Safer Sanitizers and Disinfectants: A Look at San Francisco's Latest Alternatives Analysis



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A Department of the City and County of San Francisco

Topics

- The problem
- Definitions
- Methodology
- Recommendations
- Regulatory challenges



Problems with disinfectants



Prions* (CJD, BSE) Coccidia (Cryptosporidium) Spores (Bacillus, C. difficile) Mycobacteria (M. tuberculosis, M. avium) Tuberculosis Cysts (Giardia) Small non-enveloped viruses ' ' ' ' ' ' ' N orovirus (Polio virus) Trophozoites (Acanthamoeba) Gram-negative bacteria (non-sporulating) (Pseudomonas, Providencia) Fungi A thletes Foot (Candida, Aspergillus) Large non-enveloped viruses (Enteroviruses, Adenovirus) Gram-positive bacteria E. coli (S. aureus, Enterococcus) Lipid enveloped viruses In fluenza (HIV, HBV)

FIG. 1. Descending order of resistance to antiseptics and disinfectants. The asterisk indicates that the conclusions are not yet universally agreed upon.

Hard to kill

Easy to kill

Source: McDonnell & Russell, 1999

Definitions

 Non food contact sanitizers



 Staph AND
 Klebsiella pneumoniae OR Enterobacter aerogenes
 99.9% in 5 minutes

Definitions

Disinfectants



- High-Grade, or Hospital-Grade
 - Staph, Salmonella, and Pseudomonas 99.9999% in 10 minutes
- General
 - Staph AND Salmonella
 99.999% kill in 10 minutes
- Limited
 - Salmonella OR Staph
 99.999% kill in 10 minutes.

Attributes assessed in this AA



Exposure potential* Cost and availability* Life-cycle impacts Social impacts Stakeholder input Comparison of materials and/or processes.

(OECD, 2013. Current landscape of alternatives assessment practice: A meta-review. Series on Risk Management #26. www.oecd.org/chemicalsafety/)

Assessment factors: Active ingredients

- Cancer
- Reproductive toxicity
- Respiratory sensitization
- Skin sensitization
- Aquatic toxicity
- Persistence



Assessment factors: Products

All of the above, and...

- Dwell time
- Efficacy for various microorganisms
- Acute toxicity
 - Skin
 - Eye
 - Respiratory
- Eutrophication potential
- Surface compatibilities
- Availability as a concentrate (carbon impacts)
- Potential for exposure reduction (dispensing systems)

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Active ingredients considered

- Chlorine "bleach" (sodium hypochlorite)
- Hydrogen peroxide (regular and AHP)
- Organic acids (citric/lactic/caprylic)
- Ortho-phenylphenol
- Pine oil
- "Quats"

Silver + citric acid

Thymol

Other alternatives

- Electrolyzed water
- Microfiber cloth
- Soap and water
- Steam

Sodium hypochlorite (bleach)



PROS	CONS
CHEAP, widely available	pH 11.5 = severe eye damage
Kills wide variety of microbes, versatile; some products kill Tb and/or NoroVirus	Respiratory irritant; Cl ₂ and HCl are Asthmagens (AOEC)
Leaves no residue	Reacts with organic molecules – environmental hazards
	Corrodes metals and floor polish
	Not stable – loses potency
	Reacts with other chemicals to form toxic gas





\$1.79 (60 oz)

\$2.00 (10.1 oz)

Quaternary ammonium compounds

PROS	CONS	ernary bism Cleaner
Widely available, inexpensive	Found in sewage outfalls	
More stable than bleach	High aquatic toxicity, "persistent*	
Broader efficacy claims than most other products	Asthmagens; concentrates corrosive	
Not as sensitive to organics as bleach	Forms toxic chloramine gas when mixed with bleach	
Surfactant – cleans also	Dev & repro toxicity observed (but not weight of evidence)	
Available in neutral pH formulations	Requires rinsing – leaves residues	

Thymol

PROS	CONS	The second se
Low environmental hazard	Strong smell	
Rapidly breaks down	Skin sensitizer	A A
Long shelf life	Possible repro effects ('weak' studies)	
Not an asthmagen		

Peroxide compounds



PROS	CONS
Low human toxicity	Eye hazard from concentrates - corrosive
Low environmental hazard	Irritating vapors from concentrates
Rapidly decomposes to $O_2 + H_2O$	Animal carcinogen & mutagen?
No residues	
Effective on full range of microbes	
Shorter dwell time than quats, pine oil	
Whitens grout; removes stains	

Active ingredient review

ACTIVE INGREDIENT	CANCER	REPRO TOX	ASTHMA	SKIN SENS	AQUATIC TOX	PERSIST
Caprylic Acid	No	No	No	No	Med acute	Low
Citric Acid	No	No	No	No	None	Low
Hydrogen Peroxide	No ¹	No	No	No	High acute	Low
Lactic Acid	No	No	No	No	None	Low
Ortho-Phenylphenoll	Known	Suspected	No	No	Very high acute	Low
Peroxyacetic Acid	No	No	Yes	No	Very high acute	Low
Pine Oil	No ²	No	No ³	Yes	None	Low
Quats	No	Suspected	Yes	One compound ⁴	High acute, med chronic	Very High
Silver	No	No	No	No	High acute	Very High
Chlorine Bleach	No	No	Yes	No	Very high acute	Low
Thymol	No	No ⁵	No	Yes	High acute	Low

Recommendations-ingredients

- Hydrogen peroxide
- Citric acid
- Lactic acid
- Caprylic acid
- (Silver/citric acid)

Sample product review



Recommendations-disinfectants

(for complete list, see report)

Hydrogen Peroxide

- Accel (Concentrate: 1:128, 3-minute dwell time)
- Alpha HP (Concentrate, 1:128 dilution, 3-minute dwell time)
- Alpha-HP Multi-Surface Disinfectant Cleaner (Concentrate, 1:128 dilution, 3-minute dwell time)
- Carpe Diem Concentrate Five 16 (Concentrate: 1:128, 3-minute dwell time)
- Envirox Concentrate 118/H2Orange2 117* (Concentrate, 5-minute dwell time)
- Envirox H2Orange2 Superconcentrate 112 (Concentrate: 5:23 dilution, 5-minute dwell time)
- **G-Force H2O2 Bathroom Cleaner Disinfectant** (Concentrate, 1:128 dilution, 3-minute dwell time)
- Oxivir Five 16 (Concentrate, 1:128 dilution, 3-minute dwell time)
- Ramsey Bathroom Cleaner Disinfectant (Concentrate, 1:128 dilution, 3-minute dwell time).

Recommendations-disinfectants

(for complete list, see report)

Citric Acid

• **Comet Disinfecting Bathroom Cleaner** (Concentrate, 1:4 dilution, 5minute dwell time)

Caprylic/Octanoic Acid

• Ecolab 65 Disinfecting Heavy-Duty Acid Bathroom Cleaner (Concentrate, 1:40 dilution, 5-minute dwell time)



Recommendations-specialized

Bloodborne pathogens HIV + HBV

RTU

- 30 sec: Clorox Healthcare Peroxide Cleaner (1.4% H₂0₂)
- 1 min: Oxivir Tb (0.5% AHP)
- 1 min: Pure Hard Surface (Silver + Citric Acid)

Concentrate

5 min: Oxivir Five 16 (4.25% AHP; 1:16)





Recommendations-specialized

- Locker Rooms (Athletes Foot Fungus)
 RTU
 - 5 min: H2Orange 120 One (1% H202)
 - 3 min: Clorox Healthcare Peroxide Cleaner (1.4% H₂0₂)
 - 10 min: Oxivir Tb (0.5% AHP)
 - 10 min: Clean-Cide (0.6% Citric acid)
 - 10 min: Quantum Tb (0.138% Caprylic acid)
 - 5 min: Limited: Pure Hard Surface (Silver + CitAcid)

Concentrate

5 min: Oxivir Five 16 (4.25% AHP; 1:16) 5 min.



Recommendations-specialized

Norovirus

RTU

- 1 min: Oxivir Tb (0.5% AHP)
- 1 min: Clorox Healthcare Peroxide Cleaner (1.4% H₂0₂)
- 5 min: Clean-Cide (0.6% Citric acid)
- 1 min: Pure Hard Surface (Silver + Citric Acid) 24-hr residual efficacy

Concentrate

5 min: Oxivir Five 16 (4.25% AHP @1:16)



Electrolyzed water devices



Microfiber (an important part of an effective disinfection program)



Bacteria culture taken after a traditional wet mop cleaning - only a 30% reduction from precleaning.

CLEAN, GREEN, EFFICIENT

Can be launchered hendrads of times
 Spreads peoduat smoothly and evenly onle surfaces.

Color-coding options available Lint-tree Nos-abrasive

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Hypo-allerganic Holds 6-7 times its weight in liquid Neves easily across
 Floors dry quistor

deaning procedures, training and expertise

BEEN PARTNER SUPPORT" (CPS



Bacteria culture taken after microber mop cleaning --a 99% reduction!













Regulatory challenges

- Meaningful registration of devices
- Full ingredient disclosure
- Verifying manufacturers' claims
- Confusion over market claims vs. label claims





Safer Products and Practices for Disinfecting and Sanitizing Surfaces



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http://www.sfapproved.org/

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