Safe Healthcare Waste Management: Chemical and Cytotoxic Waste

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Outline

Chemical waste:

- Definition and sources
- Hazardous chemical waste
- Safe management of chemical waste (segregation, collection, transport, storage, treatment and disposal)

Chemotherapeutic/ Cytotoxic waste:

- Definition and sources
- Safe management of cytotoxic waste (segregation, collection, transport, storage, treatment and disposal)



Chemical waste

Waste containing chemical substances:

- -laboratory reagents
- -film developer
- -disinfectants that are expired or no longer needed
- -solvents
- -waste with high content of heavy metals, e.g. batteries; broken thermometers and blood-pressure gauges

Hazardous chemical waste

Discarded solid, liquid and gaseous chemicals that are:

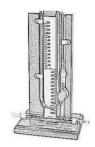
- Toxic
- Corrosive
- Flammable
- Reactive Explosive, water reactive, shock sensitive
- Oxidizing



Examples of chemical waste containing heavy metals

- Mercury
- -Thermometers, sphygmomanometers
- -Cantor tubes, esophageal dilators
- -Mercury switches, fluorescent lamps
- -Dental amalgam
- -Some formulations (e.g., Thimerosal)
- Cadmium
- Dry cell batteries
- Lead
- Radiation shielding











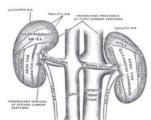
Health impacts of chemical exposure

- Lungs: cancer, asthma, irritation
- Eyes & mucous membranes; irritation, conjunctivitis, blurred vision
- Skin: irritation, rashes & burns
- Nervous system
- Liver and kidneys
- Reproductive system
- Cancers









Safe management of chemical waste

Segregation

Handling and collection

Storage

Transport

Treatment

Disposal



Segregation of Chemical Waste

Separate from infectious waste, radioactive aste, and general hazardous waste

Segregate based on compatibility oxic, Corrosive, Flammable, Reactive

WHO recommended segregation Scheme

of waste	Colour of container and markings	Strong, leak-proof plastic bag, or container capable of being autoclaved Leak-proof plastic bag or container		
y infectious waste	Yellow, marked "HIGHLY INFECTIOUS", with biohazard symbol			
r infectious waste, plogical and anatomical waste	Yellow with biohazard symbol			
os	Yellow, marked "SHARPS", with biohazard symbol	Puncture-proof container		
nical and pharmaceutical	Brown, labelled with appropriate hazard symbol	Plastic bag or rigid container		
active waste ^b	Labelled with radiation symbol	Lead box		
ral health-care waste	Black	Plastic bag		

Labeling of chemical waste

ste container label should have:
ame, address, telephone of the generator
int of generation (if applicable)
art date of accumulation of waste
timated quantity

escription of contents aste classification azard symbols ecautionary statement nergency contact information



ernational Chemical Waste Symbols

C



Flammable



rosive



Explosive



dizer



Handling of chemical waste

PPE should be used when handling hazardous nemicals

Type of PPE required is specific for each nemical

Handling of chemical waste

propriate transferring methods must be used ding, grounding, and explosion proof devices flammable waste

ill kit accessible erent spill kits for different hazards naterials in the kit are hazardous after use

condary containment

n-Site Transport of Chemical Waste

wheeled trolleys, containers, or carts ignated for chemical waste transport:

sy to load and unload sharp edges

ak proof

sy to clean

Storage of chemical waste

parate and enclosed area/room/bldg.

od ventilation



uid or chemical proof sump (secondary containment in

se of leaks)

mixing of chemical waste (according to manufacturers'

ecifications)

compatible wastes stored separately, e.g. acids & bases

mperature controlled or kept within acceptable range

sed on manufacturers' requirements

peled on the exterior with a sign



ample outline of chemical storage room

Area for eusable tochemical waste Shelf for toxic and waterpolluting waste Shelf for reactive waste (e.g., acids)

Drum for metal waste (e.g., thermometers, batteries)

Fire extinguisher

ty cabinet for lammable chemicals

Shelf for corrosive bases

Shelf for PPE, spill kits, supply equipment, etc.

Off-site transport

ransport vehicles to meet basic requirements:

well maintained, bulkhead to separate driver from vehicle proper placards and markings including hazard symbol, kit, easy to decontaminate, etc.

iver should be trained on:

s, risks, safe handling methods, labeling, umentation and emergency procedures

nsignment or manifest system



Treatment of chemical waste

emical and Physical Treatment

utralization

oxification

emical reduction or oxidation

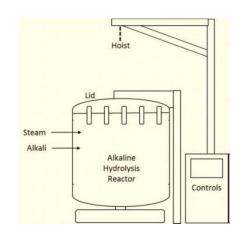
ctrolytic oxidation

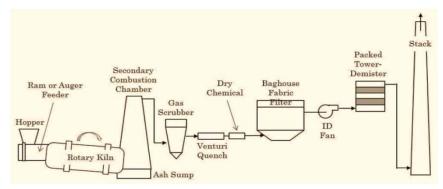
drogenation, hydrolysis

logical Treatment

degradation

ermal Treatment





h-temperature incineration with air pollution control

atment of chemical waste in low-income countries

ncapsulation

nertization with cement

ngineered, controlled and secure landfills

eturn of chemicals to manufacturers



nemical wastes containing heavy metals

mical Wastes containing toxic metals, in general

uld not be burned or disposed in dumpsites
he heavy metals, like silver in x-ray processing, can be recovered
here to supplier for reprocessing or disposal if possible
ho options currently exist, store the waste safely in a medium-term storage site
here the Secretariat of the Basel Convention's guidelines on the environmentally
hanagement or reclamation of metals including mercury and lead

cury

elop safe clean-up, handling and storage procedures uester mercury waste safely in a long-term storage facility uce unnecessary use of mercury equipment lace mercury-containing products with mercury-free alternatives elop plans to become a mercury-free facility

mium and Lead

d to facilities that specialize in recovery of heavy metals urn to suppliers if possible d to a treatment, storage and disposal facility for hazardous industrial waste

Wastes not to be incinerated

Pressurized gas containers

Large amounts of reactive chemical waste

Silver salts or radiographic waste

Halogenated plastics (e.g. PVC)

Mercury or cadmium

Ampoules of heavy metals

Disposal

ntrolled dumping gineered landfill nitary landfill

n lack proper facilities for hazardous waste sposal of hazardous ash:

signated cells at engineered landfills,

capsulated and placed in specialized monofill sites,

h pit

could work with other stakeholders and the local municipal orities for safe disposal

Chemical waste minimization

urce Reduction (most desirable method of ste minimization) egregate hazardous chemical waste valuate possible substitutions using less zardous or non-hazardous materials se steam cleaning or non-toxic cleaners instead ontrol the inventory of chemicals linimize unnecessary dilution of wastes

evelop plans for a mercury phase-out

Chemical waste minimization

cycling

- elect vendors that are willing to reprocess or ycle their products
- se a silver recovery unit for photographic ste
- se a distillation column to recover solvents
- archase compressed gas cylinders from
- nufacturers who accept return of empty or
- tially used cylinders

Definition of cytotoxic agents

- totoxic agents specific destructive action certain cells
- tostatic agents—suppress growth and ultiplication of cells
- ntineoplastic agents inhibit the
- evelopment of abnormal tissue growth.
- ntineoplastic drugs selectively kill dividing

Sources of cytotoxic wastes

- ntaminated materials from drug preparation and ministration e.g. syringes, needles, gauzes, vials, ckaging
- tdated drugs, excess (leftover) solutions, drugs urned from wards
- ine, faeces and vomit from patients. (administered costatic drugs or their metabolites)
- e cytotoxic waste may also carry a risk of infection, i.e. tious cytotoxic waste

Cytotoxic waste is highly hazardous

nould be carefully segregated, carefully cored away from other health-care waste in a esignated secure location and collected eparately, and should never be landfilled or ischarged into the sewerage system.

Examples of chemotherapy agents

- Ikylating agents e.g.mechlorethamine, hlorambucil, cyclophosphamide, ifosfamide, nelphalan, streptozocin, carmustine, busulfan, acarbazine, thiotepa cisplatin
- ntimetabolites e.g. 5-fluorouracil, methotrexate
- nitotic inhibitors e.g. paclitaxel, vinblastine, incristine
- Inti-tumor antibiotics (daunorubicin, doxorubicin, leomycin)
- opoisomerase inhibitors (etoposide, teniposide)

Hazards of chemotherapy wastes

- verity of hazards depend on substance toxicity duration of exposure
- enerally highly mutagenic, teratogenic and/or cinogenic
- ctremely irritant with harmful local effects on and eyes
- lay cause dizziness, nausea, headache or matitis

Segregation of Cytotoxic Waste

- orted using proper personal protective lipment.
- nould be stored separately from other waste in signated secure location
- ollect in strong containers
- ontainers should be leak-proof
- early label containers "cytotoxic wastes"
- o not dispose in dumpsites or discharged into verage systems

reatment and disposal of chemotherapeutic waste

emical degradation:

ed for drug residues and for cleaning contaminated urinals, spillages I protective clothing

used widely and require special knowledge

appropriate for treating contaminated body fluids

h-temperature incineration with air pollution control:

ration up to 1200 °C and a minimum gas residence time of 2 sec. in cond chamber. The incinerator should be equipped with gasng equipment.

ely package and return to original supplier capsulation or inertization as a last resort not dispose in dumpsites nor discharge into sewer sys

leither incineration nor chemical degradation urrently provide a completely satisfactory olution for treating waste items, spillages or iological fluids contaminated by cytotoxic gents.

Intil such a solution is available, hospitals hould exercise the utmost care in the use and andling of cytotoxic drugs.

Treatment of Cytotoxic Infectious waste

notherapeutic waste, mercury, other hazardous chemical e and radiological waste should not be treated in an clave.

nical disinfection:

ost suitable for treating liquid waste, e.g. blood, urine, stools hospital sewage.

lid HCW (even highly hazardous) with limitations ine hydrolysis or alkaline digestion is a process that can be to convert blood & body fluids into a decontaminated aqu. ion.

Overview of disposal and treatment methods

ology or method	Infectious waste	Anatomic waste	Sharps	Pharmaceutical waste	Cytotoxic waste	Chemical waste	Radioactive waste
kiln	yes	yes	yes	yes	yes	yes	low-level infectious waste
tic incinerator	yes	yes	yes	small quantities	no	small quantities	low-level infectious waste
chamber incinerator	yes	yes	yes	no	no	no	low-level infectious waste
or brick incinerator	yes	yes	yes	no	no	no	no
cal disinfection	yes	no	yes	no	no	no	no
ermal treatment	yes	no	yes	no	no	no	no
wave irradiation	yes	no	yes	no	no	no	no
sulation	no	no	yes	yes	small quantities	small quantities	no
urying inside premises	yes	yes	yes	small quantities	no	small quantities	no
y landfill	yes	no	no	small quantities	no	no	no
arge to the sewer	no	no	no	small quantities	no	no	low-level liquid waste
ation	no	no	no	yes	yes	no	no
methods				return expired drugs to supplier	return expired drugs to supplier	return unused chemicals to supplier	decay by storage

Chemotherapeutic Waste Minimization

egregate chemotherapy wastes through worker ining and separate waste containers se degradable chemo agents instead of vironmentally persistent agents, where possible urchase drug volumes based on need eturn expired agents to manufacturer evelop spill containment and clean-up procedures at minimize waste clean-up volume

ischarge into municipal sewage systems

scharging into municipal sewage system after adequate etreatment if municipal sewage-treatment plant fulfils e local regulatory requirements

only basic sewerage systems —— onsite treatment or at start pretreatment before discharge into the municipal werage system

requirements:

mary, secondary and tertiary treatment;

least a 95% removal of bacteria;

rther treatment of sludg e.g. anaerobic digestion,

aintains high standards

Thank you!