November 2015



**Properties, Hazards and Safety Information for HDI\*** 

#### **Product: HDI (Hexamethylene-1,6-diisocyanate; CAS No. 822-06-0)**

Physical state	liquid
Colour	Colourless
Odour	pungent
Melting point/range	approx67°C
Boiling point/range	approx. 255°C (1013hPa)
Flash point	approx. 130°C
Ignition temperature	approx. 454°C
Lower/upper explosion limit	0.9/9.5% (Vol.)
Vapour pressure	approx. 0.007hPa (20°C)
Density	approx. 1.05 (20°C)
Water solubility	insoluble, reacts with water
Viscosity	approx. 2.4 mPas (20°C)
Hazardous	no dangerous decomposition products if properly stored and
decomposition	handled
products	
Hazardous reactions	with amines, alcohols, acids and alcali; decomposes in water with formation of $CO_2$ (leading to an increase in pressure in closed containers!)

#### **Physical and chemical data**

#### \*More detailed information should be taken from the suppliers' Material Safety Data Sheets

# **Toxicological Information**

Short ter	m exposure
Ingestion	Following bolus application in animals moderate acute toxicity was observed: $LD_{50}$ (rat) = 746 mg/kg. Ingestion may irritate the gastro-intestinal tract.
Skin contact	HDI is strongly irritant to corrosive upon skin contact and can result in sensitization.
Eye contact	HDI is strongly irritant to corrosive to the mucous membranes of the eyes.
Inhalation	Inhalation of HDI-vapors is toxic (LC50, rat = 0.124-0.35 mg/l/4 hours). The high toxicity can be related to lung damage due to the highly irritant/corrosive properties of HDI vapors. Concentration-dependent signs of respiratory tract irritation can be observed (e.g. bradypnea, dyspnea, edema, cyanosis, respiratory tract inflammation). Inhalation my result in respiratory tract sensitization and in sensitized people very low concentrations may lead to asthmatic symptoms, the onset of which may be delayed.

#### **Repeated exposure**

cor Inhalation Loc rep (in pro cor ser Carcinogenicity In a HD	cal skin irritation is the primary health effect following repeated dermal ntact to HDI. Furthermore sensitization may occur. cal irritation of the respiratory tract is the primary health effect following beated inhalation of HDI-vapors. In rodents the upper respiratory tract
rep (in pro cor ser Carcinogenicity In a HD	
HD	particular the nasal cavity) was identified as the most sensitive tissue, ogressing into lower areas of the respiratory tract with increasing vapor incentrations. HDI does not pose a neurotoxic hazard but may cause insitization by inhalation.
Reproductive In i	a combined chronic toxicity/oncogenicity inhalation study no evidence of I related carcinogenicity was found.
•	inhalation studies, HDI had no adverse effect on reproductive organs discussion discussion of developmetal

## **Exposure controls/Personal protection equipment**

General	Workers with a hypersensitivity of the respiratory tract and/or the skin (e.g. asthmatics or those suffering from chronic bronchitis or chronic skin complaint) should not be exposed to this chemical.					
OELs	In many countries occupational exposure limits for HDI have been set up. These can be found under →OELs HDI (see website under Library – Regulatory Information)					
DNEL	Application Area Route of Exposure	Workers Inhalation Acute - loo	lı	Vorkers nhalation ong-term -		
	Health Effect mg/m3	effects 0.07 mg/m	lo	ocal effects .035 mg/m3		
PNEC	PNECfreshwater	PNECmarine water	PNECSTR	PNECsediment freshwater	PNECsediment marine water	PNECsoil
	0.0774 mg/L	0.00774 mg/L	8.42 mg/L	>0.01334 mg/kg	>0.001334 mg/kg	>0.026 mg/kg

Respiratory protection	Respiratory protection is required if an inhalative exposure can not be excluded. Depending on the exposure scenario relevant for the interesting application more details are given in the extended MSDS of the supplier.
Hand protection	<ul> <li>Chemical resistant protective gloves should be worn, e.g.</li> <li>butyl rubber with a thickness ≥ 0.5 mm (breakthrough time ≥ 480 min)</li> <li>fluorinated rubber with a thickness ≥ 0.4 mm (breakthrough time ≥ 480</li> </ul>
	min) Contaminated gloves should be disposed of.
Body protection	Body protection should be chosen based on activity and possible exposure, e.g. apron, protecting boots, chemical-protection suit.
Eye protection	Face protection/close-fitting protective goggles should be worn.

### **First aid measures**

General	Contaminated clothing must be taken off immediately.
Skin	Wipe off mechanically and wash affected areas thoroughly with soap and water
contact	for at least 15 minutes. Dispose of contaminated clothing or wash thoroughly
	before reuse. For severe exposures, the affected person should get under a
	safety shower, using the flushing action of the water to remove the bulk of the
	chemical, then remove contaminated clothing and wash skin with soap and
	water. Seek medical attention. For lesser exposures, the individual should seek
	medical attention if irritation develops or persists after the area is washed.
Inhalation	The person should move to an area free from risk of further exposure. Oxygen
	or artificial respiration should be administered as needed. Asthmatic-type
	symptoms may develop and may be immediate or delayed up to 24 hours.
	Treatment is essentially symptomatic. A physician should be consulted.
Eye	Flush with large amounts of lukewarm water for at least 15 minutes, holding
contact	eyelids open all the time. Refer the affected individual to an eye specialist or
	other physician for immediate follow-up.
Ingestion	Vomiting should not be induced and nothing should be given orally to an
	unconscious or convulsing person. A physician should be consulted.

# **Ecological information**

Biodegradability	HDI is not readily biodegradable. It reacts with water forming solid insoluble polyurea, hexamethylene diamine (HDA) and CO <sub>2</sub> . HDA is inherently biodegradable, while polyurea is more or less inert and – due to its molecular size – not bioavailable.		
Bioaccumulation	Due to hydrolysis in water bioaccumulation of HDI is not expected. Bioaccumulation of the hydrolysis product HDA is also not expected due to its high solubility and its low Kow.		
Acute toxicity to aquatic organisms	<ul> <li>HDI offers a low level of aquatic toxicity. It is not toxic to aquatic organisms up to its limit of solubility in water</li> <li>LC0 (fish, Brachydanio rerio, 96h) ≥ 82.8mg/l</li> <li>EC50 (bacteria) = 842mg/l</li> <li>EC0 (Daphnia magna, 48 h) ≥ 89.1mg/l</li> <li>EC50 (algae, Scenedesmus subspicatus, 72h) ≥ 77.4mg/l</li> </ul>		

## **EC Classification and labeling**

## A. According CLP regulation 1272/2008

## **1. Classification according Annex VI, Table 3.1 (legally binding)**

Hazard class	Category	Hazard phrase
Acute Toxicity	4	H302: Harmful if swallowed
Acute Toxicity	1	H330: Fatal if inhaled
Skin Corrosion/Irritation	2	H315: Causes skin irritation
Eye irritation/damage	2	H319: Causes serious eye irritation
Respiratory sensitization	1	H334: May cause allergy or asthma symp- toms or breathing difficulties if inhaled
Skin sensitization	1	H317: May cause an allergic skin reaction
STOT single exposure	3	H335: May cause respiratory irritation

## 2. Labeling according regulation 1272/2008 (CLP) According Annex VI, Table 3.1 (legally binding)

Pictograms	
Signal word	Danger
Hazard statement	H302: Harmfull if swallowed
	H330: Fatal if inhaled
	H315: Causes skin irritation.
	H319: Causes serious eye irritation
	H334: May cause allergic or asthma symptoms or breathing difficulties if inhaled
	H317: May cause an allergic skin reaction
	H335: May cause respiratory irritation

# **B.)** Classification and labeling according Annex VI, Table 3.2 of regulation 1272/2008 (CLP)

Symbols	Т	Toxic
Risk phrases		Toxic by inhalation Irritating to eyes, respiratory system and skin.