Residential Proximity to the Hudson River and Hospitalization Rates for Ischemic Heart Disease and Stroke: Westchester, Rockland, Putnam, Orange, Dutchess, Ulster, Columbia, Greene, Rensselaer, Albany, Washington and Saratoga Counties, New York: 1990-2005
Prepared by:

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## **Overarching Issues**

- Difficulties of studying humans -
  - Lack of information on specific exposures
  - Lack of information on specific health problems

- Hypothesis-generating studies
  - Assume exposure based on residential location
  - Compare disease rates among geographic areas

# Overarching Issues (cont.)

- Limitations of these types of studies:
  - Cannot draw strong conclusions
  - Many factors are related to residential location that may also affect health
  - No cause-effect conclusions from any one hypothesis-generating study



### Study Request

3 studies authored by colleagues and students of Dr. David Carpenter, Director of the University at Albany's Institute for Health and the Environment:

 October 2006 request by Member of Congress Maurice Hinchey to ATSDR



# **Prior Studies Summary**

- Exposure indicator:
  - Hazardous waste sites with persistent organic pollutants, including PCBs in ZIP Codes of residence

- Disease indicator:
  - Hospitalization rates for cardiovascular disease in ZIP Codes of residence
    - Ischemic heart disease
    - Stroke
    - Hypertension



# Table 1: Previous Study Results\*: Statewide Analyses and Hudson River Specific Analyses\*\*

\* Table adapted from Sergeev et al. 2005, Shcherbatykh et al. 2005 and Huang et al, 2006

	Adjusted Rate Ratio <sup>a</sup> Lower 95%CI - Upper 95% CI)				
Principal Diagnosis of Hospitalization	NYS analysis	Hudson River Subset analysis			
Ischemic Heart Diseaseb	1.15 (1.03-1.29)	1.36 (1.18-1.56)			
Acute Myocardial Infarction	1.20 (1.03-1.39)	1.39 (1.18-1.63)			
Cerebrovascular Disease <sup>c</sup>	1.15 (1.05-1.26)	1.20 (1.10-1.32)			
Ischemic Stroke	1.17(1.04-1.39)				
Hemorrhagic Stroke	1.10 (0.99-1.22)				
Hypertension <sup>c</sup>	1.19 (1.08-1.31)	1.14 (1.05-1.23)			

<sup>\*\*</sup> Ischemic heart disease and stroke hospitalization rates for NYS ZIP codes containing (or adjacent to) inactive hazardous waste sites with persistent organic pollutants compared to ZIP codes without (or not adjacent to) such sites

b. Ischemic heart disease analyses include all ages over 25. Ischemic heart disease analyses adjust for quartiles of median household income and health insurance coverage.





a. All analyses include a 2<sup>nd</sup> exposure category for other types of inactive hazardous waste sites and adjust for age, race and sex.

#### Statewide ZIP Code Analysis Map showing POP &

Other Sites [from Sergeev AV and Carpenter DO. EHP 113(6)2005]

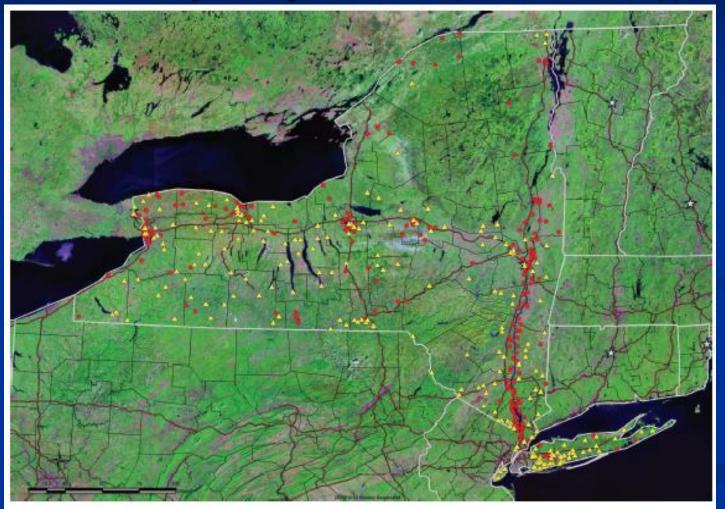
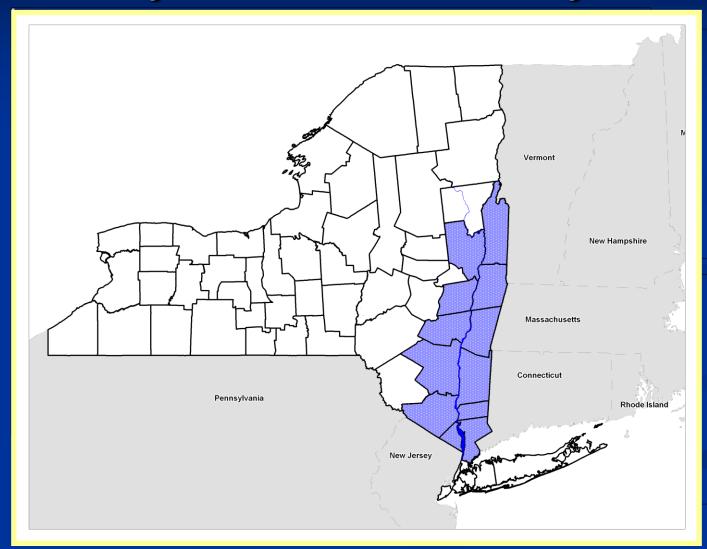


Figure 1. Map of New York State showing the locations of POP sites in red and other-waste sites in yellow. Map prepared by Rick Crowsey, Crowsey Incorporated.

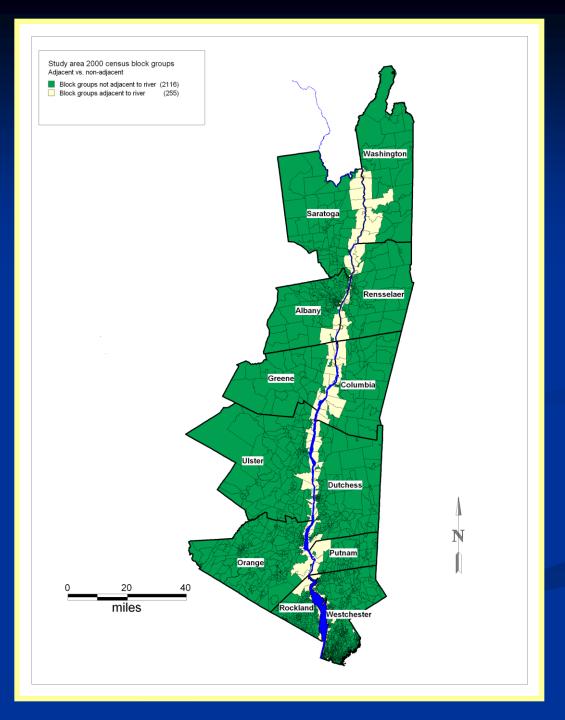


# Our follow-up: 12 County Hudson River Study Area



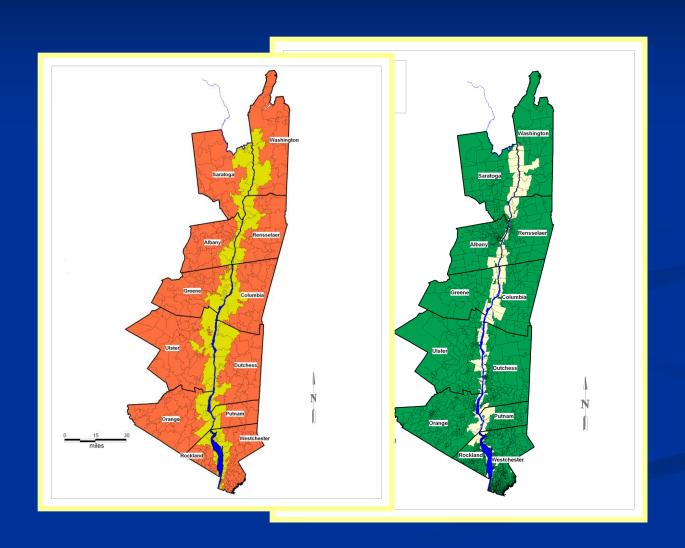


**12 County** Study Area: Adjacent and nonadjacent block groups





# **ZIP Codes versus Block Groups**





Study area distance categories use populationweighted block group centroids





# **Study Design**

- Block-group level analysis
- No exposure measures
- Health outcomes from hospitalization records; repeat hospitalizations included
- Census data are used for population numbers and demographic characteristics such as income and education



#### **CVD Outcomes**

- CVD: any disease of circulatory system
  - IHD: restricted blood flow in arteries supply heart
    - ■AMI: heart attack, blood flow to heart suddenly reduced or stopped
    - ■Angina: severe constricting pain in the chest
  - Stroke: interruption of blood circulating to brain
    - ■Ischemic Stroke: blockage of artery to brain
    - ■Hemorrhagic Stroke: ruptured artery



#### **CVD Risk Factors**

- The widely known risk factors for cardiovascular disease
  - Age
  - elevated serum cholesterol, atherosclerosis (plaque build-up in arteries)
  - high blood pressure, diabetes
  - tobacco use
  - genetic factors
  - diet, being overweight, being physically inactive
  - stress
- In the United States and NYS, cardiovascular disease rates are higher among people with lower socio-economic status and lower education levels.



# **Health Disparities**

- Additional factors related to CVD incidence and prevalence include sex, race, socioeconomic status and education
  - Psychosocial stress
  - **Limited resources**
  - Discrimination
    - **■Differential healthcare provision**
  - Access to health care



#### **CVD Trends**

- Declining mortality
  - Improved treatment
  - Declining incidence
    - primarily due to reduced smoking rates
- Differential decline and counter-trends
  - Increased diabetes and obesity rates



# Other factors affecting hospitalizations

- Mortality before reaching the hospital
  - Distance to the hospital
  - Marital status
  - Knowledge of warning signs
- Lack of primary care
- Health insurance status



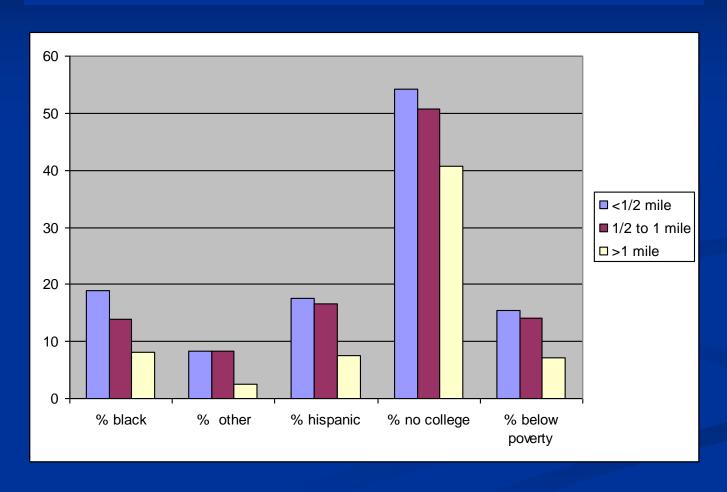
#### **Statistical Methods**

- Multivariable regression to evaluate hospitalization rates relative to residence near the River
  - Adjusts for age, sex, race
  - Adjusts for median income, education, population density, Hispanic ethnicity, distance to nearest hospital



# Socio-Economic & Demographic Indicators and Distance to the River

Indicators for Block Group Distance from River





# Table 1a. Exposure Area Distributions and Adjusted Rate Ratios for Ischemic Heart Disease Hospitalizations

	Person- Years	Ischemic Heart Disease Hospitalizations						
Exposure Category	in Study Area N= 30,219,001	Total		AMI		Angina		
	No. (%)	No. (%)	RR (95% CI)	No. (%)	RR (95% CI)	No. (%)	RR (95% CI)	
Adjacent Block Group								
Yes	3,269,547	12,327	1.07	4,398	1.06	591	1.06	
	(10.8)	(12.2)	(1.04-1.11)	(12.3)	(1.01-1.10)	(12.5)	(0.96-1.17)	
No	26,949,454	88,611	1.00	31,380	1.00	4,137	1.00	
	(89.2)	(87.8)	Reference	(87.7)	Reference	(87.5)	Reference	
Distance Fr	Distance From River							
< ½ mile	2,380,477	9817	1.02	3,399	1.03	542	1.09	
	(07.9)	(9.7)	(0.98-1.06)	(09.5)	(0.98-1.09)	(11.5)	(0.98-1.21)	
½ - 1 mile	2,834,956	11,236	1.03	4,048	1.06	610	1.13	
	(09.4)	(11.1)	(0.99-1.08)	(11.3)	(1.01-1.11)	(12.9)	(1.02-1.25)	
> 1 miles	25,003,569	79,885	1.00	28,331	1.00	3,576	1.00	
	(82.7)	(79.1)	Reference	(79.2)	Reference	(75.6)	Reference	



# Table 1b. Exposure Area Distributions and Adjusted Rate Ratios for Ischemic Heart Disease Hospitalizations

	Person- Years	Stroke Hospitalizations							
Exposure Category	in Study Area N= 30,219,001	Total		Ischemic		Hemorrhagic			
	No. (%)	No. (%)	RR (95% CI)	No. (%)	RR (95% CI)	No. (%)	RR (95% CI)		
Adjacent E	Adjacent Block Group								
Yes	3,269,547 (10.8)	6,276 (11.8)	1.07 (1.03-1.12)	2,334 (12.1)	1.10 (1.04-1.16)	635 (10.8)	0.97 (0.88-1.06)		
No	26,949,454 (89.2)	46,748 (88.2)	1.00 Reference	16,989 (87.9)	1.00 Reference	5,263 (89.2)	1.00 Reference		
Distance From River									
< ½ mile	2,380,477 (07.9)	5,280 (09.9)	1.06 (1.01-1.10)	1,925 (10.0)	1.08 (1.01-1.15)	518 (08.8)	0.89 (0.81-0.99)		
½ - 1 mile	2,834,956 (09.4)	6,023 (11.4)	1.06 (1.02-1.11)	2,227 (11.5)	1.11 (1.04-1.17)	658 (11.1)	1.08 (0.99-1.19)		
> 1 mile	25,003,569 (82.7)	41,721 (78.7)	1.00 Reference	15,171 (78.5)	1.00 Reference	4,722 (80.1)	1.00 Reference		



Table 2. Adjusted Rate Ratios\* for CVD Hospitalizations Stratified by Income Quartile\*\*

Rate Ratio for < 1/2 mile versus > 1 mile from River	IHD	AMI	Angina	Stroke	Ischemic Stroke	Hemorrhagi c Stroke
	RR (95%CI)	RR (95%CI)	RR (95%CI)	RR (95%CI)	RR (95%CI)	RR (95%CI)
Lowest Income 1	1.14	1.14	1.12	1.16	1.20	1.09
	(1.07-1.20)	(1.06-1.23)	(0.97-1.30)	(1.09-1.24)	(1.10-1.31)	(0.95-1.25)
Income	1.10	1.11	1.36	1.10	1.12	0.95
2	(1.02-1.18)	(1.01-1.23)	(1.08-1.72)	(1.01-1.19)	(0.99-1.28)	(0.76-1.19)
Income	0.85	0.86	0.93	0.97	0.96	0.46
3	(0.77-0.94)	(0.75-0.97)	(0.68-1.26)	(0.87-1.08)	(0.82-1.12)	(0.33-0.66)
Highest Income	0.68	0.69	0.28	0.69	0.58	<b></b>
4	(0.60-0.78)	(0.57-0.85)	(0.12-0.62)	(0.59-0.81)	(0.44-0.77)	



#### Table Notes

\*Adjusted for age (25-34, 35-44, 45-54, 55-64, 65-74, 75+ years), race (white, black, other), and sex (male, female) and quartiles of population density (6.1-506.6, 506.6<-2102.0, 2102.0<-6410.2, 6410.2<-94371.6 persons per square mile), % with less than a college education (0-30.6, 30.6<-42.7, 42.7<-55.5, 55.5<-100.0), % with Hispanic ethnicity (0-2.1, 2.1<-4.7, 4.7<- 9.6, 9.6<-86.0) and distance to nearest hospital.

\*\*Population-weighted block group median income quartile ranges: \$2499.00-40,968.00, \$40968.00<-54650.00, \$54650.00<-72944.00, \$72944.00<-200001.00.

\*\*\*Results are based on 50% random sample of the hospitalizations.



#### Conclusions

- Must keep limitations in mind
- Findings provide evidence that the role of income in hospitalizations for CVD was not able to be completely controlled in the multivariable regression
- Strong associations with socioeconomic status likely affected the prior studies as well



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