LUPIN LIMITED

SAFETY DATA SHEET

Section 1: Identification

Section 1, Identification

Material	**Desvenlafaxine Extended Release Tablets 50mg and 100 mg**
Manufacturer	**Lupin Limited** Goa - 403722 India
Distributor	Lupin Pharmaceuticals, Inc. 111 South Calvert Street, Harborplace Tower, 21st Floor, Baltimore, Maryland 21202 United States Tel. 001-410-576-2000 Fax. 001-410-576-2221

Section 2: Hazard(s) Identification

Section 2, Hazard(s) identification

Fire and Explosion	Expected to be non-combustible.
Health	Hypersensitivity to desvenlafaxine succinate, venlafaxine hydrochloride or to any excipients in the desvenlafaxine formulation. Angioedema has been reported in patients treated with desvenlafaxine. The use of MAOIs intended to treat psychiatric disorders with desvenlafaxine or within 7 days of stopping treatment with desvenlafaxine is contraindicated because of an increased risk of serotonin syndrome. The use of desvenlafaxine within 14 days of stopping an MAOI intended to treat psychiatric disorders is also contraindicated. Starting desvenlafaxine in a patient who is being treated with MAOIs such as linezolid or intravenous methylene blue is also contraindicated because of an increased risk of serotonin syndrome.
Environment	No information is available about the potential of this product to produce adverse environmental effects.

Section 3: Composition / Information on Ingredients

Section 3, Composition/information on ingredients

Ingredients	**CAS**
Desvenlafaxine Succinate	386750-22-7

Section 4: First-Aid Measures

Section 4, First-aid measures

Ingestion	Never give anything by mouth to an unconscious person. Wash out mouth with water. Do not induce vomiting unless directed by medical personnel. Seek medical attention immediately.
Inhalation	Remove to fresh air and keep patient at rest. Seek medical attention immediately.
Skin Contact	Remove contaminated clothing. Flush area with large amounts of water. Use soap. Seek medical attention.
Eye Contact	Flush with water while holding eyelids open for at least 15 minutes. Seek medical attention immediately.

NOTES TO HEALTH PROFESSIONALS

Medical Treatment	Treat according to locally accepted protocols. For additional guidance, refer to the current prescribing information or to the local poison control information center. Protect the patient's airway and support ventilation and perfusion. Meticulously monitor and maintain, within acceptable limits, the patient's vital signs, blood gases, serum electrolytes, etc
OVERDOSAGE	**Human Experience with Overdosage** There is limited clinical trial experience with desvenlafaxine succinate overdosage in humans. However, desvenlafaxine is the major active metabolite of venlafaxine. Overdose experience reported with venlafaxine (the parent drug of desvenlafaxine) is presented below; the identical information can be found in the Overdosage section of the venlafaxine package insert. In postmarketing experience, overdose with venlafaxine (the parent drug of desvenlafaxine) has occurred predominantly in combination with alcohol and/or other drugs. The most commonly reported events in overdosage include tachycardia, changes in level of consciousness (ranging from somnolence to coma), mydriasis, seizures, and vomiting. Electrocardiogram changes (e.g., prolongation of QT interval, bundle branch block, QRS prolongation), sinus and ventricular tachycardia, bradycardia, hypotension, rhabdomyolysis, vertigo, liver necrosis, serotonin syndrome, and death have been reported. Published retrospective studies report that venlafaxine overdosage may be associated with an increased risk of fatal outcomes compared to that observed with SSRI antidepressant products, but lower than that for tricyclic antidepressants. Epidemiological studies have shown that venlafaxine-treated patients have a higher pre-existing burden of suicide risk factors than SSRI-treated patients. The extent to which the finding of an increased risk of fatal outcomes can be attributed to the toxicity of venlafaxine in overdosage, as opposed to some characteristic(s) of venlafaxine-treated patients, is not clear. **Management of Overdosage** No specific antidotes for desvenlafaxine are known. In managing over dosage, consider the possibility of multiple drug involvement. In case of overdose, call Poison Control Center at 1-800-222-1222 for latest recommendations.

Section 5: Fire-Fighting Measures

Section 5, Fire-fighting measures

Fire and Explosion Hazards	Strong dust explosion characteristic. High sensitivity of a dust cloud to ignition, based on minimum ignition energy.
Extinguishing Media	Use carbon dioxide, dry chemical, or water spray.
Special Firefighting Procedures	During all firefighting activities, wear appropriate protective equipment, including self-contained breathing apparatus.
Hazardous Combustion Products	Formation of toxic gases is possible during heating or fire.

Section 6: Accidental Release Measures

Section 6, Accidental release measures

Personal Precautions	Personnel involved in clean-up should wear appropriate personal protective equipment. Minimize exposure.
Environmental Precautions	Place waste in an appropriately labeled, sealed container for disposal. Care should be taken to avoid environmental release.
Clean-up Methods	Contain the source of spill if it is safe to do so. Collect spill with absorbent material. Clean spill area thoroughly. Avoid use of a filtered vacuum to clean spills of dry solids, due to the potential for electrostatic discharge and the strong dust explosion characteristic and high sensitivity to ignition.

Section 7: Handling and Storage

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Handling	Minimize dust generation and accumulation. If tablets or capsules are crushed and/or broken, avoid breathing dust and avoid contact with eyes, skin, and clothing. When handling, use appropriate personal protective equipment. Wash thoroughly after handling. Releases to the environment should be avoided. Review and implement appropriate technical and procedural waste water and waste disposal measures to prevent occupational exposure or environmental releases. Potential points of process emissions of this material to the atmosphere should be controlled with dust collectors, HEPA filtration systems or other equivalent controls.
Storage	Store at 20° to 25°C (68° to 77°F) [See USP Controlled Room Temperature].

Section 8: Exposure Controls/Personal Protection

Section 8, Exposure controls/personal protection

Wear appropriate clothing to avoid skin contact. Wash hands and arms thoroughly after handling.

Section 9: Physical and Chemical Properties

Section 9, Physical and chemical properties

Physical Form

Desvenlafaxine extended-release tablets are available as follows:

50 mg, light pink, biconvex, round shaped film-coated tablets, debossed with “LU” on one side and “S61” on the other side.

NDC 68180-592-06, bottle of 30 tablets in unit-of-use package
NDC 68180-592-09, bottle of 90 tablets in unit-of-use package
NDC 68180-592-02, bottle of 500 tablets

100 mg, reddish-orange, biconvex, round shaped film-coated tablets, debossed with “LU” on one side and “S62” on the other side.

NDC 68180-593-06, bottle of 30 tablets in unit-of-use package
NDC 68180-593-09, bottle of 90 tablets in unit-of-use package
NDC 68180-593-02, bottle of 500 tablets

Each tablet contains 76 mg or 152 mg of desvenlafaxine succinate monohydrate equivalent to 50 mg or 100 mg of desvenlafaxine, respectively.

The unit-of-use package is intended to be dispensed as a unit.

Section 10: Stability and Reactivity

Section 10, Stability and reactivity

Stable under recommended storage conditions.

Section 11: Toxicological Information

Section 11, Toxicological information

Carcinogenesis, Mutagenesis, Impairment of Fertility

Carcinogenesis
Desvenlafaxine succinate administered by oral gavage to mice and rats for 2 years did not increase the incidence of tumors in either study.

Mice received desvenlafaxine succinate at dosages up to 500/300 mg/kg/day (dosage lowered after 45 weeks of dosing). The 300 mg/kg/day dose is 15 times a human dose of 100 mg per day on a mg/m^2 basis.

Rats received desvenlafaxine succinate at dosages up to 300 mg/kg/day (males) or 500 mg/kg/day (females). The highest dose is 29 (males) or 48 (females) times a human dose of 100 mg per day on a mg/m^2 basis.

Mutagenesis
Desvenlafaxine was not mutagenic in the *in vitro* bacterial mutation assay (Ames test) and was not clastogenic in an *in vitro* chromosome aberration assay in cultured CHO cells, an *in vivo* mouse micronucleus assay, or an *in vivo* chromosome aberration assay in rats. Additionally, desvenlafaxine was not genotoxic in the *in vitro* CHO mammalian cell forward mutation assay and was negative in the *in vitro* BALB/c-3T3 mouse embryo cell transformation assay.

Impairment of fertility
When desvenlafaxine succinate was administered orally to male and female rats, fertility was reduced at the high dose of 300 mg/kg/day, which is 30 times a human dose of 100 mg per day (on a mg/m^2 basis). There was no effect on fertility at 100 mg/kg/day, approximately 10 times a human dose of 100 mg per day (on a mg/m^2 basis).

Section 12: Ecological Information

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No relevant studies identified.

Section 13: Disposal Considerations

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Incinerate in an approved facility. Follow all federal state and local environmental regulations.

Section 14: Transport Information

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IATA/ICAO - Not Regulated

IATA Proper shipping Name	:	N/A
IATA UN/ID No	:	N/A
IATA Hazard Class	:	N/A
IATA Packaging Group	:	N/A
IATA Label	:	N/A

IMDG - Not Regulated

IMDG Proper shipping Name	:	N/A
IMDG UN/ID No	:	N/A
IMDG Hazard Class	:	N/A
IMDG Flash Point	:	N/A
IMDG Label	:	N/A

DOT - Not Regulated

DOT Proper shipping Name	:	N/A
DOT UN/ID No	:	N/A
DOT Hazard Class	:	N/A
DOT Flash Point	:	N/A
DOT Packing Group	:	N/A
DOT Label	:	N/A

Section 15: Regulatory Information

Section 15: Regulatory Information

This Section Contains Information relevant to compliance with other Federal and/or state laws.

Section 16: Other Information

Section 16, Other information

The above information is believed to be correct but does not purport to be all-inclusive and shall be used only as a guide. Nothing herein shall be deemed to create any warranty, express or implied. It is the responsibility of the user to determine the applicability of this information and the suitability of the material or product for any particular purpose.

Lupin shall not be held liable for any damage resulting from handling or from contact with the above product. Lupin reserves the right to revise this SDS.