

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

Catalogue Number	CS-AZ-00064
Product Name	Barban
CAS No.	101-27-9
Category	Pesticide Standards
Synonyms	Not available
Brand	Clearsynth Labs Ltd.
Identified uses	Laboratory Chemicals
Uses advised against	Not available
Company	Clearsynth Labs Ltd. Mumbai, India
Emergency Phone #	+91-22-245045900
REACH No.	Not available

SECTION 2: Hazards identification

Disclaimer: This is sample MSDS. Please email sales@clearsynth.com for more details.

2.1 Classification of the substance or mixture-Regulation (EC) No 1272/2008:

Acute toxicity (Category 4)

2.2 Label Elements

Signal Word: Warning



Hazard Statement(s)

Code	Statement
H302	Harmful if swallowed.
H317	May cause an allergic skin reaction.
H400	Not available
H410	Not available

Precautionary Statement(s)

Code	Statement
P261	Avoid breathing dust/fume/gas/mist/vapours/spray.
P264	Wash hands thoroughly after handling.
P270	Not available
P272	Not available
P273	Not available
P280	Wear protective gloves/protective clothing/eye protection/face protection.
P301+P317	Not available
P302+P352	IF ON SKIN: Wash with plenty of water and soap.
P321	Specific treatment (see ... on this label).
P330	Not available
P333+P317	Not available
P362+P364	Take off contaminated clothing and wash it before reuse.
P391	Not available
P501	Dispose of contents/container in accordance with local/regional/national/international regulation

SECTION 3: Composition / information on ingredients

3.1 Substance

Component : Barban

CAS Number : 101-27-9

Molecular Formula : C₁₁H₉Cl₂NO₂

Molecular Weight : 258.10

Parent Chemical : -

Synonyms : Not available

Concentration : Not available

SECTION 4: First aid measures

Not available

SECTION 5: Firefighting measures

Not available

SECTION 6: Accidental release measures

Not available

SECTION-7: Handling and storage

Not available

SECTION 8: Exposure controls / personal protection

Not available

SECTION 9: Physical and chemical properties

9.1 Information on basic physical and chemical properties

Test	Result
Appearance	No data available
IR spectrum	No data available
pH	No data available
Solubility	No data available

Property	Value
a) Physical State	No data available
b) Color	No data available
c) Odor	No data available
d) pH	No data available
e) Vapour Pressure	No data available
f) Viscosity	No data available
g) Initial Boiling Point and boiling range	No data available
h) Melting Point / Freezing Point	No data available
i) Auto Ignition Temperature	No data available
j) Flash Point	No data available
k) Explosion Limit, Lower	No data available

Property	Value
l) Explosion Limit, Upper	No data available
m) Decomposition Temperature	No data available
n) Loss on Drying	No data available
o) Relative Density	No data available
p) Solubility (in DMSO)	No data available
q) Oxidizing Properties	No data available

SECTION 10: Stability and reactivity

Not available

SECTION 11: Toxicological information

11.1 Information on toxicological effects

- Acute toxicity: Acute exposure to cholinesterase inhibitors can cause a cholinergic crisis characterized by severe nausea/vomiting, salivation, sweating, bradycardia, hypotension, collapse, and convulsions. Increasing muscle weakness is a possibility and may result in death if respiratory muscles are involved. Accumulation of ACh at motor nerves causes overstimulation of nicotinic expression at the neuromuscular junction. When this occurs symptoms such as muscle weakness, fatigue, muscle cramps, fasciculation, and paralysis can be seen. When there is an accumulation of ACh at autonomic ganglia this causes overstimulation of nicotinic expression in the sympathetic system. Symptoms associated with this are hypertension, and hypoglycemia. Overstimulation of nicotinic acetylcholine receptors in the central nervous system, due to accumulation of ACh, results in anxiety, headache, convulsions, ataxia, depression of respiration and circulation, tremor, general weakness, and potentially coma. When there is expression of muscarinic overstimulation due to excess acetylcholine at muscarinic acetylcholine receptors symptoms of visual disturbances, tightness in chest, wheezing due to bronchoconstriction, increased bronchial secretions, increased salivation, lacrimation, sweating, peristalsis, and urination can occur. Chronically high (>10 years) exposure leads to neuropsychological consequences including disturbances in perception and visuo-motor processing (A15321). LC50 (rat) = 23,000 mg/m³/4hr
- Skin corrosion/irritation: No data available.
- Serious eye damage/eye irritation: /LABORATORY ANIMALS: Chronic Exposure or Carcinogenicity/ No untoward behavioral or physiological reactions observed in albino rats after 21 months of chronic oral toxicity studies, or in dogs after 14 months. ...Caused transient eye irritation in albino rabbits.
- Respiratory or skin sensitization: Barban... is a potent skin sensitizing agent in man. Irritant and dermal sensitizer.
- Germ cell mutagenicity: No data available.
- Carcinogenicity: /LABORATORY ANIMALS: Chronic Exposure or Carcinogenicity/ No untoward behavioral or physiological reactions observed in albino rats after 21 months of chronic oral toxicity studies, or in dogs after 14 months. ...Caused transient eye irritation in albino rabbits.
- Reproductive toxicity: No data available.
- STOT-single exposure: No data available.
- STOT-repeated exposure: Acute exposure to cholinesterase inhibitors can cause a cholinergic crisis characterized by severe nausea/vomiting, salivation, sweating, bradycardia, hypotension, collapse, and convulsions. Increasing

muscle weakness is a possibility and may result in death if respiratory muscles are involved. Accumulation of ACh at motor nerves causes overstimulation of nicotinic expression at the neuromuscular junction. When this occurs symptoms such as muscle weakness, fatigue, muscle cramps, fasciculation, and paralysis can be seen. When there is an accumulation of ACh at autonomic ganglia this causes overstimulation of nicotinic expression in the sympathetic system. Symptoms associated with this are hypertension, and hypoglycemia. Overstimulation of nicotinic acetylcholine receptors in the central nervous system, due to accumulation of ACh, results in anxiety, headache, convulsions, ataxia, depression of respiration and circulation, tremor, general weakness, and potentially coma. When there is expression of muscarinic overstimulation due to excess acetylcholine at muscarinic acetylcholine receptors symptoms of visual disturbances, tightness in chest, wheezing due to bronchoconstriction, increased bronchial secretions, increased salivation, lacrimation, sweating, peristalsis, and urination can occur. Chronically high (>10 years) exposure leads to neuropsychological consequences including disturbances in perception and visuo-motor processing (A15321). /LABORATORY ANIMALS: Subchronic or Prechronic Exposure/ Daily /oral/ administration of 0.1 LD50 to guinea pigs and rabbits for 4-6 months is said to have caused fatty dystrophy of the liver and kidneys, hemosiderosis of the spleen and vascular hyperemia of liver, brain, kidneys, spleen and gastric mucosa. Daily doses of 20-40 mg/kg to rabbits caused a significant decrease in liver glycogen content.

- Aspiration hazard: No data available.

Likely routes of exposure

- No data available.

Symptoms related to the physical, chemical and toxicological characteristics

- Acute exposure to cholinesterase inhibitors can cause a cholinergic crisis characterized by severe nausea/vomiting, salivation, sweating, bradycardia, hypotension, collapse, and convulsions. Increasing muscle weakness is a possibility and may result in death if respiratory muscles are involved. Accumulation of ACh at motor nerves causes overstimulation of nicotinic expression at the neuromuscular junction. When this occurs symptoms such as muscle weakness, fatigue, muscle cramps, fasciculation, and paralysis can be seen. When there is an accumulation of ACh at autonomic ganglia this causes overstimulation of nicotinic expression in the sympathetic system. Symptoms associated with this are hypertension, and hypoglycemia. Overstimulation of nicotinic acetylcholine receptors in the central nervous system, due to accumulation of ACh, results in anxiety, headache, convulsions, ataxia, depression of respiration and circulation, tremor, general weakness, and potentially coma. When there is expression of muscarinic overstimulation due to excess acetylcholine at muscarinic acetylcholine receptors symptoms of visual disturbances, tightness in chest, wheezing due to bronchoconstriction, increased bronchial secretions, increased salivation, lacrimation, sweating, peristalsis, and urination can occur. Chronically high (>10 years) exposure leads to neuropsychological consequences including disturbances in perception and visuo-motor processing (A15321).

SECTION 12: Ecological information

Not available

SECTION 13: Disposal considerations

Not available

SECTION 14: Transport information

Not available

SECTION 15: Regulatory information

Not available

SECTION 16: Other information

Not available

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