

Recent Evidence on the Relationship between Ozone and Mortality



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Health Impacts of Ozone

- Effects on lung function
- Respiratory symptoms
- Exacerbation of asthma
- Hospital admissions
- Emergency room visits
- **Mortality?**



Source: EPA. *Air Quality Criteria for Ozone and Related Photochemical Oxidants*. **1996**

Recent Studies on Ozone and Mortality

- Study designs
 - Meta-analysis, multi-city time-series, case-crossover
 - Confounders
 - Weather, particulate matter
 - Effects at low levels
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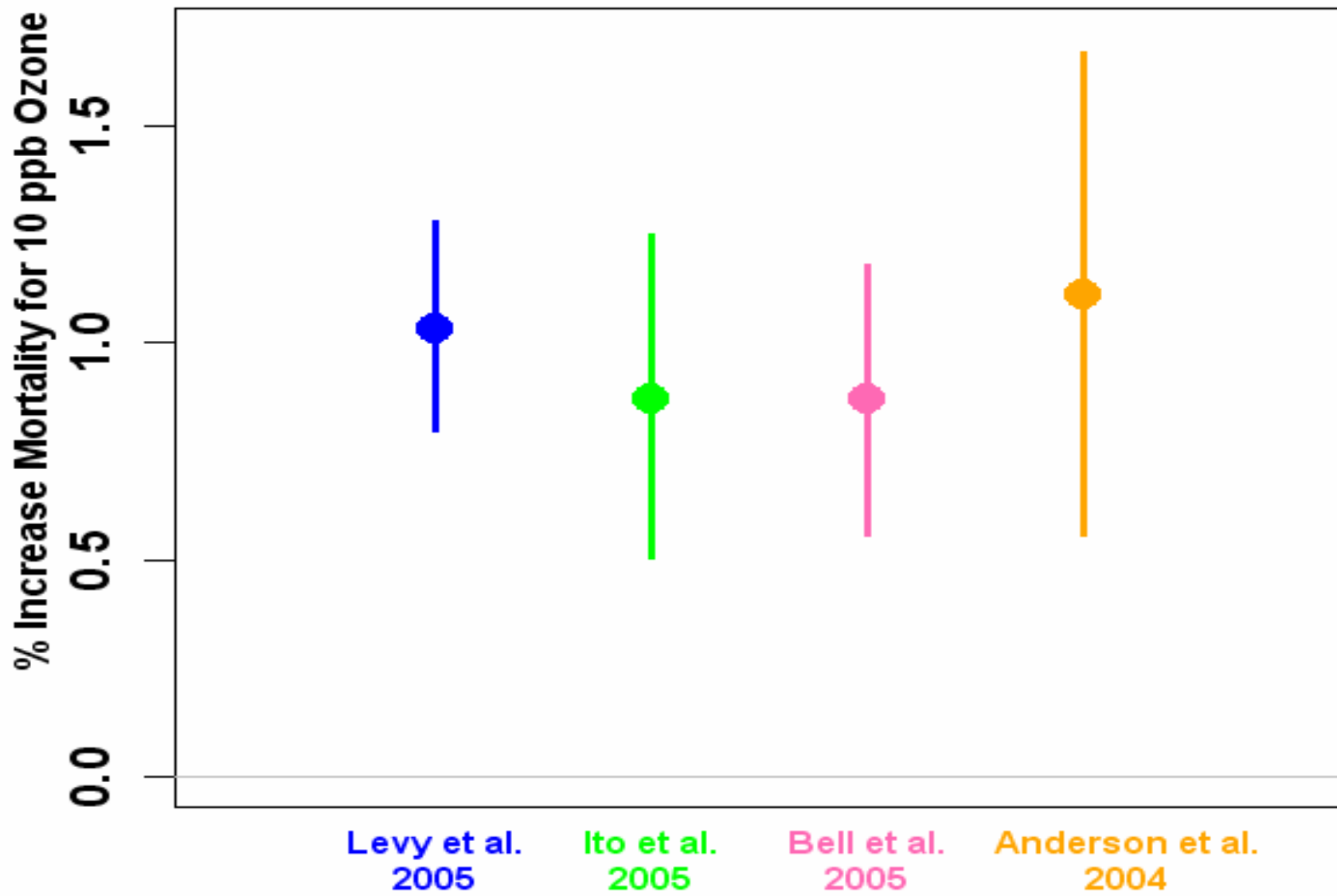
Meta-Analysis Approach

- Systematically review the literature to find studies
- 144 effect estimates from 39 time-series studies
 - 38 in the U.S., 106 from outside the U.S.
- Combine the estimates using a Bayesian hierarchical model

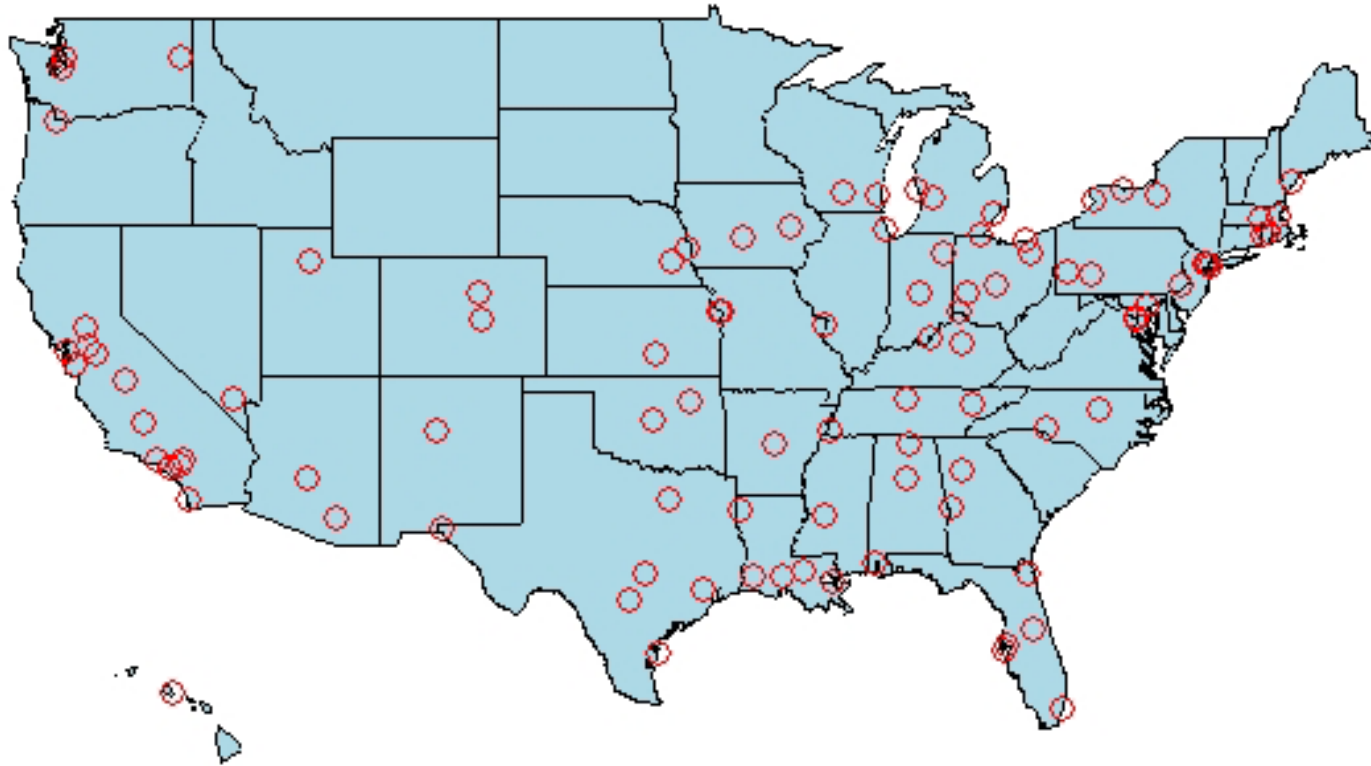
Results by Cause

- Percent increase in daily total mortality for a 10 ppb increase in daily ozone (95% PI)
- Total: **0.87% (0.55, 1.18%)**
- CVD: **1.11% (0.68, 1.53%)**
- Respiratory: **0.47% (-0.51, 1.47%)**

Comparison of Meta-Analyses Results



O₃ Multi-City Time-Series



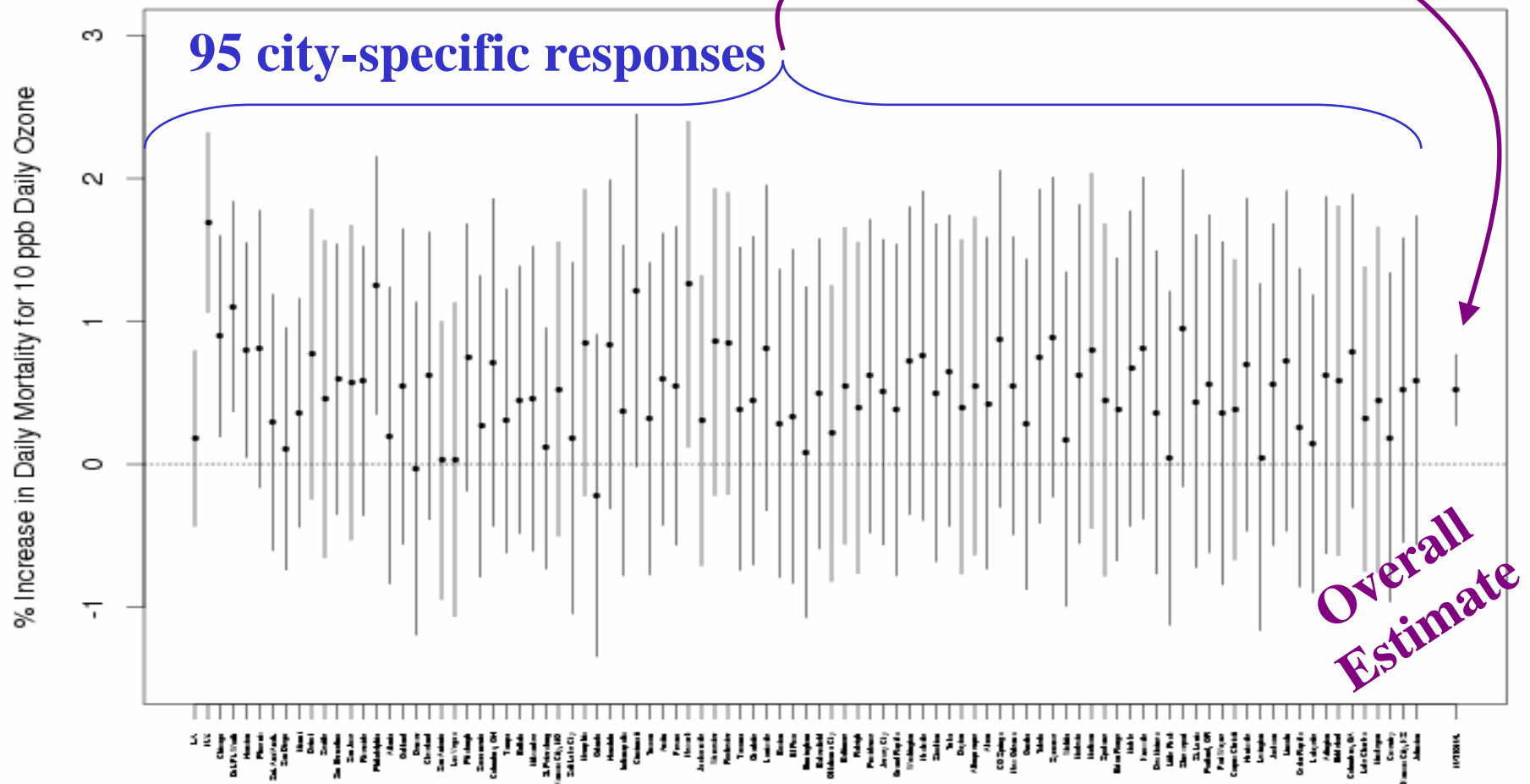
95 U.S. urban centers (1987 to 2000)

Bell et al. JAMA (2004)

Hierarchical Approach

- 1) Estimate the community-specific relationship between ozone and mortality, adjusted for:
 - Day of the week
 - Weather (temperature, dew point temperature, heat waves)
 - Long-term trend and seasonality
- 2) Combine the community-specific estimates, accounting for their uncertainty, to generate an overall effect

Community-Specific Bayesian Estimates

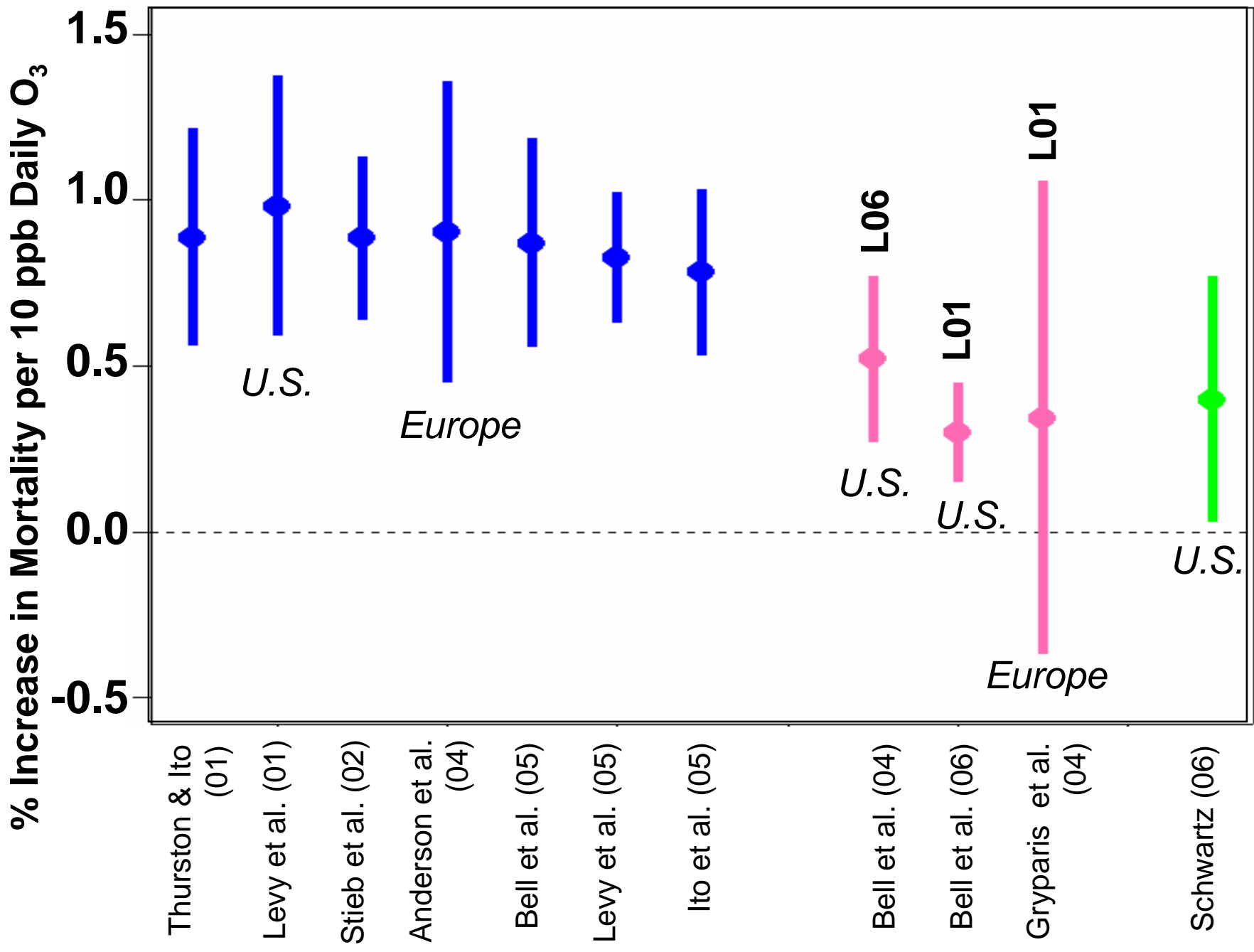


O₃ Multi-City Time-Series

- Gryparis et al. (2004) *AJRCCM*
 - APHEA2
 - Increase in mortality per 10 µg/m³ L01 1-hr max (n=23)
 - Total: 0.10 (-0.11 to 0.26%)
 - Total: 0.33% (0.17 to 0.52%), warm season
 - Total: 0.27% (0.10 to 0.47%) (n=19), warm season with PM₁₀
 - CVD: 0.45% (0.22 to 0.69%), warm season
 - Resp: 1.13% (0.62 to 1.48%), warm season
-

O₃ Case-Crossover

- Schwartz (2005) *AJRCCM*
 - Case-crossover approach: Each person acts as his/her own control
 - Match: all other days of the same month and same year
 - Increase in mortality for 10 ppb 1-hr max ozone
 - 0.19% (0.03 to 0.35%) (n=14)
 - 0.19% (0.03 to 0.36%) with PM₁₀ as covariate
 - 0.23% (0.01 to 0.44%) with temperature matched controls
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**Air Quality Criteria for
Ozone and Related
Photochemical Oxidants**

Volume I of III



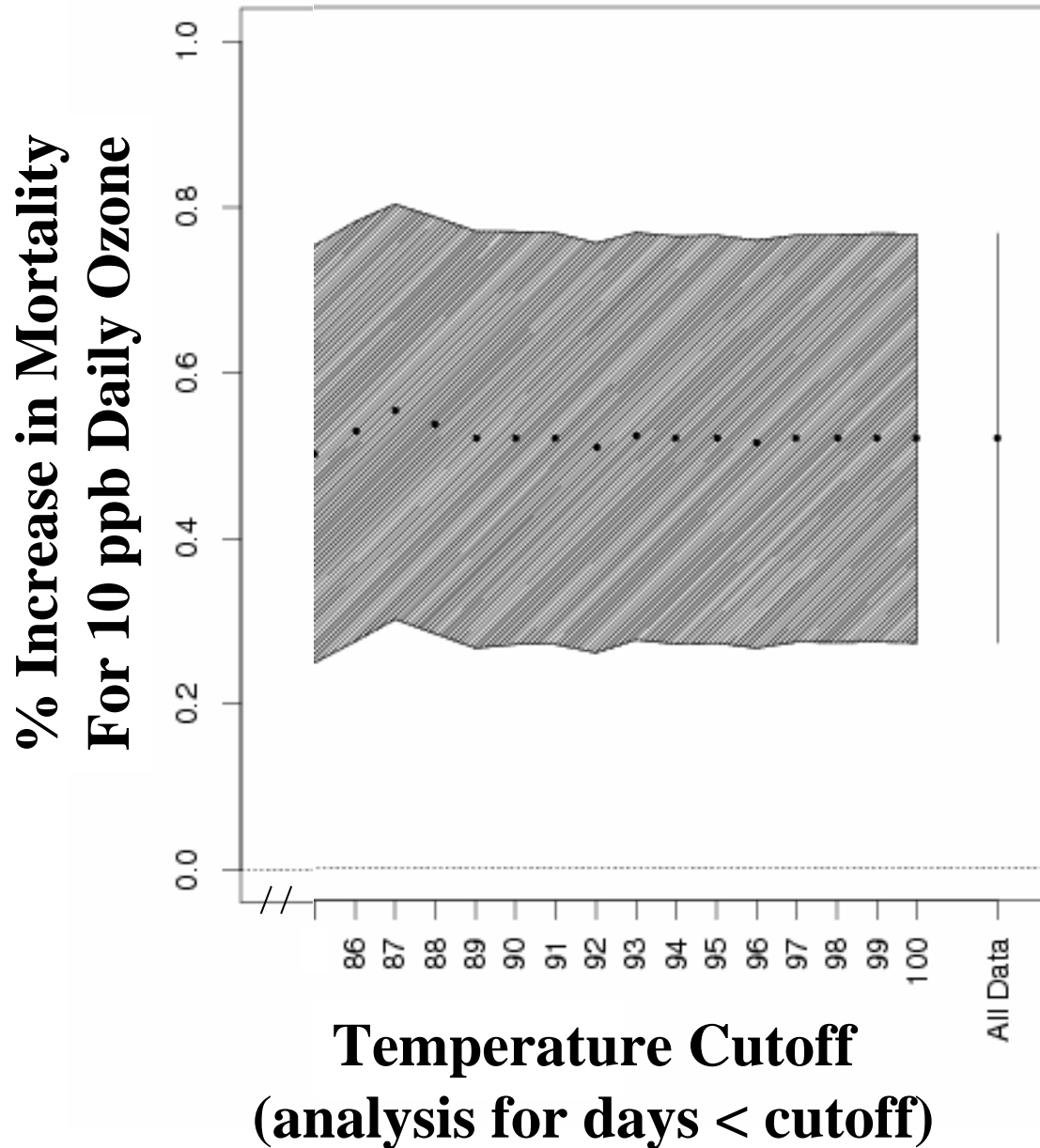
**Mortality now
included as a health
endpoint for ozone.**

Source: EPA. *Air Quality Criteria for Ozone and Related Photochemical Oxidants*. **2006**

Confounding by temperature?

- Meta-analyses accounting for non-linear relationship between weather and mortality
- Control for weather in time-series models
- Case-crossover matching on temperature

Exclude High Temperature Days

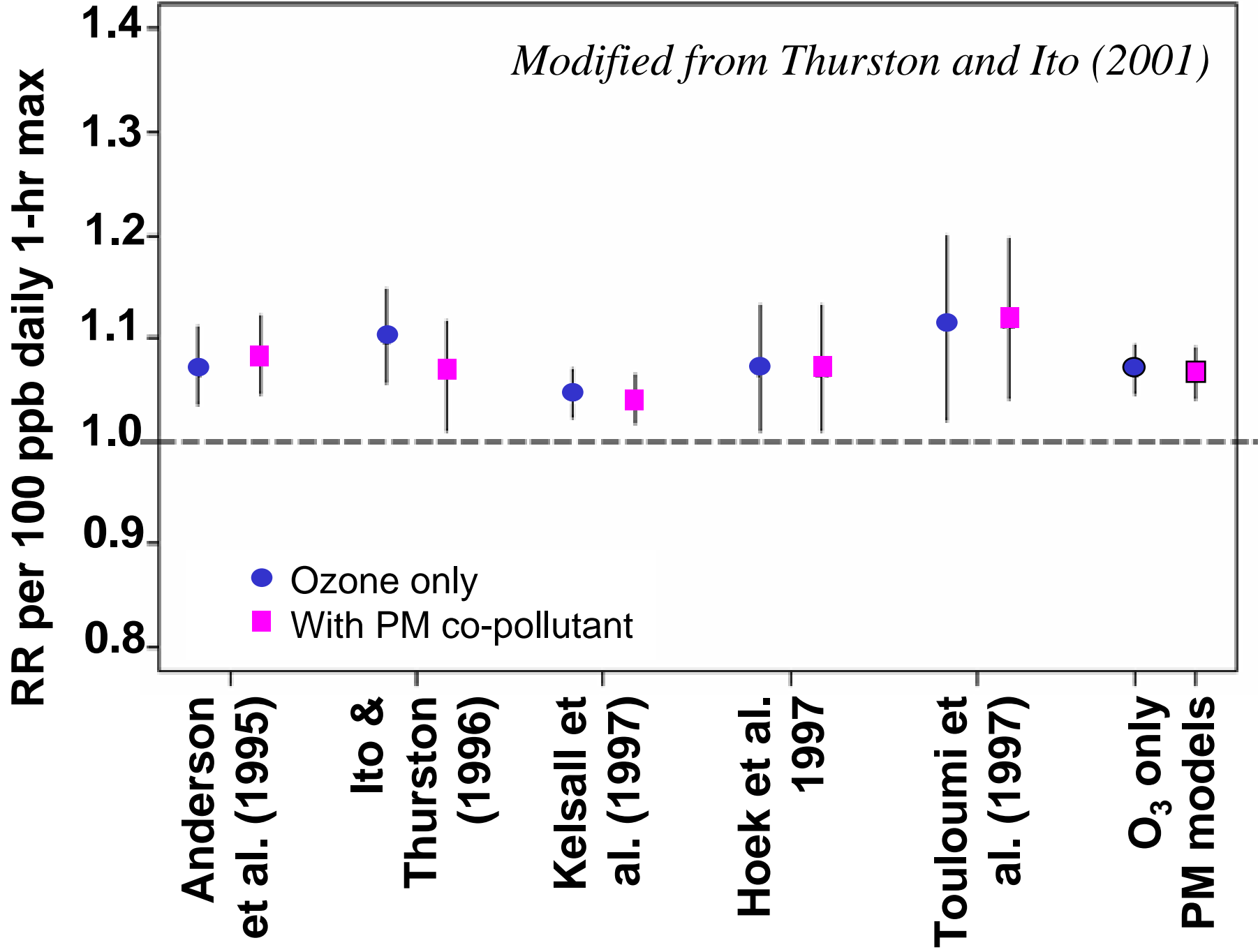


- Results robust to exclusion of high temperature days
- Effects range from:
0.50% (0.25, 0.75%)
to
0.55% (0.30, 0.80%)

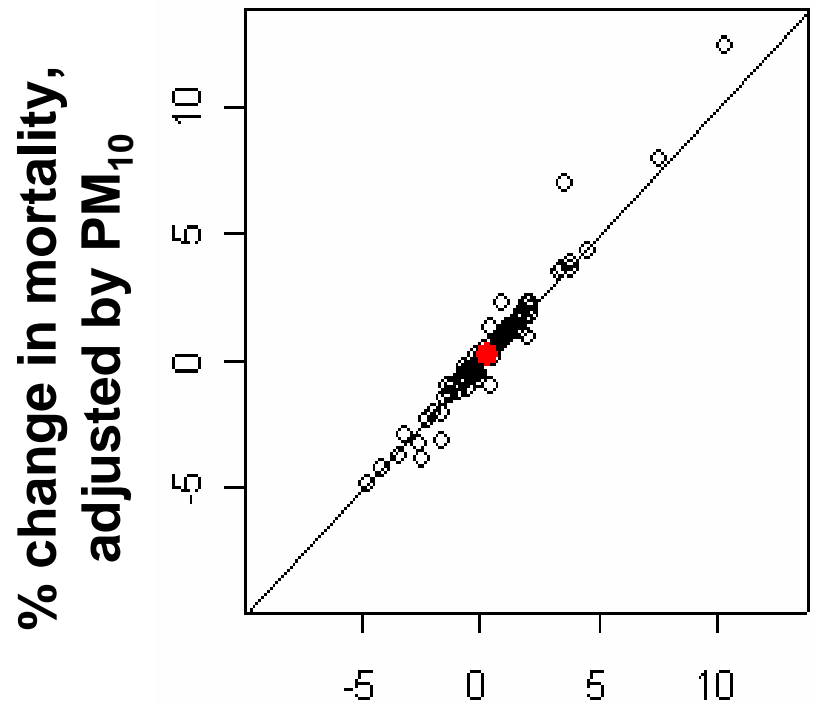
Bell et al. JAMA (2004)

Confounding by PM?

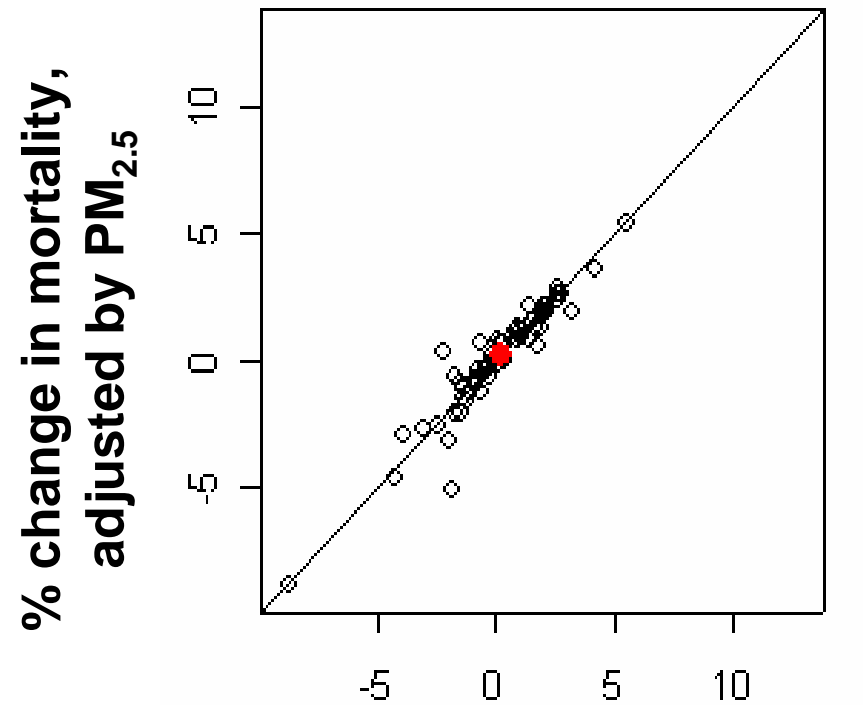
- O_3 estimates robust to inclusion of PM
 - Meta-analysis
 - Thurston and Ito (2001)
 - Stieb et al. (2002)
 - Bell et al. (2005)
 - Ito et al. (2005)
 - Multi-city time series
 - Bell et al. (2004)
 - Gryparis et al. (2004)
 - Case-crossover
 - Schwartz et al. (2006)



Sensitivity to Adjustment by PM



% change in mortality, without PM adjustment

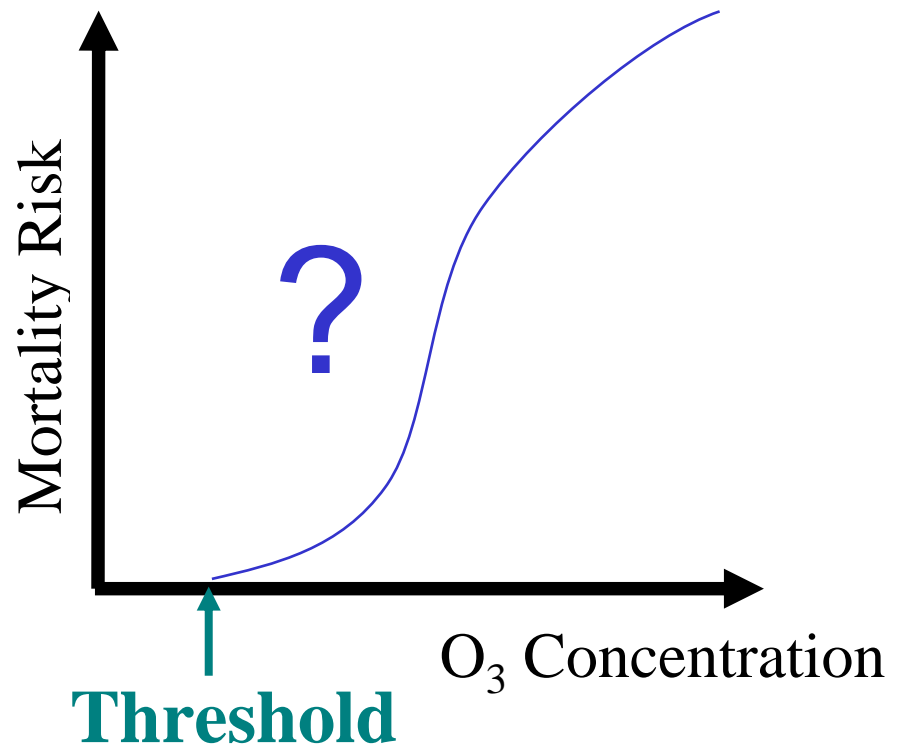


% change in mortality, without PM adjustment

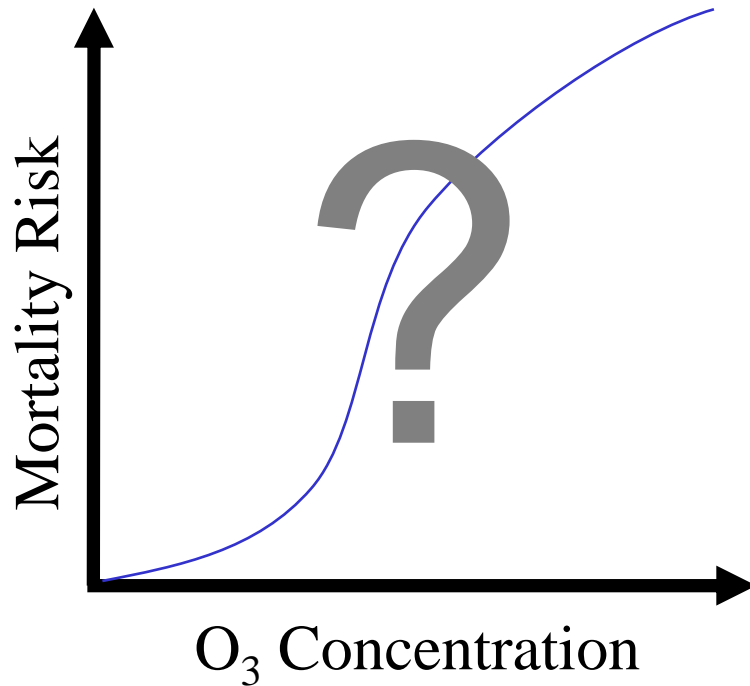
(Bell, Kim, and Dominici)

Threshold Effect for O₃

- What is the shape of the exposure-response curve for ozone?
- Are there “safe” levels?
- What are effects at low concentrations?



Exposure-response curve models

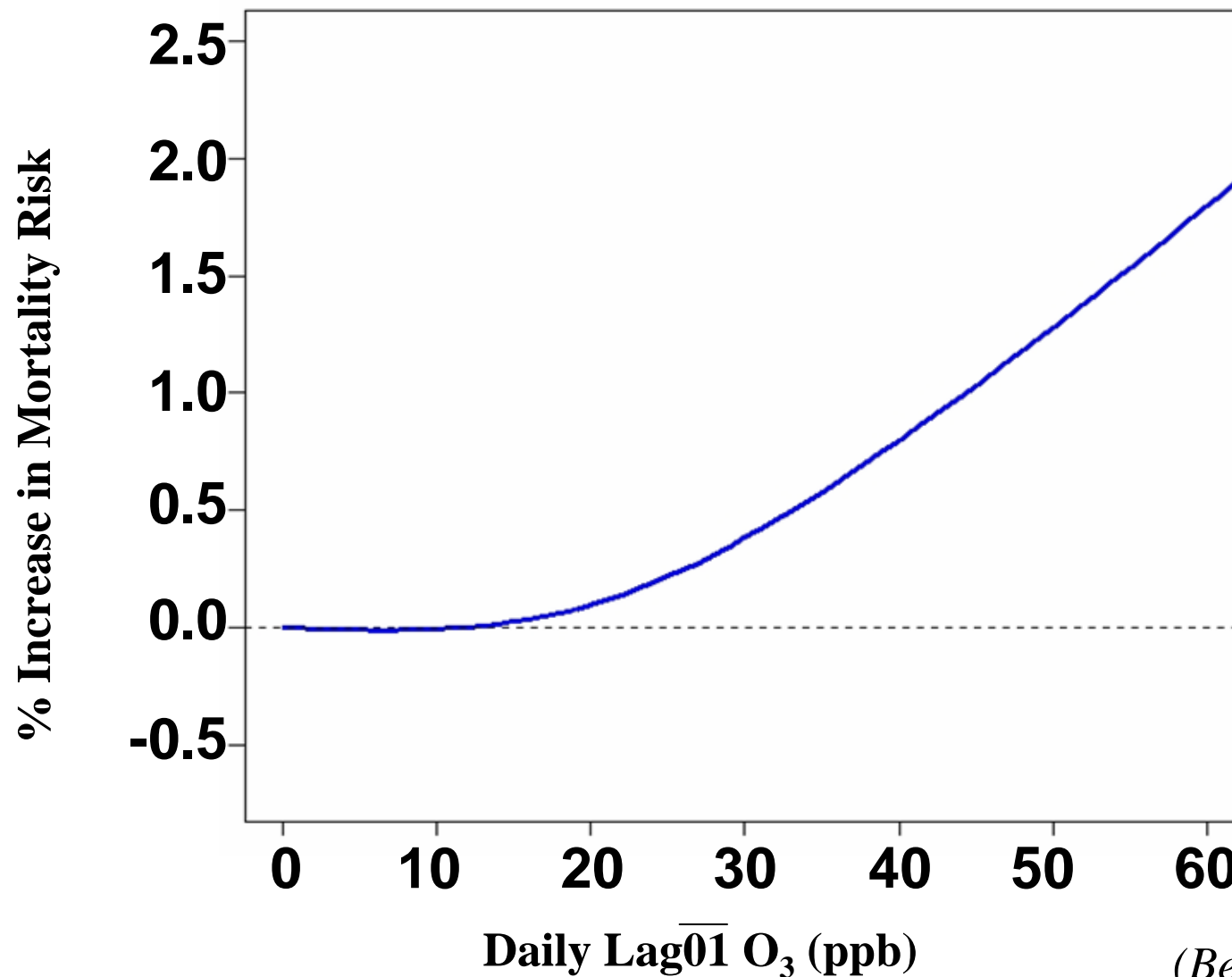


Four model structures:

- 1) Traditional model
- 2) Subset approach
 - Only consider days with ozone $< s$
- 3) Threshold model
 - Only allow relationship at ozone $\geq h$
- 4) Spline model
 - Allow non-linear relationship

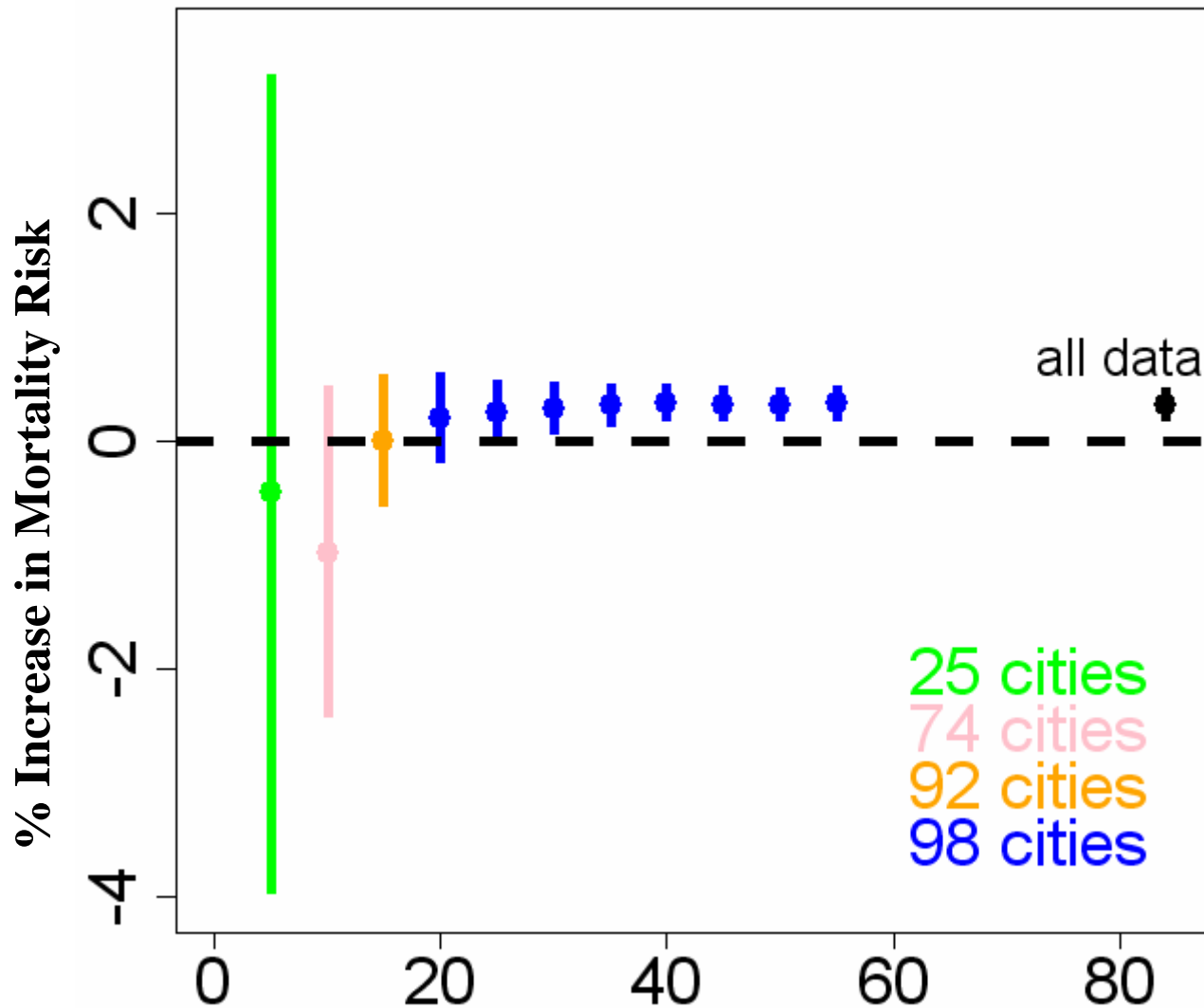
Bell et al. (2006)

Results - Spline Model



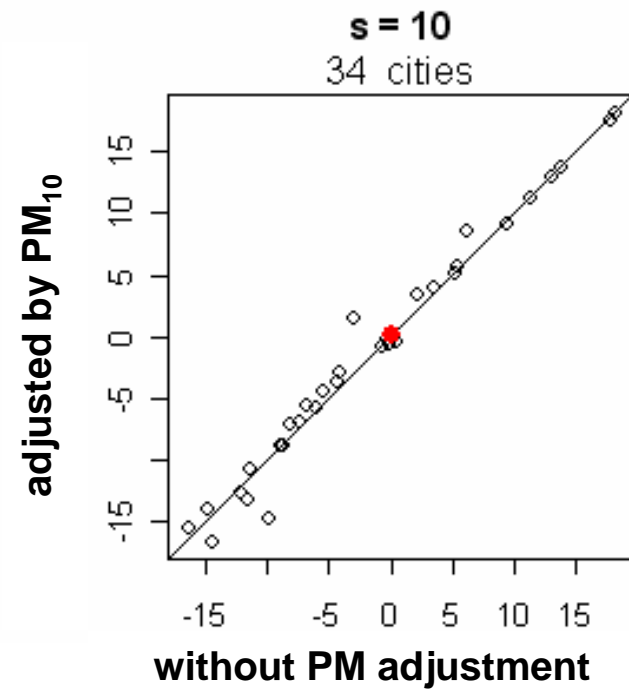
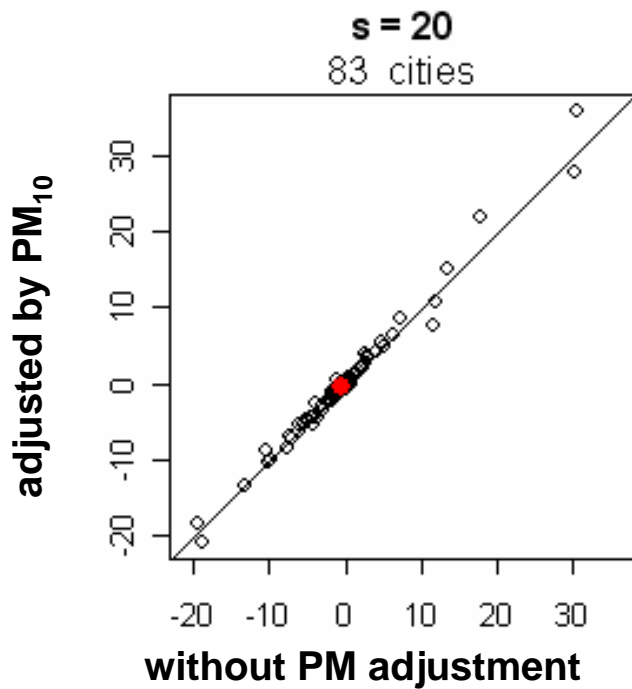
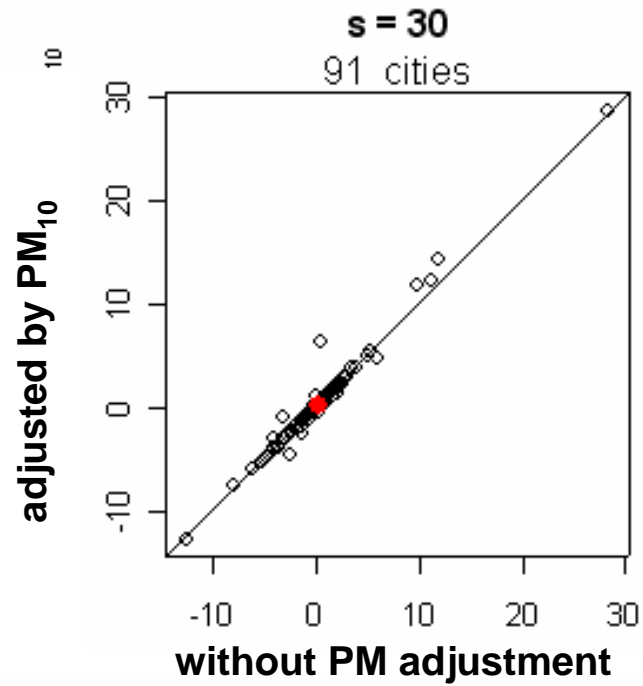
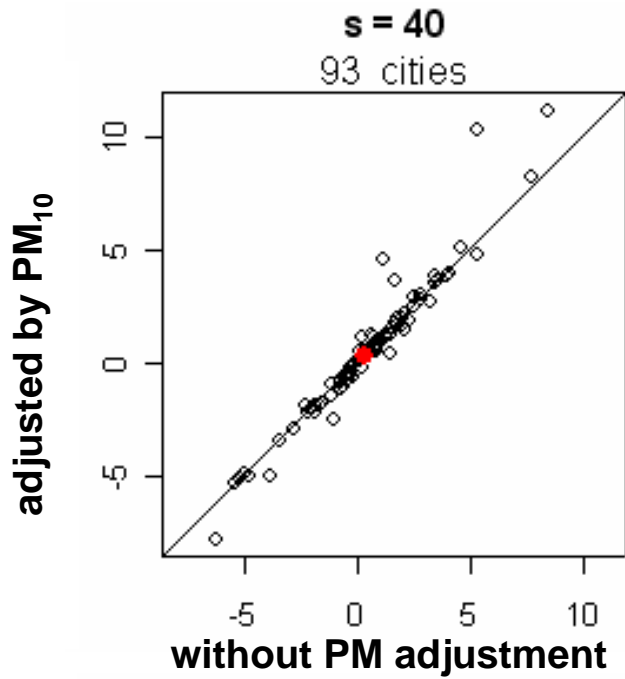
(Bell et al. 2006)

Results – Subset Approach



s: for daily Lag 01 O₃ (ppb)

Bell et al. (2006)



*(Bell, Kim, and
Dominici)*

Final Thoughts

- Strong, consistent evidence of an association between short-term exposure to ozone and increased risk of mortality from multiple study designs.
- Results do not appear to be confounded by PM or temperature.
- Effects persist at low concentrations.

References

Meta-Analysis Studies

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References

Commentaries on 2005 Meta-Analyses

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- Goodman SN (2005). *Epidemiology* 16: 430-5.

Case-Crossover Study

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Multi-City Studies

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