

HEALTH EFFECTS FROM EXPOSURE TO SMOKE

Bruce K. Hope, Ph.D. Air Quality Division Oregon Department of Environmental Quality Portland, Oregon hope.bruce@deq.state.or.us



What's in smoke?

- Fine-particle pollutants
 - **PM**₁₀
 - **PM**_{10-2.5}
 - **PM**_{2.5}
 - **PM**_{0.1}
- Polycyclic aromatic hydrocarbons (PAHs)
- Carbon monoxide
- Aldehydes

- Nitrates / Sulfates
- Organic acids (e.g., formic acid)
- Semi-VOCs & VOCs
- Free radicals
- Ozone (O₃)
- Trace gases (PCDDs, methyl bromide, etc.)
- Radionuclides
- Herbicides

The air pollution mixture



Grigg, J Arch. Dis. Child. 86:79-83, 2002



Fine-particle pollutants

• PM₁₀ (thoracic particles) PM_{10-2.5} (coarse fraction) Can lodge deep in lungs; less harmful • PM₂ (fine particles) 70-95% of smoke particles Can more easily penetrate lungs; not harmless PM₀₁ (ultrafines) Can enter bloodstream and brain; not harmless **Better correlation with adverse health effects**

Idealized size distribution of smoke



from U.S. EPA Air Quality Criteria for Particulate Matter (October 2004)



What makes PM_{2.5} dangerous?

Size?

 Tiniest particles are most potent

Chemistry?
 What's on or in the particle?
 Metal content?

Combination of both?





Assessing health impacts



from U.S. EPA Air Quality Criteria for Particulate Matter (October 2004)

Level and duration of exposure
Susceptibility of exposed populations



Sensitive populations

- Asthmatics
- Children (pre- & post-natal)
- Pregnant women
- Elderly (age > 65 years)
- Smokers
- Individuals with pre-existing conditions
 - Cardiopulmonary diseases
 - Chronic obstructive pulmonary disease
 - Cardiovascular disease

Level and duration of exposure



from U.S. EPA Air Quality Criteria for Particulate Matter (October 2004)



Emissions (PM₁₀ - 1999)





Emissions (PM_{2.5} - 1999)





Short-term exposures

Coughing and difficulty breathing

Decreased lung function

Aggravated asthma and bronchitis

Increased ER and hospital visits



Long-term exposures

Deaths per day **0.21%** û per 10 μg m⁻³ û in PM₁₀ Long-term risk of dying **4%** û per 10 μg m⁻³ û in annual PM_{2.5} Other Similar to 2° smoke in causing cancer Tentatively linked to systemic and genetic effects in newborns Adversely affects heart (Δ rhythm, block flow)



Some unresolved issues

- Lack of demonstrated biological mechanisms for PM-related effects
- Confounding by co-pollutants (e.g., air toxics)
- Characterization of daily & annual background concentrations
- Exposure estimates performed outdoors
 50-60% of indoor PM_{2.5} from domestic sources



Summary

PM_{2.5} & ultrafines appear to be the issue

Short-term exposures

General population – transient health impacts

 Sensitive populations – potentially more serious health impacts

Long-term exposures

May lead to serious health impacts, in both general & sensitive populations