

*EPA Contributions to CDC
Environmental Public Health
Tracking (EPHT) Network*

Activities
and
Next Steps

May 2007

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US EPA

Office of Research and Development

Briefing Purpose

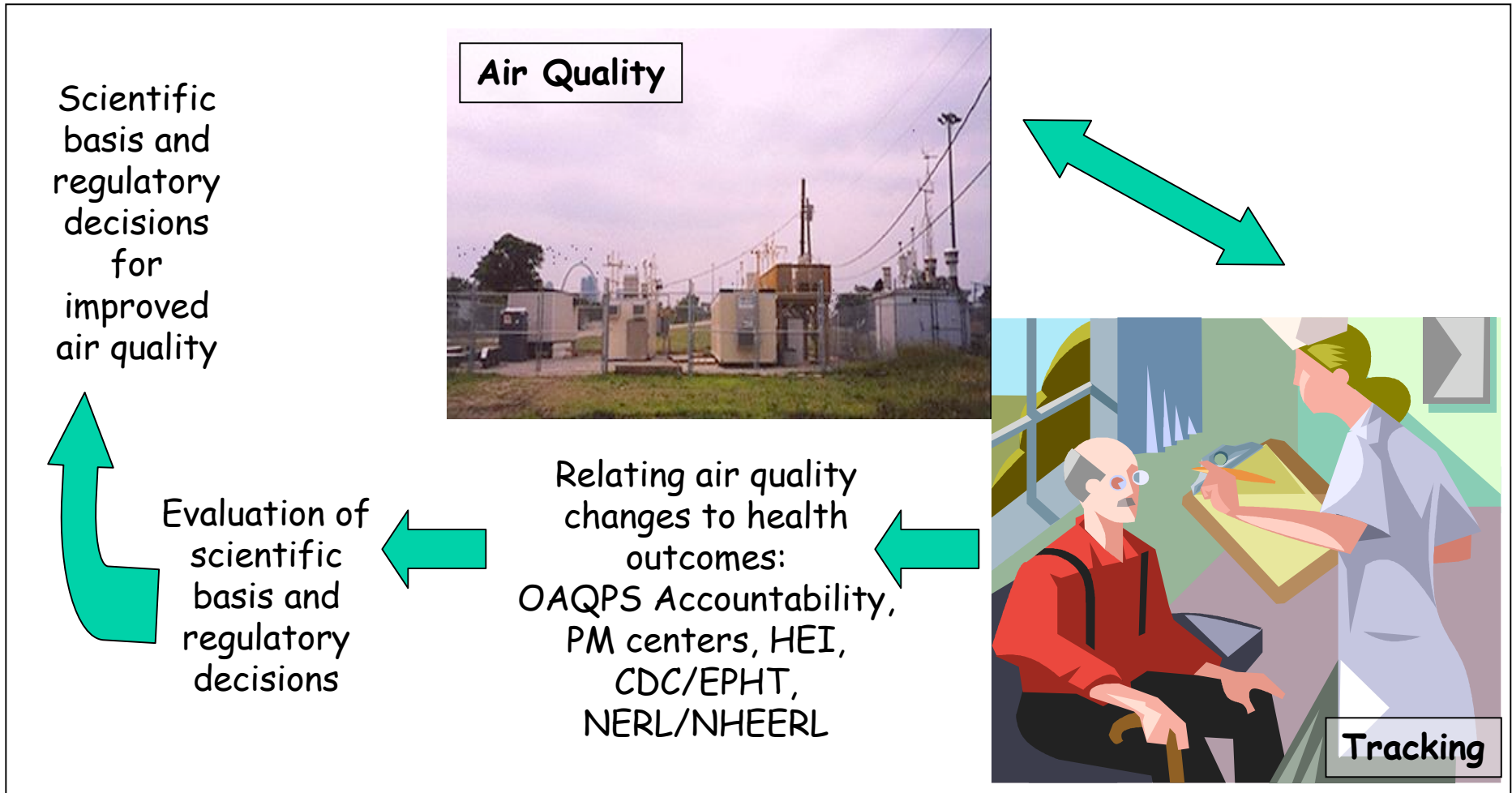
Provide background on EPA-CDC collaborative activities on EPHT

Describe air quality data being developed by EPA for use in EPHT



Overview

ORD & OAQPS will be developing air quality measures for CDC/others.

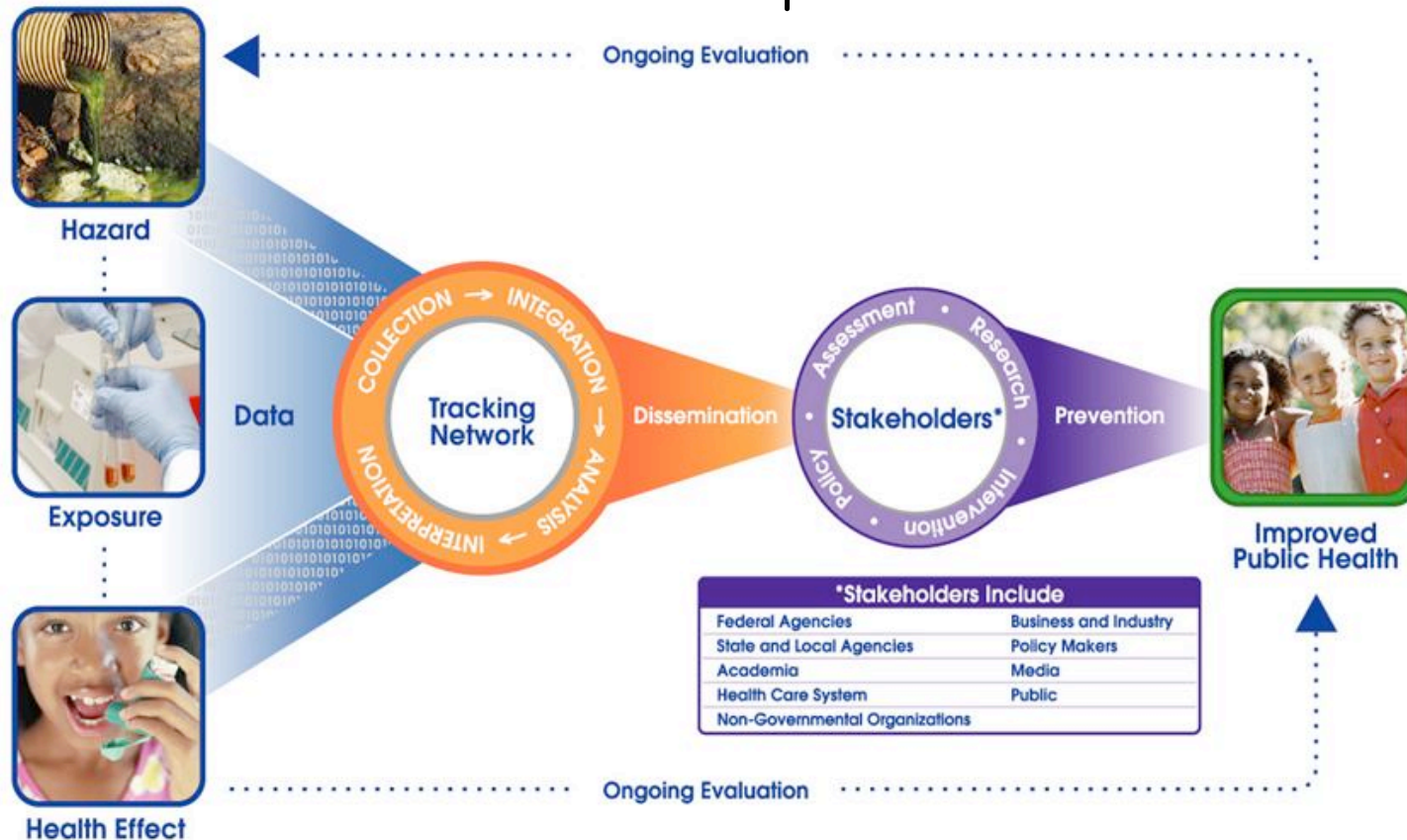


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ENVIRONMENTAL PUBLIC HEALTH TRACKING

National Network Implementation Plan



***Stakeholders Include**

Federal Agencies	Business and Industry
State and Local Agencies	Policy Makers
Academia	Media
Health Care System	Public
Non-Governmental Organizations	



DEPARTMENT OF HEALTH AND HUMAN SERVICES
CENTERS FOR DISEASE CONTROL AND PREVENTION
SAFER • HEALTHIER • PEOPLE



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Synopsis of Main EPA-CDC Activities

- EPA-CDC partnerships -
 - Existing MOU between EPA and CDC
 - Connections between EPA Report on the Environment & CDC Indicators
 - PHASE (Public Health Air Surveillance Evaluation) Project
- In PHASE, EPA engaged pilot projects with CDC and State public health agencies to link air quality data with health outcome data.
- PHASE implementation being developed through the EPA's Advanced Monitoring Initiative project
- CDC and EPA have discussed an IAG to operationalize developing, delivering and studying air-related exposure measures.
 - Resources from CDC to EPA for air quality data.
 - Specific working relationships established through IAG to define routine operations and additional research collaborations.



Public Health Air Surveillance Evaluation



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PHASE Partners and Initial Outcomes

- Partner states - Maine, New York , Wisconsin
- PHASE products/outcomes:
 - EPA (& state) investigation of novel air quality estimating technique - EPA delivered monitor, CMAQ and fused AQ data
 - Study of "case-crossover" method with "how to" guide
 - Multi-state comparisons of AQ-health associations
 - Interactions with state public health agencies - Example of effective interagency collaboration
- Associations (preliminary) between AQ (8-hour O₃ and PM_{2.5}) and asthma, and AQ (PM_{2.5}) and myocardial infarction through case-crossover analyses



What did EPA provide?

- Air quality data for Maine, New York and Wisconsin (2001):
 - Ozone and PM_{2.5} ambient data (with training)
 - CMAQ prediction at 36km
 - Eastern U.S. 36 km gridded AQ surfaces - interpolated and "statistically combined" estimates
 - Eastern U.S. 12 km gridded AQ surfaces - interpolated and "statistically combined" estimates
- Support on development of health analyses and interpretation of associations between AQ and health data



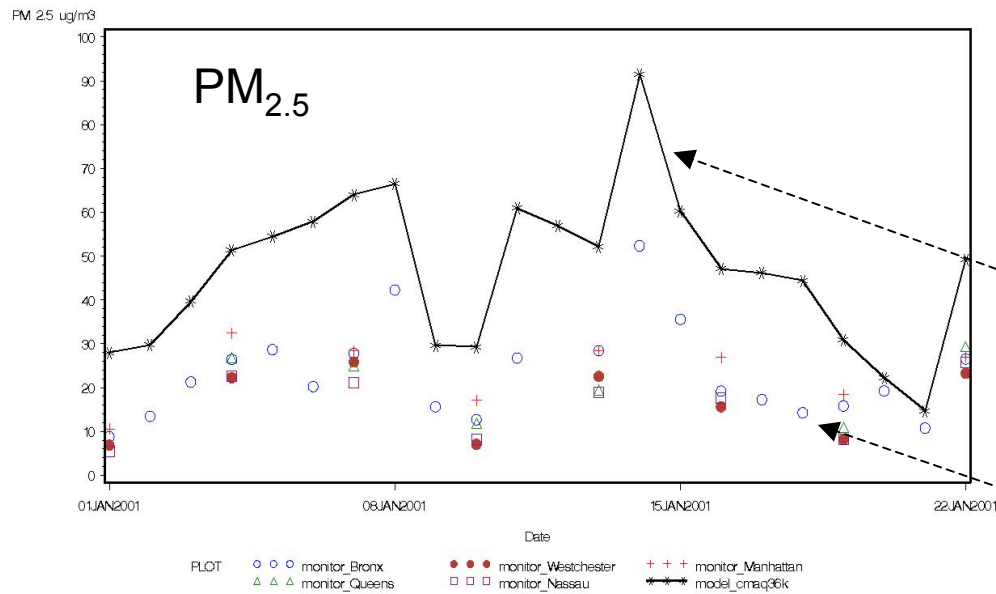
Improved Spatial Prediction with Combined Sources of Data

- Observational data (AQ and MODIS) and model results (CMAQ) can be used simultaneously to predict the pollutant surface (i.e., continuous gridded concentration field)
- Draw on strengths of each data source:
 - Give more weight to accurate monitoring data in monitored areas
 - Rely on model output in non-monitored areas
 - Statistically model underlying spatial and temporal dependence, and measurement errors of each data source
- Leads to more accurate daily predictions and provides prediction errors



Comparison of CMAQ model and monitor data

36km grid cell covering New York City metropolitan area



Improving the quality of observations or modeled results in isolation through "fusion" techniques.

CMAQ Prediction

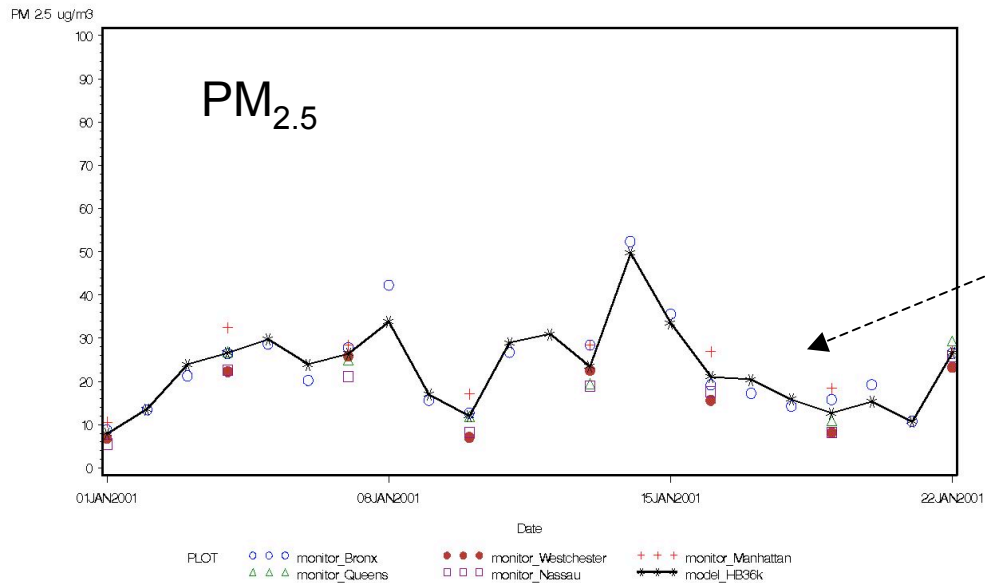
(line)

AQ Monitoring Data

(various points)

Comparison of Hierarchical Bayesian model and monitor data

36km grid cell covering New York City metropolitan area



After application of statistical combination technique



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***Displays of Air Quality
Estimates Based on
Statistical Combination
Technique***



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Date 7/14/2001

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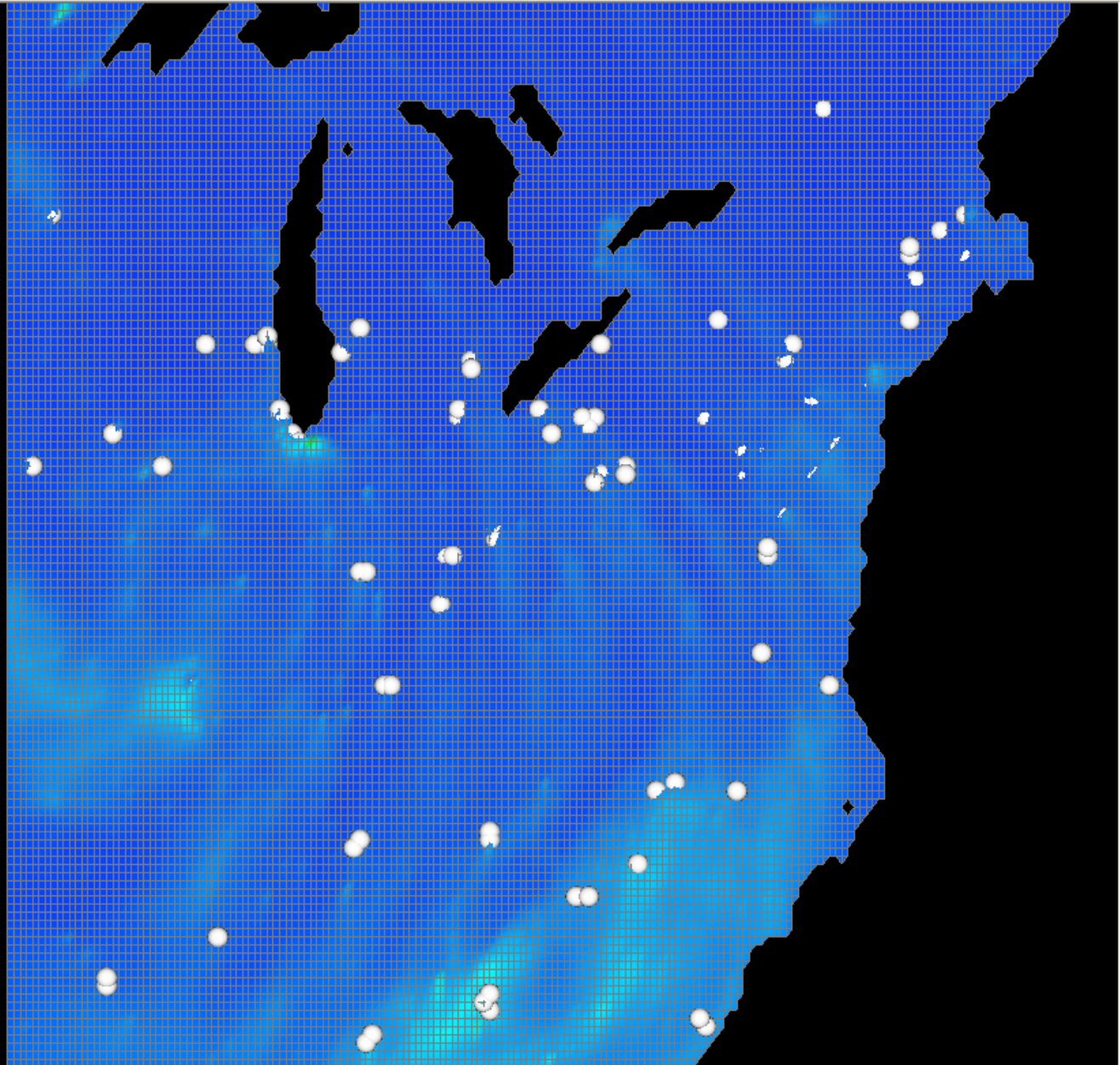
	Min	25%	Median	75%	Max
Predicted	2.42	8.44	10.81	13.31	33.66
Monitors	2.20	7.80	10.00	12.65	29.80
CMAQ	2.51	8.14	10.67	13.34	58.35

Concentration



0.00 27.78 55.56 83.33 111.11 138.89
 Monitor and CMAQ Concentration

-28.71 -18.93 -9.15 0.62 10.40 20.17
 AOD Concentration



Date 7/15/2001

Play Rewind Previous Next

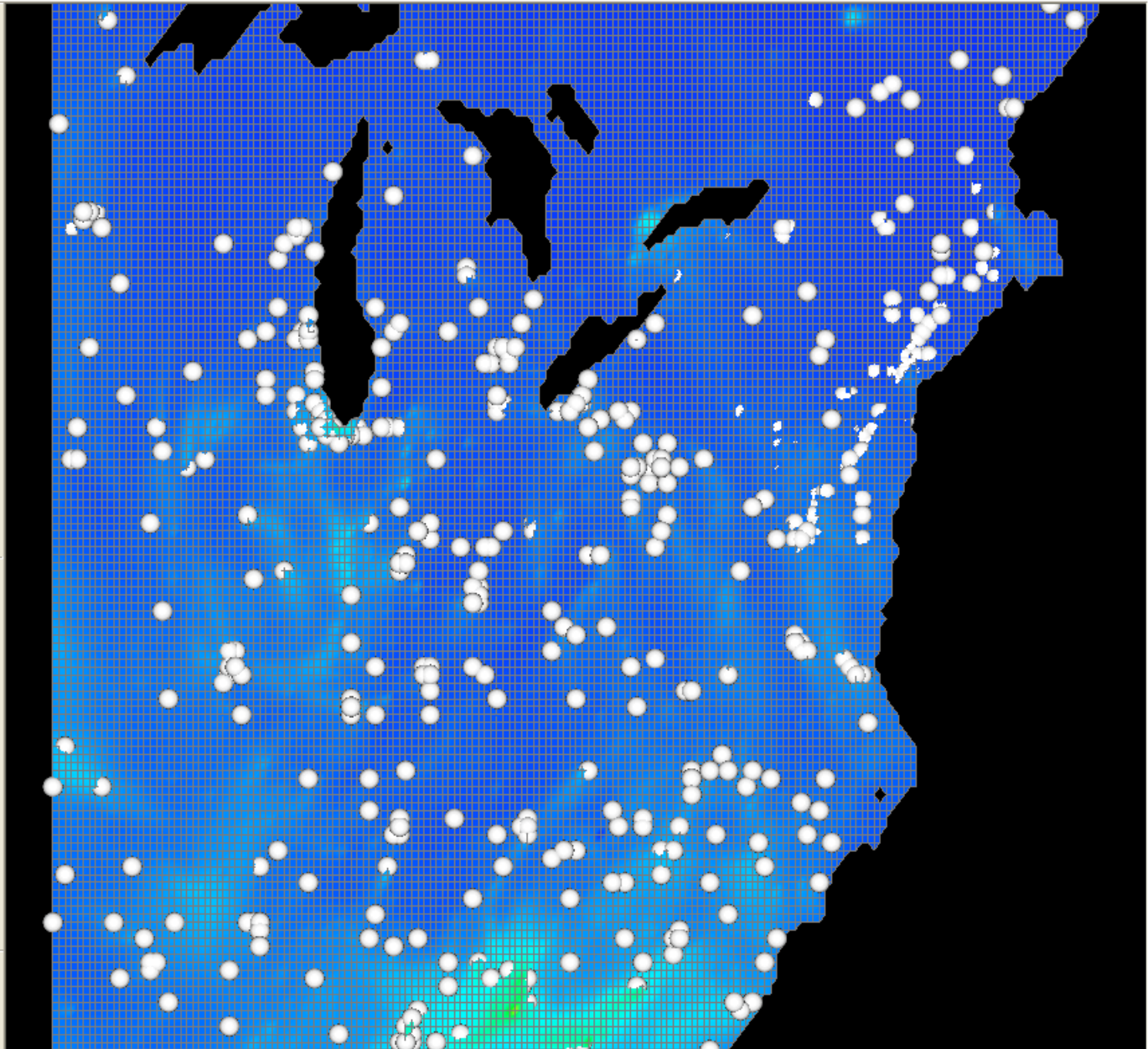
	Min	25%	Median	75%	Max
Predicted	1.75	10.21	13.46	16.86	39.21
Monitors	0.50	10.00	14.20	18.20	63.80
CMAQ	2.12	8.96	11.15	14.65	94.22

Concentration



0.00 27.78 55.56 83.33 111.11 138.89
Monitor and CMAQ Concentration

-28.71 -18.93 -9.15 0.62 10.40 20.17
AOD Concentration



Date 7/16/2001

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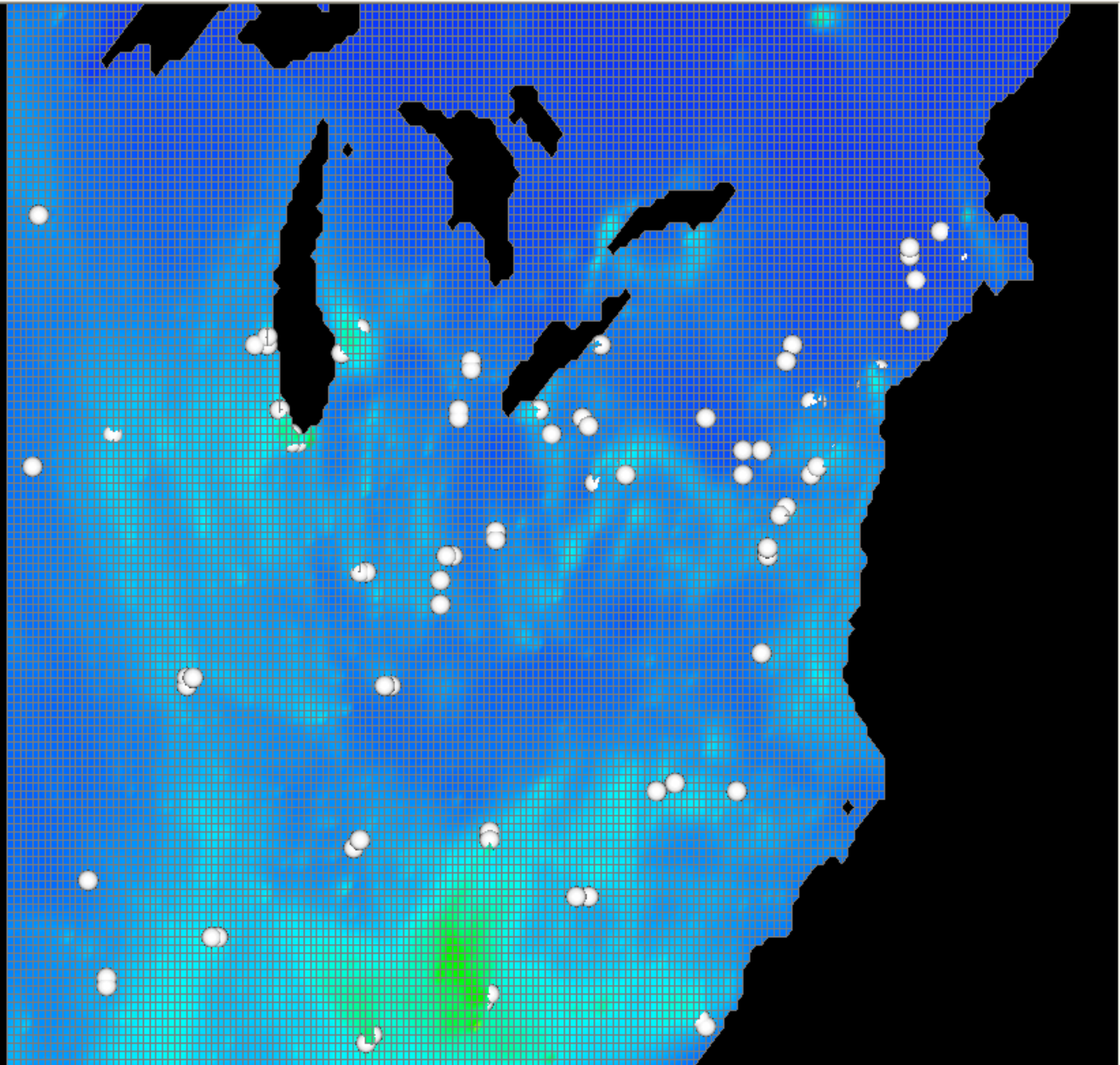
	Min	25%	Median	75%	Max
Predicted	5.39	17.43	21.38	25.40	49.12
Monitors	5.30	18.70	22.50	25.60	41.50
CMAQ	5.10	15.29	18.15	22.43	87.98

Concentration



0.00 27.78 55.56 83.33 111.11 138.89
Monitor and CMAQ Concentration

-28.71 -18.93 -9.15 0.62 10.40 20.17
AOD Concentration



Date 7/17/2001

Play Rewind Previous **Next**

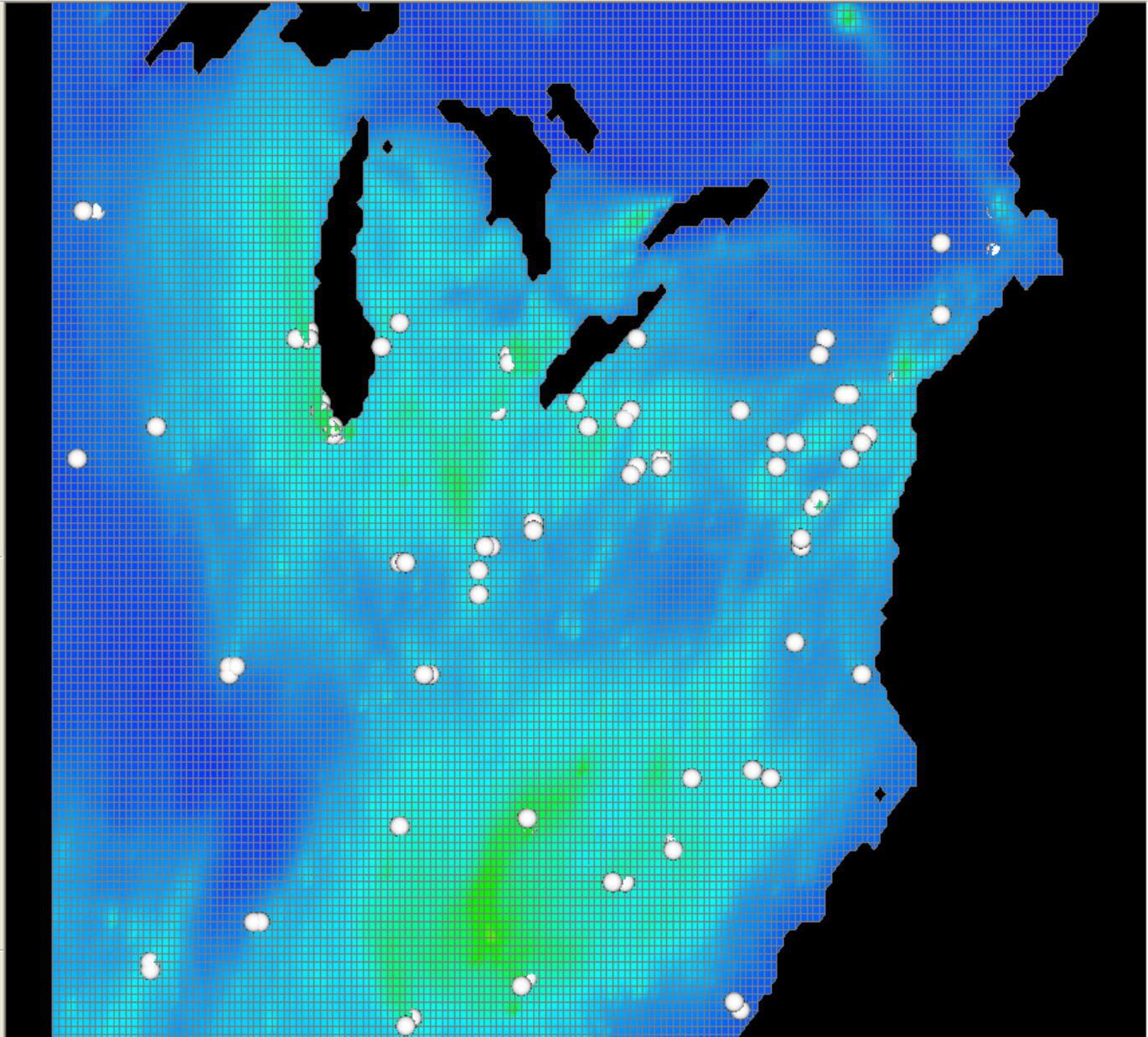
	Min	25%	Median	75%	Max
Predicted	7.82	26.27	30.29	34.32	73.19
Monitors	5.50	27.60	32.00	35.90	86.50
CMAQ	9.17	20.04	25.31	30.69	69.40

Concentration



0.00 27.78 55.56 83.33 111.11 138.89
Monitor and CMAQ Concentration

-28.71 -18.93 -9.15 0.62 10.40 20.17
AOD Concentration



Date 7/18/2001

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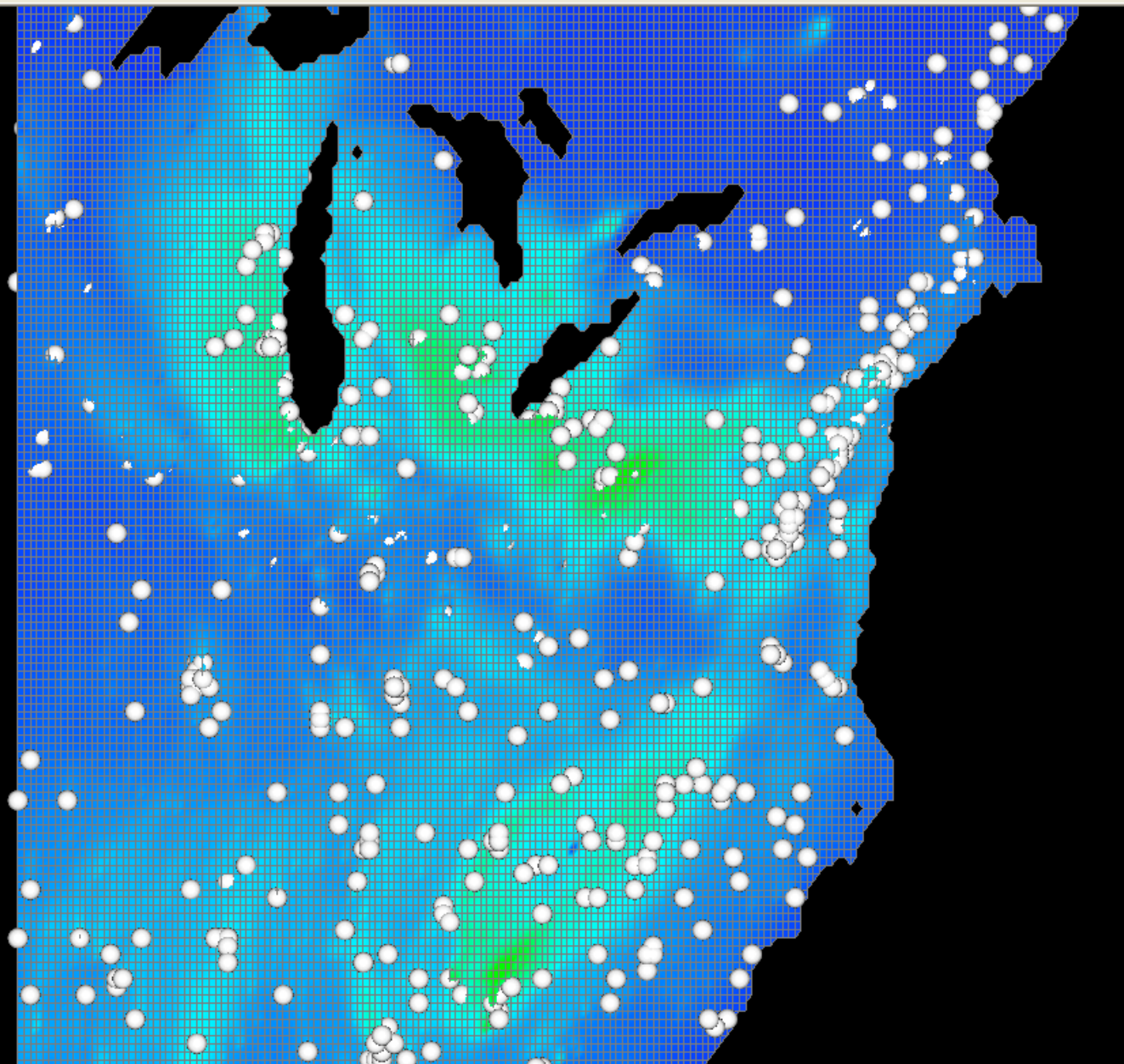
	Min	25%	Median	75%	Max
Predicted	2.41	16.97	25.41	32.78	48.88
Monitors	0.50	17.25	26.23	34.40	50.40
CMAQ	1.89	14.66	20.70	28.36	105.42

Concentration

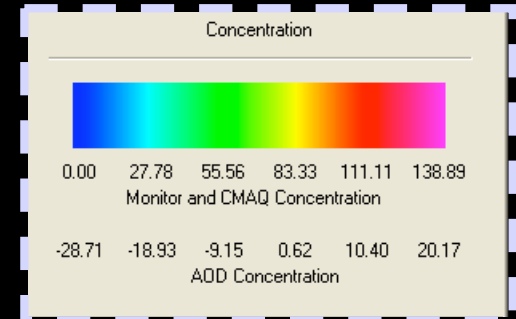


0.00 27.78 55.56 83.33 111.11 138.89
Monitor and CMAQ Concentration

-28.71 -18.93 -9.15 0.62 10.40 20.17
ADD Concentration



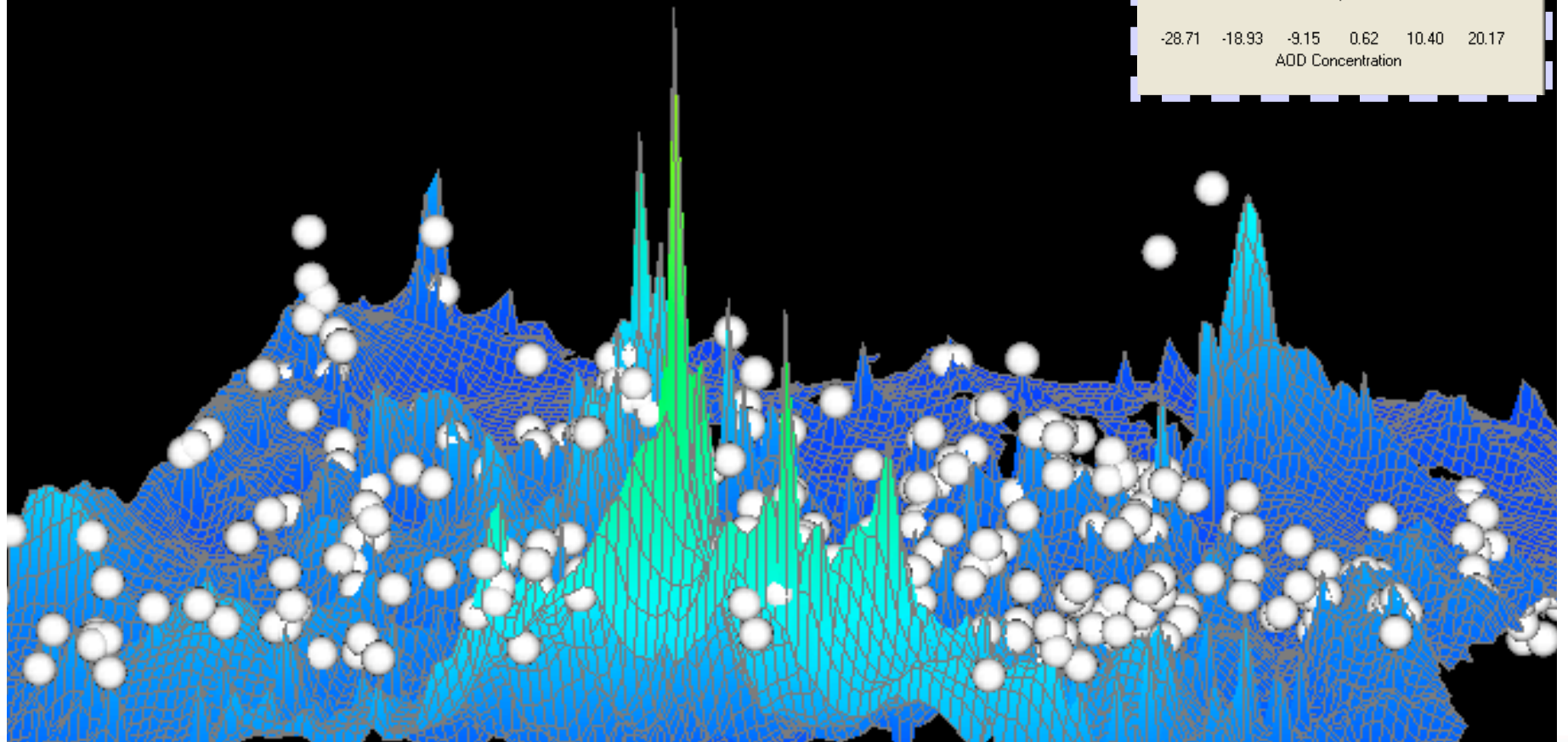
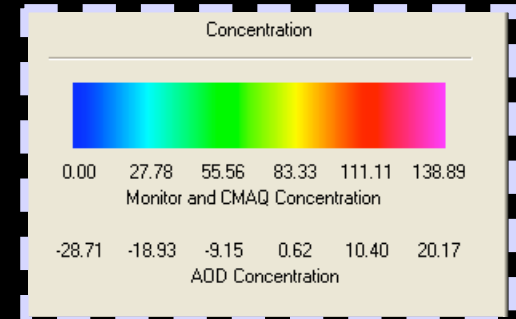
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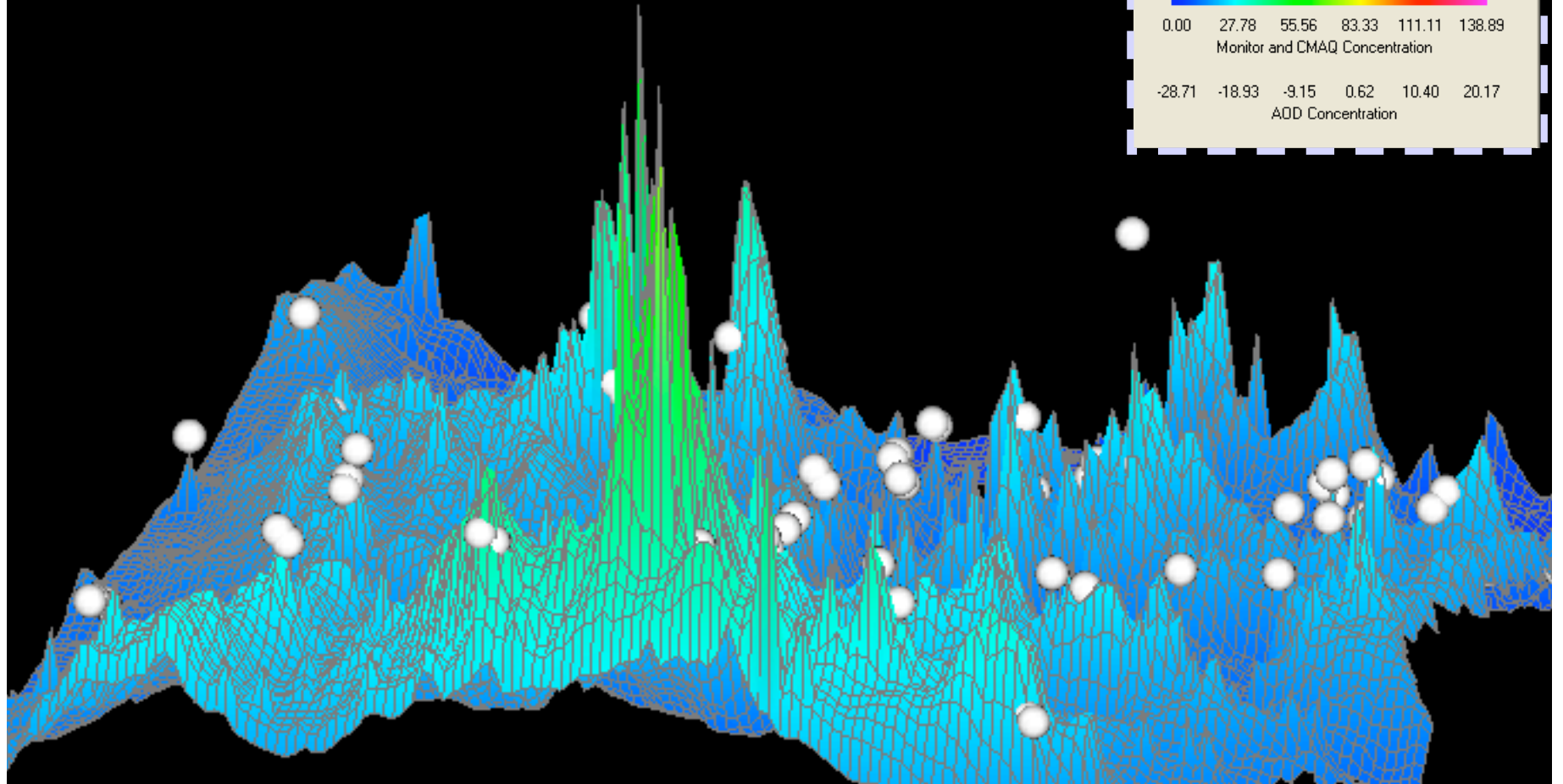
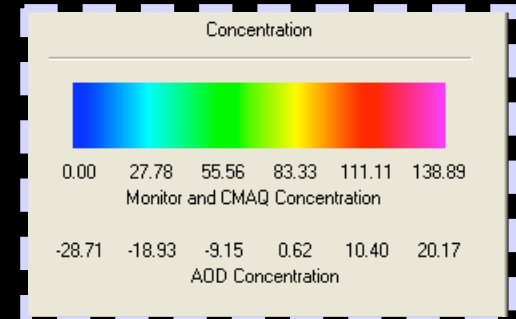
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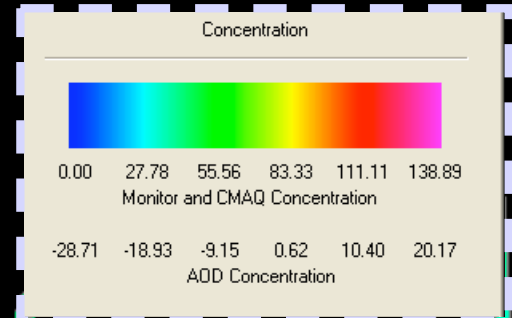
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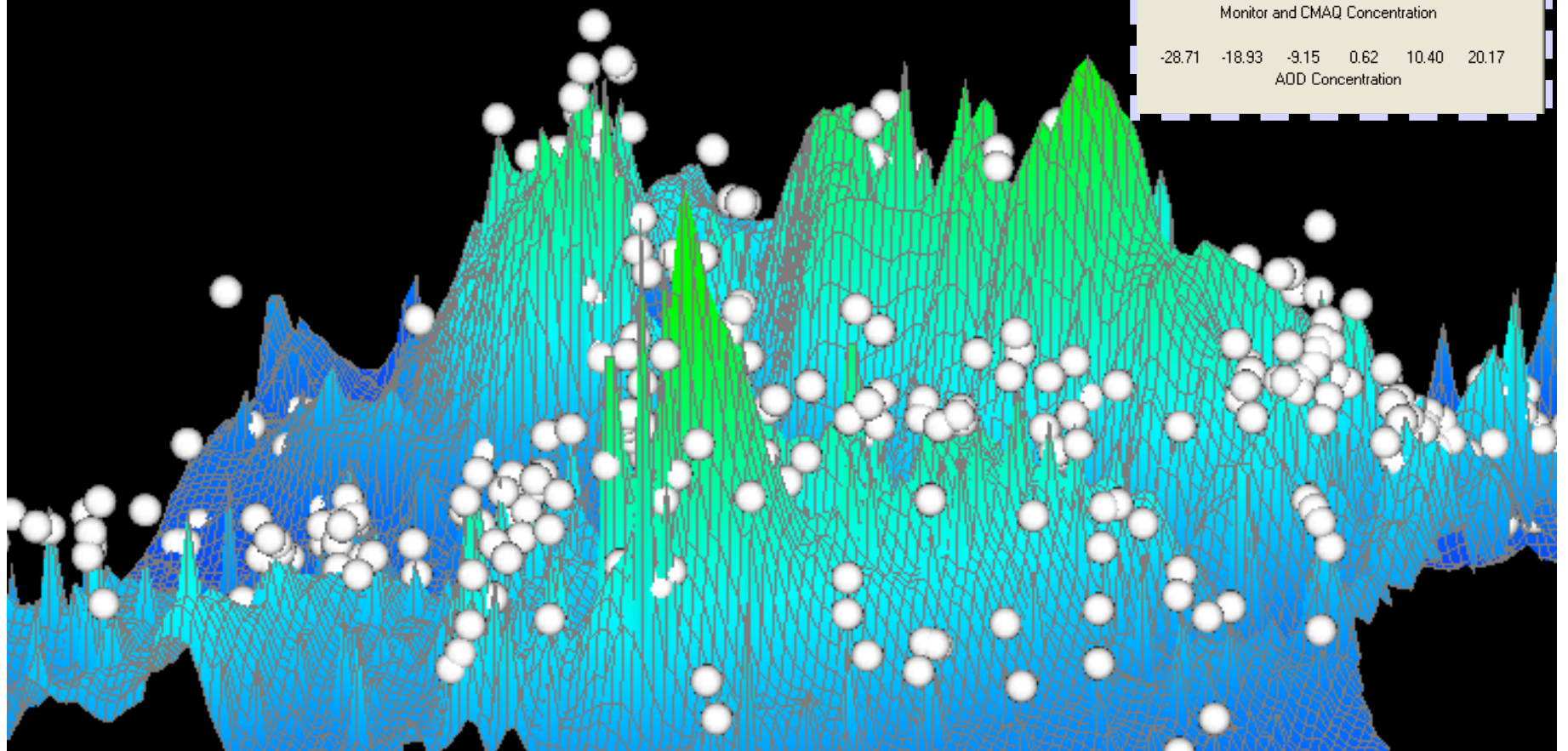
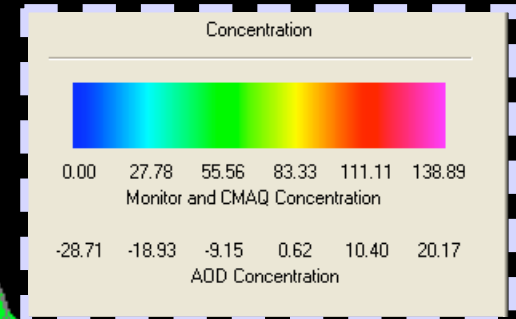
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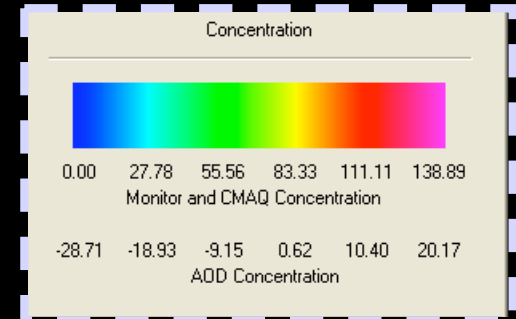
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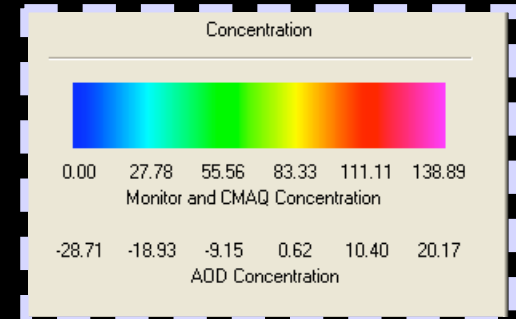
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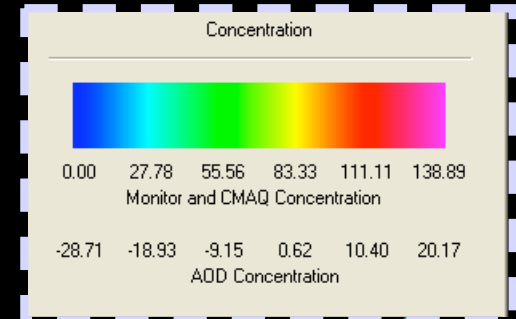
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07/20/01



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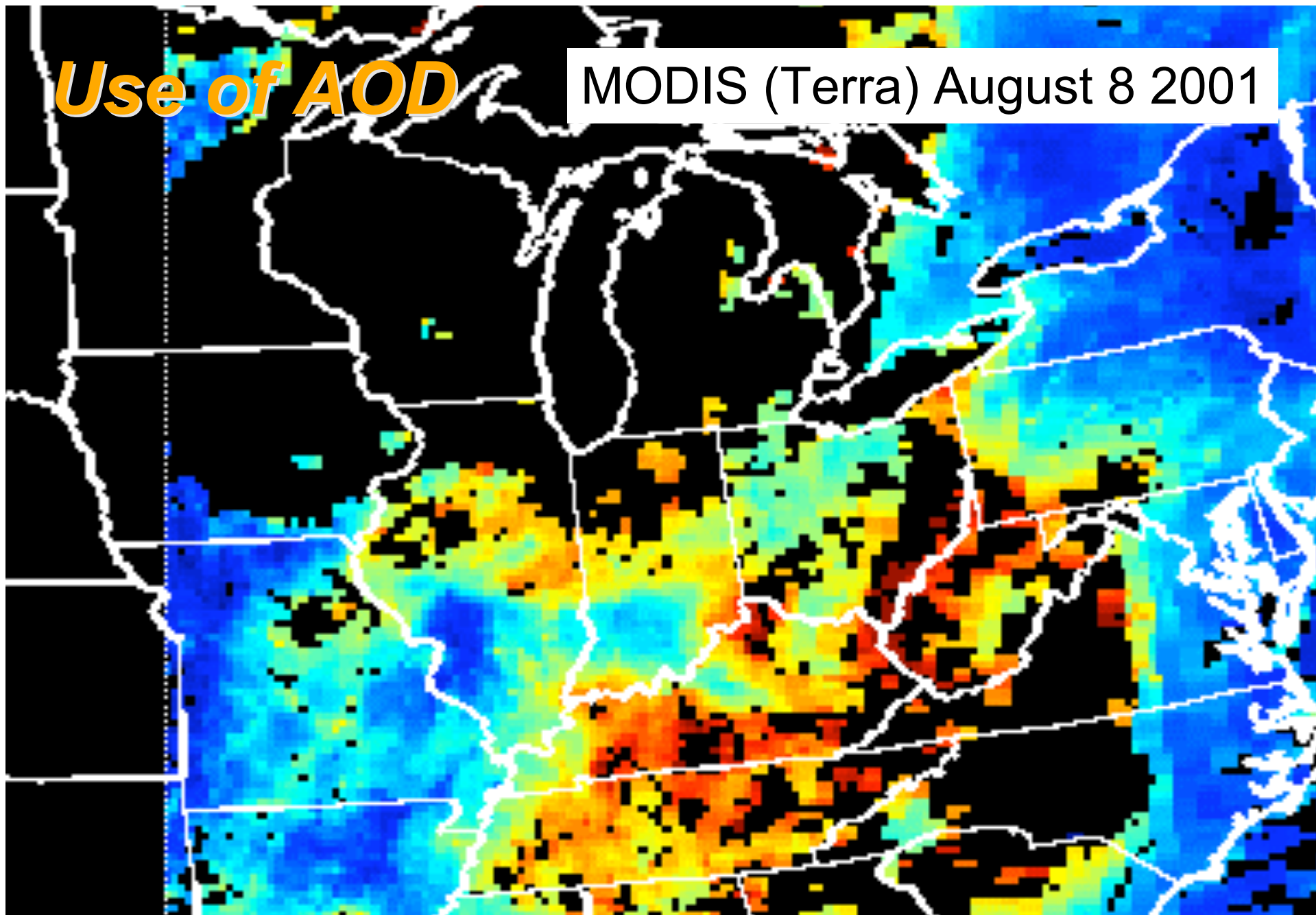
Use of AOD

- Initial attempts use MODIS AOD as independent surface – spatial variable
- “Missing data” limit improvement in predictions
- Considering model changes and GASP AOD



Use of AOD

MODIS (Terra) August 8 2001

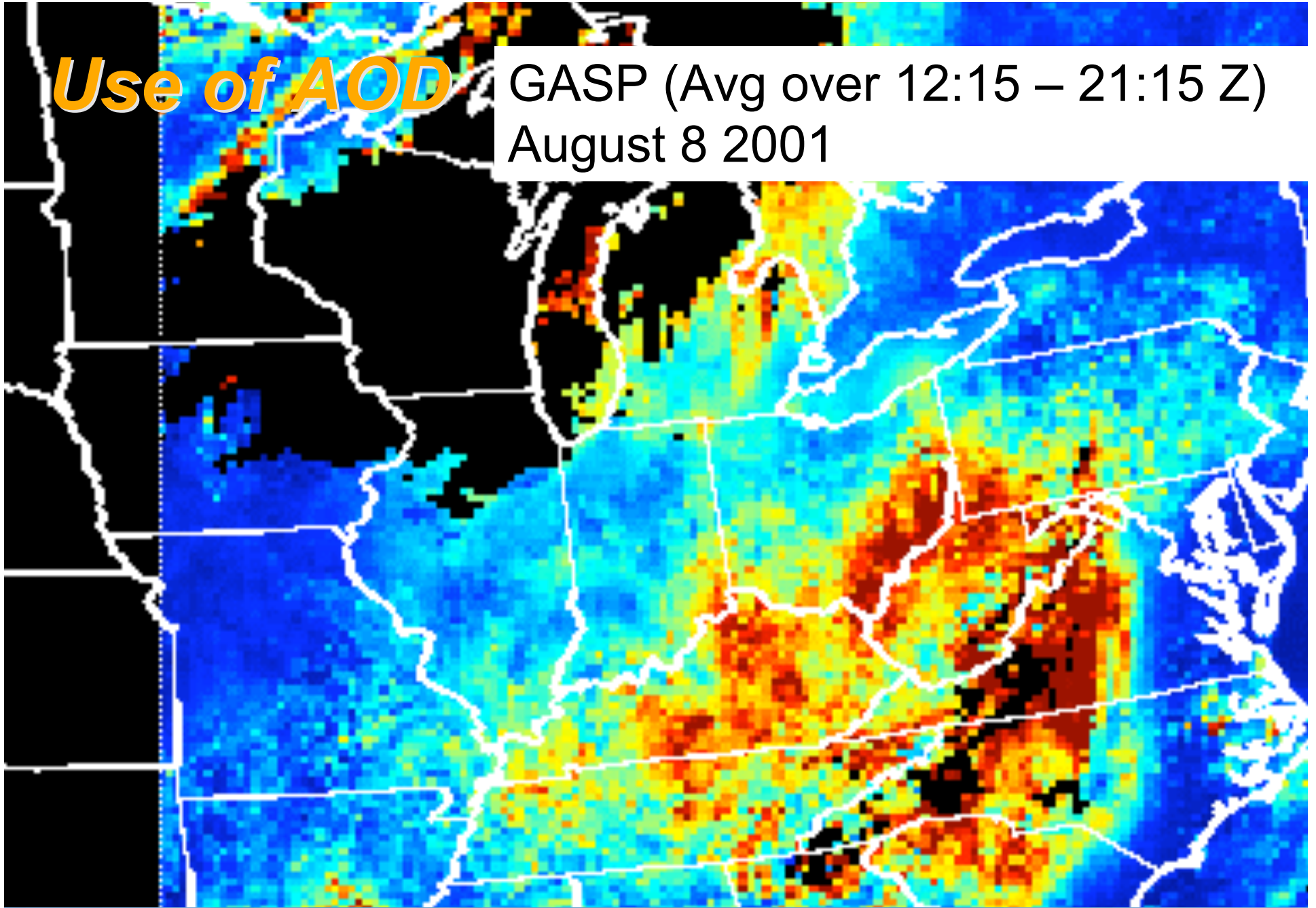


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Use of AOD

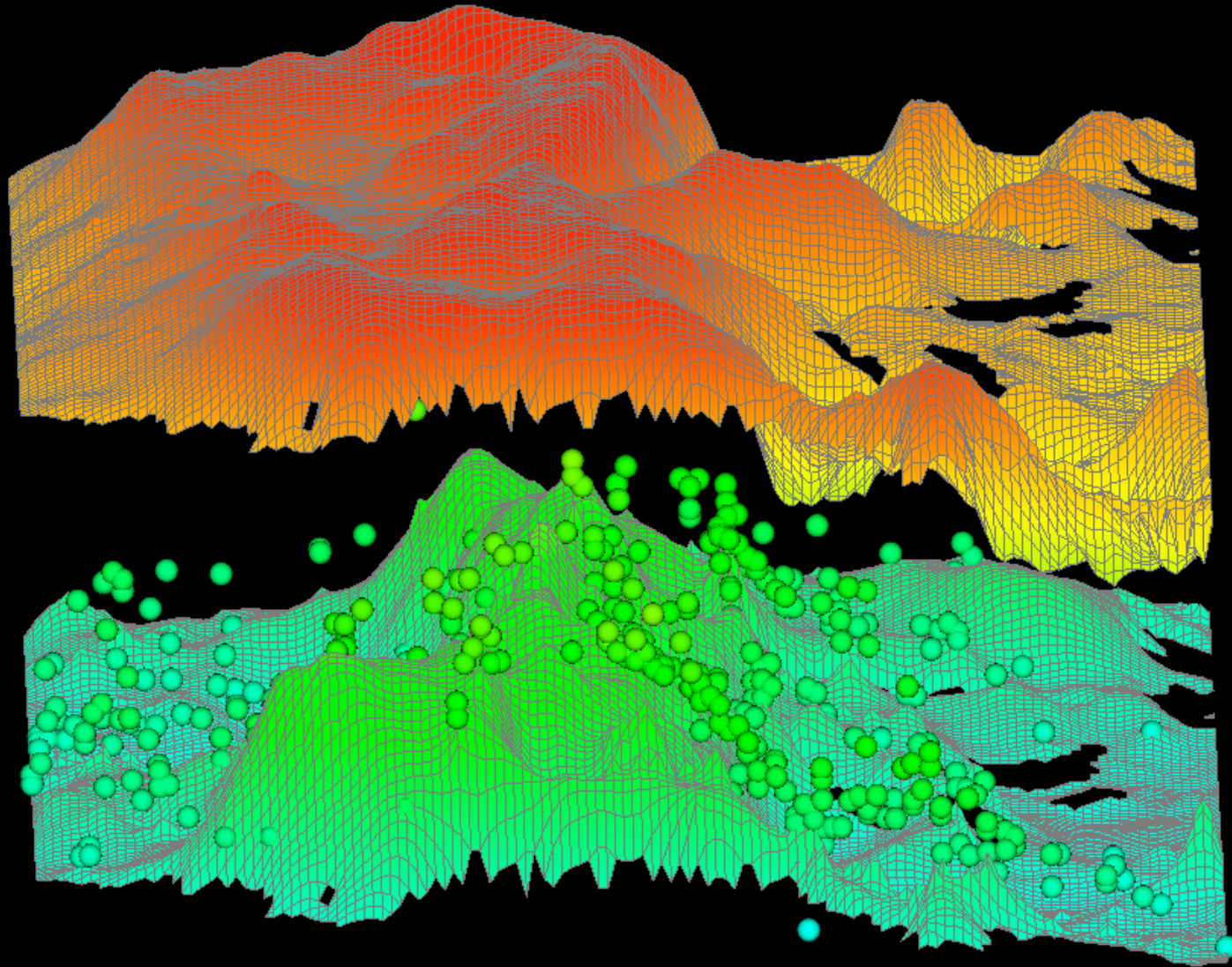
GASP (Avg over 12:15 – 21:15 Z)
August 8 2001



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AOD & Predicted Surfaces



AOD

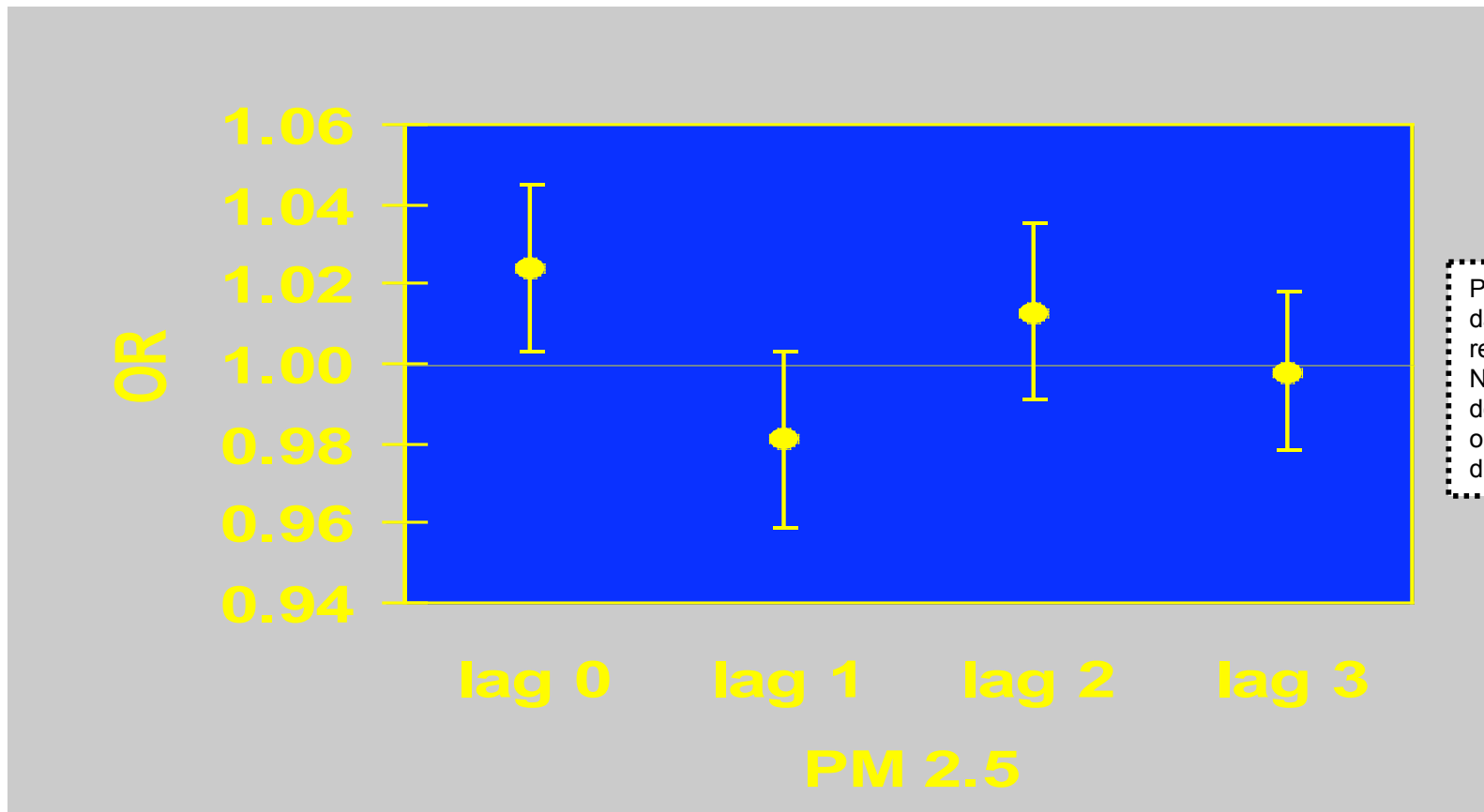
HB
&
AQ



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EXAMPLE -- Association Between Myocardial Infarction Hospitalizations in 2001 and $PM_{2.5}$ Bayesian Estimates



Four day distributed $PM_{2.5}$ model, controlling for temperature, humidity, and barometric pressure
Odds ratios per 10 $\mu\text{g}/\text{m}^3$ $PM_{2.5}$ (95% CI)

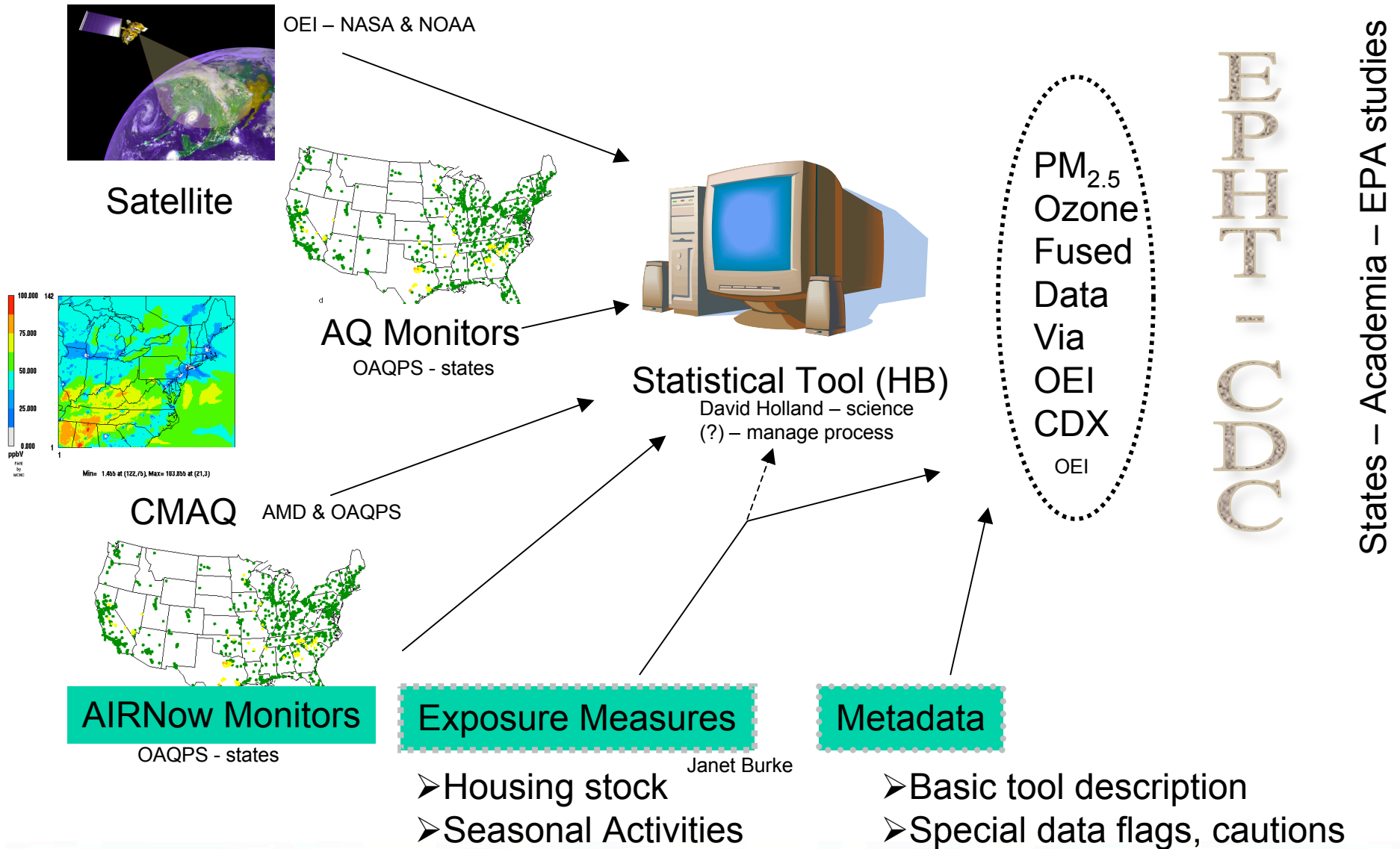


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Current Effort: Advanced Monitoring Initiative

PHASE Toolkit Being Built to Develop Fused AQ Estimates Routinely



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Time Line for Potential Involvement

- Develop IAG
 - EPA & CDC discussing
 - Would provide data not now available
- Final data for 2001 being produced
- Next air quality data (rough estimate):
 - 2001- 2002 : preliminary this summer with peer review by fall 2007
 - 2005 : early 2008
 - 2003 & 2004 : being planned



Long-Term Outcomes from Activity

- Fused data provide spatially and temporally enhanced air quality data - advancing a new data type for use in exposure studies.
 - 365 days/year; consecutive years; across the US
 - Completes year by year CMAQ - has been every third year
- Consistent data base to link source-air-exposure-health effects.
 - Responsive to NRC recommendations for improving US air program.
 - Forms baseline for gene-environment studies with Harvard.
- Potential for:
 - Provide basis for large scale epidemiological assessments.
 - Support for areas with large spatial gaps between monitors: data for PM Centers, Academia, States, Tribes.
 - Expanded connections between air program and public health departments.
- Public Health Departments Communicating on the Relevancy of Air Quality Issues Within Their States



Questions ?



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