PFAS Exposure and Immune-Related Outcomes Among Children: Could Folate Mitigate the Harmful Health Impacts?

## The Science of PFAS: Public Health & The Environment

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## Per- and Polyfluoroalkyl Substances - Ubiquitous Exposure Across Populations











- PFAS are widely used in diverse commercial and consumer applications
- Universally detected in general population worldwide

## **PFAS - Altered Immune Function**

#### **Experimental Evidence**

- Decreased spleen and thymus weights
- Reduced number of circulating
   immune cells
- Lower specific antibody production
- Altered cytokine production



#### Epidemiological Evidence

- Most studies focusing on the laboratory markers of the immune function
- Negative associations on prenatal and childhood serum PFAS concentrations and diphtheria antibody levels (Faroe island cohorts)
   Limitations
- Insufficient and inconsistent findings on PFAS and clinical outcomes among children especially in young childhood.
- No study on mixtures



## Long-chain PFAS - Persistent in Human Body





Perfluorooctanoic acid (PFOA)

Perfluorooctane sulfonic acid (PFOS)

- Referred to as 'FOREVER CHEMICALS'
- Half-lives range from 3 years to decades





Perfluorononanoic acid (PFNA)

Perfluorohexane sulfonic acid (PFHxS)

### Can Certain Nutrients Reduce PFAS Burden in Humans?

 Diets high in vegetables, fruits, grains, and beans → associated with lower PFAS concentrations in serum/plasma

#### Limitations

- Unclear mechanisms
- No study on specific nutrients
  - → To inform interventions to reduce
    PFAS body burden
  - → To mitigate the harmful health impacts of PFAS





## **Research Questions**

- ✓ Are PFAS (individual and mixtures) associated with clinical outcomes related to immune function in children?
- ✓ Can certain nutrients reduce PFAS concentrations?
- ✓ Can we identify any interactions between PFAS and nutrients on immune-related outcomes in children?



## Study Design and Population

- National Health and Nutrition Examination Survey (NHANES)
- Nationally representative cross-sectional study by the Centers for Disease Control and Prevention (CDC)
- Questionnaires, physical examination and biospecimen collection





## Associations of PFAS and Immune-Related Outcomes in Children?

#### Population

 517 children aged 3 to 11 years and 394 adolescents aged 12 to 19 years in NHANES 2013 – 2014

#### Exposure

- Serum concentrations of four PFAS
  - PFOA, PFOS, PFNA and PFHxS

#### Outcome:

- Self/parent-reported common cold incidence in the past month
- "Did {you/Surveyed Participant} have a head cold or chest cold that started during the previous 30 days?".

#### Statistical analysis

- Single-chemical analysis:
  - Logistic regression modes
  - Odds Ratio (95% CI) of Common Cold per 2.7 fold increase in individual PFAS
- Mixture analysis:
  - Probit Bayesian Kernel Machine Regressions (BKMR)
  - Joint effect of the Total PFAS Mixture on common cold

### Associations of PFAS and Common Colds in Children?

Adjusted Odds Ratios (OR) for Common Cold Per 2.7 Fold increase in PFAS Concentrations

| PFAS Biomarker | Children<br>3-11 years<br>OR (95%CI) | Adolescents<br>12-19 years<br>OR (95%CI) |  |
|----------------|--------------------------------------|--|--|
| PFOA           | 1.32 (0.67, 2.62)                    | 1.29 (0.70, 2.38)                        |  |
| PFOS           | 1.06 (0.75, 1.49)                    | 1.31 (0.82, 2.09)                        |  |
| PFHxS          | 1.31 (1.05, 1.63)                    | 1.27 (0.93, 1.72)                        |  |
| PFNA           | 1.36 (0.93, 1.98)                    | 0.72 (0.46, 1.12)                        |  |

## Associations of PFAS Mixtures and Common Cold in Children?

Change in common cold estimate per 5<sup>th</sup> percentile increase or decrease in the total PFAS mixture concentrations compared with the median total mixture concentration



#### Associations of PFAS and Immune-related Outcomes in Children?

#### Summary

- Robust and consistent associations between higher serum PFHxS concentrations and increased odds of common cold in the past month among both children and adolescents
- Positive association between serum PFNA concentrations and common cold among children, but inverse association for adolescents
- Mixture models <u>showed a clear increasing trend</u> of common cold estimates across quantiles of the Total PFAS Mixture concentration among children, while no clear pattern was seen for adolescents

#### Can Nutrients Reduce PFAS Concentrations?



## Can Certain Nutrients Reduce PFAS Concentrations?

Exploratory Study 1 – Experimental evidence on juice intake and reduced PFOS concentrations, Dr. Angela Slitt Translation from bench to epidemiologic studies

Population:

NHANES 2013-2014

345 adolescents, 12-19 years

458 adults, 20-80 years



Exposure:

Pure (100%) fruit juice intake in 24h dietary recall

Outcome:

Serum concentrations of four PFAS PFOA, PFOS, PFNA, and PFHxS



Findings:

- A 15% (95% CI: 28%, -1%) reduction in serum PFOA concentration among adolescents who consumed pure fruit juice more than once in the past 24 hours, compared with adolescents with no intake
- No other significant differences were observed for other PFAS compounds, nor among adults

#### Can Certain Nutrients Reduce PFAS Concentrations?

#### Exploratory Study 2 – Folate biomarkers in blood in relation to PFAS concentrations

Population: 2,802 adolescents and 9,159 adults NHANES, 2003 - 2016 cycles
Exposure: Folate concentrations in red blood cells (RBCs) and in serum
Outcome: Serum concentration of four PFAS compounds including PFOA, PFOS, PFNA, and PFHxS

#### Statistical analyses:

- Multivariable regression models
- Percent change (95% CI) of serum PFAS concentrations per 2.7-fold increase in folate biomarker
- Covariates: age, sex, race, income-to-poverty ratio, BMI, survey cycle + diet (milk and milk products, meat, poultry and fish, eggs, dry beans, peas, other legumes, nuts and seeds, grain products, fruits, vegetables)

Change in PFAS concentrations in relation to 2.7 fold increase in <u>RBC folate</u> concentrations among Adolescents in NHANES



# Change in PFAS concentrations in relation to 2.7 fold increase in <u>RBC folate</u> concentrations among <u>Adults</u> in NHANES



# Change in PFAS concentrations in relation to 2.7 fold increase in <u>serum folate</u> concentrations among <u>Adolescent</u> in NHANES

| Biomarkers | Adjusted<br>Percent Change (95%CI) | Adjusted (+diet)<br>Percent Change (95%CI) |  |  |
|------------|------------------------------------|--|--|--|
| PFOA       | 3.82% (-2.32%, 10.34%)             | 5.15% (-1.25%, 11.96%)                     |  |  |
| PFOS       | -11.57% (-17.87%, -4.79%)          | -11.11% (-17.43%, -4.30%)                  |  |  |
| PFHxS      | -1.25% (-7.14%, 5.01%)             | -1.69% (-7.58%, 4.58%)                     |  |  |
| PFNA       | -3.94% (-15.51%, 9.20%)            | -1.67% (-14.14%, 12.60%)                   |  |  |

# Change in PFAS concentrations in relation to 2.7 fold increase in <u>serum folate</u> concentrations among Adolescent in NHANES



#### Summary of NHANES Data

|            | Adolescents    |                 | Adults         |                 |
|------------|----------------|-----------------|----------------|-----------------|
| Biomarkers | Folate in RBCs | Folate in Serum | Folate in RBCs | Folate in Serum |
| PFOA       | -              | -               | $\downarrow$   | $\checkmark$    |
| PFOS       | $\checkmark$   | $\checkmark$    | $\checkmark$   | $\checkmark$    |
| PFNA       | $\downarrow$   | -               | $\downarrow$   | $\checkmark$    |
| PFHxS      | -              | _               | $\checkmark$   | -               |



#### Population: N=584 adolescents

NHANES 2003-2004

- **Exposure**: Serum concentrations of four PFAS
- PFOA, PFOS, PFNA, and PFHxS
- Outcome: Blood antibody levels to measles,
- rubella, and varicella
- Effect Modifier: Folate concentrations in red blood cells (RBCs)

#### Statistical Analyses:

- Stratification by low vs. high folate groups
  - At median concentrations of RBCs folate 208.5 ng/ml)
- Examine PFAS  $\rightarrow$  antibody associations stratified samples
  - Single chemical analysis:
    - Linear Regressions
    - % change in antibodies levels per 2.7 fold increase in individual PFAS concentrations
  - Mixture analysis:
    - Quantile G-Computation
    - BKMR

## Can Folate Modify Associations of PFAS →Immune Outcomes?



9.0% 22.8%

73.0%



Adjusted Percent Change of Rubella Antibody per 2.7 Fold increase in PFAS Concentrations

| Biomarkers    | Low Folate<br>Percent Change (95%Cl) | High Folate<br>Percent Change (95%CI) | EMM p value |
|---------------|--------------------------------------|---------------------------------------|-------------|
| PFOA          | -20.18% (-31.00%, -7.65)             | 6.33% (-10.20%, 25.90%)               | 0.02        |
| PFOS          | -28.56% (-38.64%, -16.82)            | 2.78% (-16.00%, 25.75%)               | 0.003       |
| PFHxS         | -14.40% (-23.24%, -4.55%)            | -3.09% (-15.93%, 11.71%)              | 0.11        |
| PFNA          | -2.37% (-19.63%, 18.60%)             | 19.62% (4.51%, 36.91%)                | 0.11        |
| PFAS Mixtures | -9.10% (-17.29%, -0.10%)             | -4.37% (-13.51%, 5.74%)               | 0.46        |
|               |                                      |                                       |             |

Change in log-Rubella Antibody per 5<sup>th</sup> percentile Increase/Decrease in Total PFAS Mixture Concentration vs. Median PFAS Concentration



**Total PFAS Mixture Concentrations** 

#### Summary

- Negative associations between PFOA, PFOS, PFHxS, and the total PFAS mixtures and rubella antibody levels only among adolescents in the low folate group
- No associations between PFAS (individual or mixtures) and rubella antibody in the high folate group
- No associations between PFAS and measles or varicella antibody levels among adolescents

| Adolescents      | Low Folate          |                    | High Folate           |                     |                    |                       |
|------------------|---------------------|--------------------|-----------------------|---------------------|--------------------|-----------------------|
| Biomarker        | Rubella<br>Antibody | Measle<br>Antibody | Varicella<br>Antibody | Rubella<br>Antibody | Measle<br>Antibody | Varicella<br>Antibody |
| PFOA             | $\checkmark$        | $\checkmark$       | -                     | -                   | -                  | -                     |
| PFOS             | $\checkmark$        | -                  | -                     | -                   | -                  | -                     |
| PFHxS            | $\checkmark$        | -                  | -                     | -                   | -                  | -                     |
| PFNA             | -                   | $\checkmark$       | -                     | -                   | -                  | -                     |
| PFAS<br>Mixtures | $\checkmark$        | -                  | -                     | -                   | -                  | -                     |

# Potential Mechanisms

Folate and PFAS could share common transporters, including those in ATP-binding cassettes (ABC) transporter family (BCRP and MRP), and organic anion transporters (OAT)

Thus potentially decreasing the absorption of PFAS in the intestine or the reabsorption in kidney

PFAS and Folate also both bind to albumin  $\rightarrow$  displacement of PFAS by folate in albumin changing renal clearance?

Cross-sectional study design

• PFAS, folate, and immune-related outcome (common cold, antibody) measured at the same time

Window of vulnerability

 Preconception or early pregnancy PFAS and folate exposure in relation to immune outcomes in childhood

# Limitations

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