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Diagnostik & molekulare Diagnostik



Laborgeräte & Service

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Lieferung & Zahlungsart

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Zuschläge

- Mindermengenzuschlag
- Trockeneiszuschlag
- Gefahrgutzuschlag
- Expressversand

SZABO-SCANDIC HandelsgmbH

Quellenstraße 110, A-1100 Wien

T. +43(0)1 489 3961-0

F. +43(0)1 489 3961-7

mail@szabo-scandic.com

www.szabo-scandic.com

[linkedin.com/company/szaboscandic](https://www.linkedin.com/company/szaboscandic) 

Acetylthiocholine iodide

sc-208323



The Power is Question

Material Safety Data Sheet

Hazard Alert Code Key: **EXTREME** **HIGH** **MODERATE** **LOW**

Section 1 - CHEMICAL PRODUCT AND COMPANY IDENTIFICATION

PRODUCT NAME

Acetylthiocholine iodide

STATEMENT OF HAZARDOUS NATURE

CONSIDERED A HAZARDOUS SUBSTANCE ACCORDING TO OSHA 29 CFR 1910.1200.

NFPA



SUPPLIER

Santa Cruz Biotechnology, Inc.
2145 Delaware Avenue
Santa Cruz, California 95060
800.457.3801 or 831.457.3800

EMERGENCY:

ChemWatch
Within the US & Canada: 877-715-9305
Outside the US & Canada: +800 2436 2255
(1-800-CHEMCALL) or call +613 9573 3112

PRODUCT USE

Substrate for the colourimetric determination of acetylcholinesterase activity.

SYNONYMS

C7-H16-I-N-O-S, CH₃COSCH₂CH₂N(CH₃)₃I, "choline, S-acetylthio-, iodide", "(2-mercaptoethyl)trimethyl ammonium iodide acetate", "S-acetylthiocholine iodide", "acetylthiocholine diiodide", "2-(acetylthio)-N, N, N-trimethylethanaminium iodide", "ammonium, (2-mercaptoethyl)trimethyl-, iodide acetate", "ethanaminium, 2-(acetylthio)-N, N, N-trimethyl-, iodide"

Section 2 - HAZARDS IDENTIFICATION

CHEMWATCH HAZARD RATINGS

	Min	Max
Flammability:	1	
Toxicity:	3	
Body Contact:	3	
Reactivity:	1	
Chronic:	2	

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



CANADIAN WHMIS SYMBOLS



EMERGENCY OVERVIEW

RISK

Harmful in contact with skin.
Toxic if swallowed.
Irritating to eyes, respiratory system and skin.
Toxic to aquatic organisms.

POTENTIAL HEALTH EFFECTS

ACUTE HEALTH EFFECTS

SWALLOWED

- Toxic effects may result from the accidental ingestion of the material; animal experiments indicate that ingestion of less than 40 gram may be fatal or may produce serious damage to the health of the individual.
- Concentrated solutions of many cationics may cause corrosive damage to mucous membranes and the esophagus. Nausea and vomiting (sometimes bloody) may follow ingestion.

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EYE

- This material can cause eye irritation and damage in some persons.
- If applied to the eyes, this material causes severe eye damage.

SKIN

- Skin contact with the material may be harmful; systemic effects may result following absorption.
- This material can cause inflammation of the skin on contact in some persons.
- The material may accentuate any pre-existing dermatitis condition.
- Open cuts, abraded or irritated skin should not be exposed to this material.
- 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.
- Inhalation of dusts, generated by the material during the course of normal handling, may be damaging to the health of the individual.
- 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

- Long-term exposure to respiratory irritants may result in disease of the airways involving difficult breathing and related systemic problems.

Limited evidence suggests that repeated or long-term occupational exposure may produce cumulative health effects involving organs or biochemical systems.

There is limited evidence that, skin contact with this product is more likely to cause a sensitization reaction in some persons compared to the general population.

Exposure to the material may cause concerns for humans owing to possible developmental toxic effects, on the basis that similar materials tested in appropriate animal studies provide some suspicion of developmental toxicity in the absence of signs of marked maternal toxicity, or at around the same dose levels as other toxic effects but which are not a secondary non-specific consequence of other toxic 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.

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Prolonged or repeated skin contact may cause degreasing with drying, cracking and dermatitis following.

Iodine and iodides, may give rise to local allergic reactions such as hives, rupture of skin blood vessels, pain in joints or diseases of the lymph nodes.

Iodine and iodides cause goiter and diminished as well as increased activity of the thyroid gland. A toxic syndrome resulting from chronic iodide overdose and from repeated administration of small amounts of iodine is characterized by excessive saliva production, head cold, sneezing, conjunctivitis, headache, fever, laryngitis, inflammation of the bronchi and mouth cavity, inflamed parotid gland, and various skin rashes.

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Section 3 - COMPOSITION / INFORMATION ON INGREDIENTS

NAME	CAS RN	%
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Section 4 - FIRST AID MEASURES

SWALLOWED

· IF SWALLOWED, REFER FOR MEDICAL ATTENTION, WHERE POSSIBLE, WITHOUT DELAY. · Where Medical attention is not immediately available or where the patient is more than 15 minutes from a hospital or unless instructed otherwise:

EYE

■ If this product comes in contact with the eyes: · Immediately hold eyelids apart and flush the eye continuously with running water. · Ensure complete irrigation of the eye by keeping eyelids apart and away from eye and moving the eyelids by occasionally lifting the upper and lower lids.

SKIN

■ If skin contact occurs: · Immediately remove all contaminated clothing, including footwear · Flush skin and hair with running water (and soap if available).

INHALED

· If fumes or combustion products are inhaled remove from contaminated area. · Lay patient down. Keep warm and rested.

NOTES TO PHYSICIAN

■ Treat symptomatically.

for poisons (where specific treatment regime is absent):

-----BASIC TREATMENT

· Establish a patent airway with suction where necessary.

· Watch for signs of respiratory insufficiency and assist ventilation as necessary.

Section 5 - FIRE FIGHTING MEASURES

Vapour Pressure (mmHG):	Negligible
Upper Explosive Limit (%):	Not available.
Specific Gravity (water=1):	Not available
Lower Explosive Limit (%):	Not available

EXTINGUISHING MEDIA

· Water spray or fog.

· Foam.

FIRE FIGHTING

· Alert Emergency Responders and tell them location and nature of hazard.

· Wear full body protective clothing with breathing apparatus.

When any large container (including road and rail tankers) is involved in a fire, consider evacuation by 800 metres in all directions.

GENERAL FIRE HAZARDS/HAZARDOUS COMBUSTIBLE PRODUCTS

· Combustible solid which burns but propagates flame with difficulty.

· Avoid generating dust, particularly clouds of dust in a confined or unventilated space as dusts may form an explosive mixture with air, and any source of ignition, i.e. flame or spark, will cause fire or explosion. Dust clouds generated by the fine grinding of the solid are a particular hazard; accumulations of fine dust may burn rapidly and fiercely if ignited.

Combustion products include: carbon monoxide (CO), carbon dioxide (CO₂), hydrogen iodide, nitrogen oxides (NO_x), sulfur oxides (SO_x), other pyrolysis products typical of burning organic material.

May emit poisonous fumes.

FIRE INCOMPATIBILITY

■ Avoid contamination with oxidizing agents i.e. nitrates, oxidizing acids, chlorine bleaches, pool chlorine etc. as ignition may result.

PERSONAL PROTECTION

Glasses:

Chemical goggles.

Gloves:

Respirator:

Particulate

Section 6 - ACCIDENTAL RELEASE MEASURES

MINOR SPILLS

· Remove all ignition sources.

· Clean up all spills immediately.

- Avoid contact with skin and eyes.
- Control personal contact by using protective equipment.
- Use dry clean up procedures and avoid generating dust.
- Place in a suitable, labelled container for waste disposal.

MAJOR SPILLS

- Clear area of personnel and move upwind.
- Alert Emergency Responders and tell them location and nature of hazard.

Section 7 - HANDLING AND STORAGE

PROCEDURE FOR HANDLING

- Avoid all personal contact, including inhalation.
- Wear protective clothing when risk of exposure occurs.

Empty containers may contain residual dust which has the potential to accumulate following settling. Such dusts may explode in the presence of an appropriate ignition source.

- Do NOT cut, drill, grind or weld such containers.
- In addition ensure such activity is not performed near full, partially empty or empty containers without appropriate workplace safety authorisation or permit.

RECOMMENDED STORAGE METHODS

- Lined metal can, Lined metal pail/drum
- Plastic pail.

For low viscosity materials

- Drums and jerricans must be of the non-removable head type.
- Where a can is to be used as an inner package, the can must have a screwed enclosure.

STORAGE REQUIREMENTS

- Store in original containers.
- Keep containers securely sealed.

Section 8 - EXPOSURE CONTROLS / PERSONAL PROTECTION

EXPOSURE CONTROLS

Source	Material	TWA mg/m ³	Notes
US - Oregon Permissible Exposure Limits (Z-3)	acetylthiocholine iodide (Inert or Nuisance Dust: Total dust)	10	(d)
US OSHA Permissible Exposure Levels (PELs) - Table Z3	acetylthiocholine iodide (Inert or Nuisance Dust: (d) Respirable fraction)	5	
US OSHA Permissible Exposure Levels (PELs) - Table Z3	acetylthiocholine iodide (Inert or Nuisance Dust: (d) Total dust)	15	
US - Hawaii Air Contaminant Limits	acetylthiocholine iodide (Particulates not otherwise regulated - Total dust)	10	
US - Hawaii Air Contaminant Limits	acetylthiocholine iodide (Particulates not otherwise regulated - Respirable fraction)	5	
US - Oregon Permissible Exposure Limits (Z-3)	acetylthiocholine iodide (Inert or Nuisance Dust: Respirable fraction)	5	(d)
US ACGIH Threshold Limit Values (TLV)	acetylthiocholine iodide (Particles (Insoluble or Poorly Soluble) [NOS] Inhalable particles)	10	See Appendix B current TLV/BEI Book
US - California Permissible Exposure Limits for Chemical Contaminants	acetylthiocholine iodide (Particulates not otherwise regulated Respirable fraction)	5	(n)
US - Tennessee Occupational Exposure Limits - Limits For Air Contaminants	acetylthiocholine iodide (Particulates not otherwise regulated Respirable fraction)	5	
US - Michigan Exposure Limits for Air Contaminants	acetylthiocholine iodide (Particulates not otherwise regulated, Respirable dust)	5	
Canada - Prince Edward Island Occupational Exposure Limits	acetylthiocholine iodide (Particles (Insoluble or Poorly Soluble) [NOS] Inhalable particles)	10	See Appendix B current TLV/BEI Book

US - Wyoming Toxic and Hazardous Substances Table Z1 Limits for Air Contaminants acetylthiocholine iodide (Particulates not otherwise regulated (PNOR)(f)- Respirable fraction) 5

ENDOELTABLE

PERSONAL PROTECTION



RESPIRATOR

Particulate

EYE

- Safety glasses with side shields.
- Chemical goggles.

HANDS/FEET

■ Wear chemical protective gloves, eg. PVC.

NOTE: The material may produce skin sensitization in predisposed individuals. Care must be taken, when removing gloves and other protective equipment, to avoid all possible skin contact.

Suitability and durability of glove type is dependent on usage. Important factors in the selection of gloves include: such as:

- frequency and duration of contact,
- chemical resistance of glove material,
- glove thickness and
- dexterity

Select gloves tested to a relevant standard (e.g. Europe EN 374, US F739).

- When prolonged or frequently repeated contact may occur, a glove with a protection class of 5 or higher (breakthrough time greater than 240 minutes according to EN 374) is recommended.
- When only brief contact is expected, a glove with a protection class of 3 or higher (breakthrough time greater than 60 minutes according to EN 374) is recommended.
- Contaminated gloves should be replaced.

Gloves must only be worn on clean hands. After using gloves, hands should be washed and dried thoroughly. Application of a non-perfumed moisturiser is recommended.

OTHER

- Overalls.
- Eyewash unit.

ENGINEERING CONTROLS

- Local exhaust ventilation is required where solids are handled as powders or crystals; even when particulates are relatively large, a certain proportion will be powdered by mutual friction.
- Exhaust ventilation should be designed to prevent accumulation and recirculation of particulates in the workplace.

Section 9 - PHYSICAL AND CHEMICAL PROPERTIES

PHYSICAL PROPERTIES

Solid.

Mixes with water.

State	Divided solid	Molecular Weight	289.18
Melting Range (°F)	401- 406.4	Viscosity	Not Applicable
Boiling Range (°F)	Not available	Solubility in water (g/L)	Miscible
Flash Point (°F)	Not available	pH (1% solution)	Not available
Decomposition Temp (°F)	Not available	pH (as supplied)	Not applicable
Autoignition Temp (°F)	Not available	Vapour Pressure (mmHG)	Negligible
Upper Explosive Limit (%)	Not available.	Specific Gravity (water=1)	Not available
Lower Explosive Limit (%)	Not available	Relative Vapor Density (air=1)	>1
Volatile Component (%vol)	Negligible	Evaporation Rate	Not applicable

APPEARANCE

Moist white, hygroscopic powder; mixes with water.

Section 10 - CHEMICAL STABILITY

CONDITIONS CONTRIBUTING TO INSTABILITY

- Presence of incompatible materials.
- Product is considered stable.

STORAGE INCOMPATIBILITY

- Avoid reaction with oxidizing agents.

For incompatible materials - refer to Section 7 - Handling and Storage.

Section 11 - TOXICOLOGICAL INFORMATION

ACETYLTHIOCHOLINE IODIDE

TOXICITY AND IRRITATION

ACETYLTHIOCHOLINE IODIDE:

- unless otherwise specified data extracted from RTECS - Register of Toxic Effects of Chemical Substances.

■ 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.

Most undiluted cationic surfactants satisfy the criteria for classification as Harmful (Xn) with R22 and as Irritant (Xi) for skin and eyes with R38 and R41.

For quaternary ammonium compounds (QACs):

Quaternary ammonium compounds (QACs) are cationic surfactants. They are synthetic organically tetra-substituted ammonium compounds, where the R substituents are alkyl or heterocyclic radicals. A common characteristic of these synthetic compounds is that one of the R's is a long-chain hydrophobic aliphatic residue

The cationic surface active compounds are in general more toxic than the anionic and non-ionic surfactants. The positively-charged cationic portion is the functional part of the molecule and the local irritation effects of QACs appear to result from the quaternary ammonium cation.

Due to their relative ability to solubilise phospholipids and cholesterol in lipid membranes, QACs affect cell permeability which may lead to cell death. Further QACs denature proteins as cationic materials precipitate protein and are accompanied by generalised tissue irritation.

It has been suggested that the experimentally determined decrease in acute toxicity of QACs with chain lengths above C16 is due to decreased water solubility.

In general it appears that QACs with a single long-chain alkyl groups are more toxic and irritating than those with two such substitutions. The straight chain aliphatic QACs have been shown to release histamine from minced guinea pig lung tissue. However, studies with benzalkonium chloride have shown that the effect on histamine release depends on the concentration of the solution. When cell suspensions (11% mast cells) from rats were exposed to low concentrations, a decrease in histamine release was seen. When exposed to high concentrations the opposite result was obtained.

In addition, QACs may show curare-like properties (specifically benzalkonium and cetylpyridinium derivatives, a muscular paralysis with no involvement of the central nervous system. This is most often associated with lethal doses. Parenteral injections in rats, rabbits and dogs have resulted in prompt but transient limb paralysis and sometimes fatal paresis of the respiratory muscles. This effect seems to be transient.

From human testing of different QACs the generalised conclusion is obtained that all the compounds investigated to date exhibit similar toxicological properties.

Acute toxicity: Studies in rats have indicated poor intestinal absorption of QACs. Acute toxicity of QACs varies with the compound and, especially, the route of administration. For some substances the LD50 value is several hundreds times lower by the i.p. or i.v. than the oral route, whereas toxicities between the congeners only differ in the range of two to five times.

At least some QACs are significantly more toxic in 50% dimethyl sulfoxide than in plain water when given orally

Probably all common QAC derivatives produce similar toxic reactions, but as tested in laboratory animals the oral mean lethal dose varies with the compound .

Oral toxicity: LD50 values for QACs have been reported within the range of 250-1000 mg/kg for rats, 150-1000 mg/kg for mice, 150-300 mg/kg for guinea pigs and about 500 mg/kg b.w. for rabbits and dogs . The ranges observed reflect differences in the study designs of these rather old experiments as well as differences between the various QACs.

The oral route of administration was characterised by delayed deaths, gastrointestinal lesions and respiratory and central nervous system depression. It was also found that given into a full stomach, the QACs lead to lower mortality and fewer gastrointestinal symptoms. This support the suggestion of an irritating effect

Dermal toxicity: It has been concluded that the maximum concentration that did not produce irritating effect on intact skin is 0.1%. Irritation became manifest in the 1-10% range. Concentrations below 0.1% have caused irritation in persons with contact dermatitis or broken skin.

Although the absorption of QACs through normal skin probably is of less importance than by other routes, studies with excised guinea pig skin have shown that the permeability constants strongly depends on the exposure time and type of skin

Sensitisation: Topical mucosal application of QACs may produce sensitisation. Reports on case stories and patch test have shown that compounds such as benzalkonium chloride, cetalkonium chloride and cetrimide may possibly act as sensitisers. However, in general it is suggested that QACs have a low potential for sensitising man. It is difficult to distinguish between an allergic and an irritative skin reaction due to the inherent skin irritating effect of QACs.

Long term/repeated exposure:

Inhalation: A group of 196 farmers (with or without respiratory symptoms) were evaluated for the relationship between exposure to QACs (unspecified, exposure levels not given) and respiratory disorders by testing for lung function and bronchial responsiveness to histamine. After histamine provocation statistically significant associations were found between the prevalence of mild bronchial responsiveness (including asthma-like symptoms) and the use of QACs as disinfectant. The association seems even stronger in people without respiratory symptoms.

Genetic toxicity: QACs have been investigated for mutagenicity in microbial test systems. In Ames tests using Salmonella typhimurium with and without metabolic activation no signs of mutagenicity has been observed. Negative results were also obtained in E. coli reversion and B. subtilis rec assays. However, for benzalkonium chloride also positive and equivocal results were seen in the B. subtilis rec assays.

No significant acute toxicological data identified in literature search.

Section 12 - ECOLOGICAL INFORMATION

Toxic to aquatic organisms.

This material and its container must be disposed of as hazardous waste.

Ecotoxicity

Ingredient	Persistence: Water/Soil	Persistence: Air	Bioaccumulation	Mobility
acetylthiocholine iodide	HIGH		LOW	HIGH

Section 13 - DISPOSAL CONSIDERATIONS

Disposal Instructions

All waste must be handled in accordance with local, state and federal regulations.

‡ Puncture containers to prevent re-use and bury at an authorized landfill.

Legislation addressing waste disposal requirements may differ by country, state and/ or territory. Each user must refer to laws operating in their area. In some areas, certain wastes must be tracked.

A Hierarchy of Controls seems to be common - the user should investigate:

- Reduction
- Reuse
- Recycling
- Disposal (if all else fails)

This material may be recycled if unused, or if it has not been contaminated so as to make it unsuitable for its intended use. Shelf life considerations should also be applied in making decisions of this type. Note that properties of a material may change in use, and recycling or reuse may not always be appropriate.

DO NOT allow wash water from cleaning equipment to enter drains. Collect all wash water for treatment before disposal.

- Recycle wherever possible.
- Consult manufacturer for recycling options or consult Waste Management Authority for disposal if no suitable treatment or disposal facility can be identified.

Section 14 - TRANSPORTATION INFORMATION

DOT:

Symbols: None Hazard class or Division: 6.1

Identification Numbers: UN2811 PG: III

Label Codes: 6.1 Special provisions: IB8, IP3, T1, TP33

Packaging: Exceptions: 153 Packaging: Non- bulk: 213

Packaging: Exceptions: 153 Quantity limitations: 100 kg

Passenger aircraft/rail:

Quantity Limitations: Cargo 200 kg Vessel stowage: Location: A aircraft only:

Vessel stowage: Other: None

Hazardous materials descriptions and proper shipping names:

Toxic solids, organic, n.o.s.

Air Transport IATA:

ICAO/IATA Class: 6.1 ICAO/IATA Subrisk: None

UN/ID Number: 2811 Packing Group: III

Special provisions: A3
Cargo Only
Packing Instructions: 619 Maximum Qty/Pack: 200 kg
Passenger and Cargo Passenger and Cargo
Packing Instructions: 619 Maximum Qty/Pack: 100 kg
Passenger and Cargo Limited Quantity Passenger and Cargo Limited Quantity
Packing Instructions: Y619 Maximum Qty/Pack: 10 kg
Shipping Name: TOXIC SOLID, ORGANIC, N.O.S. *(CONTAINS ACETYLTHIOCHOLINE IODIDE)

Maritime Transport IMDG:

IMDG Class: 6.1 IMDG Subrisk: None
UN Number: 2811 Packing Group: III
EMS Number: F-A , S-A Special provisions: 223 274
Limited Quantities: 5 kg
Shipping Name: TOXIC SOLID, ORGANIC, N.O.S.(contains acetylthiocholine iodide)

Section 15 - REGULATORY INFORMATION

acetylthiocholine iodide (CAS: 1866-15-5) is found on the following regulatory lists;

"Canada Domestic Substances List (DSL)", "US Toxic Substances Control Act (TSCA) - Inventory"

Section 16 - OTHER INFORMATION

LIMITED EVIDENCE

- Inhalation may produce health damage*.
- Cumulative effects may result following exposure*.
- Eye contact may produce serious damage*.
- Possible skin sensitiser*.
- May possibly be harmful to the foetus/ embryo*.

*(limited evidence).

ND

Substance CAS Suggested codes acetylthiocholine iodide 1866- 15- 5

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- Classification of the preparation and its individual components has drawn on official and authoritative sources as well as independent review by the Chemwatch Classification committee using available literature references.

A list of reference resources used to assist the committee may be found at:

www.chemwatch.net/references.

- The (M)SDS is a Hazard Communication tool and should be used to assist in the Risk Assessment. Many factors determine whether the reported Hazards are Risks in the workplace or other settings. Risks may be determined by reference to Exposures Scenarios. Scale of use, frequency of use and current or available engineering controls must be considered.

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