

Research Article

An Interdisciplinary Approach to Predicting the Effects of Transboundary Atmospheric Transport to Northwest European Neighboring States

Natalia Belisheva*, Alla Martynova, and Roman Mikhaylov

Research Centre for Human Adaptation in the Arctic, Branch of the Federal Research Centre “Kola Science Centre of the Russian Academy of Science

ORCID

Natalia Belisheva: 0000-0002-5504-2983

Alla Martynova: 0000-0002-0701-8698

Roman Mikhaylov: 0000-0003-3744-787X

Abstract. The Kola North is the most industrial territory of the Arctic region, where enterprises are sources of sulfur dioxide (SO₂), which disperses widely not only throughout the Kola North, but also to the territories of neighboring Northwest European countries: Norway and Finland. The purpose of this study was to reveal the main sources of atmospheric SO₂ pollution in the Kola North, assess the possible contribution of SO₂ to the morbidity of respiratory diseases among children in the region, study the daily dynamics of SO₂ content, and examine the likelihood of transboundary transport to neighboring states. The pathways of SO₂ transfer throughout 2020 were revealed by using daily data about SO₂ surface mass, wind direction and speed selected from the Geographic Information System for the cities of Zapolyarny (69°24'55" N, 30°48'48" E) and Olenegorsk (68°08'35" N, 33°15'10" E). It was found that the prevalence of pneumonia in 0-14-year-old children was associated with Olenegorsk, where the maximum of SO₂ emissions was detected. The median values of SO₂ surface mass were 2.7 times higher for Olenegorsk than for Zapolyarny and exceeded the maximum permissible concentration. The probability of SO₂ transport to the territories of Norway and Finland was also estimated. This study highlights the complexity of the problem of transboundary airborne pollution transport, which requires interdisciplinary research to predict the consequences of the contamination for territories of the neighboring Northwest European countries.

Keywords: Kola North, sulfur dioxide, respiratory morbidity among children, transboundary atmospheric transport, neighboring states

Corresponding Author: Natalia
Belisheva; email:
natalybelisheva@mail.ru

Published: 11 February 2022

Publishing services provided by
Knowledge E

© Natalia Belisheva et al. This article is distributed under the terms of the [Creative Commons Attribution License](#), which permits unrestricted use and redistribution provided that the original author and source are credited.

Selection and Peer-review under the responsibility of the KarRC Conference Committee.

 OPEN ACCESS

1. Introduction

The Kola North is the most industrial territory of the Arctic region. The peculiarity of the territorial distribution of the industries of the Kola North is in the high density of enterprises and cities in the central part of the Kola Peninsula: in the south-to-north direction with branches to the west (Kandalaksha), to the east (Olenegorsk with the

Lovozero industrial hub), and to the north-west near Murmansk (Pechengsky industrial site). All large city-forming enterprises are located in these districts and they create conditions for the wide distribution of pollutants not only throughout the Kola North, but also to territories of neighboring Northwest European countries: Norway and Finland. Sulfur Dioxide (SO₂) is one of the most widespread atmospheric pollutants on the Kola Peninsula. Sulfur dioxide and particles emitted from the combustion of Sulphur-containing fuels are major air pollutants in urban areas, and SO₂ is the principal pollutant associated with the acid deposition problem. Sulphur dioxide and particulate matter are constituents of a complex pollutant mixture, and are often analyzed together, since their effects are virtually indistinguishable [1].

Air pollution has long been linked with illnesses, particularly with respiratory symptoms and diseases [2, 3, 4, 5]. “If we don’t take urgent action on air pollution, we will never come close to achieving sustainable development.” says Dr Tedros Adhanom Ghebreyesus, Director-General of WHO. WHO recognizes that air pollution is a critical risk factor for noncommunicable diseases (NCDs), causing an estimated one-quarter (24%) of all adult deaths from heart disease, 25% from stroke, 43% from chronic obstructive pulmonary disease, and 29% from lung cancer. Air pollution does not recognize borders. Improving air quality demands sustained and coordinated government action at all levels. Countries need to work together on solutions for sustainable transport, more efficient and renewable energy production and use and waste management [6]. Some studies have found associations between outdoor air pollution by SO₂ and different measures of respiratory health in children [3, 7, 8, 9, 10, 11].

The Committee of the Environmental and Occupational Health Assembly of the American Thoracic Society concludes that a long-range goal of air pollution research is to understand the contribution of air pollution to total respiratory, cardiovascular, and allergy morbidity and mortality. These purposes are achieved through multidisciplinary research including epidemiologic studies, controlled human studies, and animal and *in vitro* studies [10]. Compilation of information on emissions inventory, land cover and urban morphology, meteorology, and atmospheric chemistry enables air quality models to be developed and to be used as a tool for forecasting potential air pollution episodes, as well as evaluating past episodes and the efficiency of control measures. The air quality forecast can alert the public in advance about critical pollution levels, helping to prevent exposure to harmful pollutants [4].

The purpose of this study is to reveal the main sources of atmospheric SO₂ pollution in the Kola North, to assess territorial respiratory morbidity patterns in children, to study the daily dynamics of the SO₂ Surface Mass in the selected areas and the likelihood of

trans-boundary transport to the neighboring states. This study shows the complexity of the problem of trans-boundary transport of atmospheric pollution, the solution of which requires interdisciplinary research to predict the consequences of air contamination in the neighboring states of North-West Europe.

2. Material and methods

The cities of Zapolyarny (69°24'55" N, 30°48'48 " E) and Olenegorsk (68°08'35" N, 33°15'10" E) were selected as the sources of atmospheric contamination in the Kola North to be studied. Daily values of sulfur dioxide (SO₂) Surface Mass (µg/m³), Wind direction (in degrees) and Wind speed (km/h) at 0, 6, 12, 18 hours (Local Time) throughout 2020 for these two cities were selected from GIS (<https://earth.nullschool.net/ru/>). For the GIS site, data of Air chemistry and Aerosol are taken from GEOS-5 (Goddard Earth Observing System) GMAO / NASA CAMS (Copernicus Atmosphere Monitoring System) Copernicus / European Commission + ECMWF and Weather Data are taken from GFS (Global Forecast System) EMC / NCEP / NWS / NOAA.

The Statistical Book "Population Morbidity in the Murmansk region 2006-2010", as well as data provided by the Murmansk Regional Medical Information and Analytical Center for 2011-2016 were used to selected the incidences of respiratory diseases among 0-14-year-old children. Average annual data for the period from 2006 to 2016 were used to evaluate incidences among children. The data were statistically processed by using the STATISTICA 10 software package; graphing was carried out using the graphic editor ORIGIN. The differences between data were considered significant at $p < 0.05$.

3. Results and discussion

3.1. The main sources of atmospheric pollution with sulfur dioxide on the Kola Peninsula

The Monchegorsk - Kolskaya Mining and Metallurgical Company (Kola MMC OJSC Combine "Severonikel"); the Pechenga region - Kola MMC (OJSC MMC "Pechenganikel"); the Apatity, the Kirovsk cities - OJSC "Apatite", the Apatity Thermal Power Plant (TPP); the Kovdor - OJSC Kovdorsky Mining and Processing Company (GOK); the Olenegorsk



Figure 1: The main sources of environmental pollution, including Zapolyarny and Olenegorsk, in the Murmansk Region (from [13]).

- OJSC "Oikon"; the Murmansk - OJSC "Murmanskaya TPP; the Lovozersky District - OJSC "Sevredmet" are the main sources of pollutant emissions into the atmosphere in the Kola North [12], Figure 1.

The Kola MMC is a mining and metallurgical enterprise for the extraction of sulfide copper-nickel ores and the production of non-ferrous metals. The production sites of the Kola MMC are located in three settlements of the Murmansk Region: Nikel and Zapolyarny in the north-west of the region, in close proximity to the Russian-Norwegian border, and Monchegorsk, situated at Lake Imandra.

The main sources of SO_2 emissions to the atmosphere are enterprises in the area of operation of the Kola MMC and in Olenegorsk area (according to selected data from <https://earth.nullschool.net/>), although there are many other enterprises in the Kola North that pollute the atmosphere.

Our studies show that in certain hours and days of the year SO_2 emissions in Zapolyarny and Olenegorsk areas exceed the daily average maximum permissible concentration (MPC), Figure 2.

Figure 2 shows examples of the daily average MPC of SO_2 emissions exceeded not only in Zapolyarny and Olenegorsk areas, but also in the atmosphere over Norway (Figure 2.1) and Finland (Figure 2.2) as a result of trans-boundary transfers. E.g., SO_2

concentration on December 27, 2020 at 12:00 in Norwegian territory exceeded the daily average MPC 3.8 times, and on December 26, 2020 at 15:00 in Finnish territory – 1.9 times. Figures 2.3 and 2.4 show SO₂ surface mass at Zapolyarny and Olenegorsk exceeding daily average MPC 3.5 and by 12.6 times, respectively (MPC is 50 µg/m³ as 24-h mean).

A comparison of daily SO₂ surface mass values for sites with geographical coordinates corresponding to Zapolyarny and Olenegorsk with Severonikel (67°54'59" N, 32°50'42" E) and Monchegorsk (67°56'22" N, 32°52'26" E), where maximum SO₂ air pollution could be expected, showed the maximum SO₂ surface mass to be associated with the Olenegorsk area.

3.2. The incidence of diseases associated with air pollution among children

Ambient air pollution has been associated with respiratory diseases in children, in particular, with asthma and pneumonia. Asthma is one of a major childhood disease, with substantial morbidity [17,18]. The prevalence of childhood asthma increased markedly in Europe in the second half of the 20th century. An example is the published studies of asthma in schoolchildren in Norway, which have reported an increase in prevalence from 0.4% in 1948 to 12.3% in the mid-1990s and 20% in a study performed in 2004, although the most recent study, in 2008, reported a retreat to 17.6% [19].

Pneumonia kills more children than any other infectious disease, claiming the lives of over 800,000 children under five every year, or around 2,200 every day. This includes over 153,000 newborns [20].

Sulfur dioxide can be a potential trigger for asthma exacerbation. It is known that asthmatics are sensitive to the effects of SO₂; however, the basis of this higher sensitivity remains incompletely understood [21]. It was also shown that exposure to NO₂ and SO₂ was associated with an increase in the incidence of pneumonia in Korea [5]. In addition, in two Central European cities with relatively high levels of air pollution (Prague, Czech Republic and Poznan, Poland), small-area based indicators of long-term outdoor winter concentrations of SO₂ were associated with wheezing / whistling and with asthma diagnosed by a doctor [3].

To identify the possible contribution of the SO₂ content in the air to respiratory diseases in children in the Murmansk Region (MR), a comparative analysis of the prevalence of asthma and pneumonia in children in areas with different SO₂ surface mass values was carried out (Figure 3).

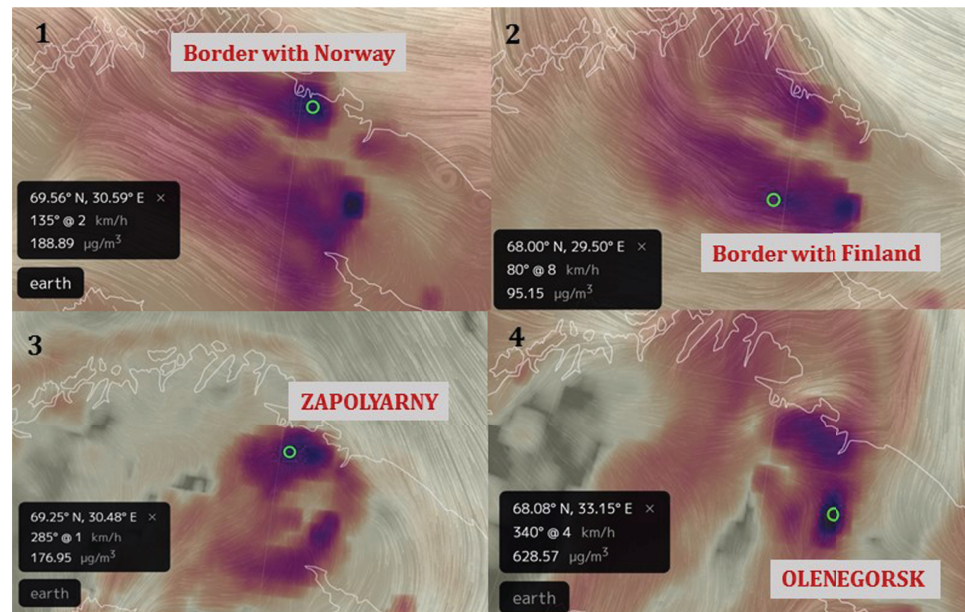


Figure 2: Examples of exceeding the maximum permissible concentration of sulfur dioxide at the earth's surface on the border with Norway 2020-12-27 at 12:00 (1), on the border with Finland 2020-12-26 at 15:00 (2), in Zapolyarny 2020 -05-20 at 06:00, and in Olenegorsk 2021-01-03 at 08:00, local time. The circles indicate the geographical coordinates of the sites.

Figure 3 shows the prevalence of asthma in MR (22.68 ± 0.43) is higher (1.9-fold) than in the Russian Federation (RF) on average (11.75 ± 0.26). In addition, the prevalence of asthma in children 0-14 years old in Murmansk, Apatity, and the Lovozersky District not only exceeds the corresponding indicators in RF (29.20 ± 0.71 ; 24.55 ± 0.50 ; 30.44 ± 1.80 , respectively), but is also higher than in Monchegorsk (22.17 ± 0.52) and in MR on the whole.

The prevalence of pneumonia is also higher in MR (10.16 ± 0.32) than Russia's average (8.76 ± 0.16). However, the distribution of the highest incidence of pneumonia over the territory is different from that of asthma: the highest incidence of pneumonia was established for Olenegorsk (21 ± 3.23), which is 2.5 times higher than in RF and 2.1 times higher than in MR. A high prevalence of pneumonia was also found for the Tersky, Pechenga, and Lovozersky Districts (19.2 ± 3.6 ; 17.21 ± 2.03 ; 13.18 ± 1.84 , respectively).

The spatial distribution of asthma prevalence most likely indicates the poly-etiology of this disease in the Murmansk Region and the indirect role of SO₂ in the incidence of asthma. In particular, short- and long-term pollution with fine particulate matter (PM, particles <2.5 mm in aerodynamic diameter [PM_{2.5}]) and exposure to higher average coarse PM levels are associated with increased asthma prevalence and morbidity [22]. Accordingly, it is exactly where dust particles are the most common (Murmansk, Apatity, Lovozersky District) [2] that we see a higher incidence of asthma.

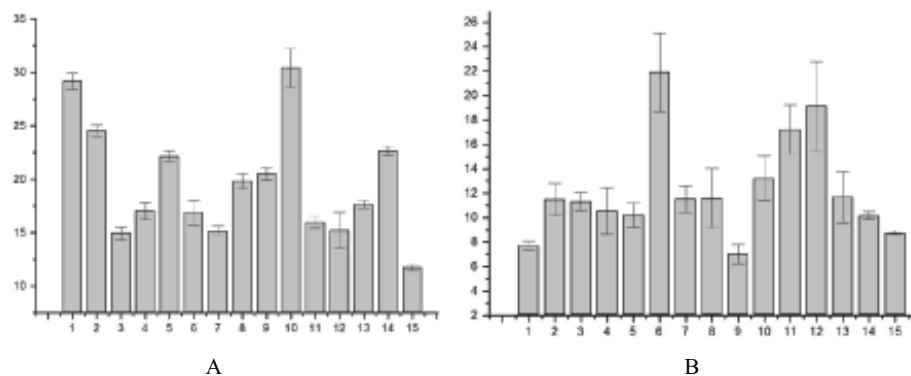


Figure 3: Prevalence of asthma (A) and pneumonia (B) in children 0-14 years old in certain territories of the Murmansk Region. On the abscissa: Murmansk (1), Apatity (2), Kandalaksha District (3), Kirovsk (4), Monchegorsk (5), Olenegorsk (6), ZATO Severomorsk (7), Kovdorsky District (8), Kolsky District (9), Lovozerky District (10), Pechenga District (11), Tersky District (12), Polyarnye Zori (13), Murmansk Region as a whole (14), Russian Federation (15). On the ordinate axis: average annual values of the diseases' prevalence per thousand members of the corresponding population group in the period 2006-2016 ($M \pm m$).

A different situation is demonstrated by the data on pneumonia prevalence. The highest pneumonia prevalence rates in children are associated with the territories where the greatest sources of SO_2 emissions are located: in Olenegorsk and in the Pechenga District. Other reasons for the high incidence of pneumonia are possible in the Tersky District. It was shown that, with the exception of CO , all pollutants (PM_{10} , $\text{PM}_{2.5}$, SO_2 , NO_2 , O_3) were consistently associated with pediatric pneumonia hospitalization [15] and components of PM , such as elemental carbon, organic carbon, nitrates and copper, iron, potassium, nickel, silicon, vanadium, and zinc have been linked to early-life pneumonia [23].

Thus, it can be concluded that SO_2 contributes to the incidence of pneumonia and may act as a co-factor in the asthma incidence in children in the Kola North.

3.3. Dependence of sulfur dioxide surface mass in areas with sources of its emission on wind direction and speed

It has been shown that the incidence of respiratory diseases depends on the content of SO_2 in the surface atmosphere [4] and on the duration of exposure [15]. Therefore, it is necessary to assess its daily content and variations depending on the direction and speed of the wind in order to predict the local and trans-boundary effects of SO_2 transport. Daily monitoring of SO_2 surface mass at 0, 6, 12, 18 hours throughout 2020 showed significant variations in hourly, daily, and monthly values of SO_2 surface mass depending on the geographic coordinates of the site, on the wind direction and its speed.

Figures 4 and 5 demonstrate the daily average variations in SO₂ surface mass in different months of 2020 in Zapolyarny and Olenegorsk.

As seen in Figure 4, the highest daily average values of SO₂ surface mass in Zapolyarny were detected in January, and the lowest values were detected in February and July. Moreover, SO₂ surface mass can significantly exceed the maximum permissible concentration (MPC) [14] in certain hours of the day: for example, 198.6 µg/m³ at 12:00 on January 12, 2020 (with daily average values of 79.81±39.85); 115.31; 161.03; 67.5 µg/m³ at 0, 6, and 12 hours on January 25, 2020 (with daily average values of 93.66±28.35). This means the risk of asthmatic attacks and other complications in the respiratory and other bodily systems increases in such days.

Comparison of daily variations in SO₂ surface mass in Zapolyarny and Olenegorsk (Figure 5) shows the daily average values of SO₂ in Olenegorsk surface air corresponded to the MPC only on 121 days of 2020 (33% of days in the year).

The obtained results indicate the residents of the Olenegorsk area are systematically exposed to the adverse effects of SO₂, which leads to the risk increase of the immunity weakening and to increase in the likelihood of respiratory diseases. The highest prevalence of pneumonia (Figure 3,B) in children at the Olenegorsk illustrates this assumption. And the toxic effect of SO₂ can further aggravate the health problems of the population of the Kola North, especially children, under decrease in the effectiveness of immune reactions in the inhabitants of the Arctic [24].

Since the SO₂ content in the surface atmosphere depends on the wind direction and speed, it is necessary to know the prevailing wind directions and speeds in a given territory in order to predict the most unfavorable periods for public health.

Percentile analysis showed (Table 1) the median values (50 percentiles) of SO₂ content in the surface air (20.91 µg/m³) in Zapolyarny did not exceed the MPC value. At the same time, the median SO₂ values (57.38 µg/m³) in Olenegorsk did exceed the MPC values. The SO₂ content rose significantly above the MPC (95.19 µg/m³) on 25% of days of the year in Olenegorsk, while exceedance of the MPC (52.36 µg/m³) in Zapolyarny was typical only for 10% of days. It should be noted the median values of SO₂ content in Olenegorsk were 2.7 times higher than in Zapolyarny, as well as above the 75, 90, 97.5 percentile values (by 3-; 2.6-; 2.3-fold, respectively).

Comparison of the prevailing wind directions in Zapolyarny and Olenegorsk shows the south-easterly wind direction with a predominance of the southern component (200°, or in the windrose network: SSE) is characteristic for these cities during six months (50 percentiles) in the year. Winds of the north-westerly (320° and 350° or NW and NNW directions) and north-easterly (5-15° and 40-60° or NNE and ENE) directions are typical

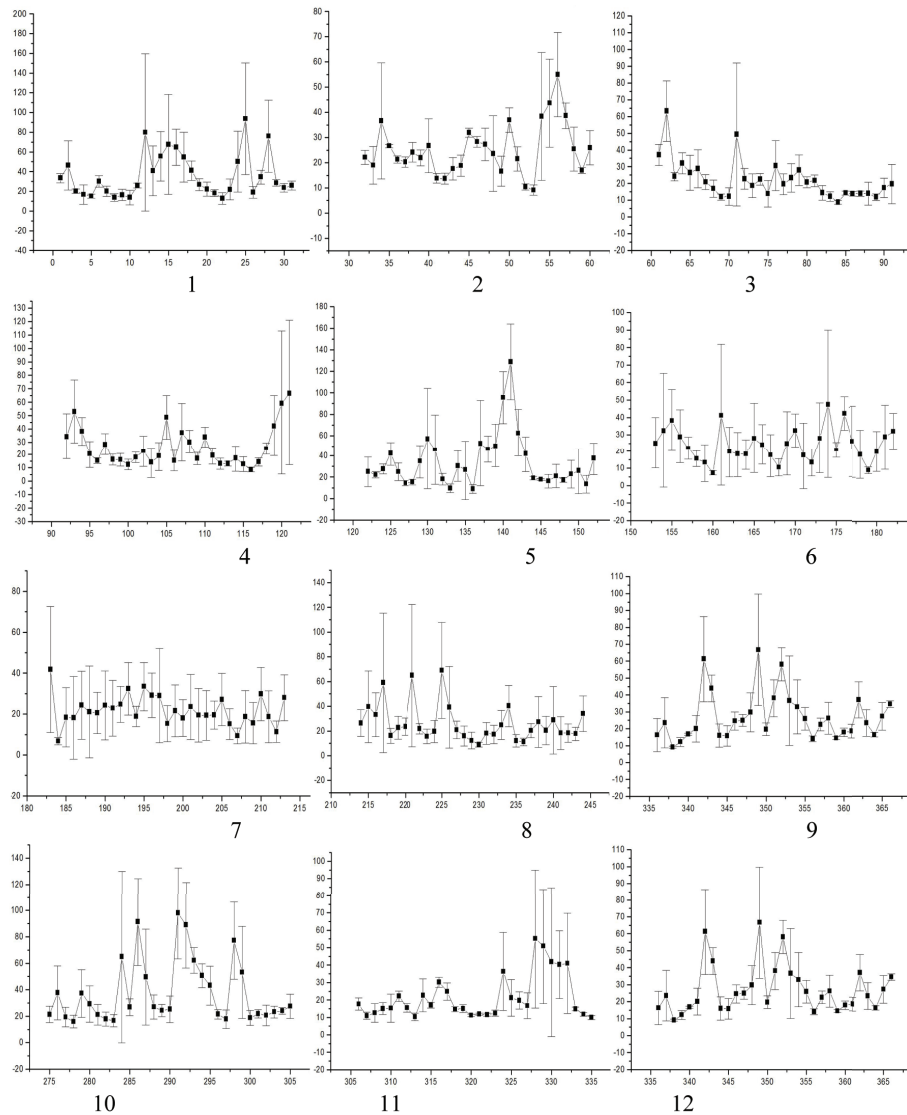


Figure 4: Dynamics of daily average values of sulfur dioxide (SO_2) surface mass in Zapolyarny area ($69^{\circ}24'55''$ N, $30^{\circ}48'48''$ E) in different months of 2020: January (1), February (2) March (3) April (4) May (5) June (6) July (7) August (8) September (9) October (10) November (11) December (12). The abscissa shows the days of the year. Y-axis - SO_2 Surface Mass ($M \pm \sigma$), $\mu\text{g}/\text{m}^3$.

in 10% cases (90 percentiles) in Zapolyarny and in Olenegovsk. The probability of SO_2 transport to Norway increases (corresponds to 25 percentiles) when the wind blows from the SSE direction (150° , 165°). The probability of SO_2 transfer to Finland increases (10 percentiles) when the wind blows from the NE and ENE directions.

Matrix correlation analysis was carried out to identify the links between daily SO_2 surface mass, wind direction and speed. The analysis revealed significant ($p < 0.05$) correlation coefficients between SO_2 values and wind direction ($r = -0.29$), between SO_2 and wind speed ($r = -0.58$), between wind direction and speed ($r = 0.22$) for Zapolyarny. For Olenegorsk, significant ($p < 0.05$) correlation coefficients were also revealed between SO_2 values and wind speed ($r = -0.59$), between wind direction

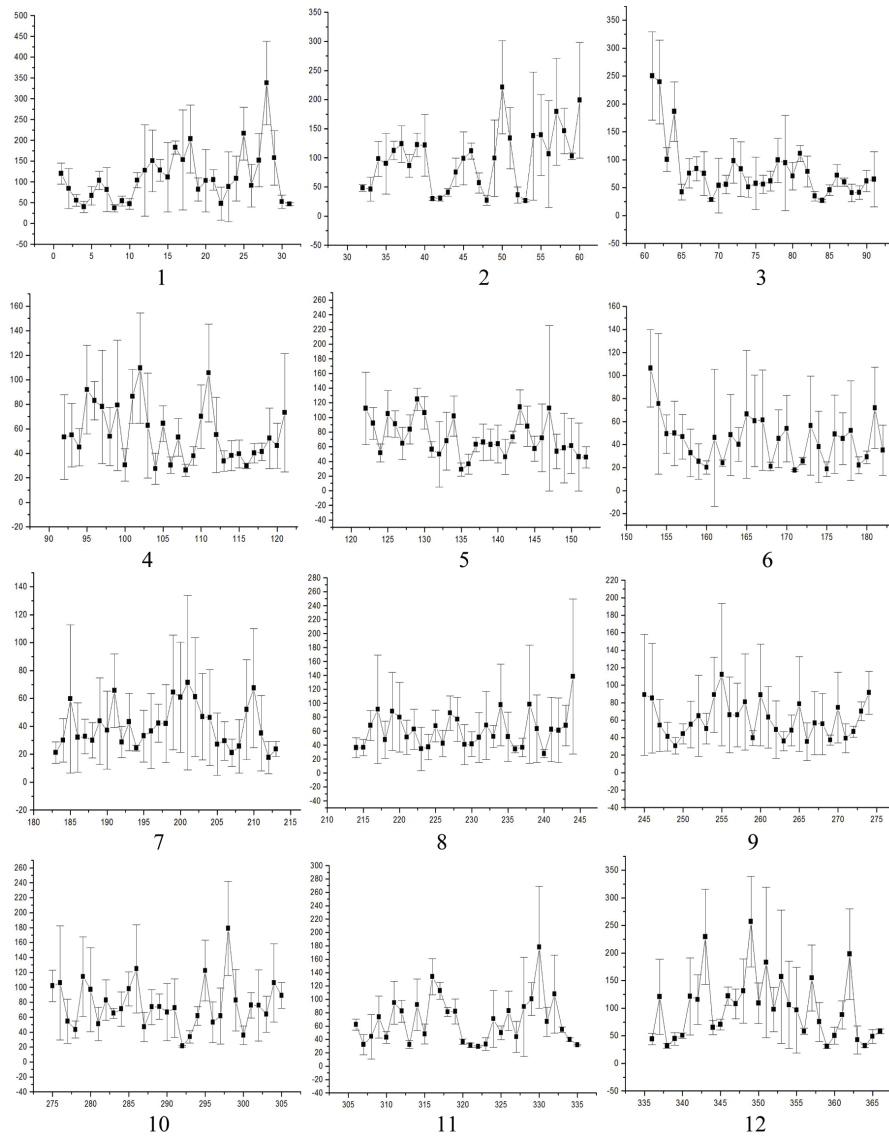


Figure 5: Dynamics of daily average values of sulfur dioxide (SO_2) surface mass in Olenegorsk area ($68^{\circ}08'35''$ N, $33^{\circ}15'10''$ E) in different months of 2020: January (1) February (2) March (3) April (4) May (5) June (6) July (7) August (8) September (9) October (10) November (11) December (12). The abscissa shows the days of the year. Y-axis - SO_2 surface mass ($M \pm \sigma$), $\mu\text{g}/\text{m}^3$.

and speed ($r = 0.23$), but not between SO_2 and wind direction ($r = 0.10$; $p > 0.05$). These correlations between SO_2 air pollution and wind parameters reveal certain trends, which can form the basis for long-term prediction of unfavorable days of the year for the cities of Zapolyarny and Olenegorsk, as well as for trans-boundary SO_2 transport to Norway and Finland.

Our results demonstrate that Olenegorsk city territory is more critical in terms of SO_2 emissions than Zapolyarny despite the higher wind speed in the Olenegorsk area (wind speed, in accordance with all percentile values, is twice higher in Olenegorsk than in Zapolyarny).

TABLE 1: Percentiles for daily parameters: SO₂ (sulfur dioxide surface mass, µg/m³), wind° (wind direction in degrees), wind (wind speed at the indicated altitude, km/h), recorded at 0, 6, 12, 18 hours during 2020 at geographic coordinates corresponding to the location of Zapolyarny (1) and of Olenegorsk (2).

Parameters	percentiles						
	2.5	10	25	50	75	90	97.5
SO2_1	6.92	9.55	13.69	20.91	31.38	52.36	95.30
SO2_2	16.07	24.05	33.28	57.38	95.19	137.36	225.40
Wind°_1	15.00	60.00	150.00	200.00	260.00	320.00	350.00
Wind°_2	5.00	40.00	165.00	200.00	245.00	320.00	350.00
Wind_1	0.80	1.60	2.60	4.10	6.20	8.30	10.30
Wind_2	2.00	4.00	6.00	10.00	15.00	21.00	28.00

4. Conclusions

In this research we found the main sources of atmospheric SO₂ pollution in the Kola North, which include the cities of Zapolyarny (69°24'55" N, 30°48'48" E) and Olenegorsk (68°08'35" N, 33°15'10" E), the latter being more critical in terms of SO₂ emissions. We show that in certain days SO₂ emissions exceed the daily average maximum permissible concentration (MPC) of SO₂ surface mass not only in these two cities but also in Norwegian and Finnish as a result of trans-boundary transport from the Kola North.

Analysis for possible correlation between atmospheric pollution with SO₂ and respiratory disease morbidity in the Kola North revealed a clear association of pneumonia in children with the main sources of SO₂ emissions. The highest prevalence of pneumonia was registered in Olenegorsk, where it was 2.5 times higher than the Russian average and 2.1 times higher than in the Murmansk Region as a whole. The distribution of asthma prevalence over the territory points to a probable poly-etiology of this disease in the Murmansk Region and the indirect role of SO₂ in the incidence of asthma. Dust particles may contribute to the asthma prevalence in children in the Kola North. Where dust particles are the most common (Murmansk, Apatity, Lovozersky District), we see a higher incidence of asthma in children.

Daily monitoring of the SO₂ surface mass at 0, 6, 12, 18 hours throughout 2020 year showed significant variations in hourly, daily, and monthly values of SO₂ content in the surface air depending on the geographic coordinates of the site, wind direction and its speed. We estimated the probability of SO₂ transport to Norway and Finland by using the percentile analysis. The probability of SO₂ transport to Norway proved to increase when the wind blew from the SSE direction. When the wind blows from the NE and ENE directions, the probability of SO₂ transfer to Finland increases.

This study highlights the complexity of the problem of trans-boundary air-borne pollution transport, the solution of which requires interdisciplinary research to predict the consequences of air contamination in the territories of the neighboring Northwest European states. Such research should include epidemiologic studies, controlled human studies, animal and in vitro studies, studies of the land cover and urban morphology, meteorology and atmospheric chemistry. Multidisciplinary research would enable air quality models to be developed and used as a tool for forecasting potential air pollution episodes, as well as evaluating past episodes and the efficiency of control measures.

Funding

The study was funded from the federal budget through state assignment 0226-2019-0064, state registration number AAAA-A19-119121190076-6.

Acknowledgements

The authors would like to thank Viktor Nikolaev, Cand. Sci. (Phys. and Math.), Associate Professor, Head of the Department of Physics, Biology and Engineering Technologies of the Apatity Branch of Murmansk Arctic State University, for valuable advice on finding sources of information about environmental pollution.

Conflict of Interest

No conflict of interest

References

- [1] Larssen S. and Hagen LO. Air quality in Europe, 1993 a Pilot Report. November 1996. Under the supervision of G.Kielland, Project Manager, European Environment Agency. © EEA, Copenhagen, 1996.
- [2] Frank-Kamenetskaya OV, Vlasov DYu, Panova EG, Lessovaia SN, editors. Lecture notes in Earth System Sciences. Switzerland: Springer Nature; 2020.
- [3] Pikhart H, Bobak M, Gorynski P et al. Outdoor sulphur dioxide and respiratory symptoms in Czech and Polish school children: A small-area study SAVIAH. *International Archives of Occupational and Environmental Health*. 2001;74:574 -578.

- [4] Molina LT, Velasco E, Retama A, Zavala M. Experience from integrated air quality management in the Mexico City Metropolitan Area and Singapore. *Atmosphere*. 2019;10:512-512.
- [5] Ji W, Park YR, Kim HR et al. Prolonged effect of air pollution on pneumonia: A nationwide cohort study. *European Respiratory Journal*. 2017;50: OA467; DOI: 10.1183/1393003.congress-2017.OA467.
- [6] World Health Organization. 9 out of 10 people breathe polluted air but more countries are taking action. WHO. 2 May 2018. News release. Geneva.
- [7] Available from: <https://www.who.int/news/item/02-05-2018-9-out-of-10-people-worldwide-breathe-polluted-air-but-more-countries-are-taking-action>.
- [8] Peters A, Goldstein IF, Beyer U, Franke K et al. Acute health effects of exposure to high levels of air pollution in Eastern Europe. *The American Journal of Epidemiology*. 1996;144:570-581.
- [9] Braun-Fahrlander C, Vuille JC, Sennhauser FH et al. Respiratory health and long-term exposure to air pollutants in Swiss schoolchildren *American Journal of Respiratory and Critical Care Medicine*. 1997;155:1042-1049.
- [10] Dockery DW, Pope CA, Xu X et al. An association between air pollution and mortality in six US cities. *The New England Journal of Medicine*. 1993;329:1753-1759.
- [11] Committee of the Environmental and Occupational Health Assembly of the American Thoracic Society. Health effects of outdoor air pollution. *American Journal of Respiratory and Critical Care Medicine*. 1996;153(1):3–50.
- [12] World Health Organization. Regional Office for Europe & European Centre for Environment and Health. Effects of air pollution on children's health and development: a review of the evidence. Copenhagen : WHO Regional Office for Europe. <https://apps.who.int/iris/handle/10665/107652>
- [13] State of the environment report. 2000. Committee of National Resources of the Murmansk region. Murmansk. Available from: https://gov-murman.ru/upload/iblock/49e/2000_.pdf
- [14] Skandfer M, Siurin S, Talykova L et al. How occupational health is assessed in mine workers in Murmansk Oblast. *International Journal of Circumpolar Health*. 2012;71:1847-1849.
- [15] On the approval of sanitary rules and norms SanPiN 1.2.3685-21. Hygienic standards and requirements for ensuring the safety and (or) harmlessness of environmental factors for humans. Sanitary and Epidemiological Rules and Regulations dated January 28, 2021 no. 1.2.3685-21 Resolution of the Chief State Sanitary Doctor of the Russian Federation of January 28, 2021 no. 2.

- [16] Nhung NTT, Amini H, Schindler C et al. Short-term association between ambient air pollution and pneumonia in children: A systematic review and meta-analysis of time-series and case-crossover studies. *Environmental Pollution*. 2017;230:1000-1008.
- [17] McAllister DA, Liu L, Shi T et al. Global, regional, and national estimates of pneumonia morbidity and mortality in children younger than 5 years between 2000 and 2015: A systematic analysis. *The Lancet Global Health*. 2019;7:47–57.
- [18] Asher MI, Keil U, Anderson HR et al. International study of asthma and allergies in childhood (ISAAC): Rationale and methods. *European Respiratory Journal*. 1995;8: 483-49.
- [19] Anderson HR, Bland JM, Patel S, Peckham C. The natural history of asthma in childhood. *Journal Epidemiology and Community Health*. 1986;40:121–129.
- [20] Childhood-asthma. Part C –Major respiratory Diseases. Chapter 11: 126-137. European Respiratory Society. European lung white book. Gibson J, Loddenkemper R, Sibille Y, Lundbäck B, editors. Available from: <https://www.erswhitebook.org/chapters/childhood-asthma/epidemiology/>
- [21] UNICEF. Pneumonia. April 2021. Available from: <https://data.unicef.org/topic/child-health/pneumonia/>
- [22] Reno A, Brooks E, Ameredes B. Mechanisms of heightened airway sensitivity and responses to inhaled SO₂ in asthmatics. *Environmental Health Insights*. 2015; 9 (S1):13-25
- [23] Keet CA, Keller JP, Peng RD. Long-term coarse particulate matter exposure is associated with asthma among children in Medicaid. *American Journal of Respiratory Critical Care Medicine*. 2018;197(6):737–746.
- [24] Ostro B, Roth L, Malig B, Marty M. The effects of fine particle components on respiratory hospital admissions in children. *Environmental Health Perspectives*. 2009;117(3):475-480.
- [25] Balashova SN, Samodova AV, Dobrodeeva LK, Belisheva NK. Hematological reactions in the inhabitants of the Arctic on a polar night and a polar day. *Immunity, Inflammation and Disease*. 2020;8:415–422.