## Wildfire Smoke: Health Effects and Public Health Outreach

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Acting Director, National Health and Environmental Effects Research Laboratory Office of Research and Development US EPA

The Sand Fire Santa Clarita Valley July 2016 Credit: Kevin Gill/flickr Arkansas Department of Environmental Quality North Little Rock, Arkansas March 30, 2018

#### Wildland Fires & Their Emissions A <u>Global</u> Public Health Issue

Global mortality from wildfire smoke: Estimated to be 339,000 persons/year Johnson FH et al. Environ Health Perspect 2012

> URL: lance-modis.eosdis.nasa.gov/cgibin/imagery/firemaps.cgi

Global Fire Map 2/20/2016 – 2/29/2016

**Set EPA**

# SEPA Wildland Fires & Their Emissions Community Public Health Issue



Brianna Paciorka Knoxville News Sentinel



#### Wildland Fires & Their Emissions An Individual & Occupational Health Issue



URL: lance-modis.eosdis.nasa.gov/cgibin/imagery/firemaps.cgi

## Wildfire Smoke is an Increasing Public Health Hazard in the U.S.

#### **Present Concerns**

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- Increasing acreage burned
- Increasing impact on urban areas
  - 10% of all land with housing are situated in the wildland-urban interface
  - 38.5% of U.S. housing units
- Increasing vulnerability of sensitive populations

(Radeloff et al. 2005)



Adapted from https://www.nifc.gov/fireInfo/fireInfo\_stats\_totalFires.html

# **Sepa**

#### Changing U.S. Demographic Increases Risk to Wildfire Smoke

#### **Changing US Demographic**

 Median age of U.S. Population will continue to shift upward

Higher Prevalence of Chronic Diseases Conferring Risk to Wildland Fire Smoke

- Aging U.S. population with increasing prevalence of:
  - Heart-lung disease, obesity, diabetes
  - 27% of U.S. population falls into a risk group

#### **Increasing Population Living in WUI**

 More than 2,000,000 acres/yr converted to WUI





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Xu J, et al.. NCHS Data Brief No. 267, 2016 7

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Xu J, et al.. NCHS Data Brief No. 267, 2016 8

#### 2010 Wildland-Urban Interface Arkansas



**€PA**

Martinuzzi S, et al. 2015 www.fs.usda.gov/treesearch/pubs/48642

## 

## Air-Quality Impacts Extend Long Distances



Health Impacts Can Extend Hundreds of Miles and Affect Heavily Populated Urban Areas

- Forest fires in Quebec, Canada, during July 2002 (red circles)
- Baltimore, Maryland, a city nearly a thousand miles downwind
- 30-fold increase in airborne fine particle concentrations

Source: Moderate Resolution Imaging Spectroradiometer (MODIS) instrument on the Terra satellite, Land Rapid Response Team, NASA/GSFC



#### Wildfire Smoke: A Complex Mixture Depends on Fuel & Combustion Conditions



Cascade Complex, Idaho, 2007

## Varies Spatially & Temporally

- Particulate matter
- CO
- VOCs
- Trace gases
- Air toxics
- Metals
- Ozone



China S, et al. Nat Commun 4, No.: 2122 doi:10.1038/ncomms3122

#### *Air-Quality Impacts* Urban Areas, at a Distance, High Exposures

#### 2013 California Rim Fire

EPA



Daily mass intake breathing PM at the EPA 24 hr  $PM_{2.5}$  standard (35µg/m<sup>3</sup>) = 486 µg  $PM_{2.5}$ /day

Navarro KM et al. Environ Sci Tech 2016

#### **Affected Californian Counties**





**Exposure up to 35 times greater** than the 24 hr PM<sub>2.5</sub> standard

## Understanding the Effects of Wildfire Smoke on Health

#### Key Requirements: Exposure Assessment & Health Outcome Data

- Exposure Assessment
  - Location
  - Pollutants and their concentration
  - Duration of exposure
  - Weather and other confounders

#### Health Outcomes

- Administrative health data



## Understanding the Effects of Wildfire Smoke on Health

hattanooga

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## Game Changers:

- Satellite imaging of spatial and temporal distribution of pollutants and exposure modeling
- GIS coding of residences
- Large health data sets



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#### Health Outcomes

- Administrative health das
- Syndromic surveillance data

- Electronic health records
- Pharmacy medication usage
- Health confounders

## Game Changers:

- Satellite imaging of spatial and temporal distribution of pollutants and exposure modeling
- GIS coding of residences
- Large health data sets





### Health Effects of Wildfire Smoke Systematic Reviews are Now Available



Jia C. Liu<sup>a,\*</sup>, Gavin Pereira<sup>b</sup>, Sarah A. Uhl<sup>a</sup>, Mercedes A. Bravo<sup>a</sup>, Michelle L. Bell<sup>a</sup>

*Environ Health Perspect.* 2016; 124:1334–1343 Review

A Section 508–conformant HTML version of this article is available at http://dx.doi.org/10.1289/ehp.1409277.

#### **Critical Review of Health Impacts of Wildfire Smoke Exposure**

Colleen E. Reid,<sup>1,2</sup> Michael Brauer,<sup>3</sup> Fay H. Johnston,<sup>4,5</sup> Michael Jerrett,<sup>1,6</sup> John R. Balmes,<sup>1,7</sup> and Catherine T. Elliott<sup>3,8</sup>

<sup>1</sup>Environmental Health Sciences Division, School of Public Health, University of California, Berkeley, Berkeley, California, USA; <sup>2</sup>Harvard Center for Population and Development Studies, Harvard T.H. Chan School of Public Health, Cambridge, Massachusetts, USA; <sup>3</sup>School of Population and Public Health, University of British Columbia, Vancouver, British Columbia, Canada; <sup>4</sup>Menzies Institute of Medical Research, University of Tasmania, Hobart, Tasmania, Australia; <sup>5</sup>Environmental Health Services, Department of Health and Human Services, Hobart, Tasmania, Australia; <sup>6</sup>Department of Environmental Health Sciences, Fielding School of Public Health, University of California, Los Angeles, Los Angeles, California, USA; <sup>7</sup>Department of Medicine, University of California, San Francisco, San Francisco, California, USA; <sup>8</sup>Office of the Chief Medical Officer of Health, Yukon Health and Social Services, Whitehorse, Yukon, Canada



Services, Hobart, Tasmania, Australia; <sup>6</sup>Department of Environmental Health Sciences, Fielding School of Public Health, University of California, Los Angeles, Los Angeles, California, USA; <sup>7</sup>Department of Medicine, University of California, San Francisco, San Francisco, California, USA; <sup>8</sup>Office of the Chief Medical Officer of Health, Yukon Health and Social Services, Whitehorse, Yukon, Canada

## Known and Suspected Health Effects of Wildfire Smoke

#### Known

- Respiratory morbidity
  - Asthma & COPD
  - Bronchitis & pneumonia

#### **Suspected**

- All-cause mortality
- Cardiovascular morbidity
- Adverse birth outcomes

#### More data needed

- Risk of mortality
- Cardiovascular morbidity
- Susceptible populations

- Susceptible populations
  - Children, elders and those with chronic disease





## Who's at Risk from Wildfire Smoke NHANES 2007-2010, N=10,898

Susceptible category	Ν	Percent (95% Cl)
None	7135	73.0 (71.4, 74.6)
Respiratory only	642	6.4 (5.5 <i>,</i> 7.2)
Cardiovascular only	319	2.6 (2.3, 2.9)
>65 years only	1713	10.9 (10.1, 11.8)
Respiratory and cardiovascular	136	1.0 (0.7, 1.3)
Respiratory and >65 years	220	1.6 (1.3, 1.8)
Cardiovascular and >65 years	608	3.8 (3.3, 4.3)
All three groups	125	0.7 (0.5, 0.9)

NHANES = National Health and Nutrition Education Survey

Wells EM, Dearborn DG, Jackson LW (2012). PLoS ONE 7(11): e50526 19

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Respiratory only	27% fall into at least one susceptible group category	5.5, 7.2)	
Cardiovascular only		(2.3, 2.9)	
>65 years only		10.1, 11.8)	
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# **SEPA**

## Wildland Fire Potential Outlook April 2018



As drought conditions intensify large fire potential will expand:

- Warmer than average temperatures across the Southern Area
- Longer term dry areas of OK & TX along with warm temperatures are likely to keep fire potential above average
- Drier weather increasing potential for FL

https://www.predictiveservices.nifc.gov/outlooks/month2\_outlook.png

## 

### Identifying Communities at Risk from Wildfire Smoke

#### Annual average daily fire-PM<sub>2.5</sub> footprint for US counties



#### Community Health-Vulnerability Index (CHVI)

- Based on health and social factors that increase the risks of adverse health effects from wildfire smoke exposures
- Factors included county prevalence rates for health conditions, age and socioeconomic conditions
- Characterized the population size at risk with respect to the level and duration of exposure to fireoriginated fine PM (fire-PM<sub>2.5</sub>) and vulnerability

## **SEPA**

#### Identifying Communities at Risk from Wildfire Smoke

#### Factors of Vulnerability

- Child & Adult Asthma
- COPD
- Obesity
- Diabetes
- Hypertension
- % population age 65+
- Income, education, poverty, unemployment

# of days with fire-PM<sub>2.5</sub> above 35  $\mu$ g/m<sup>3</sup> by counties of continental US How much does smoke contribute to air quality and how often does it lead to exceeding daily standard?



## **€**EPA

## Spatial Distribution of Elevated Wildfire-Related PM<sub>2.5</sub>

Locations of the U.S. experiencing elevated wildfirerelated PM<sub>2.5</sub> concentrations over a 5-year period



## **SEPA**

#### Arkansas 2018 County Health Rankings

#### HEALTH OUTCOMES

#### **Overall Rank**

An overall ranking for all Health Outcomes combined.



#### **HEALTH FACTORS**

#### **Overall Rank**

An overall ranking for all Health Factors combined.



http://www.countyhealthrankings.org/app/arkansas/2018/rankings/outcomes/overall



http://www.countyhealthrankings.org/app/arkansas/2018/rankings/outcomes/overall



http://www.countyhealthrankings.org/app/arkansas/2018/rankings/outcomes/overall

#### Annual PM<sub>2.5</sub> Mass Concentration Non-accidental, CV, stroke & Lung Cancer Mortality



EPA

28

#### Cardiac Mortality Reductions Attributed to PM<sub>2.5</sub> Reductions by County



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- Reduction of PM<sub>2.5</sub> in the Little Rock/North Little Rock, Jonesboro and Bentonville area fully accounted for the declining mortality rates
- Rural Arkansas and the Delta region, up to 50% of reduced premature cardiovascular deaths was due to PM<sub>2.5</sub> reductions

Chalbot MG et al. Int J Environ Res Public Health 2014

#### Stroke Mortality Reductions Attributed to PM<sub>2.5</sub> Reductions by County



EPA

- Improvements in PM<sub>2.5</sub> prevented the vast majority of premature deaths due to stroke
- In particular
   farming
   communities
   along the Delta
   region
   (eastern/south
   east Arkansas)
   benefited

Chalbot MG et al. Int J Environ Res Public Health 2014

## **SEPA**

#### Community Health-Vulnerability Community-Health Vulnerability Index

National map of Community-Health Vulnerability Index to Adverse Health Effects from Wildfire Smoke



# The Community Health Vulnerability Index identifies vulnerable counties:

- shows that these communities
   experience more smoke exposures
   in comparison to less vulnerable
   communities
  - may help prepare responses, increase the resilience to smoke and improve public health outcomes during smoke days

#### **Estimating Health-Related Costs** 2008 Pocosin Lakes National Wildlife Refuge

www.fws.gov/pocosinlakes/news/ERF/n ews-erf-out.html

EPA



Satellite image showing the location of Evans Road Fire in the Pocosin Lakes National Wildlife Refuge, NC

- Burned 40K acres of peat bogs
- \$20M in suppression efforts, 2 billion gallons of water, 202 days
- Cost of excess ED visits for asthma and heart failure ~ \$1 million
- Additional estimates of health costs
  - 4 to 5 premature deaths
  - 31 non-fatal heart attacks
  - 41 bronchitis, & 810 asthma attacks
  - 530 lower respiratory symptoms
  - 769 upper respiratory symptoms
  - 3,700 work days lost

Rappold A et al. Environ Sci & Tech 2014

# • Health & death-related costs \$48.4 million

#### Annual U.S. Wildland Fire-Attributable PM<sub>2.5</sub> & Costs (2008-2012)



EPA





2009

2011



Wildland Fire-Attributable Annual Mean PM<sub>2.5</sub> (µg/m<sup>3</sup>)



Estimated Economic Value of Wildfire-Attributed PM<sub>2.5</sub>-Premature Deaths & Respiratory Admissions

Short-term\$63 billion(Range \$6 -\$170 billion)

Long-term\$450 billion(Range \$42 - \$1000 billion)

Fann N et al. Science of the Total Environment 610–611 (2018) 802–809

# **S**EPA

#### Public Health Outreach Mitigating the Health Effects of Wildfire Smoke



#### SEPA United States Environmental Protection

Environmental Topics Laws & Regulations About EPA

#### Particle Pollution and Your Patients' Health



- Describes the biological mechanisms responsible for the cardiovascular and respiratory health effects associated with particle pollution exposure
- · Provides educational tools to help patients understand how particle pollution exposure can affect their health and how they can use the Air Quality Index to protect their health.



SEPA United States Environmental Protection

**Environmental Topics** Laws & Regulations

Related Topics: Air Research



#### Wildland Fire Research to Protect Health and the Environment

Fires are increasing in frequency, size and intensity partly due to climate change and land management practices, yet there is limited knowledge of the impacts of smoke emissions —both short term and long term. EPA is using its expertise in air quality research to fill the gaps in scientific information and to develop tools to prevent and reduce the impact of wildfires and controlled or prescribed burns. The wildland fire research has three main goals:

- Provide new science to understand the impacts of smoke on health, and how this knowledge can instruct smoke management practices and intervention strategies to reduce health impacts.
- Provide essential novel data on smoke emissions to construct the national emission inventory used to understand air quality across the country.
- Improve understanding of how smoke from fires affects air quality and climate change.

#### **Research Areas**

- Health Effects Tools and Technology Development
- Water Supply and Ecosystem Protection
  - Presentations EPA Wildland Fire Research Publications
    - 2010-2017

Communication Workshop Report and

 Other Resources Key Links

Health Risk



Learn more

#### **Public Health Information**

- Local air quality conditions
- · Current fire conditions and advisories Fires and health
- Burn Wise program
- Other Resources



#### Wildland Fire Sensors Challenge

"Turnkey real-time air pollutant measurement platform to support public health messaging during large wild and prescribed fire events"

#### Do you have ideas on new air pollution measurement strategies for wildfire events?

Wild fires often produce significant air pollution, which poses health risks to first responders, residents in nearby communities and other populations that are impacted by smoke as it travels downwind. In contrast, prescribed fires are typically managed to minimize downwind impacts on populated areas, however those in close proximity may be exposed to smoke. Wildland fire refers to both wild and prescribed fires.

Quickly deploying air pollution measurement stations has, to date, been limited by the cost and complexity of implementation. However, emerging technologies including miniaturized direct-reading sensors, compact micro-processors, and wireless data communications provide new opportunities to detect air pollution. U.S. EPA and collaborating partners are preparing a challenge opportunity to develop a prototype multi-node measurement system capable of rapid deployment and continuous real-time monitoring of highly







This course is designed for

family medicine physicians, internists, pediatricians, occupational and rehabilitation physicians.

nurse practitioners, nurses,

cardiologists, and other

medical professionals.

asthma educators, pulmonary specialists,

Start the Course

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# Fires: Current Conditions Page

- **Current Smoke Map** generated by NOAA HMS
- Current Advisories State/Local/Tribal agency blogs and Wildland Fire Air **Quality Response Program**

AirNow

Current Conditions Map - May 9, 2016



CA Smoke Blog USFS Wildland Fire Air Quality Response Program

# *AirNow* Fires and Your Health

### **Fires and Your Health**

Smoke is made up of a complex mixture of gases and fine particles produced when wood and other organic materials burn. The biggest health threat from smoke is from fine particles. These microscopic particles can get into your eyes and respiratory system, where they can cause health problems such as burning eyes, runny nose, and illnesses such as bronchitis. Fine particles also can aggravate chronic heart and lung diseases - and even are linked to premature deaths in people with these conditions.

If you are healthy, you're usually not at a major risk from short-term exposures to smoke. Still, it's a good idea to avoid breathing smoke you can help it. Everyone should take the steps below when wildfires are present.



Fires and smoke across Alaska and Northern Canada
<u>Archive Image courtesy of</u>
<u>NASA Modis</u>

**Use common sense.** If it looks smoky outside, it's probably not a good time to mow the lawn or go for a run. And it's probably not a good time for your children to play outdoors.

**Pay attention to local air quality reports.** Stay alert to smoke-related news coverage or health warnings.

Visit <u>AirNow</u> to find out the Air Quality Index in your area. As smoke gets worse, the amount of particles in the air changes - and so do the steps you should take to protect yourself. AirNow recommends precautions you can take to protect your health when air pollution gets bad.

If you are advised to stay indoors, take steps to keep indoor air as clean as possible. When smoke levels are high, try to avoid using anything that burns, such as wood fireplaces, gas logs, gas stoves - and even candles! Don't vacuum. That stirs up particles already inside your home. And don't smoke. That puts even more pollution in your lungs, and in the lungs of people around you.

If you have asthma or other lung disease, make sure you follow your doctor's directions about taking your medicines and following your asthma management plan. Call your doctor if your symptoms worsen.

Run your air conditioner if you have one. Keep the fresh air intake closed and the filter clean to prevent bringing additional smoke inside. Note: If you don't have an air conditioner, staying inside with the windows closed may be dangerous in extremely hot weather. In these cases, seek alternative shelter.

#### **Health Resources**

- How Smoke from Fires Can <u>Affect Your Health</u> - Learn steps you can take to protect your health.
- Particle Pollution and Your <u>Health</u> - Find out if you are at risk from exposure to particle pollution, and what health effects can be caused by particles.(PDF, 2 pp. 260KB, <u>about PDF</u>),

#### **Educational Resources**

- <u>CDC Wildfire Fact Sheet</u> -Information on emergency preparedness and response.
- <u>California Air Resources</u>
   <u>Board SMP Public Outreach</u>
   <u>Protocol Tools and Materials</u>
- Wildfire Guide for Heath

Officials EXIT AIRNOW >

 FOR KIDS- Follow <u>Smoky</u> <u>Bear's advice</u> when wildfires are in your area!

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  - EXIT AIRNOW ►
- Wildfire Guide for Health
   Officials
   EXIT AIRNOW

### How Smoke from Fires Can Affect Your Health

### How Smoke from Fires Can Affect Your Health

Updated January 2017

#### Smoke may smell good, but it's not good for you

While not everyone has the same sensitivity to wildfire smoke, it's still a good idea to avoid breathing smoke if you can help it. And when smoke is heavy, such as can occur in close proximity to a wildfire, it's bad for everyone.

Smoke is made up of a complex mixture of gases and fine particles produced when wood and other organic materials burn. The biggest health threat from smoke is from fine particles. These microscopic particles can penetrate deep into your lungs. They can cause a range of health problems, from burning eyes and a runny nose to aggravated chronic heart and lung diseases. Exposure to particle pollution is even linked to premature death.

#### Some people are more at risk

It's especially important for you to pay attention to local air quality reports during a fire if you are

 a person with heart or lung disease, such as heart failure, angina, ischemic heart disease, chronic obstructive pulmonary disease, emphysema or asthma.



- an older adult, which makes you more likely to have heart or lung disease than younger people.
- caring for children, including teenagers, because their respiratory systems are still developing, they breathe more air (and air pollution) per pound of body weight than adults, they're more likely to be active outdoors, and they're more likely to have asthma.
- · a person with diabetes, because you are more likely to have underlying cardiovascular disease.
- · a pregnant woman, because there could be potential health effects for both you and the developing fetus.

#### How to tell if smoke is affecting you

High concentrations of smoke can trigger a range of symptoms.

- · Anyone may experience burning eyes, a runny nose, cough, phlegm, wheezing and difficulty breathing.
- · If you have heart or lung disease, smoke may make your symptoms worse
  - · People with heart disease might experience chest pain, palpitations, shortness of breath, or fatigue.
  - People with lung disease may not be able to breathe as deeply or as vigorously as usual, and may experience symptoms such as coughing, phlegm, chest discomfort, wheezing and shortness of breath.

#### https://airnow.gov/index.cfm?action=smoke.index

# **Set EPA**

## *AirNow* Current Advisories

6				- And and	Go
AirNow	Local Air Quality Conditions				
AIIIVOW	Zip Code:	Go	State : Alabama	ᅌ Go	National Summary
			-	- 10 M	
<u>irNow Home</u> >> Headline	10	dia.			
Smoke Advisories and Forecasts					
Fires and Your Health					
Fires: Current Conditions					
Advisories and Forecasts					
Jnited States					
Naska					
Alaska DEC Wildfire Information					
Arizona					
Arizona Wildfire Information					
California					
Butte County Air Quality Management District					
Northern Sierra Air Management District					
Shasta County Air Quality Management District					
Shasta County (Redding) Air Quality Webcam					
South Coast Air Quality Management District					
Ventura County Air Pollution Control District					
Colorado					

Colorado Wildfire Smoke Health Advisories





# AQI Categories and Health Messages

Level of Health Concern	Index Value	Message
Good	0 to 50	Air quality is considered satisfactory, and air pollution poses little or no risk.
Moderate	51 to 100	Air quality is acceptable; however, for some pollutants there may be a moderate health concern for a very small number of people who are unusually sensitive to air pollution.
Unhealthy for Sensitive Groups	101 to 150	Members of sensitive groups may experience health effects. The general public is not likely to be affected.
Unhealthy	151 to 200	Everyone may begin to experience health effects; members of sensitive groups may experience more serious health effects.
Very Unhealthy	201 to 300	Health alert: everyone may experience more serious health effects.
Hazardous	301 to 500	Health warnings of emergency conditions. The entire population is more likely to be affected by serious health effects.

### Downloadable Factsheets for Heart and Lung Disease

### Asthma



#### Air pollution can make asthma symptoms worse and trigger attacks.

If you or your child has asthma, have you ever noticed symptoms get worse when the air is polluted? Air pollution can make it harder to breathe. It can also cause other symptoms, like coughing, wheezing, chest discomfort, and a burning feeling in the lungs.

Two key air pollutants can affect asthma. One is ozore (found in smog). The other is particle politikin (found in haze, smoke, and dust). When ozone and particle pollution are in the air, adults and children with asthma are more likely to have symptoms.

#### You can take steps to help protect your health from air pollution.

#### Get to know how sensitive you are to air pollution.

 Notice your asthma symptoms when you are physically active. Do they happen more often when the air is more polluted? If so, you may be sensitive to air pollution.  Also notice any asthma symptoms that begin up to a day *after* you have been outdoors in polluted air. Air pollution can make you more sensitive to asthma triggers, like mold and dust mites. If you are more sensitive than usual to indoor asthma triggers, it could be due to air pollution outdoors.

#### Know when and where air pollution may be bad.

- Ozone is often worst on hot summer days, especially in the afternoons and early evenings.
- Particle pollution can be bad any time of year, even in winter. It can be especially bad when the weather is calm, allowing air pollution to build up. Particle levels can also be high:
- Near busy roads, during rush hour, and around factories.
- When there is smoke in the air from wood stoves, fireplaces, or burning vegetation.

#### Cardiovascular Disease – February 2016







Enfermedades del corazón, ataques cerebrales y contaminación del aire

#### Sabía que la contaminación del aire puede provocar ataques al corazón, ataques cerebrales y otros problemas de salud?

Según estudios médicos, la contaminación del aire puede provocar ataques al corazón, ataques (derrames) cerebrales y arritmia, sobre todo en personas que están en situación de riesgo de padecer estas afecciones. Además, en las personas con una afección llamada insuficiencia cardíaca, la contraminación del aire puede reducir aún más la capacidad del corazón de bombera la sangre de la forma que necesita hacerlo. Las partículas muy pequeñas son los contaminantes más preocupantes que provocan estos efectos. La contaminación por partículas se encuentra en la neblina, el humo y el polvo, y a veces en el aire que parece limpio. Esta

- Conseguir información actualizada sobre la calidad local del aire
- Proteger su salud cuando la contaminación por partículas se encuentra en niveles insalubres



Los adultos mayores y las personas con factores de riesgo de padecer enfermedades del corazón o un ataque cerebral pueden tener un riesgo más elevado. Tiene un riesgo mayor si:

 Ha sufrido un ataque al corazón, angina de pecho, bypass coronario (derivación vascular), angioplastia con o sin esten, obstrucciones en las arterias del cuello o de las piernas, insuficiencia cardiaca, arritmia, diabetes o enfermedad pulmonar obstructiva crónica.

Puede tener mayor riesgo de padecer enfermedades del corazón o ataques cerebrales (y, por lo tanto, ser más susceptible a la contaminación por partículas) si le corresponden cualquiera de estas condiciones:

- Es hombre de 45 años o más, o mujer de 55 años o más.
- En su historial familiar existen ataques cerebrales o enfermedades del corazón tempranas (en padre o hermano antes de cumplir 55 años; en madre o hermana antes de cumplir 65 años).



- Padece de presión arterial alta o colesterol alto.
- Tiene sobrepeso o no está fisicamente activo.
- Fuma cigarrillos.

#### ¿Cómo puede proteger su salud?

Hacer ejercicio con regularidad es importante para tener buena salud, sobre todo si padece de enfermedades del corazón. Ajustar cuándo y dónde hace ejercicio le permútrá llevar un estilo de vida más saludable y reducir su riesgo de padecer problemas del corazón o ataques cerebrales provocados por la contaminación del aire. Además:

- Si padece de enfermedades del corazón o ha sufrido un ataque cerebral, consulte con su proveedor de atención médica sobre las mejores formas de proteger su salud cuando la calidad del aire es insalubre.
- Hable con su proveedor de atención médica si corre el riesgo de padecer de enfermedades del corazón o un ataque cerebral y planea hacer más ejercicio físico del habitual.
- Sepa dónde y cuándo los niveles de contaminación por partículas pueden ser insalubres.

Los niveles de contaminación por partículas pueden ser elevados en cualquier época de año. También pueden ser elevados:

- Cerca de vías muy transitadas, en zonas urbanas (sobre todo en horas pico) y en zonas industriales.
- Cuando hay humo en el aire proveniente de cocinas de leña, chimeneas, quema de vegetación o incendios forestales.

# AirNow Redesign

- Look will be different: focus on local conditions
- Mobile-friendly web site
- Same great information
  - Health Care Provider page
  - Fires: Current Conditions page
- Better display of temporal changes in air quality

# **Coming This Fall**



Wildfire Smoke

A Guide for Public Health Officials Revised July 2008

(With 2012 AQI Values)

# *Wildfire Smoke:* A Guide for Public Health Officials

- Composition of smoke
- Characteristics of wildfire smoke
- Health effects of smoke
- Sensitive populations
- Specific strategies to reduce smoke exposure
- Estimating particulate matter levels
- Recommendations for public health actions
  - Preseason public service announcements
  - Public advisories and protective measures
- Bibliography

# 

# Wildfire Guide2016

- Revised by EPA/CDC/USFS/California - on AirNow.gov
- Updated air quality and health information
- Evidenced-based exposure reduction measures
- Entirely new section on communicating air quality using:
  - "Current PM" levels from AirNow
  - Satellite information on Fires: Current Conditions page
  - Update visual range information
  - New fact sheets about



U.S. Environmental Protection Agency \* U.S. Forest Service \* U.S. Centers for Disease Control and Prevention \* California Air Resources Board

https://www3.epa.gov/airnow/wildfire\_may2016.pdf

# **SEPA**

### Simple Steps to Lower Exposure Concentration - Ventilation Rate - Time

# Rationale for the public health messaging to decrease exposure to air pollution

# Dose = Concentration x Ventilation rate x Time

- C be active outdoors when air quality is better
- V take it easier when active outdoors
- 7 spend less time being active outdoors



# **Set EPA**

## Public Health Recommendations Exposure Reduction Measures

### An individual can be advised to:

- Stay indoors
- Reduce outdoor physical activity
- Respirators (e.g., N-95) can help in the short-term
- Activate asthma/COPD action plans
- Use a home clean air shelter

### A community can be advised to:

- Cancel outdoor events
- Provide community clean air shelters
- Increase air filtration in institutions
- Evacuate



U.S. Environmental Protection Agency \* U.S. Forest Service \* U.S. Centers for Disease Control and Prevention \* California Air Resources Board

### Wildfire Smoke Guide 2018 To be Released before Next Wildfire Season



**SEPA**

#### Specific strategies to reduce smoke exposure

Na interobus clabern iame eto modiumusula quastiam ius, condam, nem faci pratiam vo, que no. Torum, te, conum oporet inero escre iae ter audenar esseris cotistr aterficam porum. factum. Cia rem omne mortusa dius, que nonum faceris impentio eqilicaur hos estorum peris fit, venter inam revilis, noste, siderehebern audam coenius Catum fec re nont nit iam intim me nos crim nonsulus contell aricam, noste, siderehebem audam coenius: Catum fec re nont nit iam intim me nos crim nonsulus contell aricam, nus Catum fec re nont nit iam intir me nos crim nonsulus conte

Stay indoors Reduce activity Reduce additional sources Air conditioners and filters com air cleaners Ozone generators lean noom Humiditien Inside veh Respiratory pro Cheal air shelte Closures Evacuation Summary 31

23

24

25

30 30

30



- **Updated** look
- Smoke vs urban particles
- Addition of ozone
- Add sections
  - PM web course Sensors
  - Ash clean-up
- Stand-alone fact sheets
  - Children - Older adults
  - Older adults Respirator use
  - Pets/livestock Ash clean-up -----
  - Preseason preparedness -
  - Exposure reduction -
    - Know when to evacuate

### Wildfire Smoke Guide 2018 Example of Draft Fact Sheets



WILDFIRE SMOKE FACTSHEE

#### Children and Familie

#### Background

- Wildfires expose children and women of reproductive age to a number of environmental hazards, e.g., fire, smoke, psychological stress, and the byproducts of combustion of wood, plastics, and other chemicals released from burnings structures and furnishings.
- During the acute phase of wildfire activity, the major hazards are fire and smoke.
- Children, Pregnant Women, individuals with pre-existing lung or cardiovascular diseases (e.g. asthma), impoverished populations are especially vulnerable to hazards due to wildfires.

#### **Environmental Hazards**

 Wildfire Smoke: Consists of very small organic particles, liquid droplets, and gases such as carbon monoxide (CO), carbon dioxide (CO2) and other volatile organic compounds (/OCs), such as formaldehyde and acrolein. The actual content of the smoke depends on the fuel source.

#### Health Effects from Smoke

- Symptoms from smoke inhalation can include chest tightness, shortness of breath, wheezing, coughing, respiratory tract and eye irritation and burning, chest pain, dizziness, or lightheadedness and other symptoms.
- Underlying conditions such as allergies and asthma symptoms may be exacerbated.
- The risk of developing cancer from shortterm exposures to smoke is vanishingly small.

#### Recommendation

- Prepare Before Wildfire Seat • Stock up so you don't hav it's smoky. Have several di medications on hand. Buy not need to be refrigerated because cooking can add levels.
- Create a "clean room" in Choose a room with as few doors as possible, such as a portable air cleaner and sources of pollution.
- Buy a portable air cleane smoke event. High-efficien (HEPA) filter air cleaners, a precipitators that do not pri help reduce indoor particle
   Organize your important it time and know where to go have to evacuate



#### WILDFIRE SMOKE FACTSHEET: Indoor Air Filtration

#### Exposure to Particle Pollutants

SEPA United States Environmental Protection

DELICI

Indoor sources of particulate matter (PM) come from combustion events such as smoking, candle burning, cooking and wood-burning. During a wildfire event, outdoor PM can increase indoor PM levels well above the levels normally found. As outlined in the Guide, reducing indoor sources of pollution is a major step to lower the concentrations of PM indoors. Further reductions in indoor PM can be achieved using one of the filtration options discussed below.

#### Filtration Options

There are two effective options for improving air filtration in the home: upgrading the central system filter, or using high efficiency portable air cleaning appliances. Before discussing filtration options, it is important to understand the basics of filter efficiency.

#### Filter Efficiency

The most common industry standard for filter efficiency is known as the Minimum Efficiency Reporting Value, or MERV rating. The MERV scale for residential filters ranges from 1-20. The higher the MERV rating the greater the percentage of particles captured as the air passes through the filter media. Higher MERV (higher efficiency) filters are especially effective at capturing very small particles that can most affect health.

#### Central Air System Filter

The filter used in the central heating/cooling system of the home can effectively reduce indoor PM. A home typically will have a low MERV (1-4)

fiberglass filter that is 1<sup>+</sup> thi filter with a medium efficien significantly improve the a Higher efficiency filters (M even better, and a true hig 16) in the central system ca as a 95%. However, these more resistance to air flow, energy used by the blowe You may wish to consu

You may vise to onsu technician or the manufac system to confirm that the s efficiency filter. If you are t more efficient filter, simp continuously by switching "Auto" to "On" has been concentrations by as much

Portable Air Cleaner Portable air cleaners are s appliances that can be user enhanced central filtration particles. Their effective depends on several factors air cleaner, the filter efficie unit is turned on and at wha cleaners fitted with high effi indoor PM concentrations more.

#### Portable Air Clea Î Choose

There is a wide variety of ai ranging in price from about air cleaners under about \$2 cooling the air well and would not indoor situation.

 Types of Air Cleanel Most air cleaners fall under mechanical and electronic.

### Prepare for Fire Season

WILDFIRE SMOKE FACTSHEET



If you live in an area that is regularly affected by smoke or where the wildfire risk is high, take steps to prepare for fire season. Know how to get ready before a wildfire. Know how to protect yourself from smoke exposure during a wildfire.

Being prepared for fire season is especially important for the health of children, older adults, and people with heart or lung disease.

#### Prepare Before a Wildfire

- Stock up so you don't have to go out when it's smoky. Have several days of medications on hand. Buy groceries that do not need to be refrigerated or cooked, because cooking can add to indoor particle levels.
- Create a "clean room" in your home. Choose a room with as few wind ows and doors as possible, such as a bedroom. Use a portable air cleaner and avoid indoor sources of pollution.
- Buy a portableair cleaner before there is a smoke event. High-efficiency particulate air (HEPA) filter air cleaners, and electrostatic precipitators that do not produce ozone, can help reduce indoor particle levels.
- Understand how you will receive alerts and health warnings, including air quality reports and public service announcements, from local officials.

- If you have heart or lung disease, check with your doctor about what you should do during smoke events.
- If you have asthma or another lung disease, update your respiratory management plan.
- Have a supply of N95 masks and learn how to use them. They are sold at many home improvement stores and online.
- Organize your important items ahead of time and know where to go in case you have to evacuate.



## **EPA's Healthy Heart Program** Increasing Environmental Health Literacy



**EPA's Healthy Heart** program aims to prevent heart attacks and strokes by:

**Sepa** 

- Raising public awareness about the role outdoor air pollution plays in cardiovascular health, and
- Steps individuals can take to reduce their pollution exposure http://www.epa.gov/healthyheart/

# Healthy Heart Toolkit

**Set EPA**

www.epa.gov/air-research/healthy-heart-toolkit-and-research

#### United States Environmental Protection Search EPA.gov **Environmental Topics** Laws & Regulations About EPA (f) (y) (p) (a)CONTACT US SHARE **Related Topics:** Air Research Healthy Heart Toolkit and Research: Steps You Can Take Steps You Can Take to Reduce Health Effects **Daily Air Quality** from Air Pollution Check Pollution Forecasts Studies show that air pollution can trigger heart attacks, strokes and worsen heart failure in people who Get Free Email Alerts EXIT are at risk for these conditions. If you have a heart condition, you could benefit by reducing your exposure to high levels of air pollution. When are air pollution levels high? Resources

- Any time of year
- When weather is calm
- Near busy roads
- In urban areas
- In industrial areas



- When are air pollution levels high?
- Are you at risk?
- Steps to Protect Your Heart
- How to Reduce your Risk?
- Warning Signs of a Heart Attack
- Warning Signs of a Stroke
- https://www.epa.gov/air-research/healthy-heart-toolkit-and-research-steps-you-can-take 51

Be Smart, Protect Your

**Outdoor Air Pollution** 

Million Hearts Initiative:

Heart video EXIT Heart Disease, Stroke and

# **SEPA**

# Particulate Matter Web Course

Designed for Healthcare Professionals and Educators



CME credit from CDC to physicians, nurses and health educators

# High Particle Pollution Events

#### Course Home

**€PA**

About this course

What is Particle Pollution?

Particle Pollution Exposure

Cardiovascular Effects

**Respiratory Effects** 

Patient Exposure and the Air Quality Index

Patient Exposure and High Particle Pollution Events

**Clinical Scenarios** 

**Frequent Questions** 

Course Outline/Key Points

**Review Questions** 

Patient Education Tools

Course Evaluation

References

Glossary

### Patient Exposure and High Particle Pollution Events

On this page:

#### Introduction

- · What steps can I advise for my patients who live in areas where wildfires are likely to occur?
- How can my patients use respirators to protect themselves from wildfire smoke?

#### Introduction

Ozone and the other common pollutants rarely reach very high levels in the U.S. But almost every year, in many parts of the country, particle pollution levels reach the very unhealthy or hazardous ranges of the AQI. These events are usually associated with fires or dust storms. The fires are often wildfires, but on a smaller spatial and temporal scale high particle pollution levels may be found near

other types of fires or combustion. Er wood burning in valleys during winte for reducing exposure to particle pol particles are wildfires, other fires, tra needed with some fires depending o

Portions of the text in the following s for Public Health Officials (May 2016) for smoke events, to take measures t with the public about wildfire smoke assistance and expertise of a number Control and Prevention, National Ins

Consistent with Wildfire Smoke: Guide for Public Health Officials



# **GEPA** HEPA Filters & Vascular Function

## HEPA Filtration Improves Vascular Function Wood smoke impacted community – British Columbia



RHI = Reactive hyperemia index, a measure of an artery's capacity to respond to low  $O_2$ 

HEPA filtration improved blood vessel function in people older than 43 years, having BMIs >25, and spending more than 75% of their time indoors

HEPA filtration improved biomarkers of inflammation in men and in people having BMIs >25Barn PK et al. Environ Health. 2016 Nov 25;15:116Allen et al. AJRCCM 201154



HEPA Filter & Vascular Function

### HEPA Filtration In Wood smoke im



Portable air cleaners should be at the forefront of the public health response to landscape fire smoke

> Barn PK et al. Environ Health. 2016 Nov 25;15:116

> > Jach

pond to low  $O_2$ 

unction

mbia

< 75%

INDOORS

HEPA filtration improved blood vessel function in peopolder than 43 years, having BMIs >25, and spending more than 75% of their time indoors

HEPA filtration improved biomarkers of inflammation in men and in people having BMIs >25Barn PK et al. Environ Health. 2016 Nov 25;15:116Allen et al. AJRCCM 201155

an



# Air Quality & Smoke Plume Info





#### IR QUALITY INDEX

Arr Quaity Index (AQI) is an index for reporting y air quaity. It tells you how clean or polluted r air is, and what associated health effects the be a concern for you. Think of the AQI as a dstick that runs from 0 to 500. The higher the value, the greater the level of air pollution and greater the health concern.

0 to 50 Good Air quality is considered satisfactoand air pollution poses little or no risk.

Moderate Air quality is acceptable; Wever, for some pollutants there may be a oderate health concern for a very small mber of people who are unusually sensitive to pollution.

Unhealthy for Sensitive Groups Members f sensitive groups may experience health ffects. The general public is not likely to be ffected.

151 to 200 Unhealthy Everyone may begin to exper nce health effects; members of sensitive group nay experience more serious health effects.

201 to 300 Very Unhealthy Health alert; everyone ay experience more serious health effects.

301 to 500 Hazardous Health warnings of emergency ditions. The entire population is more likely e affected.

e AQI focuses on health effects you may sperience within a few hours or days after reathing politied air. EPA calculates the AQI for ve major air poliutants regulated by the Clean n Act; ground-level zone (O3), particle poliuon (also known as particulate matter, or PM), or hour monoxide (CO), sulfur dioxide (SO2), and trogen dioxide (NO2). PM are separated into parse dust particles (PM10) that are 2.5 to 10 icrometers in diameter, and fine particles M2.5) that are 2.5 micrometers in diameter or matter

ia source: AirNow.gov

- Smoke Sense provides information about current and future air quality
- Forecasted smoke plumes can be visualized
- Less time outside during smoke episodes to decrease exposure, & protect health
- Smoke Sense helps collect information about who, when, and how frequently people are impacted by smoke
- Information about smoke in the air and symptoms experienced in the past week will be logged



<b>\$EPA</b>		Odds Ratio for C due to	<i>Changing Activity</i> <i>Poor Air Quality</i>
Susceptible category	У	Unadjusted	Adjusted
None (refere <mark>nt)</mark>			
Respiratory only	12% of	the study population	on changed, 3.35)
Cardiovascular only	activiti	es due to bad air qu	ality <sub>1.33 (0.86, 2.04)</sub>
>65 years only	25% of	those with a.se spira	atory.comdition
Respiratory & CV	change	d activities 4.06 (2.31, 7.15)	4.36 (2.47, 7.69)
Respiratory and >65 years their activity A People with CV disease did not change 3.64 (2.35, 5.64) 3.83 (2.47, 5.96)			
Cardiovascular and >	>65 yrs	1.23 (0.78, 1.91)	1.38 (0.89, 2.13)
All three groups		2.80 (1.94, 4.04)	3.52 (2.33, 5.32)

NHANES 2007–2010, N = 10,898.

Wells EM, Dearborn DG, Jackson LW (2012). PLoS ONE 7(11): e50526

# **Million Hearts<sup>®</sup> 2022** Aim: Prevent 1 Million Heart Attacks and Strokes in 5 Years



## Million Hearts<sup>®</sup> 2022 Priorities and Objectives

### **Keeping People Healthy**

Reduce Sodium Intake

Decrease Tobacco Use

**Increase Physical Activity** 

### **Optimizing Care**

Improve ABCS\*

Increase Use of Cardiac Rehab

Engage Patients in Heart-healthy Behaviors

### **Improving Outcomes for Priority Populations**

Blacks/African Americans

35- to 64-year-olds

People who have had a heart attack or stroke

People with mental illness or substance use disorders

\*Aspirin use when appropriate, Blood pressure control, Cholesterol management, Smoking cessation



# **Optimizing Care**

Goals	Effective Health Care Strategies
Improve ABCS* Targets: 80%	<ul> <li>High Performers Excel in the Use of</li> <li>Teams—including pharmacists, nurses, community health workers, and cardiac rehab professionals</li> <li>Technology—decision support, patient portals, e- and default referrals,</li> </ul>
Increase Use of Cardiac Rehab Target: 70%	<ul> <li>registries, and algorithms to find gaps in care</li> <li>Processes—treatment protocols; daily huddles; ABCS scorecard proactive outreach; finding those with undiagnosed high BP or cholesterol, tobacco use, particulate matter exposure</li> <li>Patient and Family Supports—training in home blood pressure</li> </ul>
Engage Patients in Heart-healthy Behaviors Targets: TBD	monitoring; problem-solving in medication adherence; counseling on nutrition, physical activity, tobacco use, risks of particulate matter; referral to community-based physical activity programs and cardiac rehab



\*Aspirin use when appropriate, BP control, Cholesterol management, Smoking cessation

# Improving Outcomes for Priority Populations

Priority Population	Objectives	Strategies
Blacks/African Americans	<ul> <li>Improving hypertension control</li> </ul>	<ul><li>Implement tailored protocols</li><li>Problem-solve in med adherence</li></ul>
35-64 year olds	<ul> <li>Improving HTN control and statin use</li> <li>Increasing physical activity</li> </ul>	<ul> <li>Implement tailored protocols</li> <li>Increase access to and participation in community-based activity programs</li> </ul>
People who have had a heart attack or stroke	<ul> <li>Increasing cardiac rehab referral and participation</li> <li>Avoiding exposure to particulate matter</li> </ul>	<ul> <li>Use opt-out referral and CR liaison visits at discharge; ensure timely enrollment post-discharge</li> <li>Increase use of Air Quality Index</li> </ul>
People with mental illness or substance abuse disorders	<ul> <li>Reducing tobacco use</li> </ul>	<ul> <li>Integrate tobacco cessation into behavioral health treatment</li> <li>Institute tobacco-free policy at mental health and substance use treatment facilities</li> <li>Tailored quitline protocols</li> </ul>

# Improving Outcomes for Priority Populations

Disparate outcome
 Effective interventions
 Well-positioned partners

Priority Population	Objectives	Strategies
Blacks/African Americans	<ul> <li>Improving hypertension control</li> </ul>	<ul><li>Implement tailored protocols</li><li>Problem-solve in med adherence</li></ul>
35-64 year olds	<ul> <li>Improving HTN control and statin use</li> <li>Increasing physical activity</li> </ul>	<ul> <li>Implement tailored protocols</li> <li>Increase access to and participation in community-based activity programs</li> </ul>
People who have had a heart attack or stroke	<ul> <li>Increasing cardiac rehab referral and participation</li> <li>Avoiding exposure to particulate matter</li> </ul>	<ul> <li>Use opt-out referral and CR liaison visits at discharge; ensure timely enrollment post-discharge</li> <li>Increase use of Air Quality Index</li> </ul>
People with mental illness or substance abuse disorders	<ul> <li>Reducing tobacco use</li> </ul>	<ul> <li>Integrate tobacco cessation into behavioral health treatment</li> <li>Institute tobacco-free policy at mental health and substance use treatment facilities</li> <li>Tailored quitline protocols</li> </ul>

# Key Actions to Protect Your Health From Air Pollution

- Know when and where particle pollution levels may be unhealthy
  - $\circ$  Busy roads
  - o Rush hour traffic
  - o Smoke from fires
- Plan activities when and where pollution levels are lower
  - Delay activity until air is cleaner or move activity indoors

 Check the Air Quality Index, which provides forecasts of daily air quality



- Change your activity level

   Reduce activity (ex: walk instead of jog)
  - Reduce overall risk of heart disease or stroke
  - Know the warning signs of heart attack or stroke



# Million Hearts Family Priority Actions

- Raise awareness among those at-risk, their families, and the clinicians who care for them
- Encourage health professionals to take EPA's web-based course: Particle Pollution and Your Patients' Health
- Educate at-risk patients about mitigation behaviors
- Incorporate messages about air quality into cardiac rehab program curriculum
- Encourage adoption of EPA's Air Quality Flag Program among hospitals, employers, health systems, others
- Disseminate PM<sub>2.5</sub> content via Million Hearts channels
   **illion Hearts**<sup>®</sup>

# 

### Take Home Messages Wildfire Smoke and Health

- Exposure to wildfire emissions is an important public health issue
  - Size of vulnerable & sensitive populations is increasing
  - Drought and poor forest health is increasing risks of wildland fire and risks of co-morbidity
- Relevant health data is now available to provide guidance for public health action and to aid decision-making
- Knowledge gaps persist and require ongoing research



# For More Information Visit

### WILDFIRE GUIDE - A GUIDE FOR PUBLIC HEALTH OFFICIALS, UPDATED JUNE 2016



### http://oehha.ca.gov/air/risk\_assess/ wildfire.html

Contact information: Wayne Cascio, MD email: cascio.wayne@epa.gov

- www.airnow.gov
  - EPA AirNow
- <u>www.usfs.gov</u>
   U.S. Forest Service
  - U.S. Forest Servic
- <u>www.cdc.gov</u>
  - Wildfire
- www.nasa.gov
  - Satellite imaging
- www.noaa.gov
  - Forecasting
- www.nifc.gov
  - National Interagency Fire Center
- www.firescience.gov
  - Joint Fire Science Program



### Questions

# Thank you

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Email: cascio.wayne@epa.gov

- No conflicts of interest
- The presentation represents the opinions of the speaker and does not necessarily represent the policies of the US EPA



# **Research Needs and Opportunities**

# 

## Health Impacts of Wildfire Smoke Merit Our Attention & Action

- Population & clinical health impacts are real and costly
- Intensity of wildland fires is increasing
- Size of vulnerable & sensitive populations is Increasing
  - Increasing area of the Wildland-Urban Interface
    - contains 60% of new homes built in the U.S. after 1990
    - contains 46 million single family homes, thousands of businesses,
       & a population greater than 120 million
  - Increasing size of the sensitive population
    - > aging U.S. population with high prevalence of heart & lung disease
    - increasing prevalence of obesity and diabetes
- Drought and poor forest health are increasing risks of wildland fire and risks of co-morbidity

### **Protecting Population Health** Research Needs and Opportunities

### Develop, Harmonize, Implement and Evaluate Impact Public Health Communication on Health Effects

 Link wildfire smoke forecasts to public health messaging to decrease exposure

**Set EPA**

- Evaluate the effectiveness of:
  - interventions to decrease wildfire smoke exposures and associated adverse health outcomes
  - PSAs (public service announcements) and other communication methods



Lui JC et al. *Environ Res* 136: 120–132, 2015 71

# **Set EPA**

**Protecting Population Health** Research Needs and Opportunities

Acquire a better understanding of the toxicology of wildfire emissions alone and co-mingling with urban pollutants

- Differential toxicity of fuel types and combustion conditions
- Relative contributions of the pollutant mix: PM, gases, VOCs, ...
- Interaction with urban co-pollutants
- Mechanisms for adverse health effects

Adapt new technologies to advance smoke surveillance, forecasting & exposure assessment

Satellite-based models, chemical transport and dispersion models

72
## **Protecting Population Health** Research Needs and Opportunities

## Studies in wildfire-affected Areas and Estimates of Future Wildfire-Related Health Impacts

- Develop models of communities at-risk that:

**SEPA**

- Integrate the probability and severity of wildfire events with health characteristics and resilience of communities likely to be affected
- include changes in parameters sensitive to climate-change



Lui JC et al. Environ Res 136: 120–132, 2015

## **Protecting Population Health** Research Needs and Opportunities

#### Large-scale studies are needed to:

EPA

- establish more reliable estimates on health impact of wildfires
- identify <u>intrinsic factors</u> that increase an susceptibility to wildfire smoke
- Identify <u>socio-demographic factors</u> increasing a <u>community's</u> susceptibility to wildfire smokerelated health responses
- Identify at-risk communities and populations for policy assessment



# **€PA**

**Protecting Population Health** Research Needs and Opportunities

### Multiple-episode fire events are needed to:

- Identify consistency of an association over time
- Change in vulnerability or behavioral adaptation (e.g., remaining indoors) to wildfire smoke exposure

### **Estimates of health effects of <u>short-term</u> exposures**

 Need health and short-term exposure data (<24 hrs) to guide public health policy and decision-making

### Estimates of health effects of <u>long-term</u> exposures

Need health and long-term exposure data (annual averages) to guide public health policy and decision-making







ACUTE: Endothelial dysfunction, Vasoconstriction, Plaque instability, Coagulation, Thrombosis, Arrhythmias CHRONIC: LV hypertrophy, Atherosclerosis, Arterial Stiffness, Metabolic Syndrome: HTN, Insulin resistance, Dyslipidemia





## Subclinical Effects of of Wood Smoke **Controlled Human Exposure Studies**

**SYSTEMIC** 

"SPILL-OVER"

PΜ

Activation of lung

ANS reflex arcs

Bronchioles/Alveoli

stress & inflammation

Bønløkke JH et al. JOEM 2014 and Hunter AL, et al. J Occup **PFT 2014** 

Woodsmoke 1 to 3-hr of li ited changes after a 3-hour wood smoke exposure Pulmonary oxidative exposure. No changes:

Pneumoproteins,

**S**EPA

- adhesion factors, •
- coagulation, cytokines, platelet activation,
- vasomotor function

Hejl AM, et al. J Occup **Environ Hygiene 2013** Firefighters working at prescribed burns. Inflammatory biomarkers, PM<sub>25</sub>, CO. Cross-work shift<sub>ctivated</sub> differences: IL-1β, IL-8, CRPI,amed I ver Lighting fires had the largest

Systemic Oxidative stress an Acute phase response Clotting factors Fibrinogen, CRP



SAA, ICAM-1, and VCAM-1. CAR DIOVASCULAR INFLAMMATION

cross-work shift increase in IL-

8



Muala et al. Particle and Fibre Toxicology 2015

**Neural Response** 

**ANS** imbalance

TSNS / √PSNS

ANS

Wood smoke exposure from incomplete combustion with PM1 (314  $\mu$ g/m<sup>3</sup>) for 3 h

- decreased macrophage, neutrophil and lymphocyte numbers in bronchial wash
- decreased lymphocytes in BAL fluid;
- decreased sICAM-1, MPO and MMP-9;
- increases in submucosal and epithelial CD3+ cells, epithelial CD8+ cells and submucosal mast cells