

Assessment of VOCs, PM₁₀, and Formaldehyde Exposure in the Hair Salons of South Korea

Shiva Raj Acharya^{1*}, Deog Hwan Moon², Yong Chul Shin³

^{1,2} Graduate School of Public Health, Busan Medical Campus, Inje University, South Korea.

³ Department of Environmental and Occupational Health, Inje University, South Korea.

ARTICLE INFO

ORIGINAL ARTICLE

Article History:

Received: 19 August 2020

Accepted: 20 October 2020

***Corresponding Author:**

Shiva Raj Acharya

Email:

sameeracharya39@gmail.com

Tel:

+82 10 27417-7376

Keywords:

Hair Preparations,
Air Pollution, Indoor,
Occupational Exposure,
Volatile Organic Compounds,
Particulate Matter.

ABSTRACT

Introduction: In hair salons, workers and customers are exposed to high concentrations of several chemical compounds used during the working environment. Volatile Organic Compounds (VOCs), particulate matter (PM₁₀), nitrogen dioxide (NO₂), sulfur dioxide (SO₂), carbon monoxide (CO), and formaldehyde are the major chemicals that alter the indoor air quality. This study aimed to assess the indoor air quality in hair salons of Gimhae, South Korea.

Materials and Methods: To conduct the study, six hair salons were monitored for VOCs, formaldehyde, and PM₁₀. The study was conducted from August to November 2017.

Results: The findings showed higher concentrations of formaldehyde (> 0.50 ppm) and VOCs (> 0.08ppm) compared to EPA standard exposure limit; whereas PM₁₀ was < 150 µg/m³.

Conclusion: Based on the findings, the ventilation systems were insufficient in the selected salons. Adequate ventilation and control facilities should be advised in applying the chemical products to observe the safety of workers and customers of hair salon and to sustain better indoor air quality.

Citation: Acharya SR, Moon DH, Shin YC. *Assessment of VOCs, PM₁₀, and Formaldehyde Exposure in the Hair Salons of South Korea*. J Environ Health Sustain Dev. 2020; 5(4): 1103-8.

Introduction

Indoor air quality and pollution is one of the current global public health concerns. Volatile Organic Compounds (VOCs), particulate matter (PM), nitrogen dioxide (NO₂), sulfur dioxide (SO₂), carbon monoxide (CO), formaldehyde, and carbon dioxide are the major chemicals that alter the indoor air quality. Workers and customers are exposed to high concentrations of several chemicals' compounds used in the hair salons¹. In hair salons, many chemical products are used that may lead to indoor air pollution and may

result in adverse health effects. Salon workers absorb these chemicals through their skin and breathe them in as fumes build up in the salon air throughout the workday². This leads to occupational health exposure to workers and customers. In expansion to CO, formaldehyde and NO₂, asbestos, radon, mercury, unstable natural compounds, allergens, tobacco smoke, microscopic organism and infections are the most supporters to indoor air contamination in industrialized nations. Chemical exposures were described in only a few studies that focused on

the hairdressing salons. Formaldehyde was classified as a potential carcinogen that can also cause sensory and respiratory irritation²⁻⁹. Hypersensitive or allergic reactions, skin rashes, eye and mucous membrane irritation, and odor annoyance arise due to formaldehyde. Nausea, dizziness, eye, respiratory tract, mucous membrane irritation (rhinitis), headache, and fatigue are caused by VOCs exposure^{3, 5, 7, 10, 11}.

Salon specialists are uncovered to an assortment of chemicals each day in their working environment. Hair splashes, lasting waves, and various other salon items contain fixings related with asthma, dermatitis, neurological indications and indeed cancer^{4,12}. Wellbeing impacts from indoor air pollutants may be experienced before long after presentation or a long time afterward¹³. A few wellbeing impacts may appear up in no time after a single introduction or rehashed exposures to a poison. These incorporate aggravation of the eyes, nose, and throat, cerebral pains, discombobulation, and weakness. Such prompt impacts are ordinarily short-term and treatable. Respiratory illnesses, heart infection, and cancer can be seriously weakening or deadly. In-depth study about this is

required to way better get it the wellbeing impacts that happen after presentation to the pollutants concentrations found in homes and the impacts that happen after presentation to higher concentrations in brief periods of time^{14,15}.

Rationale of the study

Indoor air pollution is one of the major research priorities for researchers. Globally, many people are exposed to indoor air pollution that leads to serious health problems. Limited research was conducted in hair salons regarding indoor air quality. Thus, it might be helpful to use the findings of this study to project new regulations and programs to secure the health of workers and customers of hair salons. The main aim of this research was to assess the indoor air pollutants exposure in hair salons of Gimhae, South Korea.

Materials and Methods

Study Location

The study was conducted from August to November 2017 in Gimhae, South Korea. Gimhae is located in South Gyeongsang province of South Korea. The study location is illustrated in figure 1.

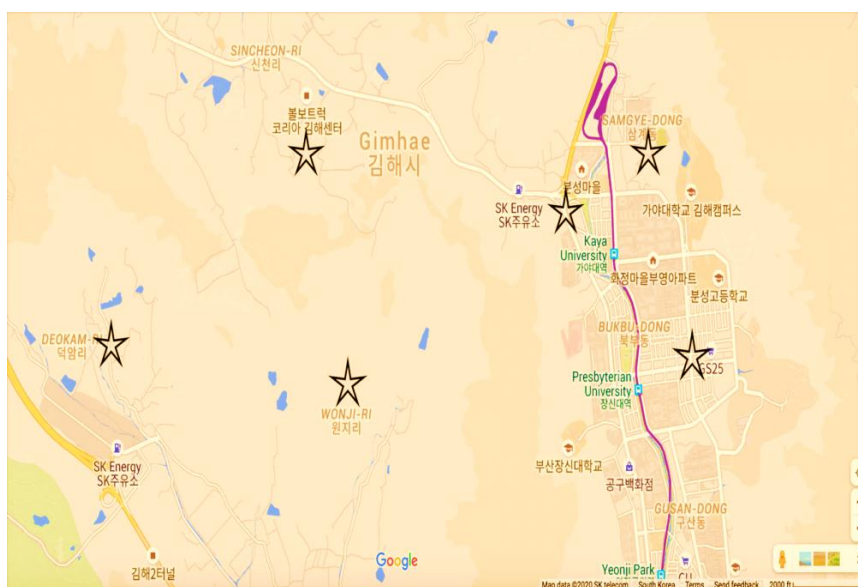


Figure 1: Study location: Black star mark the location of the selected salon

Selection of salons

Purposive and convenience sampling technique was used for selecting the salons. Simple random sampling method was applied and six hair salons were selected from Gimhae, South Korea. Later, the indoor air quality was assessed in these salons. Chemical substances chosen for investigation were VOCs, formaldehyde, and PM₁₀.

Measurement of PM₁₀, VOCs and Formaldehyde

Mini volume PM₁₀ sampler (ES Engineering Co., South Korea) was used to particulate matter (PM₁₀) measurement; whereas, formaldemeter (XP-308B, Saehan Inc., South Korea) was applied to monitor formaldehyde. Portable handled VOC monitor (PGM-7600, RAE Koera Inc., South Korea) was used to measure VOCs. Ventilation facilities in the salons were also checked during the assessment of indoor air quality.

Sample collection

The sample time for monitoring formaldehyde and VOCs was taken as 30 min and two consecutive measurements were performed. First measurement was done when there were no customers and the second measurement was performed in the presence of customers. The sample time for monitoring PM₁₀ was taken as 6 h and one measurement were performed with no adjustment using tweezers from 1.2 - 1.5m from

the floor. Pre-experiment filter was weighted as 0.1265 g.

The PM₁₀ sample was allowed to dry for three days then the dried sample was weighted and enclosed in Para film, which was wrapped for three days after being enclosed. After drying for three days, sample measurement was performed and

PM₁₀ was calculated using this formula:

$$\frac{(\text{Average value after measurement} - \text{Average value before measurement}) \times 10^6}{\text{Flux (1/min)} \times \text{time (min)} \times 10^{-3}}$$

In our study, the measured values of PM₁₀, VOCs, and formaldehyde were compared with the standard exposure limit values given by the Environmental Protection Agency¹⁴.

Ethical issues were discussed and ethical approval was obtained from Inje University (IRB No. 17-A-00004447) and respective hair salons. The purpose and findings of the study were explained to the respondents in details.

Results

Salons with a large size had more customers per day as compared to the small salons (Table 1). The ventilation system in all selected hair salons was insufficient after observation.

Table 1: Demographic statistics of hair salon

| Characteristics | Salon 1 | Salon 2 | Salon 3 | Salon 4 | Salon 5 | Salon 6 |
|---------------------------|----------------|----------------|----------------|----------------|----------------|----------------|
| Area (m ²) | 23 | 15 | 25 | 16 | 15 | 19 |
| No. of worker | 2 | 4 | 5 | 3 | 3 | 5 |
| Average customers per day | 15 | 10 | 18 | 10 | 15 | 23 |
| Ventilation | Not satisfying | Not satisfying | Not satisfying | Not satisfying | Not satisfying | Not satisfying |

The results of formaldehyde and VOCs concentration are presented in table 2. All measurements were done inside the room. Table 2

shows the concentration level of formaldehyde and VOCs before and after the sample collection.

Table 2: Formaldehyde and VOCs concentration in selected salons

| Salon | Measurement | Formaldehyde (ppm) | VOCs (ppm) |
|---------|-------------|--------------------|------------|
| Salon 1 | Before | 0.07 | 0.32 |
| | After | 0.36 | 0.57 |
| Salon 2 | Before | 0.17 | 0.46 |
| | After | 1.33 | 4.10 |
| Salon 3 | Before | 0.19 | 0.40 |
| | After | 1.37 | 1.39 |
| Salon 4 | Before | 0.22 | 0.51 |
| | After | 0.45 | 3.17 |
| Salon 5 | Before | 0.03 | 0.23 |
| | After | 2.09 | 0.72 |
| Salon 6 | Before | 0.26 | 0.36 |
| | After | 0.59 | 0.54 |

Particulate matter (PM₁₀) is another major factor influencing the indoor air quality. Particulate matter was measured by two sampling; before and after presence of the customers. Sample

measurement was performed five times before and after the situation. The mean value of PM₁₀ concentration before and after monitoring is displayed in table 3.

Table 3: Particulate matter (PM₁₀) concentration (µg/m³) in selected salons

| Measurement | 1 st | 2 nd | 3 rd | 4 th | 5 th | Mean | PM ₁₀ |
|-------------|-----------------|-----------------|-----------------|-----------------|-----------------|-------|----------------------|
| Before | 0.126 | 0.126 | 0.126 | 0.126 | 0.126 | 0.126 | 83.33 |
| After | 0.126 | 0.126 | 0.126 | 0.126 | 0.126 | 0.126 | (µg/m ³) |

The results of the study as compared with the EPA standard exposure limit showed that the indoor air

quality of the studied salons was inadequate and above the exposure limits as shown in table 4.

Table 4: Indoor air quality of selected salons with exposure limit

| Pollutant | EPA Standard value | Measured value | Exposure limit |
|------------------|---------------------------------------|-------------------------|----------------|
| Formaldehyde | 100 µg/m ³ (0.08 ppm) | Salon 1 | 0.36 |
| | | Salon 2 | 1.33 |
| | | Salon 3 | 1.37 |
| | | Salon 4 | 0.45 |
| | | Salon 5 | 2.09 |
| | | Salon 6 | 0.59 |
| VOCs | 500 µg/m ³ (0.20-0.50 ppm) | Salon 1 | 0.57 |
| | | Salon 2 | 4.10 |
| | | Salon 3 | 1.39 |
| | | Salon 4 | 3.17 |
| | | Salon 5 | 0.72 |
| | | Salon 6 | 0.54 |
| PM ₁₀ | 150 µg/m ³ | 83.33 µg/m ³ | below |

Note: Standard value from Environmental protection agency (EPA), 2016

Discussion

Formaldehyde and VOCs were higher than the standard value in all hair salons. Regarding formaldehyde, the highest value was 2.09 ppm in salon 5 and regarding VOCs, the highest rate was 4.108 ppm in salon 2. However, the PM₁₀ was

found to be lower than the exposure standard. A similar study from Athens, Greece reported lower concentrations of formaldehyde than the detection limit of the method in all salons (< 0.05 ppm)¹⁶. Ventilation is the most essential factor in controlling the indoor air pollution. Our study

showed that the ventilation system was insufficient in all selected hair salons. According to the previous studies, ventilation is the most crucial factor for enhancing the indoor air quality in salons¹⁵⁻¹⁸.

Another finding of this study showed that exposure to VOCs had an association with increased levels of serum C-reactive protein and decreased heart rate variability (HRV) indices. The effect of VOCs exposure on the health parameters was higher during the days on which the participants were working¹, which is supported by our findings (VOCs level is above in both salons). Cora Roelofs found that introduction to a few chemical compounds was higher when hair passing on was performed. Beauticians were uncovered to minimum air levels exposure with huge number of chemical substances generally related to hair passing on¹⁵.

This is the main source of concerns for the customers and hairdressers because of the possible

health impact.

The study conducted in 12 monitored hair salons indicated that the level of VOC concentrations was mostly affected by the type of products used while the area per customer and ventilation efficiency had less impact on the VOC levels¹⁹. Exposure limits may well be diminished significantly by performing certain activities: utilizing great ventilation within the working region by keeping all the excellence items in an isolated room^{8,9,15,17,18}, closing the bundles of excellence items after utilize, and at last selecting items without solid odor^{6-8,16}.

According to the environmental protection agency (EPA, 2016), the exposure limits value for various chemical compounds varied depending upon the facilities. The exposure value for formaldehyde, VOCs, and PM₁₀ in various facilities are shown in table 5.

Table 5: EPA standard occupational exposure limit value for Formaldehyde, VOCs and fine dust in different facilities

| Facilities | Formaldehyde ($\mu\text{g}/\text{m}^3$) | VOCs ($\mu\text{g}/\text{m}^3$) | Fine dust particles ($\mu\text{g}/\text{m}^3$) |
|---|--|--------------------------------------|---|
| Railroad, theater, museum, library, airport | 100 | 500 | 150 |
| Hospital, nursing homes | 100 | 200 | 100 |
| Indoor parking | 100 | 100 | 200 |

Source: Environmental protection agency (EPA), 2016 [8].

Public areas are very sensitive to the health impacts caused by different types of air pollutants. In our study, VOCs and formaldehyde were higher than the exposure level, which may be influenced by the outdoor air environment. The literature showed that outdoor air pollution had some impacts on indoor air quality in urban areas^{5-7, 20, 21}.

Conclusion

The concentration levels of formaldehyde and VOCs were comparatively above the EPA standard exposure limits. Ventilation system was found to be poor. Although the study was conducted in only six salons, it provides some evidences of the indoor air quality in hair salons, which may easily affect the workers and customers' health. Routine monitoring of air quality, proper ventilation

systems, and low uses of beauty chemical products are highly recommended to reach the good indoor air quality in hair salons and minimize the occupational exposure.

Acknowledgements

We are thankful to all salon owners who cooperated in this study and devoted their valuable time. Furthermore, we would also like to appreciate Inje University for supporting this research.

Funding

This research was conducted without receiving any funds.

Conflict of Interest

We declare no conflict interests regarding this study.

This is an Open-Access article distributed in accordance with the terms of the Creative Commons Attribution (CC BY 4.0) license, which permits others to distribute, remix, adapt, and build upon this work, for commercial use.

References

1. Ma CM, Lin LY, Chen HW, et al. Volatile organic compounds exposure and cardiovascular effects in hair salons. *Occup med.* 2010;60(8):624-30.
2. Liteplo RG, Meek ME. Inhaled formaldehyde: exposure estimation, hazard characterization, and exposure-response analysis. *J Toxicol Environ Health B Crit Rev.* 2003;6:85-114.
3. Leino T, Tammilehto L, Luukkonen R, et al. Self-reported respiratory symptoms and diseases among hairdressers. *Occup Environ Med.* 1997;54(6):452-5.
4. Camfil UK. A guide to managing air quality within UK salons; 2015. Available from: <https://www.camfil.com/en/insights/air-quality>. [Cited April 06, 2017].
5. Mainka A, Zajusz-Zubek E. Indoor air quality in urban and rural preschools in upper Silesia, Poland: particulate matter and carbon dioxide. *Int J Environ Res Public Health.* 2015;12:7697-711.
6. Morawska L, Afshari A, Bae GN, et al. Indoor aerosols: from personal exposure to risk assessment. *Indoor Air.* 2013;23:462-87.
7. Rogula-Kozłowska W, Kozielska B, Klejnowski K, et al. Hazardous compounds in urban PM in the central part of Upper Silesia (Poland) in winter. *Arch Environ Prot.* 2013;39(1):53-65.
8. Salvi S. Health effects of ambient air pollution in children. *Paediatr Respir Rev.* 2007;8:275-80.
9. Wichmann J, Lind T, Nilsson M, et al. PM_{2.5}, soot and NO₂ indoor-outdoor relationships at homes, kindergartens and schools in Stockholm, Sweden. *Atmos Environ.* 2010;44: 4536-44.
10. Occupational Safety and Health Administration (OSHA). Indoor air quality investigation United state department of labor; 2015. Available from: https://www.osha.gov/dts/osta/otm/otm_iii/otm_iii_2.html. [Cited March 15, 2016].
11. Espuga M, Munoz X, Plana E, et al. Prevalence of Possible Occupational Asthma in Hairdressers Working in Hair Salons for Women. *Int Arch Allergy Immunology.* 2011;155:379-88.
12. Jung PK, Lee J, Baek J, et al. The effect of work characteristics on dermatologic symptoms in hairdressers. *Ann of Occup and Environ Med.* 2014;26:13.
13. Banstola S, Acharya SR, Shin YC. Health problems among child labour in the brick industries of Nepal. *Austin J Public Health Epidemiol.* 2019;6(1):1083.
14. Environmental Protection Agency (EPA). Indoor air quality (IAQ); 2016. Available from: <https://www.epa.gov/indoor-air-quality/iaq/publications-about-indoor-air-quality>. [Cited Feb 26, 2017].
15. Ronda E, Hollund BE, Moen BE. Airborne exposure to chemical substances in hairdresser salons. *Environ Monit Assess.* 2009;153:83-93.
16. Hollund BE, Moen BE. Chemical exposure in hairdresser salons: effect of local exhaust ventilation. *Ann Occup Hyg.* 1998;42:277-82.
17. Goldin LJ, Ansher L, Berlin A, et al. Indoor air quality survey of nail salons in Boston. *J Immigr Minor Health.* 2014;16(3):508-14.
18. Nguyen C. Indoor air quality of nail salons in the greater Los Angeles area: Assessment of chemical and particulate matter exposures and ventilation. MS Thesis, University of California, Los Angeles; 2016.
19. Gianluigi-de G, Lucrezia-de G, Antonio M, et al. Indoor air quality in hair salons: Screening of volatile organic compounds and indicators based on health risk assessment. *Atmospheric Environment.* 2013;83:119-26.
20. Alexandra T, Argyro L, Stavroula C, et al. Indoor air in beauty salons and occupational health exposure of cosmetologists to chemical substances. *Int J Environ Res Public Health.* 2010;7:314-24.
21. Begum BA, Paul SK, Hossain MK, et al. Indoor air pollution from particulate matter emissions in different households in rural areas of Bangladesh. *Build Environ.* 2009;44(5):898-903.