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化学品安全技术说明书

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MSDS标题

HYDROQUINIDINE 4-METHYL-2-QUINOLYL ETHER MSDS报告

产品标题

氢化奎尼定4-甲基-2-喹啉甲醚;氢化奎尼定4-甲基-2-喹啉醚

CAS号

135042-89-6

化学品及企业标识

PRODUCT NAME

HYDROQUINIDINE 4-METHYL-2-QUINOLYL ETHER

NFPA

Flammability	1
Toxicity	2
Body Contact	2
Reactivity	1
Chronic	2
SCALE: Min/Nil=0 Low=1 Moderate=2 High=3 Extre	me=4

PRODUCT USE

Derivative of alkaloid extracted from the bark of most varieties of Cinchona. Stereoisomer of hydroquinine 4- methyl- 2- quinolyl ether. Catalyst used in the assymetric dihydroxylation of olefins. Hydroquinidines are often used as a cardiac depressant (antiarrhythmic). They act on ventricular and supraventricular arrhythmias. Classified as Class I antiarrhythmics because they directly interfere with the depolarisation of the cardiac membrane. Also have local anaesthetic properties.

SYNONYMS

C30-H33-N3-O2, "cinchona alkaloid", "anti-arrhythmic/ anti-dysrhythmic/ cardiac depressant"

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. Large doses of quinine and its derivatives may produce severe poisoning characterized by headache, fever, vomiting, muscle weakness, excitement, confusion, blindness (possibly permanent), deafness and loss of consciousness; blood pressure falls and a feeble pulse results. Occasionally, renal failure ensues; death may occur, usually in coma, from respiratory failure. Anti-arrhythmic agents have cardiac depressant properties and may, particularly in excessive dosages, induce cardiac arrhythmias (including ventricular tachycardia), heart failure and hypotension.

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. This material is a photosensitizer. Certain individuals working with this substance may show allergic reaction of the skin under sunlight. This results in sensitivity to sunburn (may be severe) unless protective covering and 15+PF sunscreen are used. Responses may vary from sunburn-like effects to swelling and blistering lesions.

INHALED

Inhalation may produce health damage*. The material is not thought to produce respiratory irritation (as classified using animal models). Nevertheless inhalation of the material, especially for prolonged periods, may produce respiratory discomfort and occasionally, distress. 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.

CHRONIC HEALTH EFFECTS

Principal routes of exposure are by accidental skin and eye contact andinhalation of generated dusts. Repeated exposure to quinines can result in symptoms such as nausea, vomiting, headache, ringing in the ear, deafness, visual disturbance and temporary blindness. Some people are hypersensitive to quinine, and small doses in these persons may cause swelling, asthma and other allergic phenomena. Quinine can also cause hemolytic anemia and loss of platelets. Quinidines are cumulative in action and inappropriately high plasma concentrations may cause heart block, extrasystoles, ventricular tachycardia, ventricular fibrillation and sometimes, death.