

Indoor study on fine particulates, mould and damp in vulnerable Welsh homes

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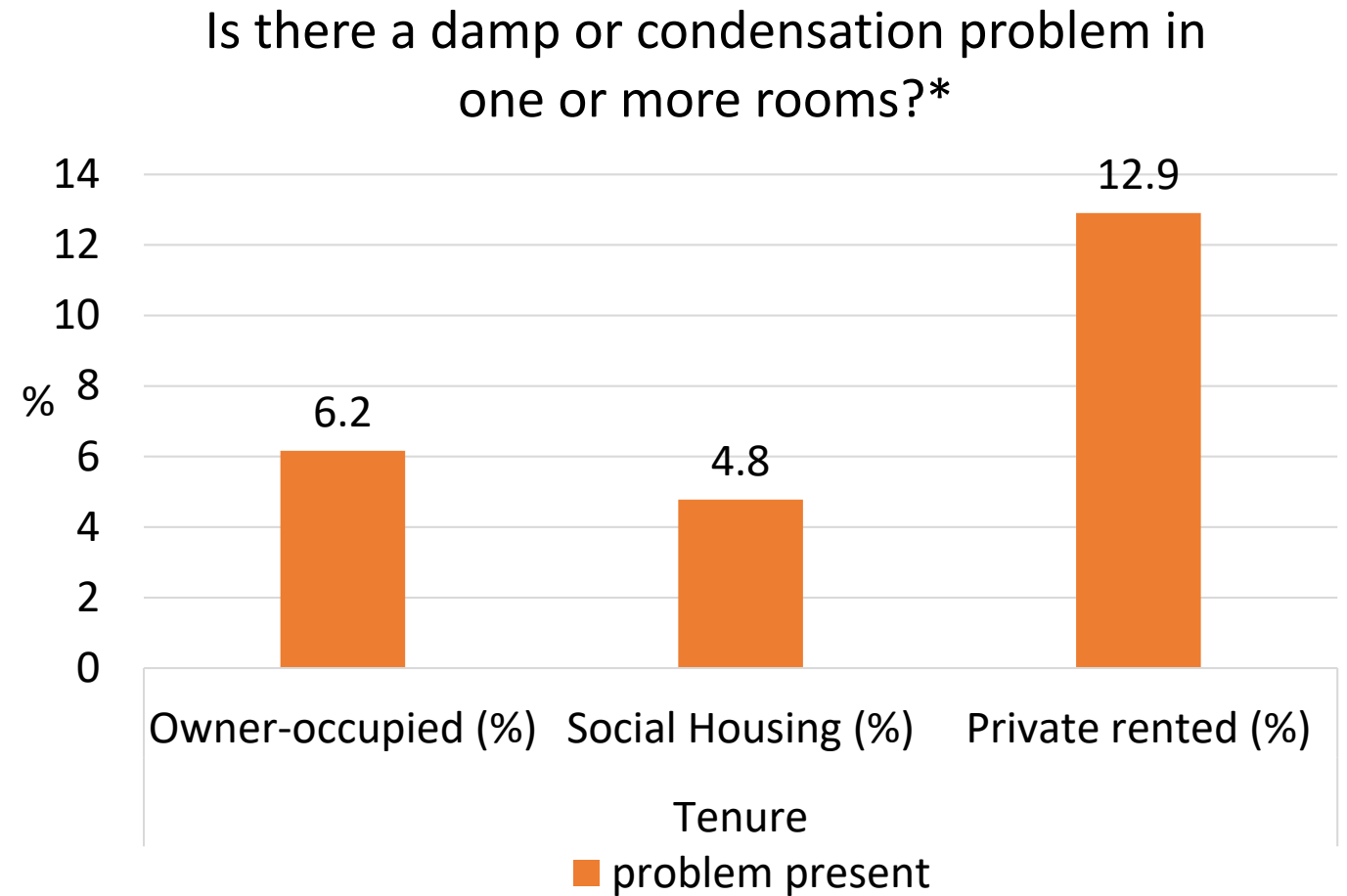


The vulnerable group - Cystic Fibrosis patient

- Cystic Fibrosis (CF) is the most common inherited diseases. More than 59% of CF patients are sensitive to **fungal spores**, mostly *Aspergillus fumigatus*
- Average survival in the UK is 41 years (Cystic fibrosis Registry)
- Average annual cost for a CF patient in the UK was €48,603 in 2012, including 57% for non-health care and indirect costs (<https://doi.org/10.1186/s12913-015-1061-3>)
- Respiratory disease costs £11.1 billion each year (2014, 0.6% UK GDP) (British Lung Foundation)
- Damp and mould are more likely to cause respiratory problems
- **Will improved indoor environment potentially reduce mould/damp and reduce the exposure to fungus?**

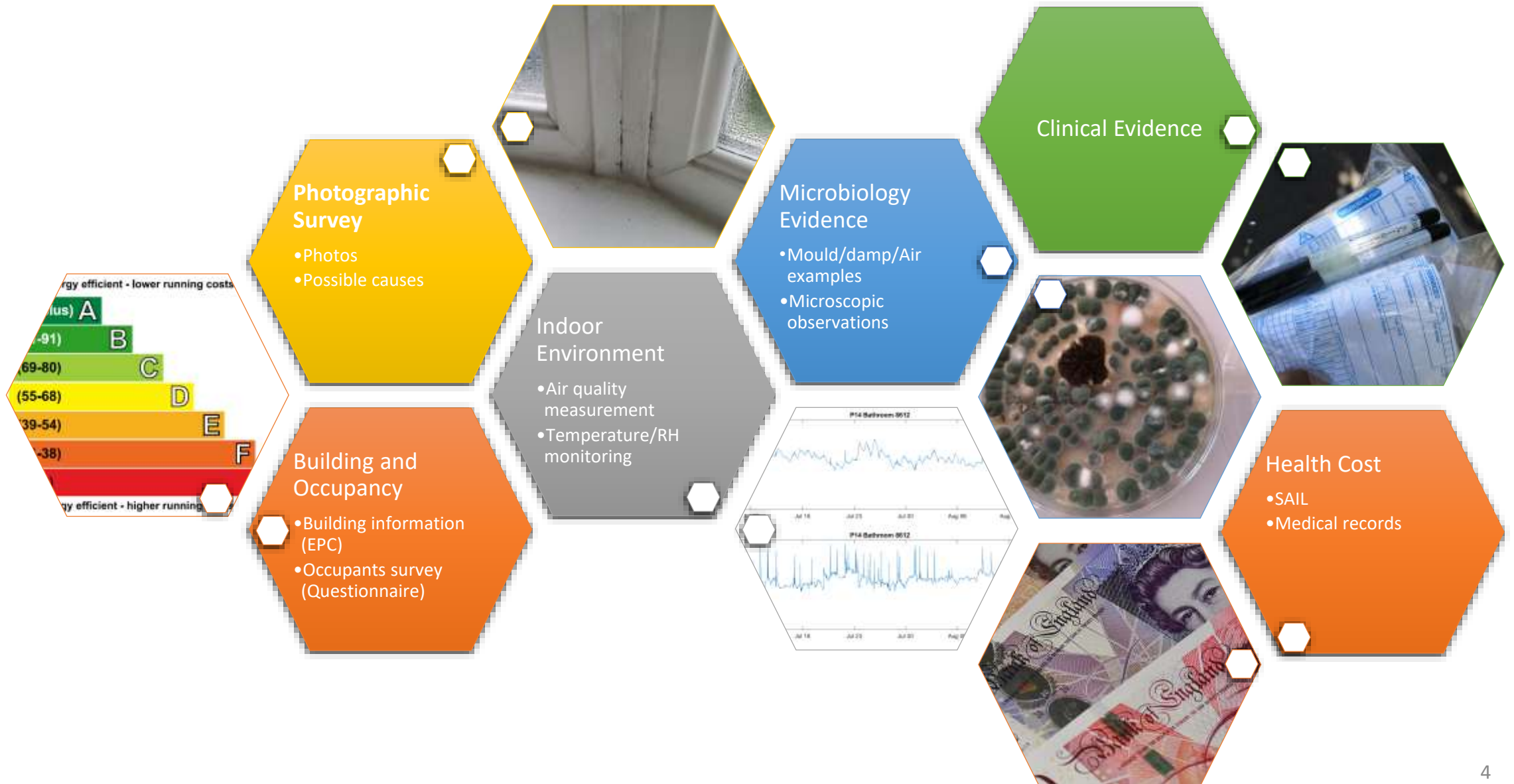
Damp and mould - a common problem in Wales

- Welsh Housing Conditions Survey 2017-18: 7% of homes have a damp or condensation
- English Housing Survey: 4% of homes (897,000 dwellings) had problems with damp (via physical survey)
- Around 7.0 million (30%) households reported an issue with condensation, damp or mould (EHS 2017)



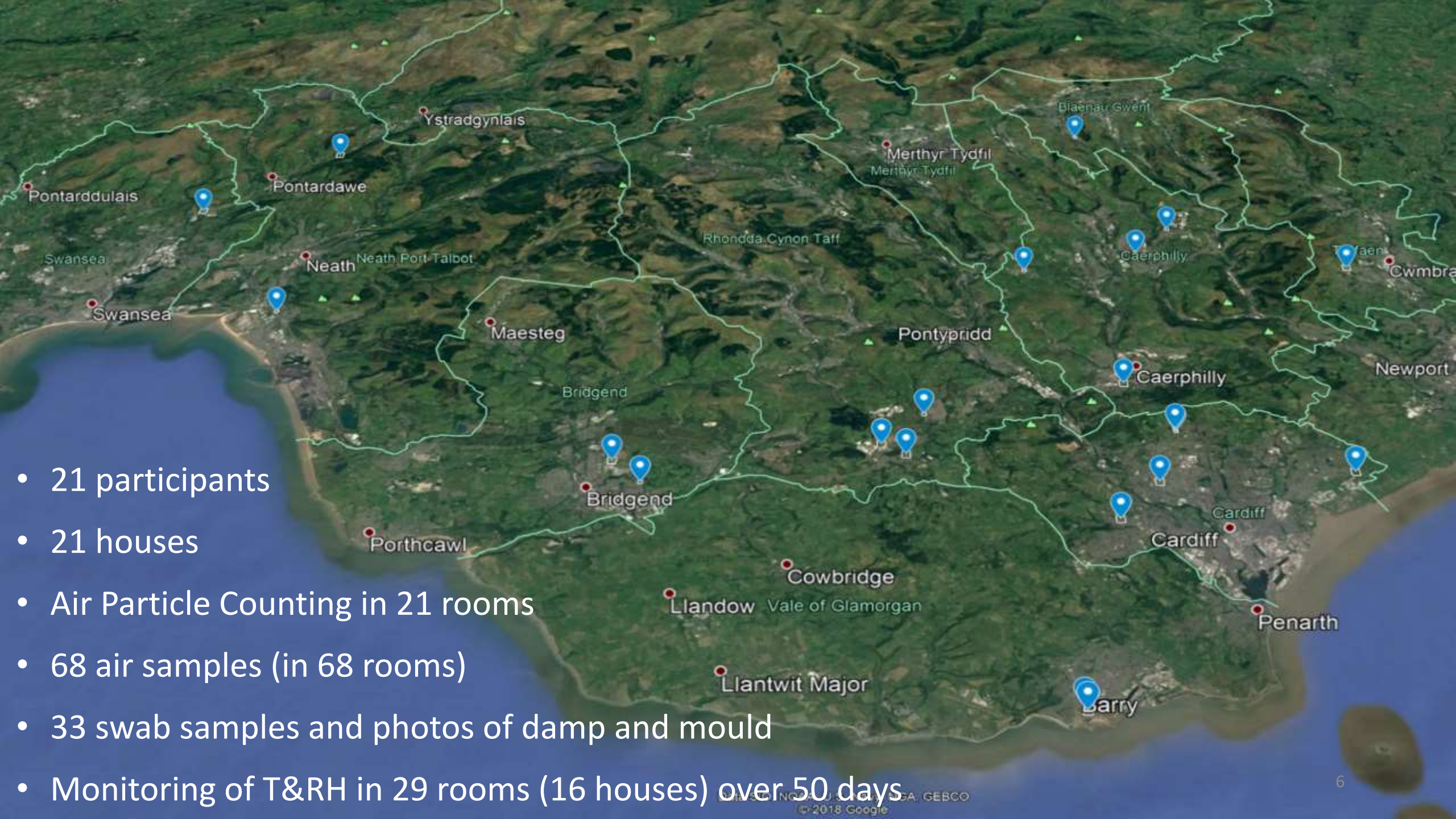
*Source: National Survey for Wales, 2017-18. Sample size: 2,550

The multidisciplinary approach



Project Timeline

- **Award letter** (10/2017)
- Project starts (12/2017)
- Grant joint award agreement (03/2018)
- SAIL IGRP approval (05/2018)
- Sponsor Approval (07/2018)
- IRAS ethical approval (10/2018)
- HRA and HCRW Approval (11/2018)
- Capacity and capability assessment(02/2019)
- DBS checks (01/2019)
- Occupational health check (01/2019)
- Material transfer agreement (02/2019)
- Letter of Access (02/2019)
- Portfolio listing (03/2019)
- Amendment for extension (04/2019)
- Recruitment (04/2019-10/2019)
- **Field visits and data collection** (06/2019-11/2019)
- **Data analysis** (12/2019-01/2020)
- Project event (01/2020)
- **Final report to the funder** (02/2020)
- Publications (03/2020 onward)



- 21 participants
- 21 houses
- Air Particle Counting in 21 rooms
- 68 air samples (in 68 rooms)
- 33 swab samples and photos of damp and mould
- Monitoring of T&RH in 29 rooms (16 houses) over 50 days

Cystic Fibrosis patient Cost Analysis

In 2017

Total cost of 21 patients **£558,339***

On average **£26,588***

***Direct health care costs** from SAIL database only, not include nurse consultations, out-of-hour service, pathology tests (blood, urine..), non-GP prescriptions, admission costs, non-health care and indirect costs

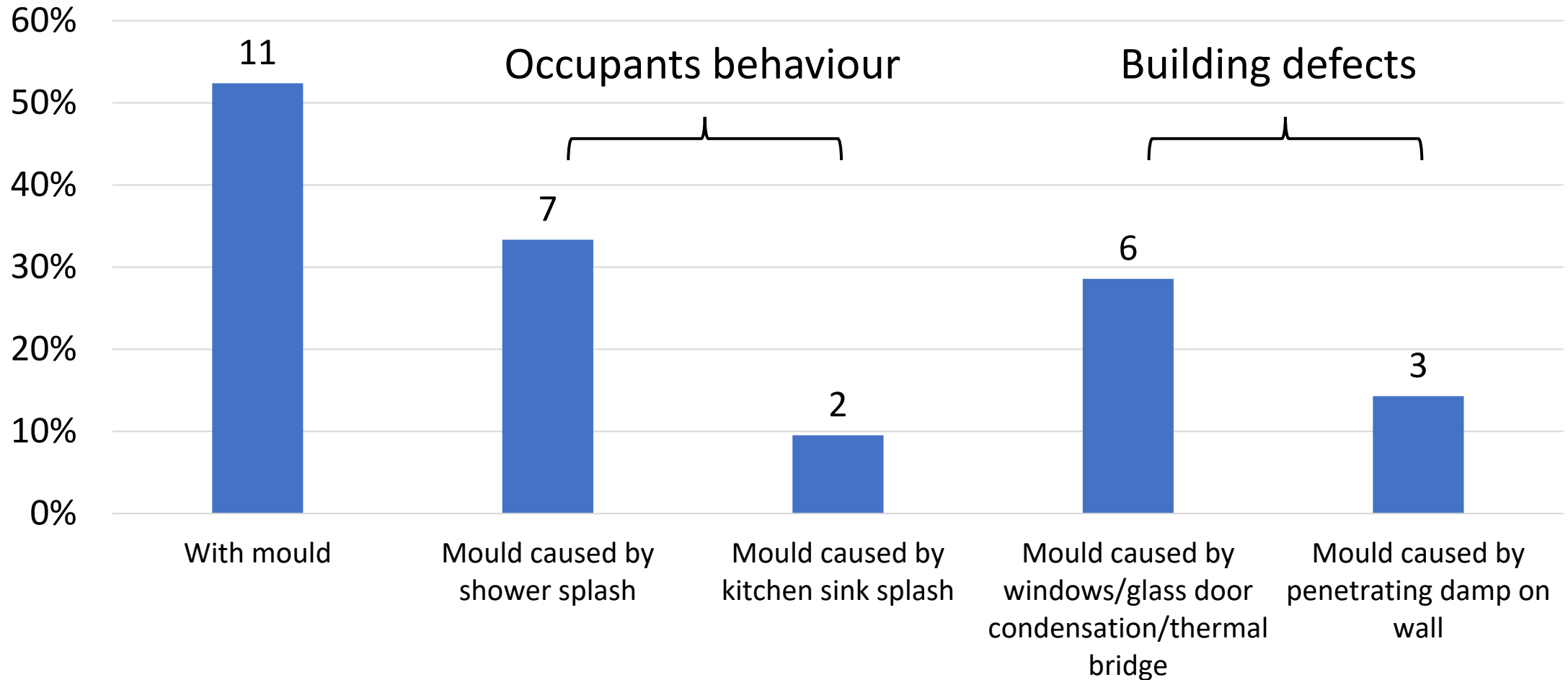
Band	Costing of patient care	Number of recruited patients (21 in total)	Weighted average cost
1	£2418.93	2	
2	£7325.01	8	
3	£15252.34	8	£13,704.37
4	£34111.68	3	
5	£49915.22	0	

Cost of preventing mould and damp

Measures	Costs
<ul style="list-style-type: none">• Replace/repair building defects (windows/wall/roof)	High £2k and above
<ul style="list-style-type: none">• Clean or repair roof gutters• Mould-resistant paints• Installation of high-end dehumidifier• Installation of ventilation unit with humidity sensor	Medium £2k to £200
<ul style="list-style-type: none">• Display/monitor humidity indoors• Mop/dry wet surface/floor• Open windows to improve air flow when necessary• Keep mould off household plants• Installation of dehumidifier for mould• Regular cleaning	Low/none £200 and below

Damp and mould - results from our visits

Percentage and number of houses with mould (out of 21 houses)



Over 50% of houses have mould, significantly higher than 30% from EHS.

Damp and Energy Performance Certificates (EPC)

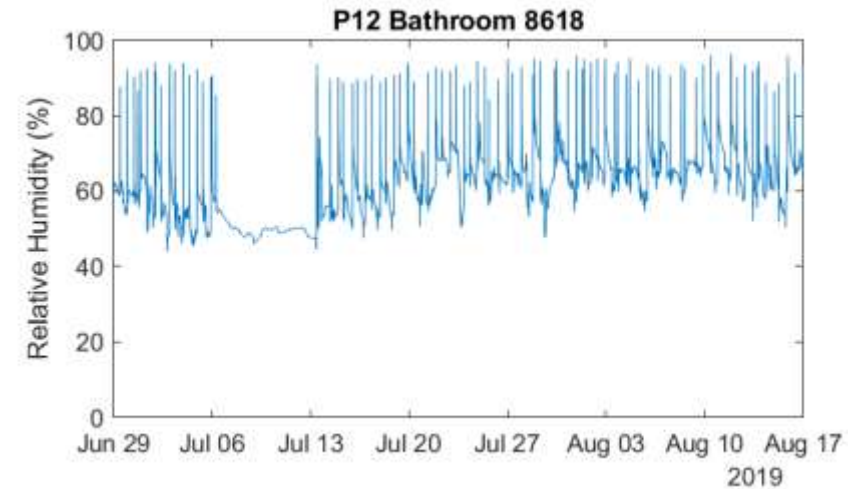
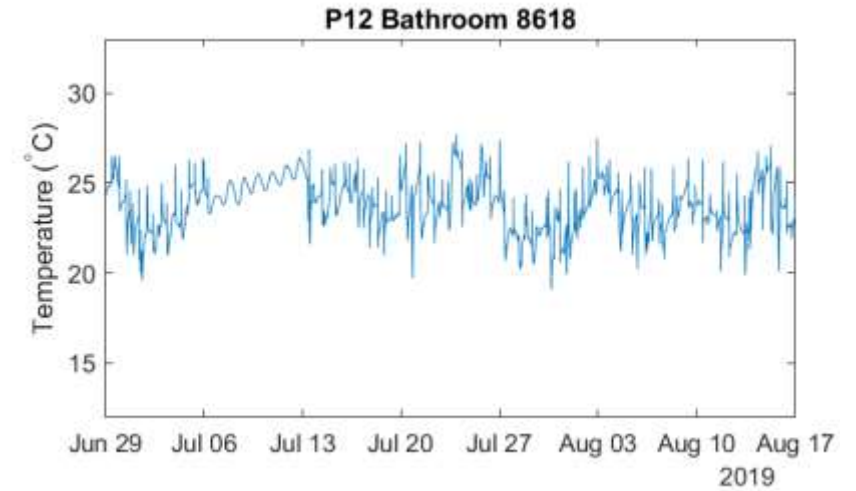
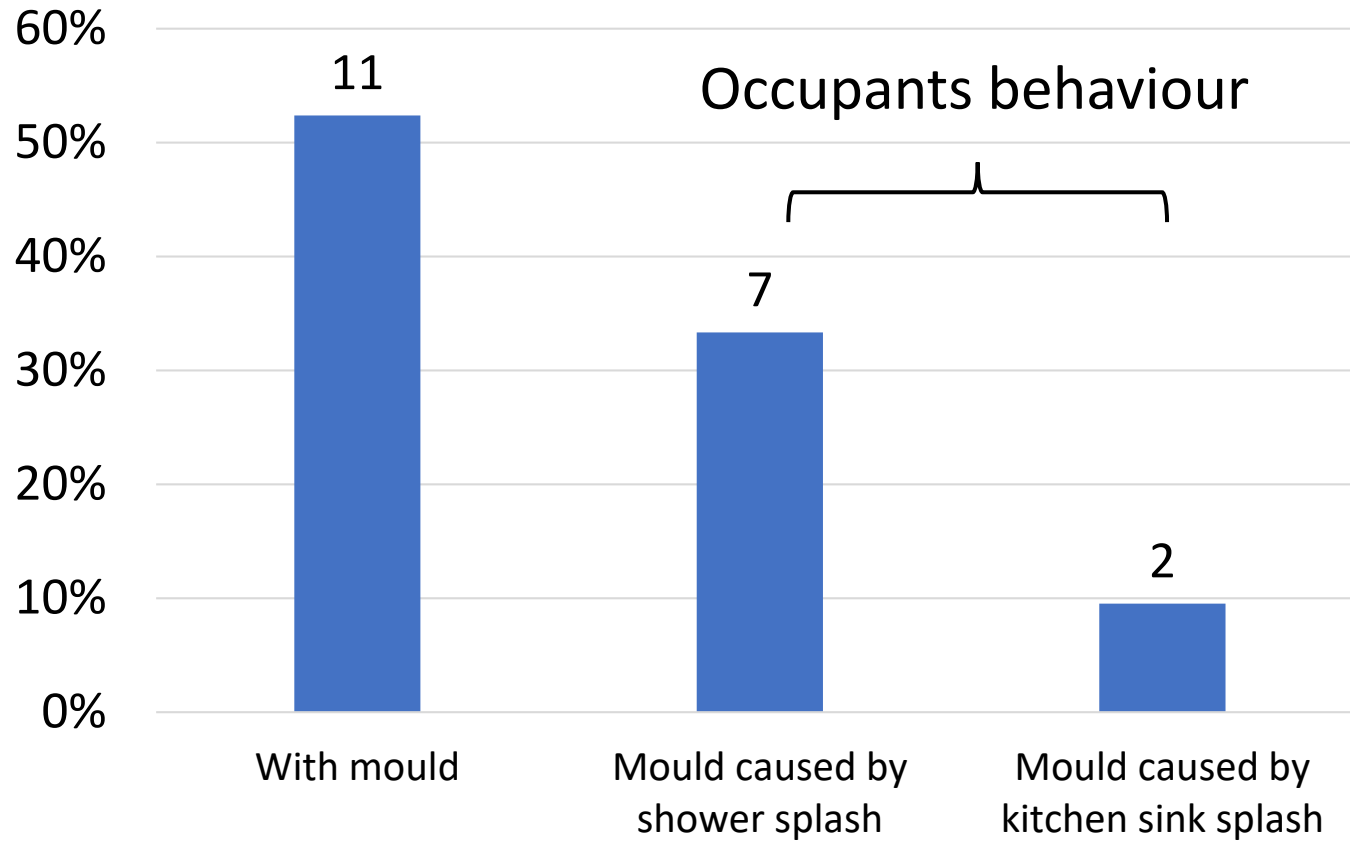


The lower EPC rating, more likely to have damp due to building envelope defects.

EPC Grade	EPC rating	Damp due to building envelope
B	86	
	82	
	82	
C	80	
	74	
	72	Y
	72	Y
	71	Y
D	71 (10 yrs ago)	
	68	
	68	
	63	
	59	Y
	58	Y
E	57	Y
	43 (10 yrs ago)	

Damp and mould - results from our visits

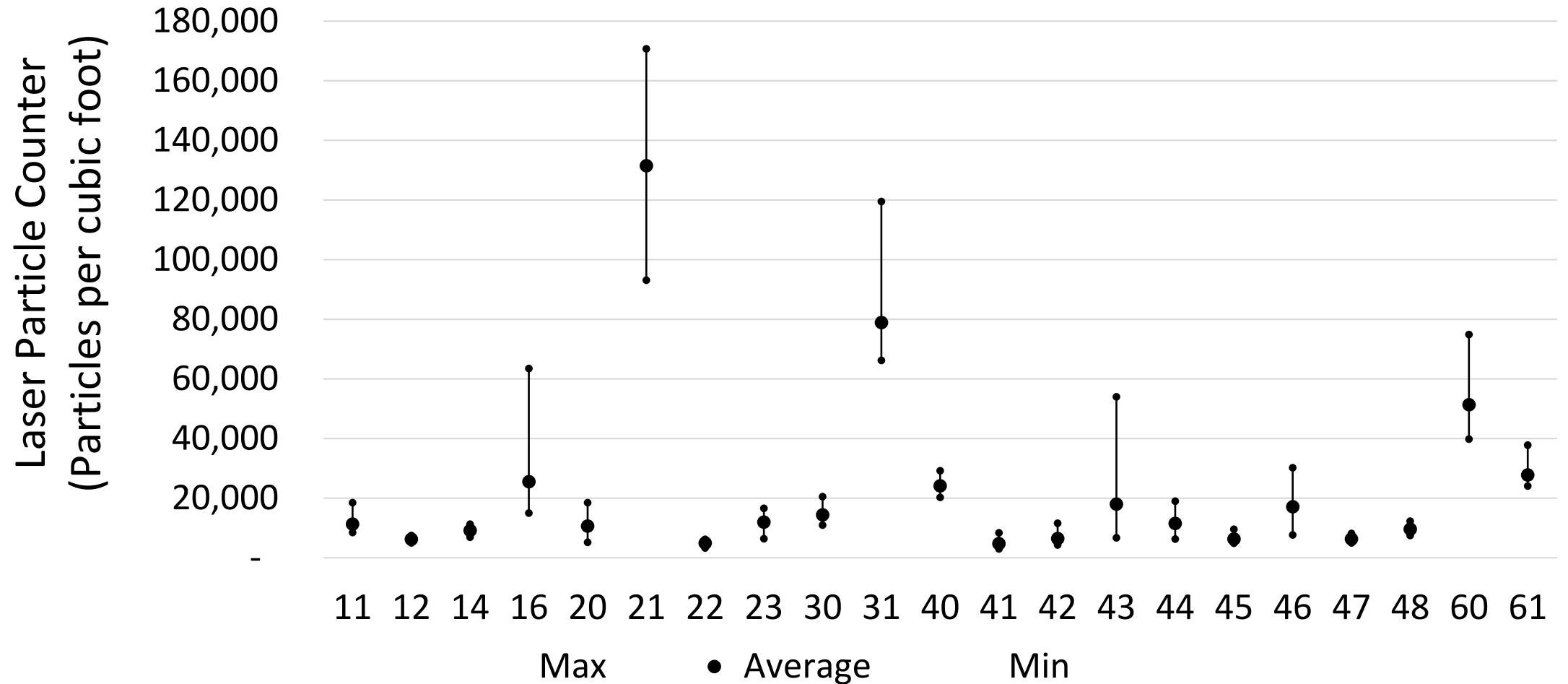
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Air quality monitoring

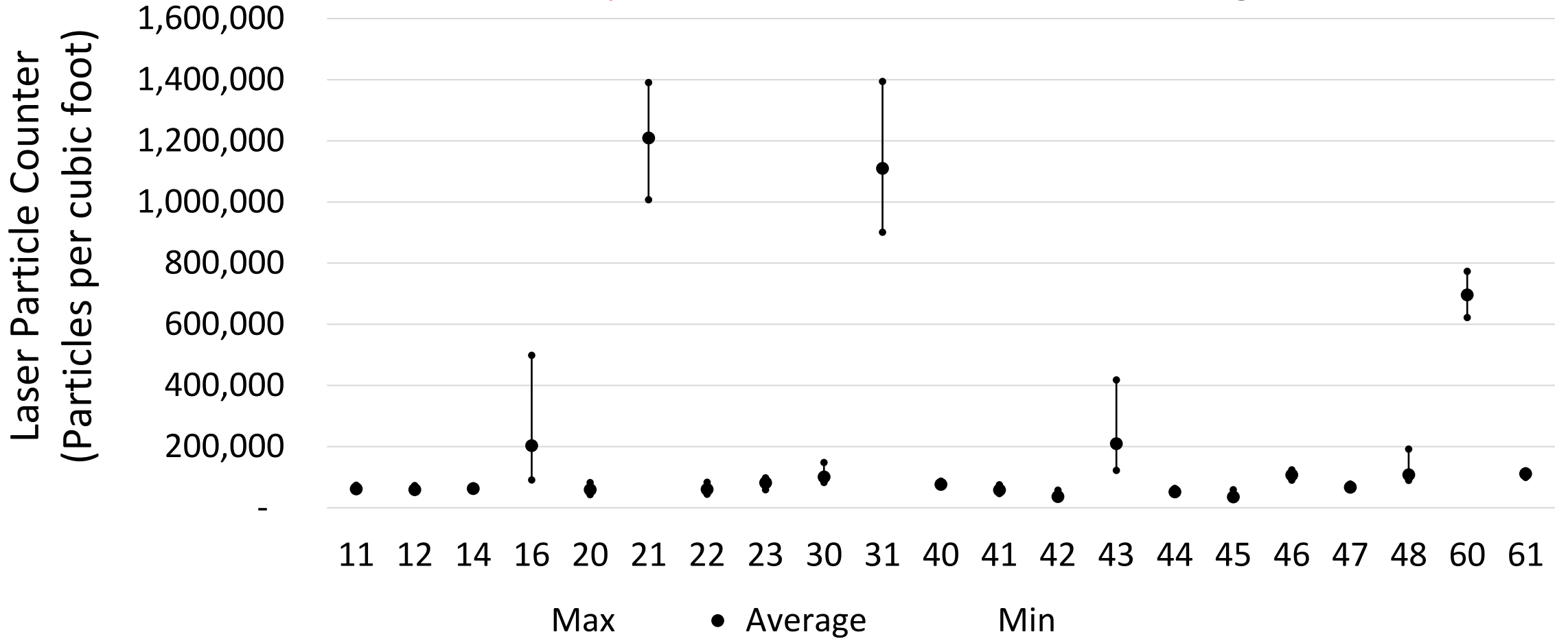
Large particles (pollen, etc) during the visits



16, 21, 31, 43 and 60 have higher values than others

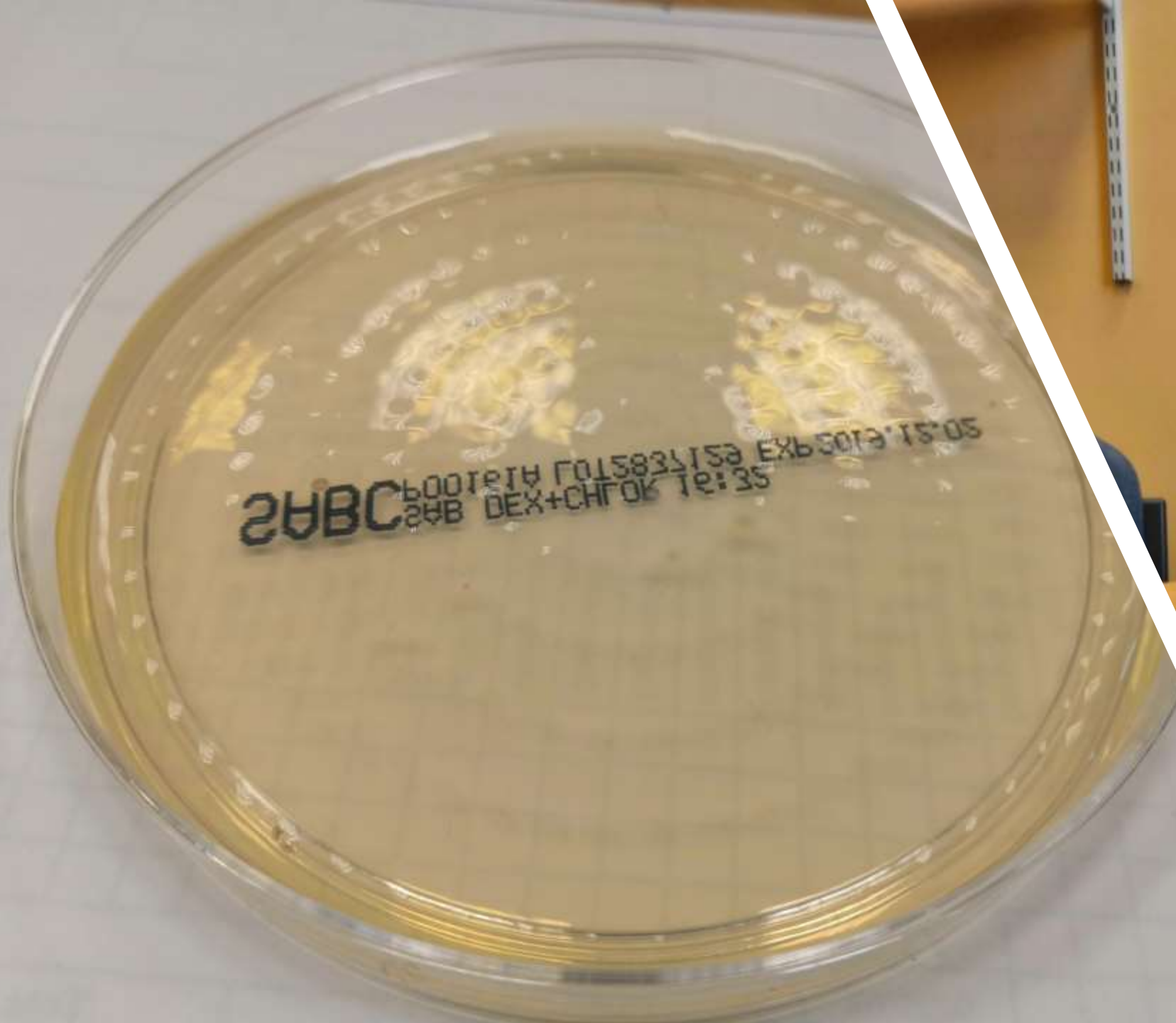
Air quality monitoring

Small particles (bacteria, mold, etc) during the visits

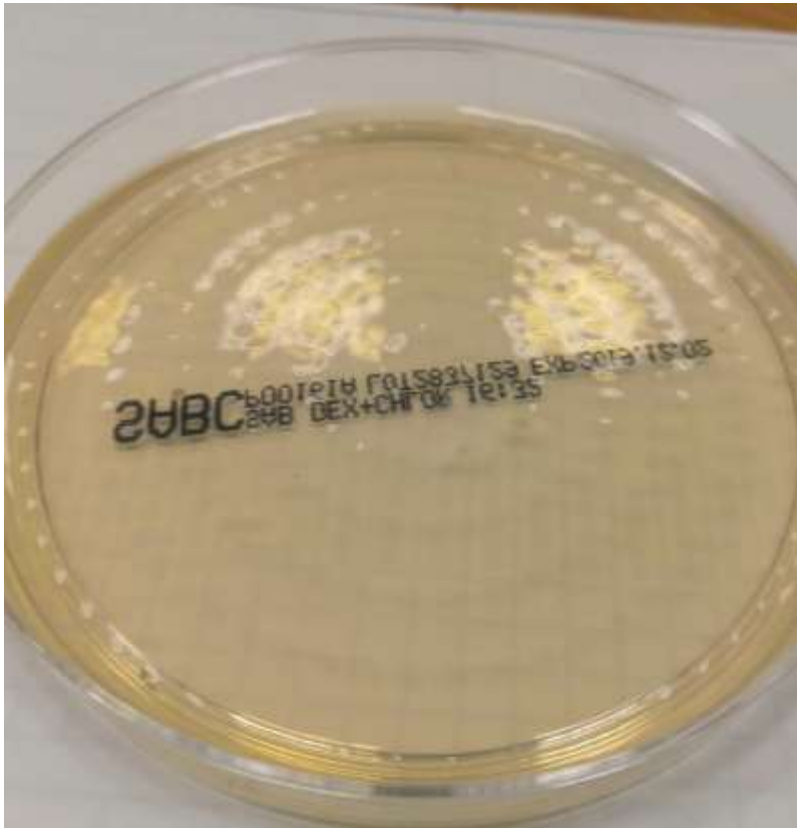


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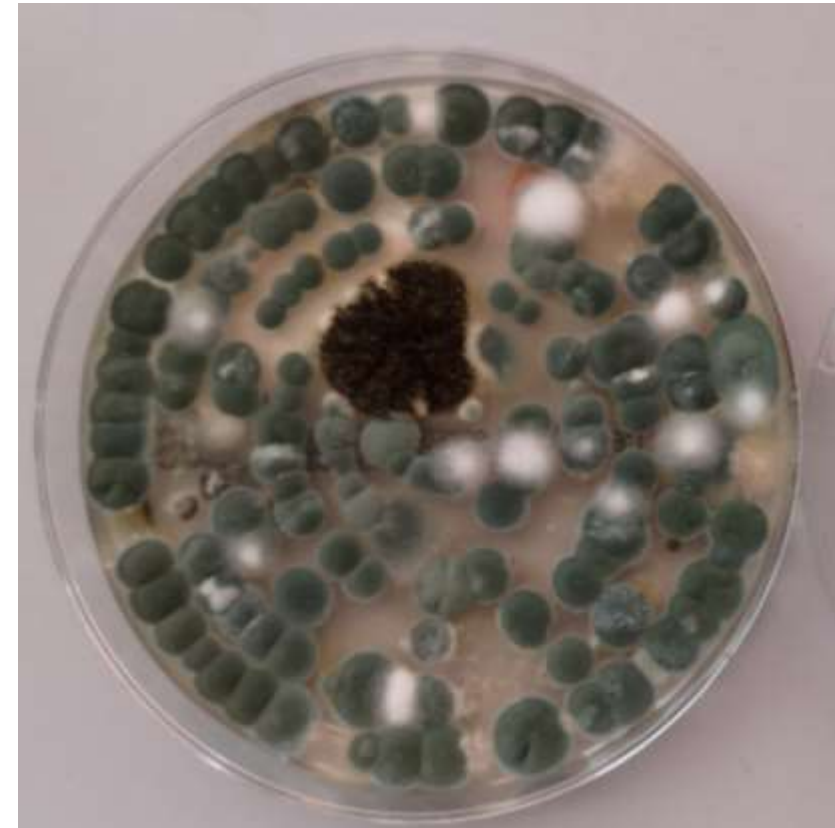




At Collection



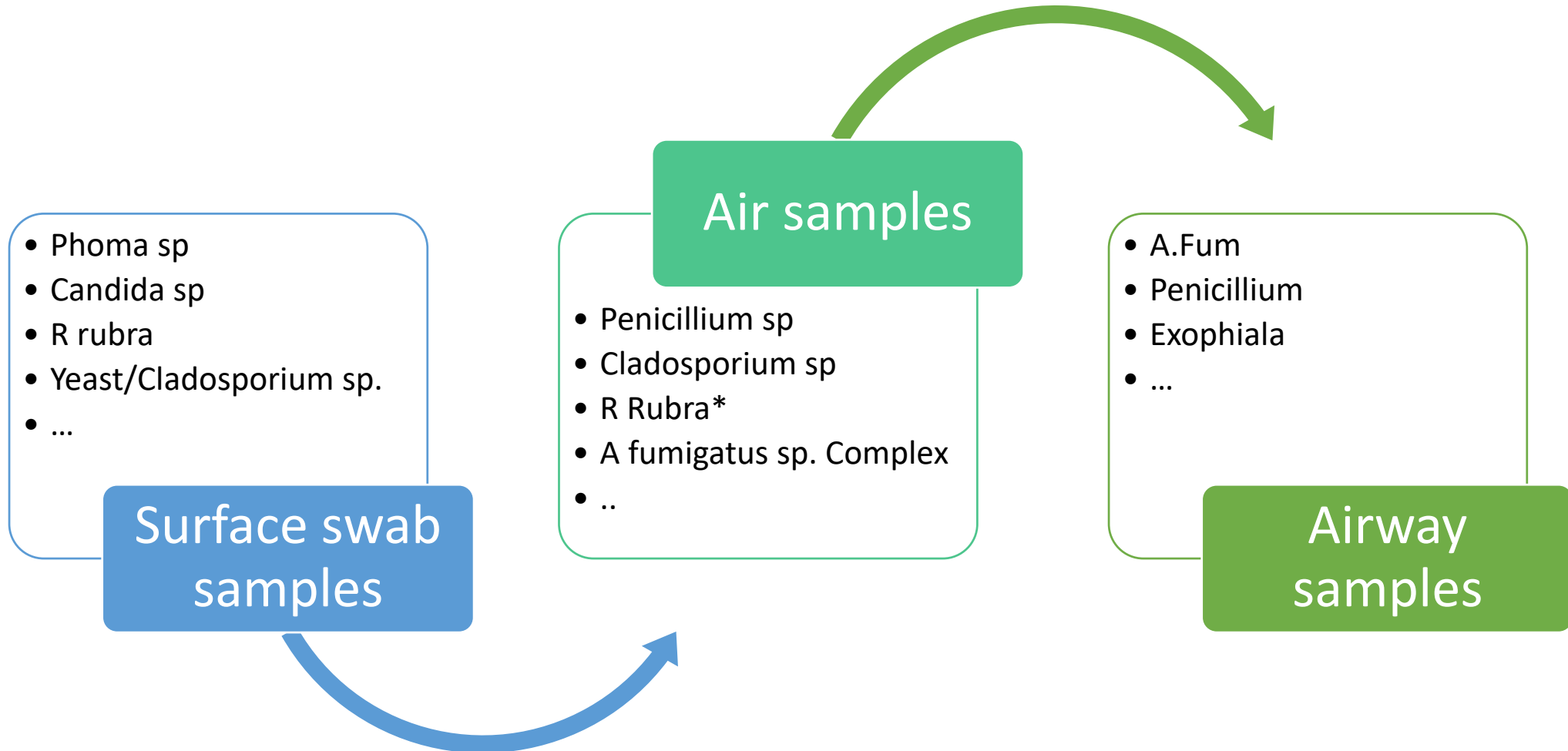
At 48 hours



At 72 hours



Fungi grow and clinical test results



Mould/damp swab and agar plates results



	Air samples	Swab samples
Total number of samples taken	68	33
Total number of organisms isolated	229	90
Predominant organism isolated	Penicillium sp.	No

- All samples contained **more than one** organism; some have seven to eight different organisms according to phenotype study.
- **Penicillium sp.** and **Aspergillus fumigatus sp.** complex were the only isolates that were isolated from both air and swab samples.
- **Both** of them are prolific spore producers and have been **implicated** in either human allergic response or disease.

Final thoughts

- This study has a small number of participants
- It is a descriptive study
- No intervention
- Fungal presence as an indicator of building performance
- Fungi linked to relative humidity (should be below 75%)
- What is the acceptable airborne spores levels at ...
 - home setting (e.g. 500 Colony Forming Units cfu/m³ when dry)
 - Vs. the clinically setting (<15cfu/m³),
- Patient are well looked after in hospitals. What about patients at home?

The Knowledge Economy Skills Scholarships (KESS) PhD project: Domestic ventilation technologies to improve air quality and reduce health risks (2019-2022)

- Analyse current practice of domestic ventilation technologies and strategies
- Gather monitoring data and establish validated CFD models to quantify the effectiveness of common ventilation technologies
- Develop optimal low carbon ventilation strategies for domestic buildings in the UK with the goal of good air quality and low energy consumption



With special thanks to the team

Cardiff University

Dr Hu Du, Senior Research Fellow (project lead)
Miltiadis Ionas, Research Assistant

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Dr Jamie Duckers, Research lead and Consultant Physician

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Dr Rishi Dhillon, Consultant Microbiologist
Lorna Vale, Senior Biomedical Scientist

Swansea University

Professor Gwyneth Davies, Clinical Deputy Head
Professor Deborah Fitzsimmons, Personal Chair in Public Health
Dr Mohammad Al Sallakh, Researcher
Professor Paul Lewis, Director of CHEMRI



“Good housing pays for itself over time. Provide better housing and you will need less hospitals!”

NHS Director of Sustainability

