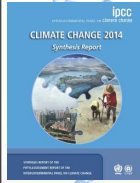


## Climate Change

- As Environmental Health (9) on 26 Nov. 2015
- Key Concepts
  - UN-IPCC predicts "by 2100, average global temperature increases 1.8-4.0 C°, sea levels will rise, hydrologic extremes (floods/droughts) will intensify"
  - Climate change affects crop/livestock production, viability of fisheries: People at hunger risk may be double by 2050
  - Climate change directly affects health through heat-related morbidity, flood/storm-related trauma and mental health, air pollution (ozone, aeroallergens, infectious diseases)
  - Weather-related health risks must be assessed as environmental stressors
  - Risk management of climate change ranges from primary mitigation of greenhouse gas to a number of adaptations: Co-benefits and unintended consequences of policy changes in the energy, transportation, agriculture must be considered in "comprehensive health impact assessment"

## UN-IPCC

- United Nations Intergovernmental Panel on Climate Change was established in 1988 by World Meteorological Organization (WMO) and United Nations Environment Programme (UNEP).
- Approx. every 5 yrs since 1990, IPCC conducted assessments of scientific work on climate change (5th report [AR5] has been published in 2014).  
[http://www.ipcc.ch/news\\_and\\_events/docs/ar5/ar5\\_syr\\_headlines\\_en.pdf](http://www.ipcc.ch/news_and_events/docs/ar5/ar5_syr_headlines_en.pdf) (headlines for policy makers)
- <http://www.ipcc.ch/>

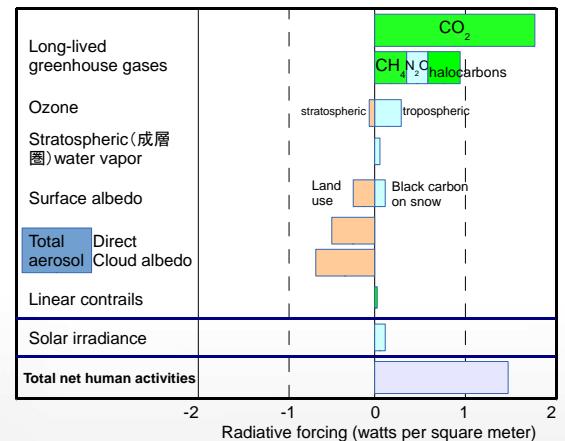


## Greenhouse gases

- Composition of the Earth's atmospheric gas started to change since mid-1700s: increase of CO<sub>2</sub>, CH<sub>4</sub>, N<sub>2</sub>O
- Analyses of Antarctic ice cores (gases trapped in bubbles) revealed the concentration of CO<sub>2</sub> rose 35% (from 280 ppm in late 18C to 380 ppm in 21C)
- Higher greenhouse gas contributes to warming of the Earth, positive "Radiative Forcing" = absorbing/reemitting infrared radiation toward the lower atmosphere and the Earth's surface

## Components of radiative forcing

(modified from Fig. 10.1, pp.281 in Frumkin H [Ed.] 2010 "Environmental health: from global to local 2nd ed.", Jossey-Bass)



## Main Greenhouse Gases

modified from Frumkin H [Ed.] 2010 "Environmental health: from global to local 2nd ed.", Jossey-Bass

Gases	Chemical formula	Preindustrial ppb	2005 ppb	Atmospheric lifetime (yr)	Anthropogenic sources	Global Warming Potential (GWP)
Carbon dioxide	CO <sub>2</sub>	278,000	379,000	variable	fossil fuel, land use, cement	1
Methane	CH <sub>4</sub>	700	1,774	12.2±3	fossil fuel, rice paddy, waste, livestock	21
Nitrous oxide	N <sub>2</sub> O	275	319	120	fertilizer, ...	310
CFC-12	CCl <sub>2</sub> F <sub>2</sub>	0	0.538	102	liquid coolants	6,200-7,100
HCFC-22	CHClF <sub>2</sub>	0	0.169	12.1	liquid coolants	1,300-1,400
Perfluoromethane	CF <sub>4</sub>	0	0.074	50,000	aluminum production	6,500
Sulfur hexafluoride	SF <sub>6</sub>	0	0.006	3,200	dielectric fluid	23,900

## Projected earth system changes

- Warmer and fewer cold days and nights over most land areas: late 20C very likely occurred, likely due to human activity, future trends virtually certain
- Warmer and more frequent hot days and nights over most land areas: late 20C very likely occurred, likely due to human activity, future trends virtually certain
- Warm spells/heat waves, frequency increases over most land areas: late 20C likely, more likely than not due to human activity, future trends very likely
- Heavy precipitation events, frequency increases over most areas: late 20C likely, more likely than not due to human activity, future trends very likely
- Area affected by droughts increases: late 20C likely, more likely than not due to human activity, future trends likely
- Intense tropical cyclone activity increases: late 20C likely, more likely than not due to human activity, future trends likely
- Increased incidence of extreme high sea level: late 20C likely, more likely than not due to human activity, future trends likely




## Particularly vulnerable regions

- Areas or populations within or bordering regions with a high endemicity of climate-sensitive diseases (eg. malaria)
- Areas with an observed association between epidemic disease and weather extremes (eg. El Niño-linked epidemics of malaria and dengue)
- Areas at risk from combined climate impacts relevant to health (eg. stress on food and water supplies or risk of coastal flooding)
- Areas at risk from concurrent environmental or socioeconomic stresses (eg. local stress from land use practices or an impoverished or undeveloped health infrastructure) and with little capacity to adapt



## Food production and malnutrition

- Drought will exacerbate malnutrition
  - 1.7 billion people (1/3 of world's population) live in water-stressed countries now
    - -> 5 billion by 2025
  - The central Asia and southern Africa may have decreased average annual stream flow
    - Glaciers of the Tibetan plateau may melt by 2035
    - Diarrhea, scabies, conjunctivitis (red eye), trachoma may increase (by poor hygiene due to depleted water resources)
    - Crops and livestock may be affected
- Rosenzweig et al. (1993) suggested that by 2060, additional 40 to 300 million people, relative to projected baseline 640 million people could be at risk of malnutrition due to anthropogenic warming
- Fisheries are also likely to be affected by Ocean warming and water acidification [ocean pH may drop by 0.14-0.35 during 21C] (then reduction of plankton abundance)



## Weather extremes

- Heat waves
  - August 2003 heat waves caused 44,878 excess deaths in affected countries (Belgium, Switzerland, Germany, Spain, France, Italy, ...)
  - Urban heat island (retaining heat as a result of buildings, human activities: black asphalt and other dark surface have a low albedo; lacking in trees; no wind road) worsens the situation
- Reduced extreme cold
  - It may reduce stroke, but not linked with flu. Counter-effects are limited
- Natural disasters
  - Floods, droughts, and wildfires may increase. Not only direct victims of disasters, PTSD patients and infectious disease outbreaks (confounding factors must be controlled) are also to be paid attention
- Sea-level rise



## Air pollution

- Ozone
  - Patz et al. (2004) predicted the increase in ozone exceedance days by 2050. Reduction of 9.9 good days, increase of 2.5 moderate days and 7.4 unhealthy days within 89 summer days (esp. for sensitive groups)
- Aeroallergens
  - Increase of pollen due to high CO<sub>2</sub>
- Allergens and contact dermatitis
  - Increase of poison ivy, which causes contact dermatitis



## Infectious diseases

- Water- and foodborne diseases
  - Climate change affects freshwater and marine ecosystems
  - *E. coli* O157 and other bacteria may increase due to contaminated drinking water caused by fails of infrastructure during heavy rain
  - 1993 cryptosporidium outbreak in Milwaukee (403,000 people were exposed to contaminated water)
  - Marines are contaminated by harmful algal blooms. Ciguatera ingested fish, *Vibrio* species (eg. *V. cholerae*) proliferate in warm water
  - More frequent warm days and greater humidity increase food-borne disease like salmonellosis, campyrobacter
- Vector-borne diseases
  - Mosquito-borne diseases: malaria (An.), dengue (Ae.), WNV (Cu.), chikungunya (Ae.) and Rift Valley fever (Ae.) may increase due to shortened reproductive cycles of mosquitoes in higher temperature and increase of breeding sites after heavy rainfall
  - Tick-borne disease: Lyme disease may expand the affected area due to expansion of areas lowest monthly average temperature being higher than minus 7 degree C.
  - Rodent-borne diseases (incl. fleas associated with rodents): Hantavirus and plague may increase



## Public health response

- Mitigation and adaptation
  - Mitigation = Primary prevention
    - Efforts to stabilize or reduce the production of greenhouse gases
    - Eg. Replacement of energy production by sustainable/reproducible ones (wind, solar) may reduce greenhouse gases
    - Stabilization wedges: Technologies and behavioral changes contributing to reduction of greenhouse gases can be seen as wedges, combination of wedges is a strategy to stabilize climate
  - Adaptation = Secondary prevention
    - Efforts to reduce the public health impact of climate change. Eg. increase of disaster preparedness
    - Vulnerability assessment is needed
- Co-benefits: if one strategy may contribute to multiple mitigation and/or adaptation, it will be very feasible and politically easy to accept
- Unintended consequences: eg. biofuel production may quadruple within next 15-20 years, crops as food may short, food prices may increase.
- Climate change policy: United Nations Framework Convention on Climate Change (UNFCCC) set out a framework since 1992 through COP meetings: 1997 COP3 Kyoto protocol, overall emission of greenhouse gases should be reduced by at least 5% below 1990 level in 2008-2012. 2007 COP13, USA was only country not to ratify the treaty, but after 2008 election, USA evolved
- Ethical considerations: Developed countries must be responsible to emission of greenhouse gases, but not seriously affected. Instead, developing countries are affected. Similar discrepancy also exists between rich and poor within a country