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by Ayudhia Rachmawati

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The Risk of Sulfur Dioxide Exposure to The Incidence of Hypertension on Street Sweepers In Samarinda City (Tropical Rain-Forest Area)

Ayudhia Rachmawati16, Erri Larene Safika2, Syamsir Syamsir1

Department of Environmental Health, Faculty of Public Health, Mulawarman University, Samarinda, Indonesia

² Department of Nutrition, Faculty of Public Health, Mulawarman University, Samarinda, Indonesia

*Corresponding author: rachmawatiayudhia@fkm.unmul.ac.id

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ABSTRAF

Latar belakang: Emisi gas buang kendaraan bermotor merupakan sumber pencemaran udara yang paling signifikan, terutama di wilayah perkotaan. SO₂ merupakan salah satu polutan yang dihasilkan oleh emisi gas buang kendaraan bermotor. Kota Samarinda terkenal dengan pesatnya peningkatan jumlah kendaraan pribadi, terutama kendaraan berbahan bakar fosil, yang berpotensi meningkatkan konsentrasi SO₂ dan dapat berdampak pada kesehatan. Penelitian ini bertujuan untuk mengetahui risiko paparan konsentrasi SO₂ pada penyapu jalan dan hubungan antara kejadian hipertensi dengan asupan SO₂.

Metode: Penelitian ini menggunakan pendekatan penilaian risiko kesehatan lingkungan. Pendekatan EHRA akan memperkirakan risiko yang diterima oleh penyapu jalan akibat paparan SO₂ di jalan raya Kota Samarinda. Populasi dalam penelitian ini mencakup seluruh pekerja penyapu jalan yang bertugas pada empat lokasi jalan raya yang telah ditentukan. Sampel penelitian berjumlah 61 orang dan diperoleh melalui teknik total sampling. Teknik pengukuran konsentrasi SO₂ menggunakan impinger dengan analisis spektrofotometer. Tekanan darah diukur secara real-time. Uji chi-square digunakan untuk menunjukkan perbedaan proporsi antara variabel asupan dan hinertensi.

 $\dot{\text{Hasil:}}$ Konsentrasi SO2 masih di bawah batas baku mutu lingkungan yang dipersyaratkan (< 150 μg/Nm³) yakni 18,18 μg/Nm³. Hasil uji chi-square menunjukkan tidak ada perbedaan proporsi kejadian hipertensi dengan asupan SO2 (nilai p = 1.000). Akan tetapi, pekerja dengan asupan SO2 >0,0012 mg/kg/hari memiliki peluang lebih besar untuk mengalami hipertensi dibandingkan penyapu jalan dengan asupan >0,0012 mg/kg/hari (OR = 1,111).

Simpulan: Kualitas udara di jalan raya Kota Samarinda masih tergolong aman dan sehat, terutama pada parameter sulfur dioksida. Petugas penyapu jalan tidak berisiko mengalami gangguan kesehatan khususnya kejadian hipertensi.

Kata kunci: SO₂; EHRA; Transportasi; Penyapu Jalan; Hipertensi

ABSTRACT

Title: The Risk of Sulfur Dioxide Exposure to The Incidence of Hypertension on Street Sweepers In Samarinda City (Tropical Rain-Forest Area)

Background: Vehicle exhaust emissions are the most significant source of air pollution, especially in urban areas. SO2 is one of the pollutants produced by car exhaust emissions. Samarinda City is famous for the rapidly increasing number of private vehicles, especially fossil fuel vehicles, which have the potential to increase SO2 concentrations and can have an impact on health. This study aims to determine the risk of exposure to SO2 concentrations among street sweepers and the relationship between the incidence of hypertension and SO2 intake. Method: This study used an environmental health risk assessment approach. The EHRA approach will estimate the risk received by street sweepers due to exposure to SO2 on Samarinda City highways. This study's population consists of all street sweepers working at four specified roadway location. The sample, comprising 61 participants, was obtained using a to tal sampling technique. The SO2 concentration measurement technique uses an impinger with spectrophotometer analysis. Blood pressure is measured in real-time. The chi-square test was used to show differences in proportions between intake and hypertension variables.

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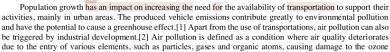


Result: The SO₂ concentration is still below the required environmental quality standard limit (< 150 μ g/Nm³) measured at 18.18 μ g/Nm³. The results of the chi-square test showed no difference in the proportion of hypertension incidents with SO₂ intake (p-value = 1,000). However, workers with SO₂ intake >0.0012 mg/kg/day have a greater chance of developing hypertension than street sweepers with an intake of >0.0012 mg/kg/day (OR = 1.111).

Conclusion: The air quality in Samarinda City's highways is categorized as still safe and healthy, especially in the sulfur dioxide parameter. Street sweepers are not at risk of experiencing health problems,

Keywords: SO2; EHRA; Transportation; Street Sweepers; Hypertention

BACKGROUND



layer and even global warming. Both natural and human activities can cause air pollution [3]

Some studies explained that the transportation sector dominates air pollution, especially in metropolitan

areas.[4] According to the emissions inventory of the Ministry of Environment and Forestry of the Republic of Indonesia, the transportation sector contributes 70%-80% of the total pollutant load in metropolitan areas.[5] The continued use of fossil raw materials as vehicle fuel, the increasing number of vehicles due to increasingly rapid population growth, office activities, a centralized economy which has an impact on urban traffic patterns, and other factors all contribute to air pollution from vehicle exhaust emissions.[6] Lead (Pb), Suspended Particulate Matter (SPM), Nitrogen oxides (NO₃), Sulfur oxides (SO₃), Hydrocarbons (HC), Carbon monoxide (CO), and Photochemical oxides (O₃) are among the pollutants inhaled from exhaust fumes car.[6,7]

Sulfur dioxide is a colorless gas with a strong odor that is easily soluble in water [8] The health effects of this SO₂ molecule include irritation of the eyes, mucous membranes, skin, and respiratory tract. Even at low concentrations, inhaling SO₂ can cause chronic lung disorders as asthma and emphysema.[9] Essentially, the association between air pollution and the frequency of respiratory tract illnesses is very close. In a study conducted in Changsha, China, it was discovered that short-term exposure to SO₂ at low concentrations increased the daily risk of ischemic heart disease and increased the chance of death in women.[10] Apart from having an impact on respiratory disorders, environmental ecology studies have proven that PM₁₀, PM_{2.5}, and SO₂ can increase cardiovascular risk. This is based on atherosclerosis and an increase in blood pressure due to exposure to the surrounding environment.[11]

Based on data from the Samarinda City Environmental Service, the concentration of sulfur dioxide (SO₂) in 2022 will still be below the required ambient air quality level (150 μ g/Nm³). However, Central Bureau of Statistics in the city estimated that the East Kalimantan Province region will have a population gap in 2022. The district area which covered around 98.91% of the province is inhabited by 53.85% of the total population. Meanwhile, the other 45.99% of the population lives in urban areas which area is only 1.09%. This creates population density in urban areas, such as Samarinda City which is the city with the second highest population density in East Kalimantan Province, namely 1,160 people per km². Due to increasing traffic in mobility modes and an everincreasing population, there is a high potential for air pollution. People who live on the side of highways, have high intensity and mobility on highways, and work near highways such as street sweepers, are all at risk of experiencing health problems, especially air pollution, as a result.[12] Therefore, this study focuses on characterizing the risk of SO₂ in street sweepers in Samarinda City which can be used as an example of the risk of poor air quality in urban areas, on public health or certain communities, which is associated with the incidence of hypertension cases. This study also explain the characteristics of tropical rainforest areas that influence the air quality in Samarinda City.

MATERIAL AND METHODS

This research used a quantitative approach to environmental health risk assessment (EHRA), which includes hazard identification, dose-response assessment, exposure assessment, and risk characterization.[13,14] The EHRA approach will estimate the risk received by street sweepers as a result of SO₂ exposure on Samarinda City highways. This research was carried out at four highway points in Samarinda City, precisely located at the intersection of Lembuswana (Point 1), Jalan Juanda (Point 2), Jalan MT Haryono (Point 3), and Jalan Gadjah Mada (Point 4), Samarinda City, East Kalimantan. The distance between each point: Point 1 to Point 2 is 1 km, Point 2 to point 3 is 2.2 km, and point 3 to point 4 is 3.6 km. The air quality measurement point was chosen at the city center intersection because this location is an area with high levels of congestion, dense traffic activity, and

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has great potential for air pollution, so it is representative for describing air quality conditions in urban areas. This research was carried out from August to November 2023.

Total sampling was used, yet the provision of the research inclusion criteria was determined. The subjects of this study were workers selected based on inclusion criteria who had worked as street sweepers for at least one year, as measured through interviews using a questionnaire sheet. Meanwhile, for the variable incidence of hypertension in street sweepers, real-time blood pressure was measured with a digital tensimeter. Blood pressure was measured during break times, following a 10-minute resting period to ensure physiological stabilization. It was measured twice (one repetition), ensuring that the respondent remained still and did not speak during the measurement.

The ambient air sampling locations chosen in sample selection was based on the following criteria: there were no compounds that produce SO_2 , had has a dense vehicle intensity, and were is not blocked by buildings and trees. The SO_2 concentration measurement technique used an impinger with spectrophotometer analysis, which measured for 1 hour at each location point. The ambient air was measured in the morning (9 to10 am) and afternoon (1 to 2 pm). The collected data were then be substituted and analyzed to obtain intake values and risk levels (RQ) using the following equation[13,15,16]

$$Ink = \frac{C \times R \times tE \times fE \times Dt}{Wb \times tavg} \dots (1)$$

Information:

Ink: SO₂ Intake (mg/kg/day)

C: SO₂ concentration (mg/m³)

R: Inhalation Rate (0.83 m³/hour)

te: Time of Exposure (hours/day)

fe: Frequency of Exposure (hours/year)

Dt: Duration of Exposure (real time, 30 years for lifetime years)

Wb: Body weight (kg)

tavg: Average time period (Dt x 365 days/year for non-carcinogenic substances) (days)

To determine the amount of risk (RQ) a formula equation is used, as follows: :

$$RQ = \frac{I_{nk}}{Rfc} \dots \dots \dots (2)$$

Information:

RQ: Risk Quotient

Ink: SO2 Intake (mg/kg/day)

Rfc: SO₂ reference concentration (mg/kg/day) (default : 2.6E-2 EPA/NAAQS 1990)

By calculating the risk quotient formula, the calculation results are obtained in the form of risk characteristics $(RQ \ge 1)$ and $RQ \le 1$). If $RQ \ge 1$, it can be concluded that the SO_2 concentration in the ambient air of Samarinda City is at risk of causing health problems (non-carcinogenie), and vice versa. The chi-square test was used to show whether there is a difference in proportion between intake and hypertension variables (p-value). The OR (odds ratio) value is used to determine the degree or strength of the relationship between the variables studied.

RESULTS AND DISCUSSION

Sulfur Dioxide (SO₂) Concentration and Meteorological Factors

The measurement time is based on consideration of the operational work schedule of street sweepers. The description of the SO₂ concentration in the ambient air in the highway area of Samarinda City can be seen in Table 1 as follows:

Table 1 Description of SO₂ Concentration in Samarinda City

			Concer	ntration	Air Quality
No.	Location	Time	μg/Nm ³	mg/m ³⁽¹⁾	Standard (µg/Nm³) ⁽²⁾
1.	Point 1	Morning	7.22	0.007	
		Aftemoon	36.41	0.036	150
2	Doint 2	Morning	9.03	0.009	150
۷.	Point 2	Aftemoon	26.17	0.026	

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2	Daint 2	Morning	18.18	0.018
3.	Point 3	Aftemoon	15.93	0.016
4.	Point 4	Morning	18.67	0.019
		Afternoon	12.53	0.013

⁽¹⁾ SO₂ concentration is converted to mg/m³ to calculate intake of SO₂

Based on Table 1, the measured concentration of SO_2 at all sampling points remain below the environmental quality standards of $150~\mu g/Nm^3$, as stipulated in Government Regulation No. 22/2021 concerning Environmental Management and Protection. Apart from measuring SO_2 concentration, meteorological factors were also measured, including temperature, humidity, and wind speed. Regional factors also influence SO_2 concentration levels, where East Kalimantan is included in the tropical rain forest. These conditions cause East Kalimantan to have relatively high air humidity, and rainfall, where the differences between seasons are not very visible. Apart from that, tropical rain forest has a humid climate or weather with high levels of evaporation[17] The distribution of SO_2 concentrations and meteorological factors can be seen in Table 2 as follows:

Table 2 Description of SO₂ Concentration and Meteorological Factors

Variable	Mean	Median	Min-Maks	SD	Kolmogorov- Smirnov
SO ₂ Concentration					
(mg/m ³)	0.018	0.017	0.007 - 0.036	0.009	0.200
Meteorological					
Factors					
Temperature (°C)	35.93	35.75	33.40 - 38.60	1.65	0.200
Humidity (%)	48.44	46.25	39.0 - 58.0	6.47	0.183
Wind Speed (m/s)	1.25	1.23	0.75 - 1,69	0.32	0.200

Based on Table 2, the average SO₂ concentration measurement results were 0.018 mg/m³, with the lowest concentration being 0.007 mg/m³ and the highest being 0.036 mg/m³. The results of meteorological measurements showed that the average temperature was 35.93°C, the average humidity was 48.44%, and the average wind speed was 1.25 m/s. SO₂ concentration can be influenced by humidity, wind speed, and temperature. The temperature factor can influence SO₂ concentrations much more effectively in the summer than in other seasons[18] Meteorological conditions (temperature, relative humidity, and wind speed) also influence the concentration of air pollutants in China[19] Additionally, analysis results in Erzurum, Turkey, show that higher TSP and SO₂ concentrations are strongly associated with cooler temperatures, lower wind speeds, higher pressure systems, lower precipitation, and higher relative humidity[20] However, there is research that shows a negative correlation between SO₂ concentration and meteorological factors consisting of temperature, rainfall, and wind speed[21]

Spatial analysis

In determining the distribution of SO₂ pollutant concentrations around the measuring station, interpolation analysis using the Inverse Distance Weighted (IDW) method was used. The SO₂ distribution pattern was detected based on the SO₂ concentration values from the four SO₂ measuring stations. With the help of the ArcGIS Map application, the SO₂ distribution pattern is displayed in Figure 1.

Figure 1(a) shows that the highest concentration of SO₂ pollutant in the morning is around the measuring station on Jalan Gadjah Mada and Jalan MT Haryono. Ambient air measurements in the morning (Central Indonesia Time, WITA) were conducted at the following times: Point-1 at 09:40, Point-2 at 11:10, Point-3 at 09:20, and Point-4 at 10:50. The SO₂ concentration value around the measuring station was 16.37 µg/Nm³ to 18.65 µg/Nm³. In contrast to the measuring stations on Jalan Gadjah Mada and Jalan MT Haryono, the SO₂ concentration values around the measuring stations on Jalan Juanda and the Lembuswana intersection in the morning were in the range of 7.23 – 9.51 µg/Nm³. The value was quite low when compared to the delivery stations on Jalan Gadjah Mada and Jalan MT Haryono.

Figure 1 (b) shows that the highest concentrations of SO₂ pollutant during afternoon are around Jalan Juanda. measuring station and the Lembuswana intersection. Ambient air measurements in the afternoon (Central Indonesia Time, WITA) were conducted at the following times: Point-1 at 14:15, Point-2 at 13:00, Point-3 at 14:18, and Point-4 at 13:15. The SO₂ concentration around the Lembuswana intersection had a higher value compared to the other three measurement stations. The value was in the range of $31.62\,\mu g/Nm^3$ to $36.39\,\mu g/Nm^3$. Meanwhile, at the measurement station on Jalan MT Haryono, the concentration value was in the range of $22.09-26.66\,\mu g/Nm^3$.

⁽²⁾ Quality standards refer to Republic of Indonesia Government Regulation no. 22/ 2021 concerning Environmental Administration and Management.

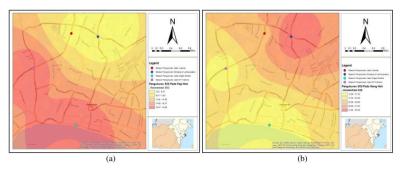


Figure 1. Distribution of Sulfur Dioxide Concentrations in Four Locations in Samarinda City: (a) morning measurements (b) afternoon measurements.

Apart from that, measurement stations on Jalan Gadjah Mada and Jalan MT Haryono during the afternoon were in the range of $12.56-17.32~\mu g/Nm^3$. The distribution of pollutant concentrations is also influenced by traffic density, where the higher the level of traffic density, the higher the pollutant concentration. The measurement conditions in areas near rivers will also have an impact on the level of pollutant concentration which is influenced by wind speed[22] The difference in SO₂ concentration between morning and afternoon might be caused by the weather conditions at the time of measurement. Other studies have stated that there was no significant difference in SO₂ concentration compared to the measurement time as the SO₂ concentration was much higher in the morning[23] This also occurred in the study we conducted, where higher concentrations were detected at two time points in the morning.

Anthropometrics and Activity Patterns

Before estimating the street sweeper's exposure intake, anthropometric calculations in the form of body weight and activity patterns in the form of exposure time, exposure frequency, and exposure duration must be completed. Data related to anthropometry and activity patterns are factors that will influence the intake of street sweepers who work in areas that have a high potential for air pollution from modes of transportation. The anthropometric distribution and activity patterns of street sweepers can be seen in Table 3 as follows:

Table 3 Anthropometric Distribution and Activity Patterns of Street Sweepers in Samarinda City

Variable	Mean	Median	Modus	Min-Maks	SD	Kolmogorov- Smirnov
Anthropometric						
Body Weight	64.80	63.40	67.80	40.3 - 94.1	11.09	0.065
Activity Patterns						
Time of Exposure	5.52	5	5	3 - 7	0.89	< 0.001
Frequency of Exp.	363.03	365	365	317 - 365	8.25	< 0.001
Duration of Exp.	10.06	10	10	1.5 - 30	6.16	< 0.001

Based on Table 3, the average body weight of street sweepers in Samarinda City was 64.80 kg, the average time of exposure was 6 hours with an exposure frequency of 363 days/year, and the average duration of work as a street sweeper was 10 years. Body weight is a variable used in calculating pollutant intake values because body weight in the ratio of exposure values. The greater the body weight of each individual, the smaller the intake value received. This condition will also affect the respiratory intake rate of each individual, where body weight will affect the vital capacity of the lungs, which is related to the elasticity of the chest cavity walls[24] The amount of exposure to particles or gases is influenced by various variables, including exposure time or working time. The longer the working time, the more gas is inhaled into the worker's body. The long-term impact that can occur is the greater potential risk of health problems occurring.[25]

Intake and Risk Characteristics

Intake of SO₂ for street sweepers who were respondents in this study was obtained based on SO₂ intake calculations based on a formula determined. Based on Table 4, it was found that 61 street sweeping workers in

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Samarinda City had an average SO₂ intake of 0.0012 mg/kg/day with the lowest intake being 0.0003 mg/kg/day and the highest being 0.0029 mg/kg/day. Previous studies have shown that 74.5% of ceramic workers in Prered, Indonesia may experience respiratory disease symptoms when SO₂ intake exceeds 0.0126 mg/kg/day. [26] Meanwhile, in this study the average SO₂ intake was 0.0012 mg/kg/day, which is still low enough to cause health problems. However, further examination efforts are still needed to determine the specifics of the health problems experienced.

Table 4 Distribution of SO2 Intake and risk characteristics of Street Sweepers in Samarinda City

Variabel	n	Mean	Median	Min-Maks	SD	Kolmogorov -Smirnov
Intake SO ₂ (mg/kg/day)	61	0.0012	0.0011	0.0003 - 0.0029	0.00065	0.059
Risk Characteristics (RQ)	61	0.0524	0.0420	0.012-0.400	0.0517	<0.001

Based on Table 4, the results of calculating the level of risk characteristics in street sweepers with an average of 0.0524 (RQ<1) and categorized as this condition illustrate that all street sweeping workers who were respondents are included in the group not at risk or safe from Sulfur dioxide (SO₂) exposure. Although the level of SO₂ risk characteristics of road sweepers is still considerable safe, the RQ lifespan varies from 5 to 30 years and requires further calculations. In that period, the risk of SO₂ exposure of road sweepers increases and can lead to health problems.

Relationship Between Intake of SO2 and Hypertention Among Street Sweepers

Table 5 shows an analysis of the relationship between SO_2 intake and the incidence of hypertension in street sweeper workers, taking anthropometric characteristics (body weight) and activity patterns (length of exposure, frequency of exposure, and duration of exposure). The results of the analysis of the relationship between SO_2 intake and the incidence of hypertension. It was found that 18 (69.2%) street sweeping workers with SO_2 intake >0.0012 mg/kg/day experienced hypertension. Meanwhile, there were 25 (71.4%) workers with an SO_2 intake of ≤ 0.0012 mg/kg/day who experienced hypertension. The results of the chi-square test obtained a value of p = 1.000, so it can be concluded that there was no difference in the proportion of hypertension incidents with SO_2 intake. The results of the analysis obtained a value of OR = 1.111 (OR > 1), which means that workers with SO_2 intake >0.0012 mg/kg/day have a chance of developing hypertension 1.111 times greater than street sweeper workers with an intake of ≤ 0.0012 mg/kg/day.

Table 5. Distribution of Street Sweepers According to SO2 Intake and Hypertension Incidence

CO. Intoles	Hypertension Incidence			– Total				
SO ₂ Intake	No		Yes		Total		OR (95%CI)	p-value
(mg/kg/day)	n	%	n	%	n	%		
>0.0012	8	30.8	18	69.2	26	100.0	1 111	
≤0.0012	10	28.6	25	71.4	35	100.0	- 1.111 - (0.4-3.37)	1.000
Total	18	29.5	43	70.5	61	100.0	(0.4-3.37)	

Based on the analysis of the relationship between SO_2 intake and the incidence of hypertension, it was found that there was no relationship between SO_2 pollutant and the incidence of hypertension in street sweeper workers in Samarinda City. This is in line with an ecological study conducted in East Java, which stated that there was no relationship between SO_2 and NO_2 on the number of hypertension cases in short-term exposure[27] Meanwhile, a cohort study stated that an increase in SO_2 concentration of $10~\mu\text{g/m}^2$ was associated with a 76% higher risk of hypertension (hazard ratio: 1.76; 95% CI: 1.163 -1.189)[28] The high incidence of hypertension in workers is possibly due to other factors. Previous research shows that there was a relationship between the incidence of hypertension and smoking habits in terms of smoking age, duration of smoking and type of cigarette[29] Apart from that, excessive intake of saturated fatty acids and trans fatty acids as well as high consumption of salt and sugar can trigger hypertension[30]

CONCLUSION

The research concluded that the concentration of Sulfur dioxide (SO₂) is still below the ambient air quality standard (<150 μ g/m³) in the ambient air of Samarinda City, East Kalimantan. The average exposure time for workers is 5 hours/day; The frequency of exposure is 365 days and the duration of exposure is 10 years.

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Meanwhile, the average body weight of a street sweeper is 64.8 kg. Meanwhile, the average SO₂ intake of street sweepers in Samarinda City is 0.0012 mg/kg/day with an average of 0.0524 (RQ≤1). So it can be concluded that street sweepers are still in a safe condition (not at risk) from exposure to SO₂ in Samarinda City. Apart from that, this study stated that there was no relationship between the incidence of hypertension in street sweepers and sulfur dioxide intake. However, higher intake levels have the potential to cause hypertension.

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