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Assessment of microplastic concentrations in human stool

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Disclosure of Conflicts of Interest

I herewith declare the following paid or unpaid consultancies, business interests or sources of honoraria payments since October 1, 2016, and anything else which could potentially be viewed as a conflict of interest:

→ I have no conflicts of interest.

Methods – A world-wide prospective pilot study

Recruitment of 8 healthy test persons around the globe via personal contacts

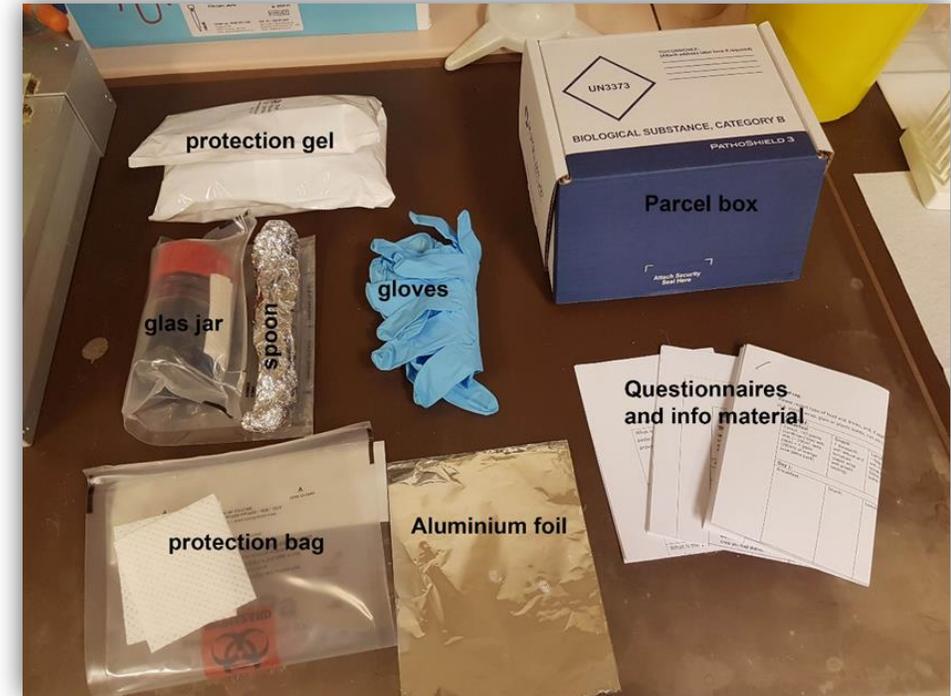


Methods – exclusion criteria

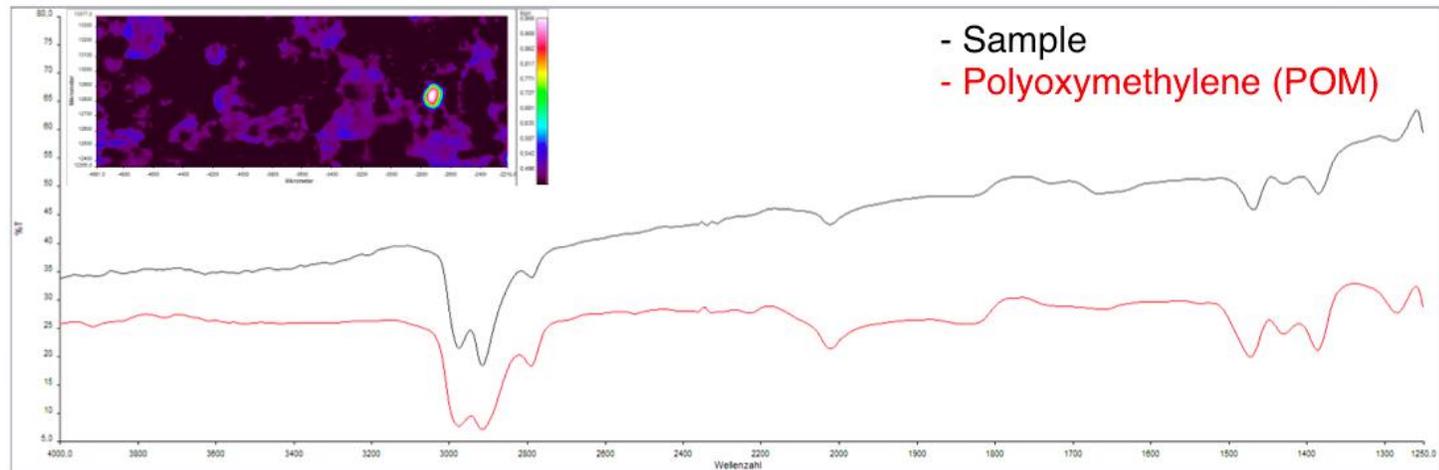
- ❖ Medical diet
- ❖ Diarrhoea or obstipation
- ❖ Antibiotics taken within the last 2 weeks
- ❖ Drugs affecting stool frequency and consistency (e.g. loperamide)
- ❖ Drugs affecting resorption (e.g. activated charcoal, cholestyramine)
- ❖ Diagnosed gastrointestinal disease (e.g. Ulcerative colitis, Crohn's disease)
- ❖ Invasive or abrasive dental treatment within the last 2 weeks

Methods – data collection & sampling

- ❖ Food protocol 6-7 days prior to stool sampling
- ❖ Brand name of tooth paste and cosmetic products
- ❖ Information about chewing gum and alcohol intake
- ❖ Information about drinking habits from PET bottles
- ❖ Plastic-free stool sampling and shipping to Vienna



Microplastic analysis by Fourier-transform infrared (FT-IR) micro-spectroscopy



Results – descriptive statistics

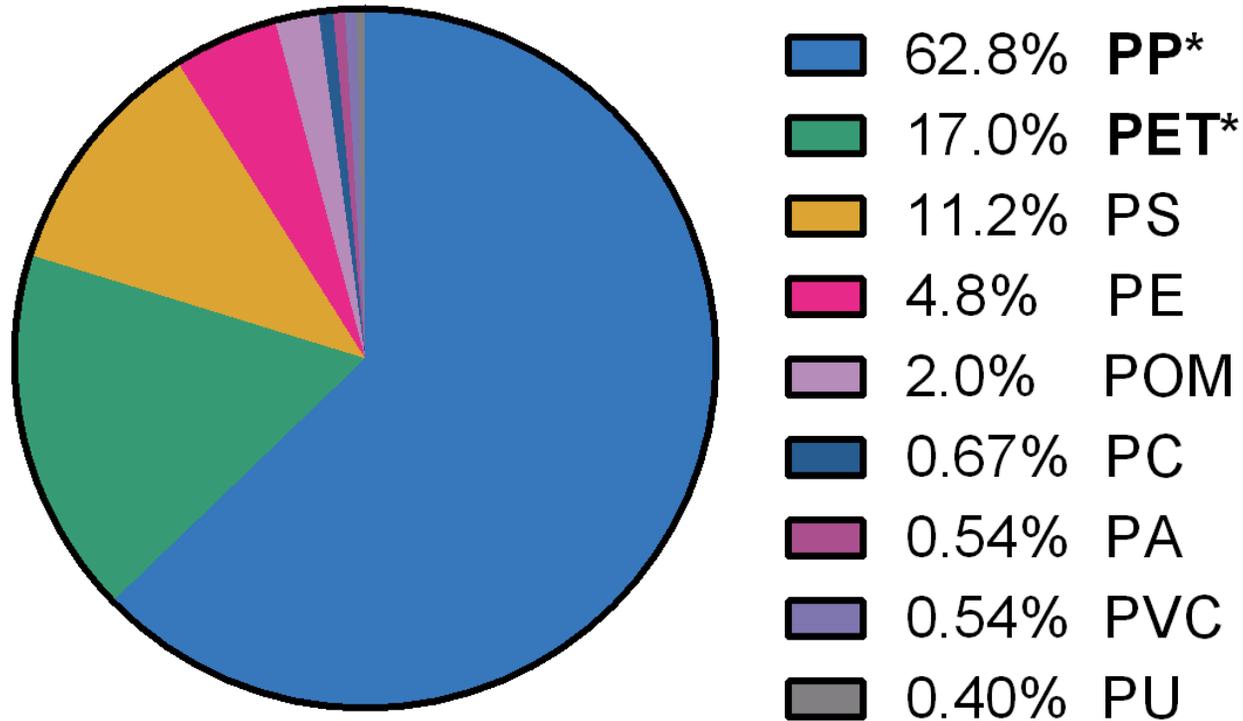
- ❖ 8 participants: 3 males, 5 females, aged 33-65 years
- ❖ 0/8 – vegetarian
- ❖ 2/8 – daily chewing-gum users
- ❖ 6/8 – ingested sea-food during the observation period
- ❖ 8/8 – had contact to plastic-wrapped food
- ❖ On average, 750 ml/day were drunk from PET bottles

Results – stool analysis

❖ Stool weight:	34 [8-39] g
❖ Positive samples:	8/8
❖ Microplastic particles / 10g stool:	20 [18-172] particles
❖ Particle size:	50-500 μm
❖ Plastic types detected:	9/10 (3-7 types /sample)

Values are displayed as median [Q1-Q3]

Results – relative frequency of different microplastic types



PP, PET, PS and PE: > 95%

*PP and PET were found in all 8/8 samples

Discussion

- ❖ How representative are these results?
- ❖ What are the sources of microplastics ingestion?
- ❖ What is the clinical impact of gastrointestinal microplastics?
- ❖ How can we reduce plastic pollution?

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Supplementary Slides

How representative are these results?

Consultation with our Department of Medical Statistics (Prof. Daniela Dunkler):

- ❖ In our study microplastics were present in 8/8 stool samples (100%).
- ❖ The confidence interval of this finding is 68-100%, when applying it to larger cohorts.
- ❖ Hence, more than 50% of the world population might have microplastics in their stool.
- ❖ However, only larger studies will be able to confirm this assumption.

What are the sources of microplastics ingestion?

❖ Food itself

➔ Ingestion of sea-food correlated with microplastics content ($R=0.648$; $p=0.089$)

❖ Food contact materials

➔ Packaging and processing

What is the clinical impact of gastrointestinal microplastics?

- ❖ Microplastic translocates from the intestine and particles with sizes up to 130µm have been detected in the blood stream, lymphatic vessels and the liver of fish [1,2] and various mammals [3-7]
- ❖ Microplastics may harm via bioaccumulation (causing local immunoreactions) or can serve as a vector for other chemicals [7-10].
- ❖ In birds and fish oral plastic caused remodeling of the intestinal villi, distortion of iron absorption and hepatic stress [1,9-12]
- ❖ Especially patients with intestinal bowel diseases might be vulnerable to microparticles [13,14].

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How can we reduce plastic pollution?

- ❖ Increase awareness
- ❖ Reduce plastic usage where possible
- ❖ Increase plastics reuse & recycling
- ❖ Dispose plastic waste appropriately

09/2018: The European Parliament voted in favor of a EU wide microplastics ban in cosmetics.