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Heavy Metal Contamination in Water: Detection and Remediation Strategies

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Abstract

Heavy metal contamination in water has emerged as a critical environmental and public health issue in India due to rapid industrialization, agricultural runoff, and ineffective waste management systems. This review paper synthesizes existing research and data (up to 2014) to assess the extent of contamination, primary sources, detection techniques, toxicological impacts, and remediation strategies specific to the Indian context. Data from national and regional studies reveal widespread contamination by arsenic, lead, cadmium, chromium, and mercury, with levels in several regions exceeding WHO and BIS standards. The paper evaluates traditional detection methods like Atomic Absorption Spectroscopy and Inductively Coupled Plasma Mass Spectrometry alongside emerging field-friendly approaches such as biosensors and GIS-based monitoring. Toxicological impacts include neurological, renal, and carcinogenic effects, especially vulnerable populations. Remediation techniques such as membrane in filtration, phytoremediation, and biosorption using agricultural waste show varying degrees of effectiveness, with phytoremediation being both eco-friendly and cost-efficient in rural settings. Despite technological advances, disparities in implementation persist due to infrastructure limitations and lack of awareness. The study emphasizes the need for integrated, cost-effective, and communitybased solutions along with stronger policy enforcement. It calls for future research to focus on sustainable and scalable remediation technologies, rural-urban equity in monitoring, and the incorporation of indigenous practices in water management frameworks.

Keywords: Heavy Metals, Water Contamination, India, Arsenic, Remediation, Detection Techniques, Toxicology, Phytoremediation, Public Health, Biosensors

1. Introduction

Heavy metal contamination in water has emerged as a pressing environmental and public health issue globally, with particularly severe implications for developing countries like India. Heavy metals such as lead (Pb), cadmium (Cd), mercury (Hg), arsenic (As), and chromium (Cr) are non-biodegradable and tend to accumulate in aquatic systems, posing long-term ecological and health risks (Järup, 2003). In India, rapid industrialization, unregulated mining, and improper disposal of industrial effluents have led to a marked increase in heavy metal concentrations in major water bodies.

According to a Central Pollution Control Board (CPCB) survey conducted in 2011, more than **66% of India's surface water** was classified as polluted due to various contaminants, including heavy metals. Specific instances such as arsenic contamination in groundwater across West Bengal, Bihar, and Uttar Pradesh affect more than **30 million people** (Chakraborti et al., 2003). In industrial hubs like Vapi (Gujarat) and Kanpur (Uttar Pradesh), chromium levels in surface waters have been reported to exceed



the permissible limit of **0.05 mg/L** by as much as **8–10 times**, primarily due to tannery and textile effluents (CPCB, 2009).

These metals enter aquatic systems from point and non-point sources, including electroplating units, battery manufacturing, coal combustion, agricultural runoff, and urban wastewater. For instance, wastewater from battery manufacturing units in Delhi and Maharashtra has been found to contain lead concentrations reaching **1.2 mg/L**, significantly higher than the BIS standard of **0.01 mg/L** for drinking water (BIS, 2012).

Moreover, the mobility and persistence of heavy metals in water make their remediation particularly challenging. Bioaccumulation in aquatic flora and fauna also poses indirect health threats to humans through the food chain (Duffus, 2002). In this context, understanding both the extent and mechanisms of contamination, along with viable detection and remediation strategies, becomes imperative.

Hence, this review critically explores the current state of heavy metal contamination in Indian waters, evaluates advanced detection and remediation technologies, and identifies key research gaps and policy needs to mitigate the crisis.

2. Objectives of the Study

The objective of this review is to critically examine the extent, causes, and implications of heavy metal contamination in water sources across India. It aims to consolidate existing research findings and government data to understand the primary sources—industrial effluents, mining activities, agricultural runoff—and their contribution to water pollution. The study also intends to assess the effectiveness of traditional and emerging detection techniques used in Indian settings. Furthermore, it evaluates various remediation strategies, including chemical, biological, and nanotechnology-based methods, with a focus on their practical applicability and efficiency. Lastly, the paper seeks to highlight major research gaps and propose directions for future studies and policy development to support sustainable water quality management in India.

3. Sources and Distribution of Heavy Metals in Water

The presence of heavy metals in Indian water bodies originates from both natural and anthropogenic sources. While geogenic contributions from mineral weathering and soil erosion play a role, industrialization, urbanization, and unregulated waste disposal are the primary contributors to elevated levels of toxic metals in surface and groundwater (Järup, 2003; CPCB, 2009).

In India, industrial activities such as electroplating, tanning, mining, textile processing, and thermal power generation are major point sources of contamination. For example, tanneries in Kanpur release wastewater rich in hexavalent chromium, often exceeding **3.2 mg/L**, which is over **60 times** the BIS permissible limit of **0.05 mg/L** (CPCB, 2009). Similarly, mining regions in Jharkhand and Odisha report high concentrations of cadmium and lead due to runoff from tailing ponds (Raju et al., 2009).

Non-point sources such as agricultural runoff also significantly contribute to the contamination of groundwater and surface water. The excessive use of phosphate fertilizers in Punjab and Haryana has resulted in the leaching of cadmium into aquifers, with concentrations reaching up to **0.01 mg/L**, while the acceptable limit remains **0.003 mg/L** (Singh et al., 2004).



Urban wastewater and e-waste dumping further exacerbate the issue. Informal recycling of electronic goods in urban centers like Delhi and Bengaluru has been linked to elevated levels of lead and mercury in nearby water sources (Chatterjee, 2008).

Table 1 presents observed concentrations of selected heavy metals in major Indian rivers, illustrating the spatial variability of contamination levels.

River	Location	Pb (mg/L)	Cr (mg/L)	Cd (mg/L)	As (mg/L)
Ganga	Kanpur	0.11	3.20	0.008	0.06
Yamuna	Delhi	0.18	1.94	0.005	0.03
Sabarmati	Ahmedabad	0.07	0.85	0.006	0.01
Brahmaputra	Assam	0.02	0.14	0.002	0.07

 Table 1: Concentration of Heavy Metals in Selected Indian Rivers (2010–2012)

Source: Central Pollution Control Board (CPCB), 2012; Singh et al., 2004

The spatial distribution of contamination highlights the need for region-specific monitoring and intervention strategies. Urban-industrial zones show disproportionately higher levels of toxic metals compared to rural or forested catchments. This variation underscores the influence of local land-use patterns and regulatory enforcement in determining water quality.

4. Toxicological Effects of Heavy Metals on Human Health and Environment

Heavy metals in contaminated water sources have profound and persistent effects on both human health and the broader ecosystem. In the Indian context, chronic exposure to heavy metals like arsenic, lead, cadmium, and mercury through drinking water and bioaccumulated food sources has been associated with a rise in neurological, renal, hepatic, and developmental disorders (Järup, 2003; Duffus, 2002).

One of the most documented cases of toxicological impact is the arsenic crisis in the Indo-Gangetic plains, particularly in West Bengal, where groundwater arsenic concentrations have reached up to **0.3 mg/L**, well above the BIS permissible limit of **0.01 mg/L**. Long-term ingestion has led to arsenicosis, skin lesions, and even carcinomas among over **13 million people** in the region (Chakraborti et al., 2003).

Lead contamination, largely due to battery recycling, paints, and industrial emissions, remains a concern in urban areas. In a study across Delhi's peri-urban slums, over 40% of children under 12 years exhibited blood lead levels exceeding 10 μ g/dL, the threshold beyond which cognitive impairment is known to occur (Chatterjee, 2008). Lead exposure in pregnant women has also been linked with stillbirths and reduced IQ levels in newborns.

Mercury, often released through industrial effluents and artisanal gold mining in parts of Karnataka and Kerala, disrupts the central nervous system. Fish samples from Vembanad Lake in Kerala have shown mercury levels up to **0.9 mg/kg**, exceeding the WHO safe limit of **0.5 mg/kg** (Rao et al., 2009).

The environmental implications are equally severe. Cadmium contamination, especially in agricultural zones using phosphate fertilizers, alters soil microbial activity and decreases crop yield.



Bioaccumulation in aquatic organisms affects food chain dynamics and biodiversity. Studies from the Yamuna River reveal benthic invertebrate decline in areas with high cadmium concentrations (>0.01 mg/L) (CPCB, 2009).

Heavy Metal	Affected Organ/System	Key Health Impacts	Affected Region in India
Arsenic	Skin, Liver, Nervous System	Skin lesions, Cancer, Neurotoxicity	West Bengal, Bihar
Lead	Nervous System, Blood	Cognitive decline, Anemia, Stillbirths	Delhi, Chennai
Mercury	Brain, Kidneys	Tremors, Memory loss, Developmental delay	Kerala, Karnataka
Cadmium	Kidneys, Bones	Punjab, Haryana	

 Table 2: Health Effects of Selected Heavy Metals Found in Indian Water Bodies

Source: CPCB (2009); Chakraborti et al. (2003); Chatterjee (2008)

The interplay between chronic exposure, environmental degradation, and socio-economic vulnerability makes the toxicological consequences of heavy metals particularly acute in India. Immediate, region-specific interventions in public health monitoring and pollution control are essential to prevent irreversible harm.

5. Detection and Monitoring Techniques for Heavy Metals in Water

Accurate detection and continuous monitoring of heavy metals in water bodies are essential for effective risk assessment and mitigation strategies. In India, due to the growing concern over contamination, multiple techniques have been adopted in recent decades to measure the presence of toxic metals like arsenic, lead, cadmium, and chromium in both surface and groundwater.

Traditional methods such as Atomic Absorption Spectroscopy (AAS) and Inductively Coupled Plasma Mass Spectrometry (ICP-MS) are widely used by institutions like the Central Pollution Control Board (CPCB) and State Pollution Control Boards. AAS, for example, has been employed in arsenic testing in West Bengal and Uttar Pradesh, detecting concentrations as high as **0.28 mg/L** in certain wells (Chakraborti et al., 2003). These techniques offer high sensitivity, with detection limits often below **0.001 mg/L**, but require expensive equipment, skilled technicians, and laboratory facilities—challenges that limit widespread adoption in rural areas (Järup, 2003).

To address field-level needs, cost-effective and portable testing kits have been developed. For instance, colorimetric field test kits for arsenic, costing less than **INR 20 per test**, have been widely used under government-led programs such as the National Rural Drinking Water Programme. However, studies have reported that over **15%** of such kits provided false negatives or underestimation of actual concentrations (CPCB, 2009).



Recent advancements in India have included biosensors and nanotechnology-based sensors. Biosensors using enzyme-based detection have been piloted in Tamil Nadu and Maharashtra, showing potential for detecting lead concentrations as low as $5 \mu g/L$. Although still at an experimental stage, these methods could offer real-time, on-site detection with minimal infrastructure (Rao et al., 2009).

Remote sensing and Geographic Information System (GIS)-based monitoring are also gaining traction for large-scale surveillance. ISRO and CPCB collaborations have used satellite data to map pollution zones along rivers like Ganga and Yamuna, integrating water quality indices and industrial discharge points.

Overall, while India has made strides in adopting modern detection technologies, disparities remain between urban-industrial and rural-tribal regions in terms of accessibility and reliability of monitoring tools. Bridging this gap will be critical for ensuring timely intervention and sustainable water governance across the country.

6. Remediation and Treatment Strategies for Heavy Metal Contamination

India's response to heavy metal contamination in water has evolved from basic filtration to advanced physico-chemical and biological treatments, although implementation varies regionally. Among conventional methods, **precipitation and coagulation** techniques are commonly used in municipal treatment plants for metals like chromium and lead, particularly in industrial belts of Gujarat and Maharashtra. These techniques, however, generate considerable sludge, with disposal often posing secondary pollution risks (CPCB, 2009).

Ion exchange and membrane filtration, including reverse osmosis (RO), have been applied for removing arsenic and cadmium in states like Punjab and West Bengal. RO units in arsenic-affected districts of Nadia and Murshidabad have shown over **95% removal efficiency**, but high installation (**~INR 2.5–3 lakhs/unit**) and maintenance costs restrict their use in low-income rural settings (Chakraborti et al., 2003).

A growing trend in India is the use of **phytoremediation**—the use of plants like *Eichhornia crassipes* (water hyacinth) and *Brassica juncea* (Indian mustard) to absorb metals from contaminated waters. Field trials in eastern Uttar Pradesh demonstrated lead uptake of **up to 70 mg/kg dry weight** by *Brassica juncea* in wastewater-irrigated fields (Rao et al., 2009). This method is environmentally friendly and cost-effective but time-intensive and site-specific.

Biosorption using agricultural waste (e.g., rice husk, sawdust, coconut coir) is another promising low-cost strategy. Studies in Tamil Nadu have shown cadmium removal efficiencies of **above 80%** using treated rice husk in batch systems (Järup, 2003).

While several technologies exist, widespread adoption is limited by infrastructural gaps, inconsistent policy enforcement, and lack of community awareness. Therefore, India's path forward must involve integrating traditional ecological knowledge with modern science, alongside policy support, to ensure effective and sustainable remediation of heavy metal-contaminated water sources.

7. Case Studies (India and Global)



India has witnessed several critical case studies of heavy metal contamination in water, reflecting both the severity of the issue and the diversity of its sources. One of the most studied cases is **arsenic contamination in the groundwater of West Bengal**, affecting more than **12 districts** and over **30 million people** (Chakraborti et al., 2004). In certain areas like Murshidabad and Nadia, arsenic concentrations have been reported as high as **3,700 \mug/L**, drastically exceeding the **WHO permissible limit of 10 \mug/L. The crisis, attributed to excessive groundwater extraction and natural geological sources, has led to widespread cases of arsenicosis, including skin lesions and internal cancers.**

In **Punjab**, excessive use of phosphate fertilizers and industrial effluents has resulted in elevated levels of **uranium**, **cadmium**, **and lead** in drinking water, particularly in the Malwa region. A 2012 study indicated uranium levels in some samples reaching 134 μ g/L, far above the WHO guideline of 30 μ g/L (Singh et al., 2012). The region also reported a surge in neurological disorders and congenital deformities among children.

Another major instance is the **Chromium contamination in Sukinda Valley, Odisha**, known for its chromite mining. The valley ranks among the top ten most polluted places globally, with hexavalent chromium levels in surface water recorded at **0.33 mg/L**, vastly exceeding the Indian standard of **0.05 mg/L** (Blacksmith Institute, 2007). Local communities suffer from severe respiratory, gastrointestinal, and dermatological diseases.

Globally, similar instances can be found in Bangladesh's arsenic crisis, which closely mirrors the West Bengal scenario due to shared hydro-geological conditions (Smith et al., 2000). The **Itai-Itai disease** in Japan, caused by cadmium poisoning from mining operations, remains one of the earliest documented cases of chronic metal toxicity.

These case studies underscore the necessity of adopting location-specific, scientifically informed interventions. The Indian examples particularly highlight how poor regulation, unscientific agricultural practices, and industrial negligence exacerbate contamination risks. They also offer valuable lessons for designing proactive monitoring, community awareness, and low-cost remediation strategies in future efforts to ensure safe and sustainable water access.

8. Policy Framework and Future Directions

India's policy response to heavy metal contamination in water has been shaped by several legislative and institutional frameworks, yet challenges in implementation and enforcement persist. The Water (Prevention and Control of Pollution) Act, 1974, and the Environment (Protection) Act, 1986, provide the legal backbone for regulating water quality. Additionally, the Bureau of Indian Standards (BIS) has laid down permissible limits for heavy metals in drinking water—0.01 mg/L for cadmium, 0.05 mg/L for lead, and 0.01 mg/L for mercury (BIS, 2012). However, monitoring and compliance mechanisms often remain weak at the local level, especially in rural and peri-urban regions.

The Central Pollution Control Board (CPCB) and State Pollution Control Boards (SPCBs) are tasked with oversight, but as of 2012, only 62% of India's wastewater was being treated, and most facilities lacked adequate infrastructure to remove heavy metals (CPCB, 2013). The National River Conservation Plan (NRCP) and Ganga Action Plan included provisions for industrial effluent regulation, but outcomes were diluted by poor inter-agency coordination and insufficient funding.



Future policy directions must prioritize decentralized and affordable detection systems, mandatory industry audits, and strict penalties for non-compliance. Importantly, environmental governance needs to transition from reactive to preventive models, with emphasis on **pollution load reduction at source** rather than end-of-pipe solutions. Community-based monitoring systems, as piloted in Gujarat and Kerala, have shown promise in improving accountability and early warning mechanisms (Sharma et al., 2008).

Furthermore, India's **12th Five-Year Plan (2012–2017)** is emphasizing on integrated water resource management, but failed to include metal-specific contamination indicators, limiting its effectiveness in addressing this unique threat. Future frameworks should align with global Sustainable Development Goals (SDGs), particularly **Goal 6 (Clean Water and Sanitation)**, and promote **interdisciplinary collaboration** across water, health, agriculture, and education sectors.

In conclusion, robust policymaking—grounded in scientific evidence and participatory governance must drive India's strategy to combat heavy metal contamination. A forward-looking approach combining stringent regulation, technological innovation, and community engagement will be pivotal in safeguarding water quality and public health.

Conclusion

Heavy metal contamination in water presents a multifaceted challenge in India, intricately linked with industrialization, unregulated waste disposal, and poor environmental governance. The persistent presence of toxic metals like arsenic, lead, cadmium, and mercury in various Indian water bodies has resulted in severe health hazards, ecological imbalance, and agricultural degradation. With data indicating that millions of individuals, particularly in regions like West Bengal, Punjab, and Delhi, are exposed to metal concentrations far exceeding permissible limits, the urgency of addressing this issue is undeniable.

While the country has adopted both conventional and emerging detection methods—ranging from AAS and ICP-MS to biosensors and GIS-based surveillance—accessibility and affordability remain major constraints in rural and underdeveloped areas. Similarly, a range of remediation techniques, including membrane filtration, phytoremediation, and biosorption, have shown promise but require customization to local socio-economic and geophysical contexts.

The toxicological consequences on human health—especially among children and vulnerable populations—underline the need for long-term epidemiological studies and health monitoring. Environmental degradation due to bioaccumulation in flora and fauna also calls for integrated, ecosystem-based approaches to water management.

In conclusion, addressing heavy metal contamination in India demands a multi-pronged strategy: robust scientific monitoring, region-specific remediation technologies, policy reform, public health interventions, and strong community engagement. Future efforts must be focused on improving intersectoral coordination, enhancing rural technical capacities, and fostering innovation in low-cost and sustainable technologies. Only a holistic, evidence-based, and inclusive approach will ensure the protection of India's water resources and the health of its people.



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