

Potential for Bias When Estimating Critical Windows for Air Pollution in Childrens Health

Ander Wilson

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Air Pollution and Children's Health

- ▶ Evidence that maternal exposures to air pollution are associated with:
 - decreased birth weight
 - increased risk of pre-term birth
 - increased rates of childhood asthma and wheeze

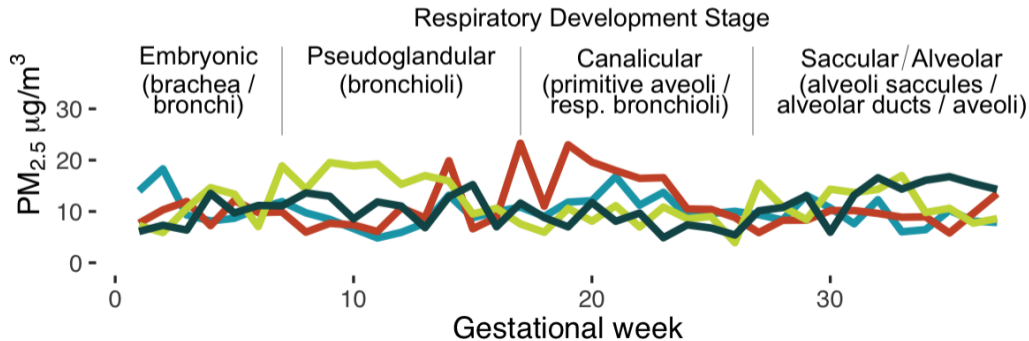
Air Pollution and Children's Health

- ▶ Evidence that maternal exposures to air pollution are associated with:
 - decreased birth weight
 - increased risk of pre-term birth
 - increased rates of childhood asthma and wheeze
- ▶ What is the best method for estimating this association and identifying critical windows?

Critical Windows of Vulnerability

Definition

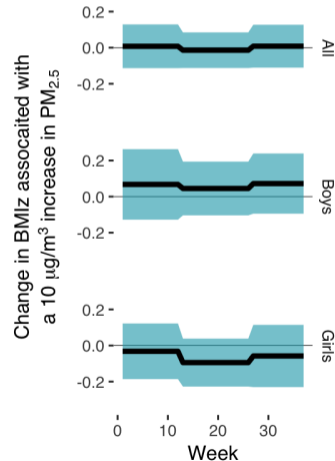
A period in time during which there is an increased association between exposure and a future health outcome.



Trimester Average Exposure (TAE) Models

- ▶ Most common approach
- ▶ *Separate TAE* models
 - separate model for each trimester (q)
$$Y_i = \mu + \beta_q TAE_{iq} + Z_i^T \gamma + \epsilon_i$$
- ▶ Pre-specified potential windows corresponding to trimesters

Separate TAE analysis of BMI z-score



Trimester Average Exposure (TAE) Models

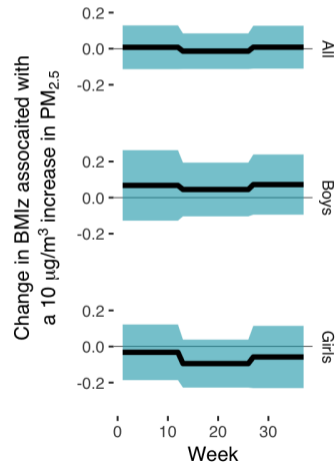
- ▶ Most common approach
- ▶ *Separate TAE* models
 - separate model for each trimester (q)

$$Y_i = \mu + \beta_q TAE_{iq} + Z_i^T \gamma + \epsilon_i$$

- ▶ Pre-specified potential windows corresponding to trimesters
- ▶ Alternative *joint TAE* model

$$Y_i = \mu + \sum_{q=1}^3 \beta_q TAE_{iq} + Z_i^T \gamma + \epsilon_i$$

Separate TAE analysis of BMI z-score



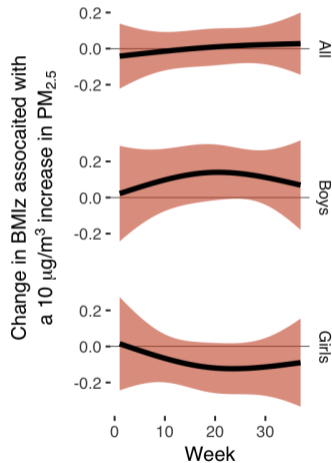
Distributed Lag Model (DLM)

- ▶ Simultaneous analysis of exposure at all time points

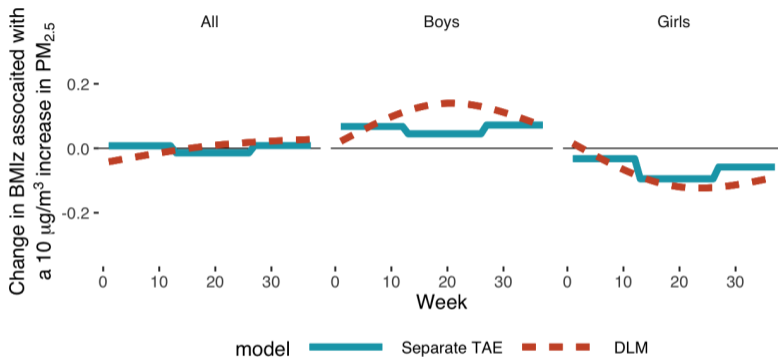
$$Y_i = \mu + \sum_{t=1}^T \theta_t X_{it} + Z_i^T \gamma + \epsilon_i$$

- ▶ $\theta = (\theta_1, \dots, \theta_T)^T$ smooth
 - e.g. natural spline, Gaussian process, etc.
- ▶ Let the data define the windows

DLM analysis of BMI z-score



PM_{2.5} Exposure and BMI z-score: Separate TAE vs DLM

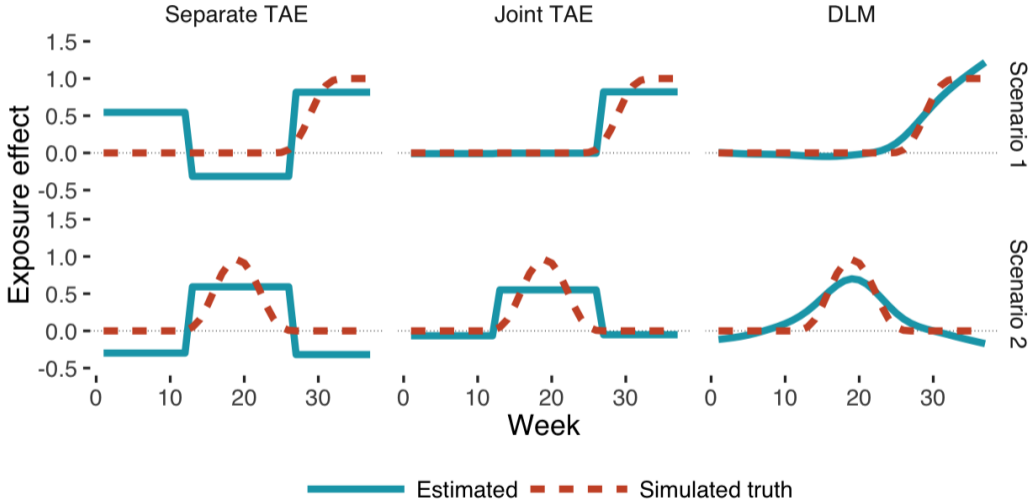


- ▶ Data from the ACCESS perinatal cohort in Boston, MA, USA ($n = 238$)
- ▶ Weekly PM_{2.5} exposures at maternal residence
- ▶ Controls for maternal pre-pregnancy BMI, age, education, race/ethnicity, atopy, self, reported smoking during pregnancy, stress index, neighborhood disadvantage index, season of birth, and child sex (overall only)

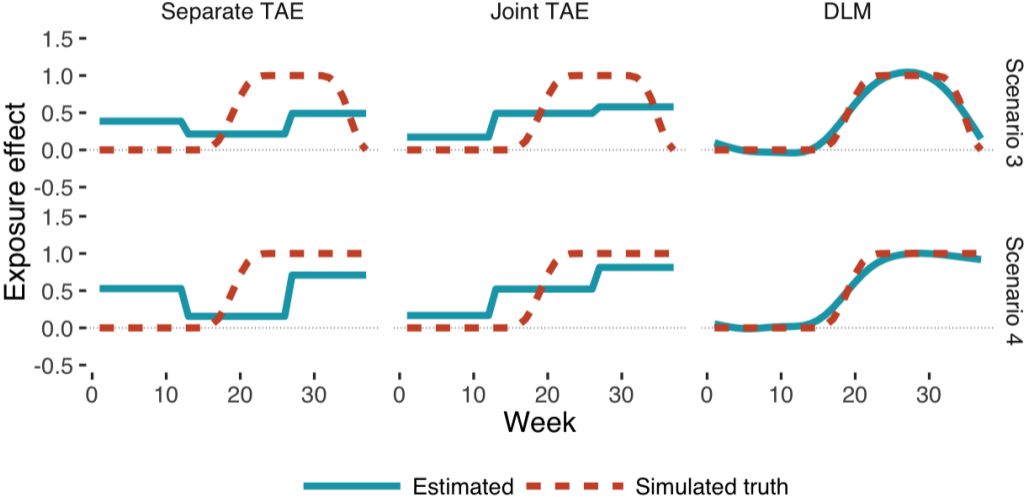
Test with Simulation

- ▶ Use real exposures and sample size from ACCESS data ($n = 238$)
- ▶ Simulate outcome from DLM with Gaussian errors
- ▶ 1000 simulated data sets
- ▶ No other biases:
 - No covariates that influence outcome
 - No confounders
 - No seasonal trends in outcome besides those explained by exposure
 - No measurement error

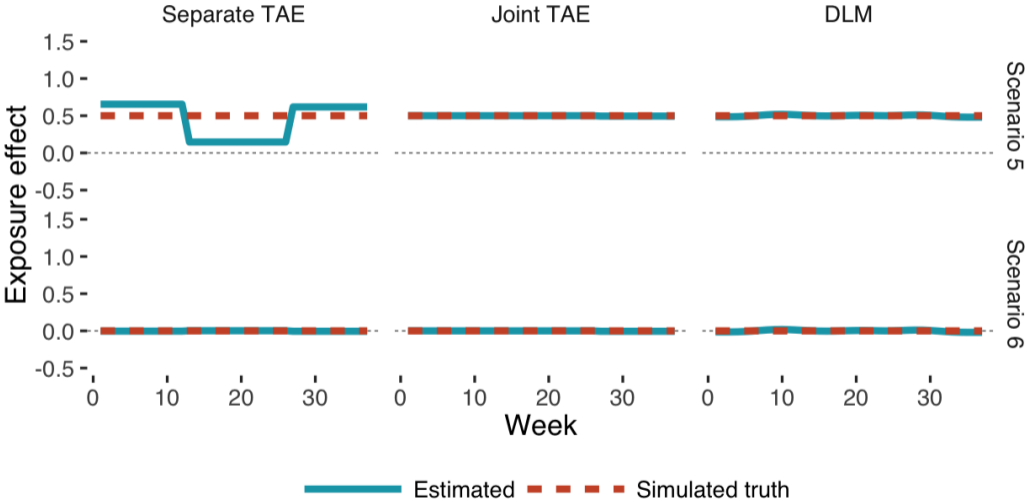
Simulation: Window is a Trimester



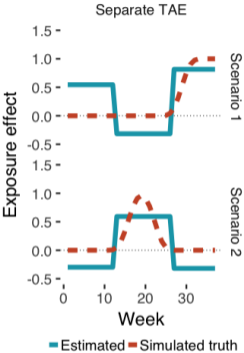
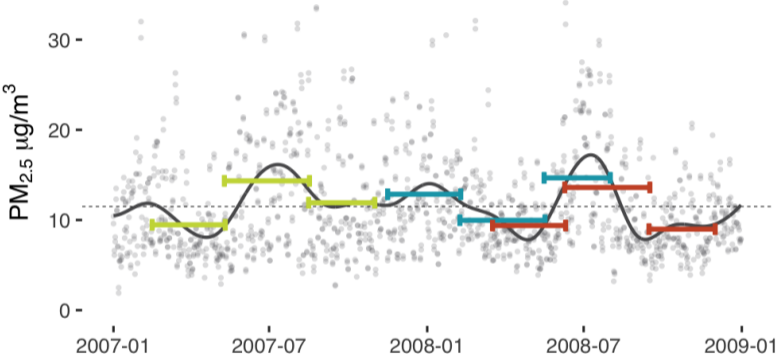
Simulation: Window is Not a Trimester



Simulation: Flat or Null

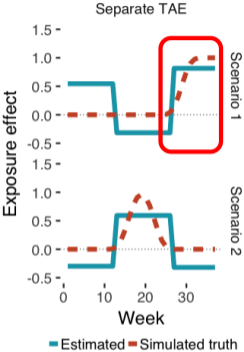
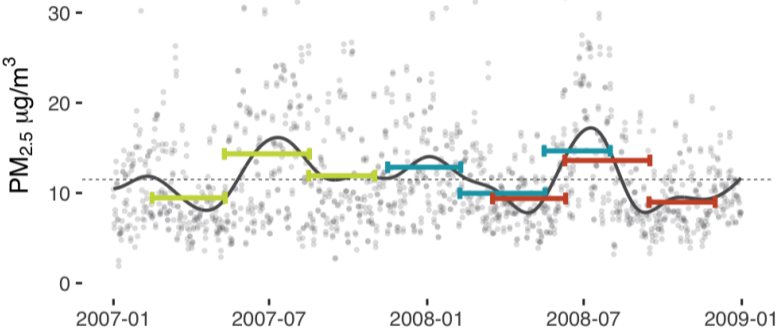


Seasonality and Confounding



$$\text{cor} \left[\begin{pmatrix} TAE_1 \\ TAE_2 \\ TAE_3 \end{pmatrix} \right] = \begin{pmatrix} 1.00 & & \\ -0.34 & 1.00 & \\ 0.66 & -0.40 & 1.00 \end{pmatrix}$$

Seasonality and Confounding



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Simulation Recap

- ▶ Separate TAE model can result in biased estimates
- ▶ Bias arises due to seasonal trends that induce correlation between trimesters which act as confounders
- ▶ Joint TAE was sometimes biased but generally had the correct pattern
- ▶ DLM performed best overall
- ▶ No bias in any method when no true exposure effect

Thank You!

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