

Health Effects of Ambient Particulate Matter

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Epidemiological Studies of PM and Daily Mortality – Associations with Short-term Exposures

- **Studies of PM10 and mortality conducted in hundreds of cities world-wide, over a wide range of climates and seasonal patterns, mean PM concentrations, co-pollutants, background health conditions, housing stock, etc.**
- **Examine associations between daily concentrations of PM and daily death counts.**
- **Studies account for weather, seasonal effects, day of week, co-pollutants, and other factors**

PM/Mortality Epidemiology Studies – Short-term Exposure Results

- Consistent associations between daily averages of PM10 and PM2.5 and mortality
- Linear relationship: no good evidence of any threshold
- Most mortality studies show associations between 0.5 and 1.5% increments in daily mortality per $10 \mu\text{g}/\text{m}^3$ PM10
 - Example - APHEA-2 – 43 million people in 29 European cities - 0.6% increase in daily total mortality; 0.7% for cardiovascular deaths per $10 \mu\text{g}/\text{m}^3$

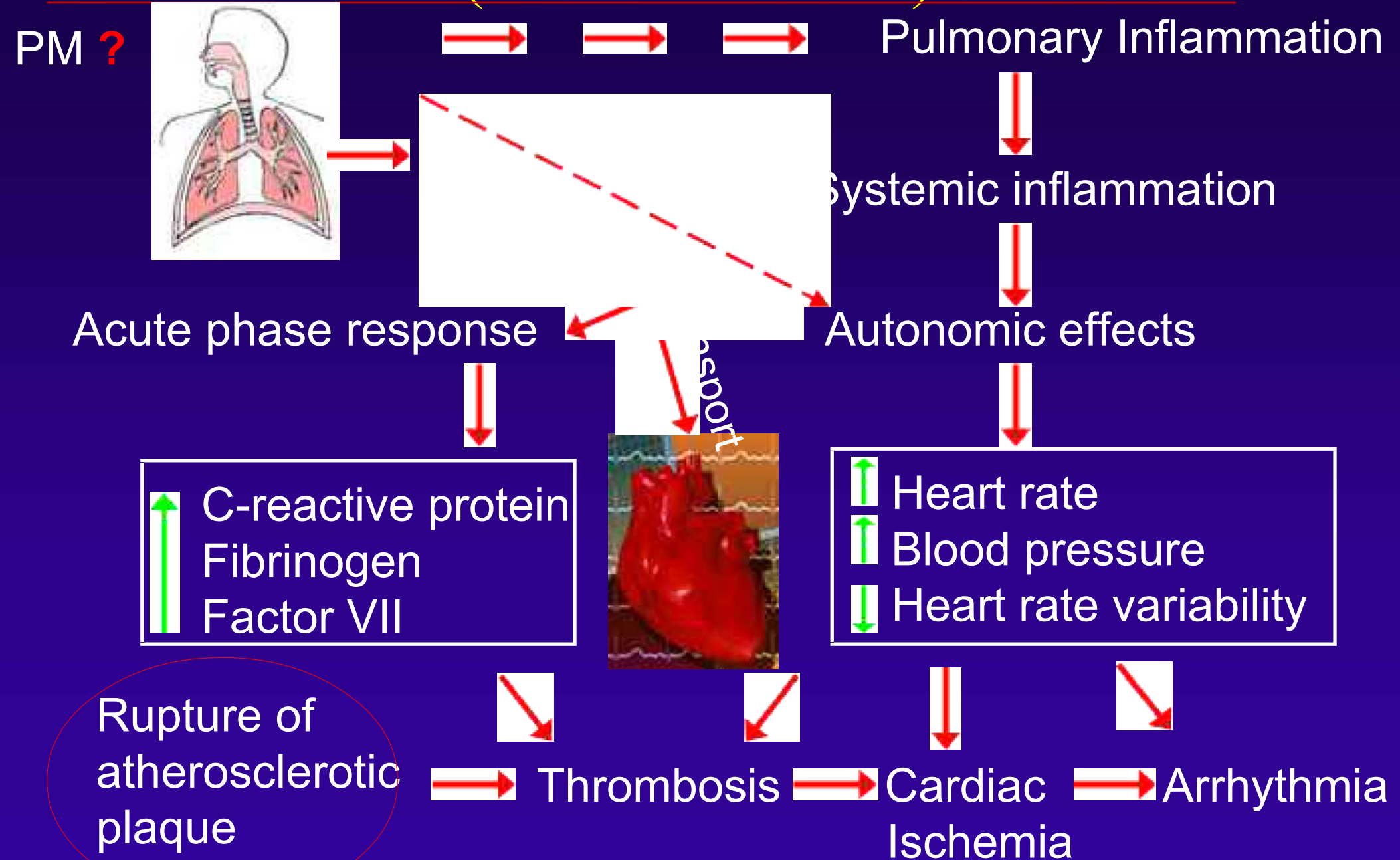
Coherence: If PM kills some people, it should hurt others

- **Associations also reported between daily PM10 and multiple measures of illness**
 - **cardiorespiratory hospitalizations**
 - **emergency room visits**
 - **school absenteeism and work loss**
 - **asthma attacks**
 - **bronchitis other respiratory symptoms in children**
 - **decreased lung function**

Low-Level PM Exposure and Cardiovascular Effects - Is this Believable?

- Numerous time-series studies link low-level ambient particulate matter (PM) with increased cardiac morbidity and mortality
- No good mechanistic explanations for this phenomenon until recently

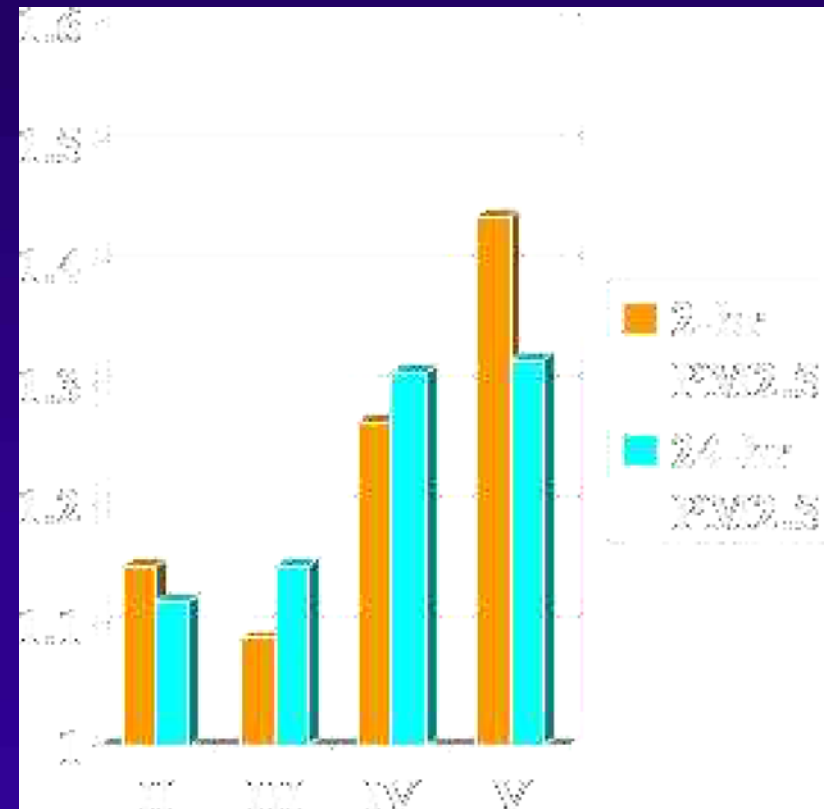
PM - Potential Mechanisms of Action (Partial schematic)



PM and Myocardial Infarction

- Boston study of 772 patients interviewed about onset of myocardial infarction symptoms
- PM10 and PM2.5 measured 2 and 24 hours before symptom onset both showed elevated odds ratios

Odds ratio



Exposure quintile

Source Peters A et al. Circulation 2001:103

PM Epidemiology Studies – Long-term Exposures

- Several studies report associations between mortality and long-term exposure to PM10 and/or PM2.5.
- Analysis accounts for relevant individual-level factors (e.g., smoking, weight, alcohol, occupational exposure, gender, age, and others)
- In general, these studies show a markedly greater association of mortality with PM exposure than the time-series studies

American Cancer Society II Study

- 500,000 people in 151 cities followed for up to 16 years.
- Controlled for age, sex, occupational exposure, obesity, alcohol and cigarette use, socioeconomic status
- Φορτινχρεμεντ οφ 10 $\mu\text{g}/\mu^3$ long-term average PM2.5:
 - 6% increase in all-cause mortality
 - 9% increase in cardiopulmonary
 - 14% increase in lung cancer
- Within the cardiopulmonary deaths:
 - 18% increase in ischemic heart disease
 - 12% increase in (arrhythmias+heart failure+cardiac arrest)
- *(Pope et al. AJRCCM 1995, JAMA 2002, Circulation 2004)*

Netherlands Cohort Study on Diet and Cancer

- Subcohort of 5,000 (ages 55-69) followed from 1986-94
- Controlled for age, smoking, second-hand smoke, education, occupation, weight, neighborhood socioeconomic status [alcohol and diet]
- Strongest pollutant predictor of mortality was living near a busy road (95% increased risk for cardiopulmonary mortality; 53% for all-cause [among long-term residents]).
- Too few deaths to examine relationship with lung cancer or other respiratory deaths, per se.

(Hoek et al. Lancet 2002)

Traffic and Non-fatal Myocardial Infarction

- 691 subjects in Germany interviewed about activities prior to symptom onset
- Exposure to traffic within 1 – 2 hr prior to symptoms more than doubled the risk of MI
- Could be a mix of effects: pollutants, stress, noise; however, increased risk seen also for taking public transportation (lower stress?)
- Larger effect estimates for women, age > 60, diabetics and the unemployed

Peters et al. (NEJM 2004)

Reduced Exposures Linked with Clear Health Improvements

- Dublin, Ireland – ban on coal sales (9/1/90). Comparing 6 yr before and after the ban; all-cause, cardiovascular, and respiratory mortality fell by 5.7, 10.3, and 15.5%, respectively. (Effects much larger than predicted from time-series) (*Clancy et al. Lancet 2002*)
- Southern California -- In the Children's Health Study, those who moved to less polluted areas had improved lung function growth, while those who moved to more polluted areas had decreased growth rates. (*Avol et al. AJRCCM 2001*)

