

# What We Have Learned about Effects on Health at Low Levels of Exposure: Evidence from the United States, Canada, and Europe

Bob O'Keefe Health Effects Institute

*HEI Annual Conference*

*May 25, 2021*



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# OVERALL OBJECTIVES OF RFA 14-3

## Studies to:

- Assess health effects of exposure to low levels of ambient air pollution on all-cause and cause-specific mortality and morbidity
- Exposure-response function(s) for PM<sub>2.5</sub> and other pollutants at low levels
- Develop statistical and other methodologies
  - New/improved exposure surfaces and estimates



## Request for Applications

HEALTH  
EFFECTS  
INSTITUTE

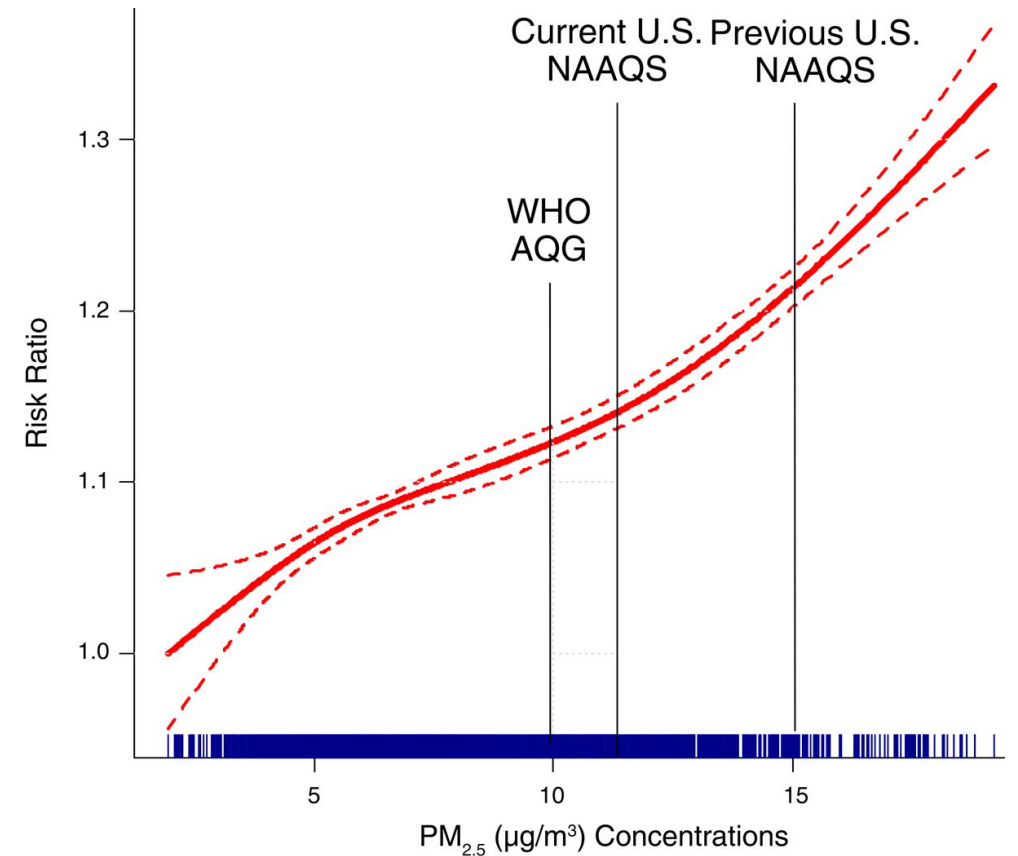
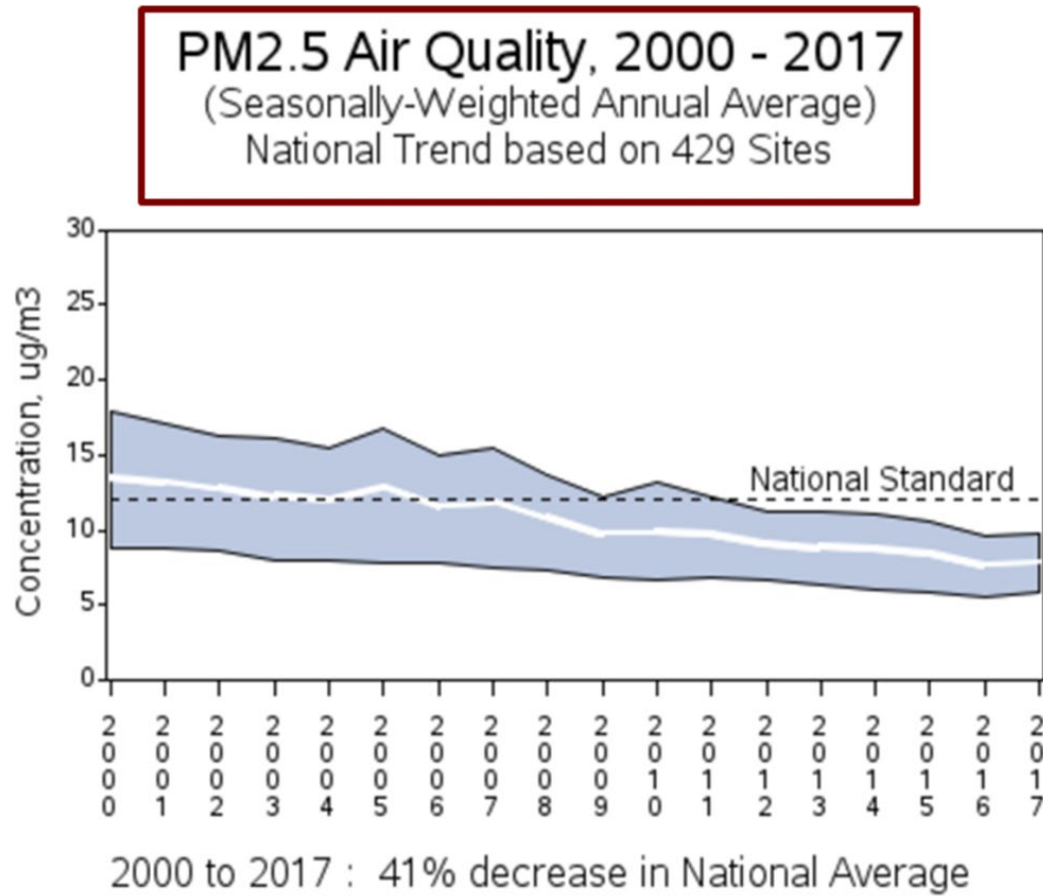
December 2014

Fall 2014 Research Agenda

RFA 14-3 Assessing Adverse Health Effects of Long-Term  
Exposure to Low Levels of Ambient Air Pollution

# Motivation for HEI's Low Exposure Studies Program

## *Declines in Air Pollution yet effects observed at low Levels*



Shape of the concentration–response function for mortality associated with fine particulate matter in a Canadian Cohort. (Courtesy R. Burnett)

# What are the Policy-relevant Questions These Studies Seek to Help Answer?

- *A Better understanding of Concentration-Response relationships:*
  - Helps understand the shape of the relationship at very low and very high levels
    - E.g., is there a threshold, and at what level?
  - Helps to assess whether a particular exposure may cause a specific effect, and
  - Estimates the public health burdens from an exposure
- *Provides a basis to Inform at least two important policy questions:*
  1. At what level should we set ambient air quality standards?
  2. To what level of exposure should we estimate health impacts?

## These Studies, When Completed and Reviewed, are Expected to Contribute Significantly by:

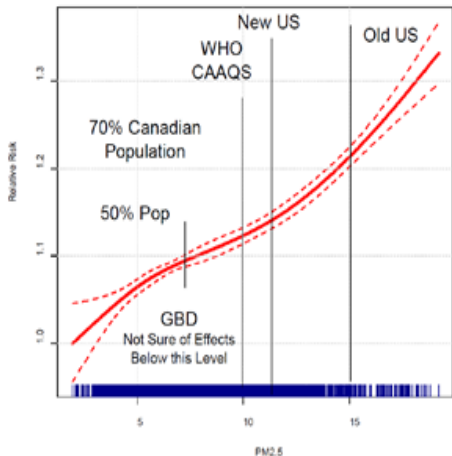
- Harnessing exceptionally large data sets to estimate exposure at the lowest levels;
- Considering potential confounders to the maximum extent possible;
- Applying a range of analytic approaches to test sensitivity to model selection – and possible causal inference

# Estimating the Effects of Exposure to Low Levels of Air Pollution

Three studies, selected competitively, and have common and unique features:

- Populations with millions in the US, Canada, and Europe; and both administrative and traditional cohorts
- Satellite data and ground level exposure measurements; and high-quality exposure assessment models at high spatial resolutions
- Development and application of novel statistical methods

Figure 1 Shape of Canadian Concentration-Response Function  
(From Burnett 2013 drawn from Crouse 2012)



# Estimating the Effects of Exposure to Low Levels of Air Pollution – HEI studies

## Geographical areas

**PI: Michael Brauer, U  
British Columbia  
(~ 10 million)**

**PI: Francesca  
Dominici, Harvard  
(~ 60 million)**

**PI: Bert Brunekreef,  
Utrecht University  
(~28 million)**

**Average PM<sub>2.5</sub> levels:  
15 µg/m<sup>3</sup> (Europe)  
11 µg/m<sup>3</sup> (US)  
7 µg/m<sup>3</sup> (Canada)**

**Current PM<sub>2.5</sub> Standards  
US 12 µg/m<sup>3</sup>  
Europe 25 µg/m<sup>3</sup>  
WHO AQG 10 µg/m<sup>3</sup>**

# Ensuring the highest quality from the studies

- Detailed and continuing HEI oversight:
  - **Oversight Committee**, chaired by Jon Samet (Colorado School of Public Health)
    - Bi-Annual Progress reports, webinars, meetings and workshops, QA/QC audits
  - **Low Exposure Review Panel**, Chaired by Sverre Vedal, University of Washington
    - Detailed Peer Review, Commentary for Each Study
- **Results today include –**
  - **Initial findings for US and Canada that were published, after review, in November 2019**
  - **Final comprehensive results currently in peer review and will be published with commentaries later this year**
- Because of the rich datasets, HEI is now funding additional individual and joint analyses to further test the results, including:
  - Harmonized analyses across all three populations
  - Additional causal analyses
  - Probing of relationships of multiple pollutants, shape and covariates



## Michael Brauer

Jeff Brook (University of Toronto)

Richard Burnette (Health Canada)

Tanya Christidis (Statistics Canada)

Yen Chu (University of British Columbia)

Dan Crouse (University of New Brunswick)

Anders Erickson (University of British Columbia)

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## Bert Brunekreef

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Barbara Hoffmann (Heinrich Heine University Düsseldorf, Germany)

Annette Peters, Kathrin Wolf (Helmholtz Zentrum München, Germany)

Gudrun Weinmayr (Ulm University, Germany)

Marie-Christine Boutron (French National Institute of Health and Medical Research)

John Gulliver, Daniela Fecht (Imperial College, UK)

Zorana Andersen, Shuo Liu, Amar Mehta (University of Copenhagen, Denmark)

Nicole Janssen, Jochem Klompmaker (National Institute for Public Health and the Environment (RIVM), The Netherlands)

Richard Atkinson (St George's University of London, UK)

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Ole Hertel, Torben Sigsgaard, Matthias Ketzler (Aarhus University, Denmark)

Per Schwarze, Bente Oftedal (Norwegian Institute of Public Health, Norway)

Kees de Hoogh, Danielle Vienneau (Tropical and Public Health Institute, Switzerland)

Mariska Bauwelinck (Vrije Universiteit Brussel, Belgium)

# Teams

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# ***THANK YOU***

Bob O'Keefe  
Health Effects Institute



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