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1	The release of wastewater contaminants in the Arctic: A case study from Cambridge Bay,
2	Nunavut, Canada.
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#### 22 Abstract

The treatment of municipal wastewater in the Arctic is challenging due to a variety of 23 financial, operational, climatic and technical issues. To better understand the efficacy of current 24 wastewater treatment in this region and the hazard posed to receiving waters, we assessed the 25 occurrence of contaminants (i.e., pharmaceuticals, antibiotic resistance genes and nutrients) as 26 27 they moved through a lagoon-based treatment system in Cambridge Bay in Nunavut, Canada. Wastewater treatment in this community is performed by the use of a lagoon-tundra wetland 28 system that is discharged into the marine environment and is representative of current common 29 30 practices throughout the region. In 2014, samples were collected before and during lagoon discharge from two locations in the main lagoon, one location downstream from the lagoon 31 effluent and three locations offshore. Grab samples were collected to measure nutrients (e.g. total 32 nitrogen and phosphorus) and the presence of antibiotic resistance gene-bearing microbes, and 33 Polar Organic Chemical Integrative Samplers (POCIS) were deployed to collect passively 34 organic contaminants in all locations. A total of six pharmaceuticals were detected from a screen 35 of twenty-eight analytes during the study: atenolol, carbamazepine, clarithromycin, metoprolol, 36 sulfamethoxazole and trimethoprim. The greatest concentrations of nutrients, antibiotic 37 resistance genes (ARGs) and pharmaceuticals were found in sampling locations within the 38 treatment lagoon. Offshore of the release point, we observed limited to no detection of 39 pharmaceuticals and ARGs and no change in total nitrogen and phosphorus from pre-release. We 40 41 conclude that the current concentrations of monitored pharmaceuticals do not pose a significant hazard at this time to aquatic organisms in Cambridge Bay. 42

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44 Keywords: Arctic, pharmaceuticals, wastewater lagoons, risk assessment, nutrients

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Capsule statement: Baseline exposure data for nutrients, antibiotic resistance genes and
 pharmaceuticals in surface and seawater at Cambridge Bay is introduced, alongside an
 ecotoxicological hazard assessment.

49

# 50 1. Introduction

Organic contaminants in wastewater effluents, including pharmaceuticals, are released to 51 aquatic ecosystems and have been found to pose a hazard under certain conditions to receiving 52 53 waters; this poses a challenge for current wastewater treatment practices in many regions (Fent et al., 2006). Some pharmaceuticals such as anti-inflammatory drugs, antidepressants and 54 antibiotics are not completely eliminated in the human body and can therefore enter the sewage 55 system as parent compounds and their biologically active metabolites (Vasskog et al., 2009). 56 Many current wastewater treatment systems are not specifically designed to eliminate organic 57 contaminants and, as a consequence, many of these pollutants are able to persist through 58 wastewater treatment processes (Gunnarsdottir et al., 2013). In addition, monitoring actions for 59 most micropollutants have not been well established in most wastewater treatment facilities 60 61 (Bolong et al., 2009). Another concern is the presence of organisms that carry antibiotic resistance genes (ARGs), which can threaten public health (Rowan, 2011). Antibiotic resistance 62 genes have been detected in the environment as a result of the prevalent human and veterinary 63 64 use of antibacterial and antimicrobial products (Kummerer, 2009). Nutrient enrichment has also been a potential hazard to the aquatic environment with increasing eutrophication in freshwater 65 and enclosed marine systems downstream of areas of urbanization (Smith, 2003). Algal blooms 66 67 can block light from getting into the aquatic environment. With enough overgrowth, they can

prevent oxygen from getting into the water, thereby, endangering plants and animals. While the 68 releases of effluents have been characterized for many countries and regions of the world (Luo et 69 al., 2014), little to no work has been performed to quantify organic micropollutants and their risk 70 in polar regions because of the difficulties associated with travel logistics and sample holding 71 limitations. Therefore, the collection of sample replicates and comprehensive datasets suitable 72 73 for statistical analysis is highly constrained in these regions. As a consequence, there is a lack of understanding of environmental risks, system performance and treatment mechanisms associated 74 with the treatment systems in polar regions (Chouinard et al., 2014). 75

76 Some studies have been performed in Arctic environments for the screening of pharmaceuticals and personal care products in wastewaters. For example, Weigel et al. (2004) 77 studied the prevalence of selected pharmaceuticals in different sewage samples from Tromsø in 78 Norway as well as in the seawater from Tromsø-sound, the recipient of wastewater. The selected 79 pharmaceuticals were, among others, ibuprofen, and its metabolites, and the insect repellent 80 N,N-diethyl-3-toluamide (DEET) as well as caffeine, which was included as a tracer for 81 domestic sewage. Emnet et al. (2015) studied the occurrence of personal care products in two 82 Antarctic research stations, detecting six analytes in treated wastewaters, including the UV filters 83 84 4-methyl-bezylidene camphor. 2-hydroxy-4-methoxybenzophenone and 2.4dihydroxybenzophenone, the plastic monomer 2,2-bis(4-hydroxyphenyl)-propane, the steroid 85 hormone estrone and the antimicrobial triclosan. These compounds were detected at 86 87 concentrations comparable to those reported for international coastal waters adjacent to significantly greater human populations (Balmer et al., 2005). 88

In many regions of the Arctic, the release of sewage with minimum or no treatment can have consequences for the receiving environment due to high vulnerability of the Arctic

91 ecosystem to environmental contaminants (Gunnarsdottir et al., 2013). Kallenborn et al. (2008) reported that pharmaceutical residues are degraded slower in Arctic environments compared to 92 release scenarios in lower latitudes. In their study a set of nine different antidepressants and their 93 transformation products were analyzed in receiving seawater from two locations in Norway, one 94 of them in a northern region. Increased environmental stability of these compounds was detected 95 in the Arctic environment compared to the temperate location. The removal of pharmaceutical 96 residues by photodegradation is limited during the Arctic polar night and the intensity of sunlight 97 (even continuously during periods of midnight sun) at other times of the year are less intense 98 99 than that of more temperate regions. Both limited photodegradation during the winter and the cold Arctic climate can slow down the degradation rate of pharmaceutical residues in the 100 environment (Schwarzenbach et al., 2003). 101

102 Arctic communities frequently experience several challenges in order to perform adequate treatment of their wastewaters. Characteristics such as geographical remoteness, adverse weather 103 and lack of basic services are common in many communities and make wastewater treatment, 104 whenever possible, a difficult task (Yates et al., 2012). The scarcity of accredited laboratories for 105 compliance testing and the necessity for trained personnel to manage wastewater facilities are 106 challenges that need to be overcome by these communities on a daily basis. The subsistence 107 fishery is a significant industry in many Arctic coastal regions, for which pollutant contamination 108 of marine species exploited for human consumption is a major concern. Exposure to 109 110 micropollutants and their uptake in the food web can have hazardous effects on human health and the environment through bioaccumulation and biomagnification of chemicals (Gunnarsdottir 111 et al., 2013). 112

The Canada Health Act ensures that the majority of health services are publicly funded for all Canadians, with administration occurring at the provincial and territorial level. Despite this universality of health care, some differences occur in the health status of aboriginal and nonaboriginal Canadians. First Nations populations experience greater rates of mental illness, suicide, diabetes, asthma, cardiovascular disease, tuberculosis, hepatitis, syphilis and HIV/AIDS than non-aboriginal populations (Romain, 2013). This can influence the amount of pharmaceuticals that are needed to treat these diseases in Northern Canadian communities.

To begin to address the need for knowledge about wastewater contaminants exposure in 120 the Arctic, it is needed to quantify the types and quantities of nutrients and micropollutants in 121 lagoon discharge effluents and receiving waters. Such an effort would allow a partial 122 understanding of the possible hazards associated with wastewater discharges into receiving 123 124 environments. In this study, we examined the efficacy of wastewater treatment under arctic conditions, by assessing the occurrence of selected wastewater contaminants attenuation and 125 release from a wastewater treatment facility in Cambridge Bay, Nunavut, Canada. Our objectives 126 were: first, to obtain recent exposure data for the wastewater contaminants in Cambridge Bay, 127 regarding to the concentrations of nutrients (total nitrogen and phosphorus), ARGs and 128 pharmaceuticals; and second, to provide a baseline of the current state of wastewater treatment in 129 Cambridge Bay, in anticipation of the eventual instalment, expected by 2017, of the Canadian 130 High Arctic Research Station (CHARS), a scientific facility for Arctic research, as well for 131 132 expanding populations in the Arctic in general. Of particular interest was the exposure data at the water intake point that CHARS will eventually use for research purposes. We were also 133 interested on assessing the facility for evidence of any leaky sewage infrastructures, specifically 134 135 at Finger Bay. We hypothesize that the wastewater contaminants in Cambridge Bay do not pose

a significant risk at this time to the marine environment, and that the lagoon-wetland system in
this community has the ability to perform partial attenuation on nutrients, pharmaceuticals and
antibiotic resistance genes.

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## 140 2. Materials and Methods

141 *2.1. Study location* 

Cambridge Bay is located in the territory of Nunavut in the Canadian Arctic. It has a population of approximately 1,400. Mean monthly temperatures range from a maximum and minimum, respectively, of -28 °C and -35 °C in January to 13 °C and 5 °C in July (Government of Canada, 2014). In 2017CHARS will become operational. This will likely have an impact in the community in terms of increases in population and use of water resources, including wastewater disposal and treatment. This study provides a baseline for current wastewater impacts prior to CHARS' opening.

The wastewater system monitored at Cambridge Bay is comprised of a wastewater lagoon, formerly a series of natural lakes, that performs primary treatment and is discharged once a year, during the summer, into a small hydrologically-isolated natural tundra wetland. Wastewater then is released through an open channel into the marine environment. Municipal sewage from household sewage tanks is regularly transported to the lagoon by sewage trucks that perform dumping runs year-round.

155 2.2. Sample collection

The selection of sampling sites was done in consultation with local municipal authorities with an overarching aim of characterizing the composition of wastewaters and receiving waters for the target analytes. We were also interested in assessing risk to CHARS intake by wastewater

159 and the possibility of sewage leakiness into Finger Bay. Water was sampled from six selected locations around the study site (Figure 1). These were: approximately 20 meters away from a 160 new wastewater drop off point (Lagoon Input 1); approximately 20 meters away from an older 161 drop off point (Lagoon Input 2); at the outflow of the natural tundra wetland (Wetland); 162 approximately 100 meters offshore of the primary discharge point (approximately 100 meters 163 from the Wetland site) to the bay (Outfall); at the seawater intake point for CHARS studies 164 (CHARS); and at a previously used run-off discharge point culvert, currently closed, located 165 around 300 meters west from the main discharge point (Finger Bay). No significant rain events 166 were registered during the sampling. Pharmaceuticals were passively sampled using triplicate 167 POCIS (Environmental Sampling Technologies, St Joseph, MO) in the "pharmaceutical" 168 configuration as described by MacLeod and Wong (2010). Sampling was performed both before 169 170 and during release of wastewater from the lagoon. Pre-release POCIS sampling was performed from July 25 to August 8, 2014 for inland locations, and from July 26 to August 9 for offshore 171 locations. Wastewater release occurred from August 28 to September 5 with POCIS sampling 172 performed from August 29 to September 8 at all locations. Grab-sampling for nutrients 173 (composite sample) and antibiotic resistance genes (ARGs; triplicate sample) was conducted on 174 July 25 in the pre-release stage, and on September 3 during release. Field blanks immersed in 175 nanopure water (18 M $\Omega$ -cm, Millipore, Billerica, MA) in the appropriate containers were opened 176 during sampling to determine the extent of contamination. Samples were kept on ice within 24 177 178 hours after the sampling for transport to the local laboratory, and shipped on ice back to Winnipeg for processing.Samples for nutrients were collected in 50 mL falcon tubes. Personnel 179 wore gloves disinfected with 70% isopropanol while handling ARGs samples which were 180 181 collected in autoclaved 500 mL polyethylene bottles pre-release (July 25) and during release

(September 3) from all sampling locations. Bottles were rinsed three times with sample water before being filled to the top with no headspace. Field blanks filled with nanopure water (18 M $\Omega$ -cm, Millipore, Billerica, MA) in the appropriate containers were opened during sampling to determine the extent of contamination. Samples were kept on ice within 24 hours after the sampling for transport to the laboratory, where ARGs samples were filtered in a sterile environment. These filters were kept at -20°C until shipment to the University of Strathclyde for antibiotic resistance genes analysis.

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#### 190 *2.3. Determination of pharmaceuticals and nutrients*

We followed the methods of Carlson et al., (2013), for the analysis of pharmaceuticals. 191 Ultra high-performance liquid chromatography-tandem mass spectrometry (UHPLC/MS/MS) 192 193 with isotope dilution was used to quantify chemicals of interest in water samples. These compounds included a suite of twenty-eight commonly-used micropollutants frequently found in 194 wastewaters (Fatta-Kassinos et al., 2011), including  $\beta$ -blockers (e.g. metoprolol); antidepressants 195 (e.g. fluoxetine); anticonvulsant drugs (e.g. carbamazepine) and macrolide (e.g. clarithromycin) 196 and sulfonamide (e.g. sulfamethazine) antibiotics. Limits of quantification (LOQ) are found in 197 Table S1, and other quality assurance/quality control parameters details in Carlson et al. (2013). 198 Time-weighed average (TWA) concentrations were calculated by dividing the determined mass 199 of chemical (ng) in the sampler by the sampling rate (L/d) times the deployment time (d) for all 200 201 detected pharmaceuticals, making use of sampling rates (Table S2) found in the literature (MacLeod et al., 2007; Bartelt-Hunt et al., 2011). Concentrations of nutrients (e.g. total nitrogen 202 and total phosphorus) were determined before and during discharge following standard methods 203 204 (APHA, 2005).

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# 2.4. Hazard assessment for detected pharmaceuticals

A hazard assessment was performed for detected compounds by calculating hazard 207 quotients (HQs) using standard tests and endpoints from aquatic toxicological studies, 208 particularly for primary producers, invertebrates and fish. Briefly, estimates for effective 209 concentrations (EC50) or lethal concentrations (LC50) were obtained through a literature search. 210 For added conservatism, we employed an uncertainty factor of 1000 to the lowest EC50 or LC50 211 (Waiser et al., 2012). The maximum measured environmental concentration was then divided by 212 213 the lowest reported effect concentration (typically freshwater, as marine organism tests were lacking) to obtain the hazard quotient. Hazard quotients greater than 1 were considered to be of 214 concern while those compounds with HQ values less than 1 were considered less likelyto pose a 215 216 concern.

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# 218 *2.5. Determination of antibiotic resistance genes*

Antibiotic resistance genes were quantified from cells harvested on filters following cell 219 disruption (FastPrep, MP Biomedicals; 2 cycles at 30 s each at 6.0 setting) and DNA purification 220 221 (MoBio PowerClean Soil DNA kit; Cambio, Cambridge, UK), similar to methods previously used (Anderson et al., 2015; Cardinal et al., 2014). A multiplex assay was used to target an array 222 of tetracycline resistant genes (Ng et al., 2001), sulfonamide resistant genes (Pei et al., 2006) and 223 224 16S-rRNA was quantified as a measure of 'total bacteria'. Quantitative PCR was conducted using a BioRad iQ cycler (BioRad, Hercules, CA) using ssoFast EvaGreen reagents (BioRad) 225 and 500 nM primer concentrations. All samples were diluted 1:100 with molecular grade water, 226 227 as reactions were predetermined to be most efficient at those sample concentrations; standards

and post-analytical melting curves were generated (Smith et al., 2004) to verify PCR reactionsquality and quantify results.

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### 231 *2.6. Statistical analysis*

Changes in concentrations of pharmaceuticals, as well as abundance of ARGs, from before and during release were assessed using a Student's paired *t*-test. Concentration data are presented as mean  $\pm$  standard deviation (St. Dev) unless otherwise indicated. Differences were considered significant at p<0.05.

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## 238 **Results and Discussion**

239 *3.1. Nutrients* 

Nutrient samples had to be combined in order to measure concentrations at many sites, particularly those offshore given very low levels there (Table 1). Thus, only a single measurement was made per site per sampling time, so our discussion of changes in concentrations is qualitative in nature.

Total nitrogen showed values over 10 mg/L for the lagoon sites both before and during release measurements. Concentrations at Lagoon Input 1 and Lagoon Input 2 showed similar levels at both times, with the Wetland site having an increase in concentration after the wastewater discharge started. There was no apparent reduction in the concentration of nitrogen in the lagoon or the wetland in the two time periods. Locations offshore (e.g. Outfall, CHARS) showed much lower concentrations. Total phosphorus levels were approximately 2 mg/L for both lagoon sites prior to wastewater discharge. After the discharge commenced, phosphorus 251 levels in the wetland were elevated to approximately 2 mg/L as well, with no apparent reduction from additional wetland treatment. Phosphorus levels appear to be greater and nitrogen values 252 appear to be lesser than the maximum values recommended for Canadian provinces such as 253 Manitoba, in which limits of 1 mg/L total phosphorus and 15 mg/L total nitrogen exist for 254 wastewater effluents discharged to a water body (Manitoba Water Stewardship, 2011). However, 255 policies for communities in the far north have not yet been defined and a joint governmental 256 commission has been assigned to define them by 2019 (CCME, 2014). Considerable dilution was 257 observed for all locations offshore (e.g. Outfall, CHARS), which was consistent with the 258 259 nitrogen measurements. Finger Bay showed reduced levels for both total nitrogen and phosphorus, which suggests that there is little possibility of runoff from the main lagoon to this 260 location contrary to prior speculations that this was a route of contamination from the lagoon to 261 262 the bay. The levels of phosphorus we measured pre-release are comparable to that in the water column at the center of Cambridge Bay and at Dease Strait, a waterway immediately west of 263 Cambridge Bay (0.01-0.04 mg/L, C. J. Mundy, unpublished data). Concentrations of phosphorus 264 at the Outfall site are roughly twice those levels, suggesting localized effects of phosphorus that 265 are not evident at points farther away in the bay (Table 1). While nutrient levels during release 266 267 are likely locally elevated relative to concentrations in the greater Canadian Arctic (Tremblay et al., 2015), more work is warranted to examine to what extent these added nutrients may 268 influence the local ecosystem of Cambridge Bay and Dease Strait. 269

No apparent nutrient removal was observed during discharge as a result of lagoon-wetland treatment. As noted, statistical analysis of nutrient concentrations was not possible. Nor can we rule out the possibility that nutrient concentrations may have been affected by heterogeneous distributions within different locations of the lagoon. That having been said, the data obtained in 274 this study differ from the results obtained in a previous work by Yates et al. (2012), in which three larger lagoon-wetland systems in Nunavut (Arviat, Whale Cove and Coral Harbour) were 275 studied, observing reductions up to 84-99% for NH<sub>3</sub>-N and 80-99% for total phosphorus. It is 276 known that the community of Arviat make use of berms and channels to direct wastewater flow 277 away from the ocean and to keep a longer residence time in the wetland (Wooton et al., 2008), 278 whereas in the Cambridge Bay wetland the residence time of wastewater is limited by the 279 landscape topography and the scarce available vegetation. It is yet unclear which mechanisms 280 play the most important role in wastewater treatment in the Arctic. Wetland size and vegetation 281 282 coverage as well as the potential for filtration and sedimentation of suspended solids and adsorption of nutrients within the soil and water column can play a significant role. 283

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### 285 *3.2. Pharmaceuticals*

Of the screened twenty-eight organic micropollutants, only six pharmaceuticals were 286 detected above their LOQ at any of the locations. These were atenolol, clarithromycin, 287 metoprolol, sulfamethoxazole, trimethoprim and carbamazepine, detected at least once in ng/L 288 levels (Figure 2). For the detected pharmaceuticals, the greatest concentrations were measured at 289 the Lagoon Input 1 and 2 sites, although some differences in concentration could be seen 290 between both of the dumping sites. Most locations offshore experienced considerable dilution 291 with seawater, which was reflected in significantly lower concentrations for all of the passively 292 293 sampled contaminants at Outfall, CHARS and Finger Bay. Although POCIS deployment times were different before and during discharge (14 days versus 9 days), steady state conditions for 294 POCIS are typically reached within six days (Vermeirssen et al., 2012) 295

296 The greatest concentration of atenolol was 97 ng/L (Lagoon Input 1). Detected levels were significantly different (p<0.05) between Lagoon Input 1 and Lagoon Input 2 sites both before 297 and during the discharge. There was a significant reduction of 45% observed between Lagoon 298 Input 2 and Wetland (p < 0.05) during the wastewater release, and heavy dilution at locations 299 offshore, with most sites observed to be at non-detectable levels. These results suggest processes 300 301 within the wetland (e.g. sorption to plants, microbial degradation) may reduce concentrations of atenolol under Arctic conditions. A more efficient removal of atenolol has been observed in 302 more southern locations in Canada, with removal rates up to 98% for example within a sewage 303 304 lagoon in Dunnottar, Manitoba under temperate conditions (Anderson et al., 2015).

Concentrations of carbamazepine were generally below 100 ng/L in both lagoon sites, with 305 greater concentrations reported in the Wetland site both before and during discharge. No 306 apparent removal was observed as a result of wastewater passage through the treatment wetland 307 (p<0.05). Offshore locations showed levels below LOQ. Persistence of carbamazepine during the 308 Arctic winter was observed, with a concentration of 116 ng/L in the hydrologically isolated 309 wetland prior to discharge. While no measurements of pharmaceuticals occurred during the 310 winter, we note that this shallow wetland system and the offshore locations are predominantly or 311 completely frozen over the winter. This would presumably result in no removal of analytes by 312 either microbial activity or photodegradation (i.e., light penetration would be prevented almost 313 completely by ice cover) until summer melt. 314

The greatest concentration of sulfamethoxazole was 274 ng/L; this was detected at the Lagoon Input 2 site during wastewater discharge. Concentrations between lagoon sites were significantly different both before and during discharge (p<0.05), with some attenuation observed after wetland treatment, reaching 151 ng/L (45% removal, p<0.05). Levels offshore

were non-detectable both before and during discharge. Unlike this study, Conkle et al. (2008) noted over 90% removal of sulfonamides on a temperate wastewater facility, however, the differences may have been as a result of significantly greater temperatures and a 27-day retention period compared to a drastically colder weather and shorter retention time at Cambridge Bay facility of 1-2 days

Trimethoprim was detected in concentrations under 30 ng/L at the lagoon and wetland sites. During wastewater release, the wetland concentration was 9.8 ng/L after significant attenuation (p<0.05) occurred between the lagoon and the wetland. Finally, clarithromycin and metoprolol were detected at both of the lagoon sites and also in the wetland at levels below LOQ. At the offshore sites, both compounds were non-detectable, which is consistent with what was observed for all contaminants studied.

The presence or absence of specific pharmaceuticals depends partially on the residence 330 time within sewage holding tanks, prior to entry into sewage lagoons. While photodegradation is 331 unable to occur in septic tanks, other degradative processes like anaerobic microbial-mediated 332 biotransformation could occur. Consequently, the most labile compounds were likely partially 333 degraded to an unknown extent. Sorption of pharmaceuticals to septic tank particulates may also 334 335 occur. Photodegradation and biotransformation are typically the most important processes for the attenuation of organic micropollutants in effluent-receiving waters. Consequently, optimization 336 of conditions for these processes (e.g. by using extended periods of treatment in sewage lagoons) 337 338 can effectively minimize or prevent environmental exposure to biologically active levels of these contaminants (Ying et al., 2009). 339

To the best of our knowledge, there are no reported data for pharmaceuticals from wastewater systems from Northern Canada. Nevertheless, a larger amount of information (Table

342 3) is available for treated lagoon wastewaters using passive sampling of more southern regions in Canada, including various works done in the province of Manitoba (Anderson et al., 2013; 343 Anderson et al., 2015; Carlson et al., 2013) and Alberta (MacLeod and Wong, 2010). At 344 Cambridge Bay, all detectable compounds had greatest concentrations at either the lagoon or the 345 wetland sites and were mostly non-detectable at locations offshore. Atenolol, carbamazepine, 346 sulfamethoxazole and trimethoprim were detected in the Cambridge Bay facility at lower levels 347 compared to the data obtained at Dunnottar, Manitoba (Anderson et al., 2015). On the other 348 hand, atenolol, sulfamethoxazole and trimethoprim were detected in greater levels than in the 349 350 Grand Marais wastewater treatment facility. Levels of drugs were similar in wastewaters of Cambridge Bay and Lac la Biche, Alberta (MacLeod and Wong, 2010). 351

There are several factors that likely account for the differences in pharmaceutical levels 352 among these locations. One factor is population, with greater populations implying greater 353 loadings and impact on wastewater release. The populations served by the treatment facilities of 354 the southern Canadian sites (Table 3) are all on the order of several thousand, with some 355 seasonal variability. For example, the Dunnottar population, a popular regional summer resort 356 (Anderson et al., 2015) is several times greater than that of Cambridge Bay during the summer. 357 However, similar per capita use of drugs may result in similar concentrations in wastewaters 358 (MacLeod and Wong, 2010), which appears to be the case based on our comparisons (Table 3). 359 Another factor is temperature, given the fact that colder temperatures in Nunavut can cause 360 361 treatment mechanisms such as sorption to be slower and less efficient when compared to temperate locations, as it has been previously observed in Norway (Kallenborn et al., 2008). 362 Both factors are likely in play, confounding prediction of pharmaceutical levels in wastewaters. 363

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# 365 *3.3. Risk assessment for detected pharmaceuticals*

Hazard quotients (HQs) were calculated for each organic contaminant based upon toxicity 366 data reported in the literature for primary producers, invertebrates and fish (Table S3). Most 367 compounds had an HQ less than 1, ranging from values between 10<sup>-6</sup> and 10<sup>-1</sup>. Only 368 clarithromycin presented an HQ greater than 1 for the algae *Pseudokirchneriella subcapita*, 369 which indicates that there is a potential for growth inhibition of algal species at concentrations 370 such as those detected in lagoon and in the wetland. While the HQ for clarithromycin was greater 371 than 1, the concentration level used for calculation may not be necessarily representative of what 372 could be found in the entire lagoon, the use of 1000-fold uncertainty factor adds a high degree of 373 conservatism. As well, in euthrophic environments, such as these lagoons, excess nutrients can 374 mitigate the effects of compounds that exhibit herbicidal activity (Baxter et al., 2013). For the 375 rest of the detected pharmaceuticals, we can conclude that there is likely no significant hazard to 376 aquatic life due to the low concentrations at which they were detected. We did lack Arctic and 377 marinespecific tests that would reduce the uncertainty and did not assess for the effect of 378 mixtures of chemical stressors. We do recommend the development of standard toxicity tests 379 with Arctic marine organisms to help address this uncertainty 380

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# 382 *3.4. Abundances and removal of ARGs*

Total bacterial populations were determined by means of the abundances of 16S rRNA genes. Their presence was greatest in the lagoon sites in both sampling periods: before the wastewater discharge started ( $10^{8.0}$  genes/mL in Lagoon Input 1 and  $10^{7.8}$  copies/mL in Lagoon Input 2), and during wastewater discharge ( $10^{7.4}$  genes/mL in Lagoon Input 1 and  $10^{7.5}$ copies/mL in Lagoon Input 2) (Table 2). Overall, the abundances of 16S rRNA genes were similar (i.e., differences found were not greater than one order of magnitude) to levels reported at more southern locations in Canada (Anderson et al., 2015). Comparing concentrations before and during wastewater discharge, gene abundances did not change significantly (paired t-test,  $t_5 = -$ 1.46, p = 0.203) and their distribution pattern remained similar (r = 0.965, p = 0.002) along the waste stream.

Clusters of tetracycline resistance and sulfonamide-resistance genes were analyzed and the results were summed to facilitate assessment of resistance patterns. The greatest abundances of tet<sup>R</sup> (sum of tetracycline resistance genes) and sul<sup>R</sup> (sum of sulfonamide resistance genes) were found in the primary lagoon, at the two wastewater drop-off locations, being Lagoon Input 2 the one with the greatest response, with some attenuation through the wetland (Table 2).

Specifically in terms of the tetracycline resistance genes, differences from lagoon levels to offshore levels were around one order of magnitude during discharge, with locations after the wetland having reductions most likely due to dilution. Outfall was the sampling spot with the lower amount of tet<sup>R</sup> genes before and after discharge. Distribution of concentrations before and during discharge was similar (r = 0.941, p = 0.005), but became lower after discharge (paired ttest,  $t_5 = 3.66$ , p = 0.015) quite possibly due to dilution with water from the environment (e.g. existing surface water and/or groundwater seeps)

Sulfonamide resistance genes were more highly concentrated in the lagoon and wetland, and before discharge declined rapidly (2-3 orders of magnitude) following the wetland. During discharge, gene concentrations were variable at the two drop-off points in the lagoon, with minimum to no attenuation from the wetland. Gene distribution patterns along the waste stream were comparable (before-during discharge; r = 0.887, p = 0.019), but unlike 'total tet' there 410 were significant pairwise changes (paired t-test, t = 0.506, p = 0.634) as most concentrations 411 decline, except at the wetland and slightly in CHARS site.

To facilitate further analysis in prevalence of bacteria throughout the treatment process, 412 abundances of resistance genes were divided by the abundance of 16S rRNA genes to represent 413 relative gene abundances. Relative abundances of ARGs were low (e.g. less than 2% of the total 414 as observed in the wetland) at all locations during discharge (see Table 2), which suggests a low 415 potential for ARG-bearing bacteria to exist throughout the treatment system. Tetracycline 416 resistance genes remain elevated in wastewater systems if there is a source of resistance 417 418 microorganism and tetracycline usage (Peak et al., 2007), but can decline in sunlight-exposed systems over a relatively short period of time (Engemann et al., 2008; Zhang et al., 2009). This 419 suggests that tetracycline may not have been extensively used in the Cambridge Bay population 420 around the times of sampling. Gene concentrations were equivalent to wastewater lagoons with 421 minimal tetracycline usage by source population e.g., (Peak et al., 2007), and could already 422 represent near background levels (Engemann et al., 2006; Zhang et al., 2009). Whereas, 423 detectable sulfonamide concentrations in this study may have been sufficient to maintain 424 selective pressure for antibiotic-resistant bacteria, or their presence of elevated levels represent 425 426 residual evidence of previously higher levels of sulfonamide usage, as gene fate tends to differ from chemical fate (e.g. Engemann et al., 2006; Peak et al., 2007) 427

Wastewater systems have a variable ability to reduce antimicrobial resistance, given the fact that generally resistant bacteria numbers decline in wastewater treatment as bacteria are removed, but these patterns require further investigation, as they remain a function of bacterial community and operating conditions (Christgen et al., 2015). Further, no studies to date have examined the fate of antibiotic resistant bacteria in the wastewater stream at lower temperatures,

such as in the Arctic. Well-studied coliform bacteria, which tend to carry ARGs, persist longer in
colder temperatures (Solic and Krstulovic, 1992); however, gene persistence at lower
temperatures could be exacerbated by slowed transformation rates of pharmaceutical compounds
and prolonged selective pressures, reduced endonuclease activity, and lowered predation. Further
investigations are required to fully elucidate gene fate under psychrophilic conditions.

438

## 439 Conclusions

Our assessment of the Cambridge Bay wastewater treatment facility allowed us to detect 440 no apparent removal of nutrients as a result of lagoon-wetland treatment. Reduced nutrients 441 concentrations at locations offshore occurred as a result of dilution. Our data suggests that some 442 attenuation mechanisms for pharmaceuticals exist in the treatment system, especially in the 443 sewage lagoon and to some extent in the natural wetland. Distribution of the wastewater 444 contaminants within the lagoon sites was not homogeneous, due to the presence of two different 445 drop off points for sewage dumping and the topography of the lagoon. From all of the studied 446 pharmaceuticals, only carbamazepine showed some persistence during the Arctic winter. 447 Atenolol, sulfamethoxazole and trimethoprim had dissipated prior to the first sampling 448 campaign. Concentrations of detected pharmaceuticals and nutrients were minimal in the Finger 449 Bay location, which suggests that there was minimal runoff of wastewater to this point. Hazard 450 assessment for detected pharmaceuticals shows that current concentrations of monitored 451 452 pharmaceuticals do not pose a significant hazard at this time to aquatic organisms in Cambridge Bay. Bacterial populations were detected in similar levels to more southern Canadian locations, 453 with some ARGs attenuation observed in the lagoon-wetland system and considerable dilution at 454 455 locations offshore. Finger Bay experienced non-detectable levels for all pharmaceuticals and

very low levels of ARGs, which suggests that this location was not likely experiencing any sewage leaking at the time of this study. Overall, the CHARS scientific water supply location showed non-detectable levels for all pharmaceuticals and very low levels of ARGs, prior to the instalment of the facility at Cambridge Bay. This study constitutes one of first attempts ever made to understand the occurrence of pharmaceuticals, ARGs and nutrients on wastewater treatment facilities in the Canadian Arctic, as well as the removal performance of these systems under polar conditions.

463

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475 **Table 1** 

476 Levels of total phosphorus and total nitrogen in the Cambridge Bay wastewater facility before 477 and during wastewater discharge (n=1). Wastewater was grab-sampled on July 25 and September 478 3, 2014. The limit of detection (LOD) and limit of quantification (LOQ) values for total nitrogen 479 were 8  $\mu$ g/L and 27  $\mu$ g/L, and those for total phosphorus were 0.58  $\mu$ g/L and 1.85  $\mu$ g/L, 480 respectively.

	Before dis	scharge	During discharge		
Sampling site	Total phosphorus	Total nitrogen	Total phosphorus	Total nitrogen	
Samping site	(mg/L)	(mg/L)	(mg/L)	(mg/L)	
Lagoon Input 1	2.4	12.6	2.8	12.0	
Lagoon Input 2	2.4	16.6	2.8	13.5	
Wetland	0.7	0.4	2.5	13.3	
Outfall	0.01	0.3	0.07	0.4	
Finger Bay	0.01	0.3	0.03	0.3	
CHARS	0.02	0.4	0.03	0.3	

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482

484 **Table 2** 

Abundances of antibiotic resistance genes (log(genes/mL)) harvested from grab-samples taken at the Cambridge Bay wastewater treatment facility and receiving waters in 2014; standard deviation of sample replicates (n=3) are denoted in parentheses. Relative abundance of ARGs to 16S rRNA, calculated during discharge (A = tetR/16S rRNA ratio, B = sulR/16S rRNA ratio) is also shown.

	Before discharge			During discharge				
Sampling site	log total tet <sup>R</sup>	log total sul <sup>R</sup>	log 16S rRNA	log total tet <sup>R</sup>	log total sul <sup>R</sup>	log 16S rRNA	A (%)	B (%)
Lagoon Input 1	4.2 (0.3)	4.7 (0.5)	8.0 (0.5)	3.8 (0.2)	4.4 (0.3)	7.4 (0.4)	0.02	0.1
Lagoon Input 2	4.3 (0.3)	6.0 (0.7)	7.8 (0.9)	4.1 (0.3)	5.6 (0.3)	7.5 (0.8)	0.03	1.3
Wetland	3.9 (0.2)	4.4 (0.3)	6.8 (0.4)	3.8 (0.2)	5.6 (0.3)	7.3 (0.6)	0.03	2.0
Outfall	2.9 (0.2)	2.8 (0.2)	5.4 (0.4)	2.7 (0.2)	1.8 (0.1)	6.1 (0.4)	0.04	0.01
Finger Bay	3.0 (0.1)	2.8 (0.2)	5.3 (0.2)	2.7 (0.2)	2.0 (0.2)	6.3 (0.4)	0.02	0.01
CHARS	3.7 (0.2)	3.0 (0.2)	5.2 (0.4)	3.0 (0.3)	3.3 (0.3)	6.3 (0.4)	0.05	0.1

**Table 3** 

Comparison of concentrations of target pharmaceutical compounds in treated wastewaters of
different Canadian lagoon wastewater systems (NA: not analyzed, ND: non-detectable). Lac la
Biche data from MacLeod and Wong (2010), Dunnottar data from Anderson et al. (2015), Grand
Marais data from Anderson et al. (2013), Cambridge Bay, this study. Populations are shown
underneath the name of each location for comparison.

Location	Atenolol (ng/L)	Carbamazepine (ng/L)	Sulfamethoxazole (ng/L)	Trimethoprim (ng/L)
Lac la Biche, AB (8,402)	ND - 100	50 - 300	NA	10 15
Dunnottar, MB (692)	ND - 856.5	20.1 - 426.1	ND - 1252.5	ND - 318.5
Grand Marais, MB (252)	ND	85-500	ND-21	ND
Cambridge Bay, NU (1,400)	ND - 97.4	1.2 - 306.7	ND - 274.2	ND - 25.7

499 Figure captions

500

**Figure 1.** Sampling site locations at the Cambridge Bay wastewater treatment facility and receiving waters. Wastewater path from the lagoon to the bay is shown by means of a dotted line.

**Figure 2.** Mean levels of pharmaceuticals in Cambridge Bay wastewater facility, before and during the wastewater discharge process (n=3). Error bars depict the standard deviation on each case. Differences are significant for p < 0.05 and were assessed using paired t-tests. Wastewater was collected using Polar Organic Chemical Integrative Samplers from July 25 to August 8, from July 26 to August 9 and from August 29 to September 8, 2014. TWA: time-weightedaverage.

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