

Renewal Assessment Report

beta-cyfluthrin

Volume 3 – B.4 Further information

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Rapporteur Member State: Germany
Co-Rapporteur Member State: Hungary

Version history

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B.4 Further information

A new safety data sheet for technical beta-cyfluthrin according to Regulation (EC) No. 1907/2006 was provided.

B.4.1 Methods and precautions concerning handling, storage, transport or fire

Reference:

Anonymous (2014), Safety data sheet - Beta-cyfluthrinTC, M-478284-01-1, Bayer CropScience (BVL no 2632903)

B.4.1.1 Handling

Advice on safe handling:	Use only in area provided with appropriate exhaust ventilation.
Advice on protection against fire and explosion:	Dust may form explosive mixture in air. Keep away from heat and sources of ignition.
Hygiene measures:	Avoid contact with skin, eyes and clothing. Keep working clothes separately. Wash hands immediately after work, if necessary take a shower. Remove soiled clothing immediately and clean thoroughly before using again. Garments that cannot be cleaned must be destroyed (burnt).

B.4.1.2 Storage

Requirements for storage areas and containers:	Store in original container. Keep containers tightly closed in a dry, cool and well-ventilated place. Store in a place accessible by authorized persons only.
Advice on common storage:	Keep away from food, drink and animal feedingstuffs.
Suitable materials:	Combination of sheet metal and HDPE (high density polyethylene)

B.4.1.3 Transport

Land transport ADR/RID:	Pyrethroid pesticide, solid, toxic (beta-cyfluthrin) UN No.: UN3349; Class: 6.1; Packing Group: II Environm. hazardous mark: yes (hazard no.: 60, tunnel code: D/E)
Maritime transport IMDG:	Pyrethroid pesticide, solid, toxic (beta-cyfluthrin) UN No.: UN3349; Class: 6.1; Packing Group: II Marine pollutant: yes
Air transport IATA:	Pyrethroid pesticide, solid, toxic (beta-cyfluthrin) UN No.: UN3349; Class: 6.1; Packing Group: II Environm. hazardous mark: no

B.4.1.4 Fire fighting measures

Extinguishing media:	Water spray, carbon dioxide (CO ₂), foam, sand
Special hazards arising from the substance or mixture:	In the event of fire the following may be released: Hydrogen chloride (HCl), hydrogen cyanide (hydrocyanic acid), hydrogen fluoride, carbon monoxide (CO), nitrogen oxides (NO _x)
Special protective equipment	In the event of fire and/ or explosion do not breathe fumes. In the

for fire-fighters:	event of fire, wear self-contained breathing apparatus.
Further information:	Contain the spread of the fire-fighting media. Do not allow run-off from fire fighting to enter drains or water courses.

B.4.2 Procedures for destruction or decontamination

Waste disposal according to 91/689/EEC in the corresponding versions (hazardous waste).
Consider classifications (European waste catalogue) 02 01 or 07 04.
Consult the appropriate local authorities regarding special requirements.
Dispose of contents/container in accordance with local/national/international regulations.

B.4.3 Emergency measures in case of an accident

Reference:

Anonymous (2014), Safety data sheet - Beta-cyfluthrinTC, M-478284-01-1, Bayer CropScience (BVL no 2632906)

First-aid measures:

General information:	Move out of dangerous area. Place and transport victim in stable position (lying sideways). Remove contaminated clothing immediately and dispose of safely.
After eye contact:	Rinse immediately with plenty of water, also under the eyelids, for at least 15 minutes. Remove contact lenses, if present, after the first 5 minutes, then continue rinsing eye. Warm water may increase the subjective severity of the irritation/paresthesia. This is not a sign of systemic poisoning. Apply soothing eye drops, if needed anaesthetic eye drops. Get medical attention if irritation develops and persists.
After skin contact:	Wash off thoroughly with plenty of soap and water, if available with polyethyleneglycol 400, subsequently rinse with water. Warm water may increase the subjective severity of the irritation/paresthesia. This is not a sign of systemic poisoning. In case of skin irritation, application of oils or lotions containing vitamin E may be considered. If symptoms persist, call a physician.
After inhalation:	Move to fresh air in case of accidental inhalation of vapours or decomposition products. Oxygen or artificial respiration if needed. Call a physician or poison control center immediately.
After ingestion:	Rinse mouth. Induce vomiting only, if: 1. patient is fully conscious, 2. medical aid is not readily available, 3. a significant amount (more than a mouthful) has been ingested and 4. time since ingestion is less than 1 hour. (Vomit should not get into the respiratory tract.) Call a physician or poison control center immediately.
Most important symptoms and effects, both acute and delayed:	Local:, Skin and eye paraesthesia which may be severe, Usually transient with resolution within 24 hours, Skin, eye and mucous membrane irritation, Cough, Sneezing Systemic:, Discomfort in the chest, Tachycardia, Hypotension, Nausea, Abdominal pain, Diarrhoea, Vomiting, Dizziness, Blurred vision, Headache, Anorexia, Somnolence, Coma, Convulsions, Tremors, Prostration, Airway hyperreaction, Pulmonary oedema, Palpitation, Muscular fasciculation, Apathy
Indication of any immediate medical attention and special	Risks: This product contains a pyrethroid. Pyrethroid poisoning should not

treatment needed: be confused with carbamate or organophosphate poisoning.
Treatment:
Local treatment: Initial treatment: symptomatic.
Systemic treatment: Initial treatment: symptomatic. Monitor: respiratory and cardiac functions. In case of ingestion gastric lavage should be considered in cases of significant ingestions only within the first 2 hours.
However, the application of activated charcoal and sodium sulphate is always advisable. Keep respiratory tract clear. Oxygen or artificial respiration if needed. In case of convulsions, a benzodiazepine (e.g. diazepam) should be given according to standard regimens. If not effective, phenobarbital may be used. Contraindication: atropine.
Contraindication: derivatives of adrenaline. There is no specific antidote.

Accidental release measure:

Personal precautions: Avoid contact with spilled product or contaminated surfaces. Use personal protective equipment. Remove all sources of ignition.
Environmental precautions: Do not allow to get into surface water, drains and ground water.
Methods for cleaning up: Use mechanical handling equipment. Clean contaminated floors and objects thoroughly, observing environmental regulations. Keep in suitable, closed containers for disposal.

Reference:

Steffens (2014), Occupational medical experiences with beta-cyfluthrin, M-476492-01-1, Bayer Crop-Science (BVL no 2632907)

First Aid

- Remove patient from exposure/terminate exposure under self-protection (e.g. long gloves).
- Thorough skin decontamination with copious amounts water and soap/detergent, as pyrethroids are not very soluble in plain water. Please note that warm water may increase the subjective severity of the irritation/paresthesia, which is not a sign of systemic poisoning.
- Flushing of the eyes with lukewarm water for 15 minutes, apply soothing eyedrops, if needed anesthetizing eyedrops.
- Induction of vomiting should only be considered if a significant amount has been swallowed (more than a mouthful), if the ingestion was less than one hour ago, and if the patient is fully conscious. Induced vomiting can remove maximum 50 % of the ingested substance.

Note: Induction of vomiting is forbidden, if a formulation containing organic solvents has been ingested!

Treatment

- Gastric lavage should be considered in cases of significant ingestions within the first 2 hours; however, the application of activated charcoal and sodium sulphate is always advisable in significant ingestions.
- There is no specific antidote for pyrethroids, any treatment thus can only be symptomatic. Reports from the USA seem to indicate a positive effect of vitamin-E-containing oils on the irritation/paresthesia, however, there is no real proof of this. The skin application of oils or lotions containing vitamin E may be considered. The skin irritation may be painful and require the application of analgesics.
- Anaesthetic eyedrops may be required in case of eye contamination after flushing.
- In cases of severe ingestions cardiac and respiratory function should be monitored.
- In case of convulsions diazepam is the anticonvulsant of choice. Thus seizure management should

follow standard practice using benzodiazepines (with oxygen and airway protection), if insufficiently effective followed by Phenobarbital infusion as required for status epilepticus. A suggested regimen would be: start with 10 to 30 mg diazepam by intravenous injection according to body weight, for children pro rata. This dose is to be repeated every 10 to 30 minutes according to the patient's response.

B.4.4 References relied on

Annex point / reference number	Author(s)	Year	Title Source (where different from company) Company name, Report No., Date, GLP status (where relevant), published or not	Vertebrate study Y/N	Data protection claimed Y/N	Justification if data protection is claimed	Owner
KCA 3.8 /02 KCA 3.9 /02 KCA 3.10 /01	Anonymous	2014	Safety data sheet - Beta-cyfluthrinTC Report No.: M-478284-01-1, Edition Number: M-478284-01-1 Date: 2014-02-11 GLP/GEP: no, published 2632903 / 2632905 / 2632906	N	N		LIT
KCA 3.9 /01	Bascou, J. P.	2004	Beta-Cyfluthrin - Incineration as a safe means of disposal and pyrolytic behaviour under controlled conditions Bayer CropScience S.A., Lyon, France BCS-Irvita, Report No.: MO-04-004460, Edition Number: M-066091-01-1 Date: 2004-04-23 GLP/GEP: no, unpublished 2632904	N	N		BCS-Irvita
KCA 3.10 /02	Steffens, W.	2014	Occupational medical experiences with beta-cyfluthrin BCS-Irvita, Report No.: M-476492-01-1, Edition Number: M-476492-01-1 Date: 2014-01-20 GLP/GEP: no, unpublished 2632903	N	N		BCS-Irvita

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Black writing indicates a Supplementary Dossier Study