

Infection Control in the Age of Sustainability: Rethinking Healthcare Practices

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ABSTRACT

Background: Modern healthcare confronts an increasingly complex dilemma: balancing essential infection prevention protocols with mounting environmental concerns. While healthcare-associated infections pose immediate threats to patient safety, the environmental consequences of current infection control methods create longer-term risks to population health through climate change and ecological degradation. This review explores how healthcare institutions can reconcile infection prevention requirements with environmental stewardship, examining innovative approaches that preserve patient safety while reducing ecological impact.

Methods: Literature published from 2020 through 2024 was systematically reviewed, focusing on environmental consequences of infection control practices, emerging sustainable alternatives, and implementation frameworks for environmentally conscious infection prevention.

Results: Traditional infection control generates substantial environmental harm through resource-intensive manufacturing, extensive waste streams, and energy-demanding sterilization. However, recent innovations demonstrate that sustainable approaches often maintain—and sometimes exceed—traditional safety benchmarks while dramatically reducing environmental burden.

Conclusions: Healthcare organizations must urgently redesign infection control programs to address environmental imperatives without compromising patient safety. This transformation requires critical evaluation of existing practices, strategic adoption of sustainable technologies, and policy frameworks supporting environmental responsibility as a fundamental healthcare principle.

ARTICLE HISTORY

Received February 2024

Accepted March 2025

Published June 2025

KEYWORDS

Infection, Prevention,
Environmental Stewardship,
Healthcare Sustainability,
Medical Waste Reduction,
Green Healthcare.

Introduction

Healthcare's fundamental purpose—protecting human health—increasingly conflicts with its role as a major environmental pollutant. This paradox has become particularly acute in infection control, where practices designed to prevent disease transmission often contribute to environmental degradation that ultimately threatens the very health outcomes these measures seek to protect. The COVID-19 pandemic crystallized this tension, revealing how quickly infection control demands can overwhelm environmental considerations (Klemeš et al., 2020). Hospitals worldwide consumed unprecedented quantities of single-

use protective equipment, generating massive waste streams while depleting natural resources. Yet this crisis also sparked innovation, forcing healthcare leaders to question whether traditional approaches represent the only viable path to infection prevention.

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To cite this article: Chandio, A. S., Rind, N. A., Khuwaja, I., & Latif, A. (2025). Infection control in the age of sustainability: Rethinking healthcare practices. Archives of Management and Social Sciences, 2(2), 1–11.

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Publisher: Allied Nexus Publisher

Historically, infection control evolved through reactive responses to outbreaks and healthcare-associated infections. Each new threat prompted additional layers of protection—more disposable equipment, stronger disinfectants, stricter isolation protocols. While these measures undoubtedly saved lives, they developed without systematic consideration of environmental consequences, creating today's resource-intensive paradigm.

Contemporary healthcare generates approximately 6% of global greenhouse gas emissions, with infection control practices contributing substantially to this footprint (Lenzen et al., 2020). Single-use medical devices, energy-intensive sterilization processes, and complex waste disposal systems collectively represent one of healthcare's largest environmental impacts. The scale of this challenge has prompted urgent calls for transformation (Romanello et al., 2023).

Recent research challenges long-held assumptions about infection control effectiveness (Saravanos et al., 2024). Many resource-intensive practices demonstrate limited evidence for improved patient outcomes compared to simpler alternatives. This revelation opens possibilities for sustainable approaches that could reduce environmental impact while maintaining—or potentially improving—infection prevention outcomes.

Problem Statement

Healthcare's environmental impact extends far beyond energy consumption or waste generation—it represents a fundamental threat to the health outcomes healthcare seeks to protect. Climate change, resource depletion, and ecosystem destruction create conditions that facilitate disease emergence, antimicrobial resistance, and health inequities that disproportionately affect vulnerable populations.

Current infection control practices exemplify this contradiction. Hospitals worldwide generate between 0.16 and 3.95 kilograms of infectious waste per bed daily, with higher-income countries typically producing substantially more than their lower-income counterparts (Lim et al., 2024). This disparity reflects not only different standards of care but also varying approaches to resource utilization and waste management.

Manufacturing processes for infection control supplies demand enormous energy inputs. Single-use gowns require nearly one kilogram of CO₂ equivalent per unit, while face shields generate approximately 230 grams of greenhouse gases during production (Rizan et al., 2021). When multiplied across global healthcare systems, these seemingly modest per-unit impacts create massive cumulative environmental burdens.

Waste disposal compounds these manufacturing impacts. High-temperature incineration—commonly used for medical waste—produces over one ton of CO₂ equivalent per ton of waste processed (Lim et al., 2024). Alternative disposal methods offer some improvement, but most healthcare systems rely on energy-intensive approaches that contribute significantly to greenhouse gas emissions. The COVID-19 pandemic demonstrated how quickly infection control demands can overwhelm environmental safeguards. Personal protective equipment consumption increased exponentially, creating

supply shortages while generating unprecedented waste volumes (Chen et al., 2022). Mask production alone contributed an estimated 150,000 to 390,000 tons of marine plastic pollution annually during peak pandemic periods (Chowdhury et al., 2021).

Perhaps most troubling, many resource-intensive infection control practices lack robust evidence for superior effectiveness (Bearman et al., 2018; Most et al., 2024). Contact precautions for certain antimicrobial-resistant organisms, widespread use of single-use equipment where reusable alternatives could suffice, and excessive application of broad-spectrum disinfectants often represent institutional habits rather than evidence-based necessities.

Research Objectives

This narrative review seeks to examine how healthcare institutions can balance infection prevention imperatives with environmental responsibility through several interconnected investigations.

- Understanding the full scope of environmental impacts from current infection control practices represents the foundation for meaningful change. This examination encompasses not only direct effects like waste generation and energy consumption, but also indirect consequences including resource extraction, manufacturing pollution, and ecosystem disruption associated with medical supply chains.
- Identifying sustainable alternatives requires careful evaluation of emerging technologies, innovative practices, and evidence-based interventions that demonstrate potential for widespread adoption. This investigation considers both technical feasibility and practical implementation challenges across diverse healthcare settings and resource contexts.
- Analyzing implementation barriers provides crucial insights into organizational, regulatory, and cultural factors that influence sustainable practice adoption. Understanding these obstacles enables development of strategies for overcoming resistance while ensuring continued effectiveness of infection prevention programs.
- Developing integrated frameworks for decision-making represents perhaps the most critical objective. Healthcare organizations need practical tools for evaluating trade-offs between patient safety requirements and environmental considerations, enabling evidence-based choices that optimize both immediate health protection and longer-term environmental sustainability.

Current State of Knowledge

Evolution of Sustainable Thinking in Healthcare

Environmental consciousness in healthcare has progressed through several distinct phases, beginning with basic waste reduction efforts and evolving toward comprehensive sustainability frameworks that integrate environmental considerations into clinical decision-making (Al-Rawashdeh et

al., 2023). Early initiatives focused primarily on cost reduction through waste minimization, but contemporary approaches recognize environmental stewardship as intrinsically linked to health protection.

This evolution reflects growing understanding that environmental degradation directly threatens human health through multiple pathways (Romanello et al., 2023). Climate change facilitates disease vector expansion, extreme weather events disrupt healthcare delivery, and pollution contributes to respiratory and cardiovascular disease burdens that strain healthcare systems. These connections make environmental protection a legitimate healthcare imperative rather than merely an ethical consideration. Recent research has begun questioning fundamental assumptions underlying traditional infection control approaches (Saravanos et al., 2024). Many practices with substantial environmental costs demonstrate limited evidence for superior patient outcomes compared to less resource-intensive alternatives. This finding suggests significant opportunities for sustainable innovations that could improve both environmental and clinical performance.

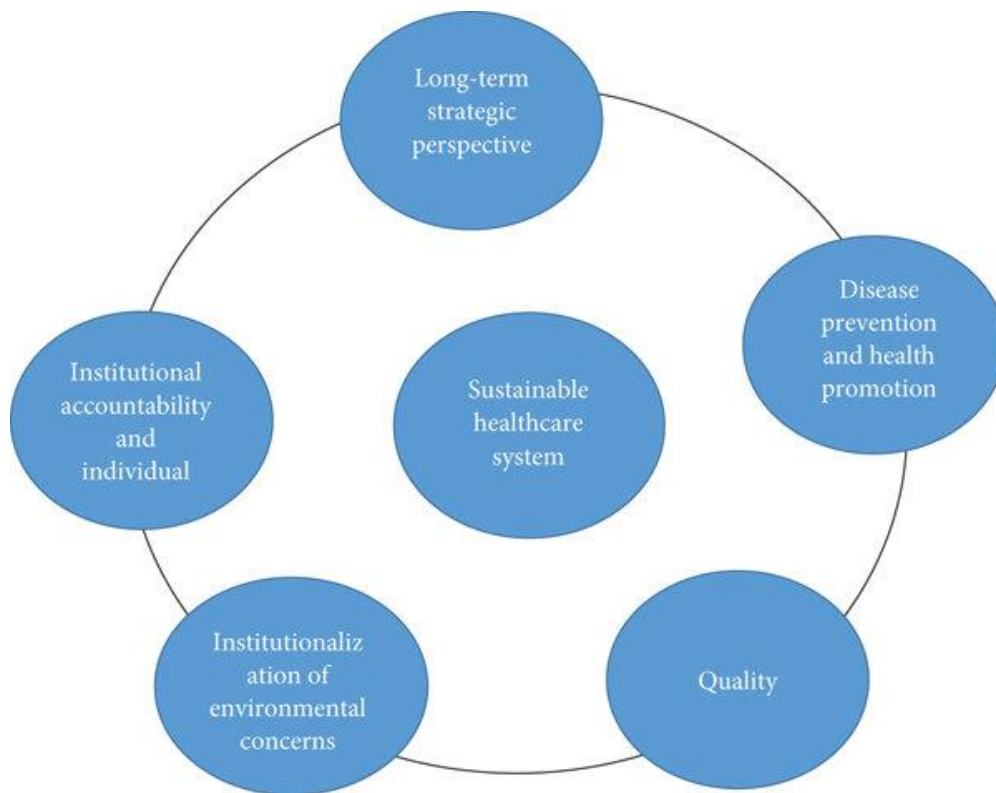


Figure-1 Integrated Healthcare Sustainability Model
(Pedawi & Alzubi, 2022)

Environmental Burden Assessment

Comprehensive lifecycle analyses reveal that infection control practices generate environmental impacts across multiple domains, from raw material extraction through manufacturing, transportation, use, and disposal (Vozzola et al., 2018). Personal protective equipment manufacturing represents a particularly carbon-intensive process, with complex supply chains spanning multiple continents and requiring petroleum-based feedstocks.

Sterilization processes contribute substantially to healthcare's energy footprint through high-temperature operations and chemical treatments (McGain et al., 2020). Steam autoclaving, while more efficient than some alternatives, still requires significant energy inputs, while chemical sterilization methods often involve environmentally problematic compounds that require careful handling and disposal.

Geographic variations in waste generation patterns reflect complex interactions between healthcare quality standards, economic development, regulatory frameworks, and cultural attitudes toward resource utilization (Lim et al., 2024). Higher-income countries consistently generate more medical waste per patient encounter, suggesting that some resource use may represent overconsumption rather than necessary clinical requirements.

Transportation networks add another layer of environmental impact, particularly for single-use items that require frequent replacement (Grimmond et al., 2021). Reusable systems can reduce transportation burdens, but optimal environmental benefits depend on regional manufacturing capabilities and distribution efficiency.

Emerging Sustainable Alternatives

Innovation in sustainable infection control has accelerated dramatically, driven partly by pandemic-related supply disruptions that forced healthcare organizations to explore alternative approaches (Doshi & Jaggi, 2024). Reusable isolation gowns have demonstrated comparable protection while reducing greenhouse gas emissions by approximately 30% per thousand uses compared to disposable alternatives (Vozzola et al., 2018).

Sharps disposal represents another area where sustainable innovations show clear benefits (Grimmond et al., 2021). Reusable containers eliminate plastic waste while reducing long-term costs, with some systems achieving over 80% reductions in carbon emissions compared to single-use alternatives. These systems also improve workplace safety through more robust construction and better engineering controls.

Contact precautions protocols have undergone significant reevaluation, with multiple healthcare systems successfully discontinuing routine isolation for certain antimicrobial-resistant organisms without observing increased transmission rates (Bearman et al., 2018; Most et al., 2024). These changes demonstrate how evidence-based practice evaluation can simultaneously improve patient experience and reduce environmental impact.

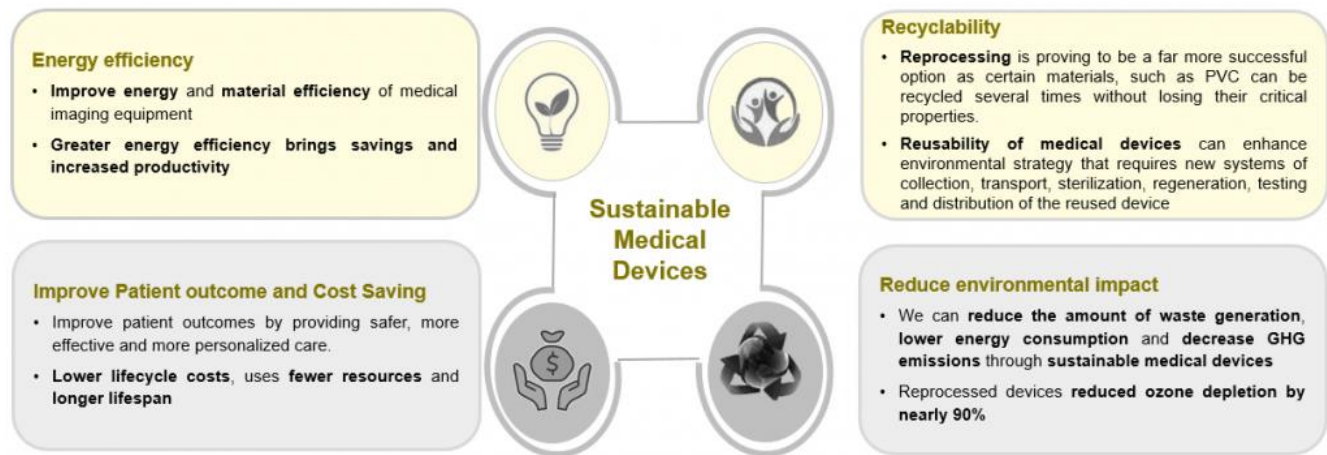


Figure-2 Impact of Sustainable Medical Devices
(Stellarix, 2022)

Implementation Challenges and Success Factors

Regulatory environments often inadvertently favor resource-intensive approaches through approval processes that emphasize risk minimization over balanced outcome assessment (World Health Organization, 2019). Medical device regulations typically require extensive safety documentation for reusable equipment while accepting single-use devices with less scrutiny, creating market incentives that discourage sustainable innovation.

Organizational culture within healthcare institutions frequently prioritizes perceived safety over evidence-based risk assessment, leading to practices that exceed evidence-based requirements (Al-Ghamdi et al., 2021). This tendency, while understandable given healthcare's high-stakes environment, can impede adoption of sustainable alternatives even when evidence supports their effectiveness.

Economic considerations present complex challenges, as sustainable alternatives often require higher upfront investments while providing cost savings over extended time periods (Mortimer et al., 2018). Healthcare procurement systems typically focus on immediate costs rather than total ownership expenses, creating financial disincentives for sustainable technologies despite their long-term economic advantages.

Successful implementation requires comprehensive organizational change management that addresses technical, cultural, and economic factors simultaneously (Kgosimore et al., 2023). Healthcare systems achieving significant sustainability improvements typically demonstrate strong leadership commitment, robust measurement systems, and stakeholder engagement strategies that involve frontline staff in sustainable practice development.

Theoretical Foundations

This analysis draws upon systems thinking approaches that recognize healthcare as embedded within larger ecological and social systems (Bouley et al., 2017). Environmental degradation ultimately undermines the health outcomes that infection control seeks to protect, creating compelling rationales for integrated approaches that consider both immediate patient safety and longer-term environmental sustainability.

Resource-based sustainability theory provides additional theoretical grounding, emphasizing finite environmental resources and the need for efficient utilization in healthcare delivery (Eckelman & Sherman, 2016). This perspective supports lifecycle thinking in equipment selection, evidence-based resource utilization, and circular economy principles that minimize waste through reuse and recycling strategies.

Social-ecological systems theory offers insights into complex interactions between human activities and environmental conditions that influence health outcomes (Buchan et al., 2022). This framework acknowledges that healthcare organizations operate within broader systems where environmental stewardship contributes to population health through multiple indirect pathways.

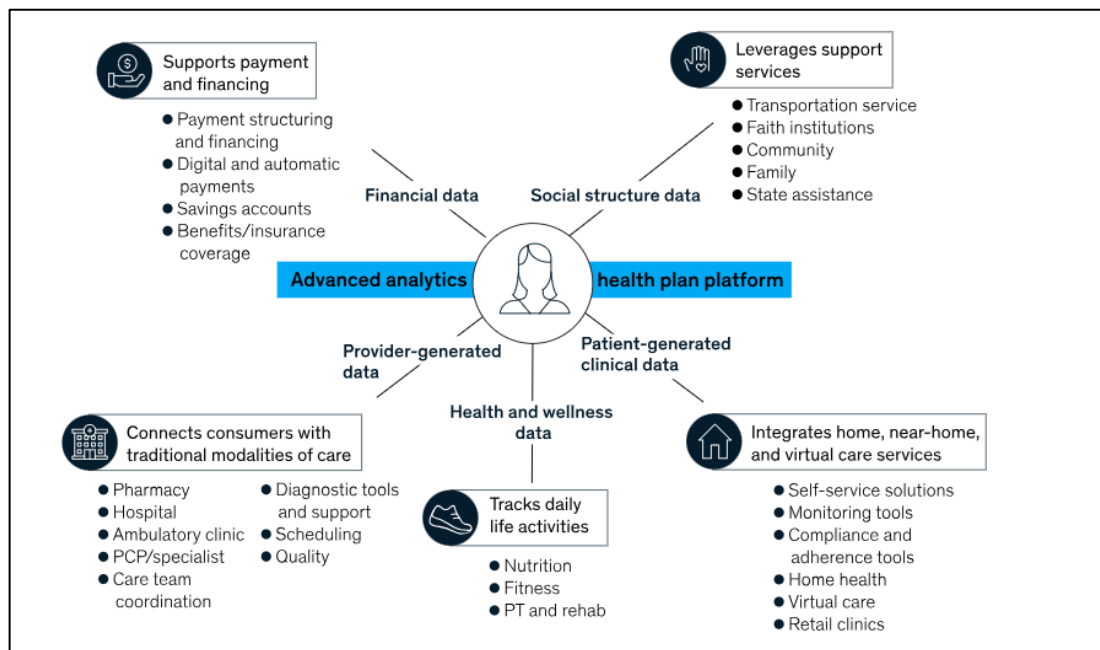


Figure-3 Healthcare Ecosystem Integration Framework
(McKinsey & Company, 2024).

Future Directions and Innovations

Technological advances continue expanding possibilities for sustainable infection control through materials science innovations, digital health applications, and process optimization technologies (Doshi et al., 2024). Biodegradable medical materials show promise for reducing plastic waste, while artificial intelligence applications could optimize resource utilization patterns and predict infection risks more accurately.

Telemedicine platforms offer opportunities to reduce infection transmission risks while minimizing transportation-related environmental impacts (Tennison et al., 2021). Remote monitoring technologies could enable earlier intervention while reducing healthcare facility utilization, particularly for routine follow-up care and chronic disease management.

Policy frameworks will play crucial roles in supporting widespread adoption of sustainable practices (MacNeill et al., 2017). Effective policies should align economic incentives with environmental goals, modernize regulatory standards to consider lifecycle impacts, and provide research funding for sustainable innovation development.

International cooperation and knowledge sharing could accelerate sustainable practice adoption across diverse healthcare contexts (World Health Organization, 2022). Successful innovations developed in resource-rich settings could be adapted for implementation in resource-constrained environments, while solutions developed for low-resource settings might offer efficiency lessons for all healthcare systems. Research priorities include comparative effectiveness studies of sustainable alternatives, development of comprehensive environmental impact databases for medical products, and implementation science investigations to understand adoption barriers and facilitators across different organizational contexts (Lim et al., 2024).

Conclusions and Implications

Healthcare stands at a critical juncture where traditional approaches to infection control must be fundamentally reconsidered in light of mounting environmental challenges (Romanello et al., 2023). The false dichotomy between patient safety and environmental protection has prevented healthcare organizations from pursuing innovative approaches that could optimize both objectives simultaneously. Evidence increasingly demonstrates that many resource-intensive infection control practices provide minimal additional safety benefits compared to more sustainable alternatives (Saravanos et al., 2024). This finding creates opportunities for healthcare organizations to reduce environmental impact while maintaining—and potentially improving—patient outcomes through more thoughtful, evidence-based approaches to infection prevention.

Successful transformation requires coordinated action across multiple levels, from individual healthcare organizations to national policy frameworks (Doshi & Jaggi, 2024). Healthcare leaders must champion evidence-based practice evaluation that considers environmental impacts alongside clinical outcomes, while policymakers must create regulatory and economic environments that support sustainable innovation.

The COVID-19 pandemic, despite its immediate environmental costs, has demonstrated healthcare's capacity for rapid adaptation when confronted with urgent challenges (Selvaranjan et al., 2021). This same adaptability must now be directed toward environmental sustainability, recognizing that climate change and ecological degradation represent health threats as serious as any infectious disease.

Future healthcare systems must integrate environmental stewardship as a core professional responsibility rather than an optional consideration (Al-Rawashdeh et al., 2023). This integration requires fundamental changes in professional education, organizational culture, and decision-making frameworks that recognize the interconnections between human health and environmental health.

The path forward demands collaboration between healthcare professionals, environmental scientists, policymakers, and industry partners to develop and implement solutions that protect both human health and planetary health (Lenzen et al., 2020). Only through such comprehensive approaches can healthcare fulfill its mission to promote health while safeguarding the environmental conditions that sustain life.

Author's Contribution

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Acknowledgments: None.

Disclosure Statement: The authors declare that there is no conflict of interest regarding the publication of this article. No financial, personal, or professional affiliations have influenced this study's research, analysis, or conclusions. All ethical considerations were upheld, and the findings were reported with integrity and transparency.

Funding: None.

References

1. Al-Ghamdi, S., Kabbachi, B., Alshancheeti, A., et al. Knowledge of infection prevention and control among healthcare workers and factors influencing compliance: a systematic review. *Antimicrob Resist Infect Control* 2021;10:86. <https://doi.org/10.1186/s13756-021-00957-0>
2. Al-Rawashdeh, M., Albqoor, M.A., Al-Jomar, M. et al. Unveiling the Symbiosis of Environmental Sustainability and Infection Control in Health Care Settings: A Systematic Review. *Sustainability* 2023;15(22):15728. <https://doi.org/10.3390/su152215728>
3. Bearman, G., Abbas, S., Masroor, N., et al. Impact of discontinuing contact precautions for methicillin-resistant *Staphylococcus aureus* and vancomycin-resistant *Enterococcus*: an interrupted time series analysis. *Infect Control Hosp Epidemiol* 2018;39(6):676-682. <https://doi.org/10.1017/ice.2018.57>
4. Bouley, T., Roschnik, S., Karliner, J., et al. Climate-Smart Healthcare: Low-Carbon and Resilience Strategies for the Health Sector. Washington, DC: World Bank Group; 2017.
5. Buchan, J.C., Thiel, C.L., Steyn, A., et al. Addressing the environmental sustainability of eye

- health-care delivery: a scoping review. *Lancet Planet Health* 2022;6(6):e524-e534. [https://doi.org/10.1016/S2542-5196\(22\)00116-1](https://doi.org/10.1016/S2542-5196(22)00116-1)
6. Chen, Z., Zhang, W., Yang, H., et al. A pandemic-induced environmental dilemma of disposable masks: solutions from the perspective of the life cycle. *Environ Sci Process Impacts* 2022;24(5):649-674. <https://doi.org/10.1039/d1em00476j>
7. Chowdhury, H., Chowdhury, T., Sait, S.M. Estimating marine plastic pollution from COVID-19 face masks in coastal regions. *Mar Pollut Bull* 2021;168:112419. <https://doi.org/10.1016/j.marpolbul.2021.112419>
8. Doshi, S., Vuppula, S., Jaggi, P. Healthcare Sustainability to Address Climate Change: Call for Action to the Infectious Diseases Community. *J Pediatric Infect Dis Soc* 2024;13(6):306-312. <https://doi.org/10.1093/jpids/piae029>
9. Doshi, S.M., Jaggi, P. Healthcare Environmental Sustainability Through an Infectious Diseases Lens. *J Pediatric Infect Dis Soc* 2024;13(6):305. <https://doi.org/10.1093/jpids/piae035>
10. Eckelman, M.J., Sherman, J. Environmental impacts of the US health care system and effects on public health. *PLoS One* 2016;11(6):e0157014. <https://doi.org/10.1371/journal.pone.0157014>
11. Grimmond, T.R., Bright, A., Cadman, J., et al. Before/after intervention study to determine impact on life-cycle carbon footprint of converting from single-use to reusable sharps containers in 40 UK NHS trusts. *BMJ Open* 2021;11(9):e046200. <https://doi.org/10.1136/bmjopen-2020-046200>
12. Kgosimore, K., Mwangi, W., Mitchell, B.G. Multimodal environmental cleaning strategies to prevent healthcare-associated infections. *Antimicrob Resist Infect Control* 2023;12:88. <https://doi.org/10.1186/s13756-023-01287-8>
13. Klemeš, J.J., Fan, Y.V., Jiang, P. The energy and environmental footprints of COVID-19 fighting measures - PPE, disinfection, supply chains. *Energy* 2020;211:118701. <https://doi.org/10.1016/j.energy.2020.118701>
14. Lenzen, M., Malik, A., Li, M., et al. The environmental footprint of health care: a global assessment. *Lancet Planet Health* 2020;4(7):e271-e279. [https://doi.org/10.1016/S2542-5196\(20\)30121-2](https://doi.org/10.1016/S2542-5196(20)30121-2)
15. Lim, O., Chua, W.Y., Wong, A. et al. The environmental impact and sustainability of infection control practices: a systematic scoping review. *Antimicrob Resist Infect Control* 2024;13:156. <https://doi.org/10.1186/s13756-024-01507-0>
16. MacNeill, A.J., Lillywhite, R., Brown, C.J. The impact of surgery on global climate: a carbon footprinting study of operating theatres in three health systems. *Lancet Planet Health* 2017;1(9):e381-e388. [https://doi.org/10.1016/S2542-5196\(17\)30162-6](https://doi.org/10.1016/S2542-5196(17)30162-6)
17. McGain, F., Muret, J., Lawson, C., Sherman, J.D. Environmental sustainability in anaesthesia and critical care. *Br J Anaesth* 2020;125(5):680-692. <https://doi.org/10.1016/j.bja.2020.06.055>
18. McKinsey & Company. (2024). The next wave of healthcare innovation: The evolution of ecosystems. McKinsey & Company. Retrieved July 18, 2025, from <https://www.mckinsey.com/industries/healthcare/our-insights/the-next-wave-of-healthcare-innovation-the-evolution-of-ecosystems>
19. Mortimer, F., Isherwood, J., Wilkinson, A., Vaux, E. Sustainability in quality improvement: redefining value. *Future Healthc J* 2018;5(2):88-93. <https://doi.org/10.7861/futurehosp.5-2->

20. Most, Z.M., Phillips, B., Sebert, M.E. Discontinuation of contact precautions for methicillin-resistant *Staphylococcus aureus* in a pediatric healthcare system. *J Pediatr Infect Dis Soc* 2024;13(2):123-128. <https://doi.org/10.1093/jpids/piae001>
21. Pedawi, S., & Alzubi, A. (2022). [Retracted] Effects of E-Government Policy on the Management of Healthcare Systems. *Applied Bionics and Biomechanics*, 2022(1), 5736530.
22. Rizan, C., Reed, M., Bhutta, M.F. Environmental impact of personal protective equipment distributed for use by health and social care services in England in the first six months of the COVID-19 pandemic. *J R Soc Med* 2021;114(5):250-263. <https://doi.org/10.1177/01410768211001583>
23. Romanello, M., Di Napoli, C., Green, C., et al. The 2023 report of the Lancet Countdown on health and climate change: the imperative for a health-centred response in a world facing irreversible harms. *Lancet* 2023;402(10419):2346-2394. [https://doi.org/10.1016/S0140-6736\(23\)01859-7](https://doi.org/10.1016/S0140-6736(23)01859-7)
24. Saravanos, G.L., Islam, M.S., Huang, Y. et al. Infection prevention and control programme priorities for sustainable health and environmental systems. *BMC Global Public Health* 2024;2:6. <https://doi.org/10.1186/s44263-023-00031-4>
25. Selvaranjan, K., Navaratnam, S., Rajeev, P., Ravintherakumaran, N. Environmental challenges induced by extensive use of face masks during COVID-19: a review and potential solutions. *Environ Chall* 2021;3:100039. <https://doi.org/10.1016/j.envc.2021.100039>
26. Stellarix. (2022). Sustainability and life cycle analysis in medical devices. Stellarix Insights. From <https://stellarix.com/insights/stellarix-perspectives/sustainability-and-life-cycle-analysis-in-medical-devices/>
27. Tennison, I., Roschnik, S., Ashby, B., et al. Health care's response to climate change: a carbon footprint assessment of the NHS in England. *Lancet Planet Health* 2021;5(2):e84-e92. [https://doi.org/10.1016/S2542-5196\(20\)30271-0](https://doi.org/10.1016/S2542-5196(20)30271-0)
28. Vozzola, E., Overcash, M., Griffing, E. Environmental considerations in the selection of isolation gowns: a life cycle assessment of reusable and disposable alternatives. *Am J Infect Control* 2018;46(8):881-886. <https://doi.org/10.1016/j.ajic.2018.02.002>
29. World Health Organization. Global report on infection prevention and control. Geneva: World Health Organization; 2022. Available at: <https://www.who.int/publications/i/item/9789240051164>
30. World Health Organization. Minimum requirements for infection prevention and control programmes. Geneva: World Health Organization; 2019.