Personal Monitoring Needs for Ozone Exposure Assessment and Health Effects Evaluations

June 26, 2018

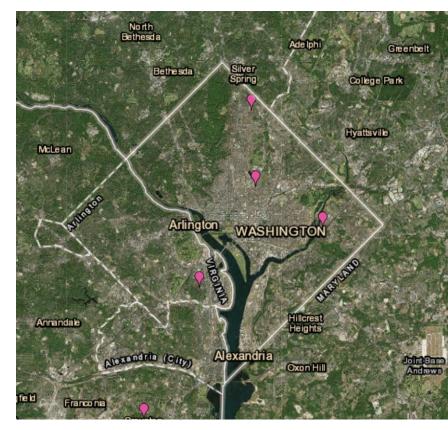
George D. Thurston, ScD. Professor NYU School of Medicine

Topics of Discussion

- Past Ozone Monitoring in Health Effects Studies
- Personal Exposure Assessment Challenges using Central Site Monitoring
- Future Performance Needs, from a Health/ Air Pollution Epidemiology Perspective

Limitations in Past Central-Site Ozone Exposure Estimation for Population-Based Health Effects Studies

- Limited number of sites outdoors (e.g., 4 in DC)
- Quenching near NO Sources (e.g., Traffic): $[NO + O_3 \rightarrow NO_2 + O_2]$
- Rooftop locations
- Differences between Indoors and Outdoors due to Ozone's high reactivity



Population Studies Were Informative, but Limited To Citywide Rooftop O₃ Avg. Exposures

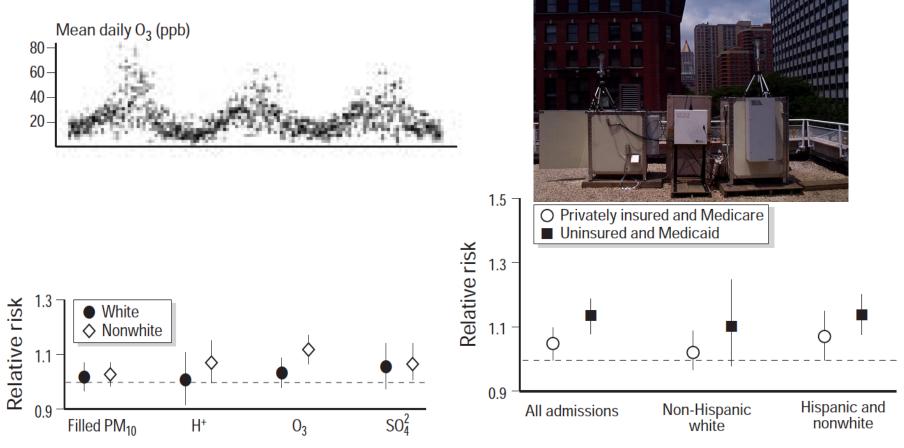


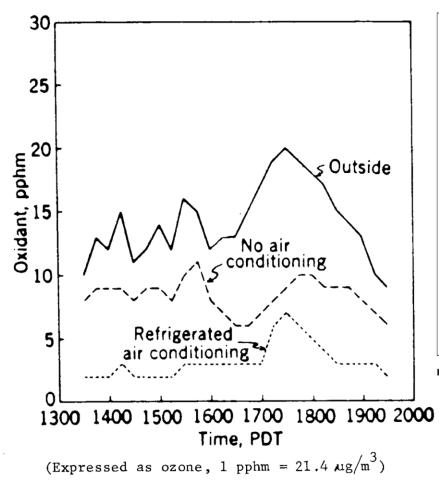
Figure 4. New York City, New York, race-specific relative risks (based upon the maximum minus mean increment) and their 95% CI for hospital admissions outcomes.

Figure 6. White and nonwhite O₃ relative risks (based upon the maximum minus mean increment) and their 95% CI for respiratory hospital admissions by insurance status in New York City, New York.

Gwynn and Thurston, The Burden of Air Pollution: Impacts among Racial Minorities, EHP, 2001.

Outdoor Concentrations Differ Indoor vs. Outdoor, High vs. Low Traffic

FIG. 5. TOTAL OXIDANT CONCENTRATIONS OUTSIDE AND INSIDE AN AIR-CONDITIONED HOSPITAL (from ref. 13)



Heuss, Kahlbaum, and Wolff

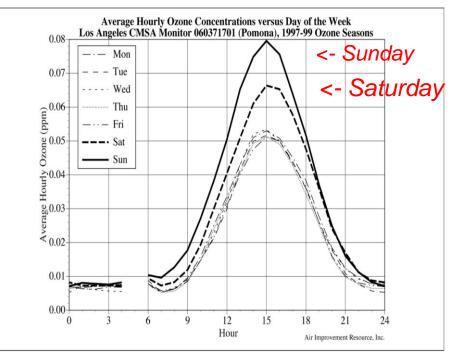


Figure 1. Average hourly O3 concentrations vs. day of week for Los Angeles CMSA monitor 060371701 (Pomona), 1997–1999 O3 seasons.

Outdoor Concentrations Differ With Height of Measurement

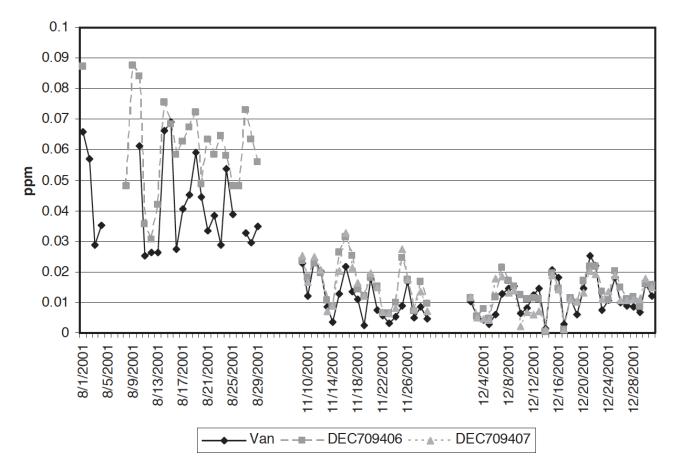
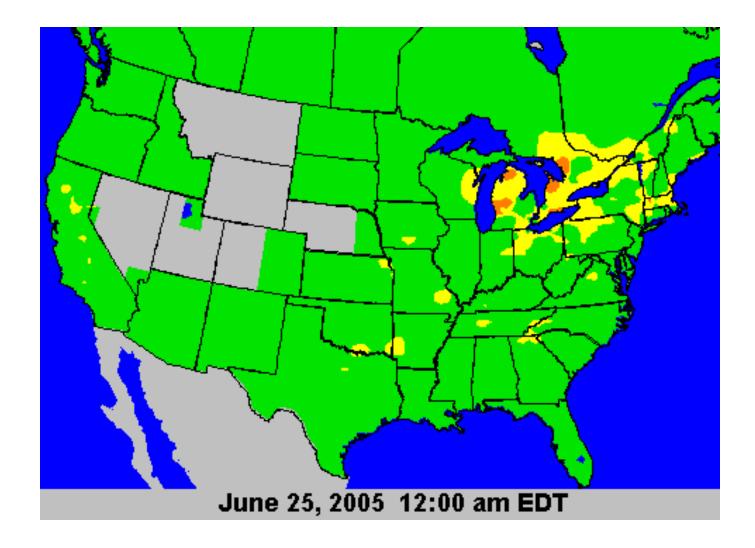


Fig. 6. Comparison of O₃ data, daily 1-h maxima, 2001.

Restrepo et al, A comparison of ground-level air quality data with New York State Department of Environmental Conservation monitoring ⁶ stations data in South Bronx Atmospheric Environment, 2004.

Outdoor Concentrations Vary Widely Spatially and Over Time



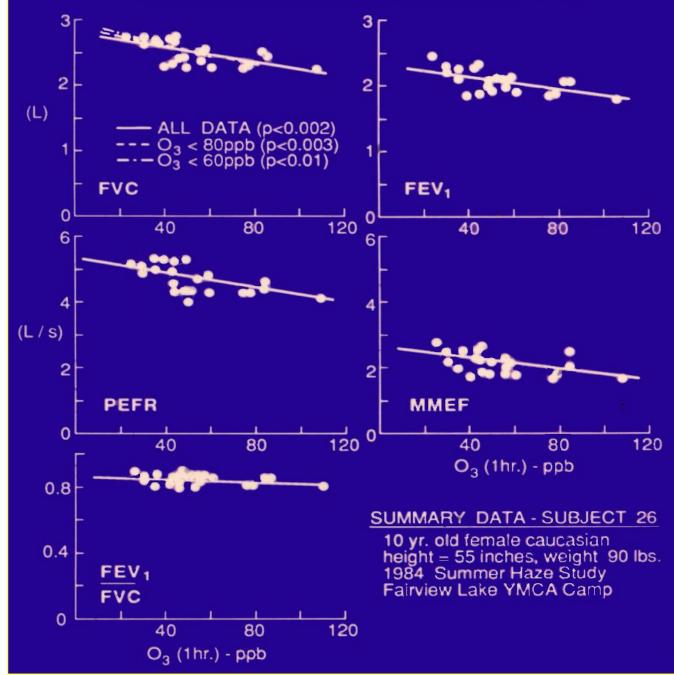
Field Panel Studies Helped Reduce Exposure Misclassification





The Fairview Lake, NJ Study Found Lung Function Decreases Even With **Ozone** Levels Below the 1-Hr. Legal Limits, and With <u>Larger</u> Impacts than found in 1-hr. <u>Exposure</u> **Chamber Studies**

NYU - HARVARD - EPA FIELD STUDY - 1984



Daily Asthma Attacks in Children Increase as Pollution Levels Rise

(Thurston et al., JRCCM 1997) Daily Number of Asthma Attacks in a Group of 50-60 Asthmatic Children

1-hr Daily Maximum Ozone Concentration (ppb)

Personal Health Measures Have Also Improved Over Time



<- THEN: Mechanical Peak Flow meters



- ECG & Heartbeat monitor (HRV), and Heart Rate Recovery
- Breathing Rate (RPM), Minute Ventilation (L/min)
- Activity intensity, peak acceleration, steps, cadence, positions and sleep tracker



WEARABLE BODY METRICS

- Bluetooth connectivity

Portable Ozone Monitoring Options, Each with Advantages and Disadvantages, Include:

- Electrochemical Ozone Sensor Systems
- UV Absorption Monitors
- Heated Metal Oxide Sensor Cell (HMOS)
- Badge/strip

Ozone Monitoring Performance Needs for the Next Generation of Health Studies at the Personal Level

Technical Performance Aims

- Meet Federal Reference Method Equivalence Reqm'ts*
- **Short time resolution** (e.g., 1 minute to 1-hr)
- Minimal Indoor HC, NO₂, or Humidity interferences (e.g., many aromatic compounds absorb 254-nm UV light).
- Low Minimum O₃ Detection limit (e.g., down to below ambient background levels, <10 ppb).

* e.g., <u>2B POM</u> in Federal Register / Vol. 80, No. 165 / Wednesday, August 26, 2015

Ozone Monitoring Performance Needs for the Next Generation of Health Studies at the Personal Level

Health Research Performance Aims

- **Convenient portability and reasonable cost** (e.g., < \$1000 per unit)
- Long battery life, easy recharge
- Synchronous **Geospatial Info** (e.g., with Smartphone)
- Automated monitoring data **Wireless Uploading**, with remote cross-checking and calibration (QA/QC).
- **Integration with continuous digital personal health** metric monitoring (e.g., respiratory and cardiac), rather than only once or twice per day health data.