

www.inspq.qc.ca

L'interprétation des données de biosurveillance: opportunités et limites

Pierre Ayotte, PhD

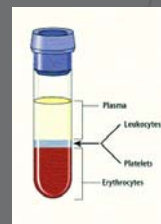
JASP, Montréal, QC
25 novembre 2013

Institut national de santé publique
Québec 



Les études de biosurveillance...

- ...fournissent des données sur la **prévalence** et les **concentrations** de polluants dans les **fluides biologiques**
- ...sont les **meilleurs outils** pour caractériser l'exposition aux contaminants environnementaux, car les concentrations mesurées reflètent **l'ensemble des voies/sources d'exposition**



Les études de biosurveillance...

- ... permettent d'établir les **niveaux d'exposition dans une population**, par âge, sexe, ethnicité ou autres caractéristiques sociodémographiques
- ... fournissent des résultats permettant:
 - d'établir des **priorités de recherche**
 - de mesurer les **tendances temporelles**
 - de vérifier l'**efficacité de mesures de contrôle/politiques de santé publique**

Établir les priorités de recherche

(Aylward et al. EHP, 2013; 121, 287-294)

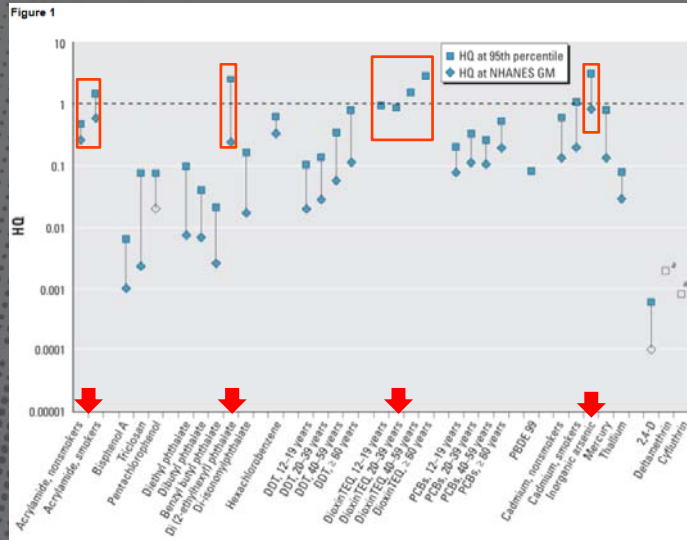
Données du « National Report on Human Exposure to Environmental Chemicals » CDC 2012:

- Comparaison des concentrations de biomarqueurs avec des valeurs de références
- « **Biomonitoring Equivalents** » (BE):
 - Concentrations équivalentes à la **RfD**
 - Concentrations équivalentes à la « **Risk-specific dose** » - i.e. risque de cancer de 1×10^{-4} *

$$HQ = \frac{[\text{Biomarker}]}{BE}$$

*Hays et al. Regul Toxicol Pharmacol, 2008; 51 (3 suppl): S4-S15.

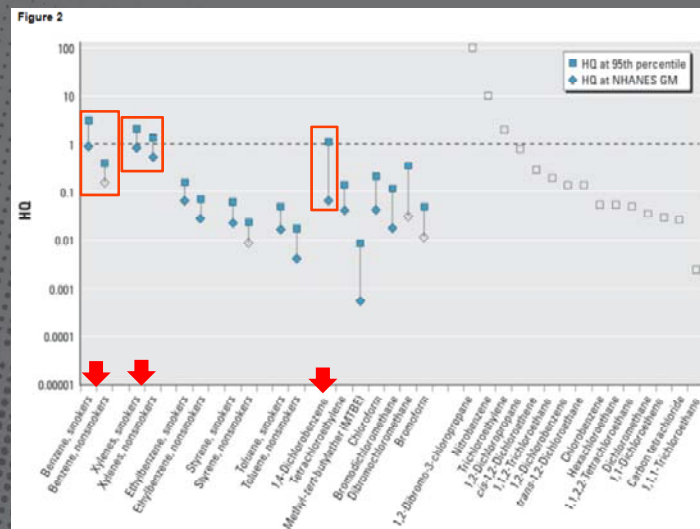
HQ pour les données de NHANES COV exclus



Institut national
de santé publique
Québec

5

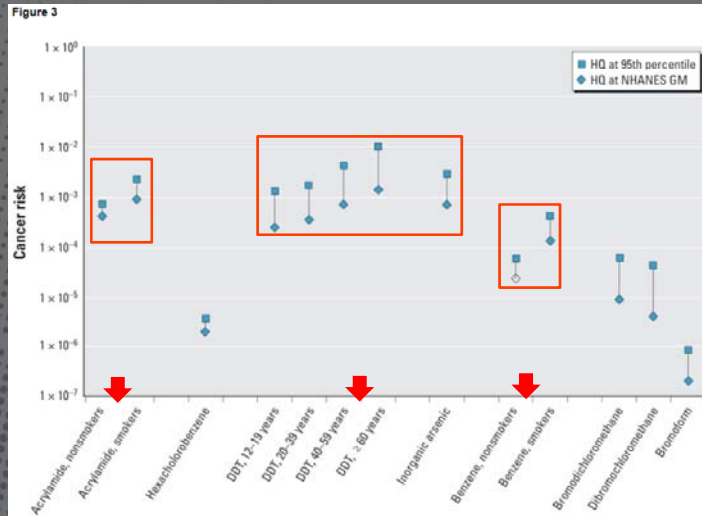
HQ pour les données de NHANES COV



Institut national
de santé publique
Québec

6

HQ pour les données de NHANES Cancérigènes



7

Institut national
de santé publique
Québec

Tendances temporelles Acides perfluoroalkylés aux É.U

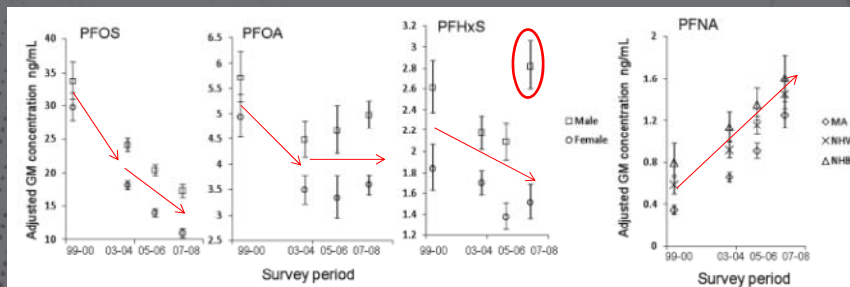


Figure 1. Temporal trend for the model adjusted geometric mean serum concentrations of PFOS, PFOA, and PFHxS by sex and of PFNA by race. The error bars represent the 95% confidence intervals. MA (Mexican American), NHW (non-Hispanic white), NHB (non-Hispanic black).

Kato K, et al.. Environ Sci Technol. 2011;45:8037-45.

8

Institut national
de santé publique
Québec

Convention de Stockholm POPs

10th Anniversary of the adoption of the Stockholm Convention

The Stockholm Convention on Persistent Organic Pollutants was adopted on 22 May 2001 in Stockholm, Sweden and entered into force on 17 May 2004.

Where it started

The Stockholm Convention protects human health and the environment from persistent organic pollutants through a range of measures aimed at reducing and ultimately eliminating their releases.

10 MAJOR ACHIEVEMENTS IN 10 YEARS:

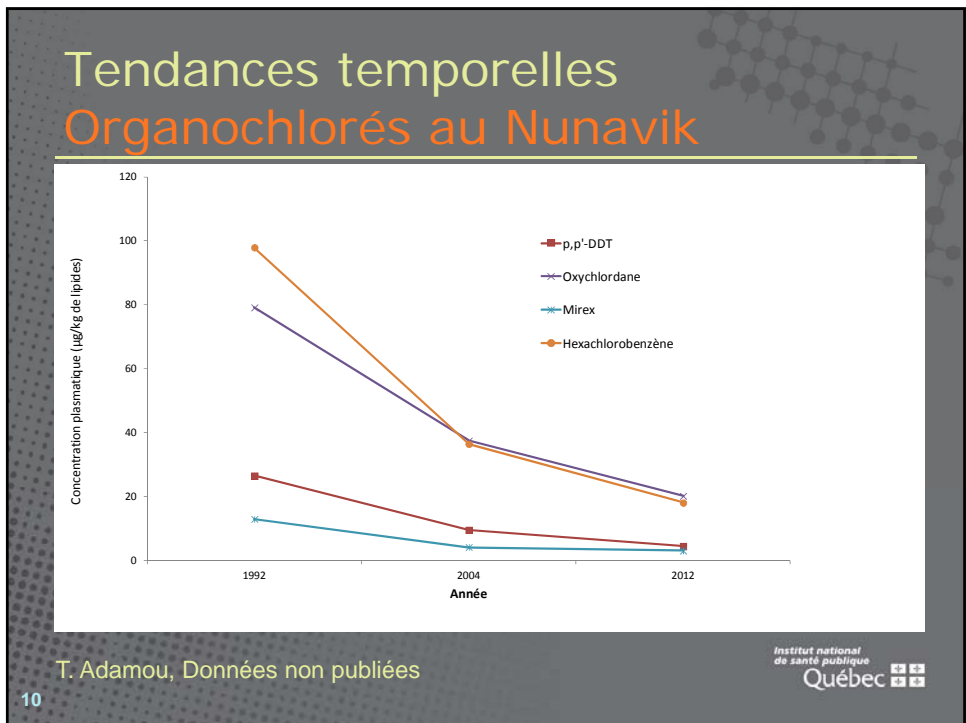
- The Stockholm Convention has 173 Parties – 172 countries and one regional economic integration organization (as of 1 May 2011)
- 132 Parties have developed and transmitted their national implementation plans
- The POPs clearing house mechanism has been established and used for exchange of information and networking, and Parties were provided with relevant guidance and capacity building in support of implementation of the Convention
- Specific exemptions for aldrin, chlordane, dieldrin, heptachlor, hexachlorobenzene and mirex have expired, no further registrations for these exemptions may be made
- Nine new POPs were listed in Annex A, B, and C to the Stockholm Convention in May 2009 and one new POP was listed in April 2011
- The first regional and global monitoring reports on POPs were produced
- Regional centres for capacity-building and transfer of technology were established
- The POPs Elimination Network was established
- The DDT Global Alliance was established
- Considerable synergy among the Basel, Rotterdam and Stockholm conventions was achieved

<http://chm.pops.int/TheConvention>

Institut national de santé publique Québec

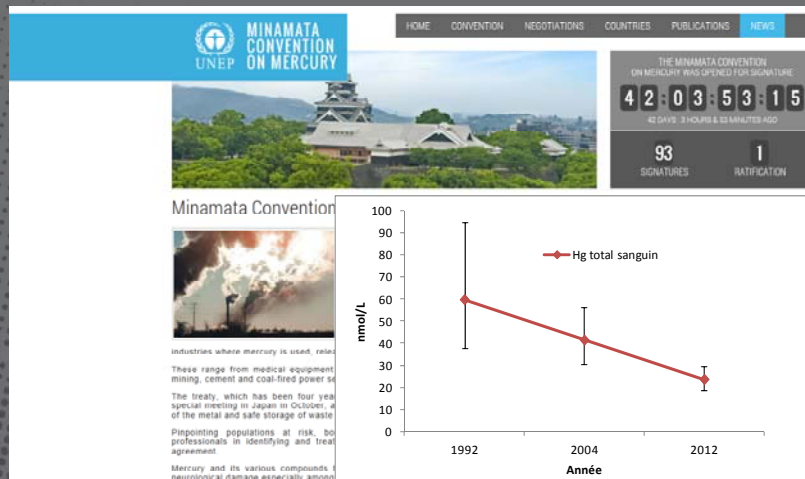
9

Tendances temporelles Organochlorés au Nunavik



10

Convention de Minamata Mercure



11 <http://www.mercuryconvention.org/>

Institut national
de santé publique
Québec

Les limites....

- La plupart des études de biosurveillance sont des **études transversales**
- Les concentrations de biomarqueurs et la présence de la maladie déterminés **au même moment**
- Inférence causale
 - 1) Association statistique
 - 2) **Ordre temporel approprié**
 - 3) **Explications alternatives**

12

Institut national
de santé publique
Québec

BPA et maladies chroniques...

Reses Biopl

Bisphenol A expo albumin excretion

Abstract

Keywords

INTRODUCTION

CONCLUSIONS

Association of Urinary Bis Heart Disease: Evidence f

Abstract

Introduction

Conclusions

Renal Function, Bisphenol A and Alkylphenols: Results from the National

Abstract

Introduction

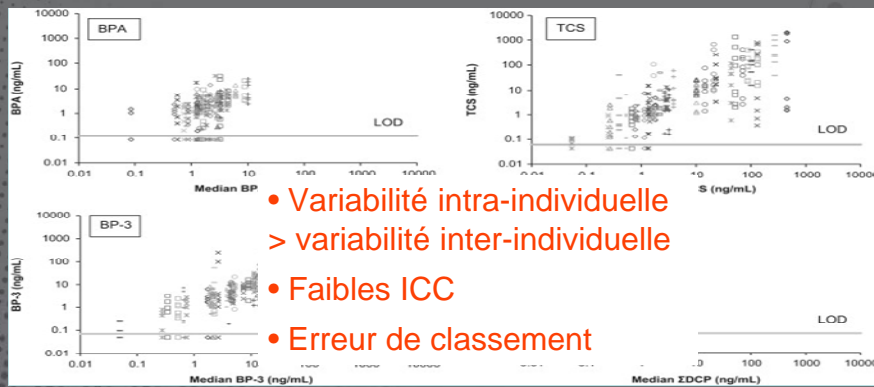
Conclusions

13

13

13

Variabilité des concentrations urinaires de BPA



- Variabilité intra-individuelle > variabilité inter-individuelle
- Faibles ICC
- Erreur de classement

Lassen et al. Environ Res. 2013;126:164-70.

Institut national de santé publique Québec

BPA et obésité chez les enfants/adolescents

• Données de NHANES 2003-2008: 2838 participants (6-19 ans)

Association Between Urinary Bisphenol A Concentration and Obesity Prevalence in Children and Adolescents

Joseph T. Trasande, MD, MPH
Teresa M. Mone, MS, PhD, MPH
Jan H. Han, MD, PhD

Background: Bisphenol A (BPA) is used to manufacture polycarbonate resin and is a breakdown product of coatings that prevent metal corrosion in food and beverage containers. In the US population, exposure to nearby sources of BPA is nearly ubiquitous, with 92.0% of persons 6 years or older identified in the 2003-2004 National Health and Nutrition Examination Survey (NHANES) as having detectable BPA levels in their urine. A comprehensive, cross-sectional study of diet, indoor and outdoor air, and solid and liquid food in pre-adolescent children suggested that dietary sources contribute to BPA exposure. BPA is rapidly excreted in urine, with a half-life in the range of 4 to 43 hours.¹ However, BPA also has been detected in fat² and urinary BPA concentrations do not decline rapidly with fasting time, suggesting that the unappreciated association between BPA and other physiologic compartments.³

In experimental studies, BPA exposure has been shown to disrupt lipid and glucose metabolism, suggesting that it may increase body mass and therefore contribute to obesity in humans. This possibility has recently been explored in adults. One cross-sectional study found an association between urinary BPA concentration and

Table 3. Association of Urinary Bisphenol A Concentration and Body Mass Outcomes From Full Multivariable Models*

Urinary bisphenol A concentration quartile	Body Mass Outcome				
	Increment in BMI z Score (95% CI)	OR (95% CI)	Prevalence (95% CI), %	OR (95% CI)	Prevalence (95% CI), %
1 [Reference]	1 [Reference]	31.1 (25.4 to 36.6)	1 [Reference]	10.3 (7.5 to 13.1)	
2	0.12 (-0.02 to 0.27)	1.26 (0.96 to 1.64)	36.0 (30.8 to 41.2)	2.24 (1.54 to 3.24) [†]	20.1 (14.5 to 26.6)
3	0.16 (0.01 to 0.30) [‡]	1.28 (0.96 to 1.69)	36.4 (29.9 to 42.8)	2.06 (1.46 to 2.96) [‡]	19.0 (13.7 to 24.2)
4	0.22 (0.06 to 0.39) [‡]	1.26 (0.86 to 1.82)	35.9 (29.7 to 42.2)	2.57 (1.72 to 3.83) [‡]	22.3 (16.6 to 27.8)
Log transformed bisphenol A concentration, ng/mL	0.06 (0.001 to 0.11) [‡]	1.04 (0.92 to 1.18)		1.24 (1.06 to 1.44) [‡]	

*For all models, n=2814. All models control for sex, caloric intake, television watching, poverty to income ratio, parental education, serum cotinine level, urinary creatinine level, age, and non-obesity categories.
†P<.05.
‡P<.01.

Conclusions: Urinary BPA concentration was significantly associated with obesity in this cross-sectional study of children and adolescents. Explanations of the association cannot rule out the possibility that obese children ingest food with higher BPA content or have greater adipose stores of BPA.

urinary BPA concentration and adult diabetes, cardiovascular diseases, and abnormalities in liver fat.

Institut national de santé publique Québec

Un usage inapproprié des données de NHANES

Use of NHANES Data to Link Chemical Exposures to Chronic Diseases: A Cautionary Tale

Judy S. Lukof^{1,2,3}, Michael Goodman⁴, Daniel G. Naiman⁵

¹United Research, LLC, Concord, MA, USA; ²Department of Epidemiology, McGill University, Montreal, QC, Canada; ³Department of Environmental Health Sciences, Harvard University, Boston, MA, USA; ⁴Department of Environmental Health Sciences, Harvard University, Boston, MA, USA; ⁵Department of Environmental Health Sciences, Harvard University, Boston, MA, USA

Abstract
Addressed The National Health and Nutrition Examination Survey (NHANES) is one example of cross-sectional datasets that have been used to draw causal inferences regarding environmental chemical exposures and adverse health outcomes. Our objective was to analyze four NHANES datasets using a combination of prior statistical methods to address the following questions: (1) Does a consistent association between urinary bisphenol A (BPA) measures and diabetes, coronary heart disease (CHD), and/or heart attack exist across surveys? (2) Are there any apparent differences in associations between individuals with and without phthalate butyl benzoate (PBB) and phthalate dibutyl benzyl (PDBB) exposure? (3) Are there any differences in associations between individuals with and without phthalate butyl benzoate (PBB) and phthalate dibutyl benzyl (PDBB) exposure?

Methods and Principal Results: Regression models were adjusted for age, sex, race/ethnicity, education, income, smoking, heavy drinking, BMI, waist circumference, cotinine intake, family history of heart attack, hypertension, and other factors.

Conclusions: Using scientifically and clinically supportable exclusion criteria and outcome definitions, we consistently found no associations between urinary BPA and heart disease or diabetes. These results do not support associations and causal inferences reported in previous studies that used different criteria and definitions. We are not drawing conclusions regarding whether BPA is a risk factor for these diseases. We are stating the opposite—that using cross-sectional datasets like NHANES to draw such conclusions about short-lived environmental chemicals and chronic complex diseases is inappropriate. We need to expand resources on appropriately designed epidemiologic studies and toxicological explorations to determine whether these types of chemicals play a causal role in chronic diseases.

Introduction
The Centers for Disease Control and Prevention's (CDC) National Biomonitoring Program is part of the National Health and Nutrition Examination Survey (NHANES) program that monitors 400 chemicals to track in the US. The scientific literature is replete with publications regarding associations between US population levels of chemicals in blood and/or urine and health outcomes or functional indicators using NHANES data [1-12]. A 2004 review in *Environmental Health Perspectives* on biomonitoring performance goals and open issues, has been the subject of numerous research and policy articles and a 2006

Funding: This research was supported by the Polycarbonate/BPA Global Group of the American Chemistry Council (<http://plastics.americanchemistry.com/>), Product Groups and State/Polycarbonate/BPA Global Group. The funder had no role in study design, data collection and analysis, decision to publish, or preparation of the manuscript. The funder was given the opportunity to proffer ONLY non-substantive editorial suggestions.

Competing Interests: The authors have declared that no competing interests exist. The authors have no financial or other relationships that could be construed as a conflict of interest. The authors have no financial or other relationships that could be construed as a conflict of interest.

Introduction
The Centers for Disease Control and Prevention's (CDC) National Biomonitoring Program is part of the National Health and Nutrition Examination Survey (NHANES) program that monitors 400 chemicals to track in the US. The scientific literature is replete with publications regarding associations between US population levels of chemicals in blood and/or urine and health outcomes or functional indicators using NHANES data [1-12]. A 2004 review in *Environmental Health Perspectives* on biomonitoring performance goals and open issues, has been the subject of numerous research and policy articles and a 2006

Institut national de santé publique Québec

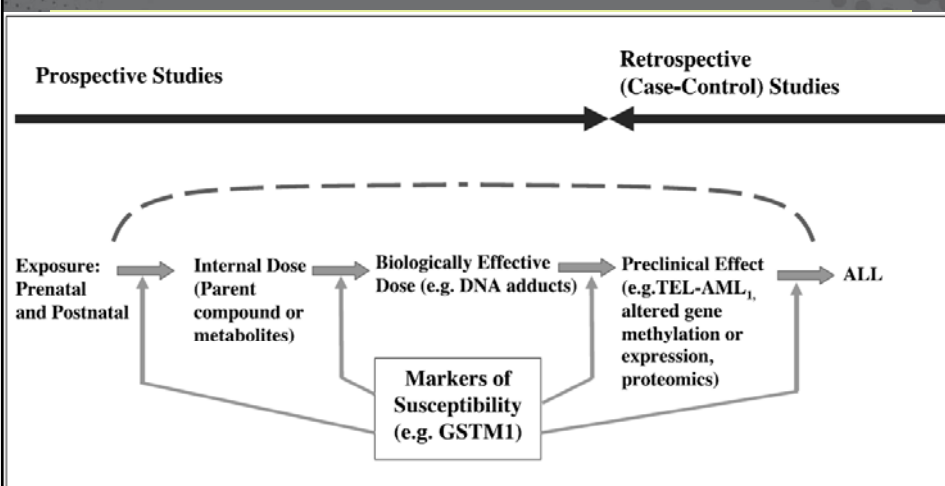
APPROCHE PROPOSÉE POUR LA RECHERCHE EN SANTÉ ENVIRONNEMENTALE

- Études prospectives avec des sous-groupes de participants pour étudier les relations entre des expositions environnementales et des biomarqueurs d'effets précoces
- Études cas-témoin nichées dans la cohorte pour étudier:
 - Les relations entre les maladies des biomarqueurs d'effets précoces modulés par les expositions environnementales
 - Les relations entre les maladies et ces expositions environnementales

17

Institut national
de santé publique
Québec

L'approche "Meet-in-the-Middle-Approach": L'exemple de la leucémie aigue lymphoblastique

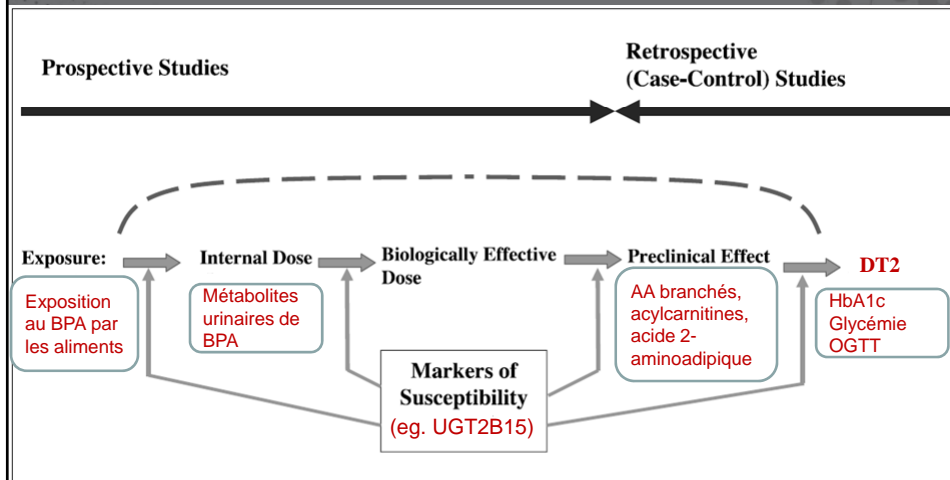


18

Vineis, P. and Perera, F. CEBP, 2007; 16: 1954-65.

Institut national
de santé publique
Québec

L'approche "Meet-in-the-Middle-Approach": Exposition au bisphénol A et diabète de type 2*



*Silver, MK et al.. PLoS One. 2011;6(10):e26868.

Institut national
de santé publique
Québec

Enquête canadienne longitudinale sur le vieillissement (ECLV)

The screenshot shows the homepage of the Canadian Longitudinal Study on Aging (ECLV). Key elements include:

- Logo:** clsa élcv - Canadian Longitudinal Study on Aging / Étude longitudinale canadienne sur le vieillissement
- Navigation:** À propos de nous | Participants | Éthique | Centres de l'ÉLCV | Unités de soutien | Partenaires | Chercheurs | Médias
- Main Banner:** Grand lancement et événement promotionnel de l'ÉLCV. Étude longitudinale canadienne sur le vieillissement. Regardez nos vidéos.
- Progress Bar:** 31 990 Participants à ce jour. Objectif 50 000.
- Search and Language:** Taille de la police + - | Langue en fr | Recherche
- Footer:** Institut national de santé publique Québec

20

CONCLUSIONS

- Les **études de biosurveillance** constituent les outils de choix pour **caractériser l'exposition des populations** aux contaminants environnementaux
- Leur utilisation pour établir des relations entre les **expositions environnementales** et les **maladies chroniques** n'est pas appropriée
- Investissons dans les **études prospectives** en cours