

化学品安全技术说明书

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MSDS标题

VIRGINIAMYCIN M1 MSDS报告

产品标题

春霉素A

CAS号

21411-53-0

化学品及企业标识

PRODUCT NAME

VIRGINIAMYCIN M1

NFPA

Flammability	1
Toxicity	2
Body Contact	1
Reactivity	1
Chronic	2

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

PRODUCT USE

In the treatment of infections due to sensitive organisms, particularly Gram- positive cocci; as an additive for animal feeds. Given by mouth. Antimicrobial substance produced by the growth of Streptomyces virginiae. Active against staphylococci and some streptococci. Neisseria gonorrhoeae and Haemophilus influenza are also reported to be

susceptible. A member of the so-called streptogramin group of antibiotics which include mikamycins, pristinamycins, ostreomycins and virginiamycins. These are produced as secondary metabolites from a wide variety of *Streptomyces* spp. Cross-resistance is often observed between streptogramins, macrolides and lincosamide antibiotics. The streptogramins are divided into two main groups: Group A or M which is composed of polyunsaturated cyclic peptidolides and Group B or S which is composed of cyclic hexadepsipeptides (with structural similarities to the macrolides). Each component in each group is bacteriostatic against Gram-positive species, however the combination of one component from each group leads to an association which is both strongly bacteriostatic and highly synergistic.

SYNONYMS

C28-H35-N3-O7, "Mikamycin A", "Ostreogrycin A", "Pristinamycin II", "Pristinamycin II", "Staphylomycin M1", "Streptogramin A", "Vernamycin A", "aminoglycoside/ streptogramin/ synergistins/ synergimycin antibiotic/", antibacterial

CANADIAN WHMIS SYMBOLS

EMERGENCY OVERVIEW

RISK

POTENTIAL HEALTH EFFECTS

ACUTE HEALTH EFFECTS

SWALLOWED

Although ingestion is not thought to produce harmful effects, the material may still be damaging to the health of the individual following ingestion, especially where pre-existing organ (e.g. liver, kidney) damage is evident. Present definitions of harmful or toxic substances are generally based on doses producing mortality (death) rather than those producing morbidity (disease, ill-health). Gastrointestinal tract discomfort may produce nausea and vomiting. In an occupational setting however, ingestion of insignificant quantities is not thought to be cause for concern. Treatment with virginiamycin can produce stomach upset, vomiting and allergy.

EYE

Although the material 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 dust may produce eye discomfort causing smarting, pain and redness.

SKIN

The material is not thought to produce adverse health effects or skin irritation following contact (as classified using animal models). Nevertheless, good hygiene practice requires that exposure be kept to a minimum and that suitable gloves be used in an occupational setting. Open cuts, abraded or irritated skin should not be exposed to this material. Streptogramins can cause an itchy, eczema-like rash probably due to an allergic reaction. This can occur at virginiamycin is applied externally at low concentrations.

INHALED

The material is not thought to produce adverse health effects or irritation of the respiratory tract (as classified using animal models). Nevertheless, good hygiene practice requires that exposure be kept to a minimum and that suitable control measures be used in an occupational setting. Respiratory sensitization may result in allergic/asthma like responses; from coughing and minor breathing difficulties to bronchitis with wheezing, gasping.

CHRONIC HEALTH EFFECTS

There is some evidence that inhaling this product is more likely to cause a sensitization reaction in some persons compared to the general population.

Principal routes of exposure are by accidental skin and eye contact and inhalation of generated dusts. Exposure to small quantities may induce hypersensitivity reactions characterized by acute bronchospasm, hives (urticaria), deep dermal wheals (angioneurotic edema), running nose (rhinitis) and blurred vision. Anaphylactic shock and skin rash (non-thrombocytopenic purpura) may occur. An individual may be predisposed to such anti-body mediated reaction if other chemical agents have caused prior sensitization (cross-sensitivity). Prolonged or repeated use of antibiotics, at therapeutic doses, may produce bacterial resistance for some types of bacteria. Prolonged use may result in the overgrowth of non-susceptible organisms (i.e. super-infection). Long-term exposure to aminoglycoside antibiotics (such as gentamicin) can damage the kidneys and malabsorption with a fatty, foul-smelling diarrhea. In some patients, there may be hearing loss and damage to the balancing system, after topical application or injection. Respiratory depression and paralysis of muscle has also been caused by this class of antibiotic. Some patients may display visual hallucinations, multiple nerve disorders and brain damage. Especially in those patients receiving cancer chemotherapy, there may be electrolyte imbalance in the blood following long-term use (reduced magnesium, calcium and potassium).