

## Air Pollution's Global Respiratory Health Burden

**Dr. Rajesh Kumar\***

Department of Pulmonary Medicine, PGIMER, Chandigarh, India

**\*Corresponding Author:** Dr. Rajesh Kumar, Department of Pulmonary Medicine, PGIMER, Chandigarh, India, E-mail: rkumar.pulm@pgimer.edu.in

**Received:** 01-May-2025, Manuscript No. awbd-25-173997; **Editor assigned:** 05-May-2025, PreQC No. awbd-25-173997(PQ); **Reviewed:** 19-May-2025, QC No. awbd-25-173997; **Revised:** 22-May-2025, Manuscript No. awbd-25-173997(R); **Published:** 29-May-2025, **DOI:** 10.4172/2167-7719.1000296

**Citation:** Kumar DR (2025) Air Pollution's Global Respiratory Health Burden. awbd 14: 295.

**Copyright:** © 2025 Dr. Rajesh Kumar This is an open-access article distributed under the terms of the Creative Commons Attribution License, which permits unrestricted use, distribution and reproduction in any medium, provided the original author and source are credited.

### Abstract

Air pollution profoundly impacts respiratory health, with studies revealing strong associations between pollutants like PM<sub>2.5</sub>, NO<sub>2</sub>, and O<sub>3</sub>, and increased risks of asthma, COPD, and reduced lung function across all age groups. Children are particularly vulnerable to both ambient and household pollution, showing long-term deficits from early-life exposures. Research also explores synergistic effects of pollutants, underlying epigenomic mechanisms, and the global disease burden. Critically, comprehensive interventions demonstrate significant potential to improve respiratory health outcomes and reduce morbidity and mortality, emphasizing the urgent need for robust air quality management and preventative strategies globally.

### Keywords

Air pollution; Respiratory health; PM<sub>2.5</sub>; Asthma; COPD; Children's health; Lung function; Environmental health; Interventions; Epigenetics

### Introduction

This systematic review and meta-analysis synthesizes evidence on the impact of ambient air pollution exposure on children's respiratory health, identifying significant associations between various pollutants (like PM<sub>2.5</sub>, NO<sub>2</sub>, O<sub>3</sub>) and increased risks of asthma, bronchitis, and reduced lung function in pediatric populations. The study emphasizes the vulnerability of children and the need for stricter air quality guidelines [1].

This study investigates the association between long-term exposure to fine particulate matter (PM<sub>2.5</sub>) and the development of chronic obstructive pulmonary disease (COPD) in adults. It reveals a significant positive correlation, indicating that sustained exposure to PM<sub>2.5</sub> exacerbates lung function decline and increases the inci-

dence of COPD, particularly in vulnerable populations, highlighting PM<sub>2.5</sub> as a critical risk factor [2].

This research explores the impact of traffic-related air pollution (TRAP) on lung function trajectories from childhood to early adulthood. Findings suggest that higher TRAP exposure during critical developmental windows leads to impaired lung function growth and persistent deficits, emphasizing the long-term respiratory health consequences of living near busy roadways [3].

The study investigates the acute effects of short-term exposure to ambient ozone (O<sub>3</sub>) on asthma exacerbations and emergency room visits. It demonstrates a clear link between elevated O<sub>3</sub> levels and increased respiratory distress, particularly in individuals with pre-existing asthma, highlighting the need for timely public health warnings during high-ozone events [4].

This research assesses the global burden of respiratory diseases attributable to ambient particulate matter air pollution, utilizing data from the Global Burden of Disease Study 2019. It quantifies the substantial morbidity and mortality associated with PM<sub>2.5</sub> exposure, underscoring air pollution as a leading global health risk factor

for respiratory illness across all age groups and income levels [5].

The study investigates the relationship between household air pollution from solid fuel combustion and the risk of developing respiratory infections, particularly pneumonia, in low- and middle-income countries. It identifies household air pollution as a major preventable risk factor, disproportionately affecting women and children, and contributing significantly to global respiratory disease burden [6].

This research examines the synergistic effects of multiple air pollutants (e.g., PM<sub>2.5</sub>, NO<sub>2</sub>, SO<sub>2</sub>) on the exacerbation of asthma in urban populations. It reveals that combined exposures often lead to greater adverse respiratory outcomes than individual pollutants, highlighting the complexity of air pollution mixtures and the need for comprehensive air quality management strategies [7].

The study focuses on how gestational and early-life exposure to air pollution influences the development of allergic asthma and atopic diseases in children. It indicates that prenatal and postnatal exposure significantly programs the immune system, increasing susceptibility to allergic respiratory conditions, underscoring the critical importance of early-life environmental factors [8].

This research investigates the epigenomic mechanisms by which air pollutants induce respiratory diseases, focusing on DNA methylation changes. It reveals specific epigenetic modifications in lung cells exposed to PM<sub>2.5</sub> and other pollutants, providing insights into the molecular pathways linking air pollution to chronic inflammatory lung conditions like asthma and COPD [9].

The study evaluates the effectiveness of interventions aimed at reducing air pollution exposure on improving respiratory health outcomes. It analyzes various strategies, including policy changes, technological advancements, and behavioral modifications, finding that comprehensive interventions can significantly reduce respiratory morbidity and mortality, particularly in high-pollution areas [10].

## Description

Ambient air pollution profoundly impacts respiratory health, with various pollutants like fine particulate matter (PM<sub>2.5</sub>), nitrogen dioxide (NO<sub>2</sub>), and ozone (O<sub>3</sub>) linked to increased risks of asthma, bronchitis, and reduced lung function in pediatric populations [1]. Children are particularly vulnerable, necessitating stricter air quality guidelines. Globally, ambient particulate matter air pollution contributes substantially to morbidity and mortality, making it a leading health risk across all age groups and income levels [5].

Long-term exposure to ambient PM<sub>2.5</sub> serves as a critical risk factor for chronic obstructive pulmonary disease (COPD) in adults, exacerbating lung function decline and increasing disease incidence, especially in vulnerable groups [2]. Similarly, traffic-related air pollution (TRAP) exposure during crucial developmental phases in childhood leads to impaired lung function growth and persistent deficits, highlighting the enduring health consequences of living near busy roadways [3].

Acute effects are also significant; short-term exposure to ambient ozone (O<sub>3</sub>) demonstrably links to asthma exacerbations and emergency room visits, particularly for individuals with pre-existing asthma. Public health warnings become essential during high-ozone events [4]. What's more, the synergistic effects of multiple air pollutants, such as PM<sub>2.5</sub>, NO<sub>2</sub>, and SO<sub>2</sub>, often lead to worse respiratory outcomes than individual exposures, emphasizing the need for comprehensive air quality management strategies that account for these complex mixtures [7]. Gestational and early-life air pollution exposure further compounds the problem, programming the immune system to increase susceptibility to allergic asthma and atopic diseases in children [8].

Household air pollution, stemming from solid fuel combustion in low- and middle-income countries, is a major preventable risk factor for respiratory infections like pneumonia. This issue disproportionately affects women and children, contributing significantly to the global respiratory disease burden [6]. On a molecular level, research indicates that air pollutants induce epigenomic mechanisms, specifically DNA methylation changes in lung cells. These modifications offer insight into the pathways connecting air pollution to chronic inflammatory lung conditions such as asthma and COPD [9]. Critically, interventions aimed at reducing air pollution exposure, including policy changes, technological advancements, and behavioral modifications, show significant promise in reducing respiratory morbidity and mortality, particularly in high-pollution areas [10].

## Conclusion

Research consistently links ambient and household air pollution to a broad spectrum of adverse respiratory health outcomes globally. Fine particulate matter (PM<sub>2.5</sub>), nitrogen dioxide (NO<sub>2</sub>), and ozone (O<sub>3</sub>) are frequently implicated, increasing risks for conditions like asthma, bronchitis, chronic obstructive pulmonary disease (COPD), and reduced lung function. Children are particularly vulnerable, experiencing impaired lung development from early-life and gestational exposure, leading to persistent deficits into adult-

hood. Traffic-related air pollution (TRAP) is a significant contributor to these long-term issues. Acute effects, such as asthma exacerbations from short-term ozone exposure, underscore the immediate public health concerns. The combined effects of multiple pollutants often yield worse outcomes than individual exposures, highlighting the complex nature of air quality challenges. Studies also quantify the substantial global burden of respiratory diseases attributable to air pollution, identifying it as a leading risk factor across all age groups. Household air pollution, especially from solid fuel combustion in low- and middle-income countries, is a major preventable cause of respiratory infections like pneumonia, disproportionately affecting women and children. Molecular research delves into epigenomic mechanisms, showing how pollutants like PM<sub>2.5</sub> induce DNA methylation changes that contribute to chronic inflammatory lung conditions. Importantly, comprehensive interventions involving policy, technology, and behavioral changes show promise in significantly reducing respiratory morbidity and mortality, particularly in heavily polluted regions, emphasizing the need for stricter guidelines and proactive management.

## References

1. Min X, Siqi L, Yanting L, Hui L, Xiaoyuan H et al. (2023) Ambient air pollution exposure and children's respiratory health: a systematic review and meta-analysis of cohort studies. *Environ Res* 228:115798.
2. Mengyuan R, Xiaojie C, Jun T, Jie W, Wei H et al. (2022) Long-term exposure to ambient PM<sub>2.5</sub> and incident chronic obstructive pulmonary disease in Chinese adults. *Thorax* 77:1186-1193.
3. Sarah M, Nicole H, Susan E, W James B, Mark A et al. (2020) Associations of Traffic-Related Air Pollution with Lung Function from Childhood to Early Adulthood. *Am J Respir Crit Care Med* 202:861-869.
4. Matthew H, Joshua W, Matthew S, Frank D, Richard J et al. (2021) Short-term Exposure to Ambient Ozone and Asthma Exacerbations: A Systematic Review and Meta-analysis. *Environ Health Perspect* 129:17006.
5. Simon L, Christopher J, Sarah H, Theo H, John K et al. (2020) Global Burden of Respiratory Diseases Attributable to Ambient Particulate Matter Air Pollution: An Analysis of the Global Burden of Disease Study 2019. *Lancet Planet Health* 4:e397-e407.
6. Kirk R, Laura S, Michael R, Daniel P, Stephen G et al. (2023) Household Air Pollution from Solid Fuel Combustion and Incidence of Respiratory Infections: A Systematic Review and Meta-analysis. *Environ Int* 175:107936.
7. Yajuan C, Peng W, Jing Z, Yi L, Jie L et al. (2022) Combined Effects of Air Pollutants on Asthma Exacerbation: A Systematic Review and Meta-analysis. *Sci Total Environ* 812:152341.
8. Yumiko S, George L, Keiko I, George S, Haruo T et al. (2021) Gestational and Early-Life Air Pollution Exposure and Development of Allergic Asthma and Atopic Diseases in Children: A Systematic Review and Meta-analysis. *Allergy* 76:1349-1361.
9. Mina S, Masahiro T, Masatoshi K, Ryo Y, Shota Y et al. (2020) Epigenetic Mechanisms of Air Pollution-Induced Respiratory Diseases: A Systematic Review. *Environ Int* 142:105829.
10. Jie S, Yuting H, Siyan L, Peixin N, Jian C et al. (2024) Interventions to reduce air pollution exposure and their effects on respiratory health outcomes: A systematic review and meta-analysis. *Environ Pollut* 340:122906.