

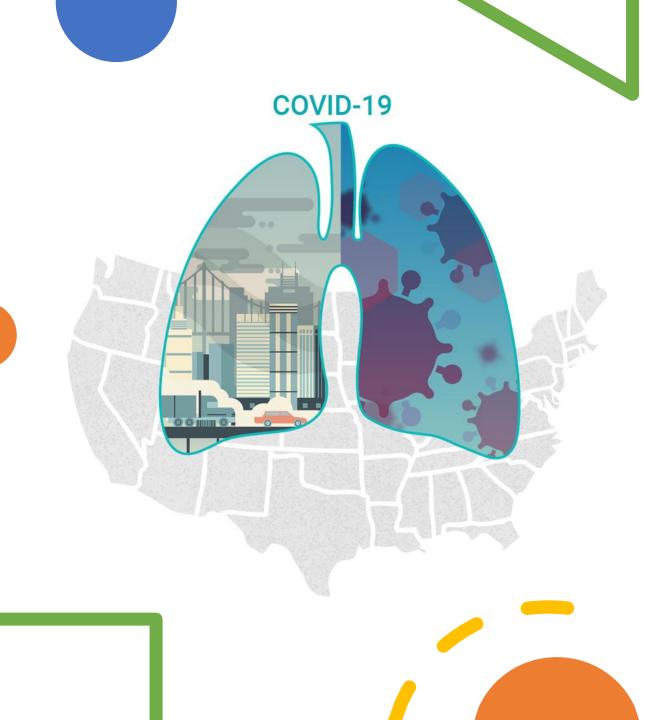
ROLLINS SCHOOL OF PUBLIC HEALTH

2022 Clean Air Council Public Hearing April 12, 2022

Donghai Liang, PhD

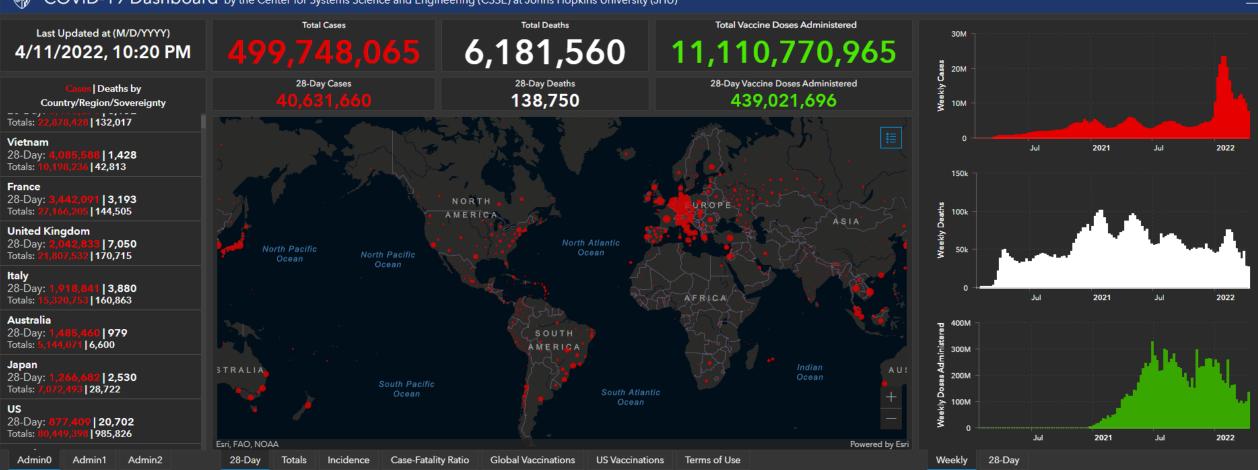






Background Introduction

Background



COVID-19 Dashboard by the Center for Systems Science and Engineering (CSSE) at Johns Hopkins University (JHU)

https://coronavirus.jhu.edu/map.html

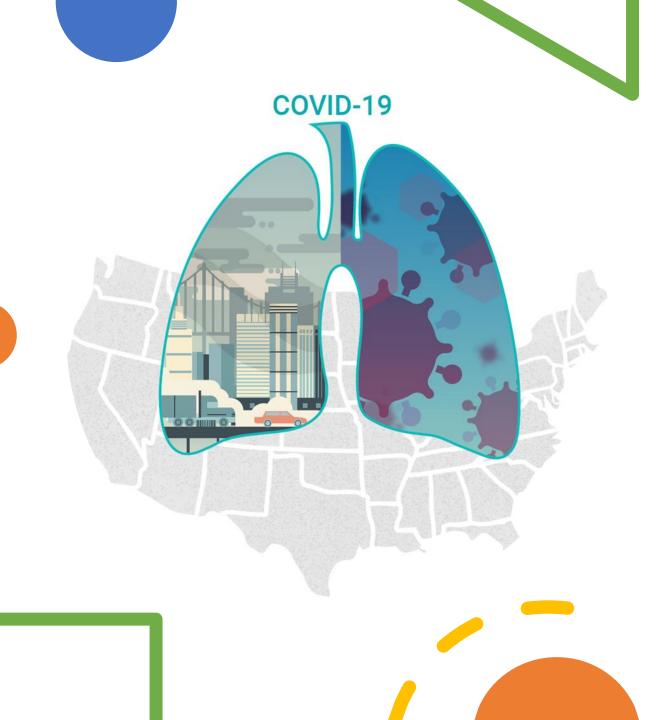


Environmental factors may play an important role in increasing susceptibility to severe outcomes of COVID-19

Impact of ambient air pollution on excess morbidity and mortality has been well-established over several decades

Prolonged exposure to air pollution may have a detrimental effect on the prognosis of patients affected by COVID-19

Early findings revealed crude positive correlation between air pollution and COVID 19 mortality rate in China and Europe



Epidemiological Evidence

Objective

Conduct a nationwide study in the USA (3,122 counties) examining associations between multiple

key ambient air pollutants, NO₂, PM_{2.5}, and O₃, and COVID-19 case-fatality and mortality rates in

both single and multi-pollutant models, with comprehensive covariate adjustment

Hypothesis

Residents living in areas with higher long-term ambient air pollution levels may be more susceptible to COVID-19 severe outcomes, thus resulting in higher COVID-19 case-fatality rates and mortality rates among more heavily polluted counties

Method- COVID-19 Data

Official number of daily county-level COVID-19 confirmed cases and deaths that occurred from January 22, 2020 through July 17, 2020 in the US obtained from three independent databases:

The New York Times USA FACTS



COVID-19 confirmed case and death counts include both laboratory confirmed cases/deaths and presumptive positive cases/probable deaths

Data were compared and corrected across all databases for accuracy and consistency

Main outcome variables of the analysis

COVID-19 case-fatality rate = number of deaths over the number of people diagnosed for each US county with at least 1 or more confirmed case

COVID-19 mortality rate = the number of COVID-19 deaths per million population for each US county

Method- Exposure Assessment

Three major criteria air pollutants included:

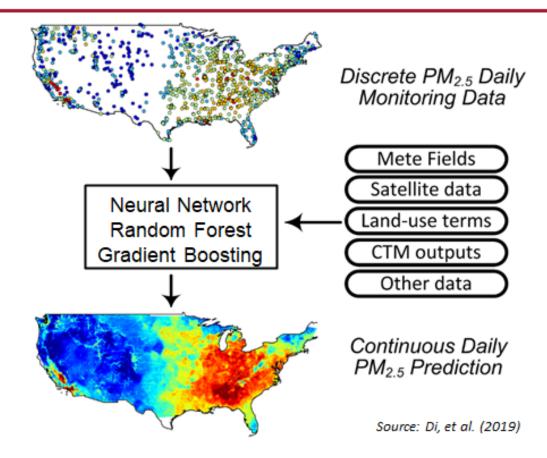
 NO_2 $PM_{2.5}$ O_3

Daily ambient levels estimated at 1 km² spatial resolution across the Contiguous US using an ensemble machine learning model (Di, et al, 2019)

Annual mean (2010-2016) calculated for NO₂ and PM_{2.5}, and the warm-season mean (2010-2016) for O₃, defined as May 1 to October 31

Sensitivity analysis: annual mean between 2000-2016 as the county-level exposure estimates

High-resolution (1 km × 1 km) $PM_{2.5}$ for 2000-2016



Method- Statistical Analyses

Zero-inflated negative binomial mixed models (ZINB), comprising a negative binomial log-linear count model and a logit model to fit over-dispersed count data with extra zeros values

Single-pollutant, bi-pollutant, and tri-pollutant models fit separately

Control of potential confounders:

state-level test positive rate, county-level healthcare capacity, phase-of-epidemic, population mobility, population density, sociodemographics, socioeconomic status, race and ethnicity, behavioral risk factors, and meteorology

Also control for potential residual spatial trends and confounding by including spatial smoothers

Sensitivity analysis:

66 sets of sensitivity analyses to test the robustness of our results to outliers, confounding adjustment, and epidemic timing by omitting a different set of covariates for each model iteration and compared effect estimates

Results

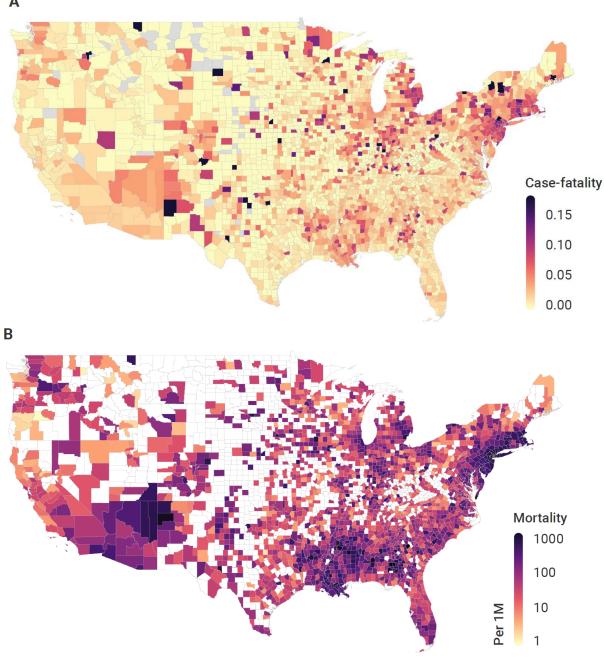
3,122 US counties considered in the current analysis

Between January 22, 2020 through July 17, 2020, 3,659,828 COVID-19 cases and 138,552 deaths reported in 3,076 (98.5%) and 2,088 (66.9%) US counties, respectively

Average county-level case-fatality rate: $2.4 \pm 3.2\%$

Average mortality rate: 298.0 ± 412.8 per 1 million people

Spatial variations observed on COVID-19 case-fatality and mortality rates



Results

С

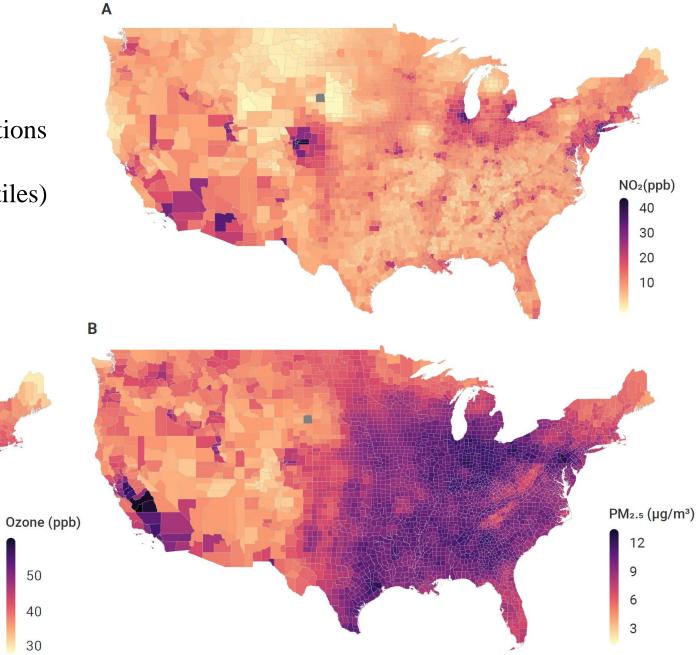
Long-term (2010-2016) average concentrations

5.8 to 19.3 ppb (5th and 95th percentiles) NO_2 $PM_{2.5}$ 3.8 to 10.4 µg/m³ 37.2 to 49.7 ppb O₃

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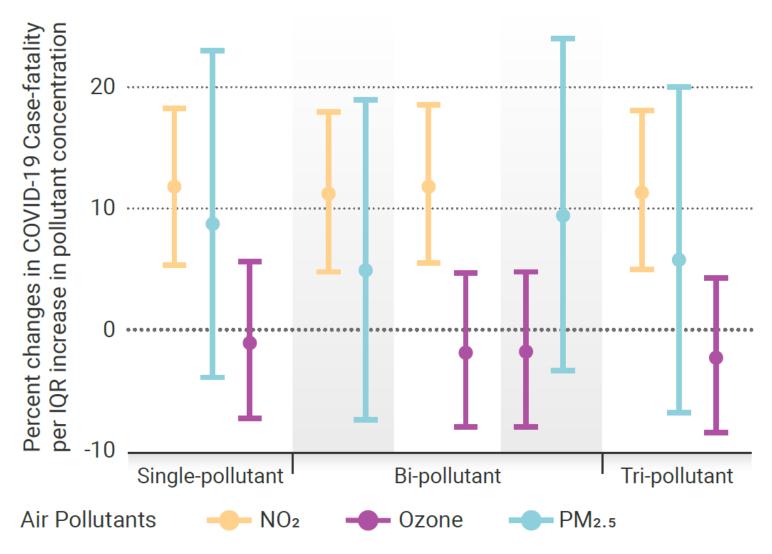
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Results- Covid-19 Case Fatality and Long-term Air Pollution Exposures

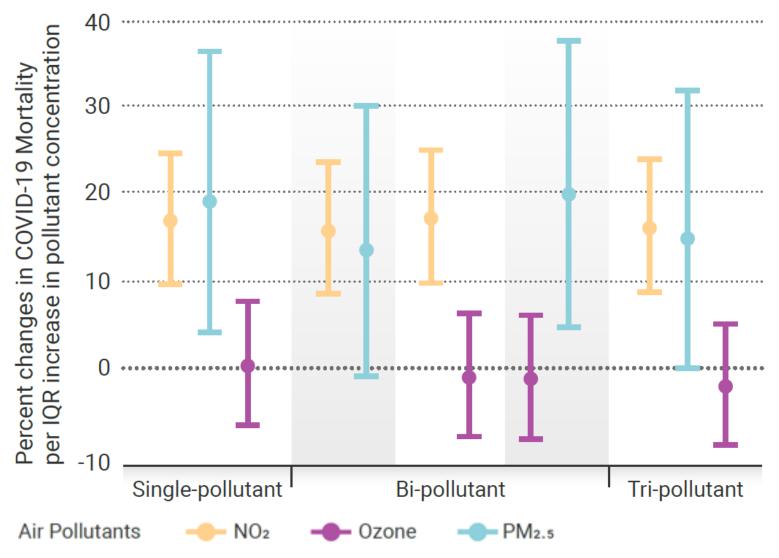
A. Case-fatality



- Per IQR (~4.6 ppb) increases in NO₂ was associated with 11.3% (95% CI 4.9% to 18.2%) in COVID-19 case fatality rate.
- Neither $PM_{2.5}$ (95% CI: -6.9% to 20.0%) or O_3 (95% CI: -8.6% to 4.2%) was associated with COVID-19 case-fatality rate
- One IQR reduction in long-term exposure to NO₂ level <u>would have</u> <u>avoided 14,672 deaths</u> among those tested positive for the virus.

Results- Covid-19 Mortality and Long-term Air Pollution Exposures

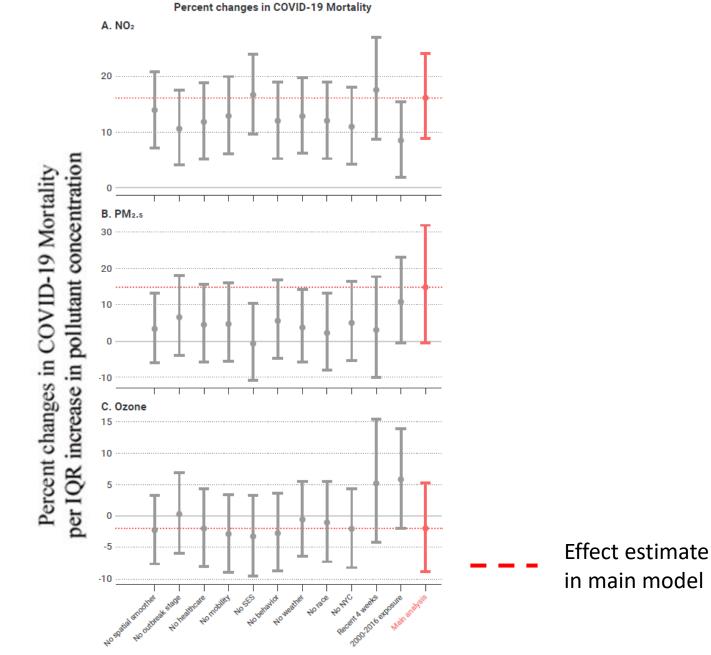
B. Mortality



- Per IQR (~4.6 ppb) increases in NO₂ was associated with 16.2% (95% CI 8.7% to 24.0%) in COVID-19 mortality rate.
- Per IQR (~2.6 ug/m³) increases in PM_{2.5} was marginally associated with 14.9% (95% CI: 0.0% to 31.9%) in COVID-19 mortality rate.
- O_3 was not associated with COVID-19 mortality rate (95% CI: -8.9% to 5.1%)

Results- Sensitivity Analyses

A. NO₂ 20 Percent changes in COVID-19 Case-fatality per IQR increase in pollutant concentration 10 B. PM2.5 20 10 -10 C. Ozone 15 10 n -10 No SES behavior HORA -0002016 erge



Discussion

Potential link between urban air pollution and COVID-19 risk

- NO₂ levels associated with both county-level COVID-19 case-fatality rate and mortality rate
- Marginal association long-term PM_{2.5} exposure and COVID-19 mortality rate
- Null associations were found for long-term O₃

NO₂ may be an important risk factor of COVID-19 death

• NO₂ may enhance biological susceptibility to server COVID-19 outcomes

Public health actions needed to protect vulnerable populations

- Strengthened enforcement on social distancing and facial masking
- Expanding healthcare capacity
- Continuation and expansion of current efforts to lower traffic emissions and ambient air pollution

https://www.cell.com/the-innovation/fulltext/S2666-6758(20)30050-3

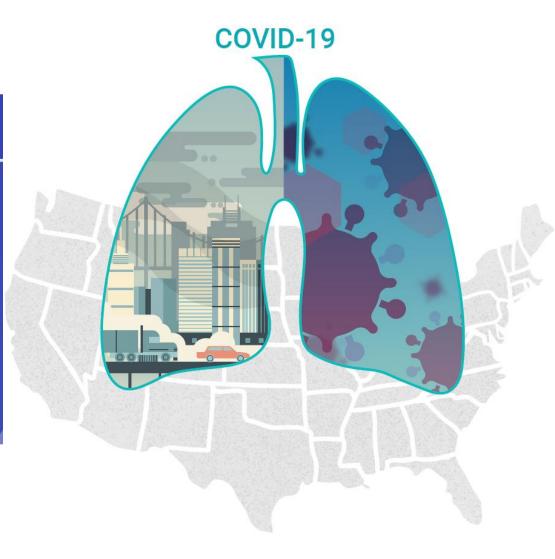
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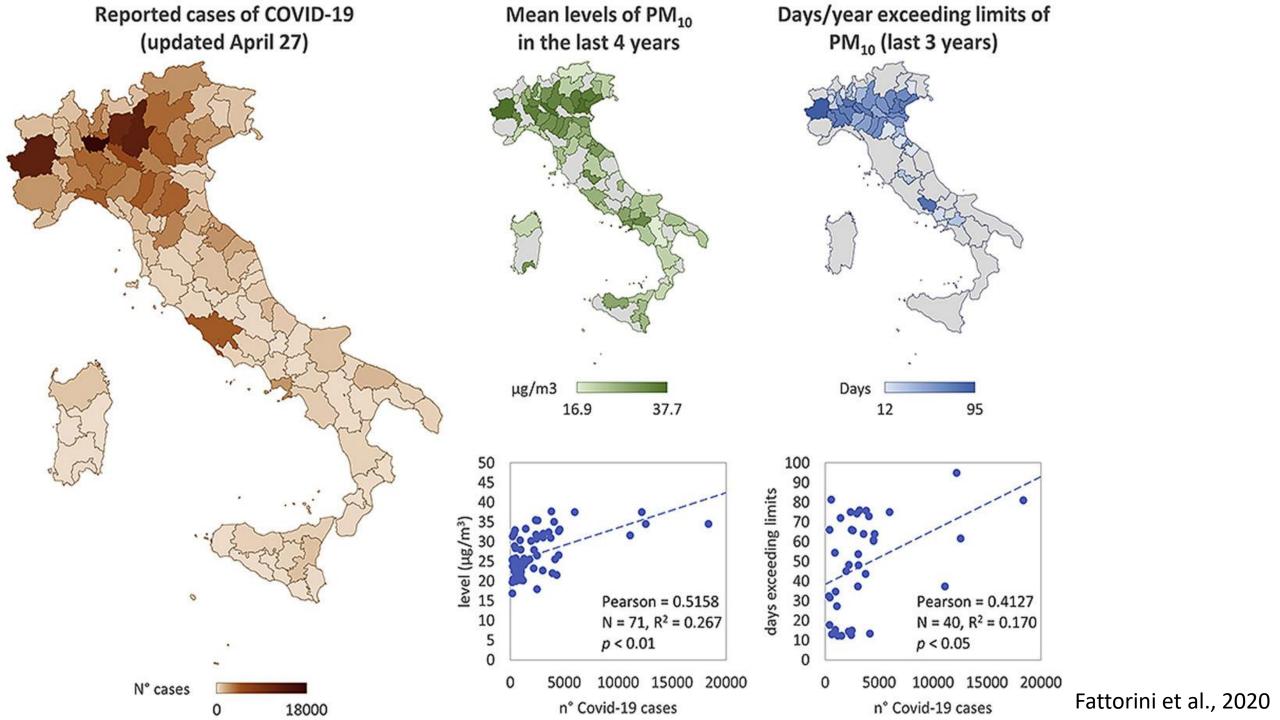
Urban Air Pollution May Enhance COVID-19 Case-Fatality and Mortality Rates in the United States

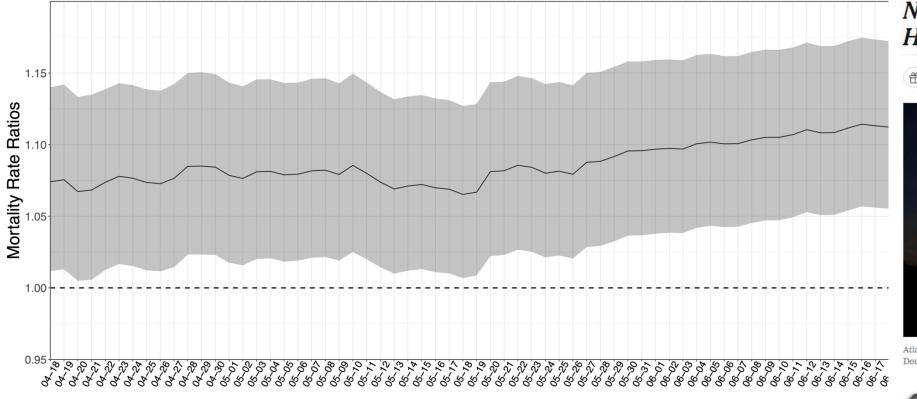
Donghai Liang, PhD <u>A</u> <u>C</u> Liuhua Shi, ScD <u>S</u> Jingxuan Zhao, MPH Pengfei Liu, PhD Jeremy A. Sarnat, ScD Song Gao, PhD Joel Schwartz, PhD Yang Liu, PhD Stefanie T. Ebelt, ScD Noah Scovronick, PhD Howard H. Chang, PhD Show less Show footnotes

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New Research Links Air Pollution to Higher Coronavirus Death Rates

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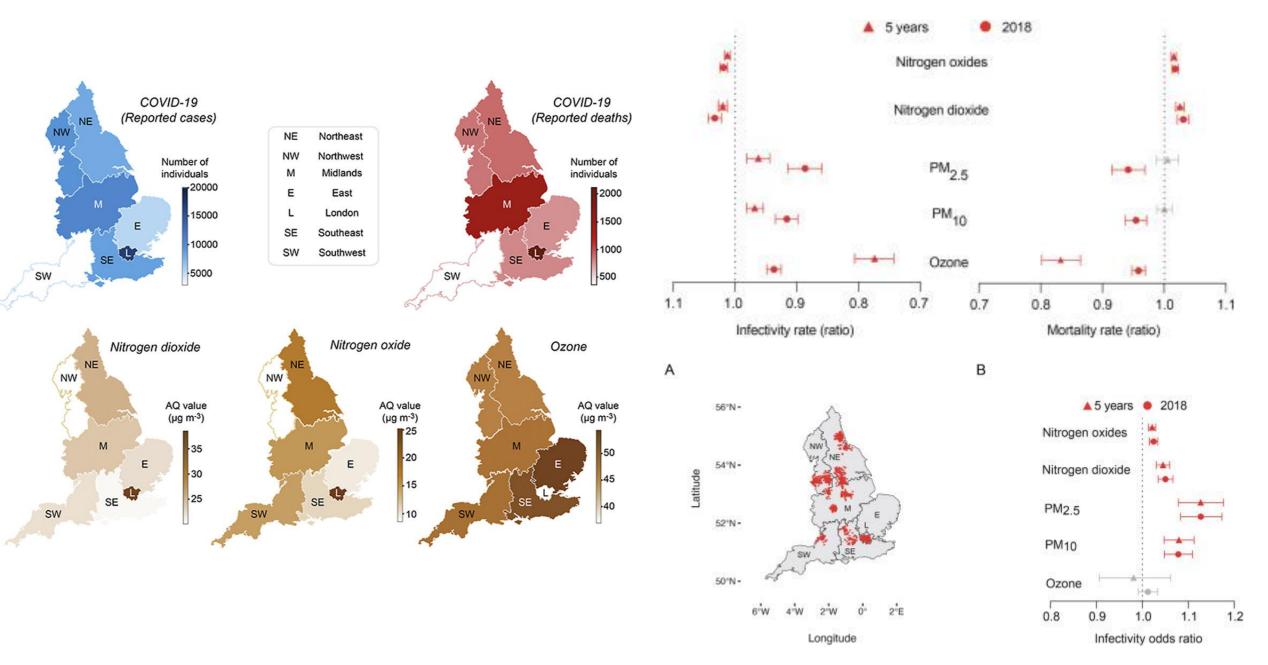
Atlanta on Saturday evening. The area is likely to suffer more deaths than the adjacent Douglas County, Ga. Kevin C. Cox/Getty Images



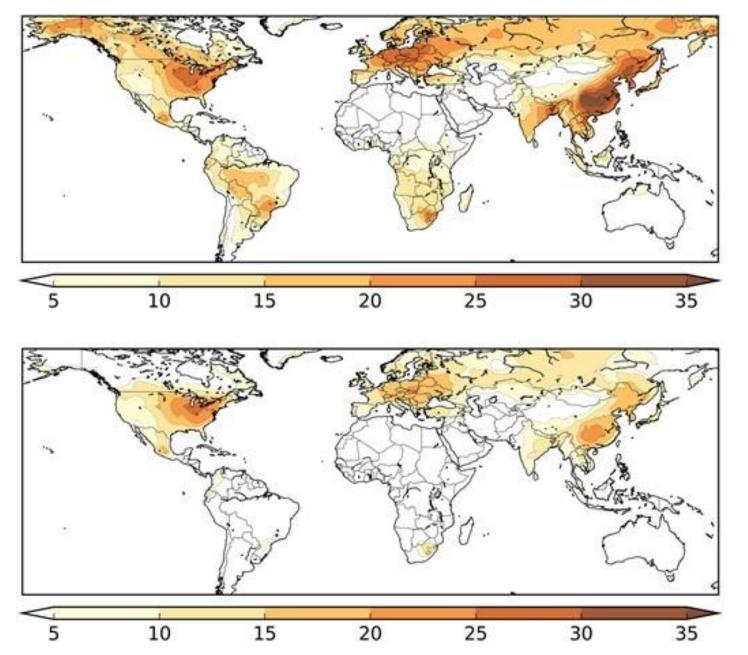
Published April 7, 2020 Updated April 17, 2020

Figure: COVID-19 mortality rate ratios (MRR) per 1 μ g/m3 increase in PM_{2.5} and 95% CI using daily cumulative COVID-19 death counts in US from April 18, 2020 to June 18, 2020.

Wu et al., 2020



Travaglio et al., 2021



Particulate air pollution contributed ~15% (95% confidence interval 7–33%) to COVID-19 mortality worldwide 27% (13 – 46%) in East Asia 19% (8–41%) in Europe 17% (6–39%) in North America.

Globally, \sim 50–60% of the attributable, anthropogenic fraction is related to fossil fuel use, up to 70–80% in Europe, West Asia, and North America.

Estimated percentages of COVID-19 mortality attributed to air pollution from all anthropogenic sources (top), and from fossil fuel use only (bottom). The regions with high attributable fractions coincide with high levels of air pollution. The mapped results account for population density, thus reflecting population weighted exposure to PM2.5.



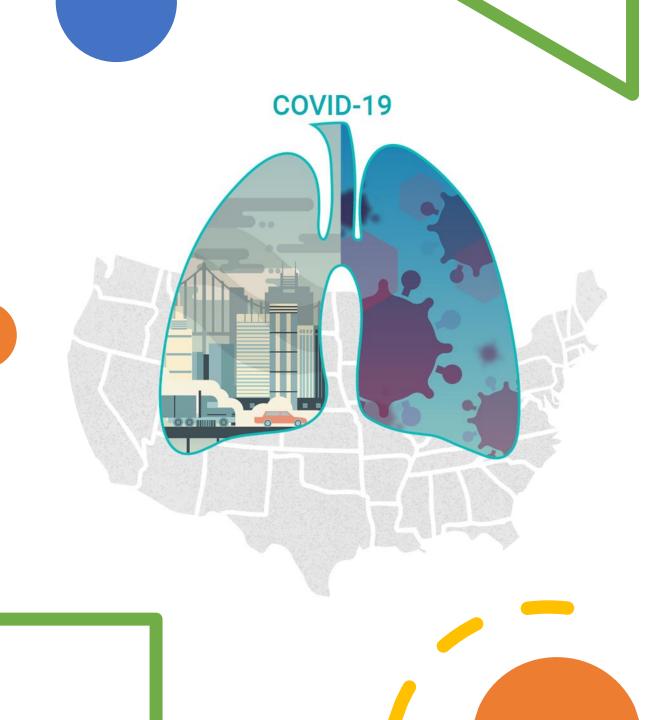
Environmental Research Volume 203, January 2022, 111930



Positive association between outdoor air pollution and the incidence and severity of COVID-19. A review of the recent scientific evidences Review on recent reviews on the influence of air pollution of the transmission of SARS-CoV-2 and the incidence and severity of COVID-19

Montse Marquès Ӓ ⊠, José L. Domingo

- Significant association between chronic exposure to various outdoor air pollutants: PM_{2.5}, PM₁₀, O₃, NO₂, SO₂ and CO, and the incidence/risk of COVID-19 cases
- Significant association between chronic exposure to various outdoor air pollutants and the severity/mortality of the disease.
- Lack of evidence on other important air pollutants such as VOCs, dioxins and furans, or metals
- Some studies point to PM_{2.5} and PM₁₀ as potential airborne transmitters of the virus.
- Environmental air pollution plays an important negative role in COVID-19, increasing its incidence and mortality.



Potential Mechanism

Stroke Encephalitis Loss of smell and taste

Pneumonia, ARDS

Acute coronary syndrome

Heart failure

Myopericarditis

Pulmonary embolism

Vasculitis

Disseminated intravascular coagulation

Stroke Neuro-degenerative and inflammatory diseases

Asthma, COPD, lung cancer

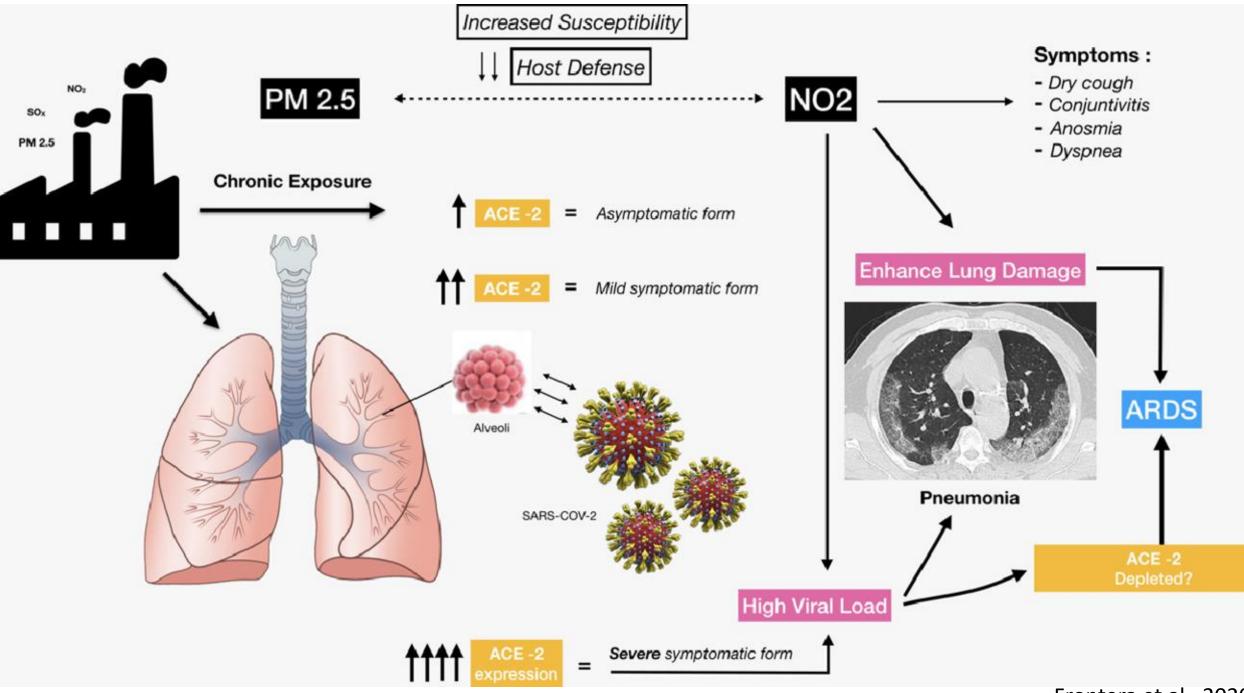
Atherosclerosis

Acute coronary syndrome

Heart failure

FIGURE 1 Target organs and the main diseases that coronavirus disease 2019 (blue) and air pollution (green) share. ARDS: acute respiratory distress syndrome.

Bourdrel et al., 2021



Frontera et al., 2020

Summary

- Positive associations between outdoor air pollution and the incidence and severity of COVID-19
- Significant reduction in pollution emissions and air pollutant levels due to the lockdown measures in the early pandemic
- Actions needed to protect vulnerable populations and disadvantaged communities
- Transition towards a green economy with clean, renewable energy sources

Acknowledgement









https://www.cell.com/the-innovation/fulltext/S2666-6758(20)30050-3

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