



FINE PARTICULATE MATTER AND RESPIRATORY ADMISSIONS: AN ASSESSMENT OF SHORT-TERM EXPOSURE MODEL CHOICE SENSITIVITY FOR HEALTH STUDIES

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Introduction

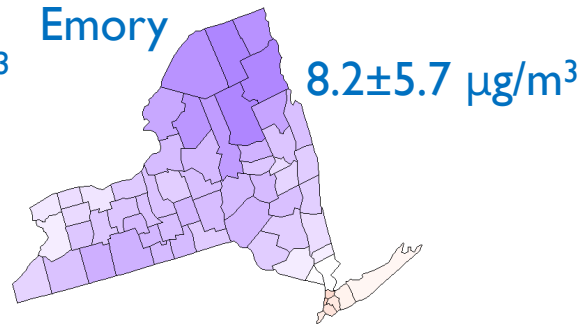
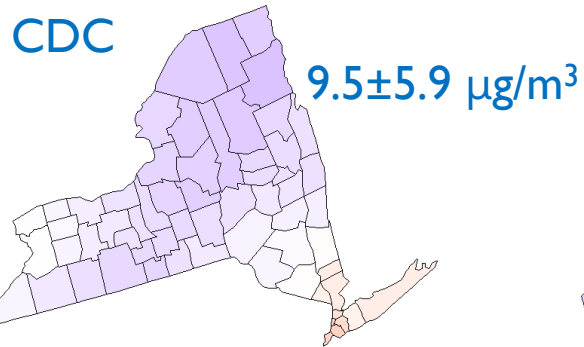
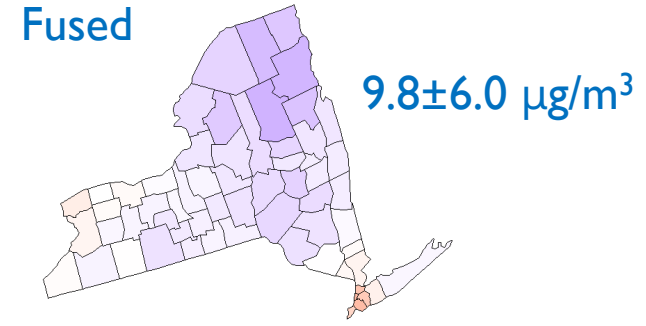
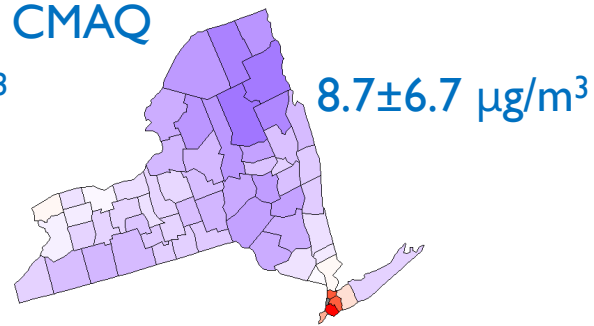
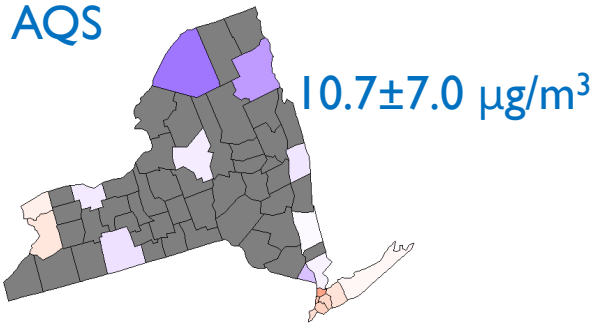
- Air pollution and health – widely studied, effect well-documented
- Historically, time-series studies used monitoring data (e.g. AQS)
- Recently, increasing use of prediction models to reduce exposure measurement error and include populations in areas without monitors
- To date, most health studies uses predictions from a single model to assign exposures

- Multi-pollutant air pollution analysis over NY State, 2002-2012
- Today: PM_{2.5} and respiratory admissions
 - Five exposure datasets
 - **Goal: assess sensitivity of health effect estimates on the choice of different prediction models for exposure assessment**

Methods

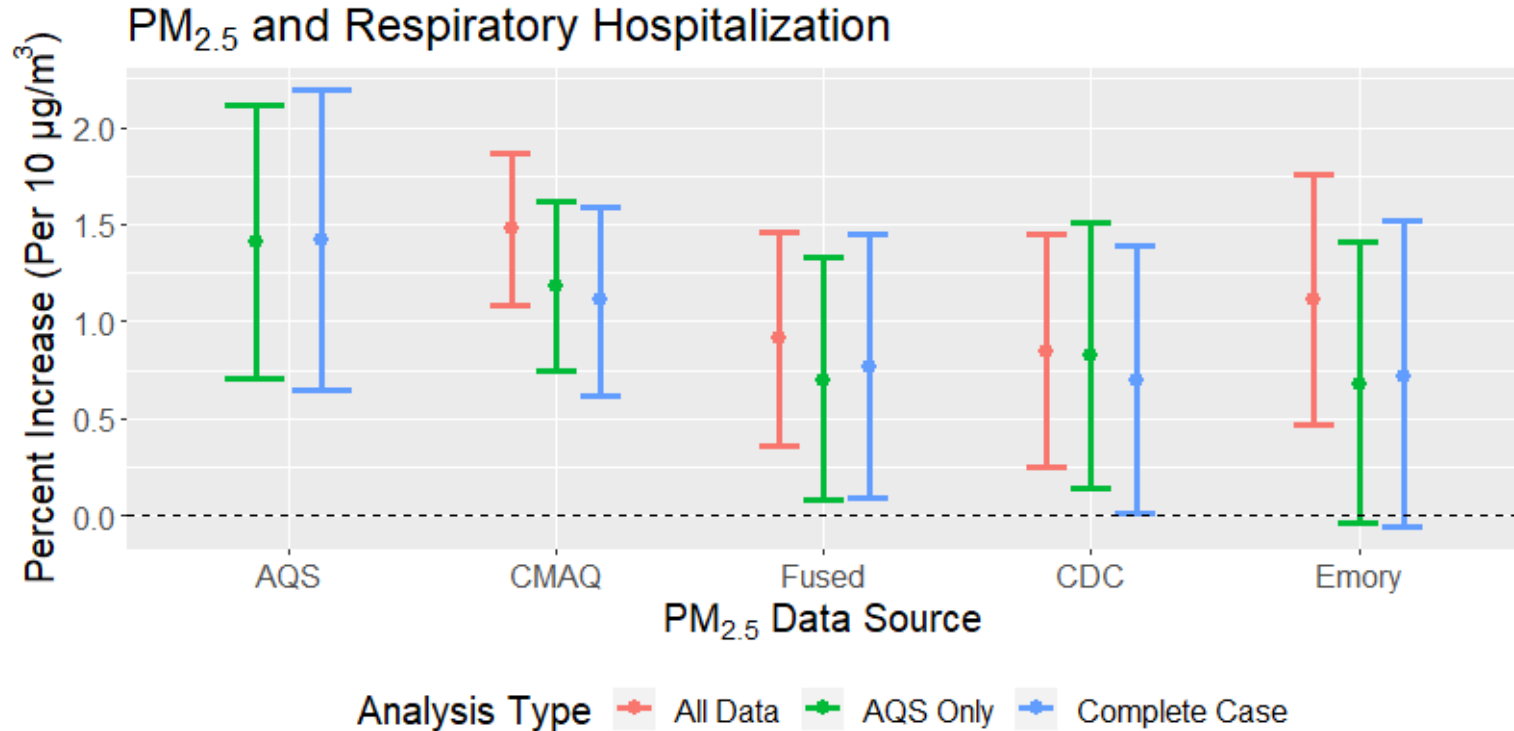
- Exposure assessment
 - Five daily county-average PM_{2.5} datasets: AQS, CMAQ, AQS + CMAQ Fused, CDC WONDER, Emory model
 - Meteorological data from NASA
- Outcome assessment: daily inpatient respiratory admissions from NYS DOH
 - On average, 2 admissions per day
- Statistical analysis: Poisson regression models
 - Indicator variables for counties and day of week
 - Temperature (3 *df*), relative humidity (3 *df*), and long-term and seasonal trends (5 *df* per year)

Results



	AQS	CMAQ	Fused	CDC	Emory
AQS	1.00				
CMAQ	0.52	1.00			
Fused	0.89	0.61	1.00		
CDC	0.83	0.49	0.86	1.00	
Emory	0.90	0.52	0.92	0.85	1.00

Results



Conclusions

- Consistent positive associations between $PM_{2.5}$ and respiratory admissions for all models
 - Higher effect estimates than that of CVD, but wider CIs
- Some fluctuation in effect estimates depending on analysis type
 - Differences could be due to measurement error
 - Predictive accuracy of models varies in space and time in different ways
 - However, conclusion remains the same!

Acknowledgments

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Thank You!

