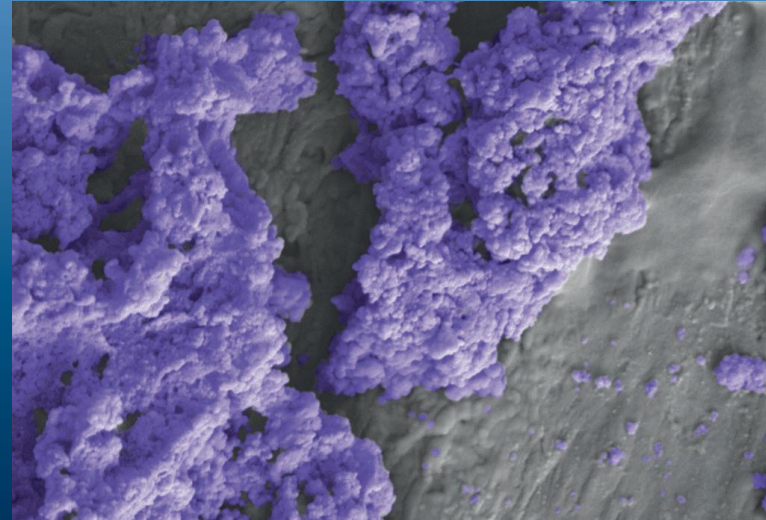


Dry Surface Biofilm



Presented by:

Dr. Michelle Alfa, Ph.D., FCCM



IPAC Canada National Conference
Vancouver BC | May 28-31, 2023





- Dr. Michelle Alfa is currently the President of AlfaMed Consulting Ltd.

- She has provided consulting services and/or been an invited speaker for; Olympus, Ofstead & Associates, Karl Storz, Kikkoman, 3M, STERIS, and Nanosonics. She also receives royalty payments from the University of Manitoba for licensing of a patent to Healthmark.

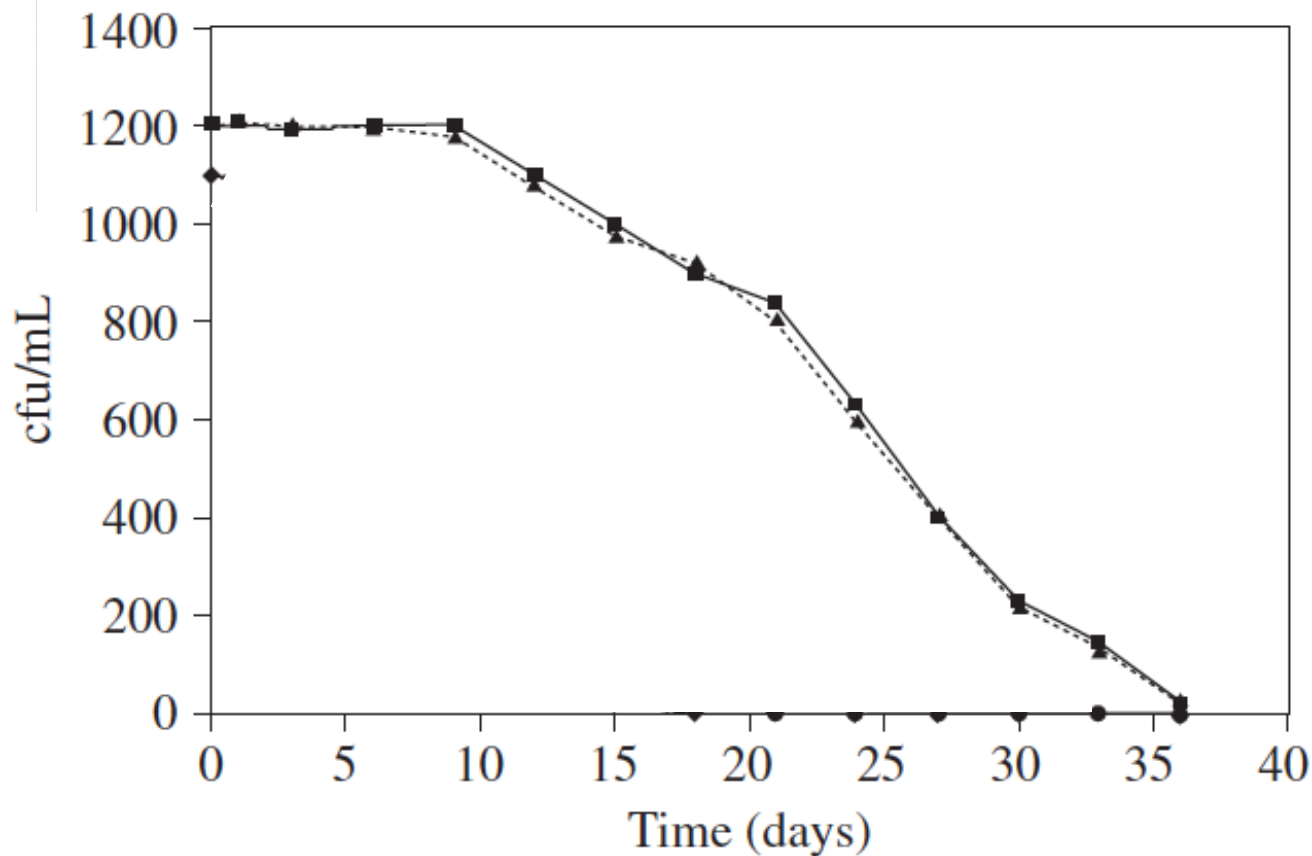
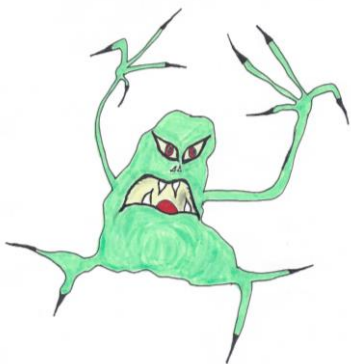
- None of the above are related to the topic of her presentation at IPAC 2023

Objectives:

- What is Dry Surface Biofilm?
- Why is it important?
- What can be done to improve surface cleaning & disinfection in Healthcare?



Planktonic *Acinetobacter baumannii* survives on environmental surfaces



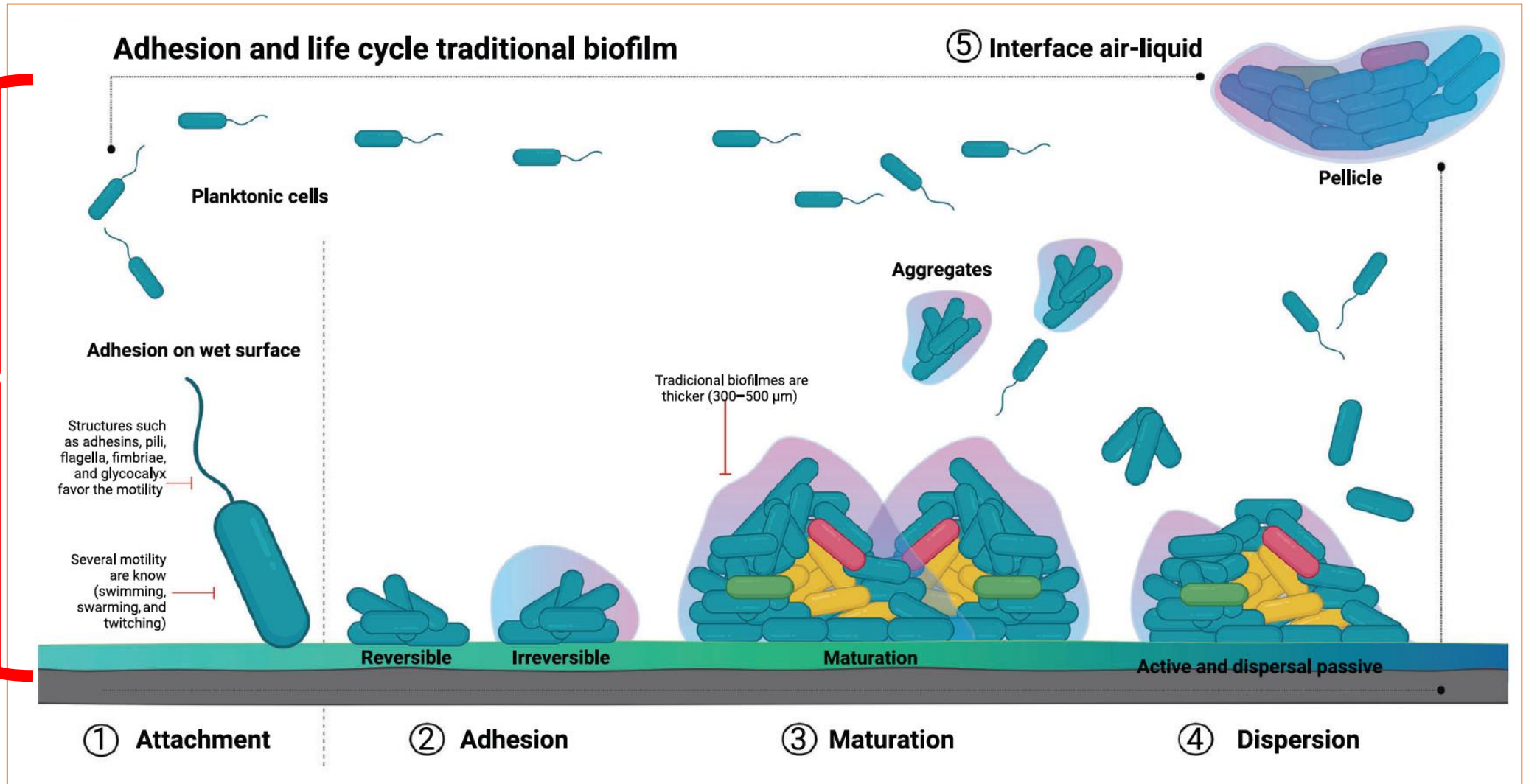
Different microorganisms have differing ability to survive in planktonic form on environmental surfaces

Spore forms; survive for years

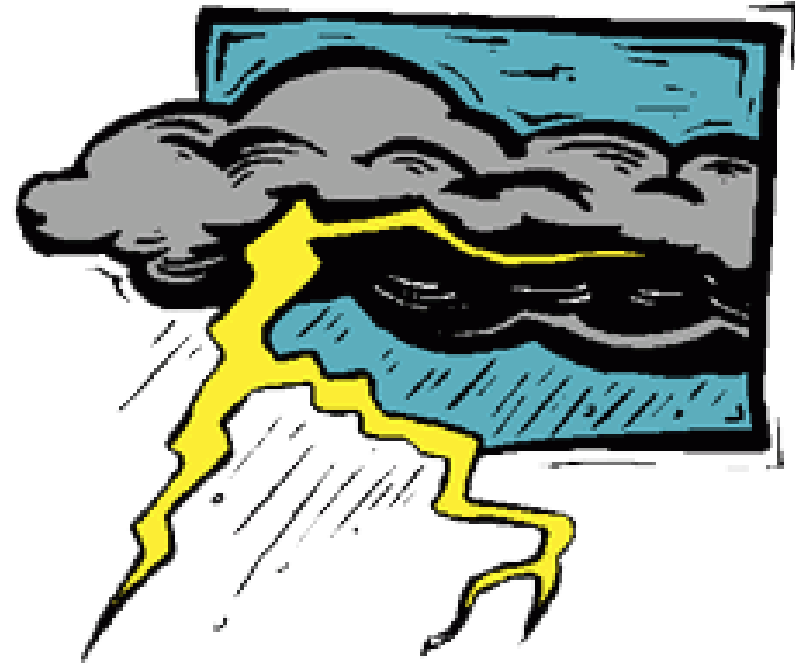
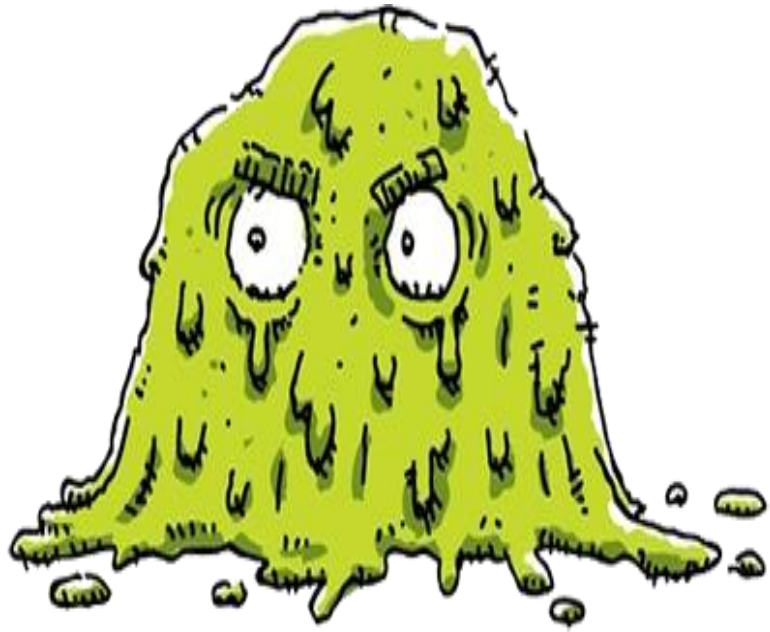
Espinal P et al Effect of biofilm formation on the survival of *Acinetobacter baumannii* on dry surfaces. J Hosp Infection 2012 <http://dx.doi.org/10.1016/j.jhin.2011.08.013>

TRADITIONAL BIOFILM

Bathed
in liquid
Flow

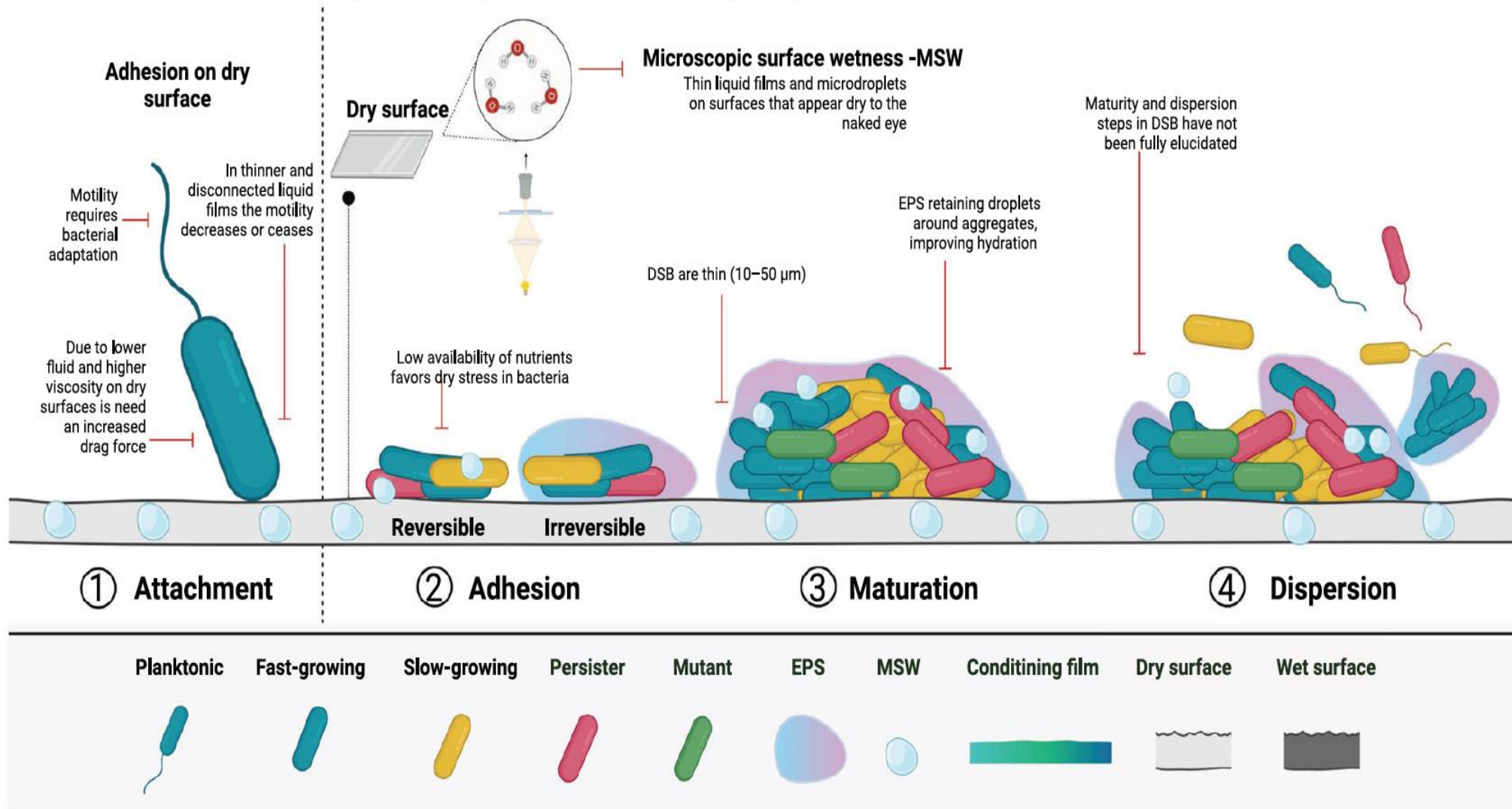


What more can happen.....?



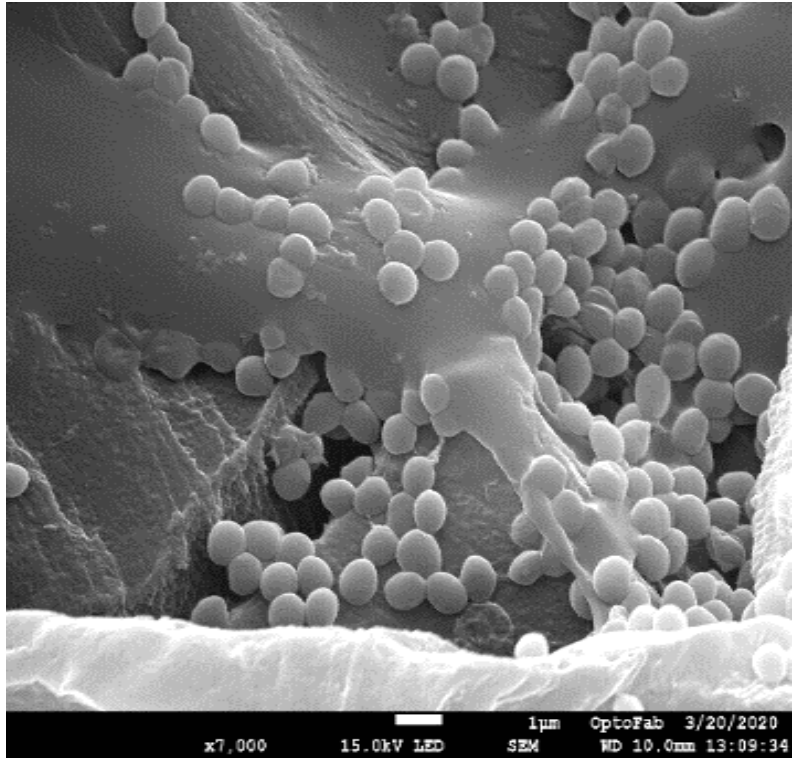
DRY SURFACE BIOFILM

Adhesion and life cycle of dry surface biofilm (DSB)



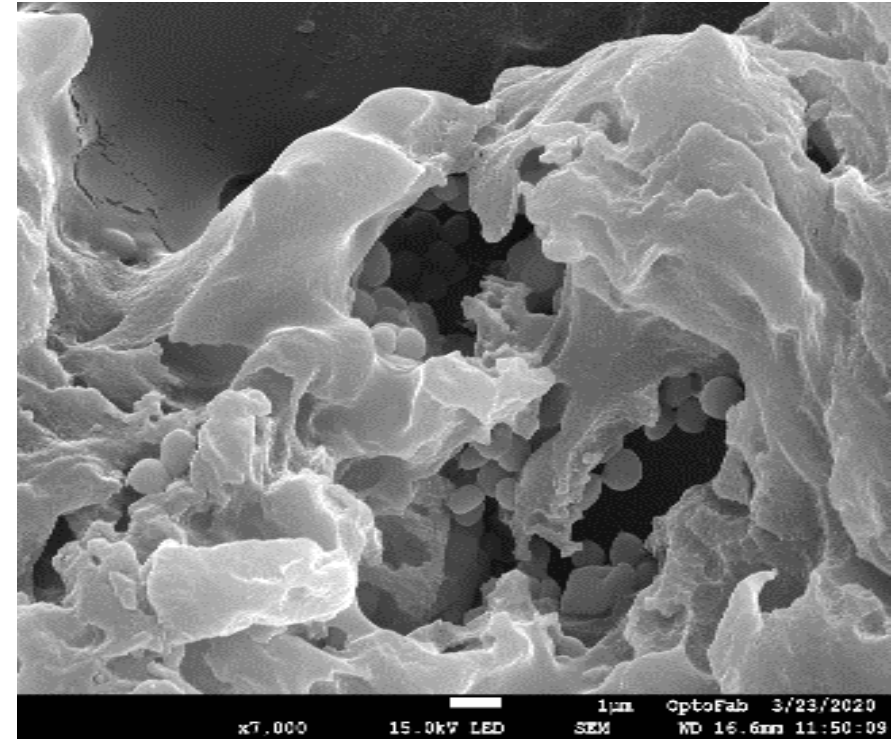
Alonso V. Dry surface biofilms in the food processing industry: An overview on surface characteristics, adhesion and biofilm formation, detection of biofilms, and dry sanitization methods. Compr Rev Food Sci Food Saf.2023;22:688–713

Staphylococcus aureus Biofilm versus Dry Surface biofilm??



12 Day hydrated Biofilm

Continuous hydration

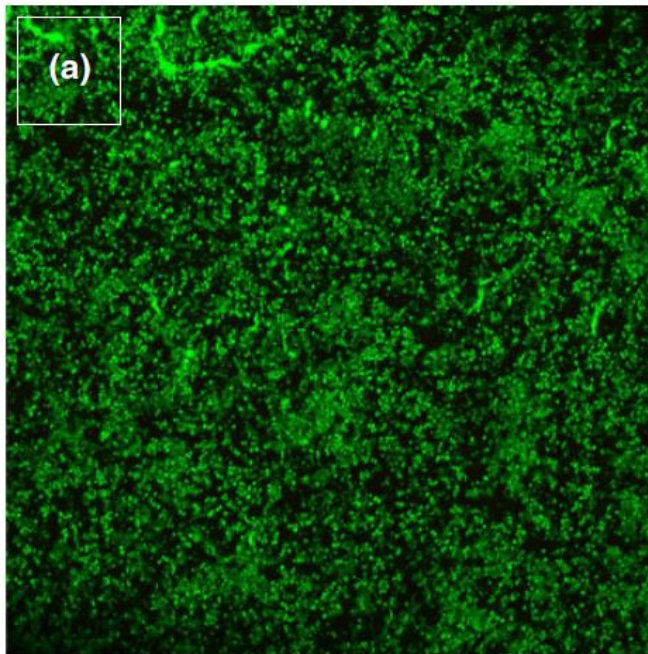


12 Day Dry Surface Biofilm

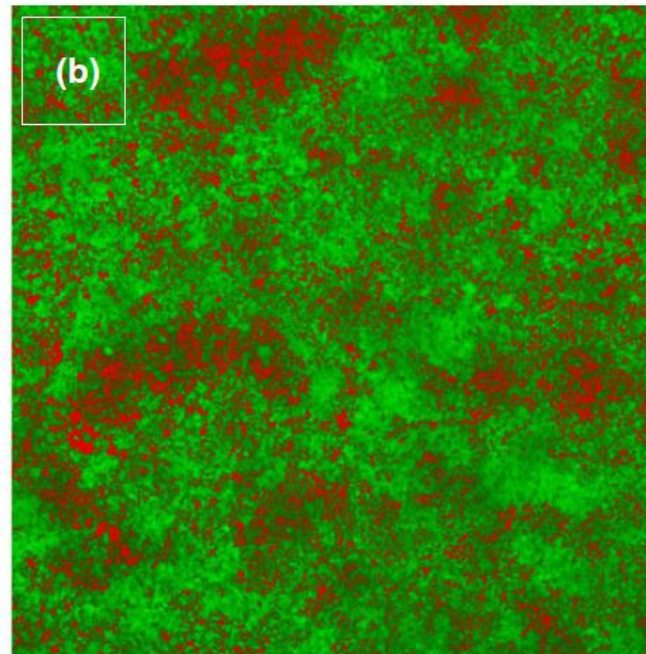
Repeated rounds of hydration and dehydration

Dry Surface Biofilm Model: *S. aureus*

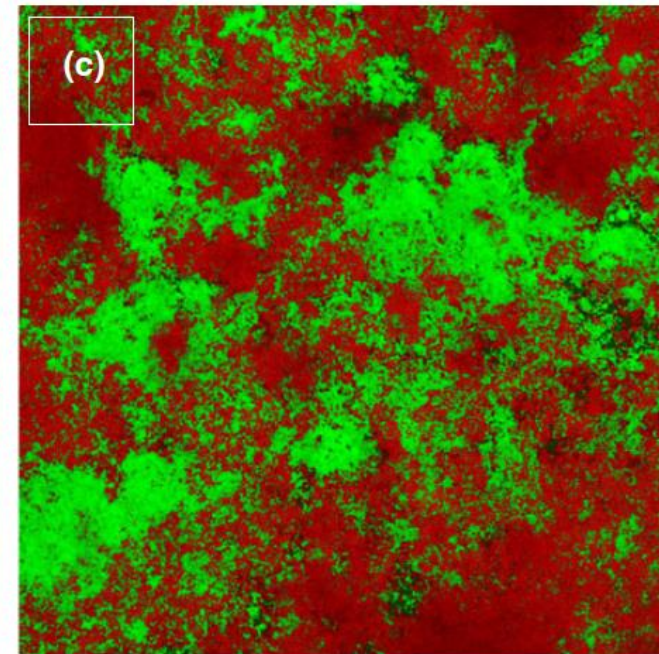
Three cycles of Hydration 2 days followed by Drying 2 days



4 days



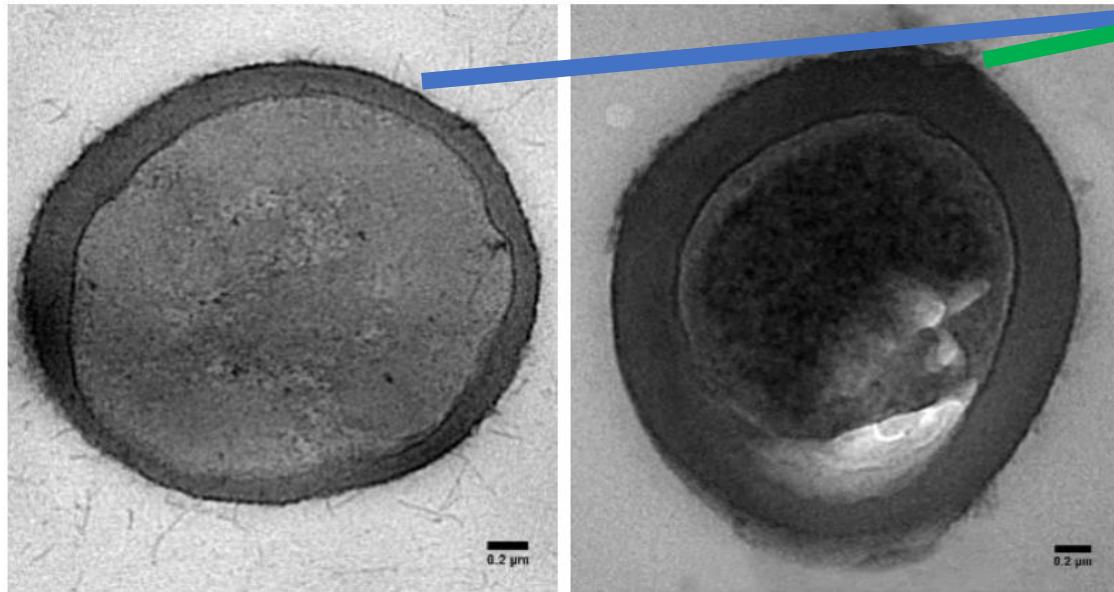
8 days



12 days

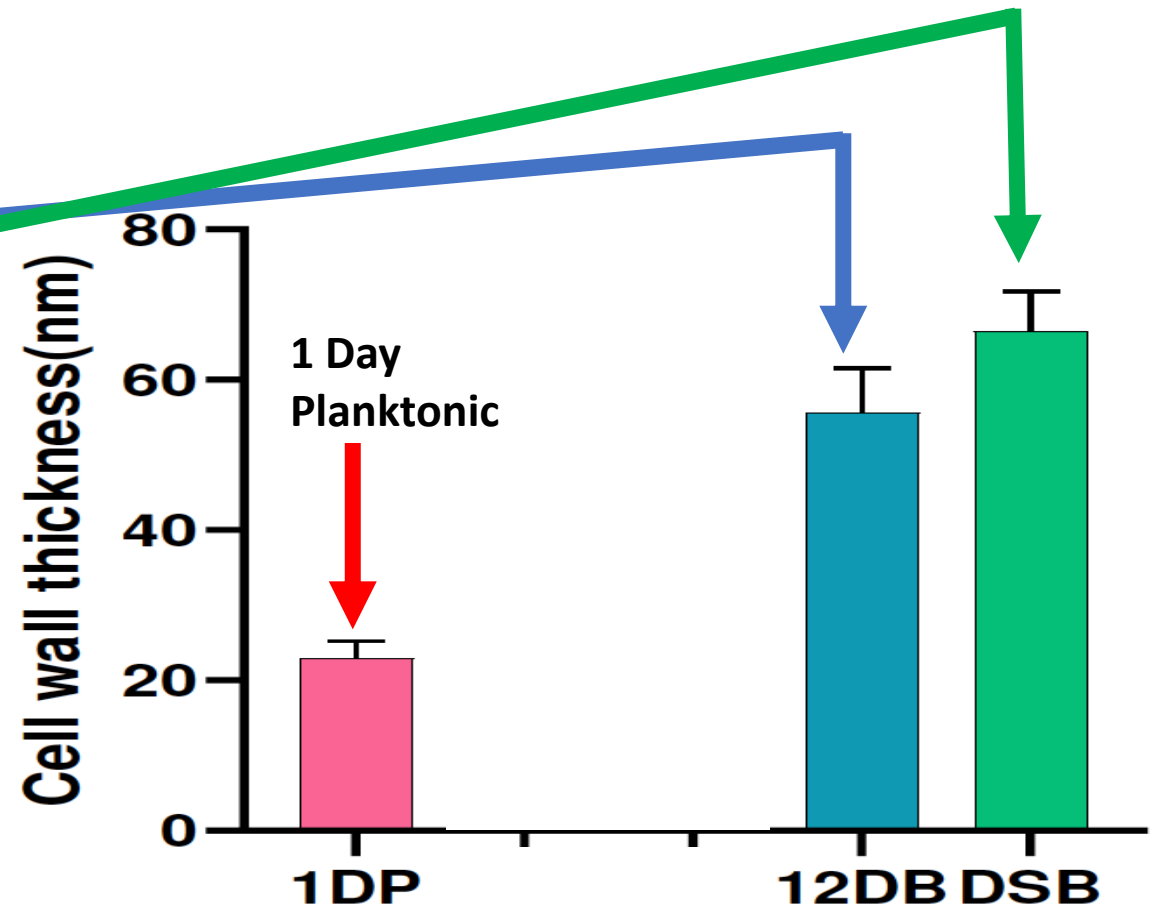
Live-Dead Stain: **GREEN:** Live *Staphylococcus aureus*
RED: Dead *Staphylococcus aureus*

Staphylococcus aureus cell wall in Traditional Biofilm versus Dry Surface Biofilm

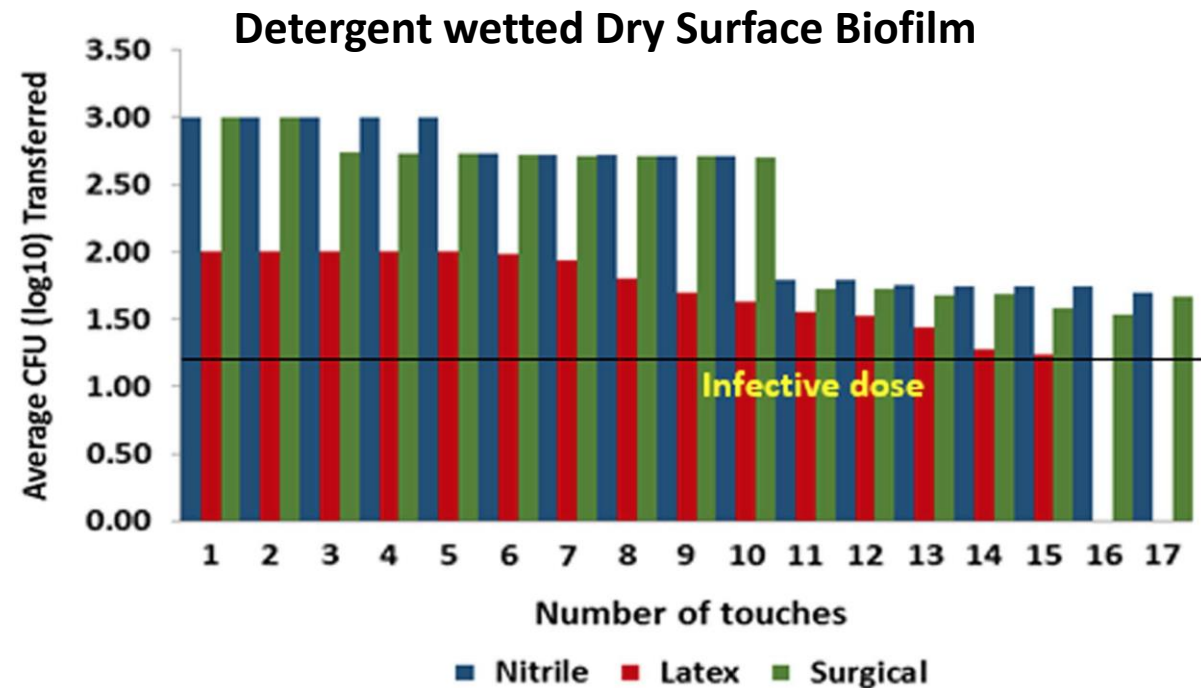
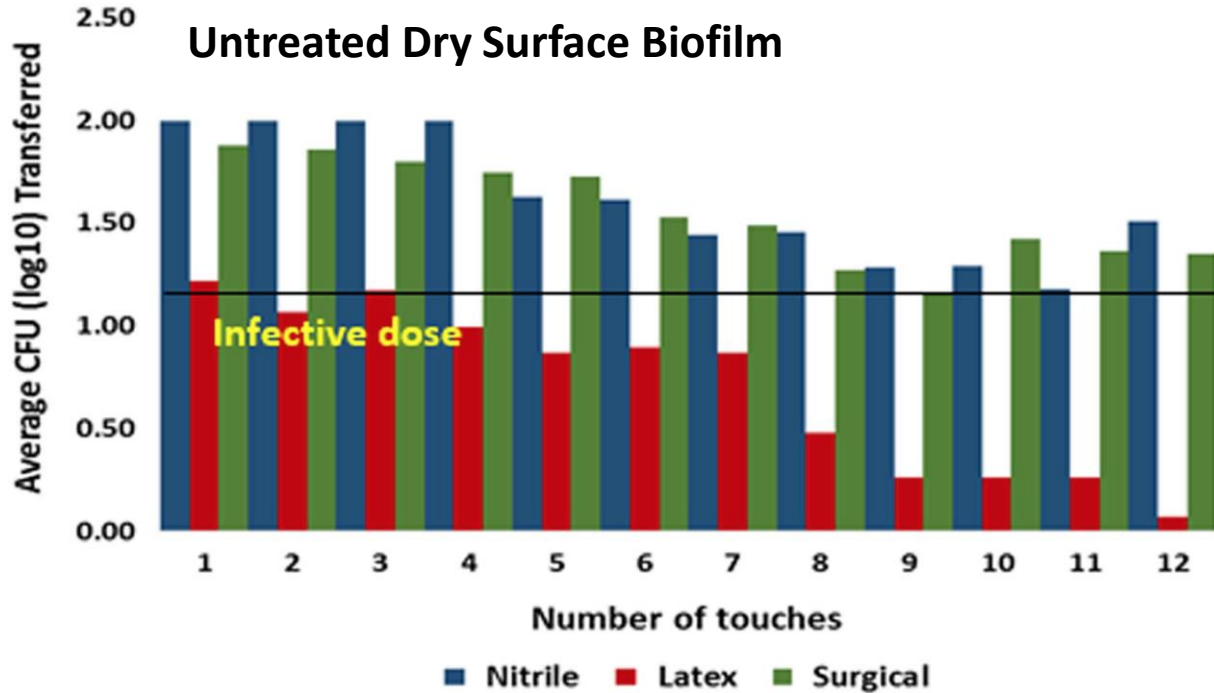


12 day Biofilm

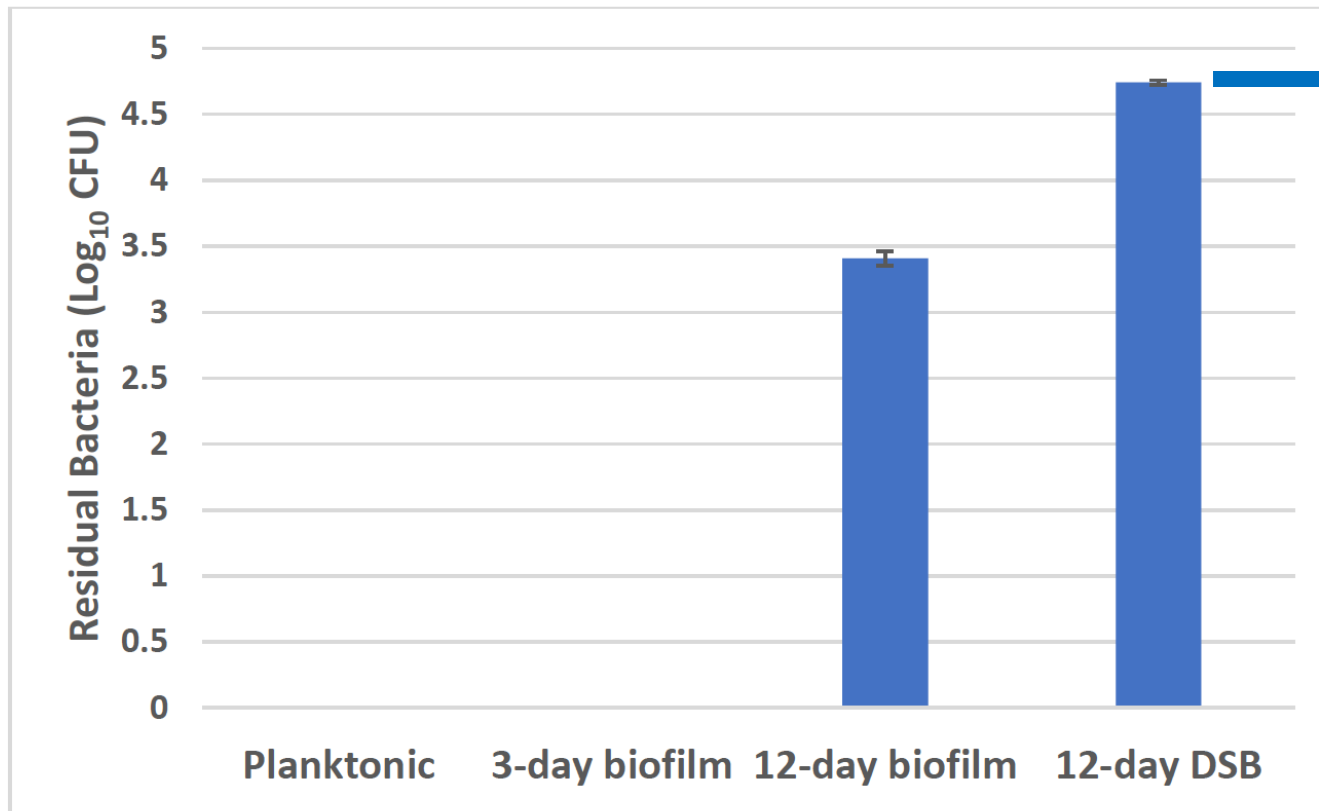
12 day Dry Surface Biofilm



Transmission of *S. aureus* from Dry Surface Biofilm by gloved hand contact



Difficult to eradicate *S. aureus* in Dry Surface Biofilm using Bleach (5 min contact time)



Eradication of 12-day DSB only achieved with 5000 ppm Bleach, 5 min contact time

1000 ppm Chlorine on planktonic vs biofilm vs Dry Surface Biofilm (DSB)

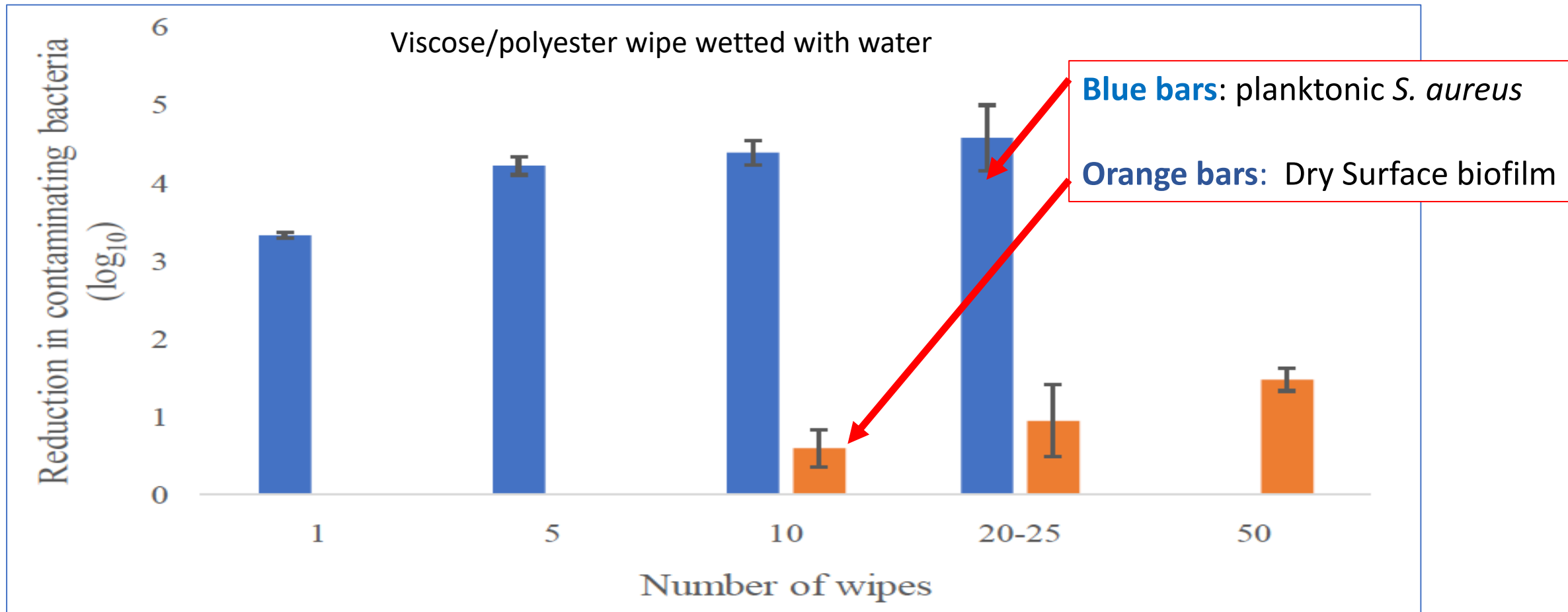
Impact of linear wiping action on different growth cultures of *Staphylococcus aureus*



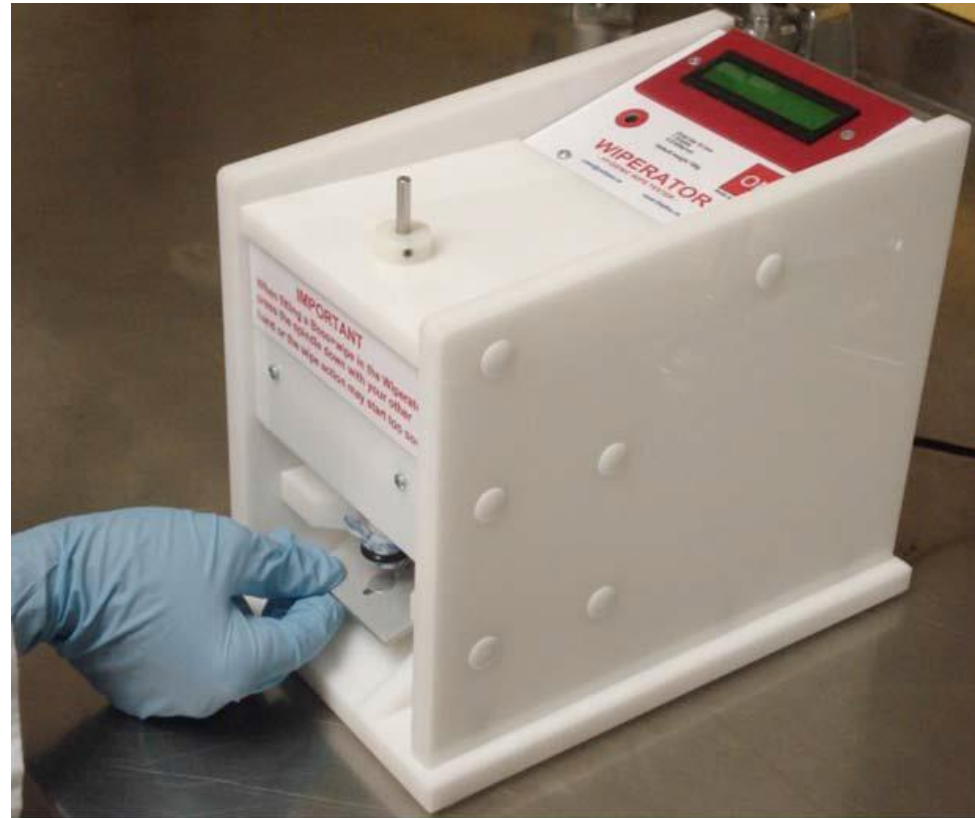
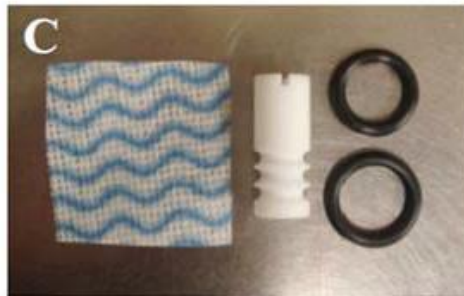
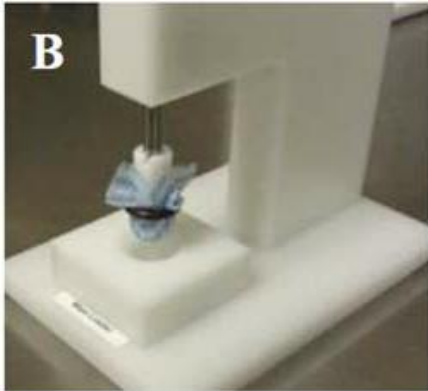
Abrasion Tester

- Scrub testing device with a mechanical arm, set at 1000 g downward pressure (equivalent to 28 g/cm²)
- 60 cm/second in a linear motion
- Provides a linear two-way wiping process
(Elcometer 1720 Abrasion Tester, Phillro Industries, Moorabin, Australia).

Impact of linear wiping action on different growth cultures of *Staphylococcus aureus*



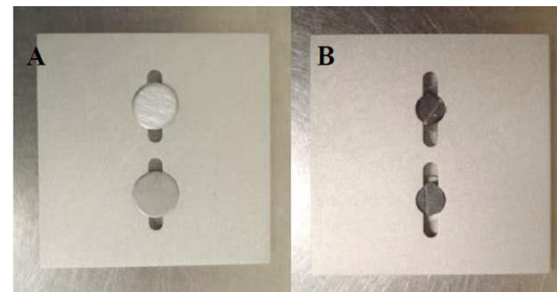
ASTM: E2967 – 15 Standard Test Method for Assessing the Ability of Pre-wetted Towelettes to Remove and Transfer Bacterial Contamination on Hard, Non-Porous Environmental Surfaces Using the Wiperator



Orbital motion:

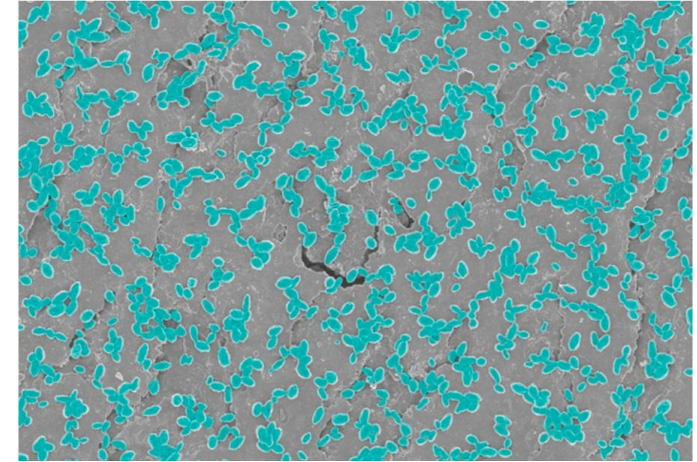
**1 orbit/second
(5 – 45 orbits total)**

150 g pressure



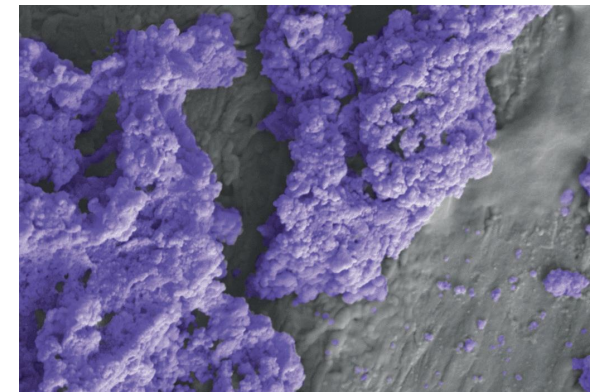
Candida auris Dry Surface Biofilm

- ASTM E2967-15: Wiperator used to determine efficacy of eleven wipe-based disinfectants
- Quaternary disinfectant not effective
- Commercial formulations of; Sodium hypochlorite 1000 ppm & Peracetic acid at 3500 ppm were most effective
 - 7 log₁₀ reduction in CFU and
 - prevented subsequent transfer of *C. auris* from the treated surface



What does this mean for Cleaning and Disinfection in Healthcare Facilities??

- **Dry surface biofilm (DSB):**
 - widespread (up to 95%) on dry surfaces in healthcare settings
 - can harbor multidrug resistant organisms
 - less susceptible to disinfection
 - after cleaning & disinfection pathogens in DSB can be transferred by direct or indirect contact (gloves)
- **Effective elimination requires:**
 - Cleaning: adequate friction
 - Effective disinfectant
 - Use of UV-C/Pulsed light technology?*



Ledwoch K, et. al. Br J Hosp Med. 2022. <https://doi.org/10.12968/hmed.2022.0274>

*Alonso V. et. al. Compr Rev Food Sci Food Saf.2023;22:688–713

SUMMARY:

- **What is Dry Surface Biofilm (DSB)?**
 - accumulated (dry) matrix containing viable organisms
- **Why is it important?**
 - current cleaning & disinfection methods not as effective against organisms embedded in DSB
- **What can be done to improve surface cleaning & disinfection in Healthcare?**
 - Friction is crucial for physical removal of DSB
 - Use an effective disinfectant that prevents transfer post exposure
 - Cleaning plus UV-C or Pulsed light disinfection??

REFERENCES

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5. Tahir S et. al. Transmission of *Staphylococcus aureus* from dry surface biofilm (DSB) via different types of gloves. Infection Control & Hospital Epidemiology 2019, 40, 60–64. doi: 10.1017/ice.2018.285
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7. Ledwoch K, Vickery K, Maillard J-Y. Dry surface biofilms: what you need to know. Br J Hosp Med. 2022. <https://doi.org/10.12968/hmed.2022.0274>