



DEPARTMENT OF HEALTH & HUMAN SERVICES

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Public Health Service

Centers for Disease Control
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National Institute for Occupational
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1095 Willowdale Road
Morgantown, WV 26505-2888

March 12, 2008
HETA 2001-0445
Interim Letter IX

Mike Winkler, First Vice-President
Administrative and Residual Employees Union Local 4200
705 North Mountain Road, Suite A211
Newington, Connecticut 06111-1411

Dear Mr. Winkler:

Included with this letter is a hard copy of a poster to be presented by NIOSH personnel at the Society of Toxicology meeting to be held in Seattle, Washington on March 16-20, 2008. This presentation will report inflammatory effects in mice of floor dusts collected from the 2002 survey at the 25 Sigourney Street Building and associations of levels of endotoxin and glucan in dust with the inflammatory markers. The animal study is still ongoing, and the presentation is based on preliminary results.

The findings included in the presentation are as follows:

1. The exposure to the building floor dust produced dose-dependent inflammatory responses in mouse lung.
2. Although the levels of endotoxin and glucan in floor dust do not appear to be associated well with the markers of lung inflammation (since the significant association of the 2002 analytical results of endotoxin in dust with the inflammatory markers was driven by a single outlier), the polymyxin B experiment (polymyxin B: antibiotics which deactivates endotoxin activity) suggests that endotoxin may be an important inflammatory substance in dust in this animal model.

If you have any questions regarding the information provided in this interim letter, please do not hesitate to contact us at 1-800-232-2114.

Sincerely,

Ju-Hyeong Park, ScD, MPH, CIH
Environmental Health Scientist
Respiratory Disease Hazard Evaluation
and Technical Assistance Program
Field Studies Branch
Division of Respiratory Disease Studies

Use of a Mouse Model to Evaluate Pulmonary Inflammation Caused by Floor Dust from a Water-Damaged Building

S.-H. Young, J. M. Cox-Ganser, M. Wolfarth, J.M. Antonini, V. Castranova, J.-H. Park

National Institute for Occupational Safety and Health, Morgantown, WV

Introduction

Although the causes of building-related respiratory illness are still unclear, epidemiological research has indicated that fungi and endotoxin in floor dust are associated with such health risks.¹⁻³ In the present study, we used a mouse model to evaluate pulmonary inflammation caused by floor dusts collected from the workstations of employees in a water-damaged office building. The dusts were tested in an endotoxin-sensitive strain of mouse - C3HeB/FeJ, and pulmonary inflammation was determined. We examined the correlation among markers of inflammation and levels of endotoxin and (1-3)- β -D-glucan, a major cell wall component of fungi.

Aims

- 1) To examine pulmonary inflammatory responses to increasing doses of floor dust from a water-damaged building.
- 2) To examine the correlations among markers of inflammation and levels of endotoxin and (1-3)- β -D-glucan.

Methods and Materials

Dust sample. Dust samples were collected from carpeted floors of workstations using backpack vacuum samplers with erlenmeyer flasks. For each sampling location, a 2 m² floor area was vacuumed for 5 minutes. Each dust sample was analyzed for endotoxin and (1-3)- β -D-glucan.

Animals. Pathogen-free male endotoxin-sensitive strain of mouse - C3HeB/FeJ (number of mice = 4 to 6 per dust sample) was used.

Exposure. Each mouse was treated with dust sample (1, 1.5, 2.5 or 3.5 mg/kg of body weight suspended in 40 μ l of saline) by pharyngeal aspiration. Control mice received an equivalent volume of saline by aspiration.

Polymyxin B treatment. Dust was suspended in polymyxin B (PMB) solution (1mg/ml) and incubated at 37 °C for 30 min. PMB binds to and deactivates endotoxin.

Pulmonary Parameters:

At 18 hrs post aspiration, bronchoalveolar lavage (BAL) was done postmortem on lungs and the following inflammatory and lung injury markers were measured:

1. Lung inflammation: Polymorphonuclear leukocytes (PMN) infiltration. Differential cells counts from total BAL cells.
2. Lung damage: Lactate dehydrogenase (LDH) activity and albumin concentration from acellular BAL fluid.
3. Cytokine production: IL-12p70, TNF- α , IFN- γ , MCP-1, IL-10, and IL-6 in first acellular fraction of BAL fluid.

Disclaimer

The findings and conclusions in this report are those of the authors and do not necessarily represent the views of the National Institute for Occupational Safety and Health.

Results

Dust-induced Pulmonary Inflammation- Dose-Response

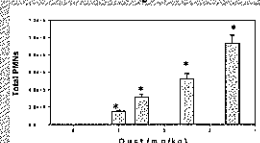


Figure 1. Total number of PMN after exposure to dust. One day post dust exposure, PMN was harvested from BAL fluid. There is a dose-dependent increase of PMN counts. Values are means \pm S.E. * Significantly different than the mean value of saline control mice ($p < 0.05$).

Lung Cell Injury

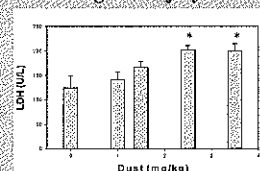


Figure 2. Lactate dehydrogenase (LDH) level in acellular BAL fluid after exposure to different doses of dust. There was a dose-dependent increase of LDH. Values are means \pm S.E. * Significantly different than the mean value of saline control mice ($p < 0.05$).

Cytokine Responses

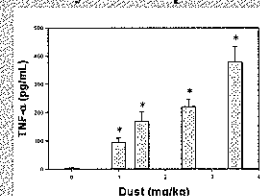


Figure 3. Pro-inflammatory cytokine TNF- α in the acellular BAL fluid of mice that were exposed to different doses of dust. Values are means \pm S.E. * Significantly different than the mean value of saline control mice ($p < 0.05$).

Table 1. Pearson product moment correlations between analytes in dust and markers of inflammation. The cell contents are: r = Correlation Coefficient, p = P Value, and n = Number of Samples. Significant difference was set at $p < 0.05$ and was colored in yellow. <0.05 denotes that p-value is between 0.001 and 0.05.

	Dust	BAL cells	LDH	TNF- α	IFN- γ	MCP-1	IL-6	Glucan	EU2007	EU2002
LDH	0.71	0.52	0.77	0.64	0.78	0.73	0.47	0.61	0.0003	0.0004
IFN- γ	0.71	0.52	0.77	0.64	0.78	0.73	0.47	0.61	0.0003	0.0004
TNF- α	0.71	0.52	0.77	0.64	0.78	0.73	0.47	0.61	0.0003	0.0004
MCP-1	0.71	0.52	0.77	0.64	0.78	0.73	0.47	0.61	0.0003	0.0004
IL-6	0.71	0.52	0.77	0.64	0.78	0.73	0.47	0.61	0.0003	0.0004
Glucan	0.71	0.52	0.77	0.64	0.78	0.73	0.47	0.61	0.0003	0.0004
EU2007	0.71	0.52	0.77	0.64	0.78	0.73	0.47	0.61	0.0003	0.0004
EU2002	0.71	0.52	0.77	0.64	0.78	0.73	0.47	0.61	0.0003	0.0004

Table 2. Descriptive statistic for endotoxin measured in 2007 (EU-2007), endotoxin measured in 2002 (EU-2002), and (1-3)- β -D-glucan

Parameter	Unit	Mean	St. Dev.	Min	Max	N
EU-2007	EU/mg	10.260	5.144	207.766	251.000	4210
EU-2002	EU/mg	10.260	5.144	207.766	251.000	4210
(1-3)- β -D-glucan	EU/mg	10.260	5.144	207.766	251.000	4210

Polymyxin B Binds to Endotoxin and Decreases PMNs

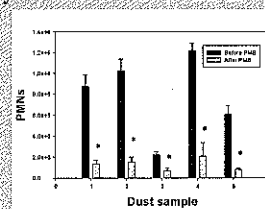


Figure 4. Total number of PMNs in BAL fluid of mice after exposure to 2.5 mg/kg bw dust without polymyxin B (PMB) treatment. The PMB-treated dust was suspended in PMB solution and incubated at 37 °C for 30 min. Values are means \pm S.E. * Significantly different than the mean value of without PMB treatment mice ($p < 0.05$).

Decreased TNF- α After Polymyxin B Treatment

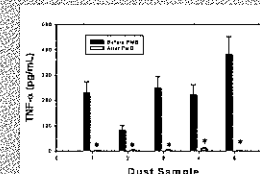


Figure 5. TNF- α production in BAL fluid of mice after exposure to 2.5 mg/kg bw dust without polymyxin B (PMB) treatment. The PMB-treated dust was suspended in PMB solution and incubated at 37 °C for 30 min. Values are means \pm S.E. * Significantly different than the mean value of without PMB treatment mice ($p < 0.05$).

Correlation Between EU2007 and EU2002

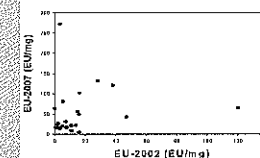


Figure 6. Scatter plot of EU2007 vs EU2002. These results were obtained by using the same LAL method but from 2 different lots. If we remove the two outliers from the graph, then EU2007 was significantly correlated with EU2002.

Summary and Conclusions

- Endotoxin in the floor dust was associated with markers of inflammation in these experiments. Endotoxin 2002 was significantly correlated with PMN, total BAL cells, IFN- γ , MCP-1, and IL-6. However, even at a very low endotoxin level inflammation still occurred. This suggested that another component in the dust also contributed to the overall inflammatory potency.
- The animal experiment was done in 2007-8. The collected dust samples were stored for 6 years in -80°C. EU-2002 data was 6 years old, which may not reflect the serial endotoxin levels at the time of experiment. The correlations of EU-2002 with the markers were driven by an outlier. EU-2007 is a current endotoxin measurement, but was not correlated with markers of inflammation.
- Polymyxin B experiments indicated that endotoxin was a contributing factor in pulmonary inflammation in mice exposed to dust from a water-damaged building.
- β -Glucan measurement was not correlated with markers of inflammation. Possible reasons may include: 1) β -glucan is a weaker inflammatory agent than endotoxin, therefore some endotoxin contamination can mask the effect of β -glucan. 2) The current available β -glucan measurement method is for detecting water-soluble β -glucan, which was much less inflammatory than insoluble β -glucan.

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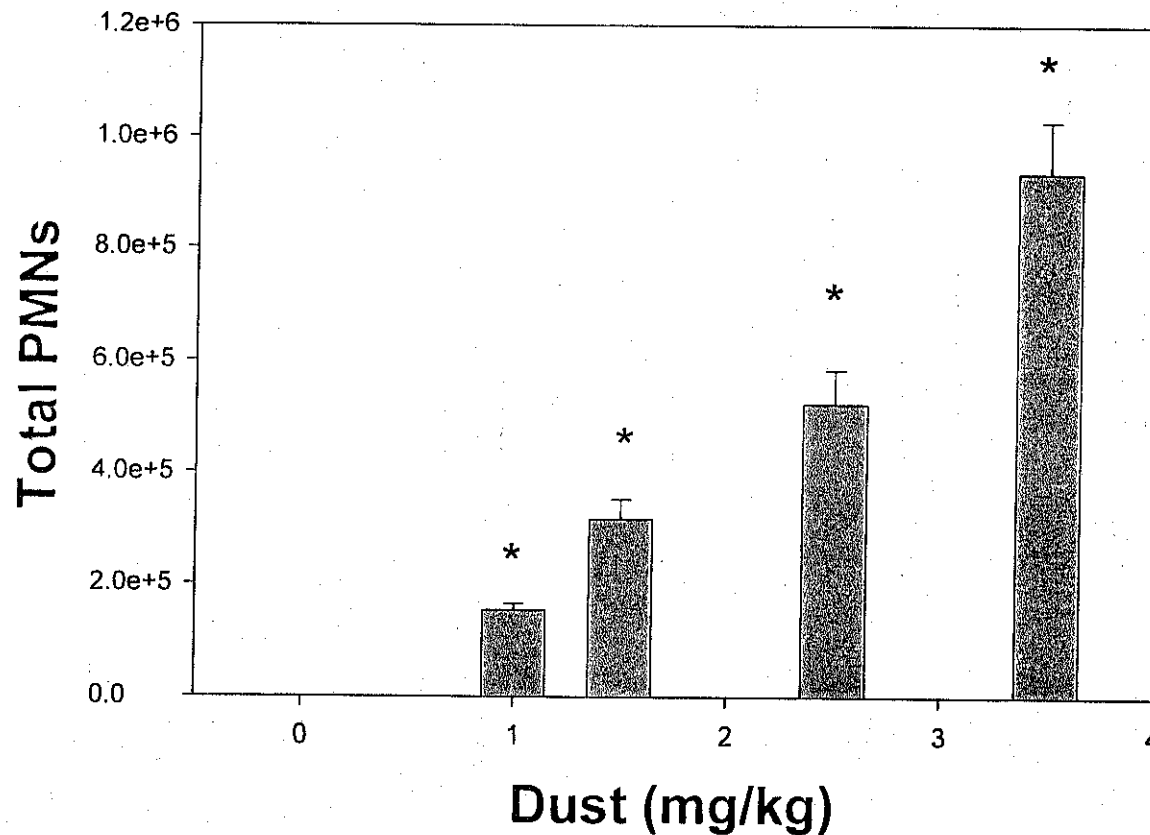


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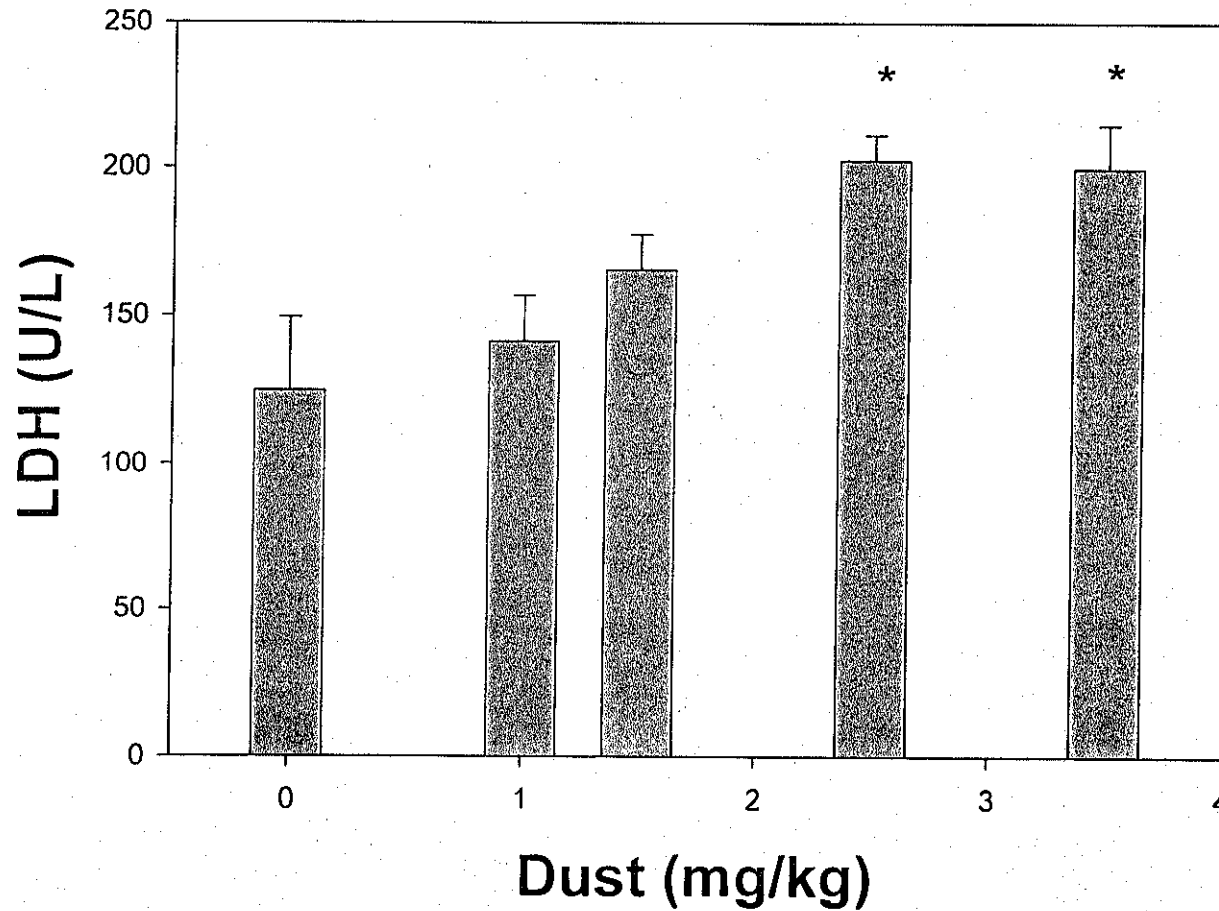


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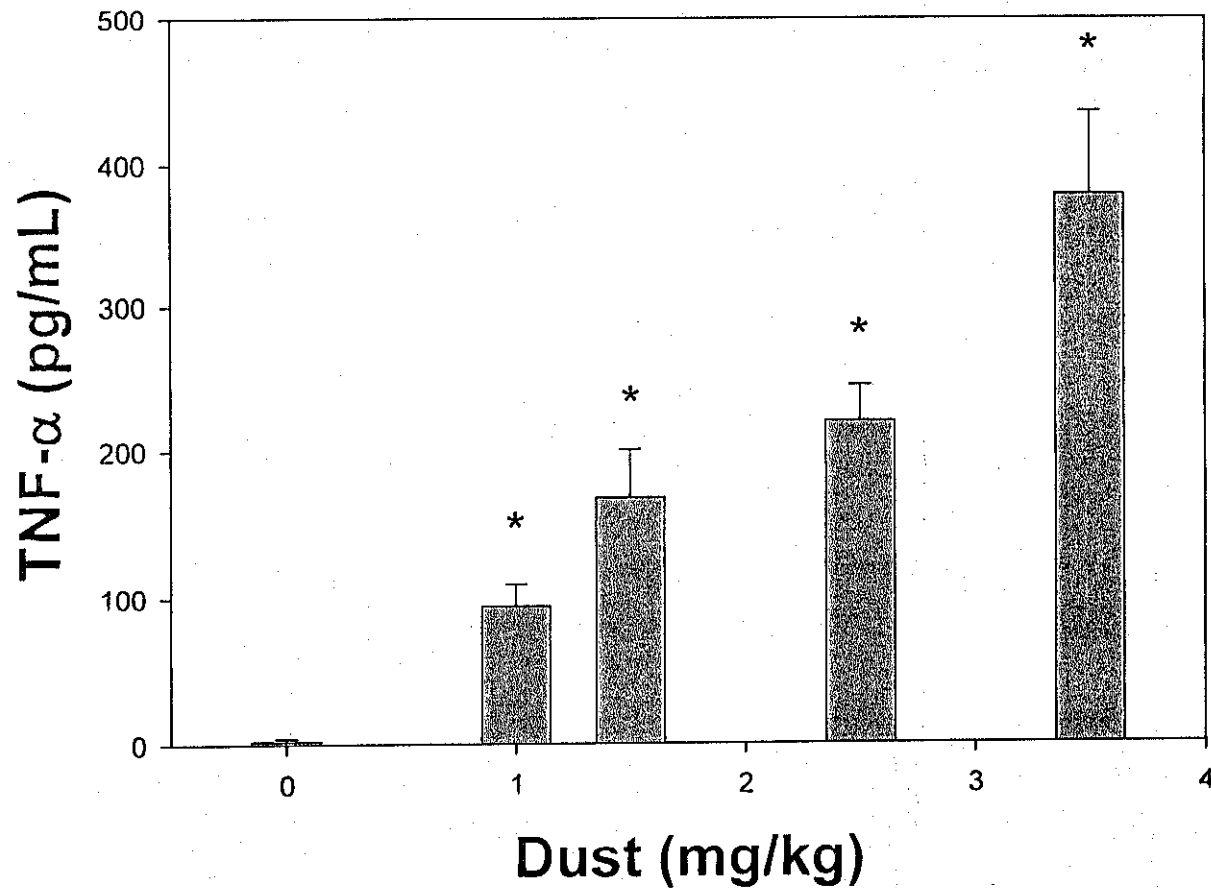


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Column	Size	Mean	Std. Error	Range	Max	Min
EU-2007 (EU/mg)	25	56.260	5.544	267.790	272.000	4.210
EU-2002 (EU/mg)	36	16.807	2.003	119.969	120.000	0.0310
Glucan (ng/mg)	25	51.186	3.015	118.980	123.760	4.780

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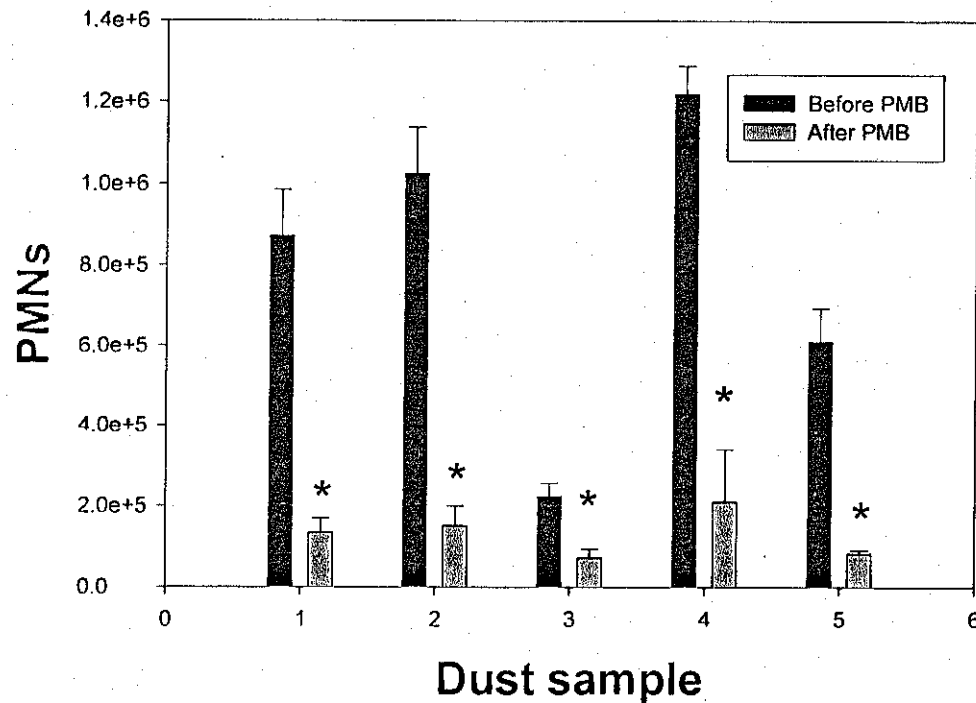


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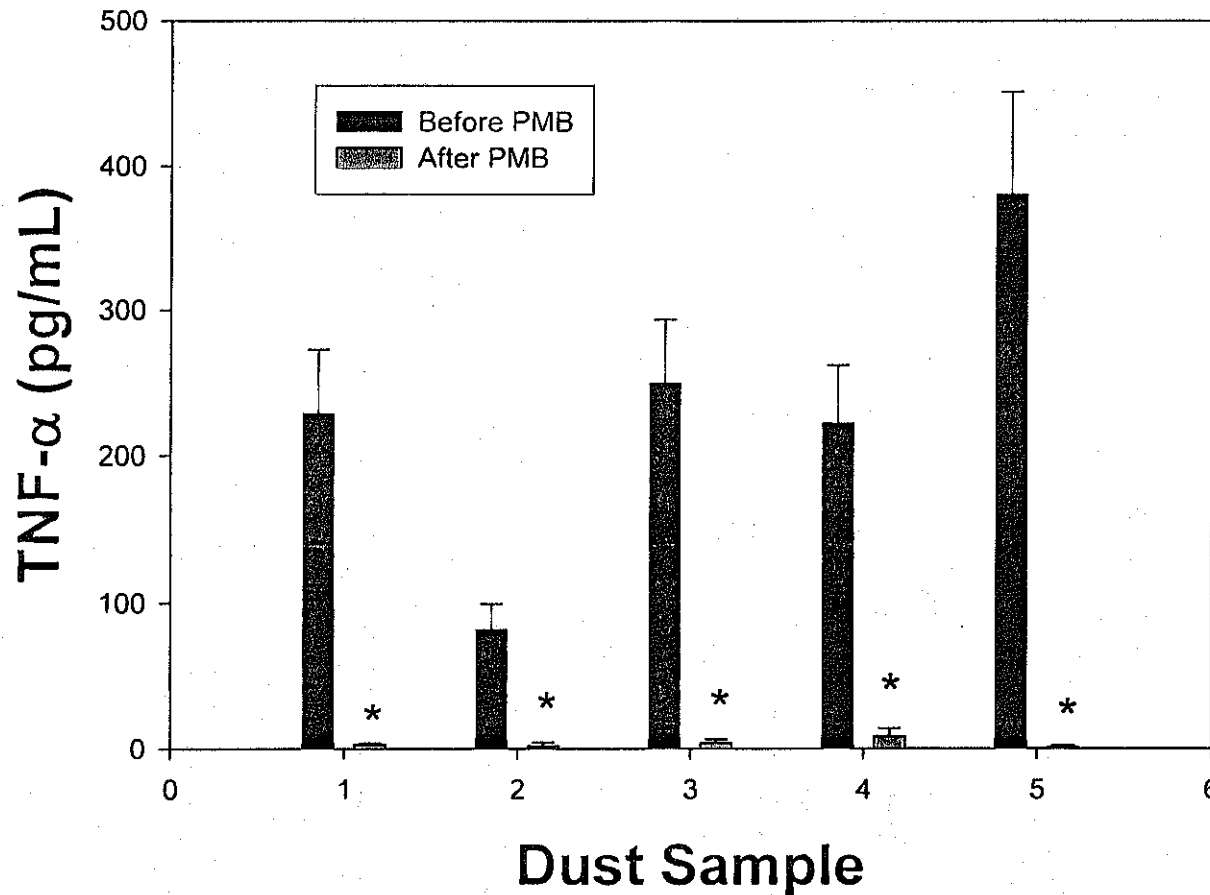


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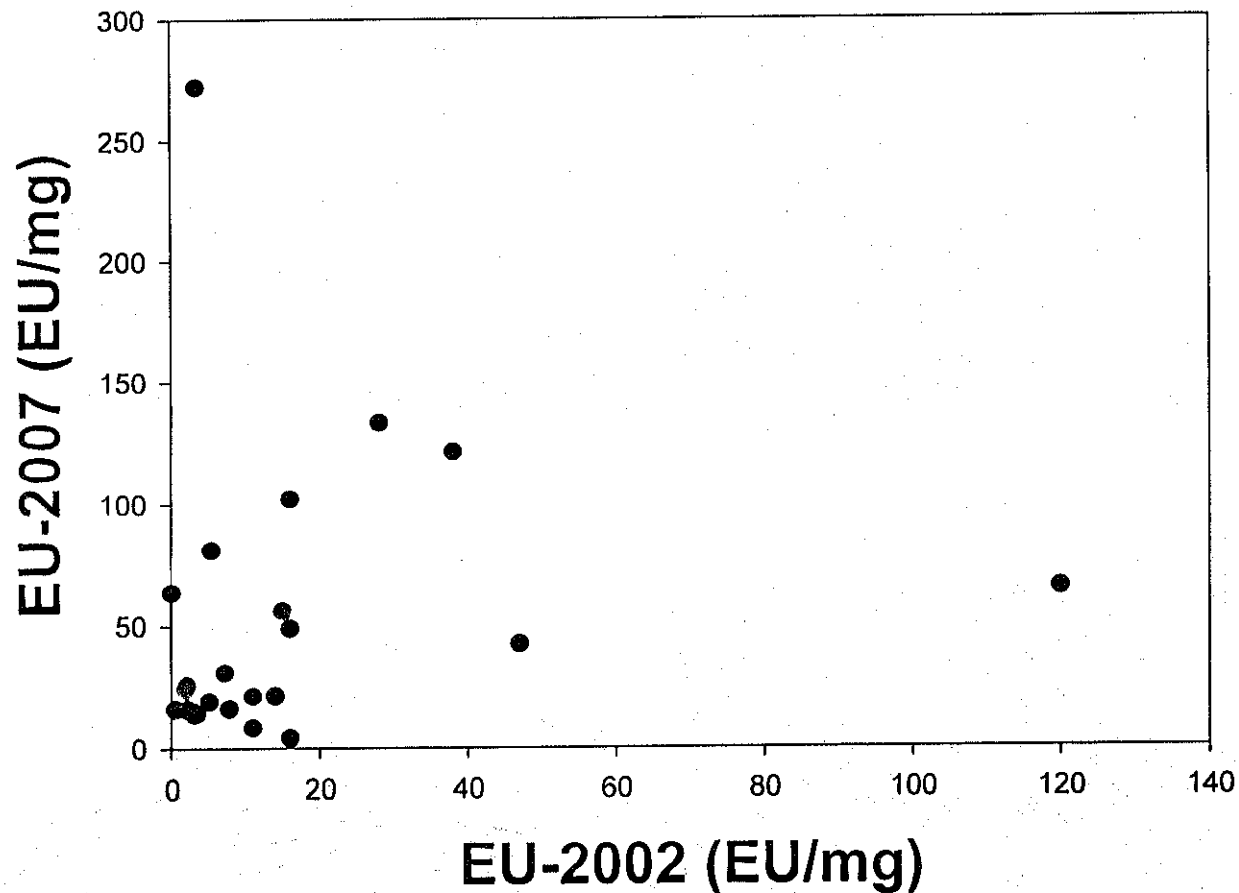


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