

Viruses in Groundwater: From Disease Outbreaks to Sporadic Illness

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Groundwater-Borne Disease Outbreaks in the USA

- From 1971 to 2006 there were nearly 750 outbreaks associated with an infectious agent in drinking water; 60% of the outbreaks were attributable to groundwater
- In 2007-2008, 36 drinking water outbreaks, 22 (61%) from groundwater systems, of which in five outbreaks the cause was virus contamination

Summarized from CDC reports, e.g., MMWR, 2011, 60(12);38-68.

Groundwater Virus Studies in Wisconsin

Environ. Sci. Technol. 2010, 44, 7956-7963

Assessment of Sewer Source Contamination of Drinking Water Wells Using Tracers and Human Enteric Viruses

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Sand/gravel sandstone aquifers

Environ. Sci. Technol. 2007, 41, 6606–6612

Human Enteric Viruses in Groundwater from a Confined Bedrock Aquifer

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Even in a confined aquifer

APPLIED AND ENVIRONMENTAL MICROBIOLOGY, Feb. 2003, p. 1172–1180 0099-2240/03/\$08.00+0 DOI: 10.1128/AEM.69.2.1172–1180.2003 Copyright © 2003, American Society for Microbiology. All Rights Reserved.

Incidence of Enteric Viruses in Groundwater from Household Wells in Wisconsin

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APPLIED AND ENVIRONMENTAL MICROBIOLOGY, Oct. 2004, p. 5937–5946 0099-2240/04/\$08.00+0 DOI: 10.1128/AEM.70.10.5937–5946.2004 Copyright © 2004, American Society for Microbiology. All Rights Reserved. Vol. 70, No. 10

Vulnerability of Drinking-Water Wells in La Crosse, Wisconsin, to Enteric-Virus Contamination from Surface Water Contributions

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Received 11 December 2003/Accepted 27 May 2004

Municipal wells in an alluvial aquifer



Case Study/

Norovirus Outbreak Caused by a New Septic System in a Dolomite Aquifer

by Mark A. Borchardt¹, Kenneth R. Bradbury², E. Calvin Alexander Jr.³, Rhonda J. Kolberg⁴, Scott C. Alexander³, John R. Archer⁵, Laurel A. Braatz⁶, Brian M. Forest⁷, Jeffrey A. Green⁸, and Susan K. Spencer⁹

Door County restaurant well

Private domestic

wells

Vol. 69, No. 2

Virus Attributes Relevant to Groundwater Contamination

- Non-living packets of protein and nucleic acid (e.g. DNA); cannot replicate in the environment
- Often, virus types are specific to their host
- Small size (~ 50 nm) and negative charge favor movement through soil
- Viruses are often much smaller than fracture apertures or rock pores.
- Survivability favored by low temp, moisture, and absence of UV light
- Cause a variety of illnesses along a health effects spectrum from asymptomatic infection to death



Wisconsin WAHTER Study

Enteric Viruses – Clinical Significance

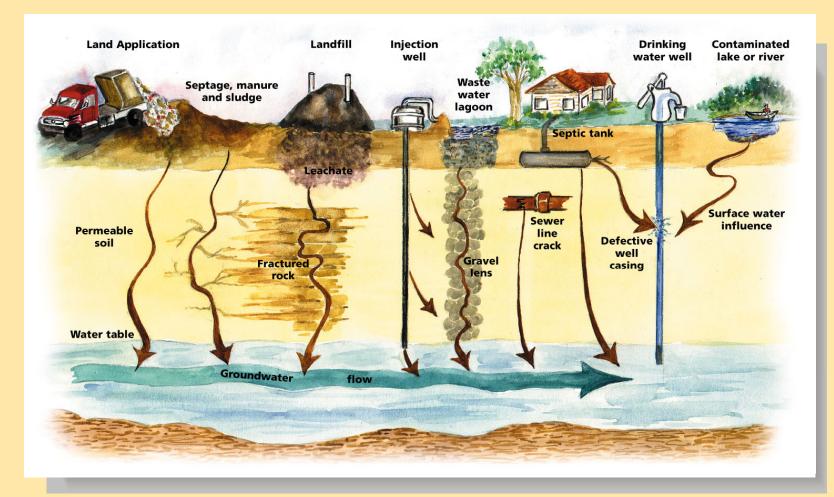
- Enteroviruses: fever, "summer cold", diarrhea, hand, foot, mouth disease, conjunctivitis, meningitis, myocarditis, poliomyelitis, diabetes? chronic fatigue syndrome?
- **Rotavirus:** severe diarrhea and vomiting, 50,000 hospitalizations/year in US
- Hepatitis A virus: gastroenteritis, hepatitis, fatality rate of 2.7% in people > 49 years of age
- Noroviruses: gastroenteritis, "the flu"
- Adenoviruses: diarrhea, acute respiratory illness, pneumonia, conjunctivitis, neurological diseases, obesity?

Factors that Enhance Virus Subsurface Transport

- Large human fecal contamination source
- High water table, i.e., short unsaturated zone
- Alkaline pore water pH
- Coarse sediment texture
- Low ionic strength
- High precipitation
- High dissolved organic matter and surfactant concentrations



Virus Sources and Infiltration Routes into Groundwater



Modified from Keswick and Gerba 1980



Health Risk or Non-Issue?

- So viruses are present in public water supply and domestic wells ...
- Does it matter?
- Is there any effect on public health?





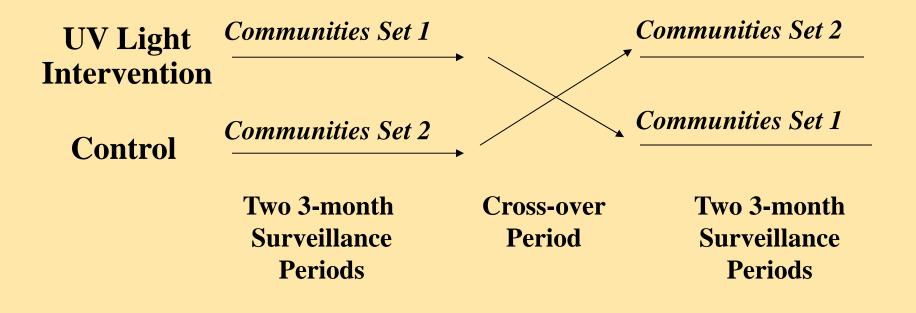
Wisconsin WAHTER Study

Study Objectives

- Find the association between tap water virus concentrations and community rates of acute gastrointestinal illness (AGI)
 Dublished in Environmental Health Decentations 2012
- Published in Environmental Health Perspectives 2012
- 2) Estimate AGI risk from drinking non-disinfected municipal water from groundwater sources
- Manuscript in preparation
- 3) Estimate AGI risk from viruses directly entering and contaminating distribution systems without residual chlorine
- Published in Environmental Science & Technology 2012
- 4) Find the association between viruses in distribution systems and utility O & M procedures
- Published in Journal of Water and Health 2011

Wisconsin WAHTER Study Design

Intervention trial in 14 groundwater-source communities





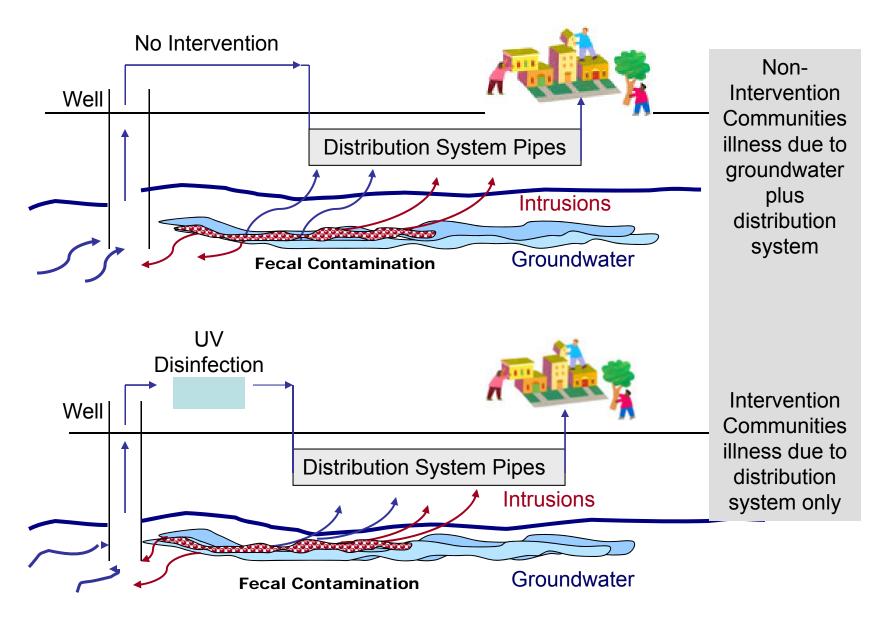
WAHTER Study Participating Communities



Populations: 1,200 – 8,300 Number Wells: 2 – 5 Pumpage: 0.13 – 2.1 MGD Hydrogeology: sand, sandstone, limestone No surface water influence No disinfection



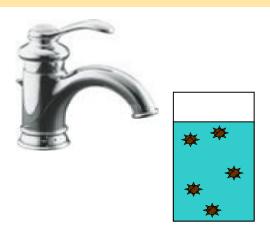
UV Intervention Effect





Tap Water Sampling

- Goal was to characterize virus exposure in a community's drinking water
- Sampled 5 to 8 household taps per community; every community sampled once per month
- Households selected using utility-provided maps of water mains



- Viruses captured by glass wool filtration
- Viruses analyzed by qPCR
- In addition, enteroviruses and adenoviruses analyzed by cell culture



Virus Types, Frequencies, and Concentrations in Tap Water

	Number qPCR	Virus Concentration Genomic copies/L		Number Culture	
Virus Type	Positive Samples	Mean	Maximum	Positive Samples	
Adenovirus	157 (13%)	0.07	9.5	40/157 (25%)	
Enterovirus	109 (9%)	0.8	851.1	31/109 (28%)	
GI Norovirus	51 (4%)	0.6	115.7		
GII Norovirus	0 (0%)	0	0		
Hepatitis A	10 (1%)	0.006	4.1		
Rotavirus	1 (0.1%)	2 x 10⁻⁵	0.03		
All Viruses	287 (24%)	1.5	853.6		

N = 1,204 samples

> 41 samples (3%) were positive for two or more virus types



Epidemiological Study Design

- Acute gastrointestinal illness (AGI) surveillance for four
 12 week periods, spring and autumn 2006 and 2007
- Participants submitted an illness symptom checklist every week
- AGI defined as ≥ three episodes loose watery stools OR
 ≥ one episode vomiting in 24 hour period
- Person-time estimated from nights slept away from home, self-reported on symptom checklist
- Outcome measure: Number AGI episodes/person-year for each community and surveillance period



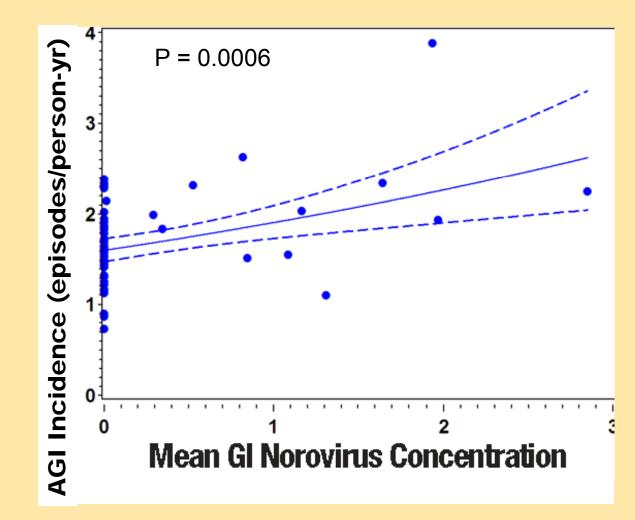
Participating Households' Characteristics

Characteristic	Number	%		
Household size (no. of persons)				
2	17	(3)		
3	159	(26)		
4	246	(40)		
5	136	(22)		
<u>></u> 6	63	(10)		
Residence type				
Single family home	572	(92)		
Apartment or condo	43	(7)		
Other	6	(1)		
Faucet or plumbing filtering device				
Yes	73	(12)		
Νο	547	(88)		
Don't know	1	(<1)		
Primary drinking water source				
Municipal	1546	(93)		
Bottled water	58	(3)		
Other	1	(<1)		
Missing	54	(3)		

- Beginning enrollment:
 621 households
- Ending enrollment: 440 households
 - Beginning enrollment: 1,079 children, 580 adults
- Ending enrollment: 765 children, 413 adults



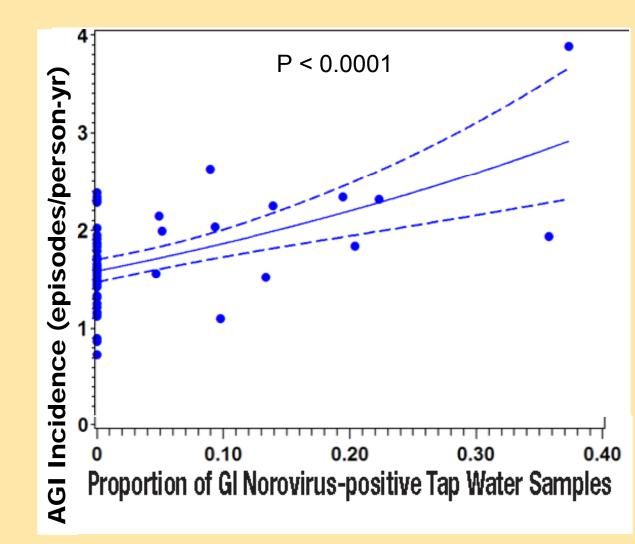
G1 Norovirus Concentration in Tap Water and AGI Incidence



Wisconsin WAHTER



Proportion of G1 Norovirus-Positive Tap Water Samples and AGI Incidence



Wisconsin WAHTER



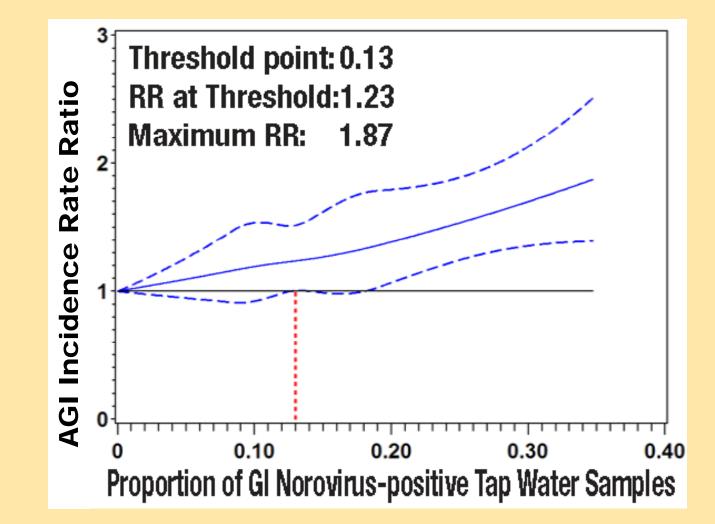
Maximum G1 Norovirus Concentration and AGI Incidence

AGI Incidence (episodes/person-yr) P = 0.001120 30 40 10 50 0 **Maximum GI Norovirus Concentration**

Wisconsin WAHTE



AGI Relative Risk (RR) as Related to the Proportion of Tap Water Samples Positive for G1 Norovirus



Wisconsin WAHTER

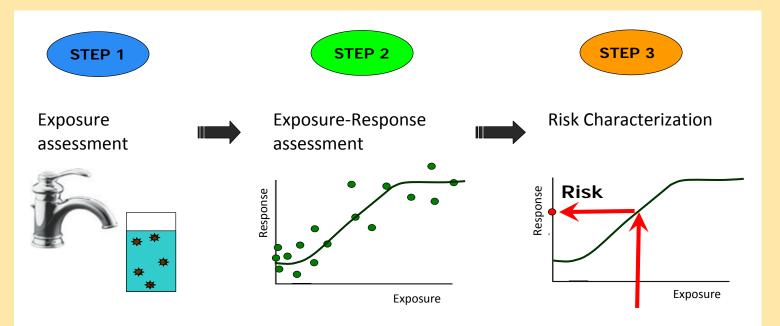


Results Summary

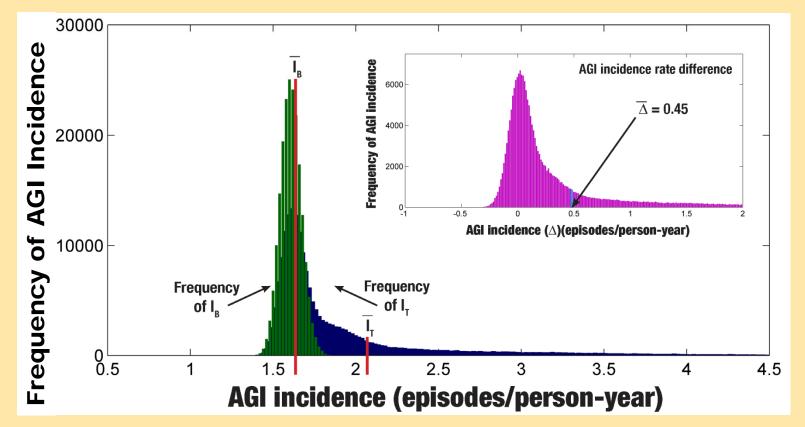
Virus Group	Predictor Variables	Age Group Most Affected	Maximum Increase in Relative Risk	
All viruses combined	Mean Concentration Maximum Concentration	Adults	105%	
Enterovirus	Mean Concentration Maximum Concentration Proportion samples +	Adults	84%	
G1 Norovirus	Mean Concentration Maximum Concentration Proportion samples +	All ages	161%	



Quantitative Microbial Risk Assessment Overview



Estimating the Fraction of AGI from Drinking Water Using Quantitative Microbial Risk Assessment

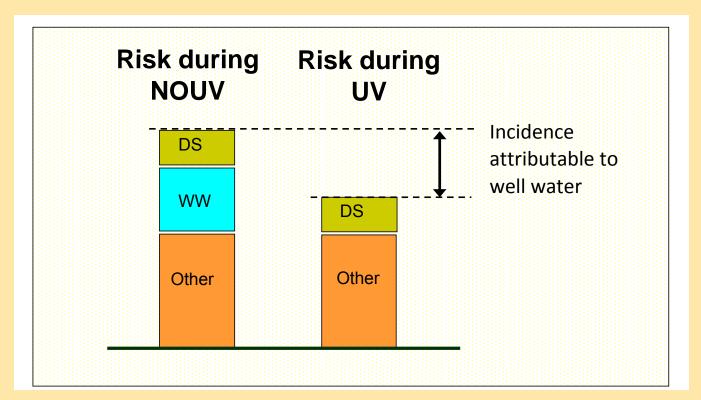


- Virus exposure AGI model: mean concentration GI norovirus, all ages
- 22% of the AGI in the study communities was from virus-contaminated tap water
- For children < 5 yrs, in the spring of 2006, the fraction of AGI from drinking water was 63%!



Objective 2

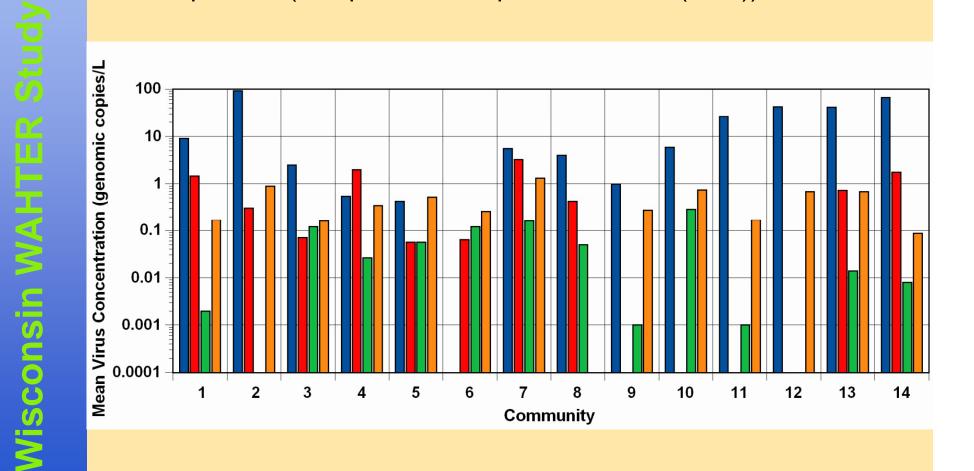
Estimate the risk of acute gastrointestinal illness (AGI) from drinking non-disinfected municipal water from groundwater sources





Viruses in the Study Wells

In the 14 study communities, of all 36 wells tested, 34 were virus-positive (139 positive samples out of 392 (36%))





Intervention Effect (i.e., Attributable Risk) for Groundwater-borne AGI

	UNADJUSTED ANALYSES			ADJUSTED ANALYSES*		
	Attributable			Attributable		
Age	Risk (# illness/	P-		Risk (# illness/	P-	
Group	person-year)	value	95% CI	person-year)	value	95% CI
All Ages	-0.02	0.58	-0.3 – 0.45	-0.01	0.52	-0.20 - 0.19
Adults	0.11	0.29	-0.33 – 0.56	0.14	0.17	-0.16 - 0.44
Children	-0.10	0.81	-0.34 – 0.14	-0.09	0.82	-0.3 – 0.11
Children <5 yrs	-0.14	0.68	-0.75 – 0.47	-0.26	0.81	-0.87 – 0.35

All analyses weighted by sample size (i.e., person-time)

*Adjusted for age, gender, day care attendance, year, season, and virus concentrations in the communities' wells



Intervention Effect Explanations

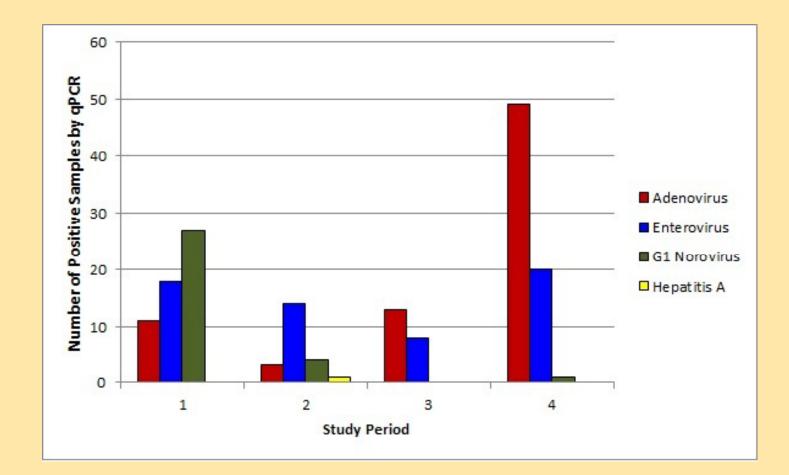
- Groundwater-borne transmission was zero to minimal
- Statistical power insufficient

•Viruses contaminated drinking water in the distribution system downstream of the UV intervention

• The level of virus exposures from well water differed by study year and season



Virus Types Detected in the Communities' Wells



Wisconsin WAHTER Study



Reduction in AGI from the UV Disinfection Intervention

Adults, Periods 3 and 4

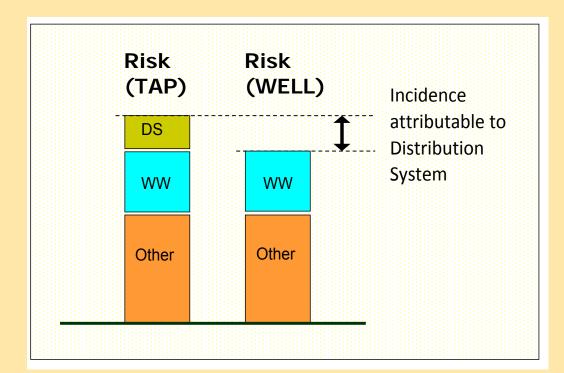
AGI reduced by 13% 95% Confidence Interval: 0% - 22%

<u>Children <5, Period 1</u> AGI reduced by 13% 95% Confidence Interval: 0% - 41%



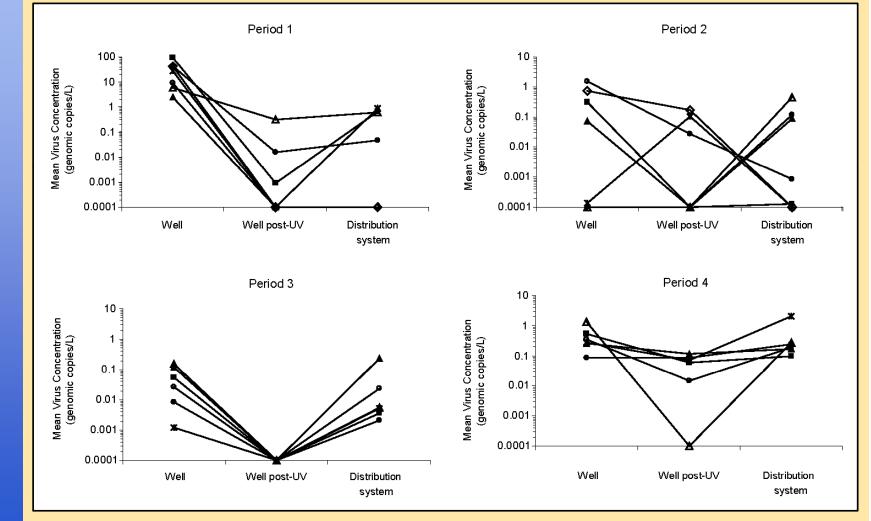
Objective 3

Estimate the AGI risk contributed solely by contaminated distribution systems





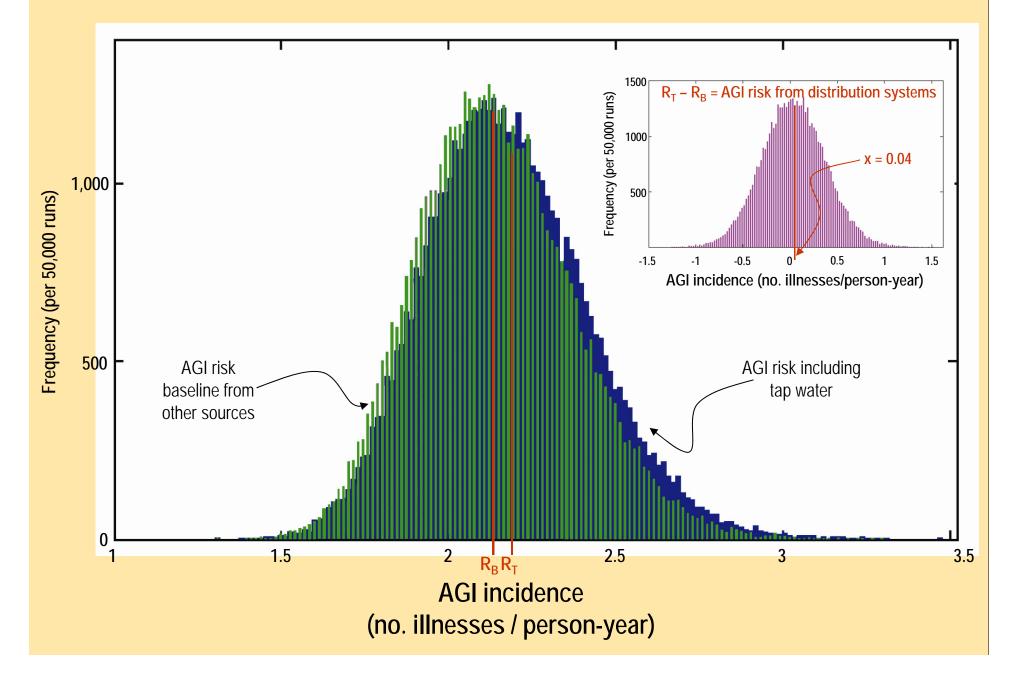
Virus Intrusions into Distribution Systems



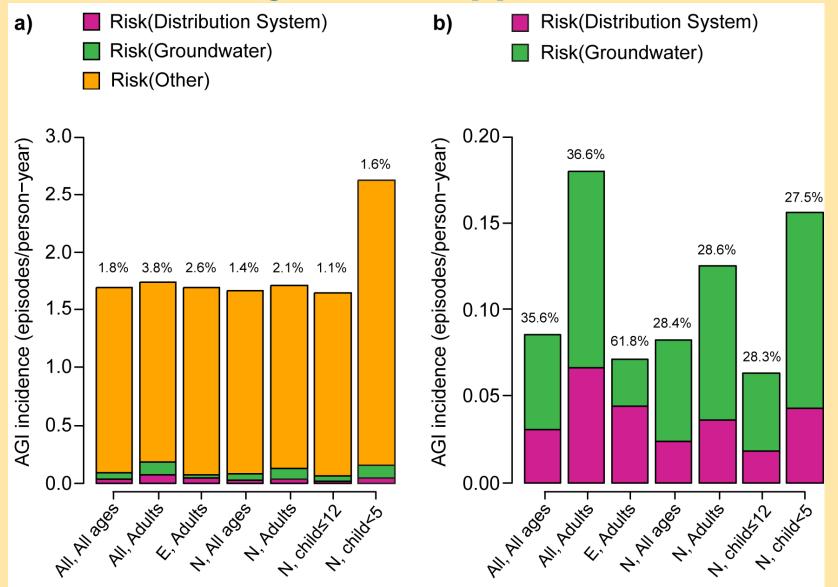
Lambertini et al. 2011 Journal of Water and Health, 9:799-812

Wisconsin WAHTER Study

Distribution System Risk – Approach 1 With UV



AGI Attributable Risk Percent for Distribution Systems, Approach 1 with UV





Does Groundwater-borne Illness Risk Meet US EPA Standards?

- Acceptable EPA risk for waterborne disease is 1 infection in 10,000 people/year
- Assume every infection leads to an illness, then the acceptable illness rate is 0.0001 illness/person-year
- Our modeling using quantitative microbial risk assessment indicates norovirus in drinking water was responsible 0.45 AGI episodes/person-year
- 4,500 times higher than EPA acceptable risk



Effect of WAHTER Study on State and National Policies

In Wisconsin...

WI Code NR 810 was revised to require disinfection of municipal water supplies in July 2010, but then this requirement was reversed by law in May 2011.

In the USA...

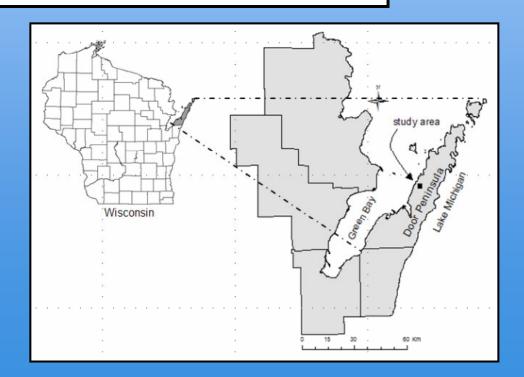
The third Unregulated Contaminant Monitoring Rule (UCMR) will conduct monitoring in 2013 – 2015 for enterovirus and norovirus from 800 groundwater-source public water systems that do not disinfect.

Norovirus Outbreak Caused by a New Septic System in a Dolomite Aquifer

ground

Case Study/

by Mark A. Borchardt¹, Kenneth R. Bradbury², E. Calvin Alexander Jr.³, Rhonda J. Kolberg⁴, Scott C. Alexander³, John R. Archer⁵, Laurel A. Braatz⁶, Brian M. Forest⁷, Jeffrey A. Green⁸, and Susan K. Spencer⁹



Outbreak Background

- In early June, 2007, 229 patrons and employees of a new restaurant in Door County were affected by severe acute gastrointestinal illness, 6 people hospitalized
- New well and conventional drain-field septic system, both conforming to State code
- Hydrogeologic setting: shallow soil over densely fractured dolomite
- Epidemiologic case-control analysis indicated the restaurant's well water was associated with illness





Tap water from well: 50 genomic copies/L

Norovirus isolates from 3 sources had identical 327 bp polymerase gene sequences

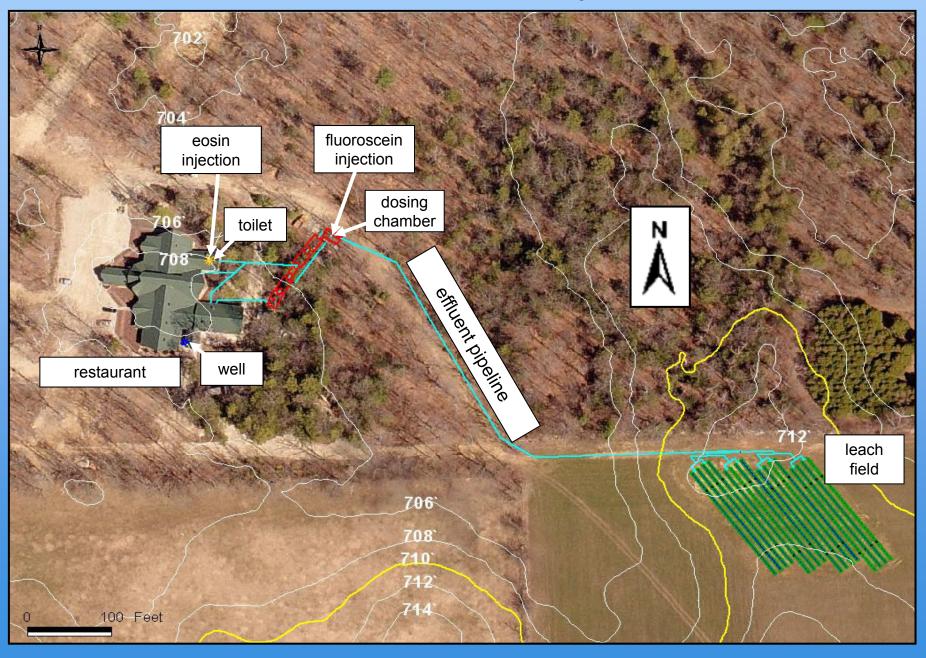




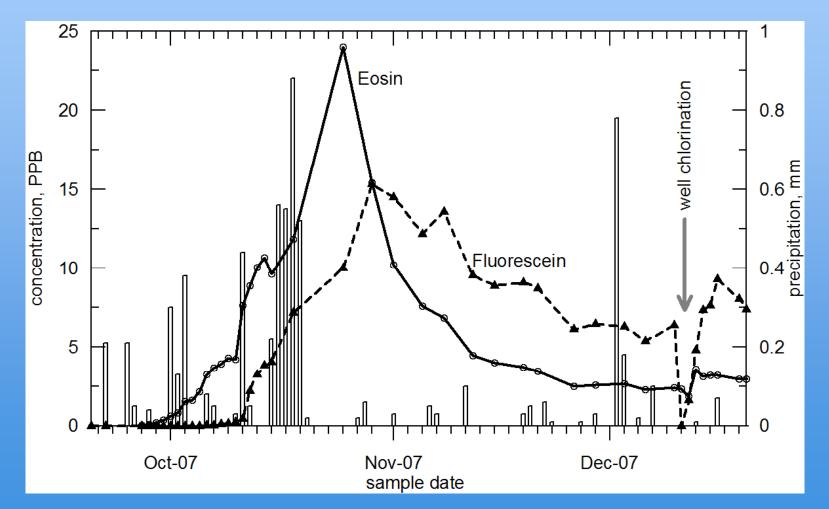
Restaurant patrons: 10^{4 –} 10⁸ gc/gm stool

Septic tank: 79,600 genomic copies/L

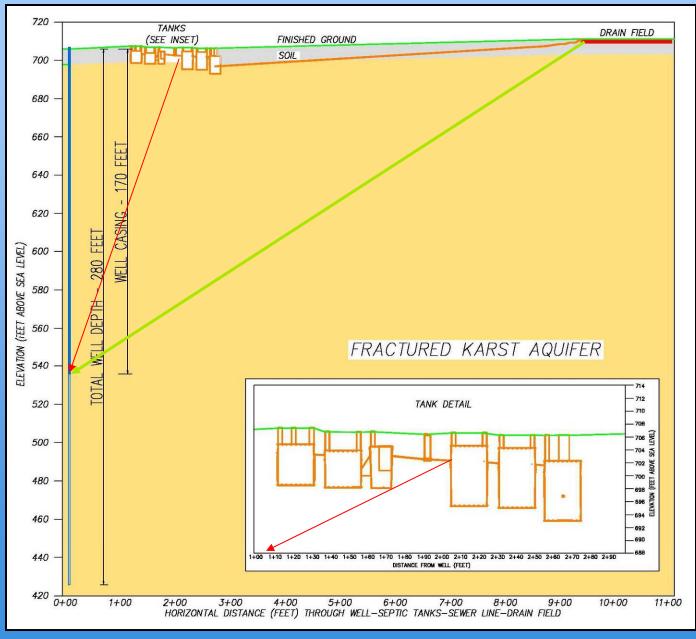
Restaurant - As Built Septic System and Well

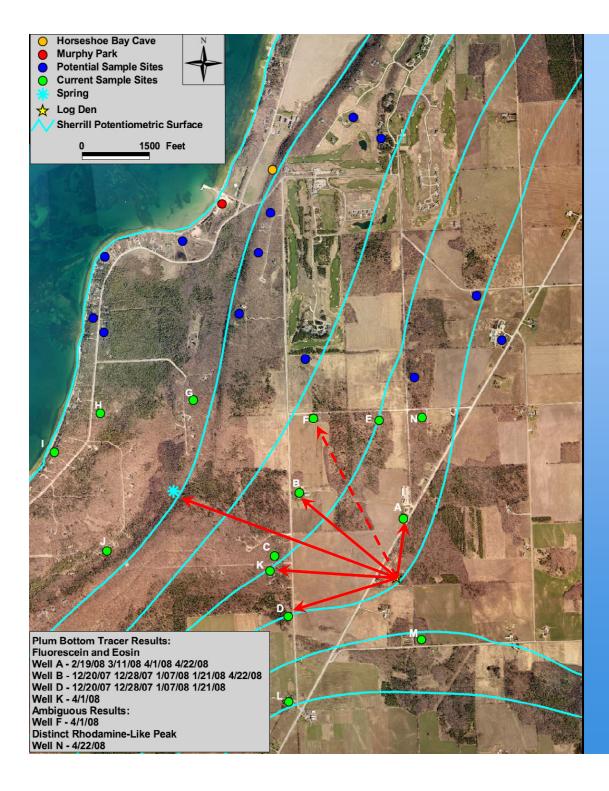


Tracer concentrations in the restaurant supply well



Restaurant Cross Section





Regional Scale Movement of Dye from the Restaurant

Tracer velocities to offsite wells B and D are in the range of 7 to 8 m/d.

Local Geology Is Illness Factor

'Summer Flu' Study Is Made By Scientists

Limestone Fissures Let Wastes Set Into Wells-Say the Researchers

Door county's geology is to blame for so - called "resort diarrhea" according to a U. S. Public Health Service team which, theroughly investigated the fitness last summer. The study was made at the request of the Ephraim Men's club, which heard the preliminary report Thursday night. The report stated that purification of water through chlorination is the practical answer.

Door county is a sliver of top-

Not Only Here.

It was pointed out that the problem is not peculiar to Door county but decurs in many other plages where a concentrated population uses well water.

Three officials were here to give the report, Don Mackel, bacisciologist. Norman Feterson suffary engineer, and the Tree Payne. All work out of the USPHS main office at Atlanta, Ga.

More than 200 people cooperated in making the study this summer. There were 10 medical technologists and 200 college students who were working at the resorts.

Soveral factors were checked and it was found that diarrhea cases coincided with periods of

bad water. The degree of sickness depended on the degree of pollution and the amount of water drunk. The number of people in the area had a direct bearing on the amount of pollution. Another factor was rainfall. Bain dilutes the wastes, decreasing pollution.

Doosn't Make Bad Taste

Twenty-nine wells and 22 resorts were tested. Sixty-four per cent showed bad water at some time during the summer. Even the bast constructed well cen

1955!

Article in the Door County Advocate

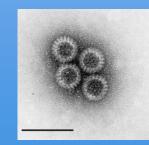
Policy "Lapse" WI Septic System Code Comm 83 allows 24" minimum distance between drainfield and groundwater table or bedrock, regardless of bedrock type.

Groundwater-borne Outbreaks in Karst, USA

http://water.usgs.gov/ogw/karst/kig2002/jbe_map.html P. Berger (2008), table 1

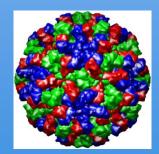
Questions? Comments?













Acknowledgments

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<u>Risk Assessment</u> Frank Loge, Ph.D. Elisabetta Lambertini

<u>EPA</u>

Angela Page Cynthia Nolt-Helms Shay Fout, Ph.D. Phil Berger