

STERILIZATION, ITS TYPES. THE CONCEPT OF PRESERVATIVES, THEIR USE**Umarova Makhfuza Mirzakarimovna**

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Abstract: Sanitization is a pivotal cycle in different ventures, including medical services, food creation, and drugs. It includes the end of all microorganisms, including microbes, infections, and parasites, from an article or substance. This is fundamental to forestall the spread of sicknesses and guarantee the security and nature of items. There are a few kinds of disinfection strategies, each with its benefits and restrictions. In this article we will give data about sanitization process and its importance in science and clinical associations.

Keywords: Sterilization process, types, medical substances, infections, restrictions.

Introduction: Filtration is often used for heat-sensitive liquids and gases. This physical method can be carried out with depth filters, surface filters, membrane filters, and an adsorptive method using depth filter aids and membranes. The effectiveness of filtration is often measured by the purity of the filtrate in terms of bacterial penetration or the retention of a challenge organism.

Radiation sterilization makes use of electromagnetic ionizing radiation. Although it has good penetrating power, radiation affects the DNA of microorganisms and can cause mutations. This is potentially dangerous and, as such, radiation sterilization is often not used for pharmaceutical products and medical equipment.

Chemical sterilization is often the better choice for heat-sensitive materials. The principle behind this is to destroy proteins or nucleic acids. The effectiveness of the method is dependent on the type and concentration of the chemical, the method being utilized, the temperature, and the duration. A multitude of gases, liquids, and vapors can be used for chemical sterilization.

Sterilization is the process of killing all life forms. Sterilization techniques are varied; these include heat, chemical, radiation, and filtration. Each method has its own advantages and limitations. Heat is the most effective and widely used method of sterilization. It is carried out in an autoclave at temperatures above 100°C in saturated steam. The amount of required time is dependent on the heat resistance of the material to be sterilized. For most materials, this is around 10-15 minutes. The steam displaces the air in the autoclave, which is important as air is not an effective conductor of heat. Steam also has better penetrating power than dry heat and, as such, is more effective.

Heat Sterilization:

Heat sterilization has been used for many years, involving the heating of articles at temperatures sufficiently high to destroy microorganisms. Because it is the most simple and direct form of sterilization, heat has been the most universal agent. The efficacy of heat in killing microorganisms increases with increasing temperature. The tolerance of different microorganisms to heat varies considerably, but in general the vegetative forms of organisms are more easily killed than are the spores. Destruction of spores generally requires temperatures above those required to kill

vegetative forms of the most resistant microorganisms. One of the most practical applications of heat sterilization is in the use of steam. For many years boiling water was employed to sterilize articles, but this is no longer considered satisfactory as the temperature of boiling water is insufficient to kill thermoresistant strains of microorganisms and spores.

The most effective method of using steam is by autoclaving. An autoclave is a pressure chamber in which steam can circulate at temperatures higher than boiling point. Commonly used conditions are 15 lbs./in² (1.06 kg/cm²), 121°C for fifteen minutes. This will kill all organisms including heat-resistant spores. A method of sterilization often used in industry is that of hot air. This involves heating air to temperatures from 150°C to 170°C and passing it into an oven with a double insulated wall. Although slower than steam sterilization, the efficacy of this method of dry heat is comparable with that of steam. Due to its simplicity and lower cost, hot air is often preferred to steam if the material to be sterilized is not damaged by the higher temperatures. This is also the case where incineration is used to sterilize material. This is the simplest and cheapest method of sterilization, involving destruction of the material by open flame, incandescence or sparking.

Both steam sterilization and incineration are unsuitable for items containing moisture or plastic and rubber tubing owing to the destructive effects of high temperatures. Static air sterilization or tantalization is a process in which materials are exposed to free-flowing steam intermittently over a 24–48-hour period. This is repeated on three successive days. It is designed to sterilize material without killing it. On the first day vegetative forms both heat susceptible and resistant are killed. Incubation of the material over the next 24 hours allows any spores present to germinate. These will be killed by steam on the second day. This process is then repeated and it is claimed that it is the only method of sterilizing without damaging some types of material. Dry heat is another method of sterilizing moist or oily materials, involving lower temperatures than hot air and over. This method is less reliable than moist heat or free flowing steam. A final method of heat sterilization is that by flaming wire inoculating loops or needles. This is suitable only for the sterilization of small items and is used in microbiological work.

Chemical Sterilization:

Liquid sterilant kill microorganisms by destroying proteins and DNA. They are used in disinfecting items in healthcare and laboratories. They are more effective than household disinfectants. High-level disinfectants can achieve sterilization for items that do not require high temperatures. Low-level disinfectants can achieve sterilization for items that are not in contact with invasive instruments. High-level disinfectants include glutaraldehyde, ortho-thioaldehyde, hydrogen peroxide, peracetic acid, and sodium hypochlorite. They are capable of destroying all microorganisms if they are immersed in the solution for the appropriate period of time. Glutaraldehyde is the most effective high-level disinfectant, but it must not be used on endoscopes. This is due to the fact that it may be trapped inside the endoscope, which might result in patient infection. Sodium hypochlorite, commonly called bleach, is an effective low-cost sterilant. However, it causes corrosion and acute toxicity, so it cannot be used as a general-purpose disinfectant.

Chemical sterilization can be achieved by using gaseous sterilant or liquid sterilant. Gaseous sterilant are used to sterilize heat-sensitive items. They have the principal advantage of enabling sterilization of large volumes and complex-shaped objects. The commonly used gaseous sterilant is ethylene oxide. It is highly explosive and toxic when exposed to high temperatures in the presence of

flammable gases. Hazardous byproducts are formed when it is exposed to light or moisture. The other gaseous sterilant are hydrogen peroxide and peracetic acid. They are less toxic than ethylene oxide.

Radiation Sterilization:

Products that are to be sterilized with radiation must be free from foreign substances such as water, grease, or solvents. They must also be compatible with the sterilization method and may require special packaging to protect them from deformation. Radiation sterilization is noted for its ability to kill microorganisms without excessively compromising product quality. The mechanism by which radiation kills microorganisms is through destruction of their DNA. During this process, no radioactive material is created, used, or contained in the product, and the product will not become radioactive. Due to the effects of shipping and product degradation, radiation sterilization is often the best choice for terminal sterilization of disposable medical products coming from healthcare product manufacturers. However, it is considered to be less cost effective for small production runs.

The effectiveness of cold sterilization techniques has led to significant advances in modern medicine. Of these techniques, radiation sterilization has gained wide acceptance for many medical devices and some products used in health care. Radiation sterilization can be accomplished with gamma rays, high-energy electrons, x-rays, or subatomic particles. The process can be performed with the product in air, in an inert atmosphere, or in a vacuum. There are three primary methods that use these systems to sterilize products: gamma irradiation, electron beam radiation, and X-ray sterilization. The most popular and versatile method is gamma irradiation. High-energy electrons provide an alternative to gamma radiation, but it requires a larger facility and more processing power, resulting in higher operating costs.

Filtration Sterilization:

A reduced pressure occurring in space in a vacuum. Vacuum filtration is a more efficient way to separate a solid from a liquid than gravity filtration is. Often, soft filter paper is placed inside the funnel so that when a solid is collected, it can be scraped off the paper and the paper thrown away. After selecting any type of sterile filter, create an assembly that would result in the top of the receiving vessel becoming pressurized. Connect a sterile filter holder to a gas source that will be used to pressurize the system atop the liquid filter. Connect the filter holder to the source of liquid to be filtered, and then finally connect a hose barb to the receiving vessel. Now we can apply the filter and process any type of sterile liquid without compromising the filter itself and have it dispensed into the receiving vessel. An impurity might not be visible to the naked eye, and the impurity can compromise the integrity of a drug product. Through many studies, we have learned that sterilizing the final filtration will increase the sterility of the outgoing liquid. By today's standards, in a sterile manufacturing facility, a product should be filtered through a sterilizing filter into a sterilized container and kept in a quarantine zone until the product is tested and proved sterile.

The purpose of any filter is to separate a solid, impurity, or microbe from the liquid. This may seem like a simple task, but it is not. The filter should not interfere with the liquid being filtered, and it should retain the contaminant on the surface or within itself. The filter should then be either cleaned or destroyed. The ideal filter is a depth filter.

Medical care offices that create clinical, substance, or radiologic squander have a moral and legitimate commitment to discard these losses in a way that presents negligible possible risk to the

climate or general wellbeing. The legitimate removal of these squanders requires a unique waste administration plan that adjusts to government, state, and nearby guidelines and gives satisfactory faculty and monetary assets to guarantee execution.

Clinical garbage removal has been as a significant issue in the US for the beyond 40 years. The issue has created because of clinical waste washing shoreward in a few seaside states in 1987 and 1988 and the apparent danger of gaining HIV contamination by means of this waste. This has prompted prohibitive standards administering the removal of clinical waste in many states and an expansion in the volume of waste characterized as controlled clinical waste. Unintentionally, with an expansion in volume of directed clinical waste (previously called "irresistible waste"), the choices for clinical waste treatment and removal are reducing a result of room and ecological worries. This segment will survey a portion of the standards related with clinical waste administration; however, a more itemized depiction of assortment, stockpiling, handling, shipping, therapy, and general wellbeing ramifications of clinical waste might be found somewhere else.

In spite of the consideration given to clinical waste by the general population, the media, and all degrees of government, the terms medical clinic squander, clinical waste, directed clinical waste, and irresistible waste are frequently utilized equivalently. Medical clinic squander alludes to all waste, biologic or nonbiologic, that is disposed of and not expected for additional utilization. Clinical waste alludes to materials created because of patient conclusion, vaccination, or treatment, like dirtied dressings or intravenous tubing. Irresistible waste alludes to that piece of clinical waste that might actually communicate an irresistible illness. Congress and the EPA utilized the term managed clinical waste as opposed to irresistible waste in the Clinical Waste Following Demonstration (MWTa) of 1988 in respect to the slim chance of illness transmission related with this waste. Hence, clinical waste is a subset of emergency clinic squander, and controlled clinical waste (which is inseparable from irresistible waste according to an administrative viewpoint) is a subset of clinical waste.

As expressed, managed clinical waste (or irresistible waste) is fit for creating an irresistible illness. This definition requires a thought of the variables essential for illness enlistment that incorporate portion, have powerlessness, presence of a microbe, destructiveness of a microorganism, and the most ordinarily missing element, a gateway of passage. For a loss to be irresistible, consequently, it should contain microbes with adequate harmfulness and amount so openness to the loss by a defenseless host could bring about an irresistible illness. Since there are no tests that permit irresistible waste to be distinguished unbiasedly, dependable offices (e.g., the CDC, EPA, or states) characterize squander as irresistible when it is thought to contain microorganisms in adequate number to cause illness. In addition to the fact that this emotional definition brings about clashing suppositions from the CDC, EPA, and state organizations on what comprises irresistible waste and how it ought to be dealt with, yet it likewise gives excessive accentuation to the simple presence of microbes.

Conclusion:All in all, sanitization is a basic cycle in different enterprises to guarantee the security and nature of items. There are a few kinds of disinfection techniques, each with its benefits and impediments. Additives are likewise fundamental in forestalling the development of microorganisms in items. Notwithstanding, the utilization of additives ought to be painstakingly observed to guarantee their security and limit potential wellbeing chances.

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