

Linking environmental effects to health impacts – a computer modelling approach

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EIA & human health

- A statutory European Union requirement for EIA to consider impacts on human health
- Seldom done in practice
- We describe a computer modelling approach to quantifying potential health impacts from predicted air quality impacts of a proposed waste incinerator in England

Aim

To model the likely health impacts of exposure to criterion air pollutants from a proposed energy-from-waste plant in England

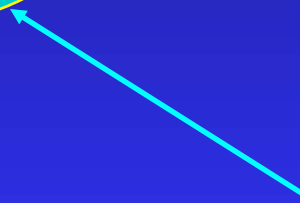
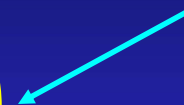
Is there a causal
relationship?

Change in
population
pollution
exposure

Health
Impact

Estimate of
health effect of
unit change in
pollutant level

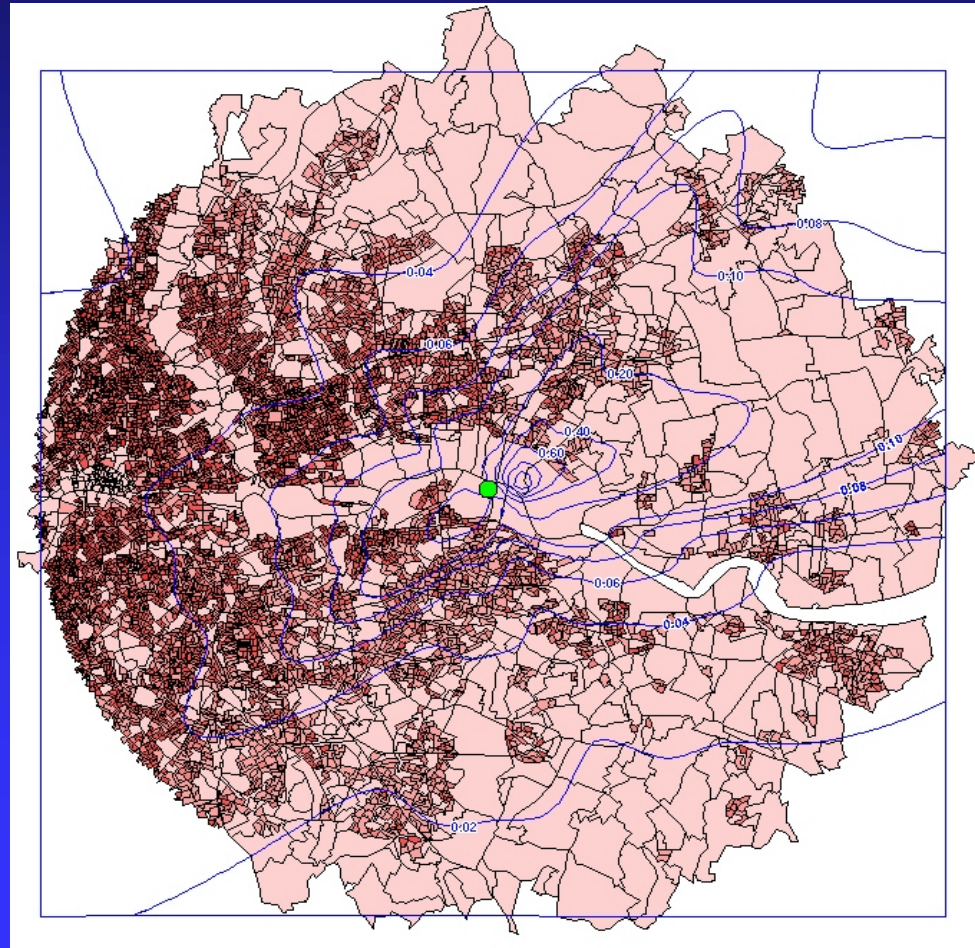
Baseline event rate



Prediction of environmental effects

- Estimates of emissions of criterion air pollutants from the incinerator
- Ground level concentrations predicted using the ADMS air dispersion model
- Contour maps of additional annual average pollution exposure from the proposed plant and entered into a geographical information system (GIS)
- Enumeration district -level population data also entered into GIS (Total population = 0.5 million)

Population Data and Additional Pollution Estimates



Calculating the health impacts

■ $\delta E = \beta * \delta CP * E$

Where

- ◆ δE = *Change in number of outcome events*
- ◆ β = *Exposure-response coefficient*
- ◆ δCP = *Change in ambient concentration *
Population*
- ◆ E = *Background rate of outcome events*

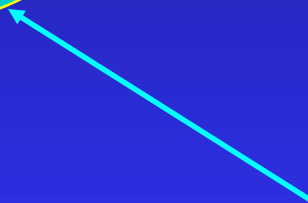
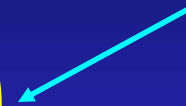
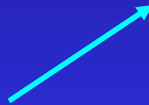
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Data Sources

- Literature search: Medline, Embase, Biological Abstracts, HELMIS
- Literature reviews on the effects of :
 - ◆ Particulate matter
 - ◆ nitrogen dioxide
 - ◆ sulphur dioxide

Effects of particulate matter (epidemiological studies)

Strong evidence for a causal effect of acute PM_{10}

- Non-traumatic deaths

Moderate evidence for a causal effect of acute PM_{10}

- Respiratory deaths
- Emergency hospital admissions for respiratory and circulatory diseases in adults
- Emergency hospital admissions and emergency attendances for asthma in children and younger adults

Moderate evidence for causal effect of longterm PM_{10}

- Non-traumatic deaths

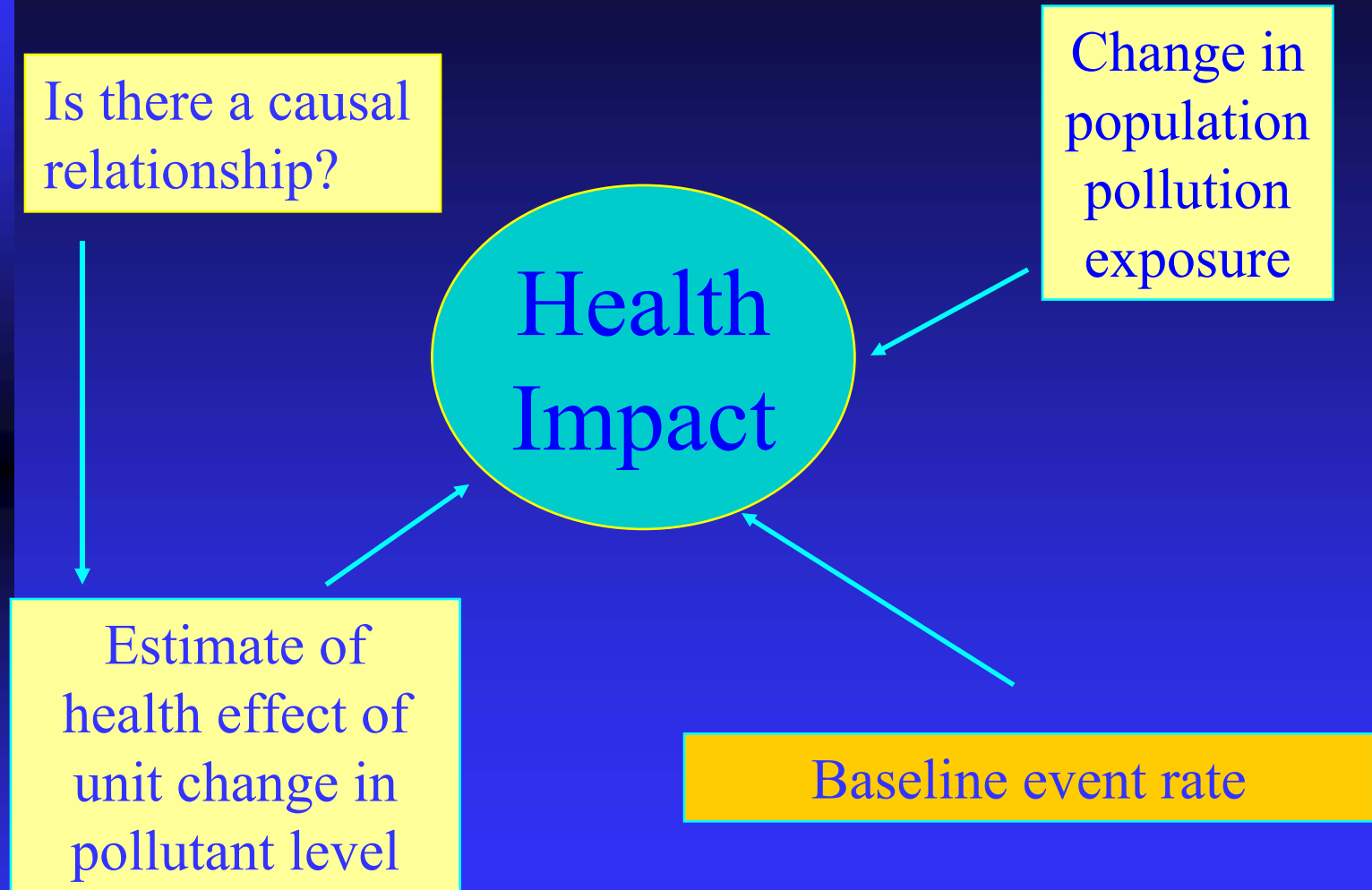
Estimates of some health outcomes in UK of a $10 \mu\text{g}/\text{m}^3$ increase in PM_{10}

- 0.5% increase in non-traumatic mortality
Combined NMMAPS and APHEA (Anderson 2002)
- 0.8% increase in hospital admissions for respiratory diseases
WHO (WHO 2000)

Sensitivity Analyses

e.g. Change in all-cause mortality
per $10\mu\text{g}/\text{m}^3$ increase in PM_{10}

■ London		0.3%
■ W Europe	(APHEA)	0.4%
■ International	(WHO)	0.7%



Data Sources

- ONS mortality statistics 1998 - 2001
 - ◆ Non-traumatic deaths: 8.126/1,000 pop
- Hospital episode data 1998 – 2001
 - ◆ Respiratory admissions: 7.411/1,000 pop

Effect of an Individual Pollutant

Exposure-response coefficient

X

Change in population ambient annual pollution
exposure

X

Rate of outcome events

No. of deaths brought forward per annum, from PM₁₀

Cause of death	Age group	No. of deaths pa
Total non-traumatic	All	0.030
Respiratory	All	0.013
COPD+ asthma	≥65	0.0078

No. of extra or earlier admissions per year, from PM₁₀ exposure

Disease	Age Group	No. pa
Respiratory	All	0.044
	≥65	0.0104
<i>Asthma</i>	0-14	0.0027
	15-64	0.0055
Circulatory	0-64	0.029
	≥65	0.021
<i>Ischaemic heart disease</i>	0-64	0.011
	≥65	0.011

Discussion (1)

- It is possible to quantify the impact on some health outcomes of exposure to some additional pollutant concentrations, caused by a new point source.
- But:
 - ◆ How certain are these estimates?
 - ◆ How meaningful are they?
 - ◆ Do they inform planning decisions?

Discussion (2)

■ We believe that:

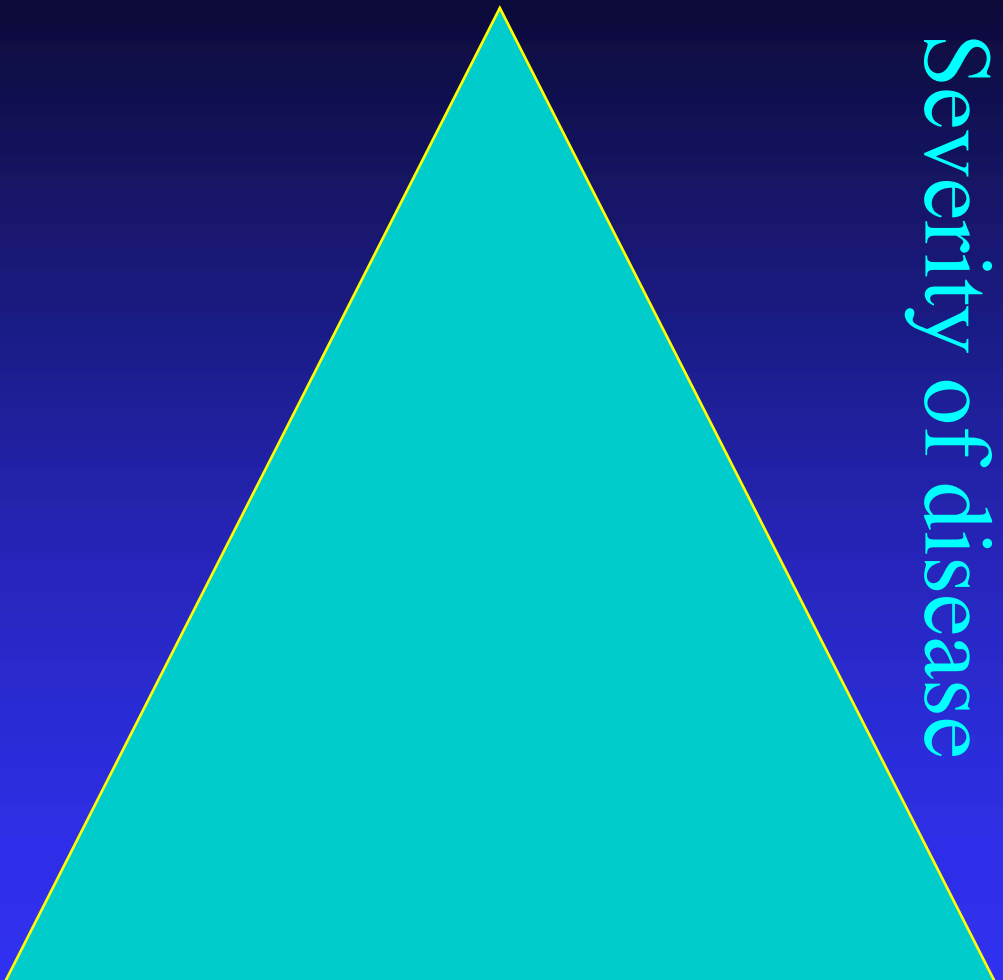
- ◆ The estimates are a useful *order of magnitude* guide to some health impacts;
- ◆ The analysis provides useful contextual information for decision makers;
- ◆ The results require careful presentation – for the public, any additional effects are unwelcome and unacceptable.

Acknowledgments

- **Dr Michael Joffe, Imperial College London**
- **The waste company that funded us to develop the method**

Numbers affected

Severity of disease



Knowledge - of effects
and of numbers affected