ENVIRONMENTAL ANALYSIS OF DAILY EMERGENCY DEPARTMENT VISITS IN SHELBY COUNTY

Background

According to the 2015 Global Burden of Disease Study, air pollution is a key contributor to premature mortality(1). Previous epidemiological studies have shown a correlation between severe air pollution and hospital admissions for respiratory and cardiovascular diseases(2)(3). The effects of air pollution on hospitalization have become a growing concern of public health.

Objectives

By using daily counts of emergency department (ED) visits and Air Quality Index (AQI) in Shelby County from 2000-2015, the primary objectives of this study are

- To investigate associations between air pollution and daily ED vis-its in Shelby County
- To evaluate the severity and timing effects of each air pollutant on common diseases
- To generalize the trend and make prediction of daily ED visits
- To provide evidence for future studies

Figure 1: flow chart of study design procedure

Air Quality Index (AQI)

Environmental Protection Agency (EPA): SO2, NO2, CO, Ozone. and particle maters

Tennessee Hospital Discharge Data System (HDDS)

NO2, CO, Ozone, and particle n		
AQI Levels	Туре	Crite
Good: 0-50 Moderate: 51-100 Sensitive Unhealthy: 101-150 Unhealthy: 151-200 Very Unhealthy: 201-300 Hazardous: 300-500	ICD-9	350-459: Circul 460-519: Respin 520-579: Digest 580-629: Genite 800-999: Injury 992.x or ECode E900.1, E900.0
	Age	3-11: Children >65: Elder
	Work-	Workers' Com
	related	primary payer
Effect Analysis 1. Analysis of air pollutants types by odds ratios 2. Evaluate effect of each p tile Range (IQR)		

NOAA Online Weather

Data

National Weather Service

Model and Predict on future ED visits

Methods

Results

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Figure 2: Time series plot of daily ED visits with estimated trend and seasonality. Note: Trend and seasonality were estimated by time series decomposition.



Figure 3: Odds ratio plots of 9 ED visits types by each air pollutant at different AQI levels. Note: Dashed ring: OR=1. Odds ratios were estimated by logistic regression.



The counts of daily ED visits in Shelby County increased every year and showed a quarterly seasonality as shown in Figure 2.

• In general, higher AQI levels were likely to result more ED visits when compared to good air quality condition (AQI: 0-50), regardless of pollutants, age group, diagnosis and type of ED. Details of odds ra-

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found in Figure 3.

Figure 4: IQR table of lagging effect by each air pollutant Note: Results were generated by a multivariate regression

lag	CO	SO2	NO2	Ozone	PM25	PM10
Lag(0)	0.488	0.128	0.222	0.118	0.166	0.563
Lag(1)	0.678	0.143	0.274	0.146	0.206	0.762
MA(3)	1.277	0.304	0.543	0.289	0.407	1.380
MA(7)	0.727	0.210	0.302	0.168	0.277	0.587

more than other time periods, which suggested air pollutants had a strong 3-day lagging effect. IQR table can be found in figure 4.

County.

Conclusion

This study provided evidences of associations between air pollutants and daily ED visits. The model trained in this study can help hospitals to predict volume of daily ED visits and correspond accordingly. The methods and procedures used in this study can be extended to other counties in Tenneessee. Similar results has already been found in Davidson County, TN.

References

2015. Lancet. 2016; 388: 1459–1544 ly. European respiratory journal, 17(6), 1143-1150.

3. Wong, T. W., Tam, W. S., Yu, T. S., & Wong, A. H. S. (2002). Associations between daily





tios of a selection of 9 types of ED visits by each pollutant can be

• Most pollutants showed lagging effects on ED visits. For example, moderate CO AQI(51-100) level on a given day was 1.12(95% CI: 1.05-1.19) times likely to cause more cardiovascular ED visits, which was increased to 1.24(95% CI: 1.16-1.32) at one-day lag and 1.39 (95% CI: 1.15-1.66) by 3-day moving average (MA).

Interpreted by IQR from a multivariate regression model, 1 percentile increase in 3-day MA of each air pollutants increased ED visit

Modeling 2000-2014 daily ED visits on AQI and other environmental variables (i.e. temperature, wind speed, UVI) with various machine learning methods, a final model was able to validate 2015 daily ED visits of Shelby County within 4.26% MAPE, (66/1568). Feature importance from such model also suggested high correlations of air pollutants (SO2 and CO namely) to daily ED visits in Shelby

^{1.} GBD 2015 Mortality and Causes of Death Collaborators. Global, regional, and national life expectancy, all-cause mortality, and cause-specific mortality for 249 causes of death, 1980–2015: a systematic analysis for the Global Burden of Disease Study

^{2.} Fusco, D., Forastiere, F., Michelozzi, P., Spadea, T., Ostro, B., Arca, M., & Perucci, C. A. (2001). Air pollution and hospital admissions for respiratory conditions in Rome, Ita-