

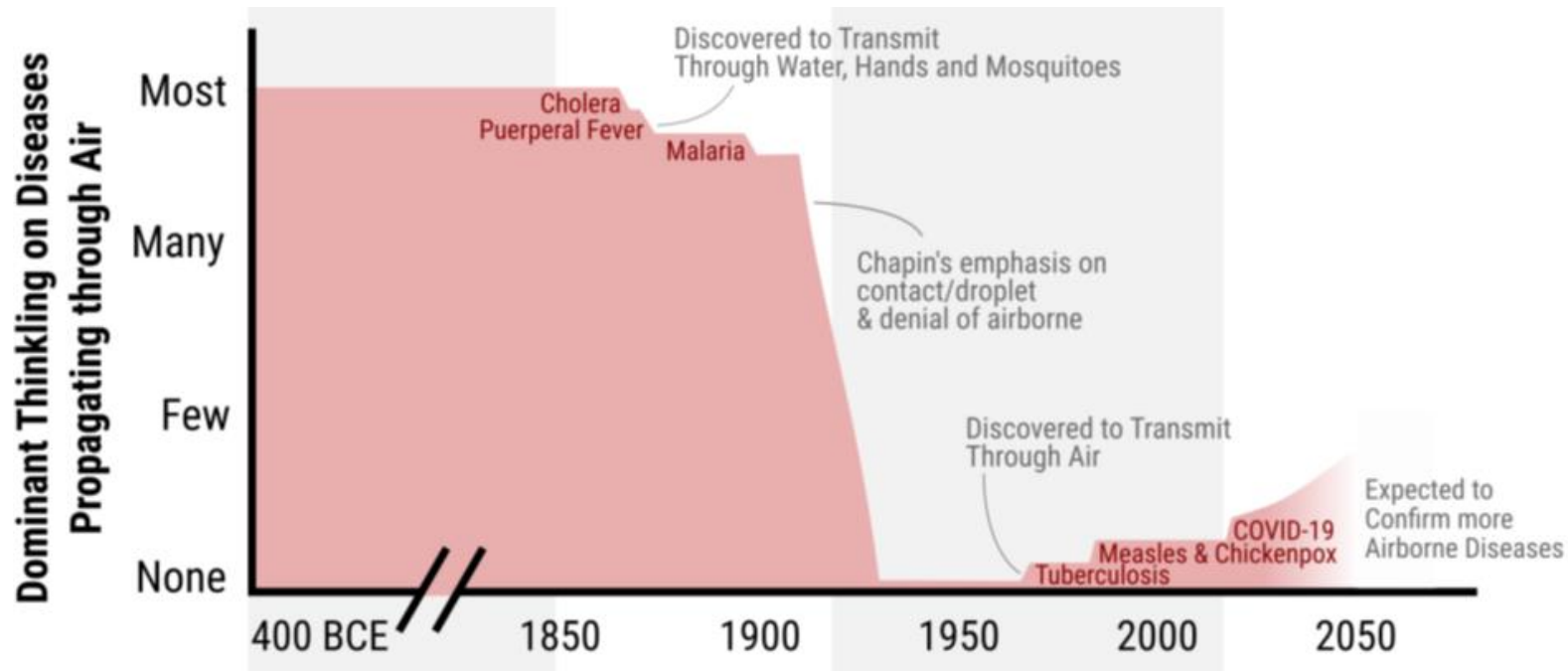
What strategy for the ventilation of buildings during an epidemic period ?

Evelyne Géhin

Centre d'Etudes et de Recherche en Thermique Environnements et
Systèmes

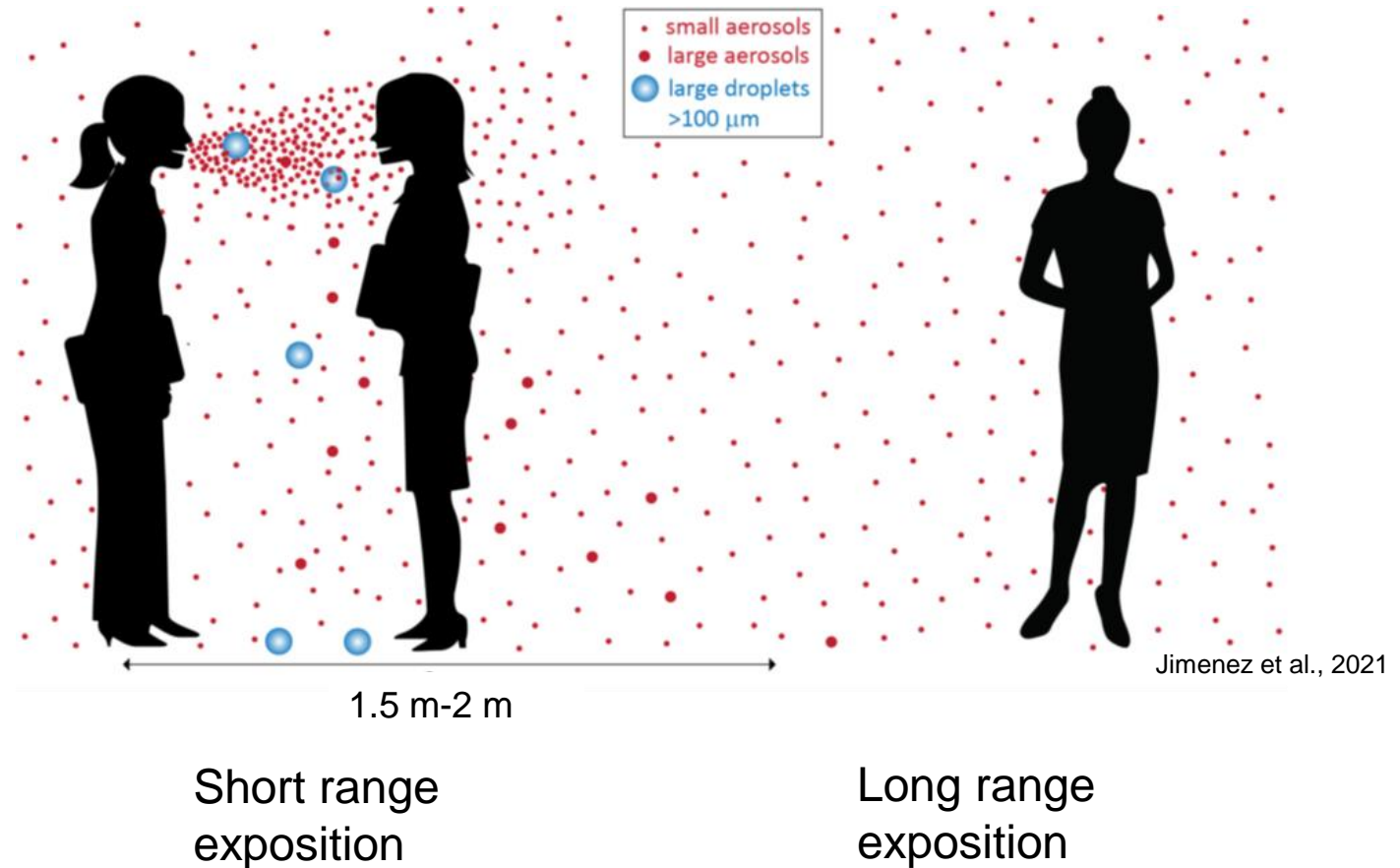
Université Paris-Est Créteil

Airborne transmission is a major mode of transmission for many respiratory infectious diseases



What is exactly airborne transmission ?

- Pathogens in respiratory particles
- Large respiratory particles : liquid $> 100 \mu\text{m}$
- Small respiratory particles : solid, liquid $< 100 \mu\text{m}$

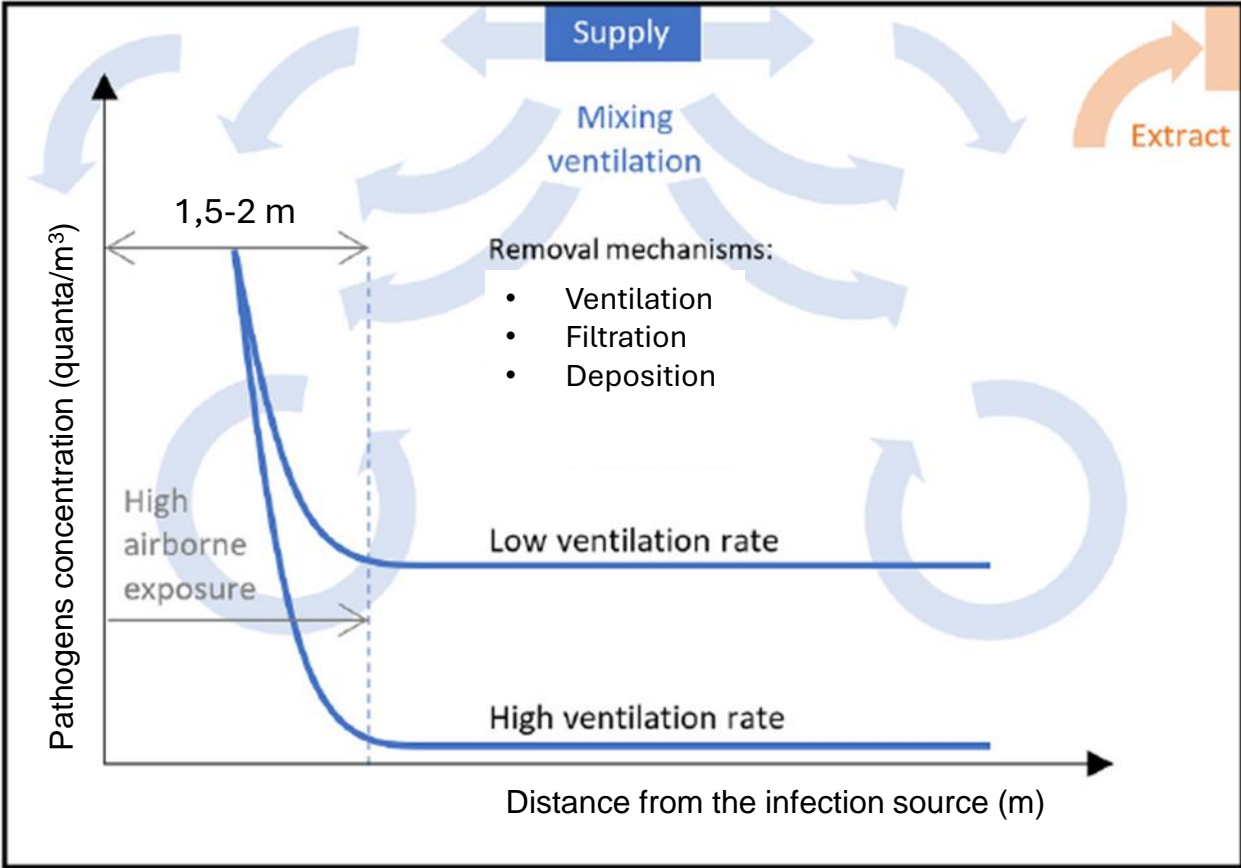


Effect of ventilation on airborne pathogens concentration in a room

Clean Airflow for Infection Risk Mitigation (m³/h/pers)

Short range

Long range



Adapted from Kurnitski et al., Building and Environment, 2021

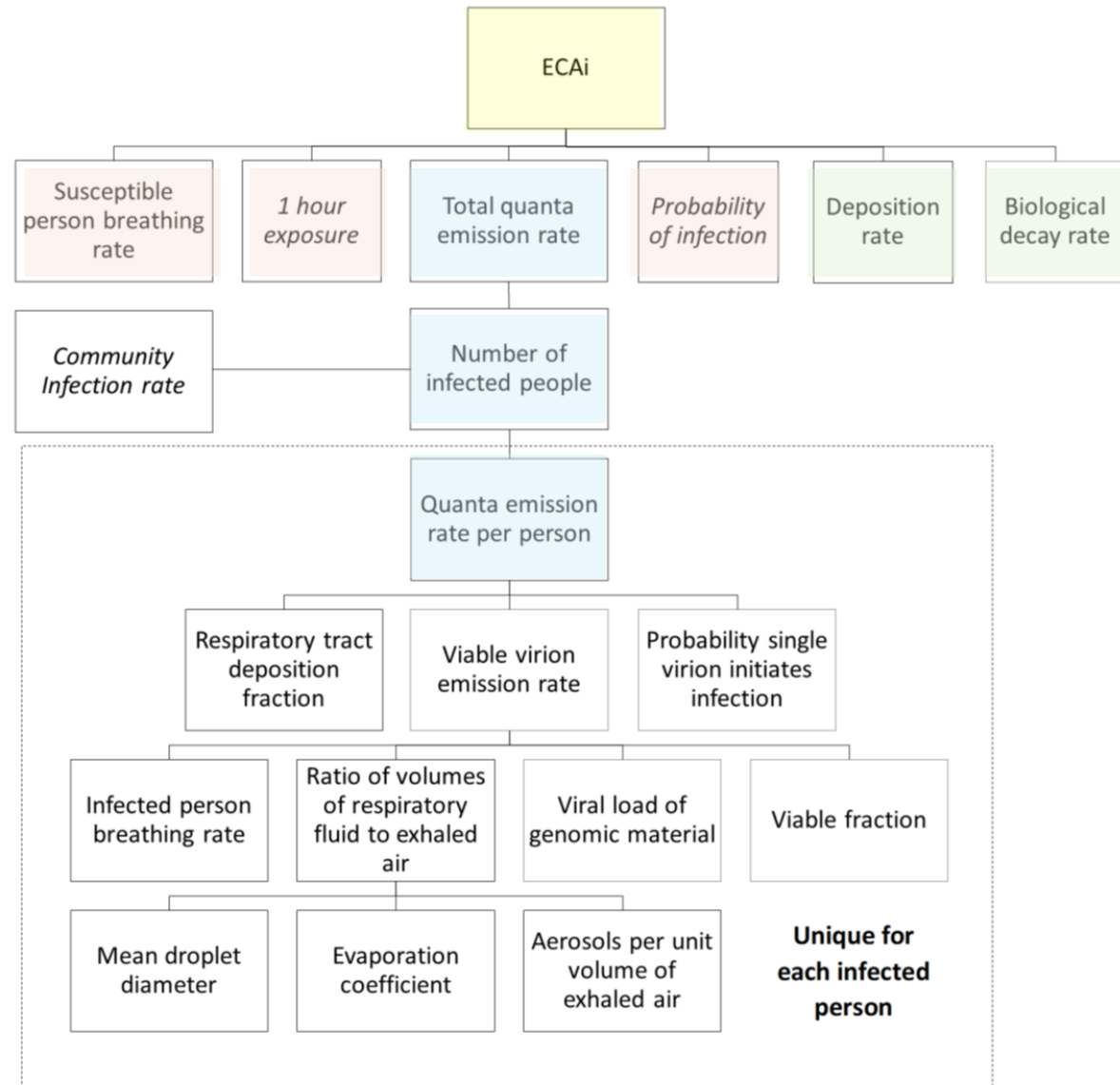
Equivalent clean Airflow for Infection Risk Mitigation ($\text{m}^3/\text{h}/\text{pers}$)

Wells-Riley model

Probability of infection for long range exposition

quanta : dose of infectious airborne pathogens required to cause infection in 63% of susceptible persons

ECAI : ventilation + filtration + other



Infection risk management mode (IRMM) during epidemic period

- CT : code du travail
- RSDT : Règlement Sanitaire Départemental Type
- Norme NF EN 16798-1 (QAI2 et B2)
- Avis du HCSP du 12/10/2023
- ASHRAE Standard 241-2023
- REHVA proposal for post-COVID target ventilation rates (2022)



	CT (m ³ /h.pers)	RSDT (m ³ /h.pers)	Norme NF EN 16798-1 (m ³ /h/pers)	HCSP/IRMM (m ³ /h/pers)	ASHRAE IRMM (m ³ /h/pers)	REHVA IRMM (m ³ /h/pers)
Office (25 m ² , 4 pers.)	25	18	41	50	54	48

For REHVA calculation h = 2.6 m

An infectious person will not infect more than one person during the infectious period

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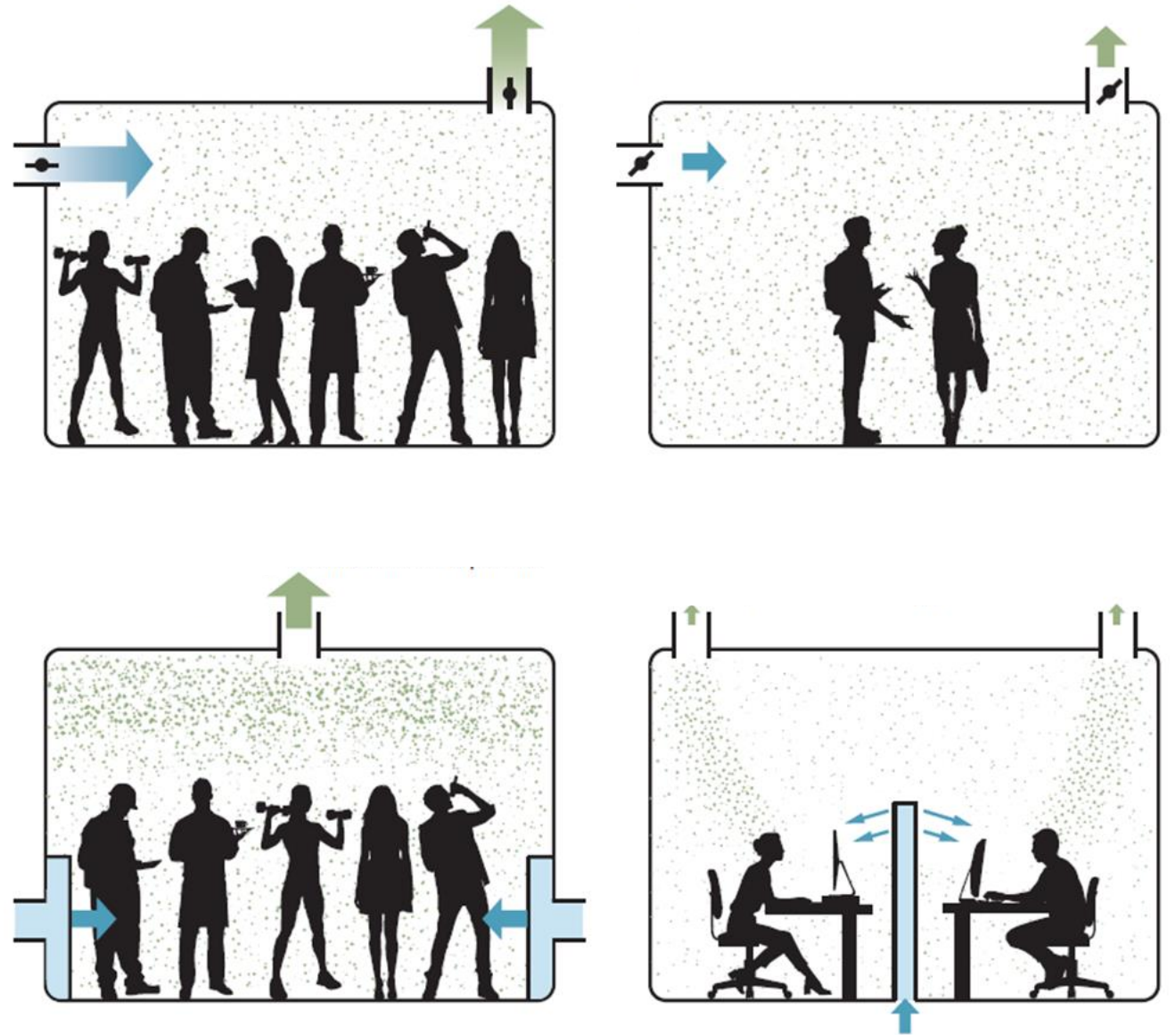
Réglementation pour les crèches, accueils de loisirs, écoles, collèges/lycées : CO2 < 800 ppm

	CT (m ³ /h.pers)	RSDT (m ³ /h.pers)	Norme NF EN 16798-1 (m ³ /h/pers)	HCSP/IRMM (m ³ /h/pers)	ASHRAE IRMM (m ³ /h/pers)	REHVA IRMM (m ³ /h/pers)
Primary school classroom (30 students, 1 prof., 50m ²)	25	15	48	50	72	34
CO2 (ppm)	1200	1733	817	800	678	983

CO2 emission rate per occupant of 20 L/h and an exterior CO2 concentration of 400 ppm

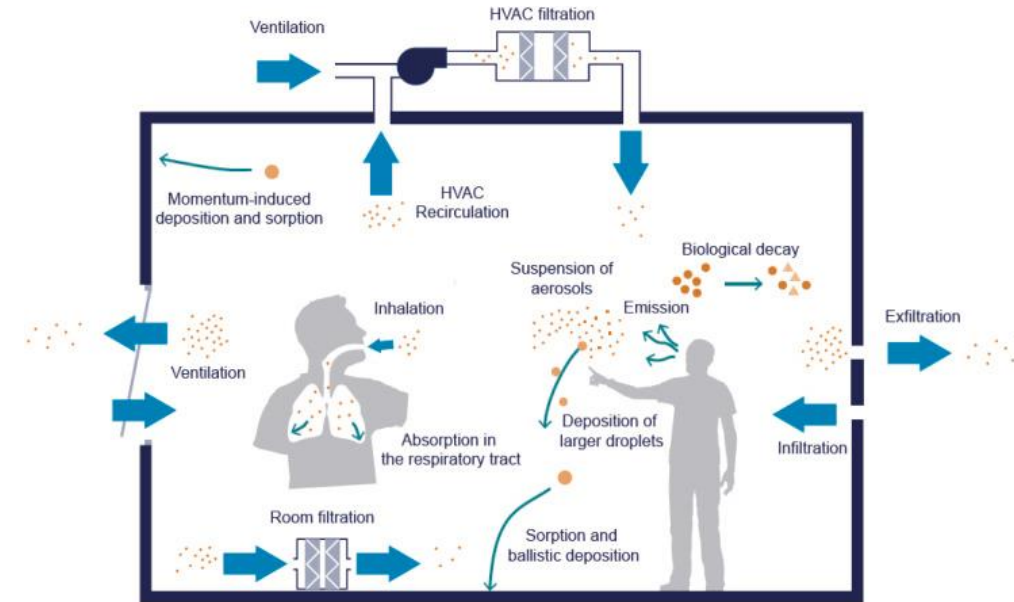
Other strategies ?

- Design for maximum occupancy
- Adjust according to the number of occupants and activities
- System designs adaptation
- Personalized ventilation



Conclusion

- Adapted ventilation reduces the risk of infection for **long-range exposure**
- Ventilation strategy can help to manage infection risk in epidemic period
- Ventilation systems can be adapted to address different viruses



Jones et al., 2021

Question ?