US ERA ARCHIVE DOCUMENT

BAQS: Windsor, Ontario Exposure Assessment Studies - Update

October 2008

Santé

Canada

Detroit, Michigan

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INTRODUCTION

Spatial Studies

- 2004
- 2005
- 2006

Personal Exposure Assessments

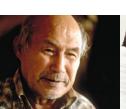
- 2005 Healthy Adults
- 2006 Asthmatic Children

Respiratory Health Effects

- 2004 Survey
- 2005 Cross Sectional Lung Function
- 2005 Longitudinal Lung Function

Cardiovascular Health Effects

- 2005 Diabetics
- 2007 Seniors









STUDY DESIGN - Spatial

Integrated 2-week sampling sessions

4 seasons in each of 2004, 2005 and 2006

150 sampling sites

between 1 and 8 seasons at each site (typically 50 sites per year)

Pollutants

NO₂ – Ogawa (2004)

PM_{2.5} – PEM 1.8 LPM; Abs Coeff. – smokestain reflectance of PM_{2.5}

PM_{2.5-10} – Harvard Cascade Impactor

Acid vapour (acetic, formic, nitric) – filter pack

Volatile Organic Compounds (VOCs) – 3M Badge (2004)

Polycyclic Aromatic Hydrocarbons (PAH) – URG pesticide sampler









Available online at www.sciencedirect.com



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Environmental Research

www.elsevier.com/locate/envres

Intra-urban variability of air pollution in Windsor, Ontario— Measurement and modeling for human exposure assessment [☆]

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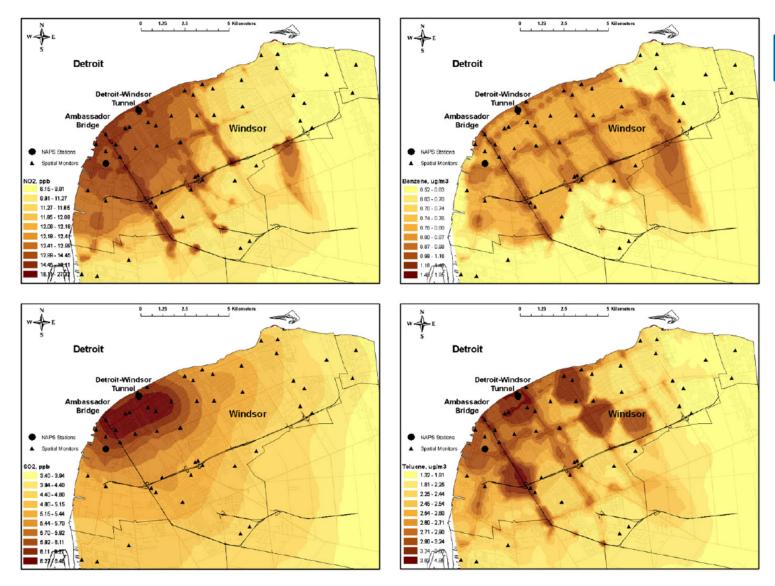


Fig. 1. Land-use regression maps for NO_2 , SO_2 , benzene, and toluene.



Association between ambient pollutants and land-use variables: multiple linear regression models using the 'maximum R2 improvement' technique

	Variable					
	Unit	β	Std. error	t-Value	P-value	
NO_2 , R^2 is 0.77						
Intercept		14.8573	0.44027	33.75	<.0001	
Distance to Ambassador Bridge	km	-0.49270	0.05501	-8.96	<.0001	
Length of Expressways and Highways within 50 m	km	38.46239	6.83256	5.63	<.0001	
Length of major roads within 100 m	km	5.60590	1.61525	3.47	0.0011	
SO_2 , R^2 is 0.69						
Intercept		5.9519	0.35173	16.92	<.0001	
Distance to Ambassador Bridge	km	-0.14850	0.02897	-5.13	<.0001	
Dwelling density within 1500 m	dwellings/km ²	0.0005	0.00022	2.29	0.0263	
Detroit SO ₂ emission point sources within 3000 m		0.6089	0.22133	2.75	0.0083	
Benzene, R^2 is 0.73						
Intercept		0.5246	0.03980	13.18	<.0001	
Length of major roads within 100 m	km	0.81248	0.16644	4.88	<.0001	
Length of expressways and primary highways within 50 m	km	2.46169	0.67963	3.62	0.0007	
Detroit VOC emission point sources within 4000 m		0.1861	0.04277	4.35	<.0001	
Windsor VOC emission point sources within 3000 m		0.2716	0.04407	6.16	<.0001	
Toluene, R^2 is 0.46						
Intercept		2.9685	0.26646	11.14	<.0001	
Distance to Ambassador Bridge	km	-0.09604	0.03129	-3.07	0.0035	
Length of major roads within 200 m	km	0.67806	0.34554	1.96	0.0554	
Length of primary highways within 100 m	km	2.49724	1.13792	2.19	0.0330	
Windsor VOC emission point sources within 1000 m		0.8264	0.28675	2.88	0.0059	











Establishing the spatial variability of ambient nitrogen dioxide in Windsor, Ontario

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Winter 2004 NO₂ LUR INCLUDED TRAFFIC COUNT DATA $R^2 = 0.88$









PROXIMITY TO MAJOR ROADS (≤300m vs. ≥ 300m)

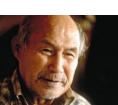
- NO₂ concentrations: 15.0 (5.5) ppb vs 12.9 (5.0) ppb
- Significant associations between:

 $- NO_2$ and $PM_{2.5}$: 0.18 vs 0.40

NO₂ and Abs Coeff: 0.23 vs 0.49

- NO₂ and Benzene: 0.34 vs 0.39

NO₂ and PAH: 0.40 vs non-significant





FUTURE PLANS – Spatial

- Investigate associations between NO₂ and other geographic predictors using similar distances from sources
- Incorporate traffic count and vehicle fleet data to identify if diesel vehicles are responsible for these associations
- Undertake further spatial data collection in other locations to investigate whether these associations can be reproduced





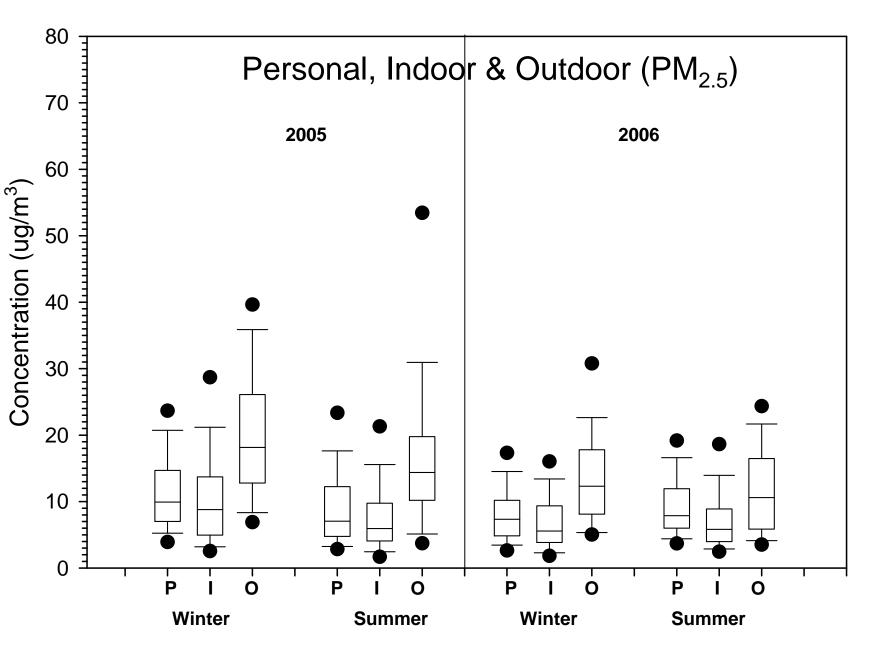


STUDY DESIGN - Personal Exposure Assessment

- 48 Healthy adults (2005)
- 51 asthmatic children aged 10 13 years (2006)
- Two seasons (5 x days winter and summer) for a total of 10 days of repeated measures for each individual
- Children completed peak flow measurements
- Personal monitoring 24 hour average exposures to:
 - $-PM_{2.5}$, EC, NO_2 and O_3
- Indoor & outdoor measures for the same pollutants were collected
- Continuous PM_{2.5} pDR (personal 2006), Dust Traks (indoor & outdoor)
- Self-reported daily activities and symptoms (2006), housing characteristics, and proximity to sources were collected







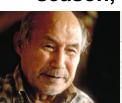
Location by Season and Year

Peak Flow Results: FEV₁

		Per IQR increase of PM2.5				
		Estimate	LCI95	UCI95	StdErr	Probt
	Averaging time lag					
Winter (Jan -March)	Past 0- 4 hours	0.016	-0.016	0.048	0.017	0.335
	Past 0-8 hours	-0.011	-0.044	0.022	0.017	0.521
	Past 0- 12 hours	-0.021	-0.063	0.021	0.022	0.329
	Past 0- 24 hours	-0.020	-0.079	0.038	0.030	0.495
Summer (July - Aug)	Past 0- 4 hours	0.003	-0.014	0.021	0.009	0.724
	Past 0-8 hours	-0.001	-0.024	0.021	0.011	0.922
	Past 0- 12 hours	-0.004	-0.025	0.017	0.011	0.702
	Past 0- 24 hours	-0.008	-0.032	0.016	0.012	0.509

Using a mixed model with random intercept and fixed slope.

Associations were adjusted for personal past 24-hour mean temp & RH, day of week, season, use of SABA/ICS









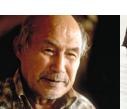
Symptoms results

					_	
	Winter			Summer		
Time	OR	LowerCL	UpperCL	OR	LowerCL	UpperCL
Past 0-4 Hr	1.19	1.03	1.37	0.97	0.86	1.10
Past 0-8 Hr	1.16	0.98	1.36	0.95	0.82	1.10
Past 0-12 Hr	1.42	1.09	1.84	0.95	0.79	1.13
Past 0-24 Hr	1.13	0.96	1.33	0.94	0.74	1.18
Past 0-4 Hr	0.65	0.42	1.00	0.59	0.33	1.05
Past 0-8 Hr	0.72	0.46	1.12	0.61	0.35	1.05
Past 0-12 Hr	0.70	0.43	1.15	0.52	0.31	0.87
Past 0-24 Hr	0.60	0.26	1.38	0.32	0.16	0.64
Past 0-4 Hr	1.08	0.91	1.29	0.93	0.75	1.16
Past 0-8 Hr	1.02	0.80	1.29	0.87	0.67	1.12
Past 0-12 Hr	1.00	0.71	1.41	0.83	0.61	1.13
Past 0-24 Hr	1.01	0.77	1.33	0.55	0.32	0.97
Past 0-4 Hr	1.01	0.89	1.15	1.01	0.92	1.11
Past 0-8 Hr	1.00	0.86	1.15	1.00	0.91	1.11
Past 0-12 Hr	0.95	0.74	1.22	0.98	0.85	1.13
Past 0-24 Hr	1.04	0.92	1.17	0.86	0.55	1.34
	Past 0-4 Hr Past 0-8 Hr Past 0-12 Hr Past 0-24 Hr Past 0-8 Hr Past 0-12 Hr Past 0-12 Hr Past 0-4 Hr Past 0-8 Hr Past 0-12 Hr Past 0-12 Hr Past 0-12 Hr Past 0-4 Hr Past 0-4 Hr Past 0-4 Hr Past 0-4 Hr Past 0-8 Hr Past 0-8 Hr Past 0-8 Hr Past 0-12 Hr	Past 0-4 Hr 1.19 Past 0-8 Hr 1.16 Past 0-12 Hr 1.42 Past 0-24 Hr 1.13 Past 0-4 Hr 0.65 Past 0-8 Hr 0.70 Past 0-12 Hr 0.70 Past 0-24 Hr 1.08 Past 0-4 Hr 1.08 Past 0-8 Hr 1.02 Past 0-12 Hr 1.00 Past 0-24 Hr 1.01 Past 0-4 Hr 1.01 Past 0-8 Hr 1.00 Past 0-8 Hr 1.00 Past 0-95	Past 0-4 Hr1.191.03Past 0-8 Hr1.160.98Past 0-12 Hr1.421.09Past 0-24 Hr1.130.96Past 0-4 Hr0.650.42Past 0-8 Hr0.720.46Past 0-12 Hr0.700.43Past 0-24 Hr0.600.26Past 0-4 Hr1.080.91Past 0-8 Hr1.020.80Past 0-12 Hr1.000.71Past 0-24 Hr1.010.77Past 0-4 Hr1.010.89Past 0-8 Hr1.000.86Past 0-12 Hr0.950.74	Past 0-4 Hr 1.19 1.03 1.37 Past 0-8 Hr 1.16 0.98 1.36 Past 0-12 Hr 1.42 1.09 1.84 Past 0-24 Hr 1.13 0.96 1.33 Past 0-4 Hr 0.65 0.42 1.00 Past 0-8 Hr 0.72 0.46 1.12 Past 0-12 Hr 0.70 0.43 1.15 Past 0-24 Hr 0.60 0.26 1.38 Past 0-4 Hr 1.08 0.91 1.29 Past 0-8 Hr 1.02 0.80 1.29 Past 0-12 Hr 1.00 0.71 1.41 Past 0-4 Hr 1.01 0.77 1.33 Past 0-4 Hr 1.01 0.89 1.15 Past 0-8 Hr 1.00 0.86 1.15 Past 0-12 Hr 0.95 0.74 1.22	Past 0-4 Hr 1.19 1.03 1.37 0.97 Past 0-8 Hr 1.16 0.98 1.36 0.95 Past 0-12 Hr 1.42 1.09 1.84 0.95 Past 0-24 Hr 1.13 0.96 1.33 0.94 Past 0-24 Hr 0.65 0.42 1.00 0.59 Past 0-8 Hr 0.72 0.46 1.12 0.61 Past 0-12 Hr 0.70 0.43 1.15 0.52 Past 0-24 Hr 0.60 0.26 1.38 0.32 Past 0-4 Hr 1.08 0.91 1.29 0.93 Past 0-8 Hr 1.02 0.80 1.29 0.87 Past 0-12 Hr 1.00 0.71 1.41 0.83 Past 0-4 Hr 1.01 0.77 1.33 0.55 Past 0-8 Hr 1.00 0.86 1.15 1.00 Past 0-12 Hr 0.95 0.74 1.22 0.98	Past 0-4 Hr 1.19 1.03 1.37 0.97 0.86 Past 0-8 Hr 1.16 0.98 1.36 0.95 0.82 Past 0-12 Hr 1.42 1.09 1.84 0.95 0.79 Past 0-24 Hr 1.13 0.96 1.33 0.94 0.74 Past 0-4 Hr 0.65 0.42 1.00 0.59 0.33 Past 0-8 Hr 0.72 0.46 1.12 0.61 0.35 Past 0-12 Hr 0.70 0.43 1.15 0.52 0.31 Past 0-24 Hr 0.60 0.26 1.38 0.32 0.16 Past 0-4 Hr 1.08 0.91 1.29 0.93 0.75 Past 0-8 Hr 1.00 0.71 1.41 0.83 0.61 Past 0-12 Hr 1.01 0.77 1.33 0.55 0.32 Past 0-4 Hr 1.01 0.89 1.15 1.01 0.92 Past 0-8 Hr 1.00 0.86 1.15 1.00 0.91<



Conclusions

- Only a small number of children required the use of any asthma medications
- Peak flow meters are not as sensitive as spirometry
- Symptoms data indicate an increase in cough with increased exposure to PM_{2.5}
 - Self reported data
- Less PM_{2.5} variability over a 5 day period especially when it is a regional pollutant for this city







Future Plans - Lung health & personal monitoring

- Separate the PM_{2.5} exposures into ambient and indoor source fractions
 - Ambient sourced PM has been implicated in greater impacts upon health
- Investigate relationship between respiratory health and other pollutants included in the study
- Investigate personal, indoor and outdoor air pollution sources and exposures with health effects
- Plan future studies using spirometry and longer time periods of exposure







2004: SURVEY RESULTS

The adjusted OR comparing the highest to the lowest roadway density quintiles, were statistically significant for:

- Wheeze 1.23 (95%Cl 1.07-1.41) (p=0.004),
- Wheeze with dyspnea 1.27 (95%CI 1.05-1.52) (p=0.013)

No associations with cough, chest illness or asthma.

Roadway density expressed as a continuous variable:

 Asthma OR 1.08 (95%CI 1.012-1.149) for 0.6km increase in roadway density within 200m of home address

Accepted in J.Occupational & Environmental Monitoring



2005: CROSS SECTIONAL LUNG HEALTH

- Each kilometer of roadway (local, major, highway) within 200m radius of the home resulted in an increase in eNO of 10.1% (p=0.002)
 - Each kilometer of local roadway within a 200m radius of the home was associated with a 6.8% increase in eNO (p=0.045)
- Associations between roadway density, and both FEV₁ and FVC were negative but not statistically significant at p < 0.05
- Each µg/m³ increase in PM_{2.5} using fixed site data was associated with a 3.9% increase in eNO (p=0.058) and 0.70% decrease in FVC expressed as a percentage of predicted (p=0.39)
- From LUR estimates of NO₂, SO₂, black smoke and coarse PM there were positive but non-significant associations with eNO

doi:10.1289/ehp.10943 (available at http://dx.doi.org/)
Online 1 August 2008 (Environmental Health Perspectives)



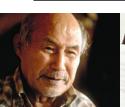




STUDY DESIGN – 2005 Longitudinal

- Participants: 182 asthmatic children, ages 9-14
- **Health tests:** once weekly, for 4 weeks
 - Spirometry
 - Exhaled NO (FeNO)
 - Exhaled breath condensate to determine TBARS, 8isoprostane, and IL-6
- Air Monitoring: Daily SO₂, NO₂, O₃, PM_{2.5} from two stations
- Statistical analyses: Mixed-effects regression models, adjusting for confounding of weather, season, asthma medications, co-pollutants.

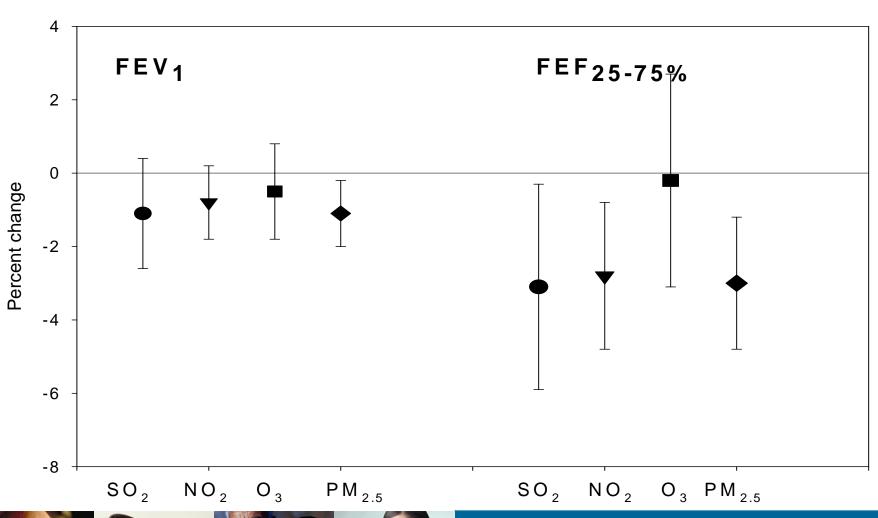
Revisions under review in Environmental Health Perspectives







PULMONARY FUNCTION



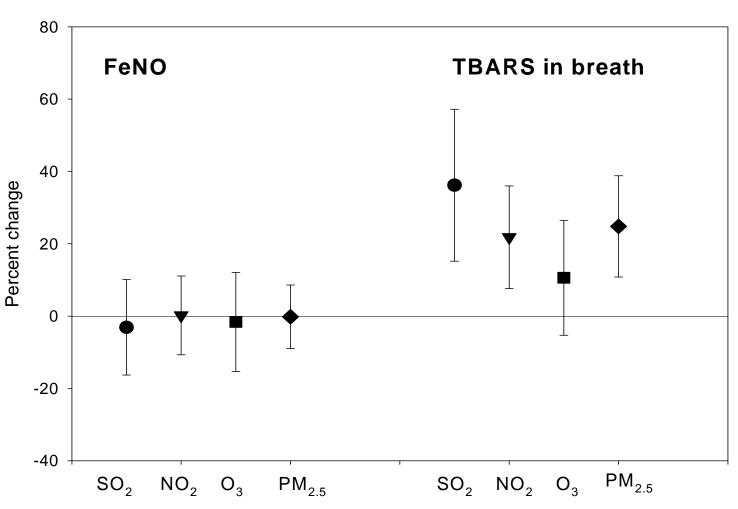








INFLAMMATION AND OXIDATIVE STRESS











Influence of Personal Exposure to Particulate Air Pollution on Cardiovascular Physiology and Biomarkers of Inflammation and Oxidative Stress in Subjects With Diabetes

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SUMMARY OF FINDINGS

Air pollution (Personal PM_{10}):

- Elevated blood pressure
- Elevated heart rate
- Reduced basal arterial diameter and flow
- Elevated oxidative stress
- CV medications seem to help reduce the risk of PM

Data analysis on seniors' health study is underway





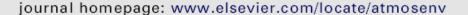


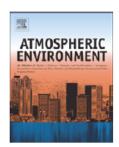
Atmospheric Environment 42 (2008) 5905-5912



Contents lists available at ScienceDirect

Atmospheric Environment





Predicting personal exposure of Windsor, Ontario residents to volatile organic compounds using indoor measurements and survey data

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PLANNED / IN PROGRESS MANUSCRIPTS

Factors influencing the correlations between nitrogen dioxide and other ambient airborne pollutants across four seasons in Windsor, Ontario

Indoor and outdoor sources of continuous PM_{2.5} personal monitoring and lung health of asthmatic children

Factors influencing the infiltration of PM_{2.5} mass and its components in Windsor, Ontario residences

Factors influencing infiltration of particulates into residences

An Analysis of PM_{2.5} Sampler Inter-Comparisons Performed in Exposure Assessment Studies by Health Canada

Predicting personal exposures for children and adults

Air pollution exposure and senior's cardiovascular health effects

Oxidative stress and exposures to transition metals: Asthmatic children's lung health effects









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