# Modern diesel engines: Emissions characterization and health effects

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Diesel Technology Workshop

MSHA/NIOSH Diesel Partnership

January 23, 2019



# **Outline of Presentation**

GOAL: Summarize HEI's work that supports controls for diesel engine emissions

- What is the Health Effects Institute
- HEI's program: Advanced Collaborative Emissions Study (ACES)
  - Phase I and II: Emissions characterization of 2007 and 2010 MY HHD engines
  - Phase III: Health effects testing of a 2007 engine
- Conclusions from review of the diesel miners study
- Overall Conclusions

### What is the Health Effects Institute

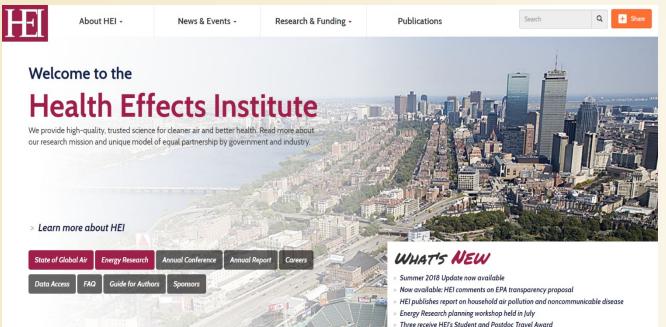
- Independent, non-profit institute, providing high quality, impartial scientific information on the health effects of air pollution, since 1980
- Balanced Core Support:
  - US EPA and Industry (Worldwide Motor Vehicle)
- Additional Partners
  - DOE, CARB, Oil Industry (API, CONCAWE), Foundations
- Governance
  - Independent Board of Directors
  - Expert Scientific Committees Develop, oversee and intensively peer review all research
- Hundreds of scientific reviews, reanalysis conducted around the world
- Scientific Research Organization: HEI does not advocate policy



### HEI's Activities

- Targeted Research and Reanalysis
  - Over 350 Studies on a wide variety of air pollutants: PM, ozone, diesel, air toxics, Exposure, Epidemiology Accountability
  - Reanalysis of critical studies

- Authoritative Literature Reviews
- Global Health
  - Middle and Low Income Countries
- NEW Energy Research Program
  - Potential Exposures and from unconventional oil and gas development



All Publications available at HealthEffects.org

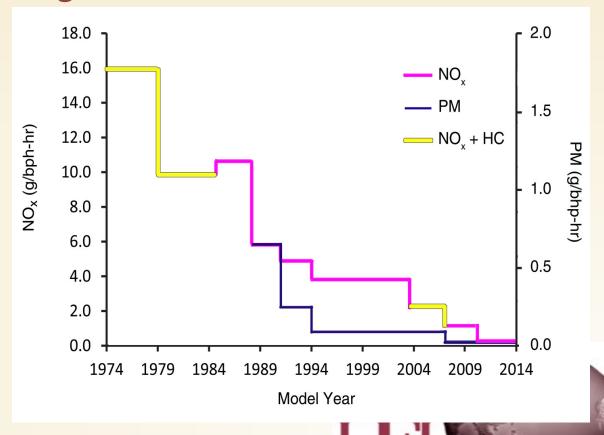


### **Diesel Emissions**

#### **Toxicity of Diesel Emissions**

- 1970s and 1980s:
  - In vitro studies with PM and its extracts ⇒ Mutagenicity
  - Rat inhalation studies with PM ⇒ Carcinogenicity (lung)
  - Epidemiology Studies ⇒ Suggestive of Carcinogenicity (lung)
- International Agency for Research on Cancer (IARC)
  - 1988 Panel: DE is "probably carcinogenic to humans (category 2A)
  - 2012 Panel: DE is a "known human carcinogen" (category 1)
- Other national and regional actions

#### **Regulation of Diesel emissions**



### Recent HEI Diesel Related Activities

- Advanced Collaborative Emissions Study (ACES)
  - Most rigorous and comprehensive investigation for new tech.
     diesel engines (DPF and SCR) meeting 2007 and 2010 EPA regs
    - Emissions characterization of four (4) 2007 engines and three (3) 2007 heavy duty highway diesel engines
    - Health effects testing in animals for emissions from a 2007 engine
- Diesel Emissions and Lung Cancer -- Epidemiology
  - Expert HEI panel conducted a detailed analysis and evaluation of the latest [OLD] diesel epidemiological studies
    - Examine utility for quantitative risk assessment
    - Assistance and dada access from NIOSH and NCI for DEMS\_

### The Advanced Collaborative Emissions Study (ACES)

#### **Rationale**

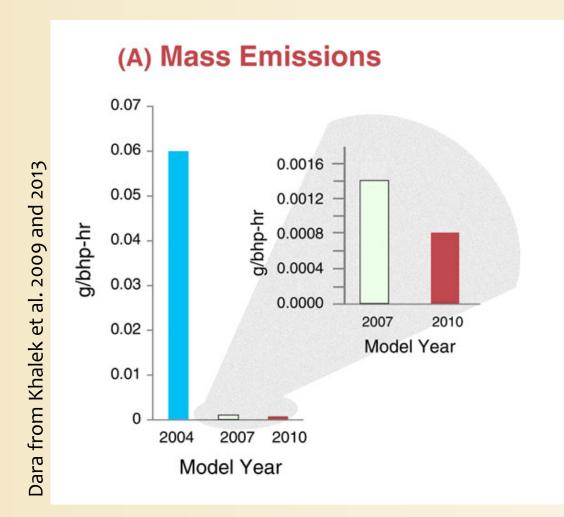
The new developments motivated HEI's automotive and government sponsors, and others, to ask HEI to undertake ACES research:

- Confirm that advanced-technology diesel engines, after-treatment systems, reformulated fuels and reformulated oils developed to meet the 2007/2010 emission standards will result in substantially reduced emissions
- Substantial public health benefits are expected from these reductions
- Most pollutants will decrease, but new species may be formed
- Although health effects are expected to be reduced, new technologies should be evaluated before widespread introduction

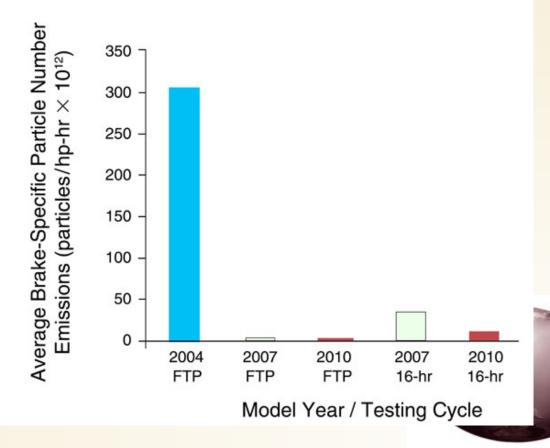
#### Design

- Emissions characterization (Phases I and II): FTP and 16-hr cycles
  - Four 2007-compliant HD engines that meet the 2007 PM<sub>2.5</sub> standard
  - Three 2010-compliant HD engines that meet the 2010 std for PM<sub>2.5</sub> and NOx
- Health Testing (Phase III):
  - Health effects in rodents, chronically exposed to a 2007 engine emission, to study cancer and non-cancer endpoints

### ACES Ph. 1 & 2: Reduction in PM & PN Emissions



#### (B) Particle Number Emissions

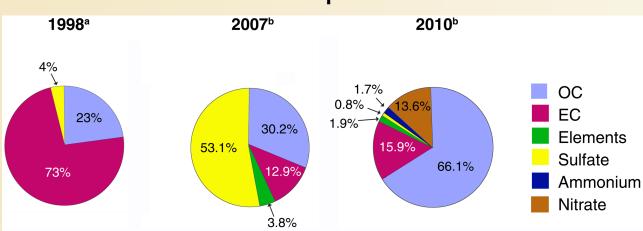


### ACES Phase 1 and 2 results, cont

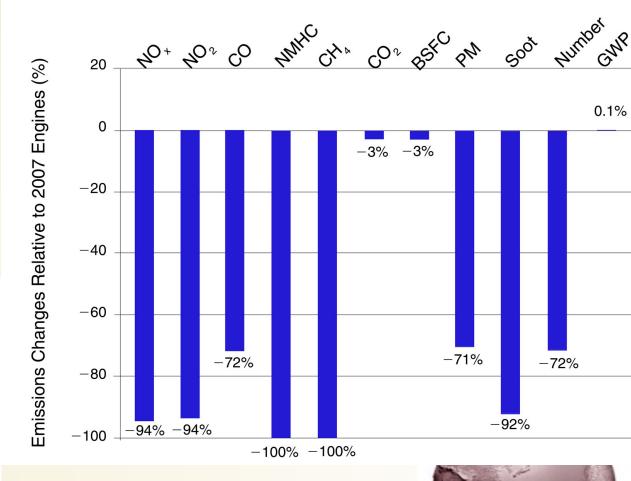
# Reduction in NOx Emissions (g/bhp-hr)



#### **PM Composition**



<sup>&</sup>lt;sup>a</sup> Personal communication, Imad Khalek, 22 March 2012.



<sup>&</sup>lt;sup>b</sup> Adapted from Khalek et al. 2015.

# Conclusions of ACES Phases I and II

- After-treatment systems highly effective in lowering emissions:
  - PM and PN lowered by ≥ 95%
  - NOx lowered by ≥ 90%
  - All regulated emissions meet or exceed standards
  - Levels of other toxic compounds, VOCs and SVOCs lowered by 80 to 99%; PAHs and nitro-PAHs down by > 99%
  - No new compounds detected
- Limitations:
  - Laboratory and not real-world testing
  - SCR issues under certain conditions



# **ACES Phase III: Goals and Design**

- Hypothesis: Emissions [from a new technology diesel engine]
  will not cause an increase in tumor formation or substantial
  toxic effects ... although some biological effects may occur.
- Design: Give as high a dose as possible
  - Lifetime (~ 30 months) inhalation exposure in a rat strain (Wistar Han), susceptible to lung cancer
  - Exposure: A 2007 engine, 30 months, 16 hrs/day, 5 days/week
  - Atmosphere: PM too low, so rely on NO2 levels; high, medium and low, plus clean air control (4 levels)
- Extensive monitoring and sampling of exposure atmospheres
- Serial sacrifices at 1, 3, 12 and 24 months;
   terminal sacrifice at 28-30 months

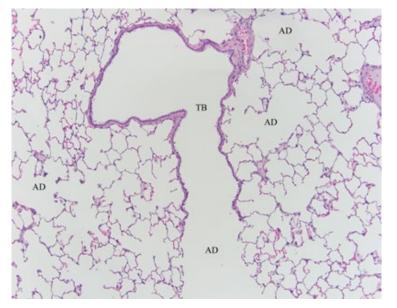


## Phase III Major Findings

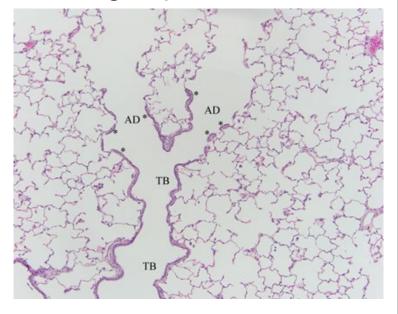
- No increase in tumors in the lung or at any other site
  - Some effects on the lung were observed, but most likely related to NO2 exposure (based on observations in pure-NO2 exposure studies)
  - Of > 100 endpoints studied, few showed changes, related to mild pulmonary inflammation and oxidative stress
- MAJOR difference from studies with old-technology diesel emissions (with very high levels of PM)
  - Lung tumors and other toxic effects are seen in many similar experiments
- Additionally, <u>ancillary studies</u> showed no genotoxic effects, or cardiac or vascular changes
- Confirmation of the study hypothesis: Exposure to new tech diesel did not cause in increase in tumors



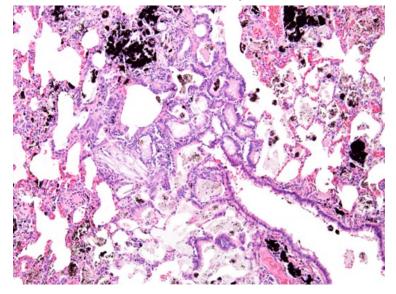
#### ACES Control: Clean Air



ACES: High Exposure



Old diesel exhaust exposure



Courtesy: U. Heinrich



# Diesel Epidemiology Studies

- Many past studies serious limitations made interpretation difficult
- Some recent studies overcame many of the limitations:
- Most important among these: NCI-NIOSH led study among >12,000 miners who worked in non-metal mines (Silverman and colleagues)
  - Data available from NIOSH and NCI
- Additional analysis and commentaries by:
  - HEI DEMS panel
  - Crump, Moolgavkar and colleagues
  - Other critiques



# **Epidemiology -- Conclusions**

- Exposures from old technology diesel engines as well as retrospective
- DEMS study worked carefully over an extended period of time to develop historical exposure profiles and collected and analyzed data on lung cancer and addrressed confounding
- Association between exposure and lung cancer reported and replicated, and found to be robust
- Uncertainties remain; many explored by Silverman et al as well HEI and other investigators

### Where does this leave us

- Old technology diesel emissions:
  - Toxicity, including animal carcinogenicity, of old technology diesel emissions well established; components investigated
  - Human epidemiology studies point to association between exposure and lung cancer
- Many national and international bodies have acted based on such information
- New Technology diesel engines technology highly effective in controlling PM and other toxic compounds
- Emissions do not produce cancer in an animal test
- Ideal way to reduce air concentrations and exposures

# Acknowledgements

- Sponsors: Motor vehicle industry, EMA, DOE, EPA, API and CARB; others
- Partners: Coordinating Research Council; Southwest Research Institute; Lovelace Respiratory Research Institute; and others
- Principal Investigators: Imad Khalek (SWRI); Joe
   Mauderly and Jake McDonald (LRRI); others
- Over 12 oversight and review committees

All publications and reports at www.healtheffects.org

# THANK YOU

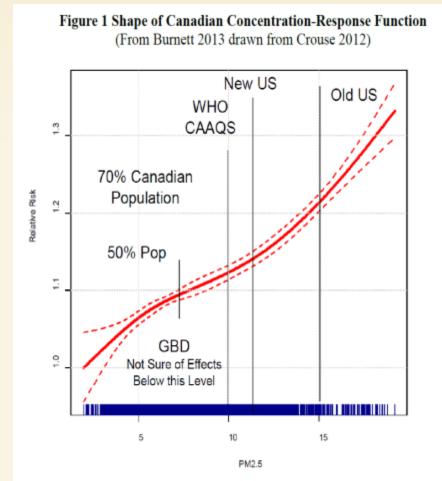
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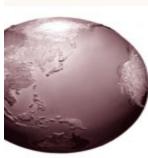


### Investigating Health Effects at Very Low levels

- 2012 paper on effects at lower levels in a Canadian Census Cohort (CanCHEC)
- Are they real?
  - Questions about
    - exposure estimates
    - Confounders?
- HEI is funding three teams:
   US, Canada and Europe
- Goal: rigorous testing of lowlevel associations

#### PM associations below 8 µg/m<sup>3</sup>

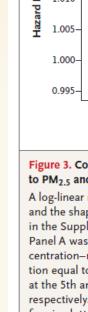




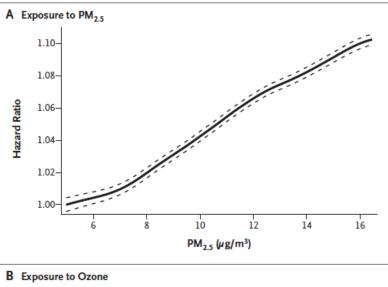
### **Conclusions from the US Study**

- Francesca Dominici (Harvard) looked at 66 million Medicare enrollees, exposure estimated using satellite and other methods
- Evidence for Concentration

   Response relationships
  - PM: Almost to zero (no threshold?)
  - Ozone: To at least 30 ppb
    - Though wider confidence intervals
- Additional analyses underway
  - Causal and other statistical models
  - More detailed analysis of Medicare Survey population (smaller population but with confounders such as smoking)
  - Medicaid data
- Medicare data are public
- Study findings under HEI Review



N Engl J Med 2017;376:2513-2; DOI: 10.1056/NEJMoa1702747



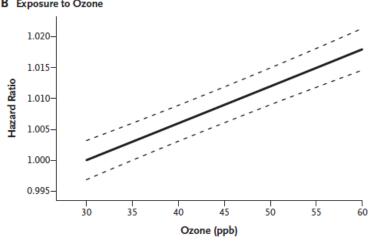


Figure 3. Concentration—Response Function of the Joint Effects of Exposure to  $PM_{2.5}$  and Ozone on All-Cause Mortality.

A log-linear model with a thin-plate spline was fit for both PM $_{2.5}$  and ozone, and the shape of the concentration-response surface was estimated (Fig. S8 in the Supplementary Appendix). The concentration–response curve in Panel A was plotted for an ozone concentration equal to 45 ppb. The concentration–response curve in Panel B was plotted for a PM $_{2.5}$  concentration equal to 10  $\mu$ g per cubic meter. These estimated curves were plotted at the 5th and 95th percentiles of the concentrations of PM $_{2.5}$  and ozone, respectively. The complete concentration–response three-dimensional surface is plotted in Fig. S8 in the Supplementary Appendix.