

# Potential hazards linked to the use of disinfectants in healthcare: Health and occupational health risks assessment

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# Outline

- I. Respiratory health effects of disinfectants and cleaning products (DCP)
  - Chronic respiratory diseases
  - DCP and asthma
  - DCP and COPD / lung function
  
- II. Other potential health effects of DCP
  
- III. Conclusion and pending questions

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# Chronic respiratory diseases

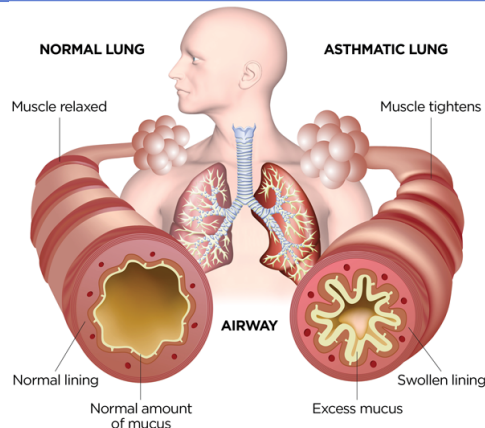
## Asthma

### Definition / characteristics

- Chronic inflammatory disease of the airways
- Attacks of breathlessness with wheezing
- Chronic respiratory symptoms

### Prevalence

- France : children 10-15% ; adults 5-10%
- World : **~270 millions**



## Chronic Obstructive Pulmonary Disease (COPD)

### Definition / characteristics

- Progressive and largely non-reversible airway obstruction leading to airflow limitation
- Diagnosed by lung function measurements

### Prevalence

- France : Adults  $\geq 45$  years 5-10%
- World : **~300 millions, 3<sup>rd</sup> cause of mortality**

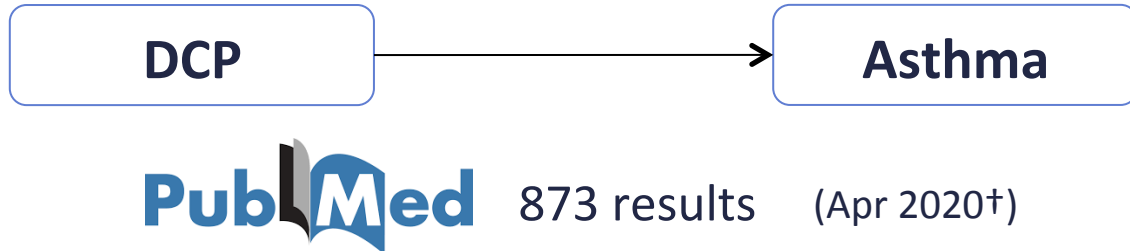


# Chronic respiratory diseases

## Asthma

## Chronic Obstructive Pulmonary Disease (COPD)

- **15-20% of asthma and COPD cases attributable to occupational exposures** (Blanc, AJRCCM, 2019)
- In the past 2 decades: **growing evidence for adverse respiratory effects of occupational exposure to disinfectants and cleaning products (DCP)**



†(cleaning worker\* OR cleaning product\* OR cleaner\* OR disinfect\*) AND asthma

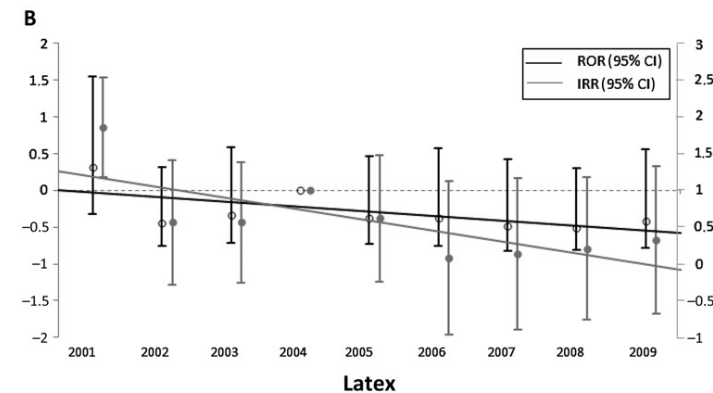
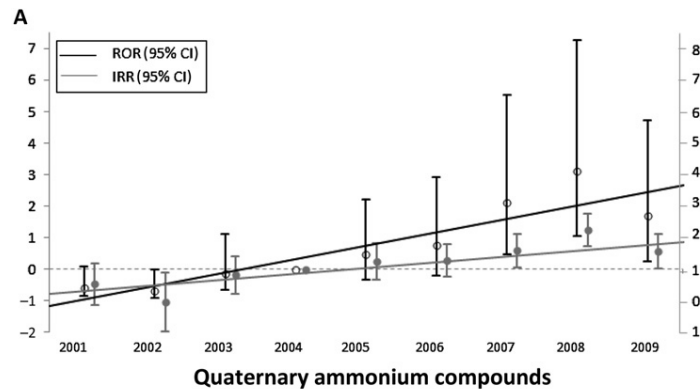
†(cleaning worker\* OR cleaning product\* OR cleaner\* OR disinfect\*) AND (COPD OR chronic obstructive pulmonary disease)

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# DCP first identified as a risk factor for asthma

- **Surveillance data:** Industries/jobs accounting for a large part of occupational asthma cases:
  - Cleaners
  - **Healthcare**
    - USA: 16% (1<sup>st</sup> industry)
    - France: 12% (2<sup>nd</sup> industry)
    - **Hospital workers** - nurses, nursing aides, cleaners
  - DCP increasingly identified as causal agent



French national surveillance network 2000-2010 (Paris, OEM, 2012)

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    - **Hospital workers** - nurses, nursing aides, cleaners
  - DCP increasingly identified as causal agent
- **Epidemiological studies**
  - Increased asthma risk (asthma development, asthma symptoms) among
    - Healthcare workers : nurses, nursing aides
    - Cleaners



# Agents contained in DCP



## Common cleaning / disinfection products

Bleach

Ammonia

Acids (decalcifiers)

Quats (quaternary ammonium compounds)

Alcohol

Perfumes

...



## Products used in healthcare settings

Aldehydes (formaldehyde, glutaraldehyde)

Hydrogen peroxide (+ acids)

Chlorhexidine

Chloramine T

Ethylene oxide

Enzymes (added to detergents)

...

**Potential target(s) for prevention: which specific product(s)/agent(s) ?**



## Specific agents associated with asthma (epidemiological studies)

Reference	Study design, country	Outcome	Agents
Medina-Ramon, 2005	Spain, cleaners, n=195	Current asthma/ chronic bronchitis	Bleach, ammonia
Mirabelli, 2007	Europe, n=2813	New-onset asthma	Bleach, ammonia
Vizcaya, 2011	Spain, cleaners, n=917	Current asthma, asthma symptoms	Hydrochloric acid, ammonia
Arif, 2012	USA, healthcare workers, n=3650	Work-related asthma / asthma symptoms	Bleach, ammonia, chloramines, formaldehyde, glutaraldehyde/ ortho-phthalaldehyde, ethylene oxide
Dumas, 2012	France, n=724	Current asthma	Decalcifiers (acids), ammonia
Gonzalez, 2014	France, healthcare workers, n=543	Physician-diagnosed asthma	Quaternary ammonium compounds
Dumas, 2017	USA, female nurses with asthma, n=4102	Asthma control	Bleach, hydrogen peroxide, enzymatic cleaners, formaldehyde, glutaraldehyde
Casey, 2017	USA, hospital workers, n=163	Current asthma	Disinfectant containing hydrogen peroxide, peracetic acid and acetic acid
Su, 2019	USA, healthcare workers, n=2030	Asthma clusters, e.g. “undiagnosed/ untreated asthma”, “asthma attacks/ exacerbations”	Alcohols, bleach, enzymatic cleaners
Brooks, 2020	New Zealand, 425 cleaners, 281 other workers	Current asthma, lung function	Bleach, decalcifiers (acids)

\*Results presented only for chemicals significantly associated with asthma outcomes. Products with mixed composition (e.g., “detergents”, “cleaning sprays”, “multipurpose products”) not reported in this table.

# Specific agents associated with asthma (epidemiological studies)

- **Bleach (chlorine) and ammonia**: first specific agents identified
- **Bleach** remains the most frequently reported
- High level disinfectants (healthcare settings):
  - Aldehydes (**formaldehyde, glutaraldehyde**) long known as causing agents for occupational asthma
  - High level disinfectants proposed as alternative to aldehydes (**hydrogen peroxide or hydrogen peroxide / peracetic acid mixtures**) also appear associated with asthma outcomes

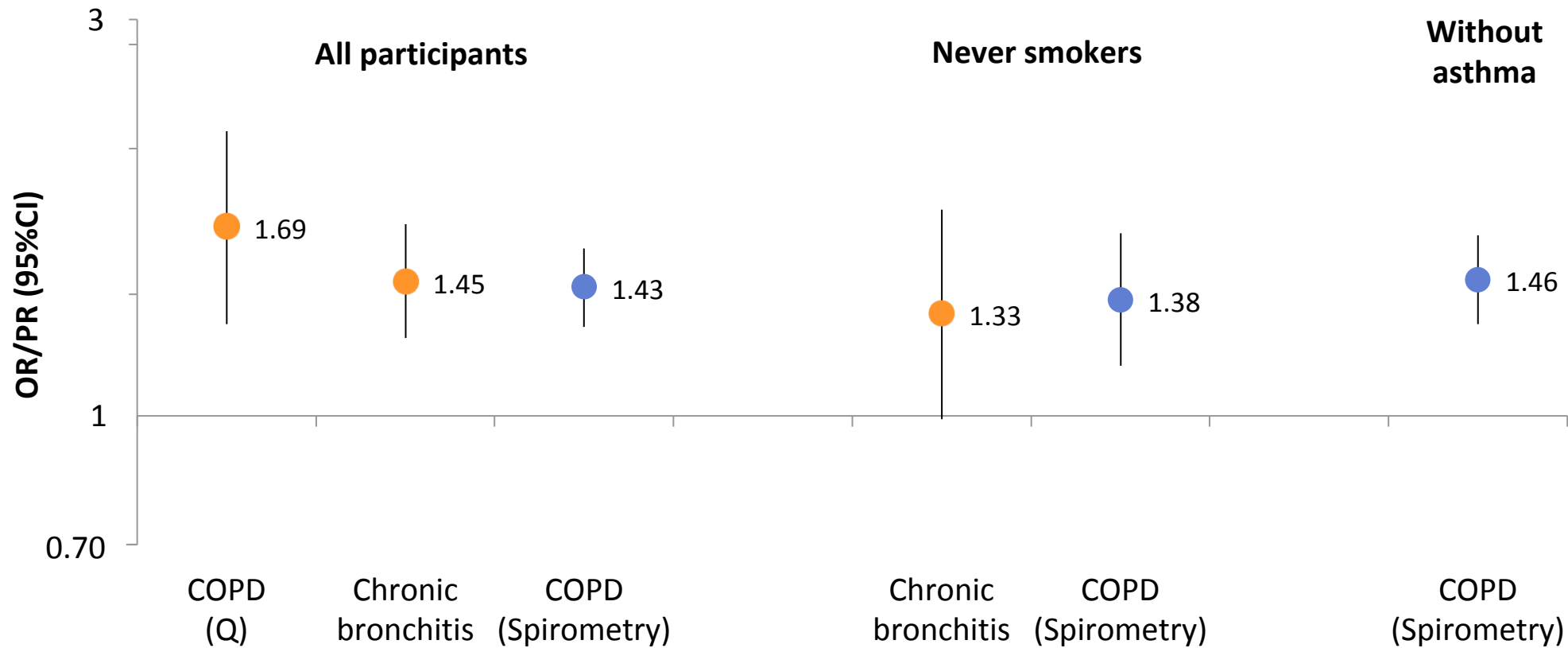
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# Working as cleaner and COPD: two European studies

**RHINE III (Northern Europe):** n=13,499 adults (mean age: 51.5) - Svanes, PlosOne, 2015

**UK Biobank:** n=228,614 adults (mean age: 52) – De Matteis, OEM, 2016



Results adjusted for sex, age, smoking, +education level, parents' education level, body mass index

# Working as cleaner and COPD mortality

Van den Borre et al, Int Arch Occup Environ Health 2018

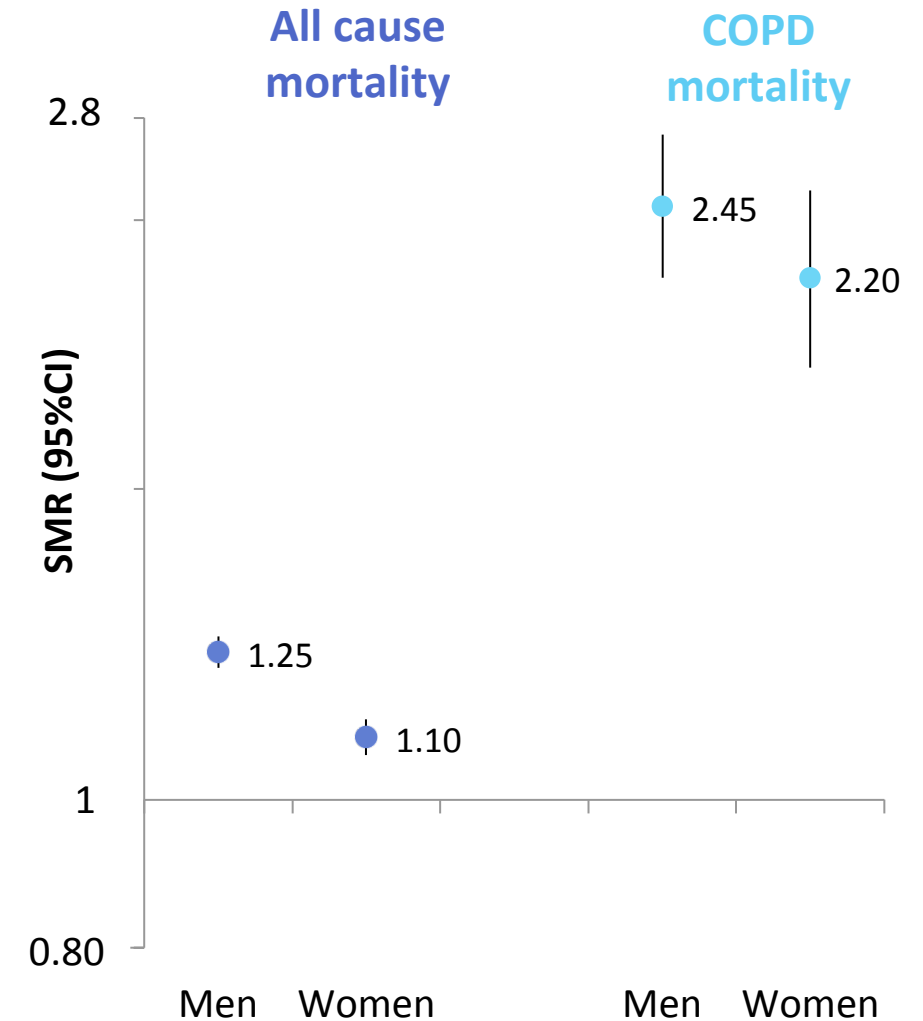
- Linkage of Belgian census, register & death certificate data

Working population in 1991, ~2.5M adults

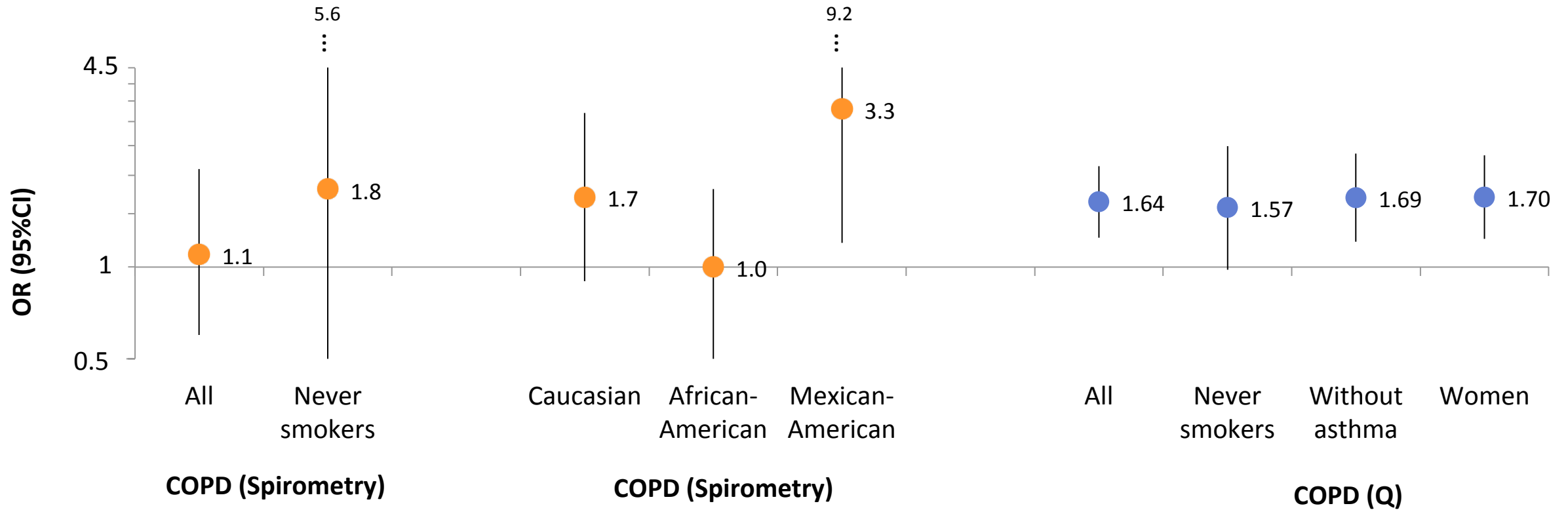
~260,000 deaths from 1991 to 2011

- Cause specific mortality in death certificate:  
ICD 9/10
- Current occupation recorded in 1991 census:  
Comparison cleaners vs. non-manual workers (ref)

- Association with COPD mortality remained similar after adjustment for smoking (indirect) and education
- Working as cleaner also associated with mortality from lung cancer, pneumonia, ischemic heart diseases and cerebrovascular diseases with SMR range [1.10-1.50]



# Working in healthcare and COPD: studies in the US



## NHANES III - Hnizdo et al., AJE 2002 & AJIM 2004

- US, 1988-94
- n=9,823 adults aged 30-75 years
- Longest held job – **healthcare industry**

## NHIS – Doney et al, JOEM 2014

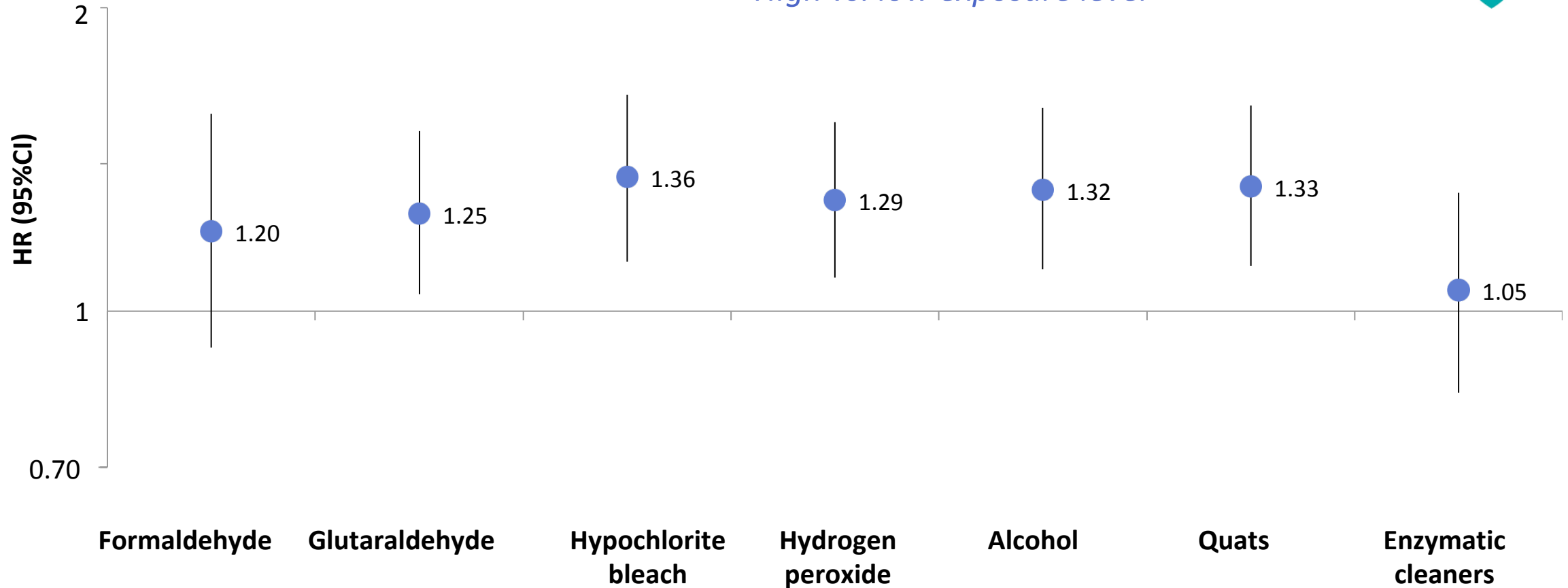
- US, 2004-11
- Adults aged 40-70 years
- Current job – **healthcare support**

Results adjusted for sex, age, race/ethnicity, smoking, +education level/SES, body mass index

# Association of exposure to specific disinfectants/cleaning products with COPD incidence

n=582 incident COPD cases

Exposure to specific agents  
*High vs. low exposure level*



- Female registered nurses from 15 US states
- Follow-up from 2009 to 2017
- 73,262 nurses (mean age: 54 years)

Results adjusted for age, race, ethnicity, smoking status and pack-years, and body mass index

Dumas et al., JAMA Network Open, 2019

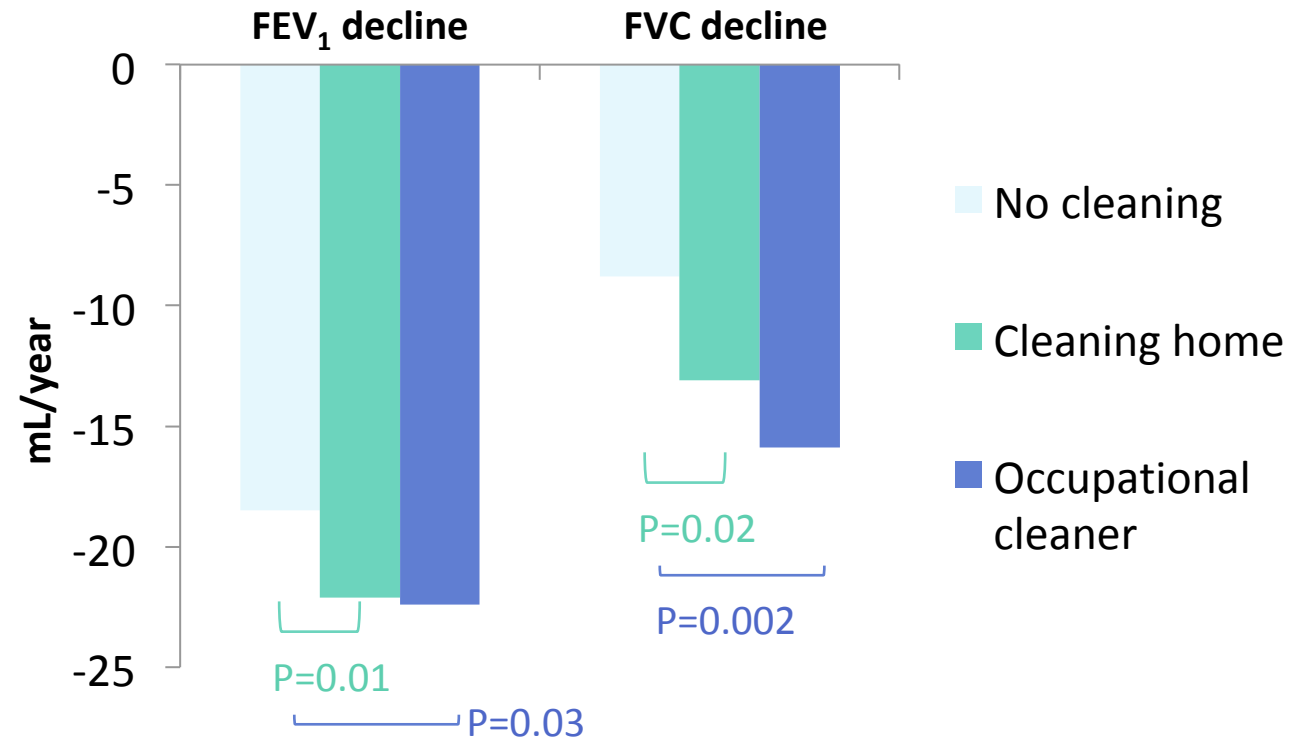


# Cleaning and lung function decline

## ECRHS (Europe) – Svanes, AJRCCM 2018

- n=6,235 adults (mean age: 54 at end of follow-up)
- Lung function decline and airway obstruction:
  - Spirometry at each survey
  - Decline in FEV<sub>1</sub>, FVC, FEV<sub>1</sub>/FVC
- Cleaning exposures:
  - Cleaning at home (+ use of sprays)
  - Occupational cleaner

## Cleaning activities and lung function decline in women



Results adjusted for age, height, smoking, education level, body mass index, spirometer model and study center  
FEV<sub>1</sub>: forced expiratory volume in 1 second; FVC: forced vital capacity

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# Other potential health hazards of occupational exposure to DCP

- Reproductive outcomes

Use of sterilizing agents/disinfectants among female nurses associated with increased risk of :

- Preterm birth - Lawson, AJOG 2009
- Spontaneous abortions - Lawson, AJOG 2012
- Reduced fecundity - Gaskins, SJWEH 2016

- Cardiovascular outcomes

Long-term frequent use of household spray and scented products in older adult women associated with reduced Heart Rate Variability (suggests cardiovascular health hazards) - Mehta, EHP 2012

- Endocrine disruptors

Disinfectants may contain endocrine disruptive chemicals used as preservative and antimicrobial agents (e.g., parabens, triclosan, triclocarban) – Dodson, EHP 2012

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# Conclusion and pending questions

- **Conclusions:**

- Strong evidence to support a link between DCP exposure and **asthma**
- Evidence to support a link between DCP exposure and **COPD** is accumulating
- Additional studies are needed to examine **other potential health effects**

- **Pending questions:**

- Clarify the causative agents
  - Crucial knowledge for the development of strategies for prevention, in particular in healthcare settings
- Strategies for asthma and COPD prevention
  - Use of protective equipment, ventilation?
  - Limit use of sprays (likely to increase exposure by inhalation – Loven, Occup Env Hyg 2019)
  - Safer alternatives?
    - “Green products”? (need health safety evaluation) – Garza, AJIM 2015
    - Non-chemical disinfection? (UV light, heat) – Quinn, AJIC 2015

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