

CINNAMALDEHYDE

GHS Safety Data Sheet

Version No:4

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Section 1 - CHEMICAL PRODUCT AND COMPANY IDENTIFICATION

PRODUCT NAME

CINNAMALDEHYDE

OTHER NAMES

C9-H8-O, C6-H5-CH-CH-CHO, "cinnamic aldehyde", trans-cinnamaldehyde, phenylacrolein, 3-phenylacrolein, 3-phenylpropenal, 3-phenyl-2-propenal, "acrolein, 3-phenyl-", "2-propenal, 3-phenyl-", benzylideneacetaldehyde, "Cassia aldehyde", Cinnamal

PRODUCT USE

Flavours, perfumery.

SUPPLIER

Company: S D FINE- CHEM LIMITED

Address:

315- 317, T.V. INDUSTRIAL ESTATE,

248, WORLI,

MUMBAI- 400030.INDIA.

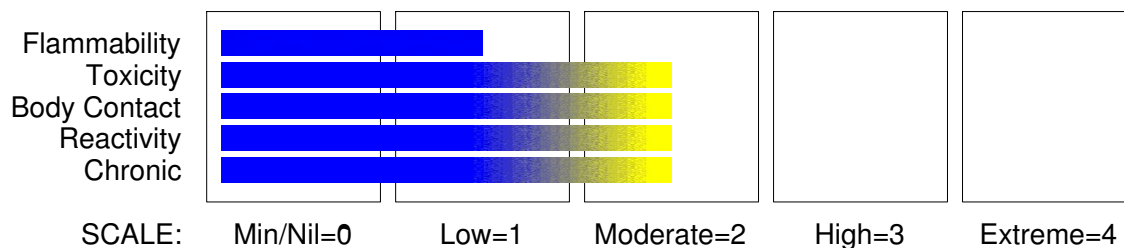
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HAZARD RATINGS



Section 2 - HAZARDS IDENTIFICATION

GHS Classification

Acute Toxicity (Dermal) Category 4

Acute Toxicity (Oral) Category 4

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Section 2 - HAZARDS IDENTIFICATION

Eye Irritation Category 2B
Respiratory Irritation Category 3
Respiratory Sensitizer Category 1
Skin Corrosion/Irritation Category 2
Skin Sensitizer Category 1



EMERGENCY OVERVIEW

HAZARD

DANGER

Determined by using GHS criteria:

H335 H312 H302 H315 H320 H334 H317

May cause respiratory irritation

Harmful in contact with skin

Harmful if swallowed

Causes skin irritation

Causes eye irritation

May cause allergic or asthmatic symptoms or breathing difficulties if inhaled

May cause allergic skin reaction

PRECAUTIONARY STATEMENTS

Prevention

Avoid breathing dust/fume/gas/mist/vapours/spray.

Wear protective gloves/clothing

Wash thoroughly after handling.

Contaminated clothing should not be allowed out of the workplace.

In case of inadequate ventilation wear respiratory protection.

Wash hands thoroughly after handling.

Do not eat, drink or smoke when using this product.

Response

IF SWALLOWED: Rinse mouth. Do NOT induce vomiting.

IF IN EYES: Rinse cautiously with water for several minutes. Remove contact lenses, if present and easy to do. Continue rinsing.

If skin irritation occurs, seek medical advice/attention.

If experiencing respiratory symptoms call a POISON CENTER or doctor/physician.

If skin irritation or rash occurs, seek medical advice/attention.

If eye irritation persists, get medical advice/attention.

IF INHALED: If breathing is difficult, remove to fresh air and keep at rest in a position comfortable for breathing.

Wash contaminated clothing before reuse.

Remove/Take off immediately all contaminated clothing

Specific treatment: refer to Label or MSDS.

Call a POISON CENTER or doctor/physician if you feel unwell.

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Section 2 - HAZARDS IDENTIFICATION

Wash/Decontaminate removed clothing before reuse.
IF ON SKIN: Gently wash with plenty of soap and water.

Storage

Store locked up.

Disposal

Dispose of contents and container in accordance with relevant legislation.

Section 3 - COMPOSITION / INFORMATION ON INGREDIENTS

NAME	CAS RN	%
cinnamaldehyde	104-55-2	> 99

Section 4 - FIRST AID MEASURES

SWALLOWED

If spontaneous vomiting appears imminent or occurs, hold patient's head down, lower than their hips to help avoid possible aspiration of vomitus.

- If swallowed do NOT induce vomiting.
- If vomiting occurs, lean patient forward or place on left side (head-down position, if possible) to maintain open airway and prevent aspiration.
- Observe the patient carefully.
- Never give liquid to a person showing signs of being sleepy or with reduced awareness; i.e. becoming unconscious.
- Give water to rinse out mouth, then provide liquid slowly and as much as casualty can comfortably drink.
- Seek medical advice.

EYE

If this product comes in contact with the eyes:

- Wash out immediately with fresh 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.
- If pain persists or recurs seek medical attention.
- Removal of contact lenses after an eye injury should only be undertaken by skilled personnel.

SKIN

If skin contact occurs:

- Immediately remove all contaminated clothing, including footwear.
- Flush skin and hair with running water (and soap if available).
- Seek medical attention in event of irritation.

INHALED

- If fumes or combustion products are inhaled remove from contaminated area.
- Other measures are usually unnecessary.

NOTES TO PHYSICIAN

Treat symptomatically.

Any material aspirated during vomiting may produce lung injury. Therefore emesis should not be induced mechanically or pharmacologically. Mechanical means should be used if it

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Section 4 - FIRST AID MEASURES

is considered necessary to evacuate the stomach contents; these include gastric lavage after endotracheal intubation. If spontaneous vomiting has occurred after ingestion, the patient should be monitored for difficult breathing, as adverse effects of aspiration into the lungs may be delayed up to 48 hours.

For simple aldehydes:

BASIC TREATMENT

- Establish a patent airway with suction where necessary.
- Watch for signs of respiratory insufficiency and assist ventilation as necessary.
- Administer oxygen by non-rebreather mask at 10 to 15 l/min.
- Monitor and treat, where necessary, for pulmonary oedema .
- Monitor and treat, where necessary, for shock.
- DO NOT use emetics. Where ingestion is suspected rinse mouth and give up to 200 ml water (5 ml/kg recommended) for dilution where patient is able to swallow, has a strong gag reflex and does not drool.
- Give activated charcoal.

ADVANCED TREATMENT

- Consider orotracheal or nasotracheal intubation for airway control in unconscious patient or where respiratory arrest has occurred.
- Consider intubation at first sign of upper airway obstruction resulting from oedema.
- Positive-pressure ventilation using a bag-valve mask might be of use.
- Monitor and treat, where necessary, for arrhythmias.
- Start an IV D5W TKO. If signs of hypovolaemia are present use lactated Ringers solution. Fluid overload might create complications.
- Drug therapy should be considered for pulmonary oedema.
- Hypotension with signs of hypovolaemia requires the cautious administration of fluids. Fluid overload might create complications.
- Treat seizures with diazepam.
- Proparacaine hydrochloride should be used to assist eye irrigation.

EMERGENCY DEPARTMENT

- Laboratory analysis of complete blood count, serum electrolytes, BUN, creatinine, glucose, urinalysis, baseline for serum aminotransferases (ALT and AST), calcium, phosphorus and magnesium, may assist in establishing a treatment regime. Other useful analyses include anion and osmolar gaps, arterial blood gases (ABGs), chest radiographs and electrocardiographs.
- Positive end-expiratory pressure (PEEP)-assisted ventilation may be required for acute parenchymal injury or adult respiratory distress syndrome.
- Treat bronchospasm in a similar manner to that employed for reactive airway disease. Severe exposures may require inhaled corticosteroids.
- Sodium bicarbonate may correct acidosis.
- Haemodialysis may assist in severely symptomatic patients.
- Consult a toxicologist as necessary.

BRONSTEIN, A.C. and CURRANCE, P.L.

EMERGENCY CARE FOR HAZARDOUS MATERIALS EXPOSURE: 2nd Ed. 1994.

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Section 5 - FIRE FIGHTING MEASURES

EXTINGUISHING MEDIA

- Alcohol stable foam.
- Dry chemical powder.
- BCF (where regulations permit).
- Carbon dioxide.
- Water spray or fog - Large fires only.

FIRE FIGHTING

- Alert Fire Brigade and tell them location and nature of hazard.
- Wear full body protective clothing with breathing apparatus.
- Prevent, by any means available, spillage from entering drains or water course.
- Use water delivered as a fine spray to control fire and cool adjacent area.
- Avoid spraying water onto liquid pools.
- DO NOT approach containers suspected to be hot.
- Cool fire exposed containers with water spray from a protected location.
- If safe to do so, remove containers from path of fire.

FIRE/EXPLOSION HAZARD

- Combustible.
- Slight fire hazard when exposed to heat or flame.
- Heating may cause expansion or decomposition leading to violent rupture of containers.
- On combustion, may emit toxic fumes of carbon monoxide (CO).
- May emit acrid smoke.
- Mists containing combustible materials may be explosive.

Combustion products include: carbon dioxide (CO₂), other pyrolysis products typical of burning organic material.

May emit poisonous fumes.

May emit corrosive fumes.

WARNING: Long standing in contact with air and light may result in the formation of potentially explosive peroxides.

FIRE INCOMPATIBILITY

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

Personal Protective Equipment

Gas tight chemical resistant suit.

Limit exposure duration to 1 BA set 30 mins.

Section 6 - ACCIDENTAL RELEASE MEASURES

EMERGENCY PROCEDURES

MINOR SPILLS

Slippery when spilt.

- Remove all ignition sources.
- Clean up all spills immediately.
- Avoid breathing vapours and contact with skin and eyes.
- Control personal contact by using protective equipment.

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Section 6 - ACCIDENTAL RELEASE MEASURES

- Contain and absorb spill with sand, earth, inert material or vermiculite.
- Wipe up.
- Place in a suitable labelled container for waste disposal.

MAJOR SPILLS

Slippery when spilt.

Moderate hazard.

- Clear area of personnel and move upwind.
- Alert Fire Brigade and tell them location and nature of hazard.
- Wear breathing apparatus plus protective gloves.
- Prevent, by any means available, spillage from entering drains or water course.
- No smoking, naked lights or ignition sources.
- Increase ventilation.
- Stop leak if safe to do so.
- Contain spill with sand, earth or vermiculite.
- Collect recoverable product into labelled containers for recycling.
- Absorb remaining product with sand, earth or vermiculite.
- Collect solid residues and seal in labelled drums for disposal.
- Wash area and prevent runoff into drains.
- If contamination of drains or waterways occurs, advise emergency services.

SAFE STORAGE WITH OTHER CLASSIFIED CHEMICALS



+: May be stored together

O: May be stored together with specific precautions

X: Must not be stored together

Personal Protective Equipment advice is contained in Section 8 of the MSDS.

Section 7 - HANDLING AND STORAGE

PROCEDURE FOR HANDLING

DO NOT allow clothing wet with material to stay in contact with skin.

- Avoid all personal contact, including inhalation.
- Wear protective clothing when risk of exposure occurs.
- Use in a well-ventilated area.
- Prevent concentration in hollows and sumps.
- DO NOT enter confined spaces until atmosphere has been checked.
- Avoid smoking, naked lights or ignition sources.
- Avoid contact with incompatible materials.
- When handling, DO NOT eat, drink or smoke.
- Keep containers securely sealed when not in use.
- Avoid physical damage to containers.
- Always wash hands with soap and water after handling.
- Work clothes should be laundered separately.
- Use good occupational work practice.
- Observe manufacturer's storing and handling recommendations.

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Section 7 - HANDLING AND STORAGE

- Atmosphere should be regularly checked against established exposure standards to ensure safe working conditions.

SUITABLE CONTAINER

- Metal can or drum
- Packaging as recommended by manufacturer.
- Check all containers are clearly labelled and free from leaks.

STORAGE INCOMPATIBILITY

Avoid strong bases.

- Flammable and/or toxic gases are generated by the combination of aldehydes with azo, diazo compounds, dithiocarbamates, nitrides, and strong reducing agents.
- Many aldehydes are incompatible with strong acids, amines, strong oxidisers, and alkaline materials.

Avoid reaction with oxidising agents.

STORAGE REQUIREMENTS

- Store in original containers.
- Keep containers securely sealed.
- No smoking, naked lights or ignition sources.
- Store in a cool, dry, well-ventilated area.
- Store away from incompatible materials and foodstuff containers.
- Protect containers against physical damage and check regularly for leaks.
- Observe manufacturer's storing and handling recommendations.

Section 8 - EXPOSURE CONTROLS / PERSONAL PROTECTION

EXPOSURE CONTROLS

The following materials had no OELs on our records

- cinnamaldehyde:

CAS:104- 55- 2

MATERIAL DATA

No exposure limits set by NOHSC or ACGIH.

Temporary estimated daily intake of cinnamaldehyde; up to 700 microgram per kilogram body weight. Further studies are needed.

Twenty-eight Report of the Joint FAO/WHO Expert Committee on Food Additives
Tech. Rep. Ser. Wld Hlth Org. No. 710, 1984.

Class A fragrance - common cosmetic and primary sensitiser (Nakayama 1998).

Odour Threshold Value: 0.0026 ppm

PERSONAL PROTECTION



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CINNAMALDEHYDE

Section 8 - EXPOSURE CONTROLS / PERSONAL PROTECTION

EYE

- Safety glasses with side shields.
- Chemical goggles.
- Contact lenses may pose a special hazard; soft contact lenses may absorb and concentrate irritants. A written policy document, describing the wearing of lens or restrictions on use, should be created for each workplace or task. This should include a review of lens absorption and adsorption for the class of chemicals in use and an account of injury experience. Medical and first-aid personnel should be trained in their removal and suitable equipment should be readily available. In the event of chemical exposure, begin eye irrigation immediately and remove contact lens as soon as practicable. Lens should be removed at the first signs of eye redness or irritation - lens should be removed in a clean environment only after workers have washed hands thoroughly. [CDC NIOSH Current Intelligence Bulletin 59].

HANDS/FEET

Suitability and durability of glove type is dependent on usage. Factors such as:

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

are important in the selection of gloves.

Wear chemical protective gloves, eg. PVC.

Wear safety footwear or safety gumboots, eg. Rubber.

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

OTHER

- Overalls.
- P.V.C. apron.
- Barrier cream.
- Skin cleansing cream.
- Eye wash unit.

RESPIRATOR

Selection of the Class and Type of respirator will depend upon the level of breathing zone contaminant and the chemical nature of the contaminant. Protection Factors (defined as the ratio of contaminant outside and inside the mask) may also be important.

Breathing Zone Level ppm (volume)	Maximum Protection Factor	Half- face Respirator	Full- Face Respirator
1000	10	A- AUS P	-
1000	50	-	A- AUS P
5000	50	Airline *	-
5000	100	-	A- 2 P
10000	100	-	A- 3 P
	100+		Airline**

* - Continuous Flow

** - Continuous-flow or positive pressure demand.

The local concentration of material, quantity and conditions of use determine the type of personal protective equipment required.

For further information consult your
Occupational Health and Safety Advisor.

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Section 8 - EXPOSURE CONTROLS / PERSONAL PROTECTION

ENGINEERING CONTROLS

General exhaust is adequate under normal operating conditions. Local exhaust ventilation may be required in special circumstances. If risk of overexposure exists, wear approved respirator. Supplied-air type respirator may be required in special circumstances. Correct fit is essential to ensure adequate protection. Provide adequate ventilation in warehouses and enclosed storage areas. Air contaminants generated in the workplace possess varying "escape" velocities which, in turn, determine the "capture velocities" of fresh circulating air required to effectively remove the contaminant.

Type of Contaminant:	Air Speed:
solvent, vapours, degreasing etc., evaporating from tank (in still air).	0.25- 0.5 m/s (50- 100 f/min)
aerosols, fumes from pouring operations, intermittent container filling, low speed conveyer transfers, welding, spray drift, plating acid fumes, pickling (released at low velocity into zone of active generation)	0.5- 1 m/s (100- 200 f/min.)
direct spray, spray painting in shallow booths, drum filling, conveyer loading, crusher dusts, gas discharge (active generation into zone of rapid air motion)	1- 2.5 m/s (200- 500 f/min.)
grinding, abrasive blasting, tumbling, high speed wheel generated dusts (released at high initial velocity into zone of very high rapid air motion)	2.5- 10 m/s (500- 2000 f/min.)

Within each range the appropriate value depends on:

Lower end of the range	Upper end of the range
1: Room air currents minimal or favourable to capture	1: Disturbing room air currents
2: Contaminants of low toxicity or of nuisance value only.	2: Contaminants of high toxicity
3: Intermittent, low production.	3: High production, heavy use
4: Large hood or large air mass in motion	4: Small hood- local control only

Simple theory shows that air velocity falls rapidly with distance away from the opening of a simple extraction pipe. Velocity generally decreases with the square of distance from the extraction point (in simple cases). Therefore the air speed at the extraction point should be adjusted, accordingly, after reference to distance from the contaminating source. The air velocity at the extraction fan, for example, should be a minimum of 1-2 m/s (200-400 f/min) for extraction of solvents generated in a tank 2 meters distant from the extraction point. Other mechanical considerations, producing performance deficits within the extraction apparatus, make it essential that theoretical air velocities are multiplied by factors of 10 or more when extraction systems are installed or used.

Section 9 - PHYSICAL AND CHEMICAL PROPERTIES

APPEARANCE

Yellowish oil with cinnamon odour and sweet taste. Soluble in

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Section 9 - PHYSICAL AND CHEMICAL PROPERTIES

5 volumes of 60% alcohol; very slightly soluble in water. Thickens on exposure to air.

PHYSICAL PROPERTIES

Liquid.
Does not mix with water.
Sinks in water.

Molecular Weight: 132.17
Melting Range (°C): - 8
Solubility in water (g/L): Partly miscible
pH (1% solution): Not applicable.
Volatile Component (%vol): 100
Relative Vapour Density (air=1): 4.5
Lower Explosive Limit (%): Not Available
Autoignition Temp (°C): Not available.
State: Liquid

Boiling Range (°C): 248
Specific Gravity (water=1): 1.05
pH (as supplied): Not applicable
Vapour Pressure (kPa): Not Available
Evaporation Rate: Not available
Flash Point (°C): Not available.
Upper Explosive Limit (%): Not Available
Decomposition Temp (°C): Not available.
Viscosity: Not Available

log Kow: 1.88

Section 10 - CHEMICAL STABILITY AND REACTIVITY INFORMATION

CONDITIONS CONTRIBUTING TO INSTABILITY

- Presence of incompatible materials.
- Product is considered stable.
- Hazardous polymerisation will not occur.

Section 11 - TOXICOLOGICAL INFORMATION

POTENTIAL HEALTH EFFECTS

ACUTE HEALTH EFFECTS

SWALLOWED

Accidental ingestion of the material may be damaging to the health of the individual. Swallowing of the liquid may cause aspiration into the lungs with the risk of chemical pneumonitis; serious consequences may result.
(ICSC13733).

Temporary estimated daily intake of cinnamaldehyde; up to 700 microgram per kilogram body weight. Further studies are needed.

Twenty-eight Report of the Joint FAO/WHO Expert Committee on Food Additives
Tech. Rep. Ser. Wld Hlth Org. No. 710, 1984.

EYE

Limited evidence exists, or practical experience suggests, that the material may cause eye irritation in a substantial number of individuals and/or is expected to produce significant ocular lesions which are present twenty-four hours or more after instillation into the eye(s) of experimental animals. Repeated or prolonged eye contact may cause inflammation characterised by temporary redness (similar to windburn) of the conjunctiva (conjunctivitis); temporary impairment of vision and/or other transient eye

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CINNAMALDEHYDE

Section 11 - TOXICOLOGICAL INFORMATION

damage/ulceration may occur.

Precautions for handling reactive unsaturated aldehydes should be the same as for those of highly active eye and pulmonary irritants such as phosgene. Sufficient engineering controls, with monitoring where possible, are of importance.

SKIN

Skin contact with the material may be harmful; systemic effects may result following absorption.

The material produces severe skin irritation; evidence exists, or practical experience predicts, that the material either:

- produces severe inflammation of the skin in a substantial number of individuals following direct contact, and/or
- produces significant and severe inflammation when applied to the healthy intact skin of animals (for up to four hours), such inflammation being present twenty-four hours or more after the end of the exposure period.
- Skin irritation may also be present after prolonged or repeated exposure; this may result in a form of contact dermatitis (nonallergic). The dermatitis is often characterised by skin redness (erythema) and swelling (oedema) which may progress to blistering (vesiculation), scaling and thickening of the epidermis. At the microscopic level there may be intercellular oedema of the spongy layer of the skin (spongiosis) and intracellular oedema of the epidermis.

NOTE: Prolonged contact is unlikely, given the severity of response, but repeated exposures may produce severe ulceration.

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

Limited evidence exists, or practical experience predicts, that the material produces irritation of the respiratory system in a significant number of individuals following inhalation.

The material is not thought to produce either adverse health effects or irritation of the respiratory tract following inhalation (as classified by EC Directives using animal models). Nevertheless, adverse systemic 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. Inhalation of vapours may cause drowsiness and dizziness. This may be accompanied by narcosis, reduced alertness, loss of reflexes, lack of coordination and vertigo.

Exposure to the simple aldehydes may result in central nervous system effects including headache, vertigo, seizures, depression and coma. Cardiovascular involvement may result in tachycardia, cardiovascular collapse and hypotension whilst respiratory tract involvement may result in irritation, upper airway oedema and laryngospasm, cough, dysphagia, pulmonary oedema, bronchial constriction, and asthma-like reactive airway disease. Gastrointestinal effects include nausea, vomiting (haematemesis), diarrhoea, severe mucosal necrosis and abdominal pain. Massive exposures may produce kidney and liver damage. Animals exposed to aldehyde vapours often show damage to the respiratory tract and pulmonary oedema. Multiple haemorrhages and alveolar exudate may also be present. In general, the aldehydes appear to be free of the actions that lead to cumulative organic damage to tissues. Intolerable irritant properties of these compounds preclude substantial worker exposure under normal conditions although these products may cause olfactory fatigue at lower concentrations and therefore may not provide adequate warning of overexposure based on smell alone. Rapid metabolic conversion to innocuous compounds probably limits those critical reactions necessary to initiate or promote tumourigenesis, although tissue irritation even at low exposure may promote tumour formation by other compounds. Caution is therefore mandatory. Development of short-term

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CINNAMALDEHYDE

Section 11 - TOXICOLOGICAL INFORMATION

tolerance to aldehyde vapours has been reported. This may be related to reaction with catecholamines leading to depletion of the catecholamine stores in the smooth muscle of the respiratory tract. Such depletion may cause the sensory nerve endings of the upper respiratory tract to exhibit reduced activity thus lessening the initial respiratory distress. Although a number of aldehydes produce narcosis, this effect is rarely observed because the irritation that accompanies exposure generally serves as a sufficient warning property.

CHRONIC HEALTH EFFECTS

Limited evidence shows that inhalation of the material is capable of inducing a sensitisation reaction in a significant number of individuals at a greater frequency than would be expected from the response of a normal population.

Pulmonary sensitisation, resulting in hyperactive airway dysfunction and pulmonary allergy may be accompanied by fatigue, malaise and aching. Significant symptoms of exposure may persist for extended periods, even after exposure ceases. Symptoms can be activated by a variety of nonspecific environmental stimuli such as automobile exhaust, perfumes and passive smoking.

Practical experience shows that skin contact with the material is capable either of inducing a sensitisation reaction in a substantial number of individuals, and/or of producing a positive response in experimental animals.

Intolerance to perfumes, by inhalation, may occur if the perfume contains a sensitising principal. Symptoms may vary from general illness, coughing, phlegm, wheezing, chest-tightness, headache, exertional dyspnoea, acute respiratory illness, hayfever, and other respiratory diseases (including asthma). Perfumes can induce hyper-reactivity of the respiratory tract without producing an IgE-mediated allergy or demonstrable respiratory obstruction. This was shown by placebo-controlled challenges of nine patients to "perfume mix". The same patients were also subject to perfume provocation, with or without a carbon filter mask, to ascertain whether breathing through a filter with active carbon would prevent symptoms. The patients breathed through the mouth, during the provocations, as a nose clamp was used to prevent nasal inhalation. The patient's earlier symptoms were verified; breathing through the carbon filter had no protective effect. The symptoms were not transmitted via the olfactory nerve but they may have been induced by trigeminal reflex via the respiratory tract or by the eyes.

Cases of occupational asthma induced by perfume substances such as isoamyl acetate, limonene, cinnamaldehyde and benzaldehyde, tend to give persistent symptoms even though the exposure is below occupational exposure limits.

Inhalation intolerance has also been produced in animals. The emissions of five fragrance products, for one hour, produced various combinations of sensory irritation, pulmonary irritation, decreases in expiratory airflow velocity as well as alterations of the functional observational battery indicative of neurotoxicity in mice. Neurotoxicity was found to be more severe after mice were repeatedly exposed to the fragrance products, being four brands of cologne and one brand of toilet water.

Certain substances, commonly found in perfumes or perfumed products, produce hypersensitivity. Sensitising constituents have been classified as Class A (common sensitisers) or Class B (rare sensitisers) in a Japanese study (Nakayama 1998). Contact allergy to perfumes occurs with a relatively high incidence, such incidence only surpassed by nickel allergy in the community. In a Danish study, it was found that about 1.1% of the population was allergic to Peru balsam or "fragrance mix".

There is no cure for perfume allergy. Once sensitised, exposure to even minute amounts of the perfume, gives rise to eruptions and eczema. These symptoms may be treated with steroid creams, although frequent recourse to this treatment produces unwanted side-effects.

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Section 11 - TOXICOLOGICAL INFORMATION

TOXICITY AND IRRITATION

TOXICITY

Oral (rat) LD50: 2220 mg/kg

The material may produce severe skin irritation after prolonged or repeated exposure, and may produce a contact dermatitis (nonallergic). This form of dermatitis is often characterised by skin redness (erythema) thickening of the epidermis.

IRRITATION

Skin (human): 40 mg/48h SEVERE

Histologically there may be intercellular oedema of the spongy layer (spongiosis) and intracellular oedema of the epidermis. Prolonged contact is unlikely, given the severity of response, but repeated exposures may produce severe ulceration. Contact allergies quickly manifest themselves as contact eczema, more rarely as urticaria or Quincke's oedema. The pathogenesis of contact eczema involves a cell-mediated (T lymphocytes) immune reaction of the delayed type. Other allergic skin reactions, e.g. contact urticaria, involve antibody-mediated immune reactions. The significance of the contact allergen is not simply determined by its sensitisation potential: the distribution of the substance and the opportunities for contact with it are equally important. A weakly sensitising substance which is widely distributed can be a more important allergen than one with stronger sensitising potential with which few individuals come into contact. From a clinical point of view, substances are noteworthy if they produce an allergic test reaction in more than 1% of the persons tested.

Section 12 - ECOLOGICAL INFORMATION

log Pow (Verschuereen 1983): 1.88

DO NOT discharge into sewer or waterways.

log Kow: 1.88

Toxicity Fish: TLm(96)>1ppm

Anaerobic effects: slow degrad.

Degradation Biological: some

processes Abiotic: fast photol & oxid, no hydrol

Section 13 - DISPOSAL CONSIDERATIONS

- Recycle wherever possible or consult manufacturer for recycling options.
- Consult State Land Waste Authority for disposal.
- Bury or incinerate residue at an approved site.
- Recycle containers if possible, or dispose of in an authorised landfill.
- Containers may still present a chemical hazard/ danger when empty.
- Return to supplier for reuse/ recycling if possible.

Otherwise:

- If container can not be cleaned sufficiently well to ensure that residuals do not remain or if the container cannot be used to store the same product, then puncture containers, to prevent re-use, and bury at an authorised landfill.
- Where possible retain label warnings and MSDS and observe all notices pertaining to the product.

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Section 14 - TRANSPORTATION INFORMATION

HAZCHEM: None

NOT REGULATED FOR TRANSPORT OF DANGEROUS GOODS:UN, IATA,
IMDG

Section 15 - REGULATORY INFORMATION

REGULATIONS

cinnamaldehyde (CAS: 104-55-2) is found on the following regulatory lists;
International Council of Chemical Associations (ICCA) - High Production Volume List
OECD Representative List of High Production Volume (HPV) Chemicals

Section 16 - OTHER INFORMATION

Denmark Advisory list for selfclassification of dangerous substances

Substance	CAS	Suggested codes
cinnamaldehyde	104- 55- 2	R43 N; R50

The above information is believed to be accurate and represent the best information currently available to us, but does not represent any warranty expressed or implied of the properties of the product. User should make their own investigation to determine the suitability of the information for their particular purpose.

Issue Date: 19-Jun-2018