CIRCADIAN LIGHTING METRICS

Circadian Stimulus (CS), Equivalent Melanopic Lux (EML), and Melanopic Equivalent Daylight Illuminance (MEDI)

Metrics have been developed as tools to enable lighting professionals to create environments that promote alertness by day and good sleep at night – prime examples of circadian rhythms, or biological processes that repeat every 24 hours.

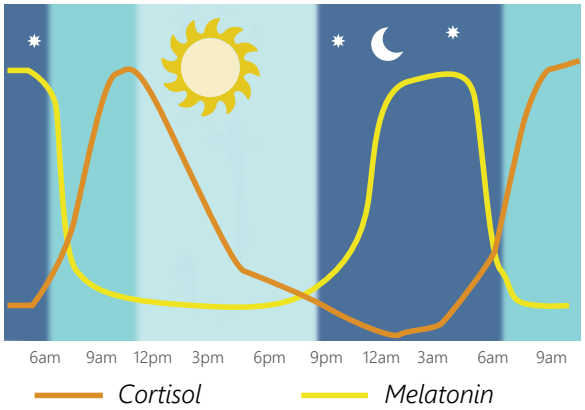
This becomes especially important in hospitals where schedules are erratic, where support of circadian health can also improve overall health and wellbeing.

Key elements to entrain – or synchronize – humans' biological clocks to the light/dark cycles of the 24-hour day are amount, spectrum, length of exposure, time of day, distribution, and personal light history – one's sensitivity to light.

Research has shown that these elements, when delivered in the right combination, can improve sleep quality, reduce agitation, depression, and fatigue for patients, caregiving staff, and families in hospital environments. These positive effects can last beyond a patient's discharge or after a night shift nurse leaves to go home.

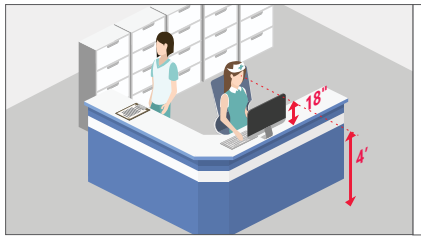
Delivering the right light at the right time of day helps avoid circadian disruption, which can cause poor sleep but also increase risk of serious illnesses such as cancer, heart disease and delirium.

Recently discovered photoreceptors in the human eye – photosensitive retinal ganglion cells or ipRGCs– contain the protein melanopsin, which is highly sensitive to 460-480 nm blue wavelengths. When stimulated by light, ipRGCs send a signal to the body's master clock, telling it to reset its cycle for the next 24 hours. That signal triggers a variety of biological processes, including essential production of hormones such as melatonin and cortisol.



Importance of light/dark signal:

Cortisol rises with the early light of day, keeping us awake and alert. Melatonin is suppressed by light during the day, but rises as darkness sets in to promote sleep.



ALL CIRCADIAN METRIC CALCULATIONS REQUIRE

Spectral power distribution **(SPD)** of light sources; correlated color temperature **(CCT) is not an accurate measure**

Light measured on the **vertical plane at eye level,** either 4'-0" Above Finished Floor (AFF) or 18" above the workplane, for adjustable height desks

CS characterizes the human response to light in terms of melatonin. EML and MEDI characterize a light source's effectiveness at stimulating melanopsin.

The three are not interchangeable, and each tells a different story – but any of them will indicate if one is on the right path to effective circadian lighting design, depending on the application.

Each metric provides its own calculation tool and counts toward achieving points in the **WELL Building Standard,** v1 or v2, in the **Circadian Lighting Design** category.

CS

- Factors in contribution of all five photoreceptors, along with amount and spectrum to assess circadian stimulation
- It estimates the percentage of melatonin a person will suppress after one-hour exposure to a light source during the day, which in turn affects that person's melatonin levels at night
- Robust melatonin levels may result in better sleep, improved mood, performance, and feelings of alertness
- High CS of >0.3 recommended for early morning, reducing to <0.1 in the evening
- *https://www.lrc.rpi.edu/cscalculator/*

EML

- Introduces the unit 'melanopic lux' as a measure of light's effect on stimulating the circadian system compared to the visual system
- It is a two-part calculation involving the melanopic to photopic (M/P) ratio and illuminance at the eye (Ev)
- The M/P ratio formula converts visual response to circadian response based on the SPD of one (or more) light sources
- It will indicate whether light source A is better or worse than light source B, of equal energy, at stimulating melanopsin
- ***EML = M/P ratio x Ev (vertical illuminance)***
- *https://standard.wellcertified.com/tables > Table L1: Melanopic Ratio > IWBI link to spreadsheet*

MEDI

- Factors in contribution of all five photoreceptors to determine how the ipRGCs respond to light compared to rods and cones
- Like EML, it is a two-part calculation requiring the melanopic daylight efficacy ratio (m-DER) and illuminance at the eye (Ev)
- M-DER compares a light source's ability to stimulate melanopsin to that of standard daylight
- ***MEDI = m-DER x Ev (vertical illuminance)***
- *https://balancedcare.axislighting.staging.mxo.website/wp-content/uploads/2020/09/CIE-S-026-alpha-opic-Toolbox.xlsx*

Image by Lighting Research Center