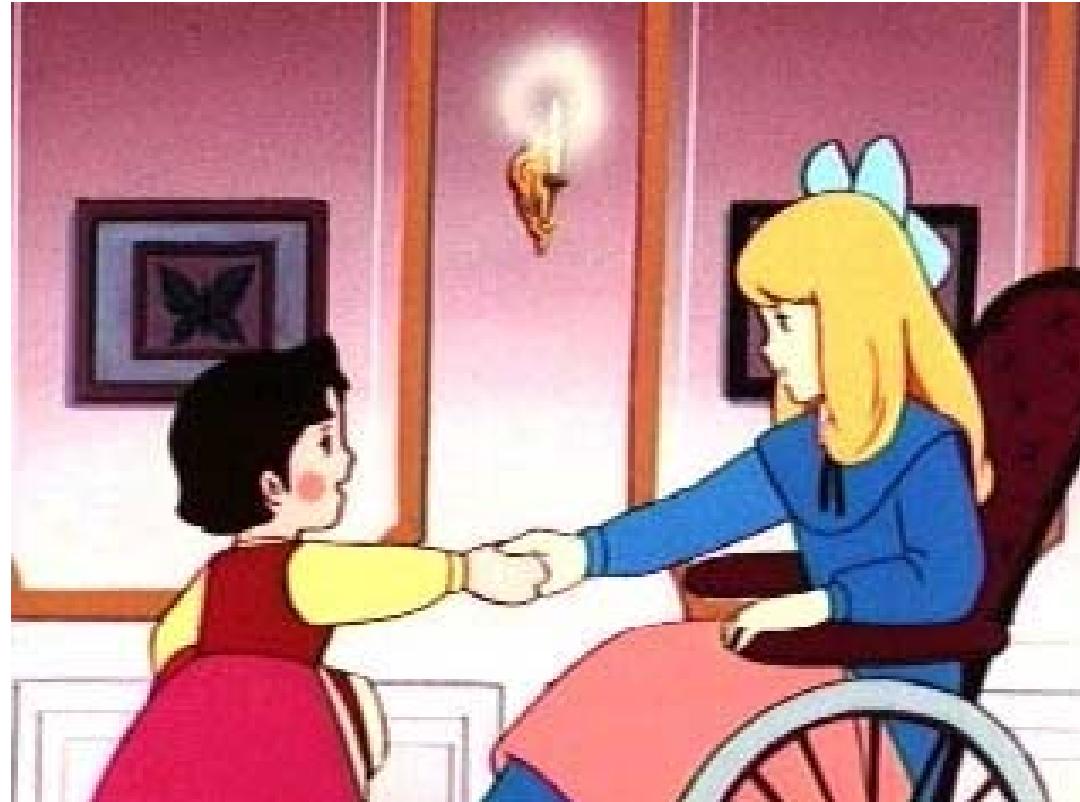


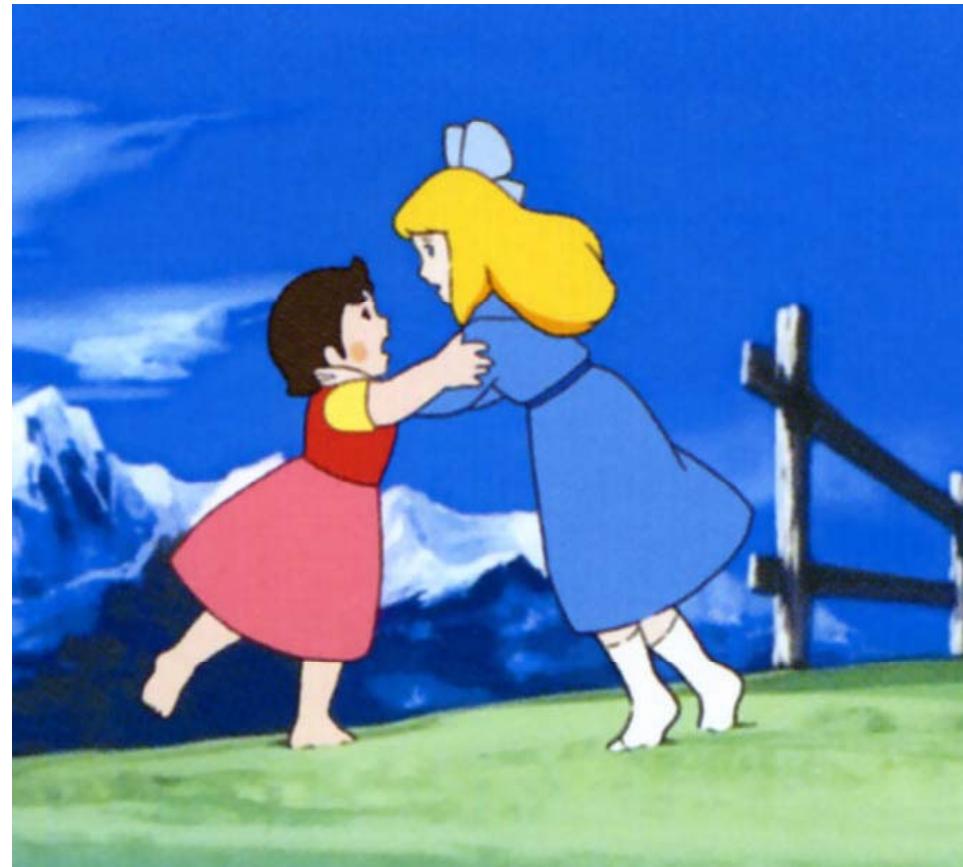
# The physical environment and cardiovascular mortality

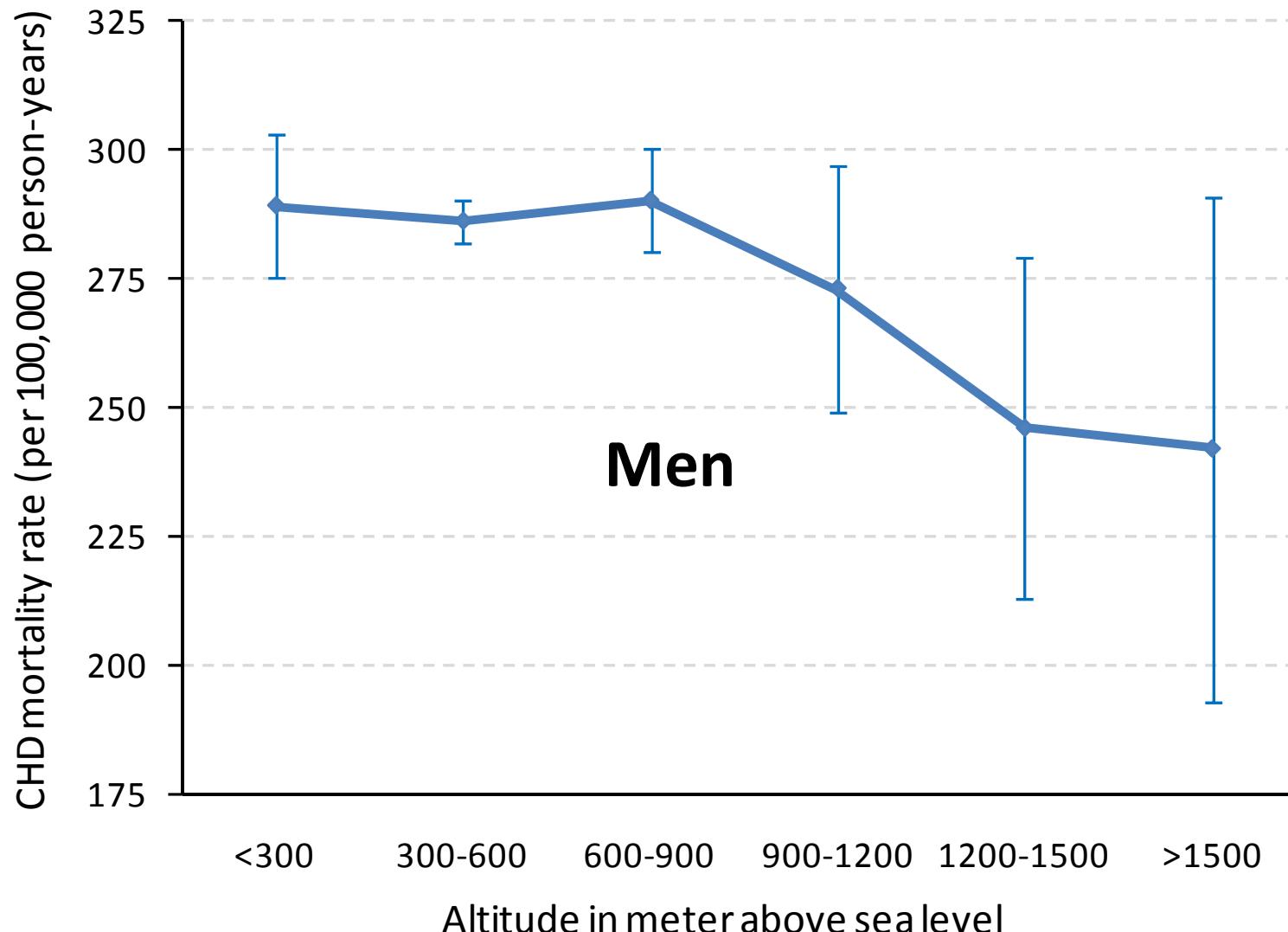
David Fäh











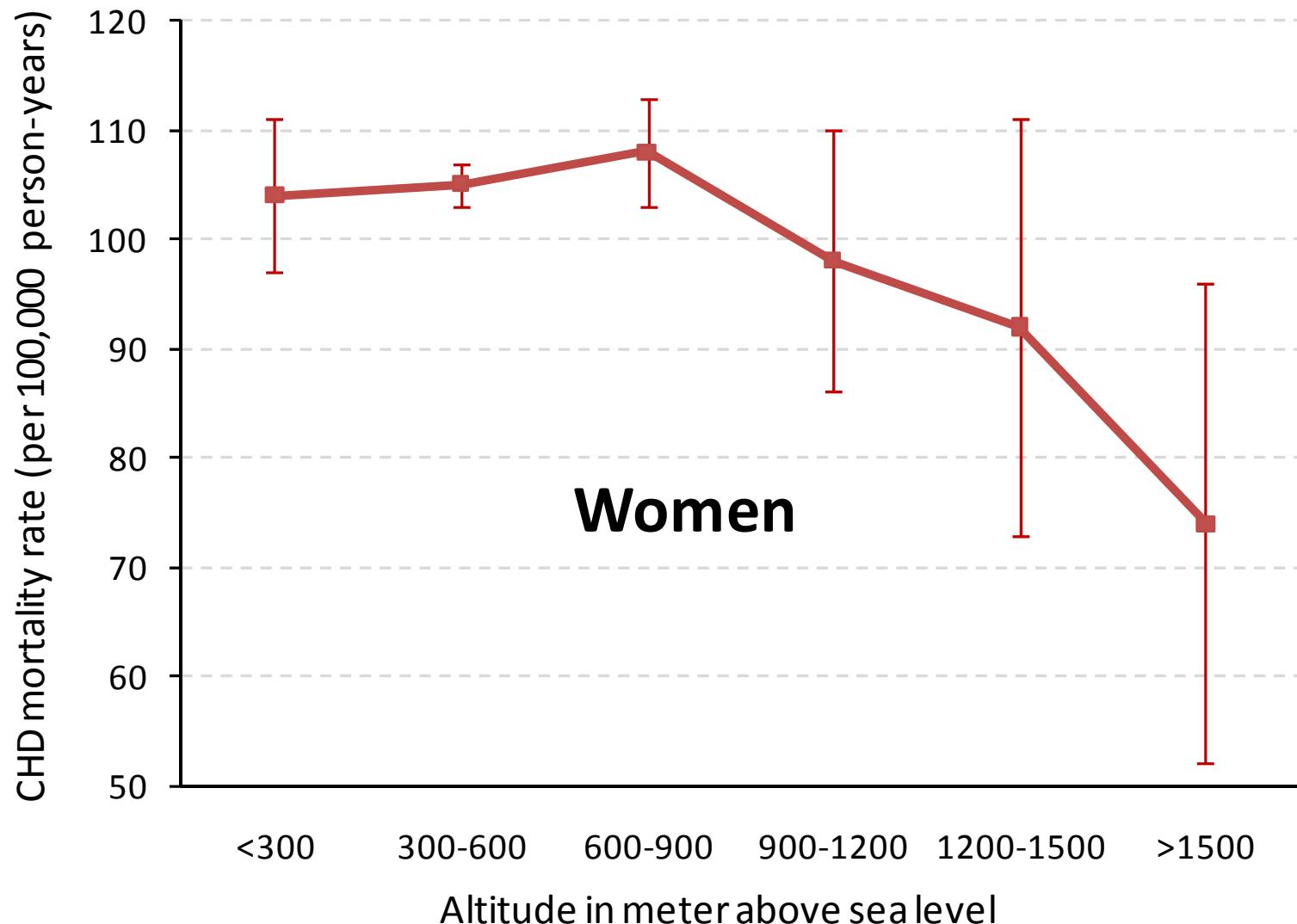
Circulation. 2009 Aug 11;120(6):495-501.

Error bars are 95% confidence intervals

Workshop Swiss National Cohort (SNC), 1.7.2010: Results after the first 4 years  
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# CHD and Stroke

- Per 1000m of increase in altitude (259-1960m, men and women 40-84y)
  - CHD mortality decreased by 22%
  - Stroke mortality decreased by 12%
  - Place of birth had an independent effect

Circulation. 2009 Aug 11;120(6):495-501.

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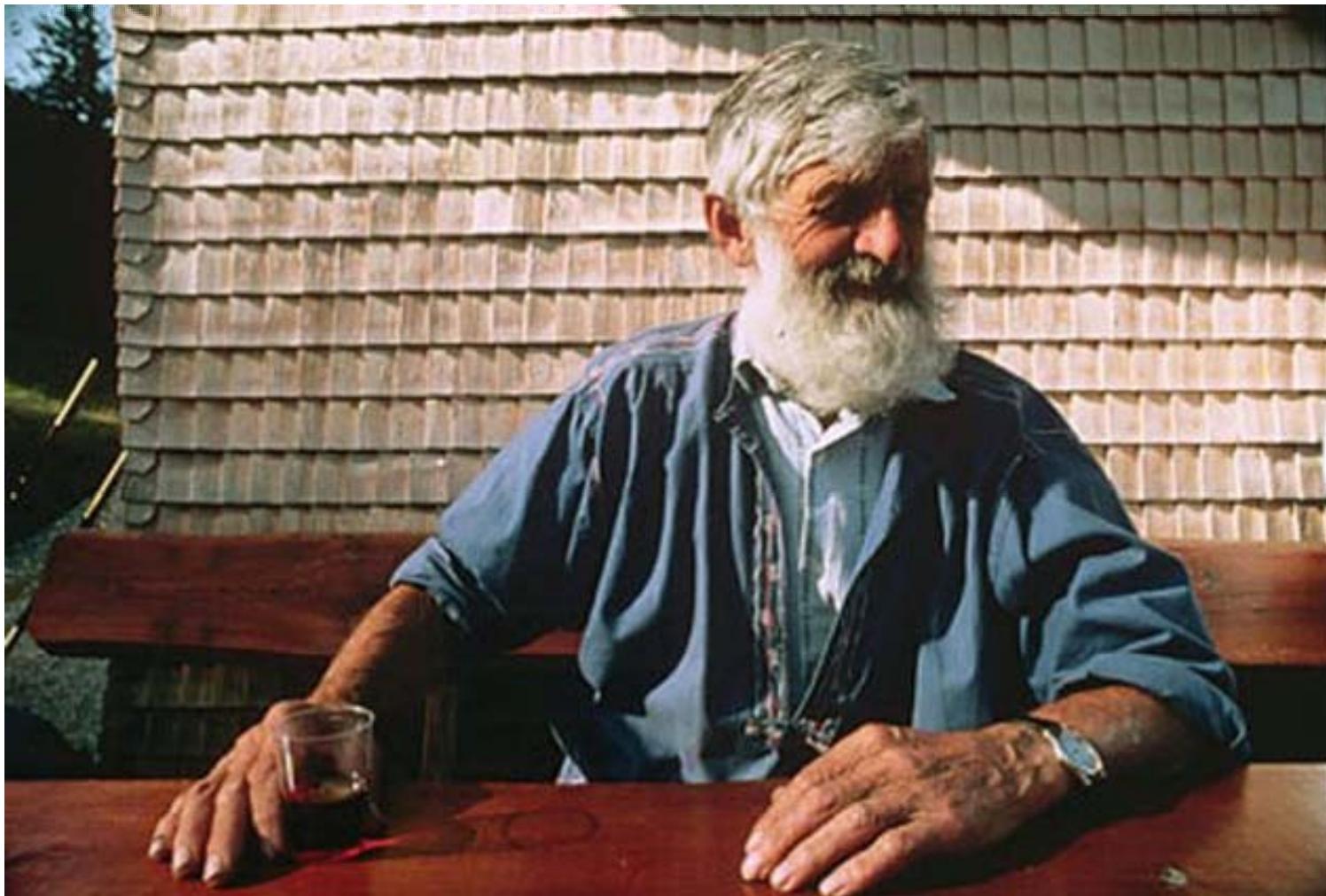
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# Possible mechanisms

1. Effect of altitude per se
2. Confounders
3. Effects associated with altitude

# 1. Effect of altitude per se

- Lower oxygen partial pressure
- Higher „return of investment“ from physical activity
- In utero cardiovascular adaptations?



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## 2. Confounders

- Probably no differences by altitude:
  - Obesity
  - Cigarette smoking
  - Physical inactivity
  - Eating pattern (e.g., fruit consumption)
  - Alcohol consumption
  - Diabetes
  - Genetic background

Based on Swiss Health Survey 2002

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## Nebelhäufigkeit in der Schweiz im Winterhalbjahr in %

*Bedeutung 100%: Fällt eine Nebellage auf, dann hat das Region Nebel*

Auf der Basis von Wettersatellitendaten 1989-1991.

Quelle: Geographische Institute der Univ. Bonn.

%

1-10

11-20

21-30

31-40

41-50

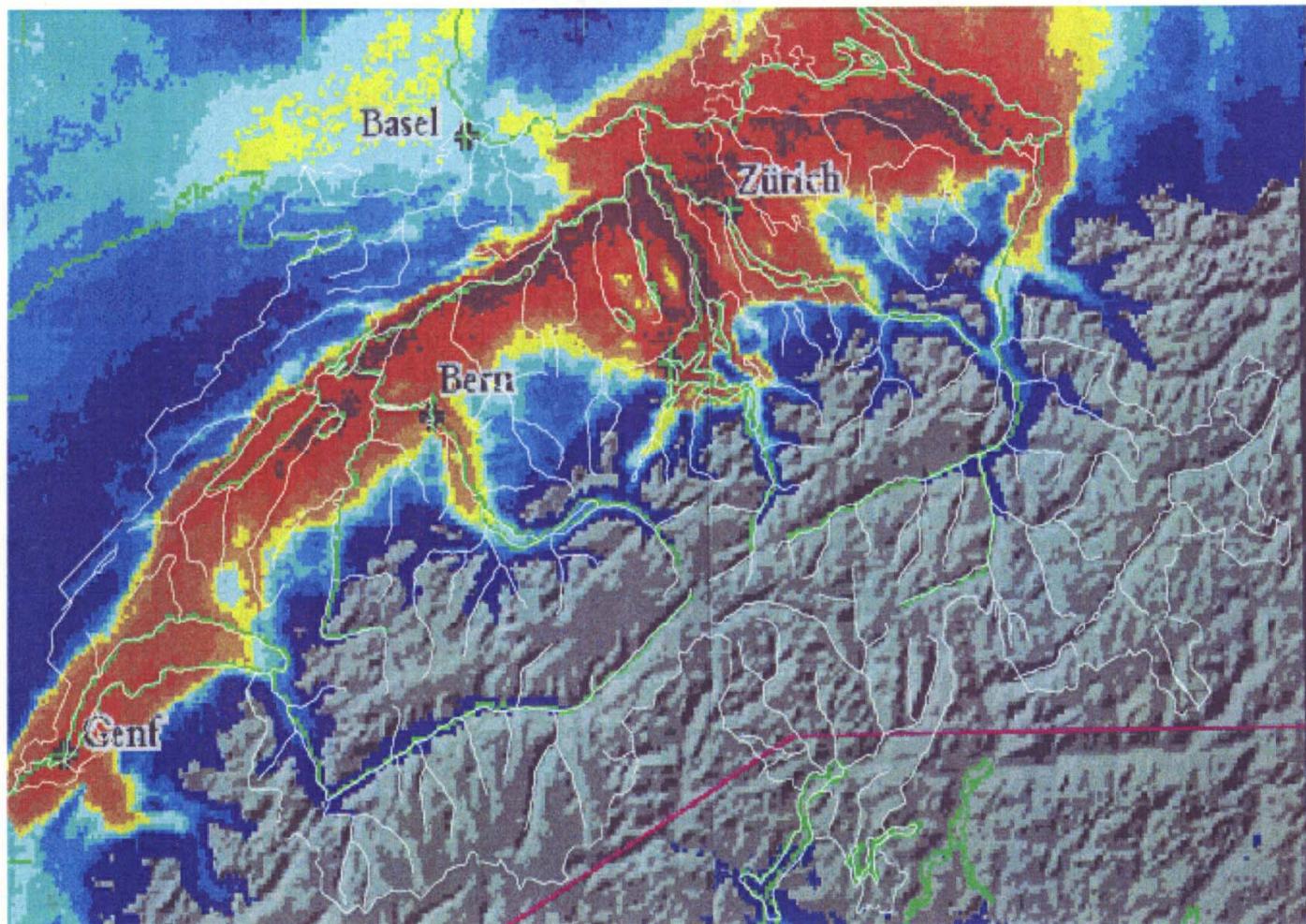
51-60

61-70

71-80

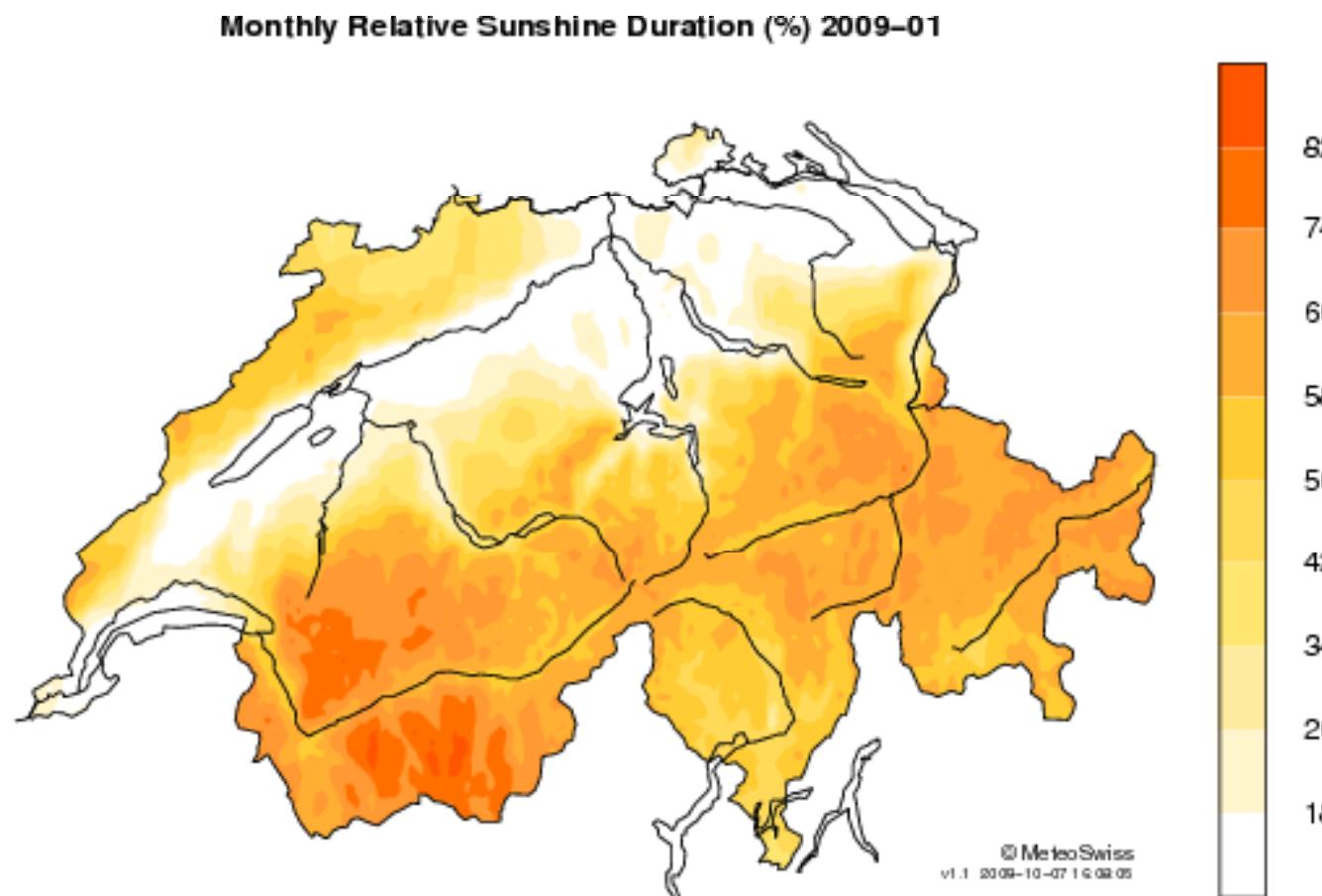
81-90

91-100

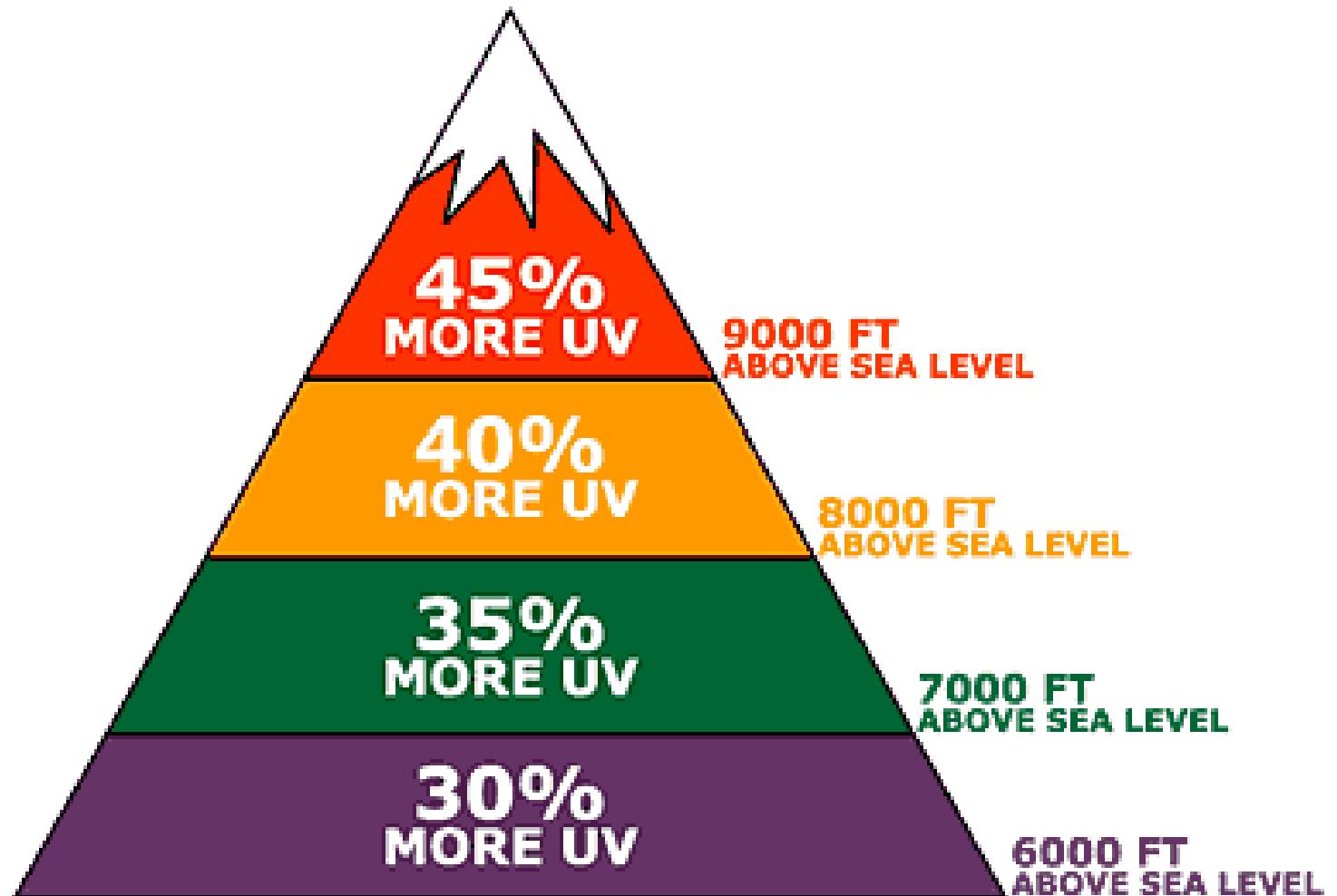


Nördlich der violetten Linie wurden 80 Einzelbilder, südlich davon 59 Einzelbilder ausgewertet.

aus: MeteoSchweiz: Nebelhäufigkeit in der Schweiz. Auszug aus: Klimaatlas der Schweiz. Vierter Lieferung. Schweizerische Meteorologische Anstalt 1991







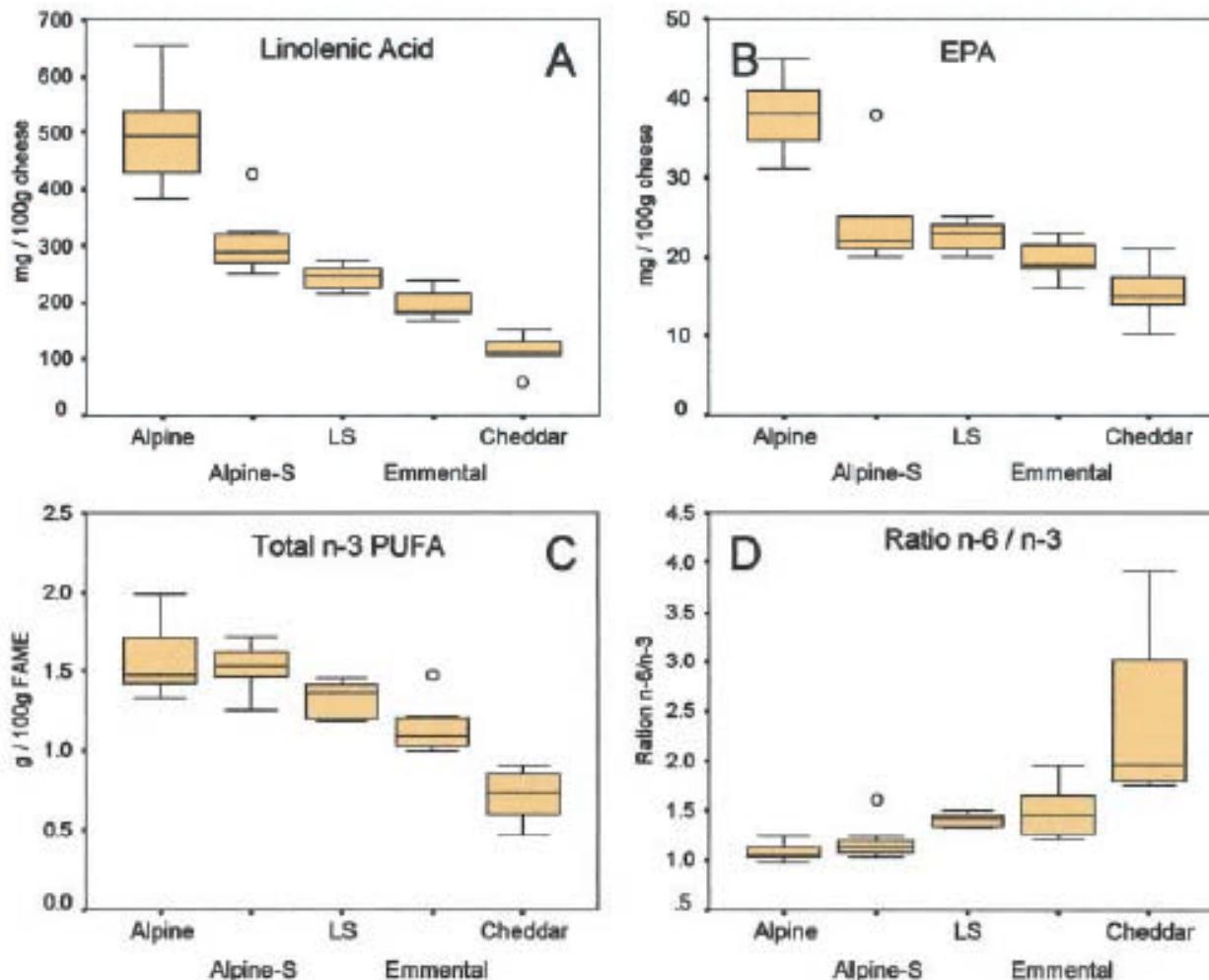
### 3. Effects related with altitude

- Lower air humidity
  - Less fog
  - Longer sunshine duration
  - More bearable temperatures
- Thinner atmosphere
  - Higher Sunshine intensity (UV radiation)

### 3. Effects related with altitude

- Sunshine (duration & intensity):
  - Higher vitamin D levels in mountaineers
    - Associated with decreased risk for Stroke & CHD
    - Critically low levels in wintertime at low altitudes in Switzerland
  - Effect on vegetation and produced food (Alpine paradox)?
  - Other effects?

Am J Clin Nutr. 1992;56(3):537-42; Circulation. 2004;109(1):103-7.

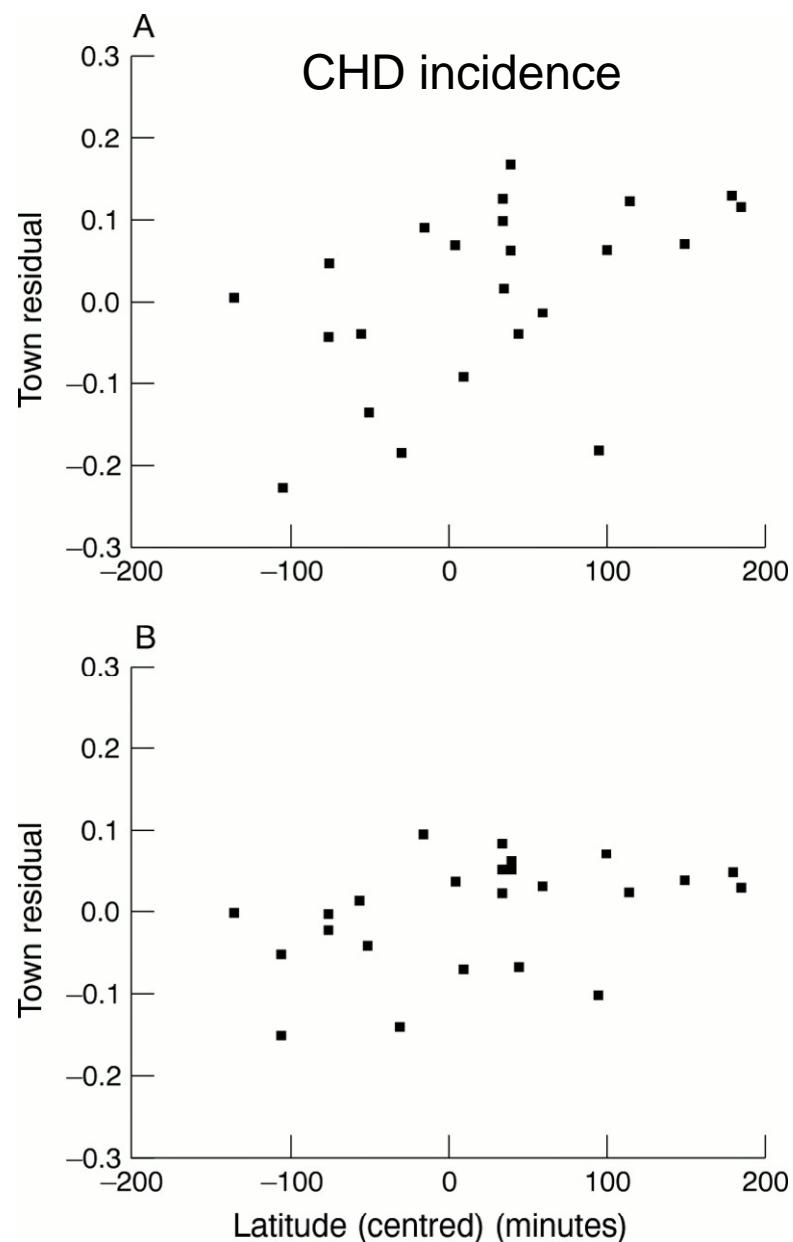


Circulation. 2004;109:103-107

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Only age is fitted in  
the model

Age, smoking, physical  
activity, BMI, alcohol  
intake, systolic blood  
pressure, cholesterol,  
social class, and height  
are fitted

Heart 2001;86:277-283 doi:10.1136/heart.86.3.277

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# Other differences by altitude

- Urbanity (large cities at lower altitudes)
- Air pollution
- Noise (traffic)
- Access to health care services?

# What is it?

- Altitude alone?
- Climate? Which element?
- Geographical aspect (north vs. south of the alps)?

# Aims

- Disentangle altitude from climate
- Define geographical and climatic conditions with high and low CVD-risk
- Look for a “dose-dependent” and sustained effect of exposure
- Assess the influence of air pollution & noise

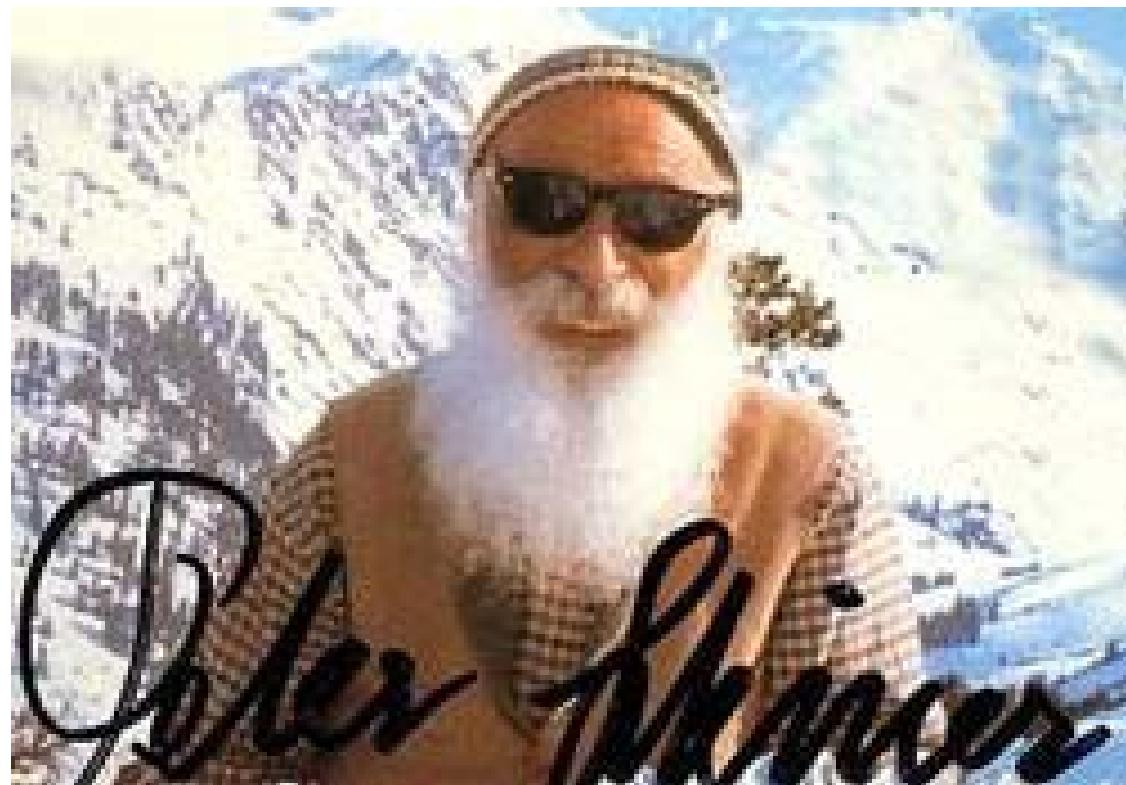
# Hypotheses

- Sunshine duration has an effect independent of altitude
- Larger mortality variations in wintertime
- Sustained and dose-dependent effect of duration of sunshine exposure

# Data sources

Data source	Information
Swisstopo	Digital altitude model (DHM). Obtain altitude (on building level) out of coordinates by using the GIS*-method
Das Bundesamt für Umwelt (BAFU)	Air pollution and noise model
TeleAtlas	Distance to major roads
Bundesamt für Statistik (BFS)	Coordinates of buildings (GWR: Gebäude- und Wohnungsregister)
Bundesamt für Meteorologie und Klimatologie (MeteoSchweiz)	Climate data (temperature, air humidity, sunshine duration, precipitation)
Swiss National Cohort (SNC)	Sex, age, mortality (date and cause of death), socio-economic information, place of residence & at birth

\*Geographical Information Systems (GIS)



[www.davidfaeh.ch/lehre](http://www.davidfaeh.ch/lehre)