

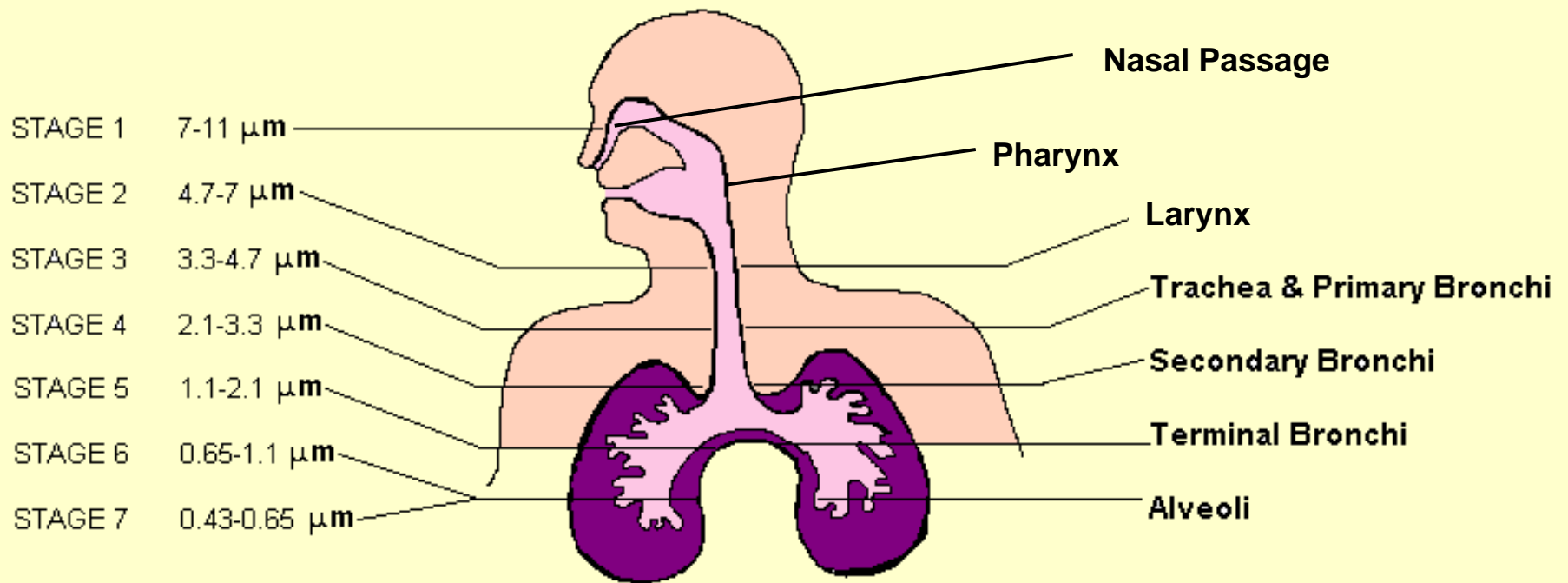
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Health Effects of PM Pollution

Increase in

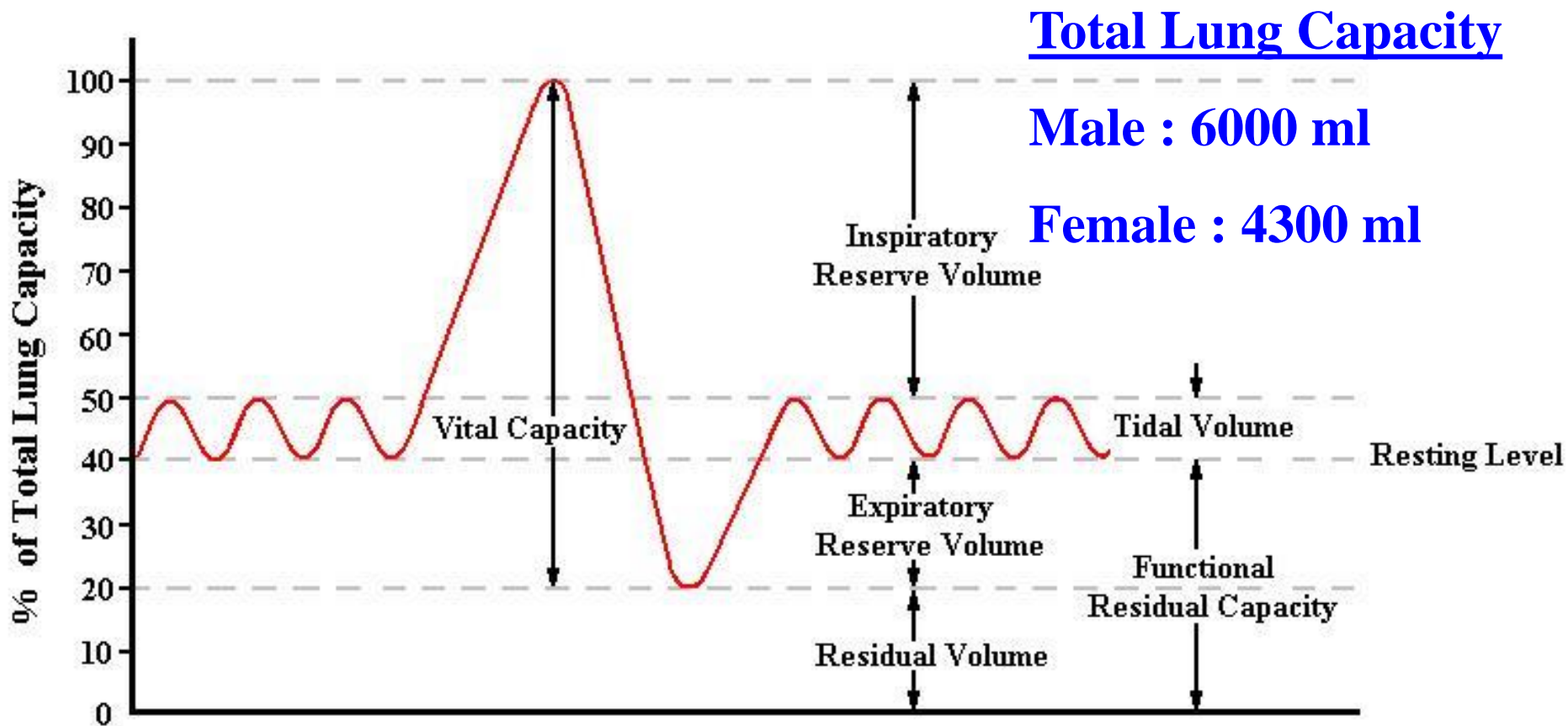
- Mortality
- Hospital admissions
- Respiratory symptoms (cough etc)
- Moderate or worse asthma status
- Changes in pulmonary function
- Days of work loss

Deposition of Particulate Matter in Respiratory system



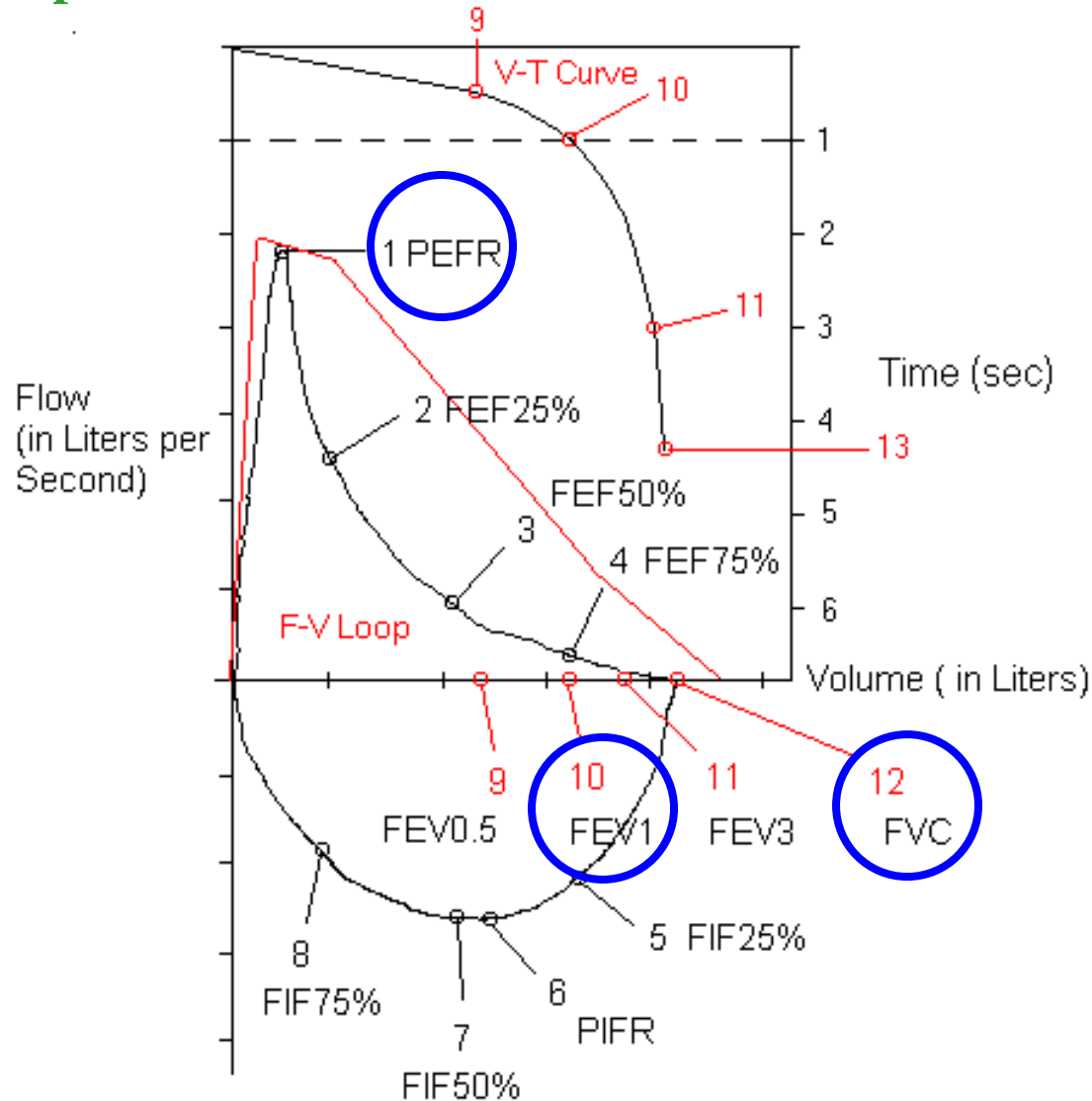
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Terminology Used – Lung Function Parameters



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Flow Volume Loop and Volume Time Curve



Pulmonary Function Testing



Spirobank G, MIR



Personal Best-PEF Meter

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PEFR – Peak Expiratory Flow Rate

FEV₁ – Forced Expiratory Volume in One Second

FVC – Forced Vital Capacity

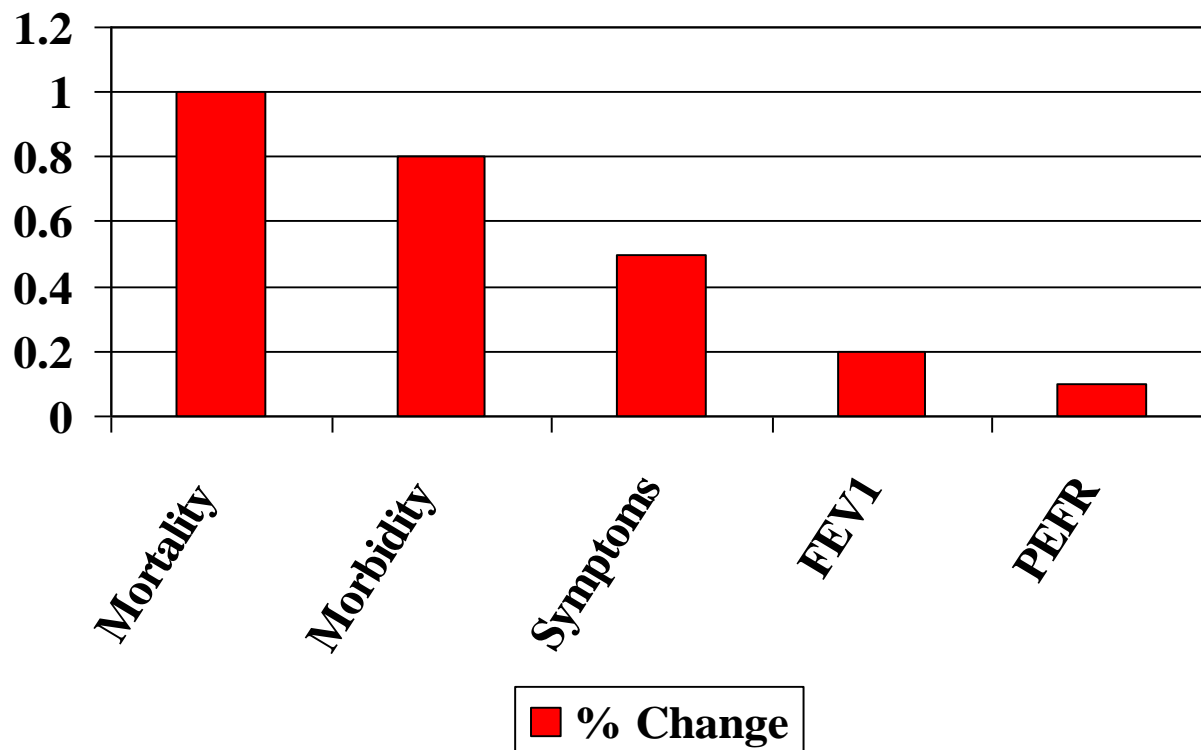
☛ Importance of PEFR

➤ **Asthma** = Troublesome Breathing due to inflammation and constriction of airways

- recommended > 80% of the predicted value
- lower value, aggravation of asthma

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Health Effects of PM Pollution

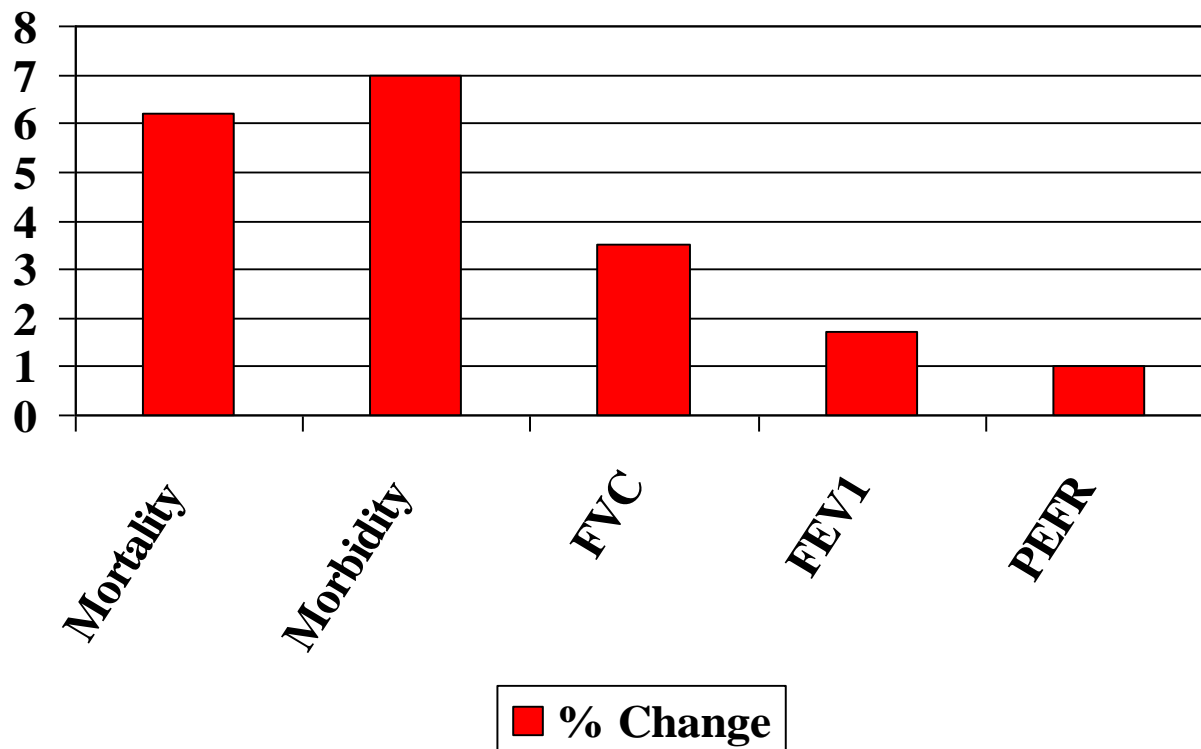


Summary of Acute exposure studies - % change per 10 µg/m³ of change in PM₁₀

Pope and Dockery (1999)

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Health Effects of PM Pollution



Summary of Chronic exposure studies - % change per 5 µg/m³ of change in PM_{2.5}

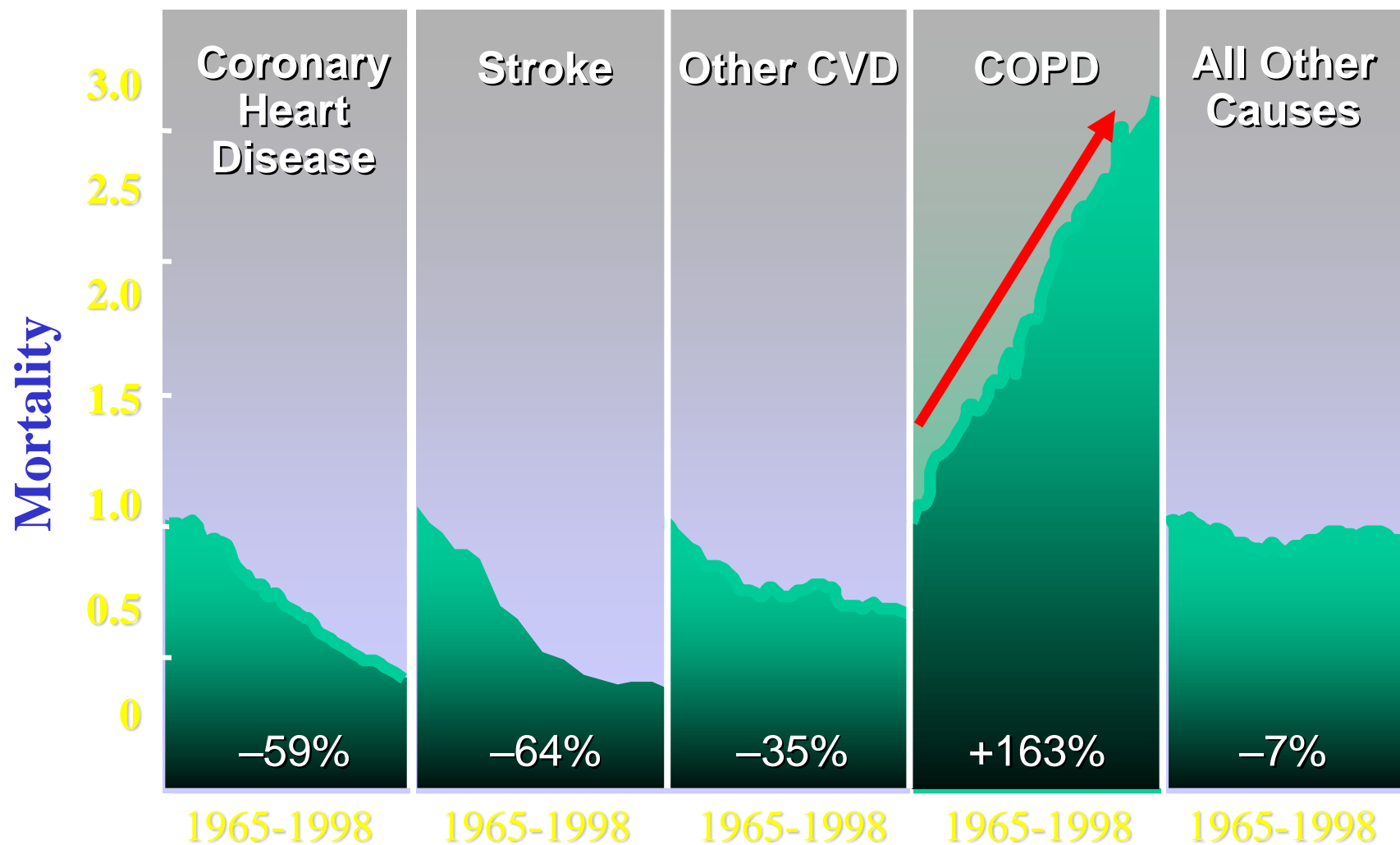
Pope and Dockery (1999)

➤ Importance of FEV_1 and FVC in diagnosis

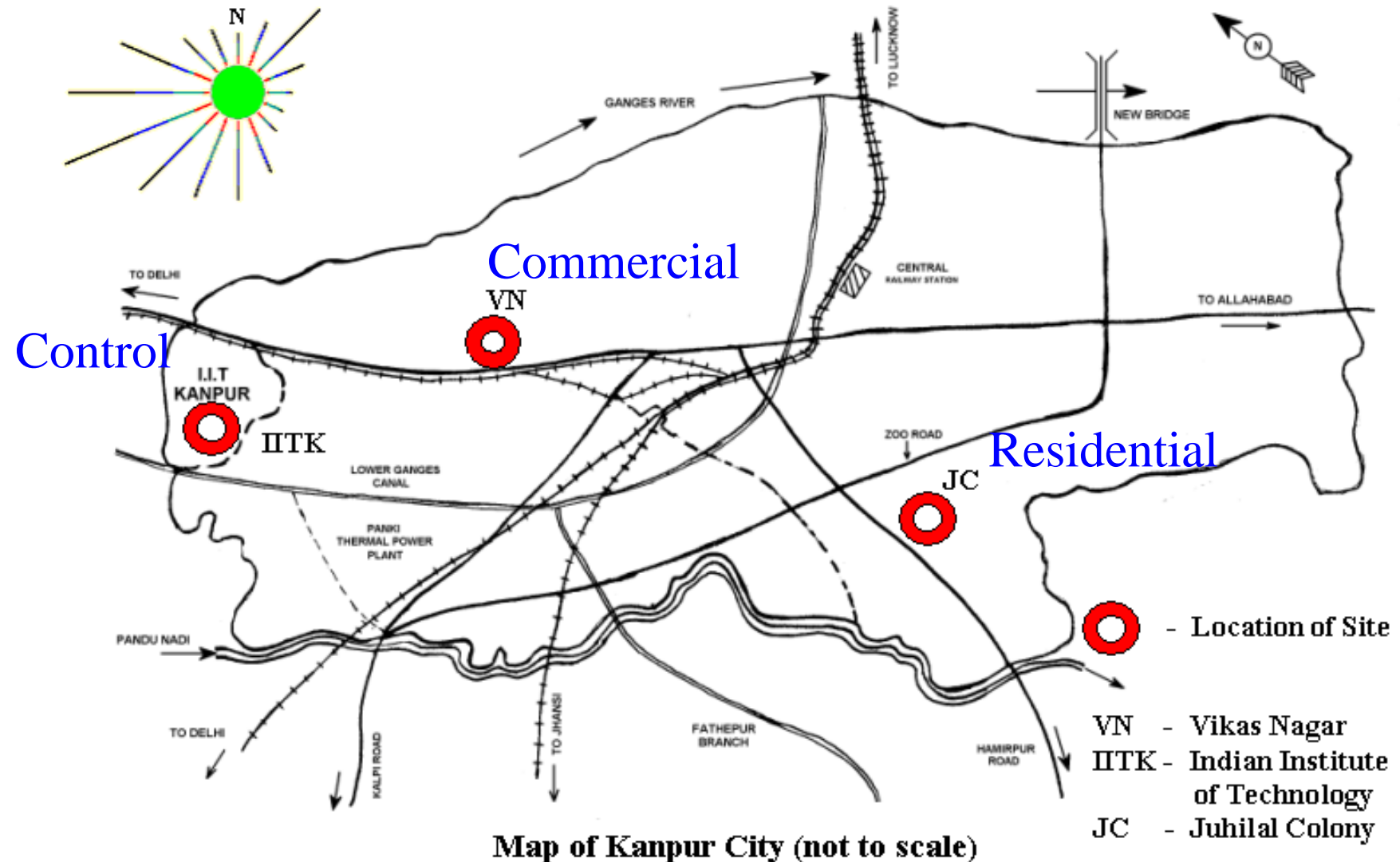
- **Obstructive Lung Disease** = unable to get air out
 - $FEV_1/FVC < 70-75\%$ (70% used in COPD) – low FEV_1
 - The lower the ratio, the worse the obstruction

- **Restrictive Lung Disease** = unable to get air in
 - Low FVC; normal or elevated FEV_1/FVC
 - Low TLC

Continued...



Study Area and Sites



Summary of PM₁₀ and PM_{2.5} levels at various locations

Air Quality Parameter	Cohort Site		
	Juhilal Colony	Vikas Nagar	IIT Kanpur
PM ₁₀ (µg/m ³)	293 ± 90	295 ± 57	184 ± 40
PM _{2.5} (µg/m ³)	85 ± 30	162 ± 19	59 ± 9

- IIT Kanpur site (PM₁₀: 132-249 µg/m³; PM_{2.5}: 39-71 µg/m³)
- Vikas Nagar site (PM₁₀: 181-436 µg/m³; PM_{2.5}: 125-188 µg/m³)
- Juhilal colony (PM₁₀: 179-495 µg/m³; PM_{2.5}: 50-153 µg/m³).

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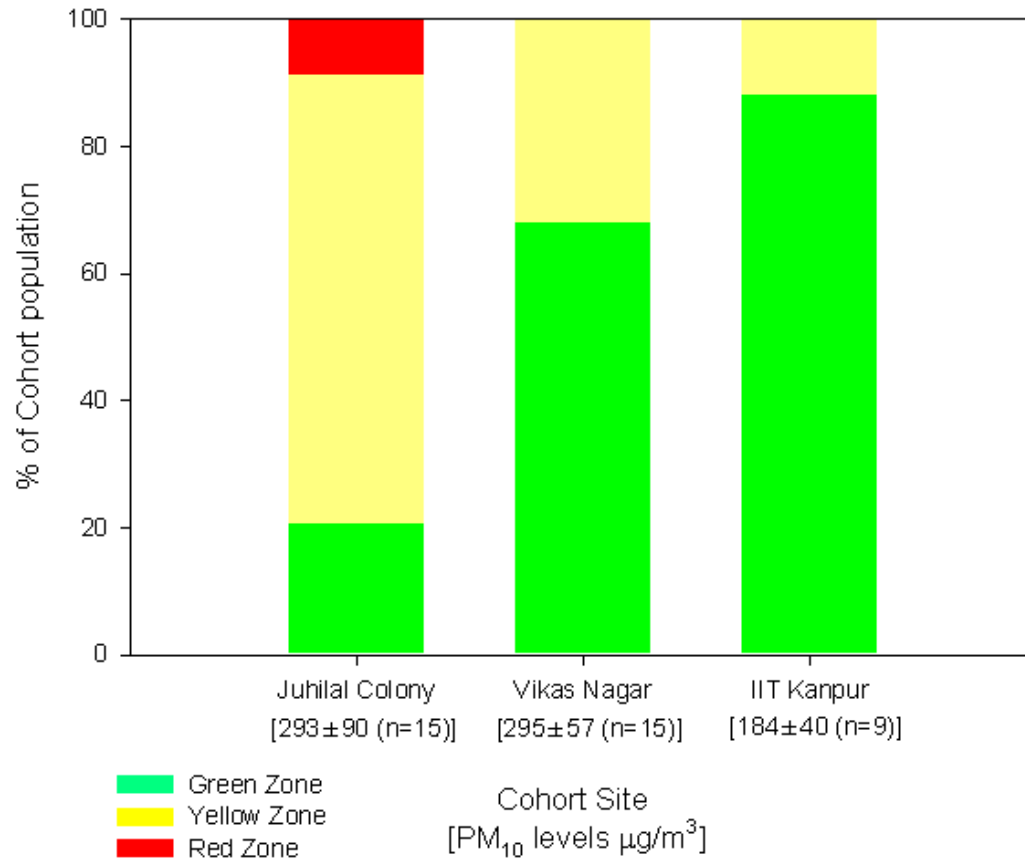
- Daily PEFr readings were collected for a period of 15 days concurrent to the Air Quality Monitoring for each cohort

- One time complete pulmonary function test were conducted on each individual of cohort with Spirobank-G to observe the general trend in FEV_1 and FVC

Results

Baseline lung status of Cohort Group

Baseline PEFR Values of Cohorts



Green Zone – Observed PEFR value is ≥ 80 % of the predicted value of individual; no symptoms of asthma.

Yellow Zone – Observed PEFR value is ≥ 50 % & < 80 % of the predicted value; beginning of asthma.

Red Zone - Observed PEFR value < 50 % of the predicted value; needs medical attention.

NIH (1997)

In general Prevalence of Asthma is more in the polluted areas.

Results

Analysis of PEFR Data

It is not advisable to directly examine one to one association between PEFR and PM_{10} and $PM_{2.5}$ of all individual as a group as the absolute value of PEFR of an individual depends on body responses and body parameters like height, age, sex and other confounding factors.

Δ PEF with PM_{10} and $PM_{2.5}$ was checked

1. The mean PEFR (L/min) for each participant was calculated for 15-day period.
2. Individual deviations of daily performance from each participant's mean PEFR were calculated.
3. These deviations were averaged across participants individually to obtain a daily mean deviation, Δ PEF.

Results

	Day1	Day2	..Day15	Mean	Day1	Day2	..Day15
P1	PEF1	PEF2	..PEF15	PEFR	Δ PEF1	Δ PEF2	Δ PEF15
P2	:	:	:	:	:	:	:
:	:	:	:	:	:	:	:
P33	:	:	:	:	:	:	:
Mean Δ PEF					Δ PEF1	Δ PEF2	Δ PEF15

**while looking at Δ PEF, one can look into the variation of PEFR of an individual with respect to his/her mean PEFR performance
Suggested by Pope and Dockery (1992)**

Results

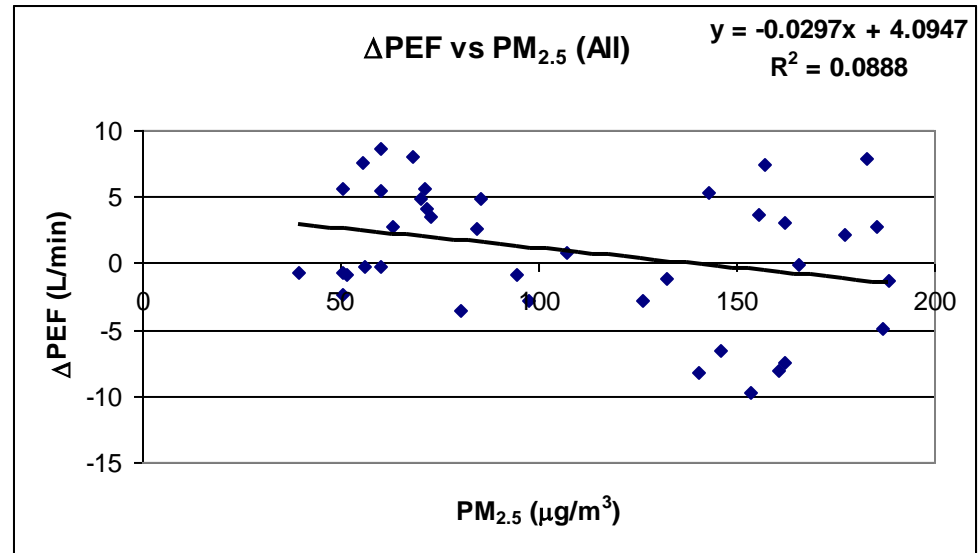
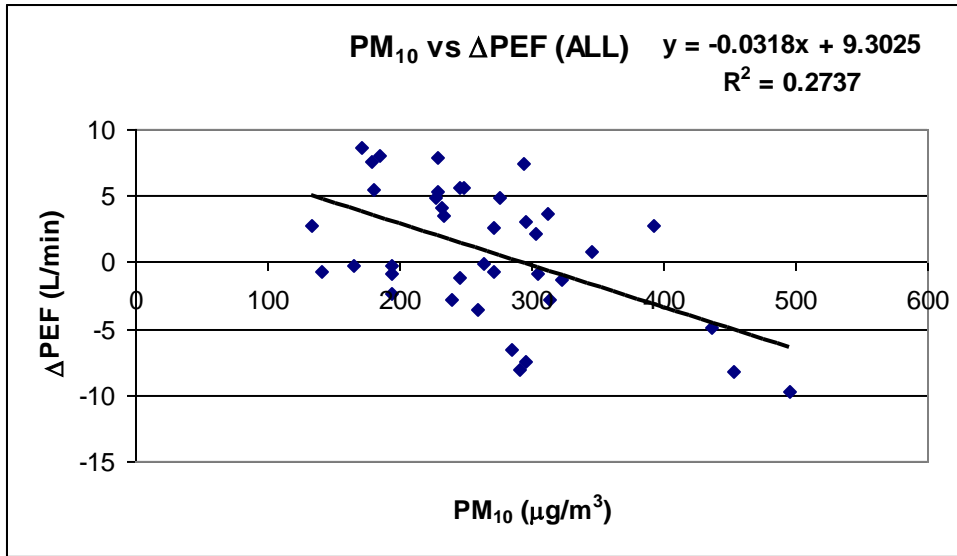
Correlation between mean Δ PEF and four parameters - PM_{10} , $PM_{2.5}$, PM_{10} (one-day lagged) and $PM_{2.5}$ (one-day lagged)

Parameter	Δ PEF	PM_{10}	$PM_{2.5}$	PM_{10} (One-day lag)	$PM_{2.5}$ (One-day lag)
Δ PEF	1				
PM_{10}	-0.52				
$PM_{2.5}$	-0.30				
PM_{10} (One-day lag)	-0.32	0.45	0.49	1	
$PM_{2.5}$ (One-day lag)	-0.27	0.46	0.88	0.67	1

deposition of larger particles (PM_{10}) takes place in upper part of respiratory system that activates mucus secretion resulting is inflammation & constriction of airways and thus lowering PEF value

All values are statistically significant ($p < 0.05$) – n = 39

Results



Results

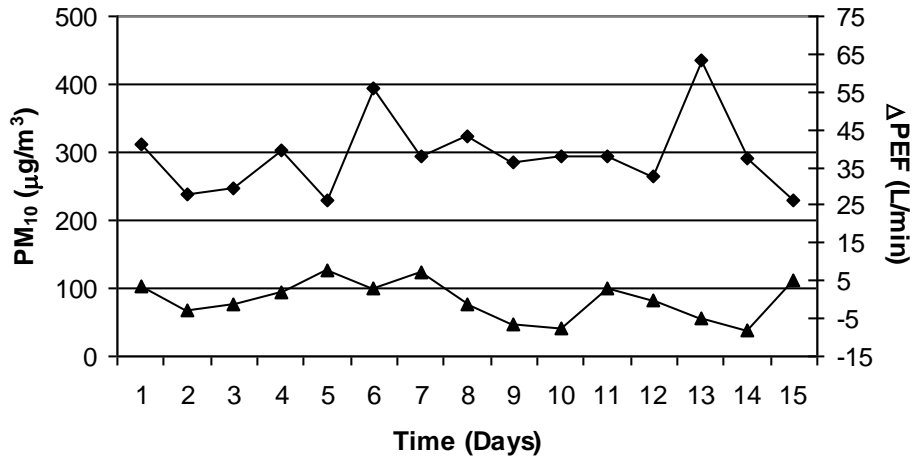
Estimated Regression Coefficients and their Comparison

	This Study		Pope and Dockery (1992)			
	Model I (n=39)	Model II (n=39)	Symptomatic (n = 100)		Asymptomatic (n=100)	
			Model I	Model II	Model I	Model II
PM₁₀ (concurrent day, µg/m ³)	-0.0318 (9.025)	-	-0.0175 (0.6006)	-	-0.0110 (-3.606)	-
PM_{2.5} (concurrent day, µg/m ³)	-	-0.0297 (4.0947)	-	-	-	-
PM₁₀ (5-day moving average)	-	-	-	-0.0359 (2.0934)	-	-0.0254 (-2.504)

Value in parenthesis is the intercept. (n represents number of sampling days)

Variation of Δ PEF with PM_{10} and $PM_{2.5}$

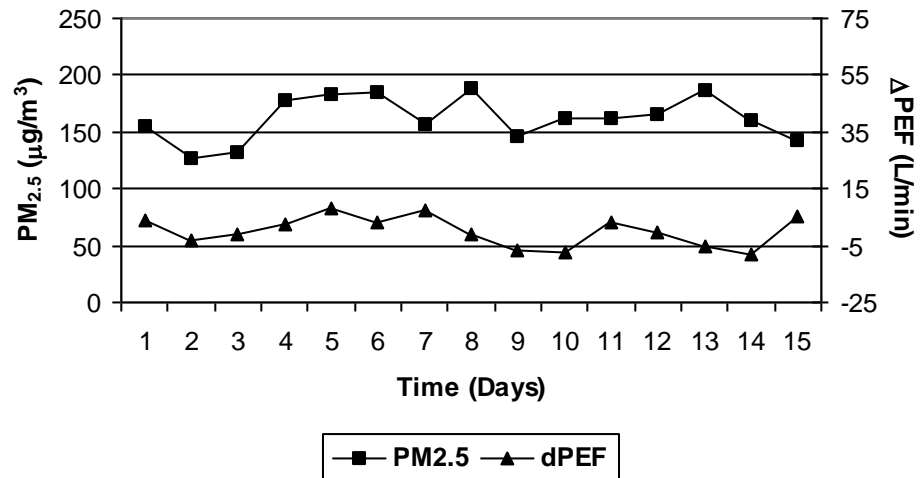
PM_{10} , Δ PEF vs Time (Cohort - VN Site)



Change in daily PM_{10} levels and mean Δ PEF at VN

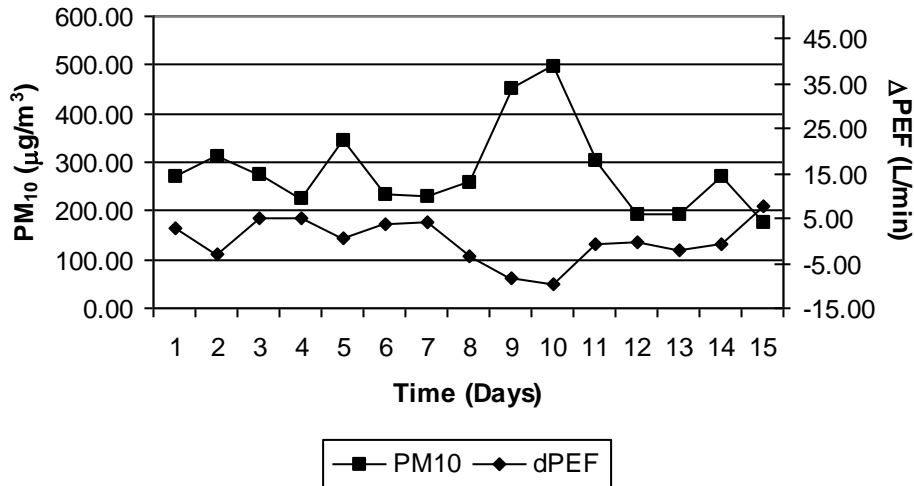
Change in daily $PM_{2.5}$ levels and mean Δ PEF at VN

$PM_{2.5}$, Δ PEF vs Time (Cohort - VN Site)



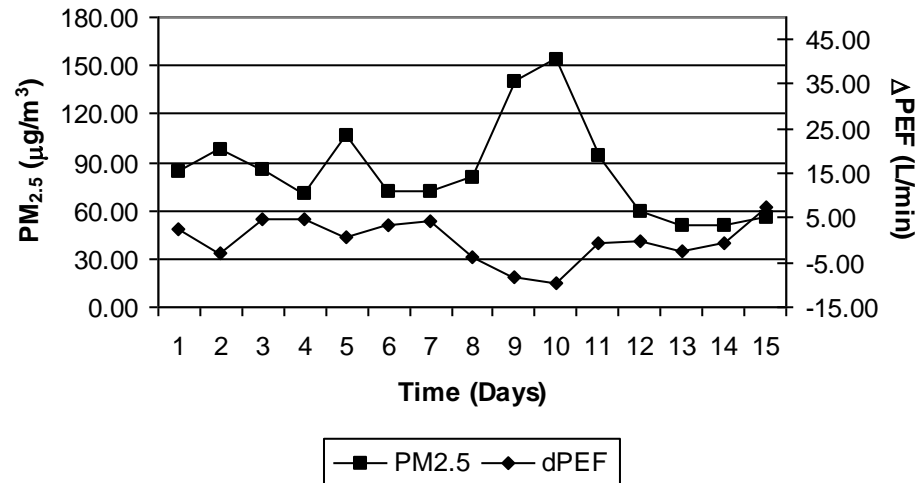
Variation of Δ PEF with PM_{10} and $PM_{2.5}$

PM_{10} , Δ PEF vs Time (Cohort- JC Site)



Change in daily PM_{10} levels and mean Δ PEF at JC

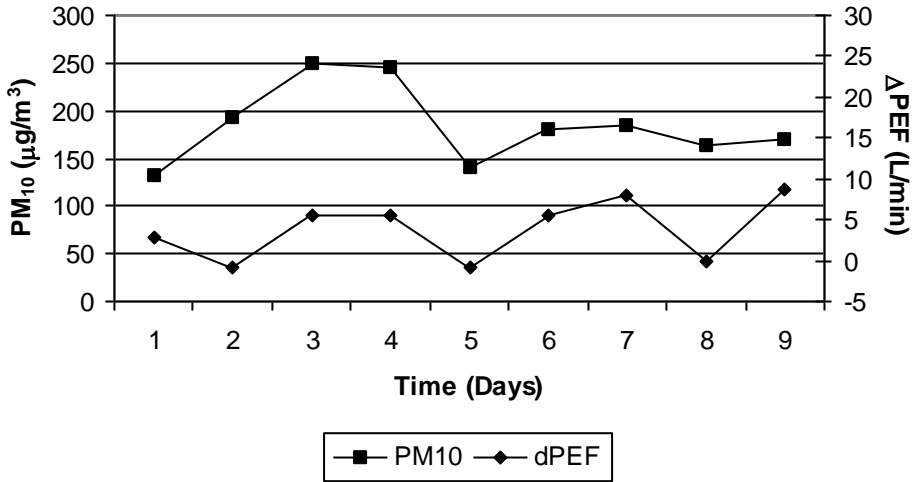
$PM_{2.5}$, Δ PEF vs Time (Cohort - JC Site)



Change in daily $PM_{2.5}$ levels and mean Δ PEF at JC

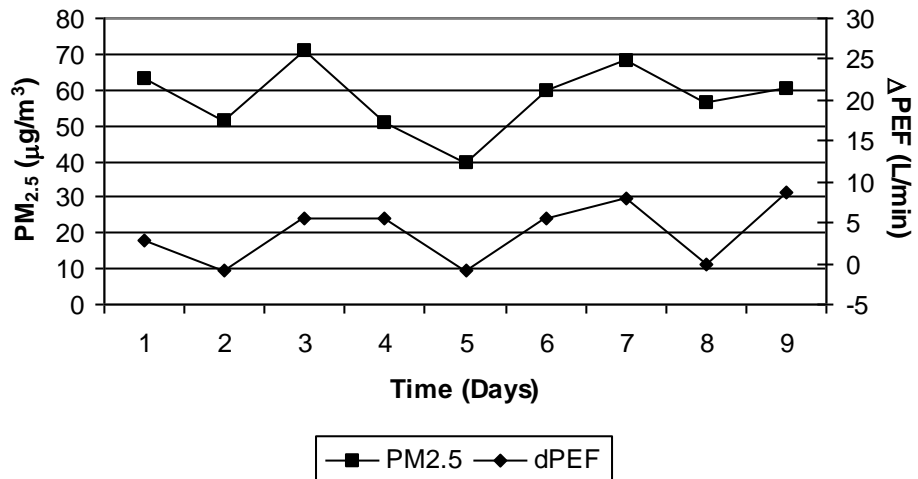
Variation of Δ PEF with PM_{10} and $PM_{2.5}$

PM_{10} , Δ PEF vs Time (Cohort - IITK Site)



Change in daily PM_{10} levels and mean Δ PEF at IITK

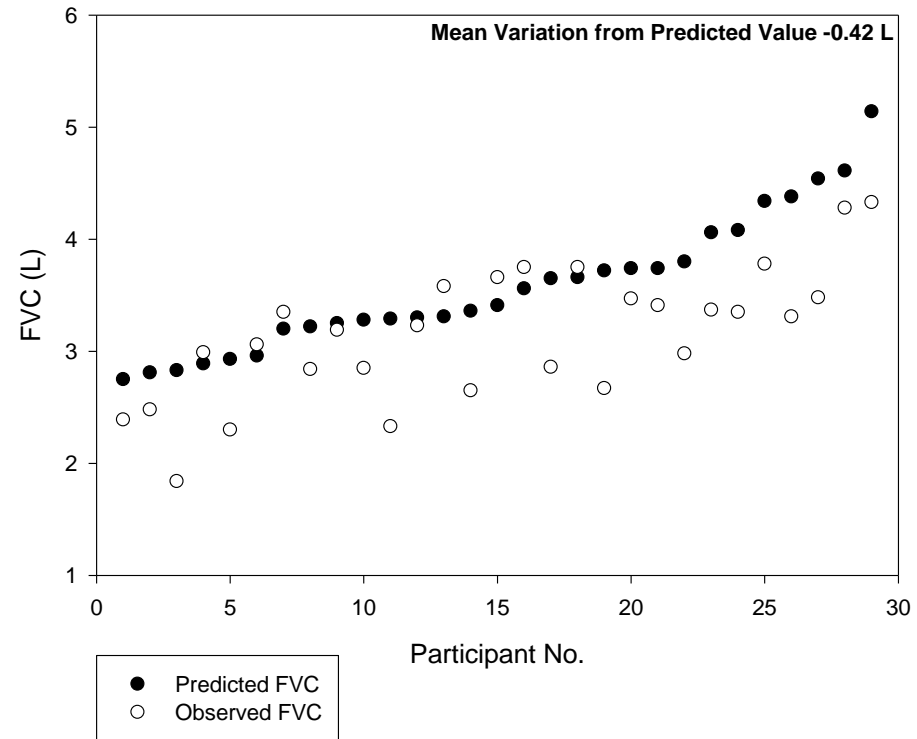
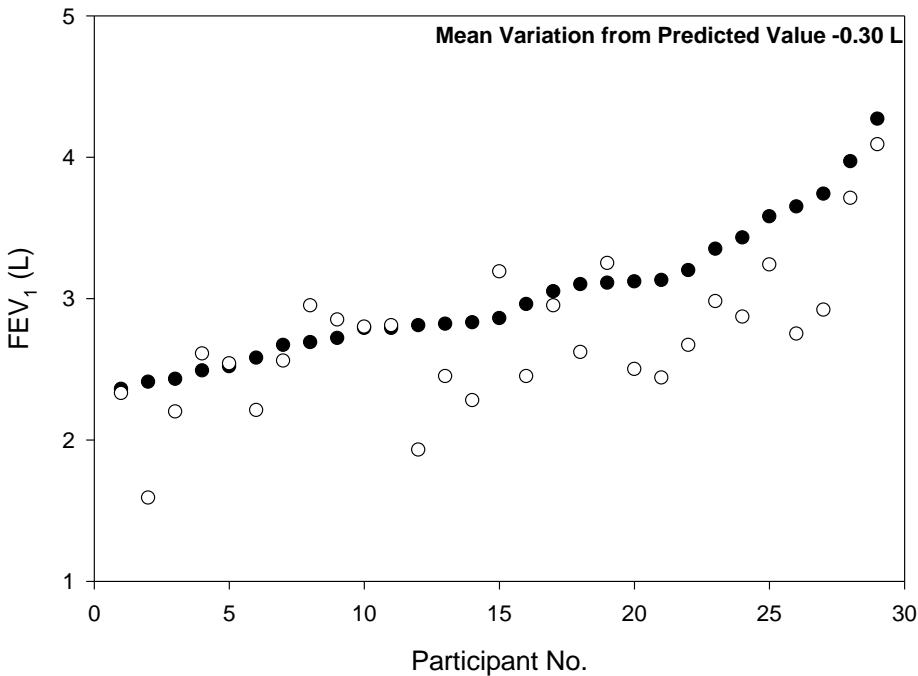
$PM_{2.5}$, Δ PEF vs Time (Cohort - IITK Site)



Change in daily $PM_{2.5}$ levels and mean Δ PEF at IITK

Variation in Observed FEV₁, FVC from Reference

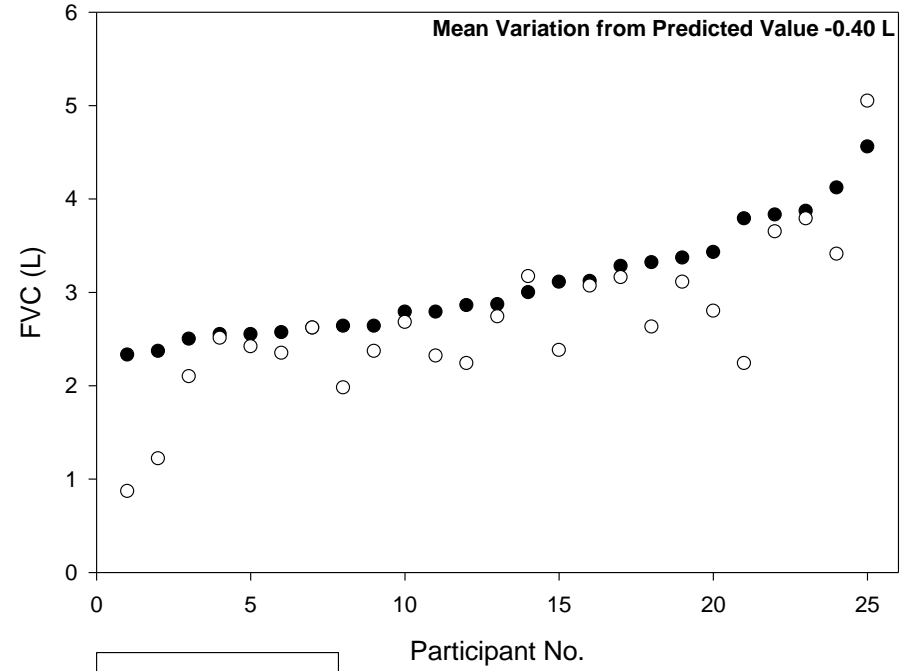
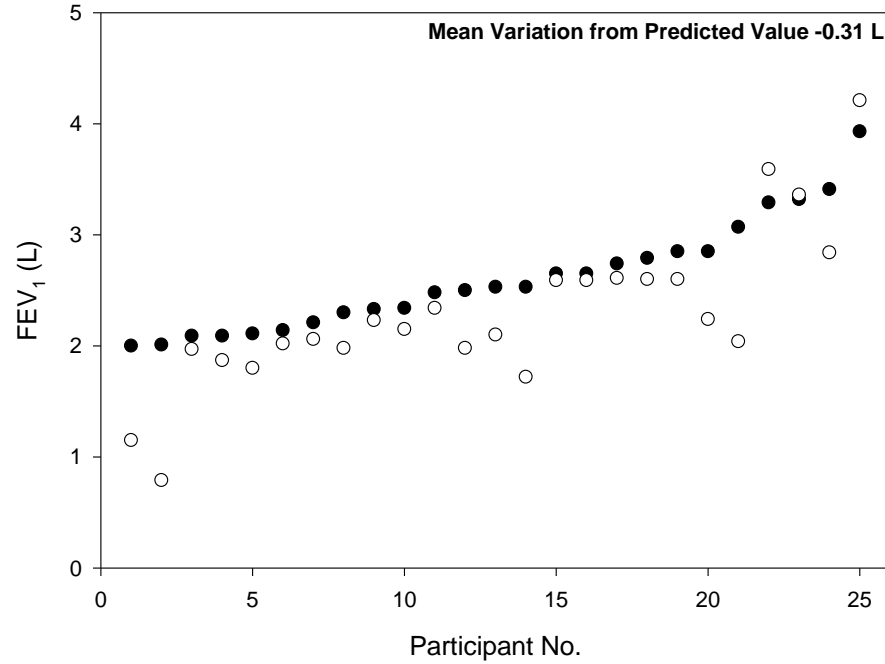
Vikas Nagar (VN) Cohort



Vikas Nagar Cohort

Variation in Observed FEV₁, FVC from Reference

Juhilal Colony (JC) Cohort

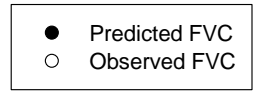
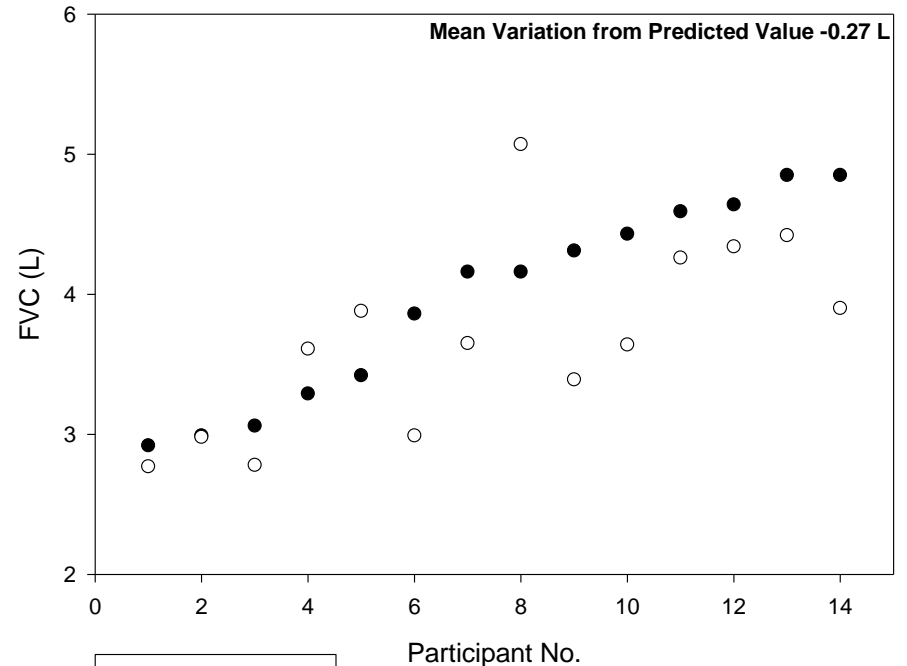
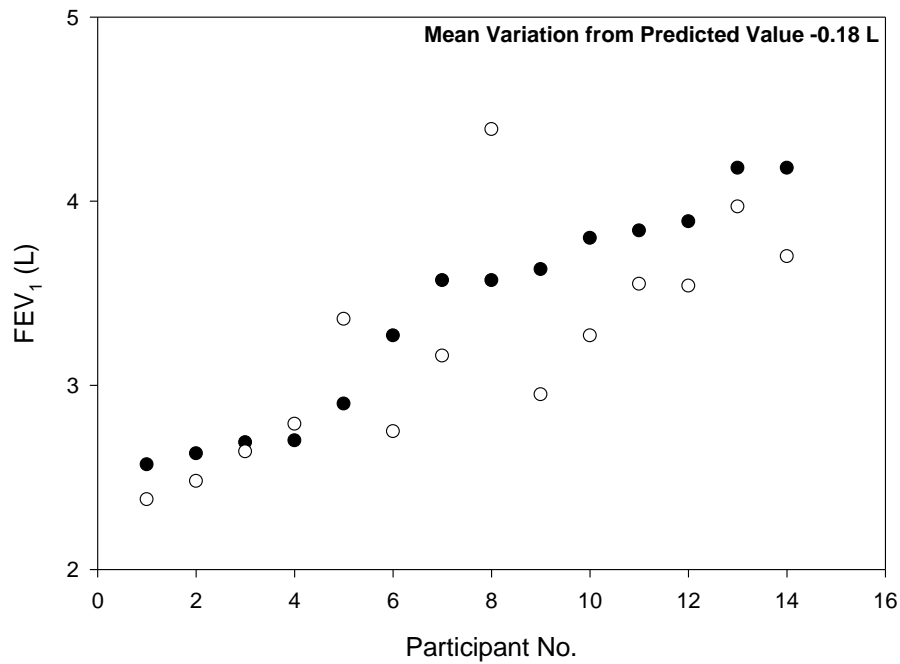


- Predicted FVC
- Observed FVC

Juhilal Colony Cohort

Variation in Observed FEV₁, FVC from Reference

IIT Kanpur (IITK) Cohort



IIT Kanpur Cohort