

Early-life environmental exposures and child respiratory health: the exposome reveals its first results

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Early-life exposome and lung function in children in Europe: an analysis of data from the longitudinal, population-based HELIX cohort

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Summary

Background Several single-exposure studies have documented possible effects of environmental factors on lung function, but none has relied on an exposome approach. We aimed to evaluate the association between a broad range of prenatal and postnatal lifestyle and environmental exposures and lung function in children.

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Environmental exposures, lifestyle and Lung function





Smoking













Diet

Lung function

- Smoking (Stocks et al, Lancet Resp Med 2013), outdoor air pollution (Gauderman et al, N Engl J Med 2015) are associated with deficits of lung function growth.
- Emerging concerns for other exposures, including chemical exposures (Gascon et al, Epidemiology 2014; Vernet et al, Env Res 2017; Hansen et al, EHP 2014):
 - persistent organochlorine compounds, such as PCBs (electric insulators) and DDT (pesticides),
 - Perfluorinated compounds (PFASs) (non-stick cookware, water-repellent clothing, stain resistant fabrics, carpets),
 - phthalate metabolites and phenols (*manufacture* of plastics, solvents, personal care products)

Previous studies focused on single exposure or family of exposures

Greenness

Issues with single exposure studies

- Selective reporting of associations (by authors and journal) → Publication bias
- No correction for multiple testing
- Cannot take into account confounding by co-exposures
- Lack of consideration of "mixture effects"

Exposome approach

calls for a holistic view of the effects of environmental exposures on human health by evaluating multiple exposures simultaneously

Aims

To evaluate the association between prenatal and postnatal environmental exposures and FEV_1 in childhood, in the large European Human Early-life exposome (HELIX) study

Aims

To evaluate the association between prenatal and postnatal environmental exposures and FEV₁ in childhood, in the large European Human Early-life exposome (HELIX) study, using an exposome approach

The Helix population

- 6 cohorts with similar design in 6 EU countries
- Recruitment between 2003 and 2010 according to cohort
- Sample size :
 - Entire cohorts: n=32,000 mother-child pairs
 - Helix subcohort: n=1,200 mother-child pairs from the 6 cohorts
- Neuro-development tests and lung function tests at 6-12 yrs

Spirometry test

 By trained research technicians using EasyOne spirometer and a standardised protocol

3 acceptable manoeuvres and reproducible manoeuvres (difference below 200 milliliters between the two highest values for forced vital capacity (FVC) and FEV₁)

- Acceptability and reproducibility criteria refined using data recorded from the spirometer
 - BEV/FVC <5%; 1.5s<FET<10s
 - difference below 200 millilitres between the two highest values for forced vital capacity (FVC) and FEV₁
- Assessment of the curve selection process on 243 examinations by looking at the shape of the curves:
 - same curve selected for 79% of the examination
 - when a different curve was selected, Pearson correlation between FEV₁ of the two different curves= 0.96

Integrated tools for exposome assessment

- **17 exposure families**: 85 prenatal and 125 postnatal exposure variables
- Outdoor factors assessed from monitoring stations, geospatial models, land use databases and satellite data
- Chemical exposures measured in plasma, serum, whole blood or urine samples
- Socio-economic (Family Affluence Score) and lifestyle factors (smoking, diet, breastfeeding, physical activity, alcohol, pets, sleep) assessed by questionnaires

Exposure fan	nilies
Atmospheric	pollutants
UV	
Surrounding r	natural space
Meteorology	
Built environn	nent
Traffic	
Road traffic no	oise
Indoor air	
Organochlorir	ie compounds
Brominated co	ompounds
Perfluorinated	d alkylated substances
(PFAS)	contial alamanta
ivietais and es	
Phthalate met	tabolites
Phenols	
Organophosp	hate pesticide
metabolites	
Water disinfe	ction By-products
Socio-econom	nic and lifestyle

Correlation structure of HELIX full Exposome

(86 exposures from 15 families of factors assessed in 1287 mother-child pairs)

Line colors indicate sign of correlation coefficient (red: ρ<0)

Not adjusted for cohort

(Vrijheid et al, EHP, 2014; Tamayo et al, Env Int 2018)

Statistical analysis

Simulation study aiming at identifying k=1, 2, 10 or 25 real predictors out of 238 exposures (average results)

(Agier et al., *EHP* 2016)

- **1. Imputation** of missing values (multiple imputation)(White, *Stat Med* 2011)
- 2. Standardization of exposures (Normalization)
- 3. Exposome-Wide Association Study (ExWAS)(Patel, PLoSOne 2010)
 - Considering each exposure in sperate regression models
 - Family-wise error rate multiple testing correction method (Li MX, Hum Genet 2012)

4. Deletion-Substitution-Addition (DSA) algorithm (Sinisi, 2004)

- Consideration in a single approach all exposures simultaneously (order one terms only)
- Consideration of all order two exposure-exposure interaction terms (DSA2 model)
- 5. All analyses were **adjusted for a priori selected factors**
 - Cohort, sex, age, height, parental country of birth, breastfeeding duration, season of conception, presence of older siblings, parental education level, maternal age, maternal BMI, postnatal passive smoking, prenatal active and passive smoking.

Population description, n=1,033

Factors	Mean (sd) / %
Cohort : BIB, %	14%
EDEN, %	15%
INMA, %	18%
KANC, %	14%
MOBA, %	24%
RHEA, %	15%
Child sex, % males	47%
Child age (years), m(sd)	8.07 (1.58)
Both parents native from the cohort country, %	84%
Highest parental education: High	56%
Middle	40%
Low	4%
Maternal age at pregnancy (years)	30.9 (4.7)
Active smoking during pregnancy, nb cigarettes,	0.5 (2.0)
m(sd)	
Passive smoking during pregnancy, %	40%
Passive smoking during infancy, %	35%
FEV ₁ %pred	98.8 (13.2)

Prenatal Exposome - FEV₁ association

ExWAS results

No significant results

Postnatal exposome - FEV₁ association

ExWAS results

			Exposure variable	Transf. before	IQR	ExWA	S	ExWAS-ML	.R
2.0	Sum DEHP MECPP	House crowding MEHP		IQR standard		Estimate [95% CI]	P- value	Estimate [95% CI]	P- value
1	Facility density	OXOMINP	Facility density /km ²	Log	1.32	-1.2 [-2.3;-0.1]	0.03	-1.2 [-2.7;0.3]	0.13
le)		Cu	Copper, μg/L	Log2	0.16	-1.0 [-1.9;-0.0]	0.04	-0.9 [-1.8;0.1]	0.06
	•		Ethyl-paraben, μg/g of creatinine	Log2	0.98	-0.5 [-1.0;-0.1]	0.03	-0.6 [-1.2;-0.1]	0.02
-log ₁₀ (0		Sum of (DEHP), µg/g of creatinine	Log2	0.85	-1.3 [-2.3;-0.3]	0.01	-1.3 [-3.1;-0.4]	0.13
0.5			MECPP, μg/g of creatinine	Log2	0.87	-1.3 [-2.3;-0.2]	0.02	-	
0.0			MEHHP, μg/g of creatinine	Log2	0.87	-1.2 [-2.2;-0.2]	0.02	-	
	-2	Log2 (Fold Change)	MEOHP, μg/g of creatinine	Log2	0.84	-1.3 [-2.3;-0.3]	0.01	-	
			ΟΧΟΜΙΝΡ, μg/g of creatinine	Log2	1.34	-0.9 [-1.7;0]	0.04	-0.4 [-1.6;0.8]	0.54
DSA / DSAZ No significant results			House crowding, nb people	None	1.00	-1.1 [-1.9;-0.2]	0.01	-0.9 [-1.7;0.0]	0.04
	~								

Cohort-by-cohort analysis of the association between **pretanal exposome** and FEV₁%

(A) DistInvi	Near_Preg	l²=0.188
BIB ***	F	-1.52 [-6.03, 2.98]
EDEN ***	F	0.44 [-2.10, 2.98]
INMA ***		0.19 [-2.24, 2.63]
KANC ***	F	-0.27 [-5.55, 5.00]
MOBA ***	I	0.76 [-2.91, 4.42]
RHEA ***	⊨-■1	2.15 [0.71, 3.60]
All cohorts	-	1.13 [0.11, 2.15]
		Г
	-8 -4 0 2 4	6

(B) PFNA		²<0.001
BIB ***	⊢	0.14 [-3.47, 3.75]
EDEN ***	⊢	-0.76 [-3.99, 2.46]
INMA ***	⊢_∎ 1	-0.33 [-2.80, 2.15]
KANC ***	⊢	-1.93 [-4.94, 1.07]
MOBA ***	⊢	-1.73 [-5.23, 1.78]
RHEA **	F	-4.42 [-8.01, -0.83]
All cohorts	-	-1.39 [-2.68, -0.10]
		7
	-10 -5 0	5

(C) PFOA ²<0.001 -0.02 [-3.03, 3.00] BIB *** -1.35 [-4.97, 2.27] EDEN *** -1.12 [-3.26, 1.01] INMA *** KANC *** -1.43 [-5.49, 2.63] -1.99 [-4.82, 0.85] MOBA *** -3.05 [-6.77, 0.67] RHEA ** All cohorts -1.40 [-2.66, -0.14] 0 2 4 -8 -4

Cohort-by-cohort analysis of the association between postanal exposome and FEV₁%

(C) ETPA		I ² <0.001
BIB ***	⊢_	-0.27 [-1.21, 0.68]
EDEN ***	⊢	-0.85 [-2.00, 0.29]
INMA ***		-0.62 [-1.75, 0.50]
KANC ***		-1.38 [-3.00, 0.24]
MOBA ***	⊢_ ∎	-0.82 [-1.97, 0.33]
RHEA ***	F	0.87 [-0.80, 2.54]
All cohorts	-	-0.55 [-1.04, -0.06]
	-3 -1 0 1 2 3	

(D) FacilityDe	ns_300m_School	I²=0.76
BIB ***		-7.39 [-11.07, -3.70]
EDEN ***	⊢	-2.82 [-5.69, 0.05]
INMA ***	⊢_∎	-1.06 [-3.03, 0.91]
KANC ***	⊢	-1.05 [-4.33, 2.23]
MOBA ***	⊢	-0.56 [-3.25, 2.12]
RHEA ***		1.90 [-0.66, 4.46]
All cohorts	-	-1.24 [-2.35, -0.14]
	-15 -10 -5 0 5	

(E) House_c	rowding					I ² =0.273
BIB ***		—	-			-2.52 [-4.09, -0.94]
EDEN ***			·	-	-	-0.88 [-2.98, 1.23]
INMA ***						-1.58 [-3.84, 0.68]
KANC ***				-		-0.39 [-2.43, 1.66]
MOBA ***			-	-		0.15 [-1.52, 1.81]
RHEA ***			·	-		-0.73 [-2.98, 1.52]
All cohorts			-	-		-1.06 [-1.91, -0.21]
		I	1	i		
	-6	-4	-2	0	2	

(F) MECPP		I ² <0.001
BIB ***	⊢	-3.02 [-5.45, -0.60]
EDEN ***	·	-1.09 [-5.24, 3.06]
INMA ***	⊢	-0.56 [-2.55, 1.43]
KANC ***	·	-2.83 [-6.26, 0.59]
MOBA ***		-0.19 [-2.50, 2.11]
RHEA ***	⊢	-1.07 [-3.40, 1.26]
All cohorts	-	-1.28 [-2.32, -0.24]
	-8 -6 -4 -2 0 2 4	

I²=0.195

Cohort-by-cohort analysis of the association between **postnatal exposome** and FEV₁%

CONCLUSION

- First study addressing the impact of the exposome on lung function in children by considering a broad spectrum of prenatal and postnatal environmental factors.
- ExWAS was in favor of lower FEV₁ in childhood with
 - prenatal exposure to perfluorinated compounds (PFNA, PFOA)

Association supported by experimental (deWitt et al Toxicol Pathol 2012) and animal studies (Ryu et al, Am J Physiol Lung Cell Mol Physiol 2014), though data in human are scarce (Impinen et al, Env Res 2018; Qin et al. Env Res 2017).

• postnatal DEHP and DINP phthalate metabolites

Convergence with previous findings (Vernet et al EHP 2017; Whyatt et al, EHP 2014; Lin et al, Sci Total Environ 2018).

• postnatal exposure to phenols (ethyl-paraben)

Convergence with previous findings (Vernet et al EHP 2017)

• postnatal exposure to copper (Pearson et al, Eur J Clin Nutr 2005) and house crowding (Cardoso et al., BMC public health 2004).

DISCUSSION

- Limited statistical power due to the multiplicity of the exposures that were tested and the rather small effect on lung function that is expected for these exposures
 No exposure identified by DSA and no two-way interaction between exposures
- Different type and magnitude of misclassification bias between exposures Cautious comparison of the exposure-heath association between exposures
- All estimates are available for future meta-analyses
- This exposome approach should be seen as an initial screening step, making it possible to identify questionable exposures for which more specific research is needed.

DISCUSSION

Public health implications

- Results observed for DINP are of particular public health importance as the use of DINP is currently increasing in Europe as substitution to DEHP and is now among the most common used plasticizer.
- The chemical substances identified are ubiquitous; In helix 9 pregnant women and 9 children over 10 had level above the detection threshold
- **Preventive measures** aimed at lowering exposure to the identified ubiquitous chemicals, through stricter regulation and through informing the public by labelling these chemicals in consumer products, could help to prevent early-life lung function impairment, which in turn might have benefits for long-term health

PERSPECTIVES

To expand the statistical approaches in exposome research in order to:

- Assess combined effect of exposures (i.e. clustering approaches)
- Increase statistical power by reducing the dimension of the exposome by integrating a-priori knowledge, i.e. from biological pathways
- Improve causal inference , i.e. by integrating causal structure within the exposome

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