

化 学 品 安 全 技 术 说 明 书

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MSDS标题

WATTYL EXTERIOR TIMBER PRESERVER MSDS报告

产品标题

石油酸铜; 羧酸铜

CAS号

1338-02-9

化学品及企业标识

PRODUCT NAME

WATTYL EXTERIOR TIMBER PRESERVER

NFPA

Flammability	2
Toxicity	2
Body Contact	2
Reactivity	1
Chronic	2

SCALE: Min/Nil=0 Low=1 Moderate=2 High=3 Extreme=4

PRODUCT USE

The use of a quantity of material in an unventilated or confined space may result in increased exposure and an irritating atmosphere developing. Before starting consider control of exposure by mechanical ventilation. Used to treat timber to give it protection against mildew, borers, white ants and marine toredo worm. Application is by brush.

SYNONYMS

"naphthenic acid, copper salt fungicide timber preservative", "copper naphthenate"

CANADIAN WHMIS SYMBOLS

EMERGENCY OVERVIEW

RISK

Possible risk of harm to the unborn child.

HARMFUL - May cause lung damage if swallowed.

Harmful: danger of serious damage to health by prolonged exposure through inhalation.

Harmful by inhalation and if swallowed.

Irritating to eyes, respiratory system and skin.

Flammable.

Vapors may cause dizziness or suffocation.

Toxic to aquatic organisms, may cause long- term adverse effects in the aquatic environment.

POTENTIAL HEALTH EFFECTS

ACUTE HEALTH EFFECTS

SWALLOWED

Accidental ingestion of the material may be harmful; animal experiments indicate that ingestion of less than 150 gram may be fatal or may produce serious damage to the health of the individual. Swallowing of the liquid may cause aspiration into the lungs with the risk of chemical pneumonitis; serious consequences may result. (ICSC13733). A metallic taste, nausea, vomiting and burning feeling in the upper stomach region occur after ingestion of copper and its derivatives. The vomitus is usually green/blue and discolors contaminated skin. Acute poisonings from ingestion are rare due to their prompt removal by vomiting. Should vomiting not occur, or is delayed systemic poisoning may occur producing kidney and liver damage, wide-spread capillary damage, and be fatal; death may occur after relapse from an apparent recovery. Anemia may occur in acute poisoning.

EYE

This material can cause eye irritation and damage in some persons. Although the liquid is not thought to be an irritant, direct contact with the eye may produce transient discomfort characterized by tearing or conjunctival redness (as with windburn). The vapour when concentrated has pronounced eye irritation effects and this gives some warning of high vapour concentrations. If eye irritation occurs seek to reduce exposure with available control measures, or evacuate area. The material may produce severe irritation to

the eye causing pronounced inflammation. Repeated or prolonged exposure to irritants may produce conjunctivitis.

SKIN

There is some evidence to suggest that the material may cause moderate inflammation of the skin either following direct contact or after a delay of some time. Repeated exposure can cause contact dermatitis which is characterized by redness, swelling and blistering. Entry into the blood-stream, through, for example, cuts, abrasions or lesions, may produce systemic injury with harmful effects. Examine the skin prior to the use of the material and ensure that any external damage is suitably protected. Exposure to copper, by skin, has come from its use in pigments, ointments, ornaments, jewellery, dental amalgams and IUDs and as an antifungal agent and an algicide. Although copper alginides are used in the treatment of water in swimming pools and reservoirs, there are no reports of toxicity from these applications. Reports of allergic contact dermatitis following contact with copper and its salts have appeared in the literature, however the exposure concentrations leading to any effect have been poorly characterised. In one study, patch testing of 1190 eczema patients found that only 13 (1.1%) cross-reacted with 2% copper sulfate in petrolatum. The investigators warned, however, that the possibility of contamination with nickel (an established contact allergen) might have been the cause of the reaction. Copper salts often produce an itching eczema in contact with skin. This is, likely, of a non-allergic nature. The material may cause skin irritation after prolonged or repeated exposure and may produce on contact skin redness, swelling, the production of vesicles, scaling and thickening of the skin.

INHALED

There is some evidence to suggest that the material can cause respiratory irritation in some persons. The body's response to such irritation can cause further lung damage. The material has NOT been classified as "harmful by inhalation". This is because of the lack of corroborating animal or human evidence. In the absence of such evidence, care should nevertheless be taken to ensure exposure is kept to a minimum and that suitable control measures be used, in an occupational setting to control vapors, fumes and aerosols. Inhalation of high concentrations of gas/vapor causes lung irritation with coughing and nausea, central nervous depression with headache and dizziness, slowing of reflexes, fatigue and inco-ordination. Central nervous system (CNS) depression may include general discomfort, symptoms of giddiness, headache, dizziness, nausea, anaesthetic effects, slowed reaction time, slurred speech and may progress to unconsciousness. Serious poisonings may result in respiratory depression and may be fatal. Inhalation of vapours may cause drowsiness and dizziness. This may be accompanied by narcosis, reduced alertness, loss of reflexes, lack of coordination and vertigo. The use of a quantity of material in an unventilated or confined space may result in increased exposure and an irritating atmosphere developing. Before starting consider control of exposure by mechanical ventilation.

CHRONIC HEALTH EFFECTS

Limited evidence suggests that repeated or long-term occupational exposure may produce cumulative health effects involving organs or biochemical systems. 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. There is some evidence that human exposure to the material may result in developmental toxicity. This evidence is based on animal studies where effects have been observed in the absence of marked maternal toxicity, or at around the same dose levels as other toxic effects but which are not secondary non-specific consequences of the other toxic effects. Chronic solvent inhalation exposures may result in nervous system impairment and liver and blood changes. [PATTYS].