

The Health Effects of Air Pollution in Asia

Robert M. O'Keefe, Vice President
Health Effects Institute
RAQ Priorities Meeting
Bangkok
May 2004



Health Effects of Air Pollution in Asia

- Pollutants and Effects
- Source Information
- PAPA Review of Health Effects of Outdoor Air Pollution in Developing Countries of Asia
- Priorities and Gaps



The Major Air Pollutants

Emitted from vehicles, industries, other sources

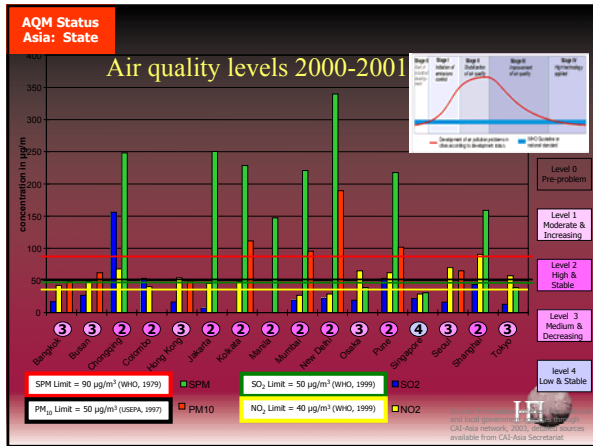
- Carbon Monoxide
- Diesel Exhaust
- Particulate Matter (PM)
- Lead
- Sulfur Dioxide
- Nitrogen Oxides (NO_x) and Hydrocarbons (HC)
 - *Precursors to Ozone and PM*
- Nitrogen Dioxide
- Air Toxics
 - Aldehydes
 - formaldehyde
 - acetaldehyde
 - others
 - Benzene
 - 1,3-butadiene
 - Methanol
 - Polycyclic organic matter (e.g. PAHs)
 - Metals (e.g. iron, cadmium, mercury, nickel, manganese)



Health Effects

- **Different Pollutants have Different Effects**
 - Carbon Monoxide - circulatory system, heart
 - Ozone - respiratory system, lung
 - Lead - nervous system, brain
 - PM - premature mortality, lung, potential effects on heart
 - Sulfur Dioxide - respiratory, possibly mortality effects
 - Diesel, Air Toxics - cancer, respiratory, reproductive, neurotoxic effects
- **There are potential effects of the Mixture**





- ## Many Sources of Air Pollution in Asia
- **Combustion**
 - Agricultural burning
 - Brick Kilns
 - Vehicles
 - Trash burning
 - Factories
 - Power generation
 - Cooking in slums
 - **Non-Combustion**
 - Agricultural cultivation
 - Street sweeping
 - Windblown sand
 - Unpaved roads
 - Paved roads (asbestos, rubber etc)
 - Construction

- ## Significant gaps in documenting sources, pollutants
- Urban & rural sources can vary significantly (Pune study will help)
 - Sources and pollutants can also vary across regions due to prevailing fuels, SES, other factors
 - Coal (SO₂, PM, metals)
 - High sulfur fuel (SO₂, PM)
 - Leaded fuel
 - High vehicle use (PM, Ozone, organic chemicals)
 - Prevailing weather patterns (dust)
 - Agriculture (dust, open burning)
 - Cooking (PM, Organic chemicals)
 - Detailed characterization of sources, pollutants needed to inform health effect analysis, effective regulation
 - Although several pollutants are common across categories

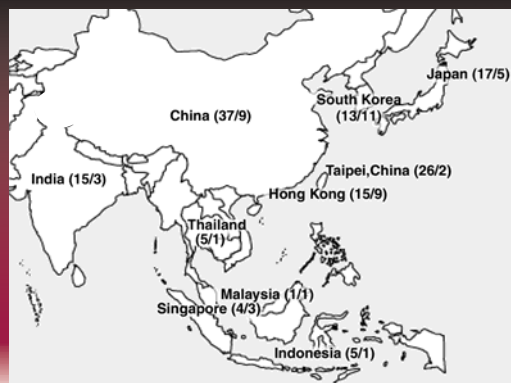
- ## PAPA: Scientific Review
- Systematic identification of all peer-reviewed Asian studies on effects of air pollution on health
 - Daily time series, cohort and panel studies collected from across Asia
 - Focus on key subset: *studies of daily changes in air pollution and health ("time series")*
 - Conduct first regional "meta analysis" to quantify risks
 - Assess what is currently known, identify gaps in understanding
 - Report Asian results in context of broader air pollution & health science

Scientific Review of the Asian Literature: *Results*

- **Significant Asian health literature exists**
 - 138 studies of air pollution and health identified across Asia
- **Studies address a wide range of health endpoints**
 - similar to the broader literature
- **Of varying quality:** most use basic epidemiology methods
 - Some (e.g. 28 time series studies) are conducted recently and of higher quality
- **Some countries studied extensively**
 - e.g. China, Korea
- **But research lacking in others**
 - e.g. India, Indonesia, Vietnam



Studies of Air Pollution and Health in Asia 1980–2003



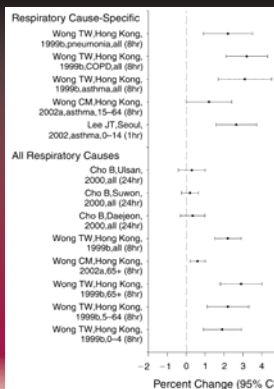
First Ever “Meta analysis” of Asian Studies of Acute Effects: *Results*

- 28 studies of daily changes in air pollution and health (“time series”) studied in depth
- Studies more recent, of higher quality
- Studies find effects of air pollution on rate of death, illness
 - ~0.5% increase per 10 $\mu\text{g}/\text{m}^3$ of PM10
 - With high levels of air pollution in Asian cities ($>100 \mu\text{g}/\text{m}^3$), this could mean a substantial public health impact
- **Limitations exist:**
 - Small number of cities studied
 - Not geographically representative (areas with high pollution, high poverty less well studied)
 - Future studies needed to address



Ozone

Figure 35
Ozone and Respiratory Hospital Admissions



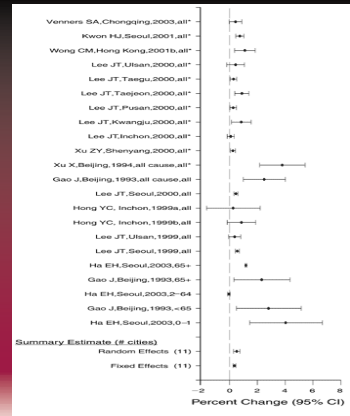
Ozone Health Effects

- Known to cause inflammation in respiratory tract
- reduces ability to breathe (lung function) for some people
- Increases hospitalization for asthma, other lung diseases
- Effects have been demonstrated for short term, long term effects are less certain
 - some people appear to develop "tolerance"



Sulfur Dioxide

Figure 37 SO₂ and All Cause Mortality

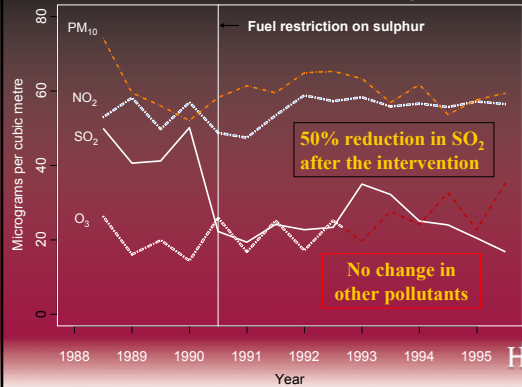


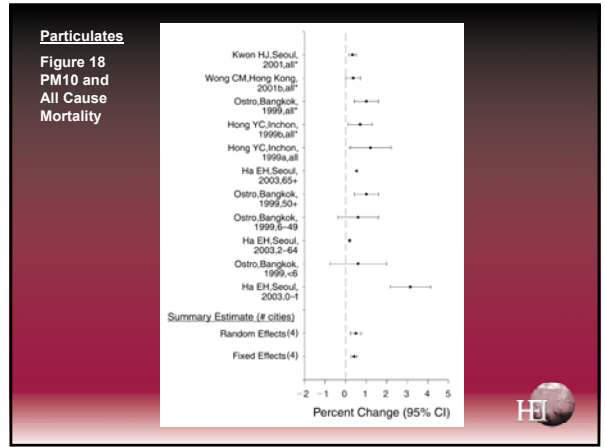
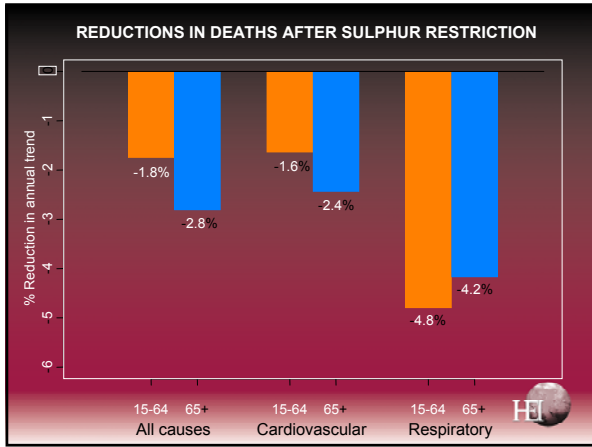
Sulfur Dioxide

- Emitted from fossil fuel combustion
 - especially from coal burning facilities, high sulfur fuels
- Can impair breathing in asthmatic children and adults
- Has been associated, along with PM, with
 - increased aggravation of heart and lung disease
 - premature mortality
- Recent study in Hong Kong (Lancet 2002) has found:
 - substantial reductions in SO₂ emissions can result in measurable improvements in mortality and illness



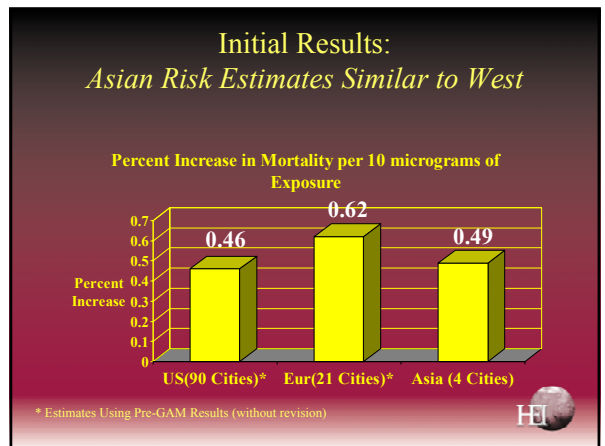
AIR POLLUTANT CONCENTRATIONS 1988 - 95 IN HONG KONG HALF YEARLY MEAN LEVELS





PM Health Effects

- High levels of PM (e.g. 500 μm^3) known to cause premature death
 - e.g. London 1952
- Recent studies in US, Europe, Asia, South America have found association of PM with death at much lower levels (<50 μm^3)
 - no evidence of a "threshold" (safe level)
- Recent progress toward identifying biological mechanism, though not conclusive



Conclusions

- Exposure to air pollution has been linked with increased death and illness
 - Most studies have been done in Europe and North America
- Asia faces significant air pollution problems today
 - Problem will grow with economic expansion
- The PAPA program is building a better base of Asian health and air pollution science
 - Review of the Asian literature found nearly 140 existing studies – partial basis for policy action
 - For small number of cities studied, effects appear to be similar to those in West



Conclusions

- Many pollutants of concern
 - CO, SO₂, PM, NO_x, Lead, Air Toxics (including metals), Ozone (VOC/NO_x)
 - *Progress made in some areas should be a factor in priorities*
- Many Sources
 - Combustion, Non Combustion
 - Regional differences exist, depending on fuels, weather patterns, industrial profile, SES, *suggesting both general and region-specific priorities*
- Greater monitoring, source characterization needed
 - To inform health impact assessment, target control measures, especially in highly populated areas
- However, several pollutants of concern common across sectors, regions.



Potential Priorities

- Pollutants associated with morbidity, mortality and found in urban, rural areas at high levels
 - Particulates
 - SO₂
 - Also recommend specific monitoring, for PM₁₀, 2.5
- Of concern but less studied in Asia
 - Ozone
 - Associated with respiratory problems, asthma exacerbation
 - May be a concern with increased vehicles, manufacturing
 - Limited monitoring in Asian cities... enhance *both urban and suburban monitoring*
 - Air Toxics
 - Benzene, metals, diesel, though monitoring difficult, expensive, even in developed regions
 - Some (not all) reductions possible with control measures for PM, Ozone



Thank You!

Bob O'Keefe
rokeefe@healtheffects.org
www.healtheffects.org

