# Section 1: Identification

**Material**
Ziprasidone Hydrochloride Capsules  
20 mg, 40 mg, 60 mg & 80 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

**Fire and Explosion**
Expected to be non-combustible.

**Health**
Ziprasidone is contraindicated in individuals with a known hypersensitivity to the product.

**Environment**
No information is available about the potential of this product to produce adverse environmental effects.

# Section 3: Composition/Information on Ingredients

**Ingredients**

<table>
<thead>
<tr>
<th>Ingredients</th>
<th>CAS</th>
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</thead>
<tbody>
<tr>
<td>Ziprasidone Hydrochloride</td>
<td>138982-67-9</td>
</tr>
</tbody>
</table>
Section 4: First-Aid Measures

Section 4, First-aid measures

Ingestion
If conscious, give water to drink and induce vomiting. Do not attempt to give any solid or liquid by mouth if the exposed subject is unconscious or semi-conscious. Wash out the mouth with water. Obtain medical attention.

Inhalation
Move individual to fresh air. Obtain medical attention if breathing difficulty occurs. If not breathing, provide artificial respiration assistance.

Skin Contact
Remove contaminated clothing and flush exposed area with large amounts of water. Wash all exposed areas of skin with plenty of soap and water. Obtain medical attention if skin reaction occurs.

Eye Contact
Flush eyes with plenty of water. Get medical attention.

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
In premarketing trials involving more than 5400 patients and/or normal subjects, accidental or intentional overdosage of oral ziprasidone was documented in 10 patients. All of these patients survived without sequelae. In the patient taking the largest confirmed amount, 3,240 mg, the only symptoms reported were minimal sedation, slurring of speech, and transitory hypertension (200/95).

Adverse reactions reported with ziprasidone overdose included extrapyramidal symptoms, somnolence, tremor, and anxiety.

Management of Overdosage
In case of acute overdosage, establish and maintain an airway and ensure adequate oxygenation and ventilation. Intravenous access should be established, and gastric lavage (after intubation, if patient is unconscious) and administration of activated charcoal together with a laxative should be considered. The possibility of obtundation, seizure, or dystonic reaction of the head and neck following overdose may create a risk of aspiration with induced emesis.

Cardiovascular monitoring should commence immediately and should include continuous electrocardiographic monitoring to detect possible arrhythmias. If antiarrhythmic therapy is administered, disopyramide, procainamide, and quinidine carry a theoretical hazard of additive QT-prolonging effects that might be additive to those of ziprasidone.
Hypotension and circulatory collapse should be treated with appropriate measures such as intravenous fluids. If sympathomimetic agents are used for vascular support, epinephrine and dopamine should not be used, since beta stimulation combined with α1 antagonism associated with ziprasidone may worsen hypotension. Similarly, it is reasonable to expect that the alpha-adrenergic-blocking properties of bretylium might be additive to those of ziprasidone, resulting in problematic hypotension.

In cases of severe extrapyramidal symptoms, anticholinergic medication should be administered. There is no specific antidote to ziprasidone, and it is not dialyzable. The possibility of multiple drug involvement should be considered. Close medical supervision and monitoring should continue until the patient recovers.

### Section 5: Fire-Fighting Measures

**Section 5, Fire-fighting measures**

**Fire and Explosion Hazards**
Assume that this product is capable of sustaining combustion.

**Extinguishing Media**
Water spray, carbon dioxide, dry chemical powder or appropriate foam.

**Special Firefighting Procedures**
For single units (packages): No special requirements needed.

For larger amounts (multiple packages/pallets) of product: Since toxic, corrosive or flammable vapors might be evolved from fires involving this product and associated packaging, self-contained breathing apparatus and full protective equipment are recommended for firefighters.

**Hazardous Combustion Products**
Hazardous combustion or decomposition products are expected when the product is exposed to fire.

### Section 6: Accidental Release Measures

**Section 6, Accidental release measures**

**Personal Precautions**
Wear protective clothing and equipment consistent with the degree of hazard.

**Environmental Precautions**
For large spills, take precautions to prevent entry into waterways sewers, or surface drainage systems.

**Clean-up Methods**
Collect and place it in a suitable, properly labeled container for recovery or disposal.
### Section 7: Handling and Storage

<table>
<thead>
<tr>
<th>Section, Handling and storage</th>
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<tbody>
<tr>
<td><strong>Handling</strong></td>
<td>No special control measures required for the normal handling of this product.</td>
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<tr>
<td><strong>Storage</strong></td>
<td>Ziprasidone hydrochloride capsules should be stored at 25°C (77°F); excursions permitted to 15° to 30°C (59° to 86°F) [See USP Controlled Room Temperature].</td>
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### Section 8: Exposure Controls/Personal Protection

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<tr>
<td><strong>Wear appropriate clothing to avoid skin contact. Wash hands and arms thoroughly after handling.</strong></td>
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### Section 9: Physical and Chemical Properties

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<tbody>
<tr>
<td><strong>Physical Form</strong></td>
<td>Ziprasidone hydrochloride capsules are available as:</td>
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<tr>
<td></td>
<td>Ziprasidone hydrochloride capsules, 20 mg are size ‘4’ capsules with dark blue opaque cap and white opaque body, imprinted axially with “LU” on cap and “V51” on body in black ink, containing off-white to pinkish granular powder. NDC 68180-331-07 Bottles of 60’s</td>
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<tr>
<td></td>
<td>Ziprasidone hydrochloride capsules, 40 mg are size ‘4’ capsules with dark blue opaque cap and dark blue opaque body, imprinted axially with “LU” on cap and “V52” on body in black ink, containing off-white to pinkish granular powder. NDC 68180-332-07 Bottles of 60’s</td>
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<tr>
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<td>Ziprasidone hydrochloride capsules, 60 mg are size ‘3’ capsules with white opaque cap and white opaque body, imprinted axially with “LU” on cap and “V53” on body in black ink, containing off-white to pinkish granular powder. NDC 68180-333-07 Bottles of 60’s</td>
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<tr>
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<td>Ziprasidone hydrochloride capsules, 80 mg are size ‘2’ capsules with dark blue opaque cap and white opaque body, imprinted axially with “LU” on cap and “V54” on body in black ink, containing off-white to pinkish granular powder. NDC 68180-334-07 Bottles of 60’s</td>
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### Section 10: Stability and Reactivity

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<tr>
<td><strong>Stable under recommended storage conditions.</strong></td>
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Section 11: Toxicological Information

Carcinogenesis, Mutagenesis, Impairment of Fertility

Lifetime carcinogenicity studies were conducted with ziprasidone in Long Evans rats and CD-1 mice. Ziprasidone was administered for 24 months in the diet at doses of 2, 6, or 12 mg/kg/day to rats, and 50, 100, or 200 mg/kg/day to mice (0.1 to 0.6 and 1 to 5 times the maximum recommended human dose [MRHD] of 200 mg/day on a mg/m² basis, respectively). In the rat study, there was no evidence of an increased incidence of tumors compared to controls. In male mice, there was no increase in incidence of tumors relative to controls. In female mice, there were dose-related increases in the incidences of pituitary gland adenoma and carcinoma, and mammary gland adenocarcinoma at all doses tested (50 to 200 mg/kg/day or 1 to 5 times the MRHD on a mg/m² basis). Proliferative changes in the pituitary and mammary glands of rodents have been observed following chronic administration of other antipsychotic agents and are considered to be prolactin-mediated. Increases in serum prolactin were observed in a 1-month dietary study in female, but not male, mice at 100 and 200 mg/kg/day (or 2.5 and 5 times the MRHD on a mg/m² basis). Ziprasidone had no effect on serum prolactin in rats in a 5-week dietary study at the doses that were used in the carcinogenicity study. The relevance for human risk of the findings of prolactin-mediated endocrine tumors in rodents is unknown.

Ziprasidone was tested in the Ames bacterial mutation assay, the in vitro mammalian cell gene mutation mouse lymphoma assay, the in vitro chromosomal aberration assay in human lymphocytes, and the in vivo chromosomal aberration assay in mouse bone marrow. There was a reproducible mutagenic response in the Ames assay in one strain of S. typhimurium in the absence of metabolic activation. Positive results were obtained in both the in vitro mammalian cell gene mutation assay and the in vitro chromosomal aberration assay in human lymphocytes.

Ziprasidone was shown to increase time to copulation in Sprague-Dawley rats in two fertility and early embryonic development studies at doses of 10 to 160 mg/kg/day (0.5 to 8 times the MRHD of 200 mg/day on a mg/m² basis). Fertility rate was reduced at 160 mg/kg/day (8 times the MRHD on a mg/m² basis). There was no effect on fertility at 40 mg/kg/day (2 times the MRHD on a mg/m² basis). The effect on fertility appeared to be in the female since fertility was not impaired when males given 160 mg/kg/day (8 times the MRHD on a mg/m² basis) were mated with untreated females. In a 6-month study in male rats given 200 mg/kg/day (10 times the MRHD on a mg/m² basis) there were no treatment-related findings observed in the testes.

Section 12: Ecological Information

No relevant studies identified.
## Section 13: Disposal Considerations

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

## Section 14: Transport Information

### 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

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

## 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 MSDS.