

Pharmaceuticals in the aquatic environment, milk, vegetables, and fruits: A review

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Abstract:

Background: Pharmaceuticals are essential for the survival of humans and animals life. Due to economic prosperity and longevity the prescription and use of the pharmaceuticals has increased many folds with the beginning of the present century. Due to misuse and overuse pharmaceuticals are emerging as a major environmental threat. Antibiotics are the most widely used pharmaceuticals. The pharmaceutical residues or related daughter products are reported in surface water, ground water, soil, milk, plants, vegetables, and fruits posing a threat to humans, animals and ecosystem. As milk, vegetables, and fruits are the sources of vitamins, carbohydrates, essential trace metals, antioxidants these are the key part for survival of the human.

Results: The accumulation of the pharmaceuticals mainly antibiotics in food products adversely affects human health. These compounds affect ecological processes, biogeochemical cycling, and organic contaminant degradation via microbial communities in the environment and cause the development of multi-antibiotic-resistant bacteria posing environmental pollutant and causes serious risks to human and veterinary health. This review aims to report the concentration of the commonly used pharmaceuticals in the aquatic environment, milk samples, plants, vegetables, and fruits consumed by humans and their impact on animals and humans.

Key Words: Pharmaceuticals, Antibiotics, Human, Environment, Milk, Vegetables, Fruits

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I. Introduction

Environmental pollution by organic pollutants is of major concern globally since the last two decades, as these organic pollutants have adverse effects on the health of aquatic, terrestrial, human, and animal. Environmental pollution by organic pollutants with the climate change, scarcity of useable water, decrease in the fertility of the soil, loss of biodiversity, decrease in natural resources are causing challenges to agricultural scientists to feed the increasing population. The pharmaceuticals are an integral part of human life as are used in human (65%), veterinary (29%) medicine, food additive and agriculture (6%).

Pharmacology is the branch in which drugs are studied; commonly the chemical compounds which are used for diagnosing, curing or treating diseases are called drugs. Survival in today's life is not possible without the products of the pharmaceutical industries. In the last three decades due to population growth; advances in pharmaceutical research and development; ageing societies and economic developments the consumption of the pharmaceuticals in the developed and developing countries are continuously increasing¹. Globally more than 3000 biologically active (even at low levels) compounds are used as medicines for human and animals. It is estimated that globally more than 200,000 tonnes of pharmaceutical products are used every year, one-fourth of which are consumed by European countries only. Before the pandemic of Covid-19, it was estimated that worldwide about 300 million people of the age group 15-64 consumed pharmaceuticals at least once in the year.

Undoubtedly pharmaceuticals have cured number of deadly diseases, lengthened life span but indiscriminate use and improper disposal has caused the presence of pharmaceutical residues in all the components of the environment (geosphere, biosphere, and Polar Regions of every continent). Pharmaceutical like endocrine disruptors, antimicrobial, synthetic estrogens are present even on Northern Antarctica. Pharmaceuticals are present in the environment of almost all the countries of all the 5 UN regional groups.

The present review reports the concentrations of commonly used pharmaceuticals in the aquatic environment, milk samples, plants, vegetables, and fruits and their impact on animals and humans.

II. Types of Pharmaceuticals

Human and veterinary pharmaceuticals can be classified as:

2.1 Analgesics including opioids and non-opioids:

These are those compounds which relieve pain without sleep or loss of consciousness. These compounds affect the peripheral and central nervous system. Commonly used are acetylsalicylic acid, acetaminophen, ibuprofen, diclofenac, naproxen, COX-2 etc.

2.2 Antidepressants and antiepileptic:

These drugs also called as neuroactive compounds directly affect the central nervous system and regulate behaviour by influencing the pattern of the neuroendocrine signal. Citalopram, escitalopram, fluoxetine, benzodiazepines, paroxetine, vortioxetine etc are some commonly used drugs.

2.3. Antiviral drugs:

These are those medicines which retards the reproduction rate of flu viruses. Broad spectrum antivirals are effective against several of viruses. Commonly used antiviral drugs are baloxavir, marboxil, remdesivir, oseltamivir (Tamiflu), and zanamivir.

2.4 Antipyretics:

These are the compounds which are used to reduce the elevated temperature of the body. The body temperature is elevated when in certain parts of the brain the concentrations of prostaglandin E₂ (PGE₂) are enhanced, which alters the neurons firing rate in the hypothalamus. Antipyretics reduce the levels of PGE₂ by inhibiting the secretion of the cyclooxygenase enzyme, and/or reduce proinflammatory mediators. Acetaminophen, acetylsalicylic acid, paracetamol, proxyphene, ibuprofen, Naproxen, Ketoprofen and methimazole are some commonly used antipyretics medicines.

2.5 Cardiovascular agents, beta-blockers and ACE inhibitors:

The medicines used to treat problems related with the heart such as arrhythmias, blood clots, coronary artery disease, high or low blood pressure, high cholesterol, heart failure, and stroke are known as Cardiovascular agents. Beta-blockers reduce the body's natural 'fight-or-flight' responses by reducing the stress on the heart and the brain's blood vessels. These medicines are given to the patients suffering from angina, high blood pressure, anxiety, migraine, glaucoma, and thyroid. Angiotensin-converting enzyme (ACE) inhibitors inhibit the secretion of the blood vessel narrowing enzyme angiotensin II, which lower down the body blood pressure by relaxing the veins and arteries. Captopril, enalapril, lisinopril, losartan, valsartan, diltiazem, verapamil, metoprolol are used as antihypertensive, beta-blockers and ACE inhibitor.

2.6 Antibiotics:

These are those natural or synthetic compounds which stop infections caused by bacteria by supporting the body's natural defence to eliminate them. Any compound which can kill germs in the living body may be technically called as antibiotics. Those antibiotics which kills the bacteria are called as bactericidal antibiotic while those which prevent them from reproduction i.e. growth are called as bacteriostatic. Globally broad-spectrum antibiotics are widely used and the global consumption is approximately 1,00,000 tonnes annually. Commonly used antibiotics are Tetracycline, penicillin, erythromycin, azithromycin, Cephalosporins, Carbapenems, Fluoroquinolones, vancomycin, linezolid and tedizolid, aztreonam, sulfonamides, Rifamycins, gentamicin, streptomycin, etc.

2.7 Antiseptics and Disinfectants;

Antiseptic are those compounds which inhibit the action of microbes by applying on the surface of the skin of a living body, they may be bactericidal or bacteriostatic. Commonly used antiseptics are Dettol (a mixture of chloroxylenol and terpineol), iodoform, 0.2% phenol solution etc. Disinfectants are those antimicrobials agents which are applied on non-living objects and destroy the microorganisms which are on the surface of objects. Commonly used disinfectants are chlorine, sulphur dioxide, 1% of phenol, alcohol.

2.8 Anti-glycemic drugs:

These are those compounds which control blood glucose level in persons with diabetes. Globally approximately 200 million peoples are suffering from diabetic Mellitus disease. Insulin, metformin, amylin, Byetta and Victoza are some drugs which are generally used as antidiabetic, the metformin is globally the most widely prescribed anti-glycemic drug.

2.9 Anti-allergic medicines:

These are those medicines which are administered to stop allergies caused by medicines, foods, or any other reasons. The allergic reactions may be mild (causing itching, hives or rash, or sneezing) or severe which sometimes became life-threatening. Antihistamines diphenhydramine, hydroxyzine, promethazine, steroids dexamethasone, hydrocortisone and hormones Epinephrine, adrenaline are generally used as anti-allergic medicines.

2.10 Hormones:

These are those chemicals which interfere in the natural functioning of the endocrine system in humans and animals and are responsible for the diseases like breast, prostate, testes cancer, lowering of sperm counts, thyroid dysfunction, and alteration in neurological system and deformation of reproductive organs.

III. Sources of the Pharmaceuticals in the environment

With the developments in the Pharmacology branch, economic development, population growth and increasing of ageing societies the use and development and production of pharmaceuticals have increased in both the developed and developing countries. Major sources of the pharmaceuticals in the environment are human and animal excretion, bathing, improper disposal of the expired/ unused medicines i.e. pouring in the drain, flushing in the toilet, improper disposal by the hospital, medicinal institutions, and house-hold wastes and waste dumping by the research institutions and drug manufacturing units. After consumption, the pharmaceuticals are partially metabolized in the gut of human and/or animals and 30-90% is excreted unaltered or as active metabolites via urine and faeces and is released into the waste system^{2,3}. Worldwide the pharmaceuticals are accumulated in soils via application of sewage sludge in the agricultural fields; application of pharmaceuticals in aquaculture; by outdoor animals and by the application of the fertilizers, from where they are translocated to plants/ edible parts and after rainfall contaminates the ground waters. Though the volume of urine is only 1% of total wastewater volume it contributes 65% pharmaceuticals to the wastewater bodies.

IV. Pharmaceuticals in the aquatic environment

It is estimated that by 2050 the worldwide population will be about 9.8 billion and the urban population will be about 70% of the total population, which will cause stress on water bodies. As the pharmaceuticals cannot be easily evaporated, easily dissolves in the aqueous medium are easily passed from wastewater into the soil and aquatic environments⁴ (Ground water, surface water).

A recent survey of the literature denotes that sewage water, surface water, groundwater, soil, air, or biota is contaminated by hundreds of active pharmaceutical ingredients (APIs). The concentration of these compounds varied from ng/L to µg/L⁵⁻⁷. The concentration of the APIs in the effluents of the pharmaceutical industries in the countries India, China, USA, Korea and Israel ranges up to mg/L⁸. The concentration of the pharmaceuticals in the local surface water bodies was more than in the blood of patients who are undergoing treatment.

Several researchers⁹⁻¹⁰ during their studies found various pharmaceuticals in the aquatic environment and the concentration of the pharmaceuticals ranges from ng to mg/L. Sedlak and Pinkston¹¹ have reported the presence of 40 pharmaceuticals above 1000 ng/L in wastewater and 120 pharmaceuticals above 1 ng/L. They also reported that the concentration of metoprolol, propranolol, and ibuprofen reaches above 3000ng/L in the wastewater. It is estimated that the sewage water is also contaminated with about 30 tonnes of radiographic contrast media annually. As hospital effluents contain pharmaceuticals residues, microbes, pathogens, infectious fluids, radioactive substances affects adversely sewage system and environment¹².

Pharmaceuticals in water adversely affect aquatic fauna, in fishes the tissues, are damaged by the painkillers; sex changes in the fish and behavioural changes are caused by the contraceptives and antidepressant. Wastewater became the hotspot for the bacteria to generate the antibiotic-resistant genes if even the traces of antibiotics are in the wastewater. As per EPA estimation, about 50% of the population worldwide uses groundwater for drinking.

Releasing of domestic sewage water, hospital wastes, industrial waste and other organic pollutants in the water bodies without proper treatments causes hypoxia, eutrophication, bioaccumulation, and dissemination of pathogens in the aquatic system¹³⁻¹⁴. Several researchers¹⁵⁻¹⁸ have reported that water used for drinking and agricultural purposes has numerous antibiotics resistant bacteria use of such water causes serious health risks in the humans. The concentrations of the pharmaceuticals in the aquatic environments (waste water, surface water, hospital effluents, river water, and aquaculture) are recorded in the Table 1.

V. Pharmaceuticals in the Plants and Vegetables

Soil, plants, fruits and vegetables are the most essential segments for human and animal life as fruits and vegetables are the essential part of the human diet. Anthropogenic activities are the major causes of the continuous increase in the pollution of these segments. Due to the increase in world population and changing dietary habits the demand of the vegetables and fruits is increasing globally¹⁹. Globally water is scarce; the wastewater in most of the developing countries is used for irrigation of the cultivated fields. Corcoran et al²⁰, during their research found that approximately 20 million hectares of land in 50 countries are irrigated by wastewater or partially treated wastewater containing pharmaceuticals, their metabolites, antibiotics resistant genes and 10% of the world population consumes the food which is irrigated by wastewater

As the wastewater contains these pollutants are bio accumulated in soils, plants and vegetables^{21,22} (mostly in the plant tissues). These bio accumulated pharmaceuticals are translocating in the edible parts of the food crops^{23,24} which are an integral part of the human and animal life. The survey of the literature showed that the accumulation of the pharmaceuticals in the vegetables was in the order²⁵ leaves > stem/shoot > root > fruit, they also found that lettuce leaves can accumulate caffeine, carbamazepine, and sulfamethoxazole and hormones in very high concentration, while in tomato it was accumulated only in roots. Wu et al.²⁶ during their research studies found that pharmaceuticals are easily bio accumulated in leafy vegetables like lettuce, spinach and cabbage they also found that pharmaceuticals having high translocation potential are more bio accumulated. A survey of literature denotes that pharmaceuticals in water significantly affects the aquatic organisms the growth of the roots of Lemna minor is retarded in presence of antidepressant Fluoxetine^{27,28} reported that growth and biomass production of plant *Dacus carota* is decreased in presence of Metformin the antidiabetic medicine. Carter et al.²⁹ found the reduction in the number of photosynthetic pigments, white spot, and burnt edges of Cucurbita pepo plants matured leaves. The concentration of the various pharmaceuticals in the plants, fruits and vegetables are reported in Table 1.

VI. Pharmaceuticals in the Milk

As the per capita milk consumption in the developing countries is increasing, to take care of the farm animals the use of the veterinary medicines for therapeutic and prophylactic purposes is also increasing, which results in the presence of these organic pollutants in milk, dairy products and dairy wastes.

India's contribution to global milk production is about 18% (Globally highest producer). A number of the researchers have found pharmaceuticals mainly antibiotics in milk and dairy products beyond their permissible limits^{1, 30-31}. The survey of the literature indicates that approximately 12% of milk in the USA and 11% of milk in the UK is contaminated with antibiotics β -lactum. One of the major sources of the presence of pharmaceuticals in animal milk is the use of water of the water wells by the farms.

Presence of pharmaceuticals in milk not only affects milk quality, cheese and yoghurt formation (by inhibiting the formation of lactic acid and development of flavour) causing economic loss but also causes health problems to the consumers like allergies, alteration in intestinal function³²⁻³³. Consumption of the antibiotics contaminated milk for a longer period causes intestinal microflora to become drug-resistant. Tetracycline contaminated milk causes photosensitivity reaction, pigmentation on nails and discolouration of teeth. Optic neuropathy, brain abscess are some common problems associated with long exposure to chloramphenicol contaminated milk³⁴. Drinking of the azithromycin contaminated milk affects the cardiovascular and immune system in the citizenry, while food allergic reactions e.g. urticarial, anaphylaxis, bronchospasm, haemolytic anaemia, thrombocytopenia, acute interstitial nephritis, serum sickness, Stevens-Johnson syndrome; toxic epidermal necrolysis are caused by drinking β -lactum contaminated milk^{35,36}. Intake of antibiotics at very low concentration for a longer period results in the development of antibiotic-resistant organisms in the humans. The data of the concentrations of the pharmaceuticals in the milk samples are reported in Table 1.

VII. Steps which will help in decreasing the pharmaceuticals contamination in the environment:

- Use medicines only on the recommendation of the Doctor.
- Take medicines only in the recommended dose and up to the recommended period.
- Don't flush/drain the expired/ unused medicines.
- Hospital effluents, wastewater from the manufacturing units and domestic sewage water must be properly treated and disposed of.

VIII. Conclusion:

- The use of pharmaceuticals for well being of humans and animals is indispensable. But since the last 20 years these are used indiscriminately in the medical, agricultural and animal husbandry sectors. So, these pharmaceutical residues in the environment are becoming as latest environmental hazardous pollutants.
- Residues of the pharmaceuticals are present in the surface water, groundwater, milk samples vegetables, fruits, other crops worldwide. 12% of the milk samples in the USA and 11% of the milk samples in the UK are contaminated with antibiotic group Beta -lactum.
- As the sewage water is used for irrigation in the developing countries the marketed vegetables and fruits in the developing countries are contaminated with pharmaceuticals mainly antibiotics.
- The pharmaceuticals present in the aquatic medium adversely affect the aquatic biota.
- The presence of the pharmaceuticals mainly antibiotics in the drinking water, fruits, vegetables and milk is posing a serious threat to humans by developing antibiotic-resistant bacterias.

References

- [1]. Van Boeckel TP, Charles B, Marius G, et al. Global trends in antimicrobial use in food animals. *Proc Natl Acad Sci*. 2015; 112(18):5649–5654. DOI: 10.1073/pnas.1503141112.
- [2]. Al-Qaim FF, AbdullahP, Othman MR, et al. Investigation of the Environmental Transport of Human Pharmaceuticals to Surface Water: A Case Study of Persistence of Pharmaceuticals in Effluent of Sewage Treatment Plants and Hospitals in Malaysia. *Journal of the Brazilian Chemical Society*. 2015; 26(6):1124–1135. DOI: 10.5935/0103-5053.20150075.
- [3]. Massé DI, Saady NMC, Gilbert Y. Potential of biological processes to eliminate antibiotics in livestock manure: an overview. *Animals*. 2014; 4: 146–163. DOI: 10.3390/ani4020146
- [4]. Liu X, Lu S, Guo W, et al. Antibiotics in the aquatic environments: a review of lakes, China. *Sci Total Environ*. 2018; 627:1195–1208. DOI: 10.1016/j.scitotenv.2018.01.271
- [5]. Chen L, Lang H, Liu F, et al. Presence of antibiotics in shallow groundwater in the Northern and South Western Regions of China. *Groundwater*. 2017; 56: 451–457. DOI: 10.1111/gwat. 12596.
- [6]. Küster A, Nicole Adler N. Pharmaceuticals in the environment: scientific evidence of risks and its regulation. *Philos Trans R Soc Lond B Biol Sci*. 2014; 369(1656):20130587. DOI: 10.1098/rstb.2013.0587
- [7]. BIO Intelligence Service. Study on the environmental risks of medicinal products, Final Report prepared for Executive Agency for Health and Consumers 2013.
- [8]. Larsson DGJ. Antibiotics in the environment. *J. Med Sci*. 2014; 119: 108–112. DOI: 10.3109/ 03009734.2014.896438
- [9]. Chen K, Zhou J. Occurrence and behavior of antibiotics in water and sediments from the Huangpu River, Shanghai, China. *Chemosphere*.2014; 95: 604–612. DOI: 10.1016/j. chemosphere.2013.09.119.
- [10]. Lopez-Serna R, Jurado A, Vazquez-Sune E, et al. Occurrence of 95 pharmaceuticals and transformation products in urban groundwater underlying the metropolis of Barcelona, Spain. *Environ Pollut*. 2013; 174:305–315. DOI: 10.1016/j.envpol.2012.11.022.
- [11]. Sedlak DL, Pinkston KE. Factors affecting the concentrations of pharmaceuticals released to the aquatic environment. *J Contemp Water Res Educ*. 2011; 56-64.
- [12]. Dhingra, PA, Ahmad, S, Aiddiqyi, WA, et al. Identification of Priority Pharmaceutical Residues in Hospital Effluent. *Global J Engg & Scientific Research*. 2018; 5: 420-435. DOI: 10.5281/ zenodo.1320966.
- [13]. Giebułtowicz J, Nałęcz-Jawecki G, Harnisz M. Environmental Risk and Risk of Resistance Selection Due to Antimicrobials' Occurrence in Two Polish Wastewater Treatment Plants and Receiving Surface Water. *Molecules*. 2020; 25 (6): 1470. DOI: 10.3390/ molecules 25061470.
- [14]. Chen C, Li J, Chen P, et al. Occurrence of antibiotics and antibiotic resistances in soils from wastewater irrigation areas in Beijing and Tianjin, China. *Environ. Pollut*. 2014; 193: 94–101. DOI: 10.1016/j.envpol.2014.06.005
- [15]. Chen Z, Yu D, He S, et al. Prevalence of antibiotic-resistant *Escherichia coli* in drinking water sources in Hangzhou City. *Front Microbiol*. 2017; 8: 1–11. DOI: 10.3389/fmicb. 2017.01133.
- [16]. Santás-Miguel V, Fernández-Sanjurjo MJ, Núñez-Delgado A, et al. Use of waste materials to prevent tetracycline antibiotics toxicity on the growth of soil bacterial communities. *Environmental Research*. 2020; 110404. DOI: 10.1016/j.envres.2020.110404
- [17]. Du J, Zhao H, Liu S, et al. Antibiotics in the coastal water of the South Yellow Sea in China: occurrence, distribution and ecological risks. *Sci. Total Environ*. 2017; 595: 521–7. DOI: 10.1016/j.scitotenv. 2017.03.281.
- [18]. Yau VM, Schiff KC, Arnold BF, et al. Effect of submarine groundwater discharge on bacterial indicators and swimmer health at Avalon Beach, CA, USA. *Water Res*. 2014; 59: 23– 36. DOI:10.1016/j.watres.2014.03.050
- [19]. Vilarinho MV, Franco C, Quarrington C. Food loss and waste reduction as an integral part of a circular economy. *Front Environ Sci*. 2017; 5: 1– 5.
- [20]. Corcoran E, Nellemann C, Baker E, et al. Sick Water? The central role of wastewater management in sustainable development. A Rapid Response Assessment, 2010. United Nations Environment Programme (UNEP), UN-HABITAT, GRID-Arend .
- [21]. Olowoyo JO, Mugivhisa LL. Evidence of uptake of different pollutants in plants harvested from soil treated and fertilized with organic materials as source of soil nutrients from developing countries. *Chem Biol Technol.Agric*.2019; 6: 28. DOI: 10.1186/s40538-019-0165 -0
- [22]. Miller EL, Nason SL, Karthikeyan K, et al. Root uptake of pharmaceuticals and personal care product ingredients. *Environ Sci Technol*. 2016; 50(2):525–541. DOI: 10.1021/acs.est. 5b01546.
- [23]. Wong SH, Silva F, Acheson JF, et al. An old friend revisited: chloramphenicol optic neuropathy. *Journal of the Royal Society of Medicines Short Reports*. 2013; 4(3):20-22. DOI: 10.1177/2042533313476692.
- [24]. Wiest DB, Cochran JB, Tecklenburg FW. Chloramphenicol toxicity revisited: A 12-year-old patient with a brain abscess. *Journal of Pediatric Pharmacology and Therapeutics*. 2012; 17:182-188. DOI: 10.5863/1551-6776-17.2.182.
- [25]. Al-Farsi R, Ahmed M, Al-Busaidi A, et al. Assessing the presence of pharmaceuticals in soil and plants irrigated with treated wastewater in Oman. *Int J Recycl Org Waste Agricult* .2018; 7: 165–172. DOI: 10.1007/s40093-018-0202-1.
- [26]. Wu XQ, Dodgen LK, Conkle JL, et al. Plant uptake of pharmaceutical and personal care products from recycled water and biosolids: a review. *Sci. Total Environ*. 2015; 536: 655–666. DOI: 10.1016/j.scitotenv.2015.07.129.
- [27]. Amy-Sagers C, Reinhardt K, Larson DM. Ecotoxicological assessments show sucralose and fluoxetine affect the aquatic plant, Lemna minor. *Aquatic Toxicology*. 2017; 185:76–85. DOI: 10.1016/j.aquatox.2017.01.008.
- [28]. Eggen T, Lillo C. Antidiabetic II Drug Metformin in Plants: Uptake and Translocation to Edible Parts of Cereals, Oily Seeds, Beans, Tomato, Squash, Carrots, and Potatoes. *J Agric Food Chem*. 2012; 60 (28): 6929–6935. DOI: 10.1021/jf301267c
- [29]. Carter LJ, Williams M, Bottcher C, et al. Uptake of Pharmaceuticals Influences Plant Development and Affects Nutrient and Hormone Homeostases. *Environ. Sci. Technol*. 2016; 49(20): 12509–12518. DOI: 10.1021/acs.est.5b03468
- [30]. Aalipour F, Mirlahi M, Jalali M. Dietary exposure to tetracycline residues through milk consumption in Iran. *Journal of Environmental Health Science and Engineering*. 2015; 13(1): 80-89. DOI: 10.1186/s40201-015-0235-6.
- [31]. Chowdhury S, Hassan M, Alam M, et al. Antibiotic residues in milk and eggs of commercial and local farms at Chittagong, Bangladesh. *Vet World*. 2015; 8(4):467–471. DOI: 10.14202/ vetworld.2015.467-471.
- [32]. Veiga-GómezM, NebotC, Franco CM, et al. Identification and quantification of 12 pharmaceuticals in water collected from milking parlors: Food safety implications. *Journal of Dairy Science*. 2017; 100(5): 1-11. DOI: 10.3168/jds.2016-12227
- [33]. Maria JG, Katrien EH. Hidden effect of dairy farming on public and environmental health in the netherlands, India, Ethiopia and Uganda, Considering the use of antibiotic and other agro-chemicals. *Frontiers in Public health*. 2016; 4(12):1–9.
- [34]. Lucas MF, Errecalde JO, Mestorino N. Pharmacokinetics of azithromycin in lactating dairy cows with subclinical mastitis caused by *Staphylococcus aureus*. *Journal of Veterinary and Pharmacology Therapeutics*. 2010; 33(2): 132–140

- [35]. Aytenfsu S, Mamo G, Kebede B. Review on Chemical Residues in Milk and Their Public Health Concern in Ethiopia. *J Nutr Food Sci.* 2016; 6: 524-534. DOI:10.4172/2155-9600.1000524.
- [36]. Ibraimi Z, Shehi A, Hajrulai, et al. Detection and risk assessment of beta –lactam residues in Kosovo’s milk using Elisa method. *Int J Pharm Pharm Sci.* 2013; 5 (4): 446-450.
- [37]. Shraim A, Diab A, Alshahimi A, et al. Analysis of some pharmaceuticals in municipal wastewater of Almadinah Alm, unawarah. *Arab J Chem.* 2017; 10(1): 719–7 29. DOI: 10.1016/ j.arabjc.2012.11.014
- [38]. Kostich MS, Batt AL, Lazorchak, JM. Concentrations of prioritized pharmaceuticals in effluents from 50 large wastewater treatment plants in the US and implications for risk estimation. *Environ Pollut.* 2014; 184: 354-359. DOI:10.1016/j.envpol.2013.09.013.
- [39]. Ashfaq M, Li Y, Rehman MS, et al. Occurrence, spatial variation and risk assessment of pharmaceuticals and personal care products in urban wastewater, canal surface water, and their sediments: A case study of Lahore, Pakistan. *Science of The Total Environment.* 2019; 688: 653-663. DOI: 0.1016/j.scitotenv.2019.06.285.
- [40]. Luo Y, Guo W, Ngo HH, et al. A review on the occurrence of micropollutants in the aquatic environment and their fate and removal during wastewater treatment. *Sci Total Environ.* 2014; 473-474:619–641. DOI: 10.1016/j.scitotenv.2013.12.065.
- [41]. Sim W-J, Lee W, Lee S, et al. Occurrence and distribution of pharmaceuticals in wastewater from households, livestock farms, hospitals and pharmaceutical manufactures. *Chemosphere.* 2011; 82 (2): 179-186. DOI: 10.1016/j.chemosphere.2010.10.026
- [42]. Petrović M, Škrbić B, Živančev J, et al. Determination of 81 pharmaceutical drugs by high performance liquid chromatography coupled to mass spectrometry with hybrid triple quadrupole–linear ion trap in different types of water in Serbia. *Science of The Total Environment.* 2014; 468-469: 415-428. DOI: 10.1016/j.scitotenv.2013.08.079.
- [43]. Brown AK, Wong, CS. Distribution and fate of pharmaceuticals and their metabolite conjugates in a municipal wastewater treatment plant. *Water Research.* 2018; 144: 774-783. DOI: 10.1016 /j.watres. 2018. 08.034 0043-1354.
- [44]. Kim M-K, Zoh, K-D. Occurrence and removals of micropollutants in water environment. *Environmental Engineering Research.* 2016; 21(4):319-332. DOI: 10.4991/eer. 2016.115.
- [45]. Reinholds I, Muter O, Pugajeva I, et al. Determination of pharmaceutical residues and assessment of their removal efficiency at the Daugavgriva municipal wastewater treatment plant in Riga, Latvia. *Water Sci Technol.* 2017; 75(2):387-396. DOI: 10.2166/ wst.2016.528.
- [46]. Wade C, Otero E, Poon-Kwong B, et al. .Detection of human-derived fecal contamination in Puerto Rico using carbamazepine, HF183 *Bacteroides*, and fecal indicator bacteria. *Marine Pollution Bulletin.* 2015; 101(2): 872-877. DOI:10.1016/j.marpolbul. 2015. 11.016
- [47]. Ahmadzadeh S, Dolatabadi M. Removal of acetaminophen from hospital wastewater using electro-Fenton process. *Environmental Earth Sciences.* 2018; 77:53-58. DOI: 10.1007/s12665-017-7203-7.
- [48]. Ayman, Z, Isik, M. Pharmaceutically active compounds in water, Aksaray, Turkey. *Clean – Soil, Air, Water.* 2014; 43 (10), 1381–1388. DOI: 10.1002/clen.201300877.
- [49]. Zhang P, Zhou H, Li K, et al. Occurrence of pharmaceuticals and personal care products, and their associated environmental risks in Guanting Reservoir and its upstream rivers in north China. *RSC Adv.* 2018; 8:4703–712. DOI: 10.1039/C7RA12945A
- [50]. Chander V, Sharma B, Negi V, et al. Pharmaceutical compounds in drinking water. *Journal of Xenobiotics.* 2016; 6: 5774-5780. DOI: 10.4081/xeno.2016.57742016.
- [51]. Deo, RP. Pharmaceuticals in the Surface Water of the USA: A Review. *Curr Envir Health Report.* 2014; 1: 113–122. DOI: 10.1007/s40572-014-0015-y.
- [52]. Fram M, Belitz K. Occurrence and concentrations of pharmaceutical compounds in groundwater used for public drinking-water supply in California. *Science of The Total Environment.* 2011; 409 (18): 3409-3417. DOI: 0.1016/j.scitotenv.2011.05.053.
- [53]. Montagner CC, Sodr e FF, Acayaba RD, et al. Ten Years-Snapshot of the Occurrence of Emerging Contaminants in Drinking, Surface and Ground Waters and Wastewaters from S o Paulo State, Brazil. *J Braz Chem. Soc.* 2019; 30(3): 614-632. DOI: 10.21577/0103-5053. 2018023
- [54]. Yao B, Yan S, Lian L, et al. Occurrence and indicators of pharmaceuticals in Chinese streams: a nationwide study. *Environ. Pollut.* 2018; 236: 889–898. DOI: 10.1016/j. envpol. 2017.10.032
- [55]. Bai X, Lutz A, Carroll R, et al. Occurrence, distribution, and seasonality of emerging contaminants in urban watersheds. *Chemosphere.* 2018; 200: 133-142. DOI: 10.1016/j. chemosphere.2018.02.106.
- [56]. Zhang Y, Wang B, Cagnetta G, et al. Typical pharmaceuticals in major WWTPs in Beijing, China: occurrence, load pattern and calculation reliability. *Water Res.* 2018; 140: 291–300. DOI: 10.1016/ j.watres.2018.04.056
- [57]. He K, Asada Y, Echigo S, et al. Biodegradation of pharmaceuticals and personal care products in the sequential combination of activated sludge treatment and soil aquifer treatment. *Environ Technol.* 2018; 41 (3): 1-25. DOI: 10.1080/09593330.2018.1499810.
- [58]. Zha D, Li Y, Wang L, et al. Occurrence and Attenuation of Pharmaceuticals and their Transformation Products in Rivers Impacted by Sewage Treatment Plants. *RSC Adv.* 2017;7:40905–40913. DOI: 10.1039/c7ra06852b
- [59]. Prasanna BL, Padmini VL, Navle K, et al. Analysis of drugs in aquatic environment, *Journal of Chemical and Pharmaceutical Research.* 2015; 7(4):71-79.
- [60]. Lai WW, Lin Y, Wang Y, et al. Occurrence of Emerging Contaminants in Aquaculture Waters: Cross-Contamination between Aquaculture Systems and Surrounding Waters. *Water Air Soil Pollut.* 2018; 229: 249-259. DOI: 10.1007/s11270-018-3901-3.
- [61]. der Beek TU, Weber F-A, Bergmann A, et al. Pharmaceuticals in the environment—Global occurrences and perspectives. *Special Issue: Pharmaceuticals in the Environment.* 2016; 35 (4): 823-835. DOI: 10.1002/etc.3339.
- [62]. Olarinmoye O, Bakare A, Ugwumba O, et al. Quantification of pharmaceutical residues in wastewater impacted surface waters and sewage sludge from Lagos, Nigeria. *J Environ Chem Ecotoxicol.* 2016; 8(3): 14-24. DOI:10.5897/JECE2015.0364
- [63]. Mutiyar PK, Kumar S, Kumar A. Fate of pharmaceutical active compounds (PhACs) from River Yamuna, India: An ecotoxicological risk assessment approach. *Ecotoxicol Environ Saf.* 2018; 150: 297–304. DOI: 10.1016/j.ecoenv.2017.12.041
- [64]. Gonzalez-Rey M, Tapie N, Menach KL, et al. Occurrence of pharmaceutical compounds and pesticides in aquatic systems. *Marine Pollution Bulletin.* 2015; 96 (1-2): 384-400. DOI: 10.1016/ j.marpolbul.2015.04.029.
- [65]. Ataee RA, Mehrabi A, Javed Hosseini SM, et al. A Method for Antibiotic Susceptibility Testing: Applicable and Accurate method, *Jundishapur Journal of Microbiology.* 2012; 5(1): 341-345. DOI: 10.5812/kowsor.20083645.2374.
- [66]. Mutiyar P, Mittal A. Pharmaceuticals and Personal Care Products (PPCPs) Residues in Water Environment of India: A Neglected but Sensitive Issue, 28th National Convention of Environmental Engineers and National Seminar on Hazardous Waste Management and Healthcare in India, March 9-10, 2013 Patna, India, Institute of Engineers. (<https://www.researchgate.net/publication/261795740> Pharmaceuticals and Personal Care Products PPCPs Residues in Water Environment of India. A Neglected but Sensitive Issue)
- [67]. Mutiyar P, Mittal A. Occurrences and fate of selected human antibiotics in influents and effluents of sewage treatment plant and effluent-receiving river Yamuna in Delhi (India). *Environ Monit Assess.* 2014; 186: 541–557. DOI: 10.1007/s10661-013-3398-6.

- [68]. Proia L, Adriana A, Subirats J, et al. Antibiotic resistance in urban and hospital wastewaters and their impact on a receiving freshwater ecosystem. *Chemosphere*. 2018; 206: 70-82. DOI: 10.1016/j.chemosphere. 2018. 04.163
- [69]. Voigt AM, Ciorba P, DöhlaM, et al. The investigation of antibiotic residues, antibiotic resistance genes and antibiotic-resistant organisms in a drinking water reservoir system in Germany. *International Journal of Hygiene and Environmental Health*. 2020; 224: 113449. DOI: 10.1016/j.ijheh.2020.113449
- [70]. Kimosop S, Getenga ZM, Orata F, et al. Residue levels and discharge loads of antibiotics in wastewater treatment plants (WWTPs), hospital lagoons, and rivers within Lake Victoria Basin, Kenya, *Environmental Monitoring and Assessment*. 2016; 188(9): 532-538. DOI: 10.1007/s10661-016-5534-6.
- [71]. Liyanage GY, Manage PM. Occurance, Fate and Ecological Risk of Antibiotics in Hospital effluent water and Sediments in Sri Lanka, *International Journal of Agriculture and Environmental Research*. 2016; 2: 909-935.
- [72]. Shokoohi R, Asgari G, Leili M, et al. Modelling of moving bed biofilm reactor (MBBR) efficiency on hospital wastewater (HW) treatment: a comprehensive analysis on BOD and COD removal. *Int J Environ Sci Technol*. 2017; 14: 841–852. DOI:10.1007/s13762-017-1255-9.
- [73]. Thai PK, Ky LX, Binh VN, et al. Occurrence of antibiotic residues and antibiotic-resistant bacteria in effluents of pharmaceutical manufacturers and other sources around Hanoi, Vietnam. *Sci. Total Environ*. 2018; 645: 393–400. DOI:10.1016/j.scitotenv.2018.07.126.
- [74]. Waiser MJ, Humphries D, Tumber V, et al. Effluent dominated streams. Part 2: Presence and possible effects of pharmaceuticals and personal care products in Wascana Creek, Saskatchewan, Canada. *Environ Toxicol Chem*. 2011; 30 (2): 508– 519. DOI: 10.1002/ etc. 3 98.
- [75]. Riva F, Zuccato E, Castiglioni S. Prioritization and analysis of pharmaceuticals for human use contaminating the aquatic ecosystem in Italy. *J Pharm Biomed Anal*. 2015; 106: 71–78. DOI: 10.1016/j.jpba.2014.10.003.
- [76]. Azanu D, Styrihave, B, Darko, G, et al. Occurrence and risk assessment of antibiotics in water and lettuce in Ghana. *Sci. Total Environ*. 2018; 622–623, 293-305. DOI: 10.1016/j. scitotenv. 2017.11287.
- [77]. Manage PM. Heavy use of antibiotics in aquaculture: Emerging human and animal health problems – A review. *Sri Lanka J Aquat Sci*. 2018; 23(1): 13-27.
- [78]. Khanal BKS, Sadiq MB, Singh M, et al. A Screening of antibiotic residues in fresh milk of Kathmandu Valley, Nepal, *Journal of Environmental Science and Health Part B*. 2017; 53(1):1-30. DOI: 10.1080/03601234.2017.1375832
- [79]. Liyanage GY, Manage PM, Quantification of Oxytetracycline and Amphicillin in Two Waste Water Discharging Points in Colombo, Sri Lanka, The 1st Environment and Natural Resources International Conference 6 – 7 November, 2014 (ENRIC2014), The Sukosol hotel, Bangkok, Thailand
- [80]. Verma P, Gupta M, Parasher P. Occurrence and Distribution of Antibiotic substances in waste water from hospital effluent. *International Journal of Recent Research and Review*. 2017; 10: 17-23
- [81]. UNESCO and HELCOM. *Pharmaceuticals in the aquatic environment of the Baltic Sea region – A status report, 2017*. UNESCO Emerging Pollutants in Water Series – No. 1, UNESCO Publishing, Paris.
- [82]. Cooper, EH. *Human Pharmaceuticals in Ontario’s Environment: A Review of Management Opportunities*. Ph. D. Thesis, Environmental Applied Science & Management, 2016. Toronto, Ontario, Canada.
- [83]. Acuna V, Schiller D, Garcia-Galan MJ, et al. Occurrence and in-stream attenuation of wastewater-derived pharmaceuticals in Iberian rivers. *Science of The Total Environment*. 2015; 503–504: 133-141. DOI: 10.1016/j.scitotenv.2014.05.067.
- [84]. Edwigetchadji V, Nguidjoe EM, Tembe-Fokunang E, et al. Detection and analysis of pharmaceutical products from the waste water system at the university teaching hospital of Yaoundé, Cameroon. *MOJ Toxicol*. 2018; 4(6):404–408. DOI: 10.15406/mojt.2018.04.00137.
- [85]. Al Qarni H, Collier P, O’Keeffe J, et al. investigating the removal of some pharmaceutical compounds in hospital wastewater treatment plants operating in Saudi Arabia. *Environmental Science and Pollution Research*. 2016; 23(13):13003–13014. DOI: 10.1007/s11356-016-6389-7.
- [86]. Biel-maeso M, Baena-nogueras RM, Corada-fernández C, et al. Occurrence, distribution and environmental risk of pharmaceutically active compounds (PhACs) in coastal and ocean waters from the Gulf of Cadiz (SW Spain). *Sci. Total Environ*. 2018; 612: 649–659. DOI: 10.1016/j.scitotenv.2017.08.279.
- [87]. Biel-maeso M, Corada-fern C, Lara-martín PA, Monitoring the occurrence of pharmaceuticals in soils irrigated with reclaimed wastewater. *Environ Pollut*. 2018; 235: 312–21. DOI: 10.1016/j. envpol. 2017. 12.085.
- [88]. Ribeiro de Sousa DN, Mozeto A, Lajarim R, et al. Spatio-Temporal Evaluation of Emerging Contaminants and their Partitioning Along a Brazilian Watershed. *Environ Sci Pollut Res Int*. 2018; 25 (5): 4607-4620. DOI: 10.1007/s11356-017-0767-7.
- [89]. Zhou H, Ying,T, Wang X, et al. Occurrence and preliminarily environmental risk assessment of selected pharmaceuticals in the urban rivers, China. *Sci Rep*. 2016; 6: 34928. DOI: 10.1038/srep34928.
- [90]. Boxall ABA, Kellere VDJ, Straub JO, et al. Exploiting monitoring data in environmental exposure modelling and risk assessment of pharmaceuticals. *Environment International* 2014;73: 176-185. DOI:10.1016/j.envint.2014.07.018
- [91]. Szymonik A, Lach J, Malińska K. Fate and Removal of Pharmaceuticals and Illegal Drugs Present in Drinking Water and Wastewater. *Ecological Chemistry and Engineering*. 2017; S 24(1): 65-85. DOI: 10.1515/eces-2017-0006.
- [92]. Burns EE, Carter LJ, Kolpin, DW, et al. Temporal and spatial variation in pharmaceutical concentrations in an urban river system. *Water Res*. 2018; 137: 72-85. DOI: 10.1016/j.watres. 2018.02.066.
- [93]. Gracia-Lor E, Sancho JV, Serrano R. et al. Occurrence and removal of pharmaceuticals in wastewater treatment plants at the Spanish Mediterranean area of Valencia. *Chemosphere*. 2012; 87(5): 453-462, DOI: 10.1016/j.chemosphere.2011.12.025.
- [94]. Tete, VS, Bhekie, HN, Titus, BM, et al. Occurrence and spatial distribution of statins, fibrates and their metabolites in aquatic environments. *Arabian Journal of Chemistry*. 2020; 13 (2): 4358-4373. DOI: 10.1016/j.arabjc.2019.08.003.
- [95]. Mandaric L, Mor J-R, Sabater S, et al. Impact of urban chemical pollution on water quality in small, rural and effluent-dominated Mediterranean streams and rivers. *Science of The Total Environment*. 2017; 613-614:763-72. DOI: 10.1016/j.scitotenv.2017.09.128.
- [96]. Mandaric L, Diamantini E, Stella, E, et al. Contamination sources and distribution patterns of pharmaceuticals and personal care products in Alpine rivers strongly affected by tourism. *Sci. Total Environ*. 2017; 590–591: 484–494. DOI:10.1016/j.scitotenv.2017.02.185
- [97]. Ghosh GC, Hanamoto S, Yamashita N, et al. Antibiotics removal in biological sewage treatment plants. *Pollution*. 2016; 2(2): 131-139. DOI: 10.7508/PJ.2016.02.003.

- [98]. Verlicchi P, Al Aukidy M, Jelic A, et al. Comparison of measured and predicted concentrations of selected pharmaceuticals in wastewater and surface water: A case study of a catchment area in the Po Valley (Italy). *Science of The Total Environment*. 2014; 470-471: 844-854. DOI: 10.1016/j.scitotenv.2013.10.026
- [99]. Matongo S, Birungi G, Moodley B, et al. Occurrence of selected pharmaceuticals in water and sediment of Umgeni River, KwaZulu-Natal, South Africa. *Environ Sci Pollut Res Int*. 2015; 22 (13): 10298-10308. DOI: 10.1007/s11356-015-4217-0.
- [100]. Rodriguez-Mozaz S, Vaz-Moreira I, Giustina SVD, et al. Antibiotic residues in final effluents of European wastewater treatment plants and their impact on the aquatic environment. *Environment International*. 2020; 140: 105733. DOI: 10.1016/j.envint.2020.105733.
- [101]. Lara-Martin PA, González-Mazo, E, Petrovic, M, et al. Occurrence, distribution and partitioning of nonionic surfactants and pharmaceuticals in the urbanized Long Island Sound Estuary (NY). *Marine Pollution Bulletin*. 2014; 85 (2): 710-719. DOI: 10.1016/j.marpolbul.2014.01.022.
- [102]. Lin H, Chen L, Li H, et al. Pharmaceutically active compounds in the Xiangjiang River, China: distribution pattern, source apportionment, and risk assessment. *Sci. Total Environ* 2018; 636: 975–984. DOI: 10.1016/j.scitotenv.2018.04.267.
- [103]. Botero-Coy, AM, Martínez-Pachón, D, Boix, C, et al. An investigation into the occurrence and removal of pharmaceuticals in Colombian wastewater. *Sci. Total Environ*. 2018; 642: 842-853. DOI: 10.1016/j.scitotenv.2018.06.088.
- [104]. Boy-roura M, Mas-pla J, Petrovic M, et al. Towards the understanding of antibiotic occurrence and transport in groundwater: findings from the Baix Fluvià alluvial aquifer (NE Catalonia, Spain). *Sci. Total Environ*. 2018; 612: 1387–1406. DOI:10.1016/j.scitotenv.2017.09.012.
- [105]. Gibs J, Heckathorn HA, Meyer MT, et al. Occurrence and partitioning of antibiotic compounds found in the water column and bottom sediments from a stream receiving two wastewater treatment plant effluents in Northern New Jersey. *Sci. Total Environ*. 2013; 458:107-116. DOI:10.1016/j.scitotenv.2013.03.076.
- [106]. Kurjogi M, Mohammad YHI, Alghamdi S, et al. Detection and determination of stability of the antibiotic residues in cow's milk. *PLoS One*. 2019; 14(10): e0223475. DOI: 10.1371/journal.pone.0223475
- [107]. Campestrini I, Jardim WF. Occurrence of cocaine and benzoylecgonine in drinking and source water in the Salo Paulo State region, Brazil. *Sci. Total Environ*. 2017; 576: 374–380. DOI: 10.1016/j.scitotenv.2016.10.089.
- [108]. Vazquez-Roig P, Blasco C, Pico Y. Advances in the analysis of legal and illegal drugs in the aquatic environment. *Trends in Analytical Chemistry*. 2013; 50: 65-77. DOI: 10.1016/j.trac.2013.04.008.
- [109]. Fick J, Brodin T, Høyen M, et al. Screening of benzodiazepines in thirty European rivers. *Chemosphere*. 2017; 176: 324-332. DOI: 10.1016/j.chemosphere.2017.02.126.
- [110]. Sun P, Cabrera ML, Huang C.-H, et al. Biodegradation of Veterinary Ionophore Antibiotics in Broiler Litter and Soil Microcosms. *Environ Sci Technol*. 2014; 48: 2724–2731. DOI: 10.1021/es404619q
- [111]. Camacho-Muñoz MD, Santos JL, Alonso IAE. Presence of pharmaceutically active compounds in Doñana Park (Spain) main watersheds. *Journal of Hazardous Materials*. 2010; 177 (1-3): 1159-1162. DOI: 10.1016/j.jhazmat.2010.01.030.
- [112]. Dougherty JA, Swarzenski PW, Dinicola RS, et al. Occurrence of Herbicides and Pharmaceutical and Personal Care Products in Surface Water and Groundwater around Liberty Bay, Puget Sound, Washington. *J of Env Quality*. 2010; 39 (4): 1173-80. DOI: 10.2134/jeq.2009.018.
- [113]. Stamatis N, Konstantinou IK. Occurrence and removal of emerging pharmaceutical, personal care compounds and caffeine tracer in municipal sewage treatment plant in Western Greece. *Journal of Environmental Science and Health Part B*. 2013; 48(9):800-813. DOI: 10.1080/03601234.2013.781359.
- [114]. Bahlmann A, Brack W, Schneider RJ, et al. Carbamazepine and its metabolites in wastewater: Analytical pitfalls and occurrence in Germany and Portugal. *Water Research*. 2014; 57: 104-114. DOI: 10.1016/j.watres.2014.03.022.
- [115]. Lacey C, Basha S, Morrissey, A. et al. Occurrence of pharmaceutical compounds in wastewater process streams in Dublin, Ireland. *Environ Monit Assess*. 2012; 184: 1049–62. DOI: 10.1007/s10661-011-2020-z
- [116]. Khazri H, Hassine SB, Ghorbel-Abid I, et al. Presence of carbamazepine, naproxen, and ibuprofen in wastewater from northern Tunisia. *Environmental Forensics*. 2019; 20(2): 121-128. DOI: 10.1080/15275922.2019.
- [117]. Bókonyi, V, Üveges, B, Ujhegyi, N, et al. 2018. Endocrine disruptors in breeding ponds and reproductive health of toads in agricultural, urban and natural landscapes. *Science of the Total Environment*. 634:1335–1345. DOI: 10.1016/j.scitotenv.2018.03.363
- [118]. Klančar A, Trontelj J, Kristl A, et al. Levels of pharmaceuticals in Slovene municipal and hospital wastewaters: a preliminary study. *Archives of Industrial Hygiene and Toxicology*. 2016; 67(2):106-115. DOI: 10.1515/aiht-2016-67-2727.
- [119]. Oliveira TS, Al Aukidy M, Verlicchi P. Occurrence of Common Pollutants and Pharmaceuticals in Hospital Effluents. In: Verlicchi P. (eds) *Hospital Wastewaters. The Handbook of Environmental Chemistry, Vol 60*: 2017. Springer, Cham. DOI: 10.1007/978-2017-9.
- [120]. Niemi L, Taggart M, Boyd K, et al. Assessing hospital impact on pharmaceutical levels in a rural 'source-to-sink' water system. *Science of The Total Environment*. 2020; 737: 139618. DOI: 10.1016/j.scitotenv.2020.139618
- [121]. Kunkel U, Radke M. Fate of pharmaceuticals in rivers: Deriving a benchmark dataset at favorable attenuation conditions. *Water Res*. 2012; 46: 5551–5565. DOI: 10.1016/j.watres.2012.07.033
- [122]. Ebele AJ, Abdallah MA-E, Harrad S. Pharmaceuticals and personal care products (PPCPs) in the freshwater aquatic environment. *Emerg Contam*. 2017; 3: 1-16. DOI: 10.1016/j.emcon.2016.12.004.
- [123]. Ramaswamy BR, Shanmugam G, Velu G, et al. GC–MS analysis and ecotoxicological risk assessment of triclosan, carbamazepine and parabens in Indian rivers. *Journal of Hazardous Materials*. 2011; 186 (2-3): 1586-1593. DOI: 10.1016/j.jhazmat.2010.12.037
- [124]. Hossain A, Nakamichi S, Tani K. Occurrence and ecological risk of pharmaceuticals in river surface water of Bangladesh. *Environ Res*. 2018; 165: 258–266. DOI: 10.1016/j.envres.2018.04.030.
- [125]. Ibe K, Sim W, Lee H, et al. Occurrence and distribution of carbamazepine, nicotine, estrogenic compounds, and their transformation products in wastewater from various treatment plants and the aquatic environment. *Sci. Total Environ*. 2014; 640–641: 1015–1023. DOI: 10.1016/j.scitotenv.2018.05.218.
- [126]. Riemenschneider C, Al-Raggad M, Moeder M. et al. Pharmaceuticals, Their Metabolites, and Other Polar Pollutants in Field-Grown Vegetables Irrigated with Treated Municipal Wastewater. *J. Agric Food Chem*. 2016; 64(29): 5784–5792. DOI:10.1021/acs.jafc.6b01696.
- [127]. Elbalkiny HT, Yehia AM, Riad SM, et al. Removal and tracing of cephalosporins in industrial wastewater by SPE-HPLC: optimization of adsorption kinetics on mesoporous silica nanoparticles. *J Anal Sci Technol*. 2019; 10: 21-25. DOI: 10.1186/s40543-019-0180-6
- [128]. Abdel-Shafy HI, Mohamed-Mansour, MS. Issue of Pharmaceutical Compounds in Water and Wastewater: Sources, Impact and Elimination. *Egypt J Chem*. 2013; 56 (5, 6):449-471. DOI: 10.21608/EJCHEM.2013.1123.

- [129]. Baker MA, Morshed AJM, Islam F, et al. Screening of chloramphenicol residues in chickens and fish in Chittagong city of Bangladesh. *Bangla Journal Veterinary Medicine*. 2013; 358: 173-175. DOI: 10.3329/bjvm.v11i2.19144.
- [130]. Awad YM, Kim S-C, Abd El-Azeem SAM, et al. Veterinary antibiotics contamination in water, sediment, and soil near a swine manure composting facility. *Environmental Earth Science*. 2014; 71: 1433-1440. DOI: 10.1007/s12665-013-2548-z.
- [131]. Chen YS, Zhang HB, Luo YM, et al. Occurrence and assessment of veterinary antibiotics in swine manures: A case study in East China. *China Science Bulletin*. 2012; 57: 606-614. DOI: 10.1007/s11434-011-4830-3.
- [132]. Hussain S, Naeem M, Chaudhry M. Original research estimation of residual antibiotics in pharmaceutical effluents and their fate in affected areas. *Polish Journal of Environmental Studies*. 2016; 25: 607- 14. DOI: 10.15244/pjoes/61229.
- [133]. Ngqwala NP, Muschesa P. Occurrence of pharmaceuticals in aquatic environments: A review & potential impacts in South Africa. *S Afr J Sci*. 2020; 116 (7/8): 7 pages. DOI: 10.17159/sajs.2020/5730.
- [134]. Gros M, Rodríguez-Mozaz S, Barceló D. Rapid analysis of multiclass antibiotic residues and some of their metabolites in hospital, urban wastewater and river water by ultra-high-performance liquid chromatography coupled to quadrupole-linear ion trap tandem mass spectrometry. *Journal of Chromatography*. 2013; A1292: 173-188. DOI: 10.1016/j.chroma.2012.12.072.
- [135]. Östman M, Lindberg RH, Fick J, et al. Screening of biocides, metals and antibiotics in Swedish sewage sludge and wastewater. *Water Res*. 2017; 115:318-328. DOI: 10.1016/j.watres.2017.03.011.
- [136]. Wang Y, Li Y, Hu A, et al. Monitoring, mass balance and fate of pharmaceuticals and personal care products in seven wastewater treatment plants in Xiamen City, China. *J Hazard Mater*. 2018; 354: 81-90. DOI: 10.1016/j.jhazmat.2018.04.064.
- [137]. Diwan V, Tamhankar AJ, Khandal R K, et al. Antibiotics and antibiotic-resistant bacteria in waters associated with a hospital in Ujjain, India. *BMC Public Health*. 2010; 10: 14-21. DOI: 10.1186/1471-2458-10-414.
- [138]. Hughes SR, Kay P, Brown LE. Global synthesis and critical evaluation of pharmaceutical data sets collected from river systems. *Environmental Science and Technology*. 2013; 47(2): 661-677. DOI: 10.1021/es3030148.
- [139]. Porto RS, Rodrigues-Silva C, Schneider J, et al. Benzimidazoles in wastewater: Analytical method development, monitoring and degradation by photolysis and ozonation. *Journal of Environmental Management*. 2019; 232:729-737. DOI: 10.1016/j.jenvman.2018.11.121.
- [140]. Al-Maadheed S, Goktepe I, Binti A, et al. Antibiotics in hospital effluent and domestic wastewater treatment plants in Doha, Qatar. *Journal of Water Process Engineering*. 2019; 28:60-68. DOI: 10.1016/j.jwpe.2019.01.005.
- [141]. Binh VN, Dang N, Anh NTK, et al. Antibiotics in the aquatic environment of Vietnam: Sources, concentrations, risk and control strategy. *Chemosphere*. 2018; 197: 438-450. DOI: 10.1016/j.chemosphere.2018.01.061.
- [142]. Mahmood AR, Al-Haideri HH, Hassan FM. Detection of Antibiotics in Drinking Water Treatment Plants in Baghdad City, Iraq. *Hindawi Advances in Public Health*. 2019, Article ID 7851354: 10 pages. DOI: 10.1155/2019/7851354
- [143]. Faleye AC, Adegoke AA, Ramlucan K, et al. Antibiotic Residue in the Aquatic Environment: Status in Africa. *Open Chemistry*. 2018; 16 (1): 890-903. DOI: 10.1515/chem-2018-0099.
- [144]. Ma Y, Li M, Wu M, et al. Occurrences and regional distributions of 20 antibiotics in water bodies during groundwater recharge. *Sci. Total Environ*. 2015; 518-519: 498-506. DOI: 10.1016/j.scitotenv.2015.02.100
- [145]. Ferrari F, Gallipoli A, Balderacchi M, et al. Exposure of the main Italian river basin to pharmaceuticals. *Journal of Toxicology*. 2011; Article ID 989270: 1-11. DOI: 10.1155/2011/989270.
- [146]. Gothwal R, Shashidhar T. Occurrence of High Levels of Fluoroquinolones in Aquatic Environment due to Effluent Discharges from Bulk Drug Manufacturers. *Journal of Hazardous Toxic and Radioactive Waste*. 2017; 21(3): 05016003. DOI:10.1061/(ASCE)HZ.2153-5515.0000346.
- [147]. Castrignanò E, Kannan AM, Feil, EJ, et al. Enantioselective fractionation of fluoroquinolones in the aqueous environment using chiral liquid chromatography coupled with tandem mass spectrometry. *Chemosphere*. 2018; 206: 376-386. DOI: 10.1016/j.chemosphere.2018.05.005.
- [148]. Golovko O, Kumar V, Fedorova G, et al. Seasonal changes in antibiotics, antidepressants/ psychiatric drugs, antihistamines and lipid regulators in a wastewater treatment plant. *Chemosphere*. 2014; 111: 418-426. DOI: 10.1016/j.chemosphere.2014.03.132
- [149]. Cabeza Y, Candela L, Ronen, D, et al. Monitoring the occurrence of emerging contaminants in treated wastewater and groundwater between 2008 and 2010. *J. Hazard Mater*. 2012; 239-240: 32-39. DOI: 10.1016/j.jhazmat.2012.07.032.
- [150]. Yang Y, Wenjuan S, Lin H, et al. Antibiotics and antibiotic resistance genes in global lakes: A review and meta-analysis. *Environment International*. 2018; 116: 60-73. DOI: 10.1016/j.envint.2018.04.011
- [151]. Calza P, Medana C, Padovano E, et al. Fate of selected pharmaceuticals in river waters. *Environmental Science Pollution Research*. 2013; 20: 2262-2270. DOI: 10.1007/s11356-012-1097-4.
- [152]. Fang T-H, Nan F-H, Chin T-S, et al. The occurrence and distribution of pharmaceutical compounds in the effluents of a major sewage treatment plant in Northern Taiwan and the receiving coastal waters. *Marine Pollution Bulletin*. 2012; 64 (7): 1435-1444. DOI: 10.1016/j.marpolbul.2012.04.008.
- [153]. Das B, Mandal D, Dash SK, et al. Eugenol provokes ROS-mediated membrane damage-associated antibacterial activity against clinically isolated multidrug-resistant *Staphylococcus aureus* strains. *Infect Dis*. 2016; 9:11-19. DOI:10.4137/IDRT.S31741.
- [154]. Fernández C, González-Doncel, M, Pro, J, et al. Occurrence of pharmaceutically active compounds in surface waters of the Henares-Jarama-Tajo river system (Madrid, Spain) and a potential risk characterization. *Science of the Total Environment*. 2010; 408(3): 543-551. DOI: 10.1016/j.scitotenv.2009.10.009
- [155]. Carmona E, Andreu V, Picó Y. Occurrence of acidic pharmaceuticals and personal care products in Turia River Basin: from waste to drinking water. *Sci. Total Environ*. 2014; 484: 53-63. DOI:10.1016/j.scitotenv.2014.02.085.
- [156]. Collado N, Rodríguez-Mozaz S, Gros M, et al. Pharmaceuticals occurrence in a WWTP with significant industrial contribution and its input into the river system. *Environmental Pollution*. 2014; 185: 210-212. DOI: 10.1016/j.envpol.2013.10.040.
- [157]. Dhingra A. Occurrence of high priority Pharmaceutical residues in hospital effluent and its treatment by Sequencing Batch Reactors. *International Conference on Environmental Toxicology and Pharmacology*, February 21-22, 2019, Paris, France. DOI: 10.4066/2630-4570-C1-005.
- [158]. Al-Odaini NA, Zakaria MP, Yaziz MI, et al. Multi-residue analytical method for human pharmaceuticals and synthetic hormones in river water and sewage effluents by solid-phase extraction and liquid chromatography-tandem mass spectrometry. *Journal of Chromatography*. 2015; A 1217 (44): 6791-6806. DOI: 10.1016/j.chroma.2010.08.033.
- [159]. Rivera-Jaimes JA, Postigo C, Melgoza-Alemán RM, et al. Study of pharmaceuticals in surface and wastewater from Cuernavaca, Morelos, Mexico: Occurrence and environmental risk assessment. *Science of The Total Environment*. 2018; 613-614: 1263-1274. DOI: 10.1016/j.scitotenv.2017.09.134
- [160]. Marsik P, Rezek J, Zidkov M, et al. Non-steroidal Anti-inflammatory Drugs in the Water courses of Elbe Basin in Czech Republic. *Chemosphere*. 2017; 171: 97-105. DOI: 10.1016/j.chemosphere.2016.12.055.

- [161]. Tran NH, Uruse T, Ta TT, et al. A Preliminary Study on the Occurrence of Pharmaceutically Active Compounds in Hospital Wastewater and Surface Water in Hanoi, Vietnam. *Clean soil, Air, water*. 2014; 42 (3): 267-275. DOI: 10.1002/clen.201300021.
- [162]. Yan C, Yang Y, Zhou J, et al. Antibiotics in the surface water of the Yangtze Estuary: occurrence, distribution and risk assessment. *Environmental pollution*. 2013; 175:22-29. DOI: 10.1016/j.envpol.2012.12.008.
- [163]. Hanna N, Sun P, Sun Q, et al. Presence of antibiotic residues in various environmental compartments of Shandong province in eastern China: Its potential for resistance development and ecological and human risk. *Environment International*. 2018; 114: 131-142. DOI: 10.1016/j.envint.2018.02.003
- [164]. Li Y, Li Q, Zhou K, et al. Occurrence and distribution of the environmental pollutant antibiotics in Gaoqiao mangrove area, China. *Chemosphere*. 2016; 147: 25-35. DOI: 10.1016/j.chemosphere.2015.12.107.
- [165]. Tang J, Shi T, Wu XW, et al. The occurrence and distribution of antibiotics in Lake Chaohu, China: Seasonal variation, potential source and risk assessment. *Chemosphere*. 2015; 122: 145-161. DOI: 10.1016/j.chemosphere.2014.11.032.
- [166]. Mu Q, Li J, Sun Y, et al. Occurrence of sulfonamide-, tetracycline-, plasmid-mediated quinolone- and macrolide-resistance genes in livestock feedlots in Northern China. *Environmental Science and Pollution Research*. 2015; 22: 6932-6940.
- [167]. An J, Chen H, Wei S, et al. Antibiotic contamination in animal manure, soil, and sewage sludge in Shenyang, northeast China. *Environ Earth Sci*. 2015; 74: 5077-5086. DOI: 10.1007/s12665-015-4528-y.
- [168]. Qian M, Wu H, Wang J, et al. Occurrence of trace elements and antibiotics in manure-based fertilizers from the Zhejiang Province of China. *Science of the Total Environment*. 2016; 559: 174-181. DOI: 10.1016/j.scitotenv.2016.03.123.
- [169]. Boehler M, Zwickelpflug B, Hollender J, et al. Removal of micropollutants in municipal wastewater treatment plants by powder-activated carbon. *Water Sci Technol*. 2012; 66 (10): 2115-2121. DOI: 10.2166/wst.2012.353.
- [170]. Tylová T, Fieger M, Olšovská J. Determination of antibiotics in influents and effluents of wastewater-treatment-plants in the Czech Republic—development and application of the SPE and a UHPLC-ToFMS method. *Anal Methods*. 2013; 5: 2110-2118. DOI: 10.1039/C3AY00048F
- [171]. Szekeres E, Chiriac CM, Baricz A, et al. Investigating antibiotics, antibiotic resistance genes, and microbial contaminants in groundwater in relation to the proximity of urban areas. *Environ Pollut*. 2018; 236: 734-744. DOI: 10.1016/j.envpol.2018.01.107
- [172]. Zuccato E, Castiglioni S, Bagnati R, et al. Source, occurrence and fate of antibiotics in the Italian aquatic environment. *J. Hazard Mater*. 2010; 179: 1042-1048. DOI: 10.1016/j.jhazmat.2010.03.110
- [173]. Liu X, Zhang H, Li L, et al. Levels, distributions and sources of veterinary antibiotics in the sediments of the Bohai Sea in China and surrounding estuaries. *Mar Pollut Bull*. 2016; 109: 597-602. DOI: 10.1016/j.marpolbul.2016.05.033.
- [174]. Pereira AMPT, Silva LJG, Laranjeiro CSM, et al. Human pharmaceuticals in Portuguese rivers: The impact of water scarcity in the environmental risk. *Sci Total Environ*. 2017; 609: 1182-1191. DOI: 10.1016/j.scitotenv.2017.07.200.
- [175]. Wu M, Xiang J, Chen F, et al. Occurrence and Risk Assessment of Antide pressants in Huangpu River of Shanghai, China. *Environ Sci Pollut Res*. 2017; 24: 20291-20299. DOI: 10.1007/s11356-017-9293-x.
- [176]. Nguyen HT, Thai PK, Kaserzon SL, et al. Assessment of drugs and personal care products biomarkers in the influent and effluent of two wastewater treatment plants in Ho Chi Minh City, Vietnam. *Science of The Total Environment*. 2018; 631-632: 469-475. DOI: 10.1016/j.scitotenv.2018.02.309.
- [177]. Rozman D, Hrkal Z, Váňa M, et al. Occurrence of Pharmaceuticals in Wastewater and Their Interaction with Shallow Aquifers: A Case Study of Horní Beřkovice, Czech Republic. *Water*. 2017; 9(3): 218-232. DOI: 10.3390/w9030218.
- [178]. Tahrani L, Van Loco J, Ben Mansour H, et al. Occurrence of antibiotics in pharmaceutical industrial wastewater, wastewater treatment plant and sea waters in Tunisia. *J Water Health*. 2015; 14: 208-213. DOI: 10.2166/wh.2015.224
- [179]. Grădinaru AC, Popescu O, Solcan, G. Antibiotic residues in milk from Moldavia, Romania. *Human & Veterinary Medicine International Journal of the Bioflux Society*. 2011; 3 (2): 133-135
- [180]. Escribano M, San Andres MI, de Lucas JJ, et al. Ivermectin residue depletion in food producing species and its presence in animal foodstuffs with a view to human safety. *Curr Pharma Biotechnol*. 2012; 13:987-998. DOI: 10.2174/138920112800399121
- [181]. Afonso-Olivares C, Sosa-Ferrera Z, Santana-Rodríguez JJ. Occurrence and environmental impact of pharmaceutical residues from conventional and natural wastewater treatment plants in Gran Canaria (Spain). *Sci. Total Environ*. 2015; 599-600: 934-943. DOI: 10.1016/j.scitotenv.2017.05.058.
- [182]. Branchet P, Ariza Castro N, Fenet H, et al. Anthropogenic impacts on Sub-Saharan urban water resources through their pharmaceutical contamination (Yaoundé, Centre Region, Cameroon). *Sci Total Env*. 2019; 660: 886-898. DOI: 10.1016/j.scitotenv.2018.12.256.
- [183]. Letsinger S, Kay P, Rodríguez-Mozaz S et al. Spatial and temporal occurrence of pharmaceuticals in UK estuaries. *Science of the Total Environment*. 2019; 678: 74-84. DOI: 10.1016/j.scitotenv.2019.04.182
- [184]. Honjo A, Arimura R, Oliveira L, et al. Occurrence of pharmaceutical products, female sex hormones and caffeine in a subtropical region in Brazil. *Clean Soil, air & Water*. 2017; 45 (9): 1700334. DOI: 10.1002/clen.201700334.
- [185]. Oertel R, Baldauf J, Rossmann J. Development and validation of a hydrophilic interaction liquid chromatography-tandem mass spectrometry method for the quantification of the antidiabetic drug metformin and six others pharmaceuticals in wastewater. *J.Chromatogr*. 2018; A1556: 73-80. DOI: 10.1016/j.jchroma.2018.04.068
- [186]. Guruge S, Goswami P, Tanoue R, et al. First nationwide investigation and environmental risk assessment of 72 pharmaceuticals and personal care products from Sri Lankan surface waterways. *Sci. Total Environ*. 2019; 690: 683-695. DOI: 10.1016/j.scitotenv.2019.07.042
- [187]. Chen Q, Guo X, Hua G, et al. Migration and degradation of swine farm tetracyclines at the river catchment scale: can the multi-pond system mitigate pollution risk to receiving rivers? *Environ Pollut*. 2017; 220:1301-10. DOI: 10.1016/j.envpol.2016.11.004
- [188]. Al Aukidy M, Verlicchi P, Jelic A, et al. Monitoring release of pharmaceutical compounds: occurrence and environmental risk assessment of two WWTP effluents and their receiving bodies in the Po Valley Italy. *Sci Total Environ*. 2012; 438: 15-25. DOI: 10.1016/j.scitotenv.2012.08.061.
- [189]. Elliott SM, Brigham ME, Kiesling RL, et al. Environmentally Relevant Chemical Mixtures of Concern in Waters of United States Tributaries to the Great Lakes. *Integr Environ Assess Manag*. 2018; 9999: 1-10. DOI: 10.1002/ieam.4041.
- [190]. Chau HTC, Kadokami K, Duong HT, et al. Occurrence of 1153 Organic Micropollutants in the Aquatic Environment of Vietnam. *Environ Sci Pollut Res*. 2018; 25: 7147-7156. DOI: 10.1007/s11356-015-5060-z.
- [191]. Peng Y, Fang W, Krauss M, et al. screening hundreds of emerging organic pollutants (EOPs) in surface water from the Yangtze River Delta (YRD): occurrence, distribution, ecological risk. *Environ Pollut*. 2018; 241: 484-493. DOI: 10.1016/j.envpol.2018.05.061.
- [192]. Alder AC, Schaffner C, Majewsky M, et al. Fate of β -blocker human pharmaceuticals in surface water: Comparison of measured and simulated concentrations in the Glatt Valley Watershed, Switzerland. *Water Research*. 2010; 44(3): 936-948. DOI: 10.1016/j.waters.2009.10.002.

- [193]. Kermia AEB, Fouial-Djebba M, Trari M, et al. Occurrence, fate and removal efficiencies of pharmaceuticals in wastewater treatment plants (WWTPs) discharging in the coastal environment of Algiers. *Comptes Rendus Chimie*. 2016; 19(8): 963-70. DOI: 10.1016/j.crci.2016.05.005.
- [194]. Wei-po Lai, W, Lin Y, Tung H, et al. Occurrence of pharmaceuticals and per fluorinated compounds and evaluation of the availability of reclaimed water in Kinmen. *Emerg Contam*. 2016; 2: 135–144. DOI: 10.1016/j.emcon.2016.05.001
- [195]. Cesen M, Heath D, Krivec M, et al. Seasonal and spatial variations in the occurrence, mass loadings and removal of compounds of emerging concern in the Slovene aqueous environment and environmental risk assessment. *Environ Pollut*. 2018; 242:143-152. DOI:10.1016/j.envpol.2018.06.052.
- [196]. Dong H, Yuan X, Wang W, et al.. Occurrence and removal of antibiotics in ecological and conventional wastewater treatment processes: a field study. *J Environ Manag*. 2016; 178:11-19. DOI: 10.1016/j.jenvman.2016.04.037.
- [197]. Mendoza A, Perez JAS, López de Alda M, et al. Pharmaceuticals and iodinated contrast media in a hospital wastewater: A case study to analyse their presence and characterise their environmental risk and hazard. *Environmental Research*. 2015; 140: 225-241. DOI: 10.1016/j.envres.2015.04.003
- [198]. Deng W, Li, N, Zheng H, et al. Occurrence and risk assessment of antibiotics in river water in Hong Kong. *Ecotoxicol Environ Saf*. 2016; 125: 121–127. DOI: 10.1016/j.ecoenv.2015.12.002.
- [199]. Huang F, Zou S, Deng D, et al. Antibiotics in a typical karst river system in China: spatiotemporal variation and environmental risks. *Sci. Total Environ*. 2019; 650:1348–1355. DOI: 10.1016/j.scitotenv.2018.09.131.
- [200]. Jiang L, Hu X, Yin D, et al. Occurrence, distribution and seasonal 314 variation of antibiotics in the Huangpu River, Shanghai, China. *Chemosphere*. 2011; 82(6): 822–828. DOI: 10.1016/j.chemosphere.2010.11.028.
- [201]. Hu Y, Yan X, Shen Y, et al. Antibiotics in surface water and sediments from Hanjiang River, Central China: Occurrence, behavior and risk assessment. *Ecotoxicology and Environmental Safety*. 2018; 157: 150-158. DOI: 10.1016/j.ecoenv.2018.03.083.
- [202]. Whelan M, Chirollo C, Furey A, et al. Investigation of the persistence of levamisole and oxytetracycline in milk and fate in cheese. *J Agric Food Chem*. 2010; 58 (23): 12204-12209. DOI: 10.1021/jf102725b.
- [203]. Chen XJ, Li FY, Hao HB. Preparation of two aquatic plants to antimicrobial contaminated water. *Subtropical Plant Science*. 2012; 41: 1-7.
- [204]. Zhu YG, Johnson TA, Su JQ, et al.. Diverse and abundant antibiotic resistance genes in Chinese swine farms. *Proc Nat Acad Sci USA*. 2013; 110:3435–3440. DOI: 10.1073/pnas.1222743110.
- [205]. Xie WY, Yang XP, Li Q, et al. Changes in antibiotic concentrations and antibiotic resistome during commercial composting of animal manures. *Environmental Pollution*. 2016; 219: 182-190. DOI: 10.1016/j.envpol.2016.10.044.
- [206]. Al-Kaf AL, Naji KM, Abdullah QYM, et al. Occurrence of Paracetamol in Aquatic Environments and Transformation by Microorganisms: A Review. *Chronicles of Pharmaceutical Science*. 2017; 1: 341-355.
- [207]. Michael I, Rizzo, L, McAdell CS, et al. Urban wastewater treatment plants as hotspots for the release of antibiotics in the environment: a review. *Water Research*. 2013; 47: 957-995. DOI: 10.1016/j.watres.2012.11.027.
- [208]. Olatoye O, Daniel OF, Ishola SA. Screening of antibiotics and chemical analysis of penicillin residue in fresh milk and traditional dairy products in Oyo state, Nigeria. *Veterinary World*. 2016; 9(9): 948-954. DOI: 10.14202/vetworld.2016.948-954
- [209]. Falas P, Andersen HR, Ledin A, et al. Occurrence and reduction of pharmaceuticals in the water phase at Swedish wastewater treatment plants. *Water Science & Technology*. 2012; 66 (4): 783-791. DOI: 10.2166/wst.2012.243.
- [210]. López-Roldán R, Alda ML, Gros M, et al. Advanced monitoring of pharmaceuticals and estrogens in the Llobregat River basin (Spain) by liquid chromatography–triple quadrupole–tandem mass spectrometry in combination with ultra-performance liquid chromatography–time of flight–mass spectrometry. *Chemosphere*. 2010; 80: 1337-1344. DOI: 10.1016/j.chemosphere.2010.06.042.
- [211]. Li W, Gao L, Shi Y, et al. Occurrence, distribution and risks of antibiotics in urban surface water in Beijing, China. *Environ. Sci. Proc. Impacts*. 2015; 17:1611–1619. DOI: 10.1039/C5EM00216H.
- [212]. García-Galán MJ, Díaz-Cruz MS, Barceló D. Occurrence of sulfonamide residues along the Ebro River basin: removal in wastewater treatment plants and environmental impact assessment. *Environment International*. 2011; 37: 462-473.
- [213]. Pan X, Qiang ZM, Ben WW, et al. Residual veterinary antibiotics in swine manure from concentrated animal feeding operations in Shandong Province, China. *Chemosphere* 2011; 84:695–700. DOI: 10.1016/j.chemosphere.2011.03.022
- [214]. Boleda MR, Galceran MT, Ventura F. Validation and uncertainty estimation of a multiresidue method for pharmaceuticals in surface and treated waters by liquid chromatography–tandem mass spectrometry. *Journal of Chromatography*. 2013; A1286: 146-158. DOI: 10.1016/j.chroma.2013.02.077.
- [215]. Fisch K, Waniek JJ, Schulz-bull DE. Occurrence of pharmaceuticals and UV- filters in riverine run-offs and waters of the German Baltic Sea. *Mar Pollut Bull*. 2017; 124: 388–399. DOI: 10.1016/j.marpolbul.2017.07.057
- [216]. Akiba M, Senba H, Otagiri H, et al. Impact of waste water from different sources on the prevalence of antimicrobial-resistant *Escherichia coli* in sewage treatment plants in South India. *Ecotoxicol Environ Saf*. 2015; 115:203–208. DOI: 10.1016/j.ecoenv.2015.02.018.
- [217]. Prabhasankar VP, Joshua DI, Balakrishna K, et al. Removal rates of antibiotics in four sewage treatment plants in South India. *Environ Sci Pollut Res*. 2016; 23: 8679–8685. DOI: 10.1007/s11356-015-5968-3
- [218]. Iyaneer FS, Simamura K, Prabhasankar VP, et al. Occurrence of antibiotics in river water: A case study of Vrishabhavathi River near Bangalore, India. 33rd International Symposium on Halogenated Persistent Organic Pollutants, DIOXIN 2013, 25-30 August 2013, Daegu, Korea.
- [219]. Lien LTQ, Hoa NQ, Chuc NTK, et al. Antibiotics in wastewater of a rural and an urban hospital before and after wastewater treatment, and the relationship with antibiotic use— A one year study from Vietnam. *International Journal Environmental Research Public Health*. 2016; 13(6): 588-600 DOI: 10.3390/ijerph13060588.
- [220]. Ngigi, AN, Magu MM, Muendo BM. Occurrence of antibiotics residues in hospital wastewater, wastewater treatment plant, and in surface water in Nairobi County, Kenya. *Environ Monit Assess*. 2019; 192(1):18-27. DOI: 10.1007/s10661-019-7952-8.
- [221]. Kang H, Choi K, Lee H-S, et al. Elevated levels of short carbon-chain PFCAs in breast milk among Korean women: Current status and potential challenges. *Environmental Research*. 2016; 148: 351-359. DOI: 10.1016/j.envres.2016.04.017.
- [222]. Elizabeta D-S, Zehra H-M, Biljana S-D, et al. Screening of Veterinary drug residues in milk from individual farms in Macedonia. *Vet. Rev*. 2011; 34(1): 5 – 13. UDC: 637.12.07: [636.09:615.33.074].
- [223]. Li WC. Occurrence, Sources, and Fate of Pharmaceuticals in Aquatic Environment and Soil. *Environ. Pollut*. 2014; 187: 193–201. DOI: 10.1016/j.envpol.2014.01.015.
- [224]. Shimizu A, Takada H, Koike T, et al. Ubiquitous occurrence of sulfonamides in tropical Asian waters. *Science of the Total Environment*. 2013; 358: 108-115. DOI: 10.1016/j.scitotenv.2013.02.027.
- [225]. Gaurav A, Gill JPS, Aulakh RS, et al. ELISA based monitoring and analysis of tetracycline residues in cattle milk in Punjab, *Veterinary World*. 2014; 7(1): 26-29. DOI: 10.14202/vetworld.2014.26-29

- [226]. Conde-Cid M, Álvarez-Esmoris C, Paradelo-Núñez R, et al. Occurrence of tetracyclines and sulfonamides in manures, agricultural soils and crops from different areas in Galicia (NW Spain). *Journal of Cleaner Production*, 2018; 197: 491– 500. DOI: 10.1016/j.jclepro. 2018. 217.
- [227]. Clarke L, Moloney M, Mahony JO, et al.. Determination of 20 coccidiostats in milk, duck muscle and non-avian muscle tissue using UHPLC-MS/MS. *Journal Food Additives & Contaminants: Part A*. 2013; 30: 958-969. DOI: 10.1080/19440049.2013.794306.
- [228]. Behera SK, Oh SY, Park, HS. Sorptive removal of ibuprofen from water using selected soil minerals and activated carbon. *Int. J. Environ. Sci. Technol.* 2012; 9:85–94 DOI: 10.1007/s13762-011-0020-8.
- [229]. Li B, Zhang T. Mass flows and removal of antibiotics in two municipal wastewater treatment plants. *Chemosphere*. 2011; 83 (9): 1284-1289. DOI: 10.1016/j.chemosphere. 2011.03.002.

Table 1: Concentration of different pharmaceuticals in sewage wastewater, hospital effluent, ground water, river water, aquaculture water, milk, vegetables/fruits, plant tissue manure

Compound	Wastewater/ Sewage water	Hospital Effluent	Freshwater/ Surface water	River water	Aquacul ture	Milk	Vegeta bles/ fruits	Plan t Tiss ues/ Man ure
Acetaminop hen	61ug/L (11); 3.6- 99.6 ug/L (37); 37- 1500 ng/L (38) ; 1.57-56.9 ug/L (39); 10 ng/L (40); 0.004-384 ug/L (41); 15.7ug/L(42); 150-570 ng/L (43); 1.9- 56944 ng/L (44); 810-1883 ng/L (45)	4.1-62.25 ng/L (46); 5.75 mg/L (47); 62250 ng/L (44); 160 ug/L (48)	28.6-507 ng/L (49); 1.89 mg/L (50); 10,000ng/L (51); 0.04-0.42 ug/L (52); 280-13440 ng/L (53); 75 ng/L (54); 187-520 ng/L(55);4.1-78170 ng/L (44)	10 ug/L (51); 86.6- 902 ng/L (56);3.1- 13.7 ng/L (57); 1490 ng/L(58); 5.36 ng/L (59)	91 ng/L (60)			
Acetyl salicylic acid	0.14-2.8 ug/L (41); 15.2 ug/L (55); 0.04-0.42 ug/L (52)	0.004-384 ug/L (41)	0.002-20.96ug/L (61); 105- 90000ng/L (38); 0.13 ug/L (62);476- 20960 ng/L (53)	40-164 ng/L (63); 0-804 ng/L (64)				
Albuterol	11-35 ng/L (38)							
Amoxicilli n	27ug/L (11); 0.54- 1.29ppb (65); 172.6ng/L (66); 62.5 ng/L(outlet (66);17.7 µg/L (67);13.8µg/L (67); 0.0-33800 ng/L (68); 147- 1670 ng/L (69); 16.2-189 ug/L (55)	7.3-39.1ppb (65); 0.16- 0.79µg/L (70); 0.001- 0.023ppm (71); 5.86 µg /L (72); 2- 57ng/L (73)	622ng/l (74); 0.06- 0.36µg/L (70); 4-17 ng/L (53)	0.0- 16.7ng/L (75); 0.14- 0.37ng/L(65); 0.0- 2.7ng/L (76)	0-40 ng/L (73);0.0- 0.06µg/m L (77)	68-802 ug/kg (78)	0.81-0.91 mg/kg (25)	
Ampicillin	139ppb (79)	131ppb(79);0. 09-0.54 µg/L (70) 0.001- 0.024 ppm (71); 1.24 mg/L (80)	0.0-0.16µg/L (70)	40-164 ng/L(73)	0.0- 0.20µg/m L(77)	0.5-92 ug/kg (78)		
Atenolol	0.0-4.03ug/L(37); 512-3000 ng/L (38); 2-21ug/L (81); 0.1-33.1ug/L (82); 264-1860 ng/L (83); 427ng/L (84); 329-730 ng/L (85); 129-1451 ng/L(69);134-2110 ng/L (86,87)		859 ng/L (38); 690 ng/L (50)12.6-665 ng/L (88); 1850 ng/L (55)	1-91 ng/L (89); 8-68 ng/L (90); 241 -679 ng/dm ³ (91); 10.1- 100 ng/L (92)				
Atrovasatin	22-180 ng/L (69); 45.8 ng/L(93)		101 ng/L (92); 7.3ng/L (51); 42- 209 ug/L (94)	21.7ng/L (95,96); 0.56-1990 ug/L (94)				
Azithromyc in	160-1866 ng/L (97); 112-274 ng/L (97); 9.2ug/L (11); 130- 505.5 ng/L (98);	85-113 ng/L (99); 189- 62507 ng/L (51)	0.0-16.7 ng/L (49,56); 2356ng/L (51); 4.86-13.01 ng/L (104); 0.61 ug/L (94)	0.0-25.7 ng/L (56); 0.0-67 ng/L (89); 0.0-1620		9708.7 ug/kg (106)		

	390 ng/L (84); 0-592 ng/L(100); 45.2-597.5 ng/L (100); 1083 ng/L (101);728-1890 ng/L (69); 88-680 ng/L (102); 3020-4120 ng/L (103)			ng/L (10); 0-67 ng/L (98); 240 ng/L (105); 19-2270 ng/L (73)				
Benzoyllecgonine	241-1274 ng/L (107)		770 ng/L (108); 10-1019 ng/L (107)					
Bupropion	2.1ug/L(11);19.1 ng/L (109)		227ng/L (51)					
Caffeine	24-123ug/L (80); 10 ng/L (110); 5000 ng/L (84); 27500-74800 ng/L (85); 125 ug/L (41); 5173-113200 ng/L (44); 7570-11403 ng/L (45)		31.5-620-902 ng/L (56); 2130ng/L (111); 7051 ng/L (89); 0.29 mg/L (50); 7110 ng/ (51); 1.1-0.42 ug/L (52); 6.2-12.3 ng/L (112); 19-127000 ng/L (53); 3760 ng/L (55); 65-6798 ng/L (44)	131-708 ng/L (56); 66.3-8570 ng/L (89); 54.7-199 ng/L (90); 37.6-72.2 ng/L (113); 0-666 ng/L (64)				
Carbamazepine	57-240 ng/L (38); 0.04-378 ug/L (82); 21-832 ng/L (114); 940ng/L (83); 60.58ug/L (85); 0.001-300 ug/L (115); 0.004-18ug/L (41); 132 ug/L (116); 73-151 ng/327-949 ng/L (69); 43.4-672.5 ng/L (49);60-276000 ng/L (115); 1035-11478 ng/L (117); 0.30 ug/L (55); 5-1680 ng/L (44); 340-482.5 ng/L (118)	30-70 ng/L (44); 0.54-2 ug/L (119); 3ng/L (120)	0.02-8.05ug/L (61); 0.0-5.90 ng/L (56); 566 ng/ L (113); 730 ng/L (121); 0.42 mg/L (50); 595 ng/L (122); 1238 ng/L (51) 0.041-0.34 ug/L (52); 0.6-1.4 ng/L (112); 0.01-4.5ug/L (62); 12.6-659 ng/L (88); 69 ng/L (54); 229-390 ng/L (55)	0.0-11.5 ng/L (56); 1-30 ng/L (89); 0.0-136 ng/L (10); 92-186 ng/L (113); 2-128 ng/L (123); 72-1090 ng/dm ³ (91); 2-388 ng/L(64); 8.8 ng/L (124); 13.9 ng/L (58);1346 ng/L (63); 14-2900ng/L (125)		1.7-216 ng/g dry plant weight (126)		
Cefadroxil	0.02-0.85 ug/L (41); 18.25ug/L (127)	3.24mg/L (80)						
Cefixime		10.85µg/L (72)						
Cefpodoxime		0.28mg/L (80)						
Cefprozil	1.7ug/L (11)							
Cefuroxime	0.6µg/L (66); 1.7 µg/L (67); 49-24380 ng/L (88)	0.0-246 ng/L (73)		195-7800 ng/L (73)				
Cephalexin	14ug/L (11); 0.0-3.23 ug/L (37); 0.0-308.0 ng/L (100)		11-29 ng/L (53)					
Chloroamphenicol	0.0-23ng/L (69)	0.06-0.59 µg/L (70)	0.0-0.08µg/L (70); 355 ng/L (128); 0.36 ug/L (62)		5-32ng/L (129)			
Chlortetracycline	44µg/L (130); 0.02-1.5 ug/L (41); 68 ug/L (131)	0.37-17.7 ng/L (51)	8.4-15.4 ng/L (56); 690ng/L (51); 690 ng/L (128)	8.8-19.7 ng/L (56)				
Ciprofloxacin	1.5mg/L (67);1.4 µg/L (67);231-371 ng /L (97); 258-398ng/L (97); 3.0-5.45 mg/L(132); 41µg/L (73); 3.1ug/L (11); 45-260ng/L (38); 211-	237 µg/L (137); 218-236 µg/L (138); 0.07-0.08µg/L (70); 1.35 mg/L (80); 0.03-125	0.0-0.06µg/L (70); 0.2 ng/L (132); 0.001-6500 ug/L (61);0-6500,000 ng/L (50); 1.27 ug/L (142); 0.85 ug/L (143); 116ng/L (51); 30 ng/L (128);	1.3-124 ng/L (145); 10,000-2,500,000 ng/L (50); 5015 ug/L (146); 6-	250 ng/L (141)			

	630 ng/L (98); 24000 ng/L (84); 2180-5600 ng/L (84);27ng/L (133); 222-27100 ng/L (134); 38.4-584.9 ng/L (100); 0.82- 6453 ng/L (135); 0.8-212 ug/L (41); 199-2950 ng/L (69); 2.54-26.2 ng/L (136); 446- 1070ng/L (103); 48-1450ng/L (86); 135-165.8 ng/L (118)	ug/L (119); 1.3-33.9 ng/L (139); 1.99 ug/L (140); 5329-7494 ng/L (134); 1400-26000 ng/L (98); 53300 ng/L (141); 3.2- 19715 ng/L (51)	0.0- 323.7 ng/L (144); 0.6-12ng/L (53); 30.0-298.3 ng/L (104)	20 ng/dm ³ (91); 14300 ng/L (134) ; 14.9- 21.3 ng/L (147)				
Citalopram	3-72 ug/L (81); 282.3ng/L (148)		0-8000ng/L (50); 219ng/L (51)	0-76000 ng/L (50); 75-40900 ng/L (73)				
Clarithromycin	1129-3077ng/L (97); 377-762ng/L (97); 2.8ug/L (11); 1-10 ug /L (81); 280- 1213.5 ng/L (98); 88 ng/L (84); 60ng/L (120); 38- 83 ng/L (85); 0.0- 313.2 ng/L (100); 0.0-122ng/L (101); 33-501 ng/L (69); 87-160 ng/L (102)	1.51-159732 ng/L (51); 0.85-2 ug/L (119)	443 ng/L (122); 72 g/L (51); 0.0-154 ng/L (149); 276 ng/L (150)	0.9- 1497ng/L(151); 0.0- 48 ng/L (89); 2-21 ng/L (142); 0.0- 85 ng/L (56); 1.1- 8.3 ng/dm ³ (91); 159 ng/L (95)				
Clofibric acid	40 ng/L (40); 68ng/L (152); 165 ng/L (44);53 ng/L (153)		79100 ng/L (154); 10ng/L (51); 28 ng/L (155)	8- 24ng/dm ³ (91)				
Cloxacillin		0.31mg/L(80)						
Codeine	8-837 ng/L (156)	0.2-50 ug/L (119)	1000ng/L (108); 0.214 mg/L (50); 1000ng/L (51); 0.1- 0.30 ug/L (52)	262 ng/L (63)				
Decoquinat e	17-732 ng/L (32)							
Diclofenac	4-37ug/L(80); 0.001-94.2 ug/L (82); 115.1ng/L (133); 18-240 ug/L (115); 0.008-0.98 ug/L (41); 124200ng/L (152); 5.2 ug/L (42); 385- 1709 ng/L (69);7.9- 237.7 ng/L (49); 38-1020 ng/L (86, 87); 836000 ng/L (39);8.8-3600 ng/L (44); 881.1-4760 ng/L (118)	7200 ng/L (157); 0.24- 15 ug/L (119) ; 328 ng/L (44)	18740 ng/L(158); 42ng/L (51); 9.7 ng/L (133); 6.72- 940 ng/L(155); 0.27-1.52 ug/L (62); 96-115 ng/L (53); 258-1398 ng/L (159);48-364 ng/L (88); 180 ng/L (54); 1070 ng/L (160); 444-4830 ng/L (55); 8.8-127 ng/L (44)	140-310 ng/L (161); 0.0- 54 ng/L (85); 0.14- 18.74 ug/L (61); 0.0-64 ng/L (89); 0.0-380 ng/L (10); 0.0-51 ng/L (113); 228-3000 ng/dm ³ (91); 0- 678 ng/L (64); 32 ng/L (102); 675ng/L (95,96)				
Diltiazem	2.6ug/L (11);54- 340 ng/L (38); 42.7 ng/L (109)	0.71-2 ug/L (119)	130ng/L (51);0.0- 17.4 ng/L (56);	3.38-8.64 ng/L (56)				
Doxycycline	0-2.37 ng/ L (162); 1.58-6.75 mg/L (132) ; 1-11 ug/L (81) ; 5.3-9	0.1-7 ug/L (119); 24-120 ng/L (76);	0-234ng/L (164); 0- 47.3ng/L (165); 0.48ng/L(166);	0- 103.1ng/L (9);				6.5(animal- manure); 0.87(soil);2.1(S

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	ng/L (98) ; 1.8-264 ng/L (163); 584 ug/L (131); 12.6 ng/L (118)	1.2-62.6 ng/L (51);1.20-32.8ng/L (118)	0.8ng/L (132); 0.0-10.1 ng/L (56); 80 ng/L (51)	10-110ng/L (150); 0.0-12.8 ng/L (56); 1.9-68 ng/L (76); 32.9 ng/L (57)			ludge) (167); 0.23-13.5(168); 37 (131)
Enrofloxacin	50-78ng/L (97); 0.008-1.1 ug/L (41); 20-34 ng/L (97); 28ng/L(32); 2.9 ng/L (169)		0-25,000 ng/L (50); 15ng/L (51)	0-30,000 ng/L 50); 2.9 ng/L (57)	680 ng/L (141)		
Erythromycin	1.5ug/L (11); 0.14-10 ug/L (82); 182.7 ng/L (98); 7000 ng/L (84); 9-249 ng/L (170); 0.009-0.34 ug/L (41); 2.4-271.3 ng/L (49); 18-359 ng/L (86)	0.001-0.008 ppm (71); 27-83 ug/L (119); 7.2 ug/L (140); 1200 ng/L (141); 0.01-101 ng/L (51)	0.0-27.69 ng/L (56); 137 ng/L (122); 438 ng/L (51); 0-568 ng/L (171); 1.00 ug/L (62); 57.6 ng/L (150)	0.78-15.9ng/L (172); 0.7-85.3ng/L (173); 0.0-63.7 ng/L (56); 9-423 ng/dm ³ (91); 24-145 ng/L (105); 91.9 ng/L (96); 32.9-38.8 ng/L (174)	4 ng/L (141); 5.5-57.4 ng/L (60)		
Fluoxetine	28.5 ng/L (110);2.36-24.8 ng/L (136); 4-1570 ng/L (86)		0.0-3.4 ng/L (56) 32.0 mg/L (50); 65ng/L (51)	0.0-4.45 ng/L (56); 0.0-48 ng/L (64); 2.3-42.9 ng/L (175)			
Furosemide	42-1088ug/L(81); 491-2437 ng/L (69); 161-1990ng/L (86); 11.9-24.3 ug/L (55)	2600 ng/L (12)		359 ng/L (95)			
Gabapentin	5.4ug/L (11); 690-1700 ng/L (176);518-3720 ng/L (86); 213 ug/L (55); 10 ng/L (177)		1887 ng/L (38); 54ng/L (51); 4730-11200 ng/L (55)	17.4-1445 ng/L (92); 19.1 ng/L (95,96)			
Gatifloxacin	3.7µg/L (66); 0.48 µg/L (67)						
Gemfibrozil	3.4ug/L (11); 308-2400 ng/L (38); 17 ng/L (40); 0.01-42 ug/L (115); 42-1772 ng/L (69)		790ng/L (51); 5-1374 ng/L(155); 1.8-2.6 ng/L (112); 409-677ng/L (55)	12-3678 ng/dm ³ (91); 6-744ng/L (64)			
Gentamicin	0.0-19100 ng/L (178)	400-7600ng/L (178)	0.0-21ng/L (171)	0.0-1400ng/L (Seawater) (178)	198.7ug/kg (179)		
Hydrochlorothiazide	790-2800ng/L (38)		75ng/L (51); 819-1470 ng/L (55)				
Ivermectin					2 ug/kg (milk)(180)		
Ibuprofen	37ug/L (11); 285-4200 ng/L (38); 8-94ug/L (81); 0.004-603 ug/L (82); 8.02-43.22 ug/L (116); 5ng/L (120); 221 ng/L (133); 0.16-4.4 ug/L (41);143000 ng/L (152); 20.1 ug/L (42); 26.4-294 ng/L	0.07-43 ug/L (119); 141000 ng/L(84)	31320 ng/L (74); 414 ng/L (122); 2796ng/L (51); 62 ng/L (133); 1-2148 ng/L (155); 8.0 ng/L (112); 276-516 ng/L (182); 6297 ng/L (183); 6.75-373 ng/L (88); 3210 ng/L (160); 5-414 ng/L (44)	100-1100 ng/L (161); 0.0-303 ug/L (61); 610.0- 195 ng/L (89); 0.0-988 ng/L (10); 9-2383 ng/L			

Lisinopril	132-3300ng/L (38)						
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	(136);500 ng/L (54); 52-100 ng/L (103); 1673000ng/L (39); 21700ng/L (181);20.1 ug/L (42); 15.7 ug/L (55); 10-17933 ng/L (44)			(154); 0.0- 210 ng/L (121);87- 789 ng/dm ³ (91); 0- 804 ng/L (64); 2.4- 320 ng/L (103); 116 ng/L (95,96); 203 ng/L (58); 2302 ng/L (63)			
Ketoprofen	2-13 ug/L (81); 0.004-8.56 ug/L (82); 6540ng/L (152); 4.8 ug/L (42); 1720-6007 ng/L (69); 19.7-844 ng/L (136); 210- 5480 ng/L(86); 1170 ng/L (181)		2.8 ng/L (112); 930 ng/L (160)	40-3300 ng/L (161); 2710ng/L (111); 2.8-163 ng/dm ³ (91); 0- 268 ng/L (64); 620 ng/L (184); 193 ng/L (95,96)	8.3-24.7 ng/L (60)		
Levofloxacin	532-1425ng/L (97) 600-6800ng/L (97); 0-6.2mg/L (132); 41.75 ng/L (98); 5- 2247 ng/L (185); 38.2 ug/L (55)	0.414 ug/L (142)	87.4 ng/L ; 5-2247 ng/L (185)	0.0-10.5 ng/L (186)		87.4 ng/L ; 5-2247 ng/L (185)	
Lincomycin	37-54ng/L (97); 884-1136ng/L (76); 1.2-11.3 ug/L (41)	0.3-2 ug/L(119)	860.7ng/L (187); 0.0-40.5 ng/L (56); 730ng/L (51); 730 ng/L (128);339- 2840ng/L (150)	1.2- 248.9ng/L (188); 0.0- 59.2 ng/L (56); 20- 24.4 ng/dm ³ (92); 10.1ng/L (57)	2.9-226 ng/L (60)		
Lisinopril	132-3300ng/L (38)						

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Metaformin	24ug/L (11); 4.02-31.2 ug/L (37); 16.1-1372.8 ng/L (49,56); 134-367 ug/L (55)	154000 ng/L (84)	590-34000 ng/L (189); 130 ng/L (54); 5450-7130 ng/L (55)	45.2-2595 ng/L (92); 8250 ng/L (190)			
Metronidazole	28 ng/L (98); 0.0-93.2 ng/L (100); 13-392 ng/L (69)	3.8µg/L (137); 0.1-90 ug/L (119); 130400 ng/L (141)	5.46 ug/L(140)				
Metroprolol	3.1ug/L (11);280-660 ng/L (38); 2-9 ug/L (81); 0.002-152 ug/L (82);1621.5ng/ L (83);0.5-90 ug/L (115); 0.0-196 ng/L (69); 410 ng/L (189);274 ng/L (44); 12.5-67.4 ng/L (118)	0.42-25 ug/L (119); 2400-25000ug/L (98)	0-7000 ng/L (50); 237ng/L (51); 7.6-324 ng/L (191);336-499 ng/L (55); 24.8-90 ng/L (44)	8041 ng/L (192); 0-240 ng/L (122)			
Mupirocin	2.8ug/L (11); 1.53 ug/L (55)						
Nalidixic acid	68-79ng/L (97);224-358ng/L (97); 0.0-50.3 ng/L (100)						
Naproxen	2.4ug/L (11); 7-66 ug/L (81); 0.002 ug/L (82); 2.94-36.17 ug/L (116); 109.3 ng/L (133); 0.06-0.48 ug/L (41); 2.82 ug/L (42); 4161-10150 ng/L (69); 1220-9585 ng/L (193); 104.3 ng/L (194); 16.8 ng/L (136); 432-3160 ng/L (103);40-1630ng/L (86); 464000 ng/L (39); 2.62-235 ng/L(195); 872 ng/L (181); 12-625 ng/L (44)	10-11 ug/L (119)	107ng/L (51); 6.8 ng/L (133);147 ng/L(155); 228.3 ng/L (193); 52.4-124.2 ng/L (75); 6.67-145 ng/L (88); 110 ng/L (54); 4-125 ng/L (191); 1424 ng/L (160); 20-483 ng/L (44)	80-380 ng/L (161); 0.005-32 ug/L (61);19600 ng/L (111); 5.7-100 ng/dm ³ (91); 8-214 ng/L (64);340 ng/L (184); 73.1 ng/L (95,96); 2.98-221 ng/L (195)			
Neomycin					2048.5 ug/kg (179)		
Norfloxacin	155-514ng/L (97); 2554-2775ng/L (97);20.6-150 ng/L (98); 0.0-5411 ng/L (135)	23µg/L (137); 0.03-44 ug/L (119); 0.8- 4.4 ng/L (139);3300-37000 ng/L (98);1500 ng/L (141)	441.9 ng/l (15); 0.004-520 ug/L (61);0.0-520,000ng/L(50); 120 ng/L (51) 0.0-367 ng/L (144); 0.7-4 ng/L (53)	.0-4700 ng/L (50); 251 ug/L (146); 40-88 ng/dm ³ (91); 0.0-518 ng/L (161)	60600 00ng/L (141)		
Norfluoxetine	0.0-10.4ug/L (37)		13.6ng/L (51)				
Novobiocin	254-364ng/L (97); 78-92ng/L (97)						

Ofloxacin	2.88-384 ng/L (136); 0-12.4 ng/L (162); 400 ng/L (98); 2.45-4.12 mg/L (132); 85µg/L(73);0.0-305.1 ng/L (100); 11.1-1330 ng/L (196); 497 ng/L (17); 6.9 ng/L(26); 37-1470 ng/L (86); 81000ng/L (39)	73µg/L(137);1.199 mg/ L (187);23-510 ng/L (98);19800 ng/L (141);0.28mg/L (80); 3400 ng/L (157);0.35-35 ug/L (119); 0.9-27.1 ng/L ((139)	0.3-990ng/L (164);0.0-182.7 ng/L (165); 0.0003-17.7ug/L (61) ; 43.5 ng/L (150);1547-4778ng/L (197); 0.0-80ng/L (166); 1199.7 ng/L (5); 2.1-26.4 ng/L (56);0-11,000ng/L (50) ; 0.0-503 ng/L (144)	306.1ng/L (145); 0.7 ng/L (198); 308 ng/L (199); 8-23 ng/L (102); 0-113.9 ng/L (200); 23-85190 ng/L (73);53-108ng/L (150); 6.0-36.7 ng/L (56); 180-10,000ng/L (50); 542.4 ug/L (146); 0.0-6.4 ng/L (201)	238.6 ng/L (141)		
Oxaprozin	6.6ug/L (11)						
Oxyclozanide						130ug/kg (202)	
Ox tetracycline	664-841 ppb (79); 9µg/L (130);-9.4 mg/L (132); 4.3-233 ng/L (76); 0.01-0.94 ug/L (41); 0.68 ug/L (203); 230 ng/L (54); 1880 ng/L (150)	3200 µg/L (138); 0.01-4 ug/L (119); 75-1487 ng/L (76); 0.38-31.3 ng/L (51)	0.4ng/L (132); 0.0-30.5 ng/L (56); 1340ng/L (51)	12.4-26.3 ng/L (56); 3-26 ng/L (76)	0.056-0.234µg/mL (77); 75 ng/L (60)	223 ppb (79) ; 1.5µg/kg (130)	47(animal-manure); 1.4(soil); 7.37(Sludge) (167) 0.15-59.6(168) 354 (131)
Quinolones							0.1-5447(204, 205)
Paracetamol	31-1052 ug/L (81); 1.76-243 ug/L (206); 105780 ng/L (120); 12300-12400 ng/L (85); 64000ng/L (39); 17.7-227 ug/L (55)	5-1368 ug/L (119); 105910 ng/L (120); 211926 ng/L (94)	0.02-230 ug/L (61); 0.02-1.89 ug/L (206)	2-7024 ng/L (89); 144-305 ng/L (113); 15700 ng/L (154); 78-188 ng/dm ³ (91); 0-804 ng/L (64); 1565 ng/L (63); 14.3-9822 ng/L (92)			
Penicillin	4ug/L (11); 0.0-160 ng/L (207); 0.004-0.15 ug/L (41)	0.85-5ug/L (119)				15.22 ug/L (208); 13-353 ug/kg (78)	
Phenytoin	2.7ug/L (11)						
Propranolol	90 ng/L (209); 0.001-100 ug/L (115); 9-7500 ng/L (87)	298ng/L (84)	590 ng/L (210); 40.1 ng/L (122); 0.80 mg/L (50); 53ng/L (51); 0.7ng/L (112); 5.48-48.1 ng/L (88)	3.2-15 ng/dm ³ (91); 64.9 ng/L (92); 57 ng/L (95,96)			
Roxithromycin	234-388ng/L (97); 554-785ng/L (97); 1.5-290 ng/L (98); 1.9-269n g/L (49)		180ng/L (51); 480 ng/L (54)	0.3-66.5ng/L (173); 1.4-190 ng/L (102)			
Sparfloxacin	0.5µg/L (66);2.1µg/L (67); 19000 ng/L (39)						
Streptomycin	0.0-2700ng/L(178)			0.0-3400ng/L(Sea water) (178)	280.6 ug/kg (179)		

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Sulfadiazine	0.28-71.8 ng/L (162); 3.3ng/L (169); 0.364 ug/L (203); 1.22-41.0 ng/L (49); 1.8-57 ng/L (102)	0.001-0.003 ppm (71)	0-520ng/L (211); 0-45.6 ng/L (165);9- 137 ng/L (197)	0.7-6.4ng/L (212);0- 726 ng/L (150); 0.58 ng/L (124); 0.93-68 ng/L (102)	164-3941 ng/L (32)	0.001-0.004 ppm (71)	5 (animal-manure) 0.76(soil);0.056(Sludge) (167); 7 (131)
Sulfadimethoxine	3.7ng/L (169)		15,000ng/L (51)			31-69ug/kg (78)	
Sulfadimidine	0.53-89.1 ng/L (162)		0-123ng/L (211); 0.0-9.9ng/L (165);nd- 113 ng/L (214);nd-49 ng/L (166)	2.5-65.2ng/L (212); 2.1-623.3ng/L (200); 0-1080ng/L (150)			2(animal-manure); 0.011(soil);0.027(Sludge) (167) 0.06-6.04 (168)
Sulfamerazine	2.2ng/L (167)		1.5ng/L (51); 0.7-1.2 ng/L (215)				4.5(animal-manure); 0.31(soil);0.037(Sludge) (167); 28.7 (213)
Sulfamethadiazine			0.0-23.5 ng/L (56)	0.0-20.6 ng/L (56)			
Sulfamethazine	9.6 µg/L (130); 2.5-114ng/L (169); 0.008-0.16 ug/L (41); 3.2-586 ng/L (69); 132 ng/L (44)	19153 ng/L (141)	0.0-25.7 ng/L (56); 220ng/L (51)	0.0-14.1 ng/L (56); 360 ng/L (44)	29-180 ng/L (32); 2 ng/L (141)	0.0 µg/kg (130)	0.1-1.2 mg/kg in Plant tissue (25)
Sulfamethizole	10 µg/L (130); 2.4/L (169); 0.004-0.2ug/L (41); 11-480 ng/L (86)	0.03-8.55 ng/L (51)	130ng/L (51)				0.10-0.66 (168)
Sulfapyridine	0-210ng/L (162); 400 ng/L (32); 78.2/L (169), 2012); 4.7-112 ng/L (100)		0 -510ng/L(211)	0.19-13.69ng/L (150); 1.4-112.5 ng/L (9); 121ng/L (75); 1.1-42.5ng/L (212)			

Sulfamethoxazole	0.23-1.02µg/L (216, 217); 0.16-0.9 µg/L (218); 0.4 µg/L (130); 0.3-36.38 ng/L (162);159-174ng/L (97);1044-1280ng/L (97); 252µg/L (73);62.1-88.8ng/L (77); 3.8ug/L (11); 5--15 ug/L (81); 0.003-0.98ug/L (82); 10-57ng/L (110); 162 ng/L (84);30-132 ng/L (85); 59.3 ng/L (133); 98-2200ng/L (219); 7.8 ug/L (220); 0.0-68.5ng/L (99); 0.52-88 ug/L (41); 19-43 ng/L (102); 26-633 ng/L (87); 1520 ng/L (179);12.6 ug/L (55); 156-984 ng/L (44)	81µg/L (136);4.6 µg/L (137);0.06-0.12µg/L (70); 0.001-0.018 ppm (71); 0.04-83 ug/L (119); 65-9800 ng/L (219); 20.6 ug/L (219); 20300 ng/L (141); 0.15-373 ng/L (51); 1335 ng/L (44)	0-650ng/L(211); 0.0-171.6ng/L (165);13-149ng/L (214); 0-250 ng/L (166); 0.0-0.08µg/L (70); 0.001-29 ug/L (61); 0.0-44.4 ng/L (49,56); 0.17 mg/L ; 1.40 mg/L (50); 1.25 ug/L (143); 1900ng/L (51); 6 ng/L (131); 608 ug/L (219); 0.3-18.6 ng/L (163); 0.06-0.33ug/L (52); 1.50-2.93ug/L (62); 0.6-2 ng/L (53) 380 ng/L (54);25.7 ng/L (150); 727-772 ng/L (55); 1.7-300 ng/L (44)	2.2-764.9ng/L (9); 0.0-68ng/L (151); 1.9-35.6ng/L (212); 0-616ng/L (150); 0.0-42.6 ng/L (56); 0.0- 56 ng/L (89); 10-110 ng/dm ³ (91); 60-80ng/L (213); 10-252 ng/L (73); 320 ng/L (58); 106.7 ng/L (96)	0.0-0.05µg/mL (77); 23900 ppm (71)	0.7 µg/kg (130); 0.001-0.002 ppm (71)	18(animal-manure); 0.67(soil);24(Sludge) (167); 0.12-2.8 (168) 1.06-1.89mg/kg Roots of radish (25)
Sulfamethoxypyridazine	92-905 ng/L(32); 3.4ng/L (169)						
Sulphaquinoxaline	104-337 ng/L (32); 2.6/L (1697)						
Sulphonamide	2.8 ug/L (220)	15.7 ug/L (220)	0.4 ug/L (220)			2.5ug/kg (221); 13.5-147.9 ug/kg (222)	
Tetracycline	254 µg/L (130); 1.2ug/L (11); 23 ng/L (98); 45.4 ng/L (133); 0.0-231.2 ng/L (100);58-1960 ng/L (76)	0.0-0.001 (79); 0.01-4 ug/L (119); 13-1598 ng/L (76); 100 ng/L (141)	0.0-14.7 ng/L (56); 1.30 ug/L (143); 140ng/L (51)	0.0-18.9 ng/L (56); 14 ng/L (223)	180 ng/L (224); 0.012-0.112µg/mL (77)	5460 ug/kg (106); 271.4 ug/kg (179) ; 16-134.5 ug/kg (225)	57(animal-manure); 0.97(soil);2.17(Sludge) (167); 0.1-0.235 (162);2.4-3.8 (226) 98.2 (131)
Tindidazole		88µg/L (137); 0.26 mg/L (80)					
Toltrazuril						27ug/kg(27)	
Triamterene	1.4ug/L (11)						
Tramadol	2.2ug/L (11); 0.8-14.2 ug/L (81); 1686.9 ng/L (156); 76000 ng/L (84)		635-854 ng/L (55)				

Trimethoprim	121-165ng/L (97); 1088-1578ng/L (97); 107µg/L (73); 24.71-24.99 ng/L (77); 2.2ug/L(11);23-552ng/L (32); 0.06-6.8 ug/L (82);40-86.8 ng/L (228); 265ng/L (83); 2.6 ug/L (219); 15.2-190.6ng/L(100); 1.4-18 ug/L (41); 42-635 ng/L (69); 4500 ng/L (54); 33-788 ng/L (86)	2.2 µg/L(138); 0.01-15 ug/L (119); 6.6 ug/L (219); 7100 ng/L (141); 0.06-273 ng/L (51)	0.004-13.6 ug/L (61); 0.0-15.3 ng/L (56); 0.018mg/L (122), 8.0mg/L(50); 710 ng/ L (51); 0.4 ug/L (219); 0.08-0.28 ug/L (52); 6.7 ng/L (112); 0.40-5.5 ug/L (62); 1-7 ng/L (53); 274-633 ng/L (55)	0.0-20.2 ng/L (49,56); 3-26 ng/L (89); 0.0-9 ng/L (10); 5-100 ng/dm ³ (91); 17.2 ng/L (124); 196 ng/L (95,96); 16-106.5 ng/L (73)	1040000 ng/L (141); 1.5-94 ng/L (60)		2-17 ug/kg in plant tissues (25)
Tylosin	0.009-0.64 ug/L (11)		0.0-1.49 ng/L (56); 280ng/L (50)	0.3-2.8ng/L (151)	97.9ug /kg (179)		
Vancomycin	0.0-61 ng/L (229); 0.006-0.14 ug/L (41)		0.0-153.4 ng/L (171)	11.7ng/L(172)			