Air pollution, racial disparities, and COVID-19 mortality

Tesfaye B. Mersha, PhD
Associate Professor
Cincinnati Children's Hospital Medical Center
Department of Pediatrics
University of Cincinnati

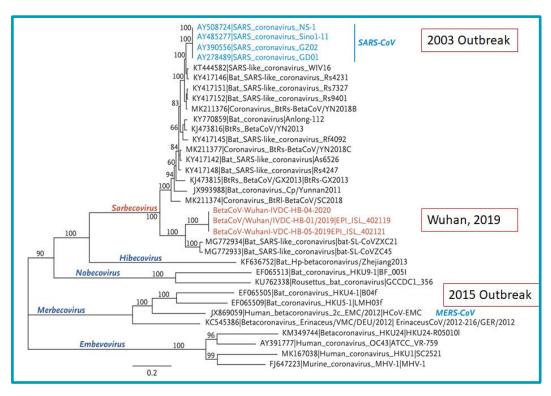




What is COVID-19?

- Coronaviruses (CoV) are a large family of viruses:
 - Middle East Respiratory Syndrome (MERS-CoV)
 - Severe Acute Respiratory Syndrome (SARS-CoV)
- Transmitted between animals and people.
- Wide range of disease symptoms:
 - Elevated inflammatory response
 - Respiratory symptoms
 - Fever, cough
 - Shortness of breath
 - Pneumonia, renal failure and even death.

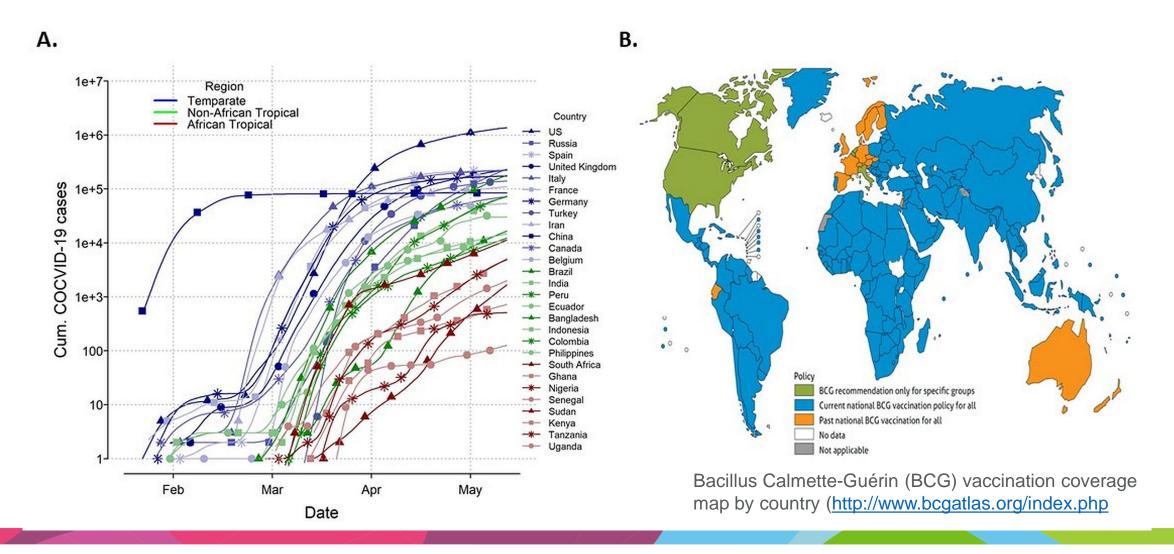
Phylogeny

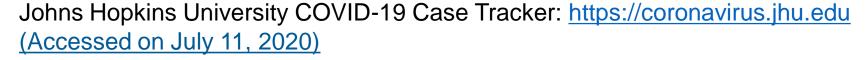






Global Prevalence & Trends









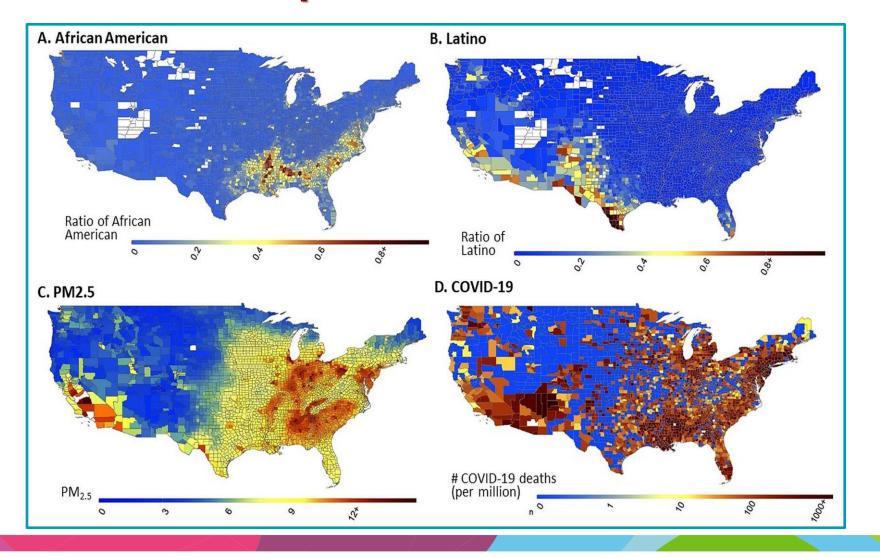
Global variation in COVID-19 prevalence and mortality

- Climate hypothesis
 - seasonality/climate: tropical, temperate zones
- Genetic hypothesis
 - racial differences in ACE-2 gene polymorphisms
- Evolutionary and natural selection hypothesis
 - Th1/Th2 cytokine responses to infections
- Trained immunity hypothesis
 - Bacillus Calmette-Guérin (BCG) vaccination
 - Cytokine storm





U.S. map for COVID-19 epdemic: racial and PM2.5 variations







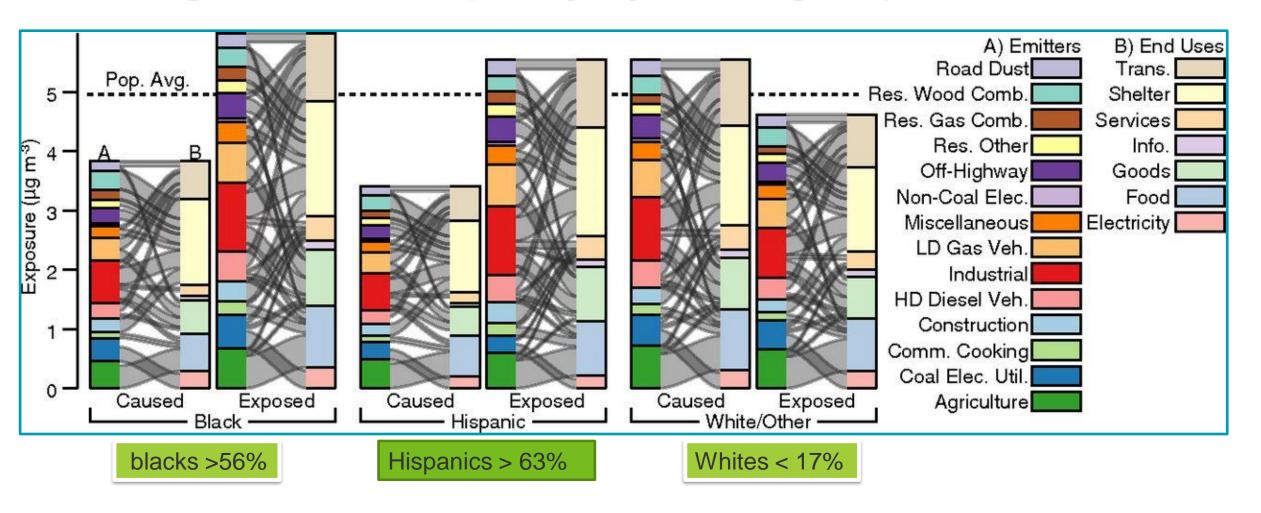
Air pollution, racial disparities, and COVID-19 death

COVID-19 risk factors Racial minority populations Age (older than 65; live Live in densely populated cities & in a nursing home) neighborhoods Sex (male) Live near highways/polluting industries Obesity (BMI >30) Diabetes They are hospitalized and die Heart conditions from COVID-19 more than whites. Hypertension Immuno-compromised % of population Cancer Black-% of COVID-19 death Kidney disease Liver disease Chronic lung disease White- COPD (smoking) 60 80 % · Severe asthma Racial minorities are Racial disparities in housing, more likely to suffer from employment and access to these comorbidities health care are contributing to increased COVID-19 mortality. Genetic variability





Average PM 2.5 inequality by racial groups







Health status measures in US racial/ethnic groups

	White	African Americans	Hispanic	Asian
Cause of Death	Age-adjusted Death rates (per 100,000)			
Heart disease	165.5	203.1	113.9	85.0
Coronary heart disease	101.2	114.8	75.3	55.3
Stroke	35.4	50.9	30.2	28.5
Cancer	170.9	194.2	115.2	102.6
Diabetes mellitus	18.6	38.2	25.1	15.1
COPD	41.8	24.7	15.6	10.3
Asthma	8.2	22.3	7.8	-
Pneumonia/Influenza	15.1	16.3	12.8	12.9
HIV infection	0.9	8.6	2.0	0.3
Infant mortality (/1000)	5.1	11.1	5.0	4.1
Life expectancy at birth	78.9	75.1	81.6	85
HIV mortality (/1000)	18	21	14	
COVID-19 mortality	30.2	70.0	34	29



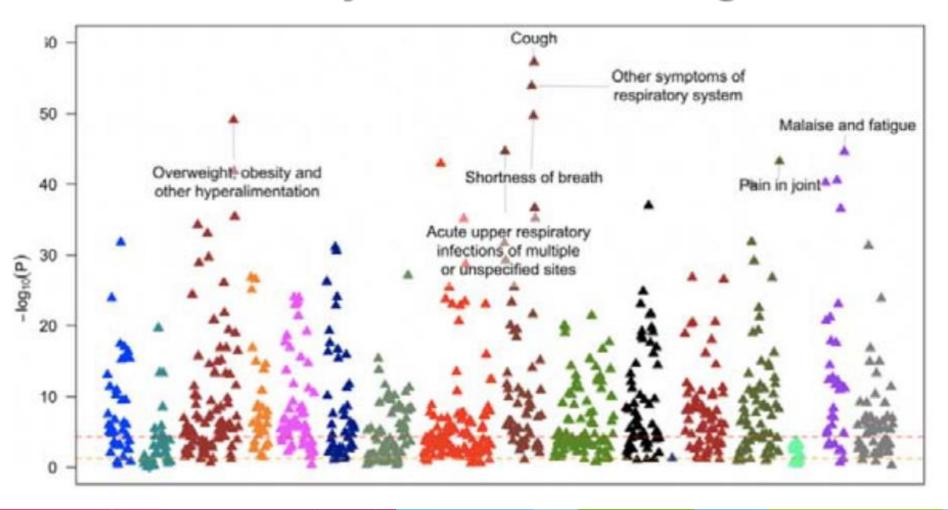


Phenome-wide association study of COVID-19 using EHR data

PheWAS Data:

5,698 COVID-19 patients

■ 7,211 controls

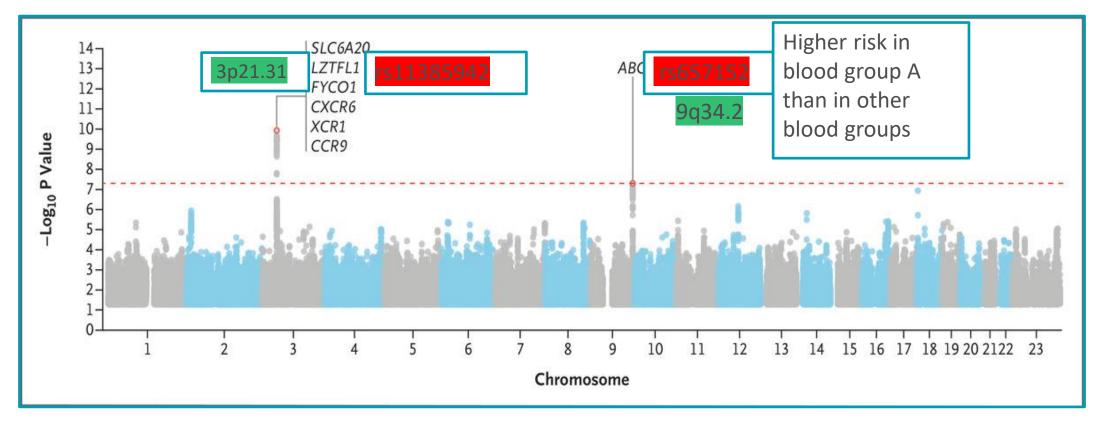






Genome-wide association study of COVID-19

Sample size: Italy (835 patients, 1255 control) and Spain (775 patients and 950 control)



They are still underpowered, and also do not directly address functional variants





Summary

- No evidence so far for SNPs in ACE-2 gene linked with African ancestry
- Link between air pollution and COVID-19:
 - ✓ High COVID-19 risks with higher #s of minorities:
 - live in zip codes close to highways, industry
 - low income, poor housing and worse pollution
 - compromised respiratory, cardiac and other systems
 - -> worse COVID-19 outcome.

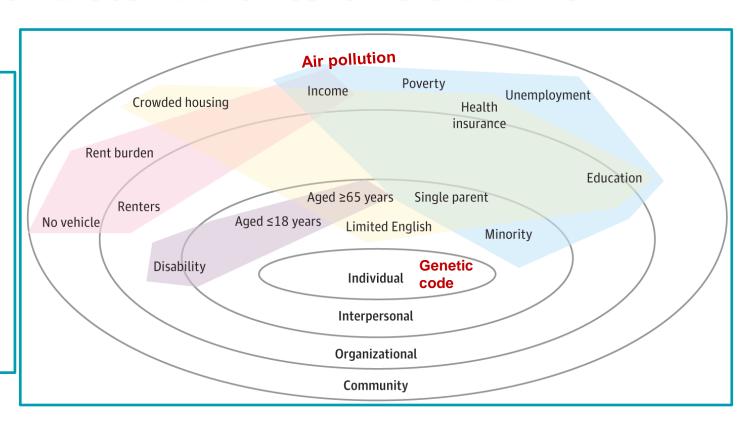
Solution: Address racial disparities -- multilevel interventions!





Future direction Socio-environmental Determinants of COVID-19

Risks of COVID-19 exposure are not evenly distributed. We need to address to socioeconomical disparities







Prevention is better than cure

- Case isolation and contract tracing
- Social distancing (6 ft)
- Limiting public interactions/gathering
- Maintain hand hygiene
- Avoid droplet Containment
- No vaccince at the moment, but tesearch is in progress at a lightning speed!





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