

Characterization and Quantification of Microbial Risks: Rainwater/stormwater

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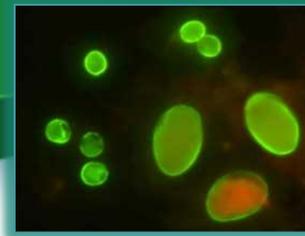
Technologies & Innovative Solutions for Harvesting and
Non-Potable Use of Rain & Stormwater in Urban Settings
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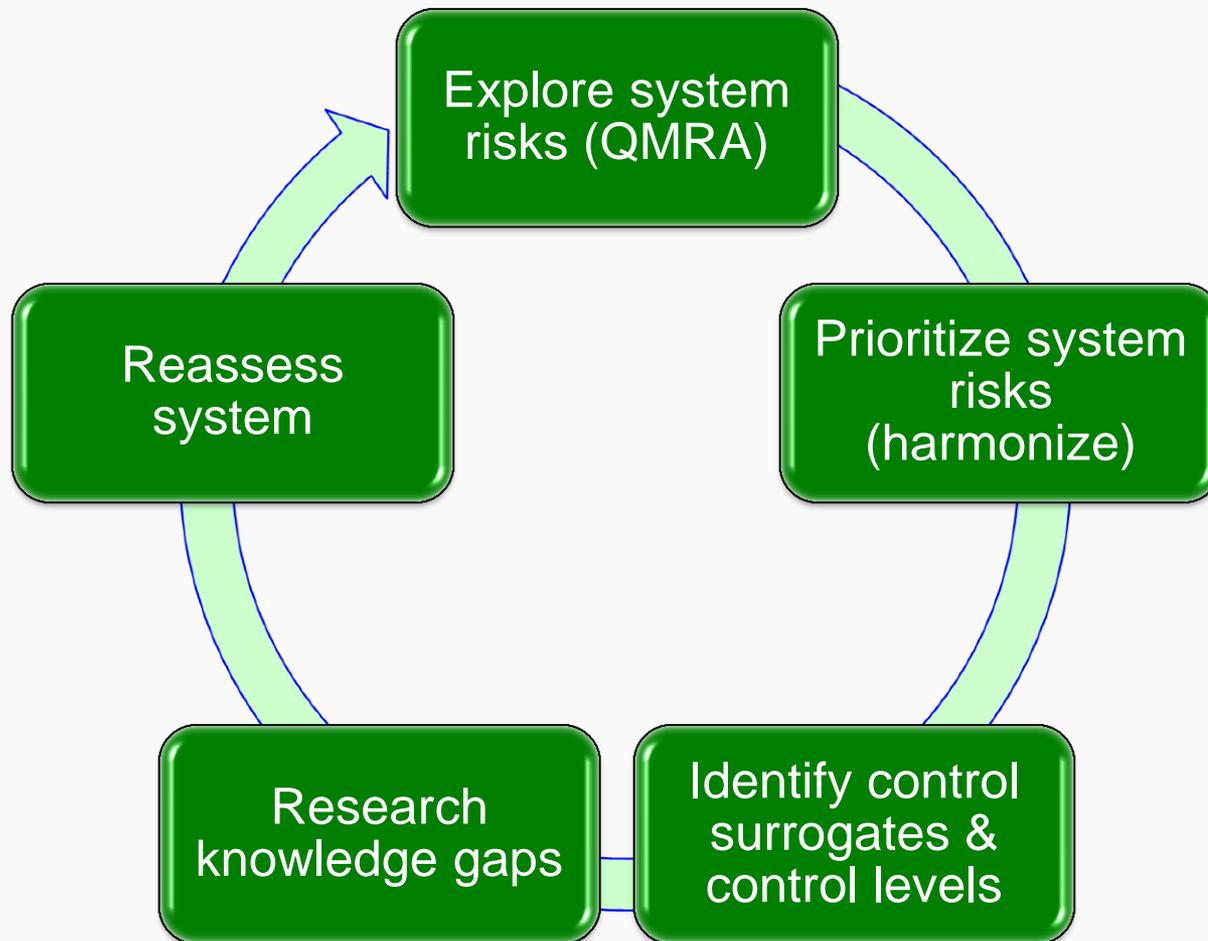
Problems with water monitoring

- Tests results received after water used
- Too many parameters for frequent testing & the only microbial indicator included is *E. coli*
 - But *E. coli* is a poor indicator for viral and protozoan pathogen removal/inactivation & does not indicated presence of environmental pathogens (e.g. *Legionella*)
- For many hazards there is no suitable test

Therefore use a risk management approach



QMRA – Analytic Framework

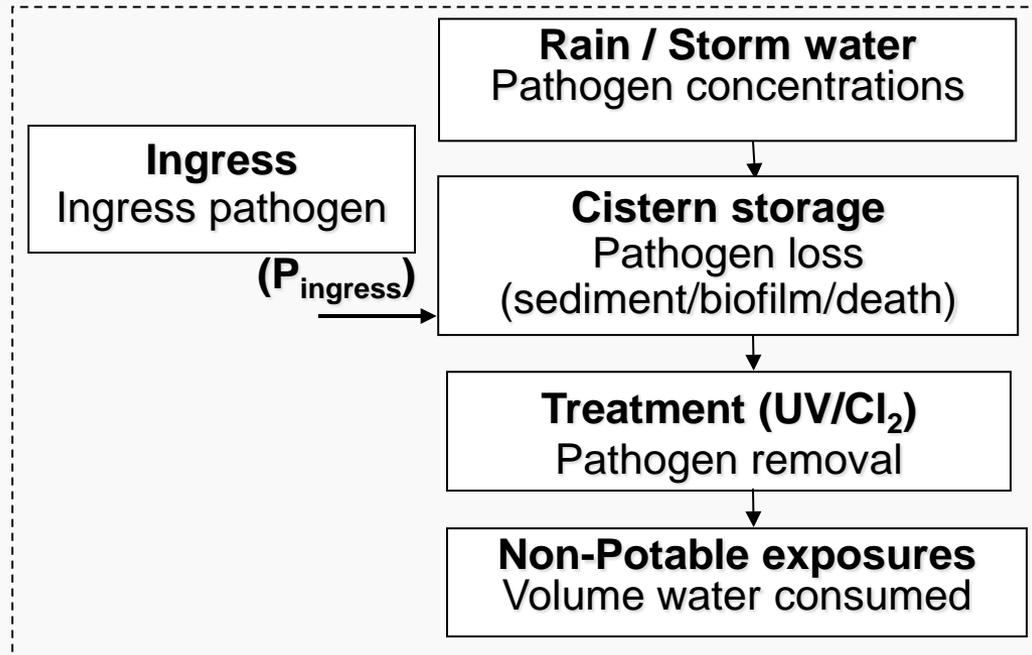


Quantitative microbial risk assessment (QMRA)

STEP 1
SETTING

Problem formulation & Hazard identification
Describe physical system, selection of **reference pathogens** and **identification of hazardous events**

STEP 2
EXPOSURE



STEP 3
HEALTH EFFECTS

Dose-Response (P_{inf})
Selection of appropriate models for each pathogen and the population exposed

STEP 4
RISK

Risk Characterisation
Simulations for each pathogen baseline and event infection risks with variability & uncertainty identified

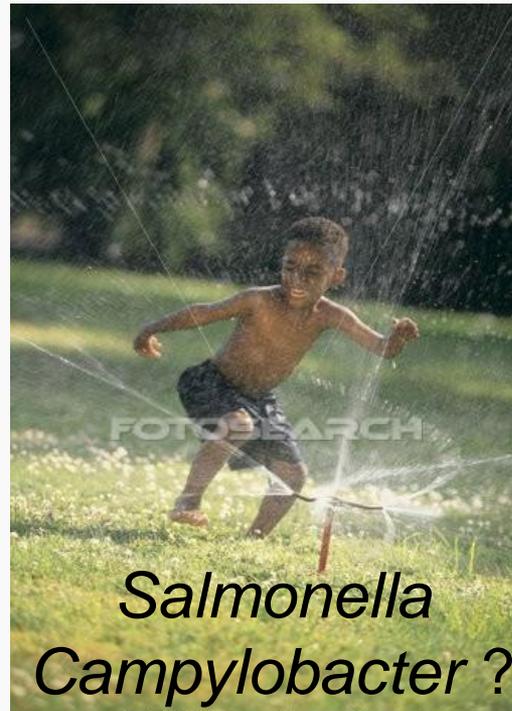
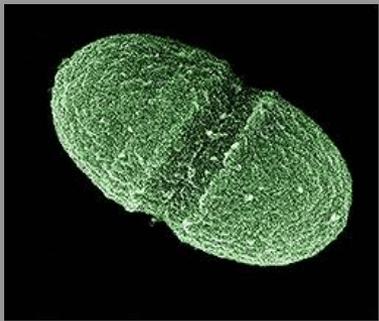
STEP 1 SETTING

Hazard identification & characterization
Describe physical system, selection of reference pathogens and identification of hazardous events



Grounding from epi studies

Indicator? ← Exposure ← Outcome



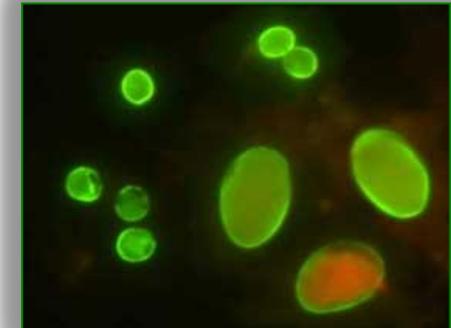
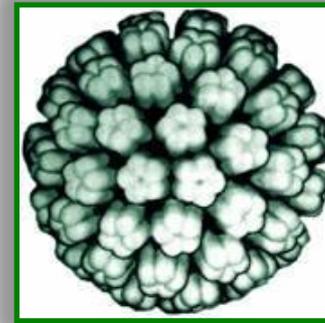
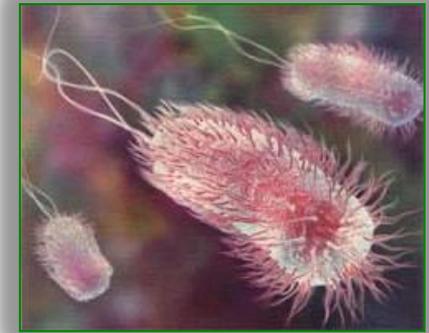
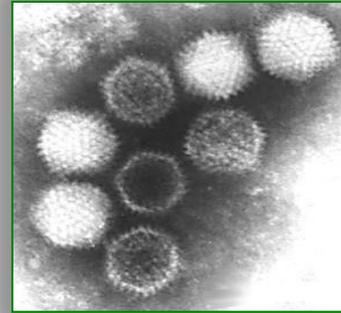
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Dean & Hunter (2012) *Env Sci Technol* 46(5), 2501-2507 } No
Rodrigo *et al.* (2011) *Amer J Pub Health* 101(5), 842-847 }



Epi provides disease data – Limited on pathogens

- Gastroenteritis
- Respiratory
- Skin, eye infections
- Neurological
 - Other sequellae



Including non-GI disease requires a common metric (DALY)
Focus now on exposure reconstruction (saliva, sera etc.)



Drinking water public health costs

- CDC estimate waterborne disease costs > \$970 m/y
 - Addressing giardiasis, cryptosporidiosis, Legionnaires' disease, *otitis externa*, and non-tuberculous mycobacterial (NTM) infections, causing over 40 000 hospitalizations per year

Disease	\$ / hospitalization	Total cost
Cryptosporidiosis	\$16 797	\$45 770 572
Giardiasis	\$9 607	\$34 401 449
Legionnaires' disease	\$33 366	\$433 752 020
NTM infection/Pulmonary	\$25 985 / \$25 409	\$425 788 469/ \$194 597 422



Ahmed *et al.* (2012) *Appl Environ Microbiol* 78(1):219-226

Rainwater pathogen estimates

Reference Pathogen	Range (% +ve /#)
<i>Salmonella enterica</i>	0.9% /125 – 11% /27
<i>Campylobacter jejuni</i>	ND /125 – 45% /27
<i>E. coli</i> O157:H7	ND (not detected)
<i>Cryptosporidium parvum</i>	ND – 35% /17
<i>Giardia intestinalis</i>	ND /125 – 19% /21
<i>Legionella</i> spp. (few <i>L. pneumophila</i>)	ND /125 – 26% /27

Fecal pathogens all event driven, i.e. washed-in roof scats
Use culture & PCR data to bound credible ranges



Rationale for indicator qPCR vs pathogen detection – in stormwater (~ 100-fold)

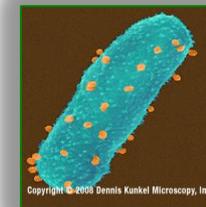
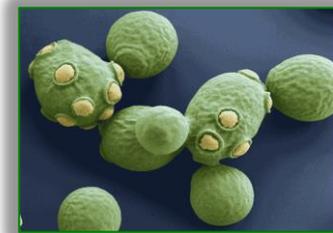
- Target pathogen density (rec water 0.03 GI risk swim⁻¹)
 - e.g. for one of the most numerous sewage pathogens:
9 *Norovirus* genomes L⁻¹ of rec water ➔ 0.03 GI risk
Changing *Norovirus* morbidity based on infection from best estimate 0.6 to 0.1 increases target density to **80 *Norovirus* genomes L⁻¹** (half to a tenth if recovery accounted for)
- *Bacteroides* HF183 target for same level of contamination from sewage to cause the benchmark (0.03 GI) illness:
 - **8600 *Bacteroides* HF183 genome copies L⁻¹**

Ashbolt *et al.* (2010) *Wat Res* 44:4692-4703



Rain/Storm water fecal indicators

- Microbial source tracking markers
 - General & avian fecal markers
 - various *Bacteroidales* PCRs however, no avian targets
 - *Catelicoccus* PCR or cholesterol markers for avian excreta
 - Sewage-targeted (various *Bacteroides*, e.g. HF183)
- Surrogates for pathogen removals
 - Baker's yeast for *Crypto* & *Giardia* oo/cysts
 - Bacteriophages for human enteric viruses





Surrogates for stormwater treatment

- Three stormwater recycling systems evaluated*, which included biofiltration, storage tanks, UV disinfection, constructed wetland, retention ponds
- Barrier efficacy studied by MS2, yeast & *E. coli*
 - Over 12 mo under wet & dry conditions, e.g. biofilter log-reductions

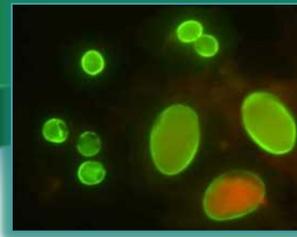
Replicate	MS2 phage	<i>E. coli</i>	Yeast
1	1.5	1.8	2.9
2	1.2	1.6	2.3

Clinical data for dose & health outcome
Used to estimate outcome by event-scenario



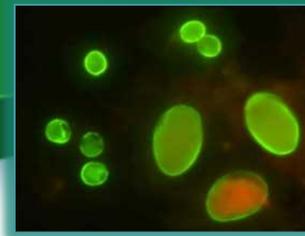
Rainwater reference pathogens Dose-Response data, and find...

- *Campylobacter* more important than *Salmonella*
- Toxigenic *E. coli* very infectious, but rare
- *Cryptosporidium* probably > *Giardia*
- Of the viruses, possibly bird flu of interest
- Of environmental pathogens, only *L. pneumophila* dose-response data available

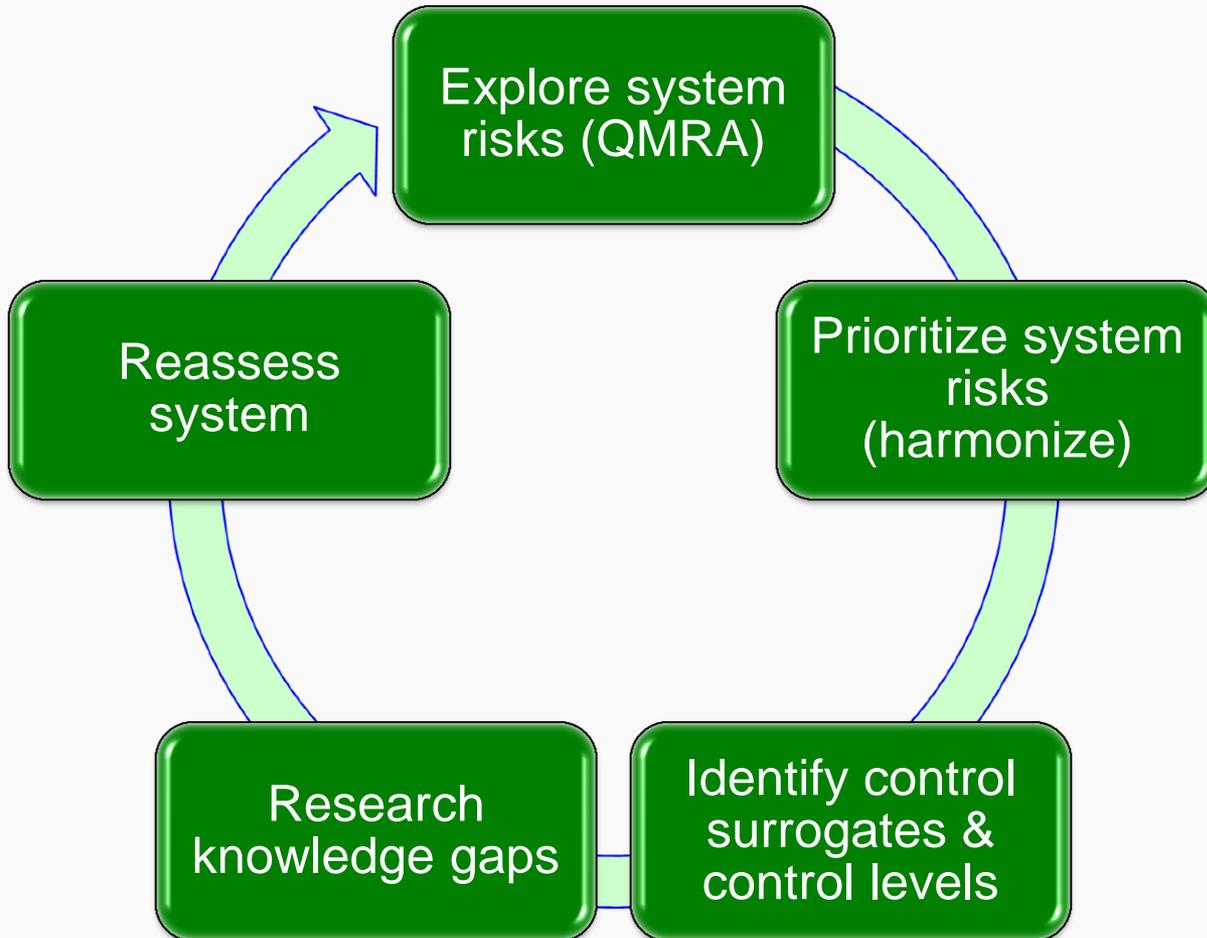


Hazardous events vs nominal

- **Enteric pathogen risks depend upon:**
 - ID and control of short-duration hazardous events throughout the system; via
 - Surrogate target levels (at control points)
 - Rainwater: is disinfection on/functioning?
 - Stormwater: are barriers intact/functioning?
- **Environmental pathogen risk is largely a function of chronic conditions**
 - Warm stagnant water/biofilms-nutrients



QMRA – Analytic Framework





Conclusions: research gaps

- Need qPCR estimates of infectious pathogens and generally, precision estimates
- Need to correlate qPCR targets/surrogates to specific pathogens by environment type (fate)
- Hence, need to identify primary risks of concern and their control parameters for effective rain & storm water management