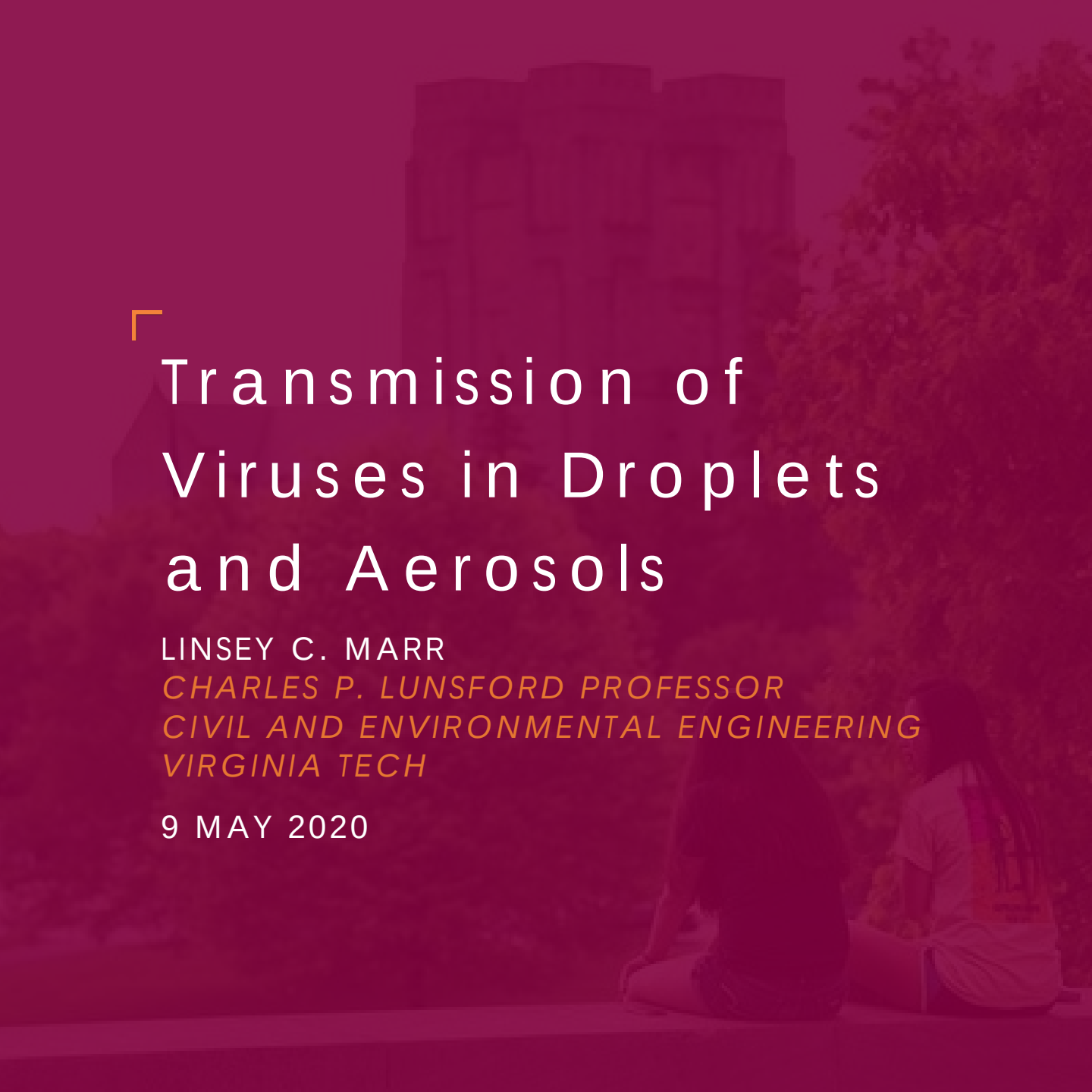




# Transmission of Viruses in Droplets and Aerosols

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*CHARLES P. LUNSFORD PROFESSOR  
CIVIL AND ENVIRONMENTAL ENGINEERING  
VIRGINIA TECH*

9 MAY 2020



# Topics

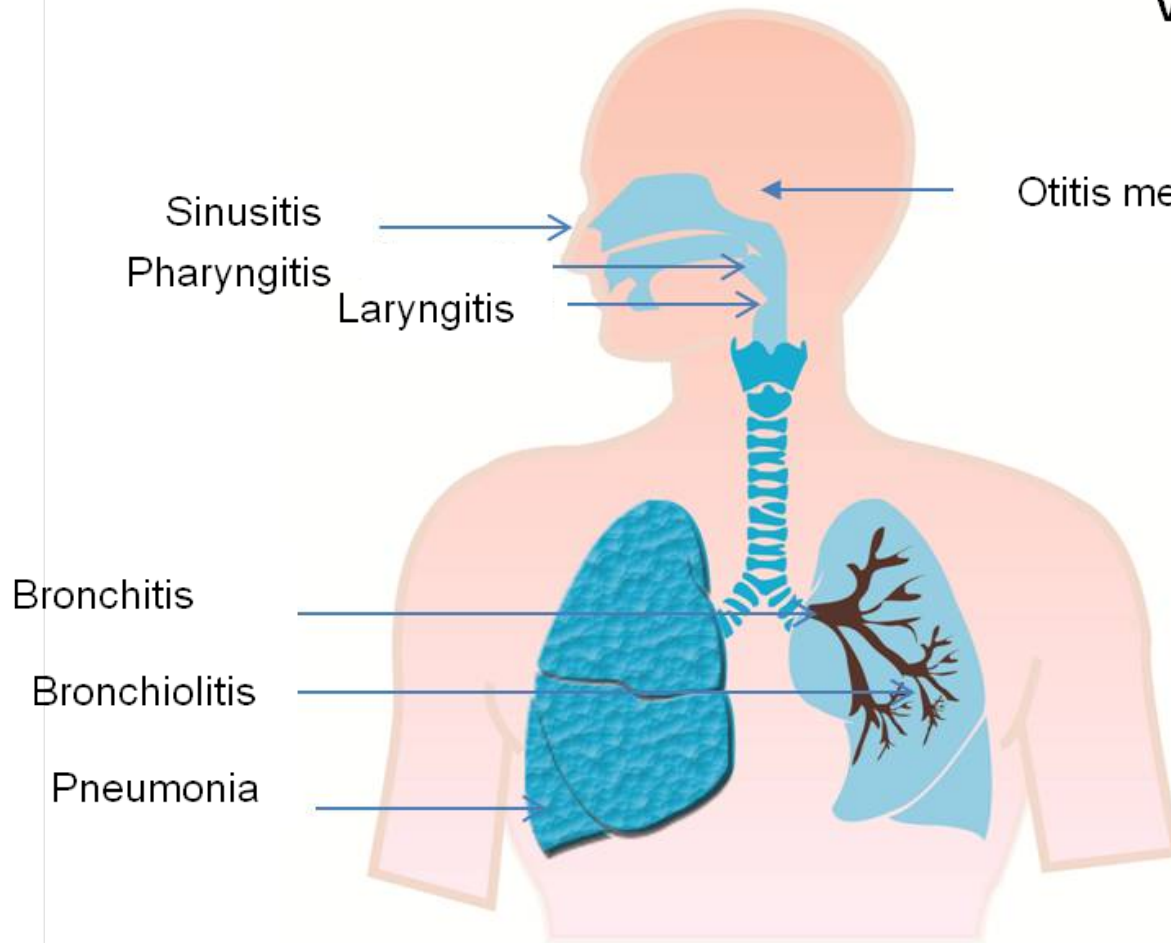
1. Respiratory viruses
2. Transmission modes
3. Size distributions and evaporation
4. Virus aerosol dynamics
5. Impact of temperature and humidity
6. Masks
7. SARS-CoV-2

## Viruses that infect the upper respiratory tract

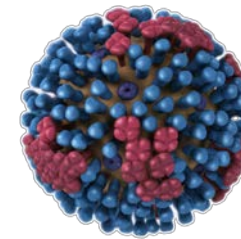
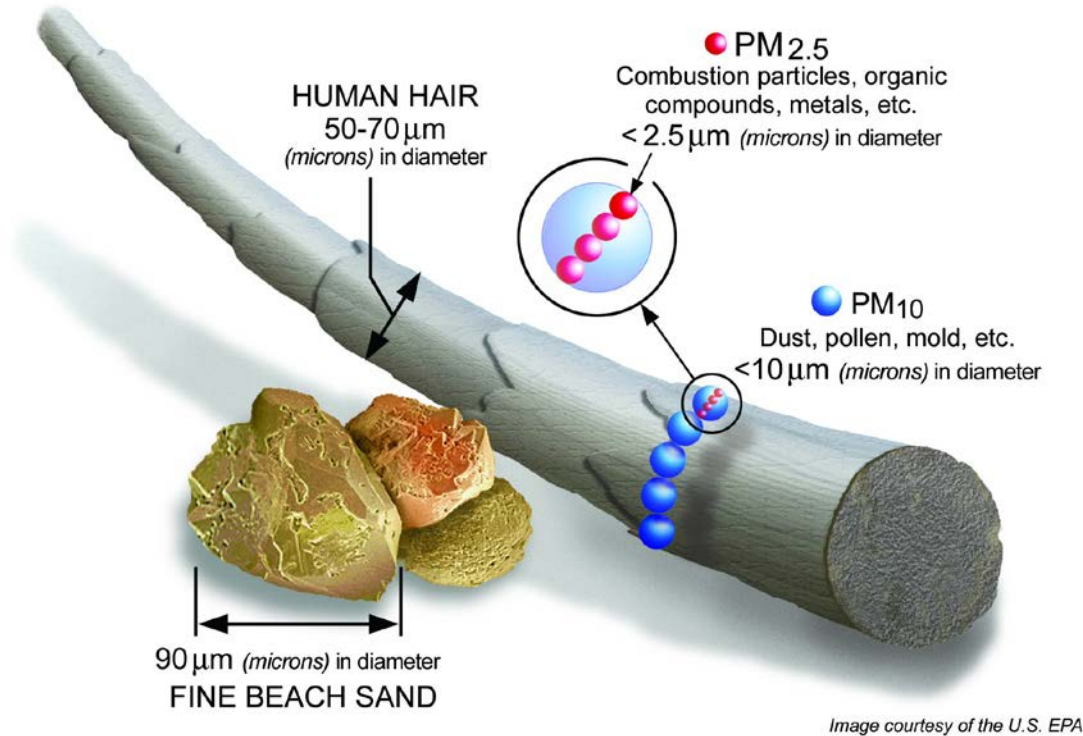
Rhinovirus  
Coronavirus  
Influenza virus  
Parainfluenza virus  
Respiratory Syncytial virus  
Herpesvirus  
Adenovirus  
Bocavirus  
Coxsackivirus

## Viruses that infect the lower respiratory tract

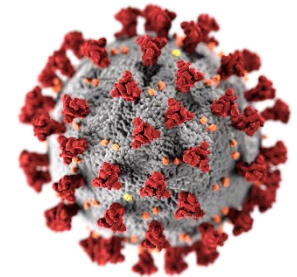
Influenza virus  
Parainfluenza virus  
Respiratory Syncytial virus  
Adenovirus  
Bocavirus  
Metapneumovirus



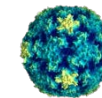
# Virus Size



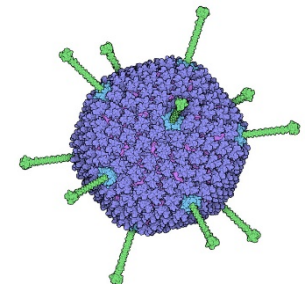
influenza  
0.1 μm



SARS-CoV-2  
0.12 μm



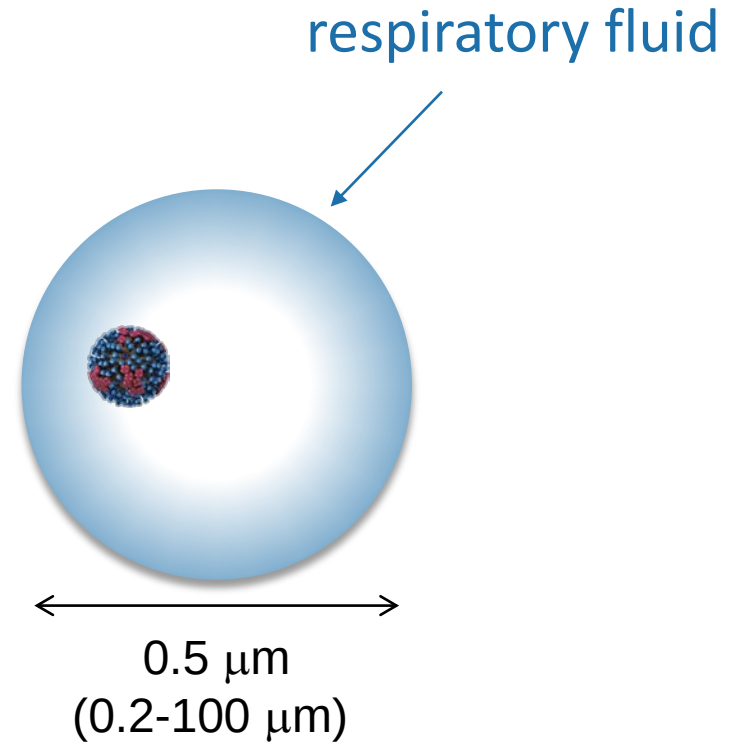
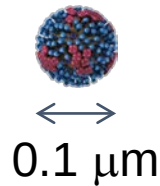
rhinovirus  
0.03 μm



adenovirus  
0.1 μm

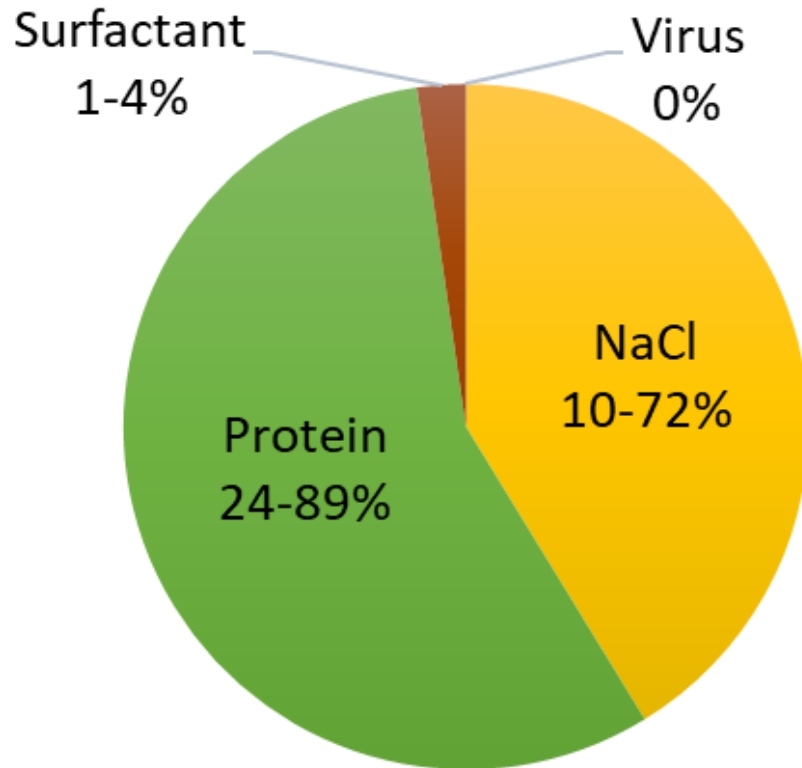
# Size Matters

- Airborne virus is not naked!



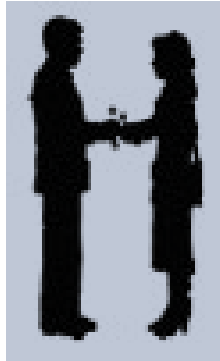
- Size determines
  - Lifetime in the atmosphere
  - Where it deposits in the respiratory system

# Droplet Composition

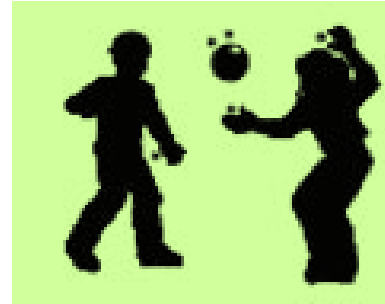


Non-volatiles are  
1-9% of initial  
mass (before  
evaporation)

# Modes of Transmission

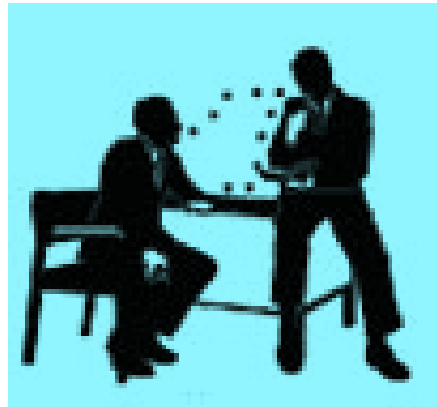


direct contact

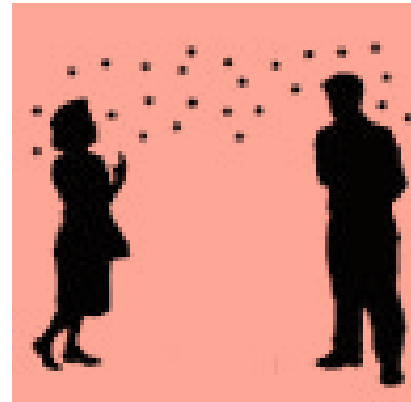


indirect contact

Defined as  $>5\ \mu\text{m}$   
and happening at  
close-range only  
( $<2\ \text{m}$ )



large droplets

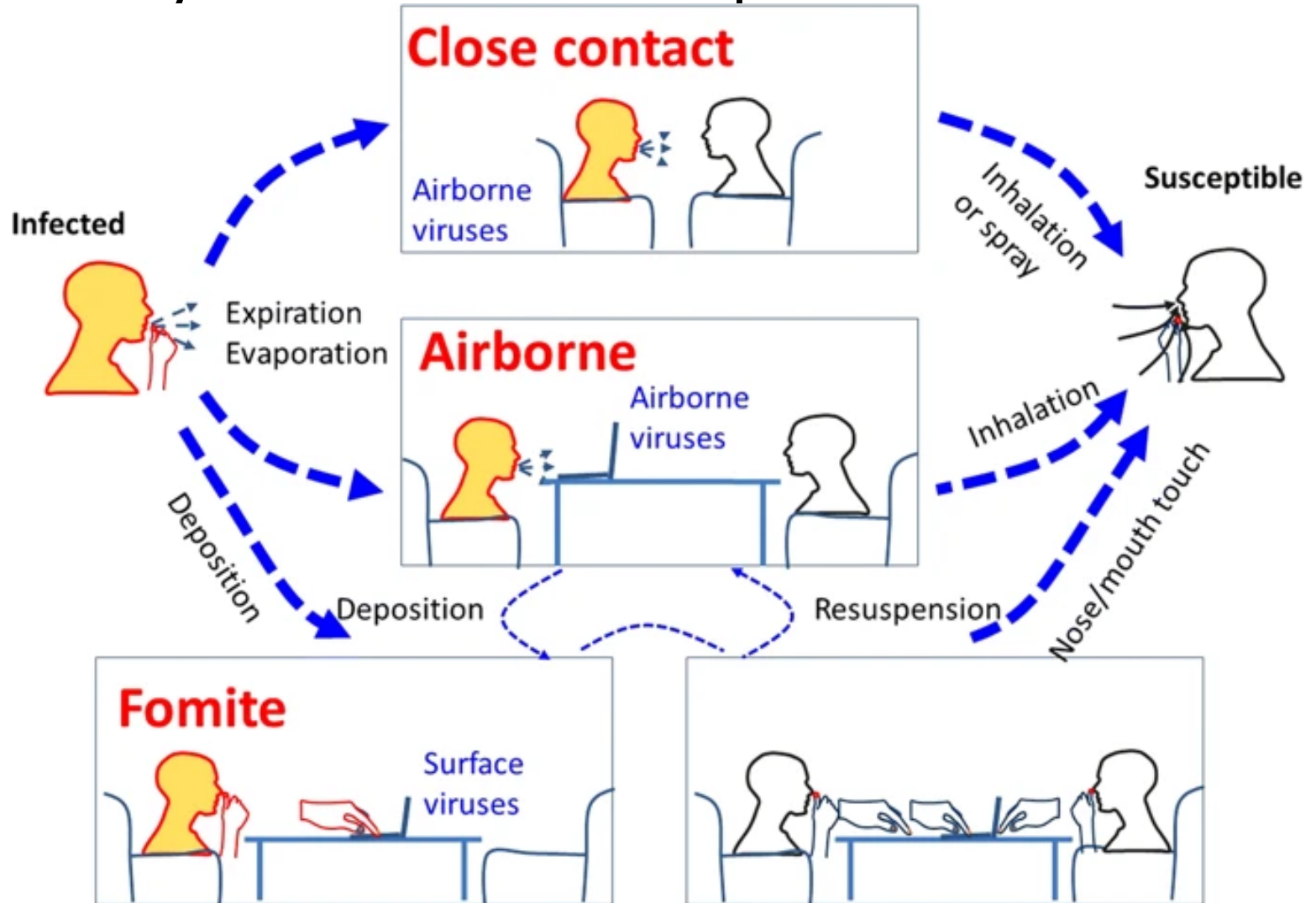


Defined as  $<5\ \mu\text{m}$   
and happening  
mainly at long-  
distance ( $>2\ \text{m}$ )

aerosols

The origin of the  $5\text{-}\mu\text{m}$  cutoff is not clear. This cutoff is not supported by modern aerosol science. This distinction has hampered our understanding of transmission.

# Reality is More Complicated

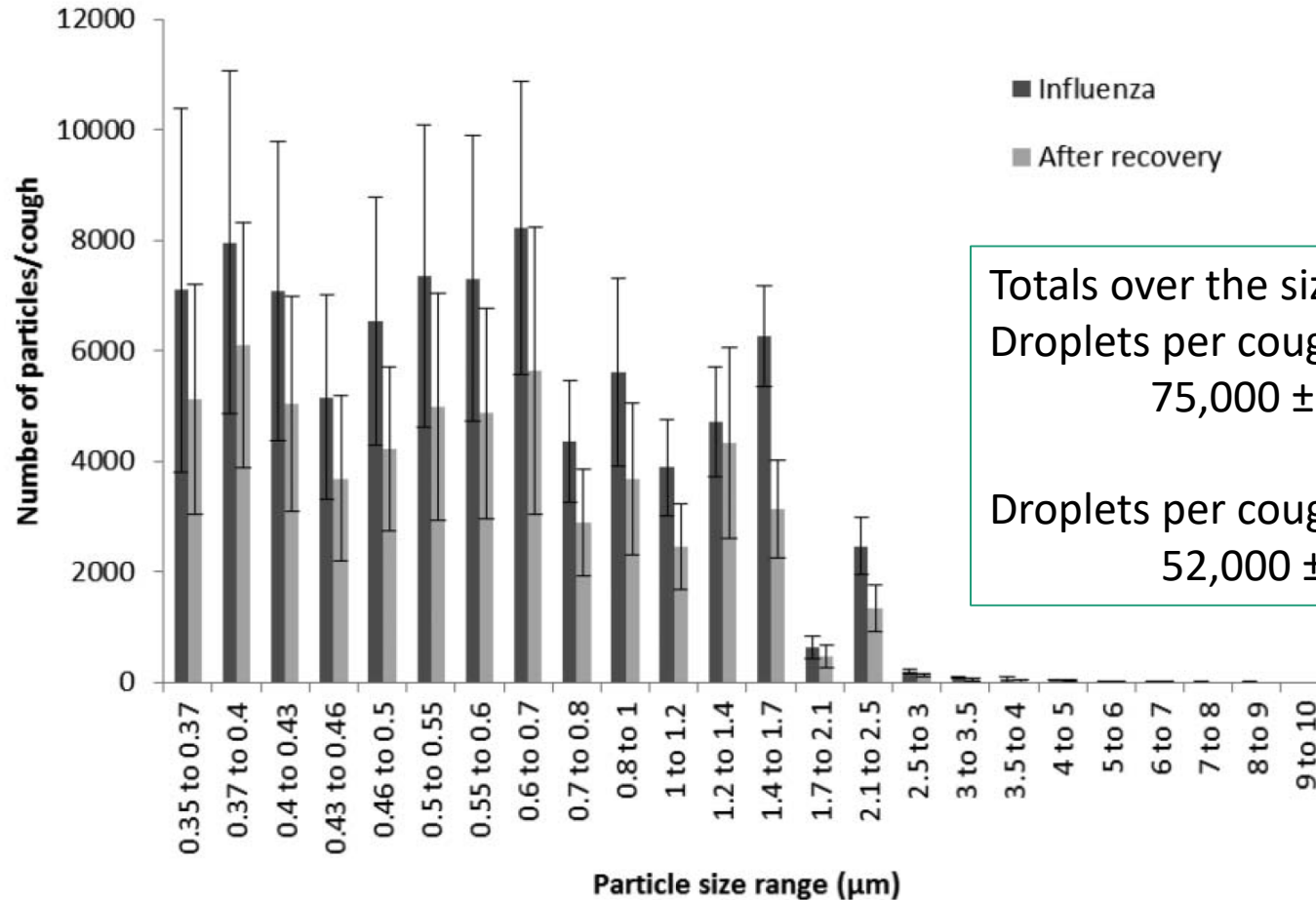




Droplets that are expelled into air can be inhaled, land on people's mucus membranes, or deposit onto surfaces, where someone can touch them or they can be resuspended into air.

How many droplets are there, and how big or small are they?

# Number of Droplets Emitted

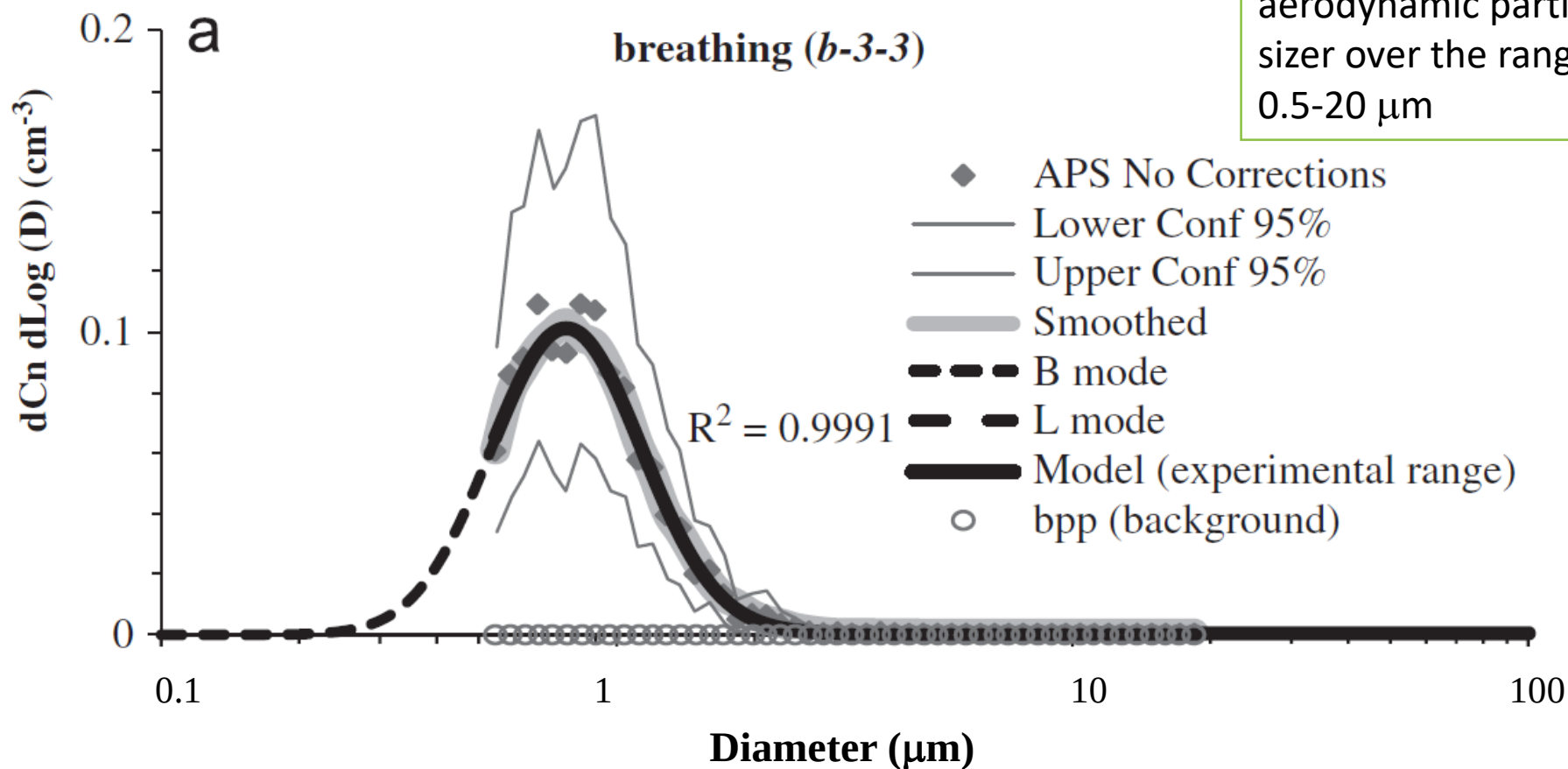


Totals over the size range 0.35-10 μm:  
Droplets per cough when sick  
 $75,000 \pm 97,000$

Droplets per cough after recovery  
 $52,000 \pm 99,000$

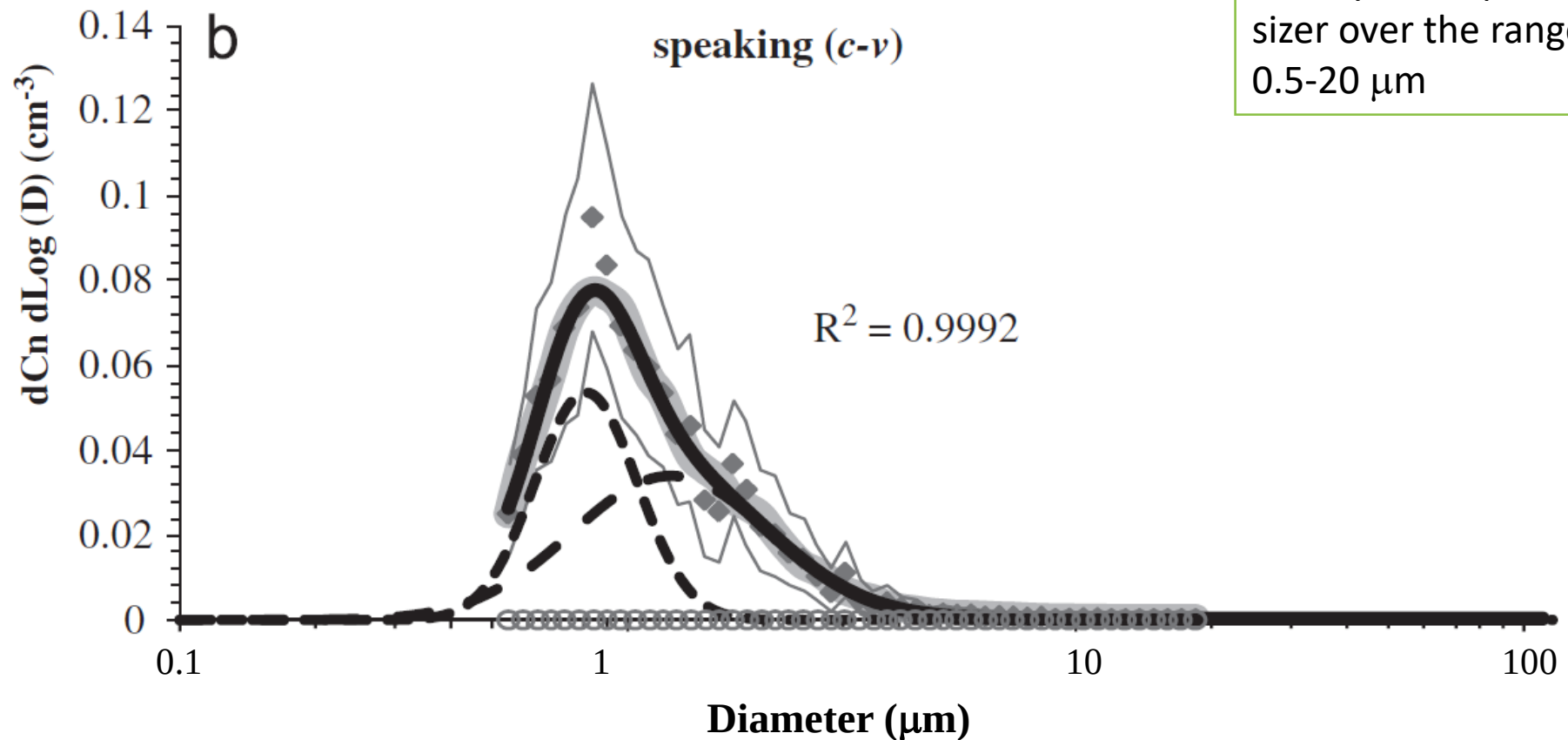
# Size Distributions: Breathing

Measured by  
aerodynamic particle  
sizer over the range  
0.5-20  $\mu\text{m}$



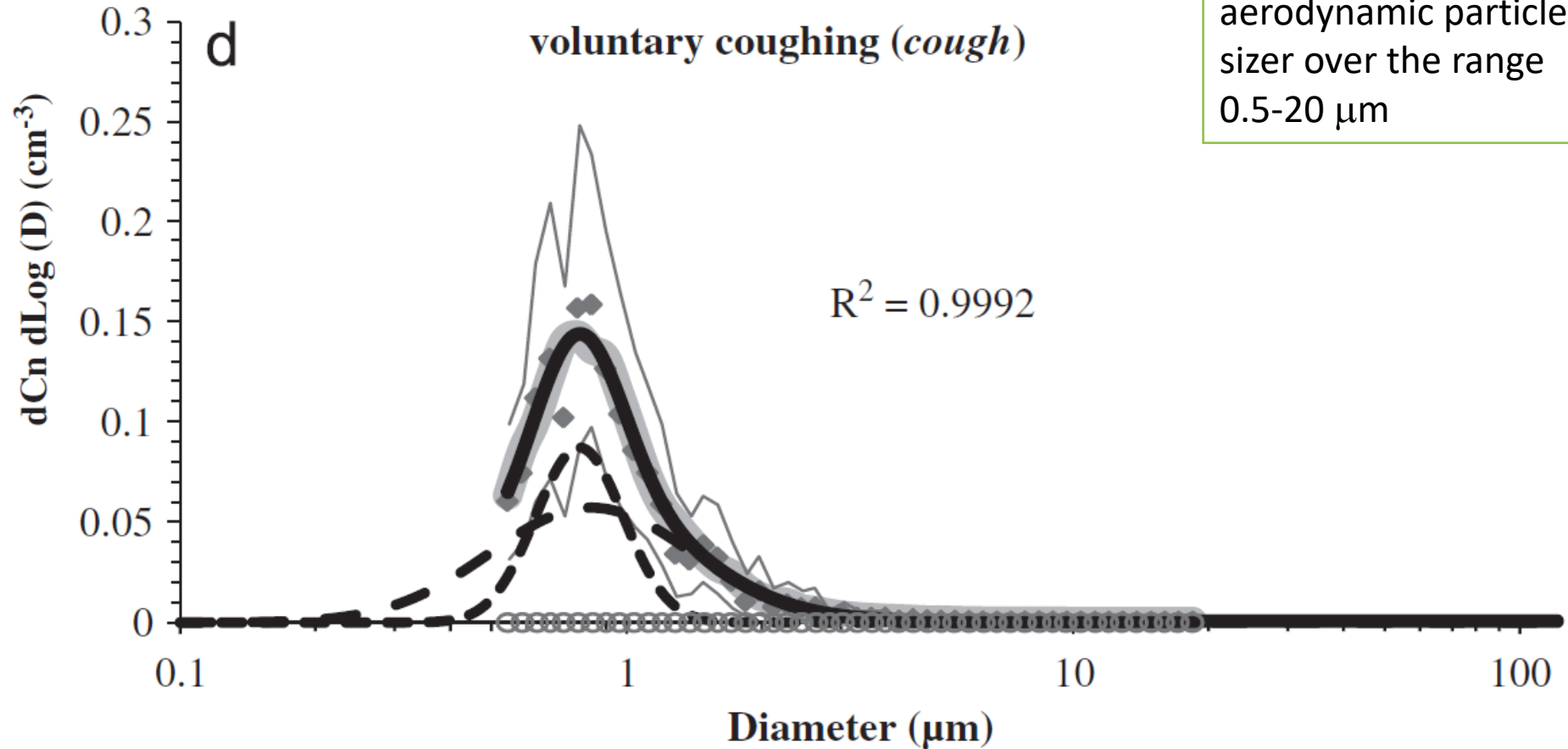
# Size Distributions: Speaking

Measured by  
aerodynamic particle  
sizer over the range  
0.5-20  $\mu\text{m}$



# Size Distributions: Coughing

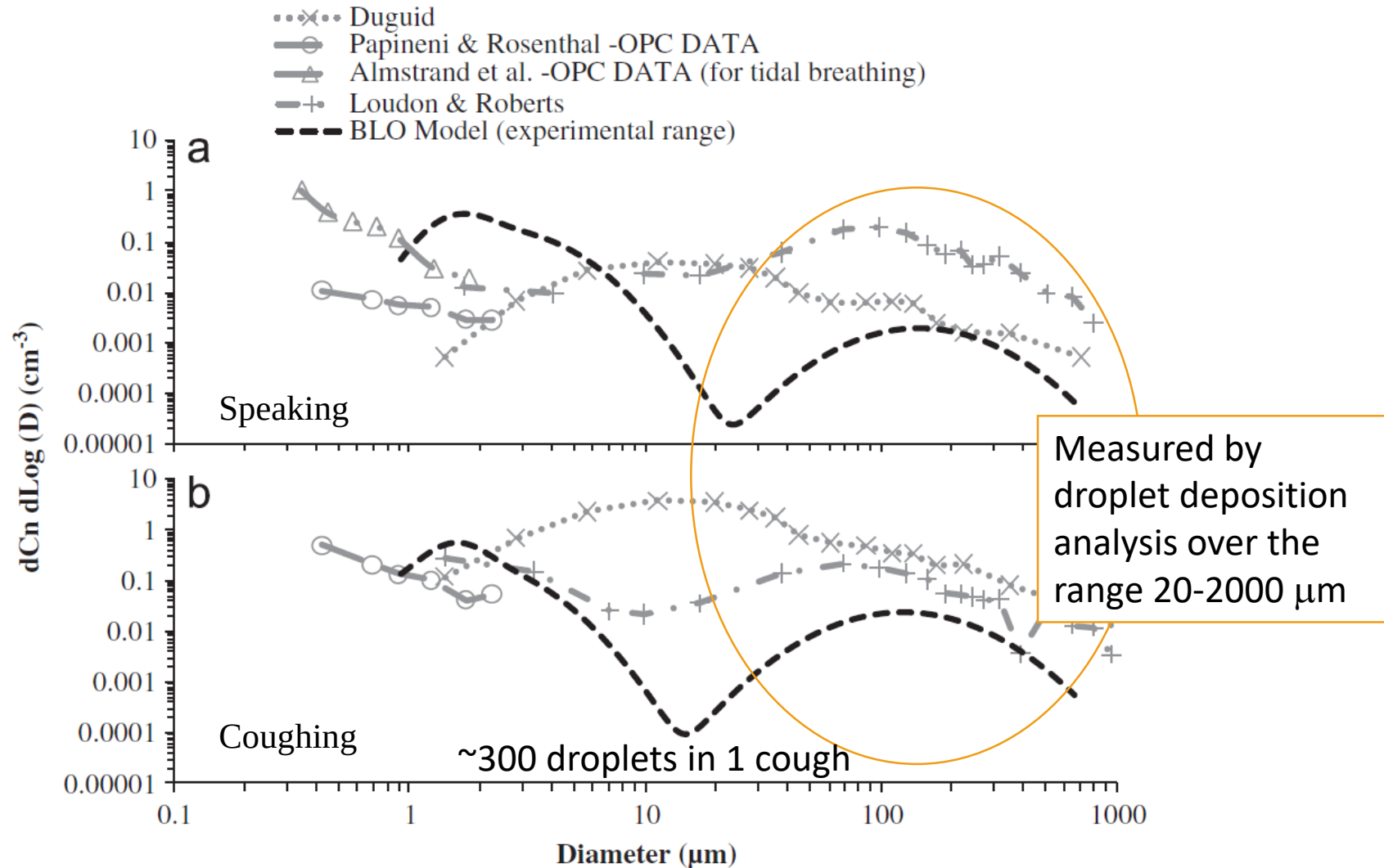
Measured by  
aerodynamic particle  
sizer over the range  
0.5-20  $\mu\text{m}$





# Corrected Size Distributions

Inferred number concentration in upper respiratory tract



Breathing, talking, and coughing release droplets that range from submicron to millimeter in size.

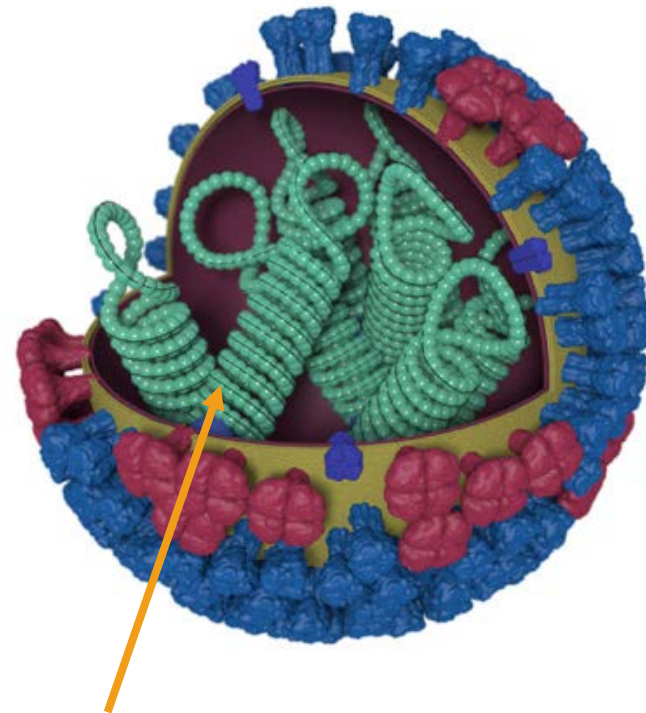
What size droplets carry viruses?

# Virus Detection Methods

## 1. Total virus

- Number of genome copies (GC) determined by molecular techniques (quantitative polymerase chain reaction, qPCR)
- Reflects number of viruses with intact DNA or RNA
- Does NOT indicate whether virus is infectious or not

### AN INFLUENZA VIRUS



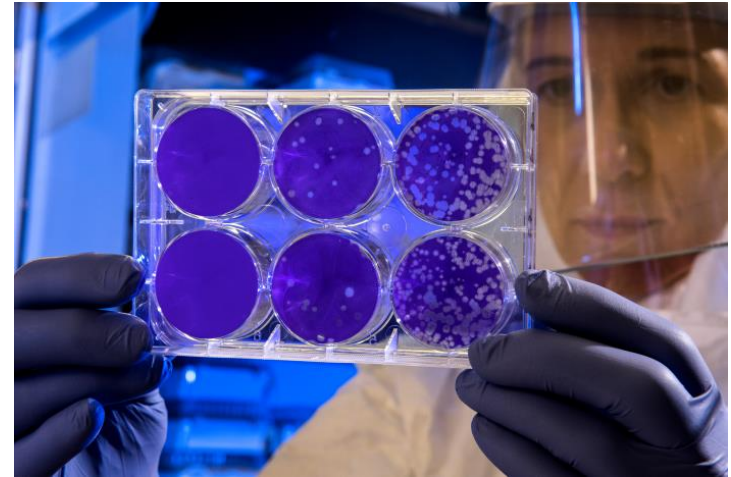
RNA is wrapped around  
the ribonucleoprotein



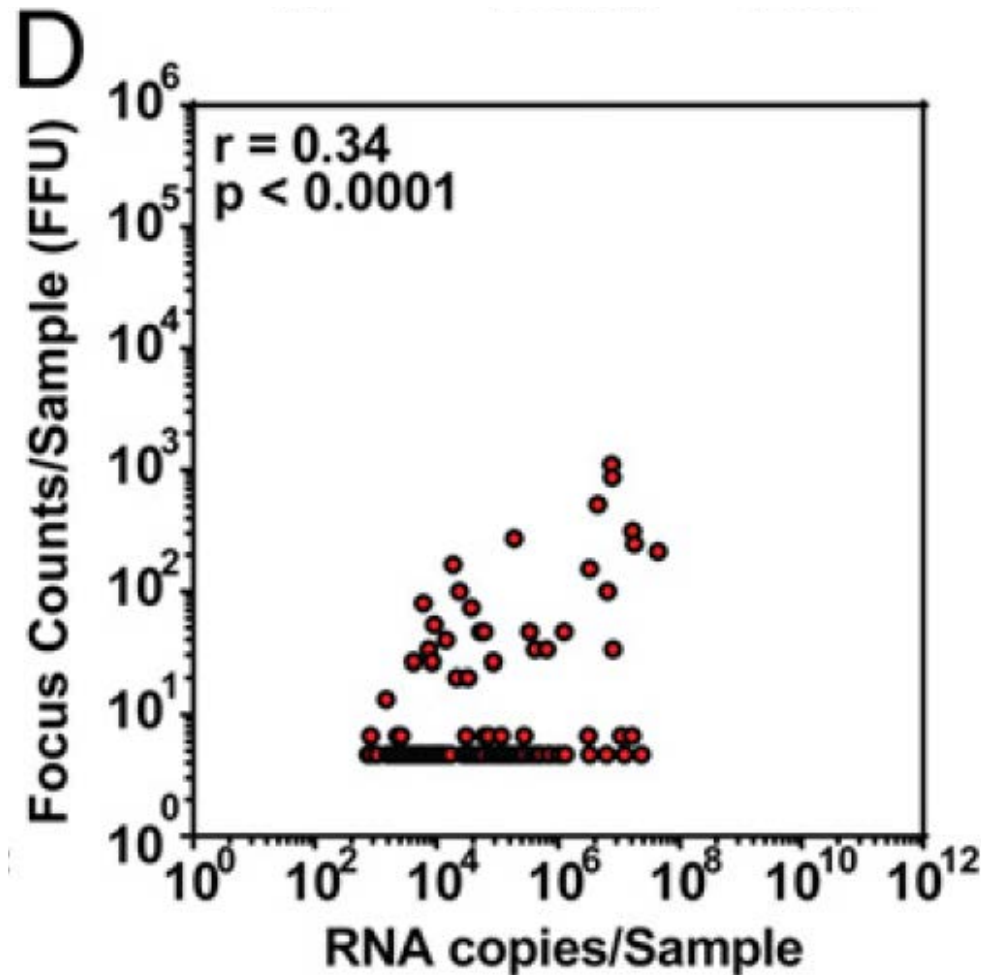
# Virus Detection Methods

## 2. Infectious virus

- Number of viruses that are able to infect cells determined by culture (growing)
- PFU = plaque forming units, number of viruses capable of forming plaques on host cells, focus forming units (FFU) are related
- TCID<sub>50</sub> = median tissue culture infectious dose, concentration at which half of cells are infected after being exposed to the sample

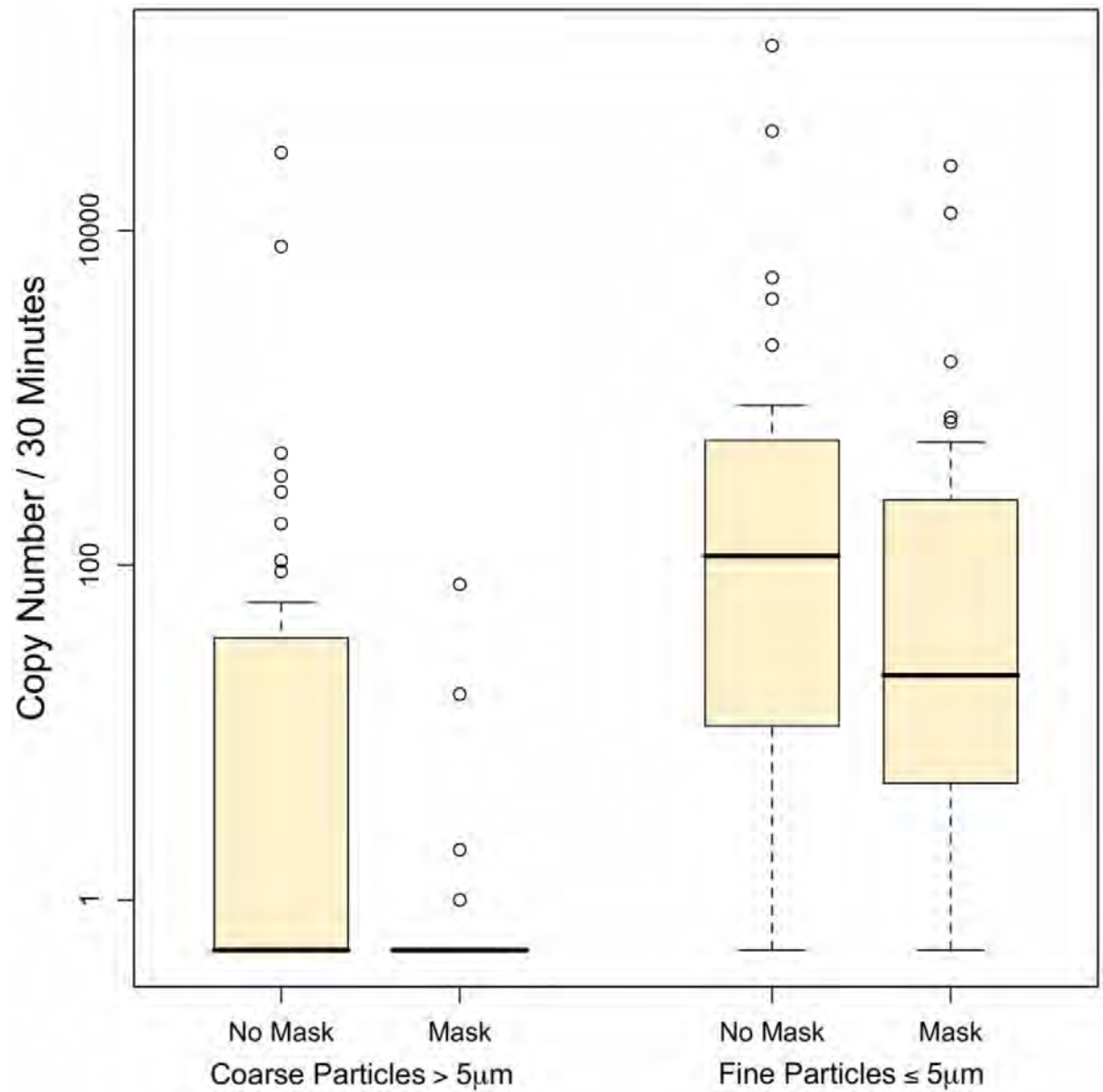


# Relationship Between the Two Methods for Flu Virus



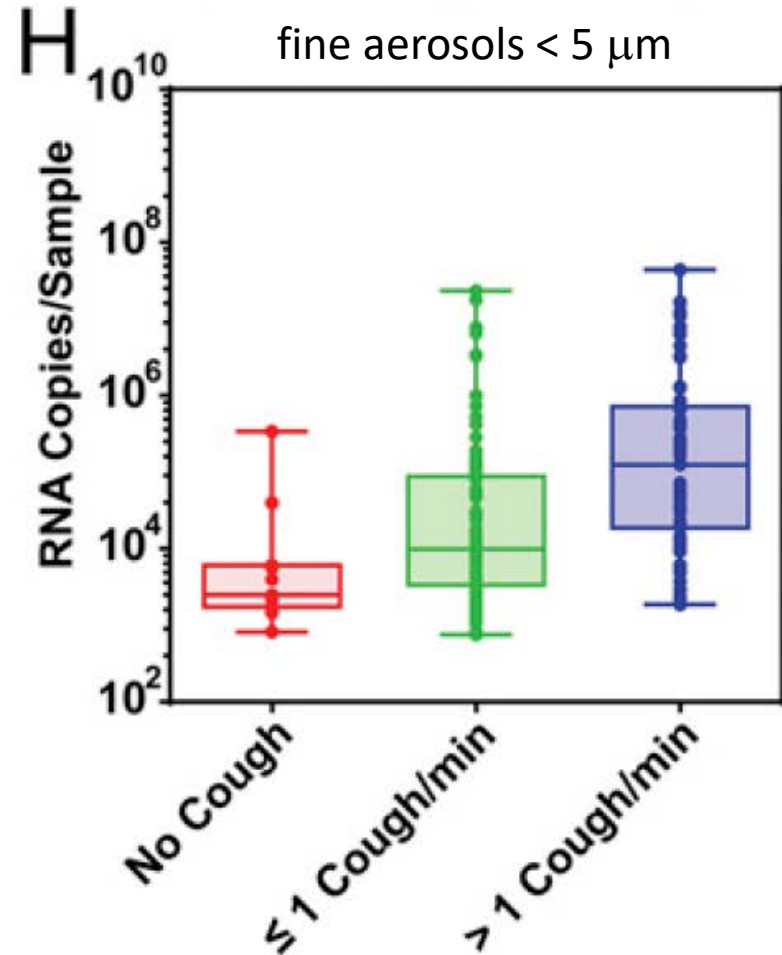
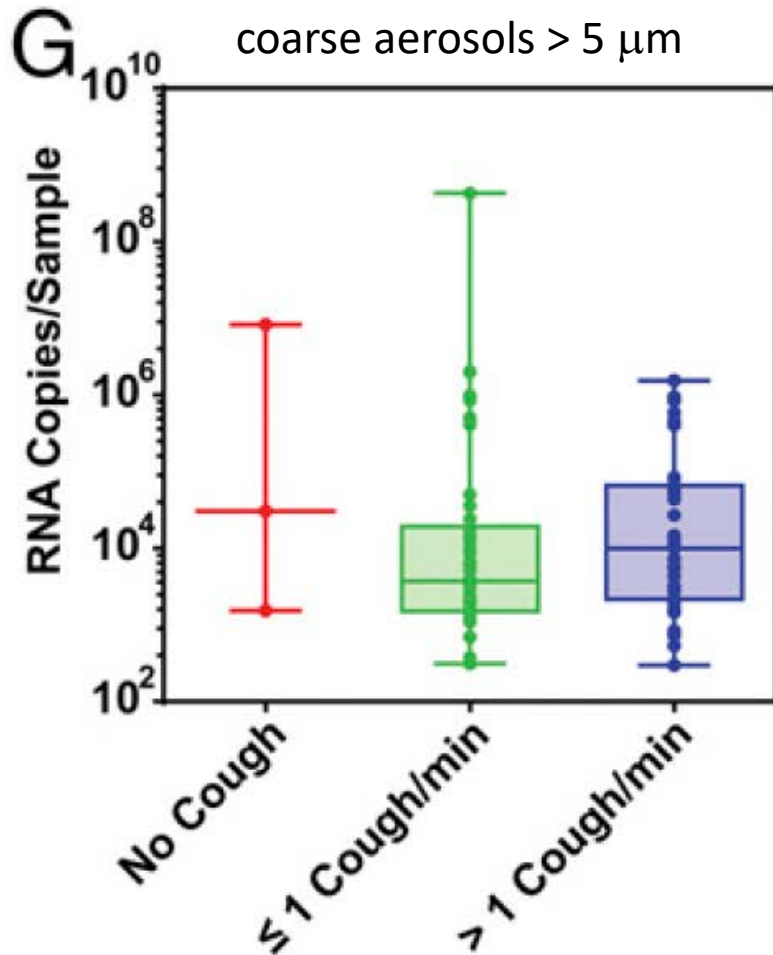
There is a weak, but significant, correlation between virus RNA copies and infectious virus.

# Amount of Flu Virus in Coarse vs. Fine Droplets (Particles) in Exhaled Breath



**Figure 1. Influenza virus copy number in aerosol particles exhaled by patients with and without wearing of an ear-loop surgical mask.** Counts below the limit of detection are represented as 0.5 on the log scale.  
doi:10.1371/journal.ppat.1003205.g001

# Flu Virus in Droplets (Aerosols)

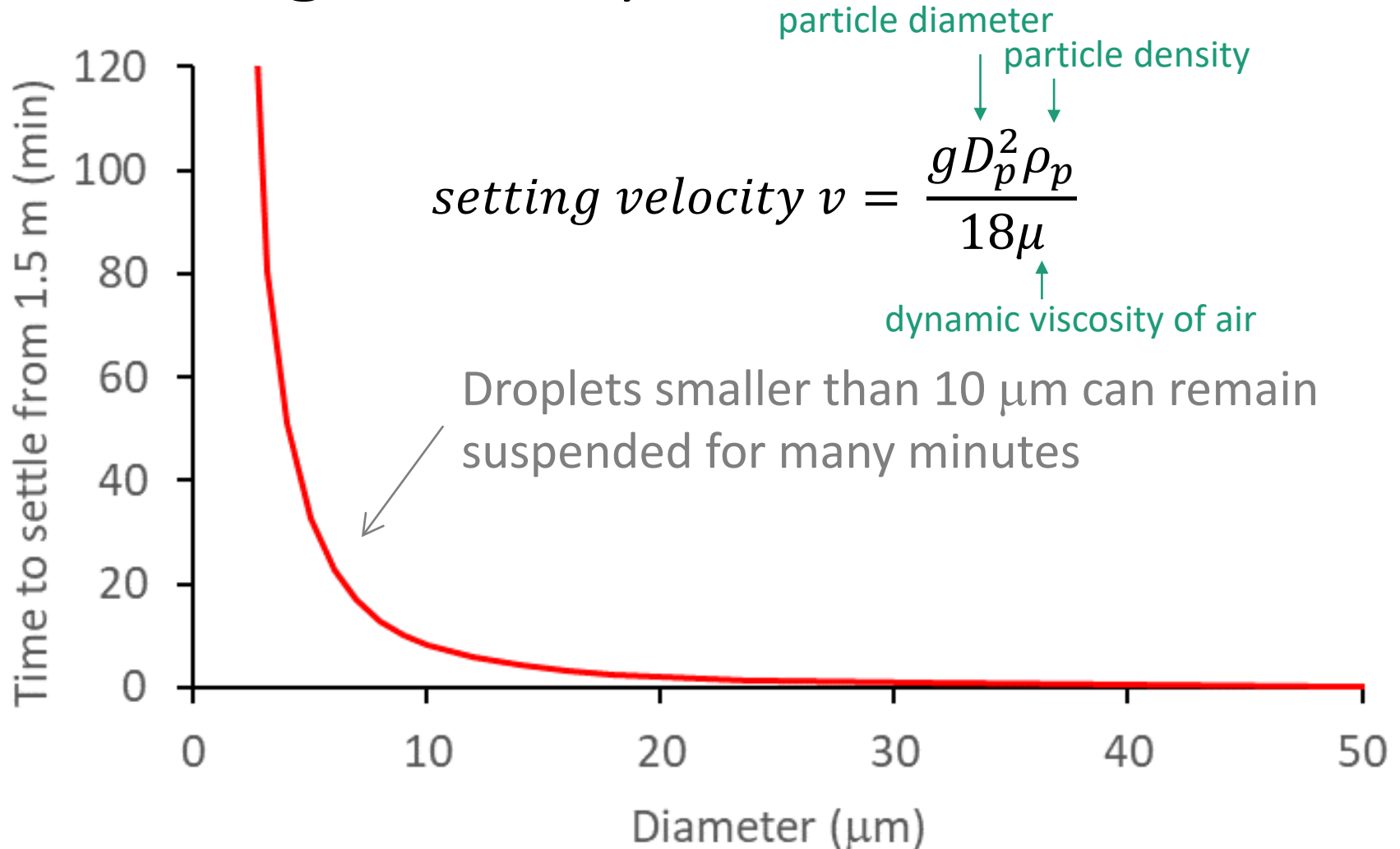


30-min sample  
recite alphabet at 5, 15, 25 min

The majority of flu virus (RNA copies) is found in fine ( $<5\text{ }\mu\text{m}$ ), rather than coarse ( $>5\text{ }\mu\text{m}$ ), droplets/aerosols.

How do these droplets move around the indoor environment?

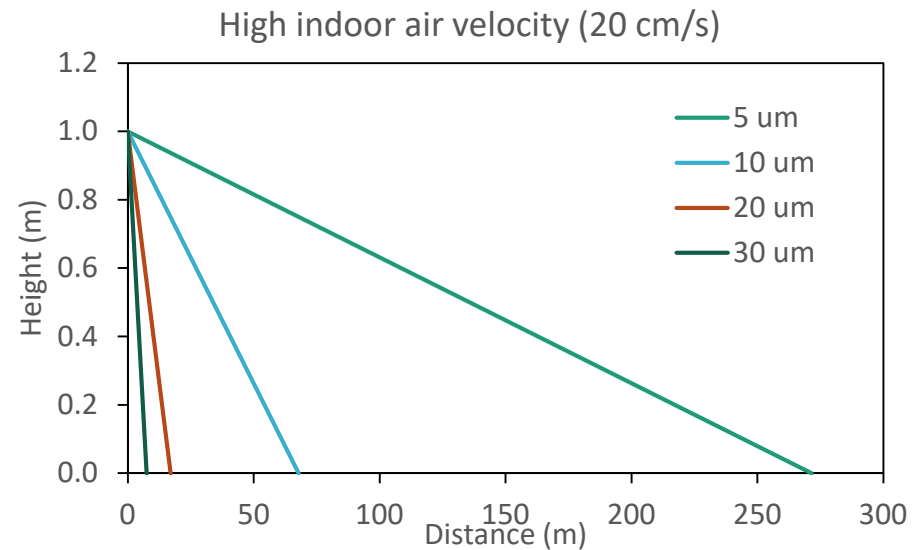
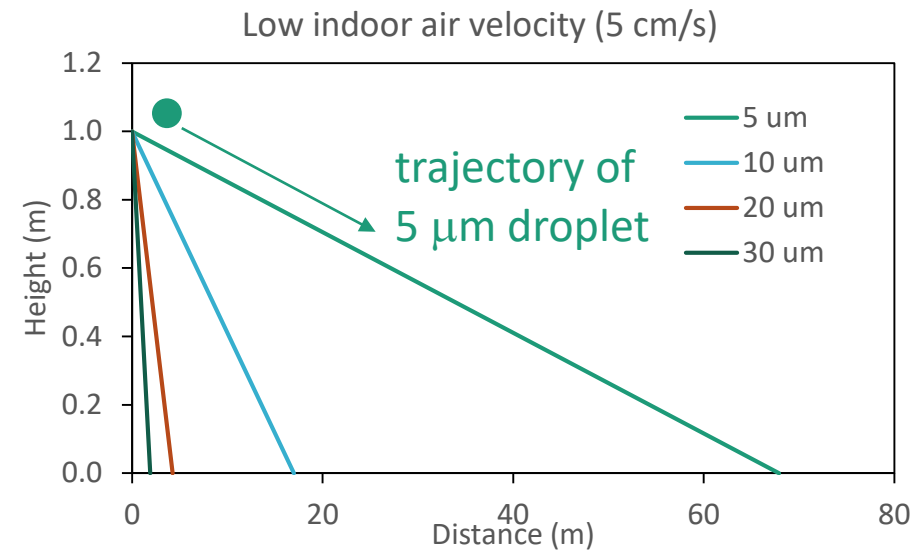
# Settling Velocity and Time



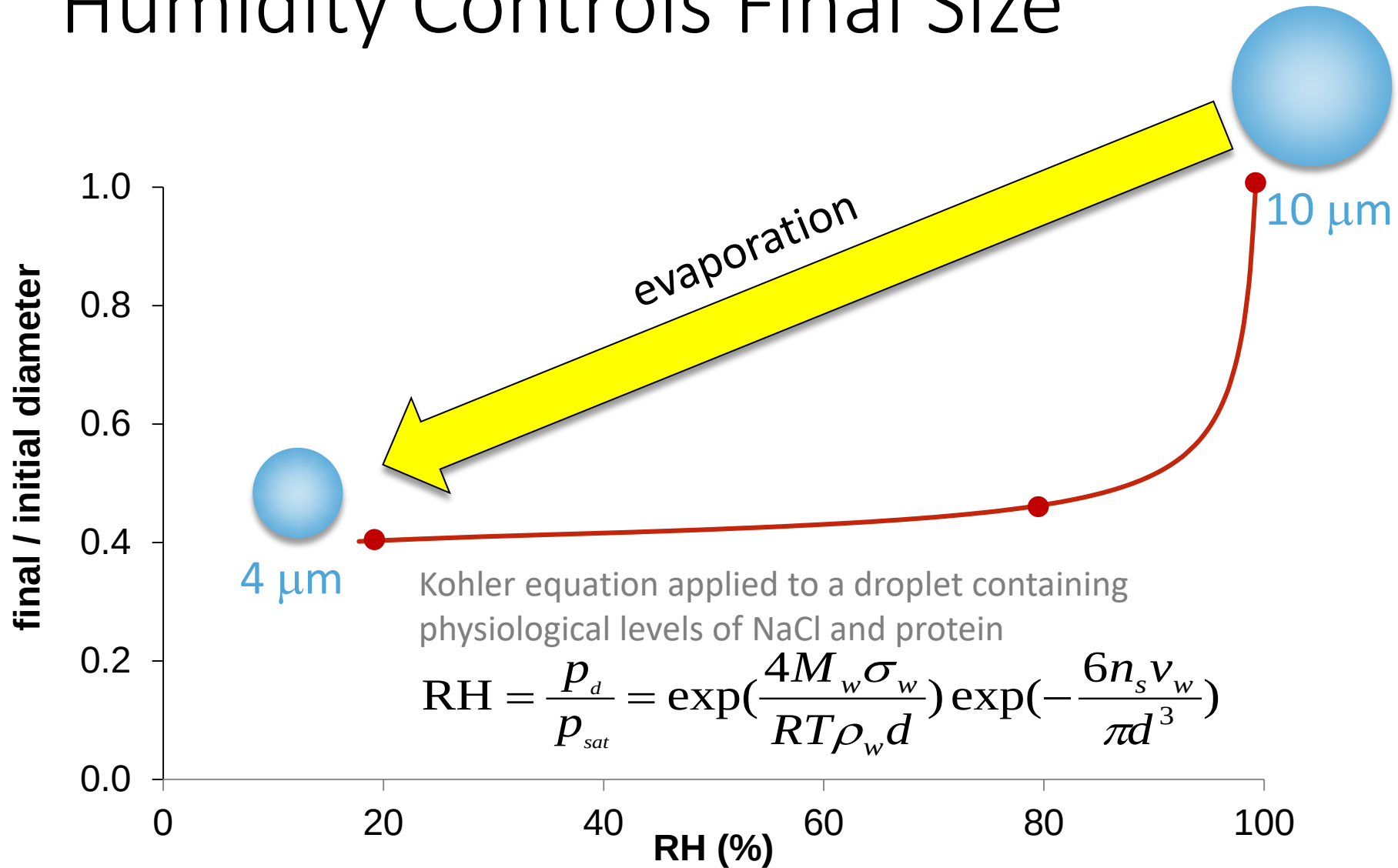


# Droplets Can Travel More Than 2 m

Position of droplets released from a height of 1 m

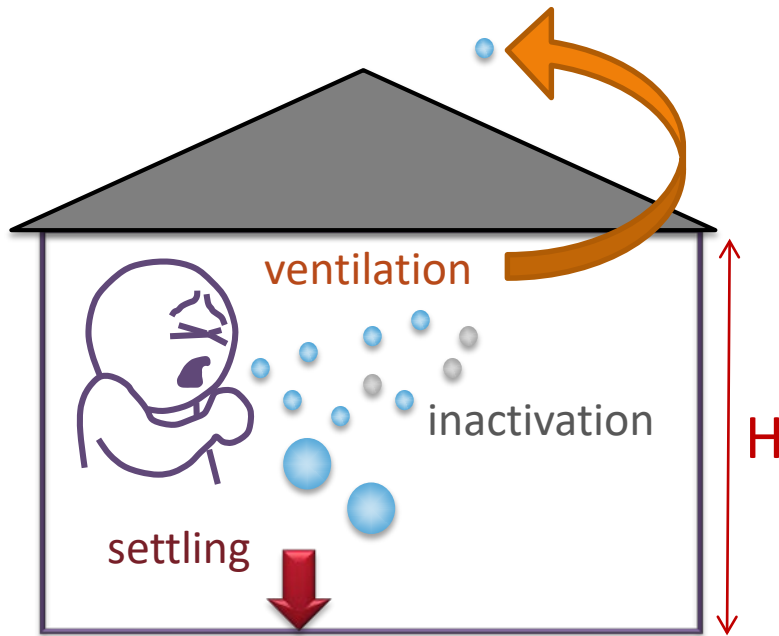


# Humidity Controls Final Size





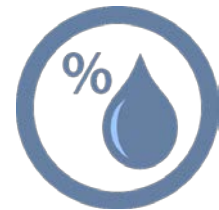
# Virus Dynamics in Indoor Air



$$\frac{dC_d}{dt} = -\left(\frac{v}{H} + \lambda + k\right)C_d$$

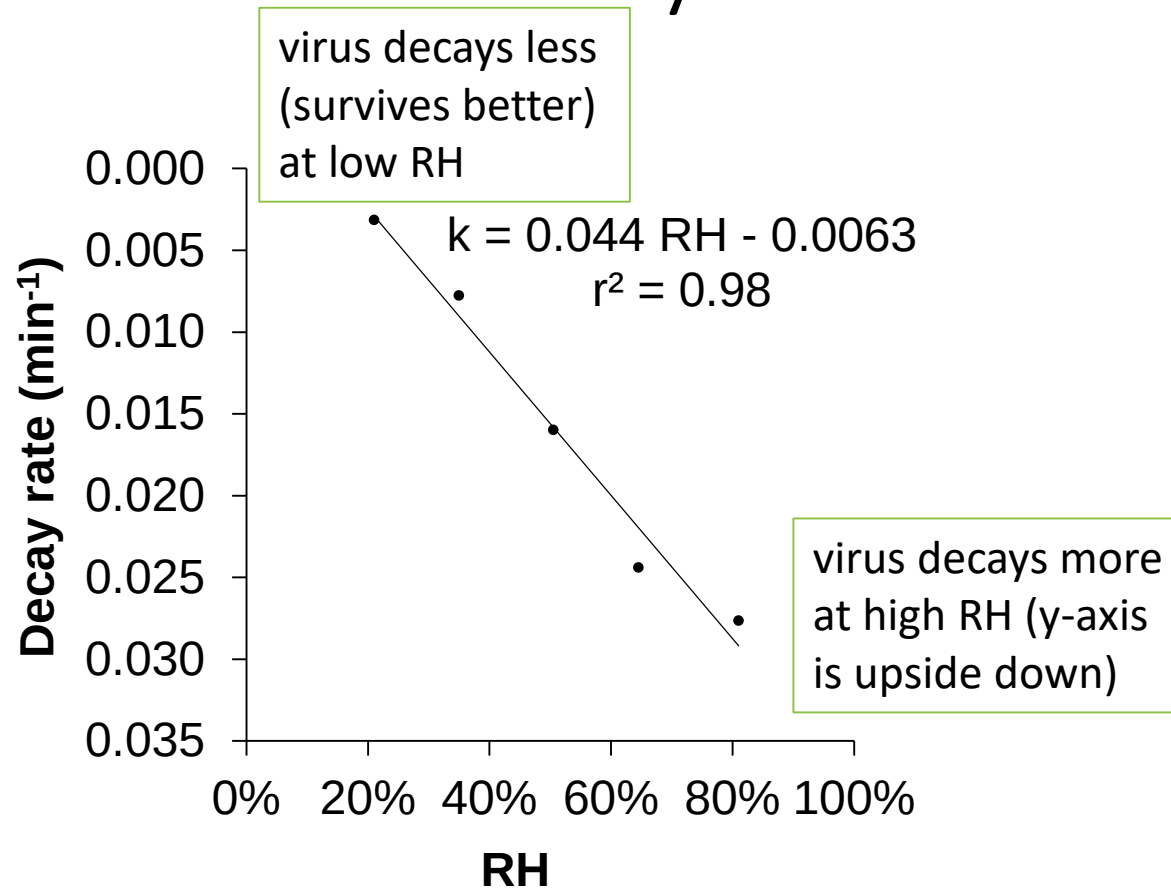
concentration of  
infectious virus in  
aerosols of diameter  $d$

- Settling velocity  $v$  depends on diameter  $d$
- Diameter depends on RH
- Inactivation rate  $k$  depends on RH



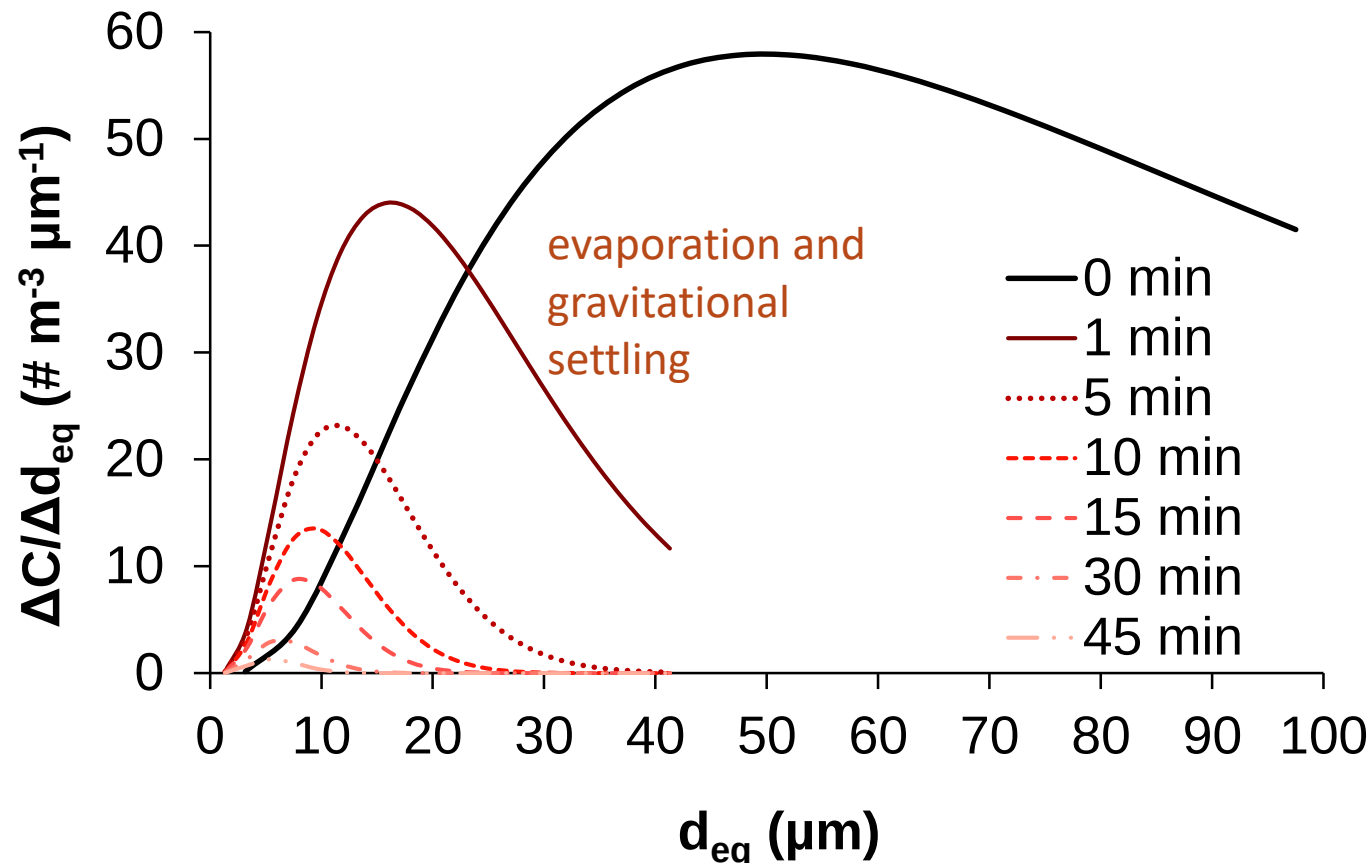
relative humidity (RH)

# Virus Viability vs. RH



# Virus-Aerosols From a Cough

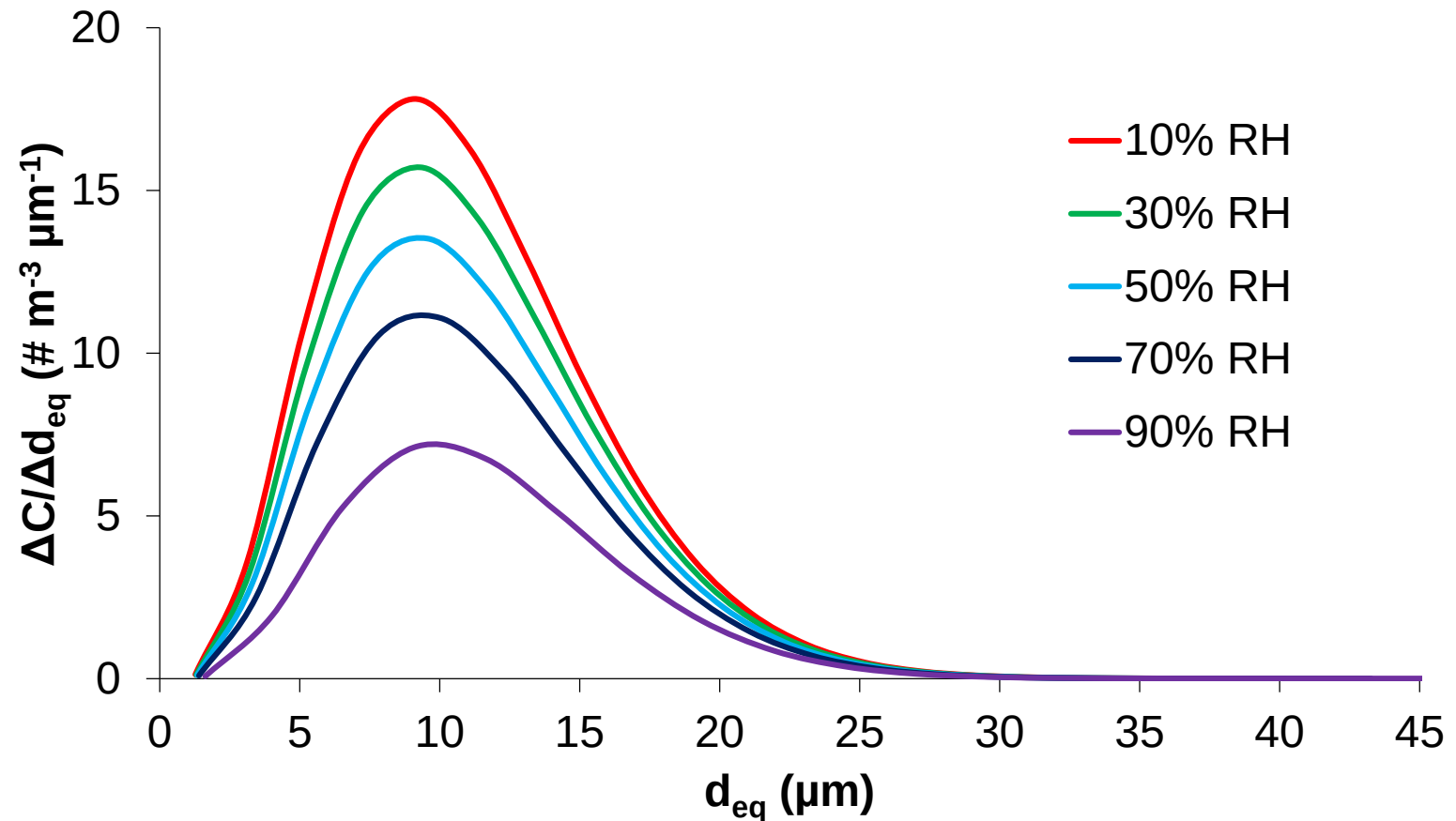
$\lambda = 1$  ACH at RH = 50%



There is a size shift due to loss of larger droplets by gravitational settling.

Linsey Marr, Virginia Tech, May 2020

# Infectious Concentrations vs. RH

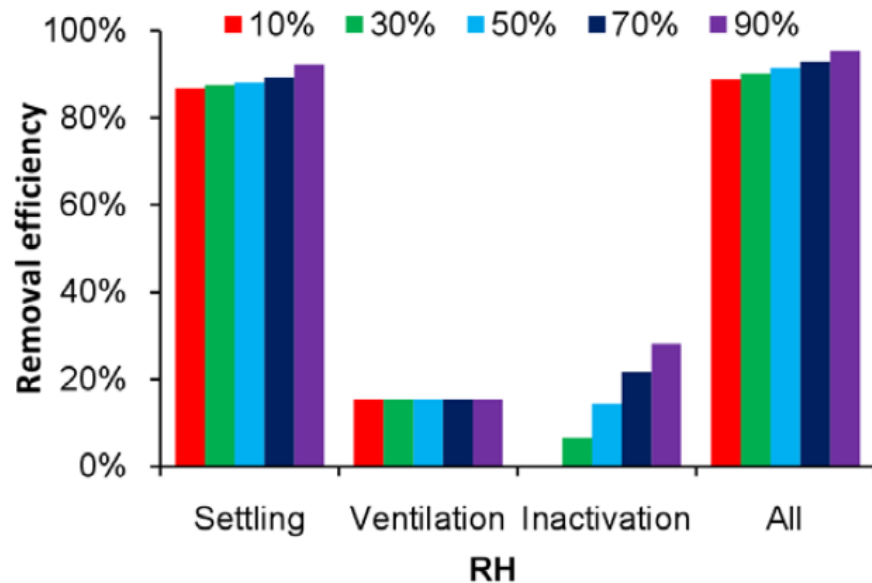


Concentrations are higher at lower RH mainly because lab-determined inactivation rate is lower.

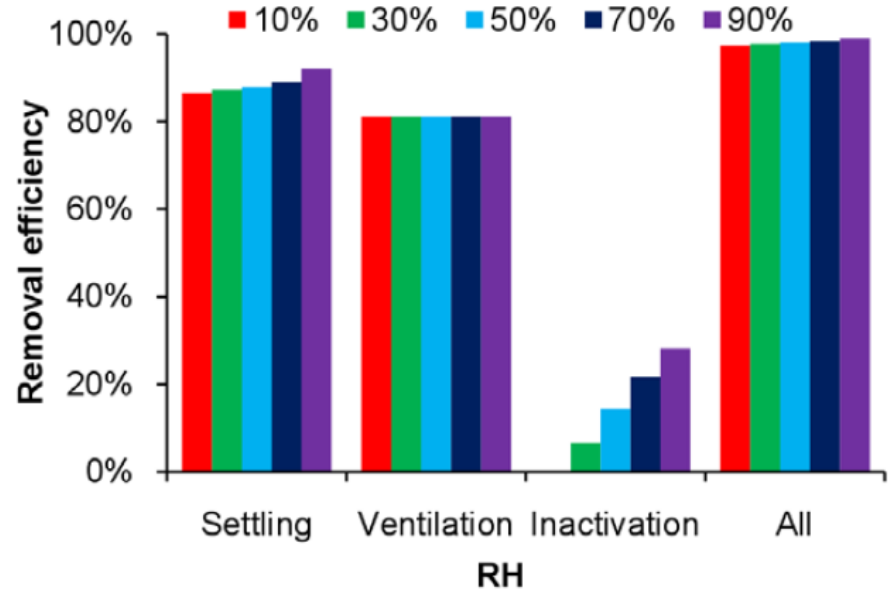
# RH and Removal Mechanisms

- Settling: main removal mechanism, efficient for large but not small droplets
- Ventilation: effective for all sizes, important in public places
- Inactivation: effective for all sizes, important for small droplets

**A  $\lambda = 1$  ACH**



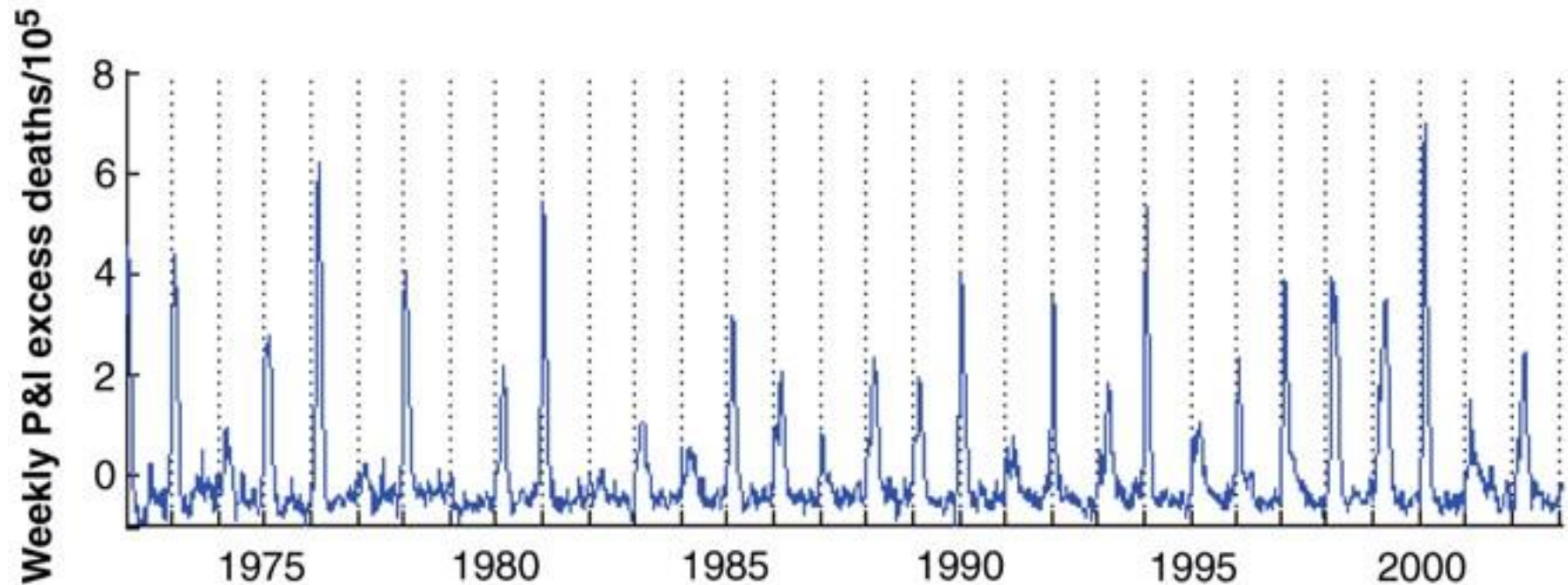
**B  $\lambda = 10$  ACH**

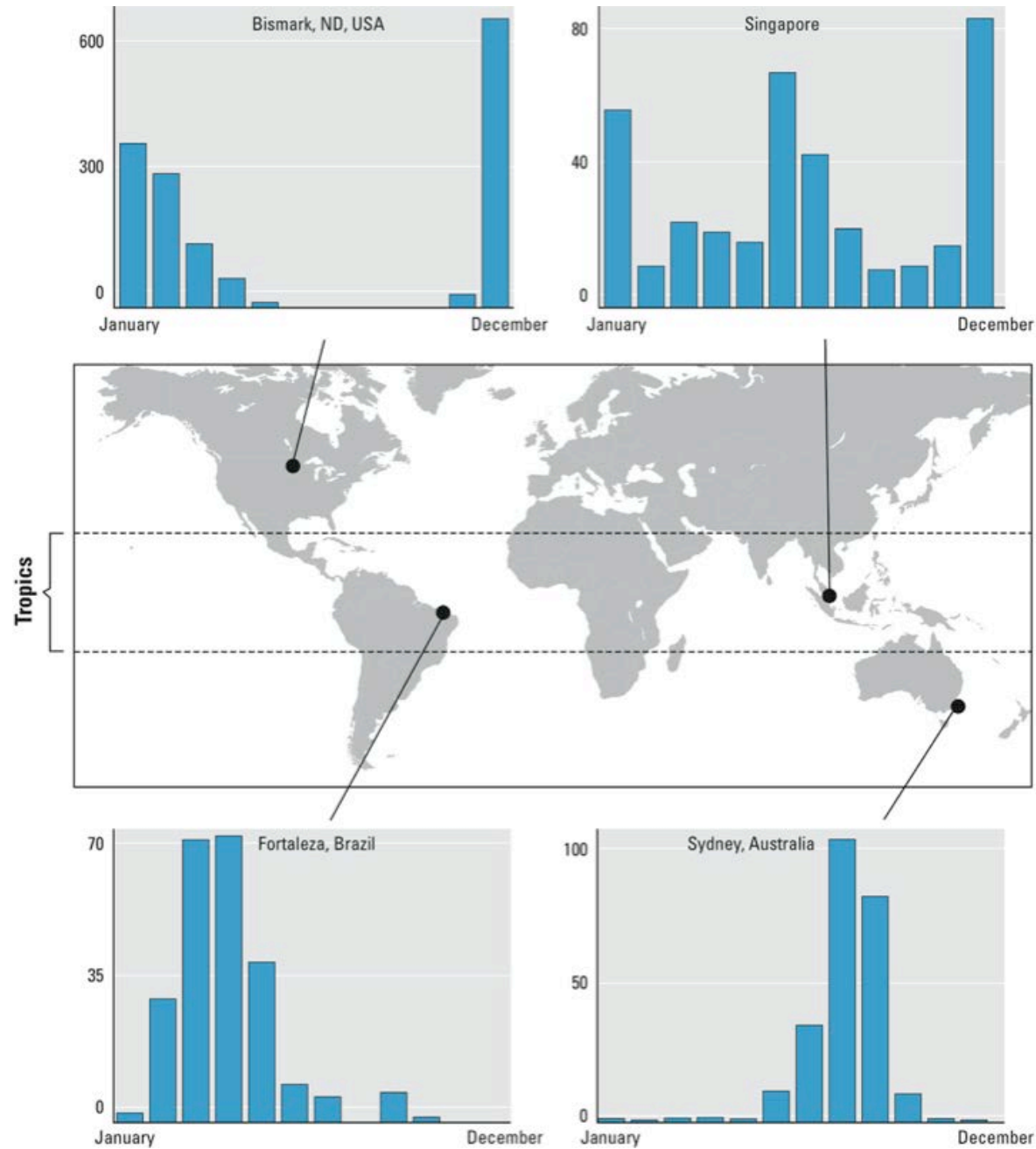


Viruses can be removed from indoor air by settling, ventilation, and inactivation; some of these processes depend on humidity.

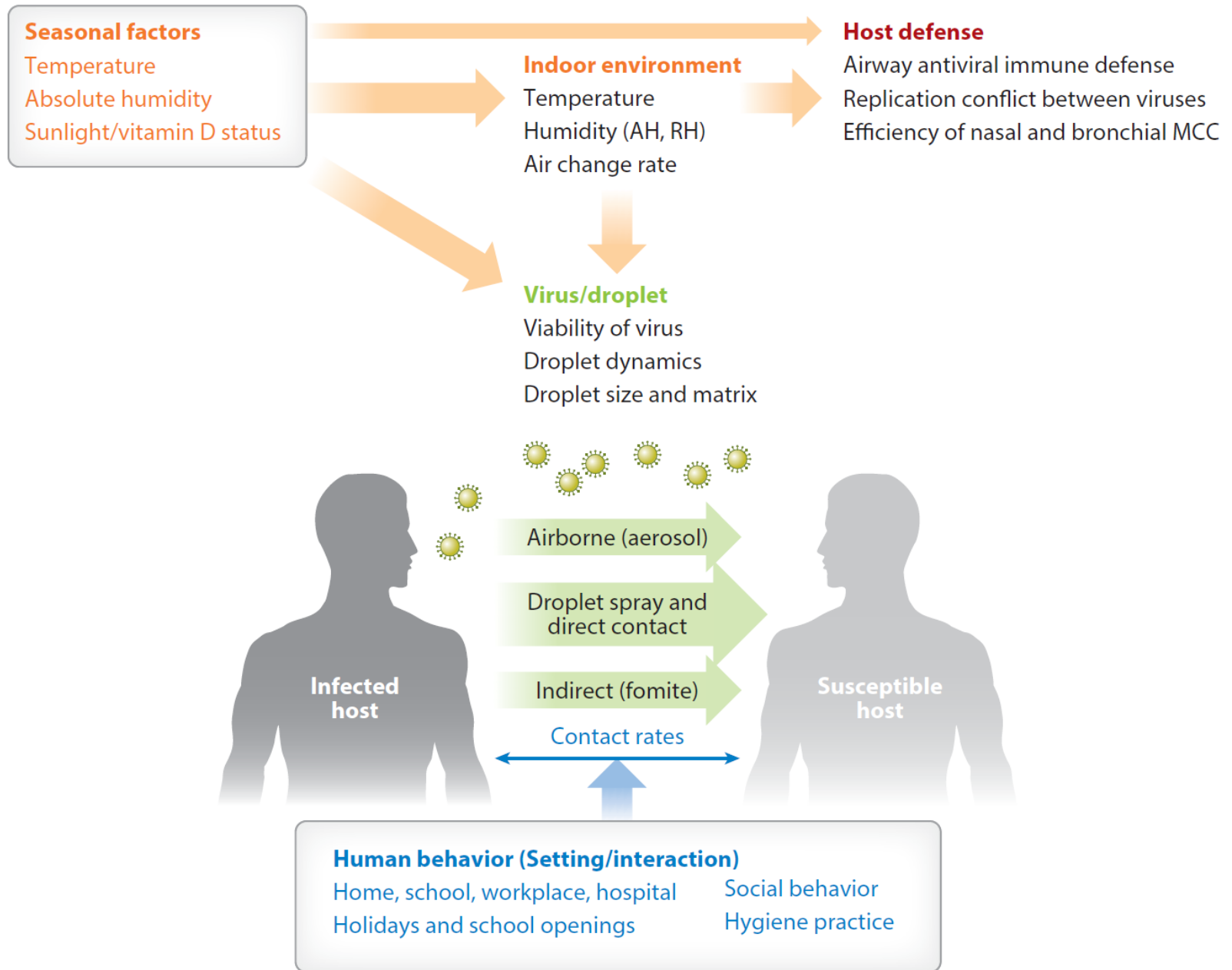
How do temperature and humidity affect transmission?

# Seasonality of the Flu







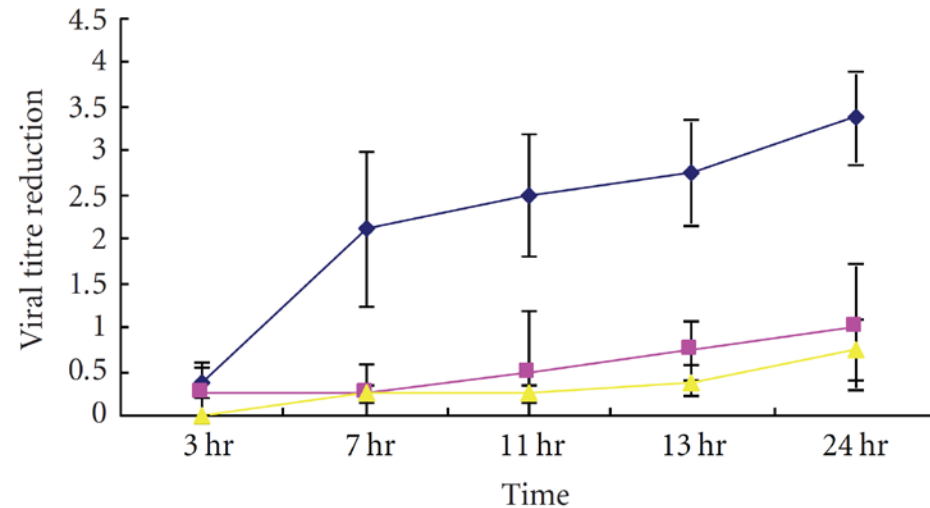


# Virus Viability

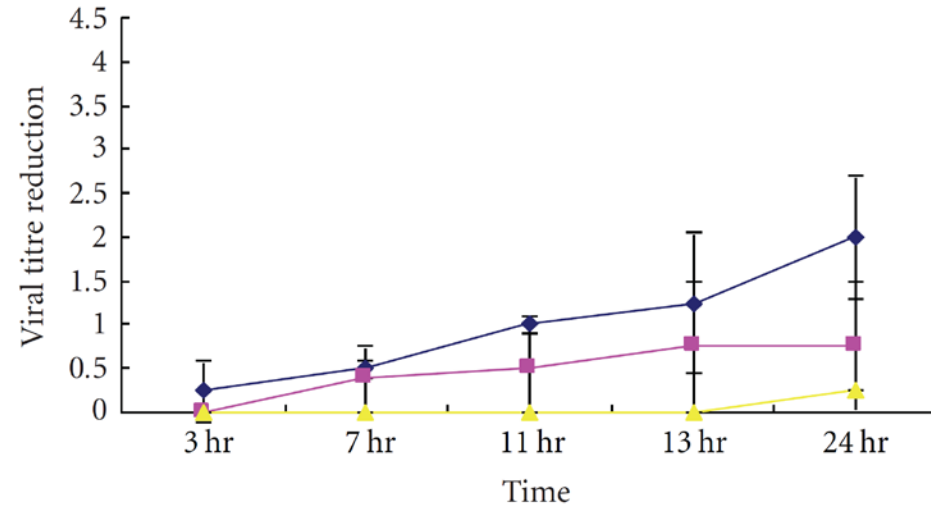
- Temperature (T): In general, viruses survive better at lower T.
- Relative humidity (RH): Many, but not all, viruses in aerosols and droplets survive best at low RH (<40%). Some survive well at very high RH (>95%).
- Indoor T and RH are key because most transmission probably occurs indoors.



# SARS-CoV-1 in Droplets



(a)

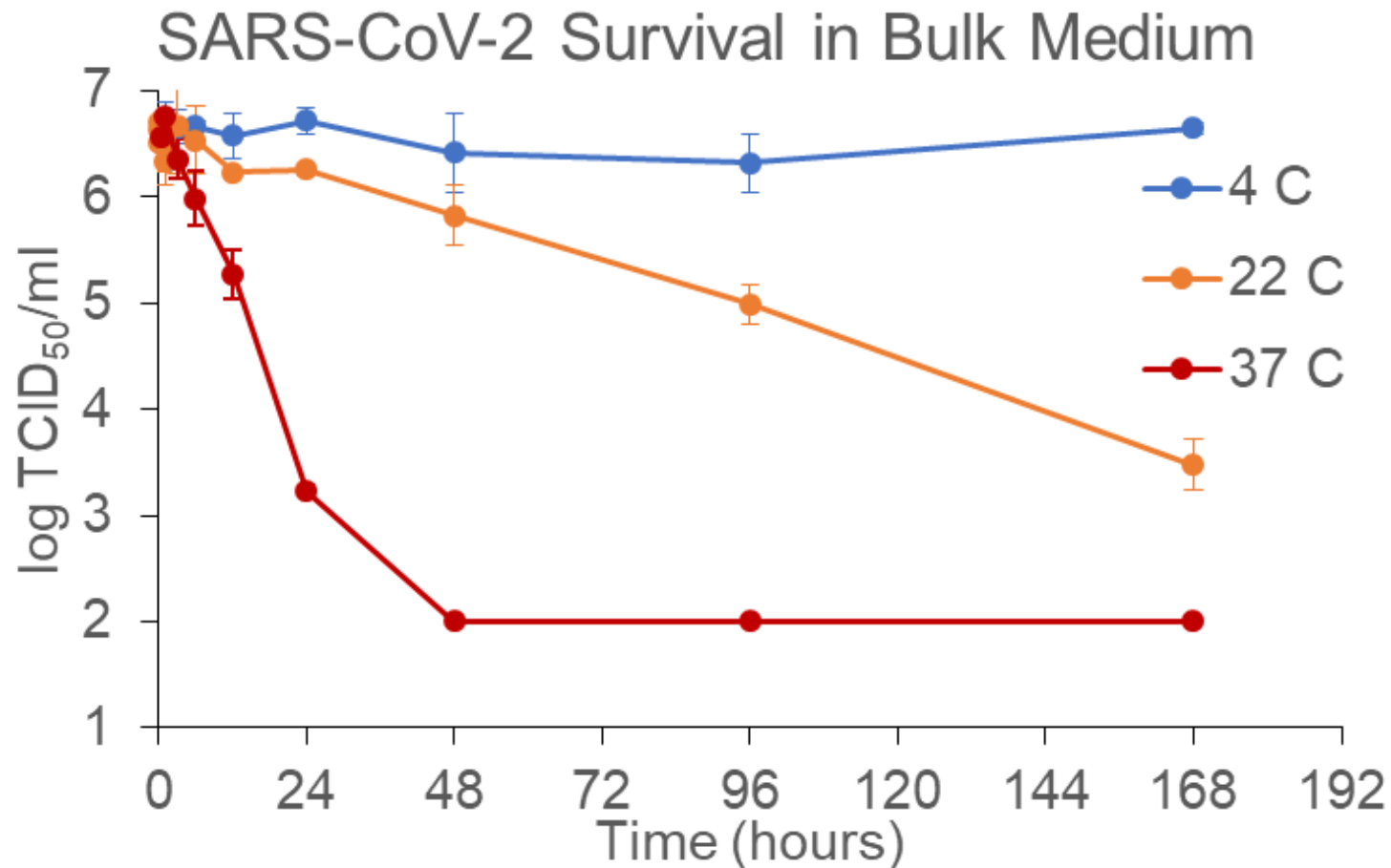


(b)

FIGURE 2: Infectivity of SARS Coronavirus ( $10^5/10 \mu\text{L}$ ) to different temperatures at (a) >95% relative humidity, (b) >80–89%.

Dried SARS-CoV-1 on plastic decayed faster at higher temperature and faster at >95% RH than at 80-89% RH. In another study, it decayed much more quickly at 56 and 60 °C than at 4 °C.

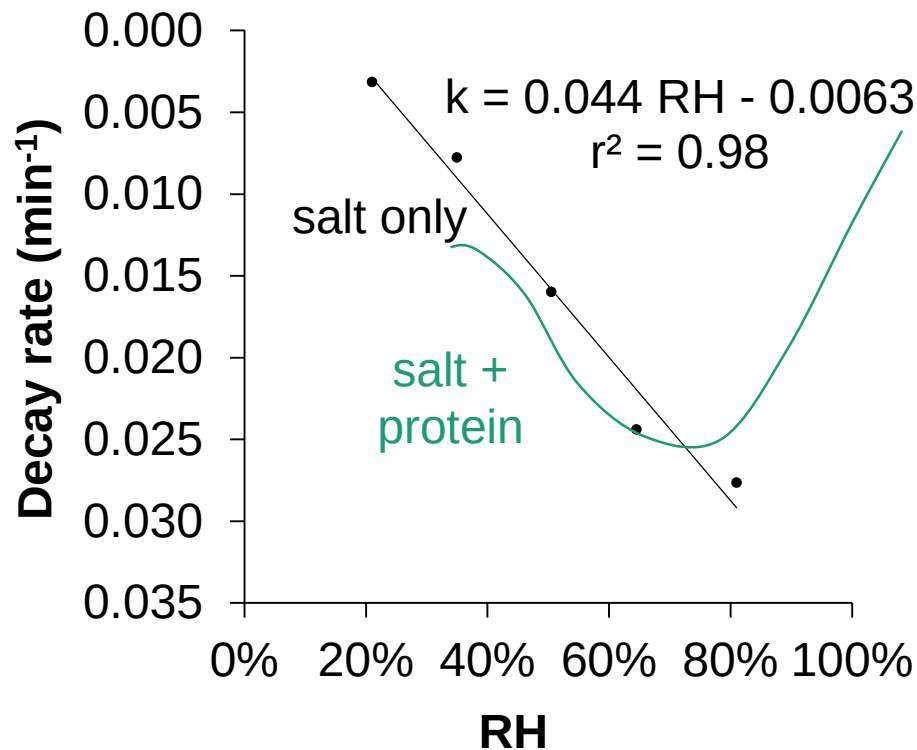
# SARS-CoV-2 vs. Temperature



SARS-CoV-2 decayed fastest at 37 °C, moderately at 22 °C, and not at all at 4 °C in bulk solution.

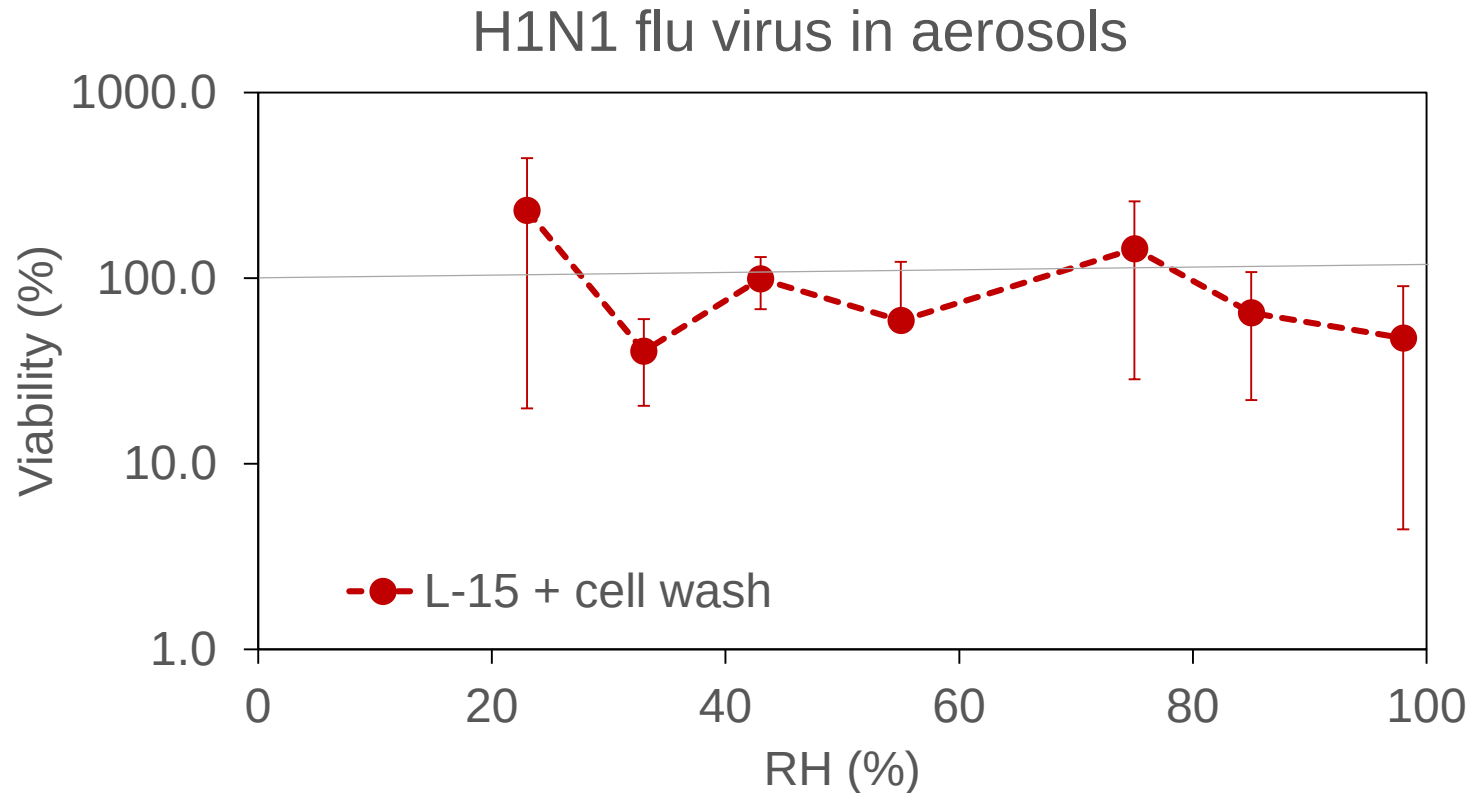


# Virus Viability vs. RH



Conflicting results in the literature

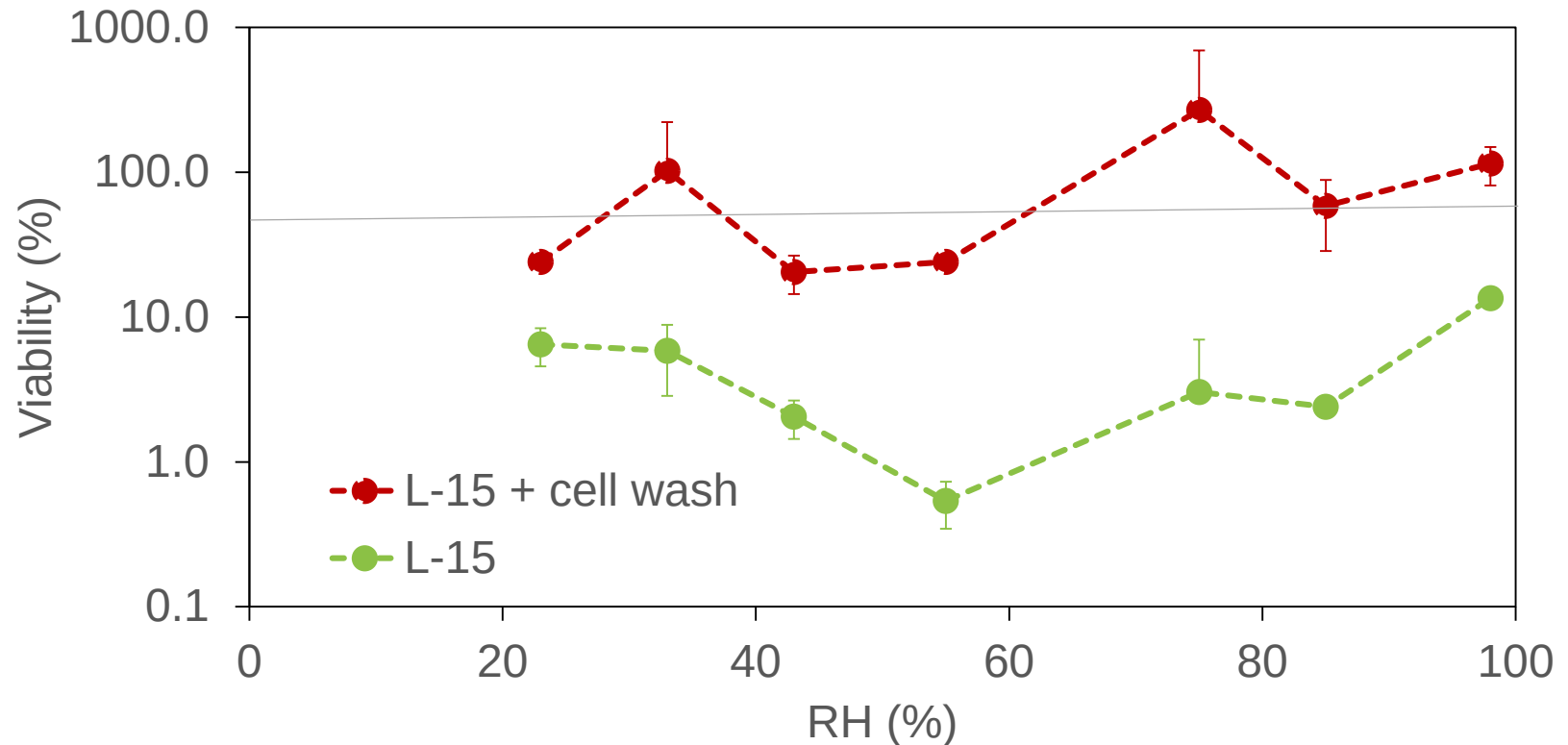
# Flu Virus Remains Viable at All RH



Virus in L-15 medium + human bronchial epithelial cell wash maintains high viability across all RHs tested.

# Respiratory Secretions Protect

## H1N1 flu virus in droplets



Viability is lower without human bronchial epithelial cell wash. Also for bacteriophage  $\Phi 6$ .

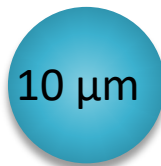
# How Might RH Affect Transmission?

Low RH

Medium RH

Very high RH

Physics



10  $\mu\text{m}$



settles in  
8 min

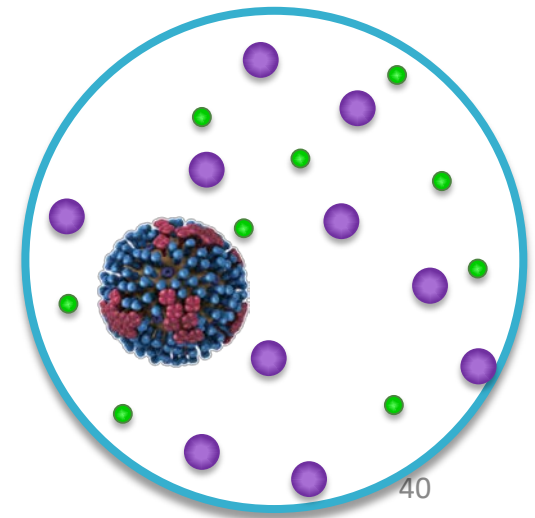
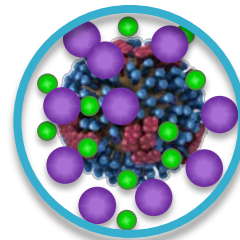
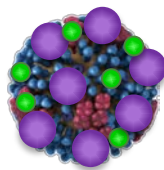


25  $\mu\text{m}$



settles in  
1 min

Chemistry





Viruses in air and on surfaces survive better at lower temperatures. Survival varies with humidity and liquid composition.

How do masks work?

# Types of Masks



surgical mask

intended to keep the wearer from spraying droplets onto others



respirator

intended to reduce the wearer's exposure to inhaled particles

# Three Key Factors Required for a Respirator to be Effective



**Correct\***



**Incorrect**

- ① The respirator must be put on correctly and worn during the exposure.
- ② The respirator must fit snugly against the user's face to ensure that there are no gaps between the user's skin and respirator seal.



- ③ The respirator filter must capture more than 95% of the particles from the air that passes through it.

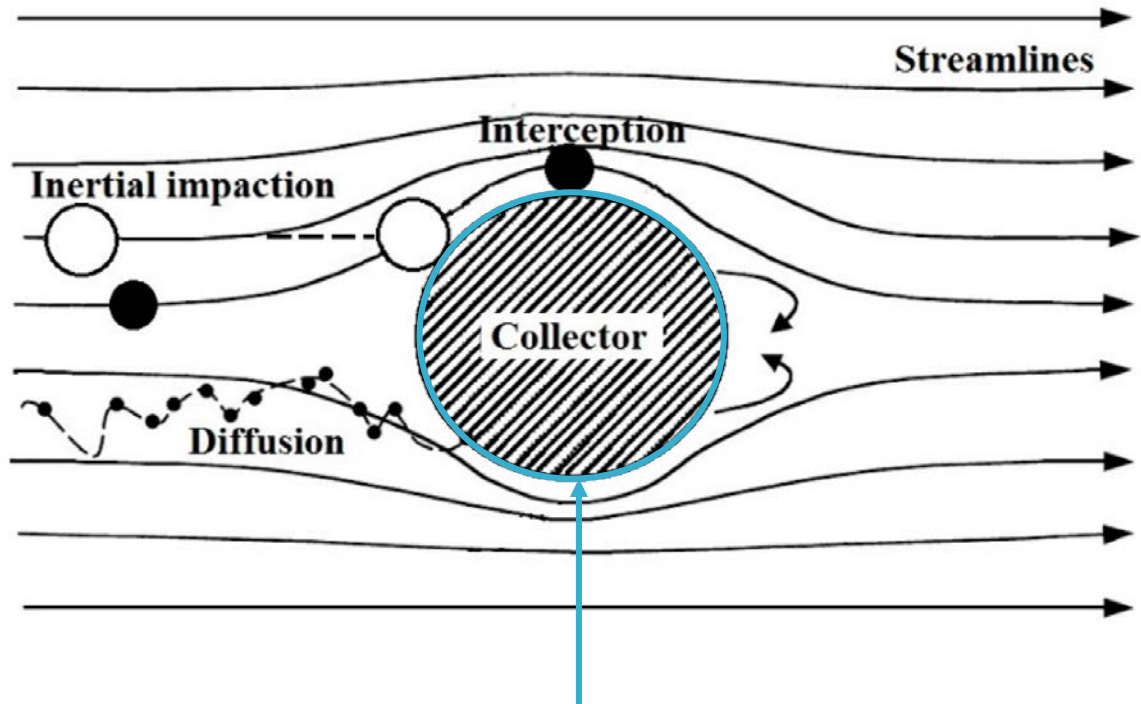


\*If your respirator has a metal bar or a molded nose cushion, it should rest over the nose and not the chin area.



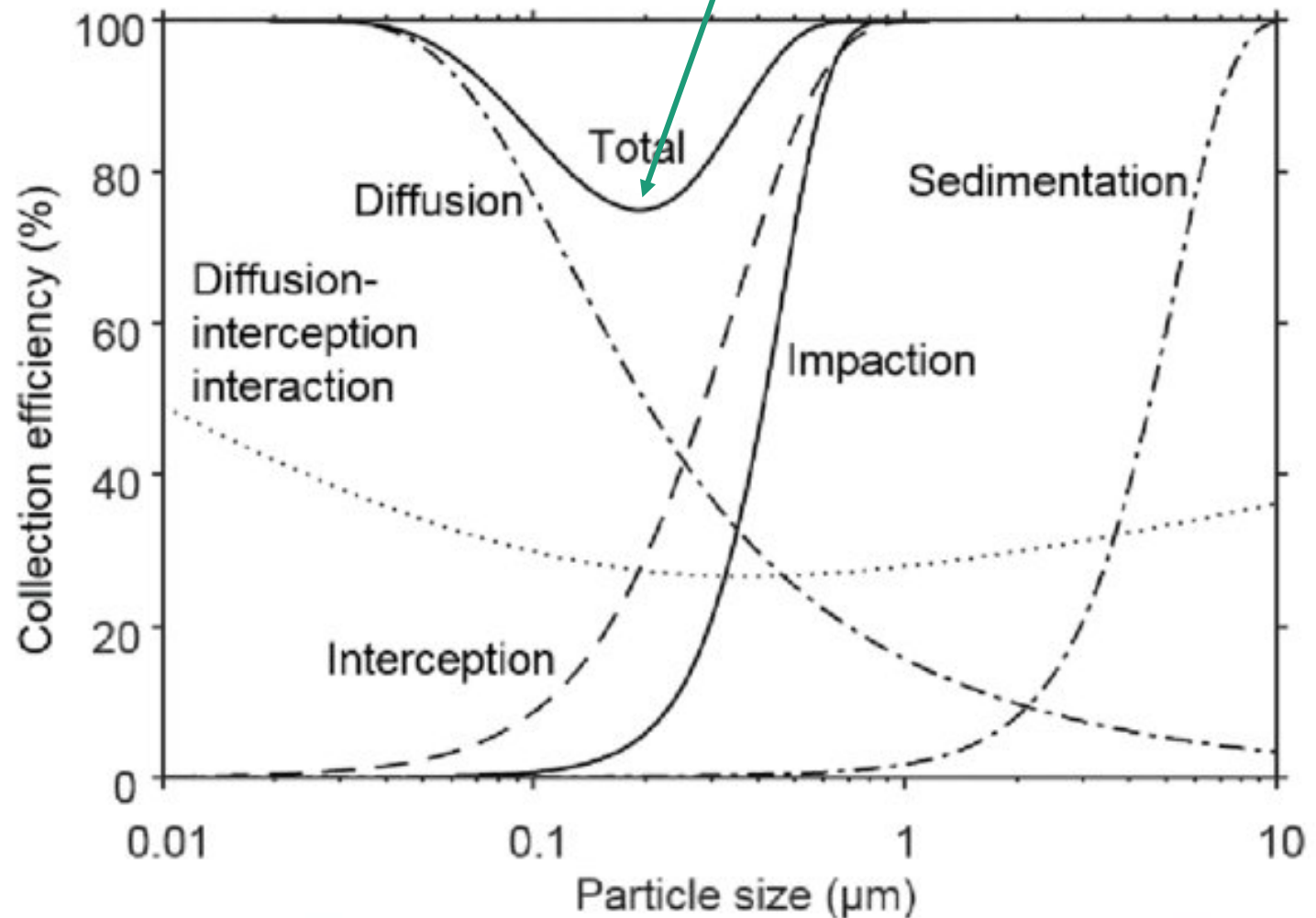
# Filtration Mechanisms

- Impaction
- Interception
- Diffusion
- Not sieving!



“collector” = single fiber in a filter

# Filter Efficiency



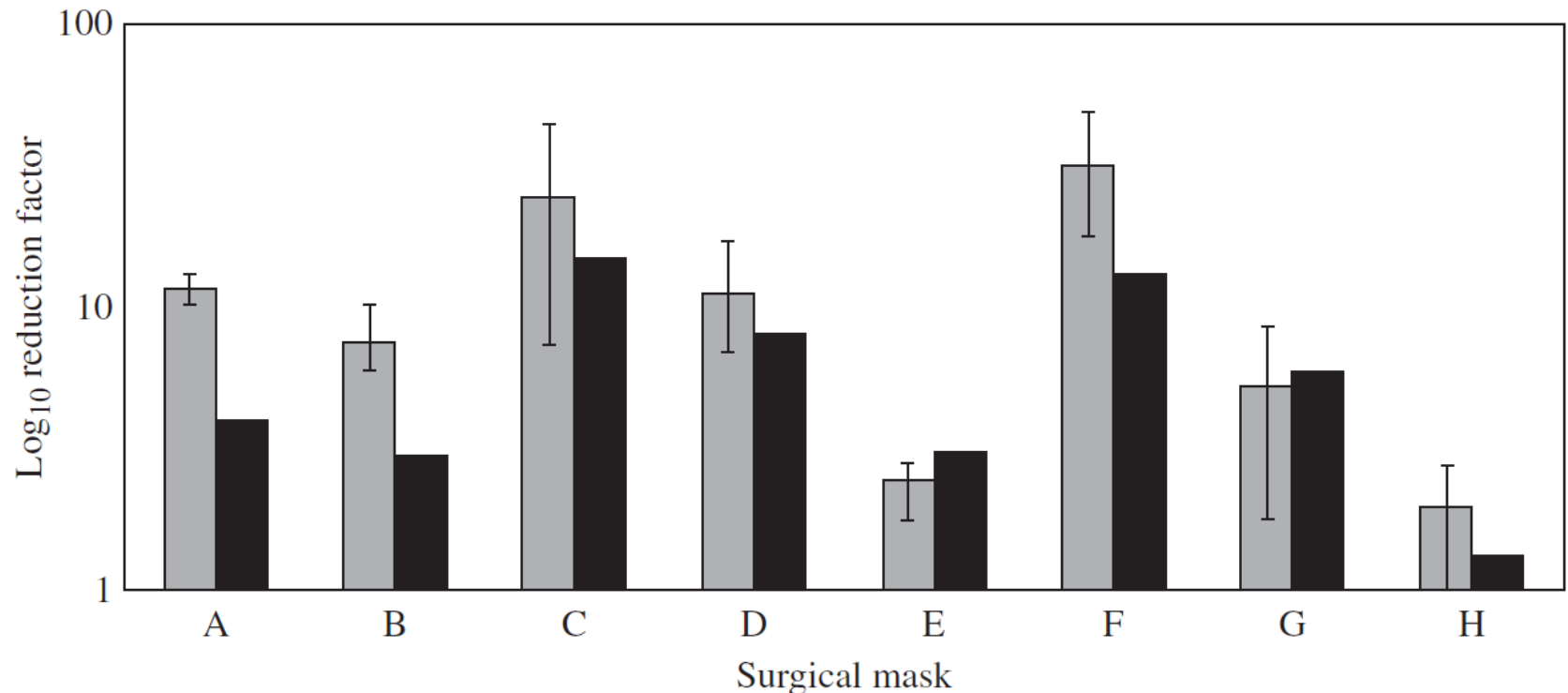
# N95

- Removes  $\geq 95\%$  of  $0.3\ \mu\text{m}$  particles
- Removal efficiency is even better for particles  $>0.3\ \mu\text{m}$  and particles  $<0.3\ \mu\text{m}$
- Removal efficiency depends on the size and density of the particle and should be the same whether the particle contains a virus or not



Linsey Marr, Virginia Tech, May 2020

# Surgical Masks and Flu Virus

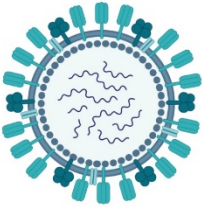
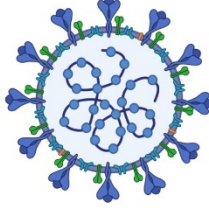
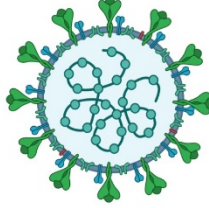
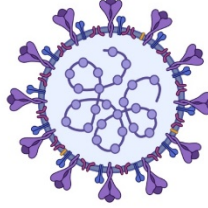


Different types of surgical masks reduced the amount of infectious flu virus measured behind the mask on a manikin by an average of a factor of 6 (range 1.1-55).

What do we know about SARS-CoV-2 in droplets/aerosols?

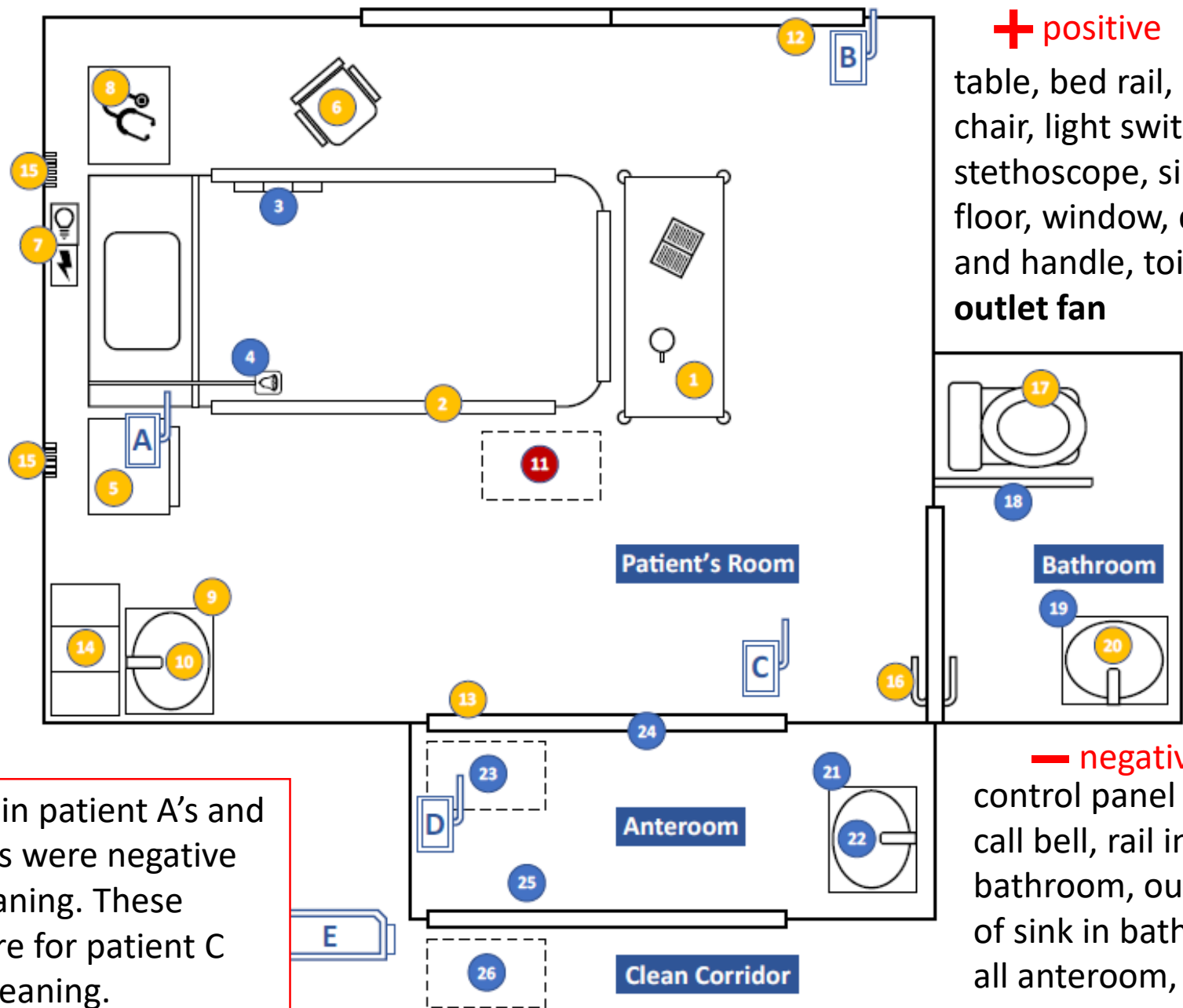


# Epidemiological Comparison of Respiratory Viral Infections

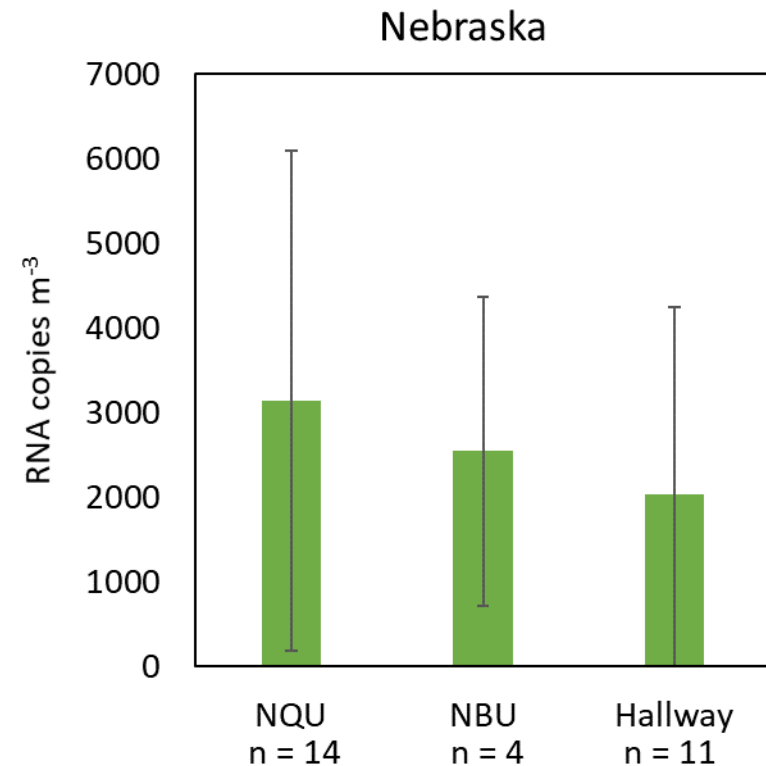
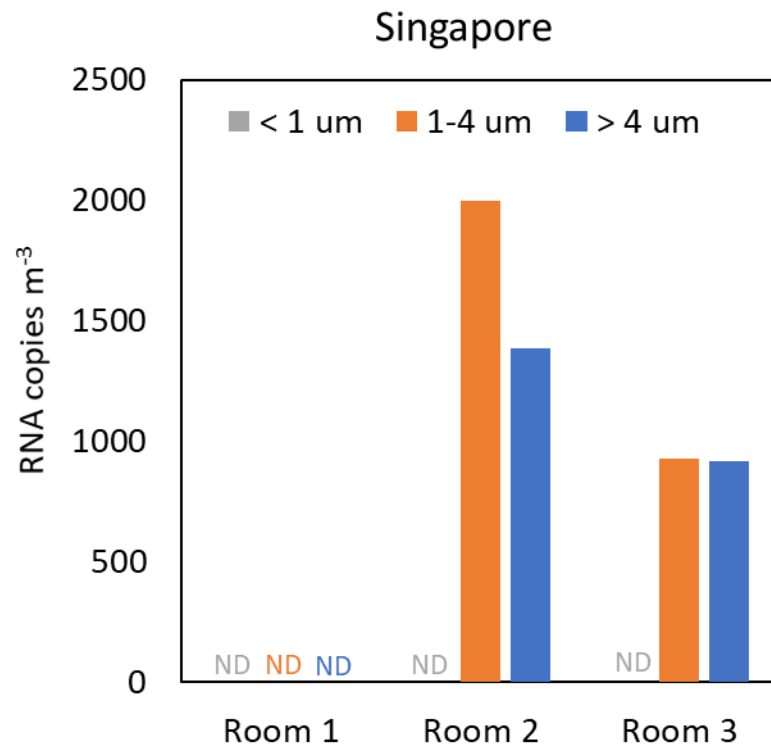
| Disease                            | Flu                                                                                                  | COVID-19                                                                                         | SARS                                                                                            | MERS                                                                                            |
|------------------------------------|------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------|
| Disease Causing Pathogen           | <br>Influenza virus | <br>SARS-CoV-2 | <br>SARS-CoV | <br>MERS-CoV |
| $R_0$<br>Basic Reproductive Number | 1.3                                                                                                  | 2.0 - 2.5 *                                                                                      | 3                                                                                               | 0.3 - 0.8                                                                                       |
| CFR<br>Case Fatality Rate          | 0.05 - 0.1%                                                                                          | ~3.4% *                                                                                          | 9.6 - 11%                                                                                       | 34.4%                                                                                           |
| Incubation Time                    | 1 - 4 days                                                                                           | 4 - 14 days *                                                                                    | 2 - 7 days                                                                                      | 6 days                                                                                          |
| Hospitalization Rate               | 2%                                                                                                   | ~19% *                                                                                           | Most cases                                                                                      | Most cases                                                                                      |
| Community Attack Rate              | 10 - 20%                                                                                             | 30 - 40% *                                                                                       | 10 - 60%                                                                                        | 4 - 13%                                                                                         |
| Annual Infected (global)           | ~ 1 billion                                                                                          | N/A (ongoing)                                                                                    | 8098 (in 2003)                                                                                  | 420                                                                                             |
| Annual Infected (US)               | 10 - 45 million                                                                                      | N/A (ongoing)                                                                                    | 8 (in 2003)                                                                                     | 2 (in 2014)                                                                                     |
| Annual Deaths (US)                 | 10,000 - 61,000                                                                                      | N/A (ongoing)                                                                                    | None (since 2003)                                                                               | None (since 2014)                                                                               |

\* COVID-19 data as of March 2020.

Created in **BioRender.com** 



# Airborne Viral RNA in Hospitals



I estimate a viral RNA emission rate of 10,000 genome copies per minute in “small” droplets.

# SARS-CoV-2 Size Distributions

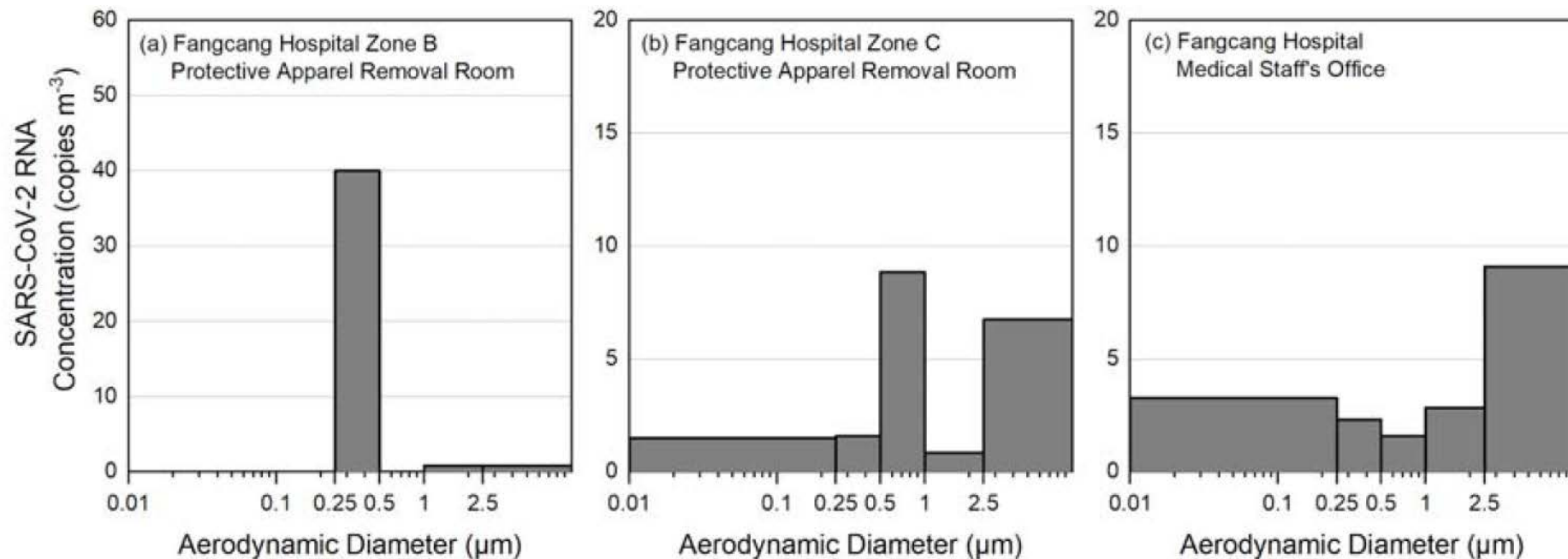
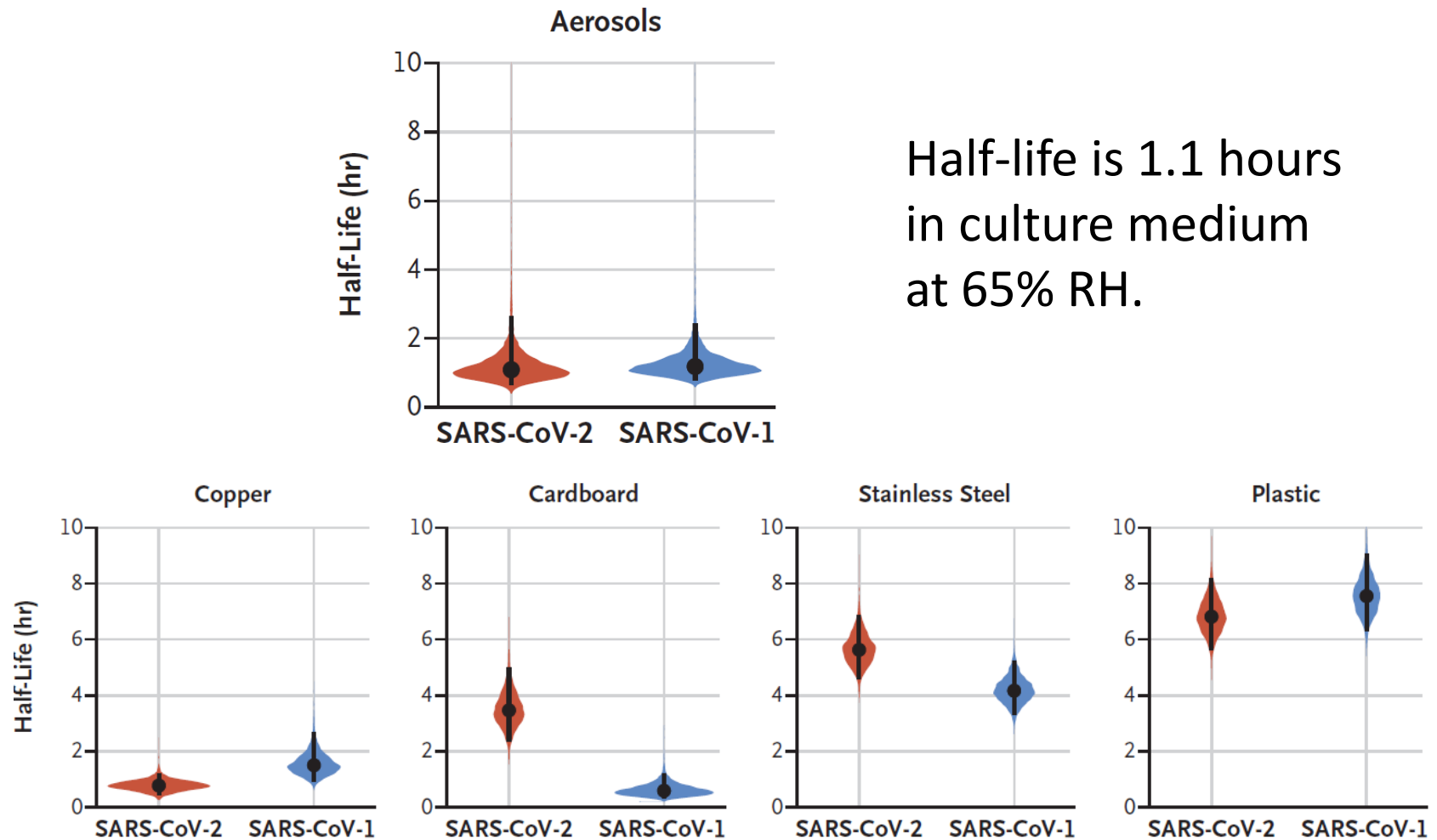


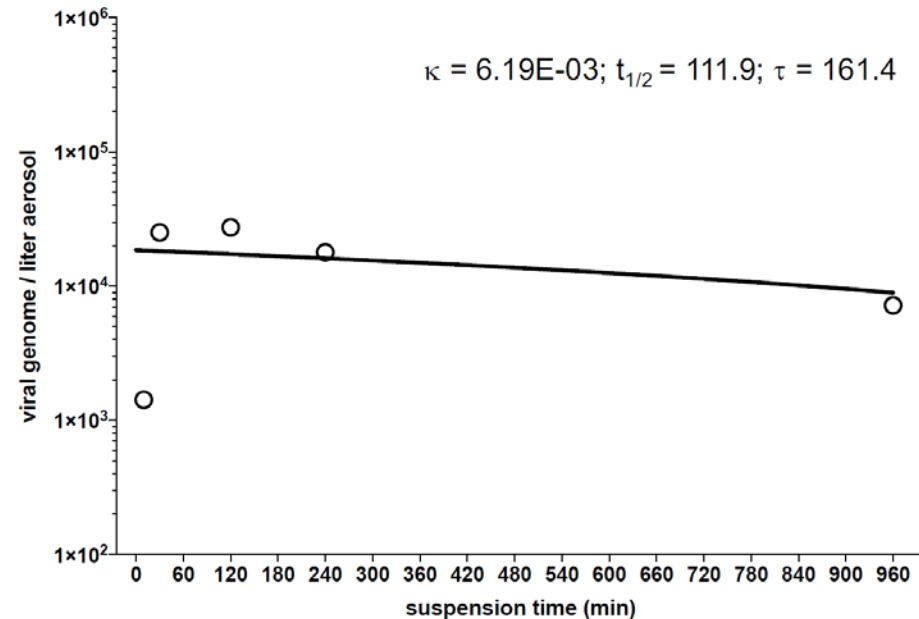
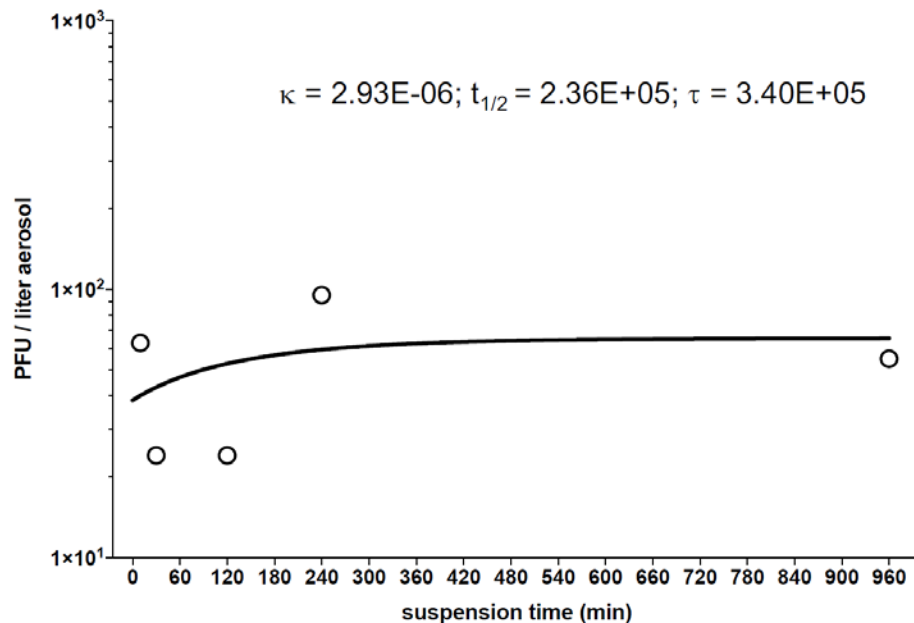
Figure 1 Concentration of airborne SARS-CoV-2 RNA in different aerosol size bins

# SARS-CoV-2 Survival in Aerosols

## C Half-Life of Viable Virus



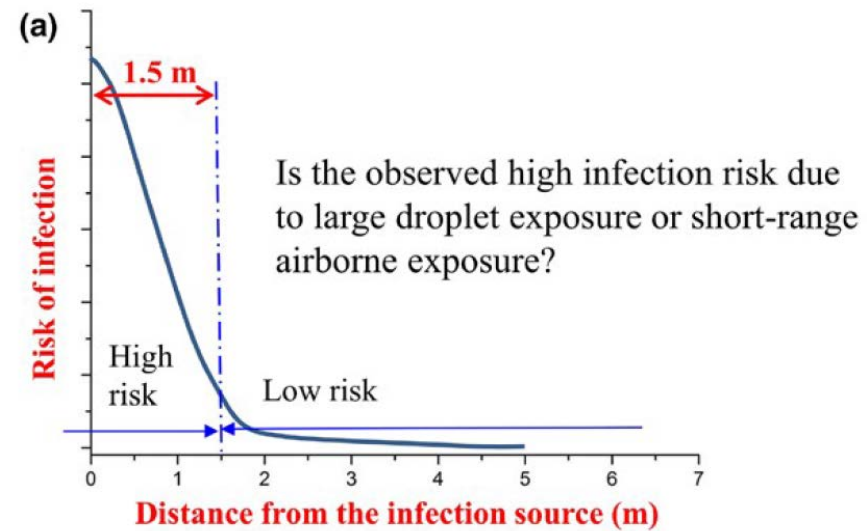
# SARS-CoV-2 Survival in Aerosols



Virus survives 16 hours in aerosols in culture medium at 53% RH

# Major Unknowns

- Which transmission route is dominant: direct contact, indirect contact with contaminated objects (fomites), inhalation of aerosols, deposition of droplets?
- How much virus is released in what size aerosols at different stages of infection?
- How well does SARS-CoV-2 survive in aerosols under real-world conditions?
- How are viruses inactivated in air and on surfaces?
- How well do homemade masks work for source control?





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