20.6 Electric Hazards and the Human Body

Learning Objectives

By the end of this section, you will be able to:

- Define thermal hazard, shock hazard, and short circuit.
- Explain what effects various levels of current have on the human body.

There are two known hazards of electricity—thermal and shock. A thermal hazard is one where excessive electric power causes undesired thermal effects, such as starting a fire in the wall of a house. A shock hazard occurs when electric current passes through a person. Shocks range in severity from painful, but otherwise harmless, to heart-stopping lethality. This section considers these hazards and the various factors affecting them in a quantitative manner. Electrical Safety: Systems and Devices will consider systems and devices for preventing electrical hazards.

Thermal Hazards

Electric power causes undesired heating effects whenever electric energy is converted to thermal energy at a rate faster than it can be safely dissipated. A classic example of this is the short circuit, a low-resistance path between terminals of a voltage source. An example of a short circuit is shown in Figure 20.18. Insulation on wires leading to an appliance has worn through, allowing the two wires to come into contact. Such an undesired contact with a high voltage is called a *short*. Since the resistance of the short, r, is very small, the power dissipated in the short, $P = V^2/r$, is very large. For example, if V is 120 V and r is 0.100 Ω, then the power is 144 kW, *much* greater than that used by a typical household appliance. Thermal energy delivered at this rate will very quickly raise the temperature of surrounding materials, melting or perhaps igniting them.
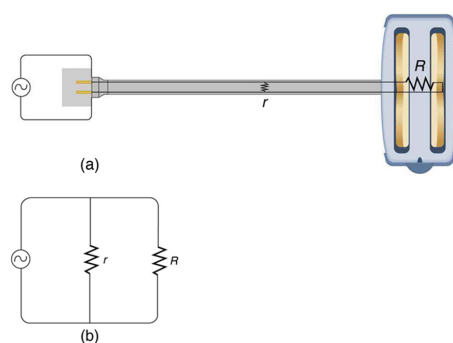

Figure 20.18 A short circuit is an undesired low-resistance path across a voltage source. (a) Worn insulation on the wires of a toaster allow them to come into contact with a low resistance r. Since $P = V^2/r$, thermal power is created so rapidly that the cord melts or burns. (b) A schematic of the short circuit.

One particularly insidious aspect of a short circuit is that its resistance may actually be decreased due to the increase in temperature. This can happen if the short creates ionization. These charged atoms and molecules are free to move and, thus, lower the resistance r. Since $P = V^2/r$, the power dissipated in the short rises, possibly causing more ionization, more power, and so on. High voltages, such as the 480-V AC used in some industrial applications, lend themselves to this hazard, because higher voltages create higher initial power production in a short.

Another serious, but less dramatic, thermal hazard occurs when wires supplying power to a user are overloaded with too great a current. As discussed in the previous section, the power dissipated in the supply wires is $P = I^2 R_{\mathrm{w}}$, where R_{w} is the resistance of the wires and I the current flowing through them. If either I or R_{w} is too large, the wires overheat. For example, a worn appliance cord (with some of its braided wires broken) may have $R_{\mathrm{w}} = 2.00$ Ω rather than the 0.100 Ω it should be. If 10.0 A of current passes through the cord, then $P = I^2 R_{\mathrm{w}} = 200$ W is dissipated in the cord—much more than is safe. Similarly, if a wire with a 0.100 - Ω resistance is meant to carry a few amps, but is instead carrying 100 A, it will severely overheat. The power dissipated in the wire will in that case be $P = 1000$ W. Fuses and circuit breakers are used to limit excessive currents. (See Figure 20.19 and Figure 20.20.) Each device opens the circuit automatically when a sustained current exceeds safe limits.

Viewing window

Metal having
low melting point

To voltage
source

To circuit

(a)

To circuit

Fixed contact point

Compressed spring

Switch lever

Movable metal strip

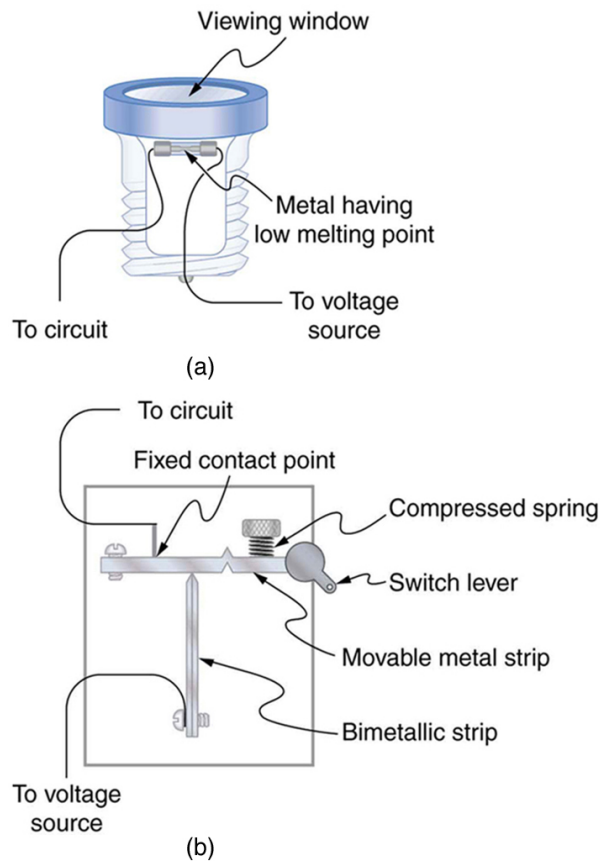Bimetallic strip

To voltage
source

(b)

Figure 20.19 (a) A fuse has a metal strip with a low melting point that, when overheated by an excessive current, permanently breaks the connection of a circuit to a voltage source. (b) A circuit breaker is an automatic but restorable electric switch. The one shown here has a bimetallic strip that bends to the right and into the notch if overheated. The spring then forces the metal strip downward, breaking the electrical connection at the points.
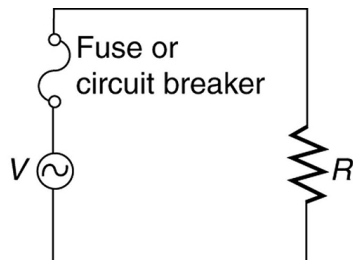

Fuse or
circuit breaker

V

R

Figure 20.20 Schematic of a circuit with a fuse or circuit breaker in it. Fuses and circuit breakers act like automatic switches that open when sustained current exceeds desired limits.

Fuses and circuit breakers for typical household voltages and currents are relatively simple to produce, but those for large voltages and currents experience special problems. For example, when a circuit breaker tries to interrupt the flow of high-voltage electricity, a spark can jump across its points that ionizes the air in the gap and allows the current to continue flowing. Large circuit breakers found in power-distribution systems employ insulating gas and even use jets of gas to blow out such sparks. Here AC is safer than DC, since AC current goes through zero 120 times per second, giving a quick opportunity to extinguish these arcs.

Shock Hazards

Electrical currents through people produce tremendously varied effects. An electrical current can be used to block back pain. The possibility of using electrical current to stimulate muscle action in paralyzed limbs, perhaps allowing paraplegics to walk, is under study. TV dramatizations in which electrical shocks are used to bring a heart attack victim out of ventricular fibrillation (a massively irregular, often fatal, beating of the heart) are more than common. Yet most electrical shock fatalities occur because a current put the heart into fibrillation. A pacemaker uses electrical shocks to stimulate the heart to beat properly. Some fatal shocks do not produce burns, but warts can be safely burned off with electric current (though freezing using liquid nitrogen is now more common). Of course, there are consistent explanations for these disparate effects. The major factors upon which the effects of electrical shock depend are

1. The amount of current I
2. The path taken by the current
3. The duration of the shock
4. The frequency f of the current ($f = 0$ for DC)

Table 20.3 gives the effects of electrical shocks as a function of current for a typical accidental shock. The effects are for a shock that passes through the trunk of the body, has a duration of 1 s, and is caused by 60-Hz power.
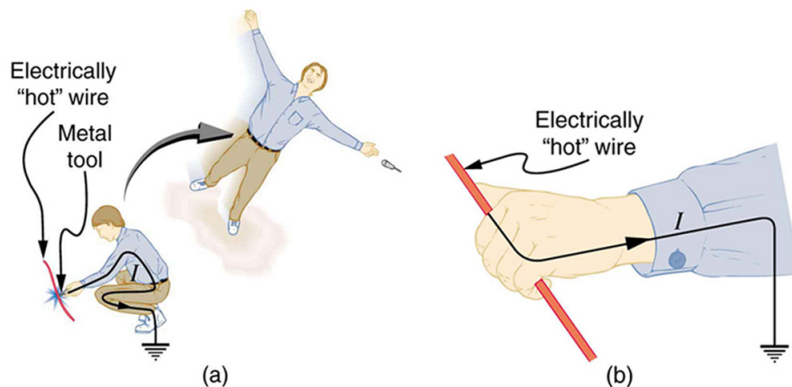

(a)   (b)

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Figure 20.21 An electric current can cause muscular contractions with varying effects. (a) The victim is "thrown" backward by involuntary muscle contractions that extend the legs and torso. (b) The victim can't let go of the wire that is stimulating all the muscles in the hand. Those that close the fingers are stronger than those that open them.

Table 20.3 Effects of Electrical Shock as a Function of Current3

3

For an average male shocked through trunk of body for 1 s by 60-Hz AC. Values for females are 60–80% of those listed.

Our bodies are relatively good conductors due to the water in our bodies. Given that larger currents will flow through sections with lower resistance (to be further discussed in the next chapter), electric currents preferentially flow through paths in the human body that have a minimum resistance in a direct path to earth. The earth is a natural electron sink. Wearing insulating shoes, a requirement in many professions, prohibits a pathway for electrons by providing a large resistance in that path. Whenever working with high-power tools (drills), or in risky situations, ensure that you do not provide a pathway for current flow (especially through the heart).

Very small currents pass harmlessly and unfelt through the body. This happens to you regularly without your knowledge. The threshold of sensation is only 1 mA and, although unpleasant, shocks are apparently harmless for currents less than 5 mA. A great number of safety rules take the 5-mA value for the maximum allowed shock. At 10 to 20 mA and above, the current can stimulate sustained muscular contractions much as regular nerve impulses do. People sometimes say they were knocked across the room by a shock, but what really happened was that certain muscles contracted, propelling them in a manner not of their own choosing. (See Figure 20.21(a).) More frightening, and potentially more dangerous, is the "can't let go" effect illustrated in Figure 20.21(b). The muscles that close the fingers are stronger than those that open them, so the hand closes involuntarily on the wire shocking it. This can prolong the shock indefinitely. It can also be a danger to a person trying to rescue the victim, because the rescuer's hand may close about the victim's wrist. Usually the best way to help the victim is to give the fist a hard knock/blow/jar with an insulator or to throw an insulator at the fist. Modern electric fences, used in animal enclosures, are

now pulsed on and off to allow people who touch them to get free, rendering them less lethal than in the past.

Greater currents may affect the heart. Its electrical patterns can be disrupted, so that it beats irregularly and ineffectively in a condition called "ventricular fibrillation." This condition often lingers after the shock and is fatal due to a lack of blood circulation. The threshold for ventricular fibrillation is between 100 and 300 mA. At about 300 mA and above, the shock can cause burns, depending on the concentration of current—the more concentrated, the greater the likelihood of burns.

Very large currents cause the heart and diaphragm to contract for the duration of the shock. Both the heart and breathing stop. Interestingly, both often return to normal following the shock. The electrical patterns on the heart are completely erased in a manner that the heart can start afresh with normal beating, as opposed to the permanent disruption caused by smaller currents that can put the heart into ventricular fibrillation. The latter is something like scribbling on a blackboard, whereas the former completely erases it. TV dramatizations of electric shock used to bring a heart attack victim out of ventricular fibrillation also show large paddles. These are used to spread out current passed through the victim to reduce the likelihood of burns.

Current is the major factor determining shock severity (given that other conditions such as path, duration, and frequency are fixed, such as in the table and preceding discussion). A larger voltage is more hazardous, but since $I = \text{V/R}$, the severity of the shock depends on the combination of voltage and resistance. For example, a person with dry skin has a resistance of about 200 kΩ. If he comes into contact with 120-V AC, a current $I = (120\text{ V})/(200\text{ k}\Omega) = 0.6$ mA passes harmlessly through him. The same person soaking wet may have a resistance of 10.0 kΩ and the same 120 V will produce a current of 12 mA—above the "can't let go" threshold and potentially dangerous.

Most of the body's resistance is in its dry skin. When wet, salts go into ion form, lowering the resistance significantly. The interior of the body has a much lower resistance than dry skin because of all the ionic solutions and fluids it contains. If skin resistance is bypassed, such as by an intravenous infusion, a catheter, or exposed pacemaker leads, a person is rendered microshock sensitive. In this condition, currents about 1/1000 those listed in Table 20.3 produce similar effects. During open-heart surgery, currents as small as 20 A can be used to still the heart. Stringent electrical safety requirements in hospitals, particularly in surgery and intensive care, are related to the doubly disadvantaged microshock-sensitive patient. The break in the skin has reduced his resistance, and so the same voltage causes a greater current, and a much smaller current has a greater effect.
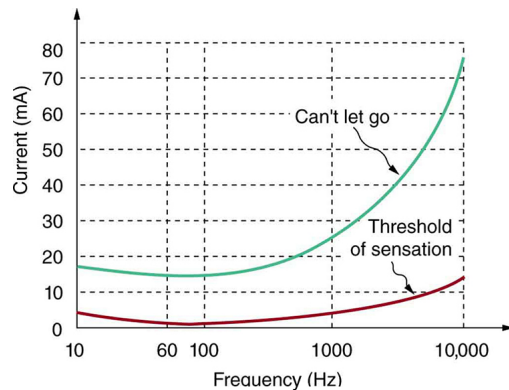
Figure 20.22 Graph of average values for the threshold of sensation and the "can't let go" current as a function of frequency. The lower the value, the more sensitive the body is at that frequency.

Factors other than current that affect the severity of a shock are its path, duration, and AC frequency. Path has obvious consequences. For example, the heart is unaffected by an electric shock through the brain, such as may be used to treat manic depression. And it is a general truth that the longer the duration of a shock, the greater its effects. Figure 20.22 presents a graph that illustrates the effects of frequency on a shock. The curves show the minimum current for two different effects, as a function of frequency. The lower the current needed, the more sensitive the body is at that frequency. Ironically, the body is most sensitive to frequencies near the 50- or 60-Hz frequencies in common use. The body is slightly less sensitive for DC ($f = 0$), mildly confirming Edison's claims that AC presents a greater hazard. At higher and higher frequencies, the body becomes progressively less sensitive to any effects that involve nerves. This is related to the maximum rates at which nerves can fire or be stimulated. At very high frequencies, electrical current travels only on the surface of a person. Thus a wart can be burned off with very high frequency current without causing the heart to stop. (Do not try this at home with 60-Hz AC!) Some of the spectacular demonstrations of electricity, in which high-voltage arcs are passed through the air and over people's bodies, employ high frequencies and low currents. (See Figure 20.23.) Electrical safety devices and techniques are discussed in detail in Electrical Safety: Systems and Devices.
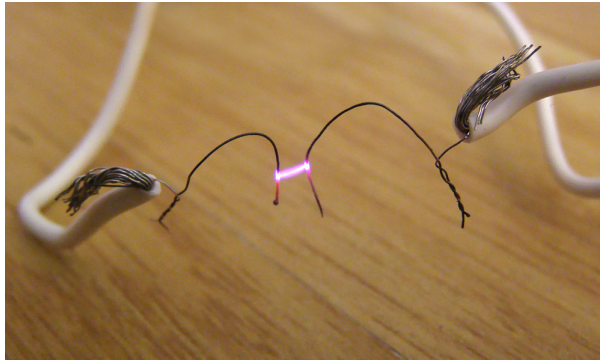
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Figure 20.23 Is this electric arc dangerous? The answer depends on the AC frequency and the power involved. (credit: Khimich Alex, Wikimedia Commons)