Occupational Health Guideline for
Methyl Alcohol

INTRODUCTION

This guideline is intended as a source of information for employees, employers, physicians, industrial hygienists, and other occupational health professionals who may have a need for such information. It does not attempt to present all data; rather, it presents pertinent information and data in summary form.

SUBSTANCE IDENTIFICATION

- Formula: CH₂OH
- Synonyms: Methanol; wood alcohol; Columbian spirits; carbinal
- Appearance and odor: Colorless liquid with a characteristic, pungent odor.

PERMISSIBLE EXPOSURE LIMIT (PEL)

The current OSHA standard for methyl alcohol is 200 parts of methyl alcohol per million parts of air (ppm) averaged over an eight-hour work shift. This may also be expressed as 260 milligrams of methyl alcohol per cubic meter of air (mg/m³). NIOSH has recommended that the permissible exposure limit be changed to 200 ppm averaged over a work shift of up to 10 hours per day, 40 hours per week, with a ceiling of 800 ppm averaged over a 15-minute period. The NIOSH Criteria Document for Methyl Alcohol should be consulted for more detailed information.

HEALTH HAZARD INFORMATION

- Routes of exposure
Methyl alcohol can affect the body if it is swallowed, is inhaled, or comes in contact with the skin or eyes.
- Effects of overexposure
  1. Short-term Exposure: Swallowing methyl alcohol or breathing very high concentrations of methyl alcohol may produce headache, weakness, drowsiness, lightheadedness, nausea, vomiting, drunkenness, and irritation of the eyes, blurred vision, blindness, and death. A person may get better and then worse again up to 30 hours later.
  2. Long-term Exposure: Prolonged exposure to higher concentrations of methyl alcohol may result in headaches, burning of the eyes, dizziness, sleep problems, digestive disturbances, and failure of vision. Repeated or prolonged skin exposure may cause skin irritation.
  3. Reporting Signs and Symptoms: A physician should be contacted if anyone develops any signs or symptoms and suspects that they are caused by exposure to methyl alcohol.
- Recommended medical surveillance
The following medical procedures should be made available to each employee who is exposed to methyl alcohol at potentially hazardous levels:
  1. Initial Medical Examination:
     - A complete history and physical examination: The purpose is to detect pre-existing conditions that might place the employee at increased risk, and to establish a baseline for future health monitoring. Examination of the skin, liver, kidneys, and eyes should be stressed.
     - Skin disease: Methyl alcohol is a defatting agent and can cause dermatitis on prolonged exposure. Persons with pre-existing skin disorders may be susceptible to the effects of this agent.
     - Liver function tests: Methyl alcohol may cause liver damage. A profile of liver function should be obtained by utilizing a medically acceptable array of biochemical tests.
     - Kidney disease: Although methyl alcohol has not been proven to be kidney toxin in humans, the importance of this organ in the elimination of toxic substances justifies special consideration in those with impaired renal function.
     - Eye disease: Because methyl alcohol may cause optic atrophy and blindness, those with pre-existing eye diseases may be at increased risk from exposure.
  2. Periodic Medical Examination: The aforementioned medical examinations should be repeated on an annual basis. In addition, anyone developing the above-listed conditions or who has been splashed in the eyes with,

These recommendations reflect good industrial hygiene and medical surveillance practices and their implementation will assist in achieving an effective occupational health program. However, they may not be sufficient to achieve compliance with all requirements of OSHA regulations.

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Public Health Service  Centers for Disease Control
National Institute for Occupational Safety and Health

U.S. DEPARTMENT OF LABOR
Occupational Safety and Health Administration

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has ingested, or otherwise has been exposed to methyl alcohol should be placed under medical surveillance.

- Summary of Toxicology
Ingestion of methyl alcohol is a well-known cause of optic neuropathy and may be lethal. Severe acidosis may result from ingestion or high exposures. Animals exposed to vapor concentrations above 8000 to 10,000 ppm show narcotic effects progressing from lethargy, to ataxia, to prostration and death in a state of profound acidosis due in part to the metabolic formation of formaldehyde and formic acid. Occupational exposure to high concentrations of methyl alcohol vapor has been reported to cause death or blindness, usually from working in a confined space. A woman died after exposure for 12 hours to vapor concentrations calculated at 4000 to 13,000 ppm. Chronic poisoning manifested by marked diminution of vision and enlargement of the liver has been reported in a workman exposed at levels of 1200 to 8000 ppm for a period of 4 years. Direct skin contact with methy alcohol may cause dermatitis, erythema, and scaling.

CHEMICAL AND PHYSICAL PROPERTIES

- Physical data
  1. Molecular weight: 32
  2. Boiling point (760 mm Hg): 64.5 C (148 F)
  3. Specific gravity (water = 1): 0.8
  4. Vapor density (air = 1 at boiling point of methyl alcohol): 1.1
  5. Melting point: -98 C (-144 F)
  6. Vapor pressure at 20 C (68 F): 97 mm Hg
  7. Solubility in water, g/100 g water at 20 C (68 F): Miscible in all proportions
  8. Evaporation rate (butyl acetate = 1): 5.9

- Reactivity
  1. Conditions contributing to instability: Heat
  2. Incompatibilities: Contact with strong oxidizers may cause fires and explosions.
  3. Hazardous decomposition products: Toxic gases and vapors (such as carbon monoxide and formaldehyde) may be released in a fire involving methyl alcohol.
  4. Special precautions: Methyl alcohol will attack some forms of plastics, rubber, and coatings. It may also react with metallic aluminum at high temperatures.

- Flammability
  1. Flash point: 11 C (52 F) (closed cup)
  2. Autoignition temperature: 385 C (725 F)
  3. Flammable limits in air, % by volume: Lower: 6.7; Upper: 36
  4. Extinguishment: Dry chemical, alcohol foam, carbon dioxide

- Warning properties
  1. Odor Threshold: May and Summer report that the odor threshold of methyl alcohol (methanol) is 5900 ppm. The AIHA Hygienic Guide states that the odor is faint at 2000 ppm.
  2. Eye Irritation Level: The Hygienic Guide states that irritation occurs only at high concentrations. Grant states that “external contact of methanol with the eye has been alleged to have caused corneal opacities, but this must be far from the rule. . . . By exposure of cats to methanol vapors an attempt has been made to induce vacuoles in the corneal epithelium similar to those produced by other solvents, but this has been unsuccessful.”

Browning reports that concentrations ranging from 7500 ppm to 69,000 ppm irritate mucous membranes.

3. Evaluation of Warning Properties: Methyl alcohol (methanol) has poor warning properties.

MONITORING AND MEASUREMENT PROCEDURES

- Eight-Hour Exposure Evaluation
Measurements to determine employee exposure are best taken so that the average eight-hour exposure is based on a single eight-hour sample or on two four-hour samples. Several short-time interval samples (up to 30 minutes) may also be used to determine the average exposure level. Air samples should be taken in the employee's breathing zone (air that would most nearly represent that inhaled by the employee).

- Ceiling Evaluation
Measurements to determine employee ceiling exposure are best taken during periods of maximum expected airborne concentrations of methyl alcohol. Each measurement should consist of a fifteen (15) minute sample or series of consecutive samples totalling fifteen (15) minutes in the employee's breathing zone (air that would most nearly represent that inhaled by the employee). A minimum of three (3) measurements should be taken on one work shift and the highest of all measurements taken is an estimate of the employee's exposure.

- Method
Sampling and analyses may be performed by collection of methyl alcohol in an adsorption tube containing silica gel, followed by desorption with water, and gas chromatographic analysis. Also, detector tubes certified by NIOSH under 42 CFR Part 84 or other direct-reading devices calibrated to measure methyl alcohol may be used. An analytical method for methyl alcohol is in the NIOSH Manual of Analytical Methods, 2nd Ed., Vol. 2, 1977, available from the Government Printing Office, Washington, D.C. 20402 (GPO No. 017-033-00260-6).

RESPIRATORS

- Good industrial hygiene practices recommend that engineering controls be used to reduce environmental concentrations to the permissible exposure level. However, there are some exceptions where respirators may be used to control exposure. Respirators may be used when engineering and work practice controls are not technically feasible, when such controls are in the
process of being installed, or when they fail and need to be supplemented. Respirators may also be used for operations which require entry into tanks or closed vessels, and in emergency situations. If the use of respirators is necessary, the only respirators permitted are those that have been approved by the Mine Safety and Health Administration (formerly Mining Enforcement and Safety Administration) or by the National Institute for Occupational Safety and Health.

- In addition to respirator selection, a complete respiratory protection program should be instituted which includes regular training, maintenance, inspection, cleaning, and evaluation.

### PERSONAL PROTECTIVE EQUIPMENT

- Employees should be provided with and required to use impervious clothing, gloves, face shields (eight-inch minimum), and other appropriate protective clothing necessary to prevent repeated or prolonged skin contact with liquid methyl alcohol.
- Clothing wet with liquid methyl alcohol should be placed in closed containers for storage until it can be discarded or until provision is made for the removal of methyl alcohol from the clothing. If the clothing is to be laundered or otherwise cleaned to remove the methyl alcohol, the person performing the operation should be informed of methyl alcohol's hazardous properties.
- Any clothing which becomes wet with liquid methyl alcohol should be removed immediately and not reworn until the methyl alcohol is removed from the clothing.
- Employees should be provided with and required to use splash-proof safety goggles where liquid methyl alcohol may contact the eyes.

### SANITATION

- Skin that becomes wet with liquid methyl alcohol should be promptly washed or showered to remove any methyl alcohol.
- Eating and smoking should not be permitted in areas where liquid methyl alcohol is handled, processed, or stored.

### COMMON OPERATIONS AND CONTROLS

The following list includes some common operations in which exposure to methyl alcohol may occur and control methods which may be effective in each case:

<table>
<thead>
<tr>
<th>Operation</th>
<th>Controls</th>
</tr>
</thead>
<tbody>
<tr>
<td>Liberation during application of surface coatings such as shellac, wood dyes, nitrocellulose lacquers, water-proofing formulations, and phenolic resins</td>
<td>Local exhaust ventilation; general dilution ventilation; personal protective equipment</td>
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<tr>
<td>Use as a solvent for rotogravure inks, aniline dyes, and duplicator fluids</td>
<td>General dilution ventilation</td>
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<tr>
<td>Liberation during manual application of methanol as a cleaner for coated surfaces, leather, gloves, and metal and resins surfaces prior to further treatment</td>
<td>General dilution ventilation; personal protective equipment</td>
</tr>
<tr>
<td>Liberation during manufacture of formaldehyde by oxidation or dehydrogenation</td>
<td>Local exhaust ventilation; general dilution ventilation</td>
</tr>
<tr>
<td>Use in plastics industry to produce plasticizers, softening agents, and acrylic resins</td>
<td>Local exhaust ventilation; general dilution ventilation; personal protective equipment</td>
</tr>
<tr>
<td>Liberation during use as an intermediate in the preparation of methacrylates, methyl chlorides, methyl ethers, dimethyl sulfate, methyl formate, and methyl bromide</td>
<td>Local exhaust ventilation; general dilution ventilation</td>
</tr>
<tr>
<td>Liberation during application as an extractant in industrial chemical processes such as refinery gasoline and oils and purifying pharmaceuticals such as steroids and hormones</td>
<td>Local exhaust ventilation; general dilution ventilation; personal protective equipment</td>
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<tr>
<td>Use as a solvent in rubber industry</td>
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</table>
EMERGENCY FIRST AID PROCEDURES

In the event of an emergency, institute first aid procedures and send for first aid or medical assistance.

• Eye Exposure
If methyl alcohol gets into the eyes, wash eyes immediately with large amounts of water, lifting the lower and upper lids occasionally. Get medical attention as soon as possible. Contact lenses should not be worn when working with this chemical.

• Skin Exposure
If methyl alcohol gets on the skin, promptly flush the contaminated skin with water. If methyl alcohol soaks through the clothing, remove the clothing immediately and flush the skin with water. If there is skin irritation, get medical attention.

• Breathing
If a person breathes in large amounts of methyl alcohol, move the exposed person to fresh air at once. If breathing has stopped, perform artificial respiration. Keep the affected person warm and at rest. Get medical attention as soon as possible.

• Swallowing
When methyl alcohol has been swallowed, get medical attention immediately. If medical attention is not immediately available, get the afflicted person to vomit by having him touch the back of his throat with his finger or by giving him syrup of ipecac as directed on the package. This non-prescription drug is available at most drug stores and drug counters and should be kept with emergency medical supplies in the workplace. Do not make an unconscious person vomit.

• Rescue
Move the affected person from the hazardous exposure. If the exposed person has been overcome, notify someone else and put into effect the established emergency rescue procedures. Do not become a casualty. Understand the facility’s emergency rescue procedures and know the locations of rescue equipment before the need arises.

SPILL, LEAK, AND DISPOSAL PROCEDURES

• Persons not wearing protective equipment and clothing should be restricted from areas of spills or leaks until cleanup has been completed.

• If methyl alcohol is spilled or leaked, the following steps should be taken:
  1. Remove all ignition sources.
  2. Ventilate area of spill or leak.
  3. For small quantities, absorb on paper towels. Evaporate in a safe place (such as a fume hood). Allow sufficient time for evaporating vapors to completely clear the hood ductwork. Burn the paper in a suitable location away from combustible materials. Large quantities can be collected and atomized in a suitable combustion chamber. Methyl alcohol should not be allowed

to enter a confined space, such as a sewer, because of the possibility of an explosion.

• Waste disposal methods:
  Methyl alcohol may be disposed of:
  1. By absorbing it in vermiculite, dry sand, earth or a similar material and disposing in a secured sanitary landfill.
  2. By atomizing in a suitable combustion chamber.

REFERENCES

• Union Carbide Corporation, Industrial Medicine and Toxicology Department: Toxicology Studies - Methyl Alcohol, New York, 1970.
# Respiratory Protection for Methyl Alcohol

<table>
<thead>
<tr>
<th>Condition</th>
<th>Minimum Respiratory Protection* Required Above 200 ppm</th>
</tr>
</thead>
<tbody>
<tr>
<td>Vapor Concentration</td>
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<tr>
<td>2000 ppm or less</td>
<td>Any supplied-air respirator. Any self-contained breathing apparatus.</td>
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<tr>
<td>10,000 ppm or less</td>
<td>Any supplied-air respirator with a full facepiece, helmet, or hood. Any self-contained breathing apparatus with a full facepiece.</td>
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<tr>
<td>25,000 ppm or less</td>
<td>A Type C supplied-air respirator with a full facepiece operated in pressure-demand or other positive pressure mode or with a full facepiece, helmet, or hood operated in continuous-flow mode.</td>
</tr>
<tr>
<td>Greater than 25,000 ppm or entry and escape from unknown concentrations</td>
<td>Self-contained breathing apparatus with a full facepiece operated in pressure-demand or other positive pressure mode. A combination respirator which includes a Type C supplied-air respirator with a full facepiece operated in pressure-demand or other positive pressure or continuous-flow mode and an auxiliary self-contained breathing apparatus operated in pressure-demand or other positive pressure mode.</td>
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<tr>
<td>Fire Fighting</td>
<td>Self-contained breathing apparatus with a full facepiece operated in pressure-demand or other positive pressure mode.</td>
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<tr>
<td>Escape</td>
<td>Any escape self-contained breathing apparatus.</td>
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*Only NIOSH-approved or MSHA-approved equipment should be used.*