RED and GREEN

How a green milieu benefits to cardiovascular health

François Reeves MD FRCPC

Interventional Cardiologist
CHU Montreal and CS Laval
Associate Professor of Medicine
Faculty of Medicine
Department of Environmental Health
University of Montreal







D^r François Reeves











"Planet Heart is the world seen through 'the eyes of the heart.' That cardiovascular health depends on the environment has never been so clearly shown."

DAVID SUZUKI

FRANÇOIS REEVES, MD

planet HEART

HOW AN

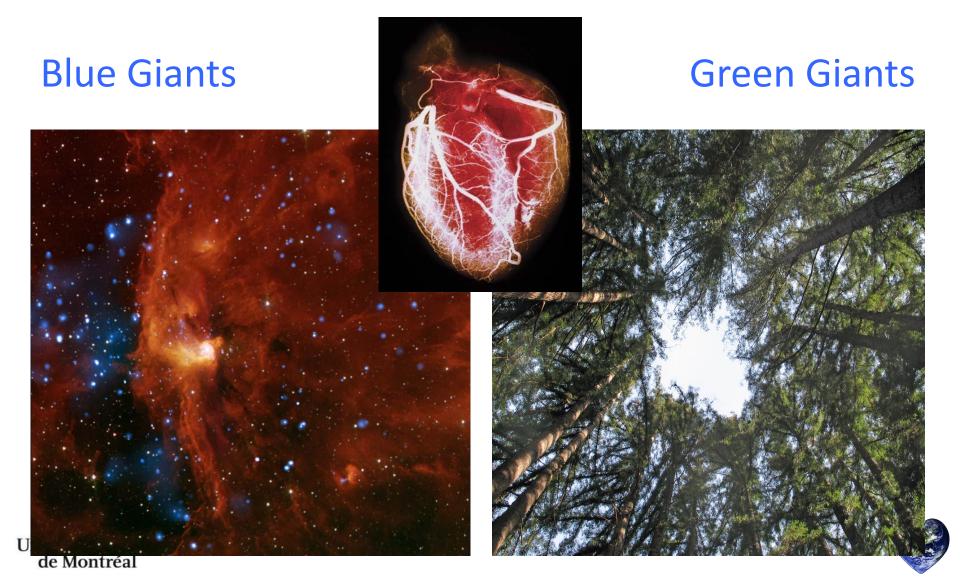
UNHEALTHY ENVIRONMENT

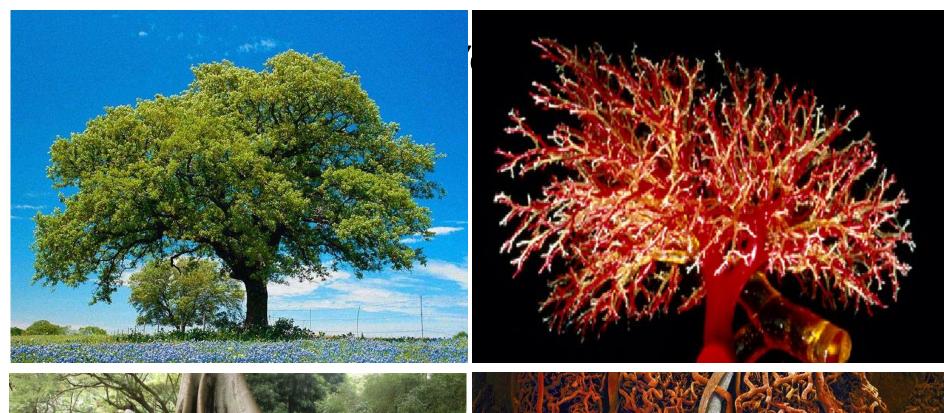
LEADS TO

HEART DISEASE

Greystone Books

Oxygen





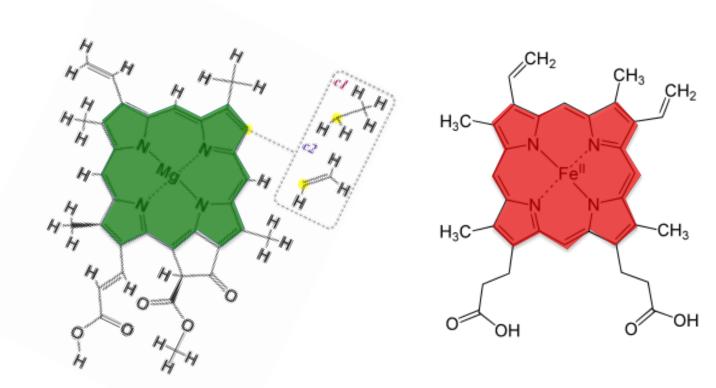




600 M Years ago Differentiation vegetal/animal

Chlorophyll

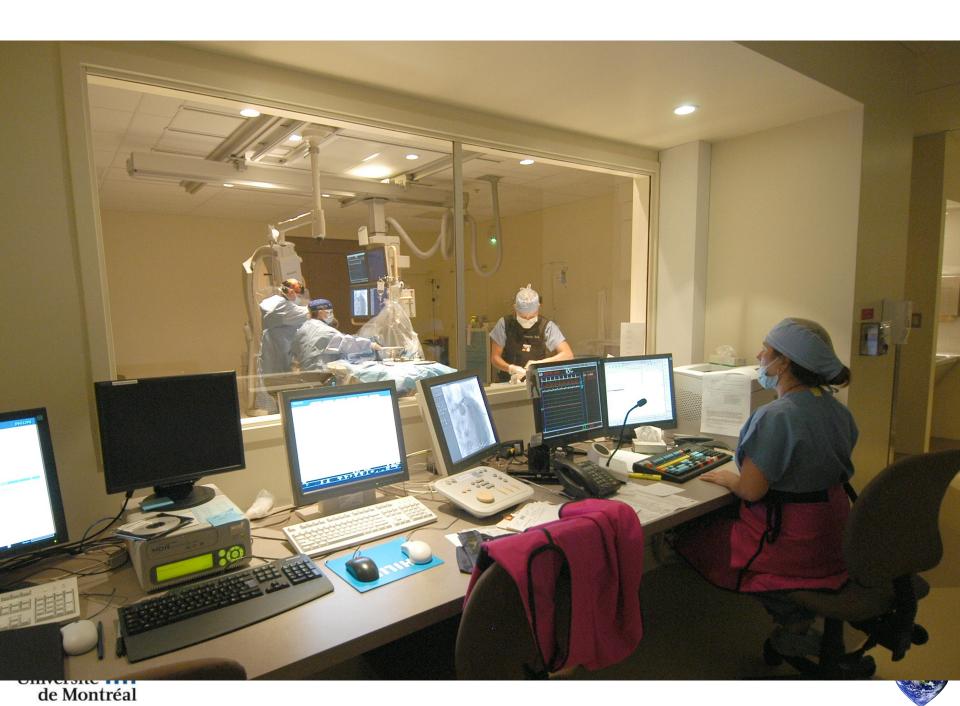
Hemoglobin











- Atherosclerosis -

Plaque

Thrombus

@ medmovie.com 2002





Why Cardiovascular disease?

Framingham Heart Study 1948-ongoing

National Heart, Lung and Blood Institute /Boston University

Heredity

Sedentarity

High blood pressure

Diabetes

Obesity

Tobacco

Stress

High cholesterol



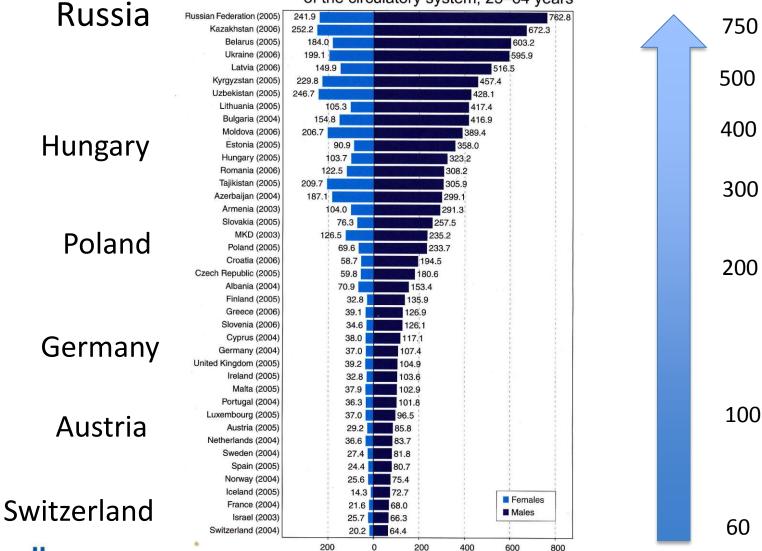


Did Framingham say everything?





Deaths from diseases of the circulatory system, 25–64 years

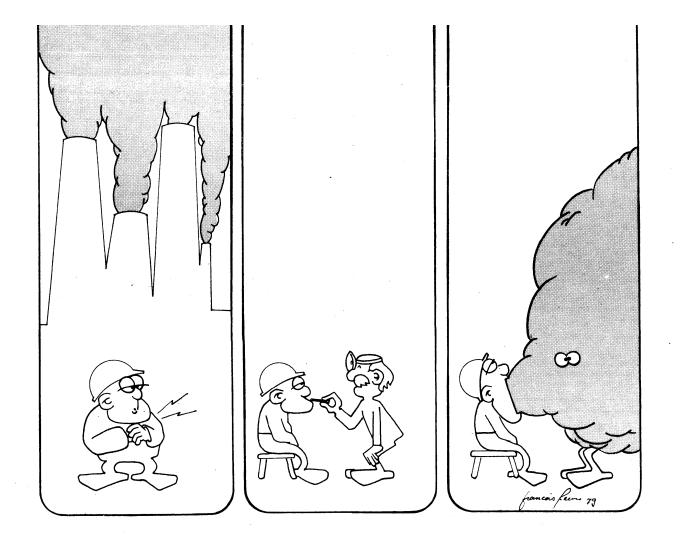


Per 100 000 population





Cardiology is an environmental specialty







Cardiovascular Disease: Facts

- Rare in animals
- Rare within Mankind
 - before industrial revolution
- Rare within Mankind
 - living outside industrialized world





Cardiovascular Disease: Facts

- Inducible in animals
 - Excellent medical bench test
- Dramatic increase of cardiac morbidity
 - Following traditional industrial revolution





Why Framingham? 1948

The Framingham Heart Study

little was known about the general causes of heart disease and stroke, but the death rates for cardiovascular disease have been increasing steadily since the beginning of the century and had become an American epidemic.





Why Framingham? 1948

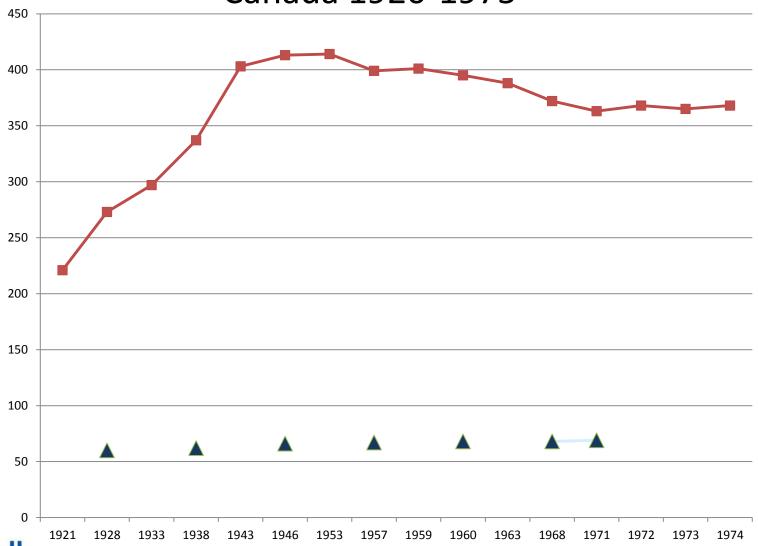
The Framingham Heart Study

American epidemic





Rate of CV mortality/ Life expectancy Canada 1920-1975



Université m de Montréal



Why Atherosclerosis?

3 triads

-What we are

Cholesterol, hypertension, diabetes

-What we do

Sedentarity, obesity, tobacco

-Where we are

Environment, food, urbanism





Human trade with environment

What we eat

• 1 kg

What we drink

2 kgs

What we breathe
 10-20 kgs





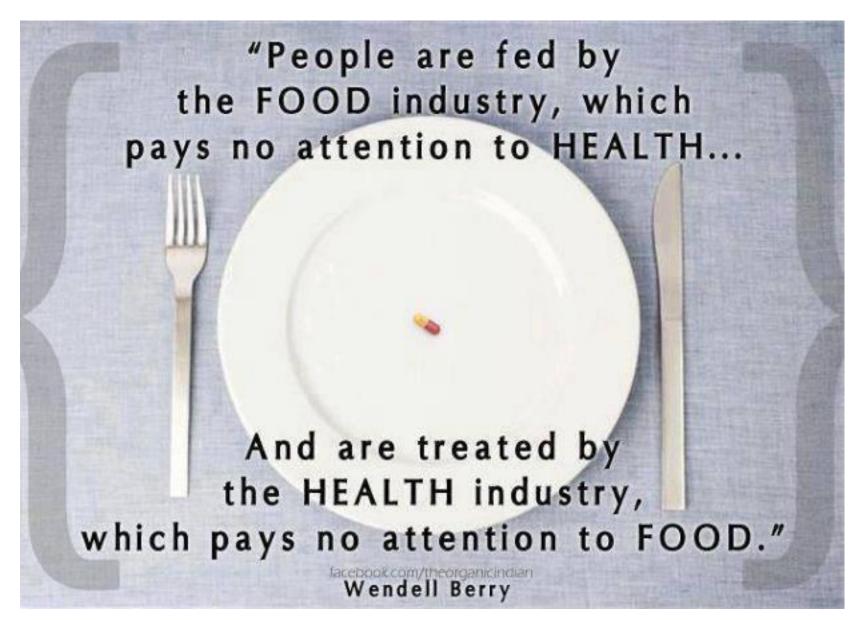
Industrial Revolution: Vascular Nano-Aggressors

- Food Nano-Aggressors
 - Salt in excess
 - Added industrial sugars
 - Trans fat
 - Phosphoric acid
 - Pesticides

- Airborne Nano-Aggressors
 - -CO, NO₂, SO₂
 - Fine, Ultrafine Particles
 - VOC, PAH
 - Ozone
 - Lead, Mercury











United States

THE REVISES

The North Carolina family fights the effects of abundance with exercise

GRAINS AND OTHER STARCHY FOODS

\$17.92

DAIRY \$14.51

MEAT, FISH AND EGGS

\$54.92

FRUITS AND VEGETABLES

\$41.07

CONDIMENTS \$12.51

SNACKS AND DESSERTS

\$21.27

PREPARED FOOD \$24.27

> FAST FOOD \$71.61

RESTAURANTS

\$6.15

BEVERAGES \$77.75

FOOD EXPENDITURE FOR THE WEEK

\$341.98

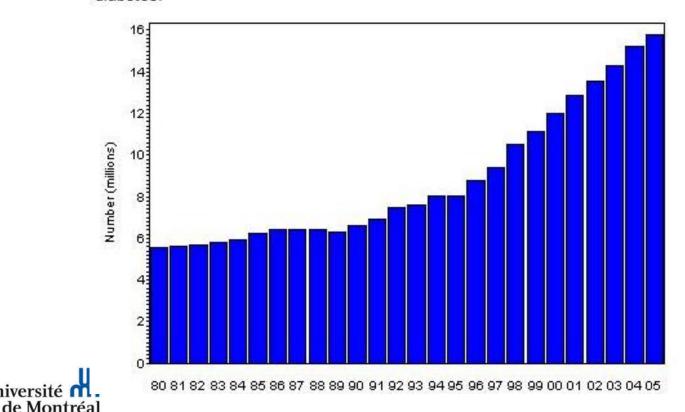




Collateral damage of obesity/metabolic syndrome: Explosion of diabetes

Number (in Millions) of Persons with Diagnosed Diabetes, United States, 1980–2005

Diabetes is becoming more common in the United States. From 1980 through 2005, the number of Americans with diabetes increased from 5.6 million to 15.8 million. As the detailed tables show, people aged 65 years or older account for approximately 38% of the population with diabetes.



2014: 29 M



1952: the Great London Smog

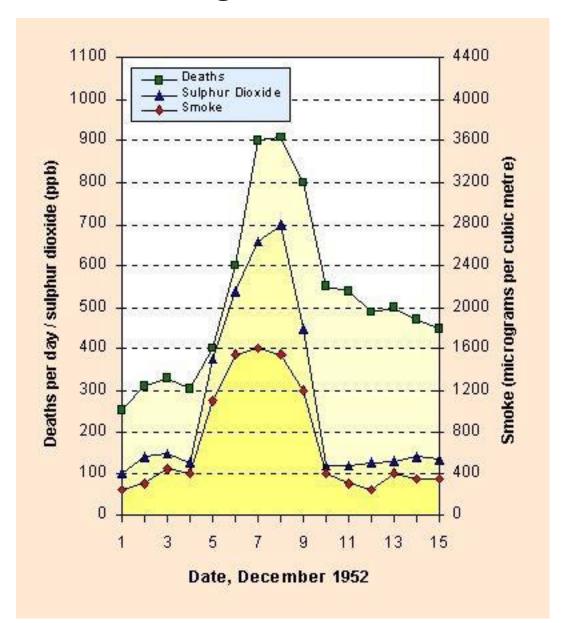






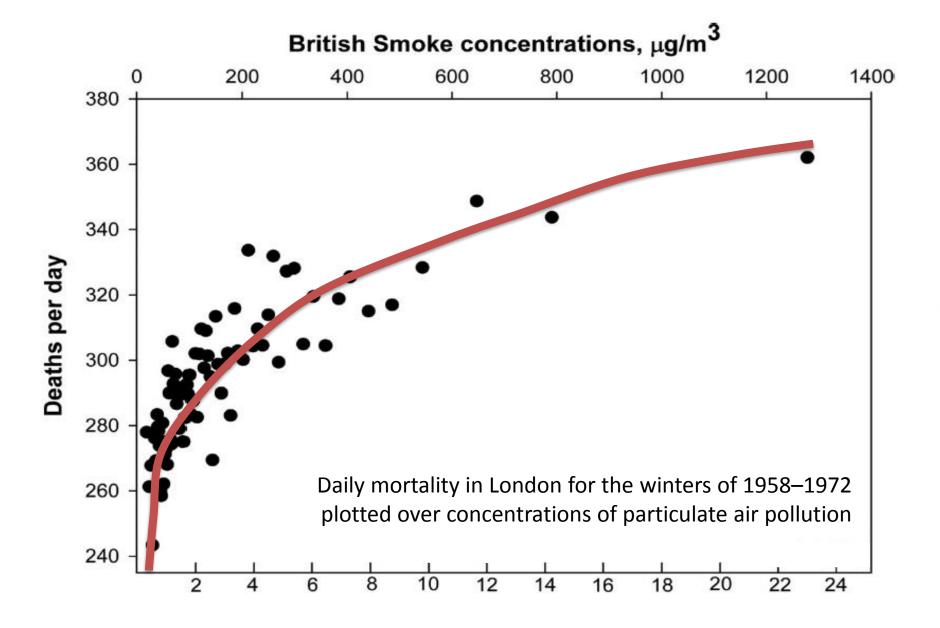


"Great London Smog »: 12 000 deaths in excess









Circulation September 15, 2009

1993: The Six-Cities Study

The New England Journal of Medicine

©Copyright, 1993, by the Massachusetts Medical Society

Volume 329

DECEMBER 9, 1993

Number 24

AN ASSOCIATION BETWEEN AIR POLLUTION AND MORTALITY IN SIX U.S. CITIES

Douglas W. Dockery, Sc.D., C. Arden Pope III, Ph.D., Xiping Xu, M.D., Ph.D., John D. Spengler, Ph.D., James H. Ware, Ph.D., Martha E. Fay, M.P.H., Benjamin G. Ferris, Jr., M.D., and Frank E. Speizer, M.D.

Abstract Background. Recent studies have reported associations between particulate air pollution and daily mortality rates. Population-based, cross-sectional studies of metropolitan areas in the United States have also found associations between particulate air pollution and annual mortality rates, but these studies have been criticized, in part because they did not directly control for cigarette smoking and other health risks.

Methods. In this prospective cohort study, we estimated the effects of air pollution on mortality, while controlling for individual risk factors. Survival analysis, including Cox proportional-hazards regression modeling, was conducted with data from a 14-to-16-year mortality follow-up of 8111 adults in six U.S. cities.

Results. Mortality rates were most strongly associated with cigarette smoking. After adjusting for smoking and

other risk factors, we observed statistically significant and robust associations between air pollution and mortality. The adjusted mortality-rate ratio for the most polluted of the cities as compared with the least polluted was 1.26 (95 percent confidence interval, 1.08 to 1.47). Air pollution was positively associated with death from lung cancer and cardiopulmonary disease but not with death from other causes considered together. Mortality was most strongly associated with air pollution with fine particulates, including sulfates.

Conclusions. Although the effects of other, unmeasured risk factors cannot be excluded with certainty, these results suggest that fine-particulate air pollution, or a more complex pollution mixture associated with fine particulate matter, contributes to excess mortality in certain U.S. cities. (N Engl J Med 1993;329:1753-9.)





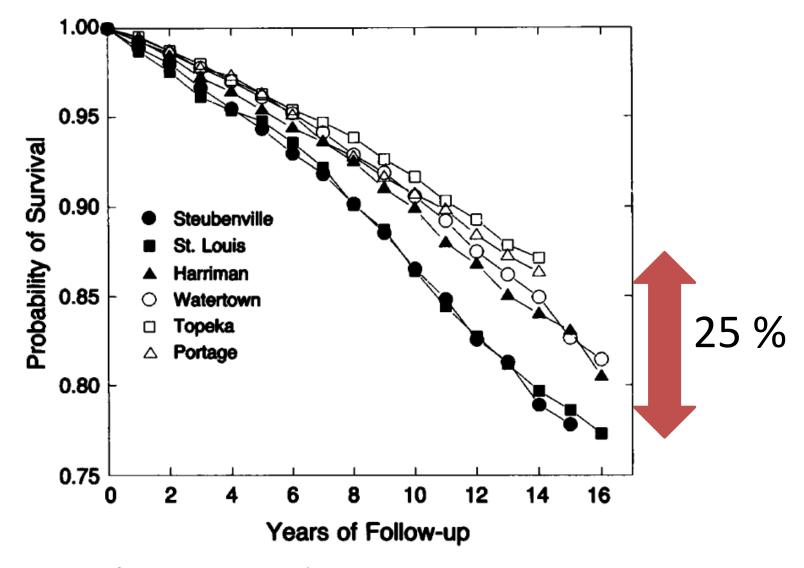


Figure 2. Crude Probability of Survival in the Six Cities, According to Years of Follow-up.





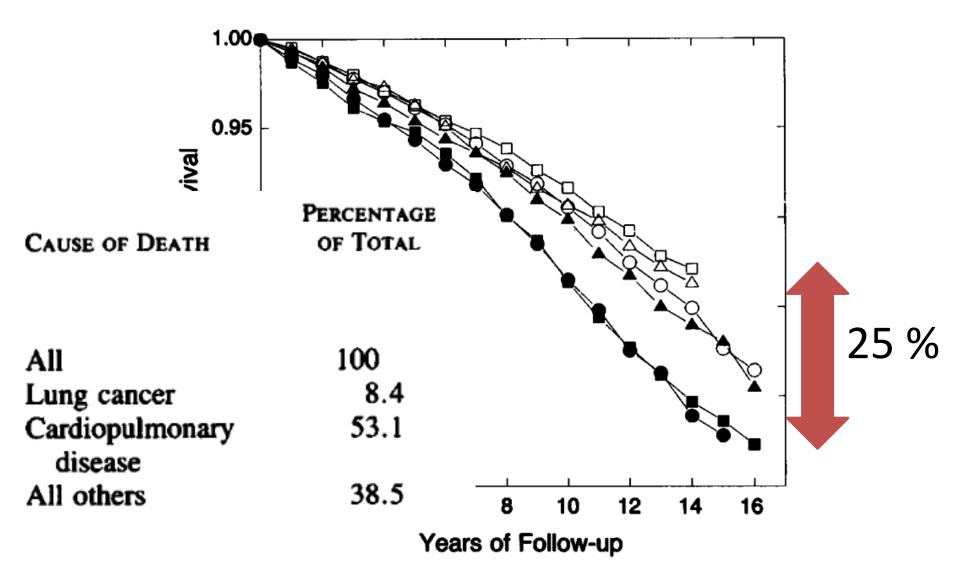


Figure 2. Crude Probability of Survival in the Six Cities, According to Years of Follow-up.





2004; 2010

AHA Scientific Statement

Particulate Matter Air Pollution and Cardiovascular Disease An Update to the Scientific Statement From the American Heart Association

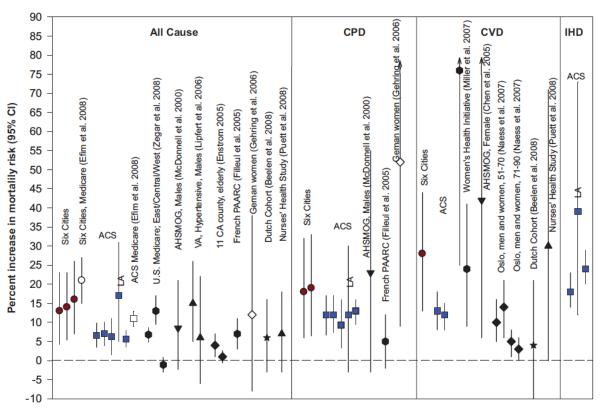




Figure 1. Risk estimates provided by several cohort studies per increment of 10 μ g/m³ in PM_{2.5} or PM₁₀. CPD indicates cardiopulmonary disease; IHD, ischemic heart disease.



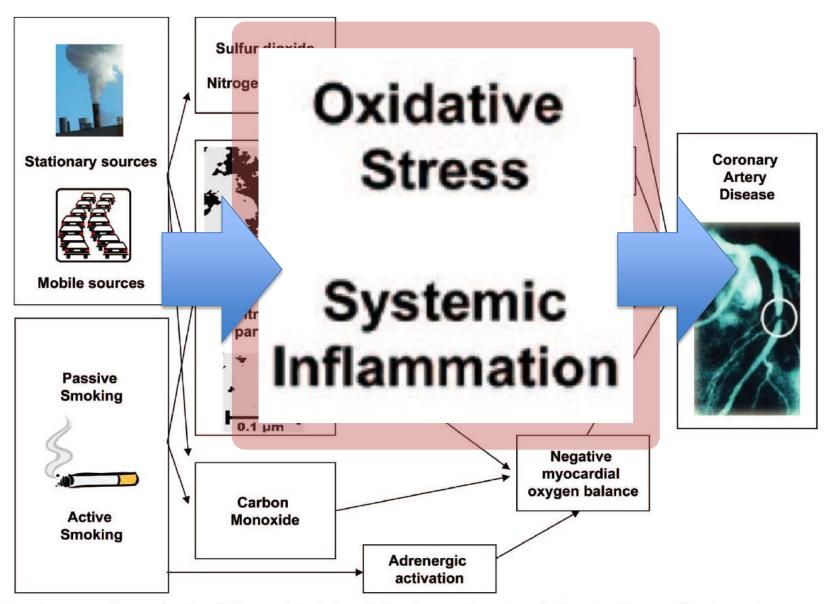


Figure. Overview on pathomechanism linking ambient air pollution,⁴ secondhand smoke,⁷ and active smoking to acute coronary syndromes.

Filtered air







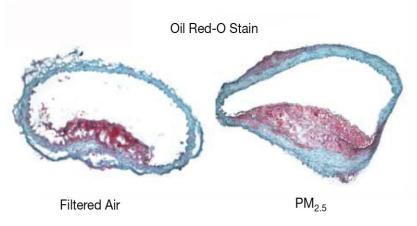




Filtered air

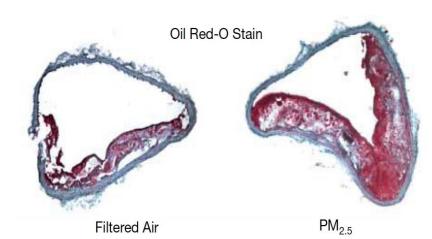
Polluted air

Normal Chow



Exposure

High-Fat Chow



Exposure

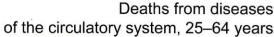




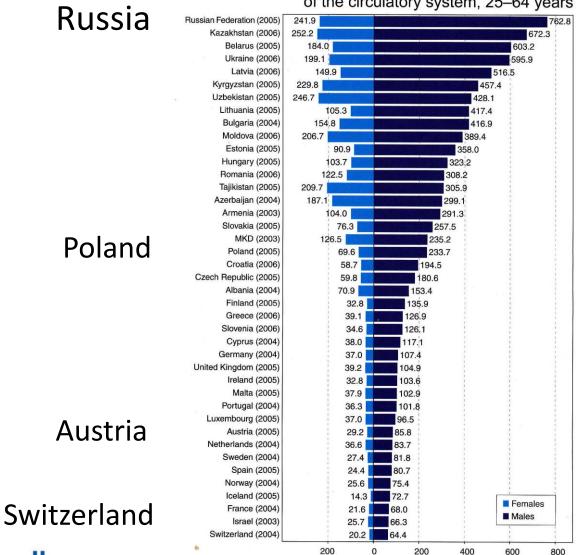
Life and death Causes of death

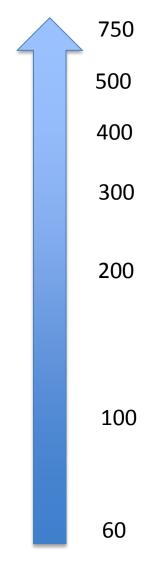
World Health Organization, 2008

37



Per 100 000 population





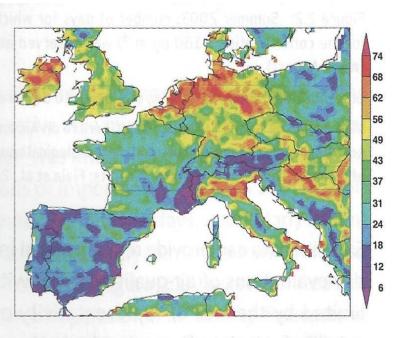




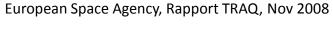
Cardiovascular Mortality Men 45-74. Europe 2000

Rates per 100 000 Rates per 100 000 0 < 140 140 < 190 190 < 268 268 < 367 367 < 1.051

Nb Events of Smog Europe 2003



« An update on regional variation in cardiovascular mortality within Europe ». *European Heart Journal* 2008 doi: 10.1093/eurheartj/ehm604.

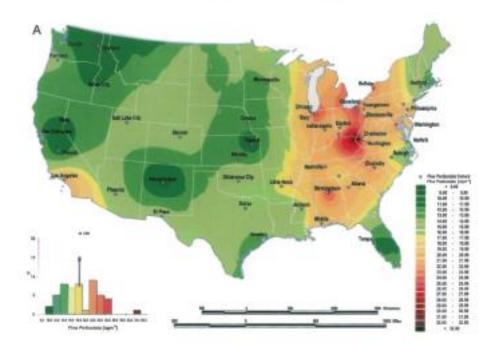


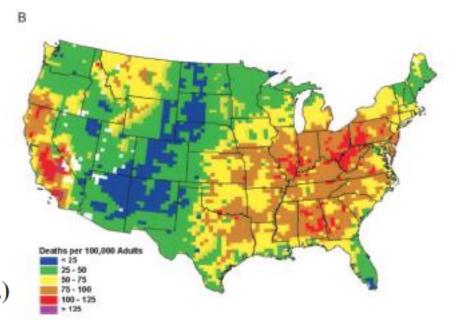




Environmental Cardiology Studying Mechanistic Links Between Pollution And Heart Disease

Dr Aruni Bhatnagar St-Louis, Kentucky











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|--------|--------------|-----------|------------|-----------|--|
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7 million premature deaths annually linked to air pollution

News release

25 MARCH 2014 I GENEVA - In new estimates released today, WHO reports that in 2012 around 7 million people died - one in eight of total global deaths – as a result of air pollution exposure. This finding more than doubles previous estimates and confirms that air pollution is now the world's largest single environmental health risk. Reducing air pollution could save millions of lives.





2008

The environmental burden of disease in Canada: Respiratory disease, cardiovascular disease, cancer, and congenital affliction

David R. Boyda,*, Stephen J. Genuisb

- 20,000 deaths in excess
- 5-11 000 cardiovascular deaths
- 33-67 000 cardiac hospitalizations
- 1,5 million hosp days for heart disease
- 9,1 billion dollars





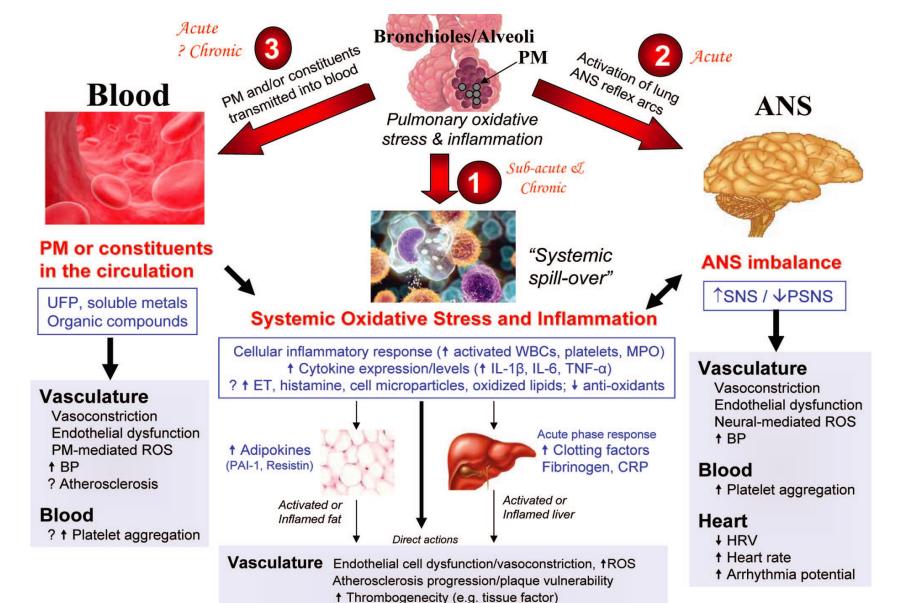
ENVIRONMENT AND «CLASSIC» CARDIAC RISK FACTORS

If one presents with high blood pressure, diabetes, high cholesterol and obesity:

Does environment play a role?







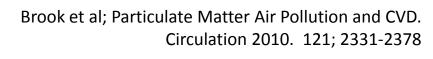
Insulin resistance, dyslipidemia, impaired HDL function

↑ Coagulation, thrombosis; ↓ fibrinolysis (e.g. PAI-1)



Metabolism

Blood

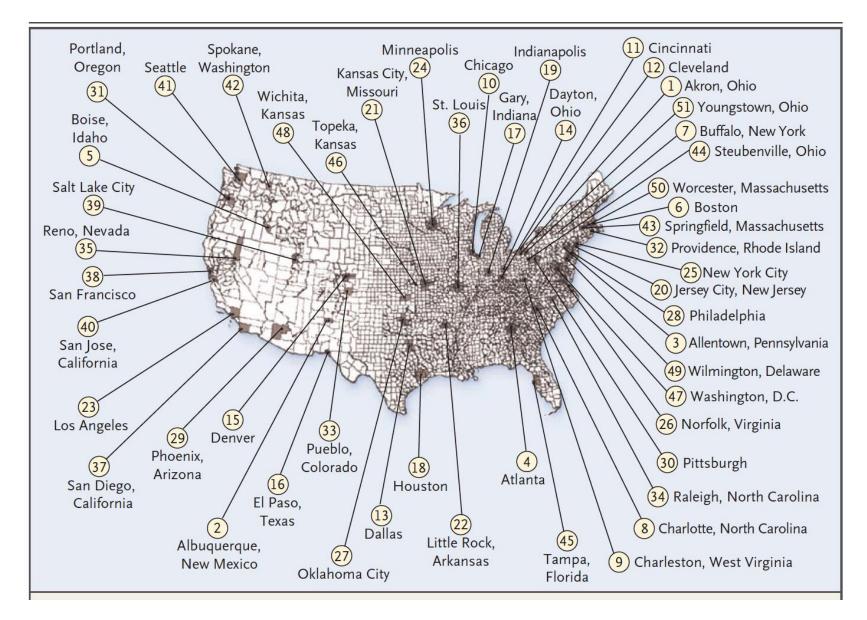




DOES IT HELP IF WE CLEAN AIR?







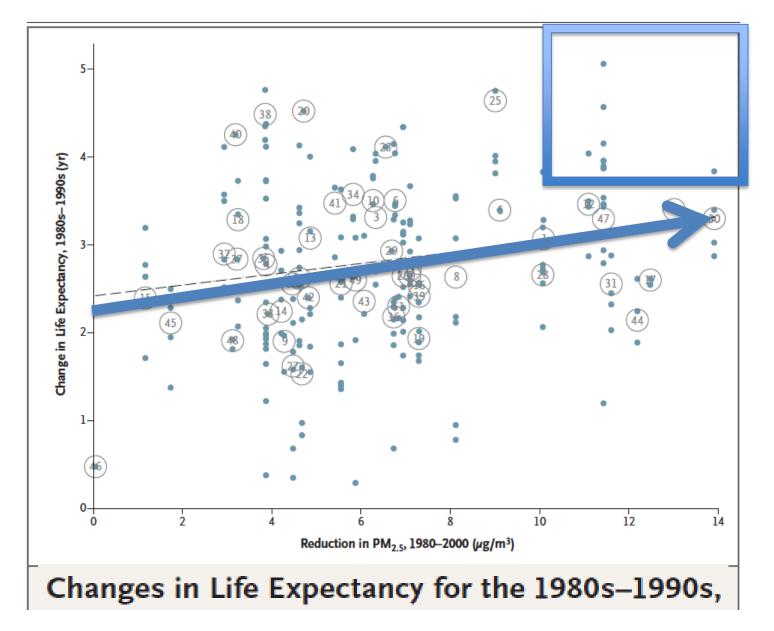


Fine-particulate air pollution and life expectancy in the United States .

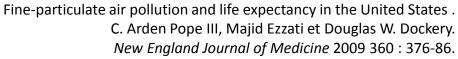
C. Arden Pope III, Majid Ezzati et Douglas W. Dockery.

New England Journal of Medicine 2009 360 : 376-86.











Global warming Urban Heat Islands Pollution

Protect and plant trees!





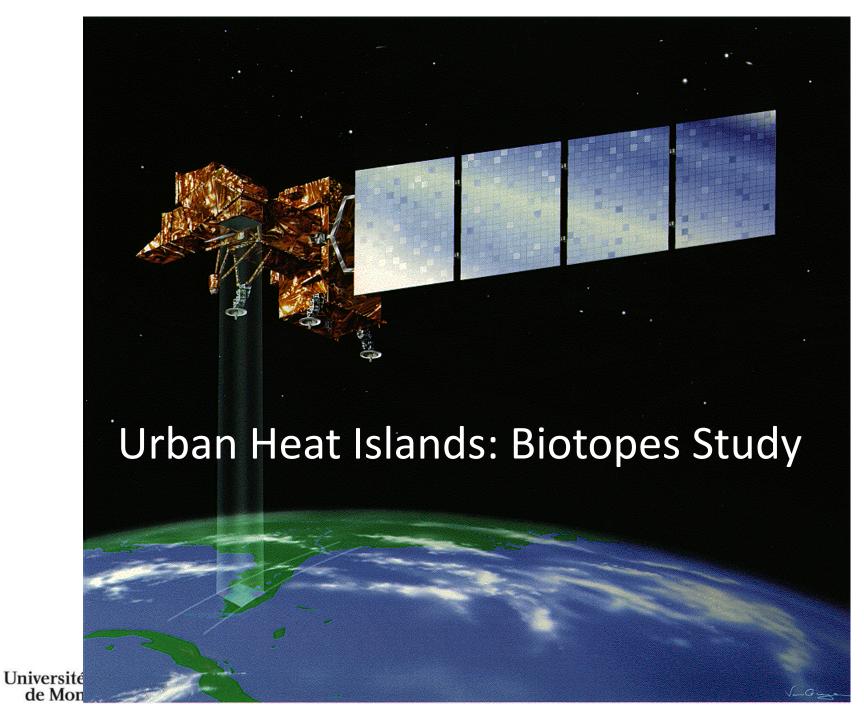
TABLE 1 Overview of positive effects from trees and other plant forms on the urban climate.



| ALD CHALLEY | EU | | | |
|---------------------------------|---|--|--|--|
| AIR QUALITY | Filtering out of dust and air pollution | | | |
| MICROCLIMATE | Regulation of temperature extremes (through shade and shelter) Air humidification, making it cooler and more pleasant | | | |
| WATER MANAGEMENT | Water storage and reduction of peaks in drainage needs at times of precipitation | | | |
| ENERGY SAVINGS | Reduction in heat loss (from indoors) and need for cooling | | | |
| PROPERTY VALUES | Higher in the vicinity of plants | | | |
| HEALTH | Possibilities for relaxation and activity | | | |
| BIODIVERSITY | Habitat for many organisms | | | |
| LIMITATION OF GREENHOUSE EFFECT | Sequestering of CO ₂ | | | |
| LANDSCAPE | Screening of traffic and industry | | | |
| AESTHETICS | Beautification of streets and neighbourhoods | | | |

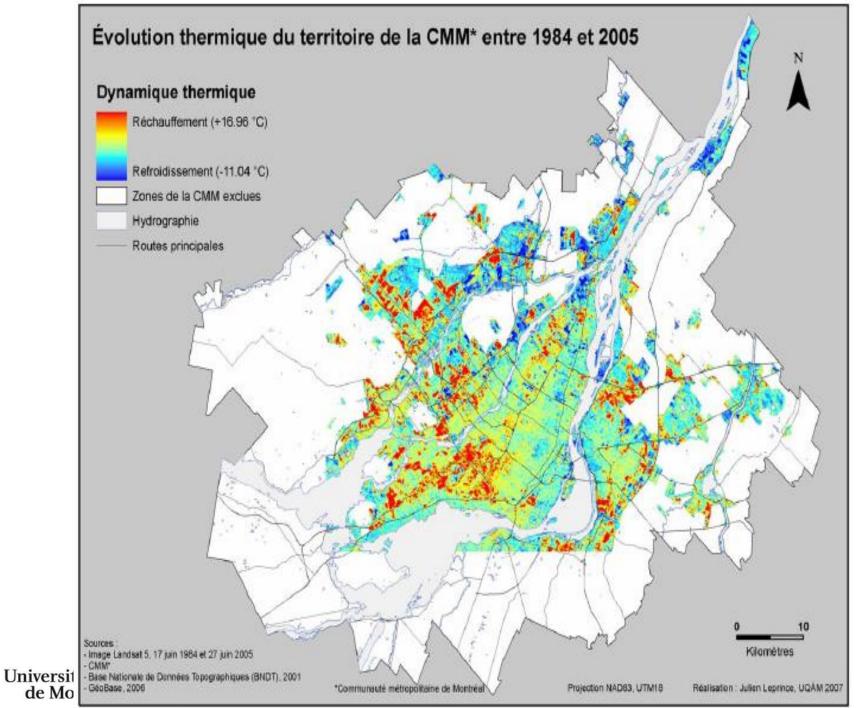






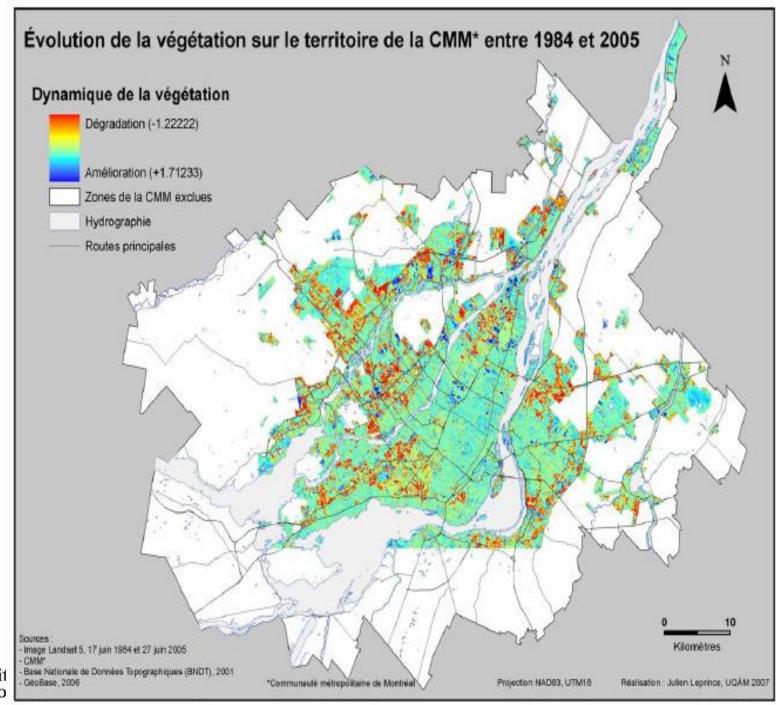


Ville St-Laurent, June 2005: ground temperatures Industrial 40,57 °C Golf 27,23 °C Residential 31,54 °C Urban forest 23,16 °C











The 2003 Heat Wave in Europe:

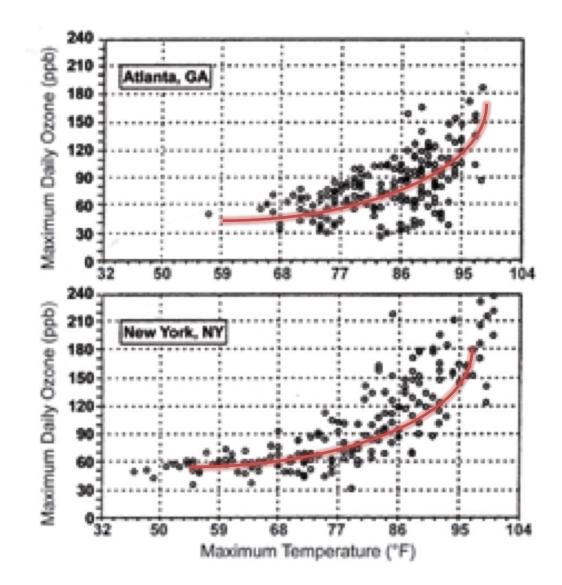
70,000 deaths in excess 18,000 deaths in France

- ✓ The first time the French life expectancy dropped since WWII
- ✓ Deaths concentrated in mineralized milieus compared to green milieus.





Warming increases pollutants toxicity







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Press Release 10-196

Plants Play Larger Role Than Thought in Cleaning up Air Pollution

Chemicals known as oxygenated volatile organic compounds (oVOCs) affect environment, human health



Poplars, aspens, other trees provide extensive "ecosystem" services."



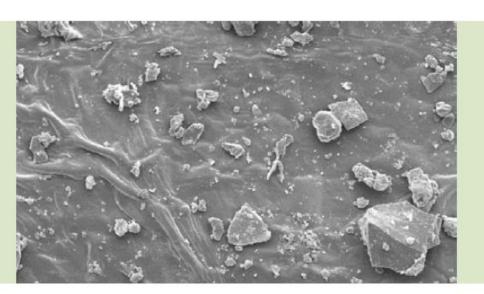


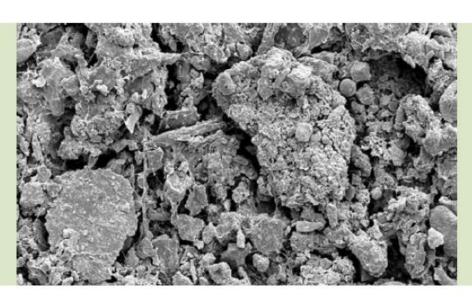
Deciduous trees in hardwood forests remove harmful chemicals from the atmosphere. Credit and Larger Version



Trees absorb more of a common air-polluting chemical than thought. Credit and Larger Version







Particulates on the leaf of Parthenocissus (Virginia Creeper) in June (left) and in October (right)

Absorption of different types of air pollution by leaves.

| POLLUTION TYPE | MECHANISM | APPROPRIATE LEAF TYPES |
|---|------------|--|
| Ozone, nitrogen dioxide | Absorption | Flat and broad leaves of deciduous trees |
| Volatile organic compounds, (PCB's, dioxins, furans) | Adsorption | Thick and sebaceous wax layer (cuticle) on the leaves, |
| Particulates (PM10) | Impaction | Pointed forms such as conifer needles. Coarse, hairy and sticky leaves of deciduous trees |

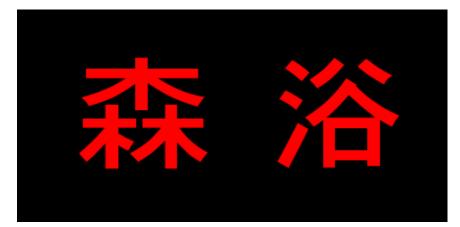




| SPECIES | PARTICULATES PM10 | NITROGEN OXIDES NO+NO ₂ | OZONE O ₃ | | | EMISSIONS OF VOLATILE ORGANIC COMPOUNDS 3 4 | |
|------------------------------|----------------------|---------------------------------------|-------------------------|---|---|---|--|
| CONIFERS | | | | | | | |
| Ginkgo biloba * | | | | | | | |
| Metasequoia glyptostroboides | | | | | | | |
| Pinus nigra | | | + | | | | |
| Pinus sylvestris * | | | | | | | |
| Taxus | | | | | | | |
| HEDGES | | | | | | | |
| Carpinus betulus | | | | | | | |
| Fagus | | | | | | • | |
| Ligustrum | | | | | | • | |
| DECIDUOUS TREES | | | | | | | |
| Acer platanoides * | | | | + | 2 | • | |
| Acer pseudoplatanus * | | | | + | | • | |
| Aesculus | | | | | | • | |
| Ailanthus altissima | | | | | | | |
| Alnus cordata | | | | + | | • | |
| Alnus glutinosa * | | | | + | | • | |
| Alnus xspaethii | | | | + | | • | |
| Betula ermanii * | | | | + | | | |
| Betula nigra | | | | + | • | | |
| Betula pendula | | | | + | | | |
| | | | | | | | |





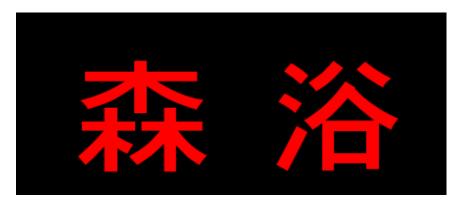


Shinrin-yoku

The term Shinrin-yoku (taking in the forest atmosphere or forest bathing) was coined by the Japanese Ministry of Agriculture, Forestry, and Fisheries in 1982. It can be defined as making contact with and taking in the atmosphere of the forest: a process intended to improve an individual's state of mental and physical relaxation [13]. Shinrin-yoku is considered to be the most widespread activity associated with forest and human health.







Environ Health Prev Med (2010) 15:18–26 DOI 10.1007/s12199-009-0086-9

SPECIAL FEATURE

The Trends on the Research of Forest Bathing in Japan, Korea and in the World

The physiological effects of *Shinrin-yoku* (taking in the forest atmosphere or forest bathing): evidence from field experiments in 24 forests across Japan

Bum Jin Park · Yuko Tsunetsugu · Tamami Kasetani · Takahide Kagawa · Yoshifumi Miyazaki

Received: 18 July 2008/Accepted: 6 April 2009/Published online: 2 May 2009 © The Japanese Society for Hygiene 2009









Table 1 Measured physiological parameters and subjective evaluation

Autonomic nervous activity Pulse rate, systolic blood pressure, diastolic blood pressure

Heart rate variability (HRV)

HF component (parasympathetic nervous activity)

LF/HF or LF/(LF + HF) (sympathetic nervous activity)

Endocrine system activity Salivary cortisol concentration

Immune system activity Salivary immunoglobulin A concentration







Fig. 2 Change in salivary cortisol concentration after forest viewing and walking. Mean \pm standard deviation (SD); ** p < 0.01; p-value by t test

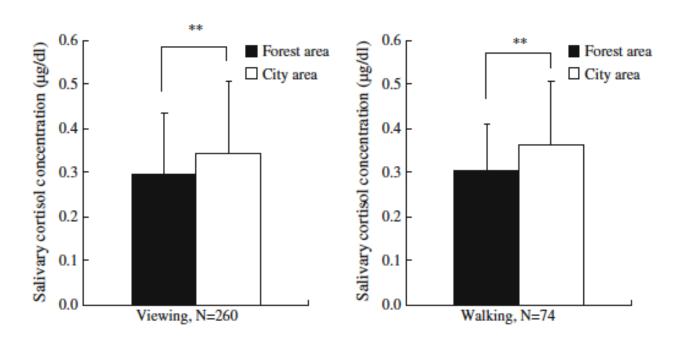








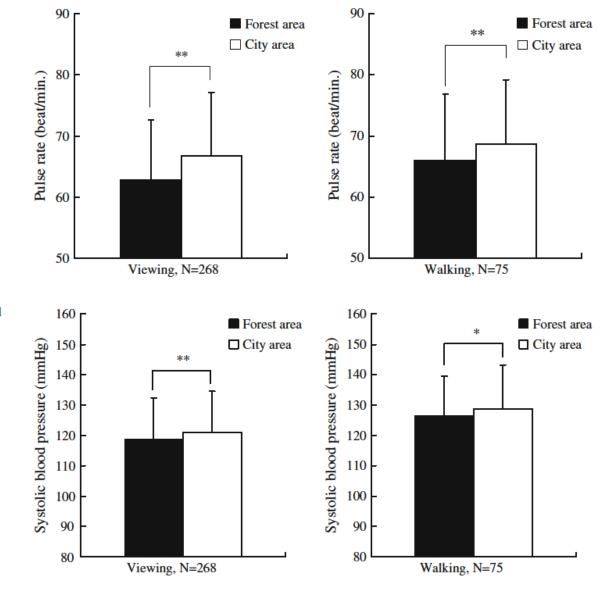
Fig. 3 Change in pulse rate after forest viewing and walking. Mean \pm SD; ** p < 0.01; p value by t test

Pulse rate in forest in city

Fig. 4 Change in systolic blood pressure after forest viewing and walking. Mean \pm SD; ** p < 0.01; * p < 0.05; p value by t test

Blood pressure in forest in city















Effect of exposure to natural environment on health inequalities: an observational population study

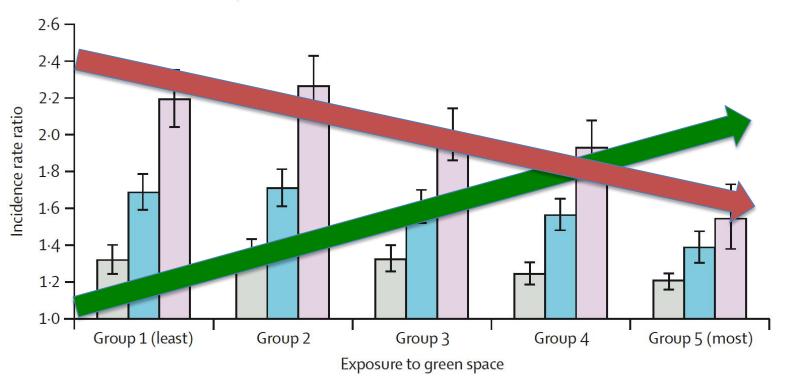
Richard Mitchell, Frank Popham

- **✓** 2001-2005
- √ 40 million of non-retired British subjects
- ✓ 360 000 deaths records
- ✓ 4 quartiles according to income
- √ 5 quintiles according to green exposure





B Deaths from circulatory disease



Green space exposure: 6% less mortality overall

Green space exposure: Reduction by half (from 219 % to 154 %)

of the difference of cardiovascular death rate

between poors (lower quartile) and riches (higher quartile).





The Relationship Between Trees and Human Health

Evidence from the Spread of the Emerald Ash Borer

Geoffrey H. Donovan, PhD, David T. Butry, PhD, Yvonne L. Michael, ScD, Jeffrey P. Prestemon, PhD, Andrew M. Liebhold, PhD, Demetrios Gatziolis, PhD, Megan Y. Mao









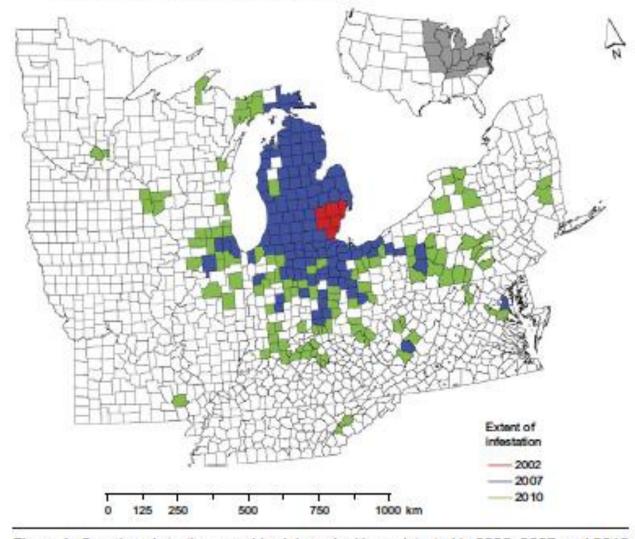


Figure 1. Counties where the emerald ash borer had been detected in 2002, 2007, and 2010









A tree-lined street in Toledo, Ohio in 2006, before emerald ash borer infestation. Credit: Dan Herms, Ohio State University

Three years later, in 2009, after the invasive insect spread to the neighborhood.

Credit: Dan Herms, Ohio State University





In the 15 States where trees were destroyed

Increase of global mortality

6,113 deaths in excess by pulmonary disease

15,080 deaths in excess by cardiovascular disease





A cardio-protective city should

- Eradicate food nano-aggressors
- Eradicate airborne nano-aggressors
- Develop with renewable energies
 - Earth is geothermal
 - Wind is eolian
 - Water is hydrolic
 - Fire is solar
- Reconnect with nature/activity
- Aim at a 25 % urban canopy





If a City eliminates

- Food nano-aggressors
 - Trans fat
 - Excess of salt
 - Added industrial sugars
 - Phosphoric acid

- Air nano-aggressors
 - CO
 - SO2, NO2
 - FP, UFP
 - VOC, HAP

and promotes a green and active milieu

This City may expect a 25-75 % reduction of cardiac disease





"After all, CVD was not common in 1830, so why can't it now become uncommon by 2050? That is the challenge we all face."



Dr Salim Yusuf Cardiologist and Epidemiologist P.I. InterHeart Study McMaster University, Hamilton, Ontario





Journée de l'Arbre de la santé

septembre 2007- septembre 2014





























Écoles primaires et secondaires







Centre de soins palliatifs







CSSS de St-Michel



Inauguration des sentiers de la santé et plantation de 250 arbres au CHUS

2012-09-24

Afin de souligner la Semaine nationale de l'arbre et des forêts, le Centre hospitalier universitaire de Sherbrooke a procédé à l'inauguration des sentiers de la Santé et à la plantation de 250 arbres autour de l'étang au CHUS – Hôpital Fleurimont.

« Ces deux projets démontrent bien l'approche innovatrice de la santé en Estrie et mettent en lumière certains rôles de notre hôpital, soit ceux d'être un milieu guérissant, qui favorise la promotion de la santé et l'engagement social. »

Patricia Gauthier, directrice générale du CHUS.









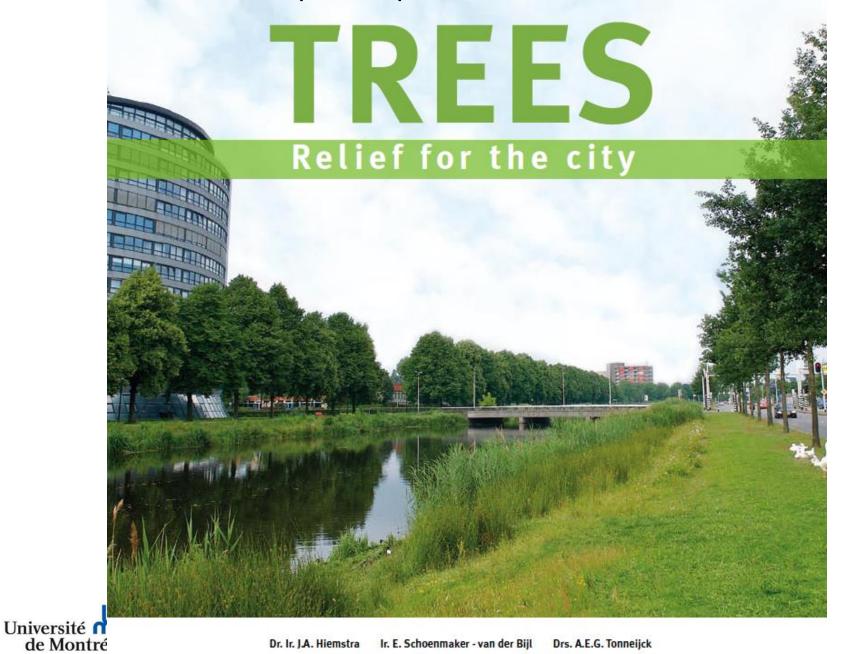




24 sept 2014 Journée de l'Arbre de la santé



http://edepot.wur.nl/20634





D^r François Reeves











"Planet Heart is the world seen through 'the eyes of the heart.' That cardiovascular health depends on the environment has never been so clearly shown."

DAVID SUZUKI

FRANÇOIS REEVES, MD

planet HEART

HOW AN

UNHEALTHY ENVIRONMENT

LEADS TO

HEART DISEASE

Greystone Books