

化 学 品 安 全 技 术 说 明 书

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**MSDS标题**

HCA VICTORIA PURE BLUE B 100% MSDS报告

**产品标题**

维多利亚兰B;碱性艳蓝B

**CAS号**

2580-56-5

**化学品及企业标识**

**PRODUCT NAME**

HCA VICTORIA PURE BLUE B 100%

**NFPA**

Flammability	1
Toxicity	2
Body Contact	2
Reactivity	1
Chronic	0

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

**PRODUCT USE**

Used for colouring in a wide variety of applications, especially inks, carbon paper and other paper products.

## **SYNONYMS**

"C.I. basic blue 26 phenylamine dyestuff"

## **CANADIAN WHMIS SYMBOLS**

## **EMERGENCY OVERVIEW**

### **RISK**

Harmful if swallowed.

Irritating to respiratory system and skin.

Toxic to aquatic organisms.

## **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.

#### **EYE**

There is some evidence to suggest that this material can cause eye irritation and damage in some persons. Injury produced by cationic dyes range from conjunctival oedema, hyperaemia and purulent (pus) discharge to total opacification and necrosis and sloughing of the corneal stratum. The typical course, following exposure of rabbit eyes to toxic quantities of cationic dyes, is an initial staining of the eye that persists even after attempts to wash it away. The stain disappears spontaneously within a day and the cornea becomes translucent, greyish and only slightly tinted. Opacity may increase, and the cornea may soften over the following 14 days, greatly bulging and weakened; sometimes necrosis occurs with sloughing. Permanent opacification from vascularisation and scarring occurs in most cases.

#### **SKIN**

This material can cause inflammation of the skin on contact in some persons. Skin contact is not thought to produce harmful health effects (as classified using animal models). Systemic harm, however, has been identified following exposure of animals by at least one other route and the material may still produce health damage following entry through wounds, lesions or abrasions. Good hygiene practice requires that exposure be kept to a minimum and that suitable gloves be used in an occupational setting. 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.

## **INHALED**

The material can cause respiratory irritation in some persons. The body's response to such irritation can cause further lung damage. Persons with impaired respiratory function, airway diseases and conditions such as emphysema or chronic bronchitis, may incur further disability if excessive concentrations of particulate are inhaled. The material is not thought to produce adverse health effects following inhalation (as classified using animal models). Nevertheless, adverse effects have been produced following exposure of animals by at least one other route and good hygiene practice requires that exposure be kept to a minimum and that suitable control measures be used in an occupational setting.

## **CHRONIC HEALTH EFFECTS**

Long term exposure to high dust concentrations may cause changes in lung function i.e. pneumoconiosis; caused by particles less than 0.5 micron penetrating and remaining in the lung. Prime symptom is breathlessness; lung shadows show on X-ray. 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.