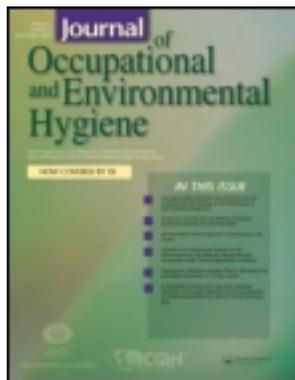


This article was downloaded by: [CDC Public Health Library & Information Center]

On: 31 July 2013, At: 10:54

Publisher: Taylor & Francis

Informa Ltd Registered in England and Wales Registered Number: 1072954 Registered office: Mortimer House, 37-41 Mortimer Street, London W1T 3JH, UK



## Journal of Occupational and Environmental Hygiene

Publication details, including instructions for authors and subscription information:

<http://www.tandfonline.com/loi/uoeh20>

### Analytical Performance Issues

Xinjian He <sup>a</sup>, Sang-Young Son <sup>b</sup>, Kelley James <sup>b</sup>, Michael Yermakov <sup>a</sup>, Tiina Reponen <sup>a</sup>, Roy T. McKay <sup>a</sup> & Sergey A. Grinshpun <sup>a</sup>

<sup>a</sup> Center for Health-Related Aerosol Studies, Department of Environmental Health, University of Cincinnati, Cincinnati, Ohio

<sup>b</sup> Department of Mechanical Engineering, University of Cincinnati, Cincinnati, Ohio

Accepted author version posted online: 22 Jan 2013. Published online: 26 Feb 2013.

To cite this article: Xinjian He, Sang-Young Son, Kelley James, Michael Yermakov, Tiina Reponen, Roy T. McKay & Sergey A. Grinshpun (2013) Analytical Performance Issues, Journal of Occupational and Environmental Hygiene, 10:4, D52-D54, DOI: [10.1080/15459624.2013.766555](https://doi.org/10.1080/15459624.2013.766555)

To link to this article: <http://dx.doi.org/10.1080/15459624.2013.766555>

PLEASE SCROLL DOWN FOR ARTICLE

Taylor & Francis makes every effort to ensure the accuracy of all the information (the "Content") contained in the publications on our platform. However, Taylor & Francis, our agents, and our licensors make no representations or warranties whatsoever as to the accuracy, completeness, or suitability for any purpose of the Content. Any opinions and views expressed in this publication are the opinions and views of the authors, and are not the views of or endorsed by Taylor & Francis. The accuracy of the Content should not be relied upon and should be independently verified with primary sources of information. Taylor and Francis shall not be liable for any losses, actions, claims, proceedings, demands, costs, expenses, damages, and other liabilities whatsoever or howsoever caused arising directly or indirectly in connection with, in relation to or arising out of the use of the Content.

This article may be used for research, teaching, and private study purposes. Any substantial or systematic reproduction, redistribution, reselling, loan, sub-licensing, systematic supply, or distribution in any form to anyone is expressly forbidden. Terms & Conditions of access and use can be found at <http://www.tandfonline.com/page/terms-and-conditions>

## Analytical Performance Issues Exploring a Novel Ultrafine Particle Counter for Utilization in Respiratory Protection Studies

---

Exposure to ultrafine ( $\leq 0.1 \mu\text{m}$ ) particles is widespread at various workplaces. Several studies have revealed associations between ultrafine particle exposures and adverse health effects, including respiratory problems, impairment of cardiovascular function, and others.<sup>(1–3)</sup>

Condensation particle counters (CPCs) are conventionally deployed to measure the ultrafine particle concentrations in real time. For example, the P-Trak (Model 3007, TSI Inc., Shoreview, Minn.) is the most commonly used CPC in occupational environments. However, commercially available CPCs are typically too bulky to serve as workers' personal exposure monitors; furthermore, their performance is generally affected by their orientation. Several attempts have been made recently to design a better instrument for real-time personal exposure assessment, including a novel ultrafine particle counter (prototype) developed at the University of Cincinnati (UC UFP counter, Figure 1).<sup>(4,5)</sup> The operation principle of this device, like any CPC, involves condensation on nuclei; however, the novelty of this instrument is that the condensation takes place on nano-materials entering through the input channel. After passing a PM filter (cyclone), the particles enter a non-wetting, porous evaporation-condensation tube. Enlarged due to condensation growth, they are detected with an optical laser counter. Capillary force spontaneously generated on the surface of the non-wetting tube prevents flooding regardless of orientation and movement. This makes the instrument particularly advantageous for field applications. In addition, its time of response to a change in aerosol concentration is as low as approximately 0.3 sec. The detection particle size range is 4.5 nm to  $>1.0 \mu\text{m}$  that, in contrast to conventional CPCs, includes a low nano-scale. The present prototype of the UC UFP counter is portable; however, it is undergoing additional miniaturization to make the device wearable.

In this study, we examined the feasibility of using the UC UFP counter for measuring the aerosol particle penetration through an elastomeric half-mask respirator donned on a breathing manikin.<sup>(6,7)</sup> Elastomeric respirators are commonly used by firefighters and first responders. The UC UFP counter was tested against the TSI Model 3007 CPC operating side by side. Combustion particles (generated by burning wood, paper, or plastic) were used as challenge aerosols. Exposures to combustion aerosols at various workplace environments have been associated with adverse health outcomes.<sup>(2,3)</sup> More than 70% (by number) of particles in a fire-generated smoke are ultrafine.<sup>(8)</sup> The penetration values were obtained by measuring the aerosol concentrations inside and outside the respirator. The sampled airflow was split with 0.3 L/min directed to the UC UFP counter and 0.7 L/min to the TSI CPC. Measurements were conducted for four respirator sealing conditions (unsealed, sealed at the nose area, sealed at chin and nose, fully sealed) and for three cyclic breathing flow rates (mean inspiratory flow = 30, 85, and 135 L/min) and one constant flow rate (30 L/min).

**Column Editor**  
Martin Harper

**Reported by**

Xinjian He<sup>1</sup>  
Sang-Young Son<sup>2</sup>  
Kelley James<sup>2</sup>  
Michael Yermakov<sup>1</sup>  
Tiina Reponen<sup>1</sup>  
Roy T. McKay<sup>1</sup>  
Sergey A. Grinshpun<sup>1</sup>

<sup>1</sup>Center for Health-Related  
Aerosol Studies, Department of  
Environmental Health, University  
of Cincinnati, Cincinnati, Ohio

<sup>2</sup>Department of Mechanical En-  
gineering, University of Cincin-  
nati, Cincinnati, Ohio

Correspondence to: Sergey Gri-  
nshpun, University of Cincinnati,  
Environmental Health, 3223  
Eden Ave., P.O. 670056, Cincin-  
nati, OH 45267; e-mail: sergey.  
grinshpun@uc.edu.

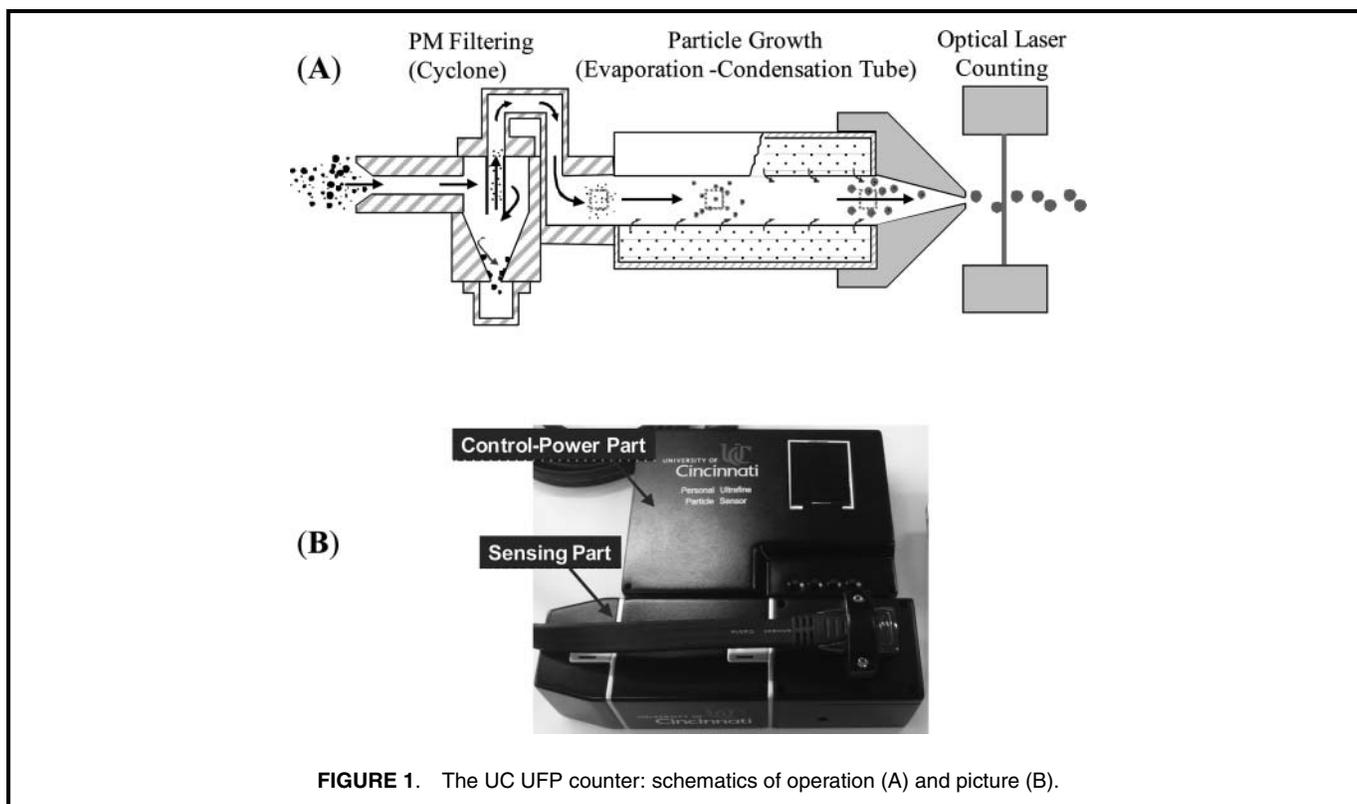


FIGURE 1. The UC UFP counter: schematics of operation (A) and picture (B).

The data are presented in Figure 2. The particle penetration falls into a wide range of values: from  $\sim 0.01\%$  to  $\sim 60\%$ , which reflects a variety of the sealing and breathing conditions. A favorable agreement between the two data sets was observed (slope  $\approx 1.16$ ,  $R^2 \approx 0.99$ ; paired  $t$ -test:  $p$ -value = 0.91), suggesting that the new counter produced meaningful data

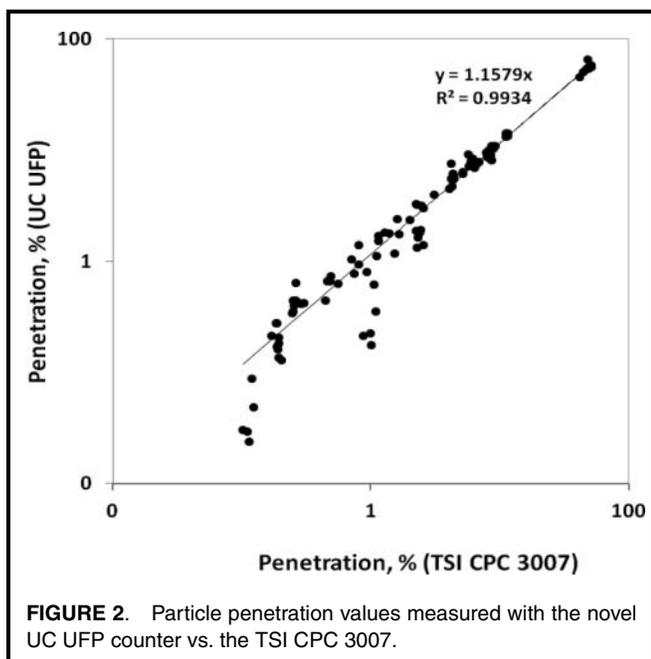


FIGURE 2. Particle penetration values measured with the novel UC UFP counter vs. the TSI CPC 3007.

comparable to a conventional TSI CPC instrument and was capable of measuring in the abovementioned wide range of parameters. We concluded that, once miniaturized to serve as a field compatible personal sampling device, the instrument can be successfully used for evaluating the performance of respirators directly at workplaces. Considering the data variability observed in this study (specifically two clusters at penetration levels around 0.1% and 1% as measured by the TSI CPC), a follow-up investigation is warranted to improve the sensitivity and stability of the UC UFP.

## ACKNOWLEDGMENTS

This study was supported by the NIOSH Targeted Research Training program of the University of Cincinnati Education and Research Center grant (No.T42/OH008432-06), NIH grant 5U01ES16123, and the University of Cincinnati Graduate Assistantship and Scholarship.

## REFERENCES

1. Peters, A., H.E. Wichmann, T. Tuch, J. Heinrich, and J. Heyder: Respiratory effects are associated with the number of ultrafine particles. *Am. J. Respir. Crit. Care Med.* 155(4):1376-1383 (1997).
2. Schwartz, J., D.W. Dockery, and L.M. Neas: Is daily mortality associated specifically with fine particles? *J. Air Waste Manag. Assoc.* 46(10):927-939 (1996).
3. Timonen, K.L., E. Vanninen, J. de Hartog, et al.: Effects of ultrafine and fine particulate and gaseous air pollution on cardiac autonomic control in subjects with coronary artery disease: The ULTRA study. *J. Expos. Sci. Environ. Epidemiol.* 16(4):332-341 (2005).

4. **Son, S.Y., J.Y. Lee, H. Fu, S. Anand, F. Romay, and A. Collins:** Personal and wearable ultrafine particle counter. In *Proceedings of the AAAR 30th Annual Conference*, American Association for Aerosol Research, October 3–7, 2011, Orlando, Florida.
5. **Son, S.Y., J.Y. Lee, J. Lockey, and G. LeMasters:** 2010. Continuous droplet generator devices and methods. US Patent 20,100,180,765, filed Jan. 19, 2010.
6. **Grinshpun, S.A., H. Haruta, R.M. Eninger, T. Reponen, R.T. McKay, and S.-A. Lee:** Performance of an N95 filtering facepiece particulate respirator and a surgical mask during human breathing: Two pathways for particle penetration. *J. Occup. Environ. Hyg.* 6:593–603 (2009).
7. **He, X., M. Yermakov, T. Reponen, R. McKay, K. James, and S.A. Grinshpun:** Manikin-based performance evaluation of elastomeric respirators against combustion particles. *J. Occup. Environ. Hyg.* 10: 203–212.
8. **Baxter, C.S., C.S. Ross, T. Fabian, et al.:** Ultrafine particle exposure during fire suppression—Is it an important contributory factor for coronary heart disease in firefighters? *J. Occup. Environ. Med.* 52(8):791–796 (2010).