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2 **Study on the scavenging effect of steady-state displacement**
3 **air purification system on indoor bioaerosol**

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17

18 **Abstract**

19
20 Many kinds of microorganisms, including the new coronavirus, can spread through
21 aerosols. There are abundant bio-aerosols in indoor medical environment, and these
22 aerosols are likely to cause infections among medical staff and patients in hospitals.
23 Especially in the current severe situation of the new coronavirus, the use of a steady-state
24 displacement air purification system may have a certain effect on reducing the spread of
25 the new coronavirus or other microorganisms. To analyze the purification effect of the
26 steady-state displacement air purification system on the bio-aerosols in the bronchoscope
27 room of the hospital. In this study, the bio-aerosol in the outpatient department of the
28 Respiratory Medicine Department of the bronchoscope room were collected during
29 different time periods from 2021.04 to 2021.05. Among them, the microorganisms
30 contained in the bio-aerosol are identified by NGS and microorganism culture and strain
31 identification. During the experiment, the researcher took 5 sampling points to collect
32 aerosols, performing NGS and microbial culture counting and identification to detect
33 microorganisms. The total purification efficiency are 88.0% (NGS) and 87.5% (microbial
34 culture count and identification results). The results above was statistically significant. In
35 an occupant environment in the bronchoscope room, the steady-state displacement air
36 purification system has a good removal effect on bio-aerosols. Such purification
37 efficiency may have a positive effect on the control of the new coronavirus epidemic and
38 various infectious diseases.
39

40 **Keywords:** Bio-aerosol, Bronchoscope room, Steady-state displacement air purification
41 system, Indoor air.

1 INTRODUCTION

Indoor bio-aerosols are effective against the known new coronaviruses (Jarvis, 2020), Mycobacterium tuberculosis, measles virus, varicella-zoster virus (Tellier et al., 2019), hand, foot and mouth disease virus (Colenutt C et al., 2016), Ebola virus and Middle East Respiratory Syndrome. The spread of established infectious pathogens such as virus has an important impact to human health (Judson et al., 2019). Indoor bio-aerosols in different medical places also have an important impact on medical staff and patients.

The test of NGS is a kind of next-generation sequencing technology, which can directly analyze the genome of microbes from environmental samples. It can provide information about the microorganisms present in environmental samples (Segata et al., 2013). Some researchers used a wet cyclone portable air sampler to collect air samples at a flow rate of 450 L min^{-1} , each with a sampling volume of 54,000 L, and used whole-genome sequencing to study the airborne microbial communities in various indoor and outdoor environments in New York City (Yooseph et al., 2013). Some researchers have also applied high-throughput sequencing technology to characterize the atmospheric sedimentary microbial communities collected in northeastern Spain for three years (Barberán et al., 2014). In the past few years, high-throughput sequencing technologies such as NGS have been used to characterize microbial communities in various environmental samples (Madsen et al., 2015). The method of microbial cultivation and colony counting is a relatively simple and low-cost method. The microorganisms in the air are collected and cultured on a semi-solid medium. The result is expressed as the number of colonies in CFU. A single colony is often formed by a single microorganism, so CFU provides information on the number of microorganisms present in the sample

66 (Ghosh et al., 2015). If we need to obtain information on the types of microorganisms,
67 we can also further identify the species (Heidelberg et al., 1997).

68

69 **2 METHODS**

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71 **2.1 Experimental equipment and experimental materials**

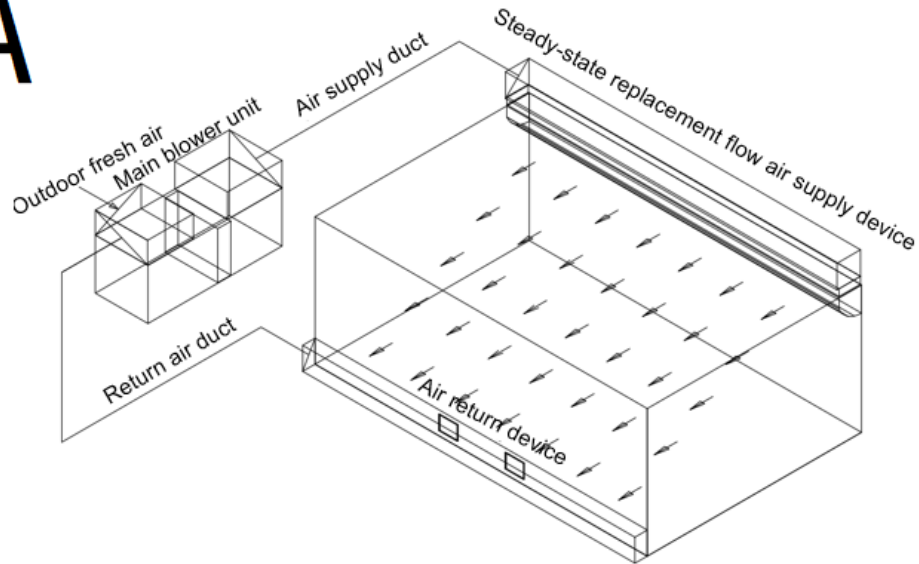
72 Steady-state replacement flow air purification system (China Aoxiang), Circulating
73 water vacuum pump (China Lichen), 37mm filter membrane sampling clip (US SKC),
74 Gelatin filtration Membrane (Sartorius, Germany).

75

76 **2.2 Introduction to the Steady-State Displacement Flow Air Purification System**

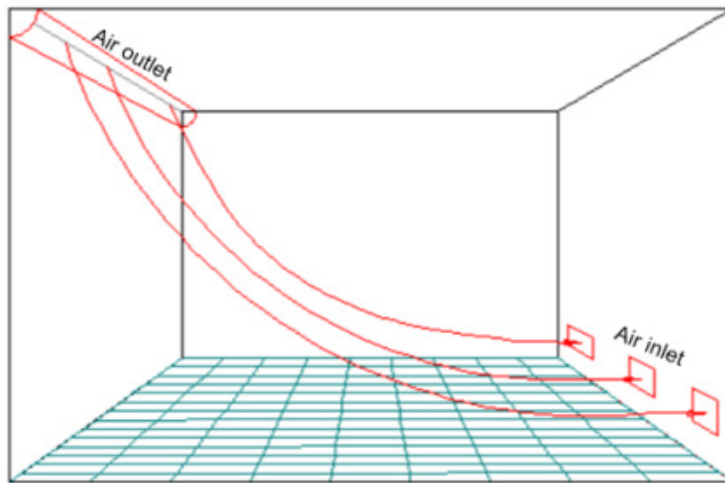
77 The steady-state displacement flow air purification system used in this experiment is
78 Aoxiang® Steady-State Displacement Flow Clean and Disinfection System, which is
79 characterized by steady-state displacement flow field and high-efficiency air filtration
80 technology. The steady-state displacement flow air purification system uses an energy-
81 saving and efficient air cleaning technology: steady-state displacement flow technology.
82 In the indoor environment between the air outlet and the air inlet, a "vector flow" one-
83 way, propelling airflow is established to remove particles and aerosols with a minimum
84 amount of diffusion and form an air isolation barrier in the controlled area. It is a purely
85 physical epidemic prevention technology. Reduction indoor bio-aerosol pollution may
86 play a positive role in the prevention and control of epidemics in public places, including
87 medical environments. Fig. 1 demonstrates the model diagram of steady-state replacement
88 flow air purification system.

A



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B



90

91 **Fig. 1** Model diagram of steady-state replacement flow air purification system. Figure
92 A: Schematic diagram of the steady-state replacement flow air supply system. Figure B:
93 Schematic diagram of the working principle of the steady-state replacement flow
94 system.
95

96 **2.3 Grouping:** This study collected bio-aerosol in the outpatient department of the
97 bronchoscope room of the Second Hospital of Hebei Medical University during different
98 time periods from 2021.04 to 2021.05. Among them, the microorganisms contained in
99 the bio-aerosol are identified by NGS and microorganism culture and strain identification.

100 There are two groups: the unpurified group (turning off the purifier) and the purified
101 group(turning on the purifier).

102

103 **2.4 Sample collection method**

104 Under the normal dynamic diagnosis and treatment environment of the bronchoscope
105 room, the gelatin filter membrane is used to collect indoor bio-aerosols. The aerosols-
106 collection began half an hour after the patient enters the bronchoscope room. The
107 picture of sampling device is shown in Fig. 2 (B and C).

108 The sampling membranes of 1, 2, 3, 4, and 5 were used to sample the unpurified group
109 for 1 hour; then turned on the purifier for 40 minutes, during which no sampling would
110 be performed; The purifier were kept open 40 minutes later, The sampling membranes of
111 A, B, C, D, and E were used to sample the aerosols of the purified group for 1 hour. The
112 sampling flow chart is shown in Fig. 2 (D). The process of sampling was carried out
113 during normal working hours, and each sampling membranes contained the total sampling
114 of 39.5 hours. The NGS detection used is undertaken by Shanghai Bingyuan Medical
115 Technology Co., Ltd. The method of NGS can detect 560 kinds of clinically common
116 microorganisms including bacteria, fungi, viruses and parasites, most of which are
117 bacteria and fungi, and 70 kinds of viruses in total are included. The method of
118 microorganisms culture and identification are tested by the clinical laboratory of the
119 Second Hospital of Hebei Medical University. The No. 1, 3, 4, and 5 sampling membranes
120 were dissolved in 4ml of the NGS special specimen storage solution after the sampling
121 process, then placed in a 37°C water bath for 7 minutes and marked as the unpurified
122 group. The sampled membranes A, C, D, and E were dissolved in 4ml of the NGS special

189 **Fig. 3.** Mild-to-high copy number results of NGS test: A: NGS comparison results of
190 the unpurified group and purified group. B: Low copy number results of NGS
191 comparison results of the unpurified group and purified group. C: The statistical results
192 of the unpurified group and purified group.
193

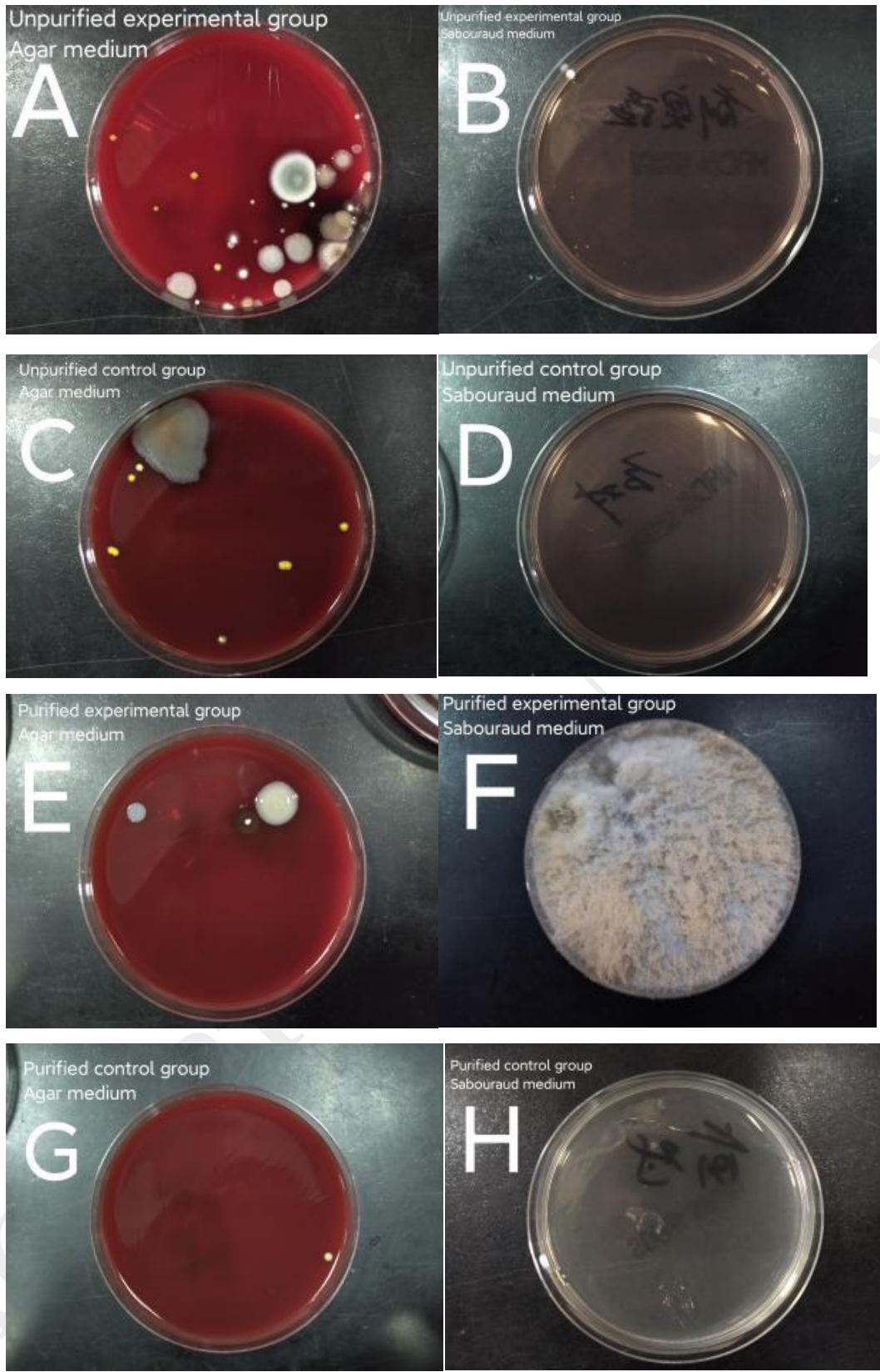
194 Among them, the purification efficiencies of individual microorganisms are:
195 *Gardnerella vaginalis* 62.5%, *Staphylococcus capitis* 100%, *Micrococcus luteus* 100%,
196 *Actinomyces naevitii* 100%, *Pantoea agglomerans* 100%, purulent actinomycetes
197 Bacteria 100%.

198 The researchers used SPSS statistics 26 for nonparametric tests, and the statistical
199 results are as follows:

200 At the level of $\alpha = 0.05$, $P < 0.05$, the researchers can consider that there is a statistically
201 significant difference in the copy number of NGS of different microorganisms between
202 the unpurified group and the purified group.
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204 **3.2 Results bacterial and fungal culture and identification**

205 **3.2.1 Colony count results**



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Fig. 4. Results of microbial culture and colony count. A,B: Unpurified test group. Number of colonies: 32. C,D: Unpurified control group. Number of colonies: 9. E,F: Purified test group. Number of colonies: 4. G,H: Purified control group. A,C,E,G: Agar medium. B,D,F,H: Sabouraud medium. Number of colonies: 1.

216

217 The comparison of the total colony count between the purified group and the unpurified

218 group is as follows:

219 Efficiency of removing bioaerosol pollution = purification efficiency = (colony count

220 in unpurified group - colony count in purified group) / colony count in unpurified group

221 = 87.5%

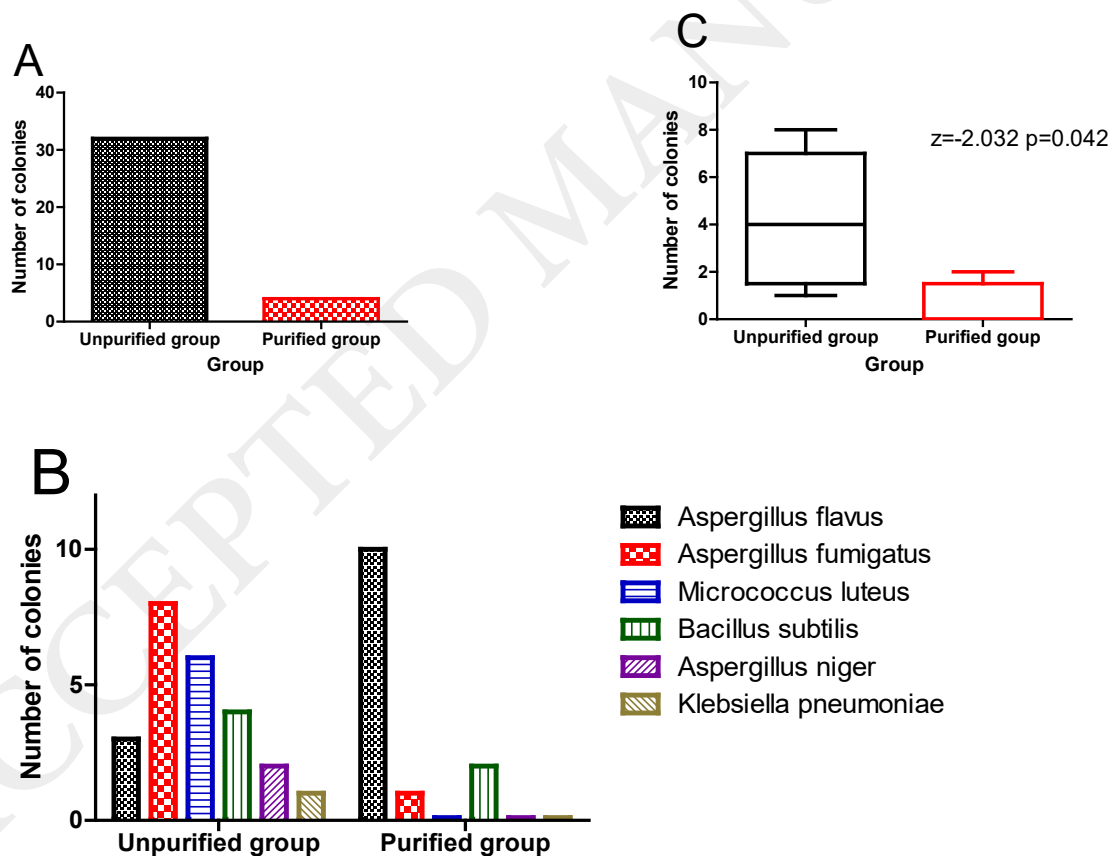
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223 3.2.2 Identification results of bacterial and fungal species

224 The researchers identified the dominant colonies in the culture medium. The result is

225 as follows:

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227

228 **Fig. 5.** Results of microbial culture and identification test: A: Results of total number of

229 colonies in the microbial culture and identification test. B: Microbial culture and

230 identification comparison results of the unpurified group and purified group. C: The

231 statistical results of the unpurified group and purified group.

232

233 Among them, *Aspergillus flavus* is a special case, and the discussion part is analyzed
234 separately. The purification efficiencies of the other five microorganisms were:
235 *Aspergillus fumigatus*: 87.5%, *Aspergillus niger*: 100%, *Klebsiella pneumoniae*: 100%,
236 *Micrococcus luteus*: 100%, *Bacillus subtilis*: 50%.

237 The researchers conducted nonparametric tests for the remaining 5 microorganisms:
238 the researchers used SPSS statistics 26 to conduct nonparametric tests, and the statistical
239 results were as follows:

240 At the level of $\alpha=0.05$, $P<0.05$, the researchers can think that the difference in the
241 number of colonies of different types of microorganisms between the unpurified group
242 and the purified group is statistically significant.

243

244 **3.3 Case Study**

245 The researchers retrieved information on patients undergoing bronchoscopy during the
246 sampling period and recorded their clinical microbiological test results, such as sputum
247 culture, blood culture, respiratory pathogen antibody detection, bronchoalveolar lavage
248 fluid culture, bronchoalveolar lavage fluid NGS, etc. The researchers found that during
249 the sampling period of the unpurified group, the corresponding microorganisms that were
250 consistent with the experimental results were found as follows: *Klebsiella pneumoniae*,
251 *Actinomyces neisseria*, *Staphylococcus capitis*, *Gardnerella vaginalis*, *Pseudomonas*
252 *aeruginosa* spp., *Stenotrophomonas maltophilia*, *Fusarium* spp. During the sampling
253 period of the purified group, the corresponding bacteria or fungi that were consistent with
254 the experimental results were found as follows: *Aspergillus flavus*.

<i>Sampling days</i>	Sampling in the unpurified group	Sampling in the decontamination group
Day 3	<i>Klebsiella pneumoniae</i>	
Day 4		<i>Micrococcus luteus</i>
Day 5	<i>Pseudomonas aeruginosa</i> , <i>Actinomycetes</i> , <i>Gardnerella vaginalis</i> , <i>Fusarium</i>	
Day 6	<i>Klebsiella pneumoniae</i>	<i>Pseudomonas aeruginosa</i>
Day 7	<i>Staphylococcus capitis</i> , <i>Klebsiella pneumoniae</i>	<i>Actinomycetes</i> , <i>Aspergillus flavus</i> , <i>Pseudomonas aeruginosa</i>
Day 8	<i>Pseudomonas aeruginosa</i> , <i>Stenotrophomonas maltophilia</i>	
Day 9	<i>Pseudomonas aeruginosa</i> , <i>Klebsiella pneumoniae</i>	
Day 11	<i>Klebsiella pneumoniae</i>	
Day 13	<i>Stenotrophomonas maltophilia</i>	
Day 14	<i>Pseudomonas aeruginosa</i>	
Day 15	<i>Klebsiella pneumoniae</i>	
Day 16	<i>Pseudomonas aeruginosa</i>	

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260 **DISCUSSION**

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262 Some researchers took samples from the filter for microbiological testing, which
263 indirectly confirmed the purifying effect of the filter (Luongo et al., 2017). However, the
264 microorganisms on the filter may reproduce or die and decompose, and cannot directly
265 reflect the microorganisms in the air. Some researchers proved that air purifiers can
266 reduce the concentration of allergens, improve the clinical performance of patients with
267 allergic rhinitis, and reduce the need for drugs (Park et al., 2017; Park et al., 2020). Some
268 researchers proved that air purifiers can reduce the total number of colonies in the culture

269 medium through the method of fungal culture (Chen et al., 2018). However, it has not been
270 tested for bacterial species, and the purification effect of each microorganism cannot be
271 seen directly. Some researchers used aerosol generators to artificially make certain types
272 of microorganisms into aerosols, and verified the purifying effect of air purifiers in the
273 ideal environment of a closed experimental chamber (Lee et al., 2019). Although all the
274 above can intuitively reflect the purification effect, it is not an evaluation of the
275 purification effect of the microorganisms that actually exist in the environment under the
276 dynamic environment of the hospital's normal diagnosis and treatment. Some researchers
277 proved that air purifiers can reduce the pathogenicity rate of a certain virus to animals by
278 detecting the infection rate of animals to a certain virus (Dee et al., 2019). However, it
279 cannot directly reflect the direct purification effect of the purifier on the biological aerosol.

280 The experiments in our research have confirmed that in a dynamic environment, after
281 being purified by the new type of purifier, the total number of copies of microorganisms
282 and the total number of colonies in the bronchoscope room are greatly reduced. The
283 overall purification efficiency of NGS was 88.0% and the overall purification efficiency
284 of Microbial culture counting and identification was 87.5%. Moreover, the single strains
285 identified by NGS and microbial culture also declined to varying degrees, and the
286 purification efficiency was between 50% and 100%, and the purification efficiency of
287 most strains was 100%. It can be seen that in the dynamic environment of normal
288 diagnosis and treatment in the bronchoscope room, the new purifier has a good
289 purification efficiency for indoor biological aerosols. The long-term, large-capacity
290 sampling method used in this experiment conforms to statistical laws. There have been
291 some related studies that can confirm the purification effect of several different types of

292 air purifiers. The comparison results of the total copy number and total colony number of
293 this study are similar to Zhao et al. (Yang et al., 2018), the difference is that the dynamic-
294 bioaerosol part of this study focus on the actual collected data in the actual working
295 environment. The results show that the purification effect of a single kind of
296 microorganism has a certain fluctuation and is not constant. The researchers believe that
297 the reason for the fluctuation of the purification effect of a single microorganism may be
298 related to the different time of entering the bronchoscopy room and the different number
299 of coughs in the different patients, which are uncontrollable factors in this study. But this
300 is also the case, which proves that even in the dynamic environment of normal diagnosis
301 and treatment, the steady-state displacement air purification system still has good removal
302 efficiency for bioaerosols in the bronchoscope room.

303 After purification, the total amount and species of most microorganisms are greatly
304 reduced. However, there is a special case among them: *Aspergillus flavus*. The
305 investigators conducted a case search and found that the only patient who was positive
306 for *Aspergillus flavus* in the clinical microbiological examination entered to the
307 bronchoscopy room during the sampling period of the purified group . Therefore, the
308 aerosols of *Aspergillus flavus* are produced in the purified group and collected by the
309 sampling membranes. The sampling membranes sent by the researchers for microbial
310 culture and bacterial species identification is the 2/B sampling membranes. This sampling
311 membranes is 2.5-3.5m away from the patient and is the closest among several sampling
312 membranes. Due to the application of the steady-state displacement flow of the purifier,
313 the indoor air flow is slow, and the airflow cannot be detected by normal human bodies.
314 The aerosol containing *Aspergillus flavus* has been eliminated by the purifier after it was

315 produced by the patient and collected by the sampling membranes. The reason for the
316 occurrence of *Aspergillus flavus* in the NGS results is that the sampling positions of the
317 sampling membranes of the remaining NGS No. 1, 3, 4, and 5 are far away from the
318 patients, the sampling time is short, and the aerosols generated by the patient is not
319 detected by the sampling membranes in time. Due to collection. This situation is
320 unavoidable in the dynamic environment of this experiment. The above is the reason why
321 the number of colonies of *Aspergillus flavus* in the purified group is more than that in the
322 unpurified group. Even so, the overall microbial clearance of the experiment was not
323 affected. In this experiment, two methods were used for microbial detection, and the
324 experimental results were surprisingly similar, which confirmed that in the dynamic
325 diagnosis and treatment environment, the purification efficiency of the new purifier for
326 indoor bioaerosol was relatively stable, ranging from 87.5% to 88%.

327 The main limitation of microbial culture and identification is that only a fraction of
328 the microorganisms present in the environment can be cultured and identified (Heidelberg
329 et al., 1997). Droffner ML, Pillai SD, et al. demonstrated that culture conditions also limit
330 the growth of viable and culturable microorganisms, such as mesophilic bacteria, *Bacillus*
331 *subtilis*, that exhibit adequate colony formation at temperatures between 5 and 55 °C
332 (Pillai et al., 2002), while thermophilic microorganisms prefer to be cultured at
333 temperatures above 50 °C. In this experiment, the *G. vaginalis* obtained by NGS was an
334 anaerobic bacteria, which was difficult to cultivate. Therefore, we can see that some
335 microorganisms have high copy numbers in the NGS results, but not in the microbial
336 culture and identification results. The possible reasons are as follows: (1) Not all the
337 collected microorganisms are suitable for the culture conditions at that time, and our

338 experiment The culture conditions used are the most commonly used conditions for
339 microbial culture, and are more suitable for screening out those microorganisms that are
340 suitable for surviving in the human body; (2) NGS can only detect the microorganisms
341 above the detection limit (2 copies/ml) and within its detection range. All microorganisms,
342 including live and dead bacteria. Therefore, some of the microorganisms detected by NGS
343 may be dead bacteria and cannot form colonies of live bacteria on the medium. Combined
344 with the results of NGS and microbial culture and bacterial species identification, it can
345 be seen that the two detection methods have their own advantages and disadvantages.
346 NGS is more sensitive, detects more types of microorganisms, and has fewer factors
347 affecting the test results, but it cannot distinguish the dead and alive of microorganisms.
348 That is, the microorganisms in the test results may be alive or dead. However, microbial
349 culture and identification methods are more traditional, and the results are subject to more
350 external interference, which is not as sensitive as NGS. However, because it is impossible
351 for dead microorganisms to grow colonies, this method of microbial culture and
352 identification can distinguish the dead and alive of microorganisms. Whether it is the
353 results of colony counting or identification of bacterial species, they are all
354 microorganisms in the living state of the reaction. Therefore, the combination of the two
355 methods in this experiment can more objectively reflect the true reliability of the data.

356 The experimental purification time was set to 40 min. When the steady-state
357 displacement air purification system is turned on for about 10 minutes, a relatively
358 obvious particle purification effect can occur, which has been confirmed in the closed
359 experimental chamber. However, in the normal diagnosis and treatment environment of
360 the bronchoscope room, a more stable particle purification effect can be achieved 40

361 minutes after the purifier is turned on. Therefore, the purification time set in this
362 experiment was 40 min. Compared with traditional disinfection methods, the new purifier
363 can be applied in medical environment at any time, which can maximize the safety of
364 medical staff and patients, reducing the probability of nosocomial infection.

365 At present, the new coronavirus pandemic has occurred in many countries, causing
366 serious casualties and economic losses. Many outbreaks are closely related to bioaerosols
367 in the indoor environment. Previous studies have agreed that infection in the endoscopic
368 room is related to cross-infection of endoscopic instruments (Kong et al., 2021), but
369 according to the study of bioaerosols in this experiment, the researchers found that the
370 infection in the bronchoscopy room may also have a certain relationship with bioaerosols.
371 However, there are a large number of bioaerosols in the hospital, which can cause drug
372 resistance after repeated inhalation and infection by patients, making the treatment more
373 difficult. The use of new purifiers can reduce drug-resistant bacterial infections in
374 hospitals and reduce the rate of nosocomial infections. The steady-state displacement air
375 purification system involved in this experiment has a removal efficiency of about 85%
376 for microorganisms under the dynamic conditions of normal hospital diagnosis and
377 treatment. Such removal efficiency may be useful for epidemic control and reduction of
378 nosocomial infection of other diseases. positive effect.

379 The current 222nm light vaccine, which belongs to ultraviolet rays in a specific
380 spectrum range, can kill the new coronavirus in the light-accessible position in the air
381 without causing harm to the human body (Kitagawa et al., 2021). Traditional ultraviolet
382 disinfection has a wide range of sterilization, but it has certain harm to the human body.
383 Conventional disinfectant spraying can also regularly disinfect bioaerosols floating in the

384 air. Steady-state displacement air cleaning systems clean and replace indoor air anytime.
385 The researchers believe that the combined use of light vaccine, traditional disinfectant
386 spray and steady-state displacement air purification system can minimize the spread of
387 pathogenic microorganisms such as the new coronavirus, reduce nosocomial infections,
388 and ensure the safety of medical staffs and patients in the medical environment.

389

390 **CONCLUSION**

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392 In the dynamic environment of normal diagnosis and treatment, the steady-state
393 displacement air purification system has a good effect on removing biological aerosols in
394 the bronchoscopy room.

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398 **Ethical approval and consent to participation (human ethics,** 399 **animal ethics or plant ethics)**

400 Not applicable.

401

402 **Agree to publish**

403 Author confirms:

404 The work described has not been published before;

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410 whose publications have been approved by all co-authors, if any;Its publication has
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424

425 **Author's Contribution**

426

427 Lijuan Wu: Methods, Software, Writing, Data Management, Editing

428 Zhigang Cai: Method

429 Jihong Li: Method

430 Jingwen Li: Method

431 Hao Pu: Method

432 Xianghong Liu: Methods, Data Management

433 Xixin Yan: Methods, Supervision

434 The manuscript was drafted by Wu Lijuan, directed and supervised by Yan Xixin. The
435 two reviewed the manuscript and contributed the final version, which was approved by
436 both parties.

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449

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456 successfully completed.

457

458 **Highlights**

459

- 460 1. Normal diagnosis and treatment in the bronchoscopy room.
- 461 2. The method of long-term, large-volume sampling is adopted.
- 462 3. The use of two microbial detection methods increased the accuracy and reliability.
- 463 4. The outdoor fresh air purification.
- 464 5. Steady-state replacement flow technology.

465

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