Is the Link between Fine Particulate Matter Air Pollution and Cognitive Function Stronger among Stroke Survivors?

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# Background: Stroke

- Brain's equivalent of a heart attack
- Second leading cause of death globally
- Estimated 14 millions DALYs lost among ages 75+ in high income countries
- About half of stroke survivors experience some degree of physical/cognitive impairment
- Incidence of stroke is declining as a result of treatment, but total numbers increasing due to aging

Sources:

Feigin, VL, …, Murray CJ. "Global and regional burden of stroke 1990-2010: Findings from the Global Burden of Disease Study 2010." Lancet 2014;383:245-255.

Leys D, Hénon H, Mackowiak-Cordoliani MA, Pasquier F. Poststroke dementia. Lancet Neurol 2005;4:752-9. Young J, Forster A. Review of stroke rehabilitation. BMJ 2007;334:86-90.

# PM<sub>2.5</sub>, Cognitive Function, Stroke

- Residential concentrations of fine particulate matter air pollution (PM 2.5) associated with:
  - Worse cognitive function (Ailshire & Crimmins 2014; Gatto et al. 2014; Weuve et al. 2012)
  - Increased risk of cardiovascular events, including stroke (Miller et al. 2007; Wellenius et al 2012)



PM<sub>2.5</sub> = 2.5 micrometers in diameter and smaller

Small diameter particles inhaled deep into lungs; can also pass through olfactory cells and deposit in brain

Produced mainly by combustion of fossil fuels from traffic-related and industrial sources

#### Role of Stroke?

- Older adults with cardiovascular conditions and respiratory problems are more adversely affected by pollution
  - Prior stroke history => worse cog function among those in polluted areas
- Some conditions and diseases have an impact on cognitive function stroke known to have large impact on functioning
  - Post-stroke recovery is a critical period for maintaining function/preventing short and long-term decline
- Very little research on role of pre-existing conditions in the pollution-cognition relationship, and nothing on role of stroke
  Most studies exclude people with history of stroke

#### National Data on Adults Ages 50+

- Health and Retirement Study (2004)
  - Nationally-representative, longitudinal (1992-)
  - Americans over age 50
  - Non-Hispanic whites and blacks, Hispanics, other race/ethnicity
  - Community-dwelling

#### ~N=16,344

- Linked geographic identifiers
  - Census tract id
- Census 2000 tract characteristics
- EPA/AQS criteria pollutant data (2004)
  - Levels of PM<sub>2.5</sub> recorded at EPA monitoring stations

# **Cognitive Function**

- Immediate and delayed recall of 10 nouns (0-20 pts)
- Serial 7's subtraction test (0-5 pts)
- Backward counting from 20 (0-2 pts)
- Current date (0-4 pts)
- Object naming (0-2 pts)
- Pres/VP naming (0-2 pts)
- Combined total cognitive function score (0-35)



# **Air Pollution**

- Annual average PM<sub>2.5</sub> from monitors located within 60km of Census tract centroid
- HRS respondents linked to Year 2004 tract-level PM<sub>2.5</sub> using tract ids
- N=270 respondents with no tract id
- N=1,689 respondents who did not live within 60km of a monitor



#### Distribution of $PM_{2.5} \mu g/m^3$ in Study Sample



#### $PM_{2.5} \mu g/m^3$ by Select Metro Area



#### **HRS - Sample Characteristics**

Quartiles of Annual Average PM 2.5 µg/m3				
	1st [4.5-9.9]	2nd [9.9-12.2]	3rd [12.2-13.8]	4th [13.8-20.7]
Cognitive Function	22.7	22.1	21.7	22.0
Age, years	65.3	64.4	64.3	64.3
Stroke	5.70%	6.97%	6.83%	6.91%

\*Statistically significant differences, p<.05

#### **Statistical Methods**

- Multilevel linear regression with random intercept
  - Accounts for spatial clustering of observations
- Models adjusted for:
  - Individual level age; sex, race/ethnicity; education; income; marital status; working status; smoking status; residential tenure
  - Tract level % college educated adults; median income; % nonwhite
- Analyses weighted to account for complex sample design

#### Cognitive Function by PM<sub>2.5</sub> Quartile



Adjusted for age; sex, race/ethnicity; education; income; marital status; working status; smoking status; residential tenure; tract level - % college educated adults; median income; % non-white

Source: Ailshire, JA, Crimmins, EM. 2014. Am J Epidemiology

# Assoc. between PM 2.5 and Cognitive Function by Stroke



#### Conclusions

- Growing evidence for the importance of air pollution exposure for brain health and functioning in older adults
- Not all older adults will experience the same adverse effects of air pollution
  - Stroke survivors represent particularly vulnerable population
- Need for further investigation of pollution as risk factor in stroke and post-stroke recovery/well being

# Thank you.

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