



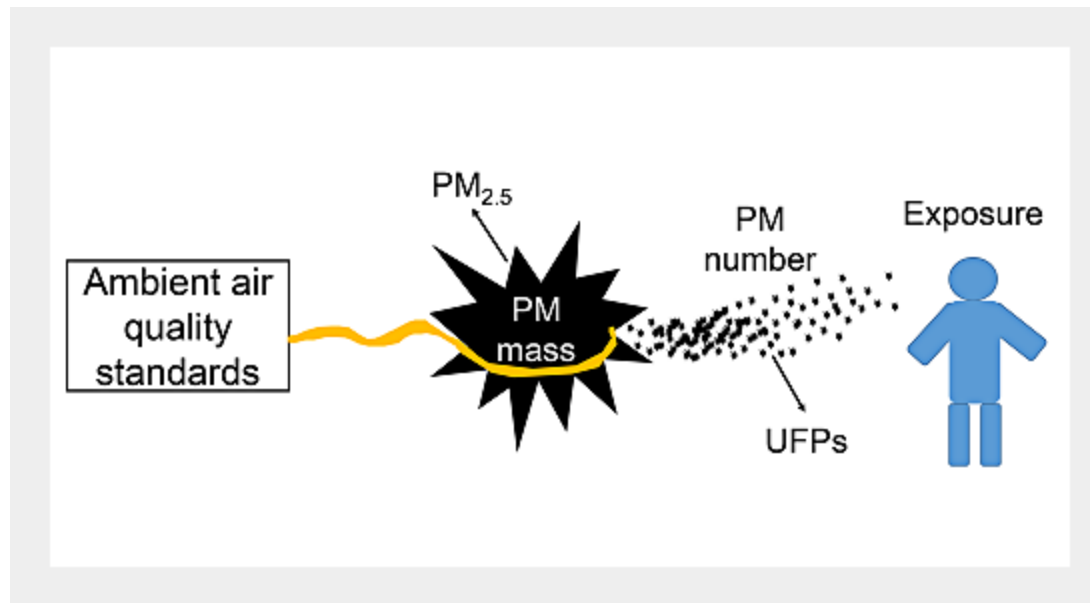
Associations between PM_{2.5} components, brake and tire wear markers, ultrafine particles, and childhood cancers in Canada

Eric Lavigne, PhD



Outdoor particles – Heterogeneity

- Outdoor fine particulate matter (PM_{2.5}) and UFPs are a heterogeneous mix



- Most epidemiological studies only contrast PM_{2.5} and UFP concentrations



PM2.5, UFPs & pediatric cancer development



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Environment International

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Maternal exposure to ambient air pollution and risk of early childhood cancers: A population-based study in Ontario, Canada

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PM2.5, UFPs & pediatric cancer development

RR for associations between PM2.5 and incidence of selected childhood cancers

Cancer site	Obs. cases	PM _{2.5} (IQR=2.9 µg/m ³)		
		Crude ^a HR (95% CI)	Model 1 ^b HR (95% CI)	Model 2 ^c HR (95% CI)
ALL	365	1.04 (0.91-1.18)	1.05 (0.91-1.22)	1.03 (0.88-1.20)
Astrocytoma	88	1.14 (0.88-1.47)	1.38 (1.01-1.88)	1.35 (1.00-1.85)
Wilms tumour	88	1.10 (0.84-1.44)	1.17 (0.86-1.59)	1.20 (0.88-1.64)

a Unadjusted model.

b Model adjusted for maternal age at delivery, infant sex, parity, year of birth, census tract median family income, census tract proportion of population who are visible minority and census tract proportion of the adult female population aged 25-64 years old who completed postsecondary education.

c Additional adjustment for maternal cigarette smoking during pregnancy using multiple imputation



PM2.5, UFPs & pediatric cancer development



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Ambient ultrafine particle concentrations and incidence of childhood cancers

Eric Lavigne^{a,b,*}, Isac Lima^{c,d}, Marianne Hatzopoulou^e, Keith Van Ryswyk^a, Aaron van Donkelaar^{f,g,h}, Randall V. Martin^{f,g,h}, Hong Chen^{i,j,k,l}, David M. Stieb^{b,m}, Eric Crichton^{c,n}, Richard T. Burnett^{b,i}, Scott Weichenthal^{a,o}

Table 4

Hazard ratios^a (HR) and 95% confidence intervals (95% CI) for the associations between UFPs (per 10,000/cm³) over specific periods and childhood cancer risk ≤ 6 years of age with additional adjustment for PM_{2.5} and NO₂.^b

Cancer site	1st trimester	2nd trimester	3rd trimester	Entire pregnancy	Childhood exposure
UFPs + NO ₂					
All cancers	1.11 (1.02–1.21)	1.00 (0.88–1.07)	0.96 (0.89–1.06)	1.00 (0.91–1.12)	0.97 (0.92–1.03)
ALL	1.23 (0.87–1.74)	0.90 (0.58–1.27)	1.07 (0.78–1.44)	1.06 (0.77–1.42)	1.04 (0.75–1.40)
Astrocytoma	0.49 (0.18–1.34)	0.80 (0.55–1.45)	1.00 (0.64–1.55)	0.90 (0.51–1.48)	0.71 (0.46–1.10)
Neuroblastoma	0.91 (0.58–1.43)	0.98 (0.70–1.31)	0.88 (0.64–1.12)	0.81 (0.59–1.11)	1.11 (0.80–1.54)
UFPs + PM _{2.5}					
All cancers	1.10 (1.01–1.19)	0.97 (0.86–1.07)	0.91 (0.82–1.01)	0.99 (0.88–1.11)	0.96 (0.88–1.09)
ALL	1.14 (0.95–1.36)	0.87 (0.60–1.27)	1.07 (0.79–1.46)	1.03 (0.75–1.44)	0.95 (0.72–1.28)
Astrocytoma	0.65 (0.37–1.13)	0.85 (0.55–1.47)	1.00 (0.61–1.50)	0.82 (0.51–1.50)	0.78 (0.50–1.18)
Neuroblastoma	1.05 (0.77–1.49)	1.01 (0.73–1.35)	0.90 (0.69–1.18)	0.98 (0.71–1.32)	1.12 (0.79–1.54)
UFPs + PM _{2.5} + NO ₂					
All cancers	1.13 (1.03–1.22)	1.01 (0.89–1.08)	0.97 (0.90–1.07)	1.01 (0.92–1.13)	0.97 (0.92–1.04)
ALL	1.22 (0.85–1.72)	0.90 (0.58–1.28)	1.07 (0.78–1.45)	1.06 (0.76–1.43)	1.04 (0.74–1.41)
Astrocytoma	0.55 (0.28–1.07)	0.85 (0.53–1.47)	1.00 (0.60–1.58)	0.91 (0.52–1.49)	0.75 (0.48–1.12)
Neuroblastoma	0.95 (0.63–1.45)	0.98 (0.70–1.31)	0.89 (0.65–1.13)	0.88 (0.65–1.17)	1.12 (0.81–1.55)

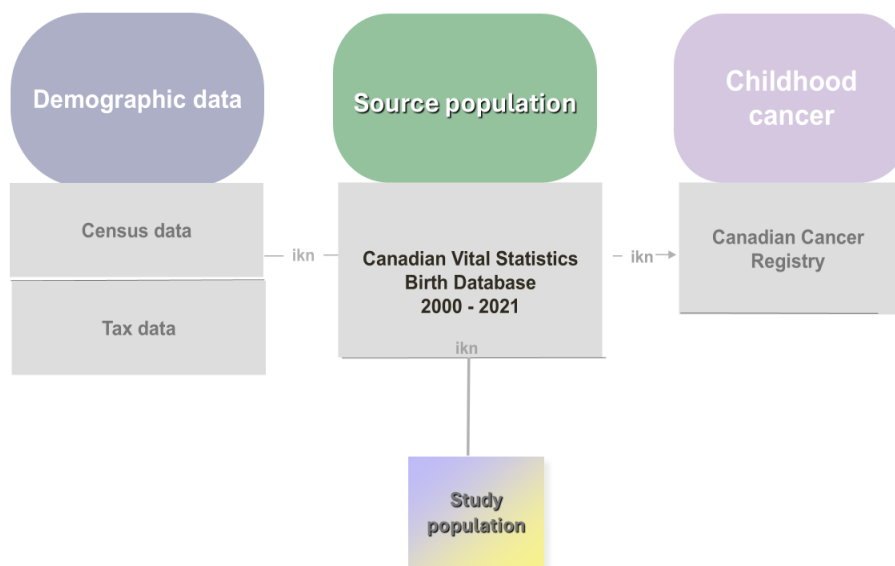
Objective

**EVALUATE THE ASSOCIATIONS BETWEEN
PRENATAL & EARLY LIFE EXPOSURES TO
PM_{2.5} COMPONENTS, BRAKE & TIRE WEAR
MARKERS, ULTRAFINE PARTICLES AND
CHILDHOOD CANCER RISK**



Methods

- Study Design: Population-based retrospective cohort study
 - » Canadian Vital Statistics Birth Database linked to Canadian Cancer Registry from 2000 to 2021

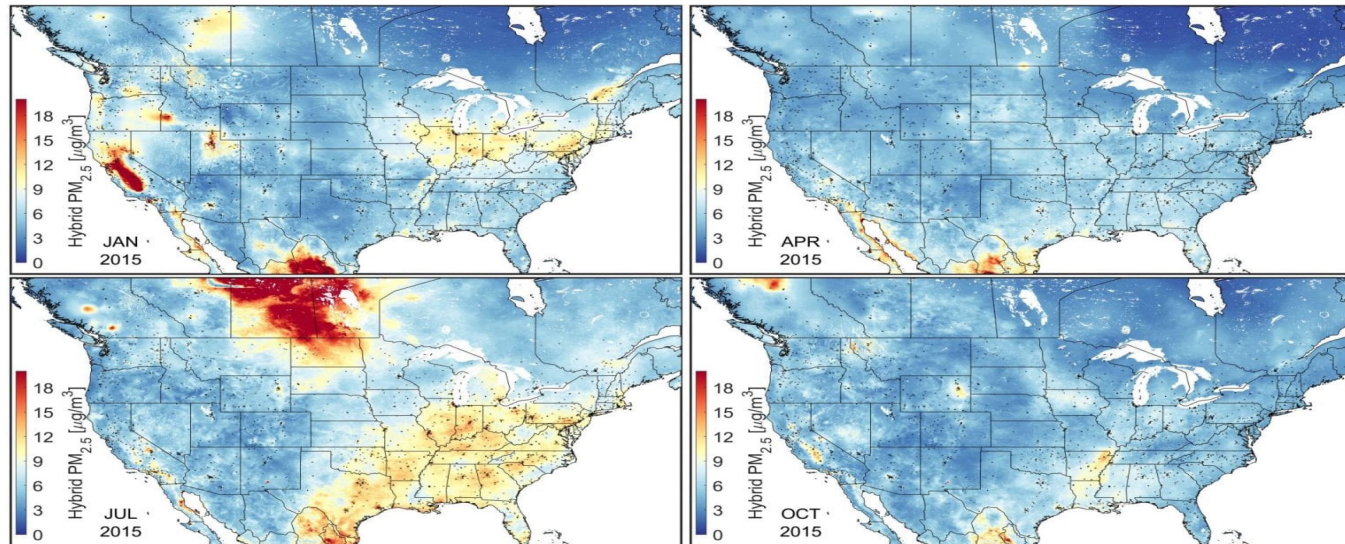


(ikn: encrypted health card numbers)



Exposure data

Bi-weekly PM_{2.5} total mass and component (SO₄, NH₄, NO₃, SS, BC, dust, OM) estimates at 1x1km derived from satellite-based estimates with geographically weighted regression (2000 to 2021)

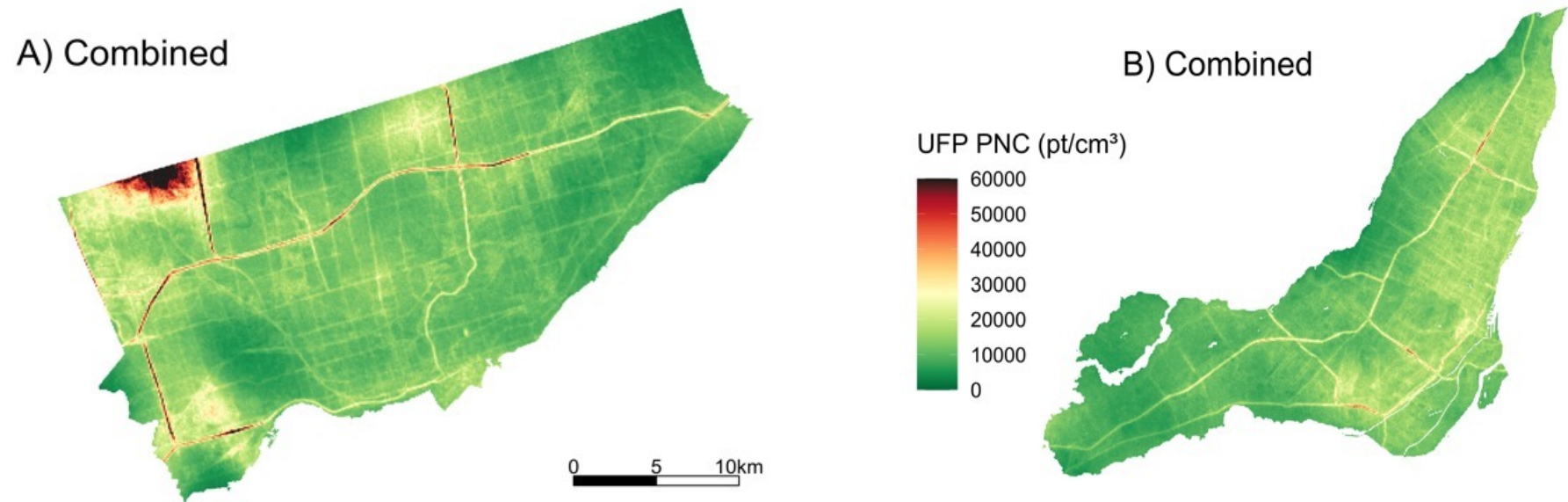


Long term measure of Barium [Ba] as a marker of brake dust and Zinc [Zn] as a tire and road wear marker (available for 40 sites across Canada) (data measured from 2016 to 2018)



Exposure data

Model predictions of within-city spatial variation in median daily outdoor UFP levels UFP number concentration for two largest cities in Canada (Toronto and Montreal)



Statistical analysis

- » Cox proportional hazards models assessing risk until 14 years of age
- » Distributed Lag Non-Linear Models (DLNM) extension accounting for gestational weekly exposures for PM components and UFPS
- » Long term measures for Ba and Zc
- » Hazard ratios (HR) presented per IQR increase
- » Covariates: maternal age, parity, infant sex, birth weight, area-level socioeconomic variables, geographic location (rural/urban), season of birth, year of birth
 - Maternal smoking only for the province of Ontario



Results

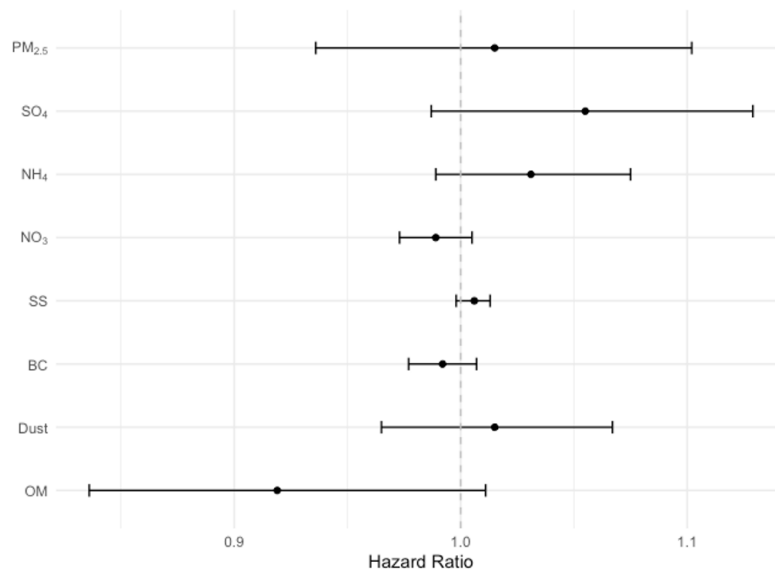
Study population (2000 – 2021)

Variable	Total cohort - all births	All pediatric cancer cases	Acute Lymphoid Leukemia	Acute Myeloid Leukemia	Astrocytoma
N	8,383,345	22,230	5,240	960	1,780
Maternal age at delivery, mean years (SD)	29.52 (5.49)	29.49 (5.53)	29.56 (5.54)	30.39 (5.70)	29.11 (5.48)
Male	51	54	56	52	51
Female	49	46	44	48	49
PM 2.5 during pregnancy, mean (SD)	7.57 (2.22)	7.87 (2.14)	7.79 (2.10)	7.61 (2.22)	7.74 (2.14)

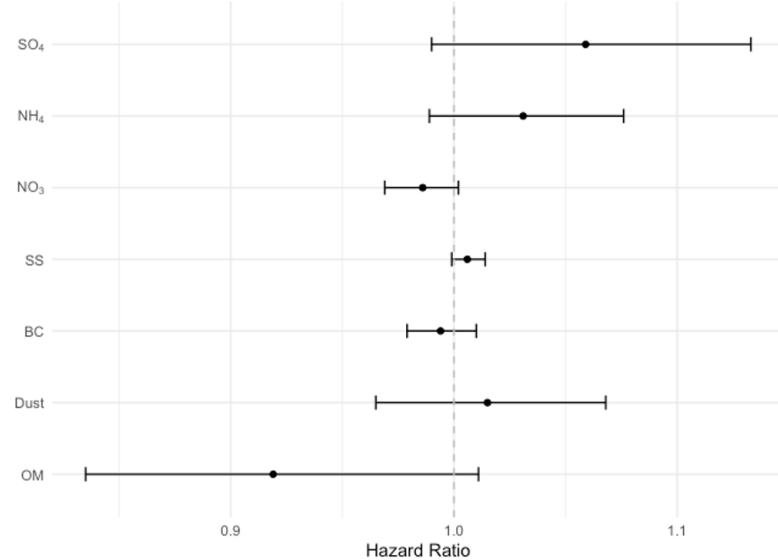


Results - HRs for gestational exposures to PM components on the risk of ALL

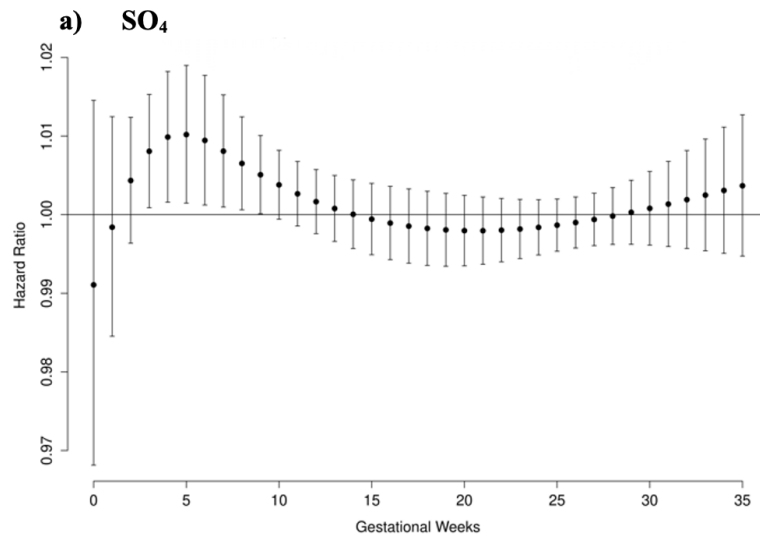
a) Single-pollutant models without residual adjustments



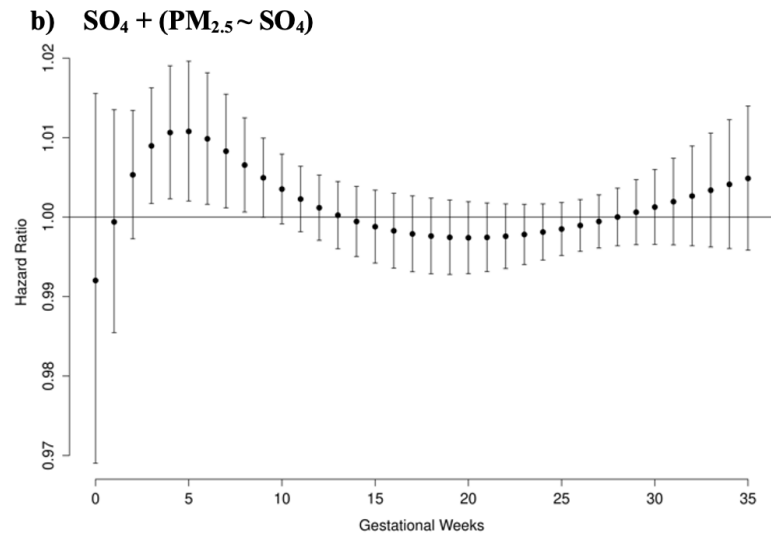
b) Single-pollutant models with residual adjustments



Results - HRs for gestational exposures on the risk of leukemia

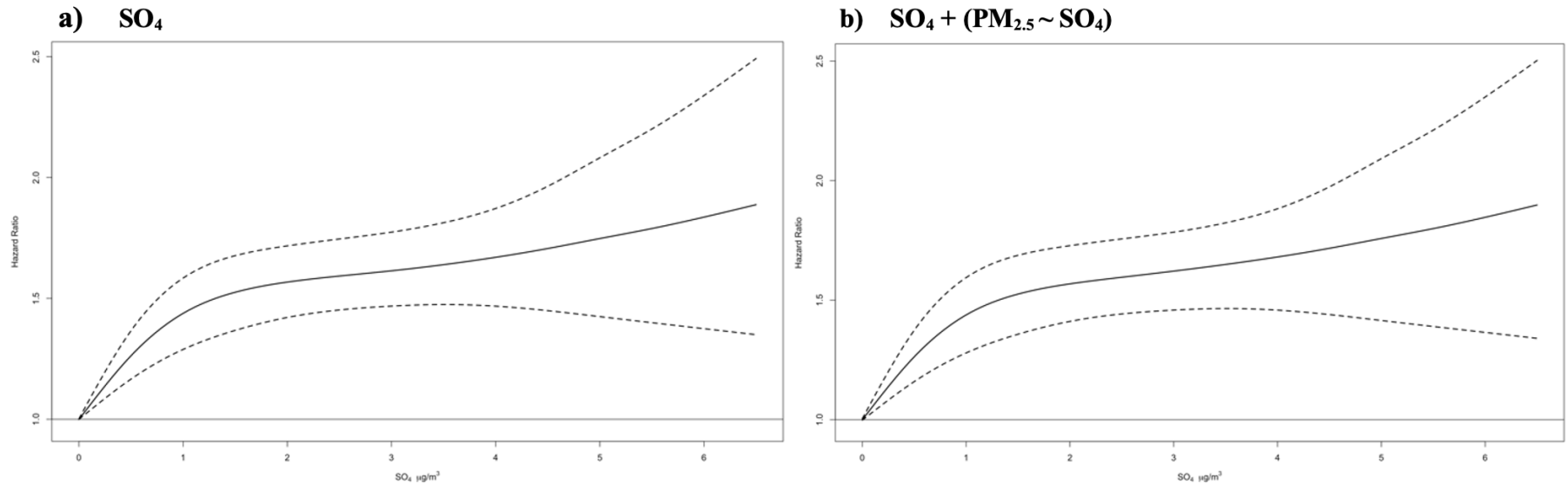


HR= 1.050 (1.007-1.095)

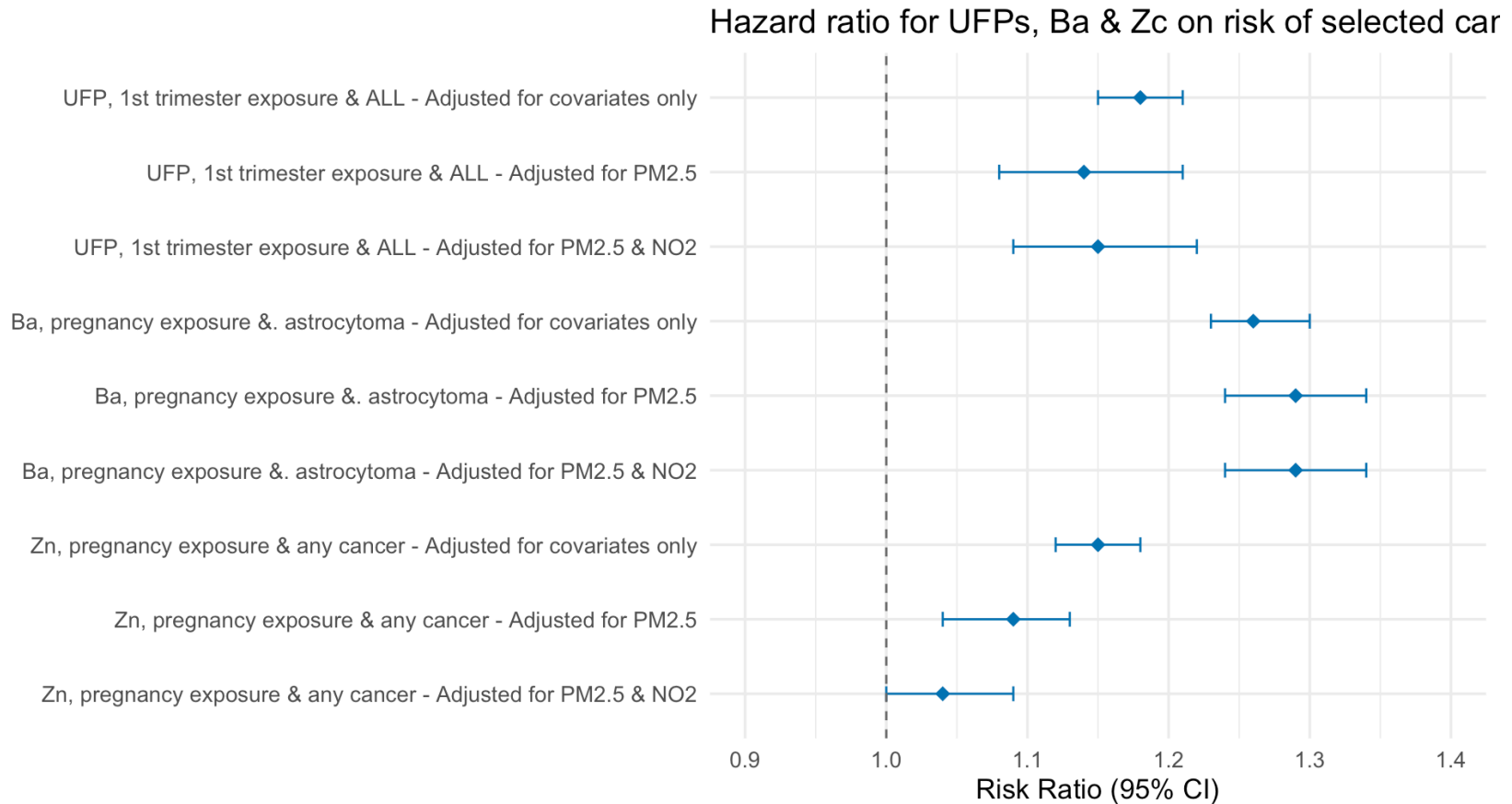


HR= 1.052 (1.009- 1.097)

Results - SO_4 concentration-response curve on the risk of leukemia

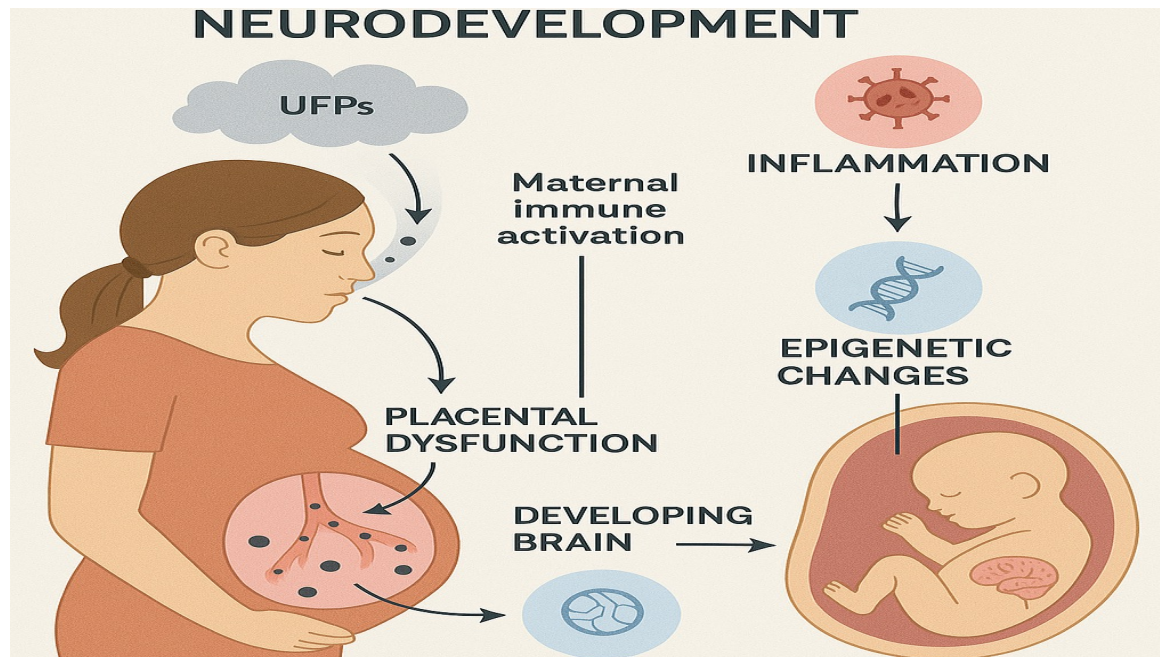


Results – UFPs, Ba & Zc on the risk of selected cancer types



Discussion

- SO_4 & UFPs were associated with ALL
 - » Early gestation (first few weeks) appeared to be a sensitive period
- Barium was associated with risk of astrocytoma



Conclusion

- Future studies should investigate components with finer temporal resolution models
- UFPs & particle size and childhood cancers should be further studied
- Ongoing research investigating childhood cancer survival, other cancer incidence subtypes & childhood exposures



THANK YOU

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