

2017 Winter Conference

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Seminar 1

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40 is the new 20, balanced air-hydration for health!

Updating Scientific Evidence about the Effects of Low Humidity on People

Learning Objectives

- Understand the effects of humidity on health, comfort and IAQ
- Understand the relationship between low indoor relative humidity and increased healthcare-associated infections in the hospital setting
- Understand the human physiological reactions to low humidity
- Understand the effects of low humidity on human performance

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Outline

1

Overlap between engineering and medicine

2

A new study to test the impact of the building on occupant health

3

Dry building syndrome

4

Conclusions and best practices

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Conclusions and best practices

Engineers and physicians have much in common

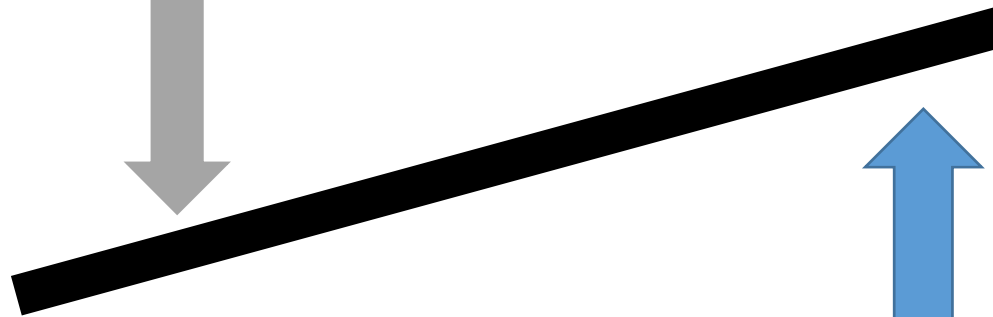
- Many years of school!!!
- Technical vocabulary that excludes outsiders
- Budgets control our jobs
- We both promote human health

*“ASHRAE is a global society **advancing human well-being** through sustainable technology for the built environment”*

How does the building impact occupant health?

Hospitals are a perfect setting to study this

Patients are vulnerable



Pathogens are virulent

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Our study to test the impact of the building on occupant health

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Dry building syndrome

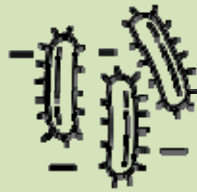
4

Conclusions and best practices

Room conditions and patient outcomes



Monitor indoor
conditions in 10
patient rooms



Map bacterial
communities in
these spaces

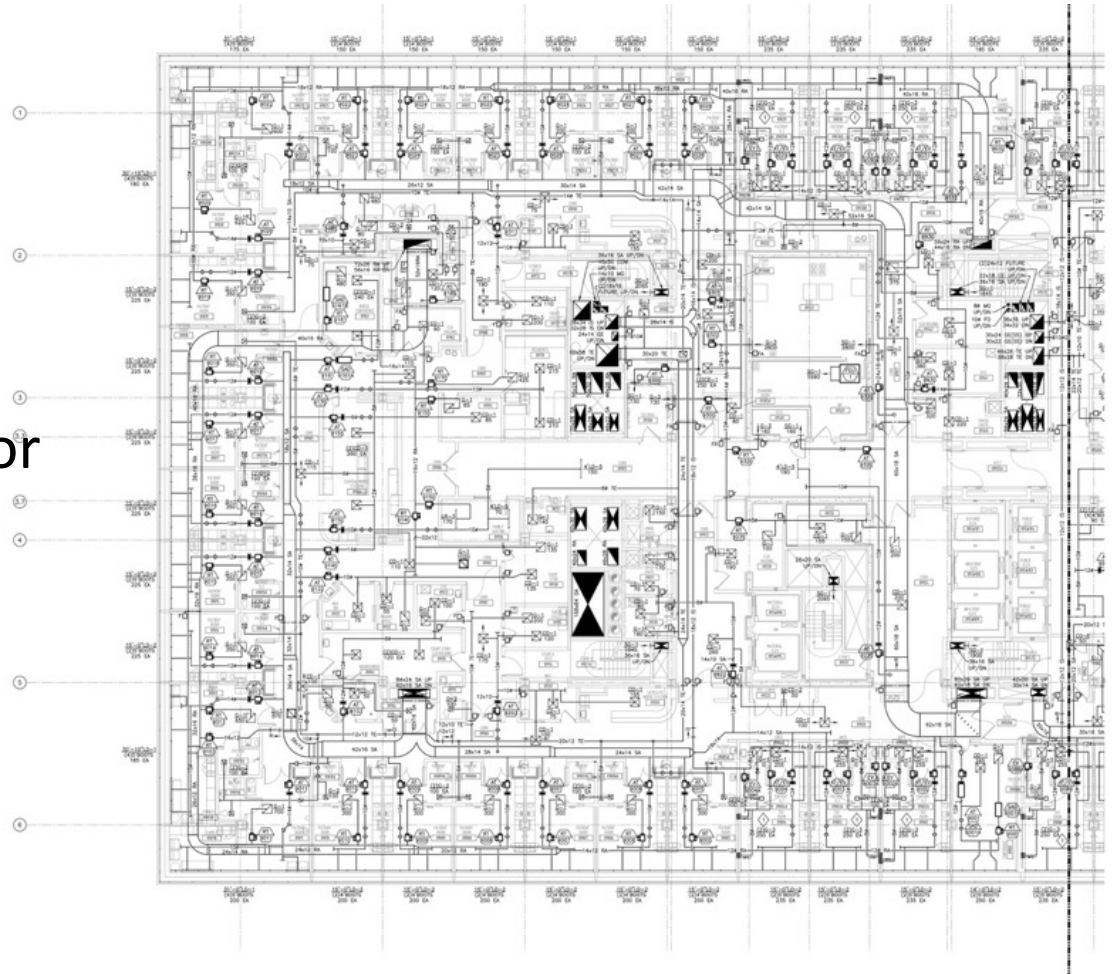


Track patient
infections acquired
while in the hospital

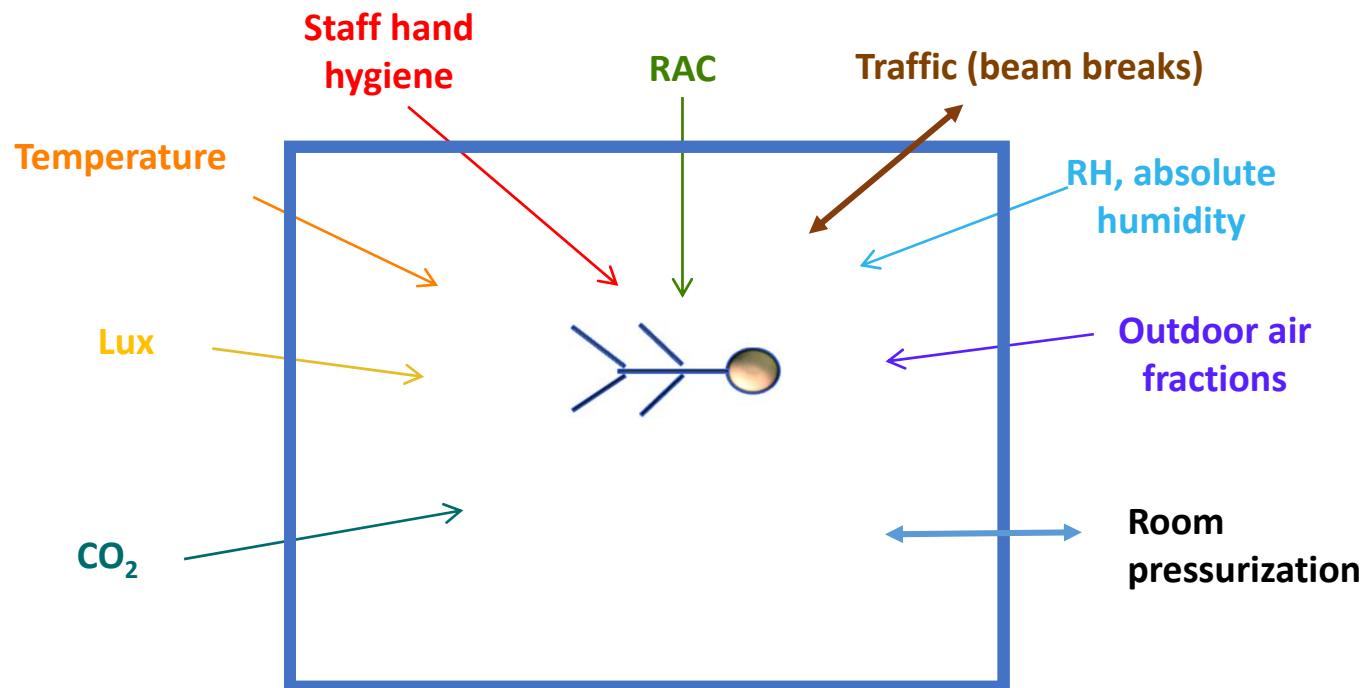
a 12 month study

The hospital building

- Built 2013, LEED Silver
- 1.2 million sq. feet (111,484 sq. meters)
- 100,000 sq. feet per floor (9,290 sq. meters)
- 240 single-occupancy inpatient rooms
- Green roof



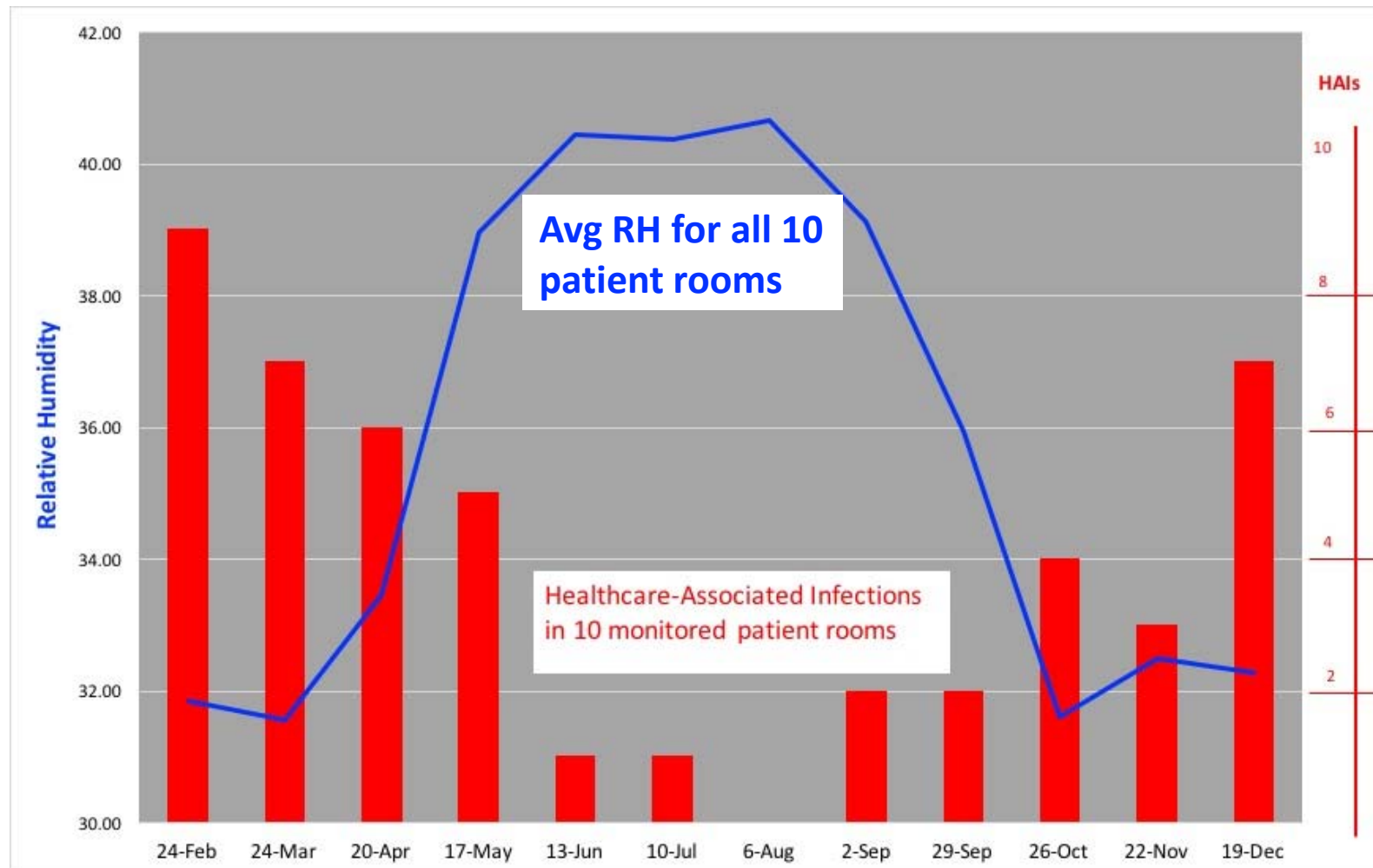
Data collected from the patient room



Examples of new patient infections

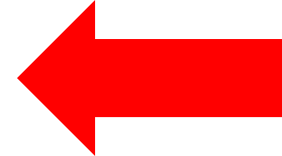
Patient	Room	Clinical symptoms	HAI Organisms (if indicated)
xx	xx	pneumonia, viremia	Pseudomonas, Epstein-Barr virus (EBV)
xx	xx	pneumonia	Staphylococcus aureus
xx	xx	open wound of head, neck, and trunk	
xx	xx	bacteremia, organism unspecified	Citrobacter infection
xx	xx	infection due to vascular device	
xx	xx	cellulitis	Staphylococcus aureus
xx	xx	sepsis, cellulitis, abscess	
xx	xx	bacteremia, organism unspecified	
xx	xx	pneumonia, organism unspecified	
xx	xx	fever; bacteremia, organism unspecified	
xx	xx	viremia	Cytomegalovirus (CMV)
xx	xx	wound infection after surgery	
xx	xx	urosepsis, organism unspecified	
xx	xx	sepsis following cardiac surgery	
xx	xx	pneumonia, organism unspecified	
xx	xx	infection of skin and subcutaneous tissue	
xx	xx	colitis and diarrhea	Clostridium difficile
xx	xx	wound infection after surgery	
xx	xx	urosepsis, organism unspecified	
xx	xx	diarrhea	salmonella enteritis

As indoor RH went down, the patient infection rate went up



SPSS analysis of relationships between indoor conditions and infections

Coefficients ^a			
Model	Standardized Coefficients	t	Sig.
	Beta		
1 (Constant)		-2.348	.023
Avg RH	-9.060	-2.396	.020



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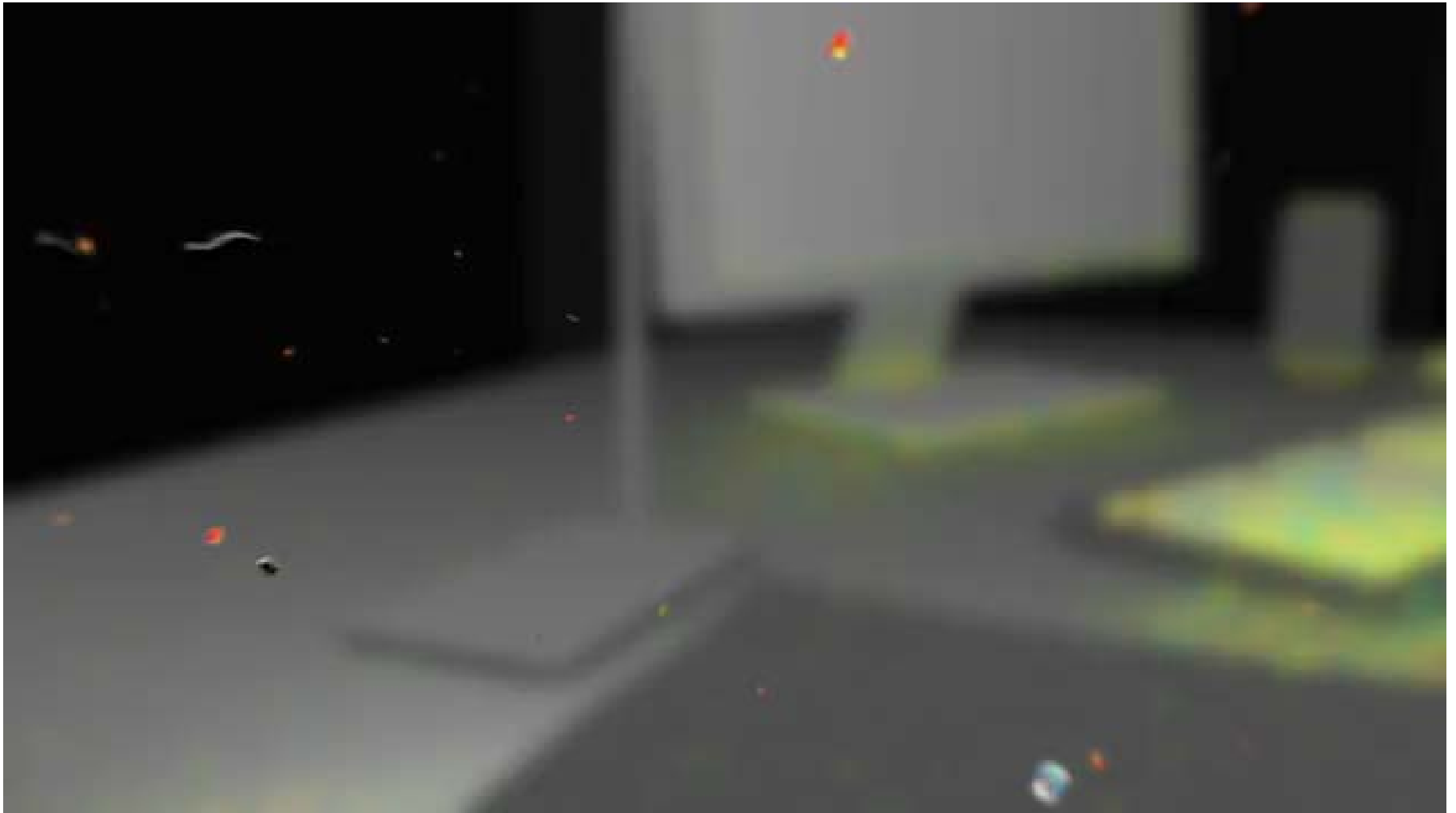
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Dry building syndrome

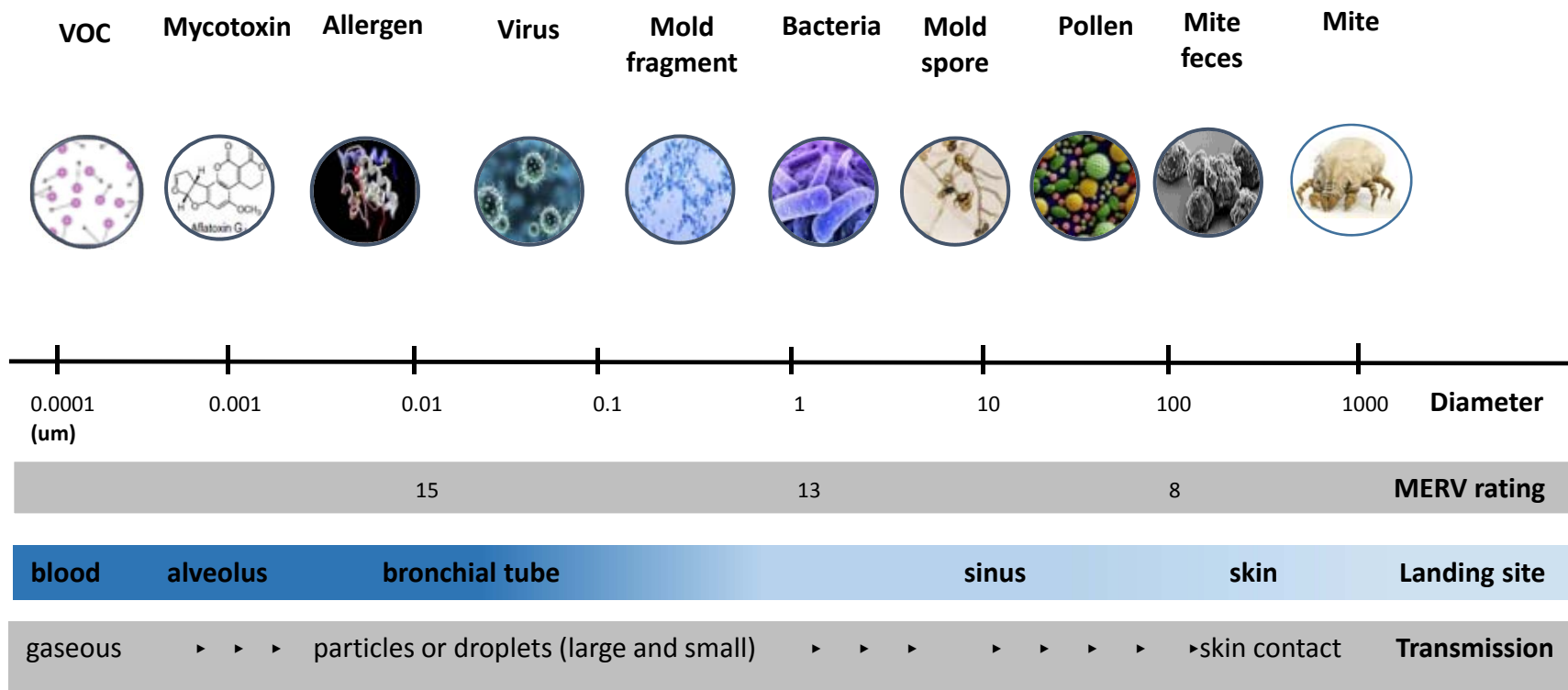
4

Conclusions and best practices

The invisible world



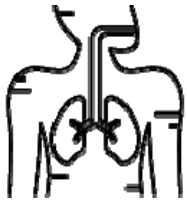
Things in the air that affect our health



Low RH is harmful- Dry Building Syndrome

In air with 20% RH, an inactive 50 kg person loses 1 - 2% body weight in 8 hrs, becoming clinically dehydrated before thirst begins

This mild dehydration results in:



Impaired immunity,
increased infections

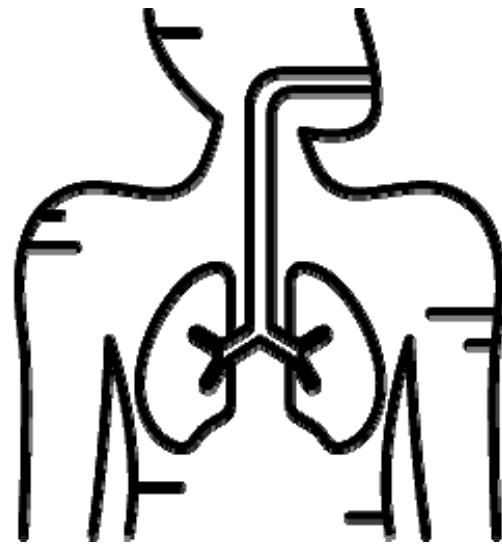


Breached skin
barrier & delayed
wound healing



Diminished brain
function &
performance

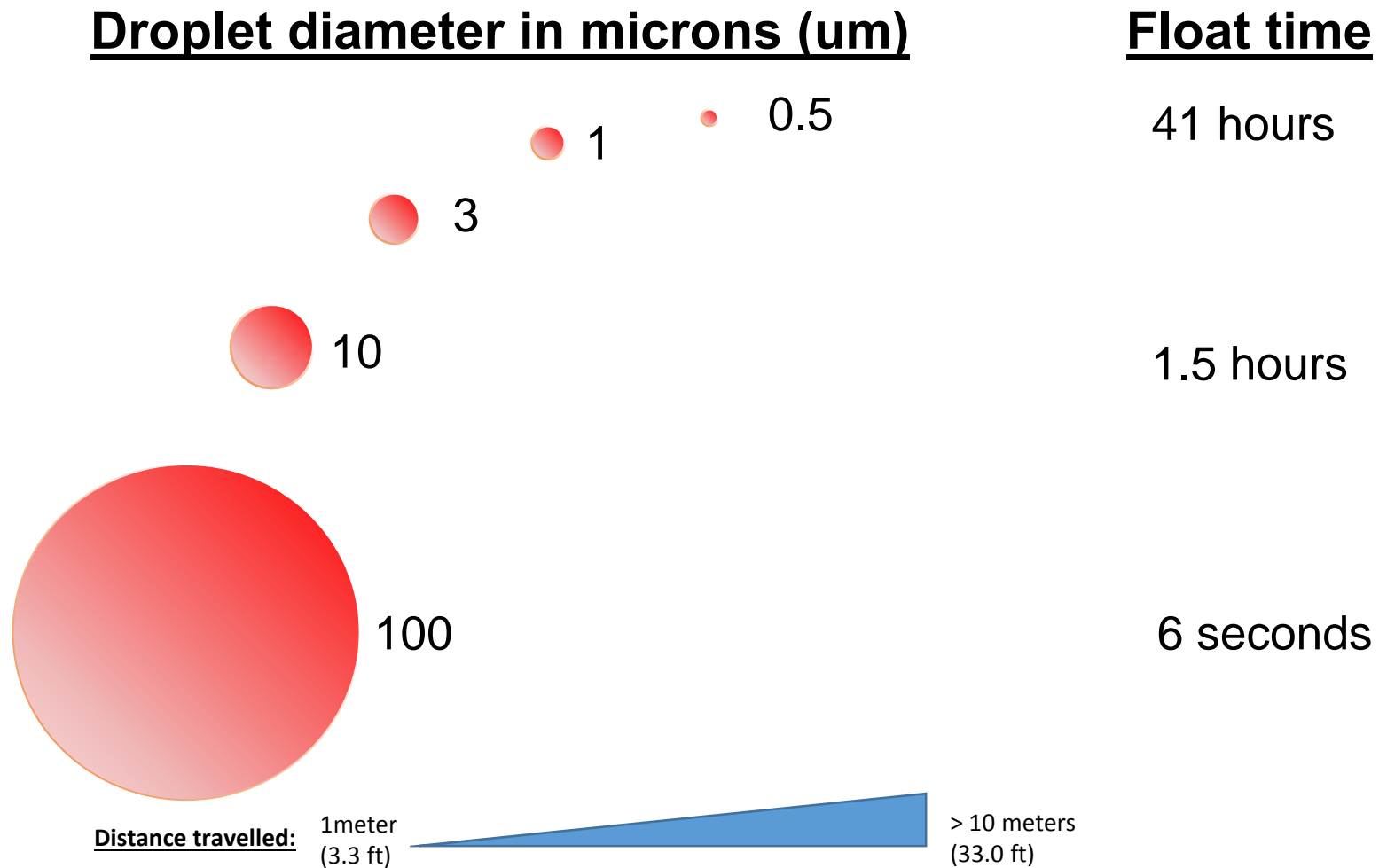
Dry Building Syndrome increases infections



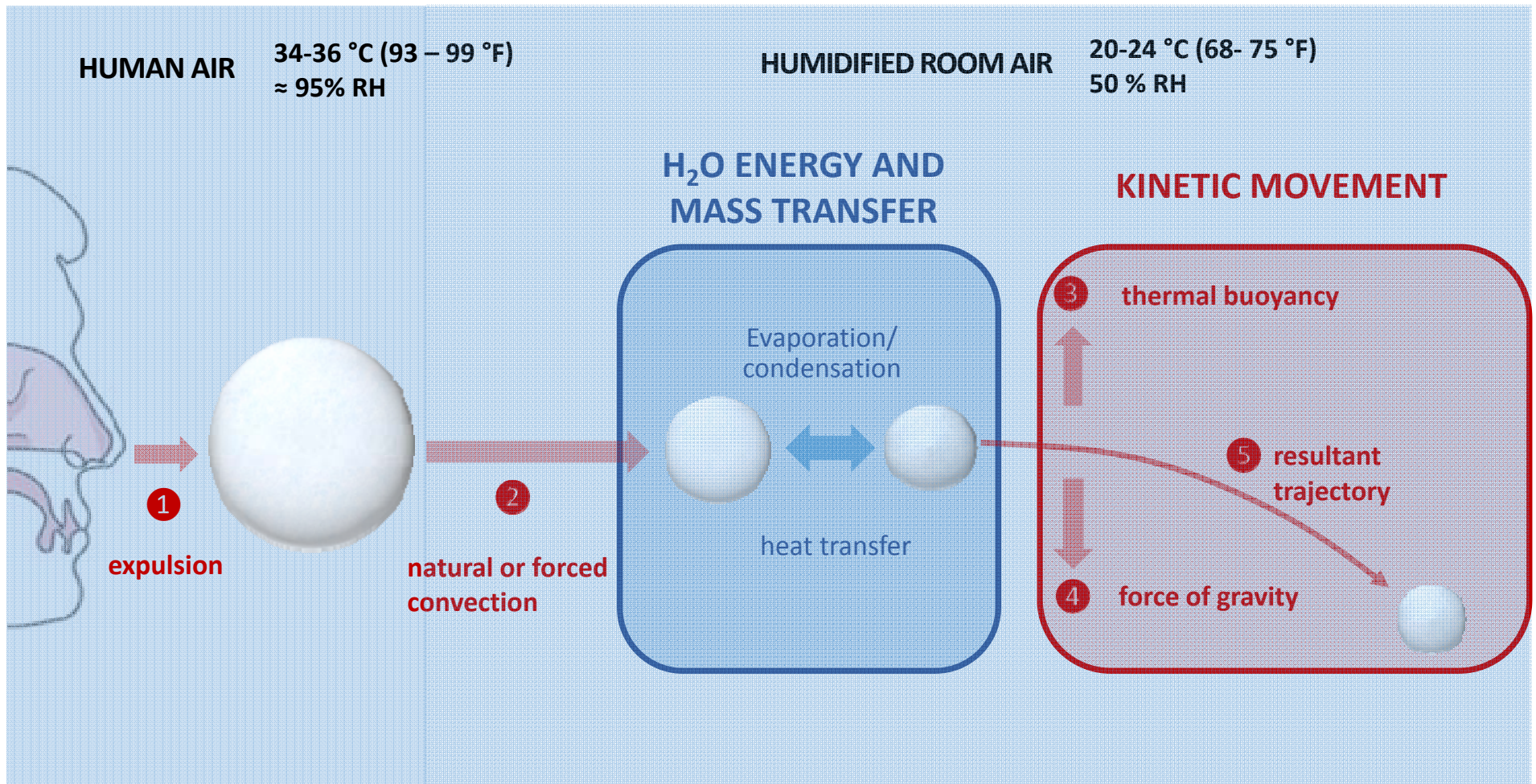
Will this cough infect others?



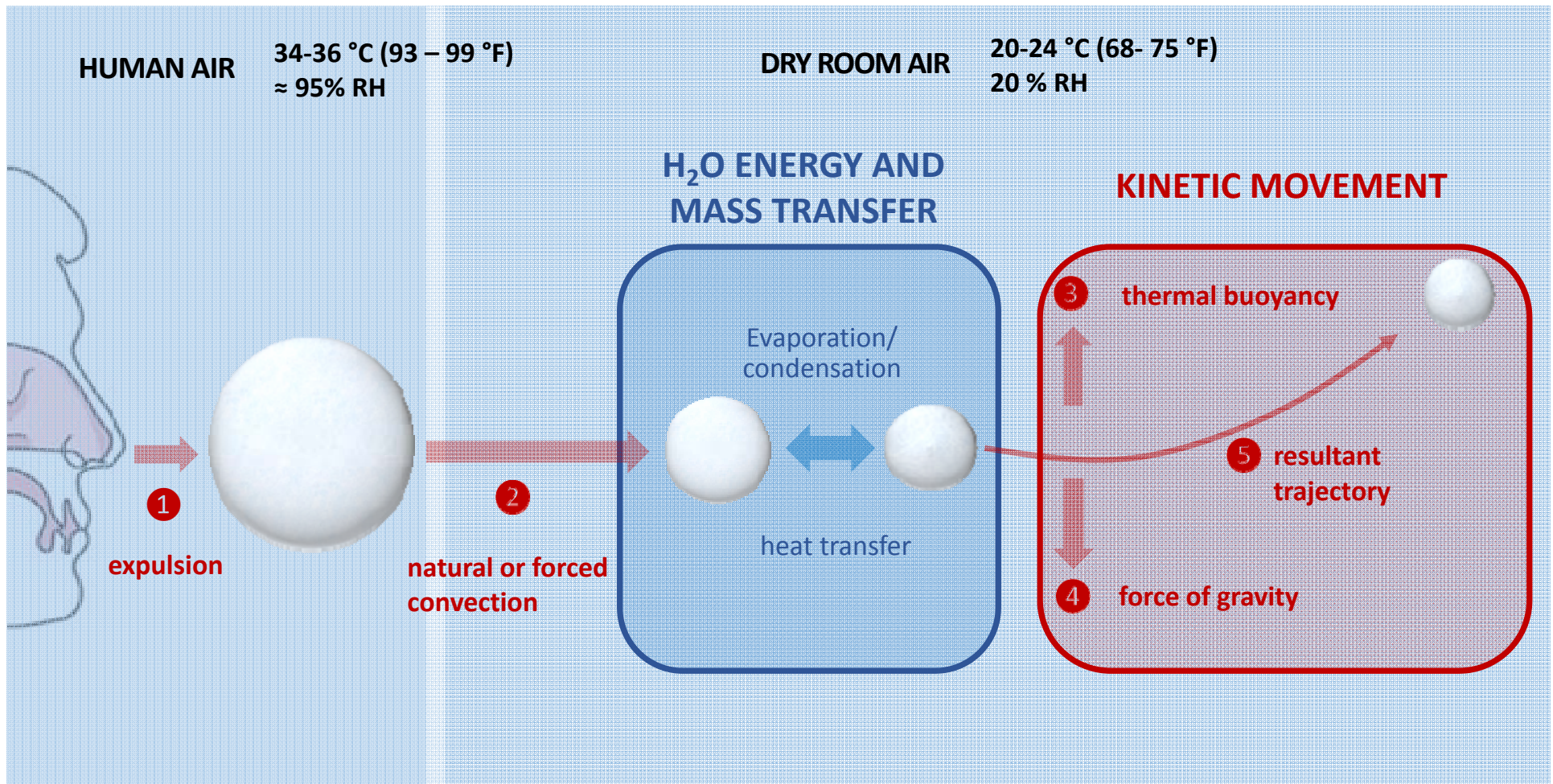
Low indoor RH shrinks aerosolized droplets, promoting greater pathogen spread



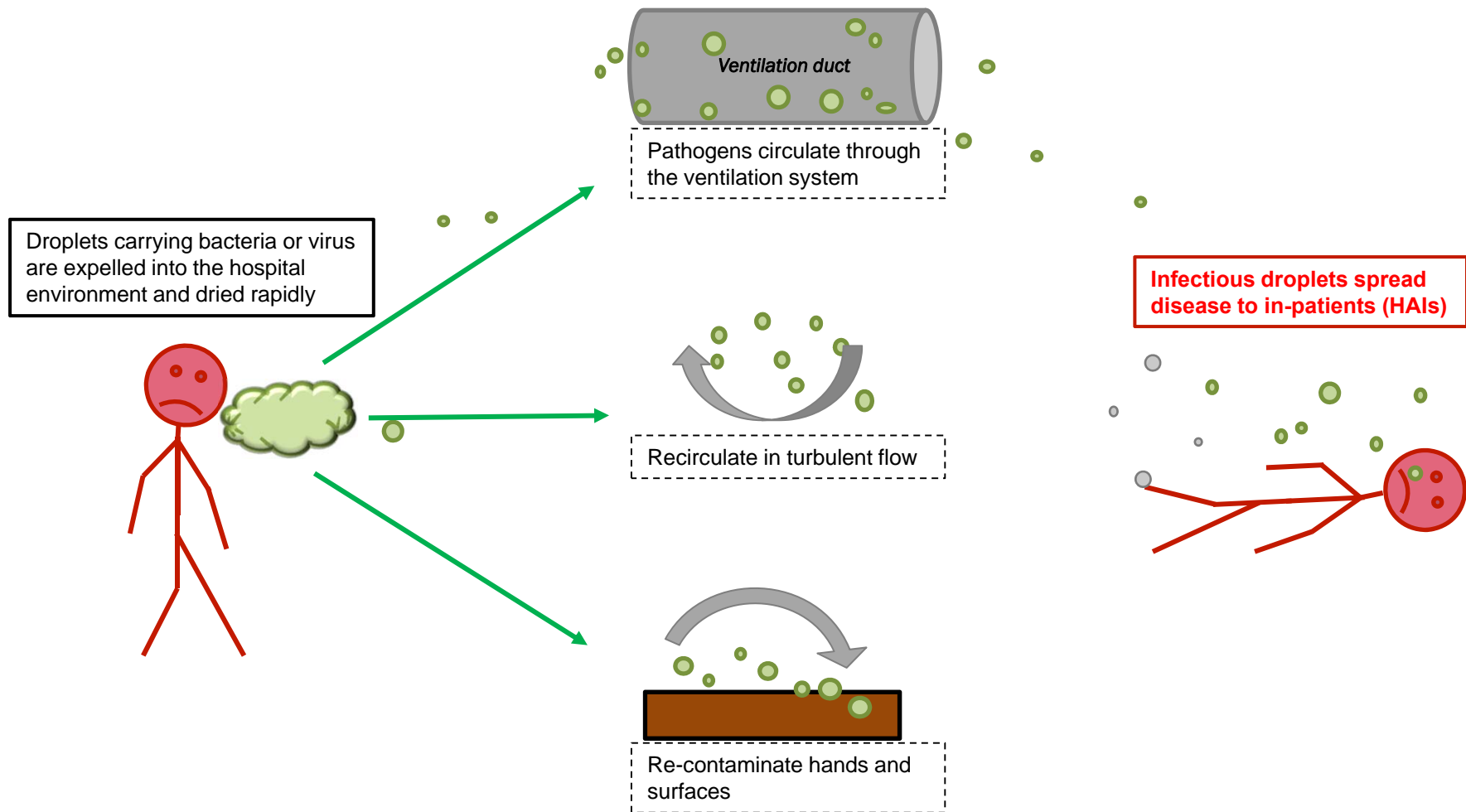
Thermodynamic and kinetic changes in infectious droplets



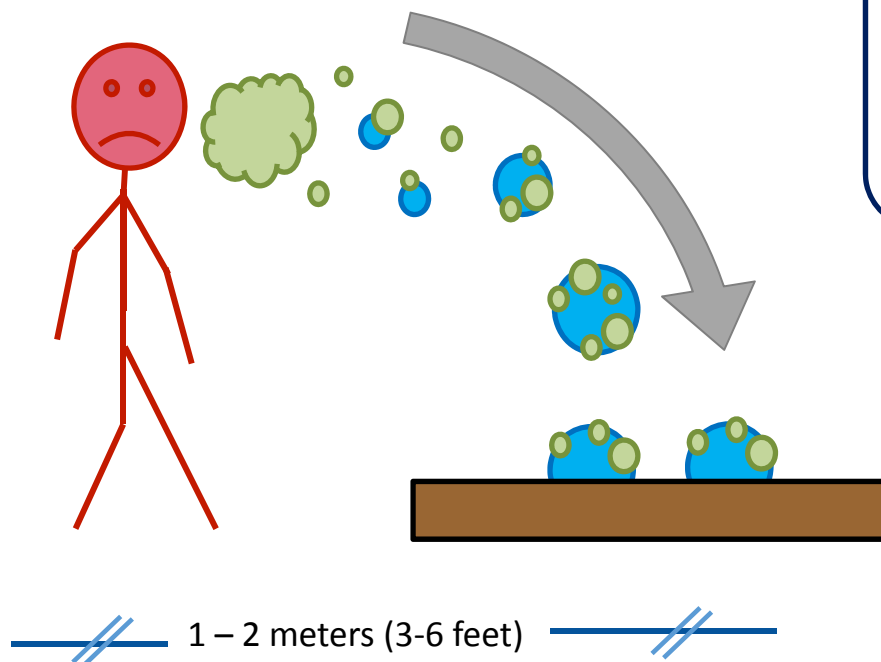
Thermodynamic and kinetic changes in infectious droplets



Indoor air with $RH < 40\%$ promotes pathogen transmission in tiny aerosolized droplets



With RH of 40%–60%, infectious droplets settle out of the air within a short distance of the source

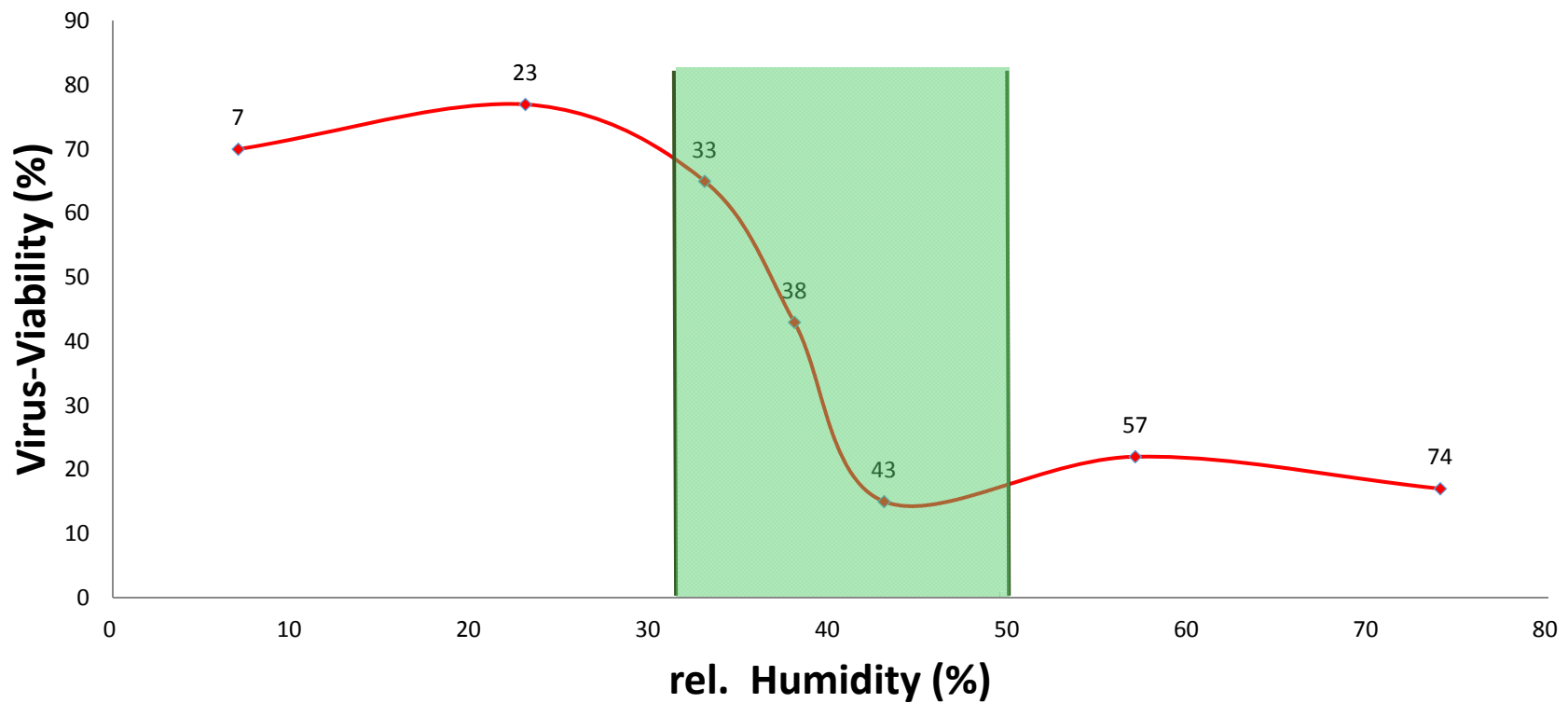


- Bedrails and other frequently touched surfaces are more effectively cleaned
- Hand hygiene is maintained
- Settled infectious droplets are not re-suspended



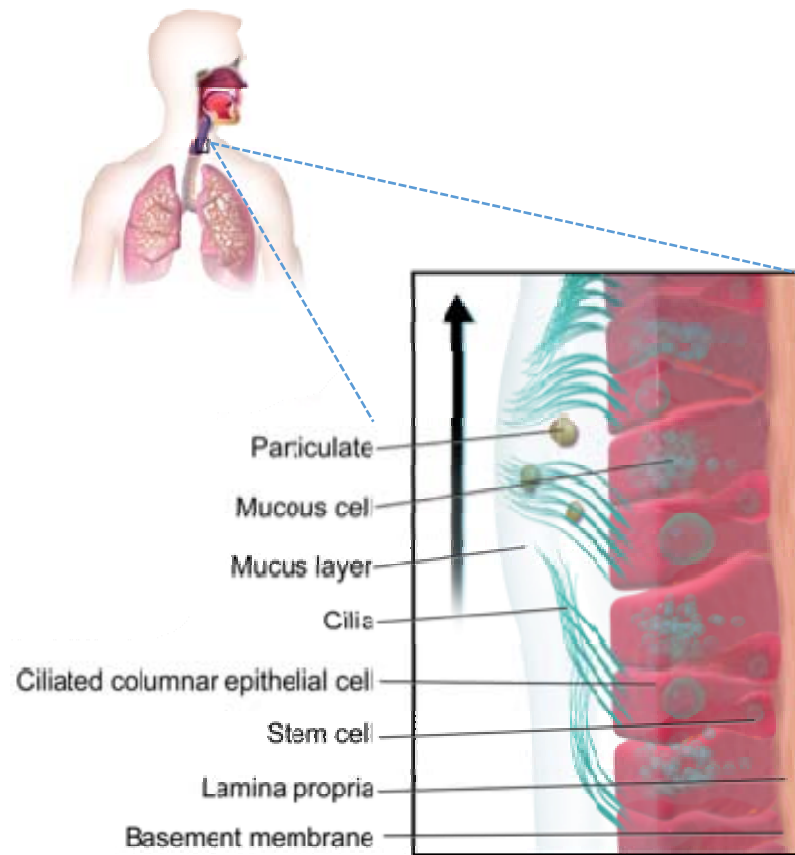
Viability of many pathogens is reduced in air with RH 40%–60%

Humidity above 40% inactivates $\approx 80\%$ of Influenza Viruses within 15 minutes



High Humidity Leads to Loss of Infectious Virus from Simulated Coughs. U. Illinois, 2013
J Noti, et al.

Appropriate humidity supports cell hydration needed for respiratory defense mechanisms



Key functions of respiratory cells:

- Cilia wash particles away from delicate lung tissue
- Mucus layer allows healthy immune modulation to reduce allergic reactions
- Mucous from goblet cells trap pathogens

Dry inhaled air causes:

- Increased susceptibility to infections
- Increased wheezing from allergic disease

Children and seniors are especially vulnerable to the ill-health effects of low RH

Children



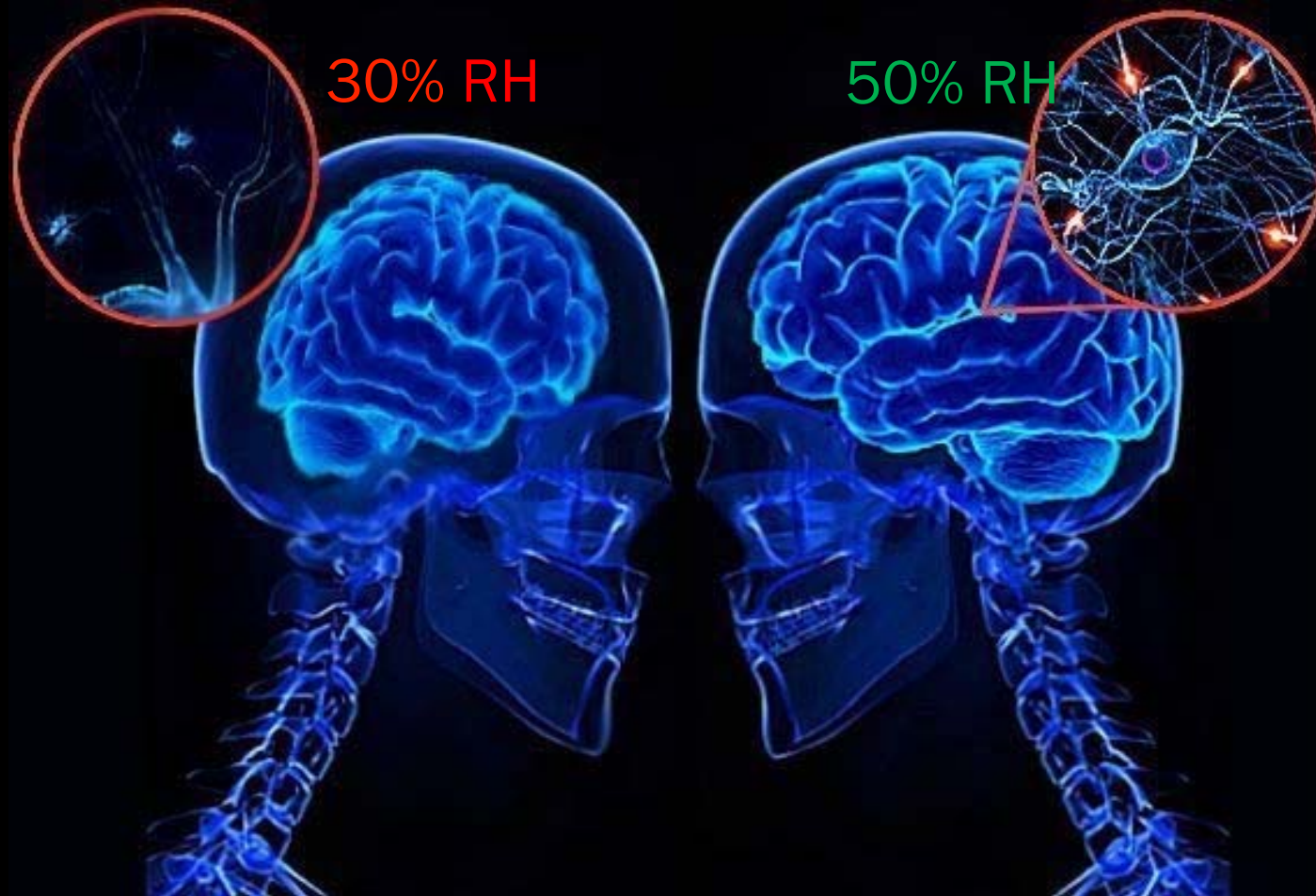
- Delicate fluid balance
- Higher water loss through skin
- No self-control over fluid input
- No control of clothing

Seniors



- Sense of thirst is reduced and thus unreliable in preventing dehydration
- Bedridden people have little autonomy
- Seniors often limit drinking in order to reduce toilet visits
- Non-active people often forget to drink

Dry Building Syndrome affects our brain



Dry Building Syndrome harms our skin



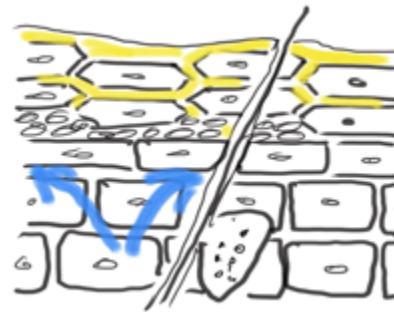
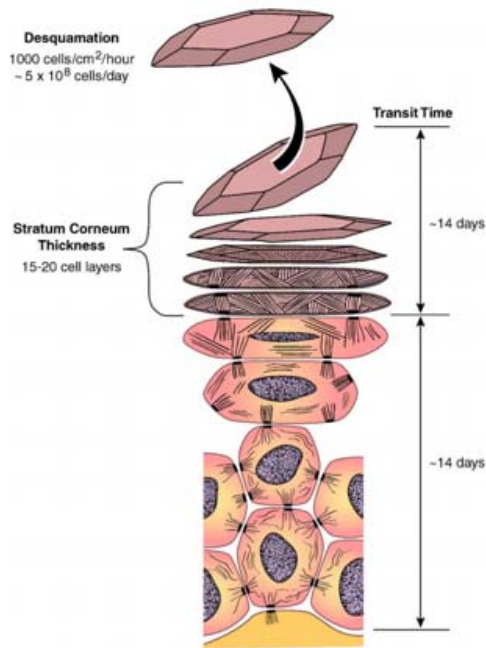
Skin functions are impaired:

- wound healing
- immune system training
- protection from injury
- protection from infections
- preserving internal water

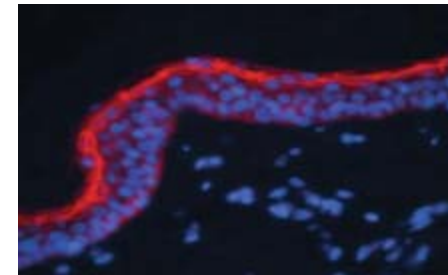


Dry Building Syndrome harms our skin

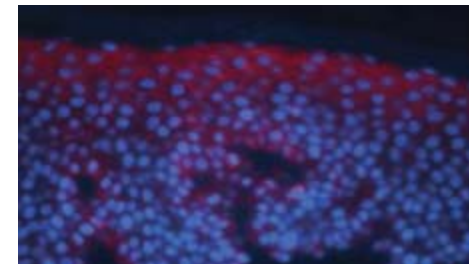
Dry air harms skin



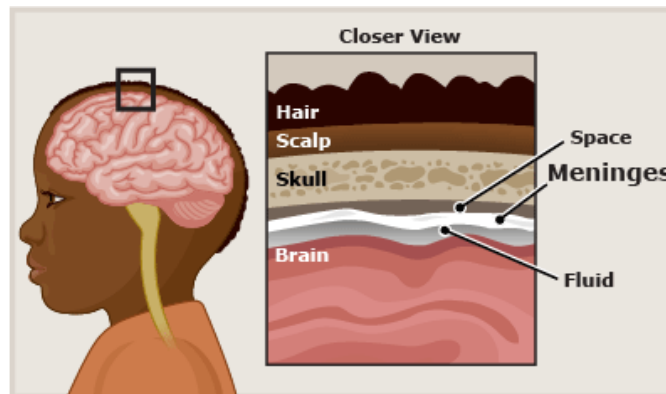
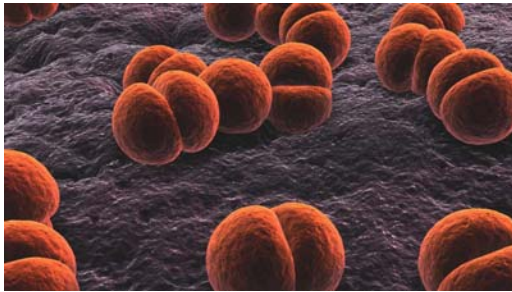
well hydrated



dehydrated

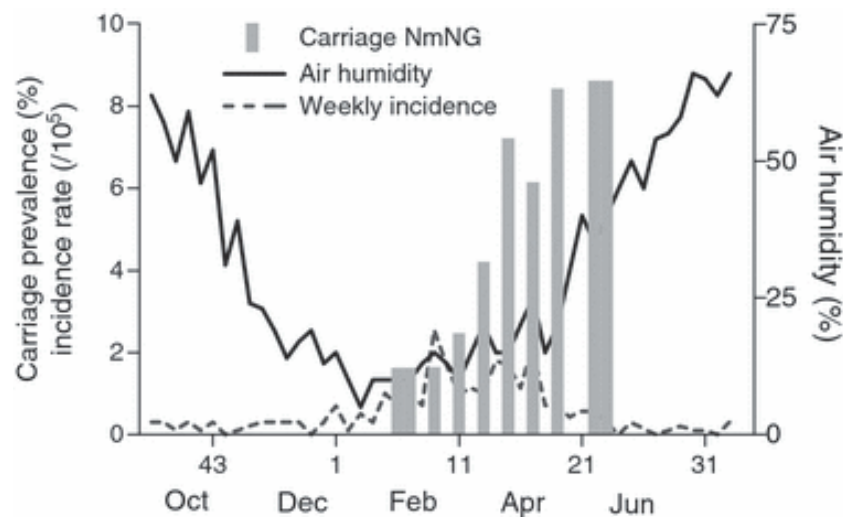


Dry weather reliably predicts meningitis outbreaks



Dry weather reliably predicts meningitis outbreaks

- Bacteria spread when the outdoor humidity is low
- Once the humidity exceeds 40%, the epidemic ends



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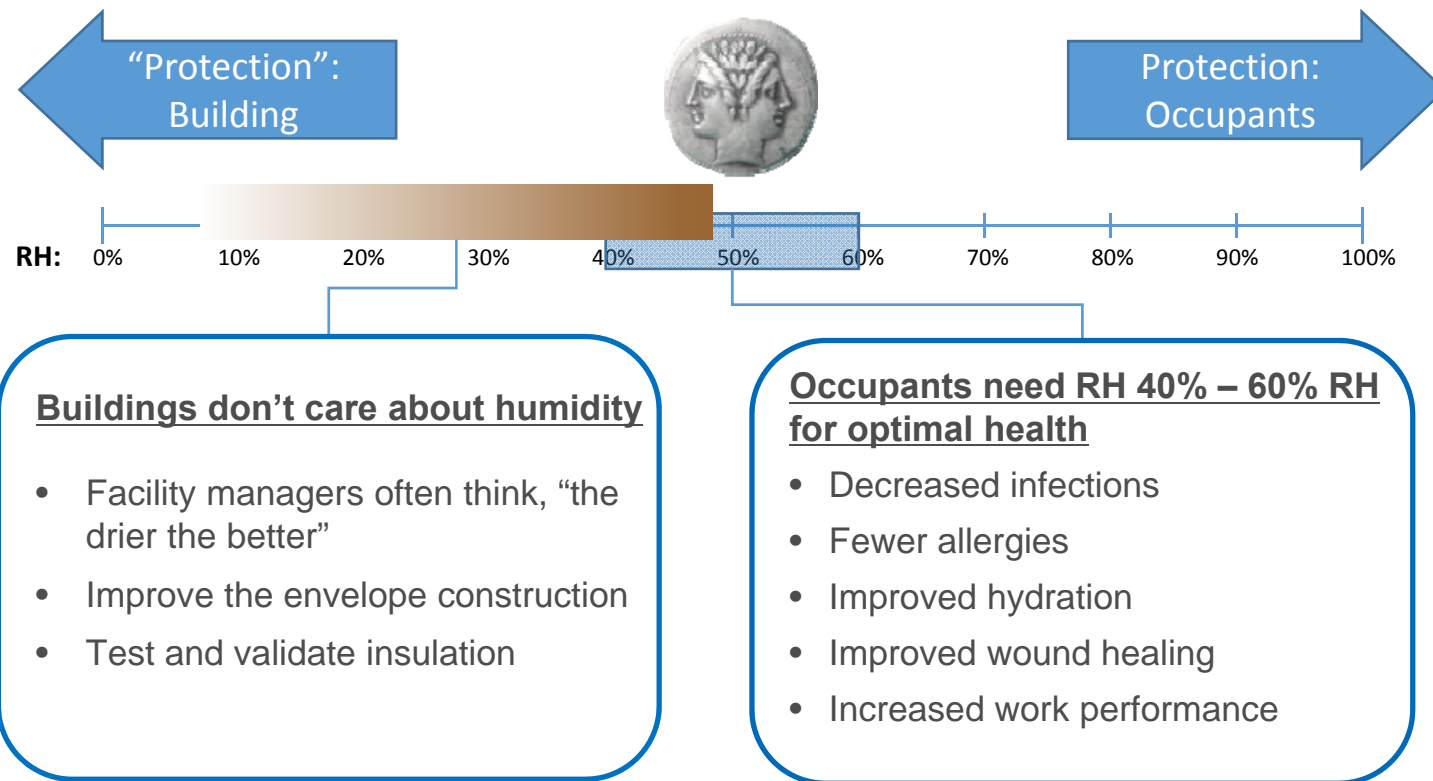
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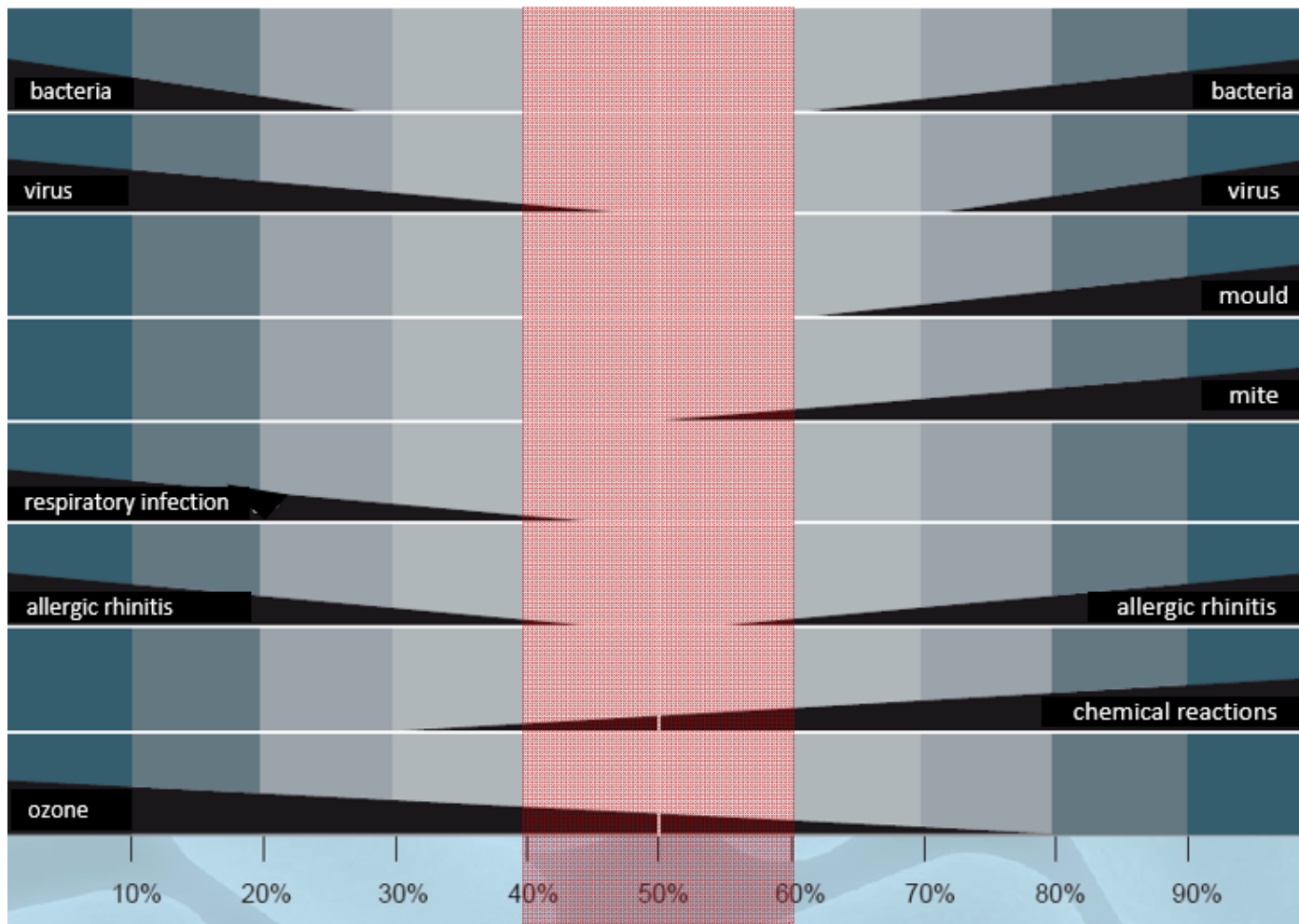
4

Conclusions and best practices

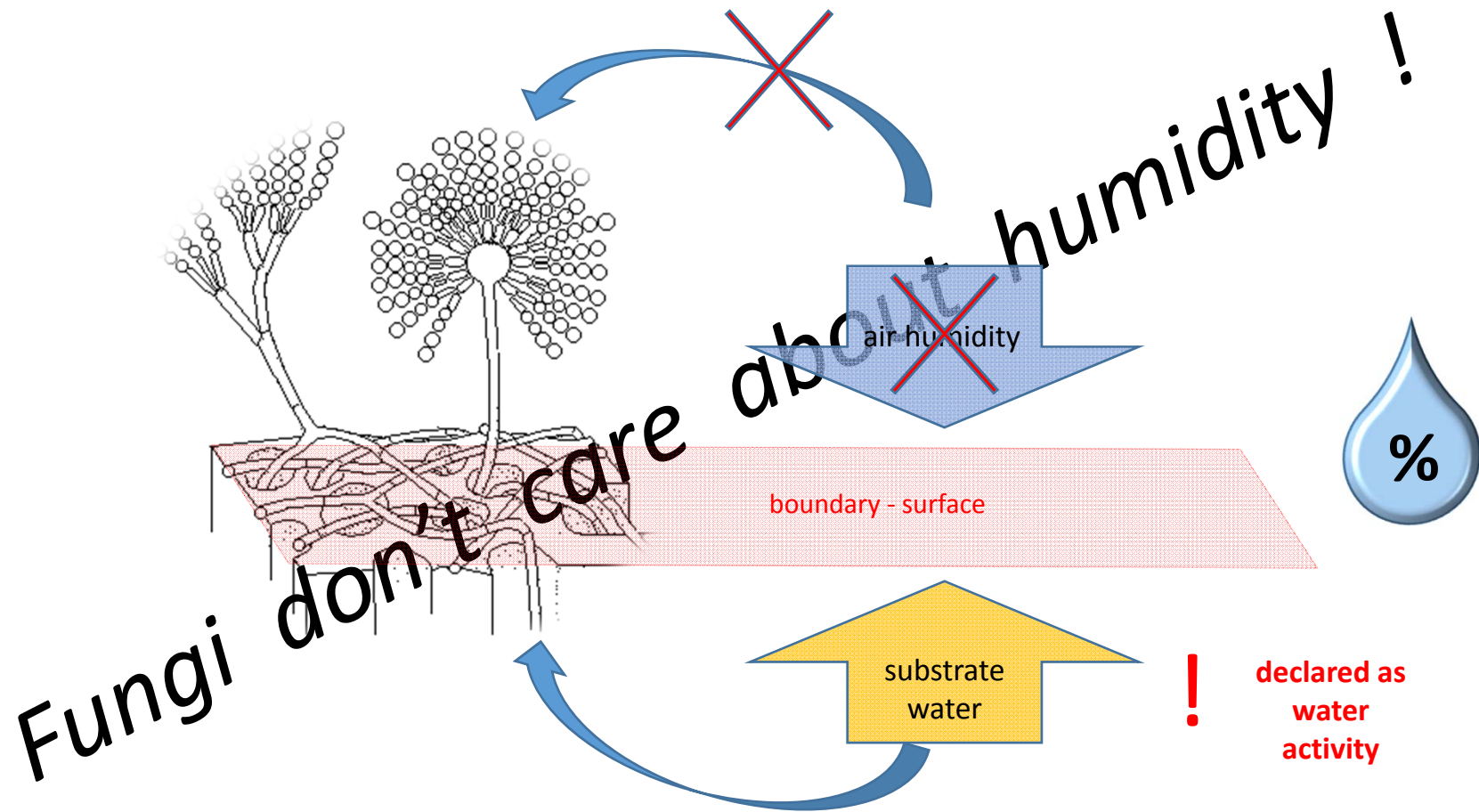
The optimum indoor air RH: 40 is the new 20!



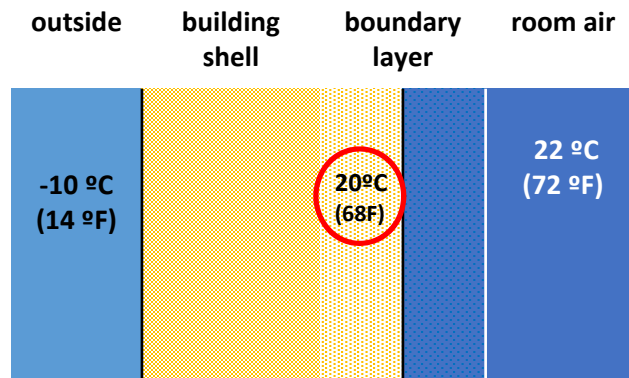
We need to maintain maximum AND minimum RH!



They care about water activity !

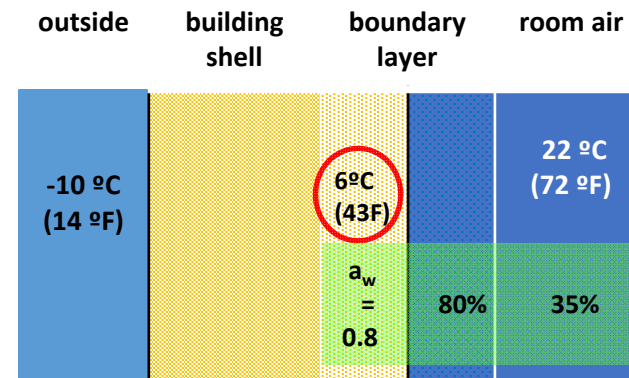


good insulation properties



R-value = $2.0 \text{ W/m}^2\text{K}$

bad insulation properties



R-value = $0.25 \text{ W/m}^2\text{K}$

identical outside and inside air temperatures, the different results in the inner surface temperature of the wall

Condensation on the wall starts with a rel. humidity of **> 95 percent**

Condensation on the wall starts with a rel. humidity of **35 percent**. With **6°C (43°F)** the surface temperature of the wall reaches dew point temperature

Conclusions:

- New data correlates low indoor RH with occupant illness and decreased productivity
- Building codes should enforce both minimum and maximum indoor RH levels

Bibliography

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- E.M. Sterling, A. Arundel, T.D. Sterling. 1985. Criteria for Human Exposure to Humidity in Occupied Buildings. ASHRAE Transactions. Vol. 91. Part 1.

QUESTIONS?

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