

Working in Smoke:

Protecting Wildland Firefighters in an Extreme Environment

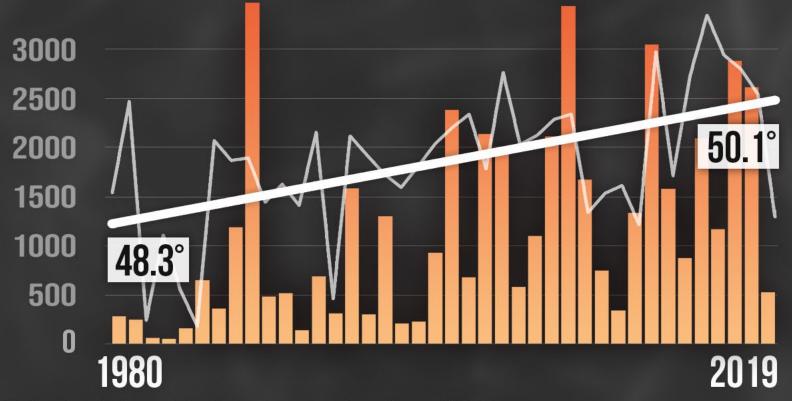
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Office of Wildland Fire

HOTTER YEARS, HIGHER FIRE RISK ACRES BURNED ACROSS WESTERN STATES

(THOUSANDS OF ACRES)



Total acres burned in the west calculated by summing acres burned across 11 states: AZ, CA, CO, ID, MT, NV, NM, OR, UT, WA, & WY. Avg annual temps (1980-2019) calculated by averaging temps across same states. Source: National Fire & Aviation Management FAMWEB Data Warehouse & NOAA/NCEI's Climate at a Glance

CLIMATE CO CENTRAL



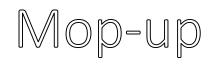
Prescribed Fire (Rx)

Section 1





Burning out



Routes of Exposure

- Ingestion
- Inhalation
- Absorption





Ingestion

- Mop up ash
- Dusty hikes
- Ash, dirt, and fuel on hands



Inhalation

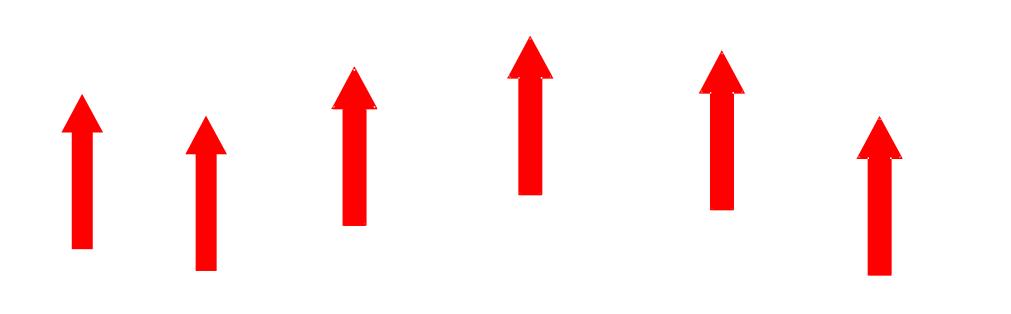
- Burning vegetation
- Smoke from ignition devices
- Dust and ash
- Long duration exposure to smoke in fire camps



Absorption

- Contaminated fire clothes which can contain oil, gas, smoke and ash particles
- Sooty legs, face/neck, hands/wrists
- Gear stored in vehicles





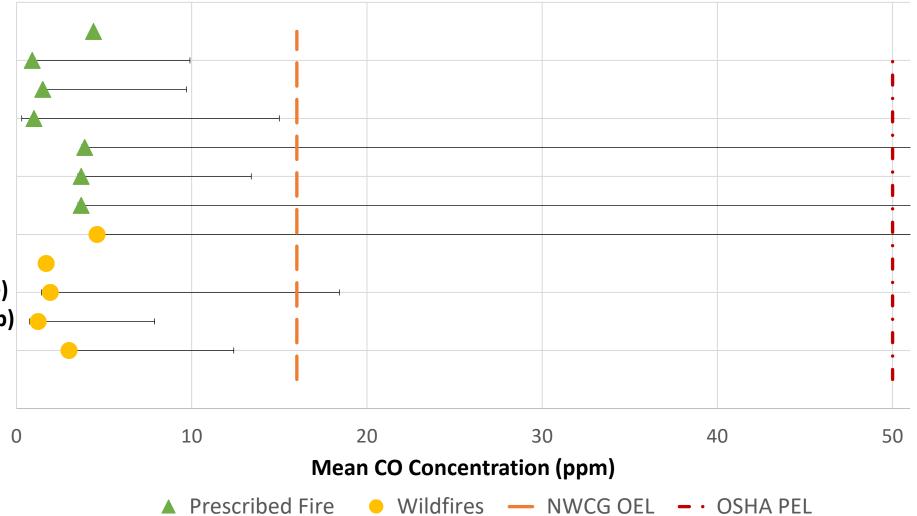
Recent PM_{2.5-4} Exposure Assessments

Reinhardt & Broyles 2019 Adetona, 2016 Adetona et al., 2013 Adetona et al., 2011 Reisen et al., 2011 Neitzel et al., 2009 Reisen & Brown, 2009 Navarro et al., 2021 **Reinhardt & Broyles 2019** Gaughan et al., 2014 (Fireline) Gaughan et al., 2014 (Mop-up) Reisen et al., 2011 1 2 3 4 5 0 Mean PM Concentration (mg/m³) **Prescribed Fire** Wildfires **NWCG OEL OSHA PEL**

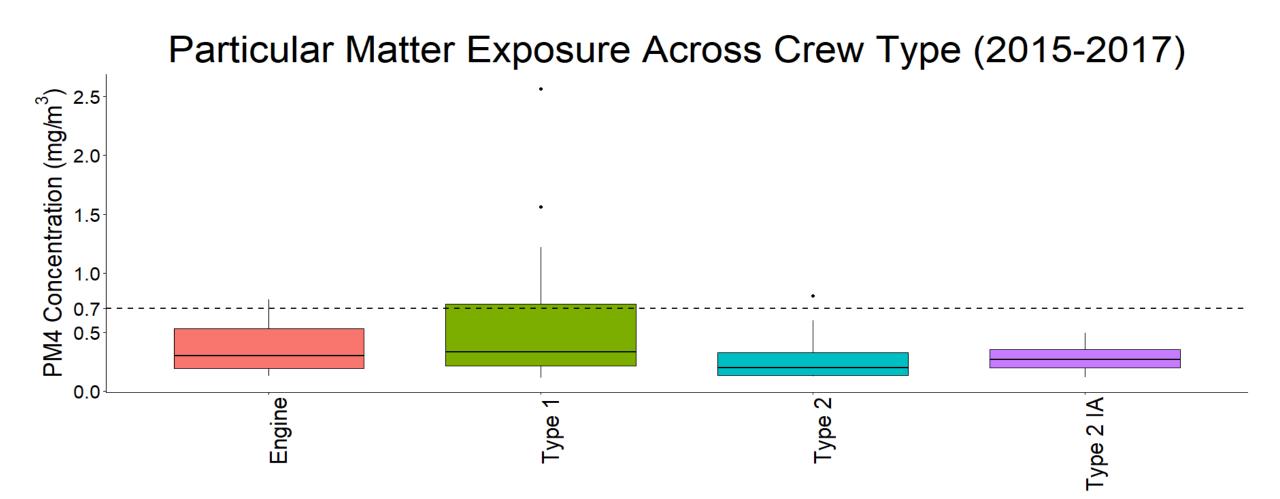
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Recent CO Exposure Assessments

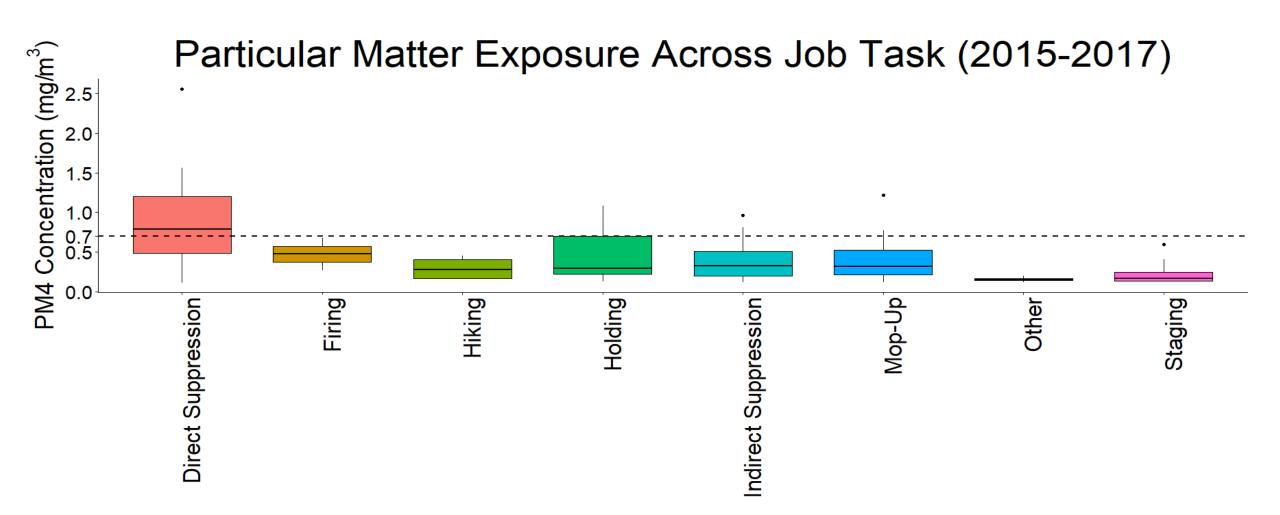
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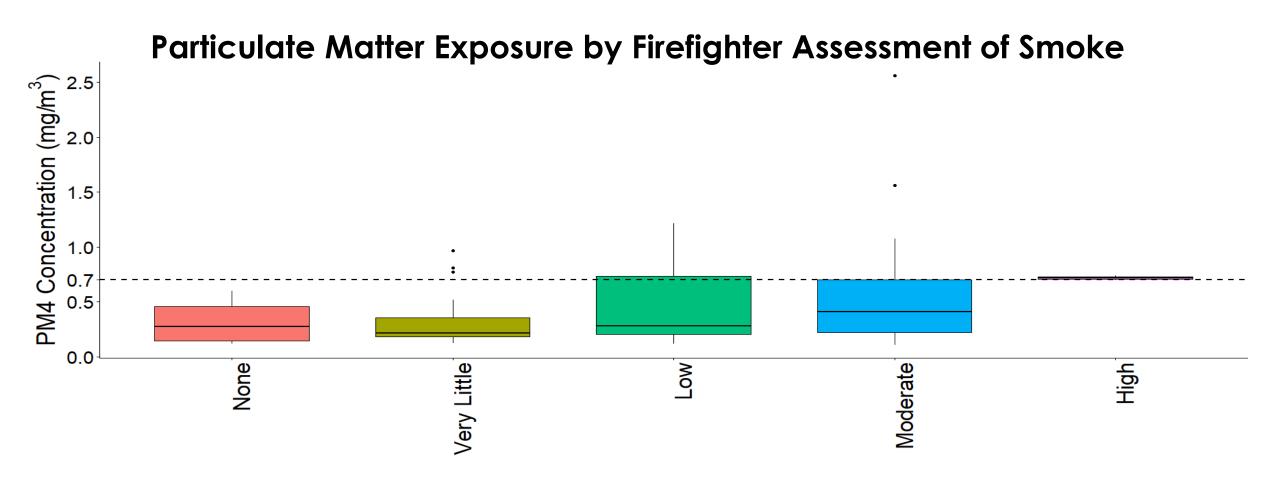
Results - Across Crew Type



Results - Across Job Task



Results - Firefighter Smoke Assessment



Health Effects From Research

• Cross-shift and fire season

- Respiratory outcomes
- Inflammation and Oxidative Stress

• Long-term Health Effects

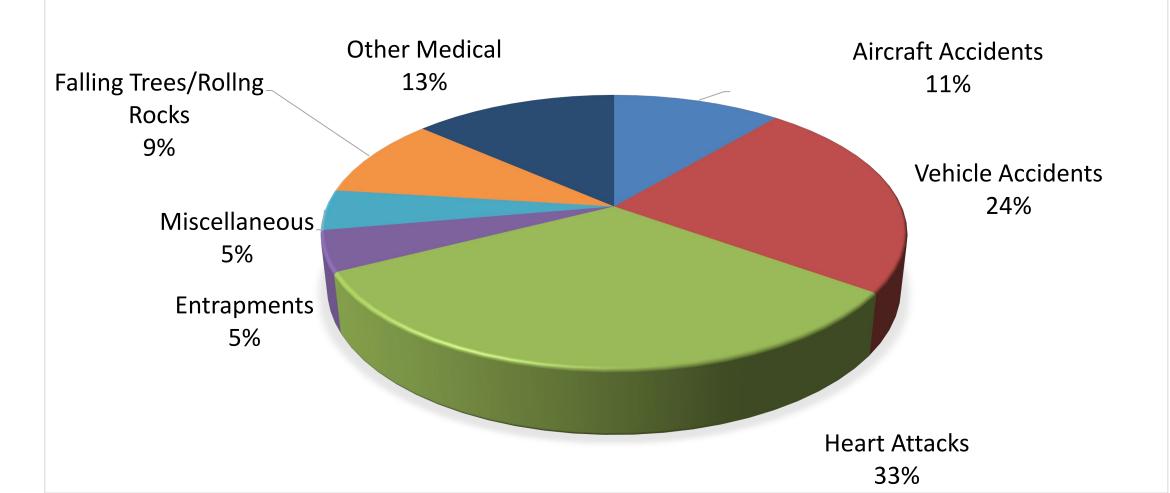
- Years of firefighting associated with hypertension and arrhythmias
- Estimated risk of lung cancer and cardiovascular disease

Pre/Post Season Health Assessments

- Liu et al. 1992
 - Airway response ↑
 - Lung Function
 - Mean FVC, FEV1, FEV25-75 \downarrow
- Gaughan et al. 2008
 - Mean FEV1 \downarrow
 - Upper and lower respiratory symptom score 个
 - Neutrophilic and eosinophilic inflammation $\boldsymbol{\uparrow}$

National Wildfire Coordinating Group 10-yr Fatality Report







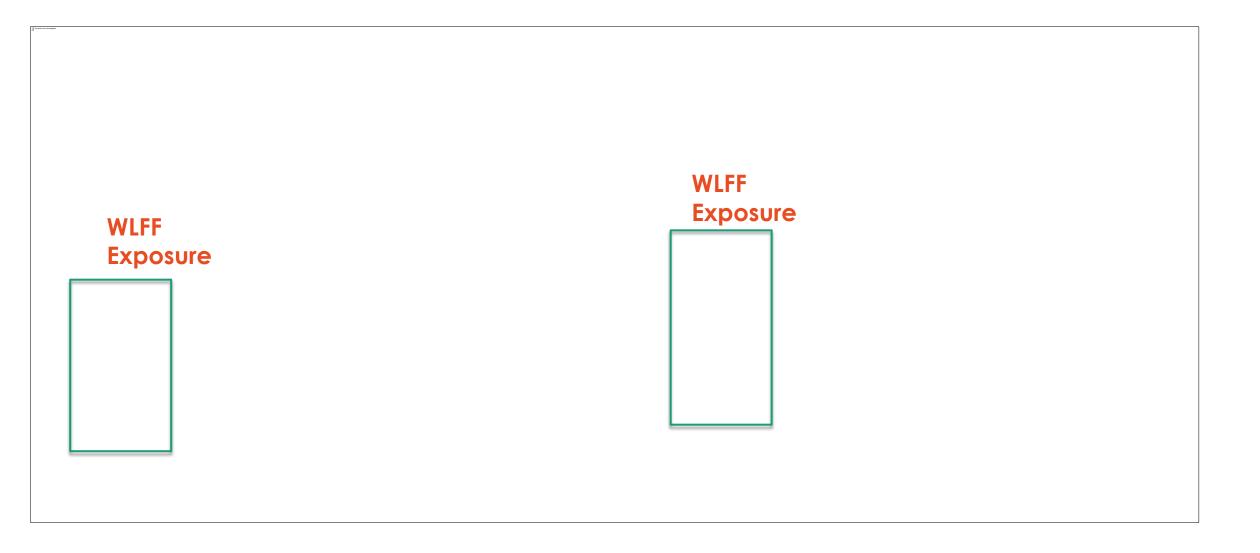
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Long-Term Health Risk Navarro et al. 2019

Estimate lifetime risk of lung cancer (LC) and cardiovascular disease (CVD) from exposure to particulate matter from smoke.

- Exposure-response relationships
- Field Measurements
 - PM₄
 - Heart Rate

Exposure – Response – Pope III et al. 2011



Methods

Estimation of Mortality Risk (Pope et al., 2011)

$$RR = 1 + \alpha(dose)^{\beta}$$

$$\begin{array}{l} Daily \ dose \ PM_4(mg) \\ = Exposure \ Concentration \left(\frac{mg}{m^3}\right) \times \ Breathing \ Rate \left(\frac{L}{min}\right) \\ \times \ Daily \ Shift \ Duration \left(\frac{hrs}{shift}\right) \times F \end{array}$$

 $F - Frequency of exposure = \left(\frac{shift days per year}{365 days per year} \times \frac{years of firefighting career}{45 years}\right)$

WLFF Risk Assessment – Methods

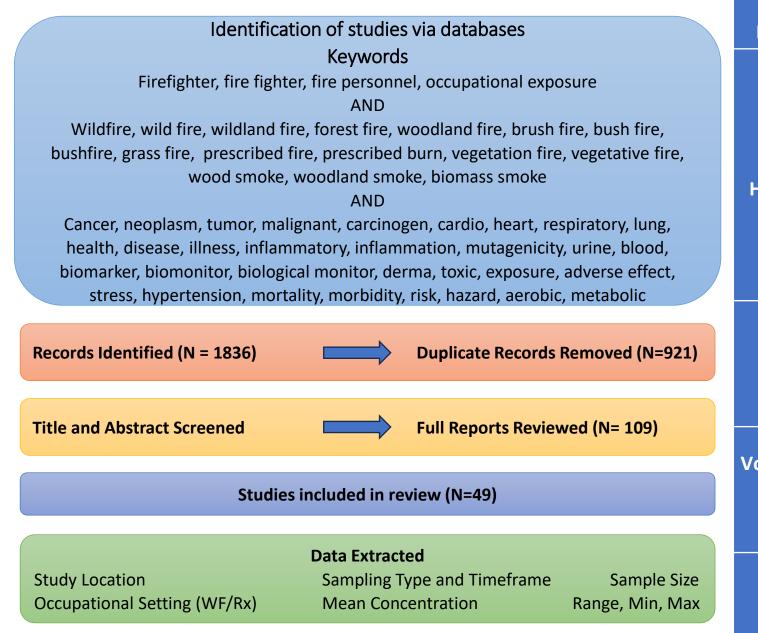
Dose = Conc. x BR x Shift x F

Exposure Scenario	Shift Exposure (mg/m³)	Breathing Rate (LPM)	Shift Duration (hours)	Fire Days (Days/ Year)	Career Duration	PM ₄ Daily Dose (mg)
Short Season	0.5	24	13.6	49	5	0.15
					10	0.30
					15	0.45
					20	0.60
					25	0.74
				98	5	0.30
					10	0.60
					15	0.89
					20	1.19
					25	1.49

WLFF Risk Assessment - Results

	Coroor Duration	Excess Risk (%)		
Exposure Scenario	Career Duration	LC	CVD	
	5	8	16	
	10	13	19	
Short Season	15	18	22	
49 fire days/ year	20	22	23	
	25	26	25	
	5	13	19	
	10	22	23	
Long Season 98 fire days/ year	15	29	26	
98 fire days/ year	20	36	28	
	25	43	30	

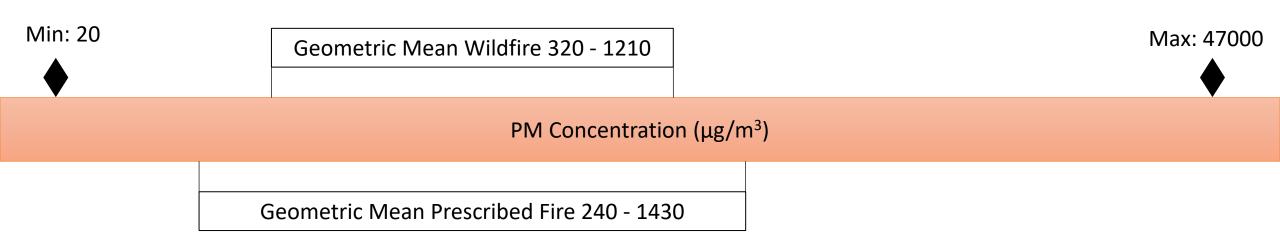
Systematic Review



		<u>IARC</u>
Chemical Class	<u>Chemical Measured</u>	<u>Classification</u>
Particulate	PM ₁₀	1
	PM, respirable	1
Matter (PM)	PM, total	1
	Anthracene	2B
	Benz[a]anthracene	2B
	Benzofluoranthenes	2B
Delvevelie	Benzo[b]fluoranthene	2B
Polycyclic	Benzo[j]fluoranthene	2B
Aromatic	Benzo[k]fluoranthene	2B
Hydrocarbons	Benzo[a]pyrene	1
, (PAHs)	Chrysene	2B
	Cyclopenta[c, d]pyrene	2A
	Dibenzo[a,h]anthracene	2A
	Indeno-1,2,3-[cd]pyrene	2B
	Naphthalene	2B
	Arsenic	1
	Beryllium	1
Metals	Cadmium	1
	Chromium	1
	Lead	2A-inorganic
	Nickel	1
	Acetaldehyde	2B
Volatile Organic	Acrolein	2A
	Benzene	1
Compounds	Ethylbenzene	2B
(VOCs)	Formaldehyde	1
	Styrene	2B
	Asbestos (all forms)	1
	Carbon black (total)	2B
Other	Radioactivity	1
	Silica (Quartz and Cristobalite)	1

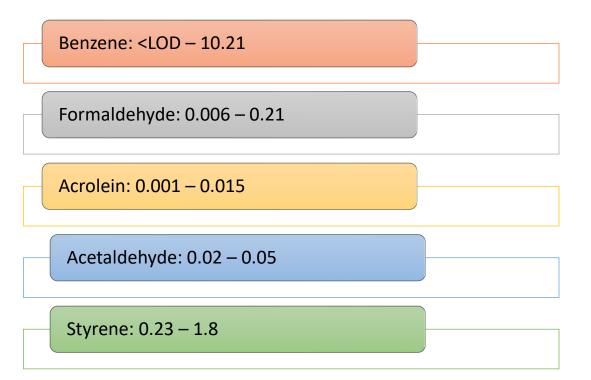
Particulate Matter (PM)

26 papers reported PM_{2.5}, PM_{respirable}, PM₁₀
Area samples > Personal Samples
3 Individual Samples > OSHA PEL



Volatile Organic Compounds

Mean Ranges Reported (ppm)



Polycyclic Aromatic Hydrocarbon (PAHs)

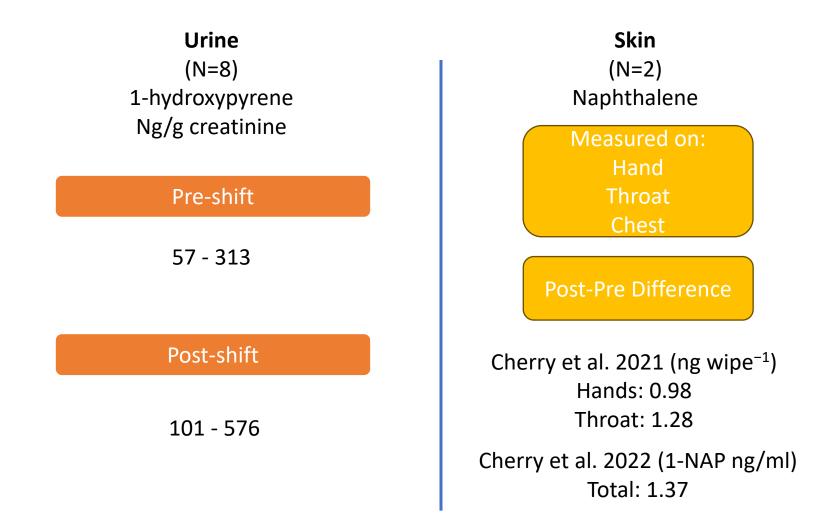
Air (N=12) Geometric Mean (ng/m³)

Naphthalene (personal)

Wildfire: 91 - 3189 Prescribed Fire: 669 - 6170

Benzo(a)pyrene

Personal: 5 - 15 Prescribed Fire: 3 - 185



Other Carcinogen Exposures

- 1% arsenic, 8 % chromium and 52% of nickel above NHANES in urine
- Reinhardt & Broyles 2019 reported ~ 30% of silica samples
- Asbestos (naturally occurring and contamination) has been measured.
- Radionuclides measured in Chornobyl and Belarus exclusion zone, Lisbon, and outside Los Alamos Lab, NM
- Four papers reported black carbon exposures. None above OELs

Summary of Results

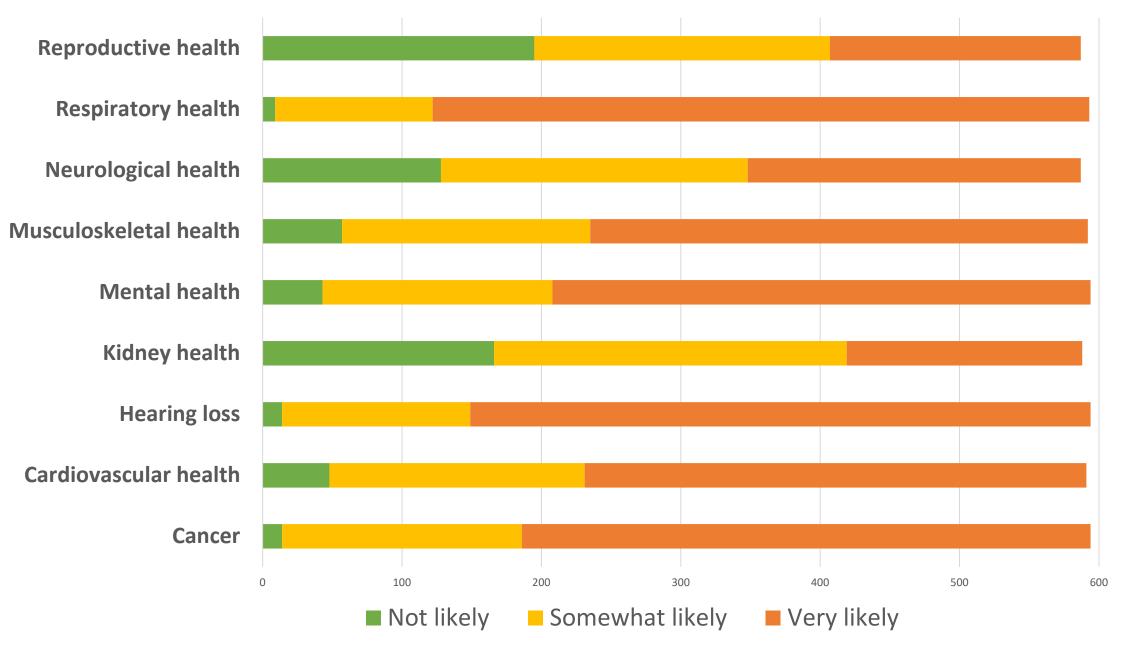
49 studies identified 31 carcinogens

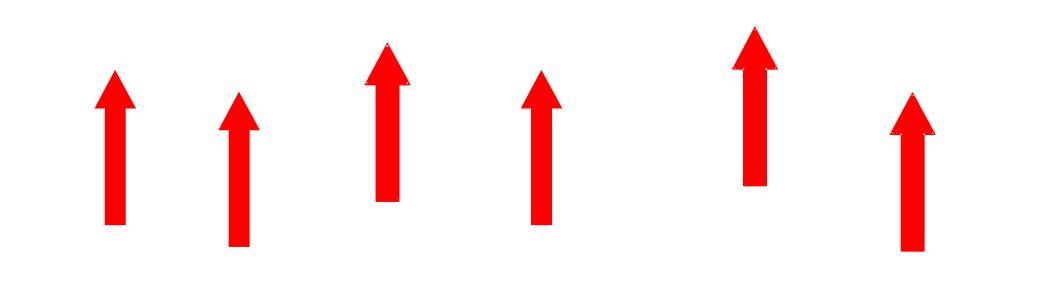
Shift exposures are highly variable

Particulate matter is the most studied

Skin hygiene can reduce absorption of carcinogens

In your opinion, do you think your work as a wildland firefighter increases your risk of developing any of the following adverse health effects or outcomes?







Mitigation Recommendations

- Minimize mop-up
- Limit shift length
- Rotate crews out of heavy smoke areas and high exposure tasks
- Develop fire-specific OELs
- Locate ICPs and other camps out of smoky areas
- Skin Hygiene

H.R.3684 - Infrastructure Investment and Jobs Act

The Secretary of the Interior and the Secretary of Agriculture shall—

- (A) develop and adhere to recommendations for mitigation strategies for wildland firefighters to minimize exposure due to line-of-duty environmental hazards.
 - (B) establish programs for permanent, temporary, seasonal, and year-round wildland firefighters to recognize and address mental health needs, including post-traumatic stress disorder care.

National Defense Authorization Act FY23

Sec. 5305 Fairness for Federal Firefighters

- Presumptive illness coverage
 - Cancer
 - 24hr post incident cardiac/stroke
- Comprehensive long-term health study
 - Exposed to fires, smoke, and toxic fumes
 - Race, ethnicity, age, gender, and time in service
 - Recommendations for legislative action to prevent health effects from toxic exposure
 - Annual report

Table 1. Conditions Presumed to be Employment-Related for Federal Firefighters

Cancers						
Bl adde r cancer	Brain cancer		C olorecta l cancer			
Esophageal cancer	Kidney cancer		Leukemias			
Lung cancer	Mesothelioma		Multiple myeloma			
Non-Hodgkin lymphoma	Prostate cancer		Skin cancer (melanoma)			
Testicular cancer	Thyroid cancer					
Other Conditions						
Chronic obstructive pulmona	ry disease	Sudden cardiac event or stroke within 24 hours of engaging in firefighting activities				

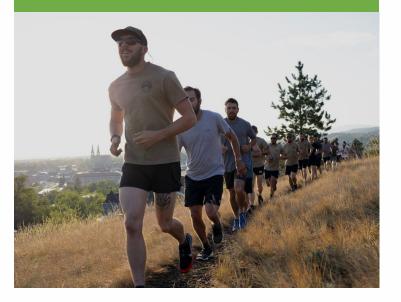
Federal Wildland Firefighter Health & Wellbeing Program



Behavioral Health



Physical Health & Readiness



Environmental & Occupational Health



Research Partnerships

Medical and Public Health Advisory Team

Evaluation process for requesting access to DOI/USFS Firefighter participants

Assess projects for:

- Alignment with research priorities
- Reduce/prevent disruption of ops
- Reduce duplication and research fatigue

Projects will be evaluated and connected with possible participants

Open for applications twice per year (spring and fall)

Research Challenges and Gaps

- Dynamic environments
- Lack of knowledge on long-term risks
- Non-smoke exposures
- Occupational limits for smoke
- Mitigations and exposure reduction
- Cumulative exposure and stressors

Considerations

- What research and applied practices can we learn and benefit from?
- What motivates us to make changes in our behaviors?
- What small changes in our culture can lead to significant health benefits?



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Questions?