with erythema followed by hyperpigmentation resulting in Berloque dermatitis. There are now limits for the amount of furocoumarins in fragrance products. Phototoxic reactions still occur but are rare.</p> <p>General/respiratory: Fragrances are volatile and therefore, in addition to skin exposure, a perfume also exposes the eyes and naso-respiratory tract. It is estimated that 2-4% of the adult population is affected by respiratory or eye symptoms by such an exposure. It is known that exposure to fragrances may exacerbate pre-existing asthma. Asthma-like symptoms can be provoked by sensory mechanisms. In an epidemiological investigation, a significant association was found between respiratory complaints related to fragrances and contact allergy to fragrance ingredients, in addition to hand eczema, which were independent risk factors in a multivariate analysis.</p> <p>Fragrance allergens act as haptens, i.e. low molecular weight chemicals that are immunogenic only when attached to a carrier protein. However, not all sensitising fragrance chemicals are directly reactive, but require previous activation. A prehapten is a chemical that itself is non- or low-sensitising, but that is transformed into a hapten outside the skin by simple chemical transformation (air oxidation, photoactivation) and</p>

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without the requirement of specific enzymatic systems. A prohaptens is a chemical that itself is non- or low-sensitising but that is transformed into a haptens in the skin (bioactivation) usually via enzyme catalysis. It is not always possible to know whether a particular allergen that is not directly reactive acts as a prehapten or as a prohaptens, or both, because air oxidation and bioactivation can often give the same product (geraniol is an example). Some chemicals might act by all three pathways.

Prohaptens

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

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

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

QSAR prediction: The relationships between molecular structure and reactivity that form the basis for structural alerts are based on well established principles of mechanistic organic chemistry. Examples of structural alerts are aliphatic aldehydes (alerting to the possibility of sensitisation via a Schiff base reaction with protein amino groups), and alpha,beta-unsaturated carbonyl groups, C=C-CO- (alerting to the possibility of sensitisation via Michael addition of protein thiol groups). Prediction of the sensitisation potential of compounds that can act via abiotic or metabolic activation (pre- or prohaptens) is more complex compared to that of compounds that act as direct haptens without any activation. The autoxidation patterns can differ due to differences in the stability of the intermediates formed, e.g. it has been shown that autoxidation of the structural isomers linalool and geraniol results in different major haptens/allergens. Moreover, the complexity of the prediction increases further for those compounds that can act both as pre- and prohaptens. In such cases, the impact on the sensitisation potency depends on the degree of abiotic activation (e.g. autoxidation) in relation to the metabolic activation.

For certain benzyl derivatives:

All members of this group (benzyl, benzoate and 2-hydroxybenzoate (salicylate) esters) contain a benzene ring bonded directly to an oxygenated functional group (aldehyde or ester) that is hydrolysed and/or oxidised to a benzoic acid derivative. As a stable animal metabolite, benzoic acid derivatives are efficiently excreted primarily in the urine. These reaction pathways have been reported in both aquatic and terrestrial species. The similarity of their toxicologic properties is a reflection their participation in these common metabolic pathways.

In general, members of this group are rapidly absorbed through the gastrointestinal tract, metabolised primarily in the liver, and excreted in the urine either unchanged or as conjugates of benzoic acid derivatives. At high doses, conjugation pathways (e.g., glycine) may be saturated; in which case, free benzoic acid is excreted unchanged. Absorption, distribution and excretion studies have been conducted several members of this group and structural relatives. These substances exhibit remarkably similar patterns of pharmacokinetics and metabolism. The benzyl, benzoate, and 2-hydroxybenzoate (salicylate) esters which comprise this category are hydrolysed to the corresponding alcohols and carboxylic acids. The benzyl alcohol and benzaldehyde derivatives are oxidised to the corresponding benzoic acid derivatives that are subsequently excreted unchanged or as glycine or glucuronic acid conjugates. If methoxy or phenolic functional groups are present on the benzene ring, additional minor metabolic options become available. O-demethylation yields the corresponding phenol that is subsequently excreted as the glucuronic acid or sulfate conjugates. At high dose levels, gut microflora may act to produce minor amounts of reduction metabolites.

Acute toxicity: Oral LD50 values ranged from 887 to greater than 5,000 mg/kg bw demonstrating the low to moderate toxicity of these compounds.

Repeat dose toxicity: Overall, numerous repeat-dose studies using various routes of exposure have been conducted in different animal species with members of this chemical category or their close structural relatives. It is important to note that all the benzyl derivatives in this category are eventually metabolised to a common metabolite, benzoic acid, and are rapidly excreted in the urine as benzoic acid or as its glycine, sulfate, or glucuronic acid conjugate. For this reason, the repeat-dose studies currently available provide adequate support for the safety of the benzyl derivatives. Moreover, the levels at which no adverse effects were reported were sufficiently high to accommodate any potential differences among the members of the category.

Reproductive toxicity: Several reproductive toxicity studies have been conducted with representatives of this group and produced no evidence of reproductive toxicity. As with the repeat-dose studies, the benzyl derivatives generally follow the similar metabolic pathways and the studies conducted provide an adequate database for this endpoint. In addition, the dose levels tested provide margins of safety large enough to accommodate any differences among the group.

Developmental toxicity: Representative substances from this group were tested for developmental toxicity with uniform results, and indicated no teratogenic potential in the absence of maternal toxicity. Again, the representative substances undergo similar metabolism to the entire benzyl derivative group and therefore, provide an adequate representation for this endpoint.

Genetic toxicity: Overall, *in vitro* and *in vivo* genotoxicity studies have been conducted with substances representing the structural characteristics of the benzyl category. The results of these studies were predominantly negative demonstrating a low order of genotoxic potential. Limited positive and/or equivocal findings have been reported for 3 aldehydes and benzyl acetate, but, in most cases, other studies of the same endpoint with same test substance show no activity. Most importantly, *in vivo* studies on benzaldehyde derivatives and closely related benzyl esters have all yielded negative results. These negative *in vivo* genotoxicity assays are supported by the lack of tumorigenicity in chronic animal studies with representatives of this group.

Data available for more than 100 *in vitro* genotoxicity assays for 9 members of the category and five metabolic precursors or metabolites of benzyl derivatives indicate a low genotoxic potential for members of this chemical category.

Equivocal results have been reported mainly for aromatic aldehydes in the MLA and ABS assays.

A member or analogue of a group of benzyl derivatives generally regarded as safe (GRAS) based in part on their self-limiting properties as flavouring substances in food; their rapid absorption, metabolic detoxification, and excretion in humans and other animals, their low level of flavour use, the wide margin of safety between the conservative estimates of intake and the no-observed-adverse effect levels determined from chronic and subchronic studies and the lack of significant genotoxic and mutagenic potential. This evidence of safety is supported by the fact that the intake of benzyl derivatives as natural components of traditional foods is greater than the intake as intentionally added flavouring substances. All members of this group are aromatic primary alcohols, aldehydes, carboxylic acids or their corresponding esters or acetals. The substances in this group:

- contain a benzene ring substituted with a reactive primary oxygenated functional group or can be hydrolysed to such a functional group
- the major pathway of metabolic detoxification involves hydrolysis and oxidation to yield the corresponding benzoic acid derivative which is excreted either as the free acid or the glycine conjugate
- they show a consistent pattern of toxicity in both short- and long- term studies and
- they exhibit no evidence of genotoxicity in standardised batteries of *in vitro* and *in vivo* assays.

The benzyl derivatives are rapidly absorbed through the gut, metabolised primarily in the liver, and excreted in the urine as glycine conjugates of benzoic acid derivatives.

In general, aromatic esters are hydrolysed *in vivo* through the catalytic activity of carboxylesterases, the most important of which are the A-esterases. Hydrolysis of benzyl and benzoate esters to yield corresponding alcohols and carboxylic acids and hydrolysis of acetals to yield benzaldehyde and simple alcohols have been reported in several experiments.

The alcohols and aldehydes are rapidly oxidised to benzoic acid while benzoate esters are hydrolysed to benzoic acid.

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	Flavor and Extract Manufacturers Association (FEMA)
17ALPHA-HYDROXYPROGESTERONE CAPROATE	Paternal effects, effects on fertility, effects on foetus/ embryo, (foetotoxicity, foetolethality), effects on newborn recorded IARC Cancer Review: Animal Inadequate Evidence Exposure to the material for prolonged periods may cause physical defects in the developing embryo (teratogenesis).
CASTOR OIL & 17ALPHA-HYDROXYPROGESTERONE CAPROATE	No significant acute toxicological data identified in literature search.

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

Legend: ✗ – Data either not available or does not fill the criteria for classification
✓ – Data available to make classification

SECTION 12 Ecological information

Toxicity

Ranvet's Hydroxy P Hydroxyprogesterone Injection	Endpoint	Test Duration (hr)	Species	Value	Source
	Not Available	Not Available	Not Available	Not Available	Not Available
castor oil	Endpoint	Test Duration (hr)	Species	Value	Source
	EC50	72h	Algae or other aquatic plants	>100mg/l	2
	NOEC(ECx)	72h	Algae or other aquatic plants	100mg/l	2
	EC50	48h	Crustacea	100mg/l	2
benzyl benzoate	Endpoint	Test Duration (hr)	Species	Value	Source
	EC50	72h	Algae or other aquatic plants	0.311mg/l	2
	NOEC(ECx)	72h	Algae or other aquatic plants	0.065mg/l	2
	EC50	48h	Crustacea	3.09mg/l	2
	LC50	96h	Fish	1.06-2.21mg/L	4
17alpha-hydroxyprogesterone caproate	Endpoint	Test Duration (hr)	Species	Value	Source
	Not Available	Not Available	Not Available	Not Available	Not Available
Legend: Extracted from 1. IUCLID Toxicity Data 2. Europe ECHA Registered Substances - Ecotoxicological Information - Aquatic Toxicity 4. US EPA, Ecotox database - Aquatic Toxicity Data 5. ECETOC Aquatic Hazard Assessment Data 6. NITE (Japan) - Bioconcentration Data 7. METI (Japan) - Bioconcentration Data 8. Vendor Data					

Toxic to aquatic organisms, may cause long-term adverse effects in the aquatic environment.
Do NOT allow product to come in contact with surface waters or to intertidal areas below the mean high water mark. Do not contaminate water when cleaning equipment or disposing of equipment wash-waters.
Wastes resulting from use of the product must be disposed of on site or at approved waste sites.
DO NOT discharge into sewer or waterways.

Persistence and degradability

Ingredient	Persistence: Water/Soil	Persistence: Air
benzyl benzoate	HIGH	HIGH
17alpha-hydroxyprogesterone caproate	HIGH	HIGH

Bioaccumulative potential

Ingredient	Bioaccumulation
benzyl benzoate	MEDIUM (LogKOW = 3.97)
17alpha-hydroxyprogesterone caproate	HIGH (LogKOW = 5.6339)

Mobility in soil

Ingredient	Mobility
benzyl benzoate	LOW (KOC = 3119)
17alpha-hydroxyprogesterone caproate	LOW (KOC = 41950)

SECTION 13 Disposal considerations


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Waste treatment methods

Product / Packaging disposal	<ul style="list-style-type: none"> ▶ Recycle wherever possible or consult manufacturer for recycling options. ▶ Consult State Land Waste Authority for disposal. ▶ Bury or incinerate residue at an approved site. ▶ Recycle containers if possible, or dispose of in an authorised landfill.
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SECTION 14 Transport information

Labels Required

Marine Pollutant	
HAZCHEM	Not Applicable

Land transport (ADG): NOT REGULATED FOR TRANSPORT OF DANGEROUS GOODS

Air transport (ICAO-IATA / DGR): NOT REGULATED FOR TRANSPORT OF DANGEROUS GOODS

Sea transport (IMDG-Code / GGVSee): NOT REGULATED FOR TRANSPORT OF DANGEROUS GOODS

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

Not Applicable

Transport in bulk in accordance with MARPOL Annex V and the IMSBC Code

Product name	Group
castor oil	Not Available
benzyl benzoate	Not Available
17alpha-hydroxyprogesterone caproate	Not Available

Transport in bulk in accordance with the ICG Code

Product name	Ship Type
castor oil	Not Available
benzyl benzoate	Not Available
17alpha-hydroxyprogesterone caproate	Not Available

SECTION 15 Regulatory information

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

castor oil is found on the following regulatory lists

Australian Inventory of Industrial Chemicals (AIIC)

benzyl benzoate is found on the following regulatory lists

Australia Hazardous Chemical Information System (HCIS) - Hazardous Chemicals

Australian Inventory of Industrial Chemicals (AIIC)

17alpha-hydroxyprogesterone caproate is found on the following regulatory lists

Australia Chemicals with non-industrial uses removed from the Australian Inventory of Chemical Substances (old Inventory)

Australia Standard for the Uniform Scheduling of Medicines and Poisons (SUSMP) - Schedule 4

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

International Agency for Research on Cancer (IARC) - Agents Classified by the IARC Monographs - Group 2B: Possibly carcinogenic to humans

National Inventory Status

National Inventory	Status
Australia - AIIC / Australia Non-Industrial Use	Yes
Canada - DSL	No (17alpha-hydroxyprogesterone caproate)
Canada - NDSL	No (castor oil; benzyl benzoate; 17alpha-hydroxyprogesterone caproate)
China - IECSC	No (17alpha-hydroxyprogesterone caproate)
Europe - EINEC / ELINCS / NLP	Yes
Japan - ENCS	Yes
Korea - KECI	No (17alpha-hydroxyprogesterone caproate)
New Zealand - NZIoC	Yes
Philippines - PICCS	Yes
USA - TSCA	No (17alpha-hydroxyprogesterone caproate)
Taiwan - TCSI	Yes
Mexico - INSQ	No (17alpha-hydroxyprogesterone caproate)

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National Inventory	Status
Vietnam - NCI	No (17alpha-hydroxyprogesterone caproate)
Russia - FBEPH	No (17alpha-hydroxyprogesterone caproate)
Legend:	Yes = All CAS declared ingredients are on the inventory No = One or more of the CAS listed ingredients are not on the inventory. These ingredients may be exempt or will require registration.

SECTION 16 Other information

Revision Date	12/10/2021
Initial Date	09/12/2012

SDS Version Summary

Version	Date of Update	Sections Updated
5.1	11/01/2019	One-off system update. NOTE: This may or may not change the GHS classification
6.1	12/10/2021	Classification change due to full database hazard calculation/update.

Other information

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.

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

Definitions and abbreviations

PC—TWA: Permissible Concentration-Time Weighted Average
 PC—STEL: Permissible Concentration-Short Term Exposure Limit
 IARC: International Agency for Research on Cancer
 ACGIH: American Conference of Governmental Industrial Hygienists
 STEL: Short Term Exposure Limit
 TEEL: Temporary Emergency Exposure Limit
 IDLH: Immediately Dangerous to Life or Health Concentrations
 ES: Exposure Standard
 OSF: Odour Safety Factor
 NOAEL :No Observed Adverse Effect Level
 LOAEL: Lowest Observed Adverse Effect Level
 TLV: Threshold Limit Value
 LOD: Limit Of Detection
 OTV: Odour Threshold Value
 BCF: BioConcentration Factors
 BEI: Biological Exposure Index
 AIIC: Australian Inventory of Industrial Chemicals
 DSL: Domestic Substances List
 NDSL: Non-Domestic Substances List
 IECSC: Inventory of Existing Chemical Substance in China
 EINECS: European Inventory of Existing Commercial chemical Substances
 ELINCS: European List of Notified Chemical Substances
 NLP: No-Longer Polymers
 ENCS: Existing and New Chemical Substances Inventory
 KECI: Korea Existing Chemicals Inventory
 NZIoC: New Zealand Inventory of Chemicals
 PICCS: Philippine Inventory of Chemicals and Chemical Substances
 TSCA: Toxic Substances Control Act
 TCSI: Taiwan Chemical Substance Inventory
 INSQ: Inventario Nacional de Sustancias Químicas
 NCI: National Chemical Inventory
 FBEPH: Russian Register of Potentially Hazardous Chemical and Biological Substances

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