Lung Health and Your Environment

The health of our lungs depends on a healthy environment. Research supported by the National Institute of Environmental Health Sciences (NIEHS) shows that protecting lung health requires strategies to improve our environment and lifestyle choices.

Many environmental factors can affect the health of your lungs. Air pollution and cigarette smoke are the greatest threats. Some lung diseases are caused by bacterial, viral, or fungal infections.

Air Quality

Studies linking air quality to health effects are numerous and important. Pollution can be found outdoors, from vehicle exhaust, industrial emissions, or wildfires, but also indoors. Outdoor pollution can enter a building. At home, indoor pollutants can come from gas stoves, tobacco smoke, or fireplaces.

Air pollution comes in many forms and can be present anywhere. Airborne pollutants are substances, such as chemicals in smoke or exhaust, that can reduce air quality and harm health. These pollutants can contribute to lung diseases such as asthma,¹ emphysema,² chronic obstructive pulmonary disease (COPD), and lung cancer.³

Improving air quality may lead to health benefits. Large studies show an association between decreases in levels of outdoor air pollutants and improvement in lung function, including reductions in asthma symptoms.⁴ Former smokers with COPD who used portable air cleaners with high-efficiency particulate air (HEPA) filters in their homes had improved respiratory symptoms.⁵ Interventions that improve indoor air quality may be a way to improve respiratory health.

Climate Change

Changes in temperature and precipitation may increase health risks related to air quality, such as respiratory and cardiopulmonary illnesses. Also, the frequency and severity of allergic illnesses, including asthma and hay fever, are expected to increase as a result of a changing climate.⁶ More intense wildfires, hurricanes, and floods can lead to increased hospitalization and death due to cardiopulmonary disease.⁷



Tobacco Smoke

Cigarette smoking is the leading cause of lung cancer, which is the leading type of cancer-related death worldwide, according to the World Health Organization. Research shows that smoking just a few cigarettes a day causes long-term lung damage.⁸ Breathing secondhand smoke also increases a person's chance of developing respiratory disease.⁹

Electronic Cigarettes

Using electronic cigarettes, also called vaping, can lead to lung injury, according to the American Thoracic Society. Aerosols from these devices are complex and contain many different ingredients in varying amounts. NIEHS-funded researchers found exposure to electronic cigarette aerosols with nicotine could lead to increased cell death in the lungs and weaken disease-fighting white cells that are essential for healthy lungs.¹⁰

Wildfires

Exposure to wildfire smoke can increase the risk of respiratory diseases and result in a significant decrease in lung function that can persist up to two years.¹¹ More frequent and severe wildfires due to climate change may increase rates of respiratory illness from exposure to smoke.⁶

Mold

Most types of molds are harmless, but some produce compounds that trigger allergies or asthma attacks. Studies show that mold exposure can worsen asthma symptoms, especially in young children.¹²

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Radon

Radon is a naturally occurring radioactive gas that is colorless and odorless. In the U.S., radon exposure is the second leading cause of lung cancer after cigarette smoking, according to the Centers for Disease Control and Prevention. Outdoors, radon disperses quickly, reducing the chance for it to harm health.

Radon can seep indoors and accumulate inside buildings and homes. Testing is the only way to know whether indoor radon levels are high. If levels are high, a qualified professional can install special vents to make a home safer.

Types of Respiratory Disease

Airway diseases that affect breathing involve reduced or blocked air flow. Asthma is an example. COPD includes chronic bronchitis and emphysema. It is often caused by smoking and indoor or outdoor air pollution. People can have a mix of asthma and COPD.

Interstitial lung diseases reduce the lungs' ability to hold air. For example, pulmonary fibrosis is a scarring of lung tissue.

Lung cancer, an abnormal growth of cells, usually starts in the lungs, but can start elsewhere and spread to the lungs. It can have environmental and genetic causes.

Lung infections are caused by microorganisms (i.e., bacteria, viruses, or fungi) that damage lung tissue. Pneumonia is an infection that causes air sacs to fill with fluid. Pollution can increase the chance that lungs are more susceptible to infections, such as COVID-19.

Other NIEHS Research

- More than 50 genetic changes that affect the risk of pulmonary disorders have been identified. One change occurs in lung cells from drinking water contaminated with hexavalent chromium, an industrial chemical and human carcinogen.¹³ This information could improve drug development to treat lung function problems.¹⁴
- The NIEHS Matrix Biology Group has found a potential therapy in hyaluronan, a substance secreted by living tissue that acts as a biological scaffold for cells. It improved lung function in patients suffering from severe COPD.¹⁵
- Non-small-cell lung cancer is often resistant to chemotherapy; however, NIEHS found silencing a gene called INO80 led to reduced tumor growth, potentially leading to better treatments and improved patient outcomes.¹⁶
- Many tumors in the 10-20% of lung cancer sufferers who have never smoked arise from the accumulation of mutations caused by natural processes in the body.¹⁷ This finding may help researchers identify risk factors for lung cancers.

Where Can I Go for More Information?

Learn more about lung diseases from the National Library of Medicine's MedlinePlus: https://medlineplus.gov/lungdiseases.html

Find information for all ages in English and Spanish.

For more information on the National Institute of Environmental Health Sciences, go to **https://niehs.nih.gov**.

- Adamkiewicz, G. et al. 2020. The respiratory risks of ambient/outdoor air pollution. Clin Chest Med 41(4): 809-824.
- ² Wang M, et al. 2019. Association between long-term exposure to ambient air pollution and change in quantitatively assessed emphysema and lung function. JAMA 322(6):1-11.
- ³ Pun VC. et al. 2017. Long-Term PM2.5 Exposure and respiratory, cancer, and cardiovascular mortality in older US adults. Am J Epidemiol 15;186(8):961-969.
- ⁴ Gauderman WJ, et al. 2015. Association of improved air quality with lung development in children. N Engl J Med 372:905-913.
- ⁵ Hansel NN, et al. 2022. Randomized clinical trial of air cleaners to improve indoor air quality and COPD health: results of the CLEAN AIR STUDY. Am J Respir Crit Care Med 15;205(4):421-430.
- ⁶ Fourth National Climate Assessment, Vol. 2, 2018. U.S. Global Change Research Program. Available: https://nca2018.globalchange.gov.
- ⁷ Bayram H. et al. 2017. Environment, global climate change, and cardiopulmonary health. Am J Respir Crit Care Med 15;195(6):718-724.
- ⁸ Oelsner EC, et al. 2019. Lung function decline in former smokers and low-intensity current smokers: a secondary data analysis of the NHLBI Pooled Cohorts Study. Lancet Respir Med 8(1):34-44.
- 9 U.S. Department of Health and Human Services. 2006. The Health Consequences of Involuntary Exposure to Tobacco Smoke: A Report of the Surgeon General. Atlanta: Centers for Disease Control and Prevention. Available: https://www.ncbi.nlm.nih.gov/books/NBK44324 [accessed 8 April 2022].
- ¹⁰ Serpa GL. et al. 2020. Electronic nicotine delivery system aerosol-induced cell death and dysfunction in macrophages and lung epithelial cells. Am J Respir Cell Mol Biol 63(3):306-316.
- ¹¹ Liu JC. et al. 2016. Particulate Air Pollution from Wildfires in the Western US under Climate Change. Clim Change 138(3):655-666.
- ¹² Reponen T, et al. 2011. High environmental relative moldiness index during infancy as a predictor of asthma at 7 years of age. Ann Allergy Asthma Immunol 107(2):120-6.
- ¹³ Wise SS, et al. 2018. Hexavalent chromium-induced chromosome instability drives permanent and heritable numerical and structural changes and a DNA repairdeficient phenotype. Cancer Res 78(15):4203–4214.
- ¹⁴ Wyss AB, et al. 2018. Multiethnic meta-analysis identifies ancestry-specific and cross-ancestry loci for pulmonary function. Nat Commun 9(1):2976.
- ¹⁵ Galdi F, et al. 2021. Inhaled high molecular weight hyaluronan ameliorates respiratory failure in acute COPD exacerbation: a pilot study. Respir Res 1;22(1):30.
- ¹⁶ Zhang S, et al. 2017. INO80 is required for oncogenic transcription and tumor growth in non-small cell lung cancer. Oncogene 36(10):1430-1439.
- ¹⁷ Landi MT, et al. 2021. Tracing lung cancer risk factors through mutational signatures in never-smokers. Am J Epidemiol 1;190(6):962-976.