

European Society of Anaesthesiology and Intensive Care

# HOW TO REDUCE OUR CARBON FOOTPRINT in the OR, in the hospital, on the planet?

An ESAIC Tool-kit for beginners

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# Creating a task force in your institution



#### WHY

- and this is a team building opportunity

### HOW

- Talk, email, gather good will people
- Show this slide kit

#### WHO

- Administration
- Find the expert (engineer) in your hospital !
- Be a champion, be the leader!!

• Healthcare systems are major contributors to global carbon footprint • OR is the main source of pollution of the hospital • Of CO2e reduction targets set by governments and international treaties

• Explain benefits: planet, hospital, patient, yourself

• Nurses, Orderlies, Anaesthetists, Surgeons, Pharmacists, Hygiene,

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# Basics

- which are responsible for climate change.
- Climate change affects the social and environmental change is expected to cause approximately 250 000 2030 (source WHO).
- annual GHGs emissions.
- 25% of OR waste is generated by anaesthesia.
- Anaesthetic gases on global warming: One year of cars.

• All pollution types produced in hospitals are either released unchanged or incinerated at the cost of major CO2 released to the atmosphere and join the greenhouse gases (GHGs), determinants of health. Between 2030 and 2050, climate additional deaths per year. The direct damage costs to

health are estimated to be between USD 2-4 billion/year by

• Hospital waste = 1% of the nation's solid waste and 2.1% of

international production of anaesthetic gases = one million

# The 5 R's

#### **Reduce:**

- Energy consumption: reduction of heating/AC or ventilation when unoccupied, switch to LED bulbs
- Water consumption: reduce flow in OR faucet
- Paper: suppression of anaesthesia printed report (only e file)
- Plastic: decrease single use and packaging
- Drugs and materials: Reduce overage
- Chemical and environmental exposures: BPA, Phtalates, endocrine disruptors etc...
- Other: Cups, coffee capsules, water bottles

#### **Reuse:**

• Reprocessing of medical devices

### **Recycle:**

- Plastics
- Paper
- Medical glass
- Cartons and cardboards
- Batteries

### **Rethink:**

- Walking patient to the OR

- Use telemedicine

#### **Research:**

- Life cycle analysis of medical devices

- Development of « green » devices

• Metals such as stainless steel, aluminium, copper

• Remove unnecessary items, unused tools from surgical kits

• Reinvest benefits into projects for patients and/or professionals • Sustainable purchasing (life cycle analysis...etc...)

• Reduction in hospital length of stay (fast-tracking, day case..)

• Carbon footprint of new practices/technologies • Comparison of carbon footprint of different health systems

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# Collective responsibilities (patients and professionals)

- Education of all healthcare professionals

- institution
- Team building

- Positive communication

• Sign an agreement as proof of commitment • Reduce waste at each step of the perioperative process • Communication within the local task force with the

Improve patients' and professionals quality of life

 Create a virtuous cycle (collect and reinvest) • Break down barriers to the idea of sustainability



**Reduce inhaled** anaesthetic atmospheric pollution

- All halogens gases are greenhouse gases
- Carefully choose your halogen gas
- Desflurane has by far the longest life span affecting the atmosphere
- Use N2O-free anesthesia protocol
- to atmosphere is the future goal

• Use low flow anaesthesia as a rule. Closed circuit!! • Scavenging or oxidising the inhaled anaesthetics before vented



# **Reduce and** sorting out waste

Define different kind of waste (domestic, clinical, hazardous, pharmaceutical)

#### Waste bins:

- Define different kinds of waste (domestic, clinical, hazardous, pharmaceutical)
- Sort out the waste (most waste is domestic!)
- Reorganize the waste containers in the OR to favour the use of domestic waste/recycle bins
- Post clear graphics to help sort out the waste
- Learn about the waste chain in your hospital
- Make choices depending on your environment/waste chain
- Visit your waste disposable facility/incineration plant

# **Reduce wasted (opened and** unused) disposable supplies:

#### **Reduce paper waste:** • Do not print

### **Drug waste:**

• Redesign pre-packaged supply kits • Think before you open • Refuse new disposable devices

• Reduce drug wastage: prepare drugs when needed, favour smaller drug bottles (i.e 20 ml instead of 50 ml) • Do not spill drugs in the sink

# Recycle

### **STEP ONE - GET information**

• Local regulations. Do you already have a program for recycling ?

#### **STEP TWO - MEASURE**

 Obtain some numbers about predicted amount of recyclable materials and monetary benefit for hospital.

### **STEP THREE – FIND ALLIES**

 Find the persons in your hospital that will help you (lead nurses, residents, administration, engineering...)

- Think of the way to motivate them
- Find local recycling company to help you
- Make contact with your local non-profit organization involved in environment, recycling.
- Make contact with local governmental organizations
- Plastics: Need to be not mixed with other type of waste
- Paper: confidential information can be recycled through specific secure pathways
- Medical glass can be recycled if treated by specialized companies (but not in the household glass sector).
- Cartons and cardboards
- Metals such as stainless steel, aluminium, cupper
- Batteries, ink cartridges



# **Andesthesiologist's** responsibilities

### **Drugs:**

- Reduce drug wastage : 7 to 94% of the loaded drugs are waste
- Use pre-filled syringes when possible
- Do not spill drugs in the sink

## **Devices:**

- Reduce wasted (opened and unused) disposable supplies
- Pre-condition the purchase of disposable OR equipment in the collection and recycling of the used material
- · Choose devices depending on their life cycle
- Favour reusable devices
- Refuse devices with batteries
- Make sure plastic devices / wraps do not contain phtalates

### Do not print the anaesthesia report

## **Energy: Turn off**

- Lights
- Computers and all electronic devices
- Respirators and all electric devices
- OR lights
- Ventilation, the temperature in the OR set at an optimal
- level allowing decontamination and safety

# Personal behaviour

## Food/beverages:

- Use a reusable mug for coffee / tea
- Refuse plastic silverware and dishes at work
- Promote organic and local food in reusable dishes
- Eliminate plastic bottles
- Reusable and washable glasses for patients and yourself

# conference:

- Refuse flyers and plastic goodies
- Refuse single-use badge holders

## **Transportation:**

• Consider commuting with a low emission transportation mode (train, bike, feet...etc)

### Be e-green:

- Promote green-transportation for meetings (train, not plane)
- More audio-video conferences
- Stop emails to all (0.21g of CO2 /email)

### When attending a national or international



# Agenda with partners

- devices.
- the hospital.

 Assess the ecological cost of decontamination processes with hygiene services (vs single-use). • Meet with pharmacists about the life cycle of single-use

 Meet with the administration for a payback from recycling services intended to improve the quality of care or life at work, discuss food/beverages, and merge with already existing institutional programs. • Meet with technical services about existing recycling processes and waste chains already implemented in

 Meet with companies about reprocessing opportunities and/ or life cycle of their medical devices.

