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Early-life Exposures - Long-term Health Consequences Part 3: PCE and Phthalates

Sponsored by: NIEHS Superfund Research Program
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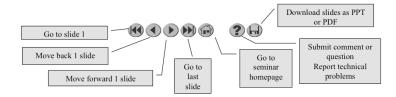
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With that, please move to slide 3.

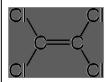
Neurotoxic Effects of Early Life Exposure to Tetrachloroethyene (PCE)-Contaminated Drinking Water

Ann Aschengrau, ScD Professor of Epidemiology



Overview of Presentation

- PCE uses and fate
- How PCE contaminated Cape Cod's drinking water
- Birth cohort study methods and results
 - Risky behaviors (smoking, alcoholic beverage consumption, illicit drug use)
 - Mental illness (depression, bipolar disorder, PTSD, and schizophrenia)



PCE Uses and Fate

- look crisper DRYCLEANED
 the modern
- PCE stands for tetrachloroethylene
- Commercially important solvent used for dry cleaning, textile processing, and metal degreasing
- About 650,000 persons in US are exposed through their work
- Used in small, geographically dispersed, and poorly controlled facilities —dry cleaners, garages, machine shops
- Common drinking water contaminant (8-38%)

PCE in Cape Cod Waters

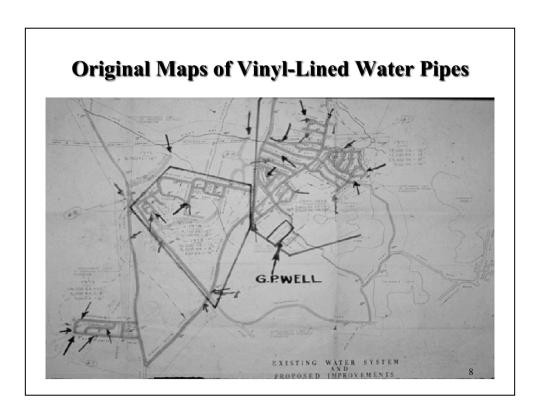


- In 1980 Massachusetts Department of Environmental Protection discovered that PCE was leaching into drinking water from vinyl lining in water distribution pipes
- Vinyl liner introduced in 1968 in response to complaints about taste and odor of water
- Slurry sprayed onto inner pipe surface
- Slurry = 30% vinyl toluene resin and 70% PCE
- Assumed that PCE would disappear in curing process but substantial quantities remained and leached into drinking water

Extent of Problem



- 660 miles of vinyl-lined asbestos cement pipe (VL/AC) pipe had been installed in 91 Massachusetts communities over 12-year period
- 24% installed on Cape Cod: Barnstable (16 mi), Bourne (22), Falmouth (50), Mashpee (1), Sandwich (50), Brewster (6), Chatham (7.5), Harwich (0.2), Provincetown (6)
- Typical levels varied from 1,600-7,750 ug/l at low flow locations and 1.5-80 ug/l at medium/high flow locations



Publicity



- In April 1980 Boston Globe broke story to public
- Headline: "Pipes pollute some New England water"
- "Environmental officials disclosed that water flowing into thousands of New England homes was contaminated with a chemical suspected of being a cancercausing agent."

Official Response in 1980

- EPA issued an action level of 40 ug/l
- Recommended actions: boil water, purchase bottled water, install AC filters, remove and replace pipe, reline pipes with cement mortar, install bleeder taps to flush the lines
- Water samples taken to determine extent of contamination and monitor success of remediation efforts

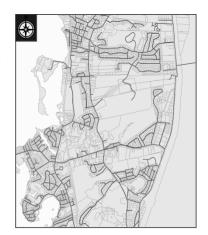




- Thousands of Massachusetts residents were exposed to PCE-contaminated water for various periods from late 1960s thru 1980s
- We estimate that 15% of the Cape Cod population had some exposure
- Levels before 1980 may have been quite high
- Levels in 1980s may have been as high as 40 ug/l
 eight times the current MCL of 5 ug/l

PCE Exposure on Cape Cod

- Unique exposure scenario
 - Irregular pattern of contamination with no point source
 - Wide-range of PCE exposure levels
 - Little confounding by other water contaminants
- Challenging exposure assessment
 - No sampling data prior to 1980
 - Remediation upon discovery





Our Research

Our team at BU has used this natural experiment to learn about the health effects of PCE in drinking water among individuals exposed as adults and in early life

- Carcinogenicity
- Reproductive and developmental effects
- Neurotoxic Effects



Neurotoxicity of PCE



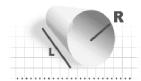
- Animal and human evidence supports wide range of effects on neurologic function for both acute and chronic exposure
- Acute exposure leads to headache, dizziness, confusion, nausea, and eye irritation. Very high exposure may lead to unconsciousness, and even death from respiratory depression.
- Chronic exposure associated with impairments in memory, cognition, attention, mood changes including anxiety and depression, and vision problems
- Most human research has been conducted on occupationally exposed adults; very little information on early life exposure

- Retrospective cohort study to examine long-term neurotoxic effects of early life exposure
- Source population: Children born from 1969-1983 to women who lived in Cape Cod towns with VL/ AC pipes
- Subjects identified by cross-matching maternal addresses from birth records with information from water companies on location and installation year of VL/AC pipes

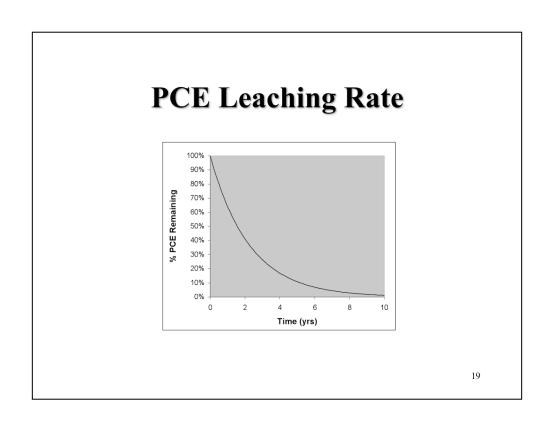
- Initial exposure assessment based on visual inspection of maps depicting pipe distribution network in immediate vicinity of birth address
- Exposed subjects had birth residence adjacent to VL/AC pipes, N=1,910
- Unexposed subjects randomly selected from remaining resident births and frequency matched on date of birth to exposed subjects, N=1,928

- Older siblings also selected if born in Massachusetts during 1969-1983, N=1,202
- Older sibs initially considered unexposed because they were born before the family moved to an affected Cape Cod residence
- Initial exposure assessment considered provisional until more extensive assessments were completed

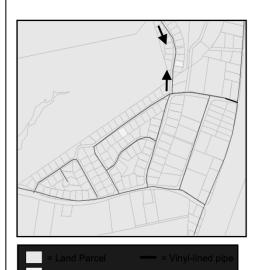
Assessing PCE Exposure



- Used leaching and transport model to estimate mass of PCE delivered to each residence from prenatal period through age of 5 years
- Model estimates quantity of PCE entering drinking water using information on initial quantity of PCE in liner (based on pipe length and diameter), age of pipe, leaching rate of PCE from liner into water.
- Model used to estimate relative delivered dose (RDD), an ordinal estimate of exposure



Water Flow



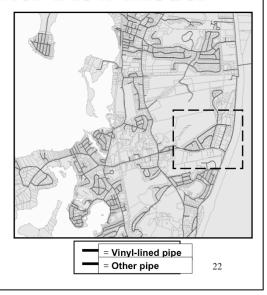
- Very important determinant of exposure
- Flow direction determines exposure status
- Flow magnitude determines exposure amount

EPANET 2.0 Software

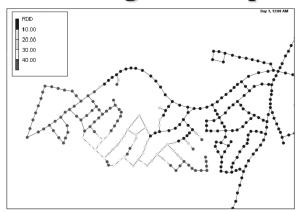
- Model algorithm was incorporated into EPANET software used to estimate water flow and direction
- Developed by the US EPA
- Publicly available, free software & open source code
- Applied in other epidemiological studies

EPANET Water Flow Model

- Greatly improved the assessments; our early studies took into account only small area
- Used entire water distribution system
- Could take into account complex geometries



Calculating PCE Exposure



- Calculated PCE exposure by year at every point
- GIS used to create database to match residences to points $_{23}$

Initial Exposure Status				
Final Exposure Status	Exposed Subject	Unexposed Subject	Unexposed Older Sibling	Total
Both prenatal and early childhood exposure	561	160	110	831
Only early childhood exposure	7	42	85	134
Unexposed	17	360	170	547
Total	585	562	365	1512

Characteristics of Study Population

	•			
Characteristic	Prenatal and Early Childhood Exposure N=831	Unexposed Subject N=547		
Current age, mean (sd)	29.2 (3.6)	29.6 (3.8)		
% Male	39.8	39.5		
% White	98.4	98.5		
% College graduate	61.4	61.2		
% Mother received prenatal care	95.5	95.1		
% Mother smoked cigarettes during gestation	21.9	20.7		
% Mother consumed alcoholic beverages during gestation	36.3	36.8		
% Mother smoked marijuana during gestation	3.0	3.3		
% Subject ever had job with solvent exposure	14.8	13.0		

Risky Behaviors

- Ever became a regular smoker, age at initiation of smoking, smoking frequency
- Ever consumed alcoholic beverages, age at initiation of drinking, drinking frequency as a teen and adult
- Ever use of marijuana, inhalants, cocaine, psychedelics, club drugs as teen and as adult

Results: Smoking

	Exposure Percentile	% Yes	GEE Risk Ratio (95% CI)
Ever Smoked	>67 th	45.0	1.2 (1.0-1.5)
	33rd-<67th	29.1	0.8 (0.7-1.0)
	>0-<33rd	36.8	1.0 (0.9-1.3)
	None	35.2	Referent
Smoked 20+ cigarettes/ day	>67 th	15.8	1.3 (0.9-2.0)
	33rd-<67th	12.1	1.0 (0.7-1.6)
	>0-<33rd	10.4	0.9 (0.5-1.4)
	None	12.0	Referent

Many confounders assessed but none changed crude RR by at least 10%

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Results: Alcohol Consumption

	Exposure Percentile	% Yes	GEE Risk Ratio (95% CI)
First drank <=13 years	>67 th	21.9	1.2 (0.9-1.6)
	33rd-<67th	18.4	1.0 (0.7-1.4)
	>0-<33rd	18.5	1.0 (0.7-1.4)
	None	18.6	Referent
Drank >8 days/month as teen	>67 th	38.8	1.6 (1.1-2.3)
	33rd-<67th	19.8	0.8 (0.5-1.3)
	>0-<33rd	20.2	0.8 (0.5-1.4)
	None	23.7	Referent

Many confounders assessed but none changed crude RR by at least 10%

Results: Drug Use

	Exposure Percentile	% Yes	GEE Risk Ratio (95% CI)
2+ Major drugs as a teen	>67th	43.3	1.6 (1.2-2.2)
	33rd-<67th	30.8	1.2 (0.8-1.6)
	>0-<33rd	34.5	1.3 (0.9-1.8)
	None	26.5	Referent
2+ Major drugs as an adult	>67 th	53.9	1.5 (1.2-1.9)
	33rd-<67th	37.1	1.1 (0.8-1.4)
	>0-<33rd	43.5	1.2 (1.0-1.6)
	None	34.7	Referent

Many confounders assessed but none changed crude RR by at least 10%

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Results: Drug Use

• Specific drugs for which increased risks were observed.....

	GEE Risk Ratio	95% CI
Crack/cocaine as a teen	2.1	1.4-3.0
Psychdelics/hallucinogens as a teen	1.4	1.1-1.8
Club/designer drugs as adult	1.5	1.2-1.9
Ritalin w/o a prescription as adult	1.9	1.3-2.8

Results: Drug Use

Among Subjects Without History of Prenatal Exposure to Cigarette Smoke, Marijuana, Alcohol

	Exposure Percentile	% Yes	GEE Risk Ratio (95% CI)
2+ Major drugs as a teen	>67 th	44.1	2.3 (1.3-4.1)
	33rd-<67 th	21.6	1.1 (0.6-2.2)
	>0-<33rd	15.8	0.9 (0.4-2.0)
	None	18.9	Referent
2+ Major drugs as an adult	>67 th	48.6	2.1 (1.3-3.5)
	33rd-<67th	35.5	1.5 (0.9-2.5)
	>0-<33rd	28.9	1.3 (0.7-2.3
	None	22.2	Referent

Results: Risky Behaviors

- Results suggest that the occurrence of risky behaviors, particularly drug use, is increased among adults with high PCE exposure levels during gestation and early childhood.
- Findings published in *Environmental Health* in December, 2011

Mental Illness

- "Has a doctor or health care provider ever said that you had.....
 - Depression?"
 - Schizophrenia?"
 - Bipolar or manic depressive disorder?"
 - Post-traumatic stress disorder?"

If yes, obtained year of diagnosis

Results: Mental Illness

	Exposure Percentile	% Yes	GEE Risk Ratio (95% CI)
Depression	>67 th	19.0	1.1 (0.8-1.5)
	33rd-<67th	20.8	1.2 (0.9-1.6)
	>0-<33rd	19.5	1.1 (0.8-1.5)
	None	17.8	Referent
Bipolar disorder	>67 th	8.2	2.7 (1.3-5.6)
	33rd-<67th	3.2	1.1 (0.4-2.7)
	>0-<33rd	5.1	1.6 (0.7-3.7)
	None	3.2	Referent

Many confounders assessed but none changed $\mbox{ crude RR by at least }10\%$

Results: Mental Illness

	Exposure Percentile	% Yes	GEE Risk Ratio (95% CI)
Post -Traumatic Stress Disorder	>67 th	8.2	1.7 (0.9-3.2)
	33rd-<67th	6.7	1.4 (0.7-2.7)
	>0-<33rd	6.4	1.4 (0.7-2.6)
	None	4.7	Referent
Schizophrenia	>67 th	0.5 (n=1)	
	33rd-<67th	0.9 (n=2)	
	>0-<33rd	0.0 (n=0)	
	None	0.2 (n=1)	Referent

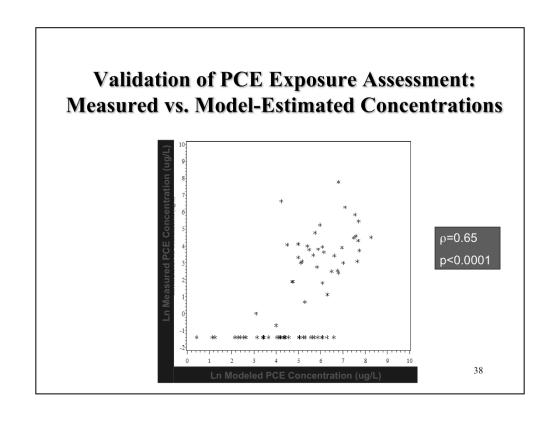
Many confounders assessed but none changed crude RR by at least 10%

Results: Mental Illness

- Results suggest that:
 - The risks of bipolar disorder and post-traumatic stress disorder are increased among adults with high PCE exposure levels during gestation and early childhood
 - Depression is not related to early life PCE exposure
- Results published in *Environmental Health* in January 2012.

Study Limitations

- Self-reported data on risky behaviors and mental illnesses
- Low response rate
- Residual confounding by unmeasured variables (e.g., poor parental supervision, social supports)
- Exposure misclassification



Context of Findings

- No prior studies on risky behaviors
- Prior studies of neurotoxic effects among individuals with early life exposure to solvents have produced mixed results.
- These studies mainly examined learning, attention, and behavior among young children
- Only one prior study examined risk of schizophrenia among offspring of men and women who worked in dry cleaning operations

Conclusions

- Provocative findings need to be corroborated.
- Difficult to find other suitable populations for longterm studies.
- PCE remains a commercially ubiquitous solvent and common contaminant of drinking water, so it is important to determine its impact on health of vulnerable populations.

Thanks to my collaborators....

















Phthalate Exposure and Preterm Birth A Multidisciplinary Approach



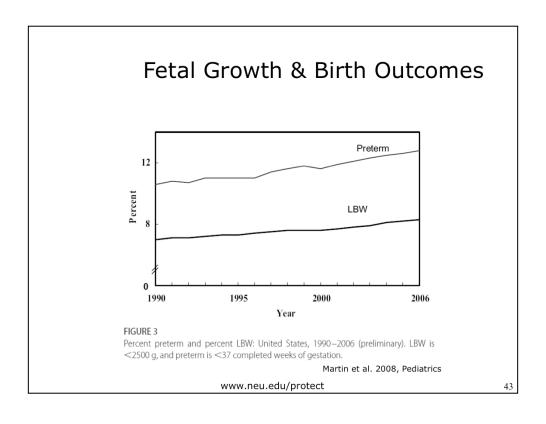
Rita Loch-Caruso and John Meeker University of Michigan





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Preterm Birth Consequences

• Economic costs (2003 data)

- Hospital costs for a preterm or low birth weight infant averaged \$77,000 compared with \$1,700 for term infants
- Premature infants accounted for half of the hospital charges for all infants
- Annual USA medical cost of \$26 billion

· Psychological costs

 Parents suffer increased symptoms of depression, stress & posttraumatic stress disorder



Photo by Tina Stallard. 2005 Visions of Science winner.

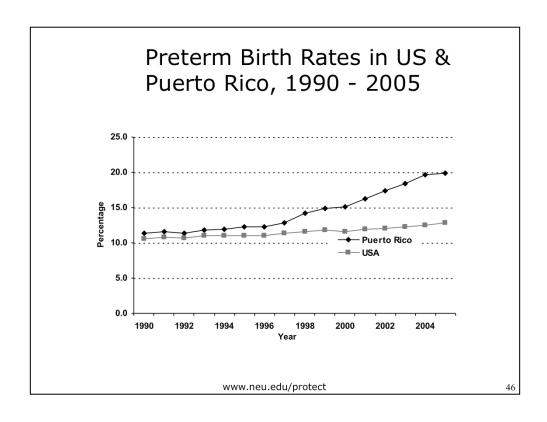
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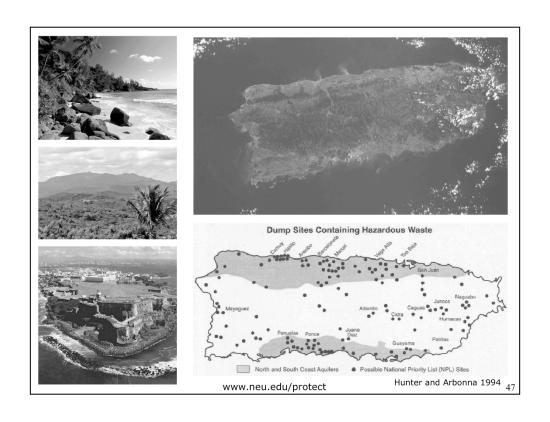
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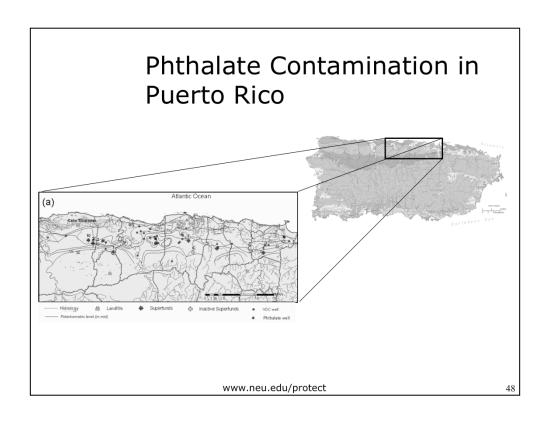
Preterm Birth Medical Consequences for Infant

- Leading cause of infant death
 - 19.7% of infant deaths
- Medical complications
 - Respiratory distress syndrome
 - Bleeding in the brain (intraventricular hemorrhage)
 - Nearly half of all congenital neurological defects (e.g., cerebral palsy)
- Chronic lung disease (bronchopulmonary dysplasia)
- Apnea
- Retinopathy of prematurity (can lead to blindness)
- Anemia
- Infections

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Phthalates and Fetal Growth, Birth Outcomes

- Latini et al. 2003, EHP (n = 84)
 - MEHP in cord blood inversely and significantly associated with decreased gestation length
- Whyatt et al. 2009, *Pediatrics* (n = 311)
 - Urinary DEHP metabolites inversely associated with gestation length
 - Highest MEHP quartile delivered 5 days earlier than lowest quartile
- Zhang et al. 2009, J Pediatr (n = 88 cases, 113 controls)
 - DEHP and DBP or metabolites in cord blood/meconium associated with dose-dependent increased odds for low birth weight
- Wolff et al. 2008, EHP (n = 404)
 - Urinary MEHP associated with increased gestation length
- Adibi et al. 2009, *Am J Epidemiol* (n = 284)
 - DEHP metabolites associated with increased gestation length

Meeker JD, Ferguson KK. Phthalates: Human Exposure and Related Health Effects. In: Schecter A, Gasiewicz T, eds. <u>Dioxins and Persistent Organic Pollutants: Health and Toxicity</u>, 3rd Edition. John Wiley & Sons, Hoboken, NJ; In press.

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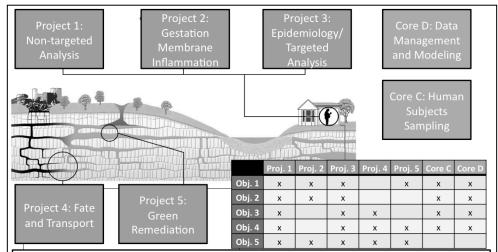
Phthalate Metabolites and Preterm Birth

Geometric mean and median $\mathbf{3}^{\text{rd}}$ trimester urinary phthalate metabolite concentrations in women with term or preterm births.

Phthalate	Geometric Mean		Median (25th, 75th percentile)		
Metabolite	Term (n=30)	Preterm (n=30)	Term (n=30)	Preterm (n=30)	p-value
MBP	38.1	89.9	33.4 (21.3, 74.0)	97.1 (56.0, 139)	0.005
MCPP	1.1	2.4	1.3 (0.5, 2.0)	2.3 (1.1, 4.9)	0.002
MBzP	2.3	5.2	2.9 (1.0, 5.2)	5.4 (2.6, 9.5)	0.01
MEP	112	204	108 (47.1, 224)	171 (69.4, 437)	0.1
MEHP	2.3	3.7	3.0 (0.6, 4.4)	4.3 (2.2, 7.1)	0.06
MEHHP	13.6	24.0	17.1 (6.2, 28.4)	28.7 (18.1, 37.5)	0.04
MEOHP	10.4	18.9	13.6 (5.0, 24.5)	20.8 (14.4, 25.5)	0.04
MECPP	29.7	51.2	38.2 (14.3, 53.8)	55.2 (39.2, 73.3)	0.02
Sum DEHP metab.	57.8	99.3	71.5 (26.8, 113)	112 (69.8, 135)	0.03

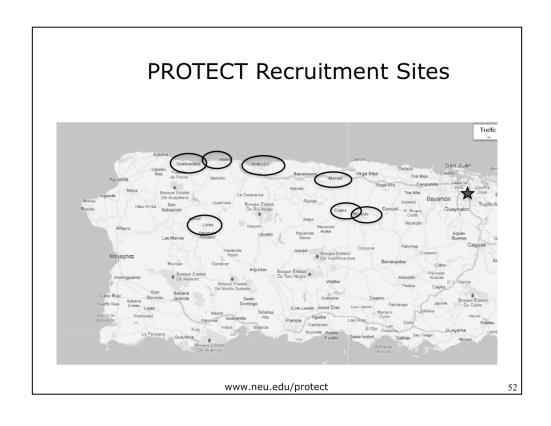
Meeker JD, Hu H, Cantonwine D, Loch-Caruso R, et al. Urinary phthalate metabolites in relation to preterm birth in Mexico City. *Environ Health Perspect*, 2009; 117:1587-2.

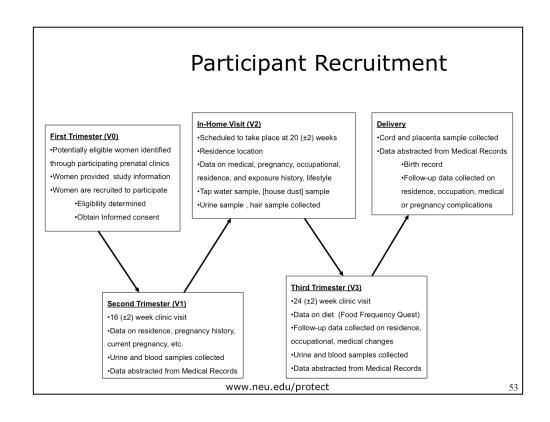
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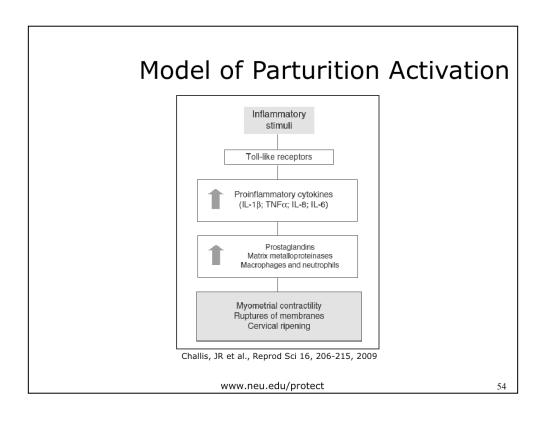


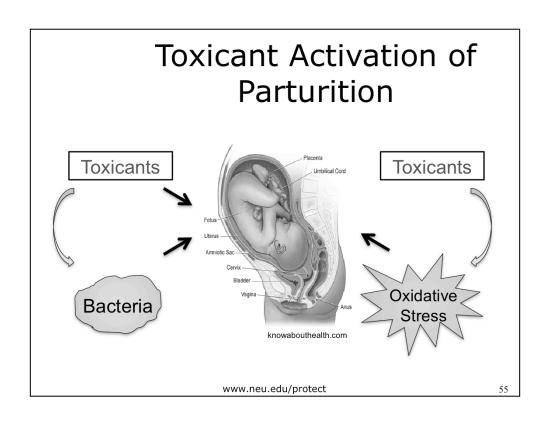
OBJECTIVES

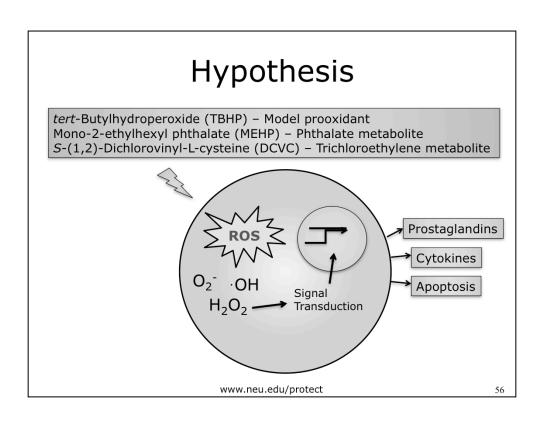
- 1. Examine the evidence that environmental contaminants contribute to preterm birth; identify the causative chemicals; and learn how to remediate these chemicals in karstic aquifers by a green process
- Build a better understanding of the potential role, mechanisms and relevance of pollution-induced oxidative stress in preterm birth
- 3. Discover and understand risk factors and their interactions for preterm birth by developing and mining an integrated, centralized, indexed biomedical and environmental data repository for Puerto Rico
- 4. Determine the effect of episodic transport on patterns of exposure through highly mobile karstic aquifers and develop adaptable remedial actions
- 5. Improve and apply non-targeted chemical analysis including bioassay-directed chemical analysis to biological samples and environmental samples

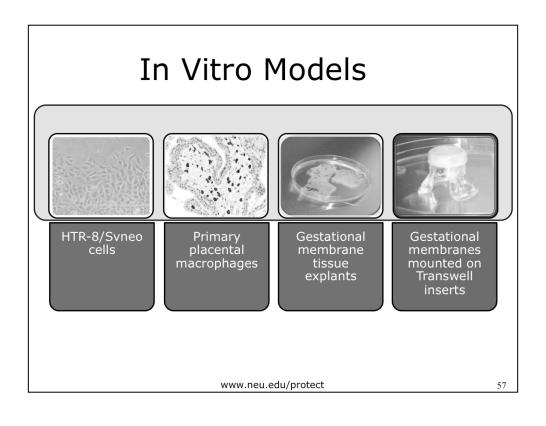


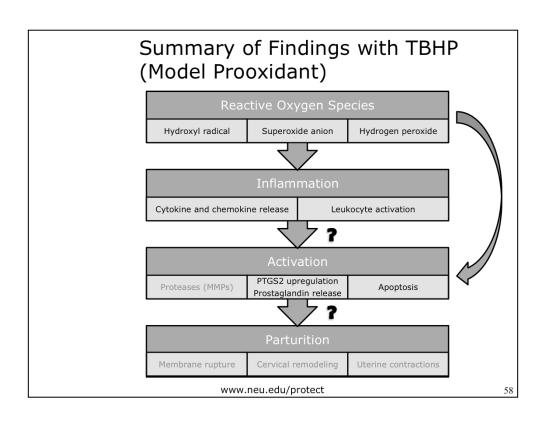


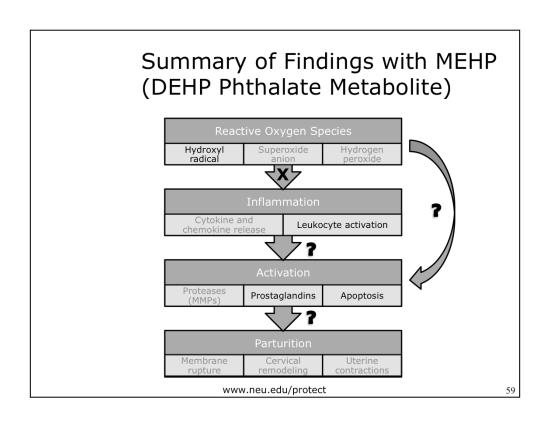


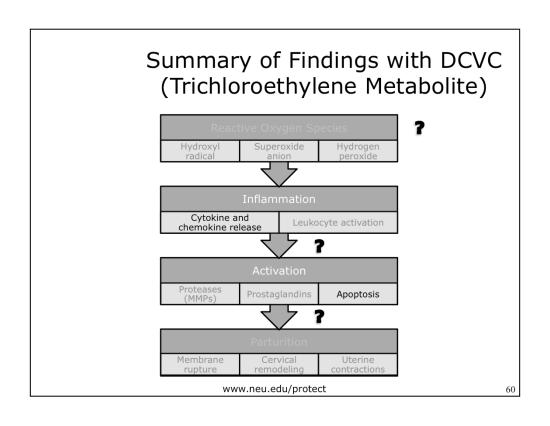












Oxidative Stress and Inflammation in US Population

- Used the NHANES databases
 - Publicly available data collected by CDC
 - Exploratory analyses of phthalate metabolite associations with potential response biomarkers
- Putative biomarkers of oxidative stress
 - NHANES 1999-2006 database
 - Bilirubin (a potent antioxidant), inverse association
 - Gamma glutamyltransferase (GGT)

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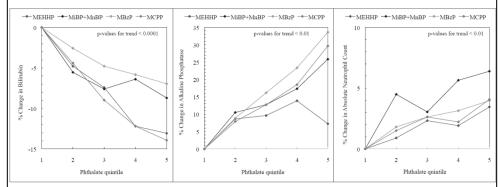
Oxidative Stress and Inflammation

- Putative biomarkers of inflammation (positive associations)
 - NHANES 1999-2006 database
 - C-reactive protein (CRP)
 - Alkaline phosphatase (ALP)
 - Absolute neutrophil count (ANC)
 - Ferritin
 - Fibrinogen

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Some phthalate metabolites were associated with markers of increased oxidative stress & inflammation

Selected results



Ferguson KK, Loch-Caruso R, Meeker JD. Exploration of oxidative stress and inflammatory markers in relation to phthalate metabolites: NHANES 1999-2006. *Environ Sci Technol* 2012. 46(1):477-85.

Ferguson KK, Loch-Caruso R, Meeker JD. Urinary phthalate metabolites in relation to biomarkers of inflammation and oxidative stress: NHANES 1999-2006. *Environ Res* 2011. 111(5):718-26.

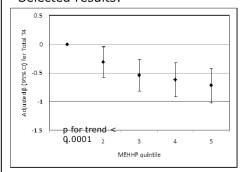
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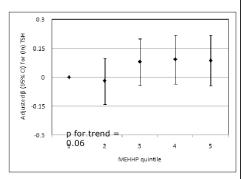
DEHP metabolites were associated with changes in thyroid hormone biomarkers



- NHANES 2007-08
- Decreased T4, T3, & thyroglobulin
- Increased TSH

Selected results:





Thyroglobulin

Meeker JD, Ferguson KK. Relationship between Urinary Phthalate and Bisphenol A Concentrations and Serum Thyroid Measures in U.S. Adults and Adolescents from NHANES 2007-08. Environ Health Perspect, 119(10):1396-402.

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Summary



- Phthalates may have a role in preterm birth
- Experimental and human observational data support potential mechanistic links
 - may have relevance for other environmental contaminants and human health effects
- Multidisciplinarity is needed to address complex environmental health challenges
 - NIEHS Superfund Research Program Centers facilitate these partnerships

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Resources & Feedback

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- Please complete the <u>Feedback Form</u> to help ensure events like this are offered in the future

