Ranvet's Energy Max

Ranvet Pty Ltd

Chemwatch Hazard Alert Code: 3

Chemwatch: **5579-93**
Version No: **2.1**
Safety Data Sheet according to Work Health and Safety Regulations (Hazardous Chemicals) 2023 and ADG requirements

Issue Date: **01/12/2023**
Print Date: **08/08/2024**
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SECTION 1 Identification of the substance / mixture and of the company / undertaking

Product Identifier

Product name	Ranvet's Energy Max
Chemical Name	Not Applicable
Synonyms	size: 1L
Chemical formula	Not Applicable
Other means of identification	Not Available

Relevant identified uses of the substance or mixture and uses advised against

Relevant identified uses	Glycerophosphate and Iron Supplement for Greyhounds with added Choline.

Details of the manufacturer or supplier of the safety data sheet

Registered company name	**Ranvet Pty Ltd**
Address	10-12 Green Street Banksmeadow NSW 2019 Australia
Telephone	+61 2 9666 1744
Fax	+61 2 9666 1755
Website	https://www.ranvet.com.au/other_msds.htm
Email	info@ranvet.com.au

Emergency telephone number

Association / Organisation	**Ranvet Pty Ltd**
Emergency telephone numbers	+61 417 580 980
Other emergency telephone numbers	Not Available

SECTION 2 Hazards identification

Classification of the substance or mixture

HAZARDOUS CHEMICAL. NON-DANGEROUS GOODS. According to the WHS Regulations and the ADG Code.

Chemwatch Hazard Ratings

	Min	Max
Flammability	0	
Toxicity	3	
Body Contact	2	
Reactivity	1	
Chronic	2	

0 = Minimum
1 = Low
2 = Moderate
3 = High
4 = Extreme

Poisons Schedule	Not Applicable
Classification [1]	Skin Corrosion/Irritation Category 2, Sensitisation (Skin) Category 1, Serious Eye Damage/Eye Irritation Category 2A, Acute Toxicity (Inhalation) Category 3, Specific Target Organ Toxicity - Single Exposure (Respiratory Tract Irritation) Category 3, Hazardous to the Aquatic Environment Acute Hazard Category 3
Legend:	***1. Classified by Chemwatch; 2. Classification drawn from HCIS; 3. Classification drawn from Regulation (EU) No 1272/2008 - Annex VI***

Label elements

Hazard pictogram(s)	
Signal word	**Danger**

Hazard statement(s)

H315	Causes skin irritation.
H317	May cause an allergic skin reaction.
H319	Causes serious eye irritation.

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H331	Toxic if inhaled.
H335	May cause respiratory irritation.
H402	Harmful to aquatic life.

Precautionary statement(s) Prevention

P271	Use only outdoors or in a well-ventilated area.
P280	Wear protective gloves, protective clothing, eye protection and face protection.
P261	Avoid breathing mist/vapours/spray.
P273	Avoid release to the environment.
P264	Wash all exposed external body areas thoroughly after handling.
P272	Contaminated work clothing should not be allowed out of the workplace.

Precautionary statement(s) Response

P302+P352	IF ON SKIN: Wash with plenty of water.
P305+P351+P338	IF IN EYES: Rinse cautiously with water for several minutes. Remove contact lenses, if present and easy to do. Continue rinsing.
P304+P340	IF INHALED: Remove person to fresh air and keep comfortable for breathing.
P311	Call a POISON CENTER/doctor/physician/first aider.
P333+P313	If skin irritation or rash occurs: Get medical advice/attention.
P337+P313	If eye irritation persists: Get medical advice/attention.
P362+P364	Take off contaminated clothing and wash it before reuse.

Precautionary statement(s) Storage

P403+P233	Store in a well-ventilated place. Keep container tightly closed.
P405	Store locked up.

Precautionary statement(s) Disposal

P501	Dispose of contents/container to authorised hazardous or special waste collection point in accordance with any local regulation.

SECTION 3 Composition / information on ingredients

Substances

See section below for composition of Mixtures

Mixtures

CAS No	%[weight]	Name
110-44-1	30-60	sorbic acid
67-48-1	<10	choline chloride
1185-57-5	<10	ammonium ferric citrate
7664-38-2	<5	phosphoric acid
Not Available	balance	ingredients not contributing to the classification, including
7732-18-5		water
Legend:	***1. Classified by Chemwatch; 2. Classification drawn from HCIS; 3. Classification drawn from Regulation (EU) No 1272/2008 - Annex VI; 4. Classification drawn from C&L; * EU IOELVs available***	

SECTION 4 First aid measures

Description of first aid measures

Eye Contact	▸ If in eyes, hold eyelids apart and flush the eye continuously with running water. ▸ Continue flushing until advised to stop by the Poisons Information Centre or a doctor, or for at least 15 minutes. ▸ 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. ▸ Seek medical attention without delay; if pain persists or recurs seek medical attention. ▸ Removal of contact lenses after an eye injury should only be undertaken by skilled personnel.
Skin Contact	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.
Inhalation	▸ If fumes or combustion products are inhaled remove from contaminated area. ▸ Lay patient down. Keep warm and rested. ▸ Prostheses such as false teeth, which may block airway, should be removed, where possible, prior to initiating first aid procedures. ▸ Apply artificial respiration if not breathing, preferably with a demand valve resuscitator, bag-valve mask device, or pocket mask as trained. Perform CPR if necessary. ▸ Transport to hospital, or doctor, without delay.
Ingestion	▸ 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. ▸ For advice, contact a Poisons Information Centre or a doctor.

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Indication of any immediate medical attention and special treatment needed

Treat symptomatically.

For acute or short term repeated exposures to iron and its derivatives:
- Always treat symptoms rather than history.
- In general, however, toxic doses exceed 20 mg/kg of ingested material (as elemental iron) with lethal doses exceeding 180 mg/kg.
- Control of iron stores depend on variation in absorption rather than excretion. Absorption occurs through aspiration, ingestion and burned skin.
- Hepatic damage may progress to failure with hypoprothrombinaemia and hypoglycaemia. Hepatorenal syndrome may occur.
- Iron intoxication may also result in decreased cardiac output and increased cardiac pooling which subsequently produces hypotension.
- Serum iron should be analysed in symptomatic patients. Serum iron levels (2-4 hrs post-ingestion) greater that 100 ug/dL indicate poisoning with levels, in excess of 350 ug/dL, being potentially serious. Emesis or lavage (for obtunded patients with no gag reflex)are the usual means of decontamination.
- Activated charcoal does not effectively bind iron.
- Catharsis (using sodium sulfate or magnesium sulfate) may only be used if the patient already has diarrhoea.
- Deferoxamine is a specific chelator of ferric (3+) iron and is currently the antidote of choice. It should be administered parenterally. [Ellenhorn and Barceloux: Medical Toxicology]

SECTION 5 Firefighting measures

Extinguishing media
- There is no restriction on the type of extinguisher which may be used.
- Use extinguishing media suitable for surrounding area.

Special hazards arising from the substrate or mixture

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

Advice for firefighters

Fire Fighting	▸ Alert Fire Brigade and tell them location and nature of hazard. ▸ Wear breathing apparatus plus protective gloves in the event of a fire. ▸ Prevent, by any means available, spillage from entering drains or water courses. ▸ Use fire fighting procedures suitable for surrounding area. ▸ **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. ▸ Equipment should be thoroughly decontaminated after use.
Fire/Explosion Hazard	▸ Non combustible. ▸ Not considered to be a significant fire risk. ▸ Expansion or decomposition on heating may lead to violent rupture of containers. ▸ Decomposes on heating and may produce toxic fumes of carbon monoxide (CO). ▸ May emit acrid smoke. Decomposition may produce toxic fumes of: carbon dioxide (CO_2) nitrogen oxides (NOx) sulfur oxides (SOx) metal oxides other pyrolysis products typical of burning organic material. May emit poisonous fumes. May emit corrosive fumes.
HAZCHEM	Not Applicable

SECTION 6 Accidental release measures

Personal precautions, protective equipment and emergency procedures

See section 8

Environmental precautions

See section 12

Methods and material for containment and cleaning up

Minor Spills	▸ Clean up all spills immediately. ▸ Avoid breathing vapours and contact with skin and eyes. ▸ Control personal contact with the substance, by using protective equipment. ▸ Contain and absorb spill with sand, earth, inert material or vermiculite. ▸ Wipe up. ▸ Place in a suitable, labelled container for waste disposal.
Major Spills	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. ▸ Stop leak if safe to do so. ▸ Contain spill with sand, earth or vermiculite. ▸ Collect recoverable product into labelled containers for recycling. ▸ Neutralise/decontaminate residue (see Section 13 for specific agent). ▸ Collect solid residues and seal in labelled drums for disposal. ▸ Wash area and prevent runoff into drains. ▸ After clean up operations, decontaminate and launder all protective clothing and equipment before storing and re-using. ▸ If contamination of drains or waterways occurs, advise emergency services.

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

SECTION 7 Handling and storage

Precautions for safe handling

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Safe 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. ▸ **DO NOT** allow material to contact humans, exposed food or food utensils. ▸ 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. Launder contaminated clothing before re-use. ▸ Use good occupational work practice. ▸ Observe manufacturer's storage and handling recommendations contained within this SDS. ▸ Atmosphere should be regularly checked against established exposure standards to ensure safe working conditions are maintained.
Other information	▸ Store in original containers. ▸ Keep containers securely sealed. ▸ 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 storage and handling recommendations contained within this SDS.

Conditions for safe storage, including any incompatibilities

Suitable container	▸ Polyethylene or polypropylene container. ▸ Packing as recommended by manufacturer. ▸ Check all containers are clearly labelled and free from leaks.
Storage incompatibility	▸ Avoid reaction with oxidising agents, bases and strong reducing agents.

SECTION 8 Exposure controls / personal protection

Control parameters

Occupational Exposure Limits (OEL)

INGREDIENT DATA

Source	Ingredient	Material name	TWA	STEL	Peak	Notes
Australia Exposure Standards	ammonium ferric citrate	Iron salts, soluble (as Fe)	1 mg/m3	Not Available	Not Available	Not Available
Australia Exposure Standards	phosphoric acid	Phosphoric acid	1 mg/m3	3 mg/m3	Not Available	Not Available

Emergency Limits

Ingredient	TEEL-1	TEEL-2	TEEL-3
phosphoric acid	Not Available	Not Available	Not Available

Ingredient	Original IDLH	Revised IDLH
sorbic acid	Not Available	Not Available
choline chloride	Not Available	Not Available
ammonium ferric citrate	Not Available	Not Available
phosphoric acid	1,000 mg/m3	Not Available
water	Not Available	Not Available

Occupational Exposure Banding

Ingredient	Occupational Exposure Band Rating	Occupational Exposure Band Limit
sorbic acid	E	≤ 0.01 mg/m³
choline chloride	E	≤ 0.01 mg/m³
Notes:	***Occupational exposure banding is a process of assigning chemicals into specific categories or bands based on a chemical's potency and the adverse health outcomes associated with exposure. The output of this process is an occupational exposure band (OEB), which corresponds to a range of exposure concentrations that are expected to protect worker health.***	

MATERIAL DATA

Exposure controls

Appropriate engineering controls

None required when handling small quantities.
OTHERWISE:
Engineering controls are used to remove a hazard or place a barrier between the worker and the hazard. Well-designed engineering controls can be highly effective in protecting workers and will typically be independent of worker interactions to provide this high level of protection.
The basic types of engineering controls are:
Process controls which involve changing the way a job activity or process is done to reduce the risk.
Enclosure and/or isolation of emission source which keeps a selected hazard "physically" away from the worker and ventilation that strategically "adds" and "removes" air in the work environment. Ventilation can remove or dilute an air contaminant if designed properly. The design of a ventilation system must match the particular process and chemical or contaminant in use.
Employers may need to use multiple types of controls to prevent employee overexposure.

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-

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	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.

Individual protection measures, such as personal protective equipment

Eye and face protection

No special equipment for minor exposure i.e. when handling small quantities.
OTHERWISE:
- Safety glasses with side shields.
- Contact lenses may pose a special hazard; soft contact lenses may absorb and concentrate irritants. A written policy document, describing the wearing of lenses 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], [AS/NZS 1336 or national equivalent]

Skin protection

See Hand protection below

Hands/feet protection

- Wear general protective gloves, eg. light weight rubber gloves.

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.
- Contaminated leather items, such as shoes, belts and watch-bands should be removed and destroyed.

Body protection

See Other protection below

Other protection

No special equipment needed when handling small quantities.
OTHERWISE:
- Overalls.
- Barrier cream.
- Eyewash unit.

Recommended material(s)

GLOVE SELECTION INDEX

Glove selection is based on a modified presentation of the:
"Forsberg Clothing Performance Index".
The effect(s) of the following substance(s) are taken into account in the ***computer-generated*** selection:
Ranvet's Energy Max

Material	CPI
NEOPRENE	A
BUTYL	C
NAT+NEOPR+NITRILE	C
NATURAL RUBBER	C
NATURAL+NEOPRENE	C
NEOPRENE/NATURAL	C
NITRILE	C
NITRILE+PVC	C
PE	C
PVA	C
PVC	C
SARANEX-23	C
VITON	C

* CPI - Chemwatch Performance Index
A: Best Selection
B: Satisfactory; may degrade after 4 hours continuous immersion
C: Poor to Dangerous Choice for other than short term immersion
NOTE: As a series of factors will influence the actual performance of the glove, a final selection must be based on detailed observation. -

Respiratory protection

Type B-P Filter of sufficient capacity. (AS/NZS 1716 & 1715, EN 143:2000 & 149:2001, ANSI Z88 or national equivalent)

Where the concentration of gas/particulates in the breathing zone, approaches or exceeds the "Exposure Standard" (or ES), respiratory protection is required. Degree of protection varies with both face-piece and Class of filter; the nature of protection varies with Type of filter.

Required Minimum Protection Factor	Half-Face Respirator	Full-Face Respirator	Powered Air Respirator
up to 10 x ES	B-AUS P2	-	B-PAPR-AUS / Class 1 P2
up to 50 x ES	-	B-AUS / Class 1 P2	-
up to 100 x ES	-	B-2 P2	B-PAPR-2 P2 ^

^ - Full-face
A(All classes) = Organic vapours, B AUS or B1 = Acid gasses, B2 = Acid gas or hydrogen cyanide(HCN), B3 = Acid gas or hydrogen cyanide(HCN), E = Sulfur dioxide(SO2), G = Agricultural chemicals, K = Ammonia(NH3), Hg = Mercury, NO = Oxides of nitrogen, MB = Methyl bromide, AX = Low boiling point organic compounds(below 65 degC)

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* Where the glove is to be used on a short term, casual or infrequent basis, factors such as "feel" or convenience (e.g. disposability), may dictate a choice of gloves which might otherwise be unsuitable following long-term or frequent use. A qualified practitioner should be consulted.

Ansell Glove Selection

Glove — *In order of recommendation*
AlphaTec® Solvex® 37-675
AlphaTec® Solvex® 37-185
AlphaTec® 58-008
AlphaTec® 58-530B
AlphaTec® 58-530W
AlphaTec® 58-735
AlphaTec® 79-700
DermaShield™ 73-711
MICROFLEX® 63-864
MICROFLEX® 73-847

The suggested gloves for use should be confirmed with the glove supplier.

SECTION 9 Physical and chemical properties

Information on basic physical and chemical properties

Appearance	Dark brown liquid.

Physical state	Liquid	**Relative density (Water = 1)**	Not Available
Odour	Not Available	**Partition coefficient n-octanol / water**	Not Available
Odour threshold	Not Available	**Auto-ignition temperature (°C)**	Not Applicable
pH (as supplied)	Not Available	**Decomposition temperature (°C)**	Not Available
Melting point / freezing point (°C)	Not Available	**Viscosity (cSt)**	Not Available
Initial boiling point and boiling range (°C)	Not Available	**Molecular weight (g/mol)**	Not Applicable
Flash point (°C)	Not Applicable	**Taste**	Not Available
Evaporation rate	Not Available	**Explosive properties**	Not Available
Flammability	Not Applicable	**Oxidising properties**	Not Available
Upper Explosive Limit (%)	Not Applicable	**Surface Tension (dyn/cm or mN/m)**	Not Available
Lower Explosive Limit (%)	Not Applicable	**Volatile Component (%vol)**	Not Available
Vapour pressure (kPa)	Not Available	**Gas group**	Not Available
Solubility in water	Not Available	**pH as a solution (1%)**	Not Available
Vapour density (Air = 1)	Not Available	**VOC g/L**	Not Available

SECTION 10 Stability and reactivity

Reactivity	See section 7
Chemical stability	▸ Unstable in the presence of incompatible materials. ▸ Product is considered stable. ▸ Hazardous polymerisation will not occur.
Possibility of hazardous reactions	See section 7
Conditions to avoid	See section 7
Incompatible materials	See section 7
Hazardous decomposition products	See section 5

SECTION 11 Toxicological information

Information on toxicological effects

Inhaled	Not normally a hazard due to non-volatile nature of product Evidence shows, or practical experience predicts, that the material produces irritation of the respiratory system, in a substantial number of individuals, following inhalation. In contrast to most organs, the lung is able to respond to a chemical insult by first removing or neutralising the irritant and then repairing the damage. The repair process, which initially evolved to protect mammalian lungs from foreign matter and antigens, may however, produce further lung damage resulting in the impairment of gas exchange, the primary function of the lungs. Respiratory tract irritation often results in an inflammatory response involving the recruitment and activation of many cell types, mainly derived from the vascular system.
Ingestion	Accidental ingestion of the material may be damaging to the health of the individual. Ingestion of low-molecular organic acid solutions may produce spontaneous haemorrhaging, intravascular coagulation, gastrointestinal damage and oesophageal and pyloric stricture.

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Skin Contact	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. Open cuts, abraded or irritated skin should not be exposed to this material Entry into the blood-stream through, for example, cuts, abrasions, puncture wounds 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.
Eye	Evidence exists, or practical experience predicts, that the material may cause eye irritation in a substantial number of individuals and/or may 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 damage/ulceration may occur. Dilute solutions of low-molecular organic acids cause conjunctival hyperaemia, prompt pain and corneal injury.
Chronic	Long-term exposure to respiratory irritants may result in disease of the airways involving difficult breathing and related systemic problems. 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. Substances that can cause occupational asthma (also known as asthmagens and respiratory sensitisers) can induce a state of specific airway hyper-responsiveness via an immunological, irritant or other mechanism. Once the airways have become hyper-responsive, further exposure to the substance, sometimes even to tiny quantities, may cause respiratory symptoms. These symptoms can range in severity from a runny nose to asthma. Not all workers who are exposed to a sensitiser will become hyper-responsive and it is impossible to identify in advance who are likely to become hyper-responsive. Substances than can cuase occupational asthma should be distinguished from substances which may trigger the symptoms of asthma in people with pre-existing air-way hyper-responsiveness. The latter substances are not classified as asthmagens or respiratory sensitisers Wherever it is reasonably practicable, exposure to substances that can cuase occupational asthma should be prevented. Where this is not possible the primary aim is to apply adequate standards of control to prevent workers from becoming hyper-responsive. Activities giving rise to short-term peak concentrations should receive particular attention when risk management is being considered. Health surveillance is appropriate for all employees exposed or liable to be exposed to a substance which may cause occupational asthma and there should be appropriate consultation with an occupational health professional over the degree of risk and level of surveillance. Limited evidence suggests that repeated or long-term occupational exposure may produce cumulative health effects involving organs or biochemical systems. Chronic excessive iron exposure has been associated with haemosiderosis and consequent possible damage to the liver and pancreas. Haemosiderin is a golden-brown insoluble protein produced by phagocytic digestion of haematin (an iron-based pigment). Haemosiderin is found in most tissues, especially in the liver, in the form of granules. Other sites of haemosiderin deposition include the pancreas and skin. A related condition, haemochromatosis, which involves a disorder of metabolism of these deposits, may produce cirrhosis of the liver, diabetes, and bronze pigmentation of the skin - heart failure may eventually occur. Such exposure may also produce conjunctivitis, choroiditis, retinitis (both inflammatory conditions involving the eye) and siderosis of tissues if iron remains in these tissues. Siderosis is a form of pneumoconiosis produced by iron dusts. Siderosis also includes discoloration of organs, excess circulating iron and degeneration of the retina, lens and uvea as a result of the deposition of intraocular iron. Siderosis might also involve the lungs - involvement rarely develops before ten years of regular exposure. Often there is an accompanying inflammatory reaction of the bronchi. Permanent scarring of the lungs does not normally occur. High levels of iron may raise the risk of cancer. This concern stems from the theory that iron causes oxidative damage to tissues and organs by generating highly reactive chemicals, called free radicals, which subsequently react with DNA. Cells may be disrupted and may be become cancerous. People whose genetic disposition prevents them from keeping tight control over iron (e.g. those with the inherited disorder, haemochromatosis) may be at increased risk. Iron overload in men may lead to diabetes, arthritis, liver cancer, heart irregularities and problems with other organs as iron builds up. [K. Schmidt, New Scientist, No. 1919 pp.11-12, 2nd April, 1994]

	TOXICITY	IRRITATION
Ranvet's Energy Max	Not Available	Not Available
sorbic acid	dermal (rat) LD50: >2000 mg/kg[1]	Eye: adverse effect observed (irritating)[1]
	Oral (Mouse) LD50; 3200 mg/kg[2]	Skin (man): 150 mg/1h - SEVERE
		Skin (rabbit): 1 mg - SEVERE
		Skin: no adverse effect observed (not irritating)[1]
choline chloride	Oral (Rat) LD50: 3400 mg/kg[2]	Eye: no adverse effect observed (not irritating)[1]
		Skin: no adverse effect observed (not irritating)[1]
ammonium ferric citrate	dermal (rat) LD50: >2000 mg/kg[1]	Eye: no adverse effect observed (not irritating)[1]
	Oral (Mouse) LD50; 440 mg/kg[1]	Skin: no adverse effect observed (not irritating)[1]
phosphoric acid	Dermal (rabbit) LD50: >1260 mg/kg[2]	Eye (rabbit): 119 mg - SEVERE [Monsanto]*
	Inhalation (Rat) LC50: 0.026 mg/L4h[2]	Eye: adverse effect observed (irritating)[1]
	Oral (Rat) LD50: 1530 mg/kg[2]	Skin (rabbit):595 mg/24h - SEVERE
		Skin: adverse effect observed (corrosive)[1]
water	Oral (Rat) LD50: >90000 mg/kg[2]	Not Available

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Legend:	***1. Value obtained from Europe ECHA Registered Substances - Acute toxicity 2. Value obtained from manufacturer's SDS. Unless otherwise specified data extracted from RTECS - Register of Toxic Effect of chemical Substances***

SORBIC ACID	Equivocal tumorigen by RTECS criteria. The following information refers to contact allergens as a group and may not be specific to this product. 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. A member or analogue of a group of aliphatic, linear alpha,beta-unsaturated aldehydes and structurally related substances generally regarded as safe (GRAS) flavourings based, in part, on their self-limiting properties as flavouring substances in food; their low level of flavour use; the rapid absorption and metabolism of low in vivo concentrations by well-recognized biochemical pathways; adequate metabolic detoxication at much higher levels of exposure in humans and animals; the wide margins of safety between the conservative estimates of intake and the no-observed-adverse effect levels determined from subchronic and chronic studies. While some of the compounds described here have exhibited positive in vitro genotoxicity results, evidence of in vivo genotoxicity and carcinogenicity occurs only under conditions in which animals are repeatedly and directly exposed to high irritating concentrations of the aldehyde. These conditions are not relevant to humans who consume alpha,beta unsaturated aldehydes as flavour ingredients at low concentrations distributed in a food or beverage matrix. Acetal derivatives are expected to readily hydrolyse in the acidic environments of the stomach, intestinal fluid and the liver to yield common aldehydes and alcohols. alpha,beta-Unsaturated esters undergo rapid hydrolysis to their component alcohols and carboxylic acids in reactions that are principally catalysed by carboxylesterases. In general alpha,beta-unsaturated esters are more rapidly hydrolyses than their saturated analogues. Linear alpha,beta-Unsaturated carboxylic acids participate directly in fatty acid metabolism and then are further metabolised to carbon dioxide and water. Flavor and Extract Manufacturers Association (FEMA) Alpha,beta-unsaturated aldehydes and ketones are potentially genotoxic. It is believed that nucleophilic sites in DNA react through a 1,4-nucleophilic addition (Michael reaction) with alpha,beta-unsaturated carbonyl compounds. The flavour industry provided genotoxicity studies for the substance 4,5-epoxydec-2(trans)-enal. Based on these data, a European Food Safety Authority (EFSA Panel concluded that 4,5-epoxydec-2(trans)-enal did not induce gene mutations in bacterial cells but was positive in an in vitro micronucleus assay, so, 4,5-epoxydec-2(trans)-enal is considered an in vitro genotoxic agent. The negative results obtained in an in vivo micronucleus assay cannot overrule the positive results of the in vitro micronucleus assay with and without S9-mix due to the lack of demonstration of bone marrow exposure. Following this, the flavour industry has provided plasma analysis of a satellite group of rats treated with 4,5-epoxydec-2(trans)-enal in order to investigate the systemic exposure of animals in the in vivo micronucleus assay. However, the plasma analysis did not provide enough evidence of target tissue exposure. An in vivo Comet assay in rodents was recommended in order to investigate possible genotoxic effects at the first site of contact (e.g. stomach/duodenum cells) and in the liver. An in vivo Comet assay in liver and duodenum was provided that suggests that 4,5-epoxydec-2(trans)-enal did not induce DNA damage in the duodenum of rats. However, the genotoxic effect observed in vitro was confirmed in the in vivo Comet assay in the liver of rats. The Panel concluded that 4,5-epoxydec-2(trans)-enal does raise a safety concern with respect to genotoxicity **Scientific Opinion on Flavouring Group Evaluation 226 Revision 1 (FGE.226Rev1): consideration of genotoxicity data on one alpha,beta-unsaturated aldehyde from chemical subgroup 1.1.1(b) of FGE.19; May 2017** https://efsa.onlinelibrary.wiley.com/doi/epdf/10.2903/j.efsa.2017.4847 Based on the available oncogenicity data and without a better understanding of the carcinogenic mechanism the Health and Environmental Review Division (HERD), Office of Toxic Substances (OTS), of the US EPA previously concluded that all chemicals that contain the acrylate or methacrylate moiety (CH2=CHCOO or CH2=C(CH3)COO) should be considered to be a carcinogenic hazard unless shown otherwise by adequate testing. This position has now been revised and acrylates and methacrylates are no longer ***de facto*** carcinogens.
CHOLINE CHLORIDE	For choline: In rabbits, choline chloride may lead to a slight irritation of the skin and eye, which is, however, not sufficient to warrant a classification of choline chloride as an irritant under GHS. No data on sensitization in animals are available. The skin sensitisation potential of choline chloride for humans is regarded as negligible. Repeated oral administration of 10g/day in patients with Alzheimer s disease produced a slight hypertensive effect, but no other adverse effects; this dose was regarded as a LOAEL;(it is equivalent to 7.5 mg choline per day). The tolerable upper intake level applied for chronic daily use for adults was set at 3.5 g/day. Inadequate dietary intake decreases choline liver stores and may produce liver abnormalities as indicated by elevated serum alanine aminotransferase levels. As adequate intake for chronic daily use for adult men 550 mg/day of choline is recommended. The adequate intake for adult women is 425 mg/day of choline, during pregnancy 450 mg/day and during lactation 550 mg/day, respectively. Choline chloride did not produce gene mutations, clastogenicity or DNA damage in ***in vitro*** mutagenicity studies; furthermore it has no structural alerts. Choline chloride does not have any genotoxic potential. In a rat repeated dose study, using a single dose level of approximately 500 mg/kg bw/day given over 72 weeks via feed, with a post-observation period of 30 weeks, no significant effects were observed relative to controls with respect to survival rates, body weights and relative liver weights. Only limited pathological investigations were carried out at autopsy (gross examination with histological investigation of only the liver and any tissues showing gross abnormalities). No adverse effects were observed. Prolonged i.p. administration of choline chloride is toxic to the testes and causes damage to the seminiferous tubules. Under the testing protocol employed these lesions were reversible. However, this route of administration is not relevant for assessment of hazard to humans. Developmental toxic effects have not been observed in the absence of maternal toxicity. Maternal and developmental toxicity started above the lowest dose which was already higher than the limit dose of 1000 mg/kg bw/day (NOAEL Maternal toxicity and developmental toxicity 1250 mg/kg bw/day). At the highest dose tested (20,000 mg/kg bw/day) 100% of the foetuses were resorbed.. No developmental toxic effects were observed in mice after oral doses of 1250 mg/kg bw/day on gestation days 1 to 18. Higher doses, above the levels recommended currently and associated with maternal toxicity, did produce developmental toxic effects, but these were secondary to the maternal toxicity at the excessive doses used. The compound does not produce any significant developmental toxicity in the mouse. 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 (where hydrogen atoms remain unsubstituted, the term "secondary- or "tertiary-ammonium compounds" is preferred) . 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

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	(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.
AMMONIUM FERRIC CITRATE	A high consumption of oxidised polyunsaturated fatty acids (PUFAs), which are found in most types of vegetable oil, may increase the likelihood that postmenopausal women will develop breast cancer. Similar effect was observed on prostate cancer, but the study was performed on mice Another "analysis suggested an inverse association between total polyunsaturated fatty acids and breast cancer risk, but individual polyunsaturated fatty acids behaved differently [from each other]. [...] a 20:2 derivative of linoleic acid [...] was inversely associated with the risk of breast cancer" PUFAs are prone to spontaneous oxidation/ peroxidation. The feeding of lipid oxidation products and oxidised fats has been reported to cause adverse biological effects on laboratory animals, including growth retardation, teratogenicity, tissue damage and increased liver and kidney weights, as well as cellular damage to the testes and epididymes, increased peroxidation of membrane and tissue lipids and induction of cytochrome P450 activities in the colon and liver. The propensity for PUFAs to oxidise leads to the generation of free radicals and eventually to rancidity. Culinary oils, when heated, undergo important chemical reaction involving self-sustaining, free radical-mediated oxidative deterioration of PUFAs. Such by-products may be cytotoxic, mutagenic, reproductive toxins and may produce chronic disease. Samples of repeatedly used oils collected from fast-food retail outlets and restaurants have confirmed the production of aldehydic lipid oxidation products (LOPs) at levels exceeding 10 exp-2 moles per kilogram (mol/kg) during “on-site” frying episodes. Volatile emissions from heated culinary oils used in Chinese-style cooking are mutagenic; exposure to such indoor air pollution may render humans more susceptible to contracting lung or further cancers, together with rhinitis and diminished lung function. The high temperatures used in standard (especially Chinese) frying result in fumes that are rich in volatile LOPs, including acrolein. The end products of lipid peroxidation are reactive aldehydes, such as malondialdehyde (MDA) and 4-hydroxynonenal (HNE), the second one being known also as "second messenger of free radicals" and major bioactive marker of lipid peroxidation, due to its numerous biological activities resembling activities of reactive oxygen species. end-products of lipid peroxidation may be mutagenic and carcinogenic malondialdehyde reacts with deoxyadenosine and deoxyguanosine in DNA, forming DNA adducts. Malondialdehyde produces mutagenic effects in several bioassays. Side products of lipid peroxidation can also exert toxic effects, even at sites distant from the primary oxidation site. Such products (typically malondialdehyde and a large group of hydroxyalkenals - alpha-beta-unsaturated aldehydes) may interact with protein thiols (producing intermolecular cross-links) and, as a result produce functional impairment to enzyme systems, receptors and structural proteins. Aldehydes may also inhibit protein biosynthesis and increase osmotic fragility of lysosymes (releasing hydrolytic enzymes) and other subcellular organelles. They may also react with nucleic acids. The toxicity of lipid hydroperoxides to animals is best illustrated by the lethal phenotype of glutathione peroxidase 4 (GPX4) knockout mice. These animals do not survive past embryonic day 8, indicating that the removal of lipid hydroperoxides is essential for mammalian life. Peroxidised linoleic acid applied to the shaved skin of guinea pigs, in a patch test experiment, produced necrosis and bleeding. When the abdominal skin of guinea pig was patched for 8 days with a cream containing 25 nmol (in terms of malondialdehyde) of lipid peroxides per gram, a thickening of the epidermis was found Lipid peroxidation in cellular membranes may produce several morphological alterations resulting, for example, in membrane aggregation, deformation or breakage. This may result in the release of hydrolytic enzymes which in turn may degrade functional macromolecules and cause secondary damage. In addition membrane-bound enzyme systems may be disrupted. Free radicals can react with specific cellular molecules including low molecular weight biomolecules such as neurotransmitters and co-enzymes and, as a consequence, inactivate them. macromolecules and cellular membranes are particularly vulnerable to free radical damage with the resultant loss of physiological function and cell death Depolymerisation of polysaccharides (such as hyaluronic acid) may result in inflammation of the joints. Free radicals have a high affinity for sulfur containing amino-acids and therefore many proteins. The may bind covalently to these proteins leading to loss, of biological function such as catalysis exhibited by enzymes. Covalent binding may also result in allergic reactions when the modified protein is recognised, by the bodies immune system, as "foreign" Free radicals are also capable of causing proteins to cross-link to yield larger aggregates. Free radicals are also able to react with the nucleic acids of DNA which may affect cell division or cell death Oxidative modifications of DNA may result in tumour initiation. Lipids containing several double bonds (such as polyunsaturated fatty acids and cholesterol) are also subject to damage. In the case of membrane phospholipids, such "peroxidation" results in impairment of cellular and/ or subcellular membranes which may produce cell death. Transition metal ions may also play an important role in lipid peroxidation after free radical-induced change of valency . Fe3+/Fe2+, copper and mercury ions, as well as vanadate and chromate ions seem to initiate this process and may even exacerbate it by producing secondary radicals when the phospholipid is modified. ferroptosis, a non apoptotic form of cell death characterized by iron accumulation and uncontrolled lipid peroxidation, holds promise as a therapeutic approach in cancer treatment, alongside established modalities, such as chemotherapy, immunotherapy, and radiotherapy. However, research has raised concerns about its side effects, including damage to immune cells, hematopoietic stem cells, liver, and kidneys, the development of cachexia, and the risk of secondary tumor formation. ferroptosis leading to plasma membrane rupture and intracellular content release was Originally investigated as a targeted therapy for cancer cells carrying oncogenic RAS mutations, ferroptosis . However, it can lead to side effects, including immune cell death, bone marrow

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	impairment, liver and kidney damage, cachexia (severe weight loss and muscle wasting), and secondary tumorigenesis. ecifically, the term 'ferroptosis,, delineates a distinctive form of non-apoptotic cell demise marked by uncontrolled lipid peroxidation [. Traditional cell death effectors, such as caspases, GSDMD (gasdermin D), and MLKL (mixed lineage kinase domain like pseudokinase), are not essential for the process of ferroptosis [. Ferroptosis can be categorized as a type of regulated necrosis and exhibits some morphological characteristics reminiscent of necrotic cell features, such as plasma membrane rupture . Mechanistically, ferroptosis is mediated by the generation of toxic oxidized lipids, including 4-hydroxynonenal, as a result of lipid peroxidation . Additionally, advanced lipid peroxidation end products can lead to oxidative damage to proteins or nucleic acids, causing cellular dysfunction . Conversely, various antioxidant systems, comprising both GPX4 (glutathione peroxidase 4)-dependent and GPX4-independent pathways, play a context-dependent role in defending against ferroptosis Erastin and RSL3 are two well-known small molecule compounds that are frequently used to trigger ferroptosis and explore the associated mechanisms of this cell death pathway. Erastin is a novel compound capable of selectively killing engineered tumorigenic cells with RAS mutations, but not wild type cells. This cell death induced by erastin was found to be caspase-independent . RSL3, is another compound that selectively kills RAS-mutant cells through a caspase-independent mechanism. In contrast to erastin, RSL3 activates a similar death mechanism, but in a mitochondrial VDAC (voltage-dependent anion channel)-independent manner. sequent studies have shown that erastin-induced cell death in the fibrosarcoma cell line HT1080 and the lung cancer cell line Calu-1 relies on iron accumulation, consequent oxidative damage through the activation of the Fenton reaction, and inhibition of system xc- . System xc- is an amino acid antiporter that facilitates the exchange of extracellular cystine and intracellular glutamate across the cellular plasma membrane. It comprises a heavy chain component, SLC3A2 (solute carrier family 3 member 2), and a transport module, SLC7A11 (solute carrier family 7 member 11 Given the intricate connection between the ferroptotic process and oxidative stress-induced lipid peroxidation, the synergistic interplay of ROS amplification, lipid provisioning, and activation of lipid peroxidation enzymes collectively contribute to fostering ferroptosis induction or augmenting ferroptosis sensitivity OS are chemically reactive molecules containing oxygen, typically produced as natural byproducts of cellular metabolism. They are essential for various physiological processes within cells. However, excessive accumulation of ROS can lead to oxidative stress, causing damage to cellular components (e.g., DNA, proteins, and lipids), and potentially contributing to various diseases. There are three main sources that generates ROS for ferroptosis Mitochondria: Mitochondria serve as the primary source of ROS during oxidative phosphorylation, a process vital for cellular energy generation. Electrons escaping from the electron transport chain can react with molecular oxygen, leading to the production of O2·- (superoxide radicals), a type of ROS. Mitochondrial ROS can act as triggers for ferroptosis, while the presence of mitochondrial antioxidant systems, comprised of enzymatic and non-enzymatic antioxidants, can mitigate ferroptosis. Multiple mitochondrial metabolic pathways influence ATP (adenosine triphosphate) and ROS generation, thereby influencing ferroptosis sensitivity. For instance, glutaminolysis assumes particular importance in scenarios with limited glucose availability, such as in rapidly growing tumors. Cancer cells often depend on glutaminolysis to fulfill their high energy and biosynthetic demands. However, glutaminolysis can promote ferroptotic death triggered by deprivation of full amino acids or of cystine alone . The AMPK (AMP-activated protein kinase) functions as a critical cellular energy sensor. When activated in response to declining energy levels, AMPK promotes ATP production by enhancing the activity or expression of catabolic proteins. Simultaneously, it conserves ATP by inhibiting biosynthetic pathways. AMPK activation during energy deficiency can both inhibit ferroptosis, through phosphorylation of ACACA/ACC (acetyl-CoA carboxylase alpha) in MEFs (mouse embryonic fibroblasts) and human renal adenocarcinoma cells [68], and promote ferroptosis, by targeting BECN1 (beclin1)-mediated system xc- inhibition in human colorectal cancer cells or regulating pyrimidinosome assembly in human cervical cancer cells . These findings suggest the presence of a threshold for AMPK activity in regulating ferroptosis levels in cancer cells through various substrates or binding protein NOXs (NADPH oxidases): These enzymes are specialized proteins that generate ROS as part of their normal function. While they serve crucial roles in immune responses and cellular signaling, they also contribute to ferroptosis. Increased expression of NOX can result in elevated ROS levels, thereby increasing sensitivity to ferroptosis . The activity of NOX in ferroptosis is subject to regulation by various factors. For example, the tumor suppressor protein TP53/p53 (tumor protein p53) can inhibit ferroptosis in human colorectal cancer cells by binding to DPP4 (dipeptidyl peptidase 4) [. Conversely, TP53 deficiency promotes the accumulation of DPP4 on the cell membrane, where it forms a complex with NOX1, resulting in oxidative damage . Arachidonic acid also has the capacity to enhance NOX1 activity through phosphorylation by PRKC/PKC (protein kinase C), thereby promoting ROS production . Furthermore, 4-hydroxynonenal, a byproduct of lipid peroxidation, augments NOX1 activity and induces ferroptosis in HT1080 and Calu1 cells. The ferroptosis-inducing effect of NOX1 activity can be counteracted by ALDH1B1 (aldehyde dehydrogenase 1 family member B1) in HT1080 and Calu-1 cells [6. ALDH1B1 catalyzes the oxidation of aldehydes, converting them into their corresponding carboxylic acids, a process relevant to the development of colorectal and pancreatic tumors. The fenton reaction. The fenton reaction is a chemical process that occurs when H2O2 (hydrogen peroxide) interacts with a metal catalyst, usually Fe2+, resulting in the formation of highly reactive and destructive ·OH (hydroxyl radicals) . This reaction is a notable contributor to oxidative stress and can cause damage to cellular components. Hydroxyl radicals target and harm the lipids found in cell membranes, namely lipid peroxidation. Lipid peroxidation can result in membrane destabilization, compromising the integrity of cells and potentially leading to ferroptosis. Apart from its involvement in the fenton reaction, iron can also enhance the activity of enzymes, such as ALOX (arachidonate lipoxygenase) family and POR (cytochrome p450 oxidoreductase), thereby increasing ferroptosis sensitivity. Consequently, alterations in iron metabolism, including processes, such as iron uptake, storage, utilization, and release, can modulate ferroptosis sensitivity. An extensively studied example is the induction of ferritinophagy, a selective form of autophagy that promotes the degradation of the iron storage protein ferritin in MEFs or pancreatic cancer cells, resulting in an increase in labile iron . This process has been demonstrated to enhance ferroptosis sensitivity in various disease models
PHOSPHORIC ACID	phosphoric acid (85%) for acid mists, aerosols, vapours Data from assays for genotoxic activity in vitro suggest that eukaryotic cells are susceptible to genetic damage when the pH falls to about 6.5. Cells from the respiratory tract have not been examined in this respect. Mucous secretion may protect the cells of the airways from direct exposure to inhaled acidic mists, just as mucous plays an important role in protecting the gastric epithelium from its auto-secreted hydrochloric acid. In considering whether pH itself induces genotoxic events in vivo in the respiratory system, comparison should be made with the human stomach, in which gastric juice may be at pH 1-2 under fasting or nocturnal conditions, and with the human urinary bladder, in which the pH of urine can range from <5 to > 7 and normally averages 6.2. Furthermore, exposures to low pH in vivo differ from exposures ***in vitro*** in that, ***in vivo***, only a portion of the cell surface is subjected to the adverse conditions, so that perturbation of intracellular homeostasis may be maintained more readily than in vitro. The material may produce severe irritation to the eye causing pronounced inflammation. Repeated or prolonged exposure to irritants may produce conjunctivitis.
SORBIC ACID & CHOLINE CHLORIDE & AMMONIUM FERRIC CITRATE & PHOSPHORIC ACID	Asthma-like symptoms may continue for months or even years after exposure to the material ends. This may be due to a non-allergic condition known as reactive airways dysfunction syndrome (RADS) which can occur after exposure to high levels of highly irritating compound. Main criteria for diagnosing RADS include the absence of previous airways disease in a non-atopic individual, with sudden onset of persistent asthma-like symptoms within minutes to hours of a documented exposure to the irritant. Other criteria for diagnosis of RADS include a reversible airflow pattern on lung function tests, moderate to severe bronchial hyperreactivity on methacholine challenge testing, and the lack of minimal lymphocytic inflammation, without eosinophilia. 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. On the other hand, industrial bronchitis is a disorder that occurs as a result of exposure due to high concentrations of irritating substance (often particles) and is completely reversible after exposure ceases. The disorder is characterized by difficulty breathing, cough and mucus production.
SORBIC ACID & PHOSPHORIC ACID	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. 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.
AMMONIUM FERRIC CITRATE & PHOSPHORIC ACID & WATER	No significant acute toxicological data identified in literature search.

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Acute Toxicity	✔	**Carcinogenicity**	✘
Skin Irritation/Corrosion	✔	**Reproductivity**	✘
Serious Eye Damage/Irritation	✔	**STOT - Single Exposure**	✔
Respiratory or Skin sensitisation	✔	**STOT - Repeated Exposure**	✘
Mutagenicity	✘	**Aspiration Hazard**	✘

Legend: ✘ ***– Data either not available or does not fill the criteria for classification***
✔ ***– Data available to make classification***

SECTION 12 Ecological information

Toxicity

Ranvet's Energy Max

Endpoint	Test Duration (hr)	Species	Value	Source
Not Available	Not Available	Not Available	Not Available	Not Available

sorbic acid

Endpoint	Test Duration (hr)	Species	Value	Source
EC50	72h	Algae or other aquatic plants	24.1mg/l	2
EC100(ECx)	168h	Algae or other aquatic plants	0.5mg/l	1
EC50	48h	Crustacea	70mg/l	2
LC50	96h	Fish	75mg/l	2

choline chloride

Endpoint	Test Duration (hr)	Species	Value	Source
EC50	72h	Algae or other aquatic plants	>500mg/l	1
EC50	48h	Crustacea	>320mg/l	4
EC100(ECx)	24h	Crustacea	>30mg/l	4
LC50	96h	Fish	>10000mg/l	2
EC50	96h	Algae or other aquatic plants	>500mg/l	2

ammonium ferric citrate

Endpoint	Test Duration (hr)	Species	Value	Source
EC50	72h	Algae or other aquatic plants	>100mg/l	2
EC50	48h	Crustacea	>100mg/l	2
LC50	96h	Fish	53mg/l	2
EC10(ECx)	1680h	Crustacea	3.12mg/l	2

phosphoric acid

Endpoint	Test Duration (hr)	Species	Value	Source
EC50	72h	Algae or other aquatic plants	77.9mg/l	2
EC50	48h	Crustacea	>100mg/l	2
LC50	96h	Fish	67.94-113.76mg/L	4
NOEC(ECx)	72h	Algae or other aquatic plants	<7.5mg/l	2

water

Endpoint	Test Duration (hr)	Species	Value	Source
Not Available	Not Available	Not Available	Not Available	Not Available

Legend: ***Extracted from 1. IUCLID Toxicity Data 2. Europe ECHA Registered Substances - Ecotoxicological Information - Aquatic Toxicity 4. US EPA, Ecotox database - Aquatic Toxicity Data 5. ECETOC Aquatic Hazard Assessment Data 6. NITE (Japan) - Bioconcentration Data 7. METI (Japan) - Bioconcentration Data 8. Vendor Data***

DO NOT discharge into sewer or waterways.

Persistence and degradability

Ingredient	Persistence: Water/Soil	Persistence: Air
sorbic acid	LOW	LOW
choline chloride	LOW	LOW
phosphoric acid	HIGH	HIGH
water	LOW	LOW

Bioaccumulative potential

Ingredient	Bioaccumulation
sorbic acid	LOW (LogKOW = 1.33)
choline chloride	LOW (LogKOW = -3.1555)
phosphoric acid	LOW (LogKOW = -0.7699)

Mobility in soil

Ingredient	Mobility
sorbic acid	LOW (Log KOC = 7.532)

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Ingredient	Mobility
choline chloride	HIGH (Log KOC = 1.717)
phosphoric acid	HIGH (Log KOC = 1)

SECTION 13 Disposal considerations

Waste treatment methods

Product / Packaging disposal	▸ 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 SDS and observe all notices pertaining to the product. ▸ Recycle wherever possible. ▸ Consult manufacturer for recycling options or consult local or regional waste management authority for disposal if no suitable treatment or disposal facility can be identified. ▸ Dispose of by: burial in a land-fill specifically licensed to accept chemical and / or pharmaceutical wastes or incineration in a licensed apparatus (after admixture with suitable combustible material). ▸ Decontaminate empty containers. Observe all label safeguards until containers are cleaned and destroyed.

SECTION 14 Transport information

Labels Required

Marine Pollutant	NO
HAZCHEM	Not Applicable

Land transport (ADG): NOT REGULATED FOR TRANSPORT OF DANGEROUS GOODS

Air transport (ICAO-IATA / DGR): NOT REGULATED FOR TRANSPORT OF DANGEROUS GOODS

Sea transport (IMDG-Code / GGVSee): NOT REGULATED FOR TRANSPORT OF DANGEROUS GOODS

14.7.1. Transport in bulk according to Annex II of MARPOL and the IBC code

Not Applicable

14.7.2. Transport in bulk in accordance with MARPOL Annex V and the IMSBC Code

Product name	Group
sorbic acid	Not Available
choline chloride	Not Available
ammonium ferric citrate	Not Available
phosphoric acid	Not Available
water	Not Available

14.7.3. Transport in bulk in accordance with the IGC Code

Product name	Ship Type
sorbic acid	Not Available
choline chloride	Not Available
ammonium ferric citrate	Not Available
phosphoric acid	Not Available
water	Not Available

SECTION 15 Regulatory information

Safety, health and environmental regulations / legislation specific for the substance or mixture

sorbic acid is found on the following regulatory lists

Australian Inventory of Industrial Chemicals (AIIC)

choline chloride is found on the following regulatory lists

Australian Inventory of Industrial Chemicals (AIIC)

ammonium ferric citrate is found on the following regulatory lists

Australia Standard for the Uniform Scheduling of Medicines and Poisons (SUSMP) - Schedule 2
Australia Standard for the Uniform Scheduling of Medicines and Poisons (SUSMP) - Schedule 4
Australia Standard for the Uniform Scheduling of Medicines and Poisons (SUSMP) - Schedule 5
Australia Standard for the Uniform Scheduling of Medicines and Poisons (SUSMP) - Schedule 6
Australian Inventory of Industrial Chemicals (AIIC)

phosphoric acid is found on the following regulatory lists

Australia Hazardous Chemical Information System (HCIS) - Hazardous Chemicals
Australia Standard for the Uniform Scheduling of Medicines and Poisons (SUSMP) - Schedule 5
Australian Inventory of Industrial Chemicals (AIIC)

water is found on the following regulatory lists

Continued...

Australian Inventory of Industrial Chemicals (AIIC)

Additional Regulatory Information

Not Applicable

National Inventory Status

National Inventory	Status
Australia - AIIC / Australia Non-Industrial Use	Yes
Canada - DSL	Yes
Canada - NDSL	No (sorbic acid; choline chloride; ammonium ferric citrate; phosphoric acid; water)
China - IECSC	Yes
Europe - EINEC / ELINCS / NLP	Yes
Japan - ENCS	No (ammonium ferric citrate)
Korea - KECI	Yes
New Zealand - NZIoC	Yes
Philippines - PICCS	Yes
USA - TSCA	Yes
Taiwan - TCSI	Yes
Mexico - INSQ	Yes
Vietnam - NCI	Yes
Russia - FBEPH	Yes
Legend:	***Yes = All CAS declared ingredients are on the inventory*** ***No = One or more of the CAS listed ingredients are not on the inventory. These ingredients may be exempt or will require registration.***

SECTION 16 Other information

Revision Date	01/12/2023
Initial Date	01/12/2023

Other information

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.

The 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.

Definitions and abbreviations

- PC—TWA: Permissible Concentration-Time Weighted Average
- PC—STEL: Permissible Concentration-Short Term Exposure Limit
- IARC: International Agency for Research on Cancer
- ACGIH: American Conference of Governmental Industrial Hygienists
- STEL: Short Term Exposure Limit
- TEEL: Temporary Emergency Exposure Limit。
- IDLH: Immediately Dangerous to Life or Health Concentrations
- ES: Exposure Standard
- OSF: Odour Safety Factor
- NOAEL: No Observed Adverse Effect Level
- LOAEL: Lowest Observed Adverse Effect Level
- TLV: Threshold Limit Value
- LOD: Limit Of Detection
- OTV: Odour Threshold Value
- BCF: BioConcentration Factors
- BEI: Biological Exposure Index
- DNEL: Derived No-Effect Level
- PNEC: Predicted no-effect concentration

- AIIC: Australian Inventory of Industrial Chemicals
- DSL: Domestic Substances List
- NDSL: Non-Domestic Substances List
- IECSC: Inventory of Existing Chemical Substance in China
- EINECS: European INventory of Existing Commercial chemical Substances
- ELINCS: European List of Notified Chemical Substances
- NLP: No-Longer Polymers
- ENCS: Existing and New Chemical Substances Inventory
- KECI: Korea Existing Chemicals Inventory
- NZIoC: New Zealand Inventory of Chemicals
- PICCS: Philippine Inventory of Chemicals and Chemical Substances
- TSCA: Toxic Substances Control Act
- TCSI: Taiwan Chemical Substance Inventory
- INSQ: Inventario Nacional de Sustancias Químicas
- NCI: National Chemical Inventory
- FBEPH: Russian Register of Potentially Hazardous Chemical and Biological Substances

end of SDS