African Union

AFRICA CDC
Centres for Disease Control and Prevention
Safeguarding Africa's Health

Africa Centres for Disease Control and Prevention (Africa CDC)

Advisory on Disinfection Cards

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Situation

In the context of the ongoing pandemic there has been increased demand for products designed to control COVID-19 infection. The purpose of this advisory is to provide information to African Union Member States about issues surrounding disinfection cards, advertised as protective agents against SARS-COV-2 virus. This document synthesises evidence and provides recommendations to Member States and the public.

Background

There has been increasing use of body worn labels or tags, impregnated with chemical disinfectants, and worn on a lanyard or clipped to clothing, with the purpose of protecting against SARS-COV-2 virus. These are marketed as air purifier capable of removing viruses, bacteria and smog and creating a ring of purified air around the wearer that will protect the wearer from respiratory pathogens such as SARS-COV-2 virus. The proposed mode of action is that these cards release disinfectant into the air constantly over a long period, for around one month.

There is no available evidence that these cards provide any protection against COVID-19.

The devices have not been approved for use for this purpose by any regulatory body. The US FDA and the Japanese Consumer Affairs Agency have published warnings against their use.[1,2] The active ingredient is often advertised as chlorine dioxide, a powerful disinfectant that is approved for use as a liquid surface disinfectant[3] but not in a gaseous form.

Wearing a disinfection card on a lanyard or clipped to clothing will not produce enough disinfectant to sanitise the air, and the air will be quickly disrupted by any air movement. These cards may contain toxic chemicals. If damaged, the cards may leak chemicals and cause skin or respiratory irritation. They should not be left with unsupervised children as the contents may be dangerous if ingested mistakenly.

These cards should be disposed of responsibly, not near watercourses and should not be burned openly.

Transmission of SARS-CoV-2

Current evidence suggests that transmission of SARS-CoV-2 (the virus that causes COVID-19) occurs primarily through direct, indirect, or close contact with an infected person through infected secretions such as saliva and respiratory secretions, or through their respiratory droplets, which are expelled when an infected person coughs, sneezes, talks or sings.

Airborne transmission of the virus can occur in healthcare settings where specific medical procedures, called aerosol generating procedures, generate very small droplets called aerosols. Some outbreak reports from indoor crowded spaces suggest the possibility of aerosol transmission, combined with droplet transmission, for example, during musical rehearsals or practice, in restaurants or in fitness classes.

Respiratory droplets from infected individuals can also land on and contaminate surfaces. It is likely for people to be infected by touching these surfaces and touching their eyes, nose or mouth before cleaning their hands.[4]

There is no evidence for the efficacy of disinfection cards against any of these modes of transmission. They do not provide any protection from droplets expelled by the wearer or from droplets the wearer may receive from coughing patients, nor do they decontaminate hands or other surfaces. Any gaseous disinfectant released is not stable or concentrated enough to sanitise the air.

Evidence-based control measures in the community include:

- frequent hand hygiene, physical distancing from others when possible, and respiratory etiquette;
- avoiding crowded places, close-contact settings and confined and enclosed spaces with poor ventilation;
- wearing fabric masks when in closed, overcrowded spaces to protect others;[5] ensuring good ventilation in all closed settings; and appropriate environmental cleaning and disinfection.[4]

These control measures should be promoted always and anyone wearing a disinfection card should adhere to these control measures to ensure that they are protected.

Points to note for public health messaging about Disinfection Cards

- There is no evidence that disinfection cards have any protective effect against COVID-19 infection.
- The form and concentration of disinfectant in these cards is not effective against COVID-19 infection.
- These cards may contain toxic ingredients and present a hazard to children.
- Hand hygiene, physical distancing, mask wearing, improving indoor ventilation, and good environmental hygiene are all measures that will help prevent the transmission of COVID-19.

Recommendations

- Public health authorities are encouraged to share clear messaging to counter the claims being made by sellers of these products and promote evidence-based public health interventions.
- National governments are encouraged to engage with online platforms and sellers of these products to educate them and build commitments around responsible marketing during the pandemic.
- Regulatory agencies of Member States are encouraged to regulate the market for such products and to act promptly against unfounded claims.
- Regulatory agencies of Member States should maintain ongoing market surveillance to promptly recognise and withdraw fraudulent articles.

Member States are encouraged to share any concerns they may have about fraudulent claims with regional bodies, to assist them in promptly controlling the marketing and distribution of similar devices in other Member States.

References

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