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Sterilization of disposable face masks by means of dry and steam sterilization processes; an alternative in case of acute mask shortages due to COVID-19

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Introduction/background The Covid-19 pandemic does cause imminent local shortages of personal protective equipment such as face masks, in hospitals and other healthcare facilities.

Sterilization In preparation for that scarcity we performed a study to investigate the possibility of reprocessing disposable FFP2 face masks in order to verify their re-usability with a method that could be applied in practice using already available equipment. Therefore single use FFP2 masks (type 1862+ 3MTM) were sterilized with a 15-minute procedure at 121 °C, using a dry sterilization process or a regular steam process with the masks in impermeable sterilization/laminate bag. The effectiveness of these processes are sufficient to inactivate the coronavirus based on knowledge of inactivation of such viruses^{1, 2}. A blind comparison of unused, and once, twice and three times sterilized masks was performed by two individuals with respect to visual inspection, consistency, face fit and breathing resistance. The result of this comparison was that both investigators were unable to distinguish unused new (slightly curved and folded) masks from reprocessed sterilized masks.

We then tested the functionality of the unused and sterilized masks in several ways. First of all permeability properties for bacteria were tested by spraying a bacteria solution of *Staphylococcus epidermidis* (ATCC 12228) on the masks while air was being drawn through the masks. Unused and multiple sterilized masks showed no differences in the amount of passed bacteria (data not shown). In these experiments it was also observed that the reprocessing procedures of the masks did not appear to affect the water-repellent mask properties.

Pressure/flow and Particle tests After sterilization, the samples were tested at Delft University of Technology and benchmarked with new mouth masks. A custom test set-up was built to measure the pressure drop over the maskers and outflow with regard to the permeability of the masks. Flow measurement experiments which imitated normal in and out breathing conditions, showed no significant flow differences of the different masks tested. Finally, the filtration capacity of the masks was evaluated using a calibrated Lighthouse Colair 3200 particle counter (Lighthouse, San Francisco, www.golighthouse.com). It was shown that the mask permeability of small particles did not change after multiple heat sterilization procedures (table 1).

We openly shared our positive experiences with the above mentioned sterilization process with other hospitals in the Netherlands that were are also preparing for the outbreak. We were informed that their attempts to steam sterilize mouth masks at 134°C gave poor results as masks started to deform and became sticky while the elastics lost its resilience.

In addition we tested Gamma radiated masks this process did hamper the filter capacity (table 1).

The results of our experiences and experiments indicate that our sterilization process did not influence the functionality of the masks tested. In case of an acute shortage of FFP2 masks, dry heat sterilization (e.g. in laminate sterilization wrappings) of used masks at 121 °C or steam sterilization in laminate bags at 121°C, is a simple, useful, cost effective and quick procedure that can be used to make used masks available for safety reuse. Therefore the sterilization process of available standard autoclaves in all hospitals have to be adjusted in order to use this sterilization method. We performed these experiments with 3M masks. Results likely apply to masks from other manufacturers. If necessary institutions can send us their masks. We will test and report the results on www.tudelft.nl, vanstratenmedical.com and www.franciscus.nl.

Table 1

	New	1x Heat 121	3x Heat 121	5xHeat 121	10kGy	25kGy
	FFP2	(n=2)	(n=4)	(n=2)	(n=1)	(n=2)
Filter Efficiency %						
0.3 μm	99.4	96,9	97.4	96.8	55.4	-
0.5 μm	99.8	98,0	98.4	98.7	79.1	57.5
5.0 μm	99.8	95.2	95.5	94.3	98.1	98.7

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