THE IMPACT OF PRENATAL LEAD EXPOSURE ON COGNITIVE & PHYSICAL HEALTH OUTCOMES AMONG INFANTS AND CHILDREN IN BANGLADESH

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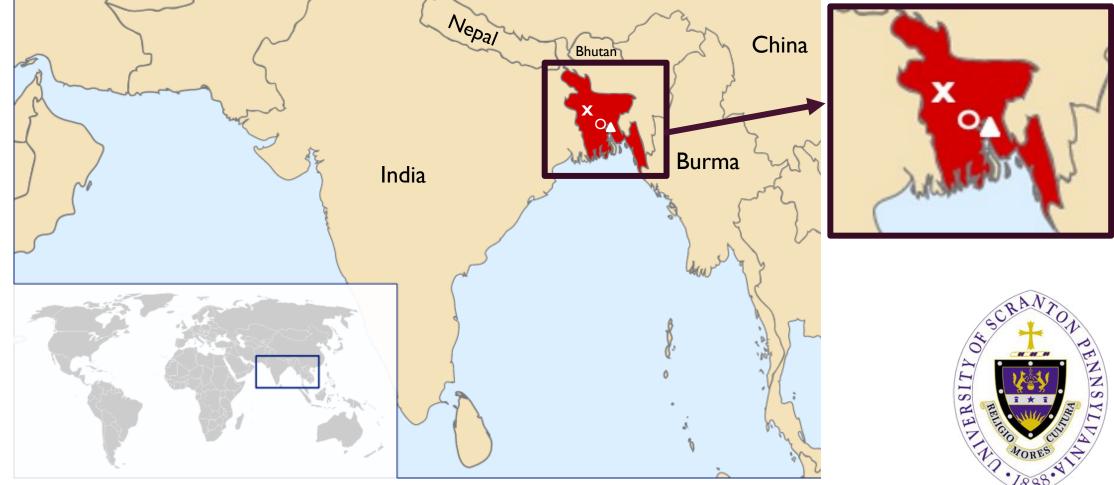
OBJECTIVES

By the end of the presentation:

- I. Understand the negative effects of prenatal lead exposure on infants and children in Bangladesh
- 2. Recognize the significance of the prevalence of lead exposure in the country of Bangladesh
- 3. Understand why Physical Therapists in Bangladesh should be aware of the implications of lead exposure on infantile and childhood development



BANGLADESH



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LEAD EXPOSURE SUSCEPTIBILITY

- Lack of environmental regulations¹⁻²
- Malnutrition¹⁻²
- Micronutrient deficiencies¹⁻²



PRENATAL LEAD EXPOSURE IN BANGLADESH

- Working Place³
- Industrial or Urban Areas³
- Air pollution³
- Consumption of lead polluted water and food³



HARMFUL IMPACTS OF LEAD

- Harmful Impacts of Lead Include
 - Lower Neurodevelopment Scores²
 - Disrupt normal cellular processes & weaken immune defense³
 - Deplete essential nutrients from body³
 - GI Cancer³
 - Long-term exposure: MS, PD, AD, MD, CA³
 - Stunting in children⁴





Polluted River in Bangladesh



PURPOSE

This systematic review will analyze the effects of prenatal lead exposure on the cognitive and physical development of infants and children in Bangladesh.



- Search Engines:
 - Springer Link
 - ProQuest
 - PubMed
 - ScienceDirect
- Search limits:
 - Peer-reviewed (all databases)
 - Dates: January 2011- September 2022 (all databases)
 - Articles (Springer Link, only)
 - Research articles (ScienceDirect, only)



Search terms:

("prenatal" OR "pregnant" OR "antenatal" OR "fetal") AND ("children" OR "infants") AND ("lead exposure" OR "lead toxicity") AND "Bangladesh"



- Study Designs: Prospective Cohort Studies, only
- Inclusion Criteria:
 - Type: Lead exposure
 - Time of lead exposure: During fetal development
 - Setting: Bangladesh

Age outcomes are assessed: Birth to age 12

Health Outcomes: Stunting & cognitive scores



Evidence Appraisal:

Studies were independently evaluated for methodological quality by two blinded reviewers using the Scottish Intercollegiate Guidelines Network (SIGN): Cohort Studies Tool.



Identification of studies via databases and registers Records removed before screening: Duplicate records removed (n = 54) Identification Records identified from*: Records marked as ineligible by Databases (n = 483) automation tools (n = 0) Citation Searching (n=3) Records removed for other reasons Registries (n = 4) (n = 0)Records excluded** Records screened (n = 367) (n = 436) Reports not retrieved Reports sought for retrieval (n = 0)Screening (n = 69) Reports excluded: (n=62) No Bangladesh population (n = 33) Reports assessed for eligibility No Health Outcomes (n = 10) (n = 69) No Prenatal Exposure (n = 6) Mixed Metals (n=5) No lead (n=5) Childhood Exposure (n=1) Inappropriate study design (n=1) Lead was a confounding variable (n=1) Studies included in review Included (n = 7)Reports of included studies (n = 0)

RESULTS

*Consider, if feasible to do so, reporting the number of records identified from each database or register searched (rather than the total number across all databases/registers).

**If automation tools were used, indicate how many records were excluded by a human and how many were excluded by automation tools.

RESULTS

- Acceptable (+) to high quality (++) evidence^{2,4-9}
- Total N: 12,617 mothers and 8,874 infants/children^{2,4-9}
- Locations of studies:^{2,4-9}
 - Matlab (2)
 - Sirajdikhan and Pabna (5)
- Mean age at time of assessment: birth to age 5^{2,4-9}



RESULTS

Assessment Measures	Number of Studies
Mothers' urinary lead levels at delivery ⁴	Ι
Infant/child fingerstick blood ^{2,5-7}	4
Birth umbilical cord lead levels ^{2,6,8-9}	4



RESULTS

Primary Outcome Measure	Number of studies
Birth weight ^{2,4,6-7,9}	5
Birth height ^{2,4,6}	3
Infantile weight and height ⁴	I
Childhood height and weight ^{4,5}	2
Stunting ^{2,5,6}	3
Bayley Scales of Infant Development (BSID): Motor and Cognitive ^{2,7-9}	4
Head circumference ⁷⁻⁹	3
Kidney volume ⁵	I



STATISTICALLY SIGNIFICANT RESULTS

- Negative associations between blood lead concentration and BSID cognitive scores⁷
- Each one unit increase in natural log cord blood lead in presence of stunting was associated with a 2.1 unit decrease in cognitive scores²
- Associations between stunting at 4.5 years and blood lead at 14 & 30 weeks gestation⁵
- Inverse associations between prenatal lead exposure in late gestation & kidney volume in pre-school aged females⁵



CONCLUSION

- High Quality Evidence Supports:
 - Association between prenatal lead exposure and:
 - Stunting
 - Lower Cognitive Scores

Stunting exacerbates negative effects of lead



LIMITATIONS

- Inconsistent methods of measuring lead exposure and outcomes
- Recruitment from two primary cohorts
- Lack of Stratification for Confounding Variables
 - i.e. Maternal education, socioeconomic status, post rainy-season birth, maternal chewing tobacco, maternal nutrition, etc.



FUTURE RESEARCH

- Further research is needed to...
 - Measure the impact of maternal factors on prenatal lead exposure
 - Identify any further impacts that lead exposure has on the mother and child
 - Identify the age at which lead exposure, either during the development of the fetus or the infant, affects stunting and cognition the most

CLINICAL RELEVANCE

Physical Therapists in Bangladesh should...

- Be aware of potential impacts of lead exposure
- Administer cognitive and physical screening to children
- Provide community-based education on lead exposure and prevention during pregnancy







PABNA, BANGLADESH

PHOTO PERMISSION GRANTED

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Any Questions?

