

Wildfire Smoke and Public Health - *Why is the EPA Concerned?*

Wayne Cascio, MD, FACC

Director

National Health and Environmental Effects Research Laboratory

Office of Research and Development

US EPA

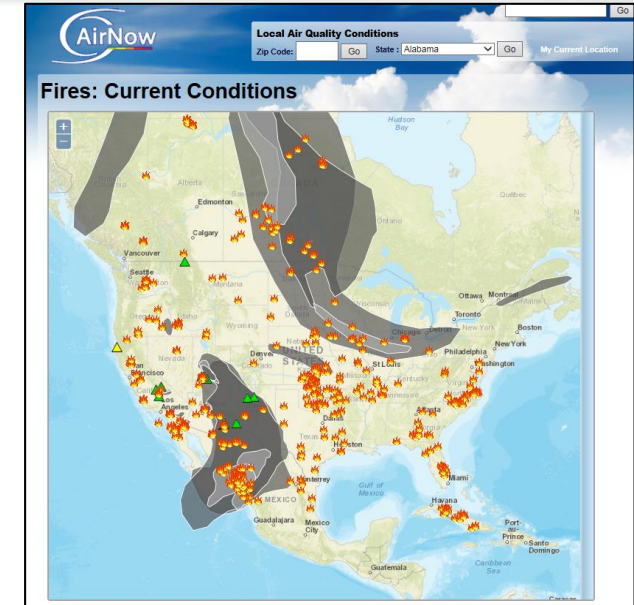
*The Sand Fire
Santa Clarita Valley July
2016  Credit: Kevin
Gill/flickr*

*Clean Air Spaces: Indoor Air Filtration to Protect Public Health
During Wildland Fires: What are the Known and Unknowns?
Web Summit
Research Triangle Park June 12, 2019*



Protection of Public Health

Assisting the States Address Environmental Challenges



- The Clean Air Act 1970 Title 1; Part A – protection of “**public health**” is noted 64 times – founded on the principle of **endangerment**
- In §7403 (**Research**) – “human health” is noted 9 times; “welfare” or “environment” 12 times; “training” 14 times; “**multiple pollutants and stressors**” twice
- Protection of sensitive subpopulations



How does Wildland Fire Smoke Factor In?

- Wildland fires are a national challenge impacting **public health and environmental quality** through complex multi-media pathways
- Uncontrolled wildfires and the use of prescribed fire are raising questions related to benefits and harms to:
 - Ambient air quality
 - Water quality
 - Land management
 - Ecosystem services
 - Public health
 - Local economic health



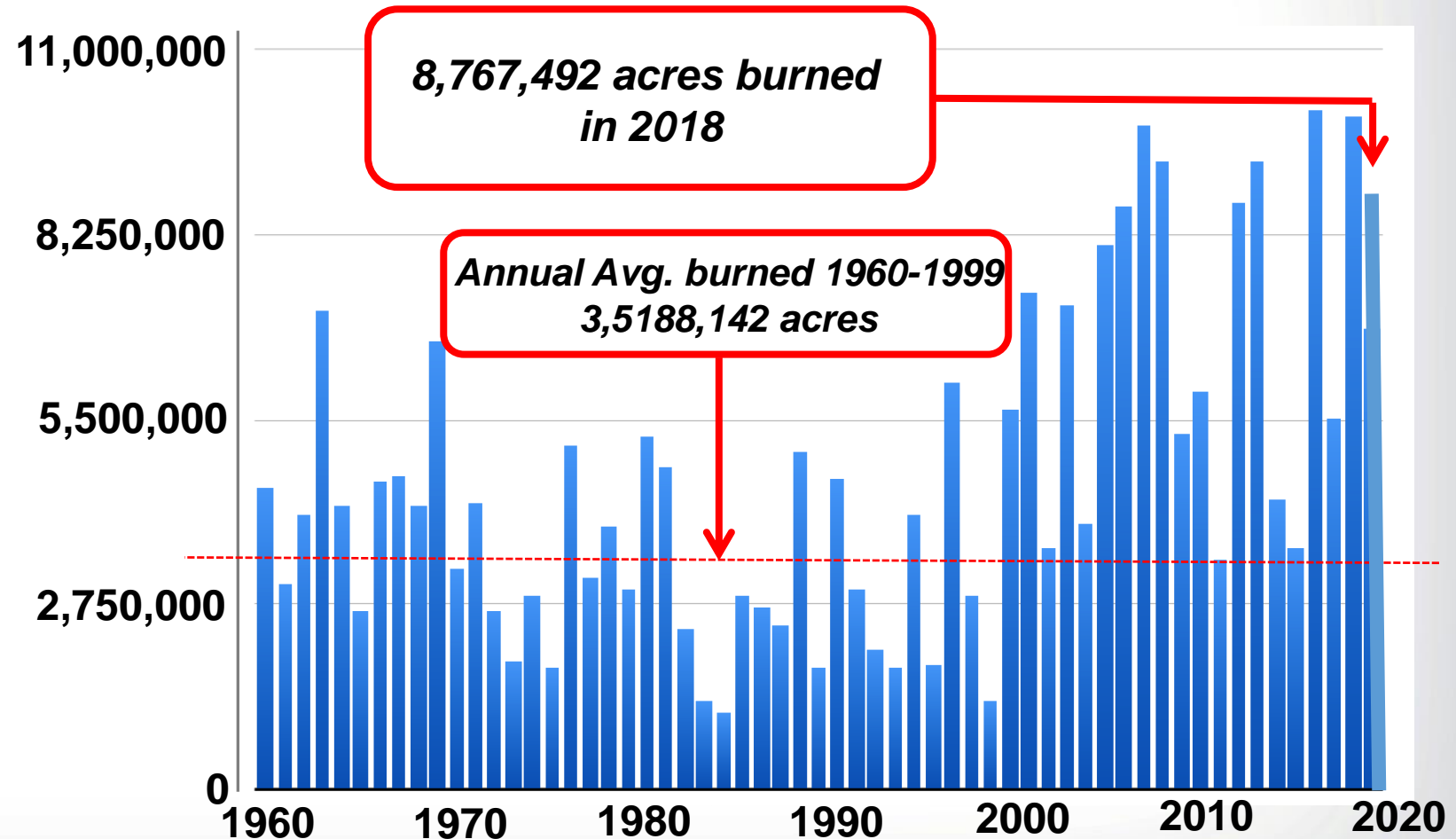


Wildfire in the U.S.

Acreage Burned in the U.S. Annually

Present Concerns

- *Increasing acreage burned*
- *Increasing impact on urban areas*
 - *10% of all land with housing is situated in the wildland-urban interface*
- *Increased vulnerability of populations*
 - *Expanding WUI*
 - *Aging US population*
 - *Increasing chronic disease*



Adapted from https://www.nifc.gov/fireInfo/fireInfo_stats_totalFires.html

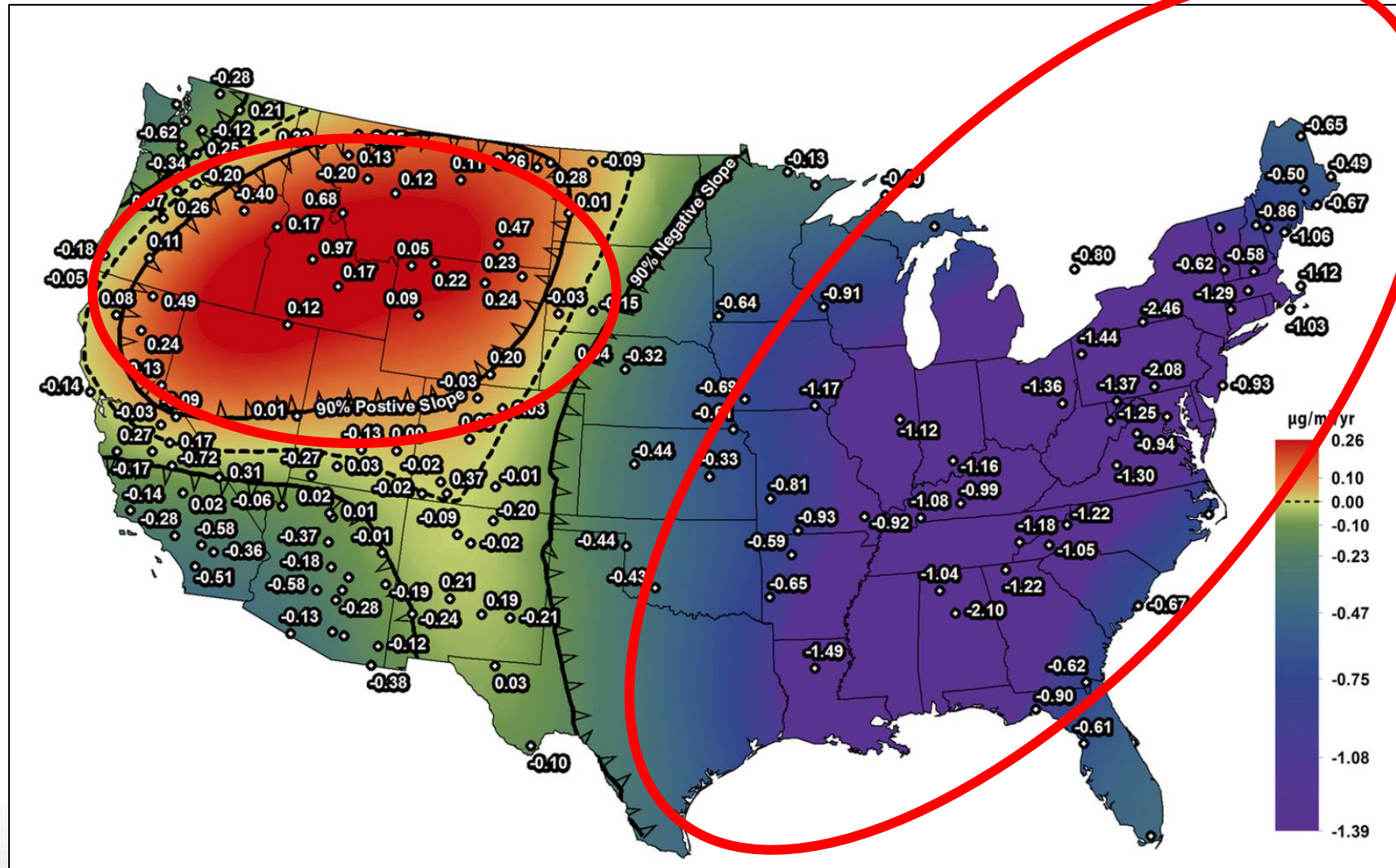


U.S. Air Quality Improves 1988-2016 Except in Wildfire-Prone Areas

*Worsening
Air Quality*

$PM_{2.5}$

Increasing
annual
ambient air
particle
pollution



*Improving
Air Quality*

$PM_{2.5}$

Decreasing
annual
ambient air
particle
pollution

Air-Quality Impacts Extend Long Distances & Affect Urban Areas



Health Impacts Can Extend Hundreds of Miles

- 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



Health Effects of Wildfire Smoke Systematic Reviews are Now Available

Environmental Research 136 (2015) 120–132



ELSEVIER

Contents lists available at ScienceDirect

Environmental Research

journal homepage: www.elsevier.com/locate/envres



Review

A systematic review of the physical health impacts from non-occupational exposure to wildfire smoke

Jia C. Liu^{a,*}, Gary R. Sorensen^b, David M. M. Donohue^c, Michael H. Jerrett^d, John R. Balmes^e, Catherine T. Elliott^f

^aSchool of Forestry and ^bCenter for Perinatal Perinatology



[Environ Res.](#)

2015;136:120-32

[Environ Health Perspect.](#)

2016; 124:1334–1343

Review

Critical Review of Health Impacts of Wildfire Smoke Exposure

Colleen E. Reid,^{1,2} Michael Brauer,³ Fay H. Johnston,^{4,5} Michael Jerrett,^{1,6} John R. Balmes,^{1,7} and Catherine T. Elliott^{3,8}

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

[Environ Toxicol
Pharmacol.](#)

2017;55:186-195



International Journal of
Environmental Research
and Public Health



Review

Meta-Analysis of Heterogeneity in the Effects of Wildfire Smoke Exposure on Respiratory Health in North America

Michelle C. Kondo^{1,*}, Anneclaire J. De Roos², Lauren S. White², Warren E. Heilman³, Miranda H. Mockrin¹, Carol Ann Gross-Davis⁴ and Igor Burstyn²

¹University of California, Berkeley, Berkeley, California, USA; ²Harvard Chan School of Public Health, Cambridge, Massachusetts, USA; ³School of Public Health, Boston University, Boston, Massachusetts, USA; ⁴Department of Environmental Health Sciences, Harvard School of Public Health, Boston, Massachusetts, USA; ⁵Department of Environmental Health Sciences, Harvard School of Public Health, Boston, Massachusetts, USA; ⁶Department of Environmental Health Sciences, Harvard School of Public Health, Boston, Massachusetts, USA; ⁷Department of Environmental Health Sciences, Harvard School of Public Health, Boston, Massachusetts, USA; ⁸Department of Environmental Health Sciences, Harvard School of Public Health, Boston, Massachusetts, USA



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Environmental Toxicology and Pharmacology

journal homepage: www.elsevier.com/locate/etap



Review or Mini-review

Wildfire smoke exposure and human health: Significant gaps in research for a growing public health issue

Carolyn Black^a, Yohannes Tesfaigzi^b, Jed A. Bassein^a, Lisa A. Miller^{a,c,*}



[Internat J Environ Res.](#)

2019; 16:690



Health Effects Linked to Smoke from Wildland Fires

Health effects known or suspected to be caused by wildland fire smoke

- *Symptoms such as eye irritation, sore throat, wheeze and cough*
- *Asthma & chronic obstructive pulmonary disease (COPD) exacerbations*
- *Bronchitis & pneumonia*
- *Adverse birth outcomes*
- *Childhood respiratory disease*
- *All-cause mortality*
- *Cardiovascular outcomes*



At-risk populations include –

- Pregnant women and fetuses
- Children
- Older populations
- Populations with pre-existing respiratory disease
- Populations with pre-existing cardiovascular disease

**27% of
U.S. population
is at-risk**

Populations suspected to be at greater risk –

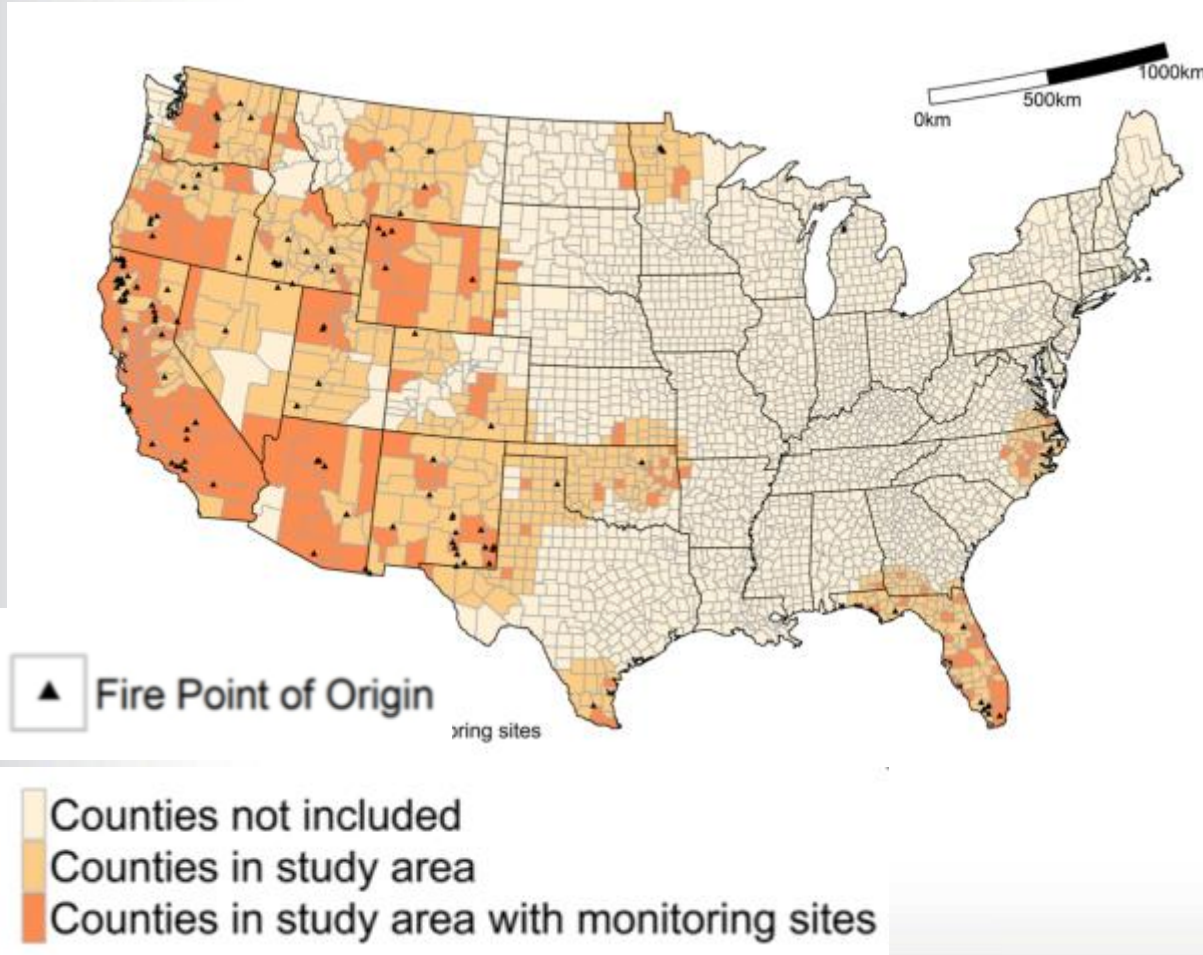
- Populations with chronic inflammatory diseases (e.g., diabetes, obesity)
- Women, African-Americans and populations with lower socio-economic status*



Cardiac Effects of Fine Particulate Matter

Wildfire and Non-Wildfire Periods 2008-2010 in U.S.

Cardiopulmonary hospitalizations among adults ≥ 65 years

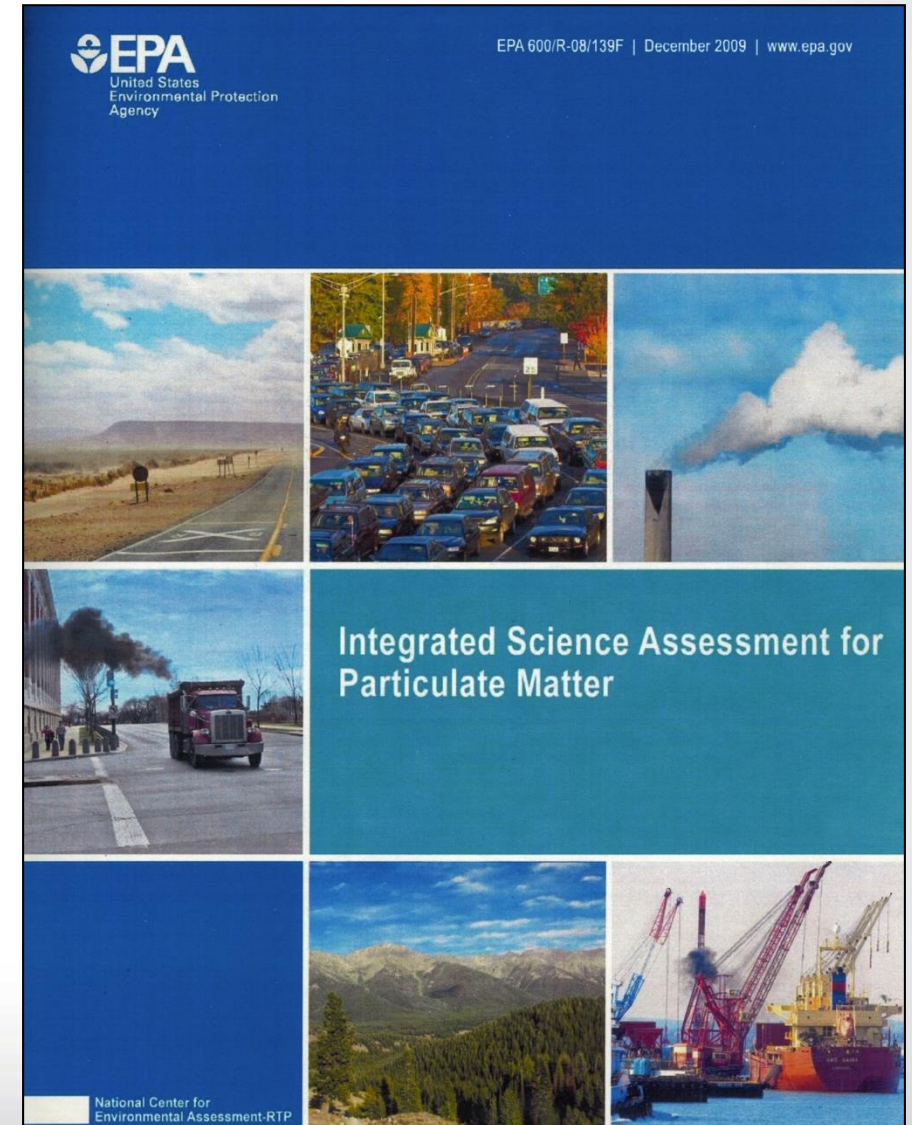


- ***Exposure to $PM_{2.5}$ on all days and locations, was associated with increased hospitalizations on smoke and non-smoke days.***
- ***Estimated effects persisted across multiple exposure days.***
- ***CV outcomes increased by 0.61% on smoke days and 0.69% on non-smoke days.***
- ***No apparent difference between wildfire and non-wildfire $PM_{2.5}$***

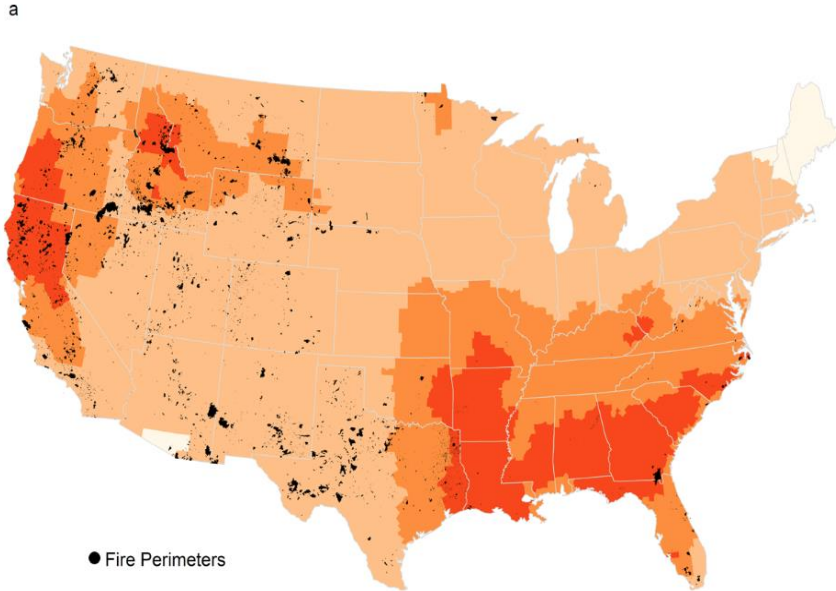
EPA:

*“Epidemiologic evidence is sufficient to conclude that a causal relationship exists between: **short-term and long-term exposure to PM_{2.5} and cardiovascular mortality.**”*

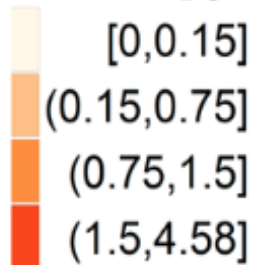
*Integrated Science Assessment (ISA)
for Particulate Matter 2009*



Annual average daily fire-PM_{2.5} footprint for US counties

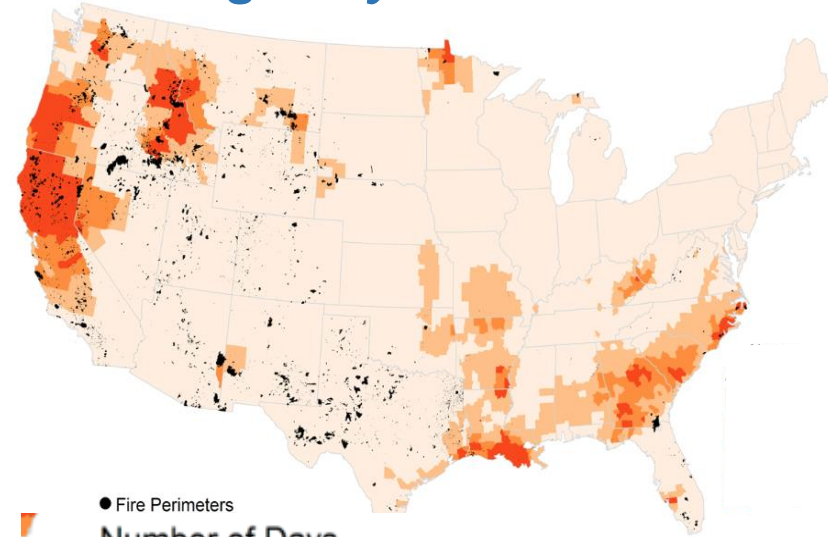


Fire-PM_{2.5} (μg/m³)



Health protective standards
Annual: 12 μg/m³ daily avg.
Daily: 35 μg/m³

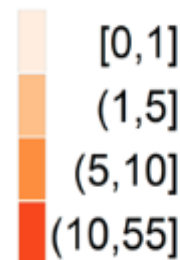
How much does smoke contribute to air quality and how often does it lead to exceeding daily standard?



• Fire Perimeters

Number of Days

Above 35 PM_{2.5} (μg/m³)



of days with fire-PM_{2.5}
ove 35 μg/m³ by counties
continental US



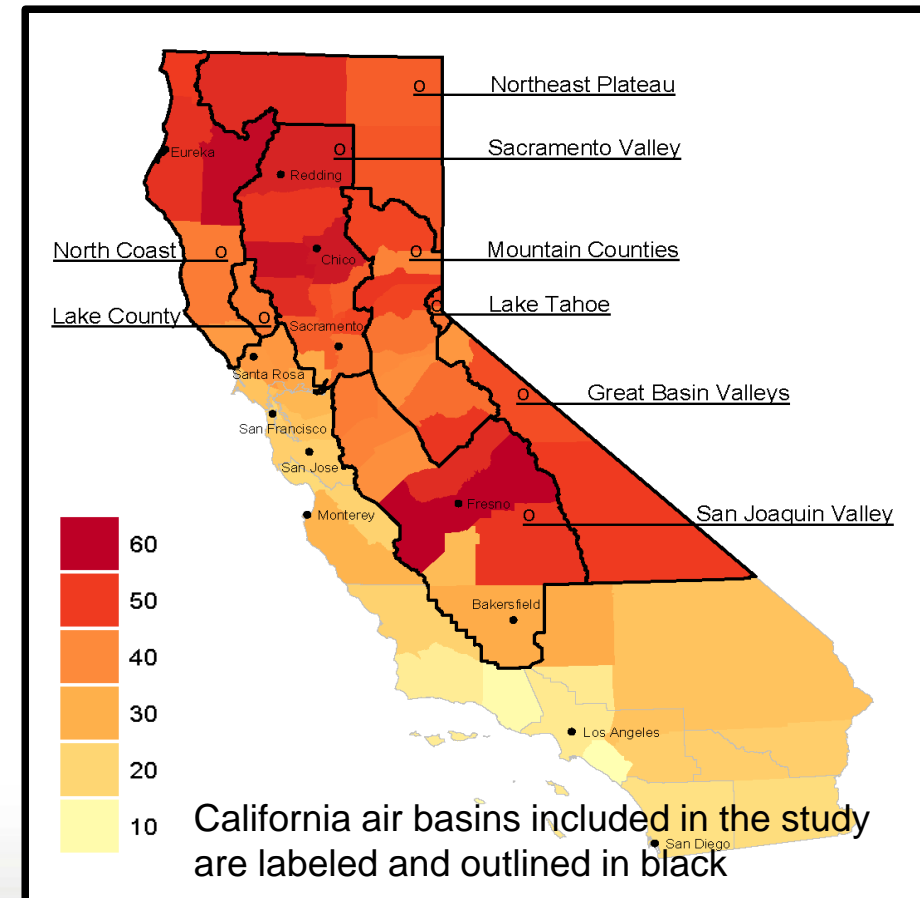
Measuring the Health Effects of Wildfire Smoke

California 2015 Wildfire Study

Epidemiology study designed to examine respiratory, cardiovascular, & cerebrovascular health effects of wildfire smoke

- *Associated wildfire-PM_{2.5} exposure with emergency department visits for cardiovascular and respiratory diagnoses*

Smoky days/county during the study: May through September 2015

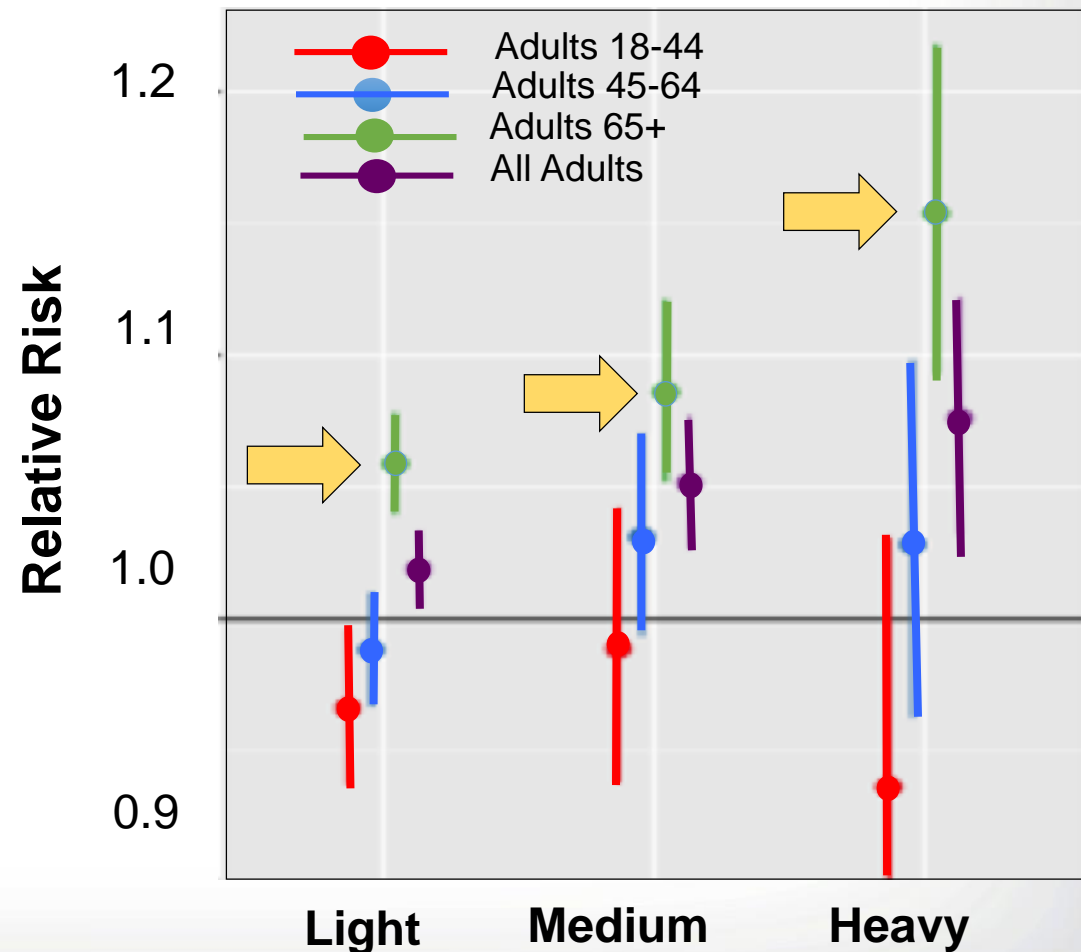




Wildfire-PM_{2.5} Exposure Increases Heart Attack & Stroke

- **Wildfire-PM_{2.5} associated with heart attacks and strokes for all adults, particularly for those over 65 years old**
- **Increase in risk the day after exposure:**
 - All cardiovascular, 12%
 - Heart attack, 42%
 - Heart failure, 16%
 - Stroke, 22%
 - All respiratory causes, 18%
 - Abnormal heart rhythm, 24%
(on the same day as exposure)

All Cardiovascular Causes





Air-Quality Impacts

Urban Areas, at a Distance, High Exposures

2013 California Rim Fire

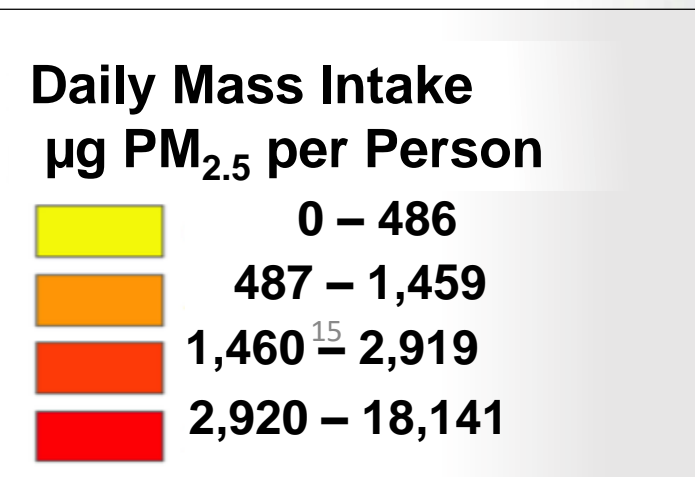
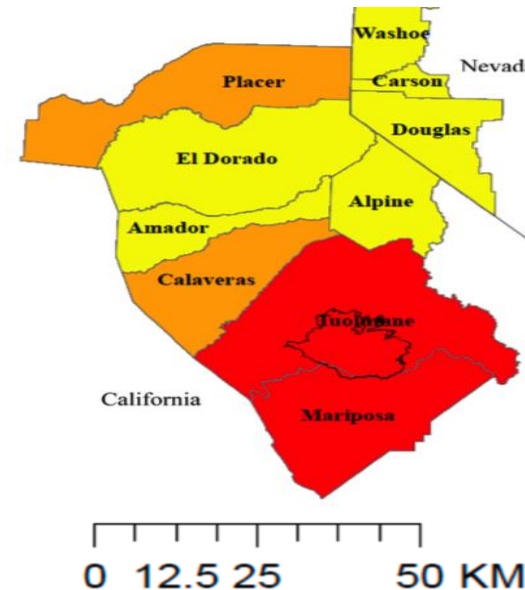


Daily mass intake breathing PM at the EPA 24 hr $PM_{2.5}$ standard ($35\mu g/m^3$) = $486 \mu g PM_{2.5}/day$

Navarro KM et al. Environ Sci Tech 2016

Affected Californian Counties

Aug. 30 – Sep. 10

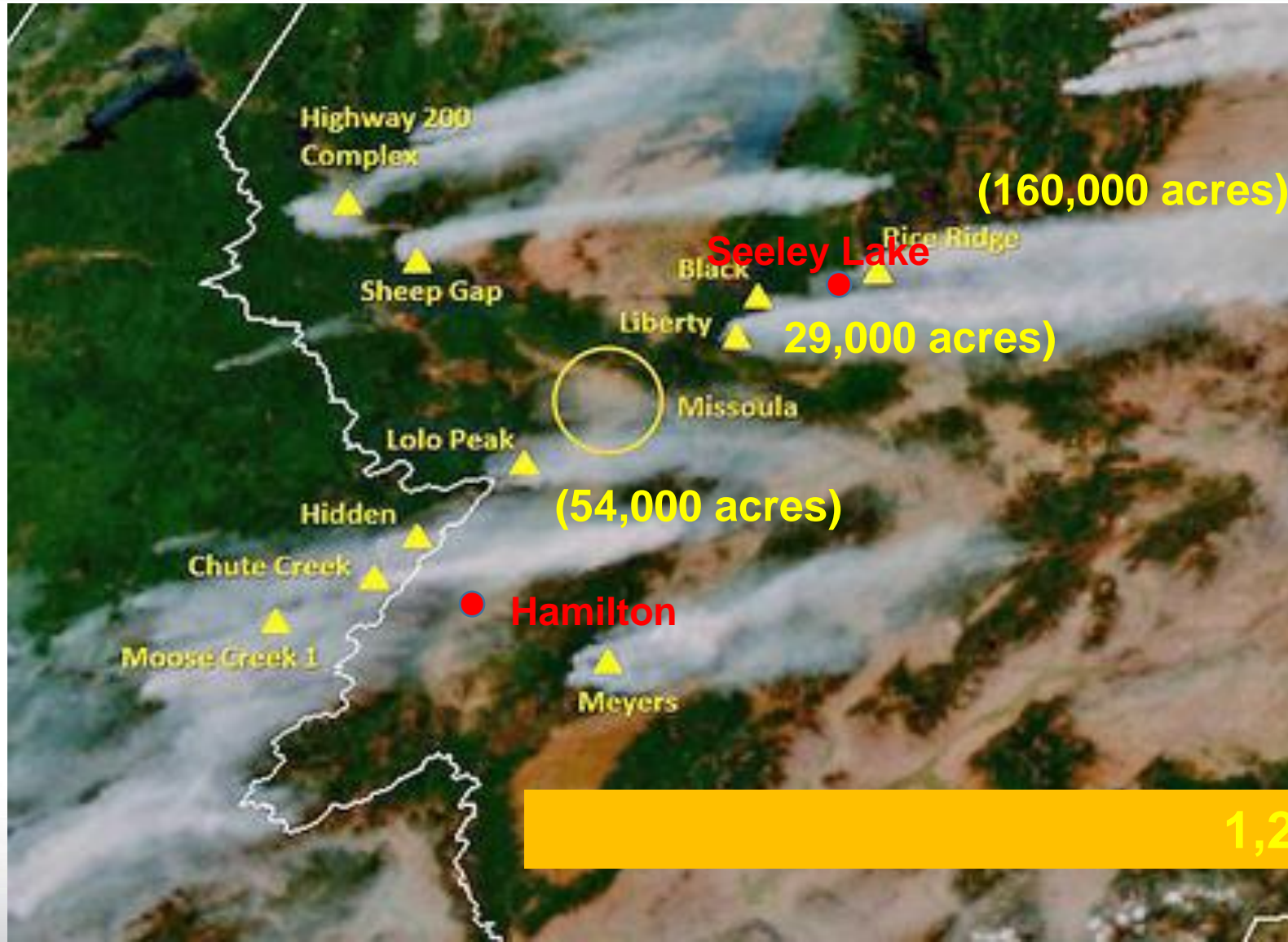


Exposure up to 35 times greater than the 24 hr $PM_{2.5}$ standard



Seeley Lake Montana 2017 Wildfire Season

Raised a New Public Health Issue Prolonged Exposure

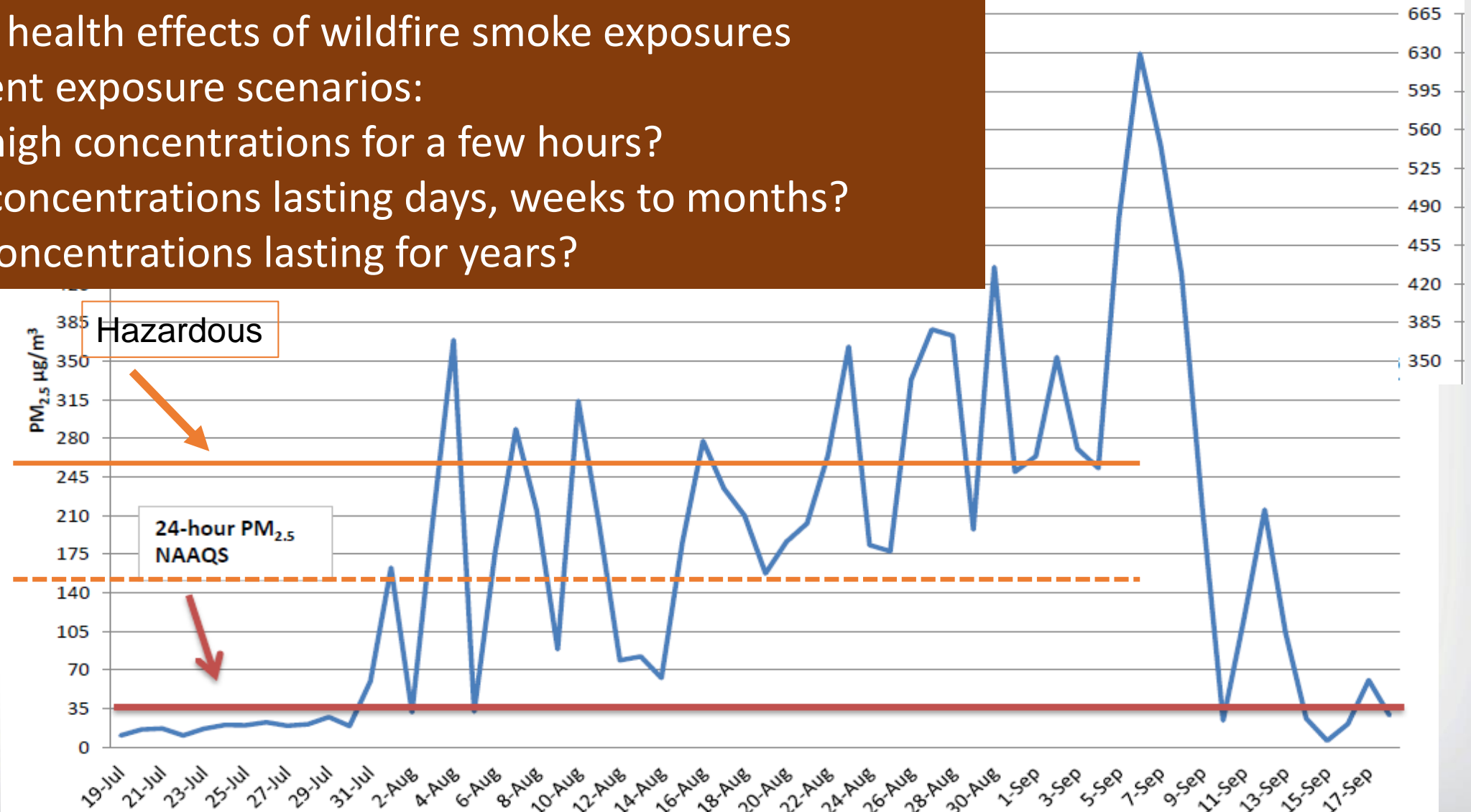


Courtesy of
Dr. Paul Smith
Missoula, MT



Seeley Lake 2017 Wildfire Season Average 24-hour PM_{2.5} Concentration

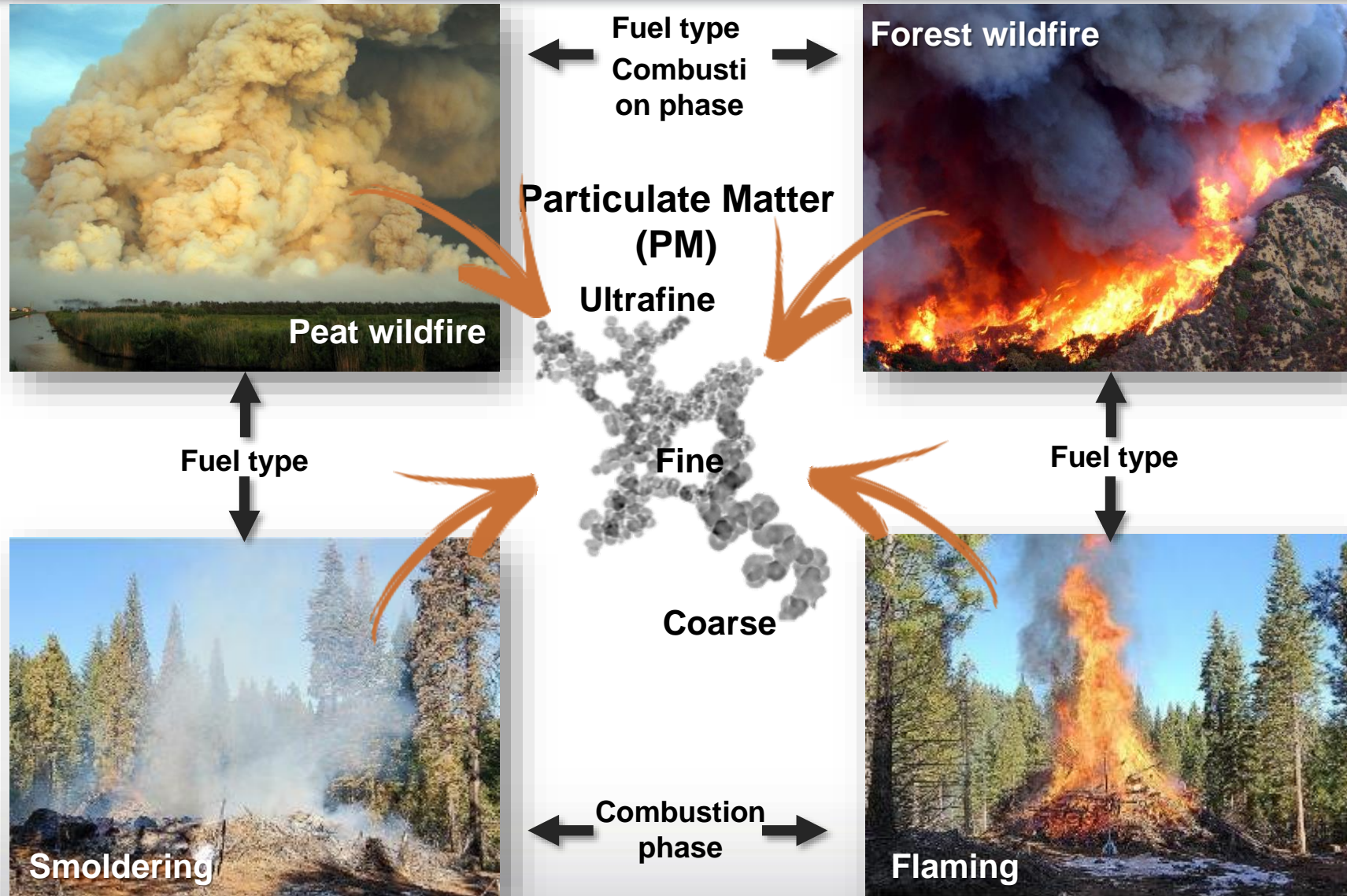
What are the health effects of wildfire smoke exposures under different exposure scenarios:
Very high concentrations for a few hours?
High concentrations lasting days, weeks to months?
Low concentrations lasting for years?



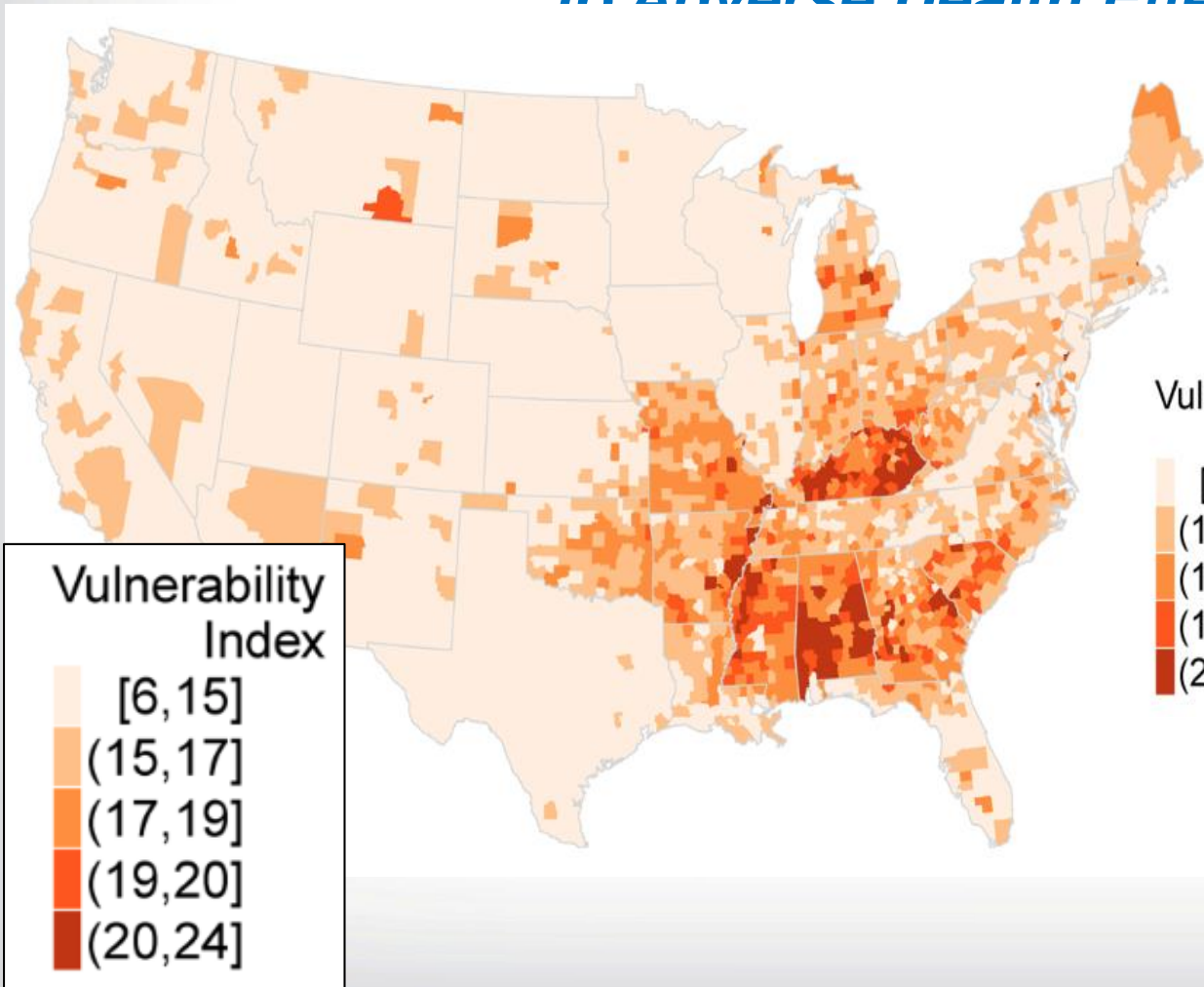
Courtesy of
Dr. Paul Smith
Missoula, MT

Different Types of Wildfire Smoke

Do Different Fuels Have Different Toxicity Profiles?



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



The Community Health-Vulnerability Index identifies the most 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



What Interventions Are Effective and Practical?

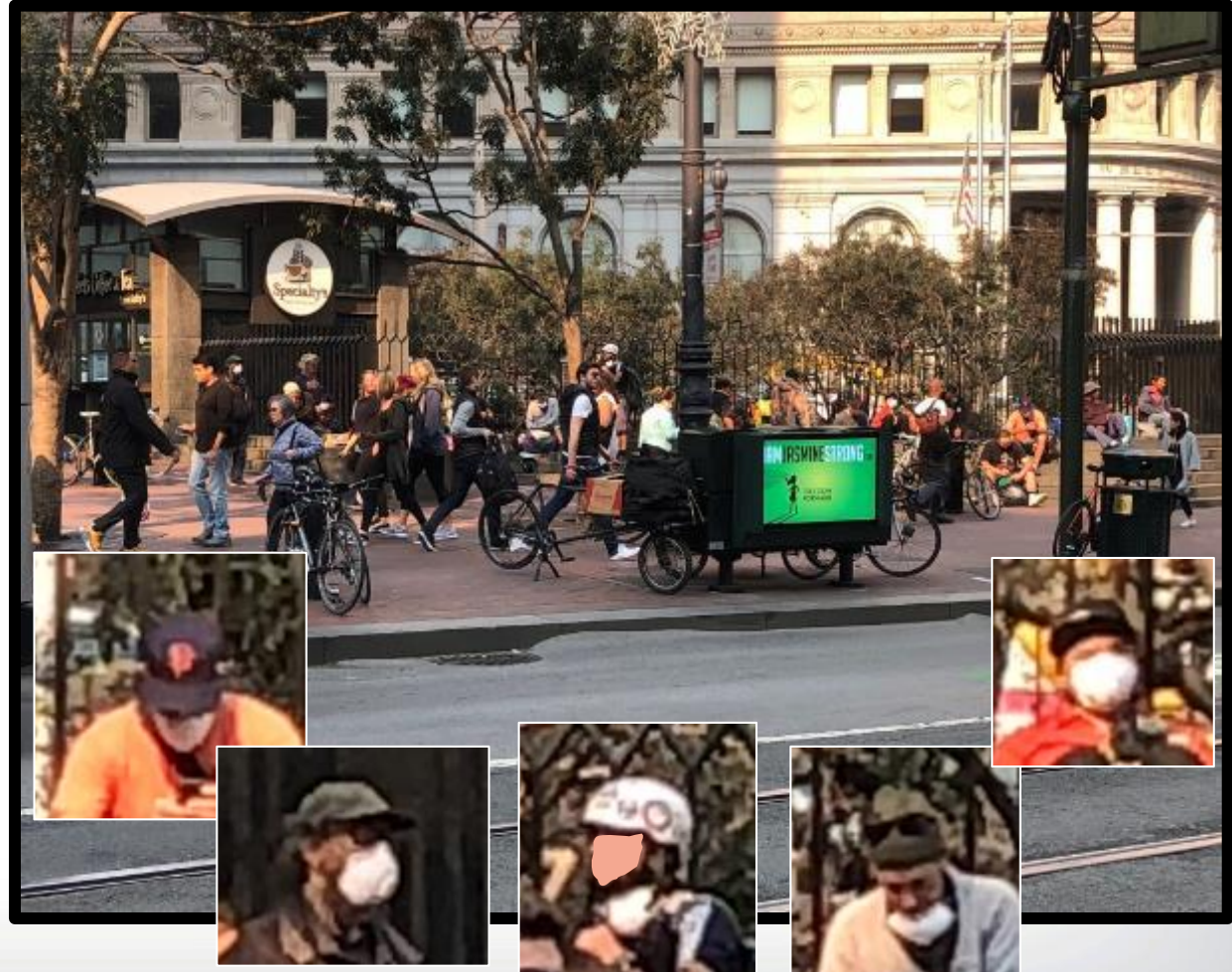
California Camp Fire - San Francisco November 9, 2018

Golden Gate Bridge from Lands End Trail



Air Quality Index 156 Unhealthy

N-95 Use on Market Street, San Francisco





Cardiovascular and Lung Disease in the U.S.

Size of the Vulnerable Population

Cardiovascular Disease

- Number of adults with diagnosed cardiovascular disease 121 million (48%)
- Number of adults with diagnosed heart disease: 28.2 million (11.5%)

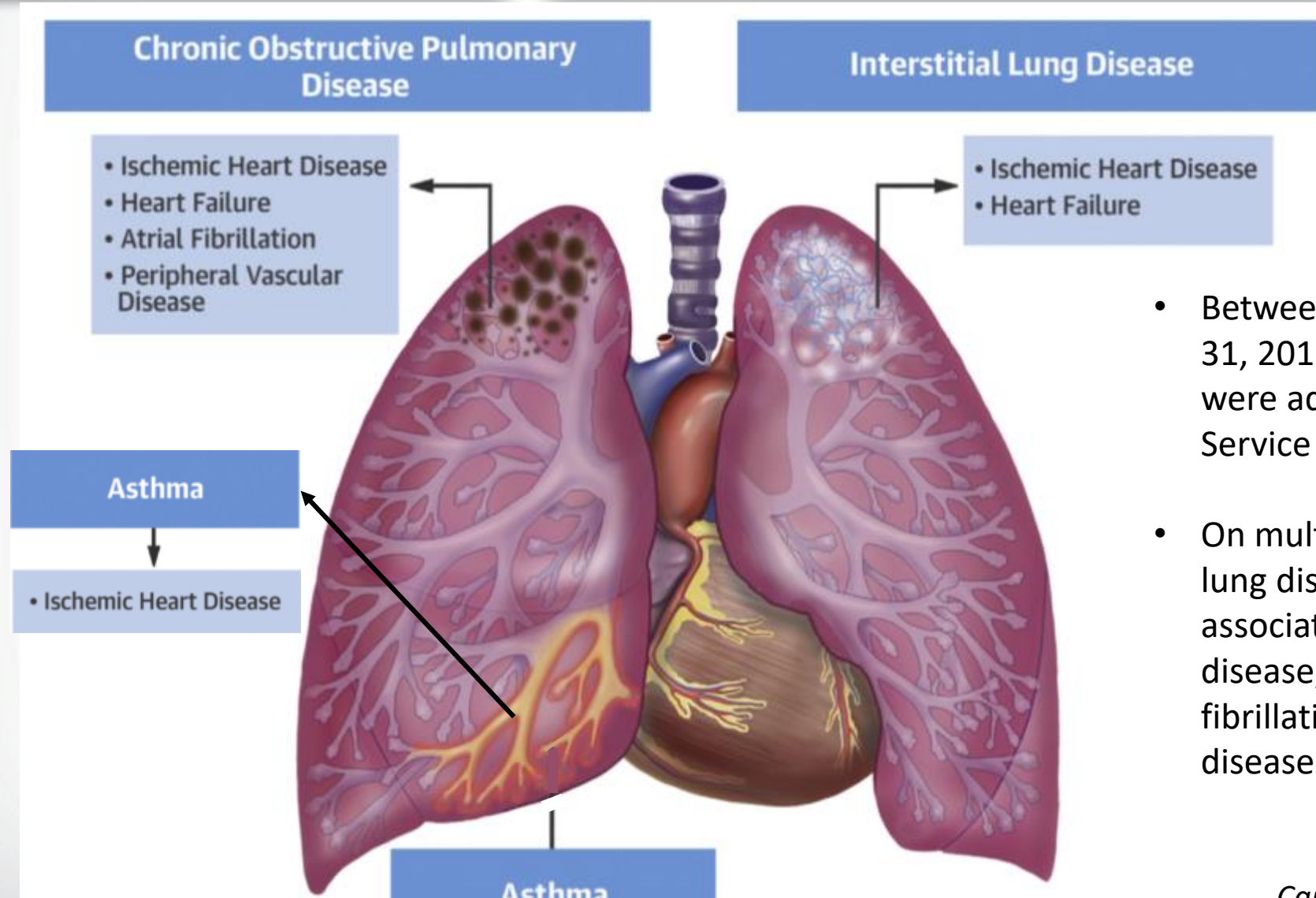
Lung Disease

- Number of adults with diagnosed chronic bronchitis: 8.6 million
- Number of adults diagnosed with emphysema: 3.4 million (1.4%)

By 2035 –

- More than 130 million adults, or 45.1% of the US population, are projected to have some form of CVD.
- Total costs of CVD are expected to reach \$1.1 trillion in 2035, with direct medical costs projected to reach \$748.7 billion and indirect costs estimated to reach \$368 billion.

Chronic Lung Diseases are Independently Associated with Heart Disease

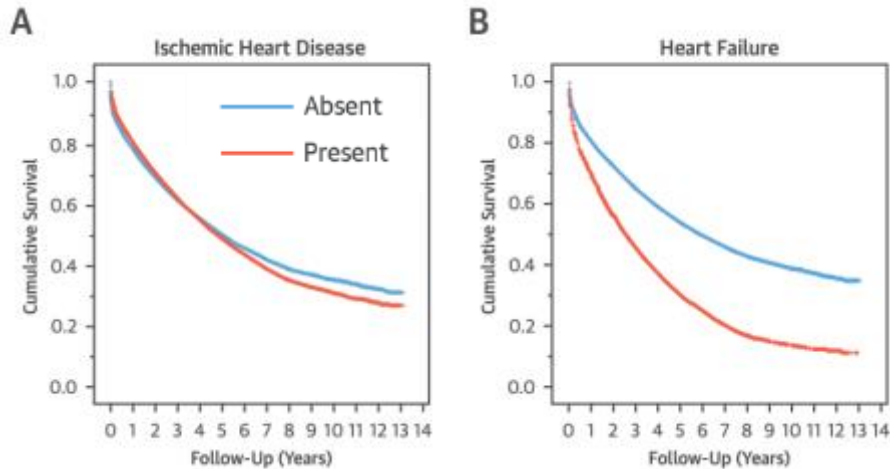


- Between January 1, 2000, and March 31, 2013, patients with lung diseases were admitted to 7 National Health Service hospitals NW England.
- On multivariable analysis, chronic lung diseases are independently associated with ischemic heart disease, heart failure, atrial fibrillation, and peripheral vascular disease



Survival in Chronic Lung Diseases is Impacted by Heart Disease

Impact of Cardiovascular Diseases on All-Cause Mortality in COPD



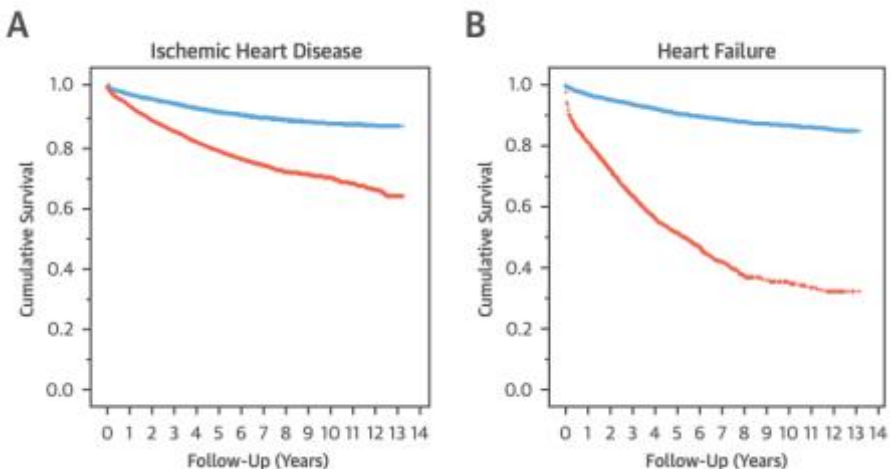
Kaplan-Meier survival curves illustrate the impact of heart disease on survival among patients with lung diseases.

COPD 31,646 Patients with follow-up of 5.2 ± 3.6 years

53% (16,812 patients) died.

Ischemic heart disease, heart failure, AF & peripheral vascular disease were independently associated with death.

Impact of Cardiovascular Diseases on All-Cause Mortality in Asthma



Asthma 60,424 Patients with follow-up of 5.2 ± 3.6 years

11% (6,649 patients) died.

Ischemic heart disease and heart failure were independently associated with death.



Annual Personal Health Care Spending in U.S. for Chronic Disease is High

½ Trillion Dollars in 2013

Dieleman JL et al.
JAMA 2016

COPD	\$ 53.8 billion	}	\$136.5 billion
Asthma	\$ 32.5 billion		
Pneumonia	\$ 37.1 billion		
Lung cancer	\$ 13.1 billion		
Ischemic heart disease	\$ 88.1 billion	}	\$274.7 billion
High blood pressure	\$ 83.9 billion		
Stroke	\$ 43.8 billion		
Heart failure	\$ 28.5 billion		
Atrial fibrillation	\$ 27.7 billion		
Peripheral vascular disease	\$ 2.7 billion		
Diabetes	\$101.4 billion	}	\$101.4 billion
Preterm birth	\$ 4.9 billion		

Wildfire Smoke and/or PM Exposure is a Risk Factor for Each



Wildfire Smoke Research Needs for Better Public Health Protection

- Establish more reliable exposure estimates and non-pulmonary health effects of wildfire emissions
- Identify biomarkers of exposure and health effects
- Identify intrinsic factors that increase susceptibility to wildfire smoke
- Identify built environment and socio-demographic factors that increase a community's susceptibility to wildfire smoke-related health responses



Wildfire Smoke Research Needs for Better Public Health Protection

- Determine health effects associated with combustion of different types of biomass and those involving structures
- Evaluate effectiveness of clinical and public health intervention strategies to reduce short-term exposures in those at highest-risk and long-term exposures in all



Thank you

Wayne E. Cascio, MD, FACC
Director, National Health and Environmental Effects Research Laboratory
Office of Research and Development
U.S. Environmental Protection Agency

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