

Abstract

In the United States, two commonly used qualitative respirator fit test methods require the use of a test hood to be placed over the subject's head and shoulders. Workers fit tested by this method have commented on the discomfort of being inside the test hood. This study was designed to quantify some parameters that might lead to these types of comments. For this study, subjects performed a series of four respirator fit tests. A quantitative and a qualitative fit test were performed with a full facepiece respirator. Then a quantitative and a qualitative fit test were performed with an N95 filtering facepiece respirator. Parameters measured include: subjects' height, weight, and age, oxygen and carbon dioxide levels, air temperature, heart rate, arterial oxygen saturation, and Borg Ratio Scale value on breathing exertion. Carbon dioxide levels are significantly higher and oxygen levels are significantly lower in the respirator when the test hood is used during the qualitative fit test. This was especially true when fit testing filtering facepieces where mean carbon dioxide levels rose to 4.2% and mean oxygen levels dropped to 15.5%. Full facepiece respirators had similar changes, but to a lesser magnitude. The temperature inside the test hood rose an average 7.5

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claustrophobia.



an extent during a quantitative respirator fit test. Professionals conducting respirator fit tests should be aware of the physiological burdens that may occur during the qualitative respirator fit test. Some groups may be especially sensitive to this test such as the elderly, pregnant women, persons with pulmonary and/or cardiac disease, or persons with psychological disorders such as anxiety, panic disorders, or



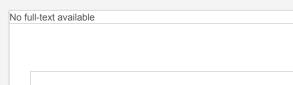


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... In terms of cardiac impact, the nonsignificant difference in heart rate between control and FFR and FFR-with-valve in the current study is congruent with other studies up to 1 hour of FFR use. 8,16,19 One study reported a mild decrease in heart rate with FFR during 4 hours of sedentary activity. 17 FFR-associated increased heart rate relates to breathing resistance, work level, physical fitness, FFRassociated anxiety, and increased retention of CO 2

... The similar S pO 2 values between the controls and all the FFR models in the current study mirror a previous report NA 6 not applicable S PO2 6 blood oxygen saturation measured via pulse oximetry P tcCO2 6 transcutaneously measured partial pressure of carbon dioxide f 6 frequency (respiratory rate) V T 6 tidal volume V E 6 minute ventilation of a O 1% difference between controls and subjects wearing N95 FFRs during qualitative respirator-fit testing. 19 A recent study of the impact of a surgical mask on S pO 2 in surgeons during surgery found significant S pO 2 decreases only during procedures longer than 60 min. 21 Kao et al 17 found a net P aO 2 decline of 9 † 18.5 mm Hg from baseline in approximately 70% of 39 patients wearing N95 FFR after 4 hours of hemodialysis. ...

... That limited prior experience 19, 21 and the current study data suggest that S pO 2 decrements are possible with N95 FFR or N95 FFR-with-valve, but are likely to be minor for FFR use of 3 1 hour during low energy expenditure, and may not be clinically important. ...

Surgical mask placement over N95 filtering facepiece respirators: Physiological effects on

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Mar 2010 · Respirology

Raymond J Roberge · Aitor Coca · W. Jon

Williams · Jeffrey B Powell

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Physiological impact of the N95 filtering facepiece respirator on healthcare workers

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May 2010 · RESP CARE

Raymond J Roberge \cdot Aitor Coca \cdot W. Jon Williams · Andrew J Palmiero

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- ... The four selected studies that collected objective measures in healthy individuals wearing RPDs (N95 FFRs or full facepiece respirators) revealed some significant respiratory effects, both in those who were experienced with wearing these devices (Laferty and McKay, 2006; Lee and Wang, 2011) and those who were not (Roberge et al., 2010; Smith et al., 2013), and this was also found by (Zhang et al., 2016) using a computational fluid dynamics simulation of full breathing cycles. Table 1 reports a detailed description of the studies, including the sample characteristics, procedures, and main results of interest. ...
- ... Finally, the increased RPD-related dead space was found to lower the average inhaled O 2 concentration. (Laferty and McKay, 2006) and (Roberge et al., 2010) found O 2 levels inside respirators' cavities ranging from 16.6% to 18.3%, which represent an O 2 -deficient space, according to the recommended threshold of the Occupational Health and Safety Administration (O 2 deficiency is an atmosphere that contains <19.5% O 2 by volume) (Table 1). The decreased O 2 levels may result in a faster transition from aerobic to anaerobic respiration, lower tolerance for physical exertion, and decreased working capacity (Laferty and McKay, 2006). ..
- ... (Laferty and McKay, 2006) and (Roberge et al., 2010)found O 2 levels inside respirators' cavities ranging from 16.6% to 18.3%, which represent an O 2 -deficient space, according to the recommended threshold of the Occupational Health and Safety Administration (O 2 deficiency is an atmosphere that contains <19.5% O 2 by volume) (Table 1). The decreased O 2 levels may result in a faster transition from aerobic to anaerobic respiration, lower tolerance for physical exertion, and decreased working capacity (Laferty and McKay, 2006). It should be noted that despite the decrease in O 2 % in the RPD cavity, no impact on blood oxygen saturation (SpO 2), as measured via pulse oximetry, was found in both the abovementioned studies. ...

Impact of respiratory protective devices on respiration: Implications for panic vulnerability

Article

Dec 2020

- Giampaolo Perna · Francesco Cuniberti ·
- Silvia Daccò · Daniela Caldirola

- ... Obese individuals and smokers could face more symptoms because of the use of filtering facepiece respirators without valve that brings difficulties in breathing. Laferty and McKay [70] found that filtering facepiece respirators cause breathing resistance resulting on a decrease in SpO 2 and an increase in CO 2 levels. Moreover, isolation gowns cover the entire body causing heavy sweating and continuous dehydration especially among smokers and obese individuals. ...
- ... Filtering facepiece respirators are more likely to cause adverse events such as breathing difficulties, headaches, panic attacks, and pressure related symptoms especially in case of prolonged use [31,32,37,46,55,70]. Also, Ong et al. [32] found that face shields cause headaches due to pain, pressure or compression from this PPE, while Battista et al. [37] found that face shields cause several symptoms, e.g.

Impact of personal protective equipment use on health care workers' physical health during

Article

May 2021 · AM J INFECT CONTROL

Petros Galanis · Irene Vraka · Despoina

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- ... They studied the changes in the physiological parameters (an increased HR, decreased SpO 2 , and PI). 7,8 These changes combined with the anxiety and fears related to this pandemic and direct exposure to increased viral loads makes them more vulnerable to infection in PPE or decreased immunity. ...
- ... All physiological changes related to wearing N95 facemask like tachycardia, hypertension, increased aortic and left ventricular pressure, increased pulmonary artery pressure, decreased SpO 2, headache, fatigue, dizziness, and drowsiness are related to hypoxia and hypercarbia. 5, 8, 9 The study by Chaudhary et al. did not measure the partial pressure of O 2, CO 2, and lactate level that might have given more conclusive evidence for physiological changes, as major limitations. Another limitation was its small sample size. ...

Physiological Effects of N95 FFP and Personal Protective Equipment in Healthcare Workers in

Article

Dec 2020 · Indian J Crit Care Med

Simant Kumar Jha

... Wearing respirator or mask would affect inhaled gas concentrations and respiratory resistances as well [4]. Particularly, wearing the respirator elevated the carbon dioxide level while decreased oxygen level within the respirator which may be the cause of subjective complaints for wearing respirators [5]. The increased partial carbon dioxide level also tends to affects breathing patterns and heart rate variability [6]. ...

Evaluation of rebreathed air in human nasal cavity with N95 respirator: a CFD study

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Jan 2016

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Hp Lee

View

... mm Hg), despite the EAPR being equipped with an exhalation valve that presumably allows for a smaller proportion of the exhaled breath (and associated carbon dioxide) to be retained in the respirator dead space (all subjects were asymptomatic of hypercapnia). 21 Furthermore, at the 2 work rates, the mean mixed inhalation/exhalation respirator dead space oxygen concentrations (17.85%, 17.81%, respectively) and respirator dead space carbon dioxide concentrations (2.50%, 2.47%, respectively) did not meet Occupational Health and Safety Administration ambient workplace standards (ie, ,19.5% is considered oxygen deficient; maximum 0.5% carbon dioxide as an 8-hour time weighted average), 22 although these standards apply to the workplace, not to respirators. Oxygen saturation was not adversely affected. ...

Reusable elastomeric air-purifying respirators: Physiologic impact on health care workers

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Feb 2010 · Am J Infect Contr

Raymond J Roberge · Aitor Coca · W. Jon Williams · Andrew J Palmiero

... This has additional ramifications, above and beyond time and costs associated with fit testing, given that some concern has been raised over the issue of the impact on pregnant women of elevated levels of carbon dioxide in the hoods utilized for respirator qualitative fit testing. (20) It may be that significant increases in Bizygomatic Breadth measurements of pregnant and non-pregnant women who wear RPE could be a useful marker for the consideration of additional fit testing, but this hypothesis would require a study with large numbers of appropriate subjects. Women who exceed the recommended weight gain of pregnancy and those who suffer from pregnancyassociated disorders that result in facial edema (e.g., pre-eclampsia), may experience increases in facial dimensions that could impact respirator fit. ...

Effect of Pregnancy Upon Facial Anthropometrics and Respirator Fit Testing

Article

May 2015 · J Occup Environ Hyg

Raymond J Roberge · Jung-Hyun Kim · Andrew J Palmiero · Jeffrey B Powell

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> ... Some studies show increases of 120% in inspiratory and expiratory flow resistances when N95 respirators are used, and the air exchange volume was reduced by an average of more than 30% [3]. The mean carbon dioxide levels rise and the mean oxygen levels drop in the breathing space inside face masks and respirators [4] Furthermore, the exhaled carbon dioxide can accumulate, and can subsequently be inhaled during each respiratory cycle. ..

Running with Face Masks or Respirators Can Be Detrimental to the Respiratory and

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Mar 2021

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... In non-pregnant subjects, it has been shown that use of N95-respirators can increase CO 2 levels within the masks by 1.8-3 %, suggesting that the increase in expired CO 2 concentration could also be due to the accumulation of expired CO 2 trapped in the dead space of the N95 mask [29, 30]. Our results do not support such a view because FiCO 2 did not increase even with the use of N95 materials and total CO 2 intake was reduced due to the corresponding decrease in V E

Respiratory consequences of N95-type Mask usage in pregnant healthcare workers-A

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Pearl Shuang Ye Tong · Anita Sugam Kale ·
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... Whilst the prolonged use of face mask may not lead to significant hypoxia and hypercapnia under normal use at rest, but can do so during stress [2] or exercise [3], and is associated with increased respiratory efforts, reduced work performance [4], adverse effects such as discomfort [5] and headaches [6], especially in individuals with increased basal metabolic demands such as pregnancy [7]. Such physiological changes can be observed with simple surgical masks [2] but is exacerbated with N95 [8] or full-face respirators [9]. Indeed, computational modelling studies report an increase in carbon dioxide level and a decrease in oxygen level with respiratory use due to rebreathed air [10]. ...

CO√ID-19: Electrophysiological Mechanisms underlying sudden cardiac death during

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Sharen Lee · Guoliang Li · Tong Liu · Gary Tse

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... Moreover, hypercapnia-related problems after many hours of wearing these respirators have been a concern to healthcare workers (HCW) and have been studied under in vitro conditions [23] and in vivo studies for respiratory fit tests [24]. Laferty et al. focused on oxygen and carbon dioxide levels of subjects wearing N95 respirators in a test hood and results showed an increase in CO 2 levels and a decrease in O 2 levels due to the important breathing resistance offered by N95 respirators. ...

A Scoping Review of Respirator Literature and a Survey among Dental Professionals

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Aug 2020 · Int J Environ Res Publ Health

Marco Farronato · Elisa Boccalari · Ettore Del Rosso · Cinzia Maspero

.. investigated the oxygen and carbon dioxide levels of participants wearing N95 masks in their study, and the results showed an increase in CO 2 levels and a decrease in SpO 2 levels due to the significant breathing resistance caused by N95 masks. 19 During the pandemic, increasing stress and anxiety levels were noticed among HCPs. 20,21 Increased levels of stress and anxiety may contribute to breathing difficulty and palpitation. ...

Symptoms Associated With Personal **Protective Equipment Among Frontline Health**

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Ahmet Çağlar · İlker Kaçer · Muhammet Hacımustafaoğlu · Kemal Öztürk

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> 67 Because paper surgical masks and cloth masks are looser fitting and more porous than N95 respirators, there is little likelihood that they meaningfully reduce oxygen saturation when worn in community settings. 68 There is some evidence that N95 respirators can increase respirator dead space and transcutaneous CO2 levels leading to mild hypercapnia, 69 but there is little evidence that paper surgical or cloth masks cause CO2 retention. 70 Therefore, there is little evidence that masks cause significant respiratory problems for most people. ...

The Great Mask Debate: A Debate That Shouldn't Be a Debate at All

Article

Dec 2020

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... Obese individuals and smokers could face more symptoms because of the use of masks without valve that brings difficulties in breathing. Laferty and McKay [70] found that N95 masks cause breathing resistance resulting on a decrease in SpO 2 and an increase in CO 2 levels. ...

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Effect of Surgical Masks Worn Concurrently Over N95 Filtering Facepiece Respirators:

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Oxygen and Carbon Dioxide Levels During Qualitative Respirator Fit Testing

June 2004

Edward A. Laferty

Approved Occupational Safety and Health Administration qualitative respirator fit test methods require the use of a test hood about the subject's head and shoulders. Workers fit tested by this method have commented on the discomfort of being inside the test enclosure. This study was designed to quantify some parameters that might lead to these types of comments. For this study, subjects performed ... [Show full abstract]

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