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## Effect of PM<sub>10</sub>, PM<sub>2.5</sub>, and PM1 on blood markers in a panel of elderly subjects

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Effect of  $PM_{10}$ ,  $PM_{2.5}$ , and PM1 on blood markers in a panel of elderly subjects.

**BACKGROUND:** Systemic inflammation biomarkers have been associated with risk of cardiovascular morbidity and mortality.

**OBJECTIVES:** We aimed to clarify associations of particulate matter  $(PM_{10}/PM_{2.5}/PM1)$  with systemic inflammation using models in the elderly subjects.

**METHODS:** We followed a panel of 44 nonsmoking elderly subjects living in a retirement home in Tehran city, Iran. Blood plasma biomarkers were measured weekly over 6 weeks and included white blood cells (WBC), high sensitive C-reactive protein (hsCRP), tumor necrosis factor-soluble receptor-II (sTNF-RII), interleukin-6 (IL-6), and von Willebrand factor (vWF). We measured hourly indoor and outdoor exposure to PM<sub>10</sub>/PM<sub>2.5</sub>/PM1 mass. The random intercept linear mixed effects model was used for data analysis.

**RESULTS**: We observed significant positive associations for WBC, IL-6, and sTNF-RII with exposure to  $PM_{10}$ ,  $PM_{2.5}$ , and PM1; hsCRP with  $PM_{2.5}$  and PM1; and vWF with  $PM_{10}$  and  $PM_{2.5}$  mass concentration in elderly subjects from the current-day and multiday averages. Significant increase in blood markers varied by PM sizes, although in general the highest increases in marker levels were observed for  $PM_{2.5}$ .

**Conclusions:** Our results provided some evidence that exposure to PM<sub>10</sub>, PM<sub>2.5</sub>, and PM1 was associated with inflammation and coagulation blood markers in elderly people, but associations were dependent on particle size.



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