

AB 617 Biomonitoring Update: Biomarker Research and Potential Study Designs

Susan Hurley, MPH, Julia Varshavsky, PhD, MPH, and Marley Zalay, MPH

Safer Alternatives Assessment and Biomonitoring Section (SAABS)

Office of Environmental Health Hazard Assessment

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AB 617 background



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- ▶ The California Air Resources Board (CARB) established the Community Air Protection Program in response to AB 617, which aims to reduce exposures in communities disproportionately impacted by air pollution
- ▶ In collaboration with the University of California (UC), OEHHA is designing targeted biomonitoring studies in selected AB 617 communities to:
 - Complement and validate ongoing air monitoring
 - Increase understanding of exposures and potential health risks faced by residents
 - Evaluate specific emission/exposure reduction measures

Exposure concerns and reduction strategies

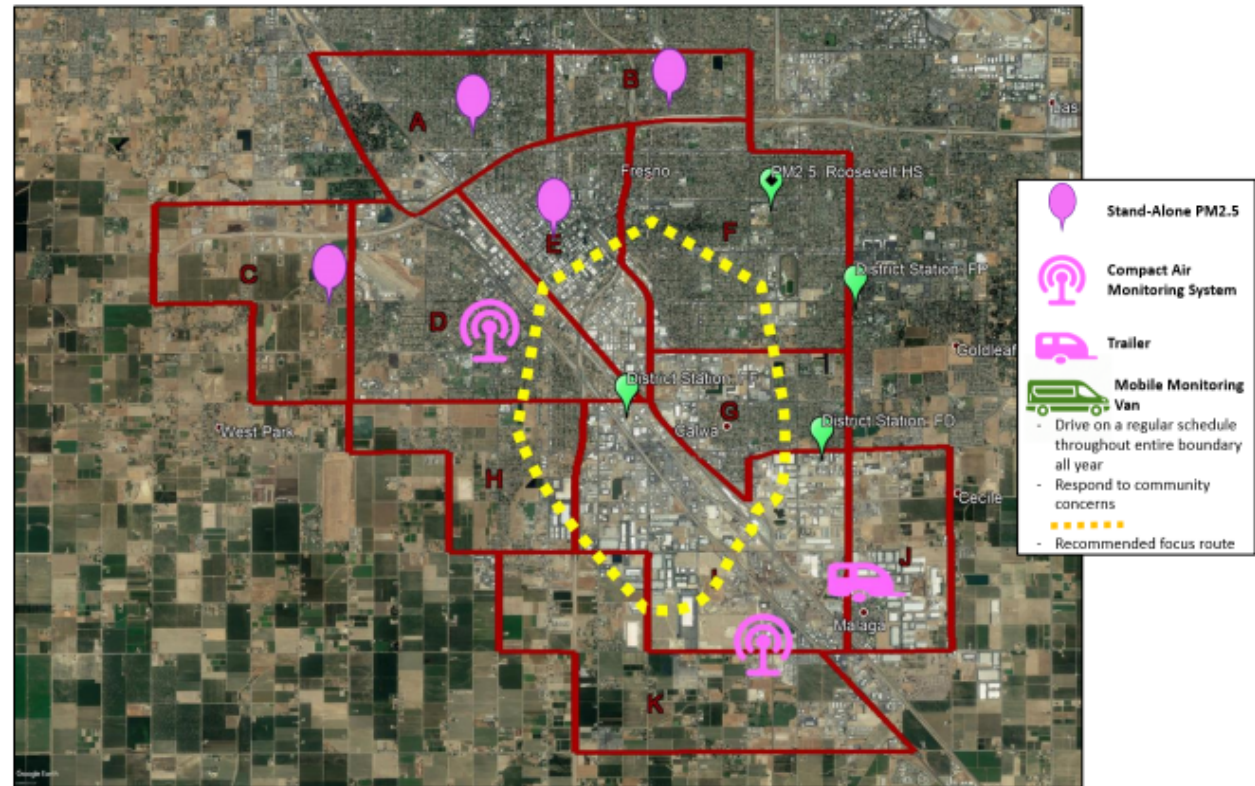
- ▶ Air pollutants of concern include:
 - Criteria air pollutants, such as PM_{2.5}, NO_x
 - Polycyclic aromatic hydrocarbons (PAHs)
 - Volatile organic compounds (VOCs)
 - Metals and pesticides
- ▶ Community Emissions Reduction Plan (CERP) strategies include:
 - Emission reductions in ports, railyards, and refineries
 - Truck rerouting and prevention of truck idling
 - Vegetation planting
 - Street sweeping
 - Installation of air filtration in facilities like schools and senior centers, as well as in homes



AB 617 community air monitoring

- ▶ Aims to characterize local sources
- ▶ Will help inform the selection of study area for biomonitoring
- ▶ Provides hyperlocal air pollutant measurements to pair with biomonitoring results

Figure 6 Community Recommended Air Monitoring Plan Network Design



San Joaquin Valley Air Pollution Control District (2019)

Practical considerations

▶ Limited resources

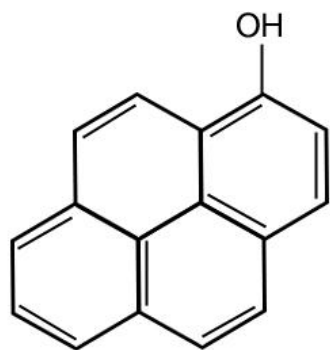
- Current contract with UC sufficient to conduct one targeted biomonitoring study
- Some contract funds can be re-directed to UC labs for biomarker analyses

▶ COVID-19 emergency

- Affects potential study design
- Could impact recruitment

→ Focus on urinary biomarkers only

Options for urinary biomarkers of exposure



1-Hydroxypyrene

- ▶ Hydroxy metabolites of PAHs, including:
 - Naphthalene (NAP)
 - Fluorene (FLU)
 - Phenanthrene (PHE)
 - Pyrene (PYR)
- ▶ Stable metabolites of VOCs, such as:
 - Acrolein
 - Acrylonitrile
 - Benzene
 - 1,3-Butadiene
 - Ethylbenzene
 - Xylene

Options for urinary measures of effect

- ▶ Markers of oxidative stress, including:
 - Malondialdehyde (MDA)
 - 8-Isoprostane
 - 8-Hydroxy-2'-deoxyguanosine (8-OHdG),
8-Oxo-2'-deoxyguanosine (8-oxodG)
- ▶ Urinary mutagenicity assays

Challenges with air pollution biomonitoring

- ▶ Interpretation of PAH and VOC biomarkers
 - Multiple sources of exposures
 - Short biological half-lives of metabolites (hours to days)
- ▶ Spatial and temporal variation in air pollution
 - Affected by season and meteorology
 - Regional air monitoring may not capture hyperlocal exposures

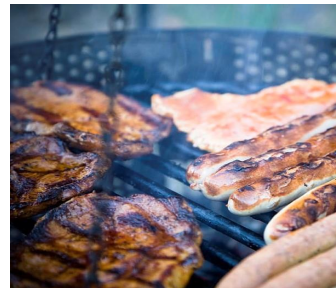


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Viability of urinary PAH and VOC biomarkers

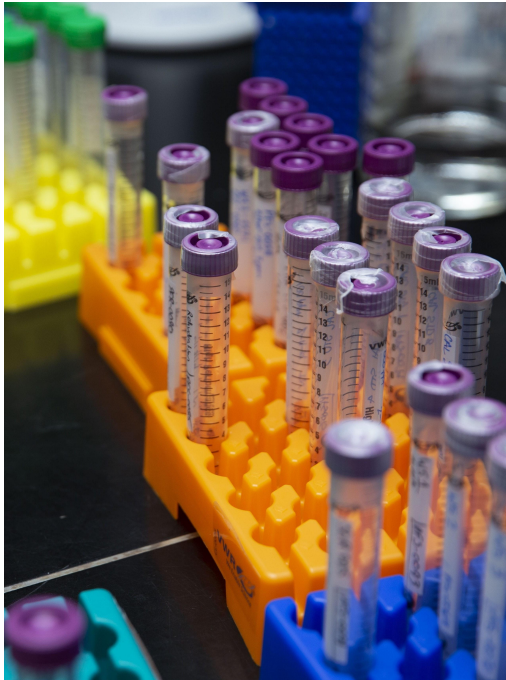
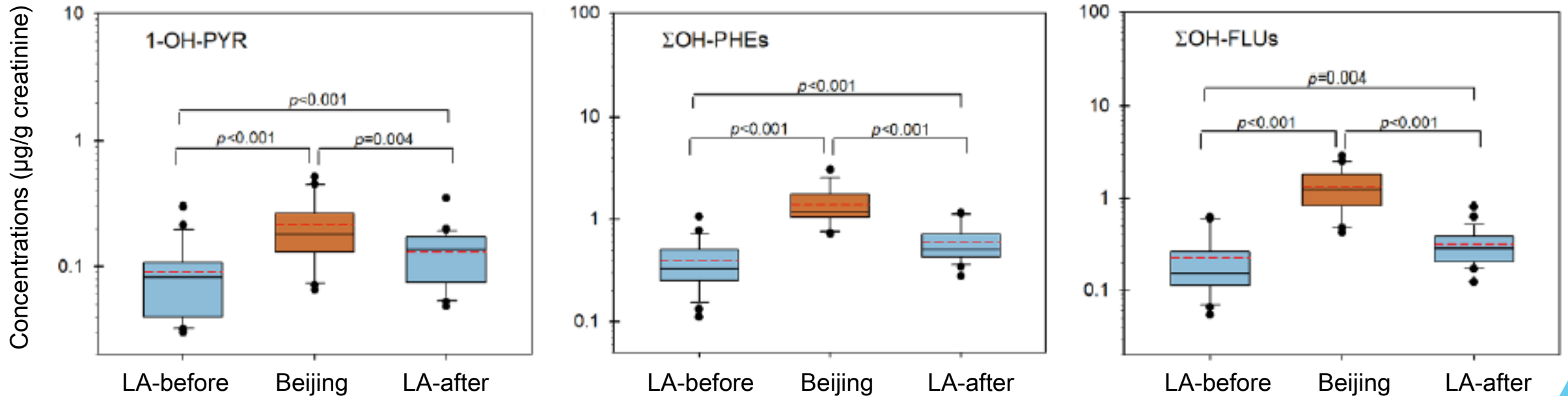


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Selected PAH and VOC biomonitoring studies have shown:

- ▶ Correlations with air pollutants
- ▶ Differences in exposure profiles between communities
- ▶ Correlations with biomarkers of effect
- ▶ Links to changes in air pollution exposures

Urinary PAH metabolites before and after travel from Los Angeles to Beijing



- ▶ PAH metabolite levels significantly higher while in Beijing
- ▶ Daily $\text{PM}_{2.5}$: LA= $14.6 \mu\text{g}/\text{m}^3$, Beijing= $67.6 \mu\text{g}/\text{m}^3$
- ▶ Smoking: all non-smokers, adjusted for cotinine
- ▶ Diet: 8 hour fast prior to urine collection

Measurements of urinary 1-OHP, 8-oxodG and mutagenic activity among 72 urban Italian traffic policemen

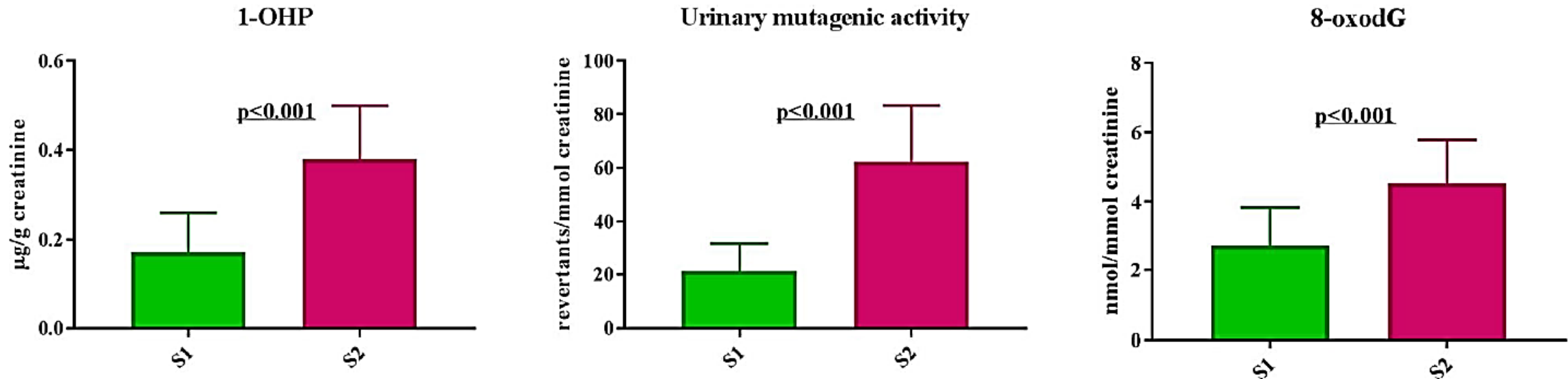


Fig. 1 Plot of 1-OHP, mutagens and oxidative DNA lesions in traffic policemen. S1 collected after 2 days off from work;

S2 collected after 6 consecutive workdays.

- ▶ Significant pre/post shift differences in biomarkers of exposure and effect
- ▶ Urinary mutagenic activity and 8-oxodG were significantly correlated with 1-OHP
- ▶ Prescribed low-PAH diet for 2 weeks prior; all non-smokers

Urinary PAH and VOC metabolites before and after cook stove intervention

Parent compound	% change
NAP	- 38%*
FLU	- 31%*
PHE	- 21%
PYR	- 14%
Benzene	- 40%*
Ethylene oxide	- 12%
Acrylonitrile	- 38%*

* $p < 0.05$

- ▶ Intervention resulted in:
 - Significant 56% decline in $PM_{2.5}$ (measured by personal air monitoring)
 - Significant declines in urinary metabolites of NAP, FLU, benzene, and acrylonitrile
- ▶ $PM_{2.5}$ significantly correlated with all PAH metabolites and some VOC metabolites

Adapted from Table 3 of Weinstein et al. (2020)

Urinary PAH metabolites correlated with PAHs in air

Parent PAH in air	Urinary metabolite	Low PAH diet ρ^*	High PAH diet ρ^*
NAP	Σ OH-NAP	0.87	0.63
	1-OH-NAP	0.89	0.76
	2-OH-NAP	0.42	0.20
FLU	Σ OH-FLU	0.55	0.41
	9-FLU	0.22	0.27
	3-FLU	0.67	0.52
	2-FLU	0.68	0.54
PHE	Σ PHE	-0.09	0.13
PYR	1-OH-PYR	0.38	0.11

* ρ =Pearson correlation coefficient; bolded numbers statistically significant ($p < 0.05$)

- ▶ N=8 non-smoking CDC employees
- ▶ PAHs in air measured via personal monitoring
 - Medians ranged from 0.4 ng/m³ for PYR to 921 ng/m³ for NAP
- ▶ Selected metabolites of NAP and FLU strongly correlated with modeled air exposures

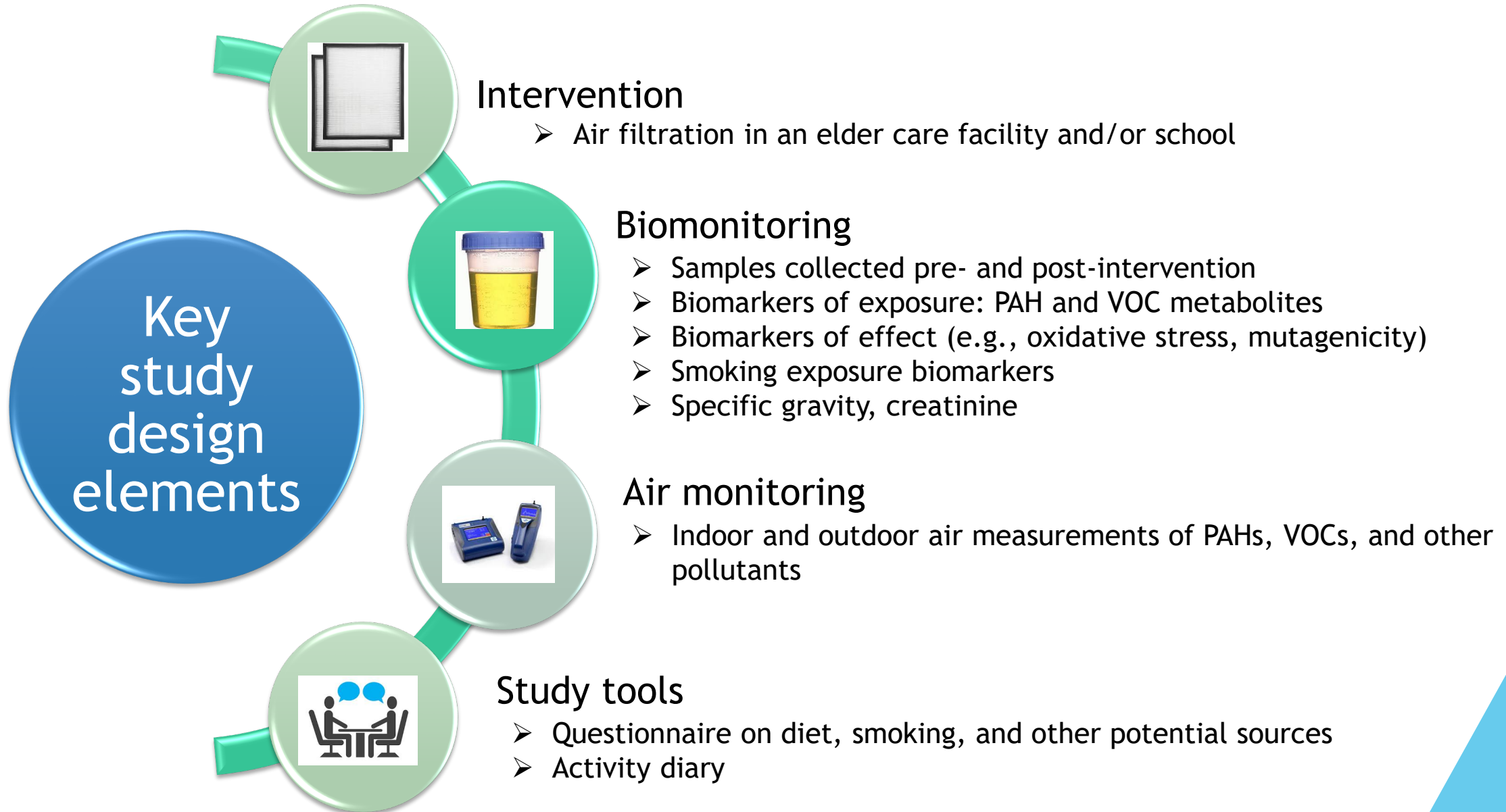
Adapted from Table 5, Li et al. (2010)

Important elements for air pollution biomonitoring

- ▶ Designing a well-controlled intervention that produces a sufficiently large change in exposure (~50%)
- ▶ Accounting for smoking and dietary exposures
- ▶ Measuring multiple biomarkers of exposure and effect
- ▶ Collecting spatially and temporally appropriate measures of air pollution

Potential Biomonitoring Study Designs

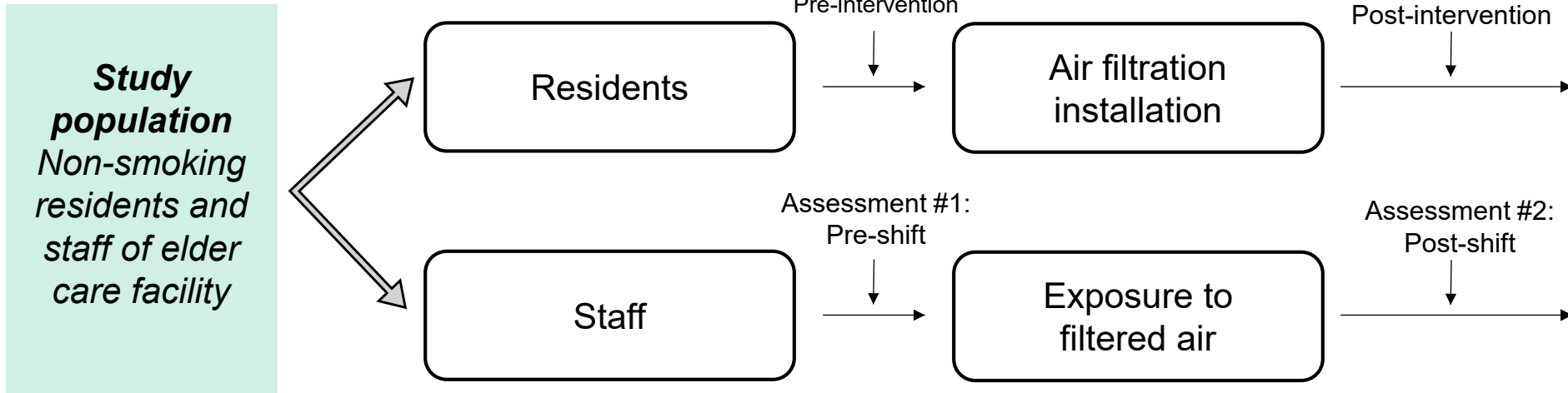
Multi-pronged approach



Effectiveness of indoor air filtration

- ▶ Most air filtration systems filter out particulate matter only; others also capture VOCs
- ▶ Air filtration can reduce particulate matter 50-90%, depending on the system (Polidori et al. 2013, Bennett et al. 2018, San Francisco Department of Public Health et al. 2018)
- ▶ Previous studies suggest urinary PAH biomarkers can detect changes in $PM_{2.5}$ exposures as small as 50% (Weinstein et al. 2020)

Proposed intervention study design



Advantages of residents

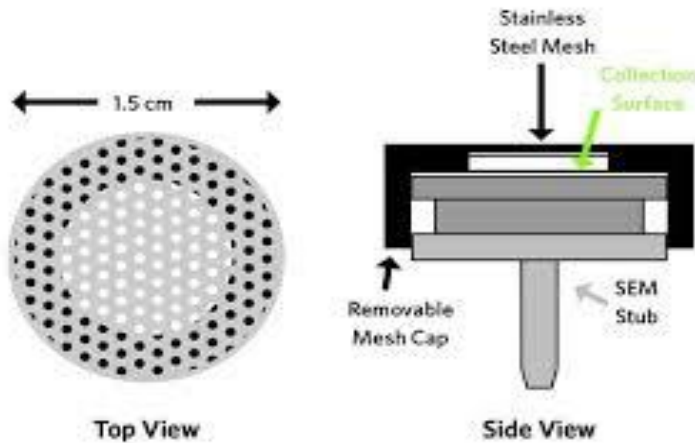
- Assess exposures before and after installation of air filtration
- Control for diet and indoor vs outdoor activity

Advantages of staff

- Assess “cross-shift” changes in exposures (pre-shift + post-shift)
- Expanded demographics

Other design elements

- ▶ Indoor and outdoor air monitoring
 - Both gas-phase and particle-bound air pollutants
 - Compare to hyperlocal community monitoring levels
- ▶ Ultrafine particle analysis to examine likely sources



Wagner and Leith, 2001

Other approaches for consideration

- ▶ Non-targeted screening
 - New analytical methods that can more broadly screen for VOCs in ambient air
- ▶ Unmetabolized parent PAHs
 - Higher detection frequencies - capture additional PAHs
- ▶ Diagnostic ratios for PAHs

Diagnostic ratio	Value	Source	Reference
FLU/(FLU+PYR)	> 0.5 < 0.5	Diesel Gasoline	Ravindra et al. 2008
$\Sigma\text{PAH}_{\text{LMW}}/\Sigma\text{PAH}_{\text{HMW}}$	> 1.0 < 1.0	Petrogenic Pyrogenic	Oliveira et al. 2017

Keys to success for air filtration intervention study design

- ▶ Design intervention that will result in sufficiently large reduction in particles and VOCs ($\geq 50\%$) and that is appropriate for short half-life exposure biomarkers
- ▶ Pair indoor and outdoor air pollution measurements with multiple biomarkers of exposure and effect
- ▶ Conduct study at a time and place with high ambient air pollution (e.g., winter months)
- ▶ Control for and/or assess the influence of other exposure sources (e.g., smoking, diet)

Other collaborative opportunities

Collect and biobank urine samples as part of existing longitudinal or cross-sectional studies to:

- ▶ Compare exposures over time (e.g., before and after emission reduction strategies are implemented)
- ▶ Compare exposures within communities (e.g., examine impact of proximity to local emission sources)
- ▶ Compare exposures between AB 617 communities and with other communities
- ▶ Examine relationship between air pollution exposures and health effects (e.g., asthma, lung inflammation)

Next steps

- ▶ Identify potential facilities for intervention study
- ▶ Continue research on biomarkers of exposure and effect
- ▶ Develop specific study strategies with collaborators at UC and CDPH
 - Secure additional funding for enhanced air monitoring and VOC filtration
- ▶ Ongoing engagement with communities and CARB
- ▶ Continue conversations about other collaborative opportunities

Collaborating institutions



OEHHA
California Office of Environmental
Health Hazard Assessment



Berkeley
UNIVERSITY OF CALIFORNIA

BIOMONITORING
CALIFORNIA



cerch
Center for Environmental
Research & Children's Health

Questions and Discussion

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