

Interim Guidance for Cleaning of Commercial Passenger Aircraft Following a Flight with a Passenger with Suspected Severe Acute Respiratory Syndrome (SARS)

Introduction

Severe Acute Respiratory Syndrome (SARS) is a severe form of pneumonia, or infection of the lungs that was first recognised in Asia in mid-February 2003 and has now been reported on three continents. The World Health Organisation (WHO) has received reports of patients with Severe Acute Respiratory Syndrome (SARS) from East and South East Asia, Canada and Europe. The agent responsible for causing SARS is not known but it is thought to be due to a particular type of respiratory virus. There have been several cases of SARS in Europe and North America and it is thought that some passengers travelling from affected areas have carried the illness on board aircraft.

This guidance is intended to assist airlines in cleaning aircraft that have carried passengers who are suspected as having SARS. Its recommendations are based on standard infection control practices and on what is known about the transmission and infectivity of the virus thought to be the cause of SARS.

Transmission of SARS has been associated with direct contact or close proximity to symptomatic patients. Once passengers have left an aircraft, the main source of infectious particles from a sick passenger will have been removed. However, there is still the possibility of becoming infected if virus particles on environmental surfaces come into direct contact with the eyes, nose or mouth, for example, by unwashed hands. Hand hygiene, is therefore of vitally important for all staff working on commercial passenger aircraft.

1. Notification of Ground and Cleaning Crew

The National Disease Surveillance Centre (NDSC) has issued guidelines for Airline Flight Crew Members to notify the destination airport authorities, if they suspect a passenger of having SARS. The ground and cleaning crews of the airline should be notified at the same time so that cleaning of the aircraft after passengers have disembarked, can take place.

2. Cleaning and Disinfection

Routine post-flight cleaning of passenger aircraft should incorporate appropriate hand hygiene to minimise risks of disease transmission.

When cleaning commercial passenger aircraft after a flight with a possible SARS patient:

- Compressed air should not be used for cleaning the aircraft as there is a risk of distributing infectious material more widely. There is currently no evidence to suggest that special vacuuming equipment or procedures are necessary.
- Staff should wear non-sterile disposable gloves while cleaning the passenger cabin and lavatories.
- Gloves should be removed and discarded if they become soiled or damaged and after use.
- Hands should be washed thoroughly with soap and water or an alcohol-based hand scrub immediately after gloves are removed.
- Frequently touched surfaces in the passenger cabin (e.g., armrests, seatbacks, tray tables, light and air controls, and adjacent walls and windows) and passenger lavatory surfaces should be wiped down with using a disinfectant/germicide that is known to have good activity against viruses (e.g. 0.1% hypochlorite or 1 cap full of household bleach diluted in 4 pints/2 litres of water) and allowed to air dry in accordance with manufacturer's instructions.
- Special cleaning of upholstery, carpets, or storage compartments is not indicated.

3. Occupational health for cleaning crews

Cleaning supervisors should be aware of the symptoms of SARS as laid out in the NDSC Travel Advisories and should refer cleaning staff to the occupational health department if they develop symptoms within ten days of cleaning an aircraft after a flight that had a possible SARS patient on board.