西亚试剂® Xiya Reagent 说明书

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化 学 品 安 全 技 术 说 明 书

填表时间 2019-12-30

打印时间 2026-01-17

MSDS标题

O-XYLYLENE DIBROMIDE MSDS报告

产品标题

1,2-二(溴甲基)苯;α,α'-二溴邻二甲苯

CAS号

91-13-4

化学品及企业标识

PRODUCT NAME

O-XYLYLENE DIBROMIDE

NFPA

Flammability	1
Toxicity	4
Body Contact	3
Reactivity	1
Chronic	3

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

PRODUCT USE

Intermediate. Tear gas agent

SYNONYMS

C8-H8-Br2, C6H4(CH2Br)2, "1, 2-bis(bromomethyl)benzene", "1, 2-bis(bromomethyl)benzene", "alpha, alpha'-dibromo-o-xylene", "alpha, alpha'-dibromo-o-xylene", "tear gas"

CANADIAN WHMIS SYMBOLS

EMERGENCY OVERVIEW

RISK

Very toxic by inhalation.
Danger of very serious irreversible effects.
Irritating to eyes, respiratory system and skin.

POTENTIAL HEALTH EFFECTS

ACUTE HEALTH EFFECTS

SWALLOWED

Accidental ingestion of the material may be seriously damaging to the health of the individual; animal experiments indicate that ingestion of less than 40 gram may be fatal. The material can produce chemical burns within the oral cavity and gastrointestinal tract following ingestion.

EYE

This material can cause eye irritation and damage in some persons. The material can produce chemical burns to the eye following direct contact. Vapors or mists may be extremely irritating. If applied to the eyes, this material causes severe eye damage. Irritation of the eyes may produce a heavy secretion of tears (lachrymation).

SKIN

This material can cause inflammation of the skin oncontact in some persons. The material can produce chemical burns following direct contactwith the skin. 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. Solution of material in moisture on the skin, or perspiration, may markedly increase skin corrosion and accelerate tissue destruction. 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

If inhaled, this material can irritate the throat andlungs of some persons. Inhalation of dusts, generated by the material, during the course of normal handling, may produce severely toxic effects; these may be fatal.

CHRONIC HEALTH EFFECTS

Limited evidence suggests that repeated or long-term occupational exposure may produce cumulative health effects involving organs or biochemical systems. 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. Repeated or prolonged exposure to corrosives may result in the erosion of teeth, inflammatory and ulcerative changes in the mouth and necrosis (rarely) of the jaw. Bronchial irritation, with cough, and frequent attacks of bronchial pneumonia may ensue. Gastrointestinal disturbances may also occur. Chronic exposures may result in dermatitis and/or conjunctivitis. 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 intoxication with ionic bromides, historically, has resulted from medical use of bromides but not from environmental or occupational exposure; depression, hallucinosis, and schizophreniform psychosis can be seen in the absence of other signs of intoxication. Bromides may also induce sedation, irritability, agitation, delirium, memory loss, confusion, disorientation, forgetfulness (aphasias), dysarthria, weakness, fatigue, vertigo, stupor, coma, decreased appetite, nausea and vomiting, diarrhoea, hallucinations, an acne like rash on the face, legs and trunk, known as bronchoderma (seen in 25-30% of case involving bromide ion), and a profuse discharge from the nostrils (coryza). Ataxia and generalised hyperreflexia have also been observed. Correlation of neurologic symptoms with blood levels of bromide is inexact. The use of substances such as brompheniramine, as antihistamines, largely reflect current day usage of bromides; ionic bromides have been largely withdrawn from therapeutic use due to their toxicity. Several cases of foetal abnormalities have been described in mothers who took large doses of bromides during pregnancy.