



## DURAM FINESSE

### Duram Pty Ltd

Chemwatch: 5240-76

Version No: 3.1.8.7

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

Chemwatch Hazard Alert Code: 1

Issue Date: 01/11/2019

Print Date: 22/06/2021

L.GHS.AUS.EN

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

### Product Identifier

Product name	DURAM FINESSE
Chemical Name	Not Applicable
Synonyms	paint
Chemical formula	Not Applicable
Other means of identification	Not Available

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

Relevant identified uses	Paint.
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### Details of the supplier of the safety data sheet

Registered company name	Duram Pty Ltd
Address	51 Prince William Drive Seven Hills NSW 2147 Australia
Telephone	+61 2 9624 4007
Fax	+61 2 9624 4079
Website	<a href="http://www.duram.com.au">www.duram.com.au</a>
Email	mail@duram.com.au

### Emergency telephone number

Association / Organisation	CHEMTREC Australia (Sydney)
Emergency telephone numbers	+612 9037 2994 24 hours / 7 days
Other emergency telephone numbers	Not Available

## SECTION 2 Hazards identification

### Classification of the substance or mixture

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

### ChemWatch Hazard Ratings

	Min	Max
Flammability	0	
Toxicity	1	
Body Contact	1	
Reactivity	1	
Chronic	0	

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

Poisons Schedule	Not Applicable
Classification [1]	Chronic Aquatic Hazard Category 3
Legend:	1. Classified by Chemwatch; 2. Classification drawn from HCIS; 3. Classification drawn from Regulation (EU) No 1272/2008 - Annex VI

### Label elements

Hazard pictogram(s)	Not Applicable
Signal word	Not Applicable

### Hazard statement(s)

H412	Harmful to aquatic life with long lasting effects.
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**Precautionary statement(s) Prevention**

<b>P273</b>	Avoid release to the environment.
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**Precautionary statement(s) Response**

Not Applicable

**Precautionary statement(s) Storage**

Not Applicable

**Precautionary statement(s) Disposal**

<b>P501</b>	Dispose of contents/container to authorised hazardous or special waste collection point in accordance with any local regulation.
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**SECTION 3 Composition / information on ingredients****Substances**

See section below for composition of Mixtures

**Mixtures**

CAS No	%[weight]	Name
14808-60-7	30-60	<u>silica crystalline - quartz</u>
471-34-1	10-30	<u>calcium carbonate</u>
Not Available	<10	<u>acrylic polymer</u>
13463-67-7	<10	<u>titanium dioxide</u>
98-55-5	<1	<u>alpha-terpineol</u>
Not Available	balance	Ingredients determined not to be hazardous
<b>Legend:</b>		1. Classified by Chemwatch; 2. Classification drawn from HCIS; 3. Classification drawn from Regulation (EU) No 1272/2008 - Annex VI; 4. Classification drawn from C&L; * EU IOELVs available

**SECTION 4 First aid measures****Description of first aid measures**

<b>Eye Contact</b>	<p>If this product comes in contact with the eyes:</p> <ul style="list-style-type: none"> <li>▶ Wash out immediately with fresh running water.</li> <li>▶ 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.</li> <li>▶ Seek medical attention without delay; if pain persists or recurs seek medical attention.</li> <li>▶ Removal of contact lenses after an eye injury should only be undertaken by skilled personnel.</li> </ul>
<b>Skin Contact</b>	<p>If skin contact occurs:</p> <ul style="list-style-type: none"> <li>▶ Immediately remove all contaminated clothing, including footwear.</li> <li>▶ Flush skin and hair with running water (and soap if available).</li> <li>▶ Seek medical attention in event of irritation.</li> </ul>
<b>Inhalation</b>	<ul style="list-style-type: none"> <li>▶ If fumes, aerosols or combustion products are inhaled remove from contaminated area.</li> <li>▶ Other measures are usually unnecessary.</li> </ul>
<b>Ingestion</b>	<ul style="list-style-type: none"> <li>▶ <b>If swallowed do NOT induce vomiting.</b></li> <li>▶ If vomiting occurs, lean patient forward or place on left side (head-down position, if possible) to maintain open airway and prevent aspiration.</li> <li>▶ Observe the patient carefully.</li> <li>▶ Never give liquid to a person showing signs of being sleepy or with reduced awareness; i.e. becoming unconscious.</li> <li>▶ Give water to rinse out mouth, then provide liquid slowly and as much as casualty can comfortably drink.</li> <li>▶ Seek medical advice.</li> </ul>

**Indication of any immediate medical attention and special treatment needed**

Treat symptomatically.

For acute or short term repeated exposures to ethylene glycol:

- ▶ Early treatment of ingestion is important. Ensure emesis is satisfactory.
- ▶ Test and correct for metabolic acidosis and hypocalcaemia.
- ▶ Apply sustained diuresis when possible with hypertonic mannitol.
- ▶ Evaluate renal status and begin haemodialysis if indicated. [I.L.O]
- ▶ Rapid absorption is an indication that emesis or lavage is effective only in the first few hours. Cathartics and charcoal are generally not effective.
- ▶ Correct acidosis, fluid/electrolyte balance and respiratory depression in the usual manner. Systemic acidosis (below 7.2) can be treated with intravenous sodium bicarbonate solution.
- ▶ Ethanol therapy prolongs the half-life of ethylene glycol and reduces the formation of toxic metabolites.
- ▶ Pyridoxine and thiamine are cofactors for ethylene glycol metabolism and should be given (50 to 100 mg respectively) intramuscularly, four times per day for 2 days.
- ▶ Magnesium is also a cofactor and should be replenished. The status of 4-methylpyrazole, in the treatment regime, is still uncertain. For clearance of the material and its metabolites, haemodialysis is much superior to peritoneal dialysis.

[Ellenhorn and Barceloux: Medical Toxicology]

It has been suggested that there is a need for establishing a new biological exposure limit before a workshift that is clearly below 100 mmol ethoxy-acetic acids per mole creatinine in morning urine of people occupationally exposed to ethylene glycol ethers. This arises from the finding that an increase in urinary stones may be associated with such exposures.

Laitinen J., et al: *Occupational & Environmental Medicine* 1996; 53, 595-600

**SECTION 5 Firefighting measures****Extinguishing media**

- ▶ There is no restriction on the type of extinguisher which may be used.
- ▶ Use extinguishing media suitable for surrounding area.

**Special hazards arising from the substrate or mixture**

<b>Fire Incompatibility</b>	<ul style="list-style-type: none"> <li>▶ Avoid contamination with oxidising agents i.e. nitrates, oxidising acids, chlorine bleaches, pool chlorine etc. as ignition may result</li> </ul>
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**Advice for firefighters**

<b>Fire Fighting</b>	<ul style="list-style-type: none"> <li>▶ Alert Fire Brigade and tell them location and nature of hazard.</li> <li>▶ Wear breathing apparatus plus protective gloves in the event of a fire.</li> <li>▶ Prevent, by any means available, spillage from entering drains or water courses.</li> <li>▶ Use fire fighting procedures suitable for surrounding area.</li> <li>▶ <b>DO NOT</b> approach containers suspected to be hot.</li> <li>▶ Cool fire exposed containers with water spray from a protected location.</li> <li>▶ If safe to do so, remove containers from path of fire.</li> <li>▶ Equipment should be thoroughly decontaminated after use.</li> </ul>
<b>Fire/Explosion Hazard</b>	<ul style="list-style-type: none"> <li>▶ Non combustible.</li> <li>▶ Not considered to be a significant fire risk.</li> <li>▶ Expansion or decomposition on heating may lead to violent rupture of containers.</li> <li>▶ Decomposes on heating and may produce toxic fumes of carbon monoxide (CO).</li> <li>▶ May emit acrid smoke.</li> </ul> <p>Decomposition may produce toxic fumes of: carbon dioxide (CO<sub>2</sub>) silicon dioxide (SiO<sub>2</sub>) other pyrolysis products typical of burning organic material. May emit poisonous fumes. May emit corrosive fumes.</p>
<b>HAZCHEM</b>	Not Applicable

**SECTION 6 Accidental release measures****Personal precautions, protective equipment and emergency procedures**

See section 8

**Environmental precautions**

See section 12

**Methods and material for containment and cleaning up**

<b>Minor Spills</b>	<ul style="list-style-type: none"> <li>▶ Clean up all spills immediately.</li> <li>▶ Avoid breathing vapours and contact with skin and eyes.</li> <li>▶ Control personal contact with the substance, by using protective equipment.</li> <li>▶ Contain and absorb spill with sand, earth, inert material or vermiculite.</li> <li>▶ Wipe up.</li> <li>▶ Place in a suitable, labelled container for waste disposal.</li> </ul>
<b>Major Spills</b>	<p>Moderate hazard.</p> <ul style="list-style-type: none"> <li>▶ Clear area of personnel and move upwind.</li> <li>▶ Alert Fire Brigade and tell them location and nature of hazard.</li> <li>▶ Wear breathing apparatus plus protective gloves.</li> <li>▶ Prevent, by any means available, spillage from entering drains or water course.</li> <li>▶ Stop leak if safe to do so.</li> <li>▶ Contain spill with sand, earth or vermiculite.</li> <li>▶ Collect recoverable product into labelled containers for recycling.</li> <li>▶ Neutralise/decontaminate residue (see Section 13 for specific agent).</li> <li>▶ Collect solid residues and seal in labelled drums for disposal.</li> <li>▶ Wash area and prevent runoff into drains.</li> <li>▶ After clean up operations, decontaminate and launder all protective clothing and equipment before storing and re-using.</li> <li>▶ If contamination of drains or waterways occurs, advise emergency services.</li> </ul>

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

**SECTION 7 Handling and storage****Precautions for safe handling**

<b>Safe handling</b>	<ul style="list-style-type: none"> <li>▶ <b>DO NOT allow clothing wet with material to stay in contact with skin</b></li> <li>▶ Avoid all personal contact, including inhalation.</li> <li>▶ Wear protective clothing when risk of exposure occurs.</li> <li>▶ Use in a well-ventilated area.</li> <li>▶ Prevent concentration in hollows and sumps.</li> <li>▶ <b>DO NOT enter confined spaces until atmosphere has been checked.</b></li> <li>▶ <b>DO NOT allow material to contact humans, exposed food or food utensils.</b></li> <li>▶ Avoid contact with incompatible materials.</li> <li>▶ <b>When handling, DO NOT eat, drink or smoke.</b></li> <li>▶ Keep containers securely sealed when not in use.</li> <li>▶ Avoid physical damage to containers.</li> <li>▶ Always wash hands with soap and water after handling.</li> <li>▶ Work clothes should be laundered separately. Launder contaminated clothing before re-use.</li> <li>▶ Use good occupational work practice.</li> <li>▶ Observe manufacturer's storage and handling recommendations contained within this SDS.</li> <li>▶ Atmosphere should be regularly checked against established exposure standards to ensure safe working conditions are maintained.</li> </ul>
<b>Other information</b>	<ul style="list-style-type: none"> <li>▶ Store in original containers.</li> <li>▶ Keep containers securely sealed.</li> <li>▶ Store in a cool, dry, well-ventilated area.</li> <li>▶ Store away from incompatible materials and foodstuff containers.</li> </ul>

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- ▶ Protect containers against physical damage and check regularly for leaks.
- ▶ Observe manufacturer's storage and handling recommendations contained within this SDS.

**Conditions for safe storage, including any incompatibilities**

<b>Suitable container</b>	<ul style="list-style-type: none"> <li>▶ Polyethylene or polypropylene container.</li> <li>▶ Packing as recommended by manufacturer.</li> <li>▶ Check all containers are clearly labelled and free from leaks.</li> </ul>
<b>Storage incompatibility</b>	▶ Avoid reaction with oxidising agents

**SECTION 8 Exposure controls / personal protection**

**Control parameters**

**Occupational Exposure Limits (OEL)**

**INGREDIENT DATA**

Source	Ingredient	Material name	TWA	STEL	Peak	Notes
Australia Exposure Standards	silica crystalline - quartz	Silica - Crystalline: Quartz (respirable dust)	0.05 mg/m3	Not Available	Not Available	Not Available
Australia Exposure Standards	calcium carbonate	Calcium carbonate	10 mg/m3	Not Available	Not Available	(a) This value is for inhalable dust containing no asbestos and < 1% crystalline silica.
Australia Exposure Standards	titanium dioxide	Titanium dioxide	10 mg/m3	Not Available	Not Available	(a) This value is for inhalable dust containing no asbestos and < 1% crystalline silica.

**Emergency Limits**

Ingredient	TEEL-1	TEEL-2	TEEL-3
silica crystalline - quartz	0.075 mg/m3	33 mg/m3	200 mg/m3
calcium carbonate	45 mg/m3	210 mg/m3	1,300 mg/m3
titanium dioxide	30 mg/m3	330 mg/m3	2,000 mg/m3
alpha-terpineol	59 mg/m3	650 mg/m3	1,000 mg/m3

Ingredient	Original IDLH	Revised IDLH
silica crystalline - quartz	25 mg/m3 / 50 mg/m3	Not Available
calcium carbonate	Not Available	Not Available
acrylic polymer	Not Available	Not Available
titanium dioxide	5,000 mg/m3	Not Available
alpha-terpineol	Not Available	Not Available

**Occupational Exposure Banding**

Ingredient	Occupational Exposure Band Rating	Occupational Exposure Band Limit
alpha-terpineol	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**

**Exposure controls**

<b>Appropriate engineering controls</b>	<p>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:</p> <p>Process controls which involve changing the way a job activity or process is done to reduce the risk.</p> <p>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.</p> <p>Employers may need to use multiple types of controls to prevent employee overexposure.</p> <p>Local exhaust ventilation usually required. If risk of overexposure exists, wear approved respirator. Correct fit is essential to obtain adequate protection. Supplied-air type respirator may be required in special circumstances. Correct fit is essential to ensure adequate protection. An approved self contained breathing apparatus (SCBA) may be required in some situations.</p> <p>Provide adequate ventilation in warehouse or closed storage area. Air contaminants generated in the workplace possess varying "escape" velocities which, in turn, determine the "capture velocities" of fresh circulating air required to effectively remove the contaminant.</p> <table border="1" style="width: 100%;"> <thead> <tr> <th>Type of Contaminant:</th> <th>Air Speed:</th> </tr> </thead> <tbody> <tr> <td>solvent, vapours, degreasing etc., evaporating from tank (in still air).</td> <td>0.25-0.5 m/s (50-100 f/min.)</td> </tr> <tr> <td>aerosols, fumes from pouring operations, intermittent container filling, low speed conveyer transfers, welding, spray drift, plating acid fumes, pickling (released at low velocity into zone of active generation)</td> <td>0.5-1 m/s (100-200 f/min.)</td> </tr> <tr> <td>direct spray, spray painting in shallow booths, drum filling, conveyer loading, crusher dusts, gas discharge (active generation into zone of rapid air motion)</td> <td>1-2.5 m/s (200-500 f/min.)</td> </tr> <tr> <td>grinding, abrasive blasting, tumbling, high speed wheel generated dusts (released at high initial velocity into zone of very high rapid air motion).</td> <td>2.5-10 m/s (500-2000 f/min.)</td> </tr> </tbody> </table> <p>Within each range the appropriate value depends on:</p> <table border="1" style="width: 100%;"> <tr> <td style="text-align: center;">Lower end of the range</td> <td style="text-align: center;">Upper end of the range</td> </tr> </table>	Type of Contaminant:	Air Speed:	solvent, vapours, degreasing etc., evaporating from tank (in still air).	0.25-0.5 m/s (50-100 f/min.)	aerosols, fumes from pouring operations, intermittent container filling, low speed conveyer transfers, welding, spray drift, plating acid fumes, pickling (released at low velocity into zone of active generation)	0.5-1 m/s (100-200 f/min.)	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.)	Lower end of the range	Upper end of the range
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	<p>1: Room air currents minimal or favourable to capture</p> <p>2: Contaminants of low toxicity or of nuisance value only.</p> <p>3: Intermittent, low production.</p> <p>4: Large hood or large air mass in motion</p>	<p>1: Disturbing room air currents</p> <p>2: Contaminants of high toxicity</p> <p>3: High production, heavy use</p> <p>4: Small hood-local control only</p>
	<p>Simple theory shows that air velocity falls rapidly with distance away from the opening of a simple extraction pipe. Velocity generally decreases with the square of distance from the extraction point (in simple cases). Therefore the air speed at the extraction point should be adjusted, accordingly, after reference to distance from the contaminating source. The air velocity at the extraction fan, for example, should be a minimum of 1-2 m/s (200-400 f/min) for extraction of solvents generated in a tank 2 meters distant from the extraction point. Other mechanical considerations, producing performance deficits within the extraction apparatus, make it essential that theoretical air velocities are multiplied by factors of 10 or more when extraction systems are installed or used.</p>	
<b>Personal protection</b>		
<b>Eye and face protection</b>	<ul style="list-style-type: none"> <li>▶ Safety glasses with side shields.</li> <li>▶ Chemical goggles.</li> <li>▶ 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]</li> </ul>	
<b>Skin protection</b>	See Hand protection below	
<b>Hands/feet protection</b>	<ul style="list-style-type: none"> <li>▶ Wear chemical protective gloves, e.g. PVC.</li> <li>▶ Wear safety footwear or safety gumboots, e.g. Rubber</li> </ul> <p><b>NOTE:</b></p> <ul style="list-style-type: none"> <li>▶ 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.</li> <li>▶ Contaminated leather items, such as shoes, belts and watch-bands should be removed and destroyed.</li> </ul> <p>The selection of suitable gloves does not only depend on the material, but also on further marks of quality which vary from manufacturer to manufacturer. Where the chemical is a preparation of several substances, the resistance of the glove material can not be calculated in advance and has therefore to be checked prior to the application.</p> <p>The exact break through time for substances has to be obtained from the manufacturer of the protective gloves and has to be observed when making a final choice.</p> <p>Personal hygiene is a key element of effective hand care. Gloves must only be worn on clean hands. After using gloves, hands should be washed and dried thoroughly. Application of a non-perfumed moisturiser is recommended.</p> <p>Suitability and durability of glove type is dependent on usage. Important factors in the selection of gloves include:</p> <ul style="list-style-type: none"> <li>· frequency and duration of contact,</li> <li>· chemical resistance of glove material,</li> <li>· glove thickness and</li> <li>· dexterity</li> </ul> <p>Select gloves tested to a relevant standard (e.g. Europe EN 374, US F739, AS/NZS 2161.1 or national equivalent).</p> <ul style="list-style-type: none"> <li>· 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.</li> <li>· 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.</li> <li>· Some glove polymer types are less affected by movement and this should be taken into account when considering gloves for long-term use.</li> <li>· Contaminated gloves should be replaced.</li> </ul> <p>As defined in ASTM F-739-96 in any application, gloves are rated as:</p> <ul style="list-style-type: none"> <li>· Excellent when breakthrough time &gt; 480 min</li> <li>· Good when breakthrough time &gt; 20 min</li> <li>· Fair when breakthrough time &lt; 20 min</li> <li>· Poor when glove material degrades</li> </ul> <p>For general applications, gloves with a thickness typically greater than 0.35 mm, are recommended.</p> <p>It should be emphasised that glove thickness is not necessarily a good predictor of glove resistance to a specific chemical, as the permeation efficiency of the glove will be dependent on the exact composition of the glove material. Therefore, glove selection should also be based on consideration of the task requirements and knowledge of breakthrough times.</p> <p>Glove thickness may also vary depending on the glove manufacturer, the glove type and the glove model. Therefore, the manufacturers' technical data should always be taken into account to ensure selection of the most appropriate glove for the task.</p> <p>Note: Depending on the activity being conducted, gloves of varying thickness may be required for specific tasks. For example:</p> <ul style="list-style-type: none"> <li>· 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.</li> <li>· 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</li> </ul> <p>Gloves must only be worn on clean hands. After using gloves, hands should be washed and dried thoroughly. Application of a non-perfumed moisturiser is recommended.</p>	
<b>Body protection</b>	See Other protection below	
<b>Other protection</b>	<ul style="list-style-type: none"> <li>▶ Overalls.</li> <li>▶ P.V.C apron.</li> <li>▶ Barrier cream.</li> <li>▶ Skin cleansing cream.</li> <li>▶ Eye wash unit.</li> </ul>	

**Recommended material(s)****GLOVE SELECTION INDEX**

Glove selection is based on a modified presentation of the:

**"Forsberg Clothing Performance Index"**.

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

**Respiratory protection**

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

Where the concentration of gas/particulates in the breathing zone, approaches or exceeds the "Exposure Standard" (or ES), respiratory protection is required.

Continued...

**generated** selection:  
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Material	CPI
BUTYL	C
NAT+NEOPR+NITRILE	C
NATURAL RUBBER	C
NEOPRENE	C
NITRILE	C
PE/EVAL/PE	C
PVA	C
PVC	C
SARANEX-23	C
VITON	C

\* 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.

Degree of protection varies with both face-piece and Class of filter; the nature of protection varies with Type of filter.

Required Minimum Protection Factor	Half-Face Respirator	Full-Face Respirator	Powered Air Respirator
up to 10 x ES	A-AUS P2	-	A-PAPR-AUS / Class 1 P2
up to 50 x ES	-	A-AUS / Class 1 P2	-
up to 100 x ES	-	A-2 P2	A-PAPR-2 P2 ^

^ - Full-face

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(SO<sub>2</sub>), G = Agricultural chemicals, K = Ammonia(NH<sub>3</sub>), Hg = Mercury, NO = Oxides of nitrogen, MB = Methyl bromide, AX = Low boiling point organic compounds(below 65 degC)

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

## SECTION 9 Physical and chemical properties

### Information on basic physical and chemical properties

<b>Appearance</b>	White liquid; does not mix with water.		
<b>Physical state</b>	Liquid	<b>Relative density (Water = 1)</b>	1.36
<b>Odour</b>	Not Available	<b>Partition coefficient n-octanol / water</b>	Not Available
<b>Odour threshold</b>	Not Available	<b>Auto-ignition temperature (°C)</b>	Not Applicable
<b>pH (as supplied)</b>	Not Applicable	<b>Decomposition temperature</b>	Not Applicable
<b>Melting point / freezing point (°C)</b>	Not Available	<b>Viscosity (cSt)</b>	Not Available
<b>Initial boiling point and boiling range (°C)</b>	100	<b>Molecular weight (g/mol)</b>	Not Applicable
<b>Flash point (°C)</b>	Not Applicable	<b>Taste</b>	Not Available
<b>Evaporation rate</b>	Not Available	<b>Explosive properties</b>	Not Available
<b>Flammability</b>	Not Applicable	<b>Oxidising properties</b>	Not Available
<b>Upper Explosive Limit (%)</b>	Not Applicable	<b>Surface Tension (dyn/cm or mN/m)</b>	Not Available
<b>Lower Explosive Limit (%)</b>	Not Applicable	<b>Volatile Component (%vol)</b>	Not Available
<b>Vapour pressure (kPa)</b>	Not Available	<b>Gas group</b>	Not Available
<b>Solubility in water</b>	Immiscible	<b>pH as a solution (%)</b>	Not Applicable
<b>Vapour density (Air = 1)</b>	Not Available	<b>VOC g/L</b>	Not Available

## SECTION 10 Stability and reactivity

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

## SECTION 11 Toxicological information

### Information on toxicological effects

<b>Inhaled</b>	The material is not thought to produce either adverse health effects or irritation of the respiratory tract following inhalation (as classified by EC Directives using animal models). Nevertheless, adverse systemic effects have been produced following exposure of animals by at least one other route and good hygiene practice requires that exposure be kept to a minimum and that suitable control measures be used in an occupational
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	setting.
<b>Ingestion</b>	Accidental ingestion of the material may be damaging to the health of the individual.
<b>Skin Contact</b>	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. 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.
<b>Eye</b>	The material may be irritating to the eye, with prolonged contact causing inflammation. Repeated or prolonged exposure to irritants may produce conjunctivitis.
<b>Chronic</b>	Limited evidence suggests that repeated or long-term occupational exposure may produce cumulative health effects involving organs or biochemical systems. There exists limited evidence that shows that skin contact with the material is capable either of inducing a sensitisation reaction in a significant number of individuals, and/or of producing positive response in experimental animals. There is some evidence that human exposure to the material may result in developmental toxicity. This evidence is based on animal studies where effects have been observed in the absence of marked maternal toxicity, or at around the same dose levels as other toxic effects but which are not secondary non-specific consequences of the other toxic effects.

DURAM FINESSE	TOXICITY	IRRITATION
	Not Available	Not Available
silica crystalline - quartz	TOXICITY	IRRITATION
	Oral(Rat) LD50; 500 mg/kg <sup>[2]</sup>	Not Available
calcium carbonate	TOXICITY	IRRITATION
	dermal (rat) LD50: >2000 mg/kg <sup>[1]</sup>	Eye (rabbit): 0.75 mg/24h - SEVERE
	Inhalation(Rat) LC50; >3 mg/l4h <sup>[1]</sup>	Eye: no adverse effect observed (not irritating) <sup>[1]</sup>
	Oral(Rat) LD50; >2000 mg/kg <sup>[1]</sup>	Skin (rabbit): 500 mg/24h-moderate Skin: no adverse effect observed (not irritating) <sup>[1]</sup>
acrylic polymer	TOXICITY	IRRITATION
	Not Available	Not Available
titanium dioxide	TOXICITY	IRRITATION
	dermal (hamster) LD50: >=10000 mg/kg <sup>[2]</sup>	Eye: no adverse effect observed (not irritating) <sup>[1]</sup>
	Inhalation(Rat) LC50; >2.28 mg/l4h <sup>[1]</sup>	Skin (human): 0.3 mg /3D (int)-mild *
alpha-terpineol	TOXICITY	IRRITATION
	dermal (rat) LD50: >2000 mg/kg <sup>[1]</sup>	Eye: adverse effect observed (irritating) <sup>[1]</sup>
	Oral(Mouse) LD50; 12.8 mg/kg <sup>[2]</sup>	Skin: adverse effect observed (irritating) <sup>[1]</sup>
<b>Legend:</b>	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	

<b>SILICA CRYSTALLINE - QUARTZ</b>	<p><b>WARNING:</b> For inhalation exposure <u>ONLY</u>: This substance has been classified by the IARC as Group 1: <b>CARCINOGENIC TO HUMANS</b></p> <p>The International Agency for Research on Cancer (IARC) has classified occupational exposures to <b>respirable</b> (&lt;5 um) crystalline silica as being carcinogenic to humans . This classification is based on what IARC considered sufficient evidence from epidemiological studies of humans for the carcinogenicity of inhaled silica in the forms of quartz and cristobalite. Crystalline silica is also known to cause silicosis, a non-cancerous lung disease.</p> <p>Intermittent exposure produces; focal fibrosis, (pneumoconiosis), cough, dyspnoea, liver tumours.</p> <p>* Millions of particles per cubic foot (based on impinger samples counted by light field techniques).</p> <p>NOTE : the physical nature of quartz in the product determines whether it is likely to present a chronic health problem. To be a hazard the material must enter the breathing zone as respirable particles.</p>
<b>CALCIUM CARBONATE</b>	<p>No evidence of carcinogenic properties. No evidence of mutagenic or teratogenic effects.</p> <p>The material may produce severe irritation to the eye causing pronounced inflammation. Repeated or prolonged exposure to irritants may produce conjunctivitis.</p> <p>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 the epidermis. Histologically there may be intercellular oedema of the spongy layer (spongiosis) and intracellular oedema of the epidermis.</p>
<b>TITANIUM DIOXIDE</b>	<p>* IUCLID</p> <p>Exposure to the material may result in a possible risk of irreversible effects. The material may produce mutagenic effects in man. This concern is raised, generally, on the basis of appropriate studies using mammalian somatic cells in vivo. Such findings are often supported by positive results from in vitro mutagenicity studies.</p> <p>For titanium dioxide:</p> <p>Humans can be exposed to titanium dioxide via inhalation, ingestion or dermal contact. In human lungs, the clearance kinetics of titanium dioxide is poorly characterized relative to that in experimental animals. (General particle characteristics and host factors that are considered to affect deposition and retention patterns of inhaled, poorly soluble particles such as titanium dioxide are summarized in the monograph on carbon</p>

black.) With regard to inhaled titanium dioxide, human data are mainly available from case reports that showed deposits of titanium dioxide in lung tissue as well as in lymph nodes. A single clinical study of oral ingestion of fine titanium dioxide showed particle size-dependent absorption by the gastrointestinal tract and large interindividual variations in blood levels of titanium dioxide. Studies on the application of sunscreens containing ultrafine titanium dioxide to healthy skin of human volunteers revealed that titanium dioxide particles only penetrate into the outermost layers of the stratum corneum, suggesting that healthy skin is an effective barrier to titanium dioxide. There are no studies on penetration of titanium dioxide in compromised skin.

Respiratory effects that have been observed among groups of titanium dioxide-exposed workers include decline in lung function, pleural disease with plaques and pleural thickening, and mild fibrotic changes. However, the workers in these studies were also exposed to asbestos and/or silica.

No data were available on genotoxic effects in titanium dioxide-exposed humans.

Many data on deposition, retention and clearance of titanium dioxide in experimental animals are available for the inhalation route. Titanium dioxide inhalation studies showed differences — both for normalized pulmonary burden (deposited mass per dry lung, mass per body weight) and clearance kinetics — among rodent species including rats of different size, age and strain. Clearance of titanium dioxide is also affected by pre-exposure to gaseous pollutants or co-exposure to cytotoxic aerosols. Differences in dose rate or clearance kinetics and the appearance of focal areas of high particle burden have been implicated in the higher toxic and inflammatory lung responses to intratracheally instilled vs inhaled titanium dioxide particles. Experimental studies with titanium dioxide have demonstrated that rodents experience dose-dependent impairment of alveolar macrophage-mediated clearance. Hamsters have the most efficient clearance of inhaled titanium dioxide. Ultrafine primary particles of titanium dioxide are more slowly cleared than their fine counterparts.

Titanium dioxide causes varying degrees of inflammation and associated pulmonary effects including lung epithelial cell injury, cholesterol granulomas and fibrosis. Rodents experience stronger pulmonary effects after exposure to ultrafine titanium dioxide particles compared with fine particles on a mass basis. These differences are related to lung burden in terms of particle surface area, and are considered to result from impaired phagocytosis and sequestration of ultrafine particles into the interstitium.

Fine titanium dioxide particles show minimal cytotoxicity to and inflammatory/pro-fibrotic mediator release from primary human alveolar macrophages in vitro compared with other particles. Ultrafine titanium dioxide particles inhibit phagocytosis of alveolar macrophages in vitro at mass dose concentrations at which this effect does not occur with fine titanium dioxide. In-vitro studies with fine and ultrafine titanium dioxide and purified DNA show induction of DNA damage that is suggestive of the generation of reactive oxygen species by both particle types. This effect is stronger for ultrafine than for fine titanium oxide, and is markedly enhanced by exposure to simulated sunlight/ultraviolet light.

#### Animal carcinogenicity data

Pigmentary and ultrafine titanium dioxide were tested for carcinogenicity by oral administration in mice and rats, by inhalation in rats and female mice, by intratracheal administration in hamsters and female rats and mice, by subcutaneous injection in rats and by intraperitoneal administration in male mice and female rats.

In one inhalation study, the incidence of benign and malignant lung tumours was increased in female rats. In another inhalation study, the incidences of lung adenomas were increased in the high-dose groups of male and female rats. Cystic keratinizing lesions that were diagnosed as squamous-cell carcinomas but re-evaluated as non-neoplastic pulmonary keratinizing cysts were also observed in the high-dose groups of female rats. Two inhalation studies in rats and one in female mice were negative.

Intratracheally instilled female rats showed an increased incidence of both benign and malignant lung tumours following treatment with two types of titanium dioxide. Tumour incidence was not increased in intratracheally instilled hamsters and female mice.

In-vivo studies have shown enhanced micronucleus formation in bone marrow and peripheral blood lymphocytes of intraperitoneally instilled mice. Increased Hpvt mutations were seen in lung epithelial cells isolated from titanium dioxide-instilled rats. In another study, no enhanced oxidative DNA damage was observed in lung tissues of rats that were intratracheally instilled with titanium dioxide. The results of most in-vitro genotoxicity studies with titanium dioxide were negative.

The material may produce moderate eye irritation leading to inflammation. Repeated or prolonged exposure to irritants may produce conjunctivitis.

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.

**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.

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 terpenoid tertiary alcohols and their related esters:

Substances assigned to this category, as part of the HPV Challenge Program, possess close structural relationships, similar physicochemical properties and participate in the same pathways of metabolic detoxification and have similar toxicologic potential.

**Acute Toxicity:** Oral and dermal LD50 values for members of this chemical category indicate a low order of both oral and dermal toxicity. All rabbit dermal, and mouse and rat oral LD50 values exceed 2000 mg/kg with the majority of values greater than 5000 mg/kg

**Repeat dose toxicity:** In a safety evaluation study, a 50/50 mixture of linalool and citronellol was fed to male and female rats (number and strain not specified) in the diet. The daily intake was calculated to be 50 mg/kg bw of each. Measurements of haematology, clinical chemistry, and urinalysis at weeks 6 and 12 showed no statistically significant differences between test and control groups. Histopathology revealed no dose-related lesions. A slight retardation of growth was observed in males only, but was concluded by the authors to be biologically insignificant

**Reproductive toxicity:** Four groups of 10 virgin CrI CD rats were administered 0,250,500, or 1000 mg/kg bw of an essential oil (coriander oil) known to contain 73% linalool by mass. The test material was given by gavage once daily, 7 days prior to cohabitation, through cohabitation (maximum of 7 days), gestation, delivery, and a 4-day post-parturition period. The duration of the study was 39 days. Maternal effects reported included increased body weight and increased food consumption at 250 mg/kg/d, a non-statistically significant decrease in body weight and food consumption and decreased gestation index and decreased length of gestation at 500 mg/kg/d, and a statistically significant decrease in body weight and food consumption, statistically significant decrease in gestation index, length of gestation, and litter size at 1000 mg/kg/d. The only effect on pups was a decrease in viability of pups at the highest dose level. The authors concluded that there were no effects observed in the dams at the low dose of 250 mg/kg bw/d or in the offspring at the 250 and 500 mg/kg bw/d levels. The authors concluded that the maternal NOEL was 250 mg/kg/d and the developmental NOEL was 500 mg/kg/d.

Four groups of 10 virgin CrI CD rats were administered 0,375,750, or 1500 mg/kg bw of an essential oil (cardamom oil) known to contain greater than 65 % tertiary terpenoid alcohols with 5 % alpha-terpineol acetate by mass. Maternal observations included a non-statistically significant decrease in body weight gain and food consumption at 375 mg/kg/d.

Mortality, clinical signs, a statistically significant decrease in body weight gain and food consumption, and gross lesions at necropsy were seen at 750 and 1500 mg/kg/d. The only effects on pups were a reduced body weight gain in pups at 750 and 1500 mg/kg/d and increased mortality at 1500 mg/kg/d. The authors concluded that there were no significant adverse effects in the dams or offspring at the 375 mg/kg/d dose. A maternal NOEL was reported to be less than 375 mg/kg/d based on reduced body weight gain and food consumption at 375 mg/kg/d and a developmental NOEL was reported to be 375 mg/kg/d

**Developmental toxicity:** A range finding study and follow-up teratology study was performed with pine oil. Pregnant CrI:CD(SD) BR rats were given 0, 50, 100, 500,750, or 1000 mg/kg/d by gavage in corn oil on days 6 to 20 of gestation. Laparotomies were performed, corpora lutea were counted, and the uterus of each rat was removed, weighed and then examined for number, placement and viability of implantations. Live foetuses were weighed, sexed and gross external alterations were identified. There were no deaths or abortions during the course of this study. Necropsy revealed no gross lesions. Maternal effects included local alopecia, decreased body weight gain and food consumption for the 3 highest dose levels. At 750 and 1000 mg/kg, average gravid uterine weight was reduced. In foetuses, decreased body weight was observed at dose levels of 100 mg/kg and above, and at dose levels of 500 and above there was a slight increase in average number of resorptions/litter.

#### ALPHA-TERPINEOL

In the follow-up teratology study, pregnant CrI:CD(SD) BR rats were given 0, 50, 600, or 1200 mg/kg/d by gavage in corn oil on days 6 to 20 of gestation. Six of the 25 rats in 1200 mg/kg dose group died and necropsies revealed that adrenal weights were significantly increased in these rats. At 1200 mg/kg/d, fetuses exhibited increased incidences of delayed ossification, delayed brain development, decreased weights, increased embryo-foetal mortality, and sunken eye bulge with associated soft and hard tissue findings, a dose that also resulted in maternal death and a low incidence of embryo-foetal death (resorption). The maternal and developmental NOEL for pine oil was greater than 50 mg/kg/d but less than 600 mg/kg/d

**Genotoxicity:** Mutagenicity/genotoxicity testing has been performed on six members of this chemical category, including a complete battery of in vitro genotoxicity tests using linalool. In nineteen separate in vitro tests on the mutagenicity and genotoxicity of terpenoid tertiary alcohols and related esters, all but two were negative. One of the positive results for linalool was observed in a rec assay using differences in growth rates in two strains of *Bacillus subtilis* as a measure of DNA changes. In contrast, no evidence of mutagenicity was observed in the same test at a higher concentrations nor was DNA damage observed in a rat hepatocyte UDS assay. The authors of the mouse lymphoma assay which gave a weak positive result for linalool, emphasized that positive results in this assay are commonly observed for polar substances in the absence of S-9 and may be associated with changes in physiologic culture conditions (pH and osmolality).

Based on a weight of evidence evaluation of the available in vitro and in vivo mutagenicity and genotoxicity assays on terpenoid tertiary alcohols and related esters, this group of flavouring substances would not be expected to exhibit a low genotoxic potential in vivo

**Metabolic fate:** Based on the results of hydrolysis, the reactivity of linalool in aqueous media, and data on metabolism it is concluded that members of this chemical category exhibit similar chemical and biochemical fate. The esters are readily hydrolyzed to the corresponding alcohols, linalool and alpha-terpineol. Linalool is then partially converted to alpha-terpineol mainly under acidic conditions. Alicyclic and aliphatic tertiary alcohols are efficiently detoxicated by two principal pathways: conjugation primarily with glucuronic acid and excretion primarily in urine, and omega-oxidation to eventually yield diacids and their reduced or hydrated analogs. These polar metabolites will be efficiently excreted primarily in the urine either unchanged or as the glucuronic acid conjugates. The physicochemical and toxicological properties of these substances are consistent with their known reactivity and common metabolic fate.

Esters belonging to this category can be hydrolysed to their corresponding terpenoid alcohol and organic acid. Hydrolysis can also be catalysed by a class of esters known as carboxylesterases or B-type esterases that predominated in hepatocytes.

Esters of tertiary terpenoid alcohols are readily hydrolyzed in animals, including fish. Once hydrolysed, the resulting alcohols undergo excretion unchanged or as the glucuronic acid conjugate. To a minor extent, CYP-450 mediated oxidation at the omega or omega-1 position yields polar oxidized metabolites capable of excretion primarily in the urine. Terpenoid alcohols formed in the gastrointestinal tract are readily absorbed.

During hydrolysis under acidic condition cyclisation may occur.

In humans and animals, terpenoid tertiary alcohols primarily conjugate with glucuronic acid and are excreted in the urine and feces. Terpenoid alcohols with unsaturation may also undergo allylic oxidation to form polar diol metabolites that may be excreted either free or conjugated. If the diol contains a primary alcohol function, it may undergo further oxidation to the corresponding carboxylic acid. In a minor pathway, the endocyclic alkene of alpha-terpineol is epoxidised and then hydrolyzed to yield a triol metabolite 1,2,8-trihydroxy-p-menthane which also has been reported in humans following inadvertent oral ingestion of a pine oil disinfectant containing alpha-terpineol.

Bicyclic tertiary alcohols are conjugated with glucuronic acid and excreted primarily in the urine. In rabbits the structurally related bicyclic tertiary alcohols thujyl alcohol (4-methyl-1-(1-methylethyl)bicyclo[3.1.0]-hexan-3-ol) and beta-santenol (2,3,7-trimethylbicyclo[2.2.1]-heptan-2-ol) are conjugated with glucuronic acid. In a metabolism study using the terpenoid tertiary alcohol trans-sobrerol, in humans, dogs, and rats, ten metabolites were isolated in urine, eight of which were characterised in humans. Two principle modes of metabolism were observed, allylic oxidation of the ring positions and alkyl substituents, and conjugation of the tertiary alcohol fractions with glucuronic acid. These metabolic patterns are common modes of converting tertiary and secondary terpenoid alcohols to polar metabolites, which are easily excreted in the urine and faeces. Menthol forms similar conjugation products in rats

Adverse reactions to fragrances in perfumes and in fragranced cosmetic products include allergic contact dermatitis, irritant contact dermatitis, photosensitivity, immediate contact reactions (contact urticaria), and pigmented contact dermatitis occur.

Intolerance to perfumes, by inhalation, may occur if the perfume contains a sensitising principal. Symptoms may vary from general illness, coughing, phlegm, wheezing, chest-tightness, headache, exertional dyspnoea, acute respiratory illness, hayfever, and other respiratory diseases (including asthma). Perfumes can induce hyper-reactivity of the respiratory tract without producing an IgE-mediated allergy or demonstrable respiratory obstruction. This was shown by placebo-controlled challenges of nine patients to "perfume mix". The same patients were also subject to perfume provocation, with or without a carbon filter mask, to ascertain whether breathing through a filter with active carbon would prevent symptoms. The patients breathed through the mouth, during the provocations, as a nose clamp was used to prevent nasal inhalation. The patient's earlier symptoms were verified; breathing through the carbon filter had no protective effect. The symptoms were not transmitted via the olfactory nerve but they may have been induced by trigeminal reflex via the respiratory tract or by the eyes.

Cases of occupational asthma induced by perfume substances such as isoamyl acetate, limonene, cinnamaldehyde and benzaldehyde, tend to give persistent symptoms even though the exposure is below occupational exposure limits.

Inhalation intolerance has also been produced in animals. The emissions of five fragrance products, for one hour, produced various combinations of sensory irritation, pulmonary irritation, decreases in expiratory airflow velocity as well as alterations of the functional observational battery indicative of neurotoxicity in mice. Neurotoxicity was found to be more severe after mice were repeatedly exposed to the fragrance products, being four brands of cologne and one brand of toilet water.

Contact allergy to fragrances is relatively common, affecting 1 to 3% of the general population, based on limited testing with eight common fragrance allergens and about 16 % of patients patch tested for suspected allergic contact dermatitis.

Contact allergy to fragrance ingredients occurs when an individual has been exposed, on the skin, to a sufficient degree of fragrance contact allergens. Contact allergy is a life-long, specifically altered reactivity in the immune system. This means that once contact allergy is developed, cells in the immune system will be present which can recognise and react towards the allergen. As a consequence, symptoms, i.e. allergic contact dermatitis, may occur upon re-exposure to the fragrance allergen(s) in question. Allergic contact dermatitis is an inflammatory skin disease characterised by erythema, swelling and vesicles in the acute phase. If exposure continues it may develop into a chronic condition with scaling and painful fissures of the skin. Allergic contact dermatitis to fragrance ingredients is most often caused by cosmetic products and usually involves the face and/or hands. It may affect fitness for work and the quality of life of the individual. Fragrance contact allergy has long been recognised as a frequent and potentially disabling problem. Prevention is possible as it is an environmental disease and if the environment is modified (e.g. by reduced use concentrations of allergens), the disease frequency and severity will decrease. Fragrance contact allergy is mostly non-occupational and related to the personal use of cosmetic products. Allergic contact dermatitis can be severe and widespread, with a significant impairment of quality of life and potential consequences for fitness for work. Thus, prevention of contact sensitisation to fragrances, both in terms of primary prevention (avoiding sensitisation) and secondary prevention (avoiding relapses of allergic contact dermatitis in those already sensitised), is an important objective of public health risk management measure.

**Hands:** Contact sensitisation may be the primary cause of hand eczema, or may be a complication of irritant or atopic hand eczema. The number of positive patch tests has been reported to correlate with the duration of hand eczema, indicating that long-standing hand eczema may often be complicated by sensitisation. Fragrance allergy may be a relevant problem in patients with hand eczema; perfumes are present in consumer products to which their hands are exposed. A significant relationship between hand eczema and fragrance contact allergy has been found in some studies based on patients investigated for contact allergy. However, hand eczema is a multi-factorial disease and the clinical significance of fragrance contact allergy in (severe) chronic hand eczema may not be clear.

**Axillae Bilateral axillary** (underarm) dermatitis may be caused by perfume in deodorants and, if the reaction is severe, it may spread down the arms and to other areas of the body. In individuals who consulted a dermatologist, a history of such first-time symptoms was significantly related to the later diagnosis of perfume allergy.

**Face** Facial eczema is an important manifestation of fragrance allergy from the use of cosmetic products (16). In men, after-shave products can cause an eczematous eruption of the beard area and the adjacent part of the neck and men using wet shaving as opposed to dry have been shown to have an increased risk of being fragrance allergic.

**Irritant reactions (including contact urticaria):** Irritant effects of some individual fragrance ingredients, e.g. citral are known. Irritant contact dermatitis from perfumes is believed to be common, but there are no existing investigations to substantiate this. Many more people complain about intolerance or rashes to perfumes/perfumed products than are shown to be allergic by testing. This may be due to irritant effects or inadequate diagnostic procedures. Fragrances may cause a dose-related contact urticaria of the non-immunological type (irritant contact

urticaria). Cinnamal, cinnamic alcohol, and Myroxylon pereirae are well recognised causes of contact urticaria, but others, including menthol, vanillin and benzaldehyde have also been reported. The reactions to Myroxylon pereirae may be due to cinnamates. A relationship to delayed contact hypersensitivity was suggested, but no significant difference was found between a fragrance-allergic group and a control group in the frequency of immediate reactions to fragrance ingredients in keeping with a nonimmunological basis for the reactions seen.

**Pigmentary anomalies:** The term "pigmented cosmetic dermatitis" was introduced in 1973 for what had previously been known as melanosis faciei feminae when the mechanism (type IV allergy) and causative allergens were clarified. It refers to increased pigmentation, usually on the face/neck, often following sub-clinical contact dermatitis. Many cosmetic ingredients were patch tested at non-irritant concentrations and statistical evaluation showed that a number of fragrance ingredients were associated: jasmine absolute, ylang-ylang oil, cananga oil, benzyl salicylate, hydroxycitronellal, sandalwood oil, geraniol, geranium oil.

**Photo-reactions** Musk ambrette produced a considerable number of allergic photocontact reactions (in which UV-light is required) in the 1970s and was later banned from use in the EU. Nowadays, photoallergic contact dermatitis is uncommon. Furocoumarins (psoralens) in some plant-derived fragrance ingredients caused phototoxic reactions with erythema followed by hyperpigmentation resulting in Berloque dermatitis. There are now limits for the amount of furocoumarins in fragrance products. Phototoxic reactions still occur but are rare.

**General/respiratory:** Fragrances are volatile and therefore, in addition to skin exposure, a perfume also exposes the eyes and naso-respiratory tract. It is estimated that 2-4% of the adult population is affected by respiratory or eye symptoms by such an exposure. It is known that exposure to fragrances may exacerbate pre-existing asthma. Asthma-like symptoms can be provoked by sensory mechanisms. In an epidemiological investigation, a significant association was found between respiratory complaints related to fragrances and contact allergy to fragrance ingredients, in addition to hand eczema, which were independent risk factors in a multivariate analysis.

Fragrance allergens act as haptens, i.e. low molecular weight chemicals that are immunogenic only when attached to a carrier protein. However, not all sensitising fragrance chemicals are directly reactive, but require previous activation. A **prehapten** is a chemical that itself is non- or low-sensitising, but that is transformed into a hapten outside the skin by simple chemical transformation (air oxidation, photoactivation) and without the requirement of specific enzymatic systems.

In the case of prehapten, it is possible to prevent activation outside the body to a certain extent by different measures, e.g. prevention of air exposure during handling and storage of the ingredients and the final product, and by the addition of suitable antioxidants. When antioxidants are used, care should be taken that they will not be activated themselves and thereby form new sensitisers.

#### Prehapten

Most terpenes with oxidisable allylic positions can be expected to autoxidise on air exposure due to their inherent properties. Depending on the stability of the oxidation products that are formed, a difference in the sensitisation potency of the oxidised terpenes can be seen.

Autoxidation is a free radical chain reaction in which hydrogen atom abstraction in combination with addition of oxygen forms peroxy radicals. The reaction shows selectivity for positions where stable radicals can be formed. So far, all fragrance substances that have been investigated with regard to the influence of autoxidation on the allergenic potential, including identification of formed oxidation products, have oxidisable allylic positions that are able to form hydroperoxides and/or hydrogen peroxide as primary oxidation products upon air exposure. Once the hydroperoxides have been formed outside the skin they form specific antigens and act as skin sensitisers. Secondary oxidation products such as aldehydes and epoxides can also be allergenic, thus further increasing the sensitisation potency of the autoxidation mixture. The process of photoactivation may also play a role, but further research is required to establish whether this activation route is currently underestimated in importance due to insufficient knowledge of the true haptens in this context.

It should be noted that activation of substances via air oxidation results in various haptens that might be the same or cross-reacting with other haptens (allergens). The main allergens after air oxidation of linalool and linalyl acetate are the hydroperoxides. If linalyl acetate is chemically hydrolysed outside the skin it can thereafter be oxidised to the same haptens as seen for linalool. A corresponding example is citronellol and citronellyl acetate. In clinical studies, concomitant reactions to oxidised linalool and oxidised linalyl acetate have been observed. Whether these reactions depend on cross-reactivity or are due to exposure to both fragrance substances cannot be elucidated as both have an allergenic effect themselves. Linalool and linalyl acetate are the main components of lavender oil. They autoxidise on air exposure also when present in the essential oil, and form the same oxidation products found in previous studies of the pure synthetic terpenes. Experimental sensitisation studies showed that air exposure of lavender oil increased the sensitisation potency. Patch test results in dermatitis patients showed a connection between positive reactions to oxidised linalool, linalyl acetate and lavender oil.

#### Prohapten

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

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

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

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

A member or analogue of a group of aliphatic and alicyclic terpenoid tertiary alcohols and structurally related substances generally regarded as safe (GRAS based, in part, on their self-limiting properties as flavouring substances in food; their rapid absorption, metabolic conversion, and excretion in humans and experimental animals; their low level of flavour use; the wide margins of safety between the conservative estimates of intake and the no-observed-adverse effect levels (NOAEL) determined from subchronic and chronic studies and the lack of genotoxic and mutagenic potential. This evidence of safety is supported by the fact that the intake of aliphatic acyclic and alicyclic terpenoid tertiary alcohols and structurally related substances as natural components of traditional foods is greater than their intake as intentionally added flavoring substances.

Oral median lethal dose (LD50) values have been reported for 24 of the 43 substances in this group. LD50 values range from 1300 to greater than 36300 mg/kg bw, demonstrating that the oral acute toxicity of tertiary alcohols and related esters is extremely low.

Genotoxicity: the testing of representative materials in vitro in bacterial test systems (Ames assay) and in vivo in mammalian test systems (micronucleus assay) showed no evidence of mutagenic or genotoxic potential.

Based on the results of studies under a wide variety of conditions, including aqueous buffered media, simulated gastric juice, simulated human intestinal fluid, blood plasma, whole hepatocytes and liver microsome preparations, terpene esters formed from tertiary alcohols (for example, linalool), and simple aliphatic carboxylic acids are expected to undergo hydrolysis. Bicyclic tertiary alcohols are relatively stable in vivo, but are eventually conjugated with glucuronic acid and excreted. Although differences in the rates of hydrolysis occur under in vitro conditions in gastric juice and intestinal fluids, ready hydrolysis is observed in tissue preparations that have an abundant concentration of carboxylesterases (CES), especially the liver. The most important class of these enzymes is the B-esterases, which are members of the serine esterase superfamily.

Generally, CES enzymes are ubiquitous throughout mammalian tissues and are found at the highest levels in hepatocytes. In general, the esters are hydrolysed to their corresponding alcohol and carboxylic acid. It is expected that the tertiary aromatic alcohols will undergo direct conjugation of the hydroxyl group with glucuronic acid while the tertiary terpenoid alcohols formed as a result of hydrolysis are rapidly absorbed and converted to the glucuronic acid conjugates which are excreted in the urine, or are further oxidised to CO<sub>2</sub> that is subsequently expired.

Aliphatic acyclic and alicyclic terpenoid tertiary alcohols and structurally related substances often have a sweet floral rose to a fruity citrus green organoleptic profile. Twenty-two of the 44 flavor ingredients in this group have been reported to occur naturally, and can be found in chamomile, cocoa, coffee, a variety of fruits and especially citrus fruit varieties and vegetables, lemon juice, black and green teas, calamus, soybean, pepper, strawberry guava, beer and wine.

Flavor and Extract Manufacturers' Association (FEMA)

With few exceptions \* (see below) there are no safety concerns regarding certain cyclic and non-cyclic terpene alcohols \*\*, as fragrance ingredients, under the present declared levels of use and exposure for the following reasons

- The non-cyclic and cyclic terpene alcohols have a low order of acute toxicity
- No significant toxicity was observed in repeated dose toxicity tests; it is concluded that these materials have dermal and oral NOAELs of 50 mg/kg body weight/day or greater.
- These materials were inactive in mutagenicity and genotoxicity tests.
- Based on data on metabolism it is concluded that members of this category exhibit similar chemical and biochemical fate.
- Although there is some indication for the production of reactive metabolites by some materials, these metabolites appear to be efficiently detoxicated and not expected to result in overt toxicity. There is no indication for the production of persistent metabolites.
- The results from materials studied to date are indicative of the group and there are no grounds for environmental concern with respect to cyclic and non-cyclic terpene alcohol compounds as currently used in fragrance compounds.
- Human dermatological studies show that, at current use levels, these materials are practically non-irritating.
- The sensitization potential is generally low.
- The margin of safety is generally greater than 100 times the maximum daily exposure.

Sufficient data are available from farnesol, linalool, menthol and a-terpineol, i.e., compounds that contain all key structural elements and potential sites of metabolism of all other members in the group, to demonstrate that the non-cyclic and cyclic terpenes share common metabolic pathways. In most cases, metabolism yields innocuous metabolites. Some materials, however, may generate alpha, b-unsaturated compounds or be oxidized to hydroperoxides. Such compounds have the capacity to participate in a range of nucleophilic and electrophilic addition reactions with biological material.

\* Safety concerns exist for the following substances for the following reasons.

- 6,7-Dihydrogeraniol, hydroabietyl alcohol and 6-isopropyl-2-decahydro-naphthalenol are potent skin sensitizers. These materials are prohibited for use in fragrance materials by IFRA Standards.
- Farnesol is a weak sensitizer. Its use in fragrance materials is therefore restricted by IFRA Standards.
- Sclareol and linalool may contain impurities and/or oxidation products that are strong sensitizers. For use in fragrance materials, these compounds must comply with the purity criteria stated in their IFRA Standards.
- No sensitization test results were available for 2(10)-pinen-3-ol, 2,6-dimethyloct-3,5-dien-2-ol, and 3,7-dimethyl-4,6-octadien-3-ol. These materials should be regarded as potential sensitizers until tested.

\*\* The common characteristic structural element of acyclic -noncyclic- and cyclic terpene alcohols is the typically branched isoprene unit 2-methyl-1,3-butadiene

The Research Institute for Fragrance Materials (RIFM) Expert Panel

**CALCIUM CARBONATE & TITANIUM DIOXIDE & ALPHA-TERPINEOL**

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 production.

**ACRYLIC POLYMER & TITANIUM DIOXIDE**

No significant acute toxicological data identified in literature search.

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

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

**SECTION 12 Ecological information**

**Toxicity**

	Endpoint	Test Duration (hr)	Species	Value	Source
DURAM FINESSE	Not Available	Not Available	Not Available	Not Available	Not Available
silica crystalline - quartz	Not Available	Not Available	Not Available	Not Available	Not Available
calcium carbonate	NOEC(ECx)	6h	Fish	4-320mg/l	4
	EC50	72h	Algae or other aquatic plants	>14mg/l	2
	LC50	96h	Fish	>165200mg/L	4

Continued...

Ingredient	Endpoint	Test Duration (hr)	Species	Value	Source
	acrylic polymer	Not Available	Not Available	Not Available	Not Available
titanium dioxide	Endpoint	Test Duration (hr)	Species	Value	Source
	EC50	72h	Algae or other aquatic plants	3.75-7.58mg/l	4
	BCF	1008h	Fish	<1.1-9.6	7
	EC50	48h	Crustacea	1.9mg/l	2
	LC50	96h	Fish	1.85-3.06mg/l	4
	NOEC(ECx)	504h	Crustacea	0.02mg/l	4
alpha-terpineol	Endpoint	Test Duration (hr)	Species	Value	Source
	NOEC(ECx)	72h	Algae or other aquatic plants	~3.9mg/l	2
	EC50	72h	Algae or other aquatic plants	~17mg/l	2
	LC50	96h	Fish	6.3mg/l	4
	EC50	48h	Crustacea	73mg/l	2
<b>Legend:</b>	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				

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

**Persistence and degradability**

Ingredient	Persistence: Water/Soil	Persistence: Air
titanium dioxide	HIGH	HIGH
alpha-terpineol	HIGH	HIGH

**Bioaccumulative potential**

Ingredient	Bioaccumulation
titanium dioxide	LOW (BCF = 10)
alpha-terpineol	LOW (LogKOW = 3.28)

**Mobility in soil**

Ingredient	Mobility
titanium dioxide	LOW (KOC = 23.74)
alpha-terpineol	LOW (KOC = 57.85)

**SECTION 13 Disposal considerations**

**Waste treatment methods**

<b>Product / Packaging disposal</b>	<p>Legislation addressing waste disposal requirements may differ by country, state and/ or territory. Each user must refer to laws operating in their area. In some areas, certain wastes must be tracked.</p> <p>A Hierarchy of Controls seems to be common - the user should investigate:</p> <ul style="list-style-type: none"> <li>▶ Reduction</li> <li>▶ Reuse</li> <li>▶ Recycling</li> <li>▶ Disposal (if all else fails)</li> </ul> <p>This material may be recycled if unused, or if it has not been contaminated so as to make it unsuitable for its intended use. If it has been contaminated, it may be possible to reclaim the product by filtration, distillation or some other means. Shelf life considerations should also be applied in making decisions of this type. Note that properties of a material may change in use, and recycling or reuse may not always be appropriate.</p> <ul style="list-style-type: none"> <li>▶ <b>DO NOT allow wash water from cleaning or process equipment to enter drains.</b></li> <li>▶ It may be necessary to collect all wash water for treatment before disposal.</li> <li>▶ In all cases disposal to sewer may be subject to local laws and regulations and these should be considered first.</li> <li>▶ Where in doubt contact the responsible authority.</li> <li>▶ Recycle wherever possible.</li> <li>▶ Consult manufacturer for recycling options or consult local or regional waste management authority for disposal if no suitable treatment or disposal facility can be identified.</li> <li>▶ Dispose of by: burial in a land-fill specifically licensed to accept chemical and / or pharmaceutical wastes or incineration in a licensed apparatus (after admixture with suitable combustible material).</li> <li>▶ Decontaminate empty containers. Observe all label safeguards until containers are cleaned and destroyed.</li> </ul>
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**SECTION 14 Transport information**

**Labels Required**

<b>Marine Pollutant</b>	NO
<b>HAZCHEM</b>	Not Applicable

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

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

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

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

Not Applicable

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

Product name	Group
silica crystalline - quartz	Not Available
calcium carbonate	Not Available
acrylic polymer	Not Available
titanium dioxide	Not Available
alpha-terpineol	Not Available

**Transport in bulk in accordance with the ICG Code**

Product name	Ship Type
silica crystalline - quartz	Not Available
calcium carbonate	Not Available
acrylic polymer	Not Available
titanium dioxide	Not Available
alpha-terpineol	Not Available

## SECTION 15 Regulatory information

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

**silica crystalline - quartz is found on the following regulatory lists**

Australia Hazardous Chemical Information System (HCIS) - Hazardous Chemicals  
Australia Model Work Health and Safety Regulations - Hazardous chemicals (other than lead) requiring health monitoring  
Australian Inventory of Industrial Chemicals (AIIC)

Chemical Footprint Project - Chemicals of High Concern List  
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 1: Carcinogenic to humans

**calcium carbonate is found on the following regulatory lists**

Australian Inventory of Industrial Chemicals (AIIC)

**acrylic polymer is found on the following regulatory lists**

Not Applicable

**titanium dioxide is found on the following regulatory lists**

Australian Inventory of Industrial Chemicals (AIIC)  
Chemical Footprint Project - Chemicals of High Concern List  
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)

**alpha-terpineol is found on the following regulatory lists**

Australian Inventory of Industrial Chemicals (AIIC)

**National Inventory Status**

National Inventory	Status
Australia - AIIC / Australia Non-Industrial Use	Yes
Canada - DSL	Yes
Canada - NDSL	No (silica crystalline - quartz; alpha-terpineol)
China - IECSC	Yes
Europe - EINEC / ELINCS / NLP	Yes
Japan - ENCS	Yes
Korea - KECI	Yes
New Zealand - NZIoC	Yes
Philippines - PICCS	Yes
USA - TSCA	Yes
Taiwan - TCSI	Yes
Mexico - INSQ	Yes
Vietnam - NCI	Yes

National Inventory	Status
Russia - FBEPH	Yes
<b>Legend:</b>	
Yes = All CAS declared ingredients are on the inventory	
No = One or more of the CAS listed ingredients are not on the inventory and are not exempt from listing(see specific ingredients in brackets)	

## SECTION 16 Other information

Revision Date	01/11/2019
Initial Date	16/02/2017

### SDS Version Summary

Version	Date of Update	Sections Updated
2.1.1.1	16/02/2017	Advice to Doctor, Fire Fighter (fire/explosion hazard), Physical Properties
3.1.1.1	01/11/2019	One-off system update. NOTE: This may or may not change the GHS classification
3.1.2.1	26/04/2021	Regulation Change
3.1.3.1	03/05/2021	Regulation Change
3.1.4.1	06/05/2021	Regulation Change
3.1.5.1	10/05/2021	Regulation Change
3.1.5.2	30/05/2021	Template Change
3.1.5.3	04/06/2021	Template Change
3.1.5.4	05/06/2021	Template Change
3.1.6.4	07/06/2021	Regulation Change
3.1.6.5	09/06/2021	Template Change
3.1.6.6	11/06/2021	Template Change
3.1.6.7	15/06/2021	Template Change
3.1.7.7	17/06/2021	Regulation Change
3.1.8.7	21/06/2021	Regulation Change

### Other information

Classification of the preparation and its individual components has drawn on official and authoritative sources as well as independent review by the Chemwatch Classification committee using available literature references.

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

### Definitions and abbreviations

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

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TEL (+61 3) 9572 4700.