

# Air Pollution and Public Health

Where have we been?

Where are we going?

Joel Schwartz



**Harvard School of Public  
Health**

## **Lead from Carthaginian and Roman Spanish Mines Isotopically Identified in Greenland Ice Dated from 600 B.C. to 300 A.D.<sup>†</sup>**

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**"...[London's] Inhabitants  
breathe nothing but an impure  
and thick Mist, accompanied  
with a fuliginous and filthy  
vapor,... corrupting the Lungs  
and disordering the entire  
habit of their Bodies;..."**

**John Evelyn,  
*Fumifugium*, 1661**





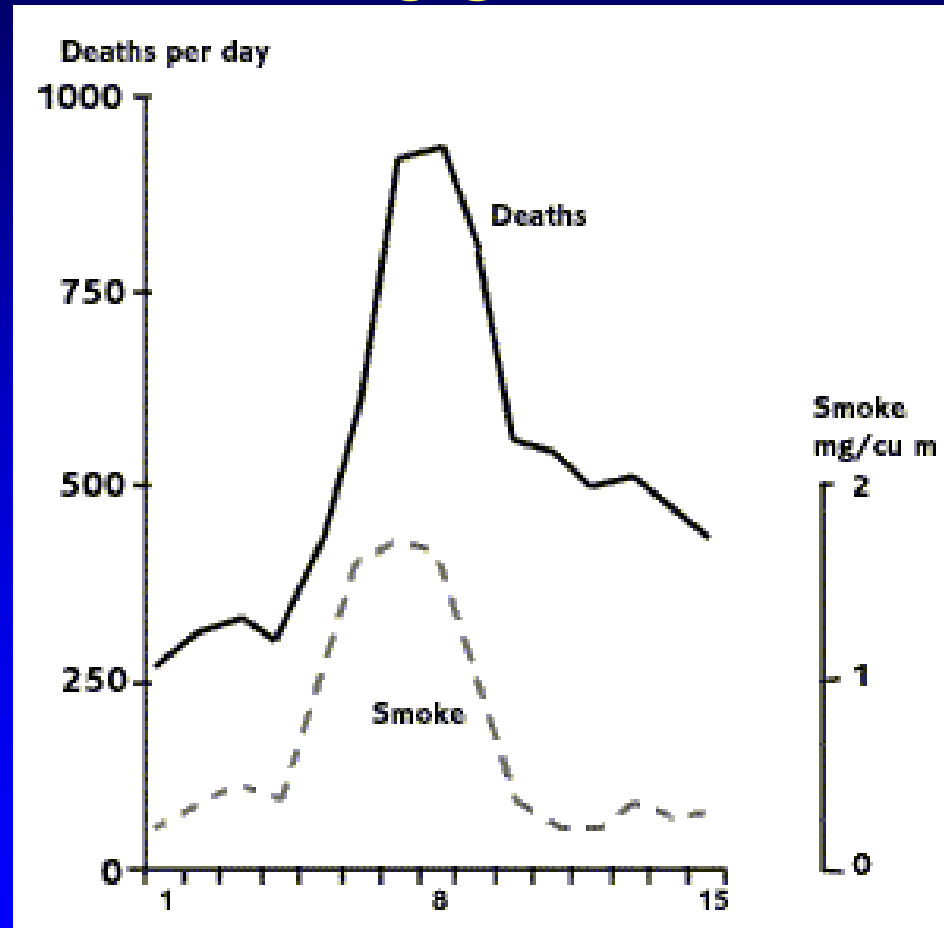
# Meuse Valley Disaster

- December 1—5 1930
  - Intense Fog in valley between Liege and Huy
  - Worst on December 3 and 4
  - Over 60 Deaths, 14 in Engis which normally had 65 deaths per year

# Notable Remarks

- A Similar Episode in London would kill Over 3000 People
- Many of the Deaths were Cardiovascular Deaths, following respiratory distress
- Submicron particles found in the alveolar region of the lung, Macrophages filled with Particles

# London Smog, December 1952



# First Response

- British Clean Air Act 1956
- US Clean Air Act 1963
- Levels Lowered
- Problem Solved

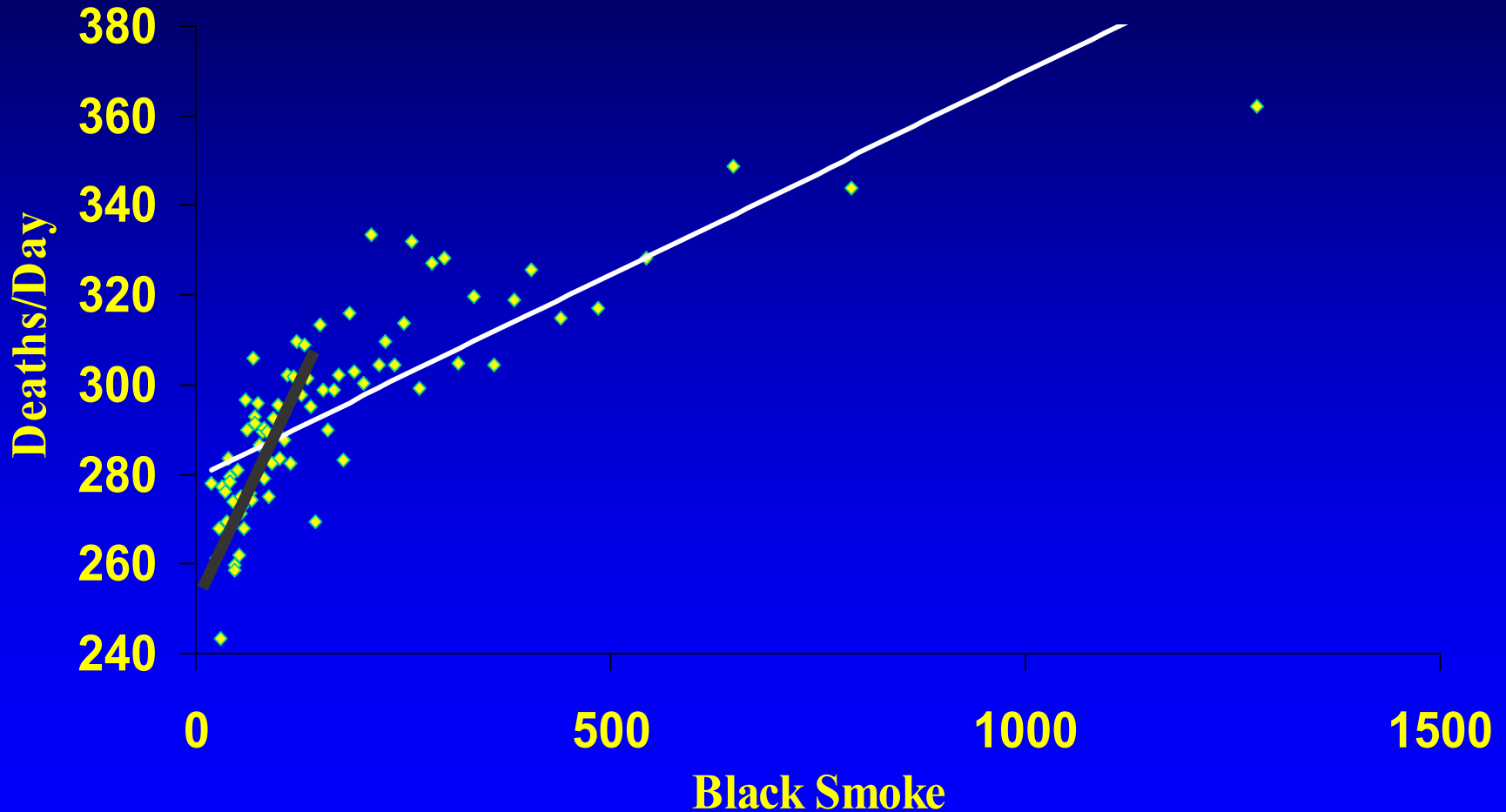


# St. Louis smog events in the 1930s; L.A. smog events and protests, 1940s and 50's



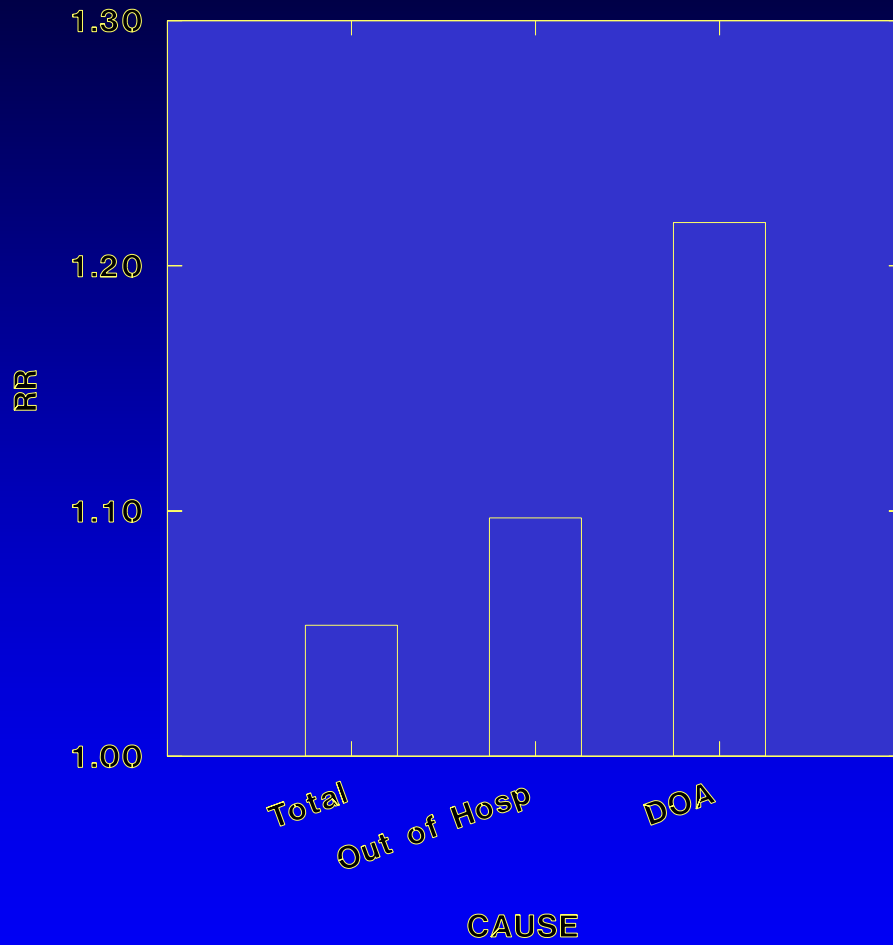
# London Mortality Time Series

*Schwartz & Marcus, Am J Epi 1990*



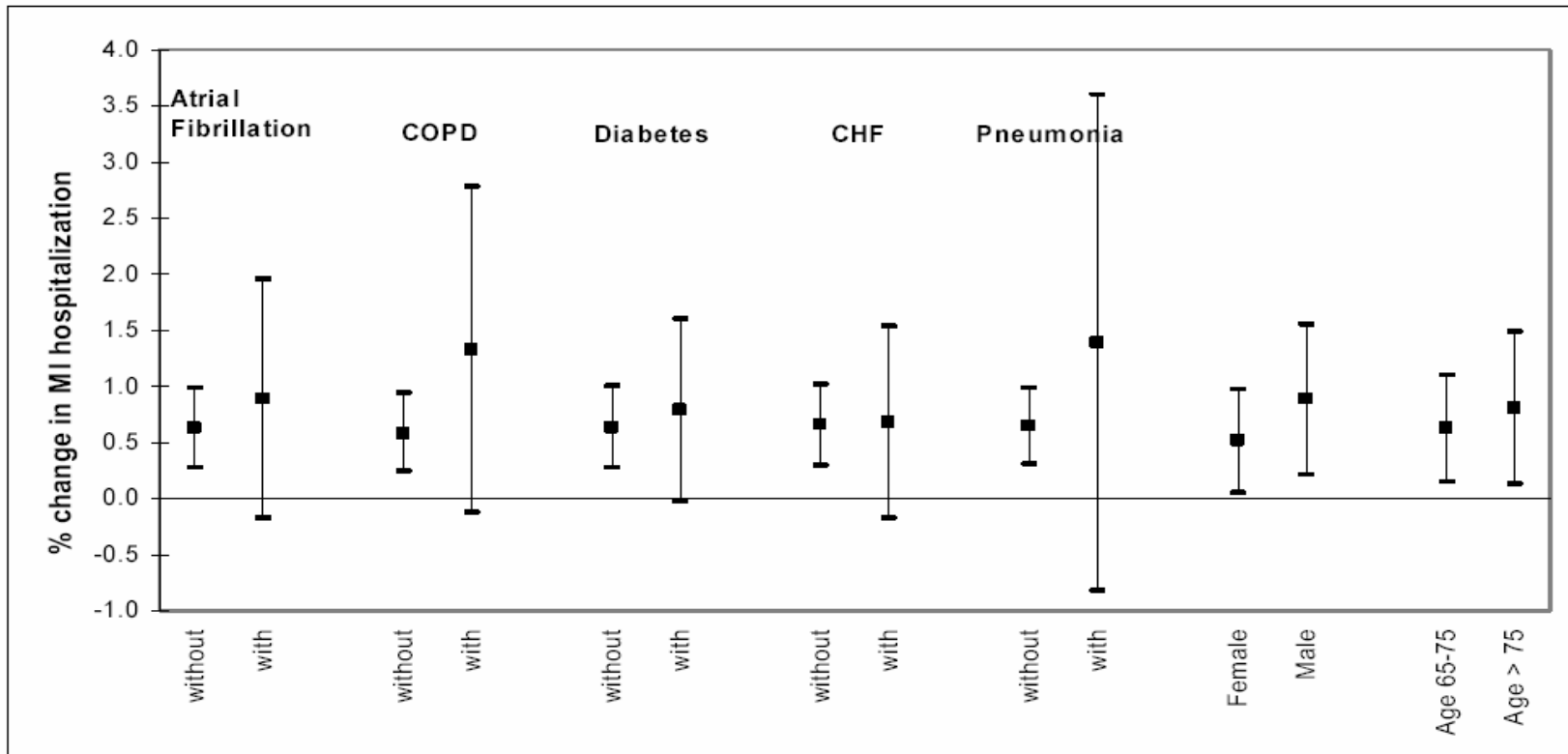
# How Can this Happen?

- What are people dying of?
- What increases your risk of dying of those diseases?
- What possible mechanism can there be?



Look at Sudden Deaths

# Effect of $10 \mu\text{g}/\text{m}^3$ PM10 on the Risk of Heart Attacks in 36 US Cities

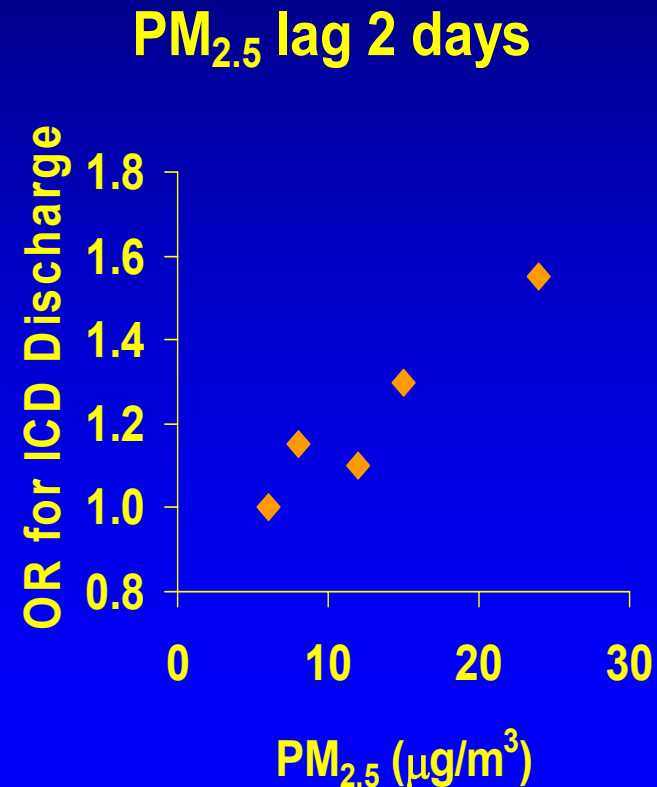


# Air Pollution and Incidence of Cardiac Arrhythmias: Boston

*(Peters et al, Epidemiology 2000)*

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- OR for ICD Discharge associated with PM<sub>2.5</sub>, Black Carbon, and NO<sub>2</sub>
- Stronger associations among 6 patients with 10+ events (effect of 5%-95% air pollution)
  - PM<sub>2.5</sub> 1.22 (0.7,2.0)
  - BC 2.16 (1.0,4.9)
  - NO<sub>2</sub> 3.13 (1.8,5.6)



# How is this Happening?

- Autonomic Dysfunction
- Arterial Dysfunction
- Thrombosis



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# Heart Rate Variability

- Variability of time between heart beats
- More Variability Protects against Arrhythmia
  - Decreases in Boston (3 studies), Baltimore (2 studies), Utah Valley (2 studies), Mexico City (2 studies), ARIC Study, Elderly Chamber Study
  - No effect (Vancouver)
- Seems stronger in Elderly



# Arterial Dysfunction

**Associations between 6-day moving average exposure to particulate air pollutants and vascular reactivity, controlling for age, race, sex, BMI\*, season, apparent temperature, and disease status (for total subjects estimate)**

Subjects	Pollutant	n	Endothelium dependent	n	Endothelium independent
			% change per IQR † (95% CI ‡)		% change per IQR (95% CI)
Type 2	Black carbon	148	-12.8 (-23.5, -0.6)	135	-6.8 (-15.1, 2.4)
	PM <sub>2.5</sub>	183	-8.8 (-17.0, 0.1)	169	-8.5 (-14.1, -2.5)
	Particle #	125	-6.3 (-24.5, 16.2)	114	-11.1 (-23.8, 3.8)
	Sulfate	125	-12.1 (-19.3, -4.2)	115	-6.2 (-11.5, -0.6)

\* Body mass index

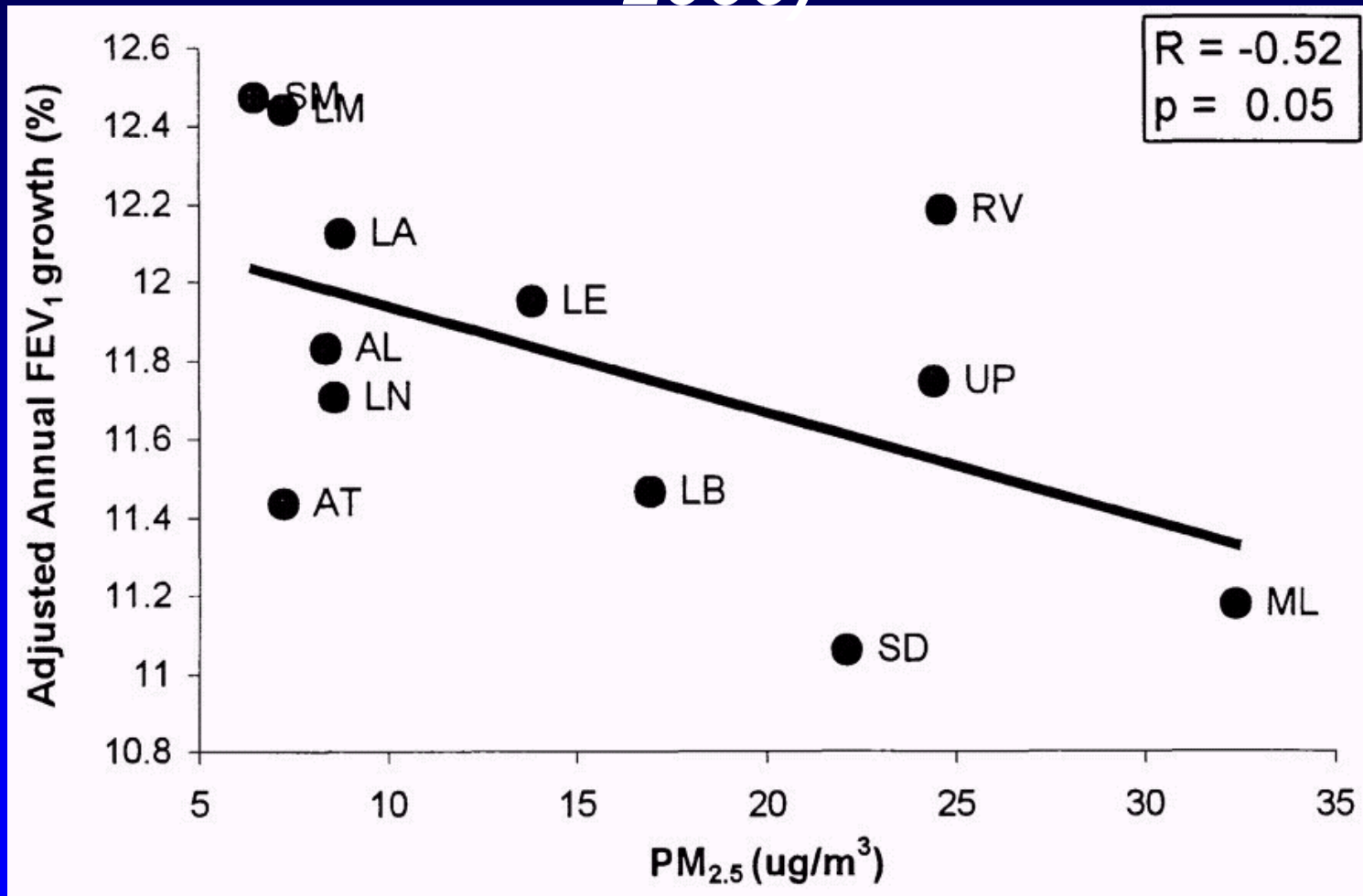
† Interquartile range of the pollutant, for the days under consideration

‡ confidence interval

# Thrombosis

- Peters et al 2001 Increases in CRP
- Fibrinogen Increases (Ghio 2000, Pekkanen 2000, Schwartz 2001)
- Von Willibrand's Factor (Liao 2005, O'Neill in review)

# FEV<sub>1</sub> Growth vs PM<sub>2.5</sub> in Southern California Children (*Gauderman et al., 2000*)

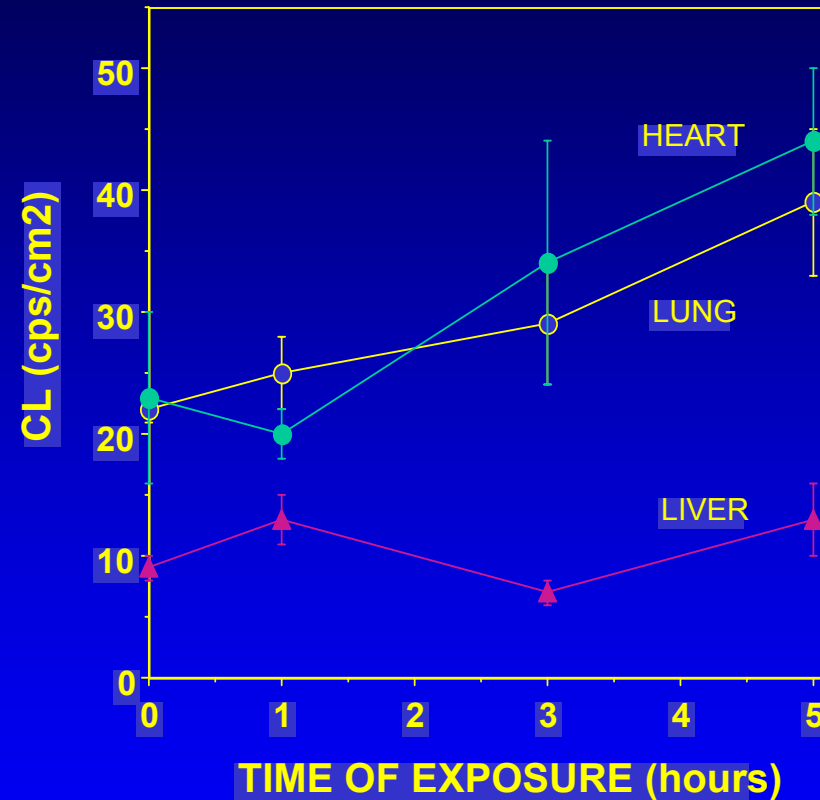


# New Directions

- Mechanistic Pathways
- Traffic Pollution and Fine Scale Exposure
- Developing Countries

# Role of oxidants in the pulmonary and cardiac responses to inhaled ambient particles.

Particles induced oxidative Stress in the lung and heart.



Chemiluminescence (CL) of lung, heart, and liver after various durations of CAPs exposure.



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# ROS related Genes

- Gilliland et al (2004) found GSTM1 null and GSTP1 wildtype had enhanced allergic response to Diesel exhaust particles
- Gilliland et al (2001) found ETS exposure in utero associated with asthma and wheeze only in GSTM1 null children.

# GSTM1, PM, and HRV in the Normative Aging Study

Category	% Decrease in HF	95%CI
GSTM1 Null, No Statin	-34.0	-53.0, -7.2
<i>GSTM1 Null, Statin</i>	-6.4	-66.5, 161.9
GSTM1 Present, No Statin	-3.6	-40.5, 56.2
GSTM1 Present, Statin	-3.2	-50.0, 87.2

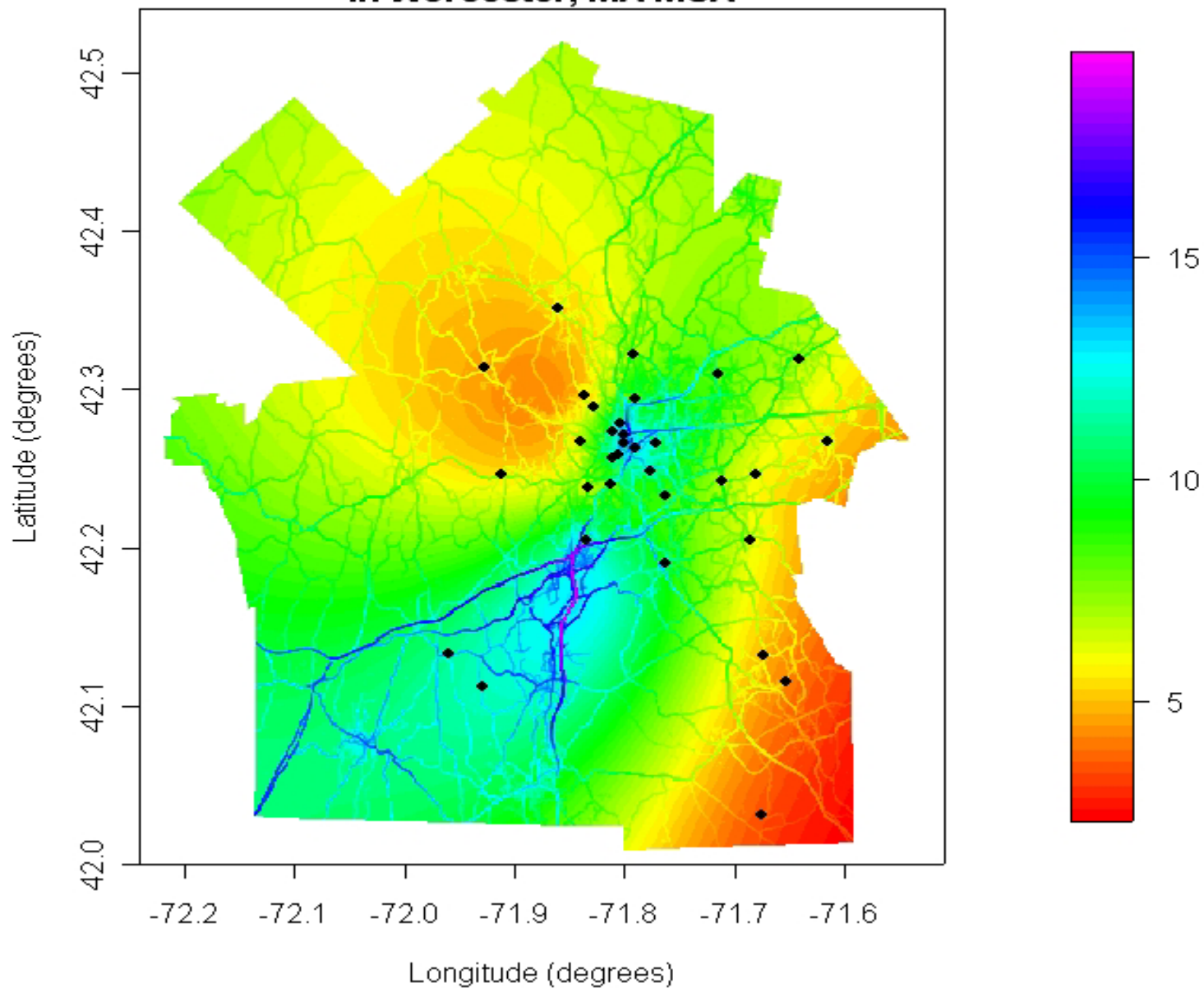
# Traffic Pollution

- Not uniform over space
- Big difference in a few blocks





**Predicted surface of weekly-average nitrogen dioxide concentrations (ppb) for 38th week of year (~Sept.20) in Worcester, MA MSA**



# Dutch Cohort Study (Hoek et al)

- Estimated Traffic Particle Exposure at Home Address
- Larger Increase in Risk of Death than Previous Cohort Studies

# Cardiovascular Effects of Biomass Smoke:

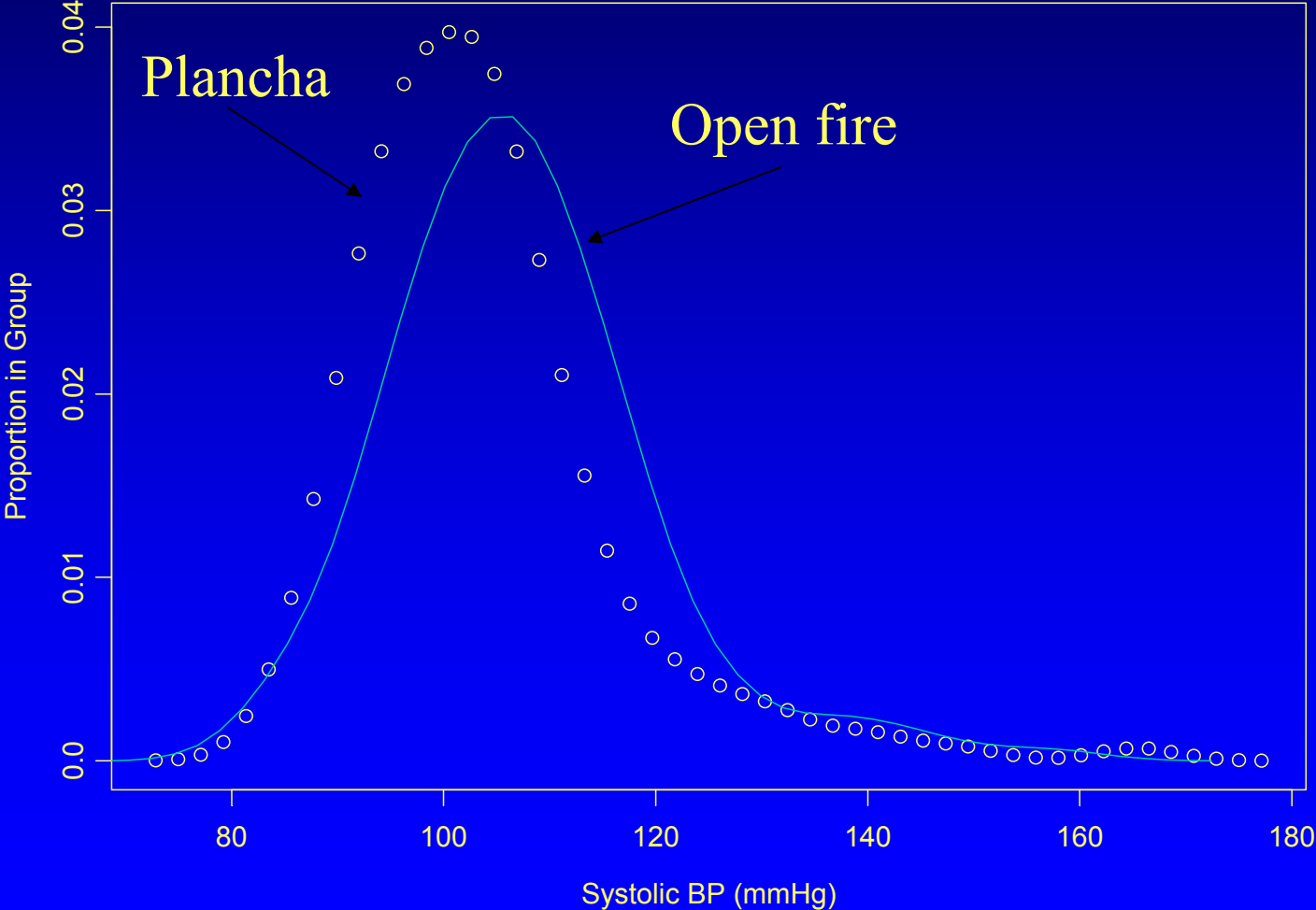
A Randomized Stove Trial in  
Guatemala







# Effect of Intervention on Distribution of Systolic Blood Pressure

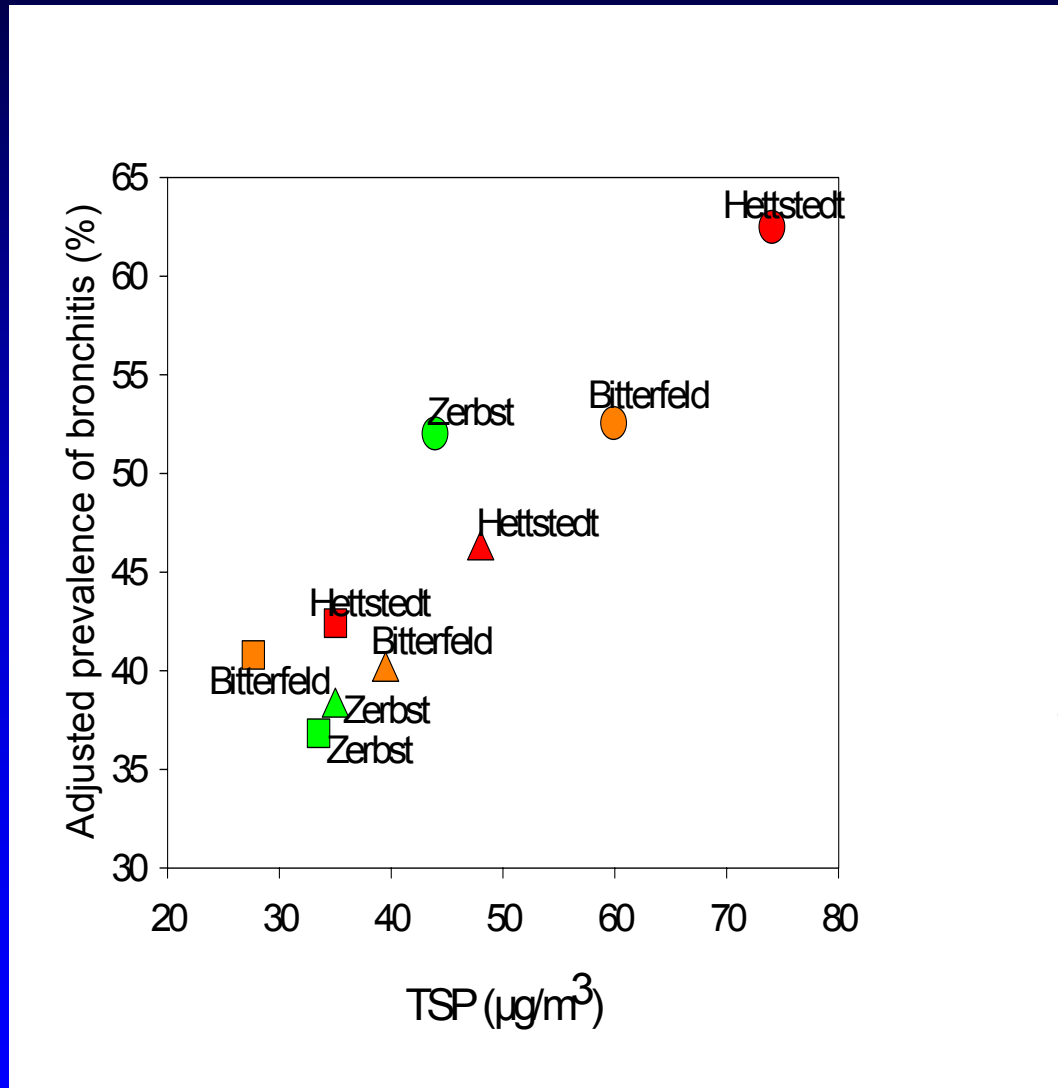


# What happens if we Improve Air Quality?



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# Adjusted prevalence of bronchitis in children and annual TSP two years prior to the examination





# Relative Risk of Death in Six US Cities during Two Follow-up Periods

