






<http://f-labor.mkt.bme.hu/>

[Education/Biosafety2 .pdf](#)

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What is bio(logical)safety?



- every biomaterials are potentially pathogen and polluter/contaminant
- (direct)biosafety is focusing on infections and toxic effects
- goal: to avoid the getting out of living materials in to the nature

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Laboratory infections





1949 - Sulkin és Pike

- 222 viral infections (21 fatal/deadly)
- only 27% was connected to known accidents (the reasons of teh rests are unknown)

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Laboratory infections



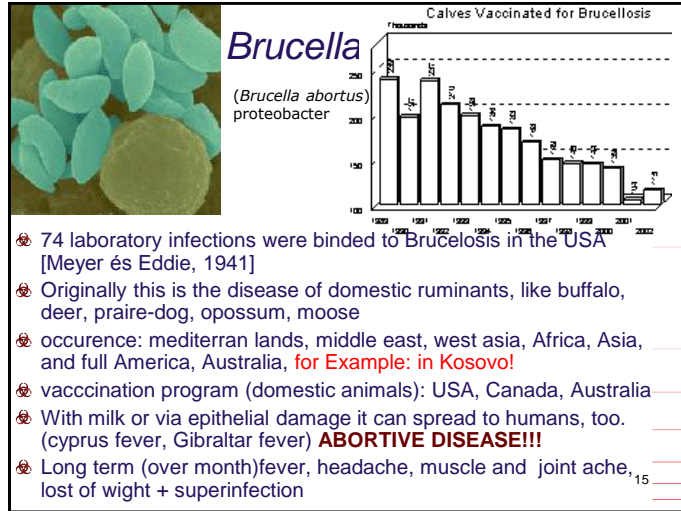
1951,1965, 1976 - Sulkin and Pike

Made a survey on laboratory binded infections

- Involved more than 5000 laboratory
- Registered 3921 infections
- In less then 20 % was observed the infections reasons
- Infective aerosol was probably the reason in more then 80%
- Most frequently :

| Bacterial | viral |
|--------------|--------------------------------|
| brucellosis | hepatitis |
| tularemia | venezuelai equine encephalitis |
| tuberculosis | HIV |
| tiphus | EBOLA |

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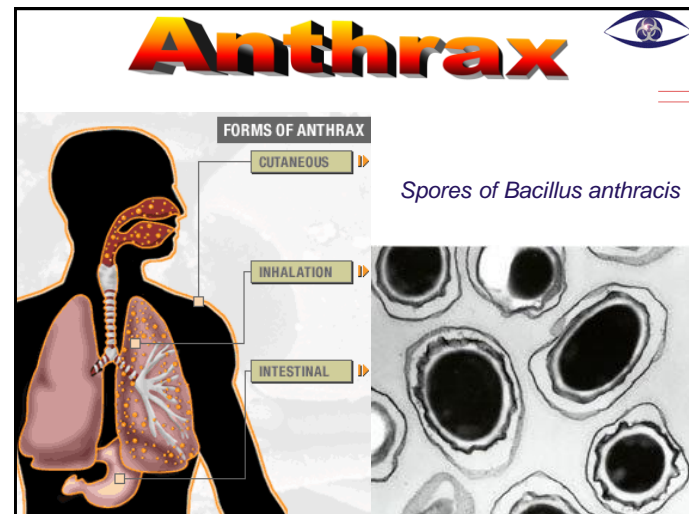


- 74 laboratory infections were binded to Brucellosis in the USA [Meyer és Eddie, 1941]
- Originally this is the disease of domestic ruminants, like buffalo, deer, prairie-dog, opossum, moose
- occurence: mediterranean lands, middle east, west asia, Africa, Asia, and full America, Australia, **for Example: in Kosovo!**
- vaccination program (domestic animals): USA, Canada, Australia
- With milk or via epithelial damage it can spread to humans, too. (cyprus fever, Gibraltar fever) **ABORTIVE DISEASE!!!**
- Long term (over month) fever, headache, muscle and joint ache, loss of weight + superinfection

Tularemia

- Francisella tularensis* bacteria
- Host: rabbit vector: tick
- Can infect stillwater, too (like. Death of beaver)
- 1966-67 Sweden: 600 infections via inhalations (hover dust of straw)
- Bio-weapons: 1942 - Stalingrad, soviets against germans – so many victims, that the offensive was stopped, BUT they infected themselves too (10 000 infections/yr-> jumped to 100 000)
- It is a potential tool for bioterror

| State | Cases |
|-------|-------|
| AK | 1 |
| AL | 1 |
| AR | 1 |
| AZ | 1 |
| CA | 1 |
| CO | 1 |
| CT | NR |
| DE | 2 |
| DC | 0 |
| MA | 10 |
| MD | 4 |
| ME | 1 |
| NJ | 4 |
| NH | NR |
| VT | 0 |
| RI | NR |
| HI | 0 |



The risk of Infection

- ☣ infectious dose (ID) : this the number of microorganism, which is nessecary for appearing the disease, or which is enough to reproduce cells in a host resulting **mesurable effect**:
 - Appear of symptoms
 - Titer (i.e. conc.) of antibodies
 - Incorporation of nucleic acid
- ☣ Problems with determination of ID:
 1. Entry way – 4 order of magnitude differences between oral and subcutan administration/introduction
 2. Difference between hosts results 6 order of magnitude ID differences!

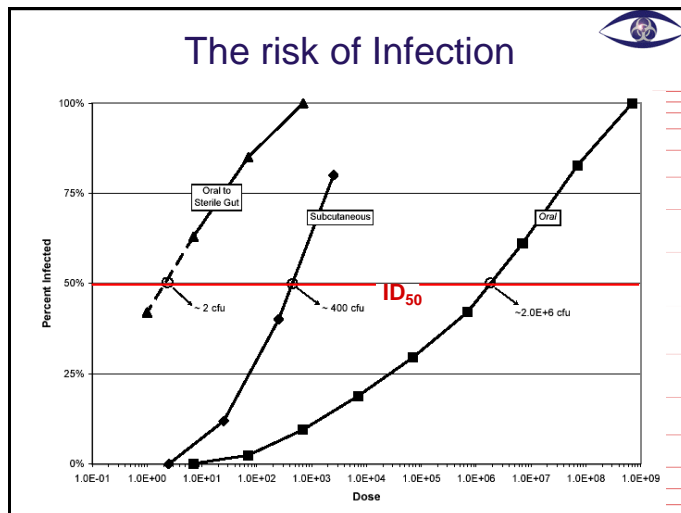
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The risk of Infection

3. Way of entry differs between host individums, too.
4. After antibiotic treatment (i.e. no gut-microbiota) of mouses they become 5 order of magnitude more sensitive against oral entry
5. Mouse and human ID's are hardly comparable (for example: in case of *Salmonella enteridis* 3 order of mgnitude difference)
6. Virulence of the pathogeni is variable: regionally (=in populations) and also with time

- ☣ Lethal Dose (LD) :
 - More exact detection
 - Not measurable for humans

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The risk of Infection

| LD ₅₀ of <i>B. anthracis</i> for different hosts | | |
|---|--|--|
| | injection LD ₅₀ [spores] | inhalation LD ₅₀ [spores] |
| <i>Cynomolgus majom</i> | - | 4.1x10 ³ |
| <i>Rhesus majom</i> | 3x10 ³ spores | 5.3x10 ⁴ - 7.6x10 ⁵ |
| mouse | 5 | 1,4x10 ⁴ |
| rat | 10 ⁶ | 2,6x10 ⁴ |
| pig | 10 ⁹ | 2,7x10 ⁷ |
| dog | 5x10 ¹⁰ | 1,8x10 ⁷ |
| human | not given | ID: 6x10 ² -2,2x10 ³ |

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Hepatitis B

- ⊗ Infectious inflammation of liver
- ⊗ virális infection, lifelong effect,, cirrhosis, liver cancer, death
- ⊗ Blood products are screened for HpA and B, but not for C,D, E!!!
- ⊗ Infection ratio:

HBsAg Endemicity

- 8% and above - High
- 2% - 8% - Intermediate
- Below 2% - Low

Hepatitis B

- ⊗ There's no cure! But recombinant vaccination is available (*Saccharomyces cerevisiae*, *Pichia pastoris*)

- Obligatory for infants
- Obligatory for newborns
- Obligatory for juvenils
- Not obligatory

Bird flu

- ⊗ Flu viruses are classified (class A, B, C) based on their capsid proteins:
 - „A” pathogenic for animals and humans
 - „B” and „C” not infective for animals and rarely for humans
- ⊗ Inside a class subgroups are formed on the basis of surface antrigenes (proteins) :
 - hemagglutinines – H
 - neuraminidases – N
 - type H and N can freely recombined
 - >140 subtypes

Detail of RNA Segment
Showing RNP structure (transcriptase complex)

Polymerase PB1
Polymerase PB2
Polymerase PA
Nucleoprotein NP

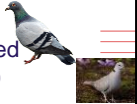
Kamarudin Isa, Aziz Mangkat, Rozanah Asmah, Abd. Samaddan, Asiah Naina, Mohd. Alim: JANGKITAN HIGHLY PATHOGENIC AVIAN INFLUENZA (HPAI): RISTIKO KEMASUKAN KE MALAYSIA

Bird Flu

- ⊗ Birds can infected by any type H virus => they maintain high variability virus population
- ⊗ Birds are mainly infected by H5 and H7 type

| | | | | | | | | | | |
|-----|---|---|---|---|---|---|---|---|---|---|
| H1 | ● | ● | ● | ● | ● | ● | ● | ● | ● | ● |
| H2 | ● | ● | ● | ● | ● | ● | ● | ● | ● | ● |
| H3 | ● | ● | ● | ● | ● | ● | ● | ● | ● | ● |
| H4 | ● | ● | ● | ● | ● | ● | ● | ● | ● | ● |
| H5 | ● | ● | ● | ● | ● | ● | ● | ● | ● | ● |
| H6 | ● | ● | ● | ● | ● | ● | ● | ● | ● | ● |
| H7 | ● | ● | ● | ● | ● | ● | ● | ● | ● | ● |
| H8 | ● | ● | ● | ● | ● | ● | ● | ● | ● | ● |
| H9 | ● | ● | ● | ● | ● | ● | ● | ● | ● | ● |
| H10 | ● | ● | ● | ● | ● | ● | ● | ● | ● | ● |
| H11 | ● | ● | ● | ● | ● | ● | ● | ● | ● | ● |
| H12 | ● | ● | ● | ● | ● | ● | ● | ● | ● | ● |
| H13 | ● | ● | ● | ● | ● | ● | ● | ● | ● | ● |
| H14 | ● | ● | ● | ● | ● | ● | ● | ● | ● | ● |
| H15 | ● | ● | ● | ● | ● | ● | ● | ● | ● | ● |

Bird Flu



- ☹️ Primarily water birds but other poultry are infected (pigeons are not sensitive only collared doves)
- ☹️ Bird can be a carrier without symptoms, but its faeces are still infective (that's why waterbirds are so sensitive): the virus can survive for 1-2 weeks in lakes and rivers)
- ☹️ Danger occurs, when wild water birds and other poultry are bred together
- ☹️ Symptoms in birds: 1-3 days of latency, then respiratory symptoms, sometimes hemorrhagic lesions, diarrhea
- ☹️ Prevention: controlled (closed) livestock – Southeast Asia and USA do not
- ☹️ Last decades more than 12 epidemics on Hungary, last time in 70's (before the recent)

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Bird Flu

Documented Avian Influenza infections in humans

| Location | Year(s) | Cases | Deaths |
|---------------------------|-----------|-------|--------|
| Canada (British Columbia) | 2004 | 2 | 0 |
| Netherlands | 2003 | 89 | 1 |
| Cambodia | 2005 | 4 | 4 |
| Thailand | 2004-2005 | 21 | 13 |
| Indonesia | 2005 | 12 | 7 |
| Viet Nam | 2004-2005 | 93 | 42 |
| Hong Kong | 1997 | 18 | 6 |
| Hong Kong | 2003 | 2 | 1 |
| Hong Kong | 1999 | 2 | 0 |
| China | 2005 | 3 | 2 |

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Bird Flu

Tianjin

Outbreak location

- confirmed
- denied or ruled out

Poultry density (nb/km²)

- 0-50
- 50-1000
- 1000-5000
- >5000

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Bird Flu

- ☹️ Animal's flu viruses are not infecting humans directly, only rarely in high amount:
 - From 2003 ca 140 millions of bird infections, 137 human infections, 70 known deaths!
 - 2003 Netherlands: 89 human infections, 1 death
- ☹️ Bird flu is not infective from human to human
- ☹️ Risk: a human flu (infective from humans to humans) and at the same time a bird flu infection -> recombination, supervirus formation

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Bird Flu

9 December 2005 - WHO

| | Cambodia | China | Indonesia | Thailand | Viet Nam | Total |
|---------------------|----------|-------|-----------|----------|----------|--------|
| cases/deaths | | | | | | |
| 2003 | 0/0 | 0/0 | 0/0 | 0/0 | 3/3 | 3/3 |
| 2004 | 0/0 | 0/0 | 0/0 | 17/12 | 29/20 | 46/32 |
| 2005 | 4/4 | 5/2 | 13/8 | 5/2 | 61/19 | 88/35 |
| Total | 4/4 | 5/2 | 13/8 | 22/14 | 93/42 | 137/70 |


Total number of cases includes number of deaths.
WHO reports only laboratory-confirmed cases.

- human flu: 5-15 %-infected of world populations
- casue 250-500.000 death

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Bird Flu

- Rapid death of the virus above 60°C: cooked /baked infected birds become un-infective: the consumption of poultry is safe
 - Effect of press: in Hungary consumption decreased by 40%
- Defense:
 - Blood serum: contains antibody, gives passive defense
 - vaccination: contains antigens, gives active immunity
- Pilot production of vaccinca in Hungary:
 - A H5N1 virus was isolated in Vietnam from a human, and sent to 50 different countries
 - The vaccine can defense against only this type =>not economical to apply it neither for humans nor for birds
- Real defense: annihilate infected animals



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- 1951,1965, 1976 - Sulkin and Pike
 - Made a survey on laboratory binded infections
 - Involved more than 5000 laboratory
 - Registered 3921 infections
 - In less then 20 % was observed the infections reasons
 - Infective aerosol was probably the reason in more then 80%
- 2009 Weinstein, Singh
 - 641cases/100.000 employed while
 - 0,08 cases/100.000 citizen =>8000x higher risk

Table 1. Ten most frequently reported laboratory-associated infections worldwide.

| Disease | No. of cases | No. of deaths |
|--------------------------------|--------------|---------------|
| Brucellosis | 426 | 5 |
| Q fever | 280 | 1 |
| Hepatitis | 268 | 3 |
| Typhoid fever | 258 | 20 |
| Tularemia | 225 | 2 |
| Tuberculosis | 194 | 4 |
| Dermatomycoses | 162 | 0 |
| Venezuelan equine encephalitis | 146 | 1 |
| Psittacosis | 116 | 10 |
| Coccidioidomycosis | 93 | 2 |

NOTE. Data are for the years 1976 [3] and 1978 [4].

Table 2. Laboratory-associated infections and relative risk of infection, compared with the risk among the general population.

| Organism | No. of cases of infection | Relative risk of infection |
|--------------------------|---------------------------|----------------------------|
| Shigella species | 16 | 1 |
| Brucella species | 7 | 8012.5 |
| Salmonella species | 6 | 0.08 |
| Staphylococcus aureus | All | 6 |
| MRSA | 5 | NA |
| Neisseria meningitidis | 4 | 40.8 |
| Escherichia coli O157:H7 | 2 | 8.6 |
| Coccidioides species | 2 | 1.1 |
| Clostridium difficile | 1 | 0.03 |

NOTE. Data are for the years 2002-2004 [11]. MRSA, methicillin-resistant S. aureus.

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Brucellosis:

- Most frequent, 24% of total lab infections
- Still casued by aerolsols, BUT
 - also direct contacts (like out of safety cabinet)
 - the spreading way is often unknown
 - no cases from humans to humans (only once, a spouse)
 - assistant staff and visitors too!!

N.meningitis (2005)

- Forum and email alarm chain:
- 16 labor accident, 50% deadly(!), mostly B and C serotype
- Most probably by aerosol
- All of them clinical microbiologist
- 43x relative risk compared to the population
- Vaccination exists, but not 00% of defense, and not effective against B...
- Preention: Rifampicin or. Ciprofloxacin (=antibiotics)

Shigella

- Enterobacter (~Salmonella)
- More virulent ->less is enough to make infections

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Observation of biological risk

Every country has to classify microorganisms with consideration of:

- ☉ a pathogenicity of microbe
- ☉ Methods of infection and host organism
 - ☞ Immunity of the human population, their migrants, their density, hygienic conditions
- ☉ Tools for defense in the country
 - ☞ passive immunisation, hygienic rules, registration of animal infections
- ☉ Tools for treatment of the disease in the country
 - ☞ passive and post infection immunisation, antiviral agents

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The 4 levels of Biosafety EÜM 61/1999 (according to WHO)

- ☉ 1. level - basic biological risk
that biological agent, which is not able to cause human disease
- ☉ 2. level – low risk
that biological agent, which is able to cause human disease, therefore it is dangerous for employee, but its spread is not probably, because effective treatment exists, or mild infection is caused
- ☉ 3. level – infection risk
can cause serious human disease, and can have the opportunity to spread among the human population, but generally effective treatments exist, or can prevent.

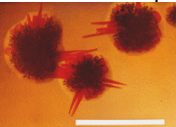
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A biológiai biztonság 4 szintje EÜM 61/1999 (WHO alapján)

- ☉ 4. szint – Emphasised infection risk
that biological agent, which can cause serious human disease, and has high risk of spread among human population, because we either do not have any effective treatments or preventions.

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Bacteria

| BSC 1 | BSC 2 | BSC 3 | BSC 4 |
|---------------------------------------|------------------------------------|-----------------------------------|---|
| <i>Escherichia coli</i> <i>K12</i> | <i>Chlamidia pneumoniae</i> | <i>Bacillus anthracis</i> | <i>Mycoplasma mycoides</i> AIDS, Gulf syndrome, rheumatoid arthritis, etc. |
| <i>Lactobacillus sp.</i> | <i>Clostridium butulinum</i> | <i>Coxiella burnetii</i> | |
| | <i>Clostridium tetani</i> | <i>Mycobacterium tuberculosis</i> | Between viruses and bacteria – can reach all tissue even into the brain |
| | <i>Corynebacterium diphtheriae</i> | <i>Rickettsia akari</i> | |
| | <i>Escherichia coli</i> | <i>Salmonella thyphi</i> | |
| | <i>Haemophilus influenzae</i> | <i>Yersinia pestis</i> | |
| | <i>Klebsiella sp.</i> | |  |
| | <i>Legionella sp.</i> | | |
| | <i>Vibrio cholerae</i> | | |

Fungi



2009: accident (cut wounds) < spores inhalation (dimorph) (lifting the cover)

| BSC 1 | BSC 2 | BSC 3 | BSC 4 |
|-------|------------------------------|--------------------------------------|-------|
| | <i>Aspergillus fumigatus</i> | <i>Paracoccidioides brasiliensis</i> | |
| | <i>Candida albicans</i> | <i>Histoplasma capsulatum</i> | |
| | <i>Penicillium marneffei</i> | <i>Blastomyces dermatitidis</i> | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |

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Viruses



| BSC 1 | BSC 2 | BSC 3 | BSC 4 |
|--|---|-------------------------------------|---|
| <i>Baculovirus</i> (pl. transgenic insect tissues) | cytomegalovirus (CMV) genus <i>Lymphocryptovirus</i> | Creutzfeldt-Jacob disease | <i>Middle eu. encephalitis</i> (inflammation of brain) virus |
| cattle papilloma virus | Hepatitis | Hantaan (corean haemorrhagic fever) | Congo Crimean haemorrhagic fever TBE (1999 Volgograd, 32case) |
| hamster leukemia | Herpes simplex | HIV | Ebola virus |
| Flu strains for vaccination | Influenza virus A-C | West-Nile fever virus | Marburg virus |
| | measles virus | Yellow fever virus | |
| | poliovirus | | |

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Biosafety – rational considerations



- the methods limiting the escape of microbes from a system are the same, than those, which limits the entry of a system:

These provide the sterility of a process, too, therefore they are required for appropriate products as well.

- “not the size of the essence” :

Methods are the practically the same.

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Biosafety cabinet vs. Laminar box



- Biosafety Cabinet:** infection-sure shut off from the environment.
- Laminar box:** a laminar airflow prevent the materials from getting in/out microbes – only prevent a the processed **material**
 - There exists horizontal and vertical airflow box.
 - The airspace of laminar box can sterilized with a filter. Its surfaces can be sterilized with disinfectant agents and/or UV lamp.
 - Before use, surfaces must be disinfected and irradiated by UV lamp for at least 15-30 minutes. No wet surface is allowed.
 - Keep order in the box!

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Biosafety cabinet

- ☞ Prevent users, laboratory and the materials from aerosols formed during the job.
- ☞ aerosol < 5 µm and microdrop 5-100 µm – invisible with native eyes
- ☞ HEPA (high-efficiency particulate air) filter: filter off particles smaller than 0,3 µm (micron) with 99,99% safety. Only microbe free air can leave the cabinet.
- ☞ Classification: I, II and III class cabinets and furthermore IIA1, IIA2, IIB1, IIB2

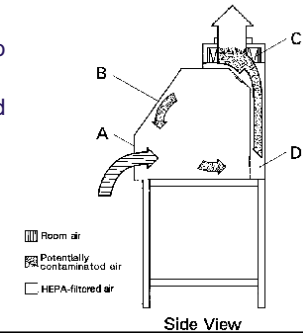
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I class biosafety cabinet

- ☞ At least 0,38 m/s air inlet from room air (A)
- ☞ Outgoing air pass through HEPA filter into the room or into the environment
- ☞ Does not fully prevent the used material

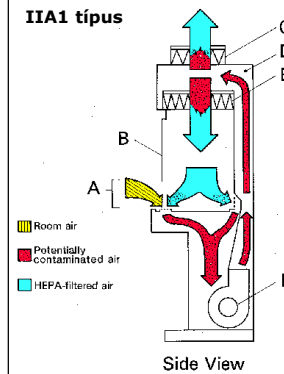
Figure 1.
Class I Biological Safety Cabinet.

A. front opening, B. sash, C. exhaust HEPA filter, D. exhaust plenum

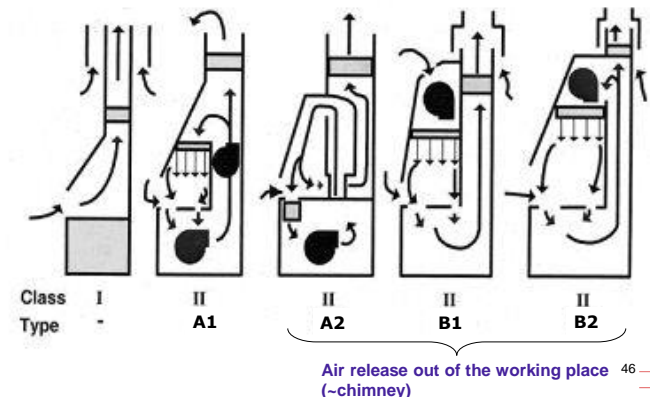


II class biosafety cabinet

- ☞ Prevent both user and material: filtered air (HEPA) meet the target material
- ☞ 2nd and 3rd risk group microbes can also be manipulated under this
- ☞ 4th risk group can only be manipulated under this cabinet in pressurized protective clothing
- ☞ IIA1 : 30% of air outlet is released into room, 70% is recycled into workplace



II class biosafety cabinets



IIB2 biosafety cabinet

Side view Front view

■ Room air ■ Contaminated air ■ HEPA-filtered air

III class biosafety cabinet

- ⊗ For handling 3rd and 4th risk level microbes
- ⊗ Every connections are gastight
- ⊗ Outgoing air pass through double HEPA filters
- ⊗ There are a weak negative pressure in the cabin
- ⊗ It may connected to a double doored autoclave for waste treatment
- ⊗ Working is done with rubber gloves connected gastightly to the cabinet

Supply HEPA (filter) Exhaust HEPA filter

III. Biosafety cabinet

Biosafety cabinets (summary)

| Class | Innlet air velocity | Ratio of recycled air % | Ratio or released air % |
|-------|---------------------|-------------------------|-------------------------|
| I | 0,36 | 0 | 100 |
| IIA1 | 0,38-0,51 | 70 | 30 |
| IIA2 | 0,51 | 70 | 30 |
| IIB1 | 0,51 | 30 | 70 |
| IIB2 | 0,51 | 0 | 100 |
| III | 0 | 0 | 100 |

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Application of biosafety cabinet



| protection | Biosafety cabinet |
|--|--|
| employee, against risk level 1-3 | Class I-III. |
| employee, against risk level 4 | Class III. |
| employee, against risk level 4, with pressurized protective clothing | Class I, II. |
| Material protection | Class II and III, if laminar airflow is applied |
| Volatile radioactive/chemically toxic protection, small amount | IIB1 and IIA2, if air outlet goes to the environment |
| Protection of volatile radioactive/chemically toxic materials | Class I, IIB2 and III. |

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Protection levels according to risk levels



Introduction of protective levels:

- Personal conditions
- General rules
- Specific rules
- Safety equipments (primary defense line)
- Attribution of laboratory (secondary defense line)



First protection level



Personal conditions:

- **The head of laboratory** has general lab practice and good professional background
- **Laboratory technician:** have to take part on specific trainings according to his/her working place.

General rules

- The **entry is limited** during work..
- It is **obligatory to wash hands after taking off the gloves, and before leaving the lab.**
- **It is prohibited in the lab area: to eat, to drink, to smoke, to purify eyelens.** Protective glasses are recommended. Food have to stored outside the working area in separated fridge.

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First protection level



General rules

- Pipetting with mouth is forbidden! (Griffin-ballon, piston pipette, pipettor, automatic pipette)
- **Carefull working**, to avoid splashing or forming aerosol. (Appointed workplace according to the task)
- Every working place (surface) should at least daily once disinfected, specially after working with living organism. (registred and controloed cleaning and disinfection)
- **Wastes have to be decontaminated with one of the below recommended processes:** heat (121°C, 30min), chemical (alcohol, H₂O₂, formaldehyde etc.), radiation (UV)
- **Insect and rodent controlling system have to be operated.** (cross contaminations)

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First protection level



- ☣ **Safety equipment (primary defense line)**
- ☣ Generally any special infection limiting tool or equipment is not required at this level.
- ☣ **Recommended** to wear jacket, gloves or uniform.
- ☣ **Gloves** are recommended, if skin is injured or pimply.
- ☣ **Protective glasses** are necessary in case of risk of splash.

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First protection level



- ☣ **Specification of Laboratory (or plant) (=secondary defense line):**
 - ☞ **Eye wash bottles** are required in every labs.
 - ☞ **Surface of workplace** must be water-repellent, acid-, base-, and solvent-fast, and partly heat resistant.
 - ☞ If windows can be opened, than **mosquito net** have to be applied.
 - ☞ Lab Furniture should be durable. Between worktables, cabins and equipments must be leaved **enough place for easy cleaning**.

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Second protection level



Personal conditions:

- ☣ **Head of Laboratory:** must be known his/her **responsibility**, must have specific knowledge on pathogens.
- ☣ **Labor technician:** Must have appropriate **practice** with pathogens under the supervision of a competent leader.

General rules

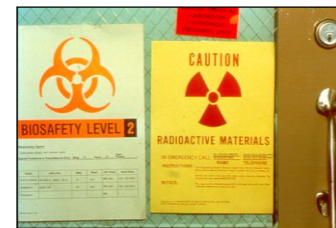
- ☣ No additive requirements to Level 1.

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Second protection level



- ☣ **Special rules**
 - ☞ The Head of Lab **decide on any entry** with full responsibility (beside mechanic or electronic registration).
 - ☞ If infectious agent is used, there are some requirements for entry (like vaccination/immunization)
 - ☞ The **biosafety board have to be appeared** on the door, including the name of the infectious agent, the safety responsible person and contacts, and the special requirements of entry.



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Second protection level

Special rules

- ☞ A lab-specific safety handbook have to be prepared or adapted a ready protokoll.
- ☞ Staff have to be inform about hte special risks and danger. It is a basic requirement, that they have to read and follow the Handbook. Staff have to receive yearly refreshing or supplementary education on changes of applied procedures.
- ☞ Every **sharp tools** must be used and handled very carefully: injection needle, slide glasses, pipette, capillars, scalpel etc. Plastic dishes have to be used.
- ☞ **Single use tools!!!**
- ☞ Cultures and tissues have to be **stored in appropriate dishes**, to prevent any release during harvesting, storing, or transporting. Before an **equipment is sent to service**, it must be disinfected!.

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Second protection level

☞ Special rules

- ☞ If any agent is gushed/overflowed, or any accident occur resulting risk of infections evidently, it **must be reported** immediatly to the head of the lab. Medical examination have to be granted, and report have to be kept.
- ☞ **The application of biosafety cabinet is required:**
 - ☞ A) if during the operation aerosol formation is expected.
 - ☞ B) if high amount of infectious material is handled
- ☞ **Face protection:** if during any operation outside of the biosafety cabinet aerosol formation may occur. (protective glasses, mask)
- ☞ **jacket or uniform** is obligatory. These cloaths have to be leaved in the lab. It is forbidden to take home, their cleanig must be soved on site.
- ☞ Single use gloves have to be weared, if infectious animal or material is used. Gloves have to be taken off after the job, and throw out into infection safe bin/store..

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Second protection level

☞ Specification of the laboratory (secondary defense line):

- Must be ready **disinfection and lab waste disposal method**. (like: autoclave, chemical disinfection, waste incineration furnance)

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Third protection level

☞ Personal conditions/requirements

- ☞ **Head of laboratory:** inspect the employee, must be expert both theoretically and practically
- ☞ **Laboratory staff:** Have to take part on specific education prepaering them to the work with pathogenic or lethal agents.

☞ General rules

No additive requirements to Level 1.

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Third protection level

Special rules

- ☞ The entrance of the lab must **be kept closed** if any experiment is running.
- ☞ The head of the lab **control the entries and limit it** to that people, who are absolutely necessary to carry out the given task.
- ☞ **Biosafety boards** have to be placed on every entries of laboratories and animal houses.
- ☞ It is the responsibility of the head, that before start every work with 3rd class agents, **staff have to testify** their competency in the practice, and operating of lab equipments.
- ☞ Any interventions having infection risk must be done in **cabinets/boxes**.
- ☞ Every **single use materials** (gloves, jackets) have to be decontaminated/disinfected, before bringing out from the lab.
- ☞ **If infectious material flow out**, specific staff have to be called to first disinfect than stop its spread.

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Third protection level

Safety equipments

- ☞ **Out of the cabinets staff have to be continuously defending themselves.** (special protecting clothes, mask, gloves, face-protection or gasmask), in combination of appropriate accessories (incl. containment area for animals).
- ☞ **Gasmaks** have to be applied, if the potentially formed aerosol can not be kept back in the boxes, and in the rooms infected animals are present.
- ☞ **Resusable protective clothes** have to be disinfected before taking to laundry.



Third protection level

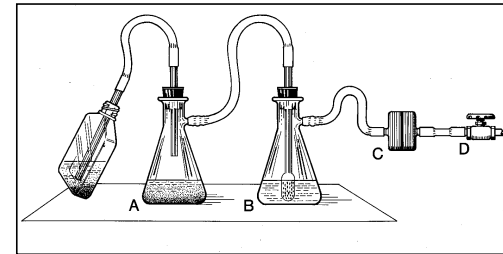
Specification of the laboratory

- ☞ The **lab have to be separated** from other frequent traffic places in the building. (negative pressure)
- ☞ Basically required, that **two automatic doors** have to separate the lab from the other parts of the buildings. The **dressing room** (with disinfection possibility) must be placed in the way of passage.
- ☞ **Ventilation** have to be one directed, the exhaust air can not be reused at other parts of the buildings, and must be filtered.
- ☞ The outgoing wastes (**even waste water**) have to be collected and disinfected separately.
- ☞ The **walls, the ceiling and the floor** have to be water-repellent for easy cleaning.
- ☞ **Windows** always have to be kept closed.
- ☞ Every tools and equipments with **potential aerosol formation** must be kept in the cabinets.
- ☞ **Vacuum lines** must have disinfection trap and HEPA filters. These have to be maintained and replaced regularly and carefully.

(industrial GMO lab is similar...)

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Avoiding aerosol formation: instead of pipetting, closed pumpsystem must use



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Required tools

~ recommended

| Biosafety level | 1. | 2. | 3. | 4. |
|--------------------------------|----|----|----|----|
| Isolation of the lab | - | - | ~ | + |
| Possibility for hermetic close | - | - | + | + |
| Venting | - | ~ | + | + |
| Common venting | - | ~ | + | - |
| Separate venting | - | ~ | + | + |
| Outgoing HEPA filter | - | - | ~ | + |
| Double-door entrance | - | - | + | + |
| Air-lock with shower | - | - | - | + |
| Foreground dressing room | - | - | + | - |
| Foreground with shower | - | - | ~ | - |
| Efluent treatment | - | - | ~ | + |

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Legal regulation

GMO

Emphasized parts:

2004. XI.

- Risk assessments of workplaces can only be done with approved persons or companies
- regulate education of safety, and the requirements for administrations safety representatives *have to be elected*
- while the modified law is expanded to working higienic questions, **but not include biosafety**

EüM 61/1999 decree

- health protection of employee working with biohazard agents
- it effets to regular employment and any other type of employment, too, where biological agents and their effects are present.

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Törvényi szabályozás

GMO

1. At least yearly **risk assesment** have to be done, examining the real accidents and expositions to biological agents.
2. Risk level must be decreased by
 - decrease the number of exposed staff
 - control and inspect of procedures
 - prevent the spread of biological agents
 - applying warnings
3. Action plans have to be pprepared for bio-accidents and detection of these agents.
4. Appropriate waste managment tools have to be provided

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Törvényi szabályozás

GMO

5. Risk assesment and Accident Pprevention Plans have to be sent to National Public Health and Medical Officer Service (ÁNTSZ)
6. Employers have to give information to emplyee about risks, and provide safe
7. Accident Action plan must be available and information to responsible person.
8. Staff working in risk must be recorded and registred.
9. Medical supervision have to be provided!

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Examples – for Tests



- ☣ What are the differences between II. and III. class biosafety cabinets? _____
- ☣ What is the difference between laminar box and biosafety cabinets? _____
- ☣ What is ID₅₀? _____
- ☣ What is ID₅₀ depending on? _____
- ☣ What is closed system application? _____
- ☣ What are „A” and „B” type applications of GMO's, and what is the difference of their legal regulations? _____
- ☣ Please list at least 3 problems of transgenic plant applications! _____
- ☣ Please list at least 2 methods to decrease the ecological risk of applying malware resistant plants! _____

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