

BGS-UKRI Briefing Note

Tryptophan-like fluorescence (TLF) - a rapid *in-situ* screening tool for assessing faecal contamination risk in groundwater

Benchmark research evidence from a systematic programme of field testing in Africa and India



Keywords

Tryptophan, fluorescence, TLF, sensors, faecal contamination, groundwater, risk

Front cover

Photo of field team undertaking fieldwork in Malawi, 2016 (Lapworth DJ, BGS)

Bibliographical reference

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Highlights

- Tryptophan-like fluorescence (TLF) in groundwater is a novel *in-situ* approach to rapidly detect faecal contamination risk, which often leads to diarrheal disease, a leading cause of death for children under the age of 5 years.
- TLF has been tested against slower conventional plate counting methods in 5 countries (India, Kenya, Malawi, Uganda, and Zambia) and at >500 groundwater sources.
- TLF is most accurate in waters with low dissolved organic carbon and low-turbidity, so is particularly well suited for monitoring groundwater sources.
- TLF is strongly correlated with current methods for measuring thermotolerant coliforms.
- TLF technology is a commercially available, easy-to use, presents results in real-time and requires no chemical supplies.

Motivation

Faecally contaminated drinking water, a leading cause of diarrhoeal diseases, is currently consumed by an estimated 1.8 million people globally¹. Diarrhoeal diseases are a leading cause of death for children under five years old^{2,3}. The United Nations' Sustainable Development Goal (SDG) 6 calls for universal access to safe drinking water. Groundwater is a major source of drinking water globally¹ – in many regions it is the only source of drinking water in the dry season – and faecal contamination of groundwater remains a major concern.



There is now strong evidence for the suitability of tryptophan-like fluorescence (TLF) for assessing the risk of faecal contamination in groundwater. TLF provides a robust and rapid *in-situ* screening tool to enable more rapid monitoring of drinking water quality to help assess progress towards SDG 6.

Background

Faecal contamination of drinking-water sources is typically assessed using bacterial indicators such as *Escherichia coli* or thermotolerant coliforms (TTCs). These culture-based indicators are time-consuming, taking up to 24 hours to report results, and are impractical for rapid surveys.

The evidence base for using TLF to assess contamination risk in groundwater in the peer-reviewed literature has grown considerably in the last 3 years⁴⁻¹⁰. TLF has been systematically compared with a range of conventional technologies and tested in a range of climatic and hydrogeological settings to assess its ability to identify microbiological contamination, based on WHO risk categories of colony forming units (cfu) per 100 mL¹¹ (whereby 0 = very low risk; 1-9 = low risk; 10-99 = intermediate risk; 100-999 = high risk; and >1000 = very high risk).

TLF is most accurate in waters with low dissolved organic carbon (DOC) and low-turbidity, such as groundwater. It is strongly correlated with current methods for measuring TTCs and is effective to infer faecal contamination by TTCs above 10 cfu, i.e. for intermediate risk sources and above.

Results are generated real-time, with stable readings are usually obtained after 1 minute. Results can also be recorded and captured digitally with some sensors. A day of field-based training is generally adequate to understand the methodology and good sampling protocols are essential to obtain robust results¹². TLF technology is commercially available and reagent-less. As such, it does not generate potentially hazardous waste, unlike many alternative techniques.

Evidence

Tryptophan is an amino acid associated with cellular activity and extracellular material, which fluoresces at low excitation and emission wavelengths. TLF sensors target the approximate excitation-emission wavelength pair, Ex280 nm/Em350 nm, in the region where the tryptophan signal is greatest.

Summary results presented here are from a standardised multi-country assessment including India, Kenya, Malawi, Uganda, and Zambia where TLF was tested against time-consuming culture-based methods for TTCs at >500 groundwater sources.

Correlation with TTCs: There is a strong correlation between TLF and TTCs ($\rho = 0.78$, Spearman's rank correlation coefficient).

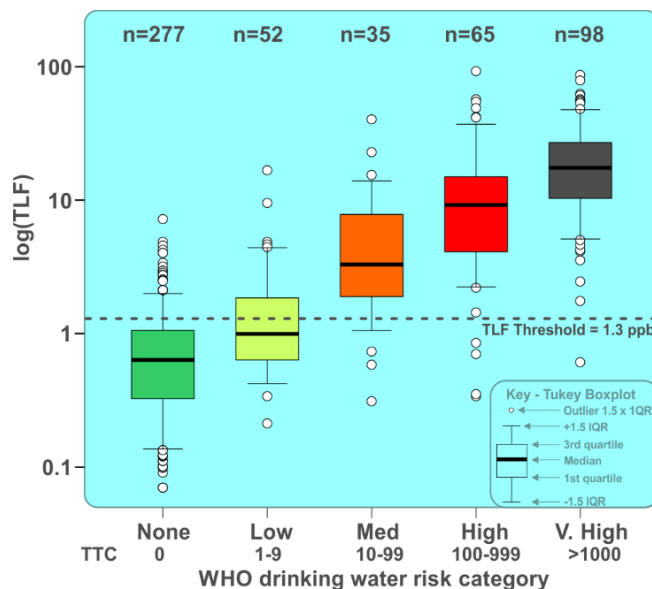


Figure 1. Comparison of groundwater TLF values with paired TTC results grouped by WHO risk categories

Figure 1 shows a comparison of TLF with TTCs obtained using culture-based methods, with TLF data grouped based on WHO risk categories¹¹. Significant differences exist between median TLF in different WHO risk categories.

TLF is best applied for groundwater assessments:

Variables that can attenuate or enhance the TLF signal in water include dissolved organic carbon (DOC), turbidity, temperature and pH. In most groundwaters, these do not vary appreciably and have minimal interference with the TLF measurements. However, in some groundwater and many surface waters, these variables can vary substantially for which corrections to fluorescence data may be a possible solution¹³.

TLF threshold to infer contamination risk: Based on the current groundwater data (Figure 1), a threshold of 1.3 parts per billion tryptophan (corresponding to 10 cfu/100 mL) has been tested and validated using logistic regression and false positive and false negative rates to assess TTC contamination⁸. This threshold is equivalent to being able to differentiate between sites classed as medium risk or greater (using TTC results) based on WHO risk categories¹¹, but was not able to classify contaminated sources with <10 TTC cfu/100 mL. This groundwater threshold matches that reported by Sorensen *et al.* (2018), which also included surface water data and *E. coli* results⁸.

Recommendations for future development

Commercial TLF sensors are already available on the market, yet, a key barrier to wider operational use is the relatively high capital cost of these sensors. Lower cost systems (c. £1000) are currently being developed and other improvements needed include better field calibration standards, improved stability of sensor standards, and employment of cuvette-based systems for sample analysis. Further

case studies applying this technique in new settings are needed to test the suitability more widely, particularly in groundwater systems with high DOC (either due to anthropogenic pollution or natural sources). The method could also be further compared to other new techniques for microbiological risk assessment as they become available, such as field based real-time polymerase chain reaction (PCR) methods.

Conclusions

Relying exclusively on standard culture-based methods for assessing faecal contamination in groundwater sources limit the ability to monitor progress towards SDG6 for improved drinking water quality. TLF provides a rapid screening tool for groundwater quality, which could help monitor and assess water quality risks at drinking water sources, water point integrity and the impact of specific interventions.

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