

# **Estimating the Mortality Burden of Fine Particulate Matter Exposure Attributable to Indoor and Outdoor Microenvironments**

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**Thursday, June 13, 2019  
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# Disclaimer

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# Estimating the Mortality Burden of Fine Particulate Matter Exposure Attributable to Indoor and Outdoor Microenvironments

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# Acknowledgements

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**Left to right: Lew Harriman (Mason-Grant), Terry Brennan (Camroden), Vito Ilacqua (EPA)**



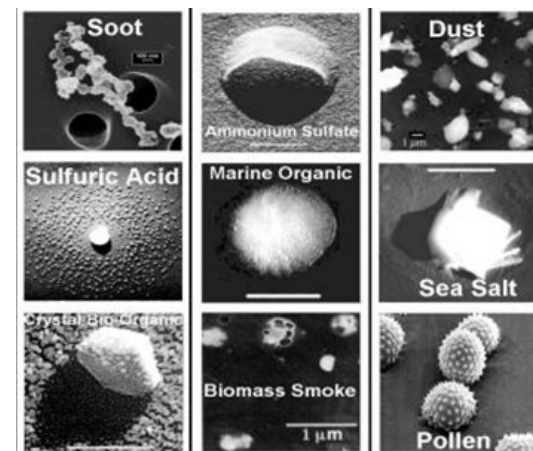
**Laura Kolb (EPA)**



# **PARTICULATE MATTER EXPOSURE AND HUMAN HEALTH**

# Particulate Matter (PM): Indoors and Outdoors

- Solid and liquid particles suspended in air
- Many indoor and outdoor sources
  - **Outdoors:** Traffic, industry, natural, atmospheric reactions



<https://slideplayer.com/slide/8670425/>

- **Indoors:**
  - Appliances
  - Cleaning
  - Combustion
  - Chemical reactions
  - Resuspension
  - Others



outdoor sources that enter indoors through heating, ventilation, and air conditioning systems; open doors and windows; and leakage through walls and roofs<sup>1</sup>



airborne allergens and bacteria in outdoor air and that come from people and their pets and plants indoors<sup>2</sup>



emissions from food as it's cooking<sup>3</sup>



candles, incense, wood burning<sup>3</sup>



cleaning activities like dusting, vacuuming, and ironing<sup>3</sup>



cigarettes, e-cigarettes, and other smoking materials<sup>4</sup>



desktop laser printers and 3-D printers<sup>1</sup>



gas and electric ranges and stoves<sup>1</sup>



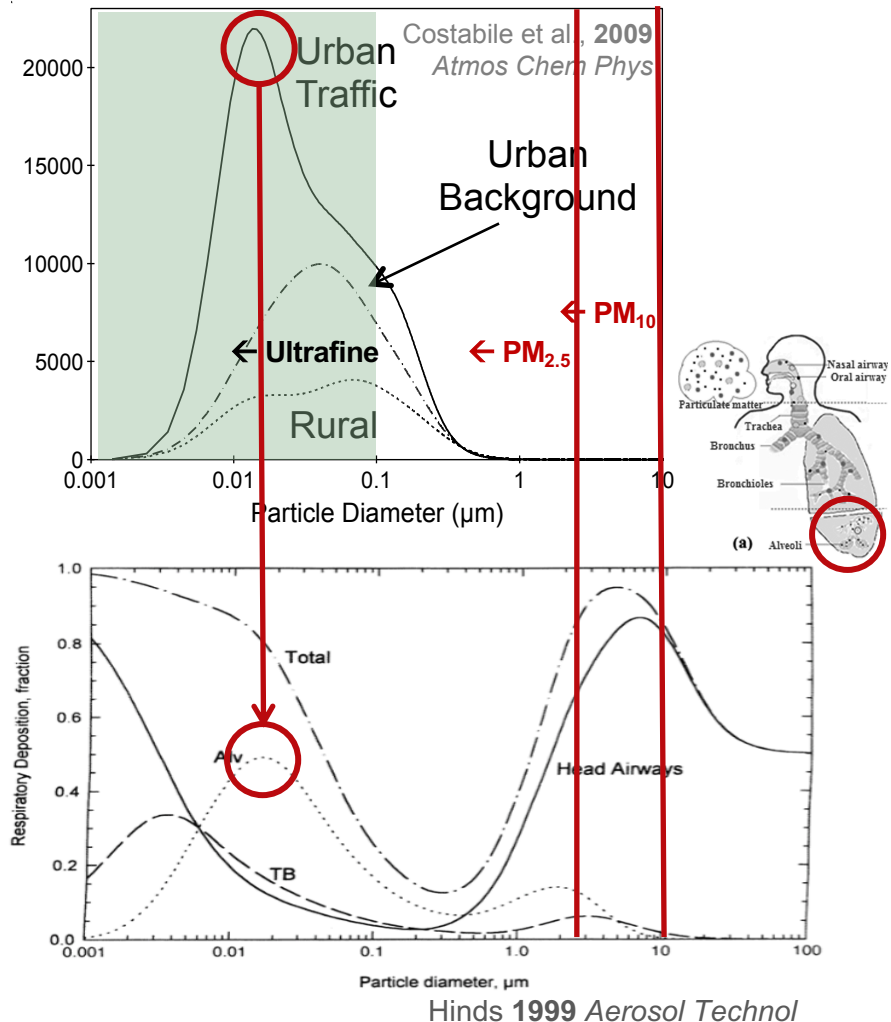
mold that grows on indoor surfaces<sup>2</sup>



chemical reactions between elements in the air and materials inside of buildings<sup>5</sup>

# Particulate Matter (PM): Indoors and Outdoors

- Wide range of sizes and constituents
  - <5 **nanometers** to >50 **micrometers**
  - Size governs deposition in the respiratory tract
  - Most particles of outdoor origin are smaller than 100 nm
- Wide range of measurement methods and classifications
  - UFPs,  $PM_{2.5}$ ,  $PM_{10}$ , etc.
  - $PM_{2.5}$  and  $PM_{10}$  are regulated in the U.S. as part of the National Ambient Air Quality Standards (NAAQS)



# Particulate Matter (PM): Indoors and Outdoors

We know ***much more*** about the health effects associated with **outdoor PM sources** than **indoor PM sources**

- Mostly PM<sub>2.5</sub>

Fine beach sand  
90 µm in diameter

Human hair  
50–70 µm in diameter

PM<sub>10</sub>  
≤10 µm in diameter

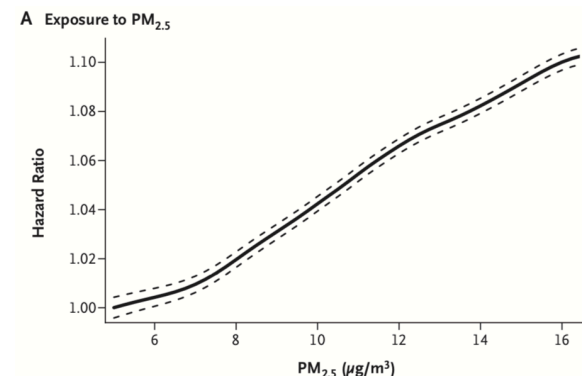
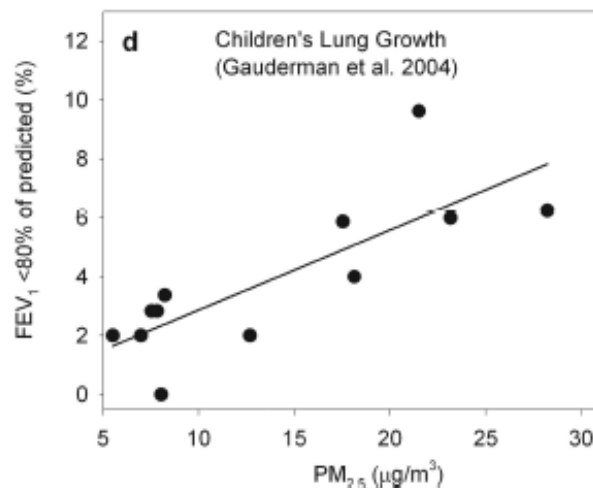
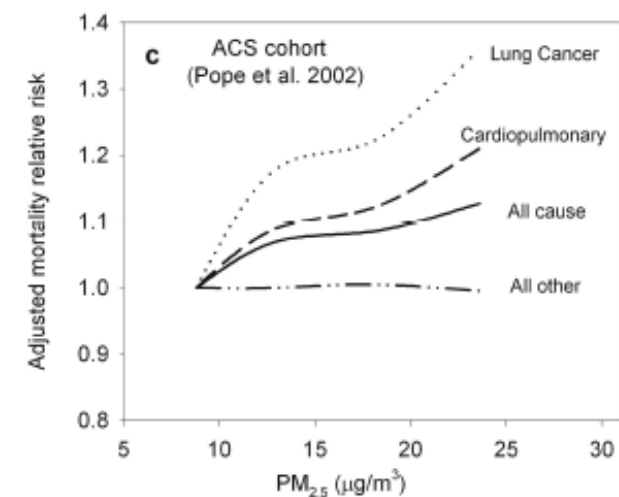
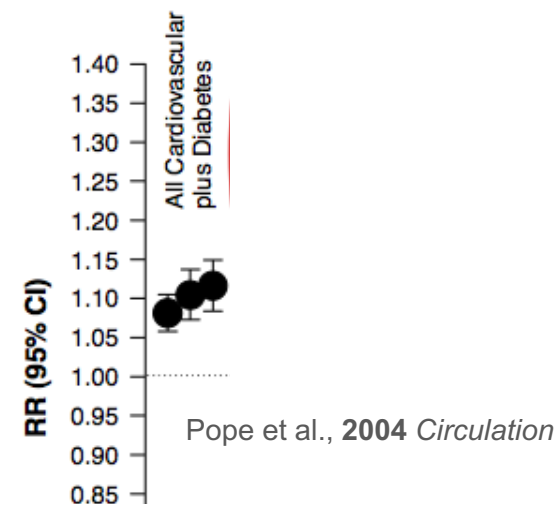
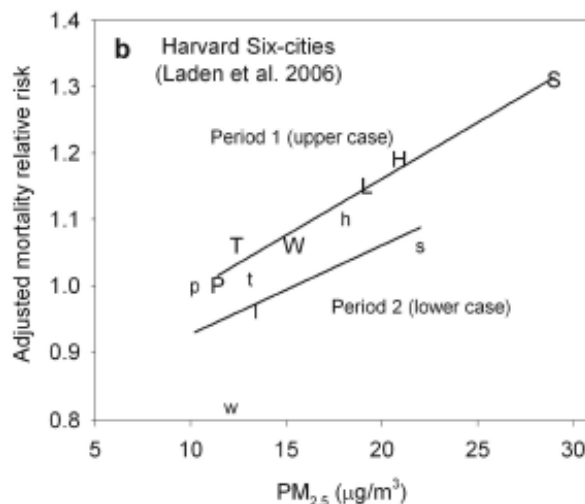
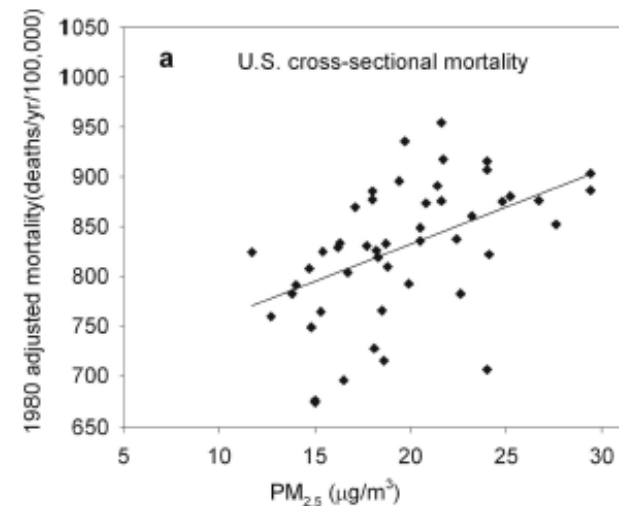
PM<sub>2.5</sub>  
≤2.5 µm in diameter

This graphic depicts size comparisons for particulate matter (PM) in micrometers (µm).  
Note that PM<sub>2.5</sub> is not visible to the naked eye.

# Outdoor PM and Mortality: Epidemiology

## Associations with ambient fine particulate matter (PM<sub>2.5</sub>)

## PM in outdoor air



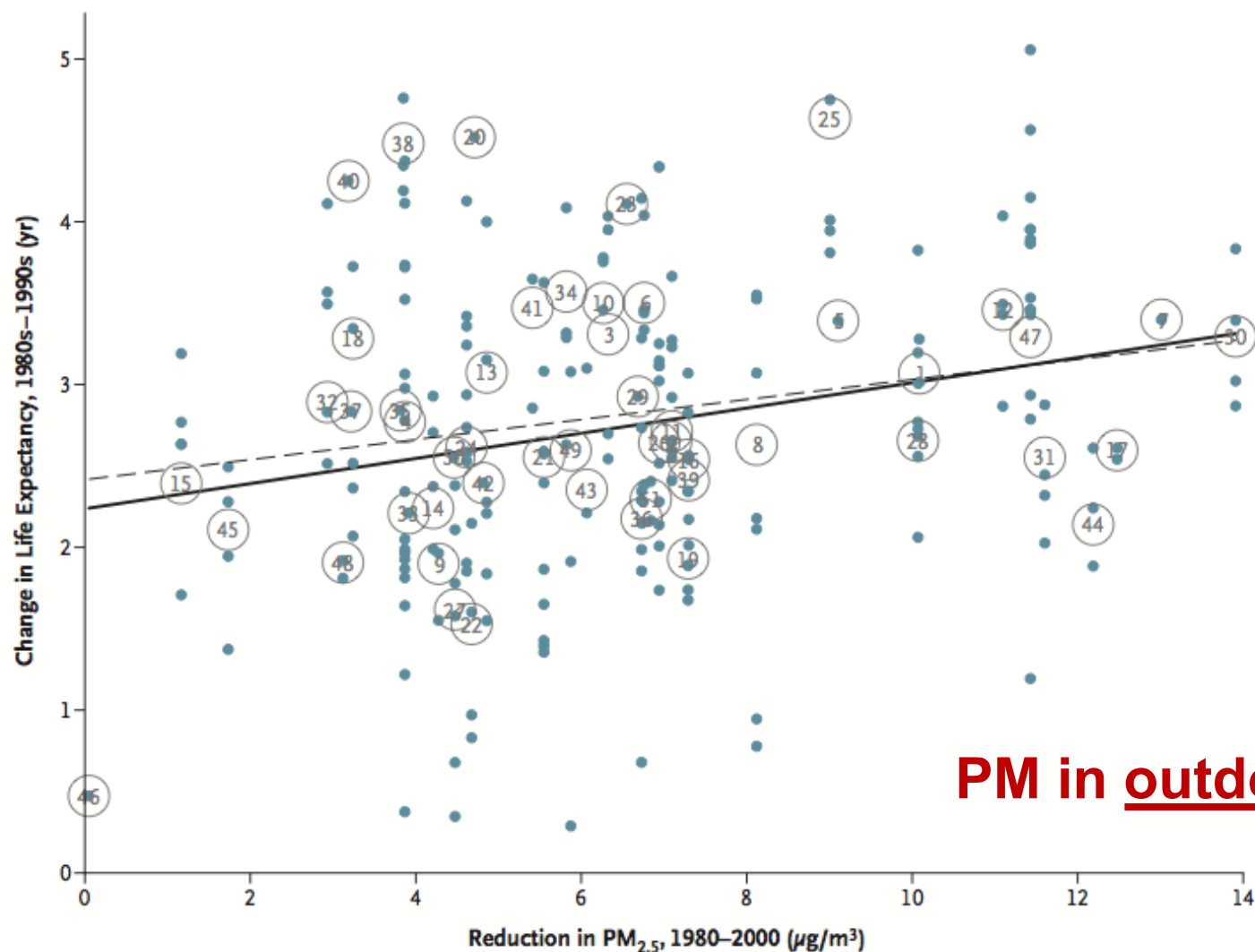
Di et al., 2017 *NEJM*

Pope and Dockery, 2006 *J Air Waste Manage Assoc*



# Outdoor PM and Mortality: Epidemiology

Reduce outdoor PM<sub>2.5</sub> by 10  $\mu\text{g}/\text{m}^3$  → increase life expectancy by 0.61 years

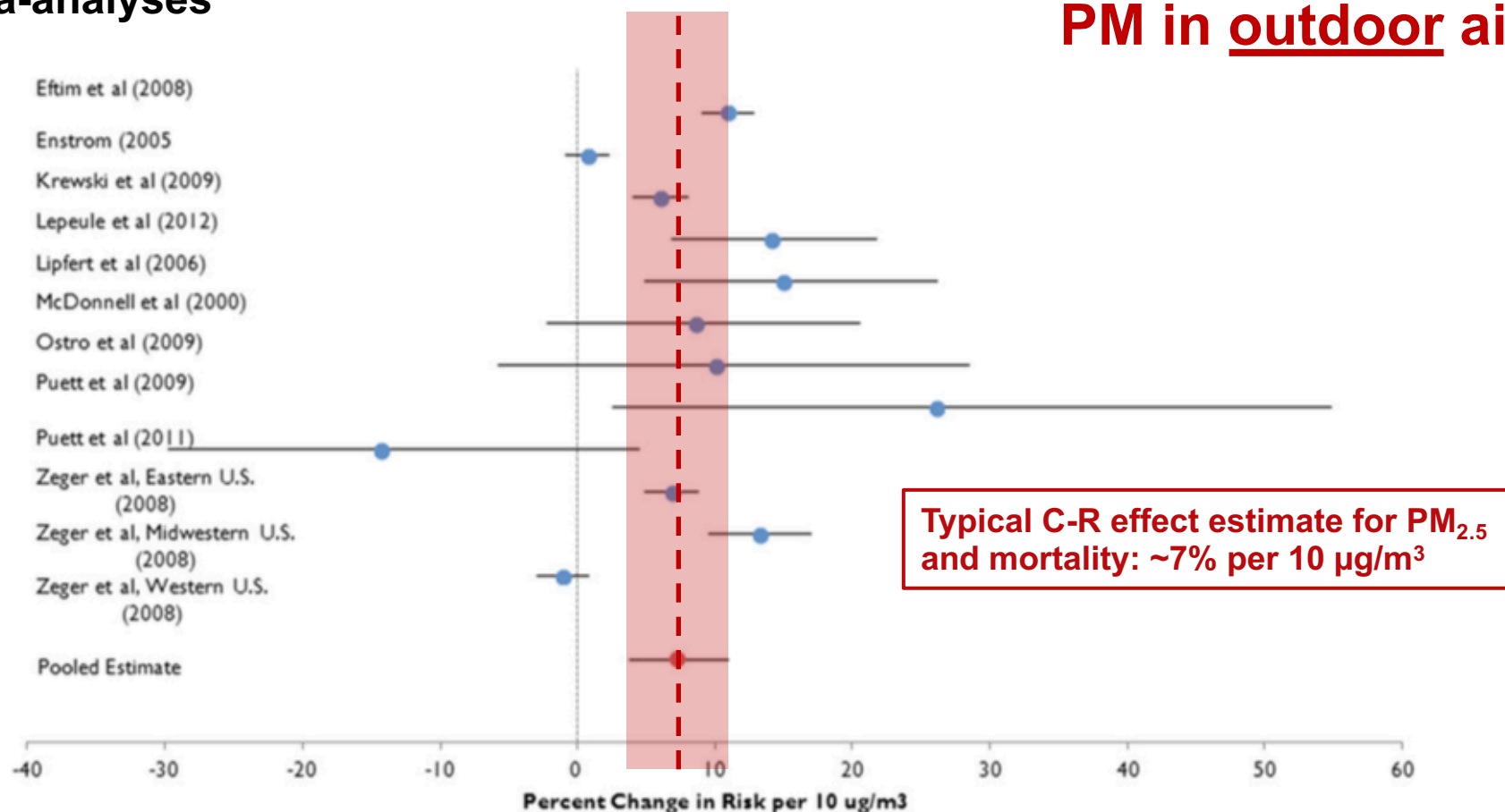


PM in outdoor air

# Outdoor PM and Mortality: Epidemiology

## Meta-analyses

PM in outdoor air

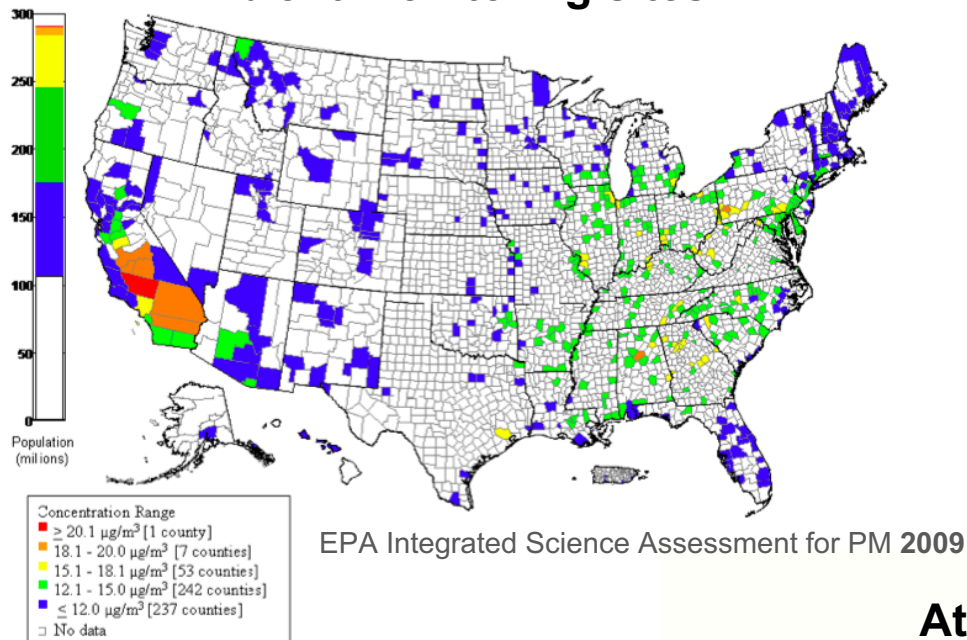


**Fig. 2.** Pooled estimate of long-term all-cause mortality using the studies available to the experts in USEPA's 2006 elicitation and the newer studies.

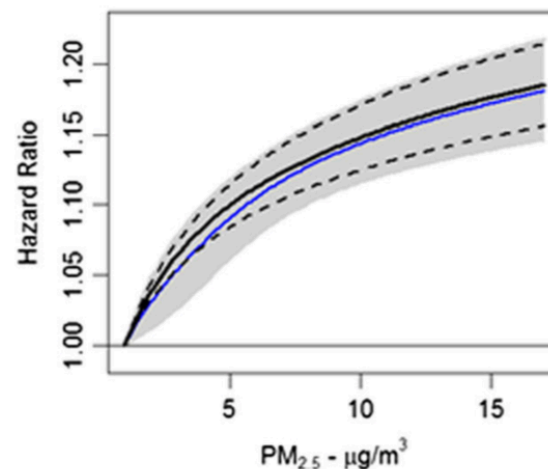


# Outdoor PM and Mortality: Epidemiology → Models

## Ambient monitoring sites

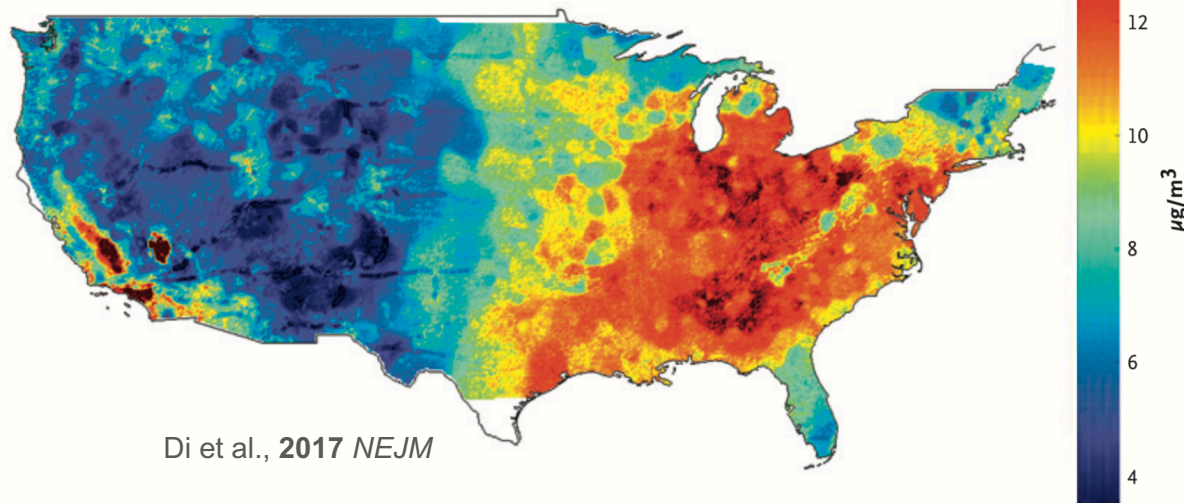


## Concentration-response (CR) functions



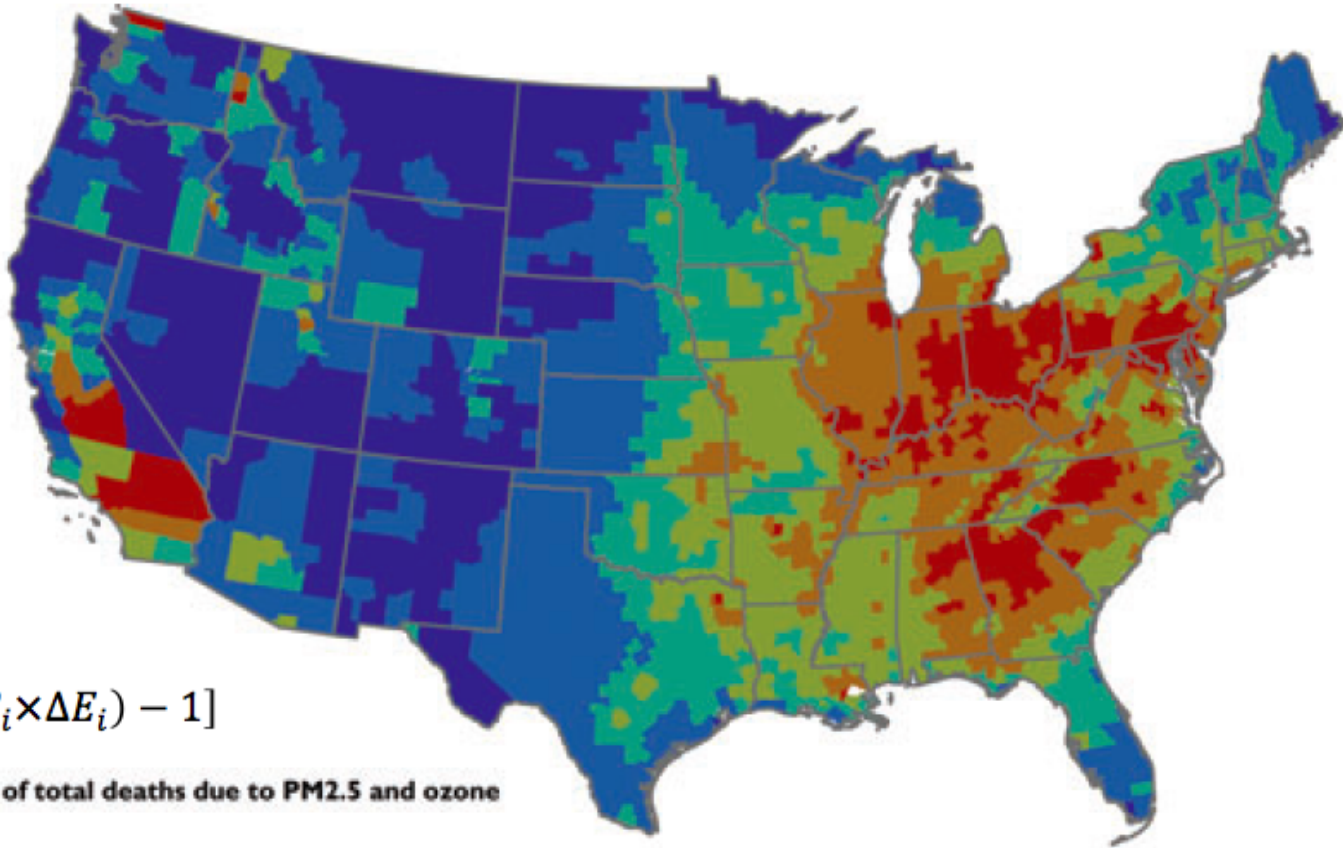
Nasari et al. 2016 *Air Qual Atmos Health*

## Atmospheric models



Di et al., 2017 *NEJM*

# Outdoor PM and Mortality: Epidemiology → Models



Typical  
C-R Function:

$$\Delta y_i = y_0 [\exp(\beta_i \times \Delta E_i) - 1]$$

An estimated **~130,000 deaths** in 2005 in  
the United States were attributed to  
**outdoor PM<sub>2.5</sub>**

# Outdoor PM and Mortality: Epidemiology → Models

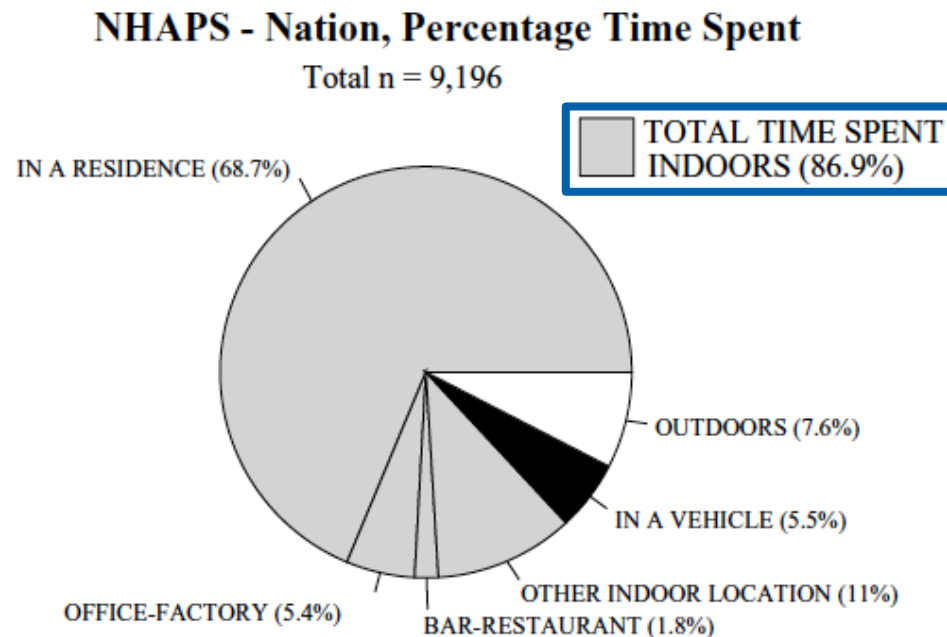
- A variety of approaches have been used to estimate the mortality burden associated with exposure to ambient PM<sub>2.5</sub>, both in the United States and globally.

Reference	Function	U.S. Mortality Burden
Fann et al. <b>2012</b> <i>Risk Analysis</i>	Log-linear $\Delta y = y_o(e^{\beta \Delta x} - 1) Pop$	130k (51k–200k) in 2005 320k (180k–440k) in 2005
Fann et al. <b>2017</b> <i>Env Health Persp</i>	Log-linear $y_{ija} = m_{0ija} \times (e^{\beta \cdot C} - 1) \times P_{ija}$	120k (83k–160k) in 2010 200k (43k–1.1M) in 2010
Cohen et al. <b>2017</b> <i>Lancet</i>	GBD IER $RR_{IER}(z) = 1 + \alpha \{1 - \exp[-\gamma (z - z_{cf})^\delta]\}$	88k (67k–115k) in 2015
Burnett et al. <b>2018</b> <i>PNAS</i>	GEMM $R(z) = \exp\{\theta \log(1 + z/\alpha) \omega(z)\}$	121k–213k in 2015 (United States+Canada)
Tessum et al. <b>2019</b> <i>PNAS</i>	Modified GBD $HR(C) = \exp\left(\frac{\gamma * \ln(C + 1)}{1 + \exp[-(C - \delta)/\lambda]}\right)$	131k (no CI) in 2015

# Where Are We Exposed to PM<sub>2.5</sub>?

Nearly all outdoor air pollution epidemiology studies don't account for an important point...

**We spend most of our time indoors!**



Klepeis et al. 2001 *J Exp Anal Environ Epidem*

# Where Are We Exposed to PM<sub>2.5</sub>?



**Joseph Allen** @j\_g\_allen · May 20

“So there is a big question here. If all these studies have found an association between outdoor air pollution and a decrease in life quality and life expectancy, but we’re not outside, how does that relationship still hold?” -@marinavance

#HomesForHealth



## The Hidden Air Pollution in Our Homes

Outdoor air has been regulated for decades, but indoor domestic activities may be more dangerous.

[newyorker.com](http://newyorker.com)



**Joseph Allen**

@j\_g\_allen

Following

Exactly. This is the dirty secret of outdoor air pollution

(Or, more accurately, the dirty secret of outdoor air pollution epidemiology.)

**Peter DeCarlo** @ProfPeteD

Replying to @j\_g\_allen @marinavance

Because in the absence of major sources (cooking/smoking) indoor fine PM levels are due to outdoor PM transported inside and, while indoor levels are lower in concentration, they are strongly correlated to outdoor PM levels.

11:15 AM - 20 May 2019

2 Likes



2



16



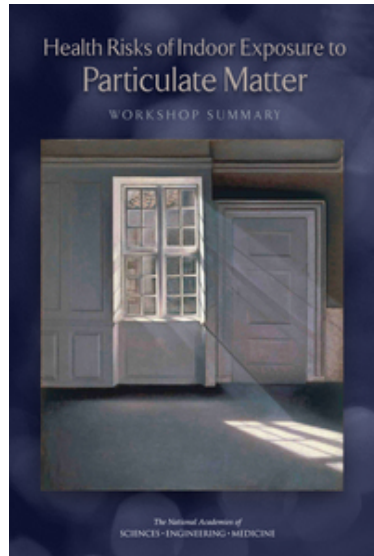
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# Where Are We Exposed to PM<sub>2.5</sub>?

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## Health Risks of Indoor Exposure to Particulate Matter

WORKSHOP SUMMARY

*The National Academies of*  
SCIENCES • ENGINEERING • MEDICINE

said. Charles Weschler from Rutgers University said he would argue that since the bulk of exposure to outdoor PM particles occurs indoors, more is known about the risk of indoor exposure to outdoor PM than is known about the risk of outdoor exposure to outdoor PM or indoor exposure to PM of indoor origin. Kipen replied that he agreed with Weschler but that that fact is not actualized in regulation.

<http://nationalacademies.org/IndoorPM>

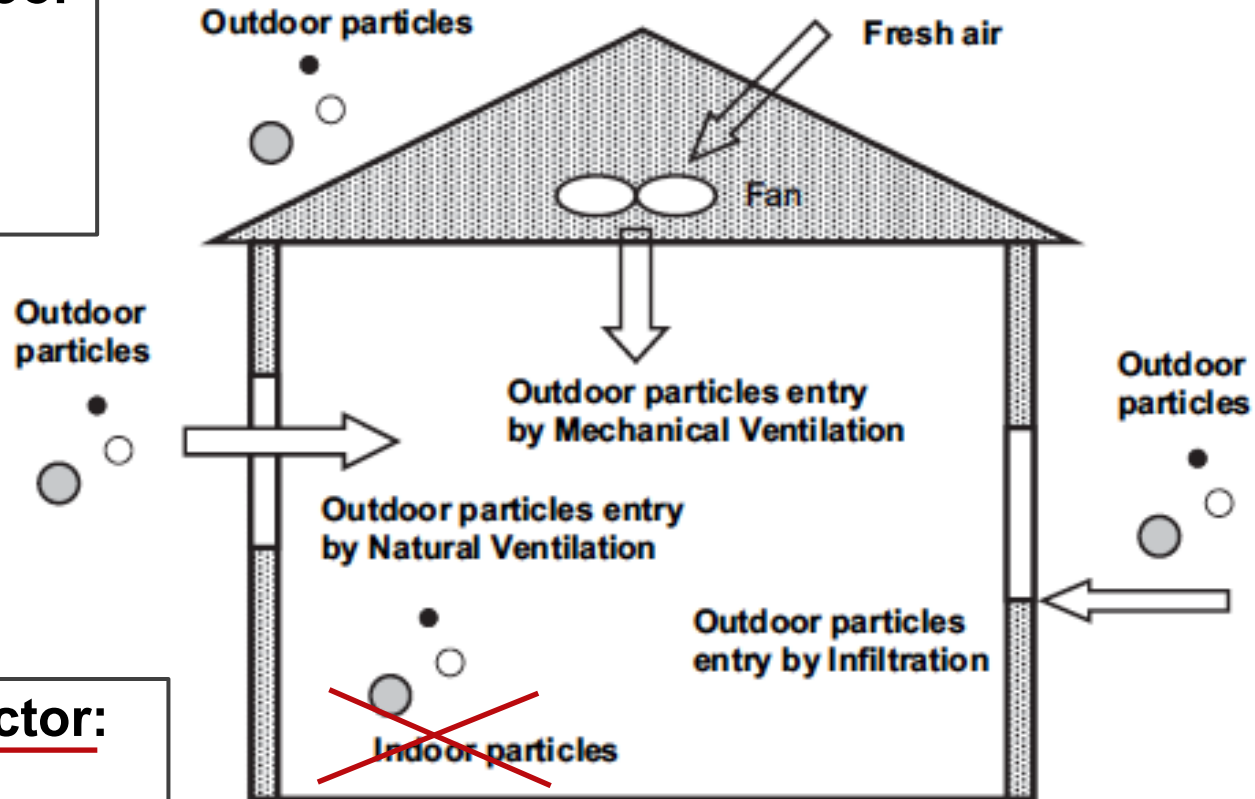
# **ATTRIBUTING PM<sub>2.5</sub> EXPOSURES: CONCEPTUAL FRAMEWORK**



# Indoor PM: Key Definitions

**Indoor/Outdoor ratio:**

$$I / O = \frac{C_{in}}{C_{out}}$$



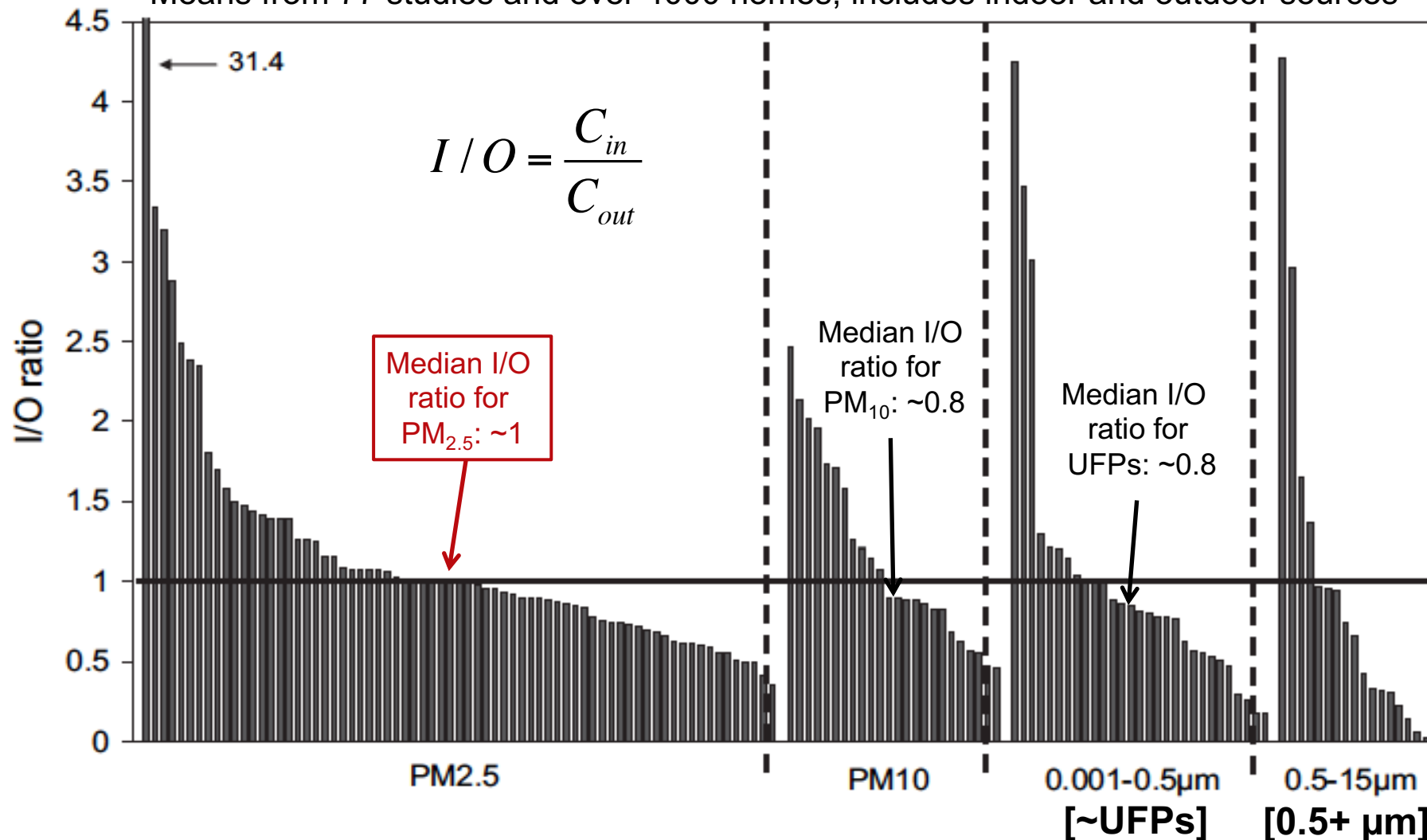
**Infiltration factor:**

$$F_{inf} = \frac{C_{in}}{C_{out}} \bigg|_{no\ indoor\ sources}$$

Chen and Zhao, 2011 *Atmos Environ*

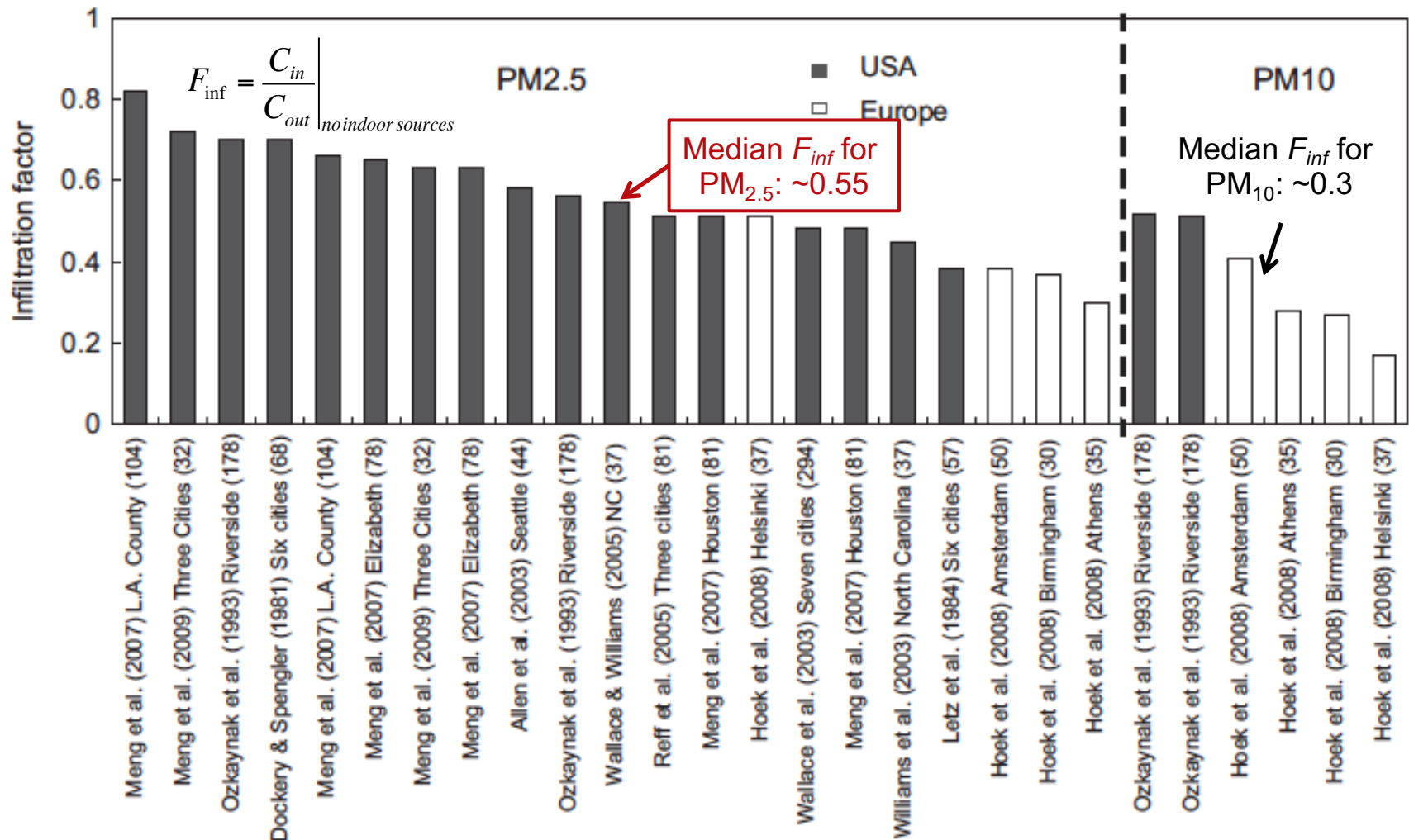
# I/O PM Ratios: Indoor + Outdoor Sources

Means from 77 studies and over 4000 homes; includes indoor and outdoor sources



# PM Infiltration Factors: Indoor PM of Outdoor Origin

Means from 21 samples from more than 20 homes (includes only outdoor PM infiltration)  
Total number of homes: ~1000 in the United States and ~150 in Europe



# Attributing PM<sub>2.5</sub> Exposures and Mortality Burden

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- **Key issue:** Historical associations between ambient PM<sub>2.5</sub> concentrations and adverse health effects (e.g., mortality) have inherently (inadvertently?) accounted for exposures in all of the different environments in which people spend their time. **PLUS**, we are exposed to PM<sub>2.5</sub> from numerous indoor sources.
- **Our goal:** To develop and apply a framework for estimating the total U.S. mortality burden attributable to PM<sub>2.5</sub> exposure of both indoor and outdoor origin in the primary nonsmoking microenvironments in which people spend most of their time.

# Attributing PM<sub>2.5</sub> Exposures and Mortality Burden

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- The **framework** combines a typical **exposure-response function** with **adjusted mortality effect estimates** that account for underlying exposures to PM<sub>2.5</sub> of outdoor origin that likely occurred in the original epidemiology populations from which effect estimates are derived.
- We **demonstrate** the framework using **several scenarios** to estimate the potential magnitude and bounds of the U.S. mortality burden attributable to total PM<sub>2.5</sub> exposure (**both indoor and outdoor sources**) across all nonsmoking environments under a variety of assumptions.

Journal of Exposure Science &  
Environmental Epidemiology

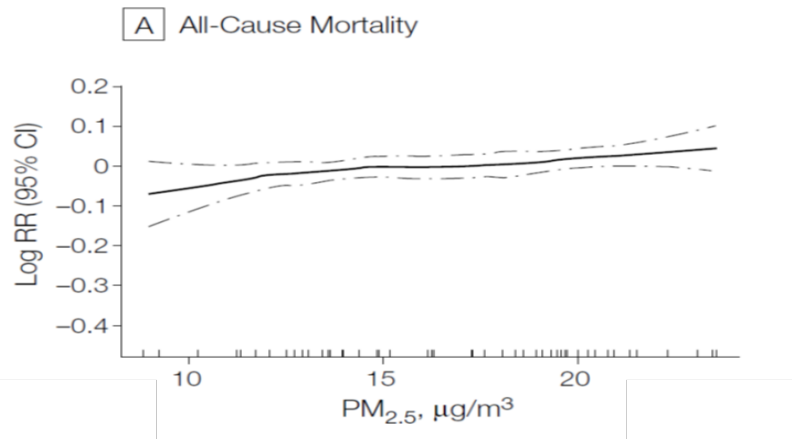
A framework for estimating the US mortality burden of fine particulate matter exposure attributable to indoor and outdoor microenvironments

Parham Azimi<sup>1</sup> · Brent Stephens<sup>1</sup>

<https://www.nature.com/articles/s41370-018-0103-4>

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# PM<sub>2.5</sub> Mortality Effect Estimates



For example, Pope et al. (2002) reported a **6%** increase in all-cause mortality *Relative Risk* (RR) with **10 µg/m<sup>3</sup>** increase in **outdoor PM<sub>2.5</sub>** concentration

Pope et al. 2002 *JAMA*

Does the **average human's exposure concentration** to PM<sub>2.5</sub> of outdoor origin increase 10 µg/m<sup>3</sup> if the **outdoor PM<sub>2.5</sub>** increases 10 µg/m<sup>3</sup>?

People are usually exposed to a fraction of outdoor PM<sub>2.5</sub>, depending on their activity patterns (e.g. <10 µg/m<sup>3</sup>)

We think we **SHOULD NOT** use the **Relative Risk (RR) results directly** from epidemiology studies for estimating all-cause mortality associated with **indoor exposures**

# Modifying the Concentration-Response (C-R) Function

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## Typical C-R

$$\Delta y_i = y_0 [\exp(\beta_i \times \Delta E_i) - 1] Pop$$

## Modified C-R

$$\Delta y_{PM2.5} = y_0 \left[ \exp \left( \sum_z \left( \beta_{PM2.5,z,modified} \times \sum_j (\Delta C_{PM2.5,z,j} \times t_j) \right) \right) - 1 \right] Pop$$

- $y_0$  : Annual baseline prevalence of illness (per person per year)
- $\beta$  : C-R endpoint effect estimate for  $PM_{2.5}$  (per  $\mu g/m^3$ )
- $\Delta E$  : Change in exposure concentration ( $\mu g/m^3$ )
- $\Delta C_j$  : Long-term  $PM_{2.5}$  concentrations in a particular microenvironment  $j$  with respect to an assumed reference value ( $\mu g/m^3$ )
- $t_j$  : Average fraction of time spent in a particular microenvironment  $j$
- $z$  : Model parameters for either indoor or ambient generated particles



# Modifying the Concentration-Response (C-R) Function

- Expanding to include indoor and outdoor PM<sub>2.5</sub> sources:

$$\Delta y_{PM2.5} = y_0 \left[ \exp \left( \beta_{PM2.5,IG,modified} \times \sum_j (\Delta C_{PM2.5,IG,j} \times t_j) + \beta_{PM2.5,AG,modified} \times \sum_j (\Delta C_{PM2.5,AG,j} \times t_j) \right) - 1 \right] Pop$$

## Key assumption—

We assume that PM<sub>2.5</sub> of both indoor and outdoor origin have similar toxicity (i.e., same  $\beta_{PM2.5,modified}$ )

**This is a key assumption, with some precedent, but the framework also can handle other assumptions if warranted**

There is limited evidence both for/against this assumption:

- Ambient origin PM may be more harmful than indoor-generated PM

Ebelt et al. 2005 *Epidemiology*  
Koeing et al. 2005 *Environ Health Perspect*

- Indoor-generated PM is at least as toxic as outdoor PM, if not more

Long et al. 2001 *Environ Health Perspect*  
Monn and Becker 1999 *Toxicol Appl Pharmacol*

# Selecting a C-R Effect Estimate for PM<sub>2.5</sub> Mortality

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$$\Delta y_{PM2.5} = y_0 \left[ \exp \left( \sum_z \left( \underbrace{\beta_{PM2.5,z,modified}}_1 \times \sum_j (\Delta C_{PM2.5,z,j} \times t_j) \right) \right) - 1 \right] Pop$$

**$\beta$ : C-R endpoint effect** estimates commonly range from 5.8% to 26% per 10  $\mu\text{g}/\text{m}^3$

Di et al. 2017, *NEJM*; Jerrett et al. 2005, *Epidemiology*; Pope et al. 2002, *JAMA*; Roman et al. 2008, *Environ Sci Technol*; and others

We assume an all-cause mortality relative risk (RR) for PM<sub>2.5</sub> of ambient origin from a **recent meta-analysis** of ambient PM<sub>2.5</sub> mortality effects:

7.3% per 10  $\mu\text{g}/\text{m}^3$  (95% CI: 3.7% to 11%)

Fann et al. 2016, *Risk Analysis*

$$\beta_{PM2.5} = \ln(\text{RR})/10$$

$\beta_{PM2.5, OutdoorOrigin}$  : **0.0070** (95% CI: 0.0036 to 0.0104) per 1  $\mu\text{g}/\text{m}^3$

# Modifying the C-R Effect Estimate to Account for Exposure

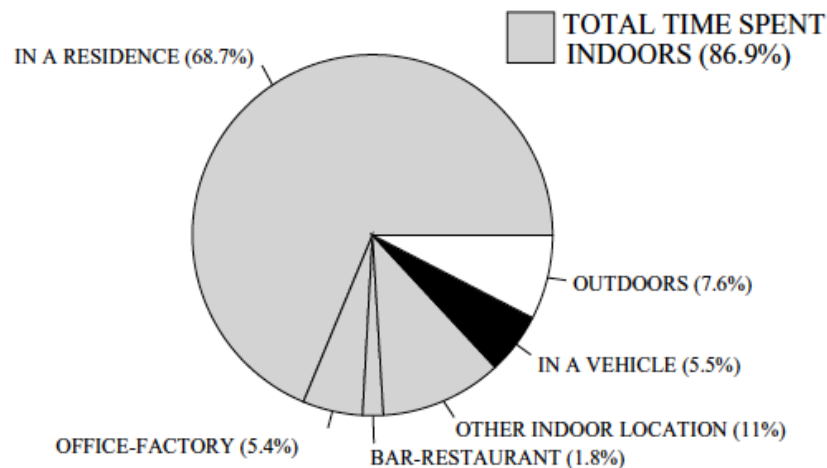
$$\beta_{PM2.5,modified} = \frac{\beta_{PM2.5}}{\Sigma F_j \times t_j}$$

$$\Sigma F_j \times t_j = (F \times t)_{outdoor} + (F \times t)_{residence} + (F \times t)_{vehicle} + (F \times t)_{other\ indoor}$$

- $F_j$  : Average  $PM_{2.5}$  infiltration in a particular microenvironment  $j$
- $t_j$  : Average fraction of time spent in a particular microenvironment  $j$

## NHAPS - Nation, Percentage Time Spent

Total n = 9,196



## Four main microenvironments—

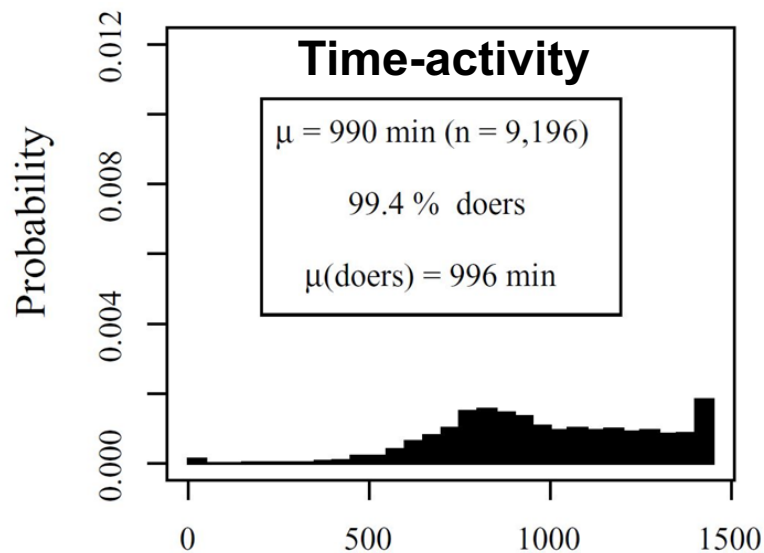
1. Inside residences
2. Inside other buildings
3. Inside vehicles
4. Outside

# Modifying the C-R Effect Estimate to Account for Exposure

People in the United States spend their time in a variety of microenvironments with different PM<sub>2.5</sub> infiltration factors ( $F_j$ ):

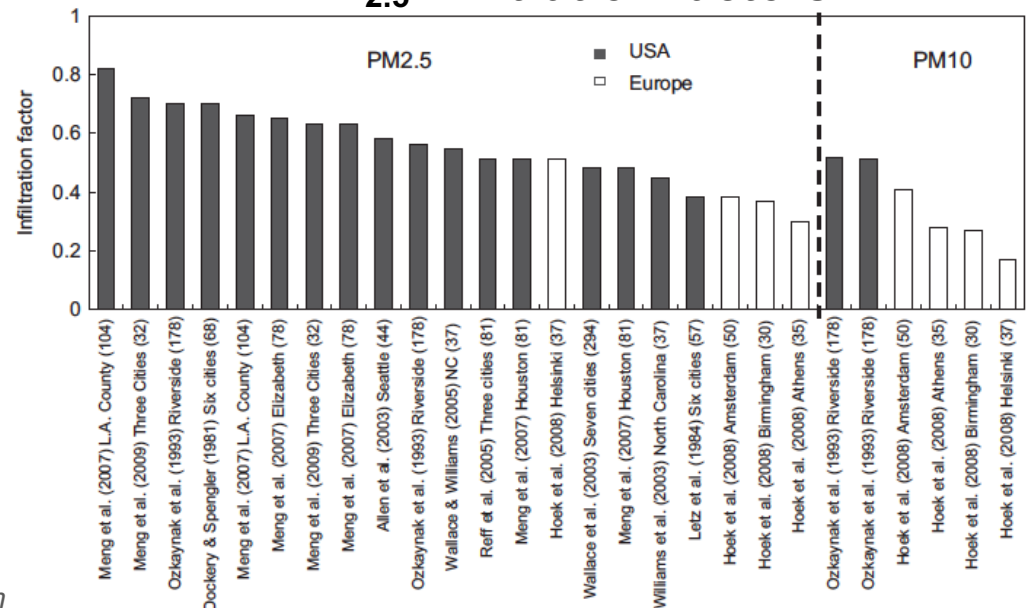
- Time spent,  $t_{\text{residence}} = 68.7\%$  in residences
- $F_{\text{residence}} = 0.59$

**Beta distributions** were used to fit to the ranges of **infiltration factors** for each microenvironment.



Klepeis et al. 2001, *J Exposure Analysis Environ Epidemiol*

## PM<sub>2.5</sub> infiltration factors

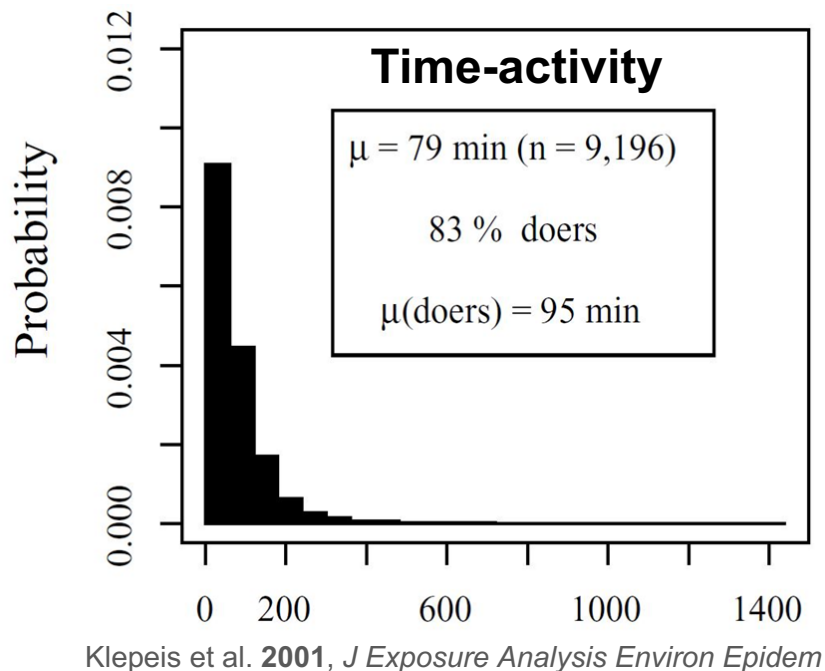


Chen and Zhao 2011, *Atmospheric Environment*

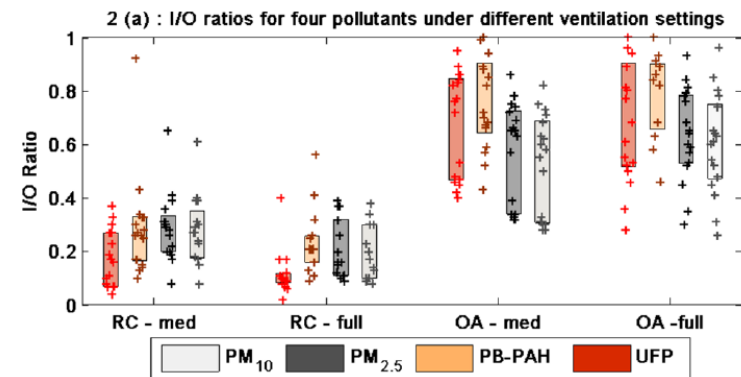
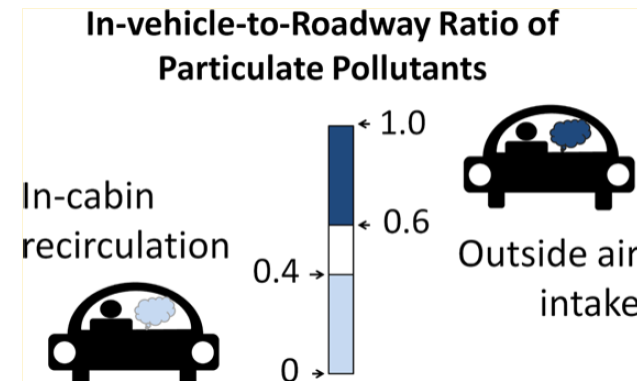
# Modifying the C-R Effect Estimate to Account for Exposure

- Time spent,  $t_{vehicle} = 5.5\%$  in vehicles
- $F_{vehicle} = 0.43$

(assuming 0.25 with recirculated air and 0.61 with outdoor air ventilation)



## PM<sub>2.5</sub> infiltration factors



Hudda and Fruin 2013, *Environ Sci Technol*

# Modifying the C-R Effect Estimate to Account for Exposure

- Time spent,  $t_{outdoor} = 7.6\%$  outdoors

- $F_{outdoor} = 1$

## Outdoors

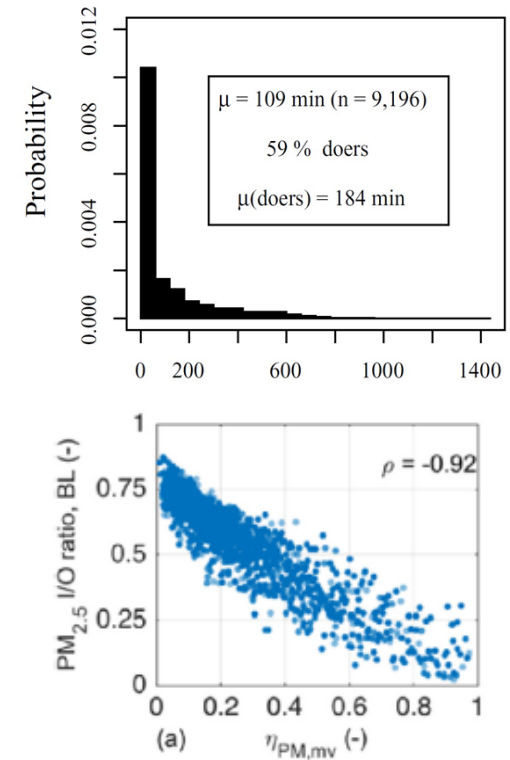
Klepeis et al. 2001, *J Exposure Analysis Environ Epidemiol*

- Time spent,  $t_{other indoor} = 18.2\%$  in indoor locations other than residences (e.g., offices, factories, bars, schools, and restaurants)

- $F_{other indoor} = 0.49$

## Inside other buildings

Ben-David et al. 2017, *Building and Environment*



$$\beta_{PM2.5,modified} = \frac{\beta_{PM2.5}}{\Sigma F_j \times t_j}$$

The mean value of  $\Sigma F_j \times t_j$  was estimated to be  $\sim 0.60$

$$\beta_{PM2.5,modified} = 0.16 \text{ per } 10 \mu\text{g}/\text{m}^3$$

# Modifying the Concentration-Response (C-R) Function

$$\Delta y_{PM_{2.5}} = y_0 \left[ \exp \left( \sum_z \left( \beta_{PM_{2.5},z,modified} \times \sum_j \underline{(\Delta C_{PM_{2.5},z,j} \times t_j)} \right) \right) - 1 \right] Pop$$

2

- Expanding to include indoor and outdoor PM<sub>2.5</sub> sources in the four main microenvironments:

IG = Indoor-generated  
AG = Ambient-generated

$$\sum_j (\Delta C_{PM_{2.5},IG,j} \times t_j) = (\Delta C_{PM_{2.5},IG,residences} \times t_{residences}) + (\Delta C_{PM_{2.5},IG,other\ indoor} \times t_{other\ indoor})$$

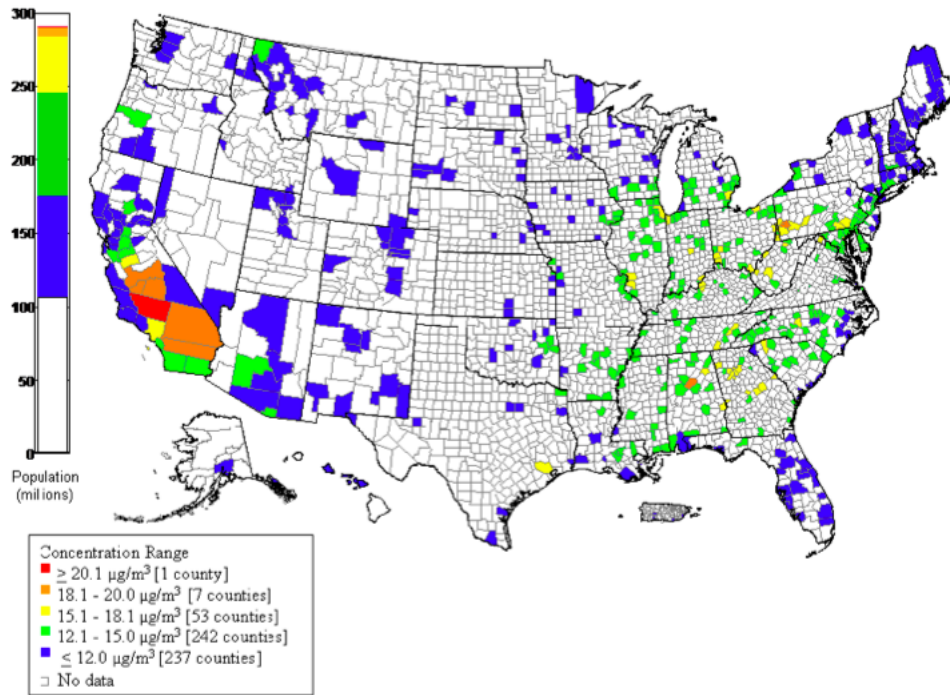
$$\begin{aligned} & \sum_j (\Delta C_{PM_{2.5},AG,j} \times t_j) \\ &= (\Delta C_{PM_{2.5},AG,residences} \times t_{residences}) + (\Delta C_{PM_{2.5},AG,other\ indoor} \times t_{other\ indoor}) \\ &+ (\Delta C_{PM_{2.5},AG,vehicles} \times t_{vehicles}) + (\Delta C_{PM_{2.5},outdoor} \times t_{outdoor}) \end{aligned}$$

- We use various assumptions to gather distributions of microenvironmental PM<sub>2.5</sub> concentrations of indoor and outdoor origin.



# Outdoor PM<sub>2.5</sub> Concentrations

National and regional annual average outdoor PM<sub>2.5</sub> concentrations with lognormal distributions were taken from the **EPA's nationwide monitoring network data** for the year **2012**

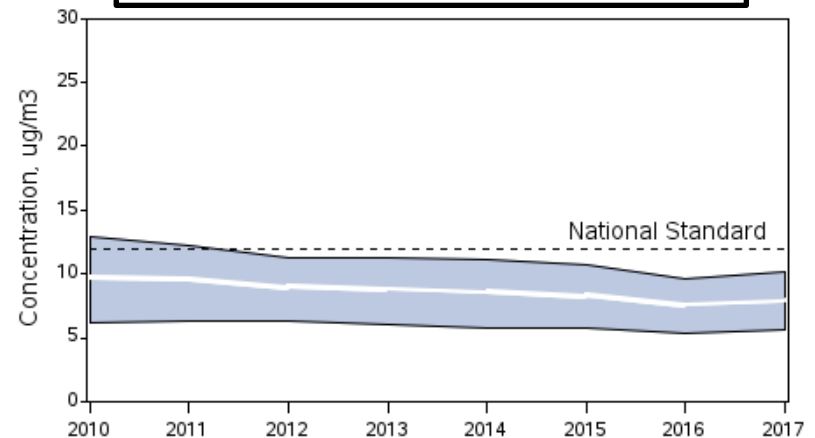


**For 2012:**

Average: 9.1 µg/m³

10<sup>th</sup> percentile: 6.6 µg/m³

90<sup>th</sup> percentile: 11.2 µg/m³



2010 to 2017 : 18% decrease in National Average

<https://www.epa.gov/air-trends/particulate-matter-pm25-trends>

# Estimating the Indoor PM<sub>2.5</sub> Concentration of Indoor Origin in Residences

## Scenario 1: Nationwide estimate based on prior field studies for residences

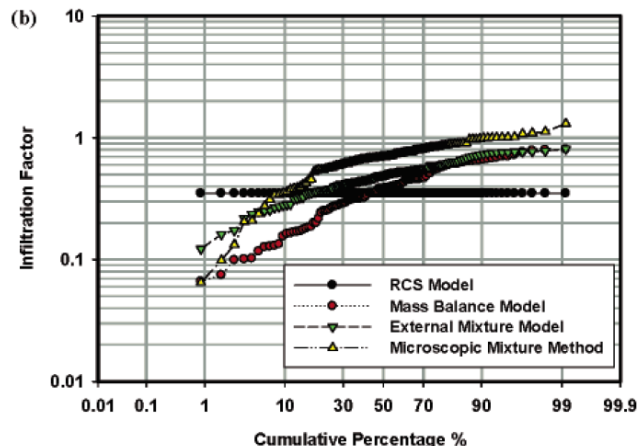
We considered two of the largest field studies of indoor and outdoor PM<sub>2.5</sub> sources:

- RIOPA (212 non-smoking residences in three U.S. cities)
- MESA Air (more than 200 homes in seven U.S. cities)

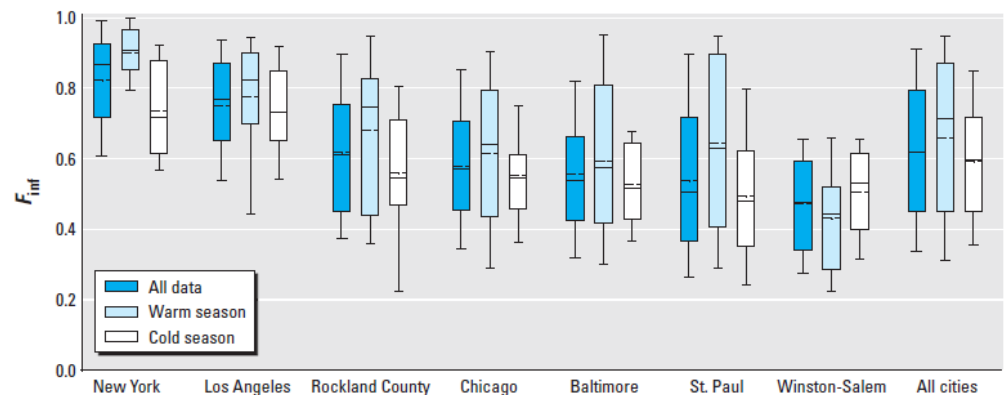
Three combinations were considered:

- RIOPA only (Mean indoor PM<sub>2.5</sub> of indoor origin –  $C_{in\_in}$ : 9.5  $\mu\text{g}/\text{m}^3$ )
- MESA Air only (Mean  $C_{in\_in}$ : 2.8  $\mu\text{g}/\text{m}^3$ )
- RIOPA-MESA 50-50% (Mean  $C_{in\_in}$ : 6.1  $\mu\text{g}/\text{m}^3$ ) ← **Our primary scenario**

**RIOPA (three U.S. cities)**



**MESA Air (seven U.S. cities)**

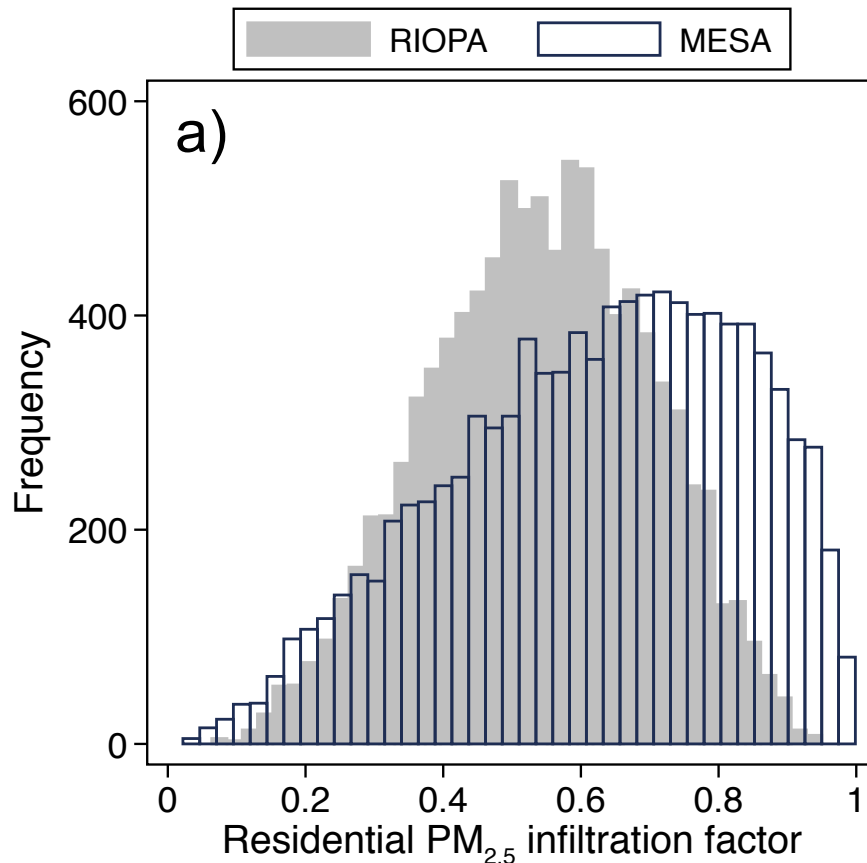


Meng et al. 2005, *Environmental Science and Technology*

Allen et al. 2012, *Environmental Health Perspectives*

# Estimating the Indoor PM<sub>2.5</sub> Concentration of Outdoor Origin in Residences

- Indoor PM<sub>2.5</sub> of ambient origin inside residences—



## **RIOPA**

Mean  $F_{residence, RIOPA} = 0.54$

Meng et al. **2005**, *Environmental Science and Technology*

## **MESA AIR**

Mean  $F_{residence, MESA} = 0.60$

Allen et al. **2012**, *Environmental Health Perspectives*

# Estimating the Indoor PM<sub>2.5</sub> Concentration of Both Indoor and Outdoor Origin in Residences

## Scenario 2: Nationwide estimate based on regional model outputs

We used a **nationally representative set** of combined residential energy and indoor air quality (**REIAQ**) models for nonsmoking U.S. residences

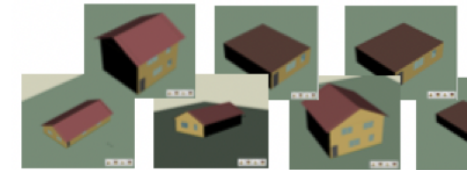
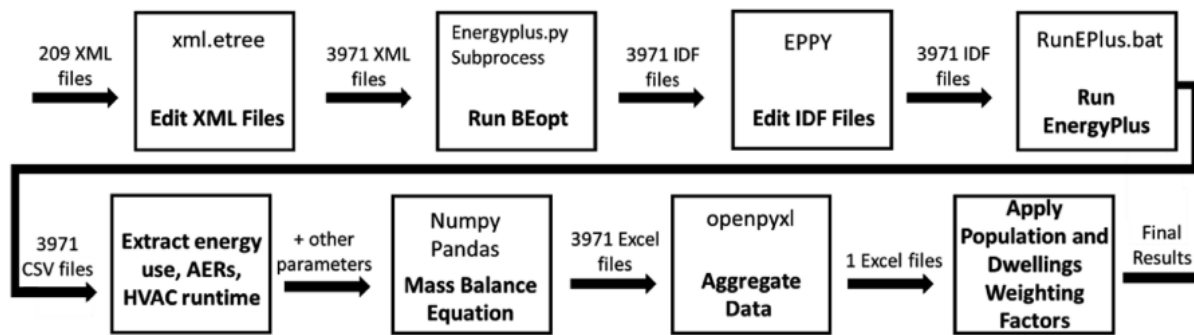
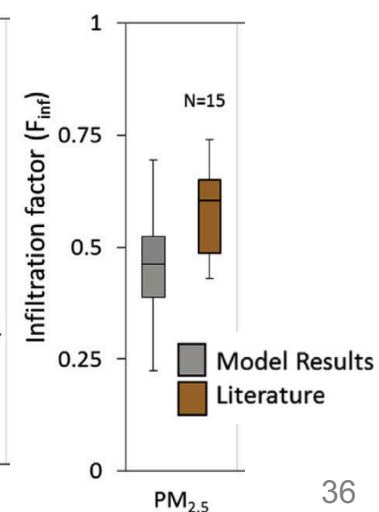
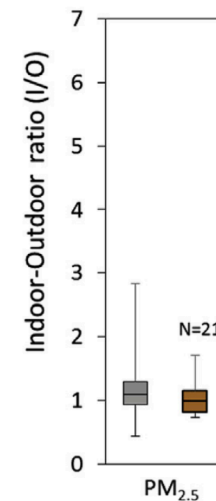
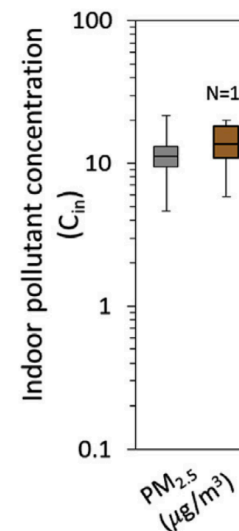


Fig. 2. Model workflow in Python.

REIAQ modeled the hourly concentrations of PM<sub>2.5</sub> in 2012:

- A total of **3971** individual home models in **19 U.S. cities**
- Representative of **~80%** of the U.S. housing stock
- Population weighted average indoor PM<sub>2.5</sub> of indoor origin: **5.9 µg/m<sup>3</sup>**

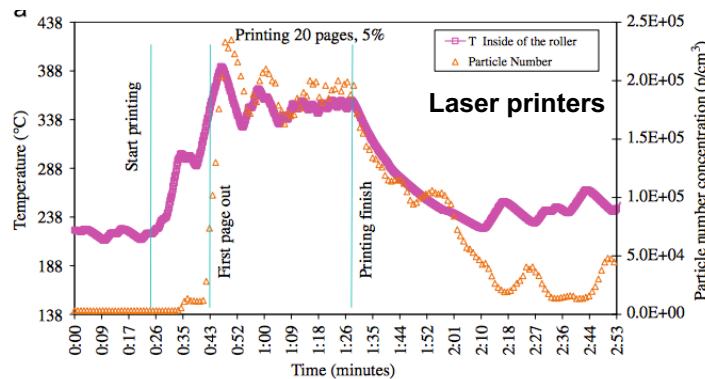


# Estimating the Indoor PM<sub>2.5</sub> Concentration of Indoor Origin in Other Microenvironments

For nonresidential buildings in both scenarios:

We used a **lognormal distribution** for indoor PM<sub>2.5</sub> of indoor origin with a mean  $\pm$  SD of  $4.18 \pm 4.98 \mu\text{g}/\text{m}^3$  based on a study in office buildings in Finland.

Hänninen et al. 2005, *Indoor Air*



He et al. 2010 *J Aerosol Sci*



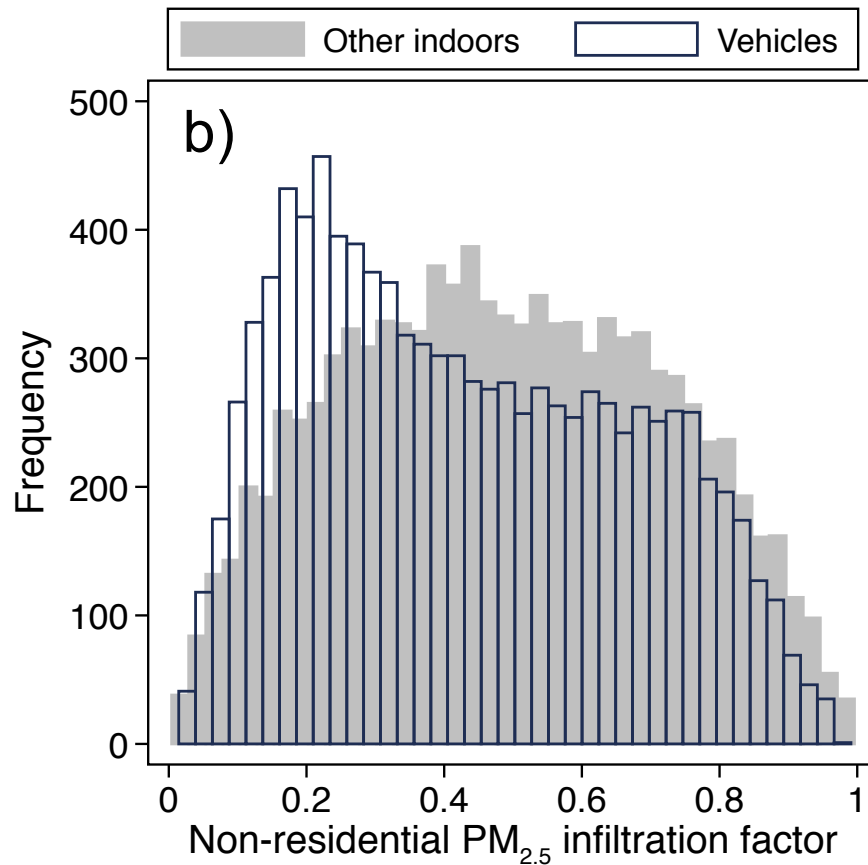
<https://www.sfgate.com/health/article/Big-health-risk-seen-in-some-laser-printers-2526921.php>

For vehicles in both scenarios:

We assumed that there are **no sources** of PM<sub>2.5</sub> inside vehicles (nonsmoking).

# Estimating the Indoor PM<sub>2.5</sub> Concentration of Outdoor Origin in Other Microenvironments

- PM<sub>2.5</sub> of ambient origin inside other microenvironments:



## Other indoors

Mean  $F_{other\ indoor} = 0.49$

Ben-David et al. 2017, *Building and Environment*

## Vehicles

Mean  $F_{vehicle} = 0.43$

Hudda and Fruin 2013, *Environ Sci Technol*

# Threshold Microenvironmental PM<sub>2.5</sub> Concentrations

We assumed a **threshold** PM<sub>2.5</sub> concentration of **0 µg/m<sup>3</sup>** in each microenvironment.

Roman et al. **2008**, *Environmental Science and Technology*; Crouse et al. **2012**, *Environmental Health Perspectives*; Pinault et al **2016**, *Environmental Health*

Reference	PM <sub>2.5</sub> threshold	U.S. Mortality Burden
Fann et al. <b>2012</b> <i>Risk Analysis</i>	~1 µg/m <sup>3</sup> (natural BG)	130k (51k–200k) in 2005 320k (180k–440k) in 2005
Fann et al. <b>2017</b> <i>Env Health Persp</i>	0 µg/m <sup>3</sup>	120k (83k–160k) in 2010 200k (43k–1.1M) in 2010
Cohen et al. <b>2017</b> <i>Lancet</i>	2.4-5.9 µg/m <sup>3</sup>	88k (67k–115k) in 2015
Burnett et al. <b>2018</b> <i>PNAS</i>	2.4 µg/m <sup>3</sup>	121k–213k in 2015 (United States+Canada)
Tessum et al. <b>2019</b> <i>PNAS</i>	5 or 8 µg/m <sup>3</sup>	131k (no CI) in 2015



# Applying Model Parameters to the Modified C-R Function

$$\Delta y_{PM2.5} = y_0 \left[ \exp \left( \sum_z \left( \beta_{PM2.5,z,modified} \times \sum_j (\Delta C_{PM2.5,z,j} \times t_j) \right) \right) - 1 \right] Pop$$

4
3

$y_0$ : Annual baseline mortality rate (per person per year)

$Pop$ : Population over 35 years old in 2012 (persons)

Census Division	Residential $C_{in,in}$ Mean (SD)	Residential $F_{inf}$ Mean (SD)	$C_{out}$ in 2012 (10 <sup>th</sup> – 90 <sup>th</sup> )	$y_0$ in 2012 (per 100,000)	Over-35 Pop in 2012
New England	5.78 (2.14)	0.50 (0.08)	9.22 (7.25–11.2)	1429.5	8,209,960
Middle Atlantic	5.84 (2.01)	0.50 (0.08)	9.22 (7.25–11.2)	1475.6	22,655,120
East North Central	5.66 (1.91)	0.46 (0.09)	9.98 (8.74–11.43)	1576.8	25,115,038
West North Central	5.69 (1.86)	0.45 (0.09)	9.40 (7.74–11.16)	1566.0	10,965,126
South Atlantic	6.47 (2.07)	0.40 (0.08)	8.86 (6.90–10.66)	1481.7	33,363,675
East South Central	6.81 (1.94)	0.40 (0.08)	9.82 (8.34–11.37)	1759.6	9,999,343
West South Central	4.80 (1.54)	0.46 (0.09)	9.61 (8.01–11.14)	1449.3	18,513,908
Mountain	5.38 (1.82)	0.49 (0.09)	7.95 (6.03–10.25)	1332.1	11,481,569
Pacific	6.30 (2.03)	0.46 (0.08)	9.06 (6.01–12.88)	1241.2	26,212,977
Nationwide	6.19 (10.06)	0.58 (0.19)	9.1 (6.6–11.2)	1463.1	166,516,716

# Scenario 1: Estimates of Total PM<sub>2.5</sub> Mortality Burden

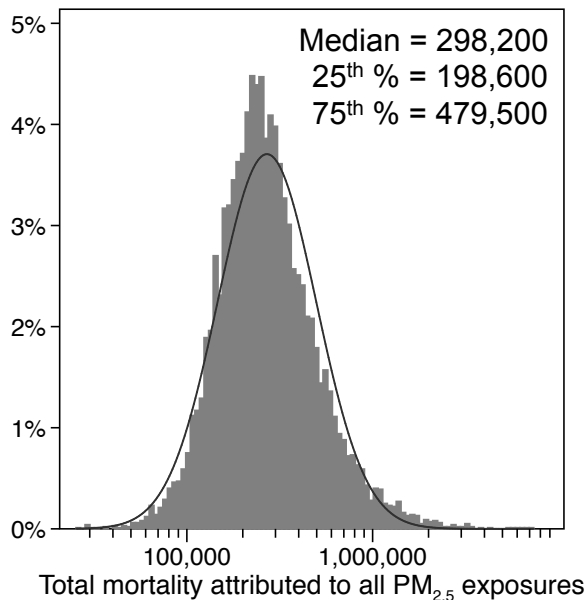
We used **Monte Carlo** simulations with **10,000** iterations to sample from distributions of each model input parameter.

**Each iteration** is representative of one estimate of **total PM<sub>2.5</sub> mortality burden** associated with particles of **both indoor and outdoor origin** in all microenvironments.

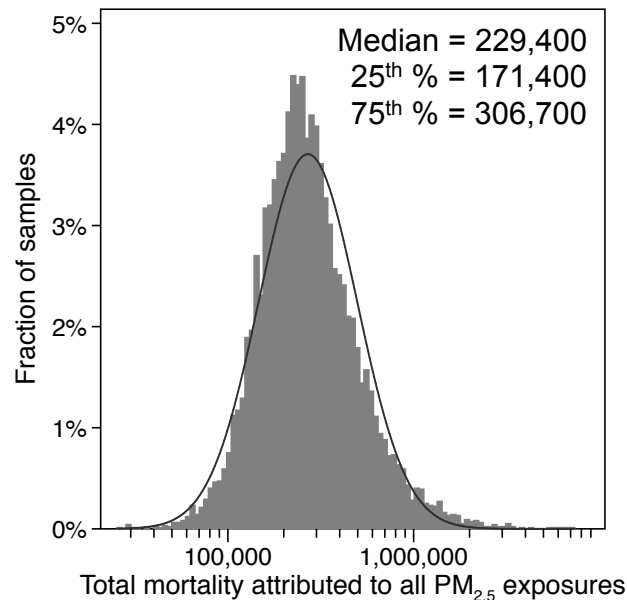
The curve fits are approximately **lognormal**.

## Scenario 1: Total PM<sub>2.5</sub> mortality (indoor + outdoor sources)

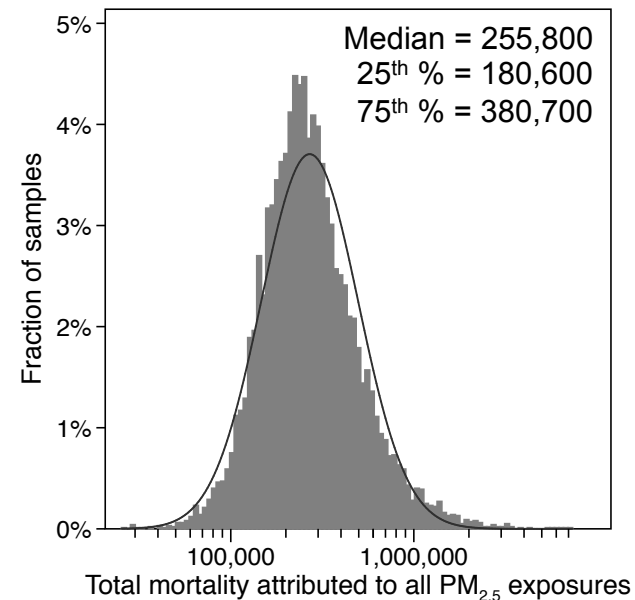
a) RIOPA



b) MESA



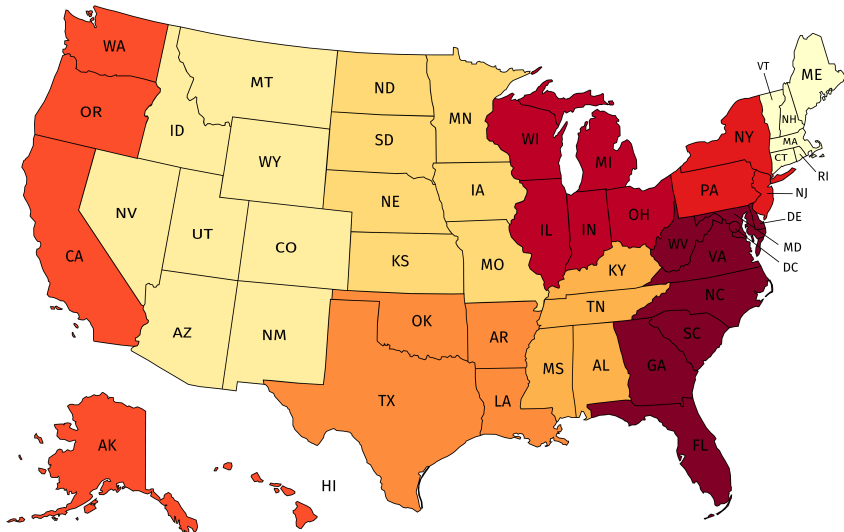
c) RIOPA + MESA



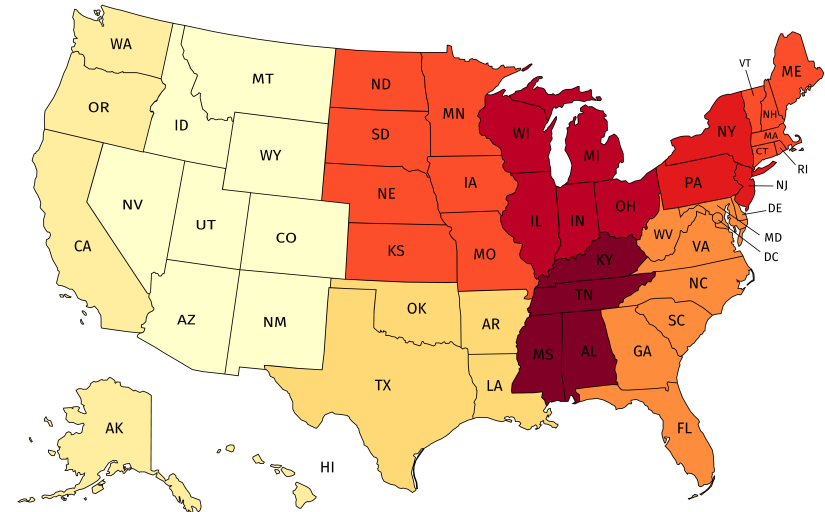
# Scenario 2: Regional Mortality

**Without** taking into account the differential time activity patterns or potentially differential toxicity—

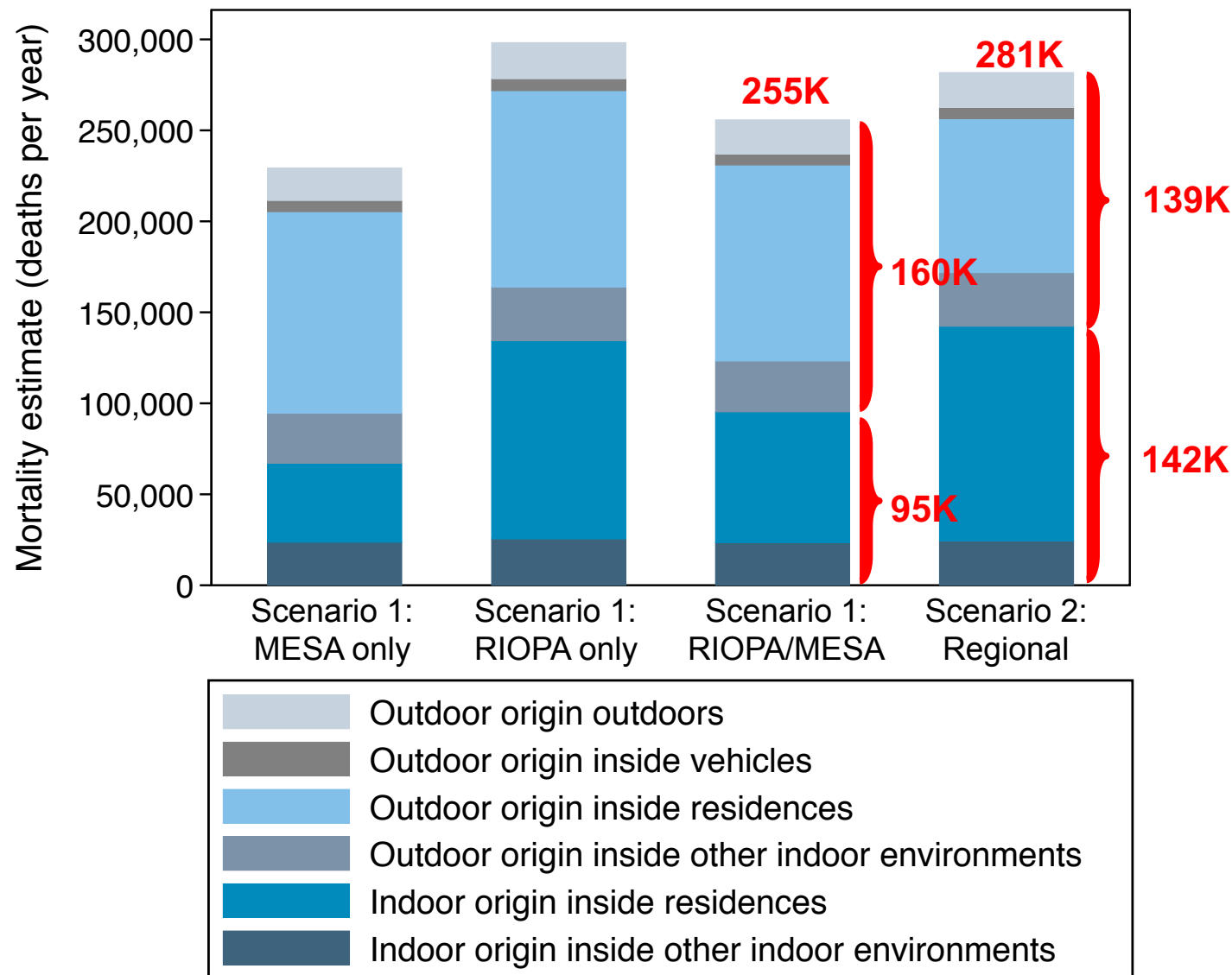
Total mortality rate in U.S. census divisions



Mortality rate per 100,000 population in U.S. census divisions

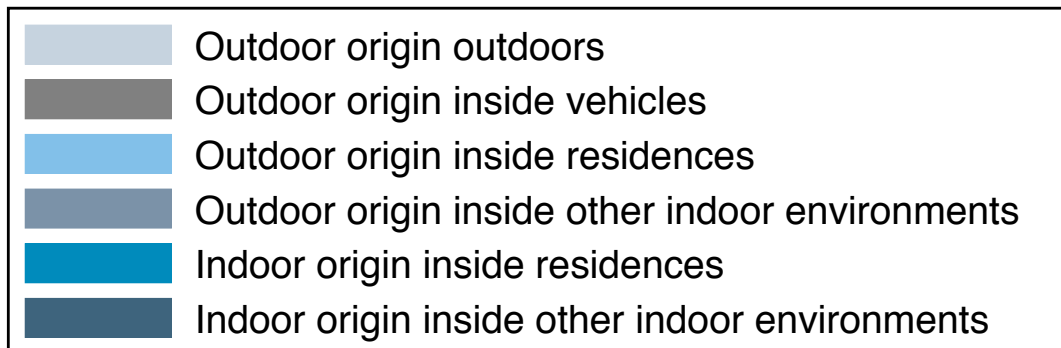
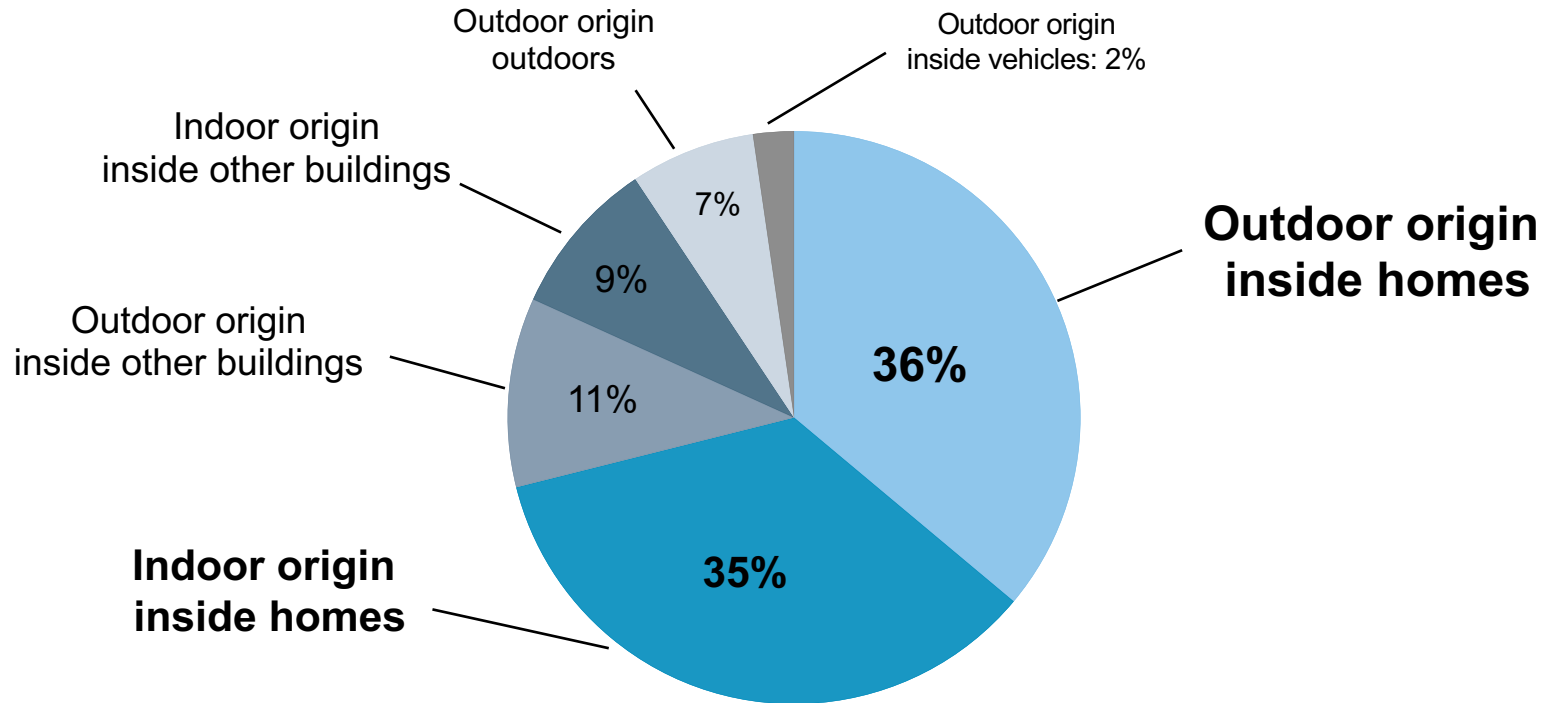


# Best Estimates of the Annual Number of Deaths in the United States in Scenarios 1 and 2



# Average Microenvironmental PM<sub>2.5</sub> Exposure Attribution

## Average across all scenarios



# Getting the Ambient Attribution Right...

Our best estimates of the mortality burden attributable to outdoor PM<sub>2.5</sub> sources ranged: **139k–160k**

Comparisons to other recent literature:

Reference	Function	U.S. Mortality Burden
Fann et al. <b>2012</b> <i>Risk Analysis</i>	Log-linear $\Delta y = y_o(e^{\beta \Delta x} - 1)Pop.$	<b>130k</b> (51k–200k) in 2005 <b>320k</b> (180k–440k) in 2005
Fann et al. <b>2017</b> <i>Env Health Persp</i>	Log-linear $y_{ija} = m_{0ija} \times (e^{\beta_{ij} \cdot C} - 1) \times P_{ija}$	<b>120k</b> (83k–160k) in 2010 <b>200k</b> (43k–1.1M) in 2010
Cohen et al. <b>2017</b> <i>Lancet</i>	GBD IER $RR_{IER}(z) = 1 + \alpha \{1 - \exp[-\gamma (z - z_{cf})^\delta]\}$	<b>88k</b> (67k–115k) in 2015
Burnett et al. <b>2018</b> <i>PNAS</i>	GEMM $R(z) = \exp\{\theta \log(1 + z/\alpha) \omega(z)\}$	<b>121k-213k</b> in 2015 (United States+Canada)
Tessum et al. <b>2019</b> <i>PNAS</i>	Modified GBD $HR(C) = \exp\left(\frac{\gamma * \ln(C + 1)}{1 + \exp[-(C - \delta)/\lambda]}\right)$	<b>131k</b> (no CI) in 2015

# Limitations

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- Assumes causality and quantifiable relationship between PM<sub>2.5</sub> and mortality
- Assumes no threshold concentration
- Did not consider other forms of exposure-response functions
- Did not consider double-counting of the health effects of indoor PM<sub>2.5</sub> sources in prior epidemiology studies
- Did not consider variability in PM<sub>2.5</sub> toxicity based on chemical constituents of indoor or outdoor sources
- Did not consider any changes in toxicity that may occur due to size-resolved particle dynamics upon ambient transport indoors
- Assumed equal toxicity for indoor and outdoor PM<sub>2.5</sub> sources:

$$\beta_{PM2.5,in} = \beta_{PM2.5,out} = \beta_{PM2.5,modified}$$



# Ongoing Research Needs

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- Nationally representative studies of indoor and ambient PM<sub>2.5</sub> sources in various microenvironments
- Differential toxicity studies
  - Does ambient PM toxicity change as it infiltrates indoors?
  - Are indoor PM sources equally toxic? Less so? More so? It depends?
- Incorporation of different exposure-response model forms and model parameters
- Translation to other PM metrics (e.g., PM<sub>1</sub> or UFPs) and/or other health end points (e.g., short-term effects)

# Estimating the Mortality Burden of Fine Particulate Matter Exposure Attributable to Indoor and Outdoor Microenvironments

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**Brent Stephens, Ph.D.**

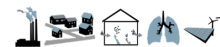
Associate Professor and Department Chair

Department of Civil, Architectural, and Environmental Engineering

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## **Question and Answers**

Please use the “Chat” feature on the side of your screen to submit questions to our speakers.

**Thank you for participating in today's webinar, which is  
part of the EPA Indoor Environments Division's  
IAQ Science Webinar Series.**

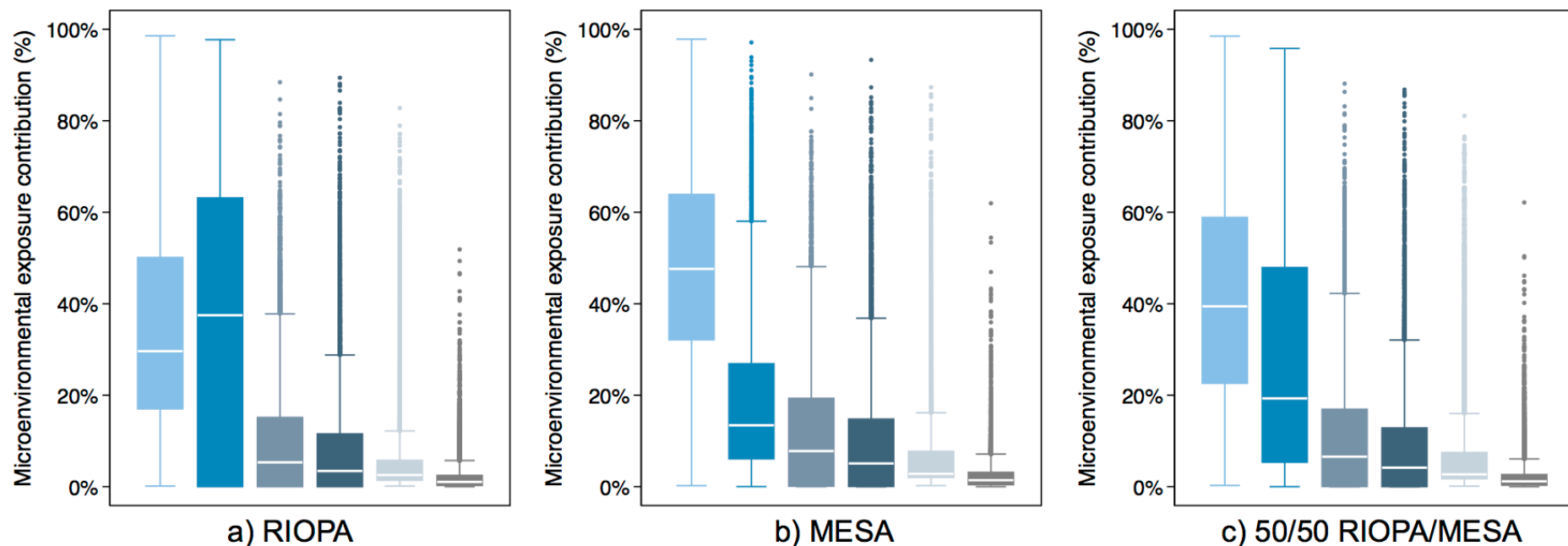
Today's presentation will be available online at  
**[www.epa.gov/iaq](http://www.epa.gov/iaq)**

Please monitor your inbox for announcements of future  
IAQ Science Webinar Series presentations throughout the year.

# Bonus slides

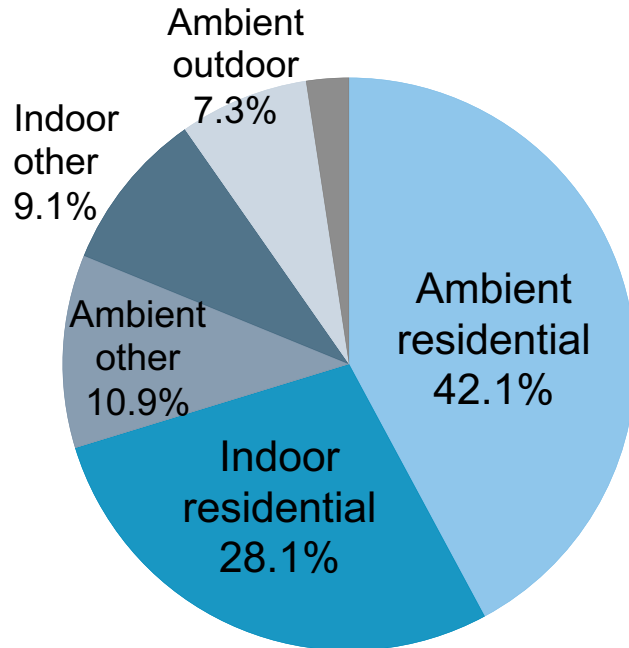
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# Scenario 1: Microenvironmental PM<sub>2.5</sub> Exposure Attribution

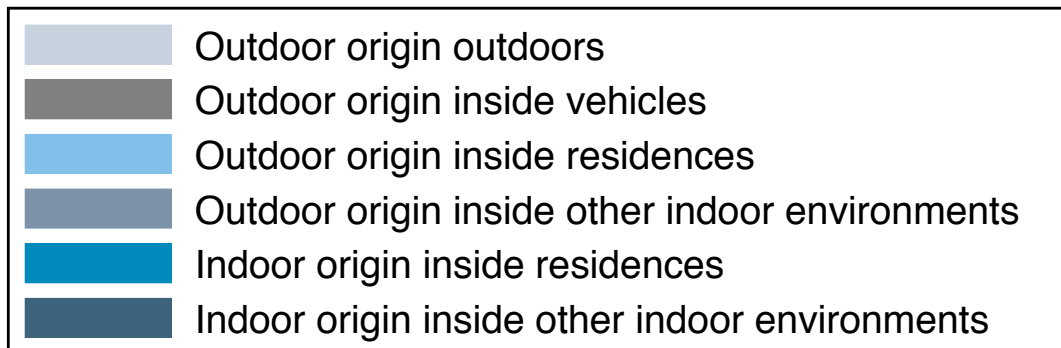
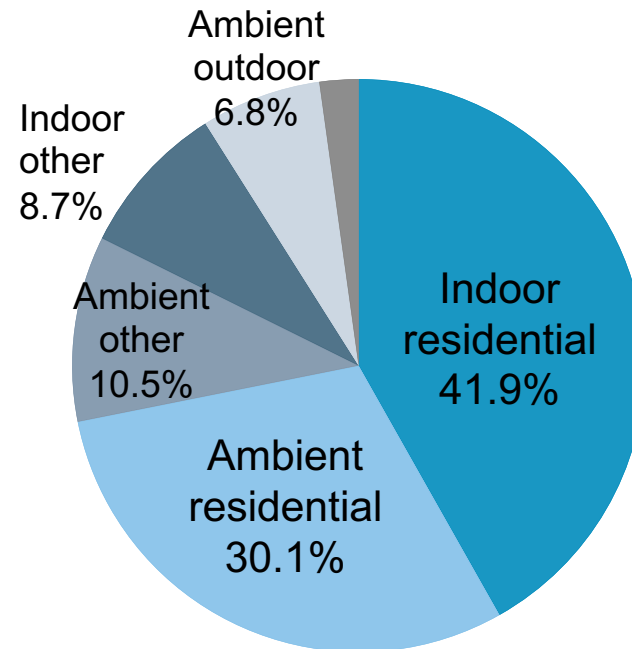


# Average Microenvironmental PM<sub>2.5</sub> Exposure Attribution

**Scenario 1:  
50/50 RIOPA+MESA**



**Scenario 2:  
Regional model**





# Indoor PM and Health (Epidemiology)

## Health benefits of particle filtration

Fisk 2013 *Indoor Air*



Photo from M.S. Waring and J.A. Siegel

## New EPA Guidance on air cleaners in the home:

<https://www.epa.gov/indoor-air-quality-iaq/air-cleaners-and-air-filters-home>

## PM in indoor air

**Air cleaners typically reduce indoor PM concentrations by ~50%**

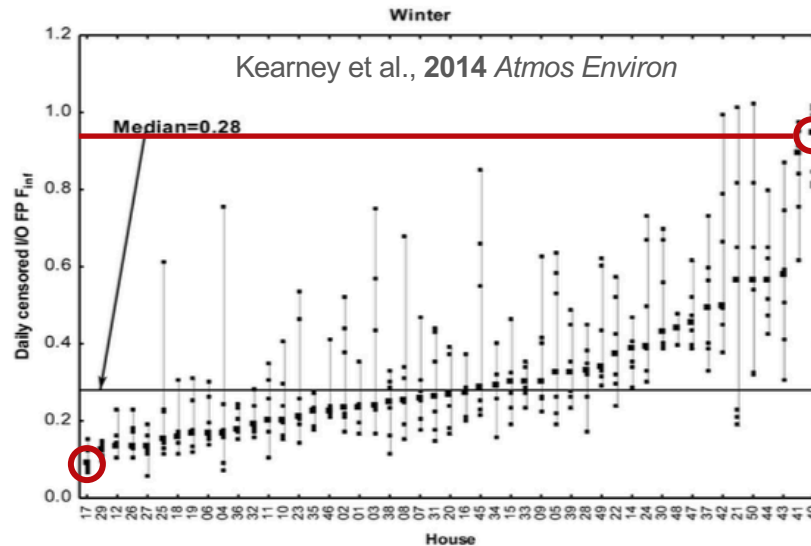
- Usually  $PM_{2.5}$
- Sometimes  $PM_{10}$  or total number counts (TNC) (e.g.  $<1 \mu m$ )

**Documented health improvements with (mostly portable) air cleaners include:**

- Modest improvements in lung function in asthmatics
- Fewer asthma-related doctor visits
- Modest improvements in markers of cardiovascular/pulmonary function
- *Very few studies on central filtration*

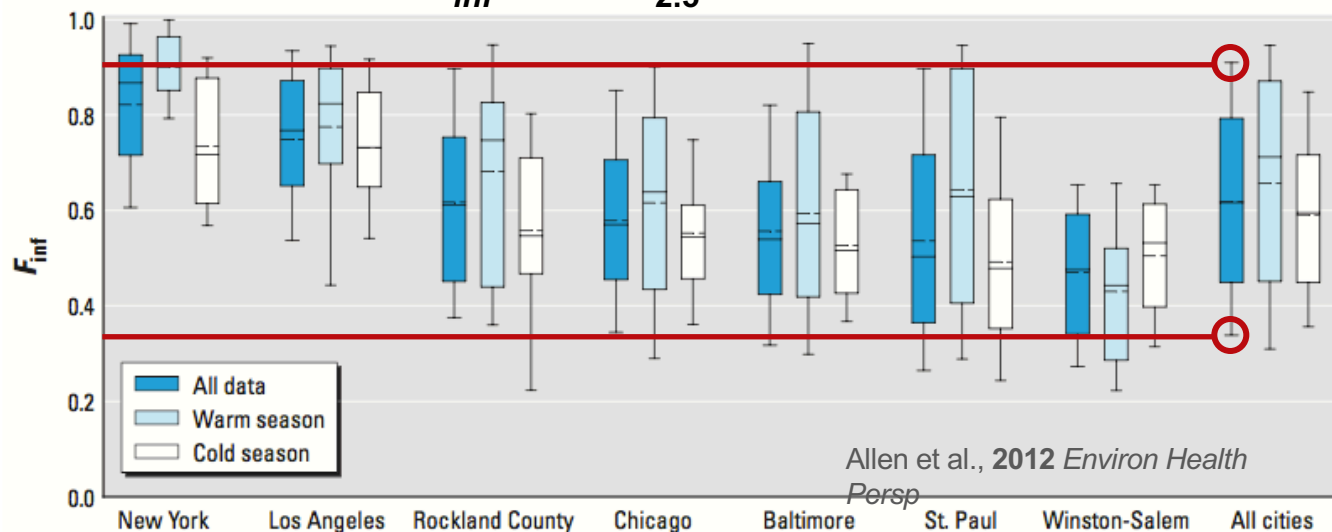
# Variability in Residential PM<sub>2.5</sub> and UFP Infiltration Factors

## $F_{inf}$ for PM<sub>2.5</sub> in Edmonton, Alberta, Canada



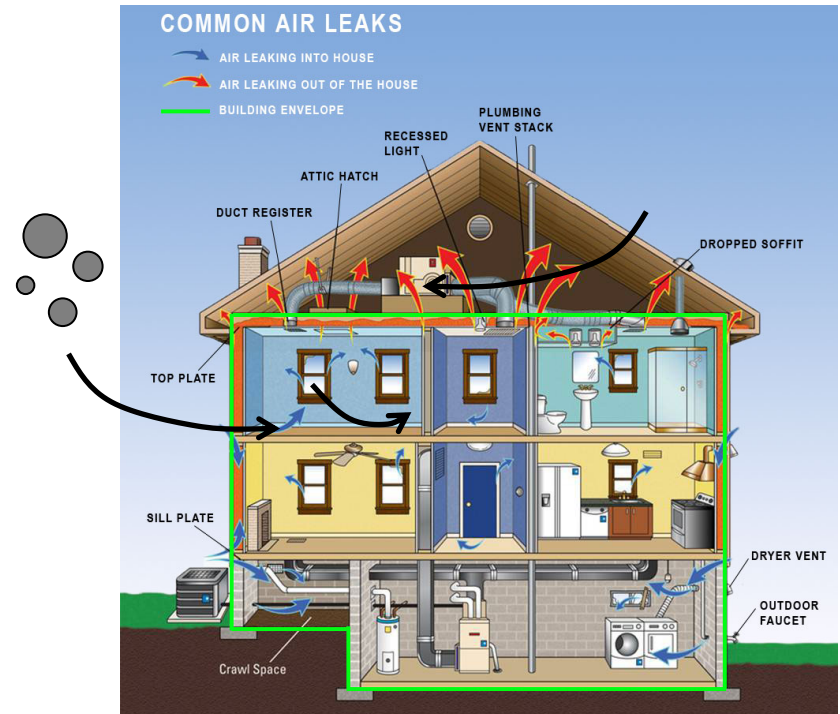
Between-home variations for PM<sub>2.5</sub>:  
 $0.1 < F_{inf} < 1$

## $F_{inf}$ for PM<sub>2.5</sub> in 7 U.S. cities

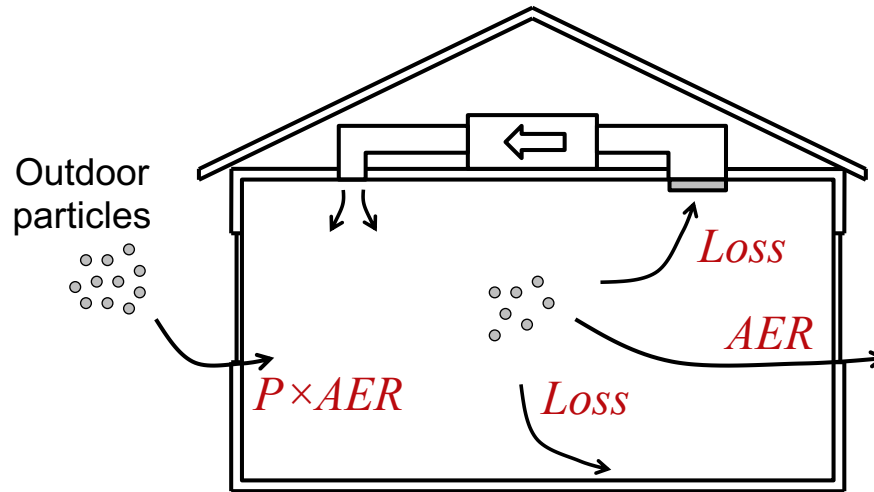


# Key Drivers of Variability in Infiltration Factors

- Pollutant characteristics
  - Sizes/classes/components of PM
- Source of ventilation air
  - Infiltration (envelope leaks)
  - Mechanical ventilation
  - Natural ventilation (open windows)
- Human behaviors
  - Window opening frequencies
  - Portable air cleaners
- Magnitude of the air exchange rate (AER)
  - Meteorological driving forces (e.g., I/O temperatures, wind speed/direction)
  - Building envelope characteristics (e.g., airtightness and possibly material)
- HVAC system design and operation
  - HVAC filtration and system runtime



# Underlying Mechanisms That Govern $F_{inf}$



Penetration from outdoors

$$F_{inf} = \frac{P \times AER}{AER + Loss}$$

Removal by air exchange

Removal by deposition to surfaces, phase changes, or control by filters or air cleaners

## “Penetration Factor”

**If  $P = 1$ :**

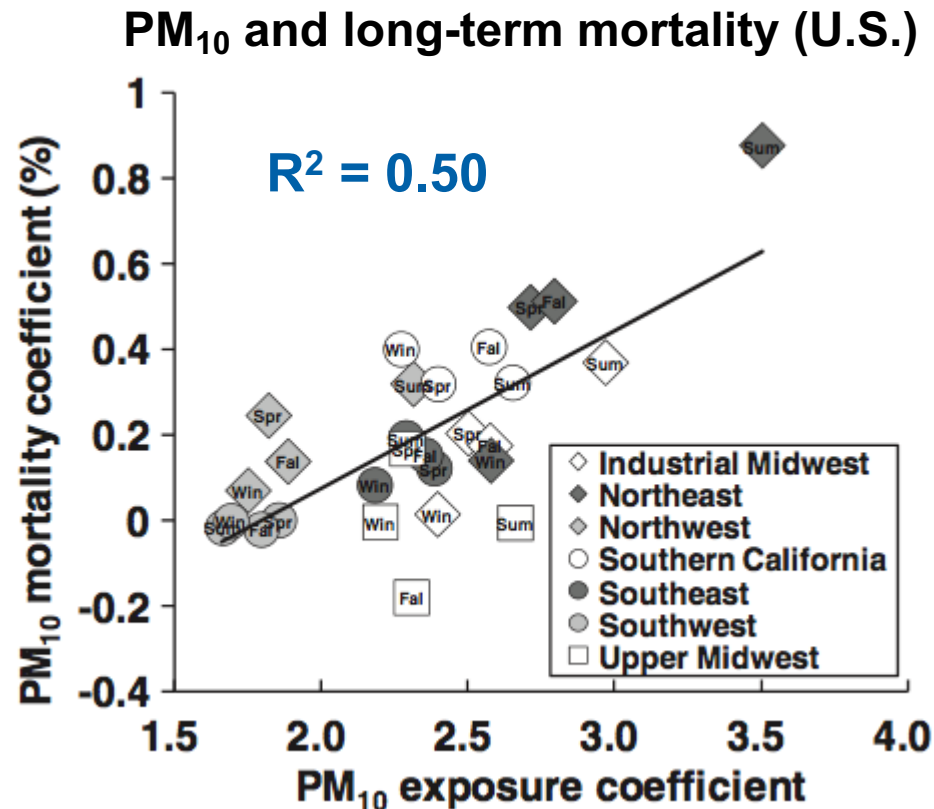
The envelope offers no protection.

**If  $P = 0$ :**

The envelope offers complete protection.

# How Does Variability in $F_{inf}$ Contribute to Effect Estimates?

Accounting for variations in AERs and window opening:



## Key point:

If you can account for the **underlying differences in indoor exposures to outdoor pollutants** in epidemiology studies, you can explain a lot of the variability in their results.

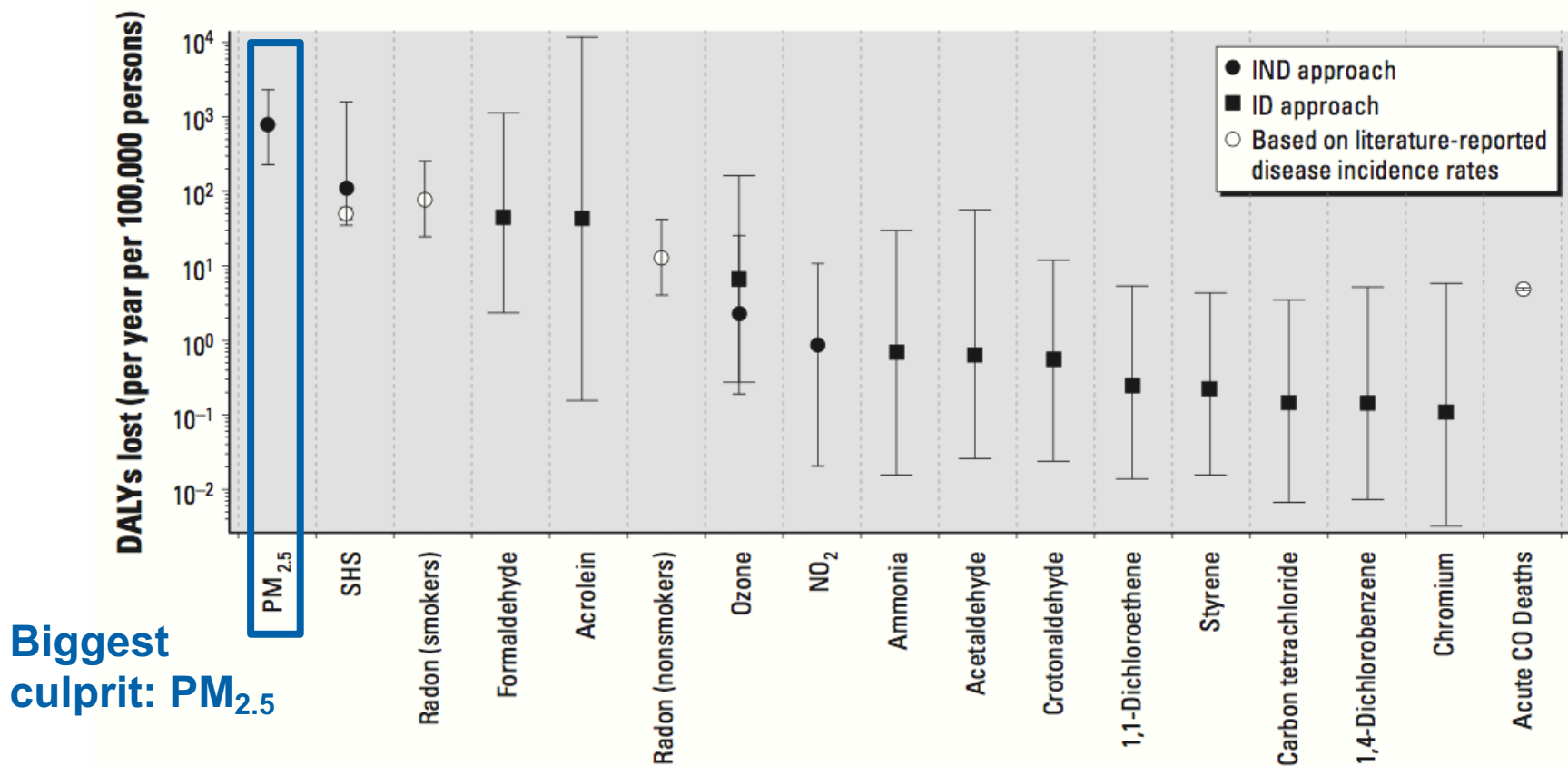
Chen et al., 2012 *Epidemiology*

$$\beta_{\text{exp}} = \left\{ \frac{\Delta C_{\text{in}}}{\Delta C_{\text{out}}} \right\}_{\text{total}} = f_{\text{windows\_closed}} \left\{ \frac{\Delta C_{\text{in}}}{\Delta C_{\text{out}}} \right\}_{\text{windows\_closed}} + f_{\text{windows\_open}} \left\{ \frac{\Delta C_{\text{in}}}{\Delta C_{\text{out}}} \right\}_{\text{windows\_open}} + f_{\text{AC\_on}} \left\{ \frac{\Delta C_{\text{in}}}{\Delta C_{\text{out}}} \right\}_{\text{AC\_on}}$$

# Indoor PM and Health (Models)

Residential indoor air exposures account for ~5–14% of the non-communicable/nonpsychiatric **U.S. disease burden**.

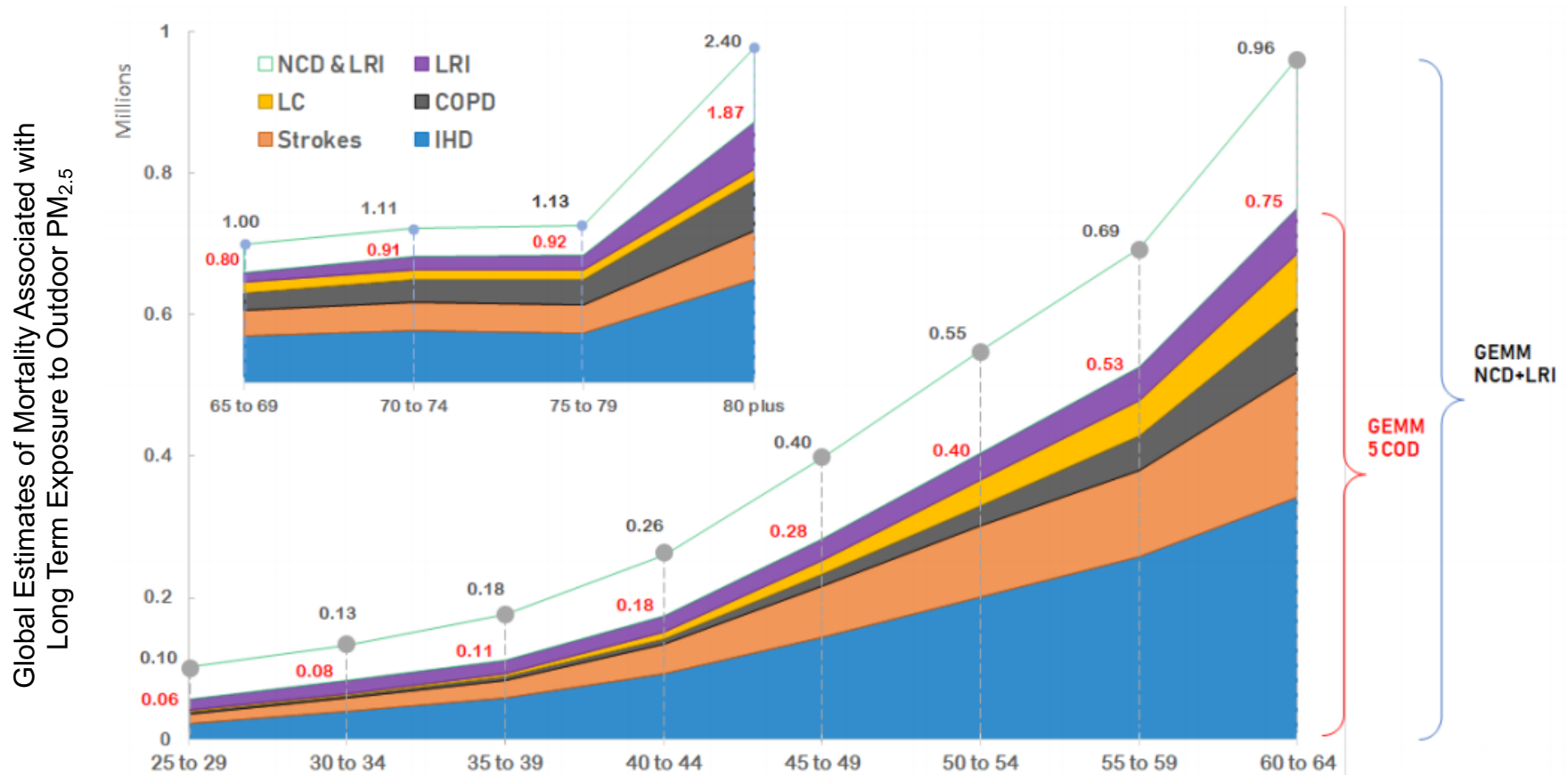
- Likely the **most harmful pollutants** inside residences:



# Integrated Exposure-Response (IER) Model

**Global Burden of Disease** (GBD) study's integrated exposure-response (IER) methodology estimates the mortalities associated with PM<sub>2.5</sub> exposures for multiple causes of death in various age groups.

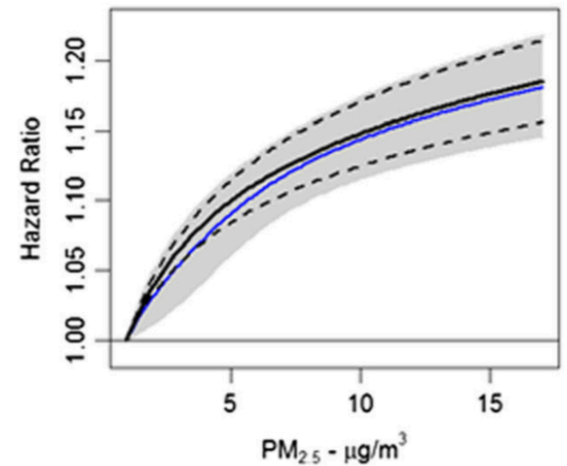
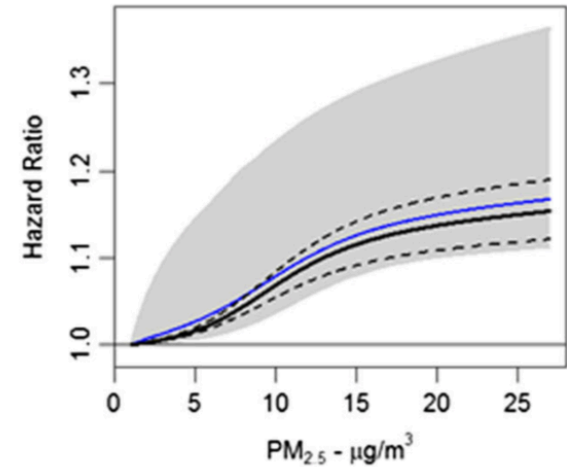
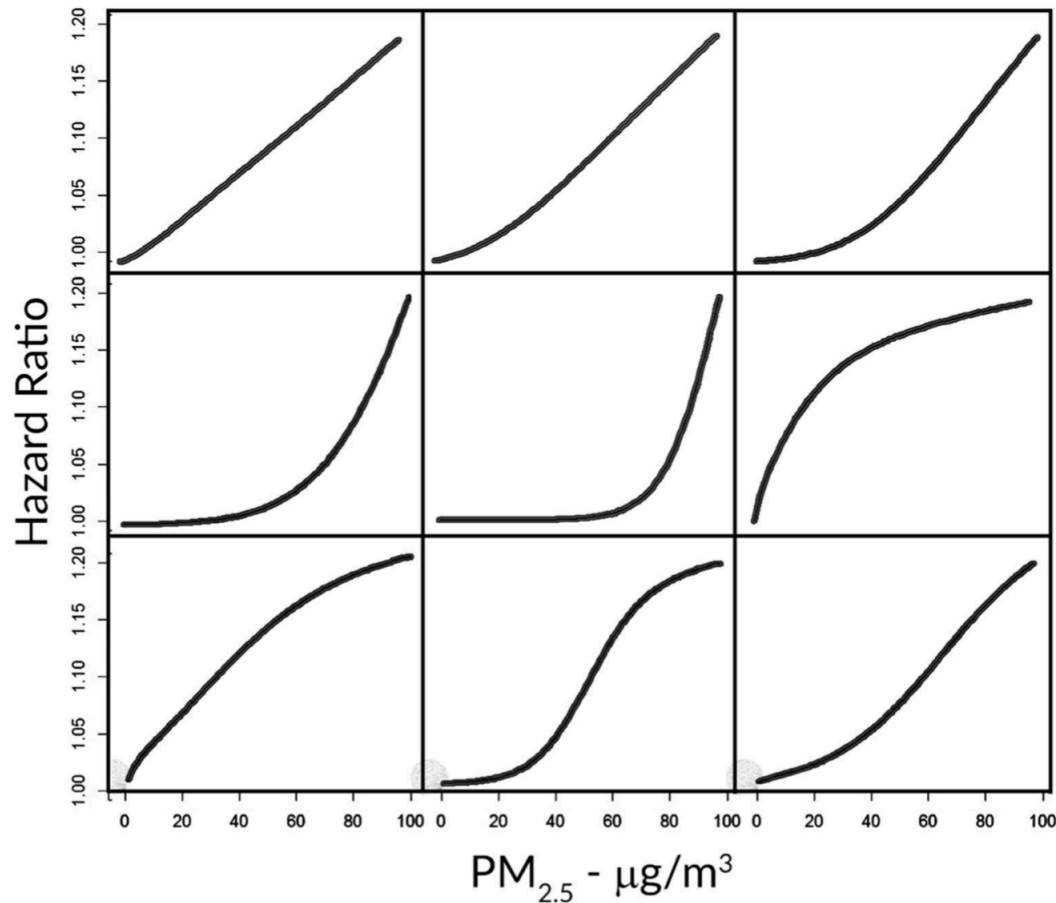
Apte et al. **2015**, *Environmental Science and Technology*; Cohen et al. **2017**, *The Lancet*; Fann et al. **2016**, *Risk Analysis*; Burnett et al. **2018**, *National Acad Sciences*



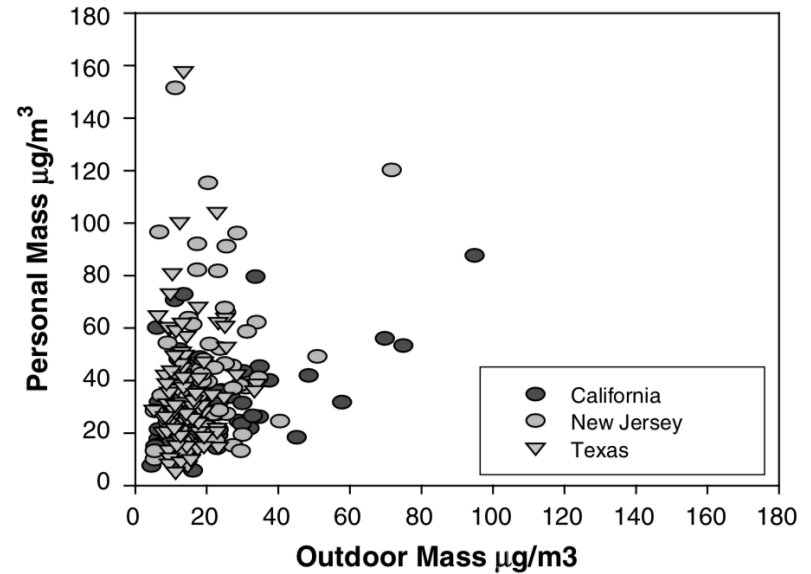
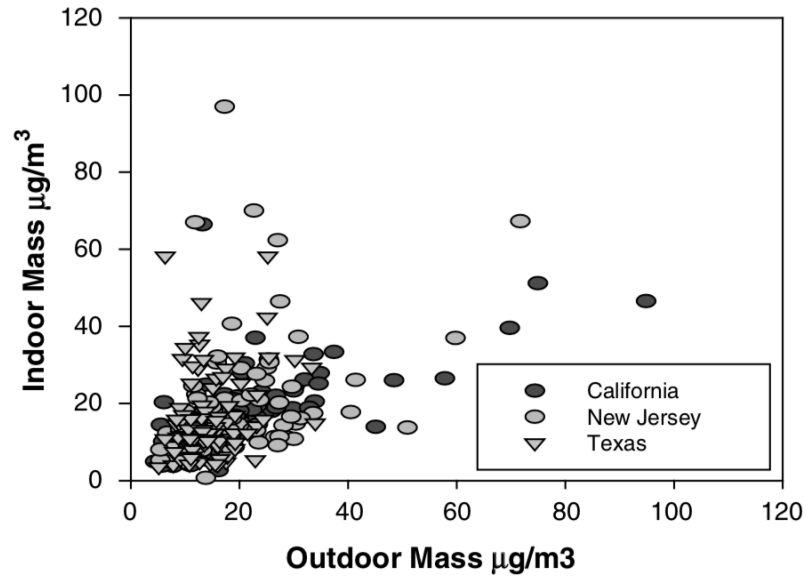


# Shape of the C-R Curve

$$h(t|x, z) = h_o(t) \exp \left\{ \gamma' x + \beta * \omega(z|\mu, \tau) * f(z) \right\}$$



# Potential for Double-Counting



**Table 2.** Coefficients of determination ( $R^2$ ) for  $\text{PM}_{2.5}$  concentrations.

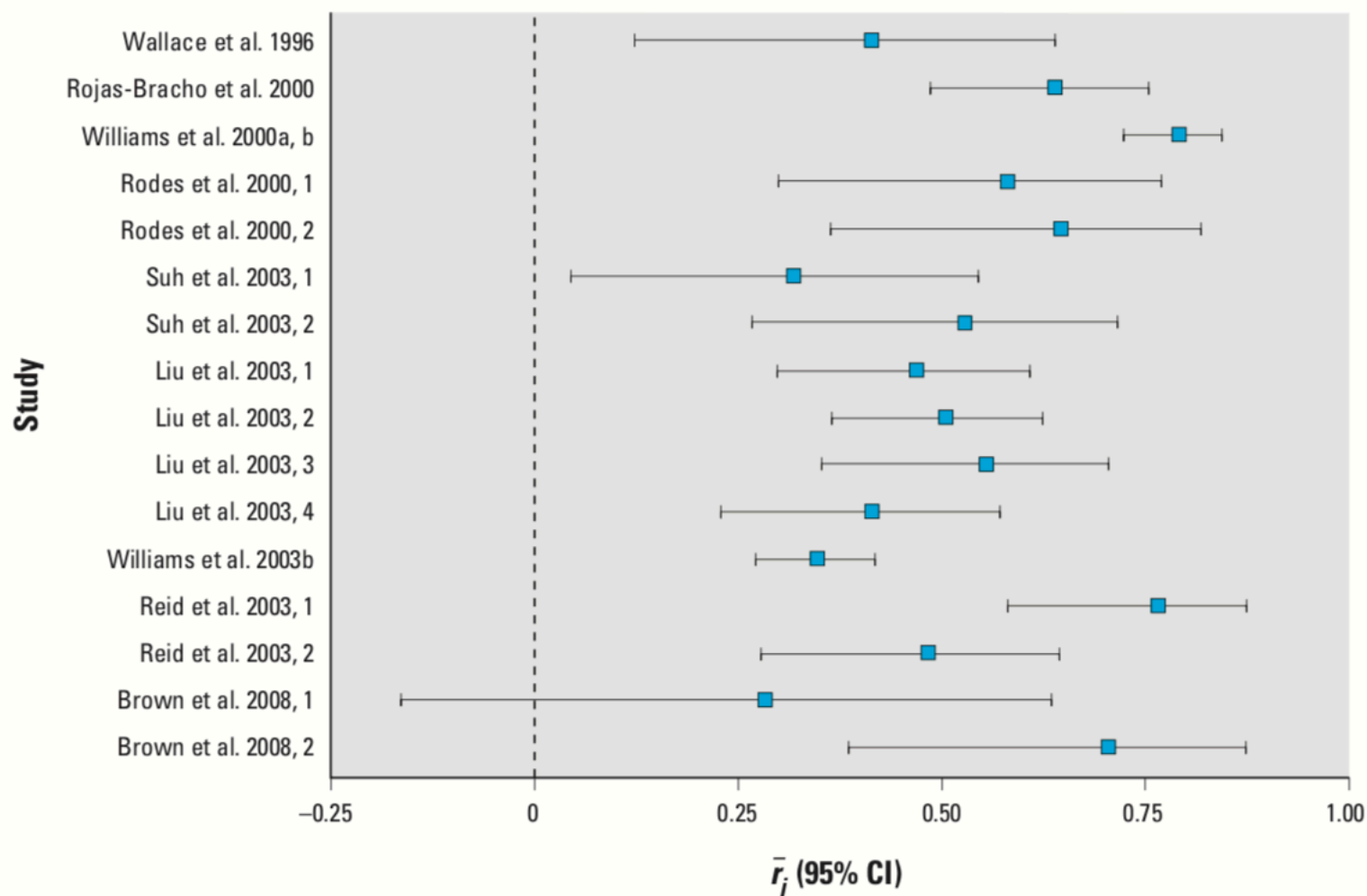
State	Group	Indoor vs. outdoor	Personal vs. indoor	Personal vs. outdoor
Overall study	All homes	0.18	0.20	0.05
	I/O < 1 homes	0.71	0.15	0.10
California	All homes	0.44	0.27	0.21
	I/O < 1 homes	0.80	0.40	0.33
New Jersey	All homes	0.12	0.19	0.05
	I/O < 1 homes	0.66	0.16	0.09
Texas	All homes	0.06	0.13	0.007
	I/O < 1 homes	0.43	0.03	0.02

I/O indicates  $R^2$  for homes where indoor/outdoor  $\text{PM}_{2.5}$  ratio is less than 1.

Meng et al. **2005** *J Exposure Analysis Environ Epidemiology*

# Potential for Double-Counting

**Figure 1.** Forest plot for 16 estimates of  $\bar{r}_j$  (95% CIs) from nine studies of the within-participant residential outdoor-personal PM<sub>2.5</sub> correlation.



# Indoor/Outdoor PM: Differential Toxicity

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## **Ambient origin PM may be more harmful than indoor-generated PM.**

- Ebel et al. (2005) *Epidemiology*
  - 16 COPD patients; measures of cardiopulmonary health
  - Lung function, blood pressure, ectopic heartbeats associated with ambient origin PM<sub>2.5</sub> but not indoor origin PM<sub>2.5</sub> exposures
- Koenig et al. (2005) *Environmental Health Perspectives*
  - 19 children with asthma; measures of lung function
  - Slightly stronger associations with outdoor PM<sub>2.5</sub> than indoor PM<sub>2.5</sub> exposures

## **Indoor-generated PM is at least as toxic as outdoor PM, if not more.**

- Long et al. (2001) *Environmental Health Perspectives*
  - In vitro toxicity of 14 I/O paired PM<sub>2.5</sub> samples in rat alveolar macrophages
  - Similar tumor necrosis factor for indoor and outdoor samples; indoor more bioactive
- Monn and Becker (1999) *Toxicology and Applied Pharmacology*
  - PM<sub>2.5</sub> samples from EPA lab exposed to human monocytes
  - Similar cell toxicity with both indoor and outdoor samples