

Bundesgesundheitsbl 2020 · 63:656  
<https://doi.org/10.1007/s00103-020-03116-9>  
Online publiziert: 10. März 2020  
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von Springer Nature 2020

Announcement of the Robert Koch Institute (RKI) and the German Association for the Control of Virus Diseases (DVV)

# Test temperature during the testing of chemical or chemo-thermal instrument disinfection procedure

## Communication of the DVV/GfV Virus Disinfection Expert Committee in accordance with the DVV/RKI Guideline in the version of December 1st, 2014

In many cases, chemical instrument re-processing takes place at temperatures higher than 20 °C +/- 3 °C. This means that testing of disinfectants for their virucidal efficacy requires the selection of viruses which have sufficient stability at the appropriate temperatures. However, the stability of the viruses used in the quantitative suspension test at 20 °C is limited, especially at temperatures above 40 °C. This is particularly true for polioviruses. For this reason, the thermostable parvovirus has long been used as a test virus for testing chemo-thermal processes for laundry disinfection.

The DVV/RKI guideline does not differentiate between procedures for laundry disinfection and instrument disinfection as is the case in DIN EN 14476. For chemo-thermal laundry disinfection processes, the new version of the DVV/RKI guideline of 01.12.2014 was adapted to the corresponding European stand-

ard DIN EN 14476 to 30 °C as lower limit for the process temperature. In order to achieve an identical approach to this standard as well as to the updated VAH methods for instrument disinfection procedures, the DVV/RKI guideline in the version of 01.12.2014 is therefore clarified to the effect that from a temperature above 40 °C only a parvovirus (bovine parvovirus, strain Haden or Minute virus of Mice (MVM) ATCC VR-1346) has to be tested to demonstrate virucidal activity.

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This article is a translation of the German announcement „Mitteilung des Fachausschusses Virusdesinfektion der DVV/GfV und des RKI zur Untersuchungstemperatur bei der Prüfung von chemischen bzw. chemothermischen Instrumentendesinfektionsverfahren entsprechend der DVV/RKI-Leitlinie in der Fassung vom 01.12.2014“: Bundesgesundheitsbl 2015 · 58:888. <https://doi.org/10.1007/s00103-015-2195-5>