

# *Air Pollution and PD*

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Jeff Bronstein MD, PhD

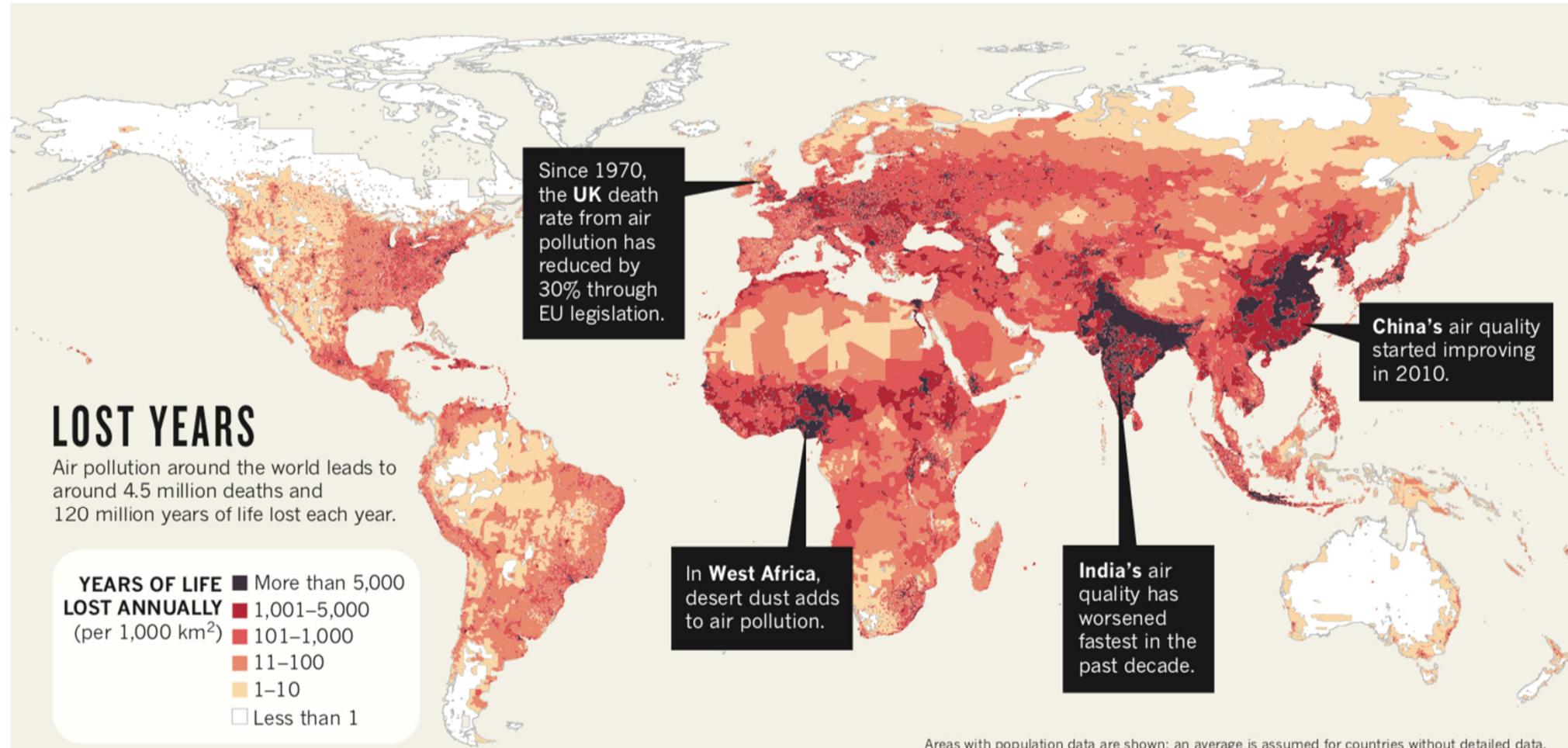
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Professor of Neurology at UCLA  
Director of Movement Disorders

# Disclosures

Nothing to disclose

# Air Pollution Dramatically Increases Mortality

SOURCES: WHO/REF. 5





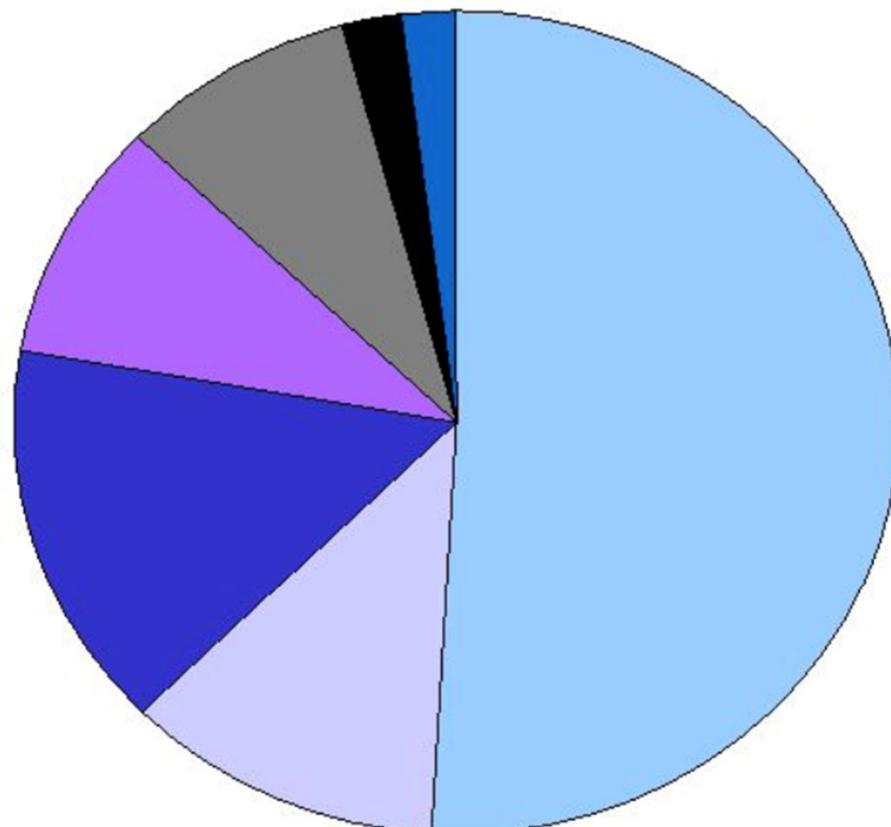
# THE POLLUTED BRAIN

The microscopic particles sifting from freeways and power plants don't just harm your heart and lungs. They may also attack your brain

By **Emily Underwood**, in Los Angeles, California

# Types and Sources of Air Pollution

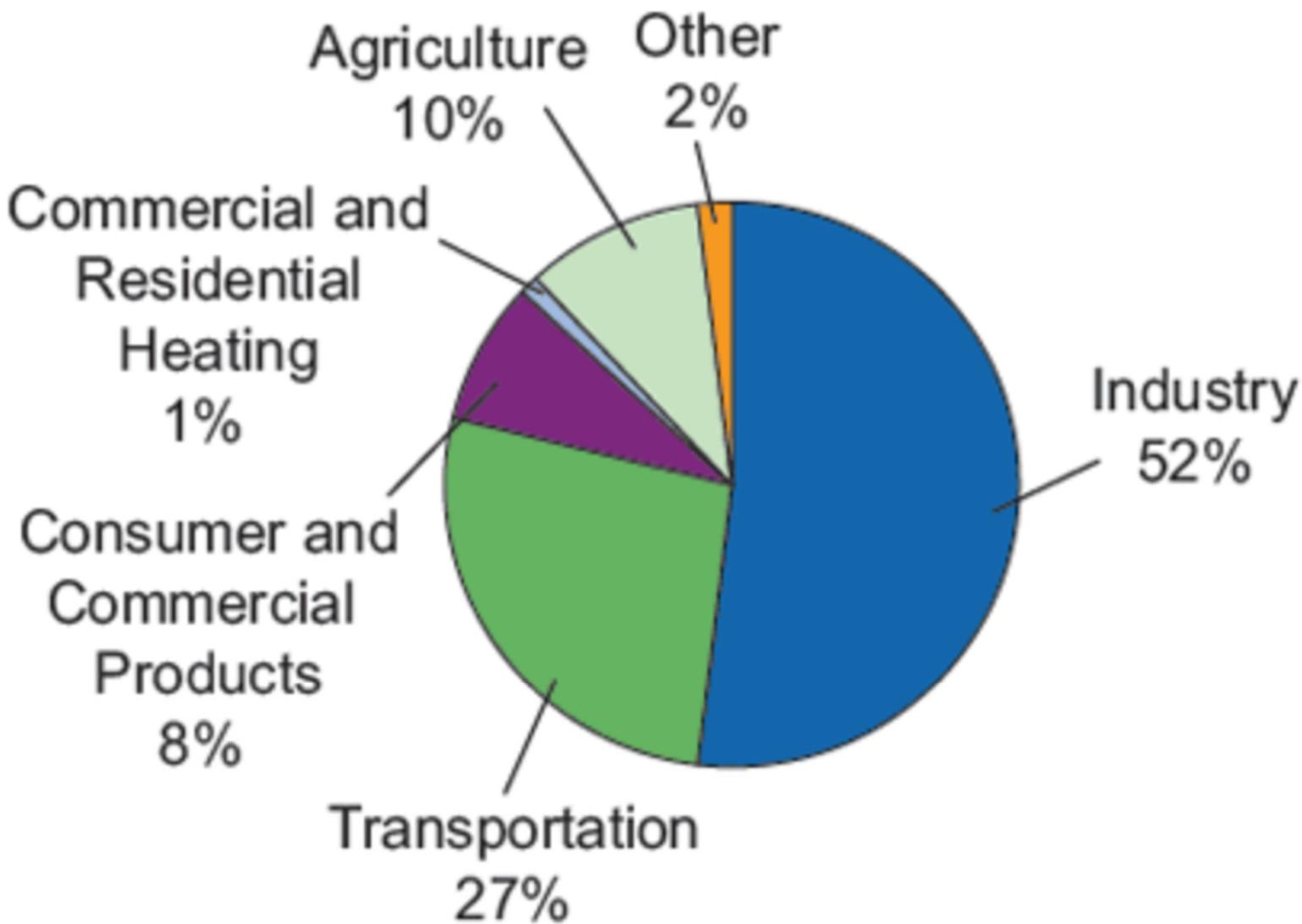
## Primary Air Pollutants



- Carbon monoxide
- Nitrogen oxides
- Particulates
- Volatile organics
- Sulfur dioxide
- Ammonia
- Lead



# Sources of Emissions of Air Pollutants



# Air Pollution and Neurological Disorders

- Stroke: Increased incidence and mortality
  - Estimated 9% of stroke disability years and 8.5% of stroke deaths could be due to PM<sub>2.5</sub> exposure.
  - Higher living near roadway.
  - 1 study showed association with ICH
- Headaches: Increased migraines
- MS: Short-term exposure exacerbation of disease activity. Unclear if it alters incidence.
- ALS: Unclear if it alters incidence
- Dementia: Unclear if it alters incidence
- Parkinson's disease: Evidence is growing

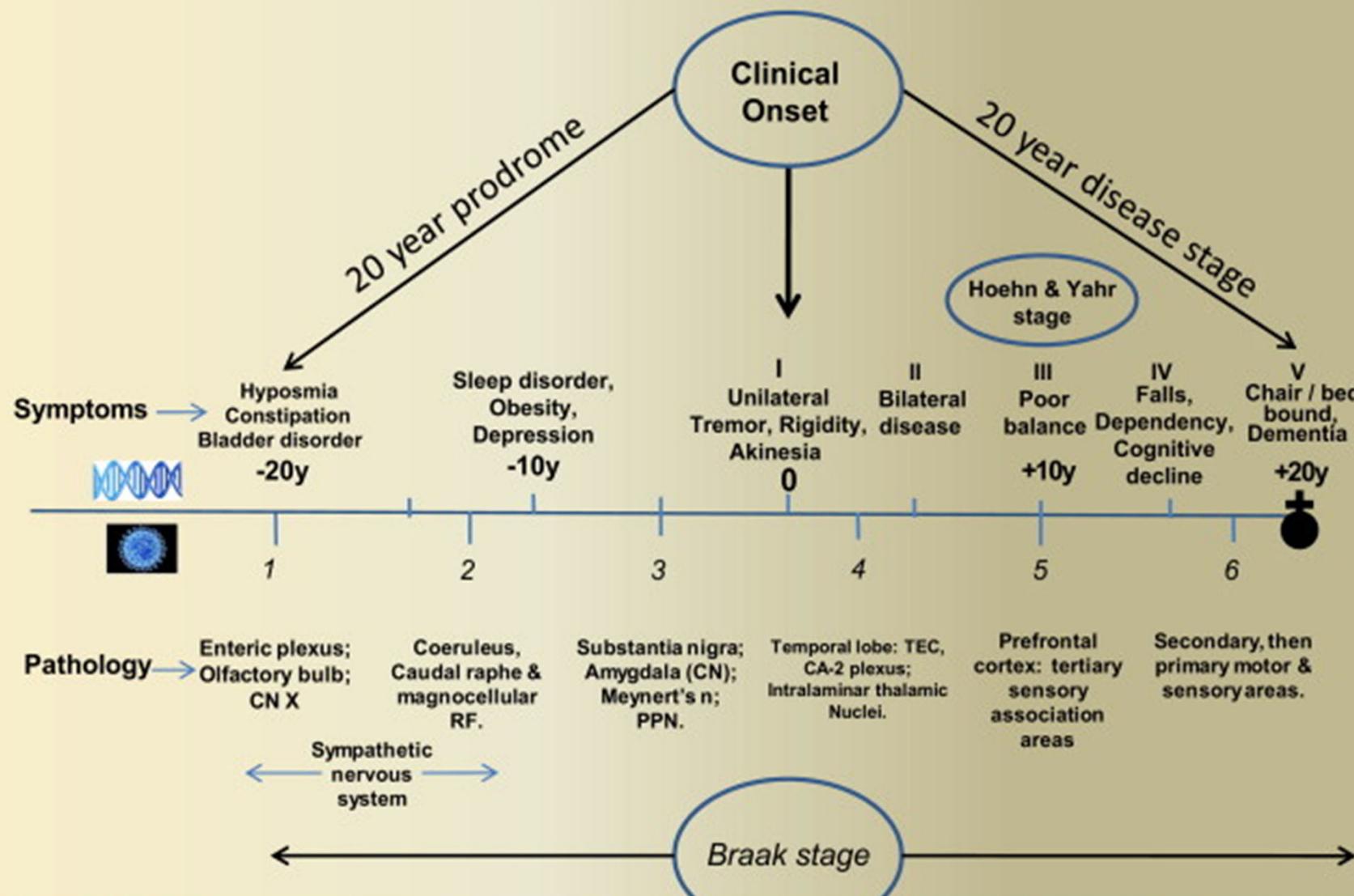
# Parkinson's Disease: Why Study the Environment?

- Only approx. 30% of PD can be explained by genetics
- PD pathology starts in the gut and olfactory bulb which are entry points for environmental toxins.

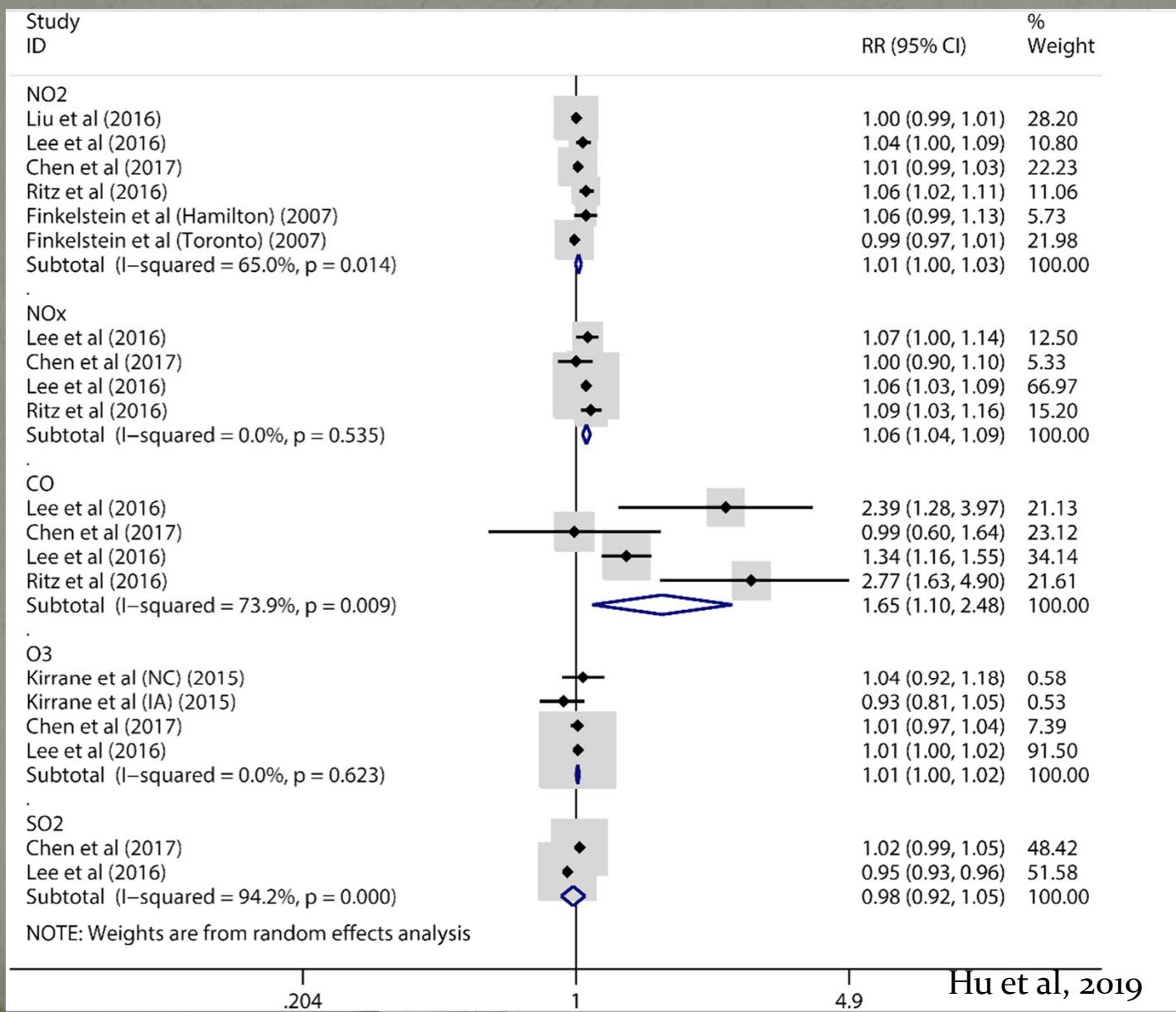
# Parkinson's Disease and Air Pollution: Why is it so hard to study?

- PD is relatively rare for genetic and epidemiological studies
- Diagnosis is not always clear early in the disease and by the time you make the diagnosis, the disease process has been going on for decades.
- It is very slowly progressive so it is very difficult to model the disease in animals.

# Disease Process Spans Decades



# Meta-analysis of AP and PD up to 2019



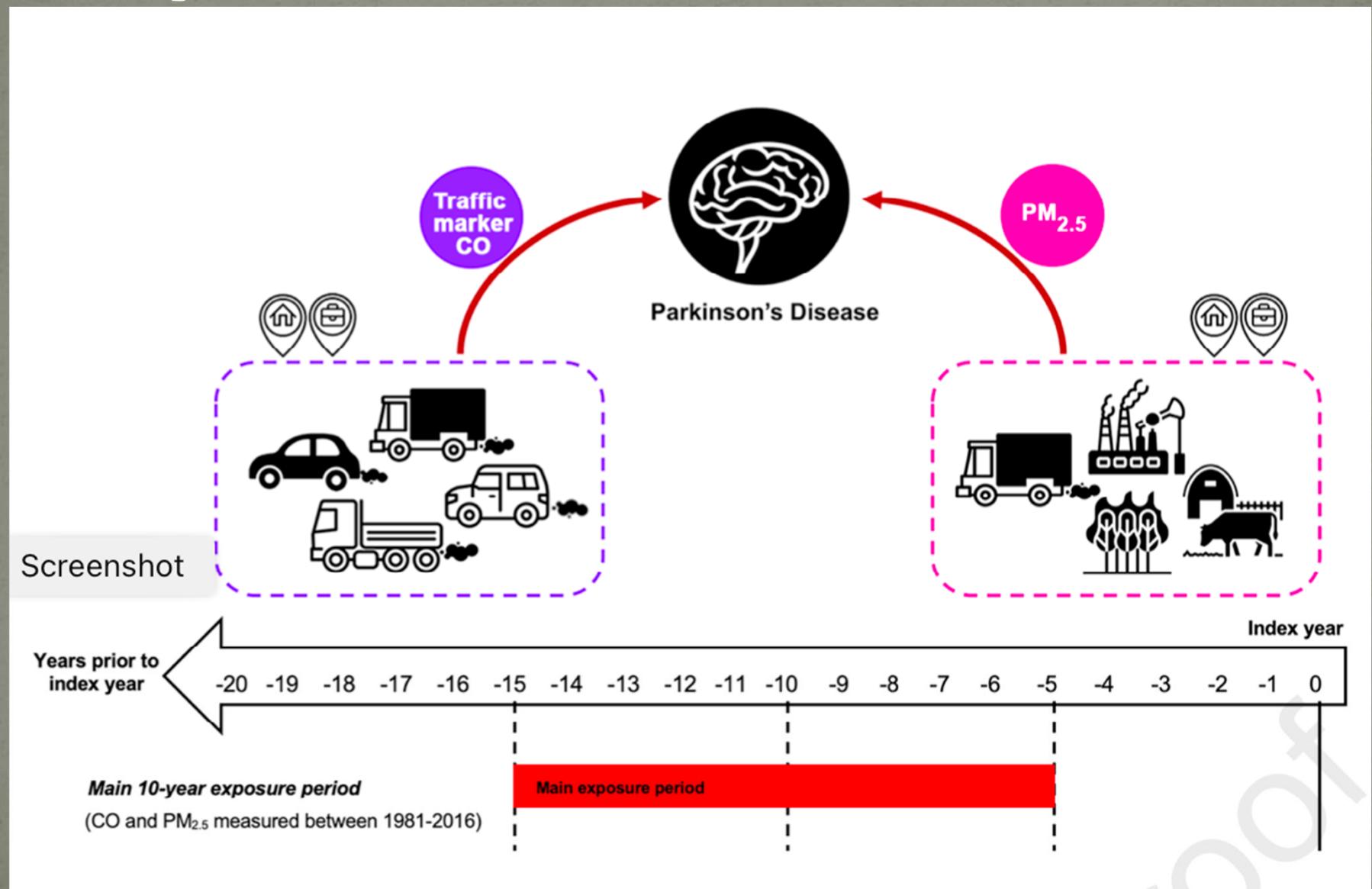
# Some Recent Epidemiological Studies



Beate Ritz MD, PhD

Author	Study Design	Population	Exposure Range	Length of Exposure/ Lag time to Ds	OR	Strengths	Weaknesses
Kirrane 2015 <sup>9</sup>	Case-Control	301 cases in US	O <sub>3</sub> (ppb): IA mean: 39.0, max: 41.5; NC mean 40.6 ; max 46.5. PM <sub>2.5</sub> (µg/m <sup>3</sup> ): IA mean 8.9; max 11.5; NC mean 12.6; max 17.7	4 years	OR = 1.39 (.98-1.98) for O <sub>3</sub> ; OR = 1.34 (.93-1.93) for PM <sub>2.5</sub>	Adjusted for multiple variables including pesticides	Short exposure time, small population
Ritz 2016 <sup>14</sup>	Case-Control	1696 PD cases in Denmark	NO <sub>2</sub> : 9.8-43.26 ug/m <sup>3</sup> ; NOx: 13.46-181.55 ug/ m <sup>3</sup> ; CO: 0.36-2.34 mg/m <sup>3</sup>	31 years	NO <sub>2</sub> : 1.09 per 2.97 µg/m of exposure; NOx: 1.06 per 7.10 ppb of exposure; CO: 1.13 per 0.12 ppm of exposure	Large population, long exposure, adjusted for multiple variables	Low air pollution in Denmark
Lee 2016 <sup>10</sup>	Case-Control	11,117 incident PD cases in Taiwan	PM <sub>10</sub> : 29.3-86.8 ug/m <sup>3</sup> ; NO <sub>x</sub> : 5.2-77.6 ppb; O <sub>3</sub> : 19.0-39.2 ppb; CO: 0.2-1.5 ppm	11 years	OR = 1.37 (1.23-1.52) for CO; OR = 1.17 (1.07-1.27) in multi-pollutant models	Large population, adjusted for age, year of Dx	Short exposure time, adjusted for only a few variables
Lee 2016 <sup>11</sup>	Case-Control	408 incident PD cases in Denmark (subset of Ritz 2016)	NO <sub>2</sub> : 9.8-43.26 ug/m <sup>3</sup> ; NOx: 13.46-181.55 ug/ m <sup>3</sup> ; CO: 0.36-2.34 mg/m <sup>3</sup>	31 years	OR=3.1 for AA allele of the interleukin-1β gene with high NO exposure	Long exposure, adjusted for multiple variables, gene interaction with air pollution	Small population, low air pollution in Denmark,

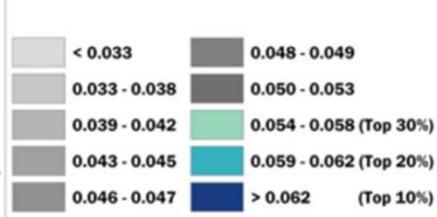
# Air Pollution and PD in the Central Valley



# Air Pollution in the CA Central Valley and PD

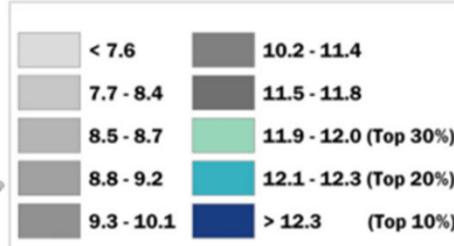
## Ozone

Average daily maximum 8-hour ozone concentrations, ppm (2017-2019)



## PM2.5

Annual mean PM2.5 concentration,  $\mu\text{g}/\text{m}^3$  (2015-2017)



## Pesticide Use



Pesticide Use  
lbs / square mile

Concentration Range (lbs / square mile)	Percentage
1 - 5,000	
5,001 - 15,000	
15,001 - 35,000	
35,001 - 60,000	
60,001 - 180,000	
> 200,000	

Water

County boundaries



# Association between 10-year average CO exposure with a 5-year lag time and Parkinson's disease

Residential	Cases/controls	Odds ratio (95% CI)		
		Unadjusted	Model1 <sup>a</sup>	Model2 <sup>b</sup>
Continuous CO (ppb) <sup>c</sup>	688/851	1.07 (1.01, 1.13)	1.08 (1.02, 1.14)	1.08 (1.02, 1.15)
T <sub>1</sub> (0.01-2.87)	242/343	Reference	Reference	Reference
T <sub>2</sub> (2.88-9.06)	242/292	1.17 (0.93, 1.49)	1.24 (0.97, 1.59)	1.26 (0.98, 1.61)
T <sub>3</sub> (9.07-368.00)	204/216	1.34 (1.04, 1.72)	1.40 (1.07, 1.83)	1.47 (1.12, 1.94)
p-trend <sup>d</sup>		0.02	0.01	0.01
Occupational				
Continuous CO (ppb) <sup>c</sup>	336/309	1.02 (0.97, 1.08)	1.05 (0.99, 1.12)	1.05 (1.00, 1.12)
T <sub>1</sub> (0.01-2.87)	70/73	Reference	Reference	Reference
T <sub>2</sub> (2.88-9.06)	97/97	1.04 (0.68, 1.61)	1.21 (0.76, 1.91)	1.22 (0.77, 1.93)
T <sub>3</sub> (9.07-368.00)	169/139	1.27 (0.85, 1.89)	1.72 (1.12, 2.65)	1.77 (1.15, 2.74)
p-trend <sup>d</sup>		0.20	0.01	0.01

<sup>a</sup>Adjusted for age, race, sex, education, and study wave.

<sup>b</sup>Adjusted as in model 1 plus smoking and pesticide exposure.

<sup>c</sup>Change per interquartile range (IQR) of 10.27 ppb.

<sup>d</sup>Based on linear model through the tertile medians.

Kwon et al 2023 *unpublished*

# Association between 10-year average PM<sub>2.5</sub> exposure with a 5-year lag time and Parkinson's disease

Residential	Cases/controls	Odds ratio (95% CI)		
		Unadjusted	Model1 <sup>a</sup>	Model2 <sup>b</sup>
Continuous PM <sub>2.5</sub> ( $\mu\text{g}/\text{m}^3$ ) <sup>c</sup>	761/910	1.29 (1.14, 1.47)	1.39 (1.21, 1.61)	1.42 (1.22, 1.64)
T <sub>1</sub> (0.88-14.50)	245/319	Reference	Reference	Reference
T <sub>2</sub> (14.51-17.80)	242/316	1.00 (0.79, 1.26)	1.05 (0.82, 1.34)	1.08 (0.84, 1.38)
T <sub>3</sub> (17.81-29.40)	274/275	1.30 (1.02, 1.64) 0.03	1.39 (1.06, 1.81) 0.02	1.45 (1.10, 1.91) 0.01
p-trend <sup>d</sup>				
<b>Occupational</b>				
Continuous PM <sub>2.5</sub> ( $\mu\text{g}/\text{m}^3$ ) <sup>c</sup>	372/352	1.24 (1.03, 1.48)	1.50 (1.22, 1.86)	1.51 (1.22, 1.88)
T <sub>1</sub> (0.88-14.50)	110/125	Reference	Reference	Reference
T <sub>2</sub> (14.51-17.80)	133/107	1.41 (0.98, 2.03)	1.76 (1.21, 2.59)	1.79 (1.22, 2.65)
T <sub>3</sub> (17.81-29.40)	129/120	1.22 (0.86, 1.75) 0.28	1.59 (1.06, 2.38) 0.02	1.64 (1.09, 2.47) 0.01
p-trend <sup>d</sup>				

<sup>a</sup>Adjusted for age, race, sex, education, and study wave.

Kwon et al 2023 *unpublished*

<sup>b</sup>Adjusted as in model 1 plus smoking and pesticide exposure.

# Is the Size of the Effect of AP on PD Risk Relevant?

- Since so many people are exposed to air pollution, it could account for a significant percentage of PD cases.
  - If we extrapolate the risk of PD in the Ritz study to the air pollution levels in Los Angeles CA during the 1970s and 80s (i.e.  $\text{NO}_2$ ,  $\text{NO}_x$  and CO levels), air pollution could account for up to 70% of the cases

# Biological Plausibility; How can AP increase risk?

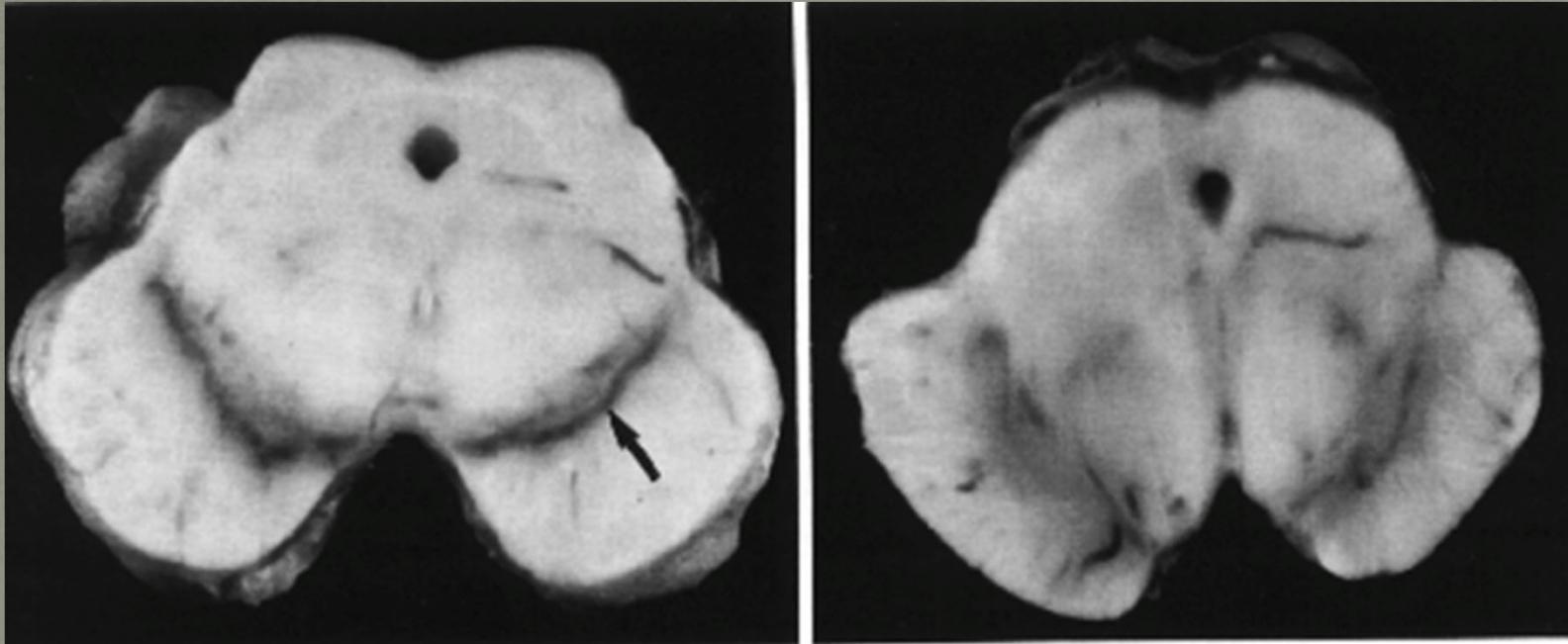
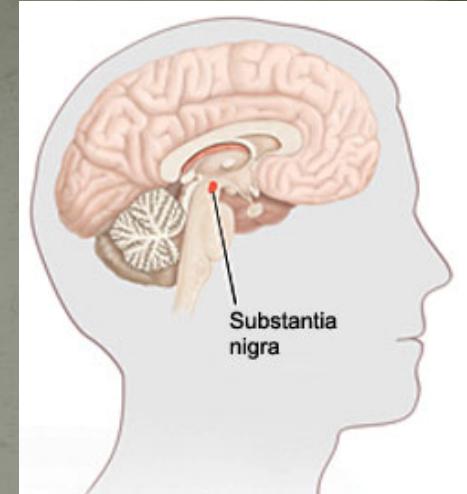
- Autopsies of people and dogs in high AP regions (Mexico City) showed increased AD/PD pathology and inflammation relative to controls.
- *In vitro*, diesel exhaust extracts cause dopaminergic cell death and inflammation.
- Subacute exposure to diesel exhaust in rodents causes CNS inflammation and increased  $\alpha$ -synuclein but does not cause dopaminergic neuronal death.

# How might Air Pollution Act?

A Brief Review on the Pathophysiology of PD

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PD is Characterized by Loss of Substantia Nigra Neurons but Pathology is Widespread

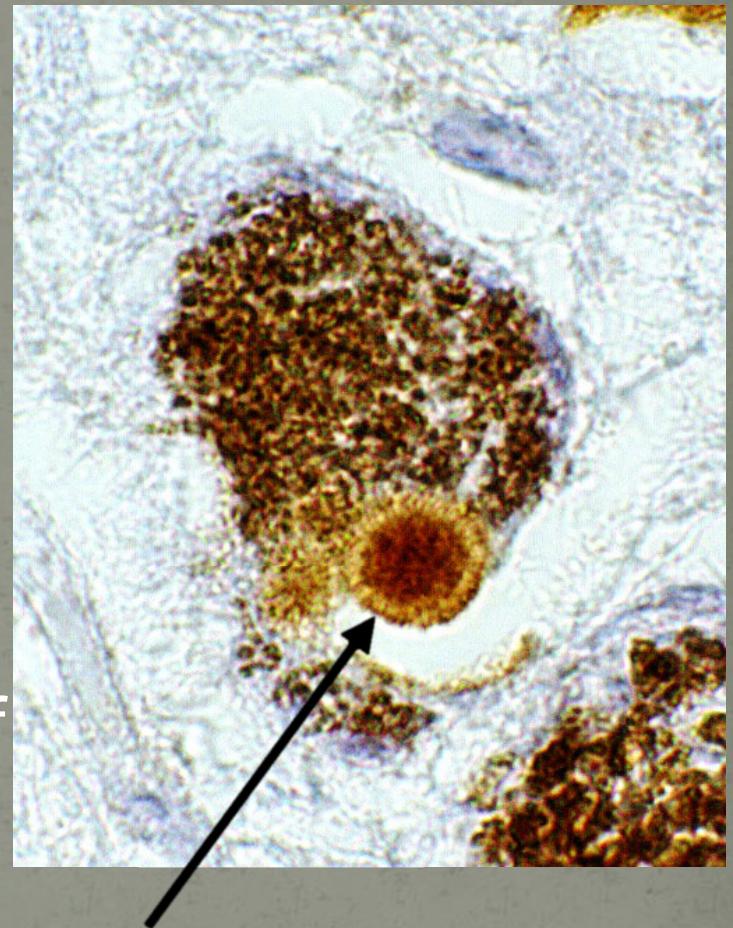


Normal Substantia Nigra

Substantia Nigra in PD

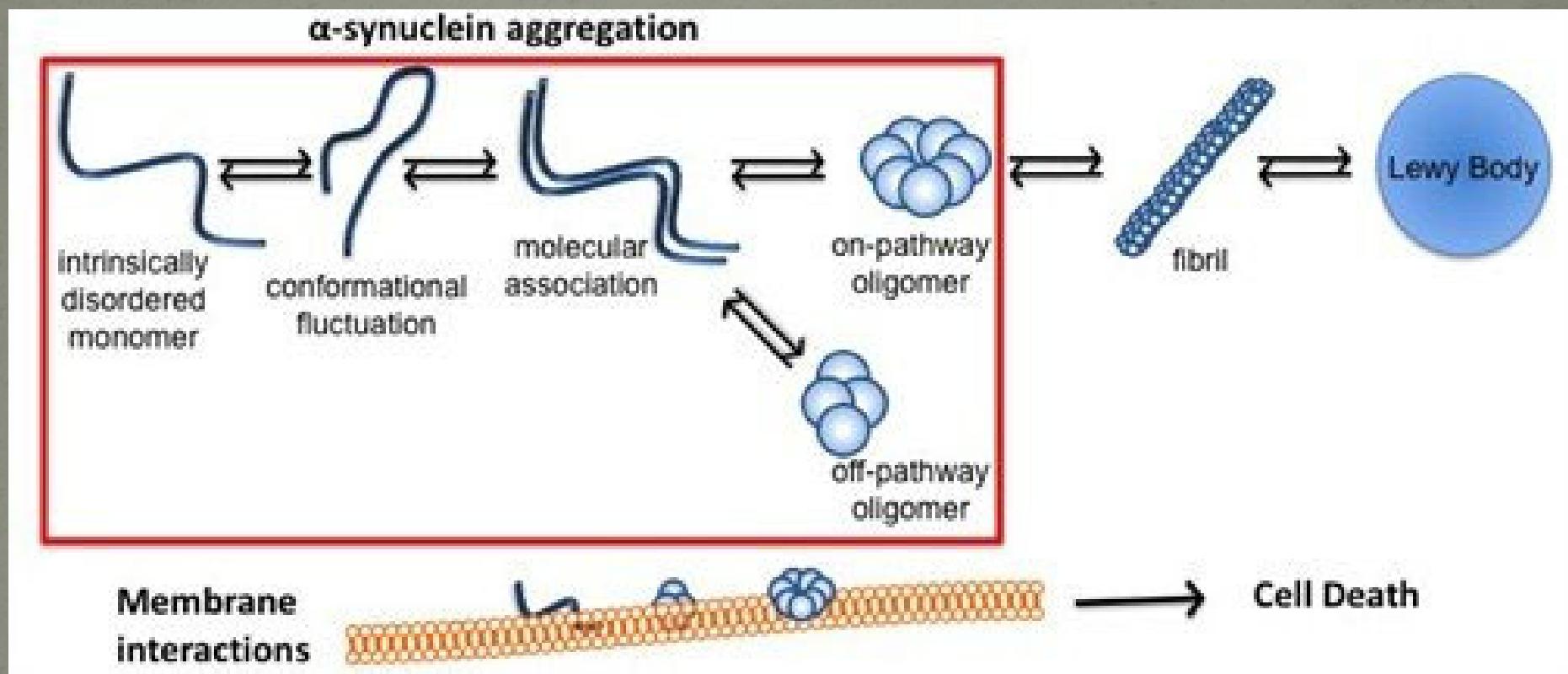
# $\alpha$ -Synuclein is Central to PD

- 1st gene linked to PD.
- Point mutations and gene duplication cause typical PD.
- Major component of Lewy Body in sporadic PD.
- Overexpression in animals recreates many of the features of PD.

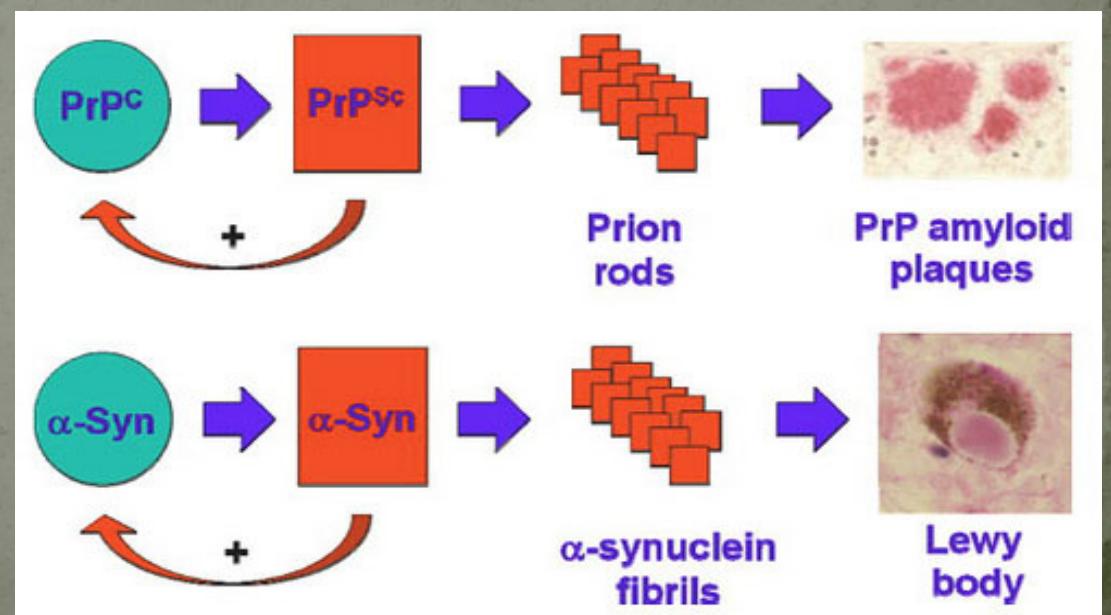
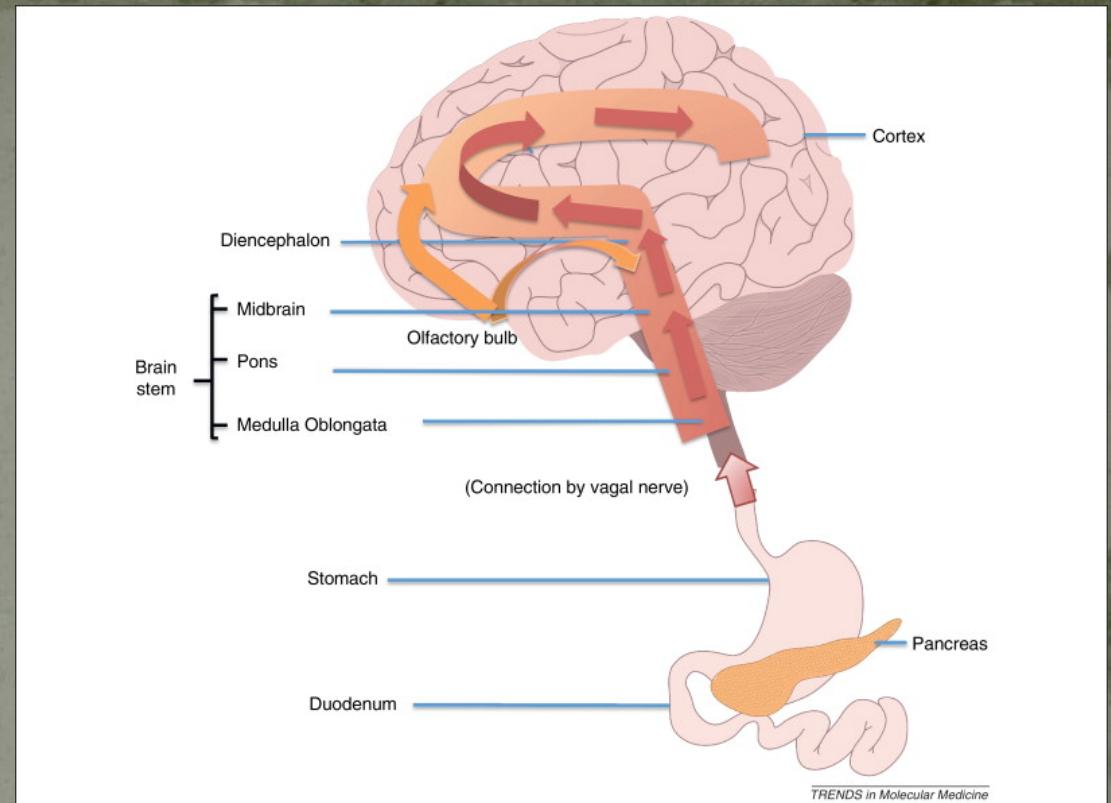


Lewy Body

# $\alpha$ -Synuclein Oligomers Confer Toxicity

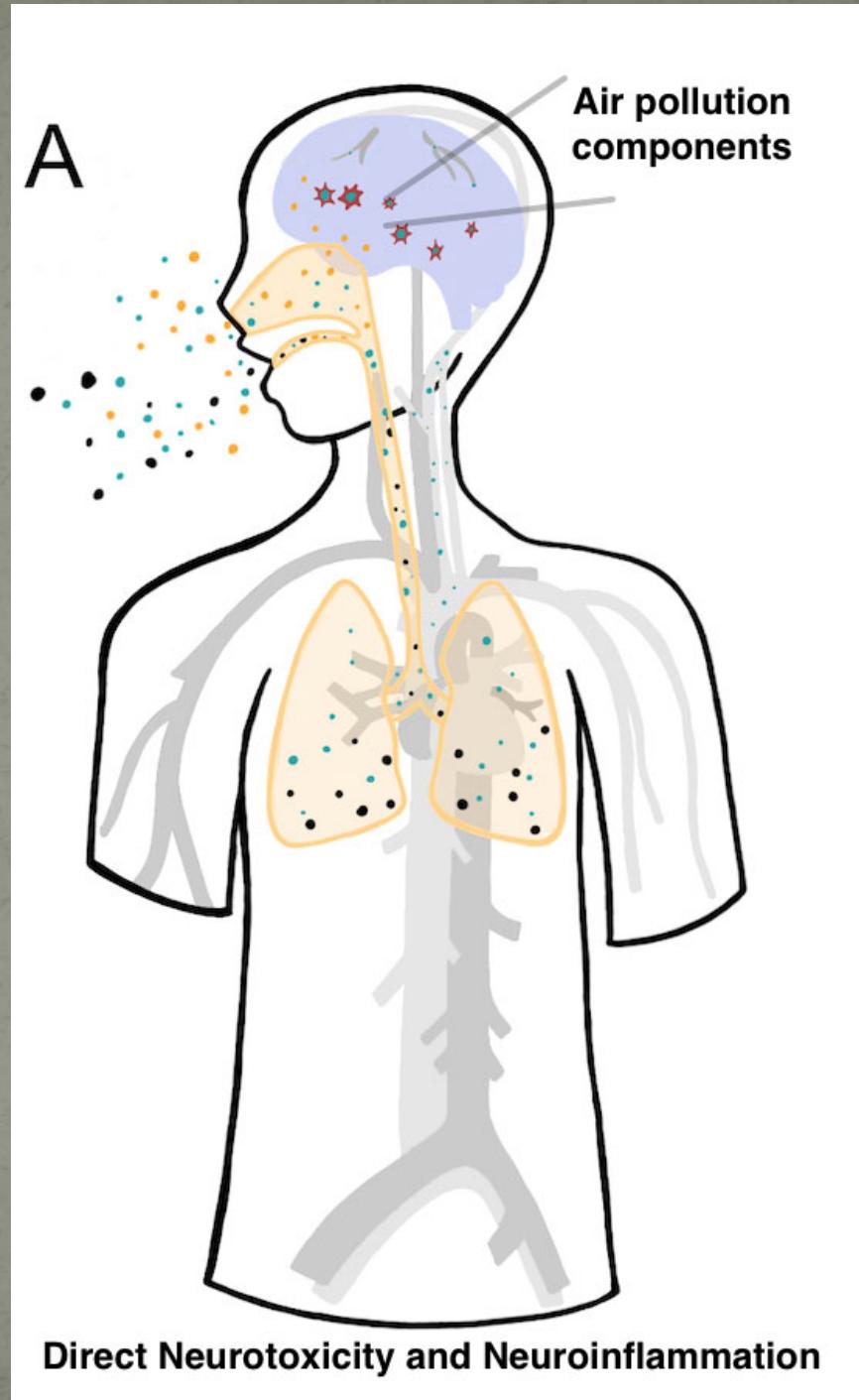


PD appears to start in the gut and/or olfactory bulb and propagate in a prion-like manner



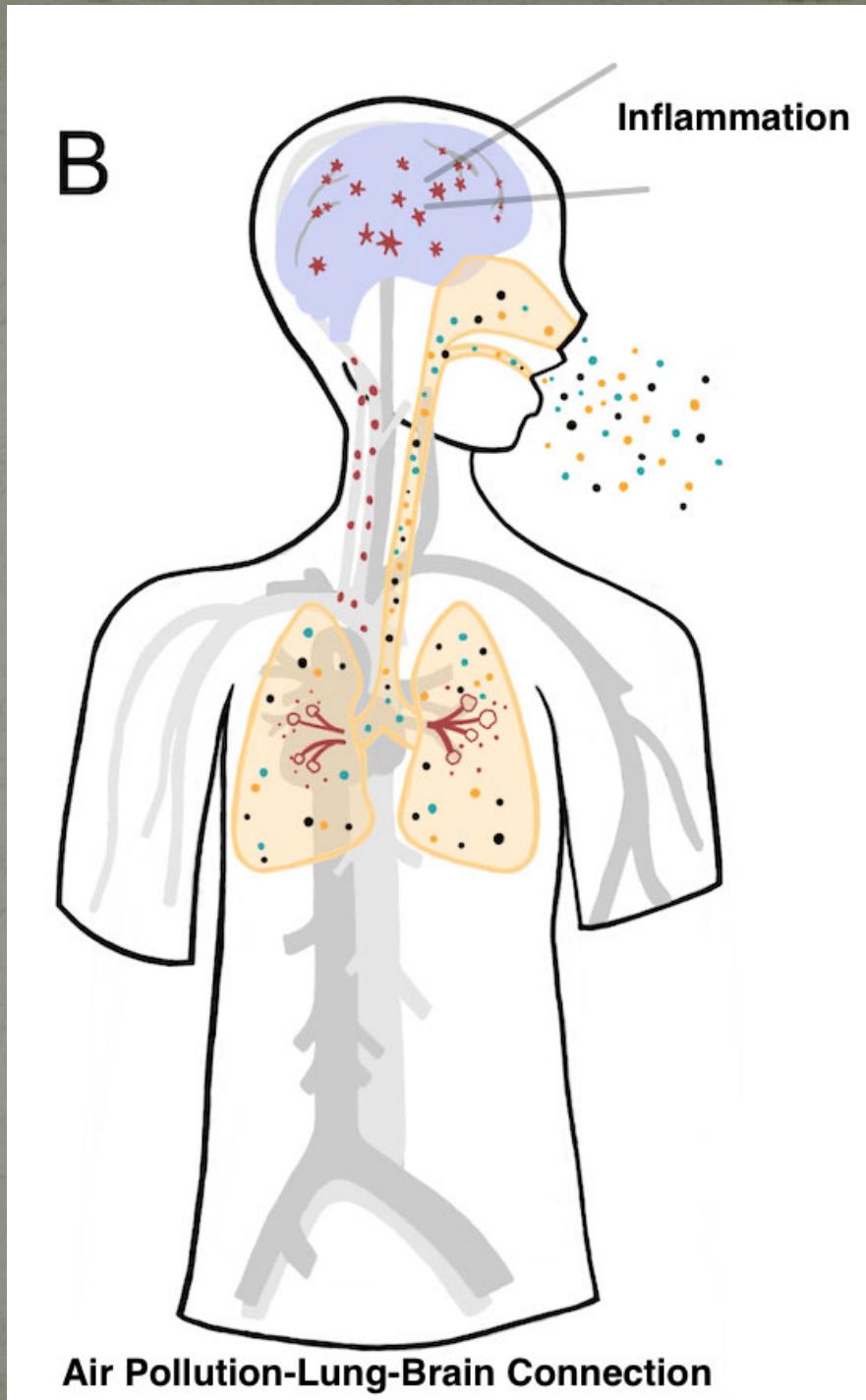
# How might AP increase the risk of PD and Dementia?

- Many components of AP reach the brain and can accumulate (PAHs, metals etc.)
- These toxins can be neurotoxic and/or inflammatory



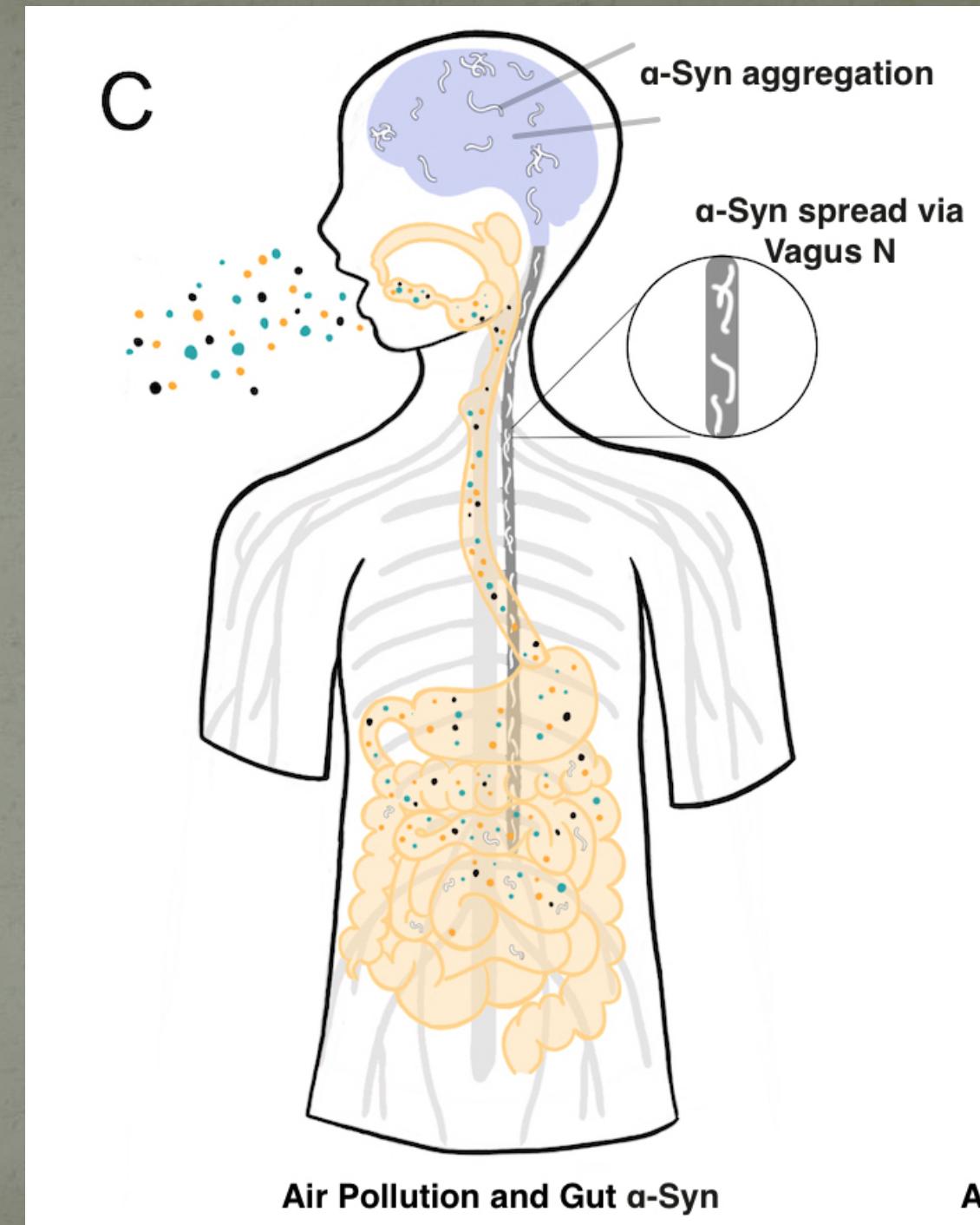
# How might AP increase the risk of PD and Dementia?

- AP causes systemic inflammation (increased TNF, IL-1 $\beta$ )
- In animal models, systemic inflammation can cause loss of DA neurons.
- IBD and hepatitis associated with increased risk of PD.



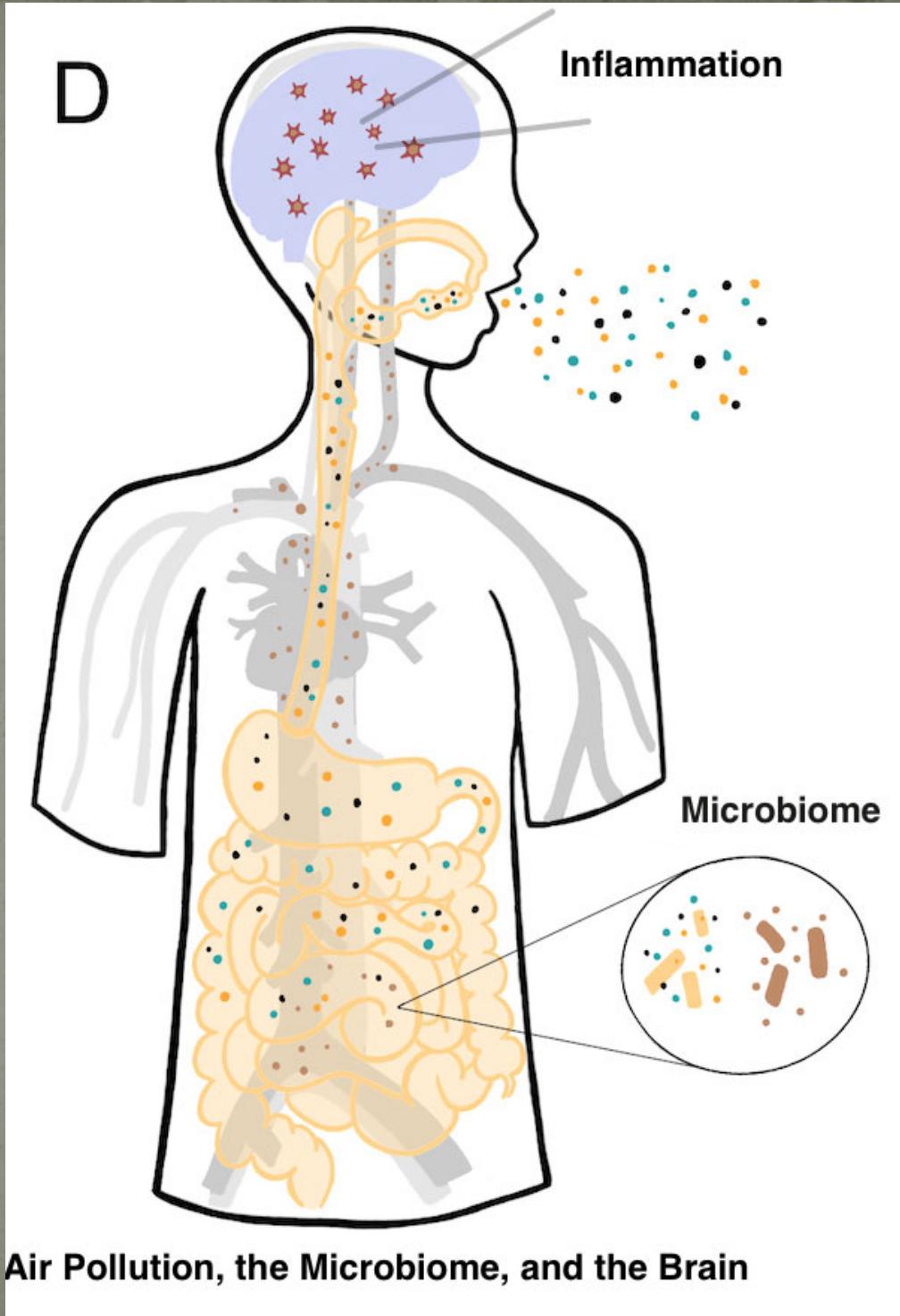
# How might AP increase the risk of PD and Dementia?

- $\alpha$ -Synuclein found in gut neurons and can spread via vagus.
- AP causes gut inflammation and leakiness which promotes  $\alpha$ -synuclein pathology



# How might AP increase the risk of PD and Dementia?

- AP alters microbiome
- Microbiome can be inflammatory
- PD is associated with altered microbiome



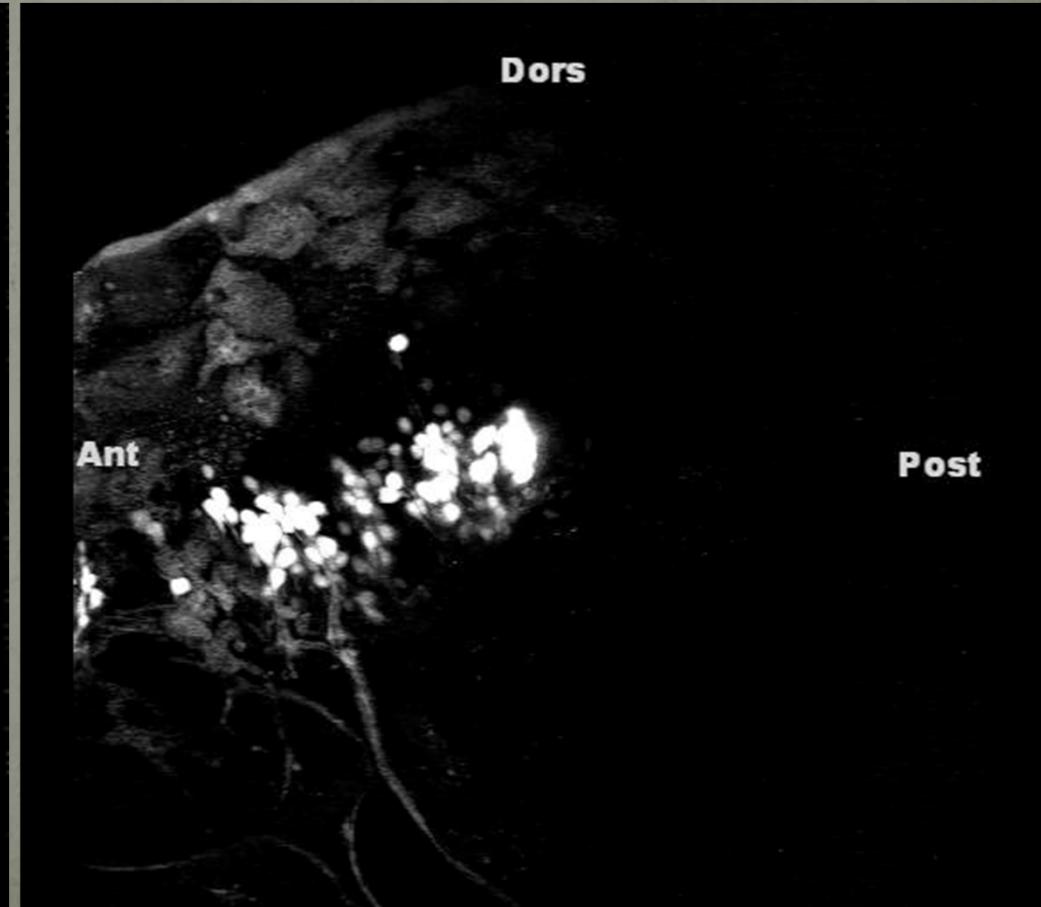
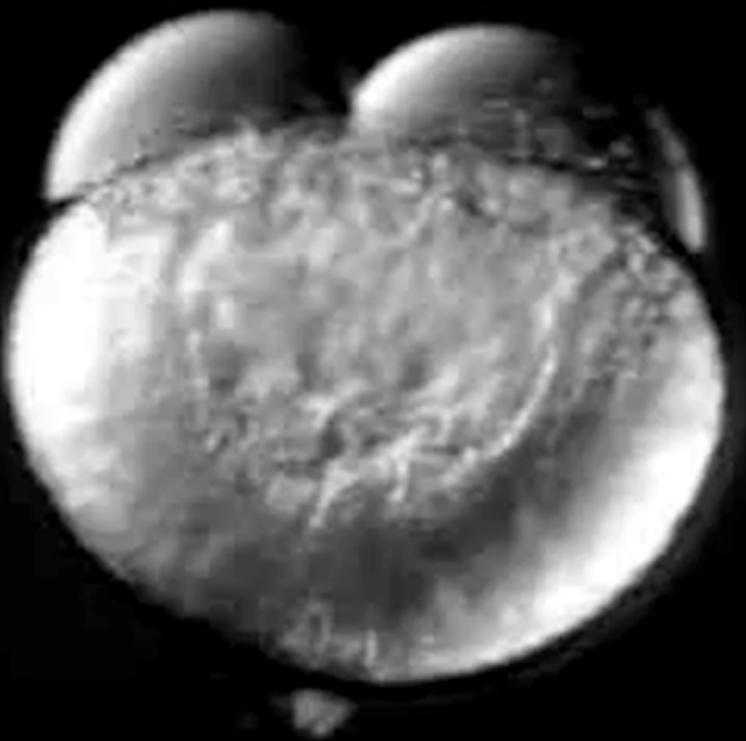
# Our Studies on Direct Toxicity and Inflammation Caused by Diesel Exhaust

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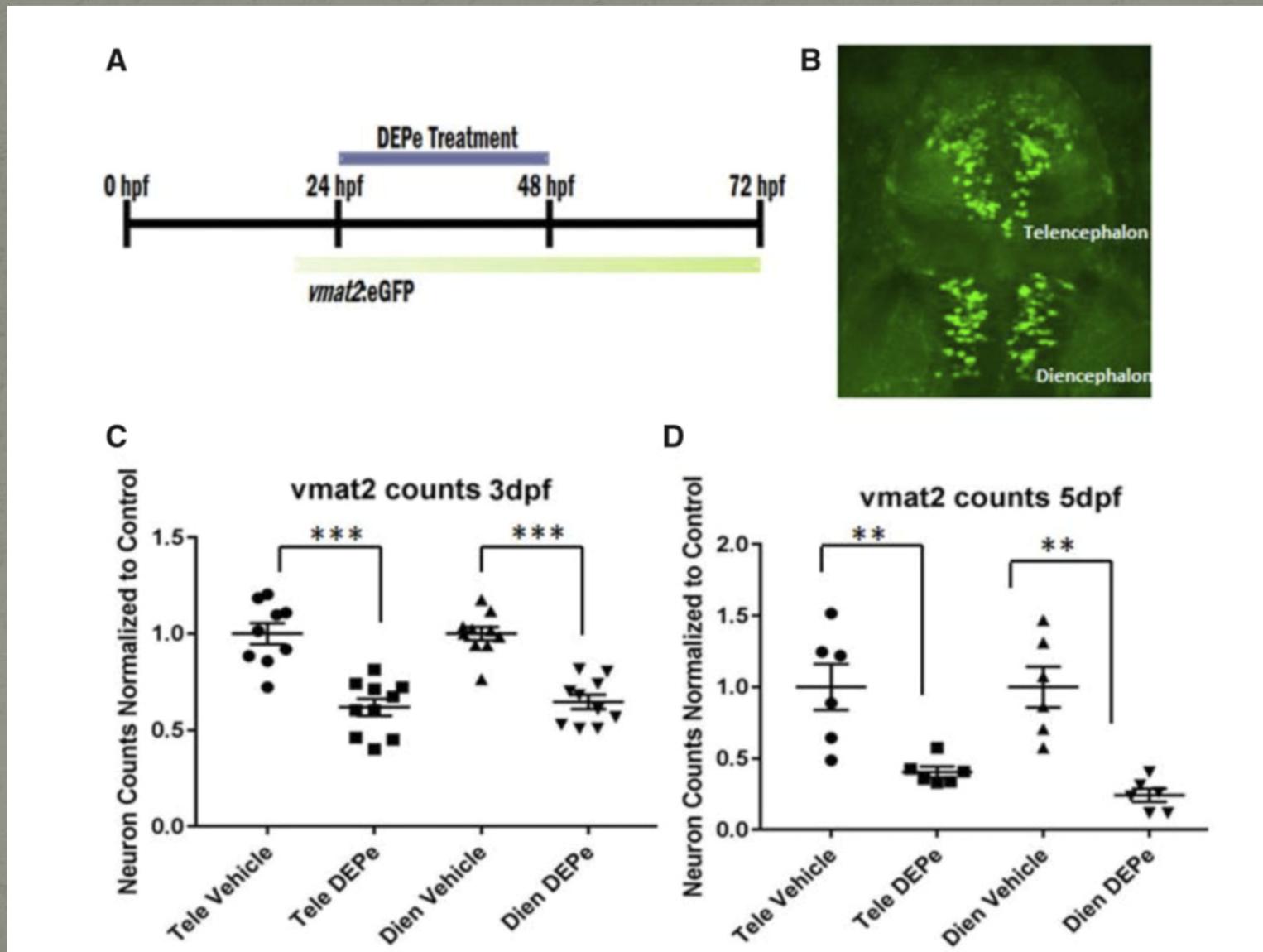
# Zebrafish as a Tool to Study Molecular Mechanisms



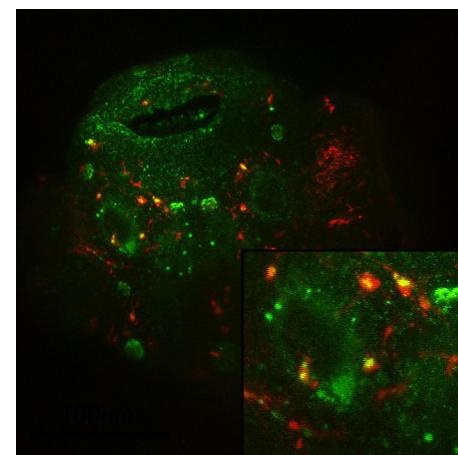
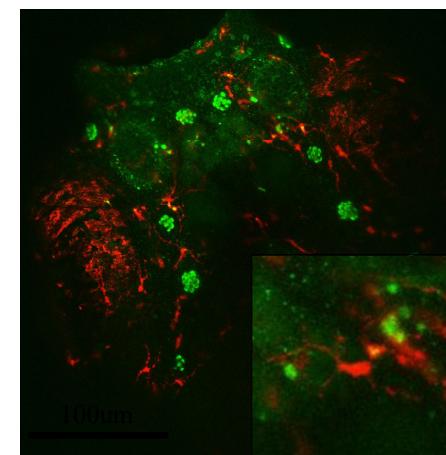
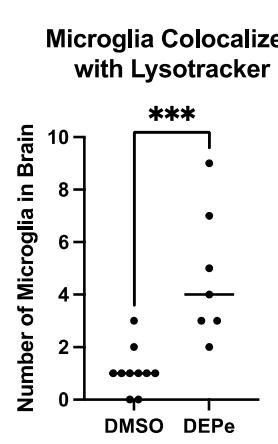
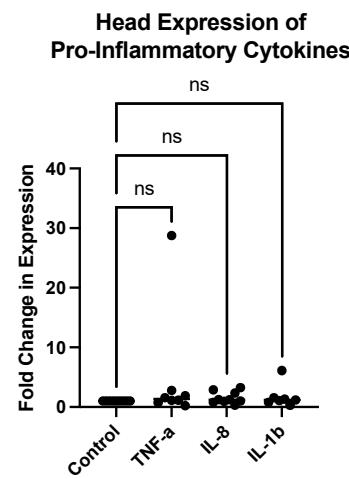
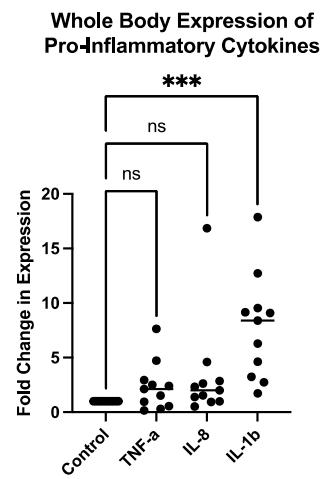
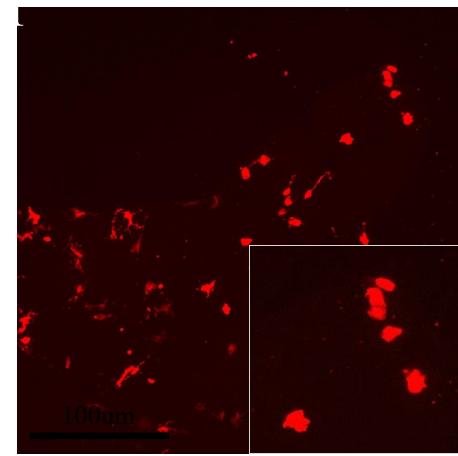
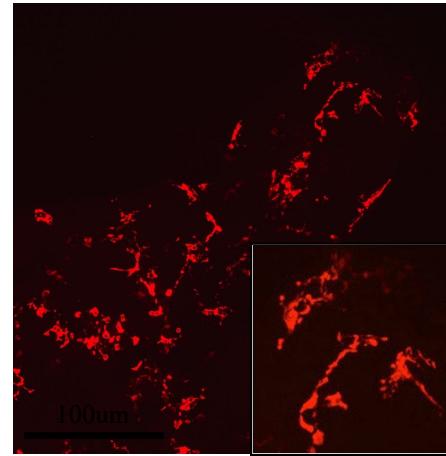
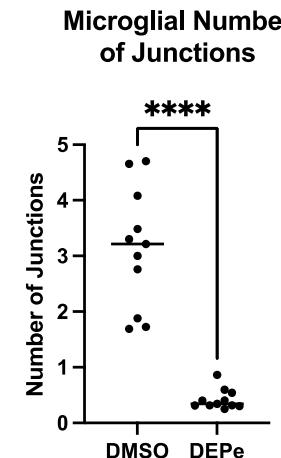
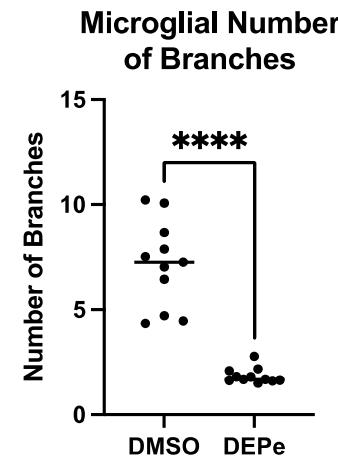
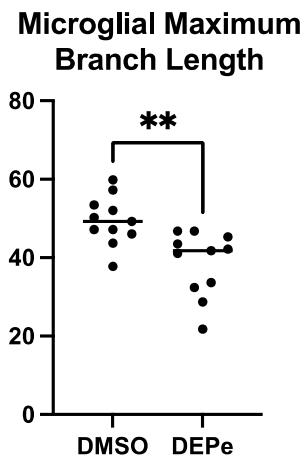
- They develop quickly, are transparent and it is easy to modify them genetically and expose them to toxins



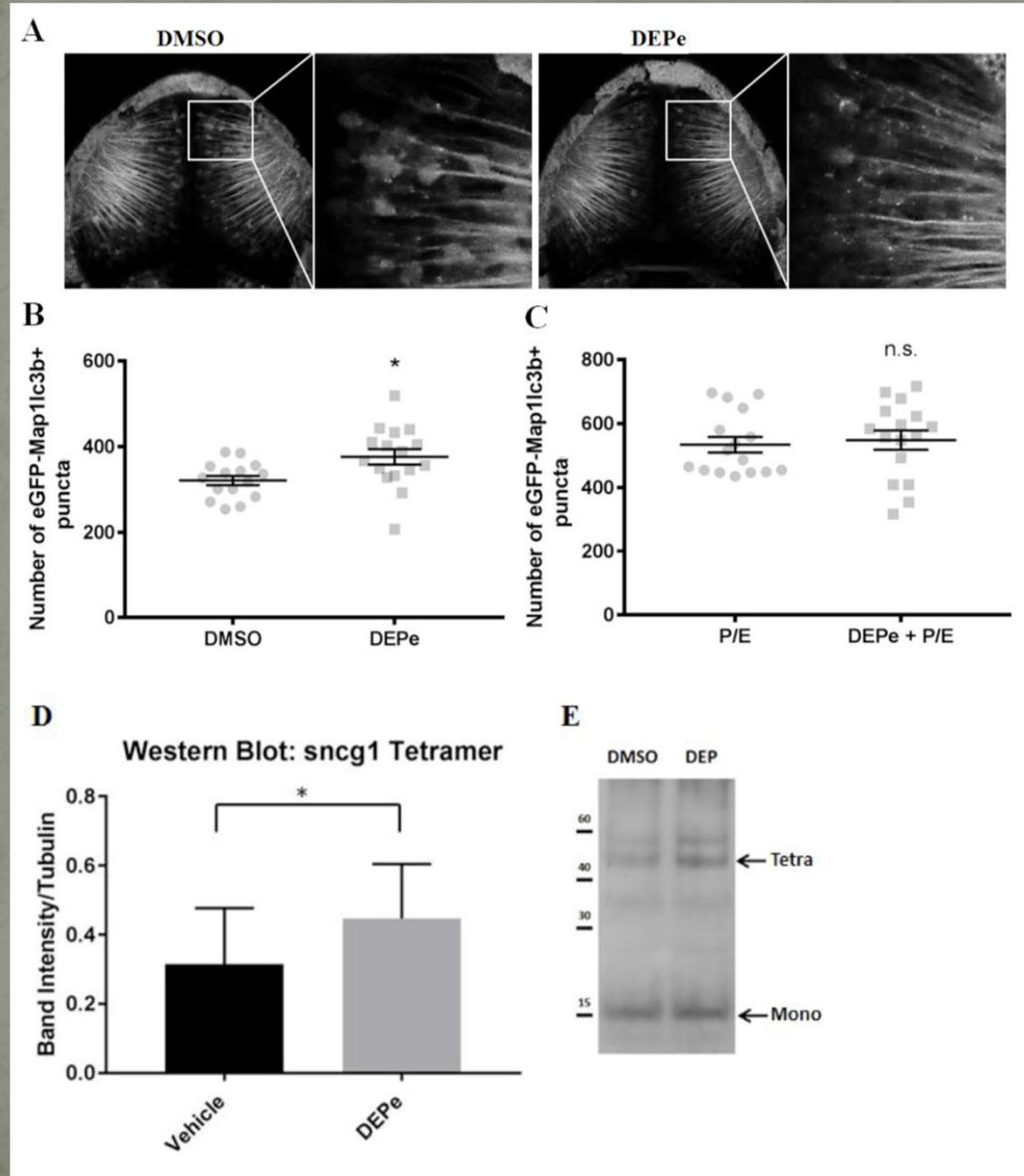
# DEPe is Toxic to Aminergic Neurons



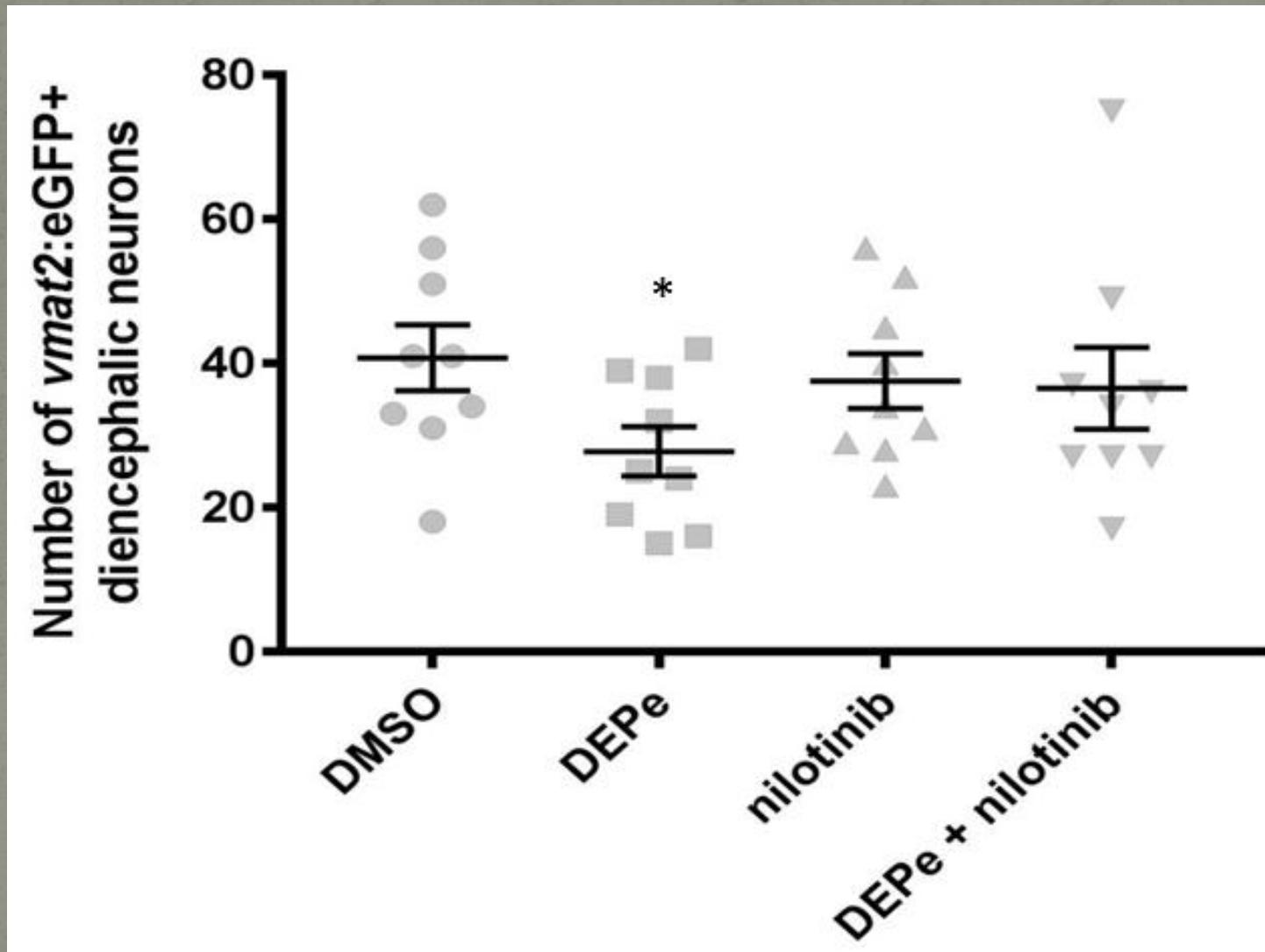
# Inflammatory Response to DEPe



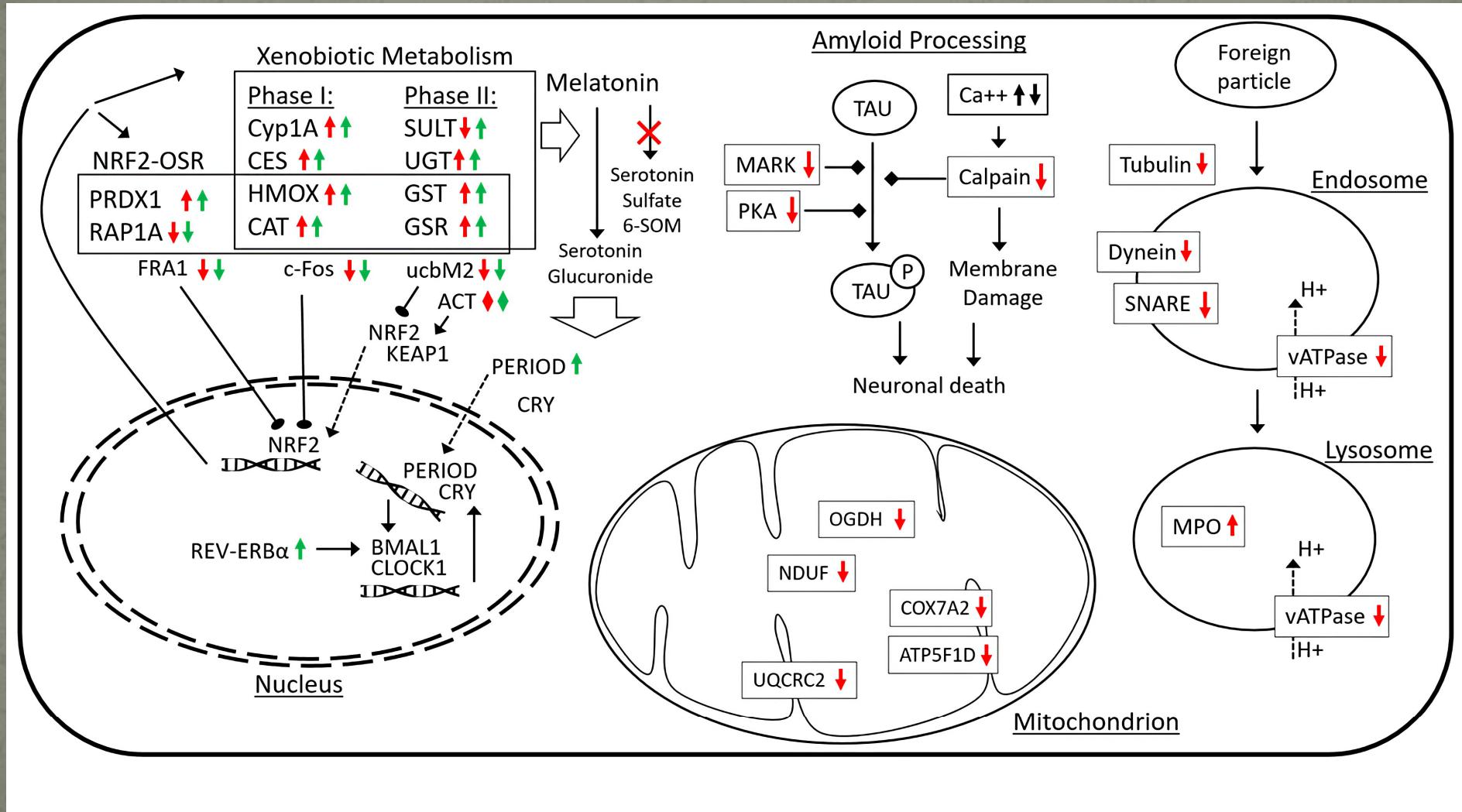
# DEPe Inhibits Autophagic Flux



# Stimulating Autophagy Rescues DEPe-Induced Neuronal Loss



# Transcriptomics and Proteomics of ZF Brains



# Overall Conclusions

- Epidemiological studies support an association of air pollution and Parkinson's disease
- Animal studies support biological plausibility
- Air pollution is likely an important risk factor for Parkinson's disease

# Acknowledgments

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