

Health Effects of Heavy Metal and Methods of Removal: A Review

Fiham Jassim Al-Obaidi*, Maryam I. Salman, Hala Mahdi Hamad

Department of Biology, College of Science, University of Anbar, Anbar, Ramadi, 31001, Iraq

sc.fahalobaidi@uoanbar.edu.iq



ARTICLE INFO

Received: 28 / 11 /2024

Accepted: 18/ 02 /2025

Available online: 08/ 06 /2025

DOI: [10.37652/juaps.2025.155470.1341](https://doi.org/10.37652/juaps.2025.155470.1341)

Keywords:

biomineralization, biosorption,
bioremediation, biotransformation,
toxicity of heavy metals

Copyright©Authors, 2025, College of Sciences, University of Anbar. This is an open-access article under the CC BY 4.0 license (<http://creativecommons.org/licenses/by/4.0/>).



ABSTRACT

The accumulation of heavy metals (HMs) has become a serious environmental problem because the ecosystem is characterized by the expansion of man-made and natural sources of metals. Human exposure to HMs has remarkably increased as a result of industrial activity in the 20th century. Pb, Cd, As, Cr, and Hg are the most prevalent HMs that pose a risk to humans. Poisoning can be chronic or acute following exposure to food, water, or air. Numerous organs and tissues are harmed by HMs, which bioaccumulate. A comparison of the mechanisms of action of HMs revealed that they exert toxicity via comparable pathways, including the inactivation of enzymes, production of reactive oxygen species, and development of oxidative stress. The conventional approaches for HM removal are inadequate when the concentration of HMs is no more than 100 mg/L. Secondary pollutant production, increased energy and chemical requirements, and reduced cost-effectiveness are some disadvantages of the above methods. Detoxifying HMs via microbial bioremediation is now possible because bacteria and fungi have superior capacities for bioaccumulation and biosorption over other microorganisms. The present work discusses the toxicity and absorption processes associated with HMs to improve the treatment of metal poisoning and increase our knowledge of the detrimental effects of HMs on body organs. It aims to increase knowledge and provide resources for the careful choice of bacteria remediation technology for detoxifying heavy metals. Sustainable microbial treatments could provide essential and economical approaches for lowering Heavy Metal cytotoxicity.

Introduction:

Heavy metals (HMs) are metallic substances with densities higher than occur water [1]. Typically, HMs are defined as elements with densities at less than five times greater than that of H₂O [2]. Under the assumption that heaviness and toxicity are connected, not only Metals that are heavy but also certain metalloids, like, may be toxic at low exposure levels [3]. Numerous HMs, such as Cd, Cr, Co, Cu, Pb, Hg, and Ni, are biologically nonessential and detrimental to aquatic environments [4].

Anthropogenic sources, which include the mining, nonferrous metallurgical, chemical, and electroplating industries, commonly release hazardous metals, including HMs, into the environment [5].

that they exhibit. How HMs enter the food chain and affect humans is depicted in Figure 1. Long-term exposure to HMs via skin contact, inhalation, and the ingestion of contaminated food could result in several illnesses in humans and other species [6].

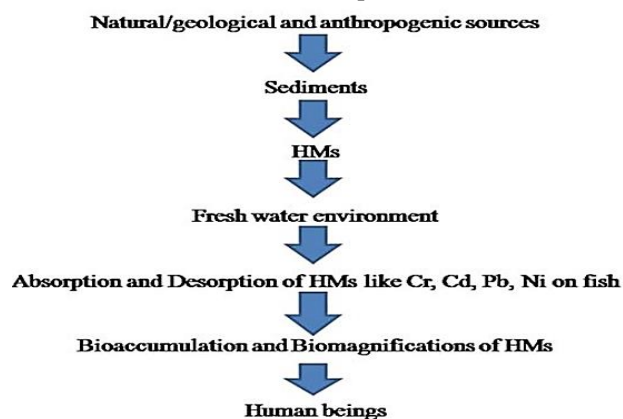


Figure 1. Sources and effects of HMs on People as they pass via the food chain [7].

*Corresponding author at: Department of Biology, College of Science, University of Anbar, Anbar, Ramadi, 31001, Iraq

ORCID: [https:// orcid.org/0000-0002-0147-4131](https://orcid.org/0000-0002-0147-4131),

Tel: +964 7800512068

Email: sc.fahalobaidi@uoanbar.edu.iq

The amount and duration of exposure to such harmful compounds determine the level of toxicity

Numerous sources, such as urbanization, mining, pesticide plants, sewage plants, chemical

industries, and biomedical and unsafe agricultural practices, discharge HMs into the environment (Figure 2) [8].

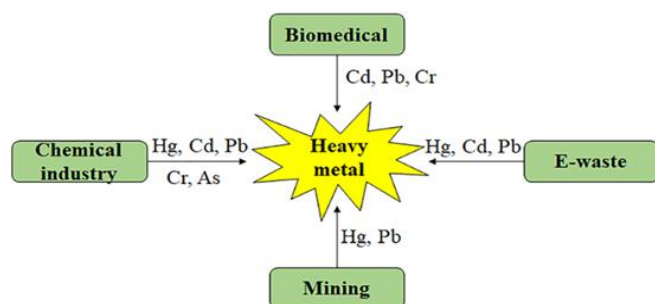


Figure 2. Origins of HM pollution [8].

Terrestrial ecosystems and their biodiversity are heavily dependent on soil. Plants, microorganisms, and animals can accumulate HMs, which are common pollutants in the soil environment. The European Environment Agency (EEA) has established limit values for soil pollutants for certain HMs, namely, Cd (0.44 ppm), Hg (0.20 ppm), Cr (0.20 ppm), Pb (0.48 ppm), and As (0.11 ppm) [9, 10]. The World Health Organization (WHO) has prescribed tolerable amounts of HM pollutants in drinking water of 0.005 ppm for Cd, 0.001 ppm for Hg, 0.05 ppm for Cr, 0.05 ppm for Pb, and 0.05 ppm for As [11, 12]. Given that elevated levels of HMs could lead to health issues, the WHO and Food and Agriculture Organization of the United Nations have established maximum ingestion limits. The following are the maximum permissible concentrations of HMs in vegetables: 0.05 mg/kg Hg for all vegetables, 0.3 mg/kg for root vegetables, 0.2 mg/kg Cd for leafy vegetables, 0.1 mg/kg for other vegetables, 0.15 mg/kg Pb, 0.1 mg/kg As, and 0.1 mg/kg Cr [13, 14].

Health effects of HMs on humans

Based on their different sources and locations, metallic elements—natural environmental components that are found in the Earth's crust—have different proportions [15]. Their existence is special because once they are in the environment, their complete removal is difficult [16]. Owing to the detrimental effects, biomagnification qualities, and long-term accumulation of HMs, HM pollution has received considerable attention even at low concentrations. HMs are recognized as some of the most hazardous

substances among the several types of pollutants in the environment [17, 18]. When HMs are present in the environment, the possibility that living organisms will ingest such dangerous compounds and that they will accumulate in different body organs, such as the liver, kidney, and bone, increases. Additionally, the accumulation of toxic metals causes severe damage to several body systems, such as the circulatory, skeletal, neurological, immunological, and endocrine systems [19, 20]. Several diseases that are related to HM toxicity are shown in Figure 3.

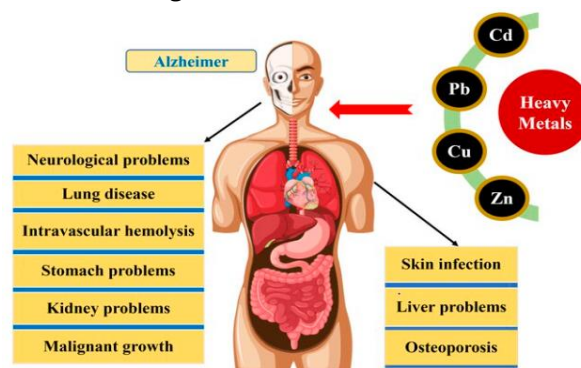


Figure 3. Effects of HM toxicity on human health [21].

People worldwide are exposed to HMs through drinking, eating, or inhaling them. Those who work in or near facilities that use such metals and their compounds are at considerable risk if they live close to an area in which such metals are illegally released. The fishing and hunting methods used in subsistence lifestyles might also increase exposure risks and have detrimental effects on health. The effects of such dangerous compounds on human health are now a major concern because of their frequent exposure. The severity of the problems caused by the release of hazardous metals into the environment has increased due to the expanding use of various metals in industries and human daily lives as a result of modern applications [22]. Runoff, acid rain, and erosion can transport HMs to different parts of soil and water bodies. The formation of HMs and their effects on human exposure are depicted in Figure 4. HMs are dangerous to biological systems because they can create reactive oxygen species (ROS) and form connections with sulfhydryl groups. Glutathione depletion and oxidative stress are symptoms of the deactivation of important macromolecules caused by the aforementioned phenomena. After exposure to dangerous metals, the body undergoes various processes,

such as potential interactions or obstructions of certain metabolic pathways [23]. Various negative effects on animal and human populations are consequently observed. Organ failure, hormone imbalances, metabolic abnormalities, compromised immune system function, congenital abnormalities, and cancer are among the numerous medical disorders that are included in the diseases mentioned above [24, 25]. Consequently, several international organizations have established regulations concerning the levels of metals in drinking water, food, and the environment. The following section describes the sources and human health toxicity of several HMs (Figure 4).

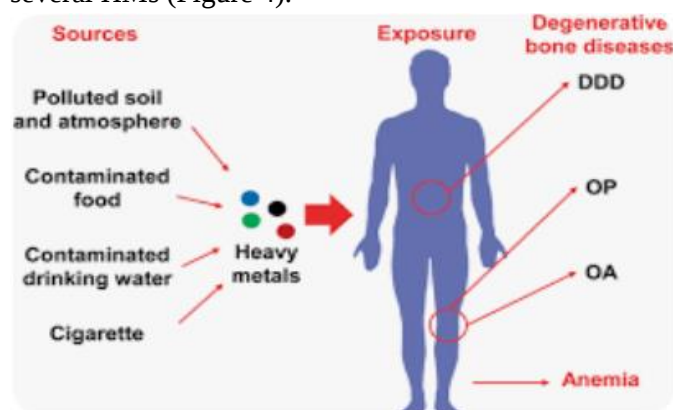


Figure 4: Human organ damage and oxidative stress after exposure to HMs [26].

HM toxicity to humans

As, which is a hazardous metal, can be found in air, water, and a range of geological formations. It is related to several detrimental health effects over long and short terms and has been demonstrated to have carcinogenic properties in humans [27]. During As biotransformation in humans, a number of As molecules become methylated, which can lead to the formation of harmful metabolites, such as dimethyl arsenic acid (DMA) and monomethylmalonic acid (MMA). Reduced respiration, enzyme activities, and mitotic division are the outcomes of the disruption of cell thiol groups [28]. An elevated risk of cardiovascular disease, especially hypertension, is associated with As exposure. Pregnancy-related hypertension is affected by exposure to As and its metabolites, namely, DMA and MMA [29]. Findings have demonstrated that pregnant women who have low DMA concentrations have increased diastolic, systolic, and major arterial pressure values.

The mercury is a dangerous HM that is present throughout the environment. It might undergo methylation, a process that can produce methylmercury (MeHg), which can collect in the food chain. Seafood consumption is related to human exposure to Hg [30]. Hg in the forms of MeHg and Hg^{2+} lowers overall antioxidant capacity and increases nitrite and lipoperoxidation concentrations [31]. Several studies have demonstrated that children exposed to Hg may experience serious side effects. Hg exposure during pregnancy negatively affects a child's growth; this negative effect might be linked to a reduction in the parasympathetic control of a child's heart autonomic function [32]. Hg exposure and blood pressure readings in childhood are positively correlated [33]. Increased Hg levels and adult dyslipidemia are also positively correlated [34]. Numerous investigations on the effects of Hg on hepatic function have shown that exposure to Hg results in a remarkable increase in liver enzymes [35].

Lead is a dangerous HM that tends to build up in different body tissues., such as bones, the bloodstream, and the majority of organs [36]. Numerous neurological conditions, including Parkinson's disease, amyotrophic lateral sclerosis, Alzheimer's disease, and attention deficit hyperactivity disorder, are connected to Pb exposure [37]. Owing to the established connection between CVD and diabetes, Pd is considered a danger factor for vascular problems in patients with diabetics [38]. The effects of Pb exposure on kidney and liver functions; WBC count; and aspartate transaminase, serum urea, creatinine, hemoglobin, hematocrit, and ALT concentrations have been reported to be more noticeable when blood Pb levels are high than when Pb is present at low concentrations [39]. Many investigations have closely assessed the effects of Pb on children. The results of these investigations revealed that Pb exposure has a detrimental effect on the physical development of children, especially that of boys [40]. Exposure to Pb might alter sex hormone levels, which could affect reproductive system functionality [41].

Human health might be affected by Cr accumulation in the organs of the body [42]. Cr has a substantial effect on bronchial epithelium, possibly via the abnormal modification of cytoskeletal proteins,

apoptosis, and energy-consuming proteins [43]. The effects of Cr on the development of fetuses throughout pregnancy have been studied [44]. Cr may negatively affect fetal growth. Cr, a carcinogen, is related to lung cancer development [45]. Skin hyperpigmentation may occur due to exposure to elevated Cr concentrations [46].

Cu is an important micronutrient for humans. However, elevated Cu levels could have harmful and toxic effects [47]. Cu accumulation results in the clumping and mutation of mitochondrial proteins, decreasing primary antioxidant enzyme activity and increasing toxic ROS production [42][48]. An association exists between an increase in Cu and fibrosis in renal tissues [49]. Cu has a negative effect on male fertility, decreasing the number and motility of sperm [50]. Exposure to Cu has been linked to obesity [45, 51]. Cu disrupts the equilibrium of key elements, such as Fe, Ca, and Mn, thereby promoting oxidative stress, which can ultimately lead to neurodegenerative disorders [52].

Ni is widely dispersed across air, water, and soil, among other environmental compartments [53]. The harmful effects of Ni on humans, especially in relation to pregnancy, have been studied. Preterm birth is positively correlated with Ni exposure in pregnant women [54]. Ni concentrations in urine are higher in people with diabetes than in those without [55]. Maternal exposure to Ni is linked to congenital cardiac abnormalities in offspring [56]. Ni is associated with immunological diseases, type I hypersensitivity, and type IV immune reactivity in those who experience Ni-related chronic systemic symptoms [57].

The effects of ^{235}U and ^{238}U have been studied. A recent ecological study examined the possible link between prolonged exposure to U in drinking water and increased risk of colorectal, kidney, and lung cancers in both sexes [58]. U absorption results in alterations in gene expression, DNA strand breakage, and an increase in ROS, all of which have negative clinical effects [59]. Hexavalent UO_2^{2+} accumulates in bone and kidney tissues. This accumulation was observed to cause chronic and acute kidney injury and increase the risk of ontogenesis and osteosarcoma [60]. Unintentional exposure to U through contaminated water or food could lead to bone marrow disease or a decline in

hematological function, which might subsequently have several systemic effects [61].

Cd is a dangerous HM that is harmful to human health [48]. Numerous inflammatory markers are produced as a result of the release of antithrombotic chemicals triggered by the effects of Cd on the vascular endothelium [62]. Vijayakumar *et al.* [63] investigated the biological effect of Cd on prostate cancer, specifically examining the development and metastatic behavior of this malignancy, and its influence on basal breast tumors. The antioxidative defenses of breast tumor cells could be compromised by Cd exposure, potentially resulting in the initiation of ROS generation [58, 64]. Additionally, nephron degradation and Cd accumulation occur in the proximal tubule [65].

Fe is highly important for several biological processes, such as DNA replication, mitochondrial respiration, and oxygen transport, which are all essential for the survival of nearly all living organisms. ROS, which can harm proteins, DNA, and cellular membranes, are produced when Fe, a redox-active metal, is present [66]. Fe represents a vital element in human physiology and share in many cellular metabolic functions, such as O_2 transport [67]. Iron deficiency anemia represents the most common type of anemia worldwide [68]. Iron deficiency may have a detrimental effect on immune system development and function [69]. Pregnancy-related deficiencies might endanger the fetus and mother [70]. Conversely, excessive Fe is related to an increased risk of oxidative stress and cellular damage and elevated risks of gestational diabetes, cardiovascular disease, and neonate issues [71].

V is present in water, soil, and air, among other environmental compartments. Numerous organs and tissues, including the lung, kidney, lymphoid organs, central nervous system (CNS), and immune system, experience physiological and histological alterations due to this HM [72]. Exposure to V is associated with a number of detrimental health effects, including immunotoxicity, mutagenicity, kidney toxicity, hematologic and biochemical changes, developmental and reproductive toxicity, immunotoxicity, and neurotoxicity [73]. V affects the cardiovascular, digestive, and respiratory systems [74]. The intranasal

pathway absorbs small amounts of V, which can lead to olfactory impairment. This condition results in decreased dopaminergic neurotransmission to the olfactory bulb and decreased olfactory bulb volume [75].

More than a hundred chemical and inorganic compounds contain the naturally occurring mineral Co [76]. Exposure to Co has been linked to lower respiratory tract infections and upper respiratory tract inflammation, such as bronchitis and rhinitis. Exposure to specific compounds simultaneously can cause fibrotic changes in pulmonary tissue, which can then trigger asthma [77]. Numerous negative outcomes, such as pulmonary fibrosis, hepatotoxicity, and carcinogenesis, may arise from Co exposure [78]. Different problems of the brain system, including bilateral nerve deafness, optic atrophy, neuropathies, and memory loss, can be caused by exposure to Co [79]. Co may have an adverse effect on the heart, leading to solitary cardiomyopathy, hypertension, and reversible ECG changes [80].

The toxicity of Tl is greater than those of Cd, Pb, or Hg [81]. Anorexia and headaches are two signs of chronic TI poisoning, which can arise from long-term exposure to low levels of TI [82]. In severe cases, respiratory muscle paralysis might result in a coma [83]. The development of hair loss with follicular contraction is a hallmark of TI poisoning. Other symptoms include problems with digestion, pain, mental health, and the cardiovascular system [84]. Tl poisoning throughout pregnancy is related to an increased risk of low birth weight, fetal fatality, and premature birth [85].

Human intoxication pathways after exposure to HMs

The acidic environment of the stomach causes HMs to become acidified when consumed through drinking or eating. Under acidic conditions, As^{3+} , Zn^{2+} , As^{2+} , Cd^{2+} , and Pb^{2+} all oxidize and attain their corresponding oxidative states. These states have the capacity to establish robust, enduring bonds with biological molecules, including enzymes and proteins [86]. Concentration-dependent As-induced protein aggregation raises the possibility that HMs are sources of protein aggregation. Furthermore, various proteins with considerable functional enrichment associated with stability, protein synthesis, protein folding, and metabolic processes have been seen in

aggregates [87]. The capacity of such drugs to stimulate protein accumulation in vivo is potentially influenced by their unique biological pathways and how well cells absorb and export them. Figure 5 shows the different mechanisms that lead to HM intoxication. After human exposure to Pb^{32} , the intracellular second messenger system is altered, hindering the functions of the CNS. Figure 6 illustrates the process through which high blood lead levels cause various disorders in humans.

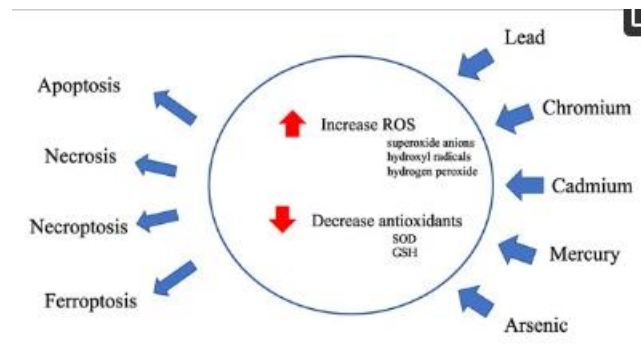


Figure 5. Human intoxication pathways after exposure to HMs [88].

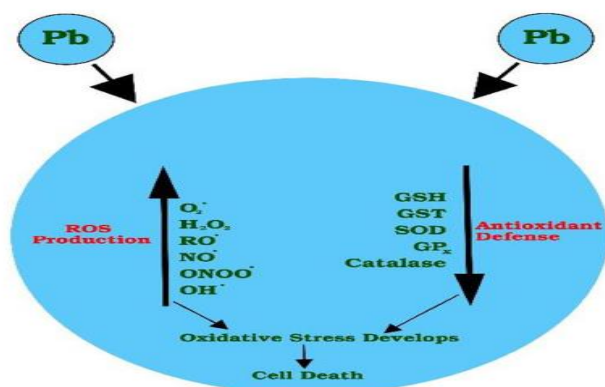


Figure 6. Processes that result in high blood Pb concentrations in humans can cause various disorders [89].

Methods for the remediation of HMs

Numerous physical techniques for removing HMs, including methods based on adsorption, electrokinetics, membrane filtration, photocatalysis, granular activated carbon, and soil washing [90], have been reported. These techniques involve treating contaminated systems on the basis of the physicochemical properties of metals. Chemical precipitation, flotation, coagulation, ion exchange, and flocculation are all components of the chemical process. Although these methods are effective

at removing HMs, the overuse of chemicals complicates sludge disposal and increases the risk of secondary pollution [91]. The integrated chemical–biological treatment method is a cost-effective and environmentally friendly way to treat wastewater that contains HMs. Many researchers worldwide have reported that using this integrated method instead of chemical or biological treatment is beneficial and has shown notable outcomes in HM elimination [92].

This type of integrated system, as a polishing step, frequently consists of biological treatment followed by chemical treatment and vice versa. The ultimate goal of bioremediation, which utilizes living organisms to convert harmful contaminants into nontoxic contaminants, is to restore contaminated areas to their natural form without posing additional threats to the ecosystem. The ability of numerous living organisms, such as bacteria, fungi, actinomycetes, and plants, to purify soil contaminated with HMs and pesticides represents a potential breakthrough in environmental science [93, 94].

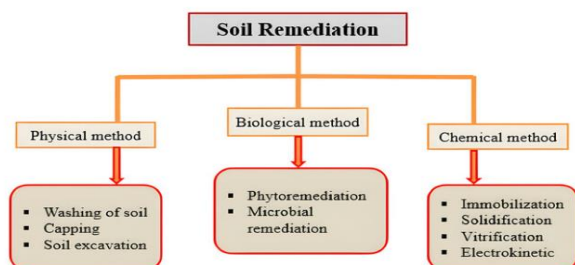


Figure 7. Summary of the benefits and drawbacks of remediation technologies [90].

Conclusions

HMs have negative effects on food security and agricultural production, and HM toxicity has become a major environmental concern. The accumulation of HMs in the environment has negative effects on plant development, People health, and marine environments because HMs are toxic. HMs might enter the human body through several ways, including through food or drink consumption, air inhalation, or skin contact. HMs are kept and accumulate in the human body after absorption. Numerous harmful effects on different human tissues and organs are caused by the accumulation of toxic metals in biological systems.

Various physical and chemical methods have been proposed as possible solutions to address the pollution generated by HMs. Therefore, combined remediation technologies for large-scale applications should be developed. Within the framework of real-world implementation, one can learn from local and foreign experiences and improve the prudent use of advanced technology. Scientific and community-based remediation strategies must be employed to mitigate the negative effects of HMs. Additionally, evaluating novel seeks as preventative measures against organ toxicity caused by HMs will benefit future research.

Conflict of interest

The authors declare that they have no competing interests.

References

- [1] Fergusson, J. E. (1990). *The heavy elements: Chemistry, environmental impact, and health effects*. <https://doi.org/10.2134/jeq1991.00472425002000040028x>
- [2] Tchounwou, P. B., Yedjou, C. G., Patlolla, A. K., and Sutton, D. J. (2012). Heavy metal toxicity and the environment. In *Molecular, Clinical and Environmental Toxicology: Volume 3, Environmental Toxicology* (pp. 133–164). https://doi.org/10.1007/978-3-7643-8340-4_6
- [3] Duffus, J. H. (2002). “Heavy metals” a meaningless term? (IUPAC Technical Report). *Pure and Applied Chemistry*, 74(5), 793–807. <https://doi.org/10.1351/pac200274050793>
- [4] Jacob, J. M., Karthik, C., Saratale, R. G., Kumar, S. S., Prabakar, D., Kadirvelu, K., and Pugazhendhi, A. (2018). Biological approaches to tackle heavy metal pollution: A survey of literature. *Journal of Environmental Management*, 217, 56–70. <https://doi.org/10.1016/j.jenvman.2018.03.077>
- [5] Sarker, A., Al Masud, M. A., Deepo, D. M., Das, K., Nandi, R., Ansary, M. W. R., ... and Islam, T. (2023). Biological and green remediation of heavy metal contaminated water and soils: A state-of-the-art

- review. *Chemosphere*, 332, 138861.
<https://doi.org/10.1016/j.chemosphere.2023.138861>
- [6] Anyanwu, B. O., Ezejiofor, A. N., Igweze, Z. N., and Orisakwe, O. E. (2018). Heavy metal mixture exposure and effects in developing nations: An update. *Toxics*, 6(4), 65.
<https://doi.org/10.3390/toxics6040065>
- [7] Farcasanu, I. C., Popa, C. V., and Ruta, L. L. (2018). Calcium and cell response to heavy metals: Can yeast provide an answer? In *Calcium and Signal Transduction* (pp. 23–41).
<https://doi.org/10.5772/intechopen.78941>
- [8] Das, S., Sultana, K. W., Ndhlala, A. R., Mondal, M., and Chandra, I. (2023). Heavy metal pollution in the environment and its impact on health: Exploring green technology for remediation. *Environmental Health Insights*, 17, 11786302231201259.
<https://doi.org/10.1177/11786302231201259>
- [9] Baritz, R., Amelung, W., Antoni, V., Boardman, J., Hijbeek, R., Horn, R., ... and Steinhoff-Knopp, B. (2023). Soil monitoring in Europe—Indicators and thresholds for soil health assessments (EEA Reports No. 8). Publications Office of the European Union.
<https://doi.org/10.1097/MD.00000000000014629>
- [10] Union, E. (2002). *Heavy metals in wastes*. European Commission on Environment.
<https://doi.org/10.4236/me.2012.36095>
- [11] World Health Organization. (2002). *Guidelines for drinking-water quality*. World Health Organization.
- [12] Åkesson, M. T., Point, C. C., and di Caracalla, V. D. T. (2015). Joint FAO/WHO Food Standards Programme Codex Committee on Contaminants in Foods. World Health Organization.
- [13] Sharma, A., Katnoria, J. K., and Nagpal, A. K. (2016). Heavy metals in vegetables: Screening health risks involved in cultivation along wastewater drain and irrigating with wastewater. *SpringerPlus*, 5, 1–16.
<https://doi.org/10.1186/s40064-016-2129-1>
- [14] Al-Tohamy, R., Ali, S. S., Li, F., Okasha, K. M., Mahmoud, Y. A. G., Elsamahy, T., ... and Sun, J. (2022). A critical review on the treatment of dye-containing wastewater: Ecotoxicological and health concerns of textile dyes and possible remediation approaches for environmental safety. *Ecotoxicology and Environmental Safety*, 231, 113160.
<https://doi.org/10.1016/j.ecoenv.2021.113160>
- [15] Khelifi, R., and Hamza-Chaffai, A. (2010). Head and neck cancer due to heavy metal exposure via tobacco smoking and professional exposure: A review. *Toxicology and Applied Pharmacology*, 248(2), 71–88.
<https://doi.org/10.1016/j.taap.2010.08.003>
- [16] Sankhla, M. S., and Kumar, R. (2019). Contaminant of heavy metals in groundwater and its toxic effects on human health and environment (SSRN No. 3490718).
<https://doi.org/10.19080/IJESNR.2019.18.555996>
- [17] Jiang, X., Zou, B., Feng, H., Tang, J., Tu, Y., and Zhao, X. (2019). Spatial distribution mapping of Hg contamination in subclass agricultural soils using GIS enhanced multiple linear regression. *Journal of Geochemical Exploration*, 196, 1–7.
<https://doi.org/10.1016/j.gexplo.2018.10.002>
- [18] Xiao, R., Guo, D., Ali, A., Mi, S., Liu, T., Ren, C., ... and Zhang, Z. (2019). Accumulation, ecological-health risk assessment, and source apportionment of heavy metals in paddy soils: A case study in Hanzhong, Shaanxi, China. *Environmental Pollution*, 248, 349–357.
<https://doi.org/10.1016/j.envpol.2019.02.045>
- [19] Lamas, G. A., Navas-Acien, A., Mark, D. B., and Lee, K. L. (2016). Heavy metals, cardiovascular disease, and the unexpected benefits of chelation therapy. *Journal of the American College of Cardiology*, 67(20), 2411–2418.
<https://doi.org/10.1016/j.jacc.2016.02.066>
- [20] Ma, Y., Egodawatta, P., McGree, J., Liu, A., and Goonetilleke, A. (2016). Human health risk assessment of heavy metals in urban stormwater. *Science of the Total Environment*, 557, 764–772.
<https://doi.org/10.1016/j.scitotenv.2016.03.067>
- [21] Alengebawy, A., Abdelkhalek, S. T., Qureshi, S. R., and Wang, M. Q. (2021). Heavy metals and pesticides toxicity in agricultural soil and plants: Ecological risks and human health implications. *Toxics*, 9(3), 42.
<https://doi.org/10.3390/toxics9030042>
- [22] Wang, F., Guan, Q., Tian, J., Lin, J., Yang, Y., Yang, L., and Pan, N. (2020). Contamination

- characteristics, source apportionment, and health risk assessment of heavy metals in agricultural soil in the Hexi Corridor. *Catena*, 191, 104573. <https://doi.org/10.1016/j.catena.2020.104573>
- [23] Rehman, A. U., Nazir, S., Irshad, R., Tahir, K., ur Rehman, K., Islam, R. U., and Wahab, Z. (2021). Toxicity of heavy metals in plants and animals and their uptake by magnetic iron oxide nanoparticles. *Journal of Molecular Liquids*, 321, 114455. <https://doi.org/10.1016/j.molliq.2020.114455>
- [24] Li, R., Wu, H., Ding, J., Fu, W., Gan, L., and Li, Y. (2017). Mercury pollution in vegetables, grains and soils from areas surrounding coal-fired power plants. *Scientific Reports*, 7(1), 1–9. <https://doi.org/10.1038/srep46545>
- [25] Deng, Y., Wang, M., Tian, T., Lin, S., Xu, P., Zhou, L., ... and Dai, Z. (2019). The effect of hexavalent chromium on the incidence and mortality of human cancers: A meta-analysis based on published epidemiological cohort studies. *Frontiers in Oncology*, 9, 24. <https://doi.org/10.3389/fonc.2019.00024>
- [26] Abd Elnabi, M. K., Elkaliny, N. E., Elyazied, M. M., Azab, S. H., Elkhailifa, S. A., Elmasry, S., ... and Mahmoud, Y. A. G. (2023). Toxicity of heavy metals and recent advances in their removal: A review. *Toxics*, 11(7), 580. <https://doi.org/10.3390/toxics11070580>
- [27] Negahdari, S., Sabaghan, M., Pirhadi, M., Alikord, M., Sadighara, P., Darvishi, M., and Nazer, M. (2021). Potential harmful effects of heavy metals as a toxic and carcinogenic agent in marine food—An overview. *Egyptian Journal of Veterinary Sciences*, 52(3), 379–385. <https://doi.org/10.1016/j.marpolbul.2024.116139>
- [28] Wang, X., Wu, Y., Sun, X., Guo, Q., Xia, W., Wu, Y., ... and Li, Y. (2021). Arsenic exposure and metabolism in relation to blood pressure changes in pregnant women. *Ecotoxicology and Environmental Safety*, 222, 112527. <https://doi.org/10.1016/j.ecoenv.2021.112527>
- [29] Sundseth, K., Pacyna, J. M., Pacyna, E. G., Pirrone, N., and Thorne, R. J. (2017). Global sources and pathways of mercury in the context of human health. *International Journal of Environmental Research and Public Health*, 14(1), 105. <https://doi.org/10.3390/ijerph14010105>
- [30] Teixeira, F. B., De Oliveira, A. C., Leão, L. K., Fagundes, N. C., Fernandes, R. M., Fernandes, L. M., ... and Lima, R. R. (2018). Exposure to inorganic mercury causes oxidative stress, cell death, and functional deficits in the motor cortex. *Frontiers in Molecular Neuroscience*, 11, 125. <https://doi.org/10.3389/fnmol.2018.00125>
- [31] Papadopoulou, E., Botton, J., Caspersen, I. H., Alexander, J., Eggesbø, M., Haugen, M., ... and Brantsæter, A. L. (2021). Maternal seafood intake during pregnancy, prenatal mercury exposure and child body mass index trajectories up to 8 years. *International Journal of Epidemiology*, 50(4), 1134–1146. <https://doi.org/10.1093/ije/dyab035>
- [32] Farzan, S. F., Howe, C. G., Chen, Y., Gilbert-Diamond, D., Korrick, S., Jackson, B. P., ... and Karagas, M. R. (2021). Prenatal and postnatal mercury exposure and blood pressure in childhood. *Environment International*, 146, 106201. <https://doi.org/10.1016/j.envint.2020.106201>
- [33] Chen, S. Y., Wu, J. Q., and Sung, S. (2022). Effects of sulfur dosage on continuous bioleaching of heavy metals from contaminated sediment. *Journal of Hazardous Materials*, 424, 127257. <https://doi.org/10.1016/j.jhazmat.2021.127257>
- [34] Kang, P., Shin, H. Y., and Kim, K. Y. (2021). Association between dyslipidemia and mercury exposure in adults. *International Journal of Environmental Research and Public Health*, 18(2), 775. <https://doi.org/10.3390/ijerph18020775>
- [35] Lee, S., Cho, S. R., Jeong, I., Park, J. B., Shin, M. Y., Kim, S., and Kim, J. H. (2020). Mercury exposure and associations with hyperlipidemia and elevated liver enzymes: A nationwide cross-sectional survey. *Toxics*, 8(3), 47. <https://doi.org/10.3390/toxics8030047>
- [36] Charkiewicz, A. E., and Backstrand, J. R. (2020). Lead toxicity and pollution in Poland. *International Journal of Environmental Research and Public Health*, 17(12), 4385. <https://doi.org/10.1016/j.enceco.2023.02.001>
- [37] Wang, T., Zhang, J., and Xu, Y. (2020). Epigenetic basis of lead-induced neurological

- disorders. *International Journal of Environmental Research and Public Health*, 17(13), 4878. <https://doi.org/10.3390/ijerph17134878>
- [38] Obeng-Gyasi, E., Ferguson, A. C., Stamatakis, K. A., and Province, M. A. (2021). Combined effect of lead exposure and allostatic load on cardiovascular disease mortality—a preliminary study. *International Journal of Environmental Research and Public Health*, 18(13), 6879. <https://doi.org/10.3390/ijerph18136879>
- [39] Nakhaee, S., Amirabadizadeh, A., Brent, J., and Mehrpour, O. (2019). Impact of chronic lead exposure on liver and kidney function and hematologic parameters. *Basic and Clinical Pharmacology and Toxicology*, 124(5), 621–628. <https://doi.org/10.1111/bcpt.13179>
- [40] Zhou, C.-C., He, Y.-Q., Gao, Z.-Y., Wu, M.-Q., and Yan, C.-H. (2020). Sex differences in the effects of lead exposure on growth and development in young children. *Chemosphere*, 250, 126294. <https://doi.org/10.1016/j.chemosphere.2020.126294>
- [41] Dehghan, S. F., Mehrifar, Y., and Ardalan, A. (2019). The relationship between exposure to lead-containing welding fumes and the levels of reproductive hormones. *Annals of Global Health*, 85(1). <https://doi.org/10.5334/aogh.2617>
- [42] Chakraborty, R., Renu, K., Eladl, M. A., El-Sherbiny, M., Elsherbini, D. M. A., Mirza, A. K., ... and Gopalakrishnan, A. V. (2022). Mechanism of chromium-induced toxicity in lungs, liver, and kidney and their ameliorative agents. *Biomedicine and Pharmacotherapy*, 151, 113119. <https://doi.org/10.1016/j.biopha.2022.113119>
- [43] Xia, B., Yuan, J., Pang, L., and He, K. (2022). Chromium [Cr(VI)] exposure causes cytotoxicity of human bronchial epithelial cells (16-HBE) and proteomic alterations. *International Journal of Toxicology*, 41(3), 225–233. <https://doi.org/10.1177/10915818221078277>
- [44] Peng, Y., Hu, J., Li, Y., Zhang, B., Liu, W., Li, H., ... and Xu, S. (2018). Exposure to chromium during pregnancy and longitudinally assessed fetal growth: Findings from a prospective cohort. *Environment International*, 121, 375–382. <https://doi.org/10.1016/j.envint.2018.09.003>
- [45] Baszuk, P., Janasik, B., Pietrzak, S., Marciniak, W., Reszka, E., Białkowska, K., ... and Lener, M. R. (2021). Lung cancer occurrence—Correlation with serum chromium levels and genotypes. *Biological Trace Element Research*, 199, 1228–1236. <https://doi.org/10.1007/s12011-020-02240-6>
- [46] Al Hossain, M. A., Yajima, I., Tazaki, A., Xu, H., Saheduzzaman, M., Ohgami, N., ... and Kato, M. (2019). Chromium-mediated hyperpigmentation of skin in male tannery workers in Bangladesh. *Chemosphere*, 229, 611–617. <https://doi.org/10.1016/j.chemosphere.2019.04.112>
- [47] Kumar, V., and Dwivedi, S. K. (2021). Bioremediation mechanism and potential of copper by actively growing fungus *Trichoderma lixii* CR700 isolated from electroplating wastewater. *Journal of Environmental Management*, 277, 111370. <https://doi.org/10.1016/j.jenvman.2020.111370>
- [48] Kahlson, M. A., and Dixon, S. J. (2022). Copper-induced cell death. *Science*, 375(6586), 1231–1232. <https://doi.org/10.1126/science.abo3959>
- [49] Niu, Y. Y., Zhang, Y. Y., Zhu, Z., Zhang, X. Q., Liu, X., Zhu, S. Y., ... and Yu, C. (2020). Elevated intracellular copper contributes a unique role to kidney fibrosis by lysyl oxidase mediated matrix crosslinking. *Cell Death and Disease*, 11(3), 211. <https://doi.org/10.1038/s41419-020-2404-5>
- [50] Tvrdá, E., Peer, R., Sikka, S. C., and Agarwal, A. (2015). Iron and copper in male reproduction: A double-edged sword. *Journal of Assisted Reproduction and Genetics*, 32, 3–16. <https://doi.org/10.1007/s10815-014-0344-7>
- [51] Yang, H., Liu, C. N., Wolf, R. M., Ralle, M., Dev, S., Pierson, H., ... and Lutsenko, S. (2019). Obesity is associated with copper elevation in serum and tissues. *Metallomics*, 11(8), 1363–1371. <https://doi.org/10.1039/c9mt00148d>
- [52] Witt, B., Stiboller, M., Raschke, S., Friese, S., Ebert, F., and Schwerdtle, T. (2021). Characterizing effects of excess copper levels in a human astrocytic cell line with focus on oxidative stress markers. *Journal of Trace Elements in Medicine and Biology*, 65, 126711. <https://doi.org/10.1016/j.jtemb.2021.126711>

- [53] Genchi, G., Carocci, A., Lauria, G., Sinicropi, M. S., and Catalano, A. (2020). Nickel: Human health and environmental toxicology. *International Journal of Environmental Research and Public Health*, 17(3), 679. <https://doi.org/10.3390/ijerph17030679>
- [54] Chen, X., Li, Y., Zhang, B., Zhou, A., Zheng, T., Huang, Z., ... and Xu, S. (2018). Maternal exposure to nickel in relation to preterm delivery. *Chemosphere*, 193, 1157–1163. <https://doi.org/10.1016/j.chemosphere.2017.11.121>
- [55] Titcomb, T. J., Liu, B., Lehmler, H. J., Snetselaar, L. G., and Bao, W. (2021). Environmental nickel exposure and diabetes in a nationally representative sample of US adults. *Exposure and Health*, 13, 697–704. <https://doi.org/10.1007/s12403-021-00413-9>
- [56] Yu, M., and Zhang, J. (2017). Serum and hair nickel levels and breast cancer: Systematic review and meta-analysis. *Biological Trace Element Research*, 179, 32–37. <https://doi.org/10.1007/s12011-017-0949-7>
- [57] Büyükoztürk, S., Gelincik, A., Ünal, D., Demirtürk, M., Çelik, D. D., Erden, S., ... and Kuruca, S. E. (2015). Oral nickel exposure may induce Type I hypersensitivity reaction in nickel-sensitized subjects. *International Immunopharmacology*, 26(1), 92–96. <https://doi.org/10.1016/j.intimp.2015.03.012>
- [58] Redvers, N., Chischilly, A. M., Warne, D., Pino, M., and Lyon-Colbert, A. (2021). Uranium exposure in American Indian communities: Health, policy, and the way forward. *Environmental Health Perspectives*, 129(3), 035002. <https://doi.org/10.1289/EHP7537>
- [59] Surdyk, S., Itani, M., Al-Lobaidy, M., Kahale, L. A., Farha, A., Dewachi, O., ... and Habib, R. R. (2021). Weaponised uranium and adverse health outcomes in Iraq: A systematic review. *BMJ Global Health*, 6(2), e004166. <https://doi.org/10.1136/bmjgh-2020-004166>
- [60] Wang, X., Dai, X., Shi, C., Wan, J., Silver, M. A., Zhang, L., ... and Wang, S. (2019). A 3,2-hydroxypyridinone-based decorporation agent that removes uranium from bones in vivo. *Nature Communications*, 10(1), 2570. <https://doi.org/10.1038/s41467-019-10276-z>
- [61] Joseph, S. J., Arunachalam, K. D., Murthy, P. B., Ramalingam, R., and Musthafa, M. S. (2021). Uranium induces genomic instability and slows cell cycle progression in human lymphocytes in an acute toxicity study. *Toxicology in Vitro*, 73, 105149. <https://doi.org/10.1016/j.tiv.2021.105149>
- [62] Sears, C. G., Poulsen, A. H., Eliot, M., Howe, C. J., James, K. A., Harrington, J. M., ... and Meliker, J. (2021). Urine cadmium and acute myocardial infarction among never smokers in the Danish Diet, Cancer and Health cohort. *Environment International*, 150, 106428. <https://doi.org/10.1016/j.envint.2021.106428>
- [63] Vijayakumar, V., Abern, M. R., Jagai, J. S., and Kajdacsy-Balla, A. (2021). Observational study of the association between air cadmium exposure and prostate cancer aggressiveness at diagnosis among a nationwide retrospective cohort of 230,540 patients in the United States. *International Journal of Environmental Research and Public Health*, 18(16), 8333. <https://doi.org/10.3390/ijerph18168333>
- [64] Amadou, A., Praud, D., Coudon, T., Danjou, A. M., Faure, E., Deygas, F., ... and Fervers, B. (2021). Exposure to airborne cadmium and breast cancer stage, grade and histology at diagnosis: Findings from the E3N cohort study. *Scientific Reports*, 11(1), 23088. <https://doi.org/10.1038/s41598-021-01243-0>
- [65] Yan, L. J., and Allen, D. C. (2021). Cadmium-induced kidney injury: Oxidative damage as a unifying mechanism. *Biomolecules*, 11(11), 1575. <https://doi.org/10.3390/biom11111575>
- [66] Rajan, M., Anderson, C. P., Rindler, P. M., Romney, S. J., Ferreira dos Santos, M. C., Gertz, J., and Leibold, E. A. (2019). NHR-14 loss of function couples intestinal iron uptake with innate immunity in *C. elegans* through PQM-1 signaling. *Elife*, 8, e44674. <https://doi.org/10.7554/eLife.44674>
- [67] Verna, G., Sila, A., Liso, M., Mastronardi, M., Chieppa, M., Cena, H., and Campiglia, P. (2021). Iron-enriched nutritional supplements for the 2030 pharmacy shelves. *Nutrients*, 13(2), 378. <https://doi.org/10.3390/nu13020378>

- [68] Killip, S., Bennett, J. M., and Chambers, M. D. (2007). Iron deficiency anemia. *American Family Physician*, 75(5), 671–678.
- [69] Means, R. T. (2020). Iron deficiency and iron deficiency anemia: Implications and impact in pregnancy, fetal development, and early childhood parameters. *Nutrients*, 12(2), 447. <https://doi.org/10.3390/nu12020447>
- [70] Quezada-Pinedo, H. G., Cassel, F., Duijts, L., Muckenthaler, M. U., Gassmann, M., Jaddoe, V. W., ... and Vermeulen, M. J. (2021). Maternal iron status in pregnancy and child health outcomes after birth: A systematic review and meta-analysis. *Nutrients*, 13(7), 2221. <https://doi.org/10.1016/j.tjnnt.2023.06.042>
- [71] Rojas-Lemus, M., López-Valdez, N., Bizarro-Nevares, P., González-Villalva, A., Ustarroz-Cano, M., Zepeda-Rodríguez, A., ... and Fortoul, T. I. (2021). Toxic effects of inhaled vanadium attached to particulate matter: A literature review. *International Journal of Environmental Research and Public Health*, 18(16), 8457. <https://doi.org/10.3390/ijerph18168457>
- [72] Imtiaz, M., Rizwan, M. S., Xiong, S., Li, H., Ashraf, M., Shahzad, S. M., ... and Tu, S. (2015). Vanadium, recent advancements and research prospects: A review. *Environment International*, 80, 79–88. <https://doi.org/10.1016/j.envint.2015.03.018>
- [73] Filler, G., Kobrzynski, M., Sidhu, H. K., Belostotsky, V., Huang, S. H. S., McIntyre, C., and Yang, L. (2017). A cross-sectional study measuring vanadium and chromium levels in pediatric patients with CKD. *BMJ Open*, 7(5), e014821. <https://doi.org/10.1136/bmjopen-2016-014821>
- [74] Ngwa, H. A., Kanthasamy, A., Jin, H., Anantharam, V., and Kanthasamy, A. G. (2014). Vanadium exposure induces olfactory dysfunction in an animal model of metal neurotoxicity. *Neurotoxicology*, 43, 73–81. <https://doi.org/10.1016/j.neuro.2013.12.004>
- [75] Mahey, S., Kumar, R., Sharma, M., Kumar, V., and Bhardwaj, R. (2020). A critical review on toxicity of cobalt and its bioremediation strategies. *SN Applied Sciences*, 2(7), 1279. <https://doi.org/10.1007/s42452-020-3020-9>
- [76] Wahlqvist, F., Bryngelsson, I. L., Westberg, H., Vihlborg, P., and Andersson, L. (2020). Dermal and inhalable cobalt exposure—Uptake of cobalt for workers at Swedish hard metal plants. *PLoS One*, 15(8), e0237100. <https://doi.org/10.1371/journal.pone.0237100>
- [77] Zhang, N., Yang, S., Yang, J., Deng, Y., Li, S., Li, N., ... and Zhu, J. (2020). Association between metal cobalt exposure and the risk of congenital heart defect occurrence in offspring: A multihospital case–control study. *Environmental Health and Preventive Medicine*, 25, 1–12. <https://doi.org/10.1186/s12199-020-00877-2>
- [78] Linna, A., Uitti, J., Oksa, P., Toivio, P., Virtanen, V., Lindholm, H., ... and Sauni, R. (2020). Effects of occupational cobalt exposure on the heart in the production of cobalt and cobalt compounds: A 6-year follow-up. *International Archives of Occupational and Environmental Health*, 93, 365–374. <https://doi.org/10.1007/s00420-019-01488-3>
- [79] Karbowska, B. (2016). Presence of thallium in the environment: Sources of contaminations, distribution and monitoring methods. *Environmental Monitoring and Assessment*, 188, 1–19. <https://doi.org/10.1007/s10661-016-5647-y>
- [80] Kremer, D., Riemersma, N. L., Groothof, D., Sotomayor, C. G., Eisenga, M. F., Post, A., ... and Bakker, S. J. (2022). Plasma thallium concentration, kidney function, nephrotoxicity and graft failure in kidney transplant recipients. *Journal of Clinical Medicine*, 11(7). <https://doi.org/10.3390/jcm11071970>
- [81] Lin, G., Yuan, L., Bai, L., Liu, Y., Wang, Y., and Qiu, Z. (2019). Successful treatment of a patient with severe thallium poisoning in a coma using Prussian blue and plasma exchange: A case report. *Medicine*, 98(8), e14629. <https://doi.org/10.1097/md.00000000000014629>
- [82] Ahmed, M. J., and Mia, M. L. (2021). A new simple, highly sensitive and selective spectrofluorimetric method for the speciation of thallium at pico-trace levels in various complex matrices using N-(pyridin-2-yl)-quinoline-2-carbothioamide. *RSC Advances*, 11(51), 32312–32328. <https://doi.org/10.1039/D1RA05388D>

- [83] Xia, W., Du, X., Zheng, T., Zhang, B., Li, Y., Bassig, B. A., ... and Xu, S. (2016). A case-control study of prenatal thallium exposure and low birth weight in China. *Environmental Health Perspectives*, 124(1), 164–169. <https://doi.org/10.1289/ehp.1409202>
- [84] Zwolak, I. (2021). Epigallocatechin gallate for management of heavy metal-induced oxidative stress: Mechanisms of action, efficacy, and concerns. *International Journal of Molecular Sciences*, 22(8), 4027. <https://doi.org/10.3390/ijms22084027>
- [85] Tamás, M. J., Sharma, S. K., Ibstedt, S., Jacobson, T., and Christen, P. (2014). Heavy metals and metalloids as a cause for protein misfolding and aggregation. *Biomolecules*, 4(1), 252–267. <https://doi.org/10.3390/biom4010252>
- [86] Witkowska, D., Słowik, J., and Chilicka, K. (2021). Heavy metals and human health: Possible exposure pathways and the competition for protein binding sites. *Molecules*, 26(19), 6060. <https://doi.org/10.3390/molecules26196060>
- [87] Brochin, R., Leone, S., Phillips, D., Shepard, N., Zisa, D., and Angerio, A. (2008). The cellular effect of lead poisoning and its clinical picture. *GUJHS*, 5(2), 1–8.
- [88] Gong, Y., Zhao, D., and Wang, Q. (2018). An overview of field-scale studies on remediation of soil contaminated with heavy metals and metalloids: Technical progress over the last decade. *Water Research*, 147, 440–460. <https://doi.org/10.1016/j.watres.2018.10.024>
- [89] Wang, J., Yao, Z., Jiang, Y., Xi, B., Ni, S., and Zhang, L. (2021). Aminated electrospun nanofiber membrane as permeable reactive barrier material for effective in situ Cr(VI) contaminated soil remediation. *Chemical Engineering Journal*, 406, 126822. <https://doi.org/10.1016/j.cej.2020.126822>
- [90] Zhao, C., Dong, Y., Feng, Y., Li, Y., and Dong, Y. (2019). Thermal desorption for remediation of contaminated soil: A review. *Chemosphere*, 221, 841–855. <https://doi.org/10.1016/j.chemosphere.2019.01.079>
- [91] Liang, W., Wang, G., Peng, C., Tan, J., Wan, J., Sun, P., ... and Zhang, W. (2022). Recent advances of carbon-based nano zero valent iron for heavy metals remediation in soil and water: A critical review. *Journal of Hazardous Materials*, 426, 127993. <https://doi.org/10.1016/j.jhazmat.2021.127993>
- [92] Hu, W., Niu, Y., Zhu, H., Dong, K., Wang, D., and Liu, F. (2021). Remediation of zinc-contaminated soils by using the two-step washing with citric acid and water-soluble chitosan. *Chemosphere*, 282, 131092. <https://doi.org/10.1016/j.chemosphere.2021.131092>
- [93] Wang, D., Li, G., Qin, S., Tao, W., Gong, S., and Wang, J. (2021). Remediation of Cr(VI)-contaminated soil using combined chemical leaching and reduction techniques based on hexavalent chromium speciation. *Ecotoxicology and Environmental Safety*, 208, 111734. <https://doi.org/10.1016/j.ecoenv.2020.111734>

الآثار الصحية للمعادن الثقيلة وطرق إزالتها: مراجعة

فهام جاسم محمد، مريم ابراهيم سلمان، هاله مهدي حمد

قسم علوم الحياة، كلية العلوم، جامعة الأنبار، العراق

الخلاصة:

أصبح تراكم المعادن الثقيلة مشكلة بيئية خطيرة لأن النظام البيئي يتميز بتوسع المصادر الطبيعية والصناعية للمعادن. وقد زاد تعرض الإنسان للمعادن الثقيلة بشكل كبير نتيجة للنشاط الصناعي في القرن العشرين. ويعد الرصاص والكاديوم والزرنيخ والكروم والزنك من أكثر المعادن الثقيلة انتشاراً والتي تشكل خطراً على البشر. ويمكن أن يكون التسمم مزمناً أو حاداً بعد التعرض للغذاء أو الماء أو الهواء. وتتضرر العديد من الأعضاء والأنسجة بسبب هذه المعادن الثقيلة التي تتراكم بيولوجياً. وقد كشفت مقارنة آليات عمل هذه المعادن أنها تنتج السمية عبر مسارات مماثلة، بما في ذلك تعطيل الإنزيمات وإنتاج أنواع الأكسجين التفاعلية وتكوين الإجهاد التأكسدي. وتعتبر الطرق التقليدية لإزالة المعادن الثقيلة غير كافية عندما لا يزيد تركيز المعادن الثقيلة عن 100 ملغ/لتر. ومن بين عيوب هذه الطرق إنتاج الملوثات الثانوية وزيادة متطلبات الطاقة والمواد الكيميائية وانخفاض الفعالية من حيث التكلفة. من الممكن الآن إزالة سموم المعادن الثقيلة من خلال المعالجة الحيوية الميكروبية نظراً لأن البكتيريا والفطريات تتمتع بقدرات فائقة على التراكم الحيوي والامتصاص الحيوي مقارنة بالكائنات الحية الدقيقة الأخرى. لتحسين علاج التسمم المعدني وزيادة معرفتنا بالتأثيرات الضارة التي تخلفها المعادن الثقيلة على أعضاء الجسم، يناقش العمل الحالي عمليات السمية بالإضافة إلى امتصاص المعادن الثقيلة المرتبطة بها. يهدف هذا البحث إلى زيادة المعرفة وتقديم الموارد لاختيار تكنولوجيا المعالجة الميكروبية المدروسة لإزالة سموم المعادن الثقيلة. يمكن أن توفر المعالجات الميكروبية المستدامة نهجاً حاسماً وفعالاً من حيث التكلفة للحد من سمية المعادن الثقيلة.

الكلمات المفتاحية: التمدن الحيوي، الامتصاص الحيوي، المعالجة الحيوية، التحول الحيوي، سمية المعادن الثقيلة.