

Srishti Medical Waste Update
CAMPAIGN FOR PROPER MEDICAL WASTE DISPOSAL
April 1997

Microwaving Technology Gets Approval.

The Central Pollution Control Board has recently given permission for Microwaving technology to decontaminate and treat infectious waste as per the submitted technical parameters. The facility is to be a centralized one in Delhi, with the machine being imported by Sanitech, who are one of the few manufacturers of the equipment in the world.

It will be run on a commercial basis by a private entrepreneur along with the company. The permission has been given for treatment of all waste except those, which are cytotoxic, radioactive, large metal items, contaminated animal carcasses and body parts. The unit will be able to cater to waste from appx. 15,000 beds initially, and may then increase its capacity. The estimated cost to each hospital is Rs. 20 per kilo, which is a figure which appears to be derived after discussions with various nursing homes in the capital. Other units may be put up, both in Delhi and outside, if they are viable. The technology was not on the original CPCB guidelines, but it has the power to approve technologies as and when permission is sought.

Most of you who would have received Srishti's compilation on alternative technologies will know the widespread use of microwaving and autoclaving across the world for this purpose. In fact, these technologies are on the upswing as incinerators command much less of the sales than before. In the US, the revenue share of incinerators has fallen from 79.2% in 1990 to 37% by 1997. Microwaving has increased, meanwhile, from 1.4 % to 11.2% in the same period, and autoclaves and steam-sterilization has leaped up from 17.2% to 44.2%. Even chemical means of disinfection have risen in this period from 2.3% to 7.5%. This has been triggered off because of the dangerous emissions from incinerators, for which higher regulation only increases the costs. Other technologies, on the other hand, are much safer and more economical.

The permission for autoclaves is significant because this is the first time a developing country will be using such a technology for a problem faced across the world. It is also significant because it is a step in the right direction, and away from a blind propagation of incineration, which has been till now the prescribed means of infectious waste disposal. The move is rooted in a Supreme Court order of May 7th, 1997, based on an intervention by Srishti, where hospitals were required to install incinerators and or alternative devices. The CPCB was directed to make standards for all these.

However, installing such technologies takes time and besides, these may not be found everywhere. There are other solutions, which have to be tried out. Srishti is currently helping implement the CPCB standards in a small hospital. The work includes making systems, options of technology, command & control, awareness and making the system a part of the work ethos

of a hospital. A manual on hospital waste management and its practical implementation is also underway. More information about these will be sent to you in the next edition of the bulletin.

If you have any information, would like to share your views and work, or have any queries, write in at the above address to Ravi Agarwal, Megha Kela or Samir Nazareth.