

Effect of outdoor air pollution in Iceland's capital region on asthma drug dispensing



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Air pollution

A black and white photograph of a busy city street intersection. In the foreground, a paved road curves to the right. In the background, several cars are visible, some stopped at a traffic light. The scene is set in an urban environment with buildings and trees in the distance.

- From traffic and other sources around Reykjavík.
- Known to irritate lungs and worsen symptoms of chronic lung disease.
- Many health limit violations every year for some pollutants: PM_{10} (svifryk) exceeds the 24-hour health limit some 25 times per year.
- Lack of studies in Iceland measuring the effect of high air pollution concentrations on respiratory health.



Aim

- The overall aim of this study is to determine whether day-to-day increases in the levels of air pollution in the Capital Area of Iceland, are associated with an increase the sales of asthma medication.

Methods

Exposure

- Air pollution:

PM_{10} , NO_2 , O_3 , H_2S

- Source: Municipality of Reykjavík environmental department.

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• Outcome

- Daily number of people taking out drugs to relieve pulmonary obstruction
- Source: Medicines registry at the Directorate of Health

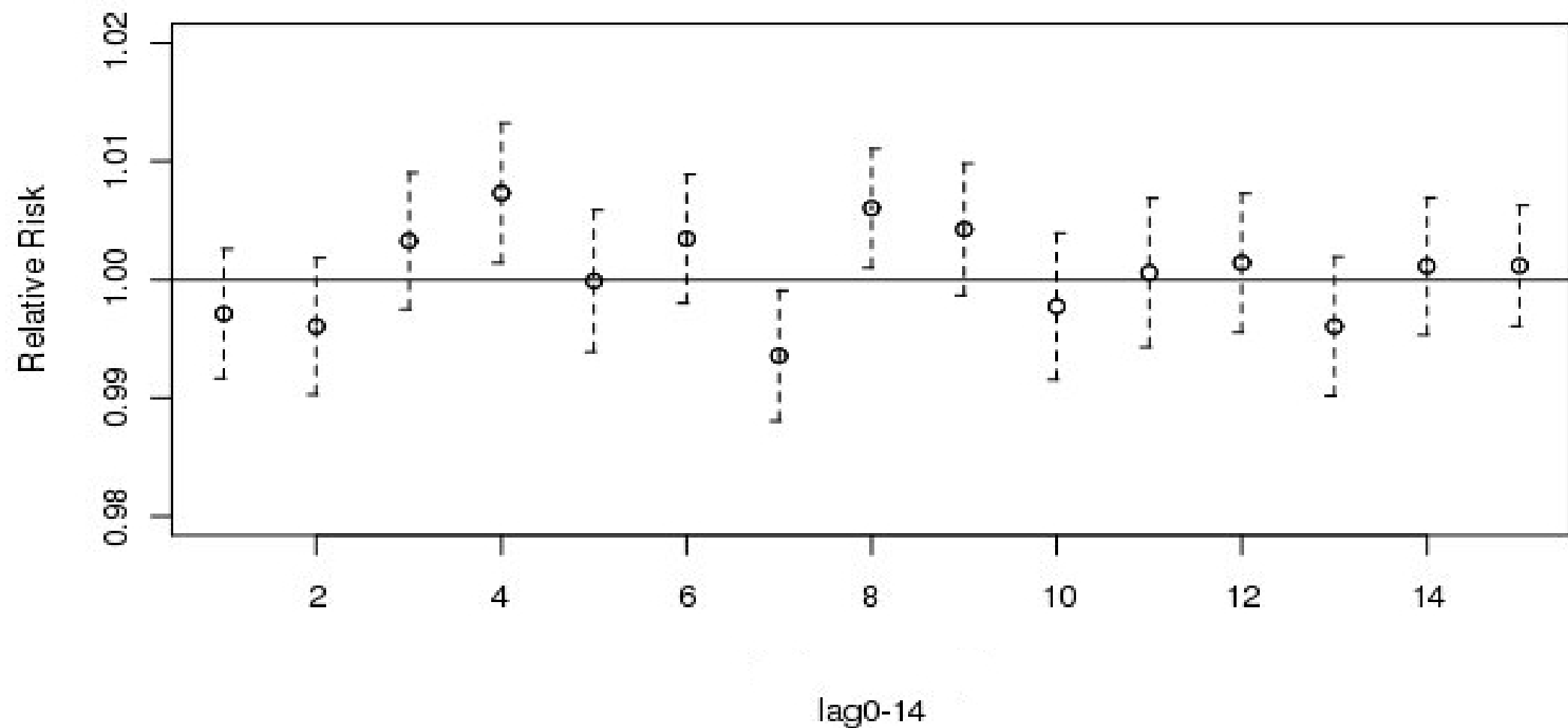
Regression Covariates

Day-of-week, seasonal trends, time trend, air humidity, temperature, influenza season and pollen

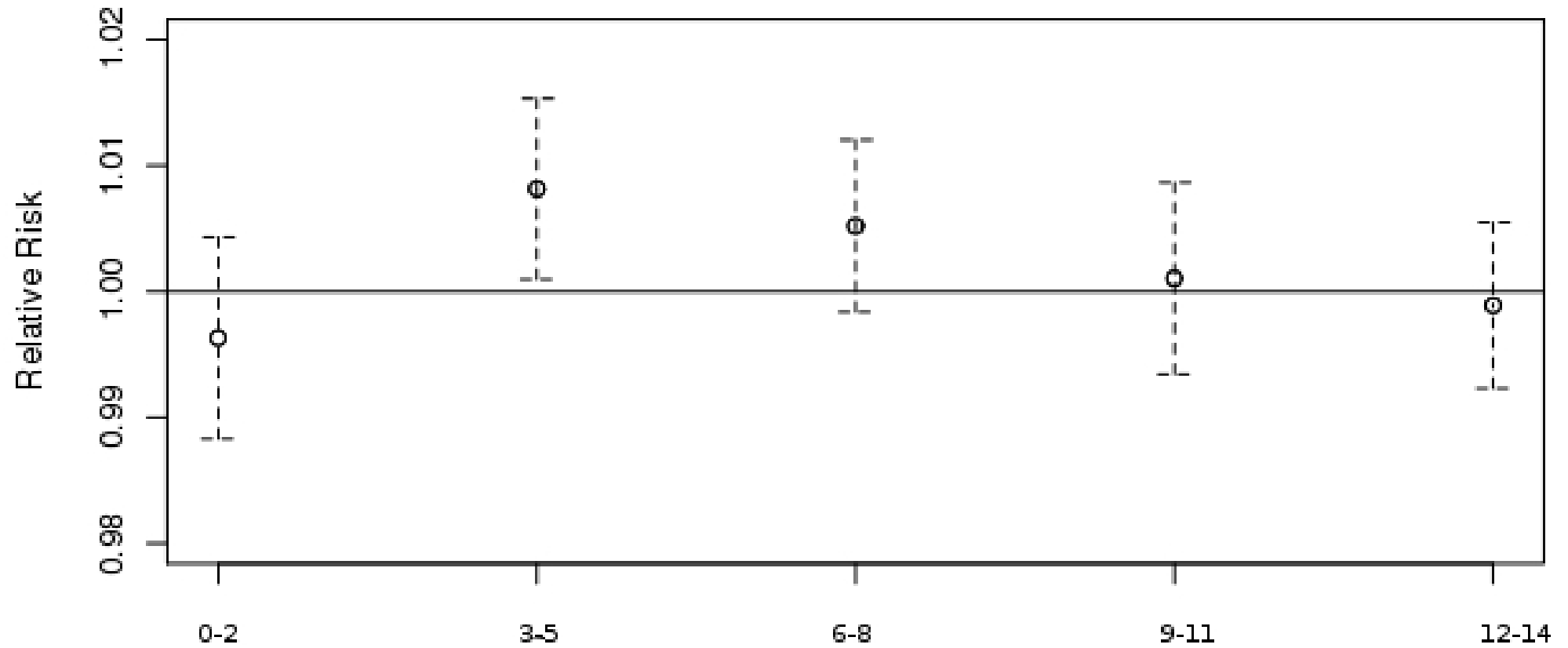
Descriptive statistics

Pollutants	Daily 24-hr mean (range)	Standard deviation	24-hour health limit
PM10 (µg/m ³)	22,95 (3,23 – 261,60)	21,78	50
NO ₂ (µg/m ³)	23,00 (2,76 – 111,60)	13,83	75
O ₃ (µg/m ³)	41,11 (1,20 – 91,49)	13,37	120*
H ₂ S (µg/m ³)	3,626 (0,02 – 58,93)	6,1	-
Pollutants	Max daily 1-hr mean (range)	Standard deviation	1-hour health limit
PM10 (µg/m ³)	79,05(0,00-1779,00)	130.33	-
NO ₂ (µg/m ³)	51,47(0,00-209,60)	28,11	110-200
O ₃ (µg/m ³)	58,30 (0,00-136,25)	13,48	-
H ₂ S (µg/m ³)	14,61(0,00-176,55)	26,04	-
*8 hour health limit			
Health outcome	Mean (range)	std.dev.	
Dispensed individuals per	72,41 (2 – 151)	37,9	

Increased number of individuals taking out medication Risk associated with increase of 10 mcg/m³ PM10

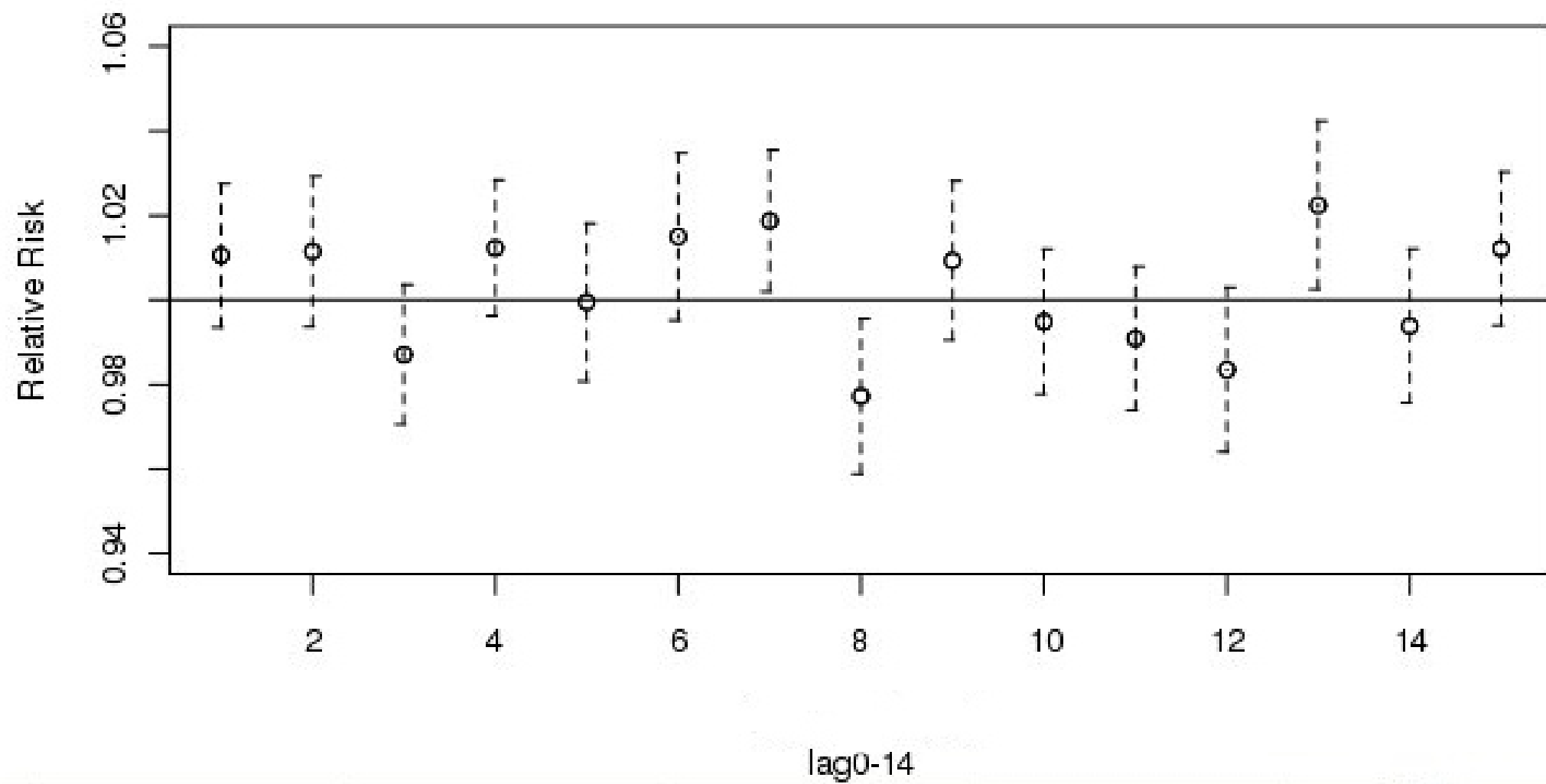


Risk estimate for increment of 10 $\mu\text{g}/\text{m}^3$ PM10

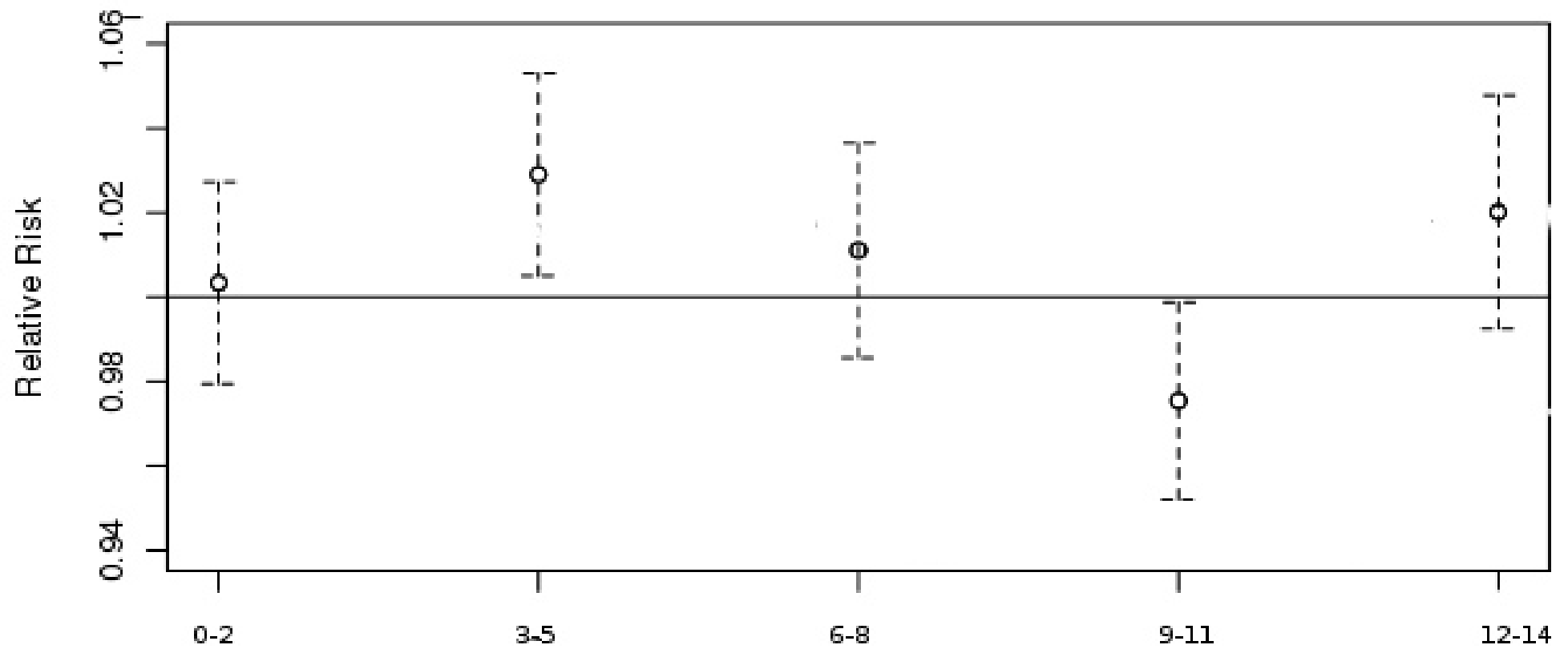


lag0-14, each data point represents a 3-day average

Increased number of individuals taking out medication Risk associated with increase of 10 mcg/m³ H₂S



Risk estimate for increment of 10 $\mu\text{g}/\text{m}^3$ H₂S



lag0-14, each data point represents a 3-day average

Conclusion

- Increases in levels of air pollution are associated with increased dispensing of drugs to relieve pulmonary obstruction during the following days in multi-pollutant poisson regression models
- Size of the effect and the longevity of the association differs between pollutants.
- In studies abroad, similar, positive associations are seen at lag2-10 (Laurent et al 2009, Pitard et al 2004)
- This is the first study in Iceland on health effects of air pollution using the population-based pharmaceutical database
- Further analysis of the data is ongoing.

Takk



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Directorate of Health



Reykjavíkurborg



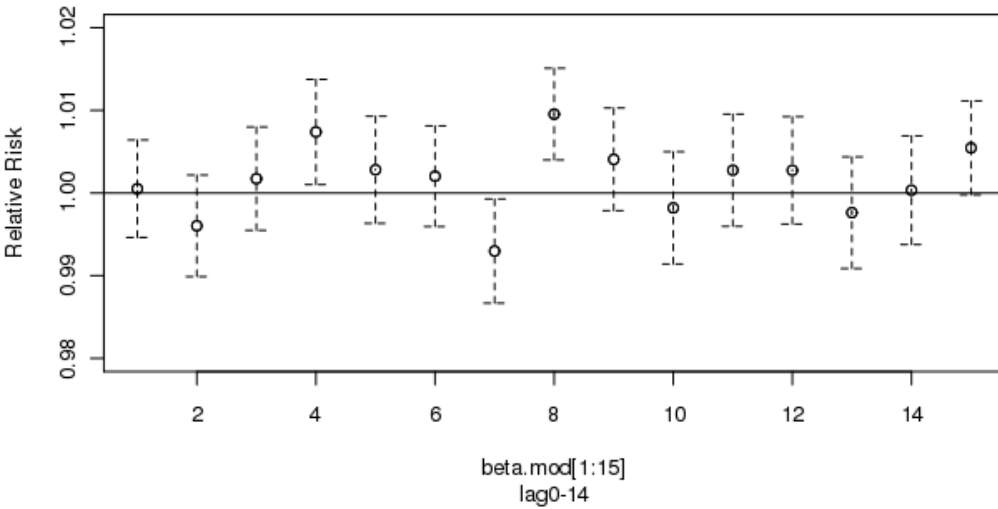
HÁSKÓLI ÍSLANDS



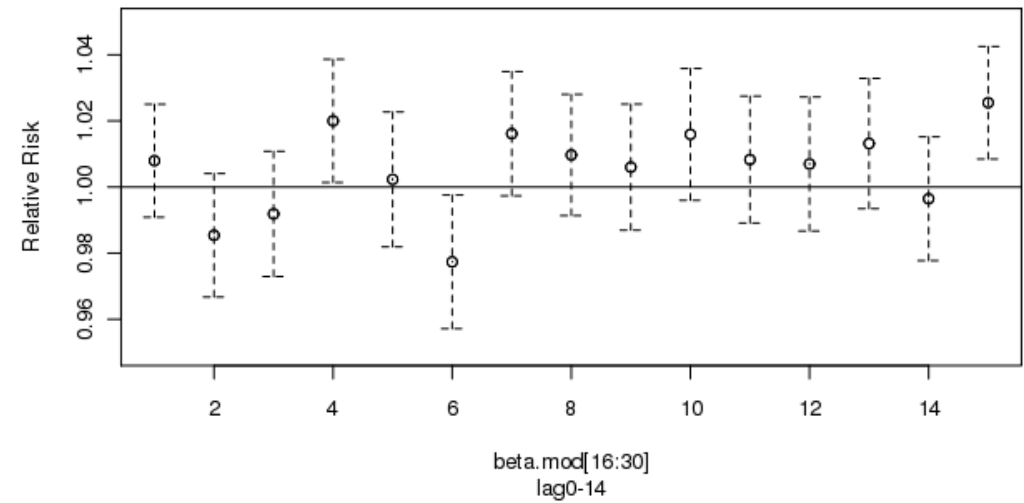
- Oddsjóður & Astma- og ónæmisfélag Íslands

Continuous input model

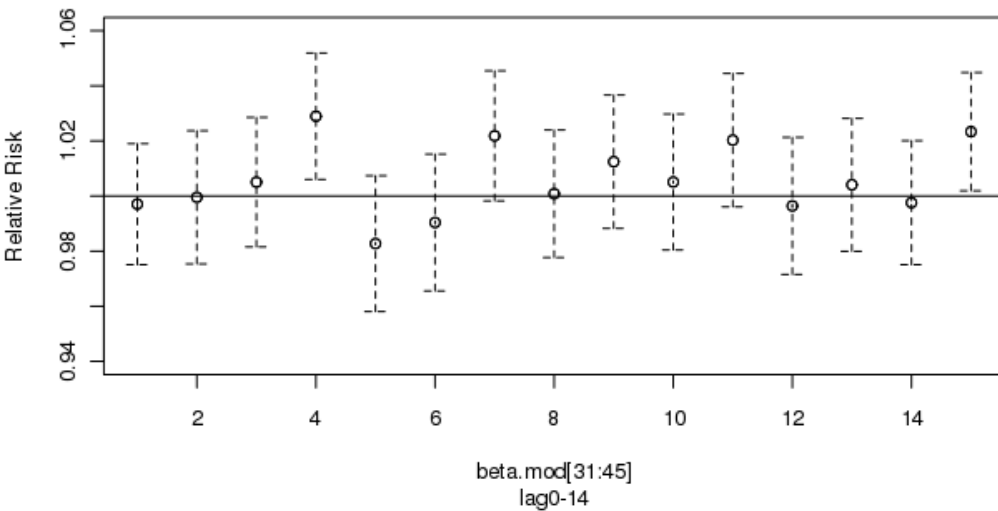
Risk estimate for increment of 10 $\mu\text{g}/\text{m}^3$ PM10



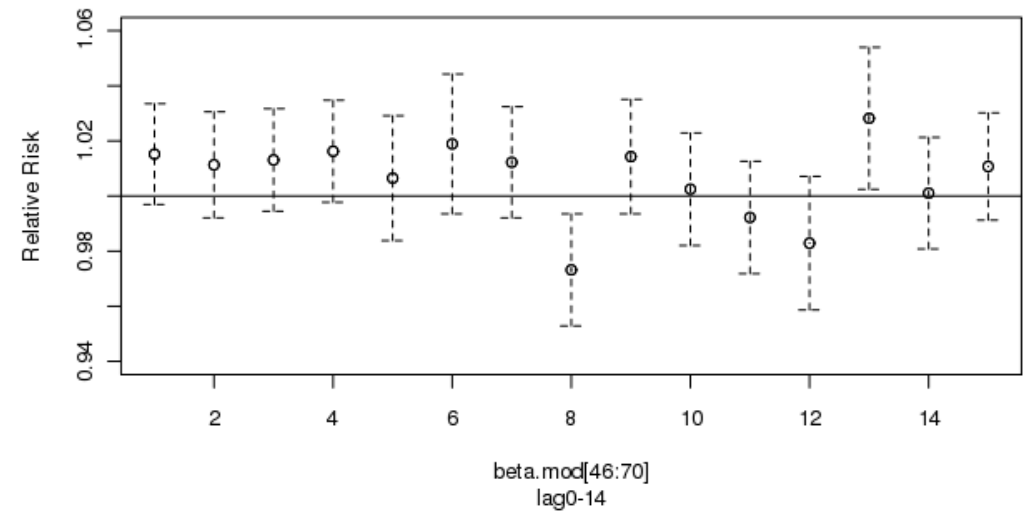
Risk estimate for increment of 10 $\mu\text{g}/\text{m}^3$ NO2



Risk estimate for increment of 10 $\mu\text{g}/\text{m}^3$ O3



Risk estimate for increment of 10 $\mu\text{g}/\text{m}^3$ H2S



Methods II

- **Data**

- Daily dispensings from the pharmaceutical registry of The Directorate of Health
 - Daily dispensings of adult in the denser populated capital area by individual, number of prescriptions and volume.
- Pollution data from the environmental and traffic department of the city of Reykjavík
 - 30-minute data on concentrations of pollutants and climate.

- **Poisson regression**

- Poisson regression used to models counts (non-negative discrete variable)
- Lags – delays in effect
 - Dispensing of drugs on the same day as the pollution event (lag0), one day after(lag1), two days after (lag2) and so on.

$$\text{Daily drug dispensings} = \alpha + \beta_1 * \text{Air pollution} + \beta_2 * \text{Day-of-week} + \beta_3 * \text{Seasonal trends} + \beta_5 * \text{pollen} + \beta_5 * \text{Climate} + \beta_6 * \text{Influenza}$$