MATERIAL SAFETY DATA SHEET

1. IDENTIFICATION OF THE SUBSTANCE AND THE COMPANY

Material **Eszopiclone Tablets, for oral use©**
1 mg, 2 mg and 3 mg

Manufacturer
Lupin Limited
Goa 403 722
INDIA.

Distributor
Lupin Pharmaceuticals, Inc.
Harborplace Tower, 21st Floor
111, South Calvert Street
Baltimore, MD 21202
United States
Tel. 001-410-576-2000
Fax. 001-410-576-2221

2. COMPOSITION / INFORMATION ON INGREDIENTS

Ingredients	CAS	Quantity
Eszopiclone	138729-47-2	1 mg, 2 mg and 3 mg Tablets

3. HAZARD IDENTIFICATION

Fire and Explosion Expected to be non-combustible

Health Eszopiclone is contraindicated in patients with known hypersensitivity to eszopiclone. Hypersensitivity reactions include anaphylaxis and angioedema.

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

4. FIRST AID MEASURE

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 — In clinical trials with eszopiclone, one case of overdose with up to 36 mg of eszopiclone was reported in which the subject fully recovered. Since commercial marketing began, spontaneous cases of eszopiclone overdoses up to 270 mg (90 times the maximum recommended dose of eszopiclone) have been reported, in which patients have recovered. Fatalities related to eszopiclone overdoses were reported only in combination with other CNS drugs or alcohol.

5. FIRE FIGHTING MEASURE

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.

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.

7. HANDLING AND STORAGE

Handling No special control measures required for the normal handling of this product. Normal room ventilation is expected to be adequate for routine handling of this product.

Storage Store at 25°C (77°F); excursions permitted to 15 to 30°C (59 to 86°F) [see USP Controlled Room Temperature].

8. EXPOSURE CONTROLS / PERSONAL PROTECTION

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

9. PHYSICAL AND CHEMICAL PROPERTIES

Physical Form Eszopiclone Tablets, 1 mg are light blue coloured, round, biconvex, film-coated tablets, debossed with “LU” on one side and “Y21” on the other side.

They are supplied as follows:

NDC 68180-322-01	Bottles of 100’s
NDC 68180-322-13	7 x 14’s unit dose blisters

Eszopiclone Tablets, 2 mg are white coloured, round, biconvex, film-coated tablets, debossed with “LU” on one side and “Y22” on the other side.

They are supplied as follows:

NDC 68180-323-01	Bottles of 100’s
NDC 68180-323-02	Bottles of 500’s
NDC 68180-323-13	7 x 14’s unit dose blisters

Eszopiclone Tablets, 3 mg are dark blue coloured, round, biconvex, film-coated tablets, debossed with “LU” on one side and “Y23” on the other side.

They are supplied as follows:

NDC 68180-324-01	Bottles of 100’s
NDC 68180-324-02	Bottles of 500’s
NDC 68180-324-03	Bottles of 1000’s
NDC 68180-324-13	7 x 14’s unit dose blisters

10. STABILITY AND REACTIVITY

Stable under recommended storage conditions.

11. TOXICOLOGICAL INFORMATION

Carcinogenesis, Mutagenesis, Impairment of Fertility

Carcinogenesis

In a carcinogenicity study in rats, oral administration of eszopiclone for 97 (males) or 104 (females) weeks resulted in no increases in tumors; plasma levels (AUC) of eszopiclone at the highest dose tested (16 mg/kg/day) are approximately 80 (females) and 20 (males) times those in humans at the maximum recommended human dose (MRHD) of 3 mg/day. However, in a 2 year carcinogenicity study in rats, oral administration of racemic zopiclone (1, 10, or 100 mg/kg/day) resulted in increases in mammary gland adenocarcinomas (females) and thyroid gland follicular cell adenomas and carcinomas (males) at the highest dose tested. Plasma levels of eszopiclone at this dose are approximately 150 (females) and 70 (males) times those in humans at the MRHD of eszopiclone. The mechanism for the increase in mammary adenocarcinomas is unknown. The increase in thyroid tumors is thought to be due to increased levels of TSH secondary to increased metabolism of circulating thyroid hormones, a mechanism not considered relevant to humans.

In a 2-year carcinogenicity study in mice, oral administration of racemic zopiclone (1,10,or 100 mg/kg/day) produced increases in pulmonary carcinomas and carcinomas plus adenomas (females) and skin fibromas and sarcomas (males) at the highest dose tested. The skin tumors were due to skin lesions induced by aggressive behavior, a mechanism not relevant to humans. A carcinogenicity study of eszopiclone was conducted in mice at oral doses up to 100 mg/kg/day. Although this study did not reach a maximum tolerated dose, and was

thus inadequate for overall assessment of carcinogenic potential, no increases in either pulmonary or skin tumors were seen at doses producing plasma levels of eszopiclone approximately 90 times those in humans at the MRHD of eszopiclone (and 12 times the exposure in the racemate study).

Eszopiclone did not increase tumors in a p53 transgenic mouse bioassay at oral doses upto 300 mg/kg/day.

Mutagenesis

Eszopiclone was clastogenic in in vitro (mouse lymphoma and chromosomal aberration) assays in mammalian cells. Eszopiclone was negative in the in vitro bacterial gene mutation (Ames) assay and in an in vivo micronucleus assay.

(S)-N-desmethyl zopiclone, a metabolite of eszopiclone, was positive in in vitro chromosomal aberration assays in mammalian cells. (S)-N-desmethyl zopiclone was negative in the in vitro bacterial gene mutation (Ames) assay and in an in vivo chromosomal aberration and micronucleus assay.

Impairment of Fertility

Oral administration of eszopiclone to rats prior to and during mating, and continuing in females to day 7 of gestation (doses up to 45 mg/kg/day to males and females or up to 180 mg/kg/day to females only) resulted in decreased fertility, with no pregnancy at the highest dose tested when both males and females were treated. In females, there was an increase in abnormal estrus cycles at the highest dose tested. In males, decreases in sperm number and motility and increases in morphologically abnormal sperm were observed at the mid and high doses. The no-effect dose for adverse effects on fertility (5 mg/kg/day) is 16 times the MRHD on a mg/m^2 basis.

12. ECOLOGICAL INFORMATION

No relevant studies identified.

13. DISPOSAL CONSIDERATION

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

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

15. REGULATORY INFORMATION

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

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.