

# **APPENDIX C**

## **HEALTH EFFECTS OF AMBIENT AIR POLLUTANTS**

## Health Effects of Ambient Air Pollutants

### Ozone

Ozone is a strong irritant that can constrict the airways, forcing the respiratory system to work hard to deliver oxygen. Individuals exercising outdoors, children and people with pre-existing lung disease such as asthma and chronic pulmonary lung disease are considered to be the most susceptible to the health effects of ozone. Short term exposure (lasting for a few hours) to ozone at levels typically observed in Southern California can result in aggravated respiratory diseases such as emphysema, bronchitis and asthma, shortness of breath, increased susceptibility to infections, inflammation of the lung tissue, increased fatigue as well as chest pain, dry throat, headache and nausea.

Elevated ozone levels are associated with increased school absences. In recent years, a correlation between elevated ambient ozone levels and increases in daily hospital admission rates, as well as mortality, has also been reported. An increased risk for asthma has been found in children who participate in multiple sports and live in high ozone communities.

Ozone exposure under exercising conditions is known to increase the severity of the above mentioned observed responses. Animal studies suggest that exposures to a combination of pollutants which include ozone may be more toxic than exposure to ozone alone. Although lung volume and resistance changes observed after a single exposure diminish, with repeated exposures biochemical and cellular changes appear to persist, which can lead to subsequent lung structural changes.

### Particulate Matter

A series of scientific studies has linked particulate matter, especially fine particles, with a variety of significant health problems. A consistent correlation between elevated ambient fine particulate matter (PM<sub>10</sub> and PM<sub>2.5</sub>) levels and an increase in mortality rates, respiratory infections number and severity of asthma attacks, and the number of hospital admissions has been observed in different parts of the United States and various areas around the world. In recent years, some studies have reported an association between long-term exposure to air pollution dominated by fine particles and increased mortality, reduction in life-span, and an increased mortality from lung cancer.

Daily fluctuations in fine particulate matter concentration levels have also been related to hospital admissions for acute respiratory conditions in children, to school and kindergarten absences, to a decrease in respiratory lung volumes in normal children and to increased medication use in children and adults with asthma. Recent studies show lung function growth in children is reduced with long-term exposure to particulate

matter. Seniors, people with pre-existing respiratory and/or cardiovascular disease and children appear to be more susceptible to the effects of PM<sub>10</sub> and PM<sub>2.5</sub>.

### **Carbon Monoxide (CO)**

Carbon monoxide replaces oxygen in the body's red blood cells. Individuals with a deficient blood supply to the heart, patients with diseases involving heart and blood vessels, fetuses (unborn babies), and patients with chronic hypoxemia (oxygen deficiency) as seen in high altitudes are the most susceptible to the adverse effects of CO exposure. People with heart disease are also more susceptible to developing chest pains when exposed to low levels of carbon monoxide. Exposure to high levels of carbon monoxide can slow reflexes and cause drowsiness, and result in death in confined spaces at very high concentrations.

Reduction in birth weight and impaired neurobehavioral development has been observed in animals chronically exposed to CO resulting in carboxyhemoglobin levels similar to those observed in smokers. Recent studies have found increased risks for adverse birth outcomes with exposure to elevated CO levels. These include pre-term births and heart abnormalities. Additional research is needed to confirm these results.

### **Nitrogen Dioxide (NO<sub>2</sub>)**

Population-based studies suggest that an increase in acute respiratory illness, including infections and respiratory symptoms in children (not infants), is associated with long-term exposures to NO<sub>2</sub> at levels found in homes with gas stoves, which are higher than ambient levels found in Southern California. Increase in resistance to air flow and airway contraction is observed after short-term exposure to NO<sub>2</sub> in healthy individuals. Larger decreases in lung functions are observed in individuals with asthma and/or chronic obstructive pulmonary disease (e.g. chronic bronchitis, emphysema) than in healthy individuals, indicating a greater susceptibility of these sub-groups.

In animals, exposure to levels of NO<sub>2</sub> considerably higher than ambient concentrations results in increased susceptibility to infections, possibly due to the observed changes in cells involved in maintaining immune functions. The severity of lung tissue damage associated with high levels of ozone exposure increases when animals are exposed to a combination of ozone and NO<sub>2</sub>.

### **Sulfur Dioxide (SO<sub>2</sub>)**

Exposure of a few minutes to low levels of SO<sub>2</sub> can result in airway constriction in some asthmatics. All asthmatics are sensitive to the effects of SO<sub>2</sub>. In asthmatics, increase in resistance to air flow, as well as reduction in breathing capacity leading to severe breathing difficulties, are observed after acute exposure to SO<sub>2</sub>. In contrast, healthy individuals do not exhibit similar acute responses even after exposure to higher concentrations of SO<sub>2</sub>. Animal studies suggest that despite being a respiratory irritant, it does not cause substantial lung injury at ambient concentrations. However, very high

levels of exposure can cause lung edema (fluid accumulation), lung tissue damage, and sloughing off of cells lining the respiratory tract.

Some population-based studies indicate that the mortality and morbidity effects associated with fine particles show a similar association with ambient SO<sub>2</sub> levels. In these studies, efforts to separate the effects of SO<sub>2</sub> from those of fine particles have not been successful. It is not clear whether the two pollutants act synergistically or one pollutant alone is the predominant factor.

## **Sulfates**

Most of the health effects associated with fine particles and sulfur dioxide at ambient levels are also associated with sulfates. Thus, both mortality and morbidity effects have been observed with an increase in ambient sulfate concentrations. However, efforts to separate the effects of sulfates from the effects of other pollutants have generally not been successful. Clinical studies of asthmatics exposed to sulfuric acid suggest that adolescent asthmatics are possibly a subgroup susceptible to acid aerosol exposure. Animal studies suggest that acidic particles such as sulfuric acid aerosol and ammonium bisulfate are more toxic than non-acidic particles like ammonium sulfate. Whether the effects are attributable to acidity or to particles remains unresolved.

## **Lead**

Fetuses, infants, and children are more sensitive than others to the adverse effects of lead exposure. Exposure to low levels of lead can adversely affect the development and function of the central nervous system, leading to learning disorders, distractibility, inability to follow simple commands, and lower intelligence quotient. In adults, increased lead levels are associated with increased blood pressure. Lead poisoning can cause anemia, lethargy, seizures and death. It appears that there are no direct effects of lead on the respiratory system. Lead can be stored in the bone from early-age environmental exposure, and elevated blood lead levels can occur due to breakdown of bone tissue during pregnancy, hyperthyroidism (increased secretion of hormones from the thyroid gland) and osteoporosis (breakdown of bony tissue). Fetuses and breast-fed babies can be exposed to higher levels of lead because of previous environmental lead exposure of their mothers.