

RESPIRE: Unraveling Maternal Vulnerabilities to Indoor Air Pollution

UK Clean Air Conference 2nd October 2024

Sophie Reed

Swansea University

PI: Prof. Cathy Thornton

Relating

Environment-use

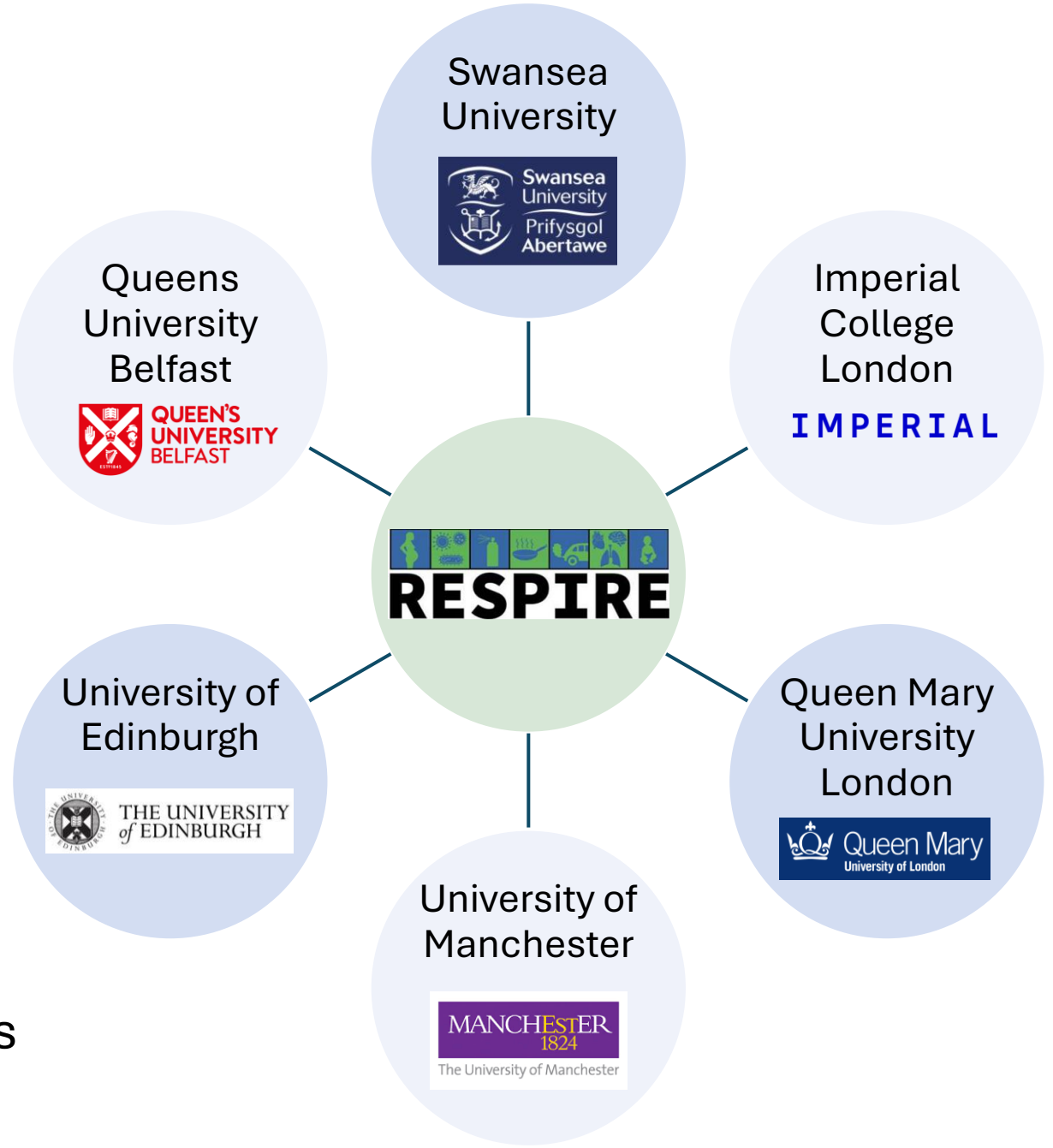
Scenarios in

Pregnancy/

Infanthood and

Resulting airborne material

Exposures to child health outcomes



Climate change & pregnancy

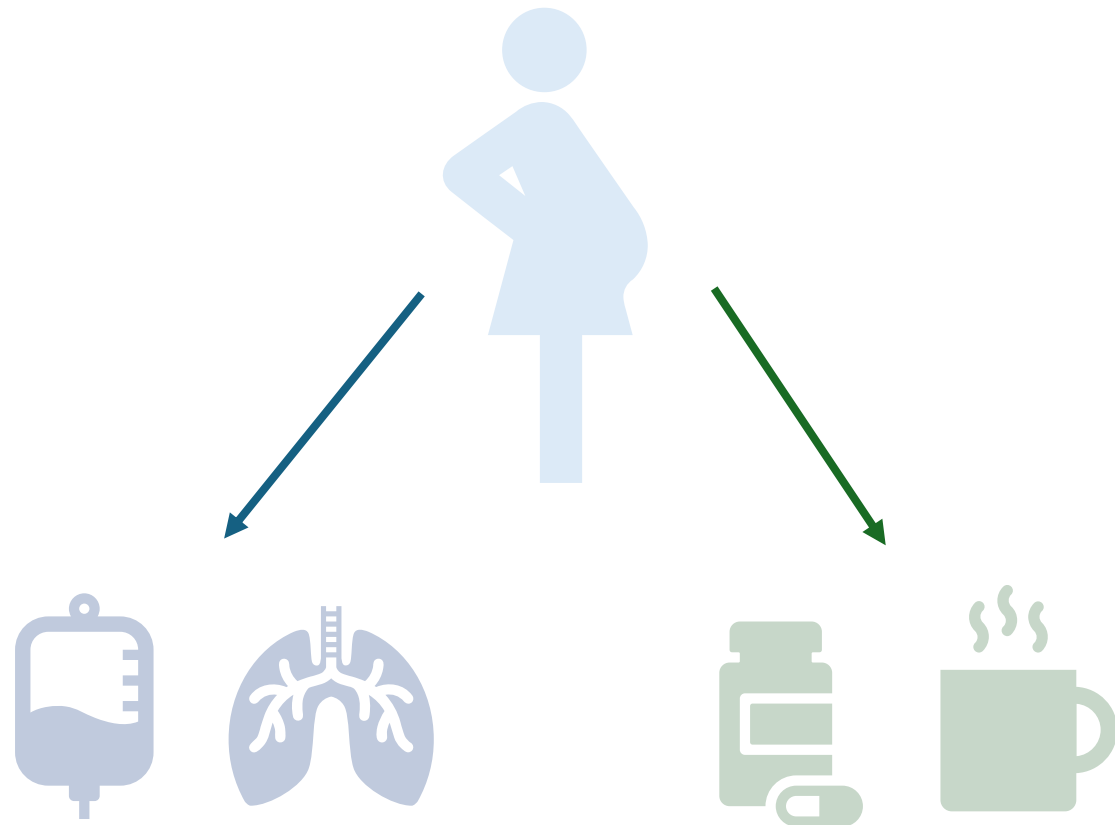
Climate change is the single largest threat facing humanity today



- 1/10 deaths in children under 5 and 1/5 deaths in newborns are attributed to air pollution (WHO).

Climate change & pregnancy

Climate change is the single largest threat facing humanity today

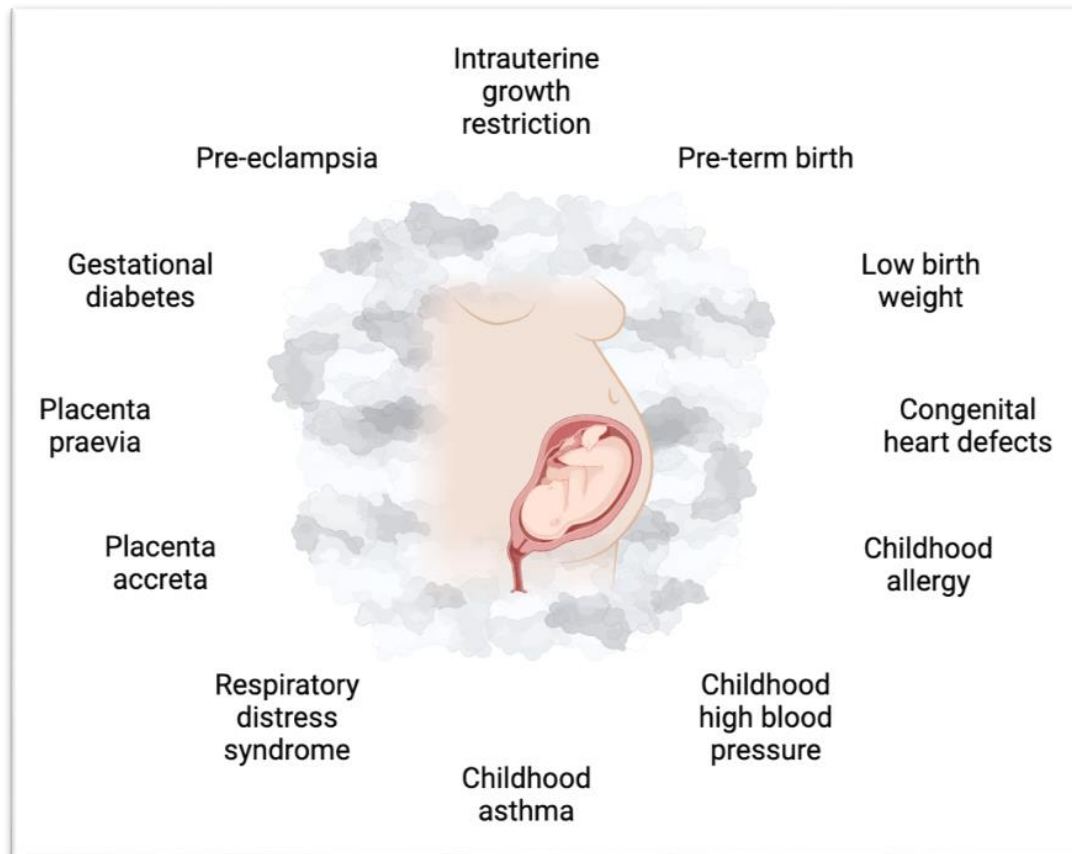


- 1/10 deaths in children under 5 and 1/5 deaths in newborns are attributed to air pollution (WHO).

- Pregnant women are a uniquely vulnerable population.
 - Biological changes.
 - Child health programming.

Climate change & pregnancy

Climate change is the single largest threat facing humanity today



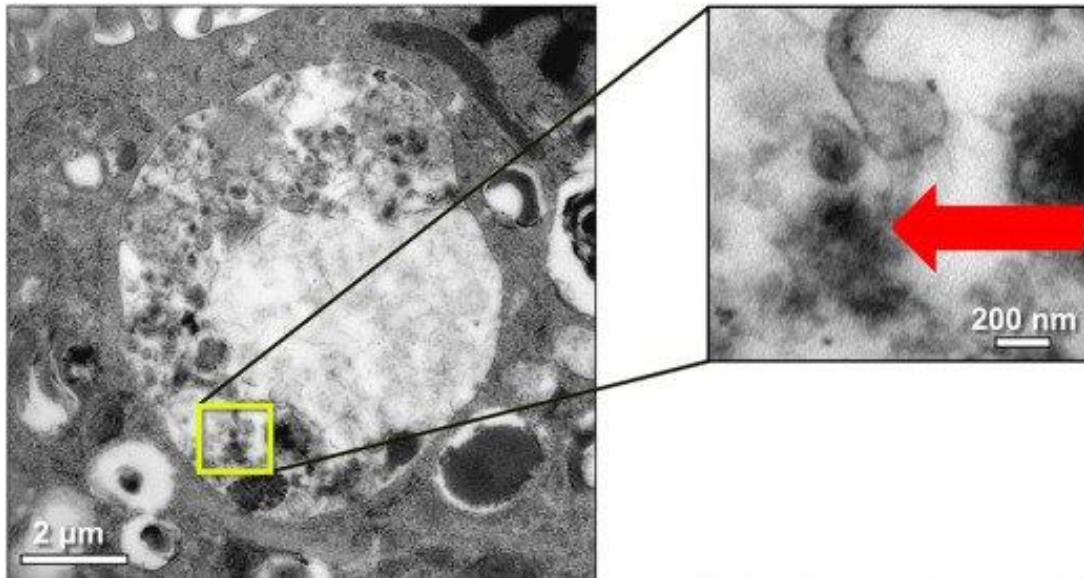
- 1/10 deaths in children under 5 and 1/5 deaths in newborns are attributed to air pollution (WHO).

- Pregnant women are a uniquely vulnerable population.
 - Biological changes.
 - Child health programming.

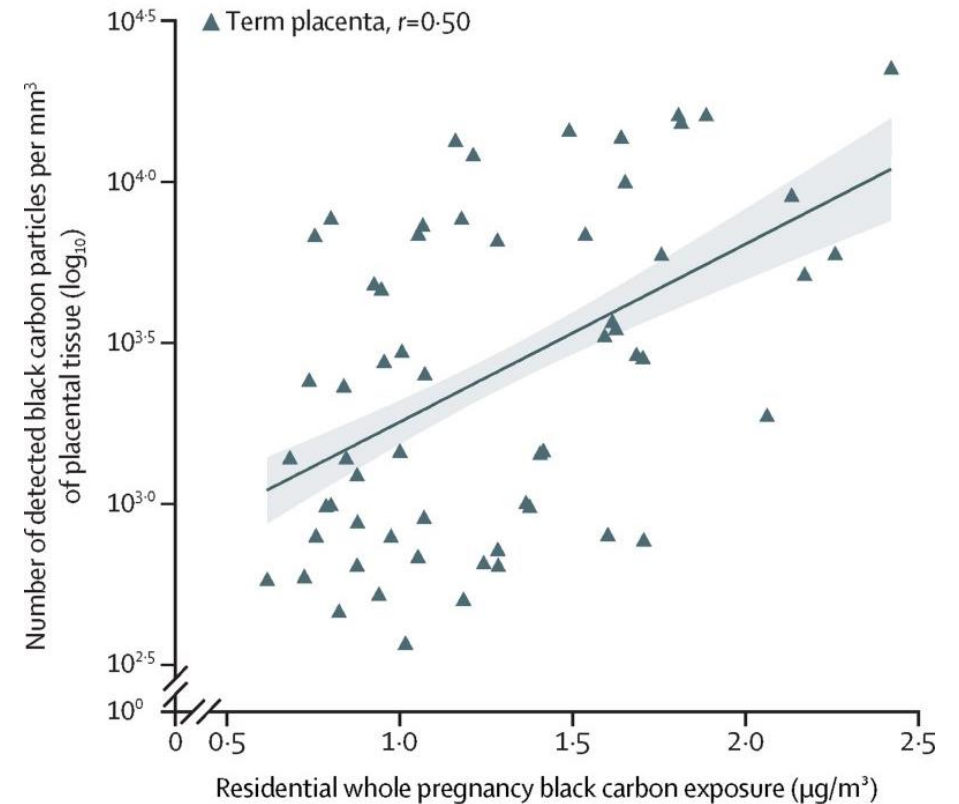
- Unfavourable birth and child health outcomes associated with pollution (& extreme heat exposure) in pregnancy.

Pollutants in the placenta and fetus

Black carbon & inhaled ultrafine particles <0.1 μm detected in placenta



Liu et al, *Sci Total Environ*, (2021).

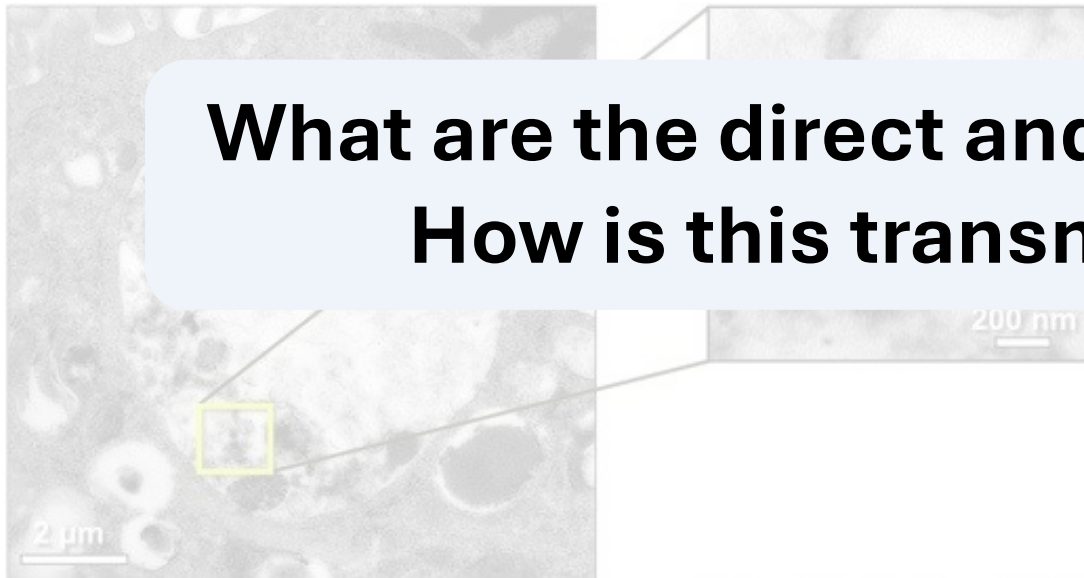


Bongaerts et al, *Lancet Planet Health*, (2022).

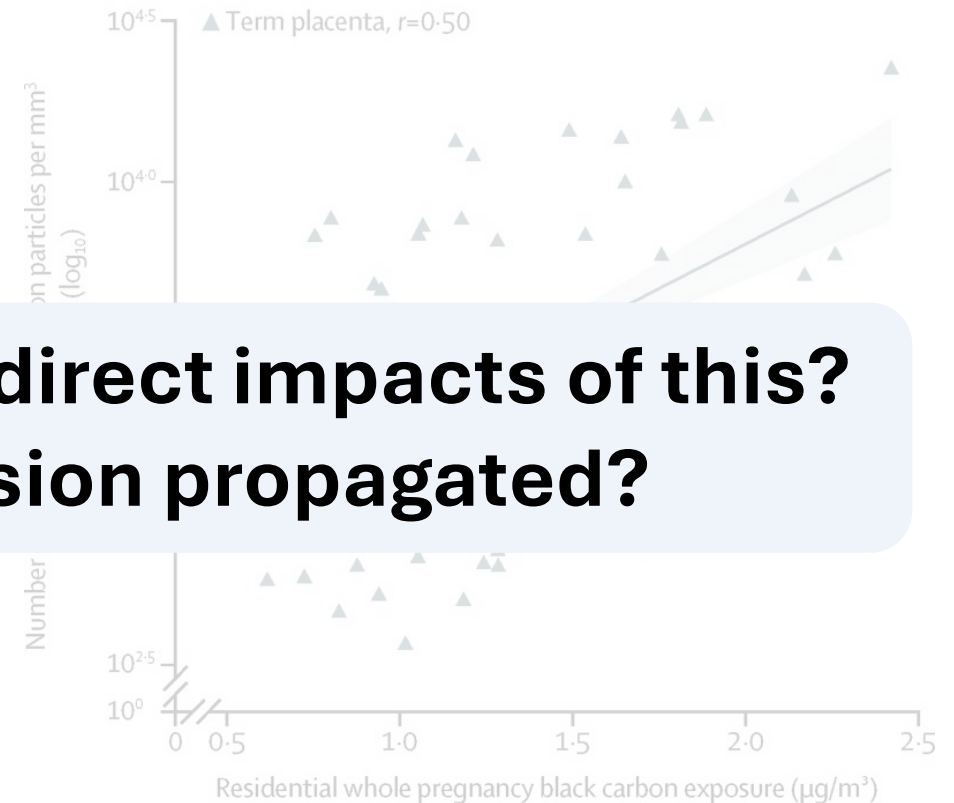
Positive correlation between maternal black carbon exposure and placental black carbon

Pollutants in the placenta and fetus

Black carbon & inhaled ultrafine particles <0.1 μm detected in placenta



Liu et al, *Sci Total Environ*, (2021).

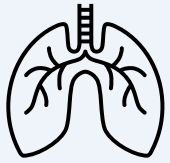


Bongaerts et al, *Lancet Planet Health*, (2022).

**What are the direct and indirect impacts of this?
How is this transmission propagated?**

Positive correlation between maternal black carbon exposure and placental black carbon

RESPIRE project aims



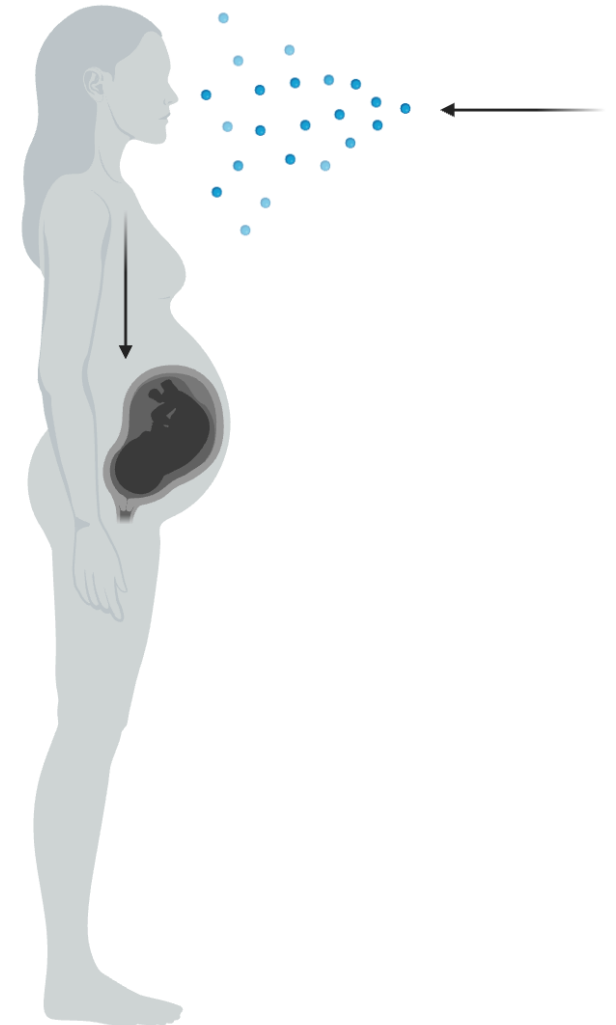
Identify the toxicological impact of direct airborne material exposures (AMEs) on the maternal respiratory tract.



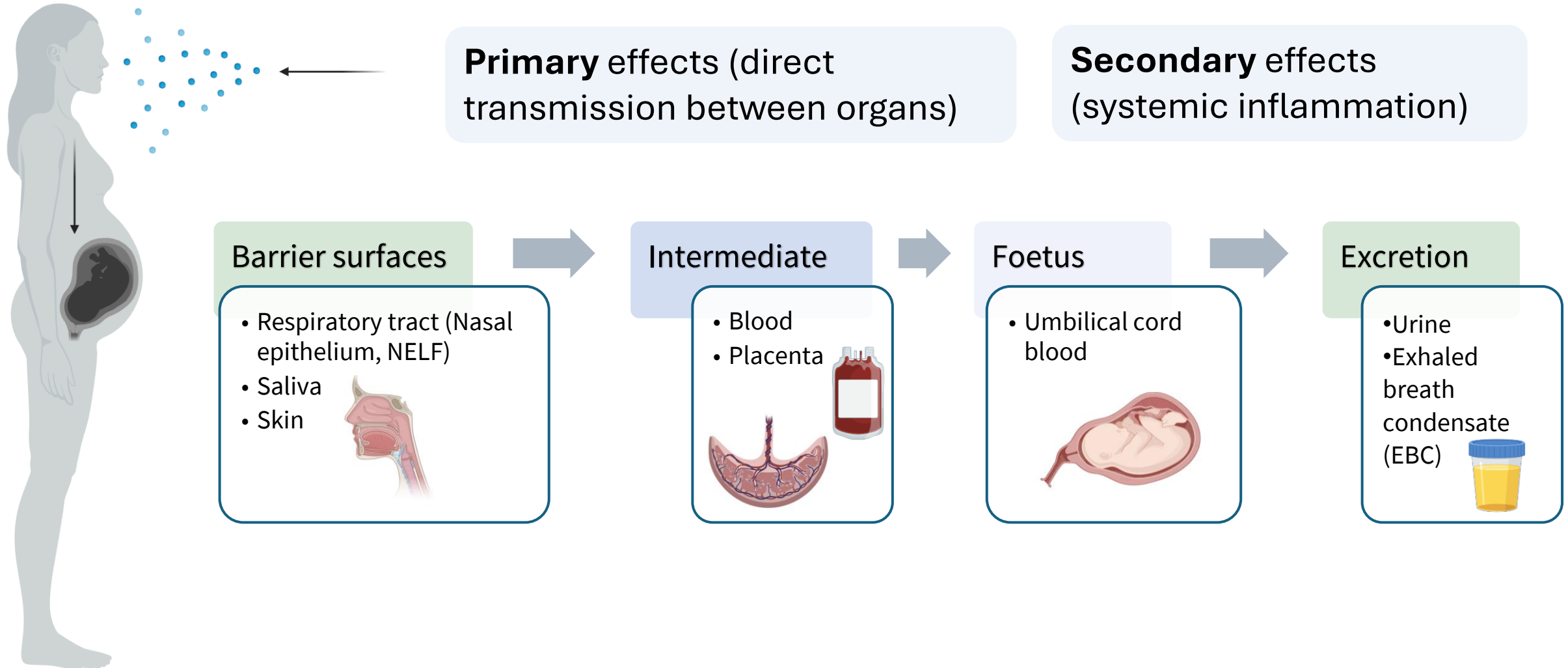
Elaborate the systemically propagated direct and indirect toxicological effects of AMEs.



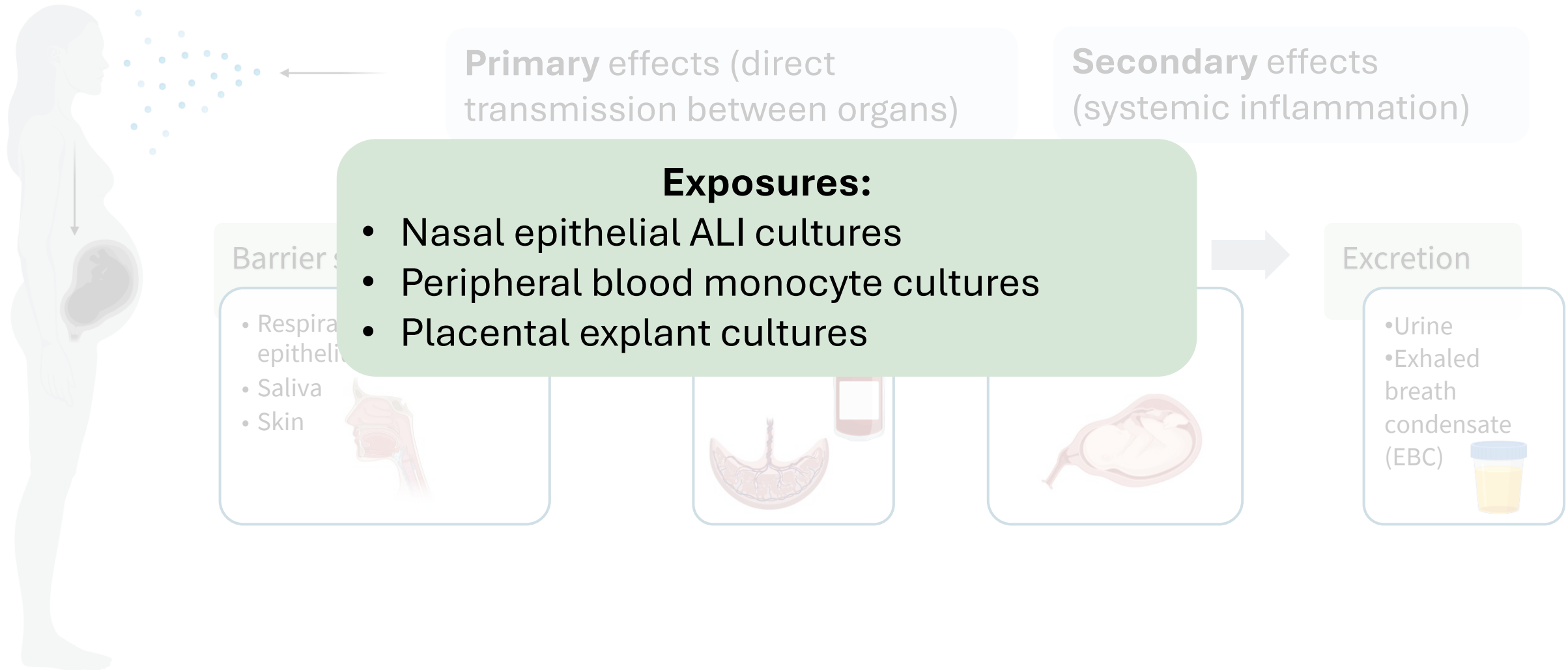
Reveal the effects of gestation, BMI and ethnicity on responses to AMEs.



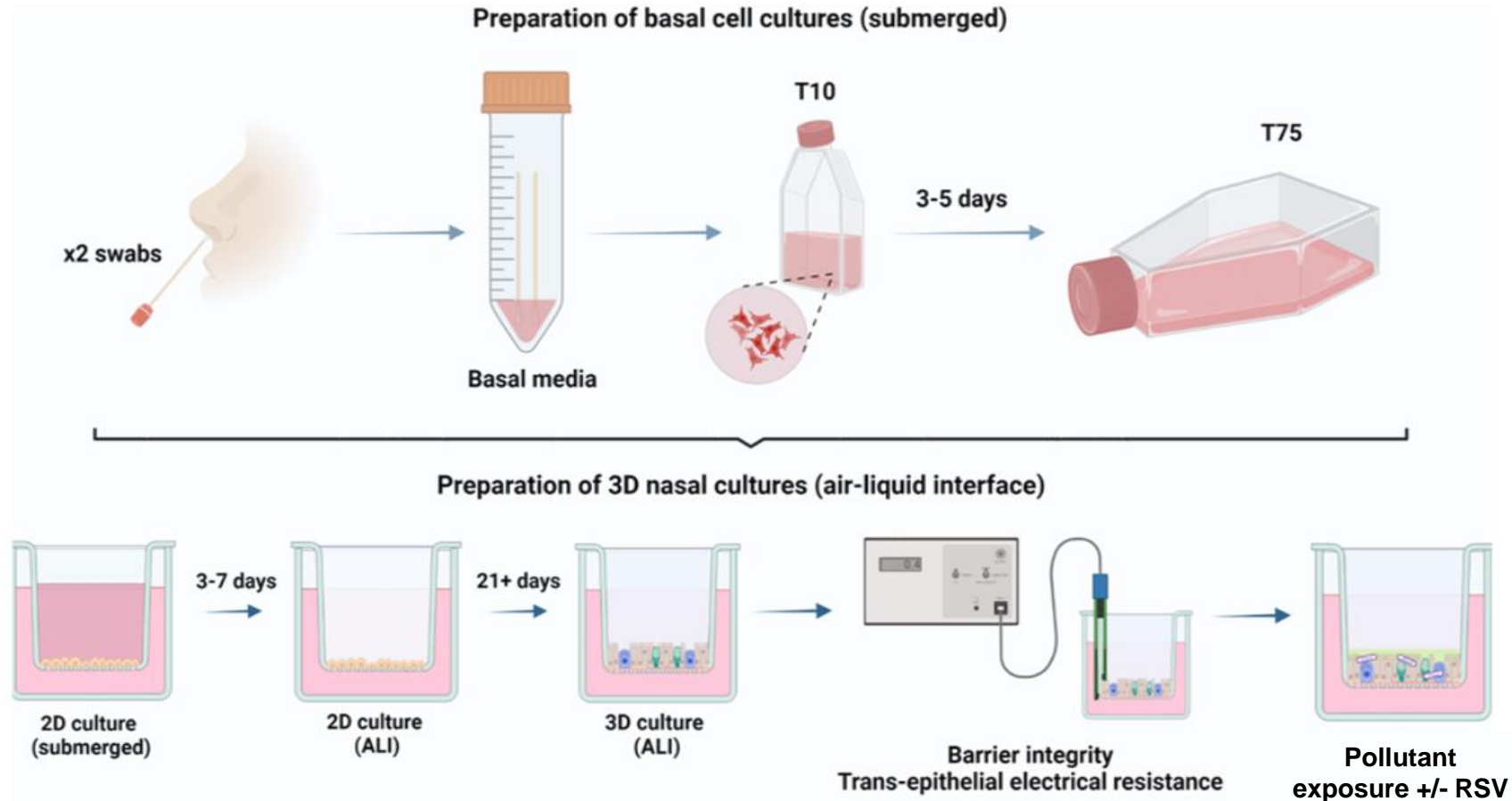
Transmission of AMEs from mother to foetus



Transmission of AMEs from mother to foetus



Modelling upper respiratory tract responses



Particulate exposures - ALI cultures

Particulate AMEs of nasal epithelial cell air liquid interface (ALI) cultures –

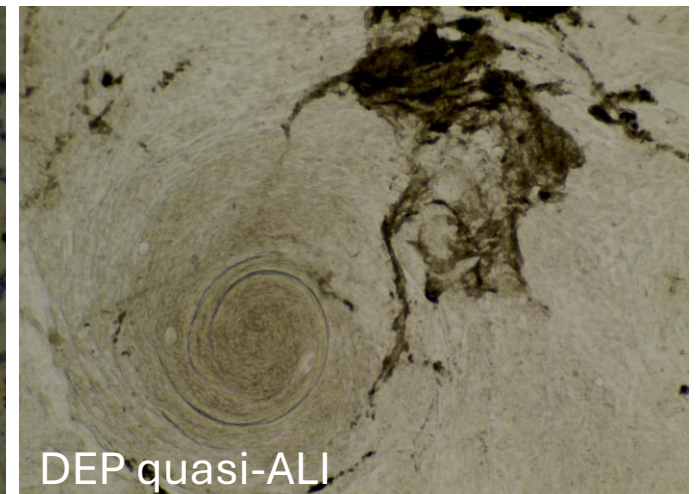
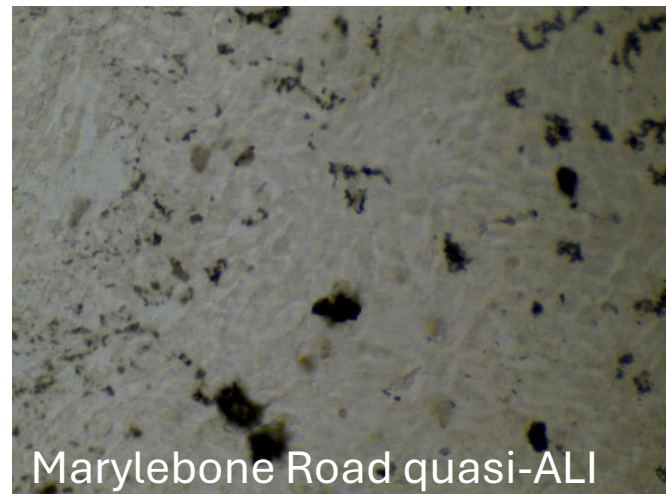
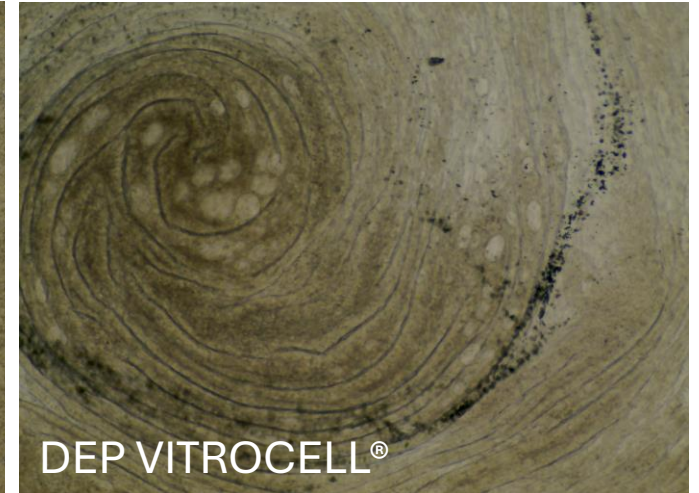
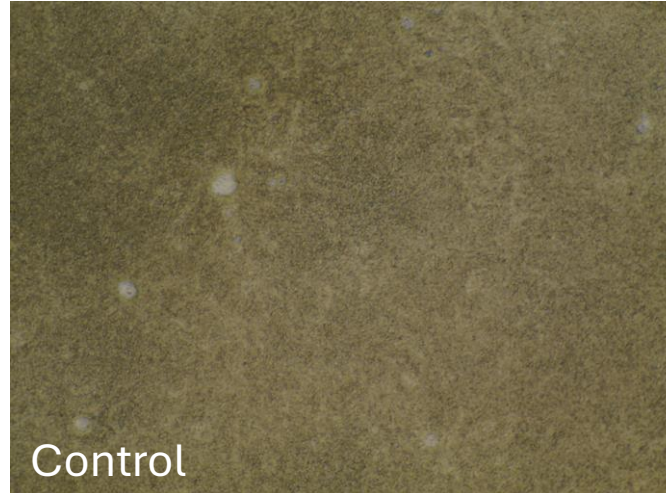
- VITROCELL® vs quasiALI



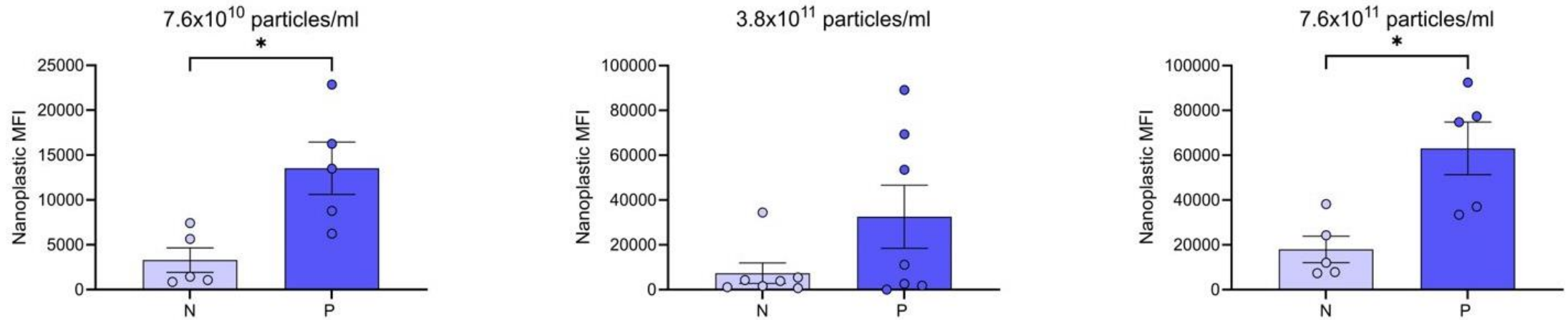
Particulates +/- RSV

- Claudia Efstathiou, ICL
- Preliminary results showing increased expression of viral sensing genes in nasal epithelium with particulate exposure.

Pregnant vs non-pregnant comparisons underway

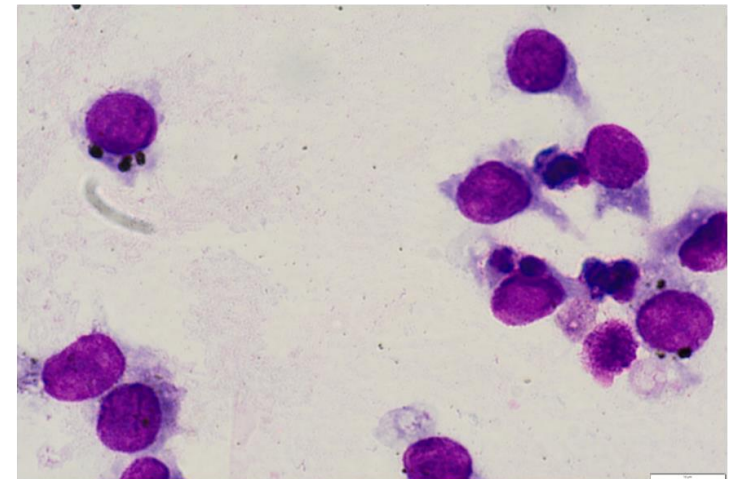


Particulate exposure of blood monocytes

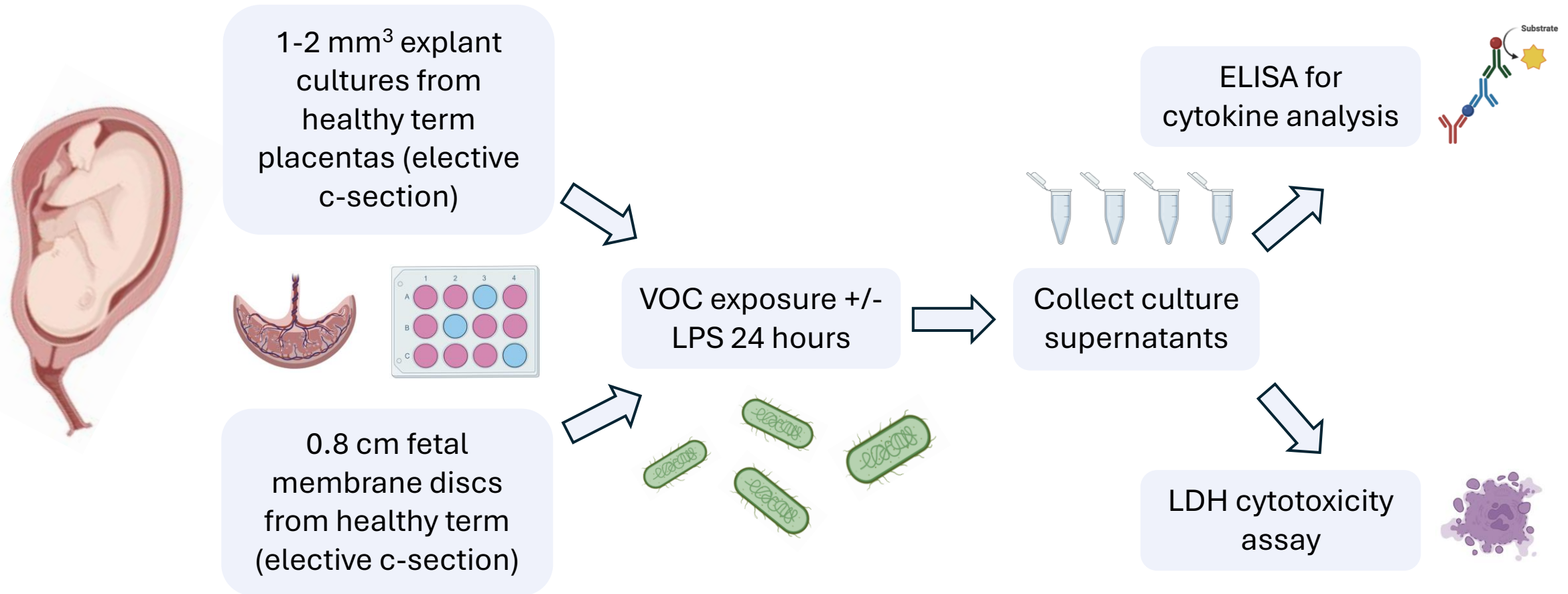


Higher uptake of plastic nanoparticles in pregnant donor blood monocytes, compared to non-pregnant donors.

Work ongoing with NIST particulates.



Placental & fetal membrane explants



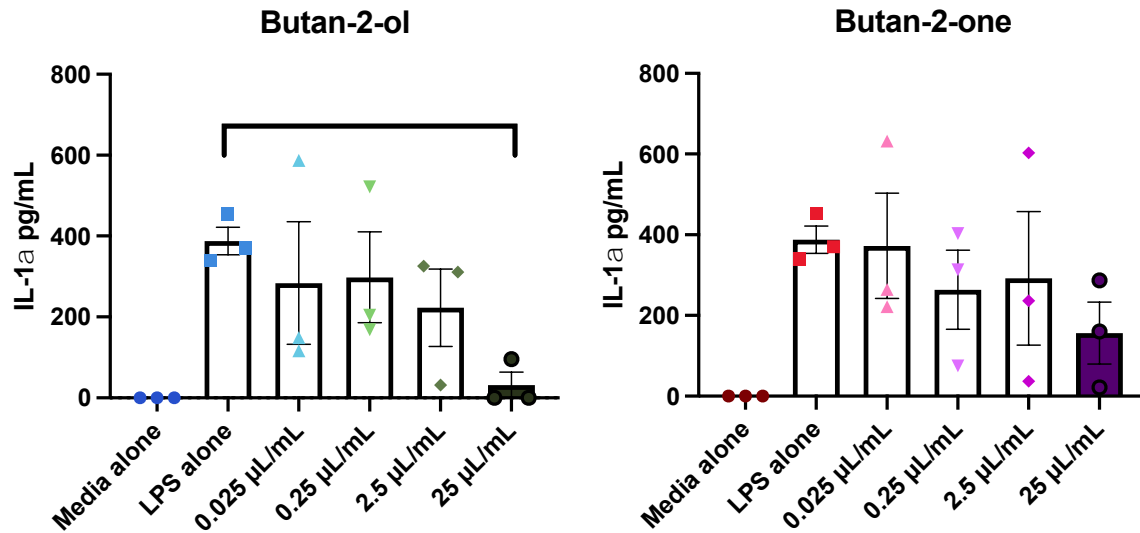
Placental & fetal membrane explants

Table 1

Individual Volatile Organic Compounds (VOCs) identified through measurements in residences and their calculated Weighted Average Geometric Mean (WAGM).

VOC	WAGM ($\mu\text{g}/\text{m}^3$)	VOC	WAGM ($\mu\text{g}/\text{m}^3$)	VOC	WAGM ($\mu\text{g}/\text{m}^3$)
Ethanol	92.00	Isobutane	4.01	1-Methoxy-2-propanol/propylene glycol methyl ether (PGME)	1.35
Formaldehyde	18.04	2-Ethylhexanol	3.70	4-Ethyltoluene	1.33
Toluene	15.90	Dodecane/ <i>n</i> -dodecane	3.69	2-Butoxyethanol	1.26
Limonene [inc. <i>D</i> -limonene]	13.65	Hexane/ <i>n</i> -hexane	3.66	2-Carene	1.10
Hexanal/hexaldehyde/ hexanaldehyde	13.30	Heptane/ <i>n</i> -heptane	3.45	Methyl-cyclopentane	1.04
α -pinene	12.10	Trimethylbenzene (including 1,2,4- Trimethylbenzene)	3.22	Isopropanol	1.00
Butane	12.00	Cyclohexane	2.99	3-Ethyltoluene	0.98
Acetone	11.40	2,2,4-Trimethyl-1,3-pentanediol diisobutyrate (tpddib/TXIB)	2.94	2-Ethyltoluene	0.94
Acetaldehyde	10.14	2,2,4-Trimethyl-1,3-pentanediol monoisobutyrate (tpdmib/texanol)	2.78	Acrolein	0.92
2-Methyl-1-propanol	8.20	Tetrachloroethane	2.68	Styrene	0.82
2-Methylbutane	7.80	Methyl-cyclohexane	2.68	Propylbenzene	0.80
1-Butanol	6.16	Tetrachloroethylene/tetrachloroethene	2.24	Tetrachlorocarbon	0.80
Butylbenzene	5.72	Nonane	2.21	Trichloroethane	0.73
Decane/ <i>n</i> -decane	5.27	Benzene	1.99	<i>p</i> -Isopropyltoluene/ <i>p</i> -cymene	0.56
<i>m</i> + <i>p</i> -Xylene	4.57	Ethylbenzene	1.84	Trichloroethene/trichloroethylene	0.53
Undecane/ <i>n</i> -undecane	4.38	Propanal/propionaldehyde	1.80	Naphthalene	0.50
3-Carene	4.38	Tridecane	1.77	Chlorobenzene	0.42
Pentanal	4.34	Pentane	1.69	Methylbenzoate	0.33
2,2,4 Trimethylpentane	4.33	<i>o</i> -Xylene	1.57	1,3,5- Trimethylbenzene	0.33
Octanal	4.30	α -Pinene	1.56	Pyridine	0.12
Ethyl acetate	4.30	Benzaldehyde	1.55	1,3-Butadiene	0.11
<i>p</i> -Dichlorobenzene	3.90	Octane	1.54	3-Ethenylpyridine/3-vinylpyridine	0.06

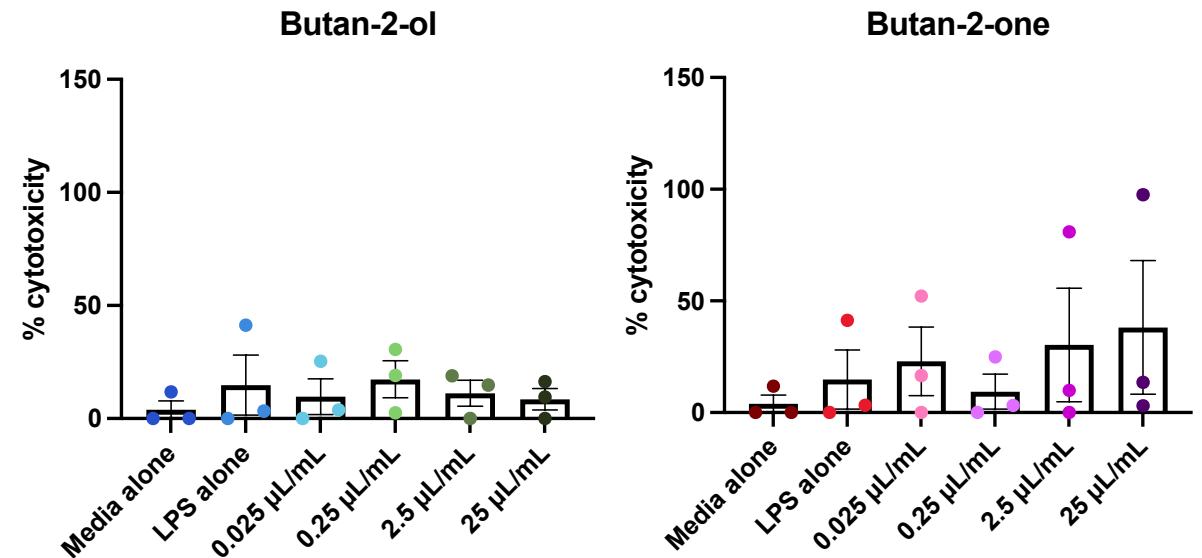
Cytokine expression



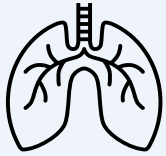
Minimal cytotoxicity, but some with higher concentrations of Butan-2-one

Reduced cytokine expression with higher exposure concentrations of VOCs with LPS co-exposure

Potential negative impacts for pregnancy



Conclusions & Future work



Air-liquid interface cultures of nasal epithelium exposed to particulates show potential impacts on viral sensing. Comparisons between responses of pregnant and non-pregnant donors underway.



Phagocytic cells isolated from the blood of pregnant women have higher uptake of nanoparticles compared to non-pregnant donors. Uptake mechanisms and cell differentiation are now being investigated with a range of particulates.



Reduced cytokine release from placental explants exposed to higher concentrations of VOCs with LPS co-exposure. VOC metabolism enzyme expression changes in the placenta, nasal epithelium & blood leucocytes during pregnancy are currently being determined.

Acknowledgments

Thornton Lab – Swansea University

Professor Cathy Thornton

Tyler Joseph

Dr April Rees

Dr Oliver Richards

Dr Aisling Morrin

Tiffany Haddow



Clift Lab – Swansea University

Professor Martin Clift

Dr Kirsty Meldrum

Thwaites Lab – Imperial College London

Dr Ryan Thwaites

Dr Claudia Efstathiou

RESPIRE Consortium

Research Participants

Figures created with BioRender.com

 @RESPIREResearch

Scan QR code for references

