

The Fate and Removal of Pharmaceuticals and Personal Care Products within Wastewater Treatment Facilities discharging upstream from the Great Bay Estuary



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Abstract

Pharmaceuticals and personal care products (PPCPs) are contaminants of emerging concern that derive primarily from combined sewer overflows and discharges from industrial and municipal wastewater treatment facilities (WWTFs). Some PPCPs may exhibit a wide range of health or behavioral effects in aquatic life (e.g., neural, instinct response, reproductive) at part per billion levels while others may bioaccumulate, amplifying effects up the food chain. In collaboration with six local WWTFs, we have: (1) investigated concentrations for 21 PPCPs occurring in WWTFs discharging into the Great Bay National Estuarine Research Reserve and (2) examined differences in WWTF design influencing removal of select PPCPs. The six WWTFs highlight different secondary treatment designs and disinfection methods to better understand the treatment mechanisms associated with PPCP removal. Samples were taken at influent and effluent locations as well as intermediate steps to not only estimate the percent removal per compound but to also document the change in PPCP concentrations along the treatment train. This provided insight to elucidate the most effective treatment method for reducing PPCPs in effluent. The preliminary results from two phases of sampling (March; n = 12 & July; n = 20) indicate that all 21 PPCPs were detected either in the influent, effluent, or both at each WWTF. Also, WWTFs with an enhanced biological treatment and longer sludge retention times (SRTs) resulted in higher overall PPCP removal. Due to the widespread use of PPCPs and their incomplete removal from WWTFs, the literature lists 13 of the 21 PPCPs as 'most frequently detected' in surface waters. In total, six surface water samples were collected across the Great Bay estuary resulting in 9 of the 13 frequently detected PPCPs being present, confirming previously reported observations, and 14 PPCPs being detected overall. Understanding the fate of PPCPs in conventional WWTFs is important to protecting coastal ecosystems and supporting long-term stewardship of our marine resources.

Project Aims and Hypotheses

- Document the detection of 21 target PPCP analytes within six local WWTFs and across the Great Bay estuary.
- Investigate the removal efficiency for all 21 PPCPs based on (a) treatment process design and (b) operational conditions, specifically solids retention time (SRT)
- Assess the microbial diversity and abundance for each WWTF while identifying commonalties and/or unique variations.

Hypothesis:

There will be a positive correlation between the increase in overall PPCP removal with WWTF's that have (a) alternating biological treatment zones (aerobic, anoxic, anaerobic) and (b) longer SRTs.

Rationale (a): Biological treatment with alternating treatment zones provide changes in conditions (oxygen abundant to oxygen limiting) it also inherently changes the microbial community within each zone allowing for more diverse co-metabolic reactions to occur throughout the treatment tank furthering the system's ability to remove various PPCPs

Rationale (b): SRT is one of many deterministic factors that influence the microbial composition including important nitrifiers such as ammoniaoxidizing bacteria (AOB) utilizing ammonia monooxygenase (AMO) enzymes that have been seen to catalyze biotransformation. The idea here is that longer SRTs gives the opportunity for slower growing microbes, like AOBs, to become more abundant by establishing a stable population providing the microbes with more contact time to break down PPCPs.

Background

The Great Bay National Estuarine Research Reserve in New Hampshire supports 169 bird, fish, and plant species. Unfortunately, there have been signs indicating that the Great Bay estuary's ecosystem is failing due to the continuous input of pollution from human activity; therefore, understanding the sources and fate of PPCPs in its contributing tributaries is essential to protecting its delicate ecosystem.

Preliminary data from the National Oceanic and Atmospheric Administration's (NOAA) Mussel Watch Program 2016 survey identified 9 PPCPs in mussels collected in the Great Bay which included DEET, atenolol, and fluoxetine. The detection of these compounds in mussel tissue suggests PPCPs are prevalent along New Hampshire coastlines and that WWTFs discharging to Great Bay estuary are ineffective at removing some PPCPs.

Conventional WWTFs have four stages of treatment (preliminary, primary, secondary, disinfection), but most PPCP removal occurs during secondary treatment through biodegradation by a diverse aerobic microbial community. Recent studies have shown secondary treatment designed to achieve low effluent nutrient levels (nitrogen and phosphorous) have a positive relationship on PPCP removal. The selected WWTFs represent a range of different secondary treatment designs (i.e., conventional activated sludge, 4-stage Bardenpho, aerated lagoons, and oxidation ditch) and disinfection methods (i.e., chlorination/dechlorination and ultraviolet (UV) light disinfection).

Tab

Therapeutic Chem Class

Analgesic

Acetami C_8H_9 (103 - 9)

Amox $C_{16}H_{19}$ (26787)

Azithro $C_{38}H_{72}$ (83905

Ciprofl $C_{17}H_{18}$ (85721-

Sulfameth $C_{10}H_{11}$ (723-4

Trimeth $C_{14}H_{18}$ (738-

Anti-convulsar Carbama $C_{15}H_{12}$

> Pheny $C_{15}H_{12}$ (57-4)

Primi $C_{12}H_{14}$ (125-3)

Beta blocker Aten $C_{14}H_{22}$ (29122

Narcotic/Opiat

 $C_{21}H_{2}$ (76-9

 $C_{16}H_{13}$ (439-1

Meprol $C_{9}H_{18}$ (57-5 Anti-depressan

Fluox $C_{17}H_{18}$

(54910-

Statin Atorva

> $C_{33}H_{35}$ (134523

Flame retarda

Tris(2-carb phosphine C_9H_1 (5961-

Tris(1-chlore phosphate $C_{9}H_{18}C_{18}$ (13674

Tris(1,3-di propyl)pł (TDC

 $C_9H_{15}C$ Pesticide N,N-Die methylbenzan

(134 - 0)Stimulant

> Caff C_8H_{10} (58-0)

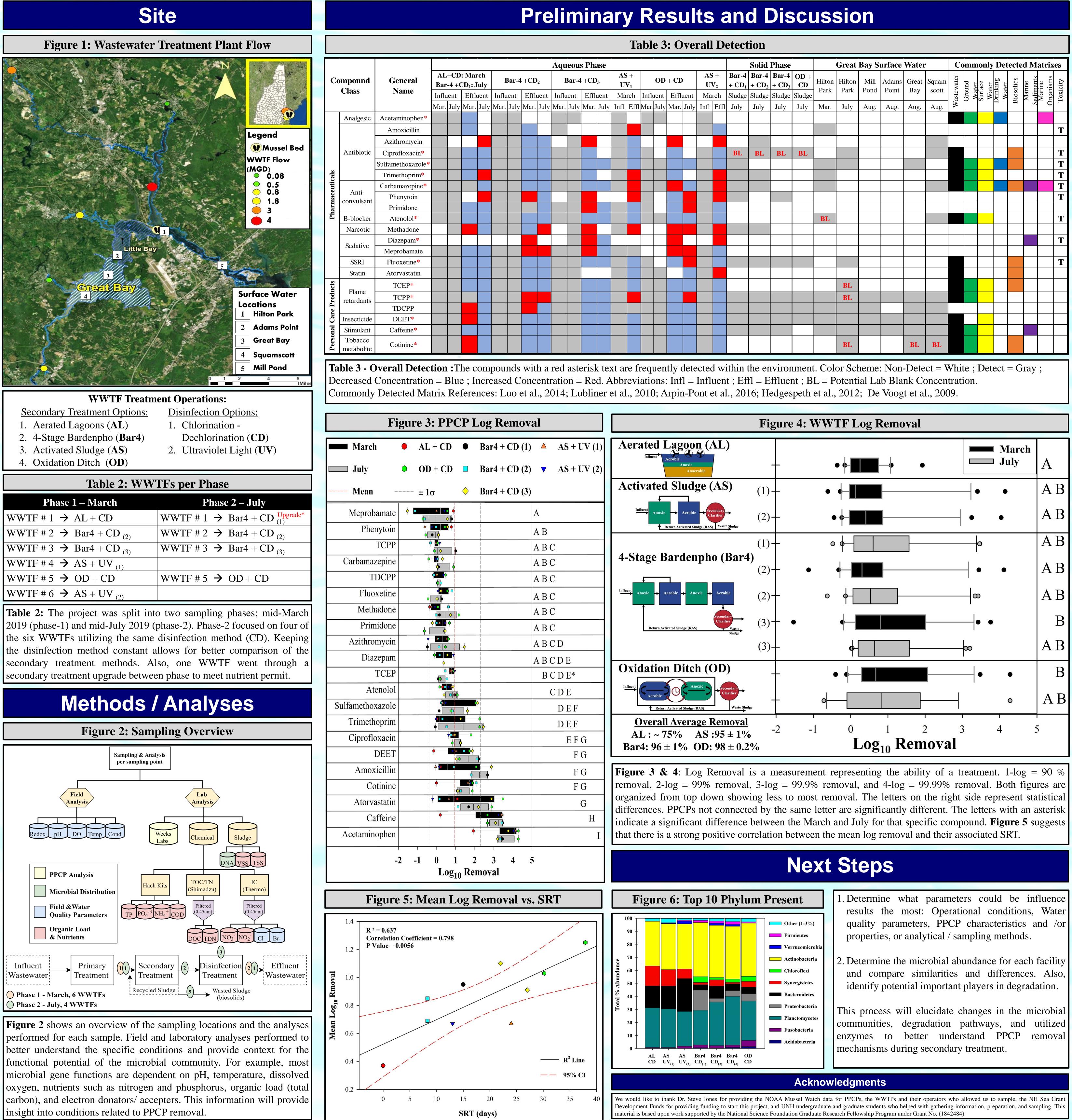
Tobacco metal

Coti $C_{10}H_{1}$ (486-5)

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able 1: PPCP Analytes			
PPCP Name hemical Formu (CAS#)	la Structure	Common Brand Names	Associated Conditions
taminophen $C_8H_9NO_2$ 103-90-2)	CH ₃	Tylenol, Mapap, Ofirmev	Fever, Severe to Moderate Pain, Minor aches
noxicillin ${}_{5}H_{19}N_{3}O_{5}S$ 5787-78-0)	H ₂ H ₂ H ₂ H ₂ H ₃ H ₄ H ₂ H ₂ H ₃ H ₄ H	Moxatag, Dispermox, Amoxil, Trimox, Wymox	Bacterial infections
thromycin ${}_{3}H_{72}N_{2}O_{12}$ 905-01-5)	Ho H ₅ CW ^{III} H ₅	Zithromax, Zmax,	Bacterial infection
Frofloxacin $H_{18}FN_3O_3$ (721-33-1)	HO N CH ₃	Cipro, Proquin	Bacterial infections
methoxazole $_{0}H_{11}N_{3}O_{3}S$ 723-46-6)		Sulfatrim, Bactrim	Bacterial infections
methoprim $_{4}H_{18}N_{4}O_{3}$ 738-70-5) wlsant	H ₃ C CH ₃	Primsol	Bacterial infections
bamazepine $_{15}H_{12}N_2O$ 298-46-4)		Carbatrol, Epitol, Equetro, Tegretol	Epilepsy, Seizures, Nerve pain, Bipolar
henytoin $\langle _{_{5}}H_{12}N_{2}O_{2}$ 57-41-0)	NH	Phenytek, Dilantin	Epilepsy, Seizures
rimidone ${}_{2}H_{14}N_{2}O_{2}$ 25-33-7) <i>er</i>	H ₃ C H ₃ C HN NH ₂	Mysoline, Primaclone, Desoxyphen- obarbital	
Atenolol ${}_{4}H_{22}N_{2}O_{3}$ (122-68-7) (Dpiate		Tenormin	High blood pressure
ethadone ₂₁ H ₂₇ NO 76-99-3)	H ₃ C CH ₃ H ₃ C CH ₃	Dolophine, Methadose	Severe pain
9iazepam ₅ H ₁₃ ClN ₂ O 139-14-5)	H ₃ C N CI	Valium	Anxiety, Muscle spasms, Seizures, Agitation
57-53-4)		Equanil (Wyeth), Meprospan, Miltown	Anxiety
essant agent (SS luoxetine ₇ H ₁₈ F ₃ NO 4910-89-3)	SRI)	Prozac, Sarafem, Adofen	Depression, Anxiety, Bipolar, Obsessive Compulsive Disorder, Panic
orvastatin ₃ H ₃₅ FN ₂ O ₅ 4523-00-5)		Lipitor	High Cholesterol
carboxyethyl) hine (TCEP) C ₉ H ₁₅ O ₆ P 961-85-3)		O H	Prevent Fire
hloro-2-propyl hate (TCPP) H ₁₈ Cl ₃ O ₄ P 6674-84-5)		CI	Prevent Fire
,3-dichloro-2- yl)phosphate FDCPP) H ₁₅ Cl ₆ O ₄ P		cı	Prevent Fire
- Diethyl-3- nzamide (DEE' ₁₂ H ₁₇ NO 34-62-3)	Γ)	OFF!, CVS Insect Repellent Woodland Trail	Insect repellant
Caffeine ${}_{8}H_{10}N_{4}O_{2}$ 58-08-2) netabolite		Starbucks, Dunkin Donuts, Maxwell House, Folgers	Drowsiness, Headaches
Cotinine ${}_{10}H_{12}N_{2}O$ -86-56-6)		1 OIGERS	Depression, PTSD, anxiety, fear-related behavior



WWTF Treatm	ent Operatio			
Secondary Treatment Options:	Disinfection			
1. Aerated Lagoons (AL)	1. Chlorin			
2. 4-Stage Bardenpho (Bar4)	Dechlo			
3. Activated Sludge (AS)	2. Ultravi			
4. Oxidation Ditch (OD)				
Table 2: WWTFs per Ph				
	IFS per Ph			
Phase 1 – March	rs per Ph Pł			
	Pl WWTF # 1			
Phase 1 – March	Pl			
Phase 1 – March WWTF # 1 \rightarrow AL + CD	Pl WWTF # 1			

