

# Environmental Exposures and Childhood Mental Health

Patrick H. Ryan, PhD  
Professor of Pediatrics and Environmental & Public Health Sciences  
Division of Biostatistics and Epidemiology  
Cincinnati Children's Hospital Medical Center  
University of Cincinnati, College of Medicine



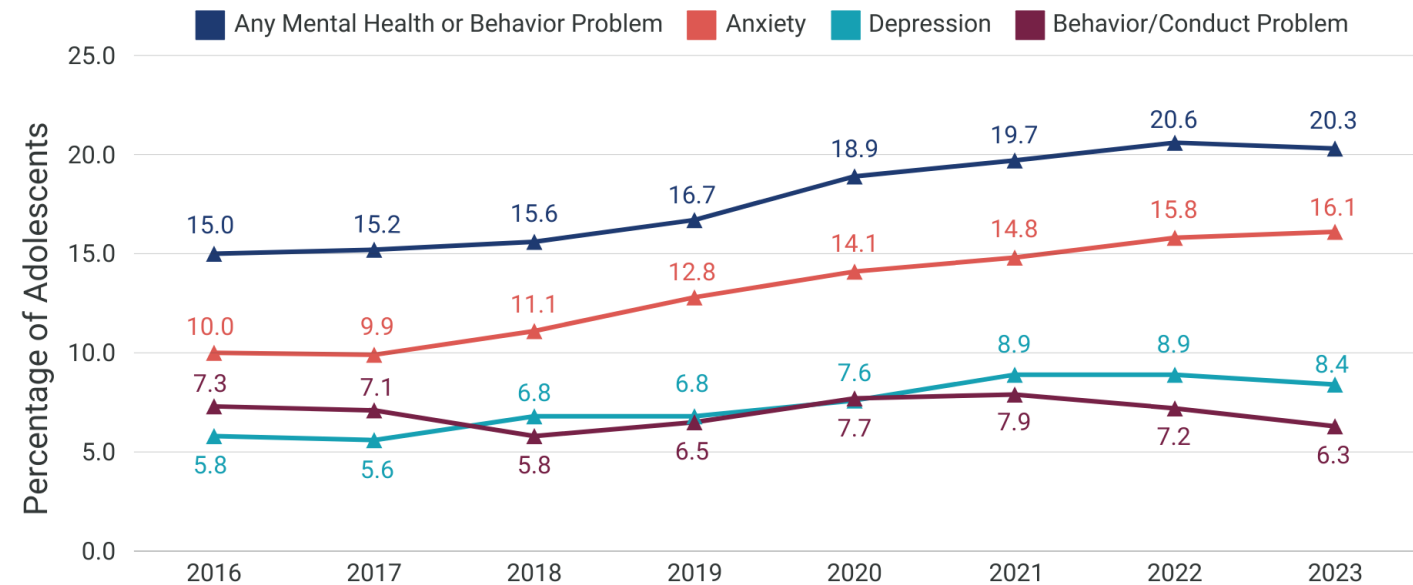
# Overview

1. Burden of Mental Health Disorders in Children
2. Social / Environmental Determinants of (Mental) Health
3. Environmental Exposures, Pathways, and Mental Health
4. Susceptible Periods of Growth and Development
5. Cincinnati Childhood Allergy and Air Pollution Study Findings

# Burden of Mental Health Disorders During Childhood

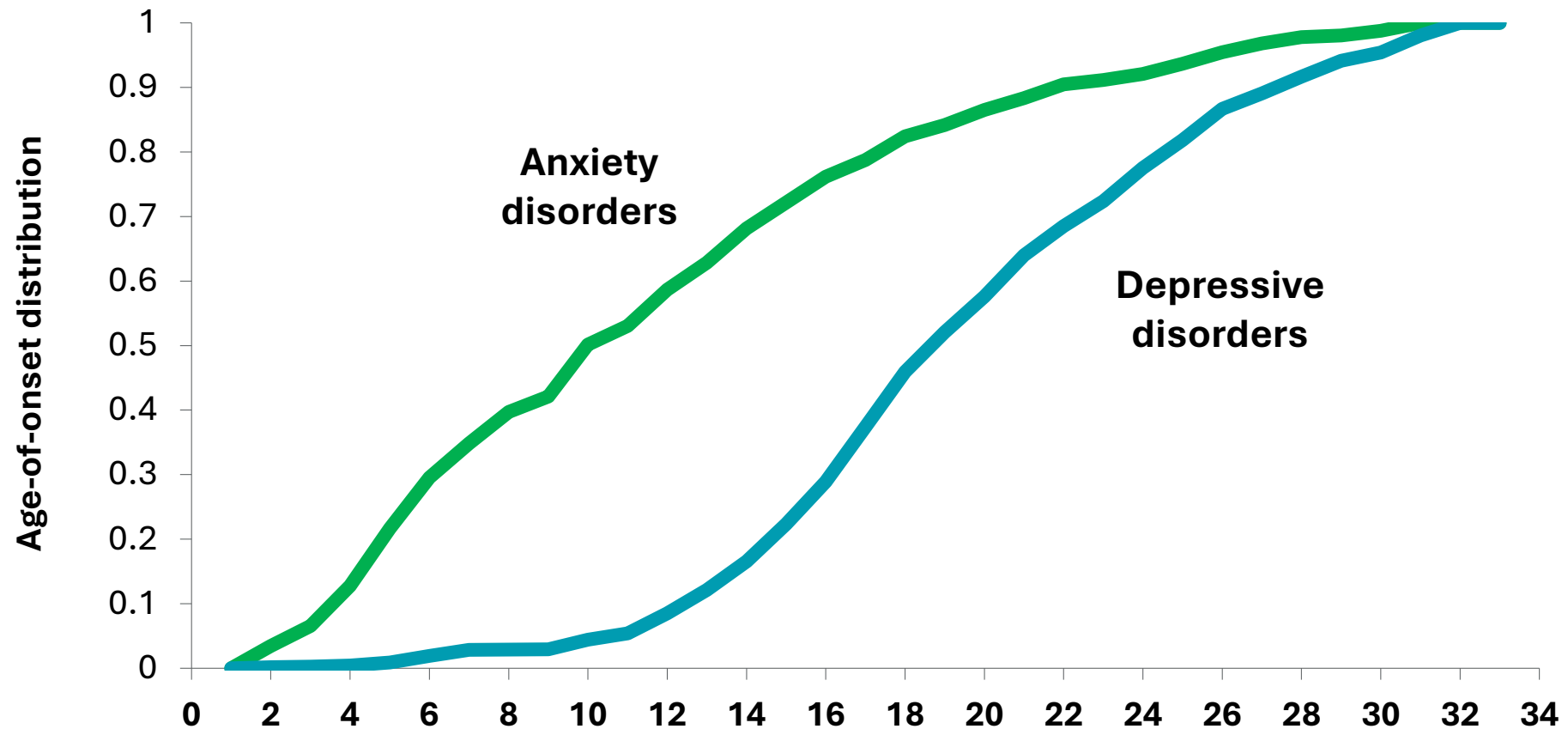
- Mental health consequences
  - School performance
  - Substance use disorders
  - Justice system encounters
  - Unemployment
- Suicide is the 2<sup>nd</sup> leading cause of death among ages 10-24
- Measurement
  - Clinical thresholds / diagnoses
    - Medical records
  - Spectrum of mental health and severity
    - Validated assessments

TRENDS IN DIAGNOSIS OF ANXIETY, DEPRESSION, AND BEHAVIOR/CONDUCT PROBLEMS AMONG ADOLESCENTS 12-17 YEARS OF AGE, 2016-2023



Source: National Survey of Children's Health Data Brief, October 2024. Health Resources and Services Administration, U.S. Department of Health and Human Services

# Onset of Psychiatric Disorders

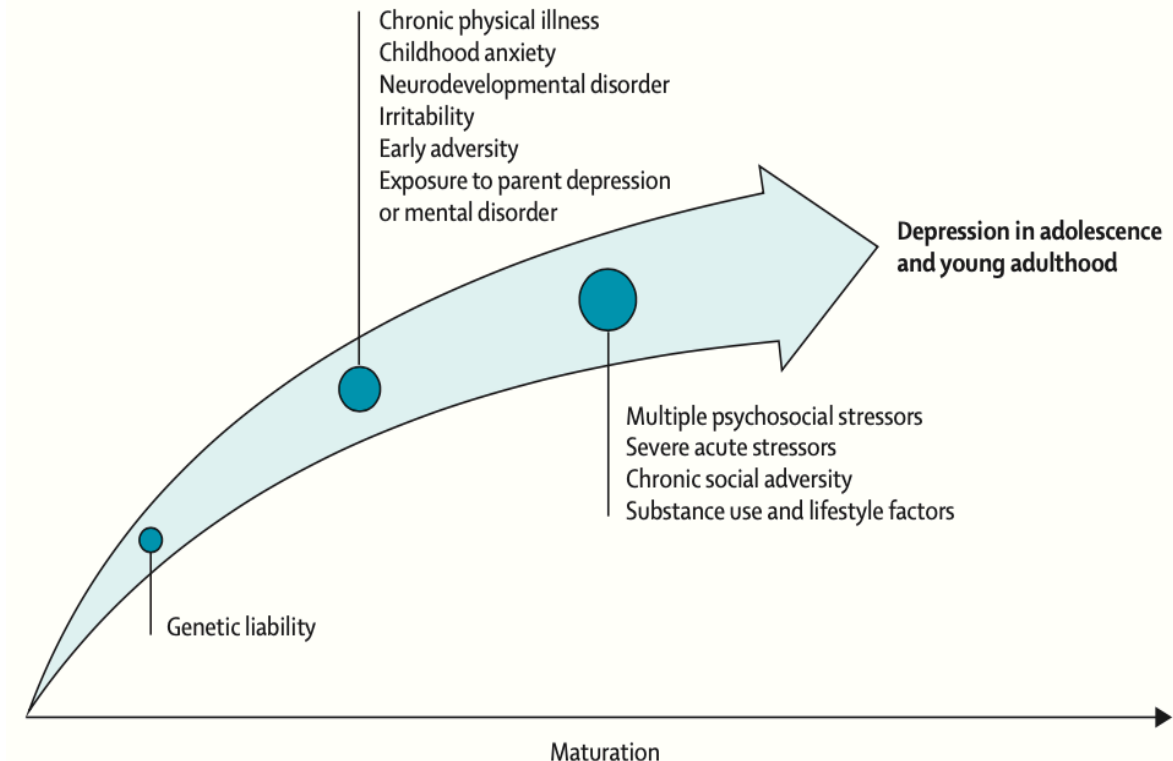


# Risk Factors: Temperament, Genes & Environment

## Anxiety Disorders

- **Stressful life events**
- **Parenting**
  - Overprotective/overcontrolling parenting
    - Anxious parents may fail to encourage social responsiveness.
    - Some fears may arise from modeling and vicarious learning, and verbal transmission of threat information about novel objects
- Lack of social support and **negative peer interactions**
- **Behavioral inhibition**
  - Withdraw from novel or unfamiliar social situations
  - 15% of infants are behaviorally inhibited, and half will develop **social anxiety disorder**
- Anxiety disorders are **familial**
  - Phenotypic variability explained by genetic factors ranges from 25–60%

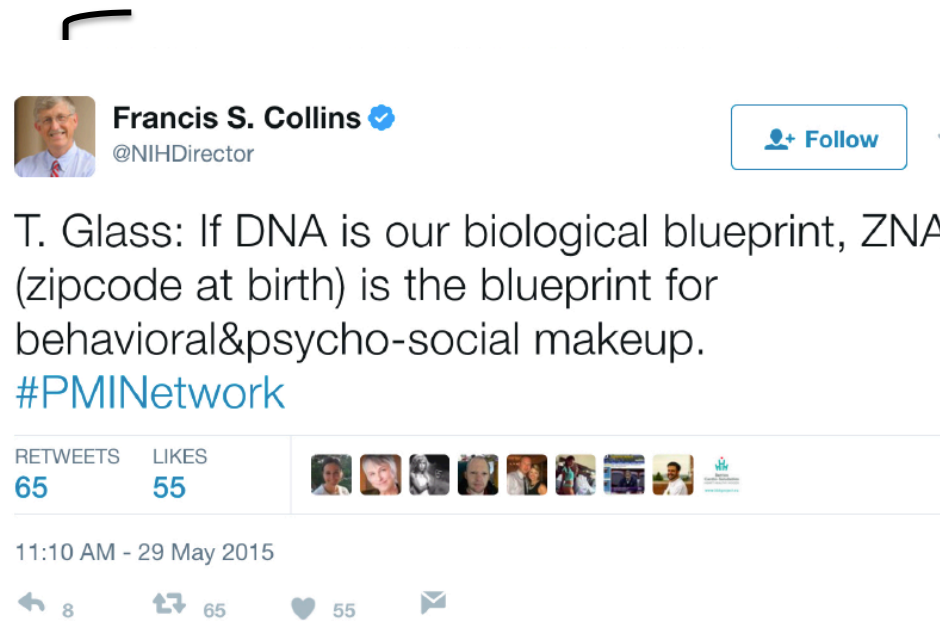
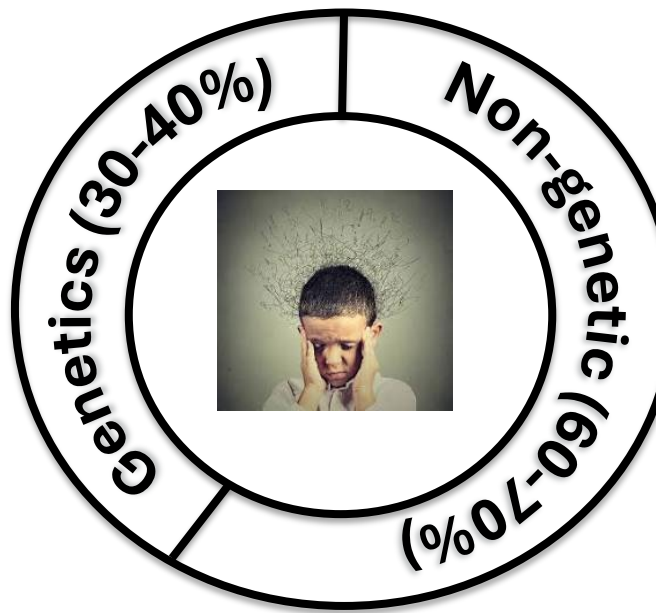
## Depressive Disorders



Salum et al. Rev Bras Psiquiatr 2013;35(Suppl 1) | Kagan et al. Dev Psychopathol 1999;11:209-24;  
Clauss JA et al. J Am Acad Child Adolesc Psychiatry 2012;51:1066-75. | Beesdo et al. Arch Gen Psychiatry 2010.  
Walkup and Strawn. Depression. Rutter's Child and Adolescent Psychiatry and Psychology, 7th Edition  
Thapar et al, Lancet, 2022

# Social Determinants of (Mental) Health

- Conditions in which people are born, grow, work, live, and age, and the wider set of forces and systems shaping the conditions of daily life
  - Significant contributors to health outcomes



## Individual-level

- Socioeconomic disadvantage
  - Early life & childhood adversity
  - Malnutrition
  - Abuse & neglect
  - Diverse childhood experiences (ACEs)
  - Discrimination

## Inter social factors

- Social capital
- Neighborhood characteristics and resources
- Physical environment

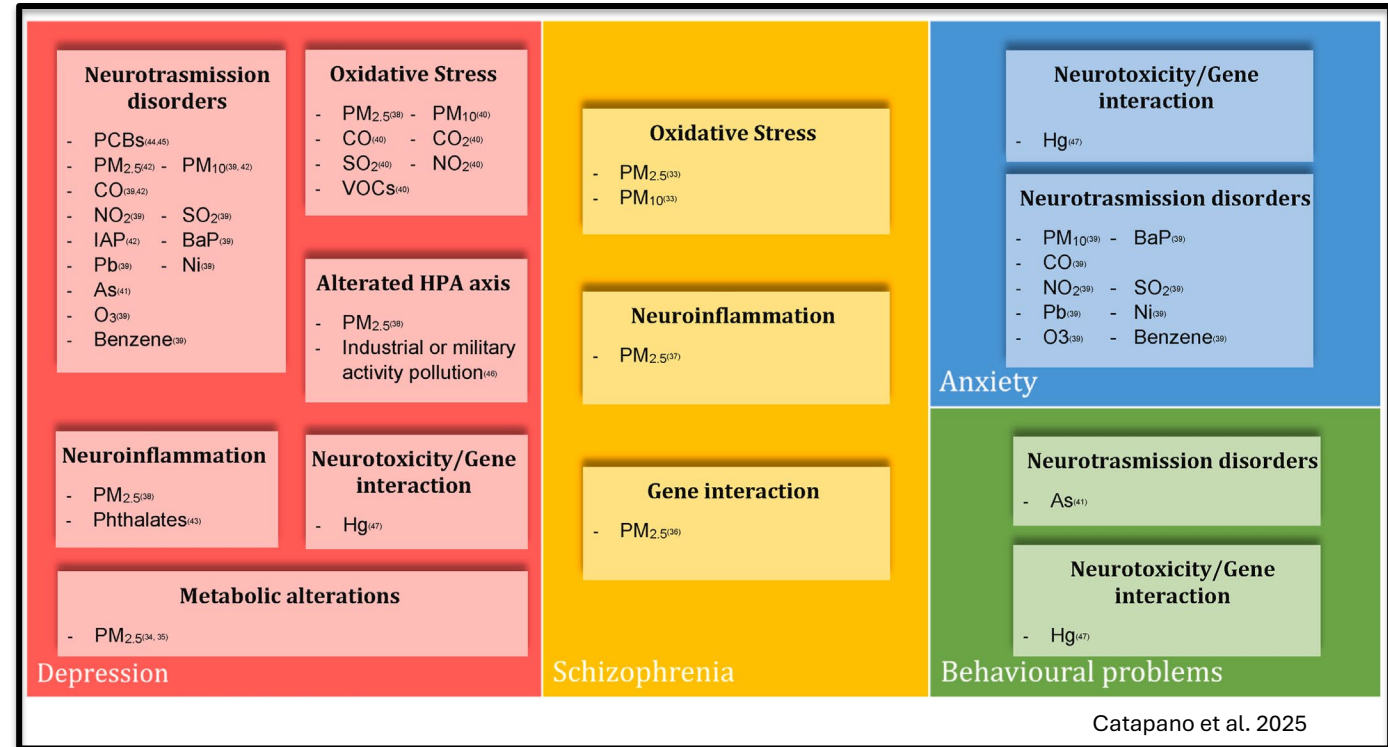
# Cumulative Impacts of SDoH

- “Totality of exposures to combinations of chemical and non-chemical stressors and their effects on health, well-being, and quality of life outcomes”
- Environmental exposures and the context in which they occur (e.g. community characteristics, chronic stress) are important risk factors and predictors of mental health outcomes
  - Air pollution, greenspace, temperature
  - Neighborhood characteristics
    - Population density, households in poverty
    - Crime, access to care, pharmacies, food deserts



# Environmental Exposures Linked to Mental Health

- Metals
  - Pb, Mn, As, Hg
  - Substitution for minerals required for neuronal signaling
- Organic solvents
  - Lipophilic → concentrate in white matter
  - ROS
- Phthalates
  - Neuroinflammation (IL-6, CRP)
- PCBs
  - Altered dopamine metabolism
- Pesticides
  - Inhibit acetylcholinesterase → disrupted neurotransmission

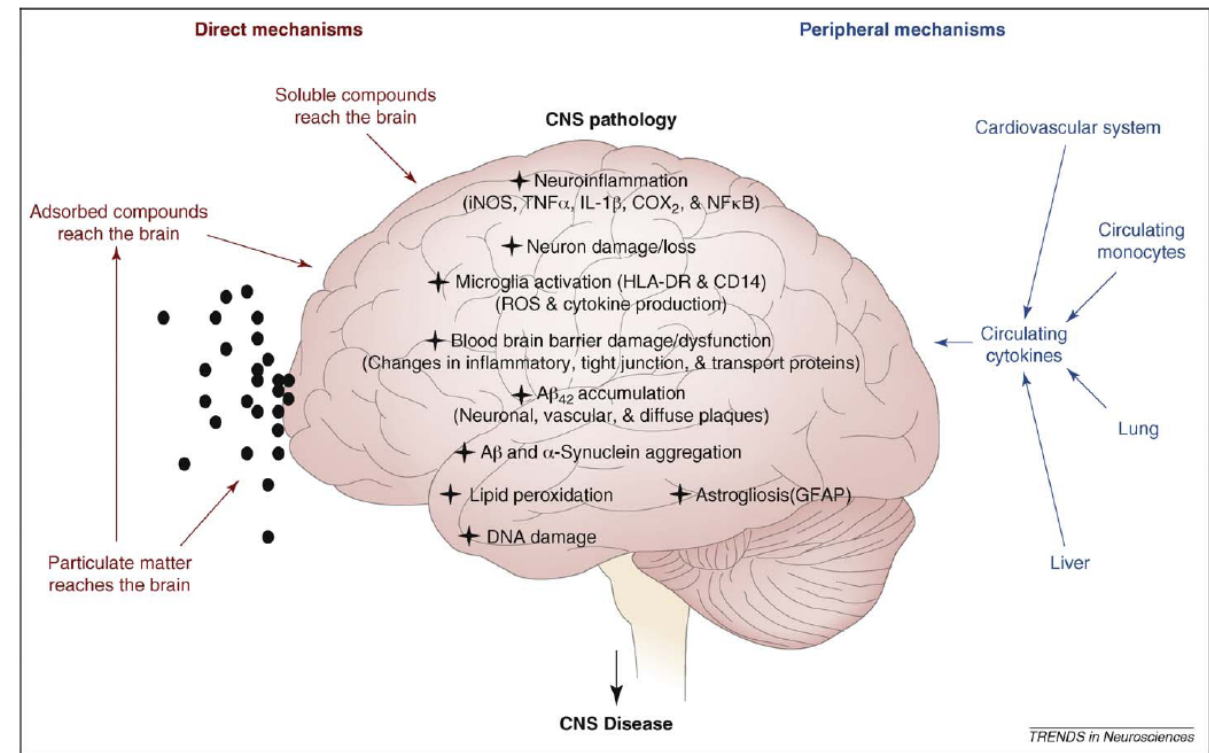


- Temperature
  - Increased stress response, disrupted thermoregulation
- Greenspace
  - Modifier: Air quality, stress, social integration

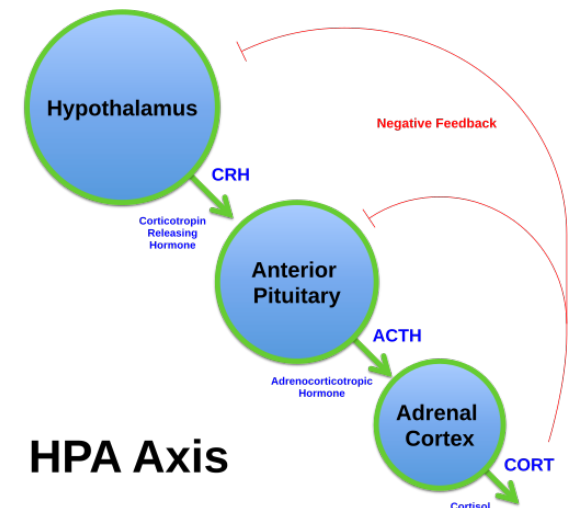


# Air Pollution and the Central Nervous System

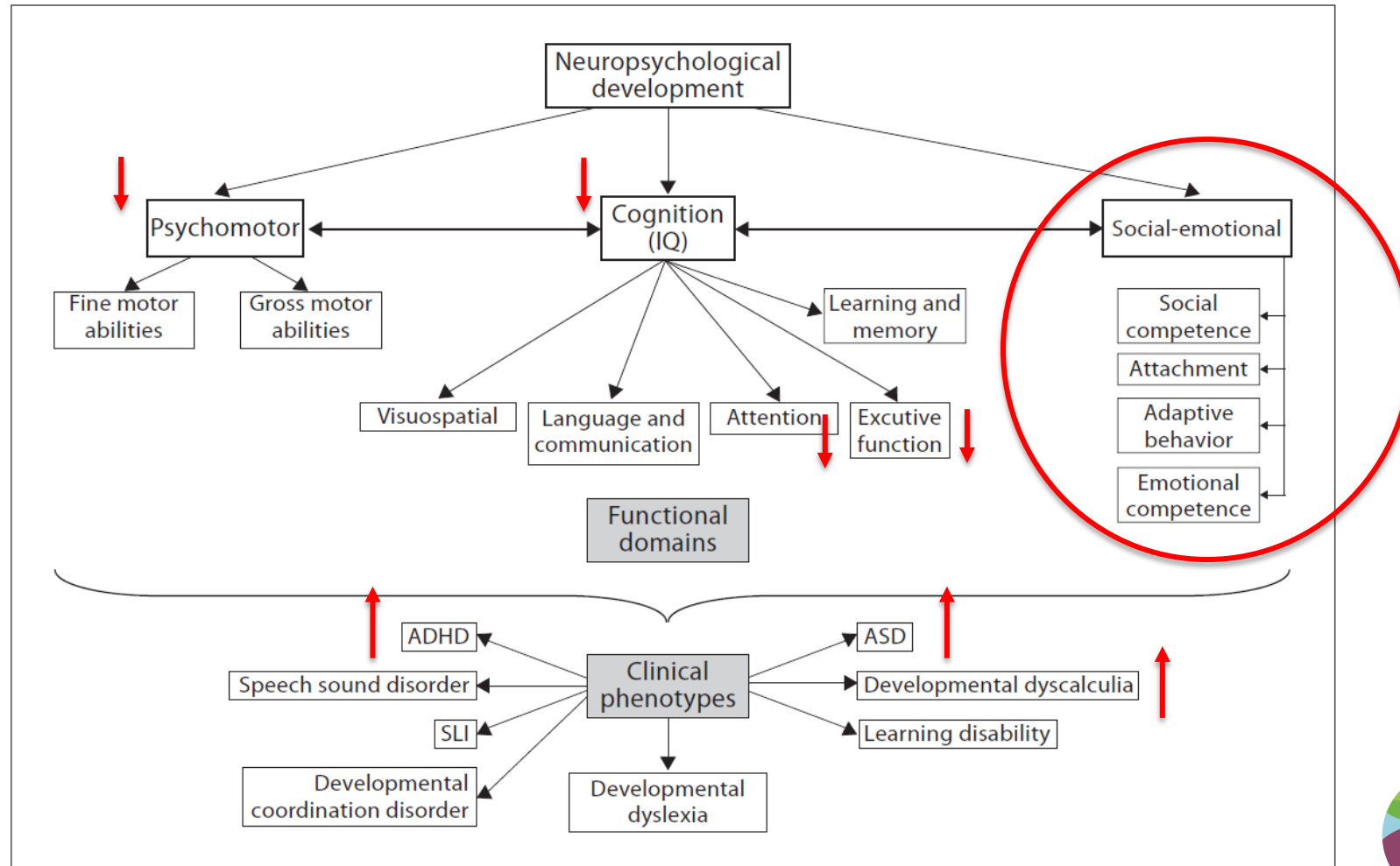
- Air pollutants
  - PM<sub>2.5</sub>
  - Traffic-related air pollution
    - Ultrafine particles (UFP, PM<sub>0.1</sub>)
- Mechanisms
  - Direct: Particles and absorbed compounds direct exposure to the brain
  - Indirect mechanisms
    - Inflammatory response in peripheral organ systems
    - Disruption of hypothalamic-pituitary-adrenal (HPA) axis
- Exposure to neurotoxicants during brain maturation can manifest as functional impairments later in life



Block and Calderon-Garciduenas. *Trends in Neurosciences*. 2009;32:506-516.

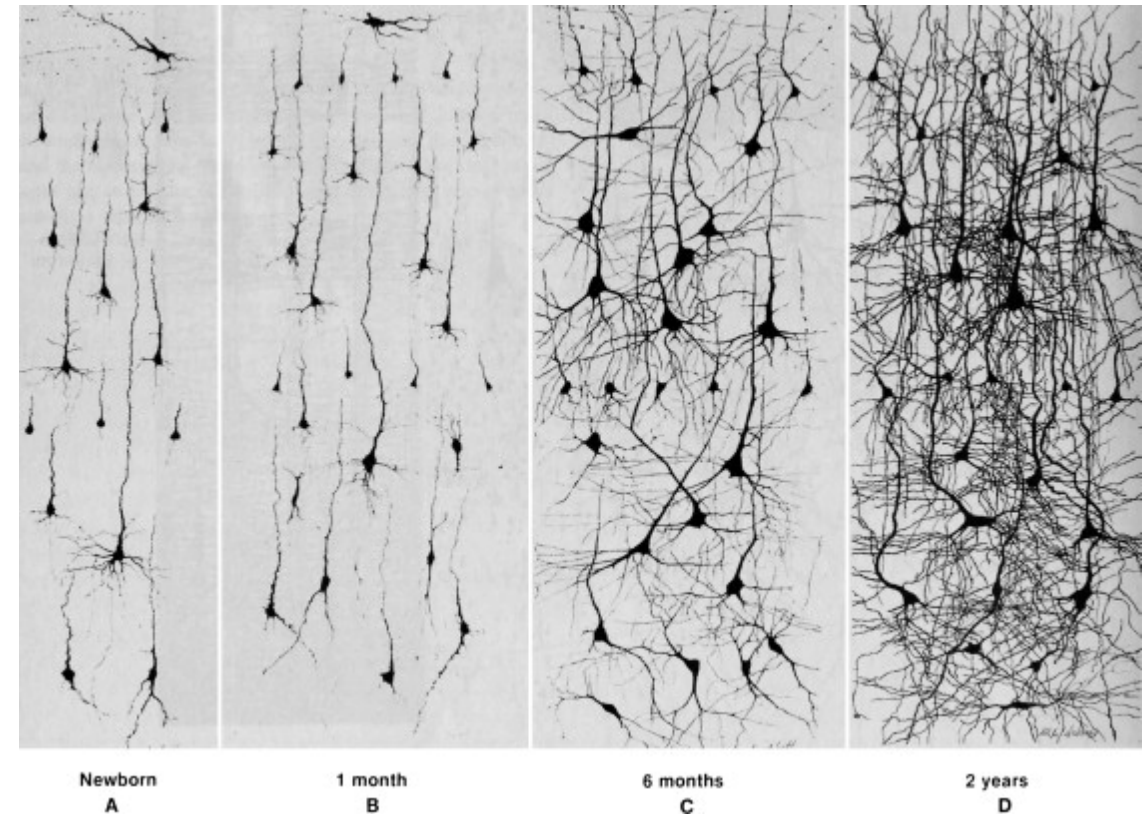


# Neurodevelopmental Outcomes Associated with Air Pollution



# Gestation and Early Childhood

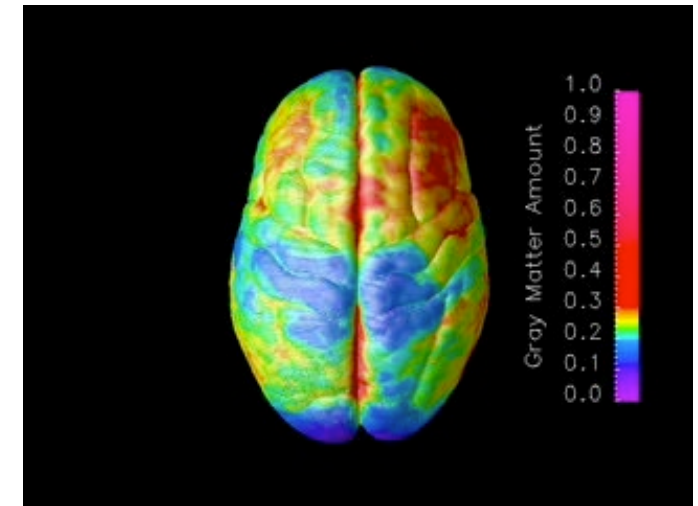
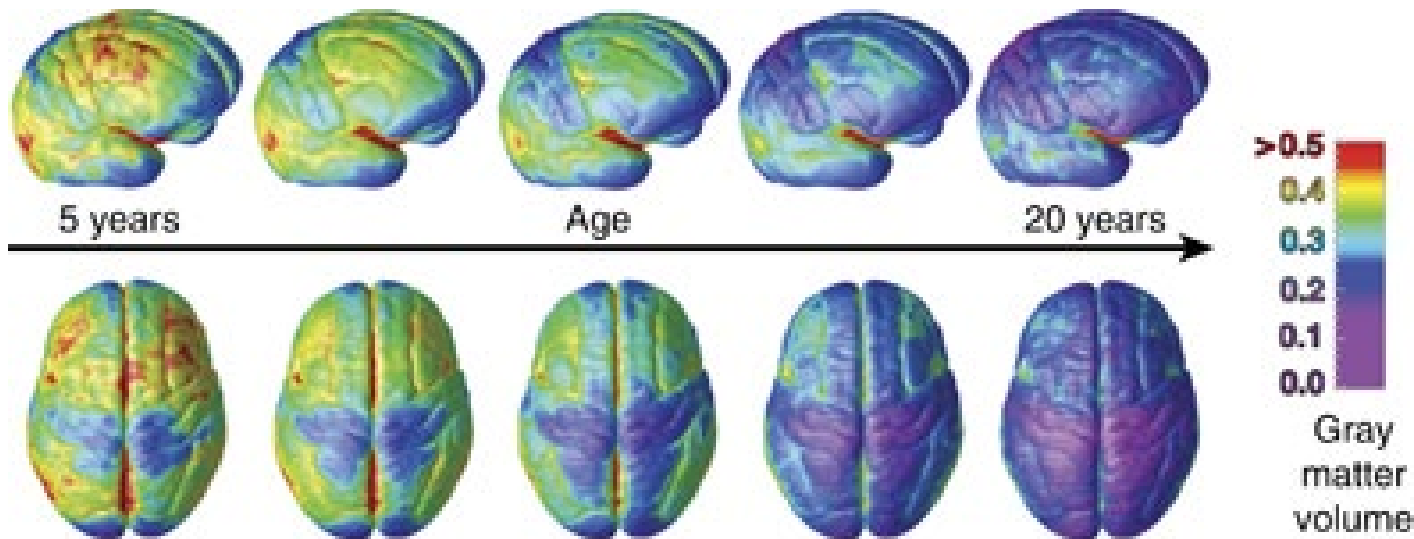
- Neuronal development
  - Rapid period of growth and connectivity through ~ 2 years followed by pruning
- Gray matter
  - Neuronal cell bodies ('brain cells')
    - Volume increases from mid-gestation through ~ 6 years followed by slow decrease
    - Subcortex peaks in adolescence
  - Muscle control, sensory perception, memory, emotions, decision-making
- White matter
  - Myelinated axons ('brain connections')
    - Rapid increase through early childhood with continued growth through ~ 30 years
    - Accelerated decline > 50 years
  - Signaling



Neuronal development in cerebral cortex, Courchesne et al. Neuron. 2007

# Adolescence

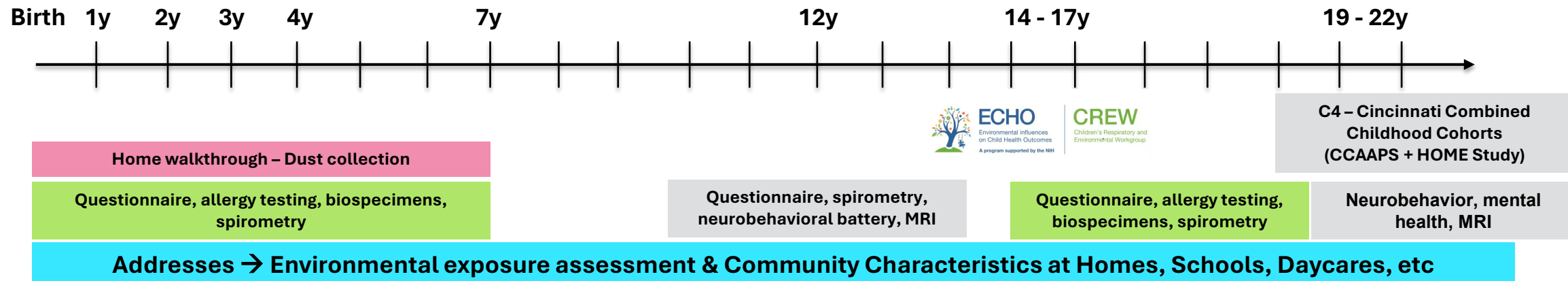
- Prefrontal cortex undergoes myelination and synaptic pruning
  - Loss of gray matter (↑ efficiency)
  - Decision-making, impulse control, planning
- Limbic system activity increases
  - Emotion and reward processing



Gogtay et al., 2004, PNAS

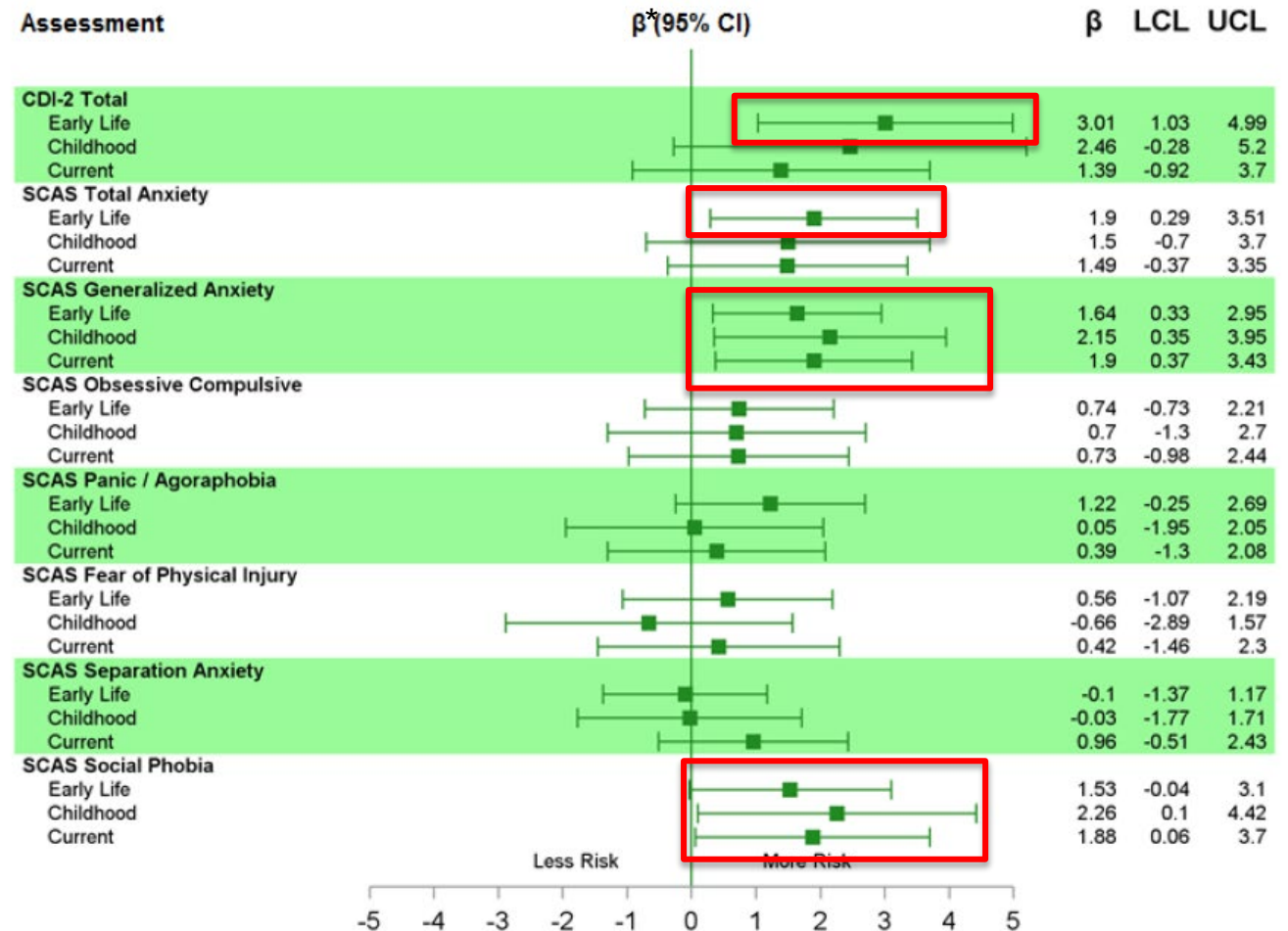
# Cincinnati Childhood Allergy and Air Pollution Study (CCAAPS)

- Determine if children exposed to traffic-related air pollution are at increased risk for
  - Allergic diseases and asthma
  - Adverse neurodevelopmental outcomes
- Longitudinal cohort of infants (n = 763) born 2001-2003 in greater Cincinnati, OH, USA
  - Birth record address < 400 m major road or > 1500 m from major road



# Childhood Exposure to TRAP and Symptoms of Depression and Anxiety at Age 12 y

- Early (6m) exposure to TRAP is significantly associated with child-reported depression (CDI) and anxiety (SCAS)
- Childhood and current exposure to TRAP is significantly associated with generalized anxiety and social phobia



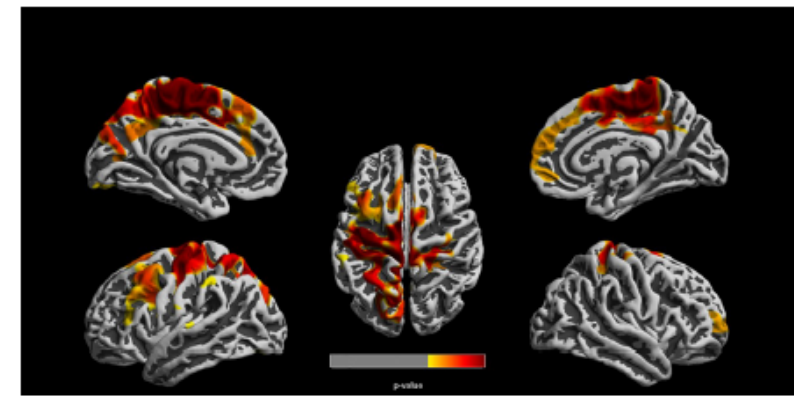
\*Adjusted for maternal age at delivery, average household income from birth through 12y, maternal depression, PRQ relational frustration, race, cotinine



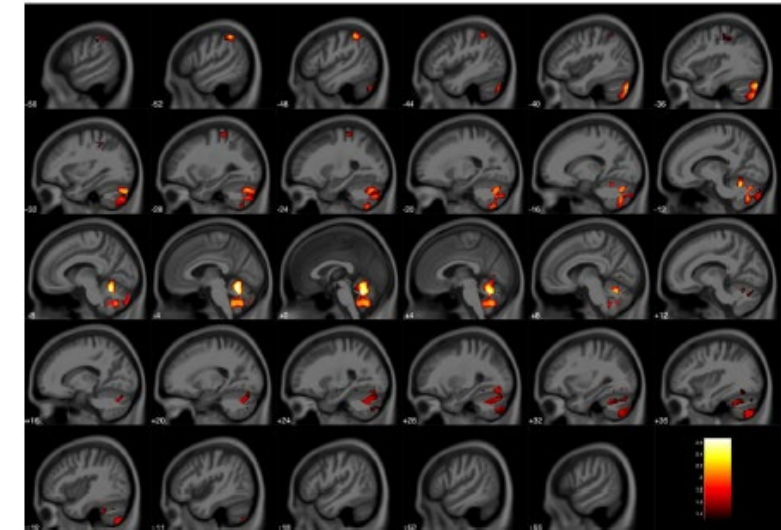
# Reduced gray matter volume and cortical thickness associated with traffic-related air pollution in a longitudinally studied pediatric cohort

Travis Beckwith<sup>1,2\*</sup>, Kim Cecil<sup>2</sup>, Mekibib Altaye<sup>3</sup>, Rachel Severs<sup>4</sup>, Christopher Wolfe<sup>3</sup>, Zana Percy<sup>5</sup>, Thomas Maloney<sup>2</sup>, Kimberly Yolton<sup>6</sup>, Grace LeMasters<sup>5</sup>, Kelly Brunst<sup>5</sup>, Patrick Ryan<sup>3</sup>

- Bilateral, medial region of reduced cortical thickness within the posterior frontal and anterior parietal lobes associated with ECAT exposure
  - Primary motor cortex and sensory areas
  - Voluntary movements and integrating somatosensory information including touch
- Reduced gray matter volume
  - Primarily in the cerebellum
  - Involved with regulating motor function, cognition, and emotion



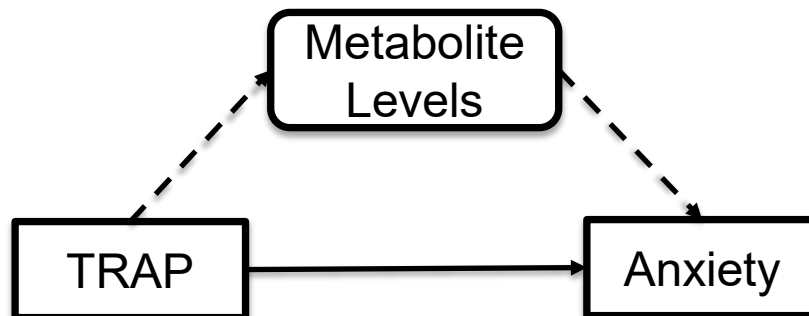
**Fig 1. Statistically significant clusters using threshold free cluster enhancement.** Clusters represent reduced cortical thickness in the high ECAT group compared to the low ECAT group. Clusters were corrected for multiple comparisons using a familywise error rate of  $p \leq 0.05$ .



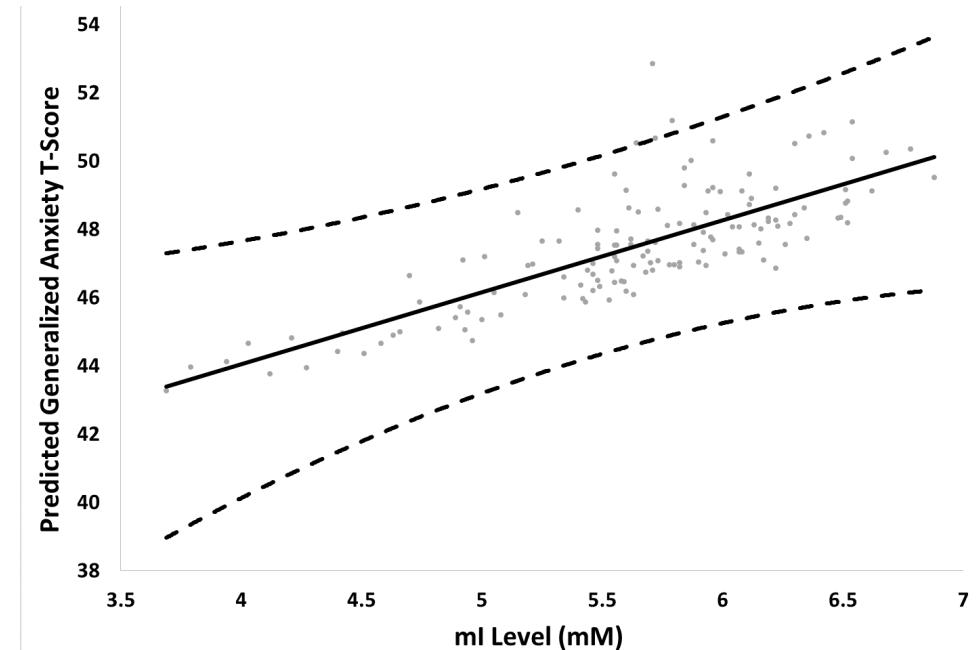
**Fig 2. Reduced gray matter volume in the high ECAT group compared to the low ECAT group.** Clusters were corrected for multiple comparisons using threshold free cluster enhancement with a familywise error rate of  $p \leq 0.05$ . Color bar represents  $-\log(p)$  value.

# Air Pollution, Brain Metabolism, and Anxiety

| TRAP Exposure in the Past 12 Months |              |                   |             |
|-------------------------------------|--------------|-------------------|-------------|
| Metabolite                          | $\beta$ ECAT | 95% CI            | P-value     |
| ml                                  | <b>0.26</b>  | <b>0.01, 0.51</b> | <b>0.04</b> |
| NAA                                 | 0.24         | -0.13, 0.61       | 0.22        |
| Cr                                  | 0.09         | -0.15, 0.32       | 0.47        |
| Cho                                 | 0.04         | -0.02, 0.11       | 0.20        |
| <b>Glu</b>                          | <b>0.32</b>  | <b>0.03, 0.61</b> | <b>0.03</b> |
| Glx                                 | 0.52         | -0.08, 1.11       | 0.08        |
| GSH                                 | 0.07         | -0.08, 0.21       | 0.38        |



20% of total effect mediated by myo-inositol

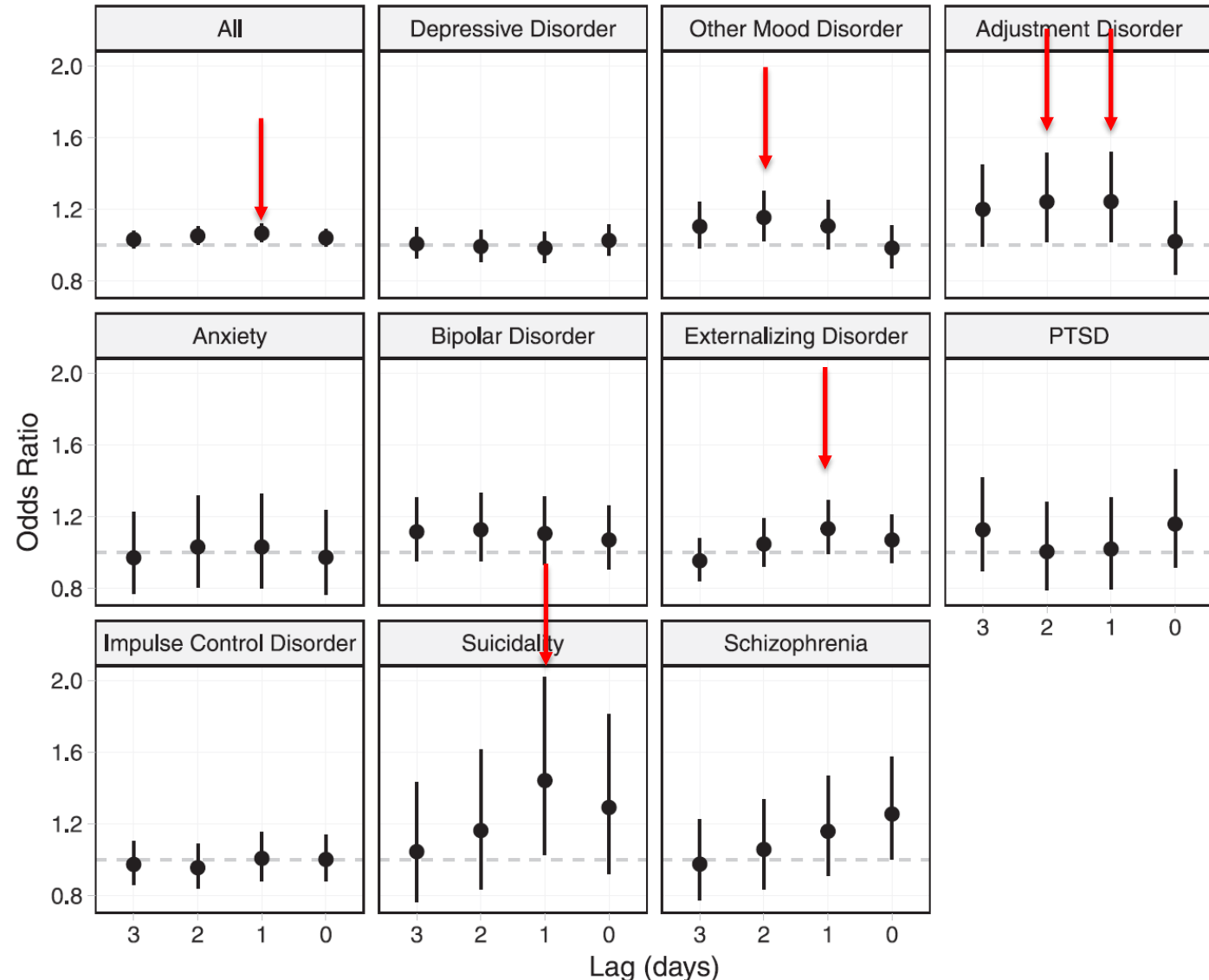


| SCAS Outcome        | $\beta$ ml | 95% CI     | P-value      |
|---------------------|------------|------------|--------------|
| Generalized Anxiety | 2.89       | 0.94, 4.83 | <b>0.004</b> |
| Total Anxiety       | 3.14       | 0.85, 5.43 | <b>0.007</b> |
| Social Phobia       | 2.52       | 0.34, 4.72 | <b>0.02</b>  |



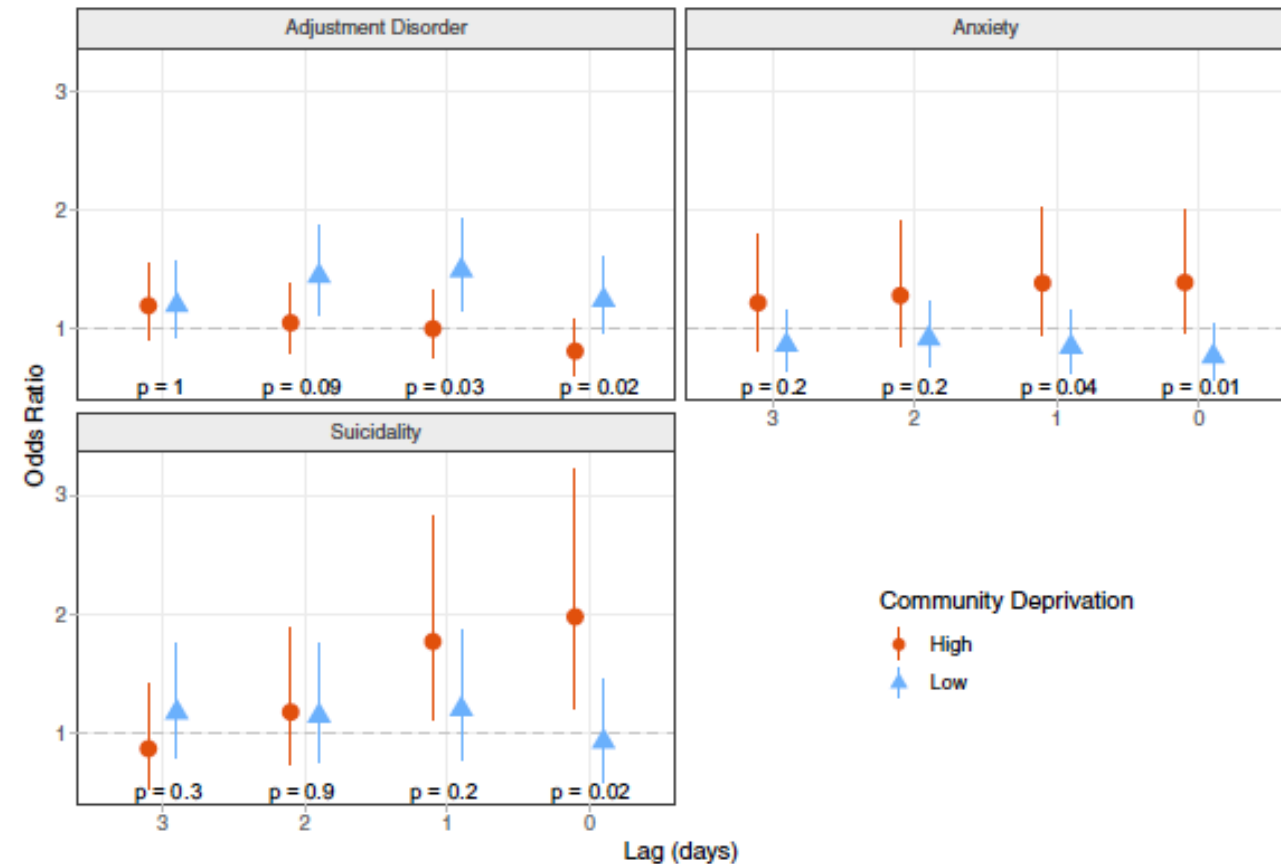
# Acute PM<sub>2.5</sub> Exposure and Pediatric Psychiatric Emergency Department Visits

| Psychiatric ED visit category | <i>n</i> |
|-------------------------------|----------|
| Overall                       | 13,176   |
| Adjustment disorder           | 702      |
| Anxiety                       | 486      |
| Bipolar disorder              | 1,001    |
| Depressive disorder           | 3,847    |
| Developmental disorder        | 88       |
| Externalizing disorder        | 1,850    |
| Impulse control disorder      | 1,755    |
| Other mood disorder           | 1,903    |
| Personality disorder          | 142      |
| PTSD                          | 519      |
| Schizophrenia                 | 500      |
| Suicidality                   | 275      |



# Community Characteristics Modify the Relationship Between Air Pollution and Mental Health

- Higher community deprivation increased risk for suicidality and anxiety
- Lower community deprivation increased risk for adjustment disorders



# Acknowledgements

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