



Exposure and Risk Information in Policy Assessment



Dr. Zachary Pekar

Office of Air Quality, Planning and Standards, OAR

April 11, 2012



Presentation Objectives

- Summarize background and key aspects of 2008 risk/exposure assessment and associated results
- Recognize areas of 2008 assessment and recent information for consideration in Policy Assessment

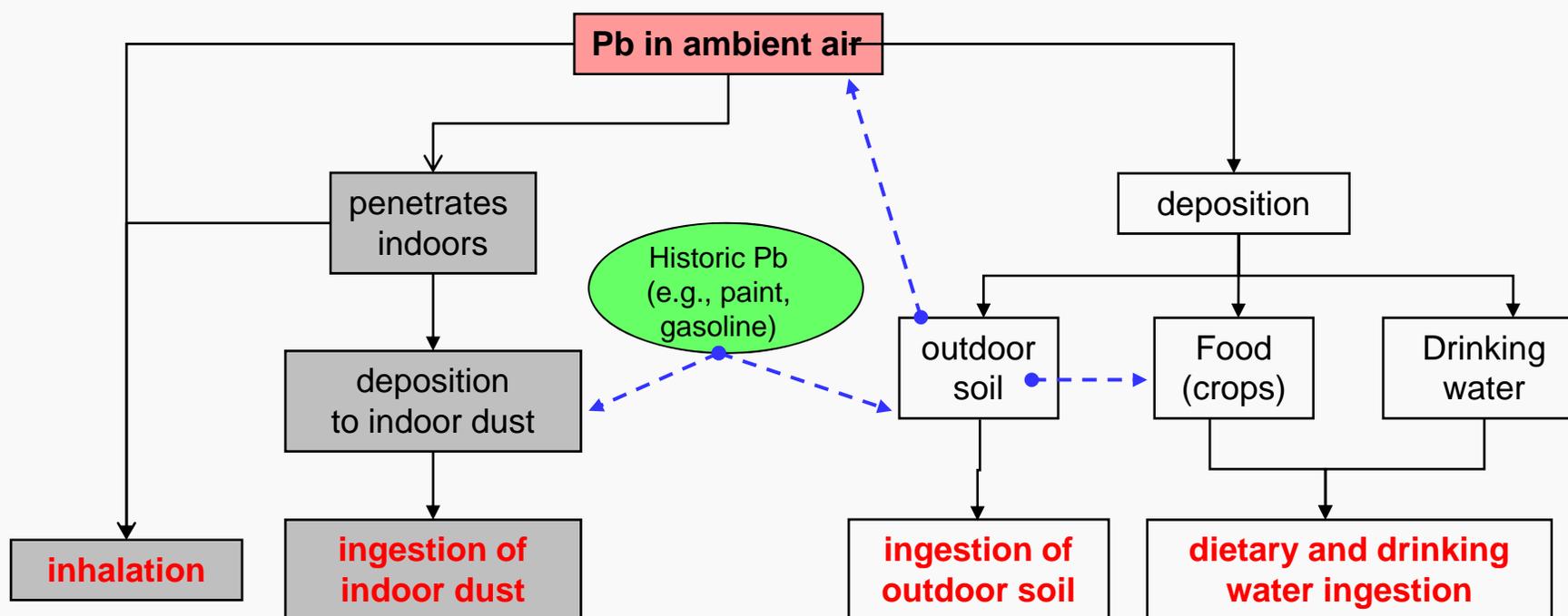


Background - Lead (Pb) Air Pollution

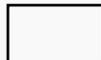
- Pb occurs naturally and is emitted by many anthropogenic sources
 - Highest levels generally near lead smelters
- Pb is generally emitted into the air in the form of particles
 - Can end up in water, soil and surface dust
- People are exposed by inhaling air Pb or ingesting Pb that has settled onto surfaces or soils
 - Ingestion is the main route of human exposure to air Pb
 - Children are more likely to be exposed to Pb because they exhibit greater "hand-to-mouth" activity
 - Once in the body, Pb is rapidly absorbed into the bloodstream
- Pb is persistent
 - People can be exposed to Pb emitted just yesterday or years ago



Human Exposure Pathways for Air-related Pb



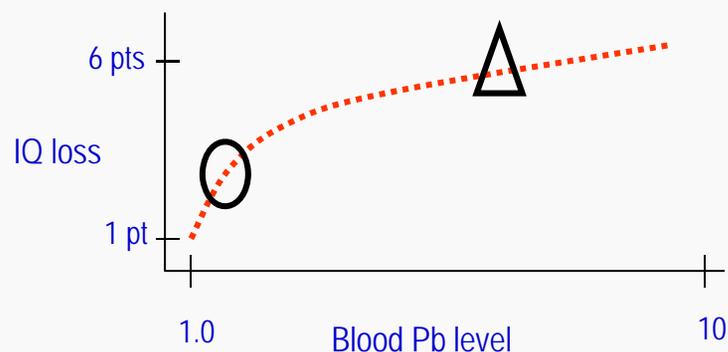
 Model links change in ambient air Pb to change in risk

 Pathways assessed; but model does not link change in ambient air Pb to change in risk.



Estimation of Air-related Pb Exposure/Risk

- Objective for assessment was to evaluate health impact (IQ loss) associated with Pb emitted into ambient air
- However, we lack epidemiological studies linking ambient air Pb levels to health impacts (IQ)
 - Do have studies linking biometric (blood Pb levels) to health IQ loss
- Therefore, needed to estimate link between ambient air Pb and blood Pb levels
- Non-linearity in Pb exposure modeling and IQ concentration-response called for modeling of **total Pb** exposure and risk followed by pathway apportionment





Multimedia Case-study Approach

- Multimedia, multipathway probabilistic population assessment of exposure and risk to young children
- Two types of population exposures represented
 - Highly exposed to air-related Pb
 - General urban case study (uniform air concentration, uniform population density)
 - Primary lead smelter case study (small area closest to smelter)
 - Broad distribution of air-related exposures
 - Location-specific urban case studies
 - Large majority of each population in areas with air Pb well below each standard assessed
 - Only subset (in small sub-areas) exposed at the standard assessed



Risk Assessment – Different Case Studies

General urban case study

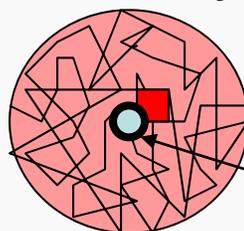


Small neighborhood with ambient air levels at standard



One single exposure zone (uniform ambient air Pb level and demographics)

Primary Pb smelter case study



Pb smelter facility

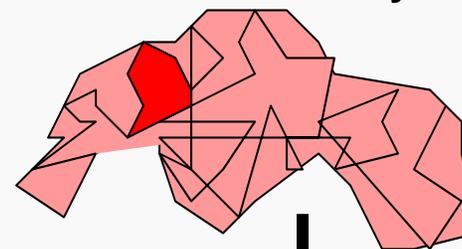


2km radius residential area surrounding large Pb smelter with varying ambient air Pb levels and demographics



Each US Census block is a separate exposure zone (varying ambient air Pb levels and demographics across study area)

Location-specific urban case study



5-20 km



Larger urban area with varying ambient air Pb levels and demographics





Different Methods for Characterizing Key Media Concentrations Across Case Studies

- Ambient air Pb (spatial pattern for different air quality scenarios)
 - Ambient monitoring data (location-specific urban case studies)
 - Air dispersion modeling (primary Pb smelter)
 - Uniform concentration across study area (general urban case study)
- Indoor dust Pb
 - Site-specific regression models linking ambient air Pb to indoor dust Pb levels (primary Pb smelter)
 - Sophisticated mechanistic model (urban case studies)
- Outdoor soil Pb
 - Site-specific measurements (primary Pb smelter)
 - National/regional data (urban case studies)



Results Reflect Complex Multi-Dimensional Nature of Analysis

- For each case study, air-related IQ loss in children estimated to fall within ranges that reflect:
 - Uncertainties in characterizing different air-related exposure pathways
 - Pathways responding most quickly to air Pb (inhalation, ingestion of indoor dust)
 - Pathways responding more slowly to changes in air Pb (soil ingestion)
 - Pathways for which response to air Pb is more complex (diet and drinking water ingestion)
 - The assessment's multiple dimensions, such as:
 - Multiple concentration-response functions for lowest blood Pb levels
 - Different dust Pb modeling approaches



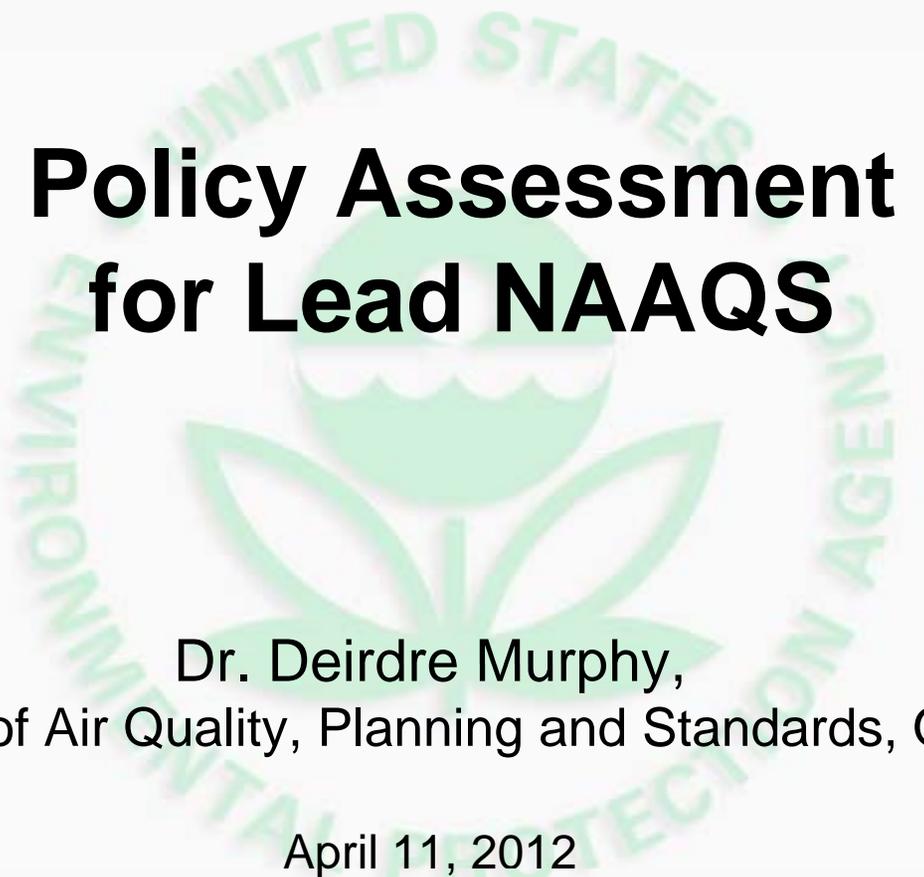
Interpreting Exposure/Risk Estimates and Associated Uncertainties

Modeling element	New evidence	Application in enhancing understanding of risk model
Ambient air Pb (spatial variation)	No new data available to enhance characterization of urban gradients	
Soil and drinking water Pb	Updated information on media concentrations – but no new data on correlations between pathways	Although lack of improved data on correlations limits utility of updated soil/drinking water data, we can speak to potential direction of impact on risk estimates
Simulating indoor dust Pb linked to ambient air	New data on cleaning efficiency	Although data do not support quantitative refinement of dust model, they improve our understanding of uncertainty related to dust modeling
Pathway apportionment of Pb exposure	NHANES and NHEXAS studies on pathway/source contributions to child PbB	Although studies do not cover ambient air link to indoor dust Pb levels (critical factor), we can assess potential implications for risk estimates
Predicting population distribution of PbB levels (IEUBK and GSD)	No significant advancements in IEUBK model, however is updated information on PbB variability (refinement of GSD)	Although new GSD information is limited by lack of data on pathway correlations producing “higher” PbB levels, we can consider implications to total IQ loss estimates.
IQ loss modeling in children	New studies not providing information on appreciably different C-R relationship (in addition, evidence on other endpoints does not support development of C-R functions at this time)	



Exposure/Risk Based Considerations

- Implications of newly available information on exposure/risk estimates
- Current understanding of air-related exposure situations
 - Consider any additional situations of interest in light of case studies from 2008 assessment (situations represented and associated range of results)
- Potential public health implications of exposure/risk information



Policy Assessment for Lead NAAQS

Dr. Deirdre Murphy,
Office of Air Quality, Planning and Standards, OAR

April 11, 2012



First Draft Policy Assessment

- Purpose and Background
- Ambient Air Lead
 - Environmental Pathways, Sources, Ambient Air Quality, Ambient Air Lead in Other Media, Ambient Monitoring Considerations
- Health Effects and Exposure/Risk Information
 - Blood Lead as Biomarker, Nature of Effects, At-Risk Populations
 - Exposure and Risk
 - Public Health Implications
- Review of the Primary Standard for Lead (Adequacy)
- Welfare Effects and Exposure/Risk Information
- Review of the Secondary Standard for Lead (Adequacy)



Schedule for the Current Review

Major Milestones		Projected Completion Date	Projected CASAC Review Date
Workshop to Discuss Key Policy-Relevant Issues		May 2010	
Integrated Review Plan	Draft	March 2011	May 5, 2011
	Final	Nov 2011	
Integrated Science Assessment	First Draft	May 2011	July 20-21, 2011
	Second Draft	Feb 2012	April 10-11, 2012
	Final	July 2012	
Risk/Exposure Assessment	Planning Document	June 2011	July 21, 2011
Policy Assessment (PA)	First Draft PA	Sept 2012	Oct 2012
	Second Draft PA	Feb 2013	March 2013
Rulemaking	Final PA	June 2013	
	Proposed Rulemaking	Jan 2014	
	Final Rulemaking	Nov 2014	



Current Pb NAAQS Review Team

Office of Air Quality Planning and Standards

Health and Environmental Impacts Division

- Dr. Deirdre Murphy, Team Lead
- Dr. Zachary Pekar
- Dr. Pradeep Rajan
- Dr. Travis Smith
- Ms. Ginger Tennant

Dr. Karen Martin, Ambient Standards Group Leader
Dr. Bryan Hubbell, Risk Benefits Group Leader

Ms. Lydia Wegman, Division Director

Air Quality Assessment Division

- Mr. Kevin Cavender, air monitoring
- Mr. Mark Schmidt, air quality analysis
- Dr. Halil Cakir, air quality analysis
- Mr. Josh Drukenbrod, emissions inventory

Mr. Lewis Weinstock, Ambient Air Monitoring Group Leader
Mr. Pat Dolwick, Air Quality Analysis Group Leader
Mr. Marc Houyoux, Emissions Inventory & Analysis Group Leader

Mr. Chet Wayland, Division Director

National Center for Environmental Assessment

RTP Division

- Dr. Ellen Kirrane, Team Lead
- Dr. James Brown
- Dr. Jean-Jacques Dubois
- Mr. Allen Davis
- Dr. Tara Greaver
- Dr. Erin Hines
- Dr. Dennis Kotchmar
- Dr. Meredith Lassiter
- Dr. Qingyu Meng*
- Dr. Stephen McDow
- Dr. Elizabeth Owens
- Dr. Molini Patel
- Dr. Jennifer Richmond-Bryant
- Dr. David Svendsgaard
- Dr. Lindsay Stanek
- Dr. Lisa Vinikoor-Imler

Dr. Mary Ross, Branch Chief
Ms. Debra Walsh, Deputy Director, NCEA-RTP

Dr. John Vandenberg, Director, NCEA-RTP Division

* Oak Ridge Institute for Science and Education



Appendix - Background Material



Historical Background

- 1976 – Lead added to list of criteria pollutants
- 1978 – Primary and secondary NAAQS set
 - Secondary standard set identical to primary
- 1980s-90 – NAAQS Review
 - Criteria Document – 1986, with 1990 supplement
 - No change to standards
- 1991 - Agency-wide Integrated Lead Strategy
 - NAAQS enforcement, soil abatement, waste policy, drinking water, products, recycling, research
- 2005 – 2008 NAAQS review
 - Criteria Document (2006), Screening Ecological Risk Assessment (2006), Health Risk Assessment (2007), Staff Paper (Policy Assessment) (2007)
 - Rulemaking notices 2007-2008 → Substantial revisions to standards
- Current NAAQS review



For More Information on Pb NAAQS

- Basic information on Pb NAAQS (fact sheets, etc)
 - <http://www.epa.gov/air/lead/>
- Documents for current review
 - http://www.epa.gov/ttn/naaqs/standards/pb/s_pb_index.html
- Documents from review completed in 2008
 - http://www.epa.gov/ttn/naaqs/standards/pb/s_pb_cr.html