

Kit Revision Date: 10/12/2021

8329TCS THERMALLY CONDUCTIVE EPOXY ADHESIVE KIT

MG Chemicals Multipart Product Kit

This product is a kit made up of multiple parts. Each part is an independently packaged chemical component and has independent hazard assessments.

Kit Content

Part	Product Name	Product Use
Α	8329TCS-A	Thermally conductive adhesive resin
В	8329TCS-B	Thermally conductive adhesive hardener

Safety Data Sheets for each part listed above follow this cover sheet.

Transportation Instruction

NOT REGULATED by all mode of transport through special provisions provided in Section 14. This applies to $\underline{\text{all}}$ parts included in the kit.



8329TCS-A Thermally Conductive Epoxy Adhesive MG Chemicals UK Limited

Version No: A-2.00

Safety data sheet according to REACH Regulation (EC) No 1907/2006, as amended by UK REACH Regulations SI 2019/758

Issue Date: 10/12/2021 Revision Date: 10/12/2021 L.REACH.GB.EN

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

1.1. Product Identifier

Product name	8329TCS-A		
Synonyms SDS Code: 8329TCS-A; 8329TCS-6ML, 8329TCS-50ML, 8329TCS-200ML UFI:F0F0-D04V-500R-7SEX			
Other means of identification Thermally Conductive Epoxy Adhesive			

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

Relevant identified uses	Thermally conductive adhesive epoxy resin	
Uses advised against	Not Applicable	

1.3. Details of the supplier of the safety data sheet

Registered company name	MG Chemicals UK Limited	MG Chemicals (Head office)	
Address	Heame House, 23 Bilston Street, Sedgely Dudley DY3 1JA United Kingdom	9347 - 193 Street Surrey V4N 4E7 British Columbia Canada	
Telephone +(44) 1663 362888		+(1) 800-201-8822	
Fax Not Available		+(1) 800-708-9888	
Website Not Available		www.mgchemicals.com	
Email sales@mgchemicals.com		Info@mgchemicals.com	

1.4. Emergency telephone number

Association / Organisation	Verisk 3E (Access code: 335388)		
Emergency telephone numbers	+(44) 20 35147487		
Other emergency telephone numbers	+(0) 800 680 0425		

SECTION 2 Hazards identification

2.1. Classification of the substance or mixture

Classified according to GB-CLP Regulation, UK SI 2019/720 and UK SI 2020/1567 [1]	H315 - Skin Corrosion/Irritation Category 2, H319 - Serious Eye Damage/Eye Irritation Category 2, H317 - Sensitisation (Skin) Category 1, H410 - Hazardous to the Aquatic Environment Long-Term Hazard Category 1
Legend:	1. Classified by Chemwatch; 2. Classification drawn from GB-CLP Regulation, UK SI 2019/720 and UK SI 2020/1567

2.2. Label elements

Hazard pictogram(s)





Signal word V

Warning

Hazard statement(s)

H315	Causes skin irritation.		
H319	Causes serious eye irritation.		
H317	May cause an allergic skin reaction.		
H410	H410 Very toxic to aquatic life with long lasting effects.		

Supplementary statement(s)

Not Applicable

Precautionary statement(s) Prevention

P280	Wear protective gloves, protective clothing, eye protection and face protection.		
P261	P261 Avoid breathing dust/fumes.		
P273	Avoid release to the environment.		
P264	P264 Wash all exposed external body areas thoroughly after handling.		
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	P362+P364 Take off contaminated clothing and wash it before reuse.		
P391	Collect spillage.		

Precautionary statement(s) Storage

Not Applicable

Precautionary statement(s) Disposal

Dispose of contents/container to authorised hazardous or special waste collection point in accordance with any local regulation.

2.3. Other hazards

Inhalation and/or ingestion may produce health damage*.

Cumulative effects may result following exposure*.

May produce discomfort of the respiratory system*.

Limited evidence of a carcinogenic effect*.

Possible respiratory sensitizer*.

bisphenol	F diglycidyl ether
	copolymer

Listed in the Europe Regulation (EU) 2018/1881 Specific Requirements for Endocrine Disruptors

SECTION 3 Composition / information on ingredients

3.1.Substances

See 'Composition on ingredients' in Section 3.2

3.2.Mixtures

1.CAS No 2.EC No 3.Index No 4.REACH No	%[weight]	Name	Classified according to GB-CLP Regulation, UK SI 2019/720 and UK SI 2020/1567	Nanoform Particle Characteristics
1.1344-28-1. 2.215-691-6 3.Not Available 4.Not Available	34	aluminium oxide	Not Applicable	Not Available
1.1314-13-2 2.215-222-5 3.030-013-00-7 4.Not Available	34	zinc oxide	Hazardous to the Aquatic Environment Acute Hazard Category 1, Hazardous to the Aquatic Environment Long-Term Hazard Category 1; H400, H410 [2]	Not Available
1.28064-14-4 2.Not Available 3.Not Available 4.Not Available	26	bisphenol F diglycidyl ether copolymer [e]	Skin Corrosion/Irritation Category 2, Serious Eye Damage/Eye Irritation Category 2, Sensitisation (Skin) Category 1, Hazardous to the Aquatic Environment Long-Term Hazard Category 2; H315, H319, H317, H411, EUH019, EUH205 [1]	Not Available
1.17557-23-2 2.241-536-7 3.603-094-00-7 4.Not Available	3	neopentyl glycol diglycidyl ether	Skin Corrosion/Irritation Category 2, Sensitisation (Skin) Category 1; H315, H317 [2]	Not Available
1.1333-86-4 2.215-609-9 435-640-3 422-130-0 3.Not Available 4.Not Available	0.8	carbon black	Carcinogenicity Category 2; H351 [1]	Not Available
Legend:	Classified by Chemwatch; 2. Classification drawn from GB-CLP Regulation, UK SI 2019/720 and UK SI 2020/1567; 3. Classification drawn from C&L * EU IOELVs available; [e] Substance identified as having endocrine disrupting properties			

SECTION 4 First aid measures

4.1. Description of first aid measures

Eye Contact

If this product comes in contact with the eyes:

Ingestion	 Give a slurry of activated charcoal in water to drink. NEVER GIVE AN UNCONSCIOUS PATIENT WATER TO DRINK. At least 3 tablespoons in a glass of water should be given. Although induction of vomiting may be recommended (IN CONSCIOUS PERSONS ONLY), such a first aid measure is dissuaded due to the risk of aspiration of stomach contents. (i) It is better to take the patient to a doctor who can decide on the necessity and method of emptying the stomach. (ii) Special circumstances may however exist; these include non-availability of charcoal and the ready availability of the doctor. NOTE: If vomiting is induced, lean patient forward or place on left side (head-down position, if possible) to maintain open airway and prevent aspiration. NOTE: Wear protective gloves when inducing vomiting. REFER FOR MEDICAL ATTENTION WITHOUT DELAY. 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. (ICSC20305/20307)
Inhalation	 If fumes or combustion products are inhaled remove from contaminated area. Lay patient down. Keep warm and rested. Prostheses such as false teeth, which may block airway, should be removed, where possible, prior to initiating first aid procedures. Apply artificial respiration if not breathing, preferably with a demand valve resuscitator, bag-valve mask device, or pocket mask as trained. Perform CPR if necessary. Transport to hospital, or doctor, without delay.
Skin Contact	If skin or hair contact occurs: P Quickly but gently, wipe material off skin with a dry, clean cloth. Immediately remove all contaminated clothing, including footwear. Wash skin and hair with running water. Continue flushing with water until advised to stop by the Poisons Information Centre. Transport to hospital, or doctor.
	 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.

4.2 Most important symptoms and effects, both acute and delayed

See Section 11

4.3. Indication of any immediate medical attention and special treatment needed

Treat symptomatically.

- Absorption of zinc compounds occurs in the small intestine.
- The metal is heavily protein bound.
- ▶ Elimination results primarily from faecal excretion.
- The usual measures for decontamination (Ipecac Syrup, lavage, charcoal or cathartics) may be administered, although patients usually have sufficient vomiting not to require them.
- ▶ CaNa2EDTA has been used successfully to normalise zinc levels and is the agent of choice.

[Ellenhorn and Barceloux: Medical Toxicology]

- Manifestation of aluminium toxicity include hypercalcaemia, anaemia, Vitamin D refractory osteodystrophy and a progressive encephalopathy (mixed dysarthria-apraxia of speech, asterixis, tremulousness, myoclonus, dementia, focal seizures). Bone pain, pathological fractures and proximal myopathy can occur.
- Symptoms usually develop insidiously over months to years (in chronic renal failure patients) unless dietary aluminium loads are excessive.
- Serum aluminium levels above 60 ug/ml indicate increased absorption. Potential toxicity occurs above 100 ug/ml and clinical symptoms are present when levels exceed 200 ug/ml.
- ▶ Deferoxamine has been used to treat dialysis encephalopathy and osteomalacia. CaNa2EDTA is less effective in chelating aluminium.

[Ellenhorn and Barceloux: Medical Toxicology]

Copper, magnesium, aluminium, antimony, iron, manganese, nickel, zinc (and their compounds) in welding, brazing, galvanising or smelting operations all give rise to thermally produced particulates of smaller dimension than may be produced if the metals are divided mechanically. Where insufficient ventilation or respiratory protection is available these particulates may produce 'metal fume fever' in workers from an acute or long term exposure.

- Onset occurs in 4-6 hours generally on the evening following exposure. Tolerance develops in workers but may be lost over the weekend. (Monday Morning Fever)
- Pulmonary function tests may indicate reduced lung volumes, small airway obstruction and decreased carbon monoxide diffusing capacity but these abnormalities resolve after several months.
- Although mildly elevated urinary levels of heavy metal may occur they do not correlate with clinical effects.
- ▶ The general approach to treatment is recognition of the disease, supportive care and prevention of exposure.
- Seriously symptomatic patients should receive chest x-rays, have arterial blood gases determined and be observed for the development of tracheobronchitis and pulmonary edema.

[Ellenhorn and Barceloux: Medical Toxicology]

SECTION 5 Firefighting measures

5.1. Extinguishing media

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

5.2. 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

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
- Combustible solid which burns but propagates flame with difficulty; it is estimated that most organic dusts are combustible (circa 70%) according to the circumstances under which the combustion process occurs, such materials may cause fires and / or dust explosions.
- Organic powders when finely divided over a range of concentrations regardless of particulate size or shape and suspended in air or some other oxidizing medium may form explosive dust-air mixtures and result in a fire or dust explosion (including secondary explosions).
- Avoid generating dust, particularly clouds of dust in a confined or unventilated space as dusts may form an explosive mixture with air, and any source of ignition, i.e. flame or spark, will cause fire or explosion. Dust clouds generated by the fine grinding of the solid are a particular hazard; accumulations of fine dust (420 micron or less) may burn rapidly and fiercely if ignited particles exceeding this limit will generally not form flammable dust clouds; once initiated, however, larger particles up to 1400 microns diameter will contribute to the propagation of an explosion.
- In the same way as gases and vapours, dusts in the form of a cloud are only ignitable over a range of concentrations; in principle, the concepts of lower explosive limit (LEL) and upper explosive limit (UEL) are applicable to dust clouds but only the LEL is of practical use; this is because of the inherent difficulty of achieving homogeneous dust clouds at high temperatures (for dusts the LEL is often called the 'Minimum Explosible Concentration', MEC).
- When processed with flammable liquids/vapors/mists, ignitable (hybrid) mixtures may be formed with combustible dusts. Ignitable mixtures will increase the rate of explosion pressure rise and the Minimum Ignition Energy (the minimum amount of energy required to ignite dust clouds MIE) will be lower than the pure dust in air mixture. The Lower Explosive Limit (LEL) of the vapour/dust mixture will be lower than the individual LELs for the vapors/mists or dusts.
- A dust explosion may release of large quantities of gaseous products; this in turn creates a subsequent pressure rise of explosive force capable of damaging plant and buildings and injuring people.
- Usually the initial or primary explosion takes place in a confined space such as plant or machinery, and can be of sufficient force to damage or rupture the plant. If the shock wave from the primary explosion enters the surrounding area, it will disturb any settled dust layers, forming a second dust cloud, and often initiate a much larger secondary explosion. All large scale explosions have resulted from chain reactions of this type.
- P Dry dust can be charged electrostatically by turbulence, pneumatic transport, pouring, in exhaust ducts and during transport.
- ▶ Build-up of electrostatic charge may be prevented by bonding and grounding.
- Powder handling equipment such as dust collectors, dryers and mills may require additional protection measures such as explosion venting.
- ▶ All movable parts coming in contact with this material should have a speed of less than 1-meter/sec
- A sudden release of statically charged materials from storage or process equipment, particularly at elevated temperatures and/ or pressure, may result in ignition especially in the absence of an apparent ignition source.
- One important effect of the particulate nature of powders is that the surface area and surface structure (and often moisture content) can vary widely from sample to sample, depending of how the powder was manufactured and handled; this means that it is virtually impossible to use flammability data published in the literature for dusts (in contrast to that published for gases and vapours).
- Autoignition temperatures are often quoted for dust clouds (minimum ignition temperature (MIT)) and dust layers (layer ignition temperature (LIT)); LIT generally falls as the thickness of the layer increases.

Combustion products include:

carbon monoxide (CO)

carbon dioxide (CO2)

aldehydes

metal oxides

other pyrolysis products typical of burning organic material.

When aluminium oxide dust is dispersed in air, firefighters should wear protection against inhalation of dust particles, which can also contain hazardous substances from the fire absorbed on the alumina particles.

SECTION 6 Accidental release measures

Fire/Explosion Hazard

6.1. Personal precautions, protective equipment and emergency procedures

See section 8

6.2. Environmental precautions

See section 12

6.3. Methods and material for containment and cleaning up

Environmental hazard - contain spillage.

- Clean up all spills immediately.
- Avoid contact with skin and eyes.
- Wear impervious gloves and safety glasses.
- ▶ Use dry clean up procedures and avoid generating dust.
- Vacuum up (consider explosion-proof machines designed to be grounded during storage and use).
- Do NOT use air hoses for cleaning
- ▶ Place spilled material in clean, dry, sealable, labelled container.

Environmental hazard - contain spillage.

Moderate hazard.

- CAUTION: Advise personnel in area.
- Alert Emergency Services and tell them location and nature of hazard.

Major Spills

Minor Spills

- Control personal contact by wearing protective clothing.
 Prevent, by any means available, spillage from entering drains or water courses.
- Recover product wherever possible.
- Figure 1. If DRY: Use dry clean up procedures and avoid generating dust. Collect residues and place in sealed plastic bags or other containers for disposal. IF WET: Vacuum/shovel up and place in labelled containers for disposal.
- ALWAYS: Wash area down with large amounts of water and prevent runoff into drains.
- ▶ If contamination of drains or waterways occurs, advise Emergency Services.

Continued...

6.4. Reference to other sections

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

SECTION 7 Handling and storage

7.1. Precautions for safe handling

- Avoid all personal contact, including inhalation.
- Wear protective clothing when risk of exposure occurs.
- Use in a well-ventilated area.
- Prevent concentration in hollows and sumps.
- DO NOT enter confined spaces until atmosphere has been checked.
- ▶ DO NOT allow material to contact humans, exposed food or food utensils.
- Avoid contact with incompatible materials.
- When handling, DO NOT eat, drink or smoke.
- ▶ Keep containers securely sealed when not in use.
- Avoid physical damage to containers.
- Always wash hands with soap and water after handling.
- ▶ Work clothes should be laundered separately. Launder contaminated clothing before re-use.
- Use good occupational work practice
- Observe manufacturer's storage and handling recommendations contained within this SDS.
- Atmosphere should be regularly checked against established exposure standards to ensure safe working conditions are maintained.
- Organic powders when finely divided over a range of concentrations regardless of particulate size or shape and suspended in air or some
 other oxidizing medium may form explosive dust-air mixtures and result in a fire or dust explosion (including secondary explosions)
- Minimise airborne dust and eliminate all ignition sources. Keep away from heat, hot surfaces, sparks, and flame.
- Safe handling
- Establish good housekeeping practices.
 Remove dust accumulations on a regular basis by vacuuming or gentle sweeping to avoid creating dust clouds.
- Use continuous suction at points of dust generation to capture and minimise the accumulation of dusts. Particular attention should be given to overhead and hidden horizontal surfaces to minimise the probability of a 'secondary' explosion. According to NFPA Standard 654, dust layers 1/32 in.(0.8 mm) thick can be sufficient to warrant immediate cleaning of the area.
- Do not use air hoses for cleaning.
- Minimise dry sweeping to avoid generation of dust clouds. Vacuum dust-accumulating surfaces and remove to a chemical disposal area. Vacuums with explosion-proof motors should be used.
- Control sources of static electricity. Dusts or their packages may accumulate static charges, and static discharge can be a source of ignition.
- Solids handling systems must be designed in accordance with applicable standards (e.g. NFPA including 654 and 77) and other national guidance.
- ▶ Do not empty directly into flammable solvents or in the presence of flammable vapors.
- The operator, the packaging container and all equipment must be grounded with electrical bonding and grounding systems. Plastic bags and plastics cannot be grounded, and antistatic bags do not completely protect against development of static charges.

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

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

Fire and explosion protection

See section 5

- Store in original containers.
- Keep containers securely sealed.
- Store in a cool, dry area protected from environmental extremes.
- ▶ Store away from incompatible materials and foodstuff containers.
- Protect containers against physical damage and check regularly for leaks.

Other information

▶ Observe manufacturer's storage and handling recommendations contained within this SDS.

For major quantities:

- Consider storage in bunded areas ensure storage areas are isolated from sources of community water (including stormwater, ground water, lakes and streams).
- Ensure that accidental discharge to air or water is the subject of a contingency disaster management plan; this may require consultation with local authorities.

7.2. Conditions for safe storage, including any incompatibilities

Suitable container

Storage incompatibility

- Lined metal can, lined metal pail/ can.
- Plastic pail.
- ▶ Polyliner drum.
- Packing as recommended by manufacturer.
- Check all containers are clearly labelled and free from leaks.

For aluminas (aluminium oxide):

Incompatible with hot chlorinated rubber.

In the presence of chlorine trifluoride may react violently and ignite.

-May initiate explosive polymerisation of olefin oxides including ethylene oxide.

-Produces exothermic reaction above 200°C with halocarbons and an exothermic reaction at ambient temperatures with halocarbons in the presence of other metals.

- Produces exothermic reaction with oxygen difluoride.
- -May form explosive mixture with oxygen difluoride.
- -Forms explosive mixtures with sodium nitrate. -Reacts vigorously with vinyl acetate.

Aluminium oxide is an amphoteric substance, meaning it can react with both acids and bases, such as hydrofluoric acid and sodium hydroxide, acting as an acid with a base and a base with an acid, neutralising the other and producing a salt.

- Zinc oxide:
- slowly absorbs carbon dioxide from the air.
 may react, explosively with magnesium and chlorinated rubber when heated
- is incompatible with linseed oil (may cause ignition)

Continued...

- WARNING: Avoid or control reaction with peroxides. All transition metal peroxides should be considered as potentially explosive. For example transition metal complexes of alkyl hydroperoxides may decompose explosively.

 The pi-complexes formed between chromium(0), vanadium(0) and other transition metals (haloarene-metal complexes) and mono-or
- poly-fluorobenzene show extreme sensitivity to heat and are explosive.
- Avoid reaction with borohydrides or cyanoborohydrides
- $\mbox{\ensuremath{\,^{\blacktriangleright}}}$ Avoid reaction with amines, mercaptans, strong acids and oxidising agents

Epoxides:

- are highly reactive with acids, bases, and oxidising and reducing agents.
- react, possibly violently, with anhydrous metal chlorides, ammonia, amines and group 1 metals.
- ▶ may polymerise in the presence of peroxides or heat polymerisation may be violent
- may react, possibly violently, with water in the presence of acids and other catalysts.
- Phenols are incompatible with strong reducing substances such as hydrides, nitrides, alkali metals, and sulfides.
- Avoid use of aluminium, copper and brass alloys in storage and process equipment.
- ▶ Heat is generated by the acid-base reaction between phenols and bases.
- Phenols are sulfonated very readily (for example, by concentrated sulfuric acid at room temperature), these reactions generate heat.
- ▶ Phenols are nitrated very rapidly, even by dilute nitric acid.
- Nitrated phenols often explode when heated. Many of them form metal salts that tend toward detonation by rather mild shock.
- Avoid strong acids, bases.

Glycidyl ethers:

- may form unstable peroxides on storage in air ,light, sunlight, UV light or other ionising radiation, trace metals inhibitor should be maintained at adequate levels
- may polymerise in contact with heat, organic and inorganic free radical producing initiators
 may polymerise with evolution of heat in contact with oxidisers, strong acids, bases and amines
- react violently with strong oxidisers, permanganates, peroxides, acyl halides, alkalis, ammonium persulfate, bromine dioxide
- attack some forms of plastics, coatings, and rubber

7.3. Specific end use(s)

See section 1.2

SECTION 8 Exposure controls / personal protection

8.1. Control parameters

Ingredient	DNELs Exposure Pattern Worker	PNECs Compartment
aluminium oxide	Dermal 0.84 mg/kg bw/day (Systemic, Chronic) Inhalation 3 mg/m³ (Systemic, Chronic) Inhalation 3 mg/m³ (Local, Chronic) Dermal 0.3 mg/kg bw/day (Systemic, Chronic) * Inhalation 0.75 mg/m³ (Systemic, Chronic) * Oral 1.32 mg/kg bw/day (Systemic, Chronic) * Inhalation 0.75 mg/m³ (Local, Chronic) *	74.9 µg/L (Water (Fresh)) 20 mg/L (STP)
zinc oxide	Dermal 83 mg/kg bw/day (Systemic, Chronic) Inhalation 5 mg/m³ (Systemic, Chronic) Inhalation 0.5 mg/m³ (Local, Chronic) Dermal 83 mg/kg bw/day (Systemic, Chronic) * Inhalation 2.5 mg/m³ (Systemic, Chronic) * Oral 0.83 mg/kg bw/day (Systemic, Chronic) *	0.19 µg/L (Water (Fresh)) 1.14 µg/L (Water - Intermittent release) 1.2 µg/L (Water (Marine)) 18 mg/kg sediment dw (Sediment (Fresh Water)) 6.4 mg/kg sediment dw (Sediment (Marine)) 0.7 mg/kg soil dw (Soil) 20 µg/L (STP) 0.16 mg/kg food (Oral)
carbon black	Inhalation 1 mg/m³ (Systemic, Chronic) Inhalation 0.5 mg/m³ (Local, Chronic) Inhalation 0.06 mg/m³ (Systemic, Chronic) *	1 mg/L (Water (Fresh)) 0.1 mg/L (Water - Intermittent release) 10 mg/L (Water (Marine))

^{*} Values for General Population

Occupational Exposure Limits (OEL)

INGREDIENT DATA

Source	Ingredient	Material name	TWA	STEL	Peak	Notes
UK Workplace Exposure Limits (WELs)	aluminium oxide	Aluminium oxides: respirable dust	4 mg/m3	Not Available	Not Available	Not Available
UK Workplace Exposure Limits (WELs)	aluminium oxide	Aluminium oxides: inhalable dust	10 mg/m3	Not Available	Not Available	Not Available
UK Workplace Exposure Limits (WELs)	carbon black	Carbon black	3.5 mg/m3	7 mg/m3	Not Available	Not Available

Emergency Limits

Ingredient	TEEL-1	TEEL-2	TEEL-3
aluminium oxide	15 mg/m3	170 mg/m3	990 mg/m3
zinc oxide	10 mg/m3	15 mg/m3	2,500 mg/m3
bisphenol F diglycidyl ether copolymer	30 mg/m3	330 mg/m3	2,000 mg/m3
carbon black	9 mg/m3	99 mg/m3	590 mg/m3

Ingredient	Original IDLH	Revised IDLH
aluminium oxide	Not Available	Not Available
zinc oxide	500 mg/m3	Not Available

Ingredient	Original IDLH	Revised IDLH
bisphenol F diglycidyl ether copolymer	Not Available	Not Available
neopentyl glycol diglycidyl ether	Not Available	Not Available
carbon black	1,750 mg/m3	Not Available

Occupational Exposure Banding

Ingredient	Occupational Exposure Band Rating	Occupational Exposure Band Limit
zinc oxide	E	≤ 0.01 mg/m³
bisphenol F diglycidyl ether copolymer	E	≤ 0.1 ppm
neopentyl glycol diglycidyl ether	her 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

for zinc oxide:

Zinc oxide intoxication (intoxication zincale) is characterised by general depression, shivering, headache, thirst, colic and diarrhoea.

Exposure to the fume may produce metal fume fever characterised by chills, muscular pain, nausea and vomiting. Short-term studies with guinea pigs show pulmonary function changes and morphologic evidence of small airway inflammation. A no-observed-adverse-effect level (NOAEL) in guinea pigs was 2.7 mg/m3 zinc oxide. Based on present data, the current TLV-TWA may be inadequate to protect exposed workers although known physiological differences in the guinea pig make it more susceptible to functional impairment of the airways than humans.

For aluminium oxide and pyrophoric grades of aluminium:

Twenty seven year experience with aluminium oxide dust (particle size 96% 1,2 um) without adverse effects either systemically or on the lung, and at a calculated concentration equivalent to 2 mg/m3 over an 8-hour shift has lead to the current recommendation of the TLV-TWA.

The limit should also apply to aluminium pyro powders whose toxicity is reportedly greater than aluminium dusts and should be protective against lung changes.

For aluminium oxide:

The experimental and clinical data indicate that aluminium oxide acts as an 'inert' material when inhaled and seems to have little effect on the lungs nor does it produce significant organic disease or toxic effects when exposures are kept under reasonable control.

[Documentation of the Threshold Limit Values], ACGIH, Sixth Edition $[\label{eq:limit_potential} % \[\[\] \]] = [\[\] \] ACGIH, Sixth Edition \\ [\] \[\] \[\] \[\] \[\] \[\] ACGIH, Sixth Edition \\ [\] \[\] \[\] \[\] \[$

Exposed individuals are NOT reasonably expected to be warned, by smell, that the Exposure Standard is being exceeded.

Odour Safety Factor (OSF) is determined to fall into either Class C, D or E.

The Odour Safety Factor (OSF) is defined as:

OSF= Exposure Standard (TWA) ppm/ Odour Threshold Value (OTV) ppm

Classification into classes follows:

ClassOSF Description

- A 550 Over 90% of exposed individuals are aware by smell that the Exposure Standard (TLV-TWA for example) is being reached, even when distracted by working activities
- B 26-550 As 'A' for 50-90% of persons being distracted
- C 1-26 As 'A' for less than 50% of persons being distracted
- D 0.18-1 10-50% of persons aware of being tested perceive by smell that the Exposure Standard is being reached
- E $\,$ <0.18 As 'D' for less than 10% of persons aware of being tested

The concentration of dust, for application of respirable dust limits, is to be determined from the fraction that penetrates a separator whose size collection efficiency is described by a cumulative log-normal function with a median aerodynamic diameter of 4.0 um (+-) 0.3 um and with a geometric standard deviation of 1.5 um (+-) 0.1 um, i.e..generally less than 5 um. For epichlorohydrin

Odour Threshold Value: 0.08 ppm

 $NOTE: Detector\ tubes\ for\ epichlorohydrin,\ measuring\ in\ excess\ of\ 5\ ppm,\ are\ commercially\ available.$

Exposure at or below the recommended TLV-TWA is thought to minimise the potential for adverse respiratory, liver, kidney effects. Epichlorohydrin has been implicated as a human skin sensitiser, hence individuals who are hypersusceptible or otherwise unusually responsive to certain chemicals may NOT be adequately protected from adverse health effects. Odour Safety Factor (OSF)

OSF=0.54 (EPICHLOROHYDRIN)

8.2. Exposure controls

Engineering controls are used to remove a hazard or place a barrier between the worker and the hazard. Well-designed engineering controls can be highly effective in protecting workers and will typically be independent of worker interactions to provide this high level of protection. The basic types of engineering controls are:

Process controls which involve changing the way a job activity or process is done to reduce the risk.

Enclosure and/or isolation of emission source which keeps a selected hazard 'physically' away from the worker and ventilation that strategically 'adds' and 'removes' air in the work environment. Ventilation can remove or dilute an air contaminant if designed properly. The design of a ventilation system must match the particular process and chemical or contaminant in use.

Employers may need to use multiple types of controls to prevent employee overexposure.

8.2.1. Appropriate engineering controls

- Local exhaust ventilation is required where solids are handled as powders or crystals; even when particulates are relatively large, a certain proportion will be powdered by mutual friction.
- ▶ Exhaust ventilation should be designed to prevent accumulation and recirculation of particulates in the workplace.
- If in spite of local exhaust an adverse concentration of the substance in air could occur, respiratory protection should be considered. Such protection might consist of:
- (a): particle dust respirators, if necessary, combined with an absorption cartridge;
- (b): filter respirators with absorption cartridge or canister of the right type;
- (c): fresh-air hoods or masks
- Build-up of electrostatic charge on the dust particle, may be prevented by bonding and grounding.
- ▶ Powder handling equipment such as dust collectors, dryers and mills may require additional protection measures such as explosion venting. Air contaminants generated in the workplace possess varying 'escape' velocities which, in turn, determine the 'capture velocities' of fresh circulating air required to efficiently remove the contaminant.

Type of Contaminant:	Air Speed:
direct spray, spray painting in shallow booths, 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.)
grinding, abrasive blasting, tumbling, high speed wheel generated dusts (released at high initial velocity into zone of very high rapid air motion).	2.5-10 m/s (500-2000 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 4-10 m/s (800-2000 f/min) for extraction of crusher dusts generated 2 metres 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.

8.2.2. Personal protection











Eye and face protection

- ► Safety glasses with side shields.
- Chemical goggles.
- 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

NOTE:

- The material may produce skin sensitisation in predisposed individuals. Care must be taken, when removing gloves and other protective equipment, to avoid all possible skin contact.
- Contaminated leather items, such as shoes, belts and watch-bands should be removed and destroyed.

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.

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.

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.

Suitability and durability of glove type is dependent on usage. Important factors in the selection of gloves include:

- · frequency and duration of contact,
- chemical resistance of glove material,
- glove thickness and
- dexterity

Select gloves tested to a relevant standard (e.g. Europe EN 374, US F739, AS/NZS 2161.1 or national equivalent).

- 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.

Hands/feet protection use. Contaminated gloves should be replaced.

As defined in ASTM F-739-96 in any application, gloves are rated as:

- Excellent when breakthrough time > 480 min
- · Good when breakthrough time > 20 min
- Fair when breakthrough time < 20 min
- Poor when glove material degrades

For general applications, gloves with a thickness typically greater than 0.35 mm, are recommended.

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.

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.

Note: Depending on the activity being conducted, gloves of varying thickness may be required for specific tasks. For example:

- 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

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.

When handling liquid-grade epoxy resins wear chemically protective gloves, boots and aprons.

The performance, based on breakthrough times ,of:

- Ethyl Vinyl Alcohol (EVAL laminate) is generally excellent
- Butyl Rubber ranges from excellent to good

- Nitrile Butvl Rubber (NBR) from excellent to fair.
- Neoprene from excellent to fair
- Polyvinyl (PVC) from excellent to poor

As defined in ASTM F-739-96

- Excellent breakthrough time > 480 min
- Good breakthrough time > 20 min
- Fair breakthrough time < 20 min Poor glove material degradation

Gloves should be tested against each resin system prior to making a selection of the most suitable type. Systems include both the resin and any hardener, individually and collectively)

- DO NOT use cotton or leather (which absorb and concentrate the resin), natural rubber (latex), medical or polyethylene gloves (which absorb the resin).
- DO NOT use barrier creams containing emulsified fats and oils as these may absorb the resin; silicone-based barrier creams should be reviewed prior to use

Replacement time should be considered when selecting the most appropriate glove. It may be more effective to select a glove with lower chemical resistance but which is replaced frequently than to select a more resistant glove which is reused many times

Experience indicates that the following polymers are suitable as glove materials for protection against undissolved, dry solids, where abrasive particles are not present.

- polychloroprene.
- nitrile rubber.
- butyl rubber.
- fluorocaoutchouc.
- polyvinyl chloride

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

Body protection

See Other protection below

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

Respiratory protection

Particulate. (AS/NZS 1716 & 1715, EN 143:2000 & 149:001, ANSI Z88 or national equivalent)

Required Minimum Protection Factor	Half-Face Respirator	Full-Face Respirator	Powered Air Respirator
up to 10 x ES	P1 Air-line*	-	PAPR-P1
up to 50 x ES	Air-line**	P2	PAPR-P2
up to 100 x ES	-	P3	-
		Air-line*	-
100+ x ES	-	Air-line**	PAPR-P3

* - Negative pressure demand ** - Continuous flow

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)

- Respirators may be necessary when engineering and administrative controls do not adequately prevent exposures.
- The decision to use respiratory protection should be based on professional judgment that takes into account toxicity information, exposure measurement data, and frequency and likelihood of the worker's exposure - ensure users are not subject to high thermal loads which may result in heat stress or distress due to personal protective equipment (powered, positive flow, full face apparatus may be an option).
- Published occupational exposure limits, where they exist, will assist in determining the adequacy of the selected respiratory protection. These may be government mandated or
- Certified respirators will be useful for protecting workers from inhalation of particulates when properly selected and fit tested as part of a complete respiratory protection program
- Where protection from nuisance levels of dusts are desired, use type N95 (US) or type P1 (EN143) dust masks. Use respirators and components tested and approved under appropriate government standards such as NIOSH (US) or CEN (EU)
- Use approved positive flow mask if significant quantities of dust becomes airborne.
- Try to avoid creating dust conditions.

Class P2 particulate filters are used for protection against mechanically and thermally generated particulates or both.

P2 is a respiratory filter rating under various international standards, Filters at least 94% of airborne particles Suitable for:

- Relatively small particles generated by mechanical processes eg. grinding, cutting, sanding, drilling, sawing.
 - Sub-micron thermally generated particles e.g. welding fumes, fertilizer and bushfire smoke
- Biologically active airborne particles under specified infection control applications e.g. viruses, bacteria, COVID-19, SARS

8.2.3. Environmental exposure controls

See section 12

SECTION 9 Physical and chemical properties

9.1. Information on basic physical and chemical properties

Appearance	Dark Grey		
Physical state	Solid	Relative density (Water = 1)	2.4
Odour	Not Available	Partition coefficient n-octanol / water	Not Available

Odour threshold	Not Available	Auto-ignition temperature (°C)	Not Available
pH (as supplied)	Not Available	Decomposition temperature	Not Available
Melting point / freezing point (°C)	Not Available	Viscosity (cSt)	>20.5
Initial boiling point and boiling range (°C)	>207	Molecular weight (g/mol)	Not Available
Flash point (°C)	149	Taste	Not Available
Evaporation rate	Not Available BuAC = 1	Explosive properties	Not Available
Flammability	Not Applicable	Oxidising properties	Not Available
Upper Explosive Limit (%)	Not Available	Surface Tension (dyn/cm or mN/m)	Not Applicable
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
Vapour density (Air = 1)	Not Available	VOC g/L	Not Available
Nanoform Solubility	Not Available	Nanoform Particle Characteristics	Not Available
Particle Size	Not Available		

9.2. Other information

Not Available

SECTION 10 Stability and reactivity

10.1.Reactivity	See section 7.2
10.2. Chemical stability	 Unstable in the presence of incompatible materials. Product is considered stable. Hazardous polymerisation will not occur.
10.3. Possibility of hazardous reactions	See section 7.2
10.4. Conditions to avoid	See section 7.2
10.5. Incompatible materials	See section 7.2
10.6. Hazardous decomposition products	See section 5.3

SECTION 11 Toxicological information

11.1. Information on toxicological effects

The material is not thought to produce adverse health effects or irritation of the respiratory tract (as classified by EC Directives using animal models). Nevertheless, good hygiene practice requires that exposure be kept to a minimum and that suitable control measures be used in an occupational setting.

Strong evidence exists that exposure to the material may produce serious irreversible damage (other than carcinogenesis, mutagenesis and teratogenesis) following a single exposure by inhalation.

Inhaled

Inhalation of freshly formed metal oxide particles sized below 1.5 microns and generally between 0.02 to 0.05 microns may result in 'metal fume fever'. Symptoms may be delayed for up to 12 hours and begin with the sudden onset of thirst, and a sweet, metallic or foul taste in the mouth. Other symptoms include upper respiratory tract irritation accompanied by coughing and a dryness of the mucous membranes, lassitude and a generalised feeling of malaise. Mild to severe headache, nausea, occasional vomiting, fever or chills, exaggerated mental activity, profuse sweating, diarrhoea, excessive urination and prostration may also occur. Tolerance to the fumes develops rapidly, but is quickly lost. All symptoms usually subside within 24-36 hours following removal from exposure.

Inhalation of freshly formed zinc oxide particles sized below 1.5 microns and generally between 0.02 to 0.05 microns may result in 'metal fume fever', with symptoms resembling influenza. Symptoms may be delayed for up to 12 hours and begin with the sudden onset of thirst, and a sweet, metallic or foul taste in the mouth. Other symptoms include upper respiratory tract irritation accompanied by coughing and a dryness of the mucous membranes, lassitude and a generalised feeling of malaise. Mild to severe headache, nausea, occasional vomiting, fever or chills, exaggerated mental activity, profuse sweating, diarrhoea, excessive urination and prostration may also occur. Tolerance to the fumes develops rapidly, but is quickly lost. All symptoms usually subside within 24-36 hours following removal from exposure. Leucocytosis, a transient increase in white blood cell counts, is reported as a common finding in metal fume fever but is not known to be common amongst welders. Severe over-exposure to zinc oxide, following inhalation of fumes or finely divided dusts may result in bronchitis or pneumonia; a bluish skin tint may be present.

Inhalation of vapours or aerosols (mists, fumes), generated by the material during the course of normal handling, may be damaging to the health of the individual.

Strong evidence exists that exposure to the material may produce serious irreversible damage (other than carcinogenesis, mutagenesis and teratogenesis) following a single exposure by swallowing.

Reactive diluents exhibit a range of ingestion hazards. Small amounts swallowed incidental to normal handling operations are not likely to cause injury. However, swallowing larger amounts may cause injury.

Acute toxic responses to aluminium are confined to the more soluble forms.

The material has **NOT** been classified by EC Directives or other classification systems as 'harmful by ingestion'. This is because of the lack of corroborating animal or human evidence. The material may still be damaging to the health of the individual, following ingestion, especially where pre-existing organ (e.g liver, kidney) damage is evident. Present definitions of harmful or toxic substances are generally based on doses producing mortality rather than those producing morbidity (disease, ill-health). Gastrointestinal tract discomfort may produce nausea and vomiting. In an occupational setting however, ingestion of insignificant quantities is not thought to be cause for concern.

High molecular weight material; on single acute exposure would be expected to pass through gastrointestinal tract with little change / absorption. Occasionally accumulation of the solid material within the alimentary tract may result in formation of a bezoar (concretion), producing discomfort. Soluble zinc salts produces irritation and corrosion of the alimentary tract (in a manner similar to copper salts) with pain, vomiting, etc. Delayed deaths have been ascribed to inanition (weakness and extreme weight loss resulting from prolonged and severe food insufficiency) following severe strictures of the oesophagus, and pylorus. Vomiting, abdominal cramps, and diarrhea, in several cases with blood, have been observed after ingestion of zinc sulfate.

Several cases of gastrointestinal disturbances have been reported after ingestion of zinc sulfate. A significant reduction in erythrocyte superoxide dismutase activity (47% decrease), hematocrit, and serum ferritin, compared to pretreatment levels, occurred in female subjects who received supplements (as capsules) of 50 mg zinc/day as zinc gluconate for 10 weeks. A 15% decrease in erythrocyte superoxide dismutase activity was reported in male volunteers receiving 50 mg zinc/day as zinc gluconate for 6 weeks. Another study reported increases in bone specific alkaline phosphatase levels (~25%) and extracellular superoxide dismutase (~15%), while significant decreases were seen in mononuclear white cell 5'-nucleotidase (~30%) and plasma 5'-nucleotidase activity (~36%) following exposure of postmenopausal women to a combined (dietary+supplemental) 53 mg zinc/day as zinc glycine chelate. Healthy men given 200 mg zinc/day as elemental zinc for 6 weeks showed a reduction in lymphocyte stimulation response to phytohemagglutinin as well as chemotaxis and phagocytosis of bacteria by polymorphonuclear leukocytes.; however, no changes in lymphocyte cell number or in the proportion of lymphocyte populations were noted. Exposure of male volunteers to 0.48 mg zinc/kg/day, as zinc glycine chelate, had no effect on markers of coagulation relative to unexposed subjects. While the changes in

Ingestion

hematological end points following long-term zinc exposure in humans are noteworthy, they were subclinical in nature, and therefore, are generally considered to be non-adverse. In animals, following oral administration of zinc compounds, decreased hemoglobin, hematocrit, erythrocyte, and/or leukocyte levels were observed in rats, mice, rabbits, dogs, ferrets, and preruminant calves A number of intermediate-duration studies have demonstrated renal effects in animals exposed to zinc oxide, zinc sulfate, and zinc acetate. Zinc sulfate caused an increase in the absolute and relative kidney weights and regressive kidney lesions (not specified) in female mice that consumed 1,110 mg zinc/kg/day in the diet for 13 weeks, but no effects occurred in rats that consumed 565 mg zinc/kg/day or in mice that consumed 104 mg zinc/kg/day under similar conditions. Severe diffuse nephrosis was

observed in ferrets exposed to 195 mg zinc/kg/day as zinc oxide in the diet. In rats exposed to 191 mg zinc/kg/day as zinc acetate for 3 months, epithelial cell damage in the glomerulus and proximal convoluted tubules and increased plasma creatinine and urea levels were observed. Zinc plays a role in the normal development and maintenance of the immune system, such as in the lymphocyte response to mitogens and as a cofactor for the thymic hormone thymulin. Oral exposure to zinc at levels much higher than the recommended daily dose has impaired immune and inflammatory responses. This was observed in in vivo investigations of the immune competence of blood components taken from 11 healthy adult men after ingestion of 4.3 mg zinc/kg/day as zinc sulfate for 6 weeks. The mitogenic response elicited from peripheral blood lymphocytes and the chemotactic and phagocytic responses of polymorphonuclear leukocytes were impaired after zinc ingestion. No effects were seen on total numbers of lymphocytes or relative numbers of T cells, T cell subsets, or B cells. The relationship between these observations and decreased levels of immune competence that might lead to increased susceptibility to disease is unknown. A later study reported no effects of supplementation of male volunteers with 30 mg zinc/day (0.43 mg zinc/kg/day assuming a reference male body weight of 70 kg) as zinc glycine chelate for 14 weeks on levels of peripheral blood leucocytes or on the frequency of lymphocyte subsets.

Zinc appears to be necessary for normal brain function, but excess zinc is toxic. A 16-year-old boy who ingested .86 mg zinc/kg/day of metallic zinc over a 2-day period in an attempt to promote wound healing, developed signs and symptoms of lethargy, light-headedness, staggering, and difficulty in writing clearly . Lethargy was also observed in a 2-year-old child who ingested a zinc chloride solution (.1,000 mg zinc/kg). It is not known whether these observations represent direct effects on the nervous system. Very limited data were located regarding neurological effects in animals. Minor neuron degeneration and proliferation of oligodendroglia occurred in rats dosed with 487 mg zinc/kg/day as zinc oxide for 10 days. Rats receiving 472 mg zinc/kg/day for 10 days had increased levels of secretory material in the neurosecretory nuclei of the hypothalamus. Mice exposed postnatally to 0.5 mg zinc/kg/day as zinc acetate for 28 days showed no changes in memory formation, but showed a gradual decrease in learning extinction throughout the study.

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

Strong evidence exists that exposure to the material may produce serious irreversible damage (other than carcinogenesis, mutagenesis and teratogenesis) following a single exposure by skin contact.

The material may accentuate any pre-existing dermatitis condition

Skin contact is not thought to have harmful health effects (as classified under EC Directives); the material may still produce health damage following entry through wounds, lesions or abrasions.

Contact with aluminas (aluminium oxides) may produce a form of irritant dermatitis accompanied by pruritus.

Though considered non-harmful, slight irritation may result from contact because of the abrasive nature of the aluminium oxide particles.

Open cuts, abraded or irritated skin should not be exposed to this material

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.

Repeated or excessive handling, coupled with poor personal hygiene, may result in acne-like eruptions known as 'zinc oxide pox'.

The material may produce mild skin irritation; limited evidence or practical experience suggests, that the material either:

- produces mild inflammation of the skin in a substantial number of individuals following direct contact, and/or
- produces significant, but mild, 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 (non allergic). 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.

Eye

Skin Contact

Evidence exists, or practical experience predicts, that the material may cause eye irritation in a substantial number of individuals and/or may produce significant ocular lesions which are present twenty-four hours or more after instillation into the eye(s) of experimental animals. Repeated or prolonged eye contact may cause inflammation characterised by temporary redness (similar to windburn) of the conjunctiva (conjunctivitis); temporary impairment of vision and/or other transient eye damage/ulceration may occur.

Chronic

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.

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.

Substances than can cuase 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. Wherever it is reasonably practicable, exposure to substances that can cuase 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.

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.

The polymer contained in this product has reactive groups (aldehydes and phenolics) generally considered to be of moderate concern (US EPA). In general, aldehydes are reactive. Due to their water solubility and severe irritant properties, the lower aldehydes attack exposed moist tissue, particularly the eyes and mucous membranes of the upper respiratory tract. Aldehydes can also be skin and respiratory sensitisers, e.g. formaldehyde and glutaraldehyde. Lower solubility aldehydes can penetrate further into the lungs. Skin sensitisation reactions have been noted after exposure to urea-formaldehyde resins.

Phenolic groups with ortho and para positions free from substitution are reactive; this is because the ortho and para positions on the aromatic ring are highly activated by the phenolic hydroxyl group and are therefore readily substituted.

The acute toxicity of polymers of the group with a molecular weight above 1000 is expected to be lower. Whilst it is generally accepted that polymers with a molecular weight exceeding 1000 are unlikely to pass through biological membranes, oligomers with lower molecular weight and specifically, those with a molecular weight below 500, may. Estimations based on a 'highly' dispersed polymer population suggest that a polymer of approximate molecular weight 1000 could contain no more than one reactive group of moderate concern for it to be regulated as a polymer of low concern (a so-called PLC) 2500). Polymers with a molecular weight above 10000 are generally considered to be PLCs because these are not expected to be absorbed by biological systems. The choice of 10000 as a cut-off value is thought to provide a safety factor of 100, regarded as reasonable in light of limited data, duration of studies, dose levels at which effects are seen, and extrapolation from animals to humans.

All glycidyl ethers show genotoxic potential due their alkylating properties. Those glycidyl ethers that have been investigated in long term studies exhibit more or less marked carcinogenic potential. Alkylating agents may damage the stem cell which acts as the precursor to components of the blood. Loss of the stem cell may result in pancytopenia (a reduction in the number of red and white blood cells and platelets) with a latency period corresponding to the lifetime of the individual blood cells. Granulocytopenia (a reduction in granular leukocytes) develops within days and thrombocytopenia (a disorder involving platelets), within 1-2 weeks, whilst loss of erythrocytes (red blood cells) need months to become clinically manifest. Aplastic anaemia develops due to complete destruction of the stem cells.

Reported adverse effects in laboratory animals include sensitization, and skin and eye irritation, as well as mutagenic and tumorigenic activity. Testicular abnormalities (including testicular atrophy with decreased spermatogenic activity) following exposure to glycidyl ethers have been reported. Haemopoietic abnormalities following exposure to glycidyl ethers, including alteration of the leukocyte count, atrophy of lymphoid tissue, and bone marrow cytotoxicity have also been reported. These abnormalities were usually observed along with pneumonia and/or toxemia, and therefore may be secondary effects. However, especially in light of the generalized reduction in leukocytes and the atrophy of lymphoid tissues, the observed haemopoietic abnormalities may have been predisposing factors to pneumonia. While none of the individual research reports are conclusive with respect to the ability of glycidyl ethers to produce permanent changes to the testes or haemopoietic system in laboratory animals, the pattern of displayed effects is reason for concern

Glycidyl ethers have been shown to cause allergic contact dermatitis in humans. Glycidyl ethers generally cause skin sensitization in experimental animals. Necrosis of the mucous membranes of the nasal cavities was induced in mice exposed to allyl glycidyl ether. A study of workers with mixed exposures was inconclusive with regard to the effects of specific glycidyl ethers. Phenyl glycidyl ether, but not n-butyl glycidyl ether, induced morphological transformation in mammalian cells in vitro. n-Butyl glycidyl ether induced micronuclei in mice in vivo following intraperitoneal but not oral administration. Phenyl glycidyl ether did not induce micronuclei or chromosomal aberrations in vivo or chromosomal aberrations in animal cells in vitro. Alkyl C12 or C14 glycidyl ether did not induce DNA damage in cultured human cells or mutation in cultured animal cells. Allyl glycidyl ether induced mutation in Drosophila. The glycidyl ethers were generally mutagenic to bacteria. Chronic exposure to aluminas (aluminium oxides) of particle size 1.2 microns did not produce significant systemic or respiratory system effects in workers. Epidemiologic surveys have indicated an excess of nonmalignant respiratory disease in workers exposed to aluminum oxide during abrasives production.

Very fine Al2O3 powder was not fibrogenic in rats, guinea pigs, or hamsters when inhaled for 6 to 12 months and sacrificed at periods up to 12 months following the last exposure.

When hydrated aluminas were injected intratracheally, they produced dense and numerous nodules of advanced fibrosis in rats, a reticulin network with occasional collagen fibres in mice and guinea pigs, and only a slight reticulin network in rabbits. Shaver's disease, a rapidly progressive and often fatal interstitial fibrosis of the lungs, is associated with a process involving the fusion of bauxite (aluminium oxide) with iron, coke and silica at 2000 deg. C.

The weight of evidence suggests that catalytically active alumina and the large surface area aluminas can induce lung fibrosis(aluminosis) in experimental animals, but only when given by the intra-tracheal route. The pertinence of such experiments in relation to workplace exposure is doubtful especially since it has been demonstrated that the most reactive of the aluminas (i.e. the chi and gamma forms), when given by inhalation, are non-fibrogenic in experimental animals. However rats exposed by inhalation, or refractory aluminium fibre showed mild fibrosis and possibly carcinogenic effects indicating that fibrous aluminas might exhibit different toxicology to non-fibrous forms. Aluminium oxide fibres administered by the intrapleural route produce clear evidence of carcinogenicity.

Saffil fibre an artificially produced form alumina fibre used as refractories, consists of over 95% alumina, 3-4 % silica. Animal tests for fibrogenic, carcinogenic potential and oral toxicity have included in-vitro, intraperitoneal injection, intrapleural injection, inhalation, and feeding. The fibre has generally been inactive in animal studies. Also studies of Saffil dust clouds show very low respirable fraction.

There is general agreement that particle size determines that the degree of pathogenicity (the ability of a micro-organism to produce infectious disease) of elementary aluminium, or its oxides or hydroxides when they occur as dusts, fumes or vapours. Only those particles small enough to enter the alveolii (sub 5 um) are able to produce pathogenic effects in the lungs.

Occupational exposure to aluminium compounds may produce asthma, chronic obstructive lung disease and pulmonary fibrosis. Long-term overexposure may produce dyspnoea, cough, pneumothorax, variable sputum production and nodular interstitial fibrosis; death has been reported. Chronic interstitial pneumonia with severe cavitations in the right upper lung and small cavities in the remaining lung tissue, have been observed in gross pathology. Shaver's Disease may result from occupational exposure to fumes or dusts; this may produce respiratory distress and fibrosis with large blebs. Animal studies produce no indication that aluminium or its compounds are carcinogenic.

Because aluminium competes with calcium for absorption, increased amounts of dietary aluminium may contribute to the reduced skeletal mineralisation (osteopenia) observed in preterm infants and infants with growth retardation. In very high doses, aluminium can cause neurotoxicity, and is associated with altered function of the blood-brain barrier. A small percentage of people are allergic to aluminium and experience contact dermatitis, digestive disorders, vomiting or other symptoms upon contact or ingestion of products containing aluminium, such as deodorants or antacids. In those without allergies, aluminium is not as toxic as heavy metals, but there is evidence of some toxicity if it is consumed in excessive amounts. Although the use of aluminium cookware has not been shown to lead to aluminium toxicity in general, excessive consumption of antacids containing aluminium compounds and excessive use of aluminium-containing antiperspirants provide more significant exposure levels. Studies have shown that consumption of acidic foods or liquids with aluminium significantly increases aluminium absorption, and maltol has been shown to increase the accumulation of aluminium in nervous and osseus tissue. Furthermore, aluminium increases oestrogen-related gene expression in human breast cancer cells cultured in the laboratory These salts' estrogen-like effects have led to their classification as a metalloestrogen. Some researchers have expressed concerns that the aluminium in antiperspirants may increase the risk of breast cancer

After absorption, aluminium distributes to all tissues in animals and humans and accumulates in some, in particular bone. The main carrier of the aluminium ion in plasma is the iron binding protein, transferrin. Aluminium can enter the brain and reach the placenta and foetus. Aluminium may persist for a very long time in various organs and tissues before it is excreted in the urine. Although retention times for aluminium appear to be longer in humans than in rodents, there is little information allowing extrapolation from rodents to the humans.

At high levels of exposure, some aluminium compounds may produce DNA damage in vitro and in vivo via indirect mechanisms. The database

on carcinogenicity of aluminium compounds is limited. No indication of any carcinogenic potential was obtained in mice given aluminium potassium sulphate at high levels in the diet.

Aluminium has shown neurotoxicity in patients undergoing dialysis and thereby chronically exposed parenterally to high concentrations of aluminium. It has been suggested that aluminium is implicated in the aetiology of Alzheimer's disease and associated with other neurodegenerative diseases in humans. However, these hypotheses remain controversial. Several compounds containing aluminium have the potential to produce neurotoxicity (mice, rats) and to affect the male reproductive system (dogs). In addition, after maternal exposure they have shown embryotoxicity (mice) and have affected the developing nervous system in the offspring (mice, rats). The available studies have a number of limitations and do not allow any dose-response relationships to be established. The combined evidence from several studies in mice, rats and dogs that used dietary administration of aluminium compounds produce lowest-observed-adverse-effect levels (LOAELs) for effects on neurotoxicity, testes, embryotoxicity, and the developing nervous system of 52, 75, 100, and 50 mg aluminium/kg bw/day, respectively. Similarly, the lowest no-observed-adverse-effect levels (NOAELs) for effects on these endpoints were reported at 30, 27, 100, and for effects on the developing nervous system, between 10 and 42 mg aluminium/kg bw per day, respectively.

Controversy exists over whether aluminium is the cause of degenerative brain disease (Alzheimer's disease or AD). Several epidemiological studies show a possible correlation between the incidence of AD and high levels of aluminium in drinking water. A study in Toronto, for example, found a 2.6 times increased risk in people residing for at least 10 years in communities where drinking water contained more than 0.15 mg/l aluminium compared with communities where the aluminium level was lower than 0.1 mg/l. A neurochemical model has been suggested linking aluminium exposure to brain disease. Aluminium concentrates in brain regions, notably the hippocampus, cerebral cortex and amygdala where it preferentially binds to large pyramid-shaped cells - it does not bind to a substantial degree to the smaller interneurons. Aluminium displaces magnesium in key metabolic reactions in brain cells and also interferes with calcium metabolism and inhibits phosphoinositide metabolism. Phosphoinositide normally controls calcium ion levels at critical concentrations.

Under the microscope the brain of AD sufferers show thickened fibrils (neurofibrillary tangles - NFT) and plaques consisting of amyloid protein deposited in the matrix between brain cells. Tangles result from alteration of 'tau' a brain cytoskeletal protein. AD tau is distinguished from normal tau because it is hyperphosphorylated. Aluminium hyperphosphorylates tau in vitro. When AD tau is injected into rat brain NFT-like aggregates form but soon degrade. Aluminium stabilises these aggregates rendering them resistant to protease degradation. Plaque formation is also enhanced by aluminium which induces the accumulation of amyloid precursor protein in the thread-like extensions of nerve cells (axons and dendrites). In addition aluminium has been shown to depress the activity of most neuro-transmitters similarly depressed in AD (acetylcholine, norepinephrine, glutamate and GABA).

Aluminium enters the brain in measurable quantities, even when trace levels are contained in a glass of tap water. Other sources of bioavailable aluminium include baking powder, antacids and aluminium products used for general food preparation and storage (over 12 months, aluminium levels in soft drink packed in aluminium cans rose from 0.05 to 0.9 mg/l). [Walton, J and Bryson-Taylor, D. - Chemistry in Australia, August 1995] For some reactive diluents, prolonged or repeated skin contact may result in absorption of potentially harmful amounts or allergic skin reactions Exposure to some reactive diluents (notably neopentylglycol diglycidyl ether, CAS RN:17557-23-2) has caused cancer in some animal testing. Following an oral intake of extremely high doses of zinc (where 300 mg Zn/d – 20 times the US Recommended Dietary Allowance (RDA) – is a 'low intake' overdose), nausea, vomiting, pain, cramps and diarrhea may occur. There is evidence of induced copper deficiency, alterations of blood lipoprotein levels, increased levels of LDL, and decreased levels of HDL at long-term intakes of 100 mg Zn/d. The USDA RDA is 15 mg Zn/d.

There is also a condition called the 'zinc shakes' or 'zinc chills' or metal fume fever that can be induced by the inhalation of freshly formed zinc oxide formed during the welding of galvanized materials.

Supplemental zinc can prevent iron absorption, leading to iron deficiency and possible peripheral neuropathy, with loss of sensation in extremities.

Zinc is necessary for normal fetal growth and development. Fetal damage may result from zinc deficiency. Only one report in the literature suggested adverse developmental effects in humans due to exposure to excessive levels of zinc. Four women were given zinc supplements of 0.6 mg zinc/kg/day as zinc sulfate during the third trimester of pregnancy. Three of the women had premature deliveries, and one delivered a stillborn infant. However, the significance of these results cannot be determined because very few details were given regarding the study protocol, reproductive histories, and the nutritional status of the women. Other human studies have found no developmental effects in the newborns of mothers consuming 0.3 mg zinc/kg/day as zinc sulfate or zinc citrate or 0.06 mg zinc/kg/day as zinc aspartate during the last two trimesters. There has been a suggestion that increased serum zinc levels in pregnant women may be associated with an increase in neural tube defects, but others have failed to confirm this association. The developmental toxicity of zinc in experimental animals has been evaluated in a number of investigations. Exposure to high levels of zinc in the diet prior to and/or during gestation has been associated with increased fetal resorptions, reduced fetal weights, altered tissue concentrations of fetal iron and copper, and reduced growth in the offspring. Animal studies suggest that exposure to very high levels of dietary zinc is associated with reduced fetal weight, alopecia, decreased hematocrit, and copper deficiency in offspring. For example, second generation mice exposed to zinc carbonate during gestation and lactation (260 mg/kg/day in the maternal diet), and then continued on that diet for 8 weeks, had reduced body weight, alopecia, and signs of copper deficiency (e.g., lowered hematocrit and occasional achromotrichia [loss of hair colour]. Similarly, mink kits from dams that ingested a time-weightedaverage dose of 20.8 mg zinc/kg/day as zinc sulfate also had alopecia and achromotrichia. It is likely that the alopecia resulted from zinc-induced copper deficiency, which is known to cause alopecia in monkeys. However, no adverse effects were observed in parental mice or mink. No effects on reproduction were reported in rats exposed to 50 mg zinc/kg/day as zinc carbonate; however, increased stillbirths were observed in

rats exposed to 250 mg zinc/kg/day.

Welding or flame cutting of metals with zinc or zinc dust coatings may result in inhalation of zinc oxide fume; high concentrations of zinc oxide fume may result in 'metal fume fever'; also known as 'brass chills', an industrial disease of short duration. [I.L.O] Symptoms include malaise, fever, weakness, nausea and may appear quickly if operations occur in enclosed or poorly ventilated areas.

Genotoxicity studies conducted in a variety of test systems have failed to provide evidence for mutagenicity of zinc. However, there are indications of weak clastogenic effects following zinc exposure.

On the basis, primarily, of animal experiments, concern has been expressed by at least one classification body that the material may produce carcinogenic or mutagenic effects; in respect of the available information, however, there presently exists inadequate data for making a satisfactory assessment.

Bisphenol F, bisphenol A, fluorine-containing bisphenol A (bisphenol AF), and other diphenylalkanes were found to be oestrogenic in a bioassay with MCF7 human breast cancer cells in culture Bisphenol F (4,4'-dihydroxydiphenylmethane) has been reported to exhibit oestrogen agonistic properties in the uterotrophic assay. Bisphenol F (BPF) is present in the environment and as a contaminant of food. Humans may, therefore, be exposed to BP. BPF has been shown to have genotoxic and endocrine-disruptor properties in a human hepatoma cell line (HepG2), which is a model system for studies of xenobiotic toxicity. BPF was largely metabolised into the corresponding sulfate by the HepG2 cell line. BPF was metabolised into both sulfate and glucuronide by human hepatocytes, but with differences between individuals. The metabolism of BPF in both HepG2 cells and human hepatocytes suggests the existence of a detoxification pathway

Bisphenol F was orally administered at doses 0, 20, 100 and 500 mg/kg per day for at least 28 days, but no clear endocrine-mediated changes were detected, and it was concluded to have no endocrine-mediated effects in young adult rats. On the other hand, the main effect of bisphenol F was concluded to be liver toxicity based on clinical biochemical parameters and liver weight, but without histopathological changes. The no-observed-effect level for bisphenol F is concluded to be under 20 mg/kg per day since decreased body weight accompanied by decreased serum total cholesterol, glucose, and albumin values were observed in the female rats given 20 mg/kg per day or higher doses of bisphenol F. Bisphenol A exhibits hormone-like properties that raise concern about its suitability in consumer products and food containers. Bisphenol A is thought to be an endocrine disruptor which can mimic oestrogen and may lead to negative health effects. More specifically, bisphenol A closely mimics the structure and function of the hormone oestradiol with the ability to bind to and activate the same oestrogen receptor as the natural hormone. The presence of the p-hydroxy group on the benzene rings is though to be responsible for the oestradiol mimicry.

. Early developmental stages appear to be the period of greatest sensitivity to its effects and some studies have linked prenatal exposure to later physical and neurological difficulties. Regulatory bodies have determined safety levels for humans, but those safety levels are being questioned or are under review.

A 2009 study on Chinese workers in bisphenol A factories found that workers were four times more likely to report erectile dysfunction, reduced sexual desire and overall dissatisfaction with their sex life than workers with no heightened bisphenol A exposure. Bisphenol A workers were also seven times more likely to have ejaculation difficulties. They were also more likely to report reduced sexual function within one year of beginning

employment at the factory, and the higher the exposure, the more likely they were to have sexual difficulties.

Bisphenol A in weak concentrations is sufficient to produce a negative reaction on the human testicle. The researchers found that a concentration equal to 2 ug/ litre of bisphenol A in the culture medium, a concentration equal to the average concentration generally found in the blood, urine and amniotic fluid of the population, was sufficient to produce the effects. The researchers believe that exposure of pregnant women to bisphenol A may be one of the causes of congenital masculinisation defects of the hypospadia and cryptorchidism types the frequency of which has doubled overall since the 70's. They also suggested that 'it is also possible that bisphenol A contributes to a reduction in the production of sperm and the increase in the incidence of testicular cancer in adults that have been observed in recent decades'

One review has concluded that obesity may be increased as a function of bisphenol A exposure, which '...merits concern among scientists and public health officials'

One study demonstrated that adverse neurological effects occur in non-human primates regularly exposed to bisphenol A at levels equal to the United States Environmental Protection Agency's (EPA) maximum safe dose of 50 ug/kg/day This research found a connection between bisphenol A and interference with brain cell connections vital to memory, learning, and mood.

A further review concluded that bisphenol-A has been shown to bind to thyroid hormone receptor and perhaps have selective effects on its functions. Carcinogenicity studies have shown increases in leukaemia and testicular interstitial cell tumours in male rats. However, 'these studies have not been considered as convincing evidence of a potential cancer risk because of the doubtful statistical significance of the small differences in incidences from controls'. Another in vitro study has concluded that bisphenol A is able to induce neoplastic transformation in human breast epithelial cells.[whilst a further study concluded that maternal oral exposure to low concentrations of bisphenol A, during lactation, increases mammary carcinogenesis in a rodent model. In vitro studies have suggested that bisphenol A can promote the growth of neuroblastoma cells and potently promotes invasion and metastasis of neuroblastoma cells. Newborn rats exposed to a low-dose of bisphenol A (10 ug/kg) showed increased prostate cancer susceptibility when adults. At least one study has suggested that bisphenol A suppresses DNA methylation which is involved in epigenetic changes.

Bisphenol A is the isopropyl adduct of 4,4'-dihydroxydiphenyl oxide (DHDPO). A series of DHDPO analogues have been investigated as potential oestrogen receptor/anti-tumour drug carriers in the development of a class of therapeutic drugs called 'cytostatic hormones'. Oestrogenic activity is induced with 1 to 100 mg/kg body weight in animal models. Bisphenol A sealants are frequently used in dentistry for treatment of dental pits and fissures. Samples of saliva collected from dental patients during a 1-hour period following application contain the monomer. A bisphenol-A sealant has been shown to be oestrogenic in vitro; such sealants may represent an additional source of xenoestrogens in humans and may be the cause of additional concerns in children.

Concerns have been raised about the possible developmental effects on the foetus/embryo or neonate resulting from the leaching of bisphenol A from epoxy linings in metal cans which come in contact with food-stuffs.

Many drugs, including naproxen, salicylic acid, carbamazepine and mefenamic acid can, in vitro, significantly inhibit bisphenol A glucuronidation (detoxification).

BPA belongs to the list of compounds having this property as the rodent models have shown that BPA exposure is linked with increased body weigh (obesogens)t. Several mechanisms can help explain the effect of BPA on body weight increase. A possible mechanism leading to triglyceride accumulation is the decreased production of the hormone adiponectin from all human adipose tissue tested when exposed to very low levels (below nanomolar range) of BPA in cell or explant culture settings. The expression of leptin as well as several enzymes and transcription factors is also affected by BPA exposure in vivo as well as in vitro. Together, the altered expression and activity of these important mediators of fat metabolism could explain the increase in weight following BPA exposure in rodent models. These results also suggest that, together with other obesogens, low, environmentally relevant levels of BPA may contribute to the human obesity phenomenon.

8329TCS-A Thermally
Conductive Epoxy Adhesive

TOXICITY	IRRITATION
Not Available	Not Available

aluminium oxide

TOXICITY	IRRITATION
Inhalation(Rat) LC50; >2.3 mg/l4h ^[1]	Eye: no adverse effect observed (not irritating) ^[1]
Oral (Rat) LD50; >2000 mg/kg ^[1]	Skin: no adverse effect observed (not irritating) ^[1]

zinc oxide

TOXICITY	IRRITATION
dermal (rat) LD50: >2000 mg/kg ^[1]	Eye (rabbit) : 500 mg/24 h - mild
Inhalation(Rat) LC50; >1.79 mg/l4h ^[1]	Eye: no adverse effect observed (not irritating) ^[1]
Oral (Rat) LD50; >5000 mg/kg ^[1]	Skin (rabbit) : 500 mg/24 h- mild
	Skin: no adverse effect observed (not irritating) ^[1]

bisphenol F diglycidyl ether copolymer

TOXICITY	IRRITATION
dermal (rat) LD50: 4000 mg/kg ^[2]	Eyes * (-) (-) Slight irritant
Oral (Rat) LD50; 4000 mg/kg ^[2]	Skin * (-) (-) Slight irritant

neopentyl glycol diglycidyl ether

TOXICITY	IRRITATION
Dermal (rabbit) LD50: 2150 mg/kg ^[2]	Eye: adverse effect observed (irritating) ^[1]
Oral (Rat) LD50; 4500 mg/kg ^[2]	Skin (human): Sensitiser [Shell]
	Skin: adverse effect observed (irritating) ^[1]

carbon black

TOXICITY	IRRITATION
Dermal (rabbit) LD50: >3000 mg/kg ^[2]	Eye: no adverse effect observed (not irritating) ^[1]
Oral (Rat) LD50; >8000 mg/kg ^[1]	Skin: no adverse effect observed (not irritating) ^[1]

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

For aluminium compounds:

Aluminium present in food and drinking water is poorly absorbed through the gastrointestinal tract. The bioavailability of aluminium is dependent on the form in which it is ingested and the presence of dietary constituents with which the metal cation can complex Ligands in food can have a marked effect on absorption of aluminium, as they can either enhance uptake by forming absorbable (usually water soluble) complexes (e.g., with carboxylic acids such as citric and lactic), or reduce it by forming insoluble compounds (e.g., with phosphate or dissolved silicate). Considering the available human and animal data it is likely that the oral absorption of aluminium can vary 10-fold based on chemical form alone. Although bioavailability appears to generally parallel water solubility, insufficient data are available to directly extrapolate from solubility in water to bioavailability.

For oral intake from food, the European Food Safety Authority (EFSA) has derived a tolerable weekly intake (TWI) of 1 milligram (mg) of aluminium per kilogram of bodyweight. In its health assessment, the EFSA states a medium bioavailability of 0.1 % for all aluminium compounds which are ingested with food. This corresponds to a systemically available tolerable daily dose of 0.143 microgrammes (µg) per kilogramme (kg) of body weight. This means that for an adult weighing 60 kg, a systemically available dose of 8.6 µg per day is considered safe. Based on a neuro-developmental toxicity study of aluminium citrate administered via drinking water to rats, the Joint FAO/WHO Expert Committee on Food Additives (JECFA) established a Provisional Tolerable Weekly Intake (PTWI) of 2 mg/kg bw (expressed as aluminium) for all aluminium compounds in food, including food additives. The Committee on Toxicity of chemicals in food, consumer products and the environment (COT) considers that the derivation of this PTWI was sound and that it should be used in assessing potential risks from dietary exposure to aluminium.

The Federal Institute for Risk Assessment (BfR) of Germany has assessed the estimated aluminium absorption from antiperspirants. For this purpose, the data, derived from experimental studies, on dermal absorption of aluminium from antiperspirants for healthy and damaged skin was used as a basis. At about 10.5 µg, the calculated systemic intake values for healthy skin are above the 8.6 µg per day that are considered safe for an adult weighing 60 kg. If aluminium -containing antiperspirants are used on a daily basis, the tolerable weekly intake determined by the EFSA is therefore exceeded. The values for damaged skin, for example injuries from shaving, are many times higher. This means that in case of daily use of an aluminium-containing antiperspirant alone, the TWI may be completely exhausted. In addition, further aluminium absorption sources such as food, cooking utensils and other cosmetic products must be taken into account

Systemic toxicity after repeated exposure

No studies were located regarding dermal effects in animals following intermediate or chronic-duration dermal exposure to various forms of aluminium.

When orally administered to rats, aluminium compounds (including aluminium nitrate, aluminium sulfate and potassium aluminium sulfate) have produced various effects, including decreased gain in body weight and mild histopathological changes in the spleen, kidney and liver of rats (104 mg Al/kg bw/day) and dogs (88-93 mg Al/kg bw/day) during subchronic oral exposure. Effects on nerve cells, testes, bone and stomach have been reported at higher doses. Severity of effects increased with dose.

The main toxic effects of aluminium that have been observed in experimental animals are neurotoxicity and nephrotoxicity. Neurotoxicity has also been described in patients dialysed with water containing high concentrations of aluminium, but epidemiological data on possible adverse effects in humans at lower exposures are inconsistent

Reproductive and developmental toxicity:

Studies of reproductive toxicity in male mice (intraperitoneal or subcutaneous administration of aluminium nitrate or chloride) and rabbits (administration of aluminium chloride by gavage) have demonstrated the ability of aluminium to cause testicular toxicity, decreased sperm quality in mice and rabbits and reduced fertility in mice. No reproductive toxicity was seen in females given aluminium nitrate by gavage or dissolved in drinking water. Multi-generation reproductive studies in which aluminium sulfate and aluminium ammonium sulfate were administered to rats in drinking water, showed no evidence of reproductive toxicity

High doses of aluminium compounds given by gavage have induced signs of embryotoxicity in mice and rats in particular, reduced fetal body weight or pup weight at birth and delayed ossification. Developmental toxicity studies in which aluminium chloride was administered by gavage to pregnant rats showed evidence of foetotoxicity, but it was unclear whether the findings were secondary to maternal toxicity. A twelve-month neuro-development with aluminium citrate administered via the drinking water to Sprague-Dawley rats, was conducted according to Good Laboratory Practice (GLP). Aluminium citrate was selected for the study since it is the most soluble and bioavailable aluminium salt. Pregnant rats were exposed to aluminium citrate from gestational day 6 through lactation, and then the offspring were exposed post-weaning until postnatal day 364. An extensive functional observational battery of tests was performed at various times. Evidence of aluminium toxicity was demonstrated in the high (300 mg/kg bw/day of aluminium) and to a lesser extent, the mid-dose groups (100 mg/kg bw/day of aluminium). In the high-dose group, the main effect was renal damage, resulting in high mortality in the male offspring. No major neurological pathology or neurobehavioural effects were observed, other than in the neuromuscular subdomain (reduced grip strength and increased foot splay). Thus, the lowest observed adverse effect level (LOAEL) was 100 mg/kg bw/day and the no observed adverse effect level (NOAEL) was 30 mg/kg bw/day. Bioavailability of aluminium citrate and intrate and aluminium hydroxide was much lower than that of aluminium citrate This study was used by JECFA as key study to derive the PTWI.

Genotoxicity

Aluminium compounds were non-mutagenic in bacterial and mammalian cell systems, but some produced DNA damage and effects on chromosome integrity and segregation in vitro. Clastogenic effects were also observed in vivo when aluminium sulfate was administered at high doses by gavage or by the intraperitoneal route. Several indirect mechanisms have been proposed to explain the variety of genotoxic effects elicited by aluminium salts in experimental systems. Cross-linking of DNA with chromosomal proteins, interaction with microtubule assembly and mitotic spindle functioning, induction of oxidative damage, damage of lysosomal membranes with liberation of DNAase, have been suggested to explain the induction of structural chromosomal aberrations, sister chromatid exchanges, chromosome loss and formation of oxidized bases in experimental systems. The EFSA Panel noted that these indirect mechanisms of genotoxicity, occurring at relatively high levels of exposure, are unlikely to be of relevance for humans exposed to aluminium via the diet. Aluminium compounds do not cause gene mutations in either bacteria or mammalian cells. Exposure to aluminium compounds does result in both structural and numerical chromosome aberrations both in in-vitro and in-vivo mutagenicity tests. DNA damage is probably the result of indirect mechanisms. The DNA damage was observed only at high exposure levels.

Carcinogenicity.

The available epidemiological studies provide limited evidence that certain exposures in the aluminium production industry are carcinogenic to humans, giving rise to cancer of the lung and bladder. However, the aluminium exposure was confounded by exposure to other agents including polycyclic aromatic hydrocarbons, aromatic amines, nitro compounds and asbestos. There is no evidence of increased cancer risk in non-occupationally exposed persons.

Neurodegenerative diseases.

Following the observation that high levels of aluminium in dialysis fluid could cause a form of dementia in dialysis patients, a number of studies were carried out to determine if aluminium could cause dementia or cognitive impairment as a consequence of environmental exposure over long periods. Aluminium was identified, along with other elements, in the amyloid plaques that are one of the diagnostic lesions in the brain for Alzheimer disease, a common form of senile and pre-senile dementia. some of the epidemiology studies suggest the possibility of an association of Alzheimer diseases with aluminium in water, but other studies do not confirm this association. All studies lack information on ingestion of aluminium from food and how concentrations of aluminium in food affect the association between aluminium in water and Alzheimer disease." There are suggestions that persons with some genetic variants may absorb more aluminium than others, but there is a need for more analytical research to determine whether aluminium from various sources has a significant causal association with Alzheimer disease and other neurodegenerative diseases. Aluminium is a neurotoxicant in experimental animals. However, most of the animal studies performed have several limitations and therefore cannot be used for quantitative risk assessment.

It has been suggested that the body burden of aluminium may be linked to different iseases. Macrophagic myofasciitis and chronic fatigue syndrome can be caused by aluminium-containing adjuvants in vaccines. Macrophagic myofasciitis (MMF) has been described as a disease in adults presenting with ascending myalgia and severe fatigue following exposure to aluminium hydroxide-containing vaccines The corresponding histological findings include aluminium-containing macrophages infiltrating muscle tissue at the injection site. The hypothesis is that the long-lasting granuloma triggers the development of the systemic syndrome.

Aluminium acts not only as an adjuvant, stimulating the immune system either to fend off infections or to tolerate antigens, it also acts as a

8329TCS-A Thermally Conductive Epoxy Adhesive

sensitisers causing contact allergy and allergic contact dermatitis. In general, metal allergies are very common and aluminium is considered to be a weak allergen. A metal must be ionised to be able to act as a contact allergen, then it has to undergo haptenisation to be immunogenic and to initiate an immune response. Once inside the skin, the metal ions must bind to proteins to become immunologically reactive. The most important routes of exposure and sensitisation to aluminium are through aluminium-containing vaccines. One Swedish study showed a statistically significant association between contact allergy to aluminium and persistent itching nodules in children treated with allergen-specific immunotherapy (ASIT) Nodules were overrepresented in patients with contact allergy to aluminium

Other routes of sensitisation reported in the literature are the prolonged use of aluminium-containing antiperspirants, topical medication, and tattooing of the skin with aluminium-containing pigments. Most of the patients experienced eczematous reactions whereas tattooing caused granulomas. Even though aluminium is used extensively in industry, only a low number of cases of occupational skin sensitisation to aluminium have been reported Systemic allergic contact dermatitis in the form of flare-up reactions after re-exposure to aluminium has been documented: pruritic nodules at present and previous injection sites, eczema at the site of vaccination as well as at typically atopic localisations after vaccination with aluminium-containing vaccines and/or patch testing with aluminium, and also after use of aluminium-containing toothpaste. The various members of the bisphenol family produce hormone like effects, seemingly as a result of binding to estrogen receptor-related receptors (ERRs; not to be confused with estrogen receptors)

A suspected estrogen-related receptors (ERR) binding agent:
Estrogen-related receptors (ERR, oestrogen-related receptors) are so named because of sequence homology with estrogen receptors but do not appear to bind estrogens or other tested steroid hormones. The ERR family have been demonstrated to control energy homeostasis, oxidative metabolism and mitochondrial biogenesis, while effecting mammalian physiology in the heart, brown adipose tissue, white adipose tissue, placenta, macrophages, and demonstrated additional roles in diabetes and cancer.

ERRs bind enhancers throughout the genome where they exert effects on gene regulation

Although their overall functions remain uncertain, they also share DNA-binding sites, co-regulators, and target genes with the conventional estrogen receptors ERalpha and ERbeta and may function to modulate estrogen signaling pathways.

- ERR-alpha has wide tissue distribution but it is most highly expressed in tissues that preferentially use fatty acids as energy sources such as kidney, heart, brown adipose tissue, cerebellum, intestine, and skeletal muscle. ERRalpha has been detected in normal adrenal cortex tissues, in which its expression is possibly related to adrenal development, with a possible role in fetal adrenal function, in dehydroepiandrosterone (DHEAS) production in adrenarche, and also in steroid production of post-adrenarche/adult life. DHEA and other adrenal androgens such as androstenedione, although relatively weak androgens, are responsible for the androgenic effects of adrenarche, such as early pubic and axillary hair growth, adult-type body odor, increased oiliness of hair and skin, and mild acne.
- ERR-beta is a nuclear receptor . Its function is unknown; however, a similar protein in mouse plays an essential role in placental development
- ERR-gamma is a nuclear receptor that behaves as a constitutive activator of transcription. There is evidence that bisphenol A functions as an endocrine disruptor by binding strongly to ERRgamma BPA as well as its nitrated and chlorinated metabolites seems to binds strongly to ERR-gamma (dissociation constant = 5.5 nM), but not to the estrogen receptor (ER). BPA binding to ERR-gamma preserves its basal constitutive activity. Different expression of ERR-gamma in different parts of the body may account for variations in bisphenol A effects. For instance, ERR-gamma has been found in high concentration in the placenta, explaining reports of high bisphenol A accumulation there

ZINC OXIDE

The material may cause skin irritation after prolonged or repeated exposure and may produce a contact dermatitis (nonallergic). This form of dermatitis is often characterised by skin redness (erythema) and swelling epidermis. Histologically there may be intercellular oedema of the spongy layer (spongiosis) and intracellular oedema of the epidermis.

NEOPENTYL GLYCOL DIGLYCIDYL ETHER

* Anchor SDS]
for 1,2-butylene oxide (ethyloxirane):

Ethyloxirane increased the incidence of tumours of the respiratory system in male and female rats exposed via inhalation. Significant increases in nasal papillary adenomas and combined alveolar/bronchiolar adenomas and carcinomas were observed in male rats exposed to 1200 mg/m3 ethyloxirane via inhalation for 103 weeks. There was also a significant positive trend in the incidence of combined alveolar/bronchiolar adenomas and carcinomas. Nasal papillary adenomas were also observed in 2/50 high-dose female rats with none occurring in control or low-dose animals. In mice exposed chronically via inhalation, one male mouse developed a squamous cell papilloma in the nasal cavity (300 mg/m3) but other tumours were not observed. Tumours were not observed in mice exposed chronically via dermal exposure. When trichloroethylene containing 0.8% ethyloxirane was administered orally to mice for up to 35 weeks, followed by 0.4% from weeks 40 to 69, squamous-cell carcinomas of the forestomach occurred in 3/49 males (p=0.029, age-adjusted) and 1/48 females at week 106. Trichloroethylene administered alone did not induce these tumours and they were not observed in control animals . Two structurally related substances, oxirane (ethylene oxide) and methyloxirane (propylene oxide), which are also direct-acting alkylating agents, have been classified as carcinogenic

CARBON BLACK

Inhalation (rat) TCLo: 50 mg/m3/6h/90D-l Nil reported

WARNING: This substance has been classified by the IARC as Group 2B: Possibly Carcinogenic to Humans.

8329TCS-A Thermally Conductive Epoxy Adhesive & BISPHENOL F DIGLYCIDYL ETHER COPOLYMER & NEOPENTYL GLYCOL DIGLYCIDYL ETHER

The following information refers to contact allergens as a group and may not be specific to this product.

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.

Oxiranes (including glycidyl ethers and alkyl oxides, and epoxides) exhibit many common characteristics with respect to animal toxicology. One such oxirane is ethyloxirane; data presented here may be taken as representative.

8329TCS-A Thermally Conductive Epoxy Adhesive & BISPHENOL F DIGLYCIDYL ETHER COPOLYMER

The chemical structure of hydroxylated diphenylalkanes or bisphenols consists of two phenolic rings joined together through a bridging carbon. This class of endocrine disruptors that mimic oestrogens is widely used in industry, particularly in plastics.

Bisphenol A (BPA) and some related compounds exhibit oestrogenic activity in human breast cancer cell line MCF-7, but there were remarkable differences in activity. Several derivatives of BPA exhibited significant thyroid hormonal activity towards rat pituitary cell line GH3, which releases growth hormone in a thyroid hormone-dependent manner. However, BPA and several other derivatives did not show such activity. Results suggest that the 4-hydroxyl group of the A-phenyl ring and the B-phenyl ring of BPA derivatives are required for these hormonal activities, and substituents at the 3,5-positions of the phenyl rings and the bridging alkyl moeity markedly influence the activities.

Bisphenols promoted cell proliferation and increased the synthesis and secretion of cell type-specific proteins. When ranked by proliferative potency, the longer the alkyl substituent at the bridging carbon, the lower the concentration needed for maximal cell yield; the most active compound contained two propyl chains at the bridging carbon. Bisphenols with two hydroxyl groups in the para position and an angular

configuration are suitable for appropriate hydrogen bonding to the acceptor site of the oestrogen receptor. In vitro cell models were used to evaluate the ability of 22 bisphenols (BPs) to induce or inhibit estrogenic and androgenic activity. BPA, Bisphenol AF (BPAF), bisphenol Z (BPZ), bisphenol C (BPC), tetramethyl bisphenol A (TMBPA), bisphenol S (BPS), bisphenol E (BPE), 4,4-bisphenol F (4,4-BPF), bisphenol AP (BPAP), bisphenol B (BPB), tetrachlorobisphenol A (TCBPA), and benzylparaben (PHBB) induced estrogen receptor (ER)alpha and/or ERbeta-mediated activity. With the exception of BPS, TCBPA, and PHBB, these same BPs were also androgen receptor (AR) antagonists. Only 3 BPs were found to be ER antagonists. Bisphenol P (BPP) selectively inhibited ERbeta-mediated activity and 4-(4-phenylmethoxyphenyl)sulfonylphenol (BPS-MPE) and 2,4-bisphenol S (2,4-BPS) selectively inhibited ERalpha-mediated activity.

ALUMINIUM OXIDE & CARBON BLACK

No significant acute toxicological data identified in literature search.

None of the BPs induced AR-mediated activity.

Acute Toxicity

×

Carcinogenicity



			a contract of the contract of
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

11.2.1. Endocrine Disruption Properties

Many chemicals may mimic or interfere with the body's hormones, known as the endocrine system. Endocrine disruptors are chemicals that can interfere with endocrine (or hormonal) systems. Endocrine disruptors interfere with the synthesis, secretion, transport, binding, action, or elimination of natural hormones in the body. Any system in the body controlled by hormones can be derailed by hormone disruptors. Specifically, endocrine disruptors may be associated with the development of learning disabilities, deformations of the body various cancers and sexual development problems. Endocrine disrupting chemicals cause adverse effects in animals. But limited scientific information exists on potential health problems in humans. Because people are typically exposed to multiple endocrine disruptors at the same time, assessing public health effects is difficult.

SECTION 12 Ecological information

12.1. Toxicity

8329TCS-A Thermally			Test Duration (hr)		Species	Value		Source	
onductive Epoxy Adhesive	Not Available	Not Available Not Available			Not Available Not Ava		vailable Not Available		
	Endpoint	Tes	t Duration (hr)	Spec	es		Value		Source
	EC50	72h		Algae	or other aquatic plants		0.2mg/l		2
	EC50	48h		Crust	Crustacea		1.5mg/l		2
aluminium oxide	LC50	96h	96h Fis				0.078-0.108mg/l		2
	NOEC(ECx)	72h		Algae	or other aquatic plants		>100mg/l		1
	EC50	96h		Algae	or other aquatic plants		0.024mg/l		2
	Endpoint	Tos	t Duration (hr)	Spec	08		Value		Source
	EC50	72h	. ,				0.036-0.049	ma/l	4
	BCF			Fish	Algae or other aquatic plants		19-110		7
zinc oxide	LC50	1344h 96h		Fish			0.927-2.589mg/l		4
Zillo Oxido					Crustacea		0.301-0.667mg/l		4
	NOEC(ECx)	72h			Algae or other aquatic plants		0.005mg/l		2
EC50					Algae or other aquatic plants		0.3mg/l		2
pisphenol F diglycidyl ether	Endpoint		Test Duration (hr)		Species	Value		Source	
copolymer			Not Available	t Available Not Available Not A		Not Av	Available Not Av		able
neopentyl glycol diglycidyl	Endpoint		Test Duration (hr)		Species	Value		Source	
ether	Not Available		Not Available		Not Available	Not Av	ailable	Not Avail	able
	Endpoint		Duration (hr)	Specie			Value		Source
carbon black	EC50	72h		Algae or other aquatic plants		>0.2mg/l		2	
	LC50	96h		Fish		>100mg/l		2	
		48h		Crustacea		33.076-41.968mg/l			
	NOEC(ECX)	24n		Crusta	ea		3200mg/I		1
Legend:	V3.12 (QSAR) - A	24h IUCLID T	xicity Data (Estimate	Crustade e ECHA Regal d) 4. US EPA		atic Toxicity D	3200mg/l Information - Aq ata 5. ECETOC	uatic Toxicity	

Very 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.

For high molecular weight synthetic polymers: (according to the Sustainable Futures (SF) program (U.S. EPA 2005b; U.S. EPA 2012c) polymer assessment guidance.) High MW polymers are expected:

- to have low vapour pressure and are not expected to undergo volatilization .
- to adsorb strongly to soil and sediment
- to be non-biodegradable (not anticipated to be assimilated by microorganisms.- therefore, biodegradation is not expected to be an important removal process. However many exceptions exist

High MW polymers are not expected to undergo removal by other degradative processes under environmental conditions

For bisphenol A and related bisphenols:

Environmental fate

Biodegradability (28 d) 89% - Easily biodegradable

Bioconcentration factor (BCF) 7.8 mg/l

Bisphenol A, its derivatives and analogues, can be released from polymers, resins and certain substances by metabolic products

Substance does not meet the criteria for PBT or vPvB according to Regulation (EC) No 1907/2006, Annex XIII

As an environmental contaminant, bisphenol A interferes with nitrogen fixation at the roots of leguminous plants associated with the bacterial symbiont Sinorhizobium meliloti. Despite a half-life in the soil of only 1-10 days, its ubiquity makes it an important pollutant. According to Environment Canada, 'initial assessment shows that at low levels, bisphenol A can harm fish and organisms over time. Studies also indicate that it can currently be found in municipal wastewater.' However, a study conducted in the United States found that 91-98% of bisphenol A may be removed from water during treatment at municipal water treatment plants.

Ecotoxicity

Fish LC50 (96 h): 4.6 mg/l (freshwater fish); 11 mg/l (saltwater fish): NOEC 0.016 mg/l (freshwater fish- 144 d); 0.064 mg/l (saltwater fish 164 d)

Fresh water invertebrates EC50 (48 h): 10.2 mg/l: NOEC 0.025 mg/l - 328 d) Marine water invertebrate EC50 (96 h): 1.1 mg/l; NOEC 0.17 mg/l (28 d)

Freshwater algae (96 h): 2.73 mg/l Marine water algae (96 h): 1.1 mg/l

Fresh water plant EC50 (7 d): 20 mg/l: NOEC 7.8 mg/l

In general, studies have shown that bisphenol A can affect growth, reproduction and development in aquatic organisms.

Among freshwater organisms, fish appear to be the most sensitive species. Evidence of endocrine-related effects in fish, aquatic invertebrates, amphibians and reptiles has been reported at environmentally relevant exposure levels lower than those required for acute toxicity. There is a widespread variation in reported values for endocrine-related effects, but many fall in the range of 1 ug/L to 1 mg/L

A 2009 review of the biological impacts of plasticisers on wildlife published by the Royal Society with a focus on annelids (both aquatic and terrestrial), molluscs, crustaceans, insects, fish and amphibians concluded that bisphenol A has been shown to affect reproduction in all studied animal groups, to impair development in crustaceans and amphibians and to induce genetic aberrations.

A large 2010 study of two rivers in Canada found that areas contaminated with hormone-like chemicals including bisphenol A showed females made up 85 per cent of the population of a certain fish, while females made up only 55 per cent in uncontaminated areas.

Although abundant data are available on the toxicity of bisphenol-A (2,2-bis (4-hydroxydiphenyl)propane;(BPA) A variety of BPs were examined for their acute toxicity against Daphnia magna, mutagenicity, and oestrogenic activity using the Daphtoxkit (Creasel Ltd.), the umu test system, and the yeast two-hybrid system, respectively, in comparison with BPA. BPA was moderately toxic to D. magna (48-h EC50 was 10 mg/l) according to the current U.S. EPA acute toxicity evaluation standard, and it was weakly oestrogenic with 5 orders of magnitude lower activity than that of the natural estrogen 17 beta-oestradiol in the yeast screen, while no mutagenicity was observed. All seven BPs tested here showed moderate to slight acute toxicity, no mutagenicity, and weak oestrogenic activity as well as BPA. Some of the BPs showed considerably higher oestrogenic activity than BPA, and others exhibited much lower activity. Bisphenol S (bis(4-hydroxydiphenyl)sulfone) and bis(4-hydroxyphenyl)sulfide) showed oestrogenic activity.

Biodegradation is a major mechanism for eliminating various environmental pollutants. Studies on the biodegradation of bisphenols have mainly focused on bisphenol A. A number of BPA-degrading bacteria have been isolated from enrichments of sludge from wastewater treatment plants. The first step in the biodegradation of BPA is the hydroxylation of the carbon atom of a methyl group or the quaternary carbon in the BPA molecule. Judging from these features of the biodegradation mechanisms, it is possible that the same mechanism used for BPA is used to biodegrade all bisphenols that have at least one methyl or methylene group bonded at the carbon atom between the two phenol groups. However, bisphenol F ([bis(4-hydroxyphenyl)methane; BPF), which has no substituent at the bridging carbon, is unlikely to be metabolised by such a mechanism. Nevertheless BPF is readily degraded by river water microorganisms under aerobic conditions. From this evidence, it was clear that a specific mechanism for biodegradation of BPF does exist in the natural ecosystem, Algae can enhance the photodegradation of bisphenols. The photodegradation rate of BPF increased with increasing algae concentration. Humic acid and Fe3+ ions also enhanced the photodegradation of BPF. The effect of pH value on the BPF photodegradation was also important.

Significant environmental findings are limited. Oxiranes (including glycidyl ethers and alkyl oxides, and epoxides) exhibit common characteristics with respect to environmental fate and ecotoxicology. One such oxirane is ethyloxirane and data presented here may be taken as representative. for 1,2-butylene oxide (ethyloxirane):

Environmental fate: Ethyloxirane is highly soluble in water and has a very low soil-adsorption coefficient, which suggests that if released to water, adsorption of ethyloxirane to sediment and suspended solids is not expected. Volatilisation of ethyloxirane from water surfaces would be expected based on the moderate estimated Henry's Law constant. If ethyloxirane is released to soil, it is expected to have low adsorption and thus very high mobility. Volatilisation from moist soil and dry soil surfaces is expected, based on its vapour pressure. It is expected that ethyloxirane exists solely as a vapour in ambient atmosphere, based on its very high vapour pressure. Ethyloxirane may also be removed from the atmosphere by wet deposition processes, considering its relatively high water solubility.

Persistence: The half-life in air is about 5.6 days from the reaction of ethyloxirane with photochemically produced hydroxyl radicals which indicates that this chemical meets the persistence criterion in air (half-life of = 2 days)*.

Ethyloxirane is hydrolysable, with a half-life of 6.5 days, and biodegradable up to 100% degradation and is not expected to persist in water. A further model-predicted biodegradation half-life of 15 days in water was obtained and used to predict the half-life of this chemical in soil and sediment by applying Boethling's extrapolation factors (t1/2water:t1/2 soil: t1/2sediment = 1:1:4) (Boethling 1995). According to these values, it can be concluded that ethyloxirane does not meet the persistence criteria in water and soil (half-lives = 182 days) and sediments (half-life = 365 days).

Experimental and modelled log Kow values of 0.68 and 0.86, respectively, indicate that the potential for bioaccumulation of ethyloxirane in organisms is likely to be low. Modelled bioaccumulation -factor (BAF) and bioconcentration -factor (BCF) values of 1 to 17 L/kg indicate that ethyloxirane does not meet the bioaccumulation criteria (BCF/BAF = 5000)*

Experimental ecotoxicological data for ethyloxirane (OECD 2001) indicate low to moderate toxicity to aquatic organisms. For fish and water flea, acute LC50/EC50 values vary within a narrow range of 70-215 mg/L; for algae, toxicity values exceed 500 mg/L, while for bacteria they are close to 5000 mg/L

* Persistence and Bioaccumulation Regulations (Canada 2000).

Environmental toxicity is a function of the n-octanol/ water partition coefficient (log Pow, log Kow). Phenols with log Pow >7.4 are expected to exhibit low toxicity to aquatic organisms. However the toxicity of phenols with a lower log Pow is variable, ranging from low toxicity (LC50 values >100 mg/l) to highly toxic (LC50 values <1 mg/l) dependent on log Pow, molecular weight and substitutions on the aromatic ring. Dinitrophenols are more toxic than predicted from QSAR estimates. Hazard information for these groups is not generally available.

For zinc and its compounds:

Environmental fate:

Zinc is capable of forming complexes with a variety of organic and inorganic groups (ligands). Biological activity can affect the mobility of zinc in the aquatic environment, although the biota contains relatively little zinc compared to the sediments. Zinc bioconcentrates moderately in aquatic organisms; bioconcentration is higher in crustaceans and bivalve species than in fish. Zinc does not concentrate appreciably in plants, and it does not biomagnify significantly through terrestrial food chains.

However biomagnification may be of concern if concentration of zinc exceeds 1632 ppm in the top 12 inches of soil.

Zinc can persist in water indefinitely and can be toxic to aquatic life. The threshold concentration for fish is 0.1 ppm. Zinc may be concentrated in the aquatic food chain; it is concentrated over 200,000 times in oysters. Copper is synergistic but calcium is antagonistic to zinc toxicity in fish. Zinc can accumulate in freshwater animals at 5 -1,130 times the concentration present in the water. Furthermore, although zinc actively bioaccumulates in aquatic systems, biota appears to represent a relatively minor sink compared to sediments. Steady-state zinc bioconcentration factors (BCFs) for 12 aquatic species range from 4 to 24,000. Crustaceans and fish can accumulate zinc from both water and food. A BCF of 1,000 was reported for both aquatic plants and fish, and a value of 10,000 was reported for aquatic invertebrates. The order of enrichment of zinc in different aquatic organisms was as follows (zinc concentrations in µg/g dry weight appear in parentheses): fish (25), shrimp (50), mussel (60), periphyton (260), zooplankton (330), and oyster (3,300). The high enrichment in oysters may be due to their ingestion of particulate matter containing higher concentrations of zinc than ambient water. Other investigators have also indicated that organisms associated with sediments have higher zinc concentrations than organisms living in the aqueous layer. With respect to bioconcentration from soil by terrestrial plants, invertebrates, and mammals, BCFs of 0.4, 8, and 0.6, respectively, have been reported. The concentration of zinc in plants depends on the plant species, soil pH, and the composition of the soil.

Plant species do not concentrate zinc above the levels present in soil.

In some fish, it has been observed that the level of zinc found in their bodies did not directly relate to the exposure concentrations. Bioaccumulation of zinc in fish is inversely related to the aqueous exposure. This evidence suggests that fish placed in environments with lower zinc concentrations can sequester zinc in their bodies.

The concentration of zinc in drinking water may increase as a result of the distribution system and household plumbing. Common piping materials used in distribution systems often contain zinc, as well as other metals and alloys. Trace metals may enter the water through corrosion products or simply by the dissolution of small amounts of metals with which the water comes in contact. Reactions with materials of the distribution system, particularly in soft low-pH waters, very often have produced concentrations of zinc in tap water much greater than those in the raw or treated waters at the plant of origin. Zinc gives water a metallic taste at low levels. Overexposures to zinc also have been associated with toxic effects.

Ingestion of zinc or zinc-containing compounds has resulted in a variety of systemic effects in the gastrointestinal and hematological systems and alterations in the blood lipid profile in humans and animals. In addition, lesions have been observed in the liver, pancreas, and kidneys of animals.

Environmental toxicity of zinc in water is dependent upon the concentration of other minerals and the pH of the solution, which affect the ligands that associate with zinc.

Zinc occurs in the environment mainly in the +2 oxidation state. Sorption is the dominant reaction, resulting in the enrichment of zinc in suspended and bed sediments. Zinc in aerobic waters is partitioned into sediments through sorption onto hydrous iron and manganese oxides, clay minerals, and organic material. The efficiency of these materials in removing zinc from solution varies according to their concentrations, ph, redox potential (Eh), salinity, nature and concentrations of complexing ligands, cation exchange capacity, and the concentration of zinc. Precipitation of soluble zinc compounds appears to be significant only under reducing conditions in highly polluted water. Generally, at lower pH values, zinc remains as the free ion. The free ion (Zn+2) tends to be adsorbed and transported by suspended solids in unpolluted waters.

Zinc is an essential nutrient that is present in all organisms. Although biota appears to be a minor reservoir of zinc relative to soils and sediments, microbial decomposition of biota in water can produce ligands, such as humic acids, that can affect the mobility of zinc in the aquatic environment through zinc precipitation and adsorption.

The relative mobility of zinc in soil is determined by the same factors that affect its transport in aquatic systems (i.e., solubility of the compound, pH, and salinity)

The redox status of the soil may shift zinc partitioning. Reductive dissolution of iron and manganese (hydr)oxides under suboxic conditions release zinc into the aqueous phase; the persistence of suboxic conditions may then lead to a repartitioning of zinc into sulfide and carbonate solids. The mobility of zinc in soil depends on the solubility of the speciated forms of the element and on soil properties such as cation exchange capacity, pH, redox potential, and chemical species present in soil; under anaerobic conditions, zinc sulfide is the controlling species.

Since zinc sulfide is insoluble, the mobility of zinc in anaerobic soil is low. In a study of the effect of pH on zinc solubility: When the pH is <7, an inverse relationship exists between the pH and the amount of zinc in solution. As negative charges on soil surfaces increase with increasing pH, additional sites for zinc adsorption are activated and the amount of zinc in solution decreases. The active zinc species in the adsorbed state is the singly charged zinc hydroxide species (i.e., Zn[OH]+). Other investigators have also shown that the mobility of zinc in soil increases at lower soil pH under oxidizing conditions and at a lower cation exchange capacity of soil. On the other hand, the amount of zinc in solution generally increases when the pH is >7 in soils high in organic matter. This is a result of the release of organically complexed zinc, reduced zinc adsorption at higher pH, or an increase in the concentration of chelating agents in soil. For calcareous soils, the relationship between zinc solubility and pH is nonlinear. At a high pH, zinc in solution is precipitated as Zn(OH)2, zinc carbonate (ZnCO3), or calcium zincate. Clay and metal oxides are capable of sorbing zinc and tend to retard its mobility in soil. Zinc was more mobile at pH 4 than at pH 6.5 as a consequence of sorption

Zinc concentrations in the air are relatively low, except near industrial sources such as smelters. No estimate for the atmospheric lifetime of zinc is available at this time, but the fact that zinc is transported long distances in air indicates that its lifetime in air is at least on the order of days. There are few data regarding the speciation of zinc released to the atmosphere. Zinc is removed from the air by dry and wet deposition, but zinc particles with small diameters and low densities suspended in the atmosphere travel long distances from emission sources.

For aluminium and its compounds and salts:

Despite its prevalence in the environment, no known form of life uses aluminium salts metabolically. In keeping with its pervasiveness, aluminium is well tolerated by plants and animals. Owing to their prevalence, potential beneficial (or otherwise) biological roles of aluminium compounds are of continuing interest.

Environmental fate:

Aluminium occurs in the environment in the form of silicates, oxides and hydroxides, combined with other elements such as sodium, fluorine and arsenic complexes with organic matter

matter.

Acidification of soils releases aluminium as a transportable solution. Mobilisation of aluminium by acid rain results in aluminium becoming available for plant uptake.

As an element, aluminum cannot be degraded in the environment, but may undergo various precipitation or ligand exchange reactions. Aluminum in compounds has only one oxidation state (+3), and would not undergo oxidation-reduction reactions under environmental conditions. Aluminum can be complexed by various ligands present in the environment (e.g., fulvic and humic acids). The solubility of aluminum in the environment will depend on the ligands present and the pH.

The trivalent aluminum ion is surrounded by six water molecules in solution. The hydrated aluminum ion, [Al(H2O)6]3+, undergoes hydrolysis, in which a stepwise deprotonation of the coordinated water ligands forms bound hydroxide ligands (e.g., [Al(H2O)5(OH)]2+, [Al(H2O)4(OH)2]+). The speciation of aluminum in water is pH dependent. The hydrated trivalent aluminum ion is the predominant form at pH levels below 4. Between pH 5 and 6, the predominant hydrolysis products are Al(OH)2+ and Al(OH)2+, while the solid Al(OH)3 is most prevalent between pH 5.2 and 8.8. The soluble species Al(OH)4- is the predominant species above pH 9, and is the only species present above pH 10. Polymeric aluminum hydroxides appear between pH 4.7 and 10.5, and increase in size until they are transformed into colloidal particles of amorphous Al(OH)3, which crystallise to gibbsite in acid waters.

Polymerisation is affected by the presence of dissolved silica; when enough silica is present, aluminum is precipitated as poorly crystallised clay mineral species.

Hydroxyaluminum compounds are considered amphoteric (e.g., they can act as both acids and bases in solution). Because of this property, aluminum hydroxides can act as buffers

and resist pH changes within the narrow pH range of 4-5.

Monomeric aluminum compounds, typified by aluminum fluoride, chloride, and sulfate, are considered reactive or labile compounds, whereas polymeric aluminum species react much more slowly in the environment. Aluminum has a stronger attraction for fluoride in an acidic environment compared to other inorganic ligand.

The adsorption of aluminum onto clay surfaces can be a significant factor in controlling aluminum mobility in the environment, and these adsorption reactions, measured in one study at pH 3.0-4.1, have been observed to be very rapid. However, clays may act either as a sink or a source for soluble aluminum depending on the degree of aluminum saturation on the clay surface.

Within the pH range of 5-6, aluminum complexes with phosphate and is removed from solution. Because phosphate is a necessary nutrient in ecological systems, this immobilization of both aluminum and phosphate may result in depleted nutrient states in surface water.

Plant species and cultivars of the same species differ considerably in their ability to take up and translocate aluminum to above-ground parts. Tea leaves may contain very high concentrations of aluminum, >5,000 mg/kg in old leaves. Other plants that may contain high levels of aluminum include Lycopodium (Lycopodiaceae), a few ferns, Symplocos (Symplocaceae), and Orites (Proteaceae). Aluminum is often taken up and concentrated in root tissue. In sub-alpine ecosystems, the large root biomass of the Douglas fir, Abies amabilis, takes up aluminum and immobilizes it, preventing large accumulation in above-ground tissue. It is unclear to what extent aluminum is taken up into root food crops and leafy vegetables. An uptake factor (concentration of aluminum in the plant/concentration of aluminum in soil) of 0.004 for leafy vegetables and 0.00065 for fruits and tubers has been reported, but the pH and plant species from which these uptake factors were derived are unclear. Based upon these values, however, it is clear that aluminum is not taken up in plants from soil, but is instead biodiluted.

Aluminum concentrations in rainbow trout from an alum-treated lake, an untreated lake, and a hatchery were highest in gill tissue and lowest in muscle. Aluminum residue analyses in brook trout have shown that whole-body aluminum content decreases as the fish advance from larvae to juveniles. These results imply that the aging larvae begin to decrease their rate of aluminum uptake, to eliminate aluminum at a rate that exceeds uptake, or to maintain approximately the same amount of aluminum while the body mass increases. The decline in whole-body aluminum residues in juvenile brook trout may be related to growth and dilution by edible muscle tissue that accumulated less aluminum than did the other tissues.

The greatest fraction of the gill-associated aluminum was not sorbed to the gill tissue, but to the gill mucus. It is thought that mucus appears to retard aluminum transport from solution to the membrane surface, thus delaying the acute biological response of the fish. It has been reported that concentrations of aluminum in whole-body tissue of the Atlantic salmon exposed to high concentrations of aluminum ranging from 3 ug/g (for fish exposed to 33 ug/L) to 96 ug/g (for fish exposed to 264 ug/L) at pH 5.5. After 60 days of exposure, BCFs ranged from 76 to 190 and were directly related to the aluminum exposure concentration. In acidic waters (pH 4.6-5.3) with low concentrations of calcium (0.5-1.5 mg Ca/L), labile aluminum between 25 and 75 ug/L is toxic. Because aluminum is toxic to many aquatic species, it is not bioaccumulated to a significant degree (BCF <300) in most fish and shellfish; therefore, consumption of contaminated fish does not appear to be a significant source of aluminum exposure in humans.

Bioconcentration of aluminum has also been reported for several aquatic invertebrate species. BCF values ranging from 0.13 to 0.5 in the whole-body were reported for the snail. Bioconcentration of aluminum has also been reported for aquatic insects.

Ecotoxicity

Freshwater species pH >6.5

Fish: Acute LC50 (48-96 h) 5 spp: 0.6 (Salmo salar) - 106 mg/L; Chronic NOEC (8-28 d): 7 spp,NOEC, 0.034-7.1 mg/L. The lowest measured chronic figure was an 8-d LC50 of 0.17 mg/L for Micropterus sp.

Amphibian: Acute LC50 (4 d): Bufo americanus, 0.86-1.66 mg/L; Chronic LC50 (8-d) 2.28 mg/L

Crustaceans LC50 (48 h): 1 sp 2.3-36 9 mg/L; Chronic NOEC (7-28 d) 3 spp, 0.136-1.72 mg/L

Algae EC50 (96 h): population growth, 0.46-0.57 mg/L; 2 spp, chronic NOEC, 0.8-2.0 mg/L

Freshwater species pH <6.5 (all between pH 4.5 and 6.0)

Fish LC50 (24-96 h): 4 spp, 0.015 (S. trutta) - 4.2 mg/L; chronic data on Salmo trutta, LC50 (21-42 d) 0.015- 0.105 mg/L

Amphibians LC50 (4-5 d): 2 spp, 0.540-2.670 m/L (absolute range 0.40-5.2 mg/L)

Alga: 1 sp NOEC growth 2.0 mg/L

Among freshwater aquatic plants, single-celled plants are generally the most sensitive to aluminium. Fish are generally more sensitive to aluminium than aquatic invertebrates. Aluminium is a gill toxicant to fish, causing both ionoregulatory and respiratory effects.

The bioavailability and toxicity of aluminium is generally greatest in acid solutions. Aluminium in acid habitats has been observed to be toxic to fish and phytoplankton. Aluminium is generally more toxic over the pH range 4.4.5.4, with a maximum toxicity occurring around pH 5.0.5.2. The inorganic single unit aluminium species (Al(OH)2 +) is thought to be the most toxic. Under very acid conditions, the toxic effects of the high H+ concentration appear to be more important than the effects of low concentrations of aluminium; at approximately neutral pH values, the toxicity of aluminium is greatly reduced. The solubility of aluminium is also enhanced under alkaline conditions, due to its amphoteric character, and some researchers found that the acute toxicity of aluminium increased from pH 7 to pH 9. However, the opposite relationship was found in other studies. The uptake and toxicity of

aluminium in freshwater organisms generally decreases with increasing water hardness under acidic, neutral and alkaline conditions. Complexing agents such as fluoride, citrate and humic substances reduce the availability of aluminium to organisms, resulting in lower toxicity. Silicon can also reduce aluminium toxicity to fish.

Drinking Water Standards: aluminium: 200 ug/l (UK max.) 200 ug/l (WHO guideline) chloride: 400 mg/l (UK max.) 250 mg/l (WHO guideline) fluoride: 1.5 mg/l (UK max.) 1.5 mg/l (WHO guideline) nitrate: 50 mg/l (UK max.) 50 mg/l (WHO guideline) sulfate: 250 mg/l (UK max.) Soil Guideline: none available. Air Quality Standards: none available.

12.2. Persistence and degradability

Ingredient	Persistence: Water/Soil	Persistence: Air
neopentyl glycol diglycidyl ether	HIGH	HIGH

12.3. Bioaccumulative potential

Ingredient	Bioaccumulation
zinc oxide	LOW (BCF = 217)
neopentyl glycol diglycidyl ether	LOW (LogKOW = 0.2342)

12.4. Mobility in soil

Ingredient	Mobility
neopentyl glycol diglycidyl ether	LOW (KOC = 10)

12.5. Results of PBT and vPvB assessment

	Р	В	T	
Relevant available data	Not Available	Not Available	Not A	vailable
PBT	×	×	X	
vPvB	×	×	×	
PBT Criteria fulfilled?	PBT Criteria fulfilled?			No
vPvB			No	

12.6. Endocrine Disruption Properties

The evidence linking adverse effects to endocrine disruptors is more compelling in the environment than it is in humans. Endocrine distruptors profoundly alter reproductive physiology of ecosystems and ultimately impact entire populations. Some endocrine-disrupting chemicals are slow to break-down in the environment. That characteristic makes them potentially hazardous over long periods of time. Some well established adverse effects of endocrine disruptors in various wildlife species include; eggshell-thinning, displayed of characteristics of the opposite sex and impaired reproductive development. Other adverse changes in wildlife species that have been suggested, but not proven include; reproductive abnormalities, immune dysfunction and skeletal deformaties.

12.7. Other adverse effects

Not Available

SECTION 13 Disposal considerations

131	Waste	treatment	methods

Product / Packaging disposal

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

- If container can not be cleaned sufficiently well to ensure that residuals do not remain or if the container cannot be used to store the same product, then puncture containers, to prevent re-use, and bury at an authorised landfill.
- Where possible retain label warnings and SDS and observe all notices pertaining to the product.
- DO NOT allow wash water from cleaning or process equipment to enter drains
- It may be necessary to collect all wash water for treatment before disposal.
- In all cases disposal to sewer may be subject to local laws and regulations and these should be considered first.
- ▶ Where in doubt contact the responsible authority.

Not Available

Sewage disposal options	Not Available	
SECTION 14 Transport information		

Waste treatment options

Labels Required

For 8329TCS-6ML, 8329TCS-50ML, 8329TCS-200ML NOT REGULATED by Ground ADR Special Provision 375 NOT REGULATED by Air IATA Special Provision A197 NOT REGULATED by Sea IMDG per 2.10.2.7 NOT REGULATED by ADN Special Provision 274 (The provision of 3.1.2.8 apply)

Land transport (ADR-RID)

14.1. UN number	3077		
14.2. UN proper shipping name	ENVIRONMENTALLY HAZARDO	ENVIRONMENTALLY HAZARDOUS SUBSTANCE, SOLID, N.O.S. (contains zinc oxide)	
14.3. Transport hazard class(es)	Class 9 Subrisk Not Applicable		
14.4. Packing group	III		
14.5. Environmental hazard	Environmentally hazardous		
	Hazard identification (Kemler)	90	
	Classification code	M7	
14.6. Special precautions for	6. Special precautions for Hazard Label	9	
user	Special provisions	274 335 375 601	
	Limited quantity	5 kg	
	Tunnel Restriction Code	3 (-)	

Air transport (ICAO-IATA / DGR)

14.1. UN number	3077			
14.2. UN proper shipping name	Environmentally hazardo	Environmentally hazardous substance, solid, n.o.s. * (contains zinc oxide)		
14.3. Transport hazard	ICAO/IATA Class	9 Not Applicable		
class(es)	ERG Code 9L			
14.4. Packing group	Ш			
14.5. Environmental hazard	Environmentally hazardo	ous		
	Special provisions A97 A158 A179 A197 A215			
	Cargo Only Packing Ir	nstructions	956	
	Cargo Only Maximum Qty / Pack		400 kg	
14.6. Special precautions for user	Passenger and Cargo Packing Instructions		956	
usei	Passenger and Cargo Maximum Qty / Pack		400 kg	
	Passenger and Cargo Limited Quantity Packing Instructions		Y956	
	Passenger and Cargo	Limited Maximum Qty / Pack	30 kg G	
]			

Sea transport (IMDG-Code / GGVSee)

14.1. UN number	3077	
14.2. UN proper shipping name	ENVIRONMENTALLY HAZARDOUS SUBSTANCE, SOLID, N.O.S. (contains zinc oxide)	
14.3. Transport hazard class(es)	IMDG Class 9 IMDG Subrisk Not Applicable	
14.4. Packing group	III	
14.5. Environmental hazard	Marine Pollutant	
14.6. Special precautions for user	EMS Number F-A , S-F Special provisions 274 335 966 967 969 Limited Quantities 5 kg	

Inland waterways transport (ADN)

14.1. UN number	3077	3077	
14.2. UN proper shipping name	ENVIRONMENTALLY HAZARDOUS SUBSTANCE, SOLID, N.O.S. (contains zinc oxide)		
14.3. Transport hazard class(es)	9 Not Applicable		
14.4. Packing group	III		
14.5. Environmental hazard	Environmentally hazardous		
440 Considerations for	Classification code Special provisions	M7 274: 335: 375: 601	
14.6. Special precautions for user	Limited quantity	5 kg	
	Equipment required	PP. A***	

Fire cones number 0

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

Not Applicable

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

Product name	Group
aluminium oxide	Not Available
zinc oxide	Not Available
bisphenol F diglycidyl ether copolymer	Not Available
neopentyl glycol diglycidyl ether	Not Available
carbon black	Not Available

14.9. Transport in bulk in accordance with the ICG Code

Product name	Ship Type
aluminium oxide	Not Available
zinc oxide	Not Available
bisphenol F diglycidyl ether copolymer	Not Available
neopentyl glycol diglycidyl ether	Not Available
carbon black	Not Available

SECTION 15 Regulatory information

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

aluminium oxide is found on the following regulatory lists

Chemical Footprint Project - Chemicals of High Concern List Europe EC Inventory European Union - European Inventory of Existing Commercial Chemical Substances (EINECS)

zinc oxide is found on the following regulatory lists

EU European Chemicals Agency (ECHA) Community Rolling Action Plan (CoRAP) List of Substances

Europe EC Inventory

European Union - European Inventory of Existing Commercial Chemical Substances (EINECS)

European Union (EU) Regulation (EC) No 1272/2008 on Classification, Labelling and Packaging of Substances and Mixtures - Annex VI

bisphenol F diglycidyl ether copolymer is found on the following regulatory lists

Chemical Footprint Project - Chemicals of High Concern List

neopentyl glycol diglycidyl ether is found on the following regulatory lists

Chemical Footprint Project - Chemicals of High Concern List Europe EC Inventory

European Union - European Inventory of Existing Commercial Chemical Substances (EINECS)

European Union (EU) Regulation (EC) No 1272/2008 on Classification, Labelling and Packaging of Substances and Mixtures - Annex VI

carbon black is found on the following regulatory lists

Chemical Footprint Project - Chemicals of High Concern List

EU European Chemicals Agency (ECHA) Community Rolling Action Plan (CoRAP) List of Substances

Europe EC Inventory

European Union - European Inventory of Existing Commercial Chemical Substances (EINECS)

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

International WHO List of Proposed Occupational Exposure Limit (OEL) Values for Manufactured Nanomaterials (MNMS)

This safety data sheet is in compliance with the following EU legislation and its adaptations - as far as applicable - : Directives 98/24/EC, - 92/85/EEC, - 94/33/EC, - 2008/98/EC, - 2010/75/EU; Commission Regulation (EU) 2020/878; Regulation (EC) No 1272/2008 as updated through ATPs.

15.2. Chemical safety assessment

No Chemical Safety Assessment has been carried out for this substance/mixture by the supplier.

National Inventory Status

National Inventory Status	
National Inventory	Status
Australia - AIIC / Australia Non-Industrial Use	Yes
Canada - DSL	Yes
Canada - NDSL	No (aluminium oxide; bisphenol F diglycidyl ether copolymer; neopentyl glycol diglycidyl ether; carbon black)
China - IECSC	Yes
Europe - EINEC / ELINCS / NLP	No (bisphenol F diglycidyl ether copolymer)
Japan - ENCS	Yes
Korea - KECI	Yes
New Zealand - NZIoC	Yes

National Inventory	Status
Philippines - PICCS	Yes
USA - TSCA	Yes
Taiwan - TCSI	Yes
Mexico - INSQ	No (bisphenol F diglycidyl ether copolymer; neopentyl glycol diglycidyl ether)
Vietnam - NCI	Yes
Russia - FBEPH	No (neopentyl glycol diglycidyl ether)
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	10/12/2021
Initial Date	01/10/2016

Full text Risk and Hazard codes

H351	Suspected of causing cancer.			
H400	Very toxic to aquatic life.			
H411	Toxic to aquatic life with long lasting effects.			

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. For detailed advice on Personal Protective Equipment, refer to the following EU CEN Standards:

EN 166 Personal eye-protection

EN 340 Protective clothing

EN 374 Protective gloves against chemicals and micro-organisms

EN 13832 Footwear protecting against chemicals

EN 133 Respiratory protective devices

Definitions and abbreviations

 ${\sf PC-TWA}.\ {\sf Permissible}\ {\sf Concentration-Time}\ {\sf Weighted}\ {\sf Average}$

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

Reason For Change

A-2.00 - Modifications to the safety data sheet and added UFI number



8329TCS-B Thermally Conductive Epoxy Adhesive MG Chemicals UK Limited

Version No: A-2.00

Safety data sheet according to REACH Regulation (EC) No 1907/2006, as amended by UK REACH Regulations SI 2019/758

Issue Date: 10/12/2021 Revision Date: 10/12/2021 L.REACH.GB.EN

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

1.1. Product Identifier

Product name	8329TCS-B				
Synonyms	SDS Code: 8329TCS-B; 8329TCS-6ML, 8329TCS-50ML, 8329TCS-200ML UFI:52F0-V0U8-G008-V410				
Other means of identification	Thermally Conductive Epoxy Adhesive				

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

Relevant identified uses	Thermally conductive adhesive hardener			
Uses advised against	Not Applicable			

1.3. Details of the supplier of the safety data sheet

Registered company name	MG Chemicals UK Limited	MG Chemicals (Head office)	
Address Heame House, 23 Bilston Street, Sedgely Dudley DY3 1JA United Kingdom 9347 - 193 Street Surrey V4N 4E7 British Columbia			
Telephone	Telephone +(44) 1663 362888 +(1) 800-201-8822		
Fax Not Available +(1) 800-708-9888			
Website	Not Available	www.mgchemicals.com	
Email	sales@mgchemicals.com	Info@mgchemicals.com	

1.4. Emergency telephone number

Association / Organisation	Verisk 3E (Access code: 335388)		
Emergency telephone numbers	+(44) 20 35147487		
Other emergency telephone numbers	+(0) 800 680 0425		

SECTION 2 Hazards identification

2.1. Classification of the substance or mixture

Classified according to GB-CLP Regulation, UK SI 2019/720 and UK SI 2020/1567 [1]	H315 - Skin Corrosion/Irritation Category 2, H319 - Serious Eye Damage/Eye Irritation Category 2, H317 - Sensitisation (Skin) Category 1, H410 - Hazardous to the Aquatic Environment Long-Term Hazard Category 1
Legend:	1. Classified by Chemwatch; 2. Classification drawn from GB-CLP Regulation, UK SI 2019/720 and UK SI 2020/1567

2.2. Label elements

Hazard pictogram(s)





Signal word Warning

Hazard statement(s)

H315	Causes skin irritation.			
H319	Causes serious eye irritation.			
H317	May cause an allergic skin reaction.			
H410	Very toxic to aquatic life with long lasting effects.			

Not Applicable

Precautionary statement(s) Prevention

P280	Wear protective gloves, protective clothing, eye protection and face protection.			
P261	Avoid breathing dust/fumes.			
P273	Avoid release to the environment.			
P264	Wash all exposed external body areas thoroughly after handling.			
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	F 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.					

Precautionary statement(s) Storage

Not Applicable

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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2.3. Other hazards

Inhalation and/or ingestion may produce health damage*.

Cumulative effects may result following exposure*.

May produce discomfort of the respiratory system*.

SECTION 3 Composition / information on ingredients

3.1.Substances

See 'Composition on ingredients' in Section 3.2

3.2.Mixtures

1.CAS No 2.EC No 3.Index No 4.REACH No	%[weight]	Name	Classified according to GB-CLP Regulation, UK SI 2019/720 and UK SI 2020/1567	Nanoform Particle Characteristics
1.1344-28-1. 2.215-691-6 3.Not Available 4.Not Available	37	aluminium oxide	Not Applicable	Not Available
1.1314-13-2 2.215-222-5 3.030-013-00-7 4.Not Available	34	zinc oxide	Hazardous to the Aquatic Environment Acute Hazard Category 1, Hazardous to the Aquatic Environment Long-Term Hazard Category 1; H400, H410 [2]	Not Available
1.68541-13-9 2.Not Available 3.Not Available 4.Not Available	13	linoleic acid/4.7.10-trioxa- 1.13-tridecanediamine polyamid	Skin Corrosion/Irritation Category 2, Serious Eye Damage/Eye Irritation Category 1; H315, H318 [1]	Not Available
1.68082-29-1* 2.500-191-5 3.Not Available 4.Not Available	8	tall oil/ triethylenetetramine polyamides	Serious Eye Damage/Eye Irritation Category 2; H319 [1]	Not Available
1.4246-51-9 2.224-207-2 3.Not Available 4.Not Available	2	diethylene glycol, di(3-aminopropyl) ether	Skin Corrosion/Irritation Category 1B, Serious Eye Damage/Eye Irritation Category 1, Hazardous to the Aquatic Environment Long-Term Hazard Category 3; H314, H318, H412 [1]	Not Available
1.108-65-6 2.203-603-9 3.607-195-00-7 4.Not Available	1	propylene glycol monomethyl ether acetate, alpha-isomer *	Flammable Liquids Category 3; H226 ^[2]	Not Available
1.112-24-3 2.203-950-6 3.612-059-00-5 4.Not Available	0.7	triethylenetetramine.	Acute Toxicity (Dermal) Category 4, Skin Corrosion/Irritation Category 1B, Sensitisation (Skin) Category 1, Hazardous to the Aquatic Environment Long-Term Hazard Category 3; H312, H314, H317, H412 [2]	Not Available
1.1333-86-4 2.215-609-9 435-640-3 422-130-0 3.Not Available	0.5	carbon black	Carcinogenicity Category 2; H351 ^[1]	Not Available

1.CAS No 2.EC No 3.Index No 4.REACH No	%[weight]	Name	Classified according to GB-CLP Regulation, UK SI 2019/720 and UK SI 2020/1567	Nanoform Particle Characteristics	
4.Not Available					
Legend		1. Classified by Chemwatch; 2. Classification drawn from GB-CLP Regulation, UK SI 2019/720 and UK SI 2020/1567; 3. Classification drawn from C&L * EU IOELVs available; [e] Substance identified as having endocrine disrupting properties			

SECTION 4 First aid measures

4.1. Description of first aid measures If this product comes in contact with the eyes: Wash out immediately with fresh running water. Figure complete irrigation of the eye by keeping eyelids apart and away from eye and moving the eyelids by occasionally lifting the upper **Eve Contact** 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. If skin or hair contact occurs: Quickly but gently, wipe material off skin with a dry, clean cloth. **Skin Contact** Immediately remove all contaminated clothing, including footwear. Wash skin and hair with running water. Continue flushing with water until advised to stop by the Poisons Information Centre. ► Transport to hospital, or doctor. If fumes or combustion products are inhaled remove from contaminated area. Lay patient down. Keep warm and rested. Prostheses such as false teeth, which may block airway, should be removed, where possible, prior to initiating first aid procedures. Inhalation Apply artificial respiration if not breathing, preferably with a demand valve resuscitator, bag-valve mask device, or pocket mask as trained. Perform CPR if necessary. Transport to hospital, or doctor, without delay. ▶ Give a slurry of activated charcoal in water to drink. **NEVER** GIVE AN UNCONSCIOUS PATIENT WATER TO DRINK. At least 3 tablespoons in a glass of water should be given Although induction of vomiting may be recommended (IN CONSCIOUS PERSONS ONLY), such a first aid measure is dissuaded due to the risk of aspiration of stomach contents. (i) It is better to take the patient to a doctor who can decide on the necessity and method of emptying the stomach. (ii) Special circumstances may however exist; these include non-availability of charcoal and the ready availability of the doctor. NOTE: If vomiting is induced, lean patient forward or place on left side (head-down position, if possible) to maintain open airway and prevent aspiration. Ingestion NOTE: Wear protective gloves when inducing vomiting ▶ REFER FOR MEDICAL ATTENTION WITHOUT DELAY. 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

4.2 Most important symptoms and effects, both acute and delayed

See Section 11

4.3. Indication of any immediate medical attention and special treatment needed

(ICSC20305/20307)

Treat symptomatically.

- Absorption of zinc compounds occurs in the small intestine.
- ▶ The metal is heavily protein bound.
- Elimination results primarily from faecal excretion.
- The usual measures for decontamination (Ipecac Syrup, lavage, charcoal or cathartics) may be administered, although patients usually have sufficient vomiting not to require them.

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.

▶ CaNa2EDTA has been used successfully to normalise zinc levels and is the agent of choice.

[Ellenhorn and Barceloux: Medical Toxicology]

- Manifestation of aluminium toxicity include hypercalcaemia, anaemia, Vitamin D refractory osteodystrophy and a progressive encephalopathy (mixed dysarthria-apraxia of speech, asterixis, tremulousness, myoclonus, dementia, focal seizures). Bone pain, pathological fractures and proximal myopathy can occur.
- F Symptoms usually develop insidiously over months to years (in chronic renal failure patients) unless dietary aluminium loads are excessive.
- Serum aluminium levels above 60 ug/ml indicate increased absorption. Potential toxicity occurs above 100 ug/ml and clinical symptoms are present when levels exceed 200 ug/ml.
- Deferoxamine has been used to treat dialysis encephalopathy and osteomalacia. CaNa2EDTA is less effective in chelating aluminium.

[Ellenhorn and Barceloux: Medical Toxicology]

Copper, magnesium, aluminium, antimony, iron, manganese, nickel, zinc (and their compounds) in welding, brazing, galvanising or smelting operations all give rise to thermally produced particulates of smaller dimension than may be produced if the metals are divided mechanically. Where insufficient ventilation or respiratory protection is available these particulates may produce 'metal fume fever' in workers from an acute or long term exposure.

- Donset occurs in 4-6 hours generally on the evening following exposure. Tolerance develops in workers but may be lost over the weekend. (Monday Morning Fever)
- Pulmonary function tests may indicate reduced lung volumes, small airway obstruction and decreased carbon monoxide diffusing capacity but these abnormalities resolve after several months.
- Although mildly elevated urinary levels of heavy metal may occur they do not correlate with clinical effects.
- The general approach to treatment is recognition of the disease, supportive care and prevention of exposure.
- Seriously symptomatic patients should receive chest x-rays, have arterial blood gases determined and be observed for the development of tracheobronchitis and pulmonary edema.

[Ellenhorn and Barceloux: Medical Toxicology]

SECTION 5 Firefighting measures

5.1. Extinguishing media

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

5.2. Special hazards arising from the substrate or mixture

Fire Incompatibility

Fire Fighting

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

5.3. Advice for firefighters

- ▶ 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.
- Combustible solid which burns but propagates flame with difficulty; it is estimated that most organic dusts are combustible (circa 70%) according to the circumstances under which the combustion process occurs, such materials may cause fires and / or dust explosions.
- Organic powders when finely divided over a range of concentrations regardless of particulate size or shape and suspended in air or some other oxidizing medium may form explosive dust-air mixtures and result in a fire or dust explosion (including secondary explosions).
- Avoid generating dust, particularly clouds of dust in a confined or unventilated space as dusts may form an explosive mixture with air, and any source of ignition, i.e. flame or spark, will cause fire or explosion. Dust clouds generated by the fine grinding of the solid are a particular hazard; accumulations of fine dust (420 micron or less) may burn rapidly and fiercely if ignited particles exceeding this limit will generally not form flammable dust clouds; once initiated, however, larger particles up to 1400 microns diameter will contribute to the propagation of an explosion.
- In the same way as gases and vapours, dusts in the form of a cloud are only ignitable over a range of concentrations; in principle, the concepts of lower explosive limit (LEL) and upper explosive limit (UEL) are applicable to dust clouds but only the LEL is of practical use; this is because of the inherent difficulty of achieving homogeneous dust clouds at high temperatures (for dusts the LEL is often called the 'Minimum Explosible Concentration'. MEC).
- When processed with flammable liquids/vapors/mists,ignitable (hybrid) mixtures may be formed with combustible dusts. Ignitable mixtures will increase the rate of explosion pressure rise and the Minimum Ignition Energy (the minimum amount of energy required to ignite dust clouds MIE) will be lower than the pure dust in air mixture. The Lower Explosive Limit (LEL) of the vapour/dust mixture will be lower than the individual LELs for the vapors/mists or dusts.
- A dust explosion may release of large quantities of gaseous products; this in turn creates a subsequent pressure rise of explosive force capable of damaging plant and buildings and injuring people.
- Usually the initial or primary explosion takes place in a confined space such as plant or machinery, and can be of sufficient force to damage or rupture the plant. If the shock wave from the primary explosion enters the surrounding area, it will disturb any settled dust layers, forming a second dust cloud, and often initiate a much larger secondary explosion. All large scale explosions have resulted from chain reactions of this type.
- b Dry dust can be charged electrostatically by turbulence, pneumatic transport, pouring, in exhaust ducts and during transport.
- ▶ Build-up of electrostatic charge may be prevented by bonding and grounding.
- Powder handling equipment such as dust collectors, dryers and mills may require additional protection measures such as explosion venting.
 - All movable parts coming in contact with this material should have a speed of less than 1-meter/sec
- A sudden release of statically charged materials from storage or process equipment, particularly at elevated temperatures and/ or pressure, may result in ignition especially in the absence of an apparent ignition source.
- One important effect of the particulate nature of powders is that the surface area and surface structure (and often moisture content) can vary widely from sample to sample, depending of how the powder was manufactured and handled; this means that it is virtually impossible to use flammability data published in the literature for dusts (in contrast to that published for gases and vapours).
- Autoignition temperatures are often quoted for dust clouds (minimum ignition temperature (MIT)) and dust layers (layer ignition temperature (LIT)); LIT generally falls as the thickness of the layer increases.

Combustion products include:

carbon monoxide (CO)

carbon dioxide (CO2) nitrogen oxides (NOx)

metal oxides

other pyrolysis products typical of burning organic material.

When aluminium oxide dust is dispersed in air, firefighters should wear protection against inhalation of dust particles, which can also contain hazardous substances from the fire absorbed on the alumina particles.

SECTION 6 Accidental release measures

Minor Spills

Fire/Explosion Hazard

6.1. Personal precautions, protective equipment and emergency procedures

See section 8

6.2. Environmental precautions

See section 12

6.3. Methods and material for containment and cleaning up

Environmental hazard - contain spillage.

- Clean up all spills immediately.
- Avoid contact with skin and eves
- Wear impervious gloves and safety glasses.
- Use dry clean up procedures and avoid generating dust.
- Vacuum up (consider explosion-proof machines designed to be grounded during storage and use).

Continued...

- Do NOT use air hoses for cleaning
- Place spilled material in clean, dry, sealable, labelled container.

Environmental hazard - contain spillage.

Moderate hazard

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

6.4. Reference to other sections

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

SECTION 7 Handling and storage

Safe handling

Major Spills

7.1. Precautions for safe handling

- Avoid all personal contact, including inhalation.
- Wear protective clothing when risk of exposure occurs.
- Use in a well-ventilated area
- ▶ Prevent concentration in hollows and sumps.
- ▶ DO NOT enter confined spaces until atmosphere has been checked.
- DO NOT allow material to contact humans, exposed food or food utensils.
- Avoid contact with incompatible materials.
- When handling, DO NOT eat, drink or smoke
- Keep containers securely sealed when not in use.
- Avoid physical damage to containers.
- Always wash hands with soap and water after handling.
- ▶ Work clothes should be laundered separately. Launder contaminated clothing before re-use.
 - Use good occupational work practice.
- Observe manufacturer's storage and handling recommendations contained within this SDS.
- Atmosphere should be regularly checked against established exposure standards to ensure safe working conditions are maintained.
- Organic powders when finely divided over a range of concentrations regardless of particulate size or shape and suspended in air or some other oxidizing medium may form explosive dust-air mixtures and result in a fire or dust explosion (including secondary explosions)
 Minimise airborne dust and eliminate all ignition sources. Keep away from heat, hot surfaces, sparks, and flame.
- Establish good housekeeping practices.
- Remove dust accumulations on a regular basis by vacuuming or gentle sweeping to avoid creating dust clouds.
- Use continuous suction at points of dust generation to capture and minimise the accumulation of dusts. Particular attention should be given to overhead and hidden horizontal surfaces to minimise the probability of a 'secondary' explosion. According to NFPA Standard 654, dust layers 1/32 in.(0.8 mm) thick can be sufficient to warrant immediate cleaning of the area.
- Do not use air hoses for cleaning.
- Minimise dry sweeping to avoid generation of dust clouds. Vacuum dust-accumulating surfaces and remove to a chemical disposal area. Vacuums with explosion-proof motors should be used.
- Control sources of static electricity. Dusts or their packages may accumulate static charges, and static discharge can be a source of ignition.
- Solids handling systems must be designed in accordance with applicable standards (e.g. NFPA including 654 and 77) and other national guidance.
- Do not empty directly into flammable solvents or in the presence of flammable vapors.
- The operator, the packaging container and all equipment must be grounded with electrical bonding and grounding systems. Plastic bags and plastics cannot be grounded, and antistatic bags do not completely protect against development of static charges.

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

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

Fire and explosion protection

See section 5

- Store in original containers.
- Keep containers securely sealed.
- Store in a cool, dry area protected from environmental extremes.
- ▶ 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.

For major quantities

- Consider storage in bunded areas ensure storage areas are isolated from sources of community water (including stormwater, ground water, lakes and streams).
- Ensure that accidental discharge to air or water is the subject of a contingency disaster management plan; this may require consultation with local authorities.

7.2. Conditions for safe storage, including any incompatibilities

Suitable container

Other information

- Polyethylene or polypropylene container.
- Check all containers are clearly labelled and free from leaks.

For aluminas (aluminium oxide):

Incompatible with hot chlorinated rubber.

- In the presence of chlorine trifluoride may react violently and ignite.
- -May initiate explosive polymerisation of olefin oxides including ethylene oxide.
- -Produces exothermic reaction above 200°C with halocarbons and an exothermic reaction at ambient temperatures with halocarbons in the presence of other metals.
- -Produces exothermic reaction with oxygen difluoride.
- -May form explosive mixture with oxygen difluoride.
- -Forms explosive mixtures with sodium nitrate.
- -Reacts vigorously with vinyl acetate.

Storage incompatibility

Aluminium oxide is an amphoteric substance, meaning it can react with both acids and bases, such as hydrofluoric acid and sodium hydroxide, acting as an acid with a base and a base with an acid, neutralising the other and producing a salt. Zinc oxide:

- slowly absorbs carbon dioxide from the air.
- h may react, explosively with magnesium and chlorinated rubber when heated is incompatible with linseed oil (may cause ignition)
- WARNING: Avoid or control reaction with peroxides. All transition metal peroxides should be considered as potentially explosive. For
- example transition metal complexes of alkyl hydroperoxides may decompose explosively.

 The pi-complexes formed between chromium(0), vanadium(0) and other transition metals (haloarene-metal complexes) and mono-or poly-fluorobenzene show extreme sensitivity to heat and are explosive.
- Avoid reaction with borohydrides or cyanoborohydrides
- Avoid strong acids, bases.
- Avoid reaction with oxidising agents

7.3. Specific end use(s)

See section 1.2

SECTION 8 Exposure controls / personal protection

8.1. Control parameters

Ingredient	DNELs Exposure Pattern Worker	PNECs Compartment
aluminium oxide	Dermal 0.84 mg/kg bw/day (Systemic, Chronic) Inhalation 3 mg/m³ (Systemic, Chronic) Inhalation 3 mg/m³ (Local, Chronic) Dermal 0.3 mg/kg bw/day (Systemic, Chronic) * Inhalation 0.75 mg/m³ (Systemic, Chronic) * Oral 1.32 mg/kg bw/day (Systemic, Chronic) * Inhalation 0.75 mg/m³ (Local, Chronic) *	74.9 μg/L (Water (Fresh)) 20 mg/L (STP)
zinc oxide	Dermal 83 mg/kg bw/day (Systemic, Chronic) Inhalation 5 mg/m³ (Systemic, Chronic) Inhalation 0.5 mg/m³ (Local, Chronic) Dermal 83 mg/kg bw/day (Systemic, Chronic) * Inhalation 2.5 mg/m³ (Systemic, Chronic) * Oral 0.83 mg/kg bw/day (Systemic, Chronic) *	0.19 μg/L (Water (Fresh)) 1.14 μg/L (Water - Intermittent release) 1.2 μg/L (Water (Marine)) 18 mg/kg sediment dw (Sediment (Fresh Water)) 6.4 mg/kg sediment dw (Sediment (Marine)) 0.7 mg/kg soil dw (Soil) 20 μg/L (STP) 0.16 mg/kg food (Oral)
tall oil/ triethylenetetramine polyamides	Dermal 1.1 mg/kg bw/day (Systemic, Chronic) Inhalation 3.9 mg/m³ (Systemic, Chronic) Dermal 0.56 mg/kg bw/day (Systemic, Chronic) * Inhalation 0.97 mg/m³ (Systemic, Chronic) * Oral 0.56 mg/kg bw/day (Systemic, Chronic) *	0.004 mg/L (Water (Fresh)) 0 mg/L (Water - Intermittent release) 0.043 mg/L (Water (Marine)) 434.02 mg/kg sediment dw (Sediment (Fresh Water)) 43.4 mg/kg sediment dw (Sediment (Marine)) 86.78 mg/kg soil dw (Soil) 3.84 mg/L (STP)
diethylene glycol, di(3-aminopropyl) ether	Dermal 8.3 mg/kg bw/day (Systemic, Chronic) Inhalation 59 mg/m³ (Systemic, Chronic) Inhalation 1 mg/m³ (Local, Chronic) Inhalation 176 mg/m³ (Systemic, Acute) Inhalation 13 mg/m³ (Local, Acute) Dermal 5 mg/kg bw/day (Systemic, Chronic) * Inhalation 17 mg/m³ (Systemic, Chronic) * Oral 5 mg/kg bw/day (Systemic, Chronic) * Inhalation 0.5 mg/m³ (Local, Chronic) * Inhalation 52 mg/m³ (Systemic, Acute) * Inhalation 6.5 mg/m³ (Local, Acute) *	0.22 mg/L (Water (Fresh)) 0.022 mg/L (Water - Intermittent release) 2.2 mg/L (Water (Marine)) 1.1 mg/kg sediment dw (Sediment (Fresh Water)) 0.11 mg/kg sediment dw (Sediment (Marine)) 0.091 mg/kg soil dw (Soil) 125 mg/L (STP)
propylene glycol monomethyl ether acetate, alpha-isomer	Dermal 796 mg/kg bw/day (Systemic, Chronic) Inhalation 275 mg/m³ (Systemic, Chronic) Inhalation 550 mg/m³ (Local, Acute) Dermal 320 mg/kg bw/day (Systemic, Chronic) * Inhalation 33 mg/m³ (Systemic, Chronic) * Oral 36 mg/kg bw/day (Systemic, Chronic) * Inhalation 33 mg/m³ (Local, Chronic) *	0.635 mg/L (Water (Fresh)) 0.064 mg/L (Water - Intermittent release) 6.35 mg/L (Water (Marine)) 3.29 mg/kg sediment dw (Sediment (Fresh Water)) 0.329 mg/kg sediment dw (Sediment (Marine)) 0.29 mg/kg soil dw (Soil) 100 mg/L (STP)
carbon black	Inhalation 1 mg/m³ (Systemic, Chronic) Inhalation 0.5 mg/m³ (Local, Chronic) Inhalation 0.06 mg/m³ (Systemic, Chronic) *	1 mg/L (Water (Fresh)) 0.1 mg/L (Water - Intermittent release) 10 mg/L (Water (Marine))

^{*} Values for General Population

Occupational Exposure Limits (OEL)

INGREDIENT DATA

Source	Ingredient	Material name	TWA	STEL	Peak	Notes
UK Workplace Exposure Limits (WELs)	aluminium oxide	Aluminium oxides: inhalable dust	10 mg/m3	Not Available	Not Available	Not Available
UK Workplace Exposure Limits (WELs)	aluminium oxide	Aluminium oxides: respirable dust	4 mg/m3	Not Available	Not Available	Not Available
EU Consolidated List of Indicative Occupational Exposure Limit Values (IOELVs)	propylene glycol monomethyl ether acetate, alpha-isomer	1-Methoxypropyl-2-acetate	50 ppm / 275 mg/m3	550 mg/m3 / 100 ppm	Not Available	Skin
UK Workplace Exposure Limits (WELs)	propylene glycol monomethyl ether acetate, alpha-isomer	1-Methoxypropyl acetate	50 ppm / 274 mg/m3	548 mg/m3 / 100 ppm	Not Available	Sk
UK Workplace Exposure Limits (WELs)	carbon black	Carbon black	3.5 mg/m3	7 mg/m3	Not Available	Not Available

Emergency Limits

Ingredient	TEEL-1	TEEL-2	TEEL-3
aluminium oxide	15 mg/m3	170 mg/m3	990 mg/m3
zinc oxide	10 mg/m3	15 mg/m3	2,500 mg/m3
diethylene glycol, di(3-aminopropyl) ether	13 mg/m3	140 mg/m3	850 mg/m3
propylene glycol monomethyl ether acetate, alpha-isomer	Not Available	Not Available	Not Available
triethylenetetramine	3 ppm	14 ppm	83 ppm
carbon black	9 mg/m3	99 mg/m3	590 mg/m3

Ingredient	Original IDLH	Revised IDLH
aluminium oxide	Not Available	Not Available
zinc oxide	500 mg/m3	Not Available
linoleic acid/4,7,10-trioxa- 1,13-tridecanediamine polyamid	Not Available	Not Available
tall oil/ triethylenetetramine polyamides	Not Available	Not Available
diethylene glycol, di(3-aminopropyl) ether	Not Available	Not Available
propylene glycol monomethyl ether acetate, alpha-isomer	Not Available	Not Available
triethylenetetramine	Not Available	Not Available
carbon black	1,750 mg/m3	Not Available

Occupational Exposure Banding

Ingredient	Occupational Exposure Band Rating	Occupational Exposure Band Limit	
zinc oxide	E	≤ 0.01 mg/m³	
linoleic acid/4,7,10-trioxa- 1,13-tridecanediamine polyamid	E	≤ 0.1 ppm	
tall oil/ triethylenetetramine polyamides	Е	≤ 0.1 ppm	
diethylene glycol, di(3-aminopropyl) ether	С	> 1 to ≤ 10 parts per million (ppm)	
triethylenetetramine	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

for zinc oxide:

Zinc oxide intoxication (intoxication zincale) is characterised by general depression, shivering, headache, thirst, colic and diarrhoea.

Exposure to the fume may produce metal fume fever characterised by chills, muscular pain, nausea and vomiting. Short-term studies with guinea pigs show pulmonary function changes and morphologic evidence of small airway inflammation. A no-observed-adverse-effect level (NOAEL) in guinea pigs was 2.7 mg/m3 zinc oxide. Based on present data, the current TLV-TWA may be inadequate to protect exposed workers although known physiological differences in the guinea pig make it more susceptible to functional impairment of the airways than humans.

For aluminium oxide and pyrophoric grades of aluminium:

Twenty seven year experience with aluminium oxide dust (particle size 96% 1,2 um) without adverse effects either systemically or on the lung, and at a calculated concentration equivalent to 2 mg/m3 over an 8-hour shift has lead to the current recommendation of the TLV-TWA.

The limit should also apply to aluminium pyro powders whose toxicity is reportedly greater than aluminium dusts and should be protective against lung changes.

For aluminium oxide:

The experimental and clinical data indicate that aluminium oxide acts as an 'inert' material when inhaled and seems to have little effect on the lungs nor does it produce significant organic disease or toxic effects when exposures are kept under reasonable control.

[Documentation of the Threshold Limit Values], ACGIH, Sixth Edition

These exposure guidelines have been derived from a screening level of risk assessment and should not be construed as unequivocally safe limits. ORGS represent an 8-hour time-weighted average unless specified otherwise.

CR = Cancer Risk/10000; UF = Uncertainty factor:

TLV believed to be adequate to protect reproductive health:

LOD: Limit of detection

Toxic endpoints have also been identified as:

D = Developmental; R = Reproductive; TC = Transplacental carcinogen

Jankovic J., Drake F.: A Screening Method for Occupational Reproductive

American Industrial Hygiene Association Journal 57: 641-649 (1996)

The concentration of dust, for application of respirable dust limits, is to be determined from the fraction that penetrates a separator whose size collection efficiency is described by a cumulative log-normal function with a median aerodynamic diameter of 4.0 um (+-) 0.3 um and with a geometric standard deviation of 1.5 um (+-) 0.1 um, i.e..generally less than 5 um. Polyamide hardeners have much reduced volatility, toxicity and are much less irritating to the skin and eyes than amine hardeners. However commercial polyamides may contain a percentage of residual unreacted amine and all unnecessary contact should be avoided.

for propylene glycol monomethyl ether acetate (PGMEA)

Saturated vapour concentration: 4868 ppm at 20 C.

A two-week inhalation study found nasal effects to the nasal mucosa in animals at concentrations up to 3000 ppm. Differences in the teratogenic potential of the alpha (commercial grade) and beta isomers of PGMEA may be explained by the formation of different metabolites. The beta-isomer is thought to be oxidised to methoxypropionic acid, a homologue to methoxyacetic acid which is a known teratogen. The alpha- form is conjugated and excreted. PGMEA mixture (containing 2% to 5% beta isomer) is a mild skin and eye irritant, produces mild central nervous system effects in animals at 3000 ppm and produces mild CNS impairment and upper respiratory tract and eye irritation in humans at 1000 ppm. In rats exposed to 3000 ppm PGMEA produced slight foetotoxic effects (delayed sternabral ossification) - no effects on foetal development were seen in rabbits exposed at 3000 ppm.

8.2. Exposure controls

Engineering controls are used to remove a hazard or place a barrier between the worker and the hazard. Well-designed engineering controls can be highly effective in protecting workers and will typically be independent of worker interactions to provide this high level of protection. The basic types of engineering controls are:

Process controls which involve changing the way a job activity or process is done to reduce the risk.

Employers may need to use multiple types of controls to prevent employee overexposure.

Enclosure and/or isolation of emission source which keeps a selected hazard 'physically' away from the worker and ventilation that strategically 'adds' and 'removes' air in the work environment. Ventilation can remove or dilute an air contaminant if designed properly. The design of a ventilation system must match the particular process and chemical or contaminant in use.

- Local exhaust ventilation is required where solids are handled as powders or crystals; even when particulates are relatively large, a certain proportion will be powdered by mutual friction.
- F Exhaust ventilation should be designed to prevent accumulation and recirculation of particulates in the workplace
- If in spite of local exhaust an adverse concentration of the substance in air could occur, respiratory protection should be considered. Such protection might consist of:
- (a): particle dust respirators, if necessary, combined with an absorption cartridge;
- (b): filter respirators with absorption cartridge or canister of the right type;
- (c): fresh-air hoods or masks
- ▶ Build-up of electrostatic charge on the dust particle, may be prevented by bonding and grounding.
- ▶ Powder handling equipment such as dust collectors, dryers and mills may require additional protection measures such as explosion venting. Air contaminants generated in the workplace possess varying 'escape' velocities which, in turn, determine the 'capture velocities' of fresh circulating air required to efficiently remove the contaminant.

8.2.1. Appropriate engineering controls

Type of Contaminant:	Air Speed:
direct spray, spray painting in shallow booths, 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.)
grinding, abrasive blasting, tumbling, high speed wheel generated dusts (released at high initial velocity into zone of very high rapid air motion).	2.5-10 m/s (500-2000 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 4-10 m/s (800-2000 f/min) for extraction of crusher dusts generated 2 metres 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.

8.2.2. Personal protection











- ► Safety glasses with side shields.
- Chemical goggles.
- 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]

Eye and face protection

Skin protection See Hand protection below

NOTE:

Hands/feet protection

- 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.

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.

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.

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.

Suitability and durability of glove type is dependent on usage. Important factors in the selection of gloves include:

- frequency and duration of contact.
- chemical resistance of glove material.
- glove thickness and
- dexterity

Select gloves tested to a relevant standard (e.g. Europe EN 374, US F739, AS/NZS 2161.1 or national equivalent).

- 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.

As defined in ASTM F-739-96 in any application, gloves are rated as:

- Excellent when breakthrough time > 480 min
- Good when breakthrough time > 20 min
- Fair when breakthrough time < 20 min
- Poor when glove material degrades

For general applications, gloves with a thickness typically greater than 0.35 mm, are recommended.

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.

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

Note: Depending on the activity being conducted, gloves of varying thickness may be required for specific tasks. For example:

- 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

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

Experience indicates that the following polymers are suitable as glove materials for protection against undissolved, dry solids, where abrasive particles are not present.

- ▶ polychloroprene.
- nitrile rubber
- butyl rubber.
- fluorocaoutchouc.
- polyvinyl chloride

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

Body protection

See Other protection below

Other protection

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

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 computergenerated selection:

8329TCS-B Thermally Conductive Epoxy Adhesive

Material	СРІ
BUTYL	A
NEOPRENE	A
NITRILE	A
PE/EVAL/PE	A
VITON	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.

Respiratory protection

Particulate. (AS/NZS 1716 & 1715, EN 143:2000 & 149:001, ANSI Z88 or national equivalent)

Required Minimum Protection Factor	Half-Face Respirator	Full-Face Respirator	Powered Air Respirator
up to 10 x ES	P1 Air-line*	-	PAPR-P1 -
up to 50 x ES	Air-line**	P2	PAPR-P2
up to 100 x ES	-	P3	-
		Air-line*	-
100+ x ES	-	Air-line**	PAPR-P3

* - Negative pressure demand ** - Continuous flow

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)

- Respirators may be necessary when engineering and administrative controls do not adequately prevent exposures.
- The decision to use respiratory protection should be based on professional judgment that takes into account toxicity information, exposure measurement data, and frequency and likelihood of the worker's exposure - ensure users are not subject to high thermal loads which may result in heat stress or distress due to personal protective equipment (powered, positive flow, full face apparatus may be an option).
- Published occupational exposure limits, where they exist, will assist in determining the adequacy of the selected respiratory protection. These may be government mandated or vendor recommended.

- Certified respirators will be useful for protecting workers from inhalation of particulates when properly selected and fit tested as part of a complete respiratory protection program.
- Where protection from nuisance levels of dusts are desired, use type N95 (US) or type P1 (EN143) dust masks. Use respirators and components tested and approved $\,$ under appropriate government standards such as NIOSH (US) or CEN (EU)
- Use approved positive flow mask if significant quantities of dust becomes airborne.
- Try to avoid creating dust conditions.

Class P2 particulate filters are used for protection against mechanically and thermally generated particulates or both.

P2 is a respiratory filter rating under various international standards, Filters at least 94% of airborne particles

Suitable for:

- Relatively small particles generated by mechanical processes eg. grinding, cutting, sanding, drilling, sawing.
- Sub-micron thermally generated particles e.g. welding fumes, fertilizer and bushfire smoke.
- Biologically active airborne particles under specified infection control applications e.g. viruses, bacteria, COVID-19, SARS

8.2.3. Environmental exposure controls

See section 12

SECTION 9 Physical and chemical properties

9.1. Information on basic physical and chemical properties

Appearance	Medium grey		
Physical state	Solid	Relative density (Water = 1)	2.3
Odour	Not Available	Partition coefficient n-octanol / water	Not Available
Odour threshold	Not Available	Auto-ignition temperature (°C)	Not Available
pH (as supplied)	Not Available	Decomposition temperature	Not Available
Melting point / freezing point (°C)	Not Available	Viscosity (cSt)	>20.50
Initial boiling point and boiling range (°C)	>210	Molecular weight (g/mol)	Not Available
Flash point (°C)	148	Taste	Not Available
Evaporation rate	Not Available	Explosive properties	Not Available
Flammability	Not Applicable	Oxidising properties	Not Available
Upper Explosive Limit (%)	Not Available	Surface Tension (dyn/cm or mN/m)	Not Applicable
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
Vapour density (Air = 1)	Not Available	VOC g/L	Not Available
Nanoform Solubility	Not Available	Nanoform Particle Characteristics	Not Available
Particle Size	Not Available		

9.2. Other information

Not Available

SECTION 10 Stability and reactivity

10.1.Reactivity	See section 7.2
10.2. Chemical stability	 Unstable in the presence of incompatible materials. Product is considered stable. Hazardous polymerisation will not occur.
10.3. Possibility of hazardous reactions	See section 7.2
10.4. Conditions to avoid	See section 7.2

10.5. Incompatible materials

See section 7.2

10.6. Hazardous decomposition products

See section 5.3

SECTION 11 Toxicological information

11.1. Information on toxicological effects

The material is not thought to produce adverse health effects or irritation of the respiratory tract (as classified by EC Directives using animal models). Nevertheless, good hygiene practice requires that exposure be kept to a minimum and that suitable control measures be used in an occupational setting.

Strong evidence exists that exposure to the material may produce serious irreversible damage (other than carcinogenesis, mutagenesis and teratogenesis) following a single exposure by inhalation.

Inhalation of epoxy resin amine hardener vapours (including polyamines and amine adducts) may produce bronchospasm and coughing episodes lasting days after cessation of the exposure. Even faint traces of these vapours may trigger an intense reaction in individuals showing 'amine asthma'. The literature records several instances of systemic intoxications following the use of amines in epoxy resin systems. Excessive exposure to the vapours of epoxy amine curing agents may cause both respiratory irritation and central nervous system depression. Signs and symptoms of central nervous system depression, in order of increasing exposure, are

headache, dizziness, drowsiness, and incoordination. In short, a single prolonged (measured in hours) or excessive inhalation exposure may cause serious adverse effects, including death.

Inhaled

Inhalation of freshly formed metal oxide particles sized below 1.5 microns and generally between 0.02 to 0.05 microns may result in 'metal fume fever'. Symptoms may be delayed for up to 12 hours and begin with the sudden onset of thirst, and a sweet, metallic or foul taste in the mouth. Other symptoms include upper respiratory tract irritation accompanied by coughing and a dryness of the mucous membranes, lassitude and a generalised feeling of malaise. Mild to severe headache, nausea, occasional vomiting, fever or chills, exaggerated mental activity, profuse sweating, diarrhoea, excessive urination and prostration may also occur. Tolerance to the fumes develops rapidly, but is quickly lost. All symptoms usually subside within 24-36 hours following removal from exposure.

Inhalation of freshly formed zinc oxide particles sized below 1.5 microns and generally between 0.02 to 0.05 microns may result in 'metal fume fever', with symptoms resembling influenza. Symptoms may be delayed for up to 12 hours and begin with the sudden onset of thirst, and a sweet, metallic or foul taste in the mouth. Other symptoms include upper respiratory tract irritation accompanied by coughing and a dryness of the mucous membranes, lassitude and a generalised feeling of malaise. Mild to severe headache, nausea, occasional vomiting, fever or chills, exaggerated mental activity, profuse sweating, diarrhoea, excessive urination and prostration may also occur. Tolerance to the fumes develops rapidly, but is quickly lost. All symptoms usually subside within 24-36 hours following removal from exposure. Leucocytosis, a transient increase in white blood cell counts, is reported as a common finding in metal fume fever but is not known to be common amongst welders. Severe over-exposure to zinc oxide, following inhalation of fumes or finely divided dusts may result in bronchitis or pneumonia; a bluish skin tint may be present

Inhalation of vapours or aerosols (mists, fumes), generated by the material during the course of normal handling, may be damaging to the health of the individual.

Strong evidence exists that exposure to the material may produce serious irreversible damage (other than carcinogenesis, mutagenesis and teratogenesis) following a single exposure by swallowing.

Ingestion of amine epoxy-curing agents (hardeners) may cause severe abdominal pain, nausea, vomiting or diarrhoea. The vomitus may contain blood and mucous. If death does not occur within 24 hours there may be an improvement in the patients condition for 2-4 days only to be followed by the sudden onset of abdominal pain, board-like abdominal rigidity or hypo-tension; this indicates that delayed gastric or oesophageal corrosive damage has occurred.

Acute toxic responses to aluminium are confined to the more soluble forms.

The material has NOT been classified by EC Directives or other classification systems as 'harmful by ingestion'. This is because of the lack of corroborating animal or human evidence. The material may still be damaging to the health of the individual, following ingestion, especially where pre-existing organ (e.g liver, kidney) damage is evident. Present definitions of harmful or toxic substances are generally based on doses producing mortality rather than those producing morbidity (disease, ill-health). Gastrointestinal tract discomfort may produce nausea and vomiting. In an occupational setting however, ingestion of insignificant quantities is not thought to be cause for concern.

Soluble zinc salts produces irritation and corrosion of the alimentary tract (in a manner similar to copper salts) with pain, vomiting, etc. Delayed deaths have been ascribed to inanition (weakness and extreme weight loss resulting from prolonged and severe food insufficiency) following severe strictures of the oesophagus, and pylorus. Vomiting, abdominal cramps, and diarrhea, in several cases with blood, have been observed after ingestion of zinc sulfate.

Several cases of gastrointestinal disturbances have been reported after ingestion of zinc sulfate. A significant reduction in erythrocyte superoxide dismutase activity (47% decrease), hematocrit, and serum ferritin, compared to pretreatment levels, occurred in female subjects who received supplements (as capsules) of 50 mg zinc/day as zinc gluconate for 10 weeks. A 15% decrease in erythrocyte superoxide dismutase activity was reported in male volunteers receiving 50 mg zinc/day as zinc gluconate for 6 weeks. Another study reported increases in bone specific alkaline phosphatase levels (~25%) and extracellular superoxide dismutase (~15%), while significant decreases were seen in mononuclear white cell 5'-nucleotidase (~30%) and plasma 5'-nucleotidase activity (~36%) following exposure of postmenopausal women to a combined (dietary+supplemental) 53 mg zinc/day as zinc glycine chelate. Healthy men given 200 mg zinc/day as elemental zinc for 6 weeks showed a reduction in lymphocyte stimulation response to phytohemagglutinin as well as chemotaxis and phagocytosis of bacteria by polymorphonuclear leukocytes.; however, no changes in lymphocyte cell number or in the proportion of lymphocyte populations were noted. Exposure of male volunteers to 0.48 mg zinc/kg/day, as zinc glycine chelate, had no effect on markers of coagulation relative to unexposed subjects. While the

hematological end points following long-term zinc exposure in humans are noteworthy, they were subclinical in nature, and therefore, are generally considered to be non-adverse. In animals, following oral administration of zinc compounds, decreased hemoglobin, hematocrit, erythrocyte, and/or leukocyte levels were observed in rats, mice, rabbits, dogs, ferrets, and preruminant calves A number of intermediate-duration studies have demonstrated renal effects in animals exposed to zinc oxide, zinc sulfate, and zinc acetate. Zinc sulfate caused an increase in the absolute and relative kidney weights and regressive kidney lesions (not specified) in female mice that consumed 1,110 mg zinc/kg/day in the diet for 13 weeks, but no effects occurred in rats that consumed 565 mg zinc/kg/day or in mice that consumed 104 mg zinc/kg/day under similar conditions. Severe diffuse nephrosis was

observed in ferrets exposed to 195 mg zinc/kg/day as zinc oxide in the diet. In rats exposed to 191 mg zinc/kg/day as zinc acetate for 3 months, epithelial cell damage in the glomerulus and proximal convoluted tubules and increased plasma creatinine and urea levels were observed. Zinc plays a role in the normal development and maintenance of the immune system, such as in the lymphocyte response to mitogens and as a cofactor for the thymic hormone thymulin. Oral exposure to zinc at levels much higher than the recommended daily dose has impaired immune and inflammatory responses. This was observed in in vivo investigations of the immune competence of blood components taken from 11 healthy adult men after ingestion of 4.3 mg zinc/kg/day as zinc sulfate for 6 weeks. The mitogenic response elicited from peripheral blood lymphocytes and the chemotactic and phagocytic responses of polymorphonuclear leukocytes were impaired after zinc ingestion. No effects were seen on total numbers of lymphocytes or relative numbers of T cells, T cell subsets, or B cells. The relationship between these observations and decreased levels of immune competence that might lead to increased susceptibility to disease is unknown. A later study reported no effects of supplementation of male volunteers with 30 mg zinc/day (0.43 mg zinc/kg/day assuming a reference male body weight of 70 kg) as zinc glycine

Ingestion

chelate for 14 weeks on levels of peripheral blood leucocytes or on the frequency of lymphocyte subsets.

Zinc appears to be necessary for normal brain function, but excess zinc is toxic. A 16-year-old boy who ingested .86 mg zinc/kg/day of metallic zinc over a 2-day period in an attempt to promote wound healing, developed signs and symptoms of lethargy, light-headedness, staggering, and difficulty in writing clearly . Lethargy was also observed in a 2-year-old child who ingested a zinc chloride solution (.1,000 mg zinc/kg). It is not known whether these observations represent direct effects on the nervous system. Very limited data were located regarding neurological effects in animals. Minor neuron degeneration and proliferation of oligodendroglia occurred in rats dosed with 487 mg zinc/kg/day as zinc oxide for 10 days. Rats receiving 472 mg zinc/kg/day for 10 days had increased levels of secretory material in the neurosecretory nuclei of the hypothalamus. Mice exposed postnatally to 0.5 mg zinc/kg/day as zinc acetate for 28 days showed no changes in memory formation, but showed a gradual decrease in learning extinction throughout the study.

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

Strong evidence exists that exposure to the material may produce serious irreversible damage (other than carcinogenesis, mutagenesis and teratogenesis) following a single exposure by skin contact.

The material may accentuate any pre-existing dermatitis condition

Skin contact is not thought to have harmful health effects (as classified under EC Directives); the material may still produce health damage following entry through wounds, lesions or abrasions.

Contact with aluminas (aluminium oxides) may produce a form of irritant dermatitis accompanied by pruritus.

Though considered non-harmful, slight irritation may result from contact because of the abrasive nature of the aluminium oxide particles. Amine epoxy-curing agents (hardeners) may produce primary skin irritation and sensitisation dermatitis in predisposed individuals. Cutaneous reactions include erythema, intolerable itching and severe facial swelling. Blistering, with weeping of serious fluid, and crusting and scaling may also occur.

Virtually all of the liquid amine curing agents can cause sensitisation or allergic skin reactions.

Individuals exhibiting 'amine dermatitis' may experience a dramatic reaction upon re-exposure to minute quantities. Highly sensitive persons may even react to cured resins containing trace amounts of unreacted amine hardener. Minute quantities of air-borne amine may precipitate intense dermatological symptoms in sensitive individuals. Prolonged or repeated exposure may produce tissue necrosis.

NOTE: Susceptibility to this sensitisation will vary from person to person. Also, allergic dermatitis may not appear until after several days or weeks of contact. However, once sensitisation has occurred, exposure of the skin to even very small amounts of the material may cause erythema (redness) and oedema (swelling) at the site. Thus, all skin contact with any epoxy curing agent should be avoided.

Open cuts, abraded or irritated skin should not be exposed to this material

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.

Repeated or excessive handling, coupled with poor personal hygiene, may result in acne-like eruptions known as 'zinc oxide pox'.

The material may produce mild skin irritation; limited evidence or practical experience suggests, that the material either:

- produces mild inflammation of the skin in a substantial number of individuals following direct contact, and/or
- produces significant, but mild, 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 (non allergic). 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.

Eye

Skin Contact

Evidence exists, or practical experience predicts, that the material may cause eye irritation in a substantial number of individuals and/or may produce significant ocular lesions which are present twenty-four hours or more after instillation into the eye(s) of experimental animals. Repeated or prolonged eye contact may cause inflammation characterised by temporary redness (similar to windburn) of the conjunctiva (conjunctivitis); temporary impairment of vision and/or other transient eye damage/ulceration may occur.

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.

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.

Substances than can cuase 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. Wherever it is reasonably practicable, exposure to substances that can cuase 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.

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.

Exposure to the material may cause concerns for human fertility, generally on the basis that results in animal studies provide sufficient evidence to cause a strong suspicion 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.

Chronic exposure to aluminas (aluminium oxides) of particle size 1.2 microns did not produce significant systemic or respiratory system effects in workers. Epidemiologic surveys have indicated an excess of nonmalignant respiratory disease in workers exposed to aluminum oxide during abrasives production.

Very fine Al2O3 powder was not fibrogenic in rats, guinea pigs, or hamsters when inhaled for 6 to 12 months and sacrificed at periods up to 12 months following the last exposure.

When hydrated aluminas were injected intratracheally, they produced dense and numerous nodules of advanced fibrosis in rats, a reticulin network with occasional collagen fibres in mice and guinea pigs, and only a slight reticulin network in rabbits. Shaver's disease, a rapidly progressive and often fatal interstitial fibrosis of the lungs, is associated with a process involving the fusion of bauxite (aluminium oxide) with iron, coke and silica at 2000 deg. C.

The weight of evidence suggests that catalytically active alumina and the large surface area aluminas can induce lung fibrosis(aluminosis) in experimental animals, but only when given by the intra-tracheal route. The pertinence of such experiments in relation to workplace exposure is doubtful especially since it has been demonstrated that the most reactive of the aluminas (i.e. the chi and gamma forms), when given by inhalation, are non-fibrogenic in experimental animals. However rats exposed by inhalation to refractory aluminium fibre showed mild fibrosis and possibly carcinogenic effects indicating that fibrous aluminas might exhibit different toxicology to non-fibrous forms. Aluminium oxide fibres administered by the intrapleural route produce clear evidence of carcinogenicity.

Saffil fibre an artificially produced form alumina fibre used as refractories, consists of over 95% alumina, 3-4 % silica. Animal tests for fibrogenic, carcinogenic potential and oral toxicity have included in-vitro, intraperitoneal injection, intrapleural injection, inhalation, and feeding. The fibre has generally been inactive in animal studies. Also studies of Saffil dust clouds show very low respirable fraction.

There is general agreement that particle size determines that the degree of pathogenicity (the ability of a micro-organism to produce infectious disease) of elementary aluminium, or its oxides or hydroxides when they occur as dusts, fumes or vapours. Only those particles small enough to

_,,

Chronic

enter the alveolii (sub 5 um) are able to produce pathogenic effects in the lungs.

Occupational exposure to aluminium compounds may produce asthma, chronic obstructive lung disease and pulmonary fibrosis. Long-term overexposure may produce dyspnoea, cough, pneumothorax, variable sputum production and nodular interstitial fibrosis; death has been reported. Chronic interstitial pneumonia with severe cavitations in the right upper lung and small cavities in the remaining lung tissue, have been observed in gross pathology. Shaver's Disease may result from occupational exposure to fumes or dusts; this may produce respiratory distress and fibrosis with large blebs. Animal studies produce no indication that aluminium or its compounds are carcinogenic.

Because aluminium competes with calcium for absorption, increased amounts of dietary aluminium may contribute to the reduced skeletal mineralisation (osteopenia) observed in preterm infants and infants with growth retardation. In very high doses, aluminium can cause neurotoxicity, and is associated with altered function of the blood-brain barrier. A small percentage of people are allergic to aluminium and experience contact dermatitis, digestive disorders, vomiting or other symptoms upon contact or ingestion of products containing aluminium, such as deodorants or antacids. In those without allergies, aluminium is not as toxic as heavy metals, but there is evidence of some toxicity if it is consumed in excessive amounts. Although the use of aluminium cookware has not been shown to lead to aluminium toxicity in general, excessive consumption of antacids containing aluminium compounds and excessive use of aluminium-containing antiperspirants provide more significant exposure levels. Studies have shown that consumption of acidic foods or liquids with aluminium significantly increases aluminium absorption, and maltol has been shown to increase the accumulation of aluminium in nervous and osseus tissue. Furthermore, aluminium increases oestrogen-related gene expression in human breast cancer cells cultured in the laboratory These salts' estrogen-like effects have led to their classification as a metalloestrogen. Some researchers have expressed concerns that the aluminium in antiperspirants may increase the risk of breast cancer

After absorption, aluminium distributes to all tissues in animals and humans and accumulates in some, in particular bone. The main carrier of the aluminium ion in plasma is the iron binding protein, transferrin. Aluminium can enter the brain and reach the placenta and foetus. Aluminium may persist for a very long time in various organs and tissues before it is excreted in the urine. Although retention times for aluminium appear to be longer in humans than in rodents, there is little information allowing extrapolation from rodents to the humans.

At high levels of exposure, some aluminium compounds may produce DNA damage in vitro and in vivo via indirect mechanisms. The database on carcinogenicity of aluminium compounds is limited. No indication of any carcinogenic potential was obtained in mice given aluminium potassium sulphate at high levels in the diet.

Aluminium has shown neurotoxicity in patients undergoing dialysis and thereby chronically exposed parenterally to high concentrations of aluminium. It has been suggested that aluminium is implicated in the aetiology of Alzheimer's disease and associated with other neurodegenerative diseases in humans. However, these hypotheses remain controversial. Several compounds containing aluminium have the potential to produce neurotoxicity (mice, rats) and to affect the male reproductive system (dogs). In addition, after maternal exposure they have shown embryotoxicity (mice) and have affected the developing nervous system in the offspring (mice, rats). The available studies have a number of limitations and do not allow any dose-response relationships to be established. The combined evidence from several studies in mice, rats and dogs that used dietary administration of aluminium compounds produce lowest-observed-adverse-effect levels (LOAELs) for effects on neurotoxicity, testes, embryotoxicity, and the developing nervous system of 52, 75, 100, and 50 mg aluminium/kg bw/day, respectively. Similarly, the lowest no-observed-adverse-effect levels (NOAELs) for effects on these endpoints were reported at 30, 27, 100, and for effects on the developing nervous system, between 10 and 42 mg aluminium/kg bw per day, respectively.

Controversy exists over whether aluminium is the cause of degenerative brain disease (Alzheimer's disease or AD). Several epidemiological studies show a possible correlation between the incidence of AD and high levels of aluminium in drinking water. A study in Toronto, for example, found a 2.6 times increased risk in people residing for at least 10 years in communities where drinking water contained more than 0.1 mg/l aluminium compared with communities where the aluminium level was lower than 0.1 mg/l. A neurochemical model has been suggested linking aluminium exposure to brain disease. Aluminium concentrates in brain regions, notably the hippocampus, cerebral cortex and amygdala where it preferentially binds to large pyramid-shaped cells - it does not bind to a substantial degree to the smaller interneurons. Aluminium displaces magnesium in key metabolic reactions in brain cells and also interferes with calcium metabolism and inhibits phosphoinositide metabolism. Phosphoinositide normally controls calcium ion levels at critical concentrations.

Under the microscope the brain of AD sufferers show thickened fibrils (neurofibrillary tangles - NFT) and plaques consisting of amyloid protein deposited in the matrix between brain cells. Tangles result from alteration of 'tau' a brain cytoskeletal protein. AD tau is distinguished from normal tau because it is hyperphosphorylated. Aluminium hyperphosphorylates tau in vitro. When AD tau is injected into rat brain NFT-like aggregates form but soon degrade. Aluminium stabilises these aggregates rendering them resistant to protease degradation. Plaque formation is also enhanced by aluminium which induces the accumulation of amyloid precursor protein in the thread-like extensions of nerve cells (axons and dendrites). In addition aluminium has been shown to depress the activity of most neuro-transmitters similarly depressed in AD (acetylcholine, norepinephrine, glutamate and GABA).

Aluminium enters the brain in measurable quantities, even when trace levels are contained in a glass of tap water. Other sources of bioavailable aluminium include baking powder, antacids and aluminium products used for general food preparation and storage (over 12 months, aluminium levels in soft drink packed in aluminium cans rose from 0.05 to 0.9 mg/l). [Walton, J and Bryson-Taylor, D. - Chemistry in Australia, August 1995] Following an oral intake of extremely high doses of zinc (where 300 mg Zn/d – 20 times the US Recommended Dietary Allowance (RDA) – is a 'low intake' overdose), nausea, vomiting, pain, cramps and diarrhea may occur. There is evidence of induced copper deficiency, alterations of blood lipoprotein levels, increased levels of LDL, and decreased levels of HDL at long-term intakes of 100 mg Zn/d. The USDA RDA is 15 mg Zn/d.

There is also a condition called the 'zinc shakes' or 'zinc chills' or metal fume fever that can be induced by the inhalation of freshly formed zinc oxide formed during the welding of galvanized materials.

Supplemental zinc can prevent iron absorption, leading to iron deficiency and possible peripheral neuropathy, with loss of sensation in extremities.

Zinc is necessary for normal fetal growth and development. Fetal damage may result from zinc deficiency. Only one report in the literature suggested adverse developmental effects in humans due to exposure to excessive levels of zinc. Four women were given zinc supplements of 0.6 mg zinc/kg/day as zinc sulfate during the third trimester of pregnancy. Three of the women had premature deliveries, and one delivered a stillborn infant. However, the significance of these results cannot be determined because very few details were given regarding the study protocol, reproductive histories, and the nutritional status of the women. Other human studies have found no developmental effects in the newborns of mothers consuming 0.3 mg zinc/kg/day as zinc sulfate or zinc citrate or 0.06 mg zinc/kg/day as zinc aspartate during the last two trimesters. There has been a suggestion that increased serum zinc levels in pregnant women may be associated with an increase in neural tube defects, but others have failed to confirm this association. The developmental toxicity of zinc in experimental animals has been evaluated in a number of investigations. Exposure to high levels of zinc in the diet prior to and/or during gestation has been associated with increased fetal resorptions, reduced fetal weights, altered tissue concentrations of fetal iron and copper, and reduced growth in the offspring. Animal studies suggest that exposure to very high levels of dietary zinc is associated with reduced fetal weight, alopecia, decreased hematocrit, and copper deficiency in offspring. For example, second generation mice exposed to zinc carbonate during gestation and lactation (260 mg/kg/day in the maternal diet), and then continued on that diet for 8 weeks, had reduced body weight, alopecia, and signs of copper deficiency (e.g., lowered hematocrit and occasional achromotrichia [loss of hair colour]. Similarly, mink kits from dams that ingested a time-weightedaverage dose of 20.8 mg zinc/kg/day as zinc sulfate also had alopecia and achromotrichia. It is likely that the alopecia resulted from zinc-induced copper deficiency, which is known to cause alopecia in monkeys. However, no adverse effects were observed in parental mice or mink. No effects on reproduction were reported in rats exposed to 50 mg zinc/kg/day as zinc carbonate; however, increased stillbirths were observed in rats exposed to 250 mg zinc/kg/day.

Welding or flame cutting of metals with zinc or zinc dust coatings may result in inhalation of zinc oxide fume; high concentrations of zinc oxide fume may result in 'metal fume fever'; also known as 'brass chills', an industrial disease of short duration. [I.L.O] Symptoms include malaise, fever, weakness, nausea and may appear quickly if operations occur in enclosed or poorly ventilated areas.

Genotoxicity studies conducted in a variety of test systems have failed to provide evidence for mutagenicity of zinc. However, there are indications of weak clastogenic effects following zinc exposure.

Amine epoxy-curing agents (hardeners) may produce primary skin irritation and sensitisation dermatitis in predisposed individuals. Cutaneous reactions include erythema, intolerable itching and severe facial swelling. Blistering, with weeping of serious fluid, and crusting and scaling may also occur.

Virtually all of the liquid amine curing agents can cause sensitisation or allergic skin reactions.

Individuals exhibiting 'amine dermatitis' may experience a dramatic reaction upon re-exposure to minute quantities. Highly sensitive persons may even react to cured resins containing trace amounts of unreacted amine hardener. Minute quantities of air-borne amine may precipitate intense dermatological symptoms in sensitive individuals. Prolonged or repeated exposure may produce tissue necrosis.

NOTE: Susceptibility to this sensitisation will vary from person to person. Also, allergic dermatitis may not appear until after several days or weeks of contact. However, once sensitisation has occurred, exposure of the skin to even very small amounts of the material may cause erythema (redness) and oedema (swelling) at the site. Thus, all skin contact with any epoxy curing agent should be avoided.

Sensitisation may give severe responses to very low levels of exposure, in situations where exposure may occur.

8329TCS-B Thermally	TOXICITY		IRRITATION		
nductive Epoxy Adhesive	Not Available Not Available		Not Available		
	TOXICITY	IRRITAT	TION		
aluminium oxide	Inhalation(Rat) LC50; >2.3 mg/l4h ^[1]	Eye: no adverse effect observed (not in		rritating) ^[1]	
	Oral (Rat) LD50; >2000 mg/kg ^[1]	Skin: no	adverse effect observed (not	irritating) ^[1]	
	TOXICITY	IRRITA	TION		
	dermal (rat) LD50: >2000 mg/kg ^[1]	Eye (ra	bbit) : 500 mg/24 h - mild		
zinc oxide	Inhalation(Rat) LC50; >1.79 mg/l4h ^[1]	Eye: no	adverse effect observed (not	irritating) ^[1]	
	Oral (Rat) LD50; >5000 mg/kg ^[1]	Skin (ra	abbit) : 500 mg/24 h- mild		
		Skin: n	o adverse effect observed (no	t irritating) ^[1]	
linoleic acid/4,7,10-trioxa-	TOXICITY		IRRITATION		
1,13-tridecanediamine polyamid	Not Available Not Available		Not Available		
	TOXICITY			IRRITATION	
all oil/ triethylenetetramine	dermal (rat) LD50: >2000 mg/kg ^[1]			Not Available	
polyamides	Oral (Rat) LD50; >2000 mg/kg ^[1]				
	3 3				
	TOXICITY			IRRITATION	
diethylene glycol,	Dermal (rabbit) LD50: 2500 mg/kg ^[2]			Not Available	
di(3-aminopropyl) ether	Oral (Rat) LD50; 4290 mg/kg ^[2]				
	TOXICITY	IRRITATIO	ON		
pylene glycol monomethyl ether acetate, alpha-isomer	dermal (rat) LD50: >2000 mg/kg ^[1]	Eye: no ac	dverse effect observed (not irri	tating) ^[1]	
etilei acetate, alpha-isoinei	Oral (Rat) LD50; 3739 mg/kg ^[2]	Skin: no a	dverse effect observed (not irr	itating) ^[1]	
	TOXICITY		IRRITATION		
	Dermal (rabbit) LD50: 805 mg/kg ^[2]		Eye (rabbit):20 mg/24 h - mo	derate	
triethylenetetramine	Oral (Rat) LD50; 2500 mg/kg ^[2]		Eye (rabbit); 49 mg - SEVERE		
			Skin (rabbit): 490 mg open S	(rabbit): 490 mg open SEVERE	
			Skin (rabbit): 5 mg/24 SEVER	RE	
	TOXICITY	IRRITA	TION		
carbon black	Dermal (rabbit) LD50: >3000 mg/kg ^[2]	Eye: no	adverse effect observed (not	irritating) ^[1]	
	Oral (Rat) LD50; >8000 mg/kg[1]	Skin: no adverse effect observed			

specified data extracted from RTECS - Register of Toxic Effect of chemical Substances

For aluminium compounds:

8329TCS-B Thermally Conductive Epoxy Adhesive

Aluminium present in food and drinking water is poorly absorbed through the gastrointestinal tract. The bioavailability of aluminium is dependent on the form in which it is ingested and the presence of dietary constituents with which the metal cation can complex Ligands in food can have a marked effect on absorption of aluminium, as they can either enhance uptake by forming absorbable (usually water soluble) complexes (e.g., with carboxylic acids such as citric and lactic), or reduce it by forming insoluble compounds (e.g., with phosphate or dissolved silicate). Considering the available human and animal data it is likely that the oral absorption of aluminium can vary 10-fold based on chemical form alone. Although bioavailability appears to generally parallel water solubility, insufficient data are available to directly extrapolate from solubility in water to bioavailability.

For oral intake from food, the European Food Safety Authority (EFSA) has derived a tolerable weekly intake (TWI) of 1 milligram (mg) of aluminium per kilogram of bodyweight. In its health assessment, the EFSA states a medium bioavailability of 0.1 % for all aluminium compounds

which are ingested with food. This corresponds to a systemically available tolerable daily dose of 0.143 microgrammes (µg) per kilogramme (kg) of body weight. This means that for an adult weighing 60 kg, a systemically available dose of 8.6 µg per day is considered safe. Based on a neuro-developmental toxicity study of aluminium citrate administered via drinking water to rats, the Joint FAO/WHO Expert Committee on Food Additives (JECFA) established a Provisional Tolerable Weekly Intake (PTWI) of 2 mg/kg bw (expressed as aluminium) for all aluminium compounds in food, including food additives. The Committee on Toxicity of chemicals in food, consumer products and the environment (COT) considers that the derivation of this PTWI was sound and that it should be used in assessing potential risks from dietary exposure to aluminium.

The Federal Institute for Risk Assessment (BfR) of Germany has assessed the estimated aluminium absorption from antiperspirants. For this purpose, the data, derived from experimental studies, on dermal absorption of aluminium from antiperspirants for healthy and damaged skin was used as a basis. At about 10.5 µg, the calculated systemic intake values for healthy skin are above the 8.6 µg per day that are considered safe for an adult weighing 60 kg. If aluminium -containing antiperspirants are used on a daily basis, the tolerable weekly intake determined by the EFSA is therefore exceeded. The values for damaged skin, for example injuries from shaving, are many times higher. This means that in case of daily use of an aluminium-containing antiperspirant alone, the TWI may be completely exhausted. In addition, further aluminium absorption sources such as food, cooking utensils and other cosmetic products must be taken into account

Systemic toxicity after repeated exposure

No studies were located regarding dermal effects in animals following intermediate or chronic-duration dermal exposure to various forms of aluminium.

When orally administered to rats, aluminium compounds (including aluminium nitrate, aluminium sulfate and potassium aluminium sulfate) have produced various effects, including decreased gain in body weight and mild histopathological changes in the spleen, kidney and liver of rats (104 mg Al/kg bw/day) and dogs (88-93 mg Al/kg bw/day) during subchronic oral exposure. Effects on nerve cells, testes, bone and stomach have been reported at higher doses. Severity of effects increased with dose.

The main toxic effects of aluminium that have been observed in experimental animals are neurotoxicity and nephrotoxicity. Neurotoxicity has also been described in patients dialysed with water containing high concentrations of aluminium, but epidemiological data on possible adverse effects in humans at lower exposures are inconsistent

Reproductive and developmental toxicity:

Studies of reproductive toxicity in male mice (intraperitoneal or subcutaneous administration of aluminium nitrate or chloride) and rabbits (administration of aluminium chloride by gavage) have demonstrated the ability of aluminium to cause testicular toxicity, decreased sperm quality in mice and rabbits and reduced fertility in mice. No reproductive toxicity was seen in females given aluminium nitrate by gavage or dissolved in drinking water. Multi-generation reproductive studies in which aluminium sulfate and aluminium ammonium sulfate were administered to rats in drinking water, showed no evidence of reproductive toxicity

High doses of aluminium compounds given by gavage have induced signs of embryotoxicity in mice and rats in particular, reduced fetal body weight or pup weight at birth and delayed ossification. Developmental toxicity studies in which aluminium chloride was administered by gavage to pregnant rats showed evidence of foetotoxicity, but it was unclear whether the findings were secondary to maternal toxicity. A twelve-month neuro-development with aluminium citrate administered via the drinking water to Sprague-Dawley rats, was conducted according to Good Laboratory Practice (GLP). Aluminium citrate administered via the drinking water to Sprague-Dawley rats, was conducted according to Good Laboratory Practice (GLP). Aluminium citrate twas selected for the study since it is the most soluble and bioavailable aluminium salt. Pregnant rats were exposed to aluminium citrate from gestational day 6 through lactation, and then the offspring were exposed post-weaning until postnatal day 364. An extensive functional observational battery of tests was performed at various times. Evidence of aluminium toxicity was demonstrated in the high (300 mg/kg bw/day of aluminium) and to a lesser extent, the mid-dose groups (100 mg/kg bw/day of aluminium). In the high-dose group, the main effect was renal damage, resulting in high mortality in the male offspring. No major neurological pathology or neurobehavioural effects were observed, other than in the neuromuscular subdomain (reduced grip strength and increased foot splay). Thus, the lowest observed adverse effect level (LOAEL) was 100 mg/kg bw/day and the no observed adverse effect level (NOAEL) was 30 mg/kg bw/day. Bioavailability of aluminium citrate and nitrate and aluminium hydroxide was much lower than that of aluminium citrate This study was used by JECFA as key study to derive the PTWI.

Genotoxicity

Aluminium compounds were non-mutagenic in bacterial and mammalian cell systems, but some produced DNA damage and effects on chromosome integrity and segregation in vitro. Clastogenic effects were also observed in vivo when aluminium sulfate was administered at high doses by gavage or by the intraperitoneal route. Several indirect mechanisms have been proposed to explain the variety of genotoxic effects elicited by aluminium salts in experimental systems. Cross-linking of DNA with chromosomal proteins, interaction with microtubule assembly and mitotic spindle functioning, induction of oxidative damage, damage of lysosomal membranes with liberation of DNAase, have been suggested to explain the induction of structural chromosomal aberrations, sister chromatid exchanges, chromosome loss and formation of oxidized bases in experimental systems. The EFSA Panel noted that these indirect mechanisms of genotoxicity, occurring at relatively high levels of exposure, are unlikely to be of relevance for humans exposed to aluminium via the diet. Aluminium compounds do not cause gene mutations in either bacteria or mammalian cells. Exposure to aluminium compounds does result in both structural and numerical chromosome aberrations both in in-vitro and in-vivo mutagenicity tests. DNA damage is probably the result of indirect mechanisms. The DNA damage was observed only at high exposure

Carcinogenicity

The available epidemiological studies provide limited evidence that certain exposures in the aluminium production industry are carcinogenic to humans, giving rise to cancer of the lung and bladder. However, the aluminium exposure was confounded by exposure to other agents including polycyclic aromatic hydrocarbons, aromatic amines, nitro compounds and asbestos. There is no evidence of increased cancer risk in non-occupationally exposed persons.

Neurodegenerative diseases.

Following the observation that high levels of aluminium in dialysis fluid could cause a form of dementia in dialysis patients, a number of studies were carried out to determine if aluminium could cause dementia or cognitive impairment as a consequence of environmental exposure over long periods. Aluminium was identified, along with other elements, in the amyloid plaques that are one of the diagnostic lesions in the brain for Alzheimer disease, a common form of senile and pre-senile dementia. some of the epidemiology studies suggest the possibility of an association of Alzheimer disease with aluminium in water, but other studies do not confirm this association. All studies lack information on ingestion of aluminium from food and how concentrations of aluminium in food affect the association between aluminium in water and Alzheimer disease." There are suggestions that persons with some genetic variants may absorb more aluminium than others, but there is a need for more analytical research to determine whether aluminium from various sources has a significant causal association with Alzheimer disease and other neurodegenerative diseases. Aluminium is a neurotoxicant in experimental animals. However, most of the animal studies performed have several limitations and therefore cannot be used for quantitative risk assessment. Contact sensitivity:

It has been suggested that the body burden of aluminium may be linked to different iseases. Macrophagic myofasciitis and chronic fatigue syndrome can be caused by aluminium-containing adjuvants in vaccines. Macrophagic myofasciitis (MMF) has been described as a disease in adults presenting with ascending myalgia and severe fatigue following exposure to aluminium hydroxide-containing vaccines The corresponding histological findings include aluminium-containing macrophages infiltrating muscle tissue at the injection site. The hypothesis is that the long-lasting granuloma triggers the development of the systemic syndrome.

Aluminium acts not only as an adjuvant, stimulating the immune system either to fend off infections or to tolerate antigens, it also acts as a sensitisers causing contact allergy and allergic contact dermatitis. In general, metal allergies are very common and aluminium is considered to be a weak allergen. A metal must be ionised to be able to act as a contact allergen, then it has to undergo haptenisation to be immunogenic and to initiate an immune response. Once inside the skin, the metal ions must bind to proteins to become immunologically reactive. The most important routes of exposure and sensitisation to aluminium are through aluminium-containing vaccines. One Swedish study showed a statistically significant association between contact allergy to aluminium and persistent itching nodules in children treated with allergen-specific immunotherapy (ASIT). Nodules were overrepresented in patients with contact allergy to aluminium

Other routes of sensitisation reported in the literature are the prolonged use of aluminium-containing antiperspirants, topical medication, and tattooing of the skin with aluminium-containing pigments. Most of the patients experienced eczematous reactions whereas tattooing caused granulomas. Even though aluminium is used extensively in industry, only a low number of cases of occupational skin sensitisation to aluminium have been reported Systemic allergic contact dermatitis in the form of flare-up reactions after re-exposure to aluminium has been documented:

DIETHYLENE GLYCOL, DI(3-AMINOPROPYL) ETHER

pruritic nodules at present and previous injection sites, eczema at the site of vaccination as well as at typically atopic localisations after vaccination with aluminium-containing vaccines and/or patch testing with aluminium, and also after use of aluminium-containing toothpaste

The material may be irritating to the eye, with prolonged contact causing inflammation. Repeated or prolonged exposure to irritants may produce conjunctivitis.

The material may produce respiratory tract irritation. Symptoms of pulmonary irritation may include coughing, wheezing, laryngitis, shortness of breath, headache, nausea, and a burning sensation.

Unlike most organs, the lung can respond to a chemical insult or a chemical agent, by first removing or neutralising the irritant and then repairing the damage (inflammation of the lungs may be a consequence).

The repair process (which initially developed to protect mammalian lungs from foreign matter and antigens) may, however, cause further damage to the lungs (fibrosis for example) when activated by hazardous chemicals. Often, this results in an impairment of gas exchange, the primary function of the lungs. Therefore prolonged exposure to respiratory irritants may cause sustained breathing difficulties.

A BASF report (in ECETOC) showed that inhalation exposure to 545 ppm PGMEA (beta isomer) was associated with a teratogenic response in rabbits; but exposure to 145 ppm and 36 ppm had no adverse effects. The beta isomer of PGMEA comprises only 10% of the commercial material, the remaining 90% is alpha isomer. Hazard appears low but emphasizes the need for care in handling this chemical. [I.C.I] *Shin-Etsu SDS

for propylene glycol ethers (PGEs):

Typical propylene glycol ethers include propylene glycol n-butyl ether (PnB); dipropylene glycol n-butyl ether (DPnB); dipropylene glycol methyl ether acetate (DPMA); tripropylene glycol methyl ether (TPM).

Testing of a wide variety of propylene glycol ethers Testing of a wide variety of propylene glycol ethers has shown that propylene glycol-based ethers are less toxic than some ethers of the ethylene series. The common toxicities associated with the lower molecular weight homologues of the ethylene series, such as adverse effects on reproductive organs, the developing embryo and fetus, blood (haemolytic effects), or thymus, are not seen with the commercial-grade propylene glycol ethers. In the ethylene series, metabolism of the terminal hydroxyl group produces an alkoxyacetic acid. The reproductive and developmental toxicities of the lower molecular weight homologues in the ethylene series are due specifically to the formation of methoxyacetic and ethoxyacetic acids.

Longer chain length homologues in the ethylene series are not associated with the reproductive toxicity but can cause haemolysis in sensitive species, also through formation of an alkoxyacetic acid. The predominant alpha isomer of all the PGEs (thermodynamically favored during manufacture of PGEs) is a secondary alcohol incapable of forming an alkoxypropionic acid. In contrast beta-isomers are able to form the alkoxypropionic acids and these are linked to teratogenic effects (and possibly haemolytic effects).

This alpha isomer comprises greater than 95% of the isomeric mixture in the commercial product.

Because the alpha isomer cannot form an alkoxypropionic acid, this is the most likely reason for the lack of toxicity shown by the PGEs as distinct from the lower molecular weight ethylene glycol ethers. More importantly, however, very extensive empirical test data show that this class of commercial-grade glycol ether presents a low toxicity hazard. PGEs, whether mono, di- or tripropylene glycol-based (and no matter what the alcohol group), show a very similar pattern of low to non-detectable toxicity of any type at doses or exposure levels greatly exceeding those showing pronounced effects from the ethylene series. One of the primary metabolites of the propylene glycol ethers is propylene glycol, which is of low toxicity and completely metabolised in the body.

As a class, the propylene glycol ethers are rapidly absorbed and distributed throughout the body when introduced by inhalation or oral exposure. Dermal absorption is somewhat slower but subsequent distribution is rapid. Most excretion for PGEs is via the urine and expired air. A small portion is excreted in the faeces.

As a group PGEs exhibits low acute toxicity by the oral, dermal, and inhalation routes. Rat oral LD50s range from >3,000 mg/kg (PnB) to >5,000 mg/kg (DPMA). Dermal LD50s are all > 2,000 mg/kg (PnB, & DPnB; where no deaths occurred), and ranging up to >15,000 mg/kg (TPM). Inhalation LC50 values were higher than 5,000 mg/m3 for DPMA (4-hour exposure), and TPM (1-hour exposure). For DPnB the 4-hour LC50 is >2,040 mg/m3. For PnB, the 4-hour LC50 was >651 ppm (>3,412 mg/m3), representing the highest practically attainable vapor level. No deaths occurred at these concentrations. PnB and TPM are moderately irritating to eyes while the remaining category members are only slightly irritating to nonirritating. PnB is moderately irritating to skin while the remaining category members are slightly to non-irritating.

In repeated dose studies ranging in duration from 2 to 13 weeks, few adverse effects were found even at high exposure levels and effects that did occur were mild in nature. By the oral route of administration, NOAELs of 350 mg/kg-d (PnB – 13 wk) and 450 mg/kg-d (DPnB – 13 wk) were observed for liver and kidney weight increases (without accompanying histopathology). LOAELs for these two chemicals were 1000 mg/kg-d (highest dose tested).

Dermal repeated-dose toxicity tests have been performed for many PGEs. For PnB, no effects were seen in a 13-wk study at doses as high as 1,000 mg/kg-d. A dose of 273 mg/kg-d constituted a LOAEL (increased organ weights without histopathology) in a 13-week dermal study for DPnB. For TPM, increased kidney weights (no histopathology) and transiently decreased body weights were found at a dose of 2,895 mg/kg-d in a 90-day study in rabbits. By inhalation, no effects were observed in 2-week studies in rats at the highest tested concentrations of 3244 mg/m3 (600 ppm) for PnB and 2,010 mg/m3 (260 ppm) for DPnB. TPM caused increased liver weights without histopathology by inhalation in a 2-week study at a LOAEL of 360 mg/m3 (43 ppm). In this study, the highest tested TPM concentration, 1010 mg/m3 (120 ppm), also caused increased liver weights without accompanying histopathology. Although no repeated-dose studies are available for the oral route for TPM, or for any route for DPMA, it is anticipated that these chemicals would behave similarly to other category members.

One and two-generation reproductive toxicity testing has been conducted in mice, rats, and rabbits via the oral or inhalation routes of exposure on PM and PMA. In an inhalation rat study using PM, the NOAEL for parental toxicity is 300 ppm (1106 mg/m3) with decreases in body and organ weights occurring at the LOAEL of 1000 ppm (3686 mg/m3). For offspring toxicity the NOAEL is 1000 ppm (3686 mg/m3), with decreased body weights occurring at 3000 ppm (11058 mg/m3). For PMA, the NOAEL for parental and offspring toxicity is 1000 mg/kg/d. in a two generation gavage study in rats. No adverse effects were found on reproductive organs, fertility rates, or other indices commonly monitored in such studies. In addition, there is no evidence from histopathological data from repeated-dose studies for the category members that would indicate that these chemicals would pose a reproductive hazard to human health.

In developmental toxicity studies many PGEs have been tested by various routes of exposure and in various species at significant exposure levels and show no frank developmental effects. Due to the rapid hydrolysis of DPMA to DPM, DPMA would not be expected to show teratogenic effects. At high doses where maternal toxicity occurs (e.g., significant body weight loss), an increased incidence of some anomalies such as delayed skeletal ossification or increased 13th ribs, have been reported. Commercially available PGEs showed no teratogenicity. The weight of the evidence indicates that propylene glycol ethers are not likely to be genotoxic. *In vitro*, negative results have been seen in a number of assays for PnB, DPnB, DPMA and TPM. Positive results were only seen in 3 out of 5 chromosome aberration assays in mammalian cells with DPnB. However, negative results were seen in a mouse micronucleus assay with DPnB and PM. Thus, there is no evidence to suggest these PGEs would be genotoxic *in vivo*. In a 2-year bioassay on PM, there were no statistically significant increases in tumors in rats and mice. A BASF report (in ECETOC) showed that inhalation exposure to 545 ppm PGMEA (beta isomer) was associated with a teratogenic response in rabbits: but exposure to 145 ppm and 36 ppm had no adverse effects.

The beta isomer of PGMEA comprises only 10% of the commercial material, the remaining 90% is alpha isomer. Hazard appears low but emphasizes the need for care in handling this chemical. [I.C.I]

TRIETHYLENETETRAMINE

Handling ethyleneamine products is complicated by their tendency to react with other chemicals, such as carbon dioxide in the air, which results in the formation of solid carbamates. Because of their ability to produce chemical burns, skin rashes, and asthma-like symptoms, ethyleneamines also require substantial care in handling. Higher molecular weight ethyleneamines are often handled at elevated temperatures further increasing the possibility of vapor exposure to these compounds.

Because of the fragility of eye tissue, almost any eye contact with any ethyleneamine may cause irreparable damage, even blindness. A single, short exposure to ethyleneamines, may cause severe skin burns, while a single, prolonged exposure may result in the material being absorbed through the skin in harmful amounts. Exposures have caused allergic skin reactions in some individuals. Single dose oral toxicity of ethyleneamines is low. The oral LD50 for rats is in the range of 1000 to 4500 mg/kg for the ethyleneamines.

PROPYLENE GLYCOL MONOMETHYL ETHER ACETATE, ALPHA-ISOMER

In general, the low-molecular weight polyamines have been positive in the Ames assay, increase sister chromatid exchange in Chinese hamster ovary (CHO) cells, and are positive for unscheduled DNA synthesis although they are negative in the mouse micronucleus assay. It is believed that the positive results are based on its ability to chelate copper

The material may produce severe irritation to the eye causing pronounced inflammation. Repeated or prolonged exposure to irritants may produce conjunctivitis.

The material may produce severe skin irritation after prolonged or repeated exposure, and may produce a contact dermatitis (nonallergic). This form of dermatitis is often characterised by skin redness (erythema) thickening of the epidermis.

Histologically there may be intercellular oedema of the spongy layer (spongiosis) and intracellular oedema of the epidermis. Prolonged contact is unlikely, given the severity of response, but repeated exposures may produce severe ulceration.

For alkyl polyamines:

The alkyl polyamines cluster consists of organic compounds containing two terminal primary amine groups and at least one secondary amine group. Typically these substances are derivatives of ethylenediamine, propylenediamine or hexanediamine. The molecular weight range for the entire cluster is relatively parrow, ranging from 103 to 232

Acute toxicity of the alkyl polyamines cluster is low to moderate via oral exposure and a moderate to high via dermal exposure. Cluster members have been shown to be eye irritants, skin irritants, and skin sensitisers in experimental animals. Repeated exposure in rats via the oral route indicates a range of toxicity from low to high hazard. Most cluster members gave positive results in tests for potential genotoxicity.

Limited carcinogenicity studies on several members of the cluster showed no evidence of carcinogenicity. Unlike aromatic amines, aliphatic amines are not expected to be potential carcinogens because they are not expected to undergo metabolic activation, nor would activated intermediates be stable enough to reach target macromolecules.

Polyamines potentiate NMDA induced whole-cell currents in cultured striatal neurons

Triethylenetetramine (TETA) is a severe irritant to skin and eyes and induces skin sensitisation.

TETA is of moderate acute toxicity: LD50(oral, rat) > 2000 mg/kg bw, LD50(dermal, rabbit) = 550 - 805 mg/kg bw. Acute exposure to saturated vapour via inhalation was tolerated without impairment. Exposure to to aerosol leads to reversible irritations of the mucous membranes in the respiratory tract.

Following repeated oral dosing via drinking water only in mice but not in rats at concentration of 3000 ppm there were signs of impairment. The NOAEL is 600 ppm [92 mg/kg bw (oral, 90 days)]. Lifelong dermal application to mice (1.2 mg/mouse) did not result in tumour formation. There are differing results of the genetic toxicity for TETA. The positive results of the in vitro tests may be the result of a direct genetic action as well as a result of an interference with essential metal ions. Due to this uncertainty of the in vitro tests, the genetic toxicity of TETA has to be assessed on the basis of in vivo tests.

The in vivo micronucleus tests (i.p. and oral) and the SLRL test showed negative results.

There are no human data on reproductive toxicity (fertility assessment). The analogue diethylenetriamine had no effects on reproduction. TETA shows developmental toxicity in animal studies if the chelating property of the substance is effective. The NOEL is 830 mg/kg bw (oral). Experience with female patients suffering from Wilson's disease demonstrated that no miscarriages and no foetal abnormalities occur during treatment with TETA..

In rats, there are several studies concerning developmental toxicity. The oral treatment of rats with 75, 375 and 750 mg/kg resulted in no effects on dams and fetuses, except slight increased fetal body weight. After oral treatment of rats with 830 or 1670 mg/kg bw only in the highest dose group increased foetal abnormalities in 27/44 fetus (69,2 %) were recorded, when simultaneously the copper content of the feed was reduced. Copper supplementation in the feed reduced significant the fetal abnormalities of the highest dose group to 3/51 (6,5 % foetus. These findings suggest that the developmental toxicity is produced as a secondary consequence of the chelating properties of TETA. Exposure to the material for prolonged periods may cause physical defects in the developing embryo (teratogenesis).

CARBON BLACK

Inhalation (rat) TCLo: 50 mg/m3/6h/90D-I Nil reported

WARNING: This substance has been classified by the IARC as Group 2B: Possibly Carcinogenic to Humans.

The following information refers to contact allergens as a group and may not be specific to this product.

8329TCS-B Thermally Conductive Epoxy Adhesive & TRIETHYLENETETRAMINE

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.

For Fatty Nitrogen Derived (FND) Amides (including several high molecular weight alkyl amino acid amides)

The chemicals in the Fatty Nitrogen Derived (FND) Amides of surfactants are similar to the class in general as to physical/chemical properties, environmental fate and toxicity. Human exposure to these chemicals is substantially documented.

The Fatty nitrogen-derived amides (FND amides) comprise four categories:

Subcategory I: Substituted Amides

Subcategory II: Fatty Acid Reaction Products with Amino Compounds (Note: Subcategory II chemicals, in many cases, contain Subcategory I chemicals as major components)

Subcategory III: Imidazole Derivatives

Subcategory IV: FND Amphoterics

Acute Toxicity: The low acute oral toxicity of the FND Amides is well established across all Subcategories by the available data. The limited acute toxicity of these chemicals is also confirmed by four acute dermal and two acute inhalation studies.

Repeated Dose and Reproductive Toxicity: Two subchronic toxicity studies demonstrating low toxicity are available for Subcategory I chemicals. In addition, a 5-day repeated dose study for a third chemical confirmed the minimal toxicity of these chemicals. Since the Subcategory I chemicals are major components of many Subcategory II chemicals, and based on the low repeat-dose toxicity of the amino compounds (e.g. diethanolamine, triethanolamine) used for producing the Subcategory II derivatives, the Subcategory I repeat-dose toxicity studies adequately support Subcategory II.

Two subchronic toxicity studies in Subcategory III confirmed the low order of repeat dose toxicity for the FND Amides Imidazole derivatives. For Subcategory IV, two subchronic toxicity studies for one of the chemicals indicated a low order of repeat-dose toxicity for the FND amphoteric salts similar to that seen in the other categories.

Genetic Toxicity in vitro: Based on the lack of effect of one or more chemicals in each subcategory, adequate data for mutagenic activity as measured by the Salmonella reverse mutation assay exist for all of the subcategories.

Developmental Toxicity: A developmental toxicity study in Subcategory I and in Subcategory IV and a third study for a chemical in Subcategory III are available. The studies indicate these chemicals are not developmental toxicants, as expected based on their structures, molecular weights, physical properties and knowledge of similar chemicals. As above for repeat-dose toxicity, the data for Subcategory I are adequate to support Subcategory II.

In evaluating potential toxicity of the FND Amides chemicals, it is also useful to review the available data for the related FND Cationic and FND Amines Category chemicals. Acute oral toxicity studies (approximately 80 studies for 40 chemicals in the three categories) provide LD50 values from approximately 400 to 10,000 mg/kg with no apparent organ specific toxicity. Similarly, repeated dose toxicity studies (approximately 35 studies for 15 chemicals) provide NOAELs between 10 and 100 mg/kg/day for rats and slightly lower for dogs. More than 60 genetic toxicity studies (in vitro bacterial and mammalian cells as well as in vivo studies) indicated no mutagenic activity among more than 30 chemicals tested. For reproductive evaluations, 14 studies evaluated reproductive endpoints and/or reproductive organs for 11 chemicals, and 15 studies evaluated developmental toxicity for 13 chemicals indicating no reproductive or developmental effects for the FND group as a whole. Some typical applications of FND Amides are:

masonry cement additive; curing agent for epoxy resins; closed hydrocarbon systems in oil field production, refineries and chemical plants; and slip and antiblocking additives for polymers.

Conductive Epoxy Adhesive & LINOLEIC ACID/4,7,10-TRIOXA-1,13-TRIDECANEDIAMINE POLYAMID

8329TCS-B Thermally

The safety of the FND Amides to humans is recognised by the U.S. FDA, which has approved stearamide, oleamide and/or erucamide for adhesives; coatings for articles in food contact; coatings for polyolefin films; defoaming agents for manufacture of paper and paperboard; animal glue (defoamer in food packaging); in EVA copolymers for food packaging; lubricants for manufacture of metallic food packaging; irradiation of prepared foods; release agents in manufacture of food packaging materials, food contact surface of paper and paperboard; cellophane in food packaging; closure sealing gaskets; and release agents in polymeric resins and petroleum wax. The low order of toxicity indicates that the use of FND Amides does not pose a significant hazard to human health.

The differences in chain length, degree of saturation of the carbon chains, source of the natural oils, or addition of an amino group in the chain would not be expected to have an impact on the toxicity profile. This conclusion is supported by a number of studies in the FND family of chemicals (amines, cationics, and amides as separate categories) that show no differences in the length or degree of saturation of the alkyl substituents and is also supported by the limited toxicity of these long-chain substituted chemicals.

LINOLEIC ACID/4,7,10-TRIOXA-1.13-TRIDECANEDIAMINE POLYAMID & CARBON BLACK

ALUMINIUM OXIDE &

No significant acute toxicological data identified in literature search.

ZINC OXIDE & DIETHYLENE GLYCOL. DI(3-AMINOPROPYL) ETHER

The material may cause skin irritation after prolonged or repeated exposure and may produce a contact dermatitis (nonallergic). This form of dermatitis is often characterised by skin redness (erythema) and swelling epidermis. Histologically there may be intercellular oedema of the spongy layer (spongiosis) and intracellular oedema of the epidermis.

DIETHYLENE GLYCOL. DI(3-AMINOPROPYL) ETHER & TRIETHYLENETETRAMINE

Asthma-like symptoms may continue for months or even years after exposure to the material ceases. This may be due to a non-allergenic condition known as reactive airways dysfunction syndrome (RADS) which can occur following exposure to high levels of highly irritating compound. Key criteria for the diagnosis of RADS include the absence of preceding respiratory disease, in a non-atopic individual, with abrupt onset of persistent asthma-like symptoms within minutes to hours of a documented exposure to the irritant. A reversible airflow pattern, on spirometry, with the presence of moderate to severe bronchial hyperreactivity on methacholine challenge testing and the lack of minimal lymphocytic inflammation, without eosinophilia, have also been included in the criteria for diagnosis of RADS. RADS (or asthma) following an irritating inhalation is an infrequent disorder with rates related to the concentration of and duration of exposure to the irritating substance. Industrial bronchitis, on the other hand, is a disorder that occurs as result of exposure due to high concentrations of irritating substance (often particulate in nature) and is completely reversible after exposure ceases. The disorder is characterised by dyspnea, cough and mucus

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

Leaend:

X - Data either not available or does not fill the criteria for classification

Data available to make classification

11.2.1. Endocrine Disruption Properties

Not Available

12.1 Toxicity

SECTION 12 Ecological information

Not Available	TCS-B Thermally	Endpoint	Test Duration (hr)		Species	Value		Source	
EC50 72h Algae or other aquatic plants 0.2mg/l	Epoxy Adhesive	Not Available	Not Available	lot Available		Not Available Not Available		le Not Available	
EC50		Endpoint	Test Duration (hr)	Specie	s	V	alue		Source
LC50 96h Fish 0.078-0.108m NOEC(ECx) 72h Algae or other aquatic plants >100mg/l EC50 96h Algae or other aquatic plants 0.024mg/l Endpoint Test Duration (hr) Species Value EC50 72h Algae or other aquatic plants 0.036-0.049m BCF 1344h Fish 19-110 LC50 96h Fish 0.927-2.589m EC50 48h Crustacea 0.301-0.667m NOEC(ECx) 72h Algae or other aquatic plants 0.005mg/l EC50 96h Algae or other aquatic plants 0.3mg/l Iinoleic acid/4,7,10-trioxa-1,13-tridecanediamine Test Duration (hr) Species Value LC50 Species Value LC50		EC50	72h	Algae o	or other aquatic plants	0	.2mg/l		2
LC50 96h Fish 0.078-0.108m NOEC(ECx) 72h Algae or other aquatic plants >100mg/l EC50 96h Algae or other aquatic plants 0.024mg/l Endpoint Test Duration (hr) Species Value EC50 72h Algae or other aquatic plants 0.036-0.049m BCF 1344h Fish 19-110 LC50 96h Fish 0.927-2.589m EC50 48h Crustacea 0.301-0.667m NOEC(ECx) 72h Algae or other aquatic plants 0.005mg/l EC50 96h Algae or other aquatic plants 0.3mg/l Inoleic acid/4,7,10-trioxa-1,13-tridecanediamine Inoleic a	aluminium oxide	EC50	48h	Crusta	cea	1.	.5mg/l		2
EC50 96h Algae or other aquatic plants 0.024mg/l		LC50	96h	Fish		0	.078-0.108mg	g/l	2
Endpoint Test Duration (hr) Species Value		NOEC(ECx)	72h	Algae o	or other aquatic plants	>	100mg/l		1
EC50 72h Algae or other aquatic plants 0.036-0.049m BCF 1344h Fish 19-110 LC50 96h Fish 0.927-2.589m EC50 48h Crustacea 0.301-0.667m NOEC(ECx) 72h Algae or other aquatic plants 0.005mg/l EC50 96h Algae or other aquatic plants 0.3mg/l Inoleic acid/4,7,10-trioxa-1,13-tridecanediamine Endpoint Test Duration (hr) Species Value		EC50	96h	96h Algae or other a		0	.024mg/l		2
BCF 1344h Fish 19-110		Endpoint	Test Duration (hr)	Specie	s	V	alue		Source
LC50 96h Fish 0.927-2.589m		-	` ,	Algae	or other aquatic plants	0	.036-0.049mg	g/l	4
EC50 48h Crustacea 0.301-0.667m NOEC(ECx) 72h Algae or other aquatic plants 0.005mg/l EC50 96h Algae or other aquatic plants 0.3mg/l linoleic acid/4,7,10-trioxa-1,13-tridecanediamine		BCF	1344h	Fish		1:	9-110		7
NOEC(ECx) 72h Algae or other aquatic plants 0.005mg/l EC50 96h Algae or other aquatic plants 0.3mg/l linoleic acid/4,7,10-trioxa- 1,13-tridecanediamine	zinc oxide	LC50	96h	Fish		0.	.927-2.589mg	g/l	4
EC50 96h Algae or other aquatic plants 0.3mg/l linoleic acid/4,7,10-trioxa- 1,13-tridecanediamine		EC50	48h	Crusta	cea	0.	.301-0.667mg	g/l	4
linoleic acid/4,7,10-trioxa- 1,13-tridecanediamine Endpoint Test Duration (hr) Species Value		NOEC(ECx)	72h	Algae o	or other aquatic plants	0	.005mg/l		2
1,13-tridecanediamine		EC50	96h	Algae o	or other aquatic plants	0.	.3mg/l		2
1,13-tridecanediamine									
Alai A affect A affec		Endpoint	Test Duration (hr)		Species	Value		Source	
		Not Available	Not Available		Not Available	Not Available	е	Not Availal	ble
all oil/ triethylenetetramine Endpoint Test Duration (hr) Species Value	athylenetetramine	Fordersins	Total Demotion (Inc.)	0			Value		Source

	101	O a diagonal	1.01g.	
				
EC50	48h	Crustacea	7.07mg/l	2
LC50	96h	Fish	7.07mg/l	2
EC50	72h	Algae or other aquatic plants	4.34mg/l	2
NOEC(ECx)	72h	Algae or other aquatic plants	0.5mg/l	2

diethylene glycol, di(3-aminopropyl) ether

Endpoint	Test Duration (hr)	Species	Value	Source
NOEC(ECx)	Not Available	Crustacea	>1mg/l	2
EC50	72h	Algae or other aquatic plants	>500mg/l	2
LC50	96h	Fish	>215<464mg/l	2
EC50	48h	Crustacea	218.16mg/l	2

propylene glycol monomethyl ether acetate, alpha-isomer

Endpoint	Test Duration (hr)	Species	Value	Source
EC50	72h	Algae or other aquatic plants	>1000mg/l	2
LC50	96h	Fish	>100mg/l	2
EC50	48h	Crustacea	373mg/l	2
NOEC(ECx)	336h	Fish	47.5mg/l	2
EC50	96h	Algae or other aquatic plants	>1000mg/l	2

triethylenetetramine

Endpoint	Test Duration (hr)	Species	Value	Source
ErC50	72h	Algae or other aquatic plants	2.5mg/l	1
LC50	96h	Fish	180mg/l	1
EC50	72h	Algae or other aquatic plants	2.5mg/l	1
EC50	48h	Crustacea	31.1mg/l	1
BCF	1008h	Fish	<0.5	7
EC10(ECx)	72h	Algae or other aquatic plants	0.67mg/l	1

carbon black

Endpoint	Test Duration (hr)	Species	Value	Source
EC50	72h	Algae or other aquatic plants	>0.2mg/l	2
LC50	96h	Fish	>100mg/l	2
EC50	48h	Crustacea	33.076-41.968mg/l	4
NOEC(ECx)	24h	Crustacea	3200mg/l	1

Legend:

Extracted from 1. IUCLID Toxicity Data 2. Europe ECHA Registered Substances - Ecotoxicological Information - Aquatic Toxicity 3. EPIWIN Suite V3.12 (QSAR) - Aquatic Toxicity Data (Estimated) 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

Very 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. For zinc and its compounds:

Environmental fate:

Zinc is capable of forming complexes with a variety of organic and inorganic groups (ligands). Biological activity can affect the mobility of zinc in the aquatic environment, although the biota contains relatively little zinc compared to the sediments. Zinc bioconcentrates moderately in aquatic organisms; bioconcentration is higher in crustaceans and bivalve species than in fish. Zinc does not concentrate appreciably in plants, and it does not biomagnify significantly through terrestrial food chains.

However biomagnification may be of concern if concentration of zinc exceeds 1632 ppm in the top 12 inches of soil.

Zinc can persist in water indefinitely and can be toxic to aquatic life. The threshold concentration for fish is 0.1 ppm. Zinc may be concentrated in the aquatic food chain; it is concentrated over 200,000 times in oysters. Copper is synergistic but calcium is antagonistic to zinc toxicity in fish. Zinc can accumulate in freshwater animals at 5 -1,130 times the concentration present in the water. Furthermore, although zinc actively bioaccumulates in aquatic systems, biota appears to represent a relatively minor sink compared to sediments. Steady-state zinc bioconcentration factors (BCFs) for 12 aquatic species range from 4 to 24,000. Crustaceans and fish can accumulate zinc from both water and food. A BCF of 1,000 was reported for both aquatic plants and fish, and a value of 10,000 was reported for aquatic invertebrates. The order of enrichment of zinc in different aquatic organisms was as follows (zinc concentrations in µg/g dry weight appear in parentheses): fish (25), shrimp (50), mussel (60), periphyton (260), zooplankton (330), and oyster (3,300). The high enrichment in oysters may be due to their ingestion of particulate matter containing higher concentrations of zinc than ambient water. Other investigators have also indicated that organisms associated with sediments have higher zinc concentrations than organisms living in the aqueous layer. With respect to bioconcentration from soil by terrestrial plants, invertebrates, and mammals, BCFs of 0.4, 8, and 0.6, respectively, have been reported. The concentration of zinc in plants depends on the plant species, soil pH, and the composition of the soil.

Plant species do not concentrate zinc above the levels present in soil.

In some fish, it has been observed that the level of zinc found in their bodies did not directly relate to the exposure concentrations. Bioaccumulation of zinc in fish is inversely related to the aqueous exposure. This evidence suggests that fish placed in environments with lower zinc concentrations can sequester zinc in their bodies.

The concentration of zinc in drinking water may increase as a result of the distribution system and household plumbing. Common piping materials used in distribution systems often contain zinc, as well as other metals and alloys. Trace metals may enter the water through corrosion products or simply by the dissolution of small amounts of metals with which the water comes in contact. Reactions with materials of the distribution system, particularly in soft low-pH waters, very often have produced concentrations of zinc in tap water much greater than those in the raw or treated waters at the plant of origin. Zinc gives water a metallic taste at low levels. Overexposures to zinc also have been associated with toxic effects. Ingestion of zinc or zinc-containing compounds has resulted in a variety of systemic effects in the gastrointestinal and hematological systems and alterations in the blood lipid profile in humans and animals. In addition, lesions have been observed in the liver, pancreas, and kidneys of animals.

Environmental toxicity of zinc in water is dependent upon the concentration of other minerals and the pH of the solution, which affect the ligands that associate with zinc. Zinc occurs in the environment mainly in the +2 oxidation state. Sorption is the dominant reaction, resulting in the enrichment of zinc in suspended and bed sediments. Zinc in aerobic waters is partitioned into sediments through sorption onto hydrous iron and manganese oxides, clay minerals, and organic material. The efficiency of these materials in removing zinc from solution varies according to their concentrations, pH, redox potential (Eh), salinity, nature and concentrations of complexing ligands, cation exchange capacity, and the concentration of zinc. Precipitation of soluble zinc compounds appears to be significant only under reducing conditions in highly polluted water. Generally, at lower pH values, zinc remains as the free ion. The free ion (Zn+2) tends to be adsorbed and transported by suspended solids in unpolluted waters.

Zinc is an essential nutrient that is present in all organisms. Although biota appears to be a minor reservoir of zinc relative to soils and sediments, microbial decomposition of biota in water can produce ligands, such as humic acids, that can affect the mobility of zinc in the aquatic environment through zinc precipitation and adsorption.

The relative mobility of zinc in soil is determined by the same factors that affect its transport in aquatic systems (i.e., solubility of the compound, pH, and salinity)

The redox status of the soil may shift zinc partitioning. Reductive dissolution of iron and manganese (hydr)oxides under suboxic conditions release zinc into the aqueous phase; the persistence of suboxic conditions may then lead to a repartitioning of zinc into sulfide and carbonate solids. The mobility of zinc in soil depends on the solubility of the speciated forms of the element and on soil properties such as cation exchange capacity, pH, redox potential, and chemical species present in soil; under anaerobic conditions, zinc sulfide is the controlling species.

Since zinc sulfide is insoluble, the mobility of zinc in anaerobic soil is low. In a study of the effect of pH on zinc solubility: When the pH is <7, an inverse relationship exists between the pH and the amount of zinc in solution. As negative charges on soil surfaces increase with increasing pH, additional sites for zinc adsorption are activated and the amount of zinc in solution decreases. The active zinc species in the adsorbed state is the singly charged zinc hydroxide species (i.e., Zn[OH]+). Other investigators have also shown that the mobility of zinc in soil increases at lower soil pH under oxidizing conditions and at a lower cation exchange capacity of soil. On the other hand, the amount of zinc in solution generally increases when the pH is >7 in soils high in organic matter. This is a result of the release of organically complexed zinc, reduced zinc adsorption at higher pH, or an increase in the concentration of chelating agents in soil. For calcareous soils, the relationship between zinc solubility and pH is nonlinear. At a high pH, zinc in solution is precipitated as Zn(OH)2, zinc carbonate (ZnCO3), or calcium zincate. Clay and metal oxides are capable of sorbing zinc and tend to retard its mobility in soil. Zinc was more mobile at pH 4 than at pH 6.5 as a consequence of sorption

Zinc concentrations in the air are relatively low, except near industrial sources such as smelters. No estimate for the atmospheric lifetime of zinc is available at this time, but the fact that zinc is transported long distances in air indicates that its lifetime in air is at least on the order of days. There are few data regarding the speciation of zinc released to the atmosphere. Zinc is removed from the air by dry and wet deposition, but zinc particles with small diameters and low densities suspended in the atmosphere travel long distances from emission sources.

For aluminium and its compounds and salts:

Despite its prevalence in the environment, no known form of life uses aluminium salts metabolically. In keeping with its pervasiveness, aluminium is well tolerated by plants and animals. Owing to their prevalence, potential beneficial (or otherwise) biological roles of aluminium compounds are of continuing interest.

Environmental fate:

Aluminium occurs in the environment in the form of silicates, oxides and hydroxides, combined with other elements such as sodium, fluorine and arsenic complexes with organic matter.

Acidification of soils releases aluminium as a transportable solution. Mobilisation of aluminium by acid rain results in aluminium becoming available for plant uptake.

As an element, aluminium cannot be degraded in the environment, but may undergo various precipitation or ligand exchange reactions. Aluminium in compounds has only one oxidation state (+3), and would not undergo oxidation-reduction reactions under environmental conditions. Aluminium can be complexed by various ligands present in the environment (e.g., fulvic and humic acids). The solubility of aluminium in the environment will depend on the ligands present and the pH.

The trivalent aluminum ion is surrounded by six water molecules in solution. The hydrated aluminum ion, [Al(H2O)6]3+, undergoes hydrolysis, in which a stepwise deprotonation of the coordinated water ligands forms bound hydroxide ligands (e.g., [Al(H2O)5(OH)]2+, [Al(H2O)4(OH)2]+). The speciation of aluminum in water is pH dependent. The hydrated trivalent aluminum ion is the predominant form at pH levels below 4. Between pH 5 and 6, the predominant hydrolysis products are Al(OH)2+ and Al(OH)2+, while the solid Al(OH)3 is most prevalent between pH 5.2 and 8.8. The soluble species Al(OH)4- is the predominant species above pH 9, and is the only species present above pH 10. Polymeric aluminum hydroxides appear between pH 4.7 and 10.5, and increase in size until they are transformed into colloidal particles of amorphous Al(OH)3, which crystallise to gibbsite in acid waters. Polymerisation is affected by the presence of dissolved silica; when enough silica is present and because of this present aluminum by droxides appeared to the presence of th

Hydroxyaluminum compounds are considered amphoteric (e.g., they can act as both acids and bases in solution). Because of this property, aluminum hydroxides can act as buffers and resist pH changes within the narrow pH range of 4-5.

Monomeric aluminum compounds, typified by aluminum fluoride, chloride, and sulfate, are considered reactive or labile compounds, whereas polymeric aluminum species react much more slowly in the environment. Aluminum has a stronger attraction for fluoride in an acidic environment compared to other inorganic ligand.

The adsorption of aluminum onto clay surfaces can be a significant factor in controlling aluminum mobility in the environment, and these adsorption reactions, measured in one study at pH 3.0-4.1, have been observed to be very rapid. However, clays may act either as a sink or a source for soluble aluminum depending on the degree of aluminum saturation on the clay surface.

Within the pH range of 5-6, aluminum complexes with phosphate and is removed from solution. Because phosphate is a necessary nutrient in ecological systems, this immobilization of both aluminum and phosphate may result in depleted nutrient states in surface water.

Plant species and cultivars of the same species differ considerably in their ability to take up and translocate aluminum to above-ground parts. Tea leaves may contain very high concentrations of aluminum, >5,000 mg/kg in old leaves. Other plants that may contain high levels of aluminum include Lycopodium (Lycopodiaceae), a few ferns, Symplocos (Symplocaceae), and Orites (Proteaceae). Aluminum is often taken up and concentrated in root tissue. In sub-alpine ecosystems, the large root biomass of the Douglas fir, Abies amabilis, takes up aluminum and immobilizes it, preventing large accumulation in above-ground tissue. It is unclear to what extent aluminum is taken up into root food crops and leafy vegetables. An uptake factor (concentration of aluminum in the plant/concentration of aluminum in soil) of 0.004 for leafy vegetables and 0.00065 for fruits and tubers has been reported, but the pH and plant species from which these uptake factors were derived are unclear. Based upon these values, however, it is clear that aluminum is not taken up in plants from soil. but is instead biodiluted.

Aluminum concentrations in rainbow trout from an alum-treated lake, an untreated lake, and a hatchery were highest in gill tissue and lowest in muscle. Aluminum residue analyses in brook trout have shown that whole-body aluminum content decreases as the fish advance from larvae to juveniles. These results imply that the aging larvae begin to decrease their rate of aluminum uptake, to eliminate aluminum at a rate that exceeds uptake, or to maintain approximately the same amount of aluminum while the body mass increases. The decline in whole-body aluminum residues in juvenile brook trout may be related to growth and dilution by edible muscle tissue that accumulated less aluminum than did the other tissues. The greatest fraction of the gill-associated aluminum was not sorbed to the gill tissue, but to the gill mucus. It is thought that mucus appears to retard aluminum transport from solution to the membrane surface, thus delaying the acute biological response of the fish. It has been reported that concentrations of aluminum in whole-body tissue of the Atlantic salmon exposed to high concentrations of aluminum ranging from 3 ug/g (for fish exposed to 33 ug/L) to 96 ug/g (for fish exposed to 264 ug/L) at pH 5.5. After 60 days of exposure, BCFs ranged from 76 to 190 and were directly related to the aluminum exposure concentration. In acidic waters (pH 4.6-5.3) with low concentrations of calcium (0.5-1.5 mg Ca/L), labile aluminum between 25 and 75 ug/L is toxic. Because aluminum is toxic to many aquatic species, it is not bioaccumulated to a significant degree (BCF <300) in most fish and shellfish;

therefore, consumption of contaminated fish does not appear to be a significant source of aluminum exposure in humans.

Bioconcentration of aluminum has also been reported for several aquatic invertebrate species. BCF values ranging from 0.13 to 0.5 in the whole-body were reported for the snail. Bioconcentration of aluminum has also been reported for aquatic insects.

Ecotoxicity:

Freshwater species pH >6.5

Fish: Acute LC50 (48-96 h) 5 spp: 0.6 (Salmo salar) - 106 mg/L; Chronic NOEC (8-28 d): 7 spp,NOEC, 0.034-7.1 mg/L. The lowest measured chronic figure was an 8-d LC50 of 0.17 mg/L for Micropletus sp

Amphibian: Acute LC50 (4 d): *Bufo americanus*, 0.86-1.66 mg/L; Chronic LC50 (8-d) 2.28 mg/L Crustaceans LC50 (48 h): 1 sp 2.3-36 9 mg/L; Chronic NOEC (7-28 d) 3 spp, 0.136-1.72 mg/L

Algae EC50 (96 h): population growth, 0.46-0.57 mg/L; 2 spp, chronic NOEC, 0.8-2.0 mg/L

Freshwater species pH <6.5 (all between pH 4.5 and 6.0)

Fish LC50 (24-96 h): 4 spp, 0.015 (S. trutta) - 4.2 mg/L; chronic data on Salmo trutta, LC50 (21-42 d) 0.015- 0.105 mg/L

Amphibians LC50 (4-5 d): 2 spp, 0.540-2.670 m/L (absolute range 0.40-5.2 mg/L)

Alga: 1 sp NOEC growth 2.0 mg/L

Among freshwater aquatic plants, single-celled plants are generally the most sensitive to aluminium. Fish are generally more sensitive to aluminium than aquatic invertebrates. Aluminium is a gill toxicant to fish, causing both ionoregulatory and respiratory effects.

The bioavailability and toxicity of aluminium is generally greatest in acid solutions. Aluminium in acid habitats has been observed to be toxic to fish and phytoplankton. Aluminium is generally more toxic over the pH range 4.4.5.4, with a maximum toxicity occurring around pH 5.0.5.2. The inorganic single unit aluminium species (Al(OH)2 +) is thought to be the most toxic. Under very acid conditions, the toxic effects of the high H+ concentration appear to be more important than the effects of low concentrations of aluminium; at approximately neutral pH values, the toxicity of aluminium is greatly reduced. The solubility of aluminium is also enhanced under alkaline conditions, due to its amphoteric character, and some researchers found that the acute toxicity of aluminium increased from pH 7 to pH 9. However, the opposite relationship was found in other studies. The uptake and toxicity of aluminium in freshwater organisms generally decreases with increasing water hardness under acidic, neutral and alkaline conditions. Complexing agents such as fluoride, citrate and humic substances reduce the availability of aluminium to organisms, resulting in lower toxicity. Silicon can also reduce aluminium toxicity to fish.

aluminium: 200 ug/l (UK max.) 200 ug/l (WHO guideline) chloride: 400 mg/l (UK max.) 250 mg/l (WHO guideline) fluoride: 1.5 mg/l (UK max.)

Drinking Water Standards:

1.5 mg/l (WHO guideline)
nitrate: 50 mg/l (UK max.)
50 mg/l (WHO guideline)
sulfate: 250 mg/l (UK max.)
Soil Guideline: none available.
Air Quality Standards: none available.
DO NOT discharge into sewer or waterways.

12.2. Persistence and degradability

Ingredient	Persistence: Water/Soil	Persistence: Air
diethylene glycol, di(3-aminopropyl) ether	HIGH	HIGH
propylene glycol monomethyl ether acetate, alpha-isomer	LOW	LOW
triethylenetetramine	LOW	LOW

12.3. Bioaccumulative potential

Ingredient	Bioaccumulation
zinc oxide	LOW (BCF = 217)
diethylene glycol, di(3-aminopropyl) ether	LOW (LogKOW = -1.4594)
propylene glycol monomethyl ether acetate, alpha-isomer	LOW (LogKOW = 0.56)
triethylenetetramine	LOW (BCF = 5)

12.4. Mobility in soil

Ingredient	Mobility
diethylene glycol, di(3-aminopropyl) ether	LOW (KOC = 10)
propylene glycol monomethyl ether acetate, alpha-isomer	HIGH (KOC = 1.838)
triethylenetetramine	LOW (KOC = 309.9)

12.5. Results of PBT and vPvB assessment

	P	В	Т	
Relevant available data	Not Available	Not Available	Not Available	
PBT	X	×	×	
vPvB	×	×	×	
PBT Criteria fulfilled?				
vPvB			No	

12.6. Endocrine Disruption Properties

Not Available

12.7. Other adverse effects

Not Available

SECTION 13 Disposal considerations

13.1. Waste treatment methods

Product / Packaging disposal	 Containers may still present a chemical hazard/ danger when empty. Return to supplier for reuse/ recycling if possible. Otherwise: If container can not be cleaned sufficiently well to ensure that residuals do not remain or if the container cannot be used to store the same product, then puncture containers, to prevent re-use, and bury at an authorised landfill. Where possible retain label warnings and SDS and observe all notices pertaining to the product. DO NOT allow wash water from cleaning or process equipment to enter drains. It may be necessary to collect all wash water for treatment before disposal. In all cases disposal to sewer may be subject to local laws and regulations and these should be considered first. Where in doubt contact the responsible authority.
Waste treatment options	Not Available
Sewage disposal options	Not Available

SECTION 14 Transport information

Labels Required

For 8329TCS-6ML, 8329TCS-50ML, 8329TCS-200ML
NOT REGULATED by Ground ADR Special Provision 375
NOT REGULATED by Air IATA Special Provision A197
NOT REGULATED by Sea IMDG per 2.10.2.7
NOT REGULATED by ADN Special Provision 274 (The provision of 3.1.2.8 apply)

Land transport (ADR-RID)

14.1. UN number	3077		
14.2. UN proper shipping name	ENVIRONMENTALLY HAZARDOUS SUBSTANCE, SOLID, N.O.S. (contains zinc oxide)		
14.3. Transport hazard class(es)	Class 9 Subrisk Not Applicable		
14.4. Packing group			
14.5. Environmental hazard	Environmentally hazardous		
14.6. Special precautions for user	Hazard identification (Kemler)	90	
	Classification code	M7	
	Hazard Label	9	
	Special provisions	274 335 375 601	
	Limited quantity	5 kg	
	Tunnel Restriction Code	3 (-)	

Air transport (ICAO-IATA / DGR)

14.1. UN number	3077			
14.2. UN proper shipping name	Environmentally hazardous substance, solid, n.o.s. * (contains zinc oxide)			
	ICAO/IATA Class	9		
14.3. Transport hazard class(es)	ICAO / IATA Subrisk	Not Applicable		
()	ERG Code	9L		
14.4. Packing group	III			
14.5. Environmental hazard	Environmentally hazardous			
	Special provisions		A97 A158 A179 A197 A215	
14.6. Special precautions for user	Cargo Only Packing In	structions	956	
	Cargo Only Maximum	Qty / Pack	400 kg	
	Passenger and Cargo Packing Instructions		956	
	Passenger and Cargo Maximum Qty / Pack		400 kg	
	Passenger and Cargo	Limited Quantity Packing Instructions	Y956	
	Passenger and Cargo	Limited Maximum Qty / Pack	30 kg G	

Sea transport (IMDG-Code / GGVSee)

14.1. UN number	3077	
14.2. UN proper shipping name	ENVIRONMENTALLY HAZARDOUS SUBSTANCE, SOLID, N.O.S. (contains zinc oxide)	
14.3. Transport hazard class(es)	IMDG Class 9 IMDG Subrisk Not Applicable	
14.4. Packing group	III	
14.5. Environmental hazard	Marine Pollutant	
14.6. Special precautions for user	EMS Number F-A , S-F Special provisions 274 335 966 967 969 Limited Quantities 5 kg	

Inland waterways transport (ADN)

14.1. UN number	3077	
14.2. UN proper shipping name	ENVIRONMENTALLY HAZARDOUS SUBSTANCE, SOLID, N.O.S. (contains zinc oxide)	
14.3. Transport hazard class(es)	9 Not Applicable	
14.4. Packing group		
14.5. Environmental hazard	Environmentally hazardous	

	Classification code	M7
	Special provisions	274; 335; 375; 601
14.6. Special precautions for user	Limited quantity	5 kg
400.	Equipment required	PP, A***
	Fire cones number	0

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

Not Applicable

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

14.0. Italisport in baik in accordance with making of Amick V and the imobe odde		
Product name	Group	
aluminium oxide	Not Available	
zinc oxide	Not Available	
linoleic acid/4,7,10-trioxa- 1,13-tridecanediamine polyamid	Not Available	
tall oil/ triethylenetetramine polyamides	Not Available	
diethylene glycol, di(3-aminopropyl) ether	Not Available	
propylene glycol monomethyl ether acetate, alpha-isomer	Not Available	
triethylenetetramine	Not Available	
carbon black	Not Available	

14.9. Transport in bulk in accordance with the ICG Code

Product name	Ship Type
aluminium oxide	Not Available
zinc oxide	Not Available
linoleic acid/4,7,10-trioxa- 1,13-tridecanediamine polyamid	Not Available
tall oil/ triethylenetetramine polyamides	Not Available
diethylene glycol, di(3-aminopropyl) ether	Not Available
propylene glycol monomethyl ether acetate, alpha-isomer	Not Available
triethylenetetramine	Not Available
carbon black	Not Available

SECTION 15 Regulatory information

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

aluminium oxide is found on the following regulatory lists

Chemical Footprint Project - Chemicals of High Concern List Europe EC Inventory European Union - European Inventory of Existing Commercial Chemical Substances (EINECS)

zinc oxide is found on the following regulatory lists

EU European Chemicals Agency (ECHA) Community Rolling Action Plan (CoRAP) List of Substances

Europe EC Inventory

European Union - European Inventory of Existing Commercial Chemical Substances (EINECS)

European Union (EU) Regulation (EC) No 1272/2008 on Classification, Labelling and Packaging of Substances and Mixtures - Annex VI

linoleic acid/4,7,10-trioxa-1,13-tridecanediamine polyamid is found on the following regulatory lists

Not Applicable

tall oil/ triethylenetetramine polyamides is found on the following regulatory lists

Europe EC Inventory

diethylene glycol, di(3-aminopropyl) ether is found on the following regulatory lists

Europe EC Inventory

Europe EC Inventory

European Union - European Inventory of Existing Commercial Chemical Substances (EINECS)

propylene glycol monomethyl ether acetate, alpha-isomer is found on the following regulatory lists

EU Consolidated List of Indicative Occupational Exposure Limit Values (IOELVs)
EU REACH Regulation (EC) No 1907/2006 - Annex XVII - Restrictions on the
manufacture, placing on the market and use of certain dangerous substances, mixtures
and articles

European Union - European Inventory of Existing Commercial Chemical Substances (EINECS)

European Union (EU) Regulation (EC) No 1272/2008 on Classification, Labelling and Packaging of Substances and Mixtures - Annex VI

triethylenetetramine is found on the following regulatory lists

Europe EC Inventory

European Union - European Inventory of Existing Commercial Chemical Substances (EINECS)

European Union (EU) Regulation (EC) No 1272/2008 on Classification, Labelling and Packaging of Substances and Mixtures - Annex VI

carbon black is found on the following regulatory lists

Chemical Footprint Project - Chemicals of High Concern List

EU European Chemicals Agency (ECHA) Community Rolling Action Plan (CoRAP) List of Substances

Europe EC Inventory

European Union - European Inventory of Existing Commercial Chemical Substances (EINECS)

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

International WHO List of Proposed Occupational Exposure Limit (OEL) Values for Manufactured Nanomaterials (MNMS)

This safety data sheet is in compliance with the following EU legislation and its adaptations - as far as applicable - : Directives 98/24/EC, - 92/85/EEC, - 94/33/EC, - 2008/98/EC, - 2010/75/EU; Commission Regulation (EU) 2020/878; Regulation (EC) No 1272/2008 as updated through ATPs.

15.2. Chemical safety assessment

No Chemical Safety Assessment has been carried out for this substance/mixture by the supplier.

National Inventory Status

National Inventory	Status
Australia - AIIC / Australia Non-Industrial Use	Yes
Canada - DSL	Yes
Canada - NDSL	No (aluminium oxide; linoleic acid/4,7,10-trioxa-1,13-tridecanediamine polyamid; tall oil/ triethylenetetramine polyamides; propylene glycol monomethyl ether acetate, alpha-isomer; triethylenetetramine; carbon black)
China - IECSC	Yes
Europe - EINEC / ELINCS / NLP	No (linoleic acid/4,7,10-trioxa-1,13-tridecanediamine polyamid)
Japan - ENCS	No (linoleic acid/4,7,10-trioxa-1,13-tridecanediamine polyamid; tall oil/ triethylenetetramine polyamides)
Korea - KECI	Yes
New Zealand - NZIoC	Yes
Philippines - PICCS	Yes
USA - TSCA	Yes
Taiwan - TCSI	Yes
Mexico - INSQ	No (linoleic acid/4,7,10-trioxa-1,13-tridecanediamine polyamid; diethylene glycol, di(3-aminopropyl) ether)
Vietnam - NCI	No (linoleic acid/4,7,10-trioxa-1,13-tridecanediamine polyamid)
Russia - FBEPH	No (linoleic acid/4,7,10-trioxa-1,13-tridecanediamine polyamid; tall oil/ triethylenetetramine polyamides)
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	10/12/2021
Initial Date	04/03/2020

Full text Risk and Hazard codes

H226	Flammable liquid and vapour.	
H312	Harmful in contact with skin.	
H314	Causes severe skin burns and eye damage.	
H318	Causes serious eye damage.	
H351	Suspected of causing cancer.	
H400	Very toxic to aquatic life.	
H412	Harmful to aquatic life with long lasting effects.	

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. For detailed advice on Personal Protective Equipment, refer to the following EU CEN Standards:

EN 166 Personal eye-protection

EN 340 Protective clothing

EN 374 Protective gloves against chemicals and micro-organisms

EN 13832 Footwear protecting against chemicals

EN 133 Respiratory protective devices

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

Reason For Change

A-2.00 - Modifications to the safety data sheet and added UFI number