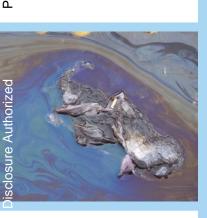


Chemical Contaminants of Water and Health Consequences

Scoping Review









About the Water Global Practice

Launched in 2014, the World Bank Group's Water Global Practice brings together financing, knowledge, and implementation in one platform. By combining the Bank's global knowledge with country investments, this model generates more firepower for transformational solutions to help countries grow sustainably.

Please visit us at www.worldbank.org/water or follow us on Twitter at @WorldBankWater.

About GWSP

This publication received the support of the Global Water Security & Sanitation Partnership (GWSP). GWSP is a multidonor trust fund administered by the World Bank's Water Global Practice and supported by Australia's Department of Foreign Affairs and Trade, the Bill & Melinda Gates Foundation, the Netherlands' Ministry of Foreign Affairs, Norway's Ministry of Foreign Affairs, the Rockefeller Foundation, the Swedish International Development Cooperation Agency, Switzerland's State Secretariat for Economic Affairs, the Swiss Agency for Development and Cooperation, U.K. Department for International Development, and the U.S. Agency for International Development.

Please visit us at www.worldbank.org/gwsp or follow us on Twitter #gwsp.

Chemical Contaminants of Water and Health Consequences

Scoping Review

J. Anderson and O. Cumming



© 2019 International Bank for Reconstruction and Development / The World Bank 1818 H Street NW, Washington, DC 20433 Telephone: 202-473-1000; Internet: www.worldbank.org

This work is a product of the staff of The World Bank with external contributions. The findings, interpretations, and conclusions expressed in this work do not necessarily reflect the views of The World Bank, its Board of Executive Directors, or the governments they represent.

The World Bank does not guarantee the accuracy of the data included in this work. The boundaries, colors, denominations, and other information shown on any map in this work do not imply any judgment on the part of The World Bank concerning the legal status of any territory or the endorsement or acceptance of such boundaries.

Rights and Permissions

The material in this work is subject to copyright. Because The World Bank encourages dissemination of its knowledge, this work may be reproduced, in whole or in part, for noncommercial purposes as long as full attribution to this work is given.

Please cite the work as follows: Anderson, J., and O. Cumming. 2019. "Chemical Contaminants of Water and Health Consequences: Scoping Review." World Bank, Washington, DC.

Any queries on rights and licenses, including subsidiary rights, should be addressed to World Bank Publications, The World Bank Group, 1818 H Street NW, Washington, DC 20433, USA; fax: 202-522-2625; e-mail: pubrights @worldbank.org.

Cover photos (left to right): Byronv2 from Flickr, Wietze Brandsma from Pixabay, Dimitris Vetsikas from Pixabay. *Cover design:* Jean Franz, Franz and Company, Inc.

Contents

Chapter 1 Background, Methods & Search Results	1
Introduction	1
Methods and Search Results	2
References	4
Chapter 2 Water and Sanitation System Chemicals and By-products	5
Introduction	5
Water Treatment Chemicals	5
Wastewater Treatment Chemicals	15
Conclusions	18
References	18
Chapter 3 Agricultural Chemicals	21
Introduction	21
Fertilizers	21
Pesticides	22
Conclusions	33
References	33
Chapter 4 Industrial Chemicals	37
Introduction	37
Conclusions	42
References	44
Chapter 5 Naturally Occurring Chemicals	47
Introduction	47
Elements	48
Radionuclides	50
Conclusions	52
References	52
Chapter 6 Emerging Chemical Contaminants in Drinking Water	55
References	57
Chapter 7 Indicators of Water Quality	59
Introduction	59
Water Quality Parameters	60
Suggested Contaminants and Water Quality Parameters to Monitor	69

Global	Water Quality Index	70
Conclu	Ision	71
Referen	nces	71
Figure	25	
1.1.	The Process of the Exploratory Review	2
1.2.	Outline of the Report Structure	3
2.1.	Conceptual Diagram of Conventional Water Treatment from the	
	American Chemistry Council's Publication On Drinking Water Chlorination	6
Tables	5	
2.1.	Regulatory Guidelines and Health Effects of Chemicals Used as Flocculants and Coagulants	
	and Disinfectants in Drinking Water Treatment	8
2.2.	Regulatory Guidelines and Health Effects of Disinfection by-Products Formed During	
	Drinking Water Treatment	12
2.3.	Regulatory Guidelines and Health Effects of Chemicals Formed During Drinking Water	
	Distribution and Wastewater Treatment	13
2.4.	A List of Chemicals Adapted from the United States Environmental Protection Agency	
	Drinking Water Treatment Database [55] and the Effectiveness of Conventional Water	
	Treatment At Removing Them from Drinking Water Based On Literature Review Up To 2009	16
3.1.	Regulatory Guidelines and Health Impacts of Fertilizers	23
3.2.	Regulatory Guidelines and Health Impacts of Insecticides, Acaricids and Nematicides	
	Grouped by Pesticide Classification Group	28
3.3.	Regulatory Guidelines and Health Impacts of Insecticides, Acaricids and Nematicides	
	Grouped by Pesticide Classification Group	30
4.1.	Regulatory Guidelines and Health Effects of Halogenated Hydrocarbon Contaminants	
	in Drinking Water	40
4.2.	Regulatory Guidelines and Health Effects of Contamination of Drinking Water by	
	Benzene Derivatives	41
4.3.	Regulatory Guidelines and Health Effects of Industrial Contaminants in Drinking Water	43
4.4.	Regulatory Guidelines and Health Effects of Industrial Element Contaminants in	
	Drinking Water	44
5.1.	Regulatory Guidelines and Health Effects of Naturally Occurring Chemical Contaminants	
	of Drinking Water	51
5.2.	Regulatory Guidelines and Health Effects of Naturally Occurring Radionuclide	
	Contaminants of Drinking Water	52
7.1.	Physiochemical Water Quality Measures and Related Health and Aesthetic Guidelines	
	for Drinking Water from WHO, US EPA, Health Canada and the EU	61
7.2.	Chemical Water Quality Measures and Related Health and Aesthetic Guidelines for	
	Drinking Water from WHO, US EPA, Health Canada and the EU	64
7.3.	Biological Water Quality Measures and Related Health and Aesthetic Guidelines for	
	Drinking Water from WHO, US EPA, Health Canada and the EU	67

Chapter 1 Background, Methods & Search Results

Introduction

Under the Millennium Development Goals (MDGs), an international target was established to reduce by half the proportion of peple without access to safe drinking water [1]. Safe drinking water was defined as having access to an 'improved' water source, spanning a number of categories of service deemed to serve as effective proxies for an adequate drinking water supply free from contamination [2]. Progress towards this target was assessed using representative household survey data whereby a household member was asked what type of water source was used by the household most of the time, although the extent to which the water consumed was free from microbial contamination was not directly measured [2]. However, multi-country analyses suggest that a significant proportion of "improved" water sources are faecally contaminated [3]. Whilst there has been no comparable multi-country study of chemical contamination of basic drinking water sources, there are examples of high levels of contamination of "improved" water sources with regard to priority chemicals in certain countries, such as is the case for arsenic in Bangladesh [4]. Whilst the MDG target for water was met in 2012, exposure to contaminated drinking water may remain high, especially in low and middleincome country (LMIC) settings leading some to argue that access to safe drinking water has been over-estimated in the MDG era [5,6].

Contamination of drinking water is addressed under the new water and sanitation Sustainable Development Goal (SDG). SDG 7 adopts a tiered approach with two ascending levels of target service: "basic water access" and "safely managed water access". The higher tier of service, "safely managed" drinking water, is defined as, "drinking water from an improved water source that is located on premises, available when needed and free from faecal and priority chemical contamination" (Target 6.1; Indicator 6.1.1) [7]. As well as providing access to a source free from contamination, the new SDG includes a target addressing the causes of source pollution that is, "to improve water quality by reducing pollution, eliminating dumping and minimizing release of hazardous chemicals and materials..." (Target 6.3) [7]. Whilst there is a large range of hazardous chemicals to which people are can be exposed through drinking water, the WHO/UNICEF Joint Monitoring Programme (JMP) has adopted only two - fluoride and arsenic - as "priority parameters for global monitoring". Although the JMP has initiated direct measurement of microbial contamination through integrating water quality testing within nationally representative surveys [8] efforts to directly measure chemical contamination have been limited to arsenic and fluoride and to just one country in each case.

Although the new SDG addresses chemical contamination as an aspect of "safely managed" the priority parameters of arsenic and fluoride do not represent the wide range of potentially hazardous chemicals that may be found in drinking water. Relatively little is known about the scale of the problem, especially in low- and middle-income countries (LMIC) where both drinking water supply infrastructure is limited and regulation of chemical pollution of drinking water may be weak. As countries industrialize, these problems are likely to worsen as industrial sectors expand, agriculture is intensified and water resources face increasing demand and stress. Some evidence exists already for the effects on human health of these trends [8] but the scale of the problem is poorly understood and priorities for monitoring and regulation, especially in LMIC with limited resources.

Methods and Search Results Aim and Objectives of the Review

The purpose of the review is to review current literature on chemical contamination of drinking water to identify the main chemical contaminants, their sources and the associated health impacts.

The specific objectives of the review are to:

- 1. Identify and categorise a list of key chemical contaminants of drinking water
- 2. Describe the properties and sources of these chemical contaminants
- 3. Describe health consequences of exposure through drinking water
- 4. Propose a priority list of chemicals with reference to regulatory norms

This exploratory review has been implemented in five stages (Figure 1.1).

For the review, we first performed scoping searches to identify key reference texts including global, regional and national guidelines for chemical contamination of drinking water, from which we established an initial list of chemicals for screening. A shortlist of chemical contaminants to be included in the review was then prepared using pre-formulated inclusion and exclusion criteria:

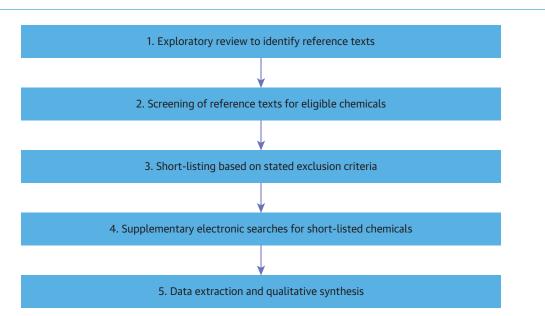


FIGURE 1.1. The Process of the Exploratory Review

Inclusion:

• Guideline value available from WHO

AND/OR

• Guideline available from reference nation and regional regulatory bodies

Exclusion:

• Unlikely to appear in drinking water

OR

• Unlikely to appear in sufficient concentration in drinking water

OR

• No evidence of significant health impact

For the inclusion criteria, the reference for guideline values for WHO was the WHO Drinking Water Quality Guidelines [9] and specifically Chapter 8 concerning chemical aspects of drinking water quality. Three reference texts were used for the availability of guidelines values from a national or regional regulatory body: the European Union Water Directive [10]; the United States Environmental Protection Agency Drinking Water Requirements for States and Public Water Systems [11]; and the Canadian Drinking Water Quality Guidelines [12]. These guidelines differ somewhat in their approach

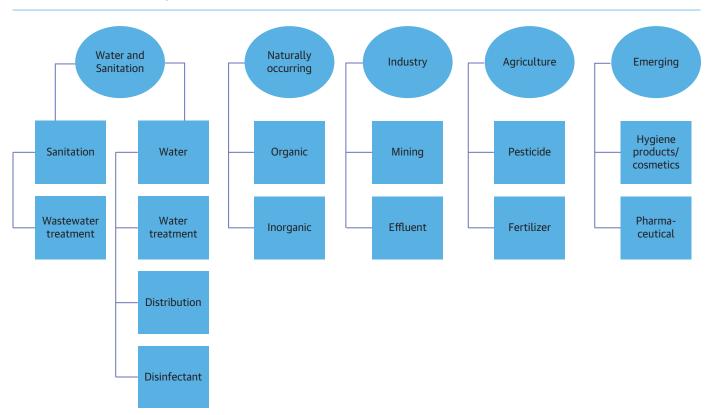


FIGURE 1.2. Outline of the Report Structure

to risk determination, identification and classification of individual chemicals, and regulatory provision but together provide a comprehensive list of eligible chemicals for this review to be subject to short-listing.

Following short-listing, all included chemicals were identified by Chemical Abstract Service (CAS) number and the list de-duplicated and then categorized by source and then further sub-categorized (Figure 2). We then identified key reference texts for each chemical, including synthetic references (policy guidelines and systematic reviews) and individual studies, using key word searches on two electronic databases (Google Scholar and PubMed). The main topics of interest with regard to each chemical were: (1) characteristics; (2) geographic distribution; (3) health consequences; and current regulatory guidelines and practice.

References

- WHO, UNICEF. Progress on Drinking Water and Sanitation 2015 Update and MDG Assessment. WHO/UNICEF Joint Monitoring Programme (JMP) for Water Supply and Sanitation. Geneva, Switzerland: World Health Organisation Press; 2015.
- [2] Measure DHS, ICF International. Demographic and Health Surveys: 2005-10 n.d. http://www.measuredhs.com.
- [3] Bain R, Cronk R, Wright J, Yang H, Slaymaker T, Bartram J. Fecal Contamination of Drinking-Water in Low- and Middle-Income Countries: A Systematic Review and Meta-Analysis. PLOS Med 2014;11:e1001644. doi:10.1371/journal.pmed.1001644.
- [4] Smith AH, Steinmaus CM. Health Effects of Arsenic and Chromium in Drinking Water: Recent Human Findings. Annu Rev Public Health 2009;30:107-22. doi:10.1146/annurev.publhealth.031308.100143.
- [5] Clasen TF. Millennium Development Goals water target claim exaggerates achievement. Trop Med Int Health 2012;17:1178-80. doi:10.1111/j.1365-3156.2012.03052.x.
- [6] Onda K, Lobuglio J, Bartram J. Global access to safe water: accounting for water quality and the resulting impact on MDG progress. World Health Popul 2013;14:32-44.
- [7] WHO, UNICEF. Progress on Drinking Water, Sanitation and Hygiene: 2017 Update and SDG Baselines. Geneva: World Health Organization (WHO) and the United Nations Children's Fund (UNICEF): 2017.
- [8] Khan SM, Bain RES, Lunze K, Unalan T, Beshanski-Pedersen B, Slaymaker T, et al. Optimizing household survey methods to monitor the Sustainable Development Goals targets 6.1 and 6.2 on drinking water, sanitation and hygiene: A mixed-methods field-test in Belize. PLOS ONE 2017;12:e0189089. doi:10.1371/journal.pone.0189089.
- [9] WHO. Guidelines for drinking-water quality: fourth edition incorporating the first addendum. Geneva: World Health Organization: 2017.
- [10] EU. European Union (Drinking Water) Regulations 2014. 2014.
- [11] US EPA O. Drinking Water Requirements for States and Public Water Systems. US EPA 2015. https://www.epa.gov/dwreginfo (accessed February 12, 2018).
- [12] Health Canada. Guidelines for Canadian Drinking Water Quality Summary Table. Ottawa, Ontario: Water and Air Quality Bureau, Healthy Environments and Consumer Safety Branch, Health Canada; 2017.

Chapter 2 Water and Sanitation System Chemicals and By-products

Introduction

Chemicals are used throughout the treatment process, summarized generally as 1) coagulation and flocculation, 2) sedimentation, 3) filtration, and 4) disinfection [1]. Disinfectants are also often applied to provide residual protection during water storage and distribution. They are also used to treat wastewater before discharging into surface and groundwater. Water treatment systems around the world vary in size and complexity, utilizing different combinations of physical and chemical processes. Flocculants and disinfectants can be used throughout treatment processes both in the primary disinfection stage but also in storage and distribution. Chemicals directly added to water supply can come in contact with organic matter, pipes, and tanks, forming indirect chemical compounds that can be dangerous to human health.

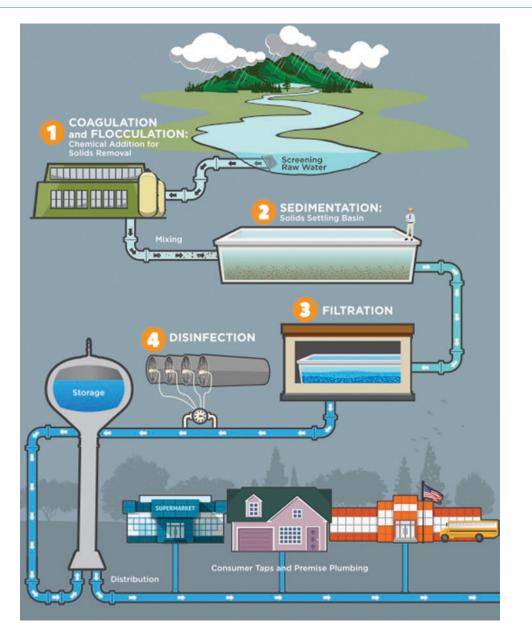
Conventional water treatment consists of coagulation and flocculation, sedimentation, filtration and disinfection steps (Figure 2.1). The addition of metal salts such as alum or iron is added to raw water to coagulate organic matter and other unwanted heavy metals that form larger masses (floc) that settle out of the water during the sedimentation stage. After sedimentation, water is filtered through a combination of materials or filters including sand, gravel, coal, activated carbons or membranes. After filtration disinfection chemicals, typically those that form free chlorine are added to the water to deactivate microorganisms. Conventional treatment is not or only partially effective against removal of many chemical contaminants (Table 2.4). Retrofitting current and building new treatment facilities with nanofiltration and other technologies needed to remove chemical contaminants from drinking water supplies are costly and prohibitive in many countries. Preventing contamination of drinking water and monitoring water quality to measure risk are increasingly important along with making changes and upgrades in treatment technologies.

Water Treatment Chemicals

Chemical disinfectants and flocculants are critical to purifying water by reducing enteric pathogen loads and physical removal of potentially harmful particles from drinking water supplies and wastewaters. Flocculants and coagulants bind with metals and organic matter (OM), forming larger compounds that are precipitated out of water during filtration and sedimentation.

Treatment with chlorine or chlorinated compounds are the most commonly used chemicals in disinfection worldwide. Additional volumes of these compounds are added to sustain disinfection concentration levels throughout water distribution and storage. Most chemicals used in drinking water chlorination are mild irritants if levels are too high. The more serious health concerns are





caused by unintended and harmful disinfectant by-products (DBPs), leading to increased use of alternative treatments such as ultraviolet (UV) radiation and ozone. However, all treatment processes produce some form of harmful by-products that cause environmental and human health problems. Regulatory bodies have set guidelines for beneficial treatment chemicals, leachates from distribution systems, and harmful by-products to monitor and reduce drinking water and environmental contamination.

Flocculants

Aluminum and iron are both found naturally in ground and surface waters worldwide. Aluminum and iron salts are added to water to coagulate and flocculate unwanted chemicals and OM that can be removed by filtration or sedimentation [2]. OM in source water is the key organic precursor to forming halogenated DBPs. Flocculants can also be used to remove both DBPs and their precursors. Recent lab research suggests that residuals from iron and aluminum coagulation and flocculation treatment may contribute to lead leachate from lead bearing pipes and solder during distribution [3].

Acrylamide is found in drinking water when intentionally added as polyacrylamide, a flocculent to reduce turbidity, and as a pollutant from industrial activities [4]. Acrylamide residuals are also a concern in surface and ground waters from use as a flocculent in wastewater treatment. Acrylamide has also been shown to form precursors to DBPs through chlorination during degradation [5]. The health risk associated with acrylamide has led to research exploring mixtures of polyacrylamides and starch-based alternatives [6].

Aluminum is generally considered to have low toxicity to humans in levels typically present in drinking water [7]. However, regulatory reviews cite concerns about research showing associations between aluminum levels found in drinking water and development of Alzheimer's disease [8,9]. WHO and Canada both reviewed this evidence and state that there is not enough evidence to consider aluminum as a critical neurotoxin in drinking water [10,11]. Canada has adopted an operational guideline based on WHO recommendations (Table 2.1), while the US EPA has established a non-enforceable secondary drinking water regulation of 0.05 to 0.2 mg/L maximum contaminant level [12].

Iron salts are considered as an alternative to alums because of concerns over chronic aluminum toxicity [13]. Iron is not considered to have acute toxicity concern at the levels found in drinking water, however, Canada has set aesthetic guideline because of its role in undesirable color and taste [14].

Residual acrylamide is a human neurotoxin and potential carcinogen [15-17]. WHO has set guidelines for drinking water while the US EPA has set treatment technique guidelines that provide legal processes for use (Table 2.1).

Disinfectants

Compounds producing free chlorine are the most commonly and widely used to disinfect drinking water in both primary and secondary disinfection, first used in Europe in the 1890s and in the US in 1908 [1]. It is applied to drinking water as chlorine gas, sodium hypochlorite, calcium hypochlorite and sodium dichloroisocyanurate, forming a pH-dependent ratio of free chlorine, hypochlorous acid and hypochlorite in solution [21,22]. Chlorine is used for microbial disinfection mainly, but also acts as an oxidant, assisting in the removal or conversion of chemical contaminants [18].

Chlorine toxicity in drinking water is of minor concern. The most serious consequences of chlorine are its reactions with natural OM and other chemicals to form harmful DBPs [23]. As a result, chemical alternatives to free chlorine and other processes such as ozonation and UV disinfection are being used to reduce conventional chlorination, which produces the highest number of DBPs [24].

Chlorine dioxide and chloramines are chemical alternatives to using free chlorine that produce fewer halogenated DBPs than chlorination [25]. However, they all form some harmful DBPs [24] and can be

TABLE 2.1. Regulatory Guidelines and Health Effects of Chemicals Used as Flocculants and Coagulants and Disinfectants in Drinking Water Treatment

Regulation group	CAS ID number	WHO Guideline value	EU Parametric value	Health Canada Maximum Acceptable Concentrations	Health Canada Operational guidelines (mg/L)	Health Canada Aestheic guidelines	US EPA Maximum Residual Disinfectant Level	US EPA Treatment technique	Health effects	Individual Chemica Names
Flocculants										
Aluminium	7429- 90-5	-	0.2 mg/L	-	0.1 (conventional) & 0.2 (other treatment plants)	-	-	-	No consistent, convincing evidence that Al in drinking water causes adverse health effects in humans.	-
Iron	7439- 89-6	-	0.2 mg/L	-	-	≤0.3 mg/L	-		None	-
Acrylamide	79-06-1	0.00005 mg/L	0.0001 mg/L	-	-	-	-	0.05% dosed at 1 mg/L	Nervous system or blood problems; increased risk of cancer	-
Disinfectants										
Chlorine	7782- 50-5	5.0 mg/L	-	-	-	-	4.0 mg/L	-	Eye/nose irritation; stomach discomfortEPA	-
Chlorine dioxide	10049- 04-4	-	-	-	-	-	0.8 mg/L	-	Anemia; infants and young children: nervous system effects EPA	-
Dichloramine	3400- 09-7	-	-	3.0 mg/L	-	-	4.0 mg/L	_	Reduced body weight gain; Immunotoxicity effectsCA; Eye/nose irritation; stomach discomfort, anemia	-

table continues next page

 ∞

Regulation group	CAS ID number	WHO Guideline value	EU Parametric value	Health Canada Maximum Acceptable Concentrations	Health Canada Operational guidelines (mg/L)	Health Canada Aestheic guidelines	US EPA Maximum Residual Disinfectant Level	US EPA Treatment technique	Health effects	Individual Chemical Names
Dichloroisocyanuric acid	2893- 78-9; 2782- 57-2	50 mg/L³; 40 mg/L⁵	-	-	-	-	-	-	Eye/nose irritation; stomach discomfort	ªSodium dichloroisocyanurate; ♭dichloroisocyanurate
Monochloramine	10599- 90-3	3.0 mg/L	-	3.0 mg/L	-	-	4.0 mg/L	-	Reduced body weight gain; Immunotoxicity effectsCA; Eye/nose irritation; stomach discomfort, anemia	-
Trichloramine	10025- 85-1	-	-	3.0 mg/L	-	-	4.0 mg/L	-	Reduced body weight gain; Immunotoxicity effectsCA; Eye/nose irritation; stomach discomfort, anemia	-

Note: Health effects summaries are adapted from WHO, US EPA and Health Canada Guidelines [18-20]. Health Canada maximum acceptable concentration refer to maximum allowed concentration thresholds for finished drinking water. Health Canada operational guideline applies to treatment plants using aluminum-based coagulants. It does not apply to naturally occurring aluminum found in groundwater. Aesthetic quality guidelines address parameters which may affect consumer acceptance of drinking water, such as taste, odour and colour. US EPA maximum residual disinfectant level goal is the level of a drinking water disinfectant below which there is no known or expected risk to health. US EPA treatment technique is a required process intended to reduce the level of a contaminant in drinking water.

less efficient as microbial disinfectants or are costlier than chlorination alone. They are often used in combination with chlorination and other treatment methods.

Chlorine dioxide is a dissolved gas that is useful as a primary disinfectant, but is harder to maintain as a secondary disinfectant [1] than chlorination residuals. Chlorine dioxide treatment produces less halogenated DBPs than chlorination [26] and is a strong oxidant that is useful for controlling iron, manganese, taste and odor [25,27,28]. Chlorine dioxide is used in pre-oxidation and primary disinfection with free chlorine added to provide residual disinfection. This results in low levels of free chlorine (hypochlorous acid or hypochlorite ion) and chlorine dioxide, along with chlorite in the final water product.

Reactions between chlorine and chlorite can form chlorate at concentrations, depending on environmental conditions. Both chlorite and chlorate are harmful, commonly reported inorganic DBPs produced by chlorine dioxide treatment. Other DBPs, including carboxylic acids, ketones, aromatic compounds (e.g. naphthalene) and esters have also been found during experiments in treatment facilities [24]. At high levels, chlorite alters red blood cells and chlorate negatively impacts thyroid functions in laboratory animals [28,29].

Sodium dichloroisocyanurate produces free chlorine and is primarily used in emergencies or in household drinking water treatment [30] as well as in swimming pools and the food industry.

Monochloramine, dichloramine and trichloramine are formed by combining chlorine and ammonia [31]. The formation of each is dependent on pH, ammonia-chlorine ratios, temperature and contact time. Monochloramine is most commonly used in secondary disinfection due to its longer persistence than free chlorine residuals, while with dichloramine and trichloramine are undesirable by-products of chloramination of drinking water [18]. Chloramines have lower disinfectant power than free chlorine against resistant microrganisms (i.e. *Giardia* and *Cryptosporidium*) and are often not applied in primary disinfection.

Chloramine disinfection forms only trace amounts of triahalomethanes (THMs) and haloacetic acids (HAAs) compared to traditional chlorination [32]. The major drawback of monochloramine use is the formation of nitrogenous DBPs [33], some of which are dangerous to human health [34] and cause nitrification of drinking water [35].

Aside from occupational hazards associated with chlorine gas, chlorine in drinking water is only considered as an irritant. Residues of sodium dichloroisocyanurate are of little concern because, when in contact with saliva, they quickly form cyanuric acid which has low oral toxicity [36]. Chlorine dioxide is not considered to be dangerous to health as it quickly degrades to chorite and chloride after ingested in drinking water [28].

Disinfectant by-Products

The majority of risk of using free chlorine for drinking water disinfection is the formation of THMs and HAAs. In response, chemical alternatives such as chloramine has been promoted to reduce THMs and HAAs to acceptable levels. However, chloramines form halogenated acetonitriles and N-Nitrosodimethylamine (N-NDMA) by-products as well as producing nitrite and nitrate in finished drinking water. There is increasing concern with the number of unregulated emerging DBPs, with a

recent review identifying 110 species to include in their analysis. DBPs are also formed by alternatives to chlorination. Bromate is formed during ozonation with naturally occurring bromide in source waters [37].

Chlorine dioxide, another alternative to free chlorine treatment [25], degrades to form the inorganic ions chlorite and chlorate. Chlorite also combines with free chlorine, which can be added during secondary disinfection, to form chlorate [26,27]. Both are absorbed quickly into the blood plasma upon ingestion and are not considered to be dangerous to human health at levels typically present in drinking water. Neither are thought to persist long in the environment, though chlorate in groundwater in agricultural areas was associated with increased nitrate levels and may have originated from perchlorate originating in pesticides [38].

Trihalomethanes, including bromodichloromethane, bromoform, chloroform, dibromochloromethane, and HAAs including monochloroacetate, dichloroacetate, and trichloroacetate are formed when chlorine and organic matter are present together in water. THMs and HAAs were among the first regulated DBPs by the US EPA. TMH formation increases with chlorine concentration and residence times in the treatment facility or distribution system, while HAAs decrease with residence times [39]. TMHs concentration also increases with temperature, but the relationship between increasing temperature and HAAs is not as clearly associated, likely because of increased chemical and biological degradation rates as temperature increases [39].

In a review of Volatile Organic Compounds (VOCs) in drinking and environmental waters, the most common trihalomethanes detected in drinking water as disinfection by-products were trichloro- and tribromomethane, bromodichloromethane, and dibromochloromethane [40]. Trihalomethanes were the widely detected group of VOCs in US groundwaters as sampled through untreated drinking wells [41]. These may be entering groundwater as a result of DBPs, but they are also present in a wide range of industrial and household products (e.g. solvents, paints and glues).

Chronic exposure to TMH has been associated with bladder cancer [42], though identifying causative chlorination DBP agents of bladder cancer is still difficult from epidemiological studies [43]. The health consequences of THM in drinking water include those from oral ingestion and from skin absorption during bathing, in the case of chloroform [44]. Some of the HAAs are associated with tumor formation in animal models. For example, bromate was associated renal tumor formation also in rats and mice [43].

There is increased interest in nitrogenous disinfection by-products (N-DBPs) that have been studied and regulated less than other DBPs, because they demonstrate higher geno- and cytotoxicity than THMs and HAAs and are formed from increasing uses of chloramines as treatment chemicals to reduce formation of THMs and HAAs [33]. N-DBPs are formed when free chlorine or inorganic chloramine are added to water during treatment and react with organic dissolved nitrogen or organic dissolved carbon present in water. This group includes N-Nitrosodimethylamine and the halogenated acetonitriles (e.g dibromoacetonitrile and dichloroacetonitrile). The formation of N-DBPs will be determined also by the type and timing of disinfection chemicals.

TABLE 2.2. Regulatory Guidelines and Health Effects of Disinfection By-Products Formed During Drinking Water Treatment

Regulation group	CAS ID number	WHO Guideline value	EU Parametric value	Health Canada Maximum Acceptable Concentrations	US EPA Maximum Contaminant Level	Health effects	Individual Chemical Names
Bromate	15541-45-4	0.01 mg/L	0.01 mg/L	0.01 mg/L	0.01 mg/L	Renal cell tumours; Increased risk of cancer	-
Chlorate	14866-68-3	0.7 mg/L	-	1 mg/L		Thyroid gland effects (colloid depletion)	-
Chlorite	14998-27-7	0.7 mg/L	-	1 mg/L	1 mg/L	Neurobehavioural effects , decreased absolute brain weight, altered liver weights; Anemia; infants and young children: nervous system effects	-
Chlorophenols	87-86-5; 88-06-2; 120-83-2; 58-90-2	0.009 mg/L³; 0.2 mg/L⁵	-	0.06 mg/Lª; 0.1 mg/ L ^ь ; 0.005 mg/L ^c ; 0.1 mg/L ^d	0.001 mg/Lª	Reduced body weight, changes in clinical parameters, histological changes in kidney and liver, reproductive effects, Liver cancer , Liver effects, Developmental effects; Liver or kidney problems; increased cancer risk	^a Pentachlorophenol; ^b 2,4,6-Trichlorophenol; 2,4-Dichlorophenol ;2,3,4,6-Tetrachlorophenol
Haloacetic acids	13425-80-4; 14526-03-5; 14357-05-2; Total haloacetic acids	0.05 mg/Lª; 0.02 mg/L ^ь ; 0.2 mg/L ^c	-	0.08 mg/L (Total)	0.06 mg/L (Total)	Liver cancer (DCA); Other organ cancers (DCA, DBA, TCA); liver and other organ effects (MCA); Increased risk of cancer	Dichloroacetate; Monochloroacetate; Trichloroacetate
Halogenated acetonitriles	3252-43-5; 3018-12-0	0.07 mg/L³; 0.02 mg/L⁵	-	-	-		^a Dibromoacetonitrile; ^b Dichloroacetonitrile
N-Nitrosodimethylamine	62-75-9	0.0001 mg/L	-	0.00004 mg/L		Liver cancer (classified as probable carcinogen)	
Trihalomethanes	75-27-4; 75-25-2; 67-66-3; 124-48-1	0.06 mg/L ^a ; 0.1 mg/L ^b ; 0.005 mg/L ^c ; 0.1 mg/L ^d	0.1 mg/L (Total)	0.1 mg/L (Total)	0.08 mg/L (Total)	Liver effects (fatty cysts); Kidney and colorectal cancers; Liver, kidney or central nervous system problems; increased risk of cancer	^a Bromodichloromethane; ^b Bromoform; ^c Chloroform; ^d Dibromochloromethane

Note: Health effects summaries are adapted from WHO, US EPA and Health Canada maximum acceptable guidelines [18–20]. Chemical abstracts service numbers (CAS) are listed in the second column. Health Canada maximum acceptable concentration refer to maximum allowed concentration thresholds for finished drinking water. Health Canada operational guideline applies to treatment plants using aluminum-based coagulants. It does not apply to naturally occurring aluminum found in groundwater. Aesthetic quality guidelines address parameters which may affect consumer acceptance of drinking water, such as taste, odour and colour. US EPA maximum residual disinfectant level goal is the level of a drinking water disinfectant below which there is no known or expected risk to health. US EPA treatment technique is a required process intended to reduce the level of a contaminant in drinking water.

12

Regulation group	CAS ID number	WHO Guideline value	EU Parametric value	Health Canada Maximum Acceptable Concentrations	Health Canada Aestheic guidelines	US EPA Maximum Contaminant Level (mg/L)	US EPA Treatment technique	Health effects	Individual Chemical Names
Distribution									
Cadmium	7440-43-9	0.003 mg/L	0.005 mg/L	0.005 mg/L	-	0.005 mg/L	-	Kidney damage and softening of bone	-
_ead	7439-92-1	0.01 mg/L	0.01 mg/L	0.01 mg/L	-	-	0.015 mg/L	Biochemical and neurobehavioural effects (intellectual development, behaviour) in infants and young children (under 6 years); Anaemia, central nervous system effects; in pregnant women, can affect the unborn child; in infants and children under 6 years, can affect intellectual development, behaviour, size and hearing; classified as probably carcinogenic to humansCA; Adults: Kidney problems; high blood pressure	-
Nickel	7440-02-0		0.07	-	-	0.02	-	Dermatitis, carcinogenic	
Polycyclic aromatic hydrocarbons	50-32-8; 206-44-0	0.0007 mg/L	0.0001 mg/L	0.00004 mg/L ^a	_	0.0002 mg/Lª	-	Stomach tumoursCA; Reproductive difficulties; increased risk of cancer	Benzo[a]pyrene;bFluoranthen
Sulfide	18496-25-8	-	-	-	≤ 0.05 mg/L	-	-	None; Foul taste and odor	-
Vinyl chloride	75-01-4	0.0003 mg/L	0.0005 mg/L	0.002 mg/L	-	0.002 mg/L	-	Liver cancer; Raynaud's disease, effects on bone, circulatory system, thyroid, spleen, central nervous systemCA; Increased risk of cancer	-

TABLE 2.3. Regulatory Guidelines and Health Effects of Chemicals Formed During Drinking Water Distribution and Wastewater Treatment

table continues next page

<u> </u>	TABLESS	continued
4	IABLE 2.3.	continued

Regulation group	CAS ID number	WHO Guideline value	EU Parametric value	Health Canada Maximum Acceptable Concentrations	Health Canada Aestheic guidelines	US EPA Maximum Contaminant Level (mg/L)	US EPA Treatment technique	Health effects	Individual Chemical Names
Zinc	7440-66-6	-	-	-	≤ 5.0 mg/L	-	-	-	-
Copper	7440-50-8	2 mg/L	0.002 mg/L	-	≤ 1.0 mg/L	1.3 mg/L	1.3 mg/L	Short term exposure: Gastrointestinal distress; Long term exposure: Liver or kidney damage; People with Wilson's Disease should consult their personal doctor if the amount of copper in their water exceeds the action level	-
Wastewater treatme	ent								
Nitrilotriacetic acid	139-13-9	0.2 mg/L	-	0.4 mg/L	-	-	-	Kidney effects (nephritis and nephrosis); Classified as possible carcinogen	-
Nitrogen anions	14797-55-8; 14797-65-0	50 mg/Lª; 3 mg/L ^b	50 mg/L³; 0.5 mg/L⁵	10 mg/L ^c ; 1 mg/L ^d	-	10 mg/L⁵; 1 mg/Lª	-	Methaemoglobinaemia (blue baby syndrome) and effects on thyroid gland function in bottle- fed infants; Classified as possible carcinogen under conditions that result in endogenous nitrosation	^a Nitrate; ^b Nitrite; ^c N in Nitrate ^d N in Nitrite
Sodium	7440-23-5	-	200 mg/L	_	≤ 200 mg/L	_	_	-	-

Note: Health effects summaries are adapted from WHO, US EPA and Health Canada maximum acceptable guidelines [18-20]. Chemical abstracts service numbers (CAS) are listed in the second column. Health Canada maximum acceptable concentration refer to maximum allowed concentration thresholds for finished drinking water. Health Canada operational guideline applies to treatment plants using aluminum-based coagulants. It does not apply to naturally occurring aluminum found in groundwater. Aesthetic quality guidelines address parameters which may affect consumer acceptance of drinking water, such as taste, odour and colour. US EPA maximum residual disinfectant level goal is the level of a drinking water disinfectant below which there is no known or expected risk to health. US EPA treatment technique is a required process intended to reduce the level of a contaminant in drinking water.

N-Nitrosodimethylamine can be formed from nitrogen contributed during chloramine treatment or from dissolved organic nitrogen. Increased nitrate and nitrogen are both sources of dissolved organic nitrogen in drinking water sources. If not removed before treatment with free chlorine or chloramine, dissolved organic nitrogen increase the probably of N-Nitrosodimethylamine formation [45].

Distribution

Materials used for piping and connections must be regularly monitored as they can become sources of contamination as they age. Additionally, primary and secondary treatment chemicals reach levels that can corrode distribution materials and cause chemicals to dissolve into water supplies. The impact of treatment and pre-distribution DBP chemicals on corrosion depends upon the type and residence time of those chemicals and will vary widely depending on piping and solder used in the distribution system.

Corrosion in pipes can create scales that adsorb heavy metals, such as aluminum, lead, copper, cadmium, arsenic and zinc [46]. Aging pipes and pipe fittings can also corrode and potentially release lead, cadmium and nickel into drinking water supplies [47-49]. Polyvinyl chloride (PVC) pipes can also leach lead, as well as vinyl chloride into the drinking water supply [47,50]. A large EPA study to identify and quantify contaminants in lead pipe scale in several sites throughout the US found lead in the largest amounts, followed by zinc, copper, nickel, mercury, chromium, cadmium and arsenic [51]. Higher levels of arsenic have been found adsorbed to iron pipes in sites in Ohio and Michigan [52].

Polycyclic Aromatic Hydrocarbons (PAHs) exposures typically occur through inhalation rather than oral ingestion. Their presence in drinking water is likely due to the use of coal tar-based lined pipes in the water distribution system [53]. WHO has recommended the removal and discontinued uses of coal tar-based pipe lining. Benzo[a]pyrene is the most carcinogenic PAH, while Fluoranthene is the most detected in water distribution systems [53].

Wastewater Treatment Chemicals

Several classes of emerging chemicals, including bromoform, a trihalomethane, were found in drinking water treatment plant (WTP) source streams and in raw water intakes [54]. Both source streams had significant effluent from sewage treatment plants upstream of the WTP and could be interpreted as bromoform entering the environment through sewage treatment processes or through industrial effluent. The authors did not specifically discuss bromoform at length as it was just one of 106 chemicals tested in the study.

The result of these studies indicate that many anthropogenic sources of chemical contaminants are enter drinking water sources during sewage treatment. Notably, conventional plants are only designed to eliminate contaminants that can be oxidized or other inorganic contaminants such as phosphorus, not trihalomethanes. Many of these contaminants are discussed further in the emerging chemicals chapter.

TABLE 2.4. List of Chemicals Adapted from the United States Environmental Protection Agency Drinking Water Treatment Database [55] and the Effectiveness of Conventional Water Treatment At Removing Them from Drinking Water Based On Literature Review Up To 2009

	Chemical Abstracts	Removal by Conventional	
Chemical	Service number (CAS)	Treatment	Description
1,4-dioxane	123-91-1	Ineffective	diethylene dioxide, diethylene ether, dioxane, glycol ethylene ether, p-dioxane
17a-ethynyl estradiol	57-63-6	Ineffective	EE2
4-Nonylphenol	104-40-5	Ineffective	4-Nonylphenol, 4-n-Nonylphenol, NP, Nonylphenol, p-Nonylphenol, para-Nonylphenol
Acetochlor	34256-82-1	Ineffective	Acenit, Harness, Surpass, Top Hand, Trophy
Acetochlor Degradates		Ineffective	acetochlor ethanesulfonic acid (ESA), acetochlor oxanilic acid (OXA), acetochlor sulfinylacetic acid
Alachlor	15972-60-8	Not very effective	Alanex, Alochlor, Lasso, Lazo, Metachlor, Pillarzo
Alachlor Degradates		Ineffective	alachlor oxanilic acid (OA), alachlor ethanesulfonic acid (ESA)
Aldicarb	116-06-3	No data	Ambush, OMS 771, Temic, Temik, UC 21149, Unioin Carbide 21149
Arsenic	7440-38-2	Very effective	Arsenate, Arsenite, As(3), As(5)
Carbofuran	1563-66-2	No data	Curaterr, Furadan, Yaltox
Chlortetracycline	57-62-5	Not very effective	7-chlorotetracycline, Aureomycin, CLTC, CTC, Chlorotetracyline, Chlortetracyclin
Chromium	7440-47-3	Very effective	Chromium (III), Chromium (VI), Cr (III), Cr (VI), Hexavalent Chromium, Trivalent Chromium
Diuron	330-54-1	Not very effective	Crisuron, Diater, Direx, Karmex, N-(3,4-dichlorophenyl)-N,N-dimethyl urea, Unidron
Fluoride	7664-39-3	Moderately effective	fluorhydric acid, fluoric acid, hydrofluoric acid, hydrofluoride
Glyphosate	1071-83-6	Ineffective	Pondmaster, Rodeo, Rondo, Roundup
Ibuprofen	15687-27-1	Ineffective	Advil, Brufen, Hydratropic acid, Ibufen, Motrin
Mercury	7439-97-6	Very effective	Hg(0), Hg(2), hydrargyrum, quicksilver
Metolachlor	51218-45-2	Ineffective	Bicep, Codal, Dual, Milocep
Metolachlor Degradates		Ineffective	Metolachlor ESA, Metolachlor OA, Metolachlor ethane sulfonic acid, Metolachlor oxanilic acid
Microcystins		Little to moderately effective	Microcystin-LR
Natural Organic Matter		Effective	AOC, BDOC, DOC, DOM, NOM, SUVA, TOC, assimilable organic carbon, biodegradable dissolved organic carbon, dissolved organic carbon, dissolved organic matter, fulvic acid, humic acid, specific ultraviolet absorbance, total organic carbon

table continues next page

TABLE 2.4. continued

Chemical Abstracts Removal by Conventional Chemical Service number (CAS) Treatment Description Perfluorooctane Sulfonate 1763-23-1 (PFOS acid) Ineffective 1-Octanesulfonic acid, 1,1,2,2,3,3,4,4,5,5,6,6,7,7,8,8,8-heptadecafluoro, 1-Octanesulfonic acid, heptadecafluoro-, 1-Perfluorooctanesulfonic acid, Hepatadecafluoro-1-octanesulfonic acid, Perfluoro-n-octanesulfonic acid, Perfluorooctane Sulfonate, Perfluorooctane Sulphonate, Perfluorooctanesulfonic acid, Perfluorooctyl Sulfonate, Perfluorooctylsulfonic acid 335-67-1 Ineffective Perfluorooctanoic Acid C8, PFOA, perfluorooctanoate Simazine and Simazine 122-34-9 Ineffective Aquazine, Framed, Gesatop, Premazine, Primatol, Princep, Simadex Degradates Trichloroethylene 79-01-6 Moderately effective TCE, Trichloroethene

Note: Although removal categories in the removal by conventional treatment column are not explicitly defined in the US EPA database, a review of the descriptions roughly correspond to the following removal percentages: ineffective (0%-35% removal), not very effective (35%-50% removal), moderately effective (40%-70% removal), effective (70%-98% removal), very effective (99%-100% removal).

Conclusions

Chemical contaminants originating from water treatment processes are of particular concern because of how directly that can impact human populations relying on piped water sources. DBP contaminants from wastewater treatment threaten sources of drinking water after being released into surface waters. Controlling DBP exposure and release into the environment requires monitoring at treatment, storage and distribution stages.

While very effective and removing biological contaminants, with the exception of microcystin, there is increasing concern that conventional water treatment does not remove many types of chemical contaminants. The EPA has reviewed literature on lab and field tests of contaminant removal efficiencies during different drinking water treatment facilities [55]. While conventional treatment is effective at removing fecal coliforms and some heavy metals, there are many industrial contaminants and pesticides that were not removed from conventional water treatment (Table 2.4).

References

- [1] American Chemistry Council. Drinking Water Chlorination: A Review of U.S. Disinfection Practices and Issues. 2016.
- [2] IPCS. Environmental Health Criteria 216: Disinfectants and Disinfectant By-products. Geneva: World Health Organization: 2000.
- [3] Knowles AD, Nguyen CK, Edwards MA, Stoddart A, McIlwain B, Gagnon GA. Role of iron and aluminum coagulant metal residuals and lead release from drinking water pipe materials. J Environ Sci Health Part A 2015;50:414-23. doi:10.1080/10934529.2015.987550.
- [4] WHO. Acrylamide in Drinking-water: Background document for development of WHO Guidelines for Drinking-water Quality. 2011.
- [5] Wang A-Q, Lin Y-L, Xu B, Hu C-Y, Zhang M-S, Xia S-J, et al. Degradation of acrylamide during chlorination as a precursor of haloacetonitriles and haloacetamides. Sci Total Environ 2018;615:38-46. doi:10.1016/j.scitotenv.2017.09.141.
- [6] Lapointe M, Barbeau B. Dual starch-polyacrylamide polymer system for improved flocculation. Water Res 2017;124:202-9. doi:10.1016/j .watres.2017.07.044.
- [7] Willhite CC, Ball GL, McLellan CJ. Total allowable concentrations of monomeric inorganic aluminum and hydrated aluminum silicates in drinking water. Crit Rev Toxicol 2012;42:358-442. doi:10.3109/10408444.2012.674101.
- [8] Wang Z, Wei X, Yang J, Suo J, Chen J, Liu X, et al. Chronic exposure to aluminum and risk of Alzheimer's disease: A meta-analysis. Neurosci Lett 2016;610:200-6. doi:10.1016/j.neulet.2015.11.014.
- [9] Martyn CN, Osmond C, Edwardson JA, Barker DJP, Harris EC, Lacey RF. Geographical Relation Between Alzheimer's Disease and Aluminum in Drinking Water. The Lancet 1989;333:61-2. doi:10.1016/S0140-6736(89)91425-6.
- [10] WHO. Aluminum in Drinking-water: Background document for development of WHO Guidelines for Drinking-water Quality. 2010.
- [11] Health Canada. Guidelines for Canadian Drinking Water Quality: Guideline Technical Document Aluminum. 1998.
- [12] US EPA O. National Primary Drinking Water Regulations. US EPA 2009. https://www.epa.gov/ground-water-and-drinking-water/national -primary-drinking-water-regulations (accessed November 22, 2017).
- [13] Niquette P, Monette F, Azzouz A, Hausler R. Impacts of substituting aluminum-based coagulants in drinking water treatment. Water Qual Res J Can 2004;39:303-10.
- [14] Health Canada. Guidelines for Canadian Drinking Water Quality: Guideline Technical Document Iron. 1987.
- [15] Rice JM. The carcinogenicity of acrylamide. Mutat Res Toxicol Environ Mutagen 2005;580:3-20. doi:10.1016/j.mrgentox.2004.09.008.
- [16] Exon JH. A review of the toxicology of acrylamide. J Toxicol Environ Health B Crit Rev 2006;9:397-412. doi:10.1080/10937400600681430.
- [17] NTP. Report on Carcinogens, Fourteenth Edition. Research Triangle Park, NC: U.S. Department of Health and Human Services, Public Health Service: 2016.

- [18] WHO. Guidelines for drinking-water quality: fourth edition incorporating the first addendum. Geneva: World Health Organization: 2017.
- [19] US EPA O. Drinking Water Requirements for States and Public Water Systems. US EPA 2015. https://www.epa.gov/dwreginfo (accessed February 12, 2018).
- [20] Health Canada. Guidelines for Canadian Drinking Water Quality Summary Table. Ottawa, Ontario: Water and Air Quality Bureau, Healthy Environments and Consumer Safety Branch, Health Canada; 2017.
- [21] WHO. Chlorine in Drinking-water: Background document for development of WHO Guidelines for Drinking-water Quality. 2003.
- [22] WHO. Sodium Dichloroisocyanurate in Drinking-water: Background document for development of WHO Guidelines for Drinking-water Quality. 2008.
- [23] Sedlak DL, Gunten U von. The Chlorine Dilemma. Science 2011;331:42-3. doi:10.1126/science.1196397.
- [24] Richardson SD, Thruston AD, Caughran TV, Chen PH, Collette TW, Schenck KM, et al. Identification of New Drinking Water Disinfection by-Products from Ozone, Chlorine Dioxide, Chloramine, and Chlorine. Water Air Soil Pollut 2000;123:95-102. doi:10.1023/A:1005265509813.
- [25] Volk CJ, Hofmann R, Chauret C, Gagnon GA, Ranger G, Andrews RC. Implementation of chlorine dioxide disinfection: Effects of the treatment change on drinking water quality in a full-scale distribution system. J Environ Eng Sci 2002;1:323-30.
- [26] Gordon G, Slootmaekers B, Tachiyashiki S, Wood DW. Minimizing Chlorite Ion and Chlorate Ion in Water Treated With Chlorine Dioxide. J Am Water Works Assoc 1990;82:160-5.
- [27] Aieta EM, Berg JD. A Review of Chlorine Dioxide in Drinking Water Treatment. J Am Water Works Assoc 1986;78:62-72.
- [28] WHO. Chlorine Dioxide, Chlorite and Chlorate in Drinking-water: Background document for development of WHO Guidelines for Drinking-water Quality. 2016.
- [29] EPA. Toxicologal review of chlorine dioxide and chlorite. 2000.
- [30] Clasen T, Edmondson P. Sodium dichloroisocyanurate (NaDCC) tablets as an alternative to sodium hypochlorite for the routine treatment of drinking water at the household level. Int J Hyg Environ Health 2006;209:173-81. doi:10.1016/j.ijheh.2005.11.004.
- [31] WHO. Monochloramine in Drinking-water: Background document for development of WHO Guidelines for Drinking-water Quality. 2004.
- [32] Bougeard CMM, Goslan EH, Jefferson B, Parsons SA. Comparison of the disinfection by-product formation potential of treated waters exposed to chlorine and monochloramine. Water Res 2010;44:729-40. doi:10.1016/j.watres.2009.10.008.
- [33] How ZT, Linge KL, Busetti F, Joll CA. Organic chloramines in drinking water: An assessment of formation, stability, reactivity and risk. Water Res 2016;93:65-73. doi:10.1016/j.watres.2016.02.006.
- [34] Richardson SD, Plewa MJ, Wagner ED, Schoeny R, DeMarini DM. Occurrence, genotoxicity, and carcinogenicity of regulated and emerging disinfection by-products in drinking water: A review and roadmap for research. Mutat Res Mutat Res 2007;636:178-242. doi:10.1016/j .mrrev.2007.09.001.
- [35] Wilczak A, Jacangelo JG, Marcinko JP, Odell LH, Kirmeyer GJ, Wolfe RL. Occurrence of nitrification in chloraminated distribution systems. J Am Water Works Assoc 1996;88:74-85.
- [36] WHO. Toxicological and Health Aspects of Melamine and Cyanuric Acid: Report of a WHO Expert Meeting In collaboration with FAO Supported by Health Canada. Ottawa, Canada: Health Canada; 2009.
- [37] WHO. Bromate in Drinking-water: Background document for development of WHO Guidelines for Drinking-water Quality. 2005.
- [38] Mastrocicco M, Di Giuseppe D, Vincenzi F, Colombani N, Castaldelli G. Chlorate origin and fate in shallow groundwater below agricultural landscapes. Environ Pollut 2017;231:1453-62. doi:10.1016/j.envpol.2017.09.007.
- [39] Adams C, Timmons T, Seitz T, Lane J, Levotch S. Trihalomethane and Haloacetic Acid Disinfection By-Products in Full-Scale Drinking Water Systems. J Environ Eng 2005;131:526-34. doi:10.1061/(ASCE)0733-9372(2005)131:4(526).
- [40] Chary NS, Fernandez-Alba AR. Determination of volatile organic compounds in drinking and environmental waters. TrAC Trends Anal Chem 2012;32:60-75. doi:10.1016/j.trac.2011.08.011.
- [41] Zogorski JS, Carter JM, Ivahnenko T, Lapham WW, Moran MJ, Rowe BL, et al. The Quality of Our Nation's Waters: Volatile Organic Compounds in the Nation's Ground Water and Drinking-Water Supply Wells. U.S. Geological Survey, Reston, VA: U.S. Department of the Interior and U.S. Geological Survey; 2006.

- [42] Richardson SD. Water Analysis: Emerging Contaminants and Current Issues. Anal Chem 2009;81:4645-77. doi:10.1021/ac9008012.
- [43] Hrudey SE, Backer LC, Humpage AR, Krasner SW, Michaud DS, Moore LE, et al. Evaluating Evidence for Association of Human Bladder Cancer with Drinking-Water Chlorination Disinfection By-Products. J Toxicol Environ Health B Crit Rev 2015;18:213-41. doi:10.1080/1093 7404.2015.1067661.
- [44] WHO. Trihalomethanes in Drinking-water in Drinking-water: Background document for development of WHO Guidelines for Drinkingwater Quality. 2005.
- [45] Bond T, Huang J, Templeton MR, Graham N. Occurrence and control of nitrogenous disinfection by-products in drinking water A review. Water Res 2011;45:4341-54. doi:10.1016/j.watres.2011.05.034.
- [46] Makris KC, Andra SS, Botsaris G. Pipe Scales and Biofilms in Drinking-Water Distribution Systems: Undermining Finished Water Quality. Crit Rev Environ Sci Technol 2014;44:1477-523. doi:10.1080/10643389.2013.790746.
- [47] WHO. Lead in Drinking-water in Drinking-water: Background document for development of WHO Guidelines for Drinking-water Quality. 2011.
- [48] WHO. Cadmium in Drinking-water: Background document for development of WHO Guidelines for Drinking-water Quality. 2011.
- [49] WHO. Nickel in Drinking-water in Drinking-water: Background document for development of WHO Guidelines for Drinking-water Quality. 2003.
- [50] WHO. Vinyl Chloride in Drinking-water: Background document for development of WHO Guidelines for Drinking-water Quality. 2004.
- [51] Schock MR, Hyland RN, Welch MM. Occurrence of Contaminant Accumulation in Lead Pipe Scales from Domestic Drinking-Water Distribution Systems. Environ Sci Technol 2008;42:4285-91. doi:10.1021/es702488v.
- [52] Lytle DA, Sorg TJ, Frietch C. Accumulation of Arsenic in Drinking Water Distribution Systems. Environ Sci Technol 2004;38:5365-72. doi:10.1021/es049850v.
- [53] WHO. Polynuclear aromatic hydrocarbons in Drinking-water: Background document for development of WHO Guidelines for Drinkingwater Quality. 2003.
- [54] Stackelberg PE, Furlong ET, Meyer MT, Zaugg SD, Henderson AK, Reissman DB. Persistence of pharmaceutical compounds and other organic wastewater contaminants in a conventional drinking-water-treatment plant. Sci Total Environ 2004;329:99-113. doi:10.1016/j .scitotenv.2004.03.015.
- [55] US EPA. Water Treatability Database n.d. https://iaspub.epa.gov/tdb/pages/general/home.do (accessed April 23, 2018).

Chapter 3 Agricultural Chemicals

Introduction

Chemical contaminants from agricultural activities enter surface water as runoff from pesticide and fertilizer applications to fields and crops, but also during improper storage or accidental spills during handling. Most contaminants in this category enter drinking water sources thorough non-point sources, or pollutants that are diffuse across the landscape. As precipitation accumulates as runoff, contaminants in runoff flow into surface and ground water. With the exception of spills or leaks, fertilizers and pesticides used in agriculture are considered nonpoint source pollutants. Most of the chemical contaminants in this group are used in agricultural production but are also commonly for landscaping industrial and residential properties and aquatic weed control in clearing waterways.

Definitions: Pre-emergence herbicides prevent the germination or establishment of weeds and are applied before weed seeds germinate.

Fertilizers

Inorganic fertilizers are widely used and essential to agricultural productivity worldwide. Overenrichment of soils with inorganic fertilizers has led to large amounts of nitrogen and phosphorus entering surface and ground waters and aquatic ecosystems across the world [1]. Though essential building blocks for plants and ecosystem nutrient cycles, excessive nitrogen and phosphorus are leading pollutants of drinking water. Nitrates and nitrites can be toxic and, along with phosphorus, can degrade water quality through eutrophication of water bodies [2,3].

Nitrogen and phosphorus are two limiting factors to plant growth. When these nutrients are released into aquatic ecosystems in excess, populations of photosynthetic primary producers including phytoplankton, cyanobacteria, algae and macrophyte plants grow rapidly [4]. The most common symptom of eutrophication in a water body occurs when excessive growth of primary producers significantly reduces oxygen necessary for supporting biota in aquatic ecosystems. If high populations of primary producers includes cyanobacteria, the result can be production of toxins such as microcystins.

Nitrogen lons

As a result of abundant use in modern, conventional agriculture, nitrate (NO_3 -) and nitrite (NO_2 -) ions are frequently found in ground and surface waters, especially in proximity to large or high concentrations of agricultural operations. In a 28 year study of nitrogen fertilizer fate in plant update and soil retention, 61 to 65% was taken up by plants, 12 to 15% remained in soil organic matter and 8 to 12% entered the hydrosphere [5]. Release from the soil to hydrosphere is predicted to continue for up to 50 years. Appropriate applications to growing biomass and managing soils for organic matter content are key to reducing excess nitrogen. Preventing nitrate and nitrite exposure in drinking water is best managed by reducing concentrations in source waters due to difficulties in later removing them from drinking water [6].

In addition to fertilizer sources, nitrate, nitrite and other access nutrients can also enter drinking water supplies through other nonpoint and point sources of untreated animal and human waste. Nitrates have been widely detected in numerous studies of domestic wells at concentrations exceeding recommended drinking water guidelines [7,8] and are often associated with mixtures of other volatile organic compounds and pesticides [9,10].

Nitrates and nitrites ingested through drinking water can induce methemoglobinemia in adults and is particularly dangerous for bottle-fed infants between the ages of 3-6 [11]. Methemoglobin forms when nitrite oxidizes ferrous iron of hemoglobin and prevents oxygen transport [12]. Some nitrate is converted into nitrite through endogenous bacteria in the saliva and intestinal tract. When methemoglobin levels reach 10% of circulating hemoglobin, the skin starts to show bluish or brownish gray coloring, called blue baby syndrome in infants. At above 60%, there is a high risk of morality [12]. Treating water oxidizes nitrite to nitrate, the less toxic form, and reduce gastroenteritis which is a risk factor for methemoglobinaemia in infants.

Subchronic exposures to nitrate and nitrite have been linked to problems with thyroid function and thyroid hormone concentration through nitrate inhibition of iodine uptake. Chronic exposures to nitrate and nitrite have been linked to cancer, but evidence is inadequate to conclude a causal mechanism. Nitrite can form N-DBPs, such as N-Nitrosodimethylamine, some of which have been shown to be carcinogenic to humans [13]. As a result of the potentially health impacts from nitrite and nitrate exposure, guidelines and regulations have been set by the WHO and regulatory bodies reviewed in this chapter (Table 3.1).

Cyanobacterial Toxins

Eutrophication in a water body occurs when excessive growth of phytoplankton reaches levels that significantly reduces total dissolved oxygen necessary for supporting biota in aquatic ecosystems. In lakes and reservoirs cyanobacterial (blue-green algae) blooms are caused by *Microcystis* and *Anabaena* spp. in temperate areas and *Cylindrospermopsis* spp originating in tropical areas [14,15]. Polluted agricultural runoff, seasonal patterns of rainfall, and regional distribution of cyanobacterial species contribute to the types of blooms and whether or not these blooms will produce toxins [2,16,17].

Cyanotoxins produced by cyanobacteria include cyclic peptides, alkaloids, and lipopolysaccharides [18]. Of these, only microcystin-LR has a suggested WHO guideline [15]. Microcystins are acute hepatotoxins that impact the liver by inhibiting phosphatases and may be carcinogenic with chronic exposure at low doses [17]. Mycrocystin-LR is the most common isoform and only WHO has based guidelines for Microcystin-LR based on available health information (Table 3.1).

Pesticides

Widespread use of chemical pesticides began in the 1940s and 50s. In 2012, worldwide consumption of pesticides was estimated at 2.6 million metric tons, which is likely an underestimate because of little market data on small acreage crops [22]. Herbicides make up nearly 50% of pesticides used, followed by

		WHO guideline	US EPA Maximum Contaminant	Health Canada Maximum Acceptable Concentrations	EU Parameter	
Chemical	CAS ID	value (mg/L)	Level (mg/L)	(mg/L)	(mg/L)	Health impacts
Fertilizers						
Nitrate	14797-55-8	50 (as NO3–)	10 as nitrate- nitrogen	45 as nitrate; 10 as nitrate-nitrogen	50 (as NO3–)	Infants below the age of six months who drink water containing nitrate in excess of the MCL could become seriously ill and, if untreated, may die. Symptoms include shortness of breath and blue-baby syndrome; Effects on thyroid gland function in bottle-fed infants; Classified as possible carcinogen under conditions that result in endogenous nitrosation
Nitrite	14797-65-0	3 (as NO2–)	1 as nitrite- nitrogen	3 as nitrite; 1 as nitrite-nitrogen	0.5 (as NO2–)	Infants below the age of six months who drink water containing nitrite in excess of the MCL could become seriously ill and, if untreated, may die. Symptoms include shortness of breath and blue-baby syndrome; Classified as possible carcinogen under conditions that result in endogenous nitrosation
Cyanobacterial t	oxin					
Microcystin-LR	101043-37-2	0.001 (P)	-	-	-	Liver toxicity

TABLE 3.1. Regulatory Guidelines and Health Impacts of Fertilizers

Note: Health effects summaries are adapted from WHO, US EPA and Health Canada Guidelines [6,20,21].

WHO Guideline key: A, provisional guideline value because calculated guideline value is below the achievable quantification level; P, provisional guideline value because of uncertainties in the health database; T, provisional guideline value because calculated guideline value is below the level that can be achieved through practical treatment methods, source protection, etc.

insecticides, fumigants and fungicides. Pesticides are one of the most common chemicals from human activity detected in surface waters. A recent joint study that sampled 38 streams (32 by impacted by urban/agriculture developed and 4 undeveloped sites) from across the United States found that 8 of the top 10 chemicals detected were pesticides [23].

Globally, overall pesticide use is increasing along with population and global crop production [24]. The proportion of insecticides used is expected to decline, while herbicide use is expected to continue increasing [24,25]. Some of the decline in the proportion of insecticides used is due to genetic engineering of crops such as corn genetically modified with *Bacillus thuringiensis* (Bt) genes and pesticide resistance. Herbicide usage has increased dramatically since 2005 due largely to genetic engineering of crops to be resistant to herbicides, particularly glyphosate. Overall, estimates of the human and ecological impacts of increased overall use of pesticides on human health lag far behind the amounts and types of pesticides being introduced to food and water supplies and the environment [26].

Throughout the chapter, we refer to the WHO recommended pesticide hazard classifications as a quick reference for toxicity [27]. WHO classifications are based on estimated acute toxicity of humans handling each pesticide derived from a series of criteria around acute oral and dermal toxicity in rats. WHO Classes are Extremely (Ia), Highly (Ib), Moderately (II), and Slightly (III) hazardous, with two additional categories of Unlikely to present acute hazard (U) and Obsolete chemicals unlikely to be in use, currently (O). While acute toxicity during handling is different than exposure through drinking water, these categories provide a useful guide to the underlying toxicity of pesticide contaminants.

European Union pesticide guidelines are universal for all pesticides in drinking water. The maximum for any individual pesticide is 0.1 mg/L. Total pesticides detected in drinking water should not exceed 0.5 mg/L [19].

Herbicides and Fungicides

Chloroacetanilide herbicides

Two common chloroacetanilide herbicides that are subject to regulation or guidelines are alachlor and metolachlor. These are pre-emergence herbicides applied to a variety of agricultural crops to prevent germination of many grasses and some broadleaf weeds [28]. There is increasing concern about environmental degradates of chloroacetanililde herbicides being detected in surface waters [29]. Metolachlor is one of the top 10 organic anthropogenic chemicals detected in streams across the United States [23] and was found to be one of the most common elements in combination with Atrazine in a nationwide study of pesticides in wells across the US [30]. Alachlor was also consistently detected in mixtures with other compounds included in the study. In a study of 12 water treatment plants in the Midwestern US, alachlor and metolachlor were detected in upstream river intakes and in finished drinking water samples, though alachlor concentrations were below US EPA MCL guidelines and metolachlor is not regulated by the US EPA [31].

Existing regulations and guidelines (Table 3.2) have been established for alachlor based on toxicity to the liver, kidney, spleen and eyes in animal models [32] and is carcinogenic in rats [6]. Metolachlor has been shown to cause liver lesions and cause tumors in nasal cavities of rats [33].

Chlorotriazine herbicides

As with chloroacetanilide herbicides, there are concerns over chlorotriazine herbicides and also for degradates formed in the environment and detected in surface waters [29].

Atrazine, simazine and propazine are often collectively referred to as triazines.

Atrazine was the 2nd most widely used pesticide, behind glyphosate in a study of 21 crops in 2008 [25]. A study of chloroacetanilide herbicides in 12 water treatment plants in the Midwestern US found atrazine near or above US EPA MCL levels seasonally [31]. This indicates that conventional water treatment is not completely effective at removing atrazine and other pesticides in drinking water in the US.

Regulations and guidelines have been set for atrazine and simazine by all agencies and the WHO (Table 3.2). Atrazine has been shown to decrease body weights of offspring and impact the reproductive system of adults in animal models [34]. Simazine increased tumors in rats but not in mice, and is considered not classifiable as carcinogenic in humans by IARC [35].

Phenoxy herbicides

The selective control of broadleaf plants in monotcotyledon grass crops such as wheat or corn has enormous value for conventional agricultural systems. This appeal has led to the widespread use of phenoxy herbicide compounds in food production, forestry, pasture and turf grass management, and aquatic weed control worldwide. [36]. Phenoxy herbicides have been in use for about 60 years and were often contaminated with dioxins in early years of their use [37]. The most infamous member of this group was Agent Orange, a chemical mixture of 2,4-Dichlorophenoxyacetic acid (2,4-D) and 2,4,5-Trichlorophenoxyacetic acid (2,4,5-T), which was used by the United States military as a defoliant during the Vietnam war. Phenoxy herbicides are increasingly used in lawn care in North America [38].

Phenoxy herbicides are weak acids that are slightly water soluble and often converted to more soluble amines before mixing with other agents for easier application [36]. They can persist in soils with half-lives ranging from days to up to months [37] and are not though to regularly contaminate ground water [39]. Phenoxy herbicides are also detected and persist in surface waters for days up to months [37,40,41] and can persist in drinking waters after treatment at lower levels, though permissible levels in the Canadian Great Plains [42]. The compounds 2,4-D and MCPA are of the most widely known phenoxy herbicides worldwide along with 2,4,5-T, which has been banned in many countries and in international trade [27]. 2,4-D is used to control aquatic plants as well and persists much longer with a half-life of 186 days in aquatic sediments [43].

Toxicity of phenoxy herbicides caused a range effects on body weight, and kidney, liver, blood and adrenal functions in animal studies and a smaller number of human epidemiological studies (Table 3.2) Many phenoxy herbicides had been considered to be potentially carcinogenic to humans based mainly on associations between occupational exposures and cancer rates. However, reviews of studies linking phenoxy herbicides have revealed inconsistent evidence of a causal relationship between phenoxy herbicides and cancer [44,45], some specific to 2,4-D [46] and MCPA [47].

Critical limitations to some of this research is the difficulty of controlling for combined usage of other pesticides and contamination with dioxins.

Organophosphorus herbicides

Glyphosate is the only regulated herbicide in this group, but is one of the most popular and most produced (by volume) and used herbicides in the world [48]. Several major crops have been genetically engineered with glyphosate resistance. This has led to increased applications and has contributed to increased glyphosate resistance in weeds [49]. In addition to extensive agricultural use, glyphosate is also used in lawn maintenance and landscaping in residential and commercial properties [38]. Glyphosate is bound tightly in the soil and not considered a threat to entering groundwater, with some limited leaching in sandy soils, and is only likely to contaminant surface waters when used next to water bodies [50].

Glyphosate was not considered by WHO to occur in large enough quantities to cause health risks in drinking water [51]. Health Canada and the US EPA both set guidelines for drinking water based on negative impacts on kidney function, reproductive systems and body weight changes in animal models [52].

Phenylurea herbicides

The Phenylurea herbicides typically interrupt photosynthesis by inhibition of photosystem II. Diuron is the most commonly used pesticides in this group and is one of the most widely used pesticides in the United States. Health Canada has recommended the maximum acceptable concentration of diuron based on evidence of weight loss, increased liver weight and blood effects [53]. Chemically, phenylurea is a urea molecule that has hydrogens substituted for methyl groups and a 3,4-dichlorophenyl group. Diuron has been linked to potential formation of *N*-nitrosodimethylamine (NDMA, a disinfection by-product) during water treatment disinfection, reacting with chloramine and chlorine [54].

Chlorotoluron is a pre- or early post-emergence herbicide and Isoproturon is a selective herbicide used to control grasses and broad-leafed weeds in grain crops. Chlorotoluron biodegrades slowly more slowly than isoproturon, which persists for days up to weeks and both are highly mobile in soils [6]. Both have been detected in drinking water and Isoproturon has been detected in both surface and ground water [6]. The WHO guideline for chlorotoluron is set based on evidence of its carcinogenic potential [55]. The WHO guideline for isoproturon is set based on evidence of toxic effects on the liver and as a tumor promotor [56].

Quaternary ammonium herbicides

Diquat and Paraquat are the two main regulated herbicides in this group and both cause acute and chronic toxicity in humans. Paraquat is considered one of the most toxic widely used pesticides. Diquat is less toxic than paraquat. Both are thought to degrade rapidly in the environment, despite high toxicity, resulting in WHO deciding not to set a recommended guideline because they are unlikely to occur at levels presenting significant health risk in drinking water or drinking water sources [6,57].

Paraquat is one of the most acutely toxic of chemicals used as herbicides and is of interest because of evidence supporting neurological toxicity. Paraquat has high cytotoxicity, causing cell damage the lungs and kidneys, where it accumulates upon exposure and other organs. Paraquat is one of the few herbicides suspected as a neurotoxin. It is hypothesized to cause Parkinson's disease or similar symptoms because its chemical structure is similar to a toxic metabolite of MPTP (1-methyl-4-phenyl-1,2,3,6-tetrahydropyridine), which has been shown to cause neurological damage producing symptoms similar to those of Parkinson's disease [58].

Paraquat usage has been banned in many countries and several companies have voluntarily discontinued its used over concerns of health and environmental risks, particularly for associations with Parkinson's Disease [59]. Based on historic usage and high acute toxicity, Health Canada has set regulatory guidelines (Table 3.2), though the report states that it is unlikely to end up in finished drinking water when applied in terrestrial contexts, it is likely to persist when used in aquatic applications [60]. The US EPA and Health Canada have both set regulatory guidelines for diquat due to development of cataracts.

Thiocarbamate herbicides

Herbicides known as thiocarbamates are primarily used as pre-emergence weed control, preventing the establishment of germinated weeds and similar to chloroacetanilide herbicides [28]. Molinate is used to control weeds in rice crops. Limited environmental data suggests that groundwater contamination from molinate may be concentrated in rice growing regions, though does not persist long in water or soil with a half-life of 5 days [6]. WHO has set the guideline for molinate based on toxicity to the male reproductive system (Table 3.2).

Algicides

Endothall has both terrestrial and aquatic applications and is listed as in Toxicity Category I (highly toxic and severely irritation) for oral and ocular routes [61]. However, the EPA did not consider it a threat to drinking water under normal application rates. Though highly mobile in soil, endothall is not thought to be a threat to groundwater because of rapid degradation [61,62]. A study of pesticides in wells in Michigan, USA did not find Endothall in 200 samples collected across 34 counties [43].

Insecticides, Acaricides and Nematicides

Carbamate insecticides

Carbamate insecticides are widely used insecticides that have similar modes of toxicity to organophosphorus insecticides but are generally less severe. Carbamate insectides are toxic to the nervous systems of humans and other mammals by inactivating acetylcholinesterase, an enzyme that helps form neurotransmitters [63]. Aldicarb and Carbaryl are two of the top insecticides used in the United States [25] and are popular globally.

Aldicarb has an established WHO guideline due to its high acute neurotoxicity (WHO hazard class 1a) and high toxicity in mammals that are likely to occur in humans [64,65]. It is likely that US EPA and Health Canada have not established guidelines for drinking water due to findings that indicate it is unlikely to be present drinking water at levels high enough to cause health concern [66]. Carbaryl has established guidelines by Health Canada due to reduced kidney function that is reversible and FAO/ WHO daily food intake guidelines [67]. Carbofuran has guidelines set by all agencies and the WHO [6] because of evidence of cholinesterase inhibition and high toxicity hazard (WHO hazard class 1b, Table 3.3).

TABLE 3.2. Regulatory Guidelines and Health Impacts of Insecticides, Acaricids and Nematicides Grouped by Pesticide Classification Group

			WHO	US EPA Maximum	Health Canada	
		WHO hazard	guideline	Contaminant	Maximum Acceptable	
Chemical C	AS ID	classification	value (mg/L)	Level (mg/L)	Concentrations (mg/L)	Health impacts
Algicides						
Endothall 14	45-73-3	П	-	0.1	-	Stomach and intestinal problems
Aromatic acid herbicides						
Dicamba 19	918-00-9	II	-	-	0.12	Liver effects
Picloram 19	918-02-1	U	-	0.5	0.19	Changes in body and liver weights and clinical chemistry parameters; Kidney effects (liver to body weight ratios and histopathology)
Chloroacetanilide herbicid						enects (liver to body weight ratios and histopathology)
	5972-60-8		0.022	0.002		Even liver kidney or coloop problems, apamia, increased risk of captor
			0.02a	0.002	-	Eye, liver, kidney or spleen problems; anemia; increased risk of cancer
	1218-45-2	111	0.01	-	0.05	Liver lesions and nasal cavity tumours
Chlorotriazine herbicides						
Atrazine 19	912-24-9	111	0.1	0.003	0.005	Developmental effects (reduced body weight of offspring); Potential increased risk of ovarian cancer or lymphomas (classified as possible carcinogen); Cardiovascular system or reproductive problems
Cyanazine 21	1725-46-2	II	0.1	-	-	Hyperactivity and developmental malformations
Hydroxyatrazine 21	163-68-0	-	0.1	-	-	Kidney toxicity
Simazine 12	22-34-9	U	0.002	0.004	0.01	Body weight changes and effects on serum and thyroid gland; Problems with blood
Terbuthylazine 59	915-41-3	111	0.007	-	-	Non-neoplastic lesions in the liver, lung, thyroid and testis and a slight decrease in body weight gain during toxicity study
Dinitroaniline herbicides						
Pendimethalin 4	0487-42-1	II	0.02	-	-	Liver toxicity
Dinitrophenol herbicides						
Dinoseb 8	8-85-7	0	-	0.007	-	Reproductive difficulties
Halogenated aliphatic her	bicides					
Dalapon 75	5-99-0	U	-	0.2	-	Minor kidney changes
Nitrile herbicides						
Bromoxynil 16	689-84-5	II	-	-	0.005	Reduced liver to body weight ratios
Organophosphorus herbic	ides					
Glyphosate 10	071-83-6		_	0.7	0.28	Reduced body weight gain; Kidney problems; reproductive difficulties

28

table continues next page

TABLE 3.2. continued

Chemical	CAS ID	WHO hazard classification	WHO guideline value (mg/L)	US EPA Maximum Contaminant Level (mg/L)	Health Canada Maximum Acceptable Concentrations (mg/L)	Health impacts
Phenoxy herbicides						
2,4-D	94-75-7	II	0.03	0.07	0.01	Kidney effects (tubular cell pigmentation); Liver or adrenal gland problems
2,4-DB	94-82-6	II	0.09	-	-	Effects on body and organ weights, blood chemistry and haematological parameters
2,4,5-T	93-76-5	0	0.009	-	-	Reduced body weight gain, increased liver and kidney weights and renal toxicity; Suggested association with soft tissue sarcoma and non-Hodgkin lymphoma in epidemiological studies
Dichlorprop	120-36-5	II	0.1	-	-	Renal toxicity
Diclofop-methyl	51338-27-3	II	-	-		Liver effects (enlargement and enzyme changes)
Fenoprop	93-72-1	0	0.009	0.05	-	Liver problems
МСРА	94-74-6	II	-	-	0.009	Kidney effects (increased absolute and relative weights, urinary bilirubin, crystals and pH); Systemic, liver, testicular, reproductive/developmental and nervous system effects
Mecoprop	93-65-2	II	0.01	-	-	Effects on kidney weight
Phenylurea herbicides						
Chlorotoluron	15545-48-9	U	0.03	-	-	Carcinogenic potential
Diuron	330-54-1	III	-	-	0.15	Weight loss, increased liver weight and blood effects
Isoproturon	34123-59-6	II	0.009	-	-	Liver toxicity and tumour promoter
Quaternary ammoniun	1 herbicides					
Diquat	2764-72-9	II	-	0.02	0.07	Cataract formation
Paraquat	4685-14-7	II	-	-	0.01 as paraquat dichloride; 0.007 as paraquat ion	Various effects on body weight, spleen, testes, liver, lungs, kidney, thyroid, heart and adrenal gland
Thiocarbamate herbici	des					
Molinate	2212-67-1	11	0.006	-	-	Male reproductive toxicity
Triazinone herbicides						
Metribuzin	21087-64-9	II	-	-	0.08	Liver effects (increased incidence and severity of mucopolysaccharide droplets
Aromatic fungicides						
Hexachlorobenzene	118-74-1	la	-	0.001	-	Liver or kidney problems; reproductive difficulties; increased risk of cancer
Unclassified fungicides	5					
Hexachlorobutadiene	87-68-3	-	0.0006	-	-	Kidney toxicity; limited evidence for carcinogenicity and genotoxicity

Note: Health effects summaries are adapted from WHO, US EPA and Health Canada Guidelines [6,20,21].

WHO classification: extremely (Ia), highly (Ib), moderately (I), and slightly (III) hazardous, unlikely to present acute hazard (U) and obsolete chemicals unlikely to be in use (O).

TABLE 3.3. Regulatory Guidelines and Health Impacts of Insecticides, Acaricids and Nematicides Grouped by Pesticide Classification Group

Chemical	CAS ID	WHO hazard classification	WHO guideline value (mg/L)	US EPA Maximum Contaminant Level (mg/L)	Health Canada Maximum Acceptable Concentrations (mg/L)	Health impacts
Carbamate insecticides						
Aldicarb	116-06-3	la	0.01	-	-	Nervous system effects including acetylcholinesterase inhibition
Carbaryl	63-25-2	II	-	-	0.09	Decreased kidney function (may be rapidly reversible after exposure ceases)
Carbofuran	1563-66-2	Ib	0.007	0.04	0.09	Nervous system effects (cholinesterase inhibition) and growth suppression; Problems with blood or reproductive system
Oxamyl	97502-85-7	Ib	-	0.2	-	Slight nervous system effects
Cyclodiene insecticides						
Aldrin	309-00-2	0	0.00003 (combined with Dieldrin)	-	-	Nervous system and liver toxicity
Chlordane	12789-03-6	II	0.0002	0.002	-	Liver or nervous system problems; increased risk of cancer
Dieldrin	60-57-1	0	0.00003 (combined with Aldrin)	-	-	Nervous system and liver toxicity
Endrin	72-20-8	0	0.0006	0.002	-	Liver problems
Heptachlor; Heptachlor epoxide	76-44-8; 1024-57-3	0	-	0.0002	-	Liver damage; increased risk of cancer
Fumigant insecticides						
1,2-Dichloropropane	78-87-5	0	0.04 (P)	0.005	-	Increased risk of cancer
Carbon tetrachloride	56-23-5	-	0.004	0.005	0.002	Liver toxicity; Kidney damage; liver tumours (classified as probable carcinogen)
1,2-Dichlorobenzene	95-50-1	II	1 (C)	0.6	0.2	Increased blood cholesterol, protein and glucose levels; Liver, kidney, or circulatory system problems
1,4-Dichlorobenzene	106-46-7	II	0.3 (C)	0.075	0.005	Benign liver tumours and adrenal gland tumours (classified as probable carcinogen); Anemia; liver, kidney or spleen damage; changes in blood

table continues next page

TABLE 3.3. continued

				US EPA		
			WHO	Maximum	Health Canada	
		WHO hazard	guideline	Contaminant	Maximum Acceptable	
Chemical	CAS ID	classification	value (mg/L)	Level (mg/L)	Concentrations (mg/L)	Health impacts
Fumigant nematicides						
1,2-Dibromo-3-	96-12-8	0	0.001a	0.0002	-	Reproductive difficulties; increased risk of cancer
chloropropane						
1,3-Dichloropropene	542-75-6	-	0.02a	-	-	Promotes lung and bladder tumours
Organochlorine insectio	ides					
Pentachlorophenol	87-86-5	Ib	0.009a(P)			Reduced body weight, changes in clinical parameters, histological changes
						in kidney and liver, reproductive effects (decreased neonatal survival and
						growth); Increased cancer risk
DDT and metabolites	DDT total	II	0.001	-	-	Developmental toxicity
Lindane	58-89-9	II	0.002	0.0002	-	Liver or kidney problems
Methoxychlor	72-43-5	U	0.02	0.04	-	Reproductive difficulties
Toxaphene	8001-35-2	0	-	0.003	-	Kidney, liver, or thyroid problems; increased risk of cancer
Organophosphorus aca	ricides/insectic	ides				
Azinphos-methyl	86-50-0	lb	-	-	0.02	Neurological effects (plasma cholinesterase)
Chlorpyrifos	2921-88-2	II	0.03	-	0.09	Nervous system effects (cholinesterase inhibition)
Diazinon	333-41-5	II	-	-	0.02	Nervous system effects (cholinesterase inhibition)
Dimethoate	60-51-5	II	0.006	-	0.02	Nervous system effects (cholinesterase inhibition)
Malathion	121-75-5	III	-	-	0.19	Nervous system effects (cholinesterase inhibition)
Phorate	298-02-2	la	-	-	0.002	Nervous system effects (cholinesterase inhibition)
Terbufos	13071-79-9	la	-	-	0.001	Nervous system effects (cholinesterase inhibition)

Note: Health effects summaries are adapted from WHO, US EPA and Health Canada Guidelines [6,20,21].

WHO classification: extremely (Ia), highly (Ib), moderately (I), and slightly (III) hazardous, unlikely to present acute hazard (U) and obsolete chemicals unlikely to be in use (O). WHO Guideline key: C, concentrations of the substance at or below the health-based guideline value may affect the appearance, taste or odour of the water, leading to consumer complaints; P, provisional guideline value because of uncertainties in the health database; T, provisional guideline value because calculated guideline value is below the level that can be achieved through practical treatment methods, source protection, etc.

Cyclodiene and Organochlorine insecticides

Organochlorine insecticides are persistent organic pollutants (POPs) that have been shown bioaccumulate and have been banned in many countries, but remain legal in some developing countries [68]. Despite the bans, organochlorine insecticides are still a public health concern and have been detected at trace levels nearly every river system in the world [69]. DDT is the most well-known insecticide in this group and has been banned in many countries for decades, including countries in North America, Europe and also China, but is still recommended for use in control of malaria vectors.

Organochlorine insecticides have a range of health effects including causing abnormal thyroid hormone levels and increased risk DDT, Lindane and Toxaphene are considered carcinogenic and tumor promotors in animals, although evidence for humans is considered insufficient [44]. Each of the four organochlorine insecticides (Table 3.3) with drinking water guidelines have been found to function as endocrine disruptors by interacting with estrogen and androgen hormones and receptors [70].

Cyclodiene insecticides are highly persistent organochlorine insecticides, initially introduced as alternatives to DDT. These pesticides have been banned in most developed countries because of high persistence in the environment, some are still used in lower income countries and remain present in soils where cyclodiene insecticide applied historically. Average times to reduce to a 5% residual can take up to 10 years for DDT, 8 years for Dieldrin and 6.5 years for Lindane [24]. Guidelines are still established because of international uses and potential for historic residues to be present in drinking water sources. These chemicals have been mostly banned and are regulated based on liver and neurotoxicity and increased risk of cancer [6,20,21].

Fumigant insecticides and nematicides

Fumigants refer to highly volatile pesticide gas or vapor that is designed to reach pests by filling the air. This can include spraying for flying insects, termites in wood or filling airspaces between soil, or reach soil water to kill pests residing in soil, such as nematodes. The most immediate health risks from fumigants are caused by inhalation exposure. However, because many nematicides are injected into the soil there is a risk to entering drinking water sources via agricultural runoff and leaching of soil. A good illustration of this risk is from the use of a mixture of 1,2-Dichloropropane and 1,3-Dichloropropene known as D-D. The mixture was banned because 1,2-Dichloropropane displayed little nematicidal activity and was shown to be a groundwater contaminant [71] and increased risk of cancer (Table 3.3). It was banned in mixtures in 1984.

All of the chemical fumigants with guidelines are chlorocarbons or aromatic organic compounds. The Dichlorobenzenes range from acute toxicity at high doses, effecting the liver and kidneys in the case of 1,2-Dichlorobenzene to 1,4-Dichlorobenzene classification as a possible carcinogen in humans (IARC Group 2B, Table 3.3) [6,20,21].

1,2-Dibromo-3-chloropropane (DBCP) has a high residency in soil of up to 2 years or more and is mobile in soil with detection in drinking wells with nearby usage sites [72]. Health effects include reversible reductions in spermatogenesis and it is listed as a possible carcinogen. As a result, this substance was banned by the EPA in 1979 and in many other countries. 1,3-Dichloropropene is listed as a probable carcinogen and is widely used in the US and around the world, though is being phased out as a pesticide in the EU.

Organophosphorus acaricides/insecticides

Organophosphorus insecticides are a widely used group of pesticides, many of which have been discontinued for some uses and in agriculture. Chlorpyrifos is one of the most applied insecticide by weight on 21 crops in the United States and Phorate is in the top 6 [25]. Risk of organophosphorus insecticide contamination of surface waters is increasing with low environmental regulation quality and expanding population and agricultural production, including in low to low middle and middle income countries [73].

Organophosphorus insecticides are toxic to the nervous systems of humans and other mammals by inactivating acetylcholinesterase, an enzyme that helps form neurotransmitters and is similar to the inhibition in carbamate insecticides [63]. Health Canada has established guidelines for each organophosphorus insecticide in Table 3.3. Chlorination of chlorpyrifos produces chlorpyrifos oxon and is much more potent inhibitor of acetylcholinesterase. The substance is responsible for acute toxicity in humans and its widespread application to agricultural crops has concerning implications for drinking water treatment [74].

Conclusions

The WHO has listed other chemicals as unlikely to have be in drinking water but have been frequently detected in tube wells pyrethroid insecticides in India [75] and are increasing in usage as they replace banned organophosphorus and organochlorine insecticides. The known human health impacts of pesticides are outnumbered by the number of pesticides in use and increasing amounts of new pesticides applied in agricultural, commercial and residential settings.

References

- Carpenter SR, Caraco NF, Correll DL, Howarth RW, Sharpley AN, Smith VH. Nonpoint Pollution of Surface Waters with Phosphorus and Nitrogen. Ecol Appl 1998;8:559-68. doi:10.1890/1051-0761(1998)008[0559:NPOSWW]2.0.CO;2.
- [2] Conley DJ, Paerl HW, Howarth RW, Boesch DF, Seitzinger SP, Havens KE, et al. Ecology. Controlling eutrophication: nitrogen and phosphorus. Science 2009;323:1014-5. doi:10.1126/science.1167755.
- [3] Smith VH. Eutrophication of freshwater and coastal marine ecosystems: a global problem. Environ Sci Pollut Res Int 2003;10:126-39.
- [4] Schindler D. W. Recent advances in the understanding and management of eutrophication. Limnol Oceanogr 2006;51:356-63. doi:10.4319 /lo.2006.51.1_part_2.0356.
- [5] Sebilo M, Mayer B, Nicolardot B, Pinay G, Mariotti A. Long-term fate of nitrate fertilizer in agricultural soils. Proc Natl Acad Sci U S A 2013;110:18185-9. doi:10.1073/pnas.1305372110.
- [6] WHO. Guidelines for drinking-water quality: fourth edition incorporating the first addendum. Geneva: World Health Organization: 2017.
- [7] DeSimone LA. Quality of Water from Domestic Wells in Principal Aquifers of the United States, 1991-2004. U.S. Department of the Interior and U.S. Geological Survey; 2009.
- [8] Goss MJ, Barry DAJ, Rudolph DL. Contamination in Ontario farmstead domestic wells and its association with agriculture:: 1. Results from drinking water wells. J Contam Hydrol 1998;32:267-93. doi:10.1016/S0169-7722(98)00054-0.
- [9] Ritter WF. Pesticide contamination of ground water in the United States A review. J Environ Sci Health Part B 1990;25:1-29. doi:10.1080/03601239009372674.

- [10] Squillace PJ, Scott JC, Moran MJ, Nolan BT, Kolpin DW. VOCs, Pesticides, Nitrate, and Their Mixtures in Groundwater Used for Drinking Water in the United States. Environ Sci Technol 2002;36:1923-30. doi:10.1021/es015591n.
- [11] Health Canada. Guidelines for Canadian Drinking Water Quality: Guideline Technical Document Nitrate and Nitrite. 2013.
- [12] Fewtrell L. Drinking-Water Nitrate, Methemoglobinemia, and Global Burden of Disease: A Discussion. Environ Health Perspect 2004;112:1371-4. doi:10.1289/ehp.7216.
- [13] Richardson SD, Plewa MJ, Wagner ED, Schoeny R, DeMarini DM. Occurrence, genotoxicity, and carcinogenicity of regulated and emerging disinfection by-products in drinking water: A review and roadmap for research. Mutat Res Mutat Res 2007;636:178-242. doi:10.1016/j .mrrev.2007.09.001.
- [14] Antunes JT, Leão PN, Vasconcelos VM. Cylindrospermopsis raciborskii: review of the distribution, phylogeography, and ecophysiology of a global invasive species. Front Microbiol 2015;6. doi:10.3389/fmicb.2015.00473.
- [15] WHO. Cyanobacterial toxins: Microcystin-LR in Drinking-water. Background document for development of WHO Guidelines for Drinking-water Quality. 2003.
- [16] Paerl HW, Huisman J. Climate change: a catalyst for global expansion of harmful cyanobacterial blooms. Environ Microbiol Rep 2009;1:27-37. doi:10.1111/j.1758-2229.2008.00004.x.
- [17] Neilan BA, Pearson LA, Muenchhoff J, Moffitt MC, Dittmann E. Environmental conditions that influence toxin biosynthesis in cyanobacteria. Environ Microbiol 2013;15:1239-53. doi:10.1111/j.1462-2920.2012.02729.x.
- [18] Rastogi RP, Madamwar D, Incharoensakdi A. Bloom Dynamics of Cyanobacteria and Their Toxins: Environmental Health Impacts and Mitigation Strategies. Front Microbiol 2015;6. doi:10.3389/fmicb.2015.01254.
- [19] EU. European Union (Drinking Water) Regulations 2014. 2014.
- [20] US EPA O. Drinking Water Requirements for States and Public Water Systems. US EPA 2015. https://www.epa.gov/dwreginfo (accessed February 12, 2018).
- [21] Health Canada, Canada H. Guidelines for Canadian Drinking Water Quality Summary Table. Ottawa, Ontario: Water and Air Quality Bureau, Healthy Environments and Consumer Safety Branch, Health Canada; 2017.
- [22] Atwood D, Paisley-Jones C. Pesticides Industry Sales and Usage: 2008 2012 Market Estimates. Washington, DC: U.S. Environmental Protection Agency; 2017.
- [23] Bradley PM, Journey CA, Romanok KM, Barber LB, Buxton HT, Foreman WT, et al. Expanded Target-Chemical Analysis Reveals Extensive Mixed-Organic-Contaminant Exposure in U.S. Streams. Environ Sci Technol 2017;51:4792-802. doi:10.1021/acs.est.7b00012.
- [24] Zhang W, Jiang F, Ou J. Global pesticide consumption and pollution: with China as a focus 2011:20.
- [25] Fernandez-Cornejo J, Nehring R, Osteen C, Wechsler SJ, Martin A, Vialou A. Pesticide Use in U.S. Agriculture: 21 Selected Crops, 1960-2008. U.S. Department of Agriculture, Economic Research Service; 2014.
- [26] Blair A, Ritz B, Wesseling C, Beane Freeman L. Pesticides and human health. Occup Environ Med 2015;72:81-2. doi:10.1136 /oemed-2014-102454.
- [27] WHO. The WHO recommended classification of pesticides by hazard and guidelines to classi cation: 2009. Geneva, Switzerland: WHO Press; 2010.
- [28] Fuerst EP. Understanding the Mode of Action of the Chloroacetamide and Thiocarbamate Herbicides. Weed Technol 1987;1:270-7.
- [29] Hladik ML, Hsiao JJ, Roberts AL. Are Neutral Chloroacetamide Herbicide Degradates of Potential Environmental Concern? Analysis and Occurrence in the Upper Chesapeake Bay. Environ Sci Technol 2005;39:6561-74. doi:10.1021/es050268w.
- [30] Squillace PJ, Moran MJ, Price CV. VOCs in shallow groundwater in new residential/commercial areas of the United States. Environ Sci Technol 2004;38:5327-38.
- [31] Hladik ML, Bouwer EJ, Roberts AL. Neutral degradates of chloroacetamide herbicides: Occurrence in drinking water and removal during conventional water treatment. Water Res 2008;42:4905-14. doi:10.1016/j.watres.2008.09.008.
- [32] WHO. Alachlor in Drinking-water: Background document for development of WHO Guidelines for Drinking-water Quality. 2003.
- [33] WHO. Metolachlor in Drinking-water: Background document for development of WHO Guidelines for Drinking-water Quality. 2003.

- [34] WHO. Atrazine and Its Metabolites in Drinking-water: Background document for development of WHO Guidelines for Drinking-water Quality. 2011.
- [35] WHO. Simazine in Drinking-water: Background document for development of WHO Guidelines for Drinking-water Quality. 2003.
- [36] CAST. The Phenoxy Herbicides. Weed Sci 1975;23:253-63.
- [37] WHO. Chlorophenoxy herbicides (excluding 2,4-D and MCPA) in Drinking-water: Background document for development of WHO Guidelines for Drinking-water Quality. 2003.
- [38] Robbins P, Birkenholtz T. Turfgrass revolution: measuring the expansion of the American lawn. Land Use Policy 2003;20:181-94. doi:10.1016/S0264-8377(03)00006-1.
- [39] US EPA. Pesticides in Ground Water Database: A Compilation of Monitoring Studies: 1971 1991, National Summary. 1992.
- [40] WHO. 2,4-D in Drinking-water: Background document for development of WHO Guidelines for Drinking-water Quality. 2003.
- [41] WHO. MCPA in Drinking-water: Background document for development of WHO Guidelines for Drinking-water Quality. 2003.
- [42] Donald DB, Cessna AJ, Sverko E, Glozier NE. Pesticides in Surface Drinking-Water Supplies of the Northern Great Plains. Environ Health Perspect 2007;115:1183-91. doi:10.1289/ehp.9435.
- [43] Madsen JD. Analysis of 2,4-D and Endothall Residues from Michigan Drinking Water Wells. Mississippi State University, MS: Geosystems Research Institute; 2015.
- [44] Dich J, Zahm SH, Hanberg A, Adami H-O. Pesticides and cancer. Cancer Causes Control 1997;8:420-43. doi:10.1023/A:1018413522959.
- [45] Alavanja MCR, Hoppin JA, Kamel F. Health Effects of Chronic Pesticide Exposure: Cancer and Neurotoxicity. Annu Rev Public Health 2004;25:155-97. doi:10.1146/annurev.publhealth.25.101802.123020.
- [46] Burns CJ, Swaen GMH. Review of 2,4-dichlorophenoxyacetic acid (2,4-D) biomonitoring and epidemiology. Crit Rev Toxicol 2012;42: 768-86. doi:10.3109/10408444.2012.710576.
- [47] von Stackelberg K. A Systematic Review of Carcinogenic Outcomes and Potential Mechanisms from Exposure to 2,4-D and MCPA in the Environment. J Toxicol 2013:1-53. doi:10.1155/2013/371610.
- [48] Duke SO, Powles SB. Glyphosate: a once-in-a-century herbicide. Pest Manag Sci 2008;64:319-25. doi:10.1002/ps.1518.
- [49] Myers JP, Antoniou MN, Blumberg B, Carroll L, Colborn T, Everett LG, et al. Concerns over use of glyphosate-based herbicides and risks associated with exposures: a consensus statement. Environ Health 2016;15:19. doi:10.1186/s12940-016-0117-0.
- [50] Borggaard OK, Gimsing AL. Fate of glyphosate in soil and the possibility of leaching to ground and surface waters: a review. Pest Manag Sci 2008;64:441-56. doi:10.1002/ps.1512.
- [51] WHO. Glyphosate and AMPA in Drinking-water: Background document for development of WHO Guidelines for Drinking-water Quality. 2005.
- [52] Health Canada. Re-evaluation Decision RVD2017-01, Glyphosate. 2017.
- [53] Health Canada. Guidelines for Canadian Drinking Water Quality: Guideline Technical Document Diuron. 1987.
- [54] Chen W-H, Young TM. NDMA Formation during Chlorination and Chloramination of Aqueous Diuron Solutions. Environ Sci Technol 2008;42:1072-7. doi:10.1021/es072044e.
- [55] WHO. Chlorotoluron in Drinking-water: Background document for development of WHO Guidelines for Drinking-water Quality. 1996.
- [56] WHO. Isoproturon in Drinking-water: Background document for development of WHO Guidelines for Drinking-water Quality. 2003.
- [57] WHO. Diquat in Drinking-water in Drinking-water: Background document for development of WHO Guidelines for Drinking-water Quality. 2004.
- [58] Costa LG, Giordano G, Guizzetti M, Vitalone A. Neurotoxicity of pesticides: A brief review. Front Biosci 2008;13:1240-9. doi:10.2741/2758.
- [59] Tanner CM, Kamel F, Ross GW, Hoppin JA, Goldman SM, Korell M, et al. Rotenone, Paraquat, and Parkinson's Disease. Environ Health Perspect 2011;119:866-72. doi:10.1289/ehp.1002839.
- [60] Canada H. Guidelines for Canadian Drinking Water Quality: Guideline Technical Document Paraquat. 2005.

- [61] US EPA. Reregistration Eligibility Decision for Endothall. 2005.
- [62] US EPA. National Primary Drinking Water Regulations: Endothall {Technical Version}. 1995.
- [63] Fukuto TR. Mechanism of action of organophosphorus and carbamate insecticides. Environ Health Perspect 1990;87:245-54.
- [64] Risher JF, Mink FL, Stara JF. The toxicologic effects of the carbamate insecticide aldicarb in mammals: a review. Environ Health Perspect 1987;72:267-81.
- [65] WHO. Aldicarb in Drinking-water: Background document for development of WHO Guidelines for Drinking-water Quality. 2003.
- [66] Baron RL. A carbamate insecticide: a case study of aldicarb. Environ Health Perspect 1994;102:23-7.
- [67] Canada H. Guidelines for Canadian Drinking Water Quality: Guideline Technical Document Carbaryl. 1986.
- [68] Jayaraj R, Megha P, Sreedev P. Organochlorine pesticides, their toxic effects on living organisms and their fate in the environment. Interdiscip Toxicol 2016;9:90-100. doi:10.1515/intox-2016-0012.
- [69] Chopra AK, Sharma MK, Chamoli S. Bioaccumulation of organochlorine pesticides in aquatic system—an overview. Environ Monit Assess 2011;173:905-16. doi:10.1007/s10661-010-1433-4.
- [70] Mnif W, Hassine AIH, Bouaziz A, Bartegi A, Thomas O, Roig B. Effect of Endocrine Disruptor Pesticides: A Review. Int J Environ Res Public Health 2011;8:2265-303. doi:10.3390/ijerph8062265.
- [71] Chitwood DJ. Nematicides. Encycl. Agrochem., American Cancer Society; 2003. doi:10.1002/047126363X.agr171.
- [72] WHO. 1,2-Dibromo-3-chloropropane in Drinking-water in Drinking-water: Background document for development of WHO Guidelines for Drinking-water Quality. 2003.
- [73] Stehle S, Schulz R. Agricultural insecticides threaten surface waters at the global scale. Proc Natl Acad Sci 2015;112:5750-5. doi:10.1073 /pnas.1500232112.
- [74] Wu J, Laird DA. Abiotic transformation of chlorpyrifos to chlorpyrifos oxon in chlorinated water. Environ Toxicol Chem 2003;22:261-4. doi:10.1002/etc.5620220204.
- [75] Kumari B, Madan VK, Kathpal TS. Status of insecticide contamination of soil and water in Haryana, India. Environ Monit Assess 2008;136:239-44. doi:10.1007/s10661-007-9679-1.

Chapter 4 Industrial Chemicals

Introduction

The use of chemicals is widespread and increasing in modern industries. The chemical industry is one of the largest sectors in the global economy and one of the main sources of industrial contaminants in water. Industrial chemical contaminants enter surface and ground waters directly as point sources of pollution, with effluents from manufacturing, chemical plants or refineries originating from pipes or contaminating water sources accidentally through from leaking storage tanks or pipelines. Extractive industries cause more diffuse contamination by disrupting hydrology over mining or drilling areas, releasing chemicals used in mining or accelerating erosion of naturally occurring chemical contaminants are frequently found in industrial waste sites and municipal landfills and then enter surface and groundwaters as leachate.

Industrial chemical contaminants that have established regulations or WHO guidelines are grouped by their chemical classification. A large number of contaminants in this chapter are considered volatile organic compounds (VOCs), including halogenated hydrocarbons and benzene derivatives. VOCs are released during combustion of fossil fuels or wood. They are major components of common industrial and household chemicals including many solvents such as paint and lacquer thinners, aerosol sprays, degreasers, wood preservatives, glues, paints and automotive products. Common examples of VOCs are gasoline, benzene, formaldehyde, toluene, xylene and styrene.

VOCs are commonly detected in aquifers including untreated domestic and public drinking water wells in the United States [1]. The number and diversity of VOCs entering environmental and drinking water sources requires a range of detection technologies [2].

Halogenated Hydrocarbons

Polychloromethanes

Carbon tetrachloride (CT) and dichloromethane are commonly and widely used solvents that are mostly released into the atmosphere, but can contaminant soil and water during storage, as part of waste effluent and leachate from hazardous waste sites (Table 4.1) [3]. In studies of aquifers in the US dichloromethane was one of the most commonly detected in samples [1,4] and CT was found at levels within a factor of 10 but less than maximum contaminant levels (MCL) [1].

CT is a ubiquitous chemical in groundwater and the atmosphere, despite being banned for consumer use in 1970 in the US and world production declining since the 1970s [3]. Production has declined due to its role in chlorofluorocarbon (CFC) production. CFCs have been banned from aerosols since 1978, and heavily regulated through the Montreal Protocol, an international agreement to reduce chemicals that deplete atmospheric ozone [5]. CT was used widely in chemical production of refrigerants, aerosol propellants, fire extinguishers, household cleaners and industrial degreasers. However, due to its past and continued use in some countries, is still a common leachate from hazardous and landfill waste sites [6]. Production of dichloromethane has also declined due to increased regulation, with peak production in the US in the 1980s. The health consequences of CT and dichloromethane include liver toxicity and classifications as probably carcinogens [7,8]. Higher acute exposures by oral ingestion is generally considered to be less common then inhalation. Oral exposure from dichloromethane in humans are limited to case studies and report liver and kidney effects as well as neurological effects [9]. An epidemiological study of exposures to chemicals including CT showed significant odds ratios with low birthweights and low gestation weights-for-age, but participants were also exposed to a large number of other contaminants in drinking water [6,10].

Polychloroethanes

1,2-Dichloroethane (1,2-DCA), 1,1,1-Trichloroethane (1,1,1-TCA), and 1,1,2-Trichloroethane (1,1,2-TCA) are commonly used as industrial solvents, degreasers, and intermediate chemicals during the production of plastics, textiles and a range of other industrial chemicals (Table 4.1) [3]. Globally, these chemicals are produced at large scales because they have a wide range of industrial usages. Industrial water effluents and accidental spills are the main ways that polychloroethanes enter environmental waters.

1,2-DCA is a very important bulk chemical with production among the highest of all halogenated chemicals, worldwide and released into the environment as a gas, but some entering rivers and lakes [3]. 1,2-DCA is not likely to be a threat in surface waters because they volatilize easily [11], though some research has shown presence in surface water near industrial sites [12]. 1,2-DCA can persist in ground-water sources. There is possibility of dermal and inhalation exposure during bathing and showering if present in drinking water [11].

Acute toxicity of 1,2-DCA can lead to fatalities due to circulatory and respiratory failure. Chronic and sub chronic occupational exposures can cause neurological disorders and dysfunction of the liver and kidneys [11,12]. 1,2-DCA is listed as a probable carcinogen based on tumor formation in animals, but little evidence in human studies.

1,1,1-TCA production has been on the decline and its usage phased out by the Montreal Protocol because of harmful effects on ozone after entering the atmosphere [5]. It has a wide range of uses including in aerosols, water repellents, adhesives, cosmetics, and degreasers. Despite declines in usages and being phased out in many parts of the world, it remains persistent in the troposphere for about 6 years and has low biodegradability. As a result and due to its common presence at hazardous waste sites, it is still a common groundwater contaminant [3]. 1,1,2-TCA is an isomer of 1,1,1-TCA and is used as an adhesive, a solvent for fats and oils, in lacquers, and in production of Teflon tubing. It enters groundwater as a contaminant from wastewater discharges, as spills and from improper disposal.

1,1,1-TCA is readily absorbed by the skin and gastrointestinal tract. Though less toxic then other halogenated compounds, oral ingestion of large doses of 1,1,1-TCA and its isomer, 1,1,2-TCA, can cause nausea, diarrhea and vomiting as well as neurological effects [13]. 1,1,1-TCA and 1,1,2-TCA are not considered carcinogens in humans [3].

Polychloroethenes

Trichloroethene and tetrachloroethene are common groundwater contaminants due to their historic widespread use as industrial solvents for waxes, resins, rubbers, oils and extensive use as degreasers

and dry cleaning. Trichloroethene and tetrachloroethene were two of the top 5 most detected contaminants of U.S. aquifers [1]. Vinyl chloride can be found in drinking water as trichloroethene or tetrachloroethene degrade. 1,1-Dichloroethene and *cis*- and *trans*-1,2-Dichloroethene are all highly volatile and not expected to persist in surface waters.

There is substantial evidence that trichloroethene and tetrachloroethene cause cancer in animals and have a wide range of non-cancer toxic effects that target the central nervous system (Table 4.1) [14,15]. There is a substantial body of evidence that supports trichloroethene as carcinogen in humans when ingested orally, causing kidney cancer and may also cause liver cancer and non-Hodgkin lymphoma [16]. Trichloroethene toxicity also effects the liver, kidney, immune system, male reproductive system, and embryo/fetal development in humans [14,16]. Trichloroethene is classified as carcinogenic (Group 1) while tetrachoroethene is classified as probably carcinogenic (Group 2A) by IARC [17].

Vinyl chloride is common as a necessary substance in the production of polyvinyl chloride (PVC). Most vinyl chloride enters the environment as a gas that is heavier than air and enters drinking water through the ground, persisting for months or years, despite volatilizing from surface waters with a half-life of 1-40 hrs [18]. Vinyl chloride has also been shown to accumulate in PVC pipes used to distribute municipal chlorinated water [19]. Vinyl chloride is released into the environment from improper disposal and storage and industrial discharges from plastic factories [3].

Vinyl chloride is classified as carcinogenic in humans (Group 1) by IARC [17] with occupational exposure associated with rare forms of liver cancer leading to early evidence of causation in humans [20]. Vinyl chloride exposure may also be linked to brain and hepatocellular cancer and it is mutagenic with metabolites interact directly with DNA [18].

Benzene Derivatives

Contaminants from Petroleum Products

The organic compounds benzene, toluene, ethylbenzene and xylene (BTEX) contaminate ground and surface water through spills and leaks of petroleum derivatives [25] and spills associated with hydraulic fracturing operations [26,27]. Benzene is estimated to be a widespread contaminant. It has been discovered in drinking water treatment facilities and ground water across Canada [28] and suspected to be in 1.3% of all groundwater systems in the US at levels higher than drinking water standards [29]. In a study of volatile organic compounds in shallow groundwater in new residential and commercial areas across the US, toluene was one of the three most detected compounds, though rarely exceeding EPA drinking water standards [30].

In a Health risks from BTEX range from benzene which alters bone marrow, blood and immune responses and is a human carcinogen [29] causing it to be regulated by the WHO and the three regulatory bodies (Table 4.2). Ethylbenzene, toluene, and xylene are also widely regulated with exposures ranging from impacting liver and pituitary function and tumor formation in animal models [31], and nervous system damage [21]. Though for these three compounds, the main exposure is likely to be through inhalation.

Other benzene derivatives

Dichlorobenzenes are used as fumigant insecticides but also enter the environment through industrial spills and leaks. The Dichlorobenzenes range from acute toxicity at high doses, effecting the liver and

TABLE 4.1. Regulatory Guidelines and Health Effects of Halogenated Hydrocarbon Contaminants in Drinking Water

Chemical	CAS ID	Source	WHO guideline value (mg/L)	US EPA Maximum Contaminant Level (mg/L)		European Union (mg/L)	Health impacts
Polychloromethanes							
Carbon tetrachloride	56-23-5	Industrial and chemical plant discharge	0.004	0.005	0.002	-	Liver toxicity; Kidney damage; liver tumours (classified as probable carcinogen)
Dichloromethane	75-09-2	Industrial and chemical plant disharge	0.02	0.005	0.05	-	Liver effects (liver foci and areas of cellular alteration); Classified as probable carcinogen
Polychloroethanes							
1,2-Dichloroethane	107-06-2	Industrial and chemical plant discharge	0.03a	0.005	0.005	0.003	Cancer of the mammary gland (classified as probable carcinogen)
1,1,1-Trichloroethane	71-55-6	Factory discharge	-	0.2	-	-	Liver, nervous system, or circulatory problems
1,1,2-Trichloroethane	79-00-5	Chemical factory discharge	-	0.005	-	-	Liver, kidney, or immune system problems
Polychloroethenes							
Vinyl chloride	75-01-4	Industrial discharge; plastic factory discharge	0.0003a	0.002	0.002 ALARA	0.0005	Liver cancer (classified as human carcinogen); Raynaud's disease, effects on bone, circulatory system, thyroid, spleen, central nervous system
1,1-Dichloroethene	75-35-4	Industrial spills; factory discharge	-	0.007	0.014	-	Liver effects (fatty changes)
cis-1,2-Dichloroethene; trans-1,2-Dichloroethene	156-59-2; 156-60-5	Chemical factory discharge	0.05	0.07; 0.1	-	-	Liver problems
Tetrachloroethene	127-18-4	Industrial spills; factory discharge	0.04	0.005	0.01	0.01	Neurological effects (colour confusion) in humans; Liver problems; Classified as probably carcinogenic to humans, based on sufficient evidence in experimental animals and limited evidence in humans
Trichloroethene	79-01-6	Industrial spills; factory discharge	0.02 (P)	0.005	0.005	0.01	Developmental effects (heart malformations); liver problems; Classified as probable carcinogen
Other halogenated hydrocar	bons						
1,2-Dibromoethane	106-93-4	Petroleum refineries discharge	0.0004a(P)	0.00005	-	-	Problems with liver, stomach, reproductive system, or kidneys; increased risk of cancer
1,2-Dichloropropane*	78-87-5	Chemical factories discharge	0.04 (P)	0.005	-	-	Increased risk of cancer
Hexachlorocyclopentadiene	77-47-4	Chemical factory discharge	-	0.05	-	_	Kidney or stomach problems

Note: Health effects summaries are adapted from WHO, European Union, US EPA and Health Canada guidelines [21-24].

WHO Guideline key: C, concentrations of the substance at or below the health-based guideline value may affect the appearance, taste or odour of the water, leading to consumer complaints; P, provisional guideline value because of uncertainties in the health database; T, provisional guideline value because calculated guideline value is below the level that can be achieved through practical treatment methods, source protection, etc.

Chemical	CAS ID	Source	WHO guideline value (mg/L)	US EPA Maximum Contaminant Level (mg/L)	Health Canada Maximum Acceptable Concentrations (mg/L)	European Union (mg/L)	Health impacts
Benzene	71-43-2	Industrial waste; factory discharge	0.01a	0.005	0.005	0.001	Bone marrow (red and white blood cell) changes and cancer (classified as human carcinogen); Blood system and immunological responses
1,2-Dichlorobenzene	95-50-1	Industrial and chemical plant discharge	1 C	0.6	0.2	-	Increased blood cholesterol, protein and glucose levels; liver and kidney problems
1,4-Dichlorobenzene	106-46-7	Industrial and chemical plant discharge	0.3 C	0.075	0.005	-	Benign liver tumours and adrenal gland tumours (classified as probable carcinogen); Anemia; liver, kidney or spleen damage; changes in blood
Ethylbenzene	100-41-4	Chemical factories and petroleum refineries discharge	0.3 C	0.7	0.14	-	Effects on the liver and pituitary gland.; Tumour formation at various sites in animals, including kidney, lung, liver and testes.
Hexachlorobenzene	118-74-1	Metal refineries discharge; chemical factories discharge	-	0.001	-	-	Liver or kidney problems; reproductive difficulties; increased risk of cancer
Monochlorobenzene	108-90-7	Industrial spills; factory discharge	-	0.1	0.08	-	Reduced survival and body weight gain; Liver or kidney problems
Styrene	100-42-5	Rubber and chemical factories discharge	0.02 C	0.1	-	-	Liver, kidney, or circulatory system problems
Trichlorobenzenes	120-82-1	Textile factory discharge	-	0.07	-	-	Changes in adrenal glands
Toluene	108-88-3	Petroleum and chemical industries discharge	0.7 C	1	0.06	-	Adverse neurological effects, including vibration thresholds, colour discrimination, auditory thresholds, attention, memory and psychomotor functions; kidney or liver problems
Xylenes	xylenes	Petroleum and chemical industries discharge	0.5 C	10 (total)	0.09 (total)	-	Adverse neuromuscular effects; nervous system damage

TABLE 4.2. Regulatory Guidelines and Health Effects of Contamination of Drinking Water by Benzene Derivatives

Note: Health effects summaries are adapted from WHO, European Union, US EPA and Health Canada guidelines [21-24].

WHO Guideline key: C, concentrations of the substance at or below the health-based guideline value may affect the appearance, taste or odour of the water, leading to consumer complaints; P, provisional guideline value because of uncertainties in the health database; T, provisional guideline value because calculated guideline value is below the level that can be achieved through practical treatment methods, source protection, etc.

kidneys in the case of 1,2-Dichlorobenzene to 1,4-Dichlorobenzene classification as a possible carcinogen in humans (IARC Group 2B, Table 4.2) [21-23].

Styrene is used in latex, rubber, resins and plastics production. Inhalation is the most common exposure. Styrene is mutagenic in animal models [32] and also causes liver, kidney and circulatory system problems in long term exposure in rats [33].

Dioxins and dioxin-like contaminants

Dioxins and polychlorinated biphenyls (PCBs) have many industrial uses because they are heatstable and persistent, qualities that also make them unfavorable when they enter the environment and can bioaccumulate [34]. They are common in a wide range of uses including adhesives, flame retardants and electronic waste [35]. They are found in air, soil, sediment and water. Di(2-ethylhexyl) phthalate (DEHP) and Di(2-ethylhexyl)adipate (DEHA) are both plasticizers that add flexibility to resins. DEHP is a key component in adding flexibility to PVC. Studies of DEHP concentration in surface water and sediment and sewage effluent and sludge in levels higher than EPA guidelines throughout Europe [36]. 1,4-Dioxane is a common additive to chlorinated solvents, paints, strippers, waxes.

The compound 1,4-Dioxane is classified as a likely human carcinogen by the EPA and US Department of Health and Human Services [37]. Dioxins and dioxin-like compounds alter hormone levels in females during puberty and menstrual cycles [38]. PCBs impact the male reproductive system, altering sex steroid systems and are carcinogenic [39] (Table 4.3). DEHP also negatively impacts the male reproductive system [40]. Perchlorate and cyanide both impact thyroid functions [41,42].

Elements

Industrial waste and processes are a significant source of element contamination in drinking water sources. Beryllium metal is used in aerospace and nuclear industries. Chromium has wide uses in industry, wood preservation, tanning, and in the production of several alloys, including staineess steel. Chromium enters water sources through accidental spills, improper disposal of ore, as a component of car exhaust, in effluent from cooling towers, and also through oxidation of naturally occurring Chromium [43]. Thallium is likely to enter surface waters through atmospheric depositions of thallium ash from coal combustion and enter groundwaters through leakages and spills of thallium salts or from natural deposits [44].

Beryllium and Chromium are both considered Group 1 carcinogens by IARC [45,46]. Alopecia is characteristic of exposure to thallium salts along with kidney damage [47].

Conclusions

Industrial development in countries around the world, the scope and scale of drinking water contamination by industrial chemicals is on the rise. Rapid urbanization in the world has led to higher concentrations of both chemical contaminants and the industries that produce them. In recent years, as governments in high-income countries have banned or outlawed some types of chemical waste, industries in these countries ship and dump hazardous waste in lower income countries [48].

TABLE 4.3. Regulatory Guidelines and Health Effects of Industrial Contaminants in Drinking Water

Chemical	CAS ID	Source	WHO guideline value (mg/L)	US EPA Maximum Contaminant Level (mg/L)	Health Canada Maximum Acceptable Concentrations (mg/L)	European Union (mg/L)	Health impacts
1,4-Dioxane	123-91-1		0.05a	-	-	-	Induces tumors in animal models
Dioxin	1746-01-6	Chemical factory discharge	-	0.0000003	-	-	Reproductive difficulties; increased risk of cancer
Polychlorinated biphenyls	polychlorinated biphenyls	Waste chemicals discharge; landfill runoff	-	0.0005	-	-	Skin changes; thymus gland problems; immune deficiencies; reproductive or nervous system difficulties; increased risk of cancer
Di(2-ethylhexyl) adipate	103-23-1	Chemical factories discharge	-	0.4	-	-	Weight loss, liver problems, or possible reproductive difficulties.
Di(2-ethylhexyl) phthalate	117-81-7	Rubber and chemical factories discharge	0.008	0.006	-	-	Reproductive difficulties; liver problems; increased risk of cancer
Epichlorohydrin	106-89-8	Chemical factories discharge	0.0004 (P)	TT	-	0.0001	Increased cancer risk, and over a long period of time, stomach problems
Hexachlorobutadiene	87-68-3	Rubber and chemical factories discharge	0.0006	-	-	-	Kidney tumors in animal models
Perchlorate	14797-73-0	Oxidizer for solid rocket fuels, automotive airbags, fireworks and road flares	0.07	-	-	-	Inhibits synthesis of thyroid hormone
Cyanide	57-12-5	Factory discharge; mining effluent	-	0.2	0.2	-	Nerve damage or thyroid problems

Note: Health effects summaries are adapted from WHO, European Union, US EPA and Health Canada guidelines [21-24].

WHO Guideline key: C, concentrations of the substance at or below the health-based guideline value may affect the appearance, taste or odour of the water, leading to consumer complaints; P, provisional guideline value because of uncertainties in the health database; T, provisional guideline value because calculated guideline value is below the level that can be achieved through practical treatment methods, source protection, etc.

EPA Guideline key: TT, 0.01% dosed at 20 mg/L (or equivalent) when used in water treatment

TABLE 4.4. Regulatory Guidelines and Health Effects of Industrial Element Contaminants in Drinking Water

Chemical	CAS ID	Source	WHO guideline value (mg/L)	US EPA Maximum Contaminant Level (mg/L)	Health Canada Maximum Acceptable Concentrations (mg/L)	European Union (mg/L)	Health impacts
Beryllium	7440-41-7	Metal refineries discharge; fossil fuel combustion emissions	-	0.004	-		Intestinal lesions
Chromium	7440-47-3	Industrial spills; factory discharge	0.05 (P)	0.1 (total)	0.05	0.05	Enlarged liver, irritation of the skin, respiratory and gastrointestinal tracts from chromium (VI)
Thallium	7440-28-0	Ore processing discharge; factory discharge	-	0.002	-	-	Hair loss; changes in blood; kidney, intestine, or liver problems

Note: Health effects summaries are adapted from WHO, European Union, US EPA and Health Canada guidelines [21-24].

WHO Guideline key: C, concentrations of the substance at or below the health-based guideline value may affect the appearance, taste or odour of the water, leading to consumer complaints; P, provisional guideline value because of uncertainties in the health database; T, provisional guideline value because calculated guideline value is below the level that can be achieved through practical treatment methods, source protection, etc.

References

- Zogorski JS, Carter JM, Ivahnenko T, Lapham WW, Moran MJ, Rowe BL, et al. The Quality of Our Nation's Waters: Volatile Organic Compounds in the Nation's Ground Water and Drinking-Water Supply Wells. U.S. Geological Survey, Reston, VA: U.S. Department of the Interior and U.S. Geological Survey; 2006.
- [2] Chary NS, Fernandez-Alba AR. Determination of volatile organic compounds in drinking and environmental waters. TrAC Trends Anal Chem 2012;32:60-75. doi:10.1016/j.trac.2011.08.011.
- [3] Huang B, Lei C, Wei C, Zeng G. Chlorinated volatile organic compounds (Cl-VOCs) in environment sources, potential human health impacts, and current remediation technologies. Environ Int 2014;71:118-38. doi:10.1016/j.envint.2014.06.013.
- [4] Carter JM, Lapham WW, Zogorski JS. Occurrence of Volatile Organic Compounds in Aquifers of the United States¹. JAWRA J Am Water Resour Assoc 2008;44:399–416. doi:10.1111/j.1752-1688.2008.00170.x.
- [5] UNEP. Handbook for the Montreal Protocol on Substances that Deplete the Ozone Layer. Ozone Secretariat, United Nations Environment Program, Nairobi, Kenya: 2009.
- [6] ATSDR. Toxicological Profile: Carbon Tetrachloride. 2005.
- [7] WHO. Carbon Tetrachloride in Drinking-water: Background document for development of WHO Guidelines for Drinking-water Quality. 2004.
- [8] WHO. Dichloromethane in Drinking-water: Background document for development of WHO Guidelines for Drinking-water Quality. 2003.
- [9] US EPA. Toxicological review of dichloromethane (Methylene chloride). Washington, DC: 2011.
- [10] Bove FJ, Fulcomer MC, Klotz JB, Esmart J, Dufficy EM, Savrin JE. Public Drinking Water Contamination and Birth Outcomes. Am J Epidemiol 1995;141:850-62. doi:10.1093/oxfordjournals.aje.a117521.
- [11] Health Canada. Guidelines for Canadian Drinking Water Quality: Guideline Technical Document 1,2-Dichloroethane. 2015.

- [12] WHO. 1,2-Dichloroethane in Drinking-water: Background document for development of WHO Guidelines for Drinking-water Quality. 2003.
- [13] WHO. 1,1,1 Trichloroethane in Drinking-water in Drinking-water: Background document for development of WHO Guidelines for Drinking-water Quality. 2003.
- [14] WHO. Trichloroethylene in Drinking-water in Drinking-water: Background document for development of WHO Guidelines for Drinkingwater Quality. 2005.
- [15] WHO. Tetrachloroethylene in Drinking-water in Drinking-water: Background document for development of WHO Guidelines for Drinking-water Quality. 2003.
- [16] Chiu WA, Jinot J, Scott CS, Makris SL, Cooper GS, Dzubow RC, et al. Human Health Effects of Trichloroethylene: Key Findings and Scientific Issues. Environ Health Perspect 2013;121:303-11. doi:10.1289/ehp.1205879.
- [17] IARC. IARC Monographs of the Evalulation of Carcinogenic Risks to Humans. Lyon :International Agency for Research on Cancer: n.d.
- [18] WHO. Vinyl Chloride in Drinking-water: Background document for development of WHO Guidelines for Drinking-water Quality. 2004.
- [19] Walter RK, Lin P-H, Edwards M, Richardson RE. Investigation of factors affecting the accumulation of vinyl chloride in polyvinyl chloride piping used in drinking water distribution systems. Water Res 2011;45:2607-15. doi:10.1016/j.watres.2011.02.016.
- [20] Clewell HJ, Gentry PR, Gearhart JM, Allen BC, Andersen ME. Comparison of cancer risk estimates for vinyl chloride using animal and human data with a PBPK model. Sci Total Environ 2001;274:37-66. doi:10.1016/S0048-9697(01)00730-6.
- [21] WHO. Guidelines for drinking-water quality: fourth edition incorporating the first addendum. Geneva: World Health Organization: 2017.
- [22] US EPA O. Drinking Water Requirements for States and Public Water Systems. US EPA 2015. https://www.epa.gov/dwreginfo (accessed February 12, 2018).
- [23] Health Canada. Guidelines for Canadian Drinking Water Quality Summary Table. Ottawa, Ontario: Water and Air Quality Bureau, Healthy Environments and Consumer Safety Branch, Health Canada; 2017.
- [24] EU. European Union (Drinking Water) Regulations 2014. 2014.
- [25] López E, Schuhmacher M, Domingo JL. Human health risks of petroleum-contaminated groundwater. Environ Sci Pollut Res 2008;15: 278-88. doi:10.1065/espr2007.02.390.
- [26] Gross SA, Avens HJ, Banducci AM, Sahmel J, Panko JM, Tvermoes BE. Analysis of BTEX groundwater concentrations from surface spills associated with hydraulic fracturing operations. J Air Waste Manag Assoc 2013;63:424-32. doi:10.1080/10962247.2012.759166.
- [27] Vengosh A, Jackson RB, Warner N, Darrah TH, Kondash A. A Critical Review of the Risks to Water Resources from Unconventional Shale Gas Development and Hydraulic Fracturing in the United States. Environ Sci Technol 2014;48:8334-48. doi:10.1021/es405118y.
- [28] Canada H. Guidelines for Canadian Drinking Water Quality: Guideline Technical Document Benzene. 2009.
- [29] WHO. Benzene in Drinking-water: Background document for development of WHO Guidelines for Drinking-water Quality. 2003.
- [30] Squillace PJ, Moran MJ, Price CV. VOCs in shallow groundwater in new residential/commercial areas of the United States. Environ Sci Technol 2004;38:5327-38.
- [31] WHO. Ethylbenzene in Drinking-water: Background document for development of WHO Guidelines for Drinking-water Quality. 2003.
- [32] Ohe T, Watanabe T, Wakabayashi K. Mutagens in surface waters: a review. Mutat Res Mutat Res 2004;567:109-49. doi:10.1016/j .mrrev.2004.08.003.
- [33] WHO. Styrene in Drinking-water in Drinking-water: Background document for development of WHO Guidelines for Drinking-water Quality. 2003.
- [34] Beyer A, Biziuk M. Environmental Fate and Global Distribution of Polychlorinated Biphenyls. In: Whitacre DM, editor. Rev. Environ. Contam. Toxicol. Vol 201, Boston, MA: Springer US; 2009, p. 137-58. doi:10.1007/978-1-4419-0032-6_5.
- [35] Ni Hong-Gang, Zeng Hui, Tao Shu, Zeng Eddy Y. Environmental and human exposure to persistent halogenated compounds derived from e-waste in China. Environ Toxicol Chem 2010;29:1237-47. doi:10.1002/etc.160.
- [36] Fromme H, Küchler T, Otto T, Pilz K, Müller J, Wenzel A. Occurrence of phthalates and bisphenol A and F in the environment. Water Res 2002;36:1429-38. doi:10.1016/S0043-1354(01)00367-0.

- [37] US EPA. Technical Fact Sheet 1,4-Dioxane. 2017.
- [38] Mendola P, Messer LC, Rappazzo K. Science linking environmental contaminant exposures with fertility and reproductive health impacts in the adult female. Fertil Steril 2008;89:e81-94. doi:10.1016/j.fertnstert.2007.12.036.
- [39] Carpenter DO. Polychlorinated Biphenyls (PCBs): Routes of Exposure and Effects on Human Health. Rev Environ Health 2006;21:1-24. doi:10.1515/REVEH.2006.21.1.1.
- [40] WHO. Di(2-ethylhexyl)phthalate in Drinking-water: Background document for development of WHO Guidelines for Drinking-water Quality. 2003.
- [41] WHO. Perchlorate in Drinking-water in Drinking-water: Background document for development of WHO Guidelines for Drinking-water Quality. 2016.
- [42] WHO. Cyanide in Drinking-water in Drinking-water: Background document for development of WHO Guidelines for Drinking-water Quality. 2003.
- [43] Zhitkovich A. Chromium in Drinking Water: Sources, Metabolism, and Cancer Risks. Chem Res Toxicol 2011;24:1617-29. doi:10.1021 /tx200251t.
- [44] Karbowska B. Presence of thallium in the environment: sources of contaminations, distribution and monitoring methods. Environ Monit Assess 2016;188. doi:10.1007/s10661-016-5647-y.
- [45] WHO. Beryllium in drinking-water. Background document for preparation of WHO Guidelines for drinking-water quality. 2009.
- [46] WHO. Chromium in Drinking-water: Background document for development of WHO Guidelines for Drinking-water Quality. 2003.
- [47] US EPA. Toxicological Review of Thallium and Compounds (CAS No. 7440-28-0) in Support of Summary Information on the Integrated Risk Information System (IRIS). 2009.
- [48] Landrigan PJ, Fuller R, Acosta NJR, Adeyi O, Arnold R, Basu N (Nil), et al. The Lancet Commission on pollution and health. The Lancet 2018;391:462–512. doi:10.1016/S0140-6736(17)32345-0.

Chapter 5 Naturally Occurring Chemicals

Introduction

Chemical contaminants occurring naturally in the environment enter ground and surface water through a wide range of physical, chemical and biological processes.

Most naturally occurring chemical contaminants are inorganic elements bound during the formation of bedrock. Naturally occurring contaminants include a variety of elements such as metals, minerals and primordial and secondary radioisotopes. A biologically produced toxin, microsystin, are produced by cyanobacteria in surface waters. Cyanobacteria are discussed along with nitrate and nitrite at length in the Agricultural contaminants chapter because blooms and toxin release are often caused by excess fertilizer runoff into surface waters.

Chemical contaminates from the Earth are formed and deposited as igneous, metamorphic and sedimentary rock. Igneous rock is formed from magma activity and can be deposited during volcanic activity. Metamorphic rock is formed from mineralization under high temperatures and high pressure deep in the Earth's crust. Sedimentary rock is formed as bedrock erodes into smaller pieces and then transported and redeposited as sentiment by wind, water or ice. Over time, sediments of loose, gravel, sand, silt, and clay may compress into conglomerates of loose and solid rock. Other forms of sedimentary rocks such as ironstone and limestone are formed by chemical and biological processes.

Over long periods of time, geochemical and biological processes erode and release contaminants into ground and surface waters. The rate of erosion and concentration of contaminants from bedrock in water sources are determined by climate, hydrology and biological factors and are also key to soil formation. Biogeochemical processes acting on parent materials (bedrock) during stages of soil formation release contaminants that leach into ground waters or are carried by water, wind or ice into surface waters.

Chemical contamination of water by natural processes can be accelerated by anthropogenic activities such as extractive mining, agricultural activity, and sewage effluent. Deep and surface mines alter hydrology, disturb soil, and increase surface area of rocks resulting in acidification and deposition of heavy metals into surface and ground waters near mines. Agricultural practices can accelerate erosion of soils, releasing contaminants into surface and irrigation waters. Nitrate, a natural product of nitrogen fixing plants and present in human and animal excrement, increases in water sources from high concentrations of livestock and direct inputs of sewage sludge from human settlements.

The concentration of naturally occurring chemicals in ground and surface waters is dependent on reduction-oxidation reactions (redox) that occur in all water. Reduction occurs as a species gains an electron from an electron donor while oxidation refers to the simultaneous loss of an electron by the electron donor. This process is depended on the chemical species present in water and microbiological fauna that facilitate reactions. Redox potential in water can be heterogeneous even with in the same aquifer, but can be assessed and monitored to predict surface or groundwater contamination risk [1]. Redox potential is also important in determining the rate of biodegradation of all chemical contaminants that enter water sources and finished drinking water.

Elements

Arsenic (As), fluoride (F) and selenium (Se) are widely distributed and contaminant drinking water across a range of geologic contexts [2].

Arsenic

Arsenic has been found in a limited number of geological contexts across continents in concentrations ranging from $0.5 \,\mu$ g/L to more than 5000 μ g/L, but more commonly less than 10 μ g/L [3]. Arsenic is often locally present in geothermal springs associated with black shales and more widespread in closed arid and semi-arid basins, often in volcanogenic areas, and highly reducing aquifers in alluvial sedimentary rock [4]. In both cases, high concentrations end up in groundwater because of historically low amounts of flushing and slow moving aquifers [3].

High arsenic concentrations in groundwater are particularly common throughout southern Asia often distributed along with high population densities that rely on groundwater as a drinking water source [5-7]. The highest region of exposure risk is in the Bengal basin because of the combination of arsenic in the groundwater and high population densities. Approximately 2.5 million people in Chile and Argentina and a total of 4 million people throughout Latin America [8] are at risk of arsenic exposure due to volcanic rock and volcanogenic sediments, high pH, in semi-arid to arid climates [4]. In both contexts, local mining activity exacerbates the release of natural arsenic into the drinking water.

In Bangladesh and west Bengal, India, increased access to drinking water free of enteric diseases has been accomplished in large part by increasing borehole wells. However, health gains in diarrheal prevention have been complicated by increased, chronic arsenic exposure, with total estimates of 77-85 million people impacted by arsenic poisoning in Bangladesh [9,10]. In addition to exposure from groundwater, release of arsenic from alluvial sediments can be further concentrated by flooding and drying cycles during wet rice agriculture. Arsenic poisoning in this region the largest incidence of chemical contamination in human history.

The elevated health risk of cancers is the main health risk of chronic exposure of high concentrations of arsenic (Table 5.1). Arsenic is one of the first chemicals in history to be considered as a cause for cancer [11]. Acute toxicity produces symptoms of nausea, flushing of skin, numbness and tingling of extremities, muscle cramping and skin rash. Chronic consumption of high levels of arsenic in drinking water produces skin lesions, peripheral nervous system damage, bladder, lung and skin cancers [12-14]. Lower birth weights have been reported in multiple studies at both low and high exposures from drinking water consumption [12].

Fluorine

Fluorine, typically found in nature as fluoride, is another widespread chemical that has significant health impacts when found at high levels in drinking water and can co-occur with other contaminants, including arsenic. Fluoride occurs in natural water sourced worldwide, but is found at higher concentrations in groundwater in mountainous regions where bedrock has been formed from extensive marine deposits, regions with volcanic, granitic and gneiss rock [15,16].

Statistical models of high levels of fluoride in ground water show high concentrations throughout Central Asia, the Middle East, and North, East and Southern Africa, with significant high concentrations in Argentina, western United States and Mexico, Russia and Australia [17]. As with arsenic, exposure to fluoride is significant in populations relying on groundwater as their main source of drinking water, estimated to impact 200 million people in 25 countries, with 66 million in India alone [18].

Chronic consumption of high levels of fluoride causes chronic dental and skeletal fluorosis in humans. The majority of morbidity is due to skeletal fluorosis, a condition causing osteosclerosis, calcification of ligaments and tendons and deformed bone structure [15]. Advanced stages of fluorosis cause chronic pain to bones and joints and brittle bones are more likely to fracture. Increased water consumption in hot tropical climates as compared to consumption levels in cooler climates is a significant factor contributing to fluorosis [15,16].

Selenium

Selenium is an essential mineral to humans but ingestion at concentrations above 0.4 mg/day has negative health effects [19]. Selenium is widely distributed, but rarely occurs in Most selenium exposure occurs through consumption of foods rather than drinking water. When selenium occurs in high concentrations in surface waters, it is usually due to anthopogenic activities such as mining or irrigating with water in contact with selenium containing black shales, carbonaceous limestones, cherts and mudstone, or seleniferous coal [20]. High selenium levels due to anthropogenic activity have been reported in California, India and China.

Chronic exposure to subacute concentrations of selenium leads to brittle hair and nails, skin lesions and neurotoxicity [21,22]. Acute exposure to selenium produces dizziness, local or generalized tremors and convulsions [22].

Barium

Naturally, barium is found in low to moderate concentrations in the environment. Barium is present in nearly all surface waters but reaches levels above recommended guidelines in surface and groundwater through water rock interactions that depend on the mineral matrix and physiochemical conditions. Water rock interactions with black shales, volcanic rock and deep wells associated with bedrock containing high concentration of barium have led to high levels of barium in ground and surface waters [23]. Industrial and medical uses of barium have more than doubled over the last 40 years [24], increasing concentrations in industrial effluent and toxic waste sites. Industrial uses of barium in manufacturing of petroleum and plastics have increased point sources of barium.

Acute exposure to barium is the basis for much of the guidelines in drinking water as human chronic exposure has not been well studied [23]. Acute toxicity, primariy from occupational exposure, has led to serious effects on heart rhythm, elevated blood pressure, gastrointestinal disturbances, and partial or total paralysis [21,24].

Boron

Boron concentrations in groundwater range widely from less than 0.3 to greater than 100 mg/L and are found in many continents where there are highly mineralized, carbonated waters [25]. In fresh surface waters, boron concentrations vary from less than 0.001 to 360 mg/L near boron-rich deposits in North America [25]. Boron levels above recommended standards are typically associate with higher salinity

groundwater [26], which is particularly problematic in coastal aquifers experiencing seawater encroachment [27]. Other natural sources of boron include fossil brines and geothermal fluids [28].

Human studies of boron toxicity have focused on oral intake of borax and boric acid, both common household products. Infants appear more sensitive to boron than adults. Acute toxicity causes generalized or alternating focal seizure disorders, gastrointestinal disturbances and irritability, with documented potential lethal doses at 3-6 g boric acid for infants and 5-20 g for adults [29]. Guidelines have been developed based on animal studies showing toxicity attacking the male reproductive tract, causing testicular lesions and developmental malformations in fetuses [25].

Mercury

Natural mercury is widely distributed due to atmospheric deposition of mercury through precipitation, but is one of the least abundant elements in crustal rocks [30]. A recent review estimated that 170 to 300 mg/acre from river discharge of naturally occurring mercury in soils and post-industrial atmospheric deposition in 'pristine' ecosystems, with 50% estimated to be natural mercury [31]. Sources of atmospheric mercury gas include volcanic eruptions, coal burning power plants, and reemission of terrestrial and aquatic mercury. Atmospheric deposition to ground water through deep groundwater discharge and another study suggested mercury mobility in coastal plain soils [30]. Anthropogenic sources of mercury from burning of coal and petroleum products distribute mercury worldwide and increase terrestrial and aquatic reemissions.

Most mercury exposure from oral ingestion of fish where high levels of methylmercury from bioaccumulation [32]. Acute ingestion of inorganic or organic forms of mercury results in shock, cardiovascular system collapse, renal failure and gastrointestinal damage [32] and is also a neurotoxin [33]. Inorganic forms of mercury accumulate in the kidneys.

Uranium

Most uranium in drinking water comes from natural sources and is found in groundwater supplies in a wide range of countries including Sweden, Finland, Norway, USA, Canada, India, and Brazil. Uranium exists as ²³⁸U, ²³⁵U and ²³⁴U isotopes, but is a health risk due to toxicity more than its radioactivity [34]. Nephritis is one of the main human health effects from exposure to uranium [35] and is listed as a cause for cancer in humans and animals by Health Canada [36]. In animal models other health effects including, developmental defects, genotoxicity, and reduced bone growth have been reported [37].

Radionuclides

Radioactive substances enter drinking water naturally through interactions with bedrock and artificially through radiation used for medical and industrial purposes as well as nuclear weapons testing and nuclear disasters [38]. Radiation doses from naturally occurring radionuclides are often higher than artificial radionuclides [38]. Most natural radionuclides come from the decay series of three primordial radioisotopes: ²³²Thorium, ²³⁵Uranium and ²³⁸Uranium [42].

Chemical	CAS ID	WHO guideline value (mg/L)	US EPA Maximum Contaminant Level (mg/L)	Health Canada Maximum Acceptable Concentrations (mg/L)	European Union (mg/L)	Health impacts
Antimony	7440-36-0	0.02	0.006	0.006	0.005	Microscopic changes in organs and tissues (thymus, kidney, liver, spleen, thyroid); Increase in blood cholesterol; decrease in blood sugar
Arsenic	7440-38-2	0.01 (A, T)	0.01	0.01	0.01	Cancer (lung, bladder, liver, skin) (classified as human carcinogen); Skin, vascular and neurological effects (numbness and tingling of extremities); Problems with circulatory systems
Barium	7440-39-3	1.3	2	1	-	Increases in blood pressure, cardiovascular disease
Boron	7440-42-8	2.4	-	5	1	Reproductive effects (testicular atrophy, spermatogenesis); Limited evidence of reduced sexual function in men
Mercury	7439-97-6	0.006	0.002	0.001	0.001	Irreversible neurological symptoms; Kidney damage
Selenium	7782-49-2	0.04 (P)	0.05	0.03	0.01	Chronic selenosis symptoms in humans following exposure to high levels; Hair or fingernail loss, tooth decay, weakened nails and nervous system disturbances at extremely high levels of exposure; numbness in fingers or toes; circulatory problems
Uranium	7440-61-1	0.03 (P)	0.03	0.02	-	Kidney effects (various lesions); Increased risk of cancer

TABLE 5.1. Regulatory Guidelines and Health Effects of Naturally Occurring Chemical Contaminants of Drinking Water

Note: Health effects summaries are adapted from WHO, US EPA and Health Canada guidelines [38-40].

Chemical	CAS ID	WHO guideline value (Bq/L)	US EPA Maximum Contaminant Level	Health Canada Maximum Acceptable Concentrations (Bq/L)
Alpha particles	alpha particles	0.5	15 picocuries per Liter (pCi/L)	-
Beta particles and photon emitters	beta particles	1	4 millirems per year	-
Radium 226	13982-63-3	1	5 pCi/L	0.5 Bq/L
Radium 228	15262-20-1	-	5 pCi/L	-
Lead 210	-	0.1	-	0.2 Bq/L
Uranium-238	-	1	-	-
Uranium-234	-	1	-	-
Thorium-230	-	1	-	-
Polonium-210	-	0.1	-	-
Thorium-232	-	1	-	-
Thorium-228	-	1	-	-

 TABLE 5.2. Regulatory Guidelines and Health Effects of Naturally Occurring Radionuclide Contaminants

 of Drinking Water

Note: Health effects summaries are adapted from WHO, US EPA and Health Canada guidelines [38-40].

Conclusions

Contamination of drinking water sources by naturally occurring chemicals are tied closely to their water-bedrock interactions and the composition of reduction-oxidation (redox) species present in the water source. Anthropogenic activities often increase concentrations of contaminants found in nature, either directly though industrial and wastewater effluents or agricultural runoff, or indirectly by increasing redox species that increase potential for release or availability of toxic contaminants occurring in ground and surface waters.

References

- [1] Naudet V, Revil A, Rizzo E, Bottero J-Y, Bégassat P. Groundwater redox conditions and conductivity in a contaminant plume from geoelectrical investigations. Hydrol Earth Syst Sci Discuss 2004;8:8-22.
- [2] Thompson T, Fawell J, Kunikane S, Jackson D, Appleyard S, Callan P, et al. Chemical safety of drinking water : assessing priorities for risk management 2007.
- [3] Smedley PL, Kinniburgh DG. A review of the source, behaviour and distribution of arsenic in natural waters. Appl Geochem 2002;17: 517-68. doi:Smedley, P.L.; Kinniburgh, D.G.. 2002 A review of the source, behaviour and distribution of arsenic in natural waters. Applied Geochemistry, 17 (5). 517-568. https://doi.org/10.1016/S0883-2927(02)00018-5.
- [4] Nordstrom DK. Worldwide Occurrences of Arsenic in Ground Water. Science 2002;296:2143-5. doi:10.1126/science.1072375.
- [5] Yunus M, Sohel N, Hore SK, Rahman M. Arsenic exposure and adverse health effects: a review of recent findings from arsenic and health studies in Matlab, Bangladesh. Kaohsiung J Med Sci 2011;27:371-6. doi:10.1016/j.kjms.2011.05.012.
- [6] Berg M, Tran HC, Nguyen TC, Pham HV, Schertenleib R, Giger W. Arsenic Contamination of Groundwater and Drinking Water in Vietnam: A Human Health Threat. Environ Sci Technol 2001;35:2621-6. doi:10.1021/es010027y.
- [7] Buschmann J, Berg M, Stengel C, Sampson ML. Arsenic and Manganese Contamination of Drinking Water Resources in Cambodia: Coincidence of Risk Areas with Low Relief Topography. Environ Sci Technol 2007;41:2146-52. doi:10.1021/es062056k.

- [8] McClintock TR, Chen Y, Bundschuh J, Oliver JT, Navoni J, Olmos V, et al. Arsenic Exposure in Latin America: Biomarkers, Risk Assessments and Related Health Effects. Sci Total Environ 2012;429:76–91. doi:10.1016/j.scitotenv.2011.08.051.
- [9] Hossain MF. Arsenic contamination in Bangladesh–An overview. Agric Ecosyst Environ 2006;113:1-16. doi:10.1016/j.agee.2005.08.034.
- [10] Smith AH, Lingas EO, Rahman M. Contamination of drinking-water by arsenic in Bangladesh: a public health emergency. Contamination of drinking-water by arsenic in Bangladesh: a public health emergency. Bull World Health Organ Bull World Health Organ 2000;78, 78:1093, 1093-103.
- [11] Neubauer O. Arsenical Cancer: A Review. Br J Cancer 1947;1:192-251.
- [12] Smith AH, Steinmaus CM. Health Effects of Arsenic and Chromium in Drinking Water: Recent Human Findings. Annu Rev Public Health 2009;30:107-22. doi:10.1146/annurev.publhealth.031308.100143.
- [13] WHO. Arsenic in Drinking-water. Background document for development of WHO Guidelines for Drinking-water Quality. 2011.
- [14] Saint-Jacques N, Parker L, Brown P, Dummer TJ. Arsenic in drinking water and urinary tract cancers: a systematic review of 30 years of epidemiological evidence. Environ Health Glob Access Sci Source 2014;13:44. doi:10.1186/1476-069X-13-44.
- [15] Fawell J, Bailey K, Chilton J, Dahi E, Fewtrell L, Magara Y. Fluoride in drinking-water. London, UK: WHO, IWA Publishing; 2006.
- [16] Brindha K, Elango L. Fluoride in Groundwater: Causes, Implications and Mitigation Measures. In: Monroy SD, editor. Fluoride Prop. Appl. Environ. Manag., 2011, p. 111-36.
- [17] Amini M, Mueller K, Abbaspour KC, Rosenberg T, Afyuni M, Møller KN, et al. Statistical Modeling of Global Geogenic Fluoride Contamination in Groundwaters. Environ Sci Technol 2008;42:3662-8. doi:10.1021/es071958y.
- [18] Ayoob S, Gupta AK. Fluoride in Drinking Water: A Review on the Status and Stress Effects. Crit Rev Environ Sci Technol 2006;36:433-87. doi:10.1080/10643380600678112.
- [19] Levander OA, Burk RF. Update of human dietary standards for selenium. Selenium, Springer, Boston, MA; 2006, p. 399-410. doi:10.1007/0-387-33827-6_35.
- [20] Winkel LHE, Johnson CA, Lenz M, Grundl T, Leupin OX, Amini M, et al. Environmental selenium research: from microscopic processes to global understanding. Environ Sci Technol 2012;46:571-9. doi:10.1021/es203434d.
- [21] WHO. Barium in Drinking-water: Background document for development of WHO Guidelines for Drinking-water Quality. 2016.
- [22] Vinceti M, Mandrioli J, Borella P, Michalke B, Tsatsakis A, Finkelstein Y. Selenium neurotoxicity in humans: bridging laboratory and epidemiologic studies. Toxicol Lett 2014;230:295-303. doi:10.1016/j.toxlet.2013.11.016.
- [23] Kravchenko J, Darrah TH, Miller RK, Lyerly HK, Vengosh A. A review of the health impacts of barium from natural and anthropogenic exposure. Environ Geochem Health 2014;36:797-814. doi:10.1007/s10653-014-9622-7.
- [24] Moffett D, Smith C, Stevens Y-W, Ingerman L, Swarts S, Chappell L. Toxicological Profile: Barium. 2007.
- [25] WHO. Boron in Drinking-water: Background document for development of WHO Guidelines for Drinking-water Quality. 2009.
- [26] Weinthal E, Parag Y, Vengosh A, Muti A, Kloppmann W. The EU Drinking Water Directive: the boron standard and scientific uncertainty. Eur Environ 2005;15:1-12. doi:10.1002/eet.369.
- [27] Vengosh A, Kloppmann W, Marei A, Livshitz Y, Gutierrez A, Banna M, et al. Sources of salinity and boron in the Gaza strip: Natural contaminant flow in the southern Mediterranean coastal aquifer. Water Resour Res 2005;41:W01013. doi:10.1029/2004WR003344.
- [28] Vengosh A, Kolodny Y, Spivack AJ. Ground-water pollution determined by boron isotope systematics 1998.
- [29] Litovitz TL, Klein-Schwartz W, Oderda GM, Schmitz BF. Clinical manifestations of toxicity in a series of 784 boric acid ingestions. Am J Emerg Med 1988;6:209-13.
- [30] Barringer JL, Szabo Z, Reilly PA. Occurrence and Mobility of Mercury in Groundwater. Curr Perspect Contam Hydrol Water Resour Sustain 2013. doi:10.5772/55487.
- [31] Kocman D, Wilson S, Amos H, Telmer K, Steenhuisen F, Sunderland E, et al. Toward an Assessment of the Global Inventory of Present-Day Mercury Releases to Freshwater Environments. Int J Environ Res Public Health 2017;14:138. doi:10.3390/ijerph14020138.
- [32] WHO. Mercury in Drinking-water: Background document for development of WHO Guidelines for Drinking-water Quality. 2005.
- [33] Risher J, DeWoskin R. Toxicological Profile: Mercury. 1999.

- [34] Skeppström K, Olofsson B. Uranium and radon in groundwater An overview of the problem 2007:12.
- [35] WHO. Uranium in Drinking-water in Drinking-water: Background document for development of WHO Guidelines for Drinking-water Quality. 2005.
- [36] Canada H. Uranium in Drinking Water Document for Public Consultation. 2017.
- [37] Brugge D, deLemos JL, Oldmixon B. Exposure Pathways and Health Effects Associated with Chemical and Radiological Toxicity of Natural Uranium: A Review. Rev Environ Health 2005;20. doi:10.1515/REVEH.2005.20.3.177.
- [38] WHO. Guidelines for drinking-water quality: fourth edition incorporating the first addendum. Geneva: World Health Organization: 2017.
- [39] US EPA O. Drinking Water Requirements for States and Public Water Systems. US EPA 2015. https://www.epa.gov/dwreginfo (accessed February 12, 2018).
- [40] Health Canada. Guidelines for Canadian Drinking Water Quality Summary Table. Ottawa, Ontario: Water and Air Quality Bureau, Healthy Environments and Consumer Safety Branch, Health Canada; 2017.
- [41] EU. European Union (Drinking Water) Regulations 2014. 2014.
- [42] Dinh Chau N, Dulinski M, Jodlowski P, Nowak J, Rozanski K, Sleziak M, et al. Natural radioactivity in groundwater a review. Isotopes Environ Health Stud 2011;47:415-37. doi:10.1080/10256016.2011.628123.

Chapter 6 Emerging Chemical Contaminants in Drinking Water

The number of chemicals produced by humans has increased exponentially over the last few decades and the possible combinations and arrangements for new unique chemicals formulations are nearly infinite. Regulations and guidelines for contaminants in drinking water set by WHO and country regulatory bodies cover a wide range of chemicals numbering in the hundreds. The American Chemical Society's Chemical Abstract Service has registered 142 million unique organic and inorganic chemicals. The number of chemicals monitored and regulated are only a fraction of the chemicals present in surface and ground waters. The number and amounts of those chemicals in drinking water remain unknown and are constrained by the ability of regulatory bodies and scientists to detect and monitor the vast number of potential contaminants. Generally, there is a lack of policy requiring new chemical additives to be tested for safety before approval for commercial use. Companies that produce chemicals affecting humans through the environment have far lower requirements than drug, vaccine, or medical device manufacturers, even though the consequences of exposure may be equally dangerous.

The body of literature around emerging pollutants or micropollutants captures compounds that are present at relatively low concentrations and are difficult to remove during drinking and wastewater treatment [1]. Emerging chemicals include micropollutants that originate from both natural and anthropogenic sources. The major groups of anthropogenic chemicals including pharmaceuticals, personal care products (PCPs), surfactants, pesticides and industrial chemicals such as flame retardants and plasticizers. More recently microplastics or plastic particles <5mm are of rising concern in fresh and marine water bodies [2] and present in drinking water, food, and air [3].

Since wastewater treatment plants are not typically equipped to remove micropollutants, their presence is widespread, though at low levels in many cases, in water bodies receiving effluent from wastewater treatment plants [1,4]. Pharmaceuticals, surfactants, PCPs, and various industrial chemicals enter the wastewater treatment plants through sewage and gray water and are discharged into surface waters without being metabolized or removed from effluent [5]. Though they may be diluted and present in low concentrations, some will end up entering drinking water treatment plants which are not equipped to remove micropollutants and are not required to monitor them before distribution to end point users.

Though there is much concern over the fact that emerging chemicals are ubiquitous in surface water and groundwater [6], the health impacts of exposure to human populations is largely unknown. Generating proof of chemical safety or risk for human health is economically and logistically prohibitive due to the requirement for large, lengthy cohort studies to capture potential later life outcomes. There is a lack of political will in investing in these studies since connecting exposure to health effects is more complex and dependent on environmental factors. Endocrine disruptors are the most likely to be connected to immune deficiency, neurological disorders, child development, high rates of infertility, low sperm count and ovarian, prostate, testicular and breast cancers [7]. Anti-inflammatory drugs, analgesics, antibiotics, lipid regulators, hormones, beta-blockers and cancer therapeutics are the most frequently detected pharmaceuticals in environmental waters [8].

Future Monitoring and Regulation Strategies

The formation of regulations are often centered on 'legacy chemicals' that have been banned or their usage is in decline but they still persist in the environment. The chemicals covered in this report represents some of those legacy chemicals, but also many relevant new priority chemicals. Regulations and guidelines based on legacy and priority chemicals without updates that keep pace with the roughly 2,000 new chemicals that are introduced for use each year, prevent adaptive regulation to new and emerging contaminants [9].

In response to the rapid introduction and increased use of chemicals with potential to contaminate drinking water sources, new regulations have been introduced to accelerate the number of chemicals that are reviewed by the US EPA [10]. The European Union-funded SOLUTIONS project is charged with more comprehensive monitoring of individual chemicals and improving sampling and analytical chemistry methods to detect lower concentrations of emerging and priority pollutants [9].

Recommendations from SOLUTIONS include expanding monitoring and risk assessment from a focus on individual chemicals to mixtues of chemicals occurring in freshwater [9]. A sample of freshwater from a water body may contain tens of thousands of chemicals, including unknown chemicals. Testing for chemical mixtures and grouping them by concentration levels or by toxicological groups in combination with site specific characteristics could provide chemical "fingerprints" assigned to anthropogenic activities (e.g. cultivation of specific crops, specific industries, urban wastewater effluents) in a basin or catchment area [9].

Studies that sample a wider range of chemical pollutants beyond priority or regulated chemicals and studies that test chemical mixtures often result in different risk assessments than tests for individual chemicals alone and allow for consideration of combined toxicological effects of exposure to multiple chemicals. In a study of ecotoxicity in of several anti-inflammatory drugs against algae species, toxicity was higher for the chemical mixtures than for the individual drugs at the same concentrations [11].

Another recommendation from the SOLUTIONS research group is the use of batteries of bioassays on molecular, cellular and whole organism levels to test chemical mixtures, a method know as effectdirected analysis. Traditionally, animal models such as rats and mice are used as bioassays to form many of the established guidelines and regulations. In effect-directed analysis a set of bioassays testing for a range of toxicity measures including mortality, cytotoxicity, effects on metabolism, genotoxicity, endocrine disruption and enzyme inhibition [12]. Chemical mixtures are tested by fractionation, or dividing the samples into portions by chemical gradients, allowing for testing the effects of more than one chemical in the mixture at a time. This process adds more flexibility in monitoring and identifying a more realistic picture of ecotoxicity and human health risks that is potentially cost-effective [9].

While these methods are very promising in providing a more accurate picture of the health risk from exposure to chemical contaminants to drinking water sources, they are fairly novel in their application to governmental monitoring and regulations. Advances in analytical chemistry and bioassays will need to be developed and tailored to the diversity of freshwater systems worldwide. Methods will also need to be cost-effective and affordable in order to be available to and implemented by lower income countries.

A comprehensive assessment of all chemical contaminants is beyond the scope of global studies of water quality, though promising new methods allowing for measuring chemical mixtures and using new

bioassays are promising for expanding the scope of risk assessment and monitoring of freshwater. Consideration of contexts and the types of comparisons that can be made within and between individual freshwater systems and regions will be important in selecting the correct number and composition of indicators of chemical contamination. Contextual information about potential sources of contamination in freshwater systems is essential to an accurate understanding of human health risks and appropriate policy responses to mitigating these risks, regardless of the composition of chemical contaminant sampling.

References

- Luo Y, Guo W, Ngo HH, Nghiem LD, Hai FI, Zhang J, et al. A review on the occurrence of micropollutants in the aquatic environment and their fate and removal during wastewater treatment. Sci Total Environ 2014;473-474:619-41. doi:10.1016/j.scitotenv.2013.12.065.
- [2] Thompson RC, Moore CJ, vom Saal FS, Swan SH. Plastics, the environment and human health: current consensus and future trends. Philos Trans R Soc B Biol Sci 2009;364:2153-66. doi:10.1098/rstb.2009.0053.
- [3] Rist S, Carney Almroth B, Hartmann NB, Karlsson TM. A critical perspective on early communications concerning human health aspects of microplastics. Sci Total Environ 2018;626:720-6. doi:10.1016/j.scitotenv.2018.01.092.
- [4] Stackelberg PE, Furlong ET, Meyer MT, Zaugg SD, Henderson AK, Reissman DB. Persistence of pharmaceutical compounds and other organic wastewater contaminants in a conventional drinking-water-treatment plant. Sci Total Environ 2004;329:99-113. doi:10.1016/j .scitotenv.2004.03.015.
- [5] Bolong N, Ismail AF, Salim MR, Matsuura T. A review of the effects of emerging contaminants in wastewater and options for their removal. Desalination 2009;239:229-46. doi:10.1016/j.desal.2008.03.020.
- [6] Lapworth DJ, Baran N, Stuart ME, Ward RS. Emerging organic contaminants in groundwater: A review of sources, fate and occurrence. Environ Pollut 2012;163:287-303. doi:10.1016/j.envpol.2011.12.034.
- [7] Tijani JO, Fatoba OO, Babajide OO, Petrik LF. Pharmaceuticals, endocrine disruptors, personal care products, nanomaterials and perfluorinated pollutants: a review. Environ Chem Lett 2016;14:27-49. doi:10.1007/s10311-015-0537-z.
- [8] Nikolaou A, Meric S, Fatta D. Occurrence patterns of pharmaceuticals in water and wastewater environments. Anal Bioanal Chem 2007;387:1225-34. doi:10.1007/s00216-006-1035-8.
- [9] Altenburger R, Ait-Aissa S, Antczak P, Backhaus T, Barceló D, Seiler T-B, et al. Future water quality monitoring Adapting tools to deal with mixtures of pollutants in water resource management. Sci Total Environ 2015;512-513:540-51. doi:10.1016/j.scitotenv.2014.12.057.
- [10] Shimkus J. H.R.2576 114th Congress (2015-2016): Frank R. Lautenberg Chemical Safety for the 21st Century Act 2016. https://www .congress.gov/bill/114th-congress/house-bill/2576 (accessed May 16, 2018).
- [11] Cleuvers M. Mixture toxicity of the anti-inflammatory drugs diclofenac, ibuprofen, naproxen, and acetylsalicylic acid. Ecotoxicol Environ Saf 2004;59:309-15. doi:10.1016/S0147-6513(03)00141-6.
- [12] Brack W, Ait-Aissa S, Burgess RM, Busch W, Creusot N, Di Paolo C, et al. Effect-directed analysis supporting monitoring of aquatic environments An in-depth overview. Sci Total Environ 2016;544:1073-118. doi:10.1016/j.scitotenv.2015.11.102.

Chapter 7 Indicators of Water Quality

Introduction

Freshwater lakes and rivers are essential sources of drinking water as well as water necessary for power generation, manufacturing and irrigation for crops. Maintaining safe water sources is beneficial to humans as well as the biota that maintain ecosystem services that support improved water quality. The cleaner the source of water for drinking or other activities, the less resources and energy are needed for removing contaminants and the less risk there is to human health [1]. Using surface waters as a source of drinking water requires quality monitoring to prevent exposure to contaminants during consumption and to ensure that treatment facilities have the capacity to remove contaminants.

Water quality is determined by the natural geology of bedrock and soils, and human activities within the lake catchment, including rivers and streams. Freshwater quality is a function both of the natural state of water body, which in some cases may not be suitable for human consumption because of high levels of naturally occurring heavy metals, such as arsenic or fluoride, or salinity, and a function of various human activities that add chemical contaminants directly or accelerate naturally occurring contaminants to levels that are dangerous to human health. Even when present, wastewater treatment facilities can still be a source of human pollution. Based on model estimates from 108 low and lowmiddle income countries, a hypothetical scenario where global access to piped sewage or septic was assumed, current capacity for wastewater treatment would only remove 58% of phosphorus, 58% of nitrogen, reduce biochemical oxygen demand (BOD) by 68% and fecal coliforms by 80% [2].

Under international, national and local regulations, lake and river water quality is monitored to assess risks to human health. Physical and chemical indicators of water quality are widely used to monitor and assess the health of freshwater lakes and rivers. The United Nations Environment Program Global Environment Monitoring System (GEMS)/Water Programme [3] is a global database of approximately 3,000 monitoring stations of rivers, lakes, reservoirs and wetlands from 75 countries [4]. The database contains data for about 250 parameters including many of those proposed for this World Bank led analysis. The database is composed of data voluntarily contributed by official national agencies and availability of consistent data for all parameters is limited.

A key example of a comprehensive national assessment of freshwater quality is that undertaken by the United States Environmental Protection Agency (USEPA). USEPA completed two rounds of lake water quality sampling across 1,038 lakes in the United States of America (USA) in 2007 and 2012 [5]. The lakes were sampled for 12 indicators including biological indicators (benthic macroinvertebrates and zooplankton), chemical indicators (acidification, nitrogen, dissolved oxygen, and phosphorus), and human use indicators (atrazine, mercury, chlorophyll-a, cyanobacteria, and microcystin).

The objective of this work is to summarize and assess a list of water quality parameters and what level of information about health risks from specific contaminants can be gleaned from them. With a few

exceptions, these water quality measures rarely have health guidelines associated with them because they measure conditions that may have a range of underlying causes that could be natural or caused by human activities. In general, the threats to human health as indicated by measures of water quality are associated with 1) identification of sources of pollution, 2) treatability of water, specifically regarding the formation of disinfection by-products, and 3) direct health risks from fecal contamination and nitrates.

Water Quality Parameters

Water quality parameters used in monitoring and assessment measure biological and physiochemical aspects of water. Nine parameters are under consideration for monitoring freshwater quality (Table 7.1). These parameters are commonly used to assess aquatic ecosystem health and potential human health risks associated with contact or consumption of water from a body of water. Parameters can be used to identify and monitor sources of contamination within a body of water and also for general comparisons to other bodies of water when standardized to account for expected local levels of chemicals and biological life under natural circumstances.

Physiochemical Parameters

Temperature

The water temperature of lakes influences the rate of chemical reactions, growth of microbial populations, the rate of photosynthesis of algae and macrophytes, and disease transmission within aquatic biota. Temperature also determines the amount of dissolved oxygen and other chemicals that are present in solution and available for biological life and chemical reactions. Temperature will vary along the depth of the water column and across seasons. Though temperature of lakes does not have direct impacts on human health from the standpoint of consuming hotter or colder drinking water (Table 7.1), it is an important factor for understanding and predicting the natural presence of biological and chemical contaminants, influencing oxidation reactions and degradation of parent contaminants.

Rising temperatures of surface waters due to human industrial activity and climate change may increase the likelihood that disinfection by-products, such as bromate, triahalomethanes (THMs), haloacetic acids (HAAs), halogenated acetonitriles and N-Nitrosodimethylamine (N-NDMA), formed during and distributed after drinking water treatment [6,7]. Temperature increases of a few degrees have been shown to increase formation and variability of disinfection by-products in water distribution systems [8].

pН

The level of acidity in water is commonly measured by pH values. Low pH can decrease productivity and is typical naturally in peat bogs and some wetlands. The alkalinity of water bodies refers to its ability to buffer against acids, including natural and anthropogenic acidity in precipitation. Though there are now well-established health-based guidelines waters between 6.5 and 8.5 are considered of good water quality (Table 7.1).

Indicator	Global Lakes Data	Brazil	Mexico	India	Mekong	WHO guideline value (mg/L)	US EPA Maximum Contaminant Level (mg/L)	Maximum Acceptable Concentrations (mg/L)	EU Parameter (mg/L)	Quality of human health risk evidence	Health impacts
General physiod	x	У		Х	Х					plausible	Increasing temperature of source waters can contribute to formation of disinfection by-products during drinking water treatment
рН		Х		Х	Х			7.0-10.5 (No units)		plausible	The control of pH is important to maximize treatment effectiveness, control corrosion and reduce leaching from distribution system and plumbing components.
Alkalinity/ acidity					Х					plausible	The control of acidity and alkalinity is important to maximize treatment effectiveness, control corrosion and reduce leaching from distribution system and plumbing components
Water clarity ar	d color										
Coloured dissolved organic matter	Х									plausible	Increasing organic matter in source waters can contribute to formation of disinfection by-products during drinking water treatment
Dissolved solids in water			Х			Aesthetic recommendation: ≤ 600; greater than 1000 considered unpalatable		Aesthetic guideline: ≤ 500		plausible	Naturally occurring; sewage, urban and agricultural runoff, industrial wastewater; Based on taste; TDS above 500 mg/L results in excessive scaling in water pipes, water heaters, boilers and appliances; TDS is composed of calcium, magnesium, sodium, potassium, carbonate, bicarbonate, chloride, sulphate and nitrate.
Optical Water Type Class	Х									plausible	Increasing organic matter in source waters can contribute to formation of disinfection by-products during drinking water treatment
Total suspended matter concentration	Х				Х					plausible	Increasing organic matter in source waters can contribute to formation of disinfection by-products during drinking water treatment
Turbidity	Х	Х								plausible	Increasing organic matter in source waters can contribute to formation of disinfection by-products during drinking water treatment

TABLE 7.1. Physiochemical Water Quality Measures and Related Health and Aesthetic Guidelines for Drinking Water from WHO, US EPA, Health Canada and the EU

Water clarity and color

Measures of water clarity do not have health-based guidelines for drinking water (Table 7.1). However, aesthetics on color of drinking water are discussed in WHO Drinking Water Quality Guidelines (DWQG) [9]. Measures of turbidity, total dissolved solids and total suspended matter are consistently collected to assess water quality worldwide. These measures represent levels of organic matter present in water which can be critical to decisions about the suitability of a water source for treatment. Optical water type classification approaches offer potential in monitoring these parameters and others such as cyanobacteria concentrations using analyses of remotely sensed reflectance data. Initially used primarily for marine systems, analytic techniques are being adapted to inland freshwater systems [10].

Monitoring solids and organic matter can be used to identify pollution from sewage and municipal wastewater, runoff form agricultural and mining activities, oil extraction and refining, pulp and paper mills, metallurgy, machine production and textile manufacturing [11]. Pathogens and chemicals can attach to suspended solids through sorption and can be partially protected from disinfection and oxidation during drinking water treatment [12]. Thus, high organic matter can also indicate high pathogen and fecal contamination loads and protect some pathogens against chlorination. Measuring solid concentrations in water can also indicate the presence of metals in suspension or solution from natural or human activity.

High levels of organic matter are a challenge to drinking water treatment. If not removed completely before disinfection stages, they interact with disinfection chemicals and processes and can form disinfection by-products that are hazardous to human health, including THMs, HAAs when free chlorine is the main disinfectant and halogenated acetonitriles and N-NDMA when chloramines are used as disinfectants [7]. In addition to human activities, extreme rain events can increase soil erosion and threaten human drinking water by increasing solids and organic matter content of source waters [6].

Conductivity and Major ions

The ability of a water body to conduct electricity is measured as conductivity and corresponds to ion levels present in water. Major cation and anion levels determine the conductivity of water and determine overall salinity. Levels of conductivity and salinity can indicate contamination from wastewater and industrial effluents and agricultural runoff, especially when compared against benchmark or references for expected natural concentrations of cations and anions. Effluents and runoff could increase conductivity by contributing chloride, phosphate and nitrate ions while oils or some organic compounds may decrease conductivity, despite increases in total dissolved solids. Addition of contextual data and temporal monitoring of conductivity can help detect influxes of effluents harmful to human health.

Four major cations are commonly used in water quality assessments including calcium, magnesium, sodium and potassium. Calcium and magnesium levels are collectively or individually measures of hardness. Though there are no health-based guidelines, there are several aesthetic guidelines established for water hardness as measured by calcium and magnesium (Table 7.2). Major anions including chloride and sulfate also lack health-based guidelines but have suggested aesthetic guidelines due to odor and taste preferences of users.

Nitrogen and Phosphorus

Of the chemical measures proposed, only nitrate has well established health-based guidelines for drinking water. Excess nitrates in water are of major concern for direct human ingestion and have wide ranging negative impacts on ecosystem health, drinking water treatment systems, and wastewater treatment. Preventing nitrate and nitrite exposure in drinking water is best managed by reducing concentrations in source waters due to difficulties in removing them from drinking water [9].

In addition to fertilizer sources, nitrate, nitrite and other access nutrients can also enter drinking water supplies through other nonpoint and point sources of untreated animal and human waste. Nitrates have been widely detected in numerous studies of domestic wells in concentrations exceeding recommended drinking water guidelines [13,14] and are often associated with mixtures of other volatile organic compounds and pesticides [15,16].

Nitrates and nitrites ingested through drinking water can induce methemoglobinemia in adults and is particularly dangerous for bottle-fed infants between the ages of 3-6 [17]. Methemoglobin forms when nitrite oxidizes ferrous iron of hemoglobin and prevents oxygen transport [18]. Some nitrate is converted into nitrite through endogenous bacteria in the saliva and intestinal tract. At above 60%, there is a high risk of morality [18]. Treating water oxidizes nitrite to nitrate, the less toxic form, and reduce gastroenteritis which is a risk factor for methemoglobinaemia in infants. Subchronic exposures to nitrate and nitrite have been linked to problems with thyroid function and thyroid hormone concentration through nitrate inhibition of iodine uptake. Chronic exposures to nitrate and nitrite have been linked to conclude a causal mechanism. Nitrite can form N-nitroso compounds, some of which have been shown to be carcinogenic to humans. As a result, most regulatory bodies have set health-based guidelines for nitrite and nitrate (Table 7.2).

Nitrogen-fixing bacteria and some cyanobacteria can convert dissolved nitrogen (N_2) into ammonium. Although there are no health-based guidelines for ammonium, there are recommended aesthetic guidelines because of taste and odor issues for users.

High levels of phosphorus in waters can cause increased productivity and is commonly present around areas of intensive fertilizer use in agricultural systems. Like nitrogen, phosphorus is a key nutrient and can limit or increase primary productivity through growth and large populations of algae, macrophytes and cyanobacteria. There are no health or aesthetic guidelines for phosphorus, but it can indicate high levels of agricultural and wastewater discharge into water sources.

Nitrogen or phosphorus are two limiting factors that when released into aquatic ecosystems in excess can cause increased primary productivity, typically photosynthetic organisms including phytoplankton, cyanobacteria, algae and macrophyte plants [19]. The most common symptom of eutrophication in a water body occurs when excessive growth of primary producers reaches levels that significantly reduces oxygen necessary for supporting biota in aquatic ecosystems. The biological indicators discussed below

Oxygen

Biochemical oxygen demand (BOD) and chemical oxygen demand (COD) are measures of the amount of oxygen needed to decompose the amount of organic matter in water. COD also includes oxygen required

TABLE 7.2. Chemical Water Quality Measures and Related Health and Aesthetic Guidelines for Drinking Water from WHO, US EPA, Health Canada and the EU

Indicator	Global Lakes Data	Brazil	Mexico In	dia Mek	ong	WHO guideline value (mg/L)	US EPA Maximum Contaminant Level (mg/L)	Health Canada Maximum Acceptable Concentrations (mg/L)	EU Parameter (mg/L)	Quality of human health risk evidence	Health impacts
Conductivity	and Majo	r ions									
Calcium				X	(Aesthetic guideline: 100-300				plausible	High levels can increase corrosion of pipes resulting in releas of heavy metals that have associated health risk.
Chloride				×	(Aesthetic guideline: ≤ 250		Aesthetic guideline: ≤ 250	Aesthetic guideline: 250	suggestive	Chloride in surface and groundwater from both natural and anthropogenic sources, such as run-off containing road de-icin salts, the use of inorganic fertilizers, landfill leachates, septic tank effluents, animal feeds, industrial effluents, irrigation drainage, and seawater intrusion in coastal areas
Conductivity				x ×	(plausible	A general indicator of human pollution, as human disturbance tends to increase dissolved solids and conductivity of water. High levels can increase corrosion of pipes resulting in release of heavy metals that have associated health risk.
Magnesium				Х	(plausible	High levels can increase corrosion of pipes resulting in release o heavy metals that have associated health risk.
Potassium				Х	(plausible	
Sodium				Х	(plausible	High levels are used to indicate pollution from urban runoff, industrial effluent, leachate from landfills, private and municipal septic system effluent and some agricultural chemicals.
Sulphate				Х	(Aesthetic guideline: ≤ 500		plausible	High levels (above 500 mg/L) can cause physiological effects such as diarrhoea or dehydration
Nitrogen and	phospho	rus									
Ammonium				Х		Aesthetic guideline: 35			Aesthetic guideline: 0.3	suggestive	Ammonia is toxic to fish, but does not pose a direct risk to huma health in concentrations found in surface waters. High levels of ammonia in source water can contribute to the formation of nitrogenous disinfection by-products during treatment.

table continues next page

64

TABLE 7.2. continued

Indicator	Global Lakes Data	Brazil	Mexico	India	Mekong	WHO guideline value (mg/L)	US EPA Maximum Contaminant Level (mg/L)	Health Canada Maximum Acceptable Concentrations (mg/L)	EU Parameter (mg/L)	Quality of human health risk evidence	Health impacts
Nitrate		Х		Х	X	50 (as NO3–)	10 as nitrate- nitrogen	45 as nitrate; 10 as nitrate- nitrogen	50 (as NO3–)	strong	Infants below the age of six months who drink water containing nitrate in excess of the MCL could become seriously ill and, if untreated, may die. Symptoms include shortness of breath and blue-baby syndrome; Effects on thyroid gland function in bottle-fed infants; Classified as possible carcinogen under conditions that result in endogenous nitrosation
Nitrogen					Х					suggestive	Nitrates and nitrites are toxic to human health, elemental nitrogen is not dangerous at natural levels.
Phosporus		Х			Х					plausible	A major driver of eutrophication which could indicate higher organic matter concentrations, leading to higher probability of formation of disinfection by-products as well as providing a substrate for sorption of pathogenic microbes and chemicals
Oxygen											
BOD		Х		Х	Х					plausible	Biochemical Oxygen Demand (BOD) at high levels reflects high microbial growth. Higher levels are an indicator of influxes of nutrients such as wastewater or industrial effluents high in nutrients.
COD		Х	Х		Х					plausible	Chemical Oxygen Demand (BOD) at high levels reflects high levels of oxidizable pollution which can be organic or inorganic. Includes BOD but includes non-biological chemical oxidation
Dissolved Oxygen				Х	Х					plausible	Indicator of eutrophication associated with high nutrient influxes. Eutrophication could indicate higher organic matter concentrations, leading to higher probability of formation of disinfection by-products as well as providing a substrate for sorption of pathogenic microbes and chemicals

Note: Each parameter is graded by the level of evidence supporting it has presented a health risk if indicating poor quality. Strong indicates a parameter that has a large body of evidence supporting a health guideline. Suggestive indicates the parameter is often associated with specific chemical contaminants or disinfection by-product of health concern. Plausible indicates that the parameter is less often associated with a specific chemical contaminants or disinfection by-product of health concern. Plausible indicates that the parameter is less often associated with a specific chemical contaminant or group of contaminants. to break down inorganic chemicals including nitrate, nitrite, or ammonium in addition to organic matter decomposition. Both are used to measure and monitor the amount of organic matter and inorganic pollutants present in waste water or contamination from wastewater and industrial effluents. It is often used to identify the points of wastewater and industrial effluents within the same body of water [20].

Oxygen availability is one of the most important measures of a healthy ecosystem as it is necessary for aerobic organisms as well as many inorganic chemical reactions. High levels of dissolved oxygen generally indicate good water quality. High levels of salinity and temperature decrease dissolved oxygen levels in water. High productivity due to algae, cyanobacteria or floating vegetation can decrease dissolved oxygen levels as plant material as cells die and are decomposed at the bottom of the lake, consuming oxygen.

Biological Parameters

Microbial indicators

Monitoring water for waterborne pathogens is most commonly done by detecting indicators of presence of fecal matter in water bodies. Total coliforms are a general indicator of contamination, but do not necessarily mean that the source is fecal matter as coliforms are also found in plants and soils and could indicate high levels of erosion. Fecal coliforms are a subgroup of coliforms that are commonly found in the feces and digestive systems of humans and animals. *Escherichia coli* (E. coli) is a taxonomic group of fecal coliforms, some of which can be pathogenic and is the most specific proxy indicator of fecal contamination in water.

Though generally not pathogenic, coliforms indicate potential presence of fecal pathogens that are responsible for high disease burden, particularly acute diarrheal mortality (2nd leading cause of death in children 1-59 months of age) [21], morbidity [22] and chronic stunting in children frequently exposed to enteric pathogens [23]. The recommended and regulatory guidelines are set at 0 / 100 mL for fecal coliforms and E. coli because of high burdens of disease and risk [9,17,24,25].

Floating vegetation

Floating vegetation are a group macrophyte that are found naturally on the surface of aquatic environments. The distribution and abundance of floating vegetation is controlled by presence of nutrients in the water column, temperature, light and water flow. Monitoring abundance over time can show influxes of nutrient, sediment and toxins. There is no direct human health risk associated with floating vegetation, but it abundance, especially changes in abundance are a significant indicator of eutrophication and overall aquatic ecosystem health.

Cyanobacteria

In lakes and rivers excess cyanobacterial (blue-green algae) blooms, including *Microcystis* and *Anabaena* spp. in temperate areas and *Cylindrospermopsis* spp originating in tropical areas [26,27] are indicators of eutrophication and can also produce cyanotoxins. Cyanotoxins include cyclic peptides, alkaloids, and lipopolysaccharides [28]. Of these, only microcystin-LR has a suggested WHO guideline (Table 7.3) [27]. Microcystins are acute hepatotoxins that impact the liver by inhibiting phosphatases and may be carcinogenic with chronic exposure at low doses [29]. Mycrocystin-LR is the most common isoform.

TABLE 7.3. Biological Water Quality Measures and Related Health and Aesthetic Guidelines for Drinking Water from WHO, US EPA, Health Canada and the EU
--

Indicator	Global Lakes Data	Brazil	Mexico	India	Mekong	WHO guideline value (mg/L)	US EPA Maximum Contaminant Level (mg/L)	Health Canada Maximum Acceptable Concentrations (mg/L)	EU Parameter (mg/L)	Quality of human health risk evidence	Health impacts
Chlorophyll-a (mean for the lake + maximum peak height)	Х									plausible	Indicator of eutrophication
Coli		Х				0 number /100 ml	0 number /100 ml	0 number /100 ml	0 number /100 ml	strong	Indicator of enteropathogens
Fecal coliform				Х	Х	0 number /100 ml	0 number /100 ml	0 number /100 ml	0 number /100 ml	strong	Indicator of enteropathogens
Floating cyanobacteria	Х									plausible	Certain species can produce cyanotoxins
Floating vegetation	Х									plausible	High levels are an indicatory of eutrophication which could include high nitrites, nitrates, or ammonium concentrations
Immersed Cyanobacteria	х									plausible	Certain species can produce cyanotoxins
Total coliform	Х			Х		0 number /100 ml	0 number /100 ml	0 number /100 ml	0 number /100 ml	strong	Indicator of enteropathogens

Note: Each parameter is graded by the level of evidence supporting it has presented a health risk if indicating poor quality. Strong indicates a parameter that has a large body of evidence supporting a health guideline. Suggestive indicates the parameter is often associated with specific chemical contaminants or disinfection by-product of health concern. Plausible indicates that the parameter is less often associated with a specific chemical contaminants.

Polluted agricultural runoff, seasonal patterns of rainfall, and regional distribution of cyanobacterial species contribute to the types of blooms and whether or not these blooms will produce toxins [29-31]. Increases in cyanobacteria concentrations can pose problems with water treatment facilities that must increase filtration capacity to ensure that cells are removed and also monitor that cyanotoxins are removed after cell lysis. Most conventional treatment facilities remove most major cyanotoxins including mycrocystins, but removal efficiency is not known for less studied cyanotoxins [32].

Recommendations

The set of water quality indicators (Tables 7.1-7.3) provide a general overview of water quality as related to *ecosystem health*, especially from agricultural runoff and wastewater pollution. However, of the proposed indicators only nitrates and fecal indicators are a direct indicator of risk to *human health* with specific health-based guidelines that permit an estimation of risk based on exposure levels. Faecal indicator bacteria – *such as E. coli* – offer well-established proxy indicators for faecal contamination of water with global guideline safe drinking water values of 0/100ML [9] based on observed dose-related increases in health risks for drinking water [33-35] and recreational waters [36]. One type of microcystin cyanobacteria also has a health-based guideline should it produce toxins. Other water quality parameters that measure the presence of organic matter, temperature and pH are all important in assessing risk of disinfection by-products that are hazardous to human health and that form during water treatment [6,7].

Specific information on the distribution, number and abundance of contaminants a river or lake drainage basins is the most effective way to optimize human health assessment and facilitate the most effective policy recommendations. However, tests for specific contaminants can be expensive and presents logistical challenges for consistent and frequent monitoring across large watershed areas. The set of water quality measures presented here are frequently used to locate the sources of pollution within a river or lake basin [20,37] and are used to measure seasonal and temporal variation in pollution inputs [38-40], but offer only a general, qualitative assessment of human health risk based on assumptions about quality changes associated with natural and human impacts. The addition of indicators appropriate for remote sensing detection offers the ability to show larger scale changes over individual monitoring stations while detailed data on human activity such as spatial information on the types and intensity of activities [41] can further guide testing for specific contaminants.

Measurement and determination of the impact of human activity on fresh surface water quality must account for underlying natural conditions which vary significantly by setting. Any measurement must be compared and standardized against the natural signature of indicators without influence from anthropogenic activities. Environmental factors such as climate, seasonality, composition of bedrock, groundwater flow, surface soil runoff, atmospheric deposition, wind erosion, and the composition of biological life all influence the natural water quality of a lake independent of human activity. Human inputs to surface waters from agriculture, industrial, and domestic activities should be considered in the context of the natural water quality conditions. The USEPA assessment benchmarks were established based on a set of reference lakes that represented water bodies in a state close to what would be expected naturally in each region of the US [5]. This allowed for water quality and lake condition indicators to be classified relative to a set of benchmarks that represented minimal human influences, permitting a meaningful assessment of changes associated with human activity.

Geospatial data on human activities relative to the geophysical and ecological characteristics of the watershed is critical to understanding the sources of contamination and can provide valuable insight into the types of contamination underlying water quality. In the US EPA National Lakes Assessment, characteristics of the lakeshore conditions including riparian vegetation cover, shallow water habitat, lakeshore disturbance, lake drawdown, and lake habitat were assessed in addition to biological and chemical indicators [5]. Seasonal changes in the water column of deeper rivers and lakes must also be considered as water movements between depths change during the season and could impact the detection of chemical contaminants.

In several studies in river and lake contexts, multivariate statistical and data reduction methods to group sampling sites into clusters based on water quality measures and relating the most important water quality measures to specific types of pollution inputs based on their pollution classification and qualitative information about human activities and pollution sources near each sampling point [20,37-40,42]. However, other than fecal contamination indicators, nitrate and some heavy metals, they do not test for or attempt to correlate measures to other specific guidelines on chemical contaminants.

Suggested Contaminants and Water Quality Parameters to Monitor

The advantage of using water quality measures presented here is their wide use as a result of being cost-effective as compared to more lab or equipment intensive measures for specific chemical contaminants. As a result of sharp increases in chemical manufacturing over the last few decades, the number of chemical contaminants entering the environment from human activities has increased faster than our ability to monitor them in then environment. In addition to currently regulated contaminants, there is a literature around 'emerging' contaminants that represent potentially hazardous species that are not yet monitored or regulated in surface water supplies. Broadly, these include pharmaceuticals, personal care products, flame retardants and microplastics [43,44]. Currently, these are not included in these recommendations, but interested in monitoring them is growing and are becoming more relevant to policies aimed at protecting drinking water sources.

Addition of a select number of commonly used contaminants that represent industrial effluent and pesticide residues would expand assessment of contaminants relevant to human health risk and provide more specific information on industrial and agricultural contamination risk not captured by the current candidate list. In the USEPA National Lakes Assessment, atrazine, nitrate, mercury and microcystin have enforced and recommended guidelines set by the EPA, WHO and other regulators. Conditions and indicators were compared to 2007 results and by major geographic regions, and categorized as least, moderately and most disturbed condition classifications based on reference lake benchmarks. The pesticide atrazine was monitored due to its popular and widespread use in US agricultural systems [5].

In the GEMS/Water Programme, organic contaminants such as polychlorinated biphenyls and oil and grease were selected to monitor contamination from industrial activity [3]. Heavy metals such as arsenic, mercury, fluoride, lead and selenium are also often measured as part of water quality assessments that can be present naturally, but could also be linked to mining activities in the lake catchment area [45-48]. The selection contaminants to be monitored directly could be tailored to the specific and relevant industrial activities present around the lake or in the lake catchment area. Polycyclic aromatic hydrocarbons (PAHs) are a useful group to consider adding to country monitoring agendas. PAHs are ubiquitous in the environment because most are considered pyrogenic, formed during the incomplete combustion of coal, wood and oil [49]. Others are considered petrogenic or released from crude oil or during the refining of oil. Some PAHs are also released biologically, during natural fires or from volcanic activity. An advantage of monitoring PAHs is that there is an extensive literature on using the PAH ratios to identify the sources of PAHs (pyrogenic or petrogenic) as water contaminants [49,50].

A common measure for assessing water quality in river systems is discharge and could be an important addition to the measures discussed in this chapter. Discharge is included in studies of river systems because the concentration and duration of contaminants in rivers is determined by the volume and speed of water flow. In most river systems discharge will vary with season and in all rivers with heavy rainfall events. Pejman et al. found that the contributions of different water quality measures varied according to season in their multivariate analysis of seasonality and spatial distribution of water quality parameters [39]. Discharge was an important variable in determining seasonal water quality in their study.

Global Water Quality Index

Comparing water quality between, and within, water bodies has been a challenge to large-scale studies attempting to draw conclusions about ecosystem and human health of water sources. Through the history of water quality assessment, several aggregate indices composed of multiple water quality parameters have been proposed to assess and compare the health aspects of water bodies [51,52]. One of the more versatile indices is the Canadian Water Quality Index (CCME-WQI) because health and aesthetic guidelines or background benchmarks of natural conditions can be used instead of weights established by expert panel, as had been used in some earlier indices [51]. After selecting the water quality measures to be included in the index (WQI), three factors based on comparisons to benchmarks or guidelines are included for each: 1) the percentage of measures that exceed benchmarks or guidelines (scope, F_1) over a period of time, 2) the percentage of records in a dataset that exceeded benchmarks (frequency, F_2), and 3) the amount that the measure exceeded a benchmark or guideline amplitude, F_3) [53].

WQI = 100 -
$$\left(\frac{\sqrt{F_1^2 + F_2^2 + F_3^2}}{1.732}\right)$$

The CCME-WQI was adapted for use across 75 countries under the GEMS/Water Programme with three different versions of the index adapted with WHO guidelines [53]. Two indices contained separate water quality measures: 1) the Health Water Quality Index (HWQI), based on health guidelines and 2) the Acceptability Water Quality Index (AWQI) based on acceptability or aesthetic guidelines. The third index, the Drinking Water Quality Index (DWQI) included all of the water quality measures included in the HWQI and AWQI together. In developing the indices, the indicators for fecal contamination were left out because levels almost always exceed 0 / 100 mL in most lakes and rivers [53]. The lack of health-related guidelines in Table 7.2 will not allow for calculation of a HWQI if indicators of fecal contamination are adjusted based on evidence-based criteria. Thus, use of a DWQI that includes both types of measures would be the most suitable for this group of measures.

Conclusion

A comprehensive assessment of all chemical contaminants is beyond the scope of global scale studies of water quality. Consideration of contexts and the types of comparisons that can be made within and between lakes and regions will be important in selecting the correct number and composition of indicators of water quality. With few exceptions, broad indicators of ecosystem health are suitable for the assessment of lakes as sources of water for human consumption before treatment and distribution. However, contextual information about potential sources of contamination in lakes is essential to an accurate understanding of human health risks and appropriate policy responses to mitigating these risks.

References

- Davies J-M, Mazumder A. Health and environmental policy issues in Canada: the role of watershed management in sustaining clean drinking water quality at surface sources. J Environ Manage 2003;68:273-86. doi:10.1016/S0301-4797(03)00070-7.
- [2] Fuhrmeister ER, Schwab KJ, Julian TR. Estimates of Nitrogen, Phosphorus, Biochemical Oxygen Demand, and Fecal Coliforms Entering the Environment Due to Inadequate Sanitation Treatment Technologies in 108 Low and Middle Income Countries. Environ Sci Technol 2015;49:11604-11. doi:10.1021/acs.est.5b02919.
- [3] United Nations Environment Programme, GEMS/Water Programme. Water Quality For Ecosystem and Human Health. United Nations Environment Programme Global Environment Monitoring System/Water Programme; 2006.
- [4] International Centre for Water Resources and Global Change. GEMStat global water quality database. GEMStat n.d. https://gemstat.org/ (accessed April 4, 2018).
- [5] USEPA. National Lakes Assessment 2012: A Collaborative Survey of Lakes in the United States. 2016.
- [6] Delpla I, Jung A-V, Baures E, Clement M, Thomas O. Impacts of climate change on surface water quality in relation to drinking water production. Environ Int 2009;35:1225-33. doi:10.1016/j.envint.2009.07.001.
- [7] Chowdhury S, Champagne P, McLellan PJ. Models for predicting disinfection byproduct (DBP) formation in drinking waters: A chronological review. Sci Total Environ 2009;407:4189-206. doi:10.1016/j.scitotenv.2009.04.006.
- [8] Rodriguez MJ, Sérodes J-B. Spatial and temporal evolution of trihalomethanes in three water distribution systems. Water Res 2001;35:1572-86. doi:10.1016/S0043-1354(00)00403-6.
- [9] WHO. Guidelines for drinking-water quality: fourth edition incorporating the first addendum. Geneva: World Health Organization: 2017.
- [10] Spyrakos Evangelos, O'Donnell Ruth, Hunter Peter D., Miller Claire, Scott Marian, Simis Stefan G. H., et al. Optical types of inland and coastal waters. Limnol Oceanogr 2018;63:846-70. doi:10.1002/lno.10674.
- [11] Chapman D, editor. Water quality assessments: a guide to the use of biota, sediments and water environmental monitoring. 2. ed. London: E & FN Spon; 1996.
- [12] WHO. Protecting Surface Water for Health: Identifying, Assessing and Managing Drinking-Water Quality Risks in Surface-Water Catchments. Geneva: World Health Organization; 2016.
- [13] DeSimone LA. Quality of Water from Domestic Wells in Principal Aquifers of the United States, 1991-2004. U.S. Department of the Interior and U.S. Geological Survey; 2009.
- [14] Goss MJ, Barry DAJ, Rudolph DL. Contamination in Ontario farmstead domestic wells and its association with agriculture:: 1. Results from drinking water wells. J Contam Hydrol 1998;32:267-93. doi:10.1016/S0169-7722(98)00054-0.
- [15] Ritter WF. Pesticide contamination of ground water in the United States A review. J Environ Sci Health Part B 1990;25:1-29. doi:10.1080/03601239009372674.
- [16] Squillace PJ, Scott JC, Moran MJ, Nolan BT, Kolpin DW. VOCs, Pesticides, Nitrate, and Their Mixtures in Groundwater Used for Drinking Water in the United States. Environ Sci Technol 2002;36:1923-30. doi:10.1021/es015591n.
- [17] Health Canada. Guidelines for Canadian Drinking Water Quality: Guideline Technical Document Nitrate and Nitrite. 2013.

- [18] Fewtrell L. Drinking-Water Nitrate, Methemoglobinemia, and Global Burden of Disease: A Discussion. Environ Health Perspect 2004;112:1371-4. doi:10.1289/ehp.7216.
- [19] Schindler D. W. Recent advances in the understanding and management of eutrophication. Limnol Oceanogr 2006;51:356-63. doi:10.4319 /lo.2006.51.1_part_2.0356.
- [20] Kazi TG, Arain MB, Jamali MK, Jalbani N, Afridi HI, Sarfraz RA, et al. Assessment of water quality of polluted lake using multivariate statistical techniques: A case study. Ecotoxicol Environ Saf 2009;72:301–9. doi:10.1016/j.ecoenv.2008.02.024.
- [21] Liu L, Oza S, Hogan D, Chu Y, Perin J, Zhu J, et al. Global, regional, and national causes of under-5 mortality in 2000-15: an updated systematic analysis with implications for the Sustainable Development Goals. The Lancet 2016;388:3027-35. doi:10.1016/S0140 -6736(16)31593-8.
- [22] Wolf J, Hunter PR, Freeman MC, Cumming O, Clasen T, Bartram J, et al. Impact of Drinking Water, Sanitation and Hand Washing with Soap on Childhood Diarrhoeal Disease: Updated Meta-Analysis and -Regression. Trop Med Int Health TM IH 2018. doi:10.1111/tmi.13051.
- [23] Guerrant RL, DeBoer MD, Moore SR, Scharf RJ, Lima AAM. The impoverished gut-a triple burden of diarrhoea, stunting and chronic disease. Nat Rev Gastroenterol Hepatol 2012;10:220-9. doi:10.1038/nrgastro.2012.239.
- [24] US EPA O. Drinking Water Requirements for States and Public Water Systems. US EPA 2015. https://www.epa.gov/dwreginfo (accessed February 12, 2018).
- [25] EU. European Union (Drinking Water) Regulations 2014. 2014.
- [26] Antunes JT, Leão PN, Vasconcelos VM. Cylindrospermopsis raciborskii: review of the distribution, phylogeography, and ecophysiology of a global invasive species. Front Microbiol 2015;6. doi:10.3389/fmicb.2015.00473.
- [27] WHO. Cyanobacterial toxins: Microcystin-LR in Drinking-water. Background document for development of WHO Guidelines for Drinking-water Quality. 2003.
- [28] Rastogi RP, Madamwar D, Incharoensakdi A. Bloom Dynamics of Cyanobacteria and Their Toxins: Environmental Health Impacts and Mitigation Strategies. Front Microbiol 2015;6. doi:10.3389/fmicb.2015.01254.
- [29] Neilan BA, Pearson LA, Muenchhoff J, Moffitt MC, Dittmann E. Environmental conditions that influence toxin biosynthesis in cyanobacteria. Environ Microbiol 2013;15:1239-53. doi:10.1111/j.1462-2920.2012.02729.x.
- [30] Conley DJ, Paerl HW, Howarth RW, Boesch DF, Seitzinger SP, Havens KE, et al. Ecology. Controlling eutrophication: nitrogen and phosphorus. Science 2009;323:1014-5. doi:10.1126/science.1167755.
- [31] Paerl HW, Huisman J. Climate change: a catalyst for global expansion of harmful cyanobacterial blooms. Environ Microbiol Rep 2009;1:27-37. doi:10.1111/j.1758-2229.2008.00004.x.
- [32] Merel S, Walker D, Chicana R, Snyder S, Baurès E, Thomas O. State of knowledge and concerns on cyanobacterial blooms and cyanotoxins. Environ Int 2013;59:303-27. doi:10.1016/j.envint.2013.06.013.
- [33] Moe CL, Sobsey MD, Samsa GP, Mesolo V. Bacterial indicators of risk of diarrhoeal disease from drinking-water in the Philippines. Bull World Health Organ 1991;69:305-17.
- [34] Clasen TF, Alexander KT, Sinclair D, Boisson S, Peletz R, Chang HH, et al. Interventions to improve water quality for preventing diarrhoea 2015. doi:10.1002/14651858.CD004794.pub3.
- [35] Luby SP, Halder AK, Huda TM, Unicomb L, Islam MS, Arnold BF, et al. Microbiological Contamination of Drinking Water Associated with Subsequent Child Diarrhea. Am J Trop Med Hyg 2015;93:904-11. doi:10.4269/ajtmh.15-0274.
- [36] Prüss A. Review of epidemiological studies on health effects from exposure to recreational water. Int J Epidemiol 1998;27:1-9.
- [37] Shrestha S, Kazama F. Assessment of surface water quality using multivariate statistical techniques: A case study of the Fuji river basin, Japan. Environ Model Softw 2007;22:464-75. doi:10.1016/j.envsoft.2006.02.001.
- [38] Ouyang Y, Nkedi-Kizza P, Wu QT, Shinde D, Huang CH. Assessment of seasonal variations in surface water quality. Water Res 2006;40:3800-10. doi:10.1016/j.watres.2006.08.030.
- [39] Pejman AH, Bidhendi GRN, Karbassi AR, Mehrdadi N, Bidhendi ME. Evaluation of spatial and seasonal variations in surface water quality using multivariate statistical techniques. Int J Environ Sci Technol 2009;6:467-76. doi:10.1007/BF03326086.
- [40] Vega M, Pardo R, Barrado E, Debán L. Assessment of seasonal and polluting effects on the quality of river water by exploratory data analysis. Water Res 1998;32:3581-92. doi:10.1016/S0043-1354(98)00138-9.

- [41] Tong STY, Chen W. Modeling the relationship between land use and surface water quality. J Environ Manage 2002;66:377-93. doi:10.1006 /jema.2002.0593.
- [42] Singh KP, Malik A, Mohan D, Sinha S. Multivariate statistical techniques for the evaluation of spatial and temporal variations in water quality of Gomti River (India)–a case study. Water Res 2004;38:3980-92. doi:10.1016/j.watres.2004.06.011.
- [43] Luo Y, Guo W, Ngo HH, Nghiem LD, Hai FI, Zhang J, et al. A review on the occurrence of micropollutants in the aquatic environment and their fate and removal during wastewater treatment. Sci Total Environ 2014;473-474:619-41. doi:10.1016/j.scitotenv.2013.12.065.
- [44] Petrie B, Barden R, Kasprzyk-Hordern B. A review on emerging contaminants in wastewaters and the environment: Current knowledge, understudied areas and recommendations for future monitoring. Water Res 2015;72:3-27. doi:10.1016/j.watres.2014.08.053.
- [45] Nordstrom DK. Worldwide Occurrences of Arsenic in Ground Water. Science 2002;296:2143-5. doi:10.1126/science.1072375.
- [46] McClintock TR, Chen Y, Bundschuh J, Oliver JT, Navoni J, Olmos V, et al. Arsenic Exposure in Latin America: Biomarkers, Risk Assessments and Related Health Effects. Sci Total Environ 2012;429:76-91. doi:10.1016/j.scitotenv.2011.08.051.
- [47] Winkel LHE, Johnson CA, Lenz M, Grundl T, Leupin OX, Amini M, et al. Environmental selenium research: from microscopic processes to global understanding. Environ Sci Technol 2012;46:571-9. doi:10.1021/es203434d.
- [48] Rudd JWM. Sources of methyl mercury to freshwater ecosystems: A review. Water Air Soil Pollut 1995;80:697-713. doi:10.1007 /BF01189722.
- [49] Abdel-Shafy HI, Mansour MSM. A review on polycyclic aromatic hydrocarbons: Source, environmental impact, effect on human health and remediation. Egypt J Pet 2016;25:107-23. doi:10.1016/j.ejpe.2015.03.011.
- [50] Stogiannidis E, Laane R. Source Characterization of Polycyclic Aromatic Hydrocarbons by Using Their Molecular Indices: An Overview of Possibilities. In: Whitacre DM, editor. Rev. Environ. Contam. Toxicol., vol. 234, Cham: Springer International Publishing; 2015, p. 49-133. doi:10.1007/978-3-319-10638-0_2.
- [51] Lumb A, Sharma TC, Bibeault J-F. A Review of Genesis and Evolution of Water Quality Index (WQI) and Some Future Directions. Water Qual Expo Health 2011;3:11-24. doi:10.1007/s12403-011-0040-0.
- [52] Sutadian AD, Muttil N, Yilmaz AG, Perera BJC. Development of river water quality indices—a review. Environ Monit Assess 2016;188. doi:10.1007/s10661-015-5050-0.
- [53] Rickwood CJ, Carr GM. Development and sensitivity analysis of a global drinking water quality index. Environ Monit Assess 2009;156: 73-90. doi:10.1007/s10661-008-0464-6.

